RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 1 (DAY) October (MONTH) 194 4 (YEAR)

STATION Vicinity of Remereville, France

ORGANIZATION MD Hq Co 4th Armd Division MD
(CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

RECORD OF EVENTS

Usual Camp Duties

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									
ATTACHED UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1									

AV'n CADET & ENLISTED STRENGTH	AVIATION CADETS PRESENT	AVIATION CADETS ABSENT	ENLISTED MEN PRESENT FOR DUTY	ENLISTED MEN PRESENT NOT FOR DY	ENLISTED MEN ABSENT	ENLISTED MEN PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGN'D						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — MEN PRESENT 6 — LESS 7 — NET 0 — PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATIONS CLAIMED HEREIN WERE THE ONES ACTUALLY ISSUED.

SIGNATURE W. B. CHOLY, WOJG USA Ass't Adj General.
(RANK) (GRADE) (ARM OR SERVICE)

WD A.G.O. FORM NO. 1 MARCH 25, 1943

WD COPY THRU MRU OR SCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 (DAY) 2 (MONTH) October 194 (YEAR) 43

STATION Vicinity of Remereville, France

ORGANIZATION MD Hq Co 4th Armd Division MD
(CO, DET, ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY ___ MEN ATCHD FOR RATIONS O & OTHERS MESSED ___ MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — NET — TOTAL

MEN PRESENT 0 LESS 7 0 PLUS 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES ON FACE HEREOF ARE ACTUAL [illegible] TO ME.

SIGNATURE H. B. CHOLY, WOJG USA Ass't Adj General.
(NAME) (GRADE) (ARM OR SERVICE)

O.D., A.G.O. FORM NO. 1 MARCH 25, 1943

WD COPY THRU MRU OR SCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 3 (DAY) October (MONTH) 194 4 (YEAR)

STATION Vicinity of Romeville, France

ORGANIZATION MD Hq Co 4th Armd Division MD
(CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

Duc

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III MEN AUTHORIZED TO MESS SEPARATELY ___ MEN ATCHD FOR RATIONS ___ MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — NET — O & OTHERS MESSED ___ — TOTAL 0
MEN PRESENT 0 LESS 7 0 PLUS

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES IN THIS IT REPRESENT AN ACTUAL ESTIMATE REQUIRED TO BE.

SIGNATURE R. CHOIX, MOJG USA Ass't Adj General.
(NAME) (GRADE) (ARM OR SERVICE)

WD, A.G.O. FORM NO. 1
MARCH 20, 1943

WD COPY THRU MRU OR ECU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 4 (DATE) October (MONTH) 194 4 (YEAR)

STATION Vicinity of Remeneville, France

ORGANIZATION MD Hq Co 4th Armd Division MD
(CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

Pvt E

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD TO OTHER ORGN FOR RATIONS ____ MEN ATCHD FOR RATIONS O & OTHERS MESSED ____

MEN PRESENT 0 LESS 7 NET 0 PLUS TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT THE NUMBER FURNISHED UNDER "MEN PRESENT" IS ACTUAL

SIGNATURE H. B. CHOINY, WO JG USA Ass't Adj General.
(NAME) (GRADE) (ARM OR SERVICE)

WD, A.G.O. FORM NO. 1
(MARCH 25, 1943)

WE COPY THRU NRU OR SCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 5 (DATE) October (MONTH) 194 4 (YEAR)

STATION Vicinity of Remereville, France

ORGANIZATION MD Hq Co 4th Armd Division MD
(CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change.		

RUE

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS O & OTHERS MESSED ____
MEN ATCHD TO OTHER ORGN FOR RATIONS 7
MEN PRESENT 0 LESS 7 NET 0 PLUS TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS REPORT IS CORRECT AND THAT ALL ENTRIES HEREIN ARE MADE IN INK.

