

DISINTERMENT DIRECTIVE

1021

1	SECTION A — NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER 3508 01871		DATE 15 01 48 DAY MONTH YEAR	
	NAME GREEN J B				SERIAL NUMBER 38287200		RANK PFC	
CEMETERY BLOSVILLE - CARENTAN				ARM 1		DATE OF DEATH DAY MONTH YEAR 1 8500 10 CODE DIST. PT.		
PLOT D	ROW 1	GRAVE 4	COUNTRY FRANCE			CAUSE OF DEATH 1		

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE COTTEN-BRATTON FUNERAL HOME WEATHERFORD, TEXAS	NAME AND ADDRESS OF NEXT OF KIN WILLIAM C. GREEN (FATHER) 401 EAST JOSEPHINE STREET WEATHERFORD, TEXAS
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SECTION C — DISINTERMENT AND IDENTIFICATION

NAME GREEN, J.B.	SERIAL NUMBER 38287200	RANK Pfc	DATE OF DEATH UNK	DATE DISTINTERRED 27 JAN 48
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	ORGANIZATION USAGF	RELIGION UTD	IDENTIFICATION VERIFIED BY T.G. MURRAY, Capt., QMC NAME AND TITLE	

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Uniform - mattress cover.	CONDITION OF REMAINS Advanced decomposition
OTHER MEANS OF IDENTIFICATION Full name and serial number found in undershirt	
MINOR DISCREPANCIES None	

REMAINS PREPARED AND PLACED IN CASKET	
DATE 1 MAR 48	BY Garrett J. Burke
CASKET SEALED BY Garrett J. Burke	EMBALMER (Signature) Garrett J. Burke
CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY Charles J. Missigman
DATE 1 MAR 48	BY James L. Lamm

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

JOHN PARYOK, JR., 1/Lt., FA.
SIGNATURE OF GRS INSPECTOR

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

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC, Biosville		TO Casketing Point A. Cherbourg	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER Truck	
SIGNATURE OF SHIPPER <i>W T Dailey</i> W.T. DAILEY, Capt., QMC	DATE 18 FEB 48	SIGNATURE OF RECEIVER <i>E N Ciampo</i> E.N. CIAMPO, 1/Lt., FA	DATE 18 FEB 48

2. SHIPPED

FROM Casketing Point A, Cherbourg		TO Port Unit, Cherbourg	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>E N Ciampo</i> E.N. CIAMPO, 1/Lt., FA	DATE	SIGNATURE OF RECEIVER <i>John E Hendry Jr</i> JOHN E. HENDRY, JR, MAJOR, CAC	DATE

3. SHIPPED

FROM CHERBOURG PORT UNIT		TO NYPE	
KIND OF CONVEYANCE USNS LAWRENCE VICTORY		NAME OF CONVOYER JOSEPH J. CARROLL 1st Lt. TC.	
SIGNATURE OF SHIPPER JOHN E. HENDRY JR. MAJ. CAC.	DATE 26 April 1948	SIGNATURE OF RECEIVER <i>Prof J Carroll</i>	DATE APR 26 1948

4. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>Dragoth</i>	DATE	SIGNATURE OF RECEIVER <i>for James L McKinnon</i> JAMES L. McKINNON COLONEL, T. C.	DATE MAY 7 - 1948

5. SHIPPED PORT TRANSPORTATION OFFICER

FROM <i>nype</i> <i>from</i>		TO <i>Det 10</i>	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>James L. McKinnon</i> JAMES L. McKINNON COLONEL, T. C.	DATE MAY 13 1948	SIGNATURE OF RECEIVER <i>H C Saunders</i> H.C. SAUNDERS CAPT., QMC	DATE MAY 16 1948

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

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

13

Pfc J. B. Green, 38 267 200
Plot D, Row 1, Grave 4,
United States Military Cemetery
Bloisville, France

9 September 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, WILLIAM C. GREEN

(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

OAKLIN CEMETARY, WEATHERFORD, TEXAS

(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 WEATHERFORD, TEXAS

(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.)

CORRECT

16 FEB 1948

OQMG FORM 14 NOV 1946 345 MILITARY

16-50411-1

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
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS		TELEPHONE No.

OR
I, AS THE NEXT OF KIN, DO FURTHER DECLARE THAT I DESIRE THE REMAINS TO BE SENT TO THE FOLLOWING FUNERAL DIRECTOR WHO HAS AGREED TO RECEIVE THEM:

FULL NAME OF FUNERAL DIRECTOR			
COTTEN-BRATTON FUNERAL HOME			
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
	WEATHERFORD,	PARKER	TEXAS
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS		TELEPHONE No.
WEATHERFORD TEXAS	WEATHERFORD, TEXAS		23

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
Green	Annie	Bell	Mother
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
401 East Josephine Street,	Weatherford,	Parker	Texas

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.

William C. Green
(SIGNATURE OF NEXT OF KIN)

401 East Josephine Street
(STREET AND NUMBER)

WILLIAM C. GREEN
(NAME PRINTED OR TYPED)

Weatherford, Texas
(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 22 day of October,

19 47, at city (or town) of Weatherford, county of Parker, and State (or Territory or District) of Texas

Ross Robertson
Ross Robertson
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

Notary Public in and for Parker Co. Texas
(OFFICIAL TITLE)

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

PART I—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 Mr. William C. Green Father, 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)
_____	_____
(NAME PRINTED OR TYPED)	(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 I 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)
_____	_____
(NAME PRINTED OR TYPED)	(CITY AND STATE)

ADDITIONAL REMARKS AND INSTRUCTION

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



Page 1 of 1
Date: _____
Time: _____
Location: _____

Room or Entry to be _____
Entry No. _____
Name of _____
Room No. _____
Room Name _____
Room No. _____
Room Name _____

