

QUEST FOR DISPOSITION OF REMAINS

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

DATE:

Pvt. William Fitzpatrick, 32 359 057
 Plot B, Row 7, Grave 80,
 United States Military Cemetery
 Naples, Italy

23 October 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, _____

(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

(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

(FOREIGN COUNTRY)

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.)

PODA-401 send mother 18 June 48

OQMG FORM 14 NOV 1946 345 MILITARY

35-504 11-1

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

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
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY

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.

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

Subscribed and duly sworn to before me according to law by the above-named applicant this _____ day of _____, 19____, at city (or town) of _____, county of _____, and State (or Territory or District) of _____

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

(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

(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.

_____ (SIGNATURE OF NEXT OF KIN)	_____ (DATE)
_____ (NAME PRINTED OR TYPED)	_____ (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.

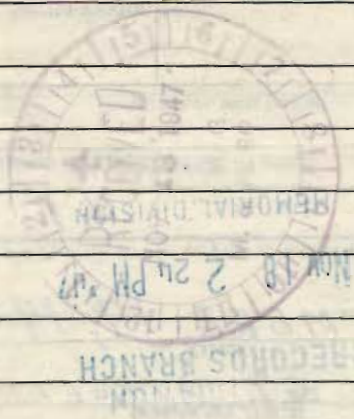
THIS IS TO NOTIFY YOU THAT I AM NOT THE NEXT OF KIN AUTHORIZED TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED NAMED ON PAGE 1 OF THIS FORM. THE FOLLOWING PERSON, TO THE BEST OF MY KNOWLEDGE, IS THE NEXT OF KIN TO WHOM THIS FORM SHOULD BE DIRECTED.

LAST NAME <i>FITZPATRICK</i>	FIRST NAME <i>AGNES</i>	MIDDLE INITIAL
RELATIONSHIP TO THE DECEASED <i>MOTHER</i>		
NUMBER AND STREET <i>515 E. 81 STREET.</i>	CITY OR TOWN <i>NEW YORK</i>	STATE OR COUNTRY <i>N. Y.</i>

<i>Emilia Leonard</i> (SIGNATURE)	<i>NOVEMBER 17, 1945</i> (DATE)
_____ (NAME PRINTED OR TYPED)	<i>430 E. 67 STREET</i> (STREET AND NUMBER)
_____ (NAME PRINTED OR TYPED)	<i>NEW YORK, N. Y.</i> (CITY AND STATE)

ADDITIONAL REMARKS AND INSTRUCTIONS

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



REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

27-14-48
prev. Rada

Pvt William Fitzpatrick, 32 359 057
Plot B, Row 7, Grave 80,
United States Military Cemetery
Naples, Italy

JUN 18 1948

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, Agnes Fitzpatrick

(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

(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

(FOREIGN COUNTRY)

PRIVATE CEMETERY LOCATED AT _____

(LOCATION OF CEMETERY SELECTED)

- ☒ 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT Long Island National Cemetery, N.Y.

(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

NAT. CEM.

DD FORM 1345 MILITARY

14 NOV 1944

JUL 1948

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	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 Walter Cody Funeral Home Inc.,			
NUMBER AND STREET 1093 St. Nicholas Avenue	CITY OR TOWN New York	COUNTY OR PROVINCE New York	STATE OR TERRITORY OF U. S. A., OR COUNTRY U.S.A.
EXPRESS OFFICE (Nearest railroad passenger station) Penna. R.R. Depot Grand Central Depot	TELEGRAPH ADDRESS New York, N.Y.	TELEPHONE No. WA 7 2746	

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 MOFFETT	FIRST NAME Agnes	MIDDLE INITIAL V.	RELATIONSHIP TO DECEASED Sister
NUMBER AND STREET 15 Audubon Avenue	CITY OR TOWN New York	COUNTY OR PROVINCE New York	STATE OR TERRITORY OF U. S. A., OR COUNTRY U.S.A.

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.

X Agnes Fitzpatrick
(SIGNATURE OF NEXT OF KIN)

Agnes Fitzpatrick
(NAME PRINTED OR TYPED)

15 Audubon Avenue
(STREET AND NUMBER)

New York, 32, N.Y.
(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 7th day of July,

1946, at city (~~town~~) of New York, county of New York, and State (~~or Territory~~)

(District) of New York

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

(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

WALTER KOHL
Notary Public, State of New York
Residing at 105, Reg. No. 206-K-9
N. Y. Co. Clks. No. 105, Reg. No. 206-K-9
Commission Expires March 30, 1949

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)
_____	_____
(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)

ADDITIONAL REMARKS AND INSTRUCTIONS

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



DISINTERMENT DIRECTIVE

NAT. CEM. ^{2B}SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

5258 00601

DATE

15 09 48
DAY MONTH YEAR

NAME

FITZPATRICK WILLIAM

SERIAL NUMBER

32359057

GRADE

PVT

ARM

1

RACE

1

RELIGION

2

CEMETERY

NAPLES ALLIED CEM ITALY

PLOT

B

ROW

7

GRAVE

80

DISPOSITION OF REMAINS

2321

01

CODE

DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

WALTER CODY FUNERAL HOME, INC.
1093 ST. NICHOLAS AVENUE
NEW YORK, NEW YORK

NAME AND ADDRESS OF NEXT OF KIN

MRS. AGNES FITZPATRICK (MOTHER)
15 AUDUBON AVENUE
NEW YORK, NEW YORK

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

GRADE

DATE OF DEATH

DATE DISTINTERRED

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

☐ REMAINS
☐ MARKER

USAGF

NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)

REMAINS PREPARED AND PLACED IN CASKET

DATE

BY

CASKET SEALED BY

EMBALMER (Signature)

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY

DATE

BY

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

REMARKS AND SPECIAL INSTRUCTIONS

65

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM	NAPLES PORT MORGUE	TO	USAT ERIC C. GIBSON
KIND OF CONVEYANCE	TRUCK	NAME OF CONVOYER	WILLIAM H SPURLIN 1ST LT QMC
SIGNATURE OF SHIPPER	A F HUBBARD LT COL AF	SIGNATURE OF RECEIVER	JOHN S GLANDER, CHIEF OFFR
DATE	15 JAN 49	DATE	JAN 49

2. SHIPPED

FROM		TO	my PE
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER		SIGNATURE OF RECEIVER	W. W. PREISCH
DATE		DATE	FEB 10 1949

3. SHIPPED

FROM	my PE	TO	PORT TRANSPORTATION OFFICER
KIND OF CONVEYANCE	trailer	NAME OF CONVOYER	H. O. YOUNG
SIGNATURE OF SHIPPER	W. W. PREISCH	SIGNATURE OF RECEIVER	Captain, QMC
DATE	FEB 14 1949	DATE	FEB 14 1949

4. SHIPPED

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

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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

DISINTERMENT DIRECTIVE

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

DAY MONTH YEAR

NAME

SERIAL NUMBER

RANK

ARM

DATE OF DEATH

FITZPATRICK WILLIAM

32359057 PVT 1

DAY MONTH YEAR

CEMETERY

DISPOSITION OF REMAINS

CODE DIST. PT.

LOT

ROW

GRAVE

COUNTRY

CAUSE OF DEATH

B 7 80 NAPLES ALLIED CEM ITALY

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

NAME AND ADDRESS OF NEXT OF KIN

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME
FITZPATRICK WILLIAM

SERIAL NUMBER
32359057

RANK
PVT

DATE OF DEATH

DATE DISINTERRED
30 July 48

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

☒ REMAINS

USAGF

C

W E MC NEIL 2 LT OMC

☒ MARKER

W E McNeil NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

SHROUD

SKEL ETAL

OTHER MEANS OF IDENTIFICATION

NONE

MINOR DISCREPANCIES

NONE

REMAINS PREPARED AND PLACED IN CASKET

3 AUG 48

FORREST ROWE EMBALMER

DATE

BY

CASKET SEALED BY

FORREST ROWE EMBALMER

EMBALMER (Signature)

CASKET BOXED AND MARKED

3 AUG 48 D PALMIERI RECORDED

SHIPPING ADDRESS VERIFIED BY

DATE

BY

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

W R KING 1ST LT OMC

SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report OMC Form 1194a for major discrepancies.

