

COMMONWEALTH OF PENNSYLVANIA
WORLD WAR II VETERANS' COMPENSATION BUREAU

42019

APPLICATION FOR WORLD WAR II COMPENSATION—TO BE USED BY HONORABLY
DISCHARGED VETERAN OR PERSON STILL IN SERVICE

IMPORTANT—Before Filling Out This Form Study it Carefully.

Read and Follow Instructions—Print Plainly in Ink or Use Typewriter. DO NOT
Use Pencil—All Signatures Must Be in Ink.Applicant Must Not Write
In Space Below

1—Name of Applicant.

VAN FOSSEN WILLIAM HORACE
Last First Middle or Initial

2—Address to Which CHECK and MAIL is to be Sent.

551 LEVERINGTON AVE. Philadelphia PENNA.
House No. St. R. D. P. O. Box City or Town County State

3—Date and Place of Birth.

7-11-25 Philadelphia Phila. PENNA.
Month Day Year City or Town County State

4—Name Under Which Applicant Served In World War II.

VAN FOSSEN WILLIAM HORACE
Last First Middle or Initial5—Date of Beginning and Date of Ending of Each Period of Service Between December 7, 1941
and March 2, 1946 (Both Dates Inclusive) During Which Applicant Was In DOMESTIC
SERVICE.July 10, 1943 ✓ 28-35 DECEMBER 13, 1945
MARCH 15, 1945
Date of Beginning Date of Ending6—Date of Beginning and Date of Ending of Each Period of Service Between December 7, 1941
and March 2, 1946 (Both Dates Inclusive) During Which Applicant Was In FOREIGN SERVICE.DECEMBER 2, 1943 MARCH 15, 1945
61-N
Date of Beginning Date of Ending

7—Date and Place Applicant Entered Active Service.

7 10 43 Philadelphia PENNA.
Month Day Year Place

8—Service or Serial Numbers Assigned To Applicant.

Service No's.

Serial No's.

245-83-77

9—Date and Place Where Applicant Was Separated From Active Service.

DECEMBER 13, 1945 BAINBRIDGE MD.
Month Day Year Place10—Is Applicant Now Serving In Armed Forces On Active Duty? Yes _____ No X

If Answer is YES—Be Sure To Have Certificate Executed And Filed With Application—See Instruction Sheet.

11—Mark "X" Above Name To Indicate Sex And Branch of Service.

X Male Female Army Navy Marine Corps Coast Guard Other—Describe

12—Applicant's Residence At Time of Entry Into Active Service.

636 LEVERINGTON AVE. Roxborough PHILA. PENNA.
House No. Street R. D. P. O. Box City or Town County State

13—Applicant Was Registered Under Selective Service As Follows.

I WAS NOT Registered prior to my
enlistment

Draft Board No.

City or Town

County

State

FEB 7 1950

Date Application Was Received

Batch Control Number

32219 2098

Active Domestic Service

Months \$
Days 29 \$
Amount Due \$ 290.00

Active Foreign Service

Months \$
Days \$
Amount Due \$

Total Amt. Due \$ 290.00

Audited By THOMAS LA

Service
Computed ByAmounts
Extended By

Approved For Payment

Date AUG 24 1950

For A. G. [Signature]

For Aud. G. [Signature]

For S. T. [Signature]

Application Disapproved

By