

RESTRICTED REPORT OF BURIAL

TM 10-630 AND AR 30-1815

8446
1 July 1944

Date

Luce, Orion D. Pvt 31218637 10/11/44
Unknown 357 Inf Reg 90th Div
France Unknown 12 June 44 KIA 574
1 July 1944 Blosville France
79 4 E Peg
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?

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

Who is buried on: Young, Angus J. 32873141 Unknown 82nd A/B Div 80
Deceased's Right: Name Serial No. Rank Organization Grave No.
Deceased's Left: Stanko, Frank J. 36396654 Pvt 82nd A/B Div 78
Name Serial No. Rank Organization Grave No.

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 Velma Luce Name
RFD # 1, Skowhegan, Maine. Address

Religion Protestant

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

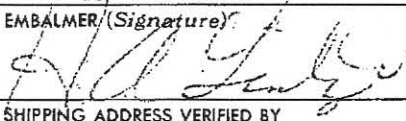
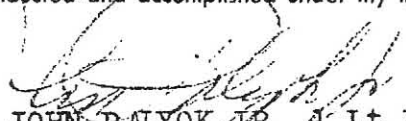
Pen, fountain
Cigarette lighter
Small cross
Receipt
Souvenir coins

CURRENCY: 6 shillings

Signature of Officer or other person reporting burial

Dale C. Sherwood
DALE C. SHERWOOD Verified by G.R.S. Officer
1st. Lt., QMC

File
11-24-44
In 8 B

1		DISINTERMENT DIRECTIVE								
		SECTION A — NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER 3508 02941		DATE 15 11 47 DAY MONTH YEAR		
NAME LUCE ORION D				SERIAL NUMBER 31218637		RANK PVT		ARM 1		
CEMETERY BLOSVILLE - CARENTAN								DATE OF DEATH 1 1200 01 DAY MONTH YEAR		
DISPOSITION OF REMAINS 1								CODE DIST. PT.		
PLOT E		ROW 4		GRAVE 79		COUNTRY FRANCE		CAUSE OF DEATH 1		
SECTION B — CONSIGNEE AND NEXT OF KIN										
NAME AND ADDRESS OF CONSIGNEE B. K. EDWARDS MAIN STREET MADISON, MAINE					NAME AND ADDRESS OF NEXT OF KIN FRANK O. LUCE (FATHER) RURAL FREE DELIVERY #1 SKOWHEGAN, MAINE					
SECTION C — DISINTERMENT AND IDENTIFICATION										
NAME LUCE Orion D			SERIAL NUMBER 31218637		RANK Pvt		DATE OF DEATH Utd		DATE DISTINTERRED 17 Dec 47	
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER		ORGANIZATION USAGF			RELIGION P		IDENTIFICATION, VERIFIED BY R.W. GANSEL, INALC QMC			
SECTION D — PREPARATION OF REMAINS FOR SHIPMENT										
NATURE OF BURIAL Uniform					CONDITION OF REMAINS Advanced decomposition					
OTHER MEANS OF IDENTIFICATION None										
MINOR DISCREPANCIES None										
REMAINS PREPARED AND PLACED IN CASKET										
DATE 20 Jan 48					BY H.A. Gentzel					
CASKET SEALED BY H.A. Gentzel					EMBALMER (Signature) 					
CASKET BOXED AND MARKED					SHIPPING ADDRESS VERIFIED BY JOHN PALYOK JR, 1 Lt FA					
DATE 20 Jan 48 R.C. Cook										
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.										
 JOHN PALYOK JR, 1 Lt FA SIGNATURE OF GRS INSPECTOR										
1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.										

