

USMC: MARGRATEN

I CERTIFY that the typed names appearing above are the same as the original signatures on the original copy by *Raymond J. Padruquey*

PLOT: K ROW: 20 GRAVE: 20
DATE OF BURIAL: 8 FEB 49
VERIFIED BY GRS OFFICER:
WILLARD B OWEN, CAPT, INF.

DISINTERMENT DIRECTIVE

1

SECTION A -- NAME AND BURIAL LOCATION OF DECEASED
DIRECTIVE NUMBER: 4650 02488
DATE: 15 10 48
DAY MONTH YEAR

NAME: BROWN DONIVAL H
SERIAL NUMBER: 13034602
GRADE: PFC
ARM: 1
RACE: 2
RELIGION: 1

CEMETERY: MARGRATEN HOLLAND
PLOT: II ROW: 12 GRAVE: 291
DISPOSITION OF REMAINS: 4601 80
DIST. CTR.

SECTION B -- CONSIGNEE AND NEXT OF KIN FLAG SENT: 8 FEB 49

NAME AND ADDRESS OF CONSIGNEE: MARGRATEN, HOLLAND
NAME AND ADDRESS OF NEXT OF KIN: CARRIE BROWN (WIDOW)
1233 PIKE STREET
ALBANCE, OHIO

SECTION C -- DISINTERMENT AND IDENTIFICATION

NAME: SERIAL NUMBER: GRADE: DATE OF DEATH: DATE DISTINTERRED:
IDENTIFICATION TAG ON: ORGANIZATION: USAGF RELIGION: IDENTIFICATION VERIFIED BY: NAME AND TITLE:

SECTION D -- PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: CONDITION OF REMAINS:

OTHER MEANS OF IDENTIFICATION:

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.):

REMAINS PREPARED AND PLACED IN CASKET

DATE: BY:

CASKET SEALED BY: EMBALMER (Signature):

CASKET BOXED AND MARKED: SHIPPING ADDRESS VERIFIED BY:

DATE: BY:

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

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS: HAT
WILK
REMARKS: [Handwritten notes and signatures]

1

DISINTERMENT DIRECTIVE

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

DAY MONTH YEAR

NAME

SERIAL NUMBER

RANK

ARM

DATE OF DEATH

BROWN DONIVAL H

13034602 PFC

1

DAY MONTH YEAR

CEMETERY

DISPOSITION OF REMAINS

CODE DIST. PT.

PLOT

ROW

GRAVE

COUNTRY

CAUSE OF DEATH

II 12 291 MARGRATEN HOLLAND

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

NAME AND ADDRESS OF NEXT OF KIN

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISINTERRED

DONIVAL H. BROWN

13034602

PFC

17 AUGUST 1948

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

REMAINS

MARKER

P

EDWARD E. STOUT

1/LT., TC

NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

UNIFORM

ADVANCED DECOMPOSITION. CRANIAL AUTOPSY. REMAINS COMPLETE.

OTHER MEANS OF IDENTIFICATION

NONE

MINOR DISCREPANCIES

NONE

REMAINS PREPARED AND PLACED IN CASKET

DATE 30 AUGUST 1948

BY

ROY T. PATTERSON, EMBALMER

CASKET SEALED BY

ROY T. PATTERSON

EMBALMER (Signature)

ROY T. PATTERSON

CASKET BOXED AND MARKED

ROBERT E. KREPS

ALL TAGS, PLATES, AND MARKINGS VERIFIED BY

DATE 30/8/48 BY CLERK RECORDER

ROGER N. LETOURNEAU, CAPT., FA

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

ROGER N. LETOURNEAU, CAPT., FA

SIGNATURE OF GRS INSPECTOR

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

7 April 1949

AD
MB Pfc. Donival H. Brown, ASN 13 034 602

~~Plot K, Row 20, Grave 20~~

Headstone: Cross

Margraten (Holland) U.S. Military Cemetery

Mrs. Carrie Brown
1233 Pike Street
Alliance, Ohio

Dear Mrs. Brown:

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

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

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

H. Feldman
Sincerely yours,

H. FELDMAN
Major General
The Quartermaster General

rlv

R. TEST FOR DISPOSITION OF REMAIN

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

DATE:

