

MEM

I CERTIFY that the typed names appearing above are the same as the original signatures (No. 4 copy of Form 1194 concerned)

USMC MARGRATEN
PLOT: F ROW 5 GRAVE 16
DATE OF BURIAL: 20 JAN 49
VERIFIED BY GRS OFFICER
WILLARD B. OWEN
CAPT INF

DISINTERMENT DIRECTIVE
Raymond T. Rodriguez
RAYMOND T RODRIGUEZ
DATE USA W 2107099

1

SECTION A - NAME AND BURIAL LOCATION OF DECEASED
DIRECTIVE NUMBER 4650 08082
DATE 15 04 48
DAY MONTH YEAR

NAME JEFFERSON CHARLES H SERIAL NUMBER 34639085 RANK SGT ARM 1
DATE OF DEATH DAY MONTH YEAR

CEMETERY MARGRATEN - AACHEN
DISPOSITION OF REMAINS 2 4601 80
CODE DIST. PT.

CAUSE OF DEATH 1
PLOT OR ROW GRAVE COUNTRY
K 12 280 HOLLAND

SECTION B - CONSIGNEE AND NEXT OF KIN FLAG SENT 21 JAN 49

NAME AND ADDRESS OF CONSIGNEE MARGRATEN, HOLLAND
NAME AND ADDRESS OF NEXT OF KIN ROBERTA JEFFERSON (WIFE)
POST OFFICE BOX 291
POPLARVILLE, MISSISSIPPI

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME CHARLES H. JEFFERSON SERIAL NUMBER 34639085 RANK SGT DATE OF DEATH DATE DISTINTERRED 2 JULY 48

IDENTIFICATION TAG ON REMAINS MARKER ORGANIZATION USAGF RELIGION P IDENTIFICATION VERIFIED BY PAUL W. HAMMOND CAPT QMC NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL MATTRESS COVER CONDITION OF REMAINS ADVANCED DECOMPOSITION POSTED SKULL - BODY COMPLETE

OTHER MEANS OF IDENTIFICATION NONE

MINOR DISCREPANCIES NONE

REMAINS PREPARED AND PLACED IN CASKET BY RICHARD S. HOLIVER EMBALMER
DATE 8 JULY 48

CASKET SEALED BY RICHARD S. HOLIVER EMBALMER (Signature) RICHARD S. HOLIVER

CASKET BOXED AND MARKED VERNON S. STORY CLERK RECORDER SHIPPING ADDRESS VERIFIED BY ALL PLATES TAGS MARKINGS VERIFIED BY: DON O. TOHILL 1/LT FA DATE 8/7/48

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

Don O. Tohill
DON O. TOHILL 1/LT FA
SIGNATURE OF GRS INSPECTOR
FILE
6 MAY 1949
REPARATION BRANCH MEM. DIV.

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

RECORD OF CUSTODIAN TRANSFER

att

29 March 1949

Sgt Charles H. Jefferson, ASN 34 639 085
Plot F, Row 8, Grave 16
Headstone: Cross
Margraten (Holland) U S. Military Cemetery

Mrs Roberta Jefferson
Post Office Box #291
Poplarville, Mississippi

Dear Mrs Jefferson:

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

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

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

Sincerely yours,

H. FELDMAN
Major General
The Quartermaster General

MAR 29 5 41 PM '49
COMG M&R

how

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

3-15-48
333-8
Rgen

Sgt Charles H. Jefferson, 34 639 085
Plot K, Row 12, Grave 280,
United States Military Cemetery
Margraten, Holland

28 November 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

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

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

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. Margraten, Holland
- 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY

(NAME AND LOCATION OF CEMETERY)

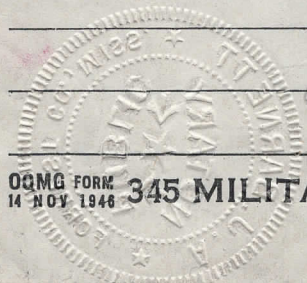
- 3. BE RETURNED TO _____, THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT _____ (LOCATION OF CEMETERY SELECTED)

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

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

none

D.D. Proc. 4-22-1948-M.K.



