

12umi

(Last name)

37699072

(Army serial No.)

Nobuo

(First name)

(NONE)

Robert

(Middle initial)

(Army or service for which enlisted or inducted)

race JAPANESE

☒ IN BOX INDICATING COMPONENT
Regular Army. ☐ National Guard of the United States.

United States: ☒

For Regular Army units.

For National Guard units.

☒ Selective Service and Training.

Regular Army Reserve—Active duty.

Reserve Corps—Active duty.

SERVICE RECORD

covering period

24 June, 1944, to 15 JUN 1946, 19

For instructions see AR 345-125

Izumi, Nobuo

[illegible]

WD AGO FORM 8-117
15 AUG 1944

This form supersedes WD MD Form 81,
23 Sep 1942, which will not be used after
receipt of this revision. 16-42494-2

LAST NAME		FIRST NAME	ARMY SERIAL NO.	
IZUMI, NOBUO		R.	37 699 072	
GRADE	COMPANY	REGT. OR STAFF CORPS ³	AGE	RACE
1ST LT			20	JAP

SMALLPOX VACCINE

DATE	TYPE OF REACTION ⁶	MED. OFFICER ⁵
2 SEP 74	oid	any

TRIPLE TYPHOID VACCINE

DATES OF ADMINISTRATION				MED. OFFICER
SERIES	1ST DOSE	2D DOSE	3D DOSE	
1st	AUG 4 '44			amg
2d	26 AUG '44			amg
3d	2 SEP '44			amg

TETANUS TOXOID

INITIAL VACCINATION			STIMULATING DOSES		
	DATE	MED. OFF. ²		DATE	MED. OFF. ²
1st dose	16 AUG '44	<i>[Signature]</i>			
2d dose	26 AUG	<i>[Signature]</i>			
3d dose	28 SEP	<i>[Signature]</i>			

YELLOW FEVER VACCINE

DATE	LOT No.	AMOUNT	MED. OFF. ²

OTHER VACCINES

TYPE OF VACCINE	DATE	MFR'S. LOT NO.	AMOUNT	MED. OFF. #
BLOOD TYPE		0		C18
7/24/45	4-4-45		1cc	B9K
"	4-10-45		1cc	B9K
81	5/22/45			
11	11/10/45		1cc	250

W. H. Stark Cooper, M. C.,
U. S. Army.

16—20202-1

TYPE OF VACCINE	DATE	MFR'S. LOT NO.	AMOUNT	MED. OFF.
BLOOD TYPE	4-11-45		1cc	895
	4-10-45		1cc	895
	5/28/45		1cc	895
	5/10/45		1cc	895

OTHER VACCINES

DATE	LOT NO.	AMOUNT	MED. OFF.

YELLOW FEVER VACCINE

DATE	MED. OFF.	STIMULATING DOSES
1st dose 4-11-45		
2d dose 5-26-45		
3d dose 5-28-45		

TETANUS TOXOID

SERIES	DATE	MED. OFF.
1st dose 4-11-45		
2d dose 5-26-45		
3d dose 5-28-45		

TRIPLE TYPHOID VACCINE

DATE	TYPE OF REACTION	MED. OFF.
2 SEP 45		

SMALLPOX VACCINE

LAST NAME	FIRST NAME	ARMY SERIAL NO.	GRADE	COMPANY	REGT. OR STAFF CORPS	AGE	RACE
IZUMI, NOBUO	R.	37 699 072				10	JAP

IMMUNIZATION REGISTER

LECTIVE TRAINING AND SERVICE

SPECTACLES									
PLACE OF REFRACTION					DATE		GLASSES REQUIRED YES <input type="checkbox"/> NO <input type="checkbox"/>		
V.A. WITH GLASSES					V.A. WITHOUT GLASSES				
OD	OS	OU	OD	OS	OU				
SPHERE		CYLINDER	AXIS		PRISM	DEC. IN.			
OD.									
OS.									
ADD.									
BIFOCAL SEGMENT			FRAME						
HEIGHT	INSET		P. D.	BRIDGE	EYE SIZE	TEMPLE			
MM.	MM.								
POSITION OF EYEGLASS GAS MASK M-1:					SIZE OF GAS MASK:				
COMMERCIAL TYPE, NO. OF PRS.					EYEGLASS, GAS MASK M-1				
DATE ORDERED		DATE ISSUED		DATE ORDERED		DATE ISSUED			
DENTURES									
TYPE		DATES INSERTED IF MADE IN SERVICE							
FULL UPPER									
FULL LOWER									
PARTIAL UPPER									
PARTIAL LOWER									
* CHECK IF PRESENT WHEN INDUCTED OR ORDERED TO ACTIVE DUTY									
DRUG OR SERUM SENSITIVITY									
DRUG OR SERUM									
DATE OF REACTION									
TYPE OF REACTION									
SEVERITY					MED. OFF.				
REMARKS:									

EM married on 4 May 1946
Miss MARIA GOOSSENS

1st beneficiary - person to be notified
in case of emergency:

Mrs Maria Izumi
BAD HOMBURG UDI
GERMANY

WD, AGO Form No 24.4

OTHER IMMUNIZATIONS

TYPE	DATE	LOT NO.	AMOUNT	MED. OFF.
Influenza 26	Mar 46			Klum.

SPECTACLES

PLACE OF REFRACTION			DATE		GLASSES REQUIRED YES <input type="checkbox"/> NO <input type="checkbox"/>	
V.A. WITH GLASSES			V.A. WITHOUT GLASSES			
OD	OS	OU	OD	OS	OU	
SPHERE		CYLINDER	AXIS	PRISM	DEC. IN.	
OD.						
OS.						
ADD.						
BIFOCAL SEGMENT			FRAME			
HEIGHT	INSET	P. D.	BRIDGE	EYE SIZE	TEMPLE	
MM.	MM.					
POSITION OF EYEGLASS GAS MASK M-1:			SIZE OF GAS MASK:			
COMMERCIAL TYPE, NO. OF PRS.			EYEGLASS, GAS MASK M-1			
DATE ORDERED	DATE ISSUED	DATE ORDERED	DATE ISSUED			

DENTURES

TYPE	* DATES INSERTED IF MADE IN SERVICE
FULL UPPER	
FULL LOWER	
PARTIAL UPPER	
PARTIAL LOWER	

* CHECK IF PRESENT WHEN INDUCTED OR ORDERED TO ACTIVE DUTY

DRUG OR SERUM SENSITIVITY

DRUG OR SERUM	
DATE OF REACTION	
TYPE OF REACTION	
SEVERITY	MED. OFF.

