COMPANY RESTRICTED
MORNING REPORT ENDING 2400 13 (DAY) Nov (MONTH) 194 4 (YEAR)

STATION Oron 20634 Hard de Guerre Zone
ORGANIZATION Cannon Co 137 Inf Regt Inf
(CO. DEP. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		
	RECORD OF EVENTS		
	MAP USED SAARBRUCKEN SHEET V 1		

OFFICER 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		4							
ATTACHED UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1		4							

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			111		2	113
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			111		2	113

RATIONS

I ESTIMATED NUMBER OF RATIONS REQUIRED FOR { DAY OF WEEK / DATE } NUMBER

II MESS ATTENDANCE FOR DAY OF THIS REPORT
BREAKFAST 118 DINNER 118 SUPPER 118 TOTAL 354 ÷ 3 AVERAGE 118

III MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS 3
MEN ATCHD TO OTHER ORGN FOR RATIONS 1 O & OTHERS MESSED 5
MEN PRESENT 111 LESS 1 NET 110 PLUS 8 TOTAL 118

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

SIGNATURE CAPTL [illegible] 1 Lt Inf
(NAME) (GRADE) (ARM OR SERVICE)