COMPANY RESTRICTED
MORNING REPORT ENDING 2400 8 (DAY) Jul (MONTH) 194 4 (YEAR)

STATION Colombiers 1.5 Mi NW WT 6083 Isigny

ORGANIZATION Co K (CO, BRY, ETC.) 134 Inf Regt (PARENT 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		3					
ATTACHED UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1		2		3					

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASSIGNED			184			184
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			184			184

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS ____ MEN ATCHD TO OTHER ORGN FOR RATIONS ____ — MEN PRESENT 184 LESS — NET 184 — O & OTHERS MESSED 6 PLUS 6 — TOTAL 190

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

SIGNATURE RAYMOND J ANDERSON (NAME) CAPT (GRADE) INF (ARM OR SERVICE)

W.D., A.G.O. FORM 501 MARCH 25, 1942 WD COPY THRU MRU OR SCU