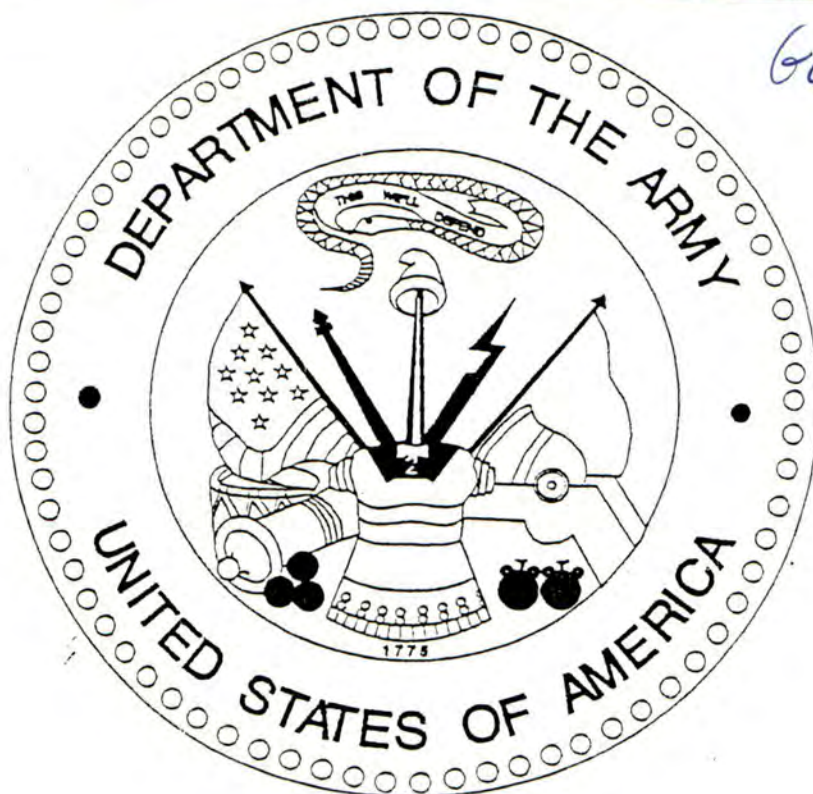




INDIVIDUAL DECEASED PERSONNEL FILE

USMC Neuville en Condroz
 Plot: A Row: 39 Col: 52
 Date of Burial: 19 Apr 50
 Verified by GRS Officer
 M.R. Swart, Capt QMC

DISINTERMENT DIRECTIVE

SECTION A NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER 3574 17372		DATE 15 10 48	
NAME GOEKE SYLVESTER B		SERIAL NUMBER 0-559702	GRADE 1 LT	ARM 1	RACE 1
CEMETERY ST AVOLD FRANCE		PLOT TTT	ROW 11	GRAVE 131	RELIGION 2
		DISPOSITION OF REMAINS 1202		CODE DIST. CT	

SECTION B — CONSIGNEE AND NEXT OF KIN	
NAME AND ADDRESS OF CONSIGNEE NEUVILLE-EN-CONDROZ, BELGIUM	NAME AND ADDRESS OF NEXT OF KIN MR. BEN J. GOEKE (FATHER) 1120 WASHINGTON AVENUE GREENVILLE, OHIO

SECTION C — DISINTERMENT AND IDENTIFICATION				
NAME	SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISTINTERRED
IDENTIFICATION TAG ON ☐ REMAINS ☐ MARKER		ORGANIZATION USAAF	RELIGION	IDENTIFICATION VERIFIED BY

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT	
NATURE OF BURIAL	CONDITION OF REMAINS
OTHER MEANS OF IDENTIFICATION	

SEE ATTACHED SHEET

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)

REMAINS PREPARED AND PLACED IN CASKET

DATE	BY	EMBALMER (Signature)
CASKET SEALED BY		
CASKET BOXED AND MARKED		SHIPPING ADDRESS VERIFIED BY
DATE	BY	

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

REMARKS AND SPECIAL INSTRUCTIONS

SIGNATURE OF AGRS INSPECTOR

PREV. UNK X-1741

M. I. verified by OCM Cable WCL 23603. (Hq. AGRC).

1

DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER 3574 00000		DATE 15 01 48 DAY MONTH YEAR		
NAME UNKNOWNX-001741				SERIAL NUMBER	RANK	ARM Q	DATE OF DEATH DAY MONTH YEAR	
CEMETERY ST AVOLD - METZ						0	DISPOSITION OF REMAINS 3503 80 CODE DIST. PT	
PLOT TTT	ROW 11	GRAVE 131	COUNTRY FRANCE			CAUSE OF DEATH 6		

SECTION B — CONSIGNEE AND NEXT OF KIN	
NAME AND ADDRESS OF CONSIGNEE ST. AVOLD, FRANCE (BY ADMINISTRATIVE ORDER)	NAME AND ADDRESS OF NEXT OF KIN

SECTION C — DISINTERMENT AND IDENTIFICATION				
NAME UNKNOWNX-001741	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED 15 July 48
IDENTIFICATION TAG ON ☐ REMAINS ☒ MARKER GRS		ORGANIZATION UNKNOWN	RELIGION	IDENTIFICATION VERIFIED BY Richard F Peterson NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT	
NATURE OF BURIAL Uniform	CONDITION OF REMAINS
OTHER MEANS OF IDENTIFICATION	
MINOR DISCREPANCIES 1	
REMAINS PREPARED AND PLACED IN CASKET	
DATE 27 July 48	BY Richard F Peterson, Embalmer
CASKET SEALED BY Richard F Peterson	EMBALMER (Signature) Richard F Peterson
CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
DATE 27 July 48	BY Richard F Peterson

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

[Signature]
SIGNATURE OF GRS INSPECTOR

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

20 June 1950

1st Lt Sylvester B. Goeke, ASN 0/669 702
Plot A, Row 39, Grave 52
Headstone: Cross
Neuville-en-Condroz, Belgium
United States Military Cemetery

Mr. Ben J. Goeke
1120 Washington Avenue
Greenville, Ohio

Dear Mr. Goeke:

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

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

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

Sincerely yours,

H. FELDMAN
Major General, USA
The Quartermaster General



OSMC DEPT OF ARMY WASH DC

UNCLASSIFIED

CG ACRC PARIS FRANCE

PRIORITY

100L 2 3 603

NRFC 6847

FR LIGNY CLAIR NRFC 6847

DISINTERMENT DIRECTIVE 3574 17843 FOR SGT RUSSELL SIG LA 30TH
36237962 SHOULD REFLECT NOK AS EDWARD LA 30TH RPT L. 3745 E
DISINTERMENT DIRECTIVE 3574 17572 CORRECTLY REFLECT LIT AT 3745 E
BAKER RPT BAKER GARKS 0669702 PD DISINTERMENT DIRECTIVE 1260 CB 615
SHOULD REFLECT CPL JULIAN EASY R T EASY FORD 34351698 PD DISINTERMENT
DIRECTIVE 1260 CB 715 SHOULD REFLECT PL O CHARLES HIRSHMAN
TL22775 RPT TL22775 PD DISINTERMENT DIRECTIVE 1260 CB 720 SHOULD REFLECT
ED LT LOK RPT NOK BAKER WINCHESTER ^{JE} 0-812398

NRFC 6847 IS IN 72350 (7 NOV 47)

UNCLASSIFIED

FORM 32-1 (1-50) (3-50) (3-50)

2173

1575002

1575002

1575002

Greenville, Ohio, October 13, 1949.

Quarter Master General, Vogel,
Washington 25, D.C.

1 Lt Sylvester B. Goetze,
SM C 889 702.

HT - 11 - 131

Dear sir:--- I have decided to have the body of my son to
be interred in a permanent American Cemetery Overseas.

Would like very much to have his grave marked in
Cemetery where he is buried and send it to me if possible.

Very sincerely,
1000 Ben F. Goetze Father
Ben Goetze, 1120 Washington Ave.,
Greenville, Ohio.

DL 10-27-49

Coded 24 Oct 49 7 Used in lieu of 34
Dashed

OCT 13 1949

7-11-49
7-11-49
Barker
3 Oct 49

QUICK 293
Cooke, Sylvester B.
SN O 669 702

19 October 1949

Mr. Ben J. Cooke
1120 Washington Avenue
Greenville, Ohio

Dear Mr. Cooke:

Your letter pertaining to the remains of your son, the late First Lieutenant Sylvester B. Cooke, has come to my attention.

I am gratified to inform you that the Department of the Army will comply with your desire to have the remains of your son rest in a permanent overseas cemetery.

All necessary arrangements for burial, military honors and religious services will be completed and provided by the Government. Please rest assured that although you have no responsibilities, every detail will be accomplished with all the reverence and dignity traditional for our honored dead.

You will receive notification of the exact location of the grave. The flag used to drape the casket of your son, during the burial ceremony will also be sent to you.

After all final interments are completed in permanent overseas American Military Cemeteries, the cemeteries will be relinquished to the control of the American Battle Monuments Commission for beautification and permanent care. It is not contemplated that photographs will be made available for distribution prior to the transfer. The exact date for such transfer of custody cannot be stated at the present time. However, at the time you receive notification of the final interment, it is suggested that you contact the American Battle Monuments Commission, Washington, D. C., and make your wishes known.

Please be assured of my continued sympathy in your great loss.

Sincerely yours,

W. J. CASSELL
Lt. Colonel, P.C.
Memorial Division

ep

WE

CORRESPONDENCE ACTION SHEET

NAME OF DECEDENT (Last, First, Middle)

Joeke, Sylvester B.