SIGNATURE W. B. Choly, WO, USA Ass't Adj General.
(NAME) (GRADE) (ARM OR SERVICE)

D.P. A.G.O. FORM NO. 1
MARCH 25, 1942

WD COPY THRU WRU OR SCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 6 (DAY) October (MONTH) 194 4 (YEAR)

STATION Vicinity of Remereville, France

ORGANIZATION MD Hq Co 4th Armd Division MD
(CO. BAT. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change.		

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT F. D. DY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY — MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — MEN ATCHD FOR RATIONS O & OTHERS MESSED

MEN PRESENT 0 LESS 7 NET 0 PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES IN THIS REPORT REPRESENT AN ACTUAL

SIGNATURE H. B. CHOLY, WOJG USA Ass't Adj General.
(NAME) (GRADE) (ARM OR SERVICE)

U.S. A.G.O. FORM NO. 1
MARCH 25, 1943

WD COPY THRU MRU OR SCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 7 (DAY) October (MONTH) 194 4 (YEAR)

STATION Vicinity of Remereville, France

ORGANIZATION MD Hq Co 4th Armd Division MD
(CO, DET, ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change.		

RECORD OF EVENTS

Usual Camp Duties

RUE

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

AVN CADE; & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ — MEN PRESENT 0 — LESS 7 — NET 0 — PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THE FOREGOING IS A CORRECT AND COMPLETE RECORD OF THE ACTIVITIES OF THIS COMMAND FOR THE PERIOD SHOWN ABOVE.

SIGNATURE W. B. CHOLY, WO JG USA Asst Adj General.
(NAME) (GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1
MARCH 25, 1943

WD COPY THRU PRO OR RCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 8 Oct 1944
(DATE) (MONTH) (YEAR)

STATION Vicinity of Remaeville, France

ORGANIZATION HD Hq Co 4th Armd Division HD
(CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS			
I	ESTIMATED NUMBER OF RATIONS REQUIRED FOR { DAY OF WEEK / DATE		NUMBER
II	MESS ATTENDANCE FOR DAY OF THIS REPORT BREAKFAST DINNER SUPPER	TOTAL	AVERAGE (÷ 3)
III	MEN AUTHORIZED TO MESS SEPARATELY 7 MEN ATCHD TO OTHER ORGN FOR RATIONS 7 MEN PRESENT 6 LESS	NET 0	MEN ATCHD FOR RATIONS O & OTHERS MESSED PLUS TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES REPRESENT THE PRESENT STRUCTURE.

SIGNATURE H. E. CHOLY, MING USA Actg Adj General
(NAME) (GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1
(MARCH 25, 1943)

WD COPY THRU MAJ OR SCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 9 October (DAY) (MONTH) 194 4 (YEAR)

STATION Vicinity of Remereville, France

ORGANIZATION M Hq Co 4th Armd Div (CO. BN. ETC.) (REGMT OR) MD (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change.		

Rule

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

AVIA CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ — MEN PRESENT 0 LESS 7 — NET 0 — PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT MEN PRESENT ARE PRESENT IN REPRESENT AS ACTUAL

SIGNATURE J. B. CHOIZ, WO1G USA Ass't Adj General. (GRADE) (ARM OR SERVICE)

DO NOT COPY THRU MEN OR SEC

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 10 (DAY) October (MONTH) 194 4 (YEAR)

STATION: Vicinity of Remereville, France

ORGANIZATION: MD Hq Co 4th Armored Division MD
(CO, BAT, ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change.		

Duf

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — MEN ATCHD FOR RATIONS O & OTHERS NEEDED ____ — MEN PRESENT 0 LESS 7 — NET 0 — PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES IN PART II REPRESENT AN ACTUAL COUNT MADE BY ME.

SIGNATURE: [signature] — NAME: W. B. CROLY, WO(J) Asst Adj General. (GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1

DO NOT WRITE BELOW THIS LINE

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 11 October (DAY) (MONTH) 194 4 (YEAR)

STATION Vicinity of Remereville, France

ORGANIZATION MP Hq Co 4th Armd Division MD
(USE NAME OF UNIT) (TARGET UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change.		

