

## DISINTERMENT DIRECTIVE

408

SECTION A -  
NAME AND BURIAL LOCATION OF DECEASEDDIRECTIVE NUMBER  
1240 10256DATE  
10 07 47  
DAY MONTH YEARNAME  
MEECE GEORGE ASERIAL NUMBER  
37062490RANK  
PFCARM  
1

DATE OF DEATH

CEMETERY  
HENRI CHAPELLE EUPENDISPOSITION OF REMAINS  
1 8700 06  
CODE DIST. PT.PLOT ROW GRAVE COUNTRY  
E 8 147 BELGIUMCAUSE OF DEATH  
1

## SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE  
BENTON FUNERAL HOME  
FORDYCE, ARKANSASNAME AND ADDRESS OF NEXT OF KIN  
ETHEL N. BERRYHILL  
ROUTE #2  
TINSMAN, ARKANSAS

## SECTION C - DISINTERMENT AND IDENTIFICATION

NAME  
Meece, George A.SERIAL NUMBER  
37062490RANK  
Pfc. 5 Oct. 1944

DATE OF DEATH

DATE DISINTERRED  
29 August 1947IDENTIFICATION TAG ON  
 REMAINS  
 MARKERORGANIZATION  
CO B, 48TH ARMD INF BN  
5TH ARMD INF DIVRELIGION  
PIDENTIFICATION VERIFIED BY  
William R. Westover, I/1  
Hq. 537 Qm. Sv. Co. 149.  
NAME AND TITLE

## SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL  
UniformCONDITION OF REMAINS  
Head fractured. Body completeOTHER MEANS OF IDENTIFICATION  
NoneMINOR DISCREPANCIES  
None

REMAINS PREPARED AND PLACED IN CASKET

DATE  
29 August 1947

BY

Harris D. Nelson, Emb. Supv.

CASKET SEALED BY

Harris D. Nelson, Emb. Supv.

EMBALMER  
Harris D. Nelson, Emb. Supv.  
FOS Provisional

CASKET BOXED AND MARKED

Charles E. Hackler

SHIPPING ADDRESS VERIFIED BY

DATE  
29-8-47

BY

Clerk Rec'der

Harris D. Nelson, Emb. Supv.

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

David L. Benshoff, Capt. Inf.

SIGNATURE OF GRS INSPECTOR

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

FILE  
M.A.T.  
A. Kennedy  
14 Nov 1948

## RECORD OF CUSTODIAL TRANSFER

### 1. SHIPPED

FROM <b>U.S.M.C Henri Chapelle, Belgium</b>		TO <b>Liege, Belgium (Barge Loading Pt)</b>	
KIND OF CONVEYANCE <b>Truck</b>		NAME OF CONVOYER <b>Lt. Jure J. Valenzuela</b> R.A. 84670029	
SIGNATURE OF SHIPPER <i>[Signature]</i>	DATE <b>2/9/47</b>	SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE <b>2/9/47</b>

### 2. SHIPPED

FROM <b>Liege, Belgium (Barge Loading Pt)</b>		TO <b>Antwerp Port Pier 140</b>	
KIND OF CONVEYANCE <b>Barge Semi</b>		NAME OF CONVOYER <b>T/5 Joseph S. Jurusz</b> R.A. 38970763	
SIGNATURE OF SHIPPER <b>Capt. Paul Mc Gee</b> 0505337 M.I.B.	DATE <b>2/9/47</b>	SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE <b>5 SEP 1947</b>

### 3. SHIPPED

FROM <b>AGRC ANTWERP BELGIUM</b>		TO <b>USA 105th CONN</b>	
KIND OF CONVEYANCE <b>ZEC</b>		NAME OF CONVOYER <b>Wm C Henderson Capt T C</b>	
SIGNATURE OF SHIPPER <b>L E Butler Lt Col Inf</b>	DATE <b>4 OCT 1947</b>	SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE <b>4 OCT 1947</b>

