

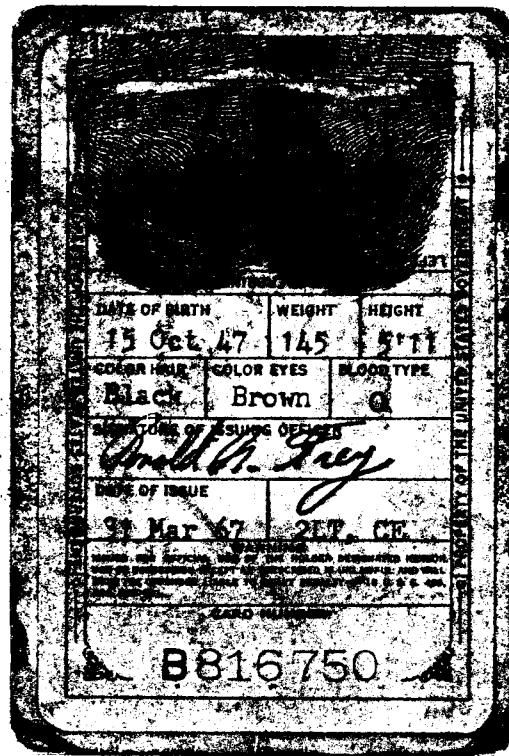
**INDIVIDUAL DECEASED**

**PERSONNEL FILE**



PFC





**RECORD OF IDENTIFICATION PROCESS**  
**FINGERPRINT CHART**

1600

*DAD-4964-68*

18032468

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

*McKeeve, Leroy*

GRADE

SERVICE NUMBER/SSAN

*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

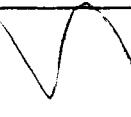
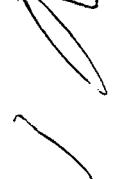
5. LITTLE FINGER

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)

*Sgt Robert A. Dugan*

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 PROCESS...G**  
**FINGERPRINT CHART**

1600

180324/68

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

McKeeve, Leroy

GRADE

SERVICE NUMBER/SSAN

16993281

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

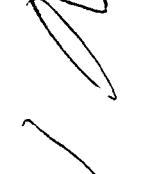
5. LITTLE FINGER

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)

