COMPANY RESTRICTED
MORNING REPORT ENDING 2400 18 (DAY) Dec (MONTH) 194 4 (YEAR)

STATION Neunkirch Q5358 Nord de Guerre Zone
ORGANIZATION Hq Co (CO., BTY., ETC.) 137 Inf Regt (PARENT UNIT) Inf (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		
	RECORD OF EVENTS		
	MAP USED SAARBRUCKEN SHEET # 1		

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASSIGNED			165		1	166
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			165		1	166

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS ____ MEN ATCHD TO OTHER ORGN FOR RATIONS ____ — NET ____ — O & OTHERS MESSED ____ — TOTAL ____
MEN PRESENT ____ LESS ____ PLUS ____

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I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES IN PART IS REPRESENT AN ACTUAL COUNT AS REPORTED TO ME.

Caryl H. Uskea

SIGNATURE CARYL H. USKEA 1 Lt Inf
(NAME) (GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1
MARCH 23, 1943

WD COPY THRU MRU OR SCU