

293 WHITE, JOHN G, 37 204 307 PVT. INF. EUROP. AREA(KANS.) 45gf



1		USMC MARGRATEN BLOCK: P ROW: 10 GRAVE: 3 DATE OF BURIAL: 15 03 49 VERIFIED BY <i>Re Lewis</i> GRS OFFICER		107-12		GWA	
SECTION A — NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER 4650 17013		DATE 15 03 49 DAY MONTH YEAR			
NAME WHITE JOHN G		SERIAL NUMBER 37204307		GRADE PVT		ARM 1	
CEMETERY MARGRATEN HOLLAND		PLOT KK		ROW 4		GRAVE 92	
						DISPOSITION OF REMAINS 4601 80 CODE DIST. CTR.	
SECTION B — CONSIGNEE AND NEXT OF KIN				FLAG SENT 5 MAY 1949			
NAME AND ADDRESS OF CONSIGNEE MARGRATEN, HOLLAND				NAME AND ADDRESS OF NEXT OF KIN CLARA J. WHITE (MOTHER) NEW CAMBRIA, KANSAS			
SECTION C — DISINTERMENT AND IDENTIFICATION							
NAME		SERIAL NUMBER		GRADE		DATE OF DEATH	
						DATE DISTINTERRED	
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							
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							
RECORD OF CUSTODIAN TRANSFER FINAL LETTER SENT 7 JUN 1949 5 JUL 1949 REPATRIATION BRANCH MEM. DIV. 899							

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

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

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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

1										DISINTERMENT DIRECTIVE									
SECTION A — NAME AND BURIAL LOCATION OF DECEASED										DIRECTIVE NUMBER					DATE				
NAME										SERIAL NUMBER					RANK				
WHITE JOHN G										37204307					PVT				
CEMETERY										ARM					DATE OF DEATH				
										1					DAY MONTH YEAR				
PLOT										ROW					GRAVE				
KK										4					92				
COUNTRY										MARGRATEN HOLLAND					DISPOSITION OF REMAINS				
															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										SERIAL NUMBER					RANK				
JOHN G WHITE										37204307					PVT				
DATE OF DEATH										DATE DISTINTERRED									
															25 AUGUST 1948				
IDENTIFICATION TAG ON										ORGANIZATION					RELIGION				
☐ REMAINS															UNK				
☒ MARKER GRS															IDENTIFICATION VERIFIED BY				
															ROBERT W GANSEL. 1LT. QMC				
															NAME AND TITLE				
SECTION D — PREPARATION OF REMAINS FOR SHIPMENT																			
NATURE OF BURIAL										CONDITION OF REMAINS									
UNIFORM										ADVANCED STAGE OF DECOMPOSITION. FRACTURED R/FIBULA. REMAINS COMPLETE.									
OTHER MEANS OF IDENTIFICATION																			
THIS IS TO CERTIFY that the above cemetery having now been completely disinterred and no conflicting evidence has been found, the remains of this deceased are considered adequately identified.																			
MINOR DISCREPANCIES										AGRC - EA 01 // 21.									
NONE																			
REMAINS PREPARED AND PLACED IN CASKET										TRANSFER BOX									
21 SEPTEMBER 1948										LEON J CECIL. (EMBALMER)									
DATE										BY									
CASKET SEALED BY										EMBALMER (Signature)									
LEON J CECIL (EMBALMER)										LEON J CECIL									
CASKET BOXED AND MARKED										SHIPPING ADDRESS VERIFIED BY									
JOHN F SIMMONS										ALL MARKINGS, PLATES & TAGS VERIFIED BY:									
IDENT TECH										ROBERT W GANSEL. 1LT. QMC.									
DATE 21 SEPT 48 BY																			
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.																			
										ROBERT W GANSEL. 1LT. QMC.									
										SIGNATURE OF GRS INSPECTOR									
Prepare Discrepancy Report QMC Form 1194a for major discrepancies.																			
I CERTIFY that the typed names appearing above are the same as the original signatures on the No. 4 copy of F-1194 concerned.																			
MC FORM 1194										REV 15 MAR 46									

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

7 June 1949

2/3 Pvt. John G. White, ASN 37 204 307
 Plot P, Row 10, Grave 3
 Headstone: Cross
 Margraten (Holland) U. S. Military Cemetery

Mrs. Clara J. White

New Cambria, Kansas

Dear Mrs. White:

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

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

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

Sincerely yours,

H. FELDMAN
 Major General
 The Quartermaster General

csb

JUN 9 12 24 PM '49

C.O.M.G.

MAIL & RECORDS SECTION

MESSAGEFORM		MESSAGE CENTER No.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT	
CALLS V	STA. SER. No. NR	PRECEDENCE	TRANSMISSION INSTRUCTIONS	ORIGINATOR	DATE-TIME GROUP
ACTION	INFORMATION	EXEMPT	OPERATING SIGNALS	GROUP COUNT GR	
SPACE ABOVE FOR SIGNAL CENTER ONLY					
FROM: (Originator) QMGME DEPT OF ARMY WASH D C SNOWDEN EXT 6535			SECURITY CLASSIFICATION UNCLASSIFIED		
ACTION TO: MRS CLARA J WHITE RURAL FREE DELIVERY ROUTE #1 NEW CAMBRIA KANSAS			PRECEDENCE FOR ACTION INFORMATION		
			PRIORITY		
			☐ ORIGINAL MESSAGE		
			REFERS TO ANOTHER MESSAGE IDENTIFICATION CLASSIFICATION		
INFORMATION TO: CHARGE GRAVES IN II					
FINAL INTERMENTS ARE NOW BEING MADE IN PERMANENT UNITED STATES MILITARY CEMETERIES OVERSEAS. THE REMAINS OF YOUR LATE SON PRIVATE JOHN G WHITE 37 204 307 ARE BEING HELD IN ABOVE GROUND STORAGE PENDING DISPOSITION INSTRUCTIONS FROM YOU. IN ORDER TO COMPLY WITH YOUR WISHES COMMA IT IS URGENT YOU ADVISE THIS OFFICE WITHIN FIFTEEN DAYS BY COLLECT TELEGRAM IF YOU DESIRE PERMANENT OVERSEAS BURIAL OR RETURN OF REMAINS TO UNITED STATES FOR BURIAL IN A NATIONAL OR PRIVATE CEMETERY. IF REMAINS ARE REQUESTED FOR RETURN TO THIS COUNTRY INCLUDE NAME OF NATIONAL CEMETERY OR IF REMAINS ARE RETURNED FOR BURIAL IN A PRIVATE CEMETERY NAME AND ADDRESS OF FUNERAL DIRECTOR OR CONSIGNEE TO WHOM REMAINS ARE TO BE CONSIGNED END SMITH					
			SMITH Memorial Division OQMG		
SECURITY CLASSIFICATION UNCLASSIFIED			AUTHORIZATION		
ORIGINATING AGENCY			SIGNATURE		
SYMBOL QMGME 293		DATE-TIME GROUP 17MAR49	OFFICIAL TITLE J F VOGL		PAGE OF
WHITE, JOHN G. 37204307		Captain, QMG, Memorial Division			
WD AGO FORM 11-168 15 JUN 1945		This form supersedes WD AGO Form 11-168, 23 Aug 44, and WD AGO Form 801, 12 Mar 43, which are obsolete.		16-45801-1 U. S. GOVERNMENT PRINTING OFFICE	

