

File RST

~~SECRET~~
(When Filled In)

PROJECT PROGRESS REPORT		PERIOD COVERED	
		FROM	THRU
1. REPORTING AGENCY LAC		2. NAME OF CONTACT [REDACTED]	3. TELEPHONE NO.
4. PROGRAM TITLE Autopklot Program		25X1A5a1	
5. STATUS OF PROGRAM			
PROGRAM		TESTING	
PLANNING	ACTIVE	PLANNING	ACTIVE
		SUSPENDED	CANCELLED
7. OBJECTIVE OF TESTS Improve A/P installation to obtain more consistent operation.			
8. PRIORITY	9. DATE PROGRAM INITIATED	10. DATE TESTING INITIATED	11. DATE OF ESTIMATED TEST COMPLETION
12. OPERATING TIME			
TEST ARTICLE	TOTAL TEST HOURS OR RUNS ROR	HOURS OR RUNS THIS PERIOD	TOTAL HOURS OR RUNS TO DATE
13. COMMENTS All parties concerned should be available for a meeting the week of 12 October 1959.			