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|-------------------------------------|-----------------------------|---|--------------------------|
| REQUEST FOR RECORDS (AR 345/210) | DATE OF REQUEST 18725706 | DATE RECORDS MUST BE RETURNED (T b d) (MPL d b) 11/26/56 | NO A 525124 T 10-3463 |
|-------------------------------------|-----------------------------|---|--------------------------|

OFFICE OF RECORDS
TECHNICAL SERVICES RECORDS SECTION
NAME: DRB TAGO
219 N Lee Street
Alexandria, Virginia

NOV 6 1956

RECORD REQUESTED (G F I I m t S b D I m f m (M I P LR d)
d g N m G d N m b P p f w l d b d d h k b () b l w)

R 109 H 1

293 Hollacher, also 38408490

EX. EXT. FOR TO 1 1/2 R/R FOR REQUEST EXTENSION

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| C NCY | CURR NT | C NCY | H TOR CA | IC ENCY |
| CLA S | | CAT OV R CORDS | | |

ORIGINAL RECORD

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| d ADDR S DOME 1066 TB | GN TUR O UTHOR Z D P R ON | | |

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| UNABLE TO D N T | b R CORD CURRENTLY CHARG D TO (L f m ddl) | DAT |
| DDRE S | d XT N ON | f N T LS |

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| RET RN R CORDS TO ADDRE ND CAT D N TEM NUMB R | DATE | b GNATUR OR N T A |
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INSTRUCTIONS

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CAUTION

THESE RECORDS WILL BE USED FOR OFFICIAL PURPOSES ONLY DO NOT REMOVE PERMIT TO BE REMOVED ADD TO NOR REVEAL THE CONTENTS TO UNAUTHORIZED PERSONS

TRANSFER COUPON

TO

NOTE THAT O

H B N T R N RR D TO (N m)

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S CT ON BU D NG AND ROOM NO

DAT S GNATUR

No A 525124

DEPARTMENT OF THE ARMY
THE ADJUTANT GENERAL'S OFFICE
WASHINGTON



DEPARTMENTAL RECORDS BRANCH, T.A.G.O.

TECHNICAL SERVICES RECORDS SECTION
DRB TAGO
219 N Lee Street
Alexandria Virginia

QMGMF-D 293
Hoelscher, Alvin J
SN 38 458 490

30 October 1956



American Battle Monuments Commission

Washington 25, D C

Gentlemen:

The inclosed copy of letter dated 22 October 1956, from mother of the late Sergeant Alvin J Hoelscher, has been forwarded to your Office in connection with her request for a photograph

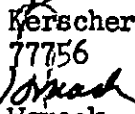
The records of this Office indicate that Sergeant Hoelscher's remains were permanently interred in Plot D, Row 1, Grave 17, in the United States Military Cemetery, Neuville-en-Condros, Belgium

The Correspondent has been advised of this referral

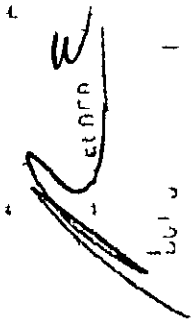
Sincerely yours,

2 Incl
1 Cy ltr dtd 22 Oct 56
2 Cy ltr dtd 30 Oct 56

R J THOMAS
Lt Colonel, QIC
Memorial Division


Kerscher
77756
Womack
Womack
56553

Whittingham/acc



Oct 22 - 1956

Department of the Army

I am the mother of

Sgt Alvin J. Hoelscher who was killed

in World War 2 and is buried in

Belgium I know I can't never be

able to go and visit his grave and I

would so much like to at least have

a picture from it would you take a

good size picture from his grave and

sent it to me this is where he is

buried.

Sgt Alvin J Hoelscher, ASN 38 458 490

Plot D, Row 1, Grave 17

Headstone. Cross

Neuville-en-condroz (Belgium)

U S, Military Cemetery

Mrs Irene H Hoelscher Rt 2 Box 582
Corpus Christi Texas

QMOHE-D 293
Hoelscher, Alvin J.
SN 38 458 490

30 October 1956



Mrs. Irene H Hoelscher
Route 2, Box 582
Corpus Christi, Texas

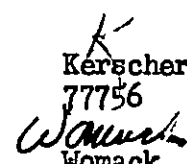
Dear Mrs Hoelscher

This has reference to your letter of 22 October 1956 concerning your son, the late Sergeant Alvin J Hoelscher

The United States Military Cemetery Neuville-en-Cordroz, Belgium, where your son was permanently interred, has been placed under the care and supervision of the American Battle Monuments Commission, Washington 25, D C , for maintenance as a permanent War Memorial. Photographs of the cemetery or individual graves come within the jurisdiction of the American Battle Monuments Commission. I have, accordingly, forwarded your request for a photograph to that office for further reply

Sincerely yours,

R J THOMAS
Lt Colonel, QMC
Memorial Division


Kerscher
77756
Womack
56553

cc: ABMC
Whittingham/acc


W

Q COD 295

Hoelscher, Alvin J., Sgt.
SN 58 468 490

1st Ind

Department of the Army OQIG Washington 25, D C

28 July 1949

TO Commanding Officer Quartermaster Activities
Kansas City Record Center (ACQ) Missouri
ATTENTION Effects Quartermaster

Information requested has been entered on basic form

BY CO A D OF "JOP CEI FR L ~~RELEASE~~ MIDDLESTADT:

WILLIAM I COILO
Major QM
Field Service Division

126 2-12
14 0, 1
fer

GREEN COPY



~~XXXXXXXXXXXXXXXXXXXX~~
 KANSAS CITY QUARTERMASTER DEPOT
 ARMY EFFECTS BUREAU

S: 14 August 49
 HOS/DF/ojr
 14 July 1949

TY
 M O

IN REPLY REFER TO 268,991

REQUEST FOR INFORMATION

243

Hoelscher, Alvin J Sergeant 38458490
 (Name) (Rank) (SN)

INFANTRY 48TH ARMD INF BN
 (Branch of service and/or Organization)

(Following to be filled in by OQMG)

NEXT OF KIN MR. EDWIN B. HOELSCHER FATHER
 (Name) (Relationship)

ADDRESS ROUTE #2, BOX 582, CORPUS CHRISTI, TEXAS

PREVIOUS SHIPMENT YES NO (Check one)

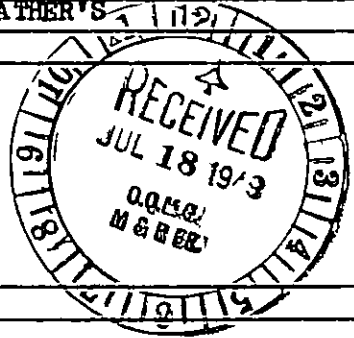
DATE OF LAST PREVIOUS SHIPMENT (If any) 5 DEC 46

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

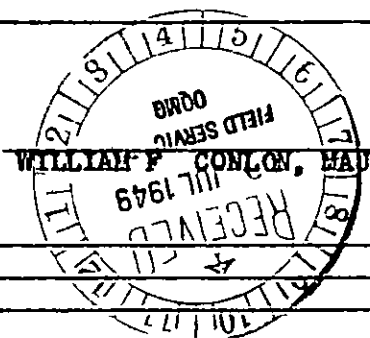
TO WHOM (If made) SAME
 (If same as NOK write same)

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.

MRS IRENE HOELSCHER (MOTHER)
SAME AS FATHER'S



Signature



Remarks _____

AD 11
11 May 1949

MJL
Sgt Alvin J Hoelscher, ASN 38 458 490
Plot D, Row 1, Grave 17
Headstone Cross
Neuville en-Condroz (Belgium)
U S Military Cemetery

Mr Edwin Ben Hoelscher
Route #2, Box 582
Corpus Christi, Texas

Dear Mr Hoelscher

This is to inform you that the remains of your loved one have been permanently interred, as recorded above side by side with comrades who also gave their lives for their country. Customary military funeral services were conducted over the grave at the time of burial.

After the Department of the Army has completed all final interments, the cemetery will be transferred, as authorized by the Congress, to the care and supervision of the American Battle Monuments Commission. The Commission also will have the responsibility for permanent construction and beautification of the cemetery, including erection of the permanent headstones. The headstone will be inscribed with the name exactly as recorded above, the rank or rating where appropriate, organization, State and date of death. Any inquiries relative to the type of headstone or the spelling of the name to be inscribed thereon should be addressed to the American Battle Monuments Commission, Washington 25, D C. Your letter should include the full name, rank, serial number, grave location, and name of the cemetery.

While interments are in progress, the cemetery will not be open to visitors. You may rest assured that this final interment was conducted with fitting dignity and solemnity and that the grave-site will be carefully and conscientiously maintained in perpetuity by the United States Government.

Sincerely yours,

H FELDMAN
Major General
The Quartermaster General

lhc

RECEIVED
2
O O M C
1 IL&REC'D BRANCH
OCT 23 3 4 P 1956

11/11
OCT 28
11 126

PLOT D ROW 1 RAVE 17
 DATE OF BURIAL 17 APR 49
 VERIFIED BY GRS OFFICER THEODORE C MURRAY CAPT QMC

DISINTERMENT DIRECTIVE

1 ✓
293

SECTION A - NAME AND BURIAL LOCATION OF DECEASED
 DIRECTIVE NUMBER 1260 06031
 DATE 15 08 48
DAY MONTH YEAR

NAME HOELSCHER ALVIN J
 SERIAL NUMBER 38458490
 GRADE SGT
 ARM 1
 RACE 1
 RELIGION 2

CEMETERY NEUVILLE BELGIUM
 PLOT C ROW 11 GRAVE 269
 DISPOSITION OF REMAINS 1202 80
CODE DIST CTR

SECTION B - CONSIGNEE AND NEXT OF KIN FLAG SENT 19 APR 49

NAME AND ADDRESS OF CONSIGNEE NEUVILLE-EN-CONDROZ, BELGIUM
 NAME AND ADDRESS OF NEXT OF KIN MR EDWIN BEN HOELSCHER (FATHER)
 ROUTE #2, BOX 582
 CORPUS CHRISTI, TEXAS

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME ALVIN J HOELSCHER
 SERIAL NUMBER 38458490
 GRADE SGT
 DATE OF DEATH
 DATE DISTINTERRED 29 OCT 48

IDENTIFICATION TAG ON REMAINS MARKER
 ORGANIZATION USAGF
 RELIGION C
 IDENTIFICATION VERIFIED BY STANLEY C TYRRELL
 CAPT II F NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL UNIFORM
 CONDITION OF REMAINS ADVANCED DECOMPOSITION
 SKULL & MANDIBLE FRACTURED

