Form MA-9412
(May 1946)

THE AMERICAN NATIONAL RED CROSS
OFFICE OF THE FIELD DIRECTOR
COMMAND AND GENERAL STAFF COLLEGE
AND
FORT LEAVENWORTH, KANSAS

October 16, 1948

H. O. Caldwell
Effects Quartermaster
Kansas City Quartermaster Depot
601 Hardesty Avenue
Kansas City 1, Missouri

REFER: 288617
HOOPER, Carl J.
2nd Lt - O-821496
Air Corps - Deceased

Dear Mr. Caldwell:

This is to advise that your inquiry of 19 August, 1948, regarding effects of the above named deceased officer, has been referred to our Area Office Headquarters, who in turn have advised that it was forwarded to our European Headquarters.

Under date of 4 October, 1948, we were again advised by our Area Office, that they were still awaiting a reply from the European Headquarters.

As soon as this reply has been received, we will forward it immediately to your office.

Please be assured of our continued cooperation and service.

Very truly yours,
W. Mason Bridges
W. MASON BRIDGES
FIELD DIRECTOR

MAS:

xxxxxxxxxxxxxxx

HOC/ELM/rm
288617 15 October 1948

Mr. W. Mason Bridges
Field Director
American Red Cross
Fort Leavenworth, Kansas

Dear Mr. Bridges:

This refers to previous correspondence of the Army Effects Bureau regarding the case of Second Lieutenant Carl J. Hooper, O-821496, Air Corps, deceased 12 October 1944 in the European Area. Items of personal effects for the deceased officer were recovered by a German National, Ottmar Eichert, of Saarbrucken, Germany.

A negative response has been received as result of our inquiry directed to the European American Graves Registration Command. Personal effects for Lieutenant Hooper were not received by U. S. military authority. Mr. Ottmar Eichert was not contacted by the American Graves Registration Command.

A final report to the mother of Lieutenant Hooper is pending response to our letter directed to you on 19 August 1948. Information as to the investigation made by your office will be appreciated.

Yours very truly,

H. O. CALDWELL
Effects Quartermaster

file

S-19 Oct 48
HOC/ELM/ew
19 August 1948

QKDEG 288617

Mr. W. Mason Bridges
Field Director
American Red Cross
Fort Leavenworth, Kansas

Dear Mr. Bridges:

The Army Effects Bureau has been requested to investigate the disposal of personal effects recovered by a German soldier, Ottmar Eichert. The items of effects recovered by the German National were identified as the property of 2nd Lt. Carl J. Hooper, O-821496,A.C., deceased 12 October 1944, European Area.

Through extensive correspondence of The Adjutant General's office, Military Division, Boston, Massachusetts, the following circumstances of this case are available:

(a) The German soldier, Ottmar Eichert, was assigned as clerk of an Air Service post in St. Wendel, Saar, Germany in the summer of 1944. At that time he was given instructions to assist in the burial of one Lt. Hooper in the military cemetery at Saarbruken, Germany

(b) The items of personal effects recovered consisted of:
1 finger ring "American Air Force"
1 identification marker with chain
1 birth certificate with inscription "Clerk of Town"
1 leather brief case stamped "American Air Force"
1 membership card in the "American Red Cross"
1 pilot's voucher
1 little picture (photo) of 2nd Lt. Hooper in which he is standing with helmet and parachute
1 photo of military parade at West Point
2 bundles of bank notes in French currency (new shining invasion gold)
"I declare herewith on oath that the foregoing statements are true." - statement by Ottmar Eichert.

(c) Ottmar Eichert states "I delivered the personal effects to the Commander at Saarbruken and have received a receipt from him. I have handed over to my superior officer the receipt itself for the discharge of this

file

SAVE

ARMY SERVICE FORCES

QKDKG 288617 (cont'd) KANSAS CITY QUARTERMASTER DEPOT HOC/ELN/ew

601 HARDESTY AVENUE
KANSAS CITY 1, MISSOURI

IN REPLY REFER TO

commission for safekeeping."******"As I brought the personal belongings of 2nd Lt. Hooper along the dangerous road to Saarbruken, I would get in a satisfaction to receive news from the Hooper family that they would claim the property of their fallen son from the Red Cross. I will be sincerely happy if the things arrive there."

A thorough search of the records of the Army Effects Bureau fails to reveal the receipt of the items recovered by Mr. Eichert; consequently, is is assumed that the effects were not properly handled at the overseas military post. In the statement of Mr. Eichert, it is not definitely clear that the effects of Lieutenant Hooper were ever turned over to the Red Cross in Germany. However, on the possiblity that the effects may have been handled by Red Cross authorities in Germany, it will be appreciated if your agency will investigate this matter. Any names and addresses of the Red Cross representatives who were assigned duty in the vicinity of St. Wendel, Saar, Germany in the summer of 1944 will be most helpful. The Bureau has this date directed similiar inquiry to The Commanding General, American Graves Registration Command, European Theatre for further assistance in obtaining additional data from Mr. Eichert.

Your cooperation in obtaining additional information in this case will be greatly appreciated.

Yours very truly,

H. O. CALDWELL
Effects Quartermaster

file
ellen

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

S-19 Oct 48
HOC/ELW/ew
19 August 1948

IN REPLY REFER TO QMDKG 288617

SUBJECT: Disposal of Personal Effects

TO: Commanding General
American Graves Registration Command
St. Germain Depot
APO 58, c/o Postmaster
New York, New York

1. Attention is invited to inclosed correspondence file regarding recovery of the personal effects of 2nd Lt. Carl J. Hooper, O-821496, AC, kia 12 October 1944, European Area. The Army Effects Bureau has no record of receipt of the items of personal effects recovered by the German soldier, Ottmar Eichert, who was assigned as Clerk of the Air-Service Post in St. Wendel, Saar, Germany.

2. It is requested that information be furnished as to whether or not effects of Lt. Carl J. Hooper have been processed by your Headquarters. In the event, the effects have not been received at your installation, it is further requested that this correspondence be indorsed through appropriate military channels for infromation regarding the handling and disposal of the effects in this case.

FOR THE COMMANDING OFFICER:

1 Incl
cy corres file

H. O. CALDWELL
Effects Quartermaster

1503

Oly 8 ... DGM

(Basic Ltr, Army Service Forces, Kansas City Qm Dp. Army Effects Bureau, 601 Hardesty Avenue, Kansas City 1, Missouri, dtd 19 Aug 48, subj: QMDRG 288617 - Disposal of Personal Effects)

QMDRG 288617 1st Ind

Personal Effects Branch, AGRC-EA, St-Germain Dp. APO 58, US Army, 20 Sep 48

TO: Commanding General, Headquarters, American Graves Registration Command, APO 58, US Army
ATTENTION: Chief of Registration Division

1. Attention is invited to basic communication.

2. This office has no record of 2nd Lt. Carl J. Hooper, 0-821496, AC, and it is requested that investigation be made by your Headquarters, to locate or ascertain disposition made of the personal effects pertaining to the above named deceased.

Paul V. Kellogg
PAUL V. KELLOGG
Colonel QMC
Commanding

1 Incl
n/c

P

Tel: Paris, KIC 3875, Ext 35 and 9

Basic ltr, Kansas City QM Depot, QMDKG 288617, Subject: Disposal of Personal Effects, dated 19 August 1948

RRE 332.3 (Hooper, Carl J. - 0 821 496) 2d Ind

Hq, American Graves Registration Command, European Area, APO 58, U S Army, 5 October 1948

TO: Commanding Officer, Kansas City Quartermaster Depot, Army Effects Bureau, 601 Hardesty Avenue, Kansas City 1, Missouri

1. Reference is made to preceding correspondence.

2. Copies of the attached correspondence are included in the records for subject deceased, 2/Lt Carl J. HOOPER, 0 821 496, on file this headquarters, however, personal effects for deceased were never received at this headquarters, and no information is available as to disposition of these effects.

FOR THE COMMANDING GENERAL:

George L. Freeman

GEORGE L. FREEMAN
1st Lt, QMC
Actg Asst Adj Gen

1 Incl n/c
Ltr, dtd 2 Aug 48
w/4 incls

SAVE

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

HOC/ELW/ew
19 August 1948

IN REPLY REFER TO QMDEG 288617

Mrs. Velma E. Hooper
38 Morten Avenue
Saugus, Massachusetts

Dear Mrs. Hooper:

This refers to recent inquiry on your behalf from the Adjutant General's office, Military Division, Boston, Massachusetts, regarding the personal effects of your son, Lieutenant Carl J. Hooper. I note your desire to recover the personal effects which were originally in the possession of the Germain soldier, Ottmar Eichert.

I have thoroughly reviewed the case of Lieutenant Hooper and regret to report that there is no information here regarding disposal made of the items of effects recovered by the German national. There is a possibility that the effects of your son were turned over to the overseas American Red Cross authorities for shipment direct to the next of kin. If the effects were turned in to the American Military authorities, they normally would have been processed for shipment here and ultimate return to you.

As it is our desire to be of all possible assistance in clarifying this matter for you, I have this date requested that investigations be made by the local Red Cross Headquarters and the overseas American Graves Registration Command. In view of the lapse of time since original recovery of the effects in 1944, it is doubtful whether the effects will be located at this time.

I realize your desire to receive the personal effects of your son and upon receipt of additional information in this case, I will notify you promptly.

Yours very truly,

H. O. CALDWELL
Effects Quartermaster

July 29, 1945

William Harrison Jr,
Dear Sir:-

I was so glad to recieve the enclosed letter from your office, and the wonderful letter from Ottmar Eichert. My daughter and I are positive these things are my sons. We have never recieved anything personal of his, and my heart has been breaking. Do you think their is a possibility of our getting them, and do you take care of that? We are very anxious to write to the young man and will only

wait until we hear from
you. Thanking you very much
and waiting to know what to
do next I remain

Sincerely yours
Vilma E. Hooper.

C O P Y

2 August, 1948

Mrs. Velma E. Hooper,
38 Merton Avenue,
Saugus, Massachusetts.

Dear Mrs. Hooper:

In reply to your letter 23 July, we inclose copy of letter from this office to Commanding Officer, Army Effects Bureau, Kansas City, Missouri, where all unidentified personal effects of army personnel are now assembled and where every effort is made to complete identification so that they may be delivered to the individual concerned or to next-of-kin.

In this case, of course, it is not definitely clear that the effects of Lieutenant Hooper were ever turned over to the Red Cross in Germany. If they were it would seem that, inasmuch as they contained several items of positive identification, they would have been cleared through the Red Cross and/or Army Effects Bureau. However, there is always the possibility that these, or other personal effects of your son, might be in the Army Effects Bureau still unidentified and we can assure you that that office will cooperate with you fully in the matter.

It will be perfectly in order for you to acknowledge receipt of the letter from from Mr. Ottmar Eichert forwarded to you from this office.

WILLIAM H. HARRISON, JR.,
Maj.Gen.,A.G.D.,Mass.N.G.
The Adjutant General

1 incl

COPY COPY COPY

THE COMMONWEALTH OF MASSACHUSETTS
MILITARY DIVISION

THE ADJUTANT GENERAL'S OFFICE

23 July 1948

Mrs. Velma E. Hooper
38 Morton Avenue
Saugus, Massachusetts

Dear Mrs. Hooper:

The inclosed letter from Ottmar Eichert, Scheidt 6, Saarbrucken, Kaiserstrasse 26, Germany, with translation attached, is self-explanatory.

Although this correspondence does not positively identify 2d Lt. Hooper, records of this office show that your son, 2d Lt. Carl J. Hooper, had been killed in action in the European Theatre of Operations, and it is therefore forwarded to you for such disposition as you desire.

If you feel the correspondence has no relation to you, it will be appreciated if you will return it to this office in order that we may endeavor to locate the proper recipient.

Sincerely yours,

WILLIAM H. HARRISON, JR.
Maj.Gen.,A.G.D.,Mass.N.G.
The Adjutant General

2 incls.

COPY COPY COPY

THE COMMONWEALTH OF MASSACHUSETTS

Office of the Secretary

Boston 33

July 16, 1948

Major General William H. Harrison, Jr.,
The Adjutant General,
259 State House,
Boston, Massachusetts.

Dear Sir:

Enclosed is a letter from Ottmar Eichert, which we believe comes under your jurisdiction.

Very truly yours,

/s/ Frederick W. Cook
FREDERICK W. COOK
Secretary of the Commonwealth

COPY COPY COPY

(TRANSLATION FROM GERMAN)

Ottmar Eichert
Scheidt 6 Saarbrucken
Kaiserstrass 26

Scheidt, Feb. 2, 1948

Government of the State of Massachusetts
Boston (Mass.), U. S. A.

Subject: 2nd Lt. Hooper, Soldier of the American Air Force, fallen with honors as a flyer at St. Wendel in Saar in the summer of 1944, born in the State of Massachusetts.

The addresses of the relatives of the above named fallen American flyer I do not know. Therefore I turn to you, Sir, in the hope that you may help me as you have at hand the register of the casualties of Massachusetts. I will be very grateful to you for this service. For it is important to me to clear up something which lies very near to my heart. With the desire to clear up this thing I would also like to bring to you my thanks in words as I, myself, while in the American prison had good treatment and also at the conclusion of the war was discharged and sent home.

And now for the case. In the summer of 1944 I belonged as a soldier and clerk to an air service post in St. Wendel in Saar. One day I received orders from my superior officer to bring the remaining effects of a fallen American flyer, 2nd Lt. Hooper, to the Military Commander at Saarbruken. As my superior officer has no knowledge of the English language and I have a little he ordered me to read the personal things and send them to you. That I have done. Consequently I have delivered the personal effects to the Commander at Saarbruken and have received a receipt from him. I have handed over to my superior officer the receipt itself for the discharge of this commission for safekeeping.

The personal effects are for most part as follows:

1 finger ring with seal "American Air Force"
1 identification marker with chain
1 leather brief case stamped "American Air Force"
1 birth certificate with inscription "Clerk of Town"
(I do not know the place of birth but so far as I know Lt. Hooper was born in the State of Massachusetts)
1 membership card in the "American Red Cross"
1 pilot's voucher

COPY COPY COPY

1 little picture (photo) of 2nd Lt. Hooper in which he is standing in his machine with helmet and parachute
1 photo of military parade at West Point
2 bundles of bank notes in French currency (new shining invarien gold)

I declare herewith on oath that the foregoing statements are true.

As I brought the personal belongings of 2nd Lt. Hooper along the dangerous road to Saarbruken, I would get in a satisfaction to receive news from the Hooper family that they would claim the property of their fallen son from the Red Cross. I will be sincerely happy if the things arrive there.

As to you, Sir, I would be very grateful if you can possibly do this and direct this letter to the right address.

I greet you,

Respectfully,

/s/ Ottmar Eichert.

RTB:TS:cm
September 10, 1945

288617

Mrs. Velma E. Hooper
38 Morton Avenue
Saugus, Massachusetts

Dear Mrs. Hooper:

The Army Effects Bureau has received from overseas some personal effects of your son, Second Lieutenant Carl J. Hooper.

These effects are being forwarded to you in one footlocker.

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

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

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

Yours very truly,

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

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO: Mrs. Velma E. Hooper
38 Morton Avenue
Saugus, Massachusetts

Effects of:
Name 2/Lt. Carl J. Hooper
ASN 0821496
Case No. 286617 D
Wt.

DATE 19 September 1945
RTB:TS:cm

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.

REMARKS:

Franked
Est. Exp. Chgs.
Est. Frt. Chgs.
No. of packages 1

SEP 22 1945

Shipping Clerk

Eff. QM Form 14 (26 Dec 44)

288,617½

H-1496E. 073010 H-1496E

LAUNDRY INVENTORY
ARMY EFFECTS BUREAU

	DRY CLEANING	Do not use			LAUNDRY	Do not use	
1	TROUSERS, WOOL				SHIRTS, WOOL		
	COAT, SERVICE, WOOL				TROUSERS, COTTON		
	OVERCOAT, LONG				TIE, COTTON		
	OVERCOAT, SHORT, WOOL				UNDERSHIRTS, COTTON		
	CAP, GARRISON				SHIRTS, DRESS, COTTON		
	CAP, SERVICE				DRAWERS, COTTON		
	TIES, WOOL			1	SWEATSHIRTS, COTTON ~~OR WOOL~~		
	GLOVES, LEATHER OR WOOL				DRAWERS, WOOL		
	SCARFS, SILK, RAYON, OR WOOL				SOCKS, COTTON, PR.		
	SWEATERS				SOCKS, WOOL, PR.		
	TRUNKS, SWIM				PAJAMA TOPS		
	LEGGINGS				PAJAMA BOTTOMS		
	BATHROBES				FATIGUES, 1 PC., COTTON		
	BED ROLL				FATIGUES, TOPS, COTTON		
	COMFORTER				FATIGUES, TROUSERS, COTTON		
					FATIGUES, CAP		
					BELT, COTTON		
					TOWEL, HAND		
					TOWEL, BATH		
					CLOTH, WASH		
					GLOVES, COTTON		
					JACKET, FIELD		
					SUPPORTERS, ATHLETIC		
				1	HANDKERCHIEFS		
					SCARFS, COTTON		
					CASE, PILLOW		
					TRUNKS, GYM		
					SHEETS, COTTON		
	LAUNDRY RETURNED TO F.L.				BAGS, BARRACKS		
	9 Sept 45						
	BRR						
	24				14		

TALLY NO.	ORIG. NO. OF PKGS.	EXAMINING DATE	BOX NO.	SHEET ___ OF ___ SHEETS
9859	1	31 Aug 46		

NAME: Carl J. Hooper.
A. S. N.: 0-821496
ORGANIZATION: 509 Ftr. Sqd. 405th Ftr. Grp.
RANK: 2nd Lt.
CASE NO.:
WAREHOUSE SPACE: 9-1392
EXAMINED BY: Trentwine & Hall
SUPERVISOR'S OK: M.C.
LAUNDRY REMOVED FROM FOOTLOCKER: X
LISTED BY: Dawson
PACKAGE DESCRIPTION: 1 9-8-45
WEIGHT: 57
CHECKED BY: Bennell
CHECKED AND PACKED BY: RM
SHIPPED
DATE: SEP 22 1945
BY WHOM: EK

EFF. ON FORM 111 (15 JUNE 45) 20M LARUE, R. C. 7-8-45

1496

NAME HOOPER, CARL T. L. 1496

BAY	PALLET	BOX	TALLY
38	37		9859

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
F.L.		

Eff. QM Form 48

EFFECTS INVENTORY
ARMY EFFECTS BUREAU

ATTACHMENTS	
X	INBOUND INVENTORY
	G. R. OR SUB GR LABEL
	WILL OR POWER OF ATTY.
X	TALLY IN FORM 43

STATUS	
DECEASED	
MISSING	X
P. O. W.	
ABANDONED	
UNKNOWN	

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

CONTAINERS ADDRESSED TO

Rec'd 9/15/45 Eck

None.

INFORMATION

Mother:
Mrs. Velma E. Hooper
38 Pierton Ave.
Saugus, Mass.

