

RECEIPT OF REMAINS

DISTRIBUTION CENTER
FORT WORTH QUARTERMASTER DEPOT, FORT WORTH, TEXAS

ROUTINE

DAY LETTER

REMAINS CONSIGNED TO; **COFFEY FUNERAL HOME**
ANTLERS, OKLAHOMA

DLR AND REPORT
ANY CHARGES

REMAINS OF LATE PFC ARNOLD G DEES BEING SHIPPED TO YOU ACCOMPANIED BY MILITARY ESCORT ON TRAIN NUMBER SEVEN HUNDRED FOUR ATCHESON TOPEKA AND SANTA RAILROAD DUE TO ARRIVE ANTLERS STATION ONE FIFTY FOUR PM RAILROAD TIME 29 JANUARY REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS AT STATION UPON ARRIVAL AND THAT YOU IMMEDIATELY PASS THIS INFORMATION ON TO NEXT OF KIN.

FILE RECORDS ANNOUNCED
DATE MAR 1 1949
NAME *Cuse*
R & R BR.



S. H. Partridge
S. H. PARTRIDGE
LT. COLONEL, QMC
CHIEF, AGR DIVISION

JAN 27 1949

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

THIS 30 DAY OF January 1949

Willie L. Hogue sq. lcl.
WITNESS (ESCORT)

Coffey Funeral Home
By Kenneth Jones
CONSIGNEE

LH

1 C I E R
FEB 8 1949
NY-023-R

DISINTERMENT DIRECTIVE

79-79

SECTION A - NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER 4655 00179		DATE 15 05 48 DAY MONTH YEAR			
NAME DEES ARNOLD G				SERIAL NUMBER 38321946		RANK PFC	ARM 1	DATE OF DEATH	
CEMETERY MOLENHOEK - NIJMEGEN							DISPOSITION OF REMAINS 1 8400 10 CODE DIST. PT.		
LOT G	ROW 5	GRAVE 97	COUNTRY HOLLAND			CAUSE OF DEATH 1			

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE COFFEY FUNERAL HOME ANTLERS, OKLAHOMA				NAME AND ADDRESS OF NEXT OF KIN MRS. CALLIE DEES (MOTHER) ROBERTSON BOULEVARD CHOWCHILLA, CALIFORNIA			
---	--	--	--	---	--	--	--

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME ARNOLD G DEES		SERIAL NUMBER 38321946		RANK PFC	DATE OF DEATH		DATE DISTINTERRED 22 JUNE 1948	
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS ID & <input checked="" type="checkbox"/> MARKER	ORGANIZATION USAGF	RELIGION P		IDENTIFICATION VERIFIED BY JOSEPH NOVACK, 2ND. LT. (C), NAME AND TITLE				

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

MANNER OF BURIAL WRAPPED IN BLANKET AND UNIFORM				CONDITION OF REMAINS MANDIBLE R/SCAPULA FRACTURED. BODY COMPLETE. ADVANCED STAGE OF DECOMPOSITION.				
OTHER MEANS OF IDENTIFICATION PFC STRIPES, EMBOSSED PLATE AND IDENTIFICATION TAG FOUND WITH REMAINS.								

MINOR DISCREPANCIES

NONE

REMAINS PREPARED AND PLACED IN ~~CASKET~~ TRANSFER BOX

HARRIE D. NELSON, EMBALMER

DATE 24 JUNE 1948		BY		EMBALMER (Signature) ELLIS P. THOMAS, EMB. SUPV.			
CASKET SEALED BY ELLIS P. THOMAS, EMB. SUPV.							

CASKET BOXED AND MARKED DATE 16/10/48 BY ORVILLE W. BILLINGS CLERK RECORDER		SHIPPING ADDRESS VERIFIED BY ALL TAGS, PLATES & MARKINGS VERIFIED BY: F. R. MAC DONALD, CAPT. QMC.					
---	--	--	--	--	--	--	--

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

JOHN ORAZEN, CAPT., QMC.,
SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

I CERTIFY that the typed names appearing above are the same as the original signatures on the No. 4 copy of F-1194 concerned

Raymond J Rodriguez
CWO USA

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC MARGRATEN, HOLLAND	TO ANTWERP PORT - PIER 140
KIND OF CONVEYANCE RAIL	NAME OF CONVOYER PFC WILLIE Q. PADGETT, RA 44089678
SIGNATURE OF SHIPPER <i>Lloyd E. Meyer</i> LLOYD E. MEYER 1/LT., INF 0-1327166	SIGNATURE OF RECEIVER <i>[Signature]</i> DATE 20/10/48
	DATE 27 OCT 1948

2. SHIPPED

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

3. SHIPPED

FROM	TO WPC
KIND OF CONVEYANCE	NAME OF CONVOYER
SIGNATURE OF SHIPPER	SIGNATURE OF RECEIVER <i>[Signature]</i> DATE JAN 3 1949
	DATE JAN 3 1949

4. SHIPPED

FROM WPC	TO WPC
KIND OF CONVEYANCE WPC	NAME OF CONVOYER Sgt Arthur D Murphy
SIGNATURE OF SHIPPER PREISCH LIEUT. COLONEL, TC, PORT TRANSPORTATION OFFICER	SIGNATURE OF RECEIVER <i>[Signature]</i> DATE 7 Jan 48
	DATE 7 Jan 48

5. SHIPPED

FROM	TO
KIND OF CONVEYANCE	NAME OF CONVOYER CHONCHITTY, CYGIEBENIA
SIGNATURE OF SHIPPER	SIGNATURE OF RECEIVER <i>[Signature]</i> DATE DEC 1948
	DATE DEC 1948