Pfc. Donival H. Brown, 13 034 602
 Plot II, Row 12, Grave 291
 United States Military Cemetery
 Margraten, Holland

22 JUL 1948

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

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

PART I

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

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

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

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

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

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

*Coded
 28 Oct 48
 M. Baker*

M. Baker

PART I (Continued)

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

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

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

OR

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

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

IN CASE OF EMERGENCY THE NAME AND ADDRESS OF THE PERSON NEXT IN LINE OF KINSHIP AFTER ME, AS SET FORTH IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," IS:

LAST NAME	FIRST NAME	MIDDLE INITIAL	RELATIONSHIP TO DECEASED
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY

REMARKS OR ADDITIONAL INSTRUCTIONS (For additional space use page 4.)

AS EXPLAINED IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," I AM THE NEXT OF KIN AND THE INDIVIDUAL AUTHORIZED TO DIRECT THE DISPOSITION OF THE SAID REMAINS.

I, the undersigned, DO SOLEMNLY SWEAR (OR AFFIRM) that the statements made by me in the foregoing document are full and true to the best of my knowledge and belief.

Mt Carrie Brown
(SIGNATURE OF NEXT OF KIN)
Carrie Brown
(NAME PRINTED OR TYPED)

1233 Pike St.
(STREET AND NUMBER)
Alliance, Ohio
(CITY AND STATE)

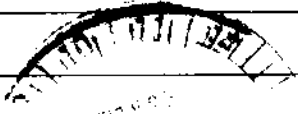
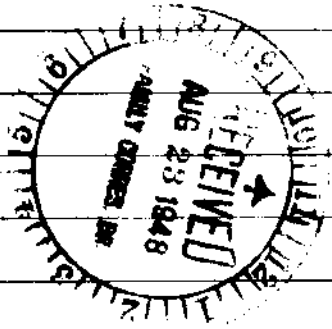
Subscribed and duly sworn to before me according to law by the above-named applicant this 18th day of August, 1948, at city (or town) of Alliance, county of Stark, and State (or Territory or District) of Ohio.

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

Mildred B. Eales
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)
Notary Public
(OFFICIAL TITLE)
 My commission expires 9-25-48

ADDITIONAL REMARKS AND INSTRUCTIONS

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



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

In Reply Refer To ER Br: QMGR 293 Brown, Donival H., Pfc., 13 034 602
Plot II, Row 12, Grave 291
United States Military Cemetery
Margraten, Holland

IMPORTANT

Address reply and envelope to:
THE QUARTERMASTER GENERAL
Do NOT include the name of the
official who signed the com-
munication.

P R I O R I T Y

22 JUL 1948

Mrs. Pauline A. Rogers, Home Service Director
Eastern Area, American Red Cross
615 North Saint Asaph Street
Alexandria, Virginia

Dear Mrs. Rogers:

The Next of Kin of the above captioned deceased wife
(Relationship)

Mrs. Carrie Brown, Post Office Box #101, Franklin, West Virginia
(name) (address)

has failed to return a Form 345 indicating disposition instructions for the
remains. The form was dispatched 4 December 1947.

It is respectfully requested that the attached QMGR Form 345 be properly
accomplished by the Next of Kin and legal documents obtained through assistance
of your representative if appropriate, be furnished this office. In the event
you are unable to secure disposition instructions from the Next of Kin, it is
further requested that a statement of the action taken by your representative
be furnished this office for use as a basis for final disposition of remains of
the decedent.

It is recommended that in contact with the Next of Kin mentioned above,
they first be queried as to whether or not they have submitted the appropriate
form, as it may have been mailed to this office since receipt by you of this
request.

Sincerely yours,

JOHN O. HYATT
Colonel, QMC
Memorial Division

Incls. 2

chb

JUL 22 1948

Pfc Donald E. Brown, 15 OSA 602
Plot II, Row 12, Grave 291,
United States Military Cemetery
Margraten, Holland

4 December 1947

Mrs. Carrie Brown
Post Office Box 101
Franklin, West Virginia

Dear Mrs. Brown:

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

The enclosed pamphlets, "Disposition of World War II Armed Forces Dead," and "American Cemeteries," explain the disposition, options and services made available to you by your Government. If you are the next of kin according to the line of kinship as set forth in the enclosed pamphlet, "Disposition of World War II Armed Forces Dead," you are invited to express your wishes as to the disposition of the remains of the deceased by completing Part I of the enclosed form "Request for Disposition of Remains." Should you desire to relinquish your rights to the next in line of kinship, please complete Part II of the enclosed form. If you are not the next of kin, please complete Part III of the enclosed form.

