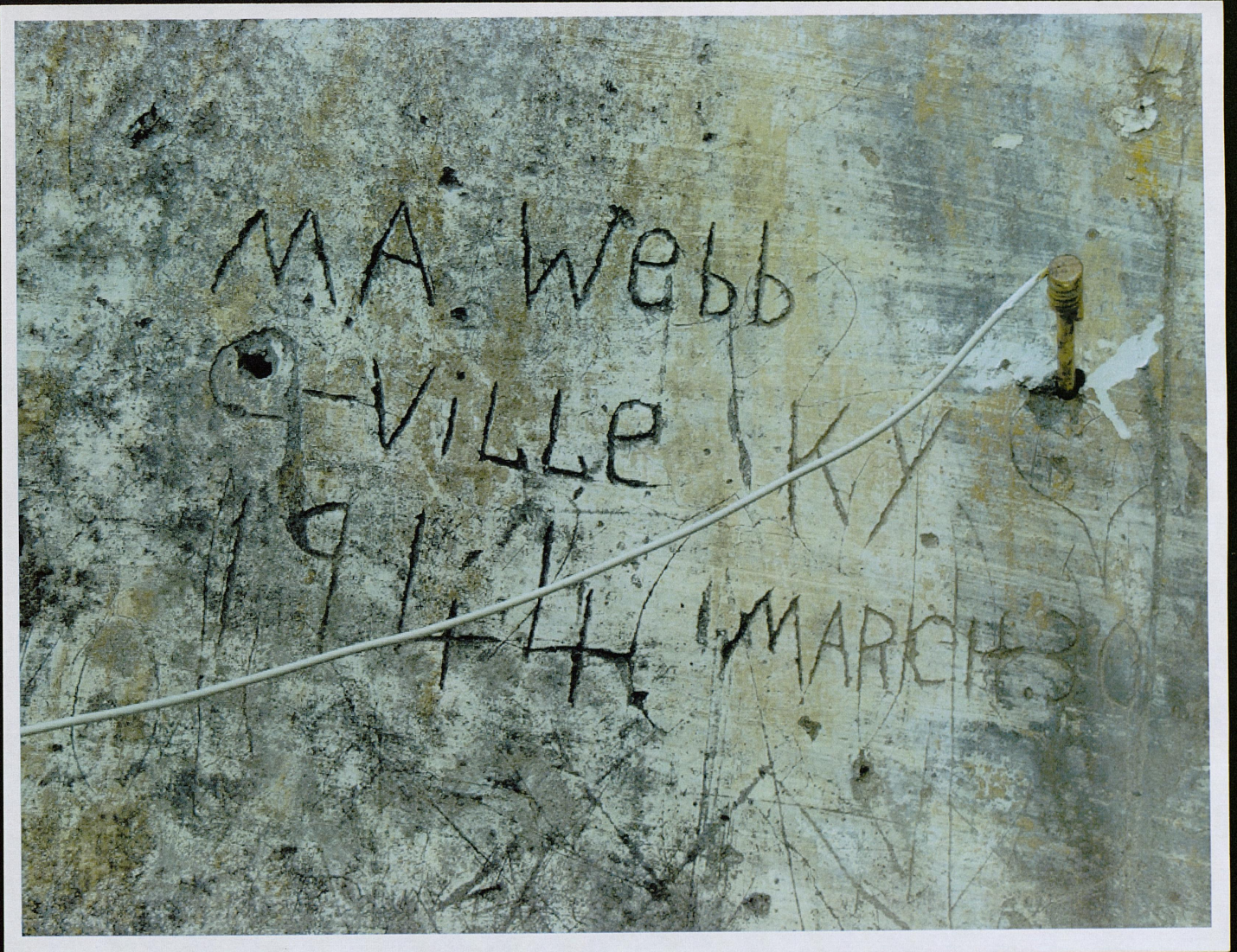

WEBB



M.A. Webb

—VILLE

KY

MARCHES

Photographs of the Mr. Webb's writing location, in Vico Piazzatella - village of Tremensuoli, from different points of view.

In photo #4 it is possible to recognize the sea horizon (Tyrrhenian Sea), just the direction the Scauri town is, on the Minturno's coast.

Ruins of World War II still are around in the village, as you can see. Some wall have been broken down some years ago because of collapse danger.



1



2



3

6



5



4

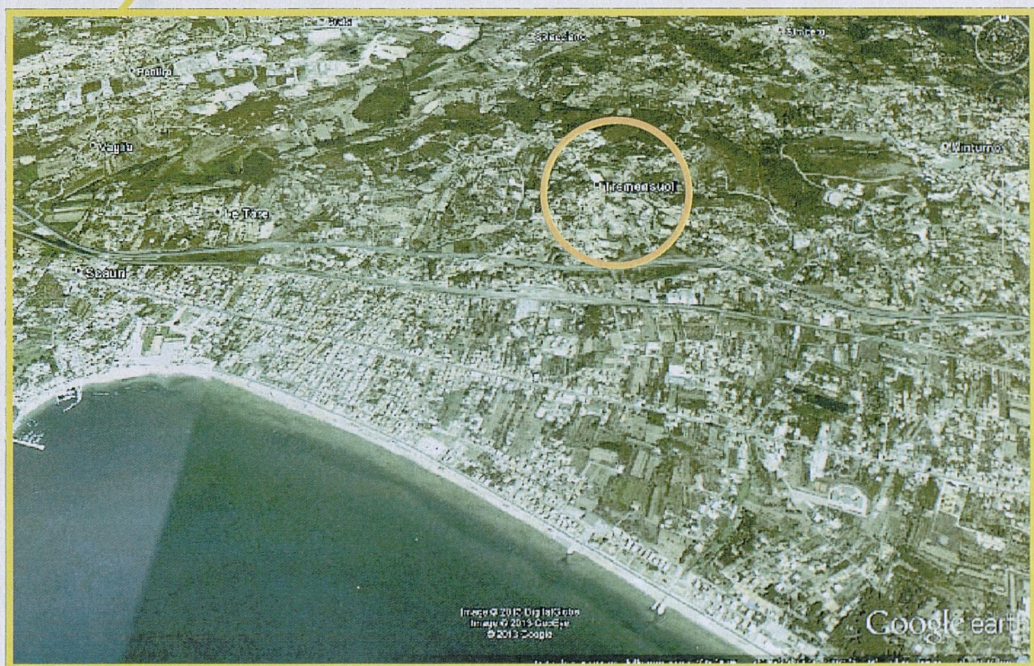
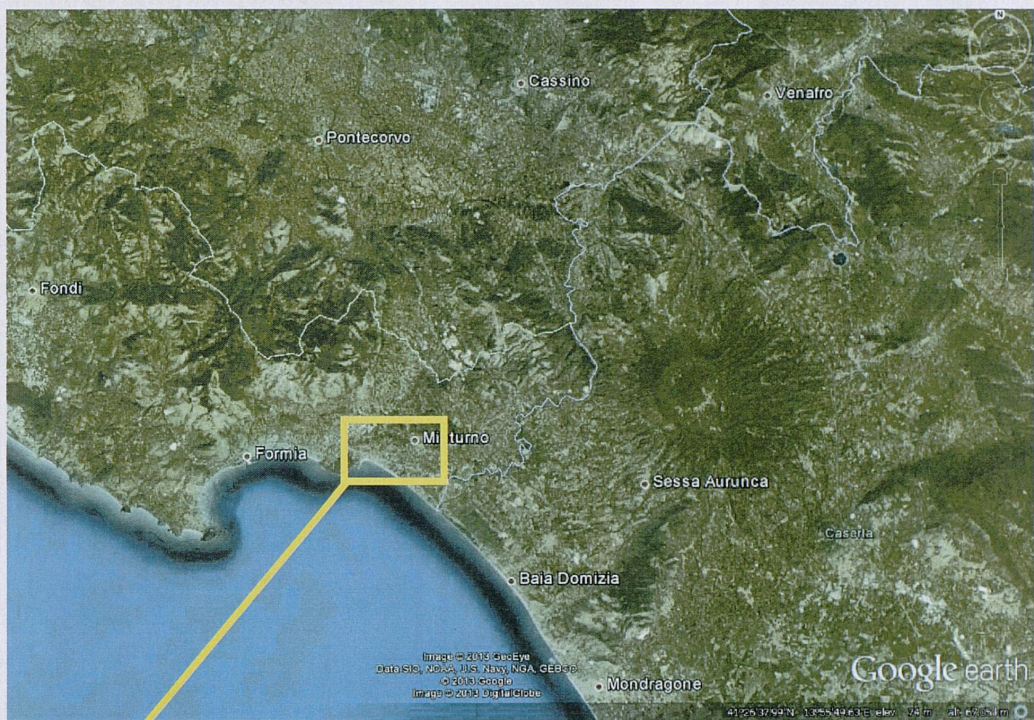


7



Photograph of the monument to the 339th Regimental Combat Team in Tremensuoli, Italy.

Dedicated in 1992 by members of the Polar Bear Association of World War II, the ceremony was attended by numerous veterans, the mayor of Minturno, and former regimental CO John English. The monument stands in the center square of the village (Largo Cappelle) with narrative in English and Italian.