*Sgt Robert J. Dugan*

**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**

DA#-4464-68

19 MAY 1600  
68

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

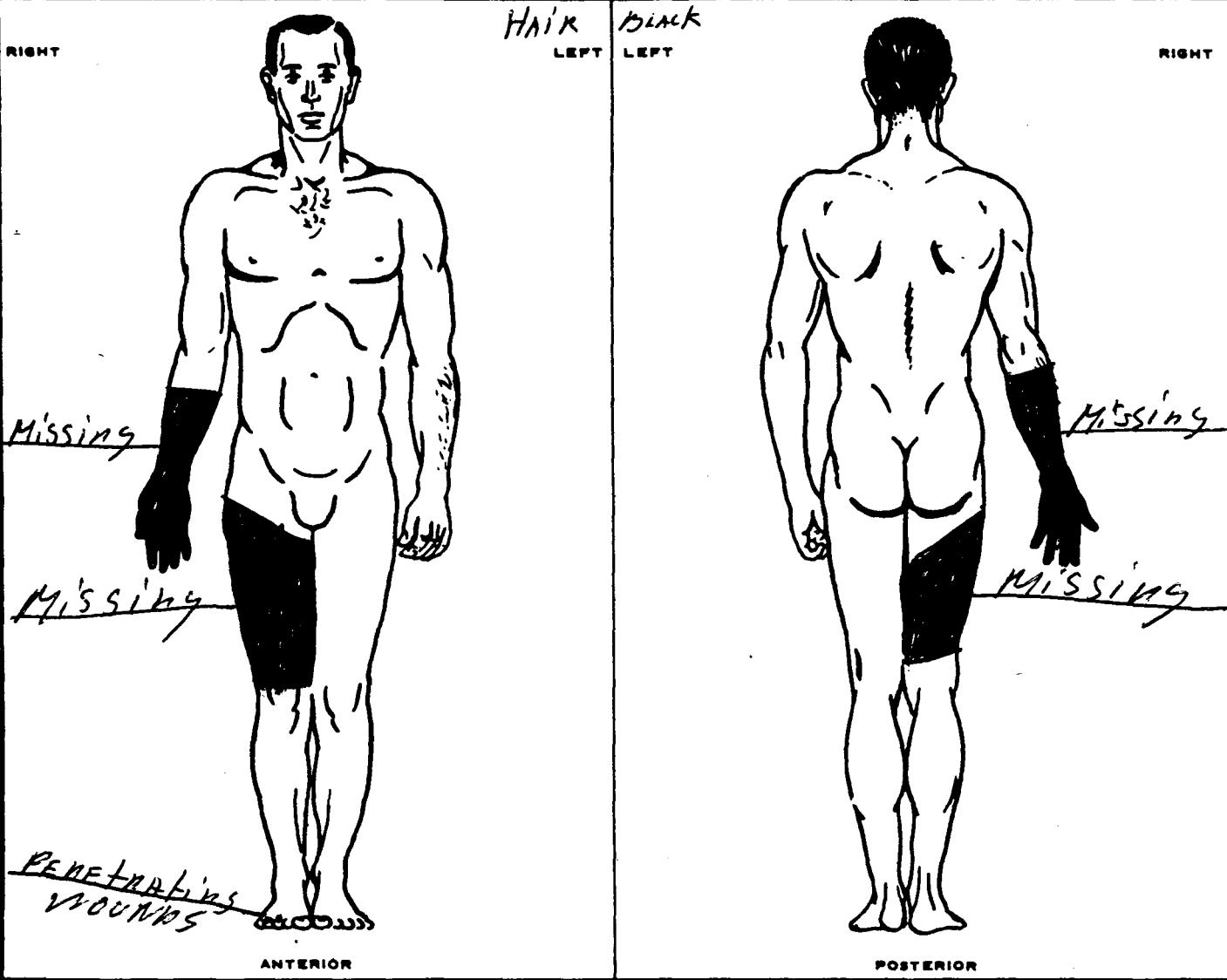
GRAVE

ESTIMATED  
AGE (Yrs)

ESTIMATED  
HEIGHT

~~5'7 1/2"~~

**BLACK OUT PORTIONS NOT RECOVERED**



ANTERIOR

POSTERIOR

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 - NEGROID

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) INNEY print match

(L) INNEY print on ID CARD FOR  
McKEEVER, LEROY 16992881

Clothing - 1 PAIR OF BOOTS (10 1/2)  
1 PAIR OF SOCKS

1 PAIR OF PANTS

NAME OF PREPARING OFFICIAL (Print or type)

SIGNATURE

**NORRELL, BARRY J.**

*BARRY J. NORRELL*

## RECORD OF PREPARATION AND DISPOSITION OF REMAINS

(Deaths Occurring Overseas)  
(AR 638-40)REPORTS CONTROL SYMBOL  
SPTS-15(R1)

REPORT NUMBER

BAD-4464-68/12/24

## DECEDENT DATA

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

McKeever, Leroy E.

2. GRADE

PPC

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

LZ Sally, RVN

7. DATE OF DEATH

8. HOW IDENTIFIED

18 May 1968

Fingerprint comparison.

## MORTUARY DATA

9. REMAINS RECEIVED AT MORTUARY

10. EMBALMING STARTED

11. EMBALMING COMPLETED

DATE

HOUR

DATE

HOUR

DATE

HOUR

19 May 1968

1600

21 May 1968

1520

21 May 1968

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

16. NAME POINTS OF INJECTION

ARTERIAL

CAVITY

140

70

Right carotid

17. TOTAL HARDENING COMPOUND USED (lb)

18. AREAS HYPODERMICALLY EMBALMED

W/A

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

SIGNATURE

STANTON D. WOODARD

23. LICENSE NUMBER &amp; STATE

3423-Texas

## SHIPMENT DATA

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

25. METHOD OF SHIPMENT

 YES NO (Explain) AIR WATER OVERLAND

26. DATE SHIPPED FROM PREPARING MORTUARY

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

22 May 1968

Travis AFB California

28. DATE DEPARTURE FROM OR RELEASE IN COMMAND

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

23 May 1968

 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

SIGNATURE

WILLIAM T. GRAVE, 1LT, CH, USA

William T. Grave

DA FORM 1 FEB 67 2775

REPLACES PREVIOUS EDITION, WHICH IS OBSOLETE.