GRADE

1 Lt

SERIAL NUMBER

7 400 700

PREVIOUS BURIAL LOCATION (Cemetery and Country)	PLOT	ROW	GRAVE
PRESENT BURIAL LOCATION (Cemetery and Country)	PLOT	ROW	GRAVE

ADDRESSEE	ADDRESS (Street, City, State)
MR. Ben J. Joeke	1120 Washington Avenue
MISS	Greenville, Ohio
MRS.	
RELATIONSHIP	
Father	

PARAGRAPHS (Sequence)	ADDITIONAL DATA — MODIFICATIONS
-----------------------	---------------------------------

165-A

I am gratified to inform you that the Dept of the Army will comply with your desire to have the remains of your son rest in a permanent overseas cemetery.

113-D

176

166-A

cc - control unit pf
on cc: "USC St. Arnold, France, TFF-11-131"

ANALYST INITIALS AND DATE	TYPIST INITIALS	REVIEWER INITIALS AND DATE

REPLY FORM ACTION REQUEST

TO: <i>FL</i>		FROM: REPLY FORM ACCEPTANCE SECTION FAMILY CORRESPONDENCE BRANCH	
NAME (Last, First, Middle) <i>Goeke, Sylvester B</i>		RANK <i>1 Lt</i>	SERIAL NUMBER <i>0 669 702</i>
CEMETERY <i>St Avelo France</i>	PLOT <i>3T</i>	ROW <i>11</i>	GRAVE <i>131</i>
NEXT OF KIN <i>MR. MISS MRS. Ben J. Goeke</i>	ADDRESS (Street, City, State) <i>1120 Washington Ave Greenville, Ohio</i>		
RELATIONSHIP TO DECEASED <i>Father</i>	OPTION SELECTED <i>1</i>	OQMG FORM 345 EXECUTED BY	

WRITE NOK FOR CORRECTION OR COMPLETION OF REPLY FORM ON ITEMS CHECKED BELOW

- | | |
|---|---|
| ☐ RELATIONSHIP TO DECEASED | ☐ SIGNATURE OF NOK |
| ☐ OPTION DESIRED | ☐ NOTARIZATION |
| ☐ NATIONAL OR PRIVATE CEMETERY INTERMENT DESIRED | ☐ NATIONAL CEMETERY SELECTED IS CLOSED |
| ☐ COUNTRY (Homeland) OF DECEASED OR NOK | ☐ REPLY TO "REMARKS" ON FORM 345 |
| ☐ NAME AND/OR ☐ ADDRESS OF CONSIGNEE | ☐ SPECIAL INSTRUCTIONS |
| ☐ SECURE DOCUMENTS: ☐ REMARRIAGE ☐ BIRTH | ☐ DEATH ☐ OTHER _____ |

SPECIAL INSTRUCTIONS

*Remains to be interred O/S per letter from NOK.
Requests photograph of grave.*

DATE <i>18 Oct 49</i>	CLERK'S SIGNATURE <i>Barker</i>
--------------------------	------------------------------------

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
INTRAOFFICE REFERENCE SHEET

DUE, HOUR AND DATE _____

1 NO.	2 FROM—	3 TO—	4 DATE	5 MESSAGE
1	Res Sec RRBr Unit 2	WOK sec RRBr	10 Oct 1949	1 Lt. Sylvester B. Goeke St. Avoird, France 0 669 702 3T-11-131 WOK established as father, Mr. Ben J. Goeke 1120 Washington Ave Greenville, Ohio LOI dated 13 Sep 49 & father. No reply received to date. Request telephone call & father for disposition instructions. Barker 74173
2	Rept Br Mem Div	Res Sec Unit II	12 Oct 49	Telephoned parents, Mr. and Mrs. Ben J. Goeke, Greenville, Ohio, telephone 335-F, and spoke with the mother. She stated she and her husband wanted the remains interred overseas as this was their son's wish. She promised that either she or her husband would confirm this by letter or telegram within the next few days. ACTION: Depend to 11 Oct. Incl: 293 File ILLIUS 5775

QACMF 293

Goeke, Sylvester B.
SN O 669 702

13 September 1949

Mr. Ben J. Goeke
1120 Washington Avenue
Greenville, Ohio

Dear Mr. Goeke:

We are desirous that you be furnished information concerning the resting place of the remains of your son, the late First Lieutenant Sylvester B. Goeke.

The official report of burial has been received and discloses that the remains of your son were originally buried in the Civilian Cemetery at Eppelheim, Germany, but were later disinterred by our American Graves Registration Personnel, properly identified, and reinterred in Plot TTT, Row 11, Grave 131, in the United States Military Cemetery St. Avold, located twenty-three miles east of Metz, France.

The report further indicates that these remains have now been casketed and are being held at that cemetery pending disposition instructions from the next of kin, either for return to the United States or for permanent burial in an overseas cemetery.

There are inclosed informational pamphlets regarding the Return of World War II Dead Program, including a Disposition Form on which you may indicate your desires in this matter. Upon receipt of the properly completed form, you may be assured that the Department of the Army will attempt to comply with your instructions as indicated thereon.

In order that this office may take immediate action toward the final disposition of the remains of your son, it is urged that you complete the inclosed form, "Request for Disposition of Remains", and mail it to this office, without delay, in the inclosed self-addressed envelope which requires no postage.

May I extend my sincere sympathy in your great loss.

Sincerely yours,

W. E. CAMPBELL
Lt. Colonel, GAC
Memorial Division

Incls:



CORRESPONDENCE ACTION SHEET				NAME OF DECEDENT (Last, First, Middle) Gordie, Sylvester B.	
PREVIOUS BURIAL LOCATION (Cemetery and Country)		PLOT	ROW		GRAVE
PRESENT BURIAL LOCATION (Cemetery and Country)		PLOT	ROW		GRAVE
USMC St. Avoird, France		TTT	11		131
ADDRESSEE MR. MISS MRS.		ADDRESS (Street, City, State)			
Mr. Ben J. Goelke		1120 Washington Avenue Greenville, Ohio			
RELATIONSHIP Father					
PARAGRAPHS (Sequence)	ADDITIONAL DATA — MODIFICATIONS				
Para. 1	<u>FROM: MIB "A"</u> <u>INITIALS: MCI</u>				
Para. 2	Line 3 - Eppelheim, Germany 4 - Plot TTT, Row 11, Grave 131 5 - USMC St. Avoird, -----				
Para. 3					
Paras. 5, 6 and 7	Incls: Note action sheet for Ltr to Effects (X)				
ANALYST INITIALS AND DATE		TYPIST INITIALS		REVIEWER INITIALS AND DATE	

JH

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

In Reply refer to QMGHF 293

Goeke, Sylvester B.
Sn O 669 702

13 September 1949

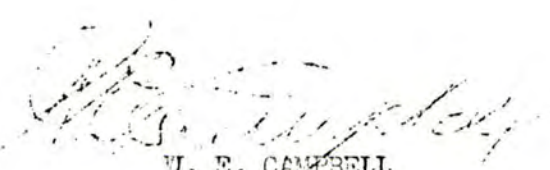
SUBJECT: Identification of former UNKNOWN deceased.

TO: Commanding Officer
Quartermaster Activity
Kansas City Records Center
Kansas City 1, Missouri
Attn: Effects Quartermaster

1. The remains which were previously interred as UNKNOWN X 1741,
Plot TTT, Row 11, Grave 131, USMC St. Avoird, France
have been identified by a GRS Field Board of Review as those of _____
1/Lt. Sylvester B. Goeke, O 669 702,
whose Next of Kin, according to the records of this Office, is _____
Mr. Ben J. Goeke - father - 1120 Washington Avenue, Greenville, Ohio

2. The identification has been approved by this Office.

BY COMMAND OF MAJOR GENERAL FELLMAN:

ehd

W. E. CAMPBELL
Lt. Colonel, QMC
Memorial Division



GREEN - COPY

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

QMGT 293

17 AUG 49
DATE

SUBJECT: Identification of Former Unknown Deceased

TO : Commanding Officer
Army Effects Bureau
Kansas City Records Center
Kansas City 1, Missouri

1. The remains previously interred as Unknown X 1777
Plot TTT, Row 11, Grave 251, LSIC
FAIRVIEW, have been identified by the Graves
Registration Service in the Field as those of 4-700-542, 12710
1-441773 whose emergency addressee
is: MOH - Mr. Ben J. Goeke - father - 1120 Washington Avenue, Greenville, Ohio

2. The identification as established has been approved by the Identification Board Review, this office.

BY COMMAND OF MAJOR GENERAL LARKIN:

T. H. METZ
Lt. Colonel, GIC
Memorial Division

RRE Form #43
20 Sep 48

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

GOEKE	Sylvester	B.	1/Lt	O-669702
(Last Name)	(First Name)	(Initial)	(Rank)	(ASN)

Subject remains have been permanently interred overseas in the United States Military Cemetery USMC Neuville

Incl #

L 50 out of our area

Allied and German Military Graves Service
F.C. Kern, Schwaebisch HALL (Wuerttemberg)

Address inquiries here

GRAVE RECORD

Coverp Filed with
X 1741 ST AYOLD TTT

Date 13.12.45
Signature burgomaster
Grade 2-14

Last name Unknown : 4
First name _____
Grade _____
Date of birth _____
Place of birth _____
Date of death _____
Place of death _____
Identification tag _____
Unit deceased Air Force
APO number _____
Nationality USA
Death in battlefield, State Germany
through enemy action, kind of wound plane crash
by illness, accident _____
by suicide: military honors granted? yes/no _____
Shot according to sentence _____
Address of nearest relative _____
Burial place Eppelheim
Community _____ County Heidelberg
Province Baden State Germany
Distance _____ meter north, south, east, west
of _____ next big place
Field grave, military cemetery, community cemetery
Single grave XXXXXXXXXX row 4 field _____
Common grave (with common gravestone)
No. _____ row _____ field _____
Count from left to right. Use back, if grave sketch.
Personal effects sent to _____
Transferred (date) _____
To _____
Grave No. _____ row _____ field _____
Report of transfer by _____
Grave inspected _____
Grave photographed _____
Photo/negative, sent to relative _____
Relative informed _____
If Allied: reported (date) _____
to _____

Strike out the wrong

File, please do not fold. Exact answers if possible.
Use new carbon paper.

