

✓
Phillips, Jake D 3872276
Pvt. Co, L 150th Infantry
38th Division.

DISPOSITION OF REMAINS

2897

PENALTY FOR PRIVATE USE TO AVOID
PAYMENT OF POSTAGE, \$300.

Phillips, George
Pt. # H 2342 H 7
Co. "C." 344 labor Bn.

Died in England 10/9/18

All papers sent to
Washington

Body not rec'd.

WAR DEPARTMENT.

OFFICIAL BUSINESS.

Phillips, Jake D.

Phillips Jake D 3872276
Pvt Co, L 150th Infantry
38th Division.

Kindly furnish date of sailing:

Jake D Phillips,
Priv. Co. 2, 150th Inf.

U.S. "Delta" 10/4/18.

REPORT OF DEATH

(Par. 83½a, A. R., 1913.)

Port of Embarkation, Hoboken, N.J.

March 19, 1919

PHILLIPS, Jake D. 3872276

(Surname.) (Christian name.) (Army serial number.)

Private Co. L, 150th Infantry

(Grade.) (Organization.)

died Oct. 13th, 1918, at S.S. Delta at sea.

Nature of injury or disease Influenza.

Direct cause of death Pneumonia.

Death ~~was~~ ^{was not} in line of duty and ~~was~~ ^{was not} the result of the deceased's own willful misconduct.

Earl W. May, 1st Lieut. M.C.

(Signature of medical officer.)

Earl W. May
1st Ind.

Hoboken, N.J., April 1st, 1919

To THE ADJUTANT GENERAL OF THE ARMY,
Washington, D. C.

1. *The report of the surgeon is approved.

*A ~~board of officers~~ ^{board of officers} has been convened to investigate the case.

2. The deceased was ~~married~~ ^{single} at time of death.

3. Amount of Government insurance in effect at time of death, \$ 5,000

4. Name and address of person who was to be notified in case of emergency:

Sarah Davis Phillips (Mother)

(Name and degree of relationship; if friend, so state.)

R.R. #6

(No. and street or rural route; if none, so state.)

Dresden, Tenn.

(City, town, or post office.) (State or country.)

5. Date and place of burial, with number and locality of grave. (If not interred at post, state disposition made of remains.)

Buried at Sea.

Remarks

Specimen taken
John A. Nelson,

Inclosures:

1 Service Record

1 Pay Card.

1 Final Statement.

*2 ~~Agencies of Effect~~

Form 415, A. G. O. TAG

Ed. July 10, 1918.

*Strike out words not applicable.

Copy for Q. M. G., under 83½ A. R.

112

~~115~~

Case Jake D. Phillips

Memo. for Disposition of
Effects Section.

Please advise the Disposition
of Remains Section immediately on
receipt of effects in above noted case.

Memo. to Disposition of
Remains Section.

The above effects were
received by this office on:

Effects Rec'd. 3-18-19 C.P.

SUBJECT (PRINCIPAL OR CROSS REFERENCE).

1112

Phillips, Jake
3872276

CONSOLIDATED INDEX CARD.

This card must not be taken from the Record Room.

CONSOLIDATED ENTRIES:

~~MO~~
~~MB~~
~~ME~~
~~MT~~
~~MO~~
~~ME~~
MUM
MUC

1112

Delta

Mim. #244

Case Prof. Jake D. Phillips
3872276

Memo. for Disposition of
Effects Section.

Please advise the Disposition
of Remains Section immediately on
receipt of effects in above noted
case.

Memo. to Disposition of
Remains Section.

The above effects were
received by this office on:

RECEIVED G. E. O. M., HOBOKEN

DEC 11 1918

jtl.

Assigned to Co L. 150 Inf. Aug 3, 1918
 Transferred to _____, _____, 191____
 Transferred to _____, _____, 191____
 Grade _____, _____, 191____
 Grade _____, _____, 191____
 Grade _____, _____, 191____
 Grade _____, _____, 191____

ADDITIONAL PAY.

(Marksmanship, gunner qualification, rating, mess sergeant, extra duty, certificate of merit, foreign service, short payment, etc. Give dates.)

Signature of soldier Jake O. Phillips
 (To be signed and witnessed when card is started.)

Witnessed by Charles Johnson, 1st Lt 150th Inf
 (Signature, with rank and organization of witnessing officer.)

† Date _____, 191____ Last paid in full to include _____, 191____

by _____

(Signature, with rank and organization of personnel officer.)

† Date _____, 191____ Last paid in full to include _____, 191____

by _____

(Signature, with rank and organization of personnel officer.)

† Date _____, 191____ Last paid in full to include _____, 191____

by _____

Certified a true copy
 (Signature, with rank and organization of personnel officer.)

† Date _____, 191____ Last paid in full to include _____, 191____

by A. W. Wrenshaw

1st Lieut. J. M. C.
 (Signature, with rank and organization of personnel officer.)

† Date _____, 191____ Last paid in full to include _____, 191____

by _____

(Signature, with rank and organization of personnel officer.)

† To be filled out only in case of transfer or detachment.

INSTRUCTIONS.

1. A pay account on this form will be opened for each soldier upon enlistment or reenlistment, or upon entry into active service in case of reservists.
2. When the soldier is transferred or detached this card will be transmitted to the new personnel officer in the manner prescribed in the special regulations governing the preparation of pay cards.
3. Each erasure or interlineation on this card will be initialed by the personnel officer.
4. In case the space provided for any part of the record proves insufficient, the entries will be extended on an extra sheet provided for the purpose, Form No. 644a, A. G. O.
5. When the soldier is furloughed to the reserve, discharged, or otherwise separated from the active service, his pay card will be filed with the service record.

SCORE CARD

Known Distance Rifle Practice

Revised—Special course "C"

Name Phillips, J. D. Company L Regiment 150
 Place Camp Shelby Date 8/13/18

Instruction

Yds Table No. 1—Slow Fire Total

100	4	7	5	4	4	5	4	4	5	5	4	4
200	4	5	5	4	4	4	4	3	0	0	3	3
300	4	3	4	3	4	3	2	3	2	4	3	2

Yds Table No. 2—Slow Fire

Total 109

100	4	5	5	4	4	4	5	5	4	5	4	5
200	3	5	5	4	5	4	4	5	4	4	4	3
300	3	3	4	3	3	4	4	4	4	5	3	7

Yds Table No. 3—Rapid Fire

Total 125

100												
200	5	5	0	0	0	5	5	0	0	0	2	0
300												

Yds Table No. 4—Rapid Fire

Total

100												
200												
300												

Record

Yds. Table No. 5—Slow Fire Total

100												
100												
200												
200												
300												
300												

Yds Table No. 6—Rapid Fire

Total

100												
200												
300												

Instruction

Yds. Table No. 7—Slow Fire Total

500	4	0	0	5	0	4	0	0	0	3	1	4
600												

Record

Yds. Table No. 8—Slow Fire Total

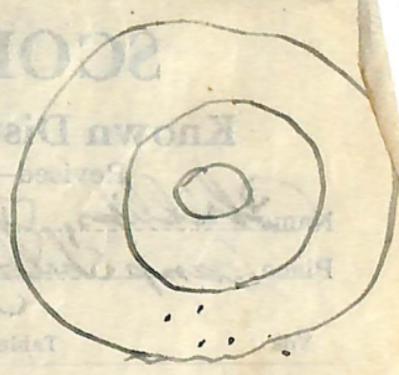
500												
600												

INSTRUCTIONS

An Officer must initial each string on margin.
 The scoring of the record practice will be closely supervised and the record will be verified and initialed by a company officer in the column provided for that purpose.
 Scores will be recorded with ink.
 There will be no classification, no badges, nor extra compensation for practice under this course.
 This card is for use as a score card on the target range, and upon completion of the practice it will be filed with the soldier's service record and will accompany the service record when the soldier is transferred or detached for an extended period.

SCORE CARD

Known Distance Run Practice



1 miss

100	1	2	3	4	5	6	7	8	9	10
90	1	2	3	4	5	6	7	8	9	10
80	1	2	3	4	5	6	7	8	9	10

70	1	2	3	4	5	6	7	8	9	10
60	1	2	3	4	5	6	7	8	9	10
50	1	2	3	4	5	6	7	8	9	10

40	1	2	3	4	5	6	7	8	9	10
30	1	2	3	4	5	6	7	8	9	10
20	1	2	3	4	5	6	7	8	9	10

10	1	2	3	4	5	6	7	8	9	10
0	1	2	3	4	5	6	7	8	9	10

100	1	2	3	4	5	6	7	8	9	10
90	1	2	3	4	5	6	7	8	9	10
80	1	2	3	4	5	6	7	8	9	10

70	1	2	3	4	5	6	7	8	9	10
60	1	2	3	4	5	6	7	8	9	10
50	1	2	3	4	5	6	7	8	9	10

40	1	2	3	4	5	6	7	8	9	10
30	1	2	3	4	5	6	7	8	9	10
20	1	2	3	4	5	6	7	8	9	10

10	1	2	3	4	5	6	7	8	9	10
0	1	2	3	4	5	6	7	8	9	10

100	1	2	3	4	5	6	7	8	9	10
90	1	2	3	4	5	6	7	8	9	10
80	1	2	3	4	5	6	7	8	9	10

70	1	2	3	4	5	6	7	8	9	10
60	1	2	3	4	5	6	7	8	9	10
50	1	2	3	4	5	6	7	8	9	10

AGENCY FOR THE SALE OF GOVERNMENT PROPERTY

INSTRUCTIONS

An Office must be established at the place of sale.

