

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

14 June 1944

Date

11

293. Freda James A Sgt 15324398
Last Name First Initial Rank Serial No.
100 TR: 58 441 Trp Corp C
Unit
29th Combat Area 6 10 June 1944 Plane crash
Place of Death Date of Death Cause of Death
0800 hrs. 15 June 1944 Amer Cem # 3 La Combe
Time and Date of Burial Name of Cemetery Name or Coordinates of Location
5 1 C Stake
Grave Number Row Number Plot Number Type of Marker

Disposition of Identification Tags: Buried with body Yes No Attached to Marker Yes No

If No Identification Tags
How were remains identified?

What means of identification were buried with the body?

Identification Tag

To determine Right or Left use Deceased's Right and Left.

Who is buried on:

Deceased's Right:	<u>Kernoll, F R T</u>	<u>33414473</u>			<u>6</u>
	<small>Name</small>	<small>Serial No.</small>	<small>Rank</small>	<small>Organization</small>	<small>Grave No.</small>
Deceased's Left:	<u>Mc Gue J B</u>	<u>0-364492</u>			<u>4</u>
	<small>Name</small>	<small>Serial No.</small>	<small>Rank</small>	<small>Organization</small>	<small>Grave No.</small>

Signature or Name, Rank and if possible Organization of person furnishing above Data when other than officer reporting burial.



If print of identification tag is not affixed fill in below:

Emergency Addressee _____
Name

_____ Address

Religion Catholic

List only Personal Effects Found on Body and disposition of same:

None

Signature of Officer or other person reporting burial

E. H. Hooper 1st Lt. Ph. Res.
Verified by G.R.S. Officer

encl 43

*44-5-01
file
E.g.*

CUB
Graves Registration
Form No. 1
(Revised 1 Sept. 1943)

REPORT OF BURIAL
FORM NO. 1 AND AR 30-1815

5 May 1947
Date

943 FREDA
Last Name

JAMES
First Initial

15324398
Serial No.

441 TRP CARR GP
Unit

29th COMBAT AREA, FRANCE
Place of Death

6 JUNE 1944
Date of Death

PLANE CRASH
Cause of Death

1000 hrs 10 JUNE 1944
Time and Date of Burial

LA CAMBE
Name of Cemetery

5
Grave Number

Row Number

Stake
Type of Marker

Disposition of Identification Tags: Buried with body Yes No Attached to Marker Yes No

If No Identification Tags

How were remains identified? Previously identified as S/Sgt Archer B. HUGHES, 35681083. Identified through:

- a) Favorable comparison of tooth chart with that of Sgt FRED A.
- b) Sgt FRED A was the only deceased crew member of AC-42-101019 to be accounted for.

What means of identification were attached with the body?

- c) Subject deceased was found in the same vicinity as the other crew members of AC-42-101019.

To determine Right or Left use Deceased's Right and Left.

Who is buried on:

Deceased's Right: KERNOLL, R. T. 33414473 6
Name Serial No. Rank Organization Grave No.

Deceased's Left:

McCUE, J. B. 0-364492 4
Name Serial No. Rank Organization Grave No.

Signature of Person Reporting Burial: [Signature] Date when other than officer reporting burial: [Date]



Location oriented with Feet and Head to North. If identification tags are not affixed fill in below:

Emergency Address: Unknown
Name

Unknown
Address

Religion: Unknown

List only Personal Effects Found on Body and disposition of same:

REBURIAL

Previously interred in Plot [blank] Row 9, Grave 172, USMC, LA CAMBE



This corrected copy of Report of Burial prepared in American Graves Registration Command.

Verified by: JOSEPH E. MC GUSKEY, 1st Lt.

File
RECORDS DIVISION
59 AM '47

JLU

1

DISINTERMENT DIRECTIVE

SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
3539 01290

DATE
15 01 48
DAY MONTH YEAR

NAME FREDA JAMES A	SERIAL NUMBER 15324398	RANK SGT	ARM 1	DATE OF DEATH DAY MONTH YEAR
------------------------------	---------------------------	-------------	----------	---------------------------------

CEMETERY LA CAMBE - ISIGNY	DISPOSITION OF REMAINS 1 5300 07 CODE DIST. PT.
--------------------------------------	---

PLOT C	ROW 1	GRAVE 5	COUNTRY FRANCE	CAUSE OF DEATH 2
-----------	----------	------------	-------------------	---------------------

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE EUGENE C. WACKERLY, INC. 139 12TH STREET N.E. CANTON, OHIO	NAME AND ADDRESS OF NEXT OF KIN JEANNETTE F. FREDA (MOTHER) 2208 11TH STREET S.W. CANTON, OHIO
--	--

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME Freda, James A	SERIAL NUMBER 15324398	RANK Utd	DATE OF DEATH 6 June 1944	DATE DISINTERRED 13 Nov 1947
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION USAAF	RELIGION Utd	IDENTIFICATION VERIFIED BY WILLIAM J. SMITH 1st Lieut CE NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Uniform-Mattress Cover	CONDITION OF REMAINS Advanced Decomposition
---	---

OTHER MEANS OF IDENTIFICATION
None

MINOR DISCREPANCIES
None

REMAINS PREPARED AND PLACED IN CASKET
DATE **23 December 1947** BY **Jack B. Wall**

CASKET SEALED BY Jack B. Wall	EMBALMER (Signature) <i>Jack B. Wall</i>
---	---

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY DATE 23 Dec 47 BY Robert D. McClellan JAMES A. HOOVLER, 1st Lieut, Inf
-------------------------	---

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.

James A. Hoovler
JAMES A. HOOVLER, 1st Lieut, Inf
SIGNATURE OF GRS INSPECTOR

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM US MC La Cambe		TO Casketing Point "B"-St Laurent	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER Pfc Bertis H. Kimmel	
SIGNATURE OF SHIPPER <i>W. T. Dailey</i> W. T. DAILEY, Capt., QMC	DATE 28 Nov 47	SIGNATURE OF RECEIVER <i>Chester L. Coleman</i> Chester L. Coleman	DATE 28 Nov 47

2. SHIPPED

FROM Casketing Point "B"-St Laurent		TO Port Unit - Cherbourg	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER <i>John E. Hendry Jr</i>	
SIGNATURE OF SHIPPER <i>Chester L. Coleman</i> Chester L. Coleman	DATE	SIGNATURE OF RECEIVER <i>John E. Hendry Jr</i> JOHN E. HENDRY JR, Major, CAC	DATE

3. SHIPPED

FROM CHERBOURG POST UNIT		TO TYPE	
KIND OF CONVEYANCE USSS LAWRENCE VICTORY		NAME OF CONVOYER JOSEPH J. CARROLL, 1st Lt. MC	
SIGNATURE OF SHIPPER JOHN E. HENDRY JR. MAJ. CAC	DATE 26 April 48	SIGNATURE OF RECEIVER <i>Joseph J. Carroll</i>	DATE APR 26 1948

4. SHIPPED

FROM		TO TYPE	
KIND OF CONVEYANCE		NAME OF CONVOYER <i>James L. McKinnon</i>	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>James L. McKinnon</i> JAMES L. McKINNON COLONEL, T. C.	DATE 5/7/48

5. SHIPPED

FROM <i>James L. McKinnon</i>		TO PORT TRANSPORTATION OFFICER	
KIND OF CONVEYANCE TYPE		NAME OF CONVOYER Det 7	
SIGNATURE OF SHIPPER <i>James L. McKinnon</i> JAMES L. McKINNON COLONEL, T. C. PORT TRANSPORTATION OFFICER	DATE 5/9/48	SIGNATURE OF RECEIVER <i>William J. Bollen</i> W. J. BOLLEN PORT TRANSPORTATION OFFICER	DATE (MAY 12 1948)

6. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

7. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE
WASHINGTON 25, D. C.

REPORT OF DEATH

DATE 20 July 1944
HK/vb 4631

FULL NAME 243 <u>Freda, James A.</u>		ARMY SERIAL NUMBER <u>15,324,398</u>	GRADE <u>Sergeant</u>						
HOME ADDRESS <u>Canton, Ohio</u>		ARM OR SERVICE <u>Air Corps</u>	DATE OF BIRTH <u>5 Mar 1923</u>						
PLACE OF DEATH <u>France</u>	CAUSE OF DEATH <u>Killed in action</u>		DATE OF DEATH <u>6 Jun 1944</u>						
STATION OF DECEASED <u>European Area</u>		DATE OF ENTRY ON CURRENT ACTIVE SERVICE <u>10 Nov 1942</u>	LENGTH OF SERVICE FOR PAY PURPOSES						
			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">YEARS</td> <td style="width: 33%;">MONTHS</td> <td style="width: 33%;">DAYS</td> </tr> <tr> <td style="text-align: center;"><u>1</u></td> <td style="text-align: center;"><u>6</u></td> <td style="text-align: center;"><u>27</u></td> </tr> </table>	YEARS	MONTHS	DAYS	<u>1</u>	<u>6</u>	<u>27</u>
YEARS	MONTHS	DAYS							
<u>1</u>	<u>6</u>	<u>27</u>							
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) <u>Mr. Louis I Freda (father) 923 2nd St. N.W., Canton, Ohio</u>									
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) <u>Mr. Louis I Freda (father) 923 2nd St. N.W., Canton, Ohio</u> <u>Mrs. Jeanette Florence Freda (mother) 923 2nd St. N.W., Canton, Ohio</u>									
INVESTIGATION MADE?		IN LINE OF DUTY	OWN MISCONDUCT						
YES	NO	YES	NO						
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>						
WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE							
YES	NO	YES	NO						
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>						
IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)							
YES	NO	YES	NO						
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>						

ADDITIONAL DATA AND/OR STATEMENT

The individual named in this report of death is held by the War Department to have been in a missing in action status from 6 Jun 1944 until such absence was terminated on 12 July 1944 when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

78
file
mm

COPIES FURNISHED:		
S. G. O.	F. B. I.	P. O., U. S. A.
R. O. C. M. G.	G. P. D.	ARMY EFFECTS BUREAU
C. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. SOI FILE

BATTLE
 NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR,
John T. Winn
John T. Winn
ADJUTANT GENERAL

nw
✓

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE
WASHINGTON 25, D. C.

178134

REPORT OF DEATH

DATE 20 July 1944
HK/vb 4631

FULL NAME Freda, James A. ✓		ARMY SERIAL NUMBER 15,324,398	GRADE Sergeant
HOME ADDRESS Canton, Ohio		ARM OR SERVICE Air Corps	DATE OF BIRTH 5 Mar 1923
PLACE OF DEATH France	CAUSE OF DEATH Killed in action ✓		DATE OF DEATH 6 Jun 1944
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 10 Nov 1942	LENGTH OF SERVICE FOR PAY PURPOSES YEARS 1 MONTHS 6 DAYS 27
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mr. Louis I Freda (father) 923 2nd St. N.W., Canton, Ohio <i>deceased</i>			
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mr. Louis I Freda (father) 923 2nd St. N.W., Canton, Ohio <i>deceased</i> Mrs. Jeanette Florence Freda (mother) 923 2nd St. N.W., Canton, Ohio			
INVESTIGATION MADE?		IN LINE OF DUTY	OWN MISCONDUCT
YES	NO	YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE	IN FLYING PAY STATUS
YES	NO	YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
OTHER PAY STATUS (SPECIFY BELOW)			
YES	NO		
<input type="checkbox"/>	<input type="checkbox"/>		



ADDITIONAL DATA AND/OR STATEMENT

The individual named in this report of death is held by the War Department to have been in a missing in action status from 6 Jun 1944 until such absence was terminated on 12 July 1944 when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

COPIES FURNISHED:		
S. G. O.	F. B. I.	F. O., U. S. A.
S. O. J. M. G.	G. P. D.	ARMY EFFECTS BUREAU CASUALTY BRANCH FILE
S. J. O.	VET. ADMIN.	A. G. 201 FILE

BATTLE
 NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR
John T. Winn
John T. Winn
ADJUTANT GENERAL

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE
 WASHINGTON 25, D. C.

-BATTLE CASUALTY REPORT

NAME <i>F</i> FREDA JAMES A		SERIAL NUMBER 15324398	GRADE SGT	ARM OR SERVICE AC	REPORTING THEATRE ETO
PLACE OF CASUALTY FRANCE	DATE OF CASUALTY			FLYING OR JUMPING STAT	TYPE OF CASUALTY
	DAY 06	MONTH JUN	YEAR 44	L	KIA
					SHIPMENT NUMBER 122

NAME AND ADDRESS OF EMERGENCY ADDRESSEE

THE INDIVIDUAL NAMED ABOVE DESIGNATED THE FOLLOWING PERSON AS THE ONE TO BE NOTIFIED IN CASE OF EMERGENCY, AND THE OFFICIAL TELEGRAPHIC AND LETTER NOTIFICATIONS WILL BE SENT TO THIS PERSON. THE RELATIONSHIP, IF ANY, IS SHOWN BELOW. IT SHOULD BE NOTED THAT THIS PERSON IS NOT NECESSARILY THE NEXT-OF-KIN OR RELATIVE DESIGNATED TO BE PAID SIX MONTHS' PAY GRATUITY IN CASE OF DEATH.

MR.-MRS.-MISS MR	FIRST NAME LOUIS	MIDDLE INITIAL I	LAST NAME FREDA	RELATIONSHIP FATHER
NO. AND NAME OF STREET 923 SECOND STREET NORTH WEST		CITY CANTON	COUNTY OHIO	STATE OHIO

REMARKS:

CORRECTED COPY

EVIDENCE OF DEATH RECEIVED IN WD, 12 JULY 1944 EIB



ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED FORM 43 AG 201 REQ

CASUALTY BRANCH FILE ATTACHED OR CHARGED TO _____ DATE _____

PREVIOUSLY REPORTED: NO YES (AS INDICATED BELOW):

FILE NO.	MESSAGE NO.	TYPE	DATE AND AREA	E. A. NOTIFIED
<i>Ship. 100</i>		<i>MIA</i>	<i>6 JUNE 44 ETO</i>	<i>22 JUNE 44</i>
<i>Tel. Notif.</i>				

REPORT NOT VERIFIED NO FORM 43 NO CAS. BR. FILE CHECKED BY *Long 12 July 44* REVIEWED BY *ovels*

THIS SPACE FOR USE OF MACHINE RECORDS BRANCH, A.G.O.

