

RECEIPT OF REMAINS

DISTRIBUTION CENTER ATLANTA GENERAL DISTRIBUTION DEPOT
ATLANTA, GEORGIA

DELIVER AND REPORT
ANY CHARGES
8-10-48

ROUTINE

REMAINS CONSIGNED TO: ELLISON FUNERAL HOME
JELICO, TENN.

REMAINS OF THE LATE PVT. JOHNIE M. BATES 14035681

BEING SHIPPED TO YOU ACCOMPANIED BY ESCORT _____

ON TRAIN NUMBER _____ RAILROAD _____

LEAVING ATLANTA 6:50 PM 13 AUG.

AND DUE TO ARRIVE JELICO, TENN. ON L&N #30 8:25 AM 14 AUG.

REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS AT STATION UPON ARRIVAL AND
THAT YOU IMMEDIATELY PASS THIS INFORMATION ON TO NEXT OF KIN

JOHN H. PRUITT
LT. COLONEL, QMC

I, THE UNDERSIGNED, DO HEREBY ACKNOWLEDGE RECEIPT OF THE REMAINS OF THE ABOVE-NAMED DECEASED

THIS 14 DAY OF August, 19 48

Jack S. Granger, T/4 (WITNESS (Escort)) Pete Ellison (CONSIGNEE)
WITNESS (Escort) CONSIGNEE
NAT ELLISON FUNERAL HOME
FILE

RECORDS ANNOTATED
DATE Sept 14 1948
NAME Phaler
R & R BR.

(# 1)

RECEIPT OF REMAINS

DISTRIBUTION OF REMAINS AT THE HEADQUARTERS OF THE DEPARTMENT OF THE ARMY

ATLANTA, GEORGIA

DELIVER AND REPORT

ANY CHARGES

ROUTINE

8-10-48

REMARKS CONCERNING THE

REMAINS OF THE LATE

PVT. JOHNIE M. BATES 14030601

BEING SHIPPED TO YOU ACCOMPANIED BY ESCORT

OF TRAIN NUMBER

LEAVING ATLANTA 8:30 PM 12 AUG.

AND DUE TO ARRIVE JELICO, TENN. ON 12 AUG. 8:25 AM 12 AUG.

REQUEST YOU MAKE APPROPRIATE ARRANGEMENTS AT STATION UPON ARRIVAL AND

THAT YOU IMMEDIATELY TAKE THIS INFORMATION ON TO NEXT OF KIN

JOHN H. FRUIT
LT. COLONEL, GPO



I, THE UNDERSIGNED, HEREBY ACKNOWLEDGE RECEIPT OF THE REMAINS OF THE ABOVE-NAMED DECEASED

THIS 14 DAY

OF 1948

SIGNED: Jack B. [Signature]

NAME

FILE

DATE

DATE

NAME

R & R BR.

(41)

LC
RHS
5-48

DISINTERMENT DIRECTIVE

1

SECTION A — NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER 6020 00560		DATE 15 03 48 DAY MONTH YEAR		
NAME BATES JOHNIE M				SERIAL NUMBER 14035681		RANK PVT		ARM 1
CEMETERY HAMM - LUXEMBOURG								DATE OF DEATH DAY MONTH YEAR 4800 05 CODE DIST. PT.
PLOT T	ROW 9	GRAVE 201	COUNTRY LUXEMBOURG			CAUSE OF DEATH 1		

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE ELLISON FUNERAL DIRECTORS 210 MAIN STREET DELLICO, TENNESSEE (F/B: WOOLDRIDGE, TENNESSEE)				NAME AND ADDRESS OF NEXT OF KIN ANNA E. BATES (MOTHER) WOOLDRIDGE, TENNESSEE			
---	--	--	--	--	--	--	--

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME JOHNIE M. BATES		SERIAL NUMBER 14035681		RANK PVT	DATE OF DEATH EST. 15 Oct 1948 TO 15 NOVEMBER 1944		DATE DISINTERRED 25 MAY 1948	
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER		ORGANIZATION USAGF			RELIGION P.		IDENTIFICATION VERIFIED BY CLYDE B. SPINKS, CAPT FA. NAME AND TITLE	

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL UNIFORM AND MATTRESS COVER.				CONDITION OF REMAINS DISTAL PORTION OF LEFT HUMERUS, LEFT RADIUS, LEFT ULNA, AND MANDIBLE, ALL MISSING.			
OTHER MEANS OF IDENTIFICATION NONE.							
MINOR DISCREPANCIES NONE.							

REMAINS PREPARED AND PLACED IN CASKET TRANSFER BOX.							
DATE 27 MAY 1948		BY Richard S. Holiver RICHARD S. HOLIVER, EMBALMER.					
CASKET SEALED BY JOHN A. BRICKLEY, EMB. SUPV.				EMBALMER (Signature) John A. Brickley JOHN A. BRICKLEY, EMB. SUPV.			
CASKET BOXED AND MARKED DATE 18/6/48 BY ORVILLE W. BILLINGS CLERK RECORDER				SHIPPING ADDRESS VERIFIED BY all markings, plates & tags verified by: F. R. MAC DONALD, CAPT. QMC.			

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

Fritz J. Toltzien
FRITZ J. TOLTZIEN, 1/LT, FA.

