

COMPANY **RESTRICTION**
MORNING REPORT **ENDING** **10** **Nov** **1944**
(DATE) (MONTH) (YEAR)

STATION **Albino 03544 Nord de Courte Zone**
 ORGANIZATION **No Co 2 Bn 187 Inf Regt** **Inf**
(UNIT) (TABLED UNIT) (TYPE OF SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
01310044	Jannan, Wilbert	AGS 1st Lt	110
Dr 1st Lt 114 dropped by report			
RECORD OF EVENTS			
MAP USED SAFETY/STANDARD GRAPH V. 1			

OFFICER STRENGTH	FLD O & CAPT		1ST LT		2D LT		WO		FLT O	
	PRES	ABST	PRES	ABST	PRES	ABST	PRES	ABST	PRES	ABST
ASSIGNED	1		2		1					
ATTACHED										
UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1		2		1					

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			125		1	126
ATTACHED						
UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			125		1	126

R A T I O N S	I	ESTIMATED NUMBER OF RATIONS REQUIRED FOR	DAY OF WEEK	NUMBER
	II	MESS ATTENDANCE FOR DAY OF THIS REPORT		
	III	MEN AUTHORIZED TO MESS SEPARATELY		
		BREAKFAST 125 DINNER 130 SUPPER 135	TOTAL 408	AVERAGE 136
		MEN ATTEND FOR RATIONS	2	
		MEN ATTEND FOR OTHER ORGN FOR RATIONS	1	
		MEN PRESENT 125 LESS 1	124	
		PLUS 12	136	

PAGE **1** OF **1** PAGES
 I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND
 THAT THE FIGURES ARE TRUE TO THE BEST OF MY KNOWLEDGE
 SIGNATURE **CARL E. DALL** **1st Lt Inf**
(NAME) (RANK OR SERVICE)
 NO COPY THIS SIDE OF PAGE