

53

113

Izumi

(Last name)

37699072

(Army serial No.)

Nobuo

(First name)

(NONE) Robert

(Middle initial)

Country

(Army or service for which enlisted or inducted)

race JAPANESE

X IN BOX INDICATING COMPONENT

Regular Army.  National Guard of the United States.

United States: X

For Regular Army units.

For National Guard units.

Selective Service and Training.

Regular Army Reserve—Active duty.

Reserve Corps—Active duty. 2/156

PFC - INT

# SERVICE RECORD

covering period

24 June, 1944, to 11 JUN 1946, 19

For instructions see AR 345-125

G.

Izumi, Nobuo

IMMUNIZATION REGISTER  
AND OTHER MEDICAL DATA  
(SEE AR 40-210)

NAME (LAST, FIRST, MID, INITIAL) IZUMI, Nobuo R. ASN 37699072

DATE OF BIRTH 2 SEP 44 RACE W BLOOD GROUP O MED. OFF. YAW

SMALLPOX VACCINE

DATE	TYPE OF REACTION	MED. OFF.
<u>2 SEP 44</u>	<u>100</u>	

TRIPLE TYPHOID VACCINE

DATES EACH DOSE	MED. OFF.	DATES EACH DOSE	MED. OFF.
<u>2 SEP 44</u>	<u>COM</u>	<u>10 APR 45</u>	<u>COM</u>
<u>5 SEP 45</u>	<u>COM</u>	<u>MAY 28 45</u>	

TYPHUS VACCINE

TETANUS TOXOID

DATES EACH DOSE	MED. OFF.	DATES EACH DOSE	MED. OFF.
<u>23 SEP 44</u>	<u>COM</u>		
<u>10 SEP 45</u>			

CHOLERA VACCINE

YELLOW FEVER VACCINE

DATE	LOT NO.	MED. OFF.

WD AGO FORM 8-117  
15 AUG 1944

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

SELECTIVE TRAINING AND SERVICE  
IMMUNIZATION REGISTER<sup>1</sup>

57

P

LAST NAME IZUMI, NOBUO FIRST NAME R. ARMY SERIAL NO. 37 699 072

GRADE COMPANY REGT. OR STAFF CORPS<sup>3</sup> AGE RACE  
10 JAP

PRIVATE

SMALLPOX VACCINE

DATE	TYPE OF REACTION <sup>6</sup>	MED. OFFICER <sup>2</sup>
<u>2 SEP 44</u>	<u>void</u>	<u>any</u>

TRIPLE TYPHOID VACCINE

SERIES	DATES OF ADMINISTRATION			MED. OFFICER <sup>2</sup>
	1ST DOSE	2D DOSE	3D DOSE	
1st	<u>AUG 4 '44</u>			<u>any</u>
2d	<u>26 AUG 44</u>			<u>any</u>
3d	<u>2 SEP 44</u>			

TETANUS TOXOID

	INITIAL VACCINATION		STIMULATING DOSES	
	DATE	MED. OFF. <sup>2</sup>	DATE	MED. OFF. <sup>2</sup>
1st dose	<u>AUG 4 '44</u>	<u>any</u>		
2d dose	<u>26 AUG 44</u>	<u>any</u>		
3d dose	<u>29 SEP 44</u>	<u>any</u>		

YELLOW FEVER VACCINE

DATE	LOT No.	AMOUNT	MED. OFF. <sup>2</sup>

OTHER VACCINES

TYPE OF VACCINE	DATE	MFR'S. LOT No.	AMOUNT	MED. OFF. <sup>2</sup>
<u>BLOOD TYPE</u>		<u>O</u>		<u>any</u>
<u>TYPHUS</u>	<u>4-11-45</u>		<u>1cc</u>	<u>B9K</u>
<u>"</u>	<u>4-10-45</u>		<u>1cc</u>	<u>B9K</u>
<u>"</u>	<u>5/27/45</u>			
<u>"</u>	<u>11/10/45</u>		<u>1cc</u>	<u>any</u>

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

*Blank copy*

TYPE OF VACCINE	DATE	MFR'S. LOT NO.	AMOUNT	MED. OFF.
BLOOD TYPE	4-1-45	57-1-45	1cc	895
"	4-10-45	57-1-45	1cc	895
"	5/28/45	57-1-45	1cc	895
"	5/10/45	57-1-45	1cc	895

OTHER VACCINES

DATE	LOT NO.	AMOUNT	MED. OFF.

YELLOW FEVER VACCINE

DATE	MED. OFF.	STIMULATING DOSES
1st dose 4-1-45	895	
2d dose 5-28-45	895	
3d dose 5-28-45	895	

TETANUS TOXOID

SERIES	DATE	MED. OFF.
1st DOSE	AUG 4 '44	895
2d DOSE	26 AUG 44	895
3d DOSE	2 SEP 44	895

TRIPLE TYPHOID VACCINE

DATE	TYPE OF REACTION	MED. OFFICER
2 SEP 44		

SMALLPOX VACCINE

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

PRIVATE

LECTIVE TRAINING AND SERVICE IMMUNIZATION REGISTER

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SPECTACLES

PLACE OF REFRACTION	DATE	GLASSES REQUIRED YES <input type="checkbox"/> NO <input type="checkbox"/>
V.A. WITH GLASSES		V.A. WITHOUT GLASSES
OD	OS	OU
SPHERE	CYLINDER	AXIS PRISM DEC. IN.
OD.		
OS.		
ADD.		
BIFOCAL SEGMENT		FRAME
HEIGHT	INSET	P. D. BRIDGE EYE SIZE TEMPLE
MM.	MM.	

POSITION OF EYEGLASS GAS MASK M-1:	SIZE OF GAS MASK:
COMMERCIAL TYPE, NO. OF PRS.	EYEGLASS, GAS MASK M-1
DATE ORDERED	DATE ISSUED
DATE ORDERED	DATE ISSUED

DENTURES

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

\* CHECK IF PRESENT WHEN INDUCTED OR ORDERED TO ACTIVE DUTY

DRUG OR SERUM SENSITIVITY

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

REMARKS:

EM married on 4 May 1946  
 Miss MARIA GOOSSENS

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

Mrs MARIA Izumi  
 BAD HAMBURG UDI  
 GERMANY

OTHER IMMUNIZATIONS

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

SPECTACLES

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

DENTURES

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

\* CHECK IF PRESENT WHEN INDUCTED OR ORDERED TO ACTIVE DUTY

DRUG OR SERUM SENSITIVITY

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

REMARKS:

WD, AGO Form No 24.4

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

DATE	LOT NO.	MED. OFF.
YELLOW FEVER VACCINE		
DATE	LOT NO.	MED. OFF.
TETANUS TOXOID		
DATE	LOT NO.	MED. OFF.
CHOLERA VACCINE		
DATE	LOT NO.	MED. OFF.
TRIPLE TYPHOID VACCINE		
DATE	LOT NO.	MED. OFF.
TYPHUS VACCINE		
DATE	LOT NO.	MED. OFF.