ACCT. AREA	CASUALTY STATUS	ORIGINAL CAS. DATE			MESSAGE NO.	LATEST CAS. DATE			REFERENCE AREA	CREW POS.	RESIDENCE		COMP	RACE											
		DAY	MO.	YR.		DAY	MO.	YR.			STATE	COUNTY													
34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59

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| <input type="checkbox"/> AMERICAN RED CROSS | <input type="checkbox"/> CHIEF, WAR BOND OFFICE | <input type="checkbox"/> P.O.W. INFO. BUREAU, O.P.M.G. |
| <input type="checkbox"/> ARMY EFFECTS BUREAU | <input type="checkbox"/> C.G., ARMY GROUND FORCES | <input type="checkbox"/> SEAMEN'S RECORDS & WELFARE UNIT U.S.C.G. |
| <input type="checkbox"/> SST. CHIEF OF STAFF, G-1 | <input type="checkbox"/> C.G. 5 SERVICE COMMAND | <input type="checkbox"/> SOCIAL SECURITY BOARD |
| <input type="checkbox"/> BUREAU OF PUBLIC RELATIONS | <input type="checkbox"/> DIR. OF SPECIAL SERVICES DIV. | <input type="checkbox"/> SURGEON GENERAL |
| <input type="checkbox"/> CASUALTY PAY RECORDS BR., O.P.D. | <input type="checkbox"/> DIRECTOR, W.A.C. | <input type="checkbox"/> THE ADJUTANT GENERAL |
| <input type="checkbox"/> CHIEF OF ARM OR SERV. CONCERNED | <input type="checkbox"/> ENLISTED BRANCH, A.G.O. | <input type="checkbox"/> U.S. EMPLOYEE'S COMPENS. COMM. |
| <input type="checkbox"/> CHIEF OF STAFF | <input type="checkbox"/> FINANCE OFFICER, U. S. ARMY, WASH., D.C. | <input type="checkbox"/> WAR SHIPPING ADMINISTRATION |
| <input type="checkbox"/> CHRONOLOGICAL UNIT, CAS. BR. | <input type="checkbox"/> MACHINE RECORDS BRANCH, A.G.O. | <input type="checkbox"/> WILLS UNIT, CASUALTY BRANCH |
| <input type="checkbox"/> CHIEF, P.O.W. BR., M.I.S., W.D.G.S. | <input type="checkbox"/> OFFICE OF DEPENDENCY BENEFITS | |

✓ 17

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE
WASHINGTON 25, D. C.

-BATTLE CASUALTY REPORT

NAME			SERIAL NUMBER			GRADE	ARM OR SERVICE	REPORTING THEATRE	
FREDA JAMES A			15324398			SGT	AC	ETO	
PLACE OF CASUALTY			DATE OF CASUALTY			FLYING OR JUMPING STAT	TYPE OF CASUALTY	SHIPMENT NUMBER	
FRANCE			DAY	MONTH	YEAR	L	MIA	100	

NAME AND ADDRESS OF EMERGENCY ADDRESSEE

THE INDIVIDUAL NAMED ABOVE DESIGNATED THE FOLLOWING PERSON AS THE ONE TO BE NOTIFIED IN CASE OF EMERGENCY, AND THE OFFICIAL TELEGRAPHIC AND LETTER NOTIFICATIONS WILL BE SENT TO THIS PERSON. THE RELATIONSHIP, IF ANY, IS SHOWN BELOW. IT SHOULD BE NOTED THAT THIS PERSON IS NOT NECESSARILY THE NEXT-OF-KIN OR RELATIVE DESIGNATED TO BE PAID SIX MONTHS' PAY GRATUITY IN CASE OF DEATH.

MR.-MRS.-MISS	FIRST NAME		MIDDLE INITIAL	LAST NAME		RELATIONSHIP	
MR	LOUIS		I	FREDA		FATHER	
NO. AND NAME OF STREET			CITY		COUNTY		STATE
923 SECOND STREET NORTHWEST			CANTON		OHIO		

REMARKS:

CORRECTED COPY

MJJ 22 JUNE 1944



ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED FORM 49 AG 203 REQ _____
 CASUALTY BRANCH FILE ATTACHED _____ OR CHARGED TO _____ DATE _____
 PREVIOUSLY REPORTED NO YES _____ (AS INDICATED BELOW):

FILE NO.	MESSAGE NO.	TYPE	DATE AND AREA	E. A. NOTIFIED

REPORT NOT VERIFIED _____ NO FORM 49 _____ NO CAS. BR. FILE _____ CHECKED BY _____ REVIEWED BY _____

THIS SPACE FOR USE OF MACHINE RECORDS BRANCH, A.G.O.

ACCT. AREA	CASUALTY STATUS	ORIGINAL CAS. DATE			MESSAGE NO.	LATEST CAS. DATE			REFERENCE AREA	CREW POS.	RESIDENCE				COMP	RACE									
		DAY	MO.	YR.		DAY	MO.	YR.			STATE	COUNTY													
34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59

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<input type="checkbox"/> ARMY EFFECTS BUREAU
<input type="checkbox"/> ASST. CHIEF OF STAFF, G-1
<input type="checkbox"/> BUREAU OF PUBLIC RELATIONS
<input type="checkbox"/> CASUALTY PAY RECORDS BR., O.F.D.
<input type="checkbox"/> CHIEF OF ARM OR SERV. CONCERNED
<input type="checkbox"/> CHIEF OF STAFF
<input type="checkbox"/> CHRONOLOGICAL UNIT, CAS. BR.
<input type="checkbox"/> CHIEF, P.O.W. BR., M.I.S., W.D.G.S. | <input type="checkbox"/> CHIEF, WAR BOND DIVISION
<input type="checkbox"/> CHIEF, WAR BOND OFFICE
<input type="checkbox"/> C.G., ARMY GROUND FORCES
<input type="checkbox"/> C.G. SERVICE COMMAND
<input type="checkbox"/> DIR. OF SPECIAL SERVICES DIV.
<input type="checkbox"/> DIRECTOR, W.A.G.
<input type="checkbox"/> ENLISTED BRANCH, A.G.O.
<input type="checkbox"/> FINANCE OFFICER, U. S. ARMY, WASH., D.C.
<input type="checkbox"/> MACHINE RECORDS BRANCH, A.G.O.
<input type="checkbox"/> OFFICE OF DEPENDENCY BENEFITS | <input type="checkbox"/> OFFICERS BRANCH, A.G.O.
<input type="checkbox"/> P.O.W. INFO. BUREAU, O.P.M.G.
<input type="checkbox"/> SEAMEN'S RECORDS & WELFARE UNIT
<input type="checkbox"/> SOCIAL SECURITY BOARD
<input type="checkbox"/> SURGEON GENERAL
<input type="checkbox"/> THE ADJUTANT GENERAL
<input type="checkbox"/> U. S. EMPLOYEE'S COMPENS. COA
<input type="checkbox"/> WAR SHIPPING ADMINISTRATION
<input type="checkbox"/> WILLS UNIT, CASUALTY BRANCH |
|--|---|---|

QUEST FOR DISPOSITION OF REMAINS

GRADE OF DECEASED, NAME, ARMY SERIAL NUMBER AND REPORTED PLACE OF BURIAL

DATE:

Sgt. James A. Froth, 15 384 398
Plot G, Row 1, Grave 5,
United States Military Cemetery
La Coudre, France

15 July 1947

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

NOTE.—The next of kin should familiarize himself with the contents of the pamphlet, "Disposition of World War II Armed Forces Dead," before filling out this form. When the proper part of this form is filled out and properly signed by the next of kin, it should be returned to the OFFICE OF THE QUARTERMASTER GENERAL, MEMORIAL DIVISION, WAR DEPARTMENT, WASHINGTON 25, D. C., in the self-addressed postage-free envelope provided for this purpose.

If you are the next of kin or authorized representative of next of kin and desire to direct the disposition of the remains, please fill in PART I of this form.

PART I

I, Jeannette F. Frada

(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

(Please indicate relationship to the deceased by placing an "X" in the proper box.)

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> WIDOW | <input type="checkbox"/> WIDOWER | <input type="checkbox"/> SON OVER 21 YEARS OLD | <input type="checkbox"/> DAUGHTER OVER 21 YEARS OLD |
| <input type="checkbox"/> FATHER | <input checked="" type="checkbox"/> MOTHER | <input type="checkbox"/> BROTHER OVER 21 YEARS OLD | <input type="checkbox"/> SISTER OVER 21 YEARS OLD |
| <input type="checkbox"/> RELATIONSHIP OTHER THAN ABOVE (Specify) _____ | | | |

HAVING FAMILIARIZED MYSELF WITH THE OPTIONS WHICH HAVE BEEN MADE AVAILABLE TO ME WITH RESPECT TO THE FINAL RESTING PLACE OF THE DECEASED DESIGNATED ABOVE, NOW DO DECLARE THAT IT IS MY DESIRE THAT THE REMAINS: (Please place an "X" in the box opposite the option you have selected.)

1. BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS.
2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY

St. Peter's Cemetery, Canton, Ohio

(NAME AND LOCATION OF CEMETERY)

3. BE RETURNED TO _____ (FOREIGN COUNTRY), THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT _____ (LOCATION OF CEMETERY SELECTED)

4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT _____ (LOCATION OF NATIONAL CEMETERY SELECTED)

(Please indicate if your own religious services at a location other than the selected national cemetery are desired by placing an "X" in the proper box)

- YES NO

THE NAME OF THE DECEASED, THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (If no corrections are necessary, indicate this fact by inserting the word "NONE" in the space below)

10. WW 20 011 28 100

Caled. R. Jones

20 FEB 1948

FORM 100 345 MILITARY
 14 NOV 1946

16-50411-1

DEC 12

PART I (Continued)

It on Page 1 of this form you have selected Option Number 2 or 3, or Option Number 4 with your own funeral ceremonies desired at a location other than the selected national cemetery, complete one of these sections.

I, AS THE NEXT OF KIN, DO FURTHER DECLARE THAT I DESIRE THE REMAINS TO BE SENT TO THE FOLLOWING PERSON WHO HAS AGREED TO RECEIVE THEM:

LAST NAME	FIRST NAME	MIDDLE INITIAL	
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS		TELEPHONE NO.

OR

I, AS THE NEXT OF KIN, DO FURTHER DECLARE THAT I DESIRE THE REMAINS TO BE SENT TO THE FOLLOWING FUNERAL DIRECTOR WHO HAS AGREED TO RECEIVE THEM:

FULL NAME OF FUNERAL DIRECTOR Eugene C. Wackerly, Inc.			
NUMBER AND STREET 139 - 12th St. N.E.,	CITY OR TOWN Canton	COUNTY OR PROVINCE Stark	STATE OR TERRITORY OF U. S. A., OR COUNTRY Ohio
EXPRESS OFFICE (Nearest railroad passenger station) Canton, Ohio	TELEGRAPH ADDRESS Canton, Ohio		TELEPHONE NO. 55235

IN CASE OF EMERGENCY THE NAME AND ADDRESS OF THE PERSON NEXT IN LINE OF KINSHIP AFTER ME, AS SET FORTH IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," IS:

LAST NAME Freda	FIRST NAME Louis	MIDDLE INITIAL N	RELATIONSHIP TO DECEASED Brother
NUMBER AND STREET 820 High Ave. N.W.,	CITY OR TOWN Canton	COUNTY OR PROVINCE Stark	STATE OR TERRITORY OF U. S. A., OR COUNTRY Ohio

REMARKS OR ADDITIONAL INSTRUCTIONS (For additional space use page 4.)

AS EXPLAINED IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," I AM THE NEXT OF KIN AND THE INDIVIDUAL AUTHORIZED TO DIRECT THE DISPOSITION OF THE SAID REMAINS.

I, the undersigned, DO SOLEMNLY SWEAR (OR AFFIRM) that the statements made by me in the foregoing document are full and true to the best of my knowledge and belief.

✓ *Jeannette F. Freda*
(SIGNATURE OF NEXT OF KIN)
Jeannette F. Freda
(NAME PRINTED OR TYPED)

2208 - 11th St. S.W.,
(STREET AND NUMBER)
Canton, Ohio
(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 27 day of October,

1947, at city (or town) of Canton, county of Stark, and State (or Territory or

District) of Ohio

S. A. Wheeler
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)
S. A. Wheeler, Notary Public
(OFFICIAL TITLE)

*NOTE.—Page 4 is part of the notarial attestation.

