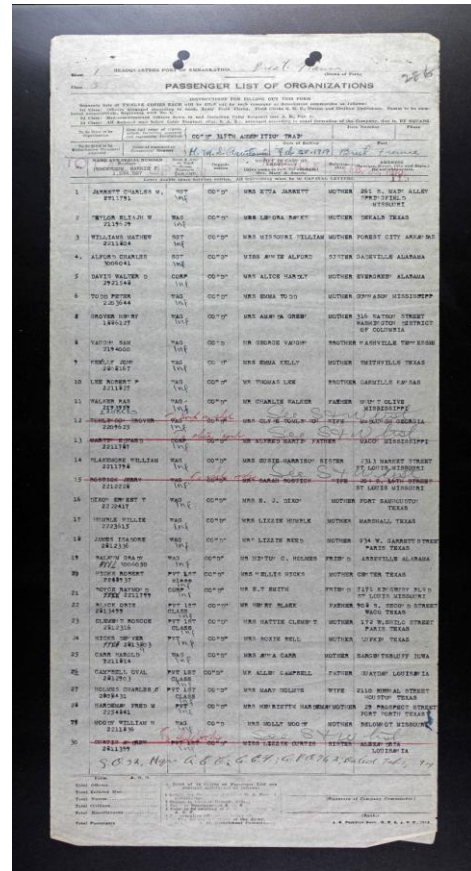


Charles M. Jarrett – Charter Member of Post 125

Charles M. Jarrett served in the Army from 26 October 1917 to 26 March 1919 and attained the rank of Sergeant. He was born 21 July 1892 and passed away 27 September 1960. He was a member of Company D, 317 Ammunition Train, of the 92nd Division.



CHARLES M. JARRETT

Charles M. Jarrett, 68, of 954 East McDaniel, died at his home at 9:30 a.m. Tuesday.

He is survived by his wife, Josephine; a daughter, Mrs. Charlene Johnson, New York City; three sons, Byron and Charles, Los Angeles, and Ronald, Jefferson City; a sister, Mrs. Marie Abernathy, and a brother, Lewis Jarrett, both of Springfield.

Herbert V. Smith is in charge of arrangements.

STATE Massachusetts
COUNTY Suffolk

DEPARTMENT OF COMMERCE AND LABOR BUREAU OF THE CENSUS
THIRTIETH CENSUS OF THE UNITED STATES: 1910 POPULATION

TOWNSHIP OR OTHER DIVISION OF COUNTY
NAME OF INDIVIDUAL

Cambridge South

NAME OF INDIVIDUAL Paul

EDUCATION High School

(10)

EDUCATION DISTRICT NO.
EDUCATION DISTRICT NO.

27

28

(Part 5)

A

NAME OF INDIVIDUAL Paul

AGE	SEX	NAME	BIRTH DATE	BIRTH PLACE	MARRIAGE	CITIZENSHIP	EDUCATION	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION	INDUSTRY	OCCUPATION
-----	-----	------	------------	-------------	----------	-------------	-----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------	----------	------------

JARRETT CHARLES MELVIN

Sgt 14 Co 4 Bn 159 D B

942 S Robterson Ave Spring-
field Mo

2 211 791 Died 7/27/60

Born 7/21/92

Enl 10/26/17 Dis 3/26/19 Cl 445 247

U. S. VETERANS BUREAU
MAIL AND RECORDS
Form 7302-Rev. Sept., 1956

INDEX CARD

JRI DIVISION OF HEALTH - STANDARD CERTIFICATE OF DEATH

LED VS OCT 3 1960

NDED

Registration District No.

Primary Registration District No.

Registrar's No.