6. SHIPPED

FROM	TO
KIND OF CONVEYANCE	NAME OF CONVOYER
SIGNATURE OF SHIPPER	SIGNATURE OF RECEIVER
	DATE

7. SHIPPED

FROM	TO
KIND OF CONVEYANCE	NAME OF CONVOYER
SIGNATURE OF SHIPPER	SIGNATURE OF RECEIVER
	DATE

NY 023 R

DAY L E 1948 DEC 17 AM 10 51

FORT WORTH QUARTERMASTER DEPOT, FORT WORTH, TEXAS

MRS. CALLIE DEES

DIR & REPORT
ANY CHARGES

ROBERTSON BOULEVARD

CHONCHILLA, CALIFORNIA

WE HAVE BEEN ADVISED REMAINS OF THE LATE PFC ARNOLD G. DEES
ARE ENROUTE TO THE UNITED STATES. OUR RECORDS INDICATE YOU WISH REMAINS
DELIVERED TO COFFEY FUNERAL HOME, ANTLERS, OKLAHOMA

WITHIN FORTY EIGHT HOURS AFTER RECEIPT
OF THIS MESSAGE PLEASE CONFIRM YOUR ORIGINAL INSTRUCTIONS OR SUBMIT NEW
DELIVERY INSTRUCTIONS AND FURNISH YOUR CORRECT MAILING ADDRESS BY TELEGRAM
COLLECT TO COMMANDING OFFICER, FORT WORTH QUARTERMASTER DEPOT, FORT WORTH
TEXAS. REPLY IS NECESSARY WITHIN THIS PERIOD SINCE IT WILL NOT BE
POSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY
INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF FORTY EIGHT HOURS. WHILE
DELIVERY OF THE REMAINS WILL BE MADE AS SOON AS PRACTICABLE AFTER RECEIPT
FACTORS BEYOND OUR CONTROL MAY DELAY DELIVERY OF REMAINS FOR SEVERAL WEEKS.
HOWEVER AS SOON AS REMAINS ARE RECEIVED HERE AND IT IS POSSIBLE TO SCHEDULE
THEM FOR DELIVERY YOUR FUNERAL DIRECTOR WILL BE NOTIFIED BY TELEGRAM OF RAIL
ROUTING AND SCHEDULED TIME REMAINS WILL ARRIVE AT RAILROAD STATIONS. ALSO
HE WILL BE REQUESTED TO FURNISH YOU THIS INFORMATION SO THAT YOU MAY COMPLETE
FUNERAL ARRANGEMENTS. THIS TELEGRAM WILL BE SENT AT LEAST FOUR DAYS PRIOR TO
ACTUAL SHIPMENT FROM THIS DISTRIBUTION CENTER. PLEASE INSTRUCT FUNERAL
DIRECTOR TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL. REMAINS WILL
BE ACCOMPANIED BY MILITARY ESCORT. IF YOU DESIRE MILITARY HONORS AT FUNERAL
YOU SHOULD ASK ANY LOCAL PATRIOTIC OR VETERANS ORGANIZATIONS TO MAKE ARRANGE-
MENTS. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING
FINAL DELIVERY. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.

C

W. Pastridge
LT COLONEL, Q. M. C.
CHIEF, A. G. R. DIVISION

DEC 17 1948

CLASS OF SERVICE

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

WESTERN UNION

1201

SYMBOLS

DL = Day Letter

NL = Night Letter

LC = Deferred Cable

NLT = Cable Night Letter

Ship Radiogram

JOSEPH L. EGAN
PRESIDENT

The filing time shown in the **DA 054** and day letters is STANDARD TIME at point of origin. Time of receipt is STANDARD TIME at point of destination

D. SFA836 29 NL COLLECT=CHOWCHILLA CALIF 17=

048 DEG 18 AM 2 02

COMMANDING OFFICER=

FORT WORTH QUARTERMASTER DEPOT FTW=

NY 023 R

RETEL DESIRE REMAINS OF PFC ARNOLD G DEES TO BE DELIVERED TO COFFEY FUNERAL HOME ANTLERS OKLAHOMA ORIGINALLY INSTRUCTED MY PERMANENT MAILING ADDRESS IN GENERAL DELIVERY CHOWCHILLA CALIFORNIA=

MRS CALLIE DEES=

Confirmation
AK

Dees, Arnold G.

NY 023 R

Chouchilla Kalif

March 10 48

Sir I am in regards of some papers
 I got through mistake I reced application
 in Nov to fill out about having my
 boys remains shipped back to the united
 states I fill them out and sent them
 back to Washington. My name is
 Mrs Lallie Dees it sure is not Bob
 My boys name is The Arnold G Dees
 38 321 946. plot G Row 6 grave 97 united
 States Military cemetery
 Molenbaek Holland. I am returning
 the papers. Yours Truly
 Mrs Lallie Dees

(P2) My son belonged to the 10th air Born
 Division

DEPARTMENT OF THE ARMY

NOK

Dees, Arnold A.

14 April 1948

NY 023 R

Mrs. Callie Dees,
Chowchilla, Calif.

Dear Mrs. Dees:

In reply to your letter of April 10th, I regret very much any concern and anxiety caused you by receipt of the sample telegrams you returned to this office.

We do not know how these papers came into your possession but assume that they were sent to you by some friend or relative of yours who attended one of the meetings conducted by this office at various points in the states of Texas, Oklahoma and Louisiana, for the purpose of explaining to next-of-kin the "Program For Return and Reburial of World War II Dead". These papers are distributed to every person who attends one of our meetings. They are merely sample copies of forms next-of-kin may expect to receive from their Government at the time their loved one is being returned from overseas. All of these papers contain the fictitious name, "Staff Sergeant John J. Doe", merely to indicate where the name of your son will appear.

Please accept my deepest sympathy in your great loss and be assured that this office is happy to assist you at any time.