REMARKS:

[illegible]

EM married on 4 May 1946
Miss MARIA GOOSSENS
1st beneficiary - person to be notified
in case of emergency:
MRS MARIA Izumi
BAD HAMBURG UDI
GERMANY

through induction by selective service)		
Local origin	#3 Polk, Des Moines, Iowa	
Date of induction	(Board No., city, and State)	
Date of induction	station 24 June 1944	
Date of induction	6/24/44, Camp Dodge, Iowa	
By whom	Christian	
Name	CHRISTIAN, JOHN	
(Grade and pay)	(Price)	
TYPE OF RECEPTION	DATE	
Place to which sent	RECEPTION STR	VE 4000 Colo
(Post, camp, or reception center)		
Date sent	8 AUG 44	

RECORDS OF IMMUNIZATION

(See par. 6, AR 40-215, for details relative to immunization records)

SMALLPOX VACCINATION

Date	Result
2 SEP '44	VACCINOID

TYPHOID VACCINATIONS

4 AUG 1944	1ST DOSE	
26 AUG 44	2ND DOSE	
3 SEP 44	3RD DOSE COMPLETED	
Sept. 8, 45	Stam	JFW

OTHER VACCINATIONS

BLOOD TYPE	Kind	Date
1ST DOSE	TETANUS TOXOID	4 AUG 1944
2ND DOSE	TETANUS TOXOID	26 AUG 44
3RD DOSE	TETANUS TOXOID	28 SEP 44

TIPTON BOOSTER 2-15c 10 APRIL '95

Date	Completed	Result

CARRIER EXAMINATIONS
(See AR 40-310)

Date	Parasite examined for	Kind of specimen ¹	Positive or negative

¹ Record as vaccinia, vaccinoid, or immune reaction.
² Record as positive, positive combined, negative-pseudo or negative.
³ Record as feces, urine, sputum, blood, etc.

WD, AGC Form No 24.4

BT-0

ENLISTMENT RECORD 37699072

WDAGO 183
 EZUMI Nobuo (none) R.
 (Last name) (First name) (Middle initial) (Army serial No.)
 Born Sept. 18, 1922, Belvedere, Calif.
 (Month, day and year) (City or town) (State or country)
 Height 5 ft. 6 in. Weight 131 lb. Eyes Brn. Hair Black

Complexion Dark Size of gas mask M-1 Size of shoe 10
 Married or single Single Occupation STUDENT

EDUCATIONAL QUALIFICATIONS

Years in: Grammar school 8 High school 4 College or university 0

Graduate work Specialized in

Speaks *English, French, Spanish, German

OCCUPATIONAL QUALIFICATIONS

STUDENT
 (Main occupation) \$ (Weekly wages)
 Years as *apprentice, journeyman, expert.

Just what did he do? Studied.

(Next best occupation) \$ (Weekly wages)
 Years as *apprentice, journeyman, expert.

Just what did he do?

HOME ADDRESS AND NEAREST RELATIVE

Home address 1223 13th St. S.
 (Number and street or rural route, if none, so state)
 (City, town, or post office) (State or country)

Name and address of nearest relative Tomi Izumi
 (Name) (Address)

Mother 1643
 (Relationship) (Number and street or rural route, if none, so state)
 (City, town, or post office) (State or country)

Person to be notified in case of emergency Tomi Izumi
 (Name) (Address)

Mother 1643
 (Relationship; if friend, so state) (Number and street or rural route, if none, so state)
 (City, town, or post office) (State or country)

DESIGNATION OF BENEFICIARY

(To be entered only from appropriate enlistment or induction record or W. D., A. G. O. Form No. 41)

(2) Tomi Izumi Mother
 (Name and degree of relationship of beneficiary) (Address)

(1) Yori Izumi Sister
 (Name and degree of relationship of alternate beneficiary) (Address)

3500 Larimer St., Denver, Colo.
 (Address)

EM DOES NOT DESIRE TO DESIGNATE
 (Name and degree of relationship of alternate beneficiary) (Address)

ALTERNATE
 (Address)

CURRENT INDUCTION

(See "Remarks—Financial" (par. 36, AR 345-125))

Age at enlistment 18 years 9 months.

Accepted for service at

Enlisted at on the

day of 19

in grade of by

for (Company, regiment, arm, or service)

to serve years.

Completed 0 years 0 months 0 days for longevity pay.

at enlistment. Has over 0 years' service. (Initials of officer)

Physical defects at enlistment ND

PRIOR SERVICE

First show prior service in the Regular Army, then insert headings to show service in the United States Army, Volunteers, Navy, Marine Corps, and National Guard or Organized Militia, in the order named.

from 19 to 19
 (Co., regt., arm, or service)

Discharged as (Grade) (Character) By reason of

(Data required by par. 8, AR 345-125)

from 19 to 19
 (Co., regt., arm, or service)

Discharged as (Grade) (Character) By reason of

(Data required by par. 8, AR 345-125)

from 19 to 19
 (Co., regt., arm, or service)

Discharged as (Grade) (Character) By reason of

(Data required by par. 8, AR 345-125)

from 19 to 19
 (Co., regt., arm, or service)

Discharged as (Grade) (Character) By reason of

(Data required by par. 8, AR 345-125)

from 19 to 19
 (Co., regt., arm, or service)

Discharged as (Grade) (Character) By reason of

(Data required by par. 8, AR 345-125)

from 19 to 19
 (Co., regt., arm, or service)

Discharged as (Grade) (Character) By reason of

(Data required by par. 8, AR 345-125)

from 19 to 19
 (Co., regt., arm, or service)

Discharged as (Grade) (Character) By reason of

(Data required by par. 8, AR 345-125)

from 19 to 19
 (Co., regt., arm, or service)

Discharged as (Grade) (Character) By reason of

(Data required by par. 8, AR 345-125)

from 19 to 19
 (Co., regt., arm, or service)

Discharged as (Grade) (Character) By reason of

(Data required by par. 8, AR 345-125)

from 19 to 19
 (Co., regt., arm, or service)

Discharged as (Grade) (Character) By reason of

(Data required by par. 8, AR 345-125)

from 19 to 19
 (Co., regt., arm, or service)

Discharged as (Grade) (Character) By reason of

(Data required by par. 8, AR 345-125)

* Strike out words not applicable.

† No entry required for men secured through Selective Service.

(Number) (Date)

MILITARY QUALIFICATIONS

Served as _____ in the United States Army in the World War
 (Highest grade held)
 Holds commission as _____ in the Officers' Reserve Corps
 (Grade) (Section)
 Graduate of _____
 (Noncommissioned officers' or special service school)

ARMY SPECIALTY

Specialty	*Rating, with date	*Rating, with date
745 (RIFLEMAN) S-8K	18 DEC '44	

* Ex=Excellent; VG=Very good; G=Good; F=Fair.

