



**INDIVIDUAL DECEASED
PERSONNEL FILE**

2nd Lt James J. Hannon

my copy

Date 26 April 1949

TO: Mr. James E. Hannon
Waubun, Minnesota

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

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

Supt., Ft. Snelling Natl. Cem., Rt. # 3, Minneapolis 9, Minnesota.
Superintendent of Cemetery or Commanding Officer of Post

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

273 To be filled in by Superintendent or Commanding Officer

Name of Veteran Hannon, James J. O-755556

Rank, etc. 2nd Lt. Infantry Air Force

Grave or lot No. 13880, Block 24, Section "C"

Date of death _____

Date buried 26 April 1949

To be filled in by Next of Kin

State desired North Dakota

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

Date of birth February 28, 1921

Address of kin Mr. or Mrs. J.E. Hannon, Waubun, Minnesota

Signature James E. Hannon Date May 2, 1949

James E. Hannon

WESTERN
UNION

DAY LETTER
RECEIPT OF REMAINS

DELIVER AND REPORT
ANY CHARGES

AGR DIV., CHICAGO QM DEPOT
DISTRIBUTION CENTER 1810 N. PERSHING RD., CHICAGO 9, ILL. R. UTINE

DAY LETTER

REMAINS CONSIGNED TO:

SUPERINTENDENT
FORT SNELLING NATIONAL CEMETERY
FORT SNELLING, MINNESOTA

REMAINS OF THE LATE 2/LT JAMES J. HANNON, SN O-755556

BEING SHIPPED TO YOU ACCOMPANIED BY MILITARY ESCORT. ON TRAIN NUMBER
23 CB&Q RR.

DUE TO ARRIVE MINNEAPOLIS, MINN. MON. 25 APRIL 1949 AT 10:45 PM.

REFER TO CONTROL NUMBER NC-20273.

THOS. C. CALL
MAJOR, Q. M. C.
CHIEF, AGR DIV.

NAT
FILE
RECORDS ANNOTATED
DATE JUN 9 1949
NAME D A MATTEWS
AG. DIV.

I, the undersigned, do hereby acknowledge receipt of the remains of the above-named deceased
this 26 day of April, 1949

Stu To Herlong

Capt USAF
(Witness (Escort))

Thos C Call
(Consignee)

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED			
FROM US&C St Andre	TO Casketing Point B - St Laurent		
KIND OF CONVEYANCE Truck	NAME OF CONVOYER Pvt John J. Topali		
SIGNATURE OF SHIPPER R. C. Crisson, Maj Inf	DATE 2 Sep 48	SIGNATURE OF RECEIVER Robert B. Howard, 1 Lt Inf	DATE 2 Sep 48

2. SHIPPED			
FROM Casketing Point B - St Laurent	TO Port Unit Cherbourg		
KIND OF CONVEYANCE Truck	NAME OF CONVOYER		
SIGNATURE OF SHIPPER D. A. Mackenzie, Capt Inf	DATE	SIGNATURE OF RECEIVER <i>[Signature]</i> 1 Lt Fa	DATE

3. SHIPPED			
FROM Port Unit Cherbourg	TO NYPCF		
KIND OF CONVEYANCE USAT BARNEY KIRSCHBAUM	NAME OF CONVOYER JAMES S. JEFFERIES, MAJ. G.		
SIGNATURE OF SHIPPER John Palyok Jr, 1 Lt Fa	DATE	SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE 22/2/48

4. SHIPPED			
FROM	TO <i>[Signature]</i>		
KIND OF CONVEYANCE	NAME OF CONVOYER		
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE MAR 10 1949

5. SHIPPED TRANSPORTATION OFFICER			
FROM N Y P C F	TO N G O P		
KIND OF CONVEYANCE TRAIN	NAME OF CONVOYER		
SIGNATURE OF SHIPPER W. W. PREISCH LIEUT. COLONEL, TC	DATE MAR 11 1949	SIGNATURE OF RECEIVER <i>[Signature]</i> L. A. JOCKSTAPLE 700	DATE 3/15/49

6. SHIPPED			
FROM PORT TRANSPORTATION OFFICER	TO 1st Lt. JMC Chief, Operations Sq		
KIND OF CONVEYANCE	NAME OF CONVOYER		
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

7. SHIPPED			
FROM	TO		
KIND OF CONVEYANCE	NAME OF CONVOYER		
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

3572 00953

CASE NO	INSPECTION CHECK LIST				SPACE NO. 729-A
NAME OF DECEASED <i>(Last, First, Middle Initial)</i> HANNON, JAMES J.		BRANCH OF SERVICE AAF	RACE W	RELIGION C	SEX M
RANK OR GRADE 2 LT.	SERIAL NUMBER 0-755556	FORT SNELLING NATIONAL CEMETERY FORT SNELLING, MINNESOTA			
SHIPPING CASE—GENERAL APPEARANCE <i>(Check ONLY Discrepancies)</i>			CONDITION OF SHIPPING CASE <i>(Check One)</i> <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY		
FINISH <i>(Exterior)</i>			REMARKS		
FINISH <i>(Interior)</i>					
HANDLES					
HANDLE BOLTS					
STENCILING—NAME PLATE					
HEALTH PERMIT MARKER					
HEALTH PERMIT NUMBER					
CASKET—GENERAL APPEARANCE <i>(Check ONLY Discrepancies)</i>			CONDITION OF CASKET <i>(Check One)</i> <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY		
FINISH <i>(Exterior)</i>			REMARKS		
HANDLES AND FASTENINGS					
STENCILING—NAME PLATE					
CAM LOCKS <i>(Sealing)</i>					
ODOR OR MOISTURE					
ROUTED THROUGH					
<input type="checkbox"/> MORTUARY OPERATING ROOM			<input type="checkbox"/> REPAIR SHOP		
CONDITION OF REMAINS <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY			CASKET REPAIRED <input type="checkbox"/> YES <input type="checkbox"/> NO		
NECESSARY DISINFECTION <i>(Explain)</i>			CASKET EXCHANGED <input type="checkbox"/> YES <input type="checkbox"/> NO		
			SHIPPING CASE REPAIRED <input type="checkbox"/> YES <input type="checkbox"/> NO		
			SHIPPING CASE EXCHANGED <input type="checkbox"/> YES <input type="checkbox"/> NO		
			REMARKS		
TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTOR B.A.F.
REMARKS <div style="text-align:right; font-size: 2em;">027</div>					

WU A051 34 GOVT COLLECT

MINNEAPOLIS MINN MAR 29 1949 92A

CHICAGO QM DEPOT ATTN AMERICAN GRAVES REG SERV

FUNERAL SERVICES FOR 2ND LT JAMES J HANNON NC 20273
SCHEDULED FOR 1000 CST APRIL 26 REQUEST DELIVERY BEFORE
0700 CST ON THAT DATE AND ADVISE OF EXPECTED TIME AND
MEANS OF ARRIVAL

JOHN A BOENDER SUPERINTENDENT

1104A

2 20273 1000 26 0700

MAR 29 11 12 AM '49

RECEIVED
SIG. FR.

MESSAGEFORM		MESSAGE CENTER NO.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR "LYT																																		
LLS	STA. SER. NO.	PRECEDENCE	TRANSMISSION INSTRUCTIONS	ORIGINATOR	DATE TIME GROUP																																	
	NR	DAY LTR																																				
ACTION	INFORMATION		EXEMPT	OPERATING SIGNALS	GROUP COUNT																																	
SPACE ABOVE FOR SIGNAL CENTER ONLY																																						
FROM: AGR, CHICAGO QM DEPOT, 1819 W. PERSHING RD. CHICAGO 9, ILL.			SECURITY CLASSIFICATION																																			
ACTION TO:			PRECEDENCE FOR																																			
<ul style="list-style-type: none"> • SUPERINTENDENT • FORT SNELLING NATIONAL CEMETERY ROUTE 3 • MINNEAPOLIS 9, MINNESOTA 			ACTION INFORMATION																																			
INFORMATION TO			<input type="checkbox"/> ORIGINAL MESSAGE																																			
			REFERS TO ANOTHER MESSAGE IDENTIFICATION CLASSIFICATION																																			
<p>REMAINS OF THE FOLLOWING DECEASED ARE READY FOR DELIVERY TO YOUR NATIONAL CEMETERY:</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; border-bottom: 1px solid black;">NAME</th> <th style="text-align: center; border-bottom: 1px solid black;">RANK</th> <th style="text-align: center; border-bottom: 1px solid black;">CONTROL NO.</th> </tr> </thead> <tbody> <tr> <td>JIRIX, GEORGE R.</td> <td>PVT</td> <td>NC-10848</td> </tr> <tr> <td>SENEAR, ORVIS D.</td> <td>PFC</td> <td>NC-18158</td> </tr> <tr> <td>JULSON, HAROLD C.</td> <td>S/SGT</td> <td>NC-17748</td> </tr> <tr> <td>REISTER, HERBERT B.</td> <td>SGT</td> <td>NC-17748</td> </tr> <tr> <td>AMES, SHERMAN I.</td> <td>SGT</td> <td>NC-19138</td> </tr> <tr> <td>HANNON, JAMES J.</td> <td>2 LT</td> <td>NC-20273</td> </tr> <tr> <td colspan="3" style="text-align: center; padding: 5px;"> IN ADDITION TO NOK OF JAMES J HANNON 2 LT. NOTIFY MRS. HAROLD POLLOCK, 14 HARRISON AVE., ROCKVILLE CENTRE, LONG ISLAND, N.Y. </td> </tr> <tr> <td>BEER, HOWARD W.</td> <td>PVT</td> <td>NC-21498</td> </tr> <tr> <td>WARTHEN, BRUCE F.</td> <td>TEC 3</td> <td>NC-22717</td> </tr> <tr> <td>IVERSON, BYRIN ARCHIE</td> <td>PFC</td> <td>NC-23821</td> </tr> </tbody> </table> <p>REQUEST YOU ADVISE DESIRED DATE AND HOUR OF DELIVERY IN REPLY REFER TO CONTROL NUMBERS GIVEN ABOVE AND NAMES OF DECEASED.</p>						NAME	RANK	CONTROL NO.	JIRIX, GEORGE R.	PVT	NC-10848	SENEAR, ORVIS D.	PFC	NC-18158	JULSON, HAROLD C.	S/SGT	NC-17748	REISTER, HERBERT B.	SGT	NC-17748	AMES, SHERMAN I.	SGT	NC-19138	HANNON, JAMES J.	2 LT	NC-20273	IN ADDITION TO NOK OF JAMES J HANNON 2 LT. NOTIFY MRS. HAROLD POLLOCK, 14 HARRISON AVE., ROCKVILLE CENTRE, LONG ISLAND, N.Y.			BEER, HOWARD W.	PVT	NC-21498	WARTHEN, BRUCE F.	TEC 3	NC-22717	IVERSON, BYRIN ARCHIE	PFC	NC-23821
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SYMBOL	DATE-TIME GROUP	OFFICIAL TITLE		PAGE	OF																																	
DJH	23 MAR 1949	C. N. ORSHOLDER CAPT, QMC																																				

14 Harrison Ave.
Rockville Centre, L.I. New York
March 12, 1949

Commanding Officer
Distribution Center # 8
Chicago Quarter Master Depot
1819 West Pershing Road
Chicago 9, Illinois

Dear Sir:

The remains of my brother, Second Lt. James J. Hannon arrived in New York on Thursday on the Barney Kirschbaum. We have been advised that his body is now on the way to Chicago for re-shipment to Ft. Snelling, Minnesota for final burial. My husband was told we could request notification from your office as to its date of shipment on to Ft. Snelling.

Would you kindly wire me the approximate date Lt. Hannon's body will arrive at Ft. Snelling. Please do not confuse this as being the only notification which you should send. You should also notify the nearest of kin, his parents at Waubun, Minnesota.

My reason for asking this favor is that I wish to attend the burial services and it is necessary for me to have as much advance notice as possible. Thank you

Sincerely,

Mrs Hannel Palleck.

