

45 njc
293 O'KANE, VAL. K. 19,048,015.CPL. INF. EUROPEAN AREA (ORIGIN)

EO

RECEIPT OF REMAINS

DISTRIBUTION CENTER #13 SFPE OAKLAND ARMY BASE ROUTINE 19 APRIL 1949
 OAKLAND 14 CALIFORNIA - GRAVES
 REMAINS CONSIGNED TO:

SUPERINTENDENT
 GOLDEN GATE NATIONAL CEMETERY
 SAN BRUNO CALIFORNIA

543
 REMAINS OF LATE CORPORAL VAL K O KANE USAGF 19048015 WILL BE DELIVERED TO YOU BY GOVERNMENT HEARSE AT APPROXIMATELY NINE THIRTY AM TWENTY SIX APRIL BY THIS DISTRIBUTION CENTER ACCOMPANIED BY MILITARY ESCORT. REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS UPON DELIVERY AND THAT YOU IMMEDIATELY PASS THIS INFORMATION ON TO NEXT OF KIN.

F. E. Hylle
 F E HYLLE
 MAJOR QMC
 ACTG CHIEF AGR DIV

FILE
 19 MAY 1949
 19 MAY 1949
 BRANCH
 MILITARY DIVISION
 SEARCH

I, the undersigned, do hereby acknowledge receipt of the remains of the above-named deceased
 this 26 day of April, 1949
 (Day) (Month)

GOLDEN GATE NATIONAL CEMETERY

Sgt. H. H. H. H. H.
 (Witness (Escort))

H. J. Jones
 (Consignee)

QMC FORM
 REV 9 MAR 48 1193

U. S. GOVERNMENT PRINTING OFFICE 16-54737-1

REPATRIATION
RECORDS BRANCH
MAY 9 2 20 PM '49
MEMORIAL DIVISION

JSB *JSB*DISINTERMENT DIRECTIVE *56-42*
*107***1**SECTION A —
NAME AND BURIAL LOCATION OF DECEASEDDIRECTIVE NUMBER
4650 11918DATE
15 11 48
DAY MONTH YEAR

NAME

O KANE VAL K

SERIAL NUMBER

19048015 CPL

GRADE

ARM

1

RACE

RELIGION

1 1

CEMETERY

MARGRATEN HOLLAND

PLOT

PPP

ROW

9

GRAVE

205

DISPOSITION OF REMAINS

9121

13

CODE

DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

GOLDEN GATE NATIONAL CEMETERY
SAN BRUNO, CALIFORNIA

NAME AND ADDRESS OF NEXT OF KIN

MARGARET J. O'KANE (WIDOW)
7305 NORTH EAST ~~ISKUJAN STREET~~
PORTLAND, OREGON ~~SISKIYOU~~

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

GRADE

DATE OF DEATH

DATE DISINTERRED

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

☐ REMAINS
☐ MARKER

USAGF

NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

SEE ATTACHED SHEET

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

QMC FORM
REV 11 FEB 48 1194

5370

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED			
FROM UMC MANHATTEN, HOLLAND		TO ANTWERP PORT, PIHR 140	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER	
SIGNATURE OF SHIPPER WILLARD B. OPEN CAPT. INF. 0143	DATE 7.2.49	SIGNATURE OF RECEIVER B. D. Miller	DATE 1 FEB 1949
2. SHIPPED			
FROM AGRC ANTWERP BELGIUM		TO USAT HAITI VICTORY	
KIND OF CONVEYANCE VC. 2		NAME OF CONVOYER A. S. KIMBERLIN 1st Lt. INF.	
SIGNATURE OF SHIPPER R. D. MILLER, Lt. COL. T.C.	DATE 1 MAR 49	SIGNATURE OF RECEIVER A. S. Kimberlin	DATE 1 MAR 49
3. SHIPPED			
FROM		TO 2480	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER Lt. COL. J. C. Hargrett TRANSPORTATION OFFICER	DATE 3/15/49
4. SHIPPED			
FROM N/PC		TO Det #3	
KIND OF CONVEYANCE		NAME OF CONVOYER Joseph V Reed SFC	
SIGNATURE OF SHIPPER LEUT. COLONEL, TC. TRANSPORTATION OFFICER	DATE MAR 17 1949	SIGNATURE OF RECEIVER Capt. J. H. Brown	DATE 23 MAR 1949
5. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
6. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
7. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

1		DISINTERMENT DIRECTIVE			
		SECTION A — NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER	DATE
NAME OKANE VAL K		SERIAL NUMBER 19048015	RANK CPL	ARM 1	DATE OF DEATH DAY MONTH YEAR
CEMETERY					DISPOSITION OF REMAINS DAY MONTH YEAR
PLOT PPP	ROW 9	GRAVE 205	COUNTRY MARGRATEN HOLLAND		CODE DIST. PT. CAUSE OF DEATH
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 VAL K OKANE		SERIAL NUMBER 19048015	RANK CPL	DATE OF DEATH	DATE DISTINTERRED 20 SEPT 1948
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER		ORGANIZATION	RELIGION P	IDENTIFICATION VERIFIED BY FRITZ J TOLTZIEN 1/LT MI NAME AND TITLE	
SECTION D — PREPARATION OF REMAINS FOR SHIPMENT					
NATURE OF BURIAL O.D. UNIFORM.		CONDITION OF REMAINS CRUSHED SKULL. BODY COMPLETE. DISARTICULATED. SMALL AMOUNT OF DECOMPOSED FLESH.			
OTHER MEANS OF IDENTIFICATION NONE					
MINOR DISCREPANCIES NONE					
REMAINS PREPARED AND PLACED IN CASKET					
DATE 21 SEPTEMBER 1948		BY JULIUS E COOPER, EMBALMER			
CASKET SEALED BY JULIUS E COOPER		EMBALMER (Signature) JULIUS E COOPER			
CASKET BOXED AND MARKED THEODORE R ARMSTRONG		XXXXXXXXXXXX ALL TAGS, PLATES & MARKINGS VERIFIED BY: WILLARD B OWEN, CAPT., INF			
DATE 21/9/48		BY IDENT. TECH.			
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.					
WILLARD B OWEN, CAPT., INF SIGNATURE OF GRS INSPECTOR					
1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies. <i>Raymond J Rodriguez</i> <i>CWO USA</i>					
I CERTIFY that the typed names appearing above are the same as the original signatures on the No. 4 copy of F-1194 concerned					
QMC FORM REV 15 MAR 46 1194 <i>VB</i>					

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

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

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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

ROUTING	JOINT MESSAGE FORM		COMMUNICATIONS CENTER NO. EO
SPACE ABOVE FOR COMMUNICATION CENTER			
FROM: (Originator) CHP AGR DIV DIST CEN 13 SFPE OAB	DATE-TIME GROUP 19 APRIL 1949	SECURITY CLASSIFICATION	
PRECEDENCE FOR			
ACTION TO: SUPERINTENDENT GOLDEN GATE NATIONAL CEMETERY SAN BRUNO CALIFORNIA	ACTION ROUTINE	INFORMATION	
	BOOK MESSAGE	ORIGINAL MESSAGE	
	MULTIPLE ADDRESS	CRYPTOPRECAUTION YES NO	
	REFERS TO MESSAGE BELOW		
INFORMATION TO:	IDENTIFICATION	CLASSIFICATION	
<p align="center">- GRAVES -</p> <p>REMAINS OF LATE CORPORAL <u>VAL K O KANE</u> USAGF 19048015 WILL BE DELIVERED TO YOU BY GOVERNMENT HEARSE AT APPROXIMATELY NINE THIRTY AM TWENTY SIX APRIL BY THIS DISTRIBUTION CENTER ACCOMPANIED BY MILITARY ESCORT. REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS UPON DELIVERY AND THAT YOU IMMEDIATELY PASS THIS INFORMATION ON TO NEXT OF KIN.</p> <p align="right">F E HYLL MAJOR QMC ACTG CHIEF AGR DIV</p> <p align="right">GOLDEN GATE NATIONAL CEMETERY SAN BRUNO, CALIFORNIA</p>			
DRAFTER'S NAME (and signature when required)		SECURITY CLASSIFICATION	PAGE OF
SYMBOL TCSFP - GRS		RELEASING OFFICER'S SIGNATURE I R. I. L. WELCH	
TELEPHONE		OFFICIAL TITLE ADMINISTRATIVE OFFICER	