10 Sept 45  
90 Mar 46  
58 May 43

NAME (Last, first, middle initial) William H. Jones

DATE OF BIRTH 18 SEP 1898

RACE White

BLOOD GROUP O

Local Board of Origin #3 Polk, Des Moines, Iowa  
(Board No., city, and State)

Date of Induction 1 June 1944

Date and place of induction 6/24/44 Camp Dodge, Iowa

By whom administered Christie

Name (Last, first, middle initial) CHRISTIAN

Grade and Department 1st Lt

TYPE OF RECEPTION RECEPTION CTR

Place to which sent RECEPTION CTR

Date sent 3 AUG 44

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

SMALLPOX VACCINATION	
Date	Result <sup>1</sup>
2 SEP '44	VACCINOID

TYPHOID VACCINATIONS

1 AUG 1944 1ST DOSE  
26 AUG 44 2ND DOSE  
3 SEP 44 3RD DOSE COMPLETED  
Sept 8 45 Stain JEW

OTHER VACCINATIONS

BLOOD TYPE <sup>2</sup>	Date
1ST DOSE TETANUS TOXOID	4 AUG 1944
2ND DOSE TETANUS TOXOID	26 AUG 44
3RD DOSE TETANUS TOXOID	23 SEP 44

TYPHOUS BOOSTER 10 APRIL 45  
Date completed Result 1

CARRIER EXAMINATIONS  
(See AR 40-310)

Date	Parasite examined for	Kind of specimen <sup>3</sup>	Positive or negative

<sup>1</sup> Record as vaccinia, vaccinoïd, or immune reaction.  
<sup>2</sup> Record as positive, positive combined, negative-pseudo or negative.  
<sup>3</sup> Record as feces, urine, sputum, blood, etc.

EM married on 4 May 1946  
Miss MARIA GOOSSENS

1st beneficiary - person to be notified in case of emergency:  
MRS MARIK IZUMI  
BAD HOMBURG UDT  
GERMANY

WD AGO FORM NO 24.4

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

BT-0

Date	Parasite examined for	Kind of specimen	Positive or negative

CARRIER EXAMINATIONS (See AR 40-210)


Date Result

Date	BLOOD TITRE
1st DOSE TETANUS TOXOID AUG 1944	
2nd DOSE TETANUS TOXOID 26 AUG 44	
3rd DOSE TETANUS TOXOID 23 SEP 44	

OTHER VACCINATIONS

1st DOSE AUG 1944	
2nd DOSE 26 AUG 44	
3rd DOSE 23 SEP 44	

TYPHOID VACCINATIONS

Date	Result
2 SEP 44	

SMALLPOX VACCINATION

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

RECORDS OF IMMUNIZATION

Date sent: 3 AUG 44

Place to which sent: (Floor, camp, or reception center) ...

By whom sent: ...

Date and place of induction: ...

Local: ...

EM married on 4 May 1946  
Miss MADIA GOOSSENS

1st beneficiary - person to be notified in case of emergency:  
Mrs. MARY LEWIS  
BHD HAMBURG UDF  
GERMANY

NAME (LAST, FIRST, MID. INITIAL) Jaumi Nobuo

AGE 26

DATE OF BIRTH 28 JAN 1920

RACE JAP

BLOOD GROUP O

SMALLPOX VACCINE

TRIPLE TYPHOID VACCINE		TYPHUS VACCINE	
DATES EACH DOSE	MED. OFF.	DATES EACH DOSE	MED OFF.

8 Sept 45		28 May 45	
		24 Mar 46	

TETANUS TOXOID

DATES EACH DOSE	MED. OFF.
10 Sept 45	

CHOLERA VACCINE

DATES EACH DOSE	MED. OFF.

YELLOW FEVER VACCINE

DATE	LOT NO.	MED. OFF.

ENLISTMENT RECORD 37699072

**PZUMI Nobuo** (none) **R.**  
 (Last name) (First name) (Middle initial) (Army serial No.)  
 Born **Sept. 18, 1910**, **Belvedere, Calif.**  
 (Month, day and year) (City or town) (State or country)  
 Height **5** ft. **6** in. Weight **131** lb. Eyes **Brn.** Hair **Black**

Complexion **Dark** Size of gas mask \_\_\_\_\_ Size of shoe \_\_\_\_\_  
 Married or single **Single** Occupation **STUDENT**

## EDUCATIONAL QUALIFICATIONS

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

Graduate work \_\_\_\_\_ Specialized in \_\_\_\_\_

Speaks \*English, French, Spanish, German

## OCCUPATIONAL QUALIFICATIONS

**STUDENT**  
 (Main occupation) \$ \_\_\_\_\_ (Weekly wages)

Years \_\_\_\_\_ as \*apprentice, journeyman, expert.

Just what did he do? **Studied.**

(Next best occupation) \$ \_\_\_\_\_ (Weekly wages)

Years \_\_\_\_\_ as \*apprentice, journeyman, expert.

Just what did he do? \_\_\_\_\_

## HOME ADDRESS AND NEAREST RELATIVE

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

Name and address of nearest relative **Tomii Izumi**  
 (Name)

**Mother** **1642**  
 (Relationship) (Number and street or rural route, if none, so state)  
**Manzanar, Calif.**  
 (City, town, or post office) (State or country)

Person to be notified in case of emergency **Tomii Izumi**  
 (Name)

**Mother** **1642**  
 (Relationship; if friend, so state) (Number and street or rural route, if none, so state)  
**Manzanar, Calif.**  
 (City, town, or post office) (State or country)

## DESIGNATION OF BENEFICIARY

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

**Tomii Izumi** **Mother**  
 (Name and degree of relationship of beneficiary)  
**1642**  
 (Address)  
**Manzanar, Calif.**  
 (City, town, or post office) (State or country)

**Yori Izumi** **Sister**  
 (Name and degree of relationship of alternate beneficiary)  
**3500 Larimer St., Denver, Colo.**  
 (Address)

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

## CURRENT INDUCTION

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

Age at enlistment **18** years **9** months.

