

293 LEMERON, JERALD B.

PVT. (36-494-705) EUROPEAN AREA (ILLS.) 45dmt

70A1  
5255  
9/16/00-14



CAUTION: THIS FORM WILL BE USED FOR OFFICIAL PURPOSES ONLY. DO NOT REMOVE PAPERS NOR REVEAL CONTENTS TO PERSON CONCERNED. RETURN THEM PROMPTLY.

## TRANSFER SLIP

No. A3373028

DATE OF REQUEST

2-20-50

✓ RECORDS DESIRED	201 FILE	ENL REC	EFF REP	MED REC	LETTER	IND	MEMO	RADIO	OTHER (Specify)	LAST DATE
FILE OR SERIAL NUMBER AND SUBJECT	293 - Lemmon, Gerald B. 36 774705									REQUESTED PAPERS NOT IN FILE <input type="checkbox"/>
TO	NAME AND EXTENSION OF PERSON REQUESTING FILE Origer				DIVISION, BRANCH, SECTION, BUILDING AND ROOM NUMBER 02mg					
RETURN TO							DATE RETURNED	TO RETURN FILE INITIAL HERE		
INSTRUCTIONS	<p>Departmental Records Branch, AGO 219 North Lee Street Alexandria, Virginia</p> <p>When transferring file to another person, complete self-addressed transfer coupon below, detach, stitch to blank letter-size paper and place in out-going mail service.</p>									

## TRANSFER COUPON

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TO:

NOTE THAT FILE OF:

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DATE

SIGNATURE

Departmental Records Branch, AGO  
219 North Lee Street  
Alexandria, Virginia

10. A3373028

No. A3373028

QMGOD 293, **Lameron, Jerald B., Pvt.** 1st Ind.  
**SN 36 774 705**

Department of the Army, OQMG, Washington 25, D. C., **29 July 1949**

TO: Commanding Officer, Quartermaster Activities  
Kansas City Records Center (AGO), Missouri  
ATTENTION: Effects Quartermaster

Information requested has been entered on basic form.

BY COMMAND OF MAJOR GENERAL ~~WELDON~~ MIDDLESWART:

WILLIAM F. CONLON  
Major, QMC  
Field Service Division

for

GREEN COPY

*[Handwritten signature]*  
*[Large handwritten flourish]*

Jul 29 2 32 PM '49  
6 0 11 01  
OFFICE OF THE QUARTERMASTER





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

S-20 Aug 49  
HOC/DF/zrs  
20 July 1949

IN REPLY REFER TO 286,517

REQUEST FOR INFORMATION

Lameron, Jerald B Pvt 36774705  
(Name) (Rank) (ASN)  
FORMERLY UNKNOWN X-7169 NEUVILLE  
INFANTRY CO "G" 401ST GLDR INF RGT 82ND AIRBORNE DIV  
(Branch of service and/or Organization)

(Following to be filled in by OQMG)

NEXT OF KIN MRS FRANCES L. CARTER WIDOW (REMARIED)  
(Name) (Relationship)

ADDRESS FLAT ROCK, ILLINOIS

PREVIOUS SHIPMENT  YES  NO (Check one)

DATE OF LAST PREVIOUS SHIPMENT (If any) 10 DEC 48

SUMMARY COURT MADE (Eff QM Form 75)  Yes  No (Check one)

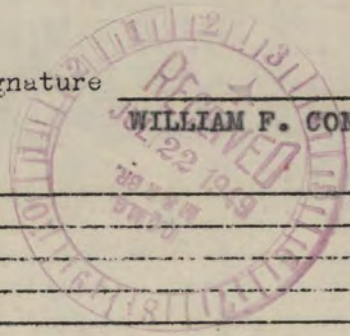
TO WHOM (If made) SAME  
(If same as NOK, write same)

Write below the name and address of an alternate beneficiary or an individual we have previously contacted in the case file. If a relative, list his relationship. This information will be used only if the next of kin noted above cannot be located.

PATRICIA A. & KAREN L. LEMERON (DAUGHTERS) MR. CHARLES H. LEMERON (FATHER)  
SAME AS WIDOW'S RURAL ROUTE #2  
FLAT ROCK, ILLINOIS

Signature WILLIAM F. CONLON, MAJOR, QMC

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





293 Lemeron, Gerald B. (36774705)  
ms

KN

Flat Rock Ill

June 2 1949

Office of the Quartermaster  
General

Dear Sir -

We want to thank you and  
all others who had any part  
in the final rites of our  
Dear Son.

Put Gerald B Lemeron A.S.N.  
293 36 774 705

and for all service rendered  
in the Past and for all  
service in the future

May God Bless each one and  
Keep America Free for which  
our Son gave his life

Mr + Mrs Charles H Lemeron

Patricia and Karen Lemeron Daughters

Brothers + Sisters

File  
JAN 49  
9  
12



293 Lemerow, Jr

Pat Gerald B. Lemerow

A.S.N. 3677470

Plot B Row 29. Grave 21

Headstone: Cross

neville-en-Condroy

Belgium

U.S. military Cemetery



USMC NEUVILLE EN CONDROZ <i>N.P.</i>		Plot B, Row 29, Grave 21		Date of Burial: April 49		Verified by GRS officer Theodore C Murray, Capt. QMC		<b>DISINTERMENT DIRECTIVE</b>	
SECTION A — NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER 1260 06734		DATE 15 01 49 DAY MONTH YEAR			
NAME <i>293</i> <b>LEMERON JERALD B</b>		SERIAL NUMBER 36774705		GRADE PVT		ARM 1		RACE RELIGION 1 6	
CEMETERY <b>NEUVILLE BELGIUM</b>		PLOT DD 10		ROW 241		GRAVE		DISPOSITION OF REMAINS 1202 80 CODE DIST. CTR.	
SECTION B — CONSIGNEE AND NEXT OF KIN						Flag sent: 19 April 49			
NAME AND ADDRESS OF CONSIGNEE NEUVILLE-EN-CONDROZ, BELGIUM				NAME AND ADDRESS OF NEXT OF KIN CHARLES A. LEMERON (FATHER) RURAL ROUTE 2 FLAT ROCK, ILLINOIS					
SECTION C — DISINTERMENT AND IDENTIFICATION									
NAME		SERIAL NUMBER		GRADE		DATE OF DEATH		DATE DISTINTERRED	
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER		ORGANIZATION USAGF		RELIGION		IDENTIFICATION VERIFIED BY  NAME AND TITLE			
SECTION D — PREPARATION OF REMAINS FOR SHIPMENT									
NATURE OF BURIAL				CONDITION OF REMAINS					
OTHER MEANS OF IDENTIFICATION									
MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)									
REMAINS PREPARED AND PLACED IN CASKET									
DATE				BY		EMBALMER (Signature)			
CASKET SEALED BY				SHIPPING ADDRESS VERIFIED BY					
DATE				BY					
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.									
						SIGNATURE OF AGRS INSPECTOR			
REMARKS AND SPECIAL INSTRUCTIONS									
I CERTIFY that the typed names appearing above are the same as the original signatures on the No. 4 copy of F-1194 concerned						<b>FILE</b> <b>17 MAY 1949</b> REPATRIATION BRANCH MEM. DIV.			
<i>Raymond E Johnson 1ST LT INF</i>						<b>FINAL LETTER SENT 11 MAY 1949</b> <b>3384</b>			



MAY 20 1964

## RECORD OF CUSTODIAL TRANSFER

1. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

2. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

3. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

4. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

5. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

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



**1****DISINTERMENT OPERATIONS RECORD**

SECTION A — NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER		DATE			
NAME <b>LEMERON GERALD B</b>		SERIAL NUMBER <b>36774705</b>	GRADE <b>PVT</b>	ARM <b>1</b>	DAY	MONTH	YEAR
CEMETERY <b>NEUVILLE BELGIUM</b>		PLOT <b>DD</b>	ROW <b>10</b>	GRAVE <b>241</b>	RACE	RELIGION	DISPOSITION OF REMAINS
					CODE		DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN	
NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN

SECTION C — DISINTERMENT AND IDENTIFICATION				
NAME <b>GERALD B LEMERON</b> <del>XXXXXXXXXXXXXXXXXXXX</del>	SERIAL NUMBER <b>36774705</b>	GRADE <b>PVT</b>	DATE OF DEATH	DATE DISTINTERRED <b>10 DEC 1948</b>
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <b>EMB</b> <input type="checkbox"/> MARKER <b>EMB</b>	ORGANIZATION	RELIGION <b>UNK</b>	IDENTIFICATION VERIFIED BY <b>VERNON N HOYT 1st Lt INF</b> NAME AND TITLE	

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT	
NATURE OF BURIAL <b>UNIFORM</b>	CONDITION OF REMAINS <b>FRACTURED SKULL, MAXILLA, L/FEMUR DISTAL END OF R/FEMUR MISSING. ADVANCED STAGE OF DECOMPOSITION.</b>
OTHER MEANS OF IDENTIFICATION <b>REPORT OF BURIAL READS GERALD B LEMERON</b>	<b>3746 10 MAY 48</b>

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)	
<b>NONE</b>	Identified as Per Ltr Hq AGRC dated 10 May 1948; Subject: Identification of Unknown Deceased.

REMAINS PREPARED AND PLACED IN <del>BOX</del> <b>TRANSFER CASE</b>	
DATE <b>28 DEC 1948</b>	BY <b>ELAM E POORBAUGH EMBALMER</b>
CASKET SEALED BY <b>HENRY F PERGANDE</b>	EMBALMER (Signature) <b>HENRY F PERGANDE EMBALMER</b>
CASKET BOXED AND MARKED	<del>SPINKS CAPT FA</del> ALL TAGS, MARKINGS AND PLATES VERIFIED BY: <b>CLYDE B SPINKS CAPT FA</b>
DATE <b>27 JAN 49</b> BY <b>ROBERT A HEURGUE CLERK RECORDER</b>	

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

**VERNON N HOYT 1st Lt INF**

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS
I CERTIFY that the typed names appearing above are the same as the original signatures on the No. 4 copy of F-1194 concerned <b>Raymond G Johnson 1ST LT INF</b>
GMC FORM 26 MAR. 48 <b>1253AW</b> INDICATE RECORD OF CUSTODIAL TRANSFER ON REVERSE SIDE

9m



*Handwritten initials*

11 May 1949

*Handwritten initials*

Pvt Jerald B. Lemeron, ASN 36 774 705  
Plot B, Row 29, Grave 21  
Headstone: Cross  
Neuville-en-Condroz (Belgium)  
U. S. Military Cemetery

Mr. Charles A. Lemeron  
Rural Route 2  
Flat Rock, Illinois

Dear Mr. Lemeron:

This is to inform you that the remains of your loved one have been permanently interred, as recorded above, side by side with comrades who also gave their lives for their country. Customary military funeral services were conducted over the grave at the time of burial

After the Department of the Army has completed all final interments, the cemetery will be transferred, as authorized by the Congress, to the care and supervision of the American Battle Monuments Commission. The Commission also will have the responsibility for permanent construction and beautification of the cemetery, including erection of the permanent headstone. The headstone will be inscribed with the name exactly as recorded above, the rank or rating where appropriate, organization, State, and date of death. Any inquiries relative to the type of headstone or the spelling of the name to be inscribed thereon, should be addressed to the American Battle Monuments Commission, Washington 25, D. C. Your letter should include the full name, rank, serial number, grave location, and name of the cemetery.

While interments are in progress, the cemetery will not be open to visitors. You may rest assured that this final interment was conducted with fitting dignity and solemnity and that the grave-site will be carefully and conscientiously maintained in perpetuity by the United States Government.

Sincerely yours,

H. FELDMAN  
Major General  
The Quartermaster General

lhc

*Handwritten notes:*  
12 23  
904

*Handwritten mark*



# REQUEST FOR DISPOSITION OF REMAINS

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

DATE: *Free kind*  
*8-25-48*  
28 October 1948

Pvt. Jerald B. Lemeron, 36 774 705  
Plot DD, Row 10, Grave 241,  
United States Military Cemetery  
Neuville-en-Condroz, Belgium

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, Charles H. Lemeron (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. *Neuville-en-Condroz, Belgium*
- 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY  
(NAME AND LOCATION OF CEMETERY) \_\_\_\_\_

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

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

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

*Linked 11/17* None  
*DD PROC 11/5/49 AB*  
*Coded 12-21-48*  
*J. Williams*



PART I (Continued)

If on Page 1 of this form you have selected Option Number 2 or 3, or Option Number 4 with your own funeral ceremonies desired at a location other than the selected national cemetery, complete one of these sections.

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

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

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

FULL NAME OF FUNERAL DIRECTOR			
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.	

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
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY

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.

Charles H. Lemeron (SIGNATURE OF NEXT OF KIN) R. R. #2 (STREET AND NUMBER)  
Charles H. Lemeron (NAME PRINTED OR TYPED) Flat Rock, Illinois (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 8th day of November,

1948 at city of Lawrenceville, county of Lawrence, and State of Illinois

of Illinois

My Commission Expires March 4, 1950-

Harry A. Rice (SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)  
Notary Public (OFFICIAL TITLE)

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

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

LAST NAME	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 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)  
 \_\_\_\_\_  
 (NAME PRINTED OR TYPED) (CITY AND STATE)



ADDITIONAL REMARKS AND INSTRUCTIONS PART

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





RRE Form #43  
20 Sep 48

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

<u>LEMERON</u>	<u>Jerald</u>	<u>B.</u>	<u>PVT</u>	<u>36774705</u>
(Last Name)	(First Name)	(Initial)	(Rank)	(ASN)

Subject remains have been permanently interred overseas in the United States Military Cemetery NEUVILLE

**STATION FILE**

Incl #



Holland-SC-233  
IZ - 1451

## NAME AND ARMY SERIAL NUMBER

Unknown

GRADE	ARM OR SERVICE	AGE	RACE	NATIVITY	SERVICE, YEARS
Unk	A.G.F.	Unk	Unk	Unk	Unk

LOCATION WHERE TAGGED:	DATE	HOUR
Kiekberg Forest, Holland	Jan 27 48	1100

DIAGNOSIS: IF INJURY, STATE HOW, WHEN, WHERE INCURRED

KIA, September-October 1944

LINE OF DUTY:

TREATMENT GIVEN:

Disinterment from Isolated  
Grave. Map Reference E-744513

TETANUS TOXOID:	DOSE	TIME:
OR		
ANTITETANIC SERUM:	DOSE	TIME:
MORPHINE:	DOSE	TIME:

DISPOSITION:	DATE	HOUR
CIP, Neuville En Condroz, Belgium	Jan 28 48	1500

SIGNATURE, WITH RANK:

*Alexander Hastick*  
ALEXANDER HASTICK  
US DAC Ident. Tech.



NOTICE OF DISINTERMENT

GRS-GZ Form No. 8

Date 27 January 1948

The below listed U.S deceased personnel have this date been disinterred from the location as shown and have been evacuated to ~~U.S. Military Cemetery~~, C.I.P Neuville En Condroz for reburial.

<u>IZ-1451 Unknown</u> (NAME)	<u>Unk</u> (RANK)	<u>Unk</u> (ASN)	<u>Kiekberg Forest, Holland *</u> (PLACE OF DISINTERMENT) If communal cemetery show Plot, Row and Grave No, if available.
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\* Isolated Graves at Map References E - 744513

This case is classified  
Unk X- 7169 BTB: Lameron  
Gerald B. Pvt. 36774705.

*Alexander Hastick*

ALEXANDER HASTICK DAC B-301970  
(Officer or NCO in charge of Dis-  
interment)

Hq. First Zone, AGRC  
(Organization)





Ho11 and Special Case 233  
 IZ 1451



# REPORT OF INVESTIGATION

## AREA SEARCH

AGRC Form # 10 (Revised)

1 January 1946.

Date

NAME \_\_\_\_\_ RANK \_\_\_\_\_ ASN \_\_\_\_\_

ORGANIZATION \_\_\_\_\_

MEANS OF IDENTIFICATION \_\_\_\_\_

(All statements above this line will be completed, upon final processing, by the clerical staff at the unit processing point.)

### SECTION A - GENERAL (To be completed by investigators in all cases)

1. Was positive identity acquired for the deceased through the surface investigation? **NO**  
If so, state the following information :

a. NAME UNKNOWN RANK UNK ASN UNK

b. ORGANIZATION UNKNOWN

2. Was partial identification established? **NO** . If so, state the facts as to whom you believe the deceased to be :

a. NAME UNKNOWN RANK UNK ASN UNK

b. ORGANIZATION UNKNOWN

3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY

UNKNOWN IZ-1452

(Use reverse side for listing of crew members from MACR)

a. Date of above burials UNK Common Graves? **NO**

2694 - 1



5. Name and Type of Cemetery DNA, ISOLATED GRAVE  
(Military or Civilian)
6. Map Coordinates of the Cemetery DNA
- a. Town DNA Country DNA
7. Give exact location in cemetery of the remains.
- a. Section DNA Row DNA Grave DNA
- b. Is Sketch attached? DNA
8. If remains are not located in a cemetery, give exact location.
- a. Town KIEKBERG FOREST, HOLLAND Coordinates 2A/3A E - 744513
- b. Is sketch attached? YES
- c. Is area mined? NO
9. How is the grave marked? NO MARKINGS
10. If grave is marked with cross, give exact markings thereon DNA
- a. From what source was this information obtained? DNA  
(Identification tags, personal effects)
- b. By Whom DNA
11. Where are the cemetery records? DNA  
(Town Hall, cemetery, burgermeister's office)
- a. What information was contained thereon? DNA
- b. Where was the information obtained? DNA
- c. By Whom? DNA
12. What is the date of death? ESTIMATED SEPTEMBER-OCTOBER 1944
- a. Give basis SEE ATTACHED NARRATIVE
13. What is the cause of death? UNKNOWN
- b. Give basis SEE ATTACHED NARRATIVE
14. What is the date of burial? ESTIMATED SEPTEMBER - OCTOBER 1944
- a. Give basis SEE ATTACHED NARRATIVE



15. Where was the place of death? KIEKBERG FOREST HOLLAND Coords 2A & 3A E-744513  
Give basis SEE ATTACHED NARRATIVE
16. Where were the remains found? KIEKBERG FOREST, HOLLAND Coords 2A & 3A E-744513  
a. By Whom? DISINTERRING TEAM  
b. Is sketch attached? YES
17. Was a casket used? NO Who furnished the casket? DNA  
Type of casket DNA How marked? DNA
18. Who made the burial UNKNOWN  
(Civilian, American Mil. or German Mil.)  
a. What are the names and addresses? DNA  
b. Are certificates and statements attached? DNA

DNA  
SECTION B - AIR CORPS DECEASED (To be Completed only if Deceased is believed to be a member of the AAF).

