

COMPANY ~~RESTRICTED~~

MORNING REPORT

ENDING 28  
2400

Jan

1945

DAY

MONTH

YEAR

STATION Tieffenbach W 5623 Nord de Guerre Zone

ORGANIZATION Med Det 35 Div Arty

MD

NO. OF, ETC.

PRESENT DUTY

DATE OF SERVICE

| SERIAL NUMBER | NAME      | GRADE | CODE |
|---------------|-----------|-------|------|
|               | No Change |       |      |

RECORD OF EVENTS

Map Reference: Bouxwiller Sheet 142 1/25,000

All ~~at~~ attached to Hq Btry Div Arty for rate

| OFFICER<br>STRENGTH    | FLD O & CAPT |      | 1ST LT |      | 2D LT |      | WO   |      | FLT O |      |
|------------------------|--------------|------|--------|------|-------|------|------|------|-------|------|
|                        | PRES         | ABST | PRES   | ABST | PRES  | ABST | PRES | ABST | PRES  | ABST |
| ASGD                   | 2            |      |        |      |       |      |      |      |       |      |
| ATCHD<br>UNASGD        |              |      |        |      |       |      |      |      |       |      |
| ATCHD FB<br>OTHER ORGN |              |      |        |      |       |      |      |      |       |      |
| TOTAL                  | 2            |      |        |      |       |      |      |      |       |      |

| AVN CADET<br>& ENL<br>STRENGTH | AVIATION CADETS |        | ENLISTED MEN        |                         |        |                       |
|--------------------------------|-----------------|--------|---------------------|-------------------------|--------|-----------------------|
|                                | PRESENT         | ABSENT | PRESENT<br>FOR DUTY | PRESENT<br>NOT FOR DUTY | ABSENT | PRESENT<br>AND ABSENT |
| ASGD                           |                 |        | 8                   |                         |        | 8                     |
| ATCHD<br>UNASGD                |                 |        |                     |                         |        |                       |
| ATCHD FB<br>OTHER ORGN         |                 |        |                     |                         |        |                       |
| TOTAL                          |                 |        | 8                   |                         |        | 8                     |

|   |                                        |             |         |
|---|----------------------------------------|-------------|---------|
| R | ESTIMATED NUMBER OF                    | DAY OF WEEK | NUMBER  |
|   | NATIONS REQUIRED FOR                   | DATE        |         |
| Y | MESS ATTENDANCE FOR DAY OF THIS REPORT |             | AVERAGE |
|   | BREAKFAST                              | DINNER      |         |
| O | MEN AUTHORIZED TO                      |             | TOTAL   |
|   | MESS SEPARATELY                        |             |         |
| N | MEN ATTEND TO OTHER                    |             | TOTAL   |
|   | DUTY FOR NATIONS                       |             |         |
| O | NET                                    | PLUS        | TOTAL   |
|   | LESS                                   |             |         |

PAGE 1 OF 1 PAGES

I CERTIFY THAT EACH NATIONAL REPORT IS CORRECTLY AND FULLY MADE AND  
RETURNING TO THE HEADQUARTERS OF THE DIVISION IN ACCORDANCE WITH THE INSTRUCTIONS IS AS

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DATE

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