SPECIAL DUTY

As	At	From	To	Authority

ARTICLES OF WAR

(Read to soldier as required by the 110th Article of War)

Date	Initials	Date	Initials
2 AUG 1944	mf	29 SEP 1945	CB
2 NOV 1944	mf	11 Dec 45	B
20 DEC 44	mf		
27 JUN 1945	mf		

SEX MORALITY

Course completed (see AR 40-235) 2 AUG 1944, 19

QUALIFICATION IN ARMS

(Special qualifications attained in the use of the various arms and additional compensation therefor)

Qualified as _____ (Grade designation), 19

Compensation \$ _____ per month. Aggregate or final score _____

Order publishing fact of qualification _____ (Number) (Source) (Date), 19

Compensation \$ _____ (Grade designation) per month. Aggregate or final score _____

Order publishing fact of qualification _____ (Number) (Source) (Date), 19

Compensation \$ _____ (Grade designation) per month. Aggregate or final score _____

Order publishing fact of qualification _____ (Number) (Source) (Date), 19

Compensation \$ _____ (Grade designation) per month. Aggregate or final score _____

Order publishing fact of qualification _____ (Number) (Source) (Date), 19

Compensation \$ _____ (Grade designation) per month. Aggregate or final score _____

Order publishing fact of qualification _____ (Number) (Source) (Date), 19

MILITARY RECORD

APPOINTMENT, PROMOTION, OR REDUCTION, WITH AUTHORITY THEREFOR

Grade	Date	Authority	Initials
Pot	24 Jun 44	FR 600-750	mf
PFC	6 Jun 45	C.O. 72, Co. H 506 P.I.R.	CB

SPECIALIST RATINGS

Class	Qualification	From	To	Authority	Initials

G.A. 208, 1st Co Blanding, Fla. 6 AUG 1944 17 DEC 44
 Co. PTR, Ft Benning, Ga. 20 DEC 44 19 FEB 1945
 Co. 4, 1st Ft. Benning, Ga. 20 Feb 45 29 MAR 45
 Co B 2d Precht Tng Regt 3/10/45 26 MAR 45
 1st Bn 1st Ft. Meade, Md. MAR 27 45 APR 2 45

ORIGINAL ASSIGNMENT AND ORGANIZATIONS TO WHICH SUBSEQUENTLY ASSIGNED DURING THIS ENLISTMENT PERIOD

Assigned to company, regiment, arm, or service	Station	Date
Co. H 506 P.I.R.	APO #479 N.Y.N.Y.	2 May 45
Co F 508 P.I.R.	APO 757 TNGC	16 Oct 45

Insert #1 Added 5 Apr 45

Insert Page 6
MEDALS DECORATIONS AND CITATIONS

Auth: ~~EAMET Ribbon~~, ID ~~clir# 1~~, 1 Jan 43
Auth: ~~Bronze Sv star, (EAMET) Campaign~~
~~"Normandy", ltr Hq ETOUSA, AG 200.6 OpCA~~
~~dtd 16 Nov 44~~
Auth: ~~Bronze Sv stars (Ardennes) (Central~~
~~Europe) (Rhine) (and) Auth: File AG 200.6~~
~~Op Hq ETOUSA, dtd 12 June 45.~~
Auth: ~~Distinguished Unit Badge, GO #26, Hq~~
~~First United States Army, dtd 17 June 44.~~
Auth: ~~Oak Leaf Cluster to the Distinguis~~
~~hed Unit Badge, GO#31 Hq 3rd United States~~
~~Army, dtd 7 Feb 45.~~
Auth: ~~Combat Infantry Badge, GO# _____ Hq~~
~~506th Pch. Inf. dtd _____ 19 _____~~
Auth: ~~Purple heart, GO# _____ Hq~~
~~dtd _____ 19 _____~~
Auth: ~~Oak Leaf cluster to Purple heart,~~
~~GO# _____ Hq _____ dtd _____~~
~~19 _____~~
Auth: ~~Good Conduct ribbon GO# _____~~
~~dtd _____ 19 _____~~

7
TIME LOST PRIOR TO THE NORMAL DATE OF EXPIRATION OF TERM OF ENLISTMENT TO BE MADE GOOD UNDER 107th ARTICLE OF WAR:

(a) Absence without proper authority or in desertion.

From	To	Days

(b) Time actually in confinement under sentence or while awaiting trial and disposition of case, if trial resulted in conviction.

From	To	Days

(c) Unable to perform duty through the intemperate use of drugs or alcoholic liquor or through disease or injury the result of his own misconduct.

From	To	Days

ABSENCE SUBSEQUENT TO THE NORMAL DATE OF EXPIRATION OF TERM OF ENLISTMENT

(a) Absence without proper authority or in desertion.

From	To	Days

(b) Time actually in confinement under sentence or while awaiting trial and disposition of case, if trial resulted in conviction.

From	To	Days

(c) Unable to perform duty through the intemperate use of drugs or alcoholic liquor or through disease or injury the result of his own misconduct.

From	To	Days

Auth: ~~Bronze Sv Arrowwood per ltr, Hq ETO~~
~~USA, File AG 200.6 OpCA 6 Aug 45 pr 45.~~

Insert #1 Added 6 Aug 45
S/R of _____ ASN _____
for additional remarks see page 15

Extended _____ per _____
(Number of days)
Rejoined _____

21 FOREIGN SERVICE *[Signature]*

MEDALS, DECORATIONS, AND CITATIONS

11-102, 1970

1874

TIME LOST PRIOR TO THE NORMAL DATE OF EXPIRATION OF TERM OF ENLISTMENT TO BE MADE GOOD UNDER 107th ARTICLE OF WAR:

(a) Absence without proper authority or in desertion.

[illegible]

(b) Time actually in confinement under sentence or while awaiting trial and disposition of case, if trial resulted in conviction.

[illegible]

(c) Unable to perform duty through the intemperate use of drugs or alcoholic liquor or through disease or injury the result of his own misconduct.

[illegible]

ABSENCE SUBSEQUENT TO THE NORMAL DATE OF
EXPIRATION OF TERM OF ENLISTMENT

(a) Absence without proper authority or in desertion.

From	To	Days

(b) Time actually in confinement under sentence or while awaiting trial and disposition of case, if trial resulted in conviction.

[illegible]

(c) Unable to perform duty through the intemperate use of drugs or alcoholic liquor or through disease or injury the result of his own misconduct.

[illegible]

RECORD OF TRIALS BY COURTS MARTIAL

255 96th
 Summary C. M., (No.) A. W. 13 Oct, 1945 *Wrongfully*
possessed a pistol at Jazany, France (Synopsis)
 of specifications)

Sentence announced and adjudged 12 Oct, 1945

Sentence as approved To forfeit \$15.00 of his pay, 1945

I certify the above is correct. Approved 15 Oct, 1945

Unexecuted portion of confinement and forfeiture remitted per Robert L. Stephens, 1st Lt. Int.

Released from confinement No confinement, 19

Robert L. Stephens, 1st Lt. Int.

C. M., (No.) A. W., 19 (Synopsis)

Sentence announced and adjudged, 19

Sentence as approved, 19

I certify the above is correct. Approved, 19

Unexecuted portion of confinement and forfeiture remitted per (Name, grade, and organization)

Released from confinement, 19

(Name, grade, and organization)

C. M., (No.) A. W., 19 (Synopsis)

Sentence announced and adjudged, 19

Sentence as approved, 19

I certify the above is correct. Approved, 19

Unexecuted portion of confinement and forfeiture remitted per (Name, grade, and organization)

Released from confinement, 19

(Name, grade, and organization)

C. M., (No.) A. W., 19 (Synopsis)

Sentence announced and adjudged, 19

Sentence as approved, 19

I certify the above is correct. Approved, 19

Unexecuted portion of confinement and forfeiture remitted per (Name, grade, and organization)

Released from confinement, 19

(Name, grade, and organization)

C. M., (No.) A. W., 19 (Synopsis)

Sentence announced and adjudged, 19

Sentence as approved, 19

I certify the above is correct. Approved, 19

Unexecuted portion of confinement and forfeiture remitted per (Name, grade, and organization)