The names of the goods to be sold must be entered in the column provided for that purpose.

There will be no objection to the sale of goods if they are not in the column provided for that purpose.

The card is for use at a public sale on the land, and not on other property. It will be used with the other cards of the series.

AGENCY FOR THE SALE OF GOVERNMENT PROPERTY

SCORE CARD

Known Distance Rifle Practice

Revised—Special course "C"

Name Phillips Company 2 Regiment 150
 Place Rank 1 Date Aug 22 1915

Yds	Instruction Table No. 1—Slow Fire										Total
100											
200	<i>Qualified</i>										
300											

Yds	Table No. 2—Slow Fire										Total
100											
200											
300											

Yds	Table No. 3—Rapid Fire										Total
100	5	5	0	0	0	5	5	5	5	5	35
200	5	5	5	0	0	5	5	5	0	0	30
300	0	0	0	0	0	5	5	0	0	0	10

Yds	Table No. 4—Rapid Fire										Total
100											
200											
300	5	5	5	5	5	5	5	5			40

Yds.	Record Table No. 5—Slow Fire										Total
100											
100											
200											
200											
300											
300											

Yds	Table No. 6—Rapid Fire										Total
100											
200											
300											

Yds.	Instruction Table No. 7—Slow Fire										Total
500	4	5	4	5	3	0	0	4	3	4	34
600	4	3	4	4	3	3	3	3	4	5	36

Yds.	Record Table No. 8—Slow Fire										Total
500	4	4	4	5	4	4	4	5	4	3	41
600											

INSTRUCTIONS

An Officer must initial each string on margin.
 The scoring of the record practice will be closely supervised and the record will be verified and initialed by a company officer in the column provided for that purpose.
 Scores will be recorded with ink.
 There will be no classification, no badges, nor extra compensation for practice under this course.
 This card is for use as a score card on the target range, and upon completion of the practice it will be filed with the soldier's service record and will accompany the service record when the soldier is transferred or detached for an extended period.

Delta

Fig. #244

Case Col. Jake H. Phillips
3872276

Memo. for Disposition of
Effects Section.

Please advise the Disposition
of Remains Section immediately on
receipt of effects in above noted
case.

Memo. to Disposition of
Remains Section.

The above effects were
received by this office on

RECEIVED G. E. O. M., HONOLULU

DEC 11 1918

jtl.

Kim. #244

Case John W. Phillips
Co. 150 Inf.

Memo. for Disposition of
Effects Section.

Please advise the Disposition
of Remains Section immediately on
receipt of effects in above noted
case.

Memo. to Disposition of
Remains Section.

The above effects were
received by this office on:

not Recd 2/4

NY

jti.

#10

Ed. Sept. 25, 1917.

(Instructions continued on page 2.)

Form No. 29, A. G. O.

1. *Opening of record.*—When a soldier is enlisted or reenlisted a service record on this form will be opened for him by the recruiting officer, who will fill out the Descriptive List, page 2, the Prior Service, and the first part of Current Enlistment, page 3. Other data called for by the printed headings or by these instructions will be supplied from time to time as occasion arises by the soldier's company or detachment commander, care being taken to make the record complete and to keep it up to date at all times.

2. *Forwarding to first station.*—When a soldier is sent from the recruit depot to a post, camp, or regiment, for assignment, the adjutant, or other designated officer, at the depot will fill out the first indorsement and turn the service record over to the officer or noncommissioned officer in command of detachment or of departing recruits; or, if no officer or noncommissioned officer be placed in command, the service record will be forwarded by mail to the proper commanding officer.

3. *Transmission to company.*—Upon assignment of a soldier to a company, the post, camp, or regimental commander will transmit the service record to the commanding officer of the company to which he is assigned, detaching the report of assignment and forwarding same to The Adjutant General of the Army.

4. *Soldiers transferred or detached.*—When a soldier is transferred or detached from his company, the company commander will fill out the second indorsement and transmit the service record to the soldier's new commanding officer in the manner prescribed in paragraph 2, above, in the case of soldiers leaving recruit depots. Subsequent indorsements will be filled out as the soldier's change of station or status requires, the original service record thus following the soldier wherever he goes. Each commanding officer forwarding the service record will retain an official copy of his indorsement, to which will be added the name of the soldier for purpose of identification.

5. *Data to be included in indorsements.*—Each indorsement will give the reason for the soldier's change of station or status, and his character, and will contain a full statement of his accounts at the time. Under the heading "Due United States" will be noted all authorized stoppages for loss of or damage to Government property or supplies; amounts due on account of allotment, post exchange, post laundry, tailor, company fund, or transportation; and stoppages, including detained pay, under sentence of a court-martial and on account of absence from duty because of disease resulting from the soldier's own intemperate use of drugs or alcoholic liquor, or other misconduct. In short, all information required to be entered on muster roll and pay roll will be incorporated in the indorsement on the service record, the wording of the indorsement conforming to model remarks for such rolls prescribed by the War Department.

6. *Soldiers furloughed to reserve.*—When a soldier is furloughed to the reserve, his service record will be forwarded by indorsement to the officer charged with keeping his records as a reservist. If the soldier is detached from his company at the time he is furloughed to the reserve, a copy of the indorsement forwarding the service record will be furnished his former company commander without delay.

7. *Soldiers discharged, etc.*—When a soldier is discharged or otherwise separated from the service without being furloughed to the reserve, his service record will be closed and filed with records of his company. If he is absent from his company at the time, the officer under whom he is serving will promptly transmit the service record to the company commander for file. The service record of a soldier discharged or otherwise separated from the service while in the reserve, will be closed and filed by the officer charged with keeping the reservist's record.

8. *Record of court-martial.*—When the service record of a soldier shows a sentence by court-martial, it will be accompanied by an authenticated copy of the record of summary court-martial, or by an official copy of the order pronouncing sentence in case of conviction by a general or special court-martial. *Procedure in case of lost record.*—In the event that a service record is lost a report of the fact will be made to The Adjutant General of the Army, who will start a new service record, transmitting same to the recruit depot or station at which the soldier was enlisted. The new record will then be forwarded in turn to the commanding officers of the companies in which the soldier has served during current enlistment, each commanding officer repeating the indorsement required by paragraph 4, and making appropriate entries in the body of the record. Pending receipt of the new service record the soldier's pay and duty status will be determined from the data shown on the last pay roll on which his name appears, and from other records of the company or detachment with which he last served.

INSTRUCTIONS.

* National Army. ~~Regular Army Reserve.~~ ~~Enlisted Reserve Corps.~~

* National Guard, State of 3872276

SERVICE RECORD

OF

George Lake

(Surname) George (Christian name) Lake

(Company and regiment or arm or corps or department for which enlisted.) 157th Infantry

* Strike out words not applicable.

10. *Changes in entries.*—Erasures of entries on a service record are prohibited. All changes in original entries must be made by drawing lines through the entries and each change will be duly authenticated by the signature of the officer making it, the reason for the change being stated.

11. *Additional space for entries.*—In case the space under any heading, except "Deposits" in the body of the record proves insufficient, the entry will be continued under "Remarks," page 5. If the space under "Remarks" or "Deposits" is insufficient, additional sheets will be securely pasted at the bottom of the page, as indicated by footnote. If the space for showing change of station or status in an indorsement is insufficient, the entry will be continued under "Due United States." One indorsement may, if necessary, occupy the space allotted to two. If there be more than 12 indorsements, an additional sheet will be securely pasted at the bottom of the last page of the form, as indicated by footnote. Under no circumstances will sheets or slips of paper be pasted or attached to a service record except as provided above.

12. *Initialing of entries.*—Each entry under "Military Record," pages 4 and 5, "Clothing Account," pages 6 and 7, and "Allotments," page 7, will be initialed by the recruiting officer or company commander, as the case may be. Where there are no data of record relating to a printed heading, the space under that heading will be left blank, except that in case of transfer to another organization or furlough to the reserve the company commander will insert his initials in such blank spaces to show that he has not overlooked the entries. Negative entries, such as "None," "Nothing," etc., will not be made in any part of the form except as required for street and house number and indorsements.

DESCRIPTIVE LIST.

Residence: RR #6
(Street and house number; if none, so state.)

Dresden, Tenn.
(Town or city.) (State.)

Name and address of person to be notified in case of emergency:

Sarah Davis Phillips (Mother)
(Name and degree of relationship; if friend, so state.)

RR #6
(Street and house number; if none, so state.)