If you should elect Option 2, it is advised that no funeral arrangements or other personal arrangements be made until you are further notified by this office.

Will you please complete the enclosed form, "Request for Disposition of Remains" and mail in the enclosed self-addressed envelope, which requires no postage, within 30 days after its receipt by you? Its prompt return will avoid unnecessary delays.

Sincerely,

THOMAS B. LANKIN
Major General
The Quartermaster General

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JUL 22 1948

30 October 1946

Mrs. Carrie Brown
Post Office Box #101
Franklin, West Virginia

Dear Mrs. Brown:

J.P.
The War Department is most desirous that you be furnished information regarding the burial location of your husband, the late Private First Class Donival H. Brown, A.S.N. 13 034 602.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Margraten, Holland, plot II, row 12, grave 291. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

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

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

Please accept my sincere sympathy in your great loss.

Sincerely yours,

[Signature]
T. B. LARKIN
Major General
The Quartermaster General

OCT 30 3 29 PM '46
MAIL & RECORDS BRANCH

lh

189

REPORT OF BURIAL
TM TO-630 AND AR 30-1815

9 May 1945

Last Name		First		Initial		Serial No.	
Brown,		H.M.M. Donival		H.		13034602	
Unit		3967 QM Co. GRS Co.		Cause of Death		DOW	
Place of Death		Date of Death		Name of Cemetery		Coordinates of Location	
Vic. Attenmindingen, Germany		3 May 1945		U.S. Mil. Cem., Margraten, Holland		VK 645482	
Time and Date of Burial		Grave Number		Row Number		Plot Number	
0915 9 May 1945		291		12		II	
						Type of Marker	
						Wooden Cross	

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

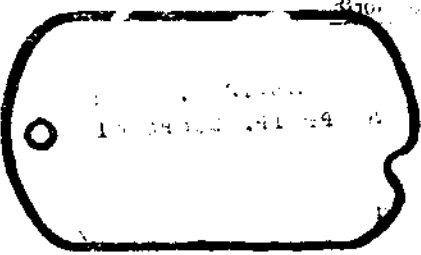
No Identification Tags
How were remains identified?

What means of identification were buried with the body?

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

Who is buried on:	Unknown	X-442	(MARGRATEN)	(AMERICAN)	UNKNOWN	290
Deceased's Right:	Name	Serial No.	Rank	Organization	Grave No.	
	Lannon, Raymond J.	39131703	S/Sgt.	AAF	292	
Deceased's Left:	Name	Serial No.	Rank	Organization	Grave No.	

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



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

Emergency Addressee Mrs. Carrie M. Brown
Name
Box 101 Franklin, West Virginia
Address

Religion P

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

[Handwritten signature and date]
MAY 1 1945

[Handwritten signature]
EDWIN DONOVAN person reporting burial
1st. Lt., QMC GRS Officer
612 QM Co. Reg. Co.

