

03542 ✓

RECEIPT OF REMAINS

DISTRIBUTION CENTER COLUMBUS GENERAL DISTRIBUTION DEPOT COLUMBUS 15 OHIO

ROUTINE 28 APRIL 1948

REMAINS CONSIGNED TO: GERNER & WOLF FUNERAL DIRECTORS
119 MADISON STREET
PORT CLINTON OHIO

FROM QMDCG BARDEN

REMAINS OF THE LATE TEC 4 WILLIAM C BROWN ASN 35333922 BEING SHIPPED
TO YOU ACCOMPANIED BY MILITARY ESCORT ON TRAIN NO 232 NEW YORK CENTRAL
RAILROAD LEAVING COLUMBUS OHIO 3:15 PM TWENTY EIGHT APRIL AND DUE TO
ARRIVE PORT CLINTON OHIO 8:35 PM RAILROAD TIME TWENTY EIGHT APRIL.
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 28 DAY OF April, 1948

Ralph B. Mitchell
WITNESS (Escort)

Leslie Brown
CONSIGNEE

File
NFI
Requiem
11 Apr 48
W. P. Br.

RHS BHR

1

DISINTERMENT DIRECTIVE

SECTION A—
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
3508 00599

DATE
15 11 47
DAY MONTH YEAR

NAME
BROWN WILLIAM C

SERIAL NUMBER
35333922

RANK
TEC4

ARM
1

DATE OF DEATH
DAY MONTH YEAR

CEMETERY
BLOSVILLE - CARENTAN

DISPOSITION OF REMAINS
1 5300 07
CODE DIST. PT.

PLOT ROW GRAVE COUNTRY
AA 8 141 FRANCE

CAUSE OF DEATH
1

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
GERNER & WOLF FUNERAL DIRECTORS
119 MADISON STREET
PORT CLINTON, OHIO

NAME AND ADDRESS OF NEXT OF KIN
LESLIE BROWN (FATHER)
317 HARRISON STREET
PORT CLINTON, OHIO

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME
BROWN William C

SERIAL NUMBER
35333922

RANK
TEC 4

DATE OF DEATH
o/a 8 Jun 44

DATE DISTINTERRED
23 Jan 48

IDENTIFICATION TAG ON
☒ REMAINS
☐ MARKER

ORGANIZATION
USAGF

RELIGION
P

IDENTIFICATION VERIFIED BY
John H Clark, 2 Lt QMC

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL
Uniform

CONDITION OF REMAINS
Advanced decomposition

OTHER MEANS OF IDENTIFICATION
None

MINOR DISCREPANCIES 1
None

REMAINS PREPARED AND PLACED IN CASKET

DATE 2 Feb 48

BY T. R. Harrison Jr.

CASKET SEALED BY

EMBALMER (Signature)

CASKET T.R. Harrison-Jr.

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY

DATE 2 Feb 48 BY H. J. Cummings

John Palyok Jr., 1 Lt FA

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	TO	NAME OF CONVOYER	
USMC Blossville	Casketing Point A - Cherbourg	Pvt Michael Strange	
KIND OF CONVEYANCE	DATE	SIGNATURE OF RECEIVER	DATE
Truck	2 Feb 48	<i>E.N. Ciampo</i>	2 Feb 48
SIGNATURE OF SHIPPER			
<i>Wm T. Bailey, Capt QMC</i>			
2. SHIPPED			
FROM	TO	NAME OF CONVOYER	
Casketing Point A - Cherbourg	Port Unit Cherbourg	<i>Ruthe</i>	
KIND OF CONVEYANCE	DATE	SIGNATURE OF RECEIVER	DATE
Truck		<i>John E. Hendry Jr</i>	
SIGNATURE OF SHIPPER			
<i>E.N. Ciampo, 1 Lt EA</i>			
3. SHIPPED			
FROM	TO	NAME OF CONVOYER	
PORT UNIT CHERBOURG	NYPOE	ROBERT V. SCHNEIDER, 1st Lt. TC.	
KIND OF CONVEYANCE	DATE	SIGNATURE OF RECEIVER	DATE
USAT MC CARLEY	10 March 1948	<i>Robert V. Schneider</i>	10 March 1948
SIGNATURE OF SHIPPER			
<i>John E. Hendry Jr, MAJOR, CAC</i>			
4. SHIPPED			
FROM	TO	NAME OF CONVOYER	
	NYPE	<i>James L. McKinnon</i>	
KIND OF CONVEYANCE	DATE	SIGNATURE OF RECEIVER	DATE
		<i>James L. McKinnon</i>	APR 5 1948
SIGNATURE OF SHIPPER			
<i>John E. Hendry Jr, MAJOR, CAC</i>			
5. SHIPPED			
FROM	TO	NAME OF CONVOYER	
	DC #1	<i>E. Engelman</i>	
KIND OF CONVEYANCE	DATE	SIGNATURE OF RECEIVER	DATE
Train	APR 10 1948	<i>E. Engelman</i>	APR 14 1948
SIGNATURE OF SHIPPER			
<i>James L. McKinnon, COLONEL, T. C.</i>			
6. SHIPPED			
FROM	TO	NAME OF CONVOYER	
KIND OF CONVEYANCE	DATE	SIGNATURE OF RECEIVER	DATE
SIGNATURE OF SHIPPER			
7. SHIPPED			
FROM	TO	NAME OF CONVOYER	
KIND OF CONVEYANCE	DATE	SIGNATURE OF RECEIVER	DATE
SIGNATURE OF SHIPPER			