My commission expires 1/21/49

IDENTIFICATION CHECK LIST

(To be completely filled out and attached to each copy
of Report of Interment WD QMC Form 1042)

Unknown ~~X~~ ARCHER B. HUGHES - 35681083

Cemetery La Cambe, France

Plot A Row 9 Grave 172

1. Arrived at cemetery Date reprocessed, 18 April 1947
(Hour) (Date)
2. Place of death _____
(Name of closest town) (Coordinates and letter prefix, maps)

(Sheet, scale and serials used)
3. Remains ~~recovered~~ or disinterred by Subordinate Identification Point Carentan, France
(Name and organization)
4. Evacuated to Cemetery by _____
(Name and organization)
5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

Item	Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear	<u>None</u> (Type)		
Raincoat	<u>None</u>		
Overcoat	<u>None</u>		
Jacket, Field	<u>None</u>		
Jacket, Combat	<u>None</u>		
Mackinaw	<u>None</u>		
Sweater	<u>None</u>		
Jacket, HBT	<u>Remnants of</u>		
* Shirt, Wool OD	<u>Remnants of</u>		
Undershirt, Wool	<u>Remnants of</u>		
Undershirt, Cotton	<u>None</u>		
Trousers, HBT	<u>None</u>		
* Trousers, Wool OD	<u>None</u>		

Belt, web **None**

Drawers, wool **None**

Drawers, cotton **None**

Leggings, wool **None**

Socks, cotton **None**

* Shoes (type) **None**

Overshoes **None**

Web Equipment (type) **None**

(Other item) **None**

(Other item) **None**

* If body is nude, sizes of these items should be computed by measuring the remains

Chevrons or
Insignia **None**
(Type & location; shirt, jacket, coat, helmet)

Shoulder Patch **None**

Does clothing indicate that deceased was a member of the Air, Ground or Naval Force?
UTD

6. Description of Remains :

Age **UTD** Height **UTD** Weight **UTD** Description of wounds **UTD**

Bandages or dressings **UTD** Scars **UTD**
(Length, width, location)

..... **UTD** Tattoos
(Number, location -- illustrate on separate page)

Outstanding moles, warts or birthmarks **UTD**
(Yes-no; description, location)

Sunburn or tan, other than hand and face **UTD**

Complexion **UTD**
(Light, medium, dark, clear, pimples, poeks, freckles)

Build **UTD**
(Large, fat, thin, muscular)

Hair **Black, 1 inch, long, wavy**
(Color, length, quantity, curly, wavy, straight, whorls, or definite parting)

Hair **UTD**
(Baldness, widows peak, distinctive cutting or other characteristics)

Sideburns **UTD** Mustache **UTD** Beard or **UTD**
(Color, setting, shape) (Color, size, shape) (Length, heavy)

Goatee UFD
(Light, color, extent)

Eyes UFD Eyebrows UFD
(Color, setting, shape) (Color, bushiness, extent across nose)

Nose UFD Ears UFD
(Size, shape, straight) (Size, set close to or far from head)

Mouth UFD Lips UFD
(Large, medium, small) (Small, large, full)

Teeth See tooth chart
(White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin UFD
(Prominent, receding, pointed, dimples, double)

Jaw UFD Circumference of head in inches fractured
(Large, small, normal) (Hat band)

Neck UFD Larynx UFD
(Size, length, short, normal, wrinkled) (Prominent, normal)

Shoulders UFD Arms UFD
(Broad, straight, small, rounded) (Length, muscular, color, extent and quantity of hair)

Hands UFD

Fingers UFD
(Short, thick, long, slender, size of knuckles, missing fingers or joints)

(Unusual characteristics of fingernails)

Chest UFD
(Size of nipples, color, quantity and extent of hair, large, small, normal)

Waist UFD
(Size of navel, appendectomy, amount, quantity, and color of hair)

Back UFD Circumcision UFD Pubic Hair Brown
(Quantity and extent of hair) (Yes-no) (Color)

Hernioplasty UFD
(Yes-no; location)

Legs UFD
(Inseam, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

Feet UFD Toes UFD
(Size, corns, callouses, flat) (Slender, straight, crooked, overlap)

Evidence of healed fractures None found
(Nose, arms, legs, etc.)

NOTE: Use attached charts "A" and "B" to indicate parts not received.

7. Have finger prints been placed on Report of Interment? No (Yes-no)

Hands missing

If not, explain _____

8. Has tooth chart been prepared? Yes If not, explain _____
(Yes-no)

9. Remarks Remains received in skeletal form, wrapped in wool OD. blanket. All long bones are fractured. Measurements impossible. Remnants of clothing found in debris. No clothing marks found. No burial Report found. Fluoroscopic Examination; Negative. Estimated weight of remains recovered; 20 Lbs. No contradictory evidence found, deceased remains; "ARCHER B. HUGHES-35681089." Nothing found to warrant Chemical Laboratory Examination.

I certify that I have personally viewed the remains of subject deceased and all resulting information has been recorded to the best of my knowledge.

Ellsworth T. Mac Intyre
ELLSWORTH T. MAC INTYRE

(Officer's Name)

Captain

QMC.

Rank

Service

Central Identification Point
(Organization)

La Cambe, France
Plot A, Row 9, Grave 172

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

ARCHER B. HUGHES
35681089

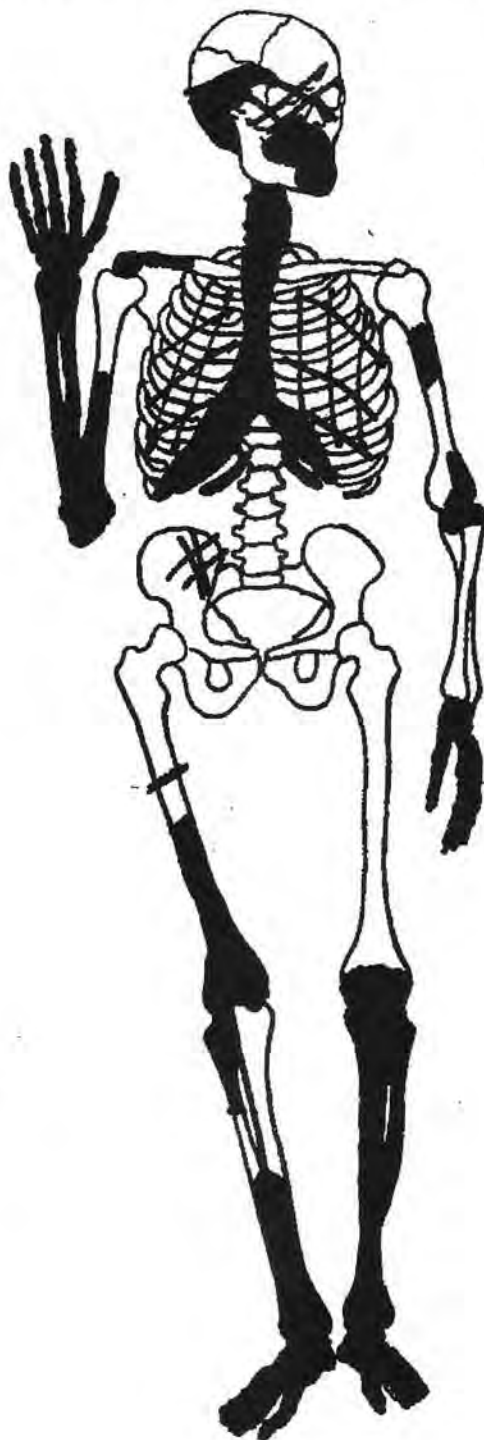


CHART "A"

IDENTIFICATION CHECK LIST

(To be completely filled out and attached to each copy
 of Report of Interment WD QMC Form 1042)

~~FREDA, JAMES A.~~
~~13321096~~

Unknown X
 Cemetery La Cambe, France
 Plot G Row 1 Grave 5

1. Arrived at cemetery date reprocessed, 17 April 1947
(Hour) (Date)
2. Place of death _____
(Name of closest town) (Coordinates and letter Prefix, maps)
(Sheet, scale and serials used)
3. Remains ~~recovered~~ disinterred by subordinate Identification Point Carentan, France
(Name and organization)
4. Evacuated to Cemetery by _____
(Name and organization)
5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

Item	Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear	<u>None</u> <small>(Type)</small>		
Raincoat	<u>None</u>		
Overcoat	<u>None</u>		
Jacket, Field	<u>None</u>		
Jacket, Combat	<u>None</u>		
Mackinaw	<u>None</u>		
Sweater	<u>None</u>		
Jacket, HBT	<u>None</u>		
* Shirt, Wool <u>OD</u>	<u>Remnants of officer's pink</u>		
Undershirt, Wool	<u>Remnants of</u>		
Undershirt, Cotton	<u>Remnants of</u>		
<u>Coveralls</u>			
<u>Trousers, HBT</u>	<u>Remnants of</u>		
* Trousers, <u>Wool OD</u>	<u>Remnants of officers pink. *The name (wheeler) and number 1161*</u>		

Rec'd
 1st and 2nd Hq
 AGRC
 7 May 47
 Attached Rep of Burial

Belt, web Remnants of

Drawers, wool Remnants of, size 32

Drawers, cotton Remnants of (Marking - W-1161 and KEV)

Leggings, ~~wool~~ (CANVAS) Remnants of

Socks, ~~seton~~ Remnants of, wool

* Shoes G.I. (left-right)(type) Service, Size 8 1/2 C.

Overshoes None

Web Equipment None (type)

(Other item) Remnants of wool OD. blanket. Remnants of Gas mask cover

(Other item)

* If body is nude, sizes of these items should be computed by measuring the remains

Chevrons or
 Insignia Air Force insignia on collar of shirt and 2nd Lt. bar
(Type & location; shirt, jacket, coat, helmet)

Shoulder Patch Air Corps on shirt

Does clothing indicate that deceased was a member of the Air, Ground or Naval Force?

6. Description of Remains :

Age UTD Height UTD Weight UTD Description of wounds UTD

Bandages ~~or dressings~~ rem. of Gause Scars UTD
(Length, width, location)

UTD Tattoos
(Number, location -- illustrate on separate page)

Outstanding moles, warts or birthmarks UTD
(Yes-no; description, location)

Sunburn or tan, other than hand and face UTD

Complexion UTD
(Light, medium, dark, clear, pimples, poeks, freckles)

Build UTD
(Large, fat, thin, muscular)

Hair Black, wavy 3 inches long
(Color, length, quantity, curly, wavy, straight, whorls, or definite parting)

Hair UTD
(Baldness, widow's peak, distinctive cutting or other characteristics)

Sideburns UTD Mustache UTD Beard or UTD
(Color, setting, shape) (Color, size, shape) (Length, heavy)

Goatee **UTD** (Light, color, extent)

Eyes **UTD** (Color, setting, shape) Eyebrows **UTD** (Color, bushiness, extent across nose)

Nose **UTD** (Size, shape, straight) Ears **UTD** (Size, set close to or far from head)

Mouth **UTD** (Large, medium, small) Lips **UTD** (Small, large, full)

Teeth **See tooth chart** (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin **UTD** (Prominent, receding, pointed, dimples, double)

Jaw **UTD** (Large, small, normal) Circumference of head in inches **20 3/4 inches** (Hat band)

Neck **UTD** (Size, length, short, normal, wrinkled) Larynx **UTD** (Prominent, normal)

Shoulders **UTD** (Broad, straight, small, rounded) Arms **UTD** (Length, muscular, color, extent and quantity of hair)

Hands **UTD**

Fingers **UTD** (Short, thick, long, slender, size of knuckles, missing fingers or joints)

(Unusual characteristics of fingernails)

Chest **UTD** (Size of nipples, color, quantity and extent of hair, large, small, normal)

Waist **UTD** (Size of navel, appendectomy, amount, quantity, and color of hair)

Back **UTD** (Quantity and extent of hair) Circumcision **UTD** (Yes-no) Pubic Hair **light brown** (Color)

Hernioplasty **UTD** (Yes-no; location)

Legs **UTD** (Inseam, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

Feet **UTD** (Size, corns, callouses, nail) Toes **UTD** (Slender, straight, crooked, overlap)

Evidence of healed fractures **None found** (Nose, arms, legs, etc.)

NOTE: Use attached charts "A" and "B" to indicate parts not received.

Have finger prints been placed on Report of Interment? **No** (Yes-no)

If not, explain **decomposed**

8. Has tooth chart been prepared? **Yes** If not, explain (Yes-no)

9. Remarks **Remains recovered in an advanced stage of decomposition, wrapped in a mattress cover. Clothing indicated Air Force. Clothing was found on the body. Clothing marks "E-E-W" and "W-1161" on white cotton underdrawers. Number "1161" and name "WINKLER" found on waist-band of trousers. Air Corps insignia. Pilot's wings found in clothing. One (1) ID. tag found in debris with name; "James A. FREDA - 15324998" and one found on back of dress. Air Corps shoulder patch on shirt. 2nd Lt. Bar found on collar of shirt. No burial Report found. Estimated weight of remains; 90 lbs. Fluoroscopic Examination; Negative. Evidence found conflicts with ID. tags, since these remains were dressed in officer's clothing and bore different numbers, than those appeared on the ID. tags. Nothing found to warrant Chemical Laboratory Examination.**

I certify that I have personally viewed the remains of subject deceased and all resulting information has been recorded to the best of my knowledge.

Ellsworth T. Mac Intyre
ELLSWORTH T. MAC INTYRE

(Officer's Name)

Captain

QMS.

Rank

Service

Central Identification Point

(Organization)

La Coudre, France
Plot C, Row 1, Grave 5

SKELETAL CHART

James A. FREDA
15324398

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

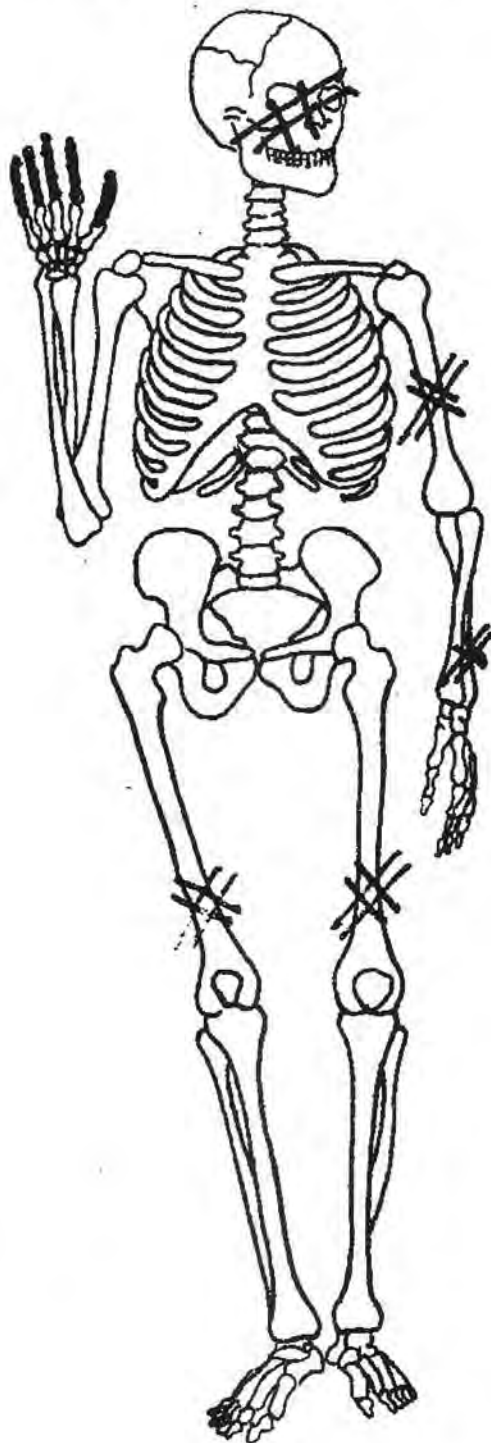


CHART "A"