Room No.	Room Name	Room No.	Room Name
1	Room 1	2	Room 2
3	Room 3	4	Room 4
5	Room 5	6	Room 6
7	Room 7	8	Room 8
9	Room 9	10	Room 10
11	Room 11	12	Room 12
13	Room 13	14	Room 14
15	Room 15	16	Room 16
17	Room 17	18	Room 18
19	Room 19	20	Room 20
21	Room 21	22	Room 22
23	Room 23	24	Room 24
25	Room 25	26	Room 26
27	Room 27	28	Room 28
29	Room 29	30	Room 30
31	Room 31	32	Room 32
33	Room 33	34	Room 34
35	Room 35	36	Room 36
37	Room 37	38	Room 38
39	Room 39	40	Room 40
41	Room 41	42	Room 42
43	Room 43	44	Room 44
45	Room 45	46	Room 46
47	Room 47	48	Room 48
49	Room 49	50	Room 50
51	Room 51	52	Room 52
53	Room 53	54	Room 54
55	Room 55	56	Room 56
57	Room 57	58	Room 58
59	Room 59	60	Room 60
61	Room 61	62	Room 62
63	Room 63	64	Room 64
65	Room 65	66	Room 66
67	Room 67	68	Room 68
69	Room 69	70	Room 70
71	Room 71	72	Room 72
73	Room 73	74	Room 74
75	Room 75	76	Room 76
77	Room 77	78	Room 78
79	Room 79	80	Room 80
81	Room 81	82	Room 82
83	Room 83	84	Room 84
85	Room 85	86	Room 86
87	Room 87	88	Room 88
89	Room 89	90	Room 90
91	Room 91	92	Room 92
93	Room 93	94	Room 94
95	Room 95	96	Room 96
97	Room 97	98	Room 98
99	Room 99	100	Room 100

135,617
BX

ATTACHMENTS		EFFECTS INVENTORY		STATUS	
X	INBOUND INVENTORY	ARMY EFFECTS BUREAU		DECEASED	X
	G. R. OR SUB GR LABEL			MISSING	
	WILL OR POWER OF ATTY.			P. O. W.	
X	TALLY IN FORM 43			ABANDONED	
				UNKNOWN	

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

CONTAINERS ADDRESSED TO	INFORMATION
None	Mother Mrs. Anna. B. Green Weatherford, Texas
NAME AND STATUS VARIATIONS	CROSS REFERENCE

DAMAGED

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			MUTILATED
U. S. CURRENCY			TO ISSUING AGENCY
		BANK OR PLACE OF ISSUE	
		PAYEE	
		REMITTER OR DRAWER	

TALLY NO. 6159	ORIG. NO. OF PKGS. 1	EXAMINING DATE 15-Sept-45	BOX NO.	SHEET 1 OF 1 SHEETS
NAME J. B. GREEN			A. S. N. 38287200	
ORGANIZATION Co. F. 401st Glider Inf			RANK Pfc.	CASE NO.
WAREHOUSE SPACE 738	EXAMINED BY Ried	DIARY REMOVED		
PACKAGE DESCRIPTION	PACKED BY Joyce	PHOTO FILM REMOVED		
WEIGHT	INSPECTED BY	MOTION PICTURE FILM REMOVED		
		SHIPPED		
		DATE SEP 28 1945	BY WHOM	

ADDITIONAL REMARKS

REMOVALS (other than G.I.)

DAMAGES (List type of damage-extent)

1 Pn. gloves badly worn
1 money belt rust
stained

SHORTAGES

U. S. GOV'T CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

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

INVENTORY CLERK

SUPERVISOR

G. I. REMOVED

EFFECTS INVENTORY

ARMY EFFECTS BUREAU

☒ INBOUND INVENTORY
☐ G. R. OR SUB GR LABEL
☐ WILL OR POWER OF ATTY.
☒ TALLY IN FORM 43

MISSING
 P. O. W.
 ABANDONED
 UNKNOWN

<input checked="" type="checkbox"/> BAGS, CLOTH OR TRAVEL	<input type="checkbox"/> BELT	<input type="checkbox"/> OVERCOATS
<input checked="" 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 checked="" type="checkbox"/> CAMERAS	<input type="checkbox"/> CLOTH, WASH	<input type="checkbox"/> PIPES
<input checked="" type="checkbox"/> CLOTHING	<input type="checkbox"/> COATS	<input type="checkbox"/> RINGS
<input type="checkbox"/> MISC. ARTICLES	<input type="checkbox"/> FOOTLOCKER	<input type="checkbox"/> SCARFS
<input type="checkbox"/> RELIGIOUS ARTICLES	<input type="checkbox"/> FOOTWEAR, PR.	<input type="checkbox"/> SHIRTS
<input checked="" type="checkbox"/> RIBBONS, DECORATION	<input type="checkbox"/> GLASSES	<input type="checkbox"/> SOCKS, PR.
<input checked="" type="checkbox"/> SHORT SNORTER	<input type="checkbox"/> GLOVES, PR.	<input type="checkbox"/> STATIONERY
<input checked="" type="checkbox"/> SOUVENIR MONEY	<input type="checkbox"/> HANDKERCHIEFS	<input type="checkbox"/> TIES
<input checked="" type="checkbox"/> SOUVENIRS	<input type="checkbox"/> HEADWEAR	<input type="checkbox"/> TOBACCO
<input checked="" type="checkbox"/> TESTAMENTS	<input type="checkbox"/> JACKETS	<input type="checkbox"/> TOILET ARTICLES
<input checked="" type="checkbox"/> TOWELS & WASHCLOTHS	<input type="checkbox"/> KITS	<input type="checkbox"/> TOWELS
<input checked="" type="checkbox"/> U. S. MONEY (AMOUNT)	<input type="checkbox"/> KNIVES	<input type="checkbox"/> TROUSERS, PR.
<input type="checkbox"/> WATCH	<input type="checkbox"/> LETTERS	<input type="checkbox"/> TRUNKS, PR.
<input type="checkbox"/> WINGS	<input type="checkbox"/> LIGHTERS	<input type="checkbox"/> UNDERWEAR

CONTAINERS ADDRESSED TO

None

INFORMATION

Mother
 Mrs. Anna. B. Green
 Weatherford, Texas

NAME AND STATUS VARIATIONS

CROSS REFERENCE

DAMAGED

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. 6159 ORIG. NO. OF PKGS. 1 EXAMINING DATE 15-Sept-45 BOX NO. SHEET 1 OF 1 SHEETS

NAME J. B. GREEN. A. S. N. 38287200

ORGANIZATION Co. F. 401st Glider Inf RANK Pfc. CASE NO.

