

INFORMATION RELEASABLE UNDER THE FREEDOM OF INFORMATION ACT**NAME:**

Jerome David Salinger

BRANCH OF SERVICE AND SERIAL/SERVICE NUMBER(S):

Army of the United States 32325200

DATES OF SERVICE:

April 27, 1942 to November 28, 1945

DUTY STATUS:

Discharged

RANK/GRADE:

Staff Sergeant

SALARY:

NA

SOURCE OF COMMISSION:

NA

PROMOTION SEQUENCE NUMBER:

NA

ASSIGNMENTS AND GEOGRAPHICAL LOCATIONS:Rhineland
Ardennes
Normandy**MILITARY EDUCATION:**

Signal Corps

DECORATIONS AND AWARDS:European African Middle Eastern Campaign Medal
Good Conduct Medal
World War II Victory Medal
World War II Lapel Button**TRANSCRIPT OF COURT-MARTIAL TRIAL:**

Not In File

PHOTOGRAPH:

NA

PLACE OF ENTRY:

Ft. Jay, NY

PLACE OF SEPARATION:

Frankfurt, Germany

FOR DECEASED VETERAN ONLY**PLACE OF BIRTH****DATE OF DEATH****LOCATION OF DEATH****PLACE OF BURIAL**

NOTE: N/A denotes information is not available in the veteran's records

ENLISTED RECORD AND REPORT OF SEPARATION

HONORABLE DISCHARGE

4805584

| | | | | | |
|---|-------------------|------------------------------------|--|--------------------------|-------------------------|
| 1. LAST NAME - FIRST NAME - MIDDLE INITIAL Calinger Jerome J | | 2. ARMY SERIAL NO. 34225400 | 3. GRADE S/SGT | 4. ARM OR SERVICE CIC | 5. COMPONENT AGF |
| 6. ORGANIZATION CIC Det 970 APO 707 | | 7. DATE OF SEPARATION 22 Nov 45 | 8. PLACE OF SEPARATION Frankfurt on Main, Germany | | |
| 9. PERMANENT ADDRESS FOR MAILING PURPOSES 1133 Park Ave, NY NY | | 10. DATE OF BIRTH 1 Jan 1915 | 11. PLACE OF BIRTH NY NY | | |
| 12. ADDRESS FROM WHICH EMPLOYMENT WILL BE BOUGHT CIC Det, 970, APO 707 | | 13. COLOR EYES Brown | 14. COLOR HAIR Black | 15. HEIGHT 6-1 | 16. WEIGHT 140 |
| 17. NO. DEPEND. 0 | 18. RACE WHITE | | 19. MARITAL STATUS SINGLE | | 20. U.S. CITIZEN YES |
| 21. CIVILIAN OCCUPATION AND NO. Playwright, Author (208) | | | | | |