SIGNATURE OF GRS INSPECTOR

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

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM LUXEMBOURG		TO ANTWERP PORT - PIER 140	
KIND OF CONVEYANCE LUXEMBOURG		NAME OF CONVOYER S/SGT EDWARD N. KNOLL	
SIGNATURE OF SHIPPER <i>Lloyd L.H. Meyer</i> LLOYD L.H. MEYER 1/LT INF., O-1327168	DATE 14/6/48	SIGNATURE OF RECEIVER <i>E. Knoll</i> 12039880	DATE 16 JUN 1948

2. SHIPPED

FROM AGRC ANTWERP BELGIUM		TO USAT OGLETHORPE VICTORY	
KIND OF CONVEYANCE ZEC		NAME OF CONVOYER ROBERT W. WILSON 1ST LT. T. C.	
SIGNATURE OF SHIPPER L E Butler Lt Col Inf	DATE 22 JUN 1948	SIGNATURE OF RECEIVER <i>Robert W. Wilson</i>	DATE 22 JUN 1948

3. SHIPPED

FROM NYPE		TO NYPE	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>J. Jacobson</i> JAMES L. MCKINNON COLONEL, T. C.	DATE JUL 9 1948

4. SHIPPED

FROM NYPE		TO DC #5	
KIND OF CONVEYANCE Train		NAME OF CONVOYER	
SIGNATURE OF SHIPPER JAMES L. MCKINNON COLONEL, T. C.	DATE JUL 15 1948	SIGNATURE OF RECEIVER <i>Albert S. Bessel</i> Albert S. Bessel; Capt. C MP	DATE 7/19/48

5. SHIPPED

FROM DEGGICO TENNESSEE		TO DEGGICO TENNESSEE	
KIND OF CONVEYANCE DEGGICO TENNESSEE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER EGGISON	DATE	SIGNATURE OF RECEIVER ANNIE E. BATES (MOTHER)	DATE

6. SHIPPED

FROM LUXEMBOURG		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

MESSAGEFORM

MESSAGE CENTER NO.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT
CALLS V	STA. SER. No. NR	PRECEDENCE
TRANSMISSION INSTRUCTIONS		ORIGINATOR
ACTION	INFORMATION	EXEMPT OPERATING SIGNALS
		GROUP COUNT 33 BR

FROM: (Originator) Atlanta General Distribution Depot
Atlanta, Georgia

ACTION TO: DELIVER AND REPORT
ANY CHARGES

- ANNA E. BATES
- WOOLDRIDGE, TENNESSEE

SECURITY CLASSIFICATION	
ACTION	PRECEDENCE FOR INFORMATION
<input type="checkbox"/> ORIGINAL MESSAGE	
IDENTIFICATION	REFERS TO ANOTHER MESSAGE CLASSIFICATION

INFORMATION TO: THIS HEADQUARTERS HAS BEEN ADVISED THAT THE REMAINS OF LATE
PVT JOHNIE M BATES ARE ENROUTE TO THE UNITED STATES PD RECORDS OF THIS OFFICE INDICATE YOU WISH REMAINS DELIVERED TO ELLISON FUNERAL DIRECTORS 210 MAIN STREET DELICO TENNESSEE (F/B: WOOLDRIDGE/ PD PLEASE INSTRUCT FUNERAL HOME TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL PD WE REGRET IT IS NOT POSSIBLE AT THIS TIME TO GIVE YOU A DEFINITE DELIVERY DATE HOWEVER THREE DAYS PRIOR TO SHIPMENT FROM THIS DEPOT YOUR FUNERAL HOME WILL BE NOTIFIED BY TELEGRAM OF RAIL ROUTING AND SCHEDULED TIME REMAINS WILL ARRIVE AT RAILROAD STATION PD HE WILL BE REQUESTED TO PASS THIS INFORMATION TO YOU SO THAT YOU MAY MAKE FUNERAL ARRANGEMENTS PD REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT PD WITHIN 48 HOURS OF DATE OF THIS MESSAGE PLEASE CONFIRM BY TELEGRAM COLLECT TO ATLANTA GENERAL DISTRIBUTION DEPOT ATTENTION AMERICAN GRAVES REGISTRATION DIVISION ATLANTA GEORGIA ABOVE DELIVERY INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS PD PLEASE BE ADVISED THAT IT WILL NOT BE POSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH ANY

SECURITY CLASSIFICATION	AUTHORIZATION
ORIGINATING AGENCY	SIGNATURE
SYMBOL	OFFICIAL TITLE
DATE-TIME GROUP	PAGE 1 02

MESSAGEFORM

MESSAGE CENTER No.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT			
CALLS V	STA. SER. No. NR	PRECEDENCE	TRANSMISSION INSTRUCTIONS	ORIGINATOR	DATE-TIME GROUP
ACTION	INFORMATION	EXEMPT	OPERATING SIGNALS	GROUP COUNT	GR

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Originator) Atlanta General Distribution Depot
Atlanta, Georgia

ACTION TO:

- .
- .
- .

INFORMATION TO:

SECURITY CLASSIFICATION	
ACTION	PRECEDENCE FOR INFORMATION
<input type="checkbox"/> ORIGINAL MESSAGE	
REFERS TO ANOTHER MESSAGE IDENTIFICATION	CLASSIFICATION

DESIRED CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF THE 48 HOUR PERIOD PD YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY PD IF YOU SHOULD DESIRE MILITARY HONORS AT FUNERAL YOU SHOULD ASK ANY LOCAL PATRIOTIC OR VETERANS ORGANIZATION TO MAKE ARRANGEMENTS PD PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM PD

JOHN H. PRUITT
LT. COLONEL, QMC

SECURITY CLASSIFICATION	SIGNATURE	AUTHORIZATION
ORIGINATING AGENCY	OFFICIAL TITLE	PAGE 2 OF 2
SYMBOL	DATE-TIME GROUP	

WESTERN
UNION

WESTERN
UNION

WESTERN
UNION

WESTERN
UNION

COMMUNICATIONS CENTER
RECEIVED

L 3 12 29 PM '44

ATLANTA GEN. DIST. DEPOT

WUA253 9 COLL

JELICO TENN JUL 3 1045A

ATLANTA DIST DEPOT

AMN GRAVES REG DIV

RETEL PVT JOHNNIE E BATES SHIPPING INSTRUCTIONS CORRECT

ANNA E BATES

1205PM.

OEL ?