DDMG FORM 14 NOV 1946 345 MILITARY

18 MAR

PART I (Continued)

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

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

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

OR

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

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

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

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

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.

ROBERTA JEFFERSON PO BOX 291
 (SIGNATURE OF NEXT OF KIN) (STREET AND NUMBER)
Roberta Jefferson POPLARVILLE MISS
 (NAME PRINTED OR TYPED) (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 15th day of Dec., 1947 at city (or town) of Hattiesburg, county of Forrest, and State (or Territory or District) of _____

A. J. Barnett
 (SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)
Notary Public
 (OFFICIAL TITLE)
 * COMMISSION EXPIRES APR. 19, 1949

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

PART II—RELINQUISHMENT OF DISPOSITION AUTHORITY

If you are the next of kin and you desire to relinquish your disposition authority, please fill in PART II of this form.

I, THE WIDOW, (PLEASE INSERT RELATIONSHIP), AS THE NEXT OF KIN OF THE DECEASED NAMED IN PART I OF THIS FORM, DO HEREBY RELINQUISH MY RIGHTS TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED. THE NEXT EXISTING PERSON IN THE ORDER OF ELIGIBILITY OF DECEDENT'S SURVIVORS IS:

LAST NAME <u>JEFFERSON</u>	FIRST NAME <u>CARRIE</u>	MIDDLE INITIAL <u></u>
RELATIONSHIP TO THE DECEASED <u>MOTHER</u>		
NUMBER AND STREET <u>PO BOX 291</u>	CITY OR TOWN <u>POPLARVILLE</u>	STATE OR COUNTRY <u>MISS</u>

WHOM I UNDERSTAND SHALL HAVE THE RIGHT TO DIRECT FINAL DISPOSITION OF THE REMAINS OF THE DECEASED.

<u>ROBERTA JEFFERSON</u>	<u>APR 10 1947</u>
(SIGNATURE OF NEXT OF KIN)	(DATE)
<u>CARRIE JEFFERSON</u>	<u>PO BOX 291</u>
(NAME PRINTED OR TYPED)	(STREET AND NUMBER)
<u>POPLARVILLE MISS</u>	<u></u>
(CITY AND STATE)	

PART III

If you are NOT the next of kin authorized to direct the disposition of remains, please fill in PART III of this form.

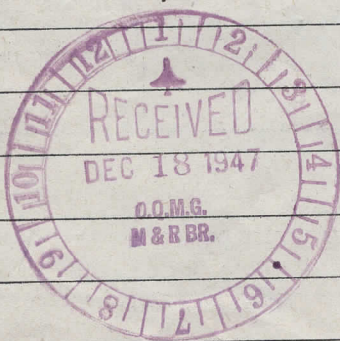
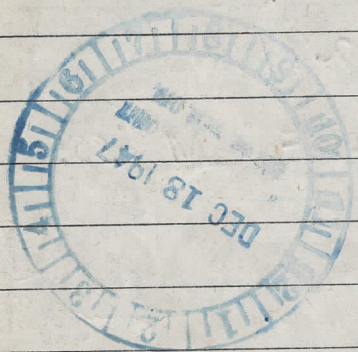
THIS IS TO NOTIFY YOU THAT I AM NOT THE NEXT OF KIN AUTHORIZED TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED NAMED ON PAGE 1 OF THIS FORM. THE FOLLOWING PERSON, TO THE BEST OF MY KNOWLEDGE, IS THE NEXT OF KIN TO WHOM THIS FORM SHOULD BE DIRECTED.

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

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

ADDITIONAL REMARKS AND INSTRUCTIONS

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



Sgt Charles H. Jefferson, 34 639 085
Plot K, Row 12, Grave 280,
United States Military Cemetery
Margraten, Holland

28 November 1947

Mrs. Roberts Jefferson
Box 291
Poplarville, Mississippi

Dear Mrs. Jefferson:

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 R. LARKIN
Major General
The Quartermaster General

Incls.

