COMPANY RESTRICTED
MORNING REPORT Morning 3400 29 (DATE) Jan (MONTH) 194 5 (YEAR)

STATION Drulingen WQ 6030 Nord ob Lorre Zone

ORGANIZATION Hq and Hq Det 110 Med Bn MD
(CO., DET., ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		
	RECORD OF EVENTS		
	Map used Saarbrucken sheet F-1		

OFFICER STRENGTH	FLD O & CAPT		1ST LT		2D LT		WO		FLT O	
	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T
ASGD	2	1	4				1			
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	2	1	4				1			

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASGD			32		1	33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			32		1	33

RATIONS

I ESTIMATED NUMBER OF RATIONS REQUIRED FOR } DAY OF WEEK ____ DATE ____ NUMBER

II MESS ATTENDANCE FOR DAY OF THIS REPORT — BREAKFAST ____ DINNER ____ SUPPER ____ TOTAL ____ ÷ 3 AVERAGE

III MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD TO OTHER ORGN FOR RATIONS ____ MEN PRESENT ____ LESS NET ____ MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ PLUS TOTAL

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I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES IN [redacted] AS REPORTED TO ME.

SIGNATURE RICHARD A. [redacted] WO/G USA 110 Med Bn

W.D., A.G.O. FORM NO. 1 JULY 1, 1943 (GRADE) RESTRICTED (GRADE) (ARM OR SERVICE)
WD COPY THRU MRU OR SCU