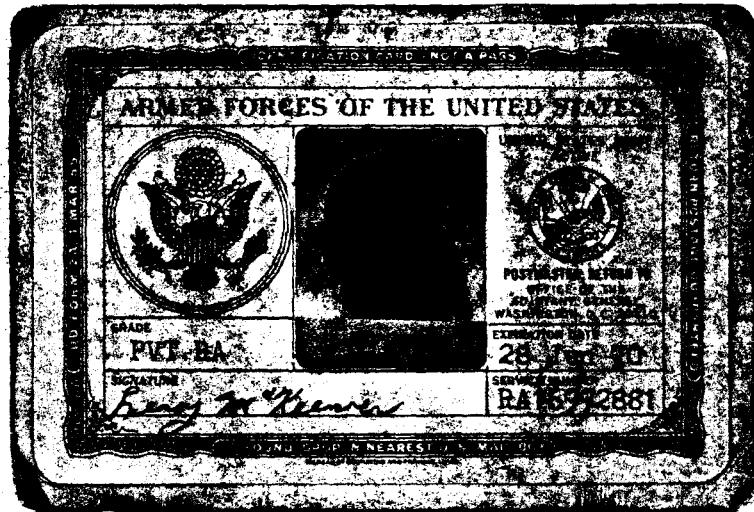



INDIVIDUAL DECEASED

PERSONNEL FILE

**DISSEMINATED BY
DA 16 392 181**

PFC



		
DATE OF BIRTH	WEIGHT	HEIGHT
15 Oct 47	145	5'11"
COLOR HAIR	COLOR EYES	BLOOD TYPE
Black	Brown	O
SIGNATURE OF ISSUING OFFICER		
<i>Donald H. Frey</i>		
DATE OF ISSUE		
31 Mar 67		
2LT. CE		
REMARKS FOR SERVICE: NAME OF THE PERSON DESIGNATED HEREON		
SHOULD BE SUBMITTED TO THE ATTACHED COMMANDER AND WILL		
REMAIN THE PROPERTY OF THE UNITED STATES GOVERNMENT		
8816750		

RECORD OF IDENTIFICATION PROCESSING
FINGERPRINT CHART

1600

OAD-4464-68

1907A-168

LAST NAME-FIRST NAME-MIDDLE INITIAL (or unknown number)

GRADE

SERVICE NUMBER/SSAN

McKee, Leroy

1699281

NAME OF CEMETERY, EVACUATION NUMBER, OR SEARCH AND RECOVERY NUMBER

PLOT

ROW

GRAVE

LEFT HAND

RIGHT HAND

NOTE AMPUTATIONS, ABNORMALITIES, MISSING FINGERS, AND/OR DERMIS IN APPROPRIATE BLOCK

Right HAND missing

10. LITTLE FINGER



9. RING FINGER



8. MIDDLE FINGER



7. INDEX FINGER



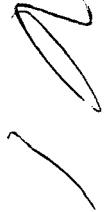
6. THUMB



5. LITTLE FINGER



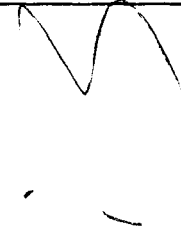
4. RING FINGER



3. MIDDLE FINGER



2. INDEX FINGER



1. THUMB



IMPORTANT

ATTACH DD FORM 2A (Identification Card) TO THIS FORM IF AVAILABLE

IMPRESSIONS TAKEN BY (Name)

SST Robert J. [Signature]

FOR FEDERAL BUREAU OF INVESTIGATION USE ONLY

IDENTIFIED BY FINGERPRINT COMPARISON AS: LAST-NAME-FIRST NAME-MIDDLE INITIAL

SERVICE NUMBER

OFFICIAL APPROVING FINGERPRINT COMPARISON (Name)

DATE






RECORD OF IDENTIFICATION PROCESSING
FINGERPRINT CHART

1600

OAD-4964-68

1907A-168

LAST NAME-FIRST NAME-MIDDLE INITIAL (or unknown number)		GRADE	SERVICE NUMBER/SSAN	
McKee, Leroy			16992281	
NAME OF CEMETERY, EVACUATION NUMBER, OR SEARCH AND RECOVERY NUMBER		PLOT	ROW	GRAVE

