

# INDIVIDUAL DECEASED PERSONNEL FILE

AGRS APO 58  
10-3-49

TYPE PKG.	9071	TALLY	BOX	PALLET	BAY
G/B	36965690		Pvt	Nevala, Jacob	

Serial No. 36965690 Name NEVALA, JACOB  
 Grade ..... Rank Pvt  
 Organization .....  
 Address .....  
 Nearest Relative .....  
 Address .....  
 Killed in Action ..... Died of Disease .....  
 Date ..... Hospital .....  
 Battle Area ..... Information .....

Place of Burial Mary, KKK-11-265  
 Point of Coordination .....  
 Description of Body MARGRATEN  
 Members Missing .....

Signed .....

QMGOD 293. Nevala, Jacob, Pvt.  
SN 36 965 690

1st Ind

Department of the Army, OQMG, Washington 25, D. C., 21 October 1949

TO: Commanding Officer, Quartermaster Activities  
Kansas City Records Center (AGO), Missouri  
ATTENTION: Effects Quartermaster

Information requested has been entered on basic form.

BY COMMAND OF MAJOR GENERAL FELDMAN:

*William F. Conlon*  
WILLIAM F. CONLON  
Major, QMC  
Field Service Division

  
fer

GREEN COPY

ARMY SERVICE FORCES  
KANSAS CITY QUARTERMASTER DEPOT  
ARMY EFFECTS BUREAU  
801 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

S-7 November 1949  
HOC/DF/vlm  
7 October 1949

IN REPLY REFER TO 299,386

REQUEST FOR INFORMATION

Nevala, Jacob Pvt 36965690  
(Name) (Rank) (ASN)

INFANTRY 38TH ARMD INF BN

(Following to be filled in by OQMG). Branch of Service and/or Organization

DATE OF DEATH 7 NOVEMBER 1944

PLACE OF CASUALTY EUROPEAN AREA: HOLLAND

NEXT OF KIN MRS. HAZEL LONGTINE WIDOW (REMARRIED)  
(Name) (Relationship)

ADDRESS 414 CRAIG STREET, MARQUETTE, MICHIGAN

PREVIOUS SHIPMENT YES  NO (Check one)

DATE OF LAST PREVIOUS SHIPMENT (If any) \_\_\_\_\_

SUMMARY COURT MADE (Eff QM Form 75) Yes  No (Check one)

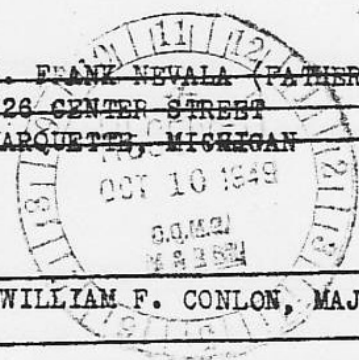
TO WHOM (If made) \_\_\_\_\_  
(If same as NOK, write same)

Write below the name and address of an alternate beneficiary or an individual we have previously contacted in the case file. If a relative, list his relationship. This information will be used only if the next of kin noted above cannot be located.

DONNA M. NANCYOG &  
MICHAEL F. NEVALA (CHILDREN)  
SAME AS WIDOW'S  
MR. FRANK NEVALA (FATHER)  
426 CENTER STREET  
MARQUETTE, MICHIGAN

Signature WILLIAM F. CONLON, MAJOR, QMC

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Attached hereto correspondence and/or other identifying media of possible archival value, pertaining to:

*242*

NEVALA	JACOB		PVT	36965690
(Last Name)	(First Name)	(Initial)	(Rank)	(ASN)

Repatriated to the United States: \_\_\_\_\_

- 5 MAR 1949

STATION FILE

Incl #

REPORT OF INVESTIGATION GRAVE SEARCHING

To be completely filled out and attached to each copy of GR Form 1, "Report of Burial" when disinterment is accomplished.

Jacob Nevala Pvt 36265690 38th Armd Inf Bn.

1. (Full name of deceased) (IBN) (ASN) (Organization)
2. State if identification tags were attached to remains, how many, and where attached.   
 (2) Identification tags on chain around neck of deceased.
3. Give exact location from which disinterred, furnishing coordinates and map series, etc.   
 Belgium & N.E. Parcel: 100,000 Maeserck 1st Edition Sheet 4 Series: 67D 40.
- NOTE: ATTEMPT OVERLAY SHOWING EXACT LOCATION OF DISINTERRED GRAVE FROM LOCATION IN WITH PERMANENT LAND MARK.
4. Full name of cemetery (include plot, row and grave if organized cemetery)   
 Isolated burial.
5. Approximate or established date of death (state which and give basis for date selected)   
 Nov. 4-1944; per case record #734. (believed to be)
6. Approximate or established date of burial (give basis for date established)   
 Date of burial unknown
- Manner in which grave was marked and all information contained on the marker   
 Helmet w/ liner-no markings.
8. List personal effects found in possession of civilian or unauthorized military personnel, furnishing name and address of individual concerned   
 Personal effects of the deceased were recovered.
9. Names and addresses of all persons questioned concerning death or burial and information each furnished (contact local mayor, priest, cemetery caretaker, those responsible for burial and any other possessing important information)   
 Lt. J. Langhe Digt 1st Lt. J. Langhe, Holland. Information given with reference to date and location of burial.
10. If buried in a coffin, give description and markings   
 Deceased was not buried in coffin, but in own clothing.
11. Action taken.   
 Deceased disinterred and evacuated to Hq US Mil-Cem, Mergraten, Holland by 3600th QM Co, Reg Co, APO 562 US Army.   
 Disinterment approved by Hq 3060th QM Gr Reg Co, APO 562 US Army   
 Disinterment and reburial/burial made by   
 Date of reburial/burial Sept 9 1945 Mergraten, Holland by Hq 603rd QM Gr   
 Place of reburial/burial US Military Cemetery, Reg Co, APO 562 US Army   
 Plot XXX Row 11 Grave 265

NOTE: Additional particulars regarding investigation will be placed on reverse side.

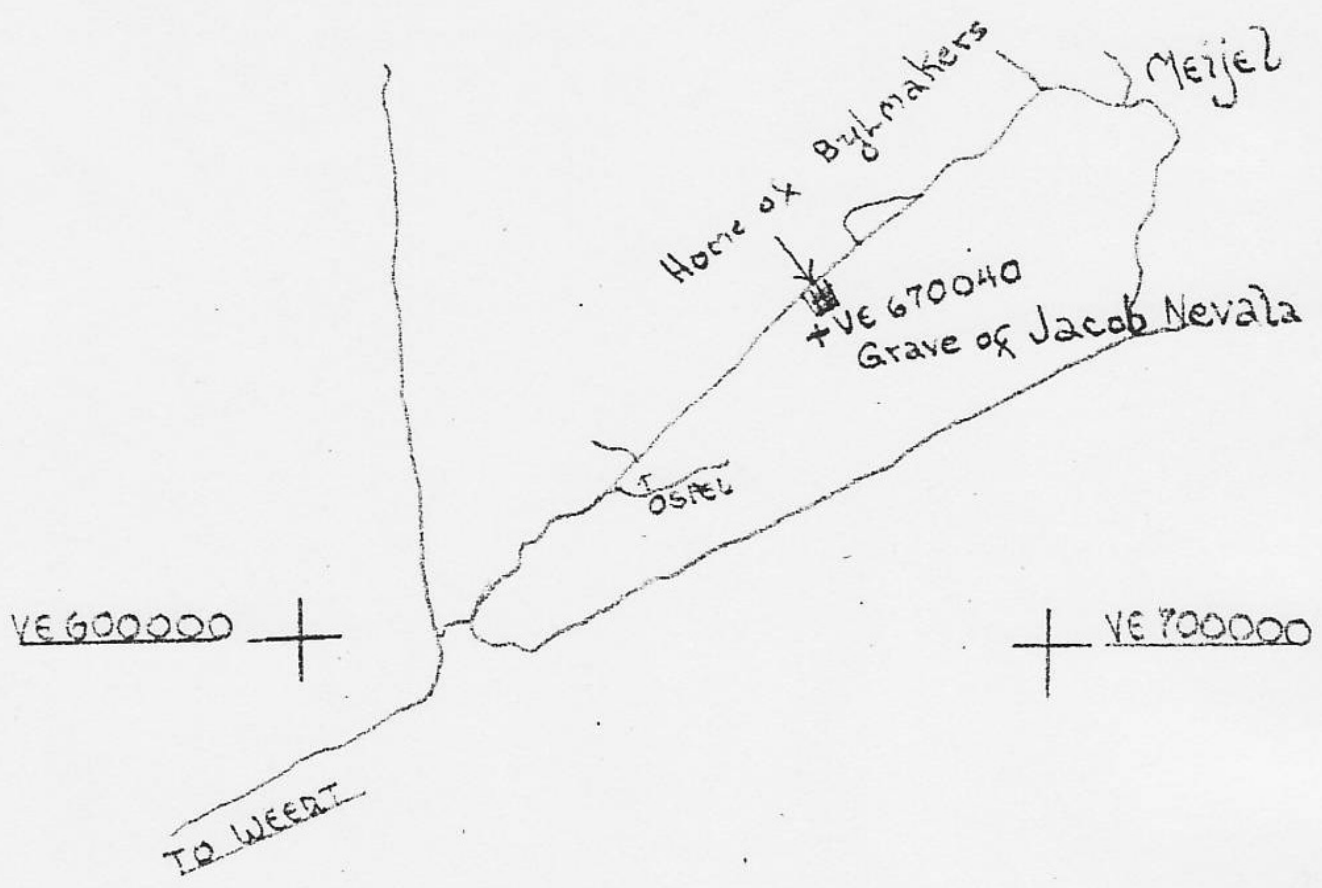
Register NO: #734 (Holland)