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC Blossville		TO Casketing Point A - Cherbourg	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER Pvt Fred R. Rosendahl	
SIGNATURE OF SHIPPER <i>[Signature]</i> HARRY E. ROSEN, 1 Lt QMC 19 Jan 48	DATE 19 Jan 48	SIGNATURE OF RECEIVER <i>[Signature]</i> E.N. CIAMPO, 1 Lt FA 19 Jan 48	DATE 19 Jan 48

2. SHIPPED

FROM Casketing Point A - Cherbourg		TO Port Unit Cherbourg	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER <i>[Signature]</i>	
SIGNATURE OF SHIPPER <i>[Signature]</i> E.N. CIAMPO, 1 Lt FA	DATE	SIGNATURE OF RECEIVER <i>[Signature]</i> JOHN E. HENDRY JR, Maj CAC	DATE

3. SHIPPED

FROM PORT UNIT CHERBOURG		TO NYPOE	
KIND OF CONVEYANCE USAT MC CARLEY		NAME OF CONVOYER ROBERT V. SCHNEIDER 1st Lt. TC.	
SIGNATURE OF SHIPPER <i>[Signature]</i> JOHN E. HENDRY JR, MAJOR, CAC.	DATE 10 March 1948	SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE 10 March 1948

4. SHIPPED

FROM		TO NYPE	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>[Signature]</i>	DATE	SIGNATURE OF RECEIVER <i>[Signature]</i> JAMES L. MCKINNON COLONEL, T. C. PORT TRANSPORTATION OFFICER	DATE APR 5 1948

5. SHIPPED

FROM NYPE		TO DC 1	
KIND OF CONVEYANCE INDIAN NYINE TRACTOR		NAME OF CONVOYER BY AIRCRAFT	
SIGNATURE OF SHIPPER JAMES L. MCKINNON COLONEL, T. C. PORT TRANSPORTATION OFFICER	DATE APR 5 1948	SIGNATURE OF RECEIVER <i>[Signature]</i> Lt. Col. QMC Operations Officer DC 1	DATE APR 5 1948

6. SHIPPED

FROM		TO Operations Officer DC 1	
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 27 July 1944
Kd/crs 4632

FULL NAME <u>Luce Orion D.</u>				ARMY SERIAL NUMBER 31218 637				GRADE Pvt									
HOME ADDRESS Skowhegan, Maine				ARM OR SERVICE Infantry				DATE OF BIRTH 10 Jan 21									
PLACE OF DEATH France				CAUSE OF DEATH Killed in action				DATE OF DEATH 13 Jun 44									
STATION OF DECEASED European Area				DATE OF ENTRY ON CURRENT ACTIVE SERVICE 29 Dec 42				LENGTH OF SERVICE FOR PAY PURPOSES <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; border-bottom: 1px solid black;">YEARS</td> <td style="width: 33%; border-bottom: 1px solid black;">MONTHS</td> <td style="width: 33%; border-bottom: 1px solid black;">DAYS</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">5</td> <td style="text-align: center;">15</td> </tr> </table>				YEARS	MONTHS	DAYS	1	5	15
YEARS	MONTHS	DAYS															
1	5	15															
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Velma Luce, mother, RFD #1, Skowhegan, Maine																	
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Velma Luce, mother, RFD #1, Skowhegan, Maine Frank Luce, father, RFD #1, Skowhegan, Maine																	
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)					
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO				
X		X		X		X				X							

ADDITIONAL DATA AND/OR STATEMENT

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

☒ BATTLE
☐ NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR

J. A. Marshall

ADJUTANT GENERAL

13 AUG 1944 FILE
WmJ.

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

N.C.

REPORT OF DEATH

DATE 27 July 1944
kd/trs 4632

FULL NAME Luce Orion D.				ARMY SERIAL NUMBER 31218 637		GRADE Pvt	
HOME ADDRESS Skowhegan, Maine				ARM OR SERVICE Infantry		DATE OF BIRTH 10 Jan 21	
PLACE OF DEATH France			CAUSE OF DEATH Killed in action			DATE OF DEATH 13 Jun 44	
STATION OF DECEASED European Area				DATE OF ENTRY ON CURRENT ACTIVE SERVICE 29 Dec 42		LENGTH OF SERVICE FOR PAY PURPOSES	
						YEARS 5	DAYS 15
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Velma Luce, mother, RFD #1, Skowhegan, Maine							
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Velma Luce, mother, RFD #1, Skowhegan, Maine Frank Luce, father, RFD #1, Skowhegan, Maine							
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS	
YES	NO	YES	NO	YES	NO	YES	NO
	X	X		X		X	
				AUTHORIZED ABSENCE		IN FLYING PAY STATUS	
				YES	NO	YES	NO
						X	
OTHER PAY STATUS (SPECIFY BELOW)							
YES NO							