19. Were remains found in the plane wreckage? DNA  
a. Give location in plane from which the bodies were removed  
(Tail gunner, pilot, radio, turret, etc., or front, side, of plane)  
b. Near wreckage? DNA
20. Scene of crash must be investigated. Give complete results of Investigation (if removed, state when and by whom).  
a. Type of Plane DNA  
b. Markings and/or name on plane DNA  
c. Give numbers on motors, machine guns, instruments, radios or other equipment: DNA
21. How did crash occur? Anti-aircraft  
Enemy Planes? DNA Collision? DNA



DNA

- 22. Did plane explode in the air? \_\_\_\_\_ On ground? \_\_\_\_\_
- 23. Did plane burn in the air? \_\_\_\_\_ On ground? \_\_\_\_\_
- 24. What was the direction of the flight? \_\_\_\_\_
- 25. What was the civilian opinion regarding destination of plane? \_\_\_\_\_
- 26. Had bombs been released prior to the crash? \_\_\_\_\_
- 27. Does specific time and date of crash correspond with date of death of above named deceased? \_\_\_\_\_
- 28. Number of planes in formation prior to crash \_\_\_\_\_
- 29. State precise time and date of plane crash \_\_\_\_\_  
(Night? Day?)
- 30. Were parachutists seen? \_\_\_\_\_ How many? \_\_\_\_\_ Escaped? \_\_\_\_\_  
Prisoners? \_\_\_\_\_

SECTION C - ARMORED CORPS DECEASED (To be completed only if deceased is believed to have been a member of the Armored Force).

DNA

- 31. Were remains found in wreckage of a tank? \_\_\_\_\_
  - a. Give specific position in tank from which deceased was removed. \_\_\_\_\_  
 \_\_\_\_\_  
 (Radio man, driver, assistant driver or . . . front, side, or back)
  - b. Near wreckage? \_\_\_\_\_
- 32. Location of destroyed tank must be investigated. Give complete results of investigation. (If removed, state when and by whom)
  - a. Type of tank \_\_\_\_\_
  - b. Markings and/or name of tank \_\_\_\_\_
  - c. Numbers on motors, machine guns, ammunition, instruments, etc \_\_\_\_\_
- 33. What was the type of enemy action that resulted in the tank's disablement? \_\_\_\_\_
- 34. Did tank explode? \_\_\_\_\_ Burn? \_\_\_\_\_



DNA

- 35. Number of tanks in immediate vicinity at time of disablement \_\_\_\_\_
- 36. Does specific time and date of disablement correspond with date of death of above named deceased? \_\_\_\_\_
- 37. Precise time and date of destruction of tank \_\_\_\_\_  
(Night? Day?)
- 38. Did any of the crew members escape? \_\_\_\_\_ Prisoners? \_\_\_\_\_

SECTION D - OTHER BRANCH (To be filled out if B & C are not applicable)

- 39. Did death occur from any other means? (i. e., truck, jeep, mines, drowning, or small arms fire) — unk

If so, give, complete and thorough results of the interrogation.

- a. Are all certificates and statements of people who possessed knowledge of the case attached? YES
- 40. State the specific clues and evidence that were obtained in securing the name and facts regarding the above listed deceased — SEE ATTACHED NARRATIVE

SECTION E - GENERAL (To be completed by investigation in all cases)

- 41. Were personal effects recovered by the investigating team — NO

If not, state reason — NONE FOUND

- a. Were identification tags found at the time of death? — UNKNOWN

Where? — DNA By Whom? — DNA

Present disposition — UNKNOWN

If deceased is not identified, personal effects will not be forwarded to PE Depot, but will remain with this form until final identification is made, or investigation is abandoned.

- b. Were personal effects found at the time of death? — UNKNOWN

Where? — DNA By Whom? — DNA

Present disposition — UNKNOWN



- c. Was deceased identified by living members of the crew at the time of death? DNA
- d. Did Cemetery register or cross indicate the immunization shot? DNA
42. Was Deceased given first aid? NO If so, where? DNA  
By whom? DNA Are statements from the medical people attached? DNA
43. Was deceased evacuated to a German civilian hospital? NO  
WHERE? DNA Names of people concerned DNA
44. Is it possible on surface investigation to obtain from civilian sources a physical description of the deceased? NO
45. Is it possible on surface investigation to obtain from civilian sources the condition of the remains?  
NO  
(Burnt? Decapitated? etc)
46. Do facts surrounding death show any evidence that it might be an atrocity case? NO
- a. If so, give basis for positive assumption DNA
- b. If so, has higher headquarters been notified? DNA
47. Was case previously investigated? NO By Whom? DNA  
When? DNA
48. Give full names, addresses, and information obtained from each person interviewed  
J.M. VAN KESTEREN, B-88, PLASMOLLEN, HOLLAND
49. Are all positive statements regarding identification and particulars surrounding death attached?  
YES



HOLLAND SPECIAL CASE 233  
IZ - 1451

50. Has any information been given concerning isolated burials in the area outside the immediate vicinity?

NO

51. Was investigation preceded by advanced publicity? NO

(If special investigation, give case number) HOLLAND SPECIAL CASE 233

52. Give Brief Narrative SEE ATTACHED NARRATIVE

(Use attached sheets, if necessary)

-----  
Signature of Interpreter

*Alexander Hastick*  
ALEXANDER HASTICK  
Signature of Investigator

-----  
Rank ASN

US DA CIV. B-301970  
Rank ASN

-----  
Organization

FIRST ZONE, AGRC  
Organization



Holland Special Case 233  
IZ - 1451

29 January 1948

N A R R A T I V E

Disinterment of two (2) bodies at Mook-Middelaar area in the Konings Bosch forest, proved to be two (2) paratroopers.

The first remains which were disinterred consisted of a complete disarticulated body. Found with these remains was a comb, toothbrush, three (3) English coins and a pen knife. Clothing consisted of O.D. uniform, pieces of cotton underwear, pieces of field jacket, and also helmet liner and paratrooper boots. Head and teeth present. No flesh on this body. These remains were evacuated to C.I.P. under evacuation number IZ - 1451.

The second remains which were disinterred and evacuated to C.I.P. under evacuation number IZ-1452 consisted of a complete disarticulated body, with head and teeth present. Also found with remains was a U.S. Army whistle, cartridge, belt, pieces of O.D. uniform, pieces of field jacket and paratrooper boots, also a silk (piece of green parachute) scarf and cotton underwear. These remains seemed to have been given first aid for aid bandages were found to have been in and around the chest and stomach area amidst the bones. No flesh found with these remains.

It is believed that the two (2) unknowns mentioned in case were killed approximately September or October 1944, which is the time of the battle in this area.

Both graves have been thoroughly searched by me, and also the surrounding areas. Both these graves have been found in wooded area, and were found by forest workers while digging holes for replanting of other trees.

*Alexander Hastick*

ALEXANDER HASTICK  
DA Civ. B-301970  
Identification Technician



Holland Special Case 233  
IZ - 1451

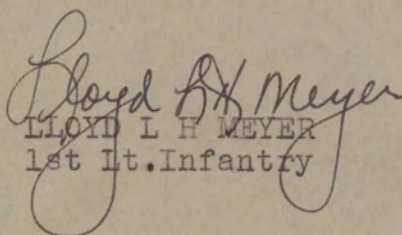
S T A T E M E N T

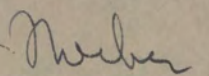
The undersigned, J.M. van Kesteren, herewith declares that he found on 15 January and 16 January, two American soldiers on the estate St. Jansberg, during work in the woods at Mook Middelaar.

/s/ J.M. v. Kesteren  
B-88 Plasmolen

CERTIFIED TRUE COPY:

Certified True Translation:

  
LLOYD L. H. MEYER  
1st Lt. Infantry

  
I. Weber  
Translator



On de getekend J. M. v. Kesteren verklaard  
hier mee dat hij op de 15 Jan en 16 Jan  
gevonden van twee Amerikaanse soldaten  
in it hand goed id Hansberg bij werk  
sam hebben in de bossen  
te Mook Middelmeer

J. M. v. Kesteren  
J. M. v. KESTEREN  
B-88 PLASMOLLEN



Pvt. Jerald B. Lemeron, 36 774 705  
 Plot DD, Row 10, Grave 241,  
 United States Military Cemetery  
 Neuville-en-Condroz, Belgium

28 October 1948

Mr. Charles H. Lemeron  
 Rural Route #2  
 Flat Rock, Illinois

Dear Mr. Lemeron:

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

lhc

OCT 28 12 31 PM '48  
 D. C. M. G.  
 RECORDS BR.  
 Incis. 7/29



REQUEST FOR NEW LETTER OF INQUIRY

TO LETTER OF INQUIRY SECTION REPATRIATION RECORDS BRANCH FROM *Rh*

NAME OF DECEDENT (First, Middle, Last) GRADE SERIAL NUMBER  
*Gerald B Lemeron Pvt 36 774 705*

GRAVE LOCATION CEMETERY PLOT ROW GRAVE  
*Newville-ew-Condroy D.D 10 241*

LETTER OF INQUIRY TO BE SENT TO: MR. MISS MRS. *Charles A. Lemeron* RELATIONSHIP *Father*

ADDRESS STREET CITY AND STATE  
*RR #2 Flat Rock, Ills.*

AUTHORITY FOR LETTER OF INQUIRY AND REMARKS  
*L.O.I. to Father. Widow remarried.*

*RODA -*

*New L.O.I. SENT 28 OCT 1948 Father - rk*

*File  
for Section  
10/27/48  
J. Callahan*

DATE CLERK'S SIGNATURE  
*Oct 22 1948 Baker, Unit #5.*



913 Port Gerald B. Emerson 36774 705

# MARRIAGE LICENSE

The People of the State of Illinois  
WILLIAMSON COUNTY

To any person legally authorized to solemnize Marriage, Greeting:  
 Marriage may be celebrated between Mr. Ernest W Carter  
 of Flat Rock, Route 1 in the County of Lawrence and State  
 of Illinois, of the age of 24 years, and  
 Mrs Frances Emerson, of Berdo in the County of  
Lawrence and State of Illinois of the age of 24 years.  
 Witness S E Storme, County Clerk, and the Seal of said County, at his  
 office in Marion, in said County, this 20th day of March, A. D. 1946  
S E Storme  
 COUNTY CLERK

State of Illinois, } ss.  
 Williamson County, }  
 I, Thomas G Norton, a minister  
 hereby certify that Mr. Ernest W Carter and Mrs Frances Emerson  
 were united in marriage by me at Marion in the County of Williamson  
 and State of Illinois, on the 20 day of March, A. D. 1946  
Thomas G Norton

State of Illinois, } ss.  
 Williamson County, }  
 I, S. E. Storme, County Clerk, Clerk of the County Court, and keeper of the records  
 and files of said office, do hereby certify the foregoing to be a true copy of Marriage License and return  
 thereon, as recorded in Marriage Record 1 at page 170, which is kept as a part of  
 the records and files of my office.  
 Given under my hand and seal of said County, this 13th day  
 of August, A. D. 1948  
S E Storme County Clerk

*[Handwritten notes and signatures in the bottom right corner, including names like 'M. A. ...' and 'S. E. Storme' with dates.]*



# REQUEST FOR DISPOSITION OF REMAINS

DATE: 28/25/48

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

243  
Pvt. Jerald B. Lameron, 36 774 705 MS  
Plot DD, Row 10, Grave 241,  
United States Military Cemetery  
Neuville-en-Condroz, Belgium

23 July 1948

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

NOTE.—The next of kin should familiarize himself with the contents of the pamphlet, "Disposition of World War II Armed Forces Dead," before filling out this form. When the proper part of this form is filled out and properly signed by the next of kin, it should be returned to the OFFICE OF THE QUARTERMASTER GENERAL, MEMORIAL DIVISION, WAR DEPARTMENT, WASHINGTON 25, D. C., in the self-addressed postage-free envelope provided for this purpose.  
If you are the next of kin or authorized representative of next of kin and desire to direct the disposition of the remains, please fill in PART I of this form.

## PART I

I, \_\_\_\_\_ (PLEASE PRINT OR TYPE NAME OF NEXT OF KIN) (Please indicate relationship to the deceased by placing an "X" in the proper box.)

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

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

- 1. BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS.
- 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY  
\_\_\_\_\_  
(NAME AND LOCATION OF CEMETERY)
- 3. BE RETURNED TO \_\_\_\_\_, 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.)

XAT  
File: 26 Oct 48  
Lot Sec. P+R  
Bullhook



**PART I (Continued)**

If on Page 1 of this form you have selected Option Number 2 or 3, or Option Number 4 with your own funeral ceremonies desired at a location other than the selected national cemetery, complete one of these sections.

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

LAST NAME	FIRST NAME	MIDDLE INITIAL
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE
STATE OR TERRITORY OF U. S. A., OR COUNTRY	TELEGRAPH ADDRESS	TELEPHONE No.

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		
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE
STATE OR TERRITORY OF U. S. A., OR COUNTRY	TELEGRAPH ADDRESS	TELEPHONE No.

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
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY

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.

\_\_\_\_\_  
(SIGNATURE OF NEXT OF KIN)

\_\_\_\_\_  
(STREET AND NUMBER)

\_\_\_\_\_  
(NAME PRINTED OR TYPED)

\_\_\_\_\_  
(CITY AND STATE)

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

19\_\_\_\_, at city (or town) of \_\_\_\_\_, county of \_\_\_\_\_, and State (or Territory or

District) of \_\_\_\_\_

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

\_\_\_\_\_  
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

\_\_\_\_\_  
(OFFICIAL TITLE)

**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)

\_\_\_\_\_  
(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 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
LEMERON	CHARLES	H
RELATIONSHIP TO THE DECEASED		
NUMBER AND STREET	CITY OR TOWN	STATE OR COUNTRY
RR# 2	FLAT ROCK	ILL

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
(DATE)

\_\_\_\_\_  
(STREET AND NUMBER)

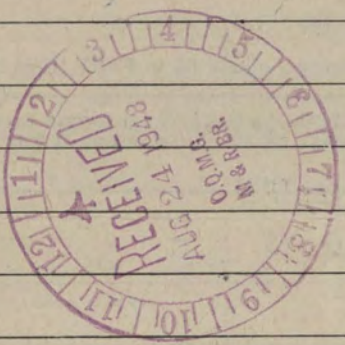
\_\_\_\_\_  
(NAME PRINTED OR TYPED)

\_\_\_\_\_  
(CITY AND STATE)



**ADDITIONAL REMARKS AND INSTRUCTION**

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





REQUEST FOR NEW LETTER OF INQUIRY

TO LETTER OF INQUIRY SECTION REPATRIATION RECORDS BRANCH FROM *Rh*

NAME OF DECEASED (First, Middle, Last) *Gerald B Lemeron* GRADE *Pvt* SERIAL NUMBER *36 774 705*

CEMETERY *Newville-in-Condroy* GRAVE LOCATION *D.D* ROW *10* GRAVE *241*

LETTER OF INQUIRY TO BE SENT TO: MR. *Charles H. Lemeron* RELATIONSHIP *Father*

STREET *RR #2* ADDRESS CITY AND STATE *Flat Rock, Ills.*

AUTHORITY FOR LETTER OF INQUIRY AND REMARKS *L.O.I. to Father. Widow remarried.*

*NAT  
File: 26 Oct  
LOI Sec. 1  
Bull*

*LOI sent 28 Oct 49*

DATE *Oct 22 1948* CLERK'S SIGNATURE *Baker, Wm*



## OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

## INTRAOFFICE REFERENCE SHEET

DUE, HOUR AND DATE

1 NO.	2 FROM-	3 TO-	4 DATE	5 MESSAGE
3	Capt Snedigar	Major Coombs	9 July 48	Request dispatch of Grave Location Letter to NOK of LEMERON, JERALD B. Return this file to Capt. Snedigar.  SNEDIGAR THOMAS 5198
4	Major Coombs	Captain Snedigar	12 Jul 48	Forwarded for Necessary Action. Grave Location Ltr written to NOK. Copy attached.  COOMBS VOLZ
5	Capt Snedigar	Mr Snowden	14 Jul 48	1. Request dispatch of LOI to NOK. 2. Hand carry this file to Capt. Snedigar.  SNEDIGAR THOMAS 5198 ids
6	Chief, LOI Sec. R/R Br. Mem Div	Chief, Records Section, R/R Br. Mem Div. ATTN: Miss Thomas	23 Jul 1948	LOI has been sent. Copy is attached.  1 Incl. 293 For: Lemerson, Jerald B. ASN: 36774705  CUNNINGHAM 71507 FMS Snowden 6535
7	Chief Rec Sec R/R Br Mem Div	Exec Office R/R Br	27 Jul 48	Records corrected in Records Section. Grave Location Letters and LOI have been dispatched. Copies are attached.  SNEDIGAR THOMAS 5198 ids  NAT File 28 July 48 R/R

C.O.I. SENT JUL 23 1948

to wife and  
R.O.P. to father 28 Oct. 48







Pvt. Jerald B. Lameron, 36 774 705  
Plot DD, Row 10, Grave 241,  
United States Military Cemetery  
Neuville-en-Condroz, Belgium

23 July 1948

Mrs. Frances C. Lameron  
General Delivery  
Birds, Illinois

Dear Mrs. Lameron:

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. JTW

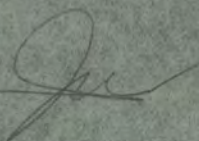
ag

*Amis*

Jul 23 5 20 PM '48  
M. G. S. D. A. R.



