

COMPANY RESTRICTED

MORNING REPORT

ENDING 2400 25
(DAY)

Dec
(MONTH)

194 4
(YEAR)

STATION Moulines 08157 Nord de Guerre Zone

ORGANIZATION Co B 137 Inf Regt Inf

(CO, BATT, ETC.) (PARCEL UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
3111814	Weaver, Edward A	1 Sgt	✓
MOS 585	MCO 010 Race W		
Regt & Co fr Serv Co 137 Inf Regt this sta per SO 171 Par 5 Hq 137 Inf Regt			
11049422	Robitaille, Frank	Pvt	✓
Mos 345	MCO 245 Race W		
Abgd & Jd fr Co C 137 Inf Regt this sta per SO 171 Par 3 Hq 137 Inf Regt			
38395502	Morrisse, Elmer J	Rec 4	✓
MOS 060	Race W MCO 014		
36858901	Nyman, Lyle D	Pvt	✓
MOS 745	MCO 590 Race W		
34288746	Race, Albert D	Pvt	✓
MOS 604	MCO 590 Race W		
39571476	Passaretti, Tony	Pvt	✓
MOS 521	MCO 590 Race W		
38417764	Winters, Henry S	Pvt	✓
MOS 345	MCO 345 Race W		
31260240	Wise, Louis V	Pvt	✓
MOS 668	MCO 499 Race W		

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

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

R A	I	ESTIMATED NUMBER OF RATIONS REQUIRED FOR	DAY OF WEEK	N. USER		
			DATE			
T I O N S	II	MESS ATTENDANCE FOR DAY OF THIS REPORT			TOTAL	AVERAGE
		BREAKFAST	DINNER	SUPPER		
		MEN AUTHORIZED TO MESS SEPARATELY				
N S	III	MEN ATCHD TO OTHER ORGN FOR RATIONS	NET	TOTAL		
		MEN PRESENT	LESS	PLUS		

PAGE 1 OF 2 PAGES

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

SIGNATURE

U.S. & G.S. FORM NO. 1
MARCH 25, 1943

(NAME)

(GRADE) (ARM OR SERVICE)

**COMPANY RESTRICTED
MORNING REPORT**

ENDING 2400 25 Dec 1944
(DAY) (MONTH) (YEAR)

STATION Moulines Q8157 Nord de Guerre Zone
ORGANIZATION Co B 137 Inf Regt Inf
(CO, DET, ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER NAME GRADE CODE

Above 6 EM Asgd & Jd fr Co B 137
Inf Regt this sta per SO 171 Par 3
Hq 137 Inf Regt

RECORD OF EVENTS

MAP USED SAARBRUCKEN SHEET 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			4							
ATTACHED										
UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL			4							

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DV	ABSENT	PRESENT AND ABSENT
ASSIGNED			133		2	135
ATTACHED						
UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			133		2	135

R A T I O N S

I ESTIMATED NUMBER OF RATIONS REQUIRED FOR DAY OF WEEK DATE N. MEER

II MESS ATTENDANCE FOR DAY OF THIS REPORT TOTAL + AVERAGE
BREAKFAST DINNER SUPPER 3

III MEN AUTHORIZED TO MESS SEPARATELY MEN ATCHD FOR RATIONS O & OTHERS MESSED TOTAL
MEN ATCHD TO OTHER ORGN FOR RATIONS NET PLUS
MEN PRESENT LESS PLUS

PAGE 2 OF 2 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES IN PART II REPRESENT AN ACTUAL

SIGNATURE CARYL H OSKRA 1 Lt Inf
(NAME) (GRADE, ARM OR SERVICE)