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

REPORT OF DEATH

DATE 4 Jun 45

FULL NAME Brown, Donival H.				ARMY SERIAL NUMBER jdH 2831 13034602				GRADE Pfc.															
HOME ADDRESS Bonny Blue, Va.				ARM OR SERVICE Quartermaster Corps				DATE OF BIRTH 3 Sept 21															
PLACE OF DEATH European Area				CAUSE OF DEATH Accidental Gunshot wound.				DATE OF DEATH 3 May 45															
STATION OF DECEASED European Area				DATE OF ENTRY ON CURRENT ACTIVE SERVICE 15 Apr 41				LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS 4 yr 8°															
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Carrie Brown, wife, PO Box 7101, Franklin, W. Va.																							
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Carrie Brown, wife, Same as above. Mr. Roy Brown, father, Gen Del, Bonny Blue, Va. Mr. William M. Brown, brother, Same as father's.																							
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)											
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO										
	X	X			X	X					X												
ADDITIONAL DATA AND/OR STATEMENT <p align="right"><input type="checkbox"/> BATTLE <input checked="" type="checkbox"/> NON-BATTLE</p> Evidence of death rec'd in WD 28 May 45.																							
<table border="1"> <tr> <th colspan="3">COPIES FURNISHED:</th> </tr> <tr> <td>S. G. O.</td> <td>F. B. I.</td> <td>F. O., U. S. A.</td> </tr> <tr> <td>S. O. C. M. G.</td> <td>O. F. D.</td> <td>ARMY EFFECTS BUREAU CASUALTY BRANCH FILE</td> </tr> <tr> <td>G. A. O.</td> <td>VTY. ADMIN.</td> <td>A. G. 201 FILE</td> </tr> </table>												COPIES FURNISHED:			S. G. O.	F. B. I.	F. O., U. S. A.	S. O. C. M. G.	O. F. D.	ARMY EFFECTS BUREAU CASUALTY BRANCH FILE	G. A. O.	VTY. ADMIN.	A. G. 201 FILE
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G. A. O.	VTY. ADMIN.	A. G. 201 FILE																					
<p align="right">BY ORDER OF THE SECRETARY OF THE WAR DEPARTMENT <i>James W. Pinkhart</i> ADJUTANT GENERAL</p>																							

528068

ENB:FR:kl
November 9, 1945
11-9-45

Dear Mrs. Brown:

The Army Effects Bureau has received some additional property of your husband, Private First Class Donival H. Brown.

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.

Sincerely yours,

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

RM 3-31-48

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

The inclosed letter received from you does not mention the name or Army serial number of the soldier about whom you are writing.

In order that we may take the necessary action, I shall appreciate your filling in the information requested below, and returning this form to us with your letter.

For your convenience there is inclosed a self-addressed return envelope which needs no postage.

ARMY EFFECTS BUREAU

SOLDIER'S NAME Brown Donald H
(Last) (First) (Middle Initial)

ARMY SERIAL NUMBER 13034602

If we have had previous correspondence with you, show reference number which appeared on our letters: 528668

*Mrs. Lillian Brown
7346 Broadway
Alliance, Ohio*

for file 14

AMOUNT OF CHECK	DISCREPANCY IN AME	INCLOSE VALU. \$	RECIPIENT FROM
ACCOUNT NUMBER	SERIAL NUMBER	SHIP VALUABLES	CASUALTY REPORT
	RANK	VALUABLES SHIPPED BY (clerk)	INVENTORY FORM 20
<p>PFC Donival H. Brown 13034602 528668 D</p> <p>Mrs. Carrie Brown 734 East Broadway Alliance, Ohio</p>			LETTER
			NO. & TYPE OF CONTAINER
			ENVELOPE
			/ CARTONS
			PACKAGE
			FOOT LOCKER
			SPECIAL INSTRUCTIONS
			REMOVE GI
			SHIP BLOODSTAINED
			SHIP DAMAGED
REMOVE BL'DSTAINED			
REMOVE DAMAGED			
FILMS REMOVED			
DIARY REMOVED			
SUMMARY COURT DATA		DATE ACTION TAKEN	
DATE OF FINDING	APPLICANT	MAIL REVIEWER (initials)	
REMARKS		SHIPPED	
		FRANKED	
		EXPRESS	
		FREIGHT	
		WGV SHIPPED 2 12-45	
		SHIPPING CLERK	
		ROUTING	
		ACCOUNTING BRANCH	
1 WAREHOUSE			
2 FILE			
ORDER FOR ACTION			

EFF OM FORM 14
10 OCT 1945

520668

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

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

CONTAINERS ADDRESSED TO <i>none</i>	INFORMATION <i>Mrs Carrie M. Brown Box 101 Franklin, West Virginia</i>
NAME AND STATUS VARIATIONS <i>Name on G. R. label looks like Donival Brown,</i>	CROSS REFERENCE

