

293 CLARK, JOHN W. 34192129 CPL. CAVALRY EUR. AREA (TENN.) 1145eg

293

Starbuck

11-9-58

REQUEST FOR REIMBURSEMENT OF INTERMENT OR TRANSPORTATION EXPENSES

(Read Explanation on Reverse Side before completing form)

DATE

Jan 24 1949

NAME OF DECEDENT (Last, First, Middle Initial)

297
CLARK, JOHN W.

BRANCH OF SERVICE

US ARMY

TO BE FILLED IN BY CLAIMANT

A. INTERMENT EXPENSES
(Civilian or Private Cemetery)

B. TRANSPORTATION EXPENSES
(National or Post Cemetery)

RANK OR GRADE

CPL.

SERIAL NO.

34192129

INSTRUCTIONS TO PERSONS SIGNING THIS FORM

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

FORWARD COPY
 QUARTERMASTER GENERAL WASHINGTON 25, D. C.
 ATTN: HDQRS., A. G. R. S.

CLAIM VALID-REPATRIATION FEB 9 1949 ccc

FILL IN THIS STATEMENT IF BOX "A" IS CHECKED

I certify that the sum of \$ 75.00 was paid by me from personal funds in connection with the interment of the remains of the above-named decedent in the cemetery indicated below:

NAME of cemetery: Oakland Cemetery
 CITY OR COUNTY: Trenton
 STATE: Tennessee

FILL IN THIS STATEMENT IF BOX "B" IS CHECKED

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: (City, town, or place from which remains were shipped)

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

RETURN FOUR COPIES TO

COMMANDING OFFICER
 CHICAGO QUARTERMASTER DEPOT
 1819 WEST PERSHING ROAD
 CHICAGO 9, ILLINOIS
 ATTN: AGR DIVISION

SIGNATURE OF CLAIMANT
CLAUDE D. CLARK

ADDRESS (Street number or RFD, City and State)
ROUTE #1, TRENTON, TENNESSEE

RELATIONSHIP TO DECEDENT
MOTHER

REMARKS

121314

U. S. ARMY, CHICAGO, ILL.
 MAR 23 1949
 (DO NOT SIGN THIS)
 COPY

PART A

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.

PART B

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.

WESTERN UNION

RECEIPT OF REMAINS

DELIVER AND REPORT ANY CHARGES

DISTRIBUTION CENTER 1519 W. PERSHING RD., CHICAGO 9 ILL. ROUTINE

DAY LETTER

REMAINS CONSIGNED TO:
MARION H. HOLMES
COURT SQUARE
TRENTON, TENNESSEE

REMAINS OF THE LATE CPL. JOHN W. CLARK SN-34192129
BEING SHIPPED TO YOU ACCOMPANIED BY MILITARY ESCORT. ON TRAIN NUMBER
15 GM&O RR

DUE TO ARRIVE TRENTON, TENNESSEE 11:42 PM FRIDAY 21 JANUARY 1949
REQUEST THAT YOU IMMEDIATELY INFORM THE NEXT OF KIN AND MAKE ARRANGEMENTS
TO ACCEPT REMAINS AT STATION UPON ARRIVAL. REFER TO CONTROL NUMBER 20664



R. D. BLANKENHORN
LT. COL. QMC

NAT
FILE
RECORDS ANNOTATED
DATE MAR 9 1949
NAME M. Shuford
R & R BR.

18 January 1949

lp

I, the undersigned, do hereby acknowledge receipt of the remains of the above-named deceased
this 21 (Day) day of Jan. (Month), 1949

Hafmus Bro.

Sgt. William B. French
(Witness (Escort))

by *Marion H. Holmes*
(Consignee)

JEW

DISINTERMENT DIRECTIVE

68-54

SECTION A — NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER 4650 03378		DATE 15 04 48 DAY MONTH YEAR	
NAME CLARK JOHN W				SERIAL NUMBER 34192129		RANK CPL	
CEMETERY MARGRATEN - AACHEN				ARM 1		DATE OF DEATH DAY MONTH YEAR	
PLOT RR 11				ROW 253		COUNTRY HOLLAND	
				DISPOSITION OF REMAINS 1 4800 08 06 CODE DIST. PT.		CAUSE OF DEATH 1	

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE MARION H. HOLMES COURT SQUARE TRENTON, TENNESSEE		NAME AND ADDRESS OF NEXT OF KIN CLAUDE D. CLARK (MOTHER) ROUTE 1 TRENTON, TENNESSEE	
---	--	--	--

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME JOHN W CLARK		SERIAL NUMBER 34192129		RANK CPL		DATE OF DEATH 9 SEP 48		DATE DISTINTERRED 9 SEP 48	
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER		ORGANIZATION USAGF		RELIGION P		IDENTIFICATION VERIFIED BY EDWARD E STOUT 1/LT CE NAME AND TITLE			

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL OD UNIFORM		CONDITION OF REMAINS ADVANCED DECOMPOSITION. OTHERWISE REMAINS COMPLETE.	
OTHER MEANS OF IDENTIFICATION NONE			
MINOR DISCREPANCIES 1 NONE			

REMAINS PREPARED AND PLACED IN CASKET TRANSFER BOX	
DATE SEPT 28, 1948	BY ROY T PATTERSON, EMBALMER
CASKET SEALED BY RICHARD N CONRAD, EMB. SUPV.	EMBALMER (Signature) RICHARD N CONRAD, EMB. SUPV.
CASKET BOXED AND MARKED DATE 22/11/48 BY CHARLES R CARDER CLERK RECORDER	SHIPPING ADDRESS VERIFIED BY ALL TAGS, PLATES AND MARKINGS VERIFIED BY: E.C. CRIST, MAJOR, SAC.
I hereby certify that all the foregoing operations/were conducted and accomplished under my immediate supervision and that the report above is correct. EXCEPT CASKETING ROGER N LETOURNEAU CAPT FA SIGNATURE OF GRS INSPECTOR	

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.
I CERTIFY that the typed names appearing above are the same
as the original signatures on the No. 4 copy of F-1194 concerned.