WAREHOUSE SPACE 738 EXAMINED BY Rid ☐ DIARY REMOVED

PACKAGE DESCRIPTION #7 Jm PACKED BY Joyce ☐ PHOTO FILM REMOVED

WEIGHT INSPECTED BY RC ☐ MOTION PICTURE FILM REMOVED

SHIPPED
 DATE SEP 28 1945 BY WHOM ms

1 Pn. gloves badly worn
+ money belt rust
stained

SHORTAGES

U. S. GOV'T CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

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

INVENTORY CLERK

SUPERVISOR

G. I. REMOVED

Weatherford Tex
215 Hanover St

Jan 1. 1946

I, Mrs Annie B. Green.

am at this time writing for information
I have been informed you could
give me the location of the funeral
place of my son ²⁹³ PFC J. B. Green

38287200 who was with the 82nd Div

I would like to know the grave no. and
row and so on anything you can tell
me. Also I would like to know the
proceedings in case I wish to have
him brought to the States for reburial
If you cannot give me this now I
will be waiting untill you can

Sincerely

Annie B. Green



207422 DEPT



GRAVES REGISTRATION SECTION

JAN 5 9 54 AM '46

MEMORIAL DIVISION

CODE 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

1201

SYMBOLS

DL = Day Letter

NL = Night Letter

LC = Deferred Cable

NLT = Cable Night Letter

Ship Radiogram

The filing time shown in t

WAO6DB312

day letters in STANDARD TIME at point of origin. Time of receipt in STANDARD TIME at point of destination

04 MAY 4 PM 12 49

D.LLC273 23 COLLECT 6 EXTRA=WEATHERFORD TEX 4 1058A

QUARTERMASTER DEPOT=

FTW=

NOTIFY AND DELIVER REMAINS OF PFC J B GREEN TO COTTEN
BRATTON FUNERAL HOME, WEATHERFORD TEX=

WILLIAM C GREEN 401 EAST JOSEPHINE ST WEATHERFORD
TEX.

401 E.

NY 008 R

RECEIPT OF REMAINS

DISTRIBUTION CENTER

FORT WORTH QUARTERMASTER DEPOT FORT WORTH TEXAS

ROUTINE

REMAINS CONSIGNED TO: COTTEN BRATTON FUNERAL HOME
WEATHERFORD TEXAS

293

REMAINS OF LATE PFC J B GREEN SERIAL NUMBER 38287200 ACCOMPANIED BY MILITARY
ESCORT WILL BE DELIVERED TO YOU 3 JUNE DEPARTING THIS DEPOT BY SERVICE CAR DECEASED
AT ELEVEN THIRTY AM AND SCHEDULED TO ARRIVE WEATHERFORD APPROXIMATELY ONE PM.
REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS UPON DELIVERY AND THAT YOU
IMMEDIATELY PASS THIS INFORMATION ON TO NEXT OF KIN.

W. A. Pastridge
LT COLONEL, U.S.A.
Commanding, A. T. & C. DIVISION

MAY 28 1948

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

THIS 3rd DAY OF June, 19 48.

1/2 John J. Weeks
WITNESS (Escort)

Frederic R. Cotten
CONSIGNEE

*File
not
Records Annotated
1 July 48
W. A. Pastridge*

REPATRIATION
RECORDS BRANCH

JUN 28 11 03 AM '48

MEMORIAL DIVISION

MESSAGEFORM		MESSAGE CENTER NO.		TRANSMITTING MEANS		CRYPTOGRAPH OR CLEAR TEXT	
CALLS V		STA. SER. No.	PRECEDENCE	TRANSMISSION INSTRUCTIONS		ORIGINATOR NY 008 R	DATE-TIME GROUP
ACTION		INFORMATION		EXCEPT OPERATING SIGNALS		GROUP COUNT GR	
DAY LETTER							
FROM: (Originator) Fort Worth Quartermaster Depot, Fort Worth, Texas				SECURITY CLASSIFICATION			
ACTION TO: •MR. WILLIAM C. GREEN, •401 EAST JOSEPHINE STREET, •WEATHERFORD, TEXAS.				DLK & REPORT ANY CHARGES			
INFORMATION TO:				PRECEDENCE FOR			
				ACTION INFORMATION			
				<input type="checkbox"/> ORIGINAL MESSAGE			
				REFERS TO ANOTHER MESSAGE			
				IDENTIFICATION		CLASSIFICATION	
<p>THIS HEADQUARTERS HAS BEEN ADVISED THAT THE REMAINS OF THE LATE PFC J. B. GREEN ARE ENROUTE TO THE UNITED STATES.</p> <p>RECORDS OF THIS OFFICE INDICATE YOU WISH REMAINS DELIVERED TO COTTEN-BRATTON FUNERAL HOME, WEATHERFORD, TEXAS. WE REGRET IT IS NOT POSSIBLE AT THIS TIME TO GIVE YOU A DEFINITE DELIVERY DATE HOWEVER THREE DAYS PRIOR TO SHIPMENT FROM THIS OFFICE YOUR FUNERAL DIRECTOR WILL BE NOTIFIED BY TELEGRAM DATE WHEN REMAINS WILL BE DELIVERED TO HIM. HE WILL BE REQUESTED TO PASS THIS INFORMATION TO YOU SO THAT YOU MAY MAKE FUNERAL ARRANGEMENTS. REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. WITHIN 48 HOURS OF DATE OF THIS MESSAGE PLEASE CONFIRM BY TELEGRAM COLLECT TO FORT WORTH QUARTERMASTER DEPOT, FORT WORTH, TEX. ABOVE DELIVERY INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS. PLEASE BE ADVISED THAT IT WILL NOT BE POSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF THE 48 HOUR PERIOD. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. IF YOU DESIRE MILITARY HONORS AT FUNERAL YOU SHOULD ASK ANY LOCAL PATRIOTIC OR VETERANS ORGANIZATION TO MAKE ARRANGEMENTS. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.</p>							
SECURITY CLASSIFICATION				AUTHORIZATION			
ORIGINATING AGENCY				SIGNATURE			
SYMBOL E		DATE-TIME GROUP		OFFICIAL TITLE		DUANE H. HALLETT 1st Lt, A. G.	
						MAY 3 1948 PAGE OF	