ADDITIONAL DATA AND/OR STATEMENT

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

☒ BATTLE
☐ NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:

J. A. Marshall
J. A. Marshall

ADJUTANT GENERAL

REQUEST FOR DISPOSITION OF REMAINS

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

Pvt. Orion D. Luce, 31 218 637
Plot B, Row 4, Grave 79,
United States Military Cemetery
Blissville, France

12 September 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, FRANK O. LUCE
(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

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

- ☐ WIDOW ☐ WIDOWER ☐ SON OVER 21 YEARS OLD ☐ DAUGHTER OVER 21 YEARS OLD
- ☒ FATHER ☐ MOTHER ☐ BROTHER OVER 21 YEARS OLD ☐ SISTER OVER 21 YEARS OLD
- ☐ 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
FOREST HILL CEMETERY, MADISON, ME.
(NAME AND LOCATION OF CEMETERY)
- ☐ 3. BE RETURNED TO _____ THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT _____
(FOREIGN COUNTRY) (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.)

None to be processed 24 Nov 47
in Korea

Coded
29 Oct 47
MB

OCT 21 1947

OK

PART I (Continued)

If 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 <i>B. K. Edwards</i>			
NUMBER AND STREET <i>Main Street</i>	CITY OR TOWN <i>Madison</i>	COUNTY OR PROVINCE <i>Somerset</i>	STATE OR TERRITORY OF U. S. A., OR COUNTRY <i>Maine</i>
EXPRESS OFFICE (Nearest railroad passenger station) <i>Waterville Maine</i>	TELEGRAPH ADDRESS <i>Madison Maine</i>		TELEPHONE NO. <i>68-2</i>

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 <i>LUCE</i>	FIRST NAME <i>VELMA</i>	MIDDLE INITIAL <i>P</i>	RELATIONSHIP TO DECEASED <i>Mother</i>
NUMBER AND STREET <i>R F D #1</i>	CITY OR TOWN <i>Shawhegan</i>	COUNTY OR PROVINCE <i>Somerset</i>	STATE OR TERRITORY OF U. S. A., OR COUNTRY <i>Me.</i>

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.

FRANK O. LUCE
(SIGNATURE OF NEXT OF KIN)
Frank O. Luce
(NAME PRINTED OR TYPED)

Shawhegan R F D #1
(STREET AND NUMBER)
Me.
(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 9th day of October, 1947, at city (or town) of Madison, county of Somerset, and State (or Territory or District) of Maine.

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

ADDITIONAL REMARKS AND INSTRUCTIONS

All remarks and information entered here will be considered as part of the Notarial Attestation.

RECORDS BRANCH

OCT 13 6 24 PM '47

MEMORIAL DIVISION



RECEIPT OF REMAINS

HEADQUARTERS
NEW YORK PORT OF EMBARKATION
DISTRIBUTION CENTER #1, AGRS

DISTRIBUTION CENTER

1st AVENUE & 58th STREET
BROOKLIN, NEW YORK

ROUTINE

REMAINS CONSIGNED TO:

B. K. EDWARDS

MAIN STREET

MADISON, MAINE

REMAINS OF THE LATE PVT ORION D LUCE ACCOMPANIED BY AN ESCORT ARE
SCHEDULED TO LEAVE NEW YORK ON TRAIN NUMBER 124

NEW HAVEN

RAILROAD AT NINE PM

ON THURSDAY 22 APRIL

AND DUE TO ARRIVE AT TEN TWO AM

AT WATERTVILLE

ON FRIDAY 23 APRIL PLEASE

ARRANGE TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL AND PLEASE

NOTIFY THE NEXT OF KIN OF THE DATE AND TIME OF ARRIVAL.

~~COMMANDING OFFICER OF DISTRIBUTION OFFICE NEW YORK PORT OF EMBARKATION~~

ESCORT: MANCINE, NICHOLAS, J, S SGT,
RA-20135395, DET #5, 1300 ASU

G.H. BARE

COLONEL, QMC

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

THIS 23 DAY OF April, 1948
DAY MONTH

S/Sgt Nicholas J. Mancine
WITNESS (Escort)

B. K. Edwards
CONSIGNEE

File
Records
1 June 48
Mr. Bare
RA

WUB137 26 COLLECT

MADISON ME MAR 30 306P

DISTRIBUTION CENTER, PORT OF EMBARKATION NO. SIGNAL CENTER
PVT ORION D LUCE PLEASE SHIP ACCORDING TO FORMER DIRECTIONS NO
CHANGE IS REQUIRED

FRANK O LUCE ROUTE 1 SKOWHEGAN MAINE

403P

29 1.

