

Ike's Soldiers Submission Form

*Required Field



Help us honor our veterans who served in World War II between the dates of September 1, 1939 through March 31, 1946. Please fill out the form to the best of your ability, paying close attention to the information that is required.

PERSONAL INFO	RMATION					
Please complete the following			NO. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10			,
LESLIE	Р.			STRALEY		
First Name*	Middle		Las	t Name*	Su	ffix
Gender* (please check)	X Male	☐ Female	Date of Bi	na / 1903 rth s old when enlist	Date of D	na /1984 Death
ELLSWORTH, KANSAS			NOT STAT			
Birthplace (City, State)				vn (City, State)		-
Biographical Informa Enlisted ata age ::39						
in essential War I				no, 10 days to ac	cept employi	nenc
	3,	,	,			
1						
SERVICE INFORM Ike's Soldiers must have serve Private, Company K, Highest Rank 11 / 17 / 1942 Enlistment/Commiss	d in World War II 406th Infant ioned Date	ry 2 / 22 Discharge	2 / 1943	939 through March 31, Are these dates approx		⊠No
Branch of Service* (particle) Army Army Air Corps Coast Guard Marine Corps Navy Women Accepted for			☐ American☐ China Bu☐ European☐ Pacific	urma India	• •	
(WAVES) Navy ☐ Women Airforce Serv. ☐ Women's Army Corps ☐ Other (If other, please ex	s (WAC)		Company Unit	K, 406th Infantry		, :
Major Battle(s)			Honors &	Service Awards		
Was the veteran a prison	er of war? 🗌 Ye	es	Was the veto	eran killed in action?	☐ Yes Continue	d on Next Page

MEDIA

If you have any veteran photos, videos, service documents, or other media, please complete this section. Electronic media files are preferred and can be emailed to Info@EisenhowerFoundation.net. Please include the veteran's name in the subject line of your email. If you are providing
hard copies of media files, please DO NOT send original files as they will not be returned.
☐ Veteran Photo ☐ Emailed to Info@EisenhowerFoundation.net on: /// (date) Supported file types include gif, jpg, jpeg, & png. 512 MB Limit.
☐ Enclosed with this form Photos will not be returned. Please only send copies of your original.
Other Service Documents (examples include discharge papers, photos of medals) Emailed to Info@EisenhowerFoundation.net on: / / (date) Supported file types include gif, jpg, jpeg, & png. 512 MB Limit.
☐ Enclosed with this form Documents will not be returned. Please only send copies of your original.
☐ Video ☐ Emailed to Info@EisenhowerFoundation.net on: /// (date)
Video link:
Enclosed with this form
YOUR INFORMATION
Why do we need this? We want to be able to follow up and verify the information with you, if needed.
LES SHIVELY
Your Name
Your Phone Number Preferred contact method .
Your Mailing Address
1402 20TH ROAD, KANOPOLIS, KS. 67454
Your Email Address
Message for the Administrator
LES SHIVELY
Veteran Honored By
Please mail completed forms to: Eisenhower Foundation P.O. Box 295 Abilene, KS 67410
For Eisenhower Foundation Office Use
Received By: Date Form Received:/
Notes: Entered Into Ike's Soldiers://

TO ALL WHOM IT MAY CONCERN:

This is to Certi	fy, That*	LE	SLIE P. S	TRALEY	.,			•••••
		WOO CH THE	MALERY					
THE ARMY OF THE UN	ITED STATE	S, as a TI	ESTIMON	HAL OF H	HONEST AN	D FAITH	FUL SER	VICE, is
hereby HONORABLY DISC per Sec II Cir 39 W.D.194 Camp Maxey Texas Peb.22/4	HARGED fro	m the mili	in essen	e of the Ul	NITED STAT	Sed Ind	son of the H	on Disch
Said	LESLIE P. S	TRALEY						was born
inBllawa	rth		, in the	State of	Kansas			
When enlisted he was	years of ag	ge and by o	ccupation	a	Farmer			
He had Gray		na1	hair,Ru	ddy	complexic	on, and was	Five	feet
Seven inches in l	•							
Given under my hand							26th	day
of February	., one thousand	nine hund	lred and	forty-thr	.00	•		
					B. F. Hur	less		
					Colonel 40	Weth Topan		
				***************************************		WEU THIER	COMMA	
See A R 345-470.								MDING.
"Insert name; as, "John J. Doe." 'Insert Army serial number, grade, compa; If discharged prior to expiration of servic W. D., A. G. O. Form No. 55. October 10, 193	y, regiment, or arm or se s, give number, date, and 9.	ervice; as "1623332 source of order or	?"; "Corporal, Co full description	mpany A, 1st Infar of authority therefo	ntry"; "Sergeant, Quar or,	termaster Corps."		
	ı	ENLISTE	ED REC	ORD OF		2.10		
STRALEY LES	LIB	P				, PRI	VATE	
Dhistol of inducted November	name)	(Middle in	itial)	Tee warmen	(Army Serial No.)		(Grade)	
Completed 0	Vegre	, 17 :::::::::::::::::::::::::::::::::	months.	16	MI.	dove co	mice for lon	govity nov
Prior service:* None						26 1943	rvice for ion	gevity pay.
THE SELVICE.		······································	***************************************			LEY, TEXA	3	
	***************************************	***************************************	•••••••••••••••••		PAID IN F	ULL THIS	DATE \$66.	18
	***************************************		••••••••		H. G. Led	gerwood,	Ist. Lt.	F. D.
Noncommissioned officer:		Yems		••••••••••••••••••••••••••	Deputy for	Homer Ter	rell, mj	or, F. D.
Qualification in arms:								
Horsemanship: Not mounte								
Attendance of More	Army	y specialty:	none	•••••••••••••••••••••••••••••••••••••••				
Attendance at: Hone	(Nas	ne of noncommissi	oned officers' or s	pecial service schoo	A)			
Battles, engagements, skirmishes,	xpeditions:	None						
	······································					·····		
D								
Decorations, service medals, citation	ns:	NODE						
Wounds received in service:		Hone						
Date and result of smallpox vaccin			Novembe	27, 1942	Vaccina			
Date of completion of all typhoid-								
Date and result of diphtheria imm								
Date of other vaccinations (specify								
Physical condition when discharge	i: Good	••••		Married	or single:	Single		
Character: Excellent D								
Remarks: No time lost unde								
Print of Right Thumb								
			Signatu	re of soldier:	Lesl	ie P. Stre	ley	
					Carl	ton G. Nel	son	
*For a inclusive d under A W retention in	sch enlistment give comp tee of service, grade, ca 107 (if none, so state), an service for convenience of	eany, regiment, or tues of discharge, ad number of days I the Government,	arm or service, number of days retained and cas if any.	with lost se of		Ls. 406th		
ing same.	ate of qualification, and nu	mber, date, and sou	rce of order annex	B00-	F **	manding	Pers. Off	ioer
13ee pa	ur. 6, AR 40-215.							
Filed for Record the 13	ay of May		A. D. 19.44	at 10:50	o'clock • r	n.		
			-		Steve Dou	bra ya		Recorder.
					REGIS	TER OF DEE	DS	