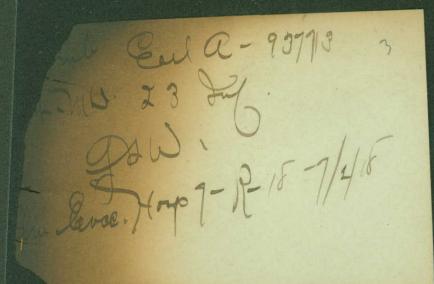
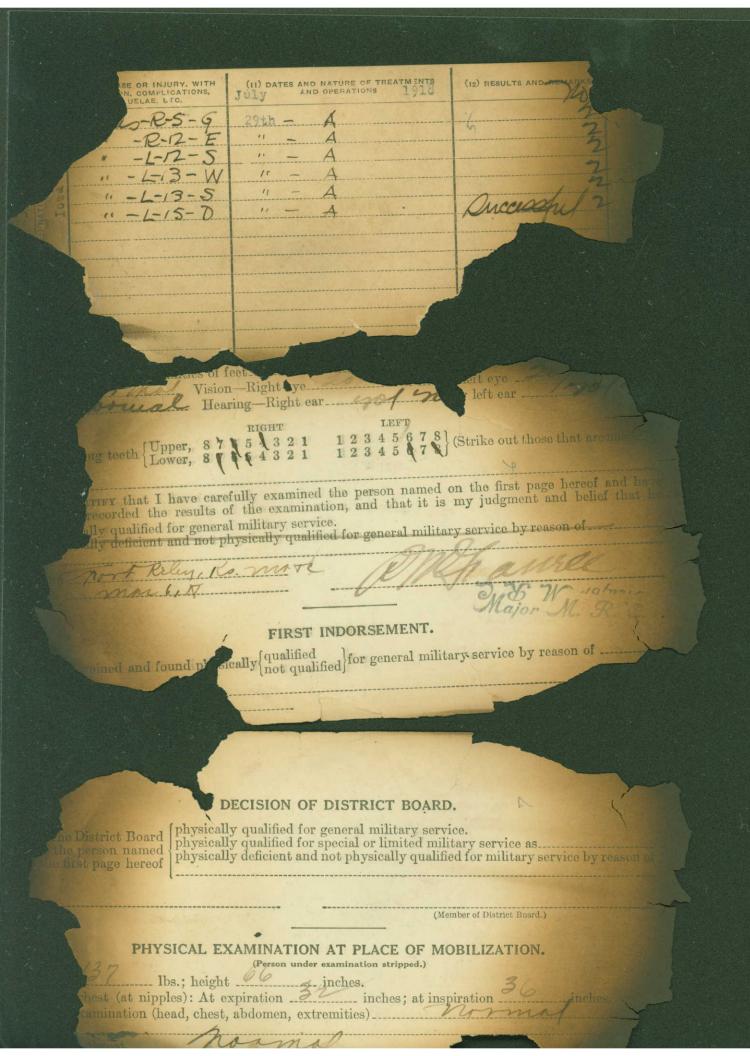
APPLICATION PO ENLISTED MEN assd Pyt Cas Det I apply for Victory Medal with appropriate clasps for service in the United States Army in The World War: Omaha, Nebr. Major operations participated in (Instruction 2): (Station of forwdg. or apprg. offic CAMBRAI SOMME OFFENSIVE To The Adjutant General of the Arm BY SOMME DEFENSIVE OISE-AISNE TWEWRITER LYS YPRES-LYS AISNE ST. MIHIEL MONTDIDIER-NOYON MEUSE-ARGONNE CHAMPAGNE-MARNE VITTORIO-VENETO AISNE-MARNE

Defension of the state of the s NO FRANCE; Signature of ___ITALY; ____SIBERIA; ____RUSSIA; _X_ENGLAND 2 Applicant With (Instr. 6) SECOND INDORSEMENT. recommended (Division Surgeon.) THIRD INDORSEMENT. as recommended in second indorsement. (Major General, Commanding.)



