

293 FOSTER, JAMES S. 42086433 PVT. INF. EUR. AREA (N.Y) 1145eg

ORIGINAL

RECEIPT OF REMAINS

DISTRIBUTION CENTER HEADQUARTERS, NYPE
DISTRIBUTION CENTER #1, AGRS ROUTINE
58th ST. & 1st AVE., BROOKLYN, NEW YORK
REMAINS CONSIGNED TO:

RICHARD M GARFIELD UNDERTAKER
515 WESTCOTT ST
SYRACUSE N Y

REMAINS OF THE LATE PVT JAMES S FOSTER -42186433 ACCOMPANIED BY AN
ESCORT ARE SCHEDULED TO LEAVE NEW YORK ON TRAIN
NUMBER 5 NEW YORK CENTRAL RAILROAD AT NINE FIFTEEN AM EST
ON FRIDAY 12 AUGUST AND DUE TO ARRIVE AT SYRACUSE
AT FOUR FORTY PM ON SAME DATE

PLEASE ARRANGE TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL AND
PLEASE NOTIFY THE NEXT OF KIN OF THE DATE AND TIME OF ARRIVAL.

ESCORT CPL JOHN KERMIDAS
RA 33 464 317
DET 5 1300th ASU CO A

G. H. BARE
COLONEL, QMC

NAT
FILE
RECORDS ANNOTATED
DATE 29 Aug. 49
NAME Shupline
R & B BR.

I, the undersigned, do hereby acknowledge receipt of the remains of the above-named deceased
this 12 day of Aug., 1949
(Day) (Month)

Cpl. John Kermidas
33464717 (Witness (Escort)) A.G.F.

Richard M. Garfield
(Consignee)

1							DISINTERMENT DIRECTIVE			JEW ^{RMS}	
SECTION A — NAME AND BURIAL LOCATION OF DECEASED					DIRECTIVE NUMBER 1240 04993		DATE 15 05 49 DAY MONTH YEAR				
NAME FOSTER JAMES S			SERIAL NUMBER 42086433		GRADE PVT	ARM 1	RACE 1	RELIGION 1			
CEMETERY HENRI CHAPELLE BELGIUM			PLOT WW	ROW 10	GRAVE 187	DISPOSITION OF REMAINS 2300 01 CODE DIST. CTR.					
SECTION B — CONSIGNEE AND NEXT OF KIN											
NAME AND ADDRESS OF CONSIGNEE RICHARD M. GARFIELD UNDERTAKER 515 WESTCOTT STREET SYRACUSE, NEW YORK (SEE ATTACHED INSTRUCTIONS)					NAME AND ADDRESS OF NEXT OF KIN FRED F. FOSTER (FATHER) C/O UNIVERSITY BOOK STORE SYRACUSE UNIVERSITY 303 UNIVERSITY PLACE SYRACUSE, NEW YORK						
SECTION C — DISINTERMENT AND IDENTIFICATION											
NAME FOSTER JAMES S		SERIAL NUMBER 42086433		GRADE PVT	DATE OF DEATH 22 OCT 47		DATE DISTINTERRED				
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION USAGF			RELIGION P	IDENTIFICATION VERIFIED BY ROBERT C. MALLERY 1/IT INF FOS NAME AND TITLE						
SECTION D — PREPARATION OF REMAINS FOR SHIPMENT											
NATURE OF BURIAL MATTRESS COVER & UNIFORM				CONDITION OF REMAINS CRUSHED SKULL. BODY COMPLETE.							
OTHER MEANS OF IDENTIFICATION F-6433 IN FIELD JACKET. GROUND FORCE CLOTHING.											
MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.) NONE											
REMAINS PREPARED AND PLACED IN CASKET											
DATE 5 NOV 1947			BY ARTHUR J. DUPUIS, EMBALMER	EMBALMER (Signature) ARTHUR J. DUPUIS, EMBALMER							
CASKET BOXED AND MARKED DATE 5 NOV 47			BY JACK A. RUSSO CLERK RECORDER		SHIPPING ADDRESS VERIFIED BY ARTHUR J. DUPUIS, EMBALMER						
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.											
SIGNATURE OF AGRS INSPECTOR RAYMOND G. JOHNSON, 1/IT INF											
REMARKS AND SPECIAL INSTRUCTIONS I certify that the entries on this form are true copies of the entries on Copy Number 4 of this Disinterment Directive which contains the signatures of the persons whose names are typed hereon. Raymond G. Johnson, 1st Lt. Inf.											
QMC FORM REV 11 FEB 48 1194											

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC HENRI CHAPELLE, BELGIUM	TO ANTWERP PORT, PIER 140
KIND OF CONVEYANCE TRUCK	NAME OF CONVOYER PPC ALEX THERIOT JR #080592
SIGNATURE OF SHIPPER <i>Gustav Hoffman</i> GUSTAV HOFFMAN CAPT INF	DATE 1/7/49
SIGNATURE OF RECEIVER <i>Robert D Miller</i> ROBERT D MILLER LT COL TC	DATE 1/7/49

2. SHIPPED

FROM AGRC ANTWERP BELGIUM	TO USAT GARROLL VICTORY
KIND OF CONVEYANCE VC. 2	NAME OF CONVOYER Joseph J. CAVIN Jr., 1/Dt. F.A.
SIGNATURE OF SHIPPER R. D. MILLER, LT COL. T.C.	DATE 26 JUL 1949
SIGNATURE OF RECEIVER <i>Joseph J. Cavin Jr.</i>	DATE 26 JUL 1949

3. SHIPPED

FROM NYPE	TO NYPE
KIND OF CONVEYANCE TRAILER	NAME OF CONVOYER PORT TRANSPORTATION OFFICER
SIGNATURE OF SHIPPER <i>[Signature]</i>	DATE AUG 5 1949
SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE AUG 5 1949

4. SHIPPED

FROM NYPE	TO DC#01
KIND OF CONVEYANCE TRAILER	NAME OF CONVOYER H. O. YOUNG
SIGNATURE OF SHIPPER <i>[Signature]</i>	DATE 8/5
SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE AUG 5 1949

5. SHIPPED

FROM (SEE ATTACHED INSTRUCTIONS)	TO NEW YORK
KIND OF CONVEYANCE TRAILER	NAME OF CONVOYER 305 WILKESVILLE BRIDGE
SIGNATURE OF SHIPPER <i>[Signature]</i>	DATE 8/5
SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE AUG 5 1949

6. SHIPPED

FROM CHARD W. CABRIETO UNDERWAY	TO RED L. BOSIER (EVIKER)
KIND OF CONVEYANCE TRAILER	NAME OF CONVOYER 305 WILKESVILLE BRIDGE
SIGNATURE OF SHIPPER <i>[Signature]</i>	DATE 8/5
SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE AUG 5 1949

7. SHIPPED

FROM (SEE ATTACHED INSTRUCTIONS)	TO NEW YORK
KIND OF CONVEYANCE TRAILER	NAME OF CONVOYER 305 WILKESVILLE BRIDGE
SIGNATURE OF SHIPPER <i>[Signature]</i>	DATE 8/5
SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE AUG 5 1949

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

SPECIAL INSTRUCTION SHEET

Supplement to Disinterment
Directive No. 04993

DATE 13 May 1949

OVERSEAS BURIAL LOCATION:

NAME Foster, James, Pvt, 42 086 433

CEMETERY Henri-Chapelle, Belgium

PLCP WW ROW 10 GRAVE 187

1. The next of kin, father, Mr. Frederick Frank Foster, c/o University Book Store, Syracuse University, 303 University Place, Syracuse, New York, requests that remains of his son be held at Port until further notified what date remains are to be shipped.