CHECK LIST OF UNKNOWN

(to be completely filled out and attached to each
copy of Report of Interment WD QMC Form 1042)

Unknown X 1741
Cemetery Oppenheim, Germany
Plot 6 Row None Grave None

1. Arrived at cemetery 1400 hrs, Jan 8, 1946
(Hour) (date)

2. Place of death Oppenheim, Germany R-64937
(Name of closest town) (coordinates and letter Prefex. maps)

Mannheim Sheet U-3 1/1,000,000
Sheet, scale and serials used.

3. Remains recovered or disinterred by Pfc. George Kurey, 46th QM GR Co
(name and organization)

4. Evacuated to Cemetery by T/Sgt Kniefel, 6865 QM Bn., mobile
(name and organization)

5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements).
Clothing Markings Sizes Color wear, tear, repairs, etc.
*Headgear None
(type)

Raincoat None

Overcoat None

Jacket, Field None Jacket, Combat None

Mackinaw None

Sweater None

Jacket, HBT None

*Shirt, Wool, OD None

Undershirt, Wool None

Undershirt, Cotton None

Trousers HBT None

*Trousers, Wool OD None

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

INTRAOFFICE REFERENCE SHEET

3625

1 NO.	2 FROM—	3 TO—	4 DATE	5 MESSAGE
2	Chief Repat Br Rec Sec Mem Div	Chief Repat Br Corr Sec	8 Sept 1949	Request dispatch of necessary letter to NOK of GOEKE, Sylvester B. Return file to Captain Snedigar. 1 Incl. 293 File SNEDIGAR 5198 Thomas 72267 m
3	Chief Repat Br Corr Sec Mem Div	Chief Repat Br Rec Sec Attn: Captain Snedigar	13 Sept. 1949	1. Returned herewith is 293 file for GOEKE, Sylvester B. 2. Combination grave location - LOI and letter to effects Y have been dispatched. Incl. a/c THOMAS 7072 Norris
4	Chief Repat Br Rec Sec Mem Div	Chief Br Admin Div	14 Sep 1949	Necessary action taken in this office. 1 Incl 293 file SNEDIGAR 5198 THOMAS 72267 nm

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

INTRAOFFICE REFERENCE SHEET

DUE, HOUR AND DATE _____

1 NO.	2 FROM—	3 TO—	4 DATE	5 MESSAGE
1	Chief, Ident Br Mem Div	Chief, Repat Br Records Sec Mem Div	25 22 Aug 49	1. Attached case file forwarded for necessary correction of records and deflagging. 2. All records in Ident. Section have been amended and the Field notified. 1. For necessary Grave Location Letter to NOK. 2. For dispatch of notification to Effects QM. 1 Incl: 293 file for GOEKE, Sylvester B. 1/Lt., O-669702 METZ 74059 BARRY 2462
	NEWBAKER	IN TURN Corres Sec		

THIS FORM WILL REMAIN PART OF THE OFFICIAL FILE

AIRMAIL

DEPARTMENT OF THE ARMY
OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON 25, D. C.

IN REPLY REFER TO **QMGT 293**

GOEKE, Sylvester B.
1/Lt., O-669702

22 August 1949

SUBJECT: Identification of World War II Deceased

TO: Commanding General
American Graves Registration Command
European Area
APO 58, c/o Postmaster
New York, New York

1. The identification of 1/Lt. Sylvester B. Goake, O-669702
(formerly X - 1741, Plot TTT, Row 11 and
Grave 131, USMC St. Avold, France)

as established by your Headquarters has been approved by this office.

2. Request all records be amended accordingly.

FOR THE ACTING THE QUARTERMASTER GENERAL:

cc: Adm Sec
rar/NEUBAKER
CLEMENTS
REB

T. H. METZ
Lt. Colonel, QMC
Memorial Division

AUG 22 2 30 PM
U.S. M. G.
& RECORDS BRANCH

AIRMAIL

IDENTIFICATION CHECK LIST			DATE	
UNKNOWN X- NO. OR OTHER DESIGNATION	CEMETERY	PLOT	ROW	GRAVE
X-1741	St. Avoild, France	TTT	11	131
IDENTIFIED AS				
Goeke, Sylvester R. 1st Lt. O-669702				
ITEM	FAVORABLE	UNFAVORABLE	UNKNOWN	
DATE AND PLACE OF DEATH	X			
CAUSE OF DEATH	X			
DENTAL CHART	X			
COLOR HAIR				
ESTIMATED HEIGHT	X			
ESTIMATED WEIGHT				
SCARS, FRACTURES, ETC.				
LAUNDRY MARKS				
SHOE SIZE				
TYPE CLOTHING				
IDENTIFICATION TAG				
PERSONAL EFFECTS				
STATEMENT OF CIVILIANS				
ENEMY RECORDS				
EMERGENCY MEDICAL TAG				
PAY BOOK (EM/OFF.)				
SIGNED STATEMENT OF IDENTITY				
REMARKS				
Date and place of death are in agreement with MACR and AG Report of Death for 1st Lt. Sylvester R. Goeke O-669702. 1. A/C 42-107785 crashed in the vicinity of Eppelheim, Germany, on 22 March 1945, of the six (6) crew members, four (4) were reported KIA (of which one (1) has been identified) and (2) RMC. 2. Unknown X-1741 was recovered from a common grave at Eppelheim, Germany along with an identified crew member of A/C 42-107785. Unknowns X-1742 and X-1743, also recovered from the same common grave, are being identified as the remaining two (2) casualties of A/C 42-107785 and are being submitted under separate cover. 3. Estimated Height for X-1741 is in agreement with the height for Goeke. 4. T/C submitted for X-1741 compares favorably with Army dental records for Goeke and negatively with Army dental records for the other unidentified crew members of A/C 42-107785.				

HEADQUARTERS 320th Bomb Gp
WASHINGTON

1. MISSION: The aircraft was dispatched to attack by Task Force 1 on March 22, 1945 at 12:47A Heidelberg, Germany Bombing

2. ORGANIZATION: 320th Bomb Gp 442nd 1st TAF

3. REPORTING OFFICER: Dijon, France 35° T

4. WEATHER CONDITIONS AND VISIBILITY AT TIME OF LOSS: CAVU

5. DATE: 22 March 1945 TIME: 12:47A LOCATION OF LAST SIGHTING: Heidelberg, Germany (W)R-673907

6. SPOTIFY WHETHER: () LAST SIGHTED: () LAST CONTACTED BY RADIO: () FORCED DOWN: (X) SEEN TO CRASH: OR () INFORMATION NOT AVAILABLE

7. AIRCRAFT WAS LOST OR IS BELIEVED TO HAVE BEEN LOST AS A RESULT OF (CHECK ONLY ONE): () ENEMY AIRCRAFT: (X) ENEMY ANTI-AIRCRAFT: () OTHER CIRCUMSTANCES AS FOLLOWS: Battle #27

8. AIRCRAFT: TYPE, MODEL AND SERIES B-26 C45 CAF SERIAL NO. 42-107785

9. ENGINE: TYPE, MODEL AND SERIES R-2800-43 CAF SERIAL NO. 42-52918 () FP-063046 ()

10. INSTALLED WEAPONS: (CHECK BELOW NAME, TYPE AND SERIAL NUMBER) All 50 Cal. Browning M2's
(a) 1077391 (b) 1020843 (c) 1076839 (d) 1075563
(e) 1073430 (f) 1070754 (g) 205316 (h) 204181

11. THE PERSONS LISTED BELOW WERE REPORTED AS: () DEAD () LIVED () MISSING () OTHER

12. NUMBER OF PERSONS ABOARD AIRCRAFT: 5 WITNESSES: 0 TOTAL: 5
(Starting with pilot, furnish the following particulars: If more than 1 person was aboard aircraft, list names and positions on separate lines and attach original to this form)

CREW POSITION	NAME IN FULL	GRADE	SERIAL NUMBER	STATUS
(1) PILOT	Goske, Sylvester B.	1st Lt	0-669702	KIA
(2) COPILOT	Carragher, James T.	Capt	0-791270	MUS
(3)	Stough, Warren B.	1st Lt	0-761263	KIA
(4)	English, Roy R. Jr.	1st Lt	0-762722	KIA
(5) *	DeRosa, Louis (NMI)	S/Sgt	13049434	KIA St. Avold TTT-
(6)	Purdy, Donald D.	S/Sgt	19075650	RTD
(7)				
(8)				
(9)				
(10)				

13. IDENTIFY BELOW THOSE PERSONS WHO ARE BELIEVED TO HAVE LAST KNOWINGLY LEFT AIRCRAFT AND CHECK APPROPRIATE DESIGNATION TO SHOW STATUS: () DEAD () LIVED () MISSING () OTHER

NAME IN FULL	GRADE	SERIAL NUMBER	STATUS
Gemmill, John G.	Capt	0-568270	Consolidated B-2 Interrogation
Packham, Robert E.	1st Lt	0-730161	X
Ingham, Russell E.	1st Lt	0-705237	X

14. IF APPROPRIATE, CHECK (X) ONE OR MORE OF THE FOLLOWING: () three chutes were seen to emerge

15. ATTACH SKETCH MAP OF AREA OF LOSS: Sketch Map attached

16. ATTACH STATEMENT OF PERSONS ABOARD AIRCRAFT: Statement attached

26 March 1945

WL KORBIN, JR.

