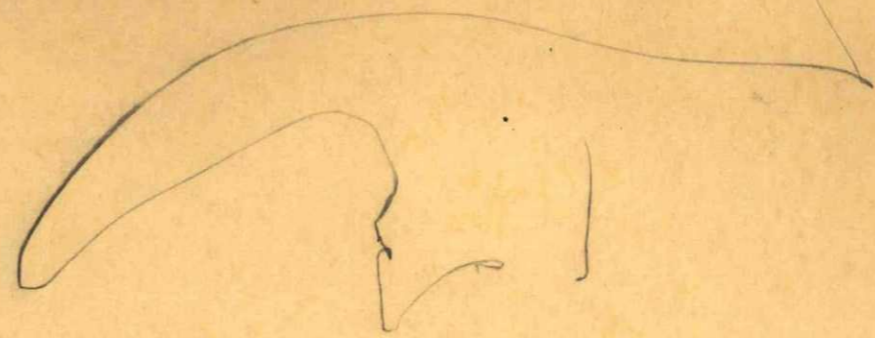


293 McMANUS, THOMAS W. JR.

2nd.lt. (075-0423) EUROPEAN AREA (CALIF.) 45dmt
AIR CORPS





REQ204101524 WNR-01-09-020-1-001-01-002
Transfer#:W092-70A0001 *SBH* Box:1 CC:00

ARR1-1065081451 Asset#: AAC1-23781219 Whole Container: N
C/F:MCMANNUS, THOMAS W. JR. 6 OF 15 FOIA 14-3189 Created: 04/10/2015
General Reference Temporary Loan of Records

Standard Standard (billed) N/A
TO: AARON ALTON
1600 SPEARHEAD DIVISION AVE FOIA/PA OFFICE BLDG 3 FL 1 RM 37 D
FT. KNOX KY 40122
P: (502)613-4202 F: (703)325-1844

DMS

DISINTERMENT DIRECTIVE

1

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
3572 01365

DATE
15 03 49
DAY MONTH YEAR

| | | | | | |
|----------------------|---------------|-------|-----|------|----------|
| NAME | SERIAL NUMBER | GRADE | ARM | RACE | RELIGION |
| MC MANUS THOMAS W JR | 0-750423 | 2 LT | 1 | 1 | 2 |

| | | | | |
|-----------------|------|-----|-------|-------------------------|
| CEMETERY | PLOT | ROW | GRAVE | DISPOSITION OF REMAINS |
| ST ANDRE FRANCE | C | 8 | 157 | 9100 CODE DIST. CTR. |

SECTION B - CONSIGNEE AND NEXT OF KIN

| | |
|---|---|
| NAME AND ADDRESS OF CONSIGNEE | NAME AND ADDRESS OF NEXT OF KIN |
| DOUGHTY-CALHOUN-OMERA FUNERAL DIRECTOR BAKERSFIELD, CALIFORNIA | MRS. ETHEL MC MANUS SHAVER-- 2004 VERDE STREET (MOTHER) BAKERSFIELD, CALIFORNIA |

SECTION C - DISINTERMENT AND IDENTIFICATION

| | | | | |
|--|---------------|----------|---|-------------------|
| NAME | SERIAL NUMBER | GRADE | DATE OF DEATH | DATE DISTINTERRED |
| MC MANUS, THOMAS W. JR. | 0-750423 | 2/Lt | | 13 July 1948 |
| IDENTIFICATION TAG ON | ORGANIZATION | RELIGION | IDENTIFICATION VERIFIED BY | |
| <input checked="" type="checkbox"/> REMAINS <input type="checkbox"/> MARKER | USAAF | CATHOLIC | HENRY A. GENTZEL Embalmer NAME AND TITLE | |

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

| | |
|------------------|----------------------------|
| NATURE OF BURIAL | CONDITION OF REMAINS |
| Mattress Cover | [Disturbing text redacted] |

OTHER MEANS OF IDENTIFICATION
None

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)
None

REMAINS PREPARED AND PLACED IN CASKET transfer case

DATE 14 July 1948 BY HENRY A. GENTZEL

CASKET SEALED BY H. F. PERGANDE EMBALMER (Signature)

CASKET BOXED AND MARKED SHIPPING ADDRESS VERIFIED BY All markings, tags and plates verified by:
DATE 23/9/48 BY R. COOK D. A. MAC KENZIE, Capt, INF.

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

JOHN W. BROWN, Capt, CAC.
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS
I certify that the entries on this form are true copies of the entries on Copy No. 4 of this Disinterment Directive which contains the names of the persons whose remains are typed hereon.

206

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

| | | | |
|--|----------------|---|----------------|
| FROM USMC SAINT ANDRE | | TO CASKEPING POINT "B" SAINT LAURENT | |
| KIND OF CONVEYANCE TRUCK | | NAME OF CONVOYER PVT TOPALI | |
| SIGNATURE OF SHIPPER R. C. CRISSON, Major, INF. | DATE 2/9/48 | SIGNATURE OF RECEIVER R. B. HOWARD, 1st Lt, INF. | DATE 2/9/48 |

2. SHIPPED

| | | | |
|--|------|---|------|
| FROM CASKEPING POINT "B" SAINT LAURENT | | TO CHERBOURG PORT UNIT | |
| KIND OF CONVEYANCE TRUCK | | NAME OF CONVOYER JOHN PALYOK JR | |
| SIGNATURE OF SHIPPER D. A. MAC KENZIE, Capt, INF. | DATE | SIGNATURE OF RECEIVER <i>[Signature]</i> JOHN PALYOK JR 1st Lt, FA. | DATE |

3. SHIPPED

| | | | |
|---|-----------------|--|---------------------|
| FROM CHERBOURG PORT UNIT | | TO NYPOE U.S.A.T. "CARROLL VICTORY" | |
| KIND OF CONVEYANCE USAT CARROLL VICTORY | | NAME OF CONVOYER ROBERT A. SALVADOR CAPT INF. | |
| SIGNATURE OF SHIPPER JOHN PALYOK JR, 1st Lt, FA. | DATE 20/6/49 | SIGNATURE OF RECEIVER <i>[Signature]</i> | DATE JUN 20 1949 |

4. SHIPPED

| | | | |
|----------------------|------|---|---------------------|
| FROM | | TO NYPE | |
| KIND OF CONVEYANCE | | NAME OF CONVOYER | |
| SIGNATURE OF SHIPPER | DATE | SIGNATURE OF RECEIVER <i>[Signature]</i> W. W. PREISCH LIEUT. COLONEL, TC. | DATE JUN 28 1949 |

5. SHIPPED

| | | | |
|---|---------------------|---|--------------------|
| FROM NYPE TRAIN | | TO DC 13 | |
| KIND OF CONVEYANCE | | NAME OF CONVOYER <i>[Signature]</i> | |
| SIGNATURE OF SHIPPER W. W. PREISCH LIEUT. COLONEL, TC. PORT TRANSPORTATION OFFICER | DATE JUN 30 1949 | SIGNATURE OF RECEIVER <i>[Signature]</i> | DATE JUL 5 1949 |

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 |

T. Lt. G. W. BATSON

RECEIPT OF REMAINS

DISTRIBUTION CENTER #13 SFPE OAKLAND ARMY BASE
OAKLAND 14 CALIFORNIA ROUTINE 19 JULY 1949

REMAINS CONSIGNED TO:

DOUGHTY-CALHOUN-OMERA
FUNERAL DIRECTOR
BAKERSFIELD, CALIFORNIA

REMAINS OF LATE ⁹³ 2ND LT THOMAS W. MC MANUS JUNIOR USAAF 0750423 BEING SHIPPED TO YOU ACCOMPANIED BY MILITARY ESCORT ON TRAIN FOUR AT & SF RAILROAD DUE TO ARRIVE BAKERSFIELD SIX THIRTY PM TUESDAY TWENTY SIX JULY. REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS AT STATION UPON ARRIVAL AND THAT YOU IMMEDIATELY PASS THIS INFORMATION ON TO NEXT OF KIN.

F. E. Hyll

F E HILL
MAJOR QMC
CHIEF AGR DIV

NAT
FILE
RECORDS ANNOTATED
DATE AUG 10 1949
NAME WIMBERLY
R & R BR.

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

D DOUGHTY-CALHOUN-O'MEARA

Derald W. Batson 1st A. VSAF
(Witness (Escort))

M. J. Doughty
(Consignee)

Incl 23

18276

REQUEST FOR REIMBURSEMENT OF INTERMENT OR TRANSPORTATION EXPENSES

(Read Explanation on Reverse Side before completing form)

DATE

28 July 1949

W W II

| | | | |
|--|----------------------------------|--|--|
| 2. NAME OF DECEDENT (Last, First, Middle Initial) MC MANUS, THOMAS W. JR | | 3. BRANCH OF SERVICE USAAF | 6. A. <input checked="" type="checkbox"/> INTERMENT EXPENSES (Civilian or Private Cemetery) B. <input type="checkbox"/> TRANSPORTATION EXPENSES (National or Post Cemetery) |
| 4. RANK OR GRADE 2 LT | 5. SERIAL NO. 0-750423 | 7. <input type="checkbox"/> IF WORLD WAR II DECEASED, CHECK BOX. <input type="checkbox"/> IF CURRENT DECEASED, ENTER DATE OF DEATH. | |

INSTRUCTIONS TO INITIATING INSTALLATION

Fill in items 1 through 7 and item 10.
Cross out item 8 or item 9, whichever is not applicable.
Stamp "Ribbon" copy "ORIGINAL."
Stamp carbon copies "COPY."

INSTRUCTIONS TO PERSONS SIGNING THIS FORM

This form is to be signed by the claimant and NOT by the funeral director.
Complete the original and three copies.
SIGN ORIGINAL ONLY.

AUG 1949
OAKLAND, CALIF.
STA. NO. 809

| | |
|--|---|
| 8. FILL IN THIS STATEMENT IF BOX "A" IS CHECKED I certify that the sum of \$ 125.45 was paid by me from personal funds in connection with the interment of the remains of the above-named decedent in the cemetery indicated below: NAME: Bakersfield Union Cemetery CITY OR COUNTY: Bakersfield, Kern Co. STATE: California. | 9. FILL IN THIS STATEMENT IF BOX "B" IS CHECKED I certify that the sum of \$ _____ was paid by me from personal funds in connection with the transportation of the remains of the above-named decedent from: (City, town, or place from which remains were shipped) TO: (Name and location of National or Post Cemetery) Ethel McManus Shaver 11. SIGNATURE OF CLAIMANT Ethel McManus Shaver Bakersfield, Calif. 12. ADDRESS (Street number or RFD, City and State) 2094 Verde St. 13. RELATIONSHIP TO DECEDENT Mother |
| 10. RETURN THE ORIGINAL AND THREE COPIES TO: COMMANDING OFFICER DISTRIBUTION CENTER #13 OAKLAND ARMY BASE OAKLAND 14, CALIFORNIA | |

REMARKS:

COPY

AUG 15 1949

EXPLANATION OF BOX "A"

OR TRANSPORTATION EXPENSES

(Read Explanation on Reverse Side before completing form)

1. When the remains are delivered for interment in a civilian or private cemetery, you are responsible for paying all interment expenses. In this connection, you are entitled to the allowance mentioned in paragraph 2 below.

2. An amount not to exceed \$75 is allowed by the Government toward actual interment expenses when final interment of the remains is in a private or civilian cemetery. No allowance is authorized toward interment expenses when interment is in a national or post cemetery.

3. The \$75 maximum allowance by the Government toward interment expenses includes but is not limited to the payment of one or more of the following items: Hearse hire from the railroad station to your home, the funeral home, church, cemetery, or any other place designated by you; vault; church services; newspaper notices; transportation for friends and relatives to and from cemetery; and the services of a funeral director.

4. Reimbursement by the Government is made only to the person who paid from his personal funds the expenses of or incident to interment in a private or civilian cemetery. Receipted bills are not required to accompany this form. Any expenses over and above the \$75 maximum must be borne by the person who incurred or paid the additional expenses.

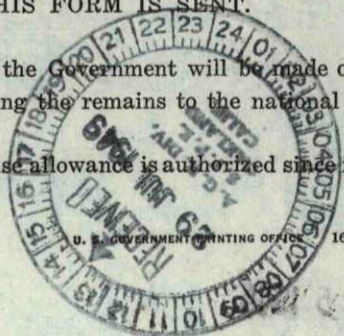
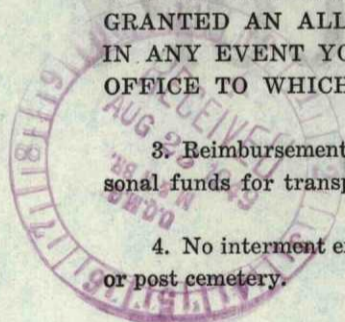
EXPLANATION OF BOX "B"

1. When the remains are delivered to you at Government expense prior to burial in a national or post cemetery, you are responsible for all additional expenses necessary to deliver the remains from that point to the national or post cemetery grave site. However, you may be entitled to an allowance for the cost of transporting the remains from your home to the national or post cemetery grave site subject to the conditions outlined in paragraph 2 below.

2. Reimbursement of transportation expenses is allowed only when the cost to the Government to deliver the remains to you is LESS than what it would have cost the Government to deliver the remains direct to the national or post cemetery of final interment. However, the amount which you may be allowed (the difference between cost of delivery to you and cost of delivery by the Government direct to the national or post cemetery) may not exceed the amount actually expended by you to deliver the remains to the cemetery grave site. **WHETHER OR NOT YOU WILL BE GRANTED AN ALLOWANCE IS DEPENDENT UPON AN AUDIT OF THIS REQUEST. IN ANY EVENT YOU WILL BE NOTIFIED OF ANY ALLOWANCE DUE YOU BY THE OFFICE TO WHICH THIS FORM IS SENT.**

3. Reimbursement by the Government will be made only to the person who paid from his personal funds for transporting the remains to the national or post cemetery grave site.

4. No interment expense allowance is authorized since interment is made ultimately in a national or post cemetery.



COMMANDING OFFICER
DISTRIBUTION CENTER #13
OAKLAND
OAKLAND

de

19 JULY 1949

DOUGHTY-CALHOUN-OMERA

ROUTINE

FUNERAL DIRECTOR

BAKERSFIELD, CALIFORNIA

REMAINS OF LATE 2ND LT THOMAS W. MC MANUS JUNIOR USAAF 0750423 BEING
SHIPPED TO YOU ACCOMPANIED BY MILITARY ESCORT ON TRAIN FOUR AT & SF
RAILROAD DUE TO ARRIVE BAKERSFIELD SIX THIRTY PM TUESDAY TWENTY SIX
JULY. REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS AT STATION
UPON ARRIVAL AND THAT YOU IMMEDIATELY PASS THIS INFORMATION ON TO
NEXT OF KIN.

F B HILL
MAJOR QMG
CHIEF AGR DIV

1949 JUL 20 AM 10:36

NY-031-R

WESTERN UNION



27 JUN 1949
A.G. WWU AA92 5 4 EX DL COLLECT

BERKELEY CALIF JUNE 27 1220P 1949

AMERICAN GRAVES REGISTRATION

DW OAKLAND ARMY BASE OAK

PLEASE DELIVER REMAINS OF THE LATE SECOND LIEUTENANT THOMAS
WILLIAM MCMANUS JR TO DOUGHTY-CALHOUN-OMEAVA FUNERAL
DIRECTOR BAKERSFIELD CALIF. ACCORDING TO ORIGINAL
INSTRUCTIONS. WILL APPRECIATE INFORMATION AS TO SCHEDULED
TIME AND PLACE OF ARRIVAL AS SOON AS POSSIBLE

mm

ETHEL MCMANUS SHAVER 2004 VERDE ST BAKERSFIELD CALIF.

