

REQUEST FOR INCLOSURES

Case No. 33549

TO:

       Locked Storage for:

  X   Accounting Branch for Check

Account No.   5667   Amount \$   1.29  

Payable to

  Mrs. Marion Kollbocker  

  Hamburg, New Jersey  

Correspondent                     

Check No.   4084  

Initials       P M      

*file  
LK*

5667

33549

DECEMBER 17 43

MARION KOLLBOCKER

1.29

ONE AND 29/100

CAPTAIN Q.M.C.  
ASST.



WAR DEPARTMENT  
ADJUTANT GENERAL'S OFFICE  
WASHINGTON  
REPORT OF DEATH

ABK/gh4635

16 October 1943

DATE

FULL NAME <b>Kollbocker, Ernest (nmi)</b>		ARMY SERIAL NO. <b>32 237 367</b>
GRADE <b>Pvt</b>	ARM OR SERVICE <b>Infantry</b>	DATE OF BIRTH <b>1 Aug 1917</b>
HOME ADDRESS <b>Hamburg, New Jersey</b>		
DATE OF DEATH <b>16 Sept 43</b>	PLACE OF DEATH <b>North African Area</b>	CAUSE OF DEATH <b>Killed in Action</b>
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP, & ADDRESS) <b>Mrs Anna Kollbocker (mother) RFD Hamburg, N. J.</b>		
BENEFICIARY (NAME, RELATIONSHIP, & ADDRESS) <b>Marion Kollbocker (wife) Anna Kollbocker (mother) Hamburg, N. J.</b> <b>Ervin Kollbocker (brother) Franklin, N. J.</b>		

BY ORDER OF THE SECRETARY OF WAR:

**J. W. Reinhart**  
ADJUTANT GENERAL

THIS COPY FOR ARMY EFFECTS BUREAU

33649

Summary Court-Martial  
WAR DEPARTMENT  
ARMY EFFECTS BUREAU  
KANSAS CITY QUARTERMASTER DEPOT  
601 Hardesty Avenue  
Kansas City 1, Missouri

Case No. 33549

13 December 1943  
(Date)

Subject: Report of transactions in disposing of the effects of

Ernest Kollbocker

(Name of deceased soldier)

32237367

(Army Serial No.)

, late a

Pvt.

(Grade)

Infantry

(Organization, Arm or Service)

, who died

on the 16 day of September, 1943, at North African Area

To : The Adjutant General, War Department, Washington, 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, reports that:

a. No legal representative or widow of the decedent being present at his camp or quarters, his effects 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 and~~ money (less the amount paid creditors if any) has been made by the Summary Court-Martial by transmittal through the Quartermaster corps, at Government expense to person found entitled (See Summary Court-Martial FINDING below).

FINDING:

Before a Summary Court-Martial which convened at Kansas City, Missouri on 11 December, 1943, pursuant to Special Orders 228, Headquarters, KCQM Depot,

dated 25 September 1943, the application and/or affidavit of Marion Kollbocker  
(Name of

Claimant) for the effects of the above-named deceased soldier, now in the possession of the United States, together with other relevant evidence, were duly considered;

Whereupon, this Summary Court-Martial finds that, under the provisions of A.W. 112 Marion Kollbocker  
(Name of person found entitled)

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

of New Jersey, is the Widow of the above-  
(Relationship or Capacity)

named deceased soldier and appears to be entitled to receive his effects.

(Signature of Summary Court Officer)  
G. F. BEHMAN, Major, C.M.C.

(Name, Rank, Organization)  
SUMMARY COURT-MARTIAL

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

(S-1-16-44)

JRM:LK:bt

December 16, 1943

IN REPLY REFER TO 33549

Mrs. Marion Kollbocker  
Hamburg, New Jersey

Dear Mrs. Kollbocker:

Thank you for the information given this Bureau in connection with disposal of the effects of your husband, Private Ernest Kollbocker.

There is inclosed check for \$1.29, which is the only property of Private Kollbocker received at the Army Effects Bureau to date. These funds were received by mail from overseas. It is possible that additional belongings of your husband will arrive at a later date, and the information you have furnished will enable us to make prompt shipment of such property.

My action in sending this check does not, of itself, vest title in you. These funds are transmitted only in order that some responsible person receive them so that distribution may be made in accordance with the laws of the state of your husband's legal residence.

Please acknowledge receipt of the check in the space provided below and return one copy to this Bureau. For your convenience, there is inclosed an addressed envelope which needs no postage.

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

Yours very truly,

*Elgin T. Fuller*  
ELGIN T. FULLER  
Captain Q.M.C.

Asst. Effects Quartermaster

2 Incls.  
Check  
Envelope

Receipt Acknowledged

Marion Kollbocker  
Signature

Dec. 22, 1943  
Date

ARMY SERVICE FORCES  
KANSAS CITY QUARTERMASTER DEPOT  
601 Hardesty Avenue  
Kansas City 1, Missouri

IMMEDIATE ACTION

33549

(S-1-2-44)

JRM:LK:fe

December 2, 1943

IN REPLY REFER TO: 33549

Mrs. Marion Kollbocker  
Hamburg, New Jersey


Dear Mrs. Kollbocker:

The Army Effects Bureau has received from overseas some personal property of your husband, **Private Ernest Kollbocker**.