### 4. SHIPPED

FROM <b>JOSEPH V. CONNOLLY</b>		TO <b>NYTC</b>	
KIND OF CONVEYANCE <b>JOSEPH V. CONNOLLY</b>		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>[Signature]</i>	DATE <b>25 OCT 1947</b>	SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE <b>27 OCT 1947</b>

### 5. SHIPPED

FROM <b>NYTC</b>		TO <b>D.C. #6, MEMPHIS TENN</b>	
KIND OF CONVEYANCE <b>TRAIN</b>		NAME OF CONVOYER <b>William C. [Signature] 1st Lt</b>	
SIGNATURE OF SHIPPER <b>COLONEL, T.C.</b>	DATE <b>41</b>	SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE <b>11/1/47</b>

### 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

MEMPHIS GENERAL DEPOT, MEMPHIS, TENNESSEE

ROUTINE 12 NOVEMBER 1947

REMAINS CONSIGNED TO: BENTON FUNERAL HOME  
FORDYCE, ARKANSAS

REMAINS OF THE LATE PRIVATE FIRST CLASS GEORGE A MEECE ASN 37062490 BEING SHIPPED TO YOU ACCOMPANIED BY ESCORT CORPORAL JOHN J USELMAN ON TRAIN NUMBER FIVE COTTON BELT RAILROAD LEAVING MEMPHIS EIGHT TWENTY FIVE AM FOURTEEN NOVEMBER AND DUE TO ARRIVE FORDYCE STATION ONE FORTY EIGHT PM RAILROAD TIME FOURTEEN NOVEMBER. REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS AT STATION UPON ARRIVAL. YOU ARE DIRECTED TO NOTIFY NEXT OF KIN THE CONTENTS OF THIS MESSAGE.

  
CHARLES M ODENWALDER  
CAPTAIN, QMC

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

THIS 14<sup>th</sup> DAY OF Nov. 1947  
DAY MONTH

Cpl John J. Uselman  
WITNESS (Escort)

Benton Funeral Home  
CONSIGNEE By C. M. Odenwalder

DP15 GOVT PD 78 NOV 12 1947 MEMPHIS TENN

BENTON FUNERAL HOME

FORDYCE ARK

REMAINS OF THE LATE PRIVATE FIRST CLASS GEORGE A MEECE ASN 37062490  
BEING SHIPPED TO YOU ACCOMPANIED BY ESCORT CORPORAL JOHN J USELMAN  
ON TRAIN NUMBER FIVE COTTON BELT RAILROAD LEAVING MEMPHIS EIGHT TWENTY  
FIVE AM FOURTEEN NOVEMBER AND DUE TO ARRIVE FORDYCE STATION ONE FORTY  
EIGHT PM RAILROAD TIME FOURTEEN NOVEMBER. REQUEST YOU MAKE ARRANGE-  
MENTS TO ACCEPT REMAINS AT STATION UPON ARRIVAL. YOU ARE DIRECTED TO  
NOTIFY NEXT OF KIN THE CONTENTS OF THIS MESSAGE. QMDMK 217

C M ODENWALDER CAPT QMC

WU K102 23 4 EXTRA GOVT COLLECT

FORDYCE ARK OCT 25 1947 926A

MEMPHIS GENERAL DEPOT

ATTN AMERICAN GRAVES REGISTRATION DIVN MFS  
SHIPPING INSTRUCTIONS CORRECT IN REGARD TO REMAINS OF LATE

PFC GEORGE A MEECE PER YOUR TELEGRAM OCT 24TH

ETHEL N BERRYHILL RT 2 TINSMAN ARK.