GOLDEN GATE NATIONAL CEMETERY
SAN BRUNO, CALIFORNIA

TO: AGR DIV., SFPE, OAB, OAKLAND, CALIFORNIA

ATTN: MR. NAJOUR

DELIVER TUESDAY THE TWENTY SIXTH OF APRIL THE FOLLOWING REMAINS
TO THIS CEMETERY AT TIMES INDICATED:0800

MANUEL, CHARLES A., 2 LT

MORGAN, LEO A., CPL

O'KANE, VAL K., CPL

PARLIN, DELMER L., PFC

PETREE, LONNIE J., PFC

PORTER, JOSEPH E., PVT

1200

CROWLEY, DOUGLAS G., 1 LT

DAVIS, JOSEPH HENRY, PFC

GALLAGHER, JOHN G., PFC

LA PLANTE, LEONARD O., T/5

LEDESMA, FRANK, PVT

LUCERO, STEVE V., PVT

/s/ A. J. NETTKE,
SUPERINTENDENT

ACTG CHF AGRD SFPE OAB (GRAVES)

5 APR 49

ROUTINE

SUPERINTENDENT
GOLDEN GATE NATL CEMETERY
SAN BRUNO CALIFORNIA

COURIER

FOLLOWING REMAINS ARE SCHEDULED FOR DELIVERY TO YOUR CEMETERY ON
26 APRIL 1949 AS INDICATED:

VAN SHPMT 0800 HRS.
FOR BURIAL THIS DATE

MANUEL, CHARLES A., 2 LT	NY-026-R
MORGAN, LEO A., CPL	NY-026-R
<u>O'KANE, VAL K., CPL</u>	NY-026-R
PARLIN, DELMER L., PFC	NY-026-R
PETREE, LONNIE J., PFC	NY-026-R
PORTER, JOSEPH E., PVT	NY-026-R

VAN SHPMT 1200 HRS.
FOR BURIAL 27 APR 49

CROWLEY, DOUGLAS G., 1 LT	SF 140-R
DAVIS, JOSEPH HENRY, PFC	SF-140-R
GALLAGHER, JOHN G., PFC	SF-140-R
LA PLANTE, LEONARD O., T/5	SF-140-R
LEDESMA, FRANK, PVT	SF-140-R
LUCERO, STEVE V., PVT	SF-140-R

END HYLL

ROUTINE-COURIER

1 1

K. S. NAJOUR

6212

I. L. WELCH

ADM OFF AGR DIV

ROUTING		JOINT MESSAGE FORM		COMMUNICATIONS CENTER-NO.	
SPACE ABOVE FOR COMMUNICATION CENTER					
FROM: (Originator)		DATE-TIME GROUP		SECURITY CLASSIFICATION	
CHF, AGR DIV OAB "GRAVES"		16 Mar 49		UNCL	
ACTION TO:		PRECEDENCE FOR			
SUPT		ACTION		INFORMATION	
GOLDEN GATE NATL CEM		ROUTINE - COURIER		<input type="checkbox"/> ORIGINAL MESSAGE	
SAN BRUNO CALIF		<input type="checkbox"/> BOOK MESSAGE		CRYPTOPRECAUTION	
INFORMATION TO:		<input type="checkbox"/> MULTIPLE ADDRESS		<input type="checkbox"/> YES <input type="checkbox"/> NO	
		REFERS TO MESSAGE BELOW			
		IDENTIFICATION		CLASSIFICATION	
<p>REFERENCE LATE CPL VAL K O'KANE 19048015 SHIPMENT NO NY-026-R PD REQUEST RECORDS</p> <p>YOUR OFFICE BE CORRECTED TO INDICATE ADDRESS OF MARGARET J O'KANE AS 7305 NORTHEAST</p> <p>SISKIYOU RPT SISKIYOU PORTLAND OREGON</p> <p>END KELLER</p> <p style="text-align: right;">GOLDEN GATE NATIONAL CEMETERY SAN BRUNO, CALIFORNIA</p> <p>SENT TO GGNC BY COURIER 16 MAR 49</p>					
		SECURITY CLASSIFICATION		PAGE OF	
		UNCL		1 1	
DRAFTER'S NAME (and signature when required)		RELEASING OFFICER'S SIGNATURE			
		LL. WELCH			
SYMBOL		TELEPHONE		OFFICIAL TITLE	
NY-026-R				ADM. OFFICER	



1949 MAR 11 AM 9:49

WU AA 27 25 NL GOVT COLLECT 5 EXTRA

PORTLAND ORG MAR 10 1949

CHIEF AMERICAN GRAVES REGISTRATION DIVN

OAKLAND ARMY BASE OAK

CONFIRM ORIGINAL INSTRUCTIONS WISH REMAINS VAL KEITH OKANE
TO BE INTERMENT IN GOLDEN GATE NATIONAL CEMETERY SAN BRUNO
CALIFORNIA

MARGARET J OKANE 7305 NORTHEAST SISKIYOU PORTLAND OREGON.

835AM.

7305.

*Correction Not Addressed
Notify operations
Ltr 2 mch
noaff GBN C*

AN5 DH SVC

TSB JD OAK

10 GOVT NL COLLECT FM PORTLAND ORE MAR 10 TO CHF AGR DIV SGD
MARGARET J OKANE CFM ADSE IN SIG COMES 7305 NORTHEAST SISKIYO
RPT SISKIYO ~~ADSEEXXQWERXEXX~~ ADSEE QUERIES SISKUJAN RPT SISKUJAN
COSIR

AN OAK 14

9:41AM

WESTERN UNION

1949 MAR 14 PM 2:53

WUB65 9 COLLECT

PORTLAND ORG MAR 14 1949 231P

AMERICAN GRAVES REGISTRATION DIV

OAB OAK

NL/10 SIGNED OKANE ADDRESS "7305 ~~NOT~~ NORTHEAST SISKIYOU"

CONFIRMED

WESTERN UNION

NL/10 7305

249P

PLS ACK

ROUTING	JOINT MESSAGE FORM		COMMUNICATIONS CENTER NO.
		DELIVER AND REPORT ANY CHARGES	
SPACE ABOVE FOR COMMUNICATION CENTER			
FROM: (Originator) CHIEF AGR DIV SFPE OAB	DATE-TIME GROUP <i>10 March 49</i>	SECURITY CLASSIFICATION	
PRECEDENCE FOR			
ACTION TO: MARGARET J O'KANE 7305 NORTH EAST SISKUJAN ST PORTLAND OREGON	ACTION DAY LETTER	INFORMATION	
	<input type="checkbox"/> BOOK MESSAGE	<input type="checkbox"/> ORIGINAL MESSAGE	
	<input type="checkbox"/> MULTIPLE ADDRESS	CRYPTOPRECAUTION <input type="checkbox"/> YES <input type="checkbox"/> NO	
INFORMATION TO: GRAVES	REFERS TO MESSAGE BELOW		
	IDENTIFICATION	CLASSIFICATION UNCL	
<p>WE HAVE BEEN ADVISED REMAINS OF THE LATE</p> <p>CORPORAL VAL K O'KANE ARE ENROUTE TO THE UNITED STATES ABOARD</p> <p>OUR RECORDS INDICATE YOU WISH REMAINS INTERRED IN GOLDEN GATE NATIONAL CEMETERY SAN BRUNO CALIFORNIA. PLEASE CONFIRM YOUR ORIGINAL INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS WITHIN FORTY EIGHT HOURS AFTER RECEIPT OF THIS MESSAGE AND FURNISH YOUR CORRECT MAILING ADDRESS BY TELEGRAM COLLECT TO CHIEF AMERICAN GRAVES REGISTRATION DIVISION OAKLAND ARMY BASE OAKLAND 14 CALIFORNIA. 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 FINAL INTERMENT OF THE REMAINS WILL BE MADE AS SOON AS PRACTICABLE AFTER RECEIPT FACTORS BEYOND OUR CONTROL MAY DELAY DELIVERY OF REMAINS TO THE NATIONAL CEMETERY FOR SEVERAL WEEKS. HOWEVER NATIONAL CEMETERY SUPERINTENDENT WILL NOTIFY YOU BY TELEGRAM DATE AND HOUR FUNERAL SERVICES WILL BE HELD IN SUFFICIENT TIME TO PERMIT YOUR ATTENDANCE AT YOUR OWN EXPENSE. APPROPRIATE JOINT MILITARY AND RELIGIOUS SERVICES WILL BE PROVIDED AT GRAVESIDE BY VETERANS ORGANIZATIONS OR MILITARY OR NAVAL PERSONNEL. REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. INTERMENT EXPENSE ALLOWANCE OF SEVENTY FIVE DOLLARS IS NOT AUTHORIZED IN ANY CASE WHERE BURIAL IS MADE IN A NATIONAL CEMETERY. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.</p> <p>CHIEF AMERICAN GRAVES REGISTRATION DIVISION</p>			
		SECURITY CLASSIFICATION UNCL	PAGE 1 OF 1
DRAFTER'S NAME (and signature when required)		RELEASING OFFICER'S SIGNATURE	
SYMBOL	TELEPHONE	OFFICIAL TITLE	

