

INDIVIDUAL DECEASED PERSONNEL FILE

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

~~GONAS John J PVT 35300421~~
~~(Last Name) (First Name) (Initial) (Rank) (ASN)~~

Repatriated to the United States: 10 November 1947

STATION FILE

Incl # 105

FORMERLY: HENRI CHAPLAIN

RESTRICTED

REPATRIATION

INVENTORY FORM

DATE

SUBJECT: Inventory of Personal Effects of:

GONAS (LAST NAME)

John (FIRST NAME)

J. (MI)

Pvt. (RANK)

35300421 (ASN)

TO: Effects Quartermaster, Communications Zone, APO

US Army

The above named individual of

(UNIT)

(ORGANIZATION)

was reported

STATUS (KIA, MIA, Hosp. etc.)

about

(DATE)

194

Designated Beneficiary if information readily accessible

INVENTORY OF EFFECTS

One yellow metal signet ring

Inside initials: "A.M."

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

Forwarded to Personal Effects Depot

Money in the amount of

has been turned into

(NAME OF FINANCE OFFICE AND

Form WDFD 38 enclosed.

SYMBOL NUMBER)

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 forwarded to the Effects Depot

by

(RAIL, TRUCK, ETC.)

on

194

Name

Ernest C. Gaddy

Rank & ASN

ERNEST C. GADDY

CWO W-2116127

Organization

CENTRAL IDENTIFICATION POINT

Any additional pertinent information:

RESTRICTED

RETURN OF REMAINS - WORLD WAR II DEAD
CERTIFICATE OF INTERMENT EXPENSES

Date Jan 6, 1948

I Mary Gonas 3351 Reid Ave Lorain Ohio
(Name and address of person responsible for payment of interment expenses)

hereby certify that the total sum of \$280.⁰⁰ was incurred by me in connection
with the interment of the remains of the late John J. Gonas

vt. 35300421 Army

(Grade, Serial Number, & Arm of Service of Decedent)

in the Calvary Lorain Ohio
(Name of Cemetery) (County or City) (State)

Mary Gonas
(Signature)

NOTE: 1. This certificate will be completed in quintuplicate and signed by the person who engaged the receiving funeral director and is responsible for payment of his bill. It is NOT to be accomplished or signed by the funeral director.

2. Return to: Commanding Officer
Columbus General Distribution Depot
Columbus 15, Ohio
ATTN: Chief, American Graves Registration Division

1/31/48

40964

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED			
FROM US.MC.HENRI CHAPELLE BELGIUM		TO Liege Belgium (Barge Loading PT)	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER Don Luis Valenzuela RA 32870049	
SIGNATURE OF SHIPPER <i>Merle Kay</i> Capt. Merle Kay 0290506	DATE 3/10/47	SIGNATURE OF RECEIVER <i>James P Mitchell</i>	DATE 3/10/47
2. SHIPPED			
FROM Liege Belgium (Barge Loading PT)		TO Antwerp Port Pier 140	
KIND OF CONVEYANCE Barge MATADOR		NAME OF CONVOYER M/Sgt. Edward J Malloy RA 6129790	
SIGNATURE OF SHIPPER Lt. James P Mitchell 01298270	DATE 3/10/47	SIGNATURE OF RECEIVER <i>E. J. Malloy</i>	DATE 3 OCT 1947
3. SHIPPED			
FROM AGRC ANTWERP BELGIUM		TO USAT ROBERT F. BURNS	
KIND OF CONVEYANCE ZEC		NAME OF CONVOYER ELROY N. NATHAN, 1st LT. T.C.	
SIGNATURE OF SHIPPER L E Butler Lt Col Inf	DATE 5 NOV 1947	SIGNATURE OF RECEIVER <i>Elroy N. Nathan</i>	DATE NOV 1947
4. SHIPPED			
FROM USAT "ROBERT F. BURNS		TO NYPE	
KIND OF CONVEYANCE ZEC		NAME OF CONVOYER ELROY N. NATHAN, 1st LT. T.C.	
SIGNATURE OF SHIPPER ELROY N. NATHAN, 1st LT. T.C.	DATE 2 NOV 1947	SIGNATURE OF RECEIVER <i>Elroy N. Nathan</i>	DATE 11/24/47
5. SHIPPED			
FROM NYPE		TO DC 7	
KIND OF CONVEYANCE Train		NAME OF CONVOYER P.F.C. Jack R. Ducey	
SIGNATURE OF SHIPPER PORT TRANSPORTATION OFFICER	DATE 12/2/47	SIGNATURE OF RECEIVER <i>E. Ingelman 1st Lt. T.C.</i>	DATE DEC 3 1947
6. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
7. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

RECEIPT OF REMAINS

DISTRIBUTION CENTER

COLUMBUS GENERAL DISTRIBUTION DEPOT COLUMBUS 15 OHIO

ROUTINE 19 DECEMBER 1947

REMAINS CONSIGNED TO: JOHN J GLUVNA & SON

2356 ELYRIA AVENUE

LORAIN OHIO

FROM QMDCG _____ BARDEN

REMAINS OF THE LATE PVT JOHN J GONAS SERIAL NUMBER 35300421 BEING SHIPPED TO YOU ACCOMPANIED BY ESCORT S/SGT MORRIS L ARGENBRIGHT ON TRAIN NO 6 NICKEL PLATE RAILROAD LEAVING COLUMBUS OHIO 1:45 AM NINETEEN DECEMBER AND DUE TO ARRIVE LORAIN OHIO 7:18 AM RAILROAD TIME NINETEEN DECEMBER PD REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS AT STATION UPON ARRIVAL AND THAT YOU IMMEDIATELY PASS THIS INFORMATION ON TO NEXT OF KIN

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

THIS 19 DAY OF Dec MONTH, 19 47

Morris L. Argenbright
WITNESS (Escort)

Joseph J. Gluvna
CONSIGNEE

CLASS OF SERVICE

This is a full-rate Telegram or Cablegram unless its deferred character is indicated by a suitable symbol above or preceding the address.