OTHER MEANS OF IDENTIFICATION NONE

MINOR DISCREPANCIES (Per Dept Report QMC Form 1194a for major discrepancy)
 NONE

REMAINS PREPARED AND PLACED IN ~~CASKET~~ TRANSFER BOX
 DATE 2 NOV 48 BY ROBERT A GILLSPIE EMBALMER

CASKET SEALED BY WILFRED D HARRIS EMBALMER
 EMBALMER (Signature) WILFRED D HARRIS EMBALMER

CASKET BOXED AND MARKED STANLEY E GAJEWSKI
 CLERK RECORDER
 DATE 3 NOV 48 BY
 SHIPPING ADDRESS VERIFIED BY ALL TAGS MARKINGS & PLATES VERIFIED BY FRANKLIN J. ST CLAIR, 1/LT, INF

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct
 EXCLP CASKETING
 ROGER N LETOURNEAU CAPT FA
 SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS
 I certify that the entries on this form are true copies of the entries on Copy Number 4 of this Disinterment Directive which contains the signatures of the persons whose names are typed hereon
 FILE
 17 MAY 1949
 REPATRIATION BRANCH
 MEAD DIA
 USA

RECORD OF CUSTODIAL TRANSFER

1 SHIPPED

| | | | |
|----------------------|------|-----------------------|------|
| FROM | | TO | |
| KIND OF CONVEYANCE | | NAME OF CONVOYER | |
| SIGNATURE OF SHIPPER | DATE | SIGNATURE OF RECEIVER | DATE |

2 SHIPPED

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|----------------------|------|-----------------------|------|
| FROM | | TO | |
| KIND OF CONVEYANCE | | NAME OF CONVOYER | |
| SIGNATURE OF SHIPPER | DATE | SIGNATURE OF RECEIVER | DATE |

3 SHIPPED

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| FROM | | TO | |
| KIND OF CONVEYANCE | | NAME OF CONVOYER | |
| SIGNATURE OF SHIPPER | DATE | SIGNATURE OF RECEIVER | DATE |

4 SHIPPED

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| FROM | | TO | |
| KIND OF CONVEYANCE | | NAME OF CONVOYER | |
| SIGNATURE OF SHIPPER | DATE | SIGNATURE OF RECEIVER | DATE |

REPAIRATION RECORDS BRANCH
 MAY 6 2 03 PM '49
 PLMORRAI DIVISION

5 SHIPPED

| | | | |
|----------------------|------|-----------------------|------|
| FROM | | TO | |
| KIND OF CONVEYANCE | | NAME OF CONVOYER | |
| SIGNATURE OF SHIPPER | DATE | SIGNATURE OF RECEIVER | DATE |

6 SHIPPED

| | | | |
|----------------------|------|-----------------------|------|
| FROM | | TO | |
| KIND OF CONVEYANCE | | NAME OF CONVOYER | |
| SIGNATURE OF SHIPPER | DATE | SIGNATURE OF RECEIVER | DATE |

7 SHIPPED

| | | | |
|----------------------|------|-----------------------|------|
| FROM | | TO | |
| KIND OF CONVEYANCE | | NAME OF CONVOYER | |
| SIGNATURE OF SHIPPER | DATE | SIGNATURE OF RECEIVER | DATE |

REQUEST FOR DISPOSITION OF REMAINS

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

DATE

Sgt Alvin J Hoelscher, 38 458 490
Plot C, Row 11, Grave 269,
United States Military Cemetery
Neuville-en Condroz, Belgium

15 January 1948

| | | | |
|---|--|---|--|
| A | | C | |
| B | | D | |

DO NOT WRITE ABOVE THIS LINE

NOTE—The et f k sho ldf m la ehm lf w th t t f th p mphlet D p t f w l d W I I A m d F o c D d b f e
fill g th f m Wh the p p prt f th f m fill d t d p o p l y g d b y th e t f k t h l d b t d t th
OFFICE OF THE QUARTERMASTER GENERAL MEMORIAL DIVISION WAR DEPARTMENT WASHINGTON 25 D C th
lf dd d p t g f l p p d d f th p p
lf y the t f k th d p t t f t f k d d t d t th d p o t f th m pl fill PART I
f th s f m

PART I

1 Edwin Ben Hoelscher (Pl X in th p p b) h p t th d a s d b y pl
(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

- 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 (Sp f) _____

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 (Pl pl n X in th b p p t the p t n y h l t d)

- 1 BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS Neuville-en-Condroz, Belgium
- 2 BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY

(ME A D LOC TO O CEMET)

- 3 BE RETURNED TO _____ THE HOMELAND OF THE DECEASED OR NEXT OF KIN FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT _____ (LOCA N OF CE ET EL CTED)

- 4 BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT _____ (LOCAT OF NAT O L CE ETERY SEL CTED)
(Pl as nd t f wn ll t l ll n th h nth l d l l m t y d i d b y pl g n X in th p p b)
 YES NO

THE NAME OF THE DECEASED THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES (If n co t n n y nd t thl f t b y n s t n g th w d NONE nth p b l w)

DO NOT WRITE
AUG 25 1948

8/19/48
A. J. Swannell

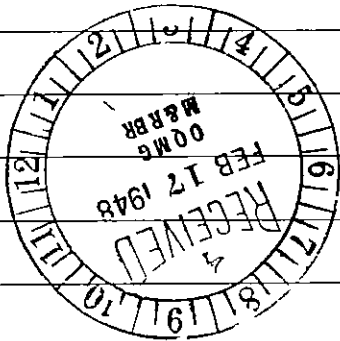
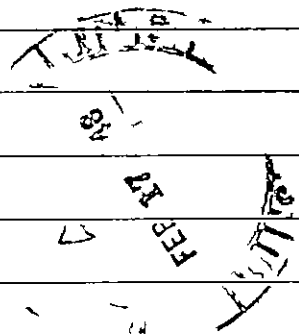
RECEIVED
AUG 25 1948

JUN 23

M. K. H.

ADDITIONAL REMARKS AND INSTRUCTIONS

All remarks and information entered will be considered a part of the Notarial Affidavit



PART I (Cont nued)

If Pg 1 fth fo my h l t d Opt N mb 2 3 Opt N mb 4 w th y w f l mo d d l l ton
oth th th l t d t l m t y c m pl t f th t
I AS THE NEXT OF KIN DO FURTHER DECLARE THAT I DESIRE THE REMAINS TO BE SENT TO THE FOLLOWING PERSON WHO HAS AGREED TO RECEIVE THEM

| | | |
|---|-------------------|--------------------|
| LAST NAME | FIRST NAME | MIDDLE INITIAL |
| NUMBER AND STREET | CITY OR TOWN | COUNTY OR PROVINCE |
| STATE OR TERRITORY OF U S A OR COUNTRY | TELEGRAPH ADDRESS | TELEPHONE NO |
| EXPRESS OFFICE (N t l r o d pass ng t t) | | |

OR I AS THE NEXT OF KIN DO FURTHER DECLARE THAT I DESIRE THE REMAINS TO BE SENT TO THE FOLLOWING FUNERAL DIRECTOR WHO HAS AGREED TO RECEIVE THEM

| | | | |
|--|-------------------|--------------------|--|
| FULL NAME OF FUNERAL DIRECTOR | | | |
| NUMBER AND STREET | CITY OR TOWN | COUNTY OR PROVINCE | STATE OR TERRITORY OF U S A OR COUNTRY |
| EXPRESS OFFICE (N t l r d pas g t t l n) | TELEGRAPH ADDRESS | TELEPHONE N | |

IN CASE OF EMERGENCY THE NAME AND ADDRESS OF THE PERSON NEXT IN LINE OF KINSHIP AFTER ME AS SET FORTH IN THE PAMPHLET DISPOSITION OF WORLD WAR II ARMED FORCES DEAD IS

| | | | |
|-------------------|--------------|--------------------|--|
| LAST NAME | FIRST NAME | MIDDLE INITIAL | RELATIONSHIP TO DECEASED |
| NUMBER AND STREET | CITY OR TOWN | COUNTY OR PROVINCE | STATE OR TERRITORY OF U S A OR COUNTRY |

REMARKS OR ADDITIONAL INSTRUCTIONS (F d d t l p u s p g t)

AS EXPLAINED IN THE PAMPHLET DISPOSITION OF WORLD WAR II ARMED FORCES DEAD I AM THE NEXT OF KIN AND THE INDIVIDUAL AUTHORIZED TO DIRECT THE DISPOSITION OF THE SAID REMAINS

I th d g d DO SOLEMNLY SWEAR (OR AFFIRM) th t th t t m t m d by m th f g g d m t a e f l l d t t th b t f m y k w l d g d b l f

Edwin Ben Hoelscher Rte 2 Box 582
(S T E OF EXT F N) (STREET A NU)
Edwin Ben Hoelscher Corpus Christi, Texas
(NTE O TY) (ST TE)

Sub c bed a d duly swo t befo e m cco d g to l w by th b med ppl t th 13 d y of February
1948 at city (or town) of Corpus Christi cou ty f Mueces d Stat (T to y or
D trict) of Texas

*NOTE—Page 4 is part of the nota ial att stat on

John S Huey
(S N T E OF OFFICER AUTHORIZED TO ADMI STER O T S)
John S Huey
Notary Public, Corpus Christi, Texas
my Comm Exp 6-1-49

Part II—RELINQUISHMENT OF DISPOSITION AUTHORITY

If you are the next of kin of the deceased and you are filing this form with the health department, you are authorized to direct the final disposition of the remains of the deceased.

I, THE _____ (PLEASE PRINT NAME) AS THE NEXT OF KIN OF THE DECEASED NAMED IN PART I OF THIS FORM DO HEREBY RELINQUISH MY RIGHTS TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED THE NEXT EXISTING PERSON IN THE ORDER OF ELIGIBILITY OF DECEDENT'S SURVIVORS IS

| | | |
|------------------------------|--------------|------------------|
| LAST NAME | FIRST NAME | MIDDLE INITIAL |
| RELATIONSHIP TO THE DECEASED | | |
| NUMBER AND STREET | CITY OR TOWN | STATE OR COUNTRY |

WHOM I UNDERSTAND SHALL HAVE THE RIGHT TO DIRECT FINAL DISPOSITION OF THE REMAINS OF THE DECEASED

| | |
|-------------------------|------------------|
| (SIGNATURE) | (ADDRESS) |
| (NAME PRINTED OR TYPED) | (CITY AND STATE) |

PART III

If you are NOT the next of kin of the deceased and you are filing this form with the health department, you are authorized to direct the final disposition of the remains of the deceased.