NOV 28 2 53 PM '47
U. S. O. M. G.
& RECORDS DIV.

gs)
MB

QMCYG 293

Jefferson, Charles H.
SN 34 639 085

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

5 November 1946

Mrs. Roberta Jefferson
Post Office Box 291
Poplarville, Mississippi

Dear Mrs. Jefferson:

Your letter concerning your husband, the late Sergeant Charles H. Jefferson, has been received in this office.

The War Department has now been authorized to remove the remains of our honored dead, at Government expense, to the final resting place which next of kin may designate.

When the necessary verification of records has been completed, a "Letter of Inquiry -- Return of World War II Dead" will be mailed to you. The response to this letter will constitute a formal expression of your detailed desires as next of kin. Until you receive this letter of inquiry, therefore, it will not be necessary for you to communicate with this office regarding this subject, unless you desire to report any change of address. The necessity for complete coordination of movement in many parts of the world makes it impossible, at this time, to estimate when the letter will be mailed. Every effort, however, will be made to shorten the time between now and the date of mailing and your desires will be acted upon with a minimum of delay.

FOR THE QUARTERMASTER GENERAL:

NOV 5 1 12 PM '46
MAIL & RECORDS BRANCH

Sincerely yours,

JAMES L. PRENN
Major, QMC
Assistant

REGISTRATION AND
RECORDS BRANCH

NOV 5 12 01 PM '46

MEMORIAL DIVISION

B
EJLP

(10)

✓

PO Box 291
Paplawville miss

War Department
Office of Quartermaster Gen.
Washington 25 D.C.

Dear Sir

In reply to your letter I
received a few days ago concerning
the final interment of my husband
Sgt Charles H. Jefferson A.S.N.
34639085 it is requested that
his body will be sent to me

Sincerely yours
Roberta Jefferson

PO Box 291
Paplawville miss

RECORDED
NOV 10 1945
RECEIVED
RECORDS SECTION

X

14 October 1946

Mrs. Roberta Jefferson
Box 291
Poplarville, Mississippi

Dear Mrs. Jefferson:

The War Department is most desirous that you be furnished information regarding the burial location of your husband, the late Sergeant Charles H. Jefferson, A. S. N. 34 639 085.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Margraten, Holland, plot K, row 12, grave 280. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

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

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

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

4 21 PM '46

MAIL & RECORDS BRANCH

M

~~NOV 5 01 PM '46
RECORDS BRANCH~~

EC

WAR DEPARTMENT

THE ADJUTANT GENERAL'S OFFICE

WASHINGTON 25, D. C.

243

REPORT OF DEATH

DATE 10 Mar 45

FULL NAME Jefferson, Charles H.		ARMY SERIAL NUMBER 34 639 085		GRADE Sgt.	
HOME ADDRESS Poplarville, Miss.		ARM OR SERVICE Infantry		DATE OF BIRTH 16 Nov 11	
PLACE OF DEATH European Area		CAUSE OF DEATH Wounds received in action		DATE OF DEATH 1 Mar 45	
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 27 Jul 43		LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS	
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Roberta Jefferson, wife, Box 291, Poplarville, Miss.					
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Roberta Jefferson, wife, same as above above Mrs. Carrie Jefferson, mother, General Delivery, Poplarville, Miss. Mrs. Lucille Jackson, sister, same as above					
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT	
YES	NO	YES	NO	YES	NO
				WAS DECEASED ON DUTY STATUS	
				YES	NO
				AUTHORIZED ABSENCE	
				YES	NO
				IN FLYING PAY STATUS	
				YES	NO
				OTHER PAY STATUS (SPECIFY BELOW)	
				YES	NO

ADDITIONAL DATA AND/OR STATEMENT

BATTLE NON-BATTLE

Evidence of death rec'd in WD 10 Mar 45.