2004.

103P..

1015

INSPECTION CHECKLIST

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

031R

| | | | | | |
|---|---------|---|--|------|------------------------|
| 9/2 NAME MC MANUS, Thomas W. Jr | | RANK 2 Lt | SERIAL NUMBER 0-750423 | | |
| SOURCE St Andre France | | CONSIGNEE Doughty-Calhoun-Omera Funeral Director Bakersfield, California | | | |
| SHIPPING CASE - General Appearance (Check ONLY Discrepancies) | | CONDITION OF SHIPPING CASE (Check one) <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY | | | |
| FINISH (Exterior) | | REMARKS USAAF JUL 26 1949 | | | |
| FINISH (Interior) | | | | | |
| HANDLES | | | | | |
| HANDLE BOLTS | | | | | |
| STENCILING - NAMEPLATE | | | | | |
| HEALTH PERMIT MARKER | | | | | |
| HEALTH PERMIT NUMBER | | | | | |
| CASKET - General Appearance (Check ONLY Discrepancies) | | CONDITION OF CASKET (Check one) <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY | | | |
| FINISH (Exterior) | | REMARKS | | | |
| HANDLES AND FASTENINGS | | | | | |
| STENCILING - NAMEPLATE | | | | | |
| CAM LOCKS (Sealing) <i>OK</i> | | | | | |
| ODOR OR MOISTURE | | | | | |
| 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 OF MORTICIAN | TIME | DATE | SIGNATURE OF INSPECTOR |
| | 7/12/49 | <i>[Signature]</i> | | | |
| REMARKS I certify that the casket and shipping case for these remains were inspected by me personally and are in perfect condition I further certify that I personally checked the name stencil and shipping case tag against the casket tag for these remains and the name as stenciled on the shipping case and as on the shipping case tag are exactly the same as shown on the tag fastened to the casket | | | | | |
| INSPECTION OFFICER | | | <i>[Signature]</i> INSPECTION OFFICER | | |

[Handwritten signature]

INSPECTION CHECKLIST

(USE USE AT OVERSEAS PORT, U.S. PORT, AND REEXAMINATION OFFICE)

| | | | |
|--|-----------------------|--|--------------------------|
| NAME MC MANUS, Thomas W. Jr | | RANK S Lt | SERIAL NUMBER O-10433 |
| SOURCE St Andre France | | CONSIGNEE Douglas-Dutton-Omer Funeral Director Bakersfield, California | |
| SHIPPING CASE - General Appearance (Check ONLY Discrepancies) | | CONDITION OF SHIPPING CASE (Check one) <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY | |
| HEALTH PERMIT NUMBER | HEALTH PERMIT MARKER | STENCILING - NAME/DATE | HANDLE BOLTS |
| HANDLES | FINISH (Exterior) | FINISH (Interior) | FINISH (Exterior) |
| REMARKS DEAP | | CONDITION OF CASE (Check one) <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY | |
| REMARKS | | CONDITION OF CASE (Check one) <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY | |
| DOOR OR MOISTURE | CAN LOCKS (Check one) | STENCILING - NAME/DATE | HANDLES AND FASTENERS |
| FINISH (Exterior) | FINISH (Interior) | FINISH (Exterior) | FINISH (Interior) |

| | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|
| ROUTED THROUGH | | OPERATING ROOM | |
| REPAIR SHOP | CASEY REPAIRED | REPAIR SHOP | CASEY REPAIRED |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| NO | YES | NO | YES |
| CASEY EXCHANGED | SHIPPING CASE REPAIRED | CASEY EXCHANGED | SHIPPING CASE REPAIRED |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| NO | YES | NO | YES |
| SHIPPING CASE EXCHANGED | REMARKS | SHIPPING CASE EXCHANGED | REMARKS |
| <input type="checkbox"/> | | <input type="checkbox"/> | |
| YES | | YES | |
| SIGNATURE OF INSPECTOR | DATE | SIGNATURE OF NOTICER | DATE |
| | | | |

REPAIRS
RECORDS BRANCH
MEMORIAL DIVISION
SEP 9 8 53 AM '49

I certify that the casket and shipping case for these remains were inspected by me personally and are in perfect condition. I further certify that I personally checked the name stencil and shipping case tag against the casket tag for these remains and the name as stenciled on the shipping case and as on the shipping case tag are exactly the same as shown on the tag fastened to the casket.

INSPECTION OFFICER: *D. H. [Signature]*
INSPECTION OFFICER: *[Signature]*

| | | | |
|--------------------------------------|---|---|-----------------------------------|
| ROUTING | JOINT MESSAGE FORM | | COMMUNICATIONS CENTER NO. |
| | | | DELIVER AND REPORT ANY CHARGES |
| SPACE ABOVE FOR COMMUNICATION CENTER | | | |
| FROM: (Originator) | DATE-TIME GROUP JUN 25 1949 | SECURITY CLASSIFICATION | |
| CHIEF AGR DIV SFPE OAB | PRECEDENCE FOR | | |
| ACTION TO: | ACTION | INFORMATION | |
| ETHEL MC MANUS SHAVER | DAY LETTER | | |
| 2004 VERDE ST | <input type="checkbox"/> BOOK MESSAGE | <input type="checkbox"/> ORIGINAL MESSAGE | |
| BAKERSFIELD, CALIF | <input type="checkbox"/> MULTIPLE ADDRESS | CRYPTOPRECAUTION | |
| INFORMATION TO: | REFERS TO MESSAGE BELOW | | |
| GRAVES | IDENTIFICATION | CLASSIFICATION | |
| | | UNCL | |

WE HAVE BEEN ADVISED REMAINS OF THE LATE **SECOND LIEUTENANT THOMAS W. MC MANUS JR** ARE ENROUTE TO THE UNITED STATES. OUR RECORDS INDICATE YOU WISH REMAINS DELIVERED TO **DOUGHTY-CALHOUN-OMERA FUNERAL DIRECTOR, BAKERSFIELD, CALIF**

PLEASE CONFIRM YOUR ORIGINAL INSTRUCTIONS OR **SUBMIT NEW DELIVERY** INSTRUCTIONS WITHIN FORTY EIGHT HOURS AFTER RECEIPT OF THIS MESSAGE AND FURNISH YOUR CORRECT MAILING ADDRESS BY TELEGRAM COLLECT TO CHIEF AMERICAN GRAVES REGISTRATION DIVISION OAKLAND ARMY BASE OAKLAND 14 CALIFORNIA. REPLY IS NECESSARY WITHIN THIS PERIOD SINCE IT WILL NOT BE POSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF FORTY EIGHT HOURS. WHILE DELIVERY OF THE REMAINS WILL BE MADE AS SOON AS PRACTICABLE AFTER RECEIPT FACTORS BEYOND OUR CONTROL MAY DELAY DELIVERY FOR SEVERAL WEEKS. HOWEVER AS SOON AS REMAINS ARE RECEIVED HERE AND IT IS POSSIBLE TO SCHEDULE THEM FOR DELIVERY YOUR FUNERAL DIRECTOR WILL BE NOTIFIED BY TELEGRAM OF RAIL ROUTING AND SCHEDULED TIME REMAINS WILL ARRIVE AT RAILROAD STATION. ALSO HE WILL BE REQUESTED TO FURNISH YOU THIS INFORMATION SO THAT YOU MAY COMPLETE FUNERAL ARRANGEMENTS. THIS TELEGRAM WILL BE SENT AT LEAST THREE DAYS PRIOR TO ACTUAL SHIPMENT FROM THIS DISTRIBUTION CENTER. PLEASE INSTRUCT FUNERAL DIRECTOR TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL. REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. IF YOU DESIRE MILITARY HONORS AT FUNERAL YOU SHOULD ASK ANY LOCAL PATRIOTIC OR VETERANS ORGANIZATIONS TO MAKE ARRANGEMENTS. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.

CHIEF AMERICAN GRAVES REGISTRATION DIVISION

| | | | |
|--|-------------------------------|----------------|----|
| | SECURITY CLASSIFICATION | PAGE | OF |
| | UNCL | 1 | 1 |
| DRAFTER'S NAME (and signature when required) | RELEASING OFFICER'S SIGNATURE | | |
| SYMBOL | TELEPHONE | OFFICIAL TITLE | |

gaw

RRE Form #39
13 Jul 48

Attached hereto correspondence and/or other identifying media of possible archival value, pertaining to:

223

| | | | | |
|-------------|--------------|-----------|--------|----------|
| MC MANUS | THOMAS | W JR | 2 LT | 0-750423 |
| (Last Name) | (First Name) | (Initial) | (Rank) | (ASN) |

3

RePatriated to the United States: 20 JUN. 1949

Incl #

STATION FILE

HEADQUARTERS
1ST QUARTERMASTER GROUP
APO 562, U. S. ARMY

Register #1233

3-12

REPORT OF INVESTIGATION OF ISOLATED GRAVE
or
UNBURIED REMAINS

Date 20 February 1945

*U.S. ~~Administrative~~

Case 1233

1. Name, Rank, ASN of deceased: **Thomas W. McManus Jr., 2nd Lt., AC 0-750423**
2. Organization of deceased: **416 Bomb. Group, Light.**
3. Means of identification: **By identification tags found on body by French.**
4. Cause of death: **Bomber Crash.** 5. Date of death: **6 August 1944.**
6. If isolated grave
 - a. Date of burial: **8 August 1944.** b. By whom buried: **Citizens of Louviers.**
 - c. Inscription on marker: **Thomas W. McManus Jr., O-750423, T43-44-A-C.
"Decede a St Pierre-du-Vauvray le 6 Aout 1944.**
7. Location of grave, ~~and other remains~~:
(Be specific, sketch on reverse)
Cemetery of Louviers (Eure).
8. Names of deceased and location of other *graves ~~in immediate vicinity~~:
**Standing at the foot of the grave at the left of
McManus was buried John H. Lapointe, Sgt., 32490064.**
9. Description and location of wrecked or abandoned vehicles or equipment in immediate vicinity:
None
10. Disposition of personal effects: (Itemize if possible)
None **24 Aug 45**
11. Other pertinent information: ~~Body remains buried~~ **no clothing remained on
body.**
(Use reverse side if necessary)
12. Information furnished by: **Delamare Maurice, Louviers, Secretary of
Mayor.**
(Name, title, address)
13. Names and addresses of other persons familiar with the case:
Lepage, Michel Louviers, used as an interpreter.

(OVER)

14. Action taken: Body disinterred from cemetery of Louviers (Eure) by
.3058 QM G.A. CO., Third Platoon on 19 February 1945.

Disinterment approved by: Lynford G. Chan Capt OMC

Disinterment and *burial/reburial made by:

Date of ~~burial~~/reburial: 21 February 1945

Place of *burial/reburial U. S. Military Cemetery: St. Andre

Plot C.... Row 8.... Grave 157....

Carl E. Redman
Signature of Investigator

2nd Lt OMC O-1594418
Rank, ASN

* Cross out where not applicable

Service Central de l'Etat-Civil, des Successions et
des Sépultures Militaires

FEUILLE de RENSEIGNEMENTS
concernant un décès de militaire de nationalité

Américain

NCM : THOMAS Prénoms W H C James y B
(en lettres capitales)

Né le à

Indications militaires connues.... { grade
régiment
N° matricule 0750423 T 4346-AC

Décédé le 6 août 1944 à St Pierre du Vauvray

Inhumé { le
à Cire de Louviers n° de tombe panneau 7
département

Adresse de
la famille {

ORIGINE DU RENSEIGNEMENT :

*Liste des provenant de la mairie
de Louviers du 18 - 11 - 44 -* **List of the Burgomaster
of Louviers of the 18.11.44.**

ELEMENTS d'IDENTIFICATION NOM DES TEMOINS :
LE CAS ECHEANT

RENSEIGNEMENTS SUR LE DECES:

Notification faite le

A Paris

le 16 - 11 - 45

Signature
et
cachet

LE MAIRE,

FORMATION :

NOMBRE MATRICULE
DU CORPS
ou de recrutement
avec indication
du bureau
et de la classe.

CORPS ET COMPAGNIE.

NOMS ET PRÉNOMS

GRADES

RENSEIGNEMENTS DIVERS.
(MÉGES, ÉVACUATIONS, DIAGNOSTIC, ETC.)

4

NUMEROS D'ORDRE
COLLER SUR LES ARMES ET LES SACS
en dépôt

1° Entrée :

2° Diagnostic :

3° Sortie : _____ Décès :

4° Venant de :

1° Entrée :

2° Diagnostic :

3° Sortie : _____ Décès :

4° Venant de :

1° Entrée :

2° Diagnostic :

3° Sortie : _____ Décès :

4° Venant de :

1° Entrée :

2° Diagnostic :

3° Sortie : _____ Décès :

4° Venant de :

1° Entrée :

2° Diagnostic :

3° Sortie : _____ Décès :

4° Venant de :

16

17

18

19

20

EU 02237

EUA036

RR UEPOG

UEP 50P 40/38 GOVT COLLECT

BAKERSFIELD CALIF M4 QP EPTP

SMITH ME DIV OQMG 04002RXXX 0400247

WASHDC

REQUEST REMAINS OF MY LATE SON SECOND LIEUTENANT THOMAS W

MCMANUS JR 0750423 BE RETURNED FOR BURIAL IN AMERICAN

LEGION PLOT AT UNION CEMETERY BAKERSFIELD CALIF. FUNERAL

DIRECTOR DOUGHTY-CALHOUN-OMERA. FATHER DIED AT WASHINGTON

DC JAN 2 QORT

MRS. ETHEL MCMANUS SHAVER

2004-Verde St. 826P

0750423 W QORT

*Bakersfield, Calif
St Andre, France*

Coded 4-8-49

J. Williams

MAR 31 1949

*Pyman - 3/14
C-8-157*

9 11 1949
O. O. M. G.
TEL. & CAB
SECTION

5736

*mb
Taylor
St Andre
C-8-157*

*9345
3-17-49
IND
30-9*

Received in LC 8:30AM 15 mar
Cleared 15 mar 9AM
Transferred to F.R.
E. Boone



Courtesy letter written

[Faint, mostly illegible text and markings, possibly bleed-through from the reverse side of the page.]



RECEIVED
MAR 31 5 08 PM '49
RECORDS BRANCH
KEYSTONE

MAR 31 1949

MAR 31 1949

REPATRIATION
RECORDS BRANCH

MAR 31 2 48 PM '49

MEMORIAL DIVISION

gaw

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

25 March 1949

IN REPLY REFER TO QMGMF 293

ms
McManus, Thomas W., Jr. 2nd Lt. O 750 423
Plot C, Row 8, Grave 157
United States Military Cemetery
St. Andre, France

Miss Mary C. Larson
Acting Director, Home Service
American National Red Cross
615 North St. Asaph Street
Alexandria, Virginia

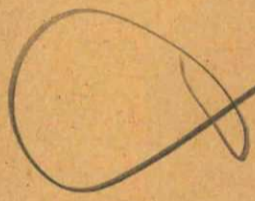
Dear Miss Larson:

The next of kin of the above captioned deceased has furnished a satisfactory reply direct to this office. You may therefore consider the case closed.

Your cooperation in this and other cases is greatly appreciated.