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC NAPLES ITALY		TO NAPLES PORT MORGUE	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER B K TRAYNOR WOJG	
SIGNATURE OF SHIPPER <i>P C Craig</i> P C CRAIG CAPT QMC	DATE 2 Aug 48	SIGNATURE OF RECEIVER <i>Frank A Wilson</i> FRANK A WILSON CAPT QMC	DATE 2 AUG 48

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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

RECEIPT OF REMAINS

HEADQUARTERS, NYPE
DISTRIBUTION CENTER #1, AGRS
58th ST. & 1st AVE.
BROOKLYN, N.Y.

DISTRIBUTION CENTER

ROUTINE

REMAINS CONSIGNED TO: WALTER CODY FUNERAL HOME, INC.

1093 ST. NICHOLAS AVENUE

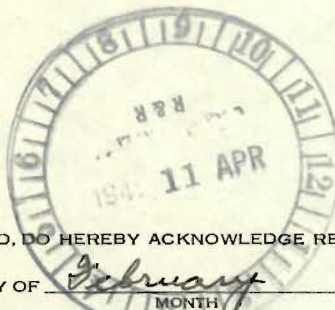
NEW YORK, NEW YORK

REMAINS OF THE LATE PVT. WILLIAM FITZPATRICK ACCOMPANIED BY
AN ESCORT WILL BE DELIVERED TO YOU BY MOTOR VEHICLE DURING THE MORNING
ON MONDAY 28 FEBRUARY PLEASE MAKE ARRANGEMENTS TO ACCEPT
REMAINS UPON ARRIVAL AND PLEASE NOTIFY THE NEXT OF KIN OF THE DATE AND TIME
OF ARRIVAL.

ESCORT: PFC. ORIC. F. PRIEST
RA 31 254 293
DET #5, 1300th ASU

G. H. BARE

COLONEL, QMC



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

THIS 28 DAY OF February, 19 49

Cpl. Oric F. Priest

WITNESS (Escort)

RA 31254293

G. H. Bare

CONSIGNEE

1937-38

CASE NO.		INSPECTION CHECK LIST					SPACE NO.	
NAME OF DECEASED (Last, First, Middle Initial)			BRANCH OF SERVICE	RACE	RELIGION	SEX	DATE	
FITZPATRICK WILLIAM			AGF	W		M		
RANK OR GRADE		SERIAL NUMBER	CONSIGNEE					
PVT		32359057	WALTER CODY FUNERAL HOME, INC. 1093 ST. NICHOLAS AVE., NEW YORK, NEW YORK					
SHIPPING CASE—GENERAL APPEARANCE (Check ONLY Discrepancies)				CONDITION OF SHIPPING CASE (Check One)				
				<input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY				
FINISH (Exterior)				REMARKS				
FINISH (Interior)								
HANDLES								
HANDLE BOLTS								
STENCILING—NAME PLATE								
HEALTH PERMIT MARKER								
HEALTH PERMIT NUMBER NY 024 R								
CASKET—GENERAL APPEARANCE (Check ONLY Discrepancies)				CONDITION OF CASKET (Check One)				
				<input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY				
FINISH (Exterior)				REMARKS				
HANDLES AND FASTENINGS								
STENCILING—NAME PLATE								
CAM LOCKS (Sealing)								
ODOR OR MOISTURE								
ROUTED THROUGH								
<input type="checkbox"/> MORTUARY OPERATING ROOM CONDITION OF REMAINS <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY				<input type="checkbox"/> REPAIR SHOP 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 S&C changed				
TIME	DATE	SIGNATURE OF MORTICIAN		TIME	DATE	SIGNATURE OF INSPECTOR		
					2/21/41	[Signature]		
REMARKS B & R								

RECEIVED
1949 JAN 28 21 44

WU227 29 COLLECT

BROOKLYN NY JAN 28 203P

COL G H BARE

DISTRIBUTION CENTER 1 AGR DIV

PLEASE PROCEED WITH ORIGINAL INSTRUCTIONS AND FORWARD REMAINS OF
MY SON PVT WILLIAM FITZPATRICK 32-359-057

WALTER CODY FUNERAL HOME INC 1093 ST NICHOLAS AVENUE NEW YORK CITY

MRS AGNES FITZPATRICK

32-359-057 1093

423P..

MESSAGEFORM		MESSAGE CENTER NO.		TRANSMITTING MEANS		CRYPTOGRAPH OR CLEAR TEXT	
CALLS V		STA. SER. No. NR	PRECEDENCE		TRANSMISSION INSTRUCTIONS REVISED 6 AUG 48		ORIGINATOR DATE-TIME GROUP
ACTION		INFORMATION		EXEMPT	OPERATING SIGNALS		GROUP COUNT GR
SPACE ABOVE FOR SIGNAL CENTER ONLY							
FROM: (Originator)				SECURITY CLASSIFICATION			
ACTION TO: MRS. AGNES FITZPATRICK 15 AUDUBON AVENUE NEW YORK, NEW YORK INFORMATION TO:				PRECEDENCE FOR			
				ACTION		INFORMATION	
				<input type="checkbox"/> ORIGINAL MESSAGE REFERS TO ANOTHER MESSAGE IDENTIFICATION CLASSIFICATION			
USAT "CPL. ERIC G. GIBSON"							
<p style="text-align: right;">PVT WILLIAM FITZPATRICK</p> <p>PLEASE BE ADVISED REMAINS OF THE LATE</p> <p>ARE ENROUTE TO THE UNITED STATES. OUR RECORDS INDICATE YOU WISH REMAINS DELIVERED</p> <p>TO</p> <p>WALTER CODY FUNERAL HOME, INC. 1093 ST. NICHOLAS AVE., NEW YORK, N.Y.</p> <p style="text-align: right;">FOR FINAL BURIAL IN</p> <p>LONG ISLAND NATL CEM., FARMINGDALE, NEW YORK</p> <p>WE CANNOT GIVE A DEFINITE DELIVERY DATE. IT IS EXPECTED THAT AN INTERVAL OF FROM</p> <p>FIVE DAYS TO FOUR WEEKS WILL ELAPSE BEFORE DELIVERY CAN BE EFFECTED. YOUR FUNERAL</p> <p>DIRECTOR WILL BE NOTIFIED BY TELEGRAM THREE DAYS IN ADVANCE OF DELIVERY. HE WILL</p> <p>BE REQUESTED TO INFORM YOU SO YOU MAY MAKE FINAL FUNERAL ARRANGEMENTS. REMAINS</p> <p>WILL BE ACCOMPANIED BY MILITARY ESCORT. SUPERINTENDENT OF NATIONAL CEMETERY</p> <p>SHOULD BE CONTACTED BY YOU OR FUNERAL DIRECTOR FOR BURIAL ARRANGEMENTS. DELIVERY</p> <p>OF REMAINS FROM YOUR HOME TO NATIONAL CEMETERY MUST BE ARRANGED BY YOU OR FUNERAL</p> <p>DIRECTOR. PAYMENT OF SEVENTY FIVE DOLLARS INTERMENT EXPENSE IS NOT REPEAT NOT</p> <p>AUTHORIZED IN ANY CASE FOR BURIAL IN A NATIONAL CEMETERY. APPROPRIATE JOINT</p> <p>MILITARY HONORS AND RELIGIOUS SERVICES WILL BE PROVIDED AT GRAVESIDE BY VETERANS</p>							
SECURITY CLASSIFICATION				AUTHORIZATION			
RELEASED TO W U ORIGINATING AGENCY				SIGNATURE			
				OFFICIAL TITLE			
SYMBOL		DATE-TIME GROUP		PAGE		OF	
28 JAN 49							

REVISED 6-10-48

MR. JAMES FITZPATRICK

17 AUGUST AVENUE

NEW YORK, NEW YORK

MR. WILLIAM FITZPATRICK

PLEASE BE ADVISED REMAINS OF THE LATE

ARE ENROUTE TO THE UNITED STATES. OUR RECORDS INDICATE YOU WERE RE-ARRANGED

TO

LONG ISLAND MAIL CO., BARNINGHAM, NEW YORK
FOR FINAL BURIAL IN
THE COLD FURNACE, INC., 1035 ST. NICHOLAS AVE., NEW YORK, N.Y.