FILE
MAR 23 1945
JEP

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

BY ORDER OF THE SECRETARY OF WAR.
J. Paul
ADJUTANT GENERAL

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

453534
Rm

REPORT OF DEATH

DATE

FULL NAME Jefferson, Charles H.		ARMY SERIAL NUMBER 34 639 085	GRADE Sgt.			
HOME ADDRESS Poplarville, Miss.		ARM OR SERVICE Infantry	DATE OF BIRTH 16 Nov 11			
PLACE OF DEATH European Area	CAUSE OF DEATH Wounds received in action		DATE OF DEATH 1 Mar 45			
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 27 Jul 43	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS			
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Roberta Jefferson, wife, Box 291, Poplarville, Miss.						
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Roberta Jefferson, wife, same as above above Mrs. Carrie Jefferson, mother, General Delivery, Poplarville, Miss. Mrs. Lucille Jackson, sister, same as above						
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
						I

ADDITIONAL DATA AND/OR STATEMENT

BATTLE NON-BATTLE

Evidence of death rec'd in WD 10 Mar 45.

COPIES FURNISHED:

S. G. C.	F. B. I.	F. O. U. S. A.
2. C. O. M. G.	G. P. D.	ARMY EFFECTS BUREAU
G. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BY ORDER OF THE SECRETARY OF WAR.

J. Paul
 ADJUTANT GENERAL

453534 ✓

RTB:VM:veg
September 26, 1945

Mrs. Roberta Jefferson ✓
Box 391 ✓
Poplarville, Mississippi ✓

Dear Mrs. Jefferson:

The Army Effects Bureau has received from overseas some personal effects of your husband, Sergeant Charles H. Jefferson.

I am inclosing a check for \$100.08, representing funds which belonged to him. The remainder of the property is being forwarded to you in one package.

If, by any chance, the property has not reached you at the expiration of thirty days from this date, please notify me and tracer will be instituted.

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

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

Yours very truly,

C. B. QUITMAN
2nd Lt., GIC
Chief, Files Branch

1 Incl-
Check

68

mb

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mrs. Roberta Jefferson

SHIP TO:

Box 291

Sgt. Charles H. Jefferson

Poplarville, Mississippi

Effects of:
Name

34639085

ASN

453534 D

Case No.

Wt.

DATE 26 September 1945

RTB:VM:veg

M. Boyle

FOR: Effects Quartermaster

REMARKS:

Inclose Bureau Check
Acct. No. 134976
Amount \$100.08 *ms*
Inclose "Valuables" item
Ship "Valuables" item(s)

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

ROUTING:

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

149127 emh

134976

453534

September 26

45

Mrs. Roberta Jefferson

100.08

One Hundred and 08/100

REMARKS:

SHIP DAMAGED PROPERTY

Tracked _____
Est. Exp. Chgs. _____
Est. Int. Chgs. _____
No. of packages _____

OCT 1 1945

Boyle
Shipping Clerk

EFFECTS INVENTORY

ARMY EFFECTS BUREAU

DECEASED	
MISSING	
P. O. W.	
ABANDONED	
UNKNOWN	

<input checked="" type="checkbox"/> INBOUND INVENTORY
<input checked="" type="checkbox"/> G. R. OR SUB GR LABEL
<input type="checkbox"/> WILL OR POWER OF ATTY.
<input checked="" type="checkbox"/> TALLY IN FORM 43

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

CONTAINERS ADDRESSED TO

none

INFORMATION

*Rel. unit.
Roberta Jefferson
Box 291
Poplarville, Miss.*

NAME AND STATUS VARIATIONS

CROSS REFERENCE

*9-22
Pop*

DAMAGED

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

TALLY NO. <i>77</i>	ORIG. NO. OF PKGS. <i>1</i>	EXAMINING DATE <i>3 Aug 45</i>	BOX NO. <i>73</i>	SHEET <i>1</i>
NAME <i>(Negro) Charles H. Jefferson</i>			A. S. N. <i>34639085</i>	
ORGANIZATION <i>784th Tank</i>			RANK <i>Pvt.</i>	CASE NO. <i>453534</i>
WAREHOUSE SPACE <i>707</i>	EXAMINED BY <i>White</i>	<input type="checkbox"/> DIARY REMOVED <input type="checkbox"/> PHOTO FILM REMOVED <input type="checkbox"/> MOTION PICTURE FILM REMOVED		
PACKAGE DESCRIPTION <i>#1 mfg.</i>	WEIGHT	PACKED BY <i>...</i>	SHIPPED	
		INSPECTED BY <i>L.B.</i>	DATE	BY WHOM

