COMPANY MORNING REPORT

Restricted

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

STATION Ingdiard Willicent Wiltshire VP 5306

ORGANIZATION Med 53rd Armd Inf Bn MD

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

SERIAL NUMBER	NAME	GRADE	CODE
	no changes		✓

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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 33 MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ MEN PRESENT 0 LESS NET 0 PLUS TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATIONS FIGURED IN PART II REPRESENT AN ACTUAL COUNT AS REPORTED TO ME.

H S HOLLOWAY JR CAPT MC

SIGNATURE

U.S. A.G.O. FORM NO. 8 JULY 1, 1943 (RANK) WD COPY THRU MRU OR SCU (GRADED ARM OR SERVICE)

Restricted

COMPANY MORNING REPORT

ENDING 2400 2 (DAY) July (MONTH) 194 4 (YEAR)

STATION Lydiard Willicent Wiltshire VP 5306

ORGANIZATION Med 53rd Armd Inf Bn MD

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

SERIAL NUMBER	NAME	GRADE	CODE
	no changes		✓

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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 33 O & OTHERS MESSED ____ MEN PRESENT : 0 LESS NET 0 PLUS TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES AS SHOWN REPRESENT AN ACTUAL COUNT AS REPORTED TO ME:

H S Holloway Jr

SIGNATURE H S HOLLOWAY JR CAPT MC

(NAME) (GRADE AND SERVICE)

U.S. A.S.F. FORM NO. 1 JULY 1, 1943

WD COPY THRU MRU OR SCU

Restricted

COMPANY MORNING REPORT

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

STATION Lydiard Millicent Wiltshire VP 5306

ORGANIZATION Med 53rd Armd Inf Bn (CO. DET. ETC.) (PARENT UNIT) MD (FROM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	no changes		

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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 33 — MEN PRESENT : 0 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 IN PART II REPRESENT AN ACTUAL COUNT AS REPORTED TO ME.

SIGNATURE H S HOLLOWAY JR CAPT MC

(GRADE) (WAR OR SERVICE)

E.A., A.G.O. FORM NO. 2 JULY 1, 1942 (NAME) WD COPY THRU MRU OR SCU

COMPANY
MORNING REPORT [redacted]ated 2400 4 July 194 4
(DAY) (MONTH) (YEAR)

STATION Lydiard Millicent Wiltshire VP 5306

ORGANIZATION Med Det 53rd Armd Inf Bn 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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 33 — MEN ATCHD FOR RATIONS O & OTHERS MESSED ____

MEN PRESENT 0 LESS 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 AS REPORTED TO ME.

SIGNATURE H S HOLLOWAY JR CAPT MC
(RANK) (GRADE, ARM OR SERVICE)

U.S. A.G.O. FORM NO. 1
MAY 1, 1943

WD COPY THRU NRU OR SCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 5 (DAY) July (MONTH) 194 4 (YEAR)

STATION Lydiard Millicent Wiltshire VP 5306

ORGANIZATION Med Det 53rd Armd Inf Bn MD

(CO. DET. ETC.) (PARENT UNIT) (ETO OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	no changes		

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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 ÷ 4 — AVERAGE

III MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD TO OTHER ORGN FOR RATIONS 33 — MEN ATCHD FOR RATIONS ____ O & OTHERS MESSED ____

MEN PRESENT 0 LESS — 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 AS REPORTED TO ME.

SIGNATURE H S HOLLOWAY JR CAPT MC

(GRADE) (GRADE) (GRADE) (RANK OR OFFICER)

W.D., A.G.O. FORM NO. 1 JULY 1, 1943

WD COPY THRU MRU OR SCU

Restricted

COMPANY MORNING REPORT

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

STATION Lydiard Millicent Wiltshire VP 5306

ORGANIZATION Med 53rd Armd Inf Bn MD

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

SERIAL NUMBER	NAME	GRADE	CODE
	no changes		

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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 33 — MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ — MEN PRESENT : 0 LESS NET 0 PLUS TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION PURCHASED OR PART IS REPRESENT AN ACTUAL COUNT AS REPORTED TO MA