2. Request your office take necessary action in regard to the above.

T. E. Mulligan
Capt, QMC
Memorial Division

INSPECTION CHECK LIST						SPACE NO.	
CASE NO.		NAME OF DECEASED (Last, First, Middle Initial)				BRANCH OF SERVICE	
		FOSTER JAMES S				AGF	
		RACE		RELIGION		SEX	
		W				M	
RANK OR GRADE		SERIAL NUMBER		CONSIGNEE			
PVT		42086433		RICHARD M GARFIELD 515 WESTCOTT ST SYRACUSE N Y			
SHIPPING CASE—GENERAL APPEARANCE (Check ONLY Discrepancies)				CONDITION OF SHIPPING CASE (Check One)			
<input checked="" type="checkbox"/> FINISH (Exterior) <input checked="" type="checkbox"/> FINISH (Interior) <input checked="" type="checkbox"/> HANDLES <input checked="" type="checkbox"/> HANDLE BOLTS <input checked="" type="checkbox"/> STENCILING—NAME PLATE <input checked="" type="checkbox"/> HEALTH PERMIT MARKER <input checked="" type="checkbox"/> HEALTH PERMIT NUMBER NY-032-R				<input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY REMARKS <div style="text-align: center; font-size: 2em;">OK</div>			
CASKET—GENERAL APPEARANCE (Check ONLY Discrepancies)				CONDITION OF CASKET (Check One)			
<input checked="" type="checkbox"/> FINISH (Exterior) <input checked="" type="checkbox"/> HANDLES AND FASTENINGS <input checked="" type="checkbox"/> STENCILING—NAME PLATE <input checked="" type="checkbox"/> CAM LOCKS (Sealing) <input checked="" type="checkbox"/> ODOR OR MOISTURE				<input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY REMARKS <div style="text-align: center; font-size: 2em;">OK</div>			
ROUTED THROUGH							
<input type="checkbox"/> MORTUARY OPERATING ROOM <input type="checkbox"/> REPAIR SHOP				<input type="checkbox"/> CASKET REPAIRED			
CONDITION OF REMAINS <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY				<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	
						M. Newmark	
REMARKS							

SYRACUSE UNIVERSITY BOOK STORE

Three Hundred and Three University Place
SYRACUSE 10, NEW YORK

August 4, 1949.

Colonel G. H. Bare, Q.M.C.,
Distribution Center One,
New York Port of Embarkation,
New York, N.Y.

1-7 Aug.

Dear Colonel Bare;

Confirmation of telegram of 4, August,
1949:

Remains of Private James Slater Foster should
be shipped to Richard M. Garfield, 515 Westcott St.,
Syracuse, New York. Funeral service to be held
August 15, 1949.

Very truly yours,

Fred F. Foster

IN OUT

AUG 8 9 40 AM 1949

DC. #1. AGRS
NYPE

TO: DIRECTOR, FEDERAL BUREAU OF INVESTIGATION
FROM: SAC, NEW YORK (100-157341)
SUBJECT: [Illegible]

RECEIVED
FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE
NEW YORK OFFICE

RECEIVED

AGRD

1949 AUG 4 15 06

RECEIVED

WU105 27 COLLECT

SYRACUSE NY AUG 4 909A

COLONEL G H BARE QMC DISTRIB CENTER 1

REMAINS OF PVT JAMES SLATER FOSTER SHOULD BE SHIPPED TO RICHARD
M GARFIELD 515 WESTCOTT XXXX ST SYRACUSE NY FUNERAL ~~XXXXX~~
SERVICES TO BE HELD AUGUST 15TH 1949

FRED F FOSTER

955A

515 15 1949.

Distribution center #1
NEW YORK PORT OF EMBARKATION
BROOKLYN, NEW YORK

I certify that this message is an official business and that its transmission with a lower precedence, or by air mail, regular mail, or scheduled messenger would be prejudicial to the public interest.

FRED F FOSTER

C/O UNIVERSITY BOOK STORE

SYRACUSE UNIVERSITY

303 UNIVERSITY PLACE

SYRACUSE N Y

James McCarthy
JAMES McCARTHY
Major, TC
Admin O, AGR Div.

CARROLL VICTORY

PLEASE BE ADVISED THE REMAINS OF THE LATE

ARE ENROUTE TO THE UNITED STATES. ^{PVT JAMES S FOSTER} OUR RECORDS INDICATE YOU WISH REMAINS DELIVERED TO

RICHARD M GARFIELD 515 WESTCOTT ST SYRACUSE N Y

~~WE CANNOT GIVE A DEFINITE DELIVERY DATE. IT IS EXPECTED THAT AN INTERVAL OF SEVERAL WEEKS WILL ELAPSE BEFORE DELIVERY CAN BE EFFECTED. YOUR FUNERAL DIRECTOR WILL BE NOTIFIED BY TELEGRAM THREE DAYS PRIOR TO DELIVERY GIVING DATE AND TIME REMAINS WILL ARRIVE AT RAILROAD STATION. PLEASE INSTRUCT FUNERAL DIRECTOR TO ACCEPT REMAINS AT RAILROAD STATION ON ARRIVAL. HE WILL BE REQUESTED TO INFORM YOU SO YOU MAY MAKE FINAL FUNERAL ARRANGEMENTS. REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. SUGGEST YOU ARRANGE WITH LOCAL PATRIOTIC OR VETERANS' ORGANIZATION IF YOU DESIRE MILITARY HONORS AT FUNERAL. PLEASE CONFIRM ABOVE DELIVERY INSTRUCTIONS WITHIN FORTY EIGHT HOURS OF RECEIPT OF THIS MESSAGE BY TELEGRAM COLLECT TO DISTRIBUTION CENTER ONE, NEW YORK PORT OF EMBARKATION OR SUBMIT NEW INSTRUCTIONS. WE REGRET IT WILL BE IMPOSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER EXPIRATION OF THE FORTY EIGHT HOURS. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.~~

Remains will be held until desired delivery date is received from you. Please give not less than 10 days advance notice.

