RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 8 (DAY) Jul (MONTH) 194 4 (YEAR)

STATION Bricqueville 3/4 Mi W & T 5082 Isigny

ORGANIZATION Co I (CO. DET. ETC.) 1st Inf Rest (PRESENT UNIT) Inf (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

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		2					
ATTACHED UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1		2		2					

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			185			185
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			185			185

RATIONS

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

II — MEN ATTENDANCE FOR DAY OF THIS REPORT: BREAKFAST 180 DINNER 190 SUPPER 180 TOTAL 570 ÷ 3 AVERAGE 190

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS ____ MEN ATCHD TO OTHER ORGN FOR RATIONS ____ MEN ASSIGNED 185 PRESENT 185 NET 185 O & OTHERS MESSED 5 PLUS 5 TOTAL 190

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I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT ALL PERSONS STATED ON IT ARE PRESENT OR ACCOUNTED FOR AS REPORTED TO ME.

RALPH E. ANDERSON CAPT INF

(NAME) (GRADE) (ARM OR SERVICE)

NO COPY WILL BE MADE ON THIS