NAME AND STATUS VARIATIONS

#13 Carl J. Hooper
Effect Carl J. Hooper,

CROSS REFERENCE

	CHECK	REC'D BY	NUMBER		BUREAU CHECK
	MONEY ORDER				TRANSMIT ORIGINAL
	BOND		SYMBOL		ORIG. REG. MAIL
	TRAV. CHECK				TO G. A. O.
	FOREIGN CURRENCY		AMOUNT		MUTILATED
	U. S. CURRENCY				TO ISSUING AGENCY

DATE

BANK OR PLACE OF ISSUE

PAYEE

REMITTER OR DRAWER

TALLY NO.	ORIG. NO. OF PKGS.	EXAMINING DATE	BOX NO.	SHEET 1 OF 1 SHEETS
4859	1	21 Aug 46		

NAME: Carl J. Hooper		A. S. N.: 0-821446	
ORGANIZATION: 509 Ftr. Sqd. 8th Ftr. Gr.		RANK: 2nd Lt.	CASE NO.
WAREHOUSE SPACE	EXAMINED BY: Crawford & Hall	DIARY REMOVED	
	PACKED BY	PHOTO FILM REMOVED	
		MOTION PICTURE FILM REMOVED	
PACKAGE DESCRIPTION: #17 Footlocker	WEIGHT	INSPECTED BY	SHIPPED — DATE: SEP 22 1945 — BY WHOM: EK
		STORED BY	

EFF. ON FORM 11 (15 JUNE 45) 1500 LA RUE, K. C. 7-9-45

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

RESTRICTED

509th Fighter Squadron (SE)

8 November 1944
Date

SUBJECT: Inventory of Personal Effects of:

HOOPER (Last Name) CARL (First Name) J (MI) 2nd Lt (Rank) 0-2214496 (ASN)

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

The above named individual of 509th Fighter Squadron (Unit), 479th (Organization) Fighter Group reported MIA (Status-Killed, MIA, Hospitalized, etc.) about 12 October (Date) 1944

Designated Beneficiary if information readily accessible Velma Eleanor (Nelt) Hooper (Mother), 98 Morton Ave., Saugus, Mass.

INVENTORY OF EFFECTS

CLASS I

7 Insignia, AC
6 Insignia, Grade
2 Pilot's Wings
1 Ribbon (Air Medal) w/Oak Leaf Cluster
~~1 Set Identification Tags~~ gdr
1 Religious Book
1 Folder w/photos and papers
2 Insignia US
1 Insignia, Cap
1 Expert Badge w/bar
1 Testament
1 Pilot's Log Book
1 Leather Toilet Case

CLASS II

1 Foot Locker
9 Trousers, Wool
3 Shirts, Cotton
1 Blouse, Wool
1 Cap, Service
2 Undershirts, Wool
1 Scarf
8 Undershirts, Cotton
1 Towel, Face
6 Ties.
2 Trousers, Khaki
2 Shirts, Wool
1 Coat, Short, Wool
3 Caps, Garrison
2 Drawers, Wool
1 Gym Suit (Complete)
2 Handkerchiefs
8 Drawers, Cotton
5 Pr Socks

RESTRICTED

RESTRICTED

INVENTORY OF EFFECTS CONT'D

Money in the amount of None has been turned into

_____, Form WDFD 38 enclos
(Name of finance officer and symbol number)

Names and addresses of new banks in which accounts may be carried:

I certify that the above items constitute all of the effects, secured by me, of the above named individual and that they were forwarded to the Effects Depot by

Truck on 9 Nov 1944
(Mail, Truck, etc.)

Name William T. Dorsey
WILLIAM T. DORSEY

Rank & ASN Captain, AC, 0562303

Organization 509th Fighter Squadron

Any additional pertinent information

RESTRICTED

JEM:TSim

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

Case No. 285617

Date 19 September 1945

SUBJECT: Report of transaction in disposing of the effects of

Carl J. Hooper, 0521496 [redacted] late a
(Name of deceased) (Army Serial Number)

Second Lieutenant, Air Corps, who died
(Grade) (Organization, Army or Service)

on the 12 day of October, 19 44, 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 15 September 1945, pursuant to Special Orders 228, Headquarters KCQM Depot, dated 25 September 1943, the application or affidavit of Mrs. Velma E. Hooper 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. Velma E. Hooper
(Name of person found entitled)

38 Norton Avenue, Saugus State of
(Number, Street or Avenue) (City, Town or Village)

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

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

(Signature of Summary Court Officer)

JOHN R. MURPHY, Colonel, QMC
(Name, Rank, Organization)
SUMMARY COURT MARTIAL

Eff. QM Form 75

pB

B. A. FULLERTON
SAUGUS, MASS.

PAID

August 19, 1948

Commanding General, S.A.F.E.
Attn: ASR Division

RE: Hooper, Carl J.
M/Sgt, 0-[illegible]

Transportation charge from Lynn
to Saugus, Mass. 15.00

I certify that the above bill is correct and just; that payment therefor has not been received; that all statutory requirements as to American production and labor standards, and all conditions of purchase applicable to this transaction have been complied with; and that State or local sales taxes are not included in the amount billed.

Benj. A. Fullerton
Owner
Fullerton Funeral Home
Saugus, Mass.

FILE COPY

CERTIFICATE

(AR 30-1830)

PAID WW II

1. *FILL IN EITHER PART A OR PART B; NOT BOTH.*
2. *USE PART A WHEN INTERMENT IS IN A CIVILIAN OR PRIVATE CEMETERY.*
3. *USE PART B WHEN REMAINS ARE DELIVERED TO HOME OR OTHER PLACE PRIOR TO BURIAL IN A NATIONAL OR POST CEMETERY.*

PART A - CIVILIAN OR PRIVATE CEMETERY

A REQUEST FOR REIMBURSEMENT OF INTERMENT EXPENSES

(PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)

NAME OF DECEDENT	GRADE	SERIAL NUMBER	COMPONENT
HOOPER, CARL J.	2 LT	0-621496	AAF

I certify that the sum of $_____ was paid by me from personal funds in connection with the interment of the remains of the above named decedent in the below named cemetery.

INSERT NAME OF CEMETERY	CITY OR COUNTY	STATE

INSTRUCTIONS TO PERSON SIGNING THIS FORM

1. *Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR.*
2. *Return four copies to:* HEADQUARTERS
   NEW YORK PORT OF EMBARKATION
   D - C #1 AGR
   1st Avenue & 58th Street
   Brooklyn, N.Y.

SIGNATURE OF CLAIMANT: Velma E Hooper

ADDRESS OF CLAIMANT *(City, Street or RFD, and State)*

RELATIONSHIP TO DECEDENT	DATE

PART B - NATIONAL OR POST CEMETERY

B REQUEST FOR REIMBURSEMENT OF TRANSPORTATION EXPENSES

(PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)

NAME OF DECEDENT	GRADE	SERIAL NUMBER	COMPONENT

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 and to the following places:

INSERT CITY OR TOWN (OR ADDRESS NOT IN A CITY OR TOWN) *FROM* WHICH REMAINS WERE SHIPPED	INSERT NAME AND LOCATION OF NATIONAL OR POST CEMETERY *TO* WHICH REMAINS WERE SHIPPED

INSTRUCTIONS TO PERSON SIGNING THIS FORM

1. *Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR.*
2. *Return four copies to:*

SIGNATURE OF CLAIMANT

ADDRESS OF CLAIMANT *(City, Street or RFD, and State)*

RELATIONSHIP TO DECEDENT	DATE

QMC FORM 1236
23 OCT 47

REPLACES WD AGO FORM R-5507, QMC FORM R-5048 AND QMC FORM R-5066, WHICH ARE OBSOLETE.

EXPLANATION OF PART A - CIVILIAN OR PRIVATE CEMETERY

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 PART B - NATIONAL OR POST CEMETERY

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.

ORIGINAL

RECEIPT OF REMAINS

HEADQUARTERS, NYPE - DISTRIBUTION CENTER #1, AGRS
DISTRIBUTION CENTER 58th ST. & 1st AVE., BROOKLYN, N.Y. ROUTINE

REMAINS CONSIGNED TO:

BENJAMIN A. FULLERTON

325 CENTRAL STREET

SAUGUS, MASS.

O-821496

REMAINS OF THE LATE 2 LT CARL J. HOOPER ACCOMPANIED BY AN ESCORT ARE SCHEDULED TO LEAVE NEW YORK ON TRAIN NUMBER 12 NEW HAVEN RAILROAD AT NINE AM EST ON THURSDAY 19 AUGUST AND DUE TO ARRIVE AT LYNN AT THREE FIFTY ONE PM EST ON SAME DATE.

PLEASE ARRANGE TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL AND PLEASE NOTIFY THE NEXT OF KIN OF THE DATE AND TIME OF ARRIVAL.

ESCORT: BARRETT, JAMES R, CAPT., AO-473507, 104th AFBU

G. H, BARE

COLONEL, QMC

I, the undersigned, do hereby acknowledge receipt of the remains of the above named deceased this 19 (Day) day of Aug. (Month), 1948

Capt. James R. Barrett (Witness (Escort)) 104 BU.

Benj. G. Fullerton (Consignee)

QMC FORM REV 5 MAR 48 1193

U. S. GOVERNMENT PRINTING OFFICE 16—64787-1

SPACE NO 12 BAY NO ____

INSPECTION CHECKLIST
(FOR USE AT DISTRIBUTION POINT)

NAME	RANK	SERIAL NUMBER
HOOPER, CARL J.	2 LT	0-821496

NEXT OF KIN	ADDRESS

SHIPPING CASE - General Appearance (Check ONLY Discrepancies)		CONDITION OF SHIPPING CASE (Check one). ☑ SATISFACTORY ☐ UNSATISFACTORY
	FINISH (Exterior)	REMARKS
	FINISH (Interior)	
	HANDLES	
	HANDLE BOLTS	
	STENCILING - NAMEPLATE Clean	
✓	Men	

CASKET - General Appearance (Check ONLY Discrepancies)		CONDITION OF CASKET (Check one) ☑ SATISFACTORY ☐ UNSATISFACTORY
✓	FINISH (Exterior) Clean & polish	REMARKS
	HANDLES AND FASTENINGS	
	STENCILING - NAMEPLATE	
✓	CAM LOCKS (Sealing) touch up	
	ODOR OR MOISTURE	

ROUTED THROUGH

☐ MORTUARY OPERATING ROOM	☐ MORTUARY REPAIR SHOP
CONDITION OF REMAINS ☐ SATISFACTORY ☐ UNSATISFACTORY	CASKET REPAIRED ☐
NECESSARY DISINFECTION (Explain)	CASKET EXCHANGED ☐
	SHIPPING CASE REPAIRED ☑
	SHIPPING CASE EXCHANGED ☐
	REMARKS Bandaged Badly

TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTING OFFICER
				8/13/48	

REMARKS

IF SHIPPING CASE DOES NOT REQUIRE REPLACEMENT, REMOVE STENCIL FROM INSIDE CASE AND DESTROY. IF CASE IS TO BE REPLACED, RE-STENCIL WITH STENCIL FOUND INSIDE CASE, THEN DESTROY STENCIL.

Payroll 8/13/48

Final Ship Ray Dobbs H & H

G. Tracy

QMC FORM 4 MAR 46 R-5024 *Local Reproduction Authorized*

RECEIVED
GREENWICH MEAN TIME (Z)
JUL 4 00 12 1943
SIGNAL CENTER
HQ. NYPE BKLYN, N.Y.

OGELTHORPE

WU 460 34 4 EXTRA COLLECT

LYNN MASS JUL 3 350P

G H BARE COLONEL QMC

BKLYN

TELEGRAM RECEIVED REGARDING 2 LT CARL J HOOPER ENROUTE TO THE UNITED STATES REMAINS WILL BE DELIVERED TO BENJAMIN A FULLERTON AS PER RECORD AT RAILROAD STATION ON ARRIVAL

VELMA E HOOPER 38 MORTON AVE SAUGUS.

619P

2 LT 38.

MESSAGEFORM

MESSAGE CENTER NO.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT

CALLS	STA. SER. NO.	PRECEDENCE	TRANSMISSION INSTRUCTIONS	ORIGINATOR	DATE-TIME GROUP
V	NR				

ACTION	INFORMATION	EXEMPT	OPERATING SIGNALS	GROUP COUNT
				68

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Originator)

SECURITY CLASSIFICATION

ACTION TO:

. MRS VELMA E HOOPER

. 38 MORTON AVE

. SAUGUS MASS

CGELTHORPE

PRECEDENCE FOR
ACTION | INFORMATION

☐ ORIGINAL MESSAGE

REFERS TO ANOTHER MESSAGE
IDENTIFICATION | CLASSIFICATION

INFORMATION TO:

PLEASE BE ADVISED THE REMAINS OF THE LATE **2 LT CARL J HOOPER** ARE ENROUTE TO THE UNITED STATES. RECORDS OF THIS OFFICE INDICATE YOU WISH REMAINS DELIVERED TO **BENJAMIN A FULLERTON 325 CENTRAL ST SAUGUS MASS**

PLEASE INSTRUCT FUNERAL DIRECTOR TO ACCEPT REMAINS AT RAILROAD STATION ON ARRIVAL. WE REGRET IT IS NOT POSSIBLE AT THIS TIME TO GIVE YOU A DEFINITE DELIVERY DATE, HOWEVER, WE APPRECIATE YOUR DESIRE TO RECEIVE REMAINS AS SOON AS POSSIBLE AND ASSURE YOU EVERY EFFORT IS BEING MADE TO EXPEDITE DELIVERY. YOUR FUNERAL DIRECTOR WILL BE NOTIFIED BY TELEGRAM THREE DAYS PRIOR TO DATE OF DELIVERY OF THE RAIL ROUTING AND SCHEDULED TIME REMAINS WILL ARRIVE AT RAILROAD STATION AND HE WILL BE REQUESTED TO INFORM YOU SO THAT YOU MAY MAKE FINAL FUNERAL ARRANGEMENTS. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. PLEASE CONFIRM ABOVE DELIVERY INSTRUCTIONS WITHIN FORTY EIGHT HOURS OF THE DATE OF THIS MESSAGE BY TELEGRAM COLLECT TO DISTRIBUTION CENTER NUMBER ONE, NEW YORK PORT OF EMBARKATION OR SUBMIT NEW INSTRUCTIONS. IT WILL NOT BE POSSIBLE TO COMPLY

SECURITY CLASSIFICATION — RELEASED TO W U — AUTHORIZATION — JUN 8 1948

SIGNATURE

ORIGINATING AGENCY

SYMBOL	DATE-TIME GROUP	OFFICIAL TITLE	PAGE OF

WD AGO FORM 11-168 15 JUN 1945 — This form supersedes WD AGO Form 11-168, 22 Aug 44, and WD AGO Form 801, 12 Mar 43, which are obsolete.

16—45801-1 ☆ U. S. GOVERNMENT PRINTING OFFICE

53A

2

AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF THE FORTY EIGHT HOUR PERIOD. SUGGEST YOU ARRANGE WITH ANY LOCAL PATRIOTIC OR VETERANS ORGANIZATION IF YOU DESIRE MILITARY HONORS AT FUNERAL. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.

G H BARE
COLONEL, QMC

BUDGET BUREAU No. 49-R277.

REQUEST FOR DISPOSITION OF REMAINS

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

2nd Lt Carl J. Hooper, 0-821 496
Plot Z, Row 1, Grave 14,
United States Military Cemetery
Hamm, Luxembourg

31 July 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, Velma E. Hooper (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

Riverside Saugus Mass. (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.)*

None.

Ltr Pers 19 Mar 48

Coded 12 Mar. 48
Medley

QQMG FORM 14 NOV 1946 345 MILITARY

16—80411-1

PAGE 17

Chm

FEB 10

PART I (*Continued*)

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

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

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

OR

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

FULL NAME OF FUNERAL DIRECTOR			
Benjamin A. Lullerton.			
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
325 Central St	Saugus 01	Essex	Mass
EXPRESS OFFICE (*Nearest railroad passenger station*)	TELEGRAPH ADDRESS		TELEPHONE No.
Lynn.	Lynn		Sau 1500

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
HOOPER	ELISABETH	E	SISTER
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
38 MORTON AVE	SAVGUS	ESSEX	MASS

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.

Velma E. Hooper — (SIGNATURE OF NEXT OF KIN)

38 Morton Ave. — (STREET AND NUMBER)

VELMA E HOOPER — (NAME PRINTED OR TYPED)

Saugus Mass. — (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 3rd day of September 1947, at ~~city (or~~ town) of Saugus, Mass., county of Essex, and State (or ~~Territory or District~~) of Massachusetts

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

(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

(OFFICIAL TITLE)

Exp. 12-6-57

18—50411-1

PART II—RELINQUISHMENT OF DISPOSITION AUTHORITY

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

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

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

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

(DATE)

(SIGNATURE OF NEXT OF KIN) (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	FIRST NAME	MIDDLE INITIAL
RELATIONSHIP TO THE DECEASED		
NUMBER AND STREET	CITY OR TOWN	STATE OR COUNTRY

(DATE)

(SIGNATURE) (STREET AND NUMBER)

(NAME PRINTED OR TYPED) (CITY AND STATE)

ADDITIONAL REMARKS AND INSTRUCTIONS

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

U. S. GOVERNMENT PRINTING OFFICE

RRE Form #39
13 Jul 46

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

HOOPER	Carl	J	2 LT	0 521 496
(Last Name)	(First Name)	(Initial)	(Rank)	(ASN)

RePatriated to the United States: 28 JUN 46

STATION FILE

Incl #

CHECK LIST FOR DISINTERMENTS
(To accompany Report of Burial)

Only Part I should be completed, if identification tags are available.
Both Part I & Part II should be completely filled out if identification tags are not available.
If information is unavailable, so indicate.

PART I
(Positive Identification)

1. Cooper, Carl James — Unk — Unknown — USAAF
(Full name of deceased) (Rank) (ASN) (Organization)

2. State if identification tags were attached to remains, how many, and where attached None

3. Give exact location from which disinterred, furnishing coordinates and map series used 448-902. Eppelborn, Germany.

NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION IN WITH PERMANENT LANDMARKS. Not available

4. Full name of cemetery (if buried in an organized cemetery) Civilian cemetery at Eppelborn, Germany

5. Approximate or established date of death (state which & give basis for date selected) Approx. Oct 44. Statement of burgomeister at Eppelborn.

6. Approximate or established date of burial (give basis for date established) Approx. Oct 44. Same as above.

7. Manner in which grave was marked and all information contained on the marker Grave marker had name of deceased on it.

8. List personal effects found in possession of civilian or unauthorized military personnel, furnishing name and address of individuals concerned Personal effects turned over to German commander by German soldiers who buried the deceased.

9. Names and addresses of all persons questioned concerning death or burial and information each furnished (contact local Mayor, priest, cemetery caretaker, those responsible for burial and any other possessing important information) Burgomeister at Eppelborn, Germany.

PART II
(Doubtful or Undetermined Identification)

10. Fill in any information available regarding name, rank, ASN, or organization (Check cemetery records and office) None

11. 5'9" — 140 — brown — unk
(Est Height) (Est Weight) (Color of Hair) (Color of Eyes)

12. Give description of facial features and body characteristics if possible, including the presence of scars, moles, circumcision, tattoos, length of hair, presence of mustache or beard, etc. None

HEADQUARTERS
UNITED STATES FORCES
EUROPEAN THEATER
GRAVES REGISTRATION SERVICE COMMAND
APO 887

RJV/mjg

(S: 21 August 1945)
(Hamm, Z-1-14) 21 July 1945

SUBJECT: Clarification of Identification of Deceased Personnel.
HOOPER, Carl J., 2nd Lt., 0-821496.

TO : Graves Registration Officer, Oise Base Section,
APO 513, U. S. Army.

