COMPANY RESTRICTED
MORNING REPORT

DATE 10 (DAY) May (MONTH) 44 (YEAR)

STATION Orléansville CO320 Nord de Guerra Zone

ORGANIZATION Antiaircraft Co 197 Inf Regt Inf
(REGT, BN, ETC.) (PRESENT SUBU) (BRANCH OF SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		
	RECORD OF EVENTS		
	MAP USED BARBERGOUGH SHEET 7 1		

OFFICER STRENGTH	FLD O & CADT		1ST LT		2D LT		WO		FLT O	
	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T
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 DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			150		1	151
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			150		1	151

RATIONS

I — ESTIMATED NUMBER OF RATIONS REQUIRED FOR: DAY OF WEEK ____ DATE ____ — NUMBER

II — MESS ATTENDANCE FOR DAY OF THIS REPORT: BREAKFAST 158 DINNER 158 SUPPER 158 — TOTAL 474 ÷ 3 — AVERAGE 158

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS 3
MEN ATCHD TO OTHER ORGN FOR RATIONS 1 — O & OTHERS MESSED 6
MEN PRESENT 150 — LESS 1 — NET 149 — PLUS 9 — TOTAL 158

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I CERTIFY THAT THE MORNING REPORT IS CORRECT AND THAT NOTHING HEREIN OR HERE IS STATEMENT AN ACTUAL FACT.

SIGNATURE CAPT H. COSBA 1 Lt Inf
(NAME, RANK OR GRADE)