WE CANNOT GIVE A PRECISE DELIVERY DATE, IT IS KNOWN THAT AN INTERVAL OF TWO
TO FIVE DAYS TO FOUR WEEKS WILL ELAPSE BEFORE DELIVERY CAN BE EFFECTED. YOUR FUNERAL
DIRECTOR WILL BE ADVISED BY TELEGRAM THREE DAYS IN ADVANCE OF DELIVERY. WE WILL
BE REQUESTED TO INFORM YOU SO YOU MAY MAKE FINAL BURIAL ARRANGEMENTS. REMAINS
WILL BE ACCOMPANIED BY MILITARY ESCORT, SUBSTITUTION OF NATIONAL CEMETERY
COULD BE CONTACTED BY YOU OR FUNERAL DIRECTOR FOR BURIAL ARRANGEMENTS. DELIVERY
OF REMAINS FROM YOUR PORT TO NATIONAL CEMETERY MUST BE ARRANGED BY YOU OR FUNERAL
DIRECTOR. PAYMENT OF SEVENTY FIVE DOLLARS INTERBURIAL EXPENSE IS NOT REPEATED FOR
ARRANGED IN ANY CASE FOR BURIAL IN A NATIONAL CEMETERY. APPROPRIATE JOINT
MILITARY NOTICES AND RELIGIOUS SERVICES WILL BE PROVIDED AT CEMETERY BY VETERANS

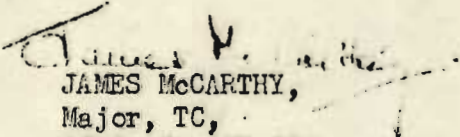
W U
28 JAN 49

FOR TELEGRAM

ORGANIZATION OR BY MILITARY OR NAVAL PERSONNEL. PLEASE CONFIRM ABOVE DELIVERY INSTRUCTIONS BY TELEGRAM COLLECT WITHIN FORTY EIGHT HOURS OR SUBMIT NEW DELIVERY INSTRUCTIONS TO DISTRIBUTION CENTER ONE, NEW YORK PORT OF EMBARKATION. WE REGRET IT WILL BE IMPOSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER EXPIRATION OF THE FORTY EIGHT HOURS. INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.

G. H. BARE, COL, QMC.

I certify that this message is on 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.


JAMES MCCARTHY,
Major, TC,
Admin O, AGR Div.

HOW

Date 1 Mar. 1949

TO:

Agnes Fitzpatrick
15 Audobon Ave.
New York, N.Y.

The authorized inscription for a Government headstone of the general type (furnished for all decedents except those who served only during the Civil and Spanish-American Wars) includes: (1) The State from which the veteran came; (2) religious emblem in a small circle above the inscription on the face of the headstone; and (3) the dates of birth and death.

In order that the appropriate information, as desired by the next of kin, may be shown on the headstone for the decedent whose name is listed below, it is requested that you fill in the proper spaces indicated below the data called for, and RETURN THIS FORM PROMPTLY TO THE

LONG ISLAND NATIONAL CEMETERY,
FARMINGDALE, NEW YORK

Superintendent of Cemetery or Commanding Officer of Post

If this form is not returned to the Superintendent within fifteen (15) days from date of mailing, the headstone will be ordered with the data as to religious emblem, State and date of birth inscribed thereon as shown in the official records, and NO CHANGE WILL BE MADE AT A LATER DATE AT GOVERNMENT EXPENSE.

To be filled in by Superintendent or Commanding Officer

Name of Veteran William Fitzpatrick
Rank, etc. Pvt. USA
Grave or lot No. Gr; 14005 Sec; J
Date of death OCTOBER 10 - 1943
Date buried 1 Mar. 1949

To be filled in by Next of Kin

State desired NEW YORK
Religious emblem desired LATIN CROSS
(Latin Cross for Christian Faith, Star of David for Hebrew Faith)
Date of birth FEB. 25 - 1920
Address of kin 15 AUDUBON AV., NEW YORK CITY
Signature Agnes Fitzpatrick Date MARCH 2, 1949

File
4/29/49
m
Carr

Date 1 Mar. 1943

Agnes Fitzpatrick
12 Audubon Ave.
New York, N.Y.

The enclosed application for a Government passport is for the purpose of enabling the applicant to travel abroad in connection with her work as a volunteer in the Civilian Control Administration. The applicant is a native-born American citizen, is a member of the Civilian Control Administration, and is a resident of New York City.

The applicant is a native-born American citizen, is a member of the Civilian Control Administration, and is a resident of New York City. She is a member of the Civilian Control Administration, and is a resident of New York City.

The applicant is a native-born American citizen, is a member of the Civilian Control Administration, and is a resident of New York City. She is a member of the Civilian Control Administration, and is a resident of New York City.

To be filled in by Superintendent or Commanding Officer

Name of Applicant William Fitzpatrick

Rank and Grade Pvt.

Organization and Address Gr. 10005 Sec. 1

Date of Birth 1 Feb. 1923

To be filled in by Officer of RM

State desired

Religious emblem desired

Date of birth

Address of the 12 Audubon

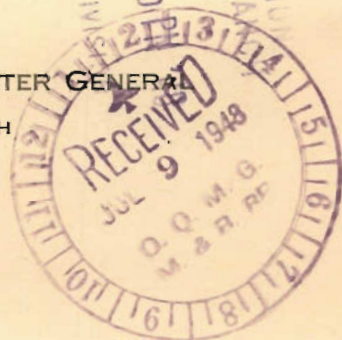
Signature



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

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

OFFICE OF THE QUARTERMASTER GENERAL
MEMORIAL DIVISION, R. R. BRANCH
WASHINGTON 25, D. C.



NOTICE OF CHANGE IN ADDRESS

32-359057

NAME OF DECEASED

William Fitzpatrick

RANK

Private

SERIAL NUMBER

32-359057

NAME OF NEXT OF KIN

Agnes Fitzpatrick

RELATIONSHIP

Mother

OLD ADDRESS

515 East 81st NYC

NEW ADDRESS

Agnes Fitzpatrick
115 Audubon Ave NYC 32

FILE
NAT
149

REMARKS

Sent by daughter A Moffett.
He ^{started} have funeral arrangements

293

Fitzpatrick, William

et

OK
Pvt William Fitzpatrick, 32 359 057
Plot B, Row 7, Grave 80,
United States Military Cemetery
Naples, Italy

JUN 18 1948

Mrs. Agnes Fitzpatrick
515 East 81st
New York, New York

Dear Mrs. Fitzpatrick:

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

8 Incl. m.B.H.
JUN 21 3 40 PM '48
MAIL ROOM

JUN 18 1948

By Air Mail, 12:00 PM
Room 8, New York
United States Military Cemetery
New York, N.Y.

Mr. James H. Dugan
215 East 42nd
New York, N.Y.

Dear Mr. Dugan:

The people of the United States, through the Congress have authorized the
Government and (that) part of the United States of America to
investigate of this matter has been authorized with this country's
to the United States. The records of the United States military cemetery
in the records of the above-named cemetery, and have the right to the
country of the United States.