We know you want to receive this property quickly. However, before making shipment, we would like to have you confirm your address. Please mail your reply in the inclosed self-addressed envelope which needs no postage. Use of this specially marked envelope will accelerate shipment of the property.

This Bureau dislikes exceedingly to resort to a mimeographic letter under circumstances of this kind but we feel that your desire to receive the property as early as possible justifies its use.

Yours very truly,

  
G. H. GALVIN, JR.  
1st Lt. Q.M.C.

Chief, Administrative Control Branch

1 Incl.  
Envelope

*My address is correct.*  
*Marion Kollbocker*

DS:sp  
Eff QM Form 71 (Rev. 10/29/43)

INVENTORY OF EFFECTS  
(See AR 600-550)

33549

KOLL BOCKER ERNEST (NMI) 32237367  
(Last Name) (First Name) (Middle Initial) (ASN)

late a Pvt. Co. "I" 143rd TNE.  
(Grade) (Organization or arm or service)

who died on the 16<sup>th</sup> day of SEPT., 1943.

CLASS I - Saber, insignia, decorations, medals, campaign badges, watches, manuscripts, and other articles valuable chiefly as keepsakes.

No.	ARTICLES	Package Number*	No.	ARTICLES	Pack *NUM
1	CAMPAIGN RIBBON				
1	GOOD CONDUCT RIBBON				

\*To be filled out only in case of shipment to the Adjutant General

CLASS II - Other Effects

No.	ARTICLES	No.	ARTICLES
1	SWEATER		

Money { Specie - \$ 1.29 CK. No. 10206375-27 SEPT. 43  
(Notes - \$ NONE CK. SINGLE No. 212008

I CERTIFY that the foregoing inventory comprises all the effects of the deceased whose name appears on the first page hereof, and that ~~the effects were delivered to~~

(Give name and degree of relationship; if legal representa-

tive or beneficiary named by the deceased, so state)

\*the effects of Class I have been forwarded to The Adjutant General and those of Class II have been sold. EFFECTS QUARTERMASTER, ARMY EFFECTS BUREAU, KANSAS CITY QUARTERMASTER DEPOT, KANSAS CITY, MO.

G.P.O. 36- U.S. Army  
(Station)  
6 October, 1943  
(Date)

William J. Langston  
WILLIAM J. LANGSTON  
1<sup>ST</sup> LT. INF.  
Comdg. Co. "I"

Deceased . . . X  
Missing  
A.W.O.L.  
P.O.W.  
Abandoned

ARMY SERVICE FORCES  
ARMY EFFECTS BUREAU

Sheet 100 of 1 Sheets

Flat Box

## INVENTORY

Shown on Tally In as \_\_\_\_\_

TALLY IN NO. \_\_\_\_\_ INVENTORY DATE 11/25/43 CASE NO. 33549

EFFECTS OF ERNEST (NMI) KOLLBOCKER RANK Pvt.

ARMY SERIAL NO. 32237367 ORG. 143rd Inf.

CONSIGNOR Hq. 143rd Inf., APO #36, c/o Postmaster, New York, N. Y.

DELIVERING CARRIER Mail G B/L NO. \_\_\_\_\_ G B/L DATE \_\_\_\_\_

[illegible]

Warehouse Space \_\_\_\_\_ Inventoried By E. Saville 11/25/43 HE:es

Packed Storage Space Office Safe Packed By \_\_\_\_\_

Off QM Form 11 (Rev. 10/15/43)

25

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

(S-7-5-44)  
JRM:LB:fj  
June 5, 1944

IN REPLY REFER TO: 33549 D

IMMEDIATE ACTION

Mrs. Marion Kollbocker  
Hamburg, New Jersey


Dear Mrs. Kollbocker:

The Army Effects Bureau is in receipt of additional property which belonged to your husband, Private Ernest Kollbocker.

I know that you want to receive these effects promptly. However, before sending them to you, please confirm your address so that shipment will not go astray.

Please be sure to use the inclosed self-addressed envelope which needs no postage, in order to expedite delivery of the property.

Yours very truly,



G. H. GALVIN, Jr.  
1st Lt. Q.M.C.  
Chief, Adm. Control Branch

*My new address is:*

1 Incl.  
Envelope

*Mrs. Ernest Kollbocker  
411 Lutherford Ave.  
Franklin, New Jersey*



KANSAS CITY, MO.

JUN 12 1944 AM

*File  
Parker*

Serial No. 32237367 Name Ernest Kollbaker  
Grade \_\_\_\_\_ Rank Capt.  
Organization \_\_\_\_\_  
Address \_\_\_\_\_  
Nearest Relative \_\_\_\_\_  
Address \_\_\_\_\_  
Killed in Action \_\_\_\_\_  
Date \_\_\_\_\_ Died of Disease \_\_\_\_\_  
Battle Area \_\_\_\_\_ Hospital \_\_\_\_\_  
Information \_\_\_\_\_  
Place of Burial \_\_\_\_\_  
Point of Coordination \_\_\_\_\_  
Description of Body \_\_\_\_\_  
Members Missing \_\_\_\_\_  
Signed \_\_\_\_\_

# INVENTORY OF EFFECTS

(See AR 600-550)

KOLLBOCKER, Ernest (NMF) 32237367  
(Last name) (First name) (Middle initial) (Army serial number)

late a Pvt unknown 143rd Inf  
(Grade) (Organization or arm or service)

who died on the 16 day of Sept, 1943

CLASS I—Saber, insignia, decorations, medals, campaign badges, watches, manuscripts, and other articles valuable chiefly as keepsakes.