Sincerely yours,

MAR 25 10 07 AM '49
QMG M&R BR



JAMES F. SMITH
Major, QMC
Memorial Division

478
FMS
Weth

ANALYST ACTION REQUEST FORM

| | | | | |
|---------------------------------|---|---------------|---|------------------|
| Name | : | Grade | : | Serial Number |
| <i>Mc MANUS, THOMAS W., Jr.</i> | : | <i>2nd Lt</i> | : | <i>0 750 423</i> |

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

USMC D. Andree, France, Platoon - C Room-8 Leave - 157

Courtesy Letter "N"

*To ARC
Eastern Area*

DATE

15 Mar

: SIGNATURE OF ANALYST

E. Brown

: DIVISION

: BRANCH

: SECTION

| | | | | | |
|--------------------|---------------------|--------------------|---------------------------|---------------------------|-------------------|
| MESSAGEFORM | | MESSAGE CENTER NO. | TRANSMITTING MEANS | CRYPTOGRAPH OR CLEAR TEXT | |
| CALLS V | STA. SER. No. NR | PRECEDENCE | TRANSMISSION INSTRUCTIONS | ORIGINATOR | DATE-TIME GROUP |
| ACTION | INFORMATION | | EXEMPT | OPERATING SIGNALS | GROUP COUNT GR |

FROM: (Originator)
QMGMF DEPT OF ARMY WASH D C SNOWDEN EXT 6535

| | |
|--|---|
| SECURITY CLASSIFICATION UNCLASSIFIED | |
| ACTION PRIORITY | PRECEDENCE FOR INFORMATION |
| <input checked="" type="checkbox"/> ORIGINAL MESSAGE | |
| IDENTIFICATION | REFERS TO ANOTHER MESSAGE CLASSIFICATION |

ACTION TO:
MRS ETHEL B SHAVER
2004 VERDE STREET
BAKERSFIELD CALIFORNIA

INFORMATION TO:
CHARGE GRAVES WW II

FINAL INTERMENTS ARE NOW BEING MADE IN PERMANENT UNITED STATES MILITARY CEMETERIES OVERSEAS. THE REMAINS OF YOUR LATE SON SECOND LIEUTENANT THOMAS W MCMANUS JR O 750 423 ARE BEING HELD IN ABOVE GROUND STORAGE PENDING DISPOSITION INSTRUCTIONS FROM YOU. IN ORDER TO COMPLY WITH YOUR WISHES COMMA IT IS URGENT YOU ADVISE THIS OFFICE WITHIN FIFTEEN DAYS BY COLLECT TELEGRAM IF YOU DESIRE PERMANENT OVERSEAS BURIAL OR RETURN OF REMAINS TO UNITED STATES FOR BURIAL IN A NATIONAL OR PRIVATE CEMETERY. IF REMAINS ARE REQUESTED FOR RETURN TO THIS COUNTRY INCLUDE NAME OF NATIONAL CEMETERY OR IF REMAINS ARE RETURNED FOR BURIAL IN A PRIVATE CEMETERY NAME AND ADDRESS OF FUNERAL DIRECTOR OR CONSIGNEE TO WHOM REMAINS ARE TO BE CONSIGNED. ~~END SMITH~~ PLEASE ALSO INCLUDE PLACE AND DATE OF DEATH OF FATHER
END SMITH

gph

SMITH
Memorial Division
CQMG

FMS
FMS
CMT

| | | | |
|---|-----------------------------|---|---------|
| SECURITY CLASSIFICATION UNCLASSIFIED | | AUTHORIZATION | |
| ORIGINATING AGENCY QMGMF 293 | | SIGNATURE | |
| SYMBOL QMGMF 293 | DATE-TIME GROUP 3 Mar 49 | OFFICIAL TITLE J F VOGL Captain, QMG, Memorial Division | PAGE OF |

ANALYST ACTION REQUEST FORM

Name : Grade : Serial Number
McMANUS, THOMAS W., JR. : 2ND LT : O-750 423

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

Telegram "H"
To: MRS. ETHEL B. SHAVER (Mother)
2004 VERDE STREET
BAKERSFIELD, CALIFORNIA

Request place and date of death of father.

DATE : SIGNATURE OF ANALYST
3 Mar : *E. Brown*
DIVISION : BRANCH : SECTION

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
INTRAOFFICE REFERENCE SHEET

0 750 423

293

Mr. MANUS, THOMAS W., JR.

DUE, HOUR AND DATE

| 1 No. | 2 From | 3 To | 4 Date | 5 Message |
|----------|-----------|---------|-----------|--------------|
|----------|-----------|---------|-----------|--------------|

1

LOI
Section
R/R Br.

Record
Section
R/R Br.

3 Sep. 48

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

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

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

CUNNINGHAM
71507

Snowden
6535

THIS FORM WILL REMAIN PART OF THE OFFICIAL FILE

345 not rec'd
2 Mar 49

7-SEP 1948

201 sent mother 3 Sep
A. W. Ormsby
MANUS
3 Sep 48
24 hours

gms

2nd Lt. Thomas W. McManus, Jr., O 750 423
Plot C, Row 8, Grave 157,
United States Military Cemetery
St. Andre, France

2 September 1948

Mrs. Ethel B. McManus Shaver
2004 Verde Street
Bakersfield, California

Dear Mrs. Shaver:

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, accompanied by documentary evidence of death of father, will avoid unnecessary delays.

Sincerely,

THOMAS B. LARKIN
Major General
The Quartermaster General

8 Incls.

SEP 3 11 17 AM '48

O. Q. M. G.
MAIL & RECORDS BRANCH

lho

90

REQUEST FOR NEW LETTER OF INQUIRY

| | | | |
|---|-----------|---|--------------------------|
| TO LETTER OF INQUIRY SECTION REPATRIATION RECORDS BRANCH | | FROM RL-2 | |
| NAME OF DECEDENT (First, Middle, Last) THOMAS W. McMANUS, JR. | | GRADE 2LT | SERIAL NUMBER 0750423 |
| GRAVE LOCATION | | | |
| CEMETERY U.S. MILITARY CEMETERY ST. ANDRE, FRANCE | PLOT C | ROW 8 | GRAVE 157 |
| LETTER OF INQUIRY TO BE SENT TO: MR. _____ MISS _____ MRS. ETHEL B. McMANUS SHAVER | | RELATIONSHIP MOTHER | |
| ADDRESS | | | |
| STREET 2004 VERDE ST. | | CITY AND STATE BAKERSFIELD CALIFORNIA | |

AUTHORITY FOR LETTER OF INQUIRY AND REMARKS

Widow is remarried & father is deceased.
Special paragraph requesting proof of father's death.

RODA

priority

L.O.I. SENT 2 SEP 1948

*file
208
9/2/48
J. Colby*

| | |
|-------------------|--------------------------------------|
| DATE 3 Sep. 48 | CLERK'S SIGNATURE A. Wornley RL-2 |
|-------------------|--------------------------------------|

THE AMERICAN NATIONAL RED CROSS
EASTERN AREA

Form HS-343
March 1948

793

TO: Repatriation Records Branch
Disinterment Locator Section
Office of the Quartermaster General
Department of the Army
Washington 25, D. C.

DATE: June 22, 1948

FROM: Director, Home Service

SUBJECT: MCMANUS, THOMAS W., JR. 2nd Lt.
O 750 423

Plot C, Row 8, Grave 157
U.S. Military Cemetery
St. Andre, France

Your Reference: QMG MR 293

Next of kin: Mr. Thomas W. McManus, father
Old Address: 1700 Eye St. NW.
Washington, D. C.
New Address:

In compliance with your request of May 28, 1948 for an investigation in connection with the disposition of the remains of this deceased serviceman, we submit the following information:

1. OQMG Form 345 _____ was submitted by _____, _____
(Name) (Relationship)
_____ will be submitted.
on _____
(Date)

2. Thomas W. McManus, father _____ has relinquished disposition authority.
(Name) _____ has remarried.
_____ is deceased.
_____ is incompetent.

*345-Disinterment 26 Sept.
ND per mother 29 July.*

3. _____ We have been unable to locate.

REMARKS:

Form attached. Chapter obtained the above information from two sources, Western Union and a realty company from which father had rented.

*101 sent mother 3 Sep. 48
A. W. Wmley*

Pauline A. Rogers
(Mrs.) PAULINE A. ROGERS
Director, Home Service
Eastern Area

*MAAT
1 Sep. 48
A. W. Wmley
RL-2*

12441
033048

THE AMERICAN NATIONAL RED CROSS

EASTERN AREA



TO: [Faint text]

FROM: [Faint text]

RE: [Faint text]

YOUR REFERENCE: [Faint text]

THE ADDRESS: [Faint text]

FOR ADDRESS: [Faint text]

In compliance with your request of [Faint text] the following information is being furnished to you:

1. Your form was submitted by [Faint text] will be submitted.



REMARKS: [Faint text]

[Faint text at bottom left]

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

28 May 1948

In Reply Refer To RR Br: QMGR 293 McManus, Thomas W. Jr., 2nd Lt., O 750 423
Plot C, Row B, Grave 157
United States Military Cemetery
St. Andre, France

Mrs. Pauline A. Rogers, Home Service Director
Eastern Area, American Red Cross
615 North Saint Asaph Street
Alexandria, Virginia

Dear Mrs. Rogers:

Efforts of this office to contact the Next of Kin of the above-named deceased have failed, in that letters have been returned by Postal Authorities as undeliverable. This office is desirous of obtaining the wishes of Mr. Thomas W. McManus, father,
(name) (relationship)

whose last known address was 1700 Eye Street, Northwest, Washington, D.C.

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

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

- Date of latest communication from above named Next of Kin at address as listed None
- Race & Religion of deceased White - Catholic
- Organization 870 Bomb Sq. (L), 416 Bomb Co. (L)
- Date, Place and Cause of Death 6 August 1944 - European Area - Killed in action.
- Other members of deceased's family;

| Relationship | Name | Address |
|--------------|------------------|-------------------------------------|
| Mother | Ethel B. McManus | 2004 Verde St., Bakersfield, Calif. |

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

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

Sincerely yours,

JOHN O. HYATT
Colonel, QMC
Memorial Division

ikb

2 Incls 139
Incl 1 - OQM Form 345
Incl 2 - Envelope

JUN 3 10 32 AM '48
O. C. M. G.
MAIL & RECORDS

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Faint, illegible text in the lower section of the page.

Faint, illegible text at the bottom of the page.

APR 2 10 55 AM '60
U.S. DEPARTMENT OF JUSTICE

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

1 DEC 1947

In Reply Refer To: QMGM 293
McManus, Thomas W., Jr., O-750 423
United States Military Cemetery, St. Andre, France

293

Date of Birth 9 November 1921
SUBJECT: Request for information re next of kin of above named
deceased serviceman of World War II.

XC 3829950
12-4-47

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

SLB

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

1 Incl: *OK/acf*
Envelope

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

Date 1-20-48
Veteran's
Name Thomas W McManus Jr
XC 3,829,950

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

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

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

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

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

| Relationship: | Name | Address |
|--------------------------|----------------------------|---|
| WIDOW : | <i>Anna Louise Miller</i> | <i>2747 Haste St, Apt 21 Berkeley, Calif</i> |
| (If none, state "None"): | | |
| Has she remarried? | <i>yes</i> | If so, is proof of remarriage on file? <i>yes</i> |
| Mother : | <i>Ethel Bacon McManus</i> | <i>2004 Verde, Bakersfield Calif</i> |

Chief, Dependent + Beneficiaries
DIRECTOR CB Jenkins,
CLAIMS SERVICE
Address) 180 New Montgomery
San Francisco, Calif

ARC Sent 27 May 48
CR

File Pending Post
V Gentry
2/16/48

UNITED STATES DEPARTMENT OF THE ARMY
OFFICE OF THE CHIEF OF STAFF
WASHINGTON, D. C. 20315

MEMORANDUM FOR THE CHIEF OF STAFF
SUBJECT: [Illegible]

1. [Illegible]

2. [Illegible]

3. [Illegible]

4. [Illegible]

5. [Illegible]

6. [Illegible]

7. [Illegible]

8. [Illegible]

9. [Illegible]

10. [Illegible]

11. [Illegible]

12. [Illegible]

13. [Illegible]

14. [Illegible]

15. [Illegible]

16. [Illegible]

17. [Illegible]

DEC 2 11 05 AM '48
MAIL & RECORDS BRANCH

RECEIVED
DEC 2 1948
COMMUNICATIONS DIVISION
VETS. ADM. # 34
READER

DEFENDERS & PERS. FILES
CLAIMS DIVISION
BRANCH 12

RECEIVED
JAN 16 1949
MAIL & RECORDS BRANCH

RECEIVED
JAN 2 1949
MAIL & RECORDS BRANCH

RECORDS
MEMORIA
6 17 INF

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

1 DEC 1947

In Reply Refer To: QMGHM 293

McManus
McManus, Thomas W., Jr., O-750 423

United States Military Cemetery, St. Andre, France

Date of Birth 9 November 1921

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

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

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

1 Incl:
Envelope

MARK J. GILL
Major, QMC
Memorial Division

MJG
MJG
CAF

mlg

Date _____
Veteran's Name _____
XC _____

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

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

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

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

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

Relationship: _____ Name: _____ Address: _____

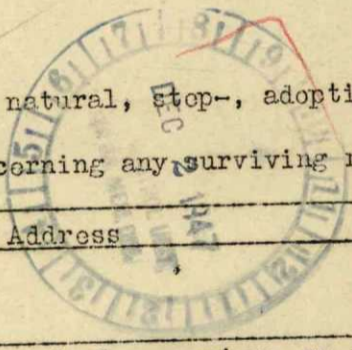
WIDOW: _____

(If no information is available concerning any surviving relatives, state "None")

Has she remarried? _____ If so, is proof of remarriage on file? _____

DIRECTOR
CLAIMS SERVICE
(Address) _____

MAIL & RECORDS BRANCH



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

IN REPLY REFER TO BURIAL OF
2nd Lt. Thomas W. McManus, Jr., O 750 423
~~Plot C, Row 8, Grave 157,~~
United States Military Cemetery
St. Andre, France

26 September 1947

Mr. Thomas W. McManus
1700 Eye Street, N. W.
Washington, D. C.

Dear Mr. McManus:

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.

Incls.