The enclosed pamphlet, "Disposition of World War II American Forces Remains"
and "American Government," explain the disposition of remains and how
available to you by your Government. It gives the name of the remaining
the list of names of the remains in the United States. It gives the
World War II American Forces Remains. You may find an express form which
the disposition of the remains of the deceased by returning Part I of the en-
closed form. Please see the instructions of remains. Should you desire to retain
your rights to the remains in the United States, 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 select Option 2, it is advised that no funeral arrangements
on your part and arrangements be made until you are further notified by the
Office.

Will you please enclose the enclosed form, "Request for Disposition of
Remains," and mail in the enclosed self-addressed envelope, which will be re-
turned, within 30 days after the receipt by you. The Bureau return will
avoid unnecessary delay.

Sincerely,

THEODORE B. LARSEN
Major General
The Quartermaster General

Enc.

REQUEST FOR NEW LETTER OF INQUIRY

TO LETTER OF INQUIRY SECTION REPATRIATION RECORDS BRANCH		FROM	
NAME OF DECEDENT (First, Middle, Last) <i>William Fitzpatrick</i>		GRADE <i>Pat.</i>	SERIAL NUMBER <i>32359057</i>
GRAVE LOCATION			
CEMETERY <i>U.S. military Cemetery Naples, Italy.</i>	PLOT <i>B</i>	ROW <i>7</i>	GRAVE <i>80</i>
LETTER OF INQUIRY TO BE SENT TO: MR. MISS MRS. <i>Agnes Fitzpatrick</i>		RELATIONSHIP <i>mother</i>	
ADDRESS			
STREET <i>515 E. 81st</i>		CITY AND STATE <i>New York, N.Y.</i>	
AUTHORITY FOR LETTER OF INQUIRY AND REMARKS <i>Widow completed Part III</i>			
<div style="color: red; font-size: 2em; font-family: cursive;">Roda</div> <div style="color: red; font-size: 2em; font-family: cursive;">Priority</div>			
DATE <i>6/17/48</i>		CLERK'S SIGNATURE <i>Davis</i>	

Pvt. William Fitzpatrick, 32 359 057
Plot B, Row 7, Grave 80,
United States Military Cemetery
Naples, Italy

23 October 1947

Mrs. Emma Fitzpatrick
313 East 69th Street
New York City, New York

Dear Mrs. Fitzpatrick:

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

Incl.

fat

Oct 30 11 29 AM '47
O.G.M.C.
MAIL & RECORDS SECTION

mtb

23 October 1941

Mr. William Brewster, 32 100 St.
11th Ave., New York 18, New York
United States Military Cemetery
Naples, Italy

Mr. William Brewster
111 East 57th Street
New York City, New York

Dear Mr. Brewster:

The people of the United States, through the Congress have authorized the
disturbance and final burial of the heroic dead of World War II. The Congress
wishes that 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 pamphlet, "Disposition of World War II Armed Forces Dead,"
and "American Government," explain the disposition, options and various ways
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 en-
closed form "Request for Disposition of Remains." Should you desire to re-
tain your rights to the next of kin 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 the receipt by you? The receipt return will
avoid unnecessary delay.

Sincerely,

THOMAS D. JARVIS
Major General
The Quartermaster General

Truly,

Respectfully,

16 October 1946

Mrs. Amelia Fitzpatrick
313 East 69th Street
New York City, New York

Dear Mrs. Fitzpatrick:

The War Department is most desirous that you be furnished information regarding the burial location of your husband, the late Private William Fitzpatrick, A.S.N. 32 359 057.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Naples, plot B, row 7, grave 80. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located in Naples, Italy, and is under the constant care and supervision of United States military personnel.

The War Department has now been authorized to comply, at Government expense, with the feasible wishes of the next of kin regarding final interment, here or abroad, of the remains of your loved one. At a later date, this office will, without any action on your part, provide the next of kin with full information and solicit his detailed desires.

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

ypa

*Mr. Larkin to mother
17 June 48*

10 October 1944

Mr. Leslie Fitzpatrick
315 East 57th Street
New York City, New York

Dear Mr. Fitzpatrick:

The War Department is most anxious that you be furnished information regarding the postal location of your husband, the late Captain William Fitzpatrick, A.S.W. 30 100 001.

The records of this office indicate that his remains are interred in the U. S. Military Cemetery Haguenau, France, Grave 80. You may be assured that the identification and treatment have been as-
sured with fitting dignity and solemnity.

This cemetery is located in Haguenau, France, and is under the con-
stant care and supervision of United States Military personnel.

The War Department has now been authorized to supply, at govern-
ment expense, with the necessary means of the necessary
travel, here or abroad, of the remains of your loved one. At
a later date, this office will, without any action on your part, pro-
vide the name of his ship and information and notify his family
directly.

Yours very sincerely,
in your great love,

Respectfully,
Yours,

W. A. LITTLE
Major General
The War Department, General

WAL

5902
CONFIDENTIAL

Q.M.C. Form 1 - GRS

SOS NATOUA

July 1943

NOV 25 1943

REPORT OF BURIAL

AR 30-1815 & TM 10-630

10/14/43

Date Report Filled Out

FITZPATRICK WILLIAM (NMI) 32359057 W
(Last Name) (First Name) (Middle Initial) (Serial No.) (Race)
PVT CO B 307th Eng 82nd A/B DIV USA
(Rank) (Organization) (Branch) (Country)
NAPLES, ITALY 10/10/43 KIA C
(Place of Death) (Date of Death) (Cause of Death) (Religion : P, C, H, etc.)

MEANS OF IDENTIFICATION

Identification Tags found on body : Yes (X) ; No ().

If no identification tags, other means used to identify body (identification card, letters, etc.) :

Complete fingerprint chart of both hands on reverse side if body cannot be identified.

Complete tooth-chart on reverse side and list anatomical characteristics and other data if fingerprints cannot be taken

If unidentified, give circumstances :

List of Personal Effects found on Body and disposition of Same : NONE

MRS. W. FITZPATRICK

(Name of Emergency Addressee)

313 E 69th ST. NEW YORK CITY

(Name of Emergency Addressee)

(Signature (or Name) of Person furnishing data when buried in established cemetery) PIETA CEMETERY NAPLES IN 244520

0700 10/12/43

(Time and Date of Burial)

NAPLES CIVIL AMERICAN PLOT

(Location, Name, & No. of Cemetery)

IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCE REVERSE SIDE THIS FORM

1 3 3 CROSS GENERAL SERVICE
(Plot No.) (Row No.) (Grave No.) (King Grave Markers) (Type of Religious Ceremony)

Identification Tag buried with body (X) ; Identification Tag attached to marker (#).

If identification Tags not present, what other identification data were buried with the body and in what kind of container ?

Bodies buried on either side (See paragraph 4 on reverse side this form.)

Right side : HARDY PFC 18134234 CO B 307 ENG 4
(Name) (Rank) (ASN) (Organization) (Grave No.)

Left side : PULTZ PVT 12072477 CO B 307 ENG 2
(Name) (Rank) (ASN) (Organization) (Grave No.)

F.A. SCHMALTZ (CAPT)

(Signature of Officer Reporting Burial)

(Verified by unit G.R.S. Officer)

INSTRUCTIONS FOR FILLING OUT BURIAL REPORT : Make out QMC Form 1 - GRS in quadruplicate for U.S. dead, one additional copy for allied and enemy dead. Sign all copies. Submit report to nearest member of Graves Registration Service. Graves Registration Service will forward the original and two copies through at least one higher administrative headquarters (to be checked against Casualty Reports and allied papers and all copies verified by the Graves Registration Officer of that headquarters) to Base Section Graves Registration Service Officer. OVER FOR BURIAL INSTRUCTIONS.

CONFIDENTIAL

H.Q. - 160-Q - 7-43 - 200 M.