LEFT HAND			RIGHT HAND	
	10. LITTLE FINGER	<p>NOTE AMPUTATIONS, ABNORMALITIES, MISSING FINGERS, AND/OR DERMIS IN APPROPRIATE BLOCK</p> <p>Right HAND missing</p>		5. LITTLE FINGER
	9. RING FINGER			4. RING FINGER
	8. MIDDLE FINGER			3. MIDDLE FINGER
	7. INDEX FINGER			2. INDEX FINGER
	6. THUMB			1. THUMB
		<p>IMPORTANT</p> <p>ATTACH DD FORM 2A (Identification Card) TO THIS FORM IF AVAILABLE</p> <p>IMPRESSIONS TAKEN BY (Name)</p> <p>SST Robert J. Simpson</p>		

FOR FEDERAL BUREAU OF INVESTIGATION USE ONLY

IDENTIFIED BY FINGERPRINT COMPARISON AS: LAST-NAME-FIRST NAME-MIDDLE INITIAL	SERVICE NUMBER
OFFICIAL APPROVING FINGERPRINT COMPARISON (Name)	DATE

RECORD OF IDENTIFICATION PROCESSING ANATOMICAL CHART

DAD-44164-68

19 MAY 1968

LAST NAME - FIRST NAME - MIDDLE INITIAL (or unknown number)

McKEEVER LEROY

GRADE

N/A

SERVICE NUMBER

16992881

NAME OF CEMETERY, EVACUATION NUMBER, OR SEARCH AND RECOVERY NO.

PLOT

ROW

GRAVE

ESTIMATED AGE (Yrs)

ESTIMATED HEIGHT

172"

BLACK OUT PORTIONS NOT RECOVERED

RIGHT

HAIR

LEFT

BLACK

LEFT

RIGHT

Missing

Missing

Penetrating Wounds

ANTERIOR

CONDITION OF REMAINS (Check pertinent blocks)

☐ SEMI-SKELETAL

☒ FLESH COVERED

☐ INTACT

☐ DECOMPOSED

☐ BURNED (Degree: ☐ 1st ☐ 2d ☐ 3d)

REMARKS (Continue on reverse if additional space is required)

BODY INCOMPLETE - SEE ABOVE

RACE - NEGRO

TABLE MEASUREMENT - 72"

BODY MARKINGS - SEE ABOVE

ID TAGS - NONE

ID CARD - 1 - ONE FOR McKEEVER, LEROY

16992881 FOUND WITH PAPERS

LEFT HAND FINGER PRINTED.

NOTE: (L) INDEX PRINT MATCH

(L) INDEX PRINT ON ID CARD FOR McKEEVER, LEROY 16992881

Clothing - 1 PAIR OF BOOTS (LOW)

1 PAIR OF SOCKS

1 PAIR OF PANTS

POSTERIOR

NAME OF PREPARING OFFICIAL (Print or type)

NORRELL, BARRY J.

SIGNATURE

Barry J. Norrell

RECORD OF PREPARATION AND DISPOSITION OF REMAINS

(Deaths Occurring Overseas)
(AR 638-40)

REPORTS CONTROL SYMBOL
SPTS-15(R1)

REPORT NUMBER

DAD-4461-68/mj/mj

DECEDENT DATA

1. REMAINS OF (Last Name - First Name - Middle Initial)

McKeever, Leroy E.

2. GRADE

PFC

3. SERVICE NUMBER

RA 16 992 881

4. BRANCH OF SERVICE

☒ ARMY

☐ NAVY

☐ AIR FORCE

☐ MARINE CORPS

☐ OTHER (Specify)

5. CAUSE OF DEATH

Traumatic amputation of right arm and leg.

6. PLACE OF DEATH

IZ Sally, RVN

7. DATE OF DEATH

18 May 1968

8. HOW IDENTIFIED

Fingerprint comparison.

MORTUARY DATA

9. REMAINS RECEIVED AT MORTUARY

DATE

19 May 1968

HOUR

1600

10. EMBALMING STARTED

DATE

21 May 1968

HOUR

1520

11. EMBALMING COMPLETED

DATE

21 May 1968

HOUR

1725

12. CONDITION OF REMAINS PRIOR TO EMBALMING

Poor

13. TYPE OF CASE

☐ NORMAL

☐ AUTOPSED

☒ MUTILATED

14. PRE-EMBALMING PROCEDURES COMPLETED (Items 36e thru 36i)

☒ YES

☐ NO (Explain)

15. TOTAL OZ. CONC FLUID USED

ARTERIAL

140

CAVITY

70

16. NAME POINTS OF INJECTION

Right carotid

17. TOTAL HARDENING COMPOUND USED

(lb)

N/A

18. AREAS HYPODERMICALLY EMBALMED

RN right leg.