WESTERN UNION

WESTERN UNION

WESTERN UNION

WESTERN UNION

COMMUNICATIONS CENTER RECEIVED

WU E153 RX PD JELICO TENN AUG 10 300P

LT COL JOHN H. PRUITT QMC

AUG 10 4 01 PM

REQUEST THAT M/SGT W V THOMAS ESCORT BODY OF JOHNIE M

BATES 14035681 BEING SHIPPED AUGUST 13

ATLANTA GEN. DIST. I

ANNA E BATES.

357PM

11 August 1948

Mrs. Anna E. Bates
Wooldridge, Tenn.

Dear Mrs. Bates:

This is to acknowledge receipt of your wire of 10 Aug 48, requesting that M/Sgt. W. V. Thomas be assigned to escort the remains of your late son, PVT. JOHNIE M. BATES, 14035681.

Regret that M/Sgt. W. V. Thomas is currently on furlough and therefore will not be available to escort the remains of your late son to Jellico, Tenn.

Please feel free to communicate with this office for any additional information you may desire regarding the Return of World War II Dead Program.

Respectfully yours,

GEORGE GREEN
Captain, QMC
Assistant

GA
Green
h

INSPECTION CHECKLIST

(For use at overseas port, U. S. Port, and Distribution Center)

7-1-20 6-436

Name	Rank	Serial Number
Bates, Johnie M	Pvt	14035681
Source	Consignee Ellison Funeral Directors 210 Main Street Dellico, Tennessee (F/B: Wooldridge,/ Tenn.	
Hamm - Luxembourg		

SHIPPING CASE - General Appearance (Check ONLY Discrepancies)	Condition of Shipping Case (Check One) <input type="checkbox"/> Satisfactory <input checked="" type="checkbox"/> Unsatisfactory
Finish (Exterior)	Remarks <i>Case Scratched</i>
Finish (Interior)	
Handles	
Handle Bolts	
Stenciling - Nameplate	
Health Permit Marker	
Health Permit Number	

CASKET - General Appearance (Check ONLY Discrepancies)	Condition of Casket (Check One) <input type="checkbox"/> Satisfactory <input checked="" type="checkbox"/> Unsatisfactory
Finish (Exterior)	Remarks <i>Casket Scratched</i>
Handles and Fastenings	
Stenciling - Nameplate	
Cam Locks (Sealing)	
Odor or Moisture	

ROUTED THROUGH

Mortuary Operating Room	Repair Shop <input checked="" type="checkbox"/>
Condition of Remains <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory	Casket Repaired Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Casket Exchanged Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	Shipping Case Repaired Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Shipping Case Exchanged Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	Remarks <i>S + R</i>

Time	Date	Signature of Mortician	Time	Date	Signature of Inspector
			403	7 30 48	<i>[Signature]</i>

Remarks

REPATRIATION
RECORDS BRANCH
AUG 20 11 22 AM '18
MEMORIAL DIVISION

92-792
H.H.

CERTIFICATE

(AR 30-1830)

CLAIM VALID REDEEMABLE
210-552

G. A. SUMMA
COL., F.D.,

GEORGE S. PHIPPS
CAPT. U.S. ARMY
BIRMINGHAM, Ala.
Sta. No. 541

1. FILL IN EITHER PART A OR PART B; NOT BOTH.
2. USE PART A WHEN INTERMENT IS IN A CIVILIAN OR PRIVATE CEMETERY.
3. USE PART B WHEN REMAINS ARE DELIVERED TO HOME OR OTHER PLACE PRIOR TO NATIONAL OR POST CEMETERY.

PART A - CIVILIAN OR PRIVATE CEMETERY

A			
REQUEST FOR REIMBURSEMENT OF INTERMENT EXPENSES (PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)			
NAME OF DECEDENT <i>Bates, Johnie M</i>	GRADE <i>Pvt</i>	SERIAL NUMBER <i>14035681</i>	COMPONENT <i>AGP</i>
I certify that the sum of \$ <u>75.00</u> was paid by me from personal funds in connection with the interment of the remains of the above named decedent in the below named cemetery.			
INSERT NAME OF CEMETERY <i>Douglas Cemetery</i>	CITY OR COUNTY <i>Woodbridge</i>	STATE <i>Tenn.</i>	
INSTRUCTIONS TO PERSON SIGNING THIS FORM 1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR. 2. Return four copies to: FIVE AGR DIVISION ATLANTA GENERAL DISTRIBUTION DEPOT, U. S. ARMY ATLANTA, GEORGIA		SIGNATURE OF CLAIMANT <i>Rosa B. Bates</i> ADDRESS OF CLAIMANT (City, Street or RFD, and State) <i>Gen. Del., Jellico, Tenn.</i> RELATIONSHIP TO DECEDENT <i>Mother</i> DATE <i>15 Aug. 1948</i>	

PART B - NATIONAL OR POST CEMETERY

B			
REQUEST FOR REIMBURSEMENT OF TRANSPORTATION EXPENSES (PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)			
NAME OF DECEDENT	GRADE	SERIAL NUMBER	COMPONENT
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 and to the following places:			
INSERT CITY OR TOWN (OR ADDRESS NOT IN A CITY OR TOWN) FROM WHICH REMAINS WERE SHIPPED		INSERT NAME AND LOCATION OF NATIONAL OR POST CEMETERY TO WHICH REMAINS WERE SHIPPED	
INSTRUCTIONS TO PERSON SIGNING THIS FORM 1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR. 2. Return four copies to: <i>Amt. Paid \$ 75.00</i>		SIGNATURE OF CLAIMANT <i>Atlanta, Ga.</i> ADDRESS OF CLAIMANT (City, Street or RFD, and State) <i>Money</i> Accounts of _____ Fin. Dept. RELATIONSHIP TO DECEDENT <i>Check No. 109935</i> DATE <i>SEP 8 1948</i> <i>29871</i>	

EXPLANATION OF PART A - CIVILIAN OR PRIVATE CEMETERY

1. When the remains are delivered for interment in a civilian or private cemetery, you are responsible for paying all interment expenses. In this connection, you are entitled to the allowance mentioned in paragraph 2 below.

