

**COMPANY RESTRICTED**  
**MORNING REPORT**

ENDING  
2400

4  
(DAY)

Jan  
(MONTH)

1945  
(YEAR)

STATION Honville P5547 Belgium

ORGANIZATION Cannon Co 137 Inf Rest

Inf

(CO. DET. ETC.)

(PARENT UNIT)

(ARM OR SERVICE)

| SERIAL NUMBER | NAME | GRADE | CODE |
|---------------|------|-------|------|
|---------------|------|-------|------|

No Change

**RECORD OF EVENTS**

**MAP USED ARLON SHEET 17**

| OFFICER STRENGTH       | PLD O & CAPT |      | 1ST LT   |      | 2D LT |      | WO   |      | PLT O |      |
|------------------------|--------------|------|----------|------|-------|------|------|------|-------|------|
|                        | PRES         | ASST | PRES     | ASST | PRES  | ASST | PRES | ASST | PRES  | ASST |
| ASSIGNED               | 1            |      | 3        |      |       |      |      |      |       |      |
| ATTACHED UNASSIGNED    |              |      |          |      |       |      |      |      |       |      |
| ATTACHED FR OTHER ORGN |              |      |          |      |       |      |      |      |       |      |
| <b>TOTAL</b>           | <b>1</b>     |      | <b>3</b> |      |       |      |      |      |       |      |

| AVN CADET & ENLISTED STRENGTH | AVIATION CADETS |        | ENLISTED MEN     |                      |          |                    |
|-------------------------------|-----------------|--------|------------------|----------------------|----------|--------------------|
|                               | PRESENT         | ABSENT | PRESENT FOR DUTY | PRESENT NOT FOR DUTY | ABSENT   | PRESENT AND ABSENT |
| ASSIGNED                      |                 |        | 109              |                      | 2        | 111                |
| ATTACHED UNASSIGNED           |                 |        |                  |                      |          |                    |
| ATTACHED FR OTHER ORGN        |                 |        |                  |                      |          |                    |
| <b>TOTAL</b>                  |                 |        | <b>109</b>       |                      | <b>2</b> | <b>111</b>         |

**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 TOTAL AVERAGE

III MEN AUTHORIZED TO MESS SEPARATELY MEN ATCHD FOR RATIONS O & OTHERS MESSED TOTAL

IV MEN ATCHD TO OTHER ORGN FOR RATIONS NET PLUS

PRESENT LESS PLUS

PAGE 1 OF 1 PAGES

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

*Caryl H. Oska*  
 CARYL H. OSKA 1 Lt Inf

SIGNATURE

D.D. A.G.O. FORM NO. 1  
 MARCH 29, 1942

(NAME)

(GRADE) (ARM OR SERVICE)

NO COPY THRU MAJ OR SQU