1005

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

3075 026R

NAME O KANE, Val K.		RANK Cpl	SERIAL NUMBER 19048015
SOURCE MARGRATEN, HOLLAND		CONSIGNEE Golden Gate National Cemetery San Bruno California	
SHIPPING CASE - General Appearance (Check ONLY Discrepancies)		CONDITION OF SHIPPING CASE (Check one) <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY	
FINISH (Exterior) FINISH (Interior) HANDLES HANDLE BOLTS STENCILING - NAMEPLATE HEALTH PERMIT MARKER HEALTH PERMIT NUMBER		REMARKS USAGF APR 26 1949	
CASKET - General Appearance (Check ONLY Discrepancies)		CONDITION OF CASKET (Check one) <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY	
FINISH (Exterior) HANDLES AND FASTENINGS STENCILING - NAMEPLATE CAM LOCKS (Sealing) OK ODOR OR MOISTURE		REMARKS	
ROUTED THROUGH			
<input type="checkbox"/> MORTUARY OPERATING ROOM		<input type="checkbox"/> REPAIR SHOP	
CONDITION OF REMAINS <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY		CASKET REPAIRED <input type="checkbox"/> YES <input type="checkbox"/> NO	
NECESSARY DISINFECTION (Explain)		CASKET EXCHANGED <input type="checkbox"/> YES <input type="checkbox"/> NO	
		SHIPPING CASE REPAIRED <input type="checkbox"/> YES <input type="checkbox"/> NO	
		SHIPPING CASE EXCHANGED <input type="checkbox"/> YES <input type="checkbox"/> NO	
		REMARKS	
TIME	DATE 4/18/49	SIGNATURE OF MORTICIAN J. M. Hatten	SIGNATURE OF INSPECTOR R. Bates
REMARKS I certify that the casket and shipping case for these remains were inspected by me personally and are in perfect condition. I further certify that I personally checked the name stencil and shipping case tag against the casket tag for these remains and the name as stenciled on the shipping case and as on the shipping case tag are exactly the same as shown on the tag fastened to the casket.			
INSPECTION OFFICER		INSPECTION OFFICER	

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

Cpl. Val K. O'Kane, 19 048 015
 Plot PPF, Row 9, Grave 205
 United States Military Cemetery
 Margraten, Holland

JUN 25 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, MARGARET J. O'KANE

(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 Golden Gate National Cemetery
 (LOCATION OF NATIONAL CEMETERY SELECTED)
San Bruno, California
 (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

Coded
24 Nov 48
msaher

DD Form 12-6-48OQMG FORM 345 MILITARY
14 NOV 1946

PAGE 1

JUN 25 1948

Karp

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			
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.

Margaret J. O'Kane (SIGNATURE OF NEXT OF KIN) 7305 NE Astor (STREET AND NUMBER)
MARGARET J. O'KANE (NAME PRINTED OR TYPED) Portland, Oregon (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 16 day of July,
1948, at city (or town) of Portland, county of Multnomah, and State (or Territory or
District) of Oregon

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

PAGE 2

My Commission Expires November 7, 1948

M. V. Livingston (SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)
Notary Public (OFFICIAL TITLE)

If you are the next of kin and

I, THE _____
NAMED IN PART I OF THIS FORM
THE NEXT EXISTING PERSON

LAST NAME
RELATIONSHIP TO THE DECEASED
NUMBER AND STREET

WHOM I UNDERSTAND SHALL

(SIGNATURE)

(NAME)

If you are NOT the next of kin

THIS IS TO NOTIFY YOU THAT
NAMED ON PAGE 1 OF THIS FORM
SHOULD BE DIRECTED.

LAST NAME
RELATIONSHIP TO THE DECEASED
NUMBER AND STREET

(NAME)

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.

_____	_____
(SIGNATURE OF NEXT OF KIN)	(DATE)
_____	_____
(NAME PRINTED OR TYPED)	(STREET AND NUMBER)
_____	_____
	(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.

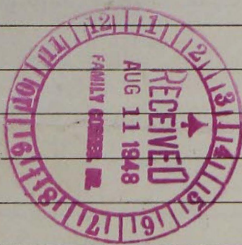
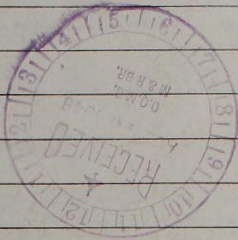
THIS IS TO NOTIFY YOU THAT I AM NOT THE NEXT OF KIN AUTHORIZED TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED NAMED ON PAGE 1 OF THIS FORM. THE FOLLOWING PERSON, TO THE BEST OF MY KNOWLEDGE, IS THE NEXT OF KIN TO WHOM THIS FORM SHOULD BE DIRECTED.

LAST NAME	FIRST NAME	MIDDLE INITIAL
RELATIONSHIP TO THE DECEASED		
NUMBER AND STREET	CITY OR TOWN	STATE OR COUNTRY

_____	_____
(SIGNATURE)	(DATE)
_____	_____
(NAME PRINTED OR TYPED)	(STREET AND NUMBER)
_____	_____
	(CITY AND STATE)

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 RR Br: QMGR 293 O'Kane, Val, K., Cpl., 19 048 015
Plot PFF, Row 9, Grave 205
United States Military Cemetery
Margraten, Holland

Miss Cathryn Henna, Home Service Director
Pacific Area, American Red Cross
1550 Sutter Street
San Francisco 1, California

JUN 25 1948

Dear Miss Henna:

Efforts of this office to contact the Next of Kin of the above-named deceased have failed, in that letters have been returned by Postal Authorities as undeliverable. This office is desirous of obtaining the wishes of Mrs. Margaret J. O'Kane (name) widow (relationship)

whose last known address was 7305 Northeast Siskiyou, Portland 13, Oregon

in connection with disposition of remains of the decedent. Your assistance in resolving this case will be greatly appreciated.

The following additional information is furnished in hope that it will be of assistance to your representative in completing the case.

- Date of latest communication from above named Next of Kin at address as listed None
- Race & Religion of deceased White
- Organization 48th Inf. Regt., 7th Armd Div.
- Date, Place and Cause of Death 7 April 1945 - Schmollenberg, Germany - Killed in action.
- Other members of deceased's family:

Relationship	Name	Address
Father	Elmer E. O'Kane	203 S.E. Nicholas, Monterey Park, Calif.
Brother	Robert C. O'Kane	Box 95, Carberryville, Calif.

In the course of investigation, it may be found that the above named individual is no longer the legal Next of Kin by reason of death, remarriage or incompetency. If so, an appropriate legal document will be necessary to substantiate these facts in order that the next person in line of kinship may be established as authorized to direct disposition of the remains. It will be appreciated if your representative will assist the Next of Kin in securing such documents that may be necessary. The attached QMGR Form 345 should be accomplished by the legal Next of Kin and returned with legal documents if required as stated above.