MAJOR OVERSEA COMMAND 2

DAD-4464-68

1600  
19 May

## CERTIFICATE OF DEATH (OVERSEAS)

(AR 638-40)

NAME OF DECEASED (Last, First, Middle) <b>McKeever, Sally</b>		GRADE <b>PFC</b>	BRANCH OF SERVICE <b>US ARMY</b>	SERVICE NUMBER <b>RA 16 992 881</b>
		DATE OF BIRTH <b>15 OCT 1947</b>	SEX <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
COLOR OR RACE <b>WHITE</b>		MARITAL STATUS <b>SINGLE</b>		RELIGION
<input checked="" type="checkbox"/> NEGRO <input type="checkbox"/> OTHER (Specify) <b>188 AVN CO.</b>		<input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED	<input type="checkbox"/> DIVORCED <input type="checkbox"/> SEPARATED	<input type="checkbox"/> PROTESTANT <input type="checkbox"/> CATHOLIC <input type="checkbox"/> JEWISH
NAME OF NEXT OF KIN <b>Mrs. Joyce McKeever</b>		RELATIONSHIP TO DECEASED <b>Wife</b>		
STR		CITY OR TOWN AND STATE <b>Saint Louis, Missouri</b>		
MEDICAL STATEMENT				
CAUSE OF DEATH (Enter only one cause per line) <b>Tramatic amputation Right Arm Right Leg</b>				INTERVAL BETWEEN ONSET AND DEATH
DISEASE OR CONDITION DIRECTLY LEADING TO DEATH <sup>1</sup>				
ANTECEDENT CAUSES				
UNDERLYING CAUSE, IF ANY, GIVING RISE TO PRIMARY CAUSE				
OTHER SIGNIFICANT CONDITIONS <sup>2</sup>				
MODE OF DEATH	AUTOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	MAJOR FINDINGS OF AUTOPSY		CIRCUMSTANCES SURROUNDING DEATH DUE TO EXTERNAL CAUSES
NATURAL				
ACCIDENT				
SUICIDE				
HOMICIDE				
DATE OF DEATH (Hour, day, month, year) <b>18 May 1968</b>		PLACE OF DEATH <b>1Z Sally</b>		
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 <b>JOSEPH D. SACKETT</b>				TITLE OR DEGREE <b>Charing Platoon Leader</b>
GRADE <b>SP4</b>	SERVICE NUMBER <b>0525717</b>	INSTALLATION OR ADDRESS <b>Co B 326th Med Bn APO SF 6383</b>		
DATE <b>22 May 1968</b>		SIGNATURE <b>Joseph Sackett</b>		
DISPOSITION OF REMAINS				
NAME OF MORTICIAN PREPARING REMAINS <b>STANTON D. WOODARD</b>		GRADE <b>GS-9</b>	LICENSE NUMBER <b>3423</b>	STATE <b>Texas</b>
INSTALLATION OR ADDRESS <b>US Army Mortuary Da Nang, RVN</b>		DATE <b>22 May 1968</b>	SIGNATURE <b>Stanton D. Woodard</b>	
NAME OF CEMETERY OR CREMATORI		LOCATION OF CEMETERY OR CREMATORI		
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
NAME OF FUNERAL DIRECTOR		ADDRESS		
SIGNATURE OF AUTHORIZED INDIVIDUAL				

<sup>1</sup> State disease, injury or complication which caused death, but not mode of dying such as heart failure, etc.<sup>2</sup> State 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)

<b>REPORT OF CASUALTY</b>		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, Blvtheville, 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 1, St. Louis, Missouri 63112, Wife Notified 22 May 1968 Mr. Willie McKeever. St. Louis, Missouri, Father 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			
<p style="text-align: right;"><b>FILE</b> DISPOSITION BY MEMORIAL DIVISION <i>RET</i></p> <p style="text-align: right;">Name</p> <p>THUA THIEN (02) I CTZ</p>			
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. Date 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>J. A. Danner</i> Adjutant General	