*Envelope tagged to
have report notified
described sister in
connection to 20K
7/29*

WU ~~4023~~ 23 COLLECT GOVT

WAUBUN MINN MAR 4 1949 430P

QUARTERMASTER DEPT AGRD

CONFIRMING ORIGINAL INSTRUCTIONS REGARDING INTERMENT
REMAINS THE LATE 2ND LT JAMES J HANNON IN FORT SNELLING
NATIONAL CEMENTARY CONTROL NO NC 20273

JAMES HANNON

2ND LT NO NC 20273

Mar 7 9 59 AM '49

AGR DIV., CHICAGO QUARTERMASTER DEPOT
1819 W. PERSHING RD., CHICAGO 9, ILL.

WESTERN UNION
DAY LETTER

DELIVER AND REPORT ANY CHARGES

MR. JAMES E. HANNON
WAUBUN, MINNESOTA

FILE

WE HAVE BEEN ADVISED THAT REMAINS OF THE LATE 2 LT JAMES J. HANNON
ARE ENROUTE TO THE UNITED STATES

OUR RECORDS INDICATE YOU WISH REMAINS INTERRED IN FORT SNELLING NATIONAL
CEMETERY, FORT SNELLING, MINNESOTA

PLEASE CONFIRM YOUR ORIGINAL INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS
WITHIN 48 HOURS BY TELEGRAM COLLECT TO CHICAGO QUARTERMASTER DEPOT AGRD 1819 WEST
PERSHING ROAD CHICAGO ILLINOIS, INCLUDING FULL NAME OF DECEASED AND YOUR CORRECT
ADDRESS. YOUR REQUEST FOR CHANGE IN DELIVERY INSTRUCTIONS AFTER 48 HOURS HAVE
ELAPSED CANNOT BE COMPLIED WITH AT GOVERNMENT EXPENSE. FINAL INTERMENT WILL BE
MADE AS SOON AS PRACTICABLE AFTER RECEIVED HOWEVER MANY FACTORS BEYOND OUR CONTROL
MAY DELAY DELIVERY OF REMAINS TO NATIONAL CEMETERY FOR SEVERAL WEEKS. NATIONAL
CEMETERY SUPERINTENDENT WILL NOTIFY YOU BY TELEGRAM OF DATE AND HOUR FUNERAL
SERVICES WILL BE HELD IN SUFFICIENT TIME TO PERMIT YOUR ATTENDANCE AT YOUR OWN
EXPENSE. APPROPRIATE JOINT MILITARY AND RELIGIOUS SERVICES WILL BE PROVIDED AT
GRAVESIDE BY VETERANS ORGANIZATIONS OR MILITARY OR NAVAL PERSONNEL. REMAINS WILL
BE ACCOMPANIED BY MILITARY ESCORT. INTERMENT EXPENSE ALLOWANCE OF \$75.00 IS NOT
AUTHORIZED IN ANY CASE WHERE BURIAL IS MADE IN A NATIONAL CEMETERY.
IN REPLY REFER TO CONTROL NO. NC-20273

THOS. G. CALL
MAJ. QMC

C. M. ODENWALDER
CAPT. QMC

RRE Form #39
13 Jul 43

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

HANNON	JAMES	J	2 LT	0 - 755556
(Last Name)	(First Name)	(Initial)	(Rank)	(ASF)

22 FEB. 1943

Repatriated to the United States: _____

SEARCH FILE

Incl #

14. Action taken: Remains disinterred 29 June 1945 and taken to US Mil Cem.,
St. Andre de l'Eure, France.

Disinterment approved by OCOM ORDER NO. Seine 1248

Disinterment made by Det "A" 4th Plat. 3049 QM Gr Reg Co

~~XXXXX~~/Reburial made by: 605th QM Graves Reg. Co.

Date of ~~XXXXX~~/reburial: 12 July 1945

Place of ~~XXXXX~~/reburial U. S. Military Cemetery: _____

St. Andre Military Cemetery

Plot H Row 1 Grave 1

Robert T. Huff

ROBERT T. HUFF
Signature of Investigator

2nd Lt., OMC O-1596057
Rank, ASN

*Cross out where not applicable

Listed on OCOM ORDER as T-1211.

Q-CRS, MIS
Form # 304HEADQUARTERS
NORMANDY EAST DISTRICT
COMMUNICATIONS ZONE
EUROPEAN THEATER OF OPERATIONS
AFC 562, U. S. ARMY
Office of the QuartermasterREPORT OF INVESTIGATION OF ISOLATED GRAVEOR
UNBURIED REMAINSDate 6 July 1945*U.S. ~~Allyed Army~~

1. Name, Rank, ASN of deceased: HANNON, James J. O-755556
2. Organization of deceased: Unknown
3. Means of identification: Identification tags.
4. Cause of death: Killed in plane crash. 5. Date of death: Unavailable.
6. If isolated grave:
 - a. Date of burial: 16 March 1944 b. By whom buried: Civilians of Abbeville.
 - c. Inscription on marker: No marker.
7. Location of grave/~~unburied remains~~: Civilian Cem., British Sec. Abbeville, France, M 78-85 Sh 4 2nd Ed. 12250,000 Gr. No. J-3.
(Be specific, sketch on reverse)
8. Names of deceased and location of other *graves/~~unburied remains~~ in immediate vicinity: All US Deceased have been disinterred from this cemetery. A total of sixty-eight (68) bodies evacuated to US Mil Cem., and reports submitted.
9. Description and location of wrecked or abandoned vehicles or equipment in immediate vicinity: Unavailable.
10. Disposition of personal effects: (Itemize if possible) None.
11. Other pertinent information: Inf. on Ident. tags: HANNON, James J. O-755556; T-43; Blood Type "C"; Religion "C".
(Use reverse side if necessary)
12. Information furnished by: M. Riquier
(Name, title, address) Caretaker of Civilian Cem.
Abbeville (Somme) France.
13. Names and addresses of other persons familiar with the case: None.

(over)

Fliegerkorstkom. dantur (S) 16/VI
(Absendende Dienststelle, ausgeschrieben)

O. U., den 18.2.1944

Feldp.-Nr. L 35370 - Lsga. Brüssel
(Feldpost-Nr.) (Luftgaspostamt)

923c

Grabmeldung

An den Wehrmacht-Gräberoffizier

s. Verteiler

unbekannt unknown

(Truppenteil, ausgeschrieben)

Hannon

(Familienname)

James J.

(Vorname)

Dienstgrad unbekannt unknown

Geburtsort unbekannt Unknown

Geburtsort unbekannt unknown

Todestag 15.3.1944

Todesort St. ven, 20 km nw. Amiens

Erkennungsmarke 0 - 755556
(Nr.)

James J. Hannon
0 - 755556 (Beschriftung) 43 0

Anschrift des nächsten Angehörigen unbekannt

unknown

Verwandtschaftsverhältnis ./ M. S. mil. Cem.

Vermerke über den Gefallenen:

Reburial 12. July '45. St Andre

a) Todesursache Flugzeugabsturz plane crash Plot H. Rowe. Sp.

b) Gefallen oder gestorben : gefallen killed

c) Bei Selbstmord Angabe ob mit oder ohne milit. Ehren beigesetzt : ./

Abbeville

(Begräbnisort)

Somme

(Département)

(Arrondissement)

Abbeville

(Commune = Gemeinde) usw.

Gemeindefriedhof, Ehrenfriedhof oder Feldgrab: engl. Wolt. Riegs Ehrenfriedhof
Abbeville/Somme

Einzelgrab od. Kameradengrab Nr. J 5 Brit mil. cem. from World War I

Skizze oder Vermerke über die Grabstätte befinden sich auf der Rückseite oder als Anlage.

(Zutreffendes ist zu unterstreichen.)

- Verteiler: 1 F. J. G. A. B. 3. / N. 11b VB
- 1 Kreiskommandantur 626
- 1 Stabschef W/W
- Hauptmann Songe
- Antwari

Hauptmann u. Kommandant

(Dienstgrad u. Dienststellung)

16.5.45
M.

29. Respiratory system Normal
30. X-ray of chest¹ Negative
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 Negative Wassermann¹ ---
 Urinalysis: Reaction Acid Sp. gr. 1.019 Albumin None Sugar None Microscopical Neg.
36. Estimated adaptability for military aeronautics (if unsatisfactory, state reasons) Satisfactory
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? No If yes, give date ---
 If no, is waiver recommended? No Is request for waiver attached? No
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? Yes Do you recommend acceptance with minor physical defects? --- If rejection is recommended, specify cause ---

AAB, Sioux City, Iowa 11/8/43
 (Place) (Date)

ERRCILL P. PALMER MEDICAL Corp
 (Name and grade) CAPTAIN (AME)

REVIEWED AND APPROVED:

JOSEPH E. BALDWIN MEDICAL Corp
 (Name and grade) CAPTAIN (AME)

HERMAN J. SCHROEDER Medical Corps.
 (Name and grade) MAJCR

GERARD A. VETTER MEDICAL Corp
 (Name and grade) 1st Lt. (AME)
 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.

PHYSICAL EXAMINATION FOR FLYING

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

1. HANNON JAMES J. 2nd Lt AC 0-755556 22 1
(Last name) (First name) (Middle initial) (Grade and arm or service) (Serial No.) (Age) (Years service)

2. AAB, Sioux City, Iowa Flying Status 8/1/43 Qualified
(Address) (Purpose of examination)¹ (Date and result last examination)

Pilot Flying time as: Pilot 222; observer ---; pilot 222; observer ---
(Aeronautical ratings) (Total) (Total) (Last 6 mos.) (Last 6 mos.)

3. Temperature 98.6 Vaccinations: Typhoid series, No. 1 Last 12/42; smallpox 11/42; reaction Imm.
(Date)

4. Medical history.

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

Usual childhood diseases, no sequelae.

Fractured Rt. humerus 1926, no sequelae.

TBA 1942, no sequelae.

Pneumonia 1943, no sequelae.

Denies all else.

5. Eye: Inspection Normal Nystagmus None

6. Associated parallel movements Normal Pupils: Equality Equal Reaction Normal

7. Visual acuity: R. E., 20/ 20, correctible to 20/ --- L. E., 20/ 20, correctible to 20/ ---

8. Depth perception (uncorrected) 3 mm. With correction --- mm

9. Heterophoria at 6 meters: Eso 0 Exo 0 R. H. 0 L. H. 0 Prism divergence 5

10. Red lens test Normal Angle convergence: PcB 58 mm. Pd 57 mm. --- °

11. Accommodation: R. 10 D. L. 10 D. Addition required for 50 cm. R. --- L. ---
 (Jaeger type): Right J. 1-13, correctible to J. ---; Left J. 1-13, correctible to J. ---

12. Color vision Normal to ACC

13. Field of vision (form): R. Normal L. Normal Ophthalmoscopic: R. Normal L. Normal

14. Refraction: R. reads 20/20 with --- S. --- CAx --- ° L. reads 20/20 with --- S. --- CAx --- °

15. Ear: History of ear trouble Denies

16. External ear: R. Normal L. Normal Membrana tympani: R. Normal L. Normal

17. Hearing (whisper): R. 20 /20. L. 20 /20. Audiometer (percent loss): R. --- L. ---

18. Nares Normal Tonsils Eucleated

19. Teeth:

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

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

(b) Remarks, including other defects None

(c) Prosthetic appliances None (d) Classification IV

20. History of swing, train, air, or sea sickness Denies

21. Barany chair (when indicated with results) Not done

22. Posture Good Figure Medium Frame Medium
(Excellent, good, fair, bad) (Slender, medium, stocky, obese) (Light, medium, heavy)

23. Height, 71 inches. Weight, 152 pounds. Chest: Inspiration 38 Expiration 34 Rest 35 Abd 28 1/2

24. Skin and lymphatics Normal Endocrine system Normal

25. Bones, joints, muscles Normal Feet Normal

26. Heart Normal

27. Pulse rate, 86 B.P.:S. 122 D. 64 Schneider Not done Pulse immediately after exercise ---
 Two minutes after exercise 86 Character Normal

28. Arteries Normal Varicose veins None

SURGEON'S FILE

AFTAS

JAN 27 1944

Capt. J. W. Moses

Identification

¹ Semiannual appointment as cadet, commission in the Air Corps, commission in Air Corps Reserve, transfer to the Air Corps, or any other special promotion.