80 JUL 1944 FILE
- 13

INSTRUCTIONS FOR BURIAL

1. PREPARATION OF BODY : Have body examined by member of Medical Department whenever possible (to attach E.M.T. Form 52b.) Remove all personal property; remove one identification tag, leave other on body in protected position (in case of enemy dead, leave 1/2 tag on body, forward 1/2 with personal effects.) If no tag present, make notation of identifying data on form, protect in sealed bottle, canteen, spent shell, or best available container and bury with remains. If unidentified, take fingerprints of both hands; if this not possible, fill out tooth-chart and note height, weight, color of eyes and hair tattoo marks, birthmarks, etc., and other data as serial no. of weapon, laundry marks, where body found, etc. Wrap body in shelter half, mattress cover, or blanket when available.

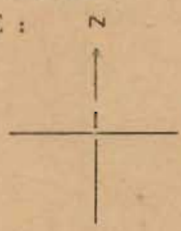
2. BURIAL : Dig grave to a depth of five feet (hasty battlefield burials, to sufficient depth to prevent elements from exposing the body.) Place only one body in a grave. Dig graves side by side, row behind row.

3. MARKING OF GRAVE : Fasten identification tag to temporary name peg and place at head of grave. For enemy dead, write data on peg. When pegs are not available copy data on a piece of paper, place in bottle, spent shell, or other receptacle, seal tightly and place so as to mark and identify grave. If identification tag cannot be fastened to peg or placed in container, do not leave at grave but forward with report of burial. If only one tag is found on body, it should be buried with body. The information thereon should be written on marker or placed in container at head of grave. Do not use weapons or helmets to mark graves.

4. LOCATION OF GRAVE : Report burials in established cemeteries by plot, row, and grave number (or show on cemetery map). For all other burials prepare sketch in space provided below; and give location by means of map references, or by reference to prominent permanent landmarks. Information must be specific, accurate, complete. Stand at foot of grave facing head to determine bodies buried to the left and right.

5. PERSONAL EFFECTS : List only personal effects taken from body on the Burial Report form. Place these with information as to identity of owner, organization, emergency addressee, in personal effects bag, or wrap in handkerchief, towel, or other available material and turn over to Grave Registration Service Personnel with report of burial. Government property is not to be included in personal effects but is to be turned in to Salvage Collecting Point.

SKETCH AND MAP REFERENCE :



TOOTH-CHART

(Right)																(Examinee's)																(Left)															
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8																
16	15	14	3	12	11	10	9	9	10	11	12	13	14	15	16	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16																

INDICATE : missing natural teeth by X; crowns by O; fillings by □; bridges by ◯; linkings anchor teeth; replacements by denture (horizontal line.)



Characteristics :
Other Data :

When unidentified, take thumb and fingerprints of both hands.

Thumb

Left
Right

Thumb

If this not possible, fill in tooth chart.

1

2

3

4

RESTRICTED REBURIAL

DEC 6 - 1943

REPORT OF ~~REBURIAL~~ REBURIAL (see reverse side)

AR 30-1815 & TM 10-630

9 November 1943

Date Report Filled Out

FITZPATRICK	William	MMI	32359057	W
(Last Name)	(First Name)	(Middle Initial)	(Serial No.)	(Race)
Pvt	Co B	307 Eng	Army	U.S.A.
(Rank)	(Organization)		(Branch)	(Country)
Naples, Italy	10 October 1943	KIA		C
(Place of Death)	(Date of Death)	(Cause of Death)		(Religion : P, C, H, etc.)

MEANS OF IDENTIFICATION

Identification Tags found on body : Yes (2); No ().

If no identification tags, other means used to identify body (identification card, letters, etc.) :

Complete fingerprint chart of both hands on reverse side if body cannot be identified.

Complete tooth-chart on reverse side and list anatomical characteristics and other data if fingerprints cannot be taken.

If unidentified, give circumstances :

List of Personal Effects found on Body and disposition of Same : NONE

FITZPATRICK, Mrs. W.	313 E. 69th St., New York City
(Name of Emergency Addressee)	(Address of Emergency Addressee)

(Signature (or Name) of Person furnishing above data when other than the Officer reporting burial.)

1500 hrs	8 November 1943	Allied Cemetery, Naples, Italy
(Time and Date of Burial)	(Location, Name, & No. of Cemetery)	

IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCE REVERSE SIDE THIS FORM

B	7	80	Temp Wood	Catholic
(Plot No.)	(Row No.)	(Grave No.)	(King Grave Markers)	(Type of Religious Ceremony)

Identification Tag buried with body (X); Identification Tag attached to marker (X).

If Identification Tags not present, what other identification data were buried with the body and in what kind of container ?

Bodies buried on either side (See paragraph 4 on reverse side this form.)

Right side :	PULTZ, Glen M	Pvt	12072477	Co B	307 Eng	79
	(Name)	(Rank)	(ASN)	(Organization)		(Grave No.)

Left side :	HARDY, Carl E.	PFC	18134234	Co B	307 Eng	81
	(Name)	(Rank)	(ASN)	(Organization)		(Grave No.)

(Signature of Officer Reporting Burial)

JOHN A. LONG 1st Lt 47th QM CO (GR)

INSTRUCTIONS FOR FILLING OUT BURIAL, REPORT : Make out QMC Form 1 - GRS in quadruplicate for U.S. dead, one additional copy for allied and enemy dead. Sign all copies. Submit report to nearest member of Graves Registration Service. Graves Registration Service will forward the original and two copies through at least one higher administrative headquarters (to be checked against Casualty Reports and allied papers and all copies verified by the Graves Registration Officer of that headquarters) to Base Section Graves Registration Service Officer. OVER FOR BURIAL INSTRUCTIONS.

RESTRICTED

H.Q. - 160-Q - 643 - 80,000

30 JUL 1944 FILE

INSTRUCTIONS FOR BURIAL

1. PREPARATION OF BODY : Have body examined by member of Medical Department whenever possible (to attach E.M.T. Form 52b.) Remove all personal property; remove one identification tag, leave other on body in protected position (in case of enemy dead, leave 1/2 tag on body, forward 1/2 with personal effects). If no tag present, make notation of identifying data on form, protect in sealed bottle, canteen, spent shell, or best available container, and bury with remains. If unidentified, take fingerprints of both hands; if this is not possible fill out tooth-chart and note height, weight, color of eyes and hair, tattoo marks, birthmarks, etc., and other data as serial no. of weapon, laundry marks, where body found, etc. Wrap body in shelter half, mattress cover, or blanket when available.

2. BURIAL : Dig grave to a depth of five feet (hasty battlefield burials, to sufficient depth to prevent elements from exposing the body). Place only one body in a grave. Dig graves side by side, row behind row.

3. MARKING OF GRAVE : Fasten identification tag to temporary name peg and place at head of grave. For enemy dead, write data on peg. When pegs are not available, copy data on a piece of paper, place in bottle, spent shell, or other receptacle, seal tightly and place so as to mark and identify grave. If identification tag cannot be fastened to peg or placed in container, do not leave at grave but forward with report of burial. If only one tag is found on body, it should be buried with body. The information thereon should be written on marker or placed in container at head of grave. Do not use weapons or helmets to mark graves.

4. LOCATION OF GRAVE : Report burials in established cemeteries by plot, row, and grave number (or show on cemetery map). For all other burials prepare sketch in space provided below; and give location by means of map references, or by reference to prominent permanent landmarks. Information must be specific, accurate, complete. Stand at foot of grave facing head to determine bodies buried to the left and right.

5. PERSONAL EFFECTS : List only personal effects taken from body on the Burial Report form. Place these with information as to identity of owner, organization, emergency addressee, in personal effects bag, or wrap in handkerchief, towel, or other available material, and turn over to Grave Registration Service Personnel with report of burial. Government property is not to be included in personal effects but is to be turned in to Salvage Collecting Point.

SKETCH AND MAP REFERENCE :

Disinterred by 47th QM CO (GR) from
Cimitero Pieta, Naples, Italy
N244520 Plot 1 Row 3 Grave 3 on
8 November 1943.

Reinterred same date in Allied Cemetery,
Naples, Italy Plot B Row 7 Grave 80.