INSPECTION CHECKLIST (FOR USE AT DISTRIBUTION CENTER)							
NAME Brown, William C		RANK Tec 4	SERIAL NUMBER 35333922				
SOURCE <i>Hand per H.M.</i>		CONSIGNEE Gerner & Wolf Funeral Directors 119 Madison Street Port Clinton, O, 10					
SHIPPING CASE - GENERAL APPEARANCE (CHECK ONLY DISCREPANCIES)		CONDITION OF SHIPPING CASE (CHECK ONE) <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY					
FINISH (EXTERIOR)		REMARKS <i>Touched up in Bay</i>					
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	
				1000	4/23/46	<i>[Signature]</i>	
REMARKS							

Identification Section
Memorial Division
Identification Data

Last Name	First	Initial	ASN	Grade	
BROWN	WILLIAM	C	35333922	TEC 4	
Height	Weight	Color Eyes	Color Hair	Shoe Size	Date of Death
5' 6"	187	BROWN	BROWN	8 E	JUNE 12, '44
Last Organization to which atchd or asgd (Give complete designation)					
377th PRCHT. FA. BN. HQ, HQ SERV. BTRY					
Place of Death or place last seen if MIA					
NEWBURY, BERKSHIRE, FRANCE					
List all camps in which stationed in U.S. prior to service overseas, including inclusive dates at each.					

STATION	DATES
ABERDEEN, MD.	SEPT. 1, '42 - DEC. 8, '42
FT. DENNING, GA.	DEC. 14, '42 - FEB. 8, '43
FT. BRAGG, N.C.	FEB. 10, '43 -

Fractures and/or Breaks	Tattoos and/or Birth marks
-------------------------	----------------------------

DENTAL CHART July 31, 1942

XXX	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Upper Right							Upper Left							
16	X	14	13	12	11	10	9	9	10	11	12	13	14	15
Lower Right							Lower Left							

X - Extracted O - Carious / - Carious non-restorable

Indicate dentures, bridgework, etc., if shown

RRE Form #39
13 Jul 48

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

BROWN	WILLIAM	C	TEC/4	35333922
(Last Name)	(First Name)	(Initial)	(Rank)	(ASN)

Repatriated to the United States: 18 March 1948

STATION FILE

Incl # 35

RESTRICTED
ARMY SERVICE FORCES
Office of The Quartermaster General
Washington 25, D.C.

SPQYG 293
Brown, William C.
S.N. 35 333 922

7 February 1945.

SUBJECT: Report of Interment.

TO : Headquarters,
A.P.O. 887, c/o Postmaster,
New York, New York.

ATTENTION: Chief Quartermaster.

1. Information is requested as to whether or not the remains of the late Technician Fourth Grade William C. Brown, S.N. 35333922, who was killed in action on 12 June 1944 in the European Area, have been recovered and interred, as to date no report of interment has been received.