1002A

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

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Originator) **MEMPHIS GENERAL DEPOT  
MEMPHIS, TENN**

- ACTION TO:
- ETHEL N BERRYHILL
  - ROUTE #2
  - TINSMAN ARKANSAS

INFORMATION TO:

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

WAR DEPARTMENT WILL DELIVER REMAINS OF LATE PFC GEORGE A NEECE  
IN NEAR FUTURE. RECORDS OF THIS  
OFFICE INDICATE YOU WISH REMAINS DELIVERED TO BENTON FUNERAL HOME  
FORDYCE ARKANSAS. PLEASE INSTRUCT FUNERAL DIRECTOR TO MAKE ARRANGEMENTS  
TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL. PRIOR TO SHIPMENT  
FUNERAL DIRECTOR WILL BE NOTIFIED OF RAIL ROUTING AND SCHEDULED TIME  
REMAINS WILL ARRIVE AT RAILROAD STATION. REQUEST IMMEDIATE CONFIRMATION  
OF ABOVE SHIPPING INSTRUCTIONS BY TELEGRAM COLLECT TO MEMPHIS GENERAL  
DEPOT ATTENTION AMERICAN GRAVES REGISTRATION DIVISION MEMPHIS TENNESSEE.  
IF YOU DESIRE MILITARY HONORS AT FUNERAL YOU SHOULD ASK LOCAL PATRIOTIC  
OR VETERANS ORGANIZATION OF YOUR CHOICE TO MAKE ARRANGEMENTS. NECESSARY  
YOU INCLUDE NAME OF DECEASED IN REPLY TELEGRAM.

CHARLES M. ODENWALDER  
CAPTAIN, QMC

/c/

SECURITY CLASSIFICATION <b>UNCLASSIFIED</b>		AUTHORIZATION	
ORIGINATING AGENCY <b>ODENWALDER</b>		SIGNATURE <b>THOMAS V. DIXON</b>	OFFICIAL TITLE <b>Major, QMC</b>
SYMBOL <b>ODML</b>	DATE-TIME GROUP <b>0012447 SENT</b>	OFFICIAL TITLE <b>Chief, American Graves Registration Division</b>	PAGE <b>1</b> OF <b>1</b>

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

D. O. Voucher No. 3651  
Bu. Voucher No. 430

**GENERAL ACCOUNTING OFFICE PRAUDIT**  
Certified for payment in the sum of \$ \_\_\_\_\_  
Comptroller General of the United States  
By \_\_\_\_\_

**U. S. Department of the Army, Memphis General Depot**  
(Department, bureau, or establishment)  
Voucher prepared at Memphis 2, Tenn., 9 Dec 47  
(Give place and date)  
**THE UNITED STATES, Dr.,**  
To Etzel H. Berryhill  
(Payee)  
Address Route #2, Tinsman, Arkansas  
Payee's Account No. \_\_\_\_\_

PAID BY \_\_\_\_\_  
(For use of Paying Office)

No. and Date of Order	Date of Delivery or Service	Articles or Services (Enter description, item number of contract or general supply schedule, and other information deemed necessary) Terms _____ % Discount Cash _____ days	Quantity	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Brought forward from continuation sheet(s)					
	<b>12/3/47</b>	<b>Interment expense for the late George A. Neese, PFC, 37 062 490, USA as per certificate attached</b>					<b>70.00</b>

Shipped from \_\_\_\_\_ to \_\_\_\_\_ Weight \_\_\_\_\_ Government B/L No. \_\_\_\_\_ Total **70.00**

I certify that the above bill is correct and just; that payment therefor has not been received; and that except as otherwise noted all of the articles, materials, and supplies furnished under purchase order No. \_\_\_\_\_ if unmanufactured articles, materials, and supplies have been mined or produced in the United States, and if manufactured articles, materials, and supplies, they have been manufactured in the United States substantially all from articles, materials, or supplies mined, produced, or manufactured, as the case may be, in the United States; and that State or local sales taxes are not included in the amounts billed.  
(Memorandum—Do not sign)  
\*Payee (This certificate not required when a like certificate is made by payee on attached bill or bills)  
Per \_\_\_\_\_ Title \_\_\_\_\_

(Payee must NOT use this space)  
Differences \_\_\_\_\_  
Account verified; correct for \_\_\_\_\_  
(Signature or initials)

Contract No. \_\_\_\_\_ Date \_\_\_\_\_ Req. No. \_\_\_\_\_ Date \_\_\_\_\_ Invoice Rec'd \_\_\_\_\_

Pursuant to authority vested in me, I certify that the above articles were received in good condition, after due inspection, acceptance, and delivery prior to payment as required by law, or the services were performed as stated; that they were procured under the contract numbered above or the unnumbered contract attached hereto, or that they were procured without written contract, in open market, and with or without advertising, under the circumstances stated in No. \_\_\_\_\_ of "Method of or Absence of Advertising" shown on reverse hereof, and were necessary for the public service; and that the prices charged are just and reasonable and in accordance with the agreement.