\*Cross out word not applicable

Signature of Investigating Officer   
 N. F. ...   
 Rank ACW

784

+ VE 700100



Belgium + N.E. France 1:100,000 Maeseuyck  
 Sheet 4 1<sup>st</sup> Edition

Handwritten notes at the bottom left.

Handwritten notes at the bottom center.

WESTERN UNION

RECEIPT OF REMAINS

DELIVER AND REPORT ANY CHARGES

DISTRIBUTION CENTER 1819 W. PERSHING RD., CHICAGO 9 ILL. ROUTINE

DAY LETTER

REMAINS CONSIGNED TO:

SWANSON'S FUNERAL HOME  
926 NORTH THIRD STREET  
MARQUETTE, MICHIGAN

77  
REMAINS OF THE LATE PVT. JACOB NEVALA, SN 36965690

BEING SHIPPED TO YOU ACCOMPANIED BY MILITARY ESCORT. ON TRAIN NUMBER 8

DSS&A RR

DUE TO ARRIVE MARQUETTE, MICH., 7:30 AM FRIDAY 15 APRIL 1949

REQUEST THAT YOU IMMEDIATELY INFORM THE NEXT OF KIN AND MAKE ARRANGEMENTS TO ACCEPT REMAINS AT STATION UPON ARRIVAL. REFER TO CONTROL NUMBER 20355

THOS. O. CALL  
MAJOR, Q.M.C.

I, the undersigned, do hereby acknowledge receipt of the remains of the above named deceased  
this 15 (Day) day of April (Month), 19 49

NAT FILE RECORDS ASSOCIATED  
DATE 3 JUN 1949  
NAME J. J. Smith  
R & R RR.

Sgt Byron L Healy  
(Witness (Escort))

Albert E. Swanson  
(Consignee)



SECTION A — NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER <b>4650 11669</b>		DATE <b>15 10 48</b> <small>DAY MONTH YEAR</small>	
NAME <b>NEVALA JACOB</b>		SERIAL NUMBER <b>36965690</b>	GRADE <b>PVT</b>	ARM <b>1</b>	RACE <b>1</b>
CEMETERY <b>MARGRATEN HOLLAND</b>		PLOT <b>KKK</b>	ROW <b>11</b>	GRAVE <b>265</b>	DISPOSITION OF REMAINS <b>6200 08</b> <small>CODE DIST. CT</small>
SECTION B — CONSIGNEE AND NEXT OF KIN					
NAME AND ADDRESS OF CONSIGNEE <b>SWANSON'S FUNERAL HOME- 926 NORTH THIRD STREET MARQUETTE, MICHIGAN</b>			NAME AND ADDRESS OF NEXT OF KIN <b>MR. FRANK NEVALA (FATHER) 426 CENTER STREET MARQUETTE, MICHIGAN</b>		
SECTION C — DISINTERMENT AND IDENTIFICATION					
NAME		SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISTINTERRED
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER		ORGANIZATION <b>USAGF</b>		RELIGION	IDENTIFICATION VERIFIED BY  <small>NAME AND TITLE</small>
SECTION D — PREPARATION OF REMAINS FOR SHIPMENT					
NATURE OF BURIAL			CONDITION OF REMAINS		
OTHER MEANS OF IDENTIFICATION  <b>SEE ATTACHED SHEET</b>					
MINOR DISCREPANCIES ( <i>Prepare Discrepancy Report QMC Form 1194a for major discrepancies.</i> )					
REMAINS PREPARED AND PLACED IN CASKET					
DATE		BY		EMBALMER ( <i>Signature</i> )	
CASKET SEALED BY					
CASKET BOXED AND MARKED		SHIPPING ADDRESS VERIFIED BY			
DATE		BY			
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.					
					SIGNATURE OF AGRS INSPECTOR
REMARKS AND SPECIAL INSTRUCTIONS					

5177

SECTION A —  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

NAME

NEVALA JACOB

SERIAL NUMBER

36965690 PVT

RANK

ARM

1

DAY MONTH  
DATE OF DEATH

CEMETERY

PLOT ROW GRAVE COUNTRY

KKK 11 265 MARGRATEN HOLLAND

DAY MONTH  
DISPOSITION OF

CODE DIS  
CAUSE OF DEATH

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

NAME AND ADDRESS OF NEXT OF KIN

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

JACOB NEVALA

SERIAL NUMBER  
36965690

RANK  
PVT

DATE OF DEATH

DATE DISTINTERRED  
11 AUG 48

IDENTIFICATION TAG ON

REMAINS  
 MARKER

ORGANIZATION

RELIGION  
P

IDENTIFICATION VERIFIED BY  
CLYDE B. SPIRITS  
CPT, FA

NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

UNIFORM

CONDITION OF REMAINS CRUSTED SKULL - FRACTURED  
MANDIBLE, R/L CLAVICLE & SCAPULA - PROXIMAL  
END OF R/HUMERUS MISSING - L/RADIUS MISSING  
ADVANCED STAGE OF DECOMPOSITION

OTHER MEANS OF IDENTIFICATION

NONE

MINOR DISCREPANCIES

NONE

REMAINS PREPARED AND PLACED IN CASKET

DATE 26 SEPT 48

BY ELAM E. POORBAUGH, EMBALMER

CASKET SEALED BY

ELAM E. POORBAUGH

EMBALMER (Signature)

ELAM E. POORBAUGH

CASKET BOXED AND MARKED

DATE 28 SEPT 48  
BY

DONALD L. HOPKINS  
CLERK RECORDER

SHIPPING ADDRESS VERIFIED BY ALL TAGS, MARKINGS &  
PLACES VERIFIED BY  
ROBERT W. GANSEL, 1/LT, OIC

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.

ROBERT W. GANSEL, 1/LT, OIC

SIGNATURE OF GRS INSPECTOR

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

*Raymond S. Johnson*  
*1st Lt*

CASE NO	<b>INSPECTION CHECK LIST</b>				NY	SPACE NO. <span style="font-size: 2em;">246</span>
NAME OF DECEASED ( <i>Last, First, Middle Initial</i> ) <b>NEVALA, JACOB</b>			BRANCH OF SERVICE <b>ARMY</b>	RACE <b>W</b>	RELIGION <b>P</b>	SEX <b>M</b>
RANK OR GRADE <b>PVT</b>		SERIAL NUMBER <b>36965690</b>	STANSON'S FUNERAL HOME 926 NORTH THIRD ST., MARQUETTE, MICHIGAN			
SHIPPING CASE—GENERAL APPEARANCE ( <i>Check ONLY Discrepancies</i> )			CONDITION OF SHIPPING CASE ( <i>Check One</i> )			
			<input type="checkbox"/> SATISFACTORY <span style="float:right;"><input type="checkbox"/> UNSATISFACTORY</span>			
FINISH ( <i>Exterior</i> )			REMARKS			
FINISH ( <i>Interior</i> )						
HANDLES						
HANDLE BOLTS						
STENCILING—NAME PLATE						
HEALTH PERMIT MARKER						
HEALTH PERMIT NUMBER						
CASKET—GENERAL APPEARANCE ( <i>Check ONLY Discrepancies</i> )			CONDITION OF CASKET ( <i>Check One</i> )			
			<input checked="" type="checkbox"/> SATISFACTORY <span style="float:right;"><input type="checkbox"/> UNSATISFACTORY</span>			
FINISH ( <i>Exterior</i> )			REMARKS			
HANDLES AND FASTENINGS						
STENCILING—NAME PLATE						
CAM LOCKS ( <i>Sealing</i> )						
ODOR OR MOISTURE						
<b>ROUTED THROUGH</b>						
<input type="checkbox"/> MORTUARY OPERATING ROOM			<input type="checkbox"/> REPAIR SHOP			
CONDITION OF REMAINS			CASKET REPAIRED			
<input type="checkbox"/> SATISFACTORY <span style="float:right;"><input type="checkbox"/> UNSATISFACTORY</span>			<input type="checkbox"/> YES <span style="float:right;"><input type="checkbox"/> NO</span>			
NECESSARY DISINFECTION ( <i>Explain</i> )			CASKET EXCHANGED			
			<input type="checkbox"/> YES <span style="float:right;"><input type="checkbox"/> NO</span>			
			SHIPPING CASE REPAIRED			
			<input type="checkbox"/> YES <span style="float:right;"><input type="checkbox"/> NO</span>			
			SHIPPING CASE EXCHANGED			
			<input type="checkbox"/> YES <span style="float:right;"><input type="checkbox"/> NO</span>			
			REMARKS			
TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTOR	
				6/4		
REMARKS						