For The Quartermaster General:

s/ H. A. Barnes,

t/ H. A. BARNES
Brig. General, Q.M.C.
Deputy The Quartermaster General

Blosville

AA - 8 - 141

RESTRICTED

RESTRICTED

Q-ORE (9Mar45)

1st Ind.

/met.

OCQM, HQ COM Z., ETOUSA, APO 887, U.S. Army.

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

1. GRS Form #1, Report of Burial for T/4 William C. Brown, 35333922, has not been forwarded to your office because the remains of subject deceased were never recovered. Therefore, no Report of Burial was ever submitted to this office and cannot be furnished.

For the Chief Quartermaster

met

THM

jt

JOHN B. FRANKS
Brigadier General, USA
Deputy, Chief Quartermaster

pjw DISTRIBUTION:

Orig. & Dup. - Addressee
1 copy - M & R 887 File - 29361
1 copy - GR&E 887 File - (70804)

EXEC-RHM

RESTRICTED

7673

TGRS TSFET
Form No. 10
27-8-45

REPORT OF INVESTIGATION-AREA SEARCHING

To be completely filled out and attached to each copy of GR Form 1, "Report of Burial" when disinterment is accomplished.

1. Was investigation preceded by Advance Publicity: No
(if Special Investigation, so indicate) Special Investigation
2. William C. Brown Ink. 5423022 Ink.
(Full name of deceased) (Rank) (ASN) (Organization)
3. State: Means of identification, i.e., identification tags attached to marker, inscription on grave marker, cemetery records, townhall records, etc., and Source of Information, i.e., identification tags, identification cards, identification bracelet, leather name plate on flying jacket, clothing marks etc. One original identification tag
4. Give exact location of isolated grave, furnishing coordinates and letter prefix, map sheet, scale and series used; also name of nearest town: College Yard Yvelines, France. 46 Section (College used as map, by Germans)
NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION IN WITH PERMANENT LANDMARKS.
5. Full name of cemetery (include plot, row and grave if organized cemetery) See attached sketch
6. Approximate or established date of death (state which and give basis for date selected) c/a 8 June 1944
7. Approximate or established date of burial (give basis for date established) c/a 8 June 1944
8. Manner in which grave was marked, show information contained on the marker No markings - area had been used as a water park by an American Army Ordnance unit.
9. List personal effects found in possession of civilian and custodial personnel now retaining, furnishing name and address of individuals concerned None
10. Furnish information obtained concerning place, and particulars surrounding death and burial; give the names and addresses of all persons furnishing such information (contact local Mayor, priest, police, hospitals, cemetery sextons or caretakers, those responsible for burial and others possessing important information) The mayor and the son who buried deceased (under supervision of German) were contacted and the area outlined. No one on cemetery while the bodies were being dug and ground area which was excavated was marked off as closed to the public.
11. Give name and address of persons who can guide disinterring team to burial location: Mr. Ernest Koch, 1115-ville, St. who buried deceased - Mr. Villeneuve Sec. to Mayor.

12. Is this an atrocity case: Yes Is there evidence that it may be: No
If answer is yes, has responsible War Crimes representative been notified.
13. Names and addresses of persons committing the atrocity or the military unit
of which these persons were members: _____

14. If unidentified and a crew member of a plane or vehicle, indicate names of
any other known crew members and state whether buried at this location or a
survivor: _____

15. If unidentified, supply any of the following information determinable:
a. Crew position in plane or vehicle: _____
b. Plane or vehicle serial number: _____ Type: _____
c. Installed weapons:

Serial Number	Calibre & Mfgr.	Serial Number	Calibre & Mfgr.
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

d. Engine serial number: _____ Type: _____

Thomas F. Pausley
Signature of Investigating Officer
End Lt. O-1313910

Rank 544th Cpl En. ASN _____
Disinterment approved by, (Hq Authorizing Exhumation) _____
Disinterment and *reburial/burial made by: _____
Date of *burial/reburial: _____
Place of *burial/reburial U.S. Military Cemetery: _____
Plot 1A Row 1A Grave 1A

NOTE: Additional particulars regarding
investigations will be placed on
additional sheet.