WESTERN UNION

JOSEPH L. EGAN
PRESIDENT

531

SYMBOLS

- DL - Day Letter
- NL - Night Letter
- LC - Deferred Cable
- NLT - Cable Night Letter
- Ship Radiogram

The filing time shown in the date line on telegrams and day letters is STANDARD TIME at point of origin. Time of receipt is STANDARD TIME at point of destination

HA92 21 COLLECT=LORAIN OHIO 22 1133A

1947 NOV 22 PM 12 11

COLUMBUS GENERAL DISTRIBUTION DEPOT=

ATTN CMA AMERICAN GRAVES REGISTRATION DIV CLMBS=

351

ARRANGEMENTS WITH FUNERAL DIRECTOR TO ACCEPT REMAINS OF JOHN L GONAS HAVE BEEN MADE. V.F.W. WILL FURNISH MILITARY BURIAL HONORS=

JOHN GONAS.

14332

THE COMPANY WILL APPRECIATE SUGGESTIONS FROM ITS PATRONS CONCERNING ITS SERVICE

MESSAGEFORM

MESSAGE CENTER NO.

TRANSMITTING MEANS

CRYPTOGRAPH OR CLEAR TEXT

CALLS

STA. SER. No.

PRECEDENCE

TRANSMISSION INSTRUCTIONS

ORIGINATOR

DATE-TIME GROUP

V

NR

ACTION

INFORMATION

EXEMPT

OPERATING SIGNALS

GROUP COUNT

GR

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Originator) **BOWMAN COMMANDING GENERAL COLUMBUS**
GENERAL DISTRIBUTION DEPOT COLUMBUS OHIO

SECURITY CLASSIFICATION

UNCLASSIFIED

ACTION TO:

MR JOHN GONAS
 3351 REID AVENUE
 LORAIN OHIO
 DLR AND REPORT ANY CHARGES

PRIORITY

PRECEDENCE FOR
 ACTION INFORMATION
 PRIORITY

 ORIGINAL MESSAGE

REFERS TO ANOTHER MESSAGE
 IDENTIFICATION CLASSIFICATION

INFORMATION TO: FROM QMDCG **14332R** BARDEN

WAR DEPARTMENT WILL DELIVER REMAINS OF LATE PRIVATE

JOHN J GONAS

IN NEAR FUTURE

PD RECORDS OF THIS OFFICE INDICATE YOU WISH REMAINS DELIVERED TO

JOHN J GLUVNA & SON LORAIN OHIO

PD PLEASE INSTRUCT

FUNERAL DIRECTOR TO MAKE ARRANGEMENTS TO ACCEPT REMAINS AT RAILROAD

STATION UPON ARRIVAL PD PRIOR TO SHIPMENT FUNERAL DIRECTOR WILL BE

NOTIFIED OF RAIL ROUTING AND SCHEDULED TIME REMAINS WILL ARRIVE AT

RAILROAD STATION PD REQUEST IMMEDIATE CONFIRMATION OF ABOVE SHIPPING

INSTRUCTIONS BY TELEGRAM COLLECT TO COLUMBUS GENERAL DISTRIBUTION

DEPOT CMA ATTENTION CHIEF CMA AMERICAN GRAVES REGISTRATION DIVISION

CMA COLUMBUS OHIO PD IF YOU DESIRE MILITARY HONORS AT FUNERAL YOU

SHOULD ASK LOCAL PATRIOTIC OR VETERANS ORGANIZATION OF YOUR CHOICE

TO MAKE ARRANGEMENTS PD NECESSARY YOU INCLUDE NAME OF DECEASED IN

REPLY TELEGRAM NOTIFY THIS OFFICE OF PATRIOTIC OR VETERANS ORGANIZATION

SELECTED BY YOU TO FURNISH BURIAL HONORS

SECURITY CLASSIFICATION

UNCLASSIFIED

AUTHORIZATION

SIGNATURE

SYMBOL

ORIGINATING AGENCY
CAPT F FAPPIANO EXT 405

DATE-TIME GROUP

OFFICIAL TITLE

FRANCIS FAPPIANO
 CAPT, QMC, Asst AGR DTY

PAGE OF 1

WD AGO FORM 11-168
 15 JUN 1945

This form supersedes WD AGO Form 11-168, 23 Aug 44,
 and WD AGO Form 801, 12 Mar 43, which are obsolete.

16-45801-1 ☆ U. S. GOVERNMENT PRINTING OFFICE

GR Form A

INSPECTION CHECKLIST
(FOR USE AT DISTRIBUTION CENTER)