NUMBER	ARTICLES	*PACKAGE NUMBER
1	Cigarette Lighter	
1	Fountain pen	
1	Knife	
1	New Testament	
1	Cigarette Case	
1	Wallet	
1	Photo case	
7	Photos	
	\$1.29 (FD)	

## DISPOSITION

Fwd'd to QM 6th Corps for transmittal to a base section

\*To be filled out only in case of shipment to The Adjutant General.

## CLASS II—Other effects

NUMBER	ARTICLES

### CLASS II—Continued

Money {	Specie	\$ 1.29
	Notes	\$

I CERTIFY that the foregoing inventory comprises all the effects of the deceased whose name appears on the first page hereof, and that \*the effects were delivered

to \_\_\_\_\_  
(Give name and degree of relationship; if legal representative

or beneficiary named by the deceased, so state)

\*the effects of class I have been forwarded to The Adjutant General and those of class II have been sold.

HERBERT E. MAC COMBIE CH (Lt Col)

(Station)

(Date)

\*Strike out words not applicable.

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

(S-7-5-44)  
JRM:LB:fj  
June 5, 1944

IN REPLY REFER TO 33549 D

Mrs. Marion Kollbocker  
Hamburg, New Jersey

Dear Mrs. Kollbocker:

The Army Effects Bureau is in receipt of additional property which belonged to your husband, Private Ernest Kollbocker.

I know that you want to receive these effects promptly. However, before sending them to you, please confirm your address so that shipment will not go astray.

Please be sure to use the inclosed self-addressed envelope which needs no postage, in order to expedite delivery of the property.

Yours very truly,

G. H. GALVIN, Jr.  
1st Lt. Q.M.C.  
Chief, Adm. Control Branch

1 Incl.  
Envelope

Serial No. 223  
Name WILLIAM  
Rank PL  
Organization ...  
Address ...  
Nearest Relative ...  
Address ...  
Killed in Action ...  
Date 16 SEPT 1943  
Battle Area ANTAVILLA  
ITALY  
Died of Disease ...  
Hospital ...  
Information KILLED IN ACTION  
Place of Burial ...  
Point of Coordination ...  
Description of Body ...  
Member Missing ...  
Signed ...  
1426

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

nh

JRM:ST:ier  
13 December 1943

In reply refer to QM 250.414

SUBJECT: Report of transactions by Summary Court-Martial  
Army Effects Bureau

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

There are submitted herewith reports of transactions by the Summary Court-Martial at the Army Effects Bureau, in the disposition of the personal effects of the following named deceased military personnel:

<u>Case No.</u>	<u>Name</u>	<u>Rank</u>	<u>Army Serial No.</u>
29790	Verhein, Jr., Fred H.	2nd Lt.	O-738949
33400	Higinbotham, Kenneth A.	Sgt.	18069421
33549	Kollbocker, Ernest	Pvt.	32837367
34577	Robinson, Jr., John B.	Pvt.	13077759
34820	Covert, Jimmie E.	Cpl.	16011606

For the Commanding Officer:

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

5 Incls--

Incl 1--Case Report #29790  
Incl 2--Case Report #33400  
Incl 3--Case Report #33549  
Incl 4--Case Report #34577  
Incl 5--Case Report #34820

DS:jeb

Eff QM Form No. 23 (Rev. 11/19/43)



Deceased \_\_\_\_\_ X  
Missing \_\_\_\_\_  
A.W.O.L. \_\_\_\_\_  
P.O.W. \_\_\_\_\_  
Abandoned \_\_\_\_\_

ARMY SERVICE FORCES  
ARMY EFFECTS BUREAU

Sheet 1 of 1 Sheets  
Flat 16 Box 4

INVENTORY

Shown on Tally In as

TALLY IN NO. 3618 INVENTORY DATE 5-15-44 CASE NO. 33549

EFFECTS OF ERNEST KOLLBOCKER RANK Pvt.

ARMY SERIAL NO. 32237367 ORG. Co. T 143rd Inf.

CONSIGNOR \_\_\_\_\_

DELIVERING CARRIER \_\_\_\_\_ G B/L NO. \_\_\_\_\_ G B/L DATE \_\_\_\_\_

[illegible]

Warehouse Space 193 Inventoried By Brennan

Locked Storage Space      Packed By      **Palmer**

GIN: sm 5-19-44

MP:ml  
Eff QM Form 11 (Rev. 10/15/43)

MAY 24 1948

ju. W.

SHORTAGE

1 Good Conduct ribbon

1 Check #10206375

for \$1.29 -- Symbol 212008

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

(S-7-23-44)  
JRM:LB:ems  
June 23, 1944

IN REPLY REFER 83549 D

Mrs. Ernest Kollbocker  
411 Rutherford Avenue  
Franklin, New Jersey

Dear Mrs. Kollbocker:

Thank you for the confirmation of your address in connection with disposal of the additional property of your husband, Private Ernest Kollbocker.

