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

STATION Hamel T4665 Lambert Zone 1

ORGANIZATION Co H (CO. SEC. ETC.) 137 Inf Regt (PARENT UNIT) Inf (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		
	RECORD OF EVENTS		
	MAP USED ST LO SHEET 6F/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		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 DY	ABSENT	PRESENT AND ABSENT
ASSIGNED			142		1	143
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			142		1	143

RATIONS

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

II MESS ATTENDANCE FOR DAY OF THIS REPORT
BREAKFAST 149 DINNER 149 SUPPER 149 TOTAL 447 ÷ 3 AVERAGE 149

III MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS 3
MEN ATCHD TO OTHER ORGN FOR RATIONS 1 NET O & OTHERS MESSED 5 TOTAL
MEN PRESENT 142 LESS 1 141 PLUS 8 149

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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 [illegible]

Caryl H. Oskea

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

U.S., A.G.O. FORM NO. 1
MARCH 25, 1943

[illegible] WO COPY THRU MRU OR SCU