QMGMF 293  
Lemeron, Jerald B.  
SN 36 774 705



12 July 1948

Mrs. Frances C. Lemeron  
General Delivery  
Birds, Illinois

Dear Mrs. Lemeron:

We are desirous that you be furnished information regarding the burial of the remains of your husband, the late Private Jerald B. Lemeron.

The official report of burial discloses that his remains were originally buried in an isolated grave in the Kiekberg Forest, Holland, but were later disinterred by American Graves Registration Personnel and moved to a more suitable location. I am therefore gratified to inform you that the remains of your husband are now resting in Plot DD, Row 10, Grave 241, in the United States Military Cemetery, Neuville-en-Condroz, Belgium.

You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

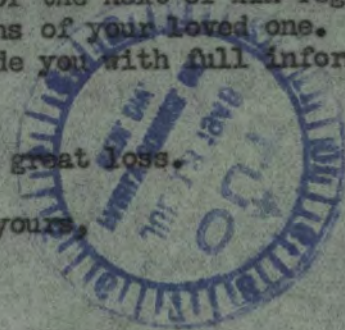
The United States Military Cemetery, Neuville-en-Condroz, is located nine miles southwest of Liege, Belgium, and is under the constant care and supervision of our government, and you may be interested to know, has been designated as a permanent American Military Cemetery, dedicated in grateful remembrance of our World War II Dead.

The Department of the Army has 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. Within the near future, our office will provide you with full information and solicit your detailed desires.

May I extend my sincere sympathy in your great loss.

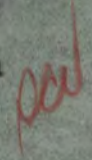
Sincerely yours,

RICHARD B. COOMBS  
Major, QMC  
Memorial Division



APR 13 9 29 AM '48  
MAIL ROOM  
RECEIVED

KK  
REC





293  
 AG 201 Lemeron, Jerald B.  
 PO-CO 184013

8 July 1948

*Copy for Quartermaster*

Mrs. Frances C. Lemeron  
 General Delivery  
 Birds, Illinois

Dear Mrs. Lemeron:

I am writing you relative to the previous letter from this office in which you were regretfully informed that a Finding of Death had been made in the case of your husband, Private Jerald B. Lemeron, 36,774,705, Infantry, and that the presumptive date of his death had been established as 1 October 1945.

The records of the Department of the Army are being amended to show that Private Lemeron was killed in action on 30 September 1944 in Kiekberg Forest, Holland. This change in status from presumed dead to killed in action was based on burial information received from the Commanding General, European Theater. You will receive a letter from The Quartermaster General concerning the burial information of your husband.

Pursuant to the provisions of Public Law 490, 77th Congress, 7 March 1942, as amended, official reports will now be issued by the Department of the Army which will indicate the actual date of his death as that shown above. The issuance of this official Report of Death will not affect any payment or settlement of accounts which has been made on the basis of the Finding of Death.

My continued sympathy is with you in the great loss you have sustained.

Sincerely yours,

EDWARD F. WITSELL  
 Major General  
 The Adjutant General of the Army

*File 800 Sect.  
 7/23/48  
 a.m. Sweet*



IDENTIFIED AS: LEMERON, ERALD B., Pvt., 36774705 (Previously X-7169)USMC, Neuville-en-Condroz, Plot DD, Row 10, Grave 241

CHECK LIST

- 1. Identification approved 21 June 48 5PM
- 2. Records corrected Identification Branch 27 June 48
- 3. Ltr to Field re acceptance of identification 22 JUN 1948
- 4. Notification to Effects Bureau 22 JUN 1948
- 5. Case (hand carried) to R/R Branch 23 June 48
- 6. Notification to AGO \_\_\_\_\_
- 7. Case (hand carried) by R/R Branch to Family Correspondence Br for NOK Ltr 9 July 48
- 8. Date of Family Correspondence Letter to NOK 12 July

*File  
7/23/48 201 sent.  
A.M. Scott*



IDENTIFICATION SECTION  
MEMORIAL DIVISION

IDENTIFICATION DATA

LAST NAME - FIRST NAME - MIDDLE INITIAL <i>LEMERON JERALD B</i>			ARMY SERIAL NUMBER <i>36774705</i>	GRADE <i>Pvt.</i>
HEIGHT <i>5'8"</i>	WEIGHT <i>129</i>	COLOR EYES <i>brn</i>	COLOR HAIR <i>brn.</i>	SHOE SIZE <i>9B</i>
DATE OF DEATH <i>Presumed 1 Oct 45</i>				

LAST ORGANIZATION TO WHICH ATTACHED OR ASSIGNED (Give complete designation)

*Co G 401st Glider Inf.*

PLACE OF DEATH OR PLACE LAST SEEN IF MIA

*Holland*

LIST ALL CAMPS IN WHICH STATIONED IN U.S. PRIOR TO SERVICE OVERSEAS, WITH INCLUSIVE DATES AT EACH.

STATION	DATES	
<i>Cp. Wolters, Tex.</i>	<i>20 Dec 43</i>	<i>30 Apr 44</i>
<i>Cp. Breckenridge, Ky.</i>	<i>16 May 44</i>	<i>19 Jun 44</i>
<i>Ft. Meade, Md</i>	<i>20 Jun 44</i>	<i>24 Jun 44</i>

FROM: W.D. AGO CLINICAL RECORDS BRANCH  
NO RECORDS ON FILE

FRACTURES AND/OR BREAKS

*none shown*

TATTOOS AND/OR BIRTH MARKS

*none shown*

DENTAL CHART

*23 Nov 43*

*X* 7 6 5 4 3 *(2)* *(1)*

1 2 3 4 5 6 7 8

UPPER RIGHT

UPPER LEFT

*X* 16 15 14 13 12 11 10 9

9 10 11 12 13 *X* 14 15 16

LOWER RIGHT

LOWER LEFT

X - EXTRACTED

O - CARIOUS

/ - CARIOUS NON-RESTORABLE

*File  
20 Nov  
22 Jun 44  
6 pages*



WAR DEPARTMENT  
MEMO ROUTING SLIP

1	NAME OR TITLE LEMERON, JERALD B	INITIALS	CIRCULATE
	ORGANIZATION AND LOCATION 36 774 705	DATE	CONCURRENCE
2	Co "G" 401 GLIDER INF		FILE
			INFORMATION
3	O/A 30 SEPT 44		NECESSARY ACTION
			NOTE AND RETURN
4	LOCATION ON ABOVE DATE		SEE ME
	A. STAINS 2417-B		SIGNATURE

## REMARKS

He became MIA on above date when he was engaged in combat with the enemy in the vic. of "BREDEWEG" (7753) coord, HOLLAND.

He has been declared dead as of the 1 Oct 45.

GSGS 4042

Map: N.W. EUROPE 1:250,000

Sheet # 2a & 3a

FROM NAME OR TITLE	DATE
ORGANIZATION AND LOCATION	TELEPHONE



## REGISTER OF DENTAL PATIENTS AT

Declassified in accordance with Executive Order 13526

(1) SURNAME		(2) CHRISTIAN NAME	
Lemeron, Jerald B.		(36774705)	
(3) RANK	(4) COMPANY	(5) REGIMENT OR STAFF CORPS	
Pvt.	A	51st Tng. Bn.	
(6) AGE, YEARS	(7) RACE	(8) NATIVITY	(9) SERVICE, YEARS
25	W	Ill.	2/12
(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.			
(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS			
1944			
2-19 Exam			
(12) RESULTS AND REMARKS			
0			

Dental Corps, U. S. A.

Form 79—MEDICAL DEPARTMENT, U. S. A.  
(Revised Feb, 24, 1941)

16-50602



# REPORT OF DENTAL SURVEY

## UPPER TEETH

Right	1	2	3	4	5	6	7	8	Left
3	4	5	6	7	8	9	10	11	12
16	15	14	13	12	11	10	9	8	7
17	16	15	14	13	12	11	10	9	8

## LOWER TEETH

Right	1	2	3	4	5	6	7	8	Left
3	4	5	6	7	8	9	10	11	12
16	15	14	13	12	11	10	9	8	7
17	16	15	14	13	12	11	10	9	8

CLASS D

Occlusion Good: Calculus: Slight, Medium, Heavy

Periodontoclasia Good

Dental foci suspected: Yes No

Other conditions \_\_\_\_\_

Date 2-19- 1944

Edward J. S. S. S.  
Dental Corps, U. S. A.

\*Restorable carious teeth by O  
 Nonrestorable carious teeth by /  
 Missing natural teeth by X

X	X	X
---	---	---

Teeth replaced by denture  
(horizontal line)

X
---

Teeth replaced by fixed bridge  
(oval to include abutments)



Dental Clinic Field House, Area  
 REGISTER OF DENTAL PATIENTS  
 Camp Breckinridge, Ky.

36774705

(1) SURNAME (2) CHRISTIAN NAME  
**Lemeron Jerold B.**  
 (3) RANK (4) COMPANY (5) REGIMENT OR STAFF CORPS  
**Pvt 3rd Bn Pro L 289th Inf.**  
 (6) AGE, YEARS (7) RACE (8) NATIVITY (9) SERVICE, YEARS  
**25 W Ill 5/12**

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.

Can R 5 - O  
 Can R 7 - F  
 Can R 6 - O

(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS

OA  
 OA  
 OA

Ames. IN 5-31-44

(12) RESULTS AND REMARKS

II-III

Hand S.O.

Major Harry W. Carpenter  
 Dental Corps, U. S. A.















AGRC FORM NO. 11  
Revised 16 Sept. 1946  
Formerly "Check List  
of Unknowns")

# IDENTIFICATION CHECK LIST

(To be completely filled out and attached to each copy  
of Report of Interment WD QMC Form 1042)

**BTB:**  
**Lameron, Gerald B.**  
**Pvt., 36774705**

Unknown X- 7169  
Cemetery Neuville-en-Condroz, Belgium  
Plot DD Row 10 Grave 241

1. ~~Arrived at cemetery~~ Date processed: 4 Feb. 48  
(Hour) (Date)

2. Place of death Kiekberg Forest, Holland 2A/3AE- 744513  
(Name of closest town) (Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3. Remains ~~recovered or discovered~~ processed by I.S. 1st Zone  
(Name and organization)

4. Evacuated to Cemetery by \_\_\_\_\_  
(Name and organization)

5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

Item	Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear	<u>Helmet liner</u> (Type)		
Raincoat	<u>none</u>		
Overcoat	<u>none</u>		
Jacket, Field	<u>M 43</u>	<u>none remnants</u>	
Jacket, Combat	<u>none</u>		
Mackinaw	<u>none</u>		
Sweater	<u>one remnants</u>		
Jacket, HBT	<u>none</u>		
* Shirt, Wool OD	<u>none</u>		
Undershirt, Wool	<u>none remnants</u>		
Undershirt, Cotton	<u>none</u>		
Trousers, HBT	<u>none</u>		
* Trousers, Wool OD	<u>One remnants</u>		



Belt, web One remnants of buckle  
 Drawers, wool One remnants of (white)  
 Drawers, cotton none  
 Leggings, wool none  
 Socks, ~~cotton~~ <sup>wool</sup> One pair remnants  
 \* Shoes One pair paratrooper (type)

Overshoes none  
 Web Equipment One remnants (type) First-aid package (111) marked  
 (Other item) none

(Other item) none

\* If body is nude, sizes of these items should be computed by measuring the remains

Chevrons or  
 Insignia none  
 (Type & location; shirt, jacket, coat, helmet)

Shoulder Patch none

Does clothing indicate that deceased was a member of the Air, Ground or Naval Force? A.G.F

L-Humerus-33.5 L-Tibia -38.-0  
L-Radius -24.6 L-Fibula-37.5

6. Description of Remains: L-Ulna -26.1  
 Age UTD Est. Height 5' 7-5/8 Weight UTD Description of wounds UTD

Bandages or dressings UTD Scars UTD  
 (Length, width, location)

UTD Tattoos  
 (Number, location — illustrate on separate page)

Outstanding moles, warts or birthmarks UTD  
 (Yes-no; description, location)

Sunburn or tan, other than hand and face UTD

Complexion UTD  
 (Light, medium, dark, clear, pimples, pocks, freckles)

Build UTD  
 (Large, fat, thin, muscular)

Hair None found  
 (Color, length, quantity, curly, wavy, straight, whorls, or definite parting)

Hair UTD  
 (Baldness, widows peak, distinctive cutting or other characteristics)

Sideburns UTD Mustache UTD Beard UTD  
 (Color, setting, shape) (Color, size, shape) (Length, heavy)



Goatee ..... **UTD**  
(Light, color, extent)

Eyes ..... **UTD** ..... Eyebrows ..... **UTD**  
(Color, setting, shape) (Color, bushiness, extent across nose)

Nose ..... **UTD** ..... Ears ..... **UTD**  
(Size, shape, straight) (Size, set close to or far from head)

Mouth ..... **UTD** ..... Lips ..... **UTD**  
(Large, medium, small) (Small, large, full)

Teeth ..... **See tooth chart**  
(White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin ..... **UTD**  
(Prominent, receding, pointed, dimples, double)

Jaw ..... **UTD** ..... Circumference of head in inches ..... **21"**  
(Large, small, normal) (Hat band)

Neck ..... **UT D** ..... Larynx ..... **UTD**  
(Size, length, short, normal, wrinkled) (Prominent, normal)

Shoulders ..... **UTD** ..... Arms ..... **UTD**  
(Broad, straight, small, rounded) (Length, muscular, color, extent and quantity of hair)

Hands ..... **Missing**

Fingers ..... **Missing**  
(Short, thick, long, slender, size of knuckles, missing fingers or joints)

(Unusual characteristics of fingernails)

Chest ..... **UTD**  
(Size of nipples, color, quantity and extent of hair, large, small, normal)

Waist ..... **UTD**  
(Size of navel, appendectomy, amount, quantity, and color of hair)

Back ..... **UTD** ..... Circumcision ..... **UTD** ..... Pubic Hair ..... **UTD**  
(Quantity and extent of hair) (Yes-no) (Color)

Hernioplasty ..... **UTD**  
(Yes-no; location)

Legs ..... **UTD**  
(Inscam, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

Feet ..... **UTD** ..... Toes ..... **UTD**  
(Size, corns, callouses, flat) (Slender, straight, crooked, overlap)

Evidence of healed fractures ..... **None found**  
(Nose, arms, legs, etc.)

NOTE: Use attached charts "A" and "B" to indicate parts not received.



7. Have finger prints been placed on Report of Interment? NO  
(Yes-no)

If not, explain Findings missing

8. Has tooth chart been prepared? Yes If not, explain \_\_\_\_\_  
(Yes-no)

9. Remarks Est. weight of processed remains: 20 Lbs. Clothing found in debris with no markings. Teeth found in debris. Remains consists of dry skeleton devoid of tissue. One leather billfold with the following name Gerald B. Lemeron, found in debris. Billfold contained an identification card which reads: "Gerald B. Lemeron", Box 236 Comstock, Michigan. One photo also found in billfold. The app deceased is BTB: Lemeron, Gerlad. B. Alphabetical listing of unresolved casualties carries Lemeron, Gerlad B., Pvt. 401 GlDr. Inf.

A.S.N 36774705. Processing revealed no positive identifying clues, therefore this case is classified as Unknown.

I certify that I have personally viewed the remains of subject deceased and all resulting information has been recorded to the best of my knowledge.