Released from confinement, 19

(Name, grade, and organization)

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Sentence announced and adjudged, 19

Sentence as approved, 19

I certify the above is correct. Approved, 19

Unexecuted portion of confinement and forfeiture remitted per (Name, grade, and organization)

Released from confinement, 19

(Name, grade, and organization)

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Released from confinement, 19

(Name, grade, and organization)

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Released from confinement, 19

(Name, grade, and organization)

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Sentence announced and adjudged, 19

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Released from confinement, 19

(Name, grade, and organization)

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Sentence announced and adjudged, 19

Sentence as approved, 19

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Unexecuted portion of confinement and forfeiture remitted per (Name, grade, and organization)

Released from confinement, 19

(Name, grade, and organization)

C. M., (No.) A. W., 19 (Synopsis)

Sentence announced and adjudged, 19

Sentence as approved, 19

I certify the above is correct. Approved, 19

Unexecuted portion of confinement and forfeiture remitted per (Name, grade, and organization)

Released from confinement, 19

(Name, grade, and organization)

C. M., (No.) A. W., 19 (Synopsis)

Sentence announced and adjudged, 19

Sentence as approved, 19

I certify the above is correct. Approved, 19

Unexecuted portion of confinement and forfeiture remitted per (Name, grade, and organization)

Released from confinement, 19

(Name, grade, and organization)

C. M., (No.) A. W., 19 (Synopsis)

Sentence announced and adjudged, 19

Sentence as approved, 19

I certify the above is correct. Approved, 19

Unexecuted portion of confinement and forfeiture remitted per (Name, grade, and organization)

Released from confinement, 19

(Name, grade, and organization)

Class of pay authorized by: **REDUCTION**
 \$ 7.50 per month for **Indefinite** months, commencing **1 SEP 1944**
 and expiring **Indefinite**, in favor of **Soldier**
 for the purpose of **Bonus**
 Discontinued **1 March 1945**, reason **Discharge**
 W. D., A. G. O. Form No. 30, mailed to Finance Officer, U. S. Army, Washington,
 D. C., 1945, by **MARY J. WILLES**
 Acknowledgment of discontinuance received **1945**

\$7.75 per month for _____ months, commencing 1 April 1948
and expiring _____, 19____, in favor of Army
Myself for the purpose of War Bonds
Discontinued 30 Sept 48, 19____, reason Sol Request
W. D., A. G. O. Form No. 30, mailed to Finance Officer, U. S. Army, Washington,
D. C., _____, 19____, by _____
(Name and rank of forwarding officer)
Acknowledgment of discontinuance received _____ 19____

C. I. F. _____, 19____
 \$ 32.00 per month for 12 months, commencing 1 Apr, 1946
 and expiring 1 Oct, 19____, in favor of Dependents.
 _____ for the purpose of Support.
 Discontinued _____, 19____, reason _____
 W. D., A. G. O. Form No. 30, mailed to Finance Officer, U. S. Army, Washington,
 D. C., _____, 19____, by _____
 (Name and grade of forwarding officer)
 Acknowledgment of discontinuance received _____, 19____

NATIONAL SERVICE LIFE INSURANCE

XX GOVERNMENT INSURANCE XXXX

ALMT
Deduction of pay for Government insurance authorized as follows:
Class II ALMT 6-50 INDEFINITE
commencing 1946 10-1 per month for INDEFINITE months,
for payment of monthly premium on \$ 10.00 INDEFINITE
reason Discontinued 1946
by W. D., A. G. O. Form No. 30, mailed to
Veterans' Administration, Washington, D. C., on 1946
(Name and grade of forwarding officer)

Deduction of pay for Government insurance authorized as follows:

Class D insurance deduction of \$----- per month for ----- months,
commencing -----, 19-----, and expiring -----, 19-----
for payment of monthly premium on \$----- Discontinued -----, 19-----
reason ----- W. D., A. G. O. Form No. 30, mailed to
Veterans' Administration, Washington D. C., on -----, 19-----
by -----
(Name and grade of forwarding officer)

Deduction of pay for Government insurance authorized as follows:

Class D insurance deduction of \$_____ per month for _____ months,
commencing _____, 19____, and expiring _____, 19____
for payment of monthly premium on \$_____. Discontinued _____, 19____
reason _____

Veterans' Administration, Washington, D. C., on _____, 19____
by _____

(Name and grade of forwarding officer) 16-25259-1

DEPOSITS

[illegible]

PAY DETAINED BY COURTS MARTIAL ENTERED ON
PAY ROLL

Month	Amount		Vol. No.	Name and grade of finance officer	Accounts for
	Dol.	Ct.			
19					
19					
19					
19					

CLOTHING ACCOUNT

CLOTHING DRAWN

[illegible]

GRATUITOUS ISSUE OF CLOTHING

CLOTHING SETTLEMENTS

[illegible]

* Initials of organization commander.

16-25259-1

REMARKS—FINANCIAL

Under this heading will be shown all financial matters not entered elsewhere such as stoppages for loss of or damage to Government property, amounts due on account of partial payments, overpayments, etc.

Enlistment allowance of \$ _____

for the grade of _____

paid by _____

on _____, 19____

Entitled to travel pay to Denver Colo
(Place at which accepted for previous enlistment)

Received no travel pay upon discharge on _____; 19__ to reenlist.

Date	Description and amount due U. S. or soldier	Roll on which collected
6/24/44 4 Aug 44 J. G. Harris, Jr. 4 Aug 44	WD AGO FORM 28 ISSUED CL B ALMT OF 7.50 PER MONTH FROM Sept. 1944 CL N ALMT OF 6.50 PER MONTH FOR INDEFINITE PERIOD EFFECTIVE August 44 Only ADD MONTH OF CL F DED OF PER MONTH FROM IS DESIRED.	
29 AUG 44	CL N ALMT \$ 6.50 PER MONTH AUG 44	
2 Dec 44	PAID TO INCL D 30 NOV 1944 DUE US GOVT LDY \$ 1.50 No. 194	
13 Dec 44	DUE US GOVT LDY \$ 0.50 Dec 44	
Due US lost or damaged property	MIR \$ 0.25	
Due US Part Pmt \$ 11.00, mo	DEC 44	
pd on Vou #	JAN 45	facts of
S. G. Harris, Jr., Maj. F. D.	44 DEC PAID	
Placed on Prchtist Status	25 DEC 1944	
Due US Part Pmt \$ 51.00, mo	JAN 45	
pd on Vou # 4534	JAN 45	acc of
S. G. Harris, Jr., Major, F. D.	25 JAN PAID	
20 Jan 45	MC-51	
K-51	DUE US MIR GLO \$ 5.50	ROB
15 Feb 45	Prcht pay 1 Feb 45	JAN 45 PAID
	ON FUR FR 22 Jan 45 TO	
	97th INCL DUE FUR RAT	
	45 FEB PAID	