**GAETA'S GULF AREA, INCLUDING THE TOWN OF CASSINO,
AND A CLOSE-UP OF THE MINTURNO'S COAST, INCLUDING THE
TOWN OF SCAURI AND THE VILLAGE OF TREMENSUOLI**



TREMENSUOLI



PHOTOGRAPH 1-2-3-4-5-6



PHOTOGRAPH 7



MARSHALL A. WEBB 1945 VINIS ITALY 5th ARMY 85 DIV.



09/07/2005

Plat. 1.

Form # 2

Certificates, Affidavits, and Customs Declarations
(Strike out portions inapplicable)

1. I certify and declare that the above items of Government Property indicated in "Remarks" as "A" were purchased by and are my personal property.

A

(Name) _____

(Rank and Arm) _____

2. As his Commanding Officer, I certify that the above named E. M. has by authority of the Theater Commander been authorized to retain the above items of captured enemy material indicated in "Remarks" as "B".

B

~~Evidence to me his ownership and right to possess the above items of British, Russian, Canadian Government material indicated in "Remarks" as "C".~~

C

~~Had the above items indicated in "Remarks" as "B" disinfected pursuant to par 24, g (1) SGO Circular Letter 33, 1943.~~

Carl R Hanson
1st Lt Inf.

Date 12/AUG/1945

3. The following Customs Declarations will be accomplished in all cases. In addition, the Customs Declaration tag will be accomplished and affixed to the container.

CUSTOMS DECLARATION

I declare that all items listed herein consist of personal or household goods or effects either taken abroad or acquired abroad for my use, except the following:

(Here list items or write "NO EXCEPTIONS" as appropriate)

- 9. GERMAN PISTOLS P-38-1-1068
- 1 GERMAN CAMERA
- 1 ~~GERMAN CAMERA~~
- 1 - FLASHLIGHT
- 1 - METAL

DATE 12/AUG/1945

SIGNATURE Marshall A. Webb

RANK AND ASN S/SGT. 34689680

Form #2

OWNER'S INVENTORY WITH CERTIFICATES, AFFIDAVITS, AND CUSTOMS DECLARATION

Name Webb MARSHALL A. Date 12/AUG/1945

Rank and ASN S/SGT. 35689580 Ship to U.S.A.

Organization 427-29 Address A.P.O. 372

Type of Container DUFFEL BAG INVENTORY

INVENTORY

| Item No. | Quantity | Description | Remarks (see other side) |
|----------|----------|--|--------------------------|
| 1 | 1 | Coat, Wool, Serge, (Blouse) | |
| 2 | 1 | Raincoat | |
| 3 | 1 | Jacket, Field | |
| 4 | | Towel, bath | |
| 5 | | Towel, bath | |
| 6 | 1 | Toilet, articles, set | |
| 7 | 1 | handkerchiefs | |
| 8 | 2 | Neckties | |
| 9 | 4 | socks, wool | |
| 10 | 1 | Underwear, cotton | |
| 11 | 5 | Drawers, cotton | |
| 12 | 2 | Shirt, flannel, OD | |
| 13 | 2 | Trousers, flannel, OD | |
| 14 | 1 | Cap, wool, OD | |
| 15 | 1 | Bag, canvas, field <u>HAVESACK</u> | |
| 16 | | Gloves, wool, OD | |
| 17 | 1 | Belt, web, waist | |
| 18 | 1 | Belt, metal cartridge | |
| 19 | 1 | Canteen w/ cover | |
| 20 | | Packet and pouch, first aid | |
| 21 | 2 | Blankets, wool, OD | |
| 22 | 1 | Can, Meat, complete | |
| 23 | 1 | Cup | |
| 24 | 1 | Knife, fork, spoon | |
| 25 | 1 | Bag, canvas , duffel, OD | |
| 26 | 2 | Shoes, boots, service | |
| 27 | 1 | <u>TRUSERS KHAKI</u> | |
| 28 | 1 | <u>SHIRT KHAKI</u> | |
| 29 | 1 | <u>CRP KHAKI</u> | |
| 30 | 1 | <u>FADING GCS, SET, COMPLETE</u> | |
| 31 | 2 | <u>SHOES CIV.</u> | |
| 32 | 0 | | |
| 33 | 0 | <u>SET, WRITTING</u> | |
| 34 | 1 | <u>GERMAN, CAMERA</u> | |
| 35 | 1 | <u>GERMAN, CAMERA EMPTY FILMS H. R.</u> | |
| 36 | 1 | <u>TRUNKS, SWIMMING</u> | |
| 37 | 0 | GERMAN, CAMERA | |
| 38 | 2 | <u>P. STILES, 1 P-38-1-LUGER B. No. AMO.</u> | |
| 39 | 1 | <u>GERMAN, CAMERA</u> | |
| 40 | 3 | <u>GERMAN, CAMERA, P. H. B. S.</u> | |

APPROVED

1. GERMAN, METS
1945

(Inspecting Officer)

(Tag No)

D. S. S. Form 57
(Rev. 6-30-41)

NOTICE OF CLASSIFICATION

Registrant:

M. A. Webb

Order No. *76,756*

has been classified by—

LOCAL BOARD No. 152
 CAMPBELLSVILLE, TAYLOR COUNTY
 KENTUCKY
 (STAMP OF LOCAL BOARD)

Registrant sign here

Local Board Board of Appeal, by vote of *3* to

President In class *IA* (Until _____, 19____).
(Insert date for Class II-A only)

J. Porter Hunt
Member of Local Board.

Date of mailing *9-18*, 19*42*

BE ALERT
 The law requires you—
 To keep in touch with the local board.
 To notify it of any change of address.
 To notify it of any fact which might change classification.

NOTE: RIGHT TO APPEAL

Appeal from classification by local board or board of appeal must be made at office of local board, by signing appeal form on back of questionnaire or by filing written notice of appeal, within ten days after the mailing of this notice.
 Before appeal, a registrant may file a written request for appearance within the same ten-day period; and, if he does so, the local board will fix a day and notify him to appear personally before the local board; if this is done, the time to appeal is extended to ten days beyond the day set by the local board for such appearance.
 There is a right in certain dependency cases, of appeal from appeal board decision to the President; see Selective Service Regulations, Volume Three.

SELECTIVE SERVICE

Penalty for Private Use to Avoid
Payment of Postage, \$300

LOCAL BOARD No. 152
CAMPBELLSVILLE, TAYLOR COUNTY
KENTUCKY
(STAMP OF LOCAL BOARD)

OFFICIAL BUSINESS

Marshall Buckner Webb
P. O. # 5
Campbellsville
Ky

SELECTIVE SERVICE

Penalty for Private Use to Avoid
Payment of Postage, \$300

LOCAL BOARD No. 152
CAMPBELLSVILLE, TAYLOR COUNTY
KENTUCKY 1967

(Local Board Date Stamp With Code)

OFFICIAL BUSINESS

Marshall Alverous Webb

P. 5

Campbellsville Ky.

NOTICE OF CLASSIFICATION

Registrant Marshall A. Webb Order No. 10,756

Inductions postponed 60 days
has been classified in Class _____ (Until _____, 19____)
(Insert Date for Class II-A and II-B only)

- Local Board
- Board of Appeal (by vote of _____ to _____)
- President

10-3, 1942 J. Porter Ford
(Date of mailing) Member of Local Board.

NOTICE OF RIGHT TO APPEAL

Appeal from classification by local board or board of appeal must be made by signing appeal form on back of questionnaire at office of local board, or by filing written notice of appeal, within ten days after the mailing of this notice.

Before appeal, a registrant may file a written request for appearance within the same ten-day period; and, if he does so, the local board will fix a day and notify him to appear personally before the local board; if this is done, the time to appeal is extended to ten days beyond the day set by the local board for such appearance.

There is a right in certain dependency cases, of appeal from appeal board decision to the President; see Selective Service Regulations.

The law requires you—To keep in touch with your local board. To notify it of any change of address. To notify it of any fact which might change classification.

HEADQUARTERS
CAMP PATRICK HENRY, VA.

This card entitles you upon presentation at the Mess Hall in your area to a "Welcome Home Dinner."

We hope you enjoy it as much as we will enjoy serving you.

John R. Fountain
JOHN R. FOUNTAIN
Col, TC
Commanding

SELECTIVE SERVICE

Penalty for Private Use to Avoid
Payment of Postage, \$300

LOCAL BOARD NO. 152
CAMPBELLSVILLE, TAYLOR COUNTY
KENTUCKY 947

(STAMP OF LOCAL BOARD)

OFFICIAL BUSINESS

Marshall Alverus Hebb
R. F. D. 5
Campbellsville, Ky.

NOTICE TO REGISTRANT
TO APPEAR FOR
PHYSICAL EXAMINATION

9-5
1-5
(Date of mailing)

1942

You are directed to report for physical examination by the local board examiner at the time and place designated below:

Campbellsville, Ky
(Place of examination)

at 1 P. m., on Sept. 10, 1942

This examination will be of a preliminary nature, for the purpose of disclosing only *obvious* physical defects, and will not finally determine your acceptance or rejection by the armed forces.