PDJ

FMS

ANALYST ACTION REQUEST FORM

Name	:	Grade	:	Serial Number
White John G.	:	Pvt	:	37 204 307

This case has been thoroughly analyzed and the following action is to be taken:

Teleg A to Mathews
 Mrs. Clara J. White
 Route #1
 New Cambria, Kansas

Margraten
 KK - 4 - 92

DATE	:	SIGNATURE OF ANALYST		
16 Mar 49	:	J. Henderson		
	:	DIVISION	BRANCH	SECTION
	:	Mem	FC	FLC

QMG Form 1905
 3 Mar 1949

To become part 7293 file.

EU 1608Z

EUA098

RR UEPOG

FM UEP 32P/17/16 GOVT COLLECT 3 EXTRA

SALINA KANS MAR 26 1949 1117A

SMITH MEM DIV

QMG 172250Z WASHDC

WE WANT PVT JOHN G WHITE 37204307 BURIED IN PAXXXXXX PERMANENT

CEMETERY OVERSEAS

NOK MRS CLARA J WHITE

NEW CAMBRIA KANSAS

1250P

37204307..



DD FORM
APR 5 1949

acc in lieu of
Smith
1 apr 345

Margaret
KK-4-92

TL

APR 2 1949
4 apr 9
m Baker

7331-49

Cleared LO1 unit
28 Mar. 49 3:45
A. W. Smiley

USE CIVILIAN T. UNIT IN NEW COUNTRY

CIVILIAN T. UNIT

AN UNIT MAY FORM C. UNIT IN NEW COUNTRY

NEW COUNTRY UNIT

UNIT MAY FORM

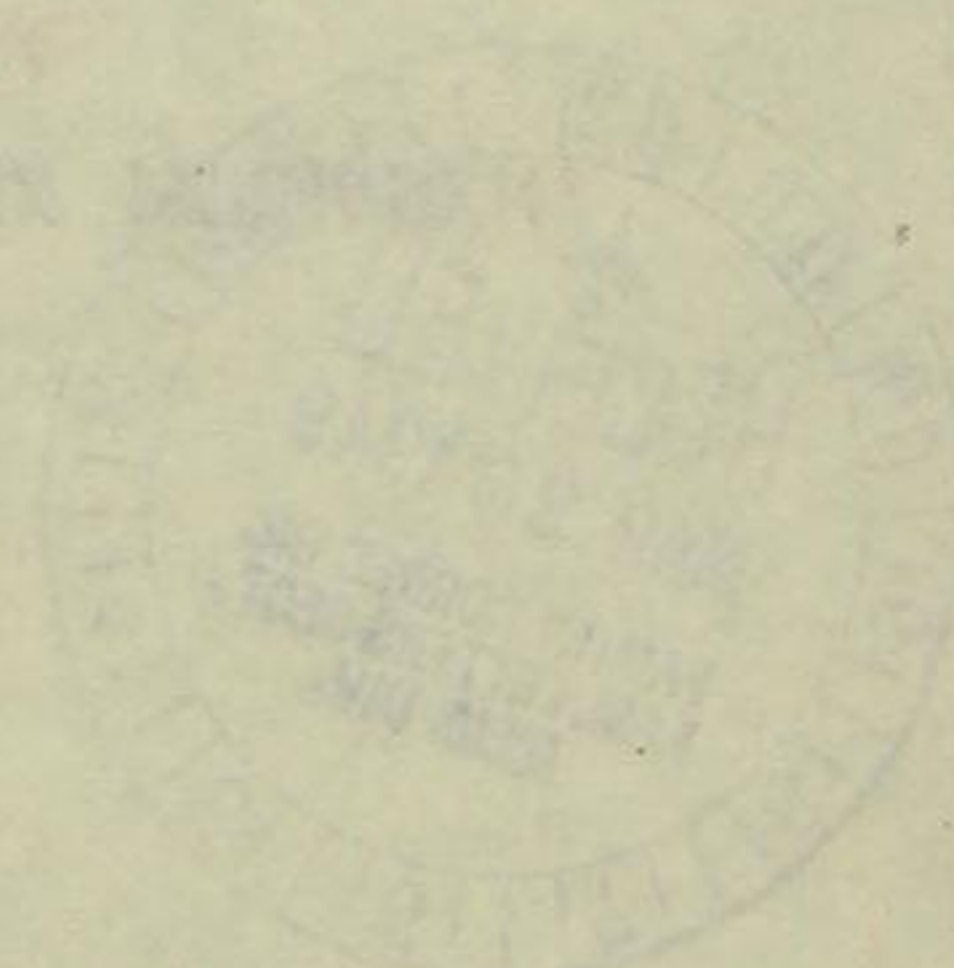
UNIT MAY FORM NEW C. UNIT

AN UNIT MAY FORM C. UNIT IN NEW COUNTRY

UNIT MAY FORM

UNIT MAY FORM

UNIT MAY FORM



Handwritten initials or signature in red ink, possibly "W. J. V."

Handwritten signature or initials in red ink, possibly "P. J. M."

Handwritten date or initials in red ink, possibly "4/4/49"

RECORDS BRANCH
JAN 19 9 00 AM '68
MEMORIAL DIVISION

REQUEST FOR DISPOSITION OF REMAINS

BUDGET BUREAU No. 49-R277.1.

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

DATE:

Pvt John G. White, 37 204 307 (ARC)
 Plot KK, Row 4, Grave 92,
 United States Military Cemetery
 Margraten, Holland

AUG 5 1948

DO NOT WRITE ABOVE THIS LINE

A		C	
B		D	

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

If you are the next of kin or authorized representative of next of kin and desire to direct the disposition of the remains, please fill in PART I of this form.

