



INDIVIDUAL DECEASED PERSONNEL FILE

BUST

WUB2 SVC

GD

OUR NO B052 TO YOU 21 FROM STANFORD KY 1040A MAKE SIG
HENRY A GODBY REPEAT HENRY A GODBY

COLUMBUS OHIO DEC 21

WUB052 29 GOVT COLLECT STANFORD KY DEC 20 1040A

BOWMAN CO COLUMBUS GENL DIST DEPOT

I CONFIRM ORIGINAL INSTRUCTIONS FOR REMAINS OF PRIVATE

FIRST CLASS PERLE C GODBY SHIP TO BEASLEY AND RANEY

FUNERAL HOME WHO WILL NOTIFY ME WHEN BODY WILL ARRIVE

HARRY A GODBY

854A DEC 21..

Henry

GDB19 SVC 21 DEC 206P

TO SVC BUR COLS OHIO

SEE YOUR WUB052 29 GOVT COLLECT STANOXXXX STANFORD KY DEC 20 1040A

SGD HARRY A GODBY. PLS CK THE FIRST NAME OF THE SENDER

IT SHOULD BE HENRY RPT HENRY PLS GIVE CORRECTION

SVC BUR GRAVES DIV COLS GEN DEPOT COLS OHIO

206P

**REQUEST FOR REIMBURSEMENT OF INTERMENT
OR TRANSPORTATION EXPENSES**

(Read Explanation on Reverse Side before completing form)

DATE

2-1-49

NAME OF DECEDENT (Last, First, Middle Initial)

293
Godby, Perle C.

BRANCH OF SERVICE

Army

TO BE FILLED IN BY CLAIMANT

A. INTERMENT EXPENSES
(Civilian or Private Cemetery)

B. TRANSPORTATION EXPENSES
(National or Post Cemetery)

RANK OR GRADE

Pfc.

SERIAL NO.

35073529

INSTRUCTIONS TO PERSONS SIGNING THIS FORM

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

FILL IN THIS STATEMENT IF BOX "A" IS CHECKED

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

NAME: ~~of Cemetery:~~

CITY OR COUNTY:

STATE:

FILL IN THIS STATEMENT IF BOX "B" IS CHECKED

I certify that the sum of \$ **25.00** was paid by me from personal funds in connection with the transportation of the remains of the above-named decedent from: (City, town, or place from which remains were shipped)

Stanford, Kentucky

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

~~West Somerset~~
Hancy, Kentucky,
National Cemetery - Mills Springs

RETURN FOUR COPIES TO

SIGNATURE OF CLAIMANT

H. P. Godby
X **Sign Original Copy**

ADDRESS (Street number or RFD, City and State)

~~Kings Mountain, Ky~~ **R 3 Stanford Ky**

RELATIONSHIP TO DECEDENT

Father

REMARKS

PAID ON VOUCHER **93993**
MAR 2 1949
ACCOUNTS OF
W. KNOBELCOCH, Lt. Col. F. D.

SYMBOL NO. 211-943

12306

RECEIPT OF REMAINS

DISTRIBUTION CENTER

COLUMBUS GENERAL DEPOT COLUMBUS 15 OHIO

ROUTINE 26 JANUARY 1949

REMAINS CONSIGNED TO: BEAZLEY AND RANEY
MAIN STREET
STANFORD KENTUCKY

FROM QMDCG _____ BARDEN

REMAINS OF THE LATE PFC PERLE C GODEY ASN 35073529 BEING SHIPPED TO YOU
ACCOMPANIED BY MILITARY ESCORT ON TRAIN NUMBER 22 LOUISVILLE & NASHVILLE
RAILROAD LEAVING COLUMBUS OHIO 3:48 AM THIRTY ONE JANUARY AND DUE TO ARRIVE
STANFORD KENTUCKY 5:54 PM RAILROAD TIME THIRTY ONE JANUARY. REQUEST YOU
MAKE ARRANGEMENTS TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL AND
THAT YOU IMMEDIATELY PASS THIS INFORMATION TO THE NEXT OF KIN.

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

THIS 31st DAY OF Jan, 19 49
DAY MONTH

W. E. Johnson
WITNESS (Escort) USA.

Beazley and Raney
CONSIGNEE
Ray L. Raney

HAT
FILE
RECORDS ANNOTATED
DATE 21 Jan 49
NAME Ray L. Raney
R & R BR.

1		3-20 DISINTERMENT DIRECTIVE			NAT. GEN.		
		SECTION A NAME AND BURIAL LOCATION OF DECEASED			DIRECTIVE NUMBER 4650 06139		DATE 15 04 48 DAY MONTH YEAR
NAME GODBY PERLE C			SERIAL NUMBER 35073529		RANK PFC	ARM 1	DATE OF DEATH DAY MONTH YEAR
CEMETERY MARGRATEN - AACHEN						DISPOSITION OF REMAINS 1	5227 07 CODE DIST. PT.
PLOT KKK	ROW 11	GRAVE 258	COUNTRY HOLLAND			CAUSE OF DEATH 1	
SECTION B - CONSIGNEE AND NEXT OF KIN							
NAME AND ADDRESS OF CONSIGNEE BEAZLEY AND RANEY MAIN STREET STANFORD, KENTUCKY				NAME AND ADDRESS OF NEXT OF KIN HENRY A. GODBY (FATHER) ROUTE #3 STANFORD, KENTUCKY			
SECTION C - DISINTERMENT AND IDENTIFICATION							
NAME PERLE C. GODBY		SERIAL NUMBER 35073529		RANK PFC	DATE OF DEATH		DATE DISTINTERRED 11 AUG 48
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER GRS		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				CONDITION OF REMAINS FRACTURED MANDIBLE, R/FEMUR. , CRUSHED. SKULL- REMAINS COMPLETE- ADVANCED STAGE OF COMPOSITION			
OTHER MEANS OF IDENTIFICATION NONE							
MINOR DISCREPANCIES I NONE							
REMAINS PREPARED AND PLACED IN CASKET TRANSFER BOX							
DATE 21 SEPT 48				BY ELIAM E. POORBAUGH, EMBALMER			
CASKET SEALED BY RICHARD N CONRAD, EMB. SUPERV.				EMBALMER (Signature) RICHARD N CONRAD, EMB. SUPERV.			
CASKET BOXED AND MARKED 24/11/48 DATE BY CHARLES R CARDER CLERK RECORDER				SHIPPING ADDRESS VERIFIED BY ALL TAGS, MARKINGS & PLATES VERIFIED BY F. R. ...			
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.							
ROBERT W. GANSEL, 1/LT, OMC							
SIGNATURE OF GRS INSPECTOR							
1 Prepare Discrepancy Report OMC Form 1194a for major discrepancies. as the original signatures on the No. 4 copy of F-1194 concerned							

MESSAGEFORM

MESSAGE CENTER No. TRANSMITTING MEANS

CRYPTOGRAPH OR CLEAR TEXT

CALLS <i>V</i>	STA. SER. No. <i>NR</i>	PRECEDENCE	TRANSMISSION INSTRUCTIONS <i>NR-1232</i>	ORIGINATOR	DATE-TIME GROUP
ACTION	INFORMATION		EXEMPT	OPERATING SIGNALS	GROUP COUNT

WESTERN UNION
SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Originator)

