

ORGANIZATION: *U.S. ARMY*
 STATION OR LOCATION: *Fort Belvoir, Colorado*
 NAME: *NO. 108000*
 SERIAL NUMBER: _____ GRADE: _____ RANK: _____ CODE: _____

ITEM	QTY	UNIT	TOTAL	PRESENT				ABSENT					
				PCN	DCLY	SR	SR	PCN	DCLY	SR	SR		
GEN													
COL													
LT	1		1		1								
MAJ													
CAPT	2		2		2								
1ST LT													
2ND LT													
PLT	3		3		3								
WO1													
1SGT													
2SGT	1		1		1								
3SGT	1		1		1								
4SGT	1		1		1								
5SGT	1		1		1								
6SGT	1		1		1								
7SGT	1		1		1								
8SGT	1		1		1								
9SGT	1		1		1								
10SGT	1		1		1								
11SGT	1		1		1								
12SGT	1		1		1								
13SGT	1		1		1								
14SGT	1		1		1								
15SGT	1		1		1								
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41SGT	1		1		1								
42SGT	1		1		1								
43SGT	1		1		1								
44SGT	1		1		1								
45SGT	1		1		1								
46SGT	1		1		1								
47SGT	1		1		1								
48SGT	1		1		1								
49SGT	1		1		1								
50SGT	1		1		1								

W/S

I CERTIFY THAT THIS INVENTORY REPORT IS CORRECT. PAGE 1 OF 1 PAGES

John A. ...

PRIVATE ...



STRENGTH REPORT

ORGANIZATION: **1st Lt. [illegible]** STATION OF LOCATION: **1st Lt. [illegible]**

NAME: **[illegible]** SERIAL NUMBER: **[illegible]** GRADE: **[illegible]** CODE: **[illegible]**

No Change

**ARMY
FORM 1**

(1)	ABSD (2)	ATCND UNASD (3)	TOTAL (4)	ATCND PASSED OR'S (5)	PRESENT				ABSENT				
					FOR DUTY (6)	NOT FOR DUTY (7)	Y D D S (8)	NA (9)	CONF (10)	LN (11)	AWOL (12)	DECE (13)	
CO													
LT	1		1		1								
SAJ													
DRPT GT	2		2		2								
LT													
STP													
WV H	3		3		3								
MSGT													
1ST	1		1		1								
2ND	1/0		1/0		1/0								
3RD	1/0		1/0		1/0								
4TH	0/3		0/3		0/3								
5TH	1		1		1								
6TH													
7TH	2/0		2/0		2/0								

I CERTIFY THAT THIS REPORTING REPORT IS CORRECT. PAGE 1 OF 1 PAGES

SIGNATURE: *[Signature]*
MAJOR F. GARDNER
1ST LT. [illegible]

MORNING REPORT RPT. NO. 1000

ORGANIZATION: [REDACTED]

STATION OR LOCATION: [REDACTED]

DATE: [REDACTED] SERIAL NUMBER: [REDACTED] GRADE: [REDACTED] NO. [REDACTED] CODE [REDACTED]

No Changes

(1)	AERO	AERO NUMBER	TOTAL	STERN NUMBER ORG'S	FACILITY				AGENT				MED. INC.
					FOR	NOV FOR	D A	SW	CGRS	FBW	AWGL	INC.	
(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)		
GEN													
CEL													
LT	1		1		1								
WAL													
AWT	2		2		2								
HT													
LI													
MD													
IT													
TOT	3		3		3								
RES													
WST													
TENT	1		1		1								
TRF	1/0		1/0		1/0								
TRF	1/0		1/0		1/0								
TRF	0/2		0/2		0/2								
TRF	1		1		1								
PAT													
TRF	4/2		4/2		4/2								

I CERTIFY THAT THIS MORNING REPORT IS CORRECT

SIGNATURE: [Handwritten Signature]

NOTICE: [Handwritten Notice]