Dresden, Tenn.
(Town or city.) (State.)

Born in Dresden, Tenn.
(Town or city.) (State or country.)

Age at enlistment, 24 yrs. and 11 mos.; occupation, Farmer

Eyes, Blue; hair, Brown

Complexion, Light; height, 5 feet 9 1/2 inches;

Married or single: Single

Indelible or permanent marks and physical defects at enlistment:

Form 260 950 Complete

Size of uniform shoe: 8 1/2

Vaccinated: July 22, 1918; result, * Successful

Vaccinated: _____, 191 _____; result, *

Typoid immunization completed: Aug 7, 191 _____

Paratyphoid immunization completed: _____, 191 _____

Assignment report on E & A Card

Report of assignment-mailed _____ 191

(Company and regiment or corps or department.)

Discharged as _____; character, _____
(Grade.)

_____ from _____, 191, to _____, 191 .
(Company and regiment or corps or department.)

Discharged as _____; character, _____
(Grade.)

_____ from _____, 191, to _____, 191 .
(Company and regiment or corps or department.)

Discharged as _____; character, _____
(Grade.)

_____ from _____, 191, to _____, 191 .
(Company and regiment or corps or department.)

Discharged as _____; character, _____
(Grade.)

_____ from _____, 191, to _____, 191 .
(Company and regiment or corps or department.)

Discharged as _____; character, _____
(Grade.)

_____ from _____, 191, to _____, 191 .
(Company and regiment or corps or department.)

Discharged as _____; character, _____
(Grade.)

_____ from _____, 191, to _____, 191 .
(Company and regiment or corps or department.)

Discharged as _____; character, _____
(Grade.)

_____ from _____, 191, to _____, 191 .
(Company and regiment or corps or department.)

Discharged as _____; character, _____
(Grade.)

_____ from _____, 191, to _____, 191 .
(Company and regiment or corps or department.)

*Insert headings below last discharge from the Regular Army to show service in Volunteer Army, Navy, Marine Corps, and National Guard or Organized Militia, in the order named.

Co. of Weekley

Dresden, Tenn.

CURRENT ENLISTMENT.

Order # 2231
Serial # 925

Serving in 1st enlistment period.

Accepted for enlistment at _____

Enlisted July 18, 1918, at Dresden, Tenn.

by reported same date and place

Assigned to Co. L. 150th Infantry
(Company and regiment or corps or department.)

at Camp Shelby, Miss., Aug 3, 1918
(Station.)

Transferred to _____, 191 .
(Company and regiment or corps or department.)

Transferred to _____, 191 .
(Company and regiment or corps or department.)

Furloughed to reserve at _____
_____, 191 . Character: _____

†Honorably discharged; †discharged and not recommended for reenlistment; †dishonorably discharged at _____
_____, 191 . Character: _____

†Strike out words not applicable.

None
PRIOR SERVICE.

REGULAR ARMY:*

----- from -----, 191 , to -----, 191 .
(Company and regiment or corps or department.)
Discharged as -----; character, -----
(Grade.)
----- from -----, 191 , to -----, 191 .
(Company and regiment or corps or department.)
Discharged as -----; character, -----
(Grade.)
----- from -----, 191 , to -----, 191 .
(Company and regiment or corps or department.)
Discharged as -----; character, -----
(Grade.)
----- from -----, 191 , to -----, 191 .
(Company and regiment or corps or department.)
Discharged as -----; character, -----
(Grade.)
----- from -----, 191 , to -----, 191 .
(Company and regiment or corps or department.)
Discharged as -----; character, -----
(Grade.)
----- from -----, 191 , to -----, 191 .
(Company and regiment or corps or department.)
Discharged as -----; character, -----
(Grade.)
----- from -----, 191 , to -----, 191 .
(Company and regiment or corps or department.)
Discharged as -----; character, -----
(Grade.)

*Insert headings below last discharge from the Regular Army to show service in Volunteer Army, Navy, Marine Corps, and National Guard or Organized Militia, in the order named.

Co. of Weakley *Dresden, Tenn.*
CURRENT ENLISTMENT.
Serving in *1st* enlistment period. *Order # 2231*
Serial # 925

Accepted for enlistment at -----

Enlisted *July 18, 1918*, at *Dresden, Tenn.*

by *Reported same date and place*

Assigned to *Co L. 150th Infantry*
(Company and regiment or corps or department.)

at *Camp Shelby, Miss., Aug 3, 1918*
(Station.)

Transferred to -----, 191 .
(Company and regiment or corps or department.)

Transferred to -----, 191 .
(Company and regiment or corps or department.)

Furloughed to reserve at -----

-----, 191 . Character: -----

†Honorably discharged; †discharged and not recommended for reenlistment; †dishonorably discharged at -----

-----, 191 . Character: -----

†Strike out words not applicable.

MILITARY RECORD.

Each entry on this page will be initialed. (See Instruction 12.)

Grade: -----, -----, 191 .

Marksmanship, gunner qualification, or rating: * -----

Battles, etc.: -----

Wounds or other injuries received in action: -----

Medal of honor (action, with date thereof, for which granted): -----

Certificate of merit (nature of service, with date thereof, for which granted): -----

Furloughs: -----

Time lost to be made good under A. W. 107:

(a) Absence without proper authority or in desertion.

(b) Confinement under sentence or while awaiting trial and disposition of case, if trial resulted in conviction.

(c) Unable to perform duty through the intemperate use of drugs or alcoholic liquor or through disease or injury the result of his own misconduct.

* Give date of qualification or rating and number, date, and source of order announcing same.

Each entry on this page will be initialed. (See Instruction 12.)

Convictions by court-martial:

(See Instruction 8.)

- *-----court-martial; approved-----191 , Articles of War----

* Insert word "General," "Special," or "Summary," as the case may be.

Pay detained by court-martial collected on pay roll as follows:

Month.	Amount.		Month.	Amount.	
	Dols.	Cts.		Dols.	Cts.
-----, 191	-----	-----	-----, 191	-----	-----
-----, 191	-----	-----	-----, 191	-----	-----
-----, 191	-----	-----	-----, 191	-----	-----
-----, 191	-----	-----	-----, 191	-----	-----
-----, 191	-----	-----	-----, 191	-----	-----
-----, 191	-----	-----	-----, 191	-----	-----

REMARKS (See Instruction 11):

*Recruit trailer kit issued R23.
 AW read July 29, 1918. R24.
 Passed three gas Aug 9, 1918
 School of Gas Defense 38" Div*

Additional sheets for "Remarks," if required, will be attached here,

(See Instruction 11.)

By Camp Shelly, Miss Personnel Office

To CO Co L. 150th Inf Aug 31, 1918

This soldier assigned to your organization per memo order by Camp Shelly Miss July 30 '18

He was last paid to include Never paid, 1918

By _____ (Rank and name of quartermaster.)

Due United States (See Instruction 5); if nothing, so state:

Nothing due

This soldier has not an allotment running. (Has or has not.)

His character is Excellent
I have personally verified all entries under "Due United States."

Loy J. Ketter sqd
1st Lieut. Co. 150th Inf Commanding.
Asst. to Adjutant.

To CO Co L. 150th Inf Oct 6, 1918

To CO Hospital Transport

This soldier is to Hospital Transport Car. 19. N.Y. P.O.C. Brooklyn, N.Y. Oct 15/19

He was last paid to include Sept 30, 1918

By Capt. Joseph Goldman, 2 MC (Rank and name of quartermaster.)

Due United States (See Instruction 5); if nothing, so state:

Nothing

This soldier has an allotment running. (Has or has not.)

His character is Excellent
I have personally verified all entries under "Due United States."

Charles R. Delmas
Capt 150th Inf Commanding.

* Give change of station or status of soldier, with number, date, and source of order.
† To be filled out in handwriting of officer signing indorsement.

3d IND.

Effects Quartermaster
 Port of Emb. Hob N.J. Dec 17, 1918
 To Adj. General of the Army Wash DC
 This soldier* died aboard U.S.S. "Delta"
 on Oct. 13/18 of Influenza
 He was last paid to include _____, 191

By _____
 (Rank and name of quartermaster.)
 Due United States (See Instruction 5); if nothing, so state:

See previous indorsements

This soldier† _____ an allotment running.
 (Has or has not.)

His character is† _____
 I have personally verified all entries under "Due United States."

John A. Nelson (Sgd)
 Major 2nd Corps
 Effects Quartermaster
 Port of Emb. Hob N.J.
 Commanding.
 4th IND.

Certified a true copy _____, 191

To A. W. Wrenshaw

This soldier* 1st Lieut. J. M. C.

He was last paid to include _____, 191

By _____
 (Rank and name of quartermaster.)
 Due United States (See Instruction 5); if nothing, so state:

This soldier† _____ an allotment running.
 (Has or has not.)

His character is† _____
 I have personally verified all entries under "Due United States."

 Commanding.

* Give change of station or status of soldier, with number, date, and source of order.
 † To be filled out in handwriting of officer signing indorsement.