SECURITY CLASSIFICATION

ACTION TO:

HENRY A GODBY

DLR AND REPORT ANY CHARGES

ROUTE #3

STANFORD KENTUCKY

GOVT PD

PRECEDENCE FOR
ACTION INFORMATION

DAY LETTER

ORIGINAL MESSAGE

REFERS TO ANOTHER MESSAGE
IDENTIFICATION CLASSIFICATION

INFORMATION TO: FROM QMDCG 19928-B BARDEN

WE HAVE BEEN ADVISED REMAINS OF THE LATE PRIVATE FIRST CLASS

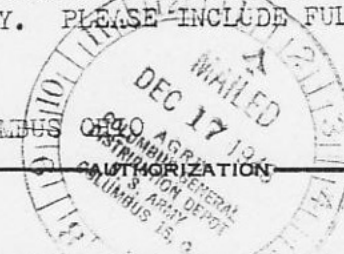
PERLE C GOGBY

ARE ENROUTE TO THE UNITED STATES. OUR RECORDS INDICATE YOU WISH REMAINS DELIVERED TO BEAZLEY AND RANEY FUNER L DIRECTOR MAIN STREET STANFORD KENTUCKY WITH BURIAL IN MILLS SPRINGS NATIONAL CEMETERY WEST SOMERSET KENTUCKY WITHIN FORTY EIGHT HOURS AFTER RECEIPT OF THIS MESSAGE PLEASE CONFIRM YOUR ORIGINAL INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS AND FURNISH YOUR CORRECT MAILING ADDRESS BY TELEGRAM COLLECT TO COMMANDING OFFICER COLUMBUS GENERAL DISTRIBUTION DEPOT COLUMBUS OHIO. REPLY IS NECESSARY WITHIN THIS PERIOD SINCE IT WILL NOT BE POSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF FORTY EIGHT HOURS. WHILE DELIVERY OF THE REMAINS BE MADE AS SOON AS PRACTICABLE AFTER RECEIPT FACTORS BEYOND OUR CONTROL MAY DELAY DELIVERY OF REMAINS FOR SEVERAL WEEKS. HOWEVER AS SOON AS REMAINS ARE RECEIVED HERE AND IT IS POSSIBLE TO SCHEDULE THEM FOR DELIVERY YOUR FUNERAL DIRECTOR WILL BE NOTIFIED BY TELEGRAM OF RAIL ROUTING AND SCHEDULED TIME REMAINS WILL ARRIVE AT RAILROAD STATION. ALSO HE WILL BE REQUESTED TO FURNISH YOU THIS INFORMATION SO THAT YOU MAY COMPLETE FUNERAL ARRANGEMENTS. THIS TELEGRAM WILL BE SENT AT LEAST THREE DAYS PRIOR TO ACTUAL SHIPMENT FROM THIS DISTRIBUTION CENTER. PLEASE INSTRUCT FUNERAL DIRECTOR TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL. REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. SUPERINTENDENT OF MILLS SPRINGS NATIONAL CEMETERY SHOULD BE CONTACTED BY YOU OR YOUR FUNERAL DIRECTOR FOR BURIAL ARRANGEMENTS. YOU ARE RESPONSIBLE FOR ARRANGING AND PAYING FOR DELIVERY OF REMAINS FROM STANFORD KENTUCKY TO GRAVESIDE IN MILLS SPRINGS NATIONAL CEMETERY. APPROPRIATE JOINT MILITARY HONORS AND RELIGIOUS SERVICE WILL BE PROVIDED AT GRAVESIDE BY VETERANS ORGANIZATIONS OR MILITARY OR NAVAL PERSONNEL. INTERMENT EXPENSE ALLOWANCE OF SEVENTY FIVE DOLLARS IS NOT AUTHORIZED IN ANY CASE WHERE BURIAL IS IN A NATIONAL CEMETERY. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.

BOWMAN CO COLUMBUS GENERAL DISTRIBUTION DEPOT COLUMBUS

SECURITY CLASSIFICATION

SIGNATURE



SYMBOL

ORIGINATING AGENCY

DATE-TIME GROUP

OFFICIAL TITLE

FRANCIS FAPPIANO
CAPT, QMC, Asst AGR Div

PAGE OF

INSPECTION CHECKLIST
(For use at Distribution Center)

2/22/59

NAME Godby, Perle C.	RANK Pfc.	SERIAL NUMBER 35073529
--------------------------------	---------------------	----------------------------------

SOURCE	CONSIGNEE Brazley and Raney Main St., Stanford, Kentucky
---------------	---

SHIPPING CASE - GENERAL APPEARANCE (CHECK ONLY DISCREPANCIES)	CONDITION OF SHIPPING CASE (CHECK ONE) <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY
---	---

FINISH (EXTERIOR)
FINISH (INTERIOR)
HANDLES
HAND BOLTS
STENCILING - NAMEPLATE
HEALTH PERMIT MARKER
HEALTH PERMIT NUMBER

REMARKS <i>Touch up on top</i>
--

CASKET - GENERAL APPEARANCE (CHECK ONLY DISCREPANCIES)	CONDITION OF CASKET (CHECK ONE) <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY
--	--

FINISH (EXTERIOR)
HANDLES AND FASTENINGS
STENCILING - NAMEPLATE
GLASS LOGS (SEALING)
PROOF OF MOISTURE

REMARKS <i>Touch up on top</i> <i>Plated</i>

<input type="checkbox"/> MORTUARY OPERATING ROOM	<input type="checkbox"/> MORTUARY REPAIR SHOP
--	---

CONDITION OF REMAINS <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY	CASKET REPAIRS <input type="checkbox"/> YES <input type="checkbox"/> NO
--	---

NECESSARY DISINFECTION (EXPLANATION)	CASKET EXCHANGED <input type="checkbox"/> YES <input type="checkbox"/> NO
---	---

SHIPPING CASE REPAIRED <input type="checkbox"/> YES <input type="checkbox"/> NO

SHIPPING CASE EXCHANGED <input type="checkbox"/> YES <input type="checkbox"/> NO
--

REMARKS

TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTOR
			<i>1000</i>	<i>1-21-59</i>	<i>[Signature]</i>

REMARKS <i>[Signature]</i>
--

Date February 28, 1949

TO:

The authorized inscription for a Government headstone of the general type (furnished for all decedents except those who served only during the Civil and Spanish-American Wars) includes: (1) The State from which the veteran came; (2) religious emblem in a small circle above the inscription on the face of the headstone; and (3) the dates of birth and death.

In order that the appropriate information, as desired by the next of kin, may be shown on the headstone for the decedent whose name is listed below, it is requested that you fill in the proper spaces indicated below the data called for, and RETURN THIS FORM PROMPTLY TO THE

Supt, Mill Springs National Cemetery, West Somerset, Kentucky
Superintendent of Cemetery or Commanding Officer of Post

If this form is not returned to the Superintendent within fifteen (15) days from date of mailing, the headstone will be ordered with the data as to religious emblem, State and date of birth inscribed thereon as shown in the official records, and NO CHANGE WILL BE MADE AT A LATER DATE AT GOVERNMENT EXPENSE.

To be filled in by Superintendent or Commanding Officer

Name of Veteran Perle C. Godby

Rank, etc. PFC.