19. POST EMBALMING PROCEDURES COMPLETED (Items 36j thru 36l)

☒ YES

☐ NO (Explain)

20. SUBSEQUENT TREATMENT

REMARKS: Mutilation and decomposition.

21. LOCATION OF PREPARING MORTUARY (City and Country)

US Army Mortuary Da Nang, RVN APO 96337

22. TYPED NAME OF PREPARING EMBALMER

STANTON D. WOODARD

SIGNATURE

Stanton D. Woodward

23. LICENSE NUMBER & STATE

3423-Texas

SHIPMENT DATA

24. SHIPPING PROCEDURES COMPLETED (Items 36a thru 36d)

☒ YES

☐ NO (Explain)

25. METHOD OF SHIPMENT

☒ AIR

☐ WATER

☐ OVERLAND

26. DATE SHIPPED FROM PREPARING MORTUARY

23 May 1968

27. POE DESTINATION (Place of final destination if not to a U.S. Port)

Travis AFB California

28. DATE DEPARTURE FROM OR RELEASE IN COMMAND

23 May 1968

29. CHECK ONE IF RELEASED IN COMMAND (Remains will be fully dressed and cosmetized)

☐ PRIVATE COMMERCIAL SHIPMENT

☐ LOCAL INTERMENT (Indicate City, Town and Country)

REIMBURSEMENT DATA

30. TOTAL AMOUNT OF REIMBURSEMENT

31. SPONSOR

32. DATE REIMBURSEMENT EFFECTED (Or action taken to obtain reimbursement)

33. TYPED NAME OF MORTUARY OFFICER OR OTHER RESPONSIBLE PERSON

WILLIAM T. GRAVE, 1LT, CH, MSD.

SIGNATURE

William T. Grave

DA FORM 2775

REPLACES PREVIOUS EDITION, WHICH IS OBSOLETE.

MAJOR OVERSEA COMMAND 2

12AD-4464-68

1600
19 May

CERTIFICATE OF DEATH (OVERSEAS)

(AR 638-40)

NAME OF DECEASED (Last, First, Middle) McKeever, Leroy		GRADE PT6	BRANCH OF SERVICE US Army	SERVICE NUMBER EA 16 992 881
DATE OF BIRTH 15 OCT 1947		SEX <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE		
COLOR OR RACE WHITE		MARITAL STATUS <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED		RELIGION <input type="checkbox"/> PROTESTANT <input type="checkbox"/> CATHOLIC <input type="checkbox"/> JEWISH OTHER (Specify)
NAME OF NEXT OF KIN Mrs. Joyce McKeever		RELATIONSHIP TO DECEASED Wife		
CITY OR TOWN AND STATE Saint Louis, Missouri				

MEDICAL STATEMENT

CAUSE OF DEATH (Enter only one cause per line)		INTERVAL BETWEEN ONSET AND DEATH
DISEASE OR CONDITION DIRECTLY LEADING TO DEATH ¹ Traumatic amputation Right Arm Right leg		
ANTECEDENT CAUSES	MORBID CONDITION, IF ANY, LEADING TO PRIMARY CAUSE	
	UNDERLYING CAUSE, IF ANY, GIVING RISE TO PRIMARY CAUSE	
OTHER SIGNIFICANT CONDITIONS ²		
MODE OF DEATH	AUTOPSY PERFORMED	MAJOR FINDINGS OF AUTOPSY
<input checked="" type="checkbox"/> NATURAL	<input type="checkbox"/> YES	
<input type="checkbox"/> ACCIDENT	<input checked="" type="checkbox"/> NO	
<input type="checkbox"/> SUICIDE		
<input type="checkbox"/> HOMICIDE		
CIRCUMSTANCES SURROUNDING DEATH DUE TO EXTERNAL CAUSES		

DATE OF DEATH (Hour, day, month, year) 18 May 1968	PLACE OF DEATH IZ Sally
--	-----------------------------------

I HAVE VIEWED THE REMAINS OF THE DECEASED AND DEATH OCCURRED AT THE TIME INDICATED AND FROM THE CAUSES AS STATED ABOVE.

