

**REPORT OF BURIAL**  
TM 10-630 AND -AR 30-1815

1 July 1944

REBURIAL

Date  
15377861  
~~15377861~~  
Serial No.

229

Clapper John A. Cpl  
 Last Name First Initial Rank  
Infantry 501 Para Inf Reg P Unknown  
 Unit Organization  
France P.R. 6 Jun 44 Unknown KTA  
 Place of Death Date of Death Cause of Death  
1 July 1944 (Reinterred) Blosville France  
 Time and Date of Burial Name of Cemetery Name or Coordinates of Location  
36 2 E Peg  
 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?

BY SOLDIER'S INDIVIDUAL PAY RECORD  
DISINTERRED FROM COORD: 319:956

What means of identification were buried with the body?

**REBURIAL**

GRS FORM # 1

**Previously buried in isolated grave  
located at 319-956**

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

Who is buried on:  
 Deceased's Right: Disbrow, Frank 024526 Capt 90th Div 37  
 Name Serial No. Rank Organization Grave No.  
 Deceased's Left: Bailey, Herman F. 34593480 Pfc 101st A/B Div 35  
 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 Clarence Clapper  
 Name  
Rfd # 1, Barberton, Ohio.  
 Address  
 Religion Unknown

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

Pen, fountain  
CURRENCY: 200 Francs

Signature of Officer or other person reporting burial

Dale C Sherwood  
Verified by G.R.S. Officer

DALE C. SHERWOOD  
1st. Lt., QMC

File  
1-24-45  
rk

E-2-S

Serial No. 15371861 Name Clapper, John A.  
 Grade Cpl. Rank \_\_\_\_\_  
 Organization Inf.  
 Address \_\_\_\_\_  
 Nearest Relative Clarence Clapper (Father)  
 Address RD #1 Baberton Ohio  
 Killed in Action Yes Died of Disease \_\_\_\_\_  
 Date 7/1/44 Hospital \_\_\_\_\_  
 Battle Area \_\_\_\_\_ Information \_\_\_\_\_

Place of Burial Monarch Cemetery  
 Point of Coordination \_\_\_\_\_  
 Description of Body \_\_\_\_\_

Members Missing \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signed Abraham Shyby

1

DISINTERMENT DIRECTIVE

*M/10*

SECTION A — NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER 3508 00863	DATE 15 11 47 DAY MONTH YEAR
NAME CLAPPER JOHN A		SERIAL NUMBER 15377861	RANK CPL	ARM 1	DATE OF DEATH DAY MONTH YEAR
CEMETERY BLOSVILLE - CARENTAN				1	DISPOSITION OF REMAINS 3322 03 CODE DIST. PT.
PLOT E	ROW 2	GRAVE 36	COUNTRY FRANCE	CAUSE OF DEATH 1	

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE ARLINGTON NATIONAL CEMETERY FORT MYER, VIRGINIA	NAME AND ADDRESS OF NEXT OF KIN CLARENCE A. CLAPPER (FATHER) RURAL DELIVERY #1, BOX #344 BARBERTON, OHIO
---	---

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME Clapper, John A	SERIAL NUMBER 15377861	RANK Cpl	DATE OF DEATH Utd	DATE DISTINTERRED 16 Dec, 1947
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	ORGANIZATION USAGF	RELIGION Utd	IDENTIFICATION VERIFIED BY R. W. GANSEL 1st Lt, QMC NAME AND TITLE	

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Uniform	CONDITION OF REMAINS Advanced Decomposition
OTHER MEANS OF IDENTIFICATION None	
MINOR DISCREPANCIES None	
REMAINS PREPARED AND PLACED IN CASKET	

DATE 19 January, 1948	BY Henry F. Fergande
CASKET SEALED BY Henry F. Fergande	EMBALMER (Signature) <i>Henry F. Fergande</i>
CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY E. N. CIAMPO, 1st Lieut, FA
DATE 19 Jan 48 BY Henry B. Ryder Jr	

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

*E. N. Ciampo*  
E. N. CIAMPO, 1st Lieut, FA  
SIGNATURE OF GRS INSPECTOR

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

# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

FROM US MC Blossville		TO Casketing Point "A"-Cherbourg	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER Private Michael Stranze	
SIGNATURE OF SHIPPER H. E. ROSEN, 1st Lt, QMC	DATE 16 Jan 48	SIGNATURE OF RECEIVER E. N. CIAMPO, 1st Lt, PA	DATE 16 Jan 48

## 2. SHIPPED

FROM Casketing Point "A"-Cherbourg		TO Port Unit - Cherblurg	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER A A Cain	
SIGNATURE OF SHIPPER E. N. CIAMPO, 1st Lt, PA	DATE	SIGNATURE OF RECEIVER <i>[Signature]</i> JOHN E. HENDRY JR., Major, CAC	DATE

## 3. SHIPPED

FROM PORT UNIT CHERBOURG		TO NYPOE	
KIND OF CONVEYANCE USAT MC CARLEY		NAME OF CONVOYER ROBERT V. SCHNEIDER 1st Lt, TC	
SIGNATURE OF SHIPPER <i>[Signature]</i> JOHN E. HENDRY JR., Major CAC	DATE 10 March 1948	SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE 10 March 1948

## 4. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER NEVEE	DATE	SIGNATURE OF RECEIVER <i>[Signature]</i> JAMES L. MCKINNON COLONEL, T. C.	DATE APR 25 1948

## 5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE FOBI WAEK AIBOINIA		NAME OF CONVOYER Sgt John E. Callahan	
SIGNATURE OF SHIPPER JAMES L. MCKINNON COLONEL, T. C.	DATE APR 9 - 1948	SIGNATURE OF RECEIVER CECILENE V. CALLEB (LALHEB)	DATE 7/10/48

## 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

WAR DEPARTMENT  
THE ADJUTANT GENERAL'S OFFICE

WASHINGTON 25, D. C.

