

# COMPANY RESTRICTED MORNING REPORT

ENDING 3400 20

July

4

STATION Hamel T4665 Lambert Zone 1

ORGANIZATION Hq Co 1 Bn 137 Inf Regt

Inf

SERIAL NUMBER

NAME

GRADE

CODE

No Change

RECORD OF EVENTS

MAP USED ST 10 SHEET 6F/2

OFFICER STRENGTH	FLD O & CAPT		1ST LT		2D LT		WO		FLT O	
	PRES	ABST	PRES	ABST	PRES	ABST	PRES	ABST	PRES	ABST
ASSIGNED	1		1		3					
ATTACHED										
UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1		1		3					

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			114			114
ATTACHED						
UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			114			114

R A T I O N S	I	ESTIMATED NUMBER OF RATIONS REQUIRED FOR		DAY OF WEEK _____		NUMBER		
				DATE				
	II	MESS ATTENDANCE FOR DAY OF THIS REPORT						
		BREAKFAST 151 DINNER 151 SUPPER 151					TOTAL	AVERAGE
							453	151
	III	MEN AUTHORIZED TO MESS SEPARATELY _____		MEN ATCHD FOR RATIONS 29				
		MEN ATCHD TO OTHER ORGN FOR RATIONS 1		O & OTHERS MESSED 9				
	MEN PRESENT 114		LESS 1		NET 113	PLUS 38	TOTAL 151	

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I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES IN PART II REPRESENT AN ACTUAL COUNT OF RATIONS.

SIGNATURE CARYL H. OSKKA 1 Lt Inf

U.S. A.S.O. FORM NO. 1  
MARCH 25, 1944

(GRADE)

(GRADE) (ARM OR SERVICE)

NO COPY THIS MRU OR SCU