Accepted for service at \_\_\_\_\_

Enlisted at \_\_\_\_\_ on the \_\_\_\_\_

\_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

in grade of \_\_\_\_\_ by \_\_\_\_\_

for \_\_\_\_\_ (Company, regiment, arm, or service)

to serve \_\_\_\_\_ years.

Completed **0** years **0** months **0** days for longevity pay.

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

Physical defects at enlistment **ND**

## PRIOR SERVICE

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

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

Discharged as \_\_\_\_\_; \_\_\_\_\_; By reason of \_\_\_\_\_  
 (Grade) (Character)

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

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

Discharged as \_\_\_\_\_; \_\_\_\_\_; By reason of \_\_\_\_\_  
 (Grade) (Character)

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

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

Discharged as \_\_\_\_\_; \_\_\_\_\_; By reason of \_\_\_\_\_  
 (Grade) (Character)

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

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

Discharged as \_\_\_\_\_; \_\_\_\_\_; By reason of \_\_\_\_\_  
 (Grade) (Character)

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

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

Discharged as \_\_\_\_\_; \_\_\_\_\_; By reason of \_\_\_\_\_  
 (Grade) (Character)

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

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

Discharged as \_\_\_\_\_; \_\_\_\_\_; By reason of \_\_\_\_\_  
 (Grade) (Character)

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

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

Discharged as \_\_\_\_\_; \_\_\_\_\_; By reason of \_\_\_\_\_  
 (Grade) (Character)

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

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

Discharged as \_\_\_\_\_; \_\_\_\_\_; By reason of \_\_\_\_\_  
 (Grade) (Character)

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

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

Discharged as \_\_\_\_\_; \_\_\_\_\_; By reason of \_\_\_\_\_  
 (Grade) (Character)

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

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

Discharged as \_\_\_\_\_; \_\_\_\_\_; By reason of \_\_\_\_\_  
 (Grade) (Character)

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

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

Discharged as \_\_\_\_\_; \_\_\_\_\_; By reason of \_\_\_\_\_  
 (Grade) (Character)

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

\* Strike out words not applicable.

† No entry required for men secured through Selective Service.

## MILITARY QUALIFICATIONS

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

## ARMY SPECIALTY

Specialty	*Rating, with date	*Rating, with date
745 (RIFLEMAN) S-88	18 DEC '44	

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

## SPECIAL DUTY

As	At	From	To	Authority

## ARTICLES OF WAR

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

Date	Initials	Date	Initials
2 AUG 1944	<i>[initials]</i>	29 SEP 1945	<i>[initials]</i>
2 NOV 1944	<i>[initials]</i>	11 Dec 45	<i>[initials]</i>
20 DEC '44	<i>[initials]</i>		
27 JUN 1945	<i>[initials]</i>		

## SEX MORALITY

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

## QUALIFICATION IN ARMS

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

Qualified as \_\_\_\_\_, 19

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

Order publishing fact of qualification \_\_\_\_\_, 19

Qualified as \_\_\_\_\_, 19

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

Order publishing fact of qualification \_\_\_\_\_, 19

Qualified as \_\_\_\_\_, 19

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

Order publishing fact of qualification \_\_\_\_\_, 19

Qualified as \_\_\_\_\_, 19

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

Order publishing fact of qualification \_\_\_\_\_, 19

Qualified as \_\_\_\_\_, 19

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

Order publishing fact of qualification \_\_\_\_\_, 19

## MILITARY RECORD

APPOINTMENT, PROMOTION, OR REDUCTION, WITH AUTHORITY THEREFOR

Grade	Date	Authority	Initials
Pvt	24 Jun 44	FR 600-790	<i>[initials]</i>
PFC	6 Jun 45	C.O. 72, Co. 2, 506 P.I.R. <i>[initials]</i>	<i>[initials]</i>

## SPECIALIST RATINGS

Class	Qualification	From	To	Authority	Initials

INSERT TO SERVICE RECORD  
ORGANIZATIONS TO WHICH ATTACHED

Organization	From	To
SHPMT GVI-359	3 APR '45	
6900 P.P. (2963)	21 Apr 45	28/4/45
3rd. Repl. Depot	8 May 45	6 MAY 1945

P-172 insert #1 *[initials]*

Assigned to company, regiment, arm, or service	Station	Date
Co. 2, 506 P.I.R.	APO #473 N.Y.N.Y.	2 May 45
Co. F 508 P.I.R.	APO 757 NYC	16 Oct 45

insert #1 Added 5 Apr 45



## MILITARY QUALIFICATIONS

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

## ARMY SPECIALTY

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

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

## SPECIAL DUTY

As	At	From	To	Authority

## ARTICLES OF WAR

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

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

## SEX MORALITY

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

## QUALIFICATION IN ARMS

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

Qualified as \_\_\_\_\_ (Grade designation) \_\_\_\_\_ 19

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

Order publishing fact of qualification \_\_\_\_\_ (Number) \_\_\_\_\_ (Source) \_\_\_\_\_ (Date) 19

Qualified as \_\_\_\_\_ (Grade designation) \_\_\_\_\_ 19

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

Order publishing fact of qualification \_\_\_\_\_ (Number) \_\_\_\_\_ (Source) \_\_\_\_\_ (Date) 19

Qualified as \_\_\_\_\_ (Grade designation) \_\_\_\_\_ 19

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

Order publishing fact of qualification \_\_\_\_\_ (Number) \_\_\_\_\_ (Source) \_\_\_\_\_ (Date) 19

Qualified as \_\_\_\_\_ (Grade designation) \_\_\_\_\_ 19

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

Order publishing fact of qualification \_\_\_\_\_ (Number) \_\_\_\_\_ (Source) \_\_\_\_\_ (Date) 19

Qualified as \_\_\_\_\_ (Grade designation) \_\_\_\_\_ 19

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

Order publishing fact of qualification \_\_\_\_\_ (Number) \_\_\_\_\_ (Source) \_\_\_\_\_ (Date) 19

16-28259-1

## MILITARY RECORD

APPOINTMENT, PROMOTION, OR REDUCTION, WITH AUTHORITY THEREFOR

Grade	Date	Authority	Initials
Pvt	24 Jun 44	FR 600-750	mf
PFC	6 Jun 45	C.O. 72, Co. 2, 506 P.I.R. 6 Jun 45	mf

## SPECIALIST RATINGS

Class	Qualification	From	To	Authority	Initials

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

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

Assigned to company, regiment, arm, or service	Station	Date
Co. 2, 506 P.I.R.	A.P.O. #472 N.Y.N.Y.	2 May 45
Co. F 508 P.I.R.	A.P.O. 757 719C	16 Oct 45

insert #1 Added 5 Apr 45





RECORD OF TRIALS BY COURTS MARTIAL

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

Sentence announced and adjudged 12 Oct, 1945  
 Sentence as approved To forfeit \$15.00 at his pay.  
 Approved 15 Oct, 1945  
 I certify the above is correct.  
 Unexecuted portion of confinement and forfeiture remitted per  
 Released from confinement No confinement, 19  
 Robert W. Stephens (Name, grade, and organization) 1st Lt Int