(State Francisco (City) (City) (Date A	a ther ationship) ar 4/18 of Enlistment) ug 8/1889	N.A. N.G. C.R.C. U.S.M.C.	Pyt	- \$-		
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(Date A) Open June 8/	ar 4/18 e of Enlistment) ug 8/1889		Pvt	TO 4		THE RESERVE
one June 8/	ug 8/1889				ley Ar	r he
	te of Birth)	on	Carpe			0.01
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9	who to duty 1	191	1 73/1	9		
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o U. S. SS Mrs. Texan	- P. L Mrs com	M.H.	Holcon	· ·		
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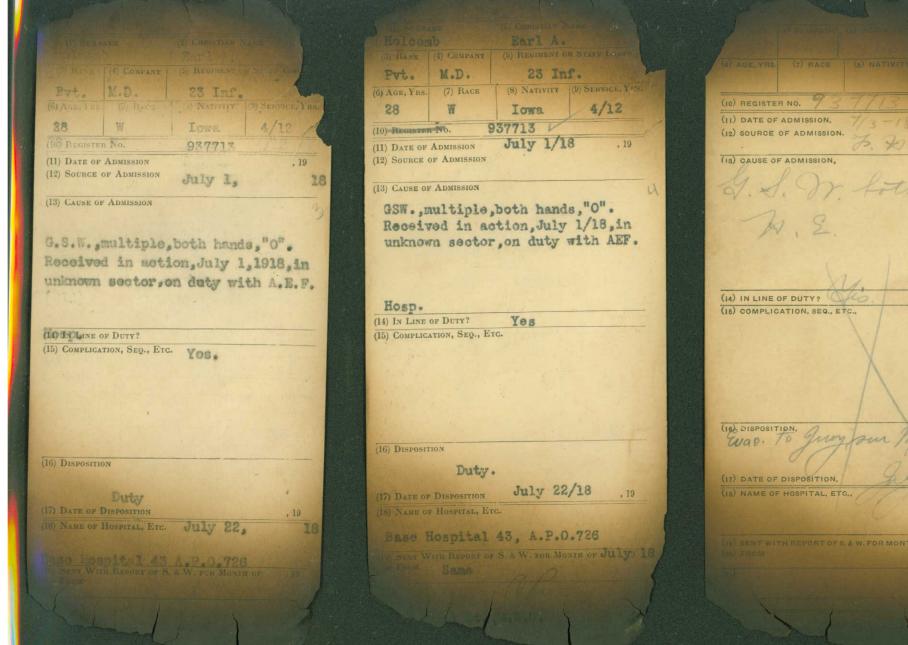
APPLICATION TO BE SENT TO MEDICAL ADVI-DRY BOARD. I hereby make application to be sent to a Medical Advisory Board for further physical examples of the sent to be sent to a Medical Advisory Board for further physical examples of the sent to be sent to be sent to a Medical Advisory Board for further physical examples of the sent to be (Signature of registrant.) REFERENCE TO MEDICAL ADVISORY BOARD. Respectfully referred to Medical Advisory Board or further physical examination of the person named on the first page hereof. (Member of Local Board.) EXAMINATION BY MEDICAL ADVISORY BOARD (Person under examination stripped.) inches. piration _ by that the foregoing questions and my answers thereto have been read over to p tand the questions, and that my answers thereto are correctly recorded and true in all respectively. er certify that I have been fully informed and know that making or being a party to much tement as to my fitness for military service renders me liable to punishment by imprisonment (Signature of person examined.) HYSICAL EXAMINATION BY EXAMINING PHYSICIAN OF LOCAL BOARD. (Person under examination stripped.) lbs.; height 60 inches. 3 inches. At inspiration, 36 inches. examination (head, chest, abdomen, extremities) ________ Lungs Correct y organs (uri ill be examined in suspicious cases) Hemorrhoids ____ FINDING OF LOCAL D physically qualified for general military service physically qualified for special or limited military service physically dencient and no physically qualification. This Local Board mas the person named on the first page hereof (Member of Local Board.) APPEAL FROM FINDING OF LOCAL BOARD. I hereby appeal from the above finding of Local Board for

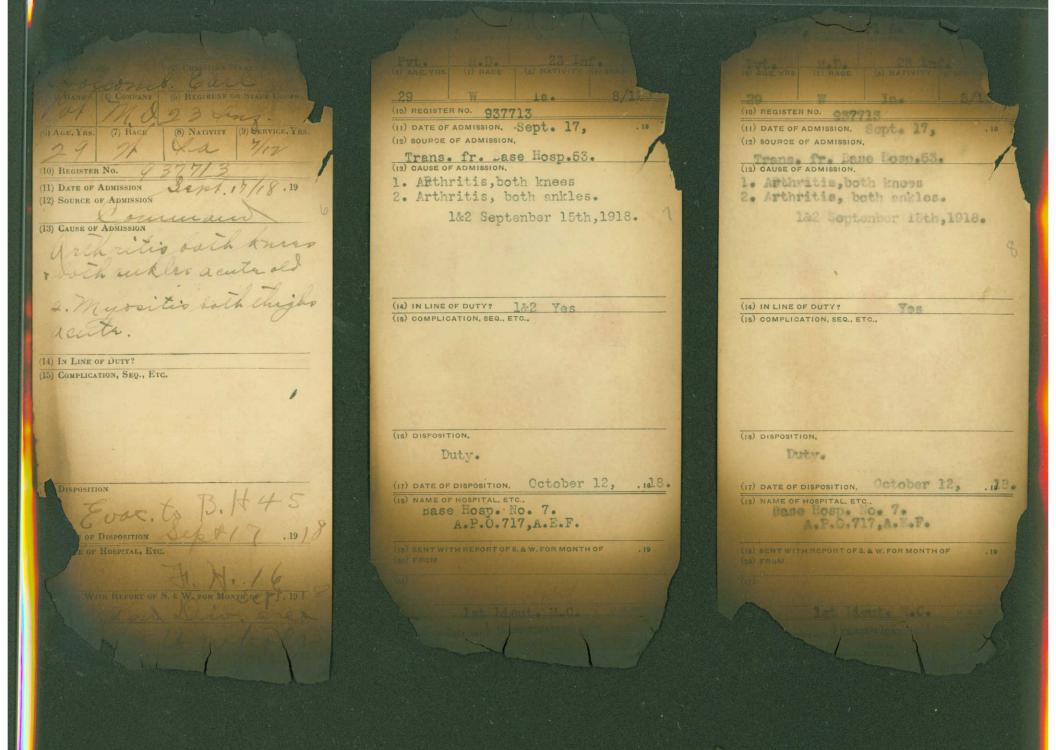
(Signature of registrant.)