Rue

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

1. ESTIMATED NUMBER OF RATIONS REQUIRED FOR { DAY OF WEEK / DATE } — NUMBER

2. MESS ATTENDANCE FOR DAY OF THIS REPORT — BREAKFAST DINNER SUPPER — TOTAL ÷ 3 = AVERAGE

3. MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD TO OTHER ORGS FOR RATIONS 7 — MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ — MEN PRESENT 0 LESS 7 — NET 0 1 — PLUS — TOTAL 0

PAGE ____ OF ____ PAGES

A COPY THAT THIS MORNING REPORT IS CORRECT AND THAT AUTHOR ALLOWED BY POSTS SUBSEQUENT AN ACTUAL

SIGNATURE Wm. B. CROLY, WOJG USA Ass't Adj General
(GRADE) (ARM OR SERVICE)

DA A.G.O. FORM NO. 1 (TITLE)
MARCH 25, 1943

NO COPY THRU MAIL OR ECH

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 (DAY) 12 (MONTH) October 19A 4 (YEAR)

STATION Vicinity of Remereville, France

ORGANIZATION Hd H. Co 4th Armd Division (CO. DET. ETC.) (PARENT UNIT) MD (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

I. ESTIMATED NUMBER OF RATIONS REQUIRED FOR: DAY OF WEEK ____ DATE ____ — NUMBER

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

III. MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS ____ MEN ATCHD TO OTHER ORGN FOR RATIONS 7 O & OTHERS MESSED ____ — MEN PRESENT 0 LESS 7 — NET 0 PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT ALL PERSONS LISTED HEREIN ARE ACTUALLY AT AND ATTACHED TO THIS ORGANIZATION.

Lt. B. CROLY, MCJG USA Ass't Adj General.

(RANK) (GRADE) (ARM OR SERVICE)

NO. 1

NO COPY THAN ONE ON ONE

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 13 (DAY) October (MONTH) 1944 (YEAR)

STATION: Vicinity of Remereville, France

ORGANIZATION: HQ & Co 4th Armd Division (CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY / MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — MEN ATCHD FOR RATIONS O & OTHERS MESSED — MEN PRESENT 0 — LESS 7 — NET 0 — PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

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

SIGNATURE: [illegible] B. [illegible], MAJ, GSC Ass't Adj General (RANK) (GRADE TITLE OR RELATION)

U.S. A.G.O. FORM NO. 1

DO NOT COPY THIS FORM OR SELL

COMPANY MORNING REPORT

ENDING 2400 14 October 1944
(DATE) (MONTH) (YEAR)

STATION Vicinity of Remereville, France

ORGANIZATION HQ B, 3d 4th Armd Div HQ
(CO. BAT. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change.		

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									
ATTACHED UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1									

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS PRESENT	AVIATION CADETS ABSENT	ENLISTED MEN PRESENT FOR DUTY	ENLISTED MEN PRESENT NOT FOR DY	ENLISTED MEN ABSENT	ENLISTED MEN PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD TO OTHER ORGN FOR RATIONS 7 MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ MEN PRESENT 0 LESS 7 NET 0 PLUS TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REP IT IS CORRECT AND THAT RATION FIGURES IN PART III REPRESENT AN ACTUAL [illegible] TO ME.

SIGNATURE [illegible] R. McLY, MAJ USA Ass't Adj Gen
(NAME) (GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1
MARCH 25, 1940

WD COPY THRU MRH OR SCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 15 October 1944 (DAY) (MONTH) (YEAR)

STATION Vicinity of Remereville, France

ORGANIZATION MD Hq Co 4th Armd Div MD
(CO. DET. ETC.) (REGMT. UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT F. D.	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS				
I	ESTIMATED NUMBER OF RATIONS REQUIRED FOR: DAY OF WEEK / DATE			NUMBER
II	MESS ATTENDANCE FOR DAY OF THIS REPORT: BREAKFAST DINNER SUPPER	TOTAL	÷ 3	AVERAGE
III	MEN AUTHORIZED TO MESS SEPARATELY / MEN ATCHD TO OTHER ORGN FOR RATIONS / MEN PRESENT	LESS	NET	MEN ATCHD FOR RATIONS / O & OTHERS MESSED / PLUS	TOTAL

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT ANY CHANGE HEREIN NOTED IS REPRESENTED AN ACTUAL CHANGE REPORTED TO ME.