1st Lt., Air Corps
Asst Statistical Officer

CASE HISTORY

UNKNOWN X-1741, ST. AVOID, FRANCE

1/LT SYLVESTER B. GOEKE, O-669702.

1. A/C 42-107785 crashed at Eppelheim, Germany, on 22 March 1945.
2. Of the six crew members, four were reported KIA and two RMJ.
3. Four Unknowns were disinterred from a common grave at Eppelheim and two of them were identified as crew members of A/C 42-107785.
4. The other two Unknowns, X-1741 and X-1742, are now being identified as 1/Lt Goeke and 1/Lt Stough to complete this case.

E. J. MURRAY

REPORT OF INVESTIGATION-AIR SEARCHING

To be completely filled out and attached to each copy
of GR Form 1, "Report of Burial" and a visit report is accomplished.

Made during surface investigation
Advance Publicity

1. Was investigation preceded by Advance Publicity: _____
(if Special Investigation, so indicate) _____
2. X-1741 CH. St. Avoild CH. CH. CH.
(Full name of deceased) (Rank) (ASN) (Organization)
3. State: Means of identification, i.e., identification tags attached to marker, inscription on grave marker, cemetery records, townhall records, etc., and source of information, i.e., identification tags, identification cards, identification bracelet, leather name plate on flying jacket, clothing marks etc. _____
4. Give exact location of isolated grave, furnishing coordinates and letter prefix, map sheet, scale and series used, also name of nearest town: _____
NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE LYING LOCATION IN WITH PERMANENT MARKERS.
5. Full name of cemetery (include plot, row and grave if organized cemetery) _____
6. Approximate or established date of death (state which and give basis for date selected) _____
7. Approximate or established date of burial (give basis for date established) _____
8. Material in which grave was marked, also information contained on the marker: _____

9. List personal effects found in possession of or in and custodial personnel now retaining, furnishing name and address of individuals concerned: _____

10. Furnish information obtained concerning place, and particulars surrounding death and burial; give the names and addresses of all persons furnishing such information (contact local Mayor, priest, police, hospitals, cemetery directors or caretakers, those responsible for burial and others possessing important information) _____

11. Give name and address of person who can guide disintering team to burial location: _____

12. Is this an atrocity? Yes Is there evidence that it may be? Yes
If answer is yes, has responsible air crimes representative notified: _____
13. Names and addresses of persons committing the atrocity or the military unit
of which these persons are members: **Not Applicable**

14. If unidentified and a crew member of a plane or vehicle, indicate names of
any other persons who were present at the time of this location or
a survivor: None

15. If identification, supply any of the following information determinable:

a. How position in plane or vehicle: None
b. Plane or vehicle serial number: _____ type: _____
c. Installed weapons:
Serial Number Caliber & Mfg. Serial Number Caliber & Mfg.

d. Engine serial number: _____ type: _____

La Verne Westcott

La Verne Westcott, Officer

U.S. Air Force

Rank: _____

Signature of Approving Officer (US Authorizing Signature)

Signature of Approving Officer (US Authorizing Signature)

Date of Report: 15 February 1946

Location of Incident: St. Aye, France

File No: TTT Re: 11 Serial: 131

Remarks: _____

Investigation conducted by: _____

Signature of Investigator: _____

Signature of Approving Officer: _____

Signature of Approving Officer: _____

REPORT OF INVESTIGATION-AREA SEARCHING

To be completely filled out and attached to each copy
of GI Form 1, "Report of Burial" when a final report is accomplished.

Made during surface investigation

1. Was investigation preceded by Advanced Publicity: Advanced Publicity
(if Special Investigation, so indicate)
2. X-1741 Unk. St. Avold Unk. Unk. Unk.
(Full name of deceased) (Rank) (ASN) (Organization)
3. State: Means of identification, i.e., identification tags attached to marker, inscription on grave marker, cemetery records, townhall records, etc., and source of information, i.e., identification tags, identification cards, identification bracelet, leather name plate on flying jacket, clothing marks etc. None
4. Give exact location of isolated grave, furnishing coordinates and letter prefix, map sheet, scale and series used, also name of nearest town: R-64937 Mannheim Sheet u-3 1/1,000,000
NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE BY LOCATION IN WITH PERMANENT LANDMARKS.
5. Full name of cemetery (include plot, row and grave if organized cemetery) Gemeinde Eppelheim Cem., Eppelheim Germany Plot 6
6. Approximate or established date of death (state which and give basis for date selected) Established 2100 hrs. March 1945 According to statement of Caretaker
7. Approximate or established date of burial (give basis for date established) Established 2100 hrs. March 1945 according to statement of Caretaker
8. Material in which grave was marked, also information contained on the marker: Wooden Cross-no markings.
9. List personal effects found in possession of civilian and custodial personnel now retaining, furnishing name and address of individuals concerned: None
10. Furnish information obtained concerning place, and particulars surrounding death and burial; give the names and addresses of all persons furnishing such information (contact local Mayor, priest, police, hospitals, cemetery sections or caretakers, those responsible for burial and others possessing important information) Antun Forster, Caretaker, Blumenstr. 3, Eppelheim Germany
Furnished information for para. reports 4,5,6,7,&10
11. Give name and address of person who can guide interviewer to burial location:

12. Is this an atrocity? No Is there evidence that it may be? No
If answer is yes, has responsible or Chinese representative notified?
13. Names and addresses of persons committing the atrocity or the military unit of which these persons are members: Not Applicable

14. If unidentified plane or motor vehicle, indicate names of any other persons seen, known and/or sheltered at this location or a survivor: None

15. If unidentified, supply one or the following information, if obtainable:

a. Crew position in plane or vehicle:

b. Plane or vehicle serial number:

None

c. Installed weapons:

Serial Number: Caliber 12mm. Serial Number: Caliber 30mm.

d. Engine serial number:

Engine:

Signature and approval of (M) Authorizing In. Unit:

Printed name of Officer/Serial name by:

Date: 13 February 1945

Place: St. Amand, France

Plot: 11

131

Additional particulars regarding investigation will be made of additional facts.

1 known American buried with 3 other unknown
*Americans in a common grave

La Verne Westcott

La Verne Westcott

S/Sgt. 36178312

Rank

ASN

B E R I C H T

(T R U E S T A T E M E N T)

Als Friedhofswaerter des Gemeindefriedhofes in Eppelheim hatte ich die Aufgabe, die am 20. Maerz 1945 etwa 1 1/2 km. von Eppelheim entfernt abgestuerzten vier unbekannten amerikanischen Flieger beizusetzen. Die Beisetzung erfolgte am gleichen Tage, da die Leichen mit Phosphor bespritzt waren und ein erneutes Aufbrennen des Phosphors vermieden werden sollte. Eine vorherige Einsargung erfolgte nicht. Infolge der bereits eingetretenen Dunkelheit - es war etwa 21 Uhr, als die Beisetzung erfolgte - war es mir nicht mehr moeglich an den Leichen besondere Merkmale, die zu einer Identifizierung dienen koennten, zu erkennen.

Den Flugzeugabsturz beobachtete ich nicht und begab mich auch nicht an den Ort des Absturzes.

Zweckdienliche Auskueabfte koennen m.E.nach folgende Personen machen:
Feldhueter Alois Z i e h e r, Eppelheim, kleine Siedlung und
der fruehere Polizeibeamte in Eppelheim H e e r, der jetzt bei der Militaerpolizei in Heidelberg angestellt sein soll.

Eppelheim, den 17. Dezember 1945.

Anton Foerster
Friedhofswaerter
Eppelheim
Blumenstrasse 3.

*This is a true copy
46 GAI & R Co
2nd St N.Y.
Mona P. Miscundis*

BERICHT

(T R U E S T A T E M E N T)

Als Friedhofswaerter des Gereindefriedhofes in Eppelheim hatte ich die Aufgabe, die am 20 maerz 1945 itwa 1½ km, von E ppelheim abgestuerzten vier unbekannten amerikanischen flieger beizusetzen. Die beisetzung erfolgte am gleichen Tage, da die Leichen mit Phosphor bespritzt waren und ein erneutes Aufbarnen des Phosphors vermieden werden sollte. Eine vorherige Einsargung erfolgte nicht. In folge der bereits eingetretenen Dunkelheit-es war etea 21 Uhr, als die Beisetzung erfolgte-war es mir nicht mehr moeglich an den Leichen be sondere Merkmale, die zu einer Identifizierung dienen koennten, zu erkennen.

Den Flugzeugabsturz beobachtete ich nicht und begab mich auch nicht an din Ort des Absturzes.

Zweckdienliche Auskuenfte koennen m.e. nach folgende Personen machen: Feldhueter Alois Zieher, Eppelheim, Kleine Siedlung der fruehere Polizeibeante in Eppelheim H e e r, der jetzt bei der Militaar polizei in Heidelberg angestellt sein soll.

Eppelheim. den 17, Dezember 1945.

*This is a true copy
46 G.M. & R. Co
2nd Lt Inf.
Morris & Misserandino*

Anton Foerster
Friedhofswaerter
Eppelheim
Blumenstrasse 3.