Very truly yours,

CHARLES D. CASTLE
Lt Colonel, OMC
Chief, AGR Division

ak

WHM *Dees*

GDC

NY 023 F

INSPECTION CHECKLIST
 (FOR USE AT OVERSEAS PORT, U.S. PORT, AND DISTRIBUTION CENTER)

NAME: **DEES, ARNOLD G.** GRADE: **PFC** SERIAL NUMBER: **38321946**

SOURCE: **USMC, MOLEENHOEK, NIJMEGEN, HOLLAND** CONSIGNEE: **COFFEY FUNERAL HOME
ANTLERS, OKLAHOMA**

SHIPPING CASE - General Appearance (Check ONLY Discrepancies) CONDITION OF SHIPPING CASE (Check one)
 SATISFACTORY UNSATISFACTORY

FINISH (Exterior) REMARKS
 HANDLES
 DRAW BOLTS
 STENCILING - NAMEPLATE
 HEALTH PERMIT MARKER
 HEALTH PERMIT NUMBER
Minor Repair

CASKET - General Appearance (Check ONLY Discrepancies) CONDITION OF CASKET (Check one)
 SATISFACTORY UNSATISFACTORY

FINISH (Exterior) REMARKS
 HAND RAILS & FINIALS
 NAMEPLATE
 CAM LOCKS (Sealing) AND GASKET
 ODOR OR MOISTURE
Small Scratches

ROUTED TO

MORTUARY SECTION

MAINTENANCE AND REPAIR SECTION

CONDITION OF REMAINS CASKET REPAIRED
 SATISFACTORY UNSATISFACTORY YES NO

NECESSARY DISINFECTION (Explain) CASKET EXCHANGED
 YES NO

SHIPPING CASE REPAIRED
 YES NO

SHIPPING CASE EXCHANGED
 YES NO

REMARKS

TIME DATE SIGNATURE OF MORTICIAN TIME DATE SIGNATURE OF INSPECTOR
 _____ _____ _____ *Am 1/12/49* *MU Aug ham*

REMARKS

41260

NY 023

REQUEST FOR REIMBURSEMENT OF INTERMENT OR TRANSPORTATION EXPENSES

DATE

WW II

2-6-49

(Read Explanation on Reverse Side before completing form)

NAME OF DECEDENT (Last, First, Middle Initial)

BRANCH OF SERVICE

TO BE FILLED IN BY CLAIMANT

DEES, ARNOLD G.

US ARMY

RANK OR GRADE

SERIAL NO.

PFC

38321946

A. INTERMENT EXPENSES
(Civilian or Private Cemetery)B. TRANSPORTATION EXPENSES
(National or Post Cemetery)

INSTRUCTIONS TO PERSONS SIGNING THIS FORM

1. This form is NOT to be signed by Funeral Director.
2. ~~Fill in decedent's home address and phone number.~~ Fill in all four copies as required (SIGN ORIGINAL ONLY)
3. Check Box "A" or Box "B" above, not both.
4. Check Box "A" when interment is in a civilian or private cemetery.
5. Check Box "B" when remains are delivered to home or other place prior to burial in a national or post cemetery.

CLAIM VALID REPATRIATION

FEB 8 1949

mhr

FILL IN THIS STATEMENT IF BOX "A" IS CHECKED

FILL IN THIS STATEMENT IF BOX "B" IS CHECKED

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

I certify that the sum of \$ _____ was paid by me from personal funds in connection with the transportation of the remains of the above-named decedent from: (City, town, or place from which remains were shipped)

NAME: Carrime, Country

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

CITY OR COUNTY: CarrimSTATE: Ore

RETURN FOUR COPIES TO

Fort Worth Quartermaster Depot
Fort Worth 1, Texas
Attention: AGR Division

SIGNATURE OF CLAIMANT

Robertson Blvd.

ADDRESS (Street number or RFD, City and State)

Chawchilla Calif.

RELATIONSHIP TO DECEDENT

Mother

REMARKS

PAID

J. W. FAULDS

Col., F. D.

F. O., U. S. A.

FEB 1949

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

FEB 16 1949

PART A

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

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

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

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

PART B

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

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

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

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



REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

66
21/4/48

BURIAL OF
Pfc. Arnold G. Dees, 38 321 946
Plot G, Row 5, Grave 97,
United States Military Cemetery
Molenvhoek, Holland

23 October 1947

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

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

PART I

I, CALLIE DEES
(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

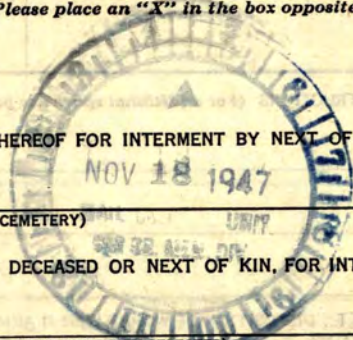
(Please indicate relationship to the deceased by placing an "X" in the proper box.)

- 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

Corinne Cemetery Antlers, OKLA.
(NAME AND LOCATION OF CEMETERY)



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

- 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT _____ (LOCATION OF NATIONAL CEMETERY SELECTED)

(Please indicate if your own religious services at a location other than the selected national cemetery are desired by placing an "X" in the proper box)

- YES
- NO

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

None

DD Form
MAY 21 1948

29 APR 1948

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
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS	STATE OR TERRITORY OF U. S. A., OR COUNTRY
		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			
Coffeey Funeral Home			
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.
	Antlers	Pushmaha	Okla.
	Antlers, Okla.		

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
Dees	Felix		Half-brother
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
	Belzonia	Okla.	

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.