Shipment of this property was made to you by mail on June 16. Upon arrival of the package, please sign and return one copy of the inclosed receipt. For your convenience, there is inclosed an address-ed envelope which needs no postage.

As previously stated, the forwarding of property by this Bureau does not, of itself, vest title in you. It is forwarded merely in order that distribution may be made in accordance with the laws of the state of your husband's legal residence.

Yours very truly,

S. N. GREENSTEIN  
Capt. Q. M. C.  
Assistant

2 Incls.  
Form 5  
Envelope

ARMY SERVICE FORCES  
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Berlau ✓

Suspense 21 June 1944 ✓

Case No. 33549 D 1k ✓

Date 14 June 1944 ✓

MEMORANDUM TO Warehouse Branch:

Please see that the personal effects on the above mentioned case are packed, weighed and ready for shipment promptly so that they may be readily picked up. Bills of Lading and all other papers will be marked with the case number and can be identified thereby. The original of this form should be returned to the Administrative Branch after completion.

Effects of: Private Ernest Kollbocker ✓ Serial No. 32237367 ✓

Ship to: Mrs. Ernest Kollbocker ✓

Street and Number 411 Rutherford Avenue ✓

City and State Franklin, New Jersey ✓

Ship Via: Frank Gov't B/L No. \_\_\_\_\_

D. Blaw db  
For the Effects Quartermaster

LIST OF PACKAGES SHIPPED

1 Pkg - 2<sup>nd</sup> - Inv. - 5-22-44

1 Pkg - 2<sup>nd</sup> - Inv. - 5-15-44 Make 2 Labels

Franked Mail -- 4<sup>th</sup> or less ✓

Parcel Post Charges \_\_\_\_\_

Estimated Express Charges \_\_\_\_\_

Estimated Freight Charges \_\_\_\_\_

Total Number of Pieces: 2

Shipping Clerk Em

Weight of Shipment: \_\_\_\_\_

Date JUN 10 1944

ML:mp

Effects QM Form 14 (Rev. 10/15/43)

26  
file  
67

Case No. ems  
33549 D  
(S-7-23-44)

RECEIPT FOR EFFECTS  
DELIVERED TO CLAIMANT

32237367

6

Number	Articles	Number	Articles
1	Cigarette lighter		
1	Fountain Pen		
1	Pocket knife		
1	New Testament		
1	Cigarette case		
1	Photo Case w/pictures		
1	Wallet		
1	Ribbon		
1	Sweater		
1	Embroidered tag		

Receipt is also acknowledged of the sum of \_\_\_\_\_ Dollars (\$\_\_\_\_\_), found among the effects of said deceased soldier.

2

Subscribed at Franklin on this 27 day of June,  
19  .

Witnessed

\_\_\_\_\_  
(Signature of Witness)

Marion E. Kollbocher  
(Signature of claimant in ink)

\_\_\_\_\_  
\_\_\_\_\_  
(Address)

\_\_\_\_\_  
\_\_\_\_\_  
(Address)

Interred 4 Oct 48

LC

F

10

Sicily - Rome

## DISINTERMENT DIRECTIVE

WILLARD LOGERTON

Major OMC - Cemetery Superintendent

FLOTTED BY M. MANLY

SECTION A —  
NAME AND BURIAL LOCATION OF DECEASED

## DIRECTIVE NUMBER

5265 01792

## DATE

15 03 48  
DAY MONTH YEAR

## NAME

KOLLBOCKER ERNEST

## SERIAL NUMBER

32237367

## RANK

PVT

## ARM

1

## DATE OF DEATH

DAY MONTH YEAR

## CEMETERY

PAESTUM - MT SOPRANO

## DISPOSITION OF REMAINS

1 5202 80  
CODE DIST. PT.

## PLOT

D

## ROW

2

## GRAVE

31

## COUNTRY

ITALY

## CAUSE OF DEATH

1

## SECTION B — CONSIGNEE AND NEXT OF KIN

## NAME AND ADDRESS OF CONSIGNEE

NETTUNO, ITALY

## NAME AND ADDRESS OF NEXT OF KIN

MARION KOLLBOCKER WIFE)  
BOX 55  
HAMBURG, NEW JERSEY

"Flag Sent"

## SECTION C — DISINTERMENT AND IDENTIFICATION

## NAME

KOLLBOCKER ERNEST

## SERIAL NUMBER

32237367

## RANK

PVT

## DATE OF DEATH

## DATE DISTINTERRED

22 May 48

## IDENTIFICATION TAG ON

☐ REMAINS☐ MARKER

## ORGANIZATION

USAGF

## RELIGION

P

## IDENTIFICATION VERIFIED BY

M. G. BORRES 2/LT. OMC  
NAME AND TITLE

## SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

## NATURE OF BURIAL

SHROUD

## CONDITION OF REMAINS

SKELETAL

## OTHER MEANS OF IDENTIFICATION

NONE

## MINOR DISCREPANCIES

NONE

## REMAINS PREPARED AND PLACED IN CASKET

DATE 24 MAY 48

BY WM L JORDON EMBALMER

## CASKET SEALED BY

WM L JORDON EMBALMER

## EMBALMER (Signature)

## SHIPPING ADDRESS VERIFIED BY

DATE 24 MAY 48 BY D PALMIERI RECORDER

WM L JORDON EMBALMER

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

B K TRAYNOR WOJG USA

SIGNATURE OF GRS INSPECTOR

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

RECORDS ANNOTATED  
DATE JAN 19 1949  
NAME WHEELER  
R & R R.

# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

FROM USMC MT SOPRANO ITALY		TO NAPLES PORT MORGUE	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER R L CROCKER 2 LT QMC	
SIGNATURE OF SHIPPER P C CRAIG CAPT QMC	DATE 23 May 48	SIGNATURE OF RECEIVER WALTER E THOMAS CAPT QMC	DATE 23 MAY 48

## 2. SHIPPED

FROM NAPLES PORT MORGUE		TO SICILY ROME AMERICAN CEMETERY	
KIND OF CONVEYANCE TRAIN		NAME OF CONVOYER DONDY, A. WELCH SGT	
SIGNATURE OF SHIPPER F. A. WILSON CAPT QMC	DATE SEP 30 1948	SIGNATURE OF RECEIVER WILLARD EDGERTON MAJ QMC	DATE SEP 30 1948

## 3. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

## 4. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

## 5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER HAMBURG NEW JERSEY	
SIGNATURE OF SHIPPER WILLIAM KOTTBOCKEY MILE	DATE	SIGNATURE OF RECEIVER	DATE

## 6. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

## 7. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

*mt*

6 December 1948

Pvt. Ernest Kollbocker, ASN 32 237 367  
Plot F, Row 10, Grave 24  
Headstone: Cross  
Nettuno (Anzio) U. S. Military Cemetery

Mrs. Marion Kollbocker  
Box 55  
Hamburg, New Jersey

Dear Mrs. Kollbocker:

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

After the Department of the Army has completed all final interments, the cemetery will be transferred, as authorized by the Congress, to the care and supervision of the American Battle Monuments Commission. The Commission also will have the responsibility for permanent construction and beautification of the cemetery, including erection of the permanent headstone. The headstone will be inscribed with the name exactly as recorded above, the rank or rating where appropriate, organization, State, and date of death. Any inquiries relative to the type of headstone or the spelling of the name to be inscribed thereon, should be addressed to the American Battle Monuments Commission, the central address of which is Room 713, 1712 "G" Street, N. W., Washington 25, D. C. Your letter should include the full name, rank, serial number, grave location, and name of the cemetery.

While interment and beautification activities are in progress, the cemetery will not be open to visitors. However, upon completion thereof, due notice will be carried by the press.

You may rest assured that this final interment was conducted with fitting dignity and solemnity and that the grave-site will be carefully and conscientiously maintained in perpetuity by the United States Government.

Sincerely yours,

THOMAS B. LARKIN  
Major General  
The Quartermaster General

csb

DEC 7 10 55 AM '48  
MAIL & RECORDS SECTION

## REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

Pvt. Ernest Kollbocker, 32 237 367  
 Plot D, Row 2, Grave 31,  
 United States Military Cemetery  
 Mount Sopruno, Italy

2 April 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, Mrs. Marion Kollbocker

(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

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

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

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

- ☒ 1. BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS. Nettuno, Italy
- ☐ 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.)

none

DD FORM 1300  
 MAR 25 1948  
 28W

Caded 15 mar, 48

27 edley

OQMG FORM 345 MILITARY

14 NOV 1946

JUN 3

16-50411-1

PAGE 1

Emm

BHS

## PART I (Continued)

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

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

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

OR

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

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

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

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

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

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

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

Mrs. Marion Kollbocker  
(SIGNATURE OF NEXT OF KIN)

(SIGNATURE OF NEXT OF KIN)

Box 55

(STREET AND NUMBER)

Hamburg, New Jersey  
(CITY AND STATE)

(CITY AND STATE)

(NAME PRINTED OR TYPED)

Subscribed and duly sworn to before me according to law by the above-named applicant this 26<sup>th</sup> day of April

19 66 at city (or town) of Dursey, county of Dursey, and State (or Territory or

District) of New Jersey

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

(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

**NOTARY PUBLIC**  
(OFFICIAL TITLE)

(OFFICIAL TITLE)

ADDITIONAL REMARKS AND INSTRUCTIONS

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



Pvt. Ernest Kollbocker, 32 237 367  
Plot D, Row 2, Grave 31,  
United States Military Cemetery  
Mount Soprano, Italy

2 April 1947

Mrs. Marion Kollbocker  
Rural Free Delivery  
Hamburg, New Jersey

Dear Mrs. Kollbocker:

The people of the United States, through the Congress have authorized the disinterment and final burial of the heroic dead of World War II. The Quartermaster General of the Army has been entrusted with this sacred responsibility to the honored dead. The records of the War Department indicate that you may be the nearest relative of the above-named deceased, who gave his life in the service of his country.