2. An amount not to exceed \$75 is allowed by the government toward actual interment expenses when final interment of the remains is in a private or civilian cemetery. No allowance is authorized toward interment expenses when interment is in a national or post cemetery.

3. The \$75 maximum allowance by the government toward interment expenses includes but is not limited to the payment of one or more of the following items: hearse hire from the railroad station to your home, the funeral home, church, cemetery, or any other place designated by you; vault; church services; newspaper notices; transportation for friends and relatives to and from cemetery; and the services of a funeral director.

4. Reimbursement by the government is made only to the person who paid from his personal funds the expenses of or incident to interment in a private or civilian cemetery. Receipted bills are not required to accompany this form. Any expenses over and above the \$75 maximum must be borne by the person who incurred or paid the additional expenses.

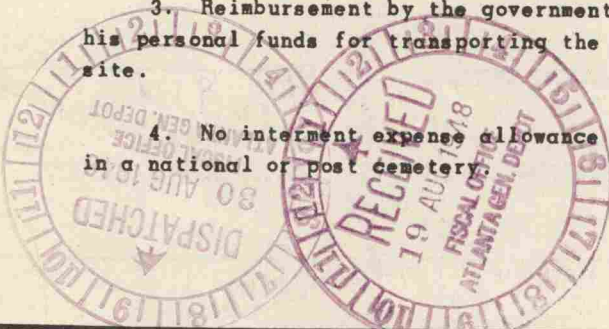
EXPLANATION OF PART B - NATIONAL OR POST CEMETERY

1. When the remains are delivered to you at government expense prior to burial in a national or post cemetery, you are responsible for all additional expenses necessary to deliver the remains from that point to the national or post cemetery grave site. However, you may be entitled to an allowance for the cost of transporting the remains from your home to the national or post cemetery grave site subject to the conditions outlined in paragraph 2. below.

2. Reimbursement of transportation expenses is allowed only when the cost to the government to deliver the remains to you is LESS than what it would have cost the government to deliver the remains direct to the national or post cemetery of final interment. However, the amount which you may be allowed (the difference between cost of delivery to you and cost of delivery by the government direct to the national or post cemetery) may not exceed the amount actually expended by you to deliver the remains to the cemetery grave site. WHETHER OR NOT YOU WILL BE GRANTED AN ALLOWANCE IS DEPENDENT UPON AN AUDIT OF THIS REQUEST. IN ANY EVENT YOU WILL BE NOTIFIED OF ANY ALLOWANCE DUE YOU BY THE OFFICE TO WHICH THIS FORM IS SENT.

3. Reimbursement by the government will be made only to the person who paid from his personal funds for transporting the remains to the national or post cemetery grave site.

4. No interment expense allowance is authorized since interment is made ultimately in a national or post cemetery.



REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

Pvt. Johnnie M. Bates, 14 035 681
Plot T, Row 9, Grave 201,
United States Military Cemetery
Hamm, Luxembourg

31 July 1947

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

MRS. ANNA E. BATES.

(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
Douglas Cemetery, Woodridge, Tennessee
(NAME AND LOCATION OF CEMETERY)

- 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 _____
(FOREIGN COUNTRY) (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.)

NONE

19 mch 48

codes
11 mch 48
M. Baker

OQMG FORM 345 MILITARY
14 NOV 1946

16-50411-1

PAGE 1

FEB 11

[Handwritten signature]

PART I (Continued)

If on Page 1 of this form you have selected Option Number 2 or 3, or Option Number 4 with your own funeral ceremonies desired at a location other than the selected national cemetery, complete one of these sections.

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 Bates	FIRST NAME ANNA	MIDDLE INITIAL E.
NUMBER AND STREET	CITY OR TOWN Woolbridge	COUNTY OR PROVINCE Campbell
EXPRESS OFFICE (Nearest railroad passenger station) Jellico, Tennessee	STATE OR TERRITORY OF U. S. A., OR COUNTRY Tennessee	TELEPHONE No.

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 ELLISON FUNERAL DIRECTORS			
NUMBER AND STREET 210 MAIN ST	CITY OR TOWN JELICO	COUNTY OR PROVINCE CAMPBELL	STATE OR TERRITORY OF U. S. A., OR COUNTRY TENN
EXPRESS OFFICE (Nearest railroad passenger station) JELICO TENN	TELEGRAPH ADDRESS	TELEPHONE No. 20	

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 STephens	FIRST NAME ADA	MIDDLE INITIAL A.	RELATIONSHIP TO DECEASED sister
NUMBER AND STREET	CITY OR TOWN Woolbridge	COUNTY OR PROVINCE Campbell	STATE OR TERRITORY OF U. S. A., OR COUNTRY Tennessee

REMARKS OR ADDITIONAL INSTRUCTIONS (For additional space use page 4.)*

Douglas Cemetery, Woolbridge, Tennessee

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, the undersigned, DO SOLEMNLY SWEAR (OR AFFIRM) that the statements made by me in the foregoing document are full and true to the best of my knowledge and belief.

Anna E Bates
(SIGNATURE OF NEXT OF KIN)

(NAME PRINTED OR TYPED)

(STREET AND NUMBER)

Woolbridge Tenn
(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 1 day of Nov

1947 at city (or town) of Jellico, county of Campbell, and State (or Territory or

District) of Tenn.



[Signature]
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)
Notary Public
(OFFICIAL TITLE)

*NOTE.—Page 4 is part of the notarial attestation:

PART II — RELINQUISHMENT OF DISPOSITION AUTHORITY

If you are the next of kin and you desire to relinquish your disposition authority, please fill in PART II of this form.

I, THE _____, AS THE NEXT OF KIN OF THE DECEASED
(PLEASE INSERT RELATIONSHIP)
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.

_____	_____ (DATE)
(SIGNATURE OF NEXT OF KIN)	(STREET AND NUMBER)
_____	_____ (CITY AND STATE)
(NAME PRINTED OR TYPED)	

PART III

If you are NOT the next of kin authorized to direct the disposition of remains, please fill in PART III of this form.

