COMPANY RESTRICTED
MORNING REPORT ENDING 2400 14 (DAY) Aug (MONTH) 194 4 (YEAR)

STATION 1 KM E Los Rues Canet T4560 Lambert Zone 11
ORGANIZATION Hq Co 2 Bn (CO. DET. ETC.) 137 Inf Regt (PARENT UNIT) Inf (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		
	RECORD OF EVENTS		
	MAP USED RENNES REDON		
	SHEET 5H		

OFFICER STRENGTH	FLD O & CAPT PRES	FLD O & CAPT ABS'T	1ST LT PRES	1ST LT ABS'T	2D LT PRES	2D LT ABS'T	WO PRES	WO ABS'T	FLT O PRES	FLT O ABS'T
ASSIGNED	1		2		2					
ATTACHED UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1		2		2					

AVM CADET & ENLISTED STRENGTH	AVIATION CADETS PRESENT	AVIATION CADETS ABSENT	ENLISTED MEN PRESENT FOR DUTY	ENLISTED MEN PRESENT NOT FOR DT	ENLISTED MEN ABSENT	ENLISTED MEN PRESENT AND ABSENT
ASSIGNED			111			111
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			111			111

RATIONS

I — ESTIMATED NUMBER OF RATIONS REQUIRED FOR DAY OF WEEK / DATE — NUMBER

II — MESS ATTENDANCE FOR DAY OF THIS REPORT
BREAKFAST 152 DINNER 152 SUPPER 152 — TOTAL 456 ÷ 3 — AVERAGE 152

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS 29
MEN ATCHD TO OTHER ORGN FOR RATIONS 1 — O & OTHERS MESSED 13
MEN PRESENT 111 LESS 1 — NET 110 — PLUS 42 — TOTAL 152

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I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT [illegible] FIGURES IN PART [illegible] ACTUAL.

SIGNATURE CARYL H. OSKEA 1 Lt Inf
[illegible] (NAME) [illegible] (ARM OR SERVICE)
[illegible] WD COPY THRU [illegible]