45 FEB 1947

REMARKS—FINANCIAL—Continued

Date	Description and amount due U. S. or soldier	Roll on which collected
	Prcht pay fr 1 Mar 45	
9 Mar 45	U. L. Balmt 17.50	
	INCL TO 18.75 EFF	
	1 April 45	
B-8-30	Pd to Incl MAR 31 1945	
	By S GADDIS, Maj, FD	
	DOE SOL For Serv Pay fr 5 Apr 45	
JUNE/45	Aptd PFC Fr POT PER C.O. #12	
	C. V. 506 PRCHT. INF. DTD.	
	6 JUNE/45	
	31 JULY PAID	
	31 AUGUST PAID	
	LAST P.D. INCL 30 SE PT 45	
	AD ADVT MGMT FRANKS 007 U.S.	
	Disc. Cl B 18.75 30 Sep 45	
2 Mar 45	Disc US P/P 75.00 Vm #	
	Mar 45 a/c J R	
	Caldwell 24 Oct FD.	
15 Mar 45	To forfeit \$15.00 his	
	pay per Sum. CM # 255,	
	506 PIR, 12 Oct 45.	
	Last Paid to Include 30 Nov 45	
	Last Paid to Include 31 Dec 45	
	Last Paid to Include 31 Jan 46	
5 Mar 46	Last Paid to Include 28 Feb 46	
8 Apr 46	Cl F almt \$22.00 eff. 1 Apr 46	
2 May 46	Last Paid to Include 30 Apr 46	

REMARKS—ADMINISTRATIVE

Under this heading will be shown all administrative matter not shown elsewhere and not of a character authorizing pay. Show wounds, battles, engagements, etc., and such other entries not set forth elsewhere as may be required to make soldier's record complete.

RELIGIOUS

Qualification in Arms

AME Pon	Course	Rating	Score
AND 1	A	5	17
TF			

Malaria control tng complete RC on
Date 14 OCT 1944

Replac

Returned to an inactive status per
Par 6 SO 152 HQ RC 1771 24 Jun 1944.

Sol rptd for AD 3 Aug 44 in gr m

at the Recp Cen, Ft. Logan.

Colo., per Hq 7th serv. Comd, 1tr

no. 5439 Dated 26 July 44

Home address and address of nearest
relative, person to be notified;
and 2nd beneficiary: (mother)

28 5 4 Manzanar Calif

Taken from WDA 60 183, 3 Aug 44

SERVICE PERIOD GOVERNED BY
SERVICE EXTENSION ACT OF 1941

PHYSICALLY QUALIFIED FOR PARATROOPS

26 SEP 44

Phys. PROFILE 111141 X 23 MAY 45

Qualified as Parachutist per. par

30 17 Hqs. IPS, dtd JAN 19 1945

Arrived in Belgium 23 Apr 45

Executed certificate on 27 APR 1945
re-volunteering for continued para-
chute duty

Insert No. 14 Added 22 Dec 44

103

INSERTS ADDED 23 FEB 45

43 insert added 22 Mar 45

100445 45 Added 5 Sept 45

JUMP RECORD

70th Serv Unit, Recp Reg, Ft Logan, Colo.

9 AUG 1944

To **INF BTC Gp BLANDING FLA**, 19

This soldier was transferred to **Your Command**

per **SO # 16** and left this organization **18 DEC 1944**, 19

He was last paid to include **Pay Due fr Date of Call to A. D.**, 19

by _____

(Name and grade of disbursing officer or agent officer, if any)

Due United States; if nothing, so state

TWO DED CL N ALMT FOR

MO OF AUG 1944 ONLY

17

2d Ind.

NO INTC CAMP BLANDING, FLA.

15 DEC 1944

To **COMOT PRCHT SCH, FT BENNING, GA.**

This soldier was transferred to **YOUR COMMAND**

per **PAR 16 SO 300** and left this organization **18 DEC 1944**, 19

He was last paid to include **30 NOV 1944**, 19

by **C. F. LEAIRD, Major, F. D.**

(Name and grade of finance officer or agent officer, if any)

Due United States; if nothing, so state

DUE US GOVT LDY 1.50 FOR MO OF NOV 44

DUE US GOVT LDY 0.50 DEC 44

ALLOTMENT STATUS

CLASS	AMOUNT DED	LED THROUGH
B	7.50	30 Nov 44
D		
E		
F		
N	6.50	30 Nov 44

Due soldier at date of **TRF: ACCRUED PAY & ALWS**

J. R. MOSLEY, W. O. (I. S.) (Name)
(Grade and organization)

15 AUG 1944

This soldier reported _____, 19
and was assigned to _____ (Organization to which transferred) (see page 4).

† Here enter any amounts due soldier and not paid to date, such as monetary allowance in lieu of quarters and subsistence; if nothing, so state.
† Strike out words not applicable.

* W. D., A. G. O. Form No. 24-2

16-36425-1

* This form supercedes W. D., A. G. O. Form No. 24-2, 1 May 1937, which may be used until existing stocks are exhausted.

INSERT #1 added

M. H. PEDERSON Capt, Inf,
Asst Pers Officer.

(Grade and organization)

This soldier reported _____, 19

He was last paid to include _____
 per _____ and left this organization _____
 This soldier was transferred to _____
 To _____

These indorsements are filled out in all cases when a soldier deserts or is transferred from one company or detachment to another company or detachment and in all changes of station except with an organization, and upon transfer to inactive status. These indorsements will not be used when a soldier is only attached to another organization for either rations or quarters or both.

HQ RECEP CENTER 1st Ind.
 CAMP DODGE, IOWA

To _____
 This soldier was transferred to _____
 per _____

and left this organization _____
 He was last paid to include _____

by _____
 (Name and grade of finance officer or agent officer, if any)
 Due United States, if nothing, so state _____

Handwritten: 01

*Due soldier at date of _____
 TRANSFER-CURRENT PAY & ALWS

This soldier has a Class E allotment running which has been deducted from his pay to include _____
 19 _____

This soldier has authorized a Class D deduction for Government insurance which has been deducted from his pay to include SEE PAGE 10
 19 _____

His character is UNKNOWN
 Efficiency rating as soldier UNKNOWN

I have personally verified all entries in this indorsement.

(Name) _____
 (Grade and organization) _____

This soldier reported _____, 19 _____

*Here enter any amounts due soldier and not paid to date, such as monetary allowance in lieu of quarters and subsistence; if nothing, so state.
 Strike out words not applicable.

Insert #1 Added 9 AUG 44

17
 2d Ind.

NO IRYC CAMP BLANDING, FLA.

15 DEC 44

To COMDT PRCHT SCH, FT BENNING, GA.

This soldier was transferred to YOUR COMMAND
 per _____ THIS HQ 15 DEC 44

and left this organization _____ 18 DEC 44

He was last paid to include _____ 30 NOV 44

by _____
 (Name and grade of finance officer or agent officer, if any)

Due United States; if nothing, so state _____
 DUE US GOVT LDY \$ 1.50 FOR MO NOV 44

DUE US GOVT LDY \$ 0.50 DEC 44

ALLOTMENT STATUS

CLASS	AMOUNT DED	LED THROUGH
B	7.50	30 Nov 44
D		
E		
F		
N	6.50	30 Nov 44

*Due soldier at date of _____ TRF: ACCRUED PAY & ALWS

This soldier has a Class E allotment running which has been deducted from his pay to include _____
 19 _____

This soldier has authorized a Class D deduction for Government insurance which has been deducted from his pay to include _____
 19 _____

His character is EXCELLENT
 Efficiency rating as soldier SATISFACTORY

I have personally verified all entries in this indorsement.