....., 191

To

This soldier*

He was last paid to include, 191

By
(Rank and name of quartermaster.)

Due United States (See Instruction 5); if nothing, so state:

.....
.....
.....
.....

This soldier† an allotment running.
(Has or has not.)

His character is†

I have personally verified all entries under "Due United States."

.....
..... Commanding.

6th IND.

....., 191

To

This soldier*

He was last paid to include, 191

By
(Rank and name of quartermaster.)

Due United States (See Instruction 5); if nothing, so state:

.....
.....
.....
.....

This soldier† an allotment running.
(Has or has not.)

His character is†

I have personally verified all entries under "Due United States."

.....
..... Commanding.

* Give change of station or status of soldier, with number, date, and source of order,
† To be filled out in handwriting of officer signing indorsement.

-----, 191

To -----

This soldier* -----

He was last paid to include -----, 191

By -----
(Rank and name of quartermaster.)

Due United States (See Instruction 5); if nothing, so state:

This soldier† ----- an allotment running.
(Has or has not.)

His character is† -----

I have personally verified all entries under "Due United States."

----- Commanding.

10th IND.

-----, 191

To -----

This soldier* -----

He was last paid to include -----, 191

By -----
(Rank and name of quartermaster.)

Due United States (See Instruction 5); if nothing, so state:

This soldier† ----- an allotment running.
(Has or has not.)

His character is† -----

I have personally verified all entries under "Due United States."

----- Commanding.

* Give change of station or status of soldier, with number, date, and source of order.
† To be filled out in handwriting of officer signing indorsement.

11th IND.

....., 191

To

This soldier*

He was last paid to include, 191

By
(Rank and name of quartermaster.)

Due United States (See Instruction 5); if nothing, so state:

.....
.....
.....
.....

This soldier† an allotment running.
(Has or has not.)

His character is:

I have personally verified all entries under "Due United States."

.....
..... Commanding.

12th IND.

....., 191

To

This soldier*

He was last paid to include, 191

By
(Rank and name of quartermaster.)

Due United States (See Instruction 5); if nothing, so state:

.....
.....
.....
.....

This soldier† an allotment running.
(Has or has not.)

His character is:

I have personally verified all entries under "Due United States."

.....
..... Commanding.

* Give change of station or status of soldier, with number, date, and source of order.
† To be filled out in handwriting of officer signing indorsement.

Additional sheets for indorsement, if required, will be attached here.
(See Instruction 11.)

GRAVE LOCATION BLOCK

LOCATION OF GRAVE OF

Phillips 2872276 Jake D
(Surname). (Number). (First Name and Initials).
Pvt. Co. L. 150th. Inf.
(Rank). (Organization).

PLACE OF DEATH:

CAUSE OF DEATH:

DATE OF BURIAL:

PLACE OF BURIAL:

(Give Cemetery, Town and Department). Map references must specify clearly what map is used.

See correspondnece-Eidson, Eddie
1578991

GRAVE NUMBER:

HOW MARKED: Name Peg?.....Cross?.....

Headboard?..... Bottle?.....

IDENTIFICATION TAGS:

Was one buried with body?.....

Was one fastened to name peg or stake used as a grave marker?.....

If name unknown and tags missing, description and marks should be given here?

NEAREST RELATIVE:

ADDRESS:

RELATIONSHIP:

REPORTED BY:

(Signature and Rank of Reporting Officer).

1502191
502191



GENERAL HEADQUARTERS
AMERICAN EXPEDITIONARY FORCES
ADJUTANT GENERAL'S OFFICE

FROM : ADJUTANT GENERAL.
TO : C.O. Co. L. 150th. Infantry
SUBJECT : Information for burial Register.

1. You are directed to transmit without delay to the Chief Graves Registration Service, the information indicated on enclosed Graves Location Blank as necessary for the completion of official records.

By Command of General Pershing:

Robert C. Davis
Adjutant General.

Note:

In case this item is checked, you will note hereon:

Nearest relative of deceased:

Relationship: _____

Address: _____

1900

RECEIVED
10 APR 19
O. C. Q. M.
G. R. S.

Phillips, Jake D. 2872276
Co L. 150 Inf

Phillips, Jake D.
3,872,276

FILE

50291

8

INVESTIGATION & ADJUSTMENT DEPARTMENT

G. R. S. Form S-W-A
Information requested of A. G.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL OF
WASHINGTON

FROM, O. Q. M. G.
CEMETERIAL DIVISION
Munitions Building
Room

PLEASE
EXPEDITE

50291

File No. 50291 Registration.

Date

From: The Quartermaster General, U. S. Army (Cemeterial Division).

To: The Adjutant General of the Army, Sixth and B Streets NW., Washington, D. C.

Subject: Information required for G. R. S.

FILE

1. It is requested that the items checked below be completed. Request confirmation of all information shown.

- a. Surname. PHILLIPS ✓
- b. Christian name. Jake D. ✓
- c. Serial number. 3872 276 ✓
- d. Organization. Co. L. 150th Infantry. ✓
- e. Rank. Private. ✓
- f. Date of death. 10/13/18 ✓
- g. Cause of death. Pneumonia & Influenza ✓
- h. Authority (C. C. No.) 309 ✓
- i. Emergency address. Sarah Davis Phillips, RR#6, Dandridge, Tenn. ✓
- j. Relationship. Mother. ✓

BODY DESCRIPTION.

(See page 2 of the Service Record.)

- a. Age at enlistment.
- b. Color of eyes.
- c. Color of hair.
- d. Height.
- e. Weight.
- f. Permanent marks and physical defects at enlistment. (Old fractures or breaks.)

DENTAL CHARTS.

(See physical report of examination prior to enlistment.)

- a. Strike out teeth missing:
- | | | | | | | | | | | | | | | | |
|--------------|---|---|---|---|---|---|---|-------------|---|---|---|---|---|---|---|
| 8 | 7 | 6 | 5 | 4 | 3 | 2 | 1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| Upper right | | | | | | | | Upper left. | | | | | | | |
| | | | | | | | | | | | | | | | |
| 8 | 7 | 6 | 5 | 4 | 3 | 2 | 1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| Lower right. | | | | | | | | Lower left. | | | | | | | |

H. L. ROGERS,
Quartermaster General, U. S. A.,

By

H. J. Conner

H. J. CONNER,
1st Lieut. Capt. Q. M. C.

MDT/Mr. Wilson

ISSUED BY
Rec'd World War Div.
Date JUN 25 1921

JUN 24 1921 371

Serially 221-EP8, W-3-6-25-21

INVESTIGATION & ADJUSTMENT DEPARTMENT

G. R. S. Form 8-W-A
Information requested of A. G.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
WASHINGTON

File No. 50291 Registration.

Date June 23, 1921.

From: The Quartermaster General, U. S. Army (Cemeterial Division).

To: The Adjutant General of the Army, Sixth and B Streets NW., Washington, D. C.

Subject: Information required for G. R. S.

FILE

1. It is requested that the items checked below be completed. Request confirmation of all information shown.

- a. Surname. PHILLIPS ✓
- b. Christian name. Jake D. ✓
- c. Serial number. 3872 276 ✓
- d. Organization. Co. L. 150th Infantry. ✓
- e. Rank. Private. ✓
- f. Date of death. 10/13/18 ✓
- g. Cause of death. Pneumonia & Influenza ✓
- h. Authority (C. C. No.) 309 ✓
- i. Emergency address. Sarah Davis Phillips, RR#6, Dandridge, Tenn. ✓
- j. Relationship. Mother. ✓

BODY DESCRIPTION.

(See page 2 of the Service Record.)

- a. Age at enlistment.
- b. Color of eyes.
- c. Color of hair.
- d. Height.
- e. Weight.
- f. Permanent marks and physical defects at enlistment. (Old fractures or breaks.)

DENTAL CHARTS.

(See physical report of examination prior to enlistment.)

a. Strike out teeth missing:

8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Upper right								Upper left.							

8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Lower right.								Lower left.							

H. L. ROGERS,
Quartermaster General, U. S. A.,

By

H. J. Conner

H. J. CONNER,
1st Lieut. Captain, Q. M. C.

MDT/Mr. Wilson

Rec'd World War Div.
JUN 25 1921

JUN 24 1921

Summely ed- EPS, W-3-6-25-21

INVESTIGATION & ADJUSTMENT DEPARTMENT
WAR DEPARTMENT
 OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
 WASHINGTON

G. I. Form 2-W-1
 Information requested of A. G. 7

File No. 50891 Registration Date June 23, 1921

FILE

From: The Quartermaster General, U. S. Army (Cometrical Division)

To: The Adjutant General of the Army, Sixth and B Streets NW., Washington, D. C.

Subject: Information required for G. I. S.