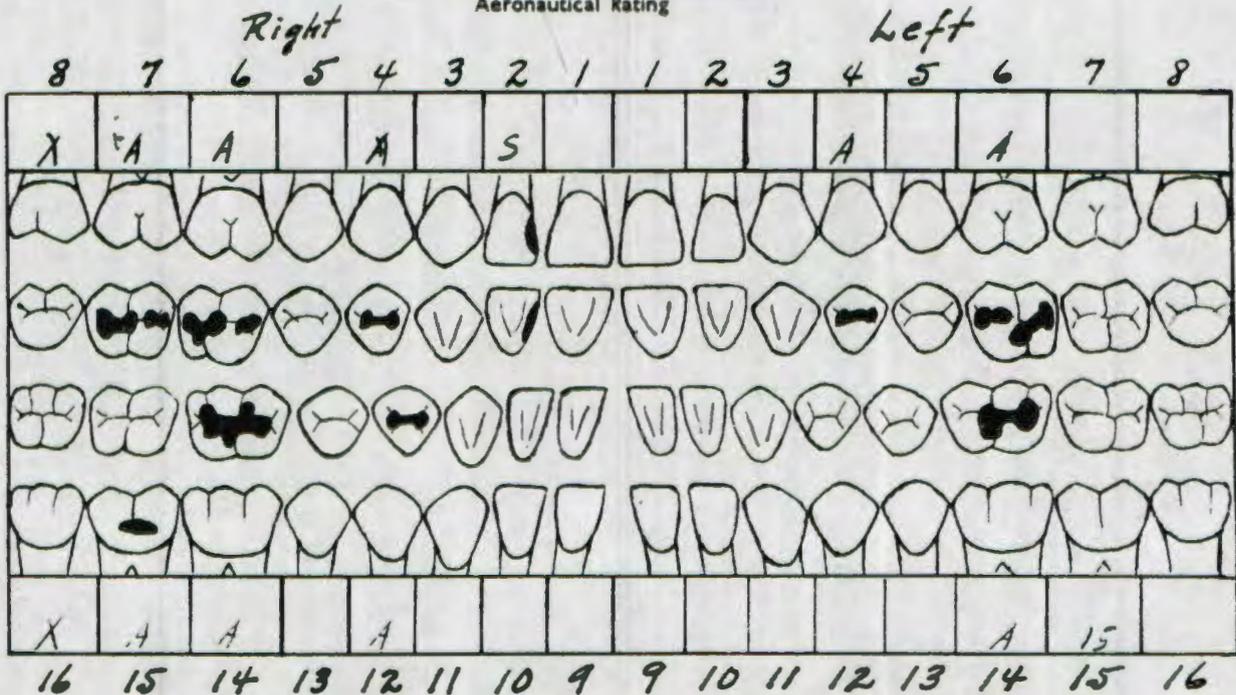
Classification Canceled
changed to

FLYING PERSONNEL DENTAL IDENTIFICATION FORM
Office of the Dental Surgeon 13 MAY 1944

Signature R. C. Furd
Station Lt Col, D.C.

Name James J. [unclear] Rank 22 1 1/12 ASN 56
Organization _____ Age _____ Service _____ Date 13 May 1944

Co-pilot
Aeronautical Rating



CLASS IV

OCCUSION NO CALCULUS N PERIODONTOCLASIA N FOCI SUSPECTED NO
ANOMALIES, OTHER CONDITIONS, REMARKS: ... partially impacted

SURGEON'S FILE
AETAS MAY 16 1944

OUTLINE CARIES ON DIAGRAM OF TEETH
CHART FILLINGS ON TEETH, INITIAL THE TYPE IN SPACE ABOVE AND BELOW
AS G-gold, A-amalgam, S-synthetic, O-oxxyphosphate

CHART ALL SUBSEQUENT FILLINGS
NONRESTORABLE CARIOUS TEETH BY /
MISSING NATURAL TEETH BY X
TEETH REPLACED BY DENTURE



TEETH REPLACED BY FIXED BRIDGE



APPROVED _____
Station Dental Surgeon

Classification Canceled or changed to _____
or by the Air Surgeon.
Edward Beecher
Examining Dental Officer
APR 20 1944
G. W. Rogers
Capt. DMC
Identification Area
REPRODUCTION PLATON, 501 of ENGINEER AF HQ 00

PART I (Continued)

If on Page 1 of this form you have selected Option Number 2 or 3, or Option Number 4 with your own funeral ceremonies desired at a location other than the selected national cemetery, complete one of these sections.
 I, AS THE NEXT OF KIN, DO FURTHER DECLARE THAT I DESIRE THE REMAINS TO BE SENT TO THE FOLLOWING PERSON WHO HAS AGREED TO RECEIVE THEM:

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

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

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

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

LAST NAME	FIRST NAME	MIDDLE INITIAL	RELATIONSHIP TO DECEASED
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
HANNON	ANNA	M.	MOTHER
	WAUBUN		MINN.

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.

James E. Hannon (SIGNATURE OF NEXT OF KIN) _____ (STREET AND NUMBER)
JAMES E. HANNON (NAME PRINTED OR TYPED) _____ WAUBUN, MINN. (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 2 day of Oct, 1947, at city (or town) of Waubun, county of Mahnomen, and State (or Territory or District) of Minnesota

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

Jes. C. Hemmelgarn
 (SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)
LEO C. HEMMELGARN
 Notary Public, Mahnomen County, Minn.
 My Commission Expires Oct. 7, 1950

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

2nd Lt. James J. Hannon, O 755 556
 Plot H, Row 1, Grave 1,
 United States Military Cemetery
 St. Andre, France

18 September 1947

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

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

PART I

I, JAMES E. HANNON

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

(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

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

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

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

(NAME AND LOCATION OF CEMETERY)

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

(FOREIGN COUNTRY)

(LOCATION OF CEMETERY SELECTED)

- 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT FORT SNELLING, MINN.

(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

*coded 10/15/48
 Blue hanner*

*DD Form
 11-17-48*

18 September 1947

2nd Lt. James J. Duncan, O 755 996
Plot K, Row 1, Grave 1,
United States Military Cemetery
St. Andre, France

Mr. James E. Duncan
Box #8
Verden, Minnesota

Dear Mr. Duncan:

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 90 days after its receipt by you? Its prompt return will avoid unnecessary delays.

Sincerely,

THOMAS B. LARSON
Major General
The Quartermaster General

SEP 23 11 15
O. O. M. G.
MAIL & RECORDS BK

PART II—RELINQUISHMENT OF DISPOSITION AUTHORITY

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

I, THE widow 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 <u>HANNON</u>	FIRST NAME <u>JAMES E</u>	MIDDLE INITIAL <u>E.</u>
RELATIONSHIP TO THE DECEASED <u>FATHER</u>		
NUMBER AND STREET <u>Box #8</u>	CITY OR TOWN <u>WAUBUN</u>	STATE OR COUNTRY <u>MINNESOTA</u>

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

<u>Gladys Hannon Lapshire</u> <small>(SIGNATURE OF NEXT OF KIN)</small>	<u>August 1, 1947</u> <small>(DATE)</small>
<u>Lopshire, Gladys Hannon</u> <small>(NAME PRINTED OR TYPED)</small>	<u>1325 West 25 1/2 Street</u> <small>(STREET AND NUMBER)</small>
	<u>Minneapolis, Minn.</u> <small>(CITY AND STATE)</small>

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

<hr/>	<hr/>
<small>(SIGNATURE)</small>	<small>(DATE)</small>
<hr/>	<hr/>
<small>(NAME PRINTED OR TYPED)</small>	<small>(STREET AND NUMBER)</small>
<hr/>	<hr/>
<small>(NAME PRINTED OR TYPED)</small>	<small>(CITY AND STATE)</small>

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

797
 2nd Lt. James J. Harmon, O 755 556
 Plot H, Row 1, Grave 1,
 United States Military Cemetery
 St. Andre, France

19 June 1947

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

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

PART I

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

- | | | | |
|---|----------------------------------|--|---|
| <input type="checkbox"/> WIDOW | <input type="checkbox"/> WIDOWER | <input type="checkbox"/> SON OVER 21 YEARS OLD | <input type="checkbox"/> DAUGHTER OVER 21 YEARS OLD |
| <input type="checkbox"/> FATHER | <input type="checkbox"/> MOTHER | <input type="checkbox"/> BROTHER OVER 21 YEARS OLD | <input type="checkbox"/> SISTER OVER 21 YEARS OLD |
| <input type="checkbox"/> RELATIONSHIP OTHER THAN ABOVE <i>(Specify)</i> _____ | | | |

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

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

(NAME AND LOCATION OF CEMETERY)

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

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

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

FILE
22 SEP 1947

L.O.I. SENT 13 JUL 1947

2nd Lt. James J. Hannan, O 795 596
Plot II, Row 1, Grave 1,
United States Military Cemetery
St. Andre, France

19 June 1947

Mrs. Gladys L. Hannan
2730 Portland Street
Minneapolis, Minnesota

Dear Mrs. Hannan:

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.

With 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! The prompt return will avoid unnecessary delays.

Sincerely,

THOMAS B. LARSEN
Major General
The Quartermaster General

Encs.

reg

- L.O.L. SENT 15 JUN 1947

QMCAR 293
Hannon, James J.
A. S. N. 0 755 556

5 May 1947

Mrs. Gladys L. Hannon
2730 Portland Street
Minneapolis, Minnesota

Dear Mrs. Hannon:

Inclosed herewith is a picture of the United States Military Cemetery St. Andre, France, in which your husband, the late Second Lieutenant James J. Hannon, is buried.

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

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

Sincerely yours,

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

May 6 1947
1 Incl
Photograph

PAJ

7M-5

AIR MAIL

QMGR 314.6
Graves Registration
(European, U. S. Misc.)

16 ADD 1067

SUBJECT: Burial Records

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

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

<u>NAME</u>	<u>RANK</u> <u>GRADE</u>	<u>SERIAL NO.</u>	<u>PLOT</u>	<u>ROW</u>	<u>GRAVE</u>	<u>ORGAN</u> <u>&</u>	<u>DATE OF</u> <u>DEATH</u>
Gallagher, Elmer D.	Pvt	35 056 957	H	14	34		<u>21 Aug 44</u>
Garris, Joseph P.	<u>WOJG</u>	W 2126564	C	2	37		
Gastwirth, Milton	2/Lt	O 706 730	B	4	66		<u>8 Jul 44</u>
Hanley, Thomas J.	Pvt	31 390 775	A	5	83	<u>Co G 119 Inf</u> <u>Regt 30 Inf Div</u>	<u>28 Aug 44</u>
Hannah, Charles V.	Sgt	38 131 737	G	4	65	<u>547 Bomb Sq</u> <u>384 Bomb Gp</u>	<u>7 Jan 44</u>
Hannon, James J.	<u>2/Lt</u>	O 755 556	H	1	1	<u>513 Bomb Sq</u> <u>401 Bomb Gp</u>	<u>13 Mar 44</u>
Hardage, Hulen M.	1/Lt	O 404 147	A	9	165	<u>Co M 117 Inf</u> <u>Regt 30 Inf Div</u>	<u>22 Aug 44</u>

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

FOR THE QUARTERMASTER GENERAL:

mmb

MARTIN G. RILEY
Major, QMG
Memorial Division

KK

AIR MAIL

2 P.C.
A/FPA-8

Capt. Fogle
A/FPA-8/JMF/kcb/77273
Rm 4306 3/27/46

AAF ~~3185~~ (3185) Hannon, James J.
(EU 1200) O-755556
(AV 729/44)

APR 1 1946

Mrs. James J. Hannon
2730 Portland Street
Minneapolis, Minnesota

Dear Mrs. Hannon:

I am writing to you in reference to your husband 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 James J. Hannon, these records indicate that he was killed 13 March 1944, when the B-17 on which he was aboard sustained damage from enemy antiaircraft fire and crashed twelve miles north of Amiens, France. The records further state that the body was interred 18 March 1944 in the English Honor Cemetery of Abbeville, France, grave JS.

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 husband'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 husband's valuable contribution to our cause sustain you in your bereavement.

