

COMPANY **RESTRICTED**
 MORNING REPORT ENDING **16** Aug 194**4**
2400 (DAY) (MONTH) (YEAR)

STATION **Orleans W6440 Norde de Guerre Zone**
 ORGANIZATION **Hq Co 3 Bn 137 Inf Regt Inf**
(CO, DET, ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER NAME GRADE CODE

No Change

RECORD OF EVENTS

**MAP USED CHATEAUDUN BEAUGENCY
 SHEET 9 H**

OFFICER STRENGTH	FLD O & CAPT		1ST LT		2D LT		V/O		PLT O	
	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T	PRES	ACS'T	PRES	ABS'T
ASSIGNED	1		1		3					
ATTACHED UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1		1		3					

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASSIGNED			104			104
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			104			104

R A T I O N S	I	ESTIMATED NUMBER OF RATIONS REQUIRED FOR	DAY OF WEEK	NUMBER		
			DATE			
I I	II	MESS ATTENDANCE FOR DAY OF THIS REPORT			TOTAL	AVERAGE
		BREAKFAST 115	DINNER 115	SUPPER 115	445	115
O N S	III	MEN AUTHORIZED TO MESS SEPARATELY		MEN ATCHD FOR RATIONS		
		MEN ATCHD TO OTHER ORGN FOR RATIONS 1		O & OTHERS MESSED 9		
		MEN PRESENT 104	LESS 1	NET 103	PLUS 12	TOTAL 115

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 I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES IN PART REPORTED ARE ACTUAL

CARYL H. OSKEA 1 Lt ID