REPORT OF DEATH

DATE 11 Sept. 1944  
rm 4627

FULL NAME <i>243</i> Clapper, John A.				ARMY SERIAL NUMBER 15 377 861				GRADE Cpl.					
HOME ADDRESS <i>ps</i> Barberton, Ohio				ARM OR SERVICE Infantry				DATE OF BIRTH 4 Dec '23					
PLACE OF DEATH European Area				CAUSE OF DEATH Killed in action				DATE OF DEATH 6 Jun 44					
STATION OF DECEASED European Area				DATE OF ENTRY ON CURRENT ACTIVE SERVICE 15 Dec '42				LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS					
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mr. Clarence Clapper, father, RD #1, Barbarton, Ohio													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mr. Clarence Clapper, father, address shown above Mrs. Hazel Clapper, mother, same as father's.													
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
											<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

ADDITIONAL DATA AND/OR STATEMENT

\*Jump Status.

The individual named in this report of death is held by the War Department to have been in a missing in action status from 6 June 44, until such absence was terminated on 31 August 44, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from the Commanding General of 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

BATTLE

NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:

*James W. Reinhart*  
James W. Reinhart.

ADJUTANT GENERAL

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

13454

REPORT OF DEATH

DATE 11 Sept. 1944

rm 4627

FULL NAME <b>Clapper, John A.</b>		ARMY SERIAL NUMBER <b>15 377 861 ✓</b>	GRADE <b>Cpl.</b>										
HOME ADDRESS <b>Barberton, Ohio</b>		ARM OR SERVICE <b>Infantry</b>	DATE OF BIRTH <b>4 Dec '23</b>										
PLACE OF DEATH <b>European Area</b>	CAUSE OF DEATH <b>( Killed in action )</b>		DATE OF DEATH <b>6 Jun 44</b>										
STATION OF DECEASED <b>European Area</b>		DATE OF ENTRY ON CURRENT ACTIVE SERVICE <b>15 Dec '42</b>	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS										
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) <b>Mr. Clarence Clapper, father, RD #1, Barbarton, Ohio</b>													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) <b>Mr. Clarence Clapper, father, address shown above Mrs. Hazel Clapper, mother, same as father's.</b>													
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
												X	*X



ADDITIONAL DATA AND/OR STATEMENT

\*Jump Status.

The individual named in this report of death is held by the War Department to have been in a missing in action status from 6 June 44, until such absence was terminated on 31 August 44, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from the Commanding General of 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

BATTLE

NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:  
*James W. Reinhart*  
James W. Reinhart.

ADJUTANT GENERAL

Bd ~~XXXXXXXXXX~~  
w

134514

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

—BATTLE CASUALTY REPORT

NAME			SERIAL NUMBER			GRADE		ARM OR SERVICE		REPORTING THEATRE	
CLAPPER JOHN A			15377861			CPL		INF		ETO	
PLACE OF CASUALTY			DATE OF CASUALTY			FLYING OR JUMPING STAT		TYPE OF CASUALTY		SHIPMENT NUMBER	
			DAY	MONTH	YEAR						
FRANCE			06	JUN	44	J		MIA		107	

NAME AND ADDRESS OF EMERGENCY ADDRESSEE

THE INDIVIDUAL NAMED ABOVE DESIGNATED THE FOLLOWING 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.

MR.-MRS.-MISS	FIRST NAME	MIDDLE INITIAL	LAST NAME	RELATIONSHIP
	MR CLARENCE CLAPPER			FATHER
NO. AND NAME OF STREET		CITY	COUNTY	STATE
RURAL DELIVERY NUMBER ONE		BARBERTON OHIO		

REMARKS:

CORRECTED COPY

28 JUNE 44 AMB



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

REPORT NOT VERIFIED \_\_\_\_\_ NO FORM 43 \_\_\_\_\_ NO CAS. BR. FILE \_\_\_\_\_ CHECKED BY \_\_\_\_\_ REVIEWED BY ALC

THIS SPACE FOR USE OF MACHINE RECORDS BRANCH, A.G.O.

ACCT. AREA	CASUALTY STATUS	ORIGINAL CAS. DATE			MESSAGE NO.	LATEST CAS. DATE			REFERENCE AREA	CREW POS.	RESIDENCE		COMP	RACE											
		DAY	MO.	YR.		DAY	MO.	YR.			STATE	COUNTY													
34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59

DISTRIBUTION

COPIES FURNISHED:

- AIR ADJUTANT GENERAL
- AMERICAN RED CROSS
- ARMY EFFECTS BUREAU
- ASST. CHIEF OF STAFF, G-1
- BUREAU OF PUBLIC RELATIONS
- CASUALTY PAY RECORDS BR., O.F.D.
- CHIEF OF ARM OR SERV. CONCERNED
- CHIEF OF STAFF
- CHRONOLOGICAL UNIT, CAS. BR.
- CHIEF, P.O.W. BR., M.I.S., W.D.G.S.

- CHIEF, WAR BOND DIVISION
- CHIEF, WAR BOND OFFICE
- C.G., ARMY GROUND FORCES
- C.G. SERVICE COMMAND
- DIR. OF SPECIAL SERVICES DIV.
- DIRECTOR, W.A.C.
- ENLISTED BRANCH, A.G.O.
- FINANCE OFFICER, U. S. ARMY, WASH., D.C.
- MACHINE RECORDS BRANCH, A.G.O.
- OFFICE OF DEPENDENCY BENEFITS

- OFFICERS BRANCH, A.G.O.
- P.O.W. INFO. BUREAU, O.P.M.G.
- SEAMEN'S RECORDS & WELFARE UNIT U.S.C.G.
- SOCIAL SECURITY BOARD
- SURGEON GENERAL
- THE ADJUTANT GENERAL
- U. S. EMPLOYEE'S COMPENS. COMM.
- WAR SHIPPING ADMINISTRATION
- WILLS UNIT, CASUALTY BRANCH

ORDER FOR SHIPMENT

Mrs. Miriam Clapper

SHIP TO:

c/o Russell Ware

Effects of:

Cpl. John A. Clapper

R. D. #2

Name

18877861

Barberton, Ohio

ASN

184814 D

Case No.