Very sincerely,

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

Filed
4/11/46
AJD

SPQYG 293
Hannon, James J. *en*

5 April 1946

Mrs. Gladys L. Hannon
2730 Portland Street
Minneapolis, Minnesota

Dear Mrs. Hannon:

The War Department is most desirous that you be furnished the burial location of your husband, the late Second Lieutenant James J. Hannon, A.S.N. O 755 556.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery, St. Andre-De-Eure, France, plot H, row 1, grave 1.

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

It is anticipated that, in the near future, the War Department will receive authority to return the remains of your husband, at Government expense, to the final resting place which you select. When the necessary arrangements have been completed, this office will, without any action on your part, give you full information and solicit your detailed desires.

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

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

Maw

3 5 4617H

COUS

kmd
HK

STATEMENT ON CAPTURE OR RECOVERY OF MEMBERS OF ENEMY AIR FORCES

REPORT IS MADE THROUGH:

DISTRIBUTOR:

Dulag Luft Oberursel

OFFICE OR STATION: Airfield Headquarters (E)16/VI

Army Postal unit L 35 370, Air distr. Post Off. Brussels

LOCATION: ~~Abbeville~~-Ducht, Date: 15.3.44.

OFFICE OR APPRAISAL-VALUES:

REGARDING: ~~DOWNED~~ Boeing Fortres
EMERGENCY LANDINGS) B 17 - F
CRASH) DATE AND TIME:

AT: St. Quen NEAR: 20 kms northwest of Amiens.

PERSONAL RECORD OF MEMBERS OF ENEMY AIR FORCES

FAMILY NAME: SURNAME) Hannon
LAST NAME)

FIRST NAME: CHRISTIAN NAME) James G.
GIVEN NAME)

RANK:

IDENTIFICATION NUMBER: SERIAL 0 - 755 556
SERVICE

NATIONALITY: U.S. Air Corps

STATEMENTS MADE AT TIME OF CAPTURE:

STATEMENT MADE AT RECOVERY OF DEAD: 13.3.44

DATE OF CAPTURE:

DATE & TIME & PLACE OF RECOVERY: St. Quen

EXACT LOCATION OF CAPTURE:

CONDITION OF BODY:

CAPTURE EFFECTED BY:

Mutilated

THE PRISONER WORE (UNIFORM)

None

DESCRIPTION OF IDENTIFICATION TAG: as below

HOW WERE PERSONAL RECORDS OF DEAD ASCERTAINED? By identification tag

DATE AND TIME OF BURIAL: 18th of March, 1944

GRAVE LOCATION: Single grave J 5

POSSIBLE IMPUTATION (PLACING) UNDER SERVICE OF THE G.F.P. OR S.D., FOR PURPOSE OF ASCERTAINING ENEMY PATRONAGE OR FAVOR:

English World War Honor Cemetery, Abbeville/Somme

Imprint on identification Tag:

DELIVERED TO HOSPITAL:

James Hannon

DATE:

0 - 755 556 - 0

DATE AND TIME OF TRANSPORTATION TO PRISONER CONCENTRATION POINT:

REMARKS:

(ATTEMPTED ESCAPE. PECULIARITIES IN BEHAVIOR OF PRISONER, ETC.)

INVENTORY OF SECURED, PERSONAL EFFECTS OF PRISONER OR DEAD:

INVENTORY OF PERSONAL EFFECTS AND EQUIPMENT OF PRISONER OR DEAD:

c.f. special list.

File 5 Feb 46

143 Harrison, James J.
La

0-755354

St. Andre

France

The Bureau of the Post Office and Insular Affairs, Department of the Interior, Washington, D. C.

#1

DEC 5 1945

P.O.C.

SUPPLEMENTAL

OQMG FORM 302a
1 Dec. 1944

BURIAL INFORMATION REPORTED BY THE ENEMY

THROUGH INTERNATIONAL COMMITTEE RED CROSS, GENEVA, SWITZERLAND

243
NAME (Last First Middle) **HANNON, James** RANK **Airman** ORGANIZATION **O-755556**
Air Corps (Machine, type unknown)

DATE OF BIRTH _____ PLACE _____

EMERGENCY ADDRESSEE _____

DATE OF DEATH **13 March 1944** PLACE **KIA**

PLACE OF BURIAL **English World War I Honor or Military Cemetery, Abbeville/**
Some, France ROW NUMBER _____ GRAVE NUMBER **E. No. J5**
Sierra

TYPE OF BURIAL SINGLE COMRADE DATE OF BURIAL _____ DATE OF REBURIAL **(Grand)**

OTHER MEMBERS OF CREW OF **Machine, type unknown**

NAME	RANK	NAME	RANK
1. UNKNOWN		6.	
2. BRANDT, Gordon		7.	
3. ALLEN, P. G.		8.	
4. WAGNER, Robert		9.	
5.		10.	

PERSONAL EFFECTS _____

SOURCE OF INFORMATION: GERMAN LIST OF AMERICAN CASUALTIES NO. **26/113**

RUS NUMBER **5322** DATED **27 May 1944** PLACE **Sealfeld/Saale, Germany**

STAMP: INFORMATION CENTER FOR PRISONERS OF WAR AND CASUALTIES DATE **27 May 1944**

REMARKS

File

*File
2 all
375-45
H*

*File
4-15-45
Mike
25-10587-24*

5327

Cas list 26

ENEMY CASUALTY FORM

- 1. CURRENT NO. *Current no. 113*
- 2. COUNTRY (NATIONALITY) *I. I. I.*
- 3. NAME *Harrison, J. S.*
- 4. DATE OF BIRTH
- 5. NAME OF FATHER
- 6. MAIDEN NAME OF MOTHER
- 7. ADDRESS OF PARENTS
- 8. NAME AND ADDRESS OF NEXT OF KIN *Mrs. [unclear]*
- 9. RANK *Serjeant*
- 10. UNIT (TROOP DIVISION) *Machine type unknown*
- 11. DATE AND PLACE OF CAPTURE... *Shot down*
March 13, 1945
- 12. WOUNDS AND INJURIES
- 13. DATE AND PLACE OF BURIAL *English World War*
Honor of Military Cemetery
- 14. REGISTER NO. *0-755-550*
- 15. REMARKS *With [unclear] France*
Unknown
Regiment, Gordon
Machine
Type unknown

made
3-15-45
JH

G R
OQMG FORM NO. 302
17 June 1944
273

BURIAL INFORMATION

EUS 4942 KU 120

NAME HANNON, J. J. ~~.....~~ ASN. 0-755.556.....

RANK 2nd Lt...... ORGANIZATION Air Corps (Fortress).....

EMERGENCY ADDRESSEE.....

DATE OF DEATH 13 March 1944..... PLACE.....

PLACE OF BURIAL The English Military Cemetery Abbeville Somme, France Grave E,
No. 35.....

DATE OF BURIAL 18 March 1944..... DATE OF REBURIAL.....

PERSONAL EFFECTS.....

REMARKS The Minister of Aviation and Chief-in-command of the Air Forces...

Air Force Personnel Bureau As Verl. 25 No. 672/44 (A) 3 D.....

(In reply please refer to above file number, giving date and contents in brief)

Berl. W. 8.26 April 1944. 7 Leipzig St. Tel. Adr. Reichsluft, Berlin.....

Tel. Local: 520024, 218241, 120047 Long Dist. 218011 Ext 1193.....

(Stamp) O.K.W. Chief of the Prisoners of War, May 4, 1944. No 1 General V

RE: Personnel of American Air Force.....

TO: High Command of the Armed Forces Section of Prisoners of War General V

TOBGAU.....

Source of Burial Information: German Official List of American Dead No. 26/2

Dated May 27, 1944 Saalfeld/Saale Germany.....

(STAMP) Information Center for Casualties and Prisoners of War.....

Handwritten mark resembling a checkmark or signature.

14. Action taken: Remains disinterred 29 June 1945 and taken to US Mil Cem.,

St. Andre de l'Eure, France.

Disinterment approved by CCQM ORDER NO. Somme 1248

Disinterment made by Det "A" 4th Plat. 3049 QM Gr Reg Co

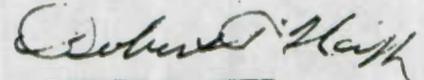
*~~Reburial~~ Reburial made by: 605th QM Graves Reg. Co.

Date of *~~reburial~~ reburial: 12 July 1945

Place of *~~reburial~~ reburial U. S. Military Cemetery: _____

St. Andre Military Cemetery

Flet H Row 1 Grave 1



ROBERT T. HUFF

Signature of Investigator

2nd Lt., QMC 0-1596057

Rank, ASN

*Cross out where not applicable

Listed on CCQM ORDER as T-1211.

Q-CRS, NLS
Form # 304

HEADQUARTERS
NORMANDY EAST DISTRICT
COMMUNICATIONS ZONE
EUROPEAN THEATER OF OPERATIONS
AFC 562, U. S. ARMY
Office of the Quartermaster

REPORT OF INVESTIGATION OF ISOLATED GRAVE
OR
UNIDENTIFIED REMAINS

Date 6 July 1945

*U.S. ~~Identification~~

1. Name, Rank, ASN of deceased: ²⁴³ HANNON, James J. C-755556
2. Organization of deceased: Unknown
3. Means of identification: Identification tags.
4. Cause of death: Killed in plane crash. 5. Date of death: Unavailable.
6. If isolated grave:
 - a. Date of burial: 16 March 1944 b. By whom buried: Civilians of Abbeville.
 - c. Inscription on marker: No marker.
7. Location of grave: ~~unknown location~~ Civilian Cem., British Sec. Abbeville,
(Be specific, sketch on reverse)
France. M 78-85 Sh 4 2nd Ed. 16250.000 Gr. No. J-3.
8. Names of deceased and location of other *graves/~~unburied remains~~ in immediate vicinity: All US Deceased have been disinterred from this cemetery. A total of sixty-eight (68) bodies evacuated to US Mil Cem., and reports submitted.
9. Description and location of wrecked or abandoned vehicles or equipment in immediate vicinity: Unavailable.
10. Disposition of personal effects: (Itemize if possible) None.
11. Other pertinent information: Inf. on Ident. tags: HANNON, James J. C-755556;
(Use reverse side if necessary) T-43; Blood Type "O"; Religion "C".
12. Information furnished by: M. Riquier
(Name, title, address) Caretaker of Civilian Cem.
Abbeville (Somme) France.
13. Names and addresses of other persons familiar with the case: None

FILE
JAN 22 1948
fm

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

Somme # 1248

REPORT OF BURIAL

12 July 1945

REBURIAL AMERICAN

TM 10-630 AND AR 30-1815

Hannon

James

J.

Unk ^{2nd Lt.}

0-755556

Unit	401 Bmb Gp. H. Unk	Rank	Unk	Serial No.	0-755556
Organization	613 Bomb Sq.	<input checked="" type="checkbox"/>			
Place of Death	Abbeville, France	Date of Death	o/a 13 March 1944	Cause of Death Plane Crash	
Time and Date of Burial	1630 12 July 1945	Name of Cemetery	St. Andre Military Cemetery	Name or Coordinates of Location VR 270560	
Grave Number	1	Row Number	1	Plot Number	H
Type of Marker			Wooden Cross		

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

If No Identification Tags

How were remains identified?

What means of identification were buried with the body?

One Embossed tag on Cross

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

Who is buried on:

Deceased's Right: Ross, Harry 35681877 S/Sgt. 359 Sq. 393 Bb. Gp. 2

Deceased's Left: Beginning of row

Signature of Name, Rank and if possible the organization of person furnishing above. Date when other than officer reporting burial.



Emergency Addressee Unk Name _____

Unk Address _____

Religion C

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

None

REBURIAL

Gr J-3, Civ. Cem British Sect. Abbeville, France

Signature of Officer or other person reporting burial
WILLIAM C. BAREFIELD,
Capt., QMC

Verified by G.R.S. Officer

605th QM Graves Reg. Co.

T 1211

433

JAN 30 1945

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE hk/mbb 4635

WASHINGTON 25, D. C.