TOOTH CHART

ARCHER B. HUGHES
 95681083

La Cambe A-7-172

18 April 1947

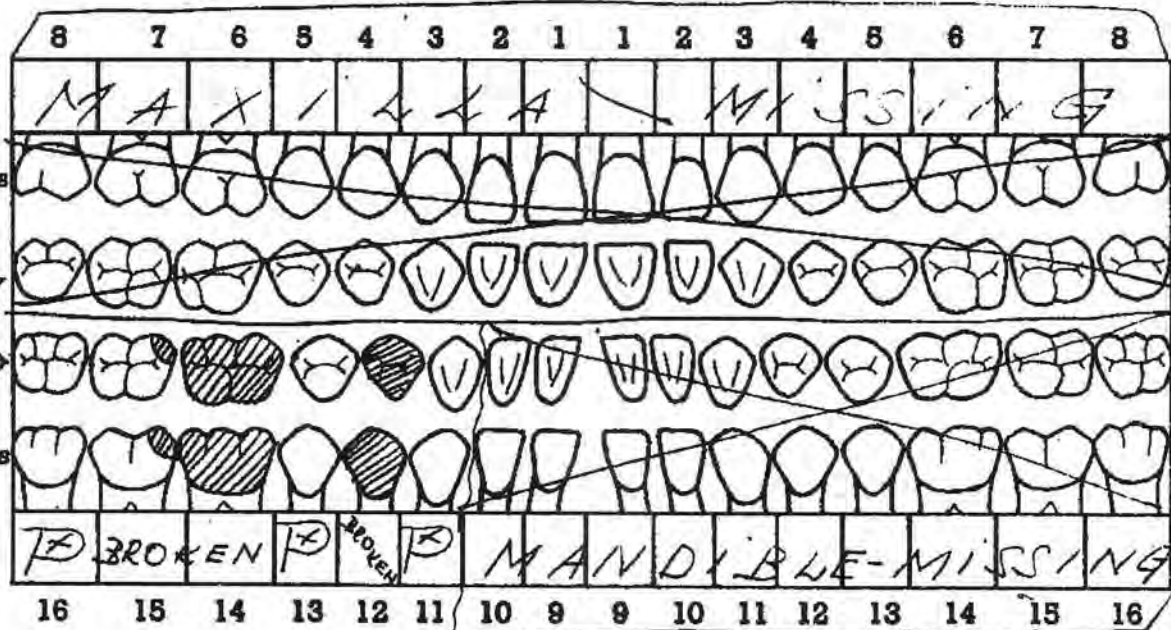
Date

Last Name	First	Initial	Rank	Serial No.
Unit		Organization		

Place of Death	Date of Death	Cause of Death
----------------	---------------	----------------

Right

Left



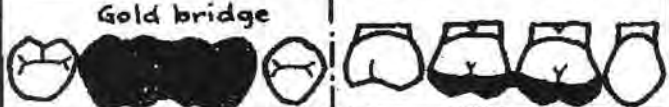

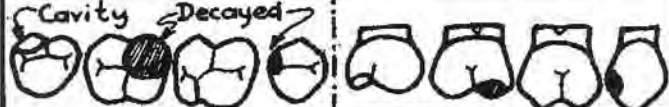


See remarks

This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

Edward Sebastian (Signature)
 Signature of officer or other person who prepared Tooth chart
 ELLSWORTH T. MAC INTYRE, Captain GMS. C.I.P.

Verified by G. R. & E. Officer

<p>MISSING TEETH... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :</p>	
<p>CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :</p>	
<p>BRIDGE WORK... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :</p>	
<p>FILLINGS... Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus :</p>	
<p>CARIES (CAVITIES)... Outline location and size of cavity, shade in thus :</p>	

DENTURES (PLATES)... Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

ADDITIONAL SPACE FOR FURTHER REMARKS

- Posthumously missing, P11, 13, 16 (possibly unerupted from appearance of socket).
- Teeth burned off as indicated by shading.
- Medium sized tooth blackened by fire.
- Mandible charred by fire.

RRE Form #39
13 Jul 48

Attached hereto correspondence and/or other identifying media of possible archival value, pertaining to:

FREDA JAMES A SGT 15324398
(Last Name) (First Name) (Initial) (Rank) (ASN)

Repatriated to the United States: 28 April 1948

Incl # 174

STAMP

Processed remains designated as
HUGHES, Archer B. 35681083 interred
in USMC La Cambe A-9-172 were reidentified
as FRED A, James A. 15324398 and were
reburied in USMC La Cambe C-1-5.

WORLD WAR II DECEASED

DUPLICATE

JUN 1 2 1948 LIST

CHECK TYPE REQUIRED
(See Instructions attached)

- UPRIGHT MARBLE HEADSTONE
 FLAT MARBLE MARKER
 FLAT GRANITE MARKER
 BRONZE MARKER (NOTE RESTRICTIONS)

APPLICATION FOR HEADSTONE OR MARKER

(Please make out and return in duplicate)

ENLISTMENT DATE
November 10th 1942
 DISCHARGE DATE
KIA June 6, 1944

SERIAL No.
15324398
 PENSION No.

EMBLEM (Check one)
 CHRISTIAN
 HEBREW
 NONE

NAME (Last, First, Middle Initial)

Freda, James A

STATE
Ohio RANK
Sgt

COMPANY

U. S. REGIMENT, STATE ORGANIZATION, AND DIVISION

USAAF

DATE OF BIRTH (Month, Day, Year)

DATE OF DEATH (Month, Day, Year)

March 5, 1923

June 6, 1944

NAME OF CEMETERY

St. Peter's

LOCATION (City and State)

Canton, Ohio

SHIP TO (I CERTIFY THE APPLICANT FOR THIS STONE HAS MADE ARRANGEMENTS WITH ME TO TRANSPORT THE STONE FROM THE FREIGHT STATION TO THE CEMETERY)

**Eugene C. Wackerly, Inc. Funeral Home
 139 - 12th St. N. E. Canton 4, Ohio**

NEAREST FREIGHT STATION (City and State)
**Pennsylvania R.R.
 Canton, Ohio**

POST OFFICE ADDRESS OF CONSIGNEE

139 - 12th St. N. E. Canton 4, Ohio

DO NOT WRITE HERE

FOR VERIFICATION

JUN 1 1948

ORDERED

W/L

SHIPPED

I certify this application is submitted for a stone for the unmarked grave of a veteran.
 I hereby agree to assume all responsibility for the removal of the stone promptly upon arrival at destination, and properly place it at the decedent's grave at my expense.

Veronette F. Freda
 APPLICANT'S SIGNATURE

May 29, 1948

DATE OF APPLICATION

ADDRESS (Street, City and State)
2208 - 11th St. S. W. Canton 6, Ohio

For Ord. 3 AUG 9 1948

RECEIPT OF REMAINS

DISTRIBUTION CENTER

COLUMBUS GENERAL DISTRIBUTION DEPOT COLUMBUS 15 OHIO

ROUTINE 26 MAY 1948

REMAINS CONSIGNED TO: EUGENE C WACKERLY INC
139 12TH STREET N E
CANTON OHIO

FROM QMDCG _____ BARDEN

REMAINS OF THE LATE SGT JAMES A FRED A ASN 15324398 BEING
SHIPPED TO YOU ACCOMPANIED BY MILITARY ESCORT ON TRAIN NO
625-34 PENNSYLVANIA RAILROAD LEAVING COLUMBUS OHIO 3:05 AM
TWENTY SIX MAY AND DUE TO ARRIVE CANTON OHIO 7:40 AM RAILROAD
TIME TWENTY SIX MAY. REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT
REMAINS AT STATION UPON ARRIVAL AND THAT YOU IMMEDIATELY PASS
THIS INFORMATION ON TO NEXT OF KIN

I, THE UNDERSIGNED, DO HEREBY ACKNOWLEDGE RECEIPT OF THE REMAINS OF THE ABOVE-NAMED DECEASED

THIS 26th DAY OF May, 19 48

Sgt. Quentin R. Ball, AFTR 35046552
WITNESS (Escort)

Eugene C. Wackerly Inc
CONSIGNEE
Paul E. Hummel

*File.
now
Records unreported
21 July 48
no search
AKM*

ORIGINAL ORDER

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.UPRIGHT MARBLE HEADSTONE
For ALL VETERANS EXCEPT those of the
CIVIL & SPANISH-AMERICAN WARS

Below you will find a copy of the inscription taken from the OFFICIAL RECORDS as it will appear on the headstone you ordered. CHECK IT CAREFULLY before the headstone is manufactured. Check the INSCRIPTION, NAME AND LOCATION OF CEMETERY. Check with CEMETERY OFFICIALS and make sure a government marble headstone will be allowed at grave. Check NAME AND ADDRESS OF THE PERSON to whom headstone is to be shipped. After you have CORRECTED ANY ERRORS, sign and return promptly in the inclosed envelope which requires no postage.

UNTIL YOU RETURN THIS SLIP THE MARBLE HEADSTONE CANNOT BE ORDERED. DO NOT DELAY-SIGN & RETURN TODAY.

INSCRIPTION: LATIN CROSS

JAMES A FREDA / OHIO / SGT AIR CORPS / WORLD WAR: 11 /
MARCH 5 1923 / JUNE 6 1944

SHIP TO: EUGENE C WACKERLY, INC
FUNERAL HOME
139 - 12TH STREET, N E
CANTON 4
FOR: OHIO

R. R. STATION:

R. R. STATION:

JUL 21 1948

APPLICANT: JEANNETTE F FRED A
2208 - 11TH ST S W
CANTON 6
OHIO

CEMETERY: ST PETER'S
CANTON
OHIO

OQMG FORM 311
Rev. 1 NOV. 45

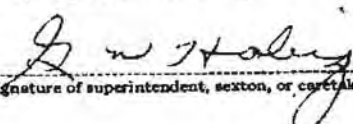
APPROVAL AND ACCEPTANCE

Mrs Jeannette F. Freda
/SIGNATURE

AUG 9 1948 PW
7-10-48

I HEREBY CERTIFY that the type headstone or marker requested by the applicant will be permitted at the grave.

(Be sure you have noted what type is indicated by applicant on form)



(Signature of superintendent, sexton, or caretaker)

Date

May 29, 1948

16-11453-4

Return to: OFFICE OF THE QUARTERMASTER GENERAL,
MEMORIAL DIVISION,
WASHINGTON 25, D. C.

MESSAGEFORM

MESSAGE CENTER No.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT
CALLS V	STA. SER. No. NR	PRECEDENCE 11
TRANSMISSION INSTRUCTIONS		ORIGINATOR
ACTION	INFORMATION	EXEMPT
OPERATING SIGNALS		GROUP COUNT OR

FROM: (Originator)

ACTION TO:

JEANNETTE F FREDA
DLR AND REPORT ANY CHANGES
2208 11TH STREET S. W.
CANTON OHIO

SECURITY CLASSIFICATION

GOVT PD

PRECEDENCE FOR
 ACTION INFORMATION
DAY LETTER

ORIGINAL MESSAGE

REFERS TO ANOTHER MESSAGE
 IDENTIFICATION CLASSIFICATION

INFORMATION TO: FROM QMDCG 136910 PARPE

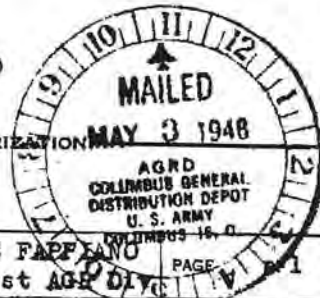
THIS HEADQUARTERS HAS BEEN ADVISED THAT THE REMAINS OF LATE **SERGEANT**
JAMES A FREDA

ARE ENROUTE TO THE UNITED STATES. RECORDS OF THIS OFFICE INDICATE YOU WISH REMAINS
 DELIVERED TO **EUGENE C WACKERLY INC. 139 12TH STREET N. E.**
CANTON, OHIO

PLEASE INSTRUCT FUNERAL DIRECTOR TO ACCEPT REMAINS AT RAILROAD STATION UPON
 ARRIVAL. WE REGRET IT IS NOT POSSIBLE AT THIS TIME TO GIVE YOU A DEFINITE
 DELIVERY DATE HOWEVER THREE DAYS PRIOR TO SHIPMENT FROM THIS DEPOT YOUR FUNERAL

DIRECTOR WILL BE NOTIFIED BY TELEGRAM OF RAIL ROUTING AND SCHEDULED TIME REMAINS
 WILL ARRIVE AT RAILROAD STATION. HE WILL BE REQUESTED TO PASS THIS INFORMATION
 TO YOU SO THAT YOU MAY MAKE FUNERAL ARRANGEMENTS. REMAINS WILL BE ACCOMPANIED BY
 MILITARY ESCORT. WITHIN 48 HOURS OF DATE OF THIS MESSAGE PLEASE CONFIRM BY
 TELEGRAM COLLECT TO COLUMBUS GENERAL DISTRIBUTION DEPOT COLUMBUS OHIO ABOVE
 DELIVERY INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS. PLEASE BE ADVISED THAT
 IT WILL NOT BE POSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES
 IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF THE 48 HOUR PERIOD.
 YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY.
 IF YOU SHOULD DESIRE MILITARY HONORS AT FUNERAL YOU SHOULD ASK ANY LOCAL PATRIOTIC
 OR VETERANS ORGANIZATION TO MAKE ARRANGEMENTS. PLEASE INCLUDE FULL NAME OF
 DECEASED IN REPLY TELEGRAM. NOTIFY THIS OFFICE OF PATRIOTIC OR VETERANS
 ORGANIZATION SELECTED BY YOU TO FURNISH MILITARY HONORS.

