

Honorable (circled)

1. NAME OF DECEASED—LAST—FIRST—MIDDLE (Print or type) HALBERT WILLIAM BERRY		APPLICATION FOR HEADSTONE OR MARKER (See attached instructions. Complete and submit original and duplicate)	
2. ENLISTMENT DATE (Month, Day, Year) 11-3-35	3. DISCHARGE DATE (Month, Day, Year) 11-6-45	12. EMBLEM (Check one) <input checked="" type="checkbox"/> CHRISTIAN (Latin Cross) <input type="checkbox"/> HEBREW (Star of David) <input type="checkbox"/> NONE	13. CHECK TYPE REQUIRED <input type="checkbox"/> UPRIGHT MARBLE HEADSTONE <input type="checkbox"/> FLAT MARBLE MARKER <input checked="" type="checkbox"/> FLAT GRANITE MARKER <input type="checkbox"/> FLAT BRONZE MARKER
4. SERVICE NO. 299-0614	5. PENSION OR VA CLAIM NO. 2-6 811-953	14. SHIP TO (Name and address of person who will transport stone or marker to cemetery) Mrs. J. M. Halbert (over)	
6. STATE TEXAS	7. GRADE Private 1st	8. MEDALS *over WWII	15. FREIGHT STATION Shrockmoton, Texas
9. BRANCH OF SERVICE, COMPANY, REGIMENT, AND DIVISION OR SHIP US Marine Corps		16. NAME AND LOCATION OF CEMETERY (City and State) Shrockmoton Texas	
10. DATE OF BIRTH (Month, Day, Year) 11-14-19	11. DATE OF DEATH (Month, Day, Year) 9-5-55	17. I CERTIFY THE APPLICANT FOR THIS STONE OR MARKER HAS MADE ARRANGEMENTS WITH ME TO TRANSPORT SAME TO THE CEMETERY. SIGNATURE Minneapolis Funeral Home DATE Mar 2, 1956 By Harold F. ...	
DO NOT WRITE HERE		18. NAME AND ADDRESS OF APPLICANT (Print or type) Mrs. J. M. Halbert, Shrockmoton, Texas	
RECEIVED MAR 5 1956	VERIFIED 17 APR 1956	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. I hereby agree to accept responsibility for properly placing the stone or marker at the grave at no expense to the Government.	
BL WY 4966779	COLUMBUS HARBOR MISSISSIPPI COLUMBUS, MISSISSIPPI	SIGNATURE OF APPLICANT Mrs. J. M. Halbert	DATE 3-1-56