

**COMPANY RESTRICTED MORNING REPORT**

ENDING 2400 30 Jan 1945 5  
 (DAY) (MONTH) (YEAR)

STATION Barons to Bonholt Holland

ORGANIZATION Med Det 137 Inf Regt MD  
(CO, DET, ETC.) (PARENT UNIT) (GRADE OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
<b>No Change</b>			
<b>RECORD OF EVENTS</b>			
<b>ENROUTE TO ADAMSVILLER</b>			
<b>FRANCE TO BONHOLT HOLLAND</b>			
<b>BY RAIL</b>			

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	6	1	3		1					
ATTACHED UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	6	1	3		1					

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			125		8	133
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			125		8	133

**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 O & OTHERS MESSED \_\_\_\_\_  
 MEN ATCHD TO OTHER ORGN FOR RATIONS \_\_\_\_\_ NET \_\_\_\_\_ TOTAL \_\_\_\_\_  
 MEN PRESENT : \_\_\_\_\_ LESS \_\_\_\_\_ PLUS \_\_\_\_\_

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES IN PAGE II REPRESENT AN ACTUAL COUNT.

SIGNATURE Caryl H Oskra **CARYL H OSKRA** 1 Lt Inf  
(NAME) (GRADE) (ARM OR SERVICE)