PART I

I, _____

(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

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

- ☐ WIDOW ☐ WIDOWER ☐ SON OVER 21 YEARS OLD ☐ DAUGHTER OVER 21 YEARS OLD
- ☐ FATHER ☐ MOTHER ☐ BROTHER OVER 21 YEARS OLD ☐ SISTER OVER 21 YEARS OLD

☐ RELATIONSHIP OTHER THAN ABOVE (Specify) _____

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

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

(NAME AND LOCATION OF CEMETERY)

- ☐ 3. BE RETURNED TO _____, THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A

(FOREIGN COUNTRY)

PRIVATE CEMETERY LOCATED AT _____

(LOCATION OF CEMETERY SELECTED)

- ☐ 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT _____

(LOCATION OF NATIONAL CEMETERY SELECTED)

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

☐ YES ☐ NO

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

Blank 345

Smith
 N.A.T.
 17-25-ay
 Section
 Family Corres. Branch

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.

_____ (SIGNATURE OF NEXT OF KIN)	_____ (STREET AND NUMBER)
_____ (NAME PRINTED OR TYPED)	_____ (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this _____ day of _____, 19____, at city (or town) of _____, county of _____, and State (or Territory or District) of _____.

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

(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

(OFFICIAL TITLE)

PART I

you are the next of kin and you desire to receive the remains.

I, THE _____

NAMED IN PART I OF THIS FORM, DO HEREBY DECLARE THAT I AM THE NEXT EXISTING PERSON IN THE ORDER OF KINSHIP.

LAST NAME

RELATIONSHIP TO THE DECEASED

NUMBER AND STREET

WHOM I UNDERSTAND SHALL HAVE THE RIGHT TO RECEIVE THE REMAINS.

(SIGNATURE OF NEXT OF KIN)

(NAME PRINTED OR TYPED)

If you are NOT the next of kin authorized to receive the remains, you must sign this statement.

THIS IS TO NOTIFY YOU THAT I AM NOT THE NEXT OF KIN NAMED ON PAGE 1 OF THIS FORM. THE REMAINS SHOULD BE DIRECTED TO THE NEXT EXISTING PERSON IN THE ORDER OF KINSHIP.

LAST NAME

RELATIONSHIP TO THE DECEASED

NUMBER AND STREET

(SIGNATURE)

(NAME PRINTED OR TYPED)

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.

October 12, 1948

WHITE, John G.,
37 204 307
World War II Deceased

Gentlemen:

We regret our chapter was unable to obtain completion of Form 345 in the above case.

For your information we quote from the Chapter's letter:

" We are returning the papers on the above named deceased serviceman, since we have been unable to secure cooperation of the family in filling out the papers.

We have contacted the family numerous times to a point where they are irritated with us bothering them, therefore we feel that we should not continue.

They did make a statement that they had the papers which were originally sent to them and if they decided to do anything about it they would send them in directly to the War Department.

We are sorry that we were unable to complete these papers. Sincerely yours,

Enc-345.

(Miss) Janet Neel
Director, Home Service
Midwestern Area

LOI 4 Dec 47 - no reply
KK - 4 - 92
M-1-acc-2 Apr 49

JOHN G. WHITE
Colonel, GSC
Comptroller Division

17-22-1949
NAT
M-1-acc
2 Apr

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

In Reply Refer To RR Br: **QMCMR 293** White, John G. Pvt., 37 204 307
Plot KK, Row 4, Grave 92
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

AUG 5 1948

Miss Janet Neel, Home Service Director
Midwestern Area, American Red Cross
1709 Washington Avenue
Saint Louis 3, Missouri

Dear Miss Neel:

The Next of Kin of the above captioned deceased mother
(relationship)

Mrs. Clara J. White, Route #1, New Cambria, Kansas
(name) (address)

has failed to return a Form 345 indicating disposition instructions for the
remains. The form was dispatched 5 December 1947.

It is respectfully requested that the attached QMCM 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

JOHN O. HYATT
Colonel, QMC
Memorial Division

Incls.



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

In Reply Refer To RR Br: QMGR 293 White, John G. Pvt., 37 204 307
Plot KK, Row 4, Grave 92
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.

PRIORITY

AUG 5 1948

Miss Janet Neel, Home Service Director
Midwestern Area, American Red Cross
1709 Washington Avenue
Saint Louis 3, Missouri

Dear Miss Neel:

The Next of Kin of the above captioned deceased mother
(relationship)

Mrs. Clara J. White, Route #1, New Cambria, Kansas
(name) (address)

has failed to return a Form 345 indicating disposition instructions for the
remains. The form was dispatched 5 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, QMG
Memorial Division

Incls. *ST*

fbs

207
12-5

Pvt John G. White, 37 204 307
 Plot KK, Row 4, Grave 92,
 United States Military Cemetery
 Margraten, Holland

5 December 1947

Mrs. Clara J. White
 Route #1
 New Cambria, Kansas

Dear Mrs. White:

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

Incls.

how

arc sent 5 Aug 48-MB

SPQYG 293
White, John G.

293 White, John G. (37, 204, 307)

27 May 1946

Mrs. Clara J. White
Route #1
New Cambria, Kansas

Dear Mrs. White:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Private John G. White, A.S.N. 37 204 307.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery, Margraten, Holland, plot KK, row 4, grave 92.

This cemetery is located approximately twelve miles northwest of Aachen, Germany and eight miles southeast of Maastricht, Holland, and is under the constant care and supervision of United States military personnel.

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

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

bn

LMS

are sent 5 Aug. 48 - H23

SPQYG 293
White, John G.
S.N. 37 204 307

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

17 April 1946

Miss Frances Schneider
Lincoln, Kans

Dear Miss Schneider:

This office promised that upon receipt of burial information concerning your fiance you would be advised.

The official report of burial shows that the remains of your fiance were originally interred in the locality in which he met his death, but were later disinterred and moved to a more suitable site where constant care of the grave can be assured by our Forces in the field.

The report of burial further discloses that the remains of your fiance are now interred in Plot KK, Row 4, Grave 92, in the United States Military Cemetery, Margraten, Holland, located approximately twelve miles northwest of Aachen, Germany and eight miles southeast of Maastricht, Holland.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

LOUIS M. STAGGS
2d Lt., QMC
Assistant

GREEN

APR 17 11 13 AM '46
MAIL & RECORDS BRANCH
QMC

APR 17 10 57 AM '46
MAIL & RECORDS BRANCH
MEMORIAL DIVISION

LMB

CONTROL SUBSECTION
PATRIOTIC & RECORD BRANCH

Information From A-Z File

BURIAL

REBURIAL ☒Name of Deceased White, John GRank Priv.Serial No. 37204387Cause of Death KIAOrganization Co B. 48th. Arm. Inf.Date of Burial 11 July 1945

Emergency Addressee:

Name White, Clara JRelationship MotherAddress Route 1New Cambria, KansasCemetery US Mil. Cem. Margraten, HollandPlot KKRow 4Grave 92

Miss Ellis

Information Furnished by

Approved by Sub-Section Chief

SPQYG 293
White, John G.
S.N. 37 204 307

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

28 January 1946

Miss Frances Schneider
Lincoln, Kansas

Dear Miss Schneider:

Your letter to the Adjutant General concerning your fiancé, the late Private John G. White, has been referred to this office.