RECEIVED
GREENWICH HEAD TIME (Z)
MAR 30 21 13
1948
NO. TYPE: B. NY N.Y.
L. DODD

MESSAGEFORM

MESSAGE CENTER No.

TRANSMITTING MEANS

CRYPTOGRAPH OR CLEAR TEXT

CALLS

V

STA. SER. No.

NR

PRECEDENCE

JOHN L McCADLEY

TRANSMISSION INSTRUCTIONS

ORIGINATOR

DATE-TIME GROUP

ACTION

INFORMATION

EXEMPT

OPERATING SIGNALS

GROUP COUNT

GR

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Originator)

AGRD, NYE

ACTION TO:

FRANK O LUCE

D

RURAL FREE DELIVERY #1

SKOWHEGAN, MAINE

INFORMATION TO:

SECURITY CLASSIFICATION
DAY LETTER

WAR DEPARTMENT
TELEGRAPH OFFICE
BROOKLYN BASE, NYE

☐ ORIGINAL MESSAGE

REFERS TO ANOTHER MESSAGE
IDENTIFICATION CLASSIFICATION

PLEASE BE ADVISED THE REMAINS OF THE LATE **PVT ORION D LUCE**
ARE ENROUTE TO THE UNITED STATES AND WILL ARRIVE ~~NEW YORK~~ ~~PORT ABOARD~~
~~THE USAT~~ ON
~~DEBARKATION FROM SHIP AND MOVING REMAINS UNDER MILITARY GUARD TO DISTRIBUTION~~
~~CENTER NUMBER ONE, FINAL CHECKING, VERIFICATION OF RECORDS, ASSIGNMENT OF ESCORT~~
~~AND ARRANGING FOR TRANSPORTATION BY MOTOR OR RAIL TO FINAL DESTINATION WILL TAKE~~
~~FROM ONE TO FOUR WEEKS.~~ RECORDS OF THIS OFFICE INDICATE YOU WISH REMAINS
DELIVERED TO **B K EDWARDS MAIN ST MADISON MAINE**

PLEASE INSTRUCT
FUNERAL DIRECTOR TO ACCEPT REMAINS AT RAILROAD STATION ON ARRIVAL. WE REGRET
IT IS NOT POSSIBLE AT THIS TIME TO GIVE YOU A DEFINITE DELIVERY DATE, HOWEVER,
WE APPRECIATE YOUR DESIRE TO RECEIVE REMAINS AS SOON AS POSSIBLE AND ASSURE
YOU EVERY EFFORT IS BEING MADE TO EXPEDITE DELIVERY. YOUR FUNERAL DIRECTOR
WILL BE NOTIFIED BY TELEGRAM THREE DAYS PRIOR TO DATE OF DELIVERY OF THE RAIL

SECURITY CLASSIFICATION

AUTHORIZATION

SIGNATURE

ORIGINATING AGENCY

SYMBOL

DATE-TIME GROUP

OFFICIAL TITLE

MAR 29 1948

PAGE OF

WATER

D

ROUTING AND SCHEDULED TIME REMAINS WILL ARRIVE AT RAILROAD STATION AND HE WILL BE REQUESTED TO INFORM YOU SO THAT YOU MAY MAKE FINAL FUNERAL ARRANGEMENTS. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. PLEASE CONFIRM ABOVE DELIVERY INSTRUCTIONS WITHIN FORTY EIGHT HOURS OF THE DATE OF THIS MESSAGE BY TELEGRAM COLLECT AT DISTRIBUTION CENTER NUMBER ONE, NEW YORK PORT OF EMBARKATION OR SUBMIT NEW INSTRUCTIONS. IT WILL NOT BE POSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF THE FORTY EIGHT HOUR PERIOD. SUGGEST YOU ARRANGE WITH ANY LOCAL PATRIOTIC OR VETERANS ORGANIZATION IF YOU DESIRE MILITARY HONORS AT FUNERAL. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.