If you are so far from your local board area that reporting for the above physical examination will constitute a hardship, you may submit a request to your local board for reference to another local board for preliminary physical examination. Your request must include the following information:

1. The reasons for your request for reference to another local board.
2. The designation (name and location) of the local board having jurisdiction over the area in which you are now located.

Failure to comply with this notice will result in your being declared a delinquent and subjected to the penalties provided by law.

D. S. S. Form 201
(Rev. 4-1-42)


GPO 16-13335-2

Thomas C. Dobuey
Clerk of Local Board.

SELECTIVE SERVICE

Ready for Private Use to Avoid
Payment of Postage, \$300

LOCAL BOARD No. 152
CAMPBELLSVILLE, TAYLOR COUNTY
KENTUCKY
(STAMP OF LOCAL BOARD)



OFFICIAL BUSINESS

Marshall Clavinus Webb

R. 5

616-10671-1

D. S. S. Form 57
(Rev. 6-30-41)

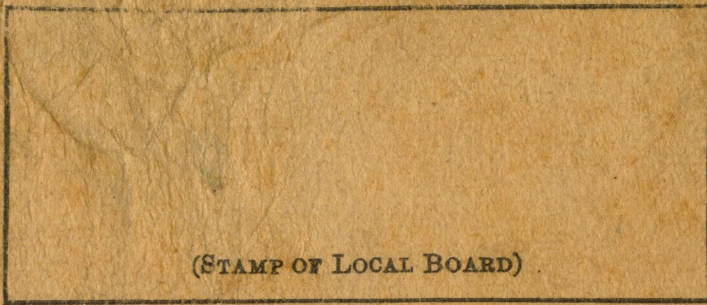
NOTICE OF CLASSIFICATION

Registrant:

Marshall Webb

Order No. 10,756

has been classified by—



(STAMP OF LOCAL BOARD)

(Registrant sign here)

Local Board Board of Appeal, by vote of _____ to _____

President In class 1 (Until _____, 19____).

(Insert date for Class II-A only)

Porter H. D.
Member of Local Board.

Date of mailing 9-4, 1942

BE ALERT

The law requires you—
To keep in touch with
the local board.

To notify it of any
change of address.

To notify it of any
fact which might change
classification.

NOTE: RIGHT TO APPEAL

Appeal from classification by local board or board of appeal must be made at office of local board, by signing appeal form on back of questionnaire or by filing written notice of appeal, within ten days after the mailing of this notice.

Before appeal, a registrant may file a written request for appearance within the same ten-day period; and, if he does so, the local board will fix a day and notify him to appear personally before the local board; if this is done, the time to appeal is extended to ten days beyond the day set by the local board for such appearance.

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H

From Cecil

to

Marshall

Hubbard

from Rena
to Marshall

R

17 YEARS
OLD



MEMORANDUM RECEIPT
DEPT

Issued to _____ Date 194

Property of Repl. Co. Place APO 372

| NO. | ARTICLES | UNIT |
|-----|-----------------|------|
| 1 | Case, Pillow | |
| 1 | Cover, Mattress | |
| 1 | Mattress | |
| 1 | Pillow Sheet | |

I certify that I have received for use during my stay at the _____ Repl. Co., the above items in good condition, for which I understand I shall be held strictly accountable and which I shall return in good condition, in order to claim my receipt, when notified to do so immediately prior to my departure. I understand that failure to comply with the above will result in disciplinary action.

NAME _____ SIGNATURE _____ A/N _____

ORIGINAL—To be presented to concern (or person) furnishing meals.

This ticket should be accepted in lieu of cash by concerns or persons serving meals to the public, and it must be presented before ordering meals, signed by the person receiving meals or person in charge of party. When properly signed by Issuing Officer, person receiving for meals, and concern (or person) furnishing meals, person or concern supplying meals must forward this ticket to Meal Ticket Section, Finance Officer, U. S. Army, Chicago, Illinois. Keep record of ticket number until payment is received. 16-20414-2



UNITED STATES ARMY MEAL TICKET

(Good for meals only)

Camp Atterbury, Indiana

29 Aug 45, 19

NOT NEGOTIABLE

Any concern (or person) serving meals to the public, on presentation of this request, signed by the Issuing Officer, is authorized to furnish S Sgt Marshall Webb and no other enlisted personnel of the Army en route under travel orders: SO 209/216 HqRS 28 A Camp Atterbury, Indiana with one meals, at a cost of not to exceed \$1 per meal when served in dining cars on railroad trains, and not to exceed 75c elsewhere. Appropriation and Procurement Authority 9-999A212/6012 T. R. Nos. 25, 087, 916478

I certify that meal(s) furnished by tsg WILLIAM A. GATES, MAJOR, TC at on 19 at a total cost of \$

I certify that meal(s) furnished as stated hereon on 19 at a total cost of \$ no part of which was refunded in cash; that the amount stated is correct and just, and is not in excess of the regular rate or the contract price charged by the undersigned; and that payment therefor has not been received. By: (Name of concern (or person) furnishing meals) Official title (Name of person signing) Address (Town or city) State

W. D., Q. M. C. Form No. 464, 22 July 1943 Form approved by Comptroller General, U. S. 13 January 1941

THIS MEAL TICKET SHALL BE USED FOR THE PROCUREMENT OF FOOD AND NONALCOHOLIC BEVERAGES ONLY (Use typewriter, ink, or indelible pencil only to fill in this ticket)

A.M.T. B- 1892899

ORIGINAL—To be presented to concern (or person) furnishing meals.

This ticket should be accepted in lieu of cash by concerns or persons serving meals to the public, and it must be presented before ordering meals, signed by the person receiving meals or person in charge of party. When properly signed by Issuing Officer, person receiving for meals, and concern (or person) furnishing meals, person or concern supplying meals must forward this ticket to Meal Ticket Section, Finance Officer, U. S. Army, Chicago, Illinois. Keep record of ticket number until payment is received. 16-20414-2



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W. D., Q. M. C. Form No. 464, 22 July 1943 Form approved by Comptroller General, U. S. 13 January 1941

THIS MEAL TICKET SHALL BE USED FOR THE PROCUREMENT OF FOOD AND NONALCOHOLIC BEVERAGES ONLY (Use typewriter, ink, or indelible pencil only to fill in this ticket)

A.M.T. B- 1892900

INSTRUCTIONS

NO ALTERATIONS OR ERASURES SHALL BE MADE ON ANY TICKET UNLESS CERTIFIED TO BE CORRECT
BY THE ISSUING OFFICER

TO THE CONCERN (OR PERSON) SERVING MEALS:

1. The representative of the concern (or person) who furnishes meals on this ticket must see that the number of meals furnished is not greater than the number authorized by the Issuing Officer; must show the name of the restaurant, dining car, boat, etc.; the date meals were furnished and the number of meals furnished; and must secure on the ticket the signature of the person receiving the meals or person in charge of the party.

2. Meal tickets, with address and amount filled in, and certified to on the right-hand margin by the concern (or person) furnishing meals, should be mailed to Meal Ticket Section, Finance Officer, U. S. Army, Chicago, Illinois.

TO THE PERSON RECEIVING MEALS:

1. This ticket must be shown to the representative of the concern (or person) who serves meals to the public and instructions asked as to where and when meals are to be obtained; must be presented to the person in charge of the concern (or person) serving meals to the public before ordering the meals; and the certification at the bottom must be signed by the person receiving the meals or person in charge of the party, who should enter on the ticket the number and value of meals actually received.

2. Unused tickets will be turned over to the Commanding Officer at the completion of the journey, for return to the Issuing Officer.

TO THE ISSUING OFFICER:

1. Meal tickets will be issued only to parties in accordance with current regulations.

2. Each meal ticket should call for as many meals as there are enlisted men in the party and separate tickets should be issued for the different meals required for the party during the journey. 16-20414-1 GPO

INSTRUCTIONS

NO ALTERATIONS OR ERASURES SHALL BE MADE ON ANY TICKET UNLESS CERTIFIED TO BE CORRECT
BY THE ISSUING OFFICER

TO THE CONCERN (OR PERSON) SERVING MEALS:

1. The representative of the concern (or person) who furnishes meals on this ticket must see that the number of meals furnished is not greater than the number authorized by the Issuing Officer; must show the name of the restaurant, dining car, boat, etc.; the date meals were furnished and the number of meals furnished; and must secure on the ticket the signature of the person receiving the meals or person in charge of the party.