Woodrow W. Wolf  
WOODROW W. WOLF  
(Officer's Name)

O-1 QMC  
Rank Service

OPERATIONS OFFICER  
(Organization)



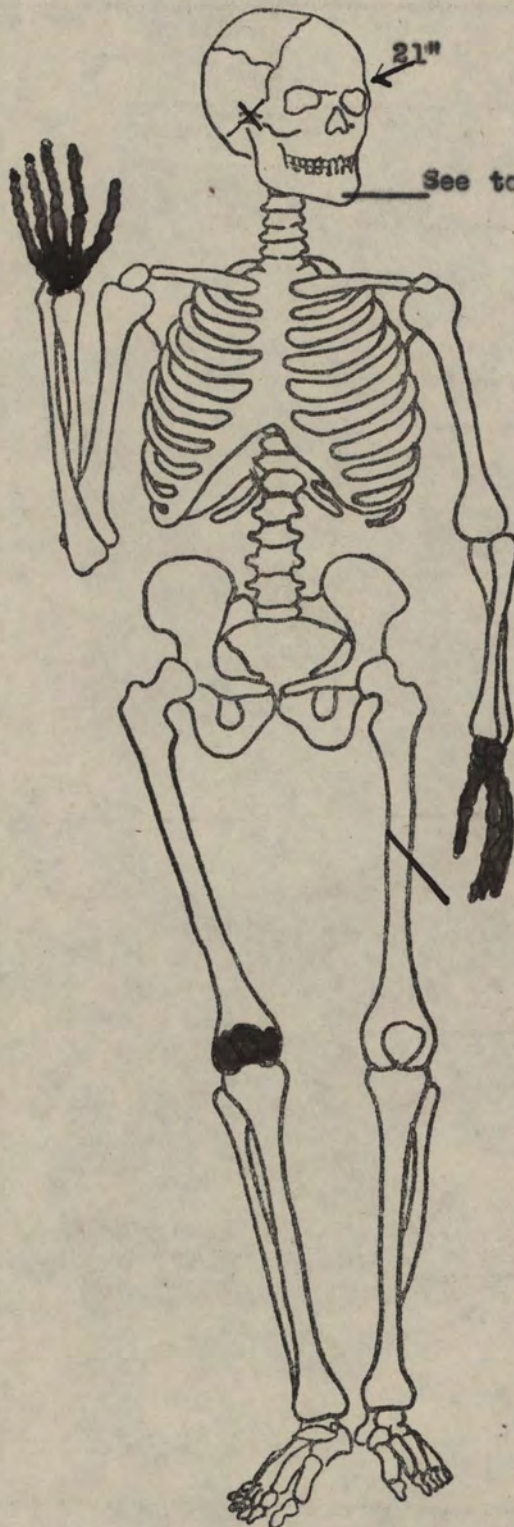
# SKELETAL CHART

BTB: Lameron, Gerald B.  
Pvt., 36774705

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

RIGHT

LEFT



21"

See tooth chart

HUMERUS.....33.5.....cm

RADIUS.....24.6.....cm

ULNA.....26.1.....cm

TIBIA.....38.0.....cm

FIBULA.....37.5.....cm

Est. HEIGHT..5'7.5/8"



12-1451

# TOOTH CHART

BTB; Lameron, Gerald B.  
Pvt., 36774705

4 February 1948

Date

Unk X- 7169

Unk

Unk

Last Name

First

Initial

Grade

Serial No.

Unk

A.G.F

Unit

Organization

Kieberg Forest, Holland

Est. Sept. Oct. 44

Unk

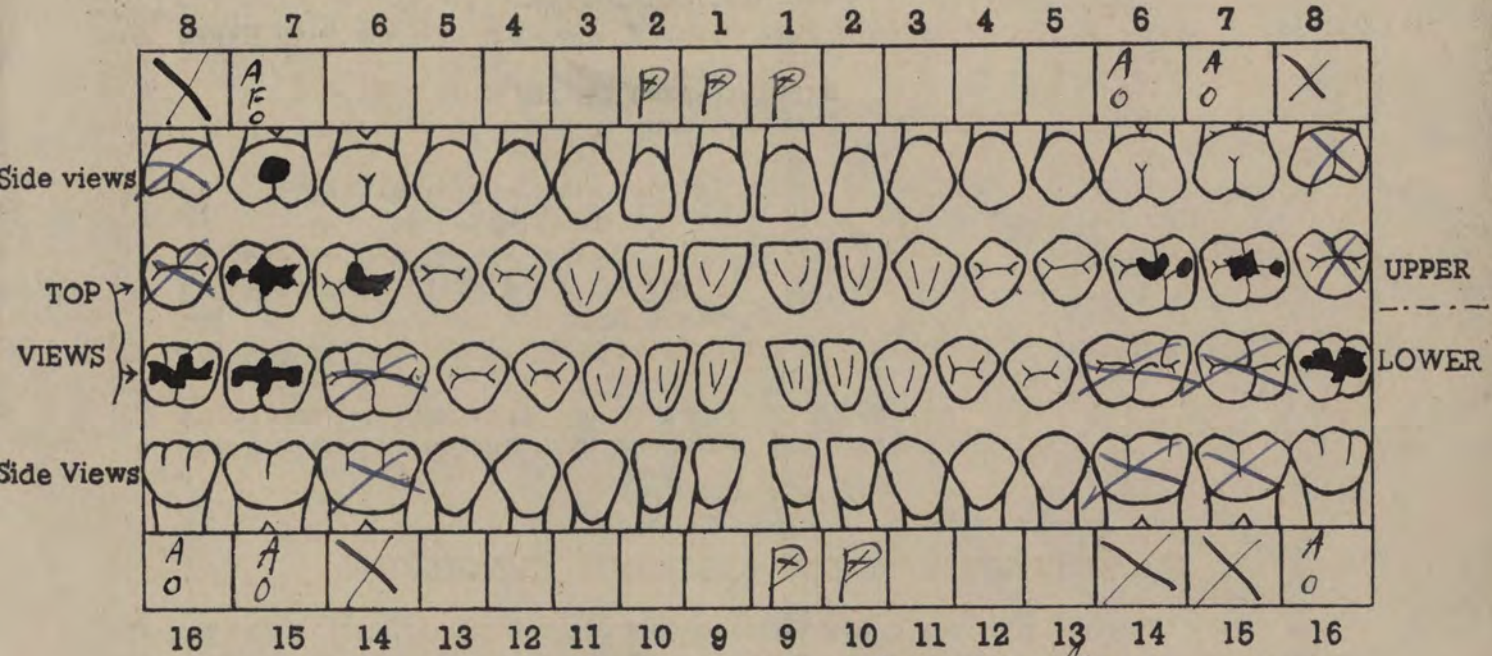
Place of Death

Date of Death

Cause of Death

Right

Left



*See remarks*

This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions : Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

J.E. BYRD  
USDA CIV IS

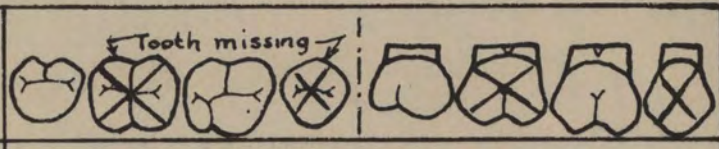
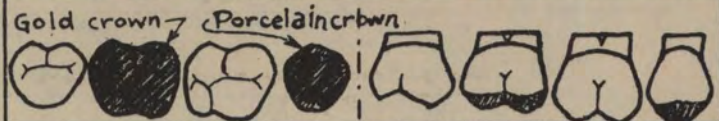
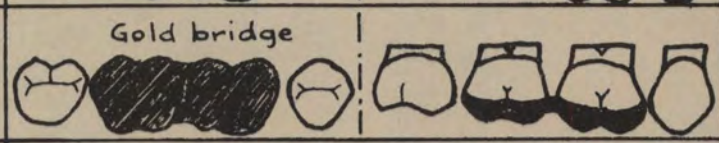
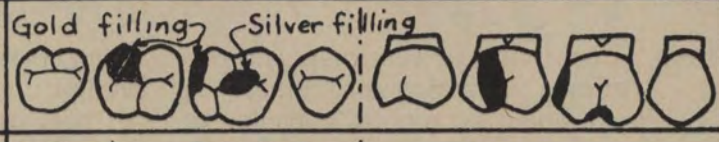
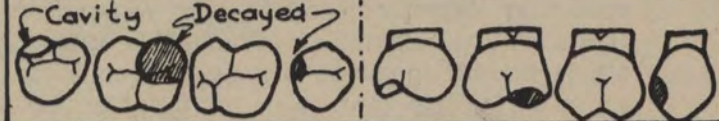
/s/ J.E. Byrd

Signature of Officer or other person who prepared Tooth chart

WOODROW W. WOLF  
CAPT QMC OPER OFF

*Woodrow W. Wolf*  
Verified by G. R.C. Officer



<p><b>MISSING TEETH...</b> All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :</p>	
<p><b>CROWNED TEETH...</b> Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :</p>	
<p><b>BRIDGE WORK...</b> Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :</p>	
<p><b>FILLINGS...</b> Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus :</p>	
<p><b>CARIES (CAVITIES).</b> Outline location and size of cavity, shade in thus :</p>	

**DENTURES (PLATES)...** Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp"

### ADDITIONAL SPACE FOR FURTHER REMARKS

Teeth lightly smaller than average. Dull ivory in color. Slight rotation mesially of R6 and L6.

L14, and 15, posthumously missing causing L13 to shift distally

L13 is also rotated slightly distally

L12 inclined distally

Spaces- L-12 to L-13- 3mm

L-13 to L-16- 10 $\frac{1}{2}$ mm

L-11 to L 12- 2mm

Rotation of L-4-1/8 turn distally

R13  $\frac{1}{4}$  turn distally

Teeth here charted does not compare with any of the original charts provided for this case.



NOTICE OF DISINTERMENT

GRS-GZ Form No. 8

Date 27 January 1948

The below listed U.S deceased personnel have this date been disinterred from the location as shown and have been evacuated to ~~U.S. Military Cemetery~~, C.I.P. Neuville En Condroz for reburial.

<u>IZ-1451 Unknown</u> (NAME)	<u>Unk</u> (RANK)	<u>Unk</u> (ASN)	<u>Kiekberg Forest, Holland *</u> (PLACE OF DISINTERMENT) If communal cemetery show Plot, Row and Grave No, if available.
----------------------------------	----------------------	---------------------	---

This case is classified

Unk X\* 7169 ~~BTB~~ Leonard  
Gerald B. Pvt. 36774705. Isolated Graves at Map Reference E - 744513

*Alexander Hastick*

ALEXANDER HASTICK DAC B-301970  
(Officer or NCO in charge of Dis-  
interment)

Hq, First Zone, AGRC  
(Organization)



# REPORT OF INVESTIGATION

## AREA SEARCH

AGRC Form # 10 (Revised)

1 January 1946.

18 February 1948

Date

NAME Unk X- 710 RANK Unk ASN Unk

ORGANIZATION Unk

MEANS OF IDENTIFICATION NONE

(All statements above this line will be completed, upon final processing, by the clerical staff at the unit processing point.)

### SECTION A - GENERAL (To be completed by investigators in all cases)

1. Was positive identity acquired for the deceased through the surface investigation? **No**  
If so, state the following information:

a. NAME UNKNOWN RANK UNK ASN UNK

b. ORGANIZATION UNKNOWN

2. Was partial identification established? **NO** . If so, state the facts as to whom you believe the deceased to be:

a. NAME UNKNOWN RANK UNK ASN UNK

b. ORGANIZATION UNKNOWN

3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY

**UNKNOWN IZ-1452**

(Use reverse side for listing of crew members from MACR)

a. Date of above burials UNK Common Graves? **NO**



**DNA, ISOLATED GRAVE**

5. Name and Type of Cemetery \_\_\_\_\_  
(Military or Civilian)
6. Map Coordinates of the Cemetery **DNA**
  - a. Town **DNA** Country **DNA**
7. Give exact location in cemetery of the remains.
  - a. Section **DNA** Row **DNA** Grave **DNA**
  - b. Is Sketch attached? **DNA**
8. If remains are not located in a cemetery, give exact location.
  - a. Town **WINKBERG FOREST, HOLLAND** Coordinates **2A/3A E - 744513**
  - b. Is sketch attached? **YES**
  - c. Is area mined? **NO**
9. How is the grave marked? **NO MARKINGS**
10. If grave is marked with cross, give exact markings thereon **DNA**
  - a. From what source was this information obtained? **DNA**  
(Identification tags, personal effects)
  - b. By Whom **DNA**
11. Where are the cemetery records? **DNA**  
(Town Hall, cemetery, burgermeister's office)
  - a. What information was contained thereon? **DNA**
  - b. Where was the information obtained? **DNA**
  - c. By Whom? **DNA**
12. What is the date of death? **ESTIMATED SEPTEMBER-OCTOBER 1944**
  - a. Give basis **SEE ATTACHED NARRATIVE**
13. What is the cause of death? **UNKNOWN**
  - b. Give basis **SEE ATTACHED NARRATIVE**
14. What is the date of burial? **ESTIMATED SEPTEMBER - OCTOBER 1944**
  - a. Give basis **SEE ATTACHED NARRATIVE**



15. Where was the place of death? KIEKBERG FOREST HOLLAND Coords 2A & 3A E-744513  
Give basis SEE ATTACHED NARRATIVE

16. Where were the remains found? KIEKBERG FOREST, HOLLAND Coords 2A & 3A E-744513  
a. By Whom? DISINTERRING TEAM  
b. Is sketch attached? YES

17. Was a casket used? NO Who furnished the casket? DNA  
Type of casket DNA How marked? DNA

18. Who made the burial UNKNOWN  
(Civilian, American Mil. or German Mil).

a. What are the names and addresses? DNA  
b. Are certificates and statements attached? DNA

**SECTION B - AIR CORPS DECEASED (To be Completed only if Deceased is believed to be a member of the AAF).**  
DNA

19. Were remains found in the plane wreckage?  
a. Give location in plane from which the bodies were removed  
(Tail gunner, pilot, radio, turret, etc., or front, side, of plane)

b. Near wreckage?

20. Scene of crash must be investigated. Give complete results of Investigation (if removed, state when and by whom).

a. Type of Plane  
b. Markings and/or name on plane  
c. Give numbers on motors, machine guns, instruments, radios or other equipment :

21. How did crash occur? Anti-aircraft  
Enemy Planes? Collision?



DNA

22. Did plane explode in the air? \_\_\_\_\_ On ground? \_\_\_\_\_
23. Did plane burn in the air? \_\_\_\_\_ On ground? \_\_\_\_\_
24. What was the direction of the flight? \_\_\_\_\_
25. What was the civilian opinion regarding destination of plane? \_\_\_\_\_
26. Had bombs been released prior to the crash? \_\_\_\_\_
27. Does specific time and date of crash correspond with date of death of above named deceased? \_\_\_\_\_
28. Number of planes in formation prior to crash \_\_\_\_\_
29. State precise time and date of plane crash \_\_\_\_\_  
(Night? Day?)
30. Were parachutists seen? \_\_\_\_\_ How many? \_\_\_\_\_ Escaped? \_\_\_\_\_  
Prisoners? \_\_\_\_\_

**SECTION C - ARMORED CORPS DECEASED (To be completed only if deceased is believed to have been a member of the Armored Force).**

DNA

31. Were remains found in wreckage of a tank? \_\_\_\_\_
- a. Give specific position in tank from which deceased was removed. \_\_\_\_\_  
\_\_\_\_\_  
(Radio man, driver, assistant driver or... front, side, or back)
- b. Near wreckage? \_\_\_\_\_
32. Location of destroyed tank must be investigated. Give complete results of investigation. (If removed, state when and by whom)
- a. Type of tank \_\_\_\_\_
- b. Markings and/or name of tank \_\_\_\_\_
- c. Numbers on motors, machine guns, ammunition, instruments, etc \_\_\_\_\_
33. What was the type of enemy action that resulted in the tank's disablement? \_\_\_\_\_
34. Did tank explode? \_\_\_\_\_ Burn? \_\_\_\_\_



**DNA**

- 35. Number of tanks in immediate vicinity at time of disablement \_\_\_\_\_
- 36. Does specific time and date of disablement correspond with date of death of above named deceased? \_\_\_\_\_
- 37. Precise time and date of destruction of tank \_\_\_\_\_  
(Night? Day?)
- 38. Did any of the crew members escape? \_\_\_\_\_ Prisoners? \_\_\_\_\_

**SECTION D - OTHER BRANCH (To be filled out if B & C are not applicable)**

- 39. Did death occur from any other means? (i. e., truck, jeep, mines, drowning, or small arms fire) **unk**

If so, give, complete and thorough results of the interrogation.

- a. Are all certificates and statements of people who possessed knowledge of the case attached? **YES**

- 40. State the specific clues and evidence that were obtained in securing the name and facts regarding the above listed deceased **SEE ATTACHED NARRATIVE**

**SECTION E - GENERAL (To be completed by investigation in all cases)**

- 41. Were personal effects recovered by the investigating team **NO**

If not, state reason **NONE FOUND**

- a. Were identification tags found at the time of death? **UNKNOWN**

Where? **DNA** By Whom? **DNA**

Present disposition **UNKNOWN**

If deceased is not identified, personal effects will not be forwarded to PE Depot, but will remain with this form until final identification is made, or investigation is abandoned.

- b. Were personal effects found at the time of death? **UNKNOWN**

Where? **DNA** By Whom? **DNA**

Present disposition **UNKNOWN**



c. Was deceased identified by living members of the crew at the time of death? DNA

d. Did Cemetery register or cross indicate the immunization shot? DNA

42. Was Deceased given first aid? NO If so, where? DNA

By whom? DNA Are statements from the medical people attached? DNA

43. Was deceased evacuated to a German civilian hospital? NO

WHERE? DNA Names of people concerned DNA

44. Is it possible on surface investigation to obtain from civilian sources a physical description of the deceased? NO

45. Is it possible on surface investigation to obtain from civilian sources the condition of the remains?  
NO (Burnt? Decapitated? etc)

46. Do facts surrounding death show any evidence that it might be an atrocity case? NO

a. If so, give basis for positive assumption DNA

b. If so, has higher headquarters been notified? DNA

47. Was case previously investigated? NO By Whom? DNA

When? DNA

48. Give full names, addresses, and information obtained from each person interviewed

J.M. VAN KESTEREN, B-88, PLASMOLLEN, HOLLAND.

49. Are all positive statements regarding identification and particulars surrounding death attached?

YES



50. Has any information been given concerning isolated burials in the area outside the immediate vicinity?

NO

51. Was investigation preceded by advanced publicity? NO

(If special investigation, give case number) HOLLAND SPECIAL CASE 233

52. Give Brief Narrative SEE ATTACHED NARRATIVE

(Use attached sheets, if necessary)

-----  
Signature of Interpreter

-----  
Rank ASN

-----  
Organization

*Alexander Hastick*

ALEXANDER HASTICK

Signature of Investigator

US DA CIV. B-301970

Rank ASN

FIRST ZONE, AGRC

Organization



Holland Special Case 233  
IZ - 1451

29 January 1948

### N A R R A T I V E

Disinterment of two (2) bodies at Mook-Middelaar area in the Konings Bosch forest, proved to be two (2) paratroopers.