The United States Military Cemetery #1, Breuna, Germany is located near the town Warburg, fifteen miles northwest of Kassel and seventy miles south and slightly west of Hannover, all in Germany. However, all remains in this cemetery have been removed to larger well established military cemeteries not on German soil. When a report of the reburial of your fiancé is received you will be advised and given full information in regard to the exact location by cemetery, plot, and grave number.

Please accept my sincere sympathy in the loss of your fiancé.

FOR THE ACTING THE QUARTERMASTER GENERAL:

Sincerely yours,

JAMES L. PRENN
Major, QMC
Assistant

JRB

WER

DSL

JLP

at
JAN 29 11 07 AM '46
QMC
MAN & RECORDS BRANCH
GRAVES REGISTRATION SECTION
JAN 29 6 50 PM '46

sent 25 Apr

C2-7R

Lincoln, Kansas
January 11, 1946War Department
Washington, D.C.

Dear Sirs:

My fiancé was killed in action April 8, 1945, at Oberkirchen, Germany. I would like to know where the cemetery is where his body is buried. The information from the war department did not state where he was buried, but a letter from a chaplain stated that he was buried in the U. S. Military Cemetery Breina #1. I have been unable to find out where that cemetery is. My fiancé's name was ^{1st} Lt. John S. White, 37204, 307.

I would appreciate whatever information you can send me.

Yours truly,
(Miss) Frances Schneider
Lincoln, Kansas



GRAVES REGISTRATION SECTION
MEMORIAL DIVISION
JAN 18 1 07 PM '46



RESTRICTED
 CERTIFICATE OF IDENTITY.

April 12, 1945

1. I, the undersigned, do certify that the remains I have personally viewed, and with which this certificate is to be forwarded are those of:

White, John G.

Pvt.

37204307

Co. B. 48th

Armed

Inf. Bn.

2. Description of deceased:

Height: _____

Color of Hair: _____

Weight: _____

Race: _____

Color of eyes: _____

Wear glasses? _____

3. By _____, a personal acquaintance.

4. Remarks: _____, any distinguishing peculiarities, such as scars, tattoo marks, etc.

I have known this man for a period
of (3) three months. A personal acquaintance.

(Signed) _____

(Signed) Pfc. Ernest A. Korman

(Signed) _____

(Rank) Pfc

(Serial No.) _____

(Serial No.) 315 83944

(Organization) _____

(Organization) Co. B. 48th Arm. Inf.

RESTRICTED

293

IDENTIFICATION REPORT

(Date)

(Name)

(Rank)

(ASN)

(Unit)

(Organization)

(Place of Death)

(Date of Death)

(Cause of Death)

REMAINS IDENTIFIED BY:

(Any one item below constitutes positive identification if no contradictory evidence is observed.)

- ___ Identification tags worn around neck.
- ___ Official identification card No.
- ___ Pay book or pay data card.
- ___ Identification bracelet worn around wrist.
- ___ Signed statement of identity (Attached herewith).
- ___ Emergency Medical Tag, in the absence of other evidence; indicating that name, etc., was obtained from deceased, before death.

(Two or more items below constitute positive identification if no contradictory evidence is observed)

- ___ Identification tags carried elsewhere than around neck.
- ___ Motor vehicle operator's permit (Government or Civilian)
- ___ Personnel papers or letters.
- ___ Engraves jewelry.
- ___ Clothing markings, particularly on leggings and belt.
- ___ Miscellaneous (Explain in detail below).

UNIDENTIFIED: (use space below to list all facts and circumstances concerning the death and evacuation of deceased and to list all clues that may later lead to the identity of deceased. Record source of all information listed)

(Sig. of Officer / NCO 1/C Coll. Pt.)

(Platoon)

QM Company (GR)

GRAVES REGISTRATION
FORM NO. 1
(Revised 1 Sept. 1943)RESTRICTED
REPORT OF BURIAL
TM 10-630 AND AR 30-1815

WHITE JOHN G. PVT 37204307
 Co B 48th Arm'd Inf. Bn Unknown
 Vic Oberkirchen, Germany 4 Apr 45 Est SFW chest
 0915 11 JUL 1945 U.S. Mil Cem #1, Margraten, Holland V 645482
 92 4 KK Wooden 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?
 Signed Statement
 Letter

REBURIAL

Previously buried in Breuna #1 Cemetery

What means of identification were buried with the body?

