

**COMPANY RESTRICTED  
MORNING REPORT**

ENDING 2400 30 July 1944  
(DAY) (MONTH) (YEAR)

STATION 2 KM S Gosville T5256 Lambert Zone 1  
ORGANIZATION Cannon Co 137 Inf Regt Inf  
(CO, BATT, ETC.) (TACTIC UNIT) (ARM OR SERVICE)

SERIAL NUMBER NAME GRADE CODE

No Change

**RECORD OF EVENTS**

MAP USED TORIGHT-SUR-VIRE  
SHEET 6E/4

OFFICER STRENGTH	FLD O & CRAFT		1ST LT		2ND LT		1ST		FLY G	
	PRES	ASST	PRES	ASST	PRES	ASST	PRES	ASST	PRES	ASST
ASSIGNED	<u>1</u>		<u>4</u>							
ATTACHED UNASSIGNED ATTACHED FR OTHER ORGN										
TOTAL	<u>1</u>		<u>4</u>							
AVN CADET & UNLISTED STRENGTH	AVIATION CADETS		UNLISTED MEN							
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT				
ASSIGNED			<u>112</u>			<u>112</u>				
ATTACHED UNASSIGNED ATTACHED FR OTHER ORGN										
TOTAL			<u>112</u>			<u>112</u>				

R	I	ESTIMATED NUMBER OF RATIONS REQUIRED FOR	DAY OF WEEK	NUMBER
A		DATE		
T	II	MESS ATTENDANCE FOR DAY OF THIS REPORT		TOTAL
I		BREAKFAST <u>118</u> DINNER <u>118</u> SUPPER <u>118</u>	<u>354</u>	AVERAGE <u>118</u>
O	III	MEN AUTHORIZED TO MESS SEPARATELY	MEN ATCHD FOR RATIONS	<u>3</u>
N		MEN ATCHD TO OTHER ORGN FOR RATIONS <u>1</u>	NET	<u>4</u>
S		MEN PRESENT <u>112</u> LESS <u>1</u>	<u>111</u>	PLUS <u>7</u>
				TOTAL
				<u>118</u>

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

*Caryl H. Oskea*  
SIGNATURE GARYL H. OSKEA 1 Lt Inf  
(GRADE) (ARM OR SERVICE)