

STATION St Clair 1 1/2 MI South T52 69 Lambert Zone 1

ORGANIZATION Med Det 127 FA Bn MD

SERIAL NUMBER NAME GRADE CODE

**No Change
RECORD OF EVENTS**

Map used St 10 sheet 67/2 General
support of 35 Div

All EM stand to HQ Btry for Rat

OFFICER STRENGTH	PLD O B CAPT		1ST LT		2D LT		WO		PLD	
	PRESENT	ABSENT	PRESENT	ABSENT	PRESENT	ABSENT	PRESENT	ABSENT	PRESENT	ABSENT
ASSIGNED			1							
ATTACHED										
REASSIGNED										
ATTACHED FOR OTHER DUTY										
TOTAL			1							
AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN							
	PRESENT	ABSENT	PRESENT	ABSENT	PRESENT	ABSENT	PRESENT	ABSENT	PRESENT	ABSENT
ASSIGNED			1						11	
ATTACHED										
REASSIGNED										
ATTACHED FOR OTHER DUTY										
TOTAL			1						11	

R	ESTIMATED NUMBER OF	DAY OF WEEK	NUMBER
	RATIONS REQUIRED FOR	DATE	
A	MEN ATTENDANCE FOR DAY OF THIS REPORT		
T			TOTAL
I	BREAKFAST	DINNER	SUPPER
O	MEN AUTHORIZED TO MESS SEPARATELY		MEN ATTEND FOR RATIONS
M	MEN ATTEND TO OTHER DUTY FOR RATIONS		TOTAL
S	MEN PRESENT	LESS	PLUS

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I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND
THAT RATIONS REQUIRED AS SHOWN IN REPORT ARE CORRECT

Paul H. Campbell