DOG (REV)

G. H. BARE
COL, QMC

RELEASED TO W U
3 AUGUST 48

99



WNY 40136

REQUEST FOR REIMBURSEMENT OF INTERMENT OR TRANSPORTATION EXPENSES <small>(Read Explanation on Reverse Side before completing form)</small>		1. DATE 8/15/49
2. NAME OF DECEDENT (Last, First, Middle Initial) FOSTER JAMES B		3. BRANCH OF SERVICE IGT
4. RANK OR GRADE PVT	5. SERIAL NO. 42086433	6. A. <input checked="" type="checkbox"/> INTERMENT EXPENSES <small>(Civilian or Private Cemetery)</small> B. <input type="checkbox"/> TRANSPORTATION EXPENSES <small>(National or Post Cemetery)</small>
7. <input checked="" type="checkbox"/> IF WORLD WAR II DECEASED, CHECK BOX. IF CURRENT DECEASED, ENTER DATE OF DEATH.		
INSTRUCTIONS TO INITIATING INSTALLATION		
Fill in items 1 through 7 and item 10. Cross out item 8 or item 9, whichever is not applicable. Stamp "Ribbon" copy "ORIGINAL." Stamp carbon copies "COPY."		
INSTRUCTIONS TO PERSONS SIGNING THIS FORM		
This form is to be signed by the claimant and NOT by the funeral director. Complete the original and three copies. SIGN ORIGINAL ONLY.		
8. FILL IN THIS STATEMENT IF BOX "A" IS CHECKED		9. FILL IN THIS STATEMENT IF BOX "B" IS CHECKED
I certify that the sum of \$ 365. was paid by me from personal funds in connection with the interment of the remains of the above-named decedent in the cemetery indicated below: NAME: Oakwood Cemetery CITY OR COUNTY: Syracuse STATE: N.Y.		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: (City, town, or place from which remains were shipped) TO: (Name and location of National or Post Cemetery) _____
10. RETURN THE ORIGINAL AND THREE COPIES TO:		11. SIGNATURE OF CLAIMANT Lred F. Foster
		12. ADDRESS (Street number or RFD, City and State) 222 Kensington Pl - Syracuse N.Y.
		13. RELATIONSHIP TO DECEDENT Sister
REMARKS: <div style="text-align: right;">J. C. Kovarik Col., F. D. Brooklyn, N. Y. AUG 1949 Syr 215-130 S.</div> <p style="text-align: center; font-size: 2em; opacity: 0.5;">COPY</p>		

EXPLANATION OF BOX "A"

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 BOX "B"

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.

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

SPECIAL INSTRUCTION SHEET

Supplement to Disinterment
Directive No. 04993

DATE 13 May 1949

OVERSEAS BURIAL LOCATION:

NAME Foster, James S., Pvt. 42 086 433

CEMESTERY Henri-Chapelle, Belgium

PLOT WW ROW 10 GRAVE 187

1. The next of kin, father, Mr. Frederick Frank Foster, c/o University Book Store, Syracuse University, 303 University Place, Syracuse, New York, requests that remains of his son be held at Port until further notified what date remains are to be shipped.

2. Request your office take necessary action in regard to the above.

T. E. Mulligan
Capt, QMC
Memorial Division

EU 22517

EUA366 RR UEPOG

UEP 172P 73/77 COLLECT

SYRACUSE NY MAR 22 1949 339P

SMITH MEMORIAL DIVISION OQMG

WASHDC

*Henri Chapelle
(Purdh)*

9/1 7/1

O.D.M.G.
ENL & CAB
SECTION

MAR 23 9 31 AM '49

PURSUANT YOUR INSTRUCTIONS IN TELEGRAM 5 MARCH 49 REQUEST
DISPOITXXXXX DISPOSITION OF REMAINS OF PVT JAMES FOSTER 4-208-6433 BE
AS FOLLOWS RETURN FROM HENRI HXXXXXX CHAPELLE BELGIUM TO THIS
COUNTRY AND HELD AT PORT OF NY UNTIL SECOND OR THIRD WEEK OF AUGUST
1949 BURIAL WILL BE IN PRIVATE CEMETERY SYRACUSE NY AT THAT
TIME UNDERTAKER RICHARD N GARFIELD 515 WESTCOTT STREET
SYRACUSE NY IS DESIGNATED TO RECEIVE REMAINS IN SYRACUSE
WHEN SPECIFIC DATE IN AUGUST IS SET

FRED F FOSTER

447P

5 49 4-208-6433 1949 515..

FATHER NOK

NOK address:

*90 University (Bank Store)
Syracuse University
303 University Place
Syracuse NY*

*OP#2
consequence
date indicated
mdd*

*Henri-Chapelle
2 W-10-187*

*Coded
24 May 49
m Baker*

Used in lieu of 345

MAY 12 1949



*D. Baker
12 May 49*

X Taylor

Cleared to 1 unit
24 Mar 49 - 3:00
A. W. Wmley

MAR 23 1949



TO: SAC, NEW YORK

FROM: SAC, BOSTON

SUBJECT: [Illegible]

RE: [Illegible]

[Illegible typed text, likely a memorandum or letter body]

VERY TRULY YOURS,

[Illegible signature]

[Illegible typed text]

[Illegible typed text]

[Illegible typed text]

[Handwritten notes or initials]

REPAIRATION
RECORDS BRANCH
MAY 13 4 16 PM '49
MEMORIAL DIVISION

A
Pvt. James B. Foster, 42 086 433
Plot WW, Row 10, Grave 187,
United States Military Cemetery
Henri-Chapelle, Belgium

Jim

13 May 1947

Mr. Frederick Frank Foster
222 Kensington Place
Syracuse, New York

Dear Mr. Foster:

Reference is made to the "Letter of Inquiry - Disposition of Remains" sent to you about 45 days ago, requesting you to complete and mail the "Request for Disposition of Remains" form.

Since no reply has been received, you are again respectfully urged to return this completed form at the earliest possible date in order to avoid any unnecessary delay in the final disposition of the remains of your loved one.

Due to the tremendous amount of work involved in carrying out final burial arrangements for all of the deceased Americans of World War II, this program must proceed cemetery by cemetery in each area of the world.

The cemetery in which the remains of your loved one are buried is expected to be evacuated in the near future. In the absence of any reply from you by that time, the Government will assume that you have no objection to the final burial of the deceased in a permanent American Military Cemetery Overseas.