Grave or lot No. 31

Date of death November 7, 1944

Date buried February 3, 1949

To be filled in by Next of Kin

State desired Kentucky

Religious emblem desired Latin Cross
(Latin Cross for Christian Faith, Star of David for Hebrew Faith)

Date of birth June 25, 1920

Address of kin Route #3, Stanford, Kentucky

Signature H. A. Godby Date Feb, 3, 1949

OQMG FORM 315
20 March 1945

ORIGINAL MAR 9 1949

FILE MAR 14 1949

RRE Form #39
13 Jul 45

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

GODBY Perle C PFC 35073529
(Last Name) (First Name) (Initial) (Rank) (ASN)

Repatriated to the United States: 11 DEC. 1948

Incl #

784

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

1. Perle C. Godby Sfc 35073529 30th Armd Inf. Bn
(Full name of deceased) (Rank) (AS) (Company/Section)
 2. State if identification tags were attached to remains, how many, and where attached One identification tag around neck of deceased
 3. Give exact location from which disinterred, furnishing coordinates and map series used solignum 2 R.3. France Sheet 4 1st Edition Moseyon Grid
Coord. ~~878~~ 676042
- NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF LOCATED GRAVE WITH PERMANENT LANDMARKS.
4. Full name of cemetery (include plot, row and grave if organized cemetery)
Isolated Burial
 5. Approximate or established date of death (state which and give basis for date selected) AM: 7 NOV 1944 FROM LTR: CC
 6. Approximate or established date of burial (give basis for date established)
SEARCHED 10 Dec 44 FROM LTR: CC
 7. Manner in which grave was marked and all information contained on the marker
wooden cross w/ metal liner, identification tag attached to cross
cross inscribed: Perle C. Godby 35073529
 8. List personal effects found in possession of civilian or unauthorized military personnel, furnishing name and address of individual concerned
None
 9. Names and addresses of all persons questioned concerning death or burial and information each furnished (contact local mayor, priest, cemetery caretaker, those responsible for burial and any other possessing important information)
Information obtained from L. Williams D/O: 1. 140 Canal, Holland
 10. If buried in a coffin, give description and markings Not buried in coffin
 11. Action taken Disinterred & reburied to U.S. in 30th Armd Inf. Bn, Holland
Disinterment approved by Lt Col EUGENE O'CONNOR, dtd: 2 June 1945
Disinterment and *reburial/burial made by JOSEPH A. GRANT SS, 10 33rd US Army
Date of *burial/reburial Sept 9 1945
Place of *burial/reburial US Military Cemetery, Marseilles, Holland
Plot KKK Row 11 Grave 258 Gr Ref 33, 10 33rd, FRANCE

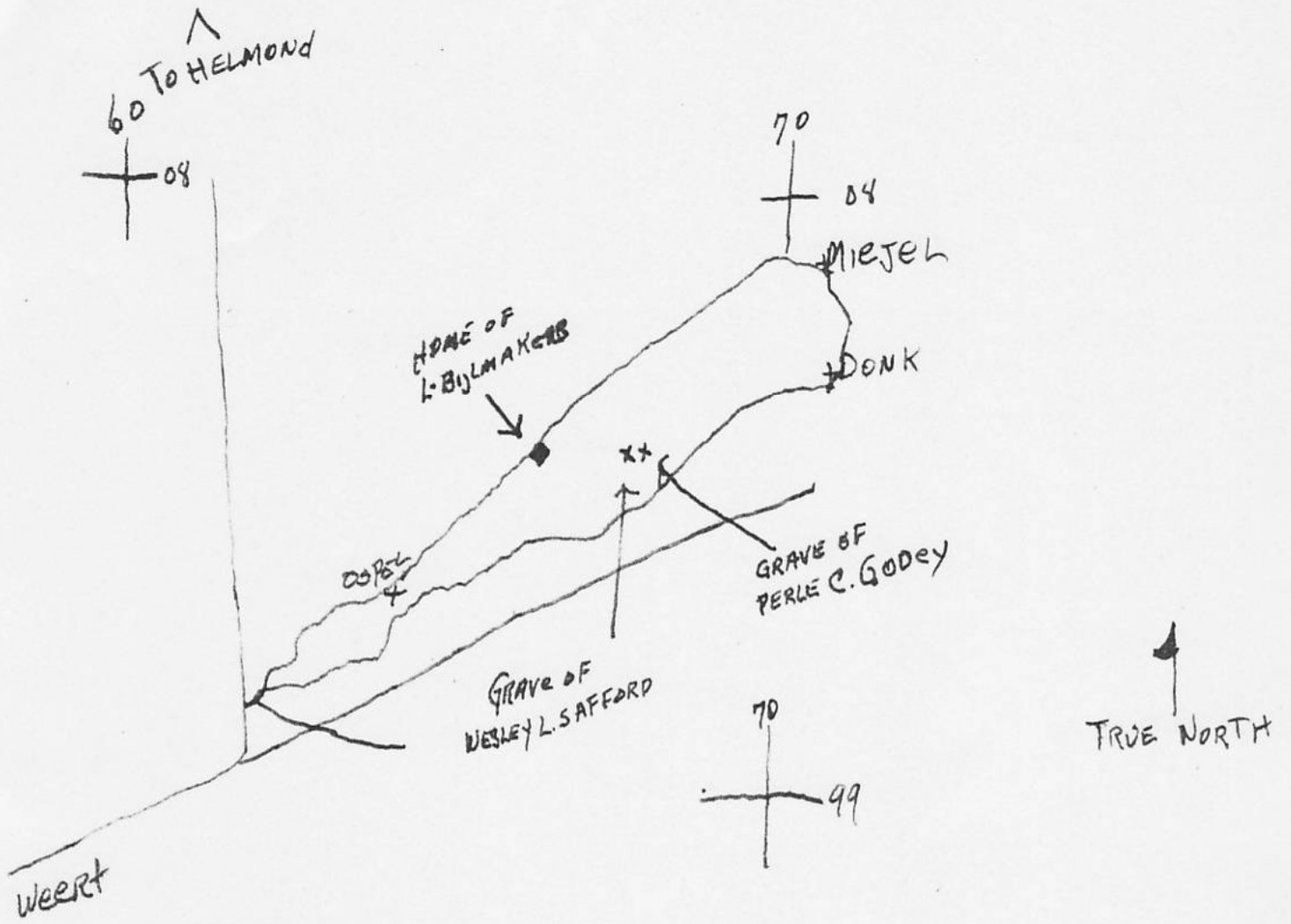
NOTE: Additional particulars regarding investigation will be placed on reverse side.

(Holland) Ref No. 774

*Cross out word not applicable

Paul Drake
Signature of Investigating Officer

N. F. BAKER
1st Lt. OMC
G-1527
G. R. O. Rank ASN



MAP REF: Belgium + N.E. FRANCE 1:100,000 Sheet 4
 MAESEYCK 1ST EDITION GRID COORD 676042

Sgt W Kraul

INCL # 17

TO : Commanding Officer, 603d Quartermaster Graves Registration Company,
AFC 562 United States Army

1. Reference par 2, b/c, further investigation conducted by this unit and file (3) deceased recovered under case register No: 734 (Holland). Bodies were disinterred in region of Heljela, Holland, coord: V4635085, and Ospel, Holland, coord: 67, 341.