G. H. BARE
COLONEL, QMC

OFFICE OF THE QUARTERMASTER GENERAL

Washington 25, D. C.

293 LUCE, Orion D.

Washington MAY 18 1948 194

Your request for a headstone for the veteran named on the attached application has reached this office.

Please fill in on the enclosed application or form attached, the information requested where the items are checked in red and return the application and form to us immediately. No further action can be taken on this case until the application and form fully completed regarding additional information are returned.

☒ Complete shipping instructions should be given. Please furnish sign statement and complete address of person who will be responsible for removal of stone from freight station.

☐ Exact date of death - month, day and year should be furnished.

☐ Give name and location of cemetery in which deceased is buried.

☐ AS THE RECORDS SHOW THE FOUNDATIONS FOR HEADSTONES OR MARKERS MUST BE PAID FOR PRIOR TO ERECTION, ACTION ON THIS APPLICATION IS BEING WITHHELD PENDING RECEIPT OF A SIGNED STATEMENT FROM THE SUPERINTENDENT OF THE CEMETERY ADVISING THAT THE FOUNDATION HAS BEEN TAKEN CARE OF AND THAT THE HEADSTONE OR MARKER CAN BE ERECTED UPON ARRIVAL.

☐ The records of this office show there are restrictions with regard to headstones and markers in the cemetery in which this veteran is buried. It will be necessary, therefore, that you obtain from the cemetery officials a permit for the erection or placing of the government headstone or marker at the head of the veteran's grave.

☐ THE GOVERNMENT FURNISHES AN UPRIGHT HEADSTONE OF MARBLE OR A FLAT MARKER OF EITHER MARBLE, GRANITE OR BRONZE.

CHECK THUS: (X) WHICH TYPE PERMITTED:

☐ UPRIGHT MARBLE

☐ FLAT MARBLE MARKER

☐ FLAT GRANITE MARKER

☐ BRONZE (furnished only where other types of stones not permitted.)

PLEASE RETURN THE APPLICATION WITH THE CEMETERY PERMIT PROMPTLY.

FILE 2 JUL 1948
R. M. Gills
1948

N. E. PHONE 66-2 OFFICE

RES. PHONE 66-3

B. K. EDWARDS
FURNISHING FUNERAL DIRECTOR
O-O-O

WALL PAPER

PICTURE
FRAMING

AUTO HEARSE AND AMBULANCE

CUT FLOWERS ON SHORT NOTICE

MADISON, MAINE

Serial # 31218437,

June 19th 1948.

293 This is to notify that the base of head stone
for Clara H. Luce has been placed in Forest
Hill Cemetery and is already for the head
stone to be set.

The cost of the base has been paid for
by Frank C. Luce.

Yours truly,

B. K. Edwards

Twiddle
Forest Hill Cemetery.

FILED
JUN 25 1948
M. J. Wells
Br
A. F.

DEPARTMENT OF THE ARMY
~~OFFICE OF THE QUARTERMASTER GENERAL~~

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON 25, D. C.

IN REPLY REFER TO

OSM 293

Luce, Orion D.
SN 312 18 637

21 June 1948

Mr. Frank Luce
Route 1
Skowhegan, Maine

Dear Mr. Luce:

The records of this office show an application for a Government headstone submitted by you for the unmarked grave of the late Orion D. Luce was returned to you on 17 May 1948 for complete shipping instructions.

Since no further action can be taken on this case until the return of the application with the information requested, it is suggested that your reply be expedited.

Sincerely yours,

G. L. RUTH
Memorial Division

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CERTIFICATE

(AR 30-1830)

PAID

WW II

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		GRADE	SERIAL NUMBER	COMPONENT
221 LUC. ORION D		IVT	51218537	USAGE
<p>I certify that the sum of \$ <u>67.00</u> 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.</p>				
INSERT NAME OF CEMETERY		CITY OR COUNTY	STATE	
Forest Hill Cemetery		Madison	Maine	
INSTRUCTIONS TO PERSON SIGNING THIS FORM		SIGNATURE OF CLAIMANT		
<p>1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR.</p> <p>2. Return four copies to:</p> <p>HEADQUARTERS NEW YORK PORT OF EMBARKATION DISTRIBUTION CENTER #1, AC 13 1st AVENUE & 58th STREET BROOKLYN, NEW YORK</p>		<p>Frank B. Luce</p>		
		ADDRESS OF CLAIMANT (City, Street or RFD, and State)		
		Skowhegan Maine Route #1		
		RELATIONSHIP TO DECEDENT	DATE	
		Father	May 6-1948	