1. It is requested that the items checked below be completed. Request confirmation of all information shown.

- a. Surname PHILLIPS
- b. Christian name Jake D.
- c. Serial number 3872 270
- d. Organization Co. I, 150th Infantry
- e. Rank Private
- f. Relationship
- g. Emergency address
- h. Authority (G. I. No.) 309
- i. Cause of death Pneumonia & Typhoid
- j. Date of death 10/12/18

BODY DESCRIPTION

(See page 2 of the Service Record)

- a. Age at enlistment
- b. Color of eyes
- c. Color of hair
- d. Height
- e. Weight

f. Permanent marks and physical defects at enlistment. (Old fractures or breaks)

DENTAL CHARTS

(See physical report of examination prior to enlistment)

- a. Strike out teeth missing:
- Upper right 8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8
- Upper left
- Lower right 8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8
- Lower left

H. L. ROGERS
 Quartermaster General, U. S. A.

H. J. CONNER
 1st Lieut.

1291 29 JUN

RECEIVED

W. T. Wilson

QM 295 A-M

January 3, 1931.

Phillips, Jake D. U ASB Bro

Mr. T. O. Phillips,
432 E. Deaderick Avenue,
Jackson, Tennessee.

Dear Sir:

In order that the records of this office may be complete and correct, it is requested that you advise as to whether or not your brother, the late Private Jake D. Phillips, is survived by a widow, his mother, a stepmother, a mother thru adoption, or any woman who may have stood in loco parentis to him. If so, kindly furnish her name, address and relationship.

For your convenience in replying, there is enclosed herewith a self-addressed envelope which requires no postage.

For The Quartermaster General.

Very truly yours,

A. D. HUGHES,
Captain, Q. M. Corps,
Assistant.

Enclosure:
Env.

mf

DISPATCHED
JAN 3 1931 3 PM 2
DIN

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Phillips, Jake D. - U-ASB Bro

July 11, 1930.

Mr. T. O. Phillips,
432 E. Deaderick Ave.,
Jackson, Tennessee.

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress of March 2, 1929, together with an amendment thereto, approved May 15, 1930.

This office has no record of any person entitled under the Act mentioned to make a pilgrimage to the cemeteries in Europe as the mother or widow of the above named deceased service man. To complete the list of eligibles and to assure that, if the above named man is survived by a mother or widow entitled to make a pilgrimage she receive an invitation to do so, it is requested you answer the following questions in the space provided on this letter and return to this office in the enclosed envelope which requires no postage.

1. Is the deceased survived by a mother?

If so, give her name and address:

2. Is the deceased survived by a widow who has not remarried?

If so, give her name and address:

3. Is the deceased survived by any woman who stood in loco parentis to him according to the terms of Section 4 (a) of the enclosed Act as amended?

If so, give her name and address:

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment

A. D. HUGHES,
Captain, Q. M. Corps,
Assistant.

File No.

250

OUT-CHARGE SHEET

Date charged out

MAY 17 1926

Charged to

Neil Scott

Remarks:

INSTRUCTIONS.—If a document is taken from the files, charge it to the person to whom delivered. Make charge sheet in duplicate. Place one in record file and one in suspended file used for follow up on "charge out sheets."

QM 293 A-M
Phillips, Jake D., Pvt. (ASB) B

May 4, 1931.

Mr. T. O. Phillips,
432 East Deaderick Avenue,
Jackson, Tennessee.

Dear Sir:

In order that the records of this office may be complete and correct, it is requested that you advise whether or not the late Private Jake D. Phillips is survived by his natural mother, a stepmother or any woman who stood in loco parentis to him, and if so, the name, address and relationship of each. If he was married and is survived by a widow, also please furnish her name and address.

For your convenience in replying, there is enclosed herewith a self-addressed envelope which requires no postage.

For The Quartermaster General.

Very truly yours,

A. D. HUGHES,
Captain, Q. M. Corps,
Assistant.

Encl:
Envelope

aph

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

October 13, 1930.

Phillips, Jake D. ASB B Pvt.

Mr. T. O. Phillips,
452 E. Deaderick Ave.,
Jackson, Tenn.

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress of March 2, 1929, together with an amendment thereto, approved May 15, 1930.

This office has no record of any person entitled under the Act mentioned to make a pilgrimage to the cemeteries in Europe as the mother or widow of the above named deceased service man. To complete the list of eligibles and to assure that, if the above named man is survived by a mother or widow entitled to make a pilgrimage she receive an invitation to do so, it is requested you answer the following questions in the space provided on this letter and return to this office in the enclosed envelope which requires no postage.

1. Is the deceased survived by a mother?

If so, give her name and address:

2. Is the deceased survived by a widow who has not remarried?

If so, give her name and address:

3. Is the deceased survived by any woman who stood in loco parentis to him according to the terms of Section 4 (a) of the enclosed Act as amended?

If so, give her name and address:

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment

A. D. HUGHES,
Captain, Q. M. Corps,
Assistant.

293.3

1st Lieut., Q.M. Corps,

Port of Embarkation, Hoboken, N.J.

Nov. 21st

18

Mrs. Sarah Davis Phillips,

R.R. #6, Dresden, Tenn.

Private Jake D. Phillips,

October 13th, 1918

Influenza

Private Jake D. Phillips

Buried at sea -

MC MANUS

2-M.F.O.

1-P.A.

1-File ✓

1-A.G.O.

RAC

Kaw

APPLICATION FOR FAMILY ALLOWANCE
AND
INFORMATION FOR ALLOTMENT OF PAY

No. **3872276**
(My serial number)

For the Army: A duplicate of this form must be retained with the service record

(Answer ALL questions; give ALL information requested; if not typewritten, use clear legible handwriting, preferably print-hand writing.)

My name is **A Jake D Phillips**
(First name) (Middle name) (Last name) (Rank and organization) **Recruit**

Home post office **RFD 6** (No. and street or rural route) **Dresden** (City, town, or post office) **Tenn.** (State) Age **24** (Nearest birthday)

Birth **3/25/94** (Date) **Dresden, Tenn** (City, town, or post office) Service **Aug 1918** (Date of last entrance into active service) Pay, \$ **30.00** (Present pay in U. S.)

Changes _____ (Changes in rank or pay, if any, since Nov. 1, 1917)

CLASS A—ALLOTMENTS COMPULSORY

I certify that the persons named below, and none other, come within Class A (wife, former wife divorced, or child, as defined in the Act of October 6, 1917).
(If you have no Class A relative, write "NONE" in the appropriate Name column. If you claim exemption from the compulsory allotment, fill out the Treasury Form No. 52 and attach herewith.)

Relationship to Me	Age	NAME			HOME POST-OFFICE ADDRESS			DATE OF BIRTH			If Married, Give Date; If Not, Enter "No"	Do you Apply for a Gov't Family Allowance?	
		(First)	(Middle)	(Last name)	No. and Street or Rural Route	City, Town, or Post Office	State	Month	Day	Year			
Wife		None										Yes or No	
Child		None										Yes or No	
Child												Yes or No	
Child												Yes or No	
Child												Yes or No	
Divorced Wife		None									Monthly Payment Decreed by Court, \$ _____	Remarried? Yes or No	Yes or No

If you wish to make an allotment to your wife or children in addition to the compulsory allotment, state amount of additional allotment, \$ _____
In the Navy, such additional allotment should be made on S. and A. Form No. 6.

CLASS B—ALLOTMENTS NOT COMPULSORY

Allotments in Class B may be made only to the following relatives: parent (father, mother, grandfather, grandmother, stepfather, stepmother), either of yourself or spouse; brother, sister, half brother, half sister, stepbrother, stepsister, adopted brother, adopted sister, grandchild, and children of an enlisted woman. To get the Government allowance they must be dependent upon you; but they need not be dependent to get your allotment.

I hereby make voluntary allotments for Class B, to begin on the **1st** day of **Aug**, 191**8**

Relationship to Me	Age	NAME			HOME POST-OFFICE ADDRESS			My Habitual Monthly Contribution to Class B Dependents Before Entering Service.	Amount of Allotment	Do You Apply for a Gov't Family Allowance?
		(First)	(Middle)	(Last name)	No. and Street or Rural Route	City, Town, or Post Office	State			
Mother	56	Sarah	Davis	Phillips	RFD 6	Dresden, Tenn.	20.00	15.00	Yes	
									Yes or No	
									Yes or No	
									Yes or No	
									Yes or No	

IMPORTANT NOTICE.—If you make allotments to minors in Class A or Class B you should give on the line below the full name, age, and post-office address of the person having their actual care and custody. Unless you request otherwise, payment will be made to such person if of legal age. It is not necessary to secure the appointment of a guardian by court proceedings.

This form should be used for the allotment of pay only to relatives specified above in Class A and Class B

For all other allotments use Q. M. Form No. 38 in the Army, and S. and A. Form No. 6 in the Navy.

Is this your first application for allowance? **Yes** (Yes or No)

If you wish to present additional information, write on back of this sheet.

