COMPANY RESTRICTED
MORNING REPORT ENDING 2400 22 (DAY) Aug (MONTH) 194 4 (YEAR)

STATION 1 G 5 53G55 Sens

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

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		
	RECORD OF EVENTS		
	MAP USED MELUN-CHAUMONT SHEET	61	

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	5		5		1		4			
ATTACHED UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	5		5		1		4			

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASSIGNED			100			100
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			100			100

RATIONS

I ESTIMATED NUMBER OF RATIONS REQUIRED FOR DAY OF WEEK ____ DATE ____ NUMBER ____

II MESS ATTENDANCE FOR DAY OF THIS REPORT
BREAKFAST 76 DINNER 76 SUPPER 76 TOTAL 228 ÷ 3 AVERAGE 76

III MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS 1
MEN ATCHD TO OTHER ORGN FOR RATIONS 36 O & OTHERS MESSED 11
MEN PRESENT 100 LESS 36 NET 64 PLUS 12 TOTAL 76

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I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT [illegible] AN ACTUAL [illegible]

SIGNATURE CARYL H. OSKEA 1 Lt Inf
(NAME) (GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1 [illegible] COPY [illegible] MRU OR SCU