

Bussell

Last name

Sumner

First name

L. Roy

Middle name

ASN *17149413*

Co. *B*

Date *Sept. 9, 44*

is authorized to report to Watkins Memorial Hospital for medical attention.

Signature

J. B. Purck (C. B.)

Clinic Hours: Monday through Friday 8 a.m. to 12 noon and 2-5 p.m.
Saturday 8 a.m. to 12 noon.

For attention to emergencies outside these hours call 890.

Arrange to come to the hospital in your free periods.

In line of duty: Yes.....; No.....

Disposition.....