Signed at (on board) _____

I hereby certify that all the foregoing statements are correct and that every member of Class B for whom I claim family allowance is dependent upon me for support in whole or in part.

the _____ day of _____, 191**8**

Witnessed by: **XXXX** **Camp Shelby, Miss.**
Jefferson L. Darnell
(Commissioned or warrant officer)
Rank **1st Sgt Personnel Officer**

(Sign here distinctly) **J. D. Phillips**
(First name) (Middle name) (Last name)
J. D. (None) Phillips

(1) The allowance as shown on this application will be for Class "A" \$ _____

Class "B" \$ _____

Total \$ _____

(2) The monthly allotment which I shall charge against the applicant on the pay roll is for Class "A" \$ _____

Class "B" \$ 15.00

Total \$ 15.00

(3) The applicant's rate of pay per month is \$ 30.00

(4) The charge on the pay roll of the above-mentioned allotments commenced

Class A.	_____	_____	19____
	(Day)	(Month)	
Class B.	<u>1st</u>	<u>Aug</u>	19 <u>18</u>
	(Day)	(Month)	

(Signed by) Jefferson L. Darce

Rank 1st Lt 149 Inf

Entered on pay card by _____
(Initials Personnel Officer)

Entered on service record by D.V.
(Initials Company Commander)

APPLICATION FOR INSURANCE

My Army serial number is 3872276
(Serial number)

My full name is J. D. (None) Phillips
(Given) (Middle) (Last name)

Home address RFD 6 Dresden, Tenn.
(No. and street or rural route) (City, town, or post office) (State)

Date of birth March 25th 1894 Age 24
(Month) (Day) (Year) (Nearest birthday)

Date of last enlistment or entry into active service July 18th 1918
(Give month, day, and year)

I hereby apply for insurance in the sum of \$ 5,000 payable as provided in the Act of Congress approved October 6, 1917, to myself during total permanent disability and from and after my death to the following persons in the following amounts:

RELATIONSHIP TO ME	NAME OF BENEFICIARY			POST-OFFICE ADDRESS		AMOUNT OF INSURANCE TO BE PAID TO EACH BENEFICIARY
	(Given)	(Middle)	(Last name)	(a) No. and street or rural route	(b) City, town, or post office and State.	
Mother	Sarah	Davis	Phillips	(a) RFD 6	(b) Dresden Tenn	\$ 5,000
				(a)	(b)	
				(a)	(b)	
				(a)	(b)	
				(a)	(b)	
				(a)	(b)	

I authorize the necessary monthly deduction from my pay, or, if insufficient, from any deposit with the United States, in payment of the premiums as they become due, unless they be otherwise paid.

I offer this application, and it is to be deemed made, as of the date of signature, with premiums commencing from that date and payable at the end of each calendar month, beginning with the month in which application is made.

I wish Insurance Certificate sent to: (Name) Davis Sarah ~~Phillips~~ Phillips
 (Address) RFD 6 Dresden, Tenn.

Signed at (on board) Camp Shelby, Miss.

the 24th day of July, 1918

Witnessed by: Jefferson L. Darnell
1st Lt 149th Inf.
 Rank 7 Asst Personnel Officer

Sign here J.D. Phillips
J.D. Phillips
Recruit
(Rank or rating) (Organization)

Commanding

(This space for any notations insurance officers may deem necessary.)

MONTHLY PREMIUMS FOR EACH \$1,000 OF INSURANCE

(Each \$1,000 of insurance is payable in installments of \$5.75 per month for 240 months; but if the insured is totally and permanently disabled and lives longer than 240 months the payments will be continued as long as he lives and is so disabled.)

Age	Monthly premium		Age	Monthly premium
15	\$0.63		40	\$0.81
16	.63		41	.82
17	.63		42	.84
18	.64		43	.87
19	.64		44	.89
20	.64		45	.92
21	.65		46	.95
22	.65		47	.99
23	.65		48	1.03
24	.66		49	1.08
25	.66		50	1.14
26	.67		51	1.20
27	.67		52	1.27
28	.68		53	1.35
29	.69		54	1.44
30	.69		55	1.53
31	.70		56	1.64
32	.71		57	1.76
33	.72		58	1.90
34	.73		59	2.05
35	.74		60	2.21
36	.75		61	2.40
37	.76		62	2.60
38	.77		63	2.82
39	.79		64	3.07
			65	3.35

The smallest amount of insurance which may be applied for is \$1,000 and the largest amount is \$10,000. Between such limits insurance may be applied for in any sum provided it is in multiples of \$500.

Insurance may be applied for in favor of one or more of the following persons:

Husband or wife.

Child, including legitimate child; child legally adopted before April 6, 1917, or more than six months before enlistment or entrance into or employment in active service, whichever date is the later; stepchild, if a member of the insured's household; illegitimate child, but, if the insured is his father, only if acknowledged by instrument in writing signed by him, or if he has been judicially ordered or decreed to contribute to such child's support, and if such child, if born after December 31, 1917, shall have been born in the United States or in its insular possessions.

Grandchild, meaning a child, as above defined, of a child as above defined.

Parent, including father, mother, grandfather, grandmother, stepfather, and stepmother, either of the insured or of his/her spouse.

Brother or sister, including brothers and sisters of the half blood as well as of the whole blood, stepbrothers and stepsisters and brothers and sisters through adoption.

CAMP SHELBY, MISS.

AUG 10 1918

....., 19.....
(Day.) (Month.)

Charge } of premium (\$ 3.30) will be made by me monthly, beginning with month in which application is dated.
Checkage }

First { charge } made AUG 31 1918, 19.....
{ checkage } (Day.) (Month.)

John S. Shawson
CAPTAIN 150TH INFANTRY
Commanding ADJUTANT

Em 61-272

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE,
WASHINGTON

February 4, 1919

From: The Adjutant General of the Army,
201 (Phillips, Jake D.) 1st Ind.

S-FUC-H
mp/rac

Has., Port of Embarkation, Hoboken, N.J., Feb. 19th, 1919. To The Adjutant General
of the Army, Washington, D.C.

1. Returned with the information that it is impossible to forward Report of Death in triplicate, called for in Paragraph 1:a, as Medical Officer's signed Death Certificate was not received at this Port, from which Report of Death is prepared.
2. Inventory of Effects in the case of the above named Jake D. Phillips will be forwarded when effects have been disposed of in accordance with 112th Article of War. the following described reports checked in red ink, required by and prepared in the manner indicated in paragraph 83 $\frac{1}{2}$, Army Regulations, which have not been received, will be forwarded to this office without delay:

- Report of death in triplicate (Form No. 415, A.G.O.)
- Report of board of officers.
- Final statement (Form No. 370, War Dept.)
- Inventory of effects in duplicate (Form No. 34, A.G.O.)

D.C. SHANKS,
Major General,
Commanding.

3. Proper signature will be affixed to the final statement; Form 415; Inventory of effects.
3. The paper or papers herewith returned for correction, incorrectly state or fail to state:
 - (a) Whether or not the death of the soldier occurred in line of duty, and was or was not the result of his own wilful misconduct.
 - (b) Date and place of death of soldier.
4. The original report of the board of officers will be forwarded to replace the carbon copy which has been received.
5. The accompanying proceedings of the board of officers are returned herewith for the action of the conveying authority.

By order of the Secretary of War:

P. C. HARRIS,
The Adjutant General.

Per.....

Emc 61-2mc

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE,
WASHINGTON

February 4, 1919.

From: The Adjutant General of the Army.

To: *The Commanding General
Port of Embarkation,
Hoboken, N. J.*

Subject: Deceased soldier.

1. In the case of *Pub. Jake O. Phillips, Co. D, Regt., 150th Inf.*
who died *Oct. 13, 1918 at sea, aboard U.S.S. Albatross.*
the following described reports checked in red ink, required by and prepared
in the manner indicated in paragraph 83 $\frac{1}{2}$, Army Regulations, which have not
been received, will be forwarded to this office without delay:

- (a) Report of death in triplicate (Form No. 415, A.G.O.)
- (b) Report of board of officers.
- (c) Final statement (Form No. 370, War Department).
- (d) Inventory of effects in duplicate (Form No. 34, A.G.O.)

2. Proper signature will be affixed to the final statement;
Form 415; inventory of effects.

3. The paper or papers herewith returned for correction, incorrect-
ly state or fail to state:

- (a) Whether or not the death of the soldier occurred in line of
duty, and was or was not the result of his own wilful
misconduct.
- (b) Date and place of death of soldier.

4. The original report of the board of officers will be forwarded
to replace the carbon copy which has been received.

5. The accompanying proceedings of the board of officers are
returned herewith for the action of the convening authority.

By order of the Secretary of War:

P. C. HARRIS,
The Adjutant General.

Per *Emc*.....

Mim. #233

1st Lieut. Q. M. Corps.

Port of Embarkation, Hoboken, N.J.

Nov. 21, 18

Adjutant General

Washington, D. C.

1112

Report death of Private Jake D. Phillips.

Co. L. Reg. 150th Infantry.

Serial No. 3872276. Death in line

of duty not result of own misconduct. Oct. 13, 1918 U.S.S. Delta.
Influenza. Buried at Sea.

Emergency address: Sarah Davis Phillips, (Mother)

R.R. #6. Dresden, Tenn.

