

**RESTRICTED**

22 Aug

70-4  (TOLC)

STATION Moulon 500 yd E T17 48 Lambert Zone 2  
ORGANIZATION Btry B 127 FA Bn FA  
(CO, DET, ETC.) (PLANT PORT) (ARM OR SERVICE)

| SERIAL NUMBER | NAME | GRADE | CODE |
|---------------|------|-------|------|
|---------------|------|-------|------|

**No Change**

## RECORD OF EVENTS

Map used Montargis Sheet 10H/4

Support of 320 Combat team

| OFFICER<br>STRENGTH       | FLD O & CAPT |       | 1ST LT |       | 2D LT |       | WO   |       | FLT O |       |
|---------------------------|--------------|-------|--------|-------|-------|-------|------|-------|-------|-------|
|                           | PRES         | ASS'T | PRES   | ASS'T | PRES  | ASS'T | PRES | ASS'T | PRES  | ASS'T |
| ASSIGNED                  | 1            |       | 2      |       | 1     |       |      |       |       |       |
| ATTACHED                  |              |       |        |       |       |       |      |       |       |       |
| UNASSIGNED                |              |       |        |       |       |       |      |       |       |       |
| ATTACHED FR<br>OTHER ORGN |              |       |        |       |       |       |      |       |       |       |
| TOTAL                     | 1            |       | 2      |       | 1     |       |      |       |       |       |

| AVN CABET<br>& ENLISTED<br>STRENGTH | AVIATION CABETS |        | ENLISTED MEN        |                       |        |                       |
|-------------------------------------|-----------------|--------|---------------------|-----------------------|--------|-----------------------|
|                                     | PRESENT         | ABSENT | PRESENT<br>FOR DUTY | PRESENT<br>NOT FOR DT | ABSENT | PRESENT<br>AND ABSENT |
| ASSIGNED                            |                 |        | 101                 |                       |        | 101                   |
| ATTACHED<br>UNASSIGNED              |                 |        |                     |                       |        |                       |
| ATTACHED FR<br>OTHER ORGN           |                 |        |                     |                       |        |                       |
| TOTAL                               |                 |        | 101                 |                       |        | 101                   |

|                                 |                                     |                                          |                       |        |        |        |         |
|---------------------------------|-------------------------------------|------------------------------------------|-----------------------|--------|--------|--------|---------|
| R<br>A<br>T<br>I<br>O<br>N<br>S | I                                   | ESTIMATED NUMBER OF RATIONS REQUIRED FOR | DAY OF WEEK           |        | NUMBER |        |         |
|                                 |                                     |                                          | DATE                  |        |        |        |         |
|                                 | II                                  | MESS ATTENDANCE FOR DAY OF THIS REPORT   |                       |        |        |        |         |
|                                 |                                     | BREAKFAST                                | 100                   | DINNER | 100    | SUPPER | 100     |
|                                 |                                     |                                          |                       |        | TOTAL  | 300    | AVERAGE |
| III                             | MEN AUTHORIZED TO MESS SEPARATELY   |                                          | MEN ATCHD FOR RATIONS |        |        |        |         |
|                                 | MEN ATCHD TO OTHER ORGS FOR RATIONS |                                          | O B OTHERS NEEDED     |        |        |        |         |
|                                 | MEN PRESENT                         |                                          | 101                   | LESS   | 101    | PLUS   | 4       |
|                                 |                                     |                                          |                       |        | TOTAL  |        | 105     |

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I CERTIFY THAT THE FOREGOING IS TRUE AND CORRECT AND  
THAT NO OTHER INFORMATION IS BEING FURNISHED TO THE  
AS REQUIRED BY ME.

**SIGNATURE**  
**W.D.A.C.**

~~FILE V COUNTRY MOIG UBA--75-1-10~~