H S HOLLOWAY JR CAPT MC

SIGNATURE

W.D., A.G.O. FORM NO. 1 ISSUED ISSUED UNDER AR 615-101
AUG 1, 1942 WD COPY THRU WRU OR SCU

COMPANY MORNING REPORT

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

STATION Lydiard Millicent, Wiltshire VP 5306

ORGANIZATION Med 53rd Armd Inf Bn MD
(CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	no changes		

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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 33 O & OTHERS MESSED ____
MEN PRESENT 0 LESS NET 0 PLUS TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT ENTRIES CHANGES OR PAGE IS REPRESENT AN ACTUAL COUNT AS REPORTED TO ME:

H S HOLLOWAY JR CAPT MC

SIGNATURE

W.D. A.G.O. FORM NO. 8 JULY 1, 1942 (RANK) WD COPY THRU MRU OR SCU (GRADE ARM OR SERVICE)

Restricted

COMPANY MORNING REPORT

ENDING 2400 8 (DAY) July (MONTH) 194 4 (YEAR)

STATION Lydiard Millicent Wiltshire VP 5306

ORGANIZATION Med 53rd Armd Inf Bn MD
(CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	no changes		

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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 33 — MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ — MEN PRESENT 0 LESS 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 AS REPORTED TO ME.

SIGNATURE H S HOLLOWAY JR CAPT MC

(GRADE ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1 JULY 1, 1942

(MAILING) WD COPY THRU MRU OR SCU

Restricted

COMPANY MORNING REPORT

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

STATION Dorchester Dorset

ORGANIZATION Med 53rd Armd Inf Bn (CO. DET. ETC.) (PARENT UNIT) MD (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	no changes		
	Record of Events		
	1-8 July 1944 at Lydiard		
	Millicent Wilts Usual		
	Camp Duties		
	9 July 1944 left Lydiard		
	Millicent Wilts at 0645 on		
	Mounted Road March to		
	Marshalling Area D-4 3 miles		
	South of Dorchester Dorset		
	Arrived at 1500 Distance		
	Marched 98 miles No accidents		

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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 33 — MEN ATCHD FOR RATIONS O & OTHERS MESSED ____

MEN PRESENT 0 LESS NET 0 PLUS TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES OR MEN UNREPRESENT AN ACTUAL COUNT AS REPORTED TO ME:

H S Holloway Jr

SIGNATURE H S HOLLOWAY JR CAPT MC

(RANK) (RANK WAR OR SERVICE)

U.S. S.P.O. FORM NO. 1 JULY 1, 1943

WD COPY THRU MRU OR SCU

COMPANY
MORNING REPORT

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

STATION Dorchester Dorset

ORGANIZATION Med 53rd Armd Inf Bn (CO. DET. ETC.) (PARENT UNIT) MD (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	no changes		
	Record of Events		
	At Marshalling Area D-4		
	awaiting Embarkation Orders		

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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 33 — MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ — MEN PRESENT 0 LESS 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 AS REPORTED TO ME:

SIGNATURE H S HOLLOWAY JR CAPT MC

P.R., A.A.G. FORM NO. 1 JULY 1, 1922 (GRADE) (GRADED ARM OR SERVICE)

WD COPY THRU MRU OR SCU

COMPANY MORNING REPORT

Restricted

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

STATION Dorchester Dorset

ORGANIZATION Med 53rd Armd Inf Bn MD

(CO. DET. ETC.) (PARENT UNIT) (FYM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	no changes		
	Record of Events		
	At Marshalling Area D-4		
	Awaiting Embarkation Orders		

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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 33 — O & OTHERS MESSED ____ — MEN PRESENT 0 — LESS — 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 AS REPORTED TO ME.