WU B134 30 GOVT COLLECT

MARQUETTE MICH MAR 10 1949 602P

THOS O CALL QMC

REFER CONTROL NO 20355. REGARDING REMAINS PVT JACOB NEVALA  
ARE TO BE SHIPPED SWANSONS FUNERAL HOME 926 NORTH THIRD ST  
MARQUETTE MICH MY ADDRESS 426 CENTER ST MARQUETTE MICH  
FRANK NEVALA

735P

20355 926 426..

FILED

MAR 11 1949

AGR DIV., CHICAGO QUARTERMASTER DEPOT  
1819 W. PERSHING RD., CHICAGO 9, ILL.

WESTERN UNION  
DAY LETTER

DELIVER AND REPORT ANY CHARGES

**MR. FRANK NEVALA**  
**426 CENTER STREET**  
**MARQUETTE, MICHIGAN**

**FILE**

WE HAVE BEEN ADVISED THAT REMAINS OF THE LATE

**PVT JACOB NEVALA**

ARE ENROUTE TO THE UNITED STATES

OUR RECORDS INDICATE YOU WISH REMAINS DELIVERED TO **SWANSON'S FUNERAL HOME,**

**926 NORTH THIRD STREET, MARQUETTE, MICHIGAN**

PLEASE CONFIRM YOUR ORIGINAL INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS WITHIN 48 HOURS BY TELEGRAM COLLECT TO CHICAGO QUARTERMASTER DEPOT AGRD 1819 WEST PERSHING ROAD CHICAGO ILLINOIS, INCLUDING FULL NAME OF DECEASED AND YOUR CORRECT ADDRESS. YOUR REQUEST FOR CHANGE IN DELIVERY INSTRUCTIONS AFTER 48 HOURS HAVE ELAPSED CANNOT BE COMPLIED WITH AT GOVERNMENT EXPENSE. DELIVERY OF REMAINS WILL BE MADE AS SOON AS PRACTICABLE AFTER RECEIVED HOWEVER MANY FACTORS BEYOND OUR CONTROL MAY DELAY DELIVERY SEVERAL WEEKS. AT LEAST THREE DAYS PRIOR TO SHIPMENT OF REMAINS ACCOMPANIED BY MILITARY ESCORT YOUR FUNERAL DIRECTOR WILL BE NOTIFIED BY TELEGRAM OF METHOD OF TRANSPORTATION AND TIME OF ARRIVAL AND REQUESTED TO NOTIFY YOU. IF YOU DESIRE MILITARY HONORS AT FUNERAL YOU SHOULD ASK LOCAL VETERANS ORGANIZATIONS TO MAKE ARRANGEMENTS. IN REPLY REFER TO CONTROL NO. **20355**

**THOS. O. CALL**  
**Major, QMC**

**C. M. ODENWALDER**  
**Capt., QMC**

# REQUEST FOR REIMBURSEMENT OF INTERMENT OR TRANSPORTATION EXPENSES

(Read Explanation on Reverse Side before completing form)

DATE

16 April 1949

NAME OF DECEDENT (Last, First, Middle Initial)

NEVALA, JACOB

BRANCH OF SERVICE

ARMY

TO BE FILLED IN BY CLAIMANT

A.  INTERMENT EXPENSES (Civilian or Private Cemetery)

B.  TRANSPORTATION EXPENSES (National or Post Cemetery)

RANK OR GRADE

PVT.

SERIAL NO.

36965690

### INSTRUCTIONS TO PERSONS SIGNING THIS FORM

1. This form is NOT to be signed by Funeral Director.  
XXXXXXXXXX Sign Original Only
2. Fill in as required and sign four copies.
3. Check Box "A" or Box "B" above, not both.
4. Check Box "A" when interment is in a civilian or private cemetery.
5. Check Box "B" when remains are delivered to home or other place prior to burial in a national or post cemetery.

FORWARD COPY  
QUARTERMASTER GENERAL  
ATTN: HDGDD

TO OFFICE OF  
WASHINGTON 25, D. C.  
ATTN: R. S.

CLAIM VALID-REPARATION

MAY 3 1949

FILL IN THIS STATEMENT IF BOX "A" IS CHECKED

I certify that the sum of \$ 250.00 was paid by me from personal funds in connection with the interment of the remains of the above-named decedent in the cemetery indicated below:

NAME: *Mark Cemetery*  
CITY OR COUNTY: *Marquette*  
STATE: *Michigan*

RETURN FOUR COPIES TO  
COMMANDING OFFICER  
CHICAGO QUARTERMASTER DEPOT  
1819 WEST PERSHING ROAD  
CHICAGO 9, ILLINOIS  
ATTN: AGR DIVISION

FILL IN THIS STATEMENT IF BOX "B" IS CHECKED

I certify that the sum of \$ \_\_\_\_\_ was paid by me from personal funds in connection with the transportation of the remains of the above-named decedent from: (City, town, or place from which remains were shipped)

TO: (Name and Location of National or Post Cemetery)

SIGNATURE OF CLAIMANT

MR. FRANK NEVALA

ADDRESS (Street number or RFD, City and State)

426 CENTER ST., MARQUETTE, MICH.

RELATIONSHIP TO DECEDENT

FATHER

REMARKS

176330

F. O., U. S. ARMY, CHICAGO, ILL.

PAID ON

NOV 16 1949 THIS)

MONEY ACCOUNTS OF E. E. DOEL

LT. COL., F. D., Symbol Number 210-587

COPY

# REQUEST FOR DISPOSITION OF REMAINS

GRADE OF DECEASED, NAME, ARMY SERIAL NUMBER AND REPORTED PLACE OF BURIAL

DATE:

Pvt. Jacob Nevala, 36 965 690  
 Plot KKK, Row 11, Grave 265  
 United States Military Cemetery  
 Margraten, Holland

26 JUL 1948

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

NOTE.—The next of kin should familiarize himself with the contents of the pamphlet, "Disposition of World War II Armed Forces Dead," before filling out this form. When the proper part of this form is filled out and properly signed by the next of kin, it should be returned to the OFFICE OF THE QUARTERMASTER GENERAL, MEMORIAL DIVISION, WAR DEPARTMENT, WASHINGTON 25, D. C., in the self-addressed postage-free envelope provided for this purpose.

If you are the next of kin or authorized representative of next of kin and desire to direct the disposition of the remains, please fill in PART I of this form.

## PART I

I, Frank Nevala (PLEASE PRINT OR TYPE NAME OF NEXT OF KIN) (Please indicate relationship to the deceased by placing an "X" in the proper box.)

- WIDOW       WIDOWER       SON OVER 21 YEARS OLD       DAUGHTER OVER 21 YEARS OLD  
 FATHER       MOTHER       BROTHER OVER 21 YEARS OLD       SISTER OVER 21 YEARS OLD  
 RELATIONSHIP OTHER THAN ABOVE (Specify) \_\_\_\_\_

HAVING FAMILIARIZED MYSELF WITH THE OPTIONS WHICH HAVE BEEN MADE AVAILABLE TO ME WITH RESPECT TO THE FINAL RESTING PLACE OF THE DECEASED DESIGNATED ABOVE, NOW DO DECLARE THAT IT IS MY DESIRE THAT THE REMAINS: (Please place an "X" in the box opposite the option you have selected.)

1. BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS.  
 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY  
Park Cemetery Marquette Michigan  
 (NAME AND LOCATION OF CEMETERY)  
 3. BE RETURNED TO \_\_\_\_\_ (FOREIGN COUNTRY), THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT \_\_\_\_\_ (LOCATION OF CEMETERY SELECTED)  
 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT \_\_\_\_\_ (LOCATION OF NATIONAL CEMETERY SELECTED)  
 (Please indicate if your own religious services at a location other than the selected national cemetery are desired by placing an "X" in the proper box)  
 YES       NO

THE NAME OF THE DECEASED, THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (If no corrections are necessary, indicate this fact by inserting the word "NONE" in the space below.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

August 3  
19 48

113

Office of the Quartermaster General  
War Department  
Washington 25, D.C.

Re: NEVALA, Jacob Pvt.  
36 965 690

Dear Sir:

I wish to inform you that I am the widow of the above named deceased serviceman. I was remarried to Frances Longtine on September 6, 1947. My address now is 414 Craig Street, Marquette, Michigan.

I believe Frank Nevala, Jacob's father, is now the legal next of kin to decide regarding the disposition of Jacob's remains. His address is 426 Center Street, Marquette, Michigan.

Sincerely yours,

*Hazel Longtine*  
Hazel Longtine  
414 Craig Street  
Marquette, Michigan

*Lat. Nevala, Jacob  
36 965 690*

**FILE**  
Name *KRP*  
Action *file*  
Accepted *...*  
Family *...*



DEPARTMENT OF THE ARMY  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON 25, D. C.

In Reply Refer To RR Br: QMGM 293 Nevala, Jacob, Pvt., 36 965 690  
Plot KKK, Row 11, Grave 265  
United States Military Cemetery  
Margraten, Holland

IMPORTANT

Address reply and envelope to:  
THE QUARTERMASTER GENERAL

Do NOT include the name of the  
official who signed the com-  
munication.

P R I O R I T Y

26 JUL 1948

Miss Janet Neel, Home Service Director  
Midwestern Area, American Red Cross  
1709 Washington Avenue  
Saint Louis 3, Missouri

Dear Miss Neel:

The Next of Kin of the above captioned deceased wife

(relationship)

Mrs. Hazel M. Nevala. West Wright Street, Marquette, Michigan

(name)

(address)

has failed to return a Form 345 indicating disposition instructions for the  
remains. The form was dispatched 5 December 1947.

It is respectfully requested that the attached OQMG Form 345 be properly  
accomplished by the Next of Kin and legal documents obtained through assistance  
of your representative if appropriate, be furnished this office. In the event  
you are unable to secure disposition instructions from the Next of Kin, it is  
further requested that a statement of the action taken by your representative  
be furnished this office for use as a basis for final disposition of remains of  
the decedent.

It is recommended that in contact with the Next of Kin mentioned above,  
they first be queried as to whether or not they have submitted the appropriate  
form, as it may have been mailed to this office since receipt by you of this  
request.

Sincerely yours,

JOHN O. HYATT  
Colonel, OMC  
Memorial Division

Incls. *[Handwritten initials]*

oey

22 JUL 1948  
VE

Pvt Jacob Nevala, 36 965 690  
Plot KKK, Row 11, Grave 265,  
United States Military Cemetery  
Margraten, Holland

5 December 1947

Mrs. Hazel M. Nevala  
West Wright Street  
Marquette, Michigan

Dear Mrs. Nevala:

The people of the United States, through the Congress have authorized the disinterment and final burial of the heroic dead of World War II. The Quartermaster General of the Army has been entrusted with this sacred responsibility to the honored dead. The records of the War Department indicate that you may be the nearest relative of the above-named deceased, who gave his life in the service of his country.

The enclosed pamphlets, "Disposition of World War II Armed Forces Dead," and "American Cemeteries," explain the disposition, options and services made available to you by your Government. If you are the next of kin according to the line of kinship as set forth in the enclosed pamphlet, "Disposition of World War II Armed Forces Dead," you are invited to express your wishes as to the disposition of the remains of the deceased by completing Part I of the enclosed form "Request for Disposition of Remains." Should you desire to relinquish your rights to the next in line of kinship, please complete Part II of the enclosed form. If you are not the next of kin, please complete Part III of the enclosed form.

If you should elect Option 2, it is advised that no funeral arrangements or other personal arrangements be made until you are further notified by this office.

Will you please complete the enclosed form, "Request for Disposition of Remains" and mail in the enclosed self-addressed envelope, which requires no postage, within 30 days after its receipt by you? Its prompt return will avoid unnecessary delays.

Incls.

mew

Sincerely,

THOMAS B. LARKIN  
Major General  
The Quartermaster General

DEC 10 10 25 AM  
O. D. M. G.  
MAIL & RECORDS BRANCH

File sent 22 July 48  
✓E

REPORT OF INVESTIGATION AREA SEARCHING  
 To be completely filled out and attached to each copy of  
 GR Form 1, "Report of Burial" when disinterment is accomplished.

1. Jacob Nevala Pvt 36965690 38th Armd Inf Bn.  
 (Full name of deceased) (Rank) (ASN) (Organization)
2. State if identification tags were attached to remains, how many, and where attached Two (2) identification tags on chain around neck of deceased.
3. Give exact location from which disinterred, furnishing coordinates and map series used Belgium & N.E. France: 100,000 Maesevck 1st Edition Sheet 4  
 Grid Coord. 670040.
- NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION IN WITH PERMANENT LANDMARKS.
4. Full name of cemetery (include plot, row and grave if organized cemetery) Isolated burial.
5. Approximate or established date of death (state which and give basis for date selected) Nov. 7, 1944: Ref case record #784. (Believed to Be)
6. Approximate or established date of burial (give basis for date established) Date of burial unknown
7. Manner in which grave was marked and all information contained on the marker Helmet w/ liner-no markings.
8. List personal effects found in possession of civilian or unauthorized military personnel, furnishing name and address of individual concerned  
No personal effects of the deceased were recovered.
9. Names and addresses of all persons questioned concerning death or burial and information each furnished (contact local Mayor, priest, cemetery caretaker, those responsible for burial and any other possessing important information)  
L. Bylmakers Dijk E 140 Ospel, Holland. Information given with reference to date and location of burial.
10. If buried in a coffin, give description and markings Deceased was not buried in coffin, but in own clothing.
11. Action taken Deceased disinterred and evacuated to Hq US Mil Cem, Margraten, Holland by 3660th QM Gr Reg Co, APO 562 US Army.  
 Disinterment approved by HQ GR REG SERV COMD, USFET, APO 887 US Army  
 Disinterment ~~and reburial~~ made by Hq 3060th QM Gr Reg Co, APO 562 US Army  
 Date of \*burial/reburial Sept 9 1945  
 Place of ~~reburial~~ US Military Cemetery, Margraten, Holland by Hq 603d QM Gr Plot KKK Row 11 Grave 265 Reg Co, APO 562 US Army