W. H. PEDERSON Capt, Inf,
 Asst Pers Officer.
 (Grade and organization)

This soldier reported _____, 19 _____

*Here enter any amounts due soldier and not paid to date, such as monetary allowance in lieu of quarters and subsistence; if nothing, so state.
 Strike out words not applicable.

3d Ind Added 23 Mar/45

HQ THE PROCT SCH

FT BENNING, GA 23 March 1945

TO: CG, AGF REPL DEP #1

FT GEO. G. MEADE, MARYLAND

This Sol was trfd to: Your Command
per Ltr Sub: "Travel Orders" 6-18 File

300.4 GNRXA-E Hq The Proct School, Ft
Benning, Ga. dtd 10 Mar/45, & amend-
ments thereto & left this sta 27 Mar
1945 & was last pd to incl 28 Feb/45

by S G HARRISS, JR., PD. Mag

Due US: If nothing, so state:

Due Sol at date of trf: accrued pay &
/lws. Proct Pay fr 1 Mar/45 to 26 Mar
1945 incl.

ALLOTMENT STATUS

CLASS	AMOUNT DEDUCTED	DED THROUGH
B	<u>818.75</u>	<u>28 Feb 45</u>
D		
E		
F		
N	<u>16.50</u>	<u>28 Feb 45</u>
B.	<u>87.50</u>	<u>28 Feb 45</u>

His Character is: UNKNOWN
Efficiency rating as Sol: UNKNOWN
I have personally verified all the
entries in this indorsement.

William J. Knorre
WILLIAM J. KNORRE
Captain, Infantry
Asst Pers O., TPS

This soldier reported _____, 19__

*Here enter any amounts due soldier and not paid to date, such as money allowance in lieu of quarters and subsistence; if nothing, so state.
(Strike out words not applicable.)

10-25250-1

MD Form No. 79, Dental Identification
Record, is a part of this record.

Amendments to National Service Life
Insurance Act read and explained
(Date) 23 MAR 1945

Sol unfavorably considered for Good
Conduct Medal at time of transfer:
(Date) 23 MAR 1945

Home Address 1925 Purdue St
23-5-4 MANZANAR
City West Los Angeles State CALIF

Nearest Relative TOMI IZUMI

Relationship MOTHER

Street Address see as above
23-5-4 MANZANAR
City _____ State _____

PERSON TO BE NOTIFIED IN CASE OF
EMERGENCY SAME AS ABOVE

Relationship _____

Street Address _____

City _____ State _____
DESIGNATION OF BENEFICIARY

1st TOMI IZUMI MOTHER

23-5-4 MANZANAR CALIF

2nd HERBERT IZUMI

SAME AS ABOVE BROTHER

3rd MRS YARE TESHIMA SISTER

3500 LARAMIE, DENVER, COLO

Insert # 3 Added 22 Mar 45

HQ
FT
TC

3
ded 23 Mar/45

arks Admini. Re
ve Insert

TRATTI

NO. 3

Izumi Nobuo

37699072

REMARKS ADMINISTRATIVE - Contd
INSERT NO.

Soldier is * not favorably consid-
ered for Good Conduct Medal.

Date 16 DEC 1944

DENTAL DEFECTS - DENTURES

Date of insertion of denture

Prescription for denture:

Remarks

Lecture on venereal disease and
prophylaxis completed.

TF 8-1238 shown - Date 2 AUG 44

Sol. Favorably Considered

For Good Conduct Medal at

Time of Transfer. APR 3 '45

Insert No. 1 Added 22 Dec 44

Insert No. 2 Added 22 Dec 44

19

3 mone-
te.

250-1

3d Ind added 23 Mar 45

NO. 2

ASN

1

2

Participation in combat
in cities course

Commanding Co 208 Bn

Insert No. 2 Added 22 Dec 44

3d Lnd 4000 23/1/45

Date _____ Place _____

SCORE: _____
Insert added 5Sep45, 506th Precht Inf..

BATTLE PARTICIPATION TIME

BATTLE	FR	TO
Normandy	6 Jun 44	13 Jul 44
Rhineland	17 Sep 44	26 Nov 44
Ardennes	17 Dec 44	25 Jan 45
Rhineland	27 Jan 45	24 Feb 45
Central Europe	2 MAY 45	9 May 45

Soldier participated in Battle of Bastogne.

Auth: _____ over seas bars per WD

dir 268 dtd 30 June 44. AJO

Attd EAMET Ribbon per WDC 1
1 Jan 43. ETO

FOREIGN SERVICE

Arrived	FRANCE	on 18 Apr 45
Departed		on 20 Apr 45
Arrived	BELGIUM	on 23 Apr 45
Departed		on 24 Apr 45
Arrived	GERMANY	on 2 MAY 45
Departed		on 10 MAY 45
Arrived	AUSTRIA	on 10 MAY 45
Departed		on 2 Aug 45
Arrived	FRANCE	on 3 Aug 45
Departed		on
Arrived		on
Departed		on
Arrived		on
Departed		on
Arrived		on
Departed		on
Arrived		on
Departed		on
Arrived		on
Departed		on

Insert #4 dated 16 Aug 45
S/R of _____ ASN

3d Lnd 44000 23/11/45

HQ 6900 Reinf Depot (Irov) APO 117 ETOS.
 TO: CO 101st AB Div APO 472
 per par 45 SQ 6 HQ, 6900 Reinf Depot 1945
 (Irov) APO 117, dtd 20 Apr
 He was last) SEE REMARKS
 pd to incl) FINANCIAL and/or
 BY PREVIOUS INDORSEMENT

ALLOTMENT STATUS	
Cl	Ant Deducted Date
B	\$
D	\$
E	\$
F	\$
N	\$

6.50 Paid

Due sol at date trfd:

ACCR PAY & ALWS

Due United States: If nothing
 so state SEE REMARKS FINANCIAL
 His character is: UNKNOWN
 Efficiency rating as sol: UNKNOWN

I have personally verified all entries
 in this indorsement.

LOVER

Ins #2

Joseph Spacensky
 JOSEPH SPACENSKY, 1st Lt
 AGD, Personnel Officer

Sol at date trfd: Accr Pay & Alws

Character is UNKNOWN
 Efficiency rating as Sol UNKNOWN
 I have personally verified all entries
 in this indorsement.

H. R. Adamson
 H. R. ADAMSON, 1st Lt, AGD
 Asst Pers Officer

Sol reported

19

P-60 Ins #1

132

SOL RPTD 2 MAY 45
ASGD 506 PRCHT INF

AGF RD #1
Fort Geo G Meade. Md 1 Apr 45
CO: CO, GM 359(a)-A
This Sol Trfd to YOUR COMMAND
Per Par 6 SO 91 This Hq cs
and left this Org 3 Apr 45

He was last) SEE REMARKS
ed to incl) FINANCIAL and/or
By PREVIOUS INDORSEMENT
The United States: If nothing, so state
SEE REMARKS FINANCIAL

ALLOTMENT STATUS

ss	Amt Deducted	Deducted Through
	\$ 7.50	DATE
	\$.	
	\$.	LAST
	\$ 6.50	PAID

Sol at date trfd: Accr Pay & Alws

Character is UNKNOWN
Efficiency rating as Sol UNKNOWN
He personally verified all entries
his indorsement.

