

**COMPANY RESTRICTED  
MORNING REPORT**

ENDING 2400 22 Aug 104 4  
(DAY) (MONTH) (YEAR)

STATION 1 G 5 53G55 Sens  
ORGANIZATION Co D 137 Inf Regt Inf  
(CO, BTRY, ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
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No Change

**RECORD OF EVENTS**

MAP USED WELIN-CHAUMONT SHEET 61

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASSIGNED			121			121
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
<b>TOTAL</b>			<b>121</b>			<b>121</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
		BREAKFAST 129	DINNER 129	SUPPER 129	387	129
	III	MEN AUTHORIZED TO MESS SEPARATELY	MEN ATCHD FOR RATIONS 3			
		MEN ATCHD TO OTHER ORGN FOR RATIONS 1	NET	O & OTHERS MESSED 6	TOTAL	
		MEN PRESENT 121	LESS 1	120	PLUS 9	129

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

SIGNATURE CARYL H. OSKEA 1st Inf  
(NAME) (GRADE) (ARM OR SERVICE)