C. M., A. W., 19 (Synopsis of specifications)  
 Sentence announced and adjudged, 19  
 Sentence as approved, 19  
 I certify the above is correct. Approved, 19  
 Unexecuted portion of confinement and forfeiture remitted per (Name, grade, and organization)  
 Released from confinement, 19 (Name, grade, and organization)

C. M., A. W., 19 (Synopsis of specifications)  
 Sentence announced and adjudged, 19  
 Sentence as approved, 19  
 I certify the above is correct. Approved, 19  
 Unexecuted portion of confinement and forfeiture remitted per (Name, grade, and organization)  
 Released from confinement, 19 (Name, grade, and organization)

C. M., A. W., 19 (Synopsis of specifications)  
 Sentence announced and adjudged, 19  
 Sentence as approved, 19  
 I certify the above is correct. Approved, 19  
 Unexecuted portion of confinement and forfeiture remitted per (Name, grade, and organization)  
 Released from confinement, 19 (Name, grade, and organization)

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 Unexecuted portion of confinement and forfeiture remitted per (Name, grade, and organization)  
 Released from confinement, 19 (Name, grade, and organization)

C. M., A. W., 19 (Synopsis of specifications)  
 Sentence announced and adjudged, 19  
 Sentence as approved, 19  
 I certify the above is correct.  
 Unexecuted portion of confinement and forfeiture remitted per (Name, grade, and organization)  
 Released from confinement, 19 (Name, grade, and organization)

**DISCONTINUANCE OF PAY**  
 Class of payments of pay authorized follows:  
 \$ 7.50 per month for Indefinite months, commencing 15th day of Sept 1944 and expiring 15th day of Sept 1944, in favor of BOND  
 for the purpose of BOND  
 Discontinued 15 March 1945, reason S of Reg  
 W. D., A. G. O. Form No. 30, mailed to Finance Officer, U. S. Army, Washington, D. C., 1945, by MARY J. WILKS  
 Acknowledgment of discontinuance received 19

cl. B

\$ 17.75 per month for 1 year months, commencing 1 year 1940  
 and expiring \_\_\_\_\_, 19\_\_\_\_, in favor of Army  
 for the purpose of War Bonus  
 Discontinued 30 Sept 48, 19\_\_\_\_, reason Sol Request  
 W. D., A. G. O. Form No. 30, mailed to Finance Officer, U. S. Army, Washington,  
 D. C., \_\_\_\_\_, 19\_\_\_\_, by \_\_\_\_\_  
 (Name and grade of forwarding officer)  
 Acknowledgment of discontinuance received \_\_\_\_\_, 19\_\_\_\_

617  
23 per month for 120 months, commencing 1 Apr 1946  
 and expiring 126, 19\_\_\_\_, in favor of Dependents  
 for the purpose of Support  
 Discontinued \_\_\_\_\_, 19\_\_\_\_, reason \_\_\_\_\_  
 W. D., A. G. O. Form No. 30, mailed to Finance Officer, U. S. Army, Washington,  
 D. C., \_\_\_\_\_, 19\_\_\_\_, by \_\_\_\_\_  
 (Name and grade of forwarding officer)  
 Acknowledgment of discontinuance received \_\_\_\_\_, 19\_\_\_\_

**NATIONAL SERVICE LIFE INSURANCE**  
 XXX GOVERNMENT INSURANCE XXX

**ALMT**  
 Deduction of pay for Government insurance authorized as follows:  
 Class D insurance deduction of \$ \_\_\_\_\_ per month for 6-30 months, commencing \_\_\_\_\_, 19\_\_\_\_, and expiring \_\_\_\_\_, 19\_\_\_\_  
 for payment of monthly premium on \$ 10. Discontinued \_\_\_\_\_, 19\_\_\_\_  
 reason \_\_\_\_\_  
 W. D., A. G. O. Form No. 30, mailed to  
 Veterans' Administration, Washington, D. C., on \_\_\_\_\_, 19\_\_\_\_  
 by \_\_\_\_\_  
 (Name and grade of forwarding officer)

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

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

DEPOSITS

Date	Amount		Total amount		Name and grade of finance officer accepting deposit	Initials
	Dol.	Ct.	Dol.	Ct.		
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
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_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.
_____					_____ and _____	/100 Dollars.

**PAY DETAINED BY COURTS MARTIAL ENTERED ON PAY ROLL**

Month	Amount		Vou. No.	Name and grade of finance officer	Accounts for
	Dol.	Ct.			
_____ 19____					
_____ 19____					
_____ 19____					
_____ 19____					

CLOTHING ACCOUNT  
CLOTHING DRAWN

Date of issue	Money value clothing	Initials	Date of issue	Money value clothing	Initials

A.C.A.O.  
Claim Filed  
Case No. 51759

GRATUITOUS ISSUE OF CLOTHING

Date	Money value clothing	Initials

CLOTHING SETTLEMENTS

Date	Due soldier	Due United States	Roll on which collected	Initials*

\* Initials of organization commander.

REMARKS—FINANCIAL

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

Enlistment allowance of \$ \_\_\_\_\_  
for the grade of \_\_\_\_\_  
paid by \_\_\_\_\_  
on \_\_\_\_\_, 19\_\_\_\_  
Entitled to travel pay to Denver Colo  
(Place at which accepted for previous enlistment)  
Received no travel pay upon discharge on \_\_\_\_\_, 19\_\_\_\_ to reenlist.

