

COMPANY **RESTRICTED**

MORNING REPORT

ENDING 2400

1

AUG 194

4

(DAY)

(MONTH)

(YEAR)

STATION **1 KM SW Cretteeville T5350 Lambert Zone 1**

ORGANIZATION **Co G 137 Inf Regt Inf**

(CO, BATT, ETC.)

(PARADE UNIT)

(ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
No Change			

RECORD OF EVENTS

MAP USED TORIGNI-SUR-VIRE

SHEET 6F/4

OFFICER STRENGTH	S. D. O. & CAPT		1ST LT		2D LT		WO		PLT O	
	PRESEN	ABSENT	PRESEN	ABSENT	PRESEN	ABSENT	PRESEN	ABSENT	PRESEN	ABSENT
ASSIGNED	1		3		2					
ATTACHED UNASSIGNED ATTACHED FR OTHER ORGN										
TOTAL	1		3		2					

AVS CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			173		1	174
ATTACHED UNASSIGNED ATTACHED FR OTHER ORGN						
TOTAL			173		1	174

R A T I O N S	I	ESTIMATED NUMBER OF RATIONS REQUIRED FOR	DAY OF WEEK	NUMBER		
			DATE			
I O N S	II	MESS ATTENDANCE FOR DAY OF THIS REPORT		TOTAL	AVERAGE	
		BREAKFAST 181	DINNER 181	SUPPER 181	543	181
S	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		173	LESS 1	172	PLUS 9	181

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 BY ME

SIGNATURE

CARYL H. OSKEA 1 Lt Inf

U.S. A. & C. FORM NO. 1 (GRADE) (ARM OR SERVICE)

(NAME)

(GRADE) (ARM OR SERVICE)

NOV 22, 1942

NO COPY THREE WRO OR SCU