QMC FORM REV 15 MAR 46 1194 JG

John W. Long
Maj. Supv.

N.K.

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC MARGRATEN HOLLAND	TO ANTWERP PORT PIER 140
KIND OF CONVEYANCE RAIL	NAME OF CONVOYER CPL. STANLEY J DUDA RA. 32308467
SIGNATURE OF SHIPPER LLOYD L.H. MEYER 1/LT INF 01327366	DATE 16.11.48
SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE 17 NOV 1948

2. SHIPPED

FROM <i>[Signature]</i> AGRC ANTWERP BELGIUM	TO USAT BARNEY KIRSCHBAUM
KIND OF CONVEYANCE VC. 2	NAME OF CONVOYER L. B. HOWARD 1st Lt. INF.
SIGNATURE OF SHIPPER L. E. Butler Lt Col Inf	DATE 7 DEC 1948
SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE 7 DEC 1948

3. SHIPPED

FROM ROME	TO NY P.E.
KIND OF CONVEYANCE	NAME OF CONVOYER
SIGNATURE OF SHIPPER	DATE
SIGNATURE OF RECEIVER W. W. PREISCH	DATE JAN 3 1949
LIEUT. COLONEL, TC, PORT TRANSPORTATION OFFICER	

4. SHIPPED

FROM OD HILGREN	TO NY P.E.
KIND OF CONVEYANCE train	NAME OF CONVOYER L. A. BOCKSTAHLER
SIGNATURE OF SHIPPER W. W. PREISCH	DATE JAN 4 1949
SIGNATURE OF RECEIVER L. A. BOCKSTAHLER	DATE JAN 6 1949
LIEUT. COLONEL, TC, PORT TRANSPORTATION OFFICER	

5. SHIPPED

FROM 1BENLON TENNESSEE	TO Chief, Operations Br.
KIND OF CONVEYANCE	NAME OF CONVOYER
SIGNATURE OF SHIPPER MARION H. HOGNES	DATE
SIGNATURE OF RECEIVER CLAUDE D. CLARK (MOTHER)	DATE

6. SHIPPED

FROM SS2 HOFFLAND	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

WU B231 22/21 GOVT COLLECT

TRENTON TENN DEC 18 1948 345P

COMMANDING OFFICER ATTN AMN GRAVES REGISTRATION
CHICAGO QUARTERMASTER DEPOT AGRD

RECEIVED
SIGNAL CENTER
DEC 20 1 48 PM '48

CONFIRMING PREVIOUS INSTRUCTIONS REGARDING LATE CPL JOHN
W CLARK 34192129 STILL DESIRE REMAINS DELIVERED TO HOLMES
FUNERAL HOME TRENTON TENNESSEE

CLAUDE D CLARK

147P

*File
LMB*

34192129..

NO B331 SS\ST GOVT COLLECT

TRENTON TENN DEC 18 1948 345P

COMMANDING OFFICER ATTN AMN GRAVES REGISTRATION

CHICAGO QUARTERMASTER DEPOT AGRD

CONFIRMING PREVIOUS INSTRUCTIONS REGARDING LATE CPL JOHN

W CLARK, 34191219 STILL DESIRE REMAINS DELIVERED TO HOLMES

FUNERAL HOME TRENTON TENNESSEE



CLAUDE D CLARK

34191219..