NAME Gonas, John J		RANK Pvt	SERIAL NUMBER 35300421
SOURCE		CONSIGNEE John J. Gluvna & Son <i>FOR HOME</i> 2356 Elyria Avenue Lorain, Ohio	
SHIPPING CASE - GENERAL APPEARANCE (CHECK ONLY DISCREPANCIES)		CONDITION OF SHIPPING CASE (CHECK ONE) <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY	
<input checked="" type="checkbox"/> FINISH (EXTERIOR)	REMARKS <i>Route to carpenter shop repair moulding then of joints & top OH Eno</i>		
<input type="checkbox"/> FINISH (INTERIOR)			
<input type="checkbox"/> HANDLES			
<input type="checkbox"/> HANDLE BOLTS			
<input type="checkbox"/> STENCILING - NAMEPLATE			
<input type="checkbox"/> HEALTH PERMIT MARKER			
<input type="checkbox"/> HEALTH PERMIT NUMBER			
CASKET - GENERAL APPEARANCE (CHECK ONLY DISCREPANCIES)		CONDITION OF CASKET (CHECK ONE) <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY	
<input type="checkbox"/> FINISH (EXTERIOR)	REMARKS <i>Cleaned Ident. tag.</i>		
<input type="checkbox"/> HANDLES AND FASTENINGS			
<input type="checkbox"/> STENCILING - NAMEPLATE			
<input type="checkbox"/> CAM LOCKS (SEALING)			
<input type="checkbox"/> ODOR OR MOISTURE			
<input type="checkbox"/>			
Routed Through			
<input type="checkbox"/> MORTUARY OPERATING ROOM		<input type="checkbox"/> MORTUARY REPAIR SHOP	
CONDITION OF REMAINS <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY		CASKET REPAIRED <input type="checkbox"/> YES <input type="checkbox"/> NO	
NECESSARY DISINFECTION (EXPLAIN)		CASKET EXCHANGED <input type="checkbox"/> YES <input type="checkbox"/> NO	
		SHIPPING CASE REPAIRED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
		SHIPPING CASE EXCHANGED <input type="checkbox"/> YES <input type="checkbox"/> NO	
		REMARKS	
TIME	DATE	SIGNATURE OF MORTICIAN	SIGNATURE OF INSPECTOR
			<i>B. J. Burgher</i>
REMARKS		1045	12/1/47
			<i>H. M. M.</i>

REQUEST FOR DISPOSITION OF REMAINS

GRADE OF DECEASED, NAME, NUMBER AND REPORTED PLACE-OF BURIAL DATE:

Pvt. John J. Gonas 300 421
 Plot B, Row 9, Grave 55,
 United States Military Cemetery
 Kansas City, Missouri

30 June 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, John Gonas *(Please indicate relationship to the deceased by placing an "X" in the proper box.)*
(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

- | | | | |
|---|----------------------------------|--|---|
| <input type="checkbox"/> WIDOW | <input type="checkbox"/> WIDOWER | <input type="checkbox"/> SON OVER 21 YEARS OLD | <input type="checkbox"/> DAUGHTER OVER 21 YEARS OLD |
| <input checked="" type="checkbox"/> FATHER | <input type="checkbox"/> MOTHER | <input type="checkbox"/> BROTHER OVER 21 YEARS OLD | <input type="checkbox"/> SISTER OVER 21 YEARS OLD |
| <input type="checkbox"/> RELATIONSHIP OTHER THAN ABOVE <i>(Specify)</i> _____ | | | |

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

Calvary Cemetery Lorain Ohio U.S.A.
(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

*Corrected Aug 47
 O/S 1947*

PAGE 1

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	FIRST NAME	MIDDLE INITIAL
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE
STATE OR TERRITORY OF U. S. A., OR COUNTRY	TELEGRAPH ADDRESS	TELEPHONE No.
EXPRESS OFFICE (Nearest railroad passenger station)		

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 John J. Glivna & Son			
NUMBER AND STREET 2356 Elyria Ave	CITY OR TOWN Lorain	COUNTY OR PROVINCE Lorain	STATE OR TERRITORY OF U. S. A., OR COUNTRY Ohio
EXPRESS OFFICE (Nearest railroad passenger station) Railway Express	TELEGRAPH ADDRESS 1124 Broadway-Lorain Ohio	TELEPHONE No. 5147	

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 Gonas	FIRST NAME Mary	MIDDLE INITIAL	RELATIONSHIP TO DECEASED Mother
NUMBER AND STREET 3351 Reid Ave	CITY OR TOWN Lorain	COUNTY OR PROVINCE Lorain	STATE OR TERRITORY OF U. S. A., OR COUNTRY Ohio

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.

John Gonas

(SIGNATURE OF NEXT OF KIN)

3351 Reid Ave

(STREET AND NUMBER)

John Gonas

(NAME PRINTED OR TYPED)

Lorain Ohio

(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 14th day of July

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

District) of Ohio

Mary C. McPhillips
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

Notary Public

MARY C. MCPHILLIPS, Notary Public
My Commission Expires April 29, 1950.

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

Pvt. John J. Gonas, 35 300 421
Plot B, Row 9, Grave 165,
United States Military Cemetery
Henri-Chapelle, Belgium

30 June 1947

Mr. John Gonas
3351 Reid Avenue
Lorain, Ohio

Dear Mr. Gonas:

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. ✓

tjh

AB

924

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

293

Pvt. John J. Gonas, 35 300 421
 Plot 8, Row 9, Grave 165,
 United States Military Cemetery
 Henri-Chapelle, Belgium

3 March 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, _____ (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
 _____ (NAME AND LOCATION OF CEMETERY)
- 3. BE RETURNED TO _____ (FOREIGN COUNTRY) THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT _____ (LOCATION OF CEMETERY SELECTED)
- 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT _____ (LOCATION OF NATIONAL CEMETERY SELECTED)
 (Please indicate if your own religious services at a location other than the selected national cemetery are desired by placing an "X" in the proper box)
 YES NO

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

File
25 June 47
25 June 47

New hi sent 30 June 47

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

LAST NAME <u>Gonas</u>	FIRST NAME <u>Mary</u>	MIDDLE INITIAL <u></u>
RELATIONSHIP TO THE DECEASED <u>Mother</u>		
NUMBER AND STREET <u>3351 Reid Ave.</u>	CITY OR TOWN <u>Lorain</u>	STATE OR COUNTRY <u>Ohio</u>

