

WWII ✓ ~~WWI~~ 232a

ORIGINAL

|   |  |   |   |   |  |
|---|--|---|---|---|--|
| 1. NAME OF DECEASED—LAST—FIRST—MIDDLE (Print or type)<br><i>Whitby David Campbell</i>               |  |   | APPLICATION FOR HEADSTONE OR MARKER<br>(See attached instructions. Complete and submit original and duplicate)  |   |  |
| 2. ENLISTMENT DATE (Month, Day, Year)<br><i>JAN 22, 1942</i>  |  | 3. DISCHARGE DATE (Month, Day, Year)<br><i>NOV 2, 1945</i>  |   | 12. EMBLEM (Check one)<br><input checked="" type="checkbox"/> CHRISTIAN (Latin Cross)<br><input type="checkbox"/> HEBREW (Star of David)<br><input checked="" type="checkbox"/> NONE <i>15-947-686</i>                                |  |
| 4. SERVICE NO.<br><i>18-079-333</i>   |  | 5. PENSION OR VA CLAIM NO.<br><i>15-947-686</i>   |   | 13. CHECK TYPE REQUIRED<br><input type="checkbox"/> UPRIGHT MARBLE HEADSTONE<br><input type="checkbox"/> FLAT MARBLE MARKER<br><input checked="" type="checkbox"/> FLAT GRANITE MARKER<br><input type="checkbox"/> FLAT BRONZE MARKER |  |
| 6. STATE<br><i>Texas</i>  |  | 7. GRADE<br><i>T/Sgt</i>  |   | 8. MEDALS   |  |
| 9. BRANCH OF SERVICE, COMPANY, REGIMENT, AND DIVISION OR SHIP<br><i>U.S. Army Signal Service BN</i> |  |   | 14. SHIP TO (Name and address of person who will transport stone or marker to cemetery)<br><i>JOHN McMULLEN</i> |   |  |
| 10. DATE OF BIRTH (Month, Day, Year)<br><i>May 21, 1907</i>   |  | 11. DATE OF DEATH (Month, Day, Year)<br><i>May 29, 1961</i>   |   | 15. FREIGHT STATION<br><i>THROCKMORTON, TEX</i>   |  |
| DO NOT WRITE HERE   |  |   | 16. NAME AND LOCATION OF CEMETERY (City and State)<br><i>Throcknorton Cemetery (pp 13 20)</i>                   |   |  |
| RECEIVED<br><i>JUN 13 1961</i>  |  | 18. NAME AND ADDRESS OF APPLICANT (Print or type)<br><i>Mrs. Lula B. Whitby, Throckmorton, Texas.</i>   |   |   |  |
| VERIFIED  |  | 19. I certify this application is submitted for a stone or marker for the unmarked grave of a deceased member or former member of the Armed Forces of the United States, soldiers of Union and Confederate Armies of the Civil War. |   |   |  |
| B/L<br><i>1138646</i>   |  | I hereby consent to accept responsibility for properly placing the stone or marker at the grave at no expense to the Government.  |   |   |  |
| ORDERED<br><i>JUL 19 1961</i>   |  | SIGNATURE OF APPLICANT<br><i>Mrs. Lula B. Whitby</i>  |   | DATE<br><i>6-5-61</i>   |  |

QMC FORM 646 REPLACES OQMG FORM 623, 8 FEB 49 WHICH MAY BE USED

IMPORTANT—Reverse Side Must Be Completed

19-11428-9 GPO

*June 16, 61* *6NMA-2V* *988*