DAY LETTER

DEPT. OF JUSTICE

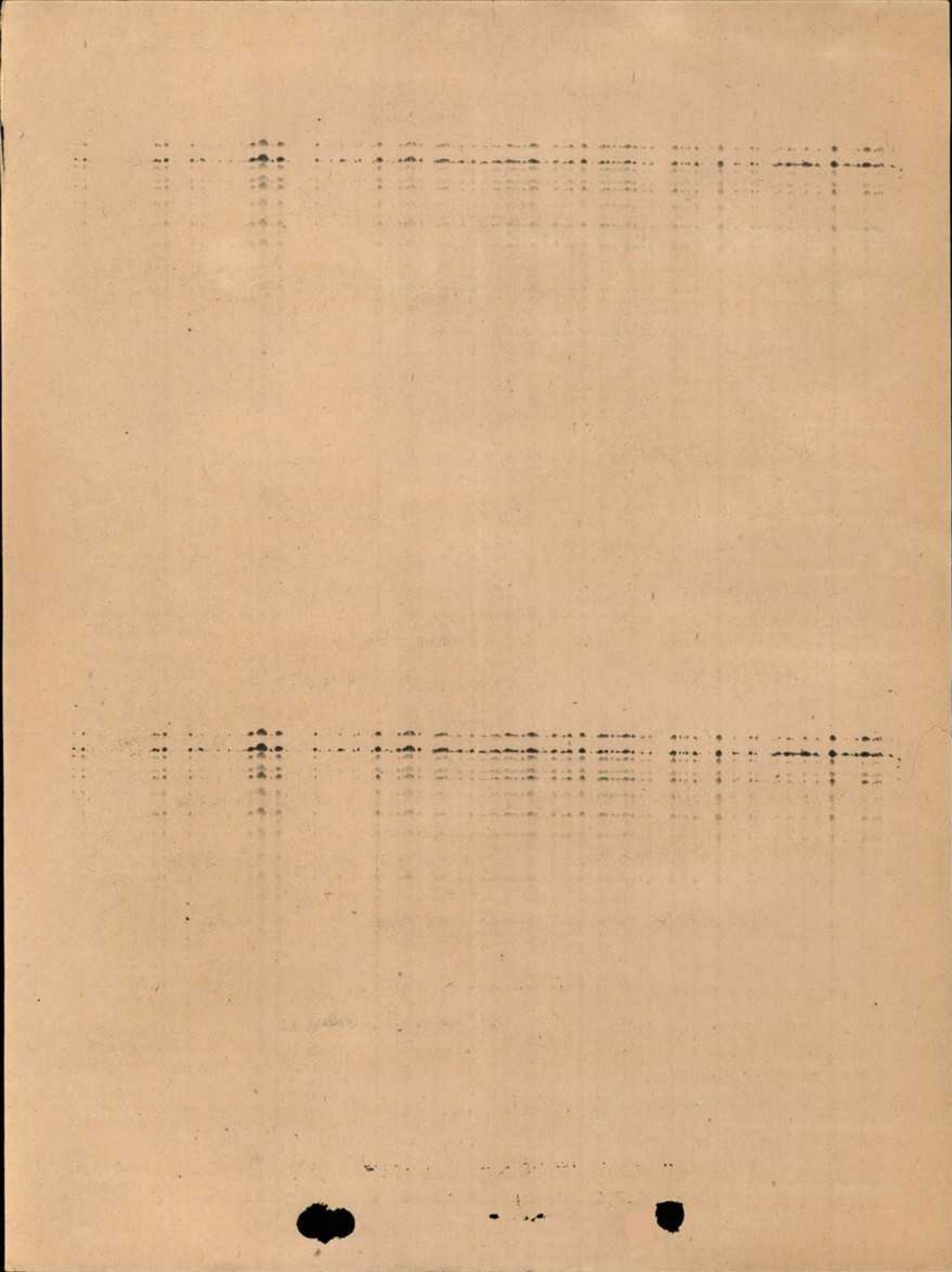
WASHINGTON, D. C.

24

INSPECTION CHECKLIST
(FOR USE AT SEAS PORT, U.S.-PORT, AND DISINFECTION CENTER)

NY 608 R

NAME GREEN, J. B.		RANK PFC		SERIAL NUMBER 38287200	
SOURCE BLOSVILLE, CARENTAN, FRANCE.		CONSIGNEE COTTEN*BRATTON FUNERAL HOME, WEATHERFORD, TEXAS.			
SHIPPING CASE - General Appearance (Check ONLY Discrepancies)		CONDITION OF SHIPPING CASE (Check one) <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY			
FINISH (Exterior) FINISH (Interior) HANDLES HANDLE BOLTS STENCILING - NAMEPLATE HEALTH PERMIT MARKER HEALTH PERMIT NUMBER		REMARKS			
CASKET - General Appearance (Check ONLY Discrepancies)		CONDITION OF CASKET (Check one) <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY			
FINISH (Exterior) HANDLES AND FASTENINGS STENCILING - NAMEPLATE CAM LOCKS (Sealing) ODOR OR MOISTURE		REMARKS			
ROUTED THROUGH					
<input type="checkbox"/> MORTUARY OPERATING ROOM		<input checked="" type="checkbox"/> REPAIR SHOP			
CONDITION OF REMAINS <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY		CASKET REPAIRED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
NECESSARY DISINFECTION (Explain)		CASKET EXCHANGED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
		SHIPPING CASE REPAIRED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
		SHIPPING CASE EXCHANGED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
		REMARKS			
TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTOR
			1500	6-2-48	<i>W. J. McCreary</i>
REMARKS					



CERTIFICATE

WW 11

(AR 30-1830)

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.

NY 008 R
J. W. FAULDS
Col. F. D.
F. O. U. S. A.

PART A - CIVILIAN OR PRIVATE CEMETERY

JUN 1948

Fort Worth, Texas
Station No. 477
Form No. 210-500

A

REQUEST FOR REIMBURSEMENT OF INTERMENT EXPENSES

(PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)

NAME OF DECEDENT	GRADE	SERIAL NUMBER	COMPONENT
GREEN, J. B.	PFC	38287200	USA

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 below named cemetery.

INSERT NAME OF CEMETERY	CITY OR COUNTY	STATE
Oakland Cemetery	Wesley	TX

INSTRUCTIONS TO PERSON SIGNING THIS FORM	SIGNATURE OF CLAIMANT
1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR. 2. Return four copies to: DEPARTMENT OF THE ARMY FORT WORTH QUARTERMASTER DEPOT FORT WORTH 1, TEXAS	William L. A. Reid 401 - East Josephine Father 06/14/48

PART B - NATIONAL OR POST CEMETERY

B

REQUEST FOR REIMBURSEMENT OF TRANSPORTATION EXPENSES

(PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)

NAME OF DECEDENT	GRADE	SERIAL NUMBER	COMPONENT

I certify that the sum of \$ was paid by me from personal funds in connection with the transportation of the remains of the above named decedent from and to the following places:

INSERT CITY OR TOWN (OR ADDRESS NOT IN A CITY OR TOWN) FROM WHICH REMAINS WERE SHIPPED	INSERT NAME AND LOCATION OF NATIONAL OR POST CEMETERY TO WHICH REMAINS WERE SHIPPED

INSTRUCTIONS TO PERSON SIGNING THIS FORM	SIGNATURE OF CLAIMANT
1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR. 2. Return four copies to:	
	ADDRESS OF CLAIMANT (City, street or RFD, and State)
	RELATIONSHIP TO DECEDENT
	DATE

EXPLANATION OF PART A

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 to 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.

ve
Pfc J. B. Green, 38 287 200
Plot D, Row 1, Grave 4,
United States Military Cemetery
Bosville, France

9 September 1947

Mr. William C. Green
Weatherford, Texas

Dear Mr. Green:

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.

