NEW LIMITATION CHANGE

TO
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In response to a request from the Combat Service Support Group, LTC Harper visited the 4th Infantry Division, on 22 April 1968, to discuss various aspects of logistical, medical, and chaplain functions.

2. The following persons were contacted:

   COL Abernathy - CO, 4th Inf Div Support Command
   LTC Grant      - XO, 4th Inf Div Support Command
   LTC Heiden     - G4, 4th Inf Div
   LTC Zone       - Surgeon, 4th Inf Div
   LTC Cotton     - Chaplain, 4th Inf Div

3. The following areas of interest were discussed:

   a. The DA * r. of Inquiry on the Army Logistics System (Brown Board), considered that the lack of explicit, comprehensive and detailed doctrine has led to misconception and misunderstanding as to the roles played by the division G4, and the division support command commander. Is reorganization necessary? (USACDCSA)

   b. Should all army divisions have an organic aero-medical evacuation capability? (USACDCMSA)

   c. Determine the type of operational control of division chaplain personnel by the division chaplain. (USACDCCA)

4. In response to paragraph 3a above, the Commanding Officer, Division Support Command, and Division G4, gave the following information:

   a. The Commanding Officer, DISCOM, considers that current doctrine which establishes the DISCOM/G4 relationship is preferable to either of the two proposals outlined in the CSSG fact sheet. The Executive Officer stated that the concept of G4 being the planner and DISCOM performing the operating functions is working very well in the 4th Infantry Division. In regard to DISCOM organization: the commander believes the TOE should provide the DISCOM with the capability of operating a division ammunition supply point (ASP).
b. Response from the Division G4: The Division G4 stated that current doctrine and organization is adequate for operations in Vietnam. The G4 believes that reorganization under alternate two of the CSSG fact sheet may lead to parochialism towards the support command by the G4 staff element. The G4 stressed, however, that under the current concept the G4 must operate through the DISCOM staff and not transgress on the command prerogatives of the support commander.

5. In response to paragraph 3b above, the division surgeon stated that he believes there is no requirement for organic aero-medical helicopters in divisions. Further, under certain circumstances he could see where this capability could be a waste of available resources e.g., division in reserve, long periods of time without enemy contact or very light contact. The surgeon based the above statement on the excellent direct support being received by the division and emphasized that if the quality or quantity of support changed, his opinion may also change.

6. The division chaplain provided the following information in response to the area of interest in paragraph 3c above. Chaplains within the 4th Infantry Division are utilized where needed, without regard to battalion assignments. Chaplains are considered as available on an area coverage basis with each brigade containing a chaplain pool. The chaplain further stated that this procedure has worked with excellent results in the division.

The following additional items of interest were provided by the chaplain:

   a. The division chaplains are equipped with portable tape recorders that have been purchased through the chaplains fund. The recorders are used to provide music for hymns in areas where organs are not available. The division chaplain believes that these recorders should be a part of the TOE equipment issued to chaplains.

   b. The new organ being received by the division has several deficiencies. The major problems are the raspy tone and high pitch of the organ.

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