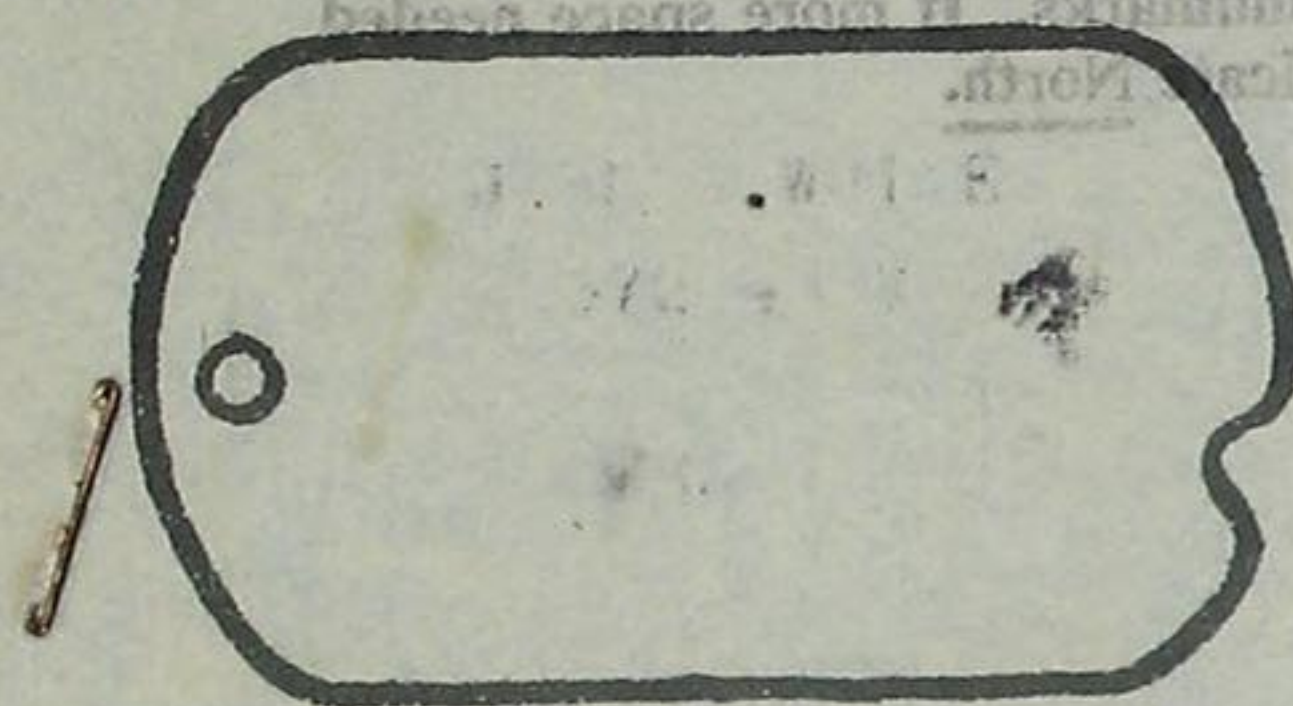
Plot A Row 4 Grave 64

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

Who is buried on:
 Deceased's Right: Moscovitz, Irving 32195839 91
 Name Serial No. Rank Organization Grave No.
 Deceased's Left: Gustin, William J. 33773656 93
 Name Serial No. Rank Organization Grave No.

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

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



Emergency Addressee Name

Address

Religion

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

H. SHACKELFORD
 1st Lt, QMC
 O-1596803
 G. R. O.

Disinterring Officer:
 Reintering Officer:

RESTRICTED

Signature of Officer or other person reporting burial

Verified by G.R.S. Officer

EDWIN H. MILLER

1st Lt QMC O-1591314
 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 Rife:	
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.			
Disposition of Identification Tags: Buried with body Yes ☐ No ☒ Attached to Marker Yes ☐ No ☒			
If No Identification Tags How were remains identified? Signed Statement Letter			
What means of identification were found with the body? Exposed plate			
To determine Right or Left use Deceased's Right and Left			
Who is buried on Deceased's Right: Name Rank Serial No. Organization			
Who is buried on Deceased's Left: Name Rank Serial No. Organization			

TOOTH CHART

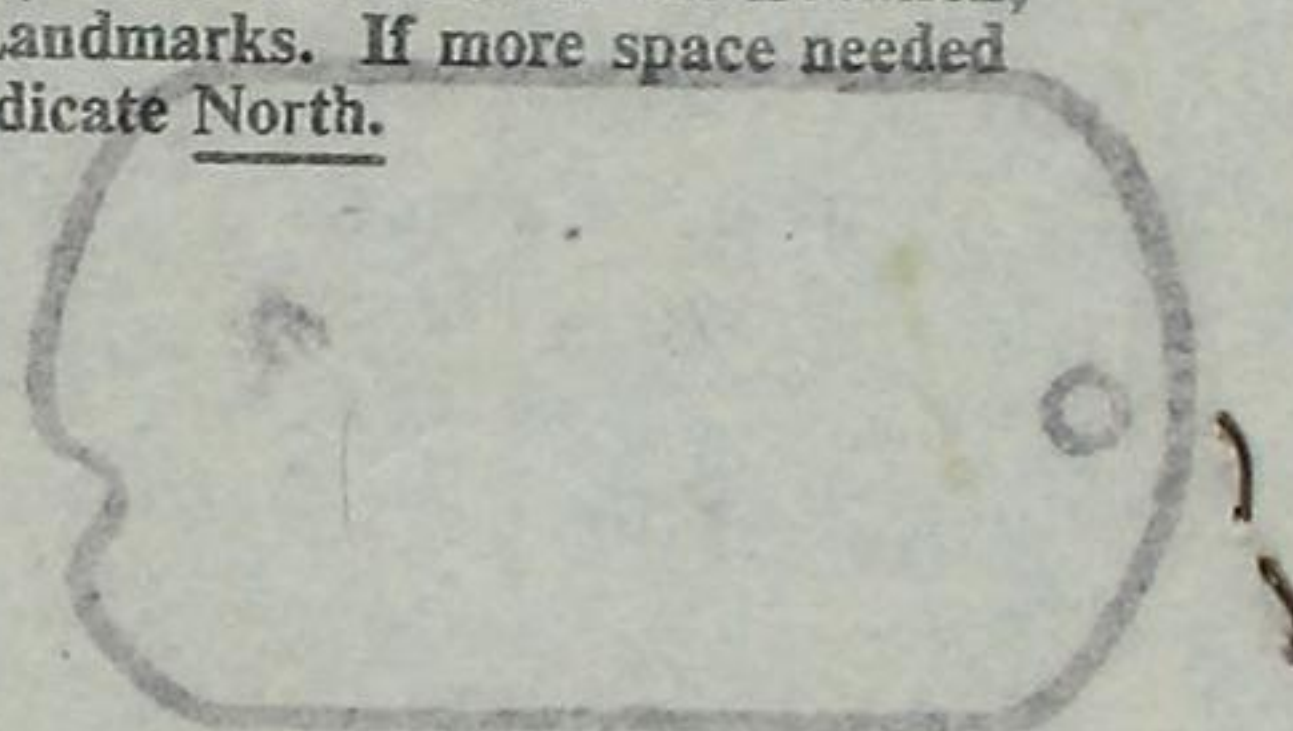
Deceased's Left								Deceased's Right							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8

Indicate: missing natural teeth by X; crowns by O; fillings by ☐; Bridges by ☐; missing anchor teeth; replacements by artificial teeth X

Characteristics:

Other Data:

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



Emergency Address

Address

Religion

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

H. SHACKLEFORD
1st Lt. CMC
O-1588803
G.R.O.

Disinterment Officer:
Reinterment Officer:
AG P BR HQ SOS 722560

4 AOUT 1945

RESTRICTED

GRAVE REGISTRATION
FORM NO. 1
(Revised 1 Sept. 1943)

230

REPORT OF BURIAL

TM 10-630 AND AR 30-1315

14 Apr. 45.

Last Name WHITE		First Name JOHN		Initial C		Rank LTJG		Date 14 Apr. 45.
Unit Co B		Organization 48th Armd. Inf. Bn.		Serial No. 37204307		Cause of Death SFW Chest.		
Place of Death Vic. Oberkirc, Germany		Date of Death 8 Apr. 45		Color of Hair Blk		Cause of Death L 52rc 010143		
Time and Date of Burial 1000-hrs, 14 Apr. 45		Name of Cemetery Breuna # 1		Name or Coordinates of Location Perm.		Type of Marker 64		
Grave Number 64		Row Number 40		Plot Number 40		Type of Marker 64		

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

If No Identification Tags

How were remains identified?

Statement.

Letter

What means of identification were buried with the body?

Embossed Plate.

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

Who is buried on:

Deceased's Right:

Moscowitz, Irving

32195839

65

Name

Serial No.

Rank

Organization

Grave No.