THIS IS TO NOTIFY YOU THAT I AM NOT THE NEXT OF KIN AUTHORIZED TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED NAMED ON PAGE 1 OF THIS FORM. THE FOLLOWING PERSON TO THE BEST OF MY KNOWLEDGE IS THE NEXT OF KIN TO WHOM THIS FORM SHOULD BE DIRECTED

| | | |
|------------------------------|--------------|------------------|
| LAST NAME | FIRST NAME | MIDDLE INITIAL |
| RELATIONSHIP TO THE DECEASED | | |
| NUMBER AND STREET | CITY OR TOWN | STATE OR COUNTRY |

| | |
|-------------------------|------------------|
| (SIGNATURE) | (ADDRESS) |
| (NAME PRINTED OR TYPED) | (CITY AND STATE) |

243

Sgt Alvin J Hoelscher, 38 458 490
~~Pls C, Row H, Grave 269,~~
United States Military Cemetery
Neuville-en-Condroz, Belgium

15 January 1948

Mr Edwin Hoelscher
Route #2, Box 582
Corpus Christi Texas

Dear Mr Hoelscher:

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.

Sincerely

THOMAS B LARKIN
Major General
The Quartermaster General

Incls

mbk

JAN 15 11 01 AM '48
MAIL ROOM
ANG

QMGYG 293
Hoelscher, Alvin

293 Hoelscher, Alvin J

3 August 1946

Mr Edwin Hoelscher
Route #2, Box 382
Corpus Christi, Texas

Dear Mr Hoelscher:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Sergeant Alvin J Hoelscher, A S N 38 458 490

The records of this office disclose that his remains are interred in the U S Military Cemetery Neuville-en-Candroz, plot G, row 11, grave 269

This cemetery is located nine miles southwest of Liege, Belgium, and is under the constant care and supervision of United States military personnel

The War Department has now been authorized to comply, at Government expense, with the feasible wishes of the next of kin regarding final interment, here or abroad, of the remains of your loved one. At a later date, this office will, without any action on your part, provide the next of kin with full information and solicit his detailed desires

Please accept my sincere sympathy in your great loss

Sincerely yours,

F B LARKIN
Major General
The Quartermaster General

LK

[Handwritten signature and initials]
JG 5
1000, 10, 10, 10, 10
000

[Handwritten initials]

RRE Form #43
20 Sep 48

M

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

| | | | | |
|-------------|--------------|-----------|--------|----------|
| HOELSCHER | Alvin | J | SCT | 38458490 |
| (Last Name) | (First Name) | (Initial) | (Rank) | (ASN) |

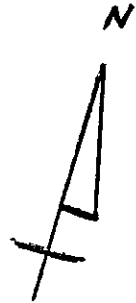
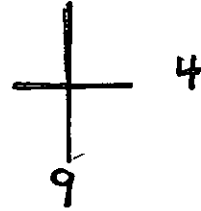
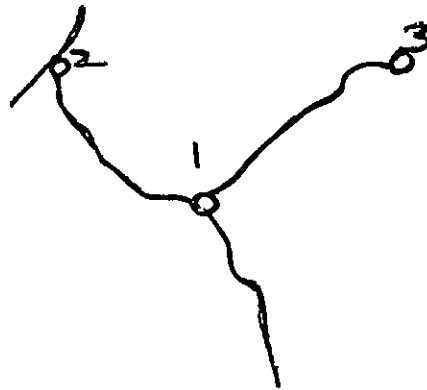
Subject remains have been permanently interred overseas in the United States Military Cemetery NEUVILLE

STATION FILE

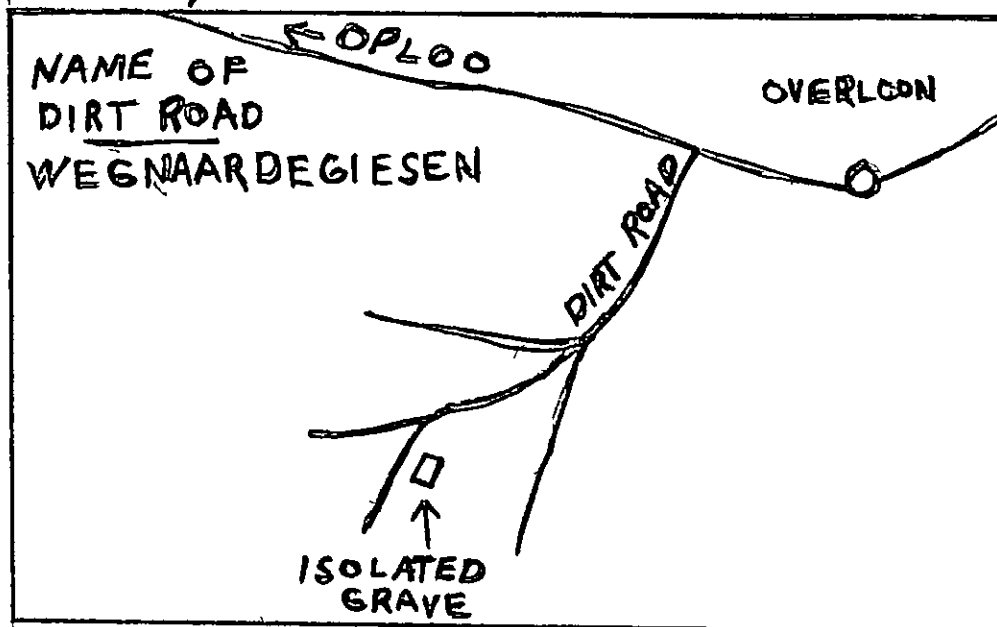
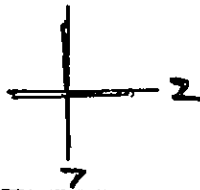
Incl /

OVERLOON Holland
Isolated Grave
North West Europe
Series 4042
2A & 3A/E76-31
Scale 1/250 000
WZ HOLLAND

Hoelscher, Alvin J. Sgt
38458490



- 1 - OVERLOON
- 2 - OPLOO
- 3 - VIERLINGSBEEK



REPORT OF INVESTIGATION

ARMY SERVICE RECORDS

AGRC Form #10 (Revised)
1 January 1946

Date March 13, 1946

NAME Hoelscher, Alvin J, Neuville en Condroz
RANK Sgt / SN 38458490

ORGANIZATION ---

MEANS OF IDENTIFICATION Ident Tags On neck

(All items available to all will be compiled up final processing
by the clerical staff of the unit processing center)

SECTION I (ENEF) (To be completed by investigators in all cases)

1. Was positive identification secured for the access through the surface
investigation? NO If so, state the following information

a. NAME Unknown RANK -- / SN --

b. ORGANIZATION ---

2. Was partial identification established? NO If so, state the
facts as to whom you believe the access led to

a. NAME Unknown RANK -- / SN --

b. ORGANIZATION --

3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY? --

(Use reverse side for listing of crew numbers from MCR)

c. Date of above burials --- Common Graves? ---

PLLOT 0 GRA/E

CAMBER NEUVILLE-EN-CONDROZ C 11 269

NAME HOELSCHER, ALVIN J. RANK SGT. ASN 38458490

Next of Kin (Rel + onship) FATHER

Name HOELSCHER, EDWIN

Street RT # 2, BOX 582

City CORPUS CHRISTI, TEXAS

Original Serial Recalled

DATE 7/31/46 Name of Person Executing Form Al Burns
 (First) (Last)

Photo Yes No

- a Give basis Gerrit Wilmsen (see statement)
- 15 What was the place of death? Overloon (see statement) records 2A&3A/E 76-31
 Give basis _____
- 16 Where were the remains found? On the side of the road records 2A&3A/E 76-31
of Overloon
- a By whom? Gerrit Wilmsen
- b Is sketch attached? Yes
- 17 Was a casket used? No Who furnished the casket? _____
 Type of casket -- How marked? --
- 18 Who made the burial Dutch Boy
 (Civil, American Mil or Germ Mil)
- a What are the names and address? Gerrit Wilmsen
Overloon Peelkant C 191
- b Are certificates and statements attached? Yes

~~SECTION B - AIR CORPS DECEASED (To be completed only if deceased is believed to be a member of the IAF)~~

- ~~1) Where remains found in the plane wreckage? _____
 a Give location in plane from which the bodies were removed _____
 (Tail gunner, pilot, radio, turret, etc, or front, side, of plane)
 b Near wreckage? DOES NOT APPLY~~
- ~~2) Scene of crash must be investigated Give complete results of investigation (if removed, state when and by whom)
 a Type of Plane _____
 b Markings and/or name on plane _____
 c Give numbers on motors, machine guns, instruments, radios or other equipment _____~~
- ~~3) How did crash occur? _____ Anti-aircraft _____
 Enemy Planes? _____ Collision? _____~~

35 Numbers of the in immediate vicinity of the in slant _____

36 Does specific time and date of discharge correspond with date of death of the deceased? _____

37 Precise time and date of destruction of the _____
(if it? (Date)

38 Did any of the crew members escape? _____ Prisoners? _____

SECTION D - OFFICIAL REPORT (To be filled out by the carrier's applicable law)

39 Did death occur from any other means? (If, truck, jeep, mines, air weapons, or shells fired) -- **Not known**

If so, describe in detail the nature of the injury if the interrogator

Are there any other statements in the report which would be of the case attached **Yes.**

40 State the specific details of the aircraft which was involved in the crash and the nature of the damage to the aircraft _____

See STATEMENT

SECTION E - (If filled out by the interrogator's law)

41 Were personal effects recovered by the investigating team? **No**

If not, state reason _____

Were any identification tags found on the aircraft? **No**

Where? -- By whom? --

Present location **UNKNOWN.**

If the aircraft is not identified by the law, all the items recovered should be listed but all the items should be identified as made by the manufacturer _____

Were any personal effects recovered from the aircraft? **No.**

Where? -- of whom? ---

Present disposition? **UNKNOWN**

50. Has any information been given concerning this burial in the area outside the immediate vicinity? No
51. Was investigation proceeded by Yes need publicity Yes
 (If special investigation, give serial number) _____
52. Give Brief narrative See STATEMENT

(Use attached sheets, if necessary)

[Handwritten signature]
 S. nature of I - r
C.M. JULIE.
 Stratumschedijk 8 Eindh
 Civilian

[Handwritten signature]
 S. nature of I - r
Scheeter Dave,
 Pfc 42126826
 ASN

6857th QM GR CO
 I R 101

S T A T E M E N T

8 March 1946

I, Gerrit WILMSEN, living at Overloon, C191 Peelkant, declare that I was playing in the neighbourhood of my home some day in July 1945 when I found a belt and an overcoat I pulled and then I felt there was a body in it From the colour of the clothes I concluded that it had to be an American soldier I dug a grave and buried him I put a cross on the grave and wrote with pencil the words "Unknown American" on it

S/ G Wilmsen

I certify that this is
a true translation

Roy W B Jonkers

Roy W B Jonkers
Felmerslaan 62
Eindhoven

Certified true copy

James A Park
JAMES A PARK
2nd Lt INF
6857th QM GR Co

VERKLARING

8 Maart 1946

Ik Gerrit WILMSEN, wonende te Overloon C 191 Peelkant, verklaar, dat ik was aan het spelen ongeveer in Juli 1945 in de buurt van ons huis. Ik vond een riem en een overjas, trok er aan en er bleek een lijk in te zitten. Aan de kleeven merkte ik dat het een Amerikaans soldaat moest zijn. Ik heb toen een graf gedolven en hem begraven. Ik heb er een kruis op gezet en daarop met potlood geschreven 'Unknown American'.