MILITARY HISTORY

| | | | | | | | |
|---|--------------------|---------------------------------|---------------------------------------|--|---------------------------------|--|--|
| 22. DATE OF INDOCTION 27 Apr 42 | | 23. DATE OF ENLISTMENT ***** | | 24. DATE OF ENTRY INTO ACTIVE SERVICE 27 Apr 42 | | 25. PLACE OF ENTRY INTO SERVICE Ft Jay NY | |
| 26. REGISTERED YES NO | | 27. LOCAL S.E. BOARD NO. 45 | | 28. COUNTY AND STATE NYC NY | | 29. HOME ADDRESS AT TIME OF ENTRY INTO SERVICE 1133 Park Ave NY | |
| 30. MILITARY OCCUPATIONAL SPECIALTY AND NO. Investigator (201) | | | | 31. MILITARY QUALIFICATION AND DATE (i.e., infantry, aviation and marksmanship badges, etc.) None | | | |
| 32. BATTLES AND CAMPAIGNS Bn Coy 889 Artillery Ltr Hq 4th Div AG 2016 OPOA 17 Jul 45 Bn Coy 8th Signal Ltr Hq 1st Div AG 200-5 OPOA 28 Jun 45 Bn Coy 8th Signal Ltr Hq 2d Troop 12th AG 200-6 A 3-1 28 Jun 45 Bn Coy 8th Signal Bn Coy 8th | | | | | | | |
| 33. DECORATIONS AND CITATIONS Purple Heart Ribbon 17 Oct 45. Good Conduct Medal 30 19 Hq 8088 T 17 Dec 45. | | | | | | | |
| 34. WOUNDS RECEIVED IN ACTION None | | | | | | | |
| 35. LATEST IMMUNIZATION DATES | | | | 36. SERVICE OUTSIDE CONTINENTAL U. S. AND RETURN | | | |
| SMALLPOX 4 13 44 | TYPHOID 12 1 44 | TETANUS 2 19 45 | OTHER (specify) Typhoid 5 15 45 | DATE OF DEPARTURE 30 Jan 44 | DESTINATION European Theatre | DATE OF ARRIVAL 6 Feb 44 | |
| 37. TOTAL LENGTH OF SERVICE | | | | 38. HIGHEST GRADE HELD | | | |
| CONTINENTAL SERVICE | | FOREIGN SERVICE | | Staff Sergeant | | | |
| YEARS 2 | MONTHS 7 | DAYS 1 | YEARS 1 | MONTHS 9 | DAYS 28 | | |
| 39. PRIOR SERVICE None | | | | | | | |
| 40. REASON AND AUTHORITY FOR SEPARATION 9 Oct 45... AR 610-365 (Gov of Govt) & Ltr Hq 8088 T 210-8 & 220-8 | | | | | | | |
| SERVICE SCHOOLS ATTENDED Signal Corps. | | | | | | 43. EDUCATION (Years) Grade 8 High School 2 College 4 | |

PAY DATA

| | | | | | | | | | |
|--------------------------------|-------------|--------------------|----------------|--------------------------|------|----------------|--|--|--------------------|
| 42. LONGEVITY FOR PAY PURPOSES | | 43. MUSTARDING PAY | | 44. SOLDIER DEPOSITS | | 45. TRAVEL PAY | | 46. TOTAL AMOUNT, NAME OF DISBURSING OFFICER | |
| YEARS 2 | MONTHS 7 | DAYS 1 | TOTAL \$ 20 | THIS PAYMENT \$ 34.00 | None | | | | J R SAID Lt Col FR |

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 SUBDIVISION, VETERANS ADMINISTRATION, WASHINGTON 25, D. C.

| | | | | | | | | | | | |
|--|--|---|--|---|--|--|--|---------------------------------------|--|--|--|
| 47. KIND OF INSURANCE Natl. Serv. U.S. Govt. None | | 48. HOW PAID Allotment Direct to V. A. | | 49. Effective Date of Allotment Discontinuance 21 Nov 45 | | 50. Date of Next Premium Due (One month after 50) 31 Dec 45 | | 51. PREMIUM DUE EACH MONTH \$ 6.70 | | 52. INTENTION OF VETERAN TO Continue Only | |
|--|--|---|--|---|--|--|--|---------------------------------------|--|--|--|

| | | | | | | | | | | | |
|-----------------------|--|--|--|--|--|--|--|--|--|--|--|
| 54. RIGHT THUMB PRINT | 55. REMARKS (This space for completion of above items or entry of other items specified in W. D. Directives) Legal button issued. No lost time in 107. No inactive service. | | | | | | | | | | |
| | 56. SIGNATURE OF PERSON BEING SEPARATED <i>Jerome J. Calinger</i> | | | | | | 57. PERSONNEL OFFICER (Type name, grade and organization - signature) James A. ... Lt Lt Inf 8088 T 210-8 | | | | |

COPIES MADE BY VA RMC ST LOUIS FROM A BOARD IN HIS POSSESSION

FINAL PAYMENT ROLL

Original

Separation Center Hq Comd USFET (MAIN)

(Organization)

(Regiment)

ABO 757 U S Army

(Station)

(Principal arms)

Discharged on 28 Nov, 19 45 Paid _____, 19 _____

| | |
|----------------------------|--|
| PAID BY | |
| | |
| (For use of Paying Office) | |

APPROPRIATIONS:

| | | | | |
|-------------------------------|----------|--------------------|-------------|------------------|
| <u>212/60425 6015 P45-01</u> | (Symbol) | <u>6015 P45-01</u> | (Allotment) | \$ <u>100.00</u> |
| <u>212/60425 6015 P414-01</u> | | | | \$ <u>218.60</u> |
| Total amount disbursed | | | | \$ <u>318.60</u> |