REPORT OF DEATH

DATE 22 May 1944

243

FULL NAME HANNON JAMES J				ARMY SERIAL NUMBER 0-755 556		GRADE 2nd Lt							
HOME ADDRESS Callaway, Minnesota				ARM OR SERVICE Air corps		DATE OF BIRTH 28 Feb 1921							
PLACE OF DEATH European Area			CAUSE OF DEATH Killed in action			DATE OF DEATH 13 Mar 1944							
STATION OF DECEASED European Area				DATE OF ENTRY ON CURRENT ACTIVE SERVICE 1 Oct 43		LENGTH OF SERVICE FOR PAY PURPOSES							
						YEARS	MONTHS	DAYS					
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Gladys L. Hannon (wife) 2730 Portland St., Minneapolis, Minn.													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Gladys L. Hannon (wife) 2730 Portland St., Minneapolis, Minn. Anna Marie Hannon (mother) Callaway, Minnesota James Emmett Hannon (father) Callaway, Minn.													
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
	X	X		X		X				X			

ADDITIONAL DATA AND/OR STATEMENT

The individual named on this report is shown on the Records of the War Department to have been absent in a missing in action status on and subsequent to 13 March 1944 and until such absence was terminated by the Receipt in the War Department of evidence of death transmitted by the German Government through the International Red Cross, date of said termination being 15 May 1944

Battle

MAY 23 5 24 PM '44
 MEMORIAL DIVISION

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

ADJUTANT GENERAL

COPIES FURNISHED:		
S. G. O.	F. B. I.	F. O., U. S. A., WASH., D. C.
G. A. O.	VET. ADMIN.	ARMY EFFECTS BUREAU
G. W. G.	OFF. FIS. DIR.	

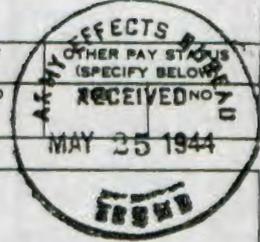
WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE
WASHINGTON 25, D. C.

AK/Abb 4635

REPORT OF DEATH

DATE 22 May 1944 ¹²³¹³⁰⁹

NAME HANNON JAMES J		ARMY SERIAL NUMBER 0-755 556	GRADE 2nd Lt			
HOME ADDRESS Callaway, Minnesota		ARM OR SERVICE Air Corps	DATE OF BIRTH 28 Feb 1921			
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH 13 Mar 1944			
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 1 Oct 43	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS			
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Gladys L. Hannon (wife) 2730 Portland St., Minneapolis, Minn.						
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Gladys L. Hannon (wife) 2730 Portland St., Minneapolis, Minn. Anna Marie Hannon (mother) Callaway, Minnesota James Emmett Hannon (father) Callaway, Minn.						
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	RECEIVED NO 7 C
X	X	X	X		X	MAY 25 1944



ADDITIONAL DATA AND/OR STATEMENT

The individual named on this report is shown on the records of the War Department to have been absent in a missing in action status on and subsequent to 13 March 1944 and until such absence was terminated by the Receipt in the War Department of evidence of death transmitted by the German Government through the International Red Cross, date of said termination being 15 May 1944

Battle

COPIES FURNISHED:		
S. G. O.	F. B. I.	F. O., U. S. A., WASH., D. C.
G. A. O.	VET. ADMIN.	ARMY EFFECTS BUREAU
Q. M. G.	OFF. FIS. DIR	

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

ADJUTANT GENERAL

CASUALTY MESSAGE

✓ vs

STANDARD FORM No. 14A
APPROVED BY THE PRESIDENT
MARCH 16, 1933

FROM WAR DEPARTMENT

BUREAU

AVC 3838

TELEGRAM

OFFICIAL BUSINESS—GOVERNMENT RATES

AG 201 HANSON JAMES J (10 MAY 44) SP1PC-S 132070-1 (11) 16 MAY 1944
ASN O-785 666

MRS GLADYS L HANSON
2730 PORTLAND STREET
MINNEAPOLIS MINNESOTA

REPORT RECEIVED FROM THE GERMAN GOVERNMENT THROUGH THE INTERNATIONAL
RED CROSS STATES YOUR HUSBAND SECOND LIEUTENANT JAMES J HANSON WHO
WAS PREVIOUSLY REPORTED MISSING IN ACTION WAS KILLED IN ACTION THIRTEEN
MARCH IN EUROPEAN AREA THE SECRETARY OF WAR EXTENDS HIS DEEP SYMPATHY
LETTER FOLLOWS

DUNLOP
ACTING THE ADJUTANT GENERAL

OFFICIALS

BATTLE

ADJUTANT GENERAL



28B

1 APR 1944 BP

CASUALTY BRANCH
The Adjutant General's Office
Washington

MISSING

AG 201

~~Number, James J. and IA.~~
~~0-755,500~~

MEMORANDUM FOR RECORD

SUBJECT: Change of Address of Emergency Addressee.

A communication has been received from ~~Headquarters AAF Station #100~~
~~United States Army, requesting that the records of this office be~~
~~amended as follows:~~

requesting that the records of this office be amended as follows:

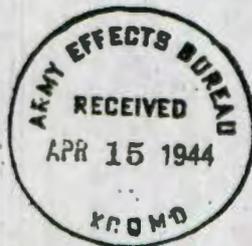
FROM

~~Mrs. Gladys L. Hansen,~~
~~Callaway Minnesota.~~

Emergency Addressee.

TO

~~Mrs. Gladys L. Hansen,~~
~~2730 Portland Street,~~
~~Minneapolis, Minnesota.~~



Lesare Obear
1st Lt., A.G.D.

Adjutant General.



Copies Furnished:

- Director, Office of Dependency Benefits
- Director, Bureau of Public Relations
- Natl. Hqs., American Red Cross
- Effects Quartermaster, Kansas City, Mo.
- ~~C. G., Army Air Forces (If Air Corps Personnel)~~
- Cas. Pay Rec. Bureau, FD
Gravelly Point, Bldg., T-7.
- AG 201 file

g.m.

FROM WAR DEPARTMENT

BUREAU A G O

VI 3832

TELEGRAM

OFFICIAL BUSINESS—GOVERNMENT RATES

201 HANNON, JAMES J

27 MAR 44

SPICE-N STD 016

28 MARCH 1944

ASN 0-755 556

Date

MRS OLADYS L HANNON

CALLONAY MINNESOTA

THE SECRETARY OF WAR DESIRES ME TO EXPRESS HIS DEEP REGRET THAT YOUR HUSBAND

SECOND LIEUTENANT

JAMES J HANNON

HAS BEEN REPORTED MISSING IN ACTION SINCE

THIRTY BN MARCH

OVER BRANCH

PERIOD LETTER FOLLOWS



ULIO
THE ADJUTANT GENERAL

SATTLE OFFICIAL:

ADJUTANT GENERAL

a. e. 13.



ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT

601 HARDESTY AVENUE
KANSAS CITY 1, MISSOURI

DSJ:AID:fa
June 11, 1946

IN REPLY REFER TO 231309

Mrs. Gladys L. Hannon
610 Ridgewood Avenue
Minneapolis, Minnesota

Dear Mrs. Hannon:

Since our previous correspondence with you, the Army Effects Bureau has received additional property, consisting of a flight record, belonging to your husband, Second Lieutenant James J. Hannon.

This record is being forwarded to you at the above address. If delivery is not made within thirty days from this date, please advise this Bureau.

Yours very truly,

D. S. JOHNSTON
2nd Lt., QMC
Chief, Adm. Division

AMOUNT OF CHECK	DISCREPANCY IN	INCLOSE VALUA	RECIPIENT FROM
	NAME	SHIP VALUABLES	CASUALTY REPORT
ACCOUNT NUMBER	SERIAL NUMBER	VALUABLES SHIPPED BY (clerk)	INVENTORY
	RANK		FORM 20
<p>Mrs. Gladys L. Hannon 610 Ridgewood Avenue Minneapolis, Minnesota</p> <p>2nd Lt. James J. Hannon</p> <p>O-755556</p> <p>231309</p>			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			
DSJ:AID:fa	SUMMARY COURT DATA		DATE ACTION TAKEN
DATE OF FINDING	APPLICANT		6/11/46 MAIL REVIEWER (initials)
REMARKS			SHIPPED
			FRANKED
			EXPRESS
			FREIGHT
			DATE SHIPPED
			SHIP JUN 22 1946 Vink
			ROUTING
			ACCOUNTING BRANCH
			1 WAREHOUSE
			2 FILE
ORDER FOR ACTION			

EFF QM FORM 14
10 OCT 1945

ATTACHMENTS			EFFECTS INVENTORY			STATUS		
<input type="checkbox"/> INCURD INVENTORY	EFFECTS INVENTORY ARMY EFFECTS BUREAU			231 124			<input type="checkbox"/> DECEASED	
<input type="checkbox"/> G. R. OR SUB OR LABEL							<input type="checkbox"/> MISSING	
<input type="checkbox"/> WILL OR POWER OF ATTY.							<input type="checkbox"/> F. O. W.	
<input checked="" type="checkbox"/> TALLY IN FORM 43							<input type="checkbox"/> ABANDONED	
						<input type="checkbox"/> UNKNOWN		
<input type="checkbox"/> BAGS, CLOTH OR TRAVEL	<input type="checkbox"/> BELT	<input type="checkbox"/> OVERCOATS	<input type="checkbox"/> PAPERS, PERSONAL	<div style="text-align: right; margin-bottom: 10px;"><i>Flight</i></div> <div style="text-align: right;"><i>second</i></div>				
<input type="checkbox"/> BELT, MONEY (NO MONEY)	<input type="checkbox"/> BOOKS, ADDRESS	<input type="checkbox"/> PENCIL, MECHANICAL						
<input type="checkbox"/> BILLFOLD (NO MONEY)	<input type="checkbox"/> BOOKS, PILOT LOG	<input type="checkbox"/> PEN, FOUNTAIN						
<input type="checkbox"/> BOOKS	<input type="checkbox"/> BRUSHES	<input type="checkbox"/> PHOTOS						
<input type="checkbox"/> BRACELET, IDENT.	<input type="checkbox"/> CASE	<input type="checkbox"/> PIPES						
<input type="checkbox"/> CAMERAS	<input type="checkbox"/> CLOTH, WASH	<input type="checkbox"/> RINGS						
<input type="checkbox"/> CLOTHING	<input type="checkbox"/> COATS	<input type="checkbox"/> SCARFS						
<input type="checkbox"/> MISC. ARTICLES	<input type="checkbox"/> FOOTLOCKER	<input type="checkbox"/> SHIRTS						
<input type="checkbox"/> RELIGIOUS ARTICLES	<input type="checkbox"/> FOOTWEAR, PR.	<input type="checkbox"/> SOCKS, PR.						
<input type="checkbox"/> RIBBONS, DECORATION	<input type="checkbox"/> GLASSES	<input type="checkbox"/> STATIONERY						
<input type="checkbox"/> SHORT SHORTER	<input type="checkbox"/> GLOVES, PR.	<input type="checkbox"/> TIES						
<input type="checkbox"/> SOUVENIR MONEY	<input type="checkbox"/> HANKERCHIEFS	<input type="checkbox"/> TOBACCO						
<input type="checkbox"/> SOUVENIRS	<input type="checkbox"/> HEADWEAR	<input type="checkbox"/> TOILET ARTICLES						
<input type="checkbox"/> TESTAMENTS	<input type="checkbox"/> JACKETS	<input type="checkbox"/> TOWELS						
<input type="checkbox"/> TOWELS & WASHCLOTHS	<input type="checkbox"/> KITS	<input type="checkbox"/> TROUSERS, PR.						
<input type="checkbox"/> U. S. MONEY (AMOUNT)	<input type="checkbox"/> KNIVES	<input type="checkbox"/> TRUNKS, PR.						
<input type="checkbox"/> WATCH	<input type="checkbox"/> LETTERS	<input type="checkbox"/> UNDERWEAR						
<input type="checkbox"/> WINGS	<input type="checkbox"/> LIGHTERS							
CONTAINERS ADDRESSED TO			INFORMATION					
<i>none</i>			<i>none</i>					
NAME AND STATUS VARIATIONS			CROSS REFERENCE					
<input type="checkbox"/> CHECK	REC'D BY	<input type="checkbox"/> NUMBER	BUREAU CHECK					
<input type="checkbox"/> MONEY ORDER		<input type="checkbox"/> SYMBOL	<input type="checkbox"/> TRANSMIT ORIGINAL					
<input type="checkbox"/> BOND		<input type="checkbox"/> AMOUNT	<input type="checkbox"/> ORIG. REG. MAIL					
<input type="checkbox"/> TRAV. CHECK		<input type="checkbox"/> DATE	<input type="checkbox"/> TO S. A. O.					
<input type="checkbox"/> FOREIGN CURRENCY			<input type="checkbox"/> MUTILATED					
<input type="checkbox"/> U. S. CURRENCY			<input type="checkbox"/> TO ISSUING AGENCY					
		BANK OR PLACE OF ISSUE						
		PAYEE						
		REMITTER OR DRAWER						
TALLY NO.	ORIG. NO. OF PRGS.	EXAMINING DATE	BOX NO.	SHEET				
<i>7381</i>		<i>1 - May - 46</i>		OF _____ SHEETS				
NAME			A. S. N.					
<i>JAMES JOSEPH HANNON</i>			<i>0-755556</i>					
ORGANIZATION			RANK	CASE NO.				
<i>401st Sp. 613th Spdw.</i>			<i>2ND LT.</i>					
WAREHOUSE SPACE		EXAMINED BY	<input type="checkbox"/> DIARY REMOVED					
<i>127</i>		<i>J. Law</i>	<input type="checkbox"/> PHOTO FILM REMOVED					
		PACKED BY	<input type="checkbox"/> MOTION PICTURE FILM REMOVED					
			SHIPPED					
PACKAGE DESCRIPTION	WEIGHT	INSPECTED BY	DATE	BY WHOM				
			<i>JUN 13 1946</i>	<i>ym</i>				
		STORED BY						
		<i>J</i>						

231309

RTB:RW:mjw
August 4, 1945

Mrs. Gladys L. Hannon
610 Ridgewood Avenue
Minneapolis, Minnesota

Dear Mrs. Hannon:

The Army Effects Bureau has received from overseas some more property of your husband, Second Lieutenant James J. Hannon.