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

TALLY NO. <i>3414</i>	ORIG. NO. OF PKGS.	EXAMINING DATE <i>26-Oct-45</i>	BOX NO.	SHEET _____ OF _____ SHEETS
NAME <i>DONIVAL - H - BROWN</i>			A. S. N. <i>13034602</i>	
ORGANIZATION			RANK <i>PFC</i>	CASE NO.
WAREHOUSE SPACE <i>711</i>	EXAMINED BY <i>Crews</i>	DIARY REMOVED		
PACKAGE DESCRIPTION	PACKED BY	PHOTO FILM REMOVED		
WEIGHT	INSPECTED BY	MOTION PICTURE FILM REMOVED		
	STORED BY <i>[Signature]</i>	SHIPPED		
		DATE <i>NOV 14 1945</i>	BY WHOM	

NAME **BROWN, ROBERT W. IFC. 4602**

BAY	PALLET	BOX	TALLY
11	14	27	3414

TYPE OF PKG.	WHSE SPACE	INVENTORIED
GRB		

RE. QM Form 48

RESTRICTED
INVENTORY FORM

9 May 1945

DATE

SUBJECT: Inventory of Personal Effects of:

Brown, **Denival** **H.** **Pfc.** **13034602**
(LAST NAME) (FIRST NAME) (MI) (RANK) (ASN)

TO: Effects Quartermaster, Communications Zone, APO 827 US Army

The above named individual of 3967th CM Co.
(UNIT) (ORGANIZATION)

was reported DOW about 3 May 1945 1944.
(STATUS (KIA, MIA, Hosp. etc.)) (DATE)

Designated Beneficiary if information readily accessible

Mrs. Carrie M. Brown, Box 101, Franklin, West Va.

INVENTORY OF EFFECTS

- 18 Souvenir Bank Notes ✓
- 2 Billfolds ✓
- 5 Souvenir Coins ✓
- 1 Driver's License, Military ✓
- 1 Identification Card ✓
- 5 Money Order Receipts ✓
- 4 Pens, Fountain (Unknown) ✓
- 11 Photos ✓
- 2 Receipts ✓
- 1 Watch, Pocket (Unknown) ✓
- 1 Watch, Chain ✓

Money in the amount of NONE has been turned into _____
(NAME OF FINANCE OFFICE AND

Form WDFD 38 enclosed.
SYMBOL NUMBER)

NAME AND ADDRESSES OF ANY BANKS IN WHICH ACCOUNTS MAY BE CARRIED

I certify that the above items constitute all of the effects, secured by me, of the above named individual and that they were forwarded to the Effects Depot by _____ on _____ 194____.
(RAIL, TRUCK, ETC.)

Name EDWIN J. DONOVAN
Rank & ASN 1st Lt., ASN 0-1995473
611th CM Cr. Reg. Co.
Organization _____

Any additional pertinent information:

528668

RTB:FR:tdl
October 8, 1945

Dear Mrs. Brown:

I am inclosing a check for \$54.80, representing funds of your husband, Private First Class Donival H. Brown.

No other property belonging to him has been received at the Army Effects Bureau to date.

Our action in transmitting funds does not, of itself, vest title in the recipient. Such property is forwarded for distribution according to the laws of the state of decedent's legal residence.

Money ordinarily is sent from overseas by mail in advance of other effects; therefore, it is probable that additional belongings of decedent will reach this Bureau at a later date. As it is intended to forward any such property to you promptly upon receipt here, I ask that you please notify this Bureau if there is a change in your address within the next few months.

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

Sincerely,

1 Incl--Check

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

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO: Mrs. Carrie Brown

Effects of:

Name Pfc. Donival H. Brown

ASN 13034602

Case No. 528668 D

Wt.

DATE 8 October 1946

RTB:FR:blb

FOR: Effects Quartermaster

REMARKS:

Inclose Bureau Check
Acct. No. 167074
Amount \$54.80 *5m 25*
 Inclose "Valuables" item
 Ship "Valuables" item(s)

Remove C.I.
 Note discrepancy in ASN
 Film removed
 Diary removed
 Laundry removed

152672 emh

ROUTING:

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

167074

528668

October 5

45

Mrs. Carrie Brown

54.30

Fifty-Four and 20/100

REMARKS

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

Shipping Clerk

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

Case No. 15081008

Date 3 October 1945

SUBJECT: Report of transactions in disposing of the effects of

Donival E. Brown late a
(Name of decedent) 15081008 (Army Serial Number)
Private First Class Quartermaster Corps who died
(Grade) (Organization, Army or Service)
on the 3 day of May, 1945, at European Area