TOOTH-CHART

(Right)	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
	16	15	14	13	12	11	10	9	8	7	6	5	4	3	2	1
(Left)	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
	16	15	14	13	12	11	10	9	8	7	6	5	4	3	2	1

Indicate : missing natural teeth by X; crowns by O;
fillings by □ ; bridges by () linkages anchor teeth;
replacements by denture (horizontal line.)

	X
	X
	X
	X

Characteristics :

Other Data :

When unidentified, take thumb and fingerprints of both hands.

If this is not possible, fill in tooth chart.

4

3

2

1

Thumb

Left

Right

Thumb

1

2

3

4

24, 646

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE
WASHINGTON
REPORT OF DEATH

*Corrected Copy
Original Forwarded
13 Nov 1943

DATE 20 November 1943
LFP/oh4635

293 FULL NAME Fitzpatrick, William (nmi)		ARMY SERIAL NO. 32 359 057
GRADE Pvt	ARM OR SERVICE Corps of Engineers	DATE OF BIRTH 25 Feb 1920
HOME ADDRESS New York City, New York		
DATE OF DEATH 10 Oct 43	PLACE OF DEATH North African Area	CAUSE OF DEATH Killed in Action
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP, & ADDRESS) Mrs Emelia Fitzpatrick (wife) 313 East 69th St., New York City, N. Y.		
BENEFICIARY (NAME, RELATIONSHIP, & ADDRESS) Emelia Fitzpatrick (wife) 313 East 69th St., New York City, N. Y. Agnes Fitzpatrick (mother) 515 East 81st St., New York City, N. Y.		

BY ORDER OF THE SECRETARY OF WAR:

J. W. Reinhart

(OVER)

THIS COPY FOR THE Q. M. G. (CONFIDENTIAL)

ADJUTANT GENERAL

2-17-44
J. W. Reinhart

ADDITIONAL DATA: (CONFIDENTIAL)

STATION OF DECEASED

North African Area (Italy)

Nov 23 12 23 PM '43

MEMORIAL DIVISION

24646

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE
WASHINGTON
REPORT OF DEATH

1FP/ch4635

13 November 1943

DATE

FULL NAME Fitzpatrick, William (nmi)		ARMY SERIAL NO. 32 359 057
GRADE Pvt	ARM OR SERVICE Corps of Engineers	DATE OF BIRTH 25 Feb 1920
HOME ADDRESS New York City, New York		
DATE OF DEATH 10 Oct 43	PLACE OF DEATH North African Area	CAUSE OF DEATH Killed in Action
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP, & ADDRESS) Mrs Emelia Fitzpatrick (wife) 313 East 69th St., New York City, N. Y.		
BENEFICIARY (NAME, RELATIONSHIP, & ADDRESS) Emelia Fitzpatrick (wife) 313 East 69th St., New York City, N. Y. Agnes Fitzpatrick (mother) 550 East 81st St., New York City, N. Y.		

BY ORDER OF THE SECRETARY OF WAR:

J. W. Reinhart

ADJUTANT GENERAL

THIS COPY FOR THE Q. M. G. (CONFIDENTIAL)

(OVER)

ADDITIONAL DATA: (CONFIDENTIAL)

STATION OF DECEASED

North Green Ave. (City)

293- Fitzpatrick, William (Pat.) 32, 359, 057
g



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

JHM:BB:vb
March 25, 1944

IN REPLY REFER TO 39400 D

Mrs. Emilia Fitzpatrick
313 East 69th Street
New York, New York

Dear Mrs. Fitzpatrick:

This will acknowledge your letter of recent date to the Army Effects Bureau in connection with personal effects of your husband, Private William Fitzpatrick.

With reference to the identification tags about which you inquire, Army regulations provided that one of the two identification tags worn by personnel of the U. S. Army will be interred with the body and the duplicate tags removed at the time of interment and securely attached to the grave marker.

In the event additional property of your husband is received at this Bureau, you will be notified promptly.

Yours very truly,

R. E. RODGERS
2nd Lt. Q.M.C.
Assistant

ARMY SERVICE FORCE
KANSAS CITY QUARTERMASTER DEPOT
401 HARGREAVE AVENUE
KANSAS CITY 11, MISSOURI

IN REPLY REFER TO _____

TO THE DIRECTOR
OF THE ARMY
KANSAS CITY

FROM THE QUARTERMASTER
KANSAS CITY

SUBJECT: _____

39400

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

(S-3-28-44)
JRM:BB:nr
February 28, 1944

IN REPLY REFER TO 39400-D

File

Mrs. Emilia Fitzpatrick
313 East 69th Street
New York, New York

Dear Mrs. Fitzpatrick:

We are glad to inform you that the Army Effects Bureau has now received some additional property of your husband, Private William Fitzpatrick.

This property consisting of one ring, chain and cross has been sent to you by mail under separate cover. When you have received the articles please acknowledge receipt by signing in the space provided below. You may retain one copy of this letter. For your convenience, there is inclosed an addressed envelope which needs no postage.

As previously stated, the forwarding of property by this Bureau does not, of itself, vest title in you. It is forwarded merely in order that distribution may be made in accordance with the laws of the state of your husband's legal residence.

Yours very truly,

Leon D. Glasscock
LEON D. GLASSCOCK
Captain Q.M.C.
Assistant

1 Incl.
Envelope

Receipt acknowledged

Emilia Fitzpatrick
Signature

March 1, 1943
Date

RECEIVED
KANSAS CITY, MO.
MAR - 4 1964 PM

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Suspense March 8, 1944

Case No. 39400 D mt

Date February 23, 1944

FEB 25 1944

MEMORANDUM TO Warehouse Branch:

Please see that the personal effects on the above mentioned case are packed, weighed and ready for shipment promptly so that they may be readily picked up. Bills of Lading and all other papers will be marked with the case number and can be identified thereby. The original of this form should be returned to the Administrative Branch after completion.

Effects of: Private William Fitzpatrick Serial No. 32359057

Ship to: Mrs. Emilia Fitzpatrick

Street and Number 313 East 69th Street

City and State New York, New York

Ship Via: Franked Gov't B/L No.

2nd Inventory
Jones
For the Effects Quartermaster

LIST OF PACKAGES SHIPPED

1 PKg

Franked Mail--4# or less *Frank*
Parcel Post Charges
Estimated Express Charges
Estimated Freight Charges

