RESTRICTED

COMPANY MORNING REPORT

26 (DAY) Jan (MONTH) 1944 5 (YEAR)

Nord De Guerre Zone

STATION Montbronn MO 6844 France

ORGANIZATION Med Det (CO., BTRY., ETC.) 219 FA Bn (PARENT UNIT) MD (ARMY OR DEPARTMENT)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

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
ASSIGNED	1									
ATTACHED										
ATTACHED FR OTHER ORGN										
TOTAL	1									

MEN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			10			10
ATTACHED						
ATTACHED FR OTHER ORGN						
TOTAL			10			10

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 FOR RATIONS O & OTHERS MEMBER ____ MEN ATEND TO OTHER ORGN FOR RATIONS ____ — NET — TOTAL

MEN PRESENT 1 LESS ____ PLUS ____

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I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THE OFFICIAL POSITION OF THE ORGANIZATION ACCURATE.

MORRIS H COLEMAN WOJG USA 219 FA Bn

SIGNATURE

U.S., A.G.O. FORM NO. 1 (RANK) (NAME AND SERVICE)

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