The first remains which were disinterred consisted of a complete disarticulated body. Found with these remains was a comb, toothbrush, three (3) English coins and a pen knife. Clothing consisted of O.D. uniform, pieces of cotton underwear, pieces of field jacket, and also helmet liner and paratrooper boots. Head and teeth present. No flesh on this body. These remains were evacuated to C.I.P. under evacuation number IZ - 1451.

The second remains which were disinterred and evacuated to C.I.P. under evacuation number IZ-1452 consisted of a complete disarticulated body, with head and teeth present. Also found with remains was a U.S. Army whistle, cartridge, belt, pieces of O.D. uniform, pieces of field jacket and paratrooper boots, also a silk (piece of green parachute) scarf and cotton underwear. These remains seemed to have been given first aid for aid bandages were found to have been in and around the chest and stomach area amidst the bones. No flesh found with these remains.

It is believed that the two (2) unknowns mentioned in case were killed approximately September or October 1944, which is the time of the battle in this area.

Both graves have been thoroughly searched by me, and also the surrounding areas. Both these graves have been found in wooded area, and were found by forest workers while digging holes for replanting of other trees.

*Alexander Hastick*

ALEXANDER HASTICK  
DA Civ. B-301970  
Identification Technician



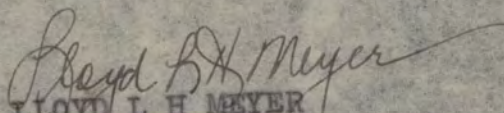
Holland Special Case 233  
IZ - 1451

S T A T E M E N T

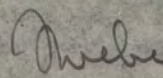
The undersigned, J.M. van Kesteren, herewith declares that he found on 15 January and 16 January, two American soldiers on the estate St. Jansberg, during work in the woods at Mook Middelaar.

/s/ J.M. v. Kesteren  
B-88 Plasmolen

CERTIFIED TRUE COPY:

  
LLOYD L. H. MEYER  
1st Lt. Infantry

Certified True Translation:

  
I. Weber  
Translator







NOTICE OF DISINTERMENT

GRS-GZ Form No. 8

Date 27 January 1948

The below listed U.S deceased personnel have this date been disinterred from the location as shown and have been evacuated to ~~U.S. Military Cemetery~~, C.I.P. Neuville En Condroz for reburial.

<u>IZ-1451 Unknown</u>	<u>Unk</u>	<u>Unk</u>	<u>Kiekberg Forest, Holland *</u>
(NAME)	(RANK)	(ASN)	(PLACE OF DISINTERMENT)
			If communal cemetery show Plot, Row and Grave No, if available.

\* Isolated Graves at Map Reference E - 744513

*Alexander Hastick*

ALEXANDER HASTICK DAC B-301970  
(Officer or NCO in charge of Dis-  
interment)

Hq. First Zone, AGRC  
(Organization)



True Copy

True

293 FILE DATA ON REMAINS NOT YET RECOVERED OR IDENTIFIED

NAME (Last, First, Middle Initial) LEMERON, JERALD B. GRADE Pvt PRESENT SERIAL NUMBER 36774705

ORGANIZATION CO. G. 401st GLIDER INF. 82 AIRBORNE DIV RACE W CREED No RECORD FORMER SERIAL NUMBER (If applicable)

DATE OF DEATH/MIA 30 Sept 44 CAUSE OF DEATH FOD PLACE OF DEATH OR PLACE LAST SEEN IF MIA FAILED TO RETURN FROM ATTACK IN HOLLAND

DATE OF FOD 1 OCT 45 HEIGHT 5'8" WEIGHT 129 COLOR EYES BWN COLOR HAIR BWN SHOE SIZE 9-B

DENTAL CHART

23 Nov 43

UPPER RIGHT 8 7 6 5 4 3 2 1 X O O

UPPER LEFT 1 2 3 4 5 6 7 8

LOWER RIGHT 16 15 14 13 12 11 10 9 X

LOWER LEFT 9 10 11 12 13 14 15 16 X X

X=Extracted O=Caries 1=Caries Non-Restorable

FRACTURES AND/OR BREAKS

TATTOOS AND/OR BIRTHMARK

ADDITIONAL INFORMATION age 26 He became MIA on some date when he was engaged in combat with the enemy in the Breckenweg area (7753) Coard, Holland



IZ-1451

# TOOTH CHART

BTB; Lemeron, Gerald B.  
Pvt., 36774705

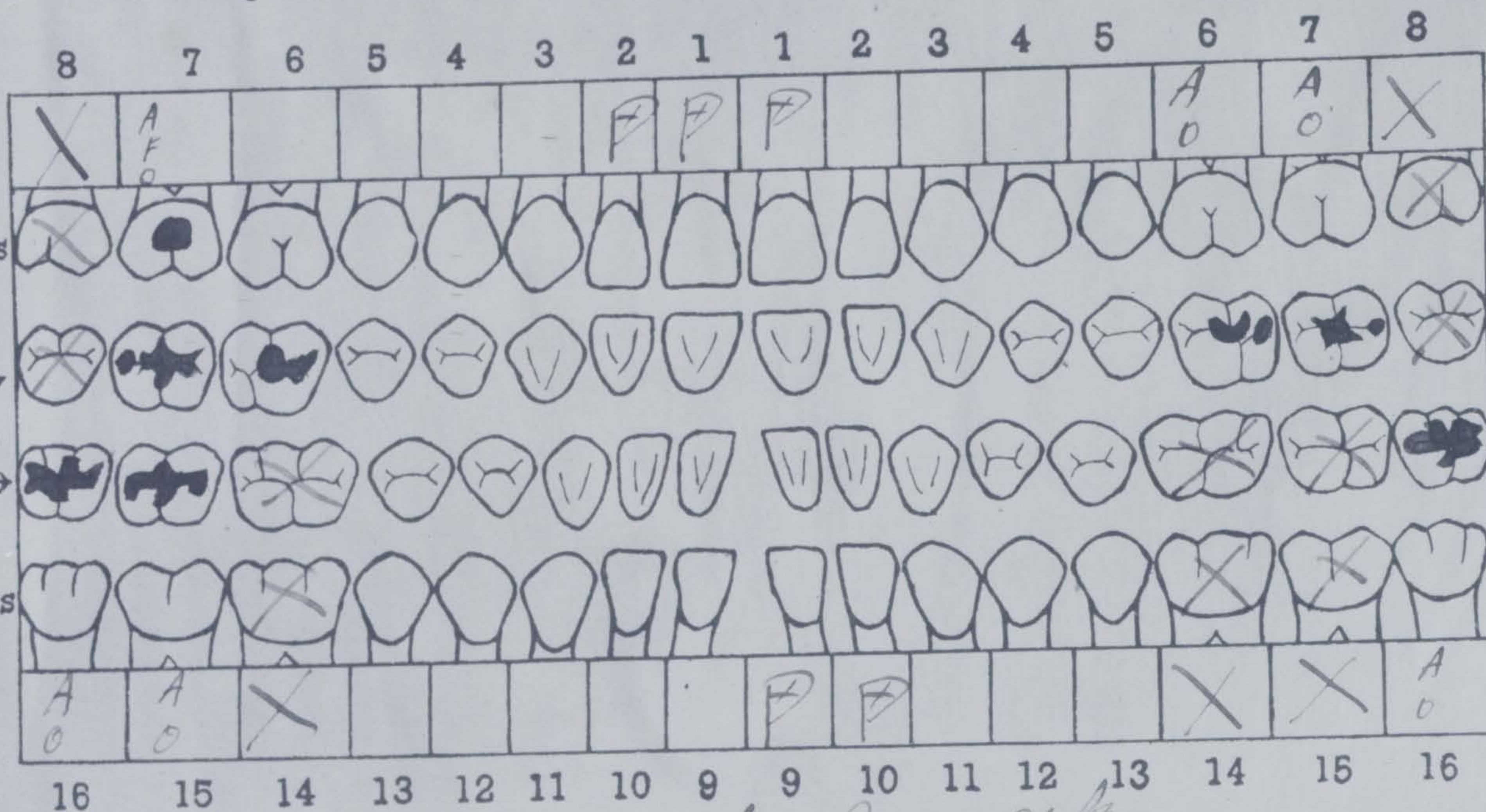
4 February 1948

Date

Unk X- 7169	Unk	Unk	Unk
Last Name	First	Initial	Grade
Unk	Unk	Unk	A.G.F
Unit	Organization	Est.	Date of Death
Kiekberg Forest, Holland	Unk	Sept. Oct. 44	Unk
Place of Death	Cause of Death		

Right

Left



*See Remarks*

Teeth slightly smaller than average, dull ivory in color.  
Slight rotation mesially of R-6 and L-6. L-14 and 15 posthumously missing causing L-13 to shift distally L-13 is also rotated slightly distally.  
L-12 inclined distally.  
Spaces: L-12--13:3mm. L-13--16:10 $\frac{1}{2}$ mm. L-11--12:2mm.  
Rotation of L-4; 1/8 turn distally. R-13; 1/4 turn distally  
Teeth here charted does not compare with any of the original charts provided for this case.

J.E. BYRD  
USDA CIV IS

/s/ J.E. Byrd

Signature of Officer or other person who prepared Tooth chart

WOODROW W. WOLF  
CAPT QMC OPER OFF

*Woodrow W. Wolf*  
Verified by G. R.C. Officer



IDENTIFICATION BRANCH  
MEMORIAL DIVISION

17 June 1948

DATE

CHECK LIST OF MEANS OF IDENTIFICATION

FOR: X-7169, USMC, Neuville-en-Condroz, Belgium LEMERON, JERALD B.,  
Unknown X-Number or Cemetery Pvt., 36774705  
other designation Identified as

	Favorable	Unfavorable	Unknown
Date and place in agreement	X*		
Dental Chart	X		
Color Hair	-	-	-
Estimated Height	X		
Estimated Weight	-	-	-
Laundry Marks	-	-	-
Shoe Size	-	-	-
Type Clothing	X		
Identification Tag	-	-	-
Personal Effects	X		
Statement of Civilians	-	-	-
Enemy Records	-	-	-
Scars	-	-	-
EMT (Emergency Medical Tag)	-	-	-
Pay Book (EM. Off.)	-	-	-
Signed Statement of Identity	-	-	-

REMARKS:

(\*) - Date of Death of X-7169 is estimated as Sept.-Oct. 1944; Place of Death is indicated as Kiekberg Forest, Holland. Army Records indicate that Pvt. Lemerón became MIA on 30 September 1944 when he failed to return from combat with the enemy in Breedeweg, Holland. Coordinates as follows:

Breedeweg, Holland: 51°45'N - 5°57'E

Kiekberg Forest, located between Mook, Holland - 51°44'N - 5°53'E - and Grafwegen, Holland - 51°44'N - 5°57'E.

Mook, Holland is approximately 4 miles west of Breedeweg, Holland.

Grafwegen, Holland approximately 1 mile south of Breedeweg, Holland.

NOTE:-- The remains of the second body disinterred from Kiekberg, Forest, were evacuated to USMC, Neuville-en-Condroz, Belgium as Unknown X-7170 (IZ-1452). Dental chart for Unknown X-7170 was compared with army dental records for Pvt. Lemerón with negative results. (See Dental Comparison)



## DENTAL CHART

Unknown X- 7170 (IZ-1452)  
USMC, Neuville-en-Condroz, Belgium

R-8 X  
R-7 \_\_\_\_\_  
R-6 dola moA  
R-5 oA  
R-4 \_\_\_\_\_  
R-3 Missing after Death  
R-2 \_\_\_\_\_  
R-1 Missing after Death

L-1 \_\_\_\_\_  
L-2 \_\_\_\_\_  
L-3 \_\_\_\_\_  
L-4 oA  
L-5 \_\_\_\_\_  
L-6 X  
L-7 oA oA  
L-8 Missing after Death

R-16 \_\_\_\_\_  
R-15 oA  
R-14 X  
R-13 X  
R-12 \_\_\_\_\_  
R-11 \_\_\_\_\_  
R-10 \_\_\_\_\_  
R-9 \_\_\_\_\_

L-9 \_\_\_\_\_  
L-10 \_\_\_\_\_  
L-11 \_\_\_\_\_  
L-12 \_\_\_\_\_  
L-13 X  
L-14 oA  
L-15 \_\_\_\_\_  
L-16 X

Name LEMERON, JERALD B.,  
Pvt., 36774705

R-8 Cariou X  
R-7 Cariou oA fA oA  
R-6 X oA  
R-5 \_\_\_\_\_  
R-4 \_\_\_\_\_  
R-3 \_\_\_\_\_  
R-2 Cariou mS  
R-1 Cariou mS dS

L-1 Cariou mS  
L-2 \_\_\_\_\_ mS  
L-3 \_\_\_\_\_  
L-4 \_\_\_\_\_  
L-5 \_\_\_\_\_  
L-6 X  
L-7 \_\_\_\_\_ oA oA  
L-8 Cariou oA oA

R-16 Cariou X  
R-15 Cariou oA  
R-14 X oA  
R-13 \_\_\_\_\_  
R-12 \_\_\_\_\_  
R-11 \_\_\_\_\_  
R-10 \_\_\_\_\_  
R-9 \_\_\_\_\_

L-9 \_\_\_\_\_  
L-10 \_\_\_\_\_  
L-11 \_\_\_\_\_  
L-12 \_\_\_\_\_  
L-13 \_\_\_\_\_  
L-14 X X  
L-15 X oA  
L-16 \_\_\_\_\_ X

ms 79 dtd: 2-19-44 5-24-44  
Height: 5'8"  
Weight: 129 Lbs.  
Hair: Brown

ebris.  
marked:  
higan".



## DENTAL CHART

Unknown X-7169  
USMC, Neuville-en-Condroz, Belgium

Name LEMERON, JERALD B.,  
Pvt., 36774705

R-8 X  
R-7 oA oA fA  
R-6 oA  
R-5 \_\_\_\_\_  
R-4 \_\_\_\_\_  
R-3 \_\_\_\_\_  
R-2 Missing after Death  
R-1 Missing after Death

L-1 Missing after Death  
L-2 \_\_\_\_\_  
L-3 \_\_\_\_\_  
L-4 \_\_\_\_\_  
L-5 \_\_\_\_\_  
L-6 oA oA  
L-7 oA oA  
L-8 X

R-16 oA  
R-15 oA  
R-14 X  
R-13 \_\_\_\_\_  
R-12 \_\_\_\_\_  
R-11 \_\_\_\_\_  
R-10 \_\_\_\_\_  
R-9 \_\_\_\_\_

L-9 Missing after Death  
L-10 Missing after Death  
L-11 \_\_\_\_\_  
L-12 \_\_\_\_\_  
L-13 \_\_\_\_\_  
L-14 X  
L-15 X  
L-16 oA

R-8 Carious X  
R-7 Carious oA fA oA  
R-6 X oA  
R-5 \_\_\_\_\_  
R-4 \_\_\_\_\_  
R-3 \_\_\_\_\_  
R-2 Carious mS  
R-1 Carious mS dS

L-1 Carious mS  
L-2 mS  
L-3 \_\_\_\_\_  
L-4 \_\_\_\_\_  
L-5 \_\_\_\_\_  
L-6 X  
L-7 oA oA  
L-8 Carious oA oA

R-16 Carious X  
R-15 Carious oA  
R-14 X oA  
R-13 \_\_\_\_\_  
R-12 \_\_\_\_\_  
R-11 \_\_\_\_\_  
R-10 \_\_\_\_\_  
R-9 \_\_\_\_\_

L-9 \_\_\_\_\_  
L-10 \_\_\_\_\_  
L-11 \_\_\_\_\_  
L-12 \_\_\_\_\_  
L-13 \_\_\_\_\_  
L-14 X X  
L-15 X oA  
L-16 X

Height: Est. 5'7-5/8"

Weight: UTD

Hair: UTD

One pair paratrooper shoes found with remains. One (1) leather billfold with the name: "Gerald B. Lameron" found in debris. Billfold contained an identification card marked: "Gerald B. Lameron, Box 236 Comstock, Michigan".

Forms 79 dtd: 2-19-44 5-24-44

Height: 5'8"

Weight: 129 Lbs.

Hair: Brown



*CU*

DEPARTMENT OF THE ARMY  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON 25, D. C.

IN REPLY REFER TO QMGT 293

Lameron, Jerald B.  
36774705

*Ju*

22 JUN 1948

SUBJECT: Identification of World War II Deceased

TO: Commanding General, American Graves Registration Command  
European Area, APO 58; c/o Postmaster, New York, New York

1. The identification of Pvt Jerald B. Lameron, 36774705,  
(formerly X 7169, Plot DD, Row 10 and  
Grave 241, USMC Newville, Belgium)  
as established by your Headquarters has been approved by this office.

2. Request all records be amended accordingly.

FOR THE QUARTERMASTER GENERAL:

1sb

3 33 PM '48  
U.S. ARMY  
RECORDS SECTION

T. H. METZ  
Lt. Colonel, QMC  
Memorial Division

HJS  
JUN



*[Handwritten signature]*



*Handwritten initials*

QMGMT 293

22 JUN 1948

Lameron, Jerald B.  
36774705

*Handwritten signature*

SUBJECT: Identification of Former Unknown Deceased

TO: Effects Quartermaster  
Army Effects Bureau  
Kansas City Quartermaster Depot  
601 Hardesty Avenue  
Kansas City 1, Missouri

Belgium DD  
36774705  
O. G. M. G.  
BIRDS BRANCH

10

241

7169

Neuville,

Pvt Jerald B. Lameron,

Mrs. Frances C. Lameron, wife, General Delivery, Birds, Ill.