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

Margaret Grace Gonas (SIGNATURE OF NEXT OF KIN) Mar. 10, 1947 (DATE)
156 Sheridan St. (STREET AND NUMBER)
MARGARET GRACE GONAS (NAME PRINTED OR TYPED) Johnstown, Pa. (CITY AND STATE)

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

(SIGNATURE) _____ (DATE)

(NAME PRINTED OR TYPED) _____ (STREET AND NUMBER)

(CITY AND STATE)

QIGER 293
Gonas, John J.
A.S.N. 35 300 421

16 January 1947

Mrs. Margarate G. Gonas
3351 Reid Avenue
Lorain, Ohio

Dear Mrs. Gonas:

Inclosed herewith is a picture of the United States Military Cemetery Henri-Chapelle, Belgium, in which your husband, the late Private John J. Gonas, is buried.

It is my sincere hope that you may gain some solace from this view of the surroundings in which your loved one rests. As you can see, this is a place of simple dignity, neat and well cared for. Here, assured of continuous care, now rest the remains of a few of those heroic dead who fell together in the service of our country.

This cemetery will be maintained as a temporary resting place until, in accordance with the wishes of the next of kin, all remains are either placed in permanent American cemeteries overseas or returned to the Homeland for final burial.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

1 Incl
Photograph

G. A. NOREAN
Brigadier General, QMC
Assistant

sb

28

SPQYG 293
Gonos, John J.
SN 35 300 421

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

22 March 1946

Mr. Peter J. Gonos
1039 Goldstrohm Lane
Duquesne, Pennsylvania

Dear Mr. Gonos:

Your letter to The Adjutant General concerning the late Private John J. Gonos, has been referred to this office.

The official Report of Burial discloses that the remains of Private Gonos were interred in Plot 8, Row 9, Grave 165, in the United States Military Cemetery # 1, Henri-Chapelle, Belgium, located approximately seven miles southwest of Aachen, Germany, five miles northwest of Eupen and eight miles east of Liege, both in Belgium.

Please accept my sincere sympathy in your loss.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

JOSEPH R. BEGG
2d Lieut., QMC
Assistant

mbk

MAR 25 11 58 AM '46
O. O. M. G.
MAIL & RECORDS BRANCH

MEMORIAL DIVISION

MAR 25 10 58 AM '46

REGISTRATION AND
RECORDS BRANCH

JEB

HEADQUARTERS, ARMY SERVICE FORCES

MEMO ROUTING SLIP

TO THE FOLLOWING IN ORDER INDICATED:

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

1. For necessary action.

2.

gaw
John T. Winn
 Major, A. G. D.



1 Incl

FROM:	NAME	ORGANIZATION	BUILDING AND ROOM	DATE
	Casualty Branch,	Operating Composite	Section # A	3/2/46
	Family Relations Sub-Section		3613	76736

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.

Sma

1039 Goldstrohm Lane
Duquesne, Pa.
27 February 1946

Dear Sir:

Regarding the enclosed letter I am furnishing some more additional information.

The soldier was killed sometime in October or November 1944.

He spelled his name Gonas instead of Gonos.

He was with the 38 Armored Infantry Battalion, Company "C", APO 257 % PM New York, N.Y. The serial number is correct.

I would like to have the enclosed letter returned.

My original letter was a request for the location of the soldiers grave in Europe.

Yours truly,

Peter J. Gonos.

HEADQUARTERS
United States Forces
European Theater

/bb

(Rear) APO 887
16 November 1945

AG 704.02 AGC
T/4 Peter J. Gonos, 33412756
Hq. Btry. 961 FA Bn.,
APO 777, U. S. Army

Dear T/4 Gonos:

Your letter of 8 November 1945 has been received at this headquarters.

Records of this headquarters fail to indicate a Pvt. John Gonos, 35300421, as ever having been a casualty in the European Theater of Operations.

If you will furnish the Unit of which Pvt. Gonos was a member and any additional information pertaining to him, another check will be made to determine the status of this soldier.

Sincerely yours,

M. GRANO,
Captain, A. G. D.
Asst. Adjutant General

C
O
P
Y

ARMY SERVICE FORCES
TRANSMITTAL SHEET

SECURITY CLASSIFICATION (if any)

hbb/LD-863

FILE No. AGOB-C 201 Gonos, John J. (14 Jul 45)	SUBJECT : Location of burial place and return of remains		
TO—	FROM—	DATE	COMMENT No. 1

The Quartermaster General,
1501 Tempo "B"

Operations Branch, AGO
LD-863, Pentagon
Ext 2267

25 July 1945

243 Gonos, John J.

Request reply to writer of attached copy of letter,
concerning location of burial place and return of
the remains.

FOR THE ADJUTANT GENERAL:

Edward Mark
Adjutant General

1 Incl
Cpy ltr, 14 Jul 45 frm
Mrs. John Gonos, 3351 Reid Ave.,
Lorain, Ohio

C O P Y

July 14, 1945

Lorain, Ohio

The Chief of Staff
War Department
Washington, D. C.

Dear Sir:

I am appealing to you for this information.

I have written to the Chaplain and the Commanding officer of my son's outfit but to this day I have not received no answer. I have many doubts in my mind and would like to have it settled to have a peace of mind.

My son, ²⁹³Pvt. John J. Gonos 35300421, Co. C. 38 Armd Inf. Bn. was killed on Nov. 1 - 1944 in Holland the information I received was a meager one. Could you tell me more and as to where exactly he was buried. When the right time permits I would like to have his body moved to the States, if possible.