NAME OF MEDICAL OFFICER JOSEPH F SACKETT		TITLE OR DEGREE Charing Platoon Comm
GRADE OPT	SERVICE NUMBER 0525717	INSTALLATION OR ADDRESS Co B 326th Med Bn APO SF 9383
DATE 18 May 1968		SIGNATURE <i>Joseph Sackett</i>

DISPOSITION OF REMAINS

NAME OF MORTICIAN PREPARING REMAINS STANTON D. WOODARD	GRADE GS-9	LICENSE NUMBER 3423	STATE Texas	OTHER
INSTALLATION OR ADDRESS US Army Mortuary Da Nang, RVN	DATE 22 May 1968	SIGNATURE <i>Stanton D. Woodard</i>		
NAME OF CEMETERY OR CREMATORY		LOCATION OF CEMETERY OR CREMATORY		
TYPE OF DISPOSITION <input type="checkbox"/> BURIAL <input type="checkbox"/> CREMATION <input type="checkbox"/> REMOVAL (Specify)		DATE OF DISPOSITION		

REGISTRATION OF VITAL STATISTICS

REGISTRY (Town and Country)	DATE REGISTERED	FILE NUMBER	STATE	OTHER
NAME OF FUNERAL DIRECTOR		ADDRESS		
SIGNATURE OF AUTHORIZED INDIVIDUAL				

¹State disease, injury or complication which caused death, but not mode of dying such as heart failure, etc.

²State conditions contributing to the death, but not related to the disease or condition causing death.

HEADQUARTERS
DEPARTMENT OF THE ARMY
OFFICE OF THE ADJUTANT GENERAL
WASHINGTON, D. C. 20315

2(E)

REPORT OF CASUALTY		REPORT NUMBER AND TYPE A 6584A CORRECTED FINAL RVN 2316	DATE PREPARED 17 Sep 68
1. SERVICE IDENTIFICATION (Name, Service Number, Grade or Rate, Component, Branch and Organization) MC KEEVER, LEROY, RA 16 992 881, PFC, RA, 188TH AVN CO, 269TH AVN BN, 16TH AVN GP, VIETNAM			
2. CASUALTY STATUS <input type="checkbox"/> BATTLE <input checked="" type="checkbox"/> NON-BATTLE DIED 18 May 1968 in Vietnam from wounds received when he detonated a grenade. Self destruction while mentally unsound. Commenced tour in Vietnam 14 October 1967			
3. DATE AND PLACE OF BIRTH, RACE, RELIGIOUS PREFERENCE 15 October 1947, Blytheville, Arkansas Negroid; Protestant			
4. DATE AND PLACE OF LAST ENTRY ON ACTIVE DUTY IN CURRENT STATUS AND HOME OF RECORD AT TIME 29 March 1967, St. Louis, Missouri St. Louis, Missouri			
5. SOCIAL SECURITY NUMBER, PAY GRADE, LENGTH OF SERVICE FOR PAY, BASIC PAY, INCENTIVE PAY -3 Under 2 years \$128.70 FLIGHT			CHECK IF APPLICABLE <input type="checkbox"/> CREW <input type="checkbox"/> NON-CREW
6. DUTY STATUS ACTIVE: ON DUTY			
7. INTERESTED PERSONS (Name, Address, Relationship) Mrs. Joyce M. McKeever St. Louis, Missouri 63112, Wife 1 Notified 22 May 1968 Mr. Willie McKeever St. Louis, Missouri, Father 2,3 Willie Mae Lee, address not shown, Sister, 2,3 DA Form 41 Undated			
8. REPORT FOR VA TO FOLLOW <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		9. REPORTING COMMAND AND DATE REPORT RECEIVED IN DEPARTMENT CG-USARV LBN RVN 21 May 1968	
10. SELECTIVE SERVICE NUMBER, LOCAL BOARD, AND LOCATION (If unknown, enter date and place of first entry in Armed Services) 23 285 47 264 LB 285 St. Louis, Missouri			
11. PRIOR SERVICE DATA <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
12. REMARKS For VA: Certification of Basic Pay UP PL 89-622. None Final report issued 3 June 1968 <div style="text-align: right;">FILE DISPOSITION BY MEMORIAL DIVISION <i>RET</i> Name 4 Oct 68 Date</div>			
THUA THIEN (02) I CTZ			
FOOTNOTES: 1 Adult next of kin. 2 Beneficiary for gratuity pay in event there is no surviving wife or child-as designated on record of emergency data. 3 Beneficiary for unpaid pay and allowances-as designated on record of emergency data.			
13. DISTRIBUTION B V		14. BY ORDER OF THE SECRETARY OF THE ARMY: <i>[Signature]</i> Adjutant General	

2(E)

DD FORM 1300
1 MAR 60

REPLACES DA FORM 52-1, WHICH IS OBSOLETE.