Sincerely,

Thomas B. Larkin

THOMAS B. LARKIN
Major General
The Quartermaster General

*File
1 Dec 47
m j Hill*

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

WASHINGTON, D.C. 5
OCT 6
10-PM
1947

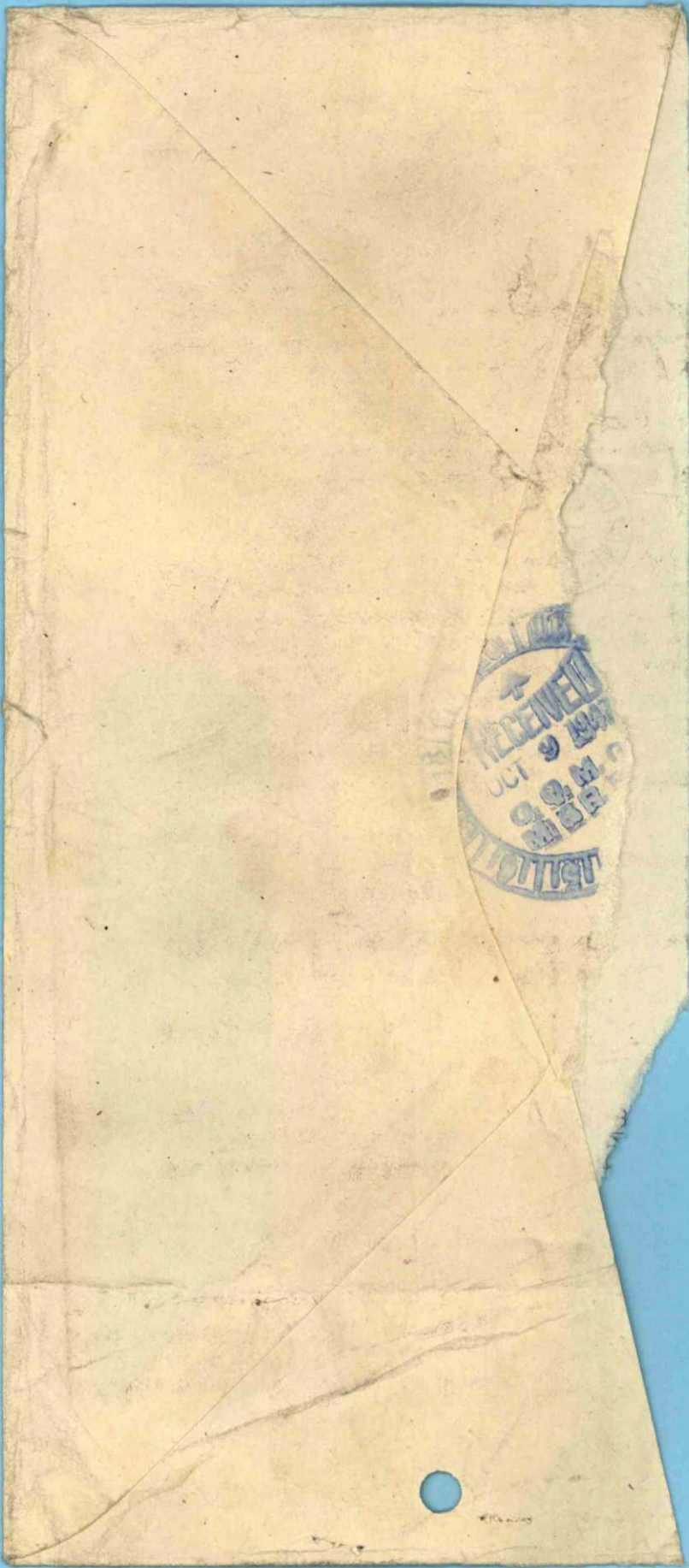
...ANT
...AN, CLERKMASTER GENERAL
WASHINGTON, D. C
OFFICIAL BUSINESS

Returned to Sender
UNCLAIMED
From Washington, D. C.

Moved, Left no address

685

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



2nd Lt. Thomas W. McManus, Jr., O 750 423
Plot C, Row 8, Grave 157,
United States Military Cemetery
St. Andre, France

26 September 1947

Mr. Thomas W. McManus
1700 Eye Street, N. W.
Washington, D. C.

Ret

Dear Mr. McManus:

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.

909

OCT 6 3 24 PM '47

D. O. M. G.
MAIL & RECORDS BRANCH

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

293

2nd Lt. Thomas W. McInnis, Jr., O 750 423
Plot C, Row 8, Grave 157,
United States Military Cemetery
St. Andre, France

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

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

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

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

(NAME AND LOCATION OF CEMETERY)

- 3. BE RETURNED TO _____ (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 _____ (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.)

5 aug 47

FILE
3 - OCT 1947

Reps

Wm. LOI. SENT 26 SEP 1947

PART I (Continued)

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

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

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

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

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

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

| | | | |
|-------------------|--------------|--------------------|--|
| LAST NAME | FIRST NAME | MIDDLE INITIAL | RELATIONSHIP TO DECEASED |
| NUMBER AND STREET | CITY OR TOWN | COUNTY OR PROVINCE | STATE OR TERRITORY OF U. S. A., OR COUNTRY |

REMARKS OR ADDITIONAL INSTRUCTIONS (For additional space use page 4.)*

AS EXPLAINED IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," I AM THE NEXT OF KIN AND THE INDIVIDUAL AUTHORIZED TO DIRECT THE DISPOSITION OF THE SAID REMAINS.

I, the undersigned, DO SOLEMNLY SWEAR (OR AFFIRM) that the statements made by me in the foregoing document are full and true to the best of my knowledge and belief.

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

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

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

(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

(OFFICIAL TITLE)

PART 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 _____ (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 | FIRST NAME | MIDDLE INITIAL |
| RELATIONSHIP TO THE DECEASED | | |
| NUMBER AND STREET | CITY OR TOWN | STATE OR COUNTRY |

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

(SIGNATURE OF NEXT OF KIN)

(DATE)

(STREET AND NUMBER)

(NAME PRINTED OR TYPED)

(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 McManus (*) | FIRST NAME (Mrs.) Ethel | MIDDLE INITIAL B. |
| RELATIONSHIP TO THE DECEASED Mother | | |
| NUMBER AND STREET 2004 Verde St. | CITY OR TOWN Bakersfield | STATE OR COUNTRY California |

(*) On July 19, 1947, Mrs. Ethel B. McManus will become, by remarriage, Mrs. Ethel McManus Shaver

Mrs. Oma Louise Miller
(SIGNATURE)

July 5, 1947
(DATE)
157 A Street,
(STREET AND NUMBER)
Bakersfield, California
(CITY AND STATE)

Mrs. Oma Louise Miller (**)
(NAME PRINTED OR TYPED)

(**) In February, 1947, my former name, Mrs. Oma L. McManus, was changed by remarriage to Mrs. Oma Louise Miller

ADDITIONAL REMARKS AND INSTRUCTIONS

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

Blank lined area for additional remarks and instructions.



Notary Public information fields including name, address, and commission expiration date.

2nd Lt. Thomas W. McManus, Jr., O 750 423
Plot C, Row 8, Grave 157,
United States Military Cemetery
St. Andre, France

17 June 1947

Mrs. Oma L. McManus
157 A Street
Bakersfield, California

Dear Mrs. McManus:

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 delay.

Sincerely,

THOMAS B. LARKIN
Major General
The Quartermaster General

Incls.

mg

JUN 19 4 14 PM '47
O. O. M. G.
MAIL & RECORDS BRANCH

LOI. SENT 26 SEP 1947

AB7

plg

QMGMR 293
McManus, Thomas W., Jr.
A.S.N. O 750 423

2 May 1947

Mrs. Oma L. McManus
157 A Street
Bakersfield, California

Dear Mrs. McManus:

Inclosed herewith is a picture of the United States Military Cemetery St. Andre, France, in which your husband, the late Second Lieutenant Thomas W. McManus, Jr., is buried.

It is my sincere hope that you may gain some solace from this view of the surroundings in which your loved one rests. As you can see, this is a place of simple dignity, neat and well cared for. Here, assured of continuous care, now rest the remains of a few of those heroic dead who fell together in the service of our country.

This cemetery will be maintained as a temporary resting place until, in accordance with the wishes of the next of kin, all remains are either placed in permanent American cemeteries overseas or returned to the Homeland for final burial.

Sincerely yours,

G. A. HOKKAN
Brigadier General, QMC
Chief, Memorial Division

1 Incl
Photograph

Handwritten signature

Handwritten initials

QMGR 314.6
Graves Registration
(European Area - U. S. Misc.)

SUBJECT: Burial Records

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

25 APR 1947

1. Request the burial reports and grave markers for the following decedents interred in the United States Military Cemetery St. Andre, France, be changed to read as underscored:

| NAME | RANK GRADE | SERIAL NO. | DATE OF DEATH | PLOT | ROW | GRAVE |
|----------------------------------|---------------|------------|------------------|------|-----|-------|
| Harrison, <u>Donald B.</u> | T/Sgt. | 15 324 895 | <u>28 Feb 44</u> | H | 1 | 3 |
| McManus, Thomas W. 54 | 2nd. Lt. | O 750 423 | <u>6 Aug 44</u> | C | 8 | 157 |
| Vogt, Jean D. | 2nd. Lt. | O 819 223 | <u>14 Jun 44</u> | D | 8 | 149 |

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:

MARTIN G. RILEY
Major, QMG
Memorial Division

AIR MAIL

SP-4 YG 293
McManus, Thomas W., Jr.

26 February 1946

Mrs. Oma L. McManus
157 "A" Street
Bakersfield, California

Dear Mrs. McManus:

The War Department is most desirous that you be furnished the burial location of your husband, the late Second Lieutenant Thomas W. McManus, Jr., A.S.N. O-750 423.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery, St. Andre-De-Eure, France, plot C, row 8, grave 157.

This cemetery is located approximately fifteen miles southeast of Evreux and fifteen miles northeast of Dreux, both in France, and is under the constant care and supervision of United States military personnel.

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

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

mm

27

RECORDS BRANCH
FEB 26 2 45 PM '46

S LNS

***REPORT OF DENTAL SURVEY**

UPPER TEETH

| Right | | | | | Left | | | | | | | | | | |
|-------|----|----|---|---|------|---|---|---|---|---|---|----|---|---|---|
| 8 | 7 | 6 | 5 | 4 | 3 | 2 | 1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| X | O | OO | | | | | | | | | X | OO | O | X | |
| A | AA | | | | | | | | | | | AA | A | | |

LOWER TEETH

| Right | | | | | | Left | | | | | | | | | |
|-------|----|----|----|----|----|------|---|---|----|----|----|----|----|----|----|
| 16 | 15 | 14 | 13 | 12 | 11 | 10 | 9 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |

CLASS IV

Occlusion Good: Calculus: Slight, Medium, Heavy
 Periodontoclasia none
 Dental foci suspected: Yes No
 Other conditions none

Date Jan 11, 19 44
W. Ganett 1st LT.
 Dental Corps, U. S. A.

*Restorable carious teeth by O
 Nonrestorable carious teeth by /
 Missing natural teeth by X

Teeth replaced by denture (horizontal line)

| | | |
|---|---|---|
| X | X | X |
|---|---|---|

Teeth replaced by fixed bridge (oval to include abutments)

| | | |
|--|---|--|
| | X | |
|--|---|--|

REGISTER OF DENTAL PATIENTS AT

64 0-750423

(1) SURNAME (2) CHRISTIAN NAME

McMANUS THOMAS W Jr.

(3) RANK (4) COMPANY (5) REGIMENT OR STAFF CORPS

2nd Lt BCS.

(6) AGE, YEARS (7) RACE (8) NATIVITY (9) SERVICE, YEARS

22 W Calif 1 1/2

| (10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC. | (11) DATES AND NATURE OF TREATMENTS AND OPERATIONS | (12) RESULTS AND REMARKS |
|---|--|--------------------------|
| <i>Dental</i> | <i>Identify section</i> | <i>Record</i> |

Dental Corps, U. S. A.

Form 79—MEDICAL DEPARTMENT, U. S. A.
(Revised Feb. 24, 1941)

16-20622

PHYSICAL EXAMINATION FOR FLIGHT

(See AR 40-100, 40-105, 40-110)

1. McManus Thomas W. Jr. 2nd Lt., AC 0-750423 22 1,6/12
(Last name) (First name) (Middle initial) (Grade and arm or service) (Serial No.) (Age) (Years service)
 2. Morris Field, Charlotte, N. C. Annual 30 June 1943 Qualified
(Address) (Purpose of examination)¹ (Date and result last examination)
Pilot Flying time as: Pilot 550; observer -; pilot 330; observer -
(Aeronautical ratings) (Total) (Total) (Last 6 mos.) (Last 6 mos.)
 3. Temperature 98.6 Vaccinations: Typhoid series, No. 2 Last 2/43; smallpox 1943; reaction Immune
(Date)

4. Medical history.

(In the case of applicant include family. Has he ever had epilepsy, enuresis, headaches, dizziness, vertigo, fainting, stammering, tic, somnambulism, pavor nocturnus, migraine, insomnia, phobias, anxiety trends, irritability, apathy, elation, depression, sensory disturbances, amnesia, spasms, unconsciousness, repeated episodes of alcoholism, encephalitis, pneumonia, syphilis, renal calculi, tuberculosis, asthma, hay fever, repeated colds, mastoiditis, sinusitis, tonsillitis, arthritis in any form, malaria, severe injuries, major operations, or other pertinent history? Explain fully.)

No interval history of disease or injury. Previous medical history on record.

SURGEON'S FILE
 AFTAS JUN 2 1944

5. Eye: Inspection Normal Nystagmus None
 6. Associated parallel movements Normal Pupils: Equality Equal Reaction Normal
 7. Visual acuity: R. E., 20/ 20, correctible to 20/ - L. E., 20/ 20 correctible to 20/ -
 8. Depth perception (uncorrected) 6 mm. With correction - mm.
 9. Heterophoria at 6 meters: Eso 0 Exo 0 R. H. 0 L. H. 0 Prism divergence 7
 10. Red lens test Normal Angle convergence: PcB 40 mm. Pd 63 mm. 76 °
 11. Accommodation: R. 11.0 D. L. 12.0 D. Addition required for 50 cm. R. - L. -
 (Jaeger type): Right J. 1-13, correctible to J. -; Left J. 1-13, correctible to J. -
 12. Color vision Passes Ishihara
 13. Field of vision (form): R. Normal L. Normal Ophthalmoscopic: R. Normal L. Normal
 14. Refraction: R. reads 20/20 with Not S. done CAx - ° L. reads 20/20 with - S. - CAx - °
 15. Ear: History of ear trouble Denies
 16. External ear: R. Normal L. Normal Membrana tympani: R. Normal L. Normal
 17. Hearing (whisper): R. 20 /20. L. 20 /20. Audiometer (percent loss): R. - L. -
 18. Nares Normal Tonsils Enucleated

19. Teeth:

(a) Right (Examinee's) Left
8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8
16 15 14 13 12 11 10 9 9 10 11 12 13 14 15 16

Indicate: Restorable carious teeth by O; nonrestorable carious teeth by /; missing natural teeth by X.

(b) Remarks, including other defects None

(c) Prosthetic appliances None (d) Classification² IV

20. History of swing, train, air, or sea sickness Denies
 21. Barany chair (when indicated with results) Not done
 22. Posture Good Figure Medium HQ. 3rd AIR FORCE Tampa, Fla. Medium
(Excellent, good, fair, bad) (Slender, medium, stocky, obese) (Light, medium, heavy)
 23. Height, 73 inches. Weight, 165 pounds. Chest: Inspiration 40 Expiration 36 Rest 37 Abdomen 29
 24. Skin and lymphatics Normal Endocrine system Normal
 25. Bones, joints, muscles Normal Feet Normal is physically qualified
 26. Heart Normal
 27. Pulse rate, 76 B. P.: S. 120 D. 70 Schneider Normal Pulse immediately after exercise 90
 Two minutes after exercise 70 Character Full and Regular
 28. Arteries Soft and Compressible Varicose veins None

¹ Semiannual, appointment as cadet, commission in the Air Corps, commission in Air Corps Reserve, transfer to the Air Corps, or any other special purpose.
² I, II, III, or IV; see par. 3, AR 40-510.

