

COMPANY RESTRICTED  
MORNING REPORT

ENDING  
2400

24 October

1944

(DAY)

(MONTH)

(YEAR)

STATION Vicinity of Chambrey 2 0221 Nord de Guerre

ORGANIZATION Hq Co 1st Bn 320 Inf Regt Inf

(CO DAY ETC)

(PARENT UNIT)

(ARM OR SERVICE)

SERIAL NUMBER NAME GRADE CODE

2430870 Di Pentino Amaday S 504 PFO

Slightly sk to dv

RECORD OF EVENTS

Co in defensive position

Map used NONE

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

| AVN CADET<br>& ENLISTED<br>STRENGTH | AVIATION CADETS |        | ENLISTED MEN        |                         |        |                       |
|-------------------------------------|-----------------|--------|---------------------|-------------------------|--------|-----------------------|
|                                     | PRESENT         | ABSENT | PRESENT<br>FOR DUTY | PRESENT<br>NOT FOR DUTY | ABSENT | PRESENT<br>AND ABSENT |
| ASSIGNED                            |                 |        | 117                 |                         | 5      | 122                   |
| ATTACHED<br>UNASSIGNED              |                 |        |                     |                         |        |                       |
| ATTACHED FR<br>OTHER ORGN           |                 |        |                     |                         |        |                       |
| TOTAL                               |                 |        | 117                 |                         | 5      | 122                   |

|                                 |     |                                          |        |        |                                 |                   |                       |                  |
|---------------------------------|-----|------------------------------------------|--------|--------|---------------------------------|-------------------|-----------------------|------------------|
| R<br>A<br>T<br>I<br>O<br>N<br>S | I   | ESTIMATED NUMBER OF RATIONS REQUIRED FOR |        |        | DAY OF WEEK _____<br>DATE _____ |                   | NUMBER<br>_____       |                  |
|                                 | II  | MESS ATTENDANCE FOR DAY OF THIS REPORT   |        |        |                                 |                   | TOTAL<br>_____ +<br>3 | AVERAGE<br>_____ |
|                                 |     | BREAKFAST                                | DINNER | SUPPER |                                 |                   |                       |                  |
|                                 | III | MEN AUTHORIZED TO MESS SEPARATELY        |        | 0      | MEN ATCHD FOR RATIONS           |                   | 30                    |                  |
|                                 |     | MEN ATCHD TO OTHER ORGN FOR RATIONS      |        | 6      | NET<br>_____                    | O & OTHERS MESSED | 9                     | TOTAL<br>_____   |
|                                 |     | MEN PRESENT                              |        | 117    |                                 |                   |                       |                  |
|                                 |     | LESS                                     |        | 6      | 111                             | PLUS              | 39                    | 150              |
|                                 |     |                                          |        |        |                                 |                   |                       |                  |
|                                 |     |                                          |        |        |                                 |                   |                       |                  |
|                                 |     |                                          |        |        |                                 |                   |                       |                  |

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I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES IN PART II REPRESENT AN ACTUAL COUNT AS REPORTED TO ME.

SIGNATURE GERARD T ARMSTRONG Capt Inf

W.D., A.G.O. FORM NO. 1 PERSONNEL OFFICER 320 Inf (GRADE) (ARM OR SERVICE)

MARCH 25, 1942

WD COPY THROUGH OR SO