Mrs Callie Dees
(SIGNATURE OF NEXT OF KIN)

Robertson Boulevard
(STREET AND NUMBER)

CALLIE DEES
(NAME PRINTED OR TYPED)

CHOWCHILLA, CALIFORNIA
(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 13th day of **November**,

1947, at city (or town) of **CHOWCHILLA**, county of **MADERA**, and State (or Territory or

District) of **CALIFORNIA**

H. J. ...
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)
JUSTICE OF THE PEACE
SECOND TOWNSHIP, MADERA CO., CALIF.
(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 _____, 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
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

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

THE NEXT PART OF THIS PART BE HEREBY WITHIN MY RIGHTS TO CHECK THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED
THE NEXT PART OF THIS PART BE HEREBY WITHIN MY RIGHTS TO CHECK THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED

LAST NAME	FIRST NAME	MIDDLE INITIAL

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

IF YOU ARE NOT THE NEXT OF KIN OR A PERSON WHOSE NAME IS LISTED IN PART III OF THIS FORM
THE NEXT PART OF THIS PART BE HEREBY WITHIN MY RIGHTS TO CHECK THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED

CITY OR TOWN	STATE OR DISTRICT



at

Form 3547 *Dees, Arnold es. 38321946*

NOTICE TO SENDER OF FORWARDING ADDRESS

United States Post Office

Corinne, Okla. (Office) (State) *ps.*

In accordance with your request you are notified that the matter mailed by you to *Mrs Callie Dees*
Corinne Okla

(Key No. _____)

is incorrectly addressed because the addressee has removed to *Chowchilla Calif.*

Forwarding postage required *free* cents.

Matter bearing a pledge to pay forwarding or return postage is forwarded or returned, *with* the postage due. Matter not bearing such pledge is treated as prescribed by the Postal Laws and Regulations. *will be returned*

Respectfully,
POSTMASTER.

POSTMASTER.—Do not send this form if new address of addressee is unknown. Fill in amount of forwarding postage ONLY when requested by sender. c5-9634 U. S. GOVERNMENT PRINTING OFFICE

Mobernook, Holland es 5 97

293

Dees, Arnold S.

38-321-946 at

DDMG FORM 381
11 MAR 47

NOTICE OF CHANGE IN ADDRESS

NAME OF DECEASED		RANK	SERIAL NUMBER
Gerald G Dees		Pfc	38321946
NAME OF NEXT OF KIN		RELATIONSHIP	
Mrs Lallie Dees		Mother	
OLD ADDRESS			
Corinne Okla			
NEW ADDRESS			
Chawchilla Calif			
REMARKS			
please notify me at Chawchilla Calif when the remains ^{of my son} arrive at Undertakers Okla			

DEPARTMENT OF THE ARMY
THE QUARTERMASTER GENERAL

**LETTER OF
THE QUARTERMASTER GENERAL, 38 321 946
Flat 8, Row 3, Camp 97,
United States Military Cemetery
Belmont, Holland**

23 October 1947



**Mrs. Gaille Ross
Covina, Oklahoma**

Dear Mrs. Ross:

The people of the United States, through the Congress have authorized the establishment and final burial of the heroic dead of World War II. The Quartermaster General of the Army has been authorized with this great responsibility to the honored dead. The records of the War Department indicate that you are the nearest relative of the above-named deceased, who gave his life in the service of his country.

The national pamphlets, "Disposition of World War II Armed Forces Dead," and "National Cemetery," 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 national 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 of kin 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 check 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 the receipt by you? The prompt return will avoid unnecessary delay.

Sincerely,

**WALTER S. LINDSEY
Major General
The Quartermaster General**

OCT 28 12 4 PM '47
O. O. M. & RECORDS SECTION

8
Bryg

SPQYG 293
Dees, Arnold G.

27 May 1946

Mrs. Callie Dees
Corinne, Oklahoma

Dear Mrs. Dees:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Private First Class Arnold G. Dees, A.S.N. 38 321 946

The records of this office disclose that his remains are interred in the U. S. Military Cemetery, Molenhoek, Holland, plot G, row 5, grave 97.

This cemetery is located approximately eighteen miles south of Arnhem and five miles southeast of Nijmegen, both in Holland, and is under the constant care and supervision of United States military personnel.

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

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

W 27 4 57 PM '46
MAIL ROOM

kbt

LMS

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

RESTRICTED
REPORT OF BURIAL

TM 10-630 AND AR 30-1815

48290
10 Oct 44
Date

U.S. ARMY

Dees Arnold G Pfc 38321946
 Last Name First Initial Rank Serial No.
 H.Q. CO. 401 Glider Inf. 9 93 101 A/B Div 418
 Unit Organization
Holland o/a 8 Oct 44 KTA
 Place of Death Date of Death Cause of Death
1630 10 Oct 44 Molenhoek #1 708-538
 Time and Date of Burial Name of Cemetery Name or Coordinates of Location
97 5 G Temp
 Grave Number Row Number Plot Number Type of Marker

Disposition of Identification Tags: Buried with body Yes No Attached to Marker Yes No
 If No Identification Tags 1 Embossed Tag Buried on Body one on Marker
 How were remains identified? Identified by pay book and E.M.F.

What means of identification were buried with the body?

IDENTIFICATION ACCEPTED
 Initial C. Coffey

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

Who is buried on:	<u>Macejak</u>	<u>35289639</u>	<u>Pvt.</u>	<u>101 A/B Div</u>	<u>96</u>
Deceased's Right:	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	<u>Davis</u>	<u>16065165</u>	<u>Pvt.</u>	<u>101 A/B Div</u>	<u>98</u>
	Name	Serial No.	Rank	Organization	Grave No.