Deceased's Left:

Gustin, William J.

33773656

63

Name

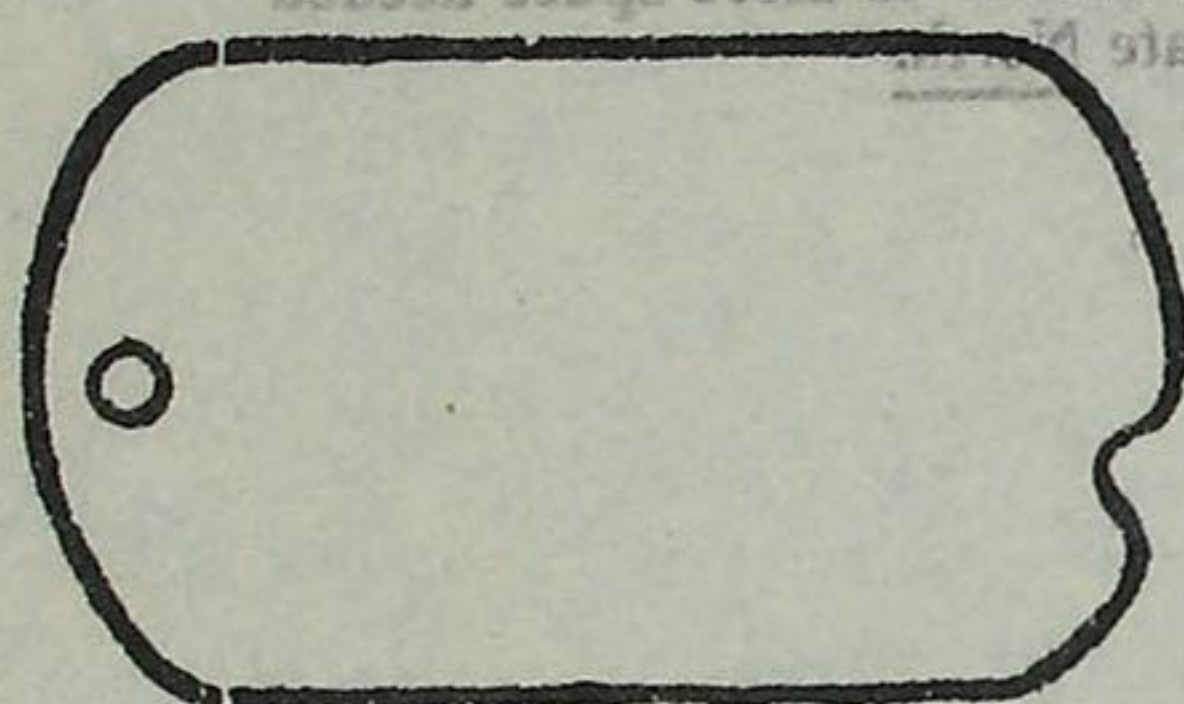
Serial No.

Rank

Organization

Grave No.

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



Emergency Addressee

Name

Address

Religion

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

Signature of Officer or other person reporting burial

SHACKELFORD

1st Lt, GMC

O-1538803

G. R. O.

RESTRICTED

#65

REPORT OF BURIAL IF DECEASED UNIDENTIFIED

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

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

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

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

Left Hand

4	3	2	1	Thumb
---	---	---	---	-------

Right Hand

4	3	2	1	Thumb
---	---	---	---	-------

TOOTH CHART

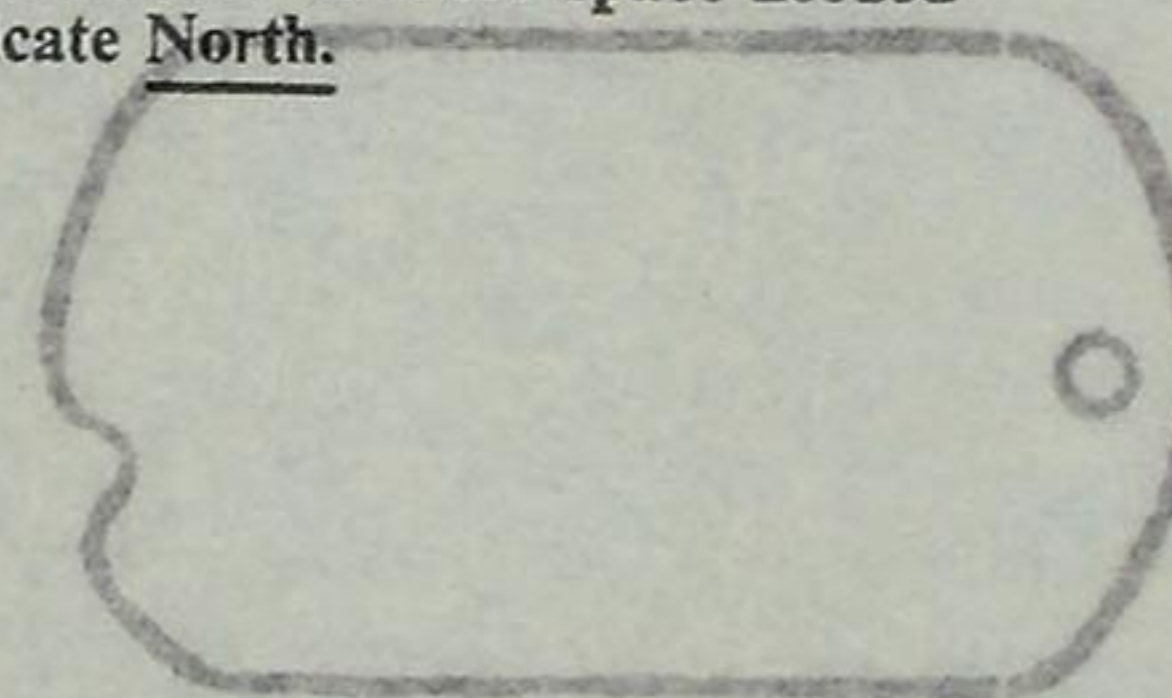
If this is an Isolated Burial, make a Sketch of the Location, oriented with Permanent Landmarks. If more space needed attach separate sheet. Indicate North.

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

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

Characteristics:

Other Data:



AG P BR HQ SOS

122560

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

REPORT OF DEATH

DATE

4 May 45 AD 3831

FULL NAME White, John G.		ARMY SERIAL NUMBER 37 204 307		GRADE Pvt	
HOME ADDRESS New Cambria, Kansas		ARM OR SERVICE Inf		DATE OF BIRTH 20 Nov 16	
PLACE OF DEATH European area		CAUSE OF DEATH Killed in action		DATE OF DEATH 8 Apr 45	
STATION OF DECEASED European area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 3 Jun 42		LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS	
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mr. Joseph H. White, brother, Route 1, Niles, Kansas					
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. * Clara Josephine White, mother, Route 1, New Cambria, Kansas Mr. Joseph H. White, brother, Route 1, Niles, Kansas					
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				

ADDITIONAL DATA AND/OR STATEMENT



BATTLE



NON-BATTLE

Evidence of death received in War Department 27 Apr 45

The individual named in this report of death is held by the War Department to have been in a missing in action status from 8 Apr 45 until such absence was terminated on 27 Apr 45, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a Commander in the European Area.