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

2(E)

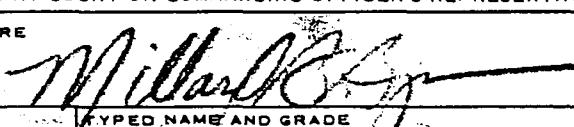
REPORT OF CASUALTY		REPORT NUMBER AND TYPE A 6584 FINAL	RVN 2316	DATE PREPARED 3 June 1968
1. SERVICE IDENTIFICATION (Name, Service Number, Grade or Rate, Component, Branch and Organization) MC KEEVER, LEROY, RA 16 992 881, PFC, RA, 188TH AVN CO, 269TH AVN BN, 16TH AVN GP, VIETNAM				
2. CASUALTY STATUS <input type="checkbox"/> BATTLE <input checked="" type="checkbox"/> NON-BATTLE				
DIED 18 May 1968 in Vietnam from wounds received when a grenade he was carrying detonated.				
Commenced tour in Vietnam 14 October 1967				
3. DATE AND PLACE OF BIRTH, RACE, RELIGIOUS PREFERENCE 15 October 1947, Blvtheville, 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 E-3 Under 2 years \$128.70 FLIGHT <input type="checkbox"/> CREW <input checked="" 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 Notified 22 May 1968 Mr. Willie McKeever. St. Louis, Missouri, Father Willie Mae Lee, address not shown, Sister, 2,3				
DA Form 41 Undated				
8. REPORT FOR VATO 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				
<i>BB</i> FILE DISP. BR JUN 26 1968				
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>J. A. Duray</i> Adjutant General		

## PROPERTY

## RECORD OF PERSONAL EFFECTS FOR COMBAT AREAS

(AR 643-30)

1/2 pages

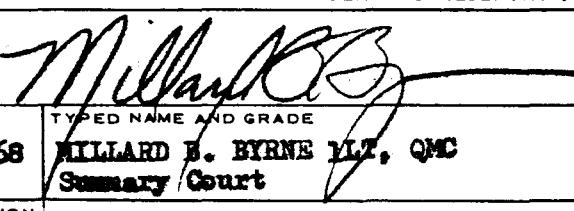
1. LAST NAME - FIRST NAME - MIDDLE INITIAL <b>McKEEVER, Joyce</b>		2. GRADE <b>PPC</b>	3. SERVICE NUMBER <b>RA 16 992 881</b>
4. ORGANIZATION AND STATION OR APO <b>183rd Avn Co., 269th Avn Bn, 16th Avn GP APO SF 96260</b>			
5. STATUS (Dead or missing) <b>Deceased</b>		6. DATE STATUS DETERMINED <b>18 May 68</b>	7. PLACE <b>BBB</b>
8. INVENTORY OF EFFECTS		9. TOTAL FUNDS	
QUANTITY	ITEM	a. FUNDS TRANSMITTED WITH EFFECTS (Amount and description)	
90	Letters & Cards		
2	Photo's albums, 60 pictures		
1	Bill military papers		
1	Large drawing		
1	Monograph manual		
1	Membership cert.		
1	Measurement form		
1	Envelope of instruction drafting		
16	Black & White negatives		
1	New article		
1	Note book, the American school of drafting		
1	T-square		
1	Drafting board		
1	Universal drafting set		
1	Field set drafting instruments		
13	Booklet drafting lesson		
5	Drawing pencil w/case		
1	Photo w/frame		
1	Record album		
2	45 RPM record		
1	Crucifix		
2	Note book		
1	Book, auto course		
1	Night gown		
2	Undigrees set		
2	Civ. shirts		
5	Socks		
1	Handkerchief		
1	Scalp		
1	Scarf		
1	Civ. trousers		
3	35 film		
b. FUNDS EXCHANGED, CONVERTED, DEPOSITED, ETC.			
AMOUNT AND DESCRIPTION		DISPOSITION	
Attach supplemental sheet for additional items.			
10. EFFECTS SHIPPED TO: <b>Mrs. Joyce E. McKeever St. Louis, Missouri 63112</b>		11. DATE AND METHOD OF SHIPMENT (B/L No., Registry No., etc.) <b>15 Jun 68 REG AIR MAIL #125389</b>	
12. SUMMARY COURT OR COMMANDING OFFICER'S REPRESENTATIVE <b>SIGNATURE</b> 		13. I ACKNOWLEDGE RECEIPT OF ALL ARTICLES LISTED IN ITEM 8 AND ALL FUNDS RECORDED IN ITEM 9a.  (Signature of next of Kin, Legal Representative, or Dependent)	
DATE <b>15 Jun 68</b>	TYPED NAME AND GRADE <b>MILLARD B. EIKEN JR., QMC Summary Court</b>		
ORGANIZATION <b>35 ARMY MORTUARY VIETNAM APO 96307</b>			