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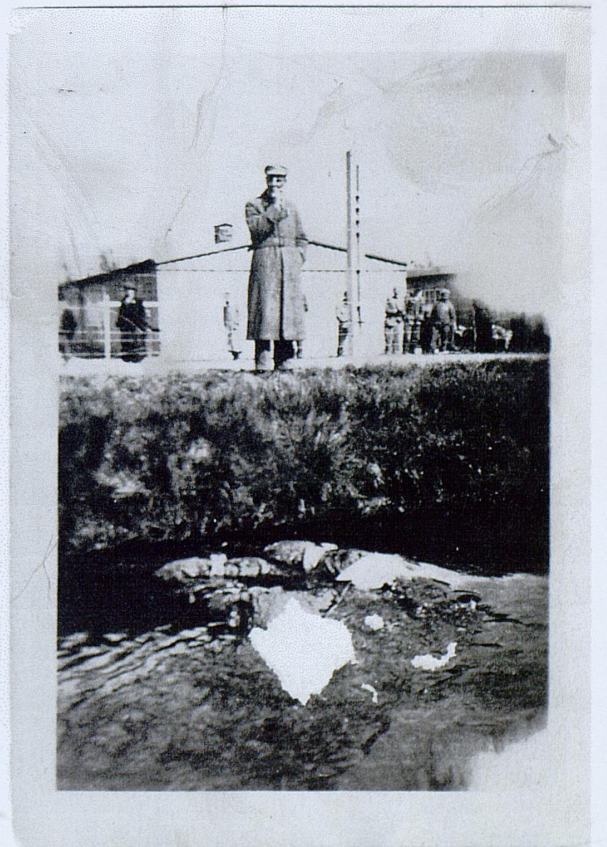
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2. Each meal ticket should call for as many meals as there are enlisted men in the party and separate tickets should be issued for the different meals required for the party during the journey. 16-20414-1 GPO









INDIVIDUALS PRE-EMBARKATION HEALTH CERTIFICATE

THIS IS TO CERTIFY THAT

Webb MARSHALL A. S/SGT. 35689584
(Name) (Rank) (ASN)

29th Replacement Battalion was physically inspected at the 7th Replacement Depot,

APC 372, 16 AUG. 1945, and was found to be free from communicable and quarantineable diseases, free from vermin and has complied with current War Dept immunization requirements for military personnel in this area being departed.

Ovid J. Pomerleau
OVID J. POMERLEAU
Captain, MC
29th Repl Bn

NOTE: This certificate is to be kept in the individual's possession at all times.

45 or 34 ?

Casablanca
N. Africa

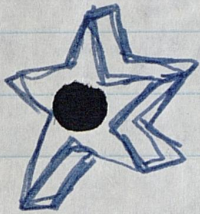
Oran ?
Arjuna

FOUGHT



85 Div. 339 inf Comp E

Tunnes
Caserini
pass
2nd
Cassin



11th May = Gothic
GOLTA line
Trensola

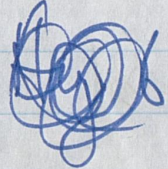
10 miles north of

~~Salerno~~
Salerno

44-65-89-47

Sata
Fonola
etry

Towns



?

Highway 6 L

Castel 40

Motn ?

Salerno River
Cross the river 3 times

DAD WEBB

Rome

Bologna
Verona

AUSTRIA

Quiria -

(Arno River)
(Pol River)



Briner Pass

Town Moso + Marano

(last fight)

CAMPBELL'S MILLS

MARSHALL A. WEBB

The 339th infantry (Comp. E.)
85th Div. infantry

11th of May - SOLTA LINE 10 MILES NORTH OF SALERNO

TOWNS - GATA - FONDA - ITRY —

DAD LANDED IN 2 JAN 2. 1944

CASABLANCA N. AFRICA -

TOWNS - GRAN - ARZIA - TUNNESS (CASERINE PASS)

(CASTEL MOTN 40)

GALANES RIVER

CROSS THE RIVER 3-TIMES
IN FIGHTING

Rome

BALONA

VORANA

ARNO RIVER

POL RIVER

AUSTRIA - BRINER PASS TOWN OF MOSO + MARANIO
IT WAS THE LAST TIME DAD FIRED HIS RIFLE -

ICE FORCES
5th SC [redacted] SCU, Rec Sta #6
Camp Atterbury, Indiana

I certify that the S/R of

WEBB MARSHALL A.

35689580

S/Sgt.

Shows He is atzd to wear the fol:

CAMP. STARS

- | | |
|----------------------------|-------------|
| () AMERICAN DEFENCE | _____ |
| () AMERICAN THEATER | _____ |
| (4) EAME THEATER (ETO RIB) | _____ 3 |
| () ASIA PAC THEATER | _____ |
| () P.I. LIB RIBBON | _____ |
| (4) GOOD CONDUCT MEDAL | _____ |
| (4) OVERSEAS BARS | _____ \$ |
| () SV CHEV (HASH MARK) | _____ |
| (4) COMBAT INF BADGE | _____ |
| () SILVER STAR MEDAL | _____ |
| () DIST FLYING CROSS | _____ BRONZ |
| (4) BRONZE STAR MEDAL | _____ OAK |
| () AIR MEDAL | _____ LEAF |
| () DIST UNIT BADGE | _____ CIUS |
| (4) PURPLE HEART | _____ |
| () _____ | _____ |
| () _____ | _____ |

The above list is taken from your S/R. If incorrect or incomplete check with your CO when you rejoin your outfit.

CERTIFICATE ISSUED:

AUG 23 1945
Date

E. P. Ellis
E F ELLIS,
Capt., CAC,
Asst Adjutant

Army of the United States



SEPARATION QUALIFICATION RECORD

SAVE THIS FORM. IT WILL NOT BE REPLACED IF LOST

This record of job assignments and special training received in the Army is furnished to the soldier when he leaves the service. In its preparation, information is taken from available Army records and supplemented by personal interview. The information about civilian education and work experience is based on the individual's own statements. The veteran may present this document to former employers, prospective employers, representatives of schools or colleges, or use it in any other way that may prove beneficial to him.

| | | | | | |
|--|-----------------------|------------------------|-----------------------------------|-----------|-------------------------------------|
| 1. LAST NAME—FIRST NAME—MIDDLE INITIAL | | | MILITARY OCCUPATIONAL ASSIGNMENTS | | |
| WEBB, MARSHALL A. | | | 10. MONTHS | 11. GRADE | 12. MILITARY OCCUPATIONAL SPECIALTY |
| 2. ARMY SERIAL No. | 3. GRADE | 4. SOCIAL SECURITY No. | 3 | Pvt. | Basic (521) |
| 35 689 580 | S/Sgt | None | 11 | Pfc. | Automatic Rifleman (746) |
| 5. PERMANENT MAILING ADDRESS (Street, City, County, State) | | | 20 | S/Sgt. | Squad Leader (745) |
| Rt. 5, Campbellsville, Taylor County, Ky. | | | | | |
| 6. DATE OF ENTRY INTO ACTIVE SERVICE | 7. DATE OF SEPARATION | 8. DATE OF BIRTH | | | |
| 11 Dec 1942 | 21 Oct 1945 | 24 Feb 1922 | | | |
| 9. PLACE OF SEPARATION | | | | | |
| Separation Center, Camp Shelby, Miss. | | | | | |

SUMMARY OF MILITARY OCCUPATIONS

13. TITLE—DESCRIPTION—RELATED CIVILIAN OCCUPATION

SQUAD LEADER: Was with 339th Inf. in Africa, Sicily, Italy, and Austria. He was commander of 11 man rifle squad. He supervised their conduct in combat and led them on patrol.



Honorable Discharge

This is to certify that

MARSHALL A WEBB 35 689 580 STAFF SERGEANT
COMPANY "K" 34TH INFANTRY

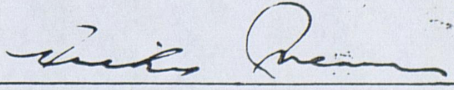
Army of the United States

*is hereby Honorably Discharged from the military
service of the United States of America.*

*This certificate is awarded as a testimonial of Honest
and Faithful Service to this country.*

Given at SEPARATION CENTER
CAMP SHELBY MISSISSIPPI

Date 21 OCTOBER 1945


ARCHIE SORENSON
MAJOR AUS

ENLISTED RECORD AND REPORT OF SEPARATION HONORABLE DISCHARGE

| | | | | | | | | | | | |
|--|--|--|---|---|--------------------------|---|---------------------------------|---|----------------------------|----------------------------|--|
| 1. LAST NAME - FIRST NAME - MIDDLE INITIAL WEBB MARSHALL A | | | 2. ARMY SERVICE NO. 35 580 | | 3. GRADE s/sgt | | 4. ARM OR SERVICE INF | | 5. COMPONENT AUS | | |
| 6. ORGANIZATION CO "K" 349TH INF | | | 7. DATE OF SEPARATION 21 OCT 45 | | | 8. PLACE OF SEPARATION SEP GEN CP SHELLEY MISS | | | | | |
| 9. PERMANENT ADDRESS FOR MAILING PURPOSES RT 5 CAMPBELLISVILLE TAYLOR KY | | | | | | 10. DATE OF BIRTH 24 FEB 22 | | 11. PLACE OF BIRTH CAMPBELLISVILLE KY | | | |
| 12. ADDRESS FROM WHICH EMPLOYMENT WILL BE SOUGHT SEE 9 | | | | | | 13. COLOR EYES BLUE | | 14. COLOR HAIR BROWN | | 15. HEIGHT 5'10" | |
| 16. RACE <input checked="" type="checkbox"/> WHITE | | 19. MARITAL STATUS <input checked="" type="checkbox"/> SINGLE | | 20. U.S. CITIZEN <input checked="" type="checkbox"/> YES | | 21. CIVILIAN OCCUPATION AND NO. FARM HAND GENERAL 3 16.10 | | | | | |