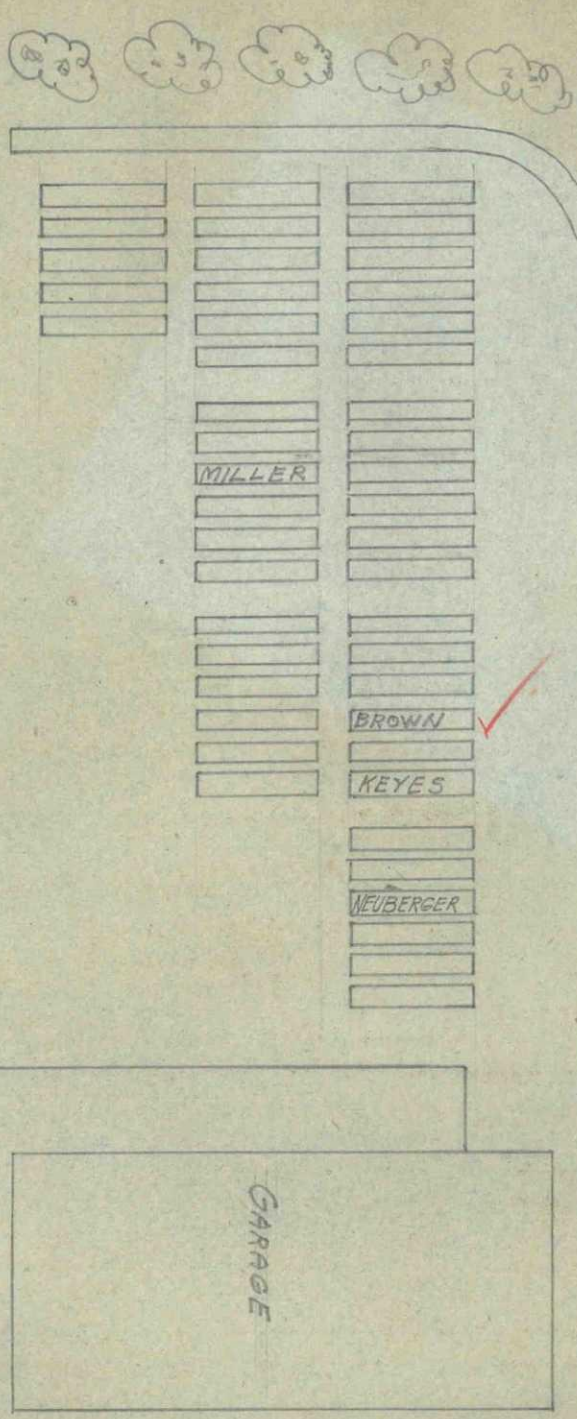
*Cross out words not applicable.

No 3

2673

VALOGNES
3058 QM GR. REG. CO. 4TH PLT.

REBURIED IN
BLOSVILLE CEM.
ROT ROW GR.
MILLER AA 5 100
BROWN " 8 141
NEUBERGER " 8 142
KEYES " 8 143



2673

121 Main Street
Oak Harbor, Ohio
March 27, 1945

The Quartermaster General
Army Service Forces
Washington 25, D. C.

With reference to letter your headquarters, dated 24 March 1945,
I am inclosing signed flag application.

Your letter stated official records of your office show that the remains of my husband, Technician Fourth Grade William C. Brown, were not recovered. However, I have received from the Quartermaster Effects Depot in Kansas City a wedding ring which I have identified as being my husbands. This ring was forwarded to me with a letter stating it had been received from overseas, and it did not come with the box of personal belongings I received several weeks later which leads me to believe that the remains of my husband had been recovered.

Request an effort be made to clarify this condition, and any further information will be deeply appreciated.

Very truly yours

(Mrs.) Carol L. Brown

COPY



121 Main Street
Oak Harbor, Ohio
March 27, 1945

The Quartermaster General
Army Service Forces
Washington 25, D. C.

With reference to letter your headquarters, dated 24 March 1945,
I am inclosing signed flag application.

Your letter stated official records of your office show that the
remains of my husband, Technician Fourth Grade William C. Brown, were
not recovered. However, I have received from the Quartermaster Effects
Depot in Kansas City a wedding ring which I have identified as being
my husband's. This ring was forwarded to me with a letter stating it
had been received from overseas, and it did not come with the box of
personal belongings I received several weeks later which leads me to
believe that the remains of my husband had been recovered.

Request an effort be made to clarify this condition, and any
further information will be deeply appreciated.