1. Report of Burial has been received in this headquarters for subject deceased officer, buried in Hamm U. S. Military Cemetary, Plot Z, Row 1, Grave 14, stating that remains were identified "by marker on grave at Eppelborn, Germany".

2. Request the burgomeister of Eppelborn, referred to in paragraph 5 of the Check List which accompanied the Report of Burial, or the authorities of the civilian cemetery at Eppelborn, be contacted in an effort to obtain the exact means by which identification was established at the time of the original burial.

3. Request this office be forwarded all information obtained.

For the Chief, Graves Registration Service Command:

RJV
COF

PHILIP J. WOLF,
Captain, QMC,
Assistant.

DISTRIBUTION:
Orig & dup - Addressee
1 Copy - GR File
1 Copy - S File

293 QM Gr Reg. 1st Ind. RTB:KJH:hps
Quartermaster , OIS, Com Z ,APO 513 , U.S. Army. 24 July 1945

TO : Commanding Officer , 62 QM Base Depot , APO 513 , U.S. Army .
(Attention : Captain Webb).

Forwarded for compliance.

/s/ Alex Kaminskie
for /t/ R.T. BENKISON
Colonel , QMC
Quartermaster

2nd Ind.

HEADQUARTERS , 62nd QM BASE DEPOT , APO 513 , U.S. Army 27 July 1945

TO ; Commanding Officer , 610th QM Graves Reg. Co. APO 513 , U.S. Army.

for compliance through this headquarters.

/s/ Maurice Matisoff

/t/ MAURICE MATISOFF
Colonel, QMC ,
Commanding

HAMM , (Z-1-14) 3rd Ind. HBP/ccs
HQ. 610th QM GRAVES REg.CO., APO 513 , U.S. Army 26 September 1945.

TO ; Commanding Officer , 551st Composite ServiceGp , APO 513 , U.S Army.

Submitted herewith four papers obtained from the secretary to the Burgermeister of St. Wendel , Germany , pertaining to identification ofsubject deceased.

/s/ Haskell B. Pugh

/t/ HASKELL B. PUGH
1st Lt., QMC
Commanding

A TRUE COPY : √

Donald H. Fu[illegible]
CWO, USA

293 GRSC 4th Ind. HR:RGA:jpn
HQ GRAVES REGISTRATION SERVICE, 551 COMP SERV GROUP, EASTERN ZONE, APO 513,
U. S. ARMY. 1 October 1945

TO: Director General, U. S. Theater Graves Registration Service, Theater Service Forces, European Theater, (Rear) APO 887, U. S. Army.

Basic communication complied with.

For the Commanding Officer:

RICHARD G. ADAMS
Capt., QMC
Adm. Officer

Abschrift

Todesbescheinigung. Jahr 1944...

1. Vor- und Familienname: Carl James Hooper
(bei Kinder unter 14 Jahren ist Stand der und Name der Eltern, bei unehelichen Name und Stand der Mutter anzugeben) Erkennungsnummer 0 321149 / F 43/442

2.) Geschlecht: männlich

3.) Datum der Geburt: Jahr 1919, Monat Mai Tag 11

4.) Tag und Stunde des Todes: Monat Oktober, Tag 12 Stunde 10.45 vorm.

5.) Beruf und Stellung im Beruf: 2 Lt.

6.) Wohnung:
Strasse und Hausnummer: 306 Lincoln Avenue Sauguste Massachutts U S A

7.) Ort des Todes, wenn ausserhalb der Wohnung: Eppelborn

8.) Tag und Stunde der Leichenbesichtigung: 12. Oktober Tag, Stunde 16,00 U. vorm.

9.) Todesursache bezw. Totgeburt.
a) Grundleiden
b) Begleitkrankheiten
c) Folgekrankheit:
d) Welches der genannt. Leiden hat den Tod unmittelbar herbeigefuhrt: Vollige Zertrummerung des Gehirnschadels mit volliger Zertrimmerung des Gehirns.

Zusatz:
Name des behandelnden Arztes:
Welche Zeichen des Todes sind vorhanden: Leichenstarre

10.) Sind Anzeichen einer bosartigen epidemischen Krankheit vorhanden? und welche? nein

11.) Sind Anzeichen eines unnaturlichen Todes vorhanden? ja (Flugzeugabsturz)

12.) bei Kinder unter einem Jahr
a) Art Ernahrung? zu a) Muttermilch. Ammenmilch
b) ob in fremder Pflege: nein
c) wenn ja bei wem? zu c
d) sind Anzeichen einer schweren Vernachlassigung vorhanden? zu d) nein ~~ja~~

13.) Ist der die Verstorbene
a) von dem unterzeichneten Arzt behandelt worden? zu a) ja nein
b) oder im bekannt gewesen? zu b) ja nein

Wenden

14.) Ist Beschleunigung der Beedigung erforderlich? ja
15.) wird Überfuhrungin die Leichenhalle beantragt? ja

Gegen Beerdigung auch vor 3.24 Stunden liegen ärztlicherseits keine Bedenken vor.
Nr.....des Sterberegisters.

Standesamt Eppelborn, den 12. Oktober 1945
gez. Dr. Laumeier
Unterschrift des Arztes

Vordr. 193 b. Vorratig bei A. Sonnenburg Saarbrucken

Abschrift.

Meldung.

uber Abschuss bez. Notlandung von feindlichen Flufzeugen

1.) Meldende Dienststelle: Polizeiverwaltung, Tag: 12. Oktober 1944
2.) Absturz, bezw. Notlandestelle: Ort: Eppelborn Kreis: Ottweiler
Tag und Uhrzeit: 10,45 12.10.1944

3.) Art des Flugzeuges: Nationalität: unbekannt,
Typ: unbekannt,
Motorenzahl: 1 Nr. 12577 Rack F T/244 / 0

4.) Verbleib der Besatzung: a) tot: Flugzeugführer
b) Festgenommen: keine
c) nochfluchtige: keine

gez. Unterschrift
Orts. Luftschutzleiter

Abschrift

Der Amtburgermeister
als Ortspolizeibehorde
Abt. I b

Eppelborn, den 13 Oktober 1945

An
das Wehrbezirkskommando
in St.Wendel

Unter Bezugnahme auf die heute vorm. gefuhrte Unterredung mit Uffz.Kallenborn ubersende ich die noch bei dem abgesturzten Feindflieger aufgefundene Brieftasche mit Inhalt.

Eine Todesbescheinigung von Dr.Laumeier fuge ich ebenfalls bei.

I.A.
gez.Schorr
I.Amtssekretar

Abschrift

Empfangsbescheinigung

1.) Silberring
2.) Karte auf Leinen
3.) Eiserne Portion
4.) Behalter mit Filmstreifen
5.) Paar Schuhe
6.) Eine Erkennungsmarke mit Kette

Eppelborn, den 12. Oktober 1944
gez. Unterschrift
Offz.

K-50

Hamm Z-1-14

RIN 266

REPORT ABOUT DEATH AND BURIAL OF SOLDIERS.

NAME: Carl James Hooper

RANK: 2/Lt.

DAY OF BIRTH:

PLACE OF BIRTH:

DAY OF DEATH: 12 Oct 44 KIA

PLACE OF DEATH: Eppelborn

IDENTIFICATION TAG: 0-821496

NATIONALITY: US

PLACE OF FUNERAL: Eppelborn (Q-49)

DISTRICT: St. Wendel

CEMETERY: of community

BURIED (DATE): 13 Oct 44

EXACT LOCATION OF GRAVE & NO: small cemetery

ADDRESS OF RELATIVES: ./.

CAUSE OF DEATH: Crash of plane (Thunderbolt)

NATURE OF INJURY OR ILLNESS:

DATE: 5 Nov 44

Major
(Signature)

#23

Kdo.r.d.Bar. 12/[illegible] (Neustadt)

(Dienststelle)

Wehrmachtteil: Luftwaffe

Nachweis über Sterbefall und Beisetzung eines Wehrmachtangehörigen

Familienname: Hooper

Vorname: Carl James

Dienstgrad: unbekannt

Truppenteil (letzte Einheit): verm. Amerikaner

Geburtstag: ./. Geburtsort: . .

Todestag: 12.10.44 Todesort: Eppelborn

Erkennungsmarke: 0-821496

Nationalität (nur bei Verbünd. od. Feinds.): verm. Amerikaner

Todesursache: Verwundung — Krankheit — Unfall — Selbstmord — Urteilsvollstreckung*) abgestürzt am 12.10.44 bei Eppelborn

Flugzeugmuster: Thunderbolt

Art der Verletzung oder Krankheit:

(Deutsche Bezeichnung)

Begräbnisort: Eppelborn

Kreis: St. Wendel Wehrkreis: XII

Friedhof: Gemeindefriedhof

Ehrenfeld oder ziviler Teil*) Beigesetzt am: 15.10.44

Genaue Grablage und Nr.: Kleiner Friedhof

Anschrift der Angehörigen: unbekannt

Die Verwundung usw. hat der Verstorbene sich zugezogen:

a) im Felde (Kriegsschaupl. od. bes. Geb.):

b) im Heimatgebiet (Wehrkreis):
durch Luftangriff: ja — nein*)

c) im Ausland (Staat):

den 5. November 1944

*) Nichtzutreffendes ist gestrichen.

Bestell-Nr. 975. Wkr.-Dr. XII Wiesbaden

Stellv. Gen. Kdo. XII A.K.
— 3. NOV. 1944
Nr.
Anlagen 2 X 16/WVV

I.A.

(Unterschrift, Dienstgrad)

Major

Hamm Z-1-14

AMERICAN

REPORT OF DECEASED PERSON

Identified X Unidentified ____ Buried X Unburied ____ Report Number 324

Name Hooper, Carl James Rank ____ Org. ____ ASN 0-821496

Location of Body: Town Eppelborn Country Germany Coordinates Q 448902

Cemetery Eppelborn (Civilian) Disposition of Effects: ____

Plot ____ Row ____ Grave ____ Description on Marker: ____

By Whom Buried: GERMAN SOLDIERS (use remarks) Date OCT-44

Place of Death: EPPELBORN Date 12 Oct 44 Cause KIA

Reported by: GR Office, 110th Inf, APO 28 Date 23 May 45

Names and addresses of other persons familiar with the case: Burgomeister

Evacuated by: 3047 QM GRS Co (Unit) Date 13-6-45

Evacuated to: ____ Date 16-6-45

Means of Identification From Initial Report: Tags 1. (__) 2. (__) Paybook (__)

Officer's AGO Card (__) Clothing Marks (__) Letters (__) Certificate of Ident. (__)

Bracelet (__). OTHER Grave markings on Cross: Born 11 May 1920 Name, (Flyer) Died 12 Oct 44

ACTUAL MEANS OF IDENTIFICATION BY GR PERSONNEL	
1. If no contradictory evidence exists any one item below constitutes positive identification.	2. If no contradictory evidence exists two or more items below constitutes positive identification.
____ Identification tags worn around neck. (Check 1. (__) or 2. (__))	____ Identification tags carried elsewhere than around neck. (Check 1. (__) or 2. (__)
____ Official Identification Card No. ____	____ Motor vehicle operator's permit. (Govt. or civilian)
____ Pay Book or Pay Data Card.	____ Personal papers or letters.
____ Signed statement of Identity (attached herewith)	____ Engraved jewelry.
____ Emergency Medical Tag, signed by an Officer, indicating the names, etc, obtained from deceased before death.	____ Clothing markings particularly on leggins and belt.
	____ Miscellaneous CROSS ON GRAVE (Explain)

Incl 1

Names of other deceased in immediate vicinity: _____

_____

_____

_____

_____

Remarks: (Add additional sheets if necessary) Aviator. Contact burgermeister.

_____

_____

THIS SPACE FOR SKETCH MAP OF LOCATION OF UNIDENTIFIED BODY OR FOR LOCATION OF DIS-INTERMENT.

INSTRUCTIONS: Show reference points, directions and distances. For directions show compass azimuths, or clock dial (in minutes) indicating principal reference point as 12 O'clock.

REPORT COMPLETED BY:

Name Rank

DISTRIBUTION:

One (1) - Army QM.
One (1) - Corps QM.

2nd Lt Carl J. Hooper, 0-821 496
Plot Z, Row 1, Grave 14,
United States Military Cemetery
Hamm, Luxembourg

31 July 1947

Mrs. Velma E. Hooper
8 Morton Avenue
Saugus, Massachusetts

Dear Mrs. Hooper:

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,

Incls.

THOMAS B. LARKIN
Major General
The Quartermaster General

irr

25 September 1946

Mrs. Velma E. Hooper
38 Morton Avenue
Saugus, Massachusetts

Dear Mrs. Hooper:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Second Lieutenant Carl J. Hooper, A.S.N. 0 821 496.

293 OK

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Hamm, plot E, row 1, grave 14. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located two and one half miles east of the city of Luxembourg, and is under the constant care and supervision of United States military personnel.

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

Please accept my sincere sympathy in your great loss.

Sincerely yours,

26

T. B. LARKIN
Major General
The Quartermaster General

Capt. Fogle
AFPPA-8/JWF/jpt/6
Rm 5 D 867 4/24/46

AFPPA-8

AAF 901 (9792) Hooper, Carl J.
(J 2438) 0-821496
(J 2414)
(KU 3315)

Mrs. Velma E. Hooper
38 Morton Avenue
Saugus, Massachusetts

Dear Mrs. Hooper:

I am writing to you in reference to your son who gave his life in the service of his Country during the European conflict.

In an effort to furnish the next of kin with all available details concerning casualties among our personnel, the Army Air Forces recently completed the translation of several volumes of captured German records.

In regard to Second Lieutenant Carl J. Hooper, these records indicate that he was killed 12 October 1944, when the P-47 (Thunderbolt) he was flying received a direct flak hit and crashed near St. Wendel, located approximately twenty miles northeast of Saarbrucken, Germany. It is regretted that neither time nor place of burial is given.

The Quartermaster General in his capacity as Chief, American Graves Registration Service, is charged with the responsibility of notifying the legal next of kin concerning grave locations of members of the military forces who are killed or die outside the continental limits of the United States. If the report of your son's burial has not been confirmed and you have not been notified by the Quartermaster General, that official will furnish you definite information immediately upon receipt of the official report of interment from the Commanding General of the Theater concerned.

May the knowledge of your son's valuable contribution to our cause sustain you in your bereavement.

Very sincerely,

LEON W. JOHNSON
Brigadier General, USA
Chief, Personnel Services Division

file 5/1/46

CHECK LIST FOR DISINTERMENTS
(To accompany Report of Burial)

Only Part I should be completed, if identification tags are available.
Both Part I & Part II should be completely filled out if identification tags are not available.
If information is unavailable, so indicate.

PART I
(Positive Identification)

1. Hooper, Carl James — Unk — Unknown — USAAF
(Full name of deceased) (Rank) (ASN) (Organization)

2. State if identification tags were attached to remains, how many, and where attached None

3. Give exact location from which disinterred, furnishing coordinates and map series used 448-902. Eppelborn, Germany.

NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION IN WITH PERMANENT LANDMARKS. Not available

4. Full name of cemetery (if buried in an organized cemetery) Civilian cemetery at Eppelborn, Germany

5. Approximate or established date of death (state which & give basis for date selected) Approx. Oct 44. Statement of burgomeister at Eppelborn.

6. Approximate or established date of burial (give basis for date established) Approx. Oct 44. Same as above.

7. Manner in which grave was marked and all information contained on the marker Grave marker had name of deceased on it.

8. List personal effects found in possession of civilian or unauthorized military personnel, furnishing name and address of individuals concerned Personal effects turned over to German commander by German soldiers who buried the deceased.

9. Names and addresses of all persons questioned concerning death or burial and information each furnished (contact local Mayor, priest, cemetery caretaker, those responsible for burial and any other possessing important information) Burgomeister at Eppelborn, Germany.

PART II
(Doubtful or Undetermined Identification)

10. Fill in any information available regarding name, rank, ASN, or organization (Check cemetery records and office) None

11. 5'9" — 140 — brown — unk
(Est Height) (Est Weight) (Color of Hair) (Color of Eyes)

12. Give description of facial features and body characteristics if possible, including the presence of scars, moles, circumcision, tattoos, length of hair, presence of mustache or beard, etc. None

8 DEC 1945
file

PSS G150 4th Ind. HH:RGA:jpm
HQ GRAVES REGISTRAT. & SERVICE, 881 QCM SERV GROUP, EASTERN COMD, APO 413,
U. S. ARMY. 1 October 1945

TO: Director General, U. S. Theater Graves Registration Service, Theater Service Forces, European Theater, (Rear) APO 887, U. S. Army.

Basic communication complied with.

For the Commanding Officer:

RICHARD A. ADAMS
Capt., QMC
Adj. Officer

HEADQUARTERS
UNITED STATES FORCES
EUROPEAN THEATER
GRAVES REGISTRATION SERVICE COMMAND
APO 887

RJV/mjg

(S: 21 August 1945)
(Hamm, Z-1-14) 21 July 1945

SUBJECT: Clarification of Identification of Deceased Personnel.
HOOPER, Carl J., 2nd Lt., 0-821496.

TO : Graves Registration Officer, Oise Base Section, APO 513, U. S. Army.

1. Report of Burial has been received in this headquarters for subject deceased officer, buried in Hamm U. S. Military Cemetery, Plot Z, Row 1, Grave 14, stating that remains were identified "by marker on grave at Eppelborn, Germany".

2. Request the burgomeister of Eppelborn, referred to in paragraph 5 of the Check List which accompanied the Report of Burial, or the authorities of the civilian cemetery at Eppelborn, be contacted in an effort to obtain the exact means by which identification was established at the time of the original burial.

3. Request this office be forwarded all information obtained.

For the Chief, Graves Registration Service Command:

Philip J. Wolf
PHILIP J. WOLF,
Captain, QMC,
Assistant.

293 QM (Gr Reg) 1st Ind. RTB:KJH:hps
Quartermaster, OIS, Com Z, APO 513, U. S. Army. 24 July 1945

TO: Commanding Officer, 62d QM Base Depot, APO 513, U. S. Army.
(Attention: Captain Webb).

Forwarded for compliance.

R. T. BENNISON
Colonel, QMC
Quartermaster

2nd Ind.

HEADQUARTERS, 62d QM BASE DEPOT, APO 513, U.S. ARMY, 27 July 1945.

TO: Commanding Officer, 610th QM Graves Reg. Co., APO 513, U.S. Army.

For compliance through this headquarters.

MAURICE MATISOFF
Colonel, QMC,
Commanding

HAMY, (Z-1-14) 3rd Ind. HBP/ccs
HQ, 610TH QM GRAVES REG. CO., APO 513, U. S. ARMY, 26 September 1945.

TO: Commanding Officer, 551st Composite Service Gp, APO 513, U. S. ARMY.

Submitted herewith four papers obtained from the secretary to the Burgermeister of St. Wendel, Germany, pertaining to identification of subject deceased.

HASKELL B. PUGE
1st Lt., QMC
Commanding

Abschrift

Der Amtsbürgermeister
als Ortspolizeibehörde
Abt. I b

Eppelborn, den 13. Oktober 1945

An
das Wehrbezirkskommando
in St. Wendel

Unter Bezugnahme auf die heute vorm. geführte Unterredung mit Uffz. Kallenborn übersende ich die noch bei dem abgestürzten Feindflieger aufgefunde Brieftasche mit Inhalt.

Eine Todesbescheinigung von Dr. Laumeier füge ich ebenfalls bei.