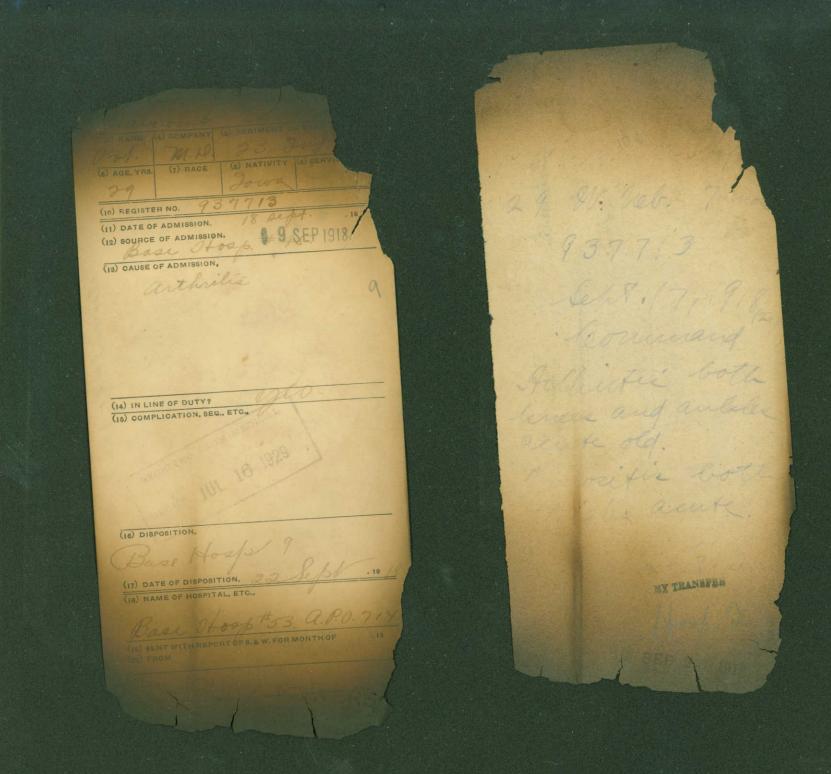
on the ground that

soard for the County of etts Bluff, State of Webraska, Gering, Nebra Local Board for ____ REPORT OF PHYSICAL EXAMINATION. Serial No. 939 Order No. (Christian name.) STATEMENT OF PERSON EXAMINED. we you found that your health and habits in any way interfere with your ability to earn a lively bood & If so, give details_____ onsider that you are now sound and well? If not, state details under treatment in any hospital or asylum? hospitals or asylumi mry organs (urine will be examined in suspicious cases)___ Hemorrhoids ____ foot or other deformities of feet __ Vision—Right eye---; left eye Hearing—Right ear ____; left ear ___ I hereby certify that the person named on the first page hereof has been carefully examine that the results of the examination have been carefully recorded and that it is the judgment ac of the Medical Advisory Board that he physically qualified for general military service. physically qualified for special or limited military service as ____ physically deficient and not physically qualified for military service by reason of LEFT. 6 5 4 3 2 1 1 2 3 4 5 6 7 8 (Strike out those that are missing color Particular qualifications of registrant found to be physically deficient and not qualified for general military service (note hereunder any trades, professions, or other civil ions in which the registrant has had experience)_____ ertify that I have carefully examined the person named on the first page hereof and have carefully examination, and that it is my judgment and belief that he ally qualified for general military service. lly qualified for special or limited military service as y deficient and not physically qualified for military service by reason of-(Examinir & physician.)

CAT CALES!
gements:
hateautheiry,
St miliel
ersea service: From May 21/18 to June 2 1/10
mal separation from service: July 9/19.
Honorably discharged on demobilization.
- Honorably discharged:
Discharged. Not recommended for reculistment.
Dishonorably discharged.
Deserted.
Killed in action.
Died of wounds received in action.
Died:
Slightly July 1/18
Wounded in action:
sability upon discharge: O
decorations: au ardid.
ach Craise Resure







REPORT OF DISABILITY BOARD.

Hold at Casual Officers' Depot, SOS, AEF, under G.O. No. 41, GHAEF, Ich. 14/18.

(Date)

Halcomb, Earl A. 937713

Pvt.Med.Dept.23rd Inf.

- 1. Nature of disability: hands, multiple.
- 2. Disability (did not) oxist prior to entry is service.
- 3. Disability wis most in line of duty
- 4. Classification: A.
- 5. Nature of duty recommended: Hold 5 days no work.

Let Lt. M. R. C. Mem.

