

COMPANY **RESTRICTED**

MORNING REPORT

ENDING 2400 **8**

Oct 1944 **4**

STATION **Greency 00223 Nord de guerre Zone**

ORGANIZATION **Hq Co 2 Bn 137 Inf Regt Inf**

SERIAL NUMBER \_\_\_\_\_ LINE \_\_\_\_\_ GRADE \_\_\_\_\_ CODE \_\_\_\_\_

**No Change**

**RECORD OF EVENTS**

**MAP USED SPANBRUCKEN SHEET V 1**

OFFICER STRENGTH	P.O.O. & CAPT		SERGEANT		CORPORAL		PRIVATE		PLT O.	
	PRES	ADVT	PRES	ASST	PRES	ADVT	PRES	ADVT	PRES	ADVT
ASSIGNED	<b>1</b>		<b>3</b>							
ATTACHED UNASSIGNED ATTACHED FR OTHER ORGN										
TOTAL	<b>1</b>		<b>3</b>							

  

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRES	ADVT	PRES	ADVT	PRES	ADVT
ASSIGNED			<b>110</b>		<b>1</b>	<b>111</b>
ATTACHED UNASSIGNED ATTACHED FR OTHER ORGN						
TOTAL			<b>110</b>		<b>1</b>	<b>111</b>

RATIONS	ESTIMATED NUMBER OF RATIONS REQUIRED FOR	DAY OF WEEK DATE	NUMBER	
			TOTAL	AVERAGE
MESS ATTENDANCE FOR DAY OF THIS REPORT	BREAKFAST	<b>150</b>	DINNER	<b>150</b>
	SUPPER	<b>150</b>	TOTAL	<b>450</b>
	AVERAGE	<b>150</b>		

  

MEN AUTHORIZED TO MESS SEPARATELY	MEN ATCHD FOR RATIONS	NET	O & OTHERS MISSED	TOTAL
<b>1</b>	<b>29</b>	<b>109</b>	<b>12</b>	<b>150</b>
MEN PRESENT	<b>110</b>	LESS <b>1</b>		
			PLUS <b>41</b>	

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

SIGNATURE **Caryl H. Oskea**

SIGNATURE **CARYL H. OSKEA 1 Lt Inf** (GRADE) (ARM OF SERVICE)

W.D. A.G.O. FORM NO. 1 MARCH 25, 1943

WD COPY THRU MRU OR SCU