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
<p>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:</p>				
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		SIGNATURE OF CLAIMANT		
<p>1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR.</p> <p>2. Return four copies to:</p>				
		ADDRESS OF CLAIMANT (City, Street or RFD, and State)		
		RELATIONSHIP TO DECEDENT	DATE	

FLAG INFORMATION

NAME. ²⁹⁷ Luce, Orion D. ASN. 31 218 637

FLAG FURNISHED BY . . . V. A.

DATE. . . . 7 July 1944

FORM RETURNED TO VETERANS' ADMINISTRATION

FILE
9 May 45 *RO*

Summary Court-Martial
ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT
601 Hardesty Avenue
Kansas City 1, Missouri

JRM:VB:mt

Case No. 116813

Date 27 March 1945

SUBJECT: Report of transactions in disposing of the effects of

Orion D. Luce 51218637 late a
(Name of decedent) (Army Serial Number)
Private Infantry who died
(Grade) (Organization, Army or Service)
on the 13 day of June, 1944, at France.

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

1. Complying with A.W. 112, a Summary Court Martial, convened at Kansas City, Mo, pursuant to S.O., 228, 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 decedent's 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 17 March 1945, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application or affidavit of Frank Luce 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, Frank Luce of R. F. D. #1 Skowhegan State of Maine (Number, Street or Avenue) (City, Town or Village) 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 R. MURPHY, Colonel, C.M.C.
(Name, Rank, Organization)
SUMMARY COURT MARTIAL

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mr. Frank Luce

SHIP TO:

R. F. D. #1

Effects of:

Pvt. Orion D. Luce

Skowhegan, Maine

Name

31218637

ASH

116813-D

Case No.

Wt.

DATE 28 March 1945

W B Cowart
FOR: Effects Quartermaster

REMARKS: JRM:VB:mt

☒ Inclose Bureau Check
Acct. No. 43238
Amount \$1.21
☐ Inclose "Valuables" item
☐ Ship "Valuables" item(s)

☐ Remove G.I.
☐ Note discrepancy in
☐ Films removed
☐ Diary removed
☐ Laundry removed

ROUTING:

1 Accounting Branch *JW*
2 Warehouse Division
3 Files Branch, Adm. Div.

43238

116813

58010 emh

April 3

45

Frank Luce

1.21

One and 21/100

REMARKS:

1 upkey
Franked **FRANKED**
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____
No. of packages 1

APR 4 1945

APR 16 1945

Eff. 34 Form 14 (26 Dec 44)

Shipping Clerk

SHEET <u>1</u> OF <u>1</u> SHEETS	ARMY EFFECTS SIREAN INVENTORY		DECEASED <input checked="" type="checkbox"/>
BOX NUMBER <u>20</u>	ORIGINAL NUMBER OF PACKAGES <u>1</u>		MISSING <input type="checkbox"/>
TALLY NUMBER <u>5897</u>	INVENTORY DATE <u>9 Mar 45</u>	CASE NUMBER <u>116813</u>	ABANDONED <input type="checkbox"/>
EFFECTS OF <u>Orion D. Luce</u>			RANK <u>1st Lt</u>
A.S.N. <u>31218637</u>	ORGANIZATION <u>90th Div</u>		
PACKAGE DESCRIPTION			

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

REMARKS: <u>No Information</u> <u>Re. Luce</u>	ATTACHMENTS: <input checked="" type="checkbox"/> FORM #54 <u>✓</u> <input checked="" type="checkbox"/> FORM #100 <u>✓</u>
---	---

