

COMMONWEALTH OF PENNSYLVANIA
WORLD WAR II VETERANS' COMPENSATION BUREAU

Cochran

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

MAY 3 - 1950

Date Application Was Received

Batch Control Number
16882

1—Name of Applicant.

** Zattiero SAMUEL (None)*
Last First Middle or Initial

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

32 West Garden Rd. Pittsburgh(27) ALLy. PA.
House No. St. R. D. P. O. Box City or Town County State

Active Domestic Service

Months *6* \$ *60*
Days \$
Amount Due \$ *60*

3—Date and Place of Birth.

July 4 1915 Pittsburgh ALLy PA.
Month Day Year City or Town County State

Active Foreign Service

Months \$
Days \$
Amount Due \$

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

Zattiero SAMUEL (None)
Last First Middle or Initial

5—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.

JAN. 17, 1945 5-18 July 3, 1945
Date of Beginning Date of Ending

Total Amt. Due \$ *60*

Audited By *[Signature]*

Service Computed By *J. Boyson*

Amounts Extended By *[Signature]*

Approved For Payment

Date *MAY 13 1950*

For A. G. *[Signature]*

For Aud. G. *[Signature]*

For S. T. *Mobilcon*

Application Disapproved

By

6—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.

NONE
Date of Beginning Date of Ending

7—Date and Place Applicant Entered Active Service.

JAN. 17 1945 Pittsburgh PA.
Month Day Year Place

8—Service or Serial Numbers Assigned To Applicant.

Service No's. *925-57-68*
Serial No's.

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

July 3 1945 Newport Rhode Island NAV. TRA Sta.
Month Day Year Place

10—Is Applicant Now Serving In Armed Forces On Active Duty? Yes _____ No

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

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

32 West Garden Rd. Pgh. 27 Pgh. ALLy PA.
House No. Street R. D. P. O. Box City or Town County State

13—Applicant Was Registered Under Selective Service As Follows.

18 Pittsburgh ALLy PA.
Draft Board No. City or Town County State