PROPERTY

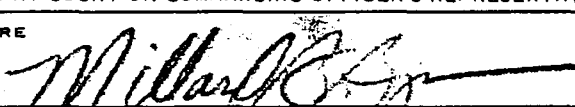
RECORD OF PERSONAL EFFECTS/HOVIATVE COMBAT AREAS

(AR 643-50)

1/2 pages

1. LAST NAME - FIRST NAME - MIDDLE INITIAL McKEEVER, Leroy		2. GRADE PFC	3. SERVICE NUMBER RA 16 992 881
4. ORGANIZATION AND STATION OR APO 188th Avn Co., 249th Avn Bn, 16th Avn GP APO SF 96268			
5. STATUS (Dead or missing) Deceased		6. DATE STATUS DETERMINED 18 May 68	7. PLACE RVN
8. INVENTORY OF EFFECTS		9. TOTAL FUNDS	
QUANTITY	ITEM	a. FUNDS TRANSMITTED WITH EFFECTS (Amount and description)	
90	Letters & Cards		
2	Photo's albums, & pictures		
1	B-1 military papers		
1	Large drawing		
1	Photograph manual		
1	Membership cert.		
1	Measurement form		
1	Envelope of instruction drafting		
15	Black & white negatives		
1	News article		
1	Note book, The American school of drafting		
1	T-square		
1	Drafting board		
1	Universal drafting set		
1	Field set drafting instrument		
13	Booklet drafting lesson		
5	Drawing pencil w/case		
1	Photo w/frame		
1	Record album		
2	45RPM record		
1	Crucifix		
2	Note book		
1	Book, arco course		
1	Night gown		
2	Negligee set		
2	Civ. shirts		
5	Shoes		
1	Handkerchief		
1	Towel		
1	Barret		
1	Civ. trons.		
3	XL film		
		b. FUNDS EXCHANGED, CONVERTED, DEPOSITED, ETC.	
		AMOUNT AND DESCRIPTION	DISPOSITION

Attach supplemental sheet for additional items.

10. SECRET SHIPPED TO: Mrs. Joyce M. McKeever St. Louis, Missouri 63112		11. DATE AND METHOD OF SHIPMENT (B/L No., Registry No., etc.) 15 Jun 68 REG AIR MAIL #125389
12. SUMMARY COURT OR COMMANDING OFFICER'S REPRESENTATIVE		13. I ACKNOWLEDGE RECEIPT OF ALL ARTICLES LISTED IN ITEM 8 AND ALL FUNDS RECORDED IN ITEM 9a.
SIGNATURE 		
DATE 15 Jun 68	TYPED NAME AND GRADE MILLARD B. BYERS 1LT, JG Summary Court	
ORGANIZATION US ARMY MORTUARY VIETNAM APO 96307		
(Signature of next of kin, Legal Representative, or Dependent)		

2/2pages

REPLACES EDITION OF 1 SEP 56 WHICH IS OBSOLETE

(AR 643-50)

DA FORM 54 JUN 57

REPLACES EDITION OF 1 SEP 56 WHICH IS OBSOLETE

The following expenses were incurred at OARB for the remains of the late:

714-03
PFC LEROY MCKEEVER RA 16 992 881 *MC*

Date of Death 18 May 68

Place of Death Vietnam

Interment Expense \$ 250.00

Payee - E. B. Koonce Mortuary, Inc.
1221 N. Grand Boulevard
St. Louis, Missouri

F. O. Voucher No. - 663294 - 25 Jun 68

Casket, Type ..I. Standard Glass Sealer .80/81 X.25/26.....	\$ 102.50
Shipping Box ..Oversize.....	\$ 25.40
Pick Up	\$ 12.00
Delivery	\$ 5.00
Other Services	\$
Clothing, Decorations, Insignia	\$ 61.70
Flag and Container	\$ 6.49
Transportation of Remains .G.N.L. F-0032826...TRANS WORLD.....	\$ 180.65
Transportation Railhead to Destination 650685.-.19 Jul 68.....	\$ 30.00
Allowance for Burial Container	\$
Transportation Escort, including TDY	\$ 287.00
TOTAL EXPENSE	\$ 960.74