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MAIL & RECORDS DIV.

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49c
SPQIG 293
Green, J.B.
S. N. 38287200

14 January 1946

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

Mrs. Annie B. Green
215 Hanover Street
Weatherford, Texas

Dear Mrs. Green:

Your letter concerning your son, the late Private First Class J. B. Green, has been received in this office.

The official report of burial discloses that the remains of your son were interred in Plot D, Row 1, Grave 4, in the U. S. Military Cemetery Bloisville, France, located approximately twenty miles northwest of St. Lo, twenty-four miles southeast of Cherbourg and five miles north and slightly west of Carentan, all in France.

The War Department anticipates that, in the near future, authority will be granted to return at Government expense, the remains of those who died overseas to a final resting place as selected by the next of kin. Upon receipt of such authority, the War Department, through this office, will furnish full information to the proper next of kin and solicit their desires. It should be realized that this mission as a whole is world-wide in scope and of necessity time-consuming, but you may rest assured that this office fully appreciates your desires, and will do everything in its power to fulfill them at the earliest possible date.

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

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

JAMES L. PRENN
Major, QMC
Assistant

emn

JRB

WER

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JLP

476
D.Y.
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195

APR 1951

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RESTRICTED
PORT OF BURIAL
TM 10-630 AND AR 30-1815

23452
27 June 1944

SEP 29 1944

293
Green J. B. Pvt 38287200
Last Name First Initial Rank Serial No.
Unknown 401 90th Inf Div
Unit Organization
France Unknown KIA
Place of Death Date of Death Cause of Death
21 June 1944 Blossville France
Time and Date of Burial Name of Cemetery Name or Coordinates of Location
4 1 D Peg
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?

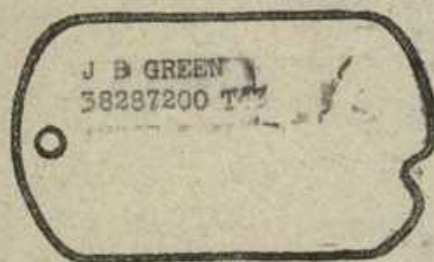
What means of identification were buried with the body?

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

Who is buried on:

Deceased's Right: Shelar, Thomas H. 14030197 Pvt 90th Inf Div 5
Name Serial No. Rank Organization Grave No.
Deceased's Left: Crisp, Willard F. 34377185 pfc 90th Inf Div 3
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 Annie B. Green
Name

Gen. Del., Weatherford, Texas
Address

Religion Unknown

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

Ring
Watch, wrist

Signature of Officer or other person reporting burial

DALE C. SHERWOOD
1st. Lt., QMC
Verified by G.R.S. Officer

14
20 OCT 1944 FILE

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

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

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

Left Hand

Right Hand

Thumb

Thumb

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.

Deceased's Right														Deceased's Left																	
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
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
Upper														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:

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

REPORT OF DEATH

DATE 17 Aug 1944

mhb

FULL NAME <u>Green, J. B.</u>				ARMY SERIAL NUMBER 38 287 200				GRADE Pfc									
HOME ADDRESS Weatherford, Texas						ARM OR SERVICE Infantry				DATE OF BIRTH 9 Jan 22							
PLACE OF DEATH European Area				CAUSE OF DEATH Killed in action				DATE OF DEATH 19 Jun 44									
STATION OF DECEASED European Area						DATE OF ENTRY ON CURRENT ACTIVE SERVICE 25 Nov 42				LENGTH OF SERVICE FOR PAY PURPOSES <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">YEARS</td> <td style="width: 33%;">MONTHS</td> <td style="width: 33%;">DAYS</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>		YEARS	MONTHS	DAYS			
YEARS	MONTHS	DAYS															
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) <div style="text-align: center;">E</div> Mrs. Annie Green (mother) Weatherford, Texas																	
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Annie B. Green (mother) Same as above William C. Green (father) Same as above																	
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)					
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO				
												I					

ADDITIONAL DATA AND/OR STATEMENT

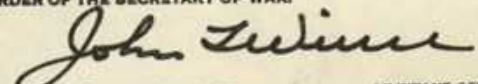
The individual named in this report of death is held by the War Department to have been in a missing in action status from 19 June 1944 until such absence was terminated on 7 August 1944, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

9 SEP 1944 FILE

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

☒ BATTLE
☐ NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:


 John T. Winn
 ADJUTANT GENERAL

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

BATTLE CASUALTY REPORT

135613

NAME GREEN J B			SERIAL NUMBER 38287200		GRADE PFC	ARM OR SERVICE INF	REPORTING THEATRE ETO
PLACE OF CASUALTY FRANCE		DATE OF CASUALTY DAY MONTH YEAR 19 JUN 44		FLYING OR JUMPING STAT *	TYPE OF CASUALTY See Graves Label MIA		SHIPMENT NUMBER 128

NAME AND ADDRESS OF EMERGENCY ADDRESSEE

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

MR.-MRS.-MISS—FIRST NAME—MIDDLE INITIAL—LAST NAME MRS ANNIE B GREEN			RELATIONSHIP MOTHER	DATE NOTIFIED 19 July 44 ESW
NO. AND NAME OF STREET—CITY—STATE WEATHERFORD TEXAS				

REMARKS:

☐ CORRECTED COPY



ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED <input checked="" type="checkbox"/> FORM 43 <input checked="" type="checkbox"/> AG 201 REQ <input type="checkbox"/>				
CASUALTY BRANCH FILE ATTACHED <input checked="" type="checkbox"/> OR CHARGED TO <input type="checkbox"/> DATE <input type="checkbox"/>				
PREVIOUSLY REPORTED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> (AS INDICATED BELOW):				
FILE NO.	MESSAGE NO.	TYPE	DATE AND AREA	E. A. NOTIFIED
FORWARDED TO <input type="checkbox"/> SPEC. IDEN. <input type="checkbox"/> TELEGRAM <input checked="" type="checkbox"/> WOUNDED <input type="checkbox"/> LETTER <input type="checkbox"/> CORRES. <input type="checkbox"/> S. R. & D. <input type="checkbox"/> CERTIF. <input type="checkbox"/> M. & M. <input type="checkbox"/> NON-DEL. <input type="checkbox"/>				
REPORT NOT VERIFIED <input type="checkbox"/> NO FORM 43 <input type="checkbox"/> NO CAS. BR. FILE <input checked="" type="checkbox"/> CHECKED BY <i>Driffert July 8</i> REVIEWED BY <i>Kellogg</i>				