The enclosed pamphlets, "Disposition of World War II Armed Forces Dead," and "American Cemeteries," explain the disposition, options and services made available to you by your Government. If you are the next of kin according to the line of kinship as set forth in the enclosed pamphlet, "Disposition of World War II Armed Forces Dead," you are invited to express your wishes as to the disposition of the remains of the deceased by completing Part I of the enclosed form "Request for Disposition of Remains." Should you desire to relinquish your rights to the next in line of kinship, please complete Part II of the enclosed form. If you are not the next of kin, please complete Part III of the enclosed form.

If you should elect Option 2, it is advised that no funeral arrangements or other personal arrangements be made until you are further notified by this office.

Will you please complete the enclosed form, "Request for Disposition of Remains" and mail in the enclosed self-addressed envelope, which requires no postage, within 30 days after its receipt by you? Its prompt return will avoid unnecessary delays.

Sincerely,

THOMAS B. LARKIN  
Major General  
The Quartermaster General

5. Incls.

csb

exp.  
M. W.

QMMR 293  
Kollbocker, Ernest  
A.S.N. 32 237 367

19 March 1947

Mrs. Marion Kollbocker  
Rural Free Delivery  
Hamburg, New Jersey

Dear Mrs. Kollbocker:

Inclosed herewith is a picture of the United States Military Cemetery Mt. Soprano, Italy, in which your husband, the late Private Ernest Kollbocker, 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,

1 Incl  
Photograph

1gb

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



16 September 1946

Mrs. Marion Kollbocker  
Rural Free Delivery  
Hamburg, New Jersey

Dear Mrs. Kollbocker:

243  
The War Department is most desirous that you be furnished information regarding the burial location of your husband, the late Private Ernest Kollbocker, A.S.N. 32 237 367.

The records of this office disclose that his remains are interred in the United States Military Cemetery Mt. Soprano, Paestum, Italy, plot D, row 2, grave 31. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located approximately twenty-two miles southeast of Salerno, Italy, and is under the constant care and supervision of United States military personnel.

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

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN  
Major General  
The Quartermaster General

SEP 16 2 49 PM '46  
O.D.M.G.  
MAIL & RECORDS BRANCH

Ques

June 1, 1943

## REPORT OF BURIAL

AR 30-1815 &amp; TM 10-630

30266

16 Sept. 1943

Date Report Filled Out

KOLLBOCKER

Ernest

NMI

32237367

White

(Last Name)

(First Name)

(Middle Initial)

(Serial No.)

(Race)

Pv.t

Unknown

C.O.I.

143rd Inf. REGT.

U S A

36<sup>TH</sup> INF. DIV.

(Rank)

(Organization)

(Branch)

(Country)

Paestum, Italy

16 Sept. 1943

Skull Fracture

P.

(Place of Death)

(Date of Death)

(Cause of Death)

(Religion : P, C, H, etc.)

## MEANS OF IDENTIFICATION

Identification Tags found on body : Yes (X); No ( ).

If no identification tags, other means used to identify body (identification card, letters, etc.) : None

Complete fingerprint chart of both hands on reverse side if body cannot be identified.

Complete tooth-chart on reverse side and list anatomical characteristics and other data if fingerprints cannot be taken.

If unidentified, give circumstances : None

List of Personal Effects found on Body and disposition of Same : Over

Anna Killbocker

Hamburg, N.J.

(Name of Emergency Addressee)

(Address of Emergency Addressee)

Pfc. Thos. J. Crowell

47th QM Co. G R S

(Signature (or Name) of Person furnishing above data when other than the Officer reporting burial.)

1005 hrs 16 Sept. 1943

Vannulo Cemetery, Italy

(Time and Date of Burial)

(Location, Name, &amp; No. of Cemetery)

IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCE REVERSE SIDE THIS FORM

A

5

298

Temp. Wooden

Protestant

(Plot No.)

(Row No.)

(Grave No.)

(King Grave Markers)

(Type of Religious Ceremony)

Identification Tag buried with body (X); Identification Tag attached to marker (X).

If Identification Tags not present, what other identification data were buried with the body and in what kind of container ? None

Bodies buried on either side (See paragraph 4 on reverse side this form.)

Right side : Harris, William B Pfc. 34465255 Unknown 143rd Inf. 297

(Name)

(Rank)

(ASN)

(Organization)

(Grave No.)

Left side : Cole, Walter R. Unknown 20809029 Co I 143rd Inf 299

(Name)

(Rank)

(ASN)

(Organization)

(Grave No.)

Herbert E. MacCombie, R.

Lee F. Allison, R. 1st Lt.

(Signature of Officer Reporting Burial)

(Verified by unit G.R.S. Officer)

Herbert E. MacCombie, Ch. (Lt. Col)

INSTRUCTIONS FOR FILLING OUT BURIAL REPORT : Make out QMC Form 1 - GRS in quadruplicate for U.S. dead, one additional copy for allied and enemy dead. Sign all copies. Submit report to nearest member of Graves Registration Service. Graves Registration Service will forward the original and two copies through at least one higher administrative headquarters (to be checked against Casualty Reports and allied papers and all copies verified by the Graves Registration Officer of that headquarters) to Base Section Graves Registration Service Officer. OVER FOR BURIAL INSTRUCTIONS.