MILITARY HISTORY

| | | | | | | | |
|--|--------------------------|--|-------------------------------------|--|------------------------------|---|--|
| 22. DATE OF INDOUCTION 3 DEC 42 | | 23. DATE OF ENLISTMENT 11 DEC 42 | | 24. DATE OF ENTRY INTO ACTIVE SERVICE | | 25. PLACE OF ENTRY INTO SERVICE LOUISVILLE KY | |
| 26. REGISTERED <input checked="" type="checkbox"/> YES | | 27. LOCAL S. S. BOARD NO. 152 | | 28. COUNTY AND STATE TAYLOR KY | | 29. HOME ADDRESS AT TIME OF ENTRY INTO SERVICE SEE 9 | |
| 30. MILITARY OCCUPATIONAL SPECIALTY AND NO. SQUAD LEADER 745 | | | | 31. MILITARY QUALIFICATION AND DATE (i.e., infantry, aviation and marksmanship badges, etc.) COMB INF BADGE AR ? | | | |
| 32. BATTLES AND CAMPAIGNS ROME ARNO, N APPENNINES, PO VALLEY | | | | | | | |
| 33. DECORATIONS AND CITATIONS RA.ETO MED, GOOD COND MED, PURPLE HEART MED, BRONZE STAR | | | | | | | |
| 34. WOUNDS RECEIVED IN ACTION RA.ETO ? | | | | | | | |
| 35. LATEST IMMUNIZATION DATES | | | | 36. SERVICE OUTSIDE CONTINENTAL U. S. AND RETURN | | | |
| SMALLPOX NOV 44 | TYPHOID MAY 45 | TETANUS OCT 43 | OTHER (specify) TY MAY 45 | DATE OF DEPARTURE 24 DEC 43 | DESTINATION RAMETO | DATE OF ARRIVAL 2 JAN 44 | |
| 37. TOTAL LENGTH OF SERVICE | | | | 38. HIGHEST GRADE HELD | | | |
| CONTINENTAL SERVICE | | FOREIGN SERVICE | | S/SGT | | | |
| YEARS 1 | MONTHS 2 | DAYS 16 | YEARS 1 | | | | |
| 39. PRIOR SERVICE NONE | | | | | | | |
| 40. REASON AND AUTHORITY FOR SEPARATION AR 615 365 CONVN OF GOVT RR 1 1 (DEMOBILIZATION) | | | | | | | |
| 41. SERVICE SCHOOLS ATTENDED NONE | | | | | | 42. EDUCATION (Years) Grammar 8 High School 0 College 0 | |

PAY DATA

| | | | | | | | | | | |
|--------------------------------|---------------------|-------------------|------------------------|-------------------------------|----------------------|--|----------------|--|--|--|
| 43. LONGEVITY FOR PAY PURPOSES | | | 44. MUSTERING OUT PAY | | 45. SOLDIER DEPOSITS | | 46. TRAVEL PAY | | 47. TOTAL AMOUNT, NAME OF DISBURSING OFFICER | |
| YEARS 2 | MONTHS 10 | DAYS 19 | TOTAL \$ 300 | THIS PAYMENT \$ 100 | NONE | | 27.25 | | 208.50 W F HALLFRISCH CAPT F D | |

INSURANCE NOTICE

| | | | | | | | | | | | | | |
|---|--|----------------------------------|--|---|--|--|---|--|----------------------------|--|--------------------------------------|---|--|
| IMPORTANT IF PREMIUM IS NOT PAID WHEN DUE OR WITHIN THIRTY-ONE DAYS THEREAFTER, INSURANCE WILL LAPSE. MAKE CHECKS OR MONEY ORDERS PAYABLE TO THE TREASURER OF THE U. S. AND FORWARD TO COLLECTIONS DIVISION, VETERANS ADMINISTRATION, WASHINGTON 25, D. C. | | | | | | | | | | | | | |
| 48. KIND OF INSURANCE | | | 49. HOW PAID | | 50. Effective Date of Allotment Discontinuance | | 51. Date of Next Premium Due (One month after 50) | | 52. PREMIUM DUE EACH MONTH | | 53. INTENTION OF VETERAN TO | | |
| Nat. Serv. <input checked="" type="checkbox"/> | U.S. Govt. <input type="checkbox"/> | None <input type="checkbox"/> | Allotment <input checked="" type="checkbox"/> | Direct to V. A. <input type="checkbox"/> | 31 OCT 45 | | 30 NOV 45 | | \$ 6.50 | | Continue <input type="checkbox"/> | Continue Only <input type="checkbox"/> | Discontinue <input checked="" type="checkbox"/> |

| | | | | | | | | | | | |
|-------------------|--|--|--|--|--|--|---|--|--|--|--|
| RIGHT THUMB PRINT | 55. REMARKS (This space for completion of above items or entry of other items specified in W. D. Directives) NO TIME LOST UNDER AR 107 LAPEL BUTTON ISSUED ASR (2 SEP 45) 78 | | | | | | | | | | |
| | 56. SIGNATURE OF PERSON BEING SEPARATED <i>Marshall A. Webb</i> | | | | | | 57. PERSONNEL OFFICER (Type name, grade and organization - signature) AVA P LEATHERMAN 1ST LT WAC <i>AVA P Leatherman</i> | | | | |

WD AGO FORM 52-55
1 November 1944

This form supersedes all previous editions of WD AGO Forms 53 and 55 for enlisted persons entitled to an Honorable Discharge, which will not be used after receipt of this revision.

MILITARY EDUCATION

14. NAME OR TYPE OF SCHOOL—COURSE OR CURRICULUM—DURATION—DESCRIPTION

None

CIVILIAN EDUCATION

15. HIGHEST GRADE COMPLETED

16. DEGREES OR DIPLOMAS

17. YEAR LEFT SCHOOL

OTHER TRAINING OR SCHOOLING

20. COURSE—NAME AND ADDRESS OF SCHOOL—DATE

21. DURATION

8th

None

1935

18. NAME AND ADDRESS OF LAST SCHOOL ATTENDED

Taylor Co., Ky

19. MAJOR COURSES OF STUDY

None

CIVILIAN OCCUPATIONS

22. TITLE—NAME AND ADDRESS OF EMPLOYER—INCLUSIVE DATES—DESCRIPTION

FARMHAND GENERAL: Worked for Hugh McCubbins, Rt. 5, Campbellsville, Ky., from 1940 to 1942. He helped plant, cultivate, and harvest, 1500 acre farm. Operated tractor, combine etc.

ADDITIONAL INFORMATION

23. REMARKS

None

24. SIGNATURE OF PERSON BEING SEPARATED

Marshall S. Wells

25. SIGNATURE OF SEPARATION CLASSIFICATION OFFICER

N. H. Senn

26. NAME OF OFFICER (Typed or Stamped)

N. H. SENN, CAPT, AGD.

COMMENTARY

BATTLE OF THE BULGE



AP photo
Soldiers march toward a village near Bastogne, Belgium, in January 1945. The Battle of the Bulge in World War II was nearing an end. This holiday season marks the 61st anniversary of the battle. It was recorded as one of the worst for losses of American forces during the war.



*John
Kooner*

Front Row: Roy, Mazie + Welby Willis
Back: Willie Kooner (Friend) Mary Elzie



Front: Donnie webb, Alton
Back: Tom webb, side Harlis webb

RAMBLER
FROM MY HOME IN OLD KENTUCKY
I'VE WANDERED THROUGH THIS LAND
FROM THE COLDEST PLACE IN DECOKA
TO THE WIDE OPEN DESERT SANDS

MY HOME IS WHERE MY HATS OFF
I'M FREE AS I CAN BE
I'M A NO GOOD RAMBLING TRUEBOE
AS EVERYONE CAN SEE

I FOUGHT MY WAY THROUGH EUROPE
BACK IN FORTY THREE
TO THE HOTTEST PLACE IN AFRICA
I'VE SAILED THE SEVEN SEAS

I'VE BEEN ALL OVER SUNNY ITALY
AND WALKED THROUGH THE BREWER PASS
FOUGHT IN THE HILLS IN AUSTRIA
BUT THAT'S ALL IN THE PAST

MY RAMBLING DAYS ARE OVER
I CAN HERE THOSE WHIPPLE WILKS
I'M GOING BACK TO KENTUCKY
TO THOSE BEAUTIFUL BLUE GRASS HILLS

NAMES

ONES LOVE

FOR THE LOVE OF ROGER

TO SHARE MY LOVE

OUR BABY GIRL

MY HUSBANDS CHILD

TEARS I CAN NOT HIDE

HEAVEN ON EARTH

THIS DAY FORWARD

DEVOTIONAL NO. 72.

James H. Stewart, Pastor, Grant Park, First Regular Baptist Church.

GREETINGS TO OUR MANY FRIENDS AND BRETHREN:

To night I take great pleasure in presenting (3) poems written by Marshall Webb, Hines Veterans Hospital, 12th. and Roosevelt Road, Hines, Ill. (Chicago Area) Room 319.

He is receiving many letters from many friends and loved ones from all over the country. Please pray for Him and many others that are confined to the Hospital.

I believe these poems express the heart felt conviction, and love, not only of himself but of many in Hospitals and homes every where.

By Marshall Webb.

TAKING MY ILLNESS AWAY.

