

ENDING 24
2400 (DAY)

August

134 4
138

ORGANIZATION	Hq Co 2nd Bn 320	Inf Regt	Inf
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(CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
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No change

RECORD OF EVENTS

Map used Montargis 10 H/4

R A T I O N S	I	ESTIMATED NUMBER OF RATIONS REQUIRED FOR		DAY OF WEEK _____ DATE _____	NUMBER _____
	II	MESS ATTENDANCE FOR DAY OF THIS REPORT			
		BREAKFAST	DINNER	SUPPER	
					TOTAL + 3
					AVERAGE
III	MEN AUTHORIZED TO MESS SEPARATELY _____		MEN ATCHD FOR RATIONS 42		
	MEN ATCHD TO OTHER ORGN FOR RATIONS 2		O & OTHERS MESSED 11		TOTAL
	MEN PRESENT : 109		LESS 2		107
			PLUS 53		160

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

SIGNATURE GERARD T ARMSTRONG Capt Tne

W.D., A.S.O. FORM NO. 1 PERSONNEL OFFICER (GRADE) (ARM OR SERVICE)
MARCH 20, 1943