SIGNATURE H. B. CROLY, MAJ USA Ass't Adj Gen
(NAME) (GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1
(MARCH 15, 1943)

WD COPY THRU MRD OR SCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 1c October 1944
(DAY) (MONTH) (YEAR)

STATION Vicinity of Remereville, France

ORGANIZATION HQ 1st Co 4th Armd Division AD
(CO. BAT. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — MEN PRESENT 0 LESS 7 — NET 0 PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATIONS SHOWN IN PART II REPRESENT AN ACTUAL MESS ATTENDANCE.

SIGNATURE R. CHOLY, CWO USA Ass't Adj Gen
(NAME) (GRADE) (RANK OR RATING)

U.S. A.G.O. FORM NO. 1
MARCH 15, 1943 NO COPY FORM NO. 1 ON FILE

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 17 October 44
(DATE) (MONTH) (YEAR)

STATION Vicinity of Remereville France

ORGANIZATION MD Hq Co 4th Armd Div MD
(CO. DET. ETC.) (REGMT. ETC.) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

AUE

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III. MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATTCHD TO OTHER ORGN FOR RATIONS 7 — MEN ATTCHD FOR RATIONS O & OTHERS MESSED ____

MEN PRESENT 0 LESS 7 — NET 0 — PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES ON PART II REPRESENT AN ACTUAL [illegible]

SIGNATURE W. B. CHOLYZ WO G USA Ass't Adj Ge
(NAME) (GRADE) (ARM OR SERVICE)

W.D. A.G.O. FORM NO. 1
MARCH 15, 1943

WD COPY THEN MEN OR SOS

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 (DATE) 18 (MONTH) October 1944 (YEAR)

STATION Vicinity of Remereville, France

ORGANIZATION MD Hq Co 4th Armd Div Md (CO. BAT. ETC.) (REGT. BN.) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

RECORD OF EVENTS

Usual Bivouac Duties

DUE

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY ___ MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — MEN ATCHD FOR RATIONS O & OTHERS MESSED ___ — MEN PRESENT 0 — LESS 7 — NET 0 — PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT ALL ENTRIES THEREIN WHICH PERTAIN TO MY ACTIVITY ARE REPRESENTANT AN ACTUAL CONDITION.

W. B. CHOLY? WOJG USA Ass't Adj Gen

SIGNATURE (NAMES) (GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1 (REVISED 25, 1943) WD CO. THRU BRN WA 200

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 19 (DAY) October (MONTH) 194 (YEAR)

STATION Vicinity of Remerville, France

ORGANIZATION MD Hq Co 4th Arm Div MD (CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III MEN AUTHORIZED TO MESS SEPARATELY — MEN ATCHD FOR RATIONS O & OTHERS MESSED — MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — MEN PRESENT — LESS 7 — NET 0 — PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

(CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES IN PART II REPRESENT AN ACTUAL ESTIMATE BASED ON ...)

SIGNATURE [illegible] (NAME) CHOLY MOJG USA Personnel Officer (GRADE) (ARM OR SERVICE)

W.D. A.G.O. FORM No. [illegible] MARCH 20, 1943

WD COPY THRU MSU OR SCU

COMPANY MORNING REPORT

RESTRICTED

ENDING 2400 20 October (DAY) (MONTH) 194 4 (YEAR)

STATION Vicinity of Remerville, France

ORGANIZATION MD Hq Co 4th Armd Div MD
(CO, DET, ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	NO CHANGE		

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ — MEN PRESENT ____ LESS 7 — NET 0 — PLUS ____ — TOTAL

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES IN PART II REPRESENT AN ACTUAL MESS ATTENDANCE NO.