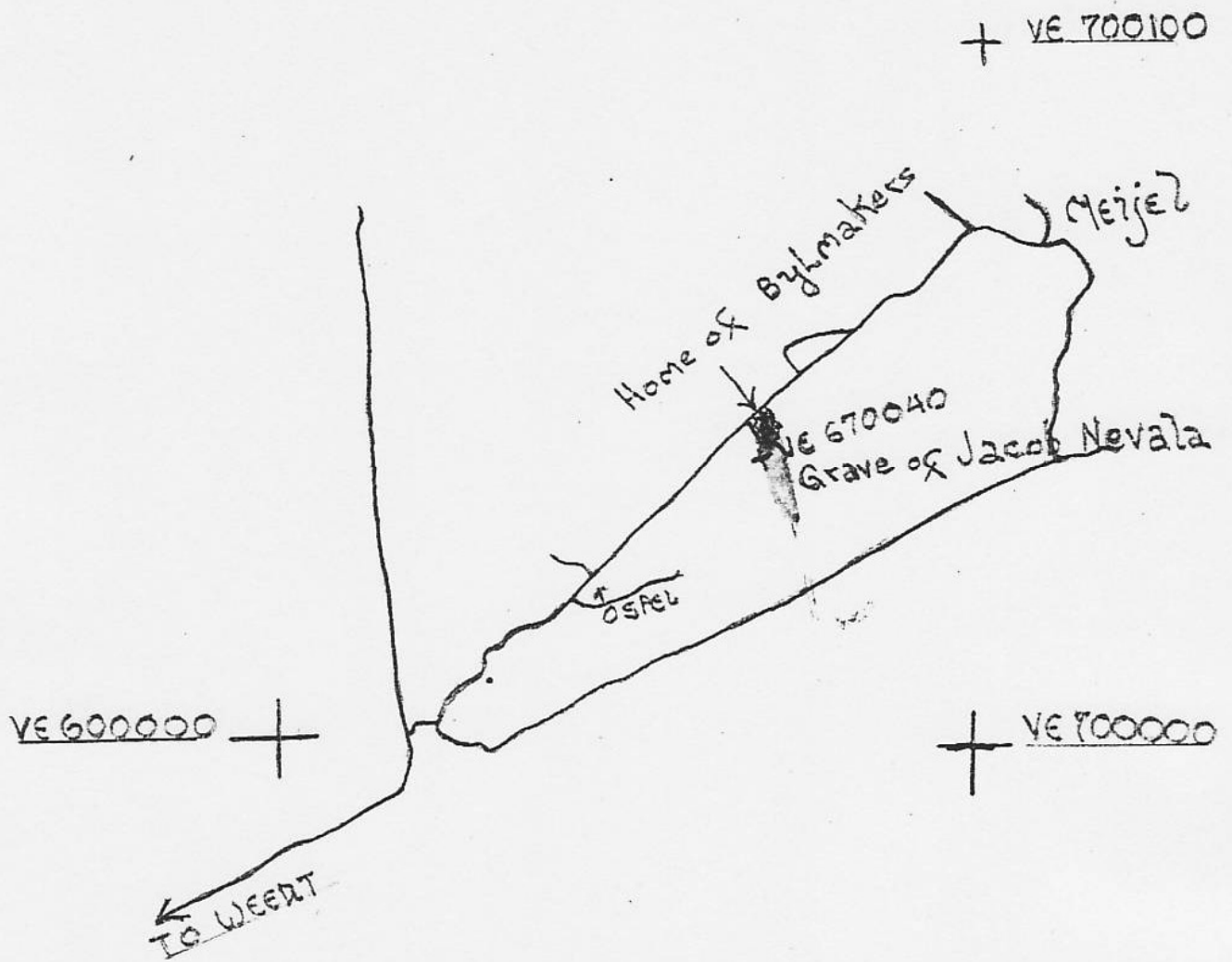
NOTE: Additional particulars regarding investigation will be placed on reverse side.

Register NO: #784  
 (Holland)  
 \*Cross out when not applicable

Signed \_\_\_\_\_  
 Lt, CMC  
 Investigating Officer

Rank

ASN



Belgium + N.E. France 1:100,000 Maeseyck  
 Sheet 4 1<sup>st</sup> Edition

Landman

1702 # 17

Handwritten scribbles and numbers in the bottom right corner, including "40", "4", and "10".

# REPORT OF BURIAL

TM 10-630 AND AR 30-1815

Sept 9 1945

Date

NEVALA	JACOB	MMI	PVT	36965690
Last Name First		Initial	Rank	Serial No.
38th Armd Inf, 3d				
Unit			Organization	
H.C. Asten-Hiesel, Holland		Est 7 Nov. 1944		KIA
Place of Death		Date of Death		Cause of Death
1100 9 Sept 1945		U.S. Military Cemetery Harsteden, Holland		71645402
Time and Date of Burial		Name of Cemetery		Name or Coordinates of Location
265	11	KMK	GROSS	
Grave Number	Row Number	Plot Number	Type of Marker	

Disposition of Identification Tags: Buried with body Yes  No  Attached to Marker Yes  No

If No Identification Tags  
How were remains identified?

**REBURIAL**

What means of identification were buried with the body

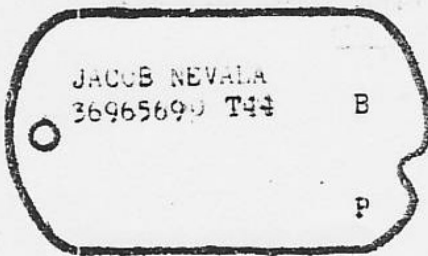
Previously buried in isolated grave located at 670040 Holland

To determine Right or Left use Deceased's Right and Left.

Who is buried on:

Deceased's Right:	ZAPRZENSKI	13125062			264
	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	UNKNOWN	A-1284			266
	Name	Serial No.	Rank	Organization	Grave No.

Signature or Name, Rank and if possible Organization of person furnishing above Data when other than officer reporting burial.



If print of identification tag is not affixed fill in below:

Emergency Addressee \_\_\_\_\_ Name \_\_\_\_\_  
Address \_\_\_\_\_  
Religion Prot

List only Personal Effects Found on Body and disposition of same:

None

Case #764 (Holl)

Evac. by 3080 Am Gr. Reg. Co.

FILE  
MAY 6-1945

*Cleon E. Wells*

Signature of Officer or other person reporting burial

CLEON E. WELLS 1st Lt. GIC

603rd Am Gr. Reg. Co.

Verified by G.R.S. Officer

79

WAR DEPARTMENT  
THE ADJUTANT GENERAL'S OFFICE  
WASHINGTON 25, D. C.

REPORT OF DEATH

DATE 26 December 1944  
qig/4632

FULL NAME <p style="text-align: center;">Nevala, Jacob</p>		ARMY SERIAL NUMBER <p style="text-align: center;">36 965 690</p>		GRADE <p style="text-align: center;">FVT</p>									
HOME ADDRESS <p style="text-align: center;">Marquette, Mich.</p>		ARM OR SERVICE <p style="text-align: center;">Infantry</p>		DATE OF BIRTH <p style="text-align: center;">23 Aug 12</p>									
PLACE OF DEATH <p style="text-align: center;">European Area</p>		CAUSE OF DEATH <p style="text-align: center;">Killed in action</p>		DATE OF DEATH <p style="text-align: center;">7 Nov 44</p>									
STATION OF DECEASED <p style="text-align: center;">European Area</p>		DATE OF ENTRY ON CURRENT ACTIVE SERVICE <p style="text-align: center;">8 Apr 44</p>		LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS									
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) <p style="text-align: center;">Mrs. Hazel M. Nevala, wife, West Wright St., Marquette, Mich.</p>													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Hazel Nevala, wife, same as above Donna M., Nancy G., & Michael F. Nevala, Children, same as wife's Josephine Nevala, mother, 426 Center St., Marquette, Mich. Frank Nevala, father, Same as mother's													
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO

ADDITIONAL DATA AND/OR STATEMENT

The individual named in this report of death is held by the War Dept. to have been in a missing in action status from 7 Nov 1944 until such absence was terminated on 19 Dec 1944 when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a Commander in the European Area.

**FILE:**

JAN 5 - 1945

COPIES FURNISHED:		
S. G. O.	F. B. I.	F. O. U. S. A.
2. O. C. M. G.	O. F. D.	ARMY EFFECTS BUREAU
G. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BATTLE

NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:

*[Handwritten Signature]*  
ADJUTANT GENERAL

**WAR DEPARTMENT**  
 THE ADJUTANT GENERAL'S OFFICE  
 WASHINGTON 25, D. C.

REPORT OF DEATH

DATE 26 Dec 1944

FULL NAME Nevala, Jacob		ARMY SERIAL NUMBER 36 965 690	GRADE Pvt.
HOME ADDRESS Marquette, Michigan		ARM OR SERVICE Infantry	DATE OF BIRTH 23 Aug 12
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH 7 Nov 44
STATION OF DECEASED European Area	DATE OF ENTRY ON CURRENT ACTIVE SERVICE 8 Apr 44		LENGTH OF SERVICE FOR PAY PURPOSES YEARS. MONTHS DAYS
EMERGENCY ADDRESSEE (Name, relationship, and address)			

Mrs. Hazel M. Nevala, wife, West Wright St., Marquette, Michigan

BENEFICIARY (Name, relationship, and address)

Hazel Nevala, wife, same as above

Donna M., Nancy G., & Michael P. Nevala, Childrens, same as wife's\*

INVESTIGATION MADE		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (Specify below)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO

ADDITIONAL DATA AND/OR STATEMENT

BATTLE       NON-BATTLE

\*Josephine Nevala, mother, 426 Center St., Marquette, Mich.  
 Frank Nevala, father, Same as mother's

The individual named in this report of death is held by the War Department to have been in a missing in action status from 7 Nov 1944 until such absence was terminated on 19 Dec 1944 when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a Commander in the European Area.

BY ORDER OF THE SECRETARY OF WAR

J. A. Marshall  
 Major, A.G.D.

ADJUTANT GENERAL

29

WAR DEPARTMENT  
THE ADJUTANT GENERAL'S OFFICE  
WASHINGTON 25, D. C.