I pray to God in Heaven
That my illness will go away,
That I'll be happy in knowing
He watches me every day.

And hears the prayers of those around
That my faith in Him, I believe
Though I may walk the Straight and narrow path,
And my blessings I shall receive.

The courage to have his nearness,
His power to heal and bless,
As I look to Him and say my Prayers
He brings me Happiness.

My faith in knowing He is near,
And watches me every day;
And hears my many earnest prayers,
To take my illness away.

SPECIAL THOUGHTS.

I hope that I'm improving
And it won't be long,
Before I'm in good health again
And feeling well and strong.

And I know that special thoughts
Are being sent my way,
From ones I love, so dear to me,
To cheer me up to day.

And I hope it's soon, very soon
That I'll be on my way to
Head for home, where I belong
Feeling fine and new.

Until that day, I'll sit and wait,
And try to pen a letter,
And put my trust in God alone,
Then I'll feel much better.

FROM THE BIBLE: "Thou shalt keep him in perfect peace, whose mind is stayed on thee."
"Because he trusteth in thee." Please remember the Sick in prayer.

TRUSTING.

May God in all His mercy
Shine on me to day,
And send me faith and courage,
Until dark clouds have passed away.

And hope that will sustain me
In every thing I do,
Remember me in His glory
And make my life anew.

Remembering me, and wondering to
If I could ever guess,
How many times He sends His love,
And brings me happiness.

The bright and shining light above
Will guide me through each day,
For with Him everything is possible
To carry me on my way.





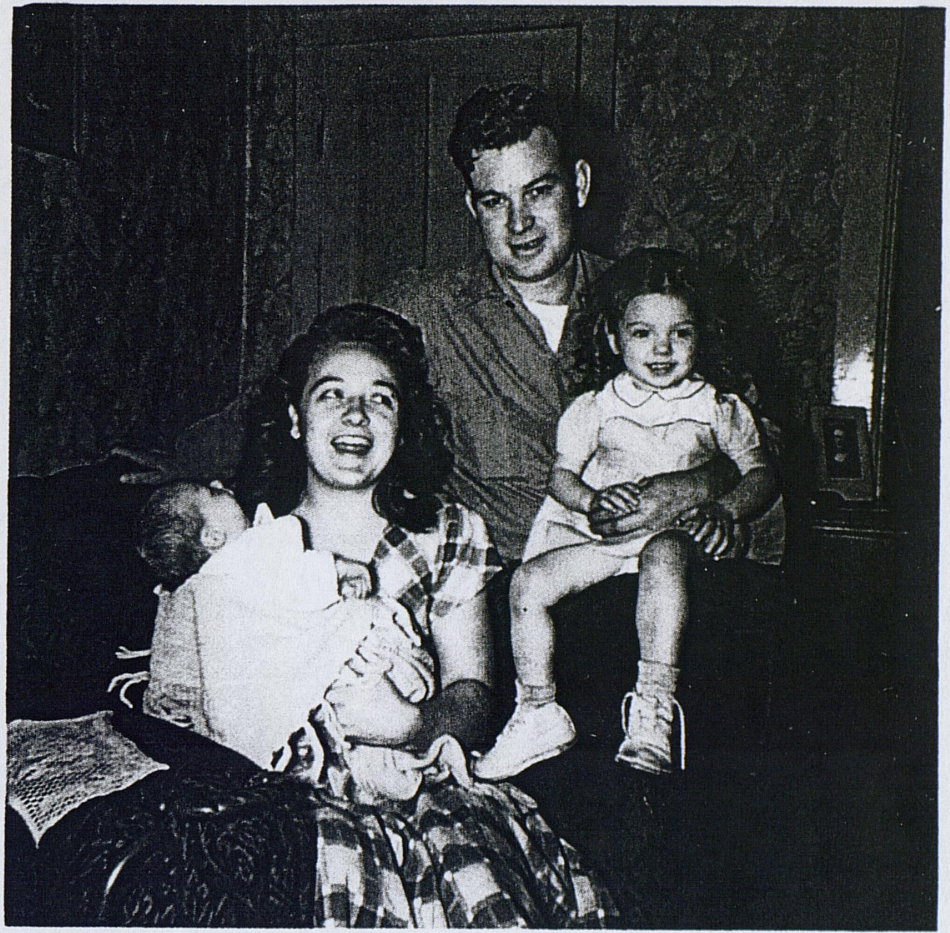
"THINKING"

AS I SIT HERE THINKING IN A HOLE DUG IN THE GROUND
EVERY SHELL THAT COMES MY WAY IT'S GOT THAT MORNING SOUND
WHILE MACHINE'S-GUNS KEEP SPUTTERING AND PLANES FLY OVER
THIS HOLE IS STILL MY LOVELY HOME AND ROCKS ARE STILL MY ^{HEAD} _{bed.}

AS THE SHELLS THEY DROP AROUND ME YET MY RIFLE IS IN MY HAND
READY TO PULL THE TRIGGER AT THE SIGHT OF ANY MAN
THERE'S JERRIES IN THE DISTANCE AND I KNOW THEY'ER WAITING FOR ME
BUT I LOVE THIS HOLE IN THE MOUNTAINS WHERE THERES MUD AND WATER
TO MY KNEES.

AT NIGHT THE WIND IS CHILLY THROUGHOUT THIS ITALIAN LAND
SOMETIMES I GET TO THINKING IT'S MORE THEN A MAN CAN STAND
BUT I LOVE THIS HOLE IN THE MOUNTAINS BUT GOSH HOW I WISH IT COULD BE
11 TWO BY SIX IN MY OWN BACK YARD. THATS THE PLACE THATS WAITING
FOR ME.

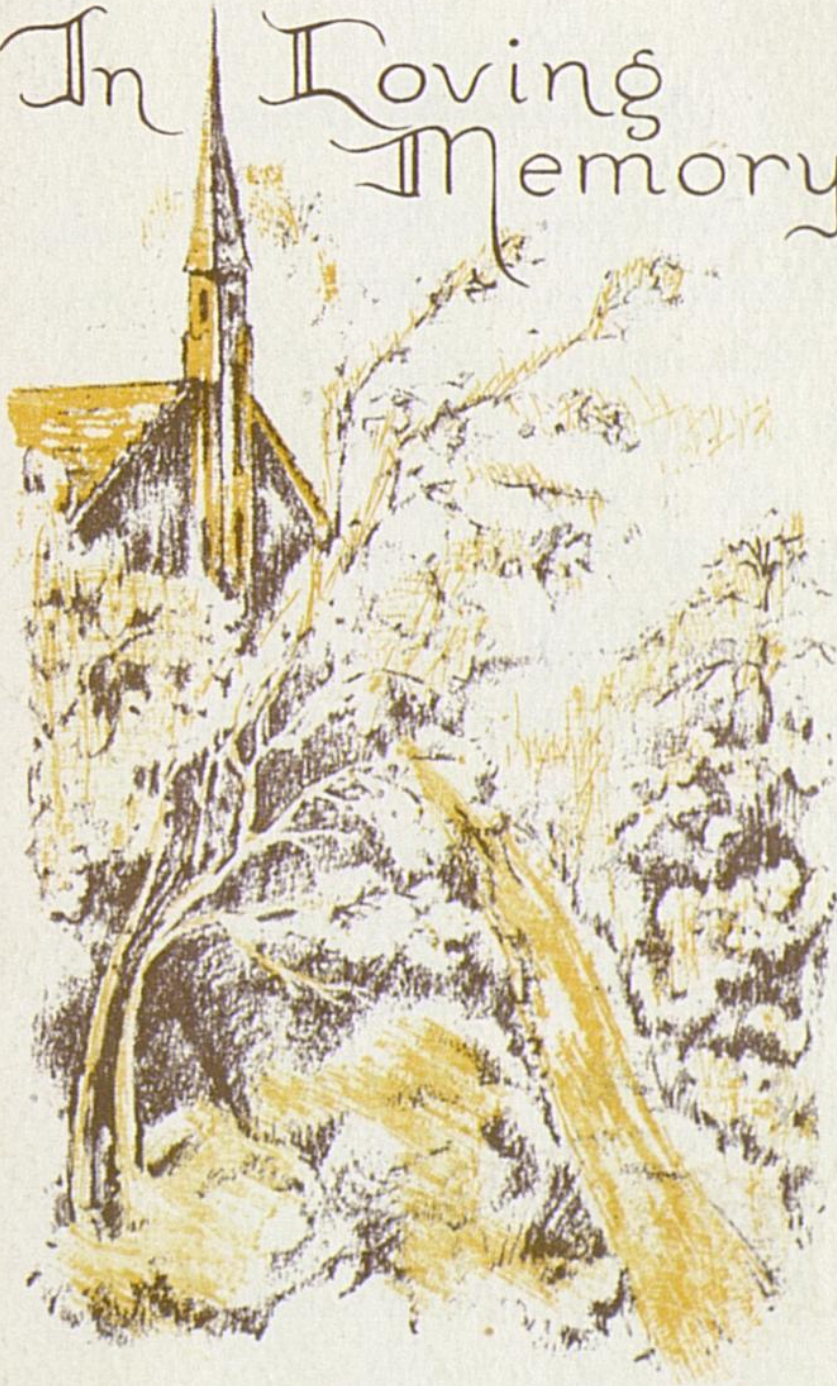






Thomas Franklin Webb

In Loving
Memory



The Twenty-Third Psalm.