† Approved for \$ **70.00** (Memorandum—Do not sign) †  
**H. A. PFANSCHAIDT**  
Fiscal Officer  
Title \_\_\_\_\_

**ACCOUNTING CLASSIFICATION (for completion by Administrative Office)**

Appropriation, limitation, or project symbol	Appropriation title	Limit'n or Proj't Amount	Appropriation Amount
<b>2112805</b>	<b>607-47 P490-07 8 99-999</b>		<b>70.00</b>

Allotment symbol	Amount	Encumbrance liquidated	COST ACCOUNT		OBJECT OF EXPENDITURE	
			Symbol	Amount	Symbol	Amount

Paid by { Check No. \_\_\_\_\_ dated \_\_\_\_\_, 19\_\_\_\_, for \$ **70.00** } on Treasurer of the United States in favor of payee named above.  
{ Cash, \$ \_\_\_\_\_, on \_\_\_\_\_, 19\_\_\_\_, \*Payee }  
(Sign original only)

\*When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be. † If the ability to certify and authority to approve are combined in one person, one signature only is necessary, otherwise the approving officer will sign in the blank space below "Approved for \$ \_\_\_\_\_", and over his official title.

Per \_\_\_\_\_  
Title \_\_\_\_\_

# CERTIFICATE

(AR 30-1830)

CLAIM VALID  
REISTRATION

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

## PART A - CIVILIAN OR PRIVATE CEMETERY

<b>A</b>			
<b>REQUEST FOR REIMBURSEMENT OF INTERMENT EXPENSES</b> (PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)			
NAME OF DECEDENT <i>793</i> <u>MEBCE, GEORGE A.</u>	GRADE <u>PTC</u>	SERIAL NUMBER <u>37 062 490</u>	COMPONENT <u>USA</u>
I certify that the sum of \$ <u>70.00</u> was paid by me from personal funds in connection with the interment of the remains of the above named decedent in the below named cemetery.			
INSERT NAME OF CEMETERY <u>Liberty Cemetery</u>	CITY OR COUNTY <u>Lallas County</u>	STATE <u>MISSISSIPPI</u>	
<b>INSTRUCTIONS TO PERSON SIGNING THIS FORM</b> 1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR. 2. Return four copies to: (Original & 3 copies) <u>Memphis General Depot</u> <u>AGR Division</u> <u>Memphis 2, Tennessee</u> 3. Type or print name underneath your signature in space marked "Signature of Claimant".	SIGNATURE OF CLAIMANT <u>Ethel N. Berryhill</u>		
	ADDRESS OF CLAIMANT (City, Street or RFD, and State) <u>Tinsman, Route # 2, MISSISSIPPI</u>		
	RELATIONSHIP TO DECEDENT <u>Mother</u>	DATE <u>December 3, 1947</u>	

## PART B - NATIONAL OR POST CEMETERY

<b>B</b>			
<b>REQUEST FOR REIMBURSEMENT OF TRANSPORTATION EXPENSES</b> (PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)			
NAME OF DECEDENT	GRADE	SERIAL NUMBER	COMPONENT
I certify that the sum of \$ _____ was paid by me from personal funds in connection with the transportation of the remains of the above named decedent from and to the following places:			
INSERT CITY OR TOWN (OR ADDRESS NOT IN A CITY OR TOWN) FROM WHICH REMAINS WERE SHIPPED	INSERT NAME AND LOCATION OF NATIONAL OR POST CEMETERY TO WHICH REMAINS WERE SHIPPED		
<b>INSTRUCTIONS TO PERSON SIGNING THIS FORM</b> 1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR. 2. Return four copies to:	SIGNATURE OF CLAIMANT		
	ADDRESS OF CLAIMANT (City, Street or RFD, and State)		
	RELATIONSHIP TO DECEDENT	DATE	