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

_____	_____ (DATE)
(SIGNATURE)	(STREET AND NUMBER)
_____	_____ (CITY AND STATE)
(NAME PRINTED OR TYPED)	

ADDITIONAL REMARKS AND INSTRUCTIONS

All remarks and information entered here will be considered as part of the Notarial Attestation.



Pvt. Johnnie M. Bates, 14 035 681
Plot T, Row 9, Grave 201,
United States Military Cemetery
Hamm, Luxembourg

31 July 1947

Mrs. Anna E. Bates
Wooldridge, Tennessee

Dear Mrs. Bates:

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

9 Incls.

mac

K

mac

eh

26 September 1946

Mrs. Anna E. Bates
Woodridge, Tennessee

Dear Mrs. Bates:

MB
The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Private Johnie M. Bates, A.S.N. 14 035 681.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Hamm, plot T, row 9, grave 201. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located two and one half miles east of the city of Luxembourg, 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,

T. B. LARKIN
Major General
The Quartermaster General

MB

SEP 27 11 00 AM '46
MAIL & RECORDS BRANCH

FILE UNDER NO. 293 - Bates, Johnie M (Pvt.) 14035681

I N D E X S H E E T

SYNOPSIS

LETTER:

12/6/45

FROM: HQS., AMERICAN GRAVES REGISTRATION COMMAND, THEATER SERVICE FORCES,
EUROPEAN THEATER
TO: QM GENERAL.

SUBJ: Burial Information.

Records of this office indicate that Pvt. Bates was KIA 11 Sept., 1944 and was buried 28 February 1945 in Plot T Row 9 Grave 201 at the U.S. Military Cemetery, Hamm, Luxembourg.

DOCUMENT FILED UNDER NO. 314.6 - T/O European, U.S. Misc.

ead

*File
row
+ 20-46*

SPQYG 293
Bates, Johnie M.
S.N. 14 035 681

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

12 January 1946

Mrs. Ada Stephens
Wooldridge, Tennessee

Dear Mrs. Stephens:

Your letter concerning your brother, the late Private Johnie M. Bates, has been forwarded to this office for reply.

There are no provisions at the present time whereby the War Department may furnish photographs of military cemeteries or of individual graves overseas. However, it is anticipated that, within the next calendar year, the War Department, through the Headquarters, Army Air Forces, will be able to provide, upon request of the next of kin, air photographs of most of the principal established military cemeteries overseas.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

JAMES L. PRENN
Major, QMC
Assistant

1 Incl.
stamped env.

me
JRB
WER
DSL
JLP

pcd

X

GRAVES REGISTRATION SECTION
JAN 14 8 51 AM '46
MEMORIAL DIVISION

photo

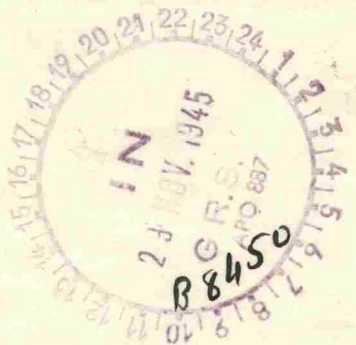
Woodridge Tenn
Nov 2. 1945

To the grave Registration Co.

Will you please send me a
photo of my Brother. P.V.T Johnie M. Bates,
grave who was reported killed in
France & Buried in Hamm Luxembourg
Sept 11. 1944, Plot T, Row 9, grave 201.
if you will, please send me a photo
of his grave I would be so glad as
we are all hurt so deeply over my
Poor Brother.

I enclose a stamped envelope.
Please answer to Mrs Ada Stephens.
Woodridge Tenn.

(P.S) His (A.S.N) No is 14035681.



HEADQUARTERS, ARMY SERVICE FORCES

MEMO ROUTING SLIP

TO THE FOLLOWING IN ORDER INDICATED:

	NAME OR TITLE	ORGANIZATION	BUILDING AND ROOM	INITIALS
1	EFFECTS QUARTERMASTER	ARMY EFFECTS BUREAU	KANSAS CITY 1, MISSOURI	DATE
2				
3				

SPQYG 293 Bates, Johnie M. - *140 356 81* *Pow*

For necessary action.

2 Incls
 1 - c/let. 6/27/45 PIERCE
 2 - c/let. 7/31/45

Orig. fwd. to K. C. by this office, CTB

Incl.

FROM:	NAME	ORGANIZATION	BUILDING AND ROOM	DATE
	MEMORIAL DIVISION, PLANNING & REGISTRATION	BRANCH, TEMPO "C" WASHINGTON 25, D. C.		31 July 1945
				TELEPHONE

W. D., A. G. O. Form 0115
 1 October 1944

This Form supersedes W. D., A. G. O. Form 0115, 23 March 1944,
 which may be used until existing stocks are exhausted.

25-37607-6250

SPQYG 293
Bates, Johnnie M.
S.N. 14035681

RM

31 July 1945

Mrs. Ada Stephens
Wooldridge, Tennessee

Dear Mrs. Stephens:

Your letter has been referred to this office for reply regarding the personal effects of your brother, the late Private Johnnie M. Bates.

In view of the fact that the Army Effects Bureau, Kansas City Quartermaster Depot, 601 Hardesty Avenue, Kansas City 1, Missouri, has been designated to receive and ship the personal effects of our deceased military personnel who die outside the United States, a copy of your letter has been forwarded to that office for direct reply.

The official report of interment shows that the remains of your brother were interred in the United States Military Cemetery, Hamm, Luxembourg, Plot T, Row 9, Grave 201. The cemetery is located approximately two miles east of the city of Luxembourg.