MIW Form 4222

23 Aug 67 - Previous edition is obsolete

Army-OARB, Calif

✓ gb
FILE DISP. BR AUG 8 1968

DEPARTMENT OF THE ARMY
US ARMY MORTUARY, VIETNAM (TSN)
APO San Francisco 96201

AVCA SGN MY

14 August 1968

Mrs. Joyce M. McKeever

St. Louis, Mo. 63112

Dear Mrs. McKeever,

Regulations require that in the event of death of a military member, a Summary Court be appointed to secure and insure delivery of the personal property of the deceased, to those entitled to take custody. I have been selected for this assignment with respect to PFC Leroy McKeever, RA 16 992 881.

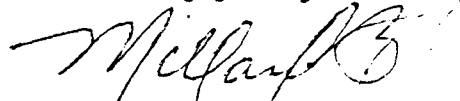
The currency your husband had, has been converted to U.S. Treasury Check Number 595,863 dated 21 June 1968 in the amount of \$43.91 and is enclosed.

As provided by Federal law, in accordance with Title 10 USC 4712, I forwarded the personal property on 15 June 1968 and a second shipment on 25 June 1968 by Registered Air Mail, Receipt Numbers 125389, 125397 and 126222, respectively. The first shipment should have arrived on or about 23 June 1968 and the second shipment on or about 1 July 1968.

Regulations require that you be informed that delivery of these articles in itself does not necessarily vest title in you and that they should be retained or disposed of in accordance with the laws of the state in which PFC McKeever was legally domiciled.

Should this shipments not arrive intact, please inform me at the address shown above.

Sincerely yours,



MILLARD B. BYRNE
1LT, QMC
Summary Court

2 Incls

1. U.S. Treasury Check
2. DA Form 54

FILE DISPOSITION BR. AUG 20 1968

MEMORIAL DIVISION - OARB
ESCORT'S REPORT OF MISSION

DECEDENT

PFC LEROY MCKEEVER RA 16 992 881

CONSIGNEE

E. B. Coonce Funeral Home, 1221 North Grand Avenue, St. Louis Missouri

NEXT OF KIN

Mrs. Joyce M. McKeever St. Louis, Missouri

ESCORT

I thoroughly understand my duties in connection with my escort mission and acknowledge receipt of the following supplies which will be returned to the Mortuary Office, OARB upon completion of mission.

BRASSARD, ARM 1 Ea
GLOVES, WHITE 1 Pr
GUIDE FOR ESCORTS 1 Ea

SSG HERMAN MIXON RA 34 483 287

DATE 8 June 68

DID YOU MEET NEXT OF KIN? (If not, explain below)

Yes

WERE YOU ASKED TO STAY FOR FUNERAL?

Yes

WERE MILITARY SERVICES RENDERED?

Yes

DATE AND HOUR OF FUNERAL

13 Jun 68 0900 Hrs

NAME AND LOCATION OF CEMETERY

Jefferson Barracks National Cemetery, Mo.

FLAG PRESENTED TO

Mrs. Joyce McKeever

**DATE DEPARTED ON RETURN
TRIP**

13 Jun 68

DATE ARRIVED DUTY STATION

13 Jun 68

DETAILED REPORT ON MISSION (Include all pertinent data, special requests or unusual circumstances.)

No unusual circumstances.



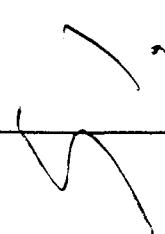
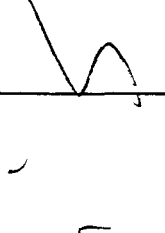
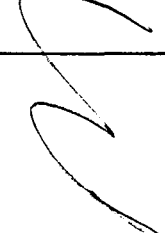
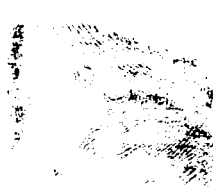