DEC 20 1 48 PM '48

MESSAGEFORM		MESSAGE CENTER NO.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT	
CALLS V	STA. SER. No. NR	PRECEDENCE DAY LETTER	TRANSMISSION INSTRUCTIONS	ORIGINATOR	DATE-TIME GROUP
ACTION	INFORMATION	EXEMPT	OPERATING SIGNALS	GROUP COUNT GR	
SPACE ABOVE FOR SIGNAL CENTER ONLY					
FROM: (Originator) AGR DIV., CHICAGO QUARTERMASTER DEPOT 1819 W. PERSHING RD., CHICAGO, ILL.			SECURITY CLASSIFICATION		
ACTION TO: <ul style="list-style-type: none"> CLAUDE D. CLARK ROUTE 1 TRENTON, TENNESSEE 			DELIVER & REPORT ANY CHARGES PRECEDENCE FOR INFORMATION <input type="checkbox"/> ORIGINAL MESSAGE <input checked="" type="checkbox"/> REFERS TO ANOTHER MESSAGE IDENTIFICATION CLASSIFICATION		
INFORMATION TO:					
WE HAVE BEEN ADVISED REMAINS OF THE LATE CPL. JOHN W. CLARK ARE ENROUTE TO THE UNITED STATES. OUR RECORDS INDICATE YOU WISE REMAINS DELIVERED TO MARION H. HOLMES, COURT SQUARE, TRENTON, TENNESSEE WITHIN 48 HOURS AFTER RECEIPT OF THIS MESSAGE PLEASE CONFIRM YOUR ORIGINAL INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS AND FURNISH YOUR CORRECT MAILING ADDRESS BY TELEGRAM COLLECT TO COMMANDING OFFICER CHICAGO QUARTERMASTER DEPOT AGRD 1819 WEST PERSHING ROAD CHICAGO ILLINOIS. REPLY IS NECESSARY WITHIN THIS PERIOD SINCE IT WILL NOT BE POSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF 48 HOURS. WHILE DELIVERY OF THE REMAINS WILL BE MADE AS SOON AS PRACTICABLE AFTER RECEIPT FACTORS BEYOND OUR CONTROL MAY DELAY DELIVERY OF REMAINS FOR SEVERAL WEEKS. HOWEVER AS SOON AS REMAINS ARE RECEIVED HERE AND IT IS POSSIBLE TO SCHEDULE THEM FOR DELIVERY YOUR FUNERAL DIRECTOR WILL BE NOTIFIED BY TELEGRAM OF RAILROAD ROUTING AND SCHEDULED TIME REMAINS WILL ARRIVE AT RAILROAD STATION. ALSO HE WILL BE REQUESTED TO FURNISH YOU THIS INFORMATION SO THAT YOU MAY COMPLETE FUNERAL ARRANGEMENTS. THIS TELEGRAM WILL BE SENT AT LEAST 3 DAYS PRIOR TO ACTUAL SHIPMENT FROM THIS DISTRIBUTION CENTER. PLEASE INSTRUCT FUNERAL DIRECTOR TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL. REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. IF YOU DESIRE MILITARY HONORS AT FUNERAL YOU SHOULD ASK ANY LOCAL PATRIOTIC OR VETERANS ORGANIZATION TO MAKE ARRANGEMENTS. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. IN REPLY TELEGRAM REFER TO CONTROL					
NUMBER 20664		AND FULL NAME OF DECEASED.			
			R. D. BLANKENHORN LT. COL. QMC		
WESTERN UNION		REV. 4E-1			
SECURITY CLASSIFICATION			AUTHORIZATION		
ORIGINATING AGENCY			SIGNATURE		
SYMBOL	DATE-TIME GROUP DEC 17 1948	OFFICIAL TITLE Major, QMC-Chief, Adm. Br.	PAGE OF		

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

Cpl John W. Clark, 34 192 129
Plot RR, Row 11, Grave 253,
United States Military Cemetery
Margraten, Holland

3 December 1947

DO NOT WRITE ABOVE THIS LINE

A		C	
B		D	

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, Mrs. Claude D. Clark (Please indicate relationship to the deceased by placing an "X" in the proper box.)
(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

- WIDOW WIDOWER SON OVER 21 YEARS OLD DAUGHTER OVER 21 YEARS OLD
- FATHER MOTHER BROTHER OVER 21 YEARS OLD SISTER OVER 21 YEARS OLD
- RELATIONSHIP OTHER THAN ABOVE (Specify) _____

HAVING FAMILIARIZED MYSELF WITH THE OPTIONS WHICH HAVE BEEN MADE AVAILABLE TO ME WITH RESPECT TO THE FINAL RESTING PLACE OF THE DECEASED DESIGNATED ABOVE, NOW DO DECLARE THAT IT IS MY DESIRE THAT THE REMAINS: (Please place an "X" in the box opposite the option you have selected.)

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

Oakland Cemetery-Trenton, Tennessee
(NAME AND LOCATION OF CEMETERY)

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

- 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT _____
(LOCATION OF NATIONAL CEMETERY SELECTED)
(Please indicate if your own religious services at a location other than the selected national cemetery are desired by placing an "X" in the proper box)
 YES NO

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

None

DDproc.

10101010

Accepted
31 Mar 48
Ruppel

CODED

24/4/48 Binzer

OQMG FORM 14 NOV 1946 345 MILITARY

16-50411-1

2 APR

PAGE 1

PART II—RELINQUISHMENT OF DISPOSITION AUTHORITY

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

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

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

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

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

PART III

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

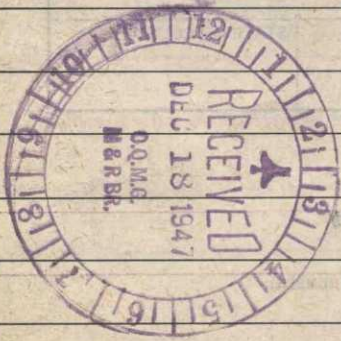
THIS IS TO NOTIFY YOU THAT I AM NOT THE NEXT OF KIN AUTHORIZED TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED NAMED ON PAGE 1 OF THIS FORM. THE FOLLOWING PERSON, TO THE BEST OF MY KNOWLEDGE, IS THE NEXT OF KIN TO WHOM THIS FORM SHOULD BE DIRECTED.