H. R. ADAMSON, 1st Lt. AGD
Asst Pers Officer

Sol reported 19
P-60 Sus #1

To _____

This soldier was transferred to _____

per

and left this organization _____ 19____

He was last paid to include _____ 19

by _____

(Name and grade of finance officer or agent officer, if any)

Due United States; if nothing, so state _____

* Duo soldier at date of _____

This soldier ^{has} ~~has not~~ a Class E allotment running which has been deducted from his pay to include _____ 19__

This soldier has authorized a Class D deduction for Government insurance which has been deducted from his pay to include _____, 19____.

His character is _____

Efficiency rating as soldier _____

I have personally verified all entries in this indorsement.

(Name)

(Grade and organization)

This soldier reported _____, 19____

*Here enter any amounts due soldier and not paid to date, such as monetary allowance in lieu of quarters and subsistence; if nothing, so state.
†Strike out words not applicable.

Strike out words not applicable.
~~5th Ind Added 14/27/45 B~~

4122

20
6th Ind.
Hq 506 PRCHT INF, APO 472, U.S. ARMY
15 OCT 1945
To C.O. 508 PRCHT INF, APO 752, U.S. ARMY
This soldier was transferred to TULIE COMMAND
per par 8, SO# 243, Hq 101 Abn Div, 12 Oct 45
and left this organization 19 OCT 1945
He was last paid to include 30 Sept 1945
by A.C. SMALL, Lt Col, FD
(Name and grade of finance officer or agent officer, if any)
Due United States; if nothing, so state NOTHING

ALLOTMENTS

TYPE	AMT	LAST DEP
B	18.75	30 Sep 45
N	6.50	30 Sep 45

* Due soldier at date of Trf ACCRD PAY & ALWS

This soldier has not a Class E allotment running which has been deducted from his pay to include 19
This soldier has authorized a Class D deduction for Government insurance which has been deducted from his pay to include 19
His character is Excellent
Efficiency rating as soldier Excellent
I have personally verified all entries in this indorsement.

G. H. EVERS (Name)
1st Lt, 506 PIR
Asst Pers O (Grade and organization)

This soldier reported 19

* Here enter any amounts due soldier and not paid to date, such as monetary allowance in lieu of quarters and subsistence; if nothing, so state.
Strike out words not applicable.

16-25259-1

7th Ind
HQS 508TH PRCHT INF APO 757 U S A RMY
2 May 46
TO C.O. 3rd Reinf Depot APO 872
This sol was atchd unassgd your command
Per Par 7 3012 Hq Command, USFET
dtd 2 May 46
And left this org 8 May 46
Last pd to incld 30 Apr 46
By J.M. Jones Lt Col FD
Due United States

Nothing

Due sol at date of atchmnt:
A/P & Alws. Auth Prcht Pay per
Par 19 TM14-502

ALLOTMENT STATUS

Class	amt Deducted	Dea Thru
N	6.50	30 Apr 46
F	22.00	30 Apr 46
E		
B		

His Character is Excellent
Efficiency rating as sol Superior
I have personally verified all entries in this indorsement.

W E McDANIEL
1st Lt., Infantry
Personnel Officer

Ins #1

Ins #1 added

20
6th Ind.

Has 506 PCHT INF, APO 472, U.S. ARMY
To CO 508 PCHT INF, APO 752, U.S. ARMY
This soldier was transferred to 15 OCT, 1945
per 8, 50# 243, Ha 101 Abn Div, 12 Oct 45
and left this organization 19 OCT, 1945
He was last paid to include 30 Sept, 1945
by A.C. SMALL, LT COL, FD
(Name and grade of finance officer or agent officer, if any)
Due United States; if nothing, so state NOTHING

ALLOTMENTS

TYPE	AMT	LAST DEP
B	18.75	30 Sep 45
N	6.50	30 Sep 45

* Due soldier at date of 1st ACCORD PAY & ALLOW

This soldier has a Class E allotment running which has been deducted from his pay to include 19
This soldier has authorized a Class D deduction for Government insurance which has been deducted from his pay to include 19
His character is Excellent
Efficiency rating as soldier Excellent
I have personally verified all entries in this indorsement.

G. H. EVERS (Name)
1ST LT, 506 PIR
ASST PERS O (Grade and organization)

This soldier reported 19

* Here enter any amounts due soldier and not paid to date, such as monetary allowance in lieu of quarters and subsistence; if nothing, so state.
Strike out words not applicable.

To
This soldier was transferred to
per
and left this organization 19
He was last paid to include 19
by
(Name and grade of finance officer or agent officer, if any)
Due United States; if nothing, so state

* Due soldier at date of

This soldier has a Class E allotment running which has been deducted from his pay to include 19
This soldier has authorized a Class D deduction for Government insurance which has been deducted from his pay to include 19
His character is
Efficiency rating as soldier
I have personally verified all entries in this indorsement.

(Name)
(Grade and organization)

This soldier reported 19

* Here enter any amounts due soldier and not paid to date, such as monetary allowance in lieu of quarters and subsistence; if nothing, so state.
Strike out words not applicable.

Two #1 added

Ind

This soldier was transferred to John Kennedy
per Qu. 4150.150 and left this organization 6 Jan, 1954
He was last paid to include _____, 19____

See Remarks Financial.

† Due soldier at date of _____ Transfer Acct. Pay and Adv.

ALLOTMENT STATUS		
CLASS	AMOUNT DEDUCTED	DEDUCTED THROUGH
B		
D		
E		
F		
N		

His character is _____

Efficiency rating as soldier -----

I have personally verified all entries in this indorsement.

(Name)
W. M. STERRETT 2nd Lt. MAC 1612 SGI
(Grade and organization)

This soldier reported _____, 19_____,
and was assigned to _____ (Organization to which transferred)
_____ (see page 4).

†Here enter any amounts due soldier and not paid to date, such as monetary allowance in lieu of quarters and subsistence; if nothing, so state.

* W. D., A. G. O. Form No. 24-2
1 September 1944

*This form supersedes W.D., A.G.O. Form No. 24-2, 19 July 1943, which may be used until existing stocks are exhausted.

23

FINAL INDORSEMENT

(Company or detachment)

(Place)

19

To The Adjutant General: 2-2-10

(Last name) (First name) (Middle initial) (Army serial No.)

was separated from the service by reason of _____

(Grade) (Organisation)

(State specific cause. See par. 37c)

AR 345-125)

----- (Date) -----
 at ----- authority -----
 ----- (Place) -----

Retained in service ----- days to make good time lost (A. W. 107).

Absent from duty ----- days subsequent to normal date of expiration of term of enlistment.

Retained in service ----- days for convenience of the Government on account of

His character is _____

Efficiency rating as soldier -----

*Final statement furnished. *Paid on final pay roll.
*Discharge certificate furnished, W. D., A. G. O. Form No. 55, 56, 57.

Due United States; if nothing, so state -----

† Due soldier at date of _____

Address furnished for future references: _____ (Number and street or rural route)

(City, town, or post office) (State or country)

Receipt of Discharge Certificate is acknowledged.