ALLOTMENT SUMMARY:

| | |
|-----------|-----------------|
| Class "N" | \$ <u>13.40</u> |
| Class "E" | |
| Class "D" | |
| Class "F" | |
| Class "B" | |
| Class "X" | |
| TOTAL | \$ <u>13.40</u> |

COLLECTIONS—Repayments to appropriations and miscellaneous receipts:

| | |
|--|------------------|
| (Allot. _____) | \$ _____ |
| (Allot. _____) | \$ _____ |
| (Allot. _____) | \$ _____ |
| Government laundry _____ | \$ _____ |
| G. P. L. or D. _____ | \$ _____ |
| TRUST FUNDS: | |
| C. M. fines _____ | \$ _____ |
| Forf. by des. _____ | \$ _____ |
| S. H. 218930.6 (T. F.) _____ | \$ _____ |
| TOTAL COLLECTIONS | \$ _____ |
| Army Exch.; Co. fund, etc. (paid by check) _____ | \$ _____ |
| Individuals (paid by check) _____ | \$ _____ |
| Paid by cash <u>3186 m marks</u> | \$ <u>318.60</u> |
| TOTAL AMOUNT ACCOUNTED FOR | \$ <u>318.60</u> |

APO 757 U S Army 28Nov45

(Station)

(Date)

I CERTIFY that this roll is made out as required by Army Regulations and that entries pertaining to each name are correct; that where rental and/or subsistence allowance is due, the soldier was not furnished rations in kind nor received the equivalent thereof in money; that where quarters allowance is credited for the enlisted man; his dependents, or both, public quarters were not available or assigned to such persons nor did they receive a monetary allowance in lieu thereof; and that payment to the enlisted men named on the within pay roll is not prohibited by any provisions of law limiting the availability of the appropriation(s) involved. Except as otherwise stated in remarks, each enlisted man is entitled to travel pay to the place indicated after his name and was last paid to include 30 Sept, 19 45 by S D Hoffman Lt Col, F. D., U. S. A.

James M Connell
JAMES M CONNELL
 1st Lt Inf Asst

Personnel Officer.

I CERTIFY that I witnessed the payment of this roll and that prior to the signing of this certificate each man received the amount set opposite his name, with the exception of those men marked "Not paid."

Commanding Organization.

NOTE.—This certificate will be signed only on the copy of the pay roll which bears signatures of the men for payment in cash.

I CERTIFY that this roll is a true copy of the roll upon which payment, witnessed by me, was made, excepting as to the signatures in the receipt column and the certificate as to witnessing the payment thereof.

Commanding Organization.

NOTE.—This certificate will be signed only on the copy of the roll not receipted, and which constitutes the disbursing officer's retained voucher.

Army Exchange; Co. Fund and Collections paid by check on Treasurer, U. S.

Date _____, 19 _____

| PAYEE | CHECK NO. | AMOUNT |
|-------|-----------|--------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

| DATE OF ENLISTMENT (Induction or call to active duty) | No. YEARS SERVICE | NAME, GRADE, AND COMPONENT (Date and place of acceptance for enlistment, or place of receipt of notice for active duty, by reservist; induction; reporting for duty as National Guardsman under call or draft by the President, to which entitled to travel allowances.) | SERIAL No. | ALLOTMENTS | | | | | | |
|--|-------------------|---|------------|-------------------------|---------|---------|---------|---------|---------|---------|
| | | | | Month and year deducted | Class N | Class E | Class D | Class F | Class B | Class X |
| Inonorably discharged by reason of AR 615-365 and Ltr Hq USVET 8Oct45 to accept civilian | | | | | | | | | | |
| (State reason and order, if any) employment with U S Forces European Theater No time lost under A. W. 107 except as indicated. | | | | | | | | | | |
| 1. | | OTHER COMPONENTS | | | | | | | | |
| 2. | | STAFF SERGEANT | | | | | | | | |
| 27Apr42 | 3 | SALINGER, JEROME D | 32325200 | Oct45 | 6.70 | | | | | 13.40 |
| 3. | | Sol last pd to incl 30Sep45 by S D HOFFMAN | | Nov45 | 6.70 | | | | | |
| 4. | | Lt Col F.D. "N" almt dis 30Nov45. Due sol travel pay from NYP to NY CITY | | | | | | | | |
| 5. | | MOP \$300 this inst \$100 | | | | | | | | |
| 6. | | mail checks to CIC DET 970th APO 757 U S ARMY | | | | | | | | |
| 7. | | END OF ROLL | | | | | | | | |
| 8. | | | | | | | | | | |
| 9. | | | | | | | | | | |
| 10. | | | | | | | | | | |
| 11. | | | | | | | | | | |
| 12. | | | | | | | | | | |
| 13. | | | | | | | | | | |
| 14. | | | | | | | | | | |
| 15. | | | | | | | | | | |
| 16. | | | | | | | | | | |
| 17. | | | | | | | | | | |
| 18. | | | | | | | | | | |
| 19. | | | | | | | | | | |
| 20. | | | | | | | | | | |
| 21. | | | | | | | | | | |
| 22. | | | | | | | | | | |
| 23. | | | | | | | | | | |
| 24. | | | | | | | | | | |
| 25. | | | | | | | | | | |
| 26. | | | | | | | | | | |
| 27. | | | | | | | | | | |