BOWMAN CG COLUMBUS GENERAL DISTRIBUTION DEPOT COLUMBUS OHIO



SECURITY CLASSIFICATION	SIGNATURE	AUTHORIZATION
ORIGINATING AGENCY	DATE-TIME GROUP	OFFICIAL TITLE
SYMBOL	DATE-TIME GROUP	OFFICIAL TITLE
		FRANCIS FAPFANO CAPT, QMC, Asst AGO DIV

02113 25 GOVT COLLECT

CANTON OHIO MAY 5 1950

PRIORITY DOMESTIC

RETEL CONFIRMING SHIPPING OF REMAINS OF SGT JAMES A. FREDA

PLEASE SMIP IN CARE OF EUGENE J. WAKCELBY INC FUNERAL HOME

NO MILITARY FUNERAL

JEANNETTE F. FREDA

10430

INSPECTION CHECKLIST
(FOR USE AT DISTRIBUTION CENTER)

NAME Freda, James A	RANK Sgt	SERIAL NUMBER 15324398
--------------------------------------	---------------------------	---

SOURCE	CONSIGNEE Eugene C. Wackerly, Inc. 139 12th Street N. E. Canton, Ohio
---------------	--

SHIPPING CASE - GENERAL APPEARANCE (CHECK ONLY DISCREPANCIES)	CONDITION OF SHIPPING CASE (CHECK ONE) <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY
---	--

FINISH (EXTERIOR)	REMARKS
FINISH (INTERIOR)	
HANDLES	
HANDLE BOLTS	
STENCILING - NAMEPLATE	
HEALTH PERMIT MARKER	
HEALTH PERMIT NUMBER	

CASKET - GENERAL APPEARANCE (CHECK ONLY DISCREPANCIES)	CONDITION OF CASKET (CHECK ONE) <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY
--	---

FINISH (EXTERIOR)	REMARKS
HANDLES AND FASTENINGS	
STENCILING - NAMEPLATE	
CAM LOCKS (SEALING)	
ODOR OR MOISTURE	

Routed Through

<input type="checkbox"/> MORTUARY OPERATING ROOM	<input type="checkbox"/> MORTUARY REPAIR SHOP
--	---

CONDITION OF REMAINS <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY	CASKET REPAIRED <input type="checkbox"/> YES <input type="checkbox"/> NO	
NECESSARY DISINFECTION (EXPLAIN)	CASKET EXCHANGED <input type="checkbox"/> YES <input type="checkbox"/> NO	
	SHIPPING CASE REPAIRED <input type="checkbox"/> YES <input type="checkbox"/> NO	
	SHIPPING CASE EXCHANGED <input type="checkbox"/> YES <input type="checkbox"/> NO	
	REMARKS	

TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTOR
-------------	-------------	-------------------------------	-------------	-------------	-------------------------------

REMARKS

11/2/21

CERTIFICATE

(AR 30-1830)

WORLD WAR II DECEASED

1. FILL IN EITHER PART A OR PART B; NOT BOTH.
2. USE PART A WHEN INTERMENT IS IN A CIVILIAN OR PRIVATE CEMETERY.
3. USE PART B WHEN REMAINS ARE DELIVERED TO HOME OR OTHER PLACE PRIOR TO BURIAL IN A NATIONAL OR POST CEMETERY.

PART A - CIVILIAN OR PRIVATE CEMETERY

A	REQUEST FOR REIMBURSEMENT OF INTERMENT EXPENSES		
(PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)			
NAME OF DECEDENT James A. Freda	GRADE Sgt	SERIAL NUMBER 15324398	COMPONENT Air Corps
I certify that the sum of \$ 121.80 was paid by me from personal funds in connection with the interment of the remains of the above named decedent in the below named cemetery.			
INSERT NAME OF CEMETERY St. Peter's	CITY OR COUNTY Canton	STATE Ohio	
INSTRUCTIONS TO PERSON SIGNING THIS FORM 1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR. 2. Return four copies to: (Return Original and 3 Copies) to: AMERICAN GRAVES REGISTRATION DIVISION COLUMBUS GENERAL DISTRIBUTION DEPOT COLUMBUS 16, OHIO	SIGNATURE OF CLAIMANT <i>Jeanette J. Freda</i>		
	ADDRESS OF CLAIMANT (City, Street or RFD, and State) 2208 - 11th St. S. W. Canton 6, Ohio		
RELATIONSHIP TO DECEDENT Mother			DATE 26 May 1948

PART B - NATIONAL OR POST CEMETERY

B	REQUEST FOR REIMBURSEMENT OF TRANSPORTATION EXPENSES		
(PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)			
NAME OF DECEDENT	GRADE	SERIAL NUMBER	COMPONENT
I certify that the sum of \$ _____ was paid by me from personal funds in connection with the transportation of the remains of the above named decedent from and to the following places: 3869			
INSERT CITY OR TOWN (OR ADDRESS NOT IN A CITY OR TOWN) FROM WHICH REMAINS WERE SHIPPED	INSERT NAME AND LOCATION OF NATIONAL OR POST CEMETERY TO WHICH REMAINS WERE SHIPPED		
INSTRUCTIONS TO PERSON SIGNING THIS FORM 1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR. 2. Return four copies to:	SIGNATURE OF CLAIMANT <i>Jeanette J. Freda</i>		
	ADDRESS OF CLAIMANT (City, Street or RFD, and State) 2208 11th St. S.W. Canton, Ohio		
RELATIONSHIP TO DECEDENT <i>Mother</i>			DATE 29 May 1948

EXPLANATION OF PART A - CIVILIAN OR PRIVATE CEMETERY

1. When the remains are delivered for interment in a civilian or private cemetery, you are responsible for paying all interment expenses. In this connection, you are entitled to the allowance mentioned in paragraph 2 below.

2. An amount not to exceed \$75 is allowed by the government toward actual interment expenses when final interment of the remains is in a private or civilian cemetery. No allowance is authorized toward interment expenses when interment is in a national or post cemetery.

3. The \$75 maximum allowance by the government toward interment expenses includes but is not limited to the payment of one or more of the following items: hearse hire from the railroad station to your home, the funeral home, church, cemetery, or any other place designated by you; vault; church services; newspaper notices; transportation for friends and relatives to and from cemetery; and the services of a funeral director.

4. Reimbursement by the government is made only to the person who paid from his personal funds the expenses of or incident to interment in a private or civilian cemetery. Receipted bills are not required to accompany this form. Any expenses over and above the \$75 maximum must be borne by the person who incurred or paid the additional expenses.

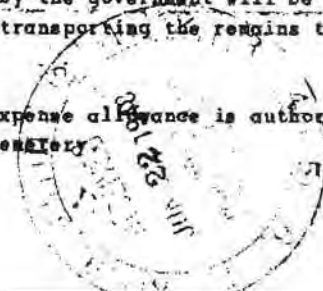
EXPLANATION OF PART B - NATIONAL OR POST CEMETERY

1. When the remains are delivered to you at government expense prior to burial in a national or post cemetery, you are responsible for all additional expenses necessary to deliver the remains from that point to the national or post cemetery grave site. However, you may be entitled to an allowance for the cost of transporting the remains from your home to the national or post cemetery grave site subject to the conditions outlined in paragraph 2, below.

2. Reimbursement of transportation expenses is allowed only when the cost to the government to deliver the remains to you is LESS than what it would have cost the government to deliver the remains direct to the national or post cemetery of final interment. However, the amount which you may be allowed (the difference between cost of delivery to you and cost of delivery by the government direct to the national or post cemetery) may not exceed the amount actually expended by you to deliver the remains to the cemetery grave site. WHETHER OR NOT YOU WILL BE GRANTED AN ALLOWANCE IS DEPENDENT UPON AN AUDIT OF THIS REQUEST. IN ANY EVENT YOU WILL BE NOTIFIED OF ANY ALLOWANCE DUE YOU BY THE OFFICE TO WHICH THIS FORM IS SENT.

3. Reimbursement by the government will be made only to the person who paid from his personal funds for transporting the remains to the national or post cemetery grave

interment expense allowance is authorized since interment is made ultimately in a national or post cemetery



DEPARTMENT OF THE ARMY
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

IN REPLY REFER TO WAGMH 293

Freda, James A.
SN 15 324 398

at

Att. Log...
↓

16 June 1948

Eugene C. Wackerly, Inc. Funeral Home
139 12th Street, N.E.
Canton 4, Ohio

Gentlemen:

This office is in receipt of an application for a Government stone to mark the grave of the late James A. Freda, who died 6 June 1944.

The applicant has requested the stone be shipped direct to you. Before shipping the stone this office desires to know if arrangements have been made with you by the applicant regarding the removal of the stone and erection at the grave of the decedent.

Upon assurance from you that the stone will be removed promptly from the freight station upon arrival, steps will be taken to place the order with the contractor. Unless such assurance is given the stone will not be ordered, as the Government is not responsible for storage charges which accrue when stones are not promptly removed from freight stations.

Further action toward ordering this stone is suspended until your reply is received.

A return envelope is inclosed for your reply.

Sincerely yours,



G. I. RUTH
Memorial Division

Incl
env

FILE 12 JUL 1948
↓
Ruth
178

We assume the responsibility of removing head stone from railroad station and see that its erected at cemetery.

EUGENE C. WACKERLY INC. FUNERAL HOME

BY: Eugene C. Wackerly
President & Treasurer

CORRESPONDENCE ACTION SLIP

NAME		SERIAL NUMBER	INITIALS	DATE
Freda, James A.		1532449	L.M.O.	6-9-48
NAME OF DECEDENT	ADDRESS	IDENTIFYING DATA	LETTER TO:	
BRONZE	NO UPRIGHT GRANITE	CONSIGNEE		
DISHONORABLE-DRAFT	NOT PERMANENTLY INTERRED	NOT RECOVERED		
CEMETERY REGULATIONS	AGO	MARINE		
NAVY	COAST GUARD	VETERANS ADMINISTRATION		
STATE PENSION	AUTHORIZED INSCRIPTION	ADDITIONAL INSPECTION		
APPLICATION FOR PROOF	NO AGENT	NO STATION		
DUE TO DISTANCE	UNCLAIMED	BROKEN		
DAMAGED	CERTIFICATE IN LIEU	LOST		
FOREIGN	TRUCK	RESHIPMENT		

FILE 18 JUL 1948
 R. M. Fields
 Clerk

DEPARTMENT OF THE ARMY
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

IN REPLY REFER TO ~~CMH-293~~

Freda, James A.
SN 15 324 398

MB

16 June 1948

Eugene C. Wackerly, Inc. Funeral Home
139 12th Street, N.E.
Canton 4, Ohio

Gentlemen:

This office is in receipt of an application for a Government stone to mark the grave of the late **James A. Freda, who died 6 June 1944.**

The applicant has requested the stone be shipped direct to you. Before shipping the stone this office desires to know if arrangements have been made with you by the applicant regarding the removal of the stone and erection at the grave of the decedent.

Upon assurance from you that the stone will be removed promptly from the freight station upon arrival, steps will be taken to place the order with the contractor. Unless such assurance is given the stone will not be ordered, as the Government is not responsible for storage charges which accrue when stones are not promptly removed from freight stations.

Further action toward ordering this stone is suspended until your reply is received.

A return envelope is inclosed for your reply.

Sincerely yours,

G. L. RUTH
Memorial Division

hs
Incl
env

hs

M

2.93
QMGMM 295 Freda, James A. 1st Ind LWS/ms/205/304
ASN 15 324 398
Army Finance Center, Office of the Chief of Finance, St. Louis 20, Mo.

JUL 6 1947

TO: The Quartermaster General, Washington 25, D. C.

Army Finance Center records indicate the following recipients of arrears of pay and death gratuity pay for the above decedent:

ARREARS OF PAY

Jeanette F. Freda and
Louis I. Freda (parents)
923 Second Street NW
Canton, Ohio

DEATH GRATUITY PAY

Louis I. Freda (father)
923 2nd Street NW
Canton, Ohio

FOR THE COMMANDING OFFICER, AFC:

S. H. Smith
S. H. SMITH
Lt Col, FA
Finance Officer



File
July 47
HAB
Capt Terry
amc

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON, 25, D. C.

In Reply Refer To
QMGAR 293
Freda, James A.
SN 15 324 398

11 APR 1947

SUBJECT: Address of Legal Next of Kin of Deceased Veteran

TO: Army Finance Center, OCF
Correspondence Section
Special Settlement Accounts Division
Pay Settlements Branch
Building 205
St. Louis 20, Missouri

1. Records on file in this office indicate that **Mr. Louis I. Freda, father, 1354 Reslyn Avenue, Southwest, Canton, Ohio,** is the legal next of kin of:

NAME: Freda, James A.

RANK: Sergeant

SERIAL NO: 15 324 398

2. It is requested that this office be furnished the latest address and relationship of the legal next of kin, and any other relatives of the deceased veteran mentioned above.

3. In case the next of kin is not as indicated above, request copies of such documentary evidence as may have been submitted to your office to establish this relationship.

FOR THE QUARTERMASTER GENERAL:

Martin G. Riley, Major
for **J. B. COLSON**
Colonel, QMG
Memorial Division

293 / Lt. S. European
(Sheet)

Basic Ltr., OCMG, OCMG 293 (La Cambre, France) dtd 2 April 47,
Subj: Maintenance and Reprocessing of Remains.

RRK 293.8 1st Ind.

Hq., American Graves Registration Command, European Theater
Area, APO 58, U. S. Army, 2 May 1947

TO: The Quartermaster General, Washington 25, D. C.
Attn: Memorial Division.

1. Reference basic communication, request made therein has been accomplished. Attached herewith are check lists and tooth charts for the five deceased interred in USMC, LA GAMBRE, C-1-1, C-1-4, A-9-172, C-1-5, and F-4-72, respectively.

2. A complete review of these cases has been made including comparison of tooth charts with those obtained from your headquarters on Message form dated 9 January 1947 and Cable WCL-36970 dated 13 December 1946, and reidentification will be made for three of the five mentioned deceased as follows:

1st Lt. Ernest E. WHEELER, O-811161, Plot G, Row 1, Grave 5 (Previously identified as Sgt. James A. FREDDA, 15324398), S/Sgt. Archer B. HUGHES, 35681083, Plot C, Row 1, Grave 1, (previously identified as 1st Lt. Ernest E. WHEELER, O-811161), and Sgt James A. FREDDA, 15324398, Plot A, Row 9, Grave 172 (previously identified as S/Sgt. Archer B. HUGHES, 35681083.)