I.A.
gez. Schorr
I.Amtssekretär

Abschrift

Meldung

über Abschuß bezw. Notlandung von feindlichen Flugzeugen

1.) Meldende Dienststelle: Polizeiverwaltung, Tag: 12.Oktober 1944

2.) Absturz, bezw. Notlandestelle: Ort: Eppelborn Kreis: Ottweiler
Tag und Uhrzeit: 1o,45 12.1o.1944

3.) Art des Flugzeuges: Nationalität: unbekannt,
Typ: unbekannt
Morotenzahl: 1 Nr. 12577 Rack F T/244/0

4.) Verbleib der Besatzung: a) tot: Flugzeugführer
b) Festgenommen: keine
c) nochflüchtige: keine

gez. Unterschrift
Örtl.Luftschutzleiter

Abschrift

Empfangsbescheinigung

1.) Silberring
2.) Karte auf Leinen
3.) Eiserne Portion
4.) Behälter mit Filmstreifen
5.) Paar Schuhe
6.) Eine Erkennungsmarke mit Kette.

Eppelborn, den 12. Oktober 1944
gez. Unterschrift
Uffz.

Abschrift

Todesbescheinigung.

Jahr 194

1. Vor- und Familienname: (bei Kindern unter 14 Jahren ist Stand und Name der Eltern, bei unehelichen Name und Stand der Mutter anzugeben)	Carl James Hooper Erkennungs-Nr. O-821496/T 43 / 44 A
2. Geschlecht:	männlich - ~~weiblich~~
3. Datum der Geburt:	Jahr 1920, Monat Mai, Tag 11
4. Tag und Stunde des Todes: (vormittags, das ist nach Mitternacht bis Mittag; nachmittags, das ist nach Mittag bis Mitternacht)	Monat Oktober, Tag 12, Stunde 10,45 U. vorm. / U. nachm.
5. Beruf und Stellung im Beruf: (bei Ehefrauen: des Mannes, bei Kindern: des Vaters evtl. der Mutter)	2 D Lt.
6. Wohnung: Straße (bezw. Ortsbezeichnung) und Hausnummer	366 Lincoln Avenue Saugust Massachusetts USA
7. Ort des Todes, wenn außerhalb der Wohnung (evtl. Anstalt):	Eppelborn
8. Tag und Stunde der Leichenbesichtigung:	12. Oktober Tag, Stunde 16,0 U. vorm. / U. nachm.
9. Todesursache bezw. Totgeburt: (in deutscher Bezeichnung ggf. unter Beifügung der wissenschaftlichen Benennung. - Bei Verunglückung oder anderer gewaltsamer Einwirkung deren Art und Ursache, sowie ob Berufs- oder Betriebsunfall)	a) Grundleiden: - b) Begleitkrankheiten: - c) Folgekrankheit: - d) Welches der genannt. Leiden hat den Tod unmittelbar herbeigeführt: Völlige Zertrümmerung des Gehirnschädels mit völliger Zertrümmerung des Gehirns. Sofortiger Todeseintritt.
Zusatz: Vom nicht behandelnden Arzte festgestellte Todesursachen oder Angaben der Angehörigen oder der sonstigen Umgebung über die Todesursache, letzte Erkrankung, etwaige Wahrnehmungen dazu:	-
Name des behandelnden Arztes:	-
Welche Zeichen des Todes sind vorhanden?	Leichenstarre
10. Sind Anzeichen einer bösartigen epidemischen Krankheit vorhanden? und welche?	nein
11. Sind Anzeichen eines unnatürlichen Todes vorhanden? und welche?	ja (Flugzeugabsturz)
12. bei Kindern unter einem Jahr a) Art der Ernährung?	zu a) Muttermilch - Ammenmilch - Tiermilch (sonstige) --
b) ob in fremder Pflege:	zu b) Nein - Ja
c) wenn ja bei wem?	zu c)
d) sind Anzeichen einer schweren Vernachlässigung vorhanden?	zu d) Nein - ~~Ja~~
13. Ist der - die Verstorbene a) von dem unterzeichneten Arzte behandelt worden?	zu a) ~~Ja~~ - Nein
b) oder ihm bekannt gewesen?	zu b) ~~Ja~~ - Nein
c) ggf. von wem ermittelt?	zu c)
14. Ist Beschleunigung der Beerdigung erforderlich?	ja
15. Wird Überführung in die Leichenhalle beantragt?	ja

Gegen die Beerdigung - auch vor 3×24 Stunden - liegen ärztlicherseits keine Bedenken vor.

Nr. ..... des Sterberegisters.

Eppelborn, den 12. Oktober 1945

Standesamt

gez. Dr. Laumeier
(Unterschrift des Arztes)

Nr. 103b. Vorrätig bei F. Tannenberg, Saarbrücken

Auszug

aus der Polizeiverordnung des Oberpräsidenten der Rheinprovinz vom 19. Juli 1909 betr. die Einführung der obligatorischen Leichenschau.

§ 1.

Es darf keine Leiche beigesetzt werden, bevor der Ortspolizeibehörde ein in Gemäßheit des § 2 dieser Verordnung ausgestellter Totenschein vorgelegt worden ist.

§ 2.

Der Totenschein ist durch einen approbierten Arzt oder durch einen gemäß § 5 dieser Verordnung zugelassenen Leichenbeschauer nach dem angefügten Muster auszustellen. Der Arzt oder Leichenbeschauer darf einen Totenschein nur erteilen, nachdem er die Leiche persönlich besichtigt hat.

Wenn ein Kind tot geboren oder in der Geburt verstorben ist, so muß die Anzeige spätestens am nächstfolgenden Wochentage geschehen pp.

Jeder Sterbefall ist spätestens am nächstfolgenden Wochentage dem Standesbeamten des Bezirks, in welchem der Tod erfolgt ist, anzuzeigen.

Anmerkung: Feiertage, die auf einen Wochentag fallen, gelten als Sonntag Die vorgeschriebenen Fristen müssen unter allen Umständen eingehalten werden. Die standesamtliche Anmeldung der Sterbefälle und Totgeburten kann auch ohne den ärztlichen Totenschein bewirkt werden. Der Totenschein muß alsdann innerhalb 48 Stunden nach dem Eintritt des Todes vorgelegt werden,

REBURIAL RESTRICTED

G. REGISTRATION
Form
(Revised Sept. 1948)

REPORT OF BURIAL

TM 10-630 AND AR 30-1875

15 June 45
Date

D-821496

Last Name	First	Initial	Rank	Serial No.
Hooper	Carl	James	2ND LT	Unknown

Unit	Organization
448-902	483 FTR, Gp. Le

Place of Death	Date of Death	Cause of Death
Eppelborn, Germany	Oct. 44	Plane crash

Time and Date of Burial	Name of Cemetery	Name or Coordinates of Location
0850 15 June 45	US Mil Cem Hamm, Lux.	VP 8713

Grave Number	Row Number	Plot Number	Type of Marker
14			Cross

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

Embossed plate

If No Identification Tags
How were remains identified?

By marker on grave at Eppelborn, Germany

What means of identification were buried with the body?

Embossed plate

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

	Name	Serial No.	Rank	Organization	Grave No.
Who is buried on: Deceased's Right:	Pieren	Unknown	S/Sgt	Unknown	13
Deceased's Left:	Knab	20275240	Unk	Unknown	15

Body brought in by Sgt Lisle, 3047th GRS Co

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

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

Emergency Addressee Unknown

Name

Address

Religion Unknown

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

None

REBURIAL

Previously buried in isolated grave

Isolated in Eppelborn Grave 448-902

Signature of Officer or other person reporting burial

Verified by G.R.S. Officer

G. F. BEHNER JR. 1st Lt
3045th QM Gr Reg Co

FILE
DEC 17 1945

RESTRICTED

IF DECEASED UNIDENTIFIED

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

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

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

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

Left Hand 1 2 3 4 Thumb

Right Hand 1 2 3 4 Thumb

TOOTH CHART

Deceased's Left

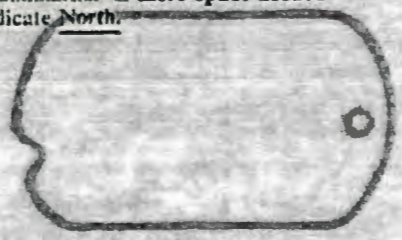
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
X	7	6	5	4	3	2	1	1	2	3	4	5	6	7	X

Deceased's Right

Upper Lower

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

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.



Characteristics:

Other Data:

DEC 1 1945

SENSITIVE SURFACE - HANDLE EDGES ONLY

WAR DEPARTMENT

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

REPORT OF DEATH

DATE 9 Aug 45 rc

FULL NAME	ARMY SERIAL NUMBER	GRADE
Hooper, Carl J.	0821496	2/Lt
HOME ADDRESS	**ARM OR SERVICE**	**DATE OF BIRTH**
Saugus, Mass.	Air Corps	11 May 20
PLACE OF DEATH	**CAUSE OF DEATH**	**DATE OF DEATH**
European Area	Killed in action	12 Oct 44
STATION OF DECEASED	**DATE OF ENTRY ON CURRENT ACTIVE SERVICE**	**LENGTH OF SERVICE FOR PAY PURPOSES** (YEARS / MONTHS / DAYS)
European Area	7 Jan 44	

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)

Mrs. Velma E. Hooper (mother) 38 Morton Ave. Saugus, Mass.

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)

Mrs. Velma E. Hooper (mother) same as above
Elizabeth E. Hooper (sister) same as above

INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
										X			

ADDITIONAL DATA AND/OR STATEMENT

[X] BATTLE [ ] NON-BATTLE

The individual named in this report of death is held by the War Dept to have been in a missing in action status from 12 Oct 44 until such absence was terminated on 6 Aug 45 when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

FILE
AUG 14 1945

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

BY ORDER OF THE SECRETARY OF WAR:

J A Lash

ADJUTANT GENERAL

WD AGO FORM 52-1
1 FEBRUARY 1945

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

SENSITIVE SURFACE - HANDLE EDGES ONLY

WAR DEPARTMENT

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

288,617
3

REPORT OF DEATH

DATE 9 Aug 45 rc

FULL NAME	ARMY SERIAL NUMBER	GRADE
Hooper, Carl J.	0821496	2/Lt
HOME ADDRESS	**ARM OR SERVICE**	**DATE OF BIRTH**
Saugus, Mass.	Air Corps	11 May 20

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
European Area	Killed in action	12 Oct 44

STATION OF DECEASED	DATE OF ENTRY ON CURRENT ACTIVE SERVICE	LENGTH OF SERVICE FOR PAY PURPOSES		
		YEARS	MONTHS	DAYS
European Area	7 Jan 44			

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)

Mrs. Velma E. Hooper (mother) 38 Morton Ave. Saugus, Mass.

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)

Mrs. Velma E. Hooper (mother) same as above
Elizabeth E. Hooper (sister) same as above

INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
										X			

ADDITIONAL DATA AND/OR STATEMENT

[X] BATTLE [ ] NON-BATTLE

The individual named in this report of death is held by the War Dept to have been in a missing in action status from 12 Oct 44 until such absence was terminated on 6 Aug 45 when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

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

BY ORDER OF THE SECRETARY OF WAR:

J A Lash

ADJUTANT GENERAL

WD AGO FORM 52-1
1 FEBRUARY 1945

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

288617

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

—BATTLE CASUALTY REPORT

NAME	SERIAL NUMBER	GRADE	ARM OR SERVICE	REPORTING THEATRE
HOOPER CARL J	O-821496	2 LT	AC	ETO

PLACE OF CASUALTY	DATE OF CASUALTY DAY	MONTH	YEAR	FLYING OR JUMPING STAT	TYPE OF CASUALTY	SHIPMENT NUMBER
GERMANY9	12	OCT	44	A	MIA	232

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 VELMA E HOOPER	MOTHER	6 NOV 44 bmi

NO. AND NAME OF STREET—CITY—STATE

38 MORTON AVENUE SAUGUS MASSACHUSETTS

REMARKS:

☐ CORRECTED COPY

ARMY EFFECTS BUREAU RECEIVED NOV 10

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 ____ REVIEWED BY ____

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

ACCT. AREA	CASUALTY STATUS	ORIGINAL CAS. DATE DAY	MO.	YR.	MESSAGE NO.	LATEST CAS. DATE DAY	MO.	YR.	REFERENCE AREA	CREW POS.	RESIDENCE STATE	COUNTY	COMP	RACE
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.

W.D., A.G.O. FORM NO. 6005
16 JUNE 1944

288617

HCC/EIW/hls
1 November 1948

Mrs. Velma E. Hooper
38 Morten Avenue
Saugus, Massachusetts

Dear Mrs. Hooper:

This refers to previous correspondence of the Army Effects Bureau regarding the personal effects of your son, Second Lieutenant Carl J. Hooper.

A specific request was made of the Bureau to locate items of effects which were recovered by a German national, Mr. Ottmar Eichert of Saarbrucken, Germany.

A negative response has been received as a result of our inquiry directed to the European American Graves Registration Command. Personal effects of Lieutenant Hooper were not received by the U.S. military authorities overseas. The Administrator for Foreign Operations, American Red Cross, National Headquarters, Washington, D. C., was contacted by this Bureau; however, this too proved unsuccessful in locating the effects of your son.

Our U.S. forces did not enter Germany until the fall of 1944 and the American Red Cross Field Directors at that time were assigned to Army units. It is impossible to determine what American Red Cross Field Director would have been on duty in the vicinity of St. Wendel, Saar, Germany, in the summer of 1944.

It is doubtful that American Red Cross personnel handled the personal effects of your son. The Army had a very strict system of collecting articles of deceased servicemen and transmitting them directly to Quartermaster Effects Depots. It is my belief that the effects of your son were turned over by the German national to a medical unit who in turn should have sent the effects to a Quartermaster Effects Depot. Due to the inevitable confusion of combat operations, it was sometimes impossible for the Quartermaster Effects Depot personnel to safeguard the effects of our deceased for transmittal to the next of kin.

Rely Paid

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

In Reply Refer To: _____

Reference is made to our letter dated
reporting shipment of the personal property belonging to

If you have received this property, I will appreciate your acknowledging delivery in accordance with the above mentioned letter. Should that communication have been misplaced, you may acknowledge receipt by signing in the space provided below and returning one copy of this communication to the Army Effects Bureau.

In the event the property has not been received, please so advise, and tracer action will be instituted by this Bureau.

Although I prefer to have your acknowledgment, unless we hear from you within a month from this date, I shall assume that satisfactory delivery was made and that no further action on our part is necessary.

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

Yours very truly,

P. U. MAXBY
Lt. Col, QMC
Effects Quartermaster

1 Incl--Envelope

_____ (Signature) _____ (Date)

EFF QM Form
8 July 1946 109

xxxxxxxxxxxxxxxx

288617

HCC/ELN/hls
1 November 1948

Mrs. Velma E. Hooper
38 Morton Avenue
Saugus, Massachusetts

Dear Mrs. Hooper:

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Mrs. Velma E. Hooper
1 November 1948
288617

Due to the length of time which has elapsed since original recovery of the property by Mr. Eichert, it is impractical to direct further inquiry to our overseas installations for the location of these effects.

I fully realize your desire to receive the belongings of your son and regret that the best of our efforts have not been successful in locating them for you. Please accept my sincere sympathy in the loss you have sustained.

Sincerely yours,

H. O. CALDWELL
Effects Quartermaster

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

In Reply Refer To:_____

Reference is made to our letter dated
reporting shipment of the personal property belonging to

If you have received this property, I will appreciate your acknowledging delivery in accordance with the above mentioned letter. Should that communication have been misplaced, you may acknowledge receipt by signing in the space provided below and returning one copy of this communication to the Army Effects Bureau.

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

Yours very truly,

P. U. MAXBY
Lt. Col, QMC
Effects Quartermaster

1 Incl--Envelope

_____ (Signature)

_____ (Date)

EFF QM Form
8 July 1946 109

Form MA-9412
(May 1946)

THE AMERICAN NATIONAL RED CROSS
OFFICE OF THE FIELD DIRECTOR
COMMAND AND GENERAL STAFF COLLEGE
AND
FORT LEAVENWORTH, KANSAS

October 25, 1948

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

REFER: 288617

HOOPER, Carl J.
2nd Lt. - O-821496
Air Corps - Deceased

Ottmar Eichert
German National

Dear Mr. Caldwell:

In accordance with your request of 19 August, 1948, we have secured a report concerning the disposition of personal effects of the above named deceased officer, from our Headquarters, European Theatre, we are attaching a copy of this report.

We believe the attached, to be self-explanaotry, and that there is no further information available. However, if further information is desired, please do not hesitate to call upon us.

Very truly yours,
W. Mason Bridges
W. MASON BRIDGES
FIELD DIRECTOR

Attach. 2

MAS:

"COPY"

THE AMERICAN NATIONAL RED CROSS
Midwestern Area St. Louis

TO: Mr. W. Mason Bridges DATE: October 20, 1948

FROM: Mr. O'Conner SUBJECT: HOOPER, Carl J., 2nd Lt.
O-821493
Air Force

Ottmar Eichert
German National

FORT LEAVENWORTH, KANSAS

Attached is a copy of a letter from Mr. John W. Gordon, Director, Military Welfare Service and Services in Military Hospital, European Theatre, regarding the effects of the above-named officer, about whom you wrote this office on August 20, 1948.

You will note in the last paragraph of Mr. Gordon's letter that he offers his assistance if further information is needed. We shall be glad to hear from you again on this subject if we can assist in any way.

Attach.

/s/ K. M. O'Conner
K. M. O'CONNER
ASSISTANT DIRECTOR
MILITARY WELFARE SERVICE

GENERAL HEADQUARTERS, APO 171, C/O POSTMASTER,
NEW YORK, NEW YORK

28 September 1948

EC No. 432

Mr. Frank T. Cleverley
Administrator for Foreign Operations
American Red Cross
National Headquarters
Washington 13, D.C.

RE: HOOPER, Carl J., 2nd Lt.
0-821496
Air Force

Ottmar Eichert
German National

Attention: Mr. Raymond J. Boland

Dear Mr. Cleverley:

Your correspondence TFE-253 concerning personal effects of the above-named deceased officer has been received.

As you know, our forces did not enter Germany until the fall of 1944, and our field directors at that time were assigned to Army units. It is, therefore, impossible for us to determine what field director would have been on duty in the vicinity of St. Wendel, Saar Germany, unless through military history, we trace the route followed by various infantry divisions. We can definitely, however, say, that American Red Cross Personnel never officially handled such matters. The Army had a very strict system of collecting articles of deceased servicemen and transmitting them directly to Quartermaster Effects Depots.

Our experience has been that most European people associate the American Red Cross with medical units in the Army. This error h s been called to our attention many times and probably results from the fact that the Red Cross societies in this theater are much more closely associated with the work of doctors and nurses than our organization. We believe, therefore, that it is reasonable to assume that the German national referred to in this letter has made this mistake, and that the effects of this officer were turned over by him to medical unit who in turn should have sent it to a Quartermaster Effects Depot.

We believe there is no further help we can give you in this case. However, if further information is needed, please do not hesitate to call on us.

Very truly yours,

HOWARD L. BENTON
DIRECTOR OF OPERATIONS

BY _____
John W. Gordon
Director, Military Welfare Service
and Services in Military Hospitals

CERTIFIED TRUE COPY

pB

B. A. FULLERTON
SAUGUS, MASS.

PAID

August 18, 1948

Commanding General, N.Y.P.E.
Attn: AGR Division

RE: Hooper, Carl J.
S/LT, O-[illegible]

Transportation charge from Lynn
to Saugus, Mass. 15.00

I certify that the above bill is correct and just; that payment therefor has not been received; that all statutory requirements as to American production and labor standards, and all conditions of purchase applicable to this transaction have been complied with; and that State or local sales taxes are not included in the amount billed.