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

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

Emergency Addressee _____ Name

_____ Address

Religion _____

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

- 1 Billfold
- 1 Fountain Pen "Moore"
- 1 Watch, "Robara", Wrist
- 1 Comb
- 1 Cigarette Lighter
- Miscellaneous Photos
- Money
- Dutch ~~\$2~~ Gulden, 10 Cents with
- U.S. \$0.25 with ~~Dutch 27 Cents~~
- French 15 Francs
- Belgium 2 Francs
- English £ 0-1-4
- Canada \$0.25, 1 German Coin

William F. Cocklin
 Signature of Officer or other person reporting burial
 WILLIAM F. COCKLIN, And Lt.
 605th QM Grave Reg. Co.

Verified by G.R.S. Officer

20437

File
 JAN 23 1945
we

IF DECEASED UNIDENTIFIED

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

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

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

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

Left Hand

Right Hand

TOOTH CHART

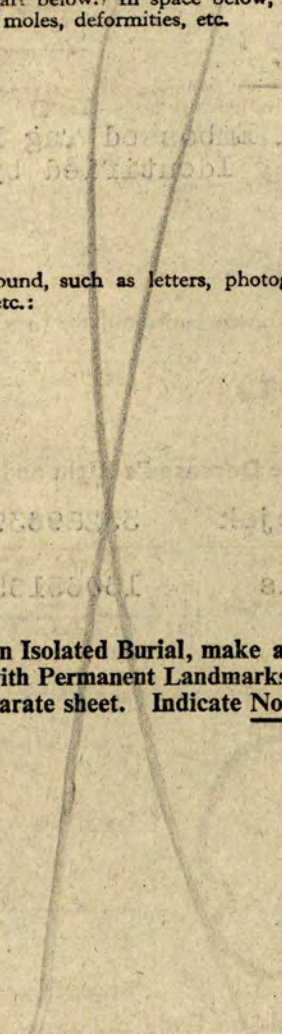
		Deceased's Left								Deceased's Right							
		8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Upper																	
Lower																	

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.



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

attch

293 Dees, Arnold G

REPORT OF DEATH

DATE *1 Dec 44*
tlc/4627

* Corrected report
original forwarded 31 Oct 44

FULL NAME <i>per 280 Call</i> Dees, Arnold G.		ARMY SERIAL NUMBER 38 321 946	GRADE Pfc						
HOME ADDRESS Corinne, Oklahoma		ARM OR SERVICE Infantry	DATE OF BIRTH 9 Aug 22						
PLACE OF DEATH European Area		CAUSE OF DEATH Killed in action		DATE OF DEATH 9 Oct 44					
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 10 Nov 42	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS						
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Callie Dees, mother, Corinne, Oklahoma									
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Callie Dees, mother, same as above Oren Dees, brother, 709 Shrader St., San Francisco, California									
INVESTIGATION MADE		IN LINE OF DUTY		OWN MISCONDUCT					
YES	NO	YES	NO	YES	NO	WAS DECEASED ON DUTY STATUS	AUTHORIZED ABSENCE	IN FLYING PAY STATUS	OTHER PAY STATUS (SPECIFY BELOW)
						YES	NO	YES	NO

ADDITIONAL DATA AND/OR STATEMENT

- * Additional pay.
- * Combat Infantryman entitled to additional pay for Glider flights.

Final FILE
JAN 1 - 1945
Paul

X 293 Dees, Arnold G 38,321,946

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

BATTLE
 NON-BATTLE

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

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

REPORT OF DEATH

DATE 31 Oct 44
jed 4627

FULL NAME <u>Dees, Arnold G.</u>		ARMY SERIAL NUMBER <u>38321946</u>	GRADE <u>PFC</u>										
HOME ADDRESS <u>Corinne, Okla.</u>		ARM OR SERVICE <u>Infantry</u>	DATE OF BIRTH <u>9 Aug 22</u>										
PLACE OF DEATH <u>European Area</u>	CAUSE OF DEATH <u>Killed in action.</u>		DATE OF DEATH <u>9 Oct 44</u>										
STATION OF DECEASED <u>European Area</u>		DATE OF ENTRY ON CURRENT ACTIVE SERVICE <u>10 Nov 42</u>	LENGTH OF SERVICE FOR PAY PURPOSES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>YEARS</td> <td>MONTHS</td> <td>DAYS</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>	YEARS	MONTHS	DAYS							
YEARS	MONTHS	DAYS											
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) <u>Mrs. Callie Dees, mother, Corinne, Okla.</u>													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) <u>Callie Dees, mother, Same as above.</u> <u>Oren Dees, brother, 709 Shgader St., San Francisco, Cal.</u>													
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
												X	*X

ADDITIONAL DATA AND/OR STATEMENT

*Glider Flight Pay

8 NOV 1944 *file 49*

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

BATTLE
 NON-BATTLE

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

288425

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

REPORT OF DEATH

DATE 31 Oct 44
jed 4627

FULL NAME Dees, Arnold G.		ARMY SERIAL NUMBER 38321946	GRADE PFC
HOME ADDRESS Corinne, Okla.		ARM OR SERVICE Infantry	DATE OF BIRTH 9 Aug 22
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action.		DATE OF DEATH 9 Oct 44
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 10 Nov 42	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Callie Dees, mother, Corinne, Okla.			
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Callie Dees, mother, Same as above. Oren Dees, brother, 709 Shneider St., San Francisco, Cal.			
INVESTIGATION MADE?		IN LINE OF DUTY	OWN MISCONDUCT
YES NO	YES NO	YES NO	YES NO
		WAS DECEASED ON DUTY STATUS	AUTHORIZED ABSENCE
		YES NO	YES NO
		IN FLYING PAY STATUS	OTHER PAY STATUS (SPECIFY BELOW)
		YES NO	YES NO
			*X