This office regrets sincerely, the delay in answering your letter and wishes to extend its deepest sympathy in the loss of your brother.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

ARTHUR L. WARREN
Colonel, QMC
Assistant

CCP
CCP

Aug 1 11 30 AM '45
MEMORIAL DIVISION

el
SM
W
Aug 1 1 30 PM '45
QMC
MAIL & RECORDS BRANCH

M

MEMO ROUTING SLIP

WLE

TO THE FOLLOWING IN ORDER INDICATED:

1	NAME OR TITLE	ORGANIZATION	BUILDING AND ROOM	INITIALS
				DATE
	Dir., Memorial Division, OQMG		Room 1005, Tempo C Building	
			Washington, D. C.	
2				
3				

1. For necessary action.

2. Private ²⁹³ Johnie M. Bates, 14035681, was killed in action in France on 11 September 1944.



JOHN H. MORTON
1st Lt.

1 Incl
Ltr dtd 27 Jun 45

FROM:	NAME	ORGANIZATION	BUILDING AND ROOM	DATE
	Casualty Branch, Composite Section #1	Family Relations Sub-Section	2827	2 July 1945
				TELEPHONE
				79040

Sma

MEMORIAL DIVISION
JUL 3 12 52 PM '91
AGO
MARK ROOM
DISPATCHED
CASUALTY BRANCH

MEMORIAL DIVISION
JUL 3 12 52 PM '91

7 R 1

PC

Wooddidge Tenn

June 27, 1945

To the War Department.

In regards to my
dear and only Brother
PVT Johnie M Bates ASN. 14035681
Who was reported killed in action
in France Sept 11, 1944.

Would it be possible you would
send me his pictures and
things he had on his person at
time of his death if I could get
some pictures I gave him I
would be convinced that he was
gone.

Thanking you if you can
send them to me.

Yours kindly
Mrs Ada Stephens
Wooddidge Tenn.

REPORT OF BURIAL

28 Feb 45

RESTRICTED

293

Last Name: **BATES** Initial: **J** Rank: **Unknown** Serial No.: **114035681**

Unit: **23 Armd Inf Bn** Organization: **(Body decomposed)**

Place of Death: **Jouy-Aux-Arches, France** Date of Death: **15 Oct. 1918** Cause of Death: **(SV Head Injury)**

Time and Date of Burial: **1100-28 Feb 45** Name of Cemetery: **US Military Cemetery, Hamm, Luxembourg** Name or Coordinates of Location: **1100**

Grave Number: **201** Row Number: **9** Plot Number: **T** Type of Marker: **Cross**

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

If No Identification Tags
How were remains identified?

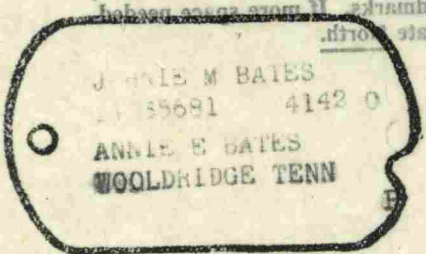
What means of identification were buried with the body?

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

Who is buried on:

	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Right:					
Deceased's Left:	McMULLEN	35607486	Unknown	Unknown	202

Signature of 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: **Protestant**

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

No Personal Effects

RESTRICTED

For The Commanding Officer:

E.R. DE WEESE
1st Lt QMC
609th QM Gr Reg Co.

Signature of Officer or other person reporting burial

Verified by G.R.S. Officer

8	7	6	5	4	3	2	1	0
8	7	6	5	4	3	2	1	0
8	7	6	5	4	3	2	1	0
8	7	6	5	4	3	2	1	0
8	7	6	5	4	3	2	1	0
8	7	6	5	4	3	2	1	0
8	7	6	5	4	3	2	1	0
8	7	6	5	4	3	2	1	0
8	7	6	5	4	3	2	1	0
8	7	6	5	4	3	2	1	0

#12

FILE
JUL 1 1945

REPORT OF BURIAL IF DECEASED UNIDENTIFIED

GRAVE REGISTRATION
Form No. 1
Revised June 1953

Take Fingerprints of Both Hands. If unable to obtain a complete set of Fingerprints, Take Those You Can, and fill in the following:

Height: _____ Laundry Marks: _____
 Weight: _____ Number of Filled _____
 Color of Eyes: _____ Wear Glasses? _____
 Color of Hair: _____ Is Tooth Chart Attached? _____
 Race: _____

(If possible, have medical personnel take a tooth chart, if no medical personnel present, fill in a tooth chart below. In space below, locate, and describe any scars, birthmarks, moles, deformities, etc.)

Type of Marker: Cross
 Attached to Marker: Yes No

Position of Identification Tags: Buried with body Yes No
 No Identification Tags: How were remains identified? _____

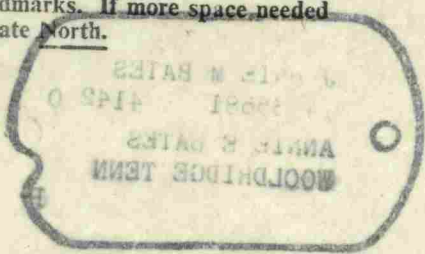
Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc.:

Left Hand		Right Hand	
4	2	4	2
Serial No. <u>11035881</u>		Serial No. <u>11035881</u>	
Date <u>28 Feb 52</u>		Date <u>28 Feb 52</u>	

Deceased's Left		Deceased's Right	
8	7	8	7
8	8	8	8
7	7	7	7
6	6	6	6
5	5	5	5
4	4	4	4
3	3	3	3
2	2	2	2
1	1	1	1
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8

TOOTH CHART

If this is an Isolated Burial, make a Sketch of the Location, oriented with Permanent Landmarks. If more space needed attach separate sheet. Indicate North.



Name: _____
 Address: _____
 Emergency Address: _____
 Religion: Protestant
 List only Personal Effects Found on Body and disposition of same: _____

Characteristics: _____
 Other Data: _____

Signature of Officer or other person reporting: _____
 For The Commanding Officer: _____
 E. R. DE WESSE
 AG P BR HQ 505
 1st Lt OMC
 Death On Gr Reg Co.