Benj. A. Fullerton
Owner
Fullerton Funeral Home
Saugus, Mass.

CERTIFICATE

(AR 30-1830)

PAID WW II

1. FILL IN EITHER PART A OR PART B; NOT BOTH.
2. USE PART A WHEN INTERMENT IS IN A CIVILIAN OR PRIVATE CEMETERY.
3. USE PART B WHEN REMAINS ARE DELIVERED TO HOME OR OTHER PLACE PRIOR TO BURIAL IN A NATIONAL OR POST CEMETERY.

PART A - CIVILIAN OR PRIVATE CEMETERY

A — REQUEST FOR REIMBURSEMENT OF INTERMENT EXPENSES

(PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)

NAME OF DECEDENT	GRADE	SERIAL NUMBER	COMPONENT
HOOPER, CARL J.	2 LT	0-621496	AAF

I certify that the sum of $ _____ was paid by me from personal funds in connection with the interment of the remains of the above named decedent in the below named cemetery.

INSERT NAME OF CEMETERY	CITY OR COUNTY	STATE
RiversideCemetery	Saugus	Mass.

INSTRUCTIONS TO PERSON SIGNING THIS FORM

1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR.
2. Return four copies to: HEADQUARTERS NEW YORK PORT OF EMBARKATION D - C #1 AGR 1st Avenue & 58th Street Brooklyn, N.Y.

SIGNATURE OF CLAIMANT: Velma E Hooper

ADDRESS OF CLAIMANT (City, Street or RFD, and State): [illegible] Saugus, Mass.

RELATIONSHIP TO DECEDENT	DATE
[illegible]	[illegible]

PART B - NATIONAL OR POST CEMETERY

B — REQUEST FOR REIMBURSEMENT OF TRANSPORTATION EXPENSES

(PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)

NAME OF DECEDENT	GRADE	SERIAL NUMBER	COMPONENT

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 and to the following places:

INSERT CITY OR TOWN (OR ADDRESS NOT IN A CITY OR TOWN) FROM WHICH REMAINS WERE SHIPPED	INSERT NAME AND LOCATION OF NATIONAL OR POST CEMETERY TO WHICH REMAINS WERE SHIPPED

INSTRUCTIONS TO PERSON SIGNING THIS FORM

1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR.
2. Return four copies to:

SIGNATURE OF CLAIMANT

ADDRESS OF CLAIMANT (City, Street or RFD, and State)

RELATIONSHIP TO DECEDENT	DATE

QMC FORM 1238
23 OCT 47

REPLACES WD AGO FORM R-5507, QMC FORM R-5048 AND QMC FORM R-5066, WHICH ARE OBSOLETE.

EXPLANATION OF PART A - CIVILIAN OR PRIVATE CEMETERY

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 PART B - NATIONAL OR POST CEMETERY

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.

ORIGINAL

RECEIPT OF REMAINS

HEADQUARTERS, NYPE - DISTRIBUTION CENTER #1, AGRS
DISTRIBUTION CENTER 58th ST. & 1st AVE., BROOKLYN, N.Y. ROUTINE

REMAINS CONSIGNED TO:

BENJAMIN A. FULLERTON

325 CENTRAL STREET

SAUGUS, MASS.

0-821496

REMAINS OF THE LATE 2 LT CARL J. HOOPER ACCOMPANIED BY AN ESCORT ARE SCHEDULED TO LEAVE NEW YORK ON TRAIN NUMBER 12 NEW HAVEN RAILROAD AT NINE AM EST ON THURSDAY 19 AUGUST AND DUE TO ARRIVE AT LYNN AT THREE FIFTY ONE PM EST ON SAME DATE.

PLEASE ARRANGE TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL AND PLEASE NOTIFY THE NEXT OF KIN OF THE DATE AND TIME OF ARRIVAL.

ESCORT: BARRETT, JAMES R, CAPT.,
AO-473507, 104th AFBU

G. H, BARE

COLONEL, QMC

I, the undersigned, do hereby acknowledge receipt of the remains of the abovenamed deceased this 19 (Day) day of Aug. (Month), 1948

Capt. James R. Barrett (Witness (Escort))
104 BU.

Benj. A. Fullerton (Consignee)

QMC FORM REV 5 MAR 48 1193

U. S. GOVERNMENT PRINTING OFFICE 16—54787-1

SPACE NO 624 BAY NO ____

INSPECTION CHECKLIST
(FOR USE AT DISTRIBUTION POINT)

NAME	RANK	SERIAL NUMBER
HOOPER, CARL J.	2 LT	0-821496

NEXT OF KIN	ADDRESS
	MASS

SHIPPING CASE - General Appearance (Check ONLY Discrepancies)		CONDITION OF SHIPPING CASE (Check one) ☑ SATISFACTORY ☐ UNSATISFACTORY
	FINISH (Exterior)	REMARKS
	FINISH (Interior)	
	HANDLES	
	HANDLE BOLTS	
	STENCILING - NAMEPLATE Clean	
✓	men	

CASKET - General Appearance (Check ONLY Discrepancies)		CONDITION OF CASKET (Check one) ☑ SATISFACTORY ☐ UNSATISFACTORY
✓	FINISH (Exterior) Clean & polish	REMARKS
	HANDLES AND FASTENINGS	
	STENCILING - NAMEPLATE	
✓	CAM LOCKS (Sealing) touch up	
	ODOR OR MOISTURE	

ROUTED THROUGH

☐ MORTUARY OPERATING ROOM	☐ MORTUARY REPAIR SHOP
CONDITION OF REMAINS ☐ SATISFACTORY ☐ UNSATISFACTORY	CASKET REPAIRED ☐
NECESSARY DISINFECTION (Explain)	CASKET EXCHANGED ☐
	SHIPPING CASE REPAIRED ☑
	SHIPPING CASE EXCHANGED ☐
	REMARKS Bonded Rally

TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTING OFFICER
				8/13/48	

REMARKS

IF SHIPPING CASE DOES NOT REQUIRE REPLACEMENT, REMOVE STENCIL FROM INSIDE CASE AND DESTROY. IF CASE IS TO BE REPLACED, RE-STENCIL WITH STENCIL FOUND INSIDE CASE, THEN DESTROY STENCIL.

Paymtp 8/13/48

Final Insp Ray Dobbs H. & H G. Tracy

QMC FORM 4 MAR 46 R-5024 *Local Reproduction Authorized*

XV 012RE

OGELTHORPE

WU 460 34 4 EXTRA COLLECT

LYNN MASS JUL 3 350P

G H BARE COLONEL QMC

BKLYN

TELEGRAM RECEIVED REGARDING 2 LT CARL J HOOPER ENROUTE TO THE UNITED STATES REMAINS WILL BE DELIVERED TO BENJAMIN A FULLERTON AS PER RECORD AT RAILROAD STATION ON ARRIVAL

VELMA E HOOPER 38 MORTON AVE SAUGUS.

619P

2 LT 38.

MESSAGEFORM

MESSAGE CENTER No.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT

CALLS	STA. SER. No.	PRECEDENCE	TRANSMISSION INSTRUCTIONS	ORIGINATOR	DATE-TIME GROUP
V	NR				

ACTION	INFORMATION	EXEMPT	OPERATING SIGNALS	GROUP COUNT

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Originator)

SECURITY CLASSIFICATION

ACTION TO:

. MRS VELMA E HOOPER

. 38 MORTON AVE

. SAUGUS MASS

CGELTHORPE

PRECEDENCE FOR ACTION INFORMATION

TELEGRAPH DIVISION BROOKLYN BASE, NYPE

☐ ORIGINAL MESSAGE

REFERS TO ANOTHER MESSAGE IDENTIFICATION CLASSIFICATION

INFORMATION TO:

PLEASE BE ADVISED THE REMAINS OF THE LATE **2 LT CARL J HOOPER** ARE ENROUTE TO THE UNITED STATES. RECORDS OF THIS OFFICE INDICATE YOU WISH REMAINS DELIVERED TO **BENJAMIN A FULLERTON 325 CENTRAL ST SAUGUS MASS**

PLEASE INSTRUCT FUNERAL DIRECTOR TO ACCEPT REMAINS AT RAILROAD STATION ON ARRIVAL. WE REGRET IT IS NOT POSSIBLE AT THIS TIME TO GIVE YOU A DEFINITE DELIVERY DATE, HOWEVER, WE APPRECIATE YOUR DESIRE TO RECEIVE REMAINS AS SOON AS POSSIBLE AND ASSURE YOU EVERY EFFORT IS BEING MADE TO EXPEDITE DELIVERY. YOUR FUNERAL DIRECTOR WILL BE NOTIFIED BY TELEGRAM THREE DAYS PRIOR TO DATE OF DELIVERY OF THE RAIL ROUTING AND SCHEDULED TIME REMAINS WILL ARRIVE AT RAILROAD STATION AND HE WILL BE REQUESTED TO INFORM YOU SO THAT YOU MAY MAKE FINAL FUNERAL ARRANGEMENTS. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. PLEASE CONFIRM ABOVE DELIVERY INSTRUCTIONS WITHIN FORTY EIGHT HOURS OF THE DATE OF THIS MESSAGE BY TELEGRAM COLLECT TO DISTRIBUTION CENTER NUMBER ONE, NEW YORK PORT OF EMBARKATION OR SUBMIT NEW INSTRUCTIONS. IT WILL NOT BE POSSIBLE TO COMPLY

SECURITY CLASSIFICATION

RELEASED TO W U AUTHORITY JUN 8 1948

SIGNATURE

ORIGINATING AGENCY

SYMBOL	DATE-TIME GROUP	OFFICIAL TITLE	PAGE OF

WD AGO FORM 11-168 15 JUN 1945 This form supersedes WD AGO Form 11-168, 23 Aug 44, and WD AGO Form 801, 12 Mar 43, which are obsolete.

16—42001-1 ☆ U. S. GOVERNMENT PRINTING OFFICE

53A

D

AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF THE FORTY EIGHT HOUR PERIOD. SUGGEST YOU ARRANGE WITH ANY LOCAL PATRIOTIC OR VETERANS ORGANIZATION IF YOU DESIRE MILITARY HONORS AT FUNERAL. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.

G H BARE
COLONEL, QMC

BUDGET BUREAU No. 49-R277.

REQUEST FOR DISPOSITION OF REMAINS

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

2nd Lt Carl J. Hooper, O-821 496
Plot E, Row 1, Grave 14,
United States Military Cemetery
Hamm, Luxembourg

31 July 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, Wilma E. Hooper (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
- [x] 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.
- [x] 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY

Riverside Saugus Mass.
(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.)*

None.
DD Proc 19 Mar 48

Coded 12 Mar 48
Medley

QQMG FORM 14 NOV 1946 345 MILITARY

10—50413-1

PAGE 17

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FEB 10

PART I (*Continued*)

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

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

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

OR

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

FULL NAME OF FUNERAL DIRECTOR			
Benjamin A. Lullerton.			
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
325 Central St	Saugus 01	Essex	Mass
EXPRESS OFFICE (*Nearest railroad passenger station*)	TELEGRAPH ADDRESS		TELEPHONE No.
Lynn.	Lynn		Sau 1500

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
HOOPER	ELISABETH	E	SISTER
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
38 MORTON AVE	SAVGUS	ESSEX	MASS

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.

Velma E. Hooper — (SIGNATURE OF NEXT OF KIN)

38 Morton Ave. — (STREET AND NUMBER)

VELMA E HOOPER — (NAME PRINTED OR TYPED)

Saugus Mass. — (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 3rd day of September 1947, at ~~city (or town)~~ of Saugus, Mass, county of Essex, and State (or ~~Territory or District~~) of Massachusetts

Noel C. McKinney — (SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

Notary Public My commission exp. 12-6-51. — (OFFICIAL TITLE)

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

16—80411-1

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.

(DATE)

(SIGNATURE OF NEXT OF KIN) (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	FIRST NAME	MIDDLE INITIAL
RELATIONSHIP TO THE DECEASED		
NUMBER AND STREET	CITY OR TOWN	STATE OR COUNTRY

(DATE)

(SIGNATURE) (STREET AND NUMBER)

(NAME PRINTED OR TYPED) (CITY AND STATE)

ADDITIONAL REMARKS AND INSTRUCTIONS

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

U. S. GOVERNMENT PRINTING OFFICE

RRE Form #39
13 Jul 43

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

HOOPER	Carl	J	2 LT	O 821 496
(Last Name)	(First Name)	(Initial)	(Rank)	(ASN)

RePatriated to the United States: 28 JUN 1948

STATION FILE

Incl #

CHECK LIST FOR DISINTERMENTS
(To accompany Report of Burial)

Only Part I should be completed, if identification tags are available.
Both Part I & Part II should be completely filled out if identification tags are not available.
If information is unavailable, so indicate.

PART I
(Positive Identification)

1. Hooper, Carl James — Unk — Unknown — USAAF
(Full name of deceased) (Rank) (ASN) (Organization)

2. State if identification tags were attached to remains, how many, and where attached None

3. Give exact location from which disinterred, furnishing coordinates and map series used Q 448-902, Eppelborn, Germany.

NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION IN WITH PERMANENT LANDMARKS. Not available

4. Full name of cemetery (if buried in an organized cemetery) Civilian cemetery at Eppelborn, Germany

5. Approximate or established date of death (state which & give basis for date selected) Approx. Oct 44. Statement of burgomeister at Eppelborn.

6. Approximate or established date of burial (give basis for date established) Approx. Oct 44. Same as above.

7. Manner in which grave was marked and all information contained on the marker Grave marker had name of deceased on it.

8. List personal effects found in possession of civilian or unauthorized military personnel, furnishing name and address of individuals concerned Personal effects turned over to German commander by German soldiers who buried the deceased.

9. Names and addresses of all persons questioned concerning death or burial and information each furnished (contact local Mayor, priest, cemetery caretaker, those responsible for burial and any other possessing important information) Burgomeister at Eppelborn, Germany.

PART II
(Doubtful or Undetermined Identification)

10. Fill in any information available regarding name, rank, ASN, or organization (Check cemetery records and office) None

11. 5'9" — 140 — brown — unk
(Est Height) (Est Weight) (Color of Hair) (Color of Eyes)

12. Give description of facial features and body characteristics if possible, including the presence of scars, moles, circumcision, tattoos, length of hair, presence of mustache or beard, etc. None

HEADQUARTERS
UNITED STATES FORCES
EUROPEAN THEATER
GRAVES REGISTRATION SERVICE COMMAND
APO 887

RJV/mjg

(S: 21 August 1945)
21 July 1945

(Hamm, Z-1-14)

SUBJECT: Clarification of Identification of Deceased Personnel.
HOOPER, Carl J., 2nd Lt., 0-821496.

TO : Graves Registration Officer, Oise Base Section,
APO 513, U. S. Army.

1. Report of Burial has been received in this headquarters for subject deceased officer, buried in Hamm U. S. Military Cemetery, Plot Z, Row 1, Grave 14, stating that remains were identified "by marker on grave at Eppelborn, Germany".

2. Request the burgomeister of Eppelborn, referred to in paragraph 5 of the Check List which accompanied the Report of Burial, or the authorities of the civilian cemetery at Eppelborn, be contacted in an effort to obtain the exact means by which identification was established at the time of the original burial.

3. Request this office be forwarded all information obtained.

For the Chief, Graves Registration Service Command:

PHILIP J. WOLF,
Captain, QMC,
Assistant.

DISTRIBUTION:
Orig & dup - Addressee
1 Copy - GR File
1 Copy - S File

293 QM Gr Reg. 1st Ind. RTB:KJH:hps
Quartermaster , OIS, Com Z ,APO 513 , U.S. Army. 24 July 1945

TO : Commanding Officer , 62 QM Base Depot , APO 513 , U.S. Army .
(Attention : Captain Webb).

Forwarded for compliance.

/s/ Alex Kaminskie
for /t/ R.T. BENNISON
Colonel , QMC
Quartermaster

2nd Ind.

HEADQUARTERS , 62nd QM BASE DEPOT , APO 513 , U.S. Army 27 July 1945

TO ; Commanding Officer , 610th QM Graves Reg. Co. APO 513 , U.S. Army.

For compliance through this headquarters.

/s/ Maurice Matisoff

/t/ MAURICE MATISOFF
Colonel, QMC ,
Commanding

HAMM , (Z-1-14) 3rd Ind. HBP/ccs
HQ, 610th QM GRAVES REg.CO., APO 513 , U.S. Army 26 September 1945.

TO ; Commanding Officer , 551st Composite ServiceGp , APO 513 , U.S Army.

Submitted herewith four papers obtained from the secretary to the Burgermeister of St, Wendel , Germany , perteining to identification ofsubject deceased.

/s/ Haskell B, Pugh

/t/ HASKELL B. PUGH
1st Lt., QMC
Commanding

A TRUE COPY : √

Donald H. Fuge
CWO, USA

293.GRSC 4th Ind. MH:RGA:jpm
HQ GRAVES REGISTRATION SERVICE, 551 COMP SERV GROUP, EASTERN ZONE, APO 513,
U. S. ARMY. 1 October 1945

TO: Director General, U. S. Theater Graves Registration Service, Theater Service Forces, European Theater, (Rear) APO 887, U. S. Army.

Basic communication complied with.

For the Commanding Officer:

RICHARD G. ADAMS
Capt., QMC
Adm. Officer

Abschrift

Todesbescheinigung. Jahr 194...

1. Vor. und Familienname: Carl James Hooper
(bei Kinder unter 14 Jahren ist Stand der und Name der Eltern, bei unehelichen Name und Stand der Mutter anzugeben) Erkennungsnummer O 821496/T 43/44A

2.) Geschlecht: Mannlich

3.) Datum der Geburt: Jahr 1920, Monat Mai Tag 11

4.) Tag und Stunde des Todes: Monat Oktober, Tag 12 Stunde 10.45 U vorm.

5.) Beruf und Stellung im Beruf: 2 D Lt.

6.) Wohnung:
Strasse und Hausnummer: 366 Lincoln Avenue Sauguste Massachutts U S A

7.) Ort des Todes, wenn ausserhalb der Wohnung: Eppelborn

8.) Tag und Stunde der Leichenbesichtigung: 12. Oktober Tag, Stunde 16,0 U. vorm.

9.) Todesursache bezw. Totgeburt.
a) Grundleiden
b) Begleitkrankheiten
c) Folgekrankheit:
d) Welches der genannt. Leiden hat den Tod unmittelbar herbeigefuhrt: Vollige Zertrummerung des Gehirnschadels mit volliger Zertrimmerung des Gehirns.

Zusatz:
Name des behandelnden Arztes:
Welche Zeichen des Todes sind vorhanden: Leichenstarre

10.) Sind Anzeichen einer bosartigen epidemischen Krankheit vorhanden? und welche? nein

11.) Sind Anzeichen eines unnaturlichen Todes vorhanden? ja (Flugzeugabsturz)

12.) bei Kinder unter einem Jahr
a) Art Ernahrung? zu A) Muttermilch. Ammenmilch
b) ob in fremder Pflege: nein
c) wenn ja bei wem? zu c
d) sind Anzeichen einer schweren Vernachlassigung vorhanden? zu d) nein ~~ja~~

13.) Ist der die Verstorbene
a) von dem unterzeichneten Arzt behandelt worden? zu a) ja nein
b) oder im bekannt gewesen? zu b ja - nein

Wenden

14.)Ist Beschlaunigung der Beedigung erforderlich? ja
15.)wird Überfuhrungin die Leichenhalle beantragt? ja

Gegen Beerdigung auch vor 3.24 Stunden liegen ärztlicherseits keine Bedenken vor.
Nr.....des Sterberegisters.