DATE

SIGNATURE OF ESCORT

Herman Mixon

SSR Requested 21 May 68 beh

REPORT OF CASUALTY		REPORT NUMBER AND CASUALTY CODE		DATE PREPARED	
		CROWN 16108		21 May 68	
1. SERVICE IDENTIFICATION (Name, Service Number, Grade or Rate, Component, Branch and Organization)					
McKEEVER, Leroy; RA 16 992 881; PFC E-3; RA; 188th Avn Co, 269th Avn Bn, 16th Avn Gp APO SFRAN 96268					
2. CASUALTY STATUS					
a. CIRCUMSTANCES <input type="checkbox"/> BATTLE <input checked="" type="checkbox"/> NON-BATTLE					
Died from wounds received when grenade accidentally detonated. Investigation is in progress.					
THUA THIEN (02) I CTZ					
b. PLACE MISSING OR DEAD	c. DATE	d. TIME	e. STATUS OF REMAINS	f. RACE	g. RELIGION
RVN	18 May 68	1355	READY	NEGRO	PROT
3a. DATE AND PLACE OF BIRTH				b. COMMENCED TOUR DATE	
15 Oct 47 Blytheville, Ark				14 Oct 67	
4. DATE AND PLACE OF LAST ENTRY ON ACTIVE DUTY IN CURRENT STATUS AND HOME OF RECORD AT TIME					
5. SOCIAL SECURITY NO., PAY GRADE, LENGTH OF SERVICE FOR PAY, BASIC PAY, INCENTIVE PAY, CHECK IF APPLICABLE					
E-3 under 2 years \$128.70 P7E/Angle <input type="checkbox"/> CREW <input type="checkbox"/> NON-CREW					
6. SELECTIVE SERVICE NO., LOCAL BOARD, AND LOCATION (If unknown, enter date and place of first entry in Armed Services)					
23 285 47 264 #285 St Louis, Mo					
7. PRIMARY NEXT OF KIN, RELATIONSHIP, AND ADDRESS (include ZIP Code)					
Mrs Joyce M. McKeever ((Wife)) St Louis, Mo. 63112 OK					
8. ADDITIONAL INFORMATION TO BE OBTAINED					
a. <input type="checkbox"/> CUSTODY					
b. <input checked="" type="checkbox"/> MARITAL STATUS OF EM per his notification officer					
c. <input checked="" type="checkbox"/> ADDRESS OF: verify, wife					
d. <input checked="" type="checkbox"/> OTHER: Grat add					
9. a. ORIGINATOR		b. RECEIVED BY		c. TIME	d. DATE
RVN		PNU Hughes		2221Z	21 May 68
SECTION II - NOTIFICATION ACTIONS					
ACTION		NAMES OF PERSONS PASSING AND RECEIVING THE ACTION (and msg No.)		ZULU TIME	ZULU DATE
10. ITEMS 1 THROUGH 4 PASSED FOR NOTIFICATION ACTION TO HQ: FLETH ARMY		Sp Thompson/K... 1450		22 MAY 68	
11. PRIMARY NEXT OF KIN NOTIFIED PERSONALLY BY:		SGM GIBSON		1200E	22 May 68
12. COMPLETION OF NOTIFICATION PASSED TO DA CASUALTY DIVISION OR ORIGINATOR		LADLE - BENSON		0055	23 May 68
13. CONFIRMATION WESTERN UNION MESSAGE DISPATCHED TO PRIMARY NEXT OF KIN					
14. WESTERN UNION MESSAGE DISPATCHED TO SECONDARY NEXT OF KIN		A. Hanson		1125Z	23 May 68
15. DEATH GRATUITY PAYMENT MESSAGE DISPATCHED TO SURVIVOR ASSISTANCE OFFICER BY:					
16. DATA ENTERED ON INFORMATION MESSAGE NO. BY DA CASUALTY DIVISION					
17. ADDRESS FOR GRATUITY PAY CG, FT Leonard Wood, Mo.					
18. a. INDIVIDUAL (has not) BEEN POSTHUMOUSLY PROMOTED TO WITH EFFECTIVE DATE AND DATE OF COMMISSION					
b. RECEIVED FROM		c. RECEIVED BY		d. TIME	e. DATE