H S HOLLOWAY JR CAPT MC

SIGNATURE

(RANK) (NAME) (GRADE (ARM OR SERVICE))

WD COPY THRU MRU OR BCU

COMPANY
MORNING REPORT 2400 12 (DAY) July (MONTH) 194 4 (YEAR)

STATION Aboard LST 315
ORGANIZATION Med 53rd Armd Inf Bn (CO. DET. ETC.) (PARENT UN'T) MD (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	no changes		
	Record of Events		
	Left Marshalling Area D-4		
	at 0105 and arrived at		
	Weymouth Dorset Port at		
	0230 Distance Marched		
	12.9 miles No Accidents		
	Embarked at 1600		

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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 33 — MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ — MEN PRESENT 0 LESS 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 AS REPORTED TO ME:

SIGNATURE H S HOLLOWAY JR CAPT MC

(GRADE) (GRADE) (GRADE) (ARM OR SERVICE)

W.D. A.G.O. FORM NO. 3 JULY 1, 1943

WD COPY THRU MRU OR SCU

Restricted

COMPANY MORNING REPORT

ENDING 2400 13 (DAY) July (MONTH) 194 4 (YEAR)

STATION Aboard LST 315

ORGANIZATION Med 53rd Armd Inf Bn (CO., DET., ETC.) (PARENT UNIT) MD (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	no changes		

Record of Events
Left Weymouth Dorset Port
at 0430 Destination
Unknown
No accidents

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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 33 — MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ — MEN PRESENT : 0 LESS — NET 0 PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES AS THAT REPRESENT AN ACTUAL COUNT AS REPORTED TO ME:

H S HOLLOWAY JR CAPT MC

SIGNATURE

U.S., A.G.O. FORM NO. 1 JULY 1, 1940 (RANK) (RANK (ARM OR SERVICE))

WD COPY THRU MRU OR SCU

Restricted

COMPANY MORNING REPORT

ENDING 2400 14 (DAY) July (MONTH) 194 4 (YEAR)

STATION Barnesville Normandy

ORGANIZATION Med 53rd Armd Inf Bn (CO. DET. ETC.) (PARENT UNIT) MD (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	no changes		
	Record of Events		
	Arrived 5½ miles		
	Southeast of Barnesville		
	Normandy at 1310 14 July		
	1944 No accidents		

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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 33 — MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ — MEN PRESENT 0 LESS 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 AS REPORTED TO MESS

H S Holloway Jr

SIGNATURE H S HOLLOWAY JR CAPT MC (GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1 JULY 1, 1943 (RANK) WD COPY THRU MRU OR SCU

COMPANY MORNING REPORT

Restricted

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

STATION Barnesville Normandy

ORGANIZATION Med 53rd Armd Inf Bn (CO. DEV. ETC.) (PARENT UNIT) MD (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	no changes		✓

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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 33 — MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ — MEN PRESENT: 0 LESS NET 0 PLUS TOTAL 0

PAGE 1 OF 1 PAGES

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

H S Holloway Jr

SIGNATURE H S HOLLOWAY JR CAPT MC

U.S. A.G.O. FORM NO. 1 JULY 1, 1943 (GRADE) WD COPY THRU MRU OR SCU (GRADE) (ARM OR SERVICE)

COMPANY RESTRICTED
MORNING REPORT

ENDING 2400 16 (DAY) July (MONTH) 194 4 (YEAR)

STATION 5 3/4 mi SE Barneville France

ORGANIZATION Med (CO DET. ETC.) 53rd Armd Inf Bn (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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 33 — MEN ATCHD FOR RATIONS ____ O & OTHERS MESSED ____ — MEN PRESENT 0 LESS 0 NET 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 AS REPORTED TO ME:

SIGNATURE Reuben H. Johnson REUBEN H. JOHNSON CWO USA

(GRADE) (ARM OR SERVICE)

F.O., A.G.O. FORM NO. 1 JULY 1, 1943

(NAME)

WD COPY THRU MRU OR SCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 17 (DAY) July (MONTH) 1944 (YEAR)

STATION 4½ Mi SE Baupe France

ORGANIZATION Med (CO. DET. ETC.) 53rd Armd Inf Bn (PARENT UNIT) MD (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

RECORD OF EVENTS

Left Barneville Normandy at 1115 17 July 1944 and arrived at 1730 at 4½ mi SE of Baupe France Distance travelled 38 miles No accidents

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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 33 — MEN PRESENT 0 LESS 0 — NET — 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 IN ITEM II REPRESENT AN ACTUAL COUNT AS REPORTED TO ME.