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

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

ADDITIONAL REMARKS AND INSTRUCTIONS

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



Cpl John W. Clark, 34 192 129
Plot RR, Row 11, Grave 253,
United States Military Cemetery
Margraten, Holland

3 December 1947

Mrs. Claude D. Clark
Route #1
Trenton, Tennessee

Dear Mrs. Clark:

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

8 Incls.

Elc

gmk

Dec 6 2 54 PM '47
U.S. ARMY
RECORDS DIV.

CORRESPONDENCE ACTION SHEET

Mr. Miss. Mrs. Claude D. Clarke Mother
 Addressee: Rural Route #1 Relationship
 State Trenton, Tennessee Date letter '47
 City, State

Cemetery Temporary: _____
 Permanent: _____
 Plot Row Gr Cem. Name or No. City Country

PARAGRAPHS (sequence)

--- ADDITIONAL --- DATA --- MODIFICATIONS ---

165-A

~~108-A~~ ~~Begin with: If you wish to have your son's remains interred in a private cemetery, the Government etc~~

~~108-A~~

166-E

LS

Decedent:

Clark, John W. 34192129
 Last First Initial Rank ASN

reinterred
 \$29/47
[Signature]

Analyst Typist Reviewer

Modifications

OKed 17298

July 28, -47.

Dear Sir

Last now I got a letter from you ~~at~~ The War Department asking where I wanted my son John W Clark a S N 34192129 who got killed in Germany Apr 25, 1945 brought home or buried ~~over there~~ I answered it and said I wanted him brought home it stated at The Government's expense

I answered it and got a letter from The government saying Jan 7-1946 that they would send him at The Government's expense

I noticed in The Readers Digest to day where I understood that I had to pay the expenses for him to be brought back

I am a widow and just have a little farm of 9 1/2 acres and am 64 years old (don't) not able to work and if the government bring him back at their expense I will have to let him stay over there

I have the papers saying they would bring him at The government's expense.

Please let me hear from you soon

The boys Mother

I have 2 boys one is married Mrs. Claude D. Clark, and the ~~other~~ other one is not at home. Trenton, N.J. 17298
either one has not a place. R.R. No. 1. Tenn.

July 28-47



Faint, illegible handwriting on lined paper, possibly bleed-through from the reverse side.

QMCNR 293
Clark, John W.
S.N. 34 192 129

7 January 1946

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

Mrs. Claude D. Clark
Rural Route #1
Trenton, Tennessee

Dear Mrs. Clark:

Your letter concerning your son, the late Corporal John W. Clark, has been received in this office.

The War Department has now been authorized to remove the remains of our honored dead, at Government expense, to the final resting place which next of kin may designate.

When the necessary verification of records has been completed, a "Letter of Inquiry -- Return of World War II Dead" will be mailed to you. The response to this letter will constitute a formal expression of your detailed desires as next of kin. Until you receive this letter of inquiry, therefore, it will not be necessary for you to communicate with this office regarding this subject, unless you desire to report any change of address. The necessity for complete coordination of movement in many parts of the world makes it impossible, at this time, to estimate when the letter will be mailed. Every effort, however, will be made to shorten the time between now and the date of mailing and your desires will be acted upon with a minimum of delay.

A notation has been made on the records of this office of your desire to have the remains of your son returned to the U. S. for final interment.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

JAMES L. PRENN
Major, QMC
Assistant

Jan 7 3 16 PM '46
MAIL & RECORDS BRANCH

RECORDS SECTION AND
MAIL BRANCH
JAN 7 2 15 PM '46
MEMORIAL DIVISION

mm
MWS

B
JLP

Trenton
Tenn

Dear Sir

Now the first I got a letter from you about my son ²⁹³ John
 W Clark was killed in Germany on April 25th 1943 and
 was buried over there and you all was going to send him
 over him to the chest of him to bury him he has two
 girls living in Jackson Tennessee. But him and his
 wife had parted when the girls were little and they
 dont remember much about them and if I could
 get him buried in our Cemetery I would be proud
 our people are buried at Trenton Tennessee. I have
 got his insurance and all of his belongings after
 he died. I would have answered the letter before
 now but some thought it did not require any answer
 but I thought it did and I decided to write about it
 I hope I can hear from you soon as to what you all
 will do about it.

Sincerely yours

Mrs Claude D. Clark (His Mother)
Trenton.

R.R. No. 1

Tenn.

REGISTRATION AND
RECORDS BRANCH

JAN 2 2 57 PM '47

MEMORIAL



QMGMR 314.6
 American Graves Registration
 (European Area) *u s misc.*

21 November 1946

SUBJECT: Burial Records *Cor.*

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, interred at the United States Military Cemetery, Margraten, Holland, be changed to read as underscored:

NAME	RANK GRADE	SERIAL NO.	DATE OF DEATH	ORGAN.	PLOY	ROW	GRAVE
Baker, Leland O.	<u>2/Lt</u>	0 758 285	<u>8 May 44</u>	<u>539th Sq</u> <u>98th Abn Gp</u>	X	9	223
Clark, Henry C.	<u>Pfc.</u>	34 601 447	<u>27 Mar 45</u>	<u>Med Det</u> <u>315 Inf Regt</u> <u>79th Inf Div</u>	Z	11	269
Clark, Jesse J.	<u>Pfc</u>	38 525 766	<u>10 Apr 45</u>	<u>Co "B"</u> <u>314 Inf Regt</u> <u>79 Inf Div.</u>	BB	1	18
<u>293</u> Clark, John W.	<u>Cpl</u>	34 192 129	<u>25 Apr 45</u>	<u>Trp 87th BR</u> <u>Cavl Recon Sq. Meez.</u> <u>7th Armd Div.</u>		11	255

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:

mas

MARTIN G. RILEY
 Major, QMC
 Assistant

VD

REPatriation RECORDS BRANCH

13 Nov 1946
DATE

NAME CLARK JOHN W. CPL.