Sincerely,

G. A. HORKAN
Brigadier General, GMC
Chief, Memorial Division

May 16 1 49 PM '47
O D M G
RECORDS BRANCH

fgw
REGISTERED
1352246

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

FORM 3811
Rev. 1-4-40

RETURN RECEIPT

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

1 Fred J. Butler
(Signature or name of addressee)

2 C. H. Hewitt
(Signature of addressee's agent—Agent should enter addressee's name on line ONE above)

Date of delivery 5/14/47, 1947

**3 JUL 1947
FILE**

Post Office Department
OFFICIAL BUSINESS

PENALTY FOR PRIVATE USE TO AVOID PAYMENT OF POSTAGE, \$300

293



Return to The Office of The Quartermaster General
(NAME OF SENDER)

Street and Number,
or Post Office Box. 2nd & T Sts. S.W., Room 1250 Tempe. Bldg-A

REGISTERED ARTICLE

No. 1352246

INSURED PARCEL

WASHINGTON,

D. C.

No. _____

E

EU 23597

EUA039 *293 Foster, James S.*
R UEPOG

6871

9 0. M. S.
EL. & CAB
SECTION
MAR 21 8 20 AM '49

UEP 175P/80/79 COLLECT

SYRACUSE NY MAR 18 1949 339P

CAPT J S VOGL FAMILY BRANCH

MEMORIAL DIV OQMG DEPT OF ARMY WASHDC

PURSUANT YOUR INSTRUCTIONS IN TELEGRAM 5 MARCH 49 REQUEST
DISPOSITION OF REMAINS OF PVT ²⁹³ JAMES S FOSTER 4-208-6433 BE AS
FOLLOWS RETURNED FROM HENRY CHAPELL BELGIUM TO THIS COUNTRY
AND HELD AT PORT OF NEW YORK UNTIL SECOND OR THIRD WEEK OF
AUGUST 1949 BURIAL WILL BE IN PRIVATE CEMETERY SYRACUSE NY AT
THAT TIME UNDERTAKER RICHARD W GARFIELD 515 WESTCOTT ST
SYRACUSE NY IS DESIGNATED TO RECEIVE REMAINS IN SYRACUSE WHEN
SPECIFIC DATE IN AUGUST IS SET

FRED F FOSTER

515P

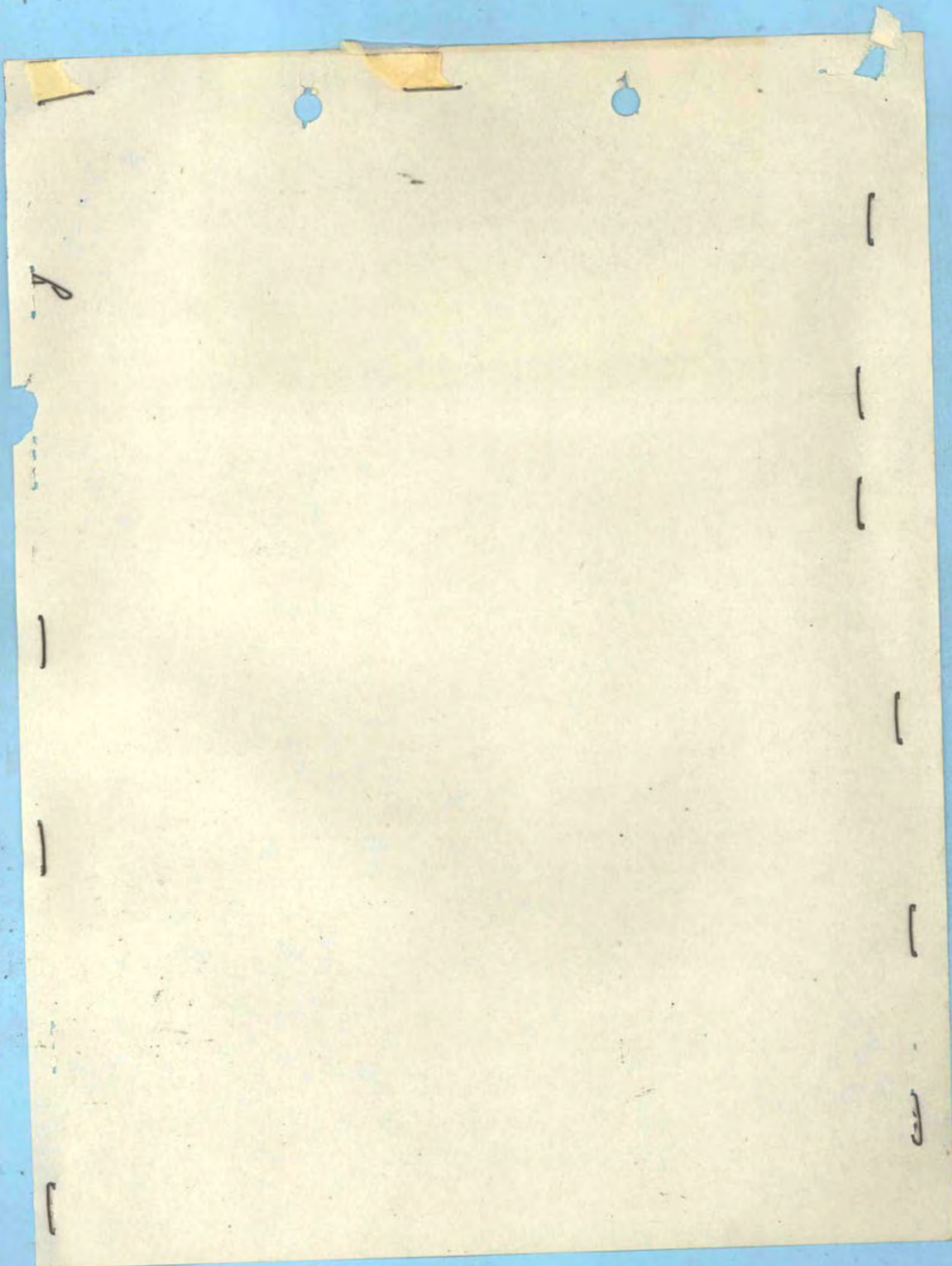
5) 49 4-208-6433 1949 515..

Henri-Chapelle
2W-10-187

Henri-Chapelle
2W-10-187
FC

mem FC
RFA

Pray
MAR 21 1949
RECEIVED
FAMILY CORPSE BRANCH
DATE
RECEIVED
FAMILY CORPSE BRANCH



ONONDAGA COUNTY
OFFICE OF
COUNTY VETERANS' SERVICE AGENCY
N.Y.S. DIVISION OF VETERANS' AFFAIRS
SYRACUSE, N. Y.

DIRECTOR
H. S. SMITH

N.Y.S. VETERANS' COUNSELORS
J. H. GREGORY
R. G. DOWER

~~March 23, 1949~~

257

Captain J. F. Vogl
Family Relation Branch
Memorial Division
Office Quartermaster General
Department of the Army
Washington 25, D. C.

change 333 card

297

Dear Captain Vogl:

Mr. Fred F. Foster, the father of James S. Foster, ASN 42086433, deceased, has asked me to write to you requesting that all future communications relative to the return of his son to this country, and subsequent reburial some time in August, be addressed directly to him at the following address; Fred F. Foster, Manager, University Bookstore, Syracuse University, 303 University Place, Syracuse 10, New York. This would include telegrams.