29. Respiratory system **Normal**
30. X-ray of chest¹ **Not required**
31. Abdominal viscera **Normal**
32. Hernia **None** Hemorrhoids **None**
33. Genito-urinary system **Normal**
34. Nervous system: Reflexes, gait, coordination, musculature, tension, tremor, and other pertinent tests **Normal**
35. Laboratory procedures: Kahn¹ **Not required** Wassermann¹ **-**
- Urinalysis: Reaction **Acid** Sp. gr. **1.020** Albumin **Negative** Sugar **Negative** Microscopical **Negative**
36. Estimated adaptability for military aeronautics (if unsatisfactory, state reasons) **Satisfactory** **AREA 160**
37. Remarks on conditions not sufficiently described **None**
38. Is the examinee physically qualified for flying duty? **Yes** If yes, in what class? **I**
If disqualified, indicate defects by paragraph number
39. Have defects been waived by The Adjutant General? **-** If yes, give date
If no, is waiver recommended? **-** Is request for waiver attached? **-**
40. Is the examinee incapacitated for active service? **No** If yes, indicate defect by paragraph number
41. Corrective measures or other action recommended **None**
42. If applicant for appointment: Does he meet physical requirements? **-** Do you recommend acceptance with minor physical defects? **-** If rejection is recommended, specify cause



Morris Field, N. C. 28 January 1944
(Place) (Date)

Hugh E. Conly Medical Corps.
(Name and grade)
HUGH E. CONLY, Captain

REVIEWED AND APPROVED:

Raphael J. Weisberg Medical Corps.
(Name and grade)
RAPHAEL J. WEISBERG, Captain

Seymour Glasser Medical Corps.
(Senior flight surgeon)
SEYMOUR GLASSER, Major

Emanuel Roth Medical Corps.
(Name and grade)
EMANUEL ROTH, Captain
1st Ind.²

Headquarters 19.....
To the Commanding General,
Remarks and recommendations

(Name) (Grade) (Organization and arm or service)
Commanding.

2d Ind.²

....., 19..... To The Adjutant General.

¹ Required for candidates for commission, Reserve officers reporting for extended active duty, and applicants for flying cadet.
² State action taken on recommendation of the board. If incapacitated for active service, state whether action by retiring board is recommended.

NOTE.—Use typewrite if practicable. Attach additional plain sheets if required.

REPORT OF BURIAL IF DECEASED UNIDENTIFIED

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

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

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

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

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

What means of identification were buried with the body?
 Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc.:

Who is buried on:
 Deceased's Right: Albergo, F. P. 35053496 Pvt
 Deceased's Left: Ispointe, J. H. 32490064 UNK

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

Left Hand: 2, 1
 Right Hand: 2, 1

Thumbs: 158, 156

TOOTH CHART

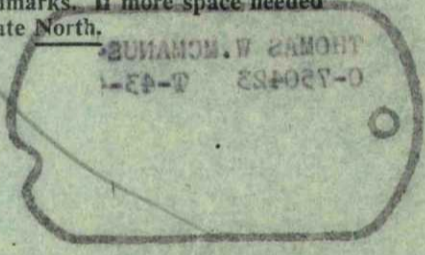
Indicate: missing natural teeth by X; crowns by C; fillings by O; Bridges by □; fillings by X; missing natural teeth by X; crowns by C; fillings by O; Bridges by □; fillings by X; missing natural teeth by X; crowns by C; fillings by O; Bridges by □; fillings by X

| | | | | | | | | | | | | | | | | |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Upper | 8 | 7 | 6 | 5 | 4 | 3 | 2 | 1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| Lower | 8 | 7 | 6 | 5 | 4 | 3 | 2 | 1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |

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

Address: _____
 Emergency Address: _____
 Religion: Catholic
 Name: _____
 Rank: _____
 Serial No.: _____
 Organization: _____

Characteristics: _____
 Other Data: _____



REBURIAL

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

Previously buried in _____
 Louviers, Eure, France

AG P BR HO 505 722560

213 file

McManus Thomas W. Jr.

1233

3-12

HEADQUARTERS
1ST QUARTERMASTER GROUP
APO 562, U. S. ARMY

Register #1233

REPORT OF INVESTIGATION OF ISOLATED GRAVE
or
UNIDENTIFIED REMAINS

Date 20 February 1945

*U.S. ~~XXXXXXXXXX~~

cu 1233

297

1. Name, Rank, ASN of deceased: **Thomas W. McManus Jr., 2nd Lt., AC 0-750423**
2. Organization of deceased: **416 Bomb. Group, Light.**
3. Means of identification: **By identification tags found on body by French.**
4. Cause of death: **Bomber Crash.** 5. Date of death: **6 August 1944.**
6. If isolated grave
 - a. Date of burial: **8 August 1944** b. By whom buried: **Citizens of Louviers.**
 - c. Inscription on marker: **Thomas W. McManus Jr., O-750423, T43-44-A-C.
"Decede a St Pierre-du-Vauvray le 6 Aout 1944.**
7. Location of grave ~~XXXXXXXXXXXX~~
(Be specific, sketch on reverse)
Cemetery of Louviers (Eure).
8. Names of deceased and location of other *graves ~~XXXXXXXXXXXX~~ in immediate vicinity: **Standing at the foot of the grave at the left of
McManus was buried John H. Lapointe, Sgt., 32490064.**
9. Description and location of wrecked or abandoned vehicles or equipment in immediate vicinity:
None
10. Disposition of personal effects: (Itemize if possible)
None
11. Other pertinent information: **Body badly burnt, no clothing remained on
(Use reverse side if necessary) body.**
12. Information furnished by: **Delamare Maurice, Louviers, Secretary of
(Name, title, address) Mayor.**
13. Names and addresses of other persons familiar with the case:
Lepage, Michel Louviers, used as an interpreter.

File 1233-41

(OVER)

14. Action taken: Body disinterred from Cemetery of Louviers (Eure) by
..5058 QM G.H. CO., Third Platoon on 19 February 1945.

Disinterrment approved by: Lysford H. Chase Capt OMC

Disinterrment and *burial/reburial made by:

Date of *burial/reburial: ..21.. February 45

Place of *burial/reburial U. S. Military Cemetery: St. Andre

Plot C... Row 8... Grave 157.

Carl E. Polunsky
Signature of Investigator

2nd Lt OMC 0-7594418
Rank, ASN

* Cross out where not applicable

GENERAL OF POLYMER (GMP)

XXXXXXXXXXXX

APPROVED FOR SIGNATURE OF INVESTIGATOR

XXXXXXXXXXXX

XXXXXXXXXXXX

APPROVED FOR SIGNATURE OF INVESTIGATOR

XXXXXXXXXXXX

APPROVED FOR SIGNATURE OF INVESTIGATOR

XXXXXXXXXXXX

APPROVED FOR SIGNATURE OF INVESTIGATOR

XXXXXXXXXXXX

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

REPORT OF DEATH

DATE 12 Feb 1945

| | | | | | | |
|--|---|---|----------------------------------|--------------------|----------------------|----------------------------------|
| FULL NAME <u>McManus, Thomas W., Jr.</u> | | ARMY SERIAL NUMBER <u>Sim 4632</u> <u>0750423</u> | <u>2nd Lt.</u> | | | |
| HOME ADDRESS <u>Bakersfield, California</u> | | ARM OR SERVICE <u>Air Corps</u> | DATE OF BIRTH <u>9 Nov 21</u> | | | |
| PLACE OF DEATH <u>European Area</u> | CAUSE OF DEATH <u>Killed in action</u> | | DATE OF DEATH <u>6 Aug 44</u> | | | |
| STATION OF DECEASED <u>European Area</u> | DATE OF ENTRY ON CURRENT ACTIVE SERVICE <u>28 Jul 43</u> | LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS | | | | |
| EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) <u>Mrs. Oma L. McManus, wife, 157 "A" St., Bakersfield, Calif.</u> | | | | | | |
| BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) <u>Oma L. McManus, wife, same as above</u> <u>Ethel B. McManus, mother, 2004 Verde St., Bakersfield, Calif.</u> <u>Thomas W. McManus, father, same as above 1700 Eye St., NW, Washington 6, D. C.</u> | | | | | | |
| 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 | |

ADDITIONAL DATA AND/OR STATEMENT

 BATTLE NON-BATTLE

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 Aug 1944 until such absence was terminated on 6 Feb 1945, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

COPIES FURNISHED:

| | | |
|----------------|-------------|----------------------|
| S. O. O. | F. B. I. | F. O., U. S. A. |
| 2. O. Q. M. G. | O. F. D. | ARMY EFFECTS BUREAU |
| G. A. O. | VET. ADMIN. | CASUALTY BRANCH FILE |
| | | A. G. 201 FILE |

BY ORDER OF THE SECRETARY OF WAR:

[Handwritten Signature]
ADJUTANT GENERAL

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

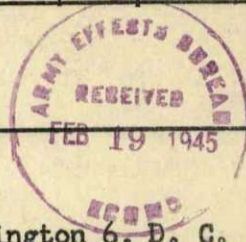
423082

129136

DATE 12 Feb 1945

REPORT OF DEATH

| | | | | | | | | | | | | | |
|--|----|--|----|---|----|-----------------------------|----|--------------------|----|----------------------|----|----------------------------------|----|
| FULL NAME McManus, Thomas W., Jr. | | ARMY SERIAL NUMBER 511 4632 0750423 | | 2nd Lt. | | | | | | | | | |
| HOME ADDRESS Bakersfield, California | | ARM OR SERVICE Air Corps | | DATE OF BIRTH 9 Nov 21 | | | | | | | | | |
| PLACE OF DEATH European Area | | CAUSE OF DEATH Killed in action | | DATE OF DEATH 6 Aug 44 | | | | | | | | | |
| STATION OF DECEASED European Area | | DATE OF ENTRY ON CURRENT ACTIVE SERVICE 28 Jul 43 | | LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS | | | | | | | | | |
| EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Oma L. McManus, wife, 157 "A" St., Bakersfield, Calif. | | | | | | | | | | | | | |
| BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Oma L. McManus, wife, same as above Ethel B. McManus, mother, 2004 Verde St., Bakersfield, Calif. Thomas W. McManus, father, name exhausted 1700 Eye St., NW, Washington 6, D. C. | | | | | | | | | | | | | |
| 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 | | | |



ADDITIONAL DATA AND/OR STATEMENT

 BATTLE NON-BATTLE

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 Aug 1944 until such absence was terminated on 6 Feb 1945, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

COPIES FURNISHED:

| | | |
|----------------|-----------|----------------------|
| S. G. O. | F. B. I. | F. O. U. S. A. |
| S. O. C. M. G. | O. F. D. | ARMY EFFECTS BUREAU |
| G. A. C. | VE ADMIN. | CASUALTY BRANCH FILE |
| | | A. G. 201 FILE |

BY ORDER OF THE SECRETARY OF WAR:

ADJUTANT GENERAL

WD AGO FORM 52-1
1 DECEMBER 1944

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

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

129136

--BATTLE CASUALTY REPORT

| | | | | | | |
|----------------------|--|------------------|-------|------------------------|------------------|-------------------|
| NAME | | SERIAL NUMBER | | GRADE | ARM OR SERVICE | REPORTING THEATRE |
| MC MANUS THOMAS W JR | | O-750423 | | 2 LT | AC | ETO |
| PLACE OF CASUALTY | | DATE OF CASUALTY | | FLYING OR JUMPING STAT | TYPE OF CASUALTY | SHIPMENT NUMBER |
| FRANCE | | DAY | MONTH | YEAR | A | MIA |
| | | 06 | AUG | 44 | | 159 |

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 | DATE NOTIFIED |
| MRS OMA L MCMANUS | WIFE | 18 AUGUST 44 cll |
| NO. AND NAME OF STREET—CITY—STATE | | |
| 157 A STREET BAKERSFIELD CALIFORNIA | | |

REMARKS:

CORRECTED COPY



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

CASUALTY BRANCH FILE ATTACHED OR CHARGED TO _____ DATE _____

PREVIOUSLY REPORTED NO YES _____ (AS INDICATED BELOW):

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

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

REPORT NOT VERIFIED NO FORM 43 NO CAS. BR. FILE CHECKED BY Fisher/Adgust REVIEWED BY LaBoard

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 "A" _____ COPIES

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

DISTRIBUTION "B" _____ COPIES

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

129136

aid
MEM/ES/cs
29 July 1947
lm

Mrs. Oma L. McManus
157 "A" Street
Bakersfield, California

Dear Mrs. McManus:

Thank you for the information recently given the Army Effects Bureau in connection with the disposal of personal property of your husband, Lieutenant Thomas W. McManus, Jr.

4

This property, consisting of one wedding ring, was sent to you under separate cover 24 July 1947.

60

If, for some reason, the property has not reached you at the expiration of thirty days from the date of this letter, please notify this Bureau so tracer can be instituted.

67

As previously indicated, personal property is transmitted by this Bureau for distribution according to the laws of the state of decedent's legal residence.

71

Sincerely yours,

M. E. MOHR
Major, QMC
Asst Effects Quartermaster

| ATTACHMENTS | | EFFECTS INVENTORY | | ARMY EFFECTS BUREAU | | STATUS | |
|------------------------|--|-------------------|--|---------------------|--|-----------|--|
| INBOUND INVENTORY | | | | | | DECEASED | |
| G. R. OR SUB GR LABEL | | | | | | MISSING | |
| WILL OR POWER OF ATTY. | | | | | | P. O. W. | |
| TALLY IN FORM 43 | | | | | | ABANDONED | |
| | | | | | | UNKNOWN | |
| BAGS, CLOTH OR TRAVEL | | BELT | | OVERCOATS | | | |
| BELT, MONEY (NO MONEY) | | BOOKS, ADDRESS | | PAPERS, PERSONAL | | | |
| BILLFOLD (NO MONEY) | | BOOKS, PILOT LOG | | PENCIL, MECHANICAL | | | |
| BOOKS | | BRUSHES | | PEN, FOUNTAIN | | | |
| BRACELET, IDENT. | | CASE | | PHOTOS | | | |
| CAMERAS | | CLOTH, WASH | | PIPES | | | |
| CLOTHING | | COATS | | RINGS | | | |
| MISC. ARTICLES | | FOOTLOCKER | | SCARFS | | | |
| RELIGIOUS ARTICLES | | FOOTWEAR, PR. | | SHIRTS | | | |
| RIBBONS, DECORATION | | GLASSES | | SOCKS, PR. | | | |
| SHORT SNORTER | | GLOVES, PR. | | STATIONERY | | | |
| SOUVENIR MONEY | | HANDKERCHIEFS | | TIES | | | |
| SOUVENIRS | | HEADWEAR | | TOBACCO | | | |
| TESTAMENTS | | JACKETS | | TOILET ARTICLES | | | |
| TOWELS & WASHCLOTHS | | KITS | | TOWELS | | | |
| U. S. MONEY (AMOUNT) | | KNIVES | | TROUSERS, PR. | | | |
| WATCH | | LETTERS | | TRUNKS, PR. | | | |
| WINGS | | LIGHTERS | | UNDERWEAR | | | |

*1 - Ring wedding
yellow metal
engraved inside
"O. L. D." to "T. W. M."*

none

CONTAINERS ADDRESSED TO

none

INFORMATION

DAMAGED

rechecked

NAME AND STATUS VARIATIONS

case #129, 136

CROSS REFERENCE

Recovered from Salvage

| CHECK | REC'D BY | NUMBER | BUREAU CHECK |
|------------------|----------|------------------------|-------------------|
| MONEY ORDER | | | 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>9272</i> | ORIG. NO. OF PKGS. | EXAMINING DATE <i>23 June 47</i> | BOX NO. | SHEET _____ OF _____ SHEETS |
|-----------------------|--------------------|----------------------------------|---------|-----------------------------|

| | |
|---|------------------------------|
| NAME <i>THOMAS W. M^o MANUS</i> | A. S. N. <i>✓</i> |
| ORGANIZATION _____ | RANK <i>✓</i> CASE NO. _____ |

| | | |
|-----------------------------------|----------------------------|---------------------------------|
| WAREHOUSE SPACE <i>13</i> | EXAMINED BY <i>Brauner</i> | DIARY REMOVED |
| PACKAGE DESCRIPTION <i>#1 pkg</i> | PACKED BY <i>Hookbath</i> | PHOTO FILM REMOVED |
| WEIGHT | INSPECTED BY <i>HS</i> | MOTION PICTURE FILM REMOVED |
| | STORED BY <i>HS</i> | SHIPPED |
| | | DATE <i>JUL 24 1947</i> BY WHOM |

HS

ADDITIONAL REMARKS

| REMOVALS (other than G. I.) | | DAMAGES (List type of damage-extent) | |
|-----------------------------|--------|--------------------------------------|--|
| DESCRIPTION | WEIGHT | | |
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SHORTAGES

U. S. GOV'T CHECK SHORT

| DESCRIPTION OF SHORTAGE | NUMBER |
|-------------------------|--------|
| DATE | |
| SYMBOL | |
| AMOUNT | |
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| CONTAINERS INSPECTED | | INFORMATION | |
|----------------------|----------|-------------|--|
| DATE | LOCATION | | |
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I certify that the above items were not in the containers inventoried by me.

