

STATION Bay 9723 Nord De Guerre Zone
ORGANIZATION Btry B 161 FA Bn PA

SERIAL NUMBER **NAME** **GRADE** **CODE**

No Change

RECORD OF EVENTS

No Change in Position. Supporting 137
 Inf. Map Used: Nomeny Sheet 34/14.

OFFICER STRENGTH	FLD O & CAPT		1ST LT		2D LT		WO		FLY C	
	PRES	ABST	PRES	ABST	PRES	ABST	PRES	ABST	PRES	ABST
1000	1		2		1					
1000										
1000										
1000										
TOTAL	1		2		1					

OFFICER STRENGTH	AVIATION CADETS		ENLISTED MEN		
	PRES	ABST	PRES	ABST	PRES
1000			93		93
1000					
1000					
1000					
TOTAL			93		93

ESTIMATED NUMBER OF RATIONS REQUIRED FOR **DAY OF WEEK** **NUMBER**

MESS ATTENDANCE FOR DAY OF THIS REPORT **TOTAL** **AVERAGE**

BREAKFAST 97 **DINNER** 97 **SUPPER** 97 **291** **97**

MEN AUTHORIZED TO MESS SEPARATELY **MEN ATTCHD FOR RATIONS** **1**

MEN ATTCHD TO OTHER ORGN FOR RATIONS **1** **NET** **0 & OTHERS MESSED** **4** **TOTAL**

MEN PRESENT **93** **LESS** **1** **92** **PLUS** **5** **97**

I CERTIFY THAT THIS REPORT IS CORRECT AND THAT RATIONS
 PROVIDED IN THIS REPORT ARE CORRECT AND CORRECTED AS SHOWN.

SIGNATURE **THOMAS E THOLEN** **WOJG USA** **161 FA Bn**