COPIES FURNISHED:		
S. G. O.	F. B. I.	F. O., U. S. A.
2. O. Q. 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 FEBRUARY 1945THIS FORM SUPERSEDES WD AGO FORM 52-1, 1 DECEMBER 1944,
WHICH MAY BE USED UNTIL EXISTING STOCKS ARE EXHAUSTED.

GA

1)

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

DATE

4 May 45 AD 3831

REPORT OF DEATH

FULL NAME White, John G.		ARMY SERIAL NUMBER 37 204 307	GRADE Pvt
HOME ADDRESS New Cambria, Kansas		ARM OR SERVICE Inf	DATE OF BIRTH 20 Nov 16
PLACE OF DEATH European area	CAUSE OF DEATH Killed in action		DATE OF DEATH 8 Apr 45
STATION OF DECEASED European area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 3 Jun 42	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mr. Joseph H. White, brother, Route 1, Niles, Kansas			
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. * Clara Josephine White, mother, Route 1, New Cambria, Kansas Mr. Joseph H. White, brother, Route 1, Niles, Kansas			
INVESTIGATION MADE? YES NO	IN LINE OF DUTY YES NO	OWN MISCONDUCT YES NO	WAS DECEASED ON DUTY STATUS YES NO
			AUTHORIZED ABSENCE YES NO
			IN FLYING PAY STATUS YES NO X
			OTHER PAY STATUS (SPECIFY BELOW) YES NO

ADDITIONAL DATA AND/OR STATEMENT

☒ BATTLE ☐ NON-BATTLE

Evidence of death received in War Department 27 Apr 45

The individual named in this report of death is held by the War Department to have been in a missing in action status from 8 Apr 45 until such absence was terminated on 27 Apr 45, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a Commander in the European Area.

COPIES FURNISHED:		
S. G. O.	F. B. I.	F. O. U. S. A.
E. O. Q. 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:

R. E. Hubbard
ADJUTANT GENERAL

WD AGO FORM 52-1
1 FEBRUARY 1945THIS FORM SUPERSEDES WD AGO FORM 52-1, 1 DECEMBER 1944,
WHICH MAY BE USED UNTIL EXISTING STOCKS ARE EXHAUSTED.

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

—BATTLE CASUALTY REPORT

521918

AG 201	NAME WHITE JOHN G ASN 37 204 307	GRADE PVT BRO	DATE CAS. REPORT RECEIVED
NAME AND AD. DRESS OF E. A.	JOSEPH H WHITE ROUTE ONE NILES KANSAS		24 APRIL 1945 DATE TELEGRAM SENT

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

GRADE	NAME	SERIAL NUMBER	ARM OR SERVICE	REPORTING THEATRE	F OR J STATUS	SHIPMENT NUMBER
PVT	WHITE JOHN G HAS BEEN	37204307	INF	ETO		110
TYPE OF CASUALTY		PLACE OF CASUALTY	DATE OF CASUALTY		CASUALTY CODE	
MISSING IN ACTION		GERMANY	08 APR 45		9	

~~XXXXXXXXXXXX~~ IF FURTHER ~~DETAILS~~ DETAILS OR OTHER INFORMATION ARE RECEIVED YOU WILL BE PROMPTLY NOTIFIED

REMARKS:

☐ CORRECTED COPY

ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED ☒ FORM 43 ☒ AG 201 REQ. ☒

CASUALTY BRANCH FILE ATTACHED ☒ OR CHARGED TO ☐ DATE ☐

PREVIOUSLY REPORTED NO ☒ YES ☐ (AS INDICATED BELOW):

FILE NO. MESSAGE NO. TYPE DATE AND AREA E. A. NOTIFIED

FORWARDED TO ☐ SPEC. IDEN. ☒ TELEGRAM ☐ WOUNDED ☐ LETTER ☐ CORRE. ☐ S. R. D. ☐ CERTIF. ☐ M. & M. ☐ NON-DEL.

REPORT NOT VERIFIED ☐ NO FORM 43 ☐ NO CAS. BR. FILE ☐ CHECKED BY *Bayler* REVIEWED BY *Chatt*

DISTRIBUTION "A" ☐ COPIES *20 123 apr 45*

(ALL TYPES OF CASUALTIES PERTAINING TO MILITARY PERSONNEL, EXCEPT WOUNDED.)
COPIES FURNISHED: SEE CASUALTY BRANCH MEMORANDUM NO. 48, 1944.

DISTRIBUTION "B" ☐ COPIES

(ALL WOUNDED MILITARY PERSONNEL AND ALL TYPES OF CASUALTIES PERTAINING TO CIVILIANS WHO ARE W. D. EMPLOYEES, EMPLOYEES OF W. D. CONTRACTORS AND OTHERS SUBJECT TO MILITARY LAW.)
COPIES FURNISHED: SEE CASUALTY BRANCH MEMORANDUM NO. 48, 1944.

W.D. A.G.O. Form 0365 1 JANUARY 1945 { This form supersedes W.D. A.G.O. Form 0365, 16 June 1944, and W.D. A.G.O. Forms 602-1, 802-3, 802-4, of 1 February 1944, and 802-5, 802-6, 1 August 1944, which may be used until existing stocks are exhausted.

521918

RTB:FR:cms
September 11, 1945

Dear Mrs. White:

The Army Effects Bureau has received some additional property of your son, Private John G. White, consisting of funds in the amount of \$13.02. A check for this sum is inclosed.

11

The transmittal of funds by this Bureau 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.

70

Sincerely yours,

1 Incl--
CheckC. B. QUINN
2nd Lt., QMC
Chief, Files Branch

ARMY SERVICE FORCES
ARMY EFFECTS BUREAUORDER FOR SHIPMENT

SHIP TO: Clara Josephine White

Effects of:

Name Pvt. John G. White

ASN 37204307

Case No. 521918 D

Wt.

DATE // September 1945

RTB:FR:11

FOR: Effects Quartermaster

REMARKS:

☒ Inclose Bureau Check
 Acct. No. 156023
 Amount \$13.02 YMS
☐ Inclose "Valuables" item
☐ Ship "Valuables" item(s)

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

142511 jf

ROUTING:

156023

521918

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

September 13 45

Clara Josephine White

13.02

Thirteen and 02/100

REMARKS

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

Shipping Clerk

Eff. JM Form 14 (26 Dec 44)

ARMY EFFECTS BUREAU
ACCOUNTING INVENTORY

CASE NO.