S/ Gerrit Wilmsen

Certified true copy

James A Park
JAMES A PARK
2nd Lt INF
6857th QM GR Co

R Waal 1946

Verklaring

Gerrit Wilmsen

Ik ~~Piet~~ Heblenne wonende te Overloon
C 191 Peelhant verklaart dat ik was aan het
spelen organeer in Juli 1945 in de buurt van
ons huis Ik vond een riem en een overjas
trok naar er en er bleek een lijk in te zitten
aan de kleen merkte ik dat het een Duitse -
Daansch soldaat moest zijn Ik heb toen
een graf gegraven en hem begraven Ik heb
er een kruis op gezet en daarop met potlood
op geschreven unknown American

Gerrit Wilmsen

WD QMC FORM 1042
(R 1 Apr 1941)
(S persedes GRS F m 1)

REPORT OF INTERMENT
(AR 30 1810 and AR 30 1815)

DATE OF REPORT
14 March 1946

Imp Id fca T c II Pos b
DO NOT TYPE

HOELSCHER ALVIN J
38458490 T43 +4 A
C

Section 1—IDENTIFICATION

NAME (Last first middle initial) Hoelscher, Alvin J gm
SERIAL N 38458490
GRADE Sgt ORGANIZATION 48 Quartermaster INF Bn
BRANCH OF SERVICE Unk
RACE Unk RELIGION Catholic
IF OTHER THAN U S DEAD GIVE NAME OF COUNTRY --

PLACE OF DEATH Overloon Holland
CAUSE OF DEATH KIA GSW in Head
DATE OF DEATH 5 Oct 44
Unk

EMERGENCY ADDRESSEE (Name location and address)

IDENTIFICATION TAGS FOUND ON BODY (1 2 or none) Two
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) None
IF NO TAGS FOUND ON BODY DESCRIBE MEANS OF IDENTIFICATION (If identified fill section 3 on reverse)
16 APR 1946

PERSONAL EFFECTS FOUND ON BODY AND POSITION OF SAME
25 French Frangs 2 Newspaper Clipping
Wrist Watch-Beruss 1 Blood Donor Certificate
17 Pictures 1 Insurance Premium Receipt
1 Identification Card 1 Identification Card
1 Name Card 1 Finance Receipt Disinterred by 1st Plt. 6857 Gr.

Section 2—BURIAL (If applicable)

NAME NUMBER COORDINATES AND LOCATION OF CEMETERY

U S MILITARY CEMETERY (VK 390187), NEUVILLE EN CONDROZ, BELGIUM

DATE OF BURIAL 29 March 1946
HOUR 1000
BURIED IN (Should blank or name of other) Coffin
TYPE OF GRAVE MARKER Cross
PLOT N C
ROW No 11
GRAVE No 269

WAS THIS A REBURIAL? (Yes or no) Yes
IF A REBURIAL INDICATE NAME NUMBER COORDINATES OF PREVIOUS CEMETERY AND LOCATION OF GRAVE
on roadside at Overloon, Holland
PLOT NO None
ROW No -
GRAVE NO -
2A&3A/E76-31 Series 4042 N W Holland

TYPE OF RELIGIOUS CEREMONY
PERSON CONDUCTING BURIAL RITES
IF IDENTIFICATION TAGS NOT USED DESCRIBE IDENTIFICATION DATA AND CONTENTS BURIED WITH BODY
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes
IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes

BODY BURIED ON DECEASED LEFT NAME (Last first middle initial) LONDON, DANIEL A
RANK Unknown
SERIAL N 0-412674
ORGANIZATION Unknown
GRAVE No 270

BODY BURIED ON DECEASED RIGHT NAME (Last first middle initial) UNKNOWN X - 3237
RANK Unknown
SERIAL No Unknown
ORGANIZATION Unknown
GRAVE No 268

SIGNATURE OF PERSON PREPARING REPORT James A Park
SIGNED BY James A Park 2nd Lt INF
SIGNATURE OF GPO OFFICER VERIFYING REPORT Francis A Loftus
SIGNED BY Francis A Loftus 2nd Lt INF Reinterment Officer

DISTRIBUTION OF REPORT Sgd 1 US d l d d d g d g l d n o p f m y d l h e r m Gen al
t gh H d GRS Off C l n h p sc bed by h o mm d

SENSITIVE SURFACE - HANDLE EYES ONLY

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

REPORT OF DEATH

DATE 3 Oct 45

| | | | |
|--|---|---|------------------------------------|
| FULL NAME Hoelscher, Alvin J. | | ARMY SERIAL NUMBER 38 458 490 | GRADE Sgt |
| HOME ADDRESS Corpus Christi, Texas | | ARM OR SERVICE Infantry | DATE OF BIRTH 12 Mar 24 |
| PLACE OF DEATH European Area | CAUSE OF DEATH Killed in action | | DATE OF DEATH 5 Oct 44 |
| REGION OF DECEASED European Area | DATE OF ENTRY ON CURRENT ACTIVE SERVICE 13 Apr 43 | | LENGTH OF SERVICE FOR PAY PURPOSES |
| | | YEARS | MON HS DAYS |

EMPLOYER ADDRESS (If not same as above)

Mrs Irene H Hoelscher (Mother) Rt #2, Box 582, Corpus Christi, Texas

BENEFICIARY (If not relative, give name and address)

Edwin Hoelscher (Father) Same as above
Irene Hoelscher (Mother) Same as above

| INVESTIGATION MADE | | IN LINK OF DUTY | | OWN MISCONDUCT | | WAS DECEASED ON DUTY STATUS | | AUTHORIZED ABSENCE | | IN FLYING PAY STATUS | | OTHER PAY STATUS (Sp /y b l w) | |
|-------------------------------|----|-----------------|----|----------------|----|-----------------------------|----|--------------------|----|----------------------|----|--|-------------------------------------|
| YES | NO | YES | NO | YES | NO | YES | NO | YES | NO | YES | NO | YES | NO |
| | | | | | | | | | | | | | |
| ADDITIONAL DATA AND STATEMENT | | | | | | | | | | | | <input checked="" type="checkbox"/> BATTLE | <input type="checkbox"/> NON BATTLE |

The individual named in this report of death is held by the War Department to have been in a missing in action status from 5 Oct 44 until such absence was terminated on 27 Sept 45, 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
10-8-45
SMB
final X

BY ORDER OF THE SECRETARY OF WAR

L W Warner

ADJUTANT GENERAL

- 5 Name and Type of Cemetery --
(Military or civilian)
- 6 Map coordinates of the Cemetery _____
a Town _____ Country _____
- 7 Give exact location in cemetery of the remains _____
a Section -- Row -- Grave --
b Is sketch attached? -- --
- 8 If remains are not located in a cemetery, give exact location
a Town Overloon Coordinates 2A43A/E 76-31
b Is sketch attached? Yes
c Is area mined? No.
- 9 How is the grave marked? --- Cross
- 10 If grave is marked with cross give exact markings thereon _____
Unknown America
- a From what source was this information obtained? Clothes on Body
(Identification tags, personal effects)
- b By whom Gerrit Wilmsen
- 11 Where are the cemetery records? Burgomasters office
(Town hall, cemetery, burgemeister's office)
- What information was contained thereon? Unknown American
- b Where was the information obtained? See Statements
- c By whom? _____
- 12 What is the date of death? Not Known (approx 5 Oct 1944)
a Civ Basis --
- 13 What is the cause of death? G S W head
b Civ Basis? --
- 14 What is the date of burial? July 1945 (see statement)

- 22 Did plane explode in the air? _____ On ground? _____
- 23 Did plane burn in the air? _____ On ground? _____
- 24 What was the direction of the flight? _____
- 25 What was the civilian opinion regarding destination and where? _____
-
- 26 Had bombs been released prior to the crash? _____
- 27 Does specific time and date of crash correspond to date of death of above named deceased? _____
- 28 Number of planes in formation prior to crash _____
- 29 State precise time and date of the crash _____ (Day?) _____
- 30 Were parachutists seen? _____ How many? _____ Escaped? _____
- Prisoners? _____

DOES NOT APPLY

SECTION C - ARMORED CORPS DECEASED (To be completed only if deceased is believed to have been a member of the Armored Force)

- 31 Were remains found in wreckage of a tank? _____
- 32 Give specific position in tank from which deceased was removed _____
- (Radio man, driver, assistant driver or front, side, or back)
- 33 Were there any other remains? _____
- Location of destroyed tank must be investigated. Give complete results of investigation (If removed, state when and by whom)
- 34 a Type of tank _____
- b Marking and/or name of tank _____
- c Numbers on motors, machine guns, ammunition, instruments etc _____
- What was the type of enemy action that resulted in the tank's disablement? _____
- 35 Did tank explode? _____ Burn? _____

42

c Was deceased identified by living members of the crew at the time of death? No

d Did Comet registry Registrar or crew sign receipt for immunization shot? --

42 Was deceased given first aid? -- If so, where? --

By whom? -- First treatments from the medical people attached?

--

43 Was deceased evacuated to a German civilian hospital? No

Where? -- Names of people concerned --

--

Is it possible on surface investigation to obtain from civilian sources a physical description of the deceased? No

4b Is it possible on surface investigation to obtain from civilian sources the condition of the in (but if not stated? etc)

46. Do facts surrounding death's own evidence tend to indicate atrocity case? No

If so, give basis of positive assumption --

--

b If so has higher headquarters been notified? --




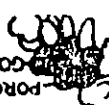

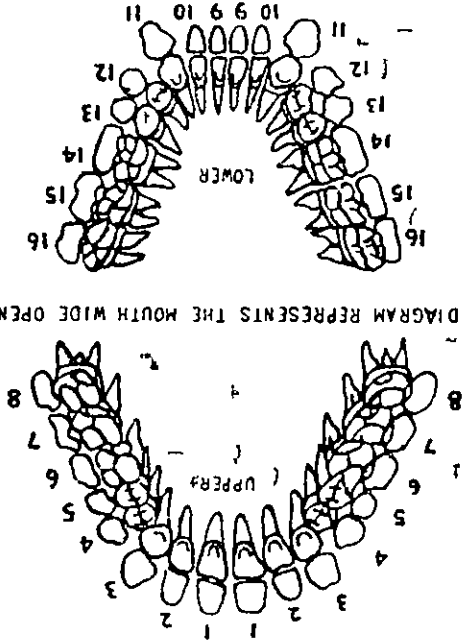
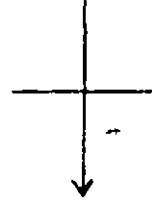
47 Was case previously investigated? No By whom? --

When? --

48 (A full names, initials, and information obtained from chief person interviewed? Gerrit Wilmsen.