In the event this case cannot be resolved, it is respectfully requested that this office be furnished a statement covering your investigation and indicating persons or agencies contacted.

Former address of widow:
4038 N.E. Cleveland, St.
Portland, Oregon &
214 N. Nicholas Ave.
Monterey Park, Calif.

Sincerely yours,

JOHN O. HYATT
Colonel, QMG
Memorial Division

1kb

* Incls
Incl 1 - QMGR Form 345
Incl 2 - Envelope
Incl 3 - Booklet
Incl 4 - Cem List

File - NAW
a. p. p. p. p. p.
201-11-12
3 Aug 48

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

In Reply Refer to RR Br: QMGM 293 O'KANE, VAL K. CPL 19 04 P 015
Plot PPP Rm-9 Han. 205
U. S. Mil. Cem.
margraten, Holland

Pacific Area
ARC

Efforts of this office to contact the Next of Kin of the above-named deceased have failed, in that letters have been returned by Postal Authorities as undeliverable. This office is desirous of obtaining the wishes of MARGARET J.

O'KANE WIDOW whose last known address was
(relationship)
7305 N.E. SISKIYOU PORTLAND 13 OREGON, in connection
with disposition of remains of the decedent. Your assistance in resolving this case will be greatly appreciated.

The following additional information is furnished in hope that it will be of assistance to your representative in completing the case.

- Date of latest communication from above named Next of Kin at address as listed none
- Race & Religion of deceased WHITE
- Organization 48th INF. REGT., 7th ARMD. DIV.
- Date, Place and Cause of Death 7 Apr. 45 - Schmollenberg, Germany - KIA
- Other members of deceased's family:

Relationship	Name	Address
Father	ELMER E. O'KANE	203 S. E. NICHOLAS, MONTEREY PARK, CALIF.
Brother	ROBERT C. O'KANE	Box 95 GARBERVILLE, CALIF.

In the course of investigation, it may be found that the above named individual is no longer the legal Next of Kin by reason of death, remarriage or incompetency. If so, an appropriate legal document will be necessary to substantiate these facts in order that the next person in line of kinship may be established as authorized to direct disposition of the remains. It will be appreciated if your representative will assist the Next of Kin in securing such documents that may be necessary. The attached OQMG Form should be accomplished by the legal Next of Kin and returned with legal documents if required as stated above.

In the event this case cannot be resolved, it is respectfully requested that this office be furnished a statement covering your investigation and indicating persons or agencies contacted.

Form address of widow
4038 N.E. CLEVELAND ST.
PORTLAND, OREGON
214 N. NICHOLAS AVE.
MONTEREY PARK, CALIF.
2 Incl. - OQMG Form
1 Incl. - Envelope

Sincerely yours,

JOHN O. HYATT
Colonel, GSC
Memorial Division

VP:rich
18 June 48

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
INTRAOFFICE REFERENCE SHEET

293 O'KANE, VAL K.

293

DUE, HOUR AND DATE

1
No.2
From3
To4
Date5
Message

1

LOI
Section
R/R Br.Record
Section
R/R Br.16 June
MAX
1948

1. As 333 card in this case could not be immediately located action has been taken with a view to resolving the case without the 333 card.

2. File is forwarded to your Section for such correction in 333 card as may be indicated.

3. When your action has been completed please forward file to Mail and Records.

CUNNINGHAM
71507Snowden
6535

THIS FORM WILL REMAIN PART OF THE OFFICIAL FILE

22 JUN 1948

are sent 18 June 48
Train

Parish

File - NAW.
R/R - 22 June 48
Rel.

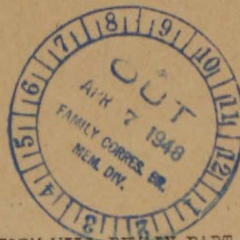
OQMG FORM 638
1 Sept. 1946

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

INTRAOFFICE REFERENCE SHEET

793 O'Kane, Val R *19048015*
DUE, HOUR AND DATE

1 NO.	2 FROM-	3 TO-	4 DATE	5 MESSAGE
1.	LOI Section R/R Br.	Record Section R/R Br.	<i>2 March</i> <i>19 1948</i>	<p>1. As 333 card in this case could not be immediately located, action has been taken with a view to resolving the case without the 333 card.</p> <p>2. File is forwarded to your Section for such correction in 333 card as may be indicated.</p> <p>3. When your action has been completed, please forward file to Mail and Records.</p> <p style="text-align: right;"> <i>GILL</i> 71507 <i>Snowden</i> 6535 </p>



File
NAT
29 MAR 48
OK
Repost

are sent 18 June 48
pap
2 March 1948
T. Barnish

THIS FORM WILL REMAIN PART OF THE OFFICIAL FILE

1383 - QMTTS - Camp Lee, Va. - 3 - 21 - 47 -
100M

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

IN REPLY REFER TO BURIAL OF

243 Cpl. Val K. O'Kane, 19 048 015
Plot PPP, Row 9, Grave 205,
United States Military Cemetery
Margraten, Holland

22 March 1948

Mrs. Margaret J. O'Kane
214 North Nicholson Avenue
Monterey Park, California

Dear Mrs. O'Kane:

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

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

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

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

Sincerely,

Thomas B. Larkin

THOMAS B. LARKIN
Major General
The Quartermaster General

Incls.

*are sent 18 June 48
Hammel*

*File
Hammel
LOI file
16 June 48*

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



PENALTY FOR PRIVATE USE TO AVOID
PAYMENT OF POSTAGE, \$300.
(PMGC)

REASON CHECKED
Undelivered.....
Unknown.....
For better address.....
Moved, left no address.....
No such office in state.....

gone no fuel
H

POSTMASTER: If addressee has removed and
new address is known, notify sender on FORM
3547, postage for which is guaranteed.



84

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

DATE 12 March 19 48

TO: Letter of Inquiry Section

(Thru Officer in Charge)

(FORM 734 will indicate file dispatched to LOI SECTION)

Reference: 793

NAME O'Kane, Val K. RANK Capt
SERIAL NUMBER 19-048-015 CEMETERY Holmes Margaret
PLOT PPP ROW 9 GRAVE 205 Holland
205

Request new* LOI be sent to:

NAME Margaret J. O'Kane RELATIONSHIP Wife
ADDRESS 1244 North Nicholson Avenue
CITY Menlo Park STATE California

Basis of request: (Must include definite facts)

Change of address per A.R.C. letter
10 February 48

Request Approved: _____

Approving Officer's Remarks: _____

* Strike out if no LOI previously dispatched

Smith

L.O.I. SENT 22 MAR 1948

*File
19 Mar 48
L. O. I. per.*

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

22 JAN 1946

In Reply Refer To: QUIGM 293
FA-1 O'Kane, Val E., Cpl, 19 048 015
Margraten, P-77P, R-9, G-205

Date of Birth 5 August 1921

SUBJECT: Request for information re next of kin of above named
deceased serviceman of World War II.

TO : Director, Dependents and Beneficiaries Claims Service
Veterans Administration
Washington 25, D. C.

For use in determination of final disposition of remains of the
above identified deceased serviceman, it is requested that appropriate infor-
mation be entered on the lower portion of this letter and that one copy of the
completed letter be returned to this office.

1 Incl:
Envelope

MARK J. GILL
Major, QMC
Memorial Division

Date _____
Veteran's _____
Name _____
XC _____

Information in the VA case file indicates that the deceased service-
man was survived by the relatives listed below.

