(b)(1)
(b)(3)

~~S E C R E T~~
~~SECURITY INFORMATION~~

DUTY STATUS REPORT

NAME: [redacted] STATION: [redacted]

Period from: 3 February 1952 through 1 March 1952.

I certify that during the above period the individual named was on duty on all regular work days, except for periods of annual and sick leave as noted below. (Indicate "None" if no leave was taken):

Date	Hrs. Annual Lv.	Hrs. Sick Lv.	Initials
NONE			

Quarters(Check One)

X Occupied gov't-owned quarters
___ Occupied temporary lodgings
___ Occupied permanent quarters and Form 33-22 has been furnished Headquarters or is attached hereto.

Dependency(Check One)

X Single without dependents at post
___ Single with dependents at post
___ Married without dependents at post
___ Married with dependents at post

During the above period the individual named remained at his post on all work days, except for the following periods of temporary duty travel. During all absences from his post, the individual continued to maintain and pay for quarters at his post, except as otherwise indicated under Remarks below:

Date of Departure from Post	Points Visited	Date of Return to Post
NONE		

Remarks - Overtime worked and claimed:

0800-1200 1300-1700 22 Feb. — 8hrs H/P

1800-2400 11-19, 25-29 Feb. Night Differential — 60 hrs N/D

0800-1200 1300-1700 1800-2400 9, 10, 23, and 24 Feb. Mar. — 56 hrs O/T

Signed: [redacted]

Any Excess overtime was performed in accordance with VOCO due to heavy workload and shortage of personnel.

The foregoing statements are complete and true to the best of my knowledge and belief and are made for the purpose of substantiating or causing payments to the individual of salary, allowances, leave, and post differential.

Signed: _____
CHIEF [redacted]

APPROVED FOR RELEASE
DATE: 28-May-2010

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~~SECURITY INFORMATION~~