SERIAL NO 34 192 129

CITY MARGRATEN HOLLAND.

PLOT RR

ROW 11

GRAVE 253

LETTER FIELD

Correct Records to Read

Org.

Date of Death 25 Apr. 45

M. Baker
SPECIAL CHECKER

[Handwritten signatures and scribbles]

1 November 1946

Mrs. Claude D. Clark
Route #1
Trenton, Tennessee

Dear Mrs. Clark:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Corporal John W. Clark, A.S.N. 34 192 129.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Margraten, Holland, plot RR, row 11, grave 253. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

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

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

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

jpa

NOV 11 1946
MAIL & RECORDS BRANCH

fyk

CORRECTIONS AND ADDITIONS TO BURIAL REPORT AS TAKEN FROM AG CASUALTY CARD

NAME _____

RANK _____

ASN _____

ORGANIZATION 87 CAU RCN MECZ

DATE OF DEATH _____

PLACE OF DEATH _____

CAUSE OF DEATH _____

J.A.
(Signature)

File
12-5-45
GB

RESTRICTED

GRAVES REGISTRATION
FORM No. 1
(Revised 1 Sept. 1945)

REPORT OF BURIAL

82

JUN 24 1945

Date

Clark John W.

Cpl.

34192129

Last Name

First

Initial

Rank

Serial No.

Unknown *87 CAV. RCN SQ MEZ* *Unknown* *7 Arm'd Div*

44th Evac. Hosp. Nordhausen, Germany 25 A pr. 45 Bat. Concussion

Place of Death

Date of Death

Cause of Death

1400 25 JUN 1945 U.S. Mil. Cem. #1 Margraten, Holland. VK 645482

Time and Date of Burial

253

11

RR

Wooden Cross

Grave Number

Row Number

Plot Number

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?

REBURIAL

What means of identification were buried with the body? *Previously buried in Eisenach #1 Cemetery*

Plot B Row 11 Grave 253

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

Who is buried on:

Deceased's Right:

Drummond, Gettes T. 34241842

252

Name

Serial No.

Rank

Organization

Grave No.

Deceased's Left:

Rodriguez, Tony 38217262

254

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:

JOHN W CLARK
34192129 T42-43 AI
MRS C D CLARK
RT 1
TRENTON TENN

Emergency Addressee

Name

Address

Religion

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

H. Shackelford
H. SHACKELFORD
1st Lt, QMC
O-1596803
G. R. O.

Edwin H. Miller
EDWIN H. MILLER
1st Lt, QMC
O-1591314
G. R. O.

Disintering Officer:

Reintering Officer:

Signature of Officer or other person reporting burial

Verified by G.R.S. Officer

RESTRICTED

RESTRICTED

GRAVE REGISTRATION
FORM NO. 1
Revised 1 Sept. 1953

IF-DECEASED UNIDENTIFIED

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

John Clark

Concussion

Weight:

Laundry Marks:

Unknown

Color of Hair:

Number of Rifle:

Attn Evac. Hosp. Woburn Mass.

Race:

Is Tooth Chart Attached?

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

Wooden Cross

Left Hand

Attached to Marker Yes No

Position of Identification Tags: Buried with body Yes No

Right Hand
How were remains identified?

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

1

2

3

TOOTH CHART

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

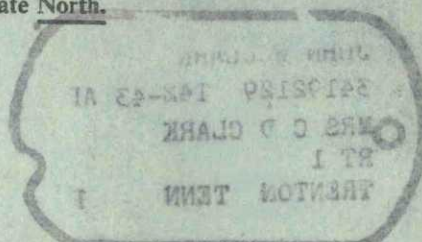
Upper	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Lower																

Indicate: missing natural teeth by X; crowns by O; fillings by □; Bridges by ○; linking anchor teeth; replacements by artificial teeth X

Characteristics:

Other Data:

Name: _____
 Address: _____
 Religion: _____
 Signature of Officer or other authorized person: _____
 Verified by O.D. Officer: _____



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

Disturbing Officer:

Reintering Officer:

Left Hand

Right Hand

Thumb

Thumb

Deceased's Left

Deceased's Right

RESTRICTED

GRAVES REGISTRATION
FORM No. 1
(Revised 1 Sept. 1943)

RESTRICTED

REPORT OF BURIAL

27 Apr 45

TM 10-630 AND AR 30-1815

93 474
Clark
Unknown

IF DECEASED UNIDENTIFIED
John W. Clark
Cpl 34192129
Serial No.

Unit: 44th Evac Hosp Nordhausen, Germany
Organization: Unknown
Date of Death: 25 Apr 45
Cause of Death: Concussion

Place of Death: 1400 27 Apr 45
Date of Death: Eisenach #1
Cause of Death: H 842-709

Time and Date of Burial: 253 11
Grave Number: 253
Row Number: 11
Name of Cemetery: B
Plot Number: B
Name or Coordinates of Location: Perm
Type of Marker: Perm

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

If No Identification Tags
How were remains identified?
Paybook
Soc Sec Card
ETO Card

What means of identification were buried with the body?
Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc.