REPORT OF DEATH

DATE 26 December 1944  
913/4632

FULL NAME <p style="text-align: center;">Nevala, Jacob</p>		ARMY SERIAL NUMBER <p style="text-align: center;">36 965 690</p>		GRADE <p style="text-align: center;">PVT</p>									
HOME ADDRESS <p style="text-align: center;">Marquette, Mich.</p>		ARM OR SERVICE <p style="text-align: center;">Infantry</p>		DATE OF BIRTH <p style="text-align: center;">29 Aug 12</p>									
PLACE OF DEATH <p style="text-align: center;">European Area</p>		CAUSE OF DEATH <p style="text-align: center;">Killed in action</p>		DATE OF DEATH <p style="text-align: center;">7 Nov 44</p>									
STATION OF DECEASED <p style="text-align: center;">European Area</p>		DATE OF ENTRY ON CURRENT ACTIVE SERVICE <p style="text-align: center;">8 Apr 44</p>		LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS									
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) <p style="text-align: center;">Mrs. Hazel M. Nevala, wife, West Wright St., Marquette, Mich.</p>													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Hazel Nevala, wife, same as above Donna M., Nancy G., & Michael F. Nevala, Children, same as wife's Josephine Nevala, mother, 426 Center St., Marquette, Mich. Frank Nevala, father, Same as mother's													
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO

ADDITIONAL DATA AND/OR STATEMENT

The individual named in this report of death is held by the War Dept. to have been in a missing in action status from 7 Nov 1944 until such absence was terminated on 19 Dec 1944 when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a Commander in the European Area.

COPIES FURNISHED:		
S. G. O.	F. B. I.	F. O., U. S. A.
C. O. C. M. G.	O. Z. D.	ARMY EFFECTS BUREAU
G. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BATTLE

NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR

ADJUTANT GENERAL





299386

CHE:LD:tms  
July 11, 1946

Mrs. Jacob Nevala  
232 West Bluff Street  
Marquette, Michigan

Dear Mrs. Nevala:

This has reference to your letter addressed to the War Department, which has been referred to this Bureau for reply, in connection with property belonging to your husband, Private Jacob Nevala.

In view of the lapse of time since your husband was first reported a casualty, it is extremely unlikely that any effects will be received here. Although transportation difficulties are often encountered in the return of effects to this country, time should not exceed one year.

We have carefully checked our records and we have not, regrettably, received any information regarding his belongings.

It is my understanding that mail enroute to military personnel at the time they become casualties is returned to the sender through military and postal channels, although it may require considerable time. Your local postal authorities may be consulted on this matter, if you wish further information.

Anticipating your disappointment in this regard, it is with sincere regret that I must convey this report. You may be assured however, that in the event any property is received here unexpectedly, it will be forwarded promptly.

Yours very truly,

C. H. ESSERT  
Administrative Assistant  
Army Effects Bureau

299386  
Kw

AGRS-DC 201 Nevala, Jacob  
(11 Oct 45)

26 June 1946

Mrs. Jacob Nevala  
232 West Bluff Street  
Marquette, Michigan

Dear Mrs. Nevala:

Reference is made to your letter addressed to the War Department, Washington, D. C., requesting additional information regarding the death of your husband.

Additional information has now been received which confirms the previous report of the death of your husband, Private Jacob Nevala, Army serial number 36 965 690, Infantry, and shows that he was killed in action 7 November 1944 near Winnerstraat, Holland, the same day he was previously reported missing. Unfortunately, no further details concerning his death were given.

With reference to your inquiry, any packages received for your husband subsequent to his death would have been included with his personal effects. The Effects Quartermaster, Army Effects Bureau, Kansas City Quartermaster Depot, Kansas City 1, Missouri, has jurisdiction over the personal effects of our military personnel who die overseas. A copy of your letter has accordingly been forwarded to that officer for necessary action.

Permit me to extend my sympathy.

Sincerely yours,

COPY FOR:  
Effects Quartermaster  
Army Effects Bureau  
Kansas City Quartermaster Depot  
Kansas City 1, Missouri

CHARLES D. CARLE  
Colonel, AGD  
Commanding

711.5  
7-9

1 Incl  
Copy ltr dtd 11 Oct 45

C O P Y

Mrs. Jacob Nevala  
232 W. Bluff St.  
Marquette, Michigan

Dear Sir:

I'm writing you to see if I can get some information on my husband. He died in action on Nov. 7, 1944. I have not any word other than the telegram and the letter that follows. Some of my letters came back, but not the Christmas packages I sent him. I have never gotten any of his personal belongings back.

We have three children and they still think their daddy will be coming home. I hope you can help me. Here is his address, Pvt. Jacob Nevala, 36 965 690, Co. C, 38 Arm'd Inf. B.N. c/o PM, New York City, N.Y., APO 257.

Thank you.

Mrs. Jacob Nevala



ARMY SERVICE FORCES  
 KANSAS CITY QUARTERMASTER DEPOT  
 ARMY EFFECTS BUREAU  
 801 HARDESTY AVENUE  
 KANSAS CITY 1, MISSOURI

S-7 November 1949  
 HOC/DF/vlm  
 7 October 1949

IN REPLY REFER TO 299,386

REQUEST FOR INFORMATION

793  
Nevala, Jacob Pvt 36965690  
 (Name) (Rank) (ASN)

INFANTRY 38TH ARMD INF BN

(Following to be filled in by OQMG). Branch of Service and/or Organization

DATE OF DEATH 7 NOVEMBER 1944

PLACE OF CASUALTY EUROPEAN AREA: HOLLAND

NEXT OF KIN MRS. HAZEL LONGTINE WIDOW (REMARRIED)  
 (Name) (Relationship)

ADDRESS 414 CRAIG STREET, MARQUETTE, MICHIGAN

PREVIOUS SHIPMENT YES  NO (Check one)

DATE OF LAST PREVIOUS SHIPMENT (If any) \_\_\_\_\_

SUMMARY COURT MADE (Eff QM Form 75) Yes  No (Check one)

TO WHOM (If made) \_\_\_\_\_  
 (If same as NOK, write same)

Write below the name and address of an alternate beneficiary or an individual we have previously contacted in the case file. If a relative, list his relationship. This information will be used only if the next of kin noted above cannot be located.

DONNA M. NANCY G &  
MICHAEL F. NEVALA (CHILDREN) MR. FRANK NEVALA (FATHER)  
SAME AS WIDOW'S 426 CENTER STREET  
MARQUETTE, MICHIGAN

Signature William F. Conlon  
 WILLIAM F. CONLON, MAJOR, QMC

Remarks: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

QMGOD 293, Nevala, Jacob, Pvt.  
SN 36 965 690

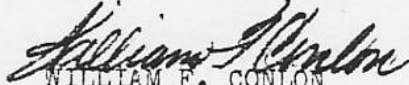
1st Ind

Department of the Army, OQMG, Washington 25, D. C., 21 October 1949

TO: Commanding Officer, Quartermaster Activities  
Kansas City Records Center (AGO), Missouri  
ATTENTION: Effects Quartermaster

Information requested has been entered on basic form.

BY COMMAND OF MAJOR GENERAL FELDMAN:

  
WILLIAM F. CONLON  
Major, QMC  
Field Service Division

Reference #299386

SZ/BRK/ih  
18 August 1950

Mrs. Hazel Longtine  
414 Craig Street  
Marquette, Michigan

Dear Mrs. Longtine:

Thank you for your confirmation of address in connection with the disposal of funds received for Private Jacob Nevala, which were recovered by an overseas Graves Registration officer.

I am inclosing a Bureau check in the amount of \$2.85 representing the funds received for Private Nevala from this source and converted to dollar credits due to the damaged condition in which they were found when recovered.

The transmittal of funds by this Bureau does not, of itself, vest title in the recipient. Such property is forwarded for distribution in accordance with the laws of the state of decedent's legal residence.

The inclosed check should be cashed at your earliest convenience and in any event prior to the expiration of sixty days from date, at which time payment will be stopped and the funds transferred to the Treasury of the United States due to the impending inactivation of this Bureau. Your cooperation in this matter will be highly appreciated.

I am glad to have been of service to you in this matter and wish to express my sincere regret of the circumstances prompting this correspondence.