BY COMMAND OF MAJOR GENERAL LARKIN:

T. H. METZ  
Lt. Colonel, QMC  
Memorial Division

NJS

JCM

lwb



*Handwritten signature*



(Holland)  
5178

*Aty*

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 U S ARMY

RRE 293.9 (IB)

10 June 1948

SUBJECT: Burial Information.

TO: The Quartermaster General  
Washington 25, D.C.

*293 Lameron, Jerald B. 36774705 In*

1. Reference is made to letter, file QMGM 293 Lameron, Jerald B., 36774705, dated 30 June 1947.

2. Unknown X-7169 has been identified as the above and reburied in US Military Cemetery Neuville-en-Condroz, plot DD, row 10, grave 241.

FOR THE COMMANDING GENERAL:

*Walter B. Morrow*  
WALTER B. MORROW  
Major, Infantry  
Actg Asst Adj Gen

*293 Unk. X-7169 Belgium (Neuville) non file 16 June 48 X. Hooper Lt. Col.*



HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

APPROVED

21 June 48

20 mth

LEMERON, Gerald B.

Pvt

36774705H METZ, Lt. Col. OCMC -

(Name)

(Rank)

 (ASN)  
 Identification Br  
 Medical Division, OQMG

previously buried as Unknown X-7169, USAC NEUVILLE  
 Identification accepted in accordance with Letter File AGAO 2930 (27 Mar 47)  
 D-M, War Dept, TAGO, 9 Apr 47, sub: Establishment of Boards of Review for  
 Identification of Unknown Dead Overseas, by the following members of the Board  
 of Review established by Par 3, Special Orders Number 33 Hq, A.G. 48, dated  
 22 Mar. 48.

Excused

Lt. Col Patrick A. Guiney O-19066 O C Maj. George M. Ver Hulst AO650035 USAF

Excused

Maj. Marshall J. Blackmon, O-277013 H F Capt. Jack C. Hayes, O-1577297 O C

1/Lt. Joseph E. McGLUCKLEY, O-1338110 H F

28 APR 1948

 MEXICO  
 MAY 18 11 29 AM '48  
 1950

 OCMC  
 MEDICAL DIVISION  
 OQMG

 file  
 24 June 48  
 J. Hayes  
 P. H.

12







## 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 :        | 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**

4	3	2	1	Thumb

**Right Hand**

4	3	2	1	Thumb

### TOOTH CHART

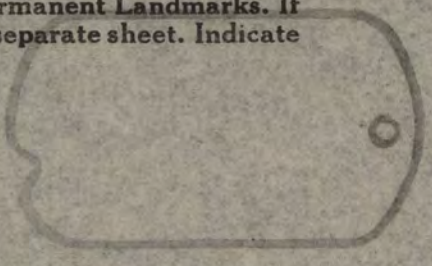
		Deceased's Left								Deceased's Right							
		8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Upper	Lower																

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

Characteristics:

Other Data:

**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.**



MAY 8 1961



Graves Registration Form No. 1 (Revised 1 Sept. 1943)

# REPORT OF BURIAL

12 Feb 48  
Date

~~BTB~~ Lemeron, Jerald B Pvt 36774705

TM 10-630 AND AR 30-1815

36774705

~~Unk X-7169~~  
Last Name

First

Initial

~~Unk~~  
Rank

~~Unk~~ Pvt  
Serial No.

~~Unk~~  
Unit

AGF - Infantry  
Organization

Kiekberg, Holland, Forest  
Place of Death

PDD 1 Oct 45  
~~Est Sept Oct 44~~  
Date of Death

~~Unk~~  
Cause of Death

15.00 14 Feb 48  
Time and Date of Burial

Neuville en Condroz, Belgium (VK -390187)  
Name of Cemetery Name or Coordinates of Location

241 10  
Grave Number Row Number

DD  
Plot Number

Temp. Wnd. Cross  
Type of Marker

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

If No Identification Tags  
How were remains identified?

Ident. by field - accepted by Col Metz 21 Jun 48

What means of identification were buried with the body?

One copy of GRS Form #1 placed in a burial bottle and buried with the remains.

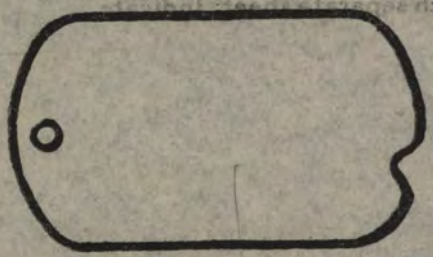
To determine Right or Left use Deceased's Right and Left.

Who is buried on :

Deceased's Right : X- 7168 Name      Unk Serial No.      Unk Rank      Unk Organization      240 Grave No.

Deceased's Left : X- 7170 Name      Unk Serial No.      Unk Rank      Unk Organization      242 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: ~~Unk~~ Mrs Frances C Lemeron, Wife  
Name

General Delivery, Birds, Illinois  
~~Unk~~  
Address

Religion: Unk

List only Personal Effects Found on Body and disposition of same: None

Remains previously buried in an isolated grave in Kiekberg Forest, Holland.

LEO H. LAMPRECHT  
USDA CIV IS

APR 2 - 1948

*Leo H. Lamprecht*  
Signature of Officer or other person reporting burial  
*Woodrow W. Wolf*  
Verified by G.R.S. Officer

WOODROW W. WOLF  
CAPT QMC OPER OFF

*file 6-22-48 Widdow*



### 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.:

Left Hand

Thumb

1

2

3

4

Right Hand

Thumb

1

2

3

4

#### TOOTH CHART

		Deceased's Left								Deceased's Right							
		8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Upper																	
Lower																	

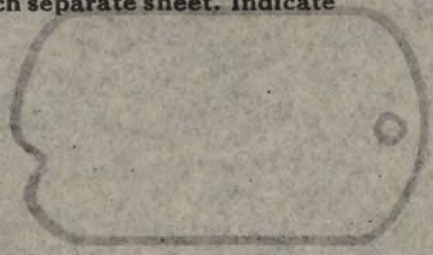
Indicate : missing natural teeth by X ; crowns by O ; fillings by □ ; Bridges by ○ ; linking anchor teeth ; replacements by artificial teeth X

Characteristics :

Other Data :



**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.**



Remains previously buried in an isolated grave in Kieberg Forest, Holmdel.

APR 2 - 1948

U.S. GPO : 1945 O - 76992 - 887 M 3-45

U.S. GPO : 1945 O - 76992 - 887 M 3-45



(Basic: Ltr WD OQMG, OQMMM 293 (Lameron, Jerald B., 36 774 705, dated 30 June 1947)

RRE 293.9 (IB)

1st Ind

Hq American Graves Registration Command, European Area, APO 58 US Army  
27 October 1947

TO: The Quartermaster General, Washington 25, D. C.

1. Inclosed herewith negative report received from the field on investigation conducted for the recovery of the remains of Private Jerald B. Lameron, 36 774 705.

2. Further action on the above is being initiated by Unidentified Deceased Branch, this headquarters.

FOR THE COMMANDING GENERAL:

Incls

- 1. OQMG Form 371 with negative report attached
- 2. Narrative - Veigh
- 3. Statement - Wesselink

*Walter B. Morrow*  
 WALTER B. MORROW *BA*  
 Major, Infantry  
 Actg Asst Adj Gen



*File  
 21 Nov 47  
 gmd*

L.O.I. SENT JUL 23 1948 *to wife amS*



A I R M A I L

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON 25, D. C.

In Reply Refer To  
OQMG 293  
**Lameron, Jerald B.**  
SN 36 774 705

30 JUN 1947

SUBJECT: Additional Information That May Lead to the Recovery  
and Identification of Remains Not Yet Accounted For.

TO: Commanding General  
American Graves Registration Command  
European Area  
APO 58, c/o Postmaster  
New York, New York

1. There is attached hereto, in duplicate, OQMG Form 371  
(covering all available information in the Office of the Quartermaster  
General and is in addition to any previous information forwarded by  
this office to your headquarters) for the following deceased individual:

<u>NAME</u>	<u>GRADE</u>	<u>SERIAL NO.</u>
Lameron, Jerald B.	Pvt	36 774 705

2. It is requested that information on the above deceased be  
furnished this office in accordance with provisions of Letter, The  
Adjutant General's Office, file AGAO 293.9 (27 Mar 47) D-M, subject  
Establishment of Boards of Review for Identification of Unknown Dead  
Overseas, dated 9 April 1947.

FOR THE QUARTERMASTER GENERAL:

Incl  
Form 371 (5 cys)

*Martin G. Riley*  
MARTIN G. RILEY  
Major, QMC  
Memorial Division

A I R M A I L

*see X7169 Newcastle*



12 August 1947

(Holland) 5178

293 FILE

## DATA ON REMAINS NOT YET RECOVERED OR IDENTIFIED

5178

NAME (Last, First, Middle Initial) Lameron, Jerald B.		GRADE Pvt	PRESENT SERIAL NUMBER 36 774 705	
ORGANIZATION Co. "G" 401st Glider Inf. 82nd Arbn. Div.		RACE White	CREED No Record	FORMER SERIAL NUMBER (If applicable)
DATE OF DEATH/MIA 30 Sept. 44	CAUSE OF DEATH PCD	PLACE OF DEATH OR PLACE LAST SEEN IF MIA Failed to return from attack in Holland		
DATE OF FOD 1 Oct. 45				
HEIGHT 5'8"	WEIGHT 129	COLOR EYES Brown	COLOR HAIR Brown	SHOE SIZE 9-8

## DENTAL CHART

23 Nov. 43

UPPER RIGHT 8 7 6 5 4 3 2 1	UPPER LEFT 1 2 3 4 5 6 7 8
LOWER RIGHT 16 15 14 13 12 11 10 9	LOWER LEFT 9 10 11 12 13 14 15 16
X = Extracted                      O = Carious                      1 = Carious Non-Restorable	

FRACTURES AND/OR BREAKS - - - -	TATTOOS AND/OR BIRTHMARK - - - -
------------------------------------	-------------------------------------

ADDITIONAL INFORMATION

Age: 26

He became MIA on above date when he was engaged in combat with the enemy in the Breedeweg (7753)Coord, Holland

OSGS 4042 Map: NW Europe 1:250,000 Sheet #2a & 3a

OPERATIONAL INSTRUCTIONS #91

Seven (7) additional men from the above organization were reported casualties on the same date:

2nd Lt Norman L. Weber,	0-1314988
S/Sgt Michael Aiello,	16055052
Sgt James D. Kittle,	35290437
Pfc John J. Hannon,	12139651
Pfc Harold D. Kemmer,	33465581
Pvt Richard L. Jenkins,	33464753

No Unknowns were recovered from Breedeweg(Sheet 2A & 3A (E-75) OVER





Unknowns X-1231, X-1230 and X-1228, interred at Margraten, were recovered from Nijmegen, Sheet 2A & 3A (E-76), which is located near Breedeweg.

An investigation of the above areas will be made and all Unknowns checked for possible association with the above named casualties.

Unknowns X-125 and X-3314(USMC Neuville) and X-1201, X-1209, X-1243, X-1929, X-2795, X-2797, X-2798, X-2799 and X-2800(USMC Margraten) were recovered from the above area and cannot be associated with above deceased.

(Holland 5178)

GRU 293.9-0

HEADQUARTERS, FIRST ZONE, 551st QM GROUP, AGRC, APO 58(Liege) US Army  
17 October 1947

TO: Commanding General  
American Graves Registration Command  
European Theater Area  
APO 58 (Paris) US Army

1. Investigation conducted in the Groesbeek(Breedeweg) area failed to locate the remains of Pvt Jerald B. LEMERON, 96774705.
2. Unknowns, as listed above, previously recovered from the Groesbeek area cannot be associated with subject deceased.
3. Since this Headquarters has conducted numerous investigations in the Groesbeek area with negative results, it is the opinion of this Headquarters that the above area has been cleared of U.S. deceased. If reprocessing of the unknowns indicated above fails to reveal any that can be associated with Pvt Lemeran it is recommended that subject casualty be declared non-recoverable.
4. Report of Investigation and attached statements pertaining to this case is inclosed herewith.

FOR THE COMMANDING OFFICER:

*Durell B Hartman*  
DURELL B HARTMAN  
1st Lt Inf  
Asst Operations Officer

2 Incls:

1. Narrative Report(Veigh)
2. Statement(Wessink)



N A R R A T I V E

This investigator first checked the Town-Hall of Groesbeek for information on any isolated American burials in Groesbeek area and was told that, since the last American was disinterred from this area, no other American deceased had been found.

Sergeant J.H.W. Wesselink, Chief of the Federal Police in Breedeweg declared that, to the best of his knowledge, there are no more Americans buried in Breedeweg and vicinity.

This investigator then went from farm to farm in Breedeweg, asking for information on isolated American burials. All answers were negative. In a last effort to obtain some information about Americans buried in this area this investigator contacted several local newspapers and asked them to print an announcement that area is being swept again by AGRC personnel, and also requesting that everybody having any information whatever on American burials contact the Chief of Police in their respective towns and villages. These Chief of Police will contact this investigator.

*Hendrick Veigh*  
HENDRICK VEIGH  
US WD Civilian  
Investigator



SECTION OF ARNHEM - STATE POLICE  
GROUP OF GROESBEEK  
BREDEWEG POST

---

Holland 5178

S T A T E M E N T

Undersigned, Sergeant 1st class of the State Police, Post Commander of post Bredeweg (Groesbeek), herewith declares, to the best of his knowledge, that there are no more graves of American soldiers on the territory of his post and that in case graves are found, they will immediately be reported to the communal secretary at Groesbeek.

The Sergeant,

/s/t/ J.H.W. Wesselink

CERTIFIED TRUE COPY:

*Durell B Hartman*  
DURELL B HARTMAN  
1st Lt. Infantry

Certified True Translation:

*I. Weber*  
I. Weber  
Translator



A I R M A I L

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON 25, D. C.

In Reply Refer To  
QMGM 293

30 JUN 1947

293 Lameron, Jerald B.  
SN 36 774 705

SUBJECT: Additional Information That May Lead to the Recovery  
and Identification of Remains Not Yet Accounted For.

TO: Commanding General  
American Graves Registration Command  
European Area  
APO 58, c/o Postmaster  
New York, New York

1. There is attached hereto, in duplicate, OQMG Form 371  
(covering all available information in the Office of the Quartermaster  
General and is in addition to any previous information forwarded by  
this office to your headquarters) for the following deceased individual:

<u>NAME</u>	<u>GRADE</u>	<u>SERIAL NO.</u>
Lameron, Jerald B.	Pvt	36 774 705

2. It is requested that information on the above deceased be  
furnished this office in accordance with provisions of Letter, The  
Adjutant General's Office, file AGAO 293.9 (27 Mar 47) D-M, subject  
Establishment of Boards of Review for Identification of Unknown Dead  
Overseas, dated 9 April 1947.

FOR THE QUARTERMASTER GENERAL:

Incl  
Form 371 (5 cys)

gwa

MARTIN G. RILEY  
Major, QMG  
Memorial Division

MEMORIAL DIVISION  
JUN 30 10 35 AM '47  
REGISTRATION AND  
RECORDS BRANCH

A I R M A I L

KK



293 FILE

## DATA ON REMAINS NOT YET RECOVERED OR IDENTIFIED

NAME (Last, First, Middle Initial) Lameron, Jerald B.		GRADE Pvt	PRESENT SERIAL NUMBER 36 774 705	
ORGANIZATION Co. "G" 401st Glider Inf. 82nd Airb. Div.		RACE White	CREED No Record	FORMER SERIAL NUMBER (If applicable)
DATE OF DEATH/MIA 30 Sept. 44	CAUSE OF DEATH FCD		PLACE OF DEATH OR PLACE LAST SEEN IF MIA Failed to return from attack in Holland	
DATE OF FOD 1 Oct. 45				
HEIGHT 5'8"	WEIGHT 129	COLOR EYES Brown	COLOR HAIR Brown	SHOE SIZE 9-10

## DENTAL CHART

23 Nov. 43

UPPER RIGHT X 8 7 6 5 4 3 2 1 O O	UPPER LEFT 1 2 3 4 5 6 7 8
LOWER RIGHT X 16 15 14 13 12 11 10 9	LOWER LEFT 9 10 11 12 13 14 15 16 X X
X = Extracted	
O = Carious	
I = Carious Non-Restorable	

FRACTURES AND/OR BREAKS - - - -	TATTOOS AND/OR BIRTHMARK - - - -
------------------------------------	-------------------------------------

## ADDITIONAL INFORMATION

Age: 26

He became MIA on above date when he was engaged in combat with the enemy in the Breedsweg (7753) Coord, Holland

OSGS 4042 Map: NW Europe 1:250,000 Sheet #2a &amp; 3a



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

4160

**FINDING OF DEATH OF MISSING PERSON**

Pursuant to the provisions of Section 5 of the Act of 7 March 1942 (Public Law 490 77th Cong.) as amended, upon direction and delegation by The Secretary of War, The Chief, Casualty Branch, The Adjutant General's Office, finds Private Jerald B. Lemeron,  
Army Serial Number 36,774,705, Infantry.

to be dead. He was officially reported as missing in action as of the 30th day of September 1944. For the purposes stated in said Act, death is presumed to have occurred on the 1st day of October, 1945.