NOTE - A. Identify two persons in the following order or preference:

1. Widow
2. Male children over 21 years
3. Female children over 21 years
4. Father

B. If parent is listed, state whether natural, step-, adoptive
or foster parent.

C. If no information is available concerning any surviving rela-
tives, state "None".

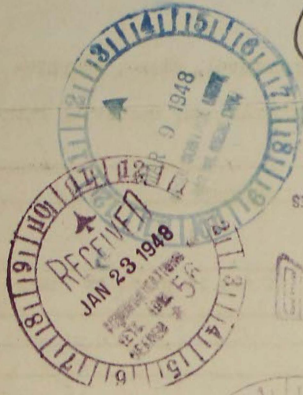
Relationship:	Name	Address
WIDOW :		
(If none, state "None"):	Margaret J. O'Kane	7305 N.E. Siskiyou, Portland 13, Oregon
:	Has she remarried?	No If so, is proof of remarriage on file?
Father :	Elmer E. O'Kane	203 South Nicholson Avenue, Monterey Park, Calif.

M. C. Perryman
MC. PERRYMAN
DIRECTOR
CLAIMS SERVICE
(Address) 180 New Montgomery Street
San Francisco 5, California

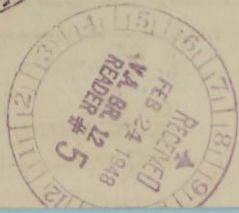
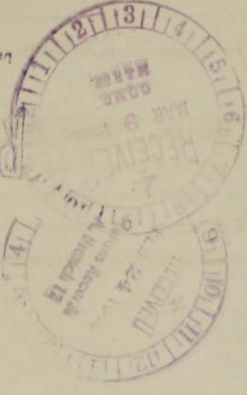
*File 1970-19
C. Perryman
201/81*



45



RECEIVED
FEB 26 1948
DEPENDENTS & BENEFICIARIES
CLAIMS DIVISION
BRANCH 22



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

22 JAN 1948

In Reply Refer To: OMCMM 293
PA-1 O'Kane, Val K., Cpl, 19 048 015
293 Margraten, P-PFF, R-9, C-205

Date of Birth 5 August 1921

SUBJECT: Request for information re next of kin of above named deceased serviceman of World War II.

TO : Director, Dependents and Beneficiaries Claims Service
Veterans Administration
Washington 25, D. C.

For use in determination of final disposition of remains of the above identified deceased serviceman, it is requested that appropriate information be entered on the lower portion of this letter and that one copy of the completed letter be returned to this office.

mlg 1 Incl:
Envelope

MARK J. GILL
Major, QMC
Memorial Division

mf
MJC
edk

(Kennedy)

Date _____
Veteran's _____
Name _____
XC _____

Information in the VA case file indicates that the deceased serviceman was survived by the relatives listed below.

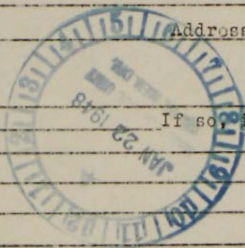
NOTE - A. Identify two persons in the following order or preference:

1. Widow
2. Male children over 21 years
3. Female children over 21 years
4. Father

B. If parent is listed, state whether natural, step-, adoptive or foster parent.

C. If no information is available concerning any surviving relatives, state "None".

Relationship: _____ Name _____ Address _____
WIDOW :
(If none,
state "None":
Has she remarried? _____ If so, is proof of remarriage on file? _____



DIRECTOR
CLAIMS SERVICE
(Address) _____

val

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

In Reply Refer to: QMGM 293 O'Kane, Val K., Cpl. 19 048 015
FA-1 Margraten, P-PFF, R-9, G-205

Date: **22 JAN 1948**

Miss Cathryn Henna
Home Service Director
Pacific Area
American Red Cross
Larkin and Grove Streets
San Francisco 1, California

Dear Miss Henna:

The Quartermaster General of the Army has been entrusted with the responsibility of the disinterment and final burial of World War II deceased personnel. In order to secure disposition instructions, all efforts to contact the next of kin of the above-named decedent through various Government Agencies and other members of the decedent's family have failed.

It is respectfully requested that your office furnish the current address of Mrs. Margaret J. O'Kane, wife, who is reflected
(Name) (Relationship)
in the records of this office as the next of kin and whose last known address was 4038 Northeast Cleveland Street, Portland, Oregon.

In the event you are unable to locate the next of kin as shown above, it is also requested that this office be furnished the names, addresses and relationship of any other members of the decedent's family.

Mark J. Gill
MARK J. GILL
Major, MC
Memorial Division

AMC File No. _____

Date: February 10, 1948

Field investigation by American Red Cross personnel revealed:

NAME	RELATIONSHIP	ADDRESS
Mrs. Margaret J. O'Kane	Widow	214 N. Nicholson Ave. Monterey Park, California

This address was secured from the U. S. Post Office at Portland, Oregon, and was current as of September, 1947

REMARKS:

PPP-9-205

AIR MAIL

Exel Salomon
Director
Home Service Correspondent

File
NAT Reading Room
26 Feb 48
Cullack



RECORDS BRANCH
FEB 12 2 55 PM '49
MEMORIAL DIVISION

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

In Reply Refer to: OQGM 293 O'Keane, Val E., Col, 19 048 015
 7A-1 Harvaton, D-212, D-2, 0-205

Date: **22 JAN 1948**

Miss Cathryn Hanna
 Home Service Director
 Pacific Area
 American Red Cross
 Larkin and Grove Streets
 San Francisco 1, California

Dear Miss Hanna:

The Quartermaster General of the Army has been entrusted with the responsibility of the disinterment and final burial of World War II deceased personnel. In order to secure disposition instructions, all efforts to contact the next of kin of the above-named decedent through various Government Agencies and other members of the decedent's family have failed.

It is respectfully requested that your office furnish the current address of Mrs. Margaret J. O'Keane, wife, who is reflected (Name) (Relationship) in the records of this office as the next of kin and whose last known address was 4038 Northeast Cleveland Street, Portland, Oregon.

In the event you are unable to locate the next of kin as shown above, it is also requested that this office be furnished the names, addresses and relationship of any other members of the decedent's family.

mlg

Mark J. GILL
 Major, QMC
 Memorial Division

(Kennedy)

AAC File No. _____

Date: _____

Field investigation by American Red Cross personnel revealed:

NAME

RELATIONSHIP

ADDRESS

RELATIONS:

Director

AIR MAIL

RECORDED
 JAN 22 1948
 18 AM '48
 MEMORIAL DIVISION

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

IN REPLY REFER TO BURIAL OF

Cpl Val K. O'Kane, 19 048 015
Plot PPP, Row 9, Grave 205,
United States Military Cemetery
Margraten, Holland

5 December 1947

Mrs. Margaret J. O'Kane
4038 Northeast Cleveland Street
Portland, Oregon

Dear Mrs. O'Kane:

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

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

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

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

Sincerely,

Thomas B. Larkin
THOMAS B. LARKIN
Major General
The Quartermaster General

Incls.

L.O.L. SENT 22 MAR 1948

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

PENALTY FOR PRIVATE USE TO AVOID
PAYMENT OF POSTAGE, \$300.
(PMGC)



REASON CHECKED
Unclassified
Unknown
By better address
Moved, Left no address
No such office in area

Handwritten: Nicholson am
terey Park
Calif

Handwritten: Good
no food H

POSTMASTER: IF ADDRESSEE HAS REMOVED AND
NEW ADDRESS IS KNOWN, NOTIFY SENDER ON FORM
3547, POSTAGE FOR WHICH IS GUARANTEED.





Cpl Val K. O'Kane, 19 048 015
 Plot PPF, Row 9, Grave 205,
 United States Military Cemetery
 Margraten, Holland

5 December 1947

Mrs. Margaret J. O'Kane
 4038 Northeast Cleveland Street
 Portland, Oregon

Dear Mrs. O'Kane:

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

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

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

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

Sincerely,

THOMAS B. LARKIN
 Major General
 The Quartermaster General

4 Incls.
 M.K.

SWF

19 November 1946

Mrs. Margaret J. O'Kane
4038 Northeast Cleveland Street
Portland, Oregon

Dear Mrs. O'Kane:

The War Department is most desirous that you be furnished information regarding the burial location of your husband, the late Corporal Val E. O'Kane, A.S.N. 19 048 015. *243*

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Margraten, Holland, plot PPP, row 9, grave 205. 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,

T. B. LARKIN
Major General
The Quartermaster General

NOV 21 11 56 AM '46
MAIL & RECORDS BRANCH

98

GRAVES REGISTRATION
Form No. 1
(Revised 1 Sept. 1945)

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

29 August 1945

Date

O'Kane Val K. Cpl 19048015
 48th Inf. 7th Arm Div.
 Schmallenberg, Ger. Est. 3 Apr 1945 SFW head
 1032 3 SEP 1945 Margraten VK 645482
 205 9 PFC Cross
 Grave Number Row Number Plot Number Type of Marker

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

If No Identification Tags

How were remains identified?