2. Four (4) of deceased were positively identified by identification tags and two (2) of the bodies were considered unknowns, although "believed to be" as below:

Pfc Charles J. Haux	31083299	48 Armd Inf Bn	KKK-11-262
Pfc Raymond Carey	32249708	" " " "	KKK-11-263
Pfc Merle S. Goday	35013529	38 Armd Inf Bn	KKK-11-258
Pvt Jacob Nevala	36765670	38 Armd Inf Bn	KKK-11-265
<u>Believed to be:</u>			
Pfc Walter P. Good	35111830	48 Armd Inf Bn	KKK-11-260
Pfc Wesley L. Safford	12077068	38 Armd Inf Bn	KKK-11-266

3. Information as to location of burial of above deceased was furnished by signed statements from Dutch civilians living in area. Lack of specific data from some statements is due to evacuation of all civilians from area during the fighting, in that information was furnished by these persons on their return to their homes. Those contacted were Mr. A. Joris, Heljela, Hsten, Holland, Mr. L. Sijmakers of 2 H/O Dyk, Ospel, Holland, and D. Nies, Dyk E 155, Ospel, Holland.

4. Personnel of this unit disinterred deceased believed to be Pfc Safford, ref par 2 above. Helmet on grave bore following: "Jordan, J. James, 33854161," but three (3) clothing markings bore: inscription "0-7068." This deceased was buried near remains identified as those of Pfc Goday. Tooth chart was not possible since head of deceased is missing and fingerprints impossible in that body is in advance state of decomposition.

5. Deceased disinterred is believed to be Pfc Good, ref par 2 above. Chin strap of helmet on grave was marked with letters "GOOD." Wooden cross on grave bore following: "35111830-1-42-43 A." Although deceased's teeth were loose in jaw, tooth chart was taken and enclosed.

6. No personal effects were recovered with regard to deceased personnel disinterred.

7. Request further action by your headquarters with reference to preparability of UK formal and reburial.

HEAL F 943
1st Lt JG
Commanding

26 Incls-

- 2 Incls n/c
- 24 Incls as follows:
 - Incl 3 to 5 (1, 2, 3) - rept. of investigation area search.
 - Incl 9 to 13 - rept. investigation by this unit.
 - Incl 14 to 17 - overlays of immediate area (isolated burials).
 - Incl 20 to 21 - photo lists for unknowns.
 - Incl 22 - tooth chart, believed to be: Pfc Good.
 - Incl 23 to 26 - signed statements of Dutch civilians.

2nd Ind.

HEADQUARTERS 603rd QM GRAVES REGISTRATION COMPANY, APO 562,
US ARMY, 13th September 1945

TO: Graves Registration Officer, Chanor Base Section, APO 562,
US Army.

Deceased referred to in 1st indorsement reinterred in
US Military Cemetery, Margraten, Holland. Reports of Burial
attached.

For the Commanding Officer:

GLEON E WELLS
1st Lt., QMC

2 Incl: n/c

Incl 3 thru 3 w/d (combined with Report of Burial

Incl 9 thru 13 n/c

Incl 14 thru 22 w/d (combined with Report of Burial

Incl 23 thru 26 n/c

Added: 6 Reports of Burial

REQUEST FOR DISPOSITION OF REMAINS

L

GR _____, NAME, ARMY SERIAL NUMBER AND REPORTED PLACE OF BURIAL

DATE:

333

3/16/48
mal

Pfc Perle C. Godby, 35 073 529
Plot KKK, Row 11, Grave 258,
United States Military Cemetery
Margraten, Holland

5 December 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

I, Mr. Henry A. Godby (Please indicate relationship to the deceased by placing an "X" in the proper box.)
(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 (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

Mill Springs National Cemetery, West Somerset, Kentucky
(NAME AND LOCATION OF CEMETERY)

- 3. BE RETURNED TO _____ (FOREIGN COUNTRY), THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT _____ (LOCATION OF CEMETERY SELECTED)

- 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT West Somerset, Ky. (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.)

U. S.

NAT. CEM.

CODED 29 apr 48 HLL
OQMG FORM 14 NOV 1946 345 MILITARY

16-50411-1

PAGE 1

10 APR 1948

m. H. J.

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 <u>Godby</u>	FIRST NAME <u>Henry</u>	MIDDLE INITIAL <u>A</u>
NUMBER AND STREET <u>Route #3</u>	CITY OR TOWN <u>Stanford</u>	COUNTY OR PROVINCE <u>Lincoln</u>
EXPRESS OFFICE (Nearest railroad passenger station) <u>Kings Mountain, Kentucky</u>	TELEGRAPH ADDRESS <u>Kings Mountain, Kentucky</u>	STATE OR TERRITORY OF U. S. A., OR COUNTRY <u>Kentucky</u>
		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 <u>Beazley & Raney</u>			
NUMBER AND STREET <u>Main Street</u>	CITY OR TOWN <u>Stanford</u> <u>07</u>	COUNTY OR PROVINCE <u>Lincoln</u>	STATE OR TERRITORY OF U. S. A., OR COUNTRY <u>Kentucky</u>
EXPRESS OFFICE (Nearest railroad passenger station) <u>Kings Mountain, Ky.</u>	TELEGRAPH ADDRESS <u>Stanford, Kentucky</u>	TELEPHONE No. <u>110J</u>	

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 <u>Godby</u>	FIRST NAME <u>Georgia</u>	MIDDLE INITIAL <u>E.</u>	RELATIONSHIP TO DECEASED <u>Mother</u>
NUMBER AND STREET <u>Route #3</u>	CITY OR TOWN <u>Stanford</u>	COUNTY OR PROVINCE <u>Lincoln</u>	STATE OR TERRITORY OF U. S. A., OR COUNTRY <u>Kentucky</u>

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

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.

Henry A. Godby (SIGNATURE OF NEXT OF KIN) Route #3 (STREET AND NUMBER)
Henry A. Godby (NAME PRINTED OR TYPED) Stanford, Kentucky (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 30th day of December

19 47, at city (or town) of Stanford, county of Lincoln, and State (or Territory or

District) of Kentucky

J. J. Reese
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

Notary Public Lincoln County, Ky.
(OFFICIAL TITLE)
my commission expires July 10, 1950

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

Pfc Perle C. Godby, 35 073 529
~~Plot XXX, Row II, Grave 278,~~
United States Military Cemetery
Margraten, Holland

5 December 1947

Mr. Henry A. Godby
Route #3
Stanford, Kentucky

Dear Mr. Godby:

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. 6.

mew

DEC 10 10 28 AM '47
D. O. M. G.
MAIL & RECORDS BRANCH

CORRESPONDENCE ACTION WORK SHEET

Send Letter to MRS. Georgia F. Gody

Address Route #3, Stanford, Kentucky

Army Serial Number 35 073 529 Rank Pvt.