Date	Description and amount due U. S. or soldier	Roll on which collected
6/24/44 4 Aug 44	WD AGO FORM 28 ISSUED CL B ALMT OF 7.50 PER MONTH FROM Sept. 1944	
7 Aug 44	CL N ALMT OF 6.50 PER MONTH FOR INDEFINITE PERIOD EFFECTIVE August 44 Only ADV _____ MONTH OF CL F DED OF _____ PER MONTH FROM _____ IS DESIRED.	
29 AUG 44	CL N ALMT \$ 6.50 PER MONTH AUG 44	
12 Dec 44	PAID TO INCL D 30 NOV 1944 DUE US GOVT LDY \$ 1.50 Nov 44	
13 Dec 44	DUE US GOVT LDY \$ 0.50 Dec 44	
	Due US lost or damaged property MR \$ 0.75	
	Due US Part Pmt \$ 11.00, mo DEC 44 pd on Vou # _____, JAN 45 S. G. Harris, Jr., Maj. F. D.	44 DEC PAID
	Placed on Pchlist Status 25 DEC 1944	
	Due US Part Pmt \$ 51.00, mo JAN 45 pd on Vou # 4534, JAN 45 S. G. Harris, Jr., Major, F. D. MC-51 25 JAN PAID	
20 Jan 45	DUE US MR GPO \$ 5.50 K-51 Pchlist Payn 1 Feb 45	ROB
15 Feb 45	ON FUR FR 22 Jan 45 TO 9 Feb 45 INCL DUE FUR RAT	JAN 45 PAID
		45 FEB PAID

## REMARKS—FINANCIAL—Continued

Date	Description and amount due U. S. or soldier	Roll on which collected
	Prcht pay fr 1 Mar 45	
9 Mar 45	v. L. Balmt H 7.50 INCL TO 18.75 EFF 1 April 45	
B-8-30	Pd to Incl MAR 31 1945 By S GADDIS, Maj, FD	
	DOE SOL For Serv Pay fr 5 Apr 45	
JUNE/45	Aptd PFC Fr POT PER C.O. #12, Co. V. 506 PRCHT. INF. DTD. 6 JUNE/45.	
	31 JULY PAID 31 AUGUST PAID	
	LAST P.D. TO INCL 30 SEPT 45 AD ADVANCEMENT FRAMES 007 U.S.	
2 Mar 45	Inc. Co B 18.75 30 Sept 45 Adv US P/P 75.00 Vort # Mar 45 at G R Caldwell Lt Col FD.	
15 Mar 45	To forfeit \$15.00 of his pay per Sum. CM # 255, 506 PIR, 12 Oct 45.	
	Last Paid to Include 30 Nov 45	
	Last Paid to Include 31 Dec 45	
5 Mar 46	Last Paid to Include 31 Jan 46	
8 Apr 46	Last Paid to Include 29 Feb 46	
2 May 46	Cl F about \$22.00 eff. 1 Apr 46 Last Paid to Include 30 Apr 46	

## REMARKS—ADMINISTRATIVE

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

## RELIGIOUS

Qualification in Arms			
AME	Course	Rating	Score
AND 1	A	J	1
TF			24,
			X

Malaria control tng complete RC on  
Date 14 OCT 1944

## Replaced

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

Col rptd for AD 3 Aug 44 in gr m

at the Recp Cen, Ft. Logan,

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

no. 5439 Dated 26 July 44

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

28 5 4 Manzanar Calif  
Taken from WDA&O 183, 3 Aug 44

SERVICE PERIOD GOVERNED BY  
SERVICE EXTENSION ACT OF 1941

PHYSICALLY QUALIFIED FOR PARATROOPS  
26 SEP 44

Phys. PROFILE 11114 X 23 MAY 45

Qualified as Parachutist per par

30 17 Hqs. TPS, dtd JAN 19 1945

Arrived in Belgium 23 Apr 45

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

Insert No. 74 Added 22 Dec 44

103 INSERTS ADDED 23 FEB 45  
43 insert added 22 Mar 45

19 Oct 45 Added 5 Sept 45

JUMP RECORD

17

2d Ind.

NO IRVC CAMP BLANDING, FLA.

15 DEC 44, 1944

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

This soldier was transferred to YOUR COMMAND

per PAR 16 SO 300 THIS HQ 15 DEC 44

and left this organization 18 DEC 1944

He was last paid to include 30 NOV 1944

by C. F. LEARD, Major, F. D.  
(Name and grade of finance officer or agent officer, if any)

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

DUE US GOVT LDY 0.50 DEC 44

ALLOTMENT STATUS

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

Due soldier at date of TRF: ACCRUED PAY & ALWS

This soldier has not a Class B allotment running which has been deducted from his pay to include

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

His character is EXCELLENT

Efficiency rating as soldier SATISFACTORY

I have personally verified all entries in this indorsement.  
M. H. PEDERSON, Capt, Inf, Asst Pers Officer.  
(Grade and organization)

This soldier reported \_\_\_\_\_, 19\_\_\_\_

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

To 170th Serv Unit, Recp Reg, Ft Logan, Colo.  
9 AUG 1944, 19

This soldier was transferred to Your Command  
per L. SO # 12 AUG 1944

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

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

Due United States; if nothing, so state  
TWO DED CL N ALMT FDR  
MO OF AUG 1944 ONLY

† Due soldier at date of Transfer Accrued Pay

This soldier ~~has~~ has not a Class F (A) (B) deduction which has been deducted from his pay to NOG, 19

This soldier ~~has~~ has not a Class B allotment running which has been deducted from his pay to include Nothing, 19

This soldier ~~has~~ has not a Class E allotment running which has been deducted from his pay to include \_\_\_\_\_, 19

This soldier has authorized a Class (N) deduction for Government insurance which has been deducted from his pay to include Nothing, 19

His character is UNKNOWN

Efficiency rating as soldier UNKNOWN

I have personally verified all entries in this indorsement.

J. R. MOSLEY, W. O. (P. S.) Asst. Personnel Officer  
(Name) (Grade and organization)

This soldier reported \_\_\_\_\_, 19 15 AUG 1944  
and was assigned to \_\_\_\_\_ (Organization to which transferred) (see page 4).

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

\*W. D., A. G. O. Form No. 24-2 19 July 1943 16-36425-1

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

INSET #1 added



To \_\_\_\_\_  
 This soldier was transferred to \_\_\_\_\_  
 per \_\_\_\_\_  
 and left this organization \_\_\_\_\_

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

HQ RECEP CENTER <sup>1st Ind.</sup> 1771,  
 CAMP DODGE, IOWA

To YOUR COMMAND, 19\_\_

This soldier was transferred to \_\_\_\_\_

per \_\_\_\_\_

and left this organization \_\_\_\_\_, 19\_\_

He was last paid to include \_\_\_\_\_, 19\_\_

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

Due United States, if nothing, so state \_\_\_\_\_

**PAY DUE FROM DATE OF INDUCTION**  
**SEE REMARKS FINANCIAL**

*Handwritten scribbles and a large blue 'X' mark over the lower half of the page.*

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

This soldier <sup>has</sup> ~~has not~~ a Class E allotment running which has been deducted from his pay to include NONE, 19\_\_

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

His character is UNKNOWN

Efficiency rating as soldier UNKNOWN

I have personally verified all entries in this indorsement.