EM Ident Card

What means of identification were buried with the body?

Pit E Row 9 Grave 165

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

Who is buried on:

Deceased's Right:

Tomich	42045654	Unk	Unk	204
Name	Serial No.	Rank	Organization	Grave No.

Deceased's Left:

Titus	39459576	Pfc	Unk	206
Name	Serial No.	Rank	Organization	Grave No.

Signature of (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:

WAL E O'KANE

19048015 48 - 44-8

MARGARET J O'KANE

4038 N E CLEVELAND

PORTLAND OREGON 9.

Emergency Addressee -Margaret J. O'Kane

Name

4038 N. E. Cleveland, Portland, Oregon

Address

Religion P

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

22 JAN 1946

Disintering Officer: RICHARD A. CROSS, Capt., QMC, 603rd QM Gr Reg Co.

Reintering Officer: CLEON E. WELLS, 1st Lt., QMC, 603rd QM Gr Reg Co.

REPORT OF BURIAL

IF DECEASED UNIDENTIFIED

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

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

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

Location of Identification Tag: Buried with body ☒ No ☐ Attached to Marker ☐ No ☐

How were remains identified? ☒ No Identification Tag ☐

What means of identification were used? ☒ No Ident Card ☐

Note below any identifying clues found, such as letters, photographs, etc.: _____

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

Deceased's Left	Deceased's Right	Left Hand	Right Hand
Thumb	Thumb	1	1
Index	Index	2	2
Middle	Middle	3	3
Ring	Ring	4	4
Pinky	Pinky	5	5

TOOTH CHART

If this is an Isolated Burial, make a Sketch of the Location, oriented with Permanent Landmarks. If more space needed attach separate sheet. Indicate North.

Sketch of Location: _____

Interment Officer: RICHARD A. GROSS, Capt. AG P BR NO 500 122560
 Reinterment Officer: CLEON E. WARD, 1st Lt. AG P BR NO 500 122560

Characteristics: _____
 Other Data: _____

Indicate: missing natural teeth by X; crowns by O; fillings by □; Linking anchor teeth; Replacements by artificial teeth X

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

GRAVE REGISTRATION
FORM NO. 1
(Revised 1 Sept. 1963)

RESTRICTED

REPORT OF BURIAL

TM 10-630 AND AR 30-1315

12 Apr. 45.

293 38

O'KANE VAL K.

48th Inf. Regt.

Schmallenberg, Germany

1000-hrs, 12 Apr. 45.

165

Grave Number 165

Row Number 9

Plot Number 1

Organization 7th A.D.

Serial No. 19046015

STW Head.

F 678-310

Perm.

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

If No Identification Tags
How were remains identified? EM Ident. Card.

What means of identification were buried with the body?

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

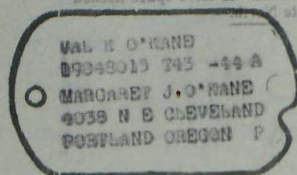
Who is buried on:

Deceased's Right: Titus, Richard M. 39459573 166

Deceased's Left: Tomich, Branko 42045654 164

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

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



Emergency Address

Name

Address

Religion

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

Signature of Officer or other person reporting burial

N. J. SLOANE

1st Lt. OMC

O-1501451

G. R. O.

Verified by O. J. S. Officer

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.:

TOOTH CHART

If this is an Isolated Burial, make a Sketch of the Location, oriented with Permanent Landmarks. If more space needed attach separate sheet. Indicate North.

Deceased's Left															
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 C linking anchor teeth; replacements by artificial teeth X

Characteristics:

Other Data:

AG-P BR 70 50

122560

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

REPORT OF DEATH

DATE 24 April 1945

FULL NAME <u>O'Kane</u> <u>Val K.</u>		ARMY SERIAL NUMBER <u>19 048 015</u>		GRADE <u>Cpl</u>	
HOME ADDRESS <u>Portland, Oregon</u>		ARM OR SERVICE <u>Infantry</u>		DATE OF BIRTH <u>5 Aug 21</u>	
PLACE OF DEATH <u>European Area</u>		CAUSE OF DEATH <u>Killed in action</u>		DATE OF DEATH <u>7 Apr 45</u>	
STATION OF DECEASED <u>European Area</u>		DATE OF ENTRY ON CURRENT ACTIVE SERVICE <u>26 Jun 42</u>		LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS	
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) <u>Mrs. Margaret J. O'Kane, Wife, 4038 N E, Cleveland St., Portland, Oregon</u>					
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) <u>Margaret J. O'Kane, Wife, Same as above</u> <u>Robert C. O'Kane, Brother, Box 95, Garberville, California</u> <u>Elmer E. O'Kane, Father, 203 S. E., Nicholson, Monterey Park, California</u>					
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	
YES	NO	YES	NO	YES	NO
OTHER PAY STATUS (SPECIFY BELOW)		YES NO			
		<u>X</u>			

ADDITIONAL DATA AND/OR STATEMENT

Evidence of death rec'd in WD 22 Apr 45

☒ BATTLE ☐ NON-BATTLE

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

BY ORDER OF THE SECRETARY OF WAR:

30 APR 1945

[Signature]
ADJUTANT GENERAL

WD AGO FORM 52-1
1 DECEMBER 1944THIS FORM SUPERSEDES WD AGO FORM 52-1, 29 MAY 1944, WHICH
STOCKS ARE EXHAUSTED.

WAR DEPARTMENT

THE ADJUTANT GENERAL'S OFFICE

WASHINGTON 25, D. C.

486433

REPORT OF DEATH

DATE 24 April 1945

FULL NAME O'Kane McKane, Val K.		ARMY SERIAL NUMBER 19 048 015		GRADE Cpl	
HOME ADDRESS Portland, Oregon		ARM OR SERVICE Infantry		DATE OF BIRTH 5 Aug 21	
PLACE OF DEATH European Area		CAUSE OF DEATH Killed in action		DATE OF DEATH 7 Apr 45	
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 26 Jun 42		LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS	
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Margaret J. O'Kane, Wife, 4038 N E, Cleveland St., Portland, Oregon					
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Margaret J. O'Kane, Wife, Same as above Robert C. O'Kane, Brother, Box 95, Garberville, California Elmer E. O'Kane, Father, 203 S. E., Nicholson, Monterey Park, 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	
YES	NO	YES	NO	YES	NO
				X	
OTHER PAY STATUS (SPECIFY BELOW)					
YES NO					

ADDITIONAL DATA AND/OR STATEMENT

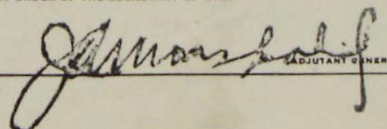
Evidence of death rec'd in WD 22 Apr 45

☒ BATTLE ☐ NON-BATTLE

RB

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

BY ORDER OF THE SECRETARY OF WAR:



 ADJUTANT GENERAL
WD AGO FORM 52-1
1 DECEMBER 1944THIS FORM SUPERSEDES WD AGO FORM 52-1, 29 MAY 1944, WHICH
STOCKS ARE EXHAUSTED.

486433

RTB:AC:sm
August 17, 1945

Mrs. Margaret J. O'Kane
4038 N E Cleveland Street
Portland, Oregon

Dear Mrs. O'Kane:

The Army Effects Bureau has received some additional property of your husband, Corporal Val K. O'Kane.

These effects, contained in one package, 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,

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

22

ARMY SERVICE FORCES
ARMY EFFECTS BUREAUORDER FOR SHIPMENT

SHIP TO:

Mrs. Margaret J. O'Kane

4038 N E Cleveland Street

Portland, Oregon

Effects of:

Name Cpl. Val K. O'Kane

ASN 19048015

Case No. 486433 D

Wt.