Wt.

DATE 10 May 1945

JRM:VJ:cl

FOR: Effects Quartermaster

REMARKS:

         Inclose Bureau Check  
         Acct. No.           
         Amount           
         Inclose "Valuables" item  
         Ship "Valuables" item(s)

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

ROUTING:

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

*1 Ctu*

REMARKS:

Franked FRANKEL  
Est. Exp. Chgs.           
Est. Frt. Chgs.           
No. of packages   7  

MAY 14 1945

*AG*

Shipping Clerk



Date 18 May 1948

TO: Clarence A Clapper  
RD #1 Box 344  
Barberton, Ohio

The authorized inscription for a Government headstone of the general type (furnished for all decedents except those who served only during the Civil and Spanish-American Wars) includes: (1) The State from which the veteran came; (2) religious emblem in a small circle above the inscription on the face of the headstone; and (3) the dates of birth and death.

In order that the appropriate information, as desired by the next of kin, may be shown on the headstone for the decedent whose name is listed below, it is requested that you fill in the proper spaces indicated below the data called for, and RETURN THIS FORM PROMPTLY TO THE

**Executive Officer**  
**Arlington National Cemetery**  
**Fort Myer, Virginia**

Superintendent of Cemetery or Commanding Officer of Post

If this form is not returned to the Superintendent within fifteen (15) days from date of mailing, the headstone will be ordered with the data as to religious emblem, State and date of birth inscribed thereon as shown in the official records, and NO CHANGE WILL BE MADE AT A LATER DATE AT GOVERNMENT EXPENSE.

*293* To be filled in by Superintendent or Commanding Officer

Name of Veteran John A Clapper

Rank, etc. Cpl U.S. Army

Grave or lot No. 2071 Section 12

Date of death \_\_\_\_\_

Date buried 4 May 1948

To be filled in by Next of Kin

State desired Ohio

Religious emblem desired Protestant Faith  
(Latin Cross for Christian Faith, Star of David for Hebrew Faith)

Date of birth Dec. 4, 1923

Address of kin Mr. & Mrs. C.A. Clapper R.D. 1. Box 344 Barberton Ohio

Signature Mr. & Mrs. C.A. Clapper Date May, 21, 1948

JUN 4 1948

*File 9...*

7/17

# RECEIPT OF REMAINS

DISTRIBUTION CENTER

ACR DISTRIBUTION CENTER, PHILA QM DEPOT

SUPERINTENDENT  
ARLINGTON NATIONAL CEMETERY  
FORT MYER, VIRGINIA

XXXXXX  
ROUTINE  
DAY LETTER

REMAINS CONSIGNED TO:

FIFTY-SIX (56) REMAINS DELIVERED TO ARLINGTON NATIONAL CEMETERY, FORT MYER, VA. AT APPROXIMATELY SEVEN A.M. TWENTY SEVEN APRIL ACCOMPANIED BY MILITARY ESCORT.

FRANK M. GREEN, JR.  
MAJOR, QMC.

SECTION  
BRANCH  
APR 27 10 25 AM '48  
ARLINGTON NATIONAL CEMETERY

I, THE UNDERSIGNED, DO HEREBY ACKNOWLEDGE RECEIPT OF THE REMAINS OF THE ABOVE-NAMED DECEASED

THIS 26 DAY OF April, 19 48  
DAY MONTH

Joseph I. Medley

WITNESS (Escort)  
9:45 A.M.

George E. Wilson

CONSIGNEE

Original signed receipt filed under "Astryke, Walter P. S/Sgt. SN 33626969"

File  
not  
received until  
21 May 48  
M  
RTR Branch

O.I. 3005		<b>INSPECTION CHECK LIST</b> (For Use at Distribution Point)					
Name CLAPPER, John A.		Rank Cpl.		Serial Number 15377861			
Source Mr. Clarence A. Clapper (Father) R. D. #1, Box #344, Barberton, Ohio		Consignee Supt., Arlington Nat. Cemetery Fort Myer, Va.					
SHIPPING CASE - General Appearance (Check ONLY Discrepancies)		Condition of Shipping Case (Check One) <input type="checkbox"/> Satisfactory <input checked="" type="checkbox"/> Unsatisfactory					
<input checked="" type="checkbox"/> FINISH (Exterior) <input type="checkbox"/> FINISH (Interior) <input type="checkbox"/> HANDLES <input type="checkbox"/> HANDLE BOLTS <input type="checkbox"/> STENCILING - NAMEPLATE <input type="checkbox"/> HEALTH PERMIT MARKER <input type="checkbox"/> HEALTH PERMIT NUMBER		Remarks  <i>J.F.</i>					
CASKET - General Appearance (Check ONLY Discrepancies)						Condition of Casket (Check One) <input type="checkbox"/> Satisfactory <input checked="" type="checkbox"/> Unsatisfactory	
<input checked="" type="checkbox"/> FINISH (Exterior) <input type="checkbox"/> HANDLES AND FASTENINGS <input type="checkbox"/> STENCILING - NAMEPLATE <input type="checkbox"/> CAM LOCKS (Sealing) <input type="checkbox"/> ODOR OR MOISTURE		Remarks  <i>J.F.</i>					
ROUTED THROUGH							
<input type="checkbox"/> MORTUARY OPERATING ROOM		<input type="checkbox"/> REPAIR SHOP					
Condition of Remains <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory		Casket Repaired <input type="checkbox"/> Yes <input type="checkbox"/> No					
Necessary Disinfection (Explain)		Casket Exchanged <input type="checkbox"/> Yes <input type="checkbox"/> No					
		Shipping Case Repaired <input type="checkbox"/> Yes <input type="checkbox"/> No					
		Shipping Case Exchanged <input type="checkbox"/> Yes <input type="checkbox"/> No					
		Remarks					
Time	Date	Signature or Mortician		Time	Date	Signature of Inspector	
					4/23/48	<i>J. Fleming</i>	
Remarks  <i><del>Inspected</del></i> <i>4/23/48 - 118</i> <i>Sat. for ship</i> <i>- Arlington -</i>							

