

# COMPANY ~~RESTRICTED~~ MORNING REPORT

ENDING  
2400

3  
(DAY)

Feb  
(MONTH)

1945  
(YEAR)

STATION Cadier 1 mi NW VK 6050 Nord de Guerre Zone

ORGANIZATION Co A

110 Med Bn

MD

(CO DET ETC)

(PATENT UNIT)

(ARM OR SERVICE)

SERIAL NUMBER

NAME

GRADE

CODE

No Change

## RECORD OF EVENTS

Map used Liege sheet 9

| OFFICER<br>STRENGTH       | FLD O & CAPT |      | 1ST LT |      | 2D LT |      | WO   |      | FLT O |      |
|---------------------------|--------------|------|--------|------|-------|------|------|------|-------|------|
|                           | PRES         | ABST | PPTS   | ABST | PRES  | ABST | PRES | ABST | PRES  | ABST |
| ASSIGNED                  | 3            |      | 1      |      | 1     |      |      |      |       |      |
| ATTACHED                  |              |      |        |      |       |      |      |      |       |      |
| UNASSIGNED                |              |      |        |      |       |      |      |      |       |      |
| ATTACHED FR<br>OTHER ORGN |              |      |        |      |       |      |      |      |       |      |
| TOTAL                     | 3            |      | 1      |      | 1     |      |      |      |       |      |

| AVN CADET<br>& ENLISTED<br>STRENGTH | AVIATION CADETS |        | ENLISTED MEN        |                         |        |                       |
|-------------------------------------|-----------------|--------|---------------------|-------------------------|--------|-----------------------|
|                                     | PRESENT         | ABSENT | PRESENT<br>FOR DUTY | PRESENT<br>NOT FOR DUTY | ABSENT | PRESENT<br>AND ABSENT |
| ASSIGNED                            |                 |        | 90                  |                         |        | 90                    |
| ATTACHED                            |                 |        |                     |                         |        |                       |
| UNASSIGNED                          |                 |        |                     |                         |        |                       |
| ATTACHED FR<br>OTHER ORGN           |                 |        |                     |                         |        |                       |
| TOTAL                               |                 |        | 90                  |                         |        | 90                    |

|                                 |     |                                        |             |                                     |       |         |
|---------------------------------|-----|----------------------------------------|-------------|-------------------------------------|-------|---------|
| R<br>A<br>T<br>I<br>O<br>N<br>S | I   | ESTIMATED NUMBER OF                    | DAY OF WEEK | NUMBER                              |       |         |
|                                 |     | RATIONS REQUIRED FOR                   | DATE        |                                     |       |         |
| I                               | II  | MESS ATTENDANCE FOR DAY OF THIS REPORT |             |                                     | TOTAL | AVERAGE |
|                                 |     | BREAKFAST 95 DINNER 95 SUPPER 95       | 285         | 95                                  |       |         |
| N                               | III | MEN AUTHORIZED TO<br>MESS SEPARATELY   |             | MEN ATCHD FOR RATIONS<br>O & OTHERS |       |         |
|                                 |     | MEN ATCHD TO OTHER<br>ORGN FOR RATIONS |             | NET                                 | 5     |         |
| S                               |     | MEN<br>PRESENT                         | 90          | LESS                                | 90    |         |
|                                 |     |                                        |             | PLUS                                | 5     |         |
|                                 |     |                                        |             |                                     | TOTAL | 95      |

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I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND  
THAT RATION FIGURES IN PART II REPRESENT AN ACTUAL  
COUNT AS REPORTED BY ME

SIGNATURE

RICHARD A BURKE WOJG USA 110 Med Bn

W.D. A.G.O. FORM NO. 1

(NAME)

~~RESTRICTED~~

(GRADE) (ARM OR SERVICE)

MARCH 29, 1942

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