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

Who is buried on:	Drummond, Gettes T.	34241842		252
Deceased's Right:	Name	Serial No.	Rank	Grave No.
Deceased's Left:	Rodriquez, Tony	38217262		254
	Name	Serial No.	Rank	Grave No.

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

JOHN W CLARK
34192129 T42-43AB
MRS C D CLARK
RT 1
TRENTON TENN P

Emergency Addressee _____ Name _____
Address _____
Religion _____

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

Signature of Officer or other person reporting burial

H. SHACKELFORD
LI, QMC
1595803
G.R.O.

Verified by G.R.S. Officer

66
RESTRICTED

REPORT OF BURIAL

IF DECEASED UNIDENTIFIED

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

Height: _____
Weight: _____
Color of Eyes: _____
Color of Hair: _____
Race: _____

Laundry Marks: _____
Number of Rifle: _____
Wear Glasses? _____
Is Tooth Chart Attached? _____

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

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

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

Who is buried on:
Deceased's Right: _____
Deceased's Left: _____

Date: 27 Apr 45

Serial No: 3418183

Organization: CONGRESSION

Case of Death: H 843-709

Name or Coordinates of Location: FORM

Type of Marker: No

Left Hand: 2

Right Hand: 2

Thumb: 354

TOOTH CHART

Indicate: missing natural teeth by x; crowns by C; fillings by □; Bridges by ○; linking anchor teeth; replacements by artificial teeth X

Upper	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
Lower		8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8

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

Signature or Name, Rank and if possible Organization of person furnishing above Data when other than official reporting burial: _____

Emergency Address: _____

Address: _____

Religion: _____

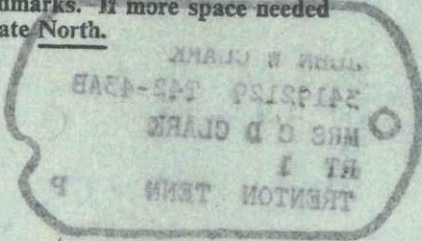
List only Personal Effects Found on Body and disposition of same: _____

Characteristics: _____

Other Data: _____

Verified by G.S. Officer: _____

Signature of Officer or other person reporting burial: _____



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

REPORT OF DEATH

DATE 8 Jun 45

FULL NAME Clark, John W. <i>293 Clark, John W</i>		ARMY SERIAL NUMBER 34192129	GRADE Cpl.
HOME ADDRESS Trenton, Tenn.		ARM OR SERVICE Cavalry	DATE OF BIRTH 17 May 13
PLACE OF DEATH European Area	CAUSE OF DEATH Vehicle Accident.		DATE OF DEATH 25 Apr 45.
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 10 Mar 42	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS over 3 yrs.

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)

Mrs. Claude D. Clark, mother, Rt. #1, Trenton, Tenn.

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)

Mrs. Kathleen Fullington, wife, (Divorced) 31 Gonzalez Court, Pensacola, Fla.
 Mrs. Claude D. Clark, mother, Rt. #1, Trenton, Tenn.
 Mr. Clifton C. Clark, brother, Rt. #1, Trenton, Tenn.

INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
X		X			X	X					X		

ADDITIONAL DATA AND/OR STATEMENT

BATTLE NON-BATTLE

Evidence of death rec'd in WD 17 May 45.

The individual named in this report of death is held by the War Department to have been in a beleaguered status from Dec. 4, 1942, including Dec. 22 (Sec. 14, Public Law 490) and thereafter in a missing in action status until and subsequent to 7 May 42 and until such absence was terminated 2 May 43, when evidence considered sufficient to establish the fact of death was received by the Secretary of War.

FILE
 JUN 15 1945

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

BY ORDER OF THE SECRETARY OF WAR
James W. Reinhardt
 ADJUTANT GENERAL

WD AGO FORM 52-1
 1 FEBRUARY 1945

THIS FORM SUPERSEDES WD AGO FORM 52-1, 1 DECEMBER 1944,
 WHICH MAY BE USED UNTIL EXISTING STOCKS ARE EXHAUSTED.

533312 *PK*

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

DATE 8 Jun 45

REPORT OF DEATH

FULL NAME Clark, John W.		ARMY SERIAL NUMBER 34192129	GRADE Cpl.
HOME ADDRESS Trenton, Tenn.		ARM OR SERVICE Cavalry	DATE OF BIRTH 17 Mar 13
PLACE OF DEATH European Area	CAUSE OF DEATH Vehicle Accident.		DATE OF DEATH 25 Apr 45.
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 10 Mar 42	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS per 3 yrs.
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Claude D. Clark, mother, Rt. #1, Trenton, Tenn.			
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Kathleen Fullington, wife, (Divorced) 31 Gonzalez Court, Pensacola, Fla. Mrs. Claude D. Clark, mother, Rt. #1, Trenton, Tenn. Mr. Clifton C. Clark, brother, Rt. #1, Trenton, Tenn.			
INVESTIGATION MADE?		IN LINE OF DUTY	OWN MISCONDUCT
YES	NO	YES	NO
X		X	X
WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE	IN FLYING PAY STATUS
YES	NO	YES	NO
X			X
OTHER PAY STATUS (SPECIFY BELOW)			
YES	NO		

ADDITIONAL DATA AND/OR STATEMENT

 BATTLE NON-BATTLE

Evidence of death rec'd in WD 17 May 45.