AGRC
FORM NO. 11
Revised 5 January 1946

CHECK LIST OF UNKNOWN

(to be completely filled out and attached to each
copy of Report of Interment WD QMC Form 1042)

Unknown X 1741
Cemetery Eppeheim, Germany
Plot 6 Row None Grave None

1. Arrived at cemetery 1400 hrs, Jan 8, 1946
(Hour) (date)
2. Place of death Eppeheim, Germany R-64937
(Name of closest town) (coordinates and letter Prefex, maps)
Mannheim Sheet U-3 1/1,000,000
Sheet, scale and serials used.
3. Remains recovered or disinterred by Pfc. George Kurey, 46th QM GR Co
(name and organization)
4. Evacuated to Cemetery by T/Sgt Kniefel, 6865 QM Bn. mobile
(name and organization)
5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements).

Item	Clothing	Sizes	Color	wear,	Indicate unusual markings
(type)	Markings				tear, repairs, etc.
*Headgear	<u>None</u>				
Raincoat	<u>None</u>				
Overcoat	<u>None</u>				
Jacket, Field	<u>None</u>				
Jacket, Combat					<u>None</u>
Mackinaw	<u>None</u>				
Sweater	<u>None</u>				
Jacket, HBT	<u>None</u>				
*Shirt, Wool, OD	<u>None</u>				
Undershirt, Wool	<u>None</u>				
Undershirt, Cotton	<u>None</u>				
Trousers HBT	<u>None</u>				
*Trousers, Wool OD	<u>None</u>				

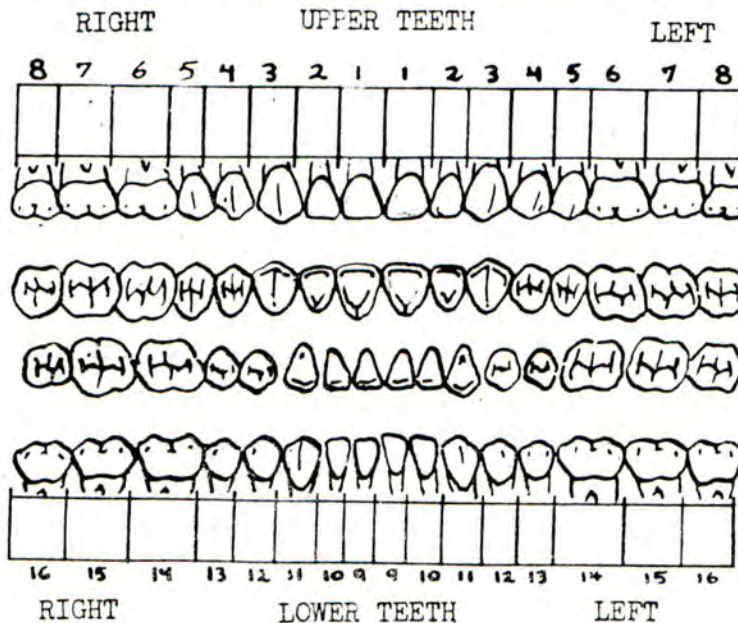
OFFICE OF THE DENTAL SURGEON
KELLY FIELD, TEXAS

DENTAL IDENTIFICATION

42-K

Date of examination Apr. 30 1942

SURNAME <u>Goeke</u> CHRISTIAN NAME		RANK	REGIMENT or STAFF CORPS.
Goeke, Sylvester B.		Av/C	Air Force
SERIAL NUMBER	RACE	NATIVITY	SERVICE, Years.
35127764	W		



CLASS _____ OCCLUSION _____ PERIODONTOCCLASIA _____
OTHER CONDITIONS, ANOMALIES _____

Restorable Carious teeth by outline of cavity on tooth.
Nonrestorable Carious teeth by /
Missing natural teeth by X
Fillings, present by drawing on tooth; type in space above.
S-Synthetic Porcelain, A-Amalgam, G-Gold. O-Oxyphosphate.
Non-vital teeth (—) in space above.
Teeth replaced by denture.
Teeth replaced by Fixed Bridge.

X	X	X
(X)		

Approved;

Station Dental Surgeon

Examining Dental Officer.

FILE

JUL 11 1949

William H. Brown
Examining Dental Officer.

477

293

ON SYLVESTER B GOEKE 35127764 & 0669702 DENTAL
CHART AT INDCTN 31 JUL 41 TEETH MISSING R 6 14 15 L 13 14 16 WDAGO FORM
38 13 JAN 43 TEETH MISSING R 14 15 16 L 14 16 5 FORMS 79 BEING SENT

✓

*REPORT OF DENTAL SURVEY

UPPER TEETH

Right											Left						
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8		

LOWER TEETH

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

CLASS

Occlusion: Calculus: Slight, Medium, Heavy

Periodontoclasia

Dental foci suspected: Yes No

Other conditions

Date, 19.....

Dental Corps, U. S. A.

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

Teeth replaced by denture
(horizontal line)

X	X	X	X

Teeth replaced by fixed bridge
(oval to include abutments)

	(X)		

REGISTER OF DENTAL PATIENTS AT

BARKSDALE FIELD LAC-669702

(1) SURNAME
Gooke
(2) CHRISTIAN NAME
Sylvester
(3) RANK
1st. Lt.
(4) COMPANY
476th.
(5) REGIMENT OR STAFF CORPS
335th.
(6) AGE, YEARS
25
(7) RACE
W.
(8) NATIVITY
Ohio
(9) SERVICE, YEARS
3Yrs.

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.	(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS	(12) RESULTS AND REMARKS
	AdmR Exam 4/0	Cl.1 D.S.Cook
Diag. L-8 (Area)	XR (1) 4/6	Lt.Col.T.A.Hurney
	4/6	X-Ray Road.
		L-8 (Area)
	X-raymRead by 4/6	Cl.1 D.S.Cook
	CR Prlx 4/6	Cl.1 C.M.Sparks
APeri :-L-8	TE AnesIn 4/7	Cl.1-2 R.V.Ostrander
	CR Prlx 5/9	Cl.2 C.M.Sparks
Car L-5-do	OA 5/9	Cl.2 H.I.Gill
Car L-3-f	S 5/9	Cl.2 H.I.Gill
Car L-2-d	S 5/9	Cl.2 H.I.Gill
Car L-2-m	OS 5/9	Cl.2-4 H.I. Gill
	Adm.R Exam. 6/26/44	Cl.2 M.K.McConnell

Handwritten signatures and notes:
 Cl.1 D.S.Cook
 Lt.Col.T.A.Hurney
 Cl.1 D.S.Cook
 Cl.1 C.M.Sparks
 Cl.1-2 R.V.Ostrander
 Cl.2 C.M.Sparks
 Cl.2 H.I.Gill
 Cl.2 H.I.Gill
 Cl.2-4 H.I. Gill
 Cl.2 M.K.McConnell
 Dental Corps, U. S. A.
 Form 79-MEDICAL DEPARTMENT, U. S. A.
 (Revised Feb. 24, 1941)
 16-20022

*REPORT OF DENTAL SURVEY

UPPER TEETH

Right 8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8 Left

8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
0	0	X								0	0	0			

LOWER TEETH

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

16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

CLASS ED IV-II mmmm

Occlusion: Calculus: Slight, Medium, Heavy

Periodontoclasia

Dental foci suspected: Yes No

Other conditions

2nd m. R.
A-1, 2, 3 x Ray used 8.3. 1
P.R.

Date April 6, 1944

L.D. Smith, M.D.
 Dental Corps, U. S. A.

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

Teeth replaced by denture
 (horizontal line)

X	X	X
---	---	---

Teeth replaced by fixed bridge
 (oval to include abutments)

	X	
--	---	--

H.S.

REGISTER OF DENTAL PATIENTS
MORRISON FIELD, FLA. 10

(1) SURNAME (2) CHRISTIAN NAME
Goeke Sylvester B O-669702
(3) RANK (4) COMPANY (5) REGIMENT OR STAFF CORPS
1st Lt Transient 4744
(6) AGE, YEARS (7) RACE (8) NATIVITY (9) SERVICE, YEARS
26 W ~~Lower~~ OHIO 3yrs

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.	(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS	(12) RESULTS AND REMARKS
Ging	1944 7/11 Exam	Cl.II CBM
	7/11 GT Fowler's Sol as mouth wash	Cl.IV YHII

Carl J. Benning
LT. COL. CARL J. BENNING, D.C.S.

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

*REPORT OF DENTAL SURVEY

UPPER TEETH

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

LOWER TEETH

Right								Left							
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16
X															X

CLASS II *Positive Aesthetic*

Occlusion _____: Calculus: Slight, Medium, Heavy

Periodontoclasia _____

Dental foci suspected: Yes No

Other conditions _____

See dental X-ray P 12

Date JUL 11 1944, 19____

Edward B. ...
Dental Corps, U. S. A.

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

Teeth replaced by denture
(horizontal line)

X	X	X
---	---	---

Teeth replaced by fixed bridge
(oval to include abutments)

(	X	)
---	---	---

401

0-669702 4771

3	Black	4	Co.	5	Reg't	or	Staff	Corps
M.L.				442	320	B.C.		

26	W.	0410	31/12
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Dental corps, U.S.A.

(Revised Feb. 24, 1941)

*REPORT OF DENTAL SURVEY
Upper Teeth

11A.