MC MANUS.

daw-jtl

~~Judson~~

7 Received A G O, NOV 22 1918

2-MFO
1-EGO ✓
1-PA
1-File.

IGR

1st Lieut., Q.M. Corps,

Port of Embarkation, Hoboken, N.J.

Nov. 21st

18

Mrs. Sarah Davis Phillips,

R.R. #6, Dresden, Tenn.

Private John D. Phillips,

Regret to advise that ~~Private John D. Phillips~~ Influenza

AT SEA ON _____ from _____

Owing to existing conditions it was impossible to bring remains

back to the States and at sunrise ~~Private John D. Phillips~~ _____

_____ was buried at sea with

full military honors.

MC MANUS

~~Adson,~~

Brigadier General.

2-1-2-0.
1-2-1-0.
2-1-4-1-0.
1-2-1-4-8-0. ✓
1-1-1-1-0

7 Received 109, NOV 22 1918

201 (Phillips, Jake D.)

1st Ind.

1112
S.3/28/19
JRG/rws

Hq. Port of Embarkation, Hoboken, N.J., March 13, 1919. To Chief, Effects Bureau, Port of Embarkation, in connection with previous report sent to The Adjutant General of the Army, February 19, 1919.

By command of Major General SHANKS:

220.86 (Phillips, Jake D.)

2nd Ind.

J. R. GOODALE
Captain, Retired,
Asst. Port Adjt.

S-PUO-H
mp/rac

Office, Chief, Effects Bureau, Port of Embarkation, Hoboken, N.J., April 1, 1919.
To the Commanding General, Port of Embarkation, Hoboken, N.J.

1. Returned, enclosing Report of Death in triplicate, called for in Paragraph 1: a.
2. Inventory of Effects in the case of the above named Jake D. Phillips will be forwarded when effects have been disposed of in accordance with 112th Article of War.

1 Encl. in trip.

John A. Nelson,
Major Q.M. Corps,
Chief, Effects Bureau.

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE,
WASHINGTON

March 8th, 1919

From: The Adjutant General of the Army.

To: The Commanding General,
Port of Embarkation, Hoboken, N.J.

Subject: Deceased soldier.

1. In the case of Pvt. Jake D. Phillips, Co.L, 159th Infantry who died Oct. 13, 1918 at sea, aboard U.S.S. Delta (Pneumonia) the following described reports checked in red ink, required by and prepared in the manner indicated in paragraph 83½, Army Regulations, which have not been received, will be forwarded to this office without delay:

- (a) Report of death in triplicate (Form No. 415, A.G.O.)
- (b) Report of board of officers.
- (c) Final statement (Form No. 370, War Department).
- (d) Inventory of effects in duplicate (Form No. 34, A.G.O.)

2. Proper signature will be affixed to the final statement; Form 415; inventory of effects.

3. The paper or papers herewith returned for correction, incorrectly state or fail to state:

- (a) Whether or not the death of the soldier occurred in line of duty, and was or was not the result of his own wilful misconduct.
- (b) Date and place of death of soldier.

4. The original report of the board of officers will be forwarded to replace the carbon copy which has been received.

5. The accompanying proceedings of the board of officers are returned herewith for the action of the convening authority.

By order of the Secretary of War:

P. C. HARRIS,
The Adjutant General.

RAC

Per EMC.....

#3872276

(THIS FOLD FOR THE QUARTERMASTER.)

Voucher No. _____

FINAL STATEMENT of Jake D. Phillips, Pvt. Co. H. 150th Inf
(Name of soldier.) (Rank.) (Company.) (Regiment.)

ACCEPTED for enlistment at Orsden, Tenn. Enlisted on July 18th, 1918
(See Instruction 5.)

Died at USS "Delta" at sea on Oct. 13th, 1918
(Discharged, furloughed to reserve, retired, or died.)

Reason Pneumonia
(State reason and order, if any, for discharge, furlough, or retirement, and in discharge, whether honorable or otherwise.)

Serving in First enlistment period at date of Death
(Discharge, furlough, retirement, or death.)

DUE SOLDIER for _____

For additional pay _____
(See Instruction 6.)

For clothing _____ and _____ dollars (\$ _____)
(Words.) 100

For deposits _____ and _____ dollars (\$ _____)
(As per itemized list on outer fold.) (Words.) 100

For pay detained by court-martial _____ and _____ dollars (\$ _____)
(See Instruction 15.) (Words.) 100

For _____
(Any other items, including com. of qrs., heat, and light, for which W. D. Form 369 must be attached hereto, see Instruction 16.)

Last paid to include September 30, 1918, by Capt. Joseph Goldman, 2nd Lt.
(Name of quartermaster.)

DUE UNITED STATES for Class "B" Allotment @ \$15.00 per month
(See Instructions 7 and 14.)
from date last paid to date of death; War Risk Insurance premium @ \$3.30 per month from date last paid to date of death.

REMARKS: Final Statement compiled from Service Record and Pay Card only data available.
Soldier sailed from U.S. Oct. 4, 1918.
(See Instructions, especially 10 and 14.)

I CERTIFY that the foregoing Final Statement, given in duplicate, is correct.
(In case of deceased soldier, strike out "given in duplicate.")

Certified a true copy.
A. W. [unclear]
1st. Lieut. MC

John A. Nelson (sgt)
Major 2nd Corps
Supply Officer, P. O. O
Dist. of Remains Section
Post of [unclear] Commanding Organization.

WAR DEPARTMENT.
Form No. 370.
Approved by the Comptroller of the Treasury July 31, 1916.

03-2377

(Name of quartermaster.)
THE UNITED STATES

To _____
(Name of soldier.)
_____, Dr.
(Rank.) (Organization from which discharged.)

DUE SOLDIER.

Prior fiscal year:		
Pay of Army, 191 _____		
Fiscal year in which discharged, furloughed, retired, or died:		
Pay _____ \$		
Interest _____ \$		
Com. qrs., heat, light _____ \$		
Total Pay of Army, 191 _____		
Clothing _____ \$		
Travel pay _____ \$		
_____ \$		
Total S. S. and T., 191 _____		
Deposits, Deposit Fund _____		
Total amount due soldier _____		

DUE UNITED STATES.

For _____ \$		
Total stoppages _____		
Balance due soldier _____		

Paid by check No. _____ on Treasurer United States, dated _____, 191 _____, for \$ _____

Deposit with my new account _____ \$ _____
(Signature of soldier.)

Post Exchange paid by Check No. _____ on TREASURER UNITED STATES, dated _____, 191 _____, for \$ _____

(To be completely filled in before signature by payee without alteration or erasure thereafter.)

Received _____, 191 _____, of

Quartermaster Corps, U. S. A., _____ and _____ dollars in cash.
100

(Do not sign a duplicate.)
NOTE.—This fold will become the brief after payment by the quartermaster.

PHIL LIPS

"J" "D" 3872276

Name _____ Print clearly Last name First name Middle name Number Rank or Grade Rank or Grade Rank or Grade

Main Occupation *Gen Farming* Years *9* Symbol *2F* A J E

Army Specialty Assigned by Personnel Officer as _____ Med. Class Preferred _____

Just what did you do? *Gen Farm Labor*

Married? *✓* Non-E Illiterate Intelligence SD

Age at end of Schooling *16* Age *24* Height *69* ins. Weight *172* lbs. Race *✓*

Firm worked for? *Self & Mother*
 Dept., Shop or Branch? _____ Kind of Business _____

Trade Tests Symbol Rating Recommendation Greatest authority or leadership as capt. of team, foreman, etc. *Manager of Mother's farm.*

Address of Firm? *Dresden Tenn* Weekly Wages, \$ *25.00*

Check once ✓ occupations in which he has some knowledge and ability; check twice ✓✓ occupations at which he is skilled. After each checked occupation write number of years of experience. Put a circle around years of minor concurrent occupation.