Signature of Soldier: _____

I have verified the foregoing entries.

Name signed -----

Name typed or printed -----

(Grade and organization)

*Strike out words and figures not applicable.
†Here enter any amounts due soldier and not paid to date, such as monetary allowance in lieu of quarters and subsistence; if nothing, so state.

INSERT TO SERVICE RECORD

9th Ind

ASF, 6th SvC, 1612 SCU Det K Sep Ctr 32

Fort Sheridan, Illinois 3 June, 1946

To CO RS #7 1612 SCU this sta

This soldier was transferred to your command

per P 164 SO 149 and left this organization 3 June, 1946

He was last paid to include 30 April, 1946

by James Lt Col FD

(Name and grade of disbursing officer or agent officer, if any)

Due United States; if nothing, so state

Nothing

ALLOTMENT STATUS

CLASS	AMOUNT DEDUCTED	DEDUCTED THROUGH
B		
D		
E		
F	\$22.00	Apr 46
N	\$6.50	Apr 46

† Due soldier at date of Trf accord pay & alws plus
FSP fr 1 May 46 to 30 May 46 Incl

His character is UNKNOWN

Efficiency rating as soldier UNKNOWN

I have personally verified all entries in this indorsement.

T. I. Roberts

T. I. ROBERTS (Name)
(Grade and organization) 1st Lt., ORD

This soldier reported _____, 19____
(Organization to which transferred)
and was assigned to _____ (see page 4).

† Here enter any amounts due soldier and not paid to date, such as monetary allowance in lieu of quarters and subsistence; if nothing, so state.

WD AGO FORM 24-2 (This form supersedes WD AGO Form
1 MAR 1945 24-2, 1 September 1944, which may be used
until existing stocks are exhausted.)
16-36425-3

Ind.

To _____, 19____

This soldier was transferred to _____
per _____ and left this organization _____, 19____

He was last paid to include _____, 19____
by _____

(Name and grade of disbursing officer or agent officer, if any)

Due United States; if nothing, so state

† Due soldier at date of

ALLOTMENT STATUS

CLASS	AMOUNT DEDUCTED	DEDUCTED THROUGH
B		
D		
E		
F		
N		

His character is _____

Efficiency rating as soldier _____

I have personally verified all entries in this indorsement

(Name)

(Grade and organization)

This soldier reported _____, 19____
(Organization to which transferred)
and was assigned to _____ (see page 4).

† Here enter any amounts due soldier and not paid to date, such as monetary allowance in lieu of quarters and subsistence; if nothing, so state.

16-36425-2 ☆ GPO

INSERT TO SERVICE RECORD

Ind. 8

HEADQUARTERS THIRD REPLACEMENT DEPOT

APO 872, U. S. Army, dated 10 MAY 1946

TO: Commanding Officer, War Department
Separation Center, U. S. A.

This soldier was trfd to your command per
MO 8469 dated 10 MAY 1946

and left this organization MAY 16 1946

He was last paid to include Apr 46
by Jones Lt Col.

Due United States:

SEE REMARKS FINANCIAL

Allotments:

CLASS	AMOUNT	DEDUCTED THROUGH
F	22	Date last paid
E		Date last paid
N	50	Date last paid
B		Date last paid

Due sol at date trfd: Accr pay and alws

His character is: UNKNOWN

Efficiency rating as soldier: UNKNOWN

I have personally verified all entries in
this indorsement.

L A Hayes

L A HAYES CAPT AGD

Assignment Officer

m his

9

h has

19

as mono-
state.

-25259-1

INSERT TO SERVICE RECORD

Ind.

To 19

This soldier was transferred to

per and left this organization 19

He was last paid to include 19

by

(Name and grade of disbursing officer or agent officer, if any)

Due United States; if nothing, so state

ALLOTMENT STATUS

CLASS	AMOUNT DEDUCTED	DEDUCTED THROUGH
B		
D		
E		
F	34.50	00.50
N	02.50	03.50

† Due soldier at date of

His character is

Efficiency rating as soldier

I have personally verified all entries in this indorsement

(Name)

(Grade and organization)

This soldier reported 19

(Organization to which transferred)

and was assigned to (see page 4).

† Here enter any amounts due soldier and not paid to date, such as monetary allowance in lieu of quarters and subsistence; if nothing, so state.

Due United States; if nothing,

* Due soldier at date of

This soldier ^{has} ~~has not~~ a Class E allotment running which has been deducted from his pay to include _____, 19____

This soldier has authorized a Class D deduction for Government insurance which has been deducted from his pay to include _____, 19____

His character is _____

Efficiency rating as soldier _____

I have personally verified all entries in this indorsement.

(Name)

(Grade and organization)

This soldier reported _____, 19____

*Here enter any amounts due soldier and not paid to date, such as monetary allowance in lieu of quarters and subsistence; if nothing, so state.

†Strike out words not applicable.

16-25259-1

Ind.

To _____, 19____

This soldier was transferred to _____ per _____ and left this organization _____, 19____

He was last paid to include _____, 19____ by _____

(Name and grade of disbursing officer or agent officer, if any)

Due United States; if nothing, so state _____

ALLOTMENT STATUS

CLASS	AMOUNT DEDUCTED	DEDUCTED THROUGH
B		
D		
E		
F		
N		

† Due soldier at date of _____, 19____

His character is _____

Efficiency rating as soldier _____

I have personally verified all entries in this indorsement

(Name)

(Grade and organization)

This soldier reported _____, 19____ (Organization to which transferred)
and was assigned to _____ (see page 4).

†Here enter any amounts due soldier and not paid to date, such as monetary allowance in lieu of quarters and subsistence; if nothing, so state.

16-36425-3 GPO

Initials	Name, grade, and organization (Typewritten or printed)
<i>J</i>	R MOSLEY, WO(JG) USA
	Pt Logan Reception Center
<i>OKS</i>	O A SMITH, WO1A, USA Asst. Pers. O.
	Hq IRTC, Camp Blanding, Fla.
<i>MHP</i>	M. H. PEDERSON, CAPT., INF.
	ASST. PERS. OFF.
	HQ IRTC CAMP BLANDING, FLA.
<i>72</i>	V. PETERS, 2ND LT., INF. ASST. PERS. O.
	HQ IRTC, CAMP BLANDING, FLA.
<i>MJG M</i>	MARY J. NILES
	1st Lt., WAC, Pers. O.
<i>RDB</i>	Robert D Bedwell 2nd Lt
	Asst Pers Officer T.P.S.
<i>VB</i>	VIVIAN, R. BUELL
	1st LT., WAC
<i>HTA</i>	Herbert F. Hobbs
	Capt. INF.
	HAROLD E LINDER
	WO1G AUS
<i>(VWJ)</i>	Charles W. Tate
	WO1G USA (RPO)
<i>B</i>	J. F. Buffkin Jr., 1st Lt Inf.
	508 Frecht Inf
<i>M</i>	W. E. McDaniel
	1st Lt 508 PIR
<i>EP</i>	EUGENE PITON
	1st Lt. Inf
<i>VOB</i>	VO PAUL Capt. E.A.
	R E 8409



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POST WW II

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