COMPANY RESTRICTED
MORNING REPORT [illegible] 8 (DAY) Aug (MONTH) 194 4 (YEAR)

STATION ½ KM S Bignau T6603 Lambert Zone 1

ORGANIZATION Co D (CO. SEC. ETC.) 137 Inf Regt (PARENT UNIT) Inf (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		
	RECO D OF EVENTS		
	MAP USED AVRANCHES-FOUGERES		
	SHEET 6G		

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		1		1					
ATTACHED UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1		1		1					

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASSIGNED			138			138
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			138			138

RATIONS

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

II — MESS ATTENDANCE FOR DAY OF THIS REPORT — BREAKFAST 143 DINNER 143 SUPPER 143 — TOTAL 429 ÷ 3 — AVERAGE 143

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS 3 — MEN ATCHD TO OTHER ORGN FOR RATIONS 1 — O & OTHERS MESSED 3 — MEN PRESENT 138 LESS 1 — NET 137 — PLUS 6 — TOTAL 143

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I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATIONS REQUIRED IN UNIT IS CONSISTENT AS ACTUAL

[illegible]

SIGNATURE CARYL H. OSKEA 1 Lt Inf