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

THIS SPACE FOR USE OF MARINE																										
ACCT. AREA	CASUALTY STATUS	ORIGINAL CAS. DATE			MESSAGE NO.	LATEST CAS. DATE			REFERENCE AREA	CREW POS.	RESIDENCE		COMP	RACE												
		DAY	MO.	YR.		DAY	MO.	YR.			STATE	COUNTY														
34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	

DISTRIBUTION "A" ☐ 28 COPIES

(ALL TYPES OF CASUALTIES PERTAINING TO MILITARY PERSONNEL, EXCEPT WOUNDED.)
COPIES FURNISHED: SEE CASUALTY BRANCH MEMORANDUM NO. 48, 1944.

DISTRIBUTION "B" ☐ _____ COPIES

(ALL WOUNDED MILITARY PERSONNEL AND ALL TYPES OF CASUALTIES PERTAINING TO CIVILIANS WHO ARE W. D. EMPLOYEES, EMPLOYEES OF W. D. CONTRACTORS AND OTHERS SUBJECT TO MILITARY LAW.)
COPIES FURNISHED: SEE CASUALTY BRANCH MEMORANDUM NO. 48, 1944.

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Annie B. Green

Weatherford, Texas

Effects of:

Name

Pfc. J. B. Green

ASN

33287200

Case No.

Wt.

135613 M

DATE 24 September 1945

RTB:AC:cm

B. Court
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

Est. Exp. Chgs.

Est. Int. Chgs.

No. of packages

SEP 28 1945

mmw
Shipping Clerk

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

(S-12-2-45)

RTB:AC:cm

September 24, 1945

In Reply Refer To: 135613

Mrs. Annie B. Green
Weatherford, Texas

Dear Mrs. Green:

The Army Effects Bureau has received and is forwarding to you the following additional property of your son, Private First Class J. B. Green:

One carton and contents

As previously indicated, my action in forwarding such effects does not, of itself, vest title in you. The property is transmitted in order that you may safely keep it on behalf of the owner, pending change in his status.

When delivery has been made, I shall appreciate your acknowledging receipt by signing one copy of this letter in the space provided below, and returning it to this Bureau.

For your convenience, there is inclosed an addressed envelope which needs no postage.

Yours very truly,

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

Incl--
Envelope

Receipt acknowledged:

Mrs Annie B. Green October 22nd 1945
(Signature of Recipient) (Date)

135613



KANSAS CITY, MO.

OCT 24 1945

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

In Reply Refer To: 135613 M

(S-2-26-45)
JRM:MSL:iw
January 26, 1945

Mrs. Annie B. Green
Weatherford, Texas

Dear Mrs. Green:

The Army Effects Bureau has received some personal effects belonging to your **son, Private First Class J. B. Green.**

This property is being forwarded to you in **one package** and should reach you in the near future.

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

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

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

I am inclosing a check for \$3.28 representing funds belonging to your son.

file B
Yours very truly,

2 Incl--
Envelope

Check
Receipt acknowledged:

F. A. ECKHARDT
Captain Q.M.C.
Assistant

Mrs Annie B Green
(Signature of Bailee)

2-3-1945
(Date)

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Annie B. Green
Weatherford, Texas

Effects of:

Name **Pfc. J. B. Green**

ASN **38287200**

Case No **135613 M**

Wt.

DATE 27 January 1945

Truchmore
FOR: Effects Quartermaster

REMARKS:

X Inclose Bureau Check
Acct. No. 51171
Amount \$3.28
Inclose "Valuables" item
Ship "Valuables" item(s)

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

ROUTING:

1. Capt. E. J. [illegible]
2. Accounting Branch
3. Warehouse Division
Files Branch, Adm. Div.

29-10

51171

135613

45452 amh

January 29

45

Annie B. Green

3.28

Three and 28/100

Major Q.M.C.
Asst.

REMARKS:

JAN 29 1945

Franked **FRANK**
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____ **JAN 30 1945**
No. of packages 1

FEB 5 1945

Shipping Clerk

HEADQUARTERS 325TH GLIDER INFANTRY
APO 469 U.S. ARMY

1 August 1944

SUBJECT: Transmittal of Inventory of Personal Effects.

TO : Effects Quartermaster, ETOUSA, APO 507, U.S. Army.

THRU : Adjutant General, 82d Airborne Division, APO 469, U.S. Army.

1. Transmitted herewith is Inventory of Effects concerning subject named below.

Green, J. B. PFC 38287200 Co "F" 401st Glider Infantry
(Name: Last, First, Init.) (Grade) (ASN) (Organization)

Status: (Strike out words not applicable) Killed in Action, ~~Missing in Action~~
~~Prisoner of War~~ on the 19 th day of June 1944.

Effects forwarded to: OM, 82d A/B Div for delivery thru Effects OM, ETOUSA on
the 27th day of July 1944. Mrs Anna B. Green (Mother)

Name and address of any bank in the United Kingdom in which person is believed to
have an account: (Negative report where applicable)

None

Name and address of any known private debtors and creditors (Exclusive of U.S.
Gov't Agencies): (Negative report where applicable)

None

Cash found in effects, less cost of money order inclosed herewith.

U.S.M.O. Amt. \$ none #19027-328 U.S.M.O. Amt. \$ none

U.S. Official Check Amt. none Bank none

Misc. Inclosures none
(Will, Power of Attorney, War Bond, Travelers Checks. etc.)

Describe fully)

Name and address of next of kin: Mrs Anna B. Green (Mother)
none
Weatherford, Texas

For the Commanding Officer:

V. L. WYANT, JR.

1st Lt., 325th Gli. Inf

~~Adjutant General,~~
~~82d Airborne Division,~~
~~Personnel Adjutant~~

3 Incls:

Incl #1-WD, AGO Form #54

#2-WD, AGO Form #54 Supl. Personnel Adjutant

#3- Postal Money Order #19027

2 Incls

1 Incl

R E S T R I C T E D

201 - Green, J. B.

1st Ind.

... wjm

HEADQUARTERS 82D AIRBORNE DIVISION, APO 469, U. S. Army, 8 August 1944

TO: Effects Quartermaster, ETOUSA, APO 871, U. S. Army.