EXPLANATION OF PART A - CIVILIAN OR PRIVATE CEMETERY

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

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

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

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

EXPLANATION OF PART B - NATIONAL OR POST CEMETERY

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

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

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

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

**REQUEST FOR DISPOSITION OF REMAINS**

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

DATE:

**Pfc. George A. Mason, 37 062 490**  
**Plot E, Row 8, Grave 147,**  
**United States Military Cemetery**  
**Nouri-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**

**1, MRS. ETHEL N. BERRYHILL**

(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

**LIBERTY CEMETERY DALLAS COUNTY ARKANSAS**  
 (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**

**APR 3**

**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			
<b>BENTON FUNERAL HOME</b>			
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
	<b>FORDYCE</b>	<b>DALLAS CO,</b>	<b>ARKANSAS</b>
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS	TELEPHONE No.	
<b>FORDYCE, ARKANSAS</b>	<b>FORDYCE, ARKANSAS</b>		

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

LAST NAME	FIRST NAME	MIDDLE INITIAL	RELATIONSHIP TO DECEASED
<b>MEECE</b>	<b>ERVIN</b>	<b>W.</b>	<b>BROTHER</b>
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
<b>ROUTE # 2</b>	<b>TINSMAN</b>	<b>CALHOUN CO,</b>	<b>ARKANSAS</b>

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.

Ethel N. Berryhill  
(SIGNATURE OF NEXT OF KIN)

(STREET AND NUMBER)

Ethel N. Berryhill  
(NAME PRINTED OR TYPED)

Tinsman, Arkansas, Route #2  
(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 21st day of March

19 47, at city (or town) of Hampton, county of Calhoun, and State (or Territory or

District) of Arkansas

R. N. Lyon  
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

Notary Public  
(OFFICIAL TITLE)

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

*My Commission Expires*  
*Jan 3<sup>rd</sup> 1949.*  
PAGE 2



257  
Pfc. George A. Mace, NY 062 490  
Plot B, Row 8, Grave 147,  
United States Military Cemetery  
Henri-Chapelle, Belgium

081  
3 March 1947

Mrs. Ethel Barryhill  
Route #1  
Spokane, Arkansas

Dear Mrs. Barryhill:

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. LANKIN  
Major General  
The Quartermaster General

Enclosures

1. Pamphlet (Options)
2. Disposition Form
3. Envelope
4. Pamphlet (Cemeteries)

208

meta

QMCNR 293  
Neece, George A.  
A.S.N. 37 062 490

14 January 1947

Mrs. Ethel Berryhill  
Route 1  
Sparkman, Arkansas

Dear Mrs. Berryhill:

Inclosed herewith is a picture of the United States Military Cemetery Henri-Chapelle, Belgium, in which your son, the late Private First Class George A. Neece, 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,

G. A. HORMAN  
Brigadier General, QMC  
Assistant

1 Incl  
Photograph

QMR 314.6  
Graves Registration  
(European, U. S. Miss.)

9 December 1946

SUBJECT: Burial records

TO: Commanding Officer  
American Graves Registration Command  
European Theater Area  
APO 887, c/o Postmaster  
New York, New York

1. Request the burial reports and grave markers for the following  
decedents be changed to read as underscored:

QUARTERS: United States Military Cemetery Henri-Chapelle,  
Belgium.