INVENTORY CLERK

SUPERVISOR

G. I. REMOVED

ARMY EFFECTS BUREAU EFFECTS INVENTORY

DATE

BY

DECLASSED

| | | | |
|---|---|------------------------------|--|
| AMOUNT OF CHECK | NOTE DISCREPANCY IN | INCLOSE VALUABLES | RECIPIENT FROM |
| ACCOUNT NUMBER | NAME | SHIP VALUABLES | CASUALTY REPORT |
| | <input checked="" type="checkbox"/> SERIAL NUMBER | VALUABLES SHIPPED BY (clerk) | INVENTORY |
| | <input checked="" type="checkbox"/> RANK | | FORM 20 |
| <p>Mrs. Oma L. McManus</p> <p>157 "A" Street</p> <p>2/Lt Thomas W. McManus, Jr. Bakersfield, California</p> <p>O-750423</p> <p>129136 D</p> | | | <input checked="" type="checkbox"/> LETTER |
| | | | NO. & TYPE OF CONTAINER |
| | | | ENVELOPE |
| | | | CARTONS |
| | | | <input checked="" type="checkbox"/> PACKAGE |
| | | | FOOT LOCKER |
| | | | SPECIAL INSTRUCTIONS |
| | | | REMOVE GI |
| | | | SHIP BLOODSTAINED |
| | | | <input checked="" type="checkbox"/> SHIP DAMAGED |
| REMOVE BL'DSTAINED | | | |
| REMOVE DAMAGED | | | |
| FILMS REMOVED | | | |
| DIARY REMOVED | | | |
| PUM/RM/mjo'e | | SUMMARY COURT DATA | DATE ACTION TAKEN |
| DATE OF FINDING | APPLICANT | | 7/22 |
| <p>REMARKS</p> <p><i>File and 7/25/47</i></p> | | | MAIL REVIEWER (initials) |
| | | | <i>sm</i> |
| | | | <input checked="" type="checkbox"/> SHIPPED |
| | | | <input checked="" type="checkbox"/> FRANKED |
| | | | EXPRESS |
| | | | FREIGHT |
| | | | DATE SHIPPED |
| | | | JUL 24 194 |
| | | | SHIPPING CLERK |
| | | | <i>[Signature]</i> |
| ROUTING | | | |
| <input checked="" type="checkbox"/> ACCOUNTING BRANCH | | | |
| <input checked="" type="checkbox"/> WAREHOUSE | | | |
| FILE | | | |
| ORDER FOR ACTION | | | |

Unknown # 7862

244

1. May 46

| | | | | | |
|---------------------------------|--------|--------------|------------------------|--------|--|
| McMANUS, THOMAS W. | | (ADDITIONAL | | | |
| BAY | PALEET | BOX | TALLY 8272 | TYPE P | |
| whse space # 13 | | | RECOVERED FROM SALVAGE | | |
| EFF QM FORM 43 5 JULY 1945 = | | | | | |

| | | |
|--|---|---|
| ATTACHMENTS <input checked="" type="checkbox"/> INBOUND INVENTORY <input 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 checked="" type="checkbox"/> <i>attachment</i> | RETURN TO E. RICHTER EFFECTS INVENTORY ARMY EFFECTS BUREAU | STATUS <input type="checkbox"/> DECEASED <input type="checkbox"/> MISSING <input type="checkbox"/> P. O. W. <input type="checkbox"/> ABANDONED <input type="checkbox"/> UNKNOWN |
| BAGS, CLOTH OR TRAVEL BELT, MONEY (NO MONEY) BILLFOLD (NO MONEY) BOOKS BRACELET, IDENT. CAMERAS CLOTHING MISC. ARTICLES RELIGIOUS ARTICLES RIBBONS, DECORATION SHORT SNORTER SOUVENIR MONEY SOUVENIRS TESTAMENTS TOWELS & WASHCLOTHS U. S. MONEY (AMOUNT) WATCH WINGS | BELT BOOKS, ADDRESS BOOKS, PILOT LOG BRUSHES CASE CLOTH, WASH COATS FOOTLOCKER FOOTWEAR, PR. GLASSES GLOVES, PR. HANDKERCHIEFS HEADWEAR JACKETS KITS KNIVES LETTERS LIGHTERS | OVERCOATS PAPERS, PERSONAL PENCIL, MECHANICAL PEN, FOUNTAIN PHOTOS PIPES RINGS SCARFS SHIRTS SOCKS, PR. STATIONERY TIES TOBACCO TOILET ARTICLES TOWELS TROUSERS, PR. TRUNKS, PR. UNDERWEAR |

*1. Ring Wedding
 Gold Color -
 Engraved Inside
 @ H. D. L. - T. W. M.*

| | |
|---|---|
| CONTAINERS ADDRESSED TO NONE NAME AND STATUS VARIATIONS <i>Don't by Roney note filed 6/26/47 at</i> | INFORMATION NONE CROSS REFERENCE German - A. E. B. |
|---|---|

DAMAGED

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

Index strip made

SALVAGED SALVAGE
NOV 6 1946 OCT 31 1946
 U.R. *elu*

| | | | | |
|---------------------|--------------------|----------------|----------|-----------------------------|
| TALLY NO. | ORIG. NO. OF PKGS. | EXAMINING DATE | BOX NO. | SHEET |
| 8272 | | 1-May-46 | | OF SHEETS |
| NAME | | | A. S. N. | |
| Unknown # 7862 | | | | |
| ORGANIZATION | | | RANK | |
| | | | | |
| WAREHOUSE SPACE | | EXAMINED BY | | DIARY REMOVED |
| 244 | | McNeel | | PHOTO FILM REMOVED |
| PACKAGE DESCRIPTION | | PACKED BY | | MOTION PICTURE FILM REMOVED |
| 715w | | Hall | | SHIPPED |
| WEIGHT | | INSPECTED BY | | DATE |
| | | | | BY WHOM |
| | | STORED BY | | |
| | | J/B | | |

PM

ADDITIONAL REMARKS

REMOVALS (other than G.I.)

DAMAGES (List type of damage-extent)

1. Ring - Bent.

SHORTAGES

U. S. GOV'T CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

001 37 110

100000

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

INVENTORY CLERK

SUPERVISOR

G. I. REMOVED

ARMY EFFECTS BUREAU
EFFECTS INVENTORY

RECEIVED

| | | | | |
|--------------------|--------|-----|-------|----------|
| UNIDENTIFIED # 134 | | | | |
| BAY | PALLET | BOX | TALLY | TYPE AND |
| | | | 8272 | PKG |

2

PERSONAL EFFECTS & BAGGAGE
 FORM 290
 APO 913 U.S. ARMY

TALLY INVENTORY RECORD - TALLY IN No 633-4100

NAME UNIDENTIFIED E 7th DATE 7 AUG 45
 RANK & ASN LINE SHIP TO ---
 ORGANIZATION --- ADDRESS ---
 TYPE OF CONTAINER ENV STATUS UNIT

- INVENTORY -

| Item No. | Quantity | Description | Remarks (see reverse side) |
|----------|----------|---------------------------------------|----------------------------|
| 1 | | 1 BING (ENGRAVED) (D-L O T O R W M) ← | |
| 2 | | | |
| 3 | | | |
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| 20 | | | |

Approved Julian 1945 Ernest V. CHRIS, 1st Lt INF. Tag Number 633-4100
 Inspecting Officer.

Certificates, Affidavits and Customs
Declaration
(Strike out portions inapplicable)

- 1. I certify and declare that the above items of Government property indicated in "Remarks" as "A" were purchased by me and are my personal property.

Name

Rank and ASN.

- 2. As his Commanding Officer, I certify that the above named has by authority of his theater Commander been authorized to retain the above of captured enemy material indicated in "Remarks" as "B"

evidenced to me his ownership and right to possess the above items of ~~British-Russian-Canadian~~ Government material indicated in "Remarks" as "C".

Date _____

- 3. The following Customs Declaration will be accomplished in all cases. In addition the Customs Declaration tag will be accomplished and affixed to the container.

CUSTOMS DECLARATION

I declare that all items listed herein consist of personal or household effects either taken abroad for my personal use, except the following:

(Here list items or write "No exceptions" as appropriate)

Reprocessed
I declare that this baggage consist of personal or household effects of a member of the United States armed forces, and that it is being forwarded to the United States by reason of Government instructions regarding the movement of the owner or the articles.

Date _____

Signature: Howard L. Stewart.
Rank & ASN: 1/LT. QNO 0392090
Inspecting Officer

13.15/44

KM 8791

Eigentum des toten englischen Fliegers

U

Nr. _____ abgeschlossen am 6. 8. 44

in d. cr. MARAUDER

be ST. PIERRE DU VAUVRAY
9 km nordöstlich LOUVIERS

An O.K.W. Ausl./Abw. I G.



KANSAS CITY QUARTERMASTER DEPOT
ARMY EFFECTS BUREAU

601 HARDESTY AVENUE
KANSAS CITY 1, MISSOURI

S-31 Jul 47
PUM/ES/fkw
1 July 1947

IN REPLY REFER TO 129136

Mrs. Oma L. McManus
157 "A" Street
Bakersfield, California

Dear Mrs. McManus:

The Army Effects Bureau has received some additional property of your husband, Second Lieutenant Thomas W. McManus, Jr., consisting of a wedding ring.

It is my intention to forward this property to you; however, in view of the lapse of time since our previous correspondence, I shall appreciate it if you will first confirm your address.

Your reply may be made at the foot of this letter, if desired, and mailed in the inclosed self-addressed envelope which needs no postage.

Sincerely yours,

1 Incl
Envelope

P. U. Maxey
P. U. MAXEY
Lt Col, QMC
Effects Quartermaster

28
7/25/47

Lt. Col. P. U. Maxey -

The above address is correct.
Please forward this property to me.

Oma Louise McManus



KANSAS CITY POSTMASTER DEPT
KANSAS CITY, MO.

5-01 Jul 47
TOM/23/2W
1 July 1947

135155

Mr. J. E. ...
100 W. ...
Kansas City, Missouri

The first ...
... of your ...
... of a ...
It is my intention to ...
... in view of the ...
... I shall ...
Your reply ...
... which ...
... no ...

Sincerely yours,

F. W. ...
1101 ...
Missouri

RECEIVED
K.C.M. DEPT EFFECTS BUREAU
JUL 12 1947
KANSAS CITY, MO.
JUL 14 1947 PM

1001
Missouri

Dear Sirs:
Please forward the property to me
the above ... is correct.
Very truly yours,
F. W. ...

REPLY

TO: Correspondence Branch - Army Effects Bureau

- No record of any effects.
- No record of missing items.
- (*) Inventory received from:

(Dated)

(Signed by)

Effects shipped to:

| | | | | |
|--------------------------|--------------|------------|--------------------|-------------|
| <input type="checkbox"/> | Parcel _____ | Date _____ | Baggage List _____ | Sheet _____ |
| <input type="checkbox"/> | Parcel _____ | Date _____ | Baggage List _____ | Sheet _____ |

Funds: \$ _____ Transmitted on List F- _____ Date _____

Remarks:

Unknown # 7862, KU 2791 is identified as THOMAS, W. MCMANUS, JR. O-750423. Identification was established by initials O.L.D. TO T.W.M. and Cas. date on German envelope.

6/25/47

*File
EX
6/26/47*

ETA Records Branch

(*) This information need not be given on inventories covering property already received at AEB.

KANSAS CITY QUARTERMASTER DEPOT
ARMY EFFECTS BUREAU

Case No. UNKNOWN # 7862

E-741

REQUEST

TO: European Theater Records Branch - Army Effects Bureau

Request examination of ETA records and report concerning missing, or allegedly missing, personal effects of:

| | | | | |
|-----------------------|--------------|------|-----------------|--------|
| <u>UNKNOWN # 7862</u> | | | <u>DECEASED</u> | |
| (Last Name) | (First Name) | (MI) | (ASN) | (Rank) |
| <u>AIR CORPS</u> | | | | |
| (Organization) | | | (Status) | |

Bureau records do not indicate that any property of subject has been received here.

Property received at AEB is listed on following overseas inventories:

Allegedly missing items, not received here, consist of:

Remarks:

(a) PROPERTY RECEIVED

(b) PROPERTY NOT RECEIVED

(c) NO RECORD OF PROPERTY

N. WHIPPLE
Chief Clerk
Correspondence Branch

RTB:IB:mms
September 18, 1945

129136

Mrs. Oma L. McManus
157 "A" Street
Bakersfield, California

Dear Mrs. McManus:

The Army Effects Bureau has received from overseas some more property of your husband, Second Lieutenant Thomas W. McManus, Jr.

This property, contained in one metal chest, is being sent you for distribution. 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. KOOB
1st Lt., OMC
Officer-in-Charge
SJ Branch

vld

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU.

ORDER FOR SHIPMENT

Mrs. Oma L. McManus

SHIP TO:

157 "A" Street

Effects of: 2nd Lt. Thomas W. McManus, Jr. Bakersfield, California
Name

ASN 0-750423

Case No. 129136 D

Wt.