(Name)

(Grade and organization)

This soldier reported \_\_\_\_\_, 19\_\_

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

*insert #1 added 9 Aug 44*

13-25259-1

2d Ind.

NO IRVC CAMP BLANDING, FLA.

15 DEC 1944

To COMDT FRCHT SCH, FT BENNING, GA.

This soldier was transferred to YOUR COMMAND

per PAR 16 SO 300 THIS HQ 15 DEC 44

and left this organization \_\_\_\_\_, 19\_\_

He was last paid to include \_\_\_\_\_, 19\_\_

by C. F. LEARD, Major, F.D.  
 (Name and grade of finance officer or agent officer, if any)

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

DUE US GOVT LDY \$ 0.50 DEC 44

ALLOTMENT STATUS

CLASS	AMOUNT DED	LED THROUGH
B	<u>7.50</u>	<u>30 Nov 44</u>
D		
E		
F		
N	<u>6.50</u>	<u>30 Nov 44</u>

\*Due soldier at date of TRF: ACCRU'D PAY & ALWS

This soldier <sup>has</sup> ~~has not~~ a Class E allotment running which has been deducted from his pay to include \_\_\_\_\_, 19\_\_

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

His character is EXCELLENT

Efficiency rating as soldier SATISFACTORY

I have personally verified all entries in this indorsement.

W. H. PEDERSON Capt, Inf,

Asst Pers Officer.

(Grade and organization)

This soldier reported \_\_\_\_\_, 19\_\_

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

3d Ind Added 23 Mar/45

HQ THE PROCT SCH  
FT BENNING, GA. 23 March 1945  
TO: CG, AGF REPL DEP #1  
FT GEO. G. MEADE, MARYL ND  
This Sol was trfd to: Your Command  
per Ltr Sub: "Travel Orders" 6-18 File  
300.4 GNRXA-E Hq The Procht School, Ft  
Benning, Ga. dtd 10 Mar/45, & amend-  
ments thereto & left this sta 27 Mar  
1945 & was last pd to incl 28 Feb/45  
by S G HARRISS, JR., PD. Mag

Due US: If nothing, so state:  
  
  
  
Due Sol at date of trf: accrued pay &  
/lws. Procht Pay fr 1 Mar/45 to 26 Mar  
1945 incl.

ALLOTMENT STATUS

CLASS	AMOUNT DEDUCTED	DED THROUGH
B	<u>818.75</u>	<u>29 Feb 45</u>
D		
E		
F		
N	<u>16.50</u>	<u>28 Feb 45</u>
B.	<u>77.50</u>	<u>28 Feb 45</u>

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

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

(B)

This soldier reported \_\_\_\_\_, 19\_\_

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

10-25250-1

3d Ind Added 27 Feb 45  
3d Ind Added 23 Mar 45

arks

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

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

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

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

Nearest Relative TOMI IZUMI  
Relationship MOTHER

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

PERSON TO BE NOTIFIED IN CASE OF  
EMERGENCY SAME AS ABOVE

Relationship \_\_\_\_\_  
Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

DESIGNATION OF BENEFICIARY  
1st TOMI IZUMI MOTHER  
23-5-4 MANZANAR CALIF

2nd HERBERT IZUMI BROTHER  
SAME AS ABOVE

3rd MRS YARE TESHIMA SISTER  
3500 KARAME, DENVER, COLO  
Insert # 3 Added 22 Mar 45

HQ  
FT  
TC

3  
ded 23 Mar/45

orks Admini. re  
e Insert

STRATTI

NO.

Izumi Nobuo

37699072

REMARKS ADMINISTRATIVE - Contd  
INSERT NO.

Soldier is \* not favorably consid-  
ered for Good Conduct Medal.  
Date 16 DEC 1944

DENTAL DEFECTS - DENTURES

Date of insertion of denture \_\_\_\_\_  
Prescription for denture:  
|  
\_\_\_\_\_

Remarks \_\_\_\_\_

Lecture on venereal disease and  
prophylaxis completed.

TF 8-1238 shown - Date 2 AUG 44

Sol. .... Favorably Considered  
For Good Conduct Medal at  
Time of Transfer. APR 3 '45

Insert No. 1 Added 22 Dec 44

Insert No. 2 Added 22 Dec 44

19

3 mone-  
to.

250-1

AS

3d Ind added 23 Mar 45

30  
Added 23 Mar/45

HQ  
PTA

Date	#	ON
Date		ON
Date		ON
Date		ON
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Date		ON

arks Admini  
e Insert

STRATI  
NO. 2

Name	ASN 37699072	
	1	2
	Individual weapon qualification	
Transition firing qualification		S
Qualification with crew-served weapon for men required to fire	U	
Grenade course qualification	U	
Completion of familiarization firing		S
Completion of prescribed 25-mile march	U	
Completion of prescribed 9-mile march	U	
Completion of physical fitness test		S
Completion of infiltration course		S
Participation in close combat course		S
Participation in combat in cities course		S

NOTE--Indicate in column 1 "U" for unqualified, failure to complete, or failure to participate in. Indicate in column 2 "S" if the answer is in the affirmative.

*E.E. Brown*  
E.E. BROWN  
1st Lt., Inf.,  
Commanding Co A 208 Bn

Insert No. 2 Added 22 Dec 44

*E.A.T.*  
SOL AUTH TO WEAR (European Theater Campaign Ribbon), WD Cir 1, dtd 1Jan43.

Sol presented with the following Medals, Decorations & Citations:

~~E.A.T.~~  
-EPC Theater Campaign Ribbon:  
Date 15Jun45 Place ZellanSee, Austria

-Good Conduct Ribbon:  
Date 22Jun45 Place ZellanSee, Austria

-Good Conduct Medal:  
Date 25Jul45 Place Joigny, France

-Combat Infantryman Badge:  
Date \_\_\_\_\_ Place \_\_\_\_\_

-Purple Heart:  
Date \_\_\_\_\_ Place \_\_\_\_\_

-Oak Leaf Cluster to Purple Heart:  
Date \_\_\_\_\_ Place \_\_\_\_\_

-Bronze Star Medal:  
Date \_\_\_\_\_ Place \_\_\_\_\_

-Oak Leaf Cluster to Bronze Star Medal:  
Date \_\_\_\_\_ Place \_\_\_\_\_

-Bz Sv Stars for campaigns:  
Normandy Rhineland Ardennes-Cen Europe

Date 30Aug45 Place Joigny, France

-Distinguished Unit Badge:  
Date 15Jul45 Place Littlecote, England

-Oak Leaf Cluster to Unit Badge:  
Date 10Feb45 Place Mournelon, France

-Bz Sv Arrowhead Campaign:  
Date \_\_\_\_\_ Place \_\_\_\_\_

Date \_\_\_\_\_ Place \_\_\_\_\_

Date \_\_\_\_\_ Place \_\_\_\_\_

*NO Form 79 Part of This Record.*

Parachute Pay certificate issued to Sol 5Sep45 by 506th Prcht Inf.