TYPED BY

lc

DATE

8-7-45

STATUS

dec.

NAME

John G. White ✓

A.S.N.

37204307 ✓

RANK

pvt.

ORGANIZATION

CONSIGNOR

Q-290

AMOUNT

13.02

ACCOUNT NO.

156043

PAID-CHECK NO.

142517-5

LIST NO.

F-287

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

#

DATED

SYMBOL

AMOUNT

REMARKS:

L/T to Sec. File

521918

RTB:BT:amr
August 20, 1945

WJ

Mrs. Clara J. White
Route #1
New Cambria, Kansas

Dear Mrs. White:

The Army Effects Bureau has received from overseas some property of your son, Private John G. White.

This property, consisting of a few small items, is being sent you.

If, for some reason, it has not been received at the expiration of thirty days from this date, please notify me so that tracer may be instituted.

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

Yours very truly,

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

ARMY SERVICE FORCES
ARMY EFFECTS BUREAUORDER FOR SHIPMENT

Mrs. Clara J. White

SHIP TO:

Route #1

Pvt. John G. White

New Cambria, Kansas

Effects of:
Name

37204307

ASN

521918-D

Case No.

Wt.

DATE 20 August 1945
RTB:ST:amrCarrolland
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 Branch1 ✓ Warehouse Division2 Files Branch, Adm. Div.

REMARKS:

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

FRANKED

AUG 23 1945

 Shipping Clerk

PACKAGE DESCRIPTION		ARMY EFFECTS BUREAU INVENTORY		DECEASED	
#1 pkg		521918		MISSING	
				P.O.W.	
				ABANDONED	
				TALLY NO. 9900	
				INV. DATE 30 July 45	
				ORIG. NO. OF PKGS. 1	
				BOX NO. 47	
				SHEET 1 OF 1 SHEETS	
				ORGANIZATION	
				Co B 48th Arm'd Inf. Bn	
NAME John G White		RANK Pvt.			
A.S.N. 37204307					
Belt		TOWELS & WASHCLOTHS		WINGS	
BELT, MONEY (NO MONEY)		CLOTHING		BAGS, CLOTH OR TRAVEL	
Cloth, Wash		BRACELET IDENT.		BILLFOLD, (NO MONEY)	
Coats		Brushes		Case	
Footwear, Pr.		CAMERAS		Foot locker	
Gloves, Pr.		Glasses		KIT, SEW, TLT, OR WRITING	
Handkerchiefs		Knives		BOOKS	
Headwear		Lighters		Books, Address	
Jackets	X	MISC.		Books, Pilot Log	
Overcoats		Pen, Fountain		DIARY (REMOVED FOR DUR)	
Scarfs		Pencil, Mechanical		FILMS	
Shirts		Pipes		Letters	
Socks, Pr.	X	RELIGIOUS ARTICLES		Papers, Personal	
Ties		RIBBONS, DECORATION		Photos	
Towels		Rings		Shoe Shine Articles	
Trousers, Pr.		Tobacco		SHORT SNORTER	
Trunks, Pr.		Toilet Articles		SOUVENIRS	
Underwear		WATCH	X	SOUVENIR MONEY	
				stationery	
				TESTAMENTS	
				U.S. MONEY (AMOUNT)	
REMARKS Joseph White					
New Cambria, Kansas.					
ATTACHMENTS FORM #54 FORM #100					
Inventory					
I.D.R. Label					
C.A.T. None		WEIGHT		G.I. REMOVED	
WAREHOUSE SPACE 1072		STORED BY MW		SHORTAGE ON REVERSE	
INVENTORIED BY G. C. Caldwell		DATE SHIPPED		IDENT. TAGS REMOVED	
PACKED BY M. Cox		AUG 23 1945		DIARY REMOVED	
CHECKED BY		X #43 OR ADDITIONAL		LOCKED STORAGE	
				LAUNDRY REMOVED	
				FILM REMOVED	
Eff. QM Form 11 (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

WHITE, JOHN G. PVT 4307

BAY	PALLET	BOX	TALLY
	10	47	9900
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
GRB			

Eff. QM Form 43

Box No. AM 1

RESTRICTED
INVENTORY FORM

Browna # 1 A 64

14 Apr 45

DATE

SUBJECT: Inventory of Personal Effects of:

white

John

G.

Pvt.

37204307

(LAST NAME)

(FIRST NAME)

(MI)

(RANK)

(ASN)

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

The above named individual of Co. B, 48th Arm'd Inf., Bn

(UNIT)

(ORGANIZATION)

was reported buried about 14 Apr 45 1944.

STATUS (KIA, MIA, Hosp. etc.)

(DATE)

Designated Beneficiary if information readily accessible

Unk

stamps

1 pocket book

1 pen

1 crucifix

souvenir coins

INVENTORY OF EFFECTS

570 Belg.

J. C. WINDHAM, MAJOR, F.D.
FINANCE OFFICER, SN 211-275

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

H. Shackelford

Rank & ASN

H. SHACKELFORD

1st Lt, QMC

Organization

O-1596803

G. R. O.

Any additional pertinent information:

64-A

Serial No. 37204307 Name WHITE, JOHN G.
Grade _____ Rank PVT.
Organization Co. B, 48th ARMD INF. BN.
Address _____
Nearest Relative _____
Address _____
Killed in Action _____ Died of Disease _____
Date 9. APRIL - 45 Hospital _____
Battle Area GERMANY Information _____
Place of Burial BREUNA #1
Point of Coordination _____
Description of Body _____
Members Missing _____

Signed _____

F405

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

JRM:BT:amr
Case No. 521918
Date 20 August 1945

SUBJECT: Report of transaction in disposing of the effects of

John G. White

(Name of Decedent)

37204307

(Army Serial Number)

late a

Private

(Grade)

Infantry

(Organization, Army or Service)

who died

on the 8 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 decedent's camp or quarters, effects of decedent were forwarded to this Summary Court-Martial.

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

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

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

FINDING

Before a Summary Court-Martial which convened at Kansas City, Missouri, on 11 August 1945, pursuant to Special Orders 228, Headquarters KCQM Depot, dated 25 September 1943, the application or affidavit of

Mrs. Clara J. White 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. Clara J. White of (Name of person found entitled)

Route #1, New Canbria State of
(Number, Street or Avenue) (City, Town or Village)

Kansas, is the mother of the
(Relationship or Capacity)

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

(Signature of Summary Court Officer)

JOHN R. MURPHY, Colonel QMC

(Name, Rank, Organization)

SUMMARY COURT MARTIAL