RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 27 (DAY) Aug (MONTH) 194 4 (YEAR)

STATION 1 Kli E Sens X7140 Nord ue Guerre Zone

ORGANIZATION Hq Co 3 Bn (CO., DET., ETC.) 137 Inf Regt (PARENT UNIT) Inf (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		
	RECORD OF EVENTS		
	MAP USED SENS-AUXERRE SHEET 11 H		

OFFICER STRENGTH	FLD O & CAPT		1ST LT		2D LT		WO		FLT O	
	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T
ASSIGNED	2		1		3					
ATTACHED UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	2		1		3					

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			102			102
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			102			102

RATIONS

I — ESTIMATED NUMBER OF RATIONS REQUIRED FOR: DAY OF WEEK ____ DATE ____ NUMBER ____

II — MESS ATTENDANCE FOR DAY OF THIS REPORT: BREAKFAST 114 DINNER 114 SUPPER 114 — TOTAL 342 ÷ 3 = AVERAGE 114

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS 3 O & OTHERS MESSED 10 — TOTAL 114

MEN ATCHD TO OTHER ORGN FOR RATIONS 1 — MEN PRESENT 102 LESS 1 — NET 101 PLUS 13

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 TO ME.

SIGNATURE CARL H. OSKEA 1 Lt Inf

(NAME) (GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1 MARCH 25, 1943 — WD COPY THRU (MEN OR SCH)