RESTRICTED

122560

#12

SENSITIVE SURFACE - HANDLE EDGES ONLY

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

REPORT OF DEATH

 DATE 19 Apr 1945

FULL NAME <i>BATES</i> Bates, Johnie M.		ARMY SERIAL NUMBER <i>Imp 2831</i> 14 035 691	Pvt
HOME ADDRESS Wooldridge, Tennessee		ARM OR SERVICE Infantry	DATE OF BIRTH 30 Dec 1908
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH 11 Sept 1944
STATION OF DECEASED European Area	DATE OF ENTRY ON CURRENT ACTIVE SERVICE 14 Nov 1940	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS over 3 years	

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)

Mrs. Anna E. Bates, Mother, Wooldridge, Tenn.

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)

 Anna E. Bates, Mother, Wooldridge, Tenn.
 Ada Stephens, Sister, Gen. Del., Wooldridge, Tenn.

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
												X	X

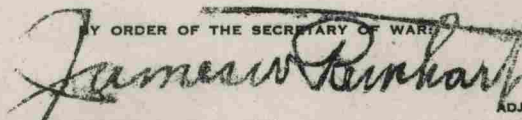
ADDITIONAL DATA AND/OR STATEMENT
 BATTLE NON-BATTLE

The individual named in this report of death is held by the War Department to have been in a missing in action status from 11 Sept 1944 until such absence was terminated on 19 Mar 1945, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from the Commanding General in the European Area.

COPIES FURNISHED:

U. S. O.	F. S. I.	F. O., U. S. A.
U. S. M. G.	O. F. D.	ARMY EFFECTS BUREAU
G. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BY ORDER OF THE SECRETARY OF WAR



ADJUTANT GENERAL

APR 24 1945

293 Bates, Johnie M

14 035 681 Pvt.

al

251.381

ATTACHMENTS		STATUS	
<input checked="" type="checkbox"/> INBOUND INVENTORY	<input checked="" type="checkbox"/>	DECEASED	
<input checked="" type="checkbox"/> G. R. OR SUB GR LABEL	<input checked="" type="checkbox"/>	MISSING	X
<input type="checkbox"/> WILL OR POWER OF ATTY.		P. O. W.	
<input checked="" type="checkbox"/> TALLY IN FORM 43	<input checked="" type="checkbox"/>	ABANDONED	
		UNKNOWN	

EFFECTS INVENTORY ARMY EFFECTS BUREAU

<input checked="" type="checkbox"/> BAGS, CLOTH OR TRAVEL	<input type="checkbox"/> BELT	<input type="checkbox"/> OVERCOATS
<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 checked="" 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 <i>none</i>	INFORMATION <i>none</i> <i>rechecked</i>
NAME AND STATUS VARIATIONS <i>gold</i> <i>EMW</i> <i>8.24</i>	CROSS REFERENCE

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

TALLY NO. <i>77</i>	ORIG. NO. OF PKGS. <i>1</i>	EXAMINING DATE <i>7 Aug 45</i>	BOX NO. <i>69</i>	SHEET <i>1</i> OF <i>1</i> SHEETS
NAME <i>Johnnie M. Bates</i>		A. S. N. <i>14035481</i>		
ORGANIZATION <i>Co 'C' 23rd Avind. Inf. Bn</i>		RANK <i>Pvt</i>	CASE NO. <i>251,381</i>	
WAREHOUSE SPACE <i>1/33</i>	EXAMINED BY <i>me Cornell</i>	DIARY REMOVED		
PACKAGE DESCRIPTION <i>#1 pkg</i>	PACKED BY <i>D Smith</i>	PHOTO FILM REMOVED		
WEIGHT	INSPECTED BY <i>L. L.</i>	MOTION PICTURE FILM REMOVED		
	STORED BY <i>[Signature]</i>	DATE <i>SEP 11 1945</i>	BY WHOM <i>mic</i>	

251381

RTB:HL:mf
August 27, 1945

Mrs. Anna E. Bates
Woodridge, Tennessee

Dear Mrs. Bates:

The Army Effects Bureau has received from overseas some property of your son, Private Jolmie M. Bates.

This property, consisting of one fountain pen and one wallet, is being sent you.

If, for some reason, it has not been received at the expiration of thirty days from this date, please notify me so that tracer may be instituted.

I regret the circumstances prompting this letter, and wish to express my sympathy in the loss of your son.

Yours very truly,

PLK
P. L. KOEB
1st Lt., QMC
Officer-in-Charge
SJ Branch

SCREENED
Ann 4-20-48

67

NAME BATES, JOHNIE M RVT 5681

BAY	PALLET	BOX	TALLY
	8	69	77

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
PKG		

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Anna E. Bates

Wooldridge, Tennessee

Effects of:

Name Pvt. Johnie M. Bates

ASN 14035681

Case No. 251381 D

Wt.

DATE 27 August 1945
RTB:HL:mf

M. R. Rutter
FOR: Effects Quartermaster

REMARKS:

-----	Inclose Bureau Check	-----	Remove G.I.
-----	Acct. No. -----	-----	Note discrepancy in -----
-----	Amount -----	-----	Films removed -----
-----	Inclose "Valuables" item	-----	Diary removed -----
-----	Ship "Valuables" item(s)	-----	Laundry removed -----

ROUTING:

Accounting Branch
1 Warehouse Division
2 Files Branch, Adm. Div.

REMARKS:

FRANKED

Est. Exp. Chgs. -----
Est. Prt. Chgs. -----
No. of packages 1

MR

Shipping Clerk

Summary Court-Martial
ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPT.
501 Hardesty Avenue
Kansas City 1, Missouri

JRM:Harmer
Case No. 251381
Date 27 August 1945

SUBJECT: Report of transaction in disposing of the effects of

Jemie M. Bates late a
(Name of deceased) 11035681 (Army Serial Number)
Private Infantry who died
(Grade) (Organization, Army or Service)
on the 11 day of September, 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., 228 Hq., KCCM Depot, dated 25 September 1943, 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. _____.)