Gajor M. C. Pres.

let It.M. R. C. Rec.

TED COMPENSATION FOR SERVICE IN Quantum (Army, Navy, Coast Guard, or Marine Corper

application must be sent to the War Department, Navy Department, or Marine Corps, as in instructions depending on whether your last service was in the Army, Navy, Coast Guard, envelope provided for this purpose, with the proper address printed on it. ne Corps. Use

READ INSTRUCTIONS OVER CAREFULLY

e Secretary of Wa ry of the Navy.

he following statements are made by me in support of my claim for Adjusted Compensaoder the provisions of the World War Adjusted Compensation Act:

ne of veteran:	- a-	
Holeomb Ear	1 atl	Souriee or as
(Last) (First	(Middle)	Serial No. 9377/3
ddress of veteran or depe		the and
	THE RESERVE	
June of Scott	RBbuff nels	anka
(Cou	inty) 00 (State)	
Month of veteran Quy	ust-8-1889	at Murray Four
inal entry into World Way and	(Pay) (Year)	(City) / (State)
into World War ser	vice in the Army, Navy	, Coast Guard, or Marine Corps
was as a Private	on march	(Day) (Year)
(Rank or grade)	/ (Month	(Day) (Year)
sering n	ebr.	
Data of consection Declar	och - 1010	× 10 7 7
Date of separation July -	(Day) (Year) at C	amp Dodge & a.
have oversea service		
have oversea service	May 21/18+	June 07/19.
organizations, at stations	or on vessels in the ord	er nemed as follows:
The state of the s	from Make L.	- 19/81 - Obil 11-1810
of the Maria	from June 15-1	9/8 to Sept 23-1918
292 110.60	from 100,1-19	9/8 to Supt 23-1918 18 to July 1-1919
	from July 9-19	
	from I	<u></u>
	from	to
	from	
X	from	to
	from	to
haracter given on discharge certific	note Evanlle	+1
from 9 will be filled in only by men who	se service or part of whose se	arpice was in the Marine Con-
		arthe corps
imbarked for oversea service on		-,
at .	(Name of vessel)	(Date)
(Name of port)	, and disembarked from _	
	at	(Name of vessel)
(Date)	(Name of port)	, on return to United
States from oversea service.		

	oned service:	GRADES	From—	To
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	commissioned or warra	nt officer performin	g home service not w	ith troops and receiv-
	commutation of quarters	or of subsistance	from	
	nions: Ron	Station	g this period I was on FROM—	duty
	ted a farm or indust	trial furlough from	None	
	ving.	200 wear and present	(17) allow military of the	or naval debranch of vice in
	wagnet discharged for	alienage.		
72				
	by that I am the P	(See instructions for this i	named	in this application;
	the statements made he was of applying for Adjusted Compensation Act;	rein are made by I	me of my own free a	a of the W. 11 W
	Oct. 8-1924	Signature of applicant	Tarl Anthe	my Holo
	adersigned, certify tha	t we know the pers	on signing the application; above application;	ation to
	9	vears and	ralt	100 / F
	but he (che) understands hw for making false states	the statements mad		
	nature of witnesses: (1)	Clare	allison	Enhery
		(First name)	(Middle name)	(Last name)
	(2)	Estel.	(Address)	7 +1
	(4)	(First name)	(Middle name)	(Last name)
		JIN	(Address)	

INDIVIDUAL RECORD OF DECORATIONS AND CITATIONS

12-6-32 Mgg 4

Date.

Initials of clerk

and reviewer,

The following is a statement showing decorations awarded in the case of the above named, together with the citations pertaining thereto, compiled from records on file in The Adjutant General's Office:

awarded Purple Heart 12-6-32 on account of wound received in action 7-1-18.

Report of Disability Board

Held at B.H. 7, A.P.O. 717 under G. O. No. 41, G. H. Q. A. E. F., March 14, 1913.

Sent to Base Depot, A.P.O. 726.

2 L Nature of Disability: Arthritis - acute

Disability { did x } exist prior to entry into service.

Disability { is } in line of duty.

4. Classification: B-2

(Enter letter indicated A, B, B, C, C, D)

Nature of duty recommended:_

Report of Disability Board

Held at Base Hospital No. 60, APO #731, AEF. under G. O. No. 41, G. H. Q. A. E. F., March 14, 1918.

Holcomb, Earl A. 937713 (Name) (Number) (Number) 23rd Inf. (Regt. or Dept.)		December 3, 1918.
Private. (Name) (Number) M.D., 23rd Inf. (Regt. or Dept.)	Holcomb. Earl A.	(Date)
The state of the s	(Name)	
Admitted from Hq. Casual Officers Depot, S.O.	the same of the sa	

Nature of Disability: Arthritis, knee, bilateral,

Acute. Recovered.

- 2. Disability {**did* } exist prior to entry into service.
- 3. Disability { is } in line of duty.

Classification: "A"

(Enter letter indicated A, B₁ B₂ C₁ C₂ D)

ure of duty recommended: Full duty.