Sincerely yours,

Mrs. John Gonos
3351 Reid Avenue
Lorain, Ohio



SPCIG 293
Gonas, John J.

4 October 1945

Mrs. Margaret Gonas
3351 Reid Avenue
Lorain, Ohio

Dear Mrs. Gonas:

The War Department is most desirous that you be furnished the burial location of your husband, the late Private John J. Gonas.

The records of this office disclose that he is interred in the U. S. Military Cemetery, Henri Chapelle, Belgium, plot S, row 9, grave 165.

This cemetery is located approximately 7 miles southwest of Aachen, Germany, and is under the constant care and supervision of United States military personnel.

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

Sincerely yours,

E. E. GREGORY
Lieutenant General
The Quartermaster General

by this office

GRAVES REGISTRATION SECTION

OCT 5 9 33 AM '45

MEMORIAL DIVISION

Orig. fwd.

REPORT OF BURIAL
TM 10-630 AND AR 30-1815

51495

5 November 1944
Date 297

RESTRICTED

293 Gonas.

John

J

Pvt

35300421

Last Name		First		Initial		Rank		Serial No.	
Co. C, 38th Arm'd. Inf		BM		J		7th Arm'd. Div			
Unit		Date of Death		Organization		Cause of Death			
Unknown Holland		1 November 1944		KIA		Shrap. Perf. Neck			
Place of Death		Date of Death		Cause of Death					
5 November 1944		Henri Chapelle Cem. #1		705352					
Time and Date of Burial		Name of Cemetery		Name or Coordinates of Location		Type of Marker			
165 9		S		Cross					
Grave Number		Row Number		Plot Number					

Disposition of Identification Tags: Buried with body Yes No Attached to Marker Yes No Embossed tag
If No Identification Tags
How were remains identified?

Thru Paybook

What means of identification were buried with the body?

GRS form #1 and Embossed tag enclosed in .50 cal. shell

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

Who is buried on:

Deceased's Right:	XXXX Clark	37324542	Pfc	406th Inf	166
	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	Yammarip	32120556	Unk.	Unknown	164
	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 Unknown

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

Edwin H. Miller
EDWIN H. MILLER, 1st Lt., 406th Inf, 7th Arm'd. Div.
MAY 8 1945

RESTRICTED
Verified by G.R.S. Officer

Miller

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

REPORT OF DEATH

DATE 22 Nov 1944

FULL NAME Gonas, John J.		ARMY SERIAL NUMBER 35,300,421	GRADE mbb Pvt										
HOME ADDRESS <i>ks</i> Lorain, Ohio		ARM OR SERVICE Infantry	DATE OF BIRTH 20 Dec 11										
PLACE OF DEATH European Area		CAUSE OF DEATH Killed in action	DATE OF DEATH 1 Nov 44										
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 1 Apr 42	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS										
EMERGENCY ADDRESSES (NAME, RELATIONSHIP & ADDRESS) Mrs. Margarate G. Gonas (wife) 3351 Reid Ave., Lorain, Ohio													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Margaret Gonas (wife) Same as above John Gonas (father) Same as above Mary Gonas (mother) Same as above													
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
												X	*X

ADDITIONAL DATA AND/OR STATEMENT

*Combat Infantryman.

FILE

NOV 30 1944

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

BATTLE
 NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR

Eli S. Jowler

John T. Winn

ADJUTANT GENERAL

Am.

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

REPORT OF DEATH

DATE 22 NOV 1944

297721

FULL NAME Gonas, John J.		ARMY SERIAL NUMBER 35,300,421	GRADE mbb Pvt	
HOME ADDRESS Lorain, Ohio		ARM OR SERVICE Infantry	DATE OF BIRTH 20 Dec 11	
PLACE OF DEATH European Area		CAUSE OF DEATH Killed in action		DATE OF DEATH 1 Nov 44
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 1 Apr 42	LENGTH OF SERVICE FOR PAY PURPOSES	
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Margarate G. Gonas (wife) 3351 Reid Ave., Lorain, Ohio		<i>156 Sheridan St., Johnstown, Pa.</i>		
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Margaret Gonas (wife) Same as above John Gonas (father) Same as above Mary Gonas (mother) Same as above				
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT
YES	NO	YES	NO	YES
				NO
		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE
		YES	NO	YES
				NO
		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)
		YES	NO	YES
				NO
				X
				*X

ADDITIONAL DATA AND/OR STATEMENT

*Combat Infantryman.



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

BATTLE

NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR

Eli S. Fowler

John T. Winn

ADJUTANT GENERAL

~~XXXXXXXXXXXX~~
297721

ew
HOC/BM/ps
23 August 1948
Lu

Mrs. Margaret G. Gonas
156 Sheridan Street
Johnstown, Pennsylvania

Dear Mrs. Gonas:

Thank you for the information recently given the Army Effects Bureau in connection with the disposal of property belonging to your husband, Private John J. Gonas.

This property, consisting of one signet ring, was sent you under separate cover 19 August 1948, for disposition.