## PROPERTY

## RECORD OF PERSONAL EFFECTS / OUTSIDE COMBAT AREAS

(AR 643-50)

2/2 pages

1. LAST NAME - FIRST NAME - MIDDLE INITIAL <b>NOKEVER, Leroy</b>	2. GRADE <b>EFC</b>	3. SERVICE NUMBER <b>HA 16 992 881</b>
4. ORGANIZATION AND STATION OR APO		
5. STATUS (Dead or missing)		6. DATE STATUS DETERMINED
7. INVENTORY OF EFFECTS		8. TOTAL FUNDS
QUANTITY	ITEM	9. FUNDS TRANSMITTED WITH EFFECTS (Amount and description)
1	Lighter, broken	
1	Shaving mug	
2	Name tag, cloth	
1	Earphone	
1	Ruler	
1	Protractor	
1	Triangle	
1	Dk playing cards	
1	Stamper, rubber	
1	Booklet, general catalog	
1	Book, mech drawing	
1	Novel	
1	Pr shower shoes	
1	Case maxfacter	
1	Camera, ricoh super shot	
1	35mm #37726	
LAST ITEM		
b. FUNDS EXCHANGED, CONVERTED, DEPOSITED, ETC.		
AMOUNT AND DESCRIPTION		DISPOSITION
Attach supplemental sheet for additional items.		
10. EFFECTS SHIPPED TO:		11. DATE AND METHOD OF SHIPMENT (B/L No., Registry No., etc.)
SIGNATURE 		12. SUMMARY COURT OR COMMANDING OFFICER'S REPRESENTATIVE
DATE <b>15 Jun 68</b>	TYPED NAME AND GRADE <b>MILLARD B. BYRNE 1LT, QMC</b>	
Organization <b>US ARMY MORTUARY VIETNAM APO 96307</b>		13. I ACKNOWLEDGE RECEIPT OF ALL ARTICLES LISTED IN ITEM 8 AND ALL FUNDS RECORDED IN ITEM 9a.
(Signature of next of Kin, Legal Representative, or Dependent)		

## RECORD OF PERSONAL EFFECTS - OUTSIDE COMBAT AREAS

(AR 643-50)

