COMPANY RESTRICTED

MORNING REPORT

ENDING 2400 27 (DATE) Aug (MONTH) 44 (YEAR)

STATION 1 Rue de Charrons X4659 Nord de Guerre Zone

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

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		
	RECORD OF EVENTS		
MAF	USSD 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	1		2				1			
ATTACHED UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1		2				1			

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASSIGNED			92			92
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			92			92

RATIONS

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

II. MESS ATTENDANCE FOR DAY OF THIS REPORT — BREAKFAST 152 DINNER 152 SUPPER 152 — TOTAL 456 ÷ 3 = AVERAGE 152

III. MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS 44

MEN ATCHD TO OTHER ORGN FOR RATIONS 1 — NET

O & OTHERS MESSED 17 — TOTAL

MEN PRESENT 92 LESS 1 = 91 PLUS 61 = 152

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I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT ENTRIES FIGURES IN PART II HEREOF ARE TRUE AND CORRECT AS REVISED

SIGNATURE CARYL H. OSKEA 1 Lt Inf

(NAME) (GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1 (BACK)

REVISED 15 MAY 1943 (WHEN FILLED IN) SUPERSEDES PREVIOUS EDITION