20 JUL 1944 FILE

7343

## INSTRUCTIONS FOR BURIAL

1. **PREPARATION OF BODY** : Have body examined by member of Medical Department whenever possible (to attach E.M.T. Form 52b.) Remove all personal property; remove one identification tag, leave other on body in protected position (in case of enemy dead, leave 1/2 tag on body, forward 1/2 with personal effects). If no tag present, make notation of identifying data on form, protect in sealed bottle, canteen, spent shell, or best available container, and bury with remains. If unidentified, take fingerprints of both hands; if this is not possible fill out tooth-chart and note height, weight, color of eyes and hair, tattoo marks, birthmarks, etc., and other data as serial no. of weapon, laundry marks, where body found, etc. Wrap body in shelter half, mattress cover, or blanket when available.

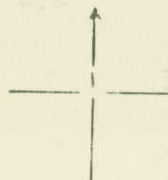
2. **BURIAL** : Dig grave to a depth of five feet (hasty battlefield burials, to sufficient depth to prevent elements from exposing the body). Place only one body in a grave. Dig graves side by side, row behind row.

3. **MARKING OF GRAVE** : Fasten identification tag to temporary name peg and place at head of grave. For enemy dead, write data on peg. When pegs are not available, copy data on a piece of paper, place in bottle, spent shell, or other receptacle, seal tightly and place so as to mark and identify grave. If identification tag cannot be fastened to peg or placed in container, do not leave at grave but forward with report of burial. If only one tag is found on body, it should be buried with body. The information thereon should be written on marker or placed in container at head of grave. Do not use weapons or helmets to mark graves.

4. **LOCATION OF GRAVE** : Report burials in established cemeteries by plot, row, and grave number (or show on cemetery map). For all other burials prepare sketch in space provided below; and give location by means of map references, or by reference to prominent permanent landmarks. Information must be specific, accurate, complete. Stand at foot of grave facing head to determine bodies buried to the left and right.

5. **PERSONAL EFFECTS** : List only personal effects taken from body on the Burial Report form. Place these with information as to identity of owner, organization, emergency addressee, in personal effects bag, or wrap in handkerchief, towel, or other available material, and turn over to Grave Registration Service Personnel with report of burial. Government property is not to be included in personal effects but is to be turned in to Salvage Collecting Point.

### SKETCH AND MAP REFERENCE :



### TOOTH-CHART

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

Indicate : missing natural teeth by X; crowns by O;  
fillings by □; bridges by —; linkings anchor teeth;  
replacements by denture (horizontal line).

Characteristics :

Other Data :

1 Cigarette Lighter  
1 Fountain Pen  
1 Knife  
1 New Testament  
1 Cigarette Case  
1 Wallet  
1 Photo Case  
7 Photos  
\$1.29 Amer. P.D.

Turned to QM 6th Corps to be transferred  
to Base Section

When unidentified, take thumb and fingerprints of both hands.

If this is not possible, fill in tooth chart.

4

3

2

1

Thumb

Left  
Right

Thumb

1

2

3

4

~~CONFIDENTIAL~~

REPORT OF ~~BURIAL~~ REBURIAL (SEE REVERSE SIDE)  
AR 30-1815 & TM 10-630

15 October 1943

Date Report Filled Out

293 KOLLBOCKER, Ernest (nmi) 32237367 W.  
(Last Name) (First Name) (Middle Initial) (Serial No.) (Race)  
Pvt. Co "I" 143rd Inf. REGT. 36th Inf. DIV. (PR) U.S.A.  
(Rank) (Organization) (Branch) (Country)  
Reg. of Paestum, Italy 16 Sept. 1943 KIA - Skull fracture P  
(Place of Death) (Date of Death) (Cause of Death) (Religion : P, C, H, etc.)

MEANS OF IDENTIFICATION

Identification Tags found on body : Yes (2); No ( ).

If no identification tags, other means used to identify body (identification card, letters, etc.) :

Complete fingerprint chart of both hands on reverse side if body cannot be identified.

Complete tooth-chart on reverse side and list anatomical characteristics and other data if fingerprints cannot be taken.

If unidentified, give circumstances :

List of Personal Effects found on Body and disposition of Same : NONE.

KOLLBOCKER, Anna

(Name of Emergency Addressee)

Hamburg, N. J.

(Address of Emergency Addressee)

PFC J. Kosinsky 47th QM Co. GR

(Signature (or Name) of Person furnishing above data when other than the Officer reporting burial.)

1345 hrs. 15 Oct. 1943

(Time and Date of Burial)

Mt. Soprano Cemetery, Italy

(Location, Name, & No. of Cemetery)

IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCE REVERSE SIDE THIS FORM

D

2

31

Temp. Wood

P

(Plot No.)

(Row No.)

(Grave No.)

(Kind Grave Marker)

(Type of Religious Ceremony)

Identification Tag buried with body (x); Identification Tag attached to marker (x).

If Identification Tags not present, what other identification data were buried with the body and in what kind of container ?

Bodies buried on either side (See paragraph 4 on reverse side this form.)

Right side : COLE, Walter R. UNKNOWN 20809029 143rd Inf.

(Name)

(Rank)

(ASN)

(Organization)

39

(Grave No.)

Left side : HARRIS, William B. PFC 34465255 143rd Inf.

