

RESTRICTED
MORNING REPORT FORM 2400 19 Feb 1945

ORGANIZATION **Med Det 137 Inf 382d** (UNIT) **MD** (ARM OR SERVICE)

STATION OR LOCATION **Box 7874 Ford de Chartre**

NAME **OSKRA** GRADE **1 LT INF** NOS. **1** CODE **1**

No Change

Limited Assignment Personnel

Assigned or Attached Unassigned

1 0 0 Officers 1 Total

(1)	ASGD (2)	ATCND. UNASGD (3)	TOTAL (4)	ATCND. FROTHER ORG'S (5)	PRESENT		ABSENT					
					FOR DUTY (6)	NOT FOR DUTY (7)	T D D E (8)	SE (9)	CONF (10)	LV FUR (11)	AWCL (12)	MIS- ING (13)
CDR												
CPT	6		6		6							
1ST LT	4		4		4							
2ND LT	1		1		1							
MAJ	11		11		11							
1ST SERG	0/0		0/0		0/0							
2ND SERG	1		1		1							
3RD SERG	4/9		4/9		4/9							
4TH SERG	2/15		2/15		2/15							
5TH SERG	3/27		3/27		3/25					2		
PLS	62		62		58			2			2	
PT	14		14		13			1				
TOTAL	137		137		130			3		2	2	

I CERTIFY THAT THIS MORNING REPORT IS CORRECT: PAGE 1 OF 1 PAGES

SIGNATURE *Caryl H Oskea*
CARYL H OSKEA
(HERE TYPE OR PRINT)
1 LT INF