Opening Paragraph: 62-1 62-2 62-3 62-4

Burial Information: 6 6A 7 8 9 10 11 12 12A 13 13A
 14 14A 14B 15 16 17 20 21 22 22B

Temp. Cem. KKK 11 258 USMC MARGRATEN Holland
 Perm. Cem. Plot Row Grave Name of Cemetery City and Country

Return of Remains: 78 79 81 82

Other Paragraphs: 23 24 26 27 28 29 30 35 36 40 41
 42 43 51 53 54 55 56 57 58 58A 60
 61 63A 63B 65 65A 65B 65C 65D 66 67 68
 68A 69 70 73 74 76 82 85

Indorsements: To AG (47 71) To Ch of Chap (48 71)
 To Other Agencies: (71)

Personal Effects: 50 64

Suspend _____ days

Copy of letter to AGO and Identification Section *

Temporary Change of Address * * Permanent Change of Address
 Buck Slip to Records Section
 Copy to Adjutant General

Dates of Letters for which Copies are necessary to AAF:

Other:

Closing Paragraph: 62-5 Regret Delay *

Letter to be dated Analyst Gary Typist Reviewer

* Note: Circle paragraph numbers and/or starred phrases that are applicable.

NAME OF L. CLASS 1

Last Name

First Name

Middle Initial

Gody
Gody
Gody

File
10 mar 47

64
QMGMR 293
Godby, Perle C.
SN 35 073 529

10 March 1947

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

Veterans Administration

Washington 25, D. C.

Gentlemen:

The inclosed letter from Mrs. Georgia E. Godby, Route #3, Stanford, Kentucky is forwarded to your office, for necessary action regarding a flag in memory of her son, the late Private Perle C. Godby.

The official records of this office show that Private Perle C. Godby, S.N. 35 073 529, Infantry, was born on 25 June 1920 and died on 7 November 1944 and that his next of kin is Gracie C. Routine, widow.

Request that this office be advised of the date that the flag is furnished.

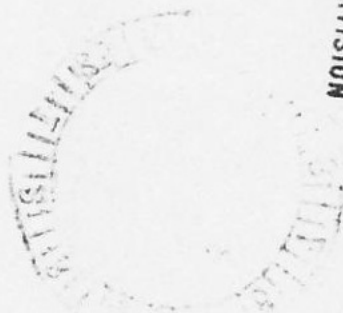
Sincerely yours,

JAMES L. PRENN
Major, MC
Memorial Division

mx

MAR 10 10 50 AM '47

O. O. M. G.
MAIL & RECORDS BRANCH



MAR 10 10 24 AM '47
MEMORIAL DIVISION

JLP
C

QMGMR 293
Godby, Perle G.
SN 35 073 529

10 March 1947

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

Mrs. Georgia E. Godby
Route #3
Stanford, Kentucky

Dear Mrs. Godby:

Your letter concerning your son, the late Private Perle G. Godby, has been received in this office.

The official Report of Burial discloses that the remains of your son were interred in Plot KKK, Row 11, Grave 258, United States Military Cemetery Margraten, Holland, located ten miles west of Aachen, Germany.

The Veterans' Administration is authorized to issue a flag of the United States to the next of kin of personnel who died overseas while in the Military or Naval Service of the United States. Therefore, a copy of your letter has been forwarded to that office for necessary action.

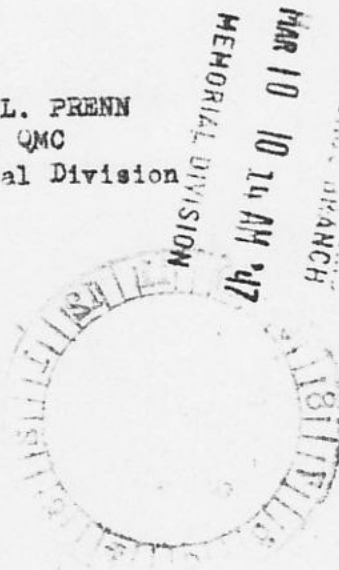
Please accept my sincere sympathy in the loss of your son.

Sincerely yours,

JAMES L. PRENN
Major, QMC
Memorial Division

MAR 10 10 50 AM '47
O. O. M. G.
MAIL & RECORDS BRANCH

EX



Stanford, Kentucky
February, 26, 1947

The Quartermaster General
War Department
Washington 25, D.C.

Dear Sir;

Would please send me a form to fill out so as I may be able to obtain a flag. My son was killed in action, November 7, 1944. The telegram reads as follows: The secretary of war desires me to express his deep regret that your son Pvt. Perlie C. Godby has been reported missing in action since Nov. in Holland, if further details or other information are received you will be promptly notified." Witsell Acting The Adjutant General.

Thanking you

Sincerely yours

Mrs Georgia Godby

(Mrs) Georgia E. Gody
Route #3
Stanford, Kentucky



*Rec'd
2/26/47
Stanford, Ky*

PERLE C. GODBY 35073529

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

1. Perle C. Godby Pfc 35073529 38th Armd Inf. Bn
(Full name of deceased) (Rank) (ASN) (Organization)
 2. State if identification tags were attached to remains, how many, and where attached One identification tag around neck of deceased.
 3. Give exact location from which disinterred, furnishing coordinates and map series used Belgium N.E. Franke Sheet 4 1st Edition Cassyck grid Coord. ~~878~~ 676042
- NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION IN WITH PERMANENT LANDMARKS.
4. Full name of cemetery (include plot, row and grave if organized cemetery) Isolated Burial
 5. Approximate or established date of death (state which and give basis for date selected) App: 7 NOV 1944 from Ltr: OCQM
 6. Approximate or established date of burial (give basis for date established) ~~10 Dec 44~~ 10 Dec 44 from Ltr OCQM
 7. Manner in which grave was marked and all information contained on the marker wooden cross w/inscribed liner, identification tag attached to cross cross marked: Perle C. Godby 35073529
 8. List personal effects found in possession of civilian or unauthorized military personnel, furnishing name and address of individual concerned None
 9. Names and addresses of all persons questioned concerning death or burial and information each furnished (contact local mayor, priest, cemetery caretaker, those responsible for burial and any other possessing important information) Information obtained from L. Dymakers Dijk 1. LAC Cappel, Holland
 10. If buried in a coffin, give description and markings of coffin Not buried in coffin
 11. Action taken Disinterred & evacuated to U.S. Mil Cem, Margraten, Holland
Disinterment approved by LEXIA 32 ETOUSA OCGM, dtd: 2 June 1945
Disinterment and *reburial/movement made by 3Co0th AM GR REG Co, APO 562, US ARMY
Date of *burial/reburial Sept 9, 1945
Place of *burial/reburial US Military Cemetery, Margraten, Holland by 603rd AM
Plot KKK Row 11 Grave 258 Gr Reg Co, APO 562, US ARMY

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

(Holland) Reg No. 734

*Cross out word not applicable

N. F. SAKER
1st Lt, OMC

350737

R.O.