The reason this request is made is that Mrs. Foster, the mother of the deceased serviceman, is inclined to be hysterical upon receipt of any communication received from either your office or the Port of New York and Mr. Foster, of course, would appreciate your cooperation to save Mrs. Foster any needless upsets.

Thank you so much for your cooperation.

Sincerely,

Harvey S. Smith
HARVEY S. SMITH, Director
Lt. Col., USAF, Ret.

HSS:VT
C-438

FILED
Name *P. Gray*
Action *10/10/49*
Date *10/10/49*
Acceptance Section
City Corres. Branch

*Hon. Chapelle
WV - 10-187*

CHENANGO COUNTY
COUNTY VETERANS SERVICE AGENCY
N.Y. DIVISION OF VETERANS' AFFAIRS
SYRACUSE, N. Y.

Dear Sirs:

Enclosed for you are two copies of a letterhead memorandum (LHM) dated and captioned as above. This LHM was prepared by the Syracuse Office of the New York State Division of Veterans' Affairs, and is being furnished to you for your information and guidance.

The LHM contains information regarding the status of the application for a Certificate of Appreciation for the service of the late [Name], who served in the United States Army during World War II. The application was filed on [Date] and is currently being processed by the Department of Veterans Affairs, Washington, D.C.

Should you have any questions regarding this matter, please contact the Syracuse Office of the New York State Division of Veterans' Affairs at [Address].

Very truly yours,
[Signature]



REQUEST FOR DISPOSITION OF REMAINS

L3/22/49

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

DATE: 2.7

33
711

Pvt. James S. Foster, 42 086 433
Plot WW, Row 10, Grave 137, *OK*
United States Military Cemetery
Henri-Chapelle, Belgium

4 March 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, FRED F. FOSTER

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

(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

- 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
Morningside Cemetery SYRACUSE, N.Y.
(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 _____ (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.)

FILE
Name _____
Date _____
Acceptance Section
Family Corre. Branch
PAGE 1

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 Foster	FIRST NAME FRED	MIDDLE INITIAL F
NUMBER AND STREET 222 Kensington Place	CITY OR TOWN SYRACUSE 10	COUNTY OR PROVINCE ONONDAGA
EXPRESS OFFICE (Nearest railroad passenger station) SYRACUSE, N.Y.	TELEGRAPH ADDRESS ABOVE	STATE OR TERRITORY OF U. S. A., OR COUNTRY NEW YORK
		TELEPHONE No. 6-1158

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 Richard M. Garfield			
NUMBER AND STREET 515 Westcott St.	CITY OR TOWN SYRACUSE 10	COUNTY OR PROVINCE ONONDAGA	STATE OR TERRITORY OF U. S. A., OR COUNTRY NEW YORK
EXPRESS OFFICE (Nearest railroad passenger station) SYRACUSE, N.Y.	TELEGRAPH ADDRESS —		TELEPHONE No. 5-1457

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 Foster	FIRST NAME MARGARET	MIDDLE-INITIAL B.	RELATIONSHIP TO DECEASED Mother
NUMBER AND STREET 222 Kensington Place	CITY OR TOWN SYRACUSE 10	COUNTY OR PROVINCE ONONDAGA	STATE OR TERRITORY OF U. S. A., OR COUNTRY NEW YORK

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.

Fred F. Foster (SIGNATURE OF NEXT OF KIN) 222 Kensington Place (STREET AND NUMBER)
FRED F. FOSTER (NAME PRINTED OR TYPED) SYRACUSE 10, NEW YORK. (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 30th day of July, 1947, at city (or town) of Syracuse, county of Onondaga, and State (or Territory or District) of New York

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

Harvey S. Smith (SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)
 HARVEY S. SMITH, Notary Public to the State of New York, Commission Expires March 31, 1949—60411-1 (1934)

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 _____, AS THE NEXT OF KIN OF THE DECEASED
(PLEASE INSERT RELATIONSHIP)
 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)
_____	_____ (CITY AND STATE)
(NAME PRINTED OR TYPED)	

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 I 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)
_____	_____ (CITY AND STATE)
(NAME PRINTED OR TYPED)	

ADDITIONAL REMARKS AND INSTRUCTIONS

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

Request that remains be held in Port of New York until August 1949. I will notify you as to specific date in that month that I desire remains shipped to Syracuse, Ny.



QMGMY 293
Foster, James S.
SN 42 086 433

25 March 1949

Lt. Col. Harvey S. Smith, USAF, Retired
County Veterans' Service Agency
108 North Salina Street
Syracuse 2, New York

Dear Colonel Smith:

I wish to acknowledge your letter of 23 March 1949, in which you refer to the case of the late Private James S. Foster.

Please be assured that all future communications will be addressed to Mr. Fred F. Foster in care of the University Bookstore, Syracuse University, 303 University Place, Syracuse 10, New York.

Please accept my appreciation for your assistance in securing disposition instructions from Mr. Foster.

Sincerely yours,

J. F. VOGL
Captain, QMC
Memorial Division

MAR 25 3 50 PM '49
OQMG M&R BR

MAR 25 1949
OUT
FAMILY CORRESP. BR.
FAM. LETTERS SECT.
MEM. DIV.

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

FROM: (Originator) QMGMF DEPT OF ARMY WASH DC SNOWDEN EXT 6535		SPACE ABOVE FOR SIGNAL CENTER ONLY	
ACTION TO:		SECURITY CLASSIFICATION UNCLASSIFIED	
<ul style="list-style-type: none"> MR FREDERICK F FOSTER 222 KENSINGTON PLACE SYRACUSE NEW YORK 		PRECEDENCE FOR ACTION INFORMATION PRIORITY	
INFORMATION TO:		<input checked="" type="checkbox"/> ORIGINAL MESSAGE	
		REFERS TO ANOTHER MESSAGE IDENTIFICATION CLASSIFICATION	

CHARGE GRAVES WW II

DISPOSITION INSTRUCTIONS REMAINS OF YOUR LATE **SON PRIVATE**

293 JAMES S FOSTER 42 086 433

NOT YET RECEIVED. ^{me} UNLESS YOUR INSTRUCTIONS FOR DISPOSITION ARE PROMPTLY FORWARDED THIS OFFICE WILL HAVE NO ALTERNATIVE BUT TO BURY REMAINS PERMANENTLY OVERSEAS BY ADMINISTRATIVE ACTION END SMITH

SMITH
Memorial Division
OQMG

FMS

gph

March 22-49
A.B.