SIGNATURE W.B. CHOIX WOJG USA Ass't Adj Gen (RANK) (NAME) (TITLE)

W.D., A.G.O. FORM NO. MARCH 25, 1943

NO COPY THRU MRU OR SCU

COMPANY
MORNING REPORT
RESTRICTED

ENDING 2400 21 October 194 4
(DAY) (MONTH) (YEAR)

STATION Vicinity of Remerville, France

ORGANIZATION MD Hq Co 4th Armd Div MD
(CO. DET. ETC.) (FIXED UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	NO CHANGE		

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY 7 — MEN ATTEND TO OTHER ORGN FOR RATIONS — MEN ATTEND FOR RATIONS O & OTHERS MESSED — MEN PRESENT — LESS 7 — NET 0 — PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES ON THAT MORNING REPORT AN ACTUAL [illegible]

SIGNATURE E.B. CHOLY WOJG USA Personnel Off
(RANK)

W.D., A.G.O. FORM No. [illegible]
MARCH 27, 1943

WD COPY FROM MAIL OR RCD

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 22 (DAY) October (MONTH) 1944 4 (YEAR)

STATION Vicinity of Remerville, France

ORGANIZATION MD Hq Co 4th Armd Div MD
(CO., DET., ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change.		

RUE

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ — MEN PRESENT 0 — LESS 7 — NET 0 — PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES IN PART II REPRESENT AN ACTUAL COUNT REFERRED TO ME.

SIGNATURE W. B. CHUDY, WOJG USA Asst Adj
(NAME) (OFFICIAL CAPACITY)

W.D., A.G.O. FORM NO. 1
FORM 10 (1942)
WD CODE 1944 REV OF 1941

Ge. 0

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 23 October (DAY) (MONTH) 194 4 (YEAR)

STATION Vicinity of Remereville, France

ORGANIZATION MD Hq Co 4th Armd Div MD
(CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change.		

RUE

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ — MEN PRESENT 0 — LESS 7 — NET 0 — PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT ALL ENTRIES IN THIS REPORT REPRESENT AN ACTUAL CHANGE IN STRENGTH.

SIGNATURE W. B. CHOLY, WOJG USA Ass't Adj Genl
(NAME) (ZONE OF ACTION OR ORGANIZATION)

W.D., A.G.O. FORM NO. 1 MARCH 15, 1943 — WD COPY THRU HQ OR SCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 24 October 194 4

STATION Vicinity of Remereville, France

ORGANIZATION MD Hq Co 4th Armd Div MD

(CO. DET. ETC.) (STANDARD UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change.		

RWC

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — NET — TOTAL

MEN PRESENT 0 LESS 7 0 PLUS 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT THE FORCES IN ITS REPORT REPRESENT AN ACTUAL [illegible] TO ME

W. B. CHOLY, WO G USA Ass't Adj Gen

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

U.S. A.G.O. FORM NO. 1 MARCH 25, 1943

WD COPY THRU MRU OR SCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 25 October 194 4
(DAY) (MONTH) (YEAR)

STATION Vicinity of Remereville, France

ORGANIZATION MD Hq Co 4th Armd Div MD
(CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change.		

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY / MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — MEN ATCHD FOR RATIONS O & OTHERS MESSED — NET — TOTAL

MEN PRESENT 0 LESS 7 0 PLUS 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATIONS HAVE BEEN ISSUED AS ACTUAL

SIGNATURE W. B. CHOLY, WOJG USA Ass't Adj General.
(NAME) (SERVICE)

W.D., A.G.O. FORM NO. 1
MARCH 25, 1943

WD COPY THRU MRU OR SCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 26 (DAY) October (MONTH) 4 194 (YEAR)

STATION Vicinity of Remereville, France

ORGANIZATION MD Hq Co 4th Armd Div MD
(CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS ____ MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — MEN PRESENT 0 — LESS 7 — NET 0 — O & OTHERS MESSED ____ PLUS ____ — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT THE ENTRIES THEREIN REPRESENT AN ACTUAL