ADDITIONAL DATA AND/OR STATEMENT

*Glider Flight Pay

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

BATTLE

NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR

James W. Pinkhart

ADJUTANT GENERAL

288,425 ✓

WFH:LD:vss ✓
March 5, 1946 ✓

Mrs. Callie Dees ✓
Corinne, Oklahoma ✓

Dear Mrs. Dees: ✓

son, ✓ Private First Class Arnold

G. Dees. ✓

T-113

AMOUNT OF CHECK	NOTE DISCREPANCY IN NAME	<input checked="" type="checkbox"/> INCLOSE VALUABLES SHIP VALUABLES	RECIPIENT FROM <input checked="" type="checkbox"/> CASUALTY REPORT	
ACCOUNT NUMBER	SERIAL NUMBER	VALUABLES SHIPPED BY (clerk) <i>3/5/46 EG</i>	INVENTORY FORM 20	
Mrs. Callie Dees Corinne, Oklahoma			LETTER	
			NO. & TYPE OF CONTAINER	
			ENVELOPE	
			CARTONS	
			PACKAGE	
Pfc. Arnold G. Dees 38321946 288,425 D			FOOT LOCKER	
			SPECIAL INSTRUCTIONS	
			REMOVE GI	
			SHIP BLOODSTAINED	
			SHIP DAMAGED	
L. Dinwiddie:vss SUMMARY COURT DATA			REMOVE BL'DSTAINED	
			REMOVE DAMAGED	
			FILMS REMOVED	
			DIARY REMOVED	
			DATE ACTION TAKEN <i>3-5</i>	
DATE OF FINDING	APPLICANT	MAIL REVIEWER (initials) <i>fc</i>		
REMARKS			<input checked="" type="checkbox"/> SHIPPED	
			<input type="checkbox"/> FRANKED	
			<input type="checkbox"/> EXPRESS	
			<input type="checkbox"/> FREIGHT	
			DATE SHIPPED	
			SHIPPING CLERK	
			ROUTING	
			<input checked="" type="checkbox"/>	ACCOUNTING BRANCH
			<input type="checkbox"/>	WAREHOUSE
			<input checked="" type="checkbox"/>	FILE
ORDER FOR ACTION				

PACKAGE DESCRIPTION: *#1 Ctn*

ARMY EFFECTS BUREAU INVENTORY *EW*

288,425

DECEASED MISSING P.O.W. ABANDONED

TALLY NO. *7609*

INV. DATE *1 May 45*

ORIG. NO. OF PKGS. *10*

NAME *Arnold A. Dees*

A.S.N. *38321946* RANK *Pfc.*

SHEET *1* OF *1* SHEETS

ORGANIZATION *Hq Co 407 Blk Det*

BELT		TOWELS & WASHCLOTHS		WINGS	
BELT, MONEY (NO MONEY)	X	CLOTHING		BAGS, CLOTH OR TRAVEL	
CLOTH, WASH		BRACELET IDENT.		BILLFOLD, (NO MONEY)	
COATS		BRUSHES		CASE	
FOOTWEAR, PR.		CAMERAS		FOOTLOCKER <i>3</i>	<i>2</i>
GLOVES, PR.		GLASSES		KIT, SEW, TLT, OR WRITING	
HANDKERCHIEFS		KNIVES		BOOKS	
HEADWEAR		LIGHTERS		BOOKS, ADDRESS	
JACKETS	X	MISC. INSIGNIA		BOOKS, PILOT LOG	
OVERCOATS		PEN, FOUNTAIN		DIARY (REMOVED FOR DUR)	
SCARFS		PENCIL, MECHANICAL		FILMS	
SHIRTS		PIPES		LETTERS	
SOCKS, PR.		RELIGIOUS ARTICLES		PAPERS, PERSONAL	
TIES	X	RIBBONS, DECORATION		PHOTOS	
TOWELS		RINGS		SHOE SHINE ARTICLES	
TROUSERS, PR.		TOBACCO		SHORT SNORTER	
TRUNKS, PR.		TOILET ARTICLES		SOUVENIRS	
UNDERWEAR		WATCH		SOUVENIR MONEY	
				STATIONERY	
				TESTAMENTS <i>1</i>	
				U.S. MONEY (AMOUNT)	

Arnold A. Dees

38321946 Pfc. 1 May 45

10,000 marks 1 note

bc

File

VALUABLES SHIPPED

DATE *3/5/46*

BY *EG*

REMARKS: *Callie Dees (mother) Personal Courier A.S.N.*

ATTACHMENTS: *Inventory*

FORM #54 *Inventory* FORM #100

A.T. *None*

FREE SPACE

1985

STORED BY *JCM*

DATE SHIPPED *MAY 24 1945*

CHECKED BY *EX*

#43 OR ADDITIONAL

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

ONAL REMAR

CHECKED BY	COLLECTOR NO	DATE RECEIVED

SHORTAGES

U.S. GOVT. CHECK SHORT

NUMBER	DATE	SYMBOL	AMOUNT

DESCRIPTION	QUANTITY	UNIT	REMARKS

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

INVENTORY CLERK

SUPERVISOR

G.I. REMOVED

288425 ✓

RTB:Lvrg ✓
August 22, 1945 ✓

Mrs. Callie Dees ✓
Coriann, Oklahoma ✓

Dear Mrs. Dees:

The Army Effects Bureau has received additional property of your son, Private First Class Arnold G. Dees, consisting of funds in the amount of \$4.57. A check for that sum is inclosed. ✓

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

Sincerely, ✓

C. B. QUINN ✓
2nd Lt., OMC ✓
Chief, Files Branch ✓

1 Incl—
Check ✓

ORDER FOR SHIPMENT

SHIP TO: Mrs. Callie Dees
Coriinne, Oklahoma

Effects of:

Name **Sfc. Arnold G. Dees**
ASN **38321946**
Case No. **288425**
Wt.