Very truly yours

(Mrs.) Carol L. Brown



COPY



WAR DEPARTMENT
MESSAGEFORM

March 2673
Date 31 May 1945

File No. SPQYG 293 Brown, William C.
S.N. 35 333 922
Office of origin Memorial Planning and Registration Graves Registration SPQYG 293
(Arm or service) (Division) (Branch) (Section) (Symbol)
Address 2nd and "T" Streets, S.W., Washington 25, D. C.

To:
The Effects Quartermaster
Kansas City Quartermaster
601 Hardesty Avenue
Kansas City 1, Missouri

PRECEDENCE	
WIRE OR RADIO	ESSENTIAL MILITARY MAIL
Urgent	Air mail
Priority	Special delivery
Routine	Ordinary <input checked="" type="checkbox"/>
Deferred	Registered
Week end	
Any message not X'd for precedence will be sent "Deferred."	
Initial of officer assigning precedence	

MESSAGE:

1. Your attention is invited to 2nd Paragraph of the inclosed copy of letter from Mrs. Carol Brown, wife of the late Technician Fourth Grade William C. Brown, 35 333 922.
2. It is requested that any information in your records regarding the above mentioned deceased's personal effects be forwarded this office so that further action may be taken to investigate the recovery of remains.

FOR THE QUARTERMASTER GENERAL:

1 Incl
Ltr from Mrs. Brown

Mayo A. Darling
MAYO A. DARLING
Lt Colonel, QMC
Assistant

INVENTORY OF EFFECTS
(See AR 600-550)

Brown William C. 35333322
(Last name) (First name) (Middle initial) (Army serial number)
late a T/4 Prcht. F/A
(Grade) (Organization or arm or service)

who died on ~~the~~ KIA day of _____, 19

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

NUMBER	ARTICLES	*PACKAGE NUMBER
I	belt money	
I	flash light	
2	testament	
5	holders pictures	
I	eye glasses	
I	billfold	
	book adress	
2	pouch tobacco	
I	kit sewing	
2	insignia batt.	
I	letter with 2 watches	
I	book aircraft <i>284</i>	
2	pipes smoking	
2	pen fountain	
I	radio	

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

CLASS II—Other effects

NUMBER	ARTICLES



Encl 2

11677

IMMEDIATE ACTION

WFH:LH:am

SPQDK 220.87 (127563)

1st Ind.

ARMY EFFECTS BUREAU, Kansas City Quartermaster Depot, 601 Hardesty Avenue,
Kansas City 1, Missouri, 8 June 1945

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

1. The ring referred to by Mrs. Brown and the personal effects of decedent listed on inclosed copy W.D., A.G.O. Form No. 54, dated 11 August 1944, APO 472, and signed by Everett E. Andrews, 2nd Lt., were received at this Bureau in the same shipment.

2. No information is available here regarding the source of the ring. Apparently it was forwarded from decedent's former organization, although it was not packed in the container with the other effects, nor listed on applicable Form No. 54. No overseas inventory accompanied the ring.

3. The two packages were not inventoried simultaneously here, and it so happened that the ring was sent to Mrs. Brown prior to the other effects.

For the Commanding Officer:

W. F. Hehrman
W. F. HEHRMAN
Major Q.M.C.
Asst. Effects Quartermaster

2 Incls--
Added--Incl 2--a/s

SPQYG 293 Brown, William C.
35 333 922

2nd Ind.

ASF, OQMG, Washington 25, D. C. 10 July 45

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

It is requested that this office be furnished all available information surrounding the death of the late Technician Fourth Grade William C. Brown, so that a further investigation may be made in an effort to recover the remains.

FOR THE QUARTERMASTER GENERAL:

Incls n/c

Arthur L. Warren
ARTHUR L. WARREN
Colonel, QMC
Assistant

MEMORIAL DIVISION

JUL 3 11 12 AM '45

KIA - 12 Jan 44
EA-24 Jan 44

2673

AGRD-C 201 Brown, William C. 3d Ind
(10 Jul 45)
WD, AGO, Demobilized Personnel Records Branch, High Point, N. C.
30 July 1945

TO: The Quartermaster General, Washington 25, D C

The official casualty message received from the Commanding General of the European Theater of Operations stated only that Technician Fourth Grade William C. Brown, 35 333 922, Field Artillery, was killed in action 12 June 1944 in France. Additional records have now been received which confirm this report and show that he was killed at Newbury, Berkshire, France. No further details regarding his death were received.

