COMPANY MORNING REPORT RESTRICTED

ENDING 2400 16 (DAY) Sept (MONTH) 1944 (YEAR)

STATION Laneuveville V0807 Nord de Guerre Zone

ORGANIZATION Hq Co 2 Bn (CO. DET. ETC.) 137 Inf Regt (PARENT UNIT) Inf (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
20723966	Thompson, Clyde M 641	Pfc	[illegible]
Fr Dy to KIA as of 15 Sept 1944			
	RECORD OF EVENTS		
	MAP USED LUNEVILLE EPINAL		
	SHEET 15 G		

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS PRESENT	AVIATION CADETS ABSENT	ENLISTED MEN PRESENT FOR DUTY	ENLISTED MEN PRESENT NOT FOR DY	ENLISTED MEN ABSENT	ENLISTED MEN PRESENT AND ABSENT
ASSIGNED			107		2	109
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			107		2	109

RATIONS

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

II MESS ATTENDANCE FOR DAY OF THIS REPORT — BREAKFAST 147 DINNER 147 SUPPER 147 — TOTAL 441 ÷ 3 — AVERAGE 147

III MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS 29
MEN ATCHD TO OTHER ORGN FOR RATIONS 1 — O & OTHERS MESSED 12
MEN PRESENT 107 LESS 1 — NET 106 — PLUS 41 — TOTAL 147

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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 [illegible]

Caryl N. Oskea

SIGNATURE CARYL N. OSKEA 1 Lt Inf (NAME) (GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1 [illegible] TWO COPY THRU NEW OR SCU