*See
List*

DATE 22 August 1945
RTB:LD:rg

lc
FOR: Effects Quartermaster

REMARKS:

Inclose Bureau Check
Acct. No. 105609
Amount \$4.57
 Inclose "Valuables" item
 Ship "Valuables" item(s)

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

ROUTING:

128496 jw

Accounting Branch *cha*
 Warehouse Division
 Files Branch, Adm. Div.

105609

288425

August 25

45

Callie Dees

4.57

Four and 57/100

REMARKS

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

Shipping Clerk

ARMY EFFECTS BUREAU
INVENTORY

ln
288,425

CASE NO.	Carroll
TYPED BY	May 7, 1945
DATE	Deceased
STATUS	Dees, Arnold G.
NAME	38321946
A.S.N.	Private First Class
RANK	Unk.
ORGANIZATION	
AMOUNT	\$4.57
LIST NO.	F-174
REMARKS	

file

105609
ACCOUNT NO.

PAID-Check No. 12849635

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

288425

JRM:VB:na
May 16, 1945

Mrs. Callie Dees
Corinne, Oklahoma

Dear Mrs. Dees:

The Army Effects Bureau has received some additional property of your son, Private First Class Arnold G. Dees.

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

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

Extending every sympathy, I am

Sincerely yours,

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

4583

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Callie Dees
Corinne, Oklahoma

Pfc. Arnold G. Dees

Effects of:

Name 38321946

ASN 288425 D

Case No.

Wt.

DATE 14 May 1945

W. Larson

FOR: Effects Quartermaster

REMARKS: **JRM:VB:nm**

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

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

ROUTING:

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

1/Clu

REMARKS:

Franked **FRANKED**
Est. Exp. Chgs.
Est. Frt. Chgs.
No. of packages **MAY 24 1945**

*file
Buk*

N.K.

Shipping Clerk

NAME DUS, ARNOLD G. TC 1946

BAY	PALLET	BOX	TALLY
63	21		7609

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
CTN		

INVENTORY FORM

2 Nov 1944
Date

SUBJECT: Inventory of Personal Effects of:

Dees, Arnold G. Pfc 38 321 946
(Last Name) (First Name) (M) (Rank) (ASN)

TO: Effects Quartermaster, Communications Zone, APO 871, U. S. Army

The above named individual of Hq Co 401 611 Inf
(Unit) (Organization)

was reported KIA about 9 Oct 1944
Status (KIA, MIA, Hosp, etc.)

Designated Beneficiary if information readily accessible Callie Dees (M)

Gen. Del. - Corina, Okla.

INVENTORY OF EFFECTS

- 3 Sewing kits
 - 2 Writing kits
 - 1 Overseas cap ✓
 - 3 Handkerchiefs ✓
 - 1 Box soap ✓
 - 1 New Testament (boxed) ✓
 - 1 Miniature Bible ✓
 - 2 Pfc chevrons ✓
 - 1 Glider patch ✓
 - 1 Combat Inf Badge ✓
 - 1 Glider badge
 - 1 3 Ribbon bar (ETO w/star, APO, & GO)
 - 2 Fountain pens ✓
 - 1 Comb ✓
 - 1 Watch box ✓
 - 1 10,000 Mark banknote (January 1922) #J7628002 (no monetary value)
- 1 Envelope snapshots ✓
 - 13, 6¢ Air mail envelopes
 - 7 Letters ✓

LAST ITEM

Money in the amount of None has been turned into
(Name of Finance Officer)

None Form WDFD 38 Inclosed.
and symbol number)

None
(Names and addresses of any Banks in which accounts may be carried)

I certify that the above items constitute all of the effects, secured by me,
of the above named individual, and that they were forwarded to the Effects Dept.
by Truck on 1944.
(Rail, Truck, etc.)

Any additional pertinent information

Name Victor J. Willard
Rank and ASN VICTOR V. WILLARD
2d Lt., 01 324 690
Organization 327 611 Inf

(continued)

1. Following items transmitted herewith:

None

2. ~~Private debtors known to be as follows:~~

None

3. Private creditors known to be as follows:

None Known

4. Bank in the United Kingdom in which above-named individual has an account:

None known

Victor V. Willard

VICTOR V. WILLARD
2d Lt., 327 GI Inf
Personal Effects Officer

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

JRM:VB:cr

Case No. 288425

Date 27 April 1945

SUBJECT: Report of transaction in disposing of the effects of

Arnold G. Dees, 38321946 late a
(Name of deceased) (Army Serial Number)
Private First Class, Infantry who died
(Grade) (Organization, Army or Service)
on the 9 day of October, 1944, at European Area

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

1. Complying with A.W. 112, a Summary Court-Martial, convened at Kansas City, Mo. Pursuant to S.O., 228 Hq., KCQM Depot, dated 25 September 1943, for the purpose of disposing of the effects of the above-named soldier, or person subject to military law, reports that:

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

FINDING

Before a Summary Court-Martial which convened at Kansas City, Missouri, on 25 April 1945, pursuant to Special Orders 228, Headquarters KCQM Depot, dated 25 September 1943, the application or affidavit of Mrs. Callie Dees 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. Callie Dees of (Name of person found entitled)
Corinne State of (Number, Street or Avenue) (City, Town or Village)
Oklahoma, is the mother of the (Relationship or Capacity)

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

(Signature of Summary Court Officer)
JOHN R. MURPHY, Colonel, Q.M.C.
(Name, Rank, Organization)
SUMMARY COURT MARTIAL

JRM:VB:cr
April 27, 1945

288425

Mrs. Callie Dees
Corinne, Oklahoma

Dear Mrs. Dees:

The Army Effects Bureau has received from overseas some personal effects of your son, Private First Class Arnold G. Dees.