ASR Score card attached to S/R 5 Sep 45.  
SCORE: *22 25 25 25 25 25*

Insert added 5Sep45, 506th Prcht Inf..  
*45*

30

ided

E                                  P'D  
                                           

34  
 945

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

Soldier participated in Battle of Bastogne.

Auth:            over seas bars per WD  
 Cir 268 dtd 30 June 44. AJO

Ated EAMT Ribbon per JWCIA 1  
 1 Jan 43. ETO

FOREIGN SERVICE

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

insert #4 attached 16 Aug 45  
 S/R of            ASN

sd lnd 4000 23/11/45

HQ 6900 Reinf Depot (Irov) APO 117 ETOUS.  
 TO: CO 101 AB Div APO 477  
 per Par 45 SQ 6 Hq, 6900 Reinf Depot  
 (Irov) APO 117, dtd 26 Jan 1945  
 He was last  
 pd to incl) SEE REMARKS  
 BY PREVIOUS FINANCIAL and/or  
 INDORSEMENT

ALLOTMENT STATUS	
Cl	Amount Deducted / Paid Through Date
B	\$ / Date
E	\$ / Date
F	\$ / Date
N	\$ <u>6.50</u> / Paid

Due sol at date trfd: \_\_\_\_\_  
 ACCR PAY & ALWS

Due United States: \_\_\_\_\_ If nothing  
 so state SEE REMARKS FINANCIAL

His character is: \_\_\_\_\_ UNKNOWN  
 Efficiency rating as sol: \_\_\_\_\_ UNKNOWN

I have personally verified all entries  
 in this indorsement.

**LOVER**

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

*Ins #2*

Sol at date trfd: Accr Pay & Alws

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

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

Sol reported \_\_\_\_\_ 19

P-60 *Ins #1*

INDEXED

SOL RPTD 2 MAY 45  
ASGD 506 PRCHT INF

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

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

ALLOTMENT STATUS

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

Sol at date trfd: Accr Pay & Alws

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

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

Sol reported 19  
P-60 *Ins # 1*



To \_\_\_\_\_  
This soldier was transferred to \_\_\_\_\_  
per \_\_\_\_\_, 19\_\_\_\_  
and left this organization \_\_\_\_\_, 19\_\_\_\_  
He was last paid to include \_\_\_\_\_, 19\_\_\_\_

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

• Due soldier at date of \_\_\_\_\_

This soldier <sup>has</sup> ~~has not~~ a Class E allotment running which has been deducted from his pay to include \_\_\_\_\_, 19\_\_\_\_

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

His character is \_\_\_\_\_  
Efficiency rating as soldier \_\_\_\_\_

I have personally verified all entries in this indorsement.

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Grade and organization)

This soldier reported \_\_\_\_\_, 19\_\_\_\_

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

*5th Ind Adde 1/27/45 B/10*

*INDEX ADDED*

20  
6th Ind.

No 506 PRCHT INF, APO 472, U.S. ARMY  
15 Oct 1945  
To C.O. 508 PRCHT INF, APO 752, U.S. ARMY  
This soldier was transferred to 1st Lt. Command  
per par 8, SO # 243, Ho 101 Abn Div, 12 Oct 45  
and left this organization 19 Oct 1945  
He was last paid to include 30 Sept 1945  
by A.C. Small, Lt Col, FD  
(Name and grade of finance officer or agent officer, if any)  
Due United States; if nothing, so state Nothing

ALLOTMENTS

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

Due soldier at date of Trf Accrd Pay & Alw

This soldier has not a Class E allotment running which has been deducted from his pay to include \_\_\_\_\_, 19\_\_\_\_

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

His character is Excellent  
Efficiency rating as soldier Excellent

I have personally verified all entries in this indorsement.

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

This soldier reported \_\_\_\_\_, 19\_\_\_\_

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

7th Ind

HQS 508TH PRCHT INF APO 757 U S A RMY  
2 May 46  
TO C.O. 3rd Reinf Depot APO 872  
This sol was atcd unassg your command  
Per Par 7 3012 Hq Command, USFET  
dtd 2 May 46

And left this org 8 May 46  
Last pd to incld 30 Apr 46  
By J.M. Jones Lt Col FD  
Due United States

Nothing

Due sol at date of atcd:  
A/P & Alws. Auth Prcht Pay per  
Par 19 TM 4-502

ALLOTMENT STATUS

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

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

W. E. McDaniell  
W. E. McDANIEL  
1st Lt., Infantry  
Personnel Officer

Ins #1

Ins #1 added

20  
6th Ind.

Ha 506 PCHT INF, APO 472, U.S. ARMY

To CO 508 PCHT INF, APO 752, U.S. ARMY  
15 Oct 1945

This soldier was transferred to 4th Air Command  
per par 8, SO# 243, Ha 101 Abn Div, 12 Oct 45  
and left this organization 19 Oct 1945

He was last paid to include 30 Sept 1945  
by A.C. SMALL, LT COL, FD  
(Name and grade of finance officer or agent officer, if any)

Due United States; if nothing, so state NOTHING

ALLOTMENTS

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

\* Due soldier at date of Trf ACCRD PAY & ALLOWS

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

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

His character is Excellent  
Efficiency rating as soldier Excellent

I have personally verified all entries in this indorsement.

G. H. EVERS (Name)

1st Lt, 506 PIR  
Asst Pers O (Grade and organization)

This soldier reported 19

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

To \_\_\_\_\_, 19\_\_\_\_  
This soldier was transferred to \_\_\_\_\_  
per \_\_\_\_\_

and left this organization \_\_\_\_\_, 19\_\_\_\_  
He was last paid to include \_\_\_\_\_, 19\_\_\_\_

by \_\_\_\_\_, 19\_\_\_\_  
(Name and grade of finance officer or agent officer, if any)

Due United States; if nothing, so state \_\_\_\_\_

\* Due soldier at date of \_\_\_\_\_

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

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

His character is \_\_\_\_\_  
Efficiency rating as soldier \_\_\_\_\_

I have personally verified all entries in this indorsement.