3. These three bodies will be disinterred and reburied indicating 1st Lt. WHEELER interred in C-1-1, S/Sgt. HUGHES interred in A-9-172, and Sgt. FREDDA interred in C-1-5, USMC LA GAMBRE. Corrected Reports of Burial will be forwarded to your headquarters upon completion.

4. The remaining two deceased, Captain John B. MCCUE, Plot G, Row 1, Grave 4, and Pvt. Julius A. HOLER, Plot F, Row 4, Grave 72 were previously identified correctly.

FOR THE COMMANDING GENERAL:

RRK

5 Incls.

1. Tooth chart and check list for 1/Lt. WHEELER
2. Tooth chart and check list for Sgt. FREDDA
3. Tooth and check list for S/ Sgt. HUGHES
4. Tooth chart and check list for Cpt. MCCUE.
5. Tooth chart and check list for Pvt HOLER.

JOSEPH D. MC GUSKEY
1st Lt., Inf.
Actg Asst Adj Gen.

copy.

X 293 FREDDA, Hughes, Wheeler

15 324 298

4
443 Camp Ewing
(Sheet 1)
WD, Dkali, 2nd and T Sts, S.W., Wash. 25, D.C.

Commanding Officer
American Graves Registration Command
European Theater Area
APO 887, c/o Postmaster
New York, New York

Immediate
Air Mail

UNCLAS 293
WHEELER, Ernest E., O-811161
McCUE, John B., O-364992
HUGHES, Archer B., 35681083
FREDA, James A., 15324398
HOLIN, Julius A., 16064784
(LaCasse) France

Disinterment and Reprocessing of Remains

2 April 1947

1. Reference is made to the following named crew members and passengers of Air Craft C-47A, #42-101019, which crashed in the 29th Combat Area, France, 6 June 1944 and are now interred as indicated below:

Wheeler, Ernest E., 1st Lt., O-811161, Co-Pilot	C-1-1	LaCasse, France
McCue, John B., Capt., O-364992, Pilot	C-1-4	LaCasse, France
Hughes, Archer B., S/Sgt., 35681083, Crew Chief	7-9-172	LaCasse, France
Freda, James A., Sgt., 15324398, Radio Operator	C-1-5	LaCasse, France
Holin, Julius A., Pvt., 16064784, Passenger	P-4-72	LaCasse, France

2. Capt. McCue, S/Sgt. Hughes and Sgt. Freda were identified by identification tags. Pvt. Holin was identified by name and serial number found on clothing and 1st Lt. Wheeler, the last crew member to be accounted for was identified by process of elimination.

UNCLAS 293 Wheeler, McGue, Hughes, Freda, Holin, (LaCombe) France
Disinterment and Reprocessing of Remains 2 April 1947
(Cont'd)

3. Due to the fact that a relative of 1st Lt. Wheeler now doubts this identification, it is requested that the remains of the five (5) deceased mentioned in paragraph 1, be disinterred, in the presence of a medical officer, reprocessed, complete check lists and dental charts accomplished and forwarded to this office without delay.

FOR THE QUARTERMASTER GENERAL:

JAMES C. MACFARLAND
Major, MC
Memorial Division

NJS

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

11 APR 1947

In Reply Refer To: QMGMR 293

543
Freda, James A.
SN 15 324 398

Date of Birth 5 Mar 23

SUBJECT: Request for information re next of kin of above named deceased serviceman of World War II.

xe 364192C
4-15-47
S.L.O.

TO : Director, Dependents and Beneficiaries Claims Service
Veterans Administration
Washington 25, D. C.

For use in determination of final disposition of remains of the above identified deceased serviceman, it is requested that appropriate information be entered on the lower portion of this letter and that one copy of the completed letter be returned to this office.

Martin G. Riley

MARTIN G. RILEY
Major, QMC
Memorial Division

1 Incl
Envelope

Date June 4, 1947

Veteran's

Name FREDA, James A.

XC- 3 641 926

Information in the VA case file indicates that the deceased serviceman was survived by the relatives listed below.

NOTE - A. Identify two persons in the following order of preference:

- | | |
|----------------------------------|---------------------------|
| 1. Widow | 5. Mother |
| 2. Male children over 21 years | 6. Brothers over 21 years |
| 3. Female children over 21 years | 7. Sisters over 21 years |
| 4. Father | 8. Other relatives |

B. If parent is listed, state whether natural, step-, adoptive or foster parent.

C. If no information is available concerning any surviving relatives, state "None".

Relationship	Name	Address
WIDOW (If none, state "None")	None	
Has she remarried? _____ If so, is proof of remarriage on file? _____		
Natural Mother	Jeanette F. Freda	923 Second Street N. W., Canton 2, Ohio
Brother	Louis Freda	Address Unknown

V. S. GARRETT
DIRECTOR,
CLAIMS SERVICE, Branch Office No. 6
(Address) 62 S. Starling Street,
Columbus 8, Ohio

V.S. Garrett
NAN
filed
APR 1947

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON, 25, D. C.

11 APR 1947

In Reply Refer To
QMG#R 293
Freda, James A.
SN 15 324 398

SUBJECT: Address of Legal Next of Kin of Deceased Veteran

TO: Army Finance Center, OCF
Correspondence Section
Special Settlement Accounts Division
Pay Settlements Branch
Building 205
St. Louis 20, Missouri

1. Records on file in this office indicate that **Mr. Louis I. Freda, father, 1954 Hollyn Avenue, Southwest, Canton, Ohio,** is the legal next of kin of:

NAME: **Freda, James A.**
RANK: **Sergeant**
SERIAL NO: **15 324 398**

2. It is requested that this office be furnished the latest address and relationship of the legal next of kin, and any other relatives of the deceased veteran mentioned above,

3. In case the next of kin is not as indicated above, request copies of such documentary evidence as may have been submitted to your office to establish this relationship.

FOR THE QUARTERMASTER GENERAL:

J. B. COLSON
Colonel, QMG
Memorial Division

RECORDS BRANCH
APR 11 2 30 PM '47
HEADQUARTERS

KK
KK
AB

A I R - M A I L

QUON: 514.8
Graves Registration
(European, U. S. Misc.)

2 APR 1947

SUBJECT: Burial Records

TO: Commanding Officer
American Graves Registration Command
European Theater Area
APO 887, c/o Postmaster
New York, New York

1. Request the burial reports and grave markers for the following decedents, interred at the United States Military Cemetery, La Cambe, France, be changed to read as follows:

<u>NAME</u>	<u>RANK</u>	<u>SERIAL NO.</u>	<u>PLAT</u>	<u>HOW</u>	<u>GRAVE</u>	<u>ORGANIZATION</u>	<u>DATE OF</u>
	<u>GRADE</u>						<u>GRADE</u>
Flynn, Raymond W.	S/Sgt	31 119 349	A	1	7	-	8 Jun 44
Forsten, Arvid C.	Pfc	36 194 894	AE	8	32	Co B 112 Inf Rgt 28 Inf Div	3 Aug 44
Freda, James A.	Sgt	15 324 398	C	1	5	100 TC Sq 441 TC Sp	-
Fuller, Orlando F.	Pvt	16 085 618	C	8	166	Co I 116 Inf Rgt 29 Inf Div	12 Jun 44

2. The records of this office have been reverified with the records of The Adjutant General, War Department, and have been found to be correct as indicated above.

FOR THE QUARTERMASTER GENERAL:

MARTIN G. RILEY
Major, QMC
Memorial Division

A I R - M A I L

OMGR 314.6
Graves Registration
(European, U. S. Misc.)

17 MAR 1947

SUBJECT: Burial Records

TO: Commanding Officer
American Graves Registration Command
European Theater Area
APO 887, c/o Postmaster
New York, New York

1. Request the burial reports and grave markers for the following decedents, interred in the United States Military Cemetery, La Cambe, France, be changed to read as follows:

<u>NAME</u>	<u>RANK</u> <u>GRADE</u>	<u>SERIAL NO.</u>	<u>DATE OF</u> <u>DEATH</u>	<u>ORGAN.</u>	<u>PLOT</u>	<u>ROW</u>	<u>GRAVE</u>
Butts, Ervin L.	S/Sgt	20 302 490	1 Aug 44		BB	5	98
Forbeck, James A.	Sgt	20 342 269	25 Jun 44	Co "G" 115 Inf Regt 29 Inf Div	E	6	106
Frank, Robert A.	Sgt	37 147 230	16 Jul 44		O	1	4
Freds, James A.	Sgt	15 324 398	6 Jun 44		O	1	5

2. The records of this office have been reverified with the records of The Adjutant General, War Department, and have been found to be correct as indicated above.

FOR THE QUARTERMASTER GENERAL:

clb

J. B. COLSON
Colonel, QM
Memorial Division

VD

293 Freda, James A 15324398.

9 Jan. 1947.

MEMO.

FROM: OCMG.
TO: CO, American Graves Reg. Command, RTA, apo 887.
RE: Transmittal of Dental Information.

293 Graves Reg., European (Identification).

op

LIST

165

WAS V UZTP NR31 WD P P

FROM CO RECORDS ADMN CTR AGO ST LOUIS MO 062013Z

TO OCMG WASH DC

ORNC

REUR12/011510Z QMR 385 COLSON

ON JAMES & FRED A RPT FRED A 15324398 DENTAL CHART DTD AT ENL 10

NOV 42 RESTORABLE CARIOUS TEETH RIGHT 8 6 MISSING TEETH RIGHT 16

LEFT 16

ON JULIUS A HOLIN 16064784 DENTAL CHART FORM 79 MD DTD 9 JUL 42

RESTORABLE CARIOUS TEETH RIGHT 7 6 5 2 MISSING TEETH RIGHT 4

LEFT 6 14

ON ARCHER B HUGHES 35631083 FORM 79M D DTD 25 FEB 43 MISSING TEETH RIGHT

1 2 3 4 5 6 7 8 14 15 16

LEFT 1 2 3 4 5 16 NONRESTORABLE TEETH LEFT 6 7 8 14

RESTORABLE TEETH RIGHT 10 11 13 LEFT 12 13 RMKS ADM SHOWS QUOTE 26

NOV 43 DENTAL FULL UPPER PINK ACRYLIC FULL PALATE MMAD AND ISSUED AT

GULFPORT MISS AUG 1 43 15 DEC 43 DENTAL FULL UPPER DTR GULF PORT MISS

UNQUOTE

ON DARREL M WHELPLEVY 33936922 REC NOT FD

END AGRS DASH D

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JAN 6 7 25 PM '47
RECORDS

293 Freda
James F

James
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15324398
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7125
QMGIG 293 Freds, James A. SN 15 324 398 13 September 1946 Cont'd

This office should be advised if the above address represents a permanent change.

This office sincerely regrets the delay in answering your letter and wishes to extend its deepest sympathy in the loss of your son.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

JAMES L. PRENN
Major, QMC
Assistant

da

JLP

(1)

SEP 13 12 11 PM '46
MEMORANDUM DIVISION
RECORDS BRANCH AND
SUBORDINATE BRANCH

43
100-100000-100000
100-100000-100000
100-100000-100000

293 Freda, James A (Sgt.) 15324398.

INDEX SHEET

SYNOPSIS

18 July 1944.

LETTER.

FROM: Edgys, 9th Air Force, (Rear).
TO: CG, STOUA, APO 887.
RE: Report of Burial.

FORMER FILED UNDER NO.

114.6 9th Air Force.

op

Basic Ltr, QMG, JMGMR 293 (La Cambe, France) dtd 2 April 47,
Subj: Disinterment and Reprocessing of Remains

RRE 293.8

1st Ind.

Hq, American Graves Registration Command, European Theater
Area, APO 58, U. S. Army, 2 May 1947

TO: The Quartermaster General, Washington 25, D. C.
Attn: Memorial Division

1. Reference basic communication, request made therein has been accomplished. Attached herewith are check lists and tooth charts for the five deceased interred in USMC, LA CAMBE, C-1-1, C-1-4, A-9-172, C-1-5, and F-4-72, respectively.

2. A complete review of these cases has been made including comparison of tooth charts with those obtained from your headquarters on Message Form dated 9 January 1947 and Cable WCL-36970 dated 13 December 1946, and reidentification will be made for three of the five mentioned deceased as follows:

1st Lt Ernest E. WHEELER, O-811161, Plot C, Row 1, Grave 5 (previously identified as Sgt. James A. FREDA, 15324398), S/Sgt. Archer B. HUGHES, 35681083, Plot C, Row 1, Grave 1, (previously identified as 1st Lt Ernest E. WHEELER, O-811161), and Sgt James A. FREDA, 15324398, Plot A, Row 9, Grave 172 (previously identified as S/Sgt Archer B. HUGHES, 35681083).

3. These three bodies will be disinterred and reburied indicating 1st Lt WHEELER interred in C-1-1, S/Sgt HUGHES interred in A-9-172, and Sgt FREDA interred in C-1-5, USMC LA CAMBE. Corrected Reports of Burial will be forwarded to your headquarters upon completion.

4. The remaining two deceased, Captain John B. McCUE, Plot C, Row 1, Grave 4 and Pvt Julius A. HOLIN, Plot F, Row 4, Grave 72 were previously identified correctly.

FOR THE COMMANDING GENERAL:

5 Incls

- | | |
|---|--|
| 1. Tooth chart and check list for 1/Lt WHEELER. | JOSEPH E. MC GLUSKEY
1st Lt, Inf
Actg Asst Adj Gen |
| 2. Tooth chart and check list for Sgt FREDA. | |
| 3. Tooth chart and check list for S/Sgt HUGHES. | |
| 4. Tooth chart and check list for Cpt McCUE. | |
| 5. Tooth chart and check list for Pvt HOLIN. | |

A TRUE COPY:

Hill
9 July 47
W. J. Sloane
NAW
W. J. SLOANE,
Captain, QMC
Memorial Div.

TOOTH CHART

ARMY B. HIGGINS
3507000

18 April 1947

Date

Last Name

First

Middle

Rank

Serial No.