Standesamt Eppelborn ,den 12.Oktober 1945
gez. Dr.Laumeier
Unterschrift des Arztes

Vordr. 193 b.Vorratig bei A.Sonnenburg Saarbrucken

Abschrift.

Meldung.

uber Abschuss bezw.Notlandung von feindlichen Flufzeugen

1.)Meldende Dienststelle: Polizeiverwaltung, Tag:12.Oktober 1944
2.) Absturz,bezw.Not landstelle: Ort: Eppelborn Kreis:Ottweiler
Tag und Uhrzeit: 10,45 12.10.1944

3.) Art des Flugzeuges: Nationalitat:unbekannt,
Typ: unbekannt,
Motorenzahl: 1 Nr.12577 Rack F T/244/0

4.) Verbleib der Besatzung:a) tot:Flugzeugfuhrer
b) Festgenommen:keine
c) nochfluchtige:keine

gez. Unterschrift
Ortl.Luftschuzleiter

Abschrift

Der Amtburgermeister
als Ortspolizeibehorde
Abt. I b

Eppelborn, den 13 Oktober 1945

An
das Wehrbezirkskommando
in St.Wendel

Unter Bezugnahme auf die heute vorm. gefuhrte Unterredung mit Uffz.Kallenborn ubersende ich die noch bei dem abgesturzten Feindflieger aufgefundene Brieftasche mit Inhalt.

Eine Todesbescheinigung von Dr.Laumeier fuge ich ebenfalls bei.

I.A.
gez.Schorr
I.Amtssekretar

Abschrift

Empfangsbescheinigung

1.) Silberring
2.) Karte auf Leinen
3.) Eiserne Portion
4.) Behalter mit Filmstreifen
5.) Paar Schuhe
6.) Eine Erkennungsmarke mit Kette

Eppelborn, den 12. Oktober 1944
gez. Unterschrift
Uffz.

K-50

Hamm Z-1-14

R/N 266

REPORT ABOUT DEATH AND BURIAL OF SOLDIERS.

NAME: Carl James Hooper

RANK: 2/Lt.

DAY OF BIRTH:

PLACE OF BIRTH:

DAY OF DEATH: 12 Oct 44 KIA

PLACE OF DEATH: Eppelborn

IDENTIFICATION TAG: 0-821496

NATIONALITY. US

PLACE OF FUNERAL. Eppelborn (Q-49)

DISTRICT: St. Wendel

CEMETERY: of community

BURIED (DATE): 13 Oct 44

EXCACT LOCATION OF GRAVE & NO small cemetery

ADDRESS OF RELATIVES. ./.

CAUSE OF DEATH: Crash of plane (Thunderbolt)

NATURE OF INJURY OR ILLNESS.

DATE: 5 Nov 44

Major
(Signature)

#23

Kdo.Fl.Ber. 12/VII (Neustadt)
(Dienststelle)

Wehrmachtteil: Luftwaffe

Nachweis über Sterbefall und Beisetzung eines Wehrmachtangehörigen

Familienname: H o o p e r

Vorname: Carl James

Dienstgrad: unbekannt

Truppenteil (letzte Einheit): verm. Amerikaner

Geburtstag: ./. Geburtsort: ./.

Todestag: 12.10.44 Todesort: Eppelborn

Erkennungsmarke: 0-821496

Nationalität (nur bei Verbünd. od. Feindl.): verm. Amerikaner

Todesursache: Verwundung — Krankheit — Unfall — Selbstmord — Urteilsvollstreckung*)
abgestürzt am 12.10.44 bei Eppelborn

Flugzeugmuster: Thunderbolt

Art der Verletzung oder Krankheit:

(Deutsche Bezeichnung)

Begräbnisort: Eppelborn

Kreis: St.Wendel Wehrkreis: XII

Friedhof: Gemeindefriedhof

Ehrenfeld oder ziviler Teil*) Beigesetzt am: 13.10.44

Genaue Grablage und Nr.: Kleiner Friedhof

Anschrift der Angehörigen: unbekannt

Die Verwundung usw. hat der Verstorbene sich zugezogen:

a) im Felde (Kriegsschaupl. od. bes. Geb.):

b) im Heimatgebiet (Wehrkreis):
durch Luftangriff: ja — nein*)

c) im Ausland (Staat):

den 5.November 1944

*) Nichtzutreffendes ist gestrichen.

Bestell-Nr. 770/Wkr.-Dr. XII Wiesbaden

Stellv. Gen. Kdo. XII. A. K.
- 3. NOV. 1944
Nr.
Anlagen 2x 1G/WVK

I.A.
(Unterschrift, Dienstgrad)
Major

Hawke Z-1-14

AMERICAN

REPORT OF DECEASED PERSON

Identified X Unidentified ____ Buried X Unburied ____ Report Number 324

Name Hooper, Carl James Rank ____ Org. ____ ASN 0-821496

Location of Body: Town Eppelborn Country Germany Coordinates Q 448902

Cemetery Eppelborn (Civilian) Disposition of Effects: ____

Plot ____ Row ____ Grave ____ Description on Marker: ____

By Whom Buried: GERMAN SOLDIERS (use remarks) Date OCT-44

Place of Death: EPPELBORN Date 12 Oct 44 Cause KIA

Reported by: GR Office, 110th Inf, APO 28 Date 23 May 45

Names and addresses of other persons familiar with the case: Burgomeister

Evacuated by: 3047 QM GRS Co (Unit) Date 13-6-45

Evacuated to: ____ Date 16-6-45

Means of Identification From Initial Report: Tags 1. (__) 2. (__) Paybook (__)

Officer's AGO Card (__) Clothing Marks (__) Letters (__) Certificate of Ident. (__)

Bracelet (__). OTHER Grave markings on Cross: Born 11 May 1920 Name, (Flyer) Died 12 Oct 44

ACTUAL MEANS OF IDENTIFICATION BY GR PERSONNEL	
1. If no contradictory evidence exists any one item below constitutes positive identification.	2. If no contradictory evidence exists two or more items below constitutes positive identification.
____ Identification tags worn around neck. (Check 1. (__) or 2. (__))	____ Identification tags carried elsewhere than around neck. (Check 1. (__) or 2. (__))
____ Official Identification Card No. ____	____ Motor vehicle operator's permit. (Govt. or civilian)
____ Pay Book or Pay Data Card.	____ Personal papers or letters.
____ Signed statement of Identity (attached herewith)	____ Engraved jewelry.
____ Emergency Medical Tag, signed by an Officer, indicating the names, etc, obtained from deceased before death.	____ Clothing markings particularly on leggins and belt.
	____ Miscellaneous CROSS ON GRAVE (Explain)

Incl 1

Names of other deceased in immediate vicinity: _____

Remarks: (Add additional sheets if necessary) Aviator. Contact burgermeister.

THIS SPACE FOR SKETCH MAP OF LOCATION OF UNIDENTIFIED BODY OR FOR LOCATION OF DIS-INTERMENT.

INSTRUCTIONS: Show reference points, directions and distances. For directions show compass azimuths, or clock dial (in minutes) indicating principal reference point as 12 O'clock.

REPORT COMPLETED BY:

Name Rank

DISTRIBUTION:
One (1) - Army QM.
One (1) - Corps QM.

2nd Lt Carl J. Hooper, 0-821 496
Plot Z, Row 1, Grave 14,
United States Military Cemetery
Hamm, Luxembourg

31 July 1947

Mrs. Velma E. Hooper
38 Morton Avenue
Saugus, Massachusetts

Dear Mrs. Hooper:

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,

Incls.

THOMAS B. LARKIN
Major General
The Quartermaster General

irr

25 September 1946

Mrs. Velma M. Hooper
38 Morton Avenue
Saugus, Massachusetts

Dear Mrs. Hooper:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Second Lieutenant Carl J. Hooper, A.S.N. 0 521 196.

293 DK

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Hamm, plot K, row 1, grave 14. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located two and one half miles east of the city of Luxembourg, and is under the constant care and supervision of United States military personnel.

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

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

36

Capt. Fogle
AFPPA-8/JMF/jpt/6
Rm 5 D 867 4/24/46

AFPPA-8

AAF PO1 (9798) Hooper, Carl J.
(J 2438) 0-821496
(J 2414)
(KF 3315)

Mrs. Velma E. Hooper
38 Norton Avenue
Saugus, Massachusetts

Dear Mrs. Hooper:

I am writing to you in reference to your son who gave his life in the service of his Country during the European conflict.

In an effort to furnish the next of kin with all available details concerning casualties among our personnel, the Army Air Forces recently completed the translation of several volumes of captured German records.

In regard to Second Lieutenant Carl J. Hooper, these records indicate that he was killed 19 October 1944, when the P-47 (Thunderbolt) he was flying received a direct flak hit and crashed near St. Wendel, located approximately twenty miles northeast of Saarbrucken, Germany. It is regretted that neither time nor place of burial is given.

The Quartermaster General in his capacity as Chief, American Graves Registration Service, is charged with the responsibility of notifying the legal next of kin concerning grave locations of members of the military forces who are killed or die outside the continental limits of the United States. If the report of your son's burial has not been confirmed and you have not been notified by the Quartermaster General, that official will furnish you definite information immediately upon receipt of the official report of interment from the Commanding General of the Theater concerned.

May the knowledge of your son's valuable contribution to our cause sustain you in your bereavement.

Very sincerely,

LEON W. JOHNSON
Brigadier General, USA
Chief, Personnel Services Division

file
5/1/46

CHECK LIST FOR DISINTERMENTS
(To accompany Report of Burial)

Only Part I should be completed, if identification tags are available.
Both Part I & Part II should be completely filled out if identification tags are not available.
If information is unavailable, so indicate.

PART I
(Positive Identification)

1. Hooper, Carl James — Unk — Unknown — USAAF
(Full name of deceased) (Rank) (ASN) (Organization)

2. State if identification tags were attached to remains, how many, and where attached None

3. Give exact location from which disinterred, furnishing coordinates and map series used Q 448-902. Eppelborn, Germany.

NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION IN WITH PERMANENT LANDMARKS. Not available

4. Full name of cemetery (if buried in an organized cemetery) Civilian cemetery at Eppelborn, Germany

5. Approximate or established date of death (state which & give basis for date selected) Approx. Oct 44. Statement of burgomeister at Eppelborn.

6. Approximate or established date of burial (give basis for date established) Approx. Oct 44. Same as above.

7. Manner in which grave was marked and all information contained on the marker Grave marker had name of deceased on it.

8. List personal effects found in possession of civilian or unauthorized military personnel, furnishing name and address of individuals concerned Personal effects turned over to German commander by German soldiers who buried the deceased.

9. Names and addresses of all persons questioned concerning death or burial and information each furnished (contact local Mayor, priest, cemetery caretaker, those responsible for burial and any other possessing important information) Burgomeister at Eppelborn, Germany.

PART II
(Doubtful or Undetermined Identification)

10. Fill in any information available regarding name, rank, ASN, or organization (Check cemetery records and office) None

11. 5'9" — 140 — brown — unk
(Est Height) (Est Weight) (Color of Hair) (Color of Eyes)

12. Give description of facial features and body characteristics if possible, including the presence of scars, moles, circumcision, tattoos, length of hair, presence of mustache or beard, etc. None

8 DEC 1945
FILE

13. Give as detailed description as possible of condition and amount of remains
Body very badly decomposed. Hands crushed, and legs broken.

14. Give probable cause of death, type & location of wounds (is there evidence that body was burned) Plane crash

15. Give minute description of all effects, clothing & shoes, including clothes markings & sizes, as well as shoe size. List each item of clothing, with a description of any unusual cuts, design markings, pockets, colors, patches, etc. Also list, with detailed descriptions, all effects without intrinsic value, such as gum, food, soap, papers, letters, tobacco, etc., giving brands when applicable:
Flying jacket and trousers. Both decomposed.

16. Give description of any vehicle found in the area that could be connected with the death of the deceased
Unknown
(Type) (WD Serial No.) (Organization) (Serial No. & Type of each Gun)

17. Give exact location of remains in vehicle before removal
Unknown

18. If buried in a coffin, give description and markings
Unknown

19. List names of all other deceased persons buried in the vicinity. Also give available information concerning the cause & place of death of each that may assist in identification of those remains
Robert D Young, 35716424.

20. Other pertinent information which would aid in establishing identity
None

(Individual in Charge of Disinterment) (Rank) (ASN) (Organization)

(Date)

293 GRSC 4th Ind. HH:RGA:jpn
HQ GRAVES REGISTRATION SERVICE, 551 COMP SERV GROUP, EASTERN ZONE, APO 513,
U. S. ARMY. 1 October 1945

TO: Director General, U. S. Theater Graves Registration Service, Theater Service Forces, European Theater, (Rear) APO 887, U. S. Army.

Basic communication complied with.

For the Commanding Officer:

RICHARD G. ADAMS
Capt., QMC
Adm. Officer

HEADQUARTERS
UNITED STATES FORCES
EUROPEAN THEATER
GRAVES REGISTRATION SERVICE COMMAND
APO 887

RJV/mjg

(S: 21 August 1945)
(Hamm, Z-1-14) 21 July 1945

SUBJECT: Clarification of Identification of Deceased Personnel.
HOOPER, Carl J., 2nd Lt., 0-821496.

TO : Graves Registration Officer, Oise Base Section,
APO 513, U. S. Army.

1. Report of Burial has been received in this headquarters for subject deceased officer, buried in Hamm U. S. Military Cemetery, Plot Z, Row 1, Grave 14, stating that remains were identified "by marker on grave at Eppelborn, Germany".

2. Request the burgomeister of Eppelborn, referred to in paragraph 5 of the Check List which accompanied the Report of Burial, or the authorities of the civilian cemetery at Eppelborn, be contacted in an effort to obtain the exact means by which identification was established at the time of the original burial.

3. Request this office be forwarded all information obtained.

For the Chief, Graves Registration Service Command:

Philip J. Wolf
PHILIP J. WOLF,
Captain, QMC,
Assistant.

293 QM (Gr Reg) 1st Ind. RTB:KJH:hps
Quartermaster, OIS, Com Z, APO 513, U. S. Army. 24 July 1945

TO: Commanding Officer, 62d QM Base Depot, APO 513, U. S. Army.
(Attention: Captain Webb).

Forwarded for compliance.

REC'D JUL 26 1945 HEADQUARTERS 62d QM Base Depot

OUTGOING 25 JUL 1945 30562

R. T. BENNISON
Colonel, QMC
Quartermaster

2nd Ind.

HEADQUARTERS, 62d QM BASE DEPOT, APO 513, U.S. ARMY, 27 July 1945.

TO: Commanding Officer, 610th QM Graves Reg. Co., APO 513, U.S. Army.

For compliance through this headquarters.

MAURICE MATISOFF
Colonel, QMC,
Commanding

HAMM, (Z-1-14) 3rd Ind. HBP/ccs
HQ, 610TH QM GRAVES REG. CO., APO 513, U. S. ARMY, 26 September 1945.

TO: Commanding Officer, 551st Composite Service Gp, APO 513, U. S. ARMY.

Submitted herewith four papers obtained from the secretary to the Burgermeister of St. Wendel, Germany, pertaining to identification of subject deceased.

HASKELL B. PUGH
1st Lt., QMC
Commanding

RECEIVED 29 SEP 1945 551 1010

Abschrift

Der Amtsbürgermeister
als Ortspolizeibehörde
Abt. I b

Eppelborn, den 13. Oktober 1945

An
das Wehrbezirkskommando
in St. Wendel

Unter Bezugnahme auf die heute vorm. geführte Unterredung mit Uffz. Kallenborn übersende ich die noch bei dem abgestürzten Feindflieger aufgefunde Brieftasche mit Inhalt.

Eine Todesbescheinigung von Dr. Laumeier füge ich ebenfalls bei.

I.A.
gez. Schorr
I.Amtssekretär

Abschrift

Meldung

über Abschuß bezw. Notlandung von feindlichen Flugzeugen

1.) Meldende Dienststelle: Polizeiverwaltung, Tag: 12.Oktober 1944

2.) Absturz, bezw. Notlandestelle: Ort: Eppelborn Kreis: Ottweiler
Tag und Uhrzeit: 1o,45 12.1o.1944

3.) Art des Flugzeuges: Nationalität: unbekannt,
Typ: unbekannt
Morotenzahl: 1 Nr. 12577 Rack F T/244/0

4.) Verbleib der Besatzung: a) tot: Flugzeugführer
b) Festgenommen: keine
c) nochflüchtige: keine

gez. Unterschrift
Örtl.Luftschutzleiter

Abschrift

Empfangsbescheinigung

1.) Silberring
2.) Karte auf Leinen
3.) Eiserne Portion
4.) Behälter mit Filmstreifen
5.) Paar Schuhe
6.) Eine Erkennungsmarke mit Kette.

Eppelborn, den 12. Oktober 1944
gez. Unterschrift
Uffz.

Abschrift

Todesbescheinigung

Jahr 194

1. Vor- und Familienname (bei Kindern unter 14 Jahren ist Stand und Name der Eltern, bei unehelichen Name und Stand der Mutter anzugeben)	Carl James Hooper Erkennungs-Nr. 0-821496/T 43 / 44 A
2. Geschlecht:	männlich – ~~weiblich~~
3. Datum der Geburt:	Jahr 1920, Monat Mai, Tag 11
4. Tag und Stunde des Todes: (vormittags, das ist nach Mitternacht bis Mittag; nachmittags, das ist nach Mittag bis Mitternacht)	Monat Oktober, Tag 12, Stunde 10,45 U. vorm. / U. nachm.
5. Beruf und Stellung im Beruf: (bei Ehefrauen: des Mannes, bei Kindern: des Vaters evtl. der Mutter)	2 D Lt.
6. Wohnung: Straße (bezw. Ortsbezeichnung) und Hausnummer	366 Lincoln Avenue Saugust Massachusetts USA Nr.
7. Ort des Todes, wenn außerhalb der Wohnung (evtl. Anstalt):	Eppelborn
8. Tag und Stunde der Leichenbesichtigung:	12. Oktober – Tag, Stunde 16,0 U. vorm. / U. nachm.
9. Todesursache bezw. Totgeburt: (in deutscher Bezeichnung ggf. unter Beifügung der wissenschaftlichen Benennung. – Bei Verunglückung oder anderer gewaltsamer Einwirkung deren Art und Ursache, sowie ob Berufs- oder Betriebsunfall)	a) Grundleiden: – b) Begleitkrankheiten: – c) Folgekrankheit: – d) Welches der genannten Leiden hat den Tod unmittelbar herbeigeführt? Völlige Zertrümmerung des Gehirnschädels mit völligen Zertrümmerung des Gehirns. Sofortiger Todeseintritt.
Zusatz: Vom nicht behandelnden Arzte festgestellte Todesursachen oder Angaben der Angehörigen oder der sonstigen Umgebung über die Todesursache, letzte Erkrankung, etwaige Wahrnehmungen dazu:	–
Name des behandelnden Arztes:	–
Welche Zeichen des Todes sind vorhanden?	Leichenstarre
10. Sind Anzeichen einer bösartigen epidemischen Krankheit vorhanden? und welche?	nein
11. Sind Anzeichen eines unnatürlichen Todes vorhanden? und welche?	ja (Flugzeugabsturz)
12. bei Kindern unter einem Jahr a) Art der Ernährung?	zu a) Muttermilch – Ammenmilch – Tiermilch (sonstige) –
b) ob in fremder Pflege:	zu b) Nein – Ja
c) wenn ja bei wem?	zu c)
d) sind Anzeichen einer schweren Vernachlässigung vorhanden?	zu d) Nein – ~~Ja~~
13. Ist der – die Verstorbene a) von dem unterzeichneten Arzte behandelt worden?	zu a) ~~Ja~~ – Nein
b) oder ihm bekannt gewesen?	zu b) ~~Ja~~ – Nein
c) ggf. von wem ermittelt?	zu c)
14. Ist Beschleunigung der Beerdigung erforderlich?	ja
15. Wird Überführung in die Leichenhalle beantragt?	ja

Gegen die Beerdigung – auch vor 3×24 Stunden – liegen ärztlicherseits keine Bedenken vor.