BY ORDER OF THE SECRETARY OF WAR

*George F. Hebert*

ADJUTANT GENERAL  
CHIEF, CASUALTY BRANCH

SUMMARY OF INFORMATION

AREA  European	FLYING STATUS  No	JUMP STATUS  No	LINE OF DUTY  Yes	OWN MIS-CONDUCT  No	ON DUTY STATUS  Yes	ABSENCE AUTH'D
PREVIOUS REVIEWS  None						
DATE OF BIRTH  18 Oct 1918	HOME ADDRESS  Lawrenceville, Illinois	DATE OF ENTRY ON CURRENT ACTIVE SERVICE  14 Dec 1943	LENGTH OF SERVICE (AS OF PRESUMED DATE OF DEATH)			
			YEARS	MONTH	DAYS	
			Under	three	years	

EMERGENCY ADDRESSEE

NAME  Mrs. Frances C. Lemeron	RELATIONSHIP  Wife	ADDRESS  General Delivery Birds, Illinois
-------------------------------------	--------------------------	--

\* BENEFICIARIES

NAME  Frances Conover Lemeron	RELATIONSHIP  Wife	ADDRESS  General Delivery Birds, Illinois
NAME  Patricia Ann Lemeron Karen Lee Lemeron	RELATIONSHIP  Daughter Daughter	ADDRESS  General Delivery Birds, Illinois

REMARKS

Distribution 56

\* Alternate beneficiaries:

Mrs. Bertha Shydler Lemeron (Mother)  
Mr. Charles Henry Lemeron (Father)  
Flat Rock, Illinois

Circumstances of Disappearance: Soldier failed to return from an attack in Holland.

Entitled to additional pay for glider flights.

*File  
10-8-45  
gms*



## SENSITIVE SURFACE - HANDLE EDGES ONLY

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

DATE 13 July 1948 amc.

## REPORT OF DEATH

FULL NAME Lameron, Jerald B.		ARMY SERIAL NUMBER 36,774,705	GRADE Pvt.
HOME ADDRESS Lawrenceville, Illinois		ARM OR SERVICE Infantry	DATE OF BIRTH 18 Oct 1918
PLACE OF DEATH Holland	CAUSE OF DEATH Killed in action		DATE OF DEATH 30 Sept 1944
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 14 Dec 1943	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS

EMERGENCY ADDRESSEE (Name, relationship, and address)

Mrs. Frances C. Lameron, wife, General Delivery, Birds, Illinois.

BENEFICIARY (Name, relationship, and address)

Mrs. Frances C. Lameron, wife, Same as above.  
 Patricia Ann Lameron, daughter, General Delivery, Birds, Illinois.\*

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		
												<input checked="" type="checkbox"/>	BATTLE	<input type="checkbox"/>	NON-BATTLE

ADDITIONAL DATA AND/OR STATEMENT

\*Karen Lee Lameron, daughter, General Delivery, Birds, Illinois.

## Alternate beneficiaries:

Mrs. Bertha Shydler Lameron, mother, Flat Rock, Illinois.  
 Mr. Charles Henry Lameron, father, Flat Rock, Illinois.

Finding of death has been issued previously under Section 5, Public Law 490 7 March 1942, as amended, showing presumed date of death as 1 October 1945. This "Report of death" based on information received since that date is issued in accordance with Section 9, of said Act, and its effect on prior payments and settlements is as prescribed in Section 9.

File  
 P. Sharpe  
 27 July 48

BY ORDER OF THE SECRETARY OF THE ARMY  
~~XXXXXXXXXXXXXXXXXXXX~~

*Ammer*

ADJUTANT GENERAL



**DEPARTMENT OF THE ARMY**  
**THE ADJUTANT GENERAL'S OFFICE**  
 WASHINGTON 25, D. C.

**—BATTLE CASUALTY REPORT**

AG 201	NAME <b>LEMERON JERALD B</b> <b>ASN 36774705</b>	GRADE <b>PVT</b> <b>HUS</b>	DATE CAS. REPORT RECEIVED  
NAME AND ADDRESS OF E. A. <b>MRS FRANCES C LEMERSON</b> <b>GENERAL DELIVERY</b> <b>BIRDS ILLINOIS</b>	DATE TELEGRAM SENT 1948 JUL 6 <i>Lt</i> 8 July 48		

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

THE SECRETARY OF ~~WAR~~ **WAR** HAS ASKED ME TO EXPRESS HIS DEEP REGRET THAT YOUR **HUSBAND**

GRADE	NAME	SERIAL NUMBER	ARM OR SERVICE	REPORTING THEATRE	F OR J STATUS	SHIPMENT NUMBER
	<i>293</i> LEMERON, JERALD B.	36774705	INF	6		184013- U-1X
TYPE OF CASUALTY		PLACE OF CASUALTY			DATE OF CASUALTY	
KILLED IN ACTION		IN HOLLAND			DAY MONTH YEAR 30 SEP 44	
CASUALTY CODE						

REMARKS: AG 201 /1 JUL 48/  CORRECTED COPY

MEMO: DET UNIT. APPROVED: OIC CAS SEC PAB. PL: KIEKBERG FOREST. GLIDE. SOURCE OF INFO: WD - GRF # 1 - RPT DEATH, DTD 31 MAR 48, APPROVED BY CHIEF, IDENTIF BR, OQMG, 21 JUN 48, SHOWS UNK X-7169 /NEUVILLE/ IDENTIFIED AS ABOVE. SEE MSG FOR ADD DETAILS. STA AND PL DEATH: ETO. FOD ISSUED PREV UNDER SEC 5, MPA, SHOWING PRESUMED DATE DEATH 1 OCT 45. RPT DEATH BASED ON INFO RECD SINCE THAT DATE IS ISSUED IN ACCORD WITH SEC 9, SAID ACT, ITS EFFECT ON PRIOR PAYMENTS AND SETTLEMENTS IS AS PRESCRIBED IN SEC 9.

**HOME ADDRESS: LAWRENCEVILLE, LAWRENCE CO., ILL.** Reports of death issued 13 Jul PROCESS IN ACCORD WITH OPER BUL 35, 1945. ROUTE TO NOTIF SUB UNIT FOR NOTIF, COPY OF NOTIF LTR TO BE FWDED TO DET UNIT /FOR QMG/.

ACTION BY COMPOSITE SECTION		REPORT VERIFIED <input checked="" type="checkbox"/>	FORM 43	AG 201 REQ
CASUALTY BRANCH FILE ATTACHED <input checked="" type="checkbox"/>		OR CHARGED TO		DATE
PREVIOUSLY REPORTED		NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>	(AS INDICATED BELOW):
FILE NO.	MESSAGE NO.	TYPE	DATE AND AREA	E. A. NOTIFIED
		DED	10 Oct 45 ETO	10 Oct 45
FORWARDED TO	SPEC. IDEN.	C. & P.	TELEGRAM	LETTER
				<input checked="" type="checkbox"/>
				CERTIF.
				F REL.
				CORRES.
				REPAT.
				S. F. & D.
				NON-DES
REPORT NOT VERIFIED		NO FORM 43	NO CAS. BR. FILE	CHECKED BY <i>Rmc</i>
DISTRIBUTION "A" <input type="checkbox"/>		31 <del>2</del> COPIES	DISTRIBUTION "B" <input type="checkbox"/>	COPIES



SENSITIVE SURFACE - HANDLE EDGES ONLY

286,517

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

DATE 13 July 1948 amc.

## REPORT OF DEATH

FULL NAME <b>Lameron, Jerald B.</b>		ARMY SERIAL NUMBER <b>36,774,705</b>	GRADE <b>Pvt.</b>
HOME ADDRESS <b>Lawrenceville, Illinois</b>		ARM OR SERVICE <b>Infantry</b>	DATE OF BIRTH <b>18 Oct 1918</b>
PLACE OF DEATH <b>Holland</b>	CAUSE OF DEATH <b>Killed in action</b>		DATE OF DEATH <b>30 Sept 1944</b>
STATION OF DECEASED <b>European Area</b>	DATE OF ENTRY ON CURRENT ACTIVE SERVICE <b>14 Dec 1943</b>		LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS

EMERGENCY ADDRESSEE (Name, relationship, and address)

Mrs. Frances C. Lameron, wife, General Delivery, Birds, Illinois.

BENEFICIARY (Name, relationship, and address)

Mrs. Frances C. Lameron, wife, Same as above.  
Patricia Ann Lameron, daughter, General Delivery, Birds, Illinois.\*

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		
												<input checked="" type="checkbox"/>	BATTLE	<input type="checkbox"/>	NON-BATTLE

ADDITIONAL DATA AND/OR STATEMENT

\*Karen Lee Lameron, daughter, General Delivery, Birds, Illinois.

Alternate beneficiaries:

Mrs. Bertha Shydler Lameron, mother, Flat Rock, Illinois. RR #2

Mr. Charles Henry Lameron, father, Flat Rock, Illinois.

Finding of death has been issued previously under Section 5, Public Law 490 7 March 1942, as amended, showing presumed date of death as 1 October 1945. This "Report of death" based on information received since that date is issued in accordance with Section 9, of said Act, and its effect on prior payments and settlements is as prescribed in Section 9.

BY ORDER OF THE SECRETARY OF THE ARMY  
~~XXXXXXXXXXXXXXXXXXXX~~

*Amundson*

ADJUTANT GENERAL



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

286517

**BATTLE CASUALTY REPORT**

NAME		SERIAL NUMBER		GRADE	ARM OR SERVICE	REPORTING THEATRE
LEMERON JERALD B		36774705		PVT	INF	ETO
PLACE OF CASUALTY	DATE OF CASUALTY			FLYING OR JUMPING STAT	TYPE OF CASUALTY	SHIPMENT NUMBER
	DAY	MONTH	YEAR			
HOLLAND9	30	SEP	44	W	MIA	227

## 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	RELATIONSHIP	DATE NOTIFIED
MRS FRANCES C LEMERON	WIFE	30 Oct 44 amb
NO. AND NAME OF STREET—CITY—STATE		
FLAT ROCK ILLINOIS		

REMARKS:

 CORRECTED COPY


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

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

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

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(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.



ELL-CP-1000

XXXXXXXXXXXXXXXXXXXX

286517

HCC/LL/ps  
14 December 1948

*lin*

TO: Mrs. Frances Carter  
Box 106  
Flat Rock, Illinois

BURO OF INVESTIGATION  
FEDERAL BUREAU OF  
INVESTIGATION

Dear Mrs. Carter:

FOR THE COMMANDING OFFICER:

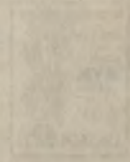
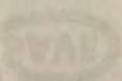
Thank you for the information recently given the Army Effects Bureau in connection with the disposal of property belonging to Private Jerald B. Lameron.

This property, consisting of one identification card, part of a billfold, and one photo, was sent you under separate cover 10 December 1948, for disposition. If, for some reason, the property has not reached you within thirty days, please notify this Bureau so tracer can be instituted.

CHIEF OF BUREAU  
Sincerely yours,

H. O. CALDWELL  
Effects Quartermaster

RE: Jerald B. Lameron







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

IN REPLY REFER TO \_\_\_\_\_

SUBJECT: Request for Information

TO: The Adjutant General  
Demobilized Personnel Records Branch  
Records Administration Center  
4300 Goodfellow Boulevard  
St. Louis 20, Missouri  
ATTENTION: Miss Melva Mae Doyle  
Chief Clerk  
World War II Personnel Records Section

1. It will be appreciated if the necessary information be filled in on the inclosed Effects Bureau Forms 20. It is desired to point out that these Forms 20 are all second requests for information. They are being sent in a group to expedite the supply of information on as many of the Forms 20 as possible.

2. Your cooperation in this regard is solicited to enable the shipment of properties for all individuals concerned.

FOR THE COMMANDING OFFICER:

Incls  
Forms 20

M. E. MOHR  
Major, QMC  
Effects Quartermaster



AMOUNT OF CHECK	NOTE DISCREPANCY IN NAME	INCLOSE VALUABLES SHIP VALUABLES	RECIPIENT FROM CASUALTY REPORT
ACCOUNT NUMBER	SERIAL NUMBER	VALUABLES SHIPPED BY (clerk)	INVENTORY FORM 20
	RANK		LETTER
<p>Mrs. Frances Carter Box 106 Flat Rock, Illinois</p> <p>Pvt Jerald B. Lemeron 36774705 286517 D</p>			NO. & TYPE OF CONTAINER
			ENVELOPE
			CARTONS
			PACKAGE
			FOOT LOCKER
			SPECIAL INSTRUCTIONS
			REMOVE GI
			SHIP BLOODSTAINED
			SHIP DAMAGED
			REMOVE BL'DSTAINED
			REMOVE DAMAGED
<p>LL/sm</p> <p>DATE OF FINDING <i>12-1</i></p>			DATE ACTION TAKEN <i>12-9-48</i>
			MAIL REVIEWER (initials) <i>sm</i>
SUMMARY COURT DATA			
APPLICANT <i>widow</i>			
REMARKS			SHIPPED
			FRANKED
			EXPRESS
			FREIGHT
			DATE SHIPPED <i>DEC 10 1948</i>
			SHIPPING CLERK <i>JG</i>
			ROUTING
ACCOUNTING BRANCH			
WAREHOUSE			
FILE			

ORDER FOR ACTION

*10/1001*



*Lemerow Jerald B Home*

ATTACHMENTS	EFFECTS INVENTORY ARMY EFFECTS BUREAU	STATUS
<input checked="" type="checkbox"/> INBOUND INVENTORY <input checked="" type="checkbox"/> G. R. OR SUB GR LABEL <input type="checkbox"/> WILL OR POWER OF ATTY. <input checked="" type="checkbox"/> TALLY IN FORM 43	36714705  286,517	DECEASED MISSING P. O. W. ABANDONED UNKNOWN

BAGS, CLOTH OR TRAVEL	BELT	OVERCOATS	
BELT, MONEY (NO MONEY)	BOOKS, ADDRESS	PAPERS, PERSONAL	1 Identification card ✓  1 piece of deteriorated billfold ✓  1 photo badly faded & damaged by moisture
BILLFOLD (NO MONEY)	BOOKS, PILOT LOG	PENCIL, MECHANICAL	
BOOKS	BRUSHES	PEN, FOUNTAIN	
BRACELET, IDENT.	CASE	PHOTOS	
CAMERAS	CLOTH. WASH	PIPES	
CLOTHING	COATS	RINGS	
MISC. ARTICLES	FOOTLOCKER	SCARFS	
RELIGIOUS ARTICLES	FOOTWEAR, PR.	SHIRTS	
RIBBONS, DECORATION	GLASSES	SOCKS, PR.	
SHORT SNORTER	GLOVES, PR.	STATIONERY	
SOUVENIR MONEY	HANDKERCHIEFS	TIES	
SOUVENIRS	HEADWEAR	TOBACCO	
TESTAMENTS	JACKETS	TOILET ARTICLES	
TOWELS & WASHCLOTHS	KITS	TOWELS	
U. S. MONEY (AMOUNT)	KNIVES	TROUSERS, PR.	
WATCH	LETTERS	TRUNKS, PR.	
WINGS	LIGHTERS	UNDERWEAR	

CONTAINERS ADDRESSED TO <i>none</i>	INFORMATION <i>none</i>  <i>see back</i>
NAME AND STATUS VARIATIONS <i>shows unid # 30 mk. X-7169</i>	CROSS REFERENCE <i>piece of billfold w/ name JERALD B. LEMERON Ident. card shows: JERALD B. LEMERON BOX 236 COMSTOCK, MICH.</i>

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

TALLY NO. <i>8684</i>	ORIG. NO. OF PKGS.	EXAMINING DATE <i>21 Oct. 48</i>	BOX NO.	SHEET _____ OF _____ SHEETS
NAME <i>unknown # 3695</i>			A. S. N. ✓	
ORGANIZATION			RANK ✓	CASE NO.
WAREHOUSE SPACE <i>S</i>		EXAMINED BY <i>Roberts</i>		DIARY REMOVED
PACKAGE DESCRIPTION <i># IENV</i>		PACKED BY <i>Hank Smith</i>		PHOTO FILM REMOVED
WEIGHT		INSPECTED BY <i>[Signature]</i>		MOTION PICTURE FILM REMOVED
		STORED BY <i>[Signature]</i>		SHIPPED
				DATE <i>DEC 10 1948</i>
				BY WHOM <i>[Signature]</i>



ADDITIONAL REMARKS

REMOVALS (other than G. I.)

DAMAGES (List type of damage-extent)

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



Aid to Identification

17-1451

Serial No. \_\_\_\_\_ Name *X 7169*  
 Grade \_\_\_\_\_ Rank \_\_\_\_\_  
 Organization \_\_\_\_\_  
 Address \_\_\_\_\_  
 Nearest Relative \_\_\_\_\_  
 Address \_\_\_\_\_  
 Killed in Action \_\_\_\_\_ Died of Disease \_\_\_\_\_  
 Date \_\_\_\_\_ Hospital \_\_\_\_\_  
 Battle Area \_\_\_\_\_ Information \_\_\_\_\_  
 Place of Burial *Newville*  
 Point of Coordination \_\_\_\_\_  
 Description of Body \_\_\_\_\_  
 \_\_\_\_\_  
 Members Missing \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

LAB

Signed \_\_\_\_\_



UNID. #30 UNK. X-7169

BAY

PALLET

BOX

TALLY  
8684

TYPE P  
GRB

10-13-48  
NYPE



CEMETERY: Neuville

RESTRICTED

SUBJECT : Inventory of PERSONAL EFFECTS -of : Date \_\_\_\_\_

X-7169

(Last Name)

(First Name)

(MI)

(Rank)

(ASN)

TO : EFFECTS QUARTERMASTER, Army Effects Bureau, Kansas City, Missouri.