RECORD OF IDENTIFICATION PROCESSING FINGERPRINT CHART				1606 19 MAY 68	
LAST NAME-FIRST NAME-MIDDLE INITIAL (or unknown number)			GRADE	SERVICE NUMBER/SSAN	
McKee, Leroy				16992581	
NAME OF CEMETERY, EVACUATION NUMBER, OR SEARCH AND RECOVERY NUMBER			PLOT	ROW	GRAVE
15 Oct 47 Blytheville, Ark					
LEFT HAND				RIGHT HAND	
10. LITTLE FINGER		NOTE AMPUTATIONS, ABNORMALITIES, MISSING FINGERS, AND/OR DERMIS IN APPROPRIATE BLOCK Right HAND missing IDENTIFIED BY FINGERPRINTS: AS NAME <u>McKee, Leroy</u> Last First Middle Serv: # <u>16992581</u> FBI <u>Wilmington</u> Date <u>MAY 28 1968</u>	5. LITTLE FINGER	   	
9. RING FINGER			4. RING FINGER		
8. MIDDLE FINGER			3. MIDDLE FINGER		
7. INDEX FINGER			2. INDEX FINGER		
6. THUMB			1. THUMB		
		IMPORTANT ATTACH DD FORM 2A (Identification Card) TO THIS FORM IF AVAILABLE IMPRESSIONS TAKEN BY (Name) <u>SST Robert Simpson</u>			
FOR FEDERAL BUREAU OF INVESTIGATION USE ONLY					
IDENTIFIED BY FINGERPRINT COMPARISON AS: LAST-NAME-FIRST NAME-MIDDLE INITIAL				SERVICE NUMBER	
OFFICIAL APPROVING FINGERPRINT COMPARISON (Name)				DATE	

PAGE 2 RUMUGDA 8896 UNCLAS E F T O ~~FOUO~~

C. PFC E3 NOT OFFICIALLY RECM EEWQFOR PROM PL 89-622 (NO)

D. 18 MAY 68 AT 1355 HRS, REPEAT, 18 MAY 68 AT 1355 HRS

E. AT APPROX 1350 HRS, 18 MAY 68, MCKEEVER, UNDER THE INFLUENCE OF ALCOHOL, APPROACHED SFC HELVEY WITH A GRENADE IN HAND WITH THE PIN PULLED, THEY EXCHANGED A FEW WORDS AND AT THIS TIME MCKEEVER RELEASED HANDLE, CAUSING GRENADE TO DETONATE.

1 INCIDENT OCCURRED VIC COORD: YD 728 328 THUA THIEN (02) I CTZ RVN. INVESTIGATION IN PROGRESS.

F. CAU

G. 188TH AVN CO., 269TH AVN BN, 16TH AVN GP APO SF 96268

H. NOK: JOYCE M. MCKEEVER (W) ST. LOUIS, MO. DA

HFORM 41 DTD 14 OCT 67

I. BP: 128.70 ADD PAY: POWER, FORGE ANGLE BPED: 29 MAR 67

SGLI-TEN-LUMP-LAW TL UNDER UCMJ: NONE

J. TRAUMATIC AMPUTATION OF RIGHT ARM, AND RIGHT LEG

K. READY

L. 14 OCT 67

M. DMOS: 67N20 AWDS: NDSM, VSM, VCM

N. DOUBT

O. NOT STATED

(DOB: 15 OCT 47)

BT

~~FTO - FOR INTERNAL USE ONLY~~

1

11-11-11

11-11-11

11-11-11

11-11-11

DOMESTIC SERVICE	
Check the class of service desired; otherwise this message will be sent as a fast telegram	
TELEGRAM	<input checked="" type="checkbox"/>
DAY LETTER	<input type="checkbox"/>
NIGHT LETTER	<input type="checkbox"/>

WESTERN UNION

TELEGRAM

W. P. MARSHALL
CHAIRMAN OF THE BOARD

R. W. McFALL
PRESIDENT

INTERNATIONAL SERVICE	
Check the class of service desired; otherwise the message will be sent at the full rate	
FULL RATE	<input type="checkbox"/>
LETTER TELEGRAM	<input type="checkbox"/>
SHORE-SHIP	<input type="checkbox"/>

NO. WDS.-CL. OF SVC.	PD. OR COLL.	CASH NO.	CHARGE TO THE ACCOUNT OF	TIME FILED
			SPT MEM DIV DISP BR (DA) F-HT 60	✓

Send the following message, subject to the terms on back hereof, which are hereby agreed to

Mrs. Joyce M. McKeever

4 June 1968

St. Louis, Missouri

Remains your husband, Leroy, will be consigned to E. B. Coonce Funeral Home, 1221 North Grand Avenue, St. Louis, Missouri in accordance with your request.

Please do not set date of funeral until port authorities notify you and funeral director date and scheduled time of arrival destination.

DISPOSITION BRANCH, MEMORIAL DIVISION, DEPARTMENT OF THE ARMY, WUX MB
McKEEVER, Leroy
RA 16 992 881

mva

MSG # 2
FEB 1967
WU1211(R2-65)

HOUR 1930

REL AUTH: ma

OREN WOMACK