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 _____, Incl. _____)

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 24 August 1945, pursuant to Special Orders 228, Headquarters KCCM Depot, dated 25 September 1943, the application or affidavit of Mrs. Ada Stephens 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. Anna E. Bates of Wooldridge State of Tennessee (Number, Street or Avenue) (City, Town or Village) is the Mother of the (Relationship or Capacity)

above-named decedent and appears to be entitled to receive his or her effects.

(Signature of Summary Court Officer)

JOHN R. MURPHY, Colonel, OMC
(Name, Rank, Organization)
SUMMARY COURT MARTIAL

BATES JOHNNIE M — PVT

1403565+

TIP-81

MIA

2nd
30-10-44

L.S. X 196

WAR DEPARTMENT
EFFECTS QUARTERMASTER CZ
APO 887 US ARMY

Penalty for private
use to avoid payment
of postage \$500

Official Business



PERSONAL EFFECTS OF:

251381

RTB:LK:dh
August 18, 1945

Mrs. Ada Stephens
Woodridge, Tennessee


Dear Mrs. Stephens:

Your letter of June 27 has been referred to the Army Effects Bureau from Washington for reply in connection with the personal effects of your brother, Private Johnnie M. Bates.

I am sorry to report that the Army Effects Bureau has not yet received any of his property. It is reasonable to assume, however, that his belongings ultimately will reach here, as all War Department agencies have instructions to forward the personal effects of military personnel to this Bureau for disposition. Transportation delays generally are encountered in delivery of effects, and considerable time should be allowed for the return of property from overseas.

Promptly upon receipt of any of your brother's belongings, disposal action will be taken.

Yours very truly,


HARRY NIEMIEC
2nd Lt., GMC
Chief, Correspondence Branch

HEADQUARTERS, ARMY SERVICE FORCES

MEMO ROUTING SLIP

TO THE FOLLOWING IN ORDER INDICATED:

	NAME OR TITLE	ORGANIZATION	BUILDING AND ROOM	INITIALS
1	EFFECTS QUARTERMASTER	ARMY EFFECTS BUREAU		DATE
2	KANSAS CITY 1, MISSOURI			
3				

SPQYG 293 Bates, Johnie M.

For necessary action.

2 Incls

- 1 - c/let. 6/27/45
- 2 - c/let. 7/31/45

Pierce
PIERCE

Incl.

FROM:	NAME	ORGANIZATION	BUILDING AND ROOM	DATE
				31 July 1945
				TELEPHONE
	MEMORIAL DIVISION, PLANNING & REGISTRATION BRANCH, TEMPO "C" WASHINGTON 25, D. C.			

W. D., A. G. O. Form 0115
1 October 1944

This Form supersedes W. D., A. G. O. Form 0115, 23 March 1944,
which may be used until existing stocks are exhausted.

25-37607-6250

254381-NA

INQUIRY CLERK

Woodridge, Tennessee
June 27, 1945

To the War Department

In regards to my dear and only brother, Private Johnnie M. Bates, S. N. 14 035 681, who was reported killed in action in France September 11, 1944, would it be possible for you to send me his pictures and things he had on his person at the time of his death. If I could get some pictures I gave him I would be convinced than he was gone.

Thanking you if you can send them to me.

Yours kindly

Mrs. Ada Stephens
Woodridge, Tennessee

at 8/11
at 8/11

SPQYG 293
Bates, Johnie M.
S.N. 14035681

31 July 1945

Mrs. Ada Stephens
Wooldridge, Tennessee

Dear Mrs. Stephens:

Your letter has been referred to this office for reply regarding the personal effects of your brother, the late Private Johnie M. Bates.

In view of the fact that the Army Effects Bureau, Kansas City Quartermaster Depot, 601 Hardesty Avenue, Kansas City 1, Missouri, has been designated to receive and ship the personal effects of our deceased military personnel who die outside the United States, a copy of your letter has been forwarded to that office for direct reply.

The official report of interment shows that the remains of your brother were interred in the United States Military Cemetery, Hamm, Luxembourg, Plot T, Row 9, Grave 201. The cemetery is located approximately two miles east of the city of Luxembourg.

This office regrets sincerely, the delay in answering your letter and wishes to extend its deepest sympathy in the loss of your brother.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

ARTHUR L. WARREN
Colonel, QMC
Assistant

R E S T R I C T E D

13 Sep 44
Date

SUBJECT: Inventory of Personal Effects of:

BATES
~~XXXXXX~~ JOHNNIE M. PVT. 14035681
(Last Name) (First Name) (MI) (Rank) (ASN)

TO: Effects Quartermaster, Communication Zone, APO _____
US Army

The above named individual of Company "C"
(Unit)

83d Armd Inf. Bn. was reported MIA
(Organization) (Status-Killed, MIA,

_____ about 11 September 1944
Hospitalized, etc.) (Date)

Designated Beneficiary if information readily accessible _____

INVENTORY OF EFFECTS
Weaver fountain pen
Leather wallet

R E S T R I C T E D

RESTRICTED

Money in the amount of None has been turned into

Form WDFD 38

(Name of finance officer and symbol number)

enclosed.

(Unknown)

Names and addresses of any Banks in which accounts may be

carried:

I certify that the above items constitute all of the effects,
secured by me, of the above named individual and that they were for-
warded to the Effects Depot by Truck on
(Rail, Truck, etc.)

13 September 1944.

Stuart P. Edson
Name STUART P. EDSON
Rank & ASN 1st Lt., O-467449
Organization 23d Armd Inf. Bn.

Any additional pertinent information:

RESTRICTED

NAME : BATES, Johnie
RANK : Pvt.
UNIT : Co "C" 23 Arm'D inf. Bn.
STATUS : MIA.
REMARKS : Inv. 30 Nov 44
Pkg.
T i P - 81

ASN 14035681

CASE NO 41862

Shipping List No: MIA-311
Date Shipped : 13.4.45
Destination : K.C.I

Whse Space
L.S. 196