WESTERN  
UNION

WESTERN  
UNION

WESTERN  
UNION

WESTERN  
UNION

C

WUZ35 7 COLLECT BARBERTON OHIO MAR 30 1032A

PHILADELPHIA QUARTERMASTER DEPOT ANS 29TH 900A ATTN AMERICAN  
GRAVES REGISTRATION DIVN

RECORDS CORRECT AND NO ADDITIONAL SERVICES

CLARENCE A CLAPPER.

1125A THANK YOU

*cleared  
Clapper Mar 9. 1948*

30 MAR 1948  
Q. M. DEPOT

# 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) PHILADELPHIA QUARTERMASTER DEPOT  
PHILADELPHIA, PENNA.

SECURITY CLASSIFICATION

ACTION TO:

- MR CLARENCE A CLAPPER
- RD #1 BOX #344
- BARBERTON, OHIO

GOVT PAID

PRECEDENCE FOR	
ACTION <b>DAY LETTER</b>	INFORMATION <b>O.I. 3005</b>
<input type="checkbox"/> ORIGINAL MESSAGE	
<input checked="" type="checkbox"/> REFERS TO ANOTHER MESSAGE IDENTIFICATION	CLASSIFICATION

INFORMATION TO: DIR AND CHECK ANY CHGS

WAR DEPARTMENT WILL DELIVER REMAINS OF LATE CORPORAL JOHN A CLAPPER  
 \_\_\_\_\_ IN NEAR FUTURE. RECORDS OF THIS OFFICE  
 INDICATE YOU WISH REMAINS INTERRED AT ARLINGTON NATIONAL CEMETERY  
FORT MYER, VIRGINIA. REQUEST IMMEDIATE CONFIRMATION BY  
 TELEGRAM COLLECT TO PHILADELPHIA QUARTERMASTER DEPOT ATTENTION AMERICAN  
 GRAVES REGISTRATION DIVISION PHILADELPHIA PENNSYLVANIA. NATIONAL CEMETERY  
 SUPERINTENDENT WILL NOTIFY YOU DATE AND HOUR FUNERAL SERVICES WILL BE HELD  
 IN SUFFICIENT TIME TO PERMIT YOUR ATTENDANCE AT YOUR OWN EXPENSE. CUSTOMARY  
 MILITARY HONORS AND RELIGIOUS SERVICES WILL BE PROVIDED AT CEMETERY. ~~VETERANS~~  
~~VETERANS ORGANIZATIONS AND OTHER PERSONNEL~~ ARRANGEMENTS FOR  
 ADDITIONAL PRIVATE SERVICES AND CEREMONIES OF YOUR CHOICE TO BE HELD AT  
 CONCLUSION OF REGULAR SERVICES MAY BE MADE BY YOU. IF YOU WISH SUCH ADDI-  
 TIONAL SERVICES OR CEREMONIES NOTIFY NATIONAL CEMETERY OF YOUR DESIRES.  
 NECESSARY YOU INCLUDE NAME OF DECEASED IN REPLY TELEGRAM. **THE \$75.00 MAXIMUM**  
**INTERMENT EXPENSES ALLOWANCE IS NOT AUTHORIZED WHEN FINAL BURIAL IS IN A**  
**NATIONAL CEMETERY.**

D. G. POLLARD  
LT. COL., QMC

SECURITY CLASSIFICATION		AUTHORIZATION	
ORIGINATING AGENCY		SIGNATURE	
SYMBOL	DATE-TIME GROUP	OFFICIAL TITLE	PAGE OF

# REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

Cpl. John A. Clapper, 15 377 861  
 Plot E, Row 2, Grave 36,  
 United States Military Cemetery  
 Blooville, France

9 September 1947

A		C	
B		D	

**DO NOT WRITE ABOVE THIS LINE**

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

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

## PART I

1. Clarence A. Clapper

(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

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

- |  |                                  |  |   |
|--|----------------------------------|--|---|
| <input type="checkbox"/> WIDOW             | <input type="checkbox"/> WIDOWER | <input type="checkbox"/> SON OVER 21 YEARS OLD     | <input type="checkbox"/> DAUGHTER OVER 21 YEARS OLD |
| <input checked="" type="checkbox"/> FATHER | <input type="checkbox"/> MOTHER  | <input type="checkbox"/> BROTHER OVER 21 YEARS OLD | <input type="checkbox"/> 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 \_\_\_\_\_ (FOREIGN COUNTRY) THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT \_\_\_\_\_ (LOCATION OF CEMETERY SELECTED)

4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT Fort Myer, Virginia (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.)

None

1010 P. ...  
...  
...

C. Jones  
11/13/47

OCT 22

*See*

**PART I (Continued)**

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

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

LAST NAME	FIRST NAME	MIDDLE INITIAL	
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS		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.

