

**COMPANY RESTRICTED**  
**MORNING REPORT**

ENDING 20

Sept

4

STATION **Chompenoux V9714 North of Huette Zone**

ORGANIZATION **Hq Co 1 Bn 137 Inf Regt**

**Inf**

SERIAL NUMBER NAME GRADE CODE

**No Change**

**RECORD OF EVENTS**

**MAP USED LANEVILLE SPINAL  
 SHEET 15 G**

ORGANIZATION	ASSIGNED	UNASSIGNED	TOTAL
ASSIGNED	1	2	1
UNASSIGNED			
TOTAL	1	2	1
ASSIGNED			
UNASSIGNED			
TOTAL			

ESTIMATED NUMBER OF DAY OF WEEK	
RATIONS REQUIRED FOR DAY	
MESS ATTENDANCE FOR DAY OF THIS REPORT	
BREAKFAST	147
DINNER	147
SUPPER	147
TOTAL	441
MEN AUTHORIZED TO MESS SEPARATELY	89
MEN ATTACHED TO OTHER ORGN FOR RATIONS	1
NET	109
MEN ATTACHED FOR SAT ONE OR OTHER MESS	9
MEN PRESENT	110
LESS	1
TOTAL	109
PLUS	38
TOTAL	147

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

*Carol H. Orsica*  
 SIGNATURE **CAROL H. ORSICA 1 Lt Inf**