<u>NAME</u>	<u>RANK</u> <u>GRADE</u>	<u>SERIAL NO.</u>	<u>PLCE</u>	<u>ROW</u>	<u>GRAVE</u>	<u>ORGANIZATION</u>
Hesse, George A.	<u>PFC</u>	37 062 490	K	8	247	<u>Co B, 48th Arm Inf</u> <u>Regt, 9th Arm Div</u>
Hiler, John A.	<u>S/SGT</u>	32 061 723	K	8	244	<u>Co H, 43th Inf</u> <u>Regt, 284th Inf Div</u>
Stallate, Raymond J.	<u>PFC</u>	33 705 964	B	4	78	<u>Med Det, 210th Inf</u> <u>Regt, 29th Inf Div</u>
Stevens, Donald G.	<u>PFC</u>	35 897 098	B	3	45	<u>Co A, 120th Inf</u> <u>Regt, 30th Inf Div</u>

2. The records of this office have been reverified with the records  
of The Adjutant General, War Department, and have been found to be correct  
as indicated above.

FOR THE QUARTERMASTER GENERAL:

jew

MARTIN G. HILBY  
Major, QMC  
Assistant

VD

REPATRIATION  
RECORDS BRANCH

NOVEMBER 22, 1918  
DATE

283

NAME MEECE, GEORGE A. PFC

SERIAL NO. 37469490

CEMETERY HENRI-CHAPELLE, BEL.

PLOT E

ROW 8

GRAVE 147

POSTER FIELD

RANK PFC

ORG

A.B.  
SPECIAL CHECKER

J.J.

File  
Dec 4 6  
V Dougherty  
Hlx



SPQYG 293

Meece, George A. 27, 062, 490

12 June 1946

Mrs. Ethel Berryhill  
Route #1  
Sparkman, Arkansas

Dear Mrs. Berryhill:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Private First Class George A. Meece, A.S.N. 37 062 490.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery, Henri-Chapelle, Belgium, plot E, row 8, grave 147.

This cemetery is located approximately seven miles southwest of Aachen, Germany, five miles northwest of Eupen and eight miles east of Liege, both in Belgium, and is under the constant care and supervision of United States military personnel.

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

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN  
Major General  
The Quartermaster General

EWZ

SEP 11 5 25 PM '46  
WAR & RECONSTRUCTION DEPT

RESTRICTED

# REPORT OF BURIAL

377

7 October 1944

TM 10-635 AND AR 30-1015

GEORGE

PRC

Meece

37662490

*Holland*  
Unknown

*Co. B 48th Central Postal Directory*

Belkrown

2<sup>TH</sup> ARMD-DIV.

5 October 1944

KIA - GSW Head

Place of Death

Date of Death

Cause of Death

1600, 7 October 1944

Henri Chapelle #1

705352

Time and Date of Burial

Name of Cemetery

Name or Coordinates of Location

147

8

Grave Number

Row Number

Plot Number

Cross  
Type of Marker

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

If No Identification Tags  
How were remains identified?

What means of identification were buried with the body?

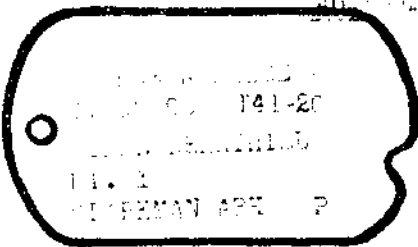
To determine Right or Left use Deceased's Right and Left.

Who is buried on:

Deceased's Right:	<u>Song</u> Name	<u>14002967</u> Serial No.	<u>Unk.</u> Rank	<u>Unknown</u> Organization	<u>148</u> Grave No.
Deceased's Left:	<u>Rakowski</u> Name	<u>36781968</u> Serial No.	<u>Pvt</u> Rank	<u>30th Div</u> Organization	<u>146</u> Grave No.

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

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



Emergency Addressee Name

Address

Religion P

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

HARRY S. BEROV, 1st Lt., GPO

Verified by G.R.S. Officer

MAR 3 1945





276,678

JEM:MH:dn  
April 27, 1945

Mrs. Ethel Berryhill  
Route # 1  
Sparkman, Arkansas

Dear Mrs. Berryhill:

The Army Effects Bureau has received from overseas some personal effects of your son, Private First Class George A. Meese.