SIGNATURE Reuben H Johnson REUBEN H JOHNSON CWO USA (GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1 (REV) WD COPY THRU MRU OR SCU

COMPANY RESTRICTED
MORNING REPORT

ENDING 2400 18 (DAY) July (MONTH) 1944 (YEAR)

STATION G C 328771 Periers France

ORGANIZATION Med (CO. DET. ETC.) 53rd Armd Inf Bn (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
ABGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ABGD			33			33
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			33			33

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 33 — MEN ATCHD FOR RATIONS ____ O & OTHERS MESSED ____ — MEN PRESENT : 0 LESS 0 — NET — PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION NUMBER AS SHOWN IS REPRESENT AN ACTUAL COUNT AS REPORTED TO ME:

SIGNATURE Reuben H Johnson REUBEN H JOHNSON CWO USA

(RANK) (GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1 JULY 2, 1943

WD COPY THRU MRU OR SCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 19 (DAY) July (MONTH) 194 4 (YEAR)

STATION Periers France

ORGANIZATION Med (CO. DET. ETC.) 53rd Armd Inf Bn (PARENT UNIT) MD (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
14047200	Seiber Buford A	Pvt	M
Dy to SWA			

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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			32			32
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			32			32

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 32 — NET — O & OTHERS MESSED ____ — TOTAL 0

MEN PRESENT: 0 LESS 0 PLUS

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION REQUIRED IN DAY IS REPRESENT AN ACTUAL COUNT OR REPORTED TO ME.

SIGNATURE REUBEN H JOHNSON CWO USA

W.D., A.G.O. FORM NO. 1 JULY 1, 1943 — WD COPY THRU MRU OR SCU — (BRANCH ARM OR SERVICE)

COMPANY RESTRICTED
MORNING REPORT ENDING 2400 20 (DAY) July (MONTH) 1944 (YEAR)

STATION Periers France

ORGANIZATION Med (CO. DET. ETC.) 53rd Armd Inf Bn (PARENT UNIT) MD (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
	No Change		

RECORD OF EVENTS

Det was ordered back to assembly area at 2000

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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			32			32
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			32			32

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 32 — O & OTHERS MESSED ____ — MEN PRESENT 0 LESS 0 NET PLUS 0 TOTAL

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES SHOWN IS REPRESENT AN ACTUAL COUNT AS REPORTED TO ME.

SIGNATURE Robert H. Johnson (NAME) CEO (GRADE) USA (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1 JULY 1, 1940

WD COPY THRU MRU OR SCU

COMPANY RESTRICTED
MORNING REPORT

ENDING 2400 21 (DAY) July (MONTH) 1944 (YEAR)

STATION Periers France 339777

ORGANIZATION Med (CO. DET. ETC.) 53rd Armd Inf Bn (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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			32			32
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			32			32

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 32 — MEN PRESENT 0 LESS 0 — NET — 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 IN PART II REPRESENT ACTUAL COUNT AS REPORTED TO ME.

SIGNATURE Edward H Johnson CWO USA

W.D., A.G.O. FORM NO. 8 JULY 1, 1940 (REPLACES WD AGO FORM 8, 1 JAN 1940, WHICH MAY BE USED) WD COPY THRU NRU OR SCU

COMPANY MORNING REPORT RESTRICTED

ENDING 2400 22 (DAY) July (MONTH) 1944 (YEAR)

STATION Periers France 339777

ORGANIZATION Med 53rd Armd Inf Bn 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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			32			32
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			32			32

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 32 O & OTHERS MESSED ____
MEN PRESENT : 0 LESS 0 NET 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 AS REPORTED TO ME.