STATE FILE NUMBER

-60-034424

1. PLACE OF DEATH a. COUNTY Greene		2. USUAL RESIDENCE (Where deceased lived. If institution: Residence before admission) a. STATE Mo' b. COUNTY Greene	
b. CITY (If outside corporate limits, give TOWNSHIP only) OR Springfield		c. CITY OR TOWN Springfield	
Length of stay in 1b 68		Inside Limits Yes <input type="checkbox"/> No <input type="checkbox"/>	
c. FULL NAME OF (If NOT in hospital, give location) HOSPITAL OR INSTITUTION 954 E McDaniel St.		d. STREET ADDRESS (If outside, give location) 954 E McDaniel St.	
Inside Limits Yes <input type="checkbox"/> No <input type="checkbox"/>		Reside on Farm Yes <input type="checkbox"/> No <input type="checkbox"/>	
3. NAME OF DECEASED (Type or print) First CHARLES Middle MELVIN Last JARRETT			
4. DATE OF DEATH Month September Day 27 Year 1960			
5. SEX Male	6. COLOR OR RACE Negro	7. Married <input checked="" type="checkbox"/> Never Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/>	8. DATE OF BIRTH July 2 1892
9. AGE (last birthday) 68		10. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Janitor	
11. BIRTHPLACE (City and state or country) Springfield Mo'		12. CITIZEN OF WHAT COUNTRY U S A	
13a. FATHER'S NAME Benjamin Jarrett		13b. MOTHER'S MAIDEN NAME Etta Lewis	
14. NAME OF HUSBAND OR WIFE Josephine Jarrett		15. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) yes	
16. SOCIAL SECURITY NO. WWI		17. INFORMANT Josephine Jarrett 954 E McDaniel St.	
18. CAUSE OF DEATH (Enter only one cause per line for (a), (b), and (c). PART I. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (a) Coronary Heart Disease Conditions, if any, which gave rise to above cause (a), stating the underlying cause last. DUE TO (b) _____ DUE TO (c) _____ PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not related to the terminal disease condition given in PART I (a) PART III. If deceased was female was there a pregnancy in last 90 days. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown			
19. WAS AUTOPSY PERFORMED? YES <input type="checkbox"/> NO <input type="checkbox"/>		20a. ACCIDENT <input type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/>	
20b. DESCRIBE HOW INJURY OCCURRED. (Enter nature of injury in PART I or PART II of item 18.)			
20c. TIME OF INJURY Hour _____ a.m. _____ p.m. Month, Day, Year _____		20d. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>	
20e. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.)		20f. CITY, TOWN, OR LOCATION COUNTY _____ STATE _____	
21. I attended the deceased from 1959 to 9/27/60 and last saw him alive on 9/25/60 Death occurred at 9:30 a.m. on the date stated above, and to the best of my knowledge, from the causes stated.			
22a. SIGNATURE Lyman D. Brown M.D.		22b. ADDRESS 311 1/2 College	
22c. DATE SIGNED 9/28/60		23. NAME OF CEMETERY OR CREMATORY Springfield National	
23a. BURIAL, CREMATION, REMOVAL (Specify) Burial		23b. DATE October 3 60	
23c. LOCATION (city, town, or county) Springfield Greene Mo'		24. FUNERAL DIRECTOR H V Smith 602 N Jefferson St.	
25. DATE RECD. BY LOCAL REG. 9-30-60		26. REGISTRAR'S SIGNATURE Effie S. Melton	

(Licensed Embalmer's Statement on Reverse Side)

LAST NAME - FIRST NAME - MIDDLE INITIAL JARRETT, Charles M.				GRADE Sgt		SERVICE NUMBER 2211791		NAME OF CEMETERY Springfield National Cemetery		OCT 26 1960	
DATES OF SERVICE ENLISTMENT <input checked="" type="checkbox"/> 26 Oct 1917 SEPARATION <input checked="" type="checkbox"/> 26 Mar 1919 RETIREMENT <input type="checkbox"/> DIED ON AD <input type="checkbox"/>				SERVICE DATA (Company, Regiment, Division, or other organization and basic arm of service) Co. D, 317 Ammunition Train, 92 Div				CHECK IF REMAINS CREMATED <input type="checkbox"/>			
WW I <input checked="" type="checkbox"/> WW II <input type="checkbox"/> KOREA <input type="checkbox"/> OTHER (Specify) 21				STATE Missouri		EMBLEM (Check one) <input checked="" type="checkbox"/> CHRISTIAN <input type="checkbox"/> HEBREW <input type="checkbox"/> OTHER (Specify) <input type="checkbox"/> NONE					
DATE OF BIRTH MO DAY YEAR Jul 2 1892		DATE OF DEATH MO DAY YEAR Sep 27 1960		DATE OF INTERMENT MO DAY YEAR Oct 3 1960		GRAVE LOCATION SECTION GRAVE NO. 29 462		DEPTH OF GRAVE 5'		CASKET IN <input checked="" type="checkbox"/> BOX <input type="checkbox"/> VAULT <input type="checkbox"/> NONE	
NAME AND ADDRESS OF NEXT OF KIN OR OTHER RESPONSIBLE PERSON (Include postal zone and relationship) Mrs. Josephine Jarrett (Widow) 954 E. McDaniel St. Springfield, Missouri				HEADSTONE OR MARKER ORDERED Agt Co D 317 Ammo Tr 92 Division							
REMARKS (Authority for interment, disinterment) Svc verified by telegram from MPRC, St. Louis, Mo. Adj. Gr. No. 463 reserved for widow				SHIPPING POINT FOR HEADSTONE (Nearest freight station) A 3437894 COLUMBUS MARBLE WORKS COLUMBUS, MISSISSIPPI Springfield, Missouri							
PERTINENT BURIAL DATA		PLACE OF DEATH 954 E. McDaniel St., Springfield, Mo.				RELIGIOUS DENOMINATION OF DECEDENT Protestant					
		NAME OF FUNERAL DIRECTOR Herbert Smith Funeral Home				NAME OF CHAPLAIN OFFICIATING AT BURIAL SERVICE					
TYPED NAME OF SUPERINTENDENT JOHN W. COX				SIGNATURE OF SUPERINTENDENT <i>John W. Cox</i>							

DA FORM 2122 1 MAY 58 1 7 0 6 0 9 2 0 0 1 9 RECORD OF INTERMENT (TM 10-287) 1