The individual named in this report of death is held by the War Dept. to have been in a beleaguered status from 8 Dec. 41 to and including 5 May 42 (Sec. 14, Public Law 490) and absent in a missing in action status on and subsequent to 7 May 42 and until such absence was terminated on 8 May 45, when evidence considered sufficient to establish the fact of death was received by the Secretary of War.

COPIES FURNISHED:

S. G. O.	F. B. I.	F. O., U. S. A.
S. O. C. M. G.	O. F. D.	ARMY EFFECTS BUREAU
G. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 301 FILE

BY ORDER OF THE SECRETARY OF WAR

James W. Reinhart
ADJUTANT GENERAL

WD AGO FORM 52-1
1 FEBRUARY 1945THIS FORM SUPERSEDES WD AGO FORM 52-1, 1 DECEMBER 1944,
WHICH MAY BE USED UNTIL EXISTING STOCKS ARE EXHAUSTED.

533312

RTB:JS:sh
September 20, 1945

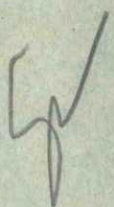
Dear Mrs. Clark:

This refers to your recent inquiry concerning the personal effects of your son, Corporal John W. Clark.

As The Adjutant General, Washington 25, D.C., has jurisdiction over the award of medals, you may contact that official for the information desired.

Yours very truly,

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



1

31

Sept 11-45

533, 312

Dear Sir

ju

I recieved some of my Sons things this morn
John W. Clark he was Cpl. He had ~~won~~ a Bronze
Star medal and the Purple Heart but I did not
get them but they may come to you later on
if they do you can send them by the same address
Thanks. Mrs Claude D. Clark.

Trenton
N.J. ju

R.R. no. 1

This was his address.

Cpl John W. Clark 34192129

Troop E. 81st Cav. Reg. Sqdn.

R.P. 2570 P.M.

New York.

Big
ch



KANSAS CITY, MO.

SEP 13 1945

[Faint, illegible handwritten text, likely bleed-through from the reverse side of the paper.]



ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT

601 HARDESTY AVENUE
KANSAS CITY 1, MISSOURI

RTB:WA:am
September 6, 1945

533312

IN REPLY REFER TO _____

Mrs. Claude D. Clark
Route #1
Trenton, Tennessee

Dear Mrs. Clark:

The Army Effects Bureau has received some additional property of your son, Corporal John W. Clark.

These effects, contained in one package, are being forwarded to you. If delivery is not made within thirty days from this date, please notify me so that tracer action may be instituted.

As previously indicated, personal property is transmitted by this Bureau for distribution according to the laws of the state of the soldier's legal residence.

Sincerely yours,

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

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Effects of:

Name Cpl. John W. Clark
ASN 34192129
Case No. 533312 D
Wt.

Mrs. Claude D. Clark
Route #1
Trenton, Tennessee

*file
gh*

DATE 6 September 1945
RTB:WA:am

FOR: 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.

REMARKS

Ship damaged property

Franked _____ **SEP 10 1945**
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____
No. of packages _____

Shipping Clerk *mt*

ATTACHMENTS	EFFECTS INVENTORY ARMY EFFECTS BUREAU	STATUS
<input checked="" type="checkbox"/> INBOUND INVENTORY	<i>533,312</i>	<input checked="" type="checkbox"/> DECEASED
<input checked="" type="checkbox"/> G. R. OR SUB GR LABEL		<input type="checkbox"/> MISSING
<input checked="" 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"/> UNKNOWN

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

CONTAINERS ADDRESSED TO	INFORMATION
<p style="font-size: 2em; color: purple; transform: rotate(-90deg); position: absolute; left: -50px; top: 50px;">DAMAGED</p> <p style="font-size: 1.5em; color: blue;">none</p> <p style="font-size: 1.5em; color: blue;">div 9-1-45</p>	<p style="font-size: 1.5em; color: blue;">Mrs. Claude D. Clark. (M)</p> <p style="font-size: 1.5em; color: blue;">Route #1</p> <p style="font-size: 1.5em; color: blue;">Trenton, Tenn.</p>
NAME AND STATUS VARIATIONS	CROSS REFERENCE

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

TALLY NO. <i>387</i>	ORIG. NO. OF PKGS. <i>1</i>	EXAMINING DATE <i>22-Aug-45</i>	BOX NO. <i>24</i>	SHEET OF <i>1</i> SHEETS
NAME <i>John W. Clark</i>			A. S. N. <i>34192129</i>	
ORGANIZATION			RANK <i>Cpl</i> CASE NO.	
WAREHOUSE SPACE <i>363</i>		EXAMINED BY <i>Brayles</i>		DIARY REMOVED
PACKAGE DESCRIPTION <i>#1 pkg</i>		PACKED BY <i>Berry</i>		PHOTO FILM REMOVED
WEIGHT		INSPECTED BY <i>M.P.O.</i>		MOTION PICTURE FILM REMOVED
		STORED BY <i>RC</i>		SHIPPED
			DATE SEP 10 1945	
			BY WHOM <i>MA</i>	

ADDITIONAL REMARKS

REMOVALS (other than G.I.)