<i>Clarence A. Clapper</i> <small>(SIGNATURE OF NEXT OF KIN)</small>	<i>Barberton Ohio R.D. 1 Box 10344</i> <small>(STREET AND NUMBER)</small>
<i>Clarence A. Clapper</i> <small>(NAME PRINTED OR TYPED)</small>	<i>Barberton, Ohio, R.D. #1, Box # 344</i> <small>(CITY AND STATE)</small>

Subscribed and duly sworn to before me according to law by the above-named applicant this 11th day of April, 1947, at city (or town) of Akron, county of Summit, and State (or Territory or District) of Ohio

*J. W. Spin*  
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)  
*Notary Public*  
(OFFICIAL TITLE)

\*NOTE.—Page 4 is part of the notarial attestation.  
*my commission expires November 16, 1949*

QMGMR 314.6  
Graves Registration *V.S. Misc*  
( European )  
*H*

22 November 1946

SUBJECT: Burial Records *Con*

TO: Commanding Officer  
American Graves Registration Command  
European Theater Area  
APO 887, c/o Postmaster  
New York, New York

1. Request the burial reports and grave markers for the following decedents be changed to read as underscored:

CEMETERY: United States Military Cemetery Bloisville, France.

<u>NAME</u>	<u>RANK</u> <u>GRADE</u>	<u>SERIAL NO.</u>	<u>DATE OF</u> <u>DEATH</u>	<u>PLOT</u>	<u>ROW</u>	<u>GRAVE</u>	<u>ORGANIZATION</u>
<i>JG3</i> Clapper, John A.	CPL	15 377 861	<u>6 Jun 44</u>	E	2	36	<u>Co H, 501st</u> <u>Frecht Inf</u>
Cicora, Anthony J.	PVT	32 849 097	<u>16 Jul 44</u>	R	8	149	<u>Co K, 121st</u> <u>Inf Regt</u> <u>8th Inf Div</u>
Chenoweth, Frank E.	<u>PFC</u>	35 133 728	<u>19 Jul 44</u>	Y	4	69	<u>Co A, 10th</u> <u>Armd Inf Bn</u> <u>4th Armd Div</u>
Coffin, Arthur L.	<u>PVT</u>	31 218 523	<u>9 Jul 44</u>	H	3	52	<u>Serv - 8TH</u> <u>915th FA Bn</u> <u>20th Inf Div</u>

2. The records of this office have been reverified with the records of The Adjutant General, War Department, and have been found to be correct as indicated above.

FOR THE QUARTERMASTER GENERAL:

jev

MARTIN G. RILEY  
Major, QMG  
Assistant

VD



SEP. TRIAL TION RECORDS B RANCE

13 NOV. 46

DATE

NAME CLAPPER, JOHN A.

SERIAL NO 15377861

CEMETERY BLOSVILLE, FRANCE

PLOT E

ROW 2

GRAVE 36

LETTER FIELD

Correct Records to Read

ORG. - 501 PRCHT. INF.

DATE OF DEATH - 6 JUNE 44

J. A. Anderson  
SPECIAL CHECKER

File  
22 Nov 46  
Thoroughly  
Wax

ARMY SERVICE FORCE  
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Miriam Clapper

Cpl. John A. Clapper

c/o Russell Ware

Effects of:

Name 15077801

E. D. #2

ASN 150514 D

Barberton, Ohio

Case No.

Wt.

DATE 23 April 1945  
JRM:VJ:co

*V. Johnson*  
FOR: Effects Quartermaster

REMARKS:

x Inclose Bureau Check  
Acct. No. 43245  
Amount \$4.03 *enh*  
Inclose "Valuables" item  
Ship "Valuables" item(s)

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

ROUTING:

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

43245

134514

65874 enh.

April 30

45

Miriam Clapper

4.03

Four and 03/100

*[Signature]*

REMARKS:

FRANKED

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

MAY 3 1945

Shipping Clerk

134,514

ABANDONED TALLY NO.	7897 ✓
INV. DATE	16 June 1945 ✓
ORIG. NO. OF PKGS.	1
BOX NO.	
SHEET OF SHEETS	1
ORGANIZATION	Co. H 88th Avn

NAME *John A. Clapper*  
 A.S.N. *15377861* RANK *Pvt*

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

REMARKS  
*Mrs. C.A. Clapper*  
*R.D.#1*  
*Barberton Ohio.*

ATTACHMENTS  
 FORM #54  
 FORM #100  
*1 Inventory*  
*1 R. Label*

WEIGHT	G.I. REMOVED
	SHORTAGE OR PEVERSE
	IDENT. TAGS REMOVED
	READY

C.A.T.

*m/c*

PACKAGE DESCRIPTION

ARMY EFFECTIVE BUREAU INVENTORY

DECEASED	<input type="checkbox"/>
MISSING	<input type="checkbox"/>
P. O. W.	<input type="checkbox"/>
ABANDONED	<input type="checkbox"/>
TALLY NO.	7609
INV. DATE	30-APR-45
ORIG. NO. OF PKGS.	1
BOX NO.	
SHEET OF SHEETS	1
ORGANIZATION	Co. H. 501 <sup>st</sup>
PRCAT. I.N.F.	

134514  
28

#3

NAME JOHN A. CLAPPER

A.S.N. 15377861

RANK Cpl.