Overloon Peelkant C.191.

49 Are all positive statements of identification and particulars surrounding death attached? Yes

| Section 3—UNIDENTIFIED REMAINS | | LEFT LITTLE FINGER | LEFT RING FINGER | LEFT MIDDLE FINGER | LEFT INDEX FINGER | LEFT THUMB | RIGHT THUMB | RIGHT INDEX FINGER | RIGHT MIDDLE FINGER | RIGHT RING FINGER | RIGHT LITTLE FINGER | | | | |
|--|--|--|------------------|--|-------------------|---|----------------------|---|---------------------|---|--------------------------------|--|---|--|--|
| <p>INSTRUCTIONS () Getc will b tk t dth mot m t left th ft d ty f d f d a fill atom cal h cte st below d y th l d Oth ch mb f pl e hcle ad k (b) At gep top t aeth m t l ble flle imp t lff g dth mb th hrt tft o sm y ap bl fff g p t p t b dth c dto f h d eytooth will be d t d thetooth hart eod wthd gamb l w To th ch r t w ll lb accomplished fo m e f t g p t e ed</p> | | HEIGHT | WEIGHT | COLOR OF EYES | COLOR OF HAIR | BIRTHMARKS SCARS OR TATTOOS | WEAPON AND SERIAL NO | | LAUNDRY MARKS | | WHERE BODY WAS BURIED OR FOUND | | | | |
| OTHER IDENTIFICATION CLUES | | | | | | | | | | | | | | | |
| <p>FILLINGS  SILVER FILLING GOLD FILLING</p> | | <p>CAVITIES  CAVITY DECAVED</p> | | <p>MISSING TEETH  TOOTH MISSING</p> | | <p>CROWNED TEETH  PORCELAIN CROWN GOLD CROWN</p> | | <p>BRIDGE WORK  GOLD BRIDGE</p> | | <p>Diagram represents the mouth wide open  UPPER LOWER</p> | | | <p>FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY</p> | | |
| <p>REMARKS</p>  | | | | | | | | | | | | | | | |

SENSITIVE SURFACE - HANDLE EDGES ONLY

268,991

H

file in CB

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

REPORT OF DEATH

DATE 3 Oct 45

| | | | |
|--|---|---|------------------------------------|
| FULL NAME Hoelscher, Alvin J | | ARMY SERIAL NUMBER 38 458 490 | GRADE Sgt |
| HOME ADDRESS Corpus Christi, Texas | | ARM OR SERVICE Infantry | DATE OF BIRTH 12 Mar 24 |
| PLACE OF DEATH European Area | CAUSE OF DEATH Killed in action | | DATE OF DEATH 5 Oct 44 |
| STATE OF DECEASED European Area | DATE OF ENTRY ON CURRENT ACTIVE SERVICE 13 Apr 43 | | LENGTH OF SERVICE FOR PAY PURPOSES |
| | | | YEARS MONTHS DAYS |

EMERGENCY ADDRESS (Name, relation, and address)
Mrs Irene H Hoelscher (Mother) Rt #2, Box #92, Corpus Christi, Texas

BENEFICIARY (Name, relationship and address)
Edwin Hoelscher (Father) Same as above
Irene Hoelscher (Mother) Same as above

| INVESTIGATION MADE | | IN LINE OF DUTY | | OWN MISCONDUCT | | WAS DECEASED ON DUTY STATUS | | AUTHORIZED ABSENCE | | IN FLYING PAY STATUS | | OTHER PAY STATUS (Sp, fy, b, l, w) | |
|----------------------------------|----|-----------------|----|----------------|----|-----------------------------|----|--------------------|----|----------------------|----|--|-------------------------------------|
| YES | NO | YES | NO | YES | NO | YES | NO | YES | NO | YES | NO | YES | NO |
| | | | | | | | | | | | | | |
| ADDITIONAL DATA AND/OR STATEMENT | | | | | | | | | | | | <input checked="" type="checkbox"/> BATTLE | <input type="checkbox"/> NON BATTLE |

The individual named in this report of death is held by the War Department to have been in a missing in action status from 5 Oct 44 until such absence was terminated on 27 Sept 45 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

L W Warner

ADJUTANT GENERAL

268991

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

-BATTLE CASUALTY REPORT

| | | | | |
|--------------------------------------|---|---------------------|---|---------------------------------|
| NAME HOELSCHER ALVIN J | SERIAL NUMBER 38458490 | GRADE SGT | ARM OR SERVICE INF | REPORTING THEATRE FTO |
| PLACE OF CASUALTY HOLLAND9 | DATE OF CASUALTY M N T EA M T C Y O Y 05 OCT 44 | | H M E M B YIA 210 | |

NAME AND ADDRESS OF EMERGENCY ADDRESSEE

| | |
|--|---|
| THE NDI DU L NAMED & O ES G D O L L O W N G E R S O N A S H E O N E T O N O T E D N C A S E O F M E E C T H E O F F I C A E E E G A I C N D L E T T E R Q T C O S W L L B S T O S E S O N T H E L A T O S I F A Y S S H O W B O W H O U E O T T H S O S N O T N E C E S S R L Y T X O K O E L A E S S G E D O S X M O H S G A T Y O F E A T H | MR MRS M SS—FIRST NAME—M D L E I N T I A L—L A S N M E E L A O S H D E N O E D MRS IRENE H HOELSCHER MOTHER 24 OCT \$44 1fr |
| NO AND NAME OF STREET—CITY—STATE ROUTE TWO BOX 582 CORPUS CHRISTI TEXAS | |

REMARKS

CORRECTED COPY

| | | | |
|---|--------------------------|---|--|
| ACTION BY PROCESSING AND VERIFICATION SECTION | | P O T E I I E D <input checked="" type="checkbox"/> F O M 3 <input type="checkbox"/> G 2 <input type="checkbox"/> E Q _____ | |
| ASU Y NCH FLE ATT H D _____ O CH G D O _____ | DATE _____ | | |
| E V O S L Y R E P O T D O <input checked="" type="checkbox"/> YES _____ (S C A D B E L O W) | | | |
| F L E O | M E S A G O | Y E | D A D E A A O D |
| FO W D E D TO <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| EC | EN | TELE RAM | W O U N D E D E T T C O E S E R T M O N - D E L |
| E O T N O T V D _____ O O M S _____ O B R F I L _____ C H K E D Y / / _____ E V W Y _____ | | | |

THIS SPACE FOR USE OF MACHINE RECORDS BRANCH A G O

| CC EA | | CASUALTY STATUS | | | O G | | M E S S G O | | L A E S C S D E | | | E F EA | | E W P O S | | E S D E N C E | | C O U N T Y | | C O | | | | | |
|-------|----|-----------------|----|----|-----|----|-------------|----|-----------------|----|----|--------|----|-----------|----|---------------|----|-------------|----|-----|----|----|----|----|----|
| 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 | 55 | 56 | 57 | 58 | 59 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |

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COPIES FURNISHED SEE CASUALTY BRANCH MEMORANDUM NO 48 1944

DISTRIBUTION B _____ COPIES

(ALL WOUNDED MILITARY PERSONNEL AND ALL TYPES OF CASUALTIES PERTAINING TO CIVILIANS WHO ARE W D EMPLOYEES EMPLOYEES OF W D CONTRACTORS AND OTHERS SUBJECT TO MILITARY LAW)
COPIES FURNISHED SEE CASUALTY BRANCH MEMORANDUM NO 48 1944

268991

CLB/AP/TKW
4 December 1946

2/10
12-4

Mr Edwin Hoelscher Administrator
Estate of Alvin J Hoelscher
Route No 2
Box 582
Corpus Christi Texas

Dear Mr Hoelscher

Thank you for the information recently given the Army
Effects Bureau in connection with the disposal of personal
property of your son Sergeant Alvin J Hoelscher

There is inclosed a receipt received here with your
son's effects showing that he deposited \$51 00 with the
Finance Department, for transmittal to Mrs B B Hoelscher

The effects contained in a package are being for-
warded to you If delivery is not made within thirty days
from this date please notify me so that tracer may be in-
stituted

As previously indicated personal property is for-
warded by this Bureau for distribution in accordance with the
laws of the state of decedent's legal residence

Yours very truly

1 Incl
Receipt

C L RUMFIELD
1st Lt QMC
Asst Effects Quartermaster

| | | | |
|---|----------------------------|---|--|
| AMOUNT OF CHECK | TE DISCREPANCY IN A AMF | INCLOSE VAL SHIP VALUAB | RECIPIENT FROM CASUALTY REPORT |
| ACCOUN NUMBER | SERIAL NUMBER | VALUABLES SHIPPED BY (clerk) 12/4/46 EGY | INVENTORY FORM 20 L TTER 11/25 |
| <p>Mr Edwin Hoelscher Administrator Estate of Alvin J Hoelscher Route No 2, Box 582 Corpus Christi Texas</p> <p>Sgt Alvin J Hoelscher 38458490 268991 D</p> | | | NO & TYPE OF CONTAINER ENVELOPE CARTONS PACKAGE FOOT LOCKER |
| | | | SPECIAL INSTRUCTIONS REMOVE GI SHIP BLOODSTAINED SHIP DAMAGED REMOVE BL OSTAINEO REMOVE DAMAGED FILMS REMOVED DIARY REMOVED |
| GLR/AP/fkw | SUMMARY COURT DATA | | DATE ACTION TAKEN 12-4-46 |
| DATE OF FINDING | APPLICANT | | MAIL REVIEWER (initials) EK |
| REMARKS | | | SHIPPED FRANKED EXPRESS FREIGHT |
| | | | DATE SHIPPED DEC 5 1946 |
| | | | SHIPPING CLERK MK |
| | | | ROUTING ACCOUNTING BRANCH WAREHOUSE FILE |

ORDER FOR ACTION

26⁰⁰ 991

| ATTACHMENTS | | STATUS | |
|-------------|--------------------|--------|----|
| X | ORDER INVENTORY | DE | ED |
| X | GR OR SUB GR L BEL | MISS | G |
| | W L O OWE OF ATTY | P O V | |
| 1- | TALLY N O 43 | DO ED | |
| | | UN NOW | |

EFFECTS INVENTORY
ARMY EFFECTS BUREAU

| | | | |
|-----------------------|-------------|-------------|--|
| BAGS CLOTH OR TRAVEL | BELT | O E CO S | 1 Watch, wrist Benrus, w/o strap |
| BELT MONEY (NO MONEY) | KS A D E S | E SONAL | |
| BILLFOLD (NO MONEY) | OOKS P L OG | PENC L E L | |
| BOOKS | BRU | OU I | |
| BRACELET IDENT | E | PHOTOS | |
| CAMERAS | OTH WASH | PE | |
| CLOTHING | S | I GS | |
| X MISC ARTICLES | O OCKE | SCA S | |
| RELIGIOUS ARTICLES | OOTVE P | SHIRTS | |
| RIBBONS DECORATION | G S | SOCKS PR | |
| SHORT SNORTER | G OVE | S TIONE Y | |
| SOUVENIR MONEY | KE CHE S | TIES | |
| SOUVENIRS | HE DWE R | TO CCO | |
| TESTAMENTS | CKETS | ET RTIC ES | |
| TOWELS & WASHCLOTHS | K TS | TO ELS | |
| U S MONEY (AMOUNT) | N ES | T O SERS PR | |
| WATCH | LE TE S | | |
| WIN S | L TERS | UN E WE | |