(Name)

(Rank)

(ASN)

(Organization)

32

(Grave No.)

(Signature of Officer Reporting Burial)

99.7 Fitzstephens  
(Verified by unit G.R.S. Officer)

2nd Lt. 47th QM Co. GR

INSTRUCTIONS FOR FILLING OUT BURIAL REPORT : Make out QMC Form 1 - GRS in quadruplicate for U.S. dead, one additional copy for allied and enemy dead. Sign all copies. Submit report to nearest member of Graves Registration Service. Graves Registration Service will forward the original and two copies through at least one higher administrative headquarters (to be checked against Casualty Reports and allied papers and all copies verified by the Graves Registration Officer of that headquarters) to Base Section Graves Registration Service Officer. OVER FOR BURIAL INSTRUCTIONS.

~~CONFIDENTIAL~~

20 JUL 1944 FILE

## INSTRUCTIONS FOR BURIAL

**1. PREPARATION OF BODY :** Have body examined by member of Medical Department whenever possible (to attach E.M.T. Form 52b). Remove all personal property; remove one identification tag, leave other on body in protected position (in case of enemy dead, leave ½ tag on body, forward ½ with personal effects). If no tag present, make notation of identifying data on form, protect in sealed bottle, canteen, spent shell, or best available container, and bury with remains. If unidentified, take fingerprints of both hands; if this is not possible fill out tooth-chart and note height, weight, color of eyes and hair, tattoo marks, birthmarks, etc. and other data as serial no. of weapon, laundry marks, where body found, etc. Wrap body in shelter half, mattress cover, or blanket when available.

**2. BURIAL :** Dig grave to a depth of five feet (hasty battlefield burials, to sufficient depth to prevent elements from exposing the body). *Place only one body in a grave.* Dig graves side by side, row behind row.

**3. MARKING OF GRAVE :** Fasten identification tag to temporary name peg and place at head of grave. For enemy dead, write data on peg. When pegs are not available, copy data on a piece of paper, place in bottle, spent shell, or other receptacle, seal tightly and place so as to mark and identify grave. If identification tag cannot be fastened to peg or placed in container, do not leave at grave but forward with report of burial. If only one tag is found on body, it should be buried with body. The information thereon should be written on marker or placed in container at head of grave. Do not use weapons or helmets to mark graves.

**4. LOCATION OF GRAVE :** Report burials in established cemeteries by plot, row, and grave number (or show on cemetery map). For all other burials prepare sketch in space provided below; and give location by means of map references, or by reference to prominent permanent landmarks. Information must be specific, accurate, complete. Stand at foot of grave facing head to determine bodies buried to the left and right.

**5. PERSONAL EFFECTS :** List only personal effects taken from body on the Burial Report form. Place these with information as to identity of owner, organization, emergency addressee, in personal effects bag, or wrap in handkerchief, towel, or other available material, and turn over to Graves Registration Service Personnel with report of burial. Government property is not to be included in personal effects but is to be turned in to Salvage Collecting Point.

### SKETCH AND MAP REFERENCE :

Disinterred by 47th QM Co. GR from Grave  
298 Row 5 Plot A Vannulo Cemetery, Italy  
on 15 Oct. 1943.

Reinterred same date in Grave 31 Row 2  
Plot D Mt. Soprano Cemetery, Italy.

### TOOTH-CHART

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

Indicate : missing natural teeth by X; crowns by O;  
fillings by □ ; bridges by ( ) linking anchor teeth;  
replacements by denture (horizontal line).



Characteristics :

Other Data :

When unidentified, take thumb and fingerprints of both hands.

If this is not possible, fill in tooth chart.

Left  
Right

4  
3  
2  
1  
Thumb  
Thumb  
1  
2  
3  
4

WAR DEPARTMENT  
E ADJUTANT GENERAL'S OFFICE  
WASHINGTON  
REPORT OF DEATH

ABK/ch4635

16 October 1943

DATE

293 Kollbocker, Ernest

FULL NAME <b>Kollbocker, Ernest (nmi)</b>		ARMY SERIAL NO. <b>32 237 367</b>
GRADE <b>Pvt</b>	ARM OR SERVICE <b>Infantry</b>	DATE OF BIRTH <b>1 Aug 1917</b>
HOME ADDRESS <b>Hamburg, New Jersey</b>		
DATE OF DEATH <b>16 Sept 43</b>	PLACE OF DEATH <b>North African Area</b>	CAUSE OF DEATH <b>Killed in Action</b>
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP, & ADDRESS) <b>Mrs Anna Kollbocker (mother) RFD Hamburg, N. J.</b>		
BENEFICIARY (NAME, RELATIONSHIP, & ADDRESS) <b>Marion Kollbocker (wife) Anna Kollbocker (mother) Hamburg, N. J.</b> <b>Ervin Kollbocker (brother) Franklin, N. J.</b>		

BY ORDER OF THE SECRETARY OF WAR:

THIS COPY FOR THE Q. M. G. (CONFIDENTIAL)

(OVER)

**J. W. Reinhart**  
ADJUTANT GENERAL

ADDITIONAL DATA: (CONFIDENTIAL)

STATION OF DECEASED Italy (North African Area)

OCT 28 1942 3:37 PM

RECEIVED DIVISION