

WAR CLAIMS COMMISSION
WASHINGTON 25, D. C.

CLAIM NO. **P-30099 -2**
(Do Not Write In This Space)

APPLICATION FOR LIVING EX-PRISONER OF WAR COMPENSATION FOR COMPULSORY LABOR AND/OR INHUMANE TREATMENT



I hereby make application for compensation payable to ex-prisoners of war under Section 6 (d) of the War Claims Act of 1948 (Public Law 896, 80th Congress, July 3, 1948), as amended by Public Law 303, 82d Congress, April 9, 1952.

PART I

IDENTITY OF EX-PRISONER OF WAR

1. Name Cecil Leroy Wood
(First name) (Middle name) (Last name)

2. Address MAR DET, USNRC, NB PORTSMOUTH N.H.
(Street and number) (City or town) (Zone) (State)

3. Date of birth 21 MARCH 1908 Place of birth BRainerd, MINN

4. Military or naval service serial No(s). 21915-8 (enlisted); 010040 (OFFICER)

5. Branch of military service at time of capture (check one): Army ; Navy ; Marines ; Coast Guard ; Other (specify) _____

6. Military or naval rank or rating at time of capture WARRANT OFFICER

7. Did you file a claim for prisoner of war \$1 per day benefits? YES If so, give your claim No. UNKNOWN
(Yes or No)

8. Places or camps of confinement:

Place or camp	From—	To—
<u>CARRERIGUOIR</u>	<u>6 MAY 1942</u>	<u>30 MAY 1942</u>
<u>CAMP #1, CABANETUAN, P.I.</u>	<u>1 JUNE, 1942</u>	<u>26 OCT. 1942</u>
<u>DAVAO, MINUANITA, P.I.</u>	<u>9 NOVEMBER 1942</u>	<u>6 JUNE, 1944</u>
<u>ENROUTE TO MANILA, P.I.</u>	<u>6 JUNE, 1944</u>	<u>28 JUNE, 1944</u>

PART II

INFORMATION CONCERNING LABOR DURING IMPRISONMENT

Before answering the questions in Part II, please read carefully the following provisions from the Geneva Convention of July 27, 1929, pertaining to labor. These provisions are grouped to correspond with the consecutive order of the questions.

The enemy government may utilize labor of able prisoners of war, excepting officers. If officers request suitable work, it shall be secured for them so far as is possible. Noncommissioned officers shall only be required to do supervisory work. Officers and persons of equivalent status shall be treated with regard due their rank and age. Labor detachments must be furnished good sanitary conditions and food. (Articles 21, 27, and 33.)

The enemy government must pay prisoners of war for work performed except work connected with maintenance of prison camps. Wages shall be paid at the rate in force for National troops or native workers. All wages earned must be paid at the end of captivity. The work day, including the trip going and coming, shall not be excessive or exceed that of civilian workers. Every prisoner shall be allowed a rest of 24 consecutive hours each week, preferably on Sunday. Work clothes, whenever required, must be furnished. (Articles 12, 30, and 34.)

Unhealthful or dangerous work is prohibited. No prisoner may be employed at work for which he is physically unfit. (Articles 29 and 32.)

Labor furnished by prisoners of war shall have no direct relation with war operations. Prisoners cannot be employed making or transporting arms or munitions or transporting any material intended for combatant units. (Article 31.)

9. (a) Were you required to work during imprisonment? (exclusive of work maintaining prison camps) yes (Yes or No) If so, describe the kind of work you performed and your physical condition

at that time IN PHILIPPINES WORKED IN FIELDS OF PRISON FARM
GROWING FOOD FOR OURSELVES AND JAPANESE ARMY. SUFFERED FROM
MALARIA, ACUTE BERI-BERI & DYSENTERY. WHILE IN JAPAN I WORKED
AT AN IRON FOUNDRY AND A COBALT PLANT. IN POOR PHYSICAL
CONDITION DUE TO BERI-BERI & DYSENTERY, WEIGHED 155 LBS.
NORMAL WT WAS 188 LBS.

(b) If you were an officer or noncommissioned officer, was your rank respected in the matter of the kind of work you were required to perform and otherwise?

AT THIS TIME I WAS A WARRANT OFFICER. AND WORKED
WITH THE ENLISTED MEN. NO RESPECT FOR RANK
AT ANY TIME

10. (a) Were you paid for labor performed? (exclusive of work maintained in prison camps) YES
(Yes or No)

If so, estimate total wages paid you and, if known, give hourly or daily rates of pay IN THE PHILIPPINES I RECEIVED NO PAY. IN JAPAN, I RECEIVED TWENTY FIVE (25) SEN PER WORK DAY, A TOTAL OF APPROXIMATELY EIGHTY FIVE (85) YEN.

(b) What were the hours of work required of you in a work day? ELEVEN HRS. ON DAY SHIFT AND THIRTEEN (13) HRS. ON NIGHT SHIFT

(c) Indicate if a rest day was allowed at least once a week NO
(Yes or No)

(d) Were adequate work clothes furnished you? NO
(Yes or No)

11. Describe any labor conditions which were unhealthful or dangerous YES. AT

YOKKAICHI I WORKED IN CONTACT REDUCING PLANT HANDLING SULPHURIC ACID WITHOUT PROTECTION. AT TOYAMA, JAPAN, I WORKED AROUND ELECTRIC FURNACES WHICH WERE UNRESTRAINED TEMPERATURES DUE TO THE CONDITION OF THE EQUIPMENT USED.

12. Did any of your work have direct relation to war operations? YES If so, describe
(Yes or No)

THE PLANT AT YOKKAICHI, JAPAN, REDUCED COBALT ORE TO COBALT FOR THE MANUFACTURE OF STEEL. THE PLANT AT TOYAMA CONVERTED SCRAP IRON TO STEEL AND MANUFACTURE WHEELS FOR HEAVY VEHICLES, SIMILAR TO BUNKERS.