All Herboher

The wound, injury, or disease tis not likely to result in death or disability. In my opinion the wound, injury, or disease tis not disease this not disease. In view of occupation he is per cent disabled. Remarks M. C., U. S. Arm. JUL 9 1919		named above has felt date been given a randol on the land and the
The wound, injury, or disease his not likely to result in death or disability. In my opinion the wound, injury, or disease fide not disability. In my opinion the wound, injury, or disease. In view of occupation he is. One of the United States. In view of occupation he is. One of the United States. In view of occupation he is. One of the United States. One of the United States.		
The wound, injury, or disease is not likely to result in dealth or disability. In my opinion the wound, injury, or disease is did not originate in the line of duty in the military service of the United States. In view of occupation he is. Per cent disabled. Remarks M. C., U. S. Arm.		
The wound, injury, or disease (is not) likely to result in death or disability. In my opinion the wound, injury, or disease (id in at originate in the line of duty in the military service of the United States. In view of occupation he is	-	(Describe the nature and location of the detect, wound, injury, or diseas.
The wound, injury, or disease (is not) likely to result in death or disability. In my opinion the wound, injury, or disease (id in at originate in the line of duty in the military service of the United States. In view of occupation he is	1	
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The wound, injury, or disease fils not likely to result in death or disability. In my opinion the wound, injury, or disease fidid originate in the line of duty in the military service of the United States. In view of occupation he is		OT OVER A
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In view of occupation he is	L	The wound, injury, or disease his and likely to result in death or disability.
Remarks	-	The wound, injury, or disease tis not likely to result in death or disability. In my opinion the wound, injury, or disease tidid not originate in the line
Remarks 12 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1	The wound, injury, or disease tis not likely to result in death or disability. In my opinion the wound, injury, or disease tid did or disability or disease tid did not like in the line of duty in the military service of the United States.
M. C., U. S. Arm	-	of duty in the military service of the Diffied States.
M. C., U. S. Arm	i	In view of occupation he isper cent disabled.
M. C., U. S. Arm	1	In view of occupation he isper cent disabled.
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M. C., U. S. Arm		In view of occupation he isper cent disabled. Remarks
JUL 9 1915		In view of occupation he is
JUL 9 1915		In view of occupation he is
JUL 9 1915		In view of occupation he is
1010	k	In view of occupation he is
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soldier who made and signed the foregoing declaration has a twound, injury, for disease, which was incurred about, 191 , The nature and location of the twound, tinjury, for disease, so far as known. The circumstances under which incurred were_____ In my opinion the wound, injury, or disease (†did not) originate in the line of duty in the military service of the United States. Remarks _____ Camp Dodge, Iowa

2 Div Fla Hodo Sec.

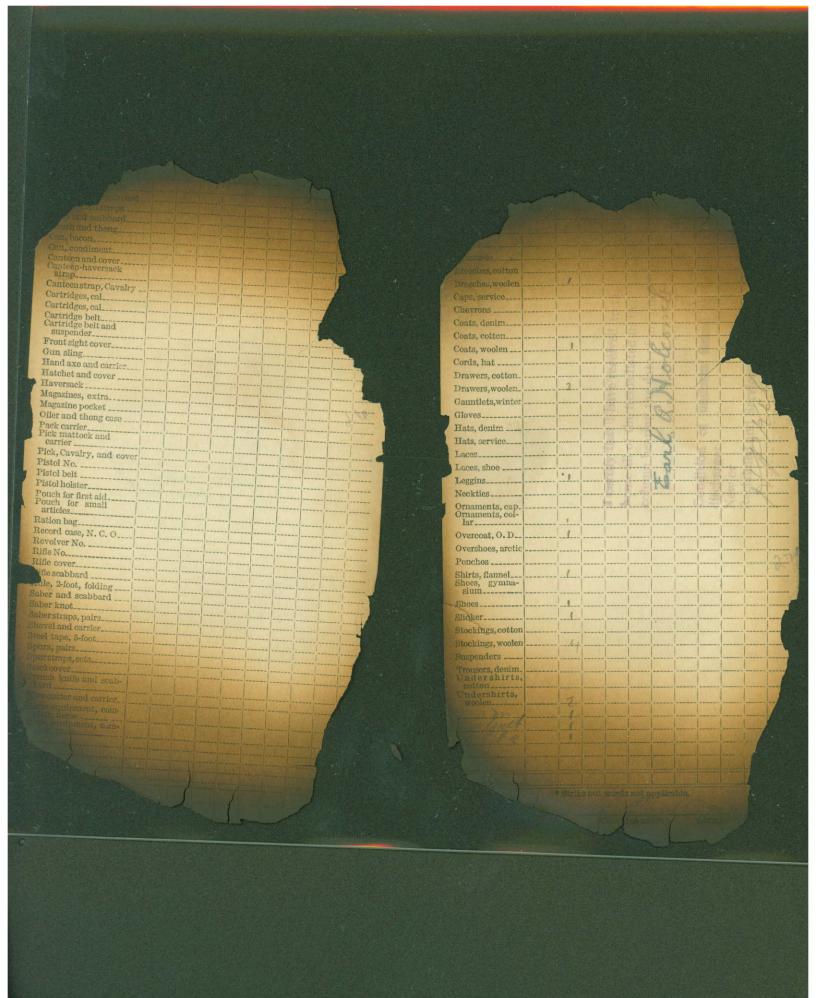
Jun 19

Pvt Cas MD.