This property, contained in one footlocker, is being sent you for distribution. If, for some reason, it has not been received within the next thirty days, this Bureau should be informed so that tracer may be instituted.

Yours very truly,

SD

P. L. KOEB
1st Lt., QMC
Officer-in-Charge
SJ Unit

100

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Gladys L. Hannon

610 Ridgewood Avenue

Minneapolis, Minnesota

Effects of:

Name

2nd Lt. James J. Hannon

ASN

0-755556

Case No.

231309 D

Wt.

DATE 4 August 1945

P. W. ...

FOR: Effects Quartermaster

REMARKS:

RTS: R.:mjw

 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.

1FL

FRANKED

REMARKS:

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

SHIP DAMAGED ITEMS

D F

Shipping Clerk

Eff. QM Form 14 (26 Dec 44)

18 AUG 1945

231,309
JR

INVT NO. 8678 L
 INV. DATE 1/6/45
 OPIG. NO. OF PGS. 1
 BOX NO. —
 SHEET OF 1 SHEETS
 ORGANIZATION 613 Bm As
 401 Bm Sp2

NAME James J. Hannon
 A.S.N. 0-755561 BANK 3rd Lt

Belt		TOWELS & WASHCLOTHS		WINGS
BALT. MONEY (NO MONEY)	X	CLOTHING		BAGS, CLOTH OR TRAVEL
Cloth, Wash		GRACEY IDENT.		BELLFOID. (NO MONEY)
Coat		Brushes		Case
Footwear, Pr.		CAMERAS		Footlocker
Gloves, Pr.		Glasses		KIT, SEW, TOL, CO WRITING
Handkerchiefs		knives		X BOOKS
Headgear	* 7	Lighters		Books, add
Jackets		MISC.		Books, add
Overcoats		Pen, Fountain		DIARY (EAGLE 2 1/2 OR BURE)
Scarves		Pencil, Mechanical		FILES
Shirts		Pipes		Letters
Socks, Pr.	X	RELIGIOUS ARTICLES		Papers, Personal
Ties		RIBBONS, DECORATION		Photos
Towels		Rings		Shoe shine Articles
Trousers, Pr.		Tobacco		SPORT SHORTER
Trunks, Pr.		Toilet Articles		TOILETRIES
Underwear				SECRETARY MONEY
				Stationery
				X TRUNKS
				U.S. MONEY (AMOUNT)

Young

REMARKS: Mrs Gladys L. Hannon Wife
 6332 Dupel Rd
 Phila Pa.
 * lighter is broken

FORM #54
 FORM #100
 Donations

Mr. Baker
 C.A.T. 533
 Phila Pa

WEIGHT	6.1. REMOVED
454	SHORTAGE ON REVERSE
1945	IDENT. TAGS REMOVED
	DIARY REMOVED
DATE SHIPPED	LOCKED STORAGE

DAW

WAREHOUSE SPACE 1175 X
 STORED BY HJS

30. Sept. 44
Date

1944

613th Bomb Sq: 401st Bomb Gp (H), APO#557.
Organization and APO Number

SUBJECT: Transmittal of Inventory of Effects.

TO : Effects Quartermaster, ETOUSA, Depot G-14, APO# 507 U. S. ARMY.

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

Hannon James J. 2nd Lt. O-755556
(Last name) (First Name) (MI) (Rank) (ASN) Control No

Organization 613th Bomb. Sq.(H) 401st Bomb Gp.(H)
(Unit---Not branch of service)

Status*(Missing in Action, ~~Deceased~~) on the 13 day of March 19 44.

Designated Beneficiary (With Address) Mrs Gladys L.Hannon (Wife)
5332 Drexel Rd.
Phil.,Penn.

●Cl. 11 Assets: Cash found in effects, less cost of money order enclosed herewith.

●USMO. _____ AMT \$ _____ USMO. _____ AMT \$ _____

●USMO. _____ AMT \$ _____ USMO. _____ AMT \$ _____

●U.S. Official Check # _____ Amt \$ _____ Bank _____
(Name and Branch)

●Bank accounts # _____

●Debtors # _____

●Creditors # _____

●Enclosed is: # _____
(Will, Power of Attorney, War Bond, Travelers Check)
(Describe fully)

Remarks if any **●Information Previously Submitted**

Strike out words not applicable.
Negative report where applicable.



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

IN REPLY REFER TO 231309 ✓

JRM:KD:nl
April 28, 1945 ✓

Mrs. Gladys L. Hannon ✓
610 Ridgewood Avenue ✓
Minneapolis, Minnesota ✓

Dear Mrs. Hannon: ✓

I have your letter of March 26, regarding the personal effects of your husband, Lieutenant James J. Hannon. ✓

There is no information available at this Bureau concerning the check in the amount of \$65.15 which was forwarded to you on March 8, other than was received by mail in the form of a U. S. Treasury Check to be forwarded to the person entitled to receive it. ✓

In all probability, this check represents money found in your husband's possessions. ✓

It is regretted that the suitcase about which you inquire was not received here. All of your husband's property received at this Bureau has been sent you. ✓

So that you may better understand the difficulties encountered in the recovery of personal effects, I am inclosing an information circular on the subject. ✓

I wish to assure you that in the event additional property of your husband is received here at a later date, it will be forwarded to you promptly. ✓

Yours very truly, ✓

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

1 Incl-- ✓
Form 51

March 26

Dear Sirs:

Will you please let me know what the "certain funds" consisted of? And will there be any more property coming?

I would especially like to inquire about a bag or suitcase (Army issue, I believe) which was not returned with my husband's clothing. There were numerous boxes in which his clothing was packed and we are wondering if that bag shouldn't have been returned also.

I would greatly appreciate your writing this information to me at this address:

Mrs. Gladys L. Harmon

610 Ridgewood Avenue.

Minneapolis, Minnesota

Sincerely,

Mrs. Harmon



ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT
ARMY EFFECTS BUREAU

601 HARDESTY AVENUE
KANSAS CITY 1, MISSOURI

JRM:MSL:mo
March 8, 1945

IN REPLY REFER TO 231,309

Mrs. Gladys L. Hannon
c/o Mr. J. E. Hannon
Box #3
Waubun, Minnesota

Dear Mrs. Hannon:

The Army Effects Bureau has received some additional property of your husband, Second Lieutenant James J. Hannon, consisting of certain funds.

I am inclosing a check for \$65.15 covering these funds.

As previously stated, property is forwarded by this Bureau for distribution according to the laws of the state of the officer's legal residence.

Extending every sympathy, I am

Sincerely yours,

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

1 Incl--
Check

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Gladys L. Hannon
c/o Mr. J. E. Hannon
Box #8
Waubun, Minnesota

Effects of:
Name 2nd Lt. James J. Hannon

ASn O-755 556

Case No 231,309

Wt.

JRM:MSL:mo
DATE 2 March 1945

[Signature]
FOR: Effects Quartermaster

REMARKS:

Inclose Bureau Check
 Acct. No. 69109
 Amount \$65.15
 Inclose "Valuables" item
 Ship "Valuables" item(s)

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

ROUTING:

Accounting Branch
 Warehouse Division
 Files Branch, Adm. Div.

69109

231309

53886 emh

M rob 14 45

Gladys L. Hannon

65.15

Sixty-Five and 15/100

REMARKS:

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

MAR 15 1945

Shipping Clerk

A.W.O.L. X
P.O.W. _____
Abandoned _____

ARMY EFFECTS BUREAU

Flat _____ Box _____

Handwritten: 23/309, 10

Shown on Tally In as _____

TALLY IN NO. _____ INVENTORY DATE _____ CASE NO. 23/309

EFFECTS OF JAMES J. HANNON ✓ RANK 2nd Lt.

ARMY SERIAL NO. C-755556 ✓ ORG. 523th Bomb Sq(H), 4C1st Bomb Gr. (H)

CCSIGNOR FORM 0114, IPO 507

DELIVERING CARRIER Mail G B/L NO. _____ G B/L DATE _____

Package No.	Article Description	Remarks
1	866.15	Included in one
ENVELOPE		U. S. Treasurer's Check
		# 1194
		dated 2 January 1945
		Symbol 712-156
		Amount \$7451.69 Payable to
		Indorsed to Effects QM
		List 347 to Section File
		File Attached.

Warehouse Space _____ Inventoried by virginia

Locked Storage Space _____ Packed by _____

MAIL SERVICE RECORDS
KANSAS CITY QUARTERMASTER DEPOT Case No. 311,309
601 Hardisty Avenue
Kansas City 1, Missouri Date 17 March 1945

SUBJECT: Report of transactions in disposing of the effects of

James J. Hannon, 0-75556 late a
(Name of deceased) (Army Serial Number)

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

on the 13 day of March, 1944, at European Area.

: 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., 223, Hq., KCQD Depot, dated 25 September 1943, for the purpose of disposing of the effects of the above-named soldier, or person subject to military law, reports that:

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

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

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

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

FINDING

Before a Summary Court-Martial which convened at Kansas City, Missouri, on 2 March 1945, pursuant to Special Orders 223, Headquarters, KCQD Depot, dated 25 September 1943, the application or affidavit of Mrs. Gladys L. Hannon 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. Gladys L. Hannon a/o J. E. Hannon of
(Name of person found entitled)

Box #8, Waubun State of
(Number, Street or Avenue) (City, Town or Village)
Minnesota, is the Widow of the
(Relationship or Capacity)

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

(Signature of Summary Court Officer)

JOHN R. MURPHY, Colonel, Q.M.C.
(Name, rank, organization)
SUMMARY COURT MARTIAL



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

IN REPLY REFER TO: #231,309

JRM:MSL:mam
February 10, 1945

Mrs. Gladys L. Hannon
c/o Mr. J. E. Hannon
Box #8
Waubun, Minnesota

Dear Mrs. Hannon:

Thank you for the information furnished the Army Effects Bureau in connection with personal effects belonging to your husband, Lieutenant James J. Hannon.

These effects are being forwarded to you in two cartons and one wood box.

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 husband.

Sincerely yours,

F. A. ECKHARDT
Captain Q.M.C.
Assistant

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO: Mrs. Gladys L. Hannon
c/o Mr. J. E. Hannon
Box #8
Waubun, Minnesota

Effects of:
Name 2nd Lt. James J. Hannon
ASN 0-755556
Case No. 231,309 D
Wt.