Right											Left										
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8						

Lower Teeth

Right											Left										
16	15	14	13	12	11	10	9	8	7	6	5	4	3	2	1						

Class. II

Occlusion.....:Calculus:Slt Med Hry
Periodontoclasia.....
Dental foci suspected: Yes No
Other conditions.....

Date. Mar. 1. 9. 1945

Leo Epstein

Capt. Dental Corps, U.S.A.

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

Teeth replaced by denture
(horizontal line)

X	X	X
---	---	---

Teeth replaced by fixed
bridge (oval to include
abutments)

(X)

REGISTER OF DENTAL PATIENTS AT

X-Ray # 135

4749

(1) SURNAME

(2) CHRISTIAN NAME

Goeke, Sy B

12

(3) RANK

(4) COMPANY

(5) REGIMENT OR STAFF CORPS

Pvt.

3rd Trans

(6) AGE, YEARS

(7) RACE

(8) NATIVITY

(9) SERVICE, YEARS

23

W

Ohio

6/12

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.	(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS	(12) RESULTS AND REMARKS
R-15	Class I	
Pulpitis R-15	1 film 1/15/42	K. Brookreson, 1st Lt
	T.E. & Anos. 1/15/42	W.B. Parsons, 1st Lt
	Class I-II	
Caries		
"		
Calc. fill.		
"		
Calculus	CR 2/13/42	J. Razook, Hyg.
Filling, Def. R-1	(D) S 3/23/42	G.E. Mensch, Capt. D.
" " R-1	(D) S 3/23/42	G.E. Mensch, Capt. D.
Filling, Def. R-2	" S 3/30/42	T.R. Granger, 1st Lt
Caries L-12	" A 3/30/42	T.R. Granger, 1st Lt
" L-12	" A 3/30/42	T.R. Granger, 1st Lt
" L-12	" A 3/30/42	T.R. Granger, 1st Lt
	Class III-IV	

Dental Corps, U.S.A.

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

16-20922

*REPORT OF DENTAL SURVEY

UPPER TEETH

Right								Left							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
X	0	X					0	0					0		

LOWER TEETH

Right										Left					
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16
X	X	X				0						X	X	2	X

CLASS I

Occlusion I: Calculus: Slight, Medium, Heavy

Periodontoclasia no

Dental foci suspected: Yes No

Other conditions 13 2 Def. foci

Date Jan 15, 19 42

Dental Corps, U. S. A.

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

Teeth replaced by denture
(horizontal line)

X	X	X
---	---	---

Teeth replaced by fixed bridge
(oval to include abutments)

	X	
--	---	--

1949 MAY 27 19 06

4749

FKAL05S

FPA025

RR UEP

FM UFPO 45/HQ AGRC PARIS FRANCE 271401Z

TO OQMG WASHDC

GRAVES GRNC

FROM HQ AGRC PARIS

MSG NO. AGRC 3440

D. T. G. 271401Z

ACTION QMC

MC IN NO. 72653

REF AGRC THREE FOUR FOUR ZERO

ATTN MEMORIAL DIVISION

REQUEST THIS OFFICE BE FURNISHED ALL AVAILABLE TOOTH CHARTS FOR FIRST

SLASH LIEUTENANT ROY R ENGLISH JUNIOR CMA ZERO DASH SEVEN SIX TWO SEVEN

TWO TWO EIGHT FIRST SLASH LIEUTENANT SYLVEST R B GOEKE CMA ZERO DASH

SIX SIX NINE SEVEN ZERO TWO AND FIRST SLASH LIEUTENANT WARREN B STOUGH

CMA ZERO DASH SEVEN SIX ONE TWO SIX THREE SOONEST PD END AGREE PD

PECKHAM

CFN ENGLISH GOEKE STOUGH

27/1454Z MAY

Y119

G. W. ROGERS
Capt., QMC

Identification Branch

100-215
100 (European)

21 June 1947

/Gleits

Additional Information

1. American General
American Navy Administration Command
European Area
APO 3, c/o Postmaster
New York, New York

1. Reference is made to your letter of 11 June 1947.
2. Information herewith is all available material for which per-
taining to the following:

1. British, Roy. A. Fr.	100-215	100-215
2. British, American	100-215	100-215
3. British, American	100-215	100-215

100-215
100-215
100-215

100-215

IDENTIFICATION SECTION MEMORIAL DIVISION

IDENTIFICATION DATA

W.L.

LAST NAME - FIRST NAME - MIDDLE INITIAL <i>Locke Lyman R</i>			ARMY SERIAL NUMBER <i>0-669702 35127-714</i>		GRADE <i>1st Lt</i>
HEIGHT <i>5 ft 11 1/2 in</i>	WEIGHT <i>177</i>	COLOR EYES <i>BL</i>	COLOR HAIR <i>Red</i>	SHOE SIZE <i>12 B</i>	DATE OF DEATH <i>Mar 22-45</i>

LAST ORGANIZATION TO WHICH ATTACHED OR ASSIGNED (Give complete designation)

42nd INF SQ (M) 320th COMB GP

PLACE OF DEATH OR PLACE LAST SEEN IF MIA

AIR 501st B-26 SHOT DOWN OVER HEIDELBERG GERMANY MAR 22-45

LIST ALL CAMPS IN WHICH STATIONED IN U.S. PRIOR TO SERVICE OVERSEAS, WITH INCLUSIVE DATES AT EACH.

STATION	DATES
<i>1st Lt 1st Lt</i>	<i>1st Lt 1st Lt</i>
<i>1st Lt 1st Lt</i>	<i>1st Lt 1st Lt</i>

FRACTURES AND/OR BREAKS <i>1st Lt 1st Lt</i>	TATTOOS AND/OR BIRTH MARKS <i>1st Lt 1st Lt</i>
---	--

DENTAL CHART

71-12-42

8 7 6 5 4 3 2 1

2 2 3 4 5 6 7 8

UPPER RIGHT

UPPER LEFT

X X X 13 12 11 10 9

9 10 11 12 13 *X* 14 *X*

LOWER RIGHT

LOWER LEFT

X - EXTRACTED

O - CARIOUS

/ - CARIOUS NON-RESTORABLE

REGISTER OF DENTAL PATIENTS AT

BARKSDALE FIELD 4749

(1) SURNAME
Goeke, S. B.
(2) CHRISTIAN NAME
0-669702
(3) RANK
2nd. Lt. 476 B. Sq.
(4) COMPANY
335 B. Gp.
(5) REGIMENT OR STAFF CORPS
(6) AGE YEARS
(7) RACE
(8) NATIVITY
(9) SERVICE YEARS

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.	(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS	(12) RESULTS AND REMARKS
SENT TO HOSP FOR Caries L-1-d	LOTTER DTR. 5/15-43	BRL
L-6-mo	A	
R-12-f	A Hosp. 5/20/43	I (I)
T Impacted L-13-14		I (I)
-15-16 R-14-15-16	Imp. Hosp. 6-15-43	I (I)
Bite	Hosp. 6/15/43	I (I)
Pulpitis R-15	TE 4/13/43 Hosp.	II
Sequestrum	Removal of 4/20/43	RLA
Diag. L-8 Area XR	(1) Xp Ray Read	Cl. 1 Hosp
C Cr Prlx	4-6-44	Cl. 2
Crs. R-1-o	Exam 6-20-44	
Crs. R-6-mo	A 6-26-44	Cl. 4 Hosp

SURGEON'S FILE

R. P. Levites, 1st Lt. Dental Corps, U. S. A.

5A

*REPORT OF DENTAL SURVEY

UPPER TEETH

Right								Left							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
X	00	0	0	0			5	5	5	5	0	0	0	0	0
A	A	A	A				5	5	5	5	A	A	A	A	A



LOWER TEETH

Right										Left					
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16
X	X	X											X	X	X



CLASS 12

Occlusion 7: Calculus: Slight, Medium, Heavy
 Periodontoclasia 7
 Dental foci suspected: Yes No
 Other conditions 7

Caries R-1

Date 2-12-43, 19

D. F. Lentes, Jr., Lt. D.C.
 Dental Corps, U. S. A.

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

Teeth replaced by denture
 (horizontal line)

X	X	X
---	---	---

Teeth replaced by fixed bridge
 'oval to include abutments)

(	X	)
---	---	---

DATA ON REMAINS NOT YET RECORDED OR IDENTIFIED

NAME (Last, First, Middle Initial)

Gooker, Sylvester B.

GRADE

1st Lt.

PRESENT SERIAL
NUMBER

0-669702

ORGANIZATION

4112 Bomb Sq.
320 Bomb Grp.

RACE

White

CREED

—

FORMER SERIAL
NUMBER (If applicable)

3512 7764

DATE OF DEATH/MIA

CAUSE OF DEATH

PLACE OF DEATH OR PLACE LAST SEEN IF MIA

DATE OF FOD

Over Held. 16 - Germany

HEIGHT

5' 11 1/2"

WEIGHT

171

COLOR EYES

Blue

COLOR HAIR

R-L

SHOE SIZE

12 B

DENTAL CHART 13 Nov 44

UPPER RIGHT

8 7 6 5 4 3 2 1

UPPER LEFT

1 2 3 4 5 6 7 8

LOWER RIGHT

✓16 X15 X14 13 12 11 10 9

LOWER LEFT

9 10 11 12 13 X14 15 X16

X = Extracted

O = Carious

1 = Carious Non-Restorable

FRACTURES AND/OR BREAKS

TATTOOS AND/OR BIRTHMARK

No

ADDITIONAL INFORMATION

FILE

JUL 21 1948

E. J. WOODEN, 1st Lt., GPO
IDENTIFICATION SECTION

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

QMGM 293 Goeke, Sylvester B. (Name)
1st Lt. (Rank)
O-669702 (Serial No.)

