

**COMPANY RESTRICTED**  
**MORNING REPORT**

ENDING 2400 **29** Dec 194 **4**  
(DAY) (MONTH) (YEAR)

STATION **Liverchamps P5648 Belgium**  
 ORGANIZATION **Co I 137 Inf Regt Inf**  
(CO, BTRY, ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
31456745	Decominck, Julien L	745 Pvt	M-6
39305815	Rider, Leo R	653 Sgt	M-1

**Above - M IP Dy to LNA Dropped in Anger**

**RECORD OF EVENTS**

**MAP USED HASTOENE SHEET 121**

OFFICER STRENGTH	PLD O & CAPT	1ST LT	2D LT	WO	FLT O
ASSIGNED	1	1	2		
ATTACHED UNASSIGNED					
ATTACHED FR OTHER ORGN					
<b>TOTAL</b>	<b>1</b>	<b>1</b>	<b>2</b>		

AVN CADET STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			168		1	169
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
<b>TOTAL</b>			<b>168</b>		<b>1</b>	<b>169</b>

**R** ESTIMATED NUMBER OF RATIONS REQUIRED FOR DAY OF WEEK DATE NUMBER

**A** MESS ATTENDANCE FOR DAY OF THIS REPORT TOTAL AVERAGE

**I** BREAKFAST DINNER SUPPER

**O** MEN AUTHORIZED TO MESS SEPARATELY MEN ATCHD FOR RATIONS

**N** MEN ATCHD TO OTHER ORGN FOR RATIONS NET O & OTHER MESSED TOTAL

**S** MEN PRESENT LESS PLUS

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 BY ME.

SIGNATURE *Carol H. Oska*  
**CAROL H. OSKA 1 Lt Inf**  
(NAME) (GRADE) (ARM OR SERVICE)