BELT		TOWELS & WASHCLOTHS		WINGS	
BELT, MONEY (NO MONEY)	X	CLOTHING	1	BAGS, CLOTH OR TRAVEL	
CLOTH, WASH	1	BRACELET IDENT.	1	BILLFOLD, (NO MONEY)	
COATS		BRUSHES		CASE	
FOOTWEAR, PR.		CAMERAS		FOOTLOCKER	
GLOVES, PR.		GLASSES		KIT, SEW, TLT, OR WRITING	
HANDKERCHIEFS		KNIVES		BOOKS	
HEADWEAR		LIGHTERS		BOOKS, ADDRESS	
JACKETS		MISC. INSIGNIA	X	BOOKS, PILOT LOG	
OVERCOATS		PEN, FOUNTAIN		DIARY (REMOVED FOR DUP)	
SCARFS		PENCIL, MECHANICAL		FILMS	
SHIRTS		PIPES		LETTERS	
SOCKS, PR.		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		SOUVENIR MONEY	X
				STATIONERY	
				TESTAMENTS	
				U.S. MONEY (AMOUNT)	.04

2/17/47

REMARKS Mrs + Mrs. C. A. Clapper  
R. D. 1. Barberton Ohio

ATTACHMENTS  FORM #54  FORM #100

WEIGHT	G.I. REMOVED
	SHORTAGE ON REVERSE
	IDENT. TAGS REMOVED

AD

SUBJECT: Report of transaction in disposing of the effects of

John A. Clapper, 15277281 late a  
(Name of deceased) (Army Serial Number)  
Corporal, Infantry who died  
(Grade) (Organization, Army or Service)  
on the 6 day of June, 1944, 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.G., 228 Hq., KOCM Depot, dated 25 September 1943, for the purpose of disposing of the effects of the above-named soldier, or person subject to military law, reports that:

a. No legal representative or widow of decedent being present at decedent's camp or quarters, effects of decedent were forwarded to this Summary Court-Martial.

b. Local debtors owed decedent's estate \$ none, of which the sum of \$ none was collected. (If nothing was found due or collected, state "None", otherwise attach itemized statement of 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 21 March 1945, pursuant to Special Orders 228, Headquarters KOCM Depot, dated 25 September 1943, the application or affidavit of Mrs. Clarence A. Clapper 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. Miriam Clepper of c/o Russell Ware (Name of person found entitled) R. D. #3, Barberton State of (Number, Street or Avenue) (City, Town or Village) Ohio, is the widow of the (Relationship or Capacity)

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



SHEET _____ OF _____ SHEETS	ARMY EFFECTS BUREAU INVENTORY		RECEIVED
BOX NUMBER <i>6</i>	ORIGINAL NUMBER OF PACKAGES <i>1</i>		MISSING P O W ABANDONED
TALLY NUMBER <i>5811</i>	INVENTORY DATE <i>23 Feb 1945</i>	CASE NUMBER <i>134514</i>	
EFFECTS OF <i>John A. Clapper</i>			RANK <i>Cpl.</i>
A.S.N. <i>15 379861</i>	ORGANIZATION		
PACKAGE DESCRIPTION <i># 1 pkg</i>			

CLOTHING	PERSONAL ITEMS	CONTAINERS
<input type="checkbox"/> BELT	<input type="checkbox"/> BRACELET, IDENTIFICATION	<input type="checkbox"/> BAGS, CLOTH
<input type="checkbox"/> BELT, MONEY (NO MONEY)	<input type="checkbox"/> BRUSHES	<input type="checkbox"/> BAGS, TRAVEL
<input type="checkbox"/> CLOTH, WASH	<input type="checkbox"/> CAMERAS	<input type="checkbox"/> BILLFOLD (NO MONEY)
<input type="checkbox"/> COATS	<input type="checkbox"/> GLASSES	<input type="checkbox"/> CASE, _____
<input type="checkbox"/> FOOTWEAR, PR.	<input type="checkbox"/> KNIVES	<input type="checkbox"/> FOOTLOCKER
<input type="checkbox"/> GLOVES, PR.	<input type="checkbox"/> LIGHTERS	<input type="checkbox"/> KIT, SEWING
<input type="checkbox"/> HANDKERCHIEFS	<input type="checkbox"/> MISC. INSIGNIA	<input type="checkbox"/> KIT, TOILET
<input type="checkbox"/> HEADWEAR	<input type="checkbox"/> MISC. ITEMS	<input type="checkbox"/> KIT, WRITING
<input type="checkbox"/> JACKETS	<input type="checkbox"/> PEN, FOUNTAIN ✓	<input type="checkbox"/> PAPERS AND MISC.
<input type="checkbox"/> OVERCOATS	<input type="checkbox"/> PENCIL, MECHANICAL	<input type="checkbox"/> BOOKS
<input type="checkbox"/> SCARFS	<input type="checkbox"/> PIPES	<input type="checkbox"/> BOOKS, ADDRESS
<input type="checkbox"/> SHIRTS	<input type="checkbox"/> RELIGIOUS ARTICLES	<input type="checkbox"/> BOOKS, NOTE
<input type="checkbox"/> SOCKS, PR.	<input type="checkbox"/> RIBBONS, DECORATION	<input type="checkbox"/> BOOKS, PILOT LOG
<input type="checkbox"/> TIES	<input type="checkbox"/> RINGS	<input type="checkbox"/> DIARY (REMOVED FOR DURATION)
<input type="checkbox"/> TOWELS	<input type="checkbox"/> TOBACCO	<input type="checkbox"/> FILMS
<input type="checkbox"/> TROUSERS, PR.	<input type="checkbox"/> TOILET ARTICLES	<input type="checkbox"/> LETTERS
<input type="checkbox"/> TRUNKS, PR.	<input type="checkbox"/> WATCH	<input type="checkbox"/> PAPERS, PERSONAL
<input type="checkbox"/> UNDERWEAR	<input type="checkbox"/> WINGS	<input type="checkbox"/> PHOTOS
		<input type="checkbox"/> SHOE SHINE ARTICLES
		<input type="checkbox"/> SHORT SNORTER
		<input type="checkbox"/> SOUVENIRS
		<input type="checkbox"/> SOUVENIR MONEY
		<input type="checkbox"/> STATIONERY
		<input type="checkbox"/> TESTAMENTS
		<input type="checkbox"/> U.S. MONEY (AMOUNT)

*zule*  
*gh*

REMARKS: <i>rechecked</i> <i>No information</i>	ATTACHMENTS: <input checked="" type="checkbox"/> FORM #54 <input type="checkbox"/> FORM #100 <i>1 yr label</i> <i>17 am 38</i>
---	--

C.A.T. <i>Father</i> <i>Clarence Clapper</i> <i>Roberton, Ohio</i>	WEIGHT	GI REMOVED
		<input checked="" type="checkbox"/> SHORTAGE ON REVERSE ✓
		<input type="checkbox"/> IDENT. TAGS REMOVED

Rec'd <sup>shortage</sup>  
200 Francs

I certify the above named items  
were not contained in the  
package when checked by me.