Transfd to Infirm 23 Inf.

DECLARATION OF SOLDIER Question. Have you any reason to believe that at the present time you suffering from the effects of any wound, injury, or disease, or that you any disability or impairment of health, whether or not incurred in the m service? Answer No Q. If so, describe the disability, stating the nature and location of the wound, injury, or disease. Q. When was the disability incurred? Q. Where was the disability incurred? Q. State the circumstances, if known, under which the disability was incurred. I declare that the foregoing questions and my answers thereto have been read over to me, and that I fully understand the questions, and that my replies to them are true in every respect and are correctly recorded.

Sec Div Fld. Hosp Sect. J. A. Tremblay, Captain,S.C. Personnel Adjutant. No.6. Vt Cas Co MD Attached for D.



Report of Disability Board HospitaBase Hospital#43 APO.726 Register No 937713 Ward Hosp Mixte d at Base Hospital No 60, APO #731, AEF. inder G. O. No. 41, G. H. Q. A. E. F., March 14, 1918 Name Holcomb. Earl A. December 3, 1918.
(Date) anPvt c23 Inf Regt. Sing Med. Dept Age (years) 28 Race W Service (years /12 cloomb, Earl A. Birthplace Iowa M.D., 23rd Inf. ivate Station COD. SOS. lmitted from Hq., Casual Officers Depot, S.O.S. Date of admining 6.18. (July 1.18) at to Cha duly with Baret Joys 80 Source of admission Transfer. Vac. # 7. ture of Disability: Arthritis, knee, bilateral Religion Bap. Recovered Home address Scotts Bluff exist prior to entry into service. ility is in line of duty. Name and address of nearest relative. Mother Mrs. Anna, Holcomb. assification: "A" Same Address (Enter letter indicated A. B. B. C. C. D) Initials of admitting officer t. G.A.S. ature of duty recommended: Full duty. (To be filled in by ward surgeon when case is completed



Condition on admission: Good Lords -Liver, Weight: Normal 140 ; Present Spleen, General condition: Good -Tenderness, Special senses: Hearing in right ear impaired - Sense of someel Masses, Skin and mucous membranes: Nervous system: Osseous system: Glandular system: Muscles and joints: Vascular system: Diagnosis on transfer card: es. D. W. Bath handa Blood pressure: Heart: Diagnosis of ward surgeon: Lungs: Wounds mult

Condition on admission: Lecals daily , 7.19. Lorroil Qualled a - argyred 10's.

WAR DEPARTMENT THE ADJUTANT GENERAL'S OFFICE 01 Holcomb, Earl A. WASHINGTON 6-18-31) Ex June 18, 1931. MANUFAMBUM for the Recorder, Decorations Board, A.G.O. SUBJECT: Case of Earl A. Holcomb, #937713, formerly pvt MD., 23d Inf., 2d Div., A.E.F., for consideration for the award of the D. es accompanying: 201 papers; extracts of AG and AG 370.2 23d Inf. 7715-18. Previous action: None; recommendations withdrawn from the records of the 2d Div., and never forwarded to GHQ AEF or the War for consideration; cited in GO 44, 2d Div., 1918, as follows: "Heroically continued to dress the wounded under heavy bombardment until they were themselves wounded and evacuated. This near Chateau-Thierry, July 1, 1918." 3. War Dept. records show: Slightly wounded July 1, 1918. By order of the Secretary of War: Adjutant General. nels: all papers. ecommendation of the Board APPROVED AUG 2 0 1931 By order of the Secretary of War: Major General, The Adjutant General. Say

REPORT OF DECORATIONS BOARD

Convened pursuant to Paragraph 47, S. O. 167-0, War Department, 1921 and Paragraph 7, S. O. 271, War Department, 1927, as amended.

W. D., Washington, D. C., (date) August 18, 1951.

The board having been properly conver and organized, her

Earl

First Name

Middle Name

713, formerly pvt., M.D., 23d Infantry, 2d Division, A.E.F.

Rank and Organization

2. By decision of a majority of the board, the above-named individual not recommended for the award of the DISTINGUISHED SERVICE CROSS for July 1-2, 1918.

Reason for disapproval: The deed performed is not constant an act of extraordinary heroism within the meaning of the award of the Distinguished Service Cross.

Remarks: The citation in General

demed the artraria

ONSIDERED BY TRE OF

39A

orable Discharge from The United States I Index and filed for record Mediate OF DEFES TO ALL WHOM IT MAY CONCERN: This is to Certify, That * Earl a Holeomb 37713, pot Gas Det 965 Dem Though Jas HE UNITED STATES ARMY, as a TESTIMONIAL OF MONEST AND ERVICE is hereby Honorably DISCHARGED from the military service MITED STATES by reason of Telanth W.D. 11/15 4-a. X Said Earl a Holeomb Murray, in the State of close entisted he was 28 prears of age and by occupation a I. S. e. eyes, brown hair, ruddy jeer 6 mones in Siven under my hand at Carrie Todge. I day of July , one thousand nine founded and I Major Sig Coy *Insert name, Christian name first; c. g., "John Doa." †Insert Army serial number, grade, company and regiment or arm or cotps or department; c. g., "1,620,502"; "Company A, 1st Iniantry"; "Sergeant, Quartermaster Corps"; "Sergeant, First Class, Medical Department."