RECEIVED
O.D.M.G.
SEL & CAD SECTION
MAR 22 1 03 PM '49

SECURITY CLASSIFICATION UNCLASSIFIED		AUTHORIZATION	
ORIGINATING AGENCY SYMBOL QMGMF 293		SIGNATURE	
DATE-TIME GROUP 22 Mar 49	OFFICIAL TITLE J F VOGL Captain, OMC, Memorial Division	PAGE OF	

ANALYST ACTION REQUEST FORM

Name	:	Grade	:	Serial Number
FOSTER, JAMES S	:	PVT	:	42086433

This case has been thoroughly analyzed and the following action is to be taken:

WIRE TO: FATHER
 MR. FREDERICK F. FOSTER
 222 KENSINGTON PLACE
 SYRACUSE, NEW YORK

HENRI-CHAPELLE	PLUT WW	ROW 10	GRAVE 187
----------------	------------	-----------	--------------

FORM Q

DATE	: SIGNATURE OF ANALYST
18 MAR. 1949	: <i>Blanche Jarvis</i>
	: DIVISION : BRANCH : SECTION

QMG Form 1905
3 Mar 1949

This file is to be made a part of the 293 file

MESSAGEFORM		MESSAGE CENTER NO.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT	
CALLS V	STA. SER. NO. NR	PRECEDENCE	TRANSMISSION INSTRUCTIONS	ORIGINATOR	DATE-TIME GROUP
ACTION	INFORMATION	EXEMPT	OPERATING SIGNALS	GROUP COUNT	
283 Foster, James S. - pot 42086433		SPACE ABOVE FOR SIGNAL CENTER ONLY		GR	
FROM: (Originator) QMGHF DEPT OF ARMY WASH D C SNOWDEN EXT 6535			SECURITY CLASSIFICATION UNCLASSIFIED		
ACTION TO: MR FREDERICK F FOSTER 222 KENSINGTON PLACE SYRACUSE NEW YORK			PRECEDENCE FOR ACTION INFORMATION PRIORITY		
INFORMATION TO: CHARGE GRAVES WW II			<input checked="" type="checkbox"/> ORIGINAL MESSAGE		
			REFERS TO ANOTHER MESSAGE IDENTIFICATION CLASSIFICATION		
<p>FINAL INTERMENTS ARE NOW BEING MADE IN PERMANENT UNITED STATES MILITARY CEMETERIES OVERSEAS. THE REMAINS OF YOUR LATE SON</p> <p>PRIVATE JAMES S FOSTER 42 086 433</p> <p>ARE BEING HELD IN ABOVE GROUND STORAGE PENDING DISPOSITION INSTRUCTIONS FROM YOU. IN ORDER TO COMPLY WITH YOUR WISHES COMMA IT IS URGENT YOU ADVISE THIS OFFICE WITHIN FIFTEEN DAYS BY COLLECT TELEGRAM IF YOU DESIRE PERMANENT OVERSEAS BURIAL OR RETURN OF REMAINS TO UNITED STATES FOR BURIAL IN A NATIONAL OR PRIVATE CEMETERY. IF REMAINS ARE REQUESTED FOR RETURN TO THIS COUNTRY INCLUDE NAME OF NATIONAL CEMETERY OR IF REMAINS ARE RETURNED FOR BURIAL IN A PRIVATE CEMETERY NAME AND ADDRESS OF FUNERAL DIRECTOR OR CONSIGNEE TO WHOM REMAINS ARE TO BE CONSIGNED</p> <p>END SMITH</p>					
ep			SMITH Memorial Division CQMG		
SECURITY CLASSIFICATION UNCLASSIFIED			AUTHORIZATION		
ORIGINATING AGENCY SYMBOL QMGHF 293		DATE-TIME GROUP	SIGNATURE		OFFICIAL TITLE
FOSTER, JAMES S 42 086 433		4 Mar 49	J F VOGL		Captain, QMG, Memorial Division

FMS

ANALYST ACTION REQUEST FORM

Name	: Grade	: Serial Number
<i>Foster, James S.</i>	<i>Prt.</i>	<i>42086433</i>

This case has been thoroughly analyzed and the following action is to be taken:

Form A Tel to

Mr. Frederick F. Foster father
222 Kensington Pl.
Syracuse
N.Y.

your son

DATE	: SIGNATURE OF ANALYST
<i>4 March 49</i>	<i>B. Melvin</i>
DIVISION	: BRANCH : SECTION
<i>Mem</i>	<i>FC : FLC</i>

Pvt. James S. Foster, 42 086 433
Plot WW, Row 10, Grave 187,
United States Military Cemetery
Henri-Chapelle, Belgium

4 March 1947

Mr. Frederick Frank Foster
222 Kensington Place
Syracuse, New York

Dear Mr. Foster:

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

Enclosures

1. Pamphlet (Options)
2. Disposition Form
3. Envelope
4. Pamphlet (Cemeteries)

bag

Q4GR 293
Foster, James S.
A.S.N. 42 086 433

22 January 1947

Mr. Frederick Frank Foster
222 Kensington Place
Syracuse, New York

Dear Mr. Foster:

Inclosed herewith is a picture of the United States Military Cemetery Henri-Chapelle, Belgium, in which your son, the late Private James S. Foster, is buried.

It is my sincere hope that you may gain some solace from this view of the surroundings in which your loved one rests. As you can see, this is a place of simple dignity, neat and well cared for. Here, assured of continuous care, now rest the remains of a few of those heroic dead who fell together in the service of our country.

This cemetery will be maintained as a temporary resting place until, in accordance with the wishes of the next of kin, all remains are either placed in permanent American cemeteries overseas or returned to the Homeland for final burial.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

1 Incl
Photograph

G. A. HORKAN
Brigadier General, QMC
Assistant

mk

EP
6

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

In Reply Refer To
QMGR 314.6
Graves Registration

26 November 1946

(European) U.S. misc

SUBJECT: Burial Records *corr*

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 be changed to read as underscored:

Cemetery: United States Military Cemetery, Henri-Chapelle, Belgium

NAME	RANK/ GRADE	SERIAL NO.	ORGAN.	DATE OF DEATH	PIOT	ROW	GRAVE
<i>P92</i> Foster, James S	<u>SP4</u>	<u>48086433-</u>		<u>1 Jan 41</u>	W	19	157
Cardner, Robert G	SP4	36424967		<u>22 Feb 45</u>	W	5	98
<i>B</i> Rimmerhite, Clair	SP4	39731386		<u>11 Jan 45</u>	W	7	132

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
MARTIN G. RILEY
Major, QIC
Assistant

VD

reg

SP.YG 293
Foster James S.

1 October 1945

Mr. Frederick Frank Foster
222 Kensington Pl.
Syracuse, New York

Dear Mr. Foster:

The War Department is most desirous that you be furnished the burial location of your son, the late Private James S. Foster.