Total Number of Pieces: 1

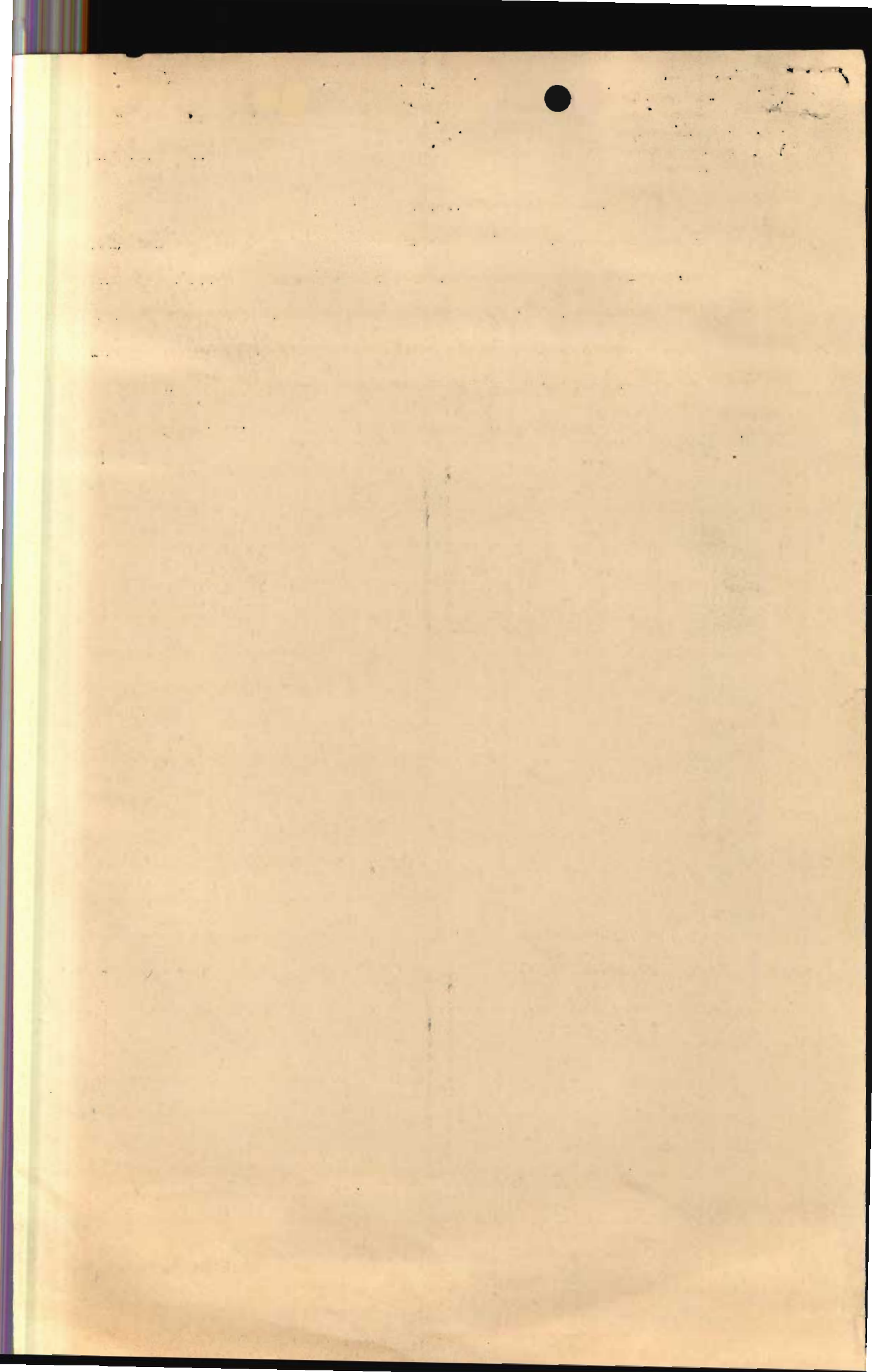
Weight of Shipment:

Shipping Clerk

Date Feb 24 1944
San: bay

DS:jeb

Effects QM Form 14 (Rev. 10/15/43)



Abandoned

INVENTORY

Flat 9 Box 2

Shown on Tally In as _____

TALLY IN NO. 3155 INVENTORY DATE 2/10/44 CASE NO. 39400

EFFECTS OF WILLIAM F ITZPATRICK (NMI) RANK Pvt.

ARMY SERIAL NO. 32359057 ORG. 307th A/B Engr. Bn.

CONSIGNOR Baltimore, Md.

DELIVERING CARRIER _____ G B/I NO. _____ G B/I DATE _____

[illegible]

Warehouse Space 1318 Inventoried By Craven-Evan

Locked Storage Space Packed By Alfred

Eff QM Form 11 (Rev. 10/15/43)

FEB 19 1944

GIN:ed 2/17/44

ARMY EFFECTS BUREAU
KANSAS CITY QUARTERMASTER DEPOT
601 Hardesty Avenue
Kansas City 1, Missouri

JRM:BB:pc
15 January 1944

In reply refer to QM 250.414

SUBJECT: Report of transactions by Summary Court-Martial
Army Effects Bureau

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

There are submitted herewith reports of transactions by the Summary Court-Martial at the Army Effects Bureau, in the disposition of the personal effects of the following named deceased military personnel:

<u>Case No.</u>	<u>Name</u>	<u>Rank</u>	<u>Army Serial No.</u>
23141	Moots, Paul E.	S/Sgt.	37370196
24878	Mazzarella, Antonio	Pvt.	11063262
32110	Madden, George A.	T/4th Gr.	32239364
39062	Matson, John A.	1st Lt.	O-665885
39400	Fitzpatrick, William	Pvt.	32359057

For the Commanding Officer:

JOHN R. MURPHY
Lt. Col. Q.M.C.
Effects Quartermaster

5 Incls.
Incl. 1--Case No. 23141
Incl. 2--Case No. 24878
Incl. 3--Case No. 32110
Incl. 4--Case No. 39062
Incl. 5--Case No. 39400

Summary Court-Martial
WAR DEPARTMENT
ARMY EFFECTS BUREAU
KANSAS CITY QUARTERMASTER DEPOT
601 Hardesty Avenue
Kansas City 1, Missouri

Case No. 39400 ps
15 January 1944
(Date)

Subject: Report of transactions in disposing of the effects of

William Fitzpatrick, 32359057, late a
(Name of deceased soldier) (Army Serial No.)
Private, Corps of Engineers, who died
(Grade) (Organization, Arm or Service)

on the 10 day of October, 1943, at North African Area

To : The Adjutant General, War Department, Washington, 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, reports that:

a. No legal representative or widow of the decedent being present at his camp or quarters, his effects 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 and money~~ and money (less the amount 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 21 December, 1943, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application and/or affidavit of Emilia Fitzpatrick
(Name of

_____ for the effects of the above-named deceased soldier.
(Claimant)
now in the possession of the United States, together with other relevant evidence, were duly considered;

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

of 313 East 69th Street, New York, State
(Number, Street or Avenue) (City, Town or Village)

of New York, is the Widow of the above-
(Relationship or Capacity)

named deceased soldier and appears to be entitled to receive his effects.

Subject: Report of transactions in disposing of the effects of

William Fitzpatrick, 32359057, late a
(Name of deceased soldier) (Army Serial No.)
Private, Corps of Engineers, who died
(Grade) (Organization, Arm or Service)

on the 10 day of October, 1943, at North African Area

To : The Adjutant General, War Department, Washington, 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, reports that:

a. No legal representative or widow of the decedent being present at his camp or quarters, his effects 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 and money~~ and money (less the amount 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 21 December, 1943, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application and/or affidavit of Emilia Fitzpatrick
(Name of

_____ for the effects of the above-named deceased soldier,
(Claimant)
now in the possession of the United States, together with other relevant evidence, were duly considered;

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

of 313 East 69th Street, New York, State
(Number, Street or Avenue) (City, Town or Village)

of New York, is the Widow of the above-
(Relationship or Capacity)

named deceased soldier and appears to be entitled to receive his effects.

(Signature of Summary Court Officer)
JOHN R. MURPHY Lt. Col. Q.M.G.
(Name, Rank, Organization)
SUMMARY COURT-MARTIAL

10380
39400

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

(S-1-24-44)
JRM:BB:mt
December 24, 1943

IN REPLY REFER TO #39400

*File
pc*

Mrs. Emilia Fitzpatrick
313 East 69th Street
New York, New York

Dear Mrs. Fitzpatrick:

Thank you for the information given this Bureau in your letter of December 16, 1943, in connection with disposal of the effects of your husband, Private William Fitzpatrick.

There is inclosed check for \$5.00, which is the only property of Private Fitzpatrick received at the Army Effects Bureau to date. These funds were received by mail from overseas. It is possible that additional belongings of your husband will arrive at a later date, and the information you have furnished will enable us to make prompt shipment of such property.

My action in sending this check does not, of itself, vest title in you. These funds are transmitted only in order that some responsible person receive them, so that distribution may be made in accordance with the laws of the state of your husband's legal residence.

Please acknowledge receipt of the check in the space provided below. You may retain copy of the letter. For your convenience, there is inclosed an addressed envelope which needs no postage. Please accept my sympathy in the loss of your husband.

Yours very truly,

Elgin T. Fuller

ELGIN T. FULLER
Captain Q.M.C.
Asst. Effects Quartermaster

2 Incls.
Check
Envelope

Receipt acknowledged.