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 us 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 son.

Yours very truly,

P. L. KOEB  
2nd Lt. Q.M.G.  
Officer-in-Charge  
SJ Unit

lh  
LS

ARMY SERVICE FORCES  
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mrs. Ethel Perryhill

SHIP TO:

Route #1

Pfc. George A. Nece

Sparkman, Arkansas

Effects of:

None

35002400

ASN

270078 D

Case No.

Wt.

DATE 24 April 1945

JRM:Wbo

*Maryann Hill*  
Sgt: Effects Quartermaster

REMARKS:

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

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

ROUTING:

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

*1 pkg*

REMARKS:

Franked \_\_\_\_\_  
Est. Exp. Chgs. \_\_\_\_\_  
Est. Pmt. Chgs. \_\_\_\_\_  
No. of packages 1

FRANKED

MAY 4 1945  
Shipping Clerk

SHEET <u>1</u> OF <u>1</u> SHEETS	ARMY EFFECTS BUREAU INVENTORY		DECEASED <input checked="" type="checkbox"/>
BOX NUMBER <u>3</u>	ORIGINAL NUMBER OF PACKAGES <u>1</u>		MISSING <input type="checkbox"/>
TALLY NUMBER <u>1979</u>	INVENTORY DATE <u>21 Nov 45</u>	CASE NUMBER <u>296,878</u>	POW <input type="checkbox"/>
EFFECTS OF <u>George A. Smith</u>			ABANDONED <input type="checkbox"/>
A.S.N. <u>37062490</u>	ORGANIZATION		RANK
PACKAGE DESCRIPTION			

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

*H-21*

REMARKS: *no information*

ATTACHMENTS: *Inventory*  
*1 sub. & 1 label*

\* Knife handle loose

G.A.T. *none*

WAREHOUSE SPACE <u>2163</u>	STORED BY <i>AA</i>	WEIGHT	GI REMOVED
INVENTORIED BY <i>PH Smith</i>	CHECKED BY <i>B</i>	DATE SHIPPED <u>MAY 4 1945</u>	SHORTAGE ON REVERSE
PACKED BY			IDENT. TAGS REMOVED
			DIARY REMOVED
			LOCKED STORAGE
			LAUNDRY REMOVED
			FILM REMOVED

**NAME**

**MKECE, G. A. 37062490**

BAY	PALLET	BOX	TALLY
		5	6978

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
P.E.BAB		

EE. QM Form 48



INVENTORY OF EFFECTS

The following listed effects  
were found on Unkn  
(Rank)

Messe, George A 37062490  
(Orgn) (Name) (ASN)

Unkn Est 10/5/44  
(Orgn) (Date Recd)

Buried at Henri Chapelle # 1

and effects forwarded to Effects Co.

- Lighter ✓
- Pen ✓
- Pencil ✓
- Knife ✓
- 4 Souv Coins ✓

*[Handwritten signature]*

*[Handwritten signature]*  
HARRY DUBROV 1ST LT QMC

1

MEECE

TIP 280

NOV 21 11/44

MEECE, GA

3706 2490

6978

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

JRM:VB:rom

Case No. 276,873

Date 7 April 1945

SUBJECT: Report of transactions in disposing of the effects of

George A. Meece, 57062490 late a  
(Name of deceased) (Army Serial Number)

Private First Class, Infantry who died  
(Grade) (Organization, Army or Service)

on the 5 day of October, 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., 223 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 5 April 1945, pursuant to Special Orders 223, Headquarters KCQM Depot, dated 25 September 1943, the application or affidavit of \_\_\_\_\_

Mrs. Ethel Berryhill 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. Ethel Berryhill of \_\_\_\_\_ (Name of person found entitled);

Route #1 Sparkman State of \_\_\_\_\_  
(Number, Street or Avenue) (City, Town or Village)

Arkansas, is the Mother of the  
(Relationship or Capacity)

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

ac  
(Signature of Summary Court Officer)

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



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

IN REPLY REFER ~~276,976~~

JEM: M: dn  
April 14, 1945

Mrs. Ethel Berryhill  
Route #1  
Sparkman, Arkansas

Dear Mrs. Berryhill:

The Army Effects Bureau has received from overseas some property of your son, Private First Class George A. Neece.

