COMPANY RESTRICTED
MORNING REPORT ENDING 2400 19 (DAY) Sept (MONTH) 194 4 (YEAR)

STATION Romerville V9912 Nord de Guerre Zone
ORGANIZATION Hq Co 3 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 LUNEVILLE EPINAL		
	SHEET 15 G		

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		1					
ATTACHED UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1		2		1					

AVN 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			107		1	108
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			107		1	108

RATIONS

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

II MESS ATTENDANCE FOR DAY OF THIS REPORT
BREAKFAST 118 DINNER 118 SUPPER 118 TOTAL 354 ÷ 3 AVERAGE 118

III MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS 3
MEN ATCHD TO OTHER ORGN FOR RATIONS 1 NET O & OTHERS MESSED 7 TOTAL
MEN PRESENT 107 LESS 1 106 PLUS 10 116

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I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES IN [illegible] REPRESENT AN ACTUAL COUNT AS REPORTED TO ME

CARYL H. OSKEA 1 Lt Inf

SIGNATURE ____ (NAME) (GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1
MARCH 23, 1942

WD COPY THRU MRU OR SCU