SIGNATURE Reuben H. Johnson (NAME) CWO (GRADE) USA (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1 JULY 1, 1943

WD COPY THRU MRU OR SCU

COMPANY MORNING REPORT RESTRICTED

ENDING 2400 23 (DAY) July (MONTH) 1944 (YEAR)

STATION Pariers France 339777

ORGANIZATION Med 53rd Armd Inf Bn WD
(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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			32			32
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			32	0		32

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 32 — NET — MEN PRESENT: 0 LESS 0 PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES IN PART II ARE BASED ON AN ACTUAL COUNT AS REPORTED TO ME.

SIGNATURE Robert H. Johnson CWO USA

W.D. A.G.O. FORM NO. 1 JULY 1, 1943 (NAME) (GRADE) (ARM OR SERVICE)

WD COPY THRU MSU OR SCU

COMPANY RESTRICTED
MORNING REPORT

ENDING 2400 24 (DAY) July (MONTH) 1944 (YEAR)

STATION Periers France 339777

ORGANIZATION Med 53rd Armd Inf Bn WD
(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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			32			32
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			32			32

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

III MEN AUTHORIZED TO MESS SEPARATELY ____ MEN ATCHD TO OTHER ORGN FOR RATIONS 32 — MEN PRESENT 0 — LESS 0 — NET — MEN ATCHD FOR RATIONS O & OTHERS MESSED ____ — PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS REPORT IS CORRECT AND THAT RATION STRENGTH IS FOR 0 DEPENDENTS, NO ACTION EXCEPT AS REPORTED TO US.

SIGNATURE Robert H Johnson CWO USA
(GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 2 JULY 1, 1943

WD COPY THRU MSU OR SCU

RESTRICTED

COMPANY MORNING REPORT

ENDING 2400 25 (DAY) July (MONTH) 1944 (YEAR)

STATION Periers France 339777

ORGANIZATION Med 53rd Armd Inf Bn 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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			32			32
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			32			32

RATIONS

I ESTIMATED NUMBER OF RATIONS REQUIRED FOR } DAY OF WEEK ____ DATE ____ NUM-IN

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 32 — MEN ATCHD FOR RATIONS ____ O & OTHERS MESSED ____ — MEN PRESENT 0 LESS 0 NET PLUS 0 TOTAL

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES IN PART II AGREE WITH ACTUAL COUNT AS REPORTED TO ME.

SIGNATURE Reuben H. Johnson CWO USA
(GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1 (Rev.) JULY 1, 1943

WD COPY THRU MRU OR SCU

COMPANY RESTRICTED
MORNING REPORT

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

STATION Periers France 339777

ORGANIZATION Med 53rd Armd Inf Bn MD
(CO, DET, ETC.) (PRESENT STATION) (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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			32			32
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			32			32

RATIONS

I ESTIMATED NUMBER OF RATIONS REQUIRED FOR } DAY OF WEEK ____ DATE ____ NUM-LR

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 32 MEN ATCHD FOR RATIONS ____ O & OTHERS MESSED ____ MEN PRESENT: 0 LESS 0 NET ____ PLUS ____ TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATIONS PRESENT ON FORM II AGREE WITH AVERAGE AS REPORTED TO MD.

SIGNATURE Reuben H Johnson REUBEN H JOHNSON CWO USA

(RANK) (GRADE) (ARM OR SERVICE)

D.A., A.G.O. FORM NO. 1 AUG 1, 1940

WD COPY THRU MRU OR SCU

COMPANY RESTRICTED
MORNING REPORT

ENDING 2400 27 (DAY) July (MONTH) 1944 (YEAR)

STATION Periers France 339777

ORGANIZATION Med 53rd Armd Inf Bn 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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			32			32
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			32			32

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 32 — NET — O & OTHERS MESSED ____ — TOTAL 0
MEN PRESENT 0 MESS 0 PLUS

PAGE 1 OF 1 PAGES

I CERTIFY THAT THE MORNING REPORT IS CORRECT AND THAT RATION [illegible] DUTY IS REPLACEMENT OR RETURN CADET AS REPORTED TO MY [illegible]

