RESTRICTED

COMPANY MORNING REPORT

ENDING 1400 26 (DAY) July (MONTH) 44 (YEAR)

STATION ½ Km NE La Capelle T4765 Lambert Zone 1

ORGANIZATION Co I (CO., BAT., ETC.) 137 Inf Regt (REGIMENT, BOAT) Inf (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		
	RECORD OF EVENTS		
	MAP USED ST LO SHEET 6E/2		

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		3		2					
ATTACHED UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1		3		2					

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			156			156
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			156			156

RATIONS

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

II. MESS ATTENDANCE FOR DAY OF THIS REPORT — BREAKFAST 164 DINNER 164 SUPPER 164 — TOTAL 493 ÷ 3 = AVERAGE 164

III. MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS 3
MEN ATCHD TO OTHER ORGN FOR RATIONS 1
O & OTHERS MESSED 6
MEN PRESENT 156 LESS 1 = NET 155 PLUS 9 = TOTAL 164

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I CERTIFY THAT THIS REPORT IS CORRECT AND THAT ALL PERSONS ARE PRESENT OR ACCOUNTED FOR AS INDICATED.

SIGNATURE CARL H. OSKEA 1 Lt Inf

(NAME) (GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM No. 1 (NAME) 1ST COPY THRU BN OR EQU