The records of this office disclose that he is interred in the U. S. Military Cemetery, Henri Chapelle, Belgium, plot WW, row 10, grave 187.

This cemetery is located approximately 7 miles southwest of Aachen, Germany, 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,

E. B. GREGORY
Lieutenant General
The Quartermaster General

mdw

OK

copy desk
RECEIVED
OCT 10 1945
MEMORIAL
9 56 AM '45

REPATRIATION RECORDS BRANCH

NOV 19 1946

DATE

put

NAME FOSTER JAMES S

SERIAL NO. 4208

CEMETERY Henri Chapelle #1 Belgium

PLOT _____

ROW _____

GRAVE _____

LETTER Fixed
Correct Records to Read

Rank
date of death: 3 January 1945

G. T. Nigge
SPECIAL CHFC

File

11-26-46
Dougherty
F.A.T.

GRAVES REGISTRATION
FORM No. 1
(Revised 1 Sept. 1943)

RESTRICTED
REPORT OF BURIAL 542

97531
7 Jan 45

293
FOSTER

JAMES S.

Unknown

42086433

Unknown

82nd A/B Div.

Werbomont, Belgium

2 Jan 45 PR

Shrap head

1700 hrs, 7 Jan 45

Henri Chapelle #1

K 721-348

187

10

YW

Fern

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:

Deceased's Right:

Gustafso, Bertil O. 37567901

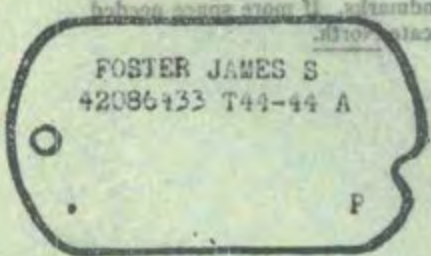
188

Deceased's Left:

Whitley, Charles V. 052914

186

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

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

MAR 21 1945

Neal F. Raker

Signature of Officer or other person reporting burial

Verified by G.R.S. Officer

NEAL F. RAKER
1st Lt. QMC

Graves Registration Officer

RESTRICTED

44231

REPORT OF BURIAL IF DECEASED UNIDENTIFIED

Form 100 (Rev. 1-1-52)

Take Fingerprints of Both Hands. If unable to obtain a complete set of Fingerprints, Take Those You Can, and fill in the following:

FOSTER

Date 1 Jan 52	Height: 5' 10"	Laundry Marks:	Name of Deceased Worsham, Bertram
Burial No. 150803A	Weight: 150 lbs	Number of Rifle:	Place of Death 1700 hrs 7 Jan 52
Case of Death Sharp head	Color of Eyes: Blue	Wear Glasses?	Time and Date of Burial 187
Name or Organization of Location 81K-318	Color of Hair: Black	Is Tooth Chart Attached?	Graves Number
Type of Marker None	Race: Caucasian		

(If possible, have medical personnel take a tooth chart, if no medical personnel present, fill in a tooth chart below.) In space below, locate and describe any scars, birthmarks, moles, deformities, etc.

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

Left Hand

Right Hand

Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc.:

~~What means the identification tags found with the body?~~

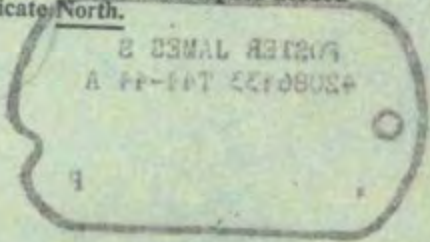
Graves No. 188	Name Whitely, Charles V.	Rank Private	Organization Army
Graves No. 188	Name Gustafson, Bertil O.	Rank Private	Organization Army

TOOTH CHART

Indicate: missing natural teeth by X; crowns by O; fillings by □; Bridges by C; linking and/or teeth; replacements by artificial teeth X

Deceased's Left											
8	7	6	5	4	3	2	1	1	2	3	4
8	7	6	5	4	3	2	1	1	2	3	4
Deceased's Right											
6	5	4	3	2	1	1	2	3	4	5	6
6	5	4	3	2	1	1	2	3	4	5	6

If this is an Isolated Burial, make a Sketch of the Location, oriented with Permanent Landmarks. If more space needed attach separate sheet. Indicate North.



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

Emergency Address: _____

Address: _____

Religion: _____

Signature of Officer or other person: _____

Other Data: _____

Graves Registration Office
1st Lt G.M.C.
NEAL S. WALKER

RESTRICTED

AG P BR HQ 505 22560

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

DATE 26 Jan 1945 mbb

REPORT OF DEATH

FULL NAME <i>Foster, James S.</i> Foster, James S.		ARMY SERIAL NUMBER 42,086,433	GRADE Pvt
HOME ADDRESS <i>chs</i> Syracuse, New York		ARM OR SERVICE Infantry	DATE OF BIRTH 8 Nov 25
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH 3 Jan 45
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 4 Mar 44	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Margaret Foster (mother) 222 Kensington Pl., Syracuse, N. Y.			
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Margaret Foster (mother) same as above Frederick Frank Foster (father) same as above			
INVESTIGATION MADE?	IN LINK OF DUTY	OWN MISCONDUCT	WAS DECEASED ON DUTY STATUS
YES NO	YES NO	YES NO	YES NO
AUTHORIZED ABSENCE		IN FLYING PAY STATUS	OTHER PAY STATUS (SPECIFY BELOW)
YES NO		YES NO	YES NO
			*X

BATTLE NON-BATTLE

ADDITIONAL DATA AND/OR STATEMENT

*On parachute pay.

Evidence of death rec'd in WD 22 Jan 1945.

Find *1/26/45* *mbb*

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

BY ORDER OF THE SECRETARY OF WAR.
John L. ...
 ADJUTANT GENERAL



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

373649

DATE 26 Jan 1945 mbb

REPORT OF DEATH

FULL NAME Foster, James S.		ARMY SERIAL NUMBER 42,086,433	GRADE Pvt				
HOME ADDRESS Syracuse, New York		ARM OR SERVICE Infantry	DATE OF BIRTH 8 Nov 25				
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH 3 Jan 45				
STATION OF DECEASED European Area	DATE OF ENTRY ON CURRENT ACTIVE SERVICE 4 Mar 44	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS					
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Margaret Foster (mother) 222 Kensington Pl., Syracuse, N. Y.							
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Margaret Foster (mother) same as above Frederick Frank Foster (father) same as above							
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	YES NO
						X	*X

ADDITIONAL DATA AND/OR STATEMENT

 BATTLE NON-BATTLE

*On parachute pay.

Evidence of death rec'd in WD 22 Jan 1945.