DATE 18 September 1945
RTB:IB:mms

Drury
FOR: Effects Quartermaster

REMARKS:

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

 Remove G.I.
 X Note discrepancy in Name & Rank
 Films removed
 Diary removed
 Laundry removed

ROUTING:

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

REMARKS:

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

SEP 22 1945

EK

Shipping Clerk

NAME MC MANUS, T. W. LT. 0423

| BAY | PALLET | BOX | TALLY |
|--------------|-------------|-------------|-------|
| 20 | 22 | | 592 |
| TYPE OF PKG. | WHSE. SPACE | INVENTORIED | |
| METAL CHEST | | | |

Eff. QM Form 43

129,136

| | | | | |
|-------------------------------------|------------------------|--|-------------------------------------|-------------------------------------|
| ATTACHMENTS | | EFFECTS INVENTORY ARMY EFFECTS BUREAU | STATUS | |
| <input type="checkbox"/> | INBOUND INVENTORY | | DECEASED | <input type="checkbox"/> |
| <input type="checkbox"/> | G. R. OR SUB GR LABEL | | MISSING | <input checked="" type="checkbox"/> |
| <input type="checkbox"/> | WILL OR POWER OF ATTY. | | P. O. W. | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | TALLY IN FORM 43 | | ABANDONED | <input type="checkbox"/> |
| | | UNKNOWN | <input checked="" type="checkbox"/> | |

| | | | | |
|------------------------|------------------|--------------------|---|---------|
| BAGS, CLOTH OR TRAVEL | BELT | OVERCOATS | 1 | Rode |
| BELT, MONEY (NO MONEY) | BOOKS, ADDRESS | PAPERS, PERSONAL | | |
| BILLFOLD (NO MONEY) | BOOKS, PILOT LOG | PENCIL, MECHANICAL | 1 | Sweater |
| BOOKS | BRUSHES | PEN, FOUNTAIN | | |
| BRACELET, IDENT. | CASE | PHOTOS | | |
| CAMERAS | CLOTH, WASH | PIPES | | |
| CLOTHING | COATS | RINGS | | |
| MISC. ARTICLES | FOOTLOCKER | SCARFS | | |
| RELIGIOUS ARTICLES | 4 FOOTWEAR, PR. | SHIRTS | | |
| RIBBONS, DECORATION | GLASSES | SOCKS, PR. | | |
| SHORT SNORTER | GLOVES, PR. | STATIONERY | | |
| SOUVENIR MONEY | HANDKERCHIEFS | TIES | | |
| SOUVENIRS | 3 HEADWEAR | TOBACCO | | |
| TESTAMENTS | JACKETS | TOILET ARTICLES | | |
| TOWELS & WASHCLOTHS | KITS | TOWELS | | |
| U. S. MONEY (AMOUNT) | KNIVES | 4 TROUSERS, PR. | | |
| WATCH | LETTERS | 1 TRUNKS, PR. | | |
| WINGS | LIGHTERS | UNDERWEAR | | |

| | |
|---|----------------------------------|
| CONTAINERS ADDRESSED TO <i>none.</i> | INFORMATION <i>Reshuffled</i> |
| NAME AND STATUS VARIATIONS | CROSS REFERENCE |

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

file per 9-14

| | | | | |
|--|-----------------------------|----------------------------------|--------------------------|----------------------------|
| TALLY NO. <i>593</i> | ORIG. NO. OF PKGS. <i>1</i> | EXAMINING DATE <i>6 Sept. 45</i> | BOX NO. | SHEET <i>1</i> OF SHEETS |
| NAME <i>T. W. McMANUS</i> | | | A. S. N. <i>0-750423</i> | |
| ORGANIZATION | | | RANK <i>Lt.</i> | CASE NO. |
| WAREHOUSE SPACE <i>7-805</i> | EXAMINED BY <i>Bain</i> | DIARY REMOVED | | |
| | PACKED BY <i>S. Case</i> | PHOTO FILM REMOVED | | |
| | | MOTION PICTURE FILM REMOVED | | |
| PACKAGE DESCRIPTION <i>1 Metal Chest</i> | WEIGHT <i>49</i> | INSPECTED BY | SHIPPED | |
| | | STORED BY | DATE <i>SEP 22 1945</i> | BY WHOM <i>[Signature]</i> |

ADDITIONAL REMARKS

REMOVALS (other than G. I.)

DAMAGES (List type of damage-extent)

SHORTAGES

U. S. GOV'T CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

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

INVENTORY CLERK

SUPERVISOR

G. I. REMOVED

(3 copies to Effect M. ETOUSA, 1 copy in box with effects, 1 copy retained)

20 September 1944
Date



670TH BOMB SQ (L) 416TH BOMB GP (L), APO 140, New York
(Organization and A.P.O. Number)

SUBJECT: Transmittal of Inventory of Personal Effects.

TO : Effects Quartermaster, ETOUSA, Depot G-14, A.P.O. 507,
U.S. Army.

Transmitted herewith in accordance with Adm. Cir. #80, dated 25 Oct. 1943, Hq, SOS, ETOUSA, is Inventory of effects concerning subject named below.

| | | | | | |
|----------------|---------------|---------------|--------------|-----------------|--------------------------------|
| <u>McManus</u> | <u>Thomas</u> | <u>W. Jr.</u> | <u>2d Lt</u> | <u>0-750423</u> | |
| (Last Name) | (First Name) | (MI) | (Rank) | (ASN) | (Control No) |
| | | | | | (For use of Effects QM ETOUSA) |

Organization 670th Bomb Sq (L), 416th Bomb Gp (L)
(Unit - - - - Not Branch or Service)

*Status. (~~Deceased~~ Missing in Action, ~~prisoner of war~~) on the Sixth day of August 1944.

Designated Beneficiary (With address) Mrs Ona Louise McManus (Wife)
157 A Street
Bakersfield, California

Cl. II Assets: Cash found in effects, less cost of money order inclosed herewith

| | | | |
|------------------------|------------------|------------------------|------------------|
| U.S.M.O. # <u>None</u> | Amt \$ <u>--</u> | U.S.M.O. # <u>None</u> | Amt \$ <u>--</u> |
| U.S.M.O. # <u>None</u> | Amt \$ <u>--</u> | U.S.M.O. # <u>None</u> | Amt \$ <u>--</u> |

U.S. Official Check # None Amt. _____ Bank _____
(Name and Branch)

#Bank Accounts _____

#Debtors None

#Creditors None

#Inclosed is None
(Will, Power of Attorney, War Bond, Travelers Checks. Describe fully)

*Strike out words not applicable.
#Negative report where applicable.

(OVER)

INVENTORY OF EFFECTS

Previous inventory submitted 13 August 1944. These effects arrived in foot locker in September 1944.

- 1 pr overshoes
- 1 pr boots
- 1 garrison cap
- 1 pr low cut shoes
- 1 bath robe
- 1 pr tennis shoes
- 1 pr athletic pants
- 1 pr pants (green)
- 2 pr khaki pants
- 1 wool sweater
- 2 caps (flight, khaki)
- 2 shirts (wool, tan)
- 1 pr gabardine pants

I certify that the foregoing inventory comprises all of subjects effects and that effects were shipped to Effects QM, Stanley Warehouse Division, U S Forces, Liverpool, England by delivering Govt MT on 30 Sept 1944.

Joseph A. Haubrich
JOSEPH A. HAUBRICH,
1st Lt, Air Corps,
Personnel Officer.



ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT

601 HARDESTY AVENUE
KANSAS CITY 1, MISSOURI

GHG:VC:cms
July 4, 1945

129136
IN REPLY REFER TO _____

Dear Mrs. McManus:

The Army Effects Bureau has received some additional property of your husband, Lieutenant Thomas W. McManus, Jr.

This property, contained in two cartons, is being sent you for distribution. 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.

As previously indicated, personal property is transmitted by this Bureau for distribution according to the laws of the state of decedent's legal residence.

As a part of your husband's property, this Bureau received U.S. Treasury check, payable to him, in the amount of \$100.00. This check could not be cashed here and, therefore, in accordance with existing regulations, was sent to the General Accounting Office, Washington 25, D.C., for proper disposition. For further information in this regard, you should communicate directly with that office.

Extending every sympathy, I am

Sincerely yours,

HARRY NIEMIEC
2nd Lt. Q.M.C.
Chief, Correspondence Branch

9

65

71

32

24

pc

ARMY SERVICES FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO: Mrs. Oma L. McManus
157 "A" Street
Bakersfield, California

Effects of: 2nd Lt. T. W. McManus, Jr.

0750423

Case No. 129136 - D

It.

DATE June 30, 1945
GHG:VC:mrd

W. Mc
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.

*401 Carter Jim
v2 540-45*

REMARKS:

Franked **FRANKED**
Est. Exp. Chgs.
Est. Frt. Chgs.
No. of packages 2 JUL 9 1945

[Signature]
Shipping Clerk

| | | | | |
|---|-------------------------------|--|--------------------|-------------------------------------|
| PACKAGE DESCRIPTION #1 Cl | ARMY EFFECTS BUREAU INVENTORY | | DECEASED | |
| | | | MISSING | <input checked="" type="checkbox"/> |
| | | | P.O.W. | |
| | | | ABANDONED | |
| | | | TALLY NO. | 7975 |
| | | | INV. DATE | 10 May 45 |
| | | | ORIG. NO. OF PKGS. | 1 |
| | | | BOX NO. | |
| | | | SHEET OF SHEETS | |
| | | | ORGANIZATION | |

NAME Thomas W. Mc Manus, Jr.
 A.S.N. 0-7504 23 RANK LT

129136
 012

| | | |
|-----------------------|-------------------------|-----------------------------|
| Belt | TOWELS & WASHCLOTHS | WINGS |
| BELT MONEY (NO MONEY) | CLOTHING | BAGS, CLOTH OR TRAVEL |
| Cloth, Wash | BRACELET IDENT. | BILLFOLD (NO MONEY) etc |
| Coats | Brushes | Case <u>Brieg.</u> |
| Footwear, Pr. | CAMERAS | Footlocker |
| Gloves, Pr. | Glasses <u>release.</u> | 2 KIT, SEW, TLT. OR WRITING |
| Handkerchiefs | Knives | BOOKS |
| Headwear | Lighters | Books, Address |
| Jackets | MISC. INSIGNIA | Books, Pilot Log |
| Overcoats | Pen, Fountain | DIARY (REMOVED FOR DUR) |
| 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 |
| | | Stationery |
| | | TESTAMENTS |
| | | U.S. MONEY (AMOUNT) |

18 Electric Razors

file B#

| | | | |
|---|--------------|-------------------|---------------------|
| REMARKS | ATTACHMENTS | FORM #54 | FORM #100 |
| Mrs. Ethel M. Manus. 2004. Verde St. Cal. Bakersfield | | | None. |
| Mrs. Oua Louise M. Manus. 187 A. St. Bakersfield California | | | |
| WAREHOUSE SPACE | STORED BY | WEIGHT | G.I. REMOVED |
| 7-98 | JOC | | SHORTAGE ON REVERSE |
| INVENTORIED BY | DATE SHIPPED | | IDENT. TAGS REMOVED |
| Gibler | JUL 9 1945 | | DIARY REMOVED |
| PACKED BY | CHECKED BY | #43 OR ADDITIONAL | LOCKED STORAGE |
| Root | JMB | | LAUNDRY REMOVED |
| | | | FILM REMOVED |

LAUNDRY

RID

ADDITIONAL REMARKS

SHORTAGES

U.S. GOVT. CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

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

INVENTORY CLERK

SUPERVISOR

G.I. REMOVED

NAME MC MANUS, THOMAS V. LT. 0423

| BAY | PALLET | BOX | TALLY |
|--------------|-------------|-------------|-------|
| 56 | 45 | | 7975 |
| TYPE OF PKG. | WHSE. SPACE | INVENTORIED | |
| CRATE | | | |

Form 43

JUN 25 1945

ARMY EFFECTS BUREAU-
DRY CLEANING LIST

ARMY EFFECTS BUREAU
LAUNDRY LIST

TALLY NO.

TALLY NO.

053 ✓ 102 ✓

129136
PIT

10 May 1945

M-0423E

M-0423E

Thomas W. McManus, Jr.
0-750423

ctm

| DRY CLEANING | | do not use | LAUNDRY | | do not use |
|--------------|---------------------------------|------------|---------|-------------------------------------|------------|
| 1 | SHIRTS, WOOL | 1 | 1 | SHIRTS, DRESS, COTTON | 1 |
| 2 | TROUSERS, WOOL | 2 | | HANDKERCHIEFS | |
| | COAT, SERVICE, WOOL | | 2 | TROUSERS, COTTON | 2 |
| | JACKET, FIELD | | | TIE, COTTON | |
| | OVERCOAT, LONG | | | UNDERSHIRTS, COTTON | |
| | OVERCOAT, SHORT, WOOL | | | DRAWERS, COTTON | |
| | CAP, GARRISON, WOOL | | | SWEATSHIRTS, COTTON OR WOOL | |
| | CAP, GARRISON, W/LEATHER COTTON | | | DRAWERS, WOOL | |
| 1 | CAP, SERVICE, WOOL | 1 | | SOCKS, COTTON, PR. | |
| | CAP, SERVICE, W/LEATHER COTTON | | | SOCKS, WOOL, PR. | |
| | TIES, WOOL | | | PAJAMA TOPS | |
| | GLOVES, LEATHER OR WOOL | | | PAJAMA BOTTOMS | |
| | SCARFS | | | FATIGUES, 1 PC. COTTON | |
| | SWEATERS | | | FATIGUES, TOPS, COTTON | |
| | TRUNKS, SWIM | | | FATIGUES, TROUSERS, COTTON | |
| | | | | CAP, FATIGUE, COTTON | |
| | | | | BELT, COTTON | |
| | | | | TOWEL | |
| | | | | CLOTH, WASH | |
| | | | | CAP, GARRISON, "NO LEATHER", COTTON | |
| | | | | CAP, SERVICE "NO LEATHER", COTTON | |
| | | | | GLOVES, COTTON | |
| | | | | LEGGINGS | |
| | | | | SUPPORTERS, ATHLETIC | |
| | | | | SCARFS | |
| | | | | TRUNKS, GYM | |
| | | | | BAGS, BARRACKS | |
| | | | | | 21 |
| | | | | | 77 |

| | | | | |
|-----------------|--------------|------------|----------------|--------------|
| WAREHOUSE SPACE | P-13 | STORED BY | <i>Jam</i> | WEIGHT |
| INVENTORIED BY | <i>Blair</i> | CHECKED BY | <i>L. Reek</i> | DATE SHIPPED |
| PACKED BY | | | | JUL 9 1945 |

Dandy

M-0453E

M 0453E

M

0453E

Faint, mostly illegible text on the left side of the page, possibly bleed-through from the reverse side.

11

11

DATE SHIPPED

STORING PLACE

STORING PLACE

MAINTAINED BY

CHECKED BY

DATE OF LAST CHECK



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

JRM:VB:rw
May 28, 1945

129136

IN REPLY REFER TO

Mrs. Oma L. McManus
157 "A" Street
Bakersfield, California

Dear Mrs. McManus:

I am inclosing a check for \$163.52, representing funds of your husband, Second Lieutenant Thomas W. McManus, Jr.

No other property belonging to him has been received at the Army Effects Bureau to date.

Our action in transmitting funds does not, of itself, vest title in the recipient. Such property is forwarded for distribution according to the laws of the state of the decedent's legal residence.

Money ordinarily is sent from overseas by mail in advance of other effects; therefore, it is probable that additional belongings of decedent will reach this Bureau at a later date. As it is intended to forward any such property to you promptly upon receipt here, I ask that you please notify this Bureau if there is a change in your address within the next few months.

I wish to express my sympathy in the loss of your husband.

Sincerely,

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

1 Incl--
Check

78

oo

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mrs. Oma L. McManus

SHIP TO:

157 "A" Street

Effects of:

2nd Lt. Thomas W. McManus, Jr. Bakersfield, California

Name

O-750423

ASN

129136 D

Case No.

Tt.

DATE 19 May 1945

A. O'Brien

FOR: Effects Quartermaster

REMARKS: JRM:VB:rw

Inclose Bureau Check
Acct. No. 82455
Amount \$163.52
 Inclose "Valuables" item
 Ship "Valuables" item(s)

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

ROUTING:

75687 emh

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

82455

129136

May 28

45

Mrs. Oma L. McManus

163.52

One Hundred Sixty-Three and 52/100

REMARKS:

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

Shipping Clerk

ARMY EFFECTS BUREAU
INVENTORY

ms
129136
CASE NO.

TYPED BY

W
DATE

3-9-45
STATUS

Deid
NAME

Thomas W. McManus Jr
A.S.N.

O-75-0423
RANK

2nd Lt
ORGANIZATION

AMOUNT

82455
ACCOUNT NO.

163.52
LIST NO.

me
PAID Check No. *75687*

uk 432
REMARKS

ACCOUNTING INVENTORY



HEADQUARTERS
MINTER FIELD
BAKERSFIELD, CALIFORNIA

IWE/et
23 May 1945

293 MFAG

SUBJECT: Personal Effects.

TO: Commanding Officer, Effects Quartermaster, Army Effects Bureau,
Kansas City Quartermaster Depot, Kansas City, Missouri.