U/AM/A/G/ED

| | |
|---|--|
| CON E S D ESSED TO | INF TION |
| None | In case of accident notify Mrs E B Hoelscher Rt 2 Box 582 Corpus Christi, Texas |
| NAME D STATUS IATIONS | CROSS REF E CE |
| GP-Label appears to show A J Hoelscher | |

| | | | |
|---------------------------|---------|--------|----------------|
| E K | EC D BY | NU | EAU CHECK |
| ORDER | | | X ITO IGI |
| D | | SYMBOL | IG EG M I |
| TRAY CHECK | | AMOUNT | TO G A O |
| O EIGN CURRE | | | T D |
| U S CU ENCY | | | TO SSU G GE CY |
| DATE | | | |
| VALUABLES SHIPPED | | | |
| B K OR P ACE/GFS 17/11/46 | | | |
| PAYEE BY [Signature] | | | |
| REMITTER OR D WE | | | |

1 Form 38
Amt \$51.00 FROM ALVIN J HOELSCHER TO Mrs. E B HOELSCHER.

| | | | | |
|-----------------|-------------------|-------------------|------|----------|
| T O | IG NO O KGS | EXA I IIG TE | O O | SH ET |
| 3259 | | 23 July 1946 | | O S EETS |
| N E | ALVIN J HOELSCHER | | S N | 38458590 |
| ORG NIZATION | 196 Rehl Co | | NK | SAT |
| WAREHOUSE SPA E | E MINED BY | DI Y REMO E | | |
| 728 | 5/17/10 | P TO FIL RE D | | |
| P C E CR TION | PAC D BY | O PICTU E L ENO E | | |
| II 10 | U | SHIPPED | | |
| WE GHT | INS CTE Y | DA E | WHOM | |
| | Q | DEC 5 1946 | MK | |
| | STORE Y | 76113 | | |

57

G I REMOVED

Hofman

Change

1 1 1 h bo ms w
d by m

QUANTITY

DATE

UNIT

U S

CHECK SHORT

225 FRENCH FRANCS

SHORTAGES

ADDITIONAL REMARKS

REMOVED (h h G I)

D I GE (L pe l d m)

*1 wrist watch not in running order.
All effects have bad order.*

Serial No _____ Name _____ *24 14 1 4*

Grade _____ Rank _____

Organization _____

Address _____

Nearest Relative _____

Address _____

Killed in Action _____ Died of Disease _____

Date _____ Hospital _____

Battle Area _____ Information _____

Place of Burial _____

Point of Coordination _____

Description of Body _____

Members Missing _____

Person belongs to

Signed _____

64 5

family

HOELSCHER, ALVIN J

SGT 8590

BAY

PALLET

BOX

TALLY
3259

TYF K

RESTRICTED

INVENTORY FORM

15 March 1946
Date

SUBJECT Inventory of Personal Effects of

HOELSCHER Alvin J Sgt 38458590
(Last Name) (First Name) (MI) (Rank) (ASN)

HQ AGRC ISFET

TO Effects Quartermaster, X Communications Zone, APO 887 US Army

The above named individual of 196 Repl Co
(Unit) (Organization)

reported KIA about 5 October (est) 1944
Status (K A MIA Hosp etc) (Date)

Designated Beneficiary if information is fully accessible

- 225 French Francs
- 1 watch, wrist Benrus
- 17 pictures
- 1 Calling Card
- 2 Newspaper clippings
- 1 Red Cross Blood Donor Card
- 1 identification card
- 1 finance receipt
- 1 insurance premium receipt

Money in the amount of _____ has been turned in to _____
(Bank or other financial institution)

_____ WDFD 38 enclosed

_____ any banks in which account is maintained
I certify that the items constitute all of the personal effects of the individual and that they were forwarded to the Life Dept
on _____ 1944
(Rank, etc)

Name _____
Rank & ASN _____
Organization _____

Any additional pertinent information:

RESTRICTED

INVENTORY FORM

269,991 18

15 March 1946.
Date

SUBJECT: Inventory of Personal Effects of

HOELSCHER Alvin J Sgt 38458590
(Last Name) (First Name) (MI) (Rank) (ASN)

TO ~~Effects, Current Station, General Post Office, Zone, APC~~ HQ AGFC TSFET 887 US Army,

The above named individual of 196 Repl. Co.
(Unit) (Organization)

reported K.I.A. about 5 October (est) 194
Status (KIA MIA Hosp etc) (Date)

Designated Beneficiary if information not fully accessible

- 225 French Francs
- 1 Watch, wrist Benrus
- 17 pictures
- 1 Calling Card
- 2 Newspaper clippings
- 1 Red Cross Blood Donor Card
- 1 identification card
- 1 finance receipt
- 1 insurance premium receipt

Money in the amount of \$4.55 has been turned into F. HARKINS, CAPT USFD
(S O W I C O I R I N D)

212-427 WDFD 38 enclosed

I certify that the above items constitute all of the effects of the individual named above and that they were forwarded to the designated beneficiary on 19 APR 1946 94
(to include, etc)

Name Andrew E. McPartey
Rank & ASN 2nd Lt 0-1335328
Organization 6862nd M Bu (Spec)

Any additional pertinent information:

Corpus Christi, Texas
November 25, 1946

Dear Sirs

We received the check, \$455, representing funds belonging to Sgt Alvin J. Holscher and are hereby requesting you to also send the personal effects, in whatever condition they may be

This letter in reply to your letter number 268991

Yours Truly

Mrs Alvin Holscher Administratrix
Estate of Alvin J. Holscher
Box #2

Box #582

Corpus Christi Texas

File up 12/3

225 FRENCH STS.

WAR DEPARTMENT
F D
m N 38
Approved N 2 1930

WAR DEPARTMENT **ROLL YOU NO 2320**
FINANCE DEPARTMENT

RECEIPT FOR MISCELLANEOUS COLLECTIONS

AFD 778

10 April 1946

14401
\$ 4 55

R d h f
C l l t d V u

f m }

(Sta n)
Lt. Gordon L. McCARTY

(D)

19

From _____ D l l d *fifty five*

C nt

n t f Deceased person: **HOLSCHEN Alvin J. Sgt. 38458290**

218918

AIP

hi h um I h e p d t th dit f th U t d Stat and hold myself accou t bl theref

212 - 427

F. MARK NS
Capt. FD

F na D p tment

Strk w rd ppl bl

T b x t d t p l t
R b b o p t l t t C l f f F
O p v t l f l d i t
O l t l t i b D l g O H

MAY 17 1946
MEMPHIS CITY 110

RESTRICTED

INVENTORY FORM

269,991? 18

15 March 1946
Date

SUBJECT: Inventory of Personal Effects of

HOELSCHER Alvin J Sgt 38458590
(Last Name) (First Name) (MI) (Rank) (ASN)

TO ~~Effects, Quarters, etc., Common Zone, APC~~ HQ AGRC TSFET 887 US Army

The above named individual of 196 Repl. Co.
(Unit) (Organization)

reported K.I.A. about 5 October (est) 194
Status (K A, MIA, Hosp etc) (Date)

Designated Beneficiary if information is fully accessible

IT J P C F C S

- 225 French France
- 1 Watch, wrist Benrus
- 17 pictures
- 1 Calling Card
- 2 Newspaper clippings
- 1 Red Cross Blood Donor Card
- 1 identification card
- 1 finance receipt

1 insurance premium receipt

For \$ in the amount of \$455 has been turned into F. HARKINS, CAPT USFD
(Name of Beneficiary and Grade)

212-427 from WDFD 38 enclosed

any banks in which account is maintained

Items listed above constitute all of the items secured by me and that they were forwarded to the Lieut. Dept J Truck on 17 April 1946
(Rank, etc) (Date)

Name Andrew E. McPartey
Rank & ASN 2nd Lt. Inf 0-1335328
Organization 1863 2nd Inf (Spec)

Any additional pertinent information:

RESTRICTED

268991

S-9 Dec 46
CLR/AP/fkw
18 November 1946

Mr Edwin Hoelscher Administrator
Estate of Alvin J Hoelscher
Route No. 2
Box 582
Corpus Christi Texas

Dear Mr Hoelscher

Thank you for submitting the certified copy of Letters of Administration evidencing your appointment as administrator of the estate of your son Sergeant Alvin J Hoelscher which is herewith returned

I am inclosing a check for \$4 55 representing funds received here belonging to your son

These funds are transmitted to you in your capacity as Administrator of the estate of Alvin J Hoelscher for distribution in accordance with the laws of the state of his legal residence

In our letter of 18 October 1946 we overlooked informing you the personal effects of Sergeant Hoelscher were received here in a damaged condition

Not infrequently due to exposure to the weather and other natural conditions certain articles received here have a peculiar or sometimes even disagreeable odor Such an odor may develop from the length of time the articles have been packaged in transit from overseas The personal effects of Sergeant Hoelscher were found to be in this condition If nevertheless it is your desire that we forward this property to you we will immediately upon receipt of your response comply with your wishes

For your convenience in replying there is inclosed an addressed envelope which needs no postage

This apparent oversight is extremely regretted Please accept my apology

I wish to express my sympathy in the loss of your son

Yours very truly

3 Incls
Check
Envelope
Copy ltrs Adm

C L RUMFIELD
1st Lt QMC
Asst Effects Quartermaster

ARMY EFFECTS BUREAU
Summary Court-Martial
KANSAS CITY QUARTERMASTER DEPOT
601 Hardesty Avenue
Kansas City 1 Missouri

Case No 368991
Date PUM/AP /fkv
~~18 November 1946~~

SUBJECT Report of transactions in disposing of the effects of

Alvin J. Hoelcher 38458490 late a ep
(Name of deceased) (Army Serial Number)
Sergeant Infantry who died
(Grade) (Organization Army or Service)
on the 5th day of Oct 19 44 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 152 Hq KCOM Depot dated 5 July 1946 for the purpose of disposing of the effects of the above-named soldier or person subject to military law reports that

a2 No legal representative or widow of decedent being present at decedents 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 per on found entitled (See Summary Court-Martial FINDING below)