COPIES FURNISHED:

2 G. O.	F. S. I.	F. O. U. S. A.
2 G. O. M. G.	G. F. O.	ARMY EFFECTS BUREAU
G. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BY ORDER OF THE SECRETARY OF WAR

John L. ...
ADJUTANT GENERAL

373649

JRM:IB:bt
May 11, 1945

Mr. Frederick F. Foster
222 Kensington Place
Syracuse, New York

Dear Mr. Foster:

The Army Effects Bureau has received from overseas some property of your son, Private James S. Foster.

This property, consisting of a few small items, is being sent you.

If, for some reason, it has not been received at the expiration of thirty days from this date, please notify me so that tracer may be instituted.

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

Yours very truly,

P. L. KOOB
2nd Lt. Q.M.C.
Officer-in-Charge
SJ Unit

67

ll

ARMY SERVICE FORCES
EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mr. Frederick F. Foster
222 Kensington Place
Syracuse, New York

Effects of: Pvt. James S. Foster
Name
ASN 42086433
Case No. 373649-D

Wt.

DATE 11 May 1945
JRM:IB:bt

E. Burton
FCR: 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
 1 Warehouse Division
 2 Files Branch, Adm. Div.

lypkq

REMARKS:

Franked
Est. Exp. Chgs.
Est. Prt. Chgs.
No. of packages

Shipping Clerk
MAY 16 1945

PACKAGE DESCRIPTION <i>#1 pkg</i>	ARMY EFFECTS BUREAU INVENTORY	DECEASED	<input checked="" type="checkbox"/>
	<i>373649</i>	MISSING	<input type="checkbox"/>
		P.O.W.	<input type="checkbox"/>
		ABANDONED	<input type="checkbox"/>
		TALLY NO.	<i>7912</i>
		INV. DATE	<i>24 Feb 45</i>
		ORIG. NO. OF PKGS.	<i>1</i>
NAME <i>James S. Foster</i>		BOX NO.	
A.S.N. <i>42086433</i> RANK <i>unk</i>		SHEET OF	<i>1</i> SHEETS
		ORGANIZATION	<i>82nd A/B 3rd Div</i>

Belt	TOWELS & WASHCLOTHES	WINGS
BELT, MONEY (NO MONEY)	CLOTHING	BAGS, CLOTH OR TRAVEL
Cloth, Wash	BRACELET IDENT.	<i>1</i> BILLELD. (NO MONEY) IC
Coats	Brushes	Case
Footwear, Pr.	CAMERAS	Footlocker
Gloves, Pr.	Glasses	KIT, SW, PLY, OR WRITING
Handkerchiefs	Knives	BOOKS
Headwear	Lighters	Books, Address
Jackets	MISC. INSIGNIA	Books, Pilot Log
Overcoats	Pen, Fountain	DIARY (REMOVED FOR DDR)
Scarfs.	Pencil, Mechanical	FILMS
Shirts	Pipes	Letters
Socks, Pr.	RELIGIOUS ARTICLES	Papers, Personal
Ties	RIBBONS, DECORATION	Photos
Towels	Rings	Shoe Shine Articles
Trousers, Pr.	Tobacco	SHORT SKORTER
Trunks, Pr.	Toilet Articles	SOUVENIRS
Underwear	WATCH	SOUVENIR MONEY
		Stationery
		TESTAMENTS
		<i>.019</i> U.S. MONEY (AMOUNT)

REMARKS	ATTACHMENTS	FORM #54	FORM #100
<i>Mrs. Margaret Foster (mother) 222 Kensington Pl. Syracuse N.Y.</i>		<i>Inventory of effects 1 U.S. label Form - 28</i>	

WEIGHT	G.I. REMOVED
	SHORTAGE ON REVERSE
C.A.T. <i>none</i>	IDENT. TAGS REMOVED
	DIARY REMOVED
WAREHOUSE SPACE <i>114</i>	STORED BY <i>AW</i>
INVENTORIED BY <i>Wylie</i>	DATE SHIPPED <i>MAY 16 1945</i>
PACKED BY <i>Garwood</i>	CHECKED BY <i>M</i>
	U.S. OR ADDITIONAL
	FILM REMOVED

ADDITIONAL REMARKS

SHORTAGES

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 FOSTER, JAMES S PVT 33

BAY	PALLET	BOX	TALLY
		4	7412
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
GRB			

RESTRICTED WW 18 H.C.
INVENTORY FORM

Mailed direct to KC
Vouch serial #255
Reg #72

7 Jan 45
Date

SUBJECT: Inventory of Personal Effects of:
Foster James S Unk 42086433

(Last Name) (First Name) (MI) (Rank) (ASN)

TO: Effects Quartermaster, Communications Zone, APO S87 US Army
The above named individual of Unk 82nd A/B inf Div
(Unit) (Organization)

was reported buried about 7 Jan 45 1944.
Status (KIA, MIA, Hosp. etc.) (Date)

Designated Beneficiary if information readily accessible Unk

INVENTORY OF EFFECTS

- 1 Billfold ✓
- photos ✓
- 1 pen ✓
- 2 souvenir notes ✓
- 1 paybook ✓

Money in the amount of _____ has been turned into _____
(Name of finance office and symbol number) Form WDFD 38 enclosed.

Unk

Names and addresses of any Banks in which accounts may be carried:

I certify that the above items constitute all of the effects, secured by me, of the above named individual and that they were forwarded to the Effects Depot by reg mail on _____ 194____.
(Rail, Truck, etc.)

Name William Sloan
Rank & ASN Private 1st Class SLOANE
Organization Graves Registration Unit
0-1591451

Any additional pertinent information:



MAY 16 1945

187 WW

Serial No. 42086433 Name FOSTER, JAMES S

Grade PVT Rank

Organization 82nd AIR DIV

Address

Nearest Relative

Address

Killed in Action YES Died of Disease

Date 4 JAN 1945 Hospital

Battle Area Belgium Information

Place of Burial HENRI CHAPELLE #1

Point of Coordination

Description of Body

Members Missing

Signed

187 WW

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

JRM:IB:bt

Case No. 375649Date 11 May 1945

SUBJECT: Report of transaction in disposing of the effects of

James S. Foster, 42086435 late
 (Name of deceased) (Army Serial Number)

Private, Infantry who died
 (Grade) (Organization, Army or Service)

on the 5 day of January, 1945, at European Area

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

1. Complying with A.M. 112, a Summary Court-Martial, convened at Kansas City Mo. Pursuant to S.O., 228 Hq., KCM 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 10 May 1945, pursuant to Special Orders 228, Headquarters KCM Depot, dated 25 September 1943, the application or affidavit of _____

Frederick F. Foster 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.M. 112, Frederick F. Foster of
 (Name of person found entitled)

222 Kensington Place, Syracuse State of
 (Number, Street or Avenue) (City, Town or Village)

New York, 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, Q.M.C.(Name, Rank, Organization)
SUMMARY COURT MARTIAL