Mrs. Emilia Fitzpatrick
(Signature--claimant)

December 29, 1943
(Date)

RECEIVED
JAN 5 1944
KODAK



December 16, 1943

39400

Mr. S. Pool

IMMEDIATE ACTION

File

2nd. Lt. L. M. C.

Chief Adm. Control Branch.

#39400

Dear Sir:

I've received your letter today
telling me of my husband's Put. &
William Fitzpatrick #32359057
personal property which has been
sent from overseas.

I am confirming my address
which is Mrs. Emilia Fitzpatrick,
313 East 69th Street, New York City, N.Y.

Thank you.

Sincerely yours,
Mrs. Emilia Fitzpatrick

RECEIVED



KANSAS CITY, MO.

DEC 20 1943 AM

39400

File
pc

HEADQUARTERS
307TH AIRBORNE ENGINEER BATTALION
APO 469, NEW YORK, N.Y.

11 November 43

C E R T I F I C A T E

I certify that I have paid to the estate of Private William (NMI) Fitzpatrick, 32359057, late a member of Company "B", 307th Airborne Engineer Battalion, who was killed in action at APO 469, N.Y. N.Y. on October 10, 1943 the sum of five dollars and no/100 (\$5.00) this date.

November 10, 1943

Harry W. Rosenthal
Harry W. Rosenthal, 20760799,
T/Sgt, 307th A/B Engr. Bn.
Hq & Serv Co.

C E R T I F I C A T E

I certify that I have received from T/Sgt Harry W. Rosenthal, 20760799, the sum of five dollars and no/100 (\$5.00) for payment of personal debt to the estate of the late Private William (NMI) Fitzpatrick, 32359057, this date.

November 10, 1943

A. T. Zbinden
A. T. ZBINDEN,
CWO, 307th A/B Engr. Bn.
Personnel Adjutant.

C E R T I F I C A T E

I certify that I have on this date mailed to Effects Quartermaster, Army Effects Bureau, Kansas City, Missouri a United States Treasury check drawn in U. S. Dollars in the amount of five dollars and no/100 (\$5.00) for credit to the estate of the late Private William (NMI) Fitzpatrick, 32359057, that check is indorsed "Pay only to the Effects Quartermaster, Kansas City Quartermaster Depot, Trustee," and that check No. 12,010, dated 11 November 1943 accounts Wm. E. JOHNSON, Lt. Col. Finance Officer, APO 469, c/o Postmaster, New York, N. Y. Station No 524, U. S. Army.

A. T. Zbinden
A. T. ZBINDEN,
CWO, 307th A/B Engr. Bn.
Personnel Adjutant.

Inc 1 #42

RECEIVED



KANSAS CITY, MO.

DEC 31 1943

REFERTO- 39400-D

Mrs. Emilia Fitzpatrick
313 East 61 Street
New York, New York

Army Effects Bureau
Kansas City Quartermaster Depot
601 Hardisty Avenue
Kansas City, Missouri

file
pc

Dear Sirs:

I am writing to you for some information. You see my husband, Pvt. William Fitzpatrick was killed in action on October 10, 1943 in Italy and I have so far received some of his personal belonging which consisted of a check for five dollars, (\$5.00), a cross and chain and a ring. Now what I want to know is whether or not I'm to get one of his identification tags (dog tags). You see my husband used to tell me that if anything happened to him I was to receive one of his dog tags. His number is 323 590 57. Can you please tell me if the tag should have been sent to me. I'd appreciate it so very much. Thank you.

Sincerely yours,
Mrs. Emilia Fitzpatrick



KANSAS CITY, MO.

MAR 20 1944

INVENTORY OF EFFECTS

(See AR 600 550)

Fitzpatrick, William (NMI) 32359057
(Last name) (First name) (Middle initial) (Army serial number)

late a Pvt 307 A/B Engr Bn
(Grade) (Organization or arm or service)

who died on the 10 day of Oct, 19 43

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

NUMBER	ARTICLES	* Package NUMBER
1	Chain & cross	
1	Ring	
Nearest of Kin - Mother		
	Mrs Agnes Fitzpatrick	
	550 East 81st St	
	New York, New York	
Effects delivered to Quartermaster, 82nd Airborne Division, APO 469, for shipment to Effects Quartermaster, Army Effects Bureau, Kansas City, Missouri.		

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

CLASS II — Other effects

NUMBER	ARTICLES

CLASS II — Continued

NUMBER

ARTICLES

Check No. 12, 010 dated 11 Nov 43 for
\$5.00 airmailed to Effects Quartermaster,
Army Effects Bureau, Kansas City,
Missouri.

Money { Specie \$ None
Notes \$ ~~None~~ 5.00 A12

I certify that the foregoing inventory comprises
all the effects of the deceased whose name appears
on the first page hereof, and that the effects
were delivered to

(Give name and degree of relationship ; if legal representative

or beneficiary named by the deceased, so state)

*the effects of class I have been forwarded to The
Adjutant General and those of class II have been
sold.

A. T. ZBINDEN,
CWO., 307 A/B Engr Bn.,
Personnel Adjutant

APO 469, NY, NY.
(Station)

20 October, 19 43
(Date)

*Strike out words not applicable.

H Q. M B S. MAY 43/23 m

File
pc

(See AR 600 550)

late a Pvt 307 A/B Engr Bn
(Grade) (Organization or arm or service)

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

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

[illegible]

CLASS II — Continued

[illegible]

I *certify* that the foregoing inventory comprises all the effects of the deceased whose name appears on the first page hereof, and that *the effects were delivered to.....

(Give name and degree of relationship ; if legal representative

or beneficiary named by the deceased, so state)

*the effects of class I have been forwarded to The Adjutant General and those of class II have been sold.

A. T. ZBINDER,

CWO., 307 A/B Engr Bn.,

Personnel Adjutant

APO 469, NY, NY.
(Station)

(Station)

20 October

Date)

, 19.43...

*Strike out words not applicable.

H Q. M B S. MAY 43/25 m

REQUEST FOR INCLOSURES

Case No. 39400 mt

TO:

Locked Storage for:

X Accounting Branch for Check

Account No 5970 Amount \$ 5.00

Payable to

Emilia Fitzpatrick

New York, New York

Correspondent BB
by jf
an

Check No. 4356

Initials PM

5970

39400

DECEMBER 24 43

EMILIA FITZPATRICK

5.00

FIVE AND No/100

LT. COL. Q.M.G.

DS:jeb

Eff QM Form 49 (Rev. 11/16/43)

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

INVENTORY

33400

EFFECTS OF WILLIAM (NMI) FITZPATRICK BANK Pvt.

CONSIGNOR Hq. 307th A/B Engr. Bn., APO #469, New York, New York

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

ap# 5970
Pm
ek# 4356

Locked Storage Space Office Safe Packed By _____

Eff QM Form 11 (Rev. 10/15/43)

2

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE
WASHINGTON
REPORT OF DEATH

39400

20 November 1943

DATE

121/CH4635

FULL NAME Fitzpatrick, William (nmi)		ARMY SERIAL NO. 32 359 057
GRADE Pvt	ARM OR SERVICE Corps of Engineers	DATE OF BIRTH 25 Feb 1920
HOME ADDRESS New York City, New York		
DATE OF DEATH 10 Oct 43	PLACE OF DEATH North African Area	CAUSE OF DEATH Killed in Action
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP, & ADDRESS) Mrs Emelia Fitzpatrick (wife) 313 East 69th St., New York City, N. Y.		
BENEFICIARY (NAME, RELATIONSHIP, & ADDRESS) Emelia Fitzpatrick (wife) 313 East 69th St., New York City, N. Y. Agnes Fitzpatrick (mother)* 515 East 81st St., New York City, N. Y.		

BY ORDER OF THE SECRETARY OF WAR:

J. W. Reinhart

ADJUTANT GENERAL

THE DEPARTMENT

OF THE ARMY

WASHINGTON

OFFICE OF THE ADJUTANT GENERAL

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE
WASHINGTON
REPORT OF DEATH