SIGNATURE Reuben W. Johnson CWO USA

U.S. L.S.S. FORM NO. 1 (MAR) (ARMY) COPY THRU MSG OR SCV (RANK) (ARM OR SERVICE)

COMPANY MORNING REPORT

ENDING 2400 28 (DAY) July (MONTH) 1944 (YEAR)

STATION Vicinity Coutance 237567

ORGANIZATION Med 53rd Armd Inf Bn 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
ASGD	3									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	3									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			32			32
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			32			32

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 32 — NET — O & OTHERS MESSED ____
MEN PRESENT 0 LESS 0 — PLUS — TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION STRENGTH AS SHOWN IS SUFFICIENT TO ACCOUNT AS REPORTED TO ME.

SIGNATURE Charles W. Johnson CWO USA

W.D., A.G.O. FORM NO. 1 MAY 1, 1943 — WD COPY THRU MRU OR RCU — (REVERSE SIDE OF REPORT)

COMPANY MORNING REPORT RESTRICTED

ENDING 2400 29 (DAY) July (MONTH) 1944 (YEAR)

STATION Coutances France 228508

ORGANIZATION Med 53rd Armd Inf Bn MD
(CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
O 441415	Pohowsky	Capt	M
Dy to SWA trfd to 103rd Evac Hosp			
Battle Casualty Dropped fr assignment			
38469910	Jackson	Pvt	M
Dy to KIA			K-77

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
ASGD	2									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	2									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			31			31
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			31			31

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 31 O & OTHERS MESSED ____ MEN PRESENT 0 LESS NET PLUS TOTAL 0

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES ON PAGE 1 REPRESENT AN ACTUAL COUNT AS REPORTED TO ME.

SIGNATURE Reuben H Johnson CWO USA
(RANK) (GRADE) (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1 JULY 1, 1943

WD COPY THRU MRU OR SCU

COMPANY RESTRICTED
MORNING REPORT ENDING 2400 30 (DAY) July (MONTH) 1944 (YEAR)

STATION Avranches France 293178

ORGANIZATION Med 53rd Armd Inf Bn MD
(CO. DET. ETC.) (PARENT UNIT) (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
32091876	Guilfoyle	Pfc	M
Dy to LWA trfd to 103 Evac Hosp Battle Casualty dropped fr asgmt as of 29 July 1944			

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
ASGD	2									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	2									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			30			30
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			30			30

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 30 — MEN PRESENT 0 — LESS 0 — NET — 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 IN PART II REPRESENT AN ACTUAL COUNT AS REPORTED TO ME:

SIGNATURE Ruben H. Johnson (NAME) CMC (GRADE) USA (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1 JULY 1, 1943

WD COPY THRU MEU OR SCU

COMPANY MORNING REPORT RESTRICTED ENDING 2400 31 (DAY) July (MONTH) 1944 (YEAR)

STATION Avrahches France 282112

ORGANIZATION Med (CO. DET. ETC.) 53rd Armd Inf Bn (PARENT UNIT) MD (ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
32073191	Sokol	Pvt	M
36395833	Shaw	Tec 5	M
Above 2 EM Dy to LWA trfd to hosp. Battle Casualty dropped fr asgmt			
32148884	Slowik	Tec 5	M
Dy to SWA trfd to 35th Evac Hosp Battle Casualty dropped fr asgmt			

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
ASGD	2									
ATCHD UNASGD										
ATCHD FR OTHER ORGN										
TOTAL	2									

AVN CADET & ENL STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DY	ABSENT	PRESENT AND ABSENT
ASGD			27			27
ATCHD UNASGD						
ATCHD FR OTHER ORGN						
TOTAL			27			27

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 27 — MEN ATCHD FOR RATIONS ____ O & OTHERS MESSED ____ — MEN PRESENT 0 — LESS 0 — NET — 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 AS REPORTED TO ME:

SIGNATURE Reuben H. Johnson (NAME) CWO (GRADE) USA (ARM OR SERVICE)

W.D., A.G.O. FORM NO. 1 JULY 1, 1943

WD COPY THRU MRU OR SCU