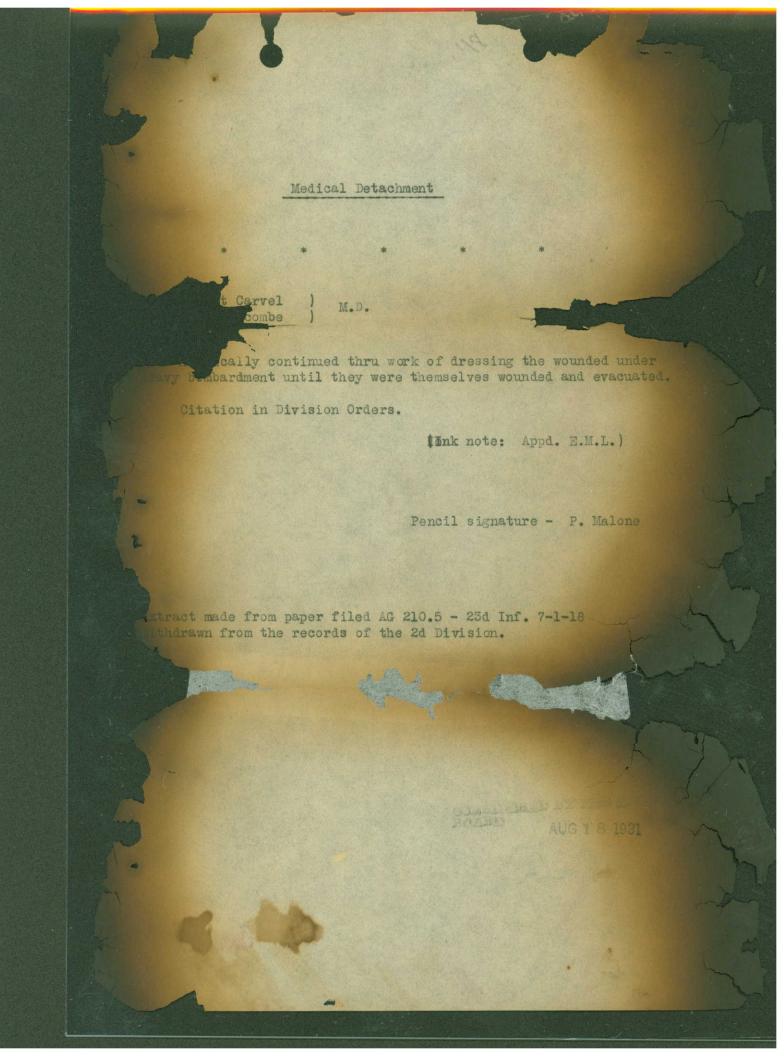
al discharged prior to explication of service, give number, data, and source of order or full description of authority

m. m. Enes Garl a Holeomb inlisted, or Inducted; Mar 4, 1918, at Terring n enlistment period at date of di oncommissioned officer: Muly Horsemanship: __ Battles, engagements, skirmishes, expeditions: QE. F. Chateau 7-1, 1918, 21 muliel Sept 12-18, 1912 constions, Wedals, Badges, Citations: please of any vocation: Lath loveler is received in service: 3 W. James vilareral 171 condition when discharged: maris completed 3-25-18 Single Ex allent 03, no absences worde 15-14. Entitled Favel pay. Ly mature of soldier: Earl a. Holcomb AND IN INDIVA 9 1919 Proceeding

To Co Mill Service (years) Regt. or 23 (Yrs) 29 Race Staff Corps beneloped. hplace Murray Jour Operation: Bpecial senses: Station not impaired Date of admission Dept 23/18 Skin and mucous membranes: Monnel Source of admission Base #53 Date: Glandular system: mond Anesthetic used: Amount: Religion 13. Chot. Yascular system: Administration of anesthetic begun: Home address Scotts Bluffy pulse good quality Administration of anesthetic ended: Blood pressure: Name and address of nearest relative Operation begun: My a. H. Holsomb. Operation ended: Initials of admitting officer Heart: (To be filled in by ward surgeon when Anesthetizer: case is completed. Disposition Luty S. S. By Operator: Lungs: Date Oat 12, 1918 Genito-urinary system Final diagnosis arthrules a price rankle for indition on completion of case

moderately. Versmal munpo typhoid. Mainly: my. ~~ TBC. 9. SW etc - mig. benereal: Immhea 10 pr ago.

Probation Officer case Copy Report of Separation furnished for separation Selective Service case CSC Form 813 request from Finance center request GAO request OTHER (Show source of inquiry, action taken, and date)



AG 201 Holcomb, Earl (Ebc)

February 15, 1927.