DAMAGES (List type of damage-extent)

watch not in running condition

SHORTAGES

U. S. GOV'T CHECK SHORT

*100 Belg.
300 French
40 mark.
Jan 38.
911-275*

NUMBER

DATE

SYMBOL

AMOUNT

I certify that the above items were not in the containers inventoried by me.

Braybe
INVENTORY CLERK

Nolan
SUPERVISOR

G. I. REMOVED

NAME CLARK, JOHN W 2129

BAY	PALLET	BOX	TALLY
	3	24	387

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
GRB		

Serial No. 34192129 Name CLARK, JOHN W.
 Grade _____ Rank _____
 Organization _____
 Address _____
 Nearest Relative _____
 Address _____
 Killed in Action _____ Died of Disease _____
 Date EST 25 APRIL 1945 Hospital 44th EVAC.
 Battle Area _____ Information _____
 Place of Burial FISENACH No. 1
 Point of Coordination _____
 Description of Body _____
 Members Missing _____

Signed _____

253-B

Box No. Am 1

RESTRICTED

Eisenach # 1 B 253

INVENTORY FORM

27 APR 45

DATE

SUBJECT: Inventory of Personal Effects of:

Clark

John

W.

Cpl.

34192129

(LAST NAME)

(FIRST NAME)

(MI)

(RANK)

(ASN)

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

The above named individual of Unknown

(UNIT)

(ORGANIZATION)

was reported buried

STATUS (KIA, MIA, Hosp. etc.)

about

27 Apr 45

(DATE)

1944.

Designated Beneficiary if information readily accessible

Unk

- 1 wrist watch ✓
- 1 billfold ✓
- pictures ✓
- cards ✓
- souvenir money ✓

INVENTORY OF EFFECTS

100 Belg.
300 French
40 Marks

J. C. WINDHAM, MAJOR, F.D.
FINANCE OFFICER, SN 211-275

Money in the amount of above has been turned into

(NAME OF FINANCE OFFICE AND

Form WDFD 38 enclosed.

SYMBOL NUMBER)

Unk

NAME 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 1944.

(RAIL, TRUCK, ETC.)

Name

S. HERMAN

Rank & ASN

Lt, QMC

Organization

O-587315

G. R. O.

Any additional pertinent information:

533312

ETB:JS:sh
August 29, 1945

Dear Mrs. Clark:

This refers to your recent inquiry concerning the personal effects of your son, Corporal John W. Clark.

1

I am inclosing a check for \$12.33 which is the only property belonging to him received here to date.

58

The transmittal of funds by this Bureau does not, of itself, vest title in the recipient. Such property is forwarded for distribution according to the laws of the state of decedent's legal residence.

70

It is probable that additional effects will reach this Bureau at a later date. As it is my intention to forward any such property to you immediately upon arrival here, I ask that you please notify us in the event there is any change in your address within the next few months.

39

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

23

Yours very truly,

1 Incl--
Check

C. B. QUINN
2nd Lt., QMC
Chief, Files Branch

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Claude D. Clark

R. R. #1

Trenton, Tennessee

Effects of:

Name Cpl. John W. Clark

ASN 34192129

Case No. 533312 D

Wt.

DATE 29 August 1945

[Handwritten signature]

[Handwritten initials]

FOR: Effects Quartermaster

REMARKS:

X Inclose Bureau Check
Acct. No. 153902
Amount \$12.33
Inclose "Valuables" item
Ship "Valuables" item(s)

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

134822 n1

ROUTING:

153902

533312

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

1 September

45

Claude D. Clark

12.33

Twelve and 33/100

corrected copy attached

REMARKS

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

Shipping Clerk

134822 ~~hmc~~ *ml*

153902

134822

533312

September 1

45

Mrs. Claude D. Clark

12.33

Twelve and 33/100

ARMY EFFECTS BU
ACCOUNTING INVENTORY

CASE NO.

~~121~~
533319

TYPED BY

lc

DATE

8-4-45

STATUS

NAME

John W. Clark ✓

A.S.N.

34192129 ✓

RANK

Cpl.

ORGANIZATION

CONSIGNOR

2*290

file
ph

AMOUNT

12.33

ACCOUNT NO.

153907 Mr.

PAID-Check No. 134822 23

LIST NO.

2-268

CHECK DESCRIPTION:
INCLUDED IN ONE U.S. TREASURER'S CHECK
NEGOTIABLE BY EQM

* 529

DATED

6 June 1945

SYMBOL

212-379

AMOUNT

\$8,686.45

REMARKS:

payable to all

after Transmittal to Section File

Cpl. John W. Clark. 34192.129 Cavalry.

533,312

gh ... su

INQUIRY CLERK

Aug 18-45

Dear Sir,

My Son John Watson Clark died in Germany April 25-1945 by a vehicle accident and I have not received any of his things watch or any thing else I noticed in a pamphlet I got from the War department that they would be sent to the Army Effects ~~near~~ at Kansas City, Mo and they would send them to the nearest kin and I am his mother all of his business is addressed to me hoping I will hear from you soon if you have received his things

My address is

Mrs Claude D. Clark.

Trenton,

R. R. No. 1.

Tenn.

4105
CITY MO.
AUG 21 1945