3 Incl(s)
n/c



G. B. B.
G. B. B.

26852

R E S T R I C T E D

INVENTORY OF EFFECTS

(See AR 600 550)

Green, J. B.

38267200

(Last name) (First name) (Middle initial) (Army serial number)

late a PFC Co "F" 401st Glider Infantry
(Grade) (Organization or arm or service)

who died on the 19th day of June, 1944

CLASS I-Saber, insignia, decorations, medals, campaign badges, watches, manuscripts, and other articles valuable chiefly as keepsakes.

NUMBER	ARTICLES	* Package NUMBER
1 set	PFC Stripes	
2	Campaign Ribbons	
1	Jewels Worn	
5	Letters	
1	Snapshot	
1	Testament	
1	Money Belt	
	Misc Insignia	

*To be filled out only in case of shipment to The Adjutant General

CLASS II — Other effects

NUMBER	ARTICLES
1 pr	Gloves
1 pr	Scissors



W. D., A.G.O. Form No 54
July 1, 1933

① Elton
9ml 2

CLASS II — Continued

[illegible]

I certify that the foregoing inventory comprises all the effects of the deceased whose name appears on the first page hereof, and that the effects were delivered to Mr. S. A. B. Div for
(Give name and degree of relationship; if legal representative
delivery to Mrs Anna B. Green (Mother)
Weatherford, Texas thru Effects Co.
or beneficiary named by the deceased, so state)

The effects of class I have been forwarded to The Adjutant General and those of class II have been sold.

V. L. WYNT, Jr.
1st Lt., 325th Glider Inf.
Personnel Adjutant
S. Army

27 July, 1944
(Date)

*Strike out words not applicable.

H.O. M.B.S. MAY 45/25

CLASS II--Continued

NUMBER

ARTICLES

Postal money order #19027 dated 1 Aug 44
mailed to Effects Quartermaster, ETOUSA

Specie

OCT - 5, 1944

3.23

Money

Notes

\$

I CERTIFY that the foregoing inventory
comprises all the effects of the deceased
whose name appears on the first page
hereof, and that *the effects were del-
ivered to QM, 82d A/R Div for delivery to

Mrs Anna B. Green (Mother) Weatherford,
Texas thru Effects QM, ETOUSA.

relationship; if legal representative of
beneficiary named by the deceased, so

(State)

~~*the effects of class I have been previously
mailed to Effects Quartermaster and those
of class I have been previously~~

V. L. Wynn, Jr.

1st Lt., 325th Glider Inf.

Personal Adjutant

APO 469, U. S. Army

(Station)

1 August

1944

(Date)

*Strike out words not applicable.

INVENTORY OF EFFECTS

(See AR 600 550)

Green, J. B. 38287200
 (Last name) (First name) (Middle initial) (Army serial number)

late a PFC Co "F" 401st Glider Infantry
 (Grade) (Organization or a in or service)

who died on the 19th day of June, 1944

CLASS I—Saber, insignia, decorations, medals, campaign badges, watches, manuscripts, and other articles valuable chiefly as keepsakes.

NUMBER	ARTICLES	* Package NUMBER
1 set	PFC Stripes ✓	
2	Campaign Ribbons ✓	
1	Jewis Harp ✓	
5	Letters ✓	
1	Snapshot ✓	
1	Testament ✓	
1	Money Belt ✓	
	Misc Insignia ✓	

*To be filled out only in case of shipment to The Adjutant General

CLASS II — Other effects

NUMBER	ARTICLES
1 pr	Gloves ✓
1 pr	Scissors ✓

Gifts in box

Date of Report: 6 June 1948

4116 ASU AREA SERVICE UNIT
4th Army Escort Detachment
QM Depot Fort Worth, Texas
(Location of Distribution Center)

ESCORT REPORT

DECEASED: R J Green 38287200 Pfc US Army
(Name) (ASN) (Rank) (Branch of Service)

CONSIGNEE: Cotton and Bratton Funeral Home Weatherford, Texas
(Name) (Address)

NEXT OF KIN: Green, C William Father 401 E Josephine St. Weatherford, Tex
(Name) (Relationship) (Address)

ESCORT: Weeks, L John T 3 US Army
(Name) (Rank) (Branch of Service)

DATE DEPARTED DISTR. CENTER: 3 June 1948 DATE ARRIVED AT DEST: 3 June 1948

WHERE DID YOU MEET CONSIGNEE? Funeral Home

DID YOU MEET NEXT OF KIN? Yes WHERE? Funeral Home WHEN? 3 June 1948

WERE YOU ASKED TO STAY FOR FUNERAL? Yes

DATE AND HOUR OF FUNERAL 1600
4 June 1948 WERE MILITARY SERVICES RENDERED? Yes
(Answer yes or no in every case)

NAME OF CEMETERY (Full Name and Location) Oak Hill Cemetery Weatherford, Texas

WHO FURNISHED FIRING PARTY? American Legion Post 163
AGF: USAF: USN: USMC: USCG: NG (give Installation)
Other Organizations (specify)

WHO FURNISHED PALLBEARERS? American Legion Post 163
AGF: USAF: USN: USMC: USCG: NG (give Installation)
Other Organizations (specify)

WHAT PART DID YOU HAVE IN FUNERAL? Presentation of flag

WHAT SPECIAL REQUESTS WERE ASKED OF YOU? Help open the casket. However the casket was not opened