SIGNATURE W. B. CHOLY, WOJG USA Ass't Adj General.
(NAME) (TITLE)

W.D. A.G.O. FORM NO. 1 MARCH 15, 1933

WD COPY THRU NRD OR ECU

COMPANY MORNING REPORT

RESTRICTED

ENDING 2400 27 (DAY) October (MONTH) 194 4 (YEAR)

STATION Vicinity of Remerville, France

ORGANIZATION MD Hq Co 4th Armd Div MD
(CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY — MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — MEN ATCHD FOR RATIONS O & OTHERS MESSED — MEN PRESENT 0 — LESS 7 — NET 0 — PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION REQUIRED IN PART II REPRESENT AN ACTUAL MESS ATTENDANCE.

SIGNATURE H B CHOLY WOJG USA (NAME) Ass't Adj. Gen. (GRADE) (ARM OR SERVICE)

U.S. A.G.O. FORM NO. 1
MARCH 15, 1943

WD EGEY FORM MRN OR SCH

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 28 October 194 4
(DAY) (MONTH) (YEAR)

STATION Vicinity of Remereville, France

ORGANIZATION ~~MD Hq Co 4th Armd Division MD~~
(CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	~~No Change~~		

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

AVIA CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — MEN ATCHD FOR RATIONS ____ O & OTHERS MESSED ____

MEN PRESENT 0 LESS 7 NET 0 PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT ALL ENTRIES HEREIN PRESENT AN ACTUAL STATE OF AFFAIRS TO ME.

SIGNATURE W. B. CHOLY, MAJ USA Ass't Adj General.
(RANK) (OFFICIAL)

W.D. A.G.O. FORM No. 1
(MARCH 15, 1943)

WD COPY THRU MRU OR SCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 29 October 194 4
(DAY) (MO.) (YEAR)

STATION Vicinity of Remereville, France

ORGANIZATION MD Hq Co 4th Armd Div MD
(CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

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

AVIA CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DUTY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III. MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS O & OTHERS MESSED ____
MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — NET — TOTAL
MEN PRESENT 0 LESS 7 0 PLUS 0

PAGE 1 OF 1 PAGES

I certify that the above report is correct and that I have reason to believe an actual count has been made.

W. B. CHOLY, WOJG USA Ass't Adj Gen
SIGNATURE (RANK) (ARM OR SERVICE)

W.D. A.G.O. FORM NO. 1
MARCH 16, 1942

NO COPY THIS MANUAL OCH

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 30 October 1944 (DAY) (MONTH) (YEAR) 4

STATION Vicinity of Remereville, France

ORGANIZATION MD Hq 4th Armd Div MD
(CO., BN., ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change.		

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

AVIA CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — MEN ATCHD FOR RATIONS C & OTHERS MESSED ____

MEN PRESENT 0 LESS 7 NET 0 PLUS TOTAL 0

PAGE 1 OF 1 PAGES

(CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT THE MEN PRESENT REPRESENT AN ACTUAL

SIGNATURE W. B. CHOLY, WOJG USA Ass't Adj Gen
(NAME) (GRADE) (ARM OR SERVICE)

W.D. A.G.O. FORM NO. 1
MARCH 25, 1943

WD COPY THRU MRU OR SCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 31 (DAY) October (MONTH) 194 4 (YEAR)

STATION Vicinity of Romereville, France

ORGANIZATION MD Hq Co 4th Armd Div MD
(CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

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

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASSIGNED			6			6
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			6			6

RATIONS

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

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

III — MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD FOR RATIONS O & OTHERS MESSED ____
MEN ATCHD TO OTHER ORGN FOR RATIONS 7 — NET
MEN PRESENT 0 LESS 7 NET 0 PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT THE PART IS REPRESENT AN ACTUAL [illegible] REPORTED TO ME.

SIGNATURE W. B. CHOLY, WOJG USA Ass't Adj Gen
(NAME) (GRADE) (ATH OR SERVICE)

AGO FORM NO 1