Yrs.	Yrs.	Yrs.	Yrs.	Yrs.
1 Factory worker.....	19 Sheet metal worker.....	34 Photographer, still or moving.....	SUPPLEMENTARY LIST	
2 Farmer.....	20 Foundryman.....	35 Lumberman.....	61 Airplane mechanic.....	75 Laundry man.....
3 Laborer.....	21 Structural steel w'kr.....	36 Boatman, mariner.....	64 Architect.....	78 Metal finisher.....
4 Lawyer, teacher.....	22 Chauffeur—auto.....	37 Accountant.....	62 Artist (camouflage).....	79 Millwright.....
5 Business man.....	23 Chauffeur—truck.....	38 Clerical worker.....	64 Bacteriologist.....	90 Mule packer.....
6 Machinist.....	24 Auto mechanic.....	39 Stenog., typist.....	63 Boiler maker.....	91 Munitions worker.....
7 Blacksmith.....	25 Gasoline engine repairman (not auto).....	40 Baker or cook.....	66 Canvas worker.....	97 Physicist.....
8 Carpenter.....	26 Bricklayer.....	41 Butcher.....	67 Chemist.....	66 Pigeon fancier.....
9 Concrete worker.....	27 Horse, care of.....	42 Merch't, job'r, wholes'r.....	105 Civil Engineer.....	81 Purchaser.....
10 Electrician.....	28 Farrier, veterinarian.....	43 Medical man.....	77 Compressed air oper.....	84 Purchasing agent.....
11 Gunsmith.....	29 Draftsman.....	44 Band musician.....	80 Cooper.....	98 Refrigeration man.....
12 Miner.....	30 Surveyor.....	45 Barber.....	82 Crane operator.....	100 Rigger.....
13 Painter.....	31 Telegrapher, including wireless.....	46 Printer.....	82 Detective, policeman.....	94 Rubber worker.....
14 Pipe fitter.....	32 Lineman.....	47 Leather worker.....	68 Fire Dept. man.....	88 Sanitarian.....
15 R. R. operating man.....	33 Telephone operator or repairman.....	48 Tailor.....	69 Gas plant worker.....	102 Transportation man.....
16 Road worker.....		49 Inspector.....	93 Heating engineer.....	103 Upholsterer.....
17 Engineman, fireman.....		50 Construction foreman.....	87 Hydraulic engine oper.....	95 Water supply man.....
18 Stockkeeper.....			72 Instrument repairer.....	96 Welder.....
				104 Writer.....

Form CCP 1 6-1-1918 SOLDIERS' QUALIFICATION CARD 20

Details 2d Best Occupation *humble care of head horses* Symbol *2T* A J E

Details 3d Best Occupation _____ Symbol A J E

Name of Unlisted Occupation _____

SCHOOLING	No. of yrs.	Graduated		Ability to converse in:—		
		Yes	No	French 52	German 53	Name other languages 54
Common School	6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fairly Well	—	—
High School	510	<input type="checkbox"/>	<input type="checkbox"/>	Fluently	—	—
College or University	51g			Institution	Subject of Specialization	
Technical College	51g					
Trade, Night or Business School						

Army Trade Schls. at:	No. wks.	Course	A J E
1.			
2.			
3.			

Previous military experience:
 Rank; years of service; organization no

Branch of service or special duty preferred Seamster.

Religious preference? Baptist
Answer requested but not required

Member of what fraternal, etc., organizations? W.O.W

Talent for furnishing public entertainment no

- ARMY SPECIALTIES**
- | | | |
|--------------------------|----------------------------|---------------------------------|
| 1 Sapper | 10 Rifle grenadier..... | 19 Ammunition cannoneer |
| 2 Pioneer..... | 11 Rifleman | 20 Gun cannoneer |
| 3 Stokes mortar..... | 12 Automatic rifleman..... | 21 Driver..... |
| 4 1-pounder | 13 Company clerk..... | 22 Instru. man (artillery)..... |
| 5 Telephone..... | 14 Runner..... | 23 S. of communication |
| 6 Radio | 15 Machine gunner | 24 Artillery)..... |
| 7 Visual signalman | 16 Horseshoer..... | 25 Lithographer |
| 8 Wagoner | 17 Packer | 25 Powderman |
| 9 Hand bomber | 18 Gunner (artillery)..... | 26 Rigger |

Birthplace of father U.S. of mother U.S.
 Give city and State of U. S. or Province and Name of Foreign Country

of soldier Bresden Geun How long in U. S.? — yrs.

Citizen Taken out first papers Non-citizen
Check one.

From Local Board Bresden, Weakley Co, Geun.
 No. Town, City, or County State

No. 2231 Red Ink No. 925 Date of induction 7-18-18

Signature of soldier J. D. Phillips
 Signature of interviewer Melton M. Thomas Jr.
 Rank Pvt.

PRESENT ASSIGNMENT AND FUTURE CHANGES

Company	Organization	Division	Date
1 <u>L</u>	<u>150 Inf</u>	<u>38</u>	<u>8/3/18</u>
2			
3			
4			
5			

REMARKS

201 (Phillips, Jake D.)

1st Ind.

S-PUO-H
mp/rac

Hqs., Port of Embarkation, Hoboken, N.J., Feb. 5, 1919. To The Adjutant General of the Army, Washington, D.C.

1. Returned, enclosing Final Statement called for in Paragraph 1:c. Attention is invited to the fact that it is impossible to forward Form 415 A.G.O., requested in Paragraph 1: a, as Medical Officer's signed Death Certificate was not turned over to this office, from which Form 415 is prepared. Attention is also invited to correction in first name of deceased.
2. Inventory of Effects in the case of the above named Jake D. Phillips will be forwarded when effects have been disposed of in accordance with 112th Article of War.

1 Encl.

D.C. Shanks,
Major General,
Commanding.

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE,
WASHINGTON

EMC/MGB/En1/61

From: The Adjutant General of the Army.

To: The Commanding General, Port of Embarkation,
Hoboken, N.J.

Subject: Deceased soldier.

1. In the case of Pvt. John D. Philips, Co.L, 150th Infantry who died Oct. 13, 1918 on board U.S.S. Delta the following described reports checked in red ink, required by and prepared in the manner indicated in paragraph 83½, Army Regulations, which have not been received, will be forwarded to this office without delay:

- ~~(a)~~ Report of death in triplicate (Form No. 415, A.G.O.)
- (b) Report of board of officers.
- ~~(c)~~ Final statement (Form No. 370, War Department).
- ~~(d)~~ Inventory of effects in duplicate (Form No. 34, A.G.O.)

2. Proper signature will be affixed to the final statement; Form 415; inventory of effects.

3. The paper or papers herewith returned for correction, incorrectly state or fail to state:

- (a) Whether or not the death of the soldier occurred in line of duty, and was or was not the result of his own wilful misconduct.
- (b) Date and place of death of soldier.

4. The original report of the board of officers will be forwarded to replace the carbon copy which has been received.

5. The accompanying proceedings of the board of officers are returned herewith for the action of the convening authority.

By order of the Secretary of War:

P. C. HARRIS,
The Adjutant General.

rac

Per....EMC.....

1st Lieut. Q. M. Corps.

Port of Embarkation, Hoboken, N.J.

Nov. 21, 18

Private Jake D. Phillips,

L,

150th Infantry.

3872276.

Oct. 13, 1918 U.S.S. Delta.

Influenza. Buried at Sea.

Sarah Davis Phillips, (Mother)

R.R. #6. Dresden, Tenn.

MC MANUS.

2-MTO
1-EGO
1-PA
1-File. ✓

LGR

Handwritten mark

CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	Phillips	3	0689
Jake D.	Phi		
BURIED	CEMETERY ASB	1	
	GRAVE	2	
	ROW	2	
C 85854	BLOCK	1	
STATE	Tenn	2	48
RANK	Priv	1	2
DIVISION	38	2	38
ORGANIZATION	150	3	150
ARM	Inf	1	1
MARITAL	no	1	2
NAME	Phillips (Sis-in-law)	3	0687
J. A. Mrs	STATE Tennessee	2	03
RESIDENCE	COUNTY Craighead	2	16
F.B. 13 of 496	CITY Jonesboro	3	020
RELATION	mother	1	1
OTHER	Art, Sister-in-law	1	3
ELIGIBILITY	Dead	1	6
NATIVITY	Since the war	1	
RACE	WSP WSP	1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE		1	
29/514/			

AUDITED
SEP 27 1952
RAM

Jonesboro, Arkansas
P. O. Box 496
May 7, 1931

ASB

Mr. A. D. Hughes
War Department
Washington, D. C.

Dear Sir:

In answer to your letter of May the 4th, addressed to T. O. Phillips, Jackson, Tennessee, in regard to the late Private Jake D. Phillips.

At the time of Jake D. Phillips' death his mother was living, but she died about two years ago, so his brother, T. O. Phillips, has taken care of her business, untill eighteen months ago T. O. Phillips died, so Jake D. Phillips only has three sisters living, and I his sister-in-law.

He was not married, for further information write me, I will be glad to help in any way I can.

Very truly yours,



Mrs T. O. Phillips

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Phillips, Jake D. - U-ASB Bro

July 11, 1930.

Mr. T. O. Phillips,
432 E. Deaderick Ave.,
Jackson, Tennessee.

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress of March 2, 1929, together with an amendment thereto, approved May 15, 1930.

This office has no record of any person entitled under the Act mentioned to make a pilgrimage to the cemeteries in Europe as the mother or widow of the above named deceased service man. To complete the list of eligibles and to assure that, if the above named man is survived by a mother or widow entitled to make a pilgrimage she receive an invitation to do so, it is requested you answer the following questions in the space provided on this letter and return to this office in the enclosed envelope which requires no postage.

1. Is the deceased survived by a mother?

If so, give her name and address:

2. Is the deceased survived by a widow who has not remarried?

If so, give her name and address:

3. Is the deceased survived by any woman who stood in loco parentis to him according to the terms of Section 4 (a) of the enclosed Act as amended?

If so, give her name and address:

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment

A. D. HUGHES,
Captain, Q. M. Corps,
Assistant.