(Name)

(Grade and organization)

This soldier reported \_\_\_\_\_, 19\_\_\_\_

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

Two #1 added

INSERT TO SERVICE RECORD

Ind

A.S.F. 24 1412, S.C.U.  
 To *W. D. S. #19* *California*

This soldier was transferred to *W. D. S. #19* and left this organization *6 June 1944*

He was last paid to include *See Prior Ind.*

by *See Prior Ind.*

Due United States; if nothing, so state

*See Remarks*

† Due soldier at date of *Transfer Acrd. Pay and Alw.*

ALLOTMENT STATUS

CLASS	AMOUNT DEDUCTED	DEDUCTED THROUGH
B	<i>See Remarks</i>	<i>See Status Ind.</i>
D		
E		
F		
N		

His character is *UNKNOWN*

Efficiency rating as soldier *UNKNOWN*

I have personally verified all entries in this indorsement.

*W. M. STERRETT* (Name)  
*MAC 1612 SCI* (Grade and organization)

This soldier reported *1944*, 19 (Organization to which transferred)  
 and was assigned to (see page 4).

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

\* W. D., A. G. O. Form No. 24-2  
 1 September 1944  
 10-36425-2  
 \*This form supersedes W. D., A. G. O. Form No. 24-2, 19 July 1943, which may be used until existing stocks are exhausted.

FINAL INDORSEMENT

(Company or detachment)

(Place)

To The Adjutant General:

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

(Grade) (Organization)  
 was separated from the service by reason of (State specific cause. See par. 37c.)

*AR 345-125* on (Date)

at (Place) authority

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

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

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

His character is

Efficiency rating as soldier

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

Due United States; if nothing, so state

† Due soldier at date of

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

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

Receipt of Discharge Certificate is acknowledged.

Signature of Soldier:

I have verified the foregoing entries.

Name signed

Name typed or printed

(Grade and organization)

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

INSERT TO SERVICE RECORD

9th Ind

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

Fort Sheridan, Illinois 3 June, 1946

To CO RS #7 1612 SCU this sta

This soldier was transferred to your command

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

He was last paid to include 30 April, 1946

by James Lt Col FD

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

Due United States; if nothing, so state

Nothing

ALLOTMENT STATUS

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

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

His character is UNKNOWN

Efficiency rating as soldier UNKNOWN

I have personally verified all entries in this indorsement.

*T. I. Roberts*

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

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

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

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

Ind.

To \_\_\_\_\_, 19\_\_\_\_

This soldier was transferred to \_\_\_\_\_  
per \_\_\_\_\_ and left this organization \_\_\_\_\_, 19\_\_\_\_

He was last paid to include \_\_\_\_\_, 19\_\_\_\_

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

Due United States; if nothing, so state

† Due soldier at date of \_\_\_\_\_

ALLOTMENT STATUS

CLASS	AMOUNT DEDUCTED	DEDUCTED THROUGH
B		
D		
E		
F		
N		

His character is \_\_\_\_\_

Efficiency rating as soldier \_\_\_\_\_

I have personally verified all entries in this indorsement

(Name)

(Grade and organization)

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

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

# INSERT TO SERVICE RECORD

Ind. 8

HEADQUARTERS THIRD REPLACEMENT DEPOT  
 APO 872, U. S. Army, dated 10 MAY 1946  
 TO: Commanding Officer, War Department  
 Separation Center, U. S. A.

This soldier was trfd to your command per  
 MO 8469 dated 10 MAY 1946  
 and left this organization MAY 16 1946  
 He was last paid to include Apr 46  
 by Jones Lt Col  
 Due United States:

SEE REMARKS FINANCIAL

Allotments:

CLASS	AMOUNT	DEDUCTED THROUGH
F	<u>22</u>	Date last paid
E		Date last paid
N	<u>50</u>	Date last paid
B		Date last paid

Due sol at date trfd: Accr pay and alws  
 His character is: UNKNOWN  
 Efficiency rating as soldier: UNKNOWN  
 I have personally verified all entries in  
 this indorsement.

*L A Hayes*

L A HAYES CAPT AGD  
 Assignment Officer

m his  
 9  
 h has  
 19  
 as mono-  
 tate.  
 25259-1

Ind.

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

ALLOTMENT STATUS

CLASS	AMOUNT DEDUCTED	DEDUCTED THROUGH
B		
D		
E		
F	<u>22</u>	<u>04-22</u>
N	<u>50</u>	<u>03-30</u>

† Due soldier at date of \_\_\_\_\_  
 His character is \_\_\_\_\_  
 Efficiency rating as soldier \_\_\_\_\_  
 I have personally verified all entries in this indorsement

(Name)

(Grade and organization)

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

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

Due United States; if nothing,

° Due soldier at date of \_\_\_\_\_

This soldier <sup>has</sup> ~~has not~~ a Class E allotment running which has been deducted from his pay to include \_\_\_\_\_, 19\_\_\_\_

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

His character is \_\_\_\_\_

Efficiency rating as soldier \_\_\_\_\_

I have personally verified all entries in this indorsement.

(Name)

(Grade and organization)

This soldier reported \_\_\_\_\_, 19\_\_\_\_

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

†Strike out words not applicable.

16-25259-1

Ind.

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

ALLOTMENT STATUS

CLASS	AMOUNT DEDUCTED	DEDUCTED THROUGH
B		
D		
E		
F	02-204	00, 204
N	02-204	02, 204

† Due soldier at date of \_\_\_\_\_

His character is \_\_\_\_\_

Efficiency rating as soldier \_\_\_\_\_

I have personally verified all entries in this indorsement

(Name)

(Grade and organization)

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

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

16-36425-3 GPO

Initials

Name, grade, and organization  
(Typewritten or printed)

J R WOSLEY, WO(IG) USA

Pt Logan Reception Center

O A SMITH, WO1A, USA, Asst. Pers. O.

Hq IRTC, Camp Blanding, Fla.

M. H. PEDERSON, CAPT., INF.

ASST. PERS. OFF.

HQ IRTC CAMP BLANDING, FLA.

V. PETERS, 2ND LT., INF., ASST. PERS. O.

HQ IRTC, CAMP BLANDING, FLA.

MARY J. NILES

1st Lt., WAC, Pers. O.

Robert D Bedwell 2nd Lt  
Asst Pers Officer T.P.S.

VIVIAN R. BUELL

1st Lt., WAC

Herbert F. Hobbs  
Capt. INF.

HAROLD E. LINDER

WO1G 2US

Charles W. Tate

WO1G USA (RPO)

J. F. Buffkin Jr., 1st Lt Inf.  
508 Pchnt InfW. E. McDaniel  
1st Lt 508 PCHEUGENE MITON  
1st Lt. Inf.VO PAUL CAPT. I.A.  
R E 8409





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POST WW II

POST WW II