Unit

Organization

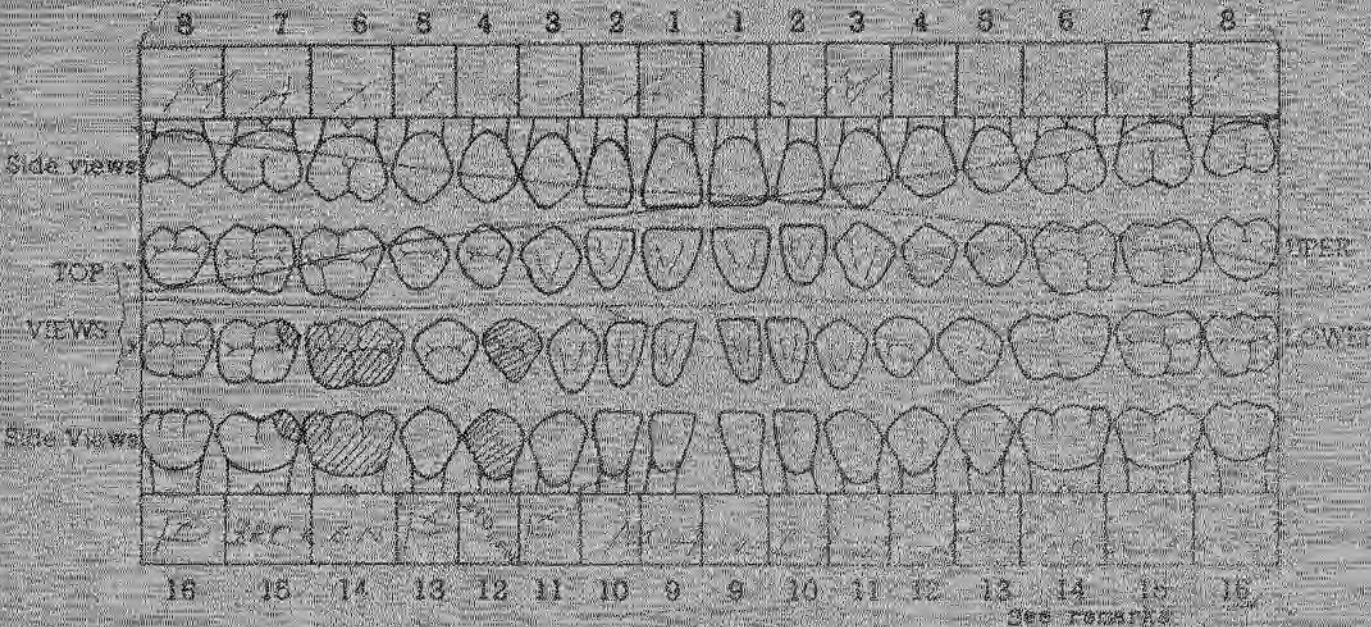
Place of Birth

Date of Birth

Cause of Death

Right

Left



See remarks

This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Position of the middle line in both upper and lower jaws, and teeth are arranged symmetrically on each side and classed as incisors (cutting teeth), cuspids or canines (tearing food), premolars (chewing teeth), and molars (principal chewing teeth). An explanation of all common dental findings charted to cover the following basic conditions: lost teeth, carious teeth, dental work, fillings, caries (cavities of decay), bridges (fills), and any other condition of teeth. See reverse side for illustrations.

REMARKS: [Illegible handwritten text]

ALL TEETH. All teeth remaining through
 the jaws, including those fractured or displaced
 and those which are "X" marked and
 labeled, are:



CROWNED TEETH. Show the crown of
 each tooth, solid porcelain, gold or
 porcelain.



BRIDGE WORK. Show in solid the crown of
 each (label gold or porcelain) and the bridge.



FILLINGS. Show filling on teeth as accurately
 as possible (black for gold, silver, cement,
 etc.)



CARIES (CAVITIES). Outline for each and show
 if cavity closed or open.



DENTURES (PLATES). Draw diagram of relative size and shape of plate, block in teeth
 attached and indicate remaining shape of natural teeth with the word "clasp."

ADDITIONAL SPACE FOR FURTHER REMARKS

Posthumously missing, 811, 13, 16 (possibly unerupted from appearance of socket).
 Teeth burned off as indicated by shading.
 Medium sized tooth blackened by fire,
 mandible charred by fire.

--- Col. Barden
--- Capt. Fappiano
--- B. Hughes
--- M. Isham
-X Q. BEALL

Interviewing Returning Escorts

DATE 7-8 MAY 1948
HOURS 0800 *AM*

1. Name of Escort
S/SGT. QUENTIN R. BEALL

2. Remains Escorted
SGT. JAMES A. FREDA
ASN 15324398 AIR CORPS

3. Funeral Director
EUGENE C. WACKERLY, INC.

Destination
CANTON, OHIO

4. Item's returned

- X Receipt of Remains
- Certificate of Interment
- Rail-head Expenses
- X Return of Ammunition
- Receipt for Ammunition
- X Arm Band
- ~~Web straps~~ NONE ISSUED
- X Flag

5. Where did Escort meet family? YES
Funeral Director? YES.

6. Was the family pleased with Casket? YES
Funeral Director YES *SAYS IF FOR ONE OF THE ARMY REALLY DID SOMETHING GOOD.*

7. Was shipping case used as a vault? NO

8. Condition of flag on shipping case? SATISFACTORY

9. Did Escort present flag?
--- Military Funeral
-X Private Funeral YES

10. Did Baggage-handlers or Passenger Agents handle the casket reverently? YES, VERY MUCH SO.

9a. Did you stay for funeral? YES

left Depot 0900 25 MAY 1948
arr. Dest. 0900 26
left Dest. 1223 27 MAY 1948
arr. Station 1830 27

If not state station.

STATION *242*

11. Was expenses covered by per-diem? NO
If not explain in detail.
STAYED IN HOTEL AT \$4.00/NIGHT AND THE MEALS WERE VERY HIGH IN CANTON.
Did Escort stay at Hotel, Private Home or Boarding House? HOTEL

12. Was identification questioned? NO

13. Remarks
FAMILY VERY WELL SATISFIED THAT ARMY HAS A GOOD PROGRAM AFTER HEARING SO MANY RUMORS TO THE CONTRARY. ALSO READ ITEM NO. 6.

Quentin R. Beall
Escorts signature

178134

ATTACHMENTS		EFFECTS INVENTORY ARMY EFFECTS BUREAU	STATUS	
X-	INBOUND INVENTORY ✓		DECEASED	
X-	G. R. OR SUB GR LABEL ✓		MISSING	
	WILL OR POWER OF ATTY		P. O. W.	
1-	TALLY IN FORM 43 ✓		ABANDONED	
		UNKNOWN		

BAGS, CLOTH OR TRAVEL	BELT	OVERCOATS	1- <i>Pilate Wing</i>
BELT, MONEY (NO MONEY)	BOOKS, ADDRESS	PAPERS, PERSONAL	
BILLFOLD (NO MONEY)	BOOKS, PILOT LOG	PENCIL, MECHANICAL	
BOOKS	BRUSHES	PER. FOUNTAIN	
BRACELET, IDENT.	CASE	PHOTOS	
CAMERAS	CLOTH, WASH	PIPES	
CLOTHING	COATS	RINGS	
MISC. ARTICLES	FOOTLOCKER	SCARFS	
RELIGIOUS ARTICLES	FOOTWEAR, PR.	SHIRTS	
RIBBONS, DECORATION	GLASSES	SOCKS, PR.	
SHORT SNORTER	GLOVES, PR.	STATIONERY	
SOUVENIR MONEY	HANDKERCHIEFS	TIES	
SOUVENIRS	HEADWEAR	TOBACCO	
TESTAMENTS	JACKETS	TOILET ARTICLES	
TOWELS & WASHCLOTHS	KITS	TOWELS	
U. S. MONEY (AMOUNT)	KNIVES	TROUSERS, PR.	
WATCH	LETTERS	TRUNKS, PR.	
WINGS	LIGHTERS	UNDERWEAR	

<p><i>None</i></p> <p>CONTAINERS ADDRESSED TO</p>	<p><i>None</i></p> <p>INFORMATION</p> <p><i>Reimbursed</i></p>
NAME AND STATUS VARIATIONS	CROSS REFERENCE

CHECK	REC'D BY	NUMBER	BUREAU CHECK
		SYMBOL	TRANSMIT ORIGINAL
		AMOUNT	ORIG. REG. MAIL
		DATE	TO G. A. O.
			MUTILATED
			TO ISSUING AGENCY
		BANK OR PLACE OF ISSUE	
		PAYEE	
		REMITTER OR DRAWER	

TALLY NO. <i>7967</i>	ORIG. NO. OF PKGS.	EXAMINING DATE <i>20 Oct 47</i>	BOX NO.	SHEET OF SHEETS
NAME <i>JAMES A. FREDA</i>			A. S. N. <i>15324398</i>	
ORGANIZATION			RANK	CASE NO.
WAREHOUSE SPACE <i>14</i>	EXAMINED BY <i>Crumer</i>	DIARY REMOVED		
PACKAGE DESCRIPTION <i>#1 Fly</i>	PACKED BY <i>...</i>	PHOTO FILM REMOVED		
WEIGHT <i>1#</i>	INSPECTED BY <i>JK</i>	MOTION PICTURE FILM REMOVED		
	STORED BY <i>MS</i>	SHIPPED		
		DATE	BY WHOM <i>MS</i>	

FREDA, JAMES A. 15324398

DAY

PALLETS

BOX

TALLY

7967

TYPE ...

GRB

10/15/47

NYPE

REF ON FORM 43
8 JULY 1947

Serial No 15324398 Name FREDA, JAMES A.
Grade _____ Rank 15324398

Organization _____

Address _____

Nearest Relative LA CAMBE

Address _____

Killed in Action _____ Died of Disease _____

Date _____ Hospital _____

Battle Area _____ Information _____

Place of Burial LA CAMBE

Point of Coordination _____

Description of Body _____

Members Missing _____

Signed _____

RESTRICTED

Place G, Row 1, Grave 5

SUBJECT : Inventory of PERSONAL EFFECTS of :

Date

FREDA

JAMES

A

15324398

(Last Name)

(First Name)

(MI)

(Rank)

(ASN)

TO : EFFECTS QUARTERMASTER, Army Effects Bureau, Kansas City, Missouri.

The above individual of

(Unit)

(Organization)

was reported

(Deceased, Missing, etc.)

about

194

Designated beneficiary if information readily accessible :

NAME :

ADDRESS

INVENTORY OF EFFECTS

One (1) Pilot's Wings.

----- Last Item -----

*Forwarded to Personal Effects Depot.

Money in the amount of _____ has been exchanged

(here identify currency)

for US Treasury check No : _____ amounting to \$ _____

Known bank account in European Theater : _____

(List name of bank and account number)

I certify that the above items constitute all effects secured by me, belonging to the above named individual and that they were forwarded to the Army Effects Bureau Kansas City, Missouri

on _____ 194 through _____

(forwarding agency)

Signed : *Adelard J. Roux*

(Name)

CAF-3

(Rank & ASN)

C.I.P.

(Organization)

(List any additional information on reverse side)

RESTRICTED

CHECKED *RS-14*

Post Office Department
OFFICIAL BUSINESS

PENALTY FOR PRIVATE USE TO AVOID PAYMENT OF POSTAGE, 300%



Return to Kansas City Quartermaster Dept
601. HENRIETTA AVENUE
Kansas City 1, Missouri

REGISTERED ARTICLE

867-847

INSURED PARCEL

KANSAS CITY,

MISSOURI

RETURN RECEIPT

Received from the Postmaster the Registered or Insured Article, the original number of which appears on the face of this Card.

1

[Handwritten signature]

(Signature of name of addressee)

2

[Handwritten signature]

(Signature of addressee's agent—Agent should enter addressee's name on line ONE above)

Date of delivery

1-22, 19*45*

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mr. Louis I. Freda
923 2nd Street N.W.
Canton, Ohio

Effects of:

Name Sgt. James A. Freda

ASN 15324398

Case No. 178134

St.

DATE JRM:LB:iw
13 January 1945

Muchmore
FOR: Effects Quartermaster

REMARKS:

- Inclose Bureau Check acct. No. _____ amount _____
- Inclose "Valuables" item _____
- Ship "Valuables" item(s) _____

- Remove G.I. _____
- Note discrepancy in _____
- Films removed _____
- Diary removed _____
- Laundry removed _____

ROUTING:

- Accounting Branch
- Warehouse Division
- Files branch, admt. div.