JRM:MSL:sac
DATE 3 February 1945

Truchman
FOR: Effects Quartermaster

REMARKS:
___ Inclose Bureau Check
___ Acct. No. _____
___ Amount _____
___ Inclose "Valuables" item _____
___ Ship "Valuables" item(s) _____

___ Remove G.I.
___ Note discrepancy in _____
___ Files removed
___ Diary removed
___ Laundry removed

ROUTING:
___ Accounting Branch
___ Warehouse Division
___ Files Branch, Adn. Div.

#1 Carton 1-17-45
#2 Carton 1-6-45
#3 Wood Box 12-21-44

REMARKS:

FEB 8 1945

Fracked **FRANKS**
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____
No. of Packages 3

WJC
Shipping Clerk

SHEET OF SHEETS		ARMY EFFECTS BUREAU INVENTORY		DECEASED	
BOX NUMBER		ORIGINAL NUMBER OF PACKAGES		MISSING	
TALLY NUMBER		INVENTORY DATE		CASE NUMBER	
EFFECTS OF		RANK		POW	
A.S.N.		ORGANIZATION		ABANDONED	
PACKAGE DESCRIPTION					
<i>F. J.</i>					
CLOTHING		PERSONAL ITEMS		CONTAINERS	
BELT		BRACELET, IDENTIFICATION		BAGS, CLOTH	
BELT, MONEY (NO MONEY)		BRUSHES		BAGS, TRAVEL	
CLOTH, WASH		CAMERAS		BILLFOLD (NO MONEY)	
COATS		GLASSES		CASE	
FOOTWEAR, PR.		KNIVES		FOOTLOCKER	
GLOVES, PR.		LIGHTERS		KIT, SEWING	
HANDKERCHIEFS		MISC. INSIGNIA		KIT, TOILET	
HEADWEAR		MISC. ITEMS		KIT, WRITING	
JACKETS		PEN, FOUNTAIN		PAPERS AND MISC.	
OVERCOATS		PENCIL, MECHANICAL		BOOKS	
SCARFS		PIPES		BOOKS, ADDRESS	
SHIRTS		RELIGIOUS ARTICLES		BOOKS, NOTE	
SOCKS, PR.		RIBBONS, DECORATION		BOOKS, PILOT LOG	
TIES		RINGS		DIARY (REMOVED FOR DURATION)	
TOWELS		TOBACCO		FILMS	
TROUSERS, PR.		TOILET ARTICLES		LETTERS	
TRUNKS, PR.		WATCH		PAPERS, PERSONAL	
UNDERWEAR		WINGS		PHOTOS	
<i>6 Pkg. cigarettes</i>				SHOE SHINE ARTICLES	
				SHORT SHORTER	
				SOUVENIRS	
				SOUVENIR MONEY	
				STATIONERY	
				TESTAMENTS	
				U.S. MONEY (AMOUNT)	
REMARKS:		ATTACHMENTS:		FORM #54	
				FORM #100	
C.A.T.		WEIGHT		GI REMOVED	
				SHORTAGE ON	
				NEVERBE	
				IDENT. TAGS	
				REMOVED	
				DIARY REMOVED	
WAREHOUSE SPACE		STORED BY		DATE SHIPPED	
				LOCKED STORAGE	
INVENTORIED BY		CHECKED BY		LAUNDRY	
				REMOVED	
PAC: BY		CHECKED BY		FILM	
				REMOVED	

JW

JAN 25 1945

FEB 5 1945

SHEET		OF SHEETS		ARMY EFFECTS BUREAU INVENTORY		RELEASED	
BOX NUMBER		ORIGINAL NUMBER OF PACKAGES				MISSING <input checked="" type="checkbox"/>	
TALLY NUMBER		INVENTORY DATE		CASE NUMBER		POW <input type="checkbox"/>	
EFFECTS OF		JAMES J. HANNON		RANK		1st Lt.	
A.S.N.		-75555		ORGANIZATION		2nd Infantry Division	
PACKAGE DESCRIPTION							

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

REMARKS: *Wife*

ATTACHMENTS: FORM #58 FORM #100

*Mrs. Gladys L. Hannon
6332 Drexel Rd.
Philadelphia, Pa.*

None.

W/C

no correspondence.

*C.A.T. Mrs. Gladys L. Hannon
6332 Drexel Rd.
Philadelphia, Pa.*

WAREHOUSE SPACE	STORAGE BY	WEIGHT	GI REMOVED
<i>245</i>			<input checked="" type="checkbox"/> SHORTAGE ON REVERSE
INVENTORIED BY	CHECKED BY	DATE WHIPPED	IDENT. TAGS REMOVED
	<i>[Signature]</i>	<i>FF</i>	DIARY REMOVED
PACKED BY	CHECKED BY	ADDITIONAL	LOCKED STORAGE
	<i>[Signature]</i>		LAUNDRY REMOVED
			FILM REMOVED

SHEET <u>2</u> OF <u>2</u> SHEETS	ARMY EFFECTS BUREAU INVENTORY		DECEASED
BOX NUMBER <u>7-1-12</u>	ORIGINAL NUMBER OF PACKAGES		MISSING
ROLL NUMBER <u>2204</u>	INVENTORY DATE <u>1-6-55</u>	CASE NUMBER	P O W
EFFECTS OF <u>JAMES J. ANNON</u>			ABANDONED
A.S.N. <u>0-75556</u>	ORGANIZATION <u>33rd Bn. 401 Bom. Sq.</u>		
PACKAGE DESCRIPTION			

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

REMARKS: _____ ATTACHMENTS: FORM #54 FORM #100

C.A.T.	WEIGHT	GI REMOVED
		<input checked="" type="checkbox"/> SHORTAGE ON REVERSE ✓
		<input type="checkbox"/> IDENT. TAGS REMOVED
		<input type="checkbox"/> DIARY REMOVED
WAREHOUSE SPACE	STORED BY	DATE WHIPPED
		<input type="checkbox"/> LOCKED STORAGE
INVENTORIED BY	CHECKED BY <u>W. J. ...</u>	<input type="checkbox"/> LAUNDRY REMOVED
PACKED BY		<input type="checkbox"/> FILM REMOVED

SHEET 1 OF 1 SHEETS
ARMY EFFECTS BUREAU INVENTORY
 ORIGINAL NUMBER OF PACKAGES 1
 DECEASED
 MISSING
 P.C.
 ABANDONED

TALLY NUMBER 6088 ✓ INVENTORY DATE 12-31-44 ✓ CASE NUMBER 23 3--7
 EFFECTS OF JAMES V. HANVON ✓ RANK 2nd Lt.
 A.S.N. 2-758-556 ✓ ORGANIZATION

PACKAGE DESCRIPTION = 1

CLOTHING	PERSONAL ITEMS	CONTAINERS
<input type="checkbox"/> BELT	<input type="checkbox"/> TRICOLET, IDENTIFICATION	<input type="checkbox"/> BAGS, TRAVEL
<input checked="" type="checkbox"/> BELT, MONEY (NO MONEY)	<input type="checkbox"/> BRUSHES	<input type="checkbox"/> BAGS, CLOTH
<input type="checkbox"/> HEADWEAR	<input type="checkbox"/> GLASSES	<input type="checkbox"/> ROLLFOLD (NO MONEY)
<input type="checkbox"/> CLOTH, WASH	<input type="checkbox"/> KNIVES	<input type="checkbox"/> CASE, <u>Wood Box</u>
<input type="checkbox"/> COATS	<input type="checkbox"/> LIGHTERS	<input type="checkbox"/> FOOTLOCKER
<input checked="" type="checkbox"/> FOOTWEAR, PA. ✓	<input type="checkbox"/> MISC. INSIGNIA	<input type="checkbox"/> KIT, SEWING
<input type="checkbox"/> GLOVES, PA.	<input type="checkbox"/> MISC. ITEMS	<input checked="" type="checkbox"/> KIT, TOILET ✓
<input checked="" type="checkbox"/> HANDKERCHIEFS ✓	<input type="checkbox"/> PEN, FOUNTAIN	<input type="checkbox"/> KIT, WEITING
<input type="checkbox"/> JACKETS	<input type="checkbox"/> PENCIL, MECHANICAL	<input type="checkbox"/> PARTS AND VARS.
<input type="checkbox"/> OVERCOATS	<input type="checkbox"/> PIPES	<input type="checkbox"/> BOOKS
<input checked="" type="checkbox"/> SHIRTS ✓	<input type="checkbox"/> RELIGIOUS ARTICLES	<input type="checkbox"/> FILMS
<input type="checkbox"/> SOCKS, PA. ✓	<input type="checkbox"/> RIBBONS, DECORATION	<input type="checkbox"/> LETTERS
<input type="checkbox"/> TIES	<input type="checkbox"/> RINGS	<input checked="" type="checkbox"/> PAPERS, PERSONAL ✓
<input checked="" type="checkbox"/> TOWELS ✓	<input checked="" type="checkbox"/> TRACON ✓	<input type="checkbox"/> PICTS
<input checked="" type="checkbox"/> TROUSERS, PA. ✓	<input type="checkbox"/> TOILET ARTICLES	<input type="checkbox"/> SHOE SHINE ARTICLES
<input checked="" type="checkbox"/> T-SHIRT, PA. ✓	<input type="checkbox"/> WATCH	<input type="checkbox"/> SOUVENIR MONEY
<input checked="" type="checkbox"/> UNDERWEAR ✓	<input type="checkbox"/> CAMERA	<input type="checkbox"/> TESTAMENTS
<input type="checkbox"/> SCARFS		<input type="checkbox"/> BOOKS, ADDRESS
		<input type="checkbox"/> BOOKS, NOTE
		<input type="checkbox"/> BOOKS, PILOT LOG
		<input type="checkbox"/> STATIONERY
		<input type="checkbox"/> SHIRT SHORTER
		<input type="checkbox"/> U.S. MONEY
		<input type="checkbox"/> DIARY (REMOVED FOR INSPECTION)

1 sweat pants

REMARKS: (mother)
Mrs. James B. Hanvon
Bainaway, Minn.
 ATTACHMENTS: FORM 888 FORM 889
1-2-44-77
MC

* States of Tex. is from Baltimore
also A.S.N.
170 Barksforden
C.A.T. Mrs. Gladys Hanvon
6332 D. ...
Pa. Pa.

WAREHOUSE SPACE	STAGED BY	WEIGHT	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<u>217X</u>	<u>CH</u>		<input type="checkbox"/> REMOVED
INVENTORIED BY <u>H. Hanvon</u>	DATE SHIPPED		<input type="checkbox"/> SHIPPAGE IN REVERSE
PACKED BY <u>...</u>	CHECKED BY <u>...</u>		<input type="checkbox"/> IDENT. TAGS REMOVED
			<input type="checkbox"/> ONLY REMOVED
			<input type="checkbox"/> LOCKED STORAGE
			<input type="checkbox"/> LAUNDRY REMOVED

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

Case No. _____

(Date)

SUBJECT: Lost, mislaid, or abandoned personal property

TO :

1. The Army Effects Bureau has received some personal property, evidently lost or abandoned by you.
2. Please complete the form on the reverse side hereof, designating some person at an address in the United States to whom such personal property shall be delivered on your behalf for safekeeping. Shipment will be made there at Government expense.
3. All Government Issue property is removed from personal effects prior to shipment from this Bureau, in accordance with existing regulations.
4. Prompt return of the completed form is requested. Storage facilities at this Bureau are limited. It is necessary that disposition of your property be made at the earliest possible date.
5. For your convenience, an addressed return envelope is inclosed.

(231,309)

JRM:MSL:sac
3 February 1945

LM

James J. Hannon, O-755556, Second Lieutenant, Air Corps, deceased.

of

G. H. GALVIN, JR.
Captain Q.M.G.
Assistant

1 --W.D., A.G.O. Form No. 77--Officer's Pay Data Card

29 AGO.



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

(S-2-2-45)
JRM:LB:cly
January 2, 1945

IN REPLY REFER TO 231,309 B

46 1/17
Mrs. Gladys L. Hannon
2730 Portland Street
Minneapolis, Minnesota

Dear Mrs. Hannon:

The Army Effects Bureau has received from overseas some personal property of your husband, Lieutenant James J. Hannon.

I know you want to receive this property quickly, and in making application it is necessary only that you confirm your address, stating that you are the legal widow of Lieutenant Hannon.