Brewer

Inventory Clerk

Inventory Clerk

Supervisor

Supervising Officer



# INVENTORY OF EFFECTS

(See AR 600-550)

Clapper                      John                      A.                      15371861  
(Last name)      (First name)      (Middle initial)      (Army serial number)

late a      Cpl                      Unknown  
(Grade)                      (Organization or arm or service)

who died on the unknown day of June, 1944

**CLASS I**—Saber, insignia, decorations, medals, campaign badges, watches, manuscripts, and other articles valuable chiefly as keepsakes.

NUMBER	ARTICLES	*PACKAGE NUMBER
	Pen, fountain ✓	

\*To be filled out only in case of shipment to The Adjutant General.

## CLASS II—Other effects

NUMBER	ARTICLES
	CURRENCY: 200 Francs      0
	<i>Sym # 211901</i>
	<i>R. Koller Capt FN</i>



**NAME**~~CLAPPER~~, JOHN A.

CPL

~~XXXX~~  
7861

BAY	PALLET	BOX	TALLY
61	27		7609
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
CTN			

WAR DEPARTMENT  
FINANCE DEPARTMENT

*File  
Jh*

RECEIPT FOR MISCELLANEOUS COLLECTIONS

22d Finance Disbursing Section

APO 350, U. S. Army

4 July 19 44

(Station)

(Date)

\$ 4.03

\* Received in cash of } Dale C. Sherwood, 1st Lt. QMC, O-1575157. GRO.  
\* ~~Collected on~~ You ..... from }

~~Four~~\*\*\* ..... Dollars and ~~Three~~\*\*\* ..... Cents,

on account of John A. Clapper, 15371861, Cpl. Org. unknown

KIA--date unknown

APP. TF 218916 ..... P. A. ....

which sum I have passed to the credit of the United States, and hold myself accountable therefor.

*R. J. Collico*  
R. J. Collico, Captain, P.D. DEPUTY  
Finance Department.

\*Strike out words not applicable.

Sym #211901

To be executed in triplicate.  
Ribbon copy to be sent to Chief of Finance.  
One copy to be furnished as receipt.  
One copy to be retained by Disbursing Officer.

# INVENTORY OF EFFECTS

(See AR 600-550)

Clapper, John A. 15377861  
(Last name) (First name) (Middle initial) (Army serial number)

~~xxxx~~ a Cpl, Co H, 501st Prcht Inf  
(Grade) (Organization or arm or service)  
**MIA**

~~xxxx~~ died on the 6th day of June, 19 44

**CLASS I**—Saber, insignia, decorations, medals, campaign badges, watches, manuscripts, and other articles valuable chiefly as keepsakes.

NUMBER	ARTICLES	*PACKAGE NUMBER
1	book, address ✓	
1	suit, swimming ✓	
1	wallet ✓	
1	letters & pictures folder, leather with ✓	
2	brushes ✓	
1	kit, sewing ✓	
1	scarf ✓	
1	kit, toilet ✓	

\*To be filled out only in case of shipment to The Adjutant General.

## CLASS II—Other effects

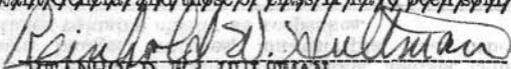
NUMBER	ARTICLES

CLASS II—Continued

NUMBER	ARTICLES
	Money { <ul style="list-style-type: none"> <li>Specie... \$.....</li> <li>Notes... \$.....</li> </ul>

I CERTIFY that the foregoing inventory comprises all the effects of the deceased whose name appears on the first page hereof, and that \*the effects were delivered to Effects Quartermaster, ETOUSA, Warehouse Division, Stanley Warehouse, US Forces, Liverpool, England.  
or beneficiary named by the deceased, so state)

\*the effects of class I have been forwarded to The Adjutant General and those of class II have been sold.

  
REINHOLD W. HULTMAN,  
2d Lt., Infantry

APO 472 c/o Pm NY NY  
(Station)

29 July, 1944  
(Date)

\*Strike out words not applicable.

HEADQUARTERS  
501st Parachute Infantry  
APO #472 United States Army

*file*  
*man*  
1 August 1944  
(Date)

SUBJECT: Disposition of Effects.

TO: Effects Quartermaster, ETOUSA, APO #507, G-14, United States Army.

1. Disposal of effects made on the following individual:

Name: John A. Clapper

Rank: Corporal

ASN: 15377861

Organization: Company H

Status: KIA 6th June 1944



2. Personal effects of above individual transported by motor vehicle on AUG 21 1944 to Effects Quartermaster, ETOUSA, Warehouse Division, Stanley Warehouse, United States Forces, Liverpool.

3. Following items transmitted herewith:  
None

4. Private debtors and creditors known to be as follows:  
None

-Incls.

1 WDAGO Form No. 54

*Kenneth K. Keehnen*  
KENNETH K. KEEHNEN,  
2d Lt., Infantry,  
Asst Pers Officer.

NAME CLAPPER, JOHN A. - T 7861

BAY	PALLET	BOX	TALLY
68	40		7897
TYPE OF PKG.		WHSE. SPACE	INVENTORIED
PKG			

Eff. QM Form 43

Serial No. 577861 Name CLAPPER, JOHN A.  
 Grade Rank  
 Organization  
 Address  
 Nearest Relative  
 Address  
 Killed in Action Died of Disease  
 Date Hospital  
 Battle Area Information  
 Place of Burial  
 Point of Coordination  
 Description of Body  
 Members Missing  
 Signed



ARMY SERVICE FORCES  
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mrs. Miriam Clapper

SHIP TO:

c/o Russell Ware

Cpl. John A. Clapper

Route #2

Effects of:  
Name

Barberton, Ohio

ASN

15377861

Case No.