13. Describe here any other conditions under which you were compelled to work that may be relevant to the provisions of the Geneva Convention of 1929 on labor I DID NOT REQUEST WORK.

WE EITHER WORKED OR DID NOT EAT. A MINIMUM OF CLOTHING WAS FURNISHED, NO PROTECTIVE CLOTHING WAS FURNISHED ON JOBS WHICH REQUIRED IT. WHEN EVER WE HAD A SUNDAY WITHOUT WORK, IT WAS UTILIZED BY THE JAPS TO HOLD SHAKA DOWNS AND THE RATION WAS SMALLER THAN ON WORK DAYS. I WAS FORCED TO GO TO WORK WHILE SO SICK THAT I COULD HARDLY WALK.

14. (a) Describe the living conditions and sleeping facilities (crowding conditions, heating, ventilation, bedding, fire protection, etc.) SLEEPING QRS WERE VERY CROWDED. NO

FIRE PROTECTION. NO BEDDING SUPPLIED IN PHILIPPINES. TWO (2)

THIN BLANKETS FURNISHED IN JAPAN. NO HEAT IN BARACKS IN JAPAN

BURN AT ANY TIME DURING THEIR. CONDITIONS SEVERE DURING WINTER

(b) What clothing, linens, or footwear, if any, were furnished you? THE ONLY CLOTHING

I RECEIVED WAS IN JAPAN WHICH CONSISTED OF EVERYTHING BUT

TRUSERS, 1 PAIR OF CANVAS JAP SHOES, CAP, AND LIGHT COAT.

15. (a) Were sanitary measures taken to assure cleanliness and healthfulness of camps and to prevent epidemics? NO If the answer is no, describe the conditions of the camps THE

LATRINES WERE LOCATED IN OR VERY NEAR BARACKS THIS CAUSING

FLIES IN GREAT NUMBERS. BOW SORE AND LICE WERE PREVALENT.

(b) State whether toilet facilities were adequate and if sufficient water was provided for bathing to maintain cleanliness TOILET FACILITIES WERE INADEQUATE. WATER WAS

AVAILABLE BUT NO MEANS TO HEAT IT DURING WINTER MONTHS

(c) Were you allowed to exercise in the open air? NO

(Yes or No)

16. Describe what medical care, supplies, or facilities were available AMERICAN DOCTORS WERE IN

CAMP BUT HAD VERY LIMITED AMOUNT OF MEDICINE. THE JAPANESE

DOCTOR OR MEDICAL CHIEFMAN COULD AND DID OVER RULE THE

DECISIONS OF THE AMERICAN DOCTORS, FORMERLY FROM IZUMI ISLAND WHEN A VERY GOOD

17. Were you permitted to retain personal effects and objects, other than arms, military equipment, and

papers? NO

(Yes or no)

18. Describe here any other conditions to which you were subjected that may be relevant to provisions of the Geneva Convention of 1929 as to the humane treatment of prisoners of war (e. g., abuse, ridicule, humiliation, subjection to attack, bombardment, etc.) I RECEIVED SLAPSTICKS

SEVERAL TIMES. ONE TIME AT YOKKAHI, I RECEIVED A VERY SEVERE

BEATING. ON BOARD SHIP, THERE WERE 1000 PRISONERS IN ONE HOLD

FOR TEN DAYS. WE HAD ONE CUPBEN OF WATER AT TWO 27 BOOBS OF RICE PER DAY.

IT WAS SO CROWDED WE HAD TO LAY DOWN TO SLEEP. WHILE AT

RYTANI, WE WERE BOMBED FOR 24-25 MINUTES I'VE BEEN THROUGH IT 15.

19. (a) Having read the requirements of the Geneva Convention of 1929 outlined above with regard to labor and/or inhumane treatment of prisoners of war, do you allege that the enemy government

which held you prisoner continually failed to comply with those requirements? YES

(Yes or no)

(b) If you believe your answer to (a) above should be "yes" for most of the period of your imprisonment, but you wish to except certain periods when you received treatment in compliance with the Geneva Convention of 1929, give dates of such periods NOVE

PART IV

20. If you have paid or agreed to pay anyone for assistance and/or advice in the presentation or filing of this claim, state names and addresses of each person or persons and the amount of the fee paid or agreed upon. (See item No. 4 of general instructions.) NO

21. If this application is being executed in behalf of an ex-prisoner of war who is incompetent or incapable of filing for himself, give your name, mailing address, and state capacity in which claim is executed NO

I CERTIFY that the foregoing statements are true and that they are made with full knowledge of the fact that penalties involving fines and imprisonment are prescribed by various statutes of the United States for making a false statement.

IF SIGNATURE MADE BY (X) MARK, WITNESSES SIGN HERE:

NOTE.—No witnesses are necessary unless this application has been signed by mark (X). If signed by mark (X), the signatures and addresses of two persons to whom the person making the claim is personally known, must be shown below:

1. _____
(Signature of witness)

_____ (Address)

2. _____
(Signature of witness)

_____ (Address)

(Signature of claimant)

(Date)

By _____

Title _____

(NOTE.—If this application is executed by a person other than the ex-prisoner of war, please sign the name of the ex-prisoner of war in the space indicated "signature of claimant," followed by your name and the capacity in which you sign.)

DO NOT FORGET TO SIGN APPLICATION

Mail application form and acknowledgment card to

WAR CLAIMS COMMISSION, WASHINGTON 25, D. C.

CLAIMS MUST BE FILED ON OR BEFORE APRIL 9, 1953