COMPANY RESTRICTED

MORNING REPORT

ENDING 2400 12 (DATE) Jan (MONTH) 194 5 (YEAR)

STATION Strainchamp 5244 Belgium

ORGANIZATION Hed Det 35 Div Arty HD

(CO. BAT. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

RECORD OF EVENTS

Map Reference: Bastogne Sheet 121 1/50,000

All EM atchd to Hq Btry Div Arty for rats

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
ASGD	2									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	2									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT NOT ON DUTY
ASGD			8			3
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			8			8

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 ____ AVERAGE ____

III MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS ____ MEN ATCHD TO OTHER ORGN FOR RATIONS ____ NET ____ MEN PRESENT ____ LESS ____ PLUS ____

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I CERTIFY THAT THIS MORNING REPORT IS CORRECT IN EVERY DETAIL AND THAT THE PERSONNEL OR PAGES IT MENTIONS ARE ACTUALLY ON HAND EXCEPT AS NOTED HEREIN.

SIGNATURE ____