C.A.T. <u>Velma Luce (mother)</u> <u>RFD #1</u> <u>Shawhegan Maine.</u>		WEIGHT	<input type="checkbox"/> GI REMOVED
WAREHOUSE SPACE <u>2168</u>	STORED BY <u>Jew</u>	<input checked="" type="checkbox"/> SHORTAGE ON REVERSE <u>✓</u>	<input type="checkbox"/> IDENT. TAGS REMOVED
INVENTORIED BY <u>James</u>	DATE SHIPPED <u>Mar 45</u>	<input type="checkbox"/> DIARY REMOVED	<input type="checkbox"/> LOCKED STORAGE
PACKED BY <u>W. L. Luce</u>	CHECKED BY <u>E</u>	<input type="checkbox"/> LAUNDRY REMOVED	<input type="checkbox"/> FILM REMOVED
Eff. ON Form 11 (12 Dec 44)		<input type="checkbox"/> #43 OR ADDITIONAL	

SHORTAGES

6 shillings Res'd

U.S. GOVT. CHECK SPORT

NUMBER

DATE

SYMBOL

AMOUNT

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

Jones

INVENTORY CLERK

A. G. Gule

SUPERVISOR

G.I. REMOVED

ION D LUCE

218637143

INVENTORY OF EFFECTS

(See AR 600-550)

(Last name) (First name) (Middle initial) (Army serial number)

late a **Pvt** **90th Div**
(Grade) (Organization or arm or service)

who died on the ~~unknown~~ 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
	Pen, fountain	
	Cigarette lighter	
	Small cross	
	Receipt	
	Souvenir coins	

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

CLASS II—Other effects

NUMBER	ARTICLES
	CURRENCY: 6 shillings

E-4-79

Serial No. 31218637 Name Luce, Orion D.
Grade Ant Rank
Organization 90th Inf.
Address
Nearest Relative Velma Luce (mother)
Address B.F.D. Skowhegan, Maine
Killed in Action yes Died of Disease
Date 7/1/94 Hospital
Battle Area Information
Place of Burial Monarch Cemetery
Point of Coordination
Description of Body
Members Missing

Signed

Abraham S. Lyby Pfc

Deceased X
Missing _____
A.M.O.L. _____
P.C.V. _____
Abandoned _____

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

1 of 1 Sheets

INVENTORY

Box:

Shown on Tally In as

TALLY IN NO. INVENTORY DATE 9-6-44 CASE NO. 116813

EFFECTS OF ORION D. LUCE RANK Pvt.

ARMY SERIAL NO. 31218637 / ~~ORG.~~ 90th Division

CONSIGNOR G-14 U.K.

DELIVERING CARRIER Mail G B/L NO. G B/L DATE _____

[illegible]

Warehouse Space Inventoried By E.Albertson

Locked Storage Space Office Safe Packed By _____

ML:mem

Eff QM Form 11a



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

JRM:VB:mt ✓
March 27, 1945

116,813 ✓

IN REPLY REFER TO _____

Mr. Frank Luce ✓
R. F. D. #1
Skowhegan, Maine

Dear Mr. Luce: ✓

The Army Effects Bureau has received from overseas some personal effects of your son, Private Orion D. Luce. ✓

I am inclosing a check for \$1.21, representing funds which belonged to him. The remainder of the property is being forwarded to you in one package. ✓

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,

A. G. SCHUMACHER
1st Lt. Q.M.C.
Asst. Chief, Admin. Division

1 Incl--
Check

68

293 Luce, Orion D.

12 March 1946

Mr. Frank Luce
R.F.D. #1
Skowhegan, Maine

Dear Mr. Luce:

The War Department is most desirous that you be furnished the burial location of your son, the late Private Orion D. Luce, A.S.N. 31 218 637.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery, Elsoville, France, plot E, row 4, grave 79.

This cemetery is located approximately twenty miles northwest of St. Lo, twenty-four miles southeast of Cherbourg and five miles north and slightly west of Carentan, all in France, and is under the constant care and supervision of United States military personnel.

Please accept my sincere sympathy in the loss of your son.

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

EX-12 4 01 PM '46
MAIL & RECORDS BRANCH

IMS

Pvt. Orion B. Luce, 31 EIB 637
Plot E, Row 4, Grave 79,
United States Military Cemetery
Meosville, France

12 September 1947

Mr. Frank Luce
Rural Free Delivery 1
Skowhegan, Maine

Dear Mr. Luce:

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