BY ORDER OF THE SECRETARY OF WAR:

Leopold W. ...
Adjutant General

Incls n/c

SPQYG 293 Brown, William C. 4th Ind.
35 333 922

ASF, OQMG, Washington 25, D. C. 8 Aug 45

TO: Commanding General, Comzone, ETO, APO 887, c/o PM, New York, N.Y.
FOR: The Chief Quartermaster

1. Attention is invited to basic communication and previous indorsements.
2. It is requested that a thorough check be made of Theater Records and if no definite record is on file regarding burial or failure to recover the remains, a search for conclusive evidence regarding the recovery of the remains should be conducted in the vicinity of Newbury, Berkshire, France, and a report furnished this office upon its completion.

FOR THE QUARTERMASTER GENERAL:

Incls n/c
IN
20 AUG. 1945
G.R.S.
APO 887
C-3906

Arthur L. Warren
ARTHUR L. WARREN
Colonel, QMC
Assistant
NEW
JUL 3 4 27 PM '45
CHIEF REGISTRATION SECTION

2673
Mauche

HEADQUARTERS 101st AIRBORNE DIVISION ARTILLERY
Office of the Chaplain
APO 472, U. S. Army

©

17 July 1945

SUBJECT: Location of Soldier's Grave.

TO : G-I, Headquarters 101st Airborne Division.

1. Letter received from Mrs. William C. Brown stating that communication from the Quartermaster General in Washington revealed that as late as 10 April 1945 no graves location was available for T/4 William C. Brown, 35333922, Hq. and Hq. and Service Battery, 377th Pchct. F. A. Bn. KIA in France 12 June 1944.

2. According to records of 377th Bn. T/4 Brown was buried by the Germans in a hospital yard at Valognes, Normandie and same was registered by the Germans.

3. It is not known if this information has ever reached the Commanding General, Communications Zone, ETOUSA, APO 887, "Attention: AG Casualty Division".



Robert L. Costner
ROBERT L. COSTNER
Chaplain (Capt.)
U. S. Army

201 - Brown, William C. (Enl) 1st Ind. JER/eag
(17 Jul 45)
HEADQUARTERS 101ST AIRBORNE DIVISION, APO 472, U. S. ARMY, 20 July 1945
TO: Commanding General, Third United States Army, APO 403, U. S. Army.

1. Request correspondence be forwarded to the proper authority to insure appropriate burial of soldier mentioned.
2. If a Graves Registration Form No. 1 is on file, request a copy be forwarded to this Headquarters so that the parents can be notified accordingly.

FOR THE COMMANDING GENERAL:

Recd
AG Cas Div.
22 JUL 1945

Jack E. Robbins
JACK E. ROBBINS,
Captain, AGD,
Asst. Adj. Gen.

2673

R E S T R I C T E D

B/L Hq 101st Airborne Div Artillery dtd 17 July 45 G-I, Hq 101st A/B Div
Subj: Location of Soldier's Grave.

AG 293.9 - GNMCQ-2 2nd Ind. FCK/dl
(17 July 45)
HEADQUARTERS THIRD US ARMY, OQM, APO 403, US Army, 25 July 1945.

TO: CG, Gr Reg Serv Comd., USFET, APO 887, US Army.

- 1. Forwarded for your information and necessary action.
- 2. No additional information is available at this headquarters concerning the remains of T/4 William C. Brown, 35333922.

For the Quartermaster:



Charles E. Hoy
CHARLES E. HOY,
Major, QMC,
Army GRO.

(Manche)
2673
RGD/CEB/bed

GRS

3rd Ind.

HQ US THEATER GRS. TSFET. APO 887, U.S. ARMY. (S: 10 Sept 45) 11 Aug 45.

TO: Graves Registration Officer, Chanor Base Section, APO 562, US Army.

1. With reference to basic communication - request investigation, disinterment and reburial be accomplished in conformance with existing procedure. GR Forms #1 and/or report of investigation will be attached to this correspondence and returned to this office by indorsement.

