

COMPANY **RESTRICTED**
MORNING REPORT **ENDING 17 October** **4**
(DAY) (MONTH) (YEAR)

STATION **2 0523. Nord de Guerre Zone**
 ORGANIZATION **Co A 320 Inf Regt** **Inf**
(CO, BATT, ETC.) (PARENT UNIT) (TYPE OF SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	NO change		

RECORD OF EVENTS
Map used Nomeny.

OFFICER STRENGTH	FLY O & CAPT		1ST LT		2D LT		WO		FLT O	
	PRES	ABST	PRES	ABST	PRES	ABST	PRES	ABST	PRES	ABST
ASSIGNED	1		4		1					
ATTACHED										
UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1		4		1					

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASSIGNED			207			207
ATTACHED						
UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			207			207

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	BREAKFAST DINNER SUPPER MEN AUTHORIZED TO MESS SEPARATELY MEN ATCHD FOR RATIONS MEN ATCHD TO OTHER ORGN FOR RATIONS NET O & OTHERS MESSD MEN PRESENT LESS PLUS		TOTAL AVERAGE TOTAL 215

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 I CERTIFY THAT THE MORNING REPORT IS CORRECT AND THAT RATION STRENGTH IS AS REPRESENTED IN ACTUAL
EDWARD T ARMSTRONG CAPT INF
 SIGNED OFF 320 INF