Nr. ~~des Sterberegisters.~~

Standesamt

Eppelborn, den 12. Oktober 1945

gez. Dr. Laumeier

(Unterschrift des Arztes)

Nr. 193 b. Borning bei F. Sonnenberg, Saarbrücken

Auszug

aus der Polizeiverordnung des Oberpräsidenten der Rheinprovinz vom 19. Juli 1909 betr. die Einführung der obligatorischen Leichenschau.

§ 1:

Es darf keine Leiche beigesetzt werden, bevor der Ortspolizeibehörde ein in Gemäßheit des § 2 dieser Verordnung ausgestellter Totenschein vorgelegt worden ist.

§ 2:

Der Totenschein ist durch einen approbierten Arzt oder durch einen gemäß § 5 dieser Verordnung zugelassenen Leichenbeschauer nach dem angefügten Muster auszustellen. Der Arzt oder Leichenbeschauer darf einen Totenschein nur erteilen, nachdem er die Leiche persönlich besichtigt hat.

Wenn ein Kind tot geboren oder in der Geburt verstorben ist, so muß die Anzeige spätestens am nächstfolgenden Wochentage geschehen pp.

Jeder Sterbefall ist spätestens am nächstfolgenden Wochentage dem Standesbeamten des Bezirks, in welchem der Tod erfolgt ist, anzuzeigen.

Anmerkung: Feiertage, die auf einen Wochentag fallen, gelten als Sonntag Die vorgeschriebenen Fristen müssen unter allen Umständen eingehalten werden. Die standesamtliche Anmeldung der Sterbefälle und Totgeburten kann auch ohne den ärztlichen Totenschein bewirkt werden. Der Totenschein muß alsdann innerhalb 48 Stunden nach dem Eintritt des Todes vorgelegt werden.

REBURIAL RESTRICTED

134

REPORT OF BURIAL

15 June 45

Date

Last Name	First	Initial	Rank	Serial No.
Hooper	Carl		2ND-LT	0-821496

Unit	Organization
USAAF	483 FTR, Sp. Sq

Place of Death	Date of Death	Cause of Death
Eppelborn, Germany	0950 15 June 45	Plane crash

Time and Date of Burial	Name of Cemetery	Name or Coordinates of Location
14	US Mil Cem Hamm, Lux.	VP 8713

Grave Number	Row Number	Type of Marker
		Cross

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

Embossed plate

If No Identification Tags How were remains identified?

By marker on grave at Eppelborn, Germany

What means of identification were buried with the body?

Embossed plate

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

Who is buried on:

	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Right:	Pieren	Unknown	S/Sgt	Unknown	13
Deceased's Left:	Knab	20275240	Unk	Unknown	15

Body brought in by Sgt Lisle, 3047th GRS Co

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

Emergency Addressee Unknown

Name

Address

Religion Unknown

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

None

REBURIAL

Previously buried in isolated grave

located at Eppelborn, Germ. 448-902

64

Signature of Officer or other person reporting burial

Verified by G.R.S. Officer

G. F. ZEHNER JR, 1st Lt, GR

3045th QM Gr Reg Co

FILE

DEC 17 1945

RESTRICTED

REPORT OF BURIAL
IF DECEASED UNIDENTIFIED

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

Height:
Weight:
Color of Eyes:
Color of Hair:
Race:

Laundry Marks:
Number of Rifle:
Wear Glasses?
Is Tooth Chart Attached?

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

Note below any identifying clues (body identification tags, photographs, letters, etc.) What means of identification Tags: Buried with body Yes ☐ No ☐ Attached to Marker Yes ☐ No ☐
probable organization of deceased, etc.:

Left Hand 2 1 Thumb

Right Hand 2 1 Thumb

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

Who is buried on:
Deceased's Right: Name: Iverson Serial No.: Unknown Rank: S/Sgt Organization: Unknown Grave No.: J3
Deceased's Left: Name: Kraab Serial No.: 20272240 Rank: Unk Organization: Unknown Grave No.: J5

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

Emergency Address: Unknown

Address:

Religion: Unknown

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

None

Signature of Officer or other person reporting:

Verified by: Name: Rank: U.S.

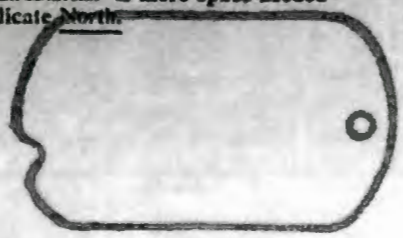
Characteristics:

Other Data:

TOOTH CHART

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

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



SENSITIVE SURFACE - HANDLE EDGES ONLY

WAR DEPARTMENT

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

REPORT OF DEATH

DATE 9 Aug 45 rc

FULL NAME	ARMY SERIAL NUMBER	GRADE
Hooper, Carl J.	0821496	2/Lt
HOME ADDRESS	**ARM OR SERVICE**	**DATE OF BIRTH**
Saugus, Mass.	Air Corps	11 May 20
PLACE OF DEATH	**CAUSE OF DEATH**	**DATE OF DEATH**
European Area	Killed in action	12 Oct 44
STATION OF DECEASED	**DATE OF ENTRY ON CURRENT ACTIVE SERVICE**	**LENGTH OF SERVICE FOR PAY PURPOSES** (YEARS / MONTHS / DAYS)
European Area	7 Jan 44	

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)

Mrs. Velma E. Hooper (mother) 38 Morton Ave. Saugus, Mass.

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)

Mrs. Velma E. Hooper (mother) same as above
Elizabeth E. Hooper (sister) same as above

INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
										X			

ADDITIONAL DATA AND/OR STATEMENT

[X] BATTLE [ ] NON-BATTLE

The individual named in this report of death is held by the War Dept to have been in a missing in action status from 12 Oct 44 until such absence was terminated on 6 Aug 45 when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

FILE
AUG 14 1945

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

BY ORDER OF THE SECRETARY OF WAR

J A Lash

ADJUTANT GENERAL

WD AGO FORM 52-1
1 FEBRUARY 1945

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

SENSITIVE SURFACE - HANDLE EDGES ONLY

288,617
3

WAR DEPARTMENT

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

REPORT OF DEATH

DATE 9 Aug 45 rc

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HOME ADDRESS	**ARM OR SERVICE**	**DATE OF BIRTH**
Saugus, Mass.	Air Corps	11 May 20

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
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YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
										X			

ADDITIONAL DATA AND/OR STATEMENT

[X] BATTLE [ ] NON-BATTLE

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288617

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

—BATTLE CASUALTY REPORT

NAME	SERIAL NUMBER	GRADE	ARM OR SERVICE	REPORTING THEATRE
HOOPER CARL J	O-821496	2 LT	AC	ETO

PLACE OF CASUALTY	DATE OF CASUALTY DAY	MONTH	YEAR	FLYING OR JUMPING STAT	TYPE OF CASUALTY	SHIPMENT NUMBER
GERMANY9	12	OCT	44	A	MIA	232

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 VELMA E HOOPER	MOTHER	6 NOV 44 bmi

NO. AND NAME OF STREET—CITY—STATE

38 MORTON AVENUE SAUGUS MASSACHUSETTS

REMARKS:

☐ CORRECTED COPY

ARMY EFFECTS BUREAU RECEIVED NOV 10

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 ___ REVIEWED BY ___

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

ACCT. AREA	CASUALTY STATUS	ORIGINAL CAS. DATE DAY	MO.	YR.	MESSAGE NO.	LATEST CAS. DATE DAY	MO.	YR.	REFERENCE AREA	CREW POS.	RESIDENCE STATE	COUNTY	COMP	RACE
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.

W.D., A.G.O. FORM NO. [illegible]
16 JUNE 1944

xxxxxxxxxxxxxxxx

288617

HCC/ELN/hls
1 November 1948

Mrs. Velma E. Hooper
38 Morton Avenue
Saugus, Massachusetts

Dear Mrs. Hooper:

This refers to previous correspondence of the Army Effects Bureau regarding the personal effects of your son, Second Lieutenant Carl J. Hooper.

A specific request was made of the Bureau to locate items of effects which were recovered by a German national, Mr. Ottmar Eichert of Saarbrucken, Germany.

A negative response has been received as a result of our inquiry directed to the European American Graves Registration Command. Personal effects of Lieutenant Hooper were not received by the U.S. military authorities overseas. The Administrator for Foreign Operations, American Red Cross, National Headquarters, Washington, D. C., was contacted by this Bureau; however, this too proved unsuccessful in locating the effects of your son.

Our U.S. forces did not enter Germany until the fall of 1944 and the American Red Cross Field Directors at that time were assigned to Army units. It is impossible to determine what American Red Cross Field Director would have been on duty in the vicinity of St. Wendel, Saar, Germany, in the summer of 1944.

It is doubtful that American Red Cross personnel handled the personal effects of your son. The Army had a very strict system of collecting articles of deceased servicemen and transmitting them directly to Quartermaster Effects Depots. It is my belief that the effects of your son were turned over by the German national to a medical unit who in turn should have sent the effects to a Quartermaster Effects Depot. Due to the inevitable confusion of combat operations, it was sometimes impossible for the Quartermaster Effects Depot personnel to safeguard the effects of our deceased for transmittal to the next of kin.

file
Deceased

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

In Reply Refer To: _____

Reference is made to our letter dated
reporting shipment of the personal property belonging to

If you have received this property, I will appreciate your acknowledging delivery in accordance with the above mentioned letter. Should that communication have been misplaced, you may acknowledge receipt by signing in the space provided below and returning one copy of this communication to the Army Effects Bureau.

In the event the property has not been received, please so advise, and tracer action will be instituted by this Bureau.

Although I prefer to have your acknowledgment, unless we hear from you within a month from this date, I shall assume that satisfactory delivery was made and that no further action on our part is necessary.

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

Yours very truly,

P. U. MAXBY
Lt. Col, QMC
Effects Quartermaster

1 Incl--Envelope

_____ (Signature) _____ (Date)

EFF QM Form
8 July 1946 109

288617

HCC/ELN/hls
1 November 1948

Mrs. Velma E. Hooper
38 Morton Avenue
Saugus, Massachusetts

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File Dead

Mrs. Velma E. Hooper
1 November 1948
288617

Due to the length of time which has elapsed since original recovery of the property by Mr. Eichert, it is impractical to direct further inquiry to our overseas installations for the location of these effects.

I fully realize your desire to receive the belongings of your son and regret that the best of our efforts have not been successful in locating them for you. Please accept my sincere sympathy in the loss you have sustained.

Sincerely yours,

H. O. CALDWELL
Effects Quartermaster

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

In Reply Refer To: _____

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reporting shipment of the personal property belonging to

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Yours very truly,

P. U. MAXBY
Lt. Col., QMC
Effects Quartermaster

1 Incl--Envelope

_____ (Signature) _____ (Date)

EFF QM Form
8 July 1946 109

Form MA-9115
(May 1946)

THE AMERICAN NATIONAL RED CROSS
OFFICE OF THE FIELD DIRECTOR
COMMAND AND GENERAL STAFF COLLEGE
AND
FORT LEAVENWORTH, KANSAS

October 25, 1948

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

REFER: 288617

HOOPER, Carl J.
2nd Lt. - O-821496
Air Corps - Deceased

Ottmar Eichert
German National

Dear Mr. Caldwell:

In accordance with your request of 19 August, 1948, we have secured a report concerning the disposition of personal effects of the above named deceased officer, from our Headquarters, European Theatre, we are attaching a copy of this report.

We believe the attached, to be self-explanaotry, and that there is no further information available. However, if further information is desired, please do not hesitate to call upon us.

Very truly yours,

W. Mason Bridges

W. MASON BRIDGES
FIELD DIRECTOR

Attach. 2

MAS:

"COPY"

THE AMERICAN NATIONAL RED CROSS
Midwestern Area St. Louis

TO: Mr. W. Mason Bridges DATE: October 20, 1948

FROM: Mr. O'Conner SUBJECT: HOOPER, Carl J., 2nd Lt.
0-821496
Air Force

Ottmar Eichert
German National

FORT LEAVENWORTH, KANSAS

Attached is a copy of a letter from Mr. John W. Gordon, Director, Military Welfare Service and Services in Military Hospital, European Theatre, regarding the effects of the above-named officer, about whom you wrote this office on August 20, 1948.

You will note in the last paragraph of Mr. Gordon's letter that he offers his assistance if further information is needed. We shall be glad to hear from you again on this subject if we can assist in any way.

Attach.

/s/ K. M. O'Conner
K. M. O'CONNER
ASSISTANT DIRECTOR
MILITARY WELFARE SERVICE

GENERAL HEADQUARTERS, APO 171, C/O POSTMASTER,
NEW YORK, NEW YORK

28 September 1948

EC No. 432

Mr. Frank T. Cleverley
Administrator for Foreign Operations
American Red Cross
National Headquarters
Washington 13, D.C.

RE: HOOPER, Carl J., 2nd Lt.
0-821496
Air Force

Ottmar Eichert
German National

Attention: Mr. Raymond J. Boland

Dear Mr. Cleverley:

Your correspondence TFE-253 concerning personal effects of the above-named deceased officer has been received.

As you know, our forces did not enter Germany until the fall of 1944, and our field directors at that time were assigned to Army units. It is, therefore, impossible for us to determine what field director would have been on duty in the vicinity of St. Wendel, Saar Germany, unless through military history, we trace the route followed by various infantry divisions. We can definitely, however, say, that American Red Cross Personnel never officially handled such matters. The Army had a very strict system of collecting articles of deceased servicemen and transmitting them directly to Quartermaster Effects Depots.

Our experience has been that most European people associate the American Red Cross with medical units in the Army. This error h s been called to our attention many times and probably results from the fact that the Red Cross societies in this theater are much more closely associated with the work of doctors and nurses than our organization. We believe, therefore, that it is reasonable to assume that the German national referred to in this letter has made this mistake, and that the effects of this officer were turned over by him to medical unit who in turn should have sent it to a Quartermaster Effects Depot.

We believe there is no further help we can give you in this case. However, if further information is needed, please do not hesitate to call on us.

Very truly yours,

HOWARD L. BENTON
DIRECTOR OF OPERATIONS

BY _____
John W. Gordon
Director, Military Welfare Service
and Services in Military Hospitals

CERTIFIED TRUE COPY

Form MA-9412
(May 1946)

THE AMERICAN NATIONAL RED CROSS
OFFICE OF THE FIELD DIRECTOR
COMMAND AND GENERAL STAFF COLLEGE
AND
FORT LEAVENWORTH, KANSAS

October 16, 1948

H. O. Caldwell
Effects Quartermaster
Kansas City Quartermaster Depot
601 Hardesty Avenue
Kansas City 1, Missouri

REFER: 288617
HOOPER, Carl J.
2nd Lt - 0-821496
Air Corps - Deceased

Dear Mr. Caldwell:

This is to advise that your inquiry of 19 August, 1948, regarding effects of the above named deceased officer, has been referred to our Area Office Headquarters, who in turn have advised that it was forwarded to our European Headquarters.

Under date of 4 October, 1948, we were again advised by our Area Office, that they were still awaiting a reply from the European Headquarters.

As soon as this reply has been received, we will forward it immediately to your office.

Please be assured of our continued cooperation and service.

Very truly yours,
W. Mason Bridges
W. MASON BRIDGES
FIELD DIRECTOR

MAS:

xxxxxxxxxxxxxxx

HOC/ELW/ms

288617

15 October 1948

Mr. W. Mason Bridges
Field Director
American Red Cross
Fort Leavenworth, Kansas

Dear Mr. Bridges:

This refers to previous correspondence of the Army Effects Bureau regarding the case of Second Lieutenant Carl J. Hooper, O-821496, Air Corps, deceased 12 October 1944 in the European Area. Items of personal effects for the deceased officer were recovered by a German National, Ottmar Eichert, of Saarbrucken, Germany.

A negative response has been received as result of our inquiry directed to the European American Graves Registration Command. Personal effects for Lieutenant Hooper were not received by U. S. military authority. Mr. Ottmar Eichert was not contacted by the American Graves Registration Command.

A final report to the mother of Lieutenant Hooper is pending response to our letter directed to you on 19 August 1948. Information as to the investigation made by your office will be appreciated.

Yours very truly,

M. O. CALDWELL
Effects Quartermaster

file

S-19 Oct 48
HCC/ELW/ew
19 August 1948

QMDKG 288617

Mr. W. Mason Bridges
Field Director
American Red Cross
Fort Leavenworth, Kansas

Dear Mr. Bridges:

The Army Effects Bureau has been requested to investigate the disposal of personal effects recovered by a German soldier, Ottmar Eichert. The items of effects recovered by the German National were identified as the property of 2nd Lt. Carl J. Hooper, O-821496,A.C., deceased 12 October 1944, European Area.

Through extensive correspondence of The Adjutant General's office, Military Division, Boston, Massachusetts, the following circumstances of this case are available:

(a) The German soldier, Ottmar Eichert, was assigned as clerk of an Air Service post in St. Wendel, Saar, Germany in the summer of 1944. At that time he was given instructions to assist in the burial of one Lt. Hooper in the military cemetery at Saarbruken, Germany

(b) The items of personal effects recovered consisted of:
1 finger ring "American Air Force"
1 identification marker with chain
1 birth certificate with inscription "Clerk of Town"
1 leather brief case stamped "American Air Force"
1 membership card in the "American Red Cross"
1 pilot's voucher
1 little picture (photo) of 2nd Lt. Hooper in which he is standing with helmet and parachute
1 photo of military parade at West Point
2 bundles of bank notes in French currency (new shining invasion gold)
"I declare herewith on oath that the foregoing statements are true." - statement by Ottmar Eichert.

(c) Ottmar Eichert states "I delivered the personal effects to the Commander at Saarbruken and have received a receipt from him. I have handed over to my superior officer the receipt itself for the discharge of this

file

SAVE

ARMY SERVICE FORCES

QMDKG 288617 (cont'd) KANSAS CITY QUARTERMASTER DEPOT HOO/ELW/ow

601 HARDESTY AVENUE
KANSAS CITY 1, MISSOURI

IN REPLY REFER TO

commission for safekeeping."*****"As I brought the personal belongings of 2nd Lt. Hooper along the dangerous road to Saarbruken, I would get in a satisfactiton to receive news from the Hooper family that they would claim the property of their fallen son from the Red Cross. I will be sincerely happy if the things arrive there."