1. LAST NAME - FIRST NAME - MIDDLE INITIAL <b>McKEEVER, LEROY</b>		2. GRADE <b>PFC</b>	3. SERVICE NUMBER <b>RA 16 992 681</b>
4. ORGANIZATION AND STATION OR APO <b>188th Avn Co, 269th Avn Bn, 16th Avn Gp, APO SF 96268</b>			
5. STATUS (Dead or missing) <b>DECEASED</b>		6. DATE STATUS DETERMINED <b>18 May 68</b>	7. PLACE <b>EVK</b>
8. INVENTORY OF EFFECTS		9. TOTAL FUNDS	
QUANTITY	ITEM	a. FUNDS TRANSMITTED WITH EFFECTS (Amount and description)	
1 1 1 2 2 1 1 1 6 1 1	Comb Nail Clipper Wallet, Black Ais Film Rings Letter Bundles Miss Papers Photos Money Order Stamps BB T14 Shot Record ////////LAST ITEM////////		
SECOND SHIPMENT		b. FUNDS EXCHANGED, CONVERTED, DEPOSITED, ETC. AMOUNT AND DESCRIPTION DISPOSITION NO FUNDS TRANSMITTED THIS STATION	
Attach supplemental sheet for additional items.			
10. EFFECTS SHIPPED TO: <b>Mrs. Joyce M. McKeever St. Louis, Mo. 63112</b>		11. DATE AND METHOD OF SHIPMENT (B/L No., Registry No., etc.)	
12. SUMMARY COURT OR COMMANDING OFFICER'S REPRESENTATIVE SIGNATURE <i>Henry W. Hart</i>		13. I ACKNOWLEDGE RECEIPT OF ALL ARTICLES LISTED IN ITEM 8 AND ALL FUNDS RECORDED IN ITEM 9a.  (Signature of next of Kin, Legal Representative, or Dependent)	
DATE <b>25 June 68</b>	TYPED NAME AND GRADE <b>WILLARD B. BYRNE, 1LT, QMC</b>		
ORGANIZATION <b>US ARMY MORTUARY, VIETNAM, APO SF 96307</b>			

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

114-03  
PFC LEROY MCKEEVER RA 16 992 881

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 GNL 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

MTW 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*

MILLARD B. BYRNE  
1LT, QMC  
Summary Court

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

FILE DISPOSITION BR. AUG 20 1968  
*MBM*

**MEMORIAL DIVISION - OARB**  
**ESCORT'S REPORT OF MISSION**

**DECEDENT**

PPC 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	DATE DEPARTED ON RETURN TRIP	DATE ARRIVED DUTY STATION
Mrs. Joyce McKeever	13 Jun 68	13 Jun 68

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

No unusual circumstances.

DATE

SIGNATURE OF ESCORT

*Herman Nixon*

SSR Requested 21 May 68 beh

REPORT OF CASUALTY		REPORT NUMBER AND CASUALTY CODE CROWN 16108			DATE PREPARED 21 May 68	
1. SERVICE IDENTIFICATION (Name, Service Number, Grade or Rate, Component, Branch and Organization) <b>McKEEVER, Leroy; RA 16 992 881; PFC E-3; RA; 188th Avn Co, 269th Avn Bn, 16th Avn Gp APO SFRA 96268</b>						
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 <b>RVN</b>	c. DATE <b>18 May 68</b>	d. TIME <b>1355</b>	e. STATUS OF REMAINS <b>READY</b>	f. RACE <b>NEGRO</b>	g. RELIGION <b>PROT</b>	
3a. DATE AND PLACE OF BIRTH <b>15 Oct 47 Blytheville, Ark</b>			b. COMMENCED TOUR DATE <b>14 Oct 67</b>			
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 <b>E-3 under 2 years \$128.70 P7F/Angle</b>			CHECK IF APPLICABLE <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) <b>23 285 47 264 #285 St Louis, Mo</b>						
PRIMAR Y NEXT OF KIN, RELATIONSHIP, AND ADDRESS (include ZIP Code) <b>Mrs Joyce M. McKeever ((Wife)) St Louis, Mo. 63112 OK</b>						
7. ADDITIONAL INFORMATION TO BE OBTAINED a. <input type="checkbox"/> CUSTODY b. <input checked="" type="checkbox"/> MARITAL STATUS OF EM <i>See for notification officer</i> c. <input checked="" type="checkbox"/> ADDRESS OF: verify, wife d. <input checked="" type="checkbox"/> OTHER: Grat add						
9. a. ORIGINATOR <b>RVN</b>	b. RECEIVED BY <b>PNU Hughes</b>	c. TIME <b>2221Z</b>	d. DATE <b>21 May 68</b>			
SECTION II - NOTIFICATION ACTIONS						
10. ACTION ITEMS 1 THROUGH 4 PASSED FOR NOTIFICATION ACTION TO HQ: <b>FIFTH ARMY</b>	NAMES OF PERSONS PASSING AND RECEIVING THE ACTION (and msg No.) <b>Sp. Mission/ B. V. 1450 22 May 68</b>		ZULU TIME	ZULU DATE		
11. PRIMARY NEXT OF KIN NOTIFIED PERSONALLY BY: <b>EMI (EMI)</b>	<b>EMI (EMI)</b>		<b>0055</b>	<b>22 May 68</b>		
12. COMPLETION OF NOTIFICATION PASSED TO DA CASUALTY DIVISION OR ORIGINATOR	<b>LADL - Bernsen</b>		<b>0055</b>	<b>23 May 68</b>		
13. CONFIRMATION WESTERN UNION MESSAGE DISPATCHED TO PRIMARY NEXT OF KIN	<b>W. U. - Bernsen</b>		<b>0055</b>	<b>23 May 68</b>		
14. WESTERN UNION MESSAGE DISPATCHED TO SECONDARY NEXT OF KIN	<b>W. U. - Bernsen</b>		<b>0055</b>	<b>23 May 68</b>		
15. DEATH GRATUITY PAYMENT MESSAGE DISPATCHED TO SURVIVOR ASSISTANCE OFFICER BY: <b>SAO</b>	<b>SAO</b>		<b>1252</b>	<b>23 May 68</b>		
16. DATA ENTERED ON INFORMATION MESSAGE NO. BY DA CASUALTY DIVISION						
17. ADDRESS FOR GRATUITY PAY <b>CG, FT Leavenworth, Mo.</b>						
18. a. INDIVIDUAL <b>XXXX</b> (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 PROCESS			1606		
FINGERPRINT CHART			19074468		
LAST NAME-FIRST NAME-MIDDLE INITIAL (or unknown number)			GRADE	SERVICE NUMBER/SSAN	
McKEEGER, Leroy				16992881	
NAME OF CEMETERY, EVACUATION NUMBER, OR SEARCH AND RECOVERY NUMBER			PLOT	ROW	GRAVE
15 Oct 47 Blytheville Ark					
LEFT HAND		RIGHT HAND			
 3100		NOTE AMPUTATIONS, ABNORMALITIES, MISSING FINGERS, AND/OR DERMIS IN APPROPRIATE BLOCK			
					
