

COMPANY ~~RESTRICTED~~ MORNING REPORT

ENDING
2400

5
(DAY)

Jan
(MONTH)

194 5
(YEAR)

STATION Perle 5836 Luxembourg

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 Tintigny sheet 136

OFFICER STRENGTH	FLD O & CAPT		1ST LT		2D LT		WO		FLT O	
	PRES	ABST	PRES	ABST	PRES	ABST	PRES	ABST	PRES	ABST
ASSIGNED	3		4		1		1			
ATTACHED										
UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	3		4		1		1			

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASSIGNED			32			32
ATTACHED						
UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			32			32

R A T I O N S	I	ESTIMATED NUMBER OF RATIONS REQUIRED FOR	DAY OF WEEK	NUMBER
	II	MESS ATTENDANCE FOR DAY OF THIS REPORT	DATE	
	III	BREAKFAST DINNER SUPPER	TOTAL + 3	AVERAGE
		MEN AUTHORIZED TO MESS SEPARATELY	MEN ATCHD FOR RATIONS	
		MEN ATCHD TO OTHER ORGN FOR RATIONS	KEY	O & OTHERS MESSED
		MEN PRESENT	LESS	PLUS
				TOTAL

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I CERTIFY THAT THE MORNING REPORT IS CORRECT AND THAT RATIONS REQUIRED TO MEET IT REPRESENT AN ACTUAL

RICHARD A. BURKE WOJG USA 110 Med Bn

SIGNATURE

U.S. A & O FORM NO 1

(NAME)

~~RESTRICTED~~

(GRADE) (ARM OR SERVICE)

RECEIVED 22, 1942

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