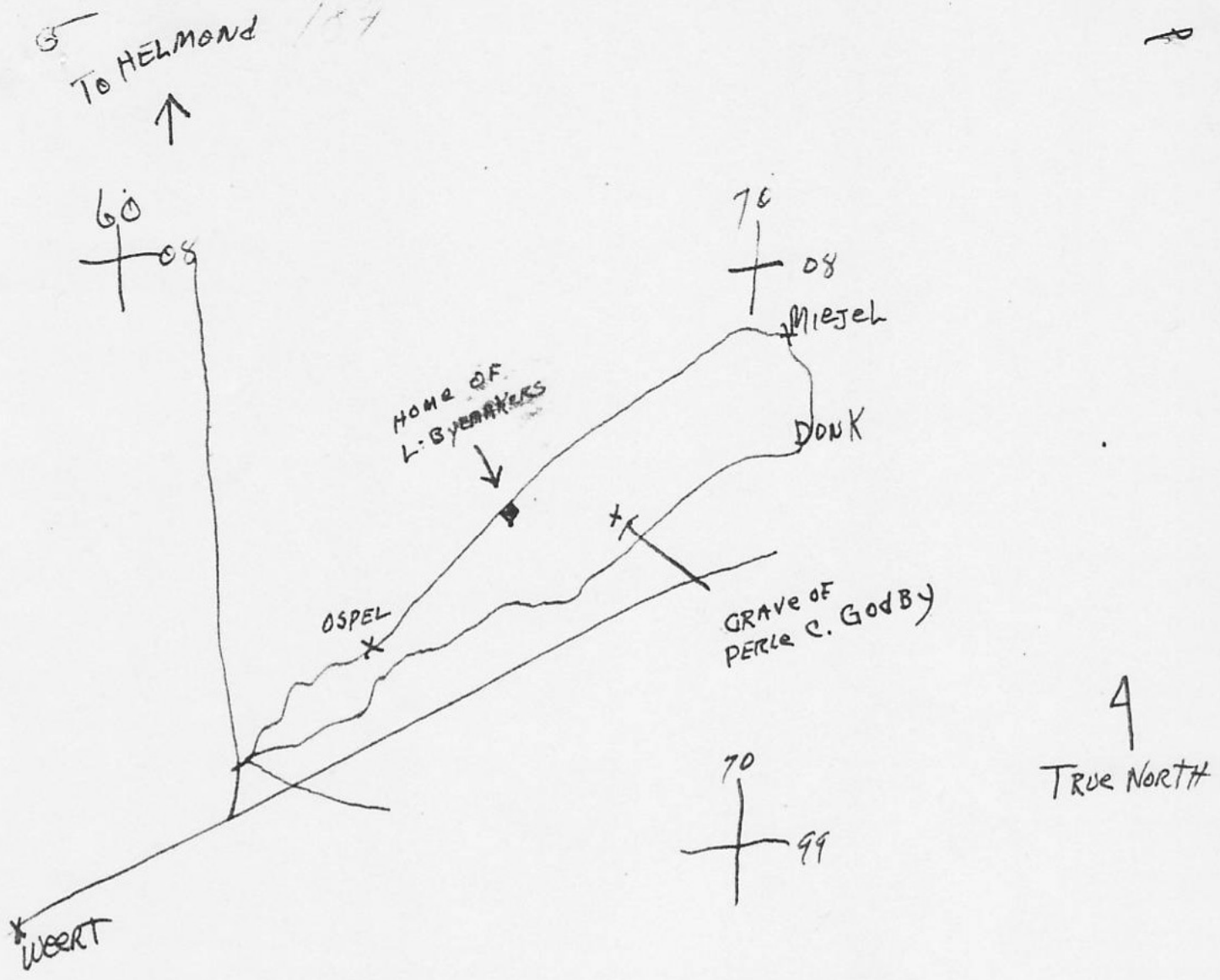
Rank

ASN

Neal S. Baker
Signature of Investigating Officer

15 JAN 1945
FILE

INCL 6



MAP REF: Belgium + N.E. FRANCE 1:100,000 SHEET 4 1ST EDITION
 MAESEYCK GRID COORD 676042

Sgt W. Israel

INCL # 17

REPORT OF BURIAL

9 Sept 1945

Date

493

GODBY

Perle

Pvt.

35073529

Last Name

First

Initial

Rank

Serial No.

38th Armd Inf, Bn

Unit

Organization

Vic. Ospel-Meijel, Holland

Est 7 Nov. 1944

KIA

Place of Death

Date of Death

Cause of Death

1100 9 Sept 1945

Barbant S. Military Cemetery Margraten, Holland VK645482

Time and Date of Burial

Name of Cemetery

Name or Coordinates of Location

258

14

KKK

Cross

Grave Number

Row Number

Plot Number

Type of Marker

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

If No Identification Tags * Per. ltr. dtd. 22 Jan, 46 (31467/0) How were remains identified? **REBURIAL**

What means of identification were buried with the body?

Previously buried in isolated grave located at 678042, Holland

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

Who is buried on:

Deceased's Right:

UNKNOWN K-1265

257

Name

Serial No.

Rank

Organization

Grave No.

Deceased's Left:

PERLE

38185716

259

Name

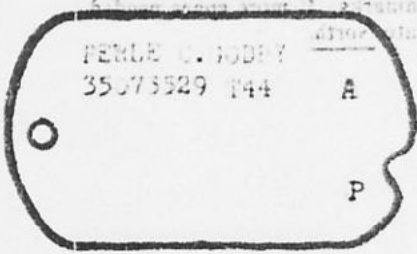
Serial No.

Rank

Organization

Grave No.

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



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

Emergency Addressee

Name

Address

Religion

PROT

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

None

Case #784 (Holl)

Evac. by 3060 QM Gr. Reg. Co.

Signature of Officer or other person reporting burial

CLEON E. WELLS 1st Lt. QMC

303rd QM Gr. Reg. Co.

Verified by G.R.S. Officer

FILE

JAN 23 1946

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

—BATTLE CASUALTY REPORT

1946 JAN 03
DATE CAS. REPORT RECEIVED
15
DATE TELEGRAM SENT
3

AG 201	NAME GODBY PERLE C ASN 35 073 529	GRADE PVT SON	
NAME AND ADDRESS OF E. A.	MRS GEORGIA E GODBY XXXXXXXXXXXXXXXXXXXX ROUTE NUMBER THREE STANFORD KENTUCKY		Letter 5 Jan 46

THE INDIVIDUAL NAMED BELOW DESIGNATED THE ABOVE PERSON AS THE ONE TO BE NOTIFIED IN CASE OF EMERGENCY AND THE OFFICIAL TELEGRAPHIC AND LETTER NOTIFICATIONS WILL BE SENT TO THIS PERSON. THE RELATIONSHIP, IF ANY, IS SHOWN BELOW. IT SHOULD BE NOTED THAT THIS PERSON IS NOT NECESSARILY THE NEXT-OF-KIN OR RELATIVE DESIGNATED TO BE PAID SIX MONTHS' PAY GRATUITY IN CASE OF DEATH.

THE SECRETARY OF WAR HAS ASKED ME TO EXPRESS HIS DEEP REGRET THAT YOUR SON

GRADE	NAME	SERIAL NUMBER	ARM OR SERVICE	REPORTING THEATRE	F OR J STATUS	SHIPMENT NUMBER
PVT	GODBY PERLE C	35073529	INF	ETO		363
TYPE OF CASUALTY		PLACE OF CASUALTY		DATE OF CASUALTY		CASUALTY CODE
KILLED IN ACTION		IN HOLLAND		DAY	MONTH	YEAR
				07	NOV	44
						1J

no Telegram - Send Letter

REMARKS: CORRECTED COPY

U PROJECT

"Finding of Death has been issued previously under Section 5, Public Law 490, 7 March 1942, as amended, showing presumed date of death as 8 November 1945. This "Report of Death", based on information received since that date, is issued in accordance with Section 9 of said Act, and its effect on prior payments and settlements is as prescribed in Section 9."