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

Sincerely yours,

H. O. CALDWELL
Effects Quartermaster

AMOUNT OF CHECK	E DISCREPANCY IN		INCLOSE VALU	5	RECIPIENT FROM					
ACCOUNT NUMBER	NAME	SERIAL NUMBER	SHIP VALUABLES	VALUABLES SHIPPED BY (clerk)	CASUALTY REPORT					
	RANK				INVENTORY					
<p>Mrs. Margaret G. Gonas</p> <p>156 Sheridan Street</p> <p>Pvt John J. Gonas</p> <p>36300421</p> <p>297721 D</p> <p>Johnstown, Pennsylvania</p>					FORM 20					
					LETTER					
					NO. & TYPE OF CONTAINER					
					ENVELOPE					
					CARTONS					
					PACKAGE					
					FOOT LOCKER					
					SPECIAL INSTRUCTIONS					
					REMOVE GI					
					SHIP BLOODSTAINED					
SHIP DAMAGED										
REMOVE BL'DSTAINED										
REMOVE DAMAGED										
FILMS REMOVED										
DIARY REMOVED										
HOC/BM/mjo'c	SUMMARY COURT DATA			DATE ACTION TAKEN	8-18-48					
DATE OF FINDING	APPLICANT			MAIL REVIEWER (initials)	<i>Sm</i>					
REMARKS					SHIPPED					
					1	FRANKED				
						EXPRESS				
						FREIGHT				
					DATE SHIPPED					AUG 19 1948
					SHIPPING CLERK					<i>CS</i>
					ROUTING					
					ACCOUNTING BRANCH					
					WAREHOUSE					
					FILE					
ORDER FOR ACTION					<i>B-L CK</i>					

EFF OM FORM 14
10 OCT 1945

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

*1- Yellow metal
signed ring
Initials "A.M."*

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

6-21-48

TALLY NO. <i>8556</i>	ORIG. NO. OF PKGS.	EXAMINING DATE <i>15 June 48</i>	BOX NO.	SHEET <i>1</i>
NAME <i>John J. GONAS</i>			A. S. N. <i>35300421</i>	OF _____ SHEETS
ORGANIZATION			RANK <i>Pvt.</i>	CASE NO.
WAREHOUSE SPACE <i>99428</i>	EXAMINED BY <i>W. Brunner</i>	DIARY REMOVED		
DESCRIPTION	WEIGHT <i>1#</i>	PHOTO FILM REMOVED		
		MOTION PICTURE FILM REMOVED		
		SHIPPED		
		INSPECTED BY <i>AK</i>	DATE <i>AUG 19 1948</i>	BY WHOM <i>ed</i>
		STORED BY		

INVENTORY FORM

DATE

SUBJECT: Inventory of Personal Effects of:

GONAS (LAST NAME)

John (FIRST NAME)

J (MI)

Pvt. (RANK)

35300421 (ASN)

TO: Effects Quartermaster, Communications Zone, APO US Army

The above named individual of (UNIT) (ORGANIZATION)

was reported STATUS (KIA, MIA, Hosp. etc.) about (DATE) 194

Designated Beneficiary if information readily accessible

INVENTORY OF EFFECTS

One yellow metal signet ring Inside band initials: "A.M."

//////////Last item//////////

Forwarded to Personal Effects Depot

Money in the amount of has been turned into (NAME OF FINANCE OFFICE AND

Form WDFD 38 enclosed. SYMBOL NUMBER)

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 forwarded to the Effects Depot

by (RAIL, TRUCK, ETC.) on 194

Name ERNEST C. GADDY Rank & ASN CWO W-2116127

Organization CENTRAL IDENTIFICATION POINT

Any additional pertinent information:

CHECKED

297721

S-28 Aug 48
HOG/LL/st
28 July 1948

Mrs. Margarate G. Gonas
3351 Reid Avenue
Lorain, Ohio

Dear Mrs. Gonas:

Reference is made to letter of the Army Effects Bureau, dated 24 June 1948, requesting information in connection with the disposal of one ring which belonged to your husband, Private John J. Gonas.


I shall appreciate a reply at your earliest convenience, as to whether you desire the property sent you.

For your convenience, there is inclosed a self-addressed envelope which requires no postage.

Sincerely yours,

1 Incl
Envelope

H. O. CALDWELL
Effects Quartermaster



SAVE



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

S-24 Jul 48
HOC/BM/ps
24 June 1948

IN REPLY REFER TO 297721

Mrs. Margarate G. Gonas
3351 Reid Avenue
Lorain, Ohio

Dear Mrs. Gonas:

The Army Effects Bureau has just received from a Graves Registration officer overseas one signet ring belonging to your husband, Private John J. Gonas.

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

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

Sincerely yours,

H. O. CALDWELL
Effects Quartermaster

1 Incl
Envelope

Mrs. Margarate G. Gonas
3351 Reid Avenue
Lorain, Ohio

Sirs:

The ring wanted for
sentimental reasons. Please
send it to the following
address.

Mrs. Margaret G. Gonas
156 Sheridan St.
Johnstown, Pa.



Done
8-11-48



ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT

601 HARDESTY AVENUE
KANSAS CITY 1, MISSOURI

IN REPLY REFER TO 2772E

GHG:HL:ms
June 25, 1945

Mrs. Margarate G. Conas
3351 Reid Avenue
Lorain, Ohio

Dear Mrs. Conas:

The Army Effects Bureau has received from overseas some more property of your husband, Private John J. Conas.

This property, contained in one carton, is being sent you for distribution. If, for some reason, it has not been received within the next thirty days, this Bureau should be informed so that tracer may be instituted.

Yours very truly,

P. L. KOOB
1st Lt. Q.M.C.
Officer-in-Charge
SJ Unit

Law

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Margaret G. Gonas
3351 Reid Avenue
Lorain, Ohio

Effects of: Pvt. John J. Gonas
Name 35,300,421
ASN 297,721 D
Case No.
Wt.