Mr. Earl Holcomb, 1625-6th Ave., Gering, Nebraska.

here is forwarded herewith a French diploma, No. 99,662

(E. U. No. 5476) pertaining to the award of the French Croix de

Guerre, with bronze star to you,

under order No. 12.000 "D" dated November 29, 1918,

Central Headquarters, French Armies of the East.

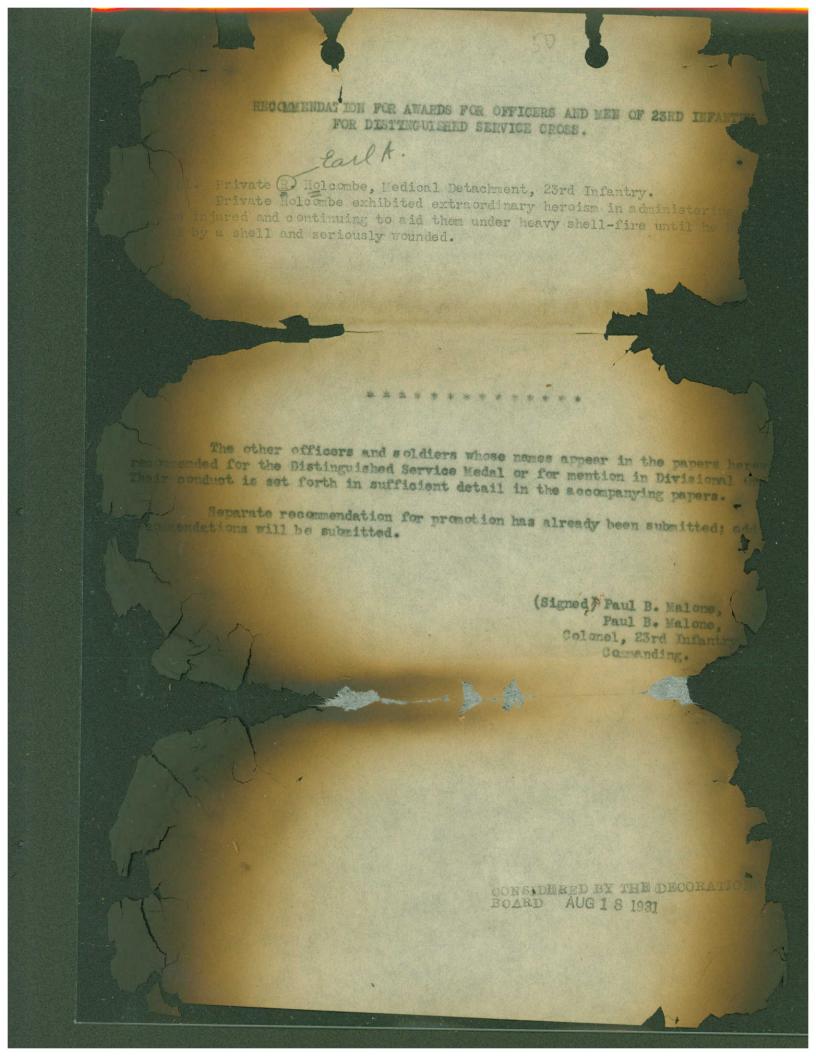
· It is requested that the inclosed receipt be accomplished

turned to this office.

Very truly yours.

Major General, The Adjutant General. By:

2 Incl. (Diploma and receipt card) John B. Shumas



WAR DEPARTMENT THE ADJUTANT GENERAL'S OFFICE WASHINGTON mob, Marl A. December 6, 1932. 19-32) WW Purple Heart Quartermaster General. The Secretary of War directs that a Purple Heart, enwith the name of the recipient, be issued to Mr. Rarl A. Holcomb Cering, Nebraska account of wound received in action July 1, 1918, while made for Mr. Holcomb. File, mgg 4/3 12-6-32.

Headquarters Twenty Third Infantry, A.E.F., France, July 15, 1918. Commanding Officer, 23rd Infantry, A.E.F. Adjutant, 2nd Division, A.E.F. SUBJECT: Report of operations July 1/2, 1918. I enclose herewith report of operations of the 3rd Bn, 23rd Infanting tached troops, July 1/2, 1918, and request that it be filed in connection by my report of the same operations already submitted with all orders, plans ed wers as enclosures. 2. I enclose a list of recommendations for awards founded upon the report of subordinate officers. Recommendations for similar awards have already been pomitted. These recommendations were nostly in lead pencil, were not in dupl to and were hastily made. It is quite likely that they differ in some detail those now submitted. It is recommended that if any names are omitted from ies lists which were included in the previous lists the previous recommends to considered in order that the case of the individual concerned may receive sideration before the board charged with rendering final decision upon the to be grayted. (Signed) Faul B. Malone, Paul B. Malone, Colonel, 23rd Inte Commanding. regard of this paper withdrawn from the 2d Div. records and classified 22d Inf. (7-15-18), bore the following notation relative to report tions referred to in par. 1: "Report of operations sent to G-3, in Feb. 1919." AUG 1 8 1931