Serial No. 34639085 Name Jefferson, Charles W. 280

Grade _____ Rank _____

Organization 74th

Address _____

Nearest Relative _____

Address _____

Killed in Action _____ Died of Disease _____

Date Feb 28 45 Hospital D.O. W.

Battle Area Itzehou, Belgium Information _____

Place of Burial U.S. Mil. Cem. Margraten

Point of Coordination _____

Description of Body _____

Members Missing _____

KIA 280 Signed _____

CHARLES H JEFFERSON
34639085 43 44
ROBERTA JEFFERSON
BOX 291
POPLARVILLE MISS

RESTRICTED
INVENTORY - FORM

2 Mar 1945
Date

SUBJECT: Inventory of Personal Effects of:

Jefferson, Charles H. Cpl 34639085
(Last Name) (First Name) (MI) (Rank) (ASN)

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

The above named individual of 784th Tank
(Unit) (Organization)

was reported DOW about 28 Feb. 1945 1944.
Status (KIA, MIA, Hosp. etc.) (Date)

Designated Beneficiary if information readily accessible Roberta Jefferson
Box 291, Poplarville, Miss.

INVENTORY OF EFFECTS

- 48 Souve ir Bank Notes ✓
- 1 Billfold ✓
- 1 Cigarette Case ✓
- 2 Keys ✓
- 1 Knife ✓
- 1 Lighter ✓
- 1 Rifle Medall ✓
- 1 Money Order Receipt ✓
- 7 Photographs ✓
- 8 Religious Emblems ✓
- 1 Bible ✓
- 1 Pipe ✓

Money in the amount of \$100.03 has been turned into R. H. ORMEROD, Major, FD
211-179 (Name of finance office and
Form WDFD 38 enclosed.
symbol number)

Names and addresses of any Banks in which accounts may be carried:

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

Name _____
EDWIN J. DONOVAN
Rank & ASN 1st Lt. QMC O-1595473
611 QM Gr. Reg. Co.
Organization _____

Any additional pertinent information:

ARMY EFFECTS BUREAU
INVENTORY

93.31
45 3534 80

CASE NO.	
TYPED BY	dk
DATE	7/11/45
STATUS	DEC
NAME	Charles H. Jefferson
A.S.N.	3463908t
RANK	Pvt
ORGANIZATION	-
AMOUNT	100.08
ACCOUNT NO.	134976df
PAID-Check No.	149127H
LIST NO.	F 262
REMARKS	

ACCOUNTING INVENTORY

SUBJECT: Report of transaction in disposing of the effects of

Charles H. Jefferson

34639085

(Name of deceased)

(Army Serial Number)

late a

Sergeant

Infantry

(Grade)

(Organization, Army or Service)

who died

on the 1 day of March

, 1945

at European Area

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

1. Complying with A.W. 112, a Summary Court-Martial, convened at Kansas City Mo. Pursuant to S.O., 228 Hq., KCOM Depot, dated 25 September 1945, for the purpose of disposing of the effects of the above-named soldier, or person subject to military law, reports that:

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

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

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 receipts _____, 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

22 September 1945

, pursuant to Special Orders 228, Headquarters

KCOM Depot, dated 25 September 1943, the application or affidavit of

Mrs. Roberta Jefferson

for the effects of the above-named de-

ceased 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. Roberta Jefferson

(Name of person found entitled)

of

Box 291

Poplarville

(Number, Street or Avenue)

(City Town or Village)

State of

Mississippi

is the

widow

of the

(Relationship or Capacity)

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

(Signature of Summary Court Officer)

JOHN R. MURPHY, Colonel, Q.M.C.

ll