SHIPPED

DATE: 1/15/45

867-847

1 ch

REMARKS:

FRANKED
 Franked _____
 Est. Exp. Chgs. _____
 Est. Wrt. Chgs. _____
 No. of Packages 1

JAN 15 1945

JAN 20 1945

~~JAN 20 1945~~

②

mk

JAN 13 1945

Shipping Clerk

SHEET <u>1</u> OF <u>14</u> SHEETS	ARMY EFFECTS BUREAU INVENTORY		DECEASED	<input type="checkbox"/>
BOX NUMBER	ORIGINAL NUMBER OF PACKAGES <u>1</u>		MISSING	<input checked="" type="checkbox"/>
TALLY NUMBER <u>5967</u> ✓	INVENTORY DATE <u>1-1-45</u> ✓	CASE NUMBER <u>178134</u> ✓	P.O.W.	<input type="checkbox"/>
EFFECTS OF <u>JAMES A. FREDT</u> ✓			RANK <u>Sgt.</u>	<input type="checkbox"/>
A.S.N. <u>15324398</u>	ORGANIZATION <u>100th T.R. Carr. Sq. A.C.</u>		ABANDONED	<input type="checkbox"/>
PACKAGE DESCRIPTION				

CLOTHING	PERSONAL ITEMS	CONTAINERS	
BELT	BRACELET, IDENTIFICATION	BAGS, TRAVEL	
BELT, MONEY (NO MONEY)	BRUSHES	BAGS, CLOTH	
HEADWEAR	GLASSES	<input checked="" type="checkbox"/> BILLFOLD (NO MONEY) <u>W.C.</u>	
CLOTH, WASH	KNIVES	CASE,	
COATS	LIGHTERS	FOOTLOCKER	
<input checked="" type="checkbox"/> FOOTWEAR, PR. ✓	<input checked="" type="checkbox"/> MISC. INSIGNIA ✓	<input checked="" type="checkbox"/> KIT, SEWING	
GLOVES, PR.	MISC. ITEMS	<input checked="" type="checkbox"/> KIT, TOILET ✓	
<input checked="" type="checkbox"/> HANDKERCHIEFS ✓	PEN, FOUNTAIN	<input checked="" type="checkbox"/> KIT, WRITING ✓	
JACKETS	PENCIL, MECHANICAL	PAPERS AND MISC.	
OVERCOATS	PIPES	<input checked="" type="checkbox"/> BOOKS ✓	
<input checked="" type="checkbox"/> SHIRTS, <u>tee</u> ✓	<input checked="" type="checkbox"/> RELIGIOUS ARTICLES ✓	<input checked="" type="checkbox"/> FILMS ✓	
SOCKS, PR. ✓	<input checked="" type="checkbox"/> RIBBONS, DECORATION ✓	<input checked="" type="checkbox"/> LETTERS ✓	
TIES	RINGS	PAPERS, PERSONAL	
<input checked="" type="checkbox"/> TOWELS ✓	TOBACCO	<input checked="" type="checkbox"/> PHOTOS ✓	
TROUSERS, PR.	TOILET ARTICLES	SHOE SHINE ARTICLES	
TRUNKS, PR.	WINGS	SOUVENIRS	
<input checked="" type="checkbox"/> UNDERWEAR ✓	WATCH	SOUVENIR MONEY	
SCARFS	CAMERAS	TESTAMENTS	
		BOOKS, ADDRESS	
		BOOKS, NOTE	
		BOOKS, PILOT LOG	
		STATIONERY	
		SHORT SHORTER	
		U.S. MONEY	
		DIARY (REMOVED FOR DURATION)	

1- Sweater ✓

SHIPPED

DATE: 1/19/45

Lock storage
**1- wrist watch*
(waltham) Damaged

REMARKS: *mother*
Mrs Louis Freda
923 2nd St. N.W.
Canton, Ohio.

ATTACHMENTS: F.R.M #54 ✓ FORM #100

file
1/19/45
1/21

* Crystal missing & not in returning order
 C.A.T. none

WEIGHT	<input checked="" type="checkbox"/> #43 OR ADDITIONAL
	<input type="checkbox"/> GI REMOVED
	<input checked="" type="checkbox"/> SHORTAGE ON REVERSE
	<input type="checkbox"/> IDENT, TAGS REMOVED
	<input type="checkbox"/> DIARY REMOVED
	<input checked="" type="checkbox"/> LOCKED STORAGE ✓
	<input type="checkbox"/> LAUNDRY REMOVED
	<input type="checkbox"/> FILM REMOVED

WAREHOUSE SPACE <u>490</u>	STORED BY <u>Jcm</u>
INVENTORIED BY	DATE SHIPPED <u>JAN 15 1945</u>
PACKED BY <u>Martin</u>	CHECKED BY <u>B</u>

ADDITIONAL REMARKS

1- Undershirt, cotton
(Found 1 tee shirt)

SPOILAGES

U S GOVT. CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

I certify that the above listed items were not in the containers inventoried by me:

INVENTORY CLERK

SUPERVISOR

G. I. REMOVED

NAME

FREDA, JAMES A.

GPL

BAY	PALLET	BOX	TALLY
41	24		5967

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
BOX		

INVENTORY OF EFFECTS

(See AE 600-550)

Freda, James A. 75324398
 (Last name) (First name) (Middle initial) (Army serial number)

Rate a Sgt. 100th Tr Carr Sq AC
 Missing (Grade) (Organization or arm or service)

Examined on the 6th day of June, 19 44

CLASS I—Saber, insignia, decorations, medals, campaign badges, watches, manuscripts, and other articles valuable chiefly as keepsakes.

NUMBER	ARTICLES	*PACKAGE NUMBER
1	Wallet ✓	
1	Good Conduct Ribbon ✓	
1	ETO Ribbon ✓	
2	Religious Medals ✓	
1	Insignia, Troop Carrier ✓	
10	Letters	
16	Photos ✓	
1	Letter Folder ✓	
4	Books ✓	
2	Pocket prayer books ✓	

*To be filled out only in case of shipment to The Adjutant General.

CLASS II—Other effects

NUMBER	ARTICLES
1	Shaving kit ✓
5	Towels, bath ✓
9	Undershirts, cotton ①
6	Shorts ✓
10	Pr socks ✓
4	Towels, face ✓
22	Handkerchiefs ✓
1	Pr shoes, low gr ✓

Summary Court-Martial
ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT Case No. 178134 1w
601 Hardesty Avenue
Kansas City 1, Missouri Date 13 January 1945

SUBJECT: Report of transactions in disposing of the effects of

James A. Freda, 15327398 late a
(Name of deceased) (Army Serial Number)

Sergeant, Air Corps who died
(Grade) (Organization, Army or Service)

on the 6 day of June, 1944, at France.

TO : The Adjutant General, War Department 25, D.C.

1. Complying with A.W. 112, a Summary Court-Martial, convened at Kansas City, Mo., pursuant to S.O. 223, Hq., KCQM Depot, dated 25 September 1943, for the purpose of disposing of the effects of the above-named soldier, or person subject to military law, reports that:

a. No legal representative or widow of decedent being present at decedents camp or quarters, effects of decedent were forwarded to this Summary Court-Martial.

b. Local debtors owed decedent's estate \$ none, of which the sum of \$ none was collected. (If nothing was found due or collected, state "None"; otherwise attach itemized statement of sums owing and collected.) (Incl. _____.)

c. Decedent owed undisputed local creditors the sum of \$ none, which has been paid by the Summary Court-Martial from funds of decedent. (See inclosed receipt _____, Incl. _____)

d. Disposition of decedent's effects (less money paid creditors, if any) has been made by the Summary Court-Martial by transmittal through the Quartermaster Corps, at Government expense to person found entitled (See Summary Court-Martial FINDING below)

FINDING

Before a Summary Court-Martial which convened at Kansas City, Missouri, on 12 January 1944, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application or affidavit of _____

Louis I. Freda for the effects of the above-named deceased soldier, or person subject to military law, now in the possession of the United States, with other relevant evidence, was duly considered;

Whereupon, this Summary Court-Martial finds that, under the provisions of A.W. 112, Louis I. Freda of
(Name of person found entitled)

923 2nd Street N.W., Canton State of
(Number, Street or Avenue) (City, Town or Village)

Ohio, is the father of the
(Relationship or Capacity)

above-named decedent and appears to be entitled to receive his or her effects.

(Signature of Summary Court Officer)

JOHN E. MURPHY, Colonel, Q.M.C.
(Name, Rank, Organization)
SUMMARY COURT MARTIAL



100TH TROOP CARRIER SQUADRON
441ST TROOP CARRIER GROUP
UNIT PERSONNEL SECTION

178134

APO 133, US Army,
10 July 1944

SUBJECT: Transmittal of Personal Effects.

TO: Effects Quartermaster, ETOUSA.

1. In compliance with paragraph 7, sub-paragraph a, Memorandum 35-6, Headquarters, Ninth Air Force, dated 20 May 1944, the following information is submitted.

- a. James A. Freda, Sergeant, 15 324 378
- b. 100th Troop Carrier Squadron, 441st Troop Carrier Group, AC.
- c. K. I. A.
- d. 6 June 1944.
- e. Effects Shipped: July 1944 by motor transportation.
- f. No Bank account.
- g. No known debtors or creditors.
- h. Designated Beneficiary: Mrs. Jeanette Freda, Mother, 923 2nd Street, Canton, Ohio.
- i. No money found in personal effects.

For the Commanding Officer:

RECEIVED

Martin J. Hynes
MARTIN J. HYNES,
2d Lt., Air Corps,
Asst Adj & Pers Off.

Incl:
Form #54 (Trip)

JUL 3 1944

178,134

tu

VALUABLES RECEIPT

TALLY NO. 5967

NAME JAMES A. FRED A

RANK Sgt.

A.S.N. 15324398

DATE 1-1-45

Eff. QM Form 56

Lock storage
#1 - wrist watch
(w/neckchain) - Damaged
1-1-45
H.

Barrett

[Handwritten signature]



ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT
801 HARDESTY AVENUE
KANSAS CITY 1, MISSOURI

IN REPLY REFER TO: #178134 B

JRM:LB:mam
January 15, 1945

Mr. Louis I. Freda
923 2nd Street N. W.
Canton, Ohio

Dear Mr. Freda:

The Army Effects Bureau has received from overseas some personal effects of your son, Sergeant James A. Freda.

These effects are being forwarded to you in one carton.

If, by any chance, the property has not reached you at the expiration of thirty days from this date, please notify me and tracer will be instituted.

The action of this Bureau in transmitting personal effects does not, of itself, vest title in the recipient. Such property is forwarded for distribution according to the laws of the state of the soldier's legal residence.

I regret the circumstances prompting this letter, and wish to express my sympathy in the loss of your son.

Yours very truly,

F. A. ECKHARDT
Captain Q.M.C.
Assistant



~~CONFIDENTIAL~~
 KANSAS CITY QUARTERMASTER DEPOT
 ARMY EFFECTS BUREAU

501 HARDESTY AVENUE
 KANSAS CITY 1, MISSOURI

S-25 Nov 47
 MEM/LR/st
 5 November 1947

IN REPLY REFER TO 178134

Mr. Louis I. Freda
 923 2nd Street, N. W.
 Canton, Ohio

Dear Mr. Freda:

The Army Effects Bureau has just received from a Graves Registration officer overseas one Pilot's wings, which belonged to your son, Sergeant James A. Freda.

In view of the lapse of time since our previous correspondence, I shall appreciate it if you will indicate your desire, whether you wish this item sent you. If so, the property will be forwarded promptly upon receipt of the confirmation of your address.

Your reply may be made at the foot of this letter, if you desire, and mailed in the inclosed self-addressed envelope which needs no postage.

Sincerely yours,

M. E. MOHR
 Major, QMC
 Effects Quartermaster

1 Incl
 Envelope

Dear Sir please send my sons
 pilots wings which I will treasure,
 my husband died six months after my sons
 death I am a widow since, please
 address to me Mrs Jeannett I. Freda
 2208 11th St. S.W.
 Thank you in return
 Canton, Ohio

XXXXXXXXXXXXXXXXXXXX

178134

MEM/LR/ps
5 December 1947

ck

Mrs. Jeannette F. Freda
2208 11th Street, S. W.
Canton 6, Ohio

Dear Mrs. Freda:

Thank you for the information recently given the Army Effects Bureau in connection with the disposal of personal property of your son, Sergeant James A. Freda.

This property, consisting of one pair of pilot's wings, was sent to you under separate cover 1 December 1947.

If, for some reason, the property has not reached you at the expiration of thirty days from the date of this letter, please notify this Bureau so tracer can be instituted.

Sincerely yours,

M. E. MOHR
Major, QMC
Effects Quartermaster

60

67

Canton Ohio

July 23, 1946.

Dear Sir:

I am requesting for the remains of my boy to be send back home in these united states.

Please send me some information about it, so I will know what to do. send me the necessary requirements you need for identity.

Very truly yours

Mrs Jeannette F. Freda

11354 Roslyn ave S.W.
Canton Ohio

993 Freda
Canton Ohio

QMGYG 293
Freda, James A.
SN 15 324 398

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

13 September 1946

Mrs. Jeannette F. Freda
1354 Hoslyn Avenue, Southwest
Canton, Ohio

Dear Mrs. Freda:

Your letter concerning your son, the late Sergeant James A. Freda, has been received in this office.

The official Report of Burial discloses that the remains of your son were interred in Plot C, Row 1, Grave 5, in the United States Military Cemetery La Cambe, located seventeen miles north of St. Lo, France.

The War Department has now been authorized to remove, at Government expense, to the final resting place designated by the next of kin, the remains of those American citizens who died while serving overseas with our armed forces during this war.

When the necessary preliminaries have been completed, a letter with an information pamphlet and a "Request for Disposition" form attached will be sent to the next of kin of those American dead. The "Request for Disposition" form, when properly filled out, will constitute the formal expression of the next of kin's detailed desires. Since letters to next of kin will be dispatched automatically and according to the records here, communications with this office regarding this subject will not be necessary.

As you probably know, the supply of steel for the manufacture of caskets, is at present uncertain. Without this essential item, the movement of remains cannot properly be initiated. This fact and the necessity for complete coordination of movement in many parts of the world make it impossible, at this time, to estimate when these forms will be mailed. Responses to them will be acted upon with a minimum of delay.

Please be assured that your feelings in this matter are fully appreciated.

Sgt. James A. Freda, 15 324 398
Plot C, Row 1, Grave 5,
United States Military Cemetery
La Cambe, France

15 July 1947

Mr. Louis I. Freda
1354 Roslyn Avenue, Southwest
Canton, Ohio

Dear Mr. Freda:

The people of the United States, through the Congress have authorized the disinterment and final burial of the heroic dead of World War II. The Quartermaster General of the Army has been entrusted with this sacred responsibility to the honored dead. The records of the War Department indicate that you may be the nearest relative of the above-named deceased, who gave his life in the service of his country.

The enclosed pamphlets, "Disposition of World War II Armed Forces Dead," and "American Cemeteries," explain the disposition, options and services made available to you by your Government. If you are the next of kin according to the line of kinship as set forth in the enclosed pamphlet, "Disposition of World War II Armed Forces Dead," you are invited to express your wishes as to the disposition of the remains of the deceased by completing Part I of the enclosed form "Request for Disposition of Remains." Should you desire to relinquish your rights to the next in line of kinship, please complete Part II of the enclosed form. If you are not the next of kin, please complete Part III of the enclosed form.

If you should elect Option 2, it is advised that no funeral arrangements or other personal arrangements be made until you are further notified by this office.

Will you please complete the enclosed form, "Request for Disposition of Remains" and mail in the enclosed self-addressed envelope, which requires no postage, within 30 days after its receipt by you? Its prompt return will avoid unnecessary delays.

Sincerely,

THOMAS B. LARKIN
Major General
The Quartermaster General

Incls.

dmd

U.S. ARMY
RECORDS
JUL 15 11 45 AM '47