DATE 17 August 1945

RTB:AC:sm

FOR: Effects Quartermaster

REMARKS:

Inclose Bureau Check

Acct. No. _____

Amount _____

Inclose "Valuables" item _____

Ship "Valuables" item(s) _____

Remove G.I. _____

Note discrepancy in _____

Films removed _____

Diary removed _____

Laundry removed _____

ROUTING:

Accounting Branch _____

Warehouse Division _____

2 Files Branch, Adm. Div. _____

REMARKS:

SHIP DAMAGED PROPERTY ✓

Franked _____

Est. Exp. Chgs. _____

Est. Frt. _____

No. of packages _____

38 AUG 1945

Shipping Clerk

PACKAGE DESCRIPTION		ARMY EFFECTS BUREAU INVENTORY		DECEASED	
#1 ppg		486, 433		<input checked="" type="checkbox"/>	
				<input type="checkbox"/>	
NAME <u>Val H. O'Kane</u>		RANK <u>pl</u>		MISSING	
				<input type="checkbox"/>	
A.S.N. <u>19048015</u>				P.O.W.	
				<input type="checkbox"/>	
				ABANDONED	
				<input type="checkbox"/>	
				TALLY NO. <u>9900</u>	
				<input checked="" type="checkbox"/>	
				INV. DATE <u>30 July 44</u>	
				<input checked="" type="checkbox"/>	
				ORIG. NO. OF PGS. <u>1</u>	
				<input type="checkbox"/>	
				BOX NO. <u>91</u>	
				<input type="checkbox"/>	
				SHEET <u>1</u>	
				<input checked="" type="checkbox"/>	
				OF <u>1</u> SHEETS	
				<input type="checkbox"/>	
				ORGANIZATION <u>7840 Inf</u>	
				<input type="checkbox"/>	
				<u>7th Arm Div</u>	
				<input type="checkbox"/>	
Belt		TOILETS & HANDEICAPS		WINGS	
BELT, MONEY (NO MONEY)		CLOTHING		BAGS, CLOTH OR LEATH	
Cloth, wash		BRACELET IDENT.		BILLFOLD, (NO MONEY)	
Coats		Brushes		Case	
Footwear, Pr.		CAMERAS		Footlocker	
Gloves, Pr.		Glasses		KIT, SAW, TLT, OR WRITING	
Handkerchiefs		Knives		BOOKS	
Headwear		Lighters		Books, Address	
Jackets		<input checked="" type="checkbox"/> MISC. <input checked="" type="checkbox"/>		Books, Pilot Log	
Overcoats		Pen, Fountain		DIARY (REMOVED FOR DGR)	
Scarfs		Pencil, Mechanical		FILMS	
Shirts		Pipes		Letters	
Socks, Pr.		RELIGIOUS ARTICLES		Papers, Personal	
Ties		<input checked="" type="checkbox"/> RESPONSE, PROPORTION		Photos	
Towels		Rings		Shoe Shine Articles	
Trousers, Pr.		Tobacco		SHORT ENCRYPTER	
Trunks, Pr.		Toilet articles		SOLVENTS	
Underwear		WATCH		<input checked="" type="checkbox"/> SHORTER MONEY	
				Stationery	
				TESTAMENTS	
				U.S. MONEY (AMOUNT)	
REMARKS					
Home address					
Silverton, Oregon.					
ATTACHMENTS					
FORM 254					
FORM 1100					
1 Idem. Card <input checked="" type="checkbox"/>					
1 Inventory <input checked="" type="checkbox"/>					
1 Idem. Label <input checked="" type="checkbox"/>					
Both rings have broken bands. They appear to have been cut.					
C.A.T. None.					
WAREHOUSE SPACE					
1038					
STOCKED BY					
MW					
DATE SHIPPED					
28 AUG 1946					
LOCKED STORAGE					
LAUNDRY REMOVED					
FILM REMOVED					
PACKED BY					
Wenad					
CHECKED BY					
J					
ADDITIONAL					
EFF. OM FORM 11 (24 Feb 45)					

DAMAGED

ADDITIONAL REMARKS

SHORTAGES

U.S. GOVT. CHECK SHORT

NUMBER

DATE

SYMBOL

211-039

AMOUNT

195 Belg

\$10.00 U.S.

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

Marian
INVENTORY CLERK*L. J. Leven*
SUPERVISOR

G.I. REMOVED

NAME O'KANE, VAL E 8015

BAY	PALLET	BOX	TALLY
	15	91	3900
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
GRB			

Est. QM Form 48

Box No. Am 7

RESTRICTED Ittenbach # 1 E 165
INVENTORY FORM 12 Apr 45
DATE

SUBJECT: Inventory of Personal Effects of:

O'Kane Val K. Cpl. 19046015
(LAST NAME) (FIRST NAME) (MI) (RANK) (ASN)

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

The above named individual of 48th Inf., 7th Arm'd Div.
(UNIT) (ORGANIZATION)

was reported buried absent 12 APR 45 1944.
(STATUS (KIA, MIA, Hosp. etc.)) (DATE)

Designated Beneficiary if information readily accessible

unk

INVENTORY OF EFFECTS

receipts ✓
1 picture folder and pictures ✓
1 billfold ✓
1 pipe ✓
2 rings ✓
1 citation ribbon ✓
1 knife with chain ✓
souvenir coins ✓
5 shoulder patches ✓

195 Belg. 0
\$10.00 U. S. 1

E. H. JENISON
Major, F. D.
Sym. 211-038

Money in the amount of above has been turned into
(NAME OF FINANCE OFFICE AND

Form WDFD 38 enclosed.
SYMBOL NUMBER)

Unk

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 truck on 194.
(RAIL, TRUCK, ETC.)

Name Nichols Sloane
Rank & ASN N. J. SLOANE
1st Lt. QMC
O-1591451
Organization G. R. O.

Any additional pertinent information:

Serial No. 19048015 Name O'KANE VAL E.
Grade Rank
Organization 48TH INF 7TH ARMD
Address
Nearest Relative
Address
Killed in Action Died of Disease
Date 12 APR 45 EST Hospital
Battle Area GERMANY Information
Place of Burial ITTEN BACH No 1
Point of Coordination
Description of Body
Members Missing
Signed

165-1

ENLISTED MAN'S IDENTIFICATION CARD

European Theater of Operations U.S. Army

This is to identify

Okane, Val K.
 whose description and signature appear hereon, as a member
 of the United States armed forces, serving in the European
 Theater of Operations.

Grade: 901 19018015 Race: W

Home address: Silverton, Oregon

Birthplace: Silverton, Oregon

Birthdate: (Da.) (Mo.) (Yr.) Height 6 1 ft. Ins.

Weight: 156 lbs. (11 stones 2 lbs.)

Color hair: brown Color eyes: blue Complexion: ruddy

Scars or distinguishing marks

Val K. Okane
 (Signature of soldier)

Issued **MAR 26 1944** by **[REDACTED]**
(Da.) (Yr.) (Signature of Issuing Officer)

[REDACTED]
(Name) (Branch)

Loss of this card will be reported immediately to the C.O. of the individual named hereon.

The finder of a lost card will please return it to Headquarters, SOS, ETOUSA, APO 871, U.S. Army.

This card is void if altered in any manner, unless such alterations are initialed by the responsible officer.

Identification Card No. **E 066935**

ARMY SERVICE FORCES
ARMY EFFECTS BUREAUORDER FOR SHIPMENT

SHIP TO:

Mrs. Margaret J. O'Kane
4038 N E Cleveland Street
Portland, OregonEffects of:
Name Cpl. Val K. O'Kane
ASN 19048015
Case No. 486433 D
Wt.DATE 13 August 1945
RTB: AC: sm*P. Johnson*
FOR: Effects Quartermaster

REMARKS:

☒ Inclose Bureau Check
Acct. No. 132675
Amount \$14.45 *enc*
☐ Inclose "Valuables" item
☐ Ship "Valuables" item(s)☐ Remove G.I.
☐ Note discrepancy in
☐ Films removed
☐ Diary removed
☐ Laundry removed

118701 bt

ROUTING:

☒ 1 Accounting Branch *bal*
☒ 2 Warehouse Division
☐ 3 Files Branch, Adm. Div.