DATE 26 June 1945

GHC:HL:ms

H. Wentock

Effects Quartermaster

REMARKS:

 Inclose Bureau Check
 Acct. No.
 Amount
 Inclose "Valuables" item
 Ship "Valuables" item(s)

 Remove G.I.
 Note discrepancy in
 ~~Items removed~~
 ~~Items removed~~
 ~~Laundry removed~~

ROUTING:

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

10th

JUN 30 1945

REMARKS:

 FRANKED
 Exp. Chgs.
 Frt. Chgs.
 No. of packages

 Shipping Clerk

ARMY EFFECTS BUREAU INVENTORY

297.721

NAME John J. GORRAS RANK Pvt.

A.S.N. 3530-0421

ISSUED MISSING P.O.M. ABANDONED

TALLY NO. 8375

INV. DATE 9 June 45

ORIG. NO. OF PKGS. 1

BOX NO. 10

SHEET 1 OF 1 SHEETS

ORGANIZATION 38th A.I. Co.
7th A.D.

Belt	<input checked="" type="checkbox"/>	TOWELS & WASHCLOTHES	<input type="checkbox"/>	KNIVES
BELT MONEY (NO MONEY)	<input checked="" type="checkbox"/>	CLOTHING	<input type="checkbox"/>	BAGS, CLOTH OR TRAVEL
Cloth, wash	<input type="checkbox"/>	BRACELET IDENT.	<input type="checkbox"/>	BILDFOLD, (NO MONEY)
Coats	<input type="checkbox"/>	Brushes	<input type="checkbox"/>	Case
Footwear, Pr.	<input type="checkbox"/>	CAMERAS	<input type="checkbox"/>	Footlocker
Gloves, Pr.	<input type="checkbox"/>	Glasses	<input type="checkbox"/>	KIT, SEW, TLT, OR WRITING
Handkerchiefs	<input type="checkbox"/>	Knives	<input type="checkbox"/>	BOOKS
Headwear	<input type="checkbox"/>	Lighters	<input type="checkbox"/>	Books, Address
Jackets	<input checked="" type="checkbox"/>	<u>Miles Insig</u>	<input type="checkbox"/>	Books, Pilot Log
Overcoats	<input type="checkbox"/>	Pen, Fountain	<input type="checkbox"/>	DIARY (REMOVED FOR DUR)
Scarfs	<input type="checkbox"/>	Pencil, Mechanical	<input type="checkbox"/>	FILMS
Shirts	<input type="checkbox"/>	Pipes	<input type="checkbox"/>	Letters
Socks, Pr.	<input type="checkbox"/>	RELIGIOUS ARTICLES	<input type="checkbox"/>	Papers, Personal
Ties	<input checked="" type="checkbox"/>	RIBBONS, DECORATION	<input type="checkbox"/>	Photos
Towels	<input type="checkbox"/>	Rings	<input type="checkbox"/>	Shoe Shine Articles
Trousers, Pr.	<input type="checkbox"/>	Tobacco	<input type="checkbox"/>	SHORT SHORTS
Trunks, Pr.	<input type="checkbox"/>	Toilet Articles	<input type="checkbox"/>	SOUVENIRS
Underwear	<input type="checkbox"/>	WATCH	<input type="checkbox"/>	SOUVENIR MONEY
				Stationery
				TESTAMENTS
				U.S. MONEY (AMOUNT)

REMARKS No information requested

ATTACHMENTS Inventory & 1 grave tag

FORM #54 FORM #100

C.A.T. None

WAREHOUSE SPACE 255 STORED BY MC

INVENTORIED BY Davidson

PACKED BY CHECKED BY

WEIGHT G.I. REMOVED

DATE SHIPPED SHORTAGE ON REVERSE

 IDENT. TAGS REMOVED

 DIARY REMOVED

 LOCKED STORAGE

 LAUNDRY REMOVED

 FILM REMOVED

RESTRICTED
INVENTORY FORM

SUBJECT: Inventory of Personal Effects of:

OWAS JOHN J PVT
(Last Name) (First Name) (MI) (Rank)

TO: Effects Quartermaster, Communication Zone, APO

The above named individual of 38 ARMD INF BN 7TH ARMORED DIVISION
(Unit) (Organization)
was reported MIA about 1 NOVEMBER 1944
Status (KIA, MIA, Hosp. etc.) (Date)
Designated Beneficiary if information readily accessible NOT KNOWN

INVENTORY OF EFFECTS

- 1 HAT ✓
- 1 HANKERCHIEF ✓
- 2 TOWELS ✓
- 1 BRUSH ✓
- 1 STAMP PAD SET ✓
- 1 RUBBER STAMP ✓
- 1 ETO RIBBON ✓
- 2 COLLAR INSIGNIAS ✓

Money in the amount of NONE has been turned into _____
(Name of Finance Office)
Form WDFD 38 enclosed.
and symbol number)

NOT KNOWN
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 forwarded to the Effects Depot
by TRUCK on 19 JAN 1945.
(Rail, Truck, etc.)

Name Sam B. Plyler
Rank & ASN SAM B. PLYLER
CAPT USMC 0-4016256
Organization HEADQUARTERS

Any additional pertinent information:

me

297721

GHC:KB:mec
June 2, 1945

Mrs. Margarate G. Gonas
3351 Reid Avenue
Lorain, Ohio

Dear Mrs. Gonas:

The Army Effects Bureau has received additional property of your husband, Private John J. Gonas, consisting of funds in the amount of \$7.95. A check for this sum is inclosed.

As previously indicated, such property is forwarded for distribution in accordance with the laws of the state of the soldier's legal residence.

Sincerely,

A. G. SCHUMACHER
1st Lt. Q.M.C.
Asst. Chief, Admin. Division

1 Incl--
Check

7

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Margarate G. Gonas

3351 Reid Avenue

Lorain, Ohio

Effects of:

Name Pvt John J. Gonas

ASN 35300421

Case No. 297721 D

Wt.