134514 D

Wt.

DATE 30 June 1945

*C. W. ...*  
FOR: Effects Quartermaster

REMARKS: GHG:RW:mam

Inclose Bureau Check  
    Acct. No. \_\_\_\_\_  
    Amount \_\_\_\_\_  
 Inclose "Valuables" item  
 Ship "Valuables" item(s)

Remove G.I.  
 Note discrepancy in \_\_\_\_\_  
 Films removed  
 Diary removed  
 Laundry removed

ROUTING:

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

MARKS:

12/109  
Franked **FRANKED**  
Est. Exp. Chgs. \_\_\_\_\_  
Est. Frt. Chgs. \_\_\_\_\_  
No. of packages 1

JUL 7 1945

*mk*  
Shipping Clerk

INVENTORY OF PERSONAL EFFECTS

1 July 44

1 Book, New Testament

I certify that the personal  
effects listed above belong to:

CLAPPER, JOHN A.  
ASN 15377861  
Rank-Pvt

*Daniel Gibbs*  
DANIEL GIBBS  
Capt, QMC  
GR & E Officer  
52nd QM Base Depot

11 December 1946

Mr. Clarence Clapper  
Rural Delivery #1  
Barbarton, Ohio

Dear Mr. Clapper:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Corporal John A. Clapper, A.S.N. 15 377 861.

243  
The records of this office disclose that his remains are interred in the U. S. Military Cemetery Bloisville, plot E, row 2, grave 36. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located twenty-five miles southeast of Cherbourg, France, and is under the constant care and supervision of United States military personnel.

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

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN  
Major General  
The Quartermaster General

hh

DEC 11 2 10 PM  
O.C.M.C.  
RECORDS BRANCH

EC

Cpl. John A. Clapper, 15 377 861  
Plot E, Row 2, Grave 36,  
United States Military Cemetery  
Blosville, France

9 September 1947

Mr. Clarence Clapper  
Rural Delivery #1  
Barbarton, Ohio

Dear Mr. Clapper:

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.

874. W  
rj

SEP 17 10 30 AM '47  
MAIL & RECORDS SECTION



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

(S-4-7-45)  
JRM:WA:gg  
March 7, 1945

IN REPLY REFER TO 134514

Mr. Clarence Clapper  
R.F.D. # 1  
Barbarton, Ohio

Dear Mr. Clapper:

The Army Effects Bureau has received a small amount of money which belonged to your son, Corporal John A. Clapper.

This is the only property of Corporal Clapper received here to date; however, money ordinarily is transmitted from overseas by mail, in advance of other effects.

To make proper disposal of these funds, it is necessary that we have certain information regarding your son's family. I will appreciate your informing us whether he was married and, if so, the name and address of his widow.

In addition, if Corporal Clapper left a Will which has been probated, the original or a certified copy of the Letters Testamentary should be sent here for inspection. Any original papers that you send us will be returned promptly.

For your convenience in replying, there is inclosed an addressed envelope which needs no postage.

Yours very truly,

*P. L. Koob*

P. L. KOOB  
2nd Lt., Q.M.C.  
Chief, Correspondence Branch

*File 20*

1 Incl--Envelope

*John Clapper was married Dec. 24, 1943. His wifes address is Mrs Miriam Clapper R. D. 2, Barbarton O. 70 Russell Ware. There was no will that we know of except his insurance which was made to his father + mother. If any other information is needed, kindly advise us. Mrs. Clarence Clapper.*



ARMY SERVICE FORCES  
KANSAS CITY QUARTERMASTER DEPOT  
601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

JEM:VJ:co  
April 23, 1945

IN REPLY REFER TO 134514

Mrs. Miriam Clapper  
c/o Russell Ware  
R. D. #2  
Barberton, Ohio

Dear Mrs. Clapper:

The Army Effects Bureau has received from overseas some property of your husband, Corporal John A. Clapper.

I am inclosing a check for \$4.03 representing funds which belonged to him. The remainder of the property, consisting of a fountain pen, 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 husband.

Yours very truly,

A. G. SCHUMACHER  
1st Lt. Q.M.C.  
Asst. Chief, Admin. Division

1 Incl--  
Check

67

134514

JRM. VJ:cl  
May 11, 1948

Mrs. Miriam Clapper  
c/o Russell Ware  
R. D. #2  
Barberton, Ohio

Dear Mrs. Clapper:

The Army Effects Bureau has received some additional property of your husband, Corporal John A. Clapper.

These effects, contained in one carton, are being forwarded to you. If delivery is not made within thirty days from this date, please notify me so that tracer action may be instituted.

The action of this Bureau in transmitting personal effects does not, of itself, vest title in the recipient. Such property is forwarded for distribution according to the laws of the state of the soldier's legal residence.

Extending every sympathy, I am

Sincerely yours,

P. L. KOGB  
2nd Lt. G.M.C.  
Officer-in-Charge  
SJ Unit

134514

CHG:RW:nm  
July 3, 1945

Mrs. Miriam Clapper  
c/o Russell Ware  
Route #2  
Barberton, Ohio

Dear Mrs. Clapper:

The Army Effects Bureau has received from overseas some more property of your husband, Corporal John A. Clapper.

This property, consisting of a Testament is being sent you. If, for some reason, it has not been received within the next thirty days, this Bureau should be informed so that tracer may be instituted.

Yours very truly,

P. L. KOEB  
1st Lt. Q.M.C.  
Officer-in-Charge  
SJ Unit

5  
v  
s