COMPANY MORNING REPORT RESTRICTED

ENDING 2400 4 (DAY) Aug (MONTH) 194 4 (YEAR)

STATION 1 KM E La Bundiere T5736 Lambert Zone 1

ORGANIZATION Co F (CO. DET. ETC.) 137 Inf Regt (PARENT UNIT) Inf (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		
	RECORD OF EVENTS		
	MAP USED VIRE SHEET 6F/6		

OFFICER STRENGTH	FLD O & CAPT		1ST LT		2D LT		WO		PLT O	
	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T
ASSIGNED	1		3		2					
ATTACHED UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1		3		2					

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASSIGNED			176		3	179
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			176		3	179

RATIONS

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

II MESS ATTENDANCE FOR DAY OF THIS REPORT — BREAKFAST 184 DINNER 184 SUPPER 184 — TOTAL 552 ÷ 3 — AVERAGE 184

III MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS 3 — MEN ATCHD TO OTHER ORGN FOR RATIONS 1 — O & OTHERS MESSED 6 — MEN PRESENT 176 LESS 1 — NET 175 PLUS 9 — TOTAL 184

PAGE 1 OF 1 PAGES

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

SIGNATURE CARYL H. OSKEA 1 Lt Inf

W.D., A.G.O. FORM NO. 1 (NAME) (GRADE) (ARM OR SERVICE)

MARCH 15, 1943 WD COPY THRU MRU OR SCU