

STATION **Box 9723 Nord De Guerre Zone**
 ORGANIZATION **Btry C 161 FA Bn FA**
(LD, DET, ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

RECORD OF EVENTS

**No Change in Position. Supporting 134
 Inf. Enemy shelling in area. Map Used:
 Nomeny Sheet 54/14.**

OFFICER STRENGTH	FLO OR CAPT		1ST LT		2D LT		WO		FLT O	
	PRES	ABST	PRES	ABST	PRES	ABST	PRES	ABST	PRES	ABST
ASCD	1		1		2					
ATCHD UNABD										
ATCHD PB OTHER ORGN										
TOTAL	1		1		2					

ARM CADET STRENGTH	AVIATION CADETS		ENLISTED MEN			PRESENT AND ABSENT
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	
ASCD			93			93
ATCHD UNABD						
ATCHD PB OTHER ORGN						
TOTAL			93			93

R A T I O N S	ESTIMATED NUMBER OF RATIONS REQUIRED FOR DAY OF WEEK	DATE	NUMBER	
	MESS ATTENDANCE FOR DAY OF THIS REPORT		TOTAL	AVERAGE
	BREAKFAST 97 DINNER 97 SUPPER 97		291	97
	MEN AUTHORIZED TO MESS SEPARATELY	1		
	MEN ATCHD TO OTHER ORGN FOR RATIONS	1	NET	4
S	MEN PRESENT	93	LESS	1
			92	PLUS 5
				97

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I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT FACTOR PROVIDED IS TRUE & NECESSARY FOR RECORDING AS REPORTED TO ME.

SIGNATURE **THOMAS E FOLEY** WO1G USA 161 FA Bn