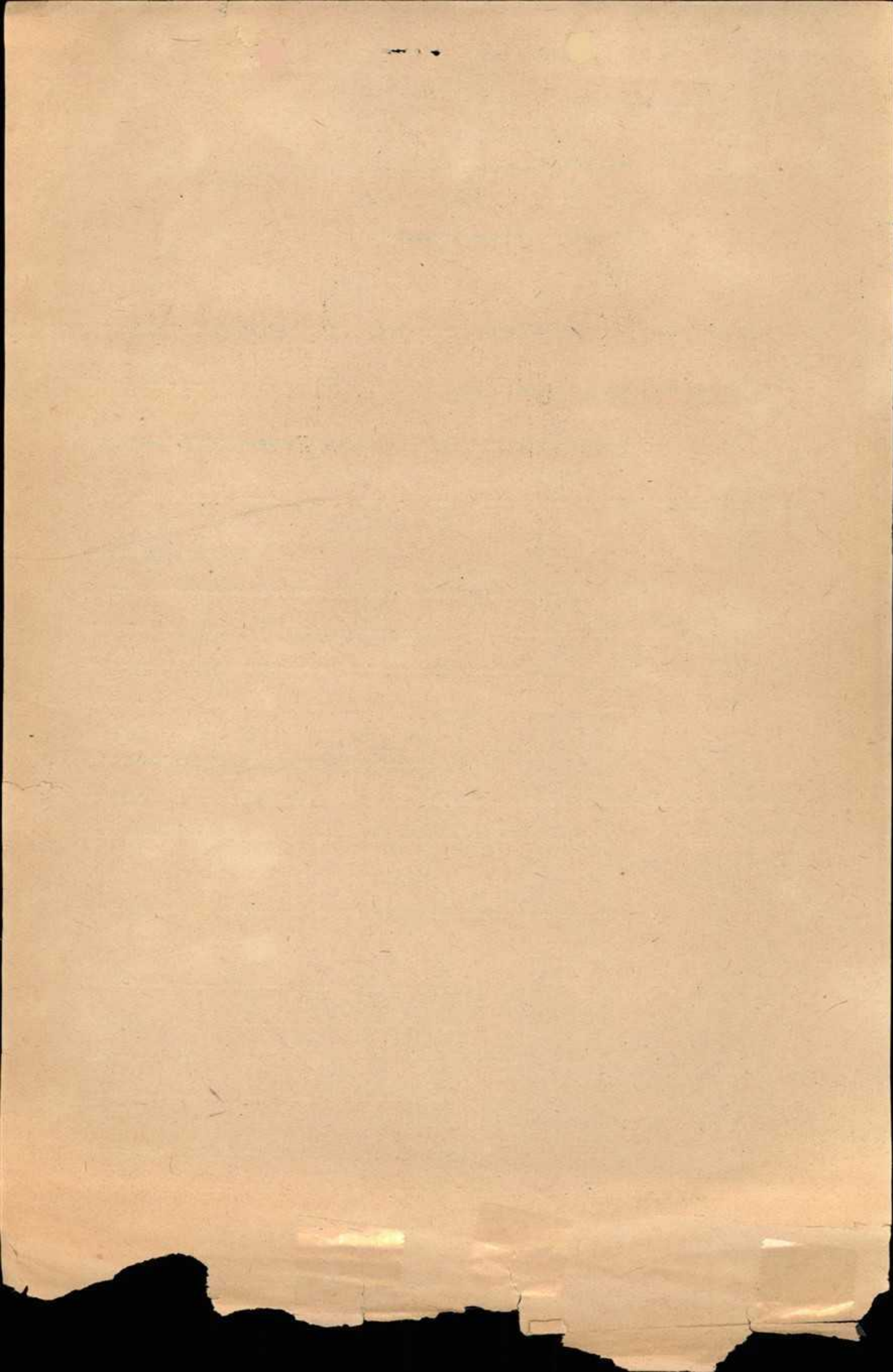
WHEN DID YOU DEPART ON RETURN TRIP? 4 June 1948

WHEN DID YOU ARRIVE AT DISTRIBUTION CENTER? 1800 4 June 1948

REMARKS: (Include all other pertinent data or unusual circumstances. Use reverse side of sheet, if necessary). Public Relations had to be called in because there was some question of identification.

ESCORT: John L Weeks T/3 38428725
(Name) (Rank) (ASN)

(Branch of Service)



D-1-4

Serial No 38257200

Name Green J.

Grade 1st.

Rank

Organization Inf.

Address

Nearest Relative Annie B. Green (Mother)

Address Gen. Del. Weatherford, Texas

Killed in Action Yes

Died of Disease

Date June 29, 1944

Hospital

Battle Area

Information

Place of Burial Blossville Cemetery

Point of Coordination

Description of Body

Members Missing

Signed



1. The first part of the document is a list of names and addresses.

2. The second part of the document is a list of names and addresses.

3. The third part of the document is a list of names and addresses.

4. The fourth part of the document is a list of names and addresses.

5. The fifth part of the document is a list of names and addresses.

6. The sixth part of the document is a list of names and addresses.

7. The seventh part of the document is a list of names and addresses.

8. The eighth part of the document is a list of names and addresses.

NAME GREEN, J. B. PFC '200

BAY

PALLET

BOX

TALLY

6159

TYPE OF PKG.

WHSE. SPACE

INVENTORIED

CTN



[illegible]

SHEET 1 OF 1 SHEETS		ARMY EFFECTS BUREAU INVENTORY		DECEASED MISSING P O W ABANDONED	
BOX NUMBER		ORIGINAL NUMBER OF PACKAGES			
TALLY NUMBER		INVENTORY DATE		CASE NUMBER	
EFFECTS OF		RANK			
A.S.N.		ORGANIZATION			
PACKAGE DESCRIPTION					
CLOTHING					
PERSONAL ITEMS					
CONTAINERS					
PAPERS AND MISC.					
REMARKS:					
ATTACHMENTS:					
C.A.T.					
WAREHOUSE SPACE					
INVENTORIED BY					
WEIGHT					
GI REMOVED					
SHORTAGE ON REVERSE					
IDENT. TAGS REMOVED					
DIARY REMOVED					
LOCKED STORAGE					
LAUNDRY					

ADDITIONAL REMARKS

SHORTAGES

U S GOVT, CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

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

INVENTORY CLERK

SUPERVISOR

G.I. REMOVED

SHEET 1 OF 1	SHEETS		ARMY EFFECTS BUREAU INVENTORY		MISSING
BOX NUMBER 2	ORIGINAL NUMBER OF PACKAGES 1				POW
TALLY NUMBER 5738	INVENTORY DATE 12 Jan '45		CASE NUMBER 135613		ABANDONED
EFFECTS OF J. B. Golen				RANK Priv.	
A.S.N. 38281200		ORGANIZATION 90th. Inf. Div.			

PACKAGE DESCRIPTION

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

REMARKS: *no information* ATTACHMENTS: ☒ FORM #54 ☐ FORM #100

no correspondence

C.A.T. (G. M. Golen)	JAN 16 1945	WEIGHT	GI REMOVED
Warehouse Space 754		DATE SHIPPED JAN 30 1945	SHORTAGE ON REVERSE
INVENTORIED BY	STORED BY LCM		IDENT. TAGS REMOVED
PACKED BY	CHECKED BY B		DIARY REMOVED
			LOCKED STORAGE
			LAUNDRY REMOVED
			FILM REMOVED

SHORTAGES

U S GOVT, CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

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

INVENTORY CLERK

SUPERVISOR

G.I. REMOVED