1. This station is attempting to assist Mrs. Oma Louise McManus, widow of Thomas W McManus, Jr, 2nd Lt, Air Corps, O750423, regarding personal funds in the possession of her late husband at the time of his death.
2. Mrs. McManus received a letter from your station in April 1945 stating that this money was in the possession of your office. Confirmation of her address, which is 157 A Street, Bakersfield, California, was requested. This confirmation was sent, but to date no check has been received by Mrs. McManus.
3. Request this check be forwarded to Mrs. McManus at the above address.
4. Mrs. McManus further states that no personal effects of her late husband have been received by her and requests that she be notified as to whether or not they have been received at your station.

FOR THE COMMANDING OFFICER:

IVAN W EVELAND,
Major, Air Corps,
Asst Adjutant.

1945

MAY 24 1945

COMMUNICATIONS SECTION

KANSAS CITY, MISSOURI

TO: SAC, KANSAS CITY

FROM: SAC, ST. LOUIS

Re: [Illegible]

[Illegible text follows, appearing to be a letterhead memorandum or report.]

[Handwritten Signature]

Special Agent in Charge

St. Louis, Missouri

KANSAS CITY, MO.
MAY 28 1945

DISPATCHED
MAY 24 1945
HQ. AIRS
WINTER FIELD
BAKERSFIELD
CALIF.

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

JRM:VB:rw
Case No. 129136
Date 19 May 1945

SUBJECT: Report of transaction in disposing of the effects of

Thomas W. McManus, Jr., 0-750423 late a
(Name of deceased) (Army Serial Number)
Second Lieutenant, Air Corps who died
(Grade) (Organization, Army or Service)
on the 6 day of August, 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.O., 228 Hq., KCQM Depot, dated 25 September 1943, for the purpose of disposing of the effects of the above-named soldier, or person subject to military law, reports that:

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

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

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

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

FINDING

Before a Summary Court-Martial which convened at Kansas City, Missouri, on 11 May 1945, pursuant to Special Orders 228, Headquarters KCQM Depot, dated 25 September 1943, the application or affidavit of Mrs. Oma L. McManus 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. Oma L. McManus of 157 "A" Street, Bakersfield State of California, (Number, Street or Avenue) (City, Town or Village) 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, G.M.C.
(Name, Rank, Organization)
SUMMARY COURT MARTIAL

MRS. THOMAS W. McMANUS, JR.

A STREET

BAKERSFIELD, CALIFORNIA

May 2, 1945

P. L. Koob
2nd Lt. Q. M. C.
Officer-in-charge SJ Unit

IMMEDIATE ACTION

Dear Sir:

Reference # 129136

This is to confirm my address as 157 A Street, Bakersfield, California, so that you may send me a check for \$163.52 belonging to my husband 2nd Lt. Thomas W. McManus, Jr.

Also you say your records carry him as missing in action. On February 13, 1945 I received a letter from the Adjutant General stating that my husband was killed in action on August 6th, 1944. So I am wondering if all of his personal effects can be returned to me soon.

Sincerely,

*Mrs. Oma Louise McManus**M
5/11*

KANSAS CITY, MO.

MAY - 5 1945



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

(S-5-9-45)
JRM:MH:gk
April 9, 1945

IN REPLY REFER TO 129136

Mrs. Oma L. McManus
157 A Street
Bakersfield, California

Dear Mrs. McManus:

The Army Effects Bureau has received funds in the amount of \$163.52, belonging to your husband, Second Lieutenant Thomas W. McManus, Jr.

Since our records indicate that he has been reported missing in action, it is our desire that some close relative receive this money for safe-keeping, pending the return of the owner or receipt of additional information.

If you will please confirm your address, a check covering the funds will be forwarded to you, together with a receipt for your signature.

Your reply may be made at the foot of this letter, if desired, and mailed in the inclosed self-addressed envelope which needs no postage.

I regret the circumstances necessitating this letter, and sincerely hope that your husband may later be reported safe.

Yours very truly,

LM

P. L. KOOB
2nd Lt. Q.M.C.
Officer-in-Charge
SJ Unit

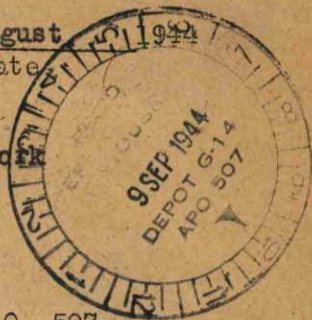
1 Incl--
Envelope

(3 copies to Effects Q.M. ETOUSA, 1 copy in box with effects, 1 copy retained)

13 August 1944

Date

670th Bomb Sq (L), 416th Bomb Gp (L), APO 140, New York
(Organization and A.P.O. Number)



SUBJECT: Transmittal of Inventory of Personal Effects.

TO : Effects Quartermaster, ETOUSA, Depot G-14, A.P.O. 507,
U. S. Army.

Transmitted herewith in accordance with Adm. Cir. #80, dated 25 Oct. 1943, Hq, SOS, ETOUSA, is Inventory of effects concerning subject named below.

| | | | | | | |
|----------------|---------------|-----------|-----------|--------------|-----------------|--------------------------------|
| <u>McManus</u> | <u>Thomas</u> | <u>W.</u> | <u>Jr</u> | <u>2d Lt</u> | <u>0-750423</u> | <u>29205</u> |
| (Last Name) | (First Name) | (MI) | | (Rank) | (ASN) | (Control No) |
| | | | | | | (For use of Effects QM ETOUSA) |

Organization 670th Bomb Sq (L), 416th Bomb Gp (L)
(Unit - - - - Not Branch or Service)

*Status. (~~Deceased~~, Missing in Action, ~~Prisoner of War~~) on the Sixth day of August 19 44.

Designated Beneficiary (With address) Mrs. Ona Louise McManus (Wife)
157 A Street,
Bakersfield, California

Cl. II Assets: Cash found in effects, less cost of money order inclosed herewith

| | | | |
|--------------------------|------------------------|------------------------|--------------------|
| U.S.M.O. # <u>8672</u> ✓ | Amt \$ <u>100.00</u> ✓ | U.S.M.O. # <u>None</u> | Amt \$ <u>None</u> |
| U.S.M.O. # <u>8673</u> ✓ | Amt \$ <u>63.52</u> ✓ | U.S.M.O. # <u>None</u> | Amt \$ <u>None</u> |

U.S. Official Check # 102126 ✓ Amt. 100.00 ✓ Bank United States
(Name and Branch)

#Bank Accounts None

#Debtors None

#Creditors None

#Inclosed is None
(Will, Power of Attorney, War Bond, Travelers Checks.)

Describe fully)

*Strike out words not applicable.
#Negative report where applicable.

Date SEP 11 1944
Receipt is acknowledged of Class II
Assets as shown on basic communication.

EFFECTS QM.

(OVER)

SEE CASUALTY REPORT No. 30
DATED 30/1/45

2 Incls
Incl 1

Inventory of Effects

3 Bibles
 1 Prayer Book
 1 Pr Pilot's Wings

1 Personal 201 File
 2 Fountain Pens
 1 Folder with Pictures

1 Belt Buckle
 2 Pkgs Postal Cards
 1 Tobacco Pouch
 1 Sewing Kit
 1 Pkg Shoe Laces
 2 Pocket Knives
 1 Hand bag
 1 Picture Folder
 1 Name Stamp
 1 Writing Paper Folder
 1 Electric Razor (Remington)
 1 Pocket Comb
 1 Razor strap
 1 Trench Coat
 2 Pr Pink Pants
 1 Blouse
 1 Sport Jacket
 1 OD Shirt
 1 Field Jacket
 4 Khaki Shirts
 2 Khaki Pants
 1 OD Pants

2 Scarfs
 2 Tea Shirts
 3 Undershirts
 4 Shorts
 3 Towels
 1 Pr Gloves
 1 Tie
 1 Pr shoes (low cut)
 1 Pr House shoes
 1 Pr Leather gloves
 4 Pr socks
 11 Handkerchiefs
 1 Wallet

I certify that the foregoing inventory comprises all of
 subjects effects and that effects were shipped to Effects
 QM, Stanley Warehouse Division, U S Forces, Liverpool,
 England, by delivering by Gout MT

on SEP 3 1944.

Joseph A. Haubrich
 JOSEPH A. HAUBRICH,
 1st Lt, Air Corps,
 Personnel Officer.

129136
NW

CONTROL NO.

29205

uX
Effects QM ~~ETUSA~~
General Depot G-14
APO 507
New York

WM/asm.

11th September

2nd Lt. Thomas W. McManus O-750423.
670th Bomb Sq. 416th Bomb Gp.

6th August

MIA

HUGH F. DAVIS.
XXXXXXXXXXXXXXXXXXXX

1

1. Treasurer of the United States Check No. 102,126 in the amount of \$100.00 payable to the order of W. V. Kay, 1st Lt., FD. Agent Finance Officer at Sta #4. dated 14 June 1944, indorsed payable to the order of Thomas W. McManus, Jr. 2nd Lt. AC 0750423. *211-162*

Send to DAO

H
Army Effects Bureau, Kansas City
Quartermaster Depot, 601 Hardesty
Avenue, Kansas City 1, Missouri

Receipt acknowledged.

SEP 23 1944
For The Effects Quartermasters

SEP 25 1944

INVENTORY

CONTROL NO.

Exhibits on Thomas
General Depot G-14
APO 807
New York

202

11th Street
Kansas City, Mo.
2nd Lt. Thomas W. Williams
412th Bomb Sq.

SEP 22 1944

MIA

6th Avenue

HUGH F. DAVIS
XXXXXXXXXXXXXX

1. Treasurer of the United States Check No. 109,128 in the amount of \$100.00 payable to the order of V. K. ...
Finance Officer at ... dated 14 June 1944, involved payable to the order of Thomas W. Williams, Jr. 2nd Lt. ...

Army Branch Bureau, Kansas City
Comptroller, Depot, 801 Main Street
Kansas City, Missouri

Receipts acknowledged
SEP 22 1944
For the Effects Comptroller

SEP 22 1944

INVENTORY

REPORT OF LONG DISTANCE TELEPHONE CALL mpDate of Call 9 January 1945 Time 2:25 P.M.Originating Office Memorial Division, OQMGStation or Place call made to Army Effects BureauPerson placing call Lt. Col. Mayo A. DarlingPerson receiving call Colonel John R. Murphy

Following is a resume of the conversation:

Col. Darling inquired as to whether or not the Bureau had property of 2nd Lt. Thomas W. Mollanus, Jr., O-750423, MIA August, '44. If the property was in the Bureau it was desired that the insignia be forwarded, air mail, to Mrs. Oma L. Mollanus, 157 A Street, Bakersfield, California (during telephone conversation tally-in record checked and property not received).

Col. Darling said the USO organizations had accumulated some lost baggage of military personnel and inasmuch as there was not much of it, Col. Darling wondered if such property might be sent the Bureau at USO expense for disposition. Col. Murphy said that he was being flooded with comparable property from other agencies but that it could be handled, with a reservation that if the USO organizations started sending in all manner of junk, the permission should be rescinded. Col. Darling said he would send a proposed draft of instructions for USO organizations for Bureau examination.

Col. Murphy asked Col. Darling to call Major Moffett and indicate to him that a car would meet his plane and that a reservation at the Muehlebach Hotel had been procured for him in the name of Colonel John R. Murphy.

Gale
mp

Distribution:

Original "Adj-ED-CO"Dupl. Case 129136

Copy _____

Copy _____

Copy _____

JOHN R. MURPHY

Colonel Q.M.C.

Effects Quartermaster

KCQMD FORM 64 (Rev. 4-20-43)

ARMY ^{Division} EFFECTS BUREAU

REGISTERED MAIL

129136

mg

ARMY EFFECTS BUREAU
KANSAS CITY QUARTERMASTER DEPOT
601 Hardesty Avenue
Kansas City 1, Missouri

(S-23 Oct 44)
JRM:HE:nc
23 September 1944

IN REPLY REFER TO: **SPQDK 332.32**
McManus, Thomas W.
O-750423

SUBJECT: Disposal of Personal Effects

TO : General Accounting Office, Reconciliation and Clearance Division,
Washington 25, D.C.

1. In accordance with Par. 7a AR 35-560, Changes 2, 19 December, 1942, there is inclosed, for proper disposition, Treasury check as follows:

| <u>Number</u> | <u>Date</u> | <u>Symbol</u> | <u>Amount</u> | <u>Payable to</u> |
|---------------|--------------|---------------|---------------|--|
| 102,126 | 14 June 1944 | 211-162 | \$100.00 | W. V. Kay, 1st Lt., FD Agent Finance Officer at Sta. #4 |

2. This Treasury check was found among the effects of 2nd Lt. Thomas W. McManus, O-750423, 670th Bomb. Sq., 416th Bomb. Gp., missing in action.

3. Appropriate receipt is requested.

For the Commanding Officer:

Received
m. J. Lemaster
10/24/44

W.F. HEHMAN
Major Q.M.C.
Asst. Effects Quartermaster

1 Incl - Ck. No. 102,126

Ziley

TO THE DIRECTOR, FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D. C.

RECEIVED APR 22 1952

KANSAS CITY, MO.
OCT 28 1944



TO THE DIRECTOR, FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D. C.

In accordance with the provisions of the
Act of October 3, 1917, (40 Stat. 760),
this check was found to be a check of

of the following:

1. [Illegible]

2. [Illegible]

3. [Illegible]

4. [Illegible]

5. [Illegible]

6. [Illegible]

7. [Illegible]

8. [Illegible]

9. [Illegible]

10. [Illegible]

11. [Illegible]

12. [Illegible]

13. [Illegible]

14. [Illegible]

15. [Illegible]

ARMY EFFECTS BUREAU
 KANSAS CITY QUARTERMASTER DEPOT
 601 Hardesty Avenue
 Kansas City 1, Missouri

AEB:VM:rg
 CASE NO. 129136 Mc
 (S-26 Dec 44)
 26 October 1944

TO: The Adjutant General, Washington, D.C.

Please complete and return to the Effects Quartermaster, Army Effects Bureau, Kansas City Quartermaster Depot, Kansas City, Missouri.

(**) McManus ✓ Thomas ✓ W. ^W 0-750423 ^{OK} 2nd Lt. ✓
 (Last Name) (First Name) (Middle Initial) (Serial No.) (Grade)

1. ~~Organization and APO number~~ Missing in action since 6 August 1944

2. Name, Relationship and Address of:

- a. Beneficiary: *Mrs Oma Louise McManus Jr (wife)*
157-A St. Bakerfield Calif
- b. Alternate Beneficiary: *Mrs Ethel B. McManus (mother)*
2004 Verde St. Bakerfield Calif
- c. Nearest Relative: *Mrs Oma Louise McManus Jr (wife)*
- d. Emergency Addressee: *Same as Beneficiary.*
- e. Baile shown on W.D., A.G.O. Form 43: *Same as E. A.*

(*) If the above ASN is not assigned to the soldier named, it is requested that the AEB be advised the name, rank and present mailing address of the soldier to whom this ASN is assigned, together with the information requested in paragraph 2 above.

(**) In the event the above ASN is not assigned to this soldier, it is further requested that this Bureau be furnished available information regarding this soldier of record in your office.

Pt V case Br Sec
Group 7, 5 Nov 44
Nicholson
Lilly

KANSAS CITY, MO.
NOV 10 1944

24

RECEIVED
NOV 7 1944
28 OCT 1944

A.G.O.
26 JUL 1944
MAIL ROOM
RECEIVED
CASUALTY BRANCH