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

Sincerely yours,

P. L. Koob

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

1 Incl—
Envelope

Yes, will you please mail them to Mr. J. E. Hannon, Box 8, Waubesa, Minnesota as that will be my address.

Mrs. Gladys L. Hannon

RECEIVED

30 October 1944
Date

231,309.4

613th Bomb Sq: 401st Bomb Gp (H) APO#557.
Organization and APO Number

4C 127

SUBJECT: Transmittal of Inventory of Effects.

TO : Effects Quartermaster, ETOUSA, Depot G-14 APO# 507 U. S. ARMY.

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

Hannon James J. 2nd Lt. O-755556
(Last name) (First Name) (MI) (Rank) (ASN) Control No

Organization 613th Bomb Sq.(H) 401st Bomb Gp.(H)
(Unit---Not branch of service)

Status*(Missing in Action, ~~xxxxxx~~) on the 13 day of March 19 44.

Designated Beneficiary (With Address) Mrs Gladys L.Hannon (Wife)
6332 Drexel Rd.
Phila., Penn

*Cl. 11 Assets: Cash found in effects, less cost of money order enclosed here-with.

*USMO. A.T \$ USMO. AMT \$

*USMO. AMT \$ USMO. AMT \$

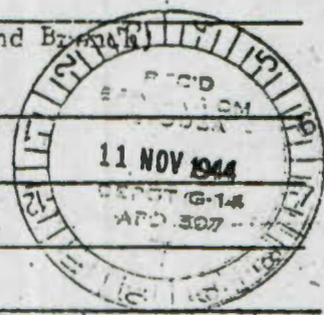
*U.S. Official Check # Amt \$ Bank (Name and Branch)

*Bank accounts #

*Debtors #

*Creditors #

*Enclosed is: # (Will, Power of Attorney, War Bond, Travelers Check)
(Describe fully)



Remarks if any *Information Previously Submitted

Strike out words not applicable.
Negative report where applicable.

6 May 1944
Date

613th Bomb Sq, 401st Bomb Gp (H), APO 667.
Organization and A.O. Number

SUBJECT: Transmittal of Inventory - Effects.

TO : Effects Quartermaster, ETOUSA, Depot 1-14, APO# 507
U.S. Army.

Transmitted herewith in accordance with AGM Cir# 70 dated 25 Oct. 1943, HQ SOS, ETOUSA, is Inventory of Effects concern subject named below.

HANNON	JAMES	J.	2d Lt.	0755556	
(Last name)	(First name)	(I.I.)	(Rank)	(ASN)	Control No

Organization 613th Bomb Sq (H), 401st Bomb Gp (H)
(Unit---not branch of service)

Status* (Missing in Action, ~~Dead~~) on the
15 day of March 1944.

Designated Beneficiary (with Address)

Cl. 11 Assets: Cash found in effects, less cost of money order included herewith.

U.S...O. 26208 AMT 64.15 ✓ J...O. AMT

J.S...O. 26195 AMT 1.00 ✓ U...O. AMT

J.S. Official Check # AMT Bank (Name and Branch)

Bank accounts

Debtors

Creditors

Enclosed is:

(Bill, power of attorney, War Bond, Travelers Chq)
(Describe fully)

REMARKS if any

1. WD AGO Form #64 attached.
2. Personal effects have been turned over to Station Quartermaster for shipment to your Headquarters.
3. This form will be used exclusively in all future transactions.

DATE MAY 25 1944
 Page # 1 of 1 of Class II
 Associated with Inventory

CONTROL NO.
17761

Strike out words not applicable.

1944

XXXXXXXXXXXX

607869

CHE:AID:mf
July 29, 1946

6-2
7-3

Dear Mrs. Hannon:

The Army Effects Bureau has received from overseas some personal property of your husband, James J. Hannon.

This property consisting of a few items, is being sent you.

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

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

Sincerely yours,

C. H. ESSERT
Administrative Assistant
Army Effects Bureau

AMOUNT OF CHECK	DISCREPANCY IN		ENCLOSE VALUABLES	RECIPIENT FROM
	NAME		SHIP VALUABLES	CASUALTY REPORT
ACCOUNT NUMBER	SERIAL NUMBER		VALUABLES SHIPPED BY (clerk)	INVENTORY
	RANK			FORM '20 <input checked="" type="checkbox"/>
<p>Mrs. Gladys L. Hannon ✓ 2730 Portland Street ✓ Minneapolis, Minnesota ✓</p> <p>James J. Hannon ✓</p> <p>19098888 ✓</p> <p>607869 ✓</p>				LETTER
				NO. & TYPE OF CONTAINER
				ENVELOPE
				CARTONS
				PACKAGE <input checked="" type="checkbox"/>
				FOOT LOCKER
				SPECIAL INSTRUCTIONS
				REMOVE GI
				SHIP BLOODSTAINED
				SHIP DAMAGED <input checked="" type="checkbox"/>
REMOVE BL'DSTAINED				
REMOVE DAMAGED				
FILMS REMOVED				
DIARY REMOVED				
DATE OF FINDING		SUMMARY COURT DATA		DATE ACTION TAKEN
		APPLICANT		MAIL REVIEWER (initials)
REMARKS				<input checked="" type="checkbox"/> SHIPPED
				<input type="checkbox"/> FRANKED
				<input type="checkbox"/> EXPRESS
				<input type="checkbox"/> FREIGHT
				DATE SHIPPED
				SEP 1 1946
				SHIPPING CLERK
				NIK
				ROUTING
				<input checked="" type="checkbox"/> ACCOUNTING BRANCH
<input checked="" type="checkbox"/> WAREHOUSE				
<input checked="" type="checkbox"/> FILE				
ORDER FOR ACTION				

EFF OM FORM 14
10 OCT 1945

ATTACHMENTS			EFFECTS INVENTORY			STATUS		
<input type="checkbox"/> INBOUND INVENTORY <input type="checkbox"/> G. R. OR BUS OR LABEL <input type="checkbox"/> WILL OR POWER OF ATTY. <input type="checkbox"/> TALLY IN FORM 43 <input checked="" type="checkbox"/> <i>Situ Inventory</i>			10-24 EFFECTS INVENTORY ARMY EFFECTS BUREAU			<input type="checkbox"/> DECEASED <input type="checkbox"/> MISSING <input type="checkbox"/> P. J. W. <input type="checkbox"/> ABANDONED <input type="checkbox"/> UNKNOWN		
<input type="checkbox"/> BAGS, CLOTH OR TRAVEL <input type="checkbox"/> BELT, MONEY (NO MONEY) <input type="checkbox"/> BILLFOLD (NO MONEY) <input type="checkbox"/> BOOKS <input type="checkbox"/> BRACELET / IDENT <input type="checkbox"/> CAMERAS <input type="checkbox"/> CLOTHING <input type="checkbox"/> MISC. ARTICLES <input type="checkbox"/> RELIGIOUS ARTICLES <input type="checkbox"/> RIBBONS, DECORATION <input type="checkbox"/> SHORT SNORTER <input type="checkbox"/> SOUVENIR MONEY <input type="checkbox"/> SOUVENIRS <input type="checkbox"/> TESTAMENTS <input type="checkbox"/> TOWELS & WASHCLOTHS <input type="checkbox"/> U. S. MONEY (AMOUNT) <input type="checkbox"/> WATCH <input type="checkbox"/> WINGS	<input type="checkbox"/> BELT <input type="checkbox"/> BOOKS, ADDRESS <input type="checkbox"/> BOOKS, PILOT LOG <input type="checkbox"/> BRUSHES <input type="checkbox"/> CASE <input type="checkbox"/> CLOTH WASH <input type="checkbox"/> COATS <input type="checkbox"/> FOOTLOCKER <input type="checkbox"/> FOOTWEAR, PR. <input type="checkbox"/> GLASSES <input type="checkbox"/> GLOVES, PR. <input type="checkbox"/> HANDEARCHEIFS <input type="checkbox"/> HEADWEAR <input type="checkbox"/> JACKETS <input type="checkbox"/> KITS <input type="checkbox"/> KNIVES <input type="checkbox"/> LETTERS <input type="checkbox"/> LIGHTERS	<input type="checkbox"/> OVERCOATS <input type="checkbox"/> PAPERS, PERSONAL <input type="checkbox"/> PENCIL MECHANICAL <input type="checkbox"/> PEN FOUNTAIN <input type="checkbox"/> PHOTOS <input type="checkbox"/> PIPES <input type="checkbox"/> RINGS <input type="checkbox"/> SCARFS <input type="checkbox"/> SHIRTS <input type="checkbox"/> SOCKS, PR. <input type="checkbox"/> STATIONERY <input type="checkbox"/> TIES <input type="checkbox"/> TOBACCO <input type="checkbox"/> TOILET ARTICLES <input type="checkbox"/> TOWELS <input type="checkbox"/> TROUSERS, PR. <input type="checkbox"/> TRUNKS, PR. <input type="checkbox"/> UNDERWEAR						
CONTAINERS ADDRESSED TO <i>None</i>			INFORMATION <i>None</i>					
DAMAGED			NAME AND STATUS VARIATIONS			CROSS REFERENCE <i>German A. E. B. M</i>		
			CHECK			NUMBER		BUREAU CHECK
<input type="checkbox"/> MONEY ORDER <input type="checkbox"/> BOND <input type="checkbox"/> TRAV. CHECK <input type="checkbox"/> FOREIGN CURRENCY <input type="checkbox"/> U. S. CURRENCY			REC'D BY		SYMBOL		<input type="checkbox"/> TRANSMIT ORIGINAL <input type="checkbox"/> ORIG. REG. MAIL <input type="checkbox"/> TO G. A. O. <input type="checkbox"/> MUTILATED <input type="checkbox"/> TO ISSUING AGENCY	
					AMOUNT			
					DATE			
					BANK OR PLACE OF ISSUE			
					PAYEE			
					REMITTER OR DRAWER			
TALLY NO. <i>4230</i>			ORIG. NO. OF PKGS.		EXAMINING DATE <i>19-C-1-10</i>		BOX NO.	
							SHEET OF SHEETS	
NAME <i>JAMES J. HANNON</i>					A. S. N. <i>19095388</i>			
ORGANIZATION					RANK		CASE NO. <i>607869</i>	
WAREHOUSE SPACE <i>203</i>			EXAMINED BY <i>Reid</i>		DIARY REMOVED			
			PACKED BY		PHOTO FILM REMOVED			
PACKAGE DESCRIPTION			WEIGHT		MOTION PICTURE FILM REMOVED			
					SHIPPED			
			INSPECTED BY		DATE <i>11-1-1946</i>		BY WHOR <i>M</i>	
			STORED BY <i>Y. H. H.</i>					

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

Case No. 607869

Date 15 July 1946

SUBJECT: Report of transactions in disposing of the effects of

James J. Hannon late a
(Name of deceased) 19098888 (Army Serial Number)

Det. who died
(Grade) (Organization, Army or Service)

on the 13 day of March, 1944, at European Area
Washington

TO : The Adjutant General, War Department 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 12 July 1946, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application or affidavit of Mrs. Gladys L. Hannon 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. Gladys L. Hannon of
(Name of person found entitled)

2730 Portland Street State of
(Number, Street or Avenue) (City, Town or Village)

Minnesota, is the widow of the
(Relationship or Capacity)

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

(Signature of Summary Court Officer)

P. H. MERRY, Lt. Col., QMC
(Name, Rank, Organization)
SUMMARY COURT MARTIAL

MESSAGEFORM

Army Effects Bureau, KCM Depot
601 Hardisty Avenue, Kansas City 1, Missouri

THE ADJUTANT GENERAL

WASHINGTON 25, D. C.

Ordinary

SUBJECT: Completion of Form 20

DJ:W:st

1. Attention is invited to attached request (EFF QM Form 20) submitted by the Army Effects Bureau for information to enable disposal of certain personal effects received from overseas marked as belonging to James J. Hannon, 19090468.

2. In order that disposal may be made of this property, it is requested that the information regarding the names of the beneficiaries of this soldier be furnished this Bureau as soon as practicable.

FOR THE EFFECTS QUARTERMASTER:

1 Incl-a/s

R. S. JOHNSTON
2nd Lt., 300
Assistant

SP-DEEN 332.3 (607869)

2 Apr 46

MESSAGEFORM