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

1. Complying with A.W. 112, a Summary Court-Martial, convened at Kansas City, Mo., pursuant to S.O. 228, Hq., KOCM 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 decedent's camp or quarters, effects of decedent were forwarded to this Summary Court-Martial.

b. Local debtors owed decedent's estate \$ none, of which the sum of \$ none was collected. (If nothing was found due or collected, state "None"; otherwise attach itemized statement of same owing and collected.) (Encl. none.)

c. Decedent owed undisputed local creditors the sum of \$ none, which has been paid by the Summary Court-Martial from funds of decedent. (See inclosed receipt none, Encl. none)

d. Disposition of decedent's effects (less money paid creditors, if any) has been made by the Summary Court-Martial by transmittal through the Quartermaster Corps, at Government expense to person found entitled (See Summary Court-Martial FINDING below)

FINDING

Before a Summary Court-Martial which convened at Kansas City, Missouri, on 3 October 1945, pursuant to Special Orders 228, Headquarters, KOCM Depot, dated 25 September 1943, the application or affidavit of Mrs. Carrie Brown 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. Carrie Brown (Name of person found entitled)

PO Box 2102 State of Franklin
(Number, Street or Avenue) (City, town or Village)
West Virginia, is the widow 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, QMC
(Name, rank, Organization)
SUMMARY COURT MARTIAL

ARMY EFFECTS BUREAU
ACCOUNTING INVENTORY

GC

CASE NO.

528668

TYPED BY

DL

lc

DATE

9-22-45

STATUS

Dec.

NAME

Donival
Donival H. Brown ✓

A.S.N.

13034692 ✓

RANK

Pfc. ✓

ORGANIZATION

CONSIGNOR

Q-290

AMOUNT

54.80

311
18-2-45
107074
12/15
885
Check No. 152675ms

LIST NO.

F-314

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

#

DATED

SYMBOL

AMOUNT

REMARKS:

L/T to see file

NAME BROWN, DONIVAL H RANK PFC ASN 13034602 STATUS KIA

SHIPPED TO: K.C.

DATE: 31 JUL 45

BAGG. LIST NO. 20

SHEET NO. 19

TYPE OF CONTAINER 738-2535

DELETED ON T/O NO.

CASE No. 282554

Brown, Donival H. Pfc., 13034602

Form 38 - \$54.80 - 5 June 1945

J.P. Bellamy, Lt. Col., F.D.

C.V. 1825

F-314

Deceased

BROWN, Donival H. Pfc. 13034602. DECEASED. C/282554

BROWN, Donival H Pfc 13034602 KIA

1 bag

Recd 9 June 1945

Shipped 16 June 1945

525,668

RESTRICTED
INVENTORY FORM

0/9825-4 JD 19 JUN 1945

8 June 1945
Date

SUBJECT: Inventory of Personal Effects of:

Brown Donival h Pfc 13034602
(Last Name) (First Name) (MI) (Rank) (ASN)

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

The above named individual of 3967 Truck Company
(Unit) (Organization)

was reported Dead MBU about 4 MAY 19 45
Status (KIA, MIA, Hosp. etc.)

Designated Beneficiary if information readily accessible Mrs. Garrie Brown, Box
101 Franklin, West Virginia.

INVENTORY OF EFFECTS

none

Money in the amount of \$54.80 has been turned into J. P. Sallamy, Lt. Col
(Name of Finance Office)

Finance Department Form WDFD 38 enclosed.
(and symbol number)

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 Depot
by mail on 8 June 19 45
(Rail, Truck, etc.)

Name John H. Craemer
Rank & ASN 1st Lt. Col

Organization 3967 Truck Company

Any additional pertinent information:

Serial No. 13034602 Name Brown, Donald
Grade _____ Rank H.
Organization _____
Address _____
Nearest Relative _____
Address _____
Killed in Action _____ Died of Disease _____
Date May 3-45 Hospital _____
Battle Area _____ Information
Place of Burial U.S. Mil. Cem. Margraten
Point of Coordination _____
Description of Body _____
Members Missing _____

Signed _____