

RESTRICTED

RENTAL: \$100
LONG

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INFLUENZA

STATION Granby 0 0223 Nord De Guerre Zone

ORGANIZATION Med Det

219 PA Bn

13

SERIAL NUMBER

NAME _____

GRADE

CODE

No Change

RECORD OF EVENTS

Map used: Sarbrucken Sheet No V-1

[illegible]

AIR CRAFT & ENLISTED STRENGTH	ATTACHED CABETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ARMORED			11			11
ATTACHED UNARMORED						
ATTACHED FOR OTHER DUTY						
TOTAL			11			11

R A T I O N S	I	ESTIMATED NUMBER OF RATIONS REQUIRED FOR	DAY OF WEEK	NUMBER		
			DATE			
	II	MEAL ATTENDANCE FOR DAY OF THIS REPORT			TOTAL	AVERAGE
		BREAKFAST 12	DINNER 12	SUPPER 12	36	12
	III	MEN AUTHORIZED TO MEAL SEPARATELY	MEN ATCHD FOR RATIONS		TOTAL	
		MEN ATCHD TO OTHER ORDR FOR RATIONS	MY	9 & OTHERS		
		MEN F 11	11	plus 1		
					12	

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I CERTIFY that this document contains no classified information and that its release to the public is in the national interest.

MOORE'S H COLEMAN WOJG USA 219 PA 20

Abstract

姓名: _____ **学号:** _____

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