ACTION BY COMPOSITE SECTION	REPORT VERIFIED	FORM 43	AG 201 REQ.
CASUALTY BRANCH FILE ATTACHED	OR CHARGED TO		DATE
PREVIOUSLY REPORTED	NO	YES	(AS INDICATED BELOW)
FILE NO.	MESSAGE NO.	TYPE	DATE AND AREA
	0353	DED	8 Nov 45 ETO
			E. A. NOTIFIED
			8 Nov 45
FORWARDED TO	SPEC. IDEN.	C. & P.	TELEGRAM
			LETTER
			CERTIF.
			F. REL.
			CORRES.
			REPAT.
			R. & D.
			NON-DEL.
REPORT NOT VERIFIED	NO FORM 43	NO CAS. BR. FILE	CHECKED BY
			Reviewed BY

DISTRIBUTION "A" 28 COPIES DISTRIBUTION "B" COPIES

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

4610

FINDING OF DEATH OF MISSING PERSON

Pursuant to the provisions of Section 5 of the Act of 7 March 1942 (Public Law 490 77th Cong.) as amended, upon direction and delegation by The Secretary of War, The Chief, Casualty Branch, The Adjutant General's Office, finds Private Perle C. Godby, Army Serial Number 35,073,529, Infantry, to be dead. He was officially reported as missing in action as of the 7th day of November 1944. For the purposes stated in said Act, death is presumed to have occurred on the 8th day of November, 1944.

BY ORDER OF THE SECRETARY OF WAR

George F. Hebert

ADJUTANT GENERAL
CHIEF, CASUALTY BRANCH

SUMMARY OF INFORMATION

AREA European	FLYING STATUS No	JUMP STATUS No	LINE OF DUTY Yes	OWN MIS-CONDUCT No	ON DUTY STATUS Yes	ABSENCE AUTH'D
PREVIOUS REVIEWS None						
DATE OF BIRTH 25 Jun 1920	HOME ADDRESS Dayton, Ohio	DATE OF ENTRY ON CURRENT ACTIVE SERVICE 17 Mar 1944	LENGTH OF SERVICE (AS OF PRESUMED DATE OF DEATH)			
		YEARS		MONTH	DAYS	
		Under		three	years	

EMERGENCY ADDRESSEE

NAME Mrs. Georgia E. Godby	RELATIONSHIP Mother	ADDRESS Route Number Three Stanford, Kentucky
-------------------------------	------------------------	---

BENEFICIARIES

NAME * Georgia Estle Godby	RELATIONSHIP Mother	ADDRESS Route Number Three Stanford, Kentucky
NAME Henry Arnold Godby	RELATIONSHIP Father	ADDRESS Route Number Three Stanford, Kentucky

REMARKS

Distribution 56

*Records indicate soldier married to Gracie C. Routin, 31 July 1944.

Circumstances of disappearance: Soldier was last seen during a counterattack by the enemy near Neederweerterdijk, Holland.

FILE
NOV 14 1945

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

REPORT OF DEATH

DATE 9 Jan 46 ekm/3613

FULL NAME Godby, Perle C.		ARMY SERIAL NUMBER 35,073,529	GRADE Pvt.
HOME ADDRESS Dayton, Ohio		ARM OR SERVICE Inf.	DATE OF BIRTH 25 Jun 1920
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in Action		DATE OF DEATH 7 Nov 1944
STATION OF DECEASED European Area	DATE OF ENTRY ON CURRENT ACTIVE SERVICE 17 Mar 1944	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS	

EMERGENCY ADDRESSEE (Name, relationship, and address)

Mrs. Georgia E. Godby, Mother, Route Number Three, Stanford, Kentucky

BENEFICIARY (Name, relationship, and address)

Mrs. Georgia E. Godby, Mother, Same as above
 Henry Arnold Godby, Father, 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 (Specify below)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO

ADDITIONAL DATA AND/OR STATEMENT

BATTLE NON-BATTLE

*Records indicate soldier married to Gracie C. Routin, 31 July 1944.

*Finding of Death has been issued previously under Section 5, Public Law 490, 7 March 1942, as amended, showing presumed date of death as 8 November 1945. This "Report of Death", based on information received since that date, is issued in accordance with Section 9 of said Act, and its effect on prior payments and settlements is as prescribed in Section 9.

FILE
 JAN 15 1946

BY ORDER OF THE SECRETARY OF WAR

W. E. G. Bennett

ADJUTANT GENERAL

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

296,848/854

REPORT OF DEATH

DATE 9 Jan 46 ekm/3613

FULL NAME Godby, Perle C.		ARMY SERIAL NUMBER 35,073,529	GRADE Pvt.
HOME ADDRESS Dayton, Ohio		ARM OR SERVICE Inf.	DATE OF BIRTH 25 Jun 1920
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in Action		DATE OF DEATH 7 Nov 1944
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 17 Mar 1944	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS

EMERGENCY ADDRESSEE (Name, relationship, and address)
 Mrs. Georgia E. Godby, Mother, Route Number Three, Stanford, Kentucky

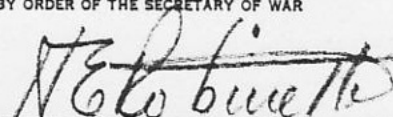
BENEFICIARY (Name, relationship, and address)
 Mrs. Georgia E. Godby, Mother, Same as above
 Henry Arnold Godby, Father, Same as above

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

ADDITIONAL DATA AND/OR STATEMENT BATTLE NON-BATTLE

*Records indicate soldier married to Gracie C. Routin, 31 July 1944.

*Finding of Death has been issued previously under Section 5, Public Law 490, 7 March 1942, as amended, showing presumed date of death as 8 November 1945. This "Report of Death", based on information received since that date, is issued in accordance with Section 9 of said Act, and its effect on prior payments and settlements is as prescribed in Section 9.

BY ORDER OF THE SECRETARY OF WAR

 ADJUTANT GENERAL

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

296848
4610
PT

FINDING OF DEATH OF MISSING PERSON

Pursuant to the provisions of Section 5 of the Act of 7 March 1942 (Public Law 490 77th Cong.) as amended, upon direction and delegation by The Secretary of War, The Chief, Casualty Branch, The Adjutant General's Office, finds Private Perle C. Godby, Army Serial Number 35,073,529, Infantry,

to be dead. He was officially reported as missing in action as of the 7th day of November 1944. For the purposes stated in said Act, death is presumed to have occurred on the 8th day of November, 1945

BY ORDER OF THE SECRETARY OF WAR

George F. Herbert

ADJUTANT GENERAL
CHIEF, CASUALTY BRANCH

SUMMARY OF INFORMATION

AREA	FLYING STATUS	JUMP STATUS	LINE OF DUTY	OWN HIS- CONDUCT	ON DUTY STATUS	ABSENCE AUTH'D
European	No	No	Yes	No	Yes	
PREVIOUS REVIEWS	None					
DATE OF BIRTH	HOME ADDRESS	DATE OF ENTRY ON CURRENT ACTIVE SERVICE	LENGTH OF SERVICE (AS OF PRESUMED DATE OF DEATH)			
25 Jun 1920	Dayton, Ohio	17 Mar 1944	YEARS	MONTH	DAYS	
			Under	three	years	

EMERGENCY ADDRESSEE

NAME	RELATIONSHIP	ADDRESS
Mrs. Georgia E. Godby	Mother	Route Number Three Stanford, Kentucky

BENEFICIARIES

NAME	RELATIONSHIP	ADDRESS
* Georgia Estle Godby	Mother	Route Number Three Stanford, Kentucky
Henry Arnold Godby	Father	Route Number Three Stanford, Kentucky

REMARKS

Distribution 56

*Records indicate soldier married to Gracie C. Routin, 31 July 1944.