The Lord is my Shepherd: I shall not want.
He maketh me to lie down in green pastures:
He leadeth me beside the still waters.
He restoreth my soul: He leadeth me in the
paths of righteousness for his name's sake.
Yea, though I walk through the valley of the
shadow of death, I will fear no evil:
for thou art with me: thy rod and
thy staff they comfort me.
Thou preparest a table before me in the
presence of mine enemies:
thou anointest my head with oil:
my cup runneth over.
Surely goodness and mercy shall follow
me all the days of my life: and I will
dwell in the house of the Lord for ever.

IN MEMORY OF
Thomas F. Webb

DATE OF BIRTH
August 21, 1885

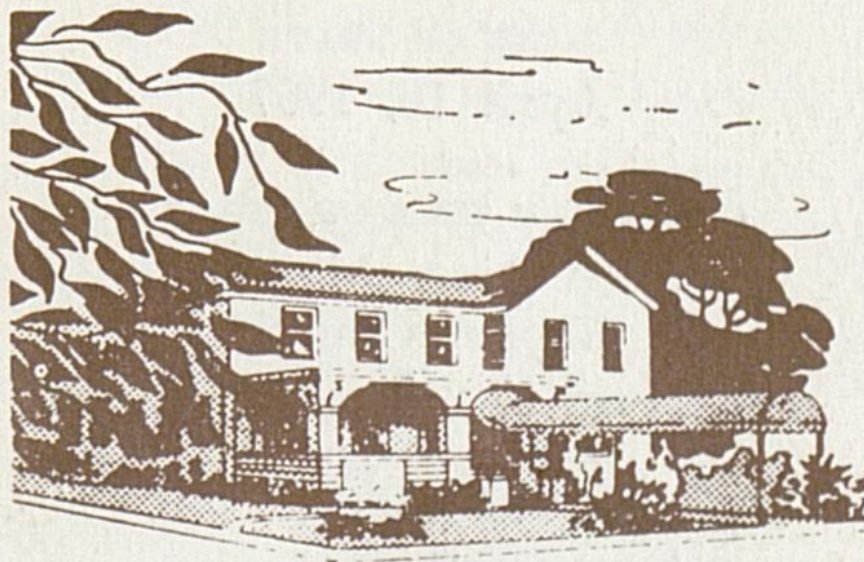
DATE OF DEATH
April 16, 1967

PLACE AND TIME OF SERVICES
Green River Memorial
Baptist Church
April 18th at 2:00 P.M. (EST)

CLERGYMAN OFFICIATING
Rev. Landon Hadley
Dr. J. Chester Badgett

PLACE OF INTERMENT
Green River Memorial
Cemetery

ARRANGEMENTS BY
Marshall J. Lyon



LYON FUNERAL HOME

MARSHALL J. LYON

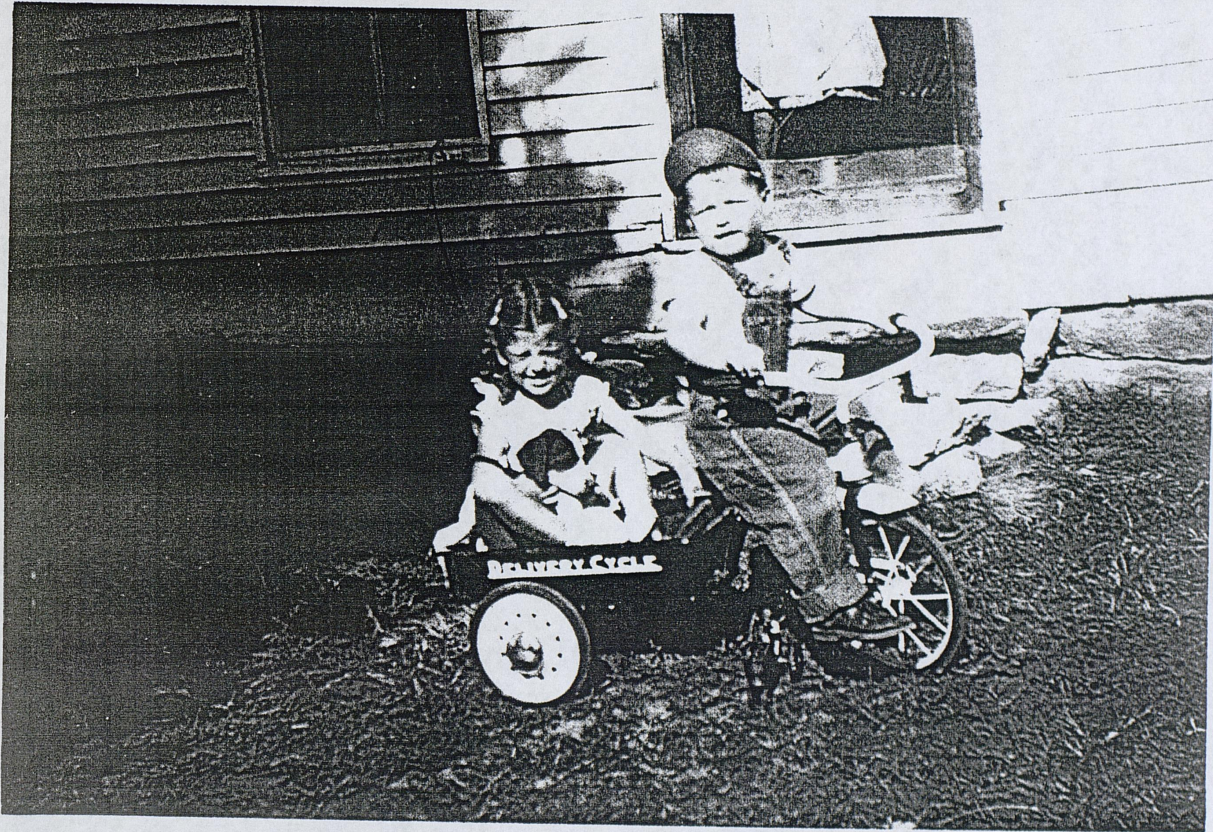
CAMPBELLSVILLE, KENTUCKY







UNCLE
DAVID
KEEIN

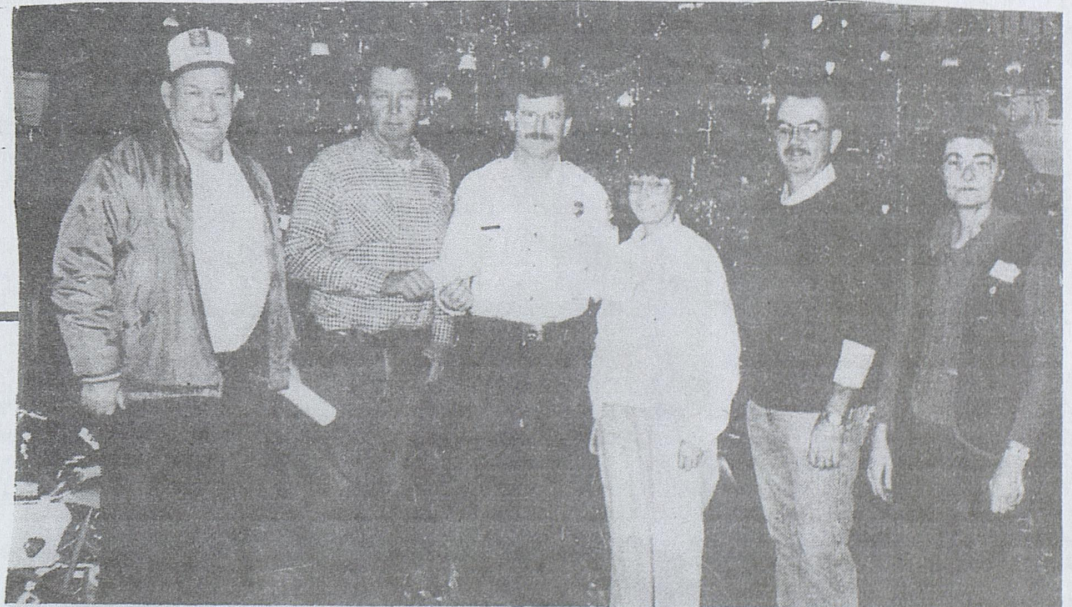






Our father who art in Heaven
Hallowed be thy name.

Thy kingdom come, thy will be done
On earth as it is in Heaven
Give ~~us~~ us this day our daily bread
and forgive us our ~~debts~~ debts as we
forgive our debtors. And lead
us not into temptation ~~and~~
deliver us from all evil. For
thine is the kingdom and the
power and glory forever amen



Rescue Squad donation

The Campbellsville/Taylor County Rescue Squad recently received a donation from the CB Disaster Club. Pictured from left: Marshall Webb, James Rice, president of the CB Club, Mike Ramsey, assistant chief of the rescue squad, Janice Rice, David Jessie and Maxir Lyons.

