

## Division

[illegible]

*Not listed with Department of Defense*

**DATES OF PASSING AND REVISION OF DEPLIS.**

Infantry	STORYLINE	GUERRILLA	MARKSMAN	FIELD	GUERRILLA (P.M.A. only)
Qualification	Date	Date	Date	Date	Date
1st	10/2/42	10/2/42	10/2/42	10/2/42	10/2/42
2nd	10/2/42	10/2/42	10/2/42	10/2/42	10/2/42
3rd	10/2/42	10/2/42	10/2/42	10/2/42	10/2/42
4th	10/2/42	10/2/42	10/2/42	10/2/42	10/2/42

**MINIMUM, GRADE, ETC.**

Date Received: \_\_\_\_\_ Nature of Decoration: \_\_\_\_\_

WOUNDS AND HOWE, SPECIAL SERVICES, ETC., ETC.
Date: _____ Particulars: _____

**SERVICES PERFORMED**

**FOURTH SERVICE ALLOWED**

In what Service	Period	Authority	Date	Character
	Year, Day			

**ALLOVANCE**

School Certificate	Class	Date	Granted (as per plan)	Accepted (as per plan)	Granted (as per plan)	Accepted (as per plan)
	1st	10/2/42				
	2nd					
	3rd					

Able to Swim: *10/2/42*

When Tested: *10/2/42*

Where: \_\_\_\_\_

**SERVICES PERFORMED**

Tested for	Date	From	To	Nature of Employment

*10/2/42 WSI (4 yrs)  
9/10/42 WSI (5 yrs)*

*10/2/42*