A thorough search of the records of the Army Effects Bureau fails to reveal the receipt of the items recovered by Mr. Eichert; consequently, is is assumed that the effects were not properly handled at the overseas military post. In the statement of Mr. Eichert, it is not definitely clear that the effects of Lieutenant Hooper were ever turned over to the Red Cross in Germany. However, on the possiblity that the effects may have been handled by Red Cross authorities in Germany, it will be appreciated if your agency will investigate this matter. Any names and addresses of the Red Cross representatiges who were assigned duty in the vicinity of St. Wendul, Saar, Germany in the summer of 1944 will be most helpful. The Bureau has this date directed similiar inquiry to The Commanding General, American Graves Registration Command, European Theatre for further assistance in obtaining additional data from Mr. Eichert.

Your cooperation in obtaining additional information in this case will be greatly appreciated.

Yours very truly,

H. O. CALDWELL
Effects Quartermaster

file
ellw

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

S-19 Oct 48
HOC/ELW/ew
19 August 1948

IN REPLY REFER TO QMDKG 288617

SUBJECT: Disposal of Personal Effects

TO: Commanding General
American Graves Registration Command
St. Germain Depot
APO 58, c/o Postmaster
New York, New York

1. Attention is invited to inclosed correspondence file regarding recovery of the personal effects of 2nd Lt. Carl J. Hooper, O-821498, AC, kia 12 October 1944, European Area. The Army Effects Bureau has no record of receipt of the items of personal effects recovered by the German soldier, Ottmar Eichert, who was assigned as Clerk of the Air-Service Post in St. Wendel, Saar, Germany.

2. It is requested that information be furnished as to whether or not effects of Lt. Carl J. Hooper have been processed by your Headquarters. In the event, the effects have not been received at your installation, it is further requested that this correspondence be indorsed through appropriate military channels for information regarding the handling and disposal of the effects in this case.

FOR THE COMMANDING OFFICER:

1 Incl
cy corres file

H. O. CALDWELL
Effects Quartermaster

1503

Orig 8 - DGM

(Basic Ltr, Army Service Forces, Kansas City QM Dp. Army Effects Bureau, 601 Hardesty Avenue, Kansas City 1, Missouri, dtd 19 Aug 48, subj: QMDKG 288617 - Disposal of Personal Effects)

QMDKG 288617 1st Ind

Personal Effects Branch, AGRC-EA, St-Germain Dp. APO 58, US Army, 10 Sep 48

TO: Commanding General, Headquarters, American Graves Registration Command, APO 58, US Army
ATTENTION: Chief of Registration Division

1. Attention is invited to basic communication.

2. This office has no record of 2nd Lt. Carl J. Hooper, 0-821496, AC, and it is requested that investigation be made by your Headquarters, to locate or ascertain disposition made of the personal effects pertaining to the above named deceased.

Paul V. Kellogg
PAUL V. KELLOGG
Colonel QMC
Commanding

1 Incl
n/c

Tel: Paris, MIC 3875, Ext 35 and 9

Basic ltr, Kansas City QM Depot, QMDKG 288617, Subject: Disposal of Personal Effects, dated 19 August 1948

RRE 332.3 (Hooper, Carl J. - O 821 496) 2d Ind

Hq, American Graves Registration Command, European Area, APO 58, U S Army, 5 October 1948

TO: Commanding Officer, Kansas City Quartermaster Depot, Army Effects Bureau, 601 Hardesty Avenue, Kansas City 1, Missouri

1. Reference is made to preceding correspondence.

2. Copies of the attached correspondence are included in the records for subject deceased, 2/Lt Carl J. HOOPER, O 821 496, on file this headquarters, however, personal effects for deceased were never received at this headquarters, and no information is available as to disposition of these effects.

FOR THE COMMANDING GENERAL:

George L. Freeman

GEORGE L. FREEMAN
1st Lt, QMC
Actg Asst Adj Gen

1 Incl n/c
Ltr, dtd 2 Aug 48
w/4 incls

HO - A.G.R.C.T

OUT

OCT 5-

SAVE

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

IN REPLY REFER TO QMDKG 288617

HOC/RLM/ow
19 August 1948

Mrs. Velma E. Hooper
38 Morten Avenue
Saugus, Massachusetts

Dear Mrs. Hooper:

This refers to recent inquiry on your behalf from the Adjutant General's office, Military Division, Boston, Massachusetts, regarding the personal effects of your son, Lieutenant Carl J. Hooper. I note your desire to recover the personal effects which were originally in the possession of the Germain soldier, Ottmar Eichert.

I have thoroughly reviewed the case of Lieutenant Hooper and regret to report that there is no information here regarding disposal made of the items of effects recovered by the German national. There is a possibility that the effects of your son were turned over to the overseas American Red Cross authorities for shipment direct to the next of kin. If the effects were turned in to the American Military authorities, they normally would have been processed for shipment here and ultimate return to you.

As it is our desire to be of all possible assistance in clarifying this matter for you, I have this date requested that investigations be made by the local Red Cross Headquarters and the overseas American Graves Registration Command. In view of the lapse of time since original recovery of the effects in 1944, it is doubtful whether the effects will be located at this time.

I realize your desire to receive the personal effects of your son and upon receipt of additional information in this case, I will notify you promptly.

Yours very truly,

H. O. CALDWELL
Effects Quartermaster

July 29, 1945

William Harrison Jr,
Dear Sir:-

I was so glad to receive the enclosed letter from your office, and the wonderful letter from Ottmar Eichert. My daughter and I are positive these things are my sons. We have never recieved anything personal of his, and my heart has been breaking. Do you think there is a possibility of our getting them, and do you take care of that? We are very anxious to write to the young man and will only

wait until we hear from
you. Thanking you very much
and waiting to know what to
do next I remain

Sincerely yours
Velma E. Hooper.

COPY

2 August, 1948

Mrs. Velma E. Hooper,
38 Morton Avenue,
Saugus, Massachusetts.

Dear Mrs. Hooper:

In reply to your letter 23 July, we inclose copy of letter from this office to Commanding Officer, Army Effects Bureau, Kansas City, Missouri, where all unidentified personal effects of army personnel are now assembled and where every effort is made to complete identification so that they may be delivered to the individual concerned or to next-of-kin.

In this case, of course, it is not definitely clear that the effects of Lieutenant Hooper were ever turned over to the Red Cross in Germany. If they were it would seem that, inasmuch as they contained several items of positive identification, they would have been cleared through the Red Cross and/or Army Effects Bureau. However, there is always the possibility that these, or other personal effects of your son, might be in the Army Effects Bureau still unidentified and we can assure you that that office will cooperate with you fully in the matter.

It will be perfectly in order for you to acknowledge receipt of the letter from from Mr. Ottmar Eichert forwarded to you from this office.

WILLIAM H. HARRISON, JR.,
Maj.Gen.,A.G.D.,Mass.N.G.
The Adjutant General

1 incl

COPY COPY COPY

THE COMMONWEALTH OF MASSACHUSETTS
MILITARY DIVISION

THE ADJUTANT GENERAL'S OFFICE

23 July 1948

Mrs. Velma E. Hooper
38 Morton Avenue
Saugus, Massachusetts

Dear Mrs. Hooper:

The inclosed letter from Ottmar Eichert, Scheidt 6, Saarbrucken, Kaiserstrasse 26, Germany, with translation attached, is self-explanatory.

Although this correspondence does not positively identify 2d Lt. Hooper, records of this office show that your son, 2d Lt. Carl J. Hooper, had been killed in action in the European Theatre of Operations, and it is therefore forwarded to you for such disposition as you desire.

If you feel the correspondence has no relation to you, it will be appreciated if you will return it to this office in order that we may endeavor to locate the proper recipient.

Sincerely yours,

WILLIAM H. HARRISON, JR.
Maj.Gen.,A.G.D.,Mass.N.G.
The Adjutant General

2 incls.

COPY COPY COPY

THE COMMONWEALTH OF MASSACHUSETTS

Office of the Secretary

Boston 33

July 16, 1948

Major General William H. Harrison, Jr.,
The Adjutant General,
259 State House,
Boston, Massachusetts.

Dear Sir:

Enclosed is a letter from Ottmar Eichert, which we believe comes under your jurisdiction.

Very truly yours,

/s/ Frederick W. Cook
FREDERICK W. COOK
Secretary of the Commonwealth

COPY COPY COPY

(TRANSLATION FROM GERMAN)

Ottmar Eichert
Scheidt 6 Saarbrucken
Kaiserstrass 26

Scheidt, Feb. 2, 1948

Government of the State of Massachusetts
Boston (Mass.), U. S. A.

Subject: 2nd Lt. Hooper, Soldier of the American Air Force, fallen with honors as a flyer at St. Wendel in Saar in the summer of 1944, born in the State of Massachusetts.

The addresses of the relatives of the above named fallen American flyer I do not know. Therefore I turn to you, Sir, in the hope that you may help me as you have at hand the register of the casualties of Massachusetts. I will be very grateful to you for this service. For it is important to me to clear up something which lies very near to my heart. With the desire to clear up this thing I would also like to bring to you my thanks in words as I, myself, while in the American prison had good treatment and also at the conclusion of the war was discharged and sent home.

And now for the case. In the summer of 1944 I belonged as a soldier and clerk to an air service post in St. Wendel in Saar. One day I received orders from my superior officer to bring the remaining effects of a fallen American flyer, 2nd Lt. Hooper, to the Military Commander at Saarbruken. As my superior officer has no knowledge of the English language and I have a little he ordered me to read the personal things and send them to you. That I have done. Consequently I have delivered the personal effects to the Commander at Saarbruken and have received a receipt from him. I have handed over to my superior officer the receipt itself for the discharge of this commission for safekeeping.

The personal effects are for most part as follows:

1 finger ring with seal "American Air Force"
1 identification marker with chain
1 leather brief case stamped "American Air Force"
1 birth certificate with inscription "Clerk of Town"
(I do not know the place of birth but so far as I know Lt. Hooper was born in the State of Massachusetts)
1 membership card in the "American Red Cross"
1 pilot's voucher

COPY COPY COPY

1 little picture (photo) of 2nd Lt. Hooper in which he is standing in his machine with helmet and parachute
1 photo of military parade at West Point
2 bundles of bank notes in French currency (new shining invasion gold)

I declare herewith on oath that the foregoing statements are true.

As I brought the personal belongings of 2nd Lt. Hooper along the dangerous road to Saarbruken, I would get in a satisfaction to receive news from the Hooper family that they would claim the property of their fallen son from the Red Cross. I will be sincerely happy if the things arrive there.

As to you, Sir, I would be very grateful if you can possibly do this and direct this letter to the right address.

I greet you.

Respectfully,

/s/ Ottmar Eichert.

288617

HTB:TS:cm
September 19, 1945

Mrs. Velma E. Hooper
38 Morton Avenue
Saugus, Massachusetts

Dear Mrs. Hooper:

The Army Effects Bureau has received from overseas some personal effects of your son, Second Lieutenant Carl J. Hooper.

These effects are being forwarded to you in one footlocker.

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

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

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

Yours very truly,

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

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO: Mrs. Velma E. Hooper
38 Morton Avenue
Saugus, Massachusetts

Effects of:
Name 2/Lt. Carl J. Hooper
ASN 0821496
Case No. 288517 D
Wt.

DATE 19 September 1945
RTB:TStcm

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.

REMARKS:

Franked _____
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____
No. of packages 1

SEP 22 1945

Shipping Clerk

Eff. QM Form 14 (26 Dec 44)

288,617½

H-1496E. 073010 H-1496E

LAUNDRY INVENTORY
ARMY EFFECTS BUREAU

	DRY CLEANING	Do not use			LAUNDRY	Do not use	
1	TROUSERS, WOOL	24			SHIRTS, WOOL		
	COAT, SERVICE, WOOL				TROUSERS, COTTON		
	OVERCOAT, LONG				TIE, COTTON		
	OVERCOAT, SHORT, WOOL				UNDERSHIRTS, COTTON		
	CAP, GARRISON				SHIRTS, DRESS, COTTON		
	CAP, SERVICE				DRAWERS, COTTON		
	TIES, WOOL			1	SWEATSHIRTS, COTTON ~~OR WOOL~~	12-1	
	GLOVES, LEATHER OR WOOL				DRAWERS, WOOL		
	SCARFS, SILK, RAYON, OR WOOL				SOCKS, COTTON, PR.		
	SWEATERS				SOCKS, WOOL, PR.		
	TRUNKS, SWIM				PAJAMA TOPS		
	LEGGINGS				PAJAMA BOTTOMS		
	BATHROBES				FATIGUES, 1 PC., COTTON		
	BED ROLL				FATIGUES, TOPS, COTTON		
	COMFORTER				FATIGUES, TROUSERS, COTTON		
					FATIGUES, CAP		
					BELT, COTTON		
					TOWEL, HAND		
					TOWEL, BATH		
					CLOTH, WASH		
					GLOVES, COTTON		
					JACKET, FIELD		
					SUPPORTERS, ATHLETIC		
				1	HANDKERCHIEFS	02-1	
					SCARFS, COTTON		
					CASE, PILLOW		
					TRUNKS, GYM		
					SHEETS, COTTON		
	LAUNDRY RETURNED TO F.L. 9 Sept. 45 BRS				BAGS, BARRACKS		
		24				14	

TALLY NO.	ORIG. NO. OF PKGS.	EXAMINING DATE	BOX NO.	SHEET ___ OF ___ SHEETS
9859	1	31 Aug. 46		

NAME: Cpl. J. Hooper.

A. S. N.: 0-821496

ORGANIZATION: 509 Fta. Sqd. 405th Fta. Grp.

RANK: 2nd Lt.

CASE NO.:

WAREHOUSE SPACE: 9-1393

EXAMINED BY: Trentwine & Hall

SUPERVISOR'S OK: MC

LAUNDRY REMOVED FROM FOOTLOCKER: X

LISTED BY: Dawson

PACKAGE DESCRIPTION: 1

WEIGHT: 57

CHECKED BY: Bradley

CHECKED AND PACKED BY: [illegible]

SHIPPED

DATE: SEP 22 1945

BY WHOM: [illegible]

9-8-45

RM

EFF. ON FORM 101 (15 JUNE 45) 20M LADUE, N. C. 7-8-46

1496

NAME HOOPER, CARL T. L. 1496

BAY	PALLET	BOX	TALLY
38	37		9859

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
F.L.		

Ref. QM Form 48

EFFECTS INVENTORY
ARMY EFFECTS BUREAU

ATTACHMENTS	
X	INBOUND INVENTORY
	G. R. OR SUB GR LABEL
	WILL OR POWER OF ATTY.
X	TALLY IN FORM 43

STATUS	
DECEASED	
MISSING	X
P. O. W.	
ABANDONED	
UNKNOWN	

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

CONTAINERS ADDRESSED TO

Rec'd 9/15/45 [illegible]

None.

INFORMATION

Mother:
Mrs. Velma E. Hooper,
38 Morton Ave.,
Saugus, Mass.

NAME AND STATUS VARIATIONS

#13 Carl J. Hooper.
Effect: Carl J. Hooper,

CROSS REFERENCE

	CHECK	REC'D BY	NUMBER		BUREAU CHECK
	MONEY ORDER				TRANSMIT ORIGINAL
	BOND		SYMBOL		ORIG. REG. MAIL
	TRAV. CHECK				TO G. A. O.
	FOREIGN CURRENCY		AMOUNT		MUTILATED
	U. S. CURRENCY				TO ISSUING AGENCY

DATE

BANK OR PLACE OF ISSUE

PAYEE

REMITTER OR DRAWER

TALLY NO.	ORIG. NO. OF PKGS.	EXAMINING DATE	BOX NO.	SHEET 1 OF 1 SHEETS
9859	1	21 Aug. 46		

NAME: Carl J. Hooper.
A. S. N.: 0-821496
ORGANIZATION: 509 Ftr. Sqd. 8th Ftr. Grp.
RANK: 2nd Lt.
CASE NO.:
WAREHOUSE SPACE:
EXAMINED BY: Trentwin & Hall
PACKED BY:
DIARY REMOVED
PHOTO FILM REMOVED
MOTION PICTURE FILM REMOVED

PACKAGE DESCRIPTION	WEIGHT		SHIPPED DATE	BY WHOM
#1 footlocker		INSPECTED BY: C	SEP 22 1946	EK
		STORED BY:		

EFF. GR FORM 11 (15 JUNE 45) 100M LA RUE, S. C. 7-9-45

ADDITIONAL REMARKS

REMOVALS (other than G. I.)	DAMAGES (List type of damage-extent)
	1 pr Pink Trousers Motheaten

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

RESTRICTED

509th Fighter Squadron (SE)

[redacted]
Date

SUBJECT: Inventory of Personal Effects of:

[redacted]
(Last Name) (First Name) (MI) (Rank) (ASN)

TO : Effects Quartermaster, Communication Zone, APO [redacted]
US Army

The above named individual of [redacted], [redacted] (Organization) was reported [redacted] (Status-Killed, MIA, Hospitalized, etc.) about 12 October 1944 (Date)

Designated Beneficiary if information readily accessible [redacted]

[redacted]

INVENTORY OF EFFECTS

CLASS I

7 Insignia, AG
6 Insignia, Grade
2 Pilot's Wings
1 Ribbon (Air Medal) w/Oak Leaf Cluster
~~1 Set Identification Tags~~ SHR
1 Religious Book
1 Folder w/photos and papers
2 Insignia US
1 Insignia, Cap
1 Breast Badge w/bar
1 Testament
1 Pilot's Log Book
1 Leather Toilet Case

CLASS II

1 Foot Locker
9 Trousers, Wool
5 Shirts, Cotton
1 Blouse, Wool
1 Cap, Service
2 Undershirts, Wool
1 Scarf
8 Undershirts, Cotton
1 Towel, Face
6 Ties.
2 Trousers, Khaki
2 Shirts, Wool
1 Coat, Short, Wool
3 Caps, Garrison
2 Drawers, Wool
1 Gym Suit (Complete)
2 Handkerchiefs
8 Drawers, Cotton
5 Pr Socks

RESTRICTED

RESTRICTED

INVENTORY OF EFFECTS CONT'D

Money in the amount of None has been turned into

(Name of finance office, and symbol number) Form WDFD 38 enclos

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

I certify that the above items constitute all of the effects, secured by me, of the above named individual and that they were forwarded to the Effects Depot by

Truck on 9 Nov 1944.
(Rail, Truck, etc.)

Name William T. [redacted]

Rank & ASN Captain, AC, 0562303

Organization [redacted]

Any additional pertinent inform

RESTRICTED

JMM:TSim

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

Case No. 28617

Date 19 September 1945

SUBJECT: Report of transaction in disposing of the effects of

Carl J. Hooper, 0521496 late a
(Name of deceased) (Army Serial Number)

Second Lieutenant, Air Corps who died
(Grade) (Organization, Army or Service)

on the 12 day of October, 19 44, 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 15 September 1945, pursuant to Special Orders 228, Headquarters KCQM Depot, dated 25 September 1943, the application or affidavit of Mrs. Velma E. Hooper 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. Velma E. Hooper
(Name of person found entitled)

38 Norton Avenue, Sangus, State of
(Number, Street or Avenue) (City, Town or Village)

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

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

(Signature of Summary Court Officer)

JOHN M. MURPHY, Colonel, QMC
(Name, Rank, Organization)
SUMMARY COURT MARTIAL

Eff. QM Form 75