IMPORTANT INSTRUCTIONS

1. Coupons can be used only in connection with the vehicle described on the front cover. Detached coupons are VOID.
2. If you stop using your car, this book and all unused coupons must be surrendered to your Board within 5 days.
3. If you sell your car, this book and all unused coupons must be surrendered to your Board. The purchaser will not be issued a gasoline ration unless he presents the receipt which you receive at the time of such surrender.

☆ GPO

A BASIC MILEAGE RATION

UNITED STATES OF AMERICA
OFFICE OF PRICE ADMINISTRATION

NAME OF REGISTERED OWNER

ADDRESS—NUMBER AND STREET

CITY AND STATE

LICENSE No. AND STATE

YEAR MODEL AND MAKE

Holder must fill in any blank spaces above before the first purchase of gasoline.

D
424636

FOLD HERE

OPA FORM R-525 C D 424636
MILEAGE **A17** f

(License No.) (State)

OPA FORM R-525 C D 424636
MILEAGE **A17** f

(License No.) (State)

OPA FORM R-525 C D 424636
MILEAGE **A16** f

(License No.) (State)

OPA FORM R-525 C D 424636
MILEAGE **A17** f

(License No.) (State)

OPA FORM R-525 C D 424636
MILEAGE **A16** f

(License No.) (State)

OPA FORM R-525 C D 424636
MILEAGE **A16** f

(License No.) (State)

OPA FORM R-525 C D 424636
MILEAGE **A17** f

(License No.) (State)

OPA FORM R-525 C D 424636
MILEAGE **A16** f

(License No.) (State)

OPA FORM R-525 C D 424636
MILEAGE **A17** f

(License No.) (State)

OPA FORM R-525 C D 424636
MILEAGE **A16** f

(License No.) (State)

OPA FORM R-525 C D 424636
MILEAGE **A17** f

(License No.) (State)

OPA FORM R-525 C D 424636
MILEAGE **A16** f

(License No.) (State)

USA USA USA USA USA USA

CERTIFICATION OF BOOKHOLDER

(The coupons in this book are not valid unless the lawful holder has signed the certificate below)

I, the undersigned, do hereby agree that I will use this coupon book only in accordance with the rules and regulations of the Office of Price Administration. Each use of the book will constitute a representation to the Office of Price Administration that the book was lawfully acquired and is being lawfully used.

Signature

Address

Violators of the gasoline rationing regulations are subject to revocation of rations and criminal prosecution under the laws of the United States

NOTICE

YOU MUST IMMEDIATELY WRITE OR STAMP YOUR CAR LICENSE NUMBER AND STATE OF REGISTRATION ON THE FACE OF EACH COUPON.

Otherwise these coupons are **INVALID** and may be revoked.

Any person finding a lost coupon book should mail it or return it at once to the nearest War Price and Rationing Board



Family Reunion
Keen's and Clark's
John R. Keen - Preacher Levi Durvautt Keen



Our Heer Persons
Opal & Marshall Webb
Mary Lue Pike (in pink)

& who?
must be Cara

I KEEP MY SILVER STAR

MY DAD TOLD ME A STORY
ABOUT 11 BRAVE MEN AND A BOY
NAMED ANDY ON THE GUSTAV-LINE

I WAS IN JUNE OF 43
IN SOUTHER ITALY - NEAR A TOWN NAME SEALANO

HE SAID ALOT OF BRAVE MEN DIED THERE
BRAVE SOLDIERS WHO WERE TAUGHT TO FIGHT.

THOSE 12 SOLDIERS HAD A JOB
AND OLD JERRY HAD THIS BRIDGE,
THAT HAD TO GO TO SAVE SOME LIVES

BUT SOMETHING HAPPEN LATE THAT NIGHT
IT SEEMED THAT OLD JERRY SAW WHAT WAS GOING ON
AND THE SHOTS RANG OUT AND ANDY WENT DOWN

AND THIS BOY ANDY, KNEW HE COULDT MAKE IT BACK
SO HE TOLD HIS FRINDS HE WOULD STAY AND FINISH THE JOB
HE BLOW THAT BRIDGE - SO HES FRINDS GOT AWAY
AND ANDY DIED A BRAVE MAN THAT NIGHT

MY DAD BEGAN TO CRY AND HE TALK SOME MORE
ITS THE HARDEST THING EVERY DONE
TO LEAVE A FRIND NOING HE WELL NEVER COME HOME

BUT THERES ONE THING HE SICE HE COOLO NEVER
UNDERSAND:SO HE WHORT TO UNCLE SAM AND ASK
HIM WHY:FOR LEADING THEM THERE AND DOING
A FIN' JOB

HE GAVE HIM THE SILVER STAR

THE SILVER STAR FOR BRAVER

AND HE GAVE ANDYS MDM A PURPLE HART

HE TOLD ME

IF UNCLE SAME EVERY MADE A MASTKE

IT WAS WITH ME AND ANDY, THE ONE

WHO STAYED BEHIND

HE SAID I KEEP MY SILVER STAR

TO PIN ON ANDY WHEN ~~HE~~ HE GETS

TO HEVEN - WHERE THE BRAVE MEN ARE



Print the complete address in plain letters in the panel below, and your return address in the space provided on the right. Use typewriter, dark ink, or dark pencil. Faint or small writing is not suitable for photographing.



TO MR. MRS. ALTON WELLS
CAMPBELLVILLE
KENTUCKY
ROUTE 6.

SGT. MARSHALL A. WELLS
35689680
Co. E. 339 Inf.
APO. 34. 2 P.M.
NEW YORK N.Y.

SEE INSTRUCTION NO. 2

(Sender's complete address above)

THOUGHTS OF CHRISTMASSES TO COME



Greetings from Italy 1944

HAVE YOU FILLED IN COMPLETE ADDRESS AT TOP?



HAVE YOU FILLED IN COMPLETE ADDRESS AT TOP?

Print the complete address in plain letters in the panel below, and your return address in the space provided on the right. Use typewriter, dark ink, or dark pencil. Faint or small writing is not suitable for photographing.



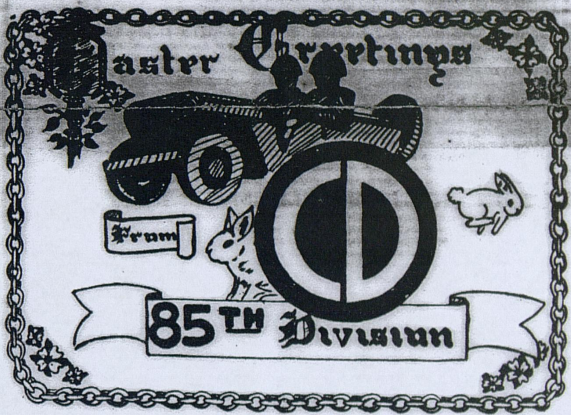
TO MR. MRS. ALTON WELLS
CAMPBELLVILLE
KENTUCKY
R. 5

SGT. MARSHALL A. WELLS
35689680
Co. E. 339 INF.
APO. 34. 2 P.M.
NEW YORK N.Y.

(CENSOR'S STAMP)

See Instruction No. 2

MARCH 23, 1944
(Sender's complete address above)



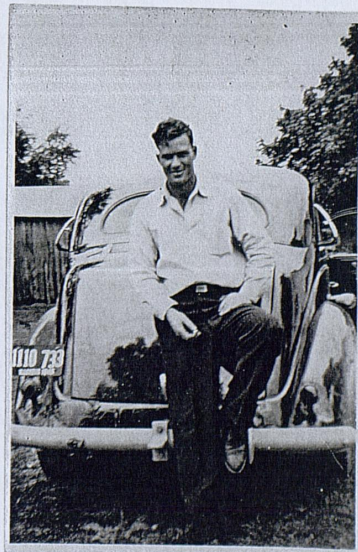
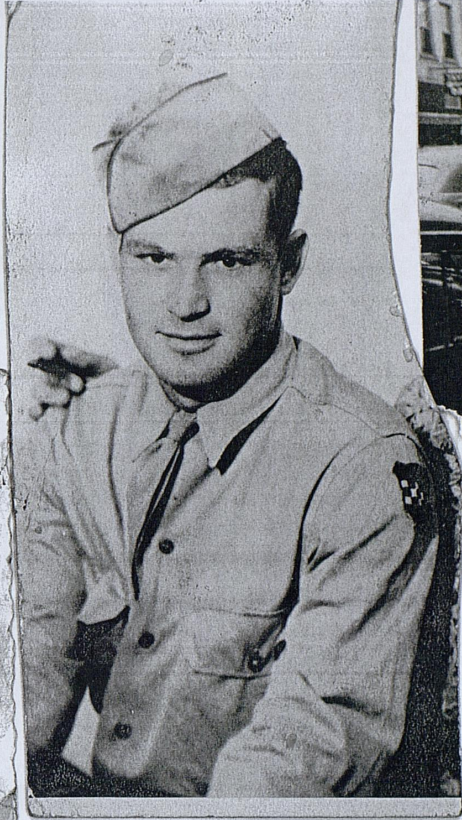
HAPPY EASTER TO ALL

MARSHALL,

HAVE YOU FILLED IN COMPLETE ADDRESS AT TOP?



HAVE YOU FILLED IN COMPLETE ADDRESS AT TOP?



**W
E
B
B**