

COMPANY RESTRICTED MORNING REPORT

ENDING 2400 5 July 194
(DAY) (MONTH) (YEAR)

STATION Madison 1/2 mi NE VI 5189 (Br Cassini)
 ORGANIZATION Co K 157 Inf Regt Inf
(CO, DET, ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
58438454	MacMillian, Elmer	Pvt	<i>a</i>
20726444	Smith, Ralph E	Pfc	<i>a</i>
20725551	Hicks, Wesley W	Pvt	<i>a</i>
above 3 EM asgd & 1d fr Co M 157 Inf Regt			
34240772	Phillips	Pfc	
fr dy to sk in qrs LD			

OFFICER STRENGTH	FLD O & CAPT		1ST LT		2D LT		WO		FLC O	
	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T
ASSIGNED	1		3		2					
ATTACHED UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1		3		2					

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASSIGNED			186	1	2	189
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			186	1	2	189

R A T I O N S	I	ESTIMATED NUMBER OF RATIONS REQUIRED FOR	DAY OF WEEK	NUMBER		
			DATE			
T I M E	II	MESS ATTENDANCE FOR DAY OF THIS REPORT			TOTAL	AVERAGE
		BREAKFAST 194	DINNER 195	SUPPER 196	585	195
M E N	III	MEN AUTHORIZED TO MESS SEPARATELY	MEN ATCHD FOR RATIONS	3		
		MEN ATCHD TO OTHER ORGN FOR RATIONS	NET	6	TOTAL	
		MEN PRESENT 187	LESS 1	186	PLUS 9	195

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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 TO ME.

Carol H. Oskra

SIGNATURE CAROL H. OSKRA 1st Lt Inf
(NAME) (ARM OR SERVICE)