					
					
					
					
<b>IDENTIFIED BY FINGERPRINTS: AS</b> NAME <u>McKEEGER, Leroy</u> Last <u>Leroy</u> First <u></u> Middle <u></u> Serv: # <u>16992881</u>					
FBI <u>Officer</u> Date <u>MAY 28 1968</u>					
<b>IMPORTANT</b> ATTACH DD FORM 2A (Identification Card) TO THIS FORM IF AVAILABLE					
IMPRESSIONS TAKEN BY (Name) <u>SST Robert Dorgan</u>					
<b>FOR FEDERAL BUREAU OF INVESTIGATION USE ONLY</b>					
IDENTIFIED BY FINGERPRINT COMPARISON AS: LAST-NAME-FIRST NAME-MIDDLE INITIAL			SERVICE NUMBER		
OFFICIAL APPROVING FINGERPRINT COMPARISON (Name)			DATE		

PAGE 2 RUMUG DA 8896 UNCLAS E F T C ~~FOIC~~

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.

F. 1 INCIDENT OCCURRED VIC COORD: YD 723 328 THUA THIEN (02) I CTZ RVN. INVESTIGATION IN PROGRESS.

G. 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: 67 N20 AWDS: NDSM, VSM, VCM

N. DOUBT

O. NOT STATED

(DOB: 15 OCT 47)

~~STO - FILE INFORMATION ONLY~~

BT

1

DATA 7-4

RECORDED BY DATA 7-4

DATA 7-4

DOMESTIC SERVICE	
Check the class of service desired; otherwise this message will be sent as a fast telegram	
TELEGRAM	X
DAY LETTER	
NIGHT LETTER	

\$

S

E

# WESTERN UNION

## TELEGRAM

W. P. MARSHALL  
CHAIRMAN OF THE BOARD

R. W. MCPALL  
PRESIDENT

INTERNATIONAL SERVICE	
Check the class of service desired; otherwise the message will be sent at the full rate	
FULL RATE	
LETTER TELEGRAM	
SHORE-SHIP	

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	X

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: MD

OREN WOMACK