Sincerely yours,

STANLEY ZABLOCKI  
Captain, QMC  
Effects Quartermaster

1 Incl  
Bureau check

AMOUNT OF CHECK \$2.85	NOTE DISCREPANCY IN	INCLOSE	ABLES	RECIPIENT FROM
ACCOUNT NUMBER see below*	NAME	SHIP VALUABLES		CASUALTY REPORT
	SERIAL NUMBER	VALUABLES SHIPPED BY (Clerk)		INVENTORY
	RANK			FORM 20
Pvt. Jacob Nevala  36965690  299386 D  Hazel Longtine				LETTER
				NO. & TYPE OF CONTAINER
				ENVELOPE
				CARTONS
				PACKAGE
				FOOT LOCKER
				SPECIAL INSTRUCTIONS
				REMOVE GI
				SHIP BLOODSTAINED
				SHIP DAMAGED
REMOVE BLOODSTAINED				
REMOVE DAMAGED				
FILMS REMOVED				
DIARY REMOVED				
SUMMARY COURT DATA				DATE ACTION TAKEN
DATE OF FINDING	APPLICANT			17 Aug 50
REMARKS	* - 184835 - .98 ✓ 184836 - 1.40 ✓ 184837 - .47 ✓ \$ 2.85 ✓			MAIL REVIEWER (Initial) <i>(Signature)</i>
				SHIPPED
				FRANKED
				EXPRESS
				FREIGHT
				DATE SHIPPED
				SHIPPING CLERK
				ROUTING
				ACCOUNTING BRANCH
				WAREHOUSE
				FILE

ORDER FOR ACTION

*CHASER CLEARING*



BUREAU  
NTORY

ARMY EFFECTS BUREAU  
ACCOUNTING INVENTORY

CASE NO. 299,386

TYPED BY BRK

DATE 23 Mar 1950

STATUS Deceased

RANK Pvt

NAME Jacob Nevala

A. S. N. 36965690

ORGANIZATION

CONSIGNOR CDO, APO 807

AMOUNT \$1.40

ACCOUNT NO. 184835

LIST NO. CIP #121

CHECK DESCRIPTION:  
INCLUDED IN ONE U. S. TREASURER'S CHECK  
NEGOTIABLE BY EQM

\$1,714

DATED 14 Mar 50

SYMBOL 215-224

AMOUNT \$4,287.97

REMARKS: Proceeds of 10 English Shillings  
at rate of 2.8025 per Eng. pound

ARMY EFFECTS BUREAU  
ACCOUNTING INVENTORY

CASE NO. 299,386

TYPED BY BRK

DATE 23 Mar 1950

STATUS Deceased

RANK Pvt

NAME Jacob Nevala

A. S. N. 36965690

ORGANIZATION

CONSIGNOR CDO, APO 807

AMOUNT \$0.98

ACCOUNT NO. 184835

LIST NO. CIP #121

CHECK DESCRIPTION:  
INCLUDED IN ONE U. S. TREASURER'S CHECK  
NEGOTIABLE BY EQM

\$1,714

DATED 14 Mar 50

SYMBOL 215-224

AMOUNT \$4,287.97

REMARKS: Proceeds of 1 U.S. dollar  
at rate of .98464

18073/2

18073/2

18073/2

FRANC'S CHECK

French Francs  
Franc

ARMY EFFECTIVE BUREAU  
ACCOUNTING INVENTORY

CASE NO. 299,386

TYPED BY BRK

DATE 29 Mar 50

STATUS Deceased

RANK Pvt

NAME Jacob Nevala

A.S.N. 36965690

ORGANIZATION

CONSIGNOR CDO, APO 807

AMOUNT 29-1/2 Dutch Gulden

No value - destroyed by incineration  
by overseas Finance office

ACCOUNT NO.

LIST NO. CIP #121

CHECK DESCRIPTION:  
INCLUDED IN ONE U. S. TREASURER'S CHECK  
NEGOTIABLE BY EQM

#

DATED

SYMBOL

AMOUNT

REMARKS: Currency worthless-rejected  
by country of issue and destroyed  
by overseas Finance officer.

HEADQUARTERS  
7752 FINANCE CENTER  
Central Disbursing Office  
APO 807, c/o Postmaster New York, N.Y.

FINC 123.7 -

14 Mar 50

SUBJECT: Conversion of Funds

TO : Commanding Officer,  
Kansas City Quartermaster Depot  
Army Effects Bureau  
601 Hardesty Avenue  
Kansas City 1, Mo.

1. In compliance with paragraph 2 of your letter of 28 December 1949, the following information is now made available, inasmuch as all conversion action has been completed.

2. Treasury checks Numbers 14520608 and 1714 in the aggregate amount of \$4,289.84 are forwarded along with fiscal lists Numbers 118 to 123 as inclosure number 2, also included are certificates covering certain foreign currencies, inclosure number 3, and copies of correspondence instrumental in affecting conversions as inclosures number 4 through number 15.

3. With reference to paragraph 3, the attached table is submitted herewith.

4. This office is unable to return currencies rejected by the respective countries concerned. Due to their extensively decomposed and highly contaminated condition, it was deemed advisable to destroy this worthless currency by burning. Certificate of destruction by three witnessing officers is available if so desired.

15 Incls:

1. Ltr File RRE 220.87
2. Fiscal lists 118 thru 123
3. Certificates
4. thru 15. cps correspondence

/s/ S. J. Taggart  
S. J. TAGGART  
Colonel FD  
Central Disbursing Officer

<u>TYPE &amp; AMOUNT OF CURRENCY REDEEMED BY C.D.O.</u>	<u>AMOUNTS REJECTED (INVALID)</u>	<u>AMOUNTS CONVERTED</u>	<u>RATE</u>	<u>DOLLAR VALUE</u>	<u>REMARKS</u>
1,237.00 U.S. Dol.	?	\$ 1,218.00	-	1,218.00	See Incl 4
L 369-10-0 Sterling		L 369-10-0	2.8025	1,035.52	Incl 5
70,111 French frs 250 Algerian frs	F.Frs 450	69,661 250	349.40) 349.40)	200.09	See Incl 6
30,475 Belgium Frs		30,475	.02006	611.33	Incl 7
11,932.50 German Mks		11,932.50	.10¢ per	1,193.25	Incl 8
520 Luxembourg Frs		520	49.95	10.41	Incl 9
1,166 Italian Lire		1,166	625 Lire = \$ 1.00	1.87	Incl 10
738½ Dutch Guilders	738½	none	-	no value	See Incl 11
1 Trinidad Dollar	1	"	-	no value	
1000 Greek Drachma	1,000	"	-	no value	
3.00 Russian Rubles	3.00	"	-	no value	
1 Mexican Dollar	1	"	-	no value	
6 Island Kronen	6	"	-	no value	
150 Danish Kronen	150	"	-	no value	See Incl 12
100 Norwegian Kronen	100	"	-	no value	See Incl 13
100 Swedish Kronen	-	100	5.17	19.34	Incl 14
1 Brazilian Milreis	1	none	-	no value	
10 Finnish Marks	-	10	300 Marks per dollar	.03	Incl 15
U.S. Dollar Aggregate of Conversions				4,289.84	

-----  
Note by Accounting Branch, Army Effects Bureau: Pro-Rata distribution made to recipients on basis on total funds received; basis of computation shown on individual Form 11A's. Computed to nearest cent where funds exceed one cent per item. CIP lists with basis of computation files in Accounting Branch section file.

Summary Court-Martial  
KANSAS CITY QUARTERMASTER DEPOT  
601 Hardesty Avenue  
Kansas City 1, Missouri

Case No. SZ/B.  
2993  
Date 13 August 1950

SUBJECT: Report of transactions in disposing of the effects of

Jacob Meyala, 36965600 late a  
(Name of deceased) (Army Serial Number)

Private, Infantry who died  
(Grade) (Organization, Arm or Service)

on the 7th day of Nov 1944 at European Area

TO: The Adjutant General, War Department, Washington 25, D. C.

1. Complying with A.W. 112, a Summary Court-Martial, convened at Kansas City, Mo., pursuant to S.O. 232 Hq., KCQM Depot, dated 1 Dec 47, for the purpose of disposing of the effects of the above-named soldier, or person subject to military law reports that:

a. No legal representative or widow of decedent being present at decedent's camp or quarters, effects of decedent were forwarded to this Summary Court-Martial.

b. Local debtors owed decedent's estate \$ none of which the sum of \$ none was collected. (If nothing was found due or collected, state "None", otherwise attach itemized statement of sums owing and collected.) (Incl. none)

c. Decedent owed undisputed local creditors the sum of \$ none, which has been paid by the Summary Court-Martial from funds of decedent. (See inclosed receipt none, Incl none).

d. Disposition of decedent's effects (less money paid creditors, if any) has been made by the Summary Court-Martial by transmittal through the Quartermaster Corps, at Government expense to person found entitled (See Summary Court-Martial FINDING below).