The above individual of \_\_\_\_\_ (Unit) \_\_\_\_\_ (Organization)

was reported \_\_\_\_\_ (Deceased, Missing, etc.) about \_\_\_\_\_ 194

Designated beneficiary if information readily accessible :

NAME : \_\_\_\_\_ ADDRESS \_\_\_\_\_

INVENTORY OF EFFECTS

Remnant of billfold, printed in gold: Jerald B. Lemeron  
Identification card: 356-10-7270 Jerald B. Lemeron  
Box 236  
Comstock Mich.

1 photo. ✓

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

Forwarded to Personal Effects Depot

Money in the amount of \_\_\_\_\_ (here identify currency) has been exchanged

for US Treasury check No : \_\_\_\_\_ amounting to \$ \_\_\_\_\_

Known bank account in European Theater : \_\_\_\_\_ (List name of bank and account number)

I certify that the above items constitute all effects secured by me, belonging to the above named individual and that they were forwarded to the Army Effects Bureau Kansas City, Missouri

on \_\_\_\_\_ 194 \_\_\_\_\_ through \_\_\_\_\_ (forwarding agency)

Signed : KURT SCHNELLENBACH Lt. Col. OMC. Depot Quartermaster  
(Name) (Rank & ASN) (Organization)

(List any additional information on reverse side)

RESTRICTED

CHECKED *J.F.-803*



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

Case No. 286517  
JSD/LL/sm  
Date 8 December 1948

SUBJECT: Report of transactions in disposing of the effects of

Jerald B. Lameron, 36774705 late a  
(Name of deceased) (Army Serial Number)  
Private, Infantry who died  
(Grade) (Organization, Arm or Service)  
on the 30th day of September, 1944, at Holland.

TO: The Adjutant General, War Department, Washington 25, D. C.

1. Complying with A.W. 112, a Summary Court-Martial, convened at Kansas City, Mo., pursuant to S.O. 59 Hq., KCQM Depot, dated 25 Mar 48 for the purpose of disposing of the effects of the above-named soldier, or person subject to military law reports that:

- a. No legal representative or widow of decedent being present at decedent's camp or quarters, effects of decedent were forwarded to this Summary Court-Martial.
- b. Local debtors owed decedent's estate \$ none of which the sum of \$ none was collected. (If nothing was found due or collected, state "None", otherwise attach itemized statement of sums owing and collected.) (Incl. none)
- c. Decedent owed undisputed local creditors the sum of \$ none, which has been paid by the Summary Court-Martial from funds of decedent. (See inclosed receipt none, Incl none).
- d. Disposition of decedent's effects (less money paid creditors, if any) has been made by the Summary Court-Martial by transmittal through the Quartermaster Corps, at Government expense to person found entitled (See Summary Court-Martial FINDING below).

FINDING

Before a Summary Court-Martial which convened at Kansas City, Missouri, on 1 December 1948, pursuant to S.O. 59, Headquarters, KCQM Depot, dated 25 March 1948, the application or affidavit of Mrs. Frances Carter for the effects of the above-named deceased soldier, or person subject to military law, now in the possession of the United States, with other relevant evidence, was duly considered;

Whereupon, this Summary Court-Martial finds that, under the provisions of A.W. 112,

Mrs. Frances Carter of  
(Name of person found entitled)  
Box 106, Flat Rock State of  
(Number, Street or Avenue) (City, Town or Village)  
Illinois is the widow of the  
(Relationship or Capacity)

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





ARMY EFFECTS BUREAU

KANSAS CITY QUARTERMASTER DEPOT  
ARMY EFFECTS BUREAU

601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

HOC/BM/mjo'c  
10 November 1948

IN REPLY REFER TO 286517

Mrs. Frances C. Lemeron  
General Delivery  
Birds, Illinois

Dear Mrs. Lemeron:

The Army Effects Bureau has received from a Graves Registration Officer overseas one identification card, a remnant of a billfold, and one photo belonging to your husband, Private Jerald B. Lemeron. The photo is badly faded and damaged by moisture.

I shall appreciate it if you will indicate whether you wish these articles sent you. If so, the property will be forwarded promptly upon receipt of the confirmation of your address.

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

Sincerely yours,

*H O Caldwell*

H. O. CALDWELL  
Effects Quartermaster

1 Incl  
Envelope

*Handwritten notes:*  
all at auto sent down  
with the envelope  
Box 100  
All good stuff



Please send these articles to the  
following address:

Mrs. Frances Carter

Box 106

Flat Rock, Ill.

NOV 29 1948  
KANSAS CITY, MO.





DEPARTMENT OF THE ARMY  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON 25, D.C.

QMGM 293  
Lameron, Jerald B.  
36774705

286,517

22 JUN 1948

DATE

SUBJECT: Identification of Former Unknown Deceased

TO : Effects Quartermaster  
Army Effects Bureau  
Kansas City Quartermaster Depot  
601 Hardesty Avenue  
Kansas City 1, Missouri

1. The remains previously interred as Unknown X- 7169,  
Plot DD, Row 10, Grave 241, USMC Newville,  
Belgium, have been identified by the Graves  
Registration Service in the Field as those of Pvt Jerald B. Lameron,  
36774705 whose emergency addressee  
is: Mrs. Frances C. Lameron, wife, General Delivery, Birds, Ill.

2. The identification as established has been approved by the Identification Board of Review, this office.

BY COMMAND OF MAJOR GENERAL LARKIN:

*T. H. Metz*  
T. H. METZ  
Lt. Colonel, QMC  
Memorial Division

*cross ref. made  
for*

*file  
for*

RECORDED COPY  
67 JUN 23 1948  
JUN 25 3 34 PM '48



286,517

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

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

CONTAINERS ADDRESSED TO	INFORMATION
<i>None</i>	<i>wife</i> <i>Mrs. Frances Lea Lameron</i> <i>Flat Rock Ill</i>
NAME AND STATUS VARIATIONS	CROSS REFERENCE
<i>43 - Gerald B Lameron</i>	

CHECK	REC'D BY	NUMBER	BUREAU CHECK
		SYMBOL	TRANSMIT ORIGINAL
		AMOUNT	ORIG. REG. MAIL
		DATE	TO G. A. O.
		BANK OR PLACE OF ISSUE	MUTILATED
		PAYEE	TO ISSUING AGENCY
		REMITTER OR DRAWER	

TALLY NO.	ORIG. NO. OF PKGS.	EXAMINING DATE	BOX NO.	SHEET
<i>7055</i>		<i>28 - Feb - 46</i>		OF _____ SHEETS
NAME			A. S. N.	
<i>GERALD B LAMERON</i>			<i>38774</i>	
ORGANIZATION			RANK	CASE NO.
			<i>priv</i>	
WAREHOUSE SPACE		EXAMINED BY	DIARY REMOVED	
		<i>C Williams</i>	PHOTO FILM REMOVED	
PACKAGE DESCRIPTION		PACKED BY	MOTION PICTURE FILM REMOVED	
WEIGHT		INSPECTED BY	SHIPPED	
		STORED BY	DATE	BY WHOM



ADDITIONAL REMARKS

REMOVALS (other than G. I.)

DAMAGES (List type of damage-extent)

*D Tag removed*

*(Signature)*

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

*108 d Tag*



LEMERON, GERALD B. PVT. 4705

DAY

PALLET

BOX

TALLY 7055

TYPE PH  
ENV





1-10-52

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

S-20 Aug 49  
HOC/DF/zrs  
20 July 1949

IN REPLY REFER TO 286,517

REQUEST FOR INFORMATION

8

293

Lameron, Jerald B

Pvt

36774705

(Name)

(Rank)

(ASN)

FORMERLY UNKNOWN X-7169 NEUVILLE

INFANTRY CO "G" 401ST GLDR INF RGT 82ND AIRBORNE DIV

(Branch of service and/or Organization)

(Following to be filled in by OQMG)

NEXT OF KIN MRS FRANCES L. CARTER

WIDOW (REMARIED)

(Name)

(Relationship)

ADDRESS FLAT ROCK, ILLINOIS

PREVIOUS SHIPMENT X YES NO (Check one)

DATE OF LAST PREVIOUS SHIPMENT (If any) 10 DEC 48

SUMMARY COURT MADE (Eff QM Form 75) X Yes NO (Check one)

TO WHOM (If made) SAME

(If same as NOK, write same)

Write below the name and address of an alternate beneficiary or an individual we have previously contacted in the case file. If a relative, list his relationship. This information will be used only if the next of kin noted above cannot be located.

PATRICIA A. & KAREN L. LEMERON (DAUGHTERS)

MR. CHARLES H. LEMERON (FATHER)

SAME AS WIDOW'S

RURAL ROUTE #2

FLAT ROCK, ILLINOIS

Signature

*William F. Conlon*

WILLIAM F. CONLON, MAJOR, QMC

Remarks: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



QMGOD 293, Lameron, Jerald B., Pvt. 1st Ind.  
SN 36 774 705

Department of the Army, OQMG, Washington 25, D. C., 29 July 1949

TO: Commanding Officer, Quartermaster Activities  
Kansas City Records Center (AGO), Missouri  
ATTENTION: Effects Quartermaster

Information requested has been entered on basic form.

BY COMMAND OF MAJOR GENERAL ~~XXXXXXXX~~ MIDDLESWART:

*William F. Conlon*  
WILLIAM F. CONLON  
Major, QMC  
Field Service Division



XXXXXXXXXXXX

286517 ✓

HOG/NS/ejr ✓  
24 August 1949 ✓

*Lw*

Mrs. Frances L. Carter ✓  
Box 106 ✓  
Flat Rock, Illinois ✓

Dear Mrs. Carter: ✓

Thank you for the information recently given the Army Effects Bureau in connection with the disposal of property belonging to the late Private Jerald B. Lemeron. ✓

This property, consisting of four souvenir coins, was sent you under separate cover 23 August 1949, for disposition.

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

Sincerely yours,

H. O. CALDWELL  
Effects Quartermaster



AMOUNT OF CHECK	NOTE DISCREPANCY IN ✓ ME	INCLOSE VALUABLES SHIP VALUABLE	RECIPIENT FROM CASUALTY REPORT
ACCOUNT NUMBER	SERIAL NUMBER	VALUABLES SHIPPED BY (clerk)	INVENTORY FORM 20
	RANK		✓ LETTER
<p>Mrs. Frances L. Carter ✓</p> <p>Box 106</p> <p>Pvt Jerald B. Lameron Flat Rock, Illinois</p> <p>36774705</p> <p>286517 D</p>			NO. & TYPE OF CONTAINER
			✓ ENVELOPE
			CARTONS
			PACKAGE
			FOOT LOCKER
			SPECIAL INSTRUCTIONS
			REMOVE GI
			SHIP BLOODSTAINED
			SHIP DAMAGED
			REMOVE BL'DSTAINED
REMOVE DAMAGED			
FILMS REMOVED			
DIARY REMOVED			
HOC/NS/mjo'c	SUMMARY COURT DATA		DATE ACTION TAKEN
DATE OF FINDING	APPLICANT		8-22-49
REMARKS  Code B			MAIL REVIEWER (initials)
			fm
			SHIPPED
			1 FRANKED
			EXPRESS
			FREIGHT
			DATE SHIPPED
			AUG 23 1949
			SHIPPING CLERK
			Jy
ROUTING			
ACCOUNTING BRANCH			
WAREHOUSE			
FILE			
ORDER FOR ACTION			1 B/L & Clerk



*Gerald*

*286 517*

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

BAGS, CLOTH OR TRAVEL BELT, MONEY (NO MONEY) BILLFOLD (NO MONEY) BOOKS BRACELET, IDENT. CAMERAS CLOTHING MISC. ARTICLES RELIGIOUS ARTICLES RIBBONS, DECORATION SHORT SNORTER SOUVENIR MONEY SOUVENIRS TESTAMENTS TOWELS & WASHCLOTHS U. S. MONEY (AMOUNT) WATCH WINGS	BELT BOOKS, ADDRESS BOOKS, PILOT LOG BRUSHES CASE CLOTH, WASH COATS FOOTLOCKER FOOTWEAR, PR. GLASSES GLOVES, PR. HANDKERCHIEFS HEADWEAR JACKETS KITS KNIVES LETTERS LIGHTERS	OVERCOATS PAPERS, PERSONAL PENCIL, MECHANICAL PEN, FOUNTAIN PHOTOS PIPES RINGS SCARFS SHIRTS SOCKS, PR. STATIONERY TIES TOBACCO TOILET ARTICLES TOWELS TROUSERS, PR. TRUNKS, PR. UNDERWEAR	1-3 <i>Pence British</i> 3-1 <i>Penny British</i>
--	---	---	--

<b>CONTAINERS ADDRESSED TO</b> <i>None</i>	<b>INFORMATION</b> <i>None</i> <div style="text-align: center; color: red; font-size: 2em; font-weight: bold;">Rechecked</div>
<b>NAME AND STATUS VARIATIONS</b>	<b>CROSS REFERENCE</b>

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

TALLY NO. <i>8966</i>	ORIG. NO. OF PKGS.	EXAMINING DATE <i>29 June 49</i>	BOX NO.	SHEET _____ OF _____ SHEETS
NAME <i>GERALD B LEMERON</i>			A. S. N. <i>36774705</i>	
ORGANIZATION			RANK <i>Pvt</i>	CASE NO.
WAREHOUSE SPACE <i>5</i>		EXAMINED BY <i>Gesson</i>	DIARY REMOVED	
PACKAGE DESCRIPTION <i>#1 Env 1</i>		PACKED BY <i>Querna</i>	PHOTO FILM REMOVED	
		INSPECTED BY	MOTION PICTURE FILM REMOVED	
		STORED BY	SHIPPED	
			DATE <i>AUG 23 1949</i>	BY WHOM <i>[Signature]</i>



ADDITIONAL REMARKS

REMOVALS (other than G. I.)

DAMAGES (List type of damage-extent)

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

ARMY EFFECTS BOARD  
EFFECTS INVENTORY



Serial No. 36714705 Name LEMERON, Gerald E  
 Grade PVT Rank PVT  
 Organization \_\_\_\_\_  
 Address \_\_\_\_\_  
 Nearest Relative \_\_\_\_\_  
 Address \_\_\_\_\_  
 Killed in Action \_\_\_\_\_ Died of Disease \_\_\_\_\_  
 Date \_\_\_\_\_ Hospital \_\_\_\_\_  
 Battle Area \_\_\_\_\_ Information 4 COINS (ENGLISH)  
 Place of Burial Newville DD-10-24  
 Point of Coordination \_\_\_\_\_  
 Description of Body \_\_\_\_\_  
 Members Missing \_\_\_\_\_

Signed

V. N. HOYT 1/LT INF  
 D.M. HOYT



Lameron, Gerald B.

Pvt

36774705

BAY

PALLET

BOX

TALLY

8966

TYPE PKG.

G/I

6-28-49

AGRC APO 58



CEMETERY: NEUVILLE  
DD-10-241

R E S T R I C T E D

SUBJECT: Inventory of Personal Effects of: Date \_\_\_\_\_

LEMERON, Gerald B. Pvt., 36774705  
(Last Name) (First Name) (MI) (Rank) (ASN)

TO: EFFECTS QUARTERMASTER, Army Effects Bureau, Kansas City, Missouri.

The above individual of \_\_\_\_\_  
(Unit) (Organization)

was reported \_\_\_\_\_ about \_\_\_\_\_ 194  
(Deceased, Missing, etc.)

Designated beneficiary if information readily accessible:

NAME: \_\_\_\_\_ ADDRESS \_\_\_\_\_

INVENTORY OF EFFECTS

Souvenir coins: 1-3 Pence, 3-1 Penny.

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

Forwarded to Personal Effects Depot

Money in the amount of \_\_\_\_\_ has been exchanged  
(here identify currency)  
for US Treasury check No. \_\_\_\_\_ amounting to \$ \_\_\_\_\_

Known bank account in European Theater: \_\_\_\_\_  
(List name of bank account No.)

I certify that the above items constitute all effects secured by me, belonging to the above named individual and that they were forwarded to the Army Effects Bureau Kansas City, Missouri,

on \_\_\_\_\_ 194 \_\_\_\_\_ through \_\_\_\_\_  
(forwarding agency)

Signed: *Joseph F. Geoghegan*  
JOSEPH F GEOGHEGAN 1st Lt CMC Depot Quartermaster  
(Name) (Rank & ASN) (Organization)

(List any additional information on reverse side)





~~ARMY SERVICE FORCES~~  
KANSAS CITY QUARTERMASTER DEPOT  
ARMY EFFECTS BUREAU

601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

HOC/AID/ojr  
4 August 1949

IN REPLY REFER TO 286,517

Mrs. Frances L. Carter  
Flat Rock, Illinois

Dear Mrs. Carter:

The Army Effects Bureau has received from a Graves Registration Officer overseas four souvenir coins which belonged to the late Private Jerald B. Lameron.

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

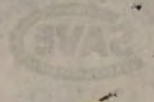
Your reply may be made on the reverse of this letter, if you desire, and mailed in the inclosed self-addressed envelope which requires no postage.

Sincerely yours,

H. O. CALDWELL  
Effects Quartermaster

1 Incl  
Envelope





Dear Mr. Caldwell

Please send me the souvenir  
coins. my address is Mrs. Frances L. Carter  
Box 106  
Flat Rock, Ill.

yours truly  
Frances Carter

RECEIVED  
K.C.Q.M. DEPOT EFFECTS BUREAU  
KANSAS CITY, MO.  
AUG 10 1949 AM