132675

486433

August 17 45

Margaret J. O'Kane

14.45

Fourteen and 45/100

REMARKS:

Franked **FRANKED**
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____
No. of packages 1 AUG 25 1945*BT*
Shipping Clerk

PACKAGE DESCRIPTION		ARMY EFFECTS BUREAU INVENTORY		DECEASED	
<p>#1 <i>ply</i></p> <p>NAME <u>VAL. K. D'KANE</u></p> <p>A.S.P. <u>19048015</u> RANK <u>Cpl.</u></p>		<p>486,433</p> <p><i>Lot</i></p>		MISSING	
				P.O.W.	
				ABANDONED	
				TALLY NO. <u>9900</u>	
				INV. DATE <u>30 July 45</u>	
		Q.T.B. NO. OF PGS. <u>1</u>		BOX NO. <u>96</u>	
		SHEET <u>7</u> OF <u>7</u> SHEETS		ORGANIZATION <u>48 A.I.B.</u>	
				<u>C.A.</u>	
<p>Helm</p> <p>SHIRT, MOUNT (NO MOUNT)</p> <p>Cloth, Wash</p> <p>Boots</p> <p>Footwear, Pr.</p> <p>Gloves, Pr.</p> <p>Handkerchiefs</p> <p>Headwear</p> <p>Jackets</p> <p>Overcoats</p> <p>Scarfs</p> <p>Shirts</p> <p>Socks, Pr.</p> <p>Ties</p> <p>Towels</p> <p>Trousers, Pr.</p> <p>Trunks, Pr.</p> <p>Underwear</p>		<p>SCURRY & FANGLINGS</p> <p>GLOVES</p> <p>GLASSES, DENT.</p> <p>Brushes</p> <p>Cameras</p> <p>Glasses</p> <p>Knives</p> <p>Lighters</p> <p>Pen, Fountain</p> <p>Pencil, Mechanical</p> <p>Pipes</p> <p>SPRINKLES ARTICLES</p> <p>STAPLER, PROBABLY</p> <p>Wings</p> <p>Tool box</p> <p>Toilet articles</p> <p>WATER</p>		<p>WINGS</p> <p>SACKS, CLOTH OR TRAP</p> <p>BILLBOARD, (NO MOUNT)</p> <p>Cash</p> <p>Footlocker</p> <p>ITE, SEN, IUP, OR NEILING</p> <p>BOOKS</p> <p>Books, Address</p> <p>Books, Pilot Log</p> <p>DIARY (REMOVED FOR DUE)</p> <p>FILES</p> <p>Letters</p> <p>Papers, Personal</p> <p>Photos</p> <p>Shoe shine articles</p> <p>SOCKS, ENGINEER</p> <p>SOCKS, MOUNT</p> <p>STATIONERY</p> <p>STATIONERS</p> <p>U.S. MONEY (AMOUNT)</p>	
REMARKS: <i>No information</i>		ATTACHMENTS		FROM 254	
<i>Rechecked.</i>				FROM 2100	
				<i>Inventory</i>	
				<i>1 grave label</i>	
C.A.T. <i>None</i>		STOCKED BY <i>BT</i>		DATE SHIPPED	
WAREHOUSE SPACE <i>1507</i>		INVENTORIED BY <i>Davidson</i>		AUG 25 1945	
PACKED BY <i>W. H. H. H.</i>		CHECKED BY <i>J.</i>		FILM REMOVED	
EFF. ON FORM 31 (24 Feb 45)					

ADDITIONAL REMARKS

SHORTAGES

U.S. GOVT. CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

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

INVENTORY CLERK

SUPERVISOR

G.I. REMOVED

NAME O'KANE, VAL K 8015

BAY	PALLET	BOX	TALLY
	16	96	9900
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
GRB			

Ent. QM Form 48

RESTRICTED
INVENTORY FORM16 April 1945
Date

SUBJECT: Inventory of Personal Effects of:

O'Kane Val K Corporal 19 048 015
 (Last Name) (First Name) (MI) (Rank) (ASN)

TO: Effects Quartermaster, Communication Zone, APO 5/3 US Army

The above named individual of Co "A" 48th Arm'd Inf Bn
 (Unit) (Organization)
 was reported killed in action about 7 April 1945 19
 Status (KIA, MIA, Resp. etc.)

Designated Beneficiary if information readily accessible unknown

INVENTORY OF EFFECTS

Snapshots ☒Personal papers ☒

Money in the amount of none has been turned into _____
 (Name of Finance Office)

Form WED 30 enclosed.
 and symbol number)

Unknown
 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 Truck (S-4) on 16 April 1945
 (Rail, Truck, etc.)

Name Walter P. Randall
 Rank & ASN Capt. Inf. 392189
 Organization Co "A" 48th A.I.B.

Any additional pertinent information:

ARMY EFFECTIVE BUREAU
INVENTORY

JUL 13 1945

486,433 DEC

CASE NO.

TYPED BY

bt

DATE

7/9/45

STATUS

DEC

NAME

Vel K. O'Kane

A.S.N.

19048015

RANK

Cpl

ORGANIZATION

AMOUNT

14.45

ACCOUNT NO.

LIST NO.

DEC

REMARKS

PAID Check No. 118,801.74

132675 dy.

ACCOUNTING INVENTORY

File
down

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

In Reply Refer To: _____

Subject:

Personal property which was lost or abandoned by the above named during a change of station, and which was recently received at this Bureau, is being forwarded to you for safekeeping pending the return of the owner.

When delivery has been made, please acknowledge receipt by signing one copy of this letter in the space provided below, returning that copy to this Bureau. For your convenience, there is inclosed an addressed envelope which requires no postage.

Please be assured that this letter is in no way a casualty message. Its sole purpose is to place the property in your custody for safekeeping.

Your cooperation in signing this letter and returning it promptly will be appreciated.

Incl--
Envelope

I agree to safely keep and store the above-mentioned personal property and to deliver it to the owner or to the Army Effects Bureau, Kansas City, Missouri, upon request.

(Signature of Bailee)

(Date)

Serial No. 19048015 Name Val. K. O'Kane
Grade C.P.I. Rank C.P.I.
Organization Co. 4, 4874 A.F.B., 7th A.P.
Address
Nearest Relative
Address
Killed in Action KIA Died of Disease
Date 7 April 1945 Hospital
Battle Area Information
Place of Burial
Point of Coordination
Description of Body
Members Missing

Signed

Sam B. Hyle
Capt. G.D.C.

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

JRM:AG:eh

Case No. 488433

Date 18 August 1945

SUBJECT: Report of transaction in disposing of the effects of

Val E. O'Kane, 19348015 late a
(Name of deceased) (Army Serial Number)
Corporal (Grade) Infantry who died
(Organization, Army or Service)
on the 7 day of April, 1945, 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. None.)

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

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

FINDING

Before a Summary Court-Martial which convened at Kansas City, Missouri, on 7 August 1945, pursuant to Special Orders 228, Headquarters KCQM Depot, dated 25 September 1943, the application or affidavit of Mrs. Margaret J. O'Kane 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. Margaret J. O'Kane of (Name of person found entitled)

4338 N E Cleveland Street, Portland State of Oregon, is the Widow of the
(Number, Street or Avenue) (City, Town or Village) (Relationship or Capacity)

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

(Signature of Summary Court Officer)

JOHN A. MURPHY, Colonel, Q.M.C.
(Name, Rank, Organization)
SUMMARY COURT MARTIAL

486433

RTB:AC:sm
August 13, 1945

Mrs. Margaret J. O'Kane
4038 N E Cleveland Street
Portland, Oregon

Dear Mrs. O'Kane:

The Army Effects Bureau has received from overseas some personal effects of your husband, Corporal Val K. O'Kane.

I am inclosing a check for \$14.45, representing funds which belonged to him. The remainder of the property, consisting of snapshots and personal papers, is 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 husband.

Yours very truly,

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

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