FINDING

Before a Summary Court-Martial which convened at Kansas City, Missouri on 13 August 1950, pursuant to S.O. 232, Headquarters, KCQM Depot, dated 1 December 1947, the application or affidavit of Mrs. Hazel Longtine for the effects of the above-named deceased soldier, or person subject to military law, now in the possession of the United States, with other relevant evidence, was duly considered;

Whereupon, this Summary Court-Martial finds, that, under the provisions of A.W. 112,

Mrs. Hazel Longtine of  
(Name of person found entitled)

414 Craig Street, Marquette State of  
(Number, Street or Avenue) (City, Town or Village)

Michigan is the Widow of the  
(Relationship or Capacity)

ARMY EFFECTS BUREAU

601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

Reference #299386

SZ/BRK/bk  
10 August 1950

Mrs. Hazel Longtine  
414 Craig Street  
Marquette, Michigan

Dear Mrs. Longtine:

The Army Effects Bureau recently received for disposal a group of funds which had been recovered by the American Graves Registration Service in its disinterment operations under the Repatriation program for deceased military personnel.

These funds, consisting of United States or foreign currencies, were carried by the soldier at the time of casualty and in many instances were recovered in a mutilated or unsightly condition.

Consolidation at the overseas headquarters was then made of all such currencies and it was then returned to the country of origin for exchange to dollar credits to enable issuance of a check replacing the mutilated currency.

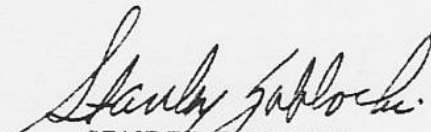
Such was the case with some funds received for Private Jacob Nevala.

I know that you want to receive these funds as soon as possible, but due to the time elapsed since the occurrence of the casualty, it is believed that some explanation should be offered as to the source of the funds and the delay in their transmittal.

It would be appreciated if you would confirm the accuracy of your address in order that the check may be delivered properly. A notation placed at the bottom of this letter will be sufficient and may be returned in the inclosed addressed envelope requiring no postage.

Upon receipt of your reply, a Bureau check for the funds recovered from the above source will then be sent you promptly.

Sincerely yours,



STANLEY ZABLOCKI  
Captain, QMC  
Effects Quartermaster.

1 Incl  
Envelope.

ATTACHMENTS

STATUS

EFFECTS INVENTORY  
ARMY EFFECTS BUREAU

<input checked="" type="checkbox"/>	INBOUND INVENTORY
<input checked="" type="checkbox"/>	G. R. OR SUB GR LABEL
<input checked="" type="checkbox"/>	WILL OR POWER OF ATTY.
<input checked="" type="checkbox"/>	TALLY IN FORM 43

<input type="checkbox"/>	DECEASED
<input type="checkbox"/>	MISSING
<input type="checkbox"/>	P. O. W.
<input type="checkbox"/>	ABANDONED
<input type="checkbox"/>	UNKNOWN

<input type="checkbox"/>	BAGS, CLOTH OR TRAVEL	<input type="checkbox"/>	BELT	<input type="checkbox"/>	OVERCOATS	<i>No effects received</i>
<input type="checkbox"/>	BELT, MONEY (NO MONEY)	<input type="checkbox"/>	BOOKS, ADDRESS	<input type="checkbox"/>	PAPERS, PERSONAL	
<input type="checkbox"/>	BILLFOLD (NO MONEY)	<input type="checkbox"/>	BOOKS, PILOT LOG	<input type="checkbox"/>	PENCIL, MECHANICAL	
<input type="checkbox"/>	BOOKS	<input type="checkbox"/>	BRUSHES	<input type="checkbox"/>	PEN, FOUNTAIN	
<input type="checkbox"/>	BRACELET, IDENT.	<input type="checkbox"/>	CASE	<input type="checkbox"/>	PHOTOS	
<input type="checkbox"/>	CAMERAS	<input type="checkbox"/>	CLOTH, WASH	<input type="checkbox"/>	PIPES	
<input type="checkbox"/>	CLOTHING	<input type="checkbox"/>	COATS	<input type="checkbox"/>	RINGS	
<input type="checkbox"/>	MISC. ARTICLES	<input type="checkbox"/>	FOOTLOCKER	<input type="checkbox"/>	SCARFS	
<input type="checkbox"/>	RELIGIOUS ARTICLES	<input type="checkbox"/>	FOOTWEAR, PR.	<input type="checkbox"/>	SHIRTS	
<input type="checkbox"/>	RIBBONS, DECORATION	<input type="checkbox"/>	GLASSES	<input type="checkbox"/>	SOCKS, PR.	
<input type="checkbox"/>	SHORT SNORTER	<input type="checkbox"/>	GLOVES, PR.	<input type="checkbox"/>	STATIONERY	
<input type="checkbox"/>	SOUVENIR MONEY	<input type="checkbox"/>	HANDKERCHIEFS	<input type="checkbox"/>	TIES	
<input type="checkbox"/>	SOUVENIRS	<input type="checkbox"/>	HEADWEAR	<input type="checkbox"/>	TOBACCO	
<input type="checkbox"/>	TESTAMENTS	<input type="checkbox"/>	JACKETS	<input type="checkbox"/>	TOILET ARTICLES	
<input type="checkbox"/>	TOWELS & WASHCLOTHS	<input type="checkbox"/>	KITS	<input type="checkbox"/>	TOWELS	
<input type="checkbox"/>	U. S. MONEY (AMOUNT)	<input type="checkbox"/>	KNIVES	<input type="checkbox"/>	TROUSERS, PR.	
<input type="checkbox"/>	WATCH	<input type="checkbox"/>	LETTERS	<input type="checkbox"/>	TRUNKS, PR.	
<input type="checkbox"/>	WINGS	<input type="checkbox"/>	LIGHTERS	<input type="checkbox"/>	UNDERWEAR	

CONTAINERS ADDRESSED TO		INFORMATION	
<i>None</i>		<i>None</i>	
NAME AND STATUS VARIATIONS		CROSS REFERENCE	

CHECK MONEY ORDER BOND TRAV. CHECK FOREIGN CURRENCY U. S. CURRENCY	REC'D BY	NUMBER	BUREAU CHECK
		SYMBOL	TRANSMIT ORIGINAL
		AMOUNT	ORIG. REG. MAIL
		DATE	TO G. A. O.
		BANK OR PLACE OF ISSUE	MUTILATED
		PAYEE	TO ISSUING AGENCY
		REMITTER OR DRAWER	

TALLY NO. <i>1000</i>	ORIG. NO. OF PKGS.	EXAMINING DATE <i>4 Oct 50</i>	BOX NO.	SHEET _____ OF _____ SHEETS
NAME <i>JACOB YEYADA</i>			A. S. N. <i>36965690</i>	
ORGANIZATION		BANK		CASE NO.

SUBJECT: Inventory of Personal Effects of: \_\_\_\_\_ Date \_\_\_\_\_

NEVALA, Jacob., Pvt., 36965690  
(Last Name) (First Name) (I) (Rank) (ASN)

TO: EFFECTS QUARTERMASTER, Army Effects Bureau, Kansas City, Missouri.

The above individual of \_\_\_\_\_  
(Unit) (Organization)

was reported \_\_\_\_\_ about \_\_\_\_\_ 194\_\_\_\_  
(Deceased, missing, etc.)

Designated beneficiary if information readily accessible:

NAME: \_\_\_\_\_ ADDRESS \_\_\_\_\_

INVENTORY OF EFFECTS

- 1 US Dollar
- 1 English Pound
- 10 Shilling Note
- 164 French Francs
- 29½ Dutch Gulden.

*not shown on CIP list #121*

/////////////////Last Item////////////////

Withdrawn for collection *(Less 121)*

50 Belgian Francs, unredeemable, destroyed.

Money in the amount of \_\_\_\_\_ has been exchanged  
(here identify currency)

for US Treasury check No. \_\_\_\_\_ amounting to \_\_\_\_\_

Known bank account in European Theater: \_\_\_\_\_  
(list name of bank account No)

I certify that the above items constitute all effects secured by me belonging to the above named individual and that they were forwarded to the Army Effects Bureau Kansas City, Missouri,

on \_\_\_\_\_ 194\_\_\_\_ through \_\_\_\_\_  
(forwarding agency)

Signed: *Joseph F. Geoghegan*  
JOSEPH F. GEOGHEGAN 1st Lt OMC Depot Quartermaster  
(Name) (Rank & ASN) (Organization)  
(List any additional information on reverse side)