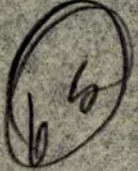
These effects are being forwarded to you in one package.

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

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

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

Yours very truly,


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

he

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mrs. Callie Dees
Corinne, Oklahoma

SHIP TO:
Pfc. Arnold G. Dees

Effects of:
Name 38321946
ASN 288425 D
Case No.
Wt.

[Handwritten signature]

DATE 27 April 1945

[Handwritten signature: H. Larson]
FOR: Effects Quartermaster

REMARKS: JRM:VB:cr
 Inclose Bureau Check
 Acct. No.
 Amount
 Inclose "Valuables" item
 Ship "Valuables" item(s)

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

ROUTING:

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

REMARKS:

[Handwritten signature: rpk]

Franked
Est. Exp. Chgs.
Est. Frt. Chgs.
No. of packages 1

Shipping Clerk
MAY 1 1945

[Handwritten signature: mk]

PACKAGE DESCRIPTION: *#1 pkg.*

ARMY EFFECTS BUREAU INVENTORY *tw*

288,425

DECEASED MISSING P.O.W. ABANDONED

TALLY NO. 7148

INV. DATE 10-apr-48

ORG. NO. OF PKGS. 1

BOX NO.

SHEET 1 OF 1 SHEETS

ORGANIZATION 101 9/8 Div

NAME ARNOLD, G. DEES.

A.S.N. 38321946 RANK P.F.C.

BELT	TOWELS & WASHCLOTHS	WINGS
BELT, MONEY (NO MONEY)	CLOTHING	BAGS, CLOTH OR TRAVEL
CLOTH, WASH	BRACELET IDENT. * 1	BILLFOLD, (NO MONEY)
COATS	BRUSHES	CASE
FOOTWEAR, PR.	CAMERAS	FOOTLOCKER
GLOVES, PR.	GLASSES	KIT, SEW, TLT, OR WRITING
HANDKERCHIEFS	KNIVES	BOOKS
HEADWEAR	LIGHTERS	BOOKS, ADDRESS
JACKETS	MISC. INSIGNIA	BOOKS, PILOT LOG
OVERCOATS	PEN, FOUNTAIN	DIARY (REMOVED FOR DUR)
SCARFS	PENCIL, MECHANICAL	FILMS
SHIRTS	PIPES	LETTERS
SOCKS, PR.	RELIGIOUS ARTICLES	PAPERS, PERSONAL
TIES	RIBBONS, DECORATION	PHOTOS
TOWELS	RINGS	SHOE SHINE ARTICLES
TROUSERS, PR.	TOBACCO	SHORT SNORTER
TRUNKS, PR.	TOILET ARTICLES	SOUVENIRS
UNDERWEAR	WATCH (Robard)	SOUVENIR MONEY
		STATIONERY
		TESTAMENTS
		U.S. MONEY (AMOUNT)

#25

*file
over*

REMARKS *No information rechecked.*

ATTACHMENTS

FORM #54

FORM #100

*Inventory
grave tag*

DAMAGED

Sorn.

C.A.T. *None.*

WAREHOUSE SPACE *417*

INVENTORIED BY *D. Arden*

STORIED BY *JMS*

DATE SHIPPED

CHECKED BY *[Signature]*

WEIGHT

G.I. REMOVED

SHORTAGE ON REVERSE

IDENT. TAGS REMOVED

DIARY REMOVED

LOCKED STORAGE

LAUNDRY REMOVED

FILM REMOVED

MAY 1 1948

ADDITIONAL REMARKS

SHORTAGES

U. S. GOVT. CHECK SHORT

Sign # 211-283
amt - \$4,57

NUMBER

DATE

SYMBOL

AMOUNT

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

Davidson

INVENTORY CLERK

Nolan

SUPERVISOR

G. J. REMOVED

18 Oct 44

SUBJECT: Inventory of Personal Effects of:

Dees, Arnold G., Pfc, 38321946-

TO : Effects Quartermaster, C23 APO 350 U.S. Army

The above named individual of HQ 1st Glider Inf. 1st A/B Div was reported KIA about 8 Oct 44.

Designated Beneficiary: Not available.

INVENTORY OF EFFECTS

- 1 Billfold ✓
- 1 Fountain Pen "Moore" ✓
- 1 Watch "Robara", Wrist ✓
- 1 Comb ✓
- 1 Cigarette Lighter ✓
- Misc. Photos ✓
- Money:

File for

- ~~1 German coin 10 cents~~
 - U.S. \$0.25
 - French 15 Francs
 - Belgium 2 Francs
 - English #0-1-4
 - Canada \$0.25
 - 1 German coin ✓
- Souvenir*
1944

I certify that the above items constitute all of the effects, secured by me, of the above named individual and that they were forwarded to the Effects Depot by truck on _____.

~~WILLIAM F. COCKLIN
Major F.D., Symbol No. 211-283
Form WDFD 38~~
Royal QM Graves Registration Co.

Money in the amount of \$4.57 has been turned into M. G. Winsor, Major F.D., Symbol No. 211-283. Form WDFD 38 enclosed.

WILLIAM F. COCKLIN
2d Lt., QMC, O-1594767
605th QM Graves Reg. Co.

NAME DEES, ARNOLD G PFC

BAY	PALLET	BOX	TALLY
		5	7148
TYPE OF PKG.		WHSE. SPACE	INVENTORIED
GRB			

Eff. QM Form 43

Nearest Relative
 Address
 Killed in Action YES Died of Disease
 Date 8-OCT-44 Hospital
 Battle Area NEAR ZETTEN Information
HOGLAND
 Place of Burial MOLENHOEK CEM. NO 1
 Point of Coordination 708-538
 Description of Body
 Members Missing

Signed Wilton W. Litcher
Pvt. 605 Q.M. & RS. C