

COMPANY RESTRICTED MORNING REPORT

ENDING 2400 6 Jan 1945
DAY MONTH YEAR

STATION Houpre P5351 Belgium
 ORGANIZATION Hq Co 1 Bn 137 Inf Regt Inf
(CO, BATT, ETC.) (PARENT UNIT) (ARM OR SERVICE)

| SERIAL NUMBER | NAME | GRADE | CODE |
|---|---------------------|--------|------|
| 37070925 | Hunt, Marvie A | Pfc | A-1 |
| MOS 345 | MCO 499 | Race W | |
| 35338186 | Baney, Jack | Tec 5 | A-1 |
| MOS 502 | MCO 136 | Race W | |
| Above 2 EM fr LTA dropped fr Asgmt to RTD as of 5 Jan 1945 per SO 4 Par 6 Hq 35 Inf Div | | | |
| 39085638 | Foulsen, Clarence A | S Sgt | A-1 |
| MOS 631 | MCO 010 | Race W | |
| Fr Slightly Sk dropped fr asgmt to RTD as of 5 Jan 1945 per SO 4 Par 6 Hq 35 Inf Div (LD) | | | |

RECORD OF EVENTS
 MAP USED ARLON SHEET 17

| OFFICER STRENGTH | FLD O & CAPT | | 1ST LT | | 2D LT | | WO | | FLT O | |
|---------------------|--------------|------|--------|------|-------|------|------|------|-------|------|
| | PRES | ABST | PRES | ABST | PRES | ABST | PRES | ABST | PRES | ABST |
| ASGD | 1 | | 4 | | | | | | | |
| ATCHD UNASGD | | | | | | | | | | |
| ATCHD FR OTHER ORGN | | | | | | | | | | |
| TOTAL | 1 | | 4 | | | | | | | |

| AVN CADET & ERL STRENGTH | AVIATION CADETS | | ENLISTED MEN | | | |
|--------------------------|-----------------|--------|------------------|----------------------|--------|--------------------|
| | PRESENT | ABSENT | PRESENT FOR DUTY | PRESENT NOT FOR DUTY | ABSENT | PRESENT AND ABSENT |
| ASGD | | | 131/28 | | 1 | 132 |
| ATCHD UNASGD | | | 0/0 | | | |
| ATCHD FR OTHER ORGN | | | | | | |
| TOTAL | | | 131 | 0 | 1 | 132 |

RATIONS

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

MESS ATTENDANCE FOR DAY OF THIS REPORT

| | | | | |
|-----------|--------|--------|-------|---------|
| BREAKFAST | DINNER | SUPPER | TOTAL | AVERAGE |
| | | | | |

II MEN AUTHORIZED TO MESS SEPARATELY _____ MEN ATCHD FOR RATIONS _____ MEN ATCHD TO OTHER ORGN FOR RATIONS _____ NET _____ O & OTHERS MESSED _____ TOTAL _____

III MEN PRESENT : _____ LESS _____ PLUS _____

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

SIGNATURE Caryl H Uska of Lt Inf