I certify that each enlisted man shown hereon to be entitled to mustering-out payment was a member of the armed forces and was engaged in active service in the present war; that he was discharged or relieved from active service under honorable conditions after 7 December 1941; that he has not heretofore been paid a mustering-out payment under the Mustering-out Payment act of 1944; that each enlisted man shown hereon to be entitled to a mustering-out payment in excess of \$100.00 performed active service for at least 60 days; that each enlisted man shown hereon to be entitled to a mustering-out payment in the sum of \$500.00 served outside the continental limits of the United States or in Alaska; and that no enlisted man hereon falls within any of the classes of persons to whom payment is prohibited by section 1, (b) of said act.

I further certify that each enlisted man on this roll is entitled to increased pay at the rate of 20% of base pay for foreign service unless otherwise stated.

James W. Connell
JAMES W. CONNELL
1st Lt, Inf
Asst Pers Off

| CREDITS | | | | COLLECTIONS | | | TOTAL AMOUNT DUE | TOTAL COLLECTIONS | BALANCE PAID | We hereby acknowledge receipt IN CASH of amounts in the column "Balance Paid" set opposite our respective names, and in case of payment of quarters allowances we certify that we (our dependents) actually occupied quarters at the addresses shown during the period for which allowed, and that during the current period for which allowances are claimed we have made contributions for the support of our dependents listed hereon at a rate approximately equal to the rate of contributions for the support of the same dependents as shown in affidavits and/or certificates herewith or heretofore submitted and that there has not been a material change in the status of dependents nor degree of dependency as stated therein. |
|---------|-----------------------|--|------------|---------------|-----------|--------|------------------|-------------------|--------------|--|
| Net Pay | Deposits and Interest | Allowances for Sub. or Furlough Rations MOP | Travel Pay | Govt. Laundry | Sol. Home | | | | | |
| | | | | | | | | | | 1. |
| | | | | | | | | | | 2. |
| 218 60 | | 100 00 | | | | 318 60 | | 318 60 | | 3. <i>3186 mops</i> <i>Jerome D. Salinger</i> |
| | | | | | | | | | | 4. |
| | | | | | | | | | | 5. |
| | | | | | | | | | | 6. |
| | | | | | | | | | | 7. |
| | | | | | | | | | | 8. |
| | | | | | | | | | | 9. |
| | | | | | | | | | | 10. |
| | | | | | | | | | | 11. |
| | | | | | | | | | | 12. |
| | | | | | | | | | | 13. |
| | | | | | | | | | | 14. |
| | | | | | | | | | | 15. |
| | | | | | | | | | | 16. |
| | | | | | | | | | | 17. |
| | | | | | | | | | | 18. |
| | | | | | | | | | | 19. |
| | | | | | | | | | | 20. |
| | | | | | | | | | | 21. |
| | | | | | | | | | | 22. |
| | | | | | | | | | | 23. |
| | | | | | | | | | | 24. |
| | | | | | | | | | | 25. |
| | | | | | | | | | | 26. |
| | | | | | | | | | | 27. |