Circumstances of disappearance: Soldier was last seen during a counterattack by the enemy near Neederweerderdijk, Holland.

296848

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

-BATTLE CASUALTY REPORT

NAME GODBY PERLE C	SERIAL NUMBER 35073529	GRADE PVT	ARM OR SERVICE INF	REPORTING THEATRE ETO
PLACE OF CASUALTY HOLLAND9	DATE OF CASUALTY DAY MONTH YEAR 07 NOV 44		FLYING OR JUMPING STAT 	TYPE OF CASUALTY MIA
			SHIPMENT NUMBER 247	

NAME AND ADDRESS OF EMERGENCY ADDRESSEE

THE INDIVIDUAL NAMED ABOVE DESIGNATED THE FOLLOWING PERSON AS THE ONE TO BE NOTIFIED IN CASE OF EMERGENCY, AND THE OFFICIAL TELEGRAPHIC AND LETTER NOTIFICATIONS WILL BE SENT TO THIS PERSON. THE RELATIONSHIP, IF ANY, IS SHOWN BELOW. IT SHOULD BE NOTED THAT THIS PERSON IS NOT NECESSARILY THE NEXT-OF-KIN OR RELATIVE DESIGNATED TO BE PAID SIX MONTHS' PAY GRATUITY IN CASE OF DEATH

MR.-MRS.-MISS—FIRST NAME—MIDDLE INITIAL—LAST NAME MRS GEORGIA E GODBY	RELATIONSHIP MOTHER	DATE NOTIFIED 22 NOVEMBER 1944
NO. AND NAME OF STREET—CITY—STATE ROUTE NUMBER THREE STANFORD KENTUCKY		

REMARKS:

CORRECTED COPY

rvh

ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED FORM 43 AG 201 REQ

CASUALTY BRANCH FILE ATTACHED OR CHARGED TO DATE

PREVIOUSLY REPORTED NO YES (AS INDICATED BELOW):

FILE NO.	MESSAGE NO.	TYPE	DATE AND AREA	E. A. NOTIFIED

FORWARDED TO SPEC. IDEN. TELEGRAM WOUNDED LETTER CORRES. S. R. & D. CERTIF. H. R. M. NON-DEL.

REPORT NOT VERIFIED NO FORM 43 NO CAS. BR. FILE CHECKED BY REVIEWED BY

THIS SPACE FOR USE OF MACHINE RECORDS BRANCH, A.G.O.

ACCT. AREA	CASUALTY STATUS	ORIGINAL CAS. DATE			MESSAGE NO.	LATEST CAS. DATE			REFERENCE AREA	CREW POS.	RESIDENCE		COMP.	RACE											
		DAY	MO.	YR.		DAY	MO.	YR.			STATE	COUNTY													
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

DISTRIBUTION "A" _____ COPIES

(ALL TYPES OF CASUALTIES PERTAINING TO MILITARY PERSONNEL, EXCEPT WOUNDED.)
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.

ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT
ARMY EFFECTS BUREAU
601 Hardesty Avenue
Kansas City 1, Missouri

In Reply Refer To: 296848

(S-11-3-45)
RTB:VM:ag
August 28, 1945

Mrs. Georgia E. Godby
Route #3
Stanford, Kentucky

File on

Dear Mrs. Godby:

The Army Effects Bureau is forwarding to you the following personal property, recently received here, belonging to your son, Private Perle C. Godby:

1 package and contents

My action in transmitting the property does not, of itself, vest title in you. The items are forwarded in order that you may act as gratuitous bailee in caring for them pending the return of the owner, who has been reported missing in action. In the event he later is reported a casualty, and I sincerely hope he never is, it will be necessary that the property be turned over to the person or persons legally entitled to receive it.

When delivery has been made, I shall appreciate your acknowledging receipt by signing one copy of this letter in the space provided below, and returning it to this Bureau. For your convenience, there is inclosed an addressed envelope which needs no postage.

I regret the circumstances prompting this letter, and wish to express my hope for the safe return of your son.

Yours very truly,

P. L. Koob
P. L. KOOB
1st Lt., QMC
Officer-in-Charge
SJ Branch

Incl--
Envelope

Receipt acknowledged:

Mrs. Georgia E. Godby
(Signature of Bailee)

Sept 8th 1945
(Date)

Eff. QM Form 205 (11 Apr 45)

EFFECTS INVENTORY ARMY EFFECTS BUREAU

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

DECLARED	
MISSING	X
P. O. W.	
ABANDONED	
UNKNOWN	

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

CONTAINERS ADDRESSED TO <p style="text-align: center;"><i>none</i></p>	INFORMATION <p style="text-align: center;"><i>none</i></p> <p style="text-align: center; font-size: 2em;"><i>Rechecked</i></p>
NAME AND STATUS VARIATIONS	CROSS REFERENCE

DECLASSIFIED

CHECK	REC'D BY	NUMBER	BUREAU CHECK
MONEY ORDER			TRANSMIT ORIGINAL
BOND			ORIG. REG. MAIL
TRAV. CHECK			TO G. A. O.
FOREIGN CURRENCY			MUTILATED
U. S. CURRENCY			TO ISSUING AGENCY

DATE
BANK OR PLACE OF ISSUE
PAYEE
REMITTER OR DRAWER

TALLY NO. <i>78</i>	ORIG. NO. OF PKGS. <i>1</i>	EXAMINING DATE <i>18 Aug 1945</i>	BOX NO. <i>7</i>	SHEET <i>1</i> OF <i>1</i> SHEETS
---------------------	-----------------------------	-----------------------------------	------------------	-----------------------------------

NAME <i>PEARL GODBY</i>	A. S. N. <i>4250 73529</i>
ORGANIZATION <i>Co C 32</i>	RANK <i>PVT</i> CASE NO.

WAREHOUSE SPACE	EXAMINED BY	DIARY REMOVED
PACKAGE DESCRIPTION	PACKED BY	PHOTO FILM REMOVED
WEIGHT	INSPECTED BY <i>LB</i>	MOTION PICTURE FILM REMOVED
	STORED BY	SHIPPED
		DATE

RESTRICTED

November 14, 1944
Date

SUBJECT: Inventory of Personal Effects of:

Hoelbe Pearl But 435073529
(Last Name) (First Name) (MI) (Rank) (ASN)

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

The above named individual of C. C. 32nd Army Inf Bn
(Unit)

_____ was reported MIA
(Organization) (Status-Killed, MIA,

_____ about November 7 1944
Hospitalized, etc.) (Date)

Designated Beneficiary if information readily accessible _____

INVENTORY OF EFFECTS

~~Star~~
1 Bible ✓
Pictures ✓
1 shaving kit ✓

RESTRICTED

RESTRICTED

Money in the amount of 700 has been turned into

(Name of finance officer and symbol number)

Form WDFD 38

enclosed.

1.

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.)

25 NOV 1944

Name Cecil C. Brooks

Rank & ASN 1st Lt. 0-1290713

Organization Co. C 38 AFB

Any additional pertinent information:

RESTRICTED