This property, consisting of a few small items, is being sent you.

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

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

Yours very truly,

P. L. HOOB  
2nd Lt. Q.M.Q.  
Officer-in-Charge  
BJ Unit

67

ARMY SERVICE FORCES  
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mrs. Ethel Lee Hill

SHIP TO:

Route #1

Sparkman, Arkansas

Effects of: Pfc. George A. Beace  
Name  
37062490  
ASN  
276,678 D  
Case No.  
W.

DATE 7 April 1945

43  
FOR: Effects Quartermaster

REMARKS: JRM:VB:mw

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

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

ROUTING:

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

REMARKS:

1 pkg  
Fracked FRANKED  
Est. Exp. Chgs. \_\_\_\_\_  
Est. Frt. Chgs. \_\_\_\_\_  
No. of packages 1

APR 19 1945

MS

Shipping Clerk

SHEET <u>1</u> SHEETS	ARMY EFFECTS BUREAU INVENTORY		DECEASED <input checked="" type="checkbox"/> MISSING <input type="checkbox"/> P O W <input type="checkbox"/> ABANDONED <input type="checkbox"/>
BOX NUMBER <u>7</u>	ORIGINAL NUMBER OF PACKAGES <u>1</u>		
TALLY NUMBER <u>69155</u>	INVENTORY DATE <u>17 Mar 45</u>	CASE NUMBER <u>276,878 Int</u>	
EFFECTS OF <u>George A. Meece</u>			RANK <u>pfca</u>
A.S.N. <u>37062490</u>	ORGANIZATION <u>48 Armd Inf Bn 7<sup>th</sup> Armd Div</u>		
PACKAGE DESCRIPTION			

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

*[Handwritten signature]*

REMARKS:	ATTACHMENTS:	FORM #54	FORM #100
<u>Ethel Berryhill</u> <u>RT#1</u> <u>Sparkman Ark.</u>		<u>1 form #54</u>	<u>1 Inv.</u> <u>1 Tag.</u>

C.A.T. <u>none</u>	<u>ML</u>	WEIGHT	GI REMOVED
WAREHOUSE SPACE <u>1793</u>	STORED BY <u>[Signature]</u>	DATE SHIPPED <u>APR 19 1945</u>	SHORTAGE ON REVERSE
INVENTORIED BY <u>Bessie Carits</u>	CHECKED BY <u>E</u>	<input checked="" type="checkbox"/> OR ADDITIONAL	IDENT. TAGS REMOVED
PACKED BY <u>[Signature]</u>			DIARY REMOVED
			LOCKED STORAGE
			LAUNDRY REMOVED
			FILM REMOVED

NAME

MEERCE, GEORGE A.

PFC

BAY	PALLET	BOX	TALLY
		7	
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
PE BAG EST. QM Form 48			

6915

RESTRICTED

20 October 1944

SUBJECT: Inventory of Personal Effects of:

Pfc. George A. Meece, 37062490

TO: Effects Quartermaster, Communication Zone.

The above named individual of 48th Armored Infantry Bn.,  
7th Armored Division was reported KIA about 5 October 1944.

Designated Beneficiary is not readily accessible.

---

Inventory of Effects

1 Billfold with Snapshots

1 Pay Record Form No. 28

Money — 35 (Thirty-Five) Francs  
Half Crown

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 20 October 1944.

*H. A. Pickford*  
H.A. PICKFORD  
1st Lt., QMC, O-1016270  
Headquarters, 7th A.D.

*File dep*



Pfc. George A. Meele 31062490

48th A.I. Bn., 7th A.D.

K I A. 5 Oct. 1944

To: Effects GM Depot

Communications Zone

TIP 2 24

6915.