M.A.C.R. Information Filed Under:

NAME: English, Roy R., Jr.
RANK: 1st Lt.
SERIAL NO: O-762722
DATE: 25 DEC 1947

SPQYC 293
English, Roy R., Jr.
SN O 762 722

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

7 June 1946

Mr. Roy R. English, Sr.
1221 East Morehead Street
Charlotte, North Carolina

Dear Mr. English:

Your letter to Army Air Forces concerning your son, the late First Lieutenant Roy R. English, Jr., has been referred to this office.

In view of the fact that the Army Effects Bureau, Kansas City Quartermaster Depot, 501 Fardesty Avenue, Kansas City 1, Missouri, has been designated to receive and ship personal effects of military personnel who died overseas, a copy of your letter has been forwarded to that office for direct reply to eliminate duplication of effort.

This office regrets the delay in answering your letter and extends its sincere sympathy in the loss of your son.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

WILLIAM E. ROSS
1st Lieut., G C
Assistant

X 273 1108 PLY
7-17-46

COPY

Roy R. English
1221 E. Moreheat Street
Charlotte, North Carolina

AFPPA-8

AAF 201 - (13232) English, Roy R., Jr.
0762722

January 22, 1946

Major W. D. Sanders
Asst Chief Notification Branch
Personal Affairs Division
Hq AAF Munitions Bldg
Washington 25, D.C.

Dear Major Sanders:

To this day no further official facts have been received from any department. I say "official" advisedly because there are some things that have come to us from other than official sources,- one being that a lieutenant flew over the plane at an altitude of 500 feet where it landed outside Heidelberg, and reported it not badly damaged. He readily identified it and photographed it. This bears out one of the official reports that the plane descended with wings level. Assuming the truth of these and supporting facts, it appears to be conclusive that the plane could have been controlled, that the pilot was injured, and that the co-pilot deserted the ship and his fellow crew members. Were these facts reported in the investigation, or was there an investigation made along these lines?

Yours sincerely,

EXTRACT

/s/Roy R. English
/t/Roy R. English

293 Goeke, Sylvester B. 1st Lt. 0 669 702

Crew List # 132 132

Navigator - English, Roy R. Jr.	1st Lt.	0 762 722
Pilot- -----Goeke, Sylvester B.	1st Lt.	0 669 702
Co-Pilot- - Carraher, James J.	Captain	0 791 270
Bomber----- Stough, Warren B.	1st Lt.	0 761 263
Engineer--- Derosa, Louie	S/Sgt	13 049 434
Aerial Gunner-Purdy, Donald L.	S/Sgt	19 075 650

293 Goeke, Sylvester B. 1st Lt. 0 669 702

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

Barksdale Field, La. 12 February 1944.
 (Place) (Date)

S. A. LOTT, Captain
 (Name and grade)

Medical Corps.

REVIEWED AND APPROVED:

J. D. SHIPP, Captain, Medical Corps.
 (Senior flight surgeon)

E. J. SHAUGHNESSY, Captain
 (Name and grade)

Medical Corps.

J. M. O'NEAL, 1st Lt.
 (Name and grade)

Medical Corps.

1st Ind.²

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

(Name)

(Grade)

(Organization and arm or service)

Commanding.

2d Ind.²

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

¹ Required for candidates for commission, Reserve officers reporting for extended active duty, and applicants for flying cadet.

² State action taken on recommendation of the board. If incapacitated for active service, state whether action by retiring board is recommended.

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

CORRECTED COPY

ST

Graves Registration
Form No. 1
(Revised 1 Sept. 1945)

REPORT OF BURIAL

12 July 1949

Date

G O E K E,

Sylvester

R.

1/Lt

0-669702

442 Bb Sq.

320 Bb Gp

EPPELHEIM, Germany

22 March 1945

Plane crash

1530, 15 Feb. 1946

U.S. Military Cemetery ST. AVOLD, France

Time and Date of Burial

Name of Cemetery

Name or Coordinates of Location

131

11

TTT

Cross

Grave Number

Row Number

Plot Number

Type of Marker

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

If No Identification Tags Previously buried as Unknown X-1741 (St Avold)

How were remains identified? Identified through: 1) Tooth chart for X-1741 is in agreement with tooth charts for 1/Lt Goeke. 2) Est. date & place of death of X-1741 are in agreement with MACR for A/C 42-107785 of which 1/Lt. Goeke was a crew member. 3) Unk. X-1741 was disinterred from the same common grave as What means of identification were buried with the body? the ident. remains of other crew members of A/C 42-107785. 4) Tooth chart for X-1741 has been compared with tooth charts of all other casualties of the subject A/C with negative results.

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

Who is buried on :

Deceased's Right :

X-1742

Name

Serial No.

Rank

Organization

132

Grave No.

Deceased's Left :

X-3375

Name

Serial No.

Rank

Organization

130

Grave No.

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



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

Emergency Addressee

Unknown

Name

Address

Religion

Unknown

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

REBURIAL

Previously buried in isolated grave located at: EPPELHEIM, Ger. R64937 Plot 6

This corrected copy of Report of Burial, prepared in the Office of the American Graves Registration Command.

Signature of Officer or other person reporting burial

Verified by G. S. [Signature]

C. W. [Signature]

C.P.T.

QLC

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
PO BOX 58 US ARMY

IDENTIFICATION
RECOMMENDED

GOMKE, Sulvester B

1/Lt

0-669702

(Name)

(Rank)

(SN)

previously buried as Unknown X - 1741, USMC St Avold
Identification accepted in accordance with Letter, File A.G.R.C-S 293.9 (27 Mar 47)
D-M, War Dept., TAGO, 9 April 47, subject: Establishment of Boards of Review for
Identification of Unknown Dead Overseas, by the following members of the Board
of Review, established by Par. 5, SO # 16, Hq, A.G.R.C., dated 3 Feb 49,
amendment, Par 2, SO # 32, dated 18 Mar 1949, Hq, A.G.R.C., and SO # 43, dated
19 April 1949, Hq, A.G.R.C.

Col. H.P. HEIRY, O-12589

CMC

Lt. Col. E.D. MULV. NITY, C-359598

CMC

Major Roger BERGER, O-251736

ORD

Captain Jack C. HAYES, O-1577297

CMC

Captain E.F. PRICE Jr., O-1588236

CMC

1/Lt. Edward E. STOUT, O-1594512

CE

APPROVED

16 Aug 49

[Signature]

T. H. METZ, Lt. Col. CMC

Chief, Identification Br

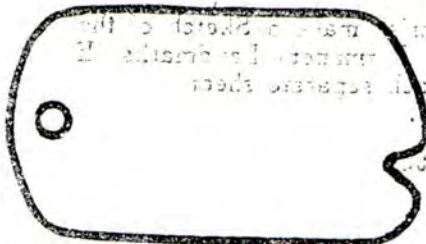
Memorial Division, CCMG

RE BURIAL REPORT OF BURIAL

Feb 1946

GOENE, Sylvester B. TM 10-630 AND AR 30-1815
X-1741-St. Avela-
Last Name unk. First Name unk. Middle Initial unk. Rank unk. Organization unk. Serial No. unk.
Unit 22 Mar 45
Place of Death Eppelheim R-64937
Date of Death 22 Mar 45
Cause of Death Plane Crash
Time and Date of Burial 1530 15 February 1946
Name of Cemetery US Military Cemetery, St. Avel, France
Name or Coordinates of Location Q-260-584
Grave Number 131 Row Number 11 Plot Number 11
Type of Marker Cross
Disposition of Identification Tags: Buried with body Yes ☐ No ☒ Attached to Marker Yes ☐ No ☒
If No Identification Tags
How were remains identified? No identification tags found
see attached form # 10 and check list for unknowns for further clues
What means of identification were buried with the body?
One (1) GR form # 1 in Burial Bottle
To determine Right or Left use Deceased's Right and Left.
Who is buried on:
Deceased's Right: UNKNOWN X-1742
Deceased's Left: UNKNOWN X-3376
Name Serial No. Rank Organization Grave No.
Name Serial No. Rank Organization Grave No.

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



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

Emergency Addressee

Name

Address

Religion

No identification tags found
List only Personal Effects Found on Body and disposition of same:
None

RE BURIAL

Morris P. Misorendino

Morris P. Misorendino, 2nd Lt., Inf.

Signature of Officer or other person reporting burial
46th GR Co., Disinterring Officer

Verified by G. R. S. Officer

Previously buried in isolated grave

located at Eppelheim Germany R-64937
plot-6

CHARLES F. BARNEY, 2nd Lt. Inf., 6800 QM GR Det.

REPORT OF BURIAL

TM 10-630 AND AR 30-1815
8 Feb 1946
Goeke, Sylvester B. 1/Lt
-X-1-743 St. Avoild -
Last Name
First Name
Initial
Rank
Serial No.
Unit
Air Corps
22 March 1945
Oppelheim R-64937
Place of Death
1530 15 February 1946
Time and Date of Burial
131
Grave Number
11
Row Number
US Military Cemetery
Name of Cemetery
St. Avoild, France
Name or Coordinates of Location
260-584
Cause of Death
Plane Crash
Cross
Type of Marker
Disposition of Identification Tags: Buried with body Yes ☐ No ☒ Attached to Marker Yes ☐ No ☒
If No Identification Tags
How were remains identified? No identification tags found
see attached form #10 and check list for unknowns for further clues

What means of identification were buried with the body?