2. Further request, if reburial is made, a copy of GR Form #1 be forwarded to Hqs 101st Airborne Division, APO 472, and this office notified to that effect.

For the Director General:



F. C. Moore
F. C. MOORE
Capt. QMC
Adjutant.

R E S T R I C T E D

Manche 2673

(Manche 2673)

QM-GR 293.9

4th Ind.

JAS/α

OQM, HEADQUARTERS, CHANOR BASE SECTION, APO 562, U. S. ARMY, 15 Aug 1945.

TO: Commanding Officer, 306th QM Battalion, APO 562, U. S. Army.

1. Forwarded for compliance with 3rd Indorsement.

For the Base Section Quartermaster:

James A. Selss
JAMES A. SELSS
Captain,
Assistant



(Manche 2673)

QM-GR 293.9

5th Ind.

WLF/jfh

HEADQUARTERS, 306th QM BN, APO 562, US ARMY, 20 August 1945

TO: Commanding Officer, 3058th QM GR Co., APO 562, US Army.

For compliance with 3rd Indorsement.

By order of Lt Colonel HUNT:

W. L. Ferson
W. L. FERSON
1st Lt., QMC
Adjutant

(Manche 2673)

QM-GR 293.9

6th Ind.

TWP/ajb

HEADQUARTERS, 3058 QM GRAVES REGISTRATION CO., APO 562, US ARMY, 25 October 1945.

TO: Commanding Officer, 544th QM Bn., APO 562, U S Army.

1. In compliance with requests of basic communication and 3rd Indorsement Investigation, disinterment, and reburial was accomplished.

2. GRS Form #1, Report of Investigation, and Sketch are attached to this correspondence.

3. In compliance with par 2, 3rd Indorsement a copy of GRS Form #1 together with Report of Investigation, and Sketch have been forwarded to Hqs 101st Airborne Division.

Thomas W. Parsons
THOMAS W. PARSONS
2nd Lt. INF
Commanding

- 3 Incl: 1-GRS Form #1
2-Report of Investigation
3-Sketch

Manche 2673

(Manche 2673)
QM-GR 293.9

7th Ind.

CHD/ik

HEADQUARTERS, 544TH QM BATTALION, APO 562, U S ARMY, 29 October 1945.

TO: Commanding Officer, American Graves Registration Command, Hq, Western Zone,
APO 562, US Army.

Attention is invited to 6th Ind. and attached inclosures.

For the Commanding Officer:

Charles H. Dickey
CHARLES H. DICKEY,
1st Lt, QMC
Adjutant

3 Incl: n/c



(Manche 2673)
QM-GR 293.9

8th Ind.

JGG/WGS/e

AMERICAN GRAVES REGISTRATION COMMAND, HQ. WESTERN ZONE, 531ST QM
GROUP, APO 562, U.S.ARMY, 5 NOVEMBER 1945.

TO: Commanding General, American Graves Registration Command,
Theater Service Forces European Theater, APO 887, US Army.

3 Incl: n/c



J. G. G.

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	GRADE	SERIAL NUMBER	COMPONENT
William C. Brown	Teo 4	35333922	Army

I certify that the sum of \$ 225.00 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	CITY OR COUNTY	STATE
Riverview	Port Clinton	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 three copies) To:
AMERICAN GRAVES REGISTRATION DIVISION
COLUMBUS GENERAL DISTRIBUTION DEPOT
COLUMBUS 15 OHIO

SIGNATURE OF CLAIMANT

Leslie Brown

ADDRESS OF CLAIMANT (City, Street or RFD, and State)

Port Clinton 317 Harrison Ohio

RELATIONSHIP TO DECEDENT

Father

DATE

4-29-48

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 \$ 71.48 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:

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

6/2/48

ADDRESS OF CLAIMANT (City, Street or RFD, and State)

RELATIONSHIP TO DECEDENT

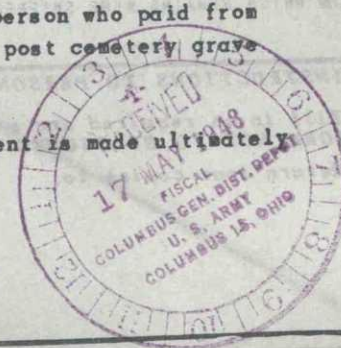
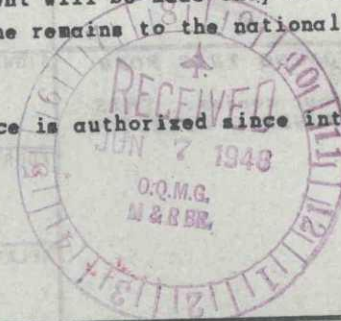
DATE

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 site.
4. No interment expense allowance is authorized since interment is made ultimately in a national or post cemetery.



REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

T/4 William C. Brown, 33 333 922
Plot AA, Row 8, Grave 1A1,
United States Military Cemetery
Bloisville, France

15 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, Leslie Brown

(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 checked="" type="checkbox"/> FATHER | <input 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.)

- | |
|--|
| <input type="checkbox"/> 1. BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS. |
| <input checked="" type="checkbox"/> 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY
<u>Riverview Cemetery, Port Clinton, Ohio</u>
(NAME AND LOCATION OF CEMETERY) |
| <input type="checkbox"/> 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) |
| <input type="checkbox"/> 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)
<input type="checkbox"/> YES <input type="checkbox"/> 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.)

*100 Processed
in Nov. 47 RKS*

*coded 27 Oct 47
Gallagher*

OCT 16

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
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS	STATE OR TERRITORY OF U. S. A., OR COUNTRY
		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			
Gerner & Wolf Funeral Directors			
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
119 Madison St.	Port Clinton	Ottawa	Ohio
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS	TELEPHONE No.	
Port Clinton, O.	Port Clinton, O.	9511	

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	FIRST NAME	MIDDLE INITIAL	RELATIONSHIP TO DECEASED
Brown	Edna	M.	Mother
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
317 Harrison Street	Port Clinton	Ottawa	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.

Leslie Brown (SIGNATURE OF NEXT OF KIN) 317 Harrison Street (STREET AND NUMBER)
Leslie Brown (NAME PRINTED OR TYPED) Port Clinton, Ohio (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 22nd day of Sept.,
1947, at city (or town) of Port Clinton, county of Ottawa, and State (or Territory or
District) of Ohio

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

Ezra E. Hiss
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)
EZRA E. HISS, Notary Public
My commission expires Jan. 5, 1950
(OFFICIAL TITLE)

PART II — RELINQUISHMENT OF DISPOSITION AUTHORITY

If you are the next of kin and you desire to relinquish your disposition authority, please fill in PART II of this form.

I, THE _____, (PLEASE INSERT RELATIONSHIP) _____, AS THE NEXT OF KIN OF THE DECEASED NAMED IN PART I OF THIS FORM, DO HEREBY RELINQUISH MY RIGHTS TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED. THE NEXT EXISTING PERSON IN THE ORDER OF ELIGIBILITY OF DECEDENT'S SURVIVORS IS:

LAST NAME	FIRST NAME	MIDDLE INITIAL
RELATIONSHIP TO THE DECEASED		
NUMBER AND STREET	CITY OR TOWN	STATE OR COUNTRY

WHOM I UNDERSTAND SHALL HAVE THE RIGHT TO DIRECT FINAL DISPOSITION OF THE REMAINS OF THE DECEASED.

_____	_____ (DATE)
(SIGNATURE OF NEXT OF KIN)	(STREET AND NUMBER)
_____	_____
(NAME PRINTED OR TYPED)	(CITY AND STATE)

PART III

If you are NOT the next of kin authorized to direct the disposition of remains, please fill in PART III of this form.

THIS IS TO NOTIFY YOU THAT I AM NOT THE NEXT OF KIN AUTHORIZED TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED NAMED ON PAGE 1 OF THIS FORM. THE FOLLOWING PERSON, TO THE BEST OF MY KNOWLEDGE, IS THE NEXT OF KIN TO WHOM THIS FORM SHOULD BE DIRECTED.

LAST NAME	FIRST NAME	MIDDLE INITIAL
RELATIONSHIP TO THE DECEASED		
NUMBER AND STREET	CITY OR TOWN	STATE OR COUNTRY

_____	_____ (DATE)
(SIGNATURE)	(STREET AND NUMBER)
_____	_____
(NAME PRINTED OR TYPED)	(CITY AND STATE)