

COMPANY MORNING REPORT

RESTRICTED

ENDING
2400 22
(DAY)

Jul
(MONTH)

194 4
(YEAR)

STATION Emelie, 1 MI SW, T5065, Lambert Zone #1
ORGANIZATION Cannon Co 134 Inf Regt Inf
(CO, DET, ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
38079-136			
38079136	Desha, Travis	(531) PFC	T
Fr dy to slightly sick (not in action) to lost to hosp			

RECORD OF EVENTS

Usual Company duties. Map used St Lo 6 F/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		2		1					
ATTACHED										
UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1		2		1					

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DV	ABSENT	PRESENT AND ABSENT
ASSIGNED			109			109
ATTACHED						
UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			109			109

R A T I O N S	I	ESTIMATED NUMBER OF RATIONS REQUIRED FOR	DAY OF WEEK DATE	NUMBER					
	II	MESS AT. ENDANCE FOR DAY OF THIS REPORT							
	III	BREAKFAST 113 DINNER 113 SUPPER 113 MEN AUTHORIZED TO MESS SEPARATELY MEN ATCHD TO OTHER ORGN FOR RATIONS MEN PRESENT : 109 LESS 109 PLUS 113		<table border="1"> <tr> <td>TOTAL</td> <td>+</td> <td>AVERAGE</td> </tr> <tr> <td>339</td> <td>3</td> <td>113</td> </tr> </table>	TOTAL	+	AVERAGE	339	3
TOTAL	+	AVERAGE							
339	3	113							

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I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND
THAT RATIONS PROVIDED IN PART II REPRESENT AN ACTUAL
REPORT AS REPORTED TO ME:

SIGNATURE RAYMOND J. ANDERSON

CAPT INF

U.S. A.C. FORM NO. 1

(NAME)

(GRADE) (ARM OR SERVICE)

REVISION 25, 1943

FOR COPY FROM HQ OR 2-2