COMPANY RESTRICTED

MORNING REPORT 17 Nov 44 Zone 7

STATION Baronville 18 38 Nord de Guerre

ORGANIZATION Med Det 127 FA Bn MD

| SERIAL NUMBER | NAME | GRADE | CODE |
|---|---|---|---|
| | No Change | | |
| | RECORD OF EVENTS | | |
| | Man used Sheet 35/14 | | |
| | Gen support 137 CT | | |

All FM atchd to Hq Btry for rat

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

| AVIATION CADET & ENLISTED STRENGTH | AVIATION CADETS | | ENLISTED MEN | | | |
|---|---|---|---|---|---|---|
| | PRESENT | ABSENT | PRESENT FOR DUTY | PRESENT NOT FOR DUTY | ABSENT | PRESENT AND ABSENT |
| ASSIGNED | | | 11 | | | 11 |
| ATTACHED UNASSIGNED ATTACHED FR OTHER ORGN | | | | | | |
| TOTAL | | | 11 | | | 11 |

RATIONS

I ESTIMATED NUMBER OF RATIONS REQUIRED FOR — DAY OF WEEK ____ DATE ____ MONTH

II MEN ATTENDANCE FOR DAY OF THIS REPORT — BREAKFAST ____ DINNER ____ SUPPER ____ TOTAL ____ ÷ 3 AVERAGE

III MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD TO OTHER ORGN FOR RATIONS ____ MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ NET ____ PLUS ____ TOTAL ____ MEN PRESENT ____ LESS ____

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I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT LATEST PRECEDING TRUE IS EQUIVALENT TO NOTICE GIVEN OR DELIVERED TO ME.

SIGNATURE Paul Campbellus

WILLIAM P. CAMPBELL 2ND LIEUTENANT MC

ROBERT M. 72 1 V CAMPBELL 2ND LIEUTENANT MC