DATE GHG:KB:mec
2 June 1945

Jule

Eileen Crabbie

FOR: Effects Quartermaster

REMARKS:

<input checked="" type="checkbox"/> Inclose Bureau Check	<input type="checkbox"/> Remove G.I.
Acct No. <u>102088</u>	<input type="checkbox"/> Note discrepancy in _____
Amount <u>\$7.95</u> <i>Mue</i>	<input type="checkbox"/> Films removed
<input type="checkbox"/> Inclose "Valuables" item	<input type="checkbox"/> Diary removed
<input type="checkbox"/> Ship "Valuables" item(s)	<input type="checkbox"/> Laundry removed

ROUTING:

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

78398 emh

102088

297721

June 4

45

Margarate G. Gonas

7.95

Seven and 95/100

REMARKS:

Franked _____
 Est. Exp. Chgs. _____
 Est. Frt Chgs. _____
 No. of packages _____

Shipping Clerk

ARMY EFFECTS BUREAU
INVENTORY

297,721

CASE NO.		
TYPED BY	Dorman	
DATE	5/1/45	
STATUS	Deceased	
NAME	Gonas, John J.	
A.S.N.	35300421	
RANK	Pvt.	
ORGANIZATION	Unk	
AMOUNT	\$7.95	ACCOUNT NO. 102088
LIST NO.	F-169	PAID-Check No. 78398
REMARKS		

A C C O U N T I N G I N V E N T O R Y

297,721

JRM:KB:pjj
May 3, 1945

Mrs. Margarate G. Gonas
3351 Reid Avenue
Lorain, Ohio

Dear Mrs. Gonas:

The Army Effects Bureau has received from overseas some personal effects of your husband, Private John J. Gonas.

These effects are being forwarded to you in one package.

If, by any chance, the property has not reached you at the expiration of thirty days from this date, please notify me and tracer will be instituted.

The action of this Bureau in transmitting personal effects does not, of itself, vest title in the recipient. Such property is forwarded for distribution according to the laws of the state of the soldier's legal residence.

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

Yours very truly,

P. L. KOOB
2nd Lt. Q.M.C.
Officer-in-Charge
SJ Unit

eh
5

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

Case No. 297721
Date 2 May 1945

SUBJECT: Report of transactions in disposing of the effects of

John J. Gonas late a
(Name of deceased) 35300421 (Army Serial Number)
Private who died
(Grade) Infantry (Organization, Army or Service)
on the 1 day of November 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., KCQM 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 1 May 1945, pursuant to Special Orders 228, Headquarters KCQM Depot, dated 25 September 1943, the application or affidavit of Mrs. Margaret G. Gonas 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. Margaret G. Gonas of 3351 Reid Avenue, Lorsain State of Ohio is the widow of the above-named decedent and appears to be entitled to receive his or her effects.

(Signature of Summary Court Officer)

JOHN R. MURPHY, Colonel, G.M.C.
(Name, Rank, Organization)

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mrs. Margarate G. Conas

SHIP TO:

3351 Reid Avenue

Pvt. John J. Conas

Lorain, Ohio

Effects of:

Name

35300421

ASN

297721 D

Case No.

Wt.

DATE 4 May 1945

JRM:KB:crw

Katherine Bell
FCR: Effects Quartermaster

REMARKS:

 Inclose Bureau Check
 Acct. No.
 Amount

 Inclose "Valuables" item
 Snip "Valuables" item(s)

 Remove G.I.
 Note discrepancy in
 Films removed
 Diary removed
 Laundry removed

 BILLING:

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

REMARKS:

[Handwritten signature]

 FRANKED

Franked
Est. Exp. Chgs.
Est. Frt. Chgs.
No. of packages

MAY 8 1945

[Handwritten signature]

Shipping Clerk

ARMY EFFECTS BUREAU INVENTORY

297721

NAME: John J. Jonas

A.S.N.: 353004214 RANK: Pvt.

ORGANIZATION: Co. G, 38 Army Div
7th Army Air

MISSING

P.O.W.

ABANDONED

TALLY NO. 7284

INV. DATE 18 April 45

ORIG. NO. OF PKGS. 1

BOX NO. 3

SHEET 1 OF 1 SHEETS

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

Done

REMARKS: no information checked

ATTACHMENTS: Inventory & Sub-G.I.R. Label

FORM #54: Inventory & Sub-G.I.R. Label

FORM #100: Inventory & Sub-G.I.R. Label

C.A.T. none checked

WAREHOUSE SPACE: 683

STORED BY: cm

INVENTORIED BY: Mc Connell

DATE SHIPPED: MAY 8 1945

PACKED BY: P

CHECKED BY: P

#43 OR ADDITIONAL:

WEIGHT	G.I. REMOVED
	<input checked="" type="checkbox"/> SHORTAGE ON REVERSE
	IDENT. TAGS REMOVED
	DIARY REMOVED
	LOCKED STORAGE
	LAUNDRY REMOVED
	FILM REMOVED

INVENTORY OF EFFECTS

The following listed effects
were found on Pvt
(Rank)

Gonas, John J 35300421
(Name) (ASN)
Co G 38 Armd Inf
7th Armd Division 11-1-44
(Orgn) (Date Died)

Buried at Henri Chapelle #1

and effects forwarded to
Effects QM.

Wallet w/photos ✓
Bible ✓
Knife ✓
Lighter ✓
Souv Compass ✓
Ring ✓
Pen ✓
Photo Case ✓

21 Guildens 0

5 Nov 1944
RAY GRAHAM
Major FD
SN 212-196

Harry Dubrov
HARRY DUBROV, 1ST LT, QMC