One (1) GR form # 1 in Burial Bottle

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

Who is buried on: Deceased's Right:	UNKNOWN X-1742				132
	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	UNKNOWN X-3376				130
	Name	Serial No.	Rank	Organization	Grave No.

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

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

Emergency Addressee

Name _____

Address

Religion

Religion.....
 No identification tags found
 List only Personal Effects Found on Body and disposition of same:

N o n e

RECEIVED

Morris P. Miserendino
Morris P. Miserendino, 2nd Lt., Inf.

Signature of Officer or other person reporting burial

Previously buried in isolated grave

Verified by G. R. S. Office

located at Eppeheim Germany R-64937 Charles F. Barney
Plot 6 CHARLES F. BARNEY, 2nd Lt. Inf., 6800 ON GR Det.

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

REPORT OF DEATH

41-3613

DATE 19 Dec 1945

FULL NAME GOEKE, SYLVESTER F.		ARMY SERIAL NUMBER 0669702	GRADE 1/Lt
HOME ADDRESS Greenville, Ohio		ARM OR SERVICE AC	DATE OF BIRTH 11 May 1918
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH 22 Mar 1945
STATION OF DECEASED European Area	DATE OF ENTRY ON CURRENT ACTIVE SERVICE 14 Jan 1943		LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS

EMERGENCY ADDRESSEE (Name, relationship, and address)

Ben J. Goeka, father, 1120 Washington, Greenville, Ohio

BENEFICIARY (Name, relationship, and address)

Ida Goeka, mother, 1120 Washington, Greenville, Ohio

Ben J. Goeka, father, 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

ADDITIONAL DATA AND/OR STATEMENT

☒ BATTLE

☐ NON-BATTLE

The individual named in this report of death is held by the War Department to have been in a missing in action status from 22 March 1945 until such absence was terminated on 1 December 1945, when evidence considered sufficient to establish the fact of death was received by the Secretary of War.

28 DEC 1945

FILE

BY ORDER OF THE SECRETARY OF WAR

John. Sullivan

ADJUTANT GENERAL

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

476088
137

REPORT OF DEATH

11-3613

DATE 19 Dec 1945

FULL NAME GOEKE, SYLVESTER E.		ARMY SERIAL NUMBER 0669702		GRADE 1/Lt	
HOME ADDRESS Greenville, Ohio		ARM OR SERVICE AC		DATE OF BIRTH 11 May 1918	
PLACE OF DEATH European Area		CAUSE OF DEATH Killed in action		DATE OF DEATH 22 Mar 1945	
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 14 Jan 1943		LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS	
EMERGENCY ADDRESSEE (Name, relationship, and address) Ben J. Goeke, father, 1120 Washington, Greenville, Ohio					
BENEFICIARY (Name, relationship, and address) Ida Goeke, mother, 1120 Washington, Greenville, Ohio Ben J. Goeke, father, as above					
INVESTIGATION MADE YES NO		IN LINE OF DUTY YES NO		OWN MISCONDUCT YES NO	
WAS DECEASED ON DUTY STATUS YES NO		AUTHORIZED ABSENCE YES NO		IN FLYING PAY STATUS YES X NO	
OTHER PAY STATUS (Specify below) YES NO					
ADDITIONAL DATA AND/OR STATEMENT ☒ BATTLE ☐ NON-BATTLE					
The individual named in this report of death is held by the War Department to have been in a missing in action status from 22 March 1945 until such absence was terminated on 1 September 1945, when evidence considered sufficient to establish the fact of death was received by the Secretary of War.					
BY ORDER OF THE SECRETARY OF WAR <i>John L. Wilson</i> ADJUTANT GENERAL					

mark

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

-BATTLE CASUALTY REPORT

AG 201	NAME GOEKE SYLVESTER B ASN 0-669 702	GRADE 1 LT SON	DATE CAS. REPORT RECEIVED 12 DATE TELEGRAM SENT 9 APRIL 1945
NAME AND AD. DRESS OF E. A.	BEN J GOEKIE 1120 WASHINGTON GREENVILLE OHIO		

THE INDIVIDUAL NAMED BELOW DESIGNATED THE ABOVE 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

RELATIONSHIP **SON**

GRADE	NAME	SERIAL NUMBER	ARM OR SERVICE	REPORTING THEATRE	FOR J STATUS	SHIPMENT NUMBER
1 LT	GOEKE SYLVESTER R E	0-669702	AC	ETO	A	092

TYPE OF CASUALTY	PLACE OF CASUALTY	DATE OF CASUALTY	CASUALTY CODE
HAS BEEN MISSING IN ACTION	IN GERMANY SINCE	22 MAR 45	9

IF FURTHER DETAILS OR OTHER INFORMATION ARE RECEIVED YOU WILL BE PROMPTLY NOTIFIED

REMARKS:

☐ CORRECTED COPY

*Verified as per Sylvester B. 0-669702 per
Serial # 41443 and 201 file attached.
Hackett
Apr 45*

ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED ☒ FORM 43 ☒ AG 201 REQ. <i>5 Apr 45</i>							
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 <i>Heath 3 Apr 45</i> REVIEWED BY <i>B. 9 Apr 45</i>							

DISTRIBUTION "A" ☒ *34* COPIES
(ALL TYPES OF CASUALTIES PERTAINING TO MILITARY PERSONNEL, EXCEPT WOUNDED.)
COPIES FURNISHED: SEE CASUALTY BRANCH MEMORANDUM NO. 48, 1944.

DISTRIBUTION "B" ☐ *34* 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.



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

PUM/LC/bw
1 May 1947

IN REPLY REFER TO 476088

Mr. Ralph W. Goeke
1120 Washington Avenue
Greenville, Ohio

Dear Mr. Goeke:

Reference is made to your letter of 12 April 1946 in which you submitted copy of the Will of your brother, First Lieutenant Sylvester B. Goeke. Due to an oversight, it was retained at this Bureau.

This Will is inclosed.

Sincerely yours,

1 Incl
Will

P. U. MAXEY
Lt Col, QMC
Effects Quartermaster

473036

DSJ:FR:cms
April 23, 1946

cc
4
23

Dear Mr. and Mrs. Goeks:

Thank you for the information furnished the Army Effects Bureau in connection with personal effects belonging to your son, First Lieutenant Sylvester B. Goeks.

These effects are being forwarded to you in two cartons.

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 wish to express my sympathy in the loss of your son.

Sincerely yours,

D. S. JOENSTON
2nd Lt., QMC
Chief, Adm. Div.

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

Case No. 476,088 D

Date 17 April 1946

SUBJECT: Report of transactions in disposing of the effects of

Sylvester E. Goeke, O-669702 late a
(Name of deceased) (Army Serial Number)
First Lieutenant, Air Corps who died
(Grade) (Organization, Army or Service)
on the 22 day of Mar, 19 45, 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. none.)

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 none, Incl. none.)

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 16 April 1946, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application or affidavit of Lrs. Egn. J. Goeke 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,

Egn. J. Goeke of
(Name of person found entitled)
1120 Washington Avenue, Greenville State of
(Number, Street or Avenue) (City, Town or Village)
Chic, is the Father of the
(Relationship or Capacity)

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

(Signature of Summary Court Officer)

W. F. EHVAN, Major, GAC
(Name, Rank, Organization)
SUMMARY COURT MARTIAL

476
April 12, 1946
Greenville, Ohio

ARMY EFFECTS BUREAU
KANSAS CITY QUARTERMASTER DEPOT
1st. Lt. S. Johnston 2nd. Lt., QMD
Kansas City 1, Missouri

Dear Sir:

In reply to your letter of April 4, 1946.

1st. Lt. Sylvester R. Goeke was not married. All personal effects are to be forwarded to his mother, Mrs. Ben Goeke 1120 Washington Ave., Greenville, Ohio.

In your letter you stated that among the personal effects is a camera, apparently stained with blood. This camera could not possibly have been blood stained, from the information we have received from the War Dept., the wreckage of the plane was never found, therefore, any property of his was taken from his room and sent you by his squadron commander. Please include the camera with the personal effects at your earliest convenience.

Enclosed is copy of last will and testament.

Respectfully,

Ralph W. Goeke

Ralph W. Goeke
brother of deceased

*file
5-3-46*

AMOUNT OF CHECK	NOTE DISCREPANCY IN		INCLOSE	UABLES	RECIPIENT FROM
ACCOUNT NUMBER	NAME	SERIAL NUMBER	SHIP VALUABLES		CASUALTY REPORT
			VALUABLES SHIPPED BY (clerk)		INVENTORY
	RANK				FORM 20
1st Lt. Sylvester E. Goeke 0-669702 476,068 D Mr. Ben J. Goeke 1120 Washington Greenville, Ohio					LETTER
					NO. & TYPE OF CONTAINER
					ENVELOPE
					CARTONS
					PACKAGE
					FOOT LOCKER
					SPECIAL INSTRUCTIONS
					REMOVE GI
					SHIP BLOODSTAINED
					SHIP DAMAGED
REMOVE BL'DSTAINED					
REMOVE DAMAGED					
FILMS REMOVED					
DIARY REMOVED					
DATE OF FINDING		SUMMARY COURT DATA		DATE ACTION TAKEN	
APPLICANT				23 Apr 46	
REMARKS		1 - 476		MAIL REVIEWER (initials)	
				SHIPPED 2	
				FRANKED	
				EXPRESS	
				FREIGHT	
				DATE SHIPPED	
				MAY 1 1946	
				SHIPPING CLERK	
				ROUTING	
				ACCOUNTING BRANCH	
WAREHOUSE					
FILE					
ORDER FOR ACTION					

EFF OM FORM 14
10 OCT 1945

[illegible]