FINDING

Before a Summary Court Martial which convened at Kansas City Missouri on 18 November 1946 pursuant to Special Orders 152 Headquarters KCOM Depot dated 5 July 1946 the application or affidavit of Edwin Hoelcher 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 Edwin Hoelcher of Route No 2, Box 582 State of Texas Corpus Christi is the Administrator of the above-named decedent and appears to be entitled to receive his or her effects

(Signature of Summary Court Officer)

P. D. MAHEY, Lt. Col., GPO
(Name Rank Organization)
SUMMARY COURT MARIAL

1771 17 1948

S CITY 110

| | | | |
|--|-----------------------------|-------------------------------------|--|
| AMOUNT OF CHECK # <u>455</u> ✓ | NOTE DISCREPANCY IN NAME | INCLUDE VALUABLES SHIP VALUABLES | RECIPIENT FROM CASUALTY REPORT |
| ACCOUNT NUMBER 180970 ✓ | SERIAL NUMBER ✓ RANK | VALUABLES SHIPPED BY (clerk) | INVENTORY FORM 20 LETTER ✓ |
| Mr Edwin Hoelscher ✓ Administrator Estate of Alvin J Hoelscher ✓ Route No 2 ✓ Box 582 ✓ Corpus Christi Texas ✓ | | | NO & TYPE OF CONTAINER ENVELOPE CARTONS PACKAGE FOOT LOCKER |
| | | | SPECIAL INSTRUCTIONS REMOVE G1 SHIP BLOODSTAINED SHIP DAMAGED REMOVE BL OBTAINED REMOVE DAMAGED FILMS REMOVED DIARY REMOVED |
| Sgt Alvin J Hoelscher ✓ 38458490 ✓ 268991 D ✓ | | | |
| PUM/AP/fkw | SUMMARY COURT DATA | DATE ACTION TAKEN 11-18-46 | |
| DATE OF FINDING 11-15-46 | APPLICANT Administrator | MAIL REVIEWER (initials) as | |
| REMARKS | | | SHIPPED |
| | | | FRANKED |
| | | | EXPRESS |
| | | | FREIGHT |
| | | | DATE SHIPPED |
| | | | SHIPPING CLERK |
| | | | ROUTING |
| | | | ACCOUNTING-BRANCH ✓ |
| | | | WAREHOUSE FILE ✓ |
| ORDER FOR ACTION | | | |

268991-2

ARMY EFFECTS BUREAU
ACCOUNTING INVENTORY

CASE NO

TYPED BY *fy*

DATE 10-7-46

STATUS UNK

RANK Sgt

NAME Hoelscher Alvin J

ASN 38458590

ORGANIZATION

CONSIGNOR Omaha F O - Forms 38 ETA

AMOUNT 4 55
PAID-Check No 176818 *mw*

ACCOUNT NO 180970 *esp*

LIST NO AEB 1012

CHECK DESCRIPTION
INCLUDED IN ONE U S TREASURER S CHECK
NEGOTIABLE BY EOM

Free

DATED

SYMBOL

Full up 10/16

AMOUNT

REMARKS

LETTERS OF ADMINISTRATION

COPY
KCQMD
AP/fkw

THE STATE OF TEXAS ((IN COUNTY COURT
COUNTY OF NUECES ((NUECES COUNTY TEXAS

I MRS HENRY E GOUGER Clerk of the County Court of Nueces County Texas do hereby certify that on the 19th day of April A D 1946 Edwin B Hoelscher was by said Court granted Letters of Administration upon the Estate of Alvin J Hoelscher deceased and that on the 23rd day of April A D 1946 he duly qualified as such as the law requires and that said appointment is still in full force and effect

Given under my hand and seal of office at Corpus Christi Texas this 21st day of May A D 1946

(Court Seal) MRS HENRY E GOUGER Clerk County Court
Nueces County Texas

By R C Ward Deputy

Indorsed NO 4770 ESTATE OF ALVIN J HOELSCHER Deceased LETTERS OF ADMINISTRATION TO
ISSUED the 21 day of May A D 1946 MRS HENRY E
GOUGER Clerk County Court Nueces County Texas By R C Ward Deputy

RECORDED Volume 31 Page 323 Probate Minutes Nueces County Texas

THE STATE OF TEXAS ((
COUNTY OF NUECES ((I MRS HENRY E GOUGER Clerk County Court of Nueces County Texas do hereby certify that the above and foregoing is a true and correct copy of "LETTERS OF ADMINISTRATION" in Cause No 4770 Estate of Alvin J Hoelscher Deceased as the same is taken from the original instrument filed with said probate papers in said cause and appears of record as therein indicated

TO CERTIFY WHICH WITNESS my hand and official seal of office at office at Corpus Christi Texas this the 22nd day of October A D 1946

MRS HENRY E GOUGER Clerk County Court
Nueces County Texas

Seal
County Court of Nueces County
Texas

By/s/ Marie Young / Deputy

* Certified copy mutilated in opening mail
3 Line designating name of administrator ~~certified copy~~ cut and stapled

180970

268991

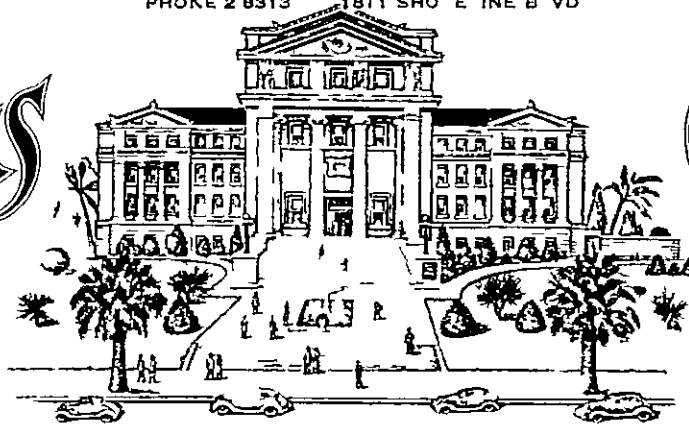
176818

November 19, 1946

Edwin Hoelscher, Administrator

4 55

NUECES



COUNTY

CORPUS CHRISTI, TEXAS

October 22 1946

Re _____
AC _____
C _____
S _____

Ref Ltr 268991

Kansas City Quartermaster Depot
Army Effects Bureau
601 Hardesty Ave
Kansas City, Mo

Dear Sirs

In reply to reference letter in connection with my deceased son's effects forwarded herewith is a certified copy of the letters of Administration

Further I wish to advise my deceased son was never married Trust this is the information you requested

Very truly yours

Edwin Hoelscher
Edwin Hoelscher
Rte 2 Box 582,
Corpus Christi Texas

John E Huey
11-8-46

7-10-46

268991

S-7 Nov 46
CLR/FP/cs
18 October 1946

Mr Edwin Hoelscher
Route 2 Box 582
Corpus Christi, Texas

Dear Mr Hoelscher:

The Army Effects Bureau has received from overseas some personal property of your son, Sergeant Alvin J Hoelscher

8

To make proper disposition of this property, it is necessary that we have certain information regarding your son's family I would like to know whether he was married and, if so, the name and address of his widow

76

In addition, if an executor or administrator of his estate has been appointed, the original or a certified copy of the Letters Testamentary or Letters of Administration should be sent here for inspection Any papers that you send us will be returned promptly

78

Please mail your reply in the inclosed self-addressed envelope which needs no postage, as this will accelerate delivery of the property

20

Yours very truly,

1 Incl--
Envelope

C L RUFFIELD
1st Lt QMC
Asst Effects Quartermaster



~~RESTRICTED INFORMATION~~
 KANSAS CITY QUARTERMASTER DEPOT
 ARMY EFFECTS BUREAU
 STY
 TY M

S: 14 August 49
 HOC/DF/ojr
 14 July 1949

mcl

N E LY REF TO 268,991

REQUEST FOR INFORMATION

293

Hoelscher, Alvin J Sergeant 38458490
 (Name) (Rank) (SN)

INFANTRY 48TH ARMD INF BN
 (Branch of service and/or Organization)

(Following to be filled in by OQMG)

NEXT OF KIN MR. EDWIN B. HOELSCHER FATHER
 (Name) (Relationship)

ADDRESS ROUTE #2 BOX 582 CORPUS CHRISTI TEXAS

PREVIOUS SHIPMENT X YES NO (Check one)

DATE OF LAST PREVIOUS SHIPMENT (If any) 5 DEC 46

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

TO WHOM (If made) SAME
 (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.

MRS IRENE HOELSCHER (MOTHER)
SAME AS FATHER'S

Signature *William F Conlon*
 WILLIAM F CONLON MAJOR QMC

Remarks _____

Q COD 293 Hoelscher, Alvin J , Sgt 1st Ind
SN 38 458 490

Department of the Army OQ G Washington 25, D C 26 July 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 ~~REDACTED~~ MIDDLESWART,

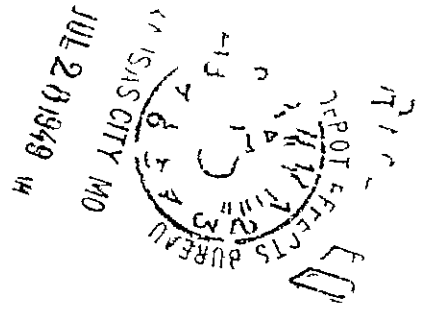
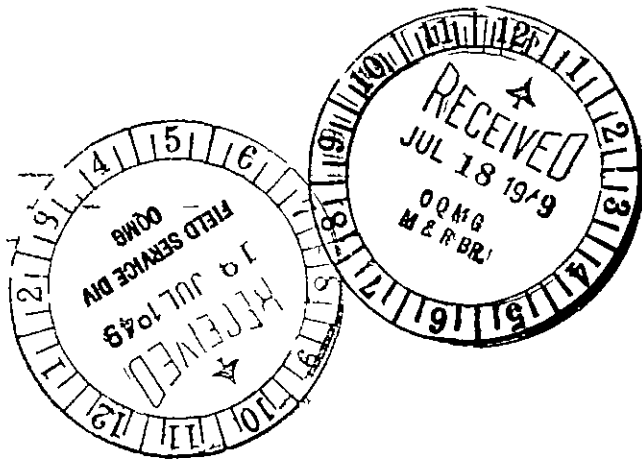
William F Conlon
WILLIAM F CONLON
Major QMC
Field Service Division

L28 2

" "

JUL 28 1949
 KANSAS CITY MO
 DEPT OF REVENUE
 RECEIVED
 12 7
 V E L

J



~~XXXXXXXXXXXXXXXXXXXX~~

268991

HOC/NS/mjo'o
6 September 1949

Mr and Mrs Edwin B Hoelscher
Route #2, Box 582
Corpus Christi, Texas

Dear Mr and Mrs Hoelscher:

Thank you for the information recently given the Army Effects Bureau in connection with the disposal of personal property which belonged to your son the late Sergeant Alvin J Hoelscher

I am inclosing four U S coins which were received here with his effects The remainder of the property, consisting of one religious cross and ten souvenir coins, was forwarded to you, under separate cover, 23 August 1949

If, for some reason the property has not reached you within thirty days please notify this Bureau and tracer will be instituted

Sincerely yours,

1 Incl
Coins

H O CALDWELL
Effects Quartermaster

| | | | | | | | |
|---|---------------------|--|-------------|---|---------|--|--|
| AMOUNT OF CHECK | NOTE DISCREPANCY IN | <input checked="" type="checkbox"/> INCLOSE VALU | ES | RECIPIENT FROM | | | |
| | NAME | | SHIP VALUAB | CASUALTY REPORT | | | |
| ACCOUNT NUMBER | SERIAL NUMBER | VALUABLES SHIPPED BY (clerk) | | INVENTORY | | | |
| | RANK | 6 Sept 49 (B) | | FORM 20 | | | |
| <p>Mr Edwin B Hoelscher ✓</p> <p>Route #2, Box 582</p> <p>Sgt Alvin J Hoelscher — Corpus Christi, Texas</p> <p>38458490 ✓</p> <p>268991 D ✓</p> | | | | <input checked="" type="checkbox"/> LETTER | | | |
| | | | | NO & TYP OF CONTAINER | | | |
| | | | | ENVELOPE | | | |
| | | | | CARTONS | | | |
| | | | | 1 PACKAGE ✓ | | | |
| | | | | FOOT LOCKER | | | |
| | | | | SPECIAL INSTRUCTIONS | | | |
| | | | | REMOVE G1 | | | |
| | | | | <input checked="" type="checkbox"/> SHIP BLOODSTAINED | | | |
| | | | | <input checked="" type="checkbox"/> SHIP DAMAGED | | | |
| REMOVE BL DSTAINED | | | | | | | |
| REMOVE DAMAGED | | | | | | | |
| FILMS REMOVED | | | | | | | |
| DIARY REMOVED | | | | | | | |
| HOC/NS/mjg'c | | SUMMARY COURT DATA | | DATE ACTION TAKEN | | | |
| DATE OF FINDING | APPLICANT | | | 8-22-49 | | | |
| <p>REMARKS</p> <p>Code B</p> | | | | MAIL REVIEWER (initials) | | | |
| | | | | Em | | | |
| | | | | SHIPPED | | | |
| | | | | 1 | FRANKED | | |
| | | | | | EXPRESS | | |
| | | | | | FREIGHT | | |
| | | | | DATE SHIPPED | | | |
| | | | | AUG 23 1949 | | | |
| | | | | SHIPPING CLERK | | | |
| | | | | JY | | | |
| ROUTING | | | | | | | |
| <input checked="" type="checkbox"/> | ROUTING BRANCH | | | | | | |
| | WAREHOUSE | | | | | | |
| | FILE | | | | | | |
| ORDER FOR ACTION | | | | 1 BK ✓ | | | |

248991

| | | | | |
|-------------------------------------|-----------------------|--|-----------|--|
| ATTACHMENTS | | EFFECTS INVENTORY ARMY EFFECTS BUREAU | STATUS | |
| <input checked="" type="checkbox"/> | INVENTORY | | DECEASED | |
| <input checked="" type="checkbox"/> | GR OR SUB GR LABEL | | MISSING | |
| | WILL OR POWER OF ATTY | | P O W | |
| 1 | TALLY IN O M 43 | | ABANDONED | |
| | | UN N WN | | |

| | | | |
|-----------------------|---------------|-------------------|--|
| BAGS CLOTH OR TRAVEL | BELT | OV COATS | <i>1 yellow metal Religious Cross</i> <i>10 Souvenirs Coins</i> |
| BELT MONEY (NO MONEY) | BOOKS ADDRESS | PAPERS PERSONAL | |
| BILLFOLD (NO MONEY) | OS PILOT LOG | PENCIL MECHANICAL | |
| BOOKS | RUSHES | PEN FOUNTAIN | |
| BRACELET IDENT | CASE | PHOTOS | |
| CAMERAS | CLOTH WASH | PIPES | |
| CLOTHING | COATS | NGS | |
| MISC ARTICLES | OOTLOCKER | SC S | |
| RELIGIOUS ARTICLES | FOOTWEAR PR | SHI TS | |
| RIBBONS DECORATION | GL SSES | S CKS PR | |
| SHORT SNORTER | GLOVES PR | STATIONERY | |
| SOUVENIR MONEY | HA DKERCH EFS | TIES | |
| SOUVENIRS | E DWEAR | TOBACCO | |
| TESTAMENTS | J CKETS | TOILET ARTICLES | |
| TOWELS & WASHCLOTHS | KITS | TOWE S | |
| U S MONEY (AMOUNT) | KNIVES | TROUSERS PR | |
| WATCH | ETTERS | T UNKS PR | |
| WINGS | IGH E S | UNDER E | |

| | | |
|-------------------------|-------------------------|---------------------------------|
| DAMAGED | CONTAINERS ADDRESSED TO | INFORMATION |
| | <i>none</i> | <i>none</i> <i>Rechecked</i> |
| NAME AND ST TUS R TIONS | | C OSS E E ENCE |

| | | | |
|---|------------|--------|---|
| CHECK | REC D BY | NUMBER | BU EAU CHECK |
| E O DER | <i>JPB</i> | SYMBOL | <input checked="" type="checkbox"/> TRANS M T O R G L |
| D | | AMOUNT | OR G REG IL |
| TR CHECK | | | OG A O |
| O EIGN CURRENCY | | | MUTILATE |
| <input checked="" type="checkbox"/> U S CU ENCY | | | TO SS ING AGE |

| | | |
|---|--------------------------|--|
| 1 - U S 50 cent Piece | DATE | <i>(can include in manilla envelope)</i> |
| 1 - U S 25 cent Piece | OR PLACE OF ISS E | |
| 1 - U S 10 cent Piece | PAYEE | |
| 1 - U S 5 cent Piece | RE M T T E R OR DR W E R | |
| VALUABLES SHIPPED DATE <i>6/29/49</i> BY <i>[Signature]</i> | | |

| | | | | |
|---------------|-------------------|----------------|----------------------------|--------------------|
| 8966 | ORIG NO OF PKGS | EXAMINING DATE | BO O | HEET |
| ME | ALVIN J HOELSCHER | | S N | 38458490 |
| OGANI TION | | | RA K | SGT |
| REHOUSE SP CE | 307 | EXAMINED BY | D EMOVED | |
| S IPTION | WEIGHT | PACKED BY | PHOTO F L E OVED | |
| | | INSPECTED BY | MOTION PICTURE F I M E O E | |
| | | TORED BY | DATE | BY WHOM |
| | | | AUG 23 1949 | <i>[Signature]</i> |

111

G I REMOVED

I l h h bo m w n d b m h co

A O U T

S Y M B O

D T E

N U E R

U S G O X H O T

SHORTAGES

ADDITIONAL REMARKS

REMOVALS (h h G I)

DAMAGES (L p e l d m f)

1400 lbs Metal
1300 lbs Metal
1200 lbs Metal
1100 lbs Metal
1000 lbs Metal
900 lbs Metal
800 lbs Metal
700 lbs Metal
600 lbs Metal
500 lbs Metal
400 lbs Metal
300 lbs Metal
200 lbs Metal
100 lbs Metal

WITNESS 4 PENCE 70 AM cont

No 38458490

Name HOELSCHER ALVIN
Rank SGT

Organization

Address

Nearest Relative

Address

Killed in Action

Date

Battle Area

2-11-264

Died of Disease

Hospital

Information

Place of Burial NEWVILLE

Point of Coordination

Description of Body

Members Missing

Signed



Hoelscher, Alvin J

Sgt 38458490

ET

o

8966

G/B

6-28-49

AGRC APO 58

QM FO 43

43 =

R E S T R I C T E D

SUBJECT Inventory of Personal Effects of Date _____

HOELSCHER Alvin J Sgt 38458490
(Last Name) (First Name) (Initial) (Rank) (ISN)

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

The above individual of _____
(Unit) (Organization)

as reported _____
(Declassified, missing, etc) (Date)

Additional beneficiary of information readily accessible

ADDRESS _____

LIST OF EFFECTS

- Souvenir coins 1-1 US Dollar, 1-1/4 US Dollar, 1-5 US ¢,
- 1-1 US Dime
- 1-1 Crown, 2-1 Florin, 2-2 Shillings,
- 1-1 Shilling, 1-6 Pence, 1-3 Pence, 1-1 Penny
- 1-1 Belgian Franc

Religious cross, yellow metal

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

Forwarded to Personal Effects Depot

Money in the amount of _____
(Please identify currency)

to US Treasury check to _____ amounting to _____

known bank account in Europe in the name of _____
(Last Name and Initials of account holder)

I certify that the above effects were 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 _____

Signature Frank A. Geach (for main agency)
JOSEPH F. GEOHEGAN 1st Lt GIC Depot Quartermaster
(Name) (Rank) (Organization)

(Has any additional information on reverse side)



~~XXXXXXXXXXXXXXXXXXXX~~
KANSAS CITY QUARTERMASTER DEPOT
ARMY EFFECTS BUREAU

STY
TY O

HOC/LL/ojr
2 August 1949

IN REPLY REFER TO 268,991

Mr Edwin B Hoelscher
Route #2 Box 082
Corpus Christi Texas

Dear Mr Hoelscher

The Army Effects Bureau has received from a Graves Registration Officer overseas one religious cross ten souvenir coins and four U S coins which belonged to your son, the late Sergeant Alvin J Hoelscher The cross is damaged by corrosion

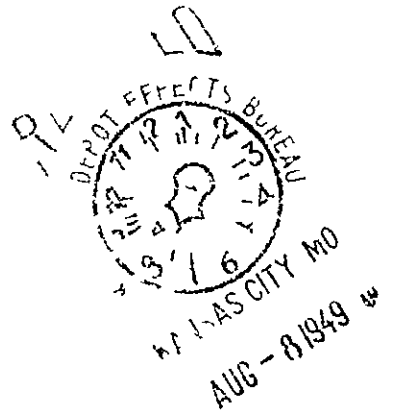
In view of the lapse of time since our previous correspondence, I shall appreciate it if you will indicate whether you wish these items sent you If so the property will be forwarded promptly upon receipt of the confirmation of your address

Your reply may be made on the reverse of this letter, if you desire, and mailed in the inclosed self-addressed envelope which requires no postage

Sincerely yours

H O Caldwell
H O CALDWELL
Effects Quartermaster

1 Incl
Envelope



Yours truly
Mr and Mrs Edwards
Allochert

Dear Mr Caldwell
Regarding the letter you are
holding some belongings of our son,
Sergeant Glenn of Allochert. We would
like these things no matter in what
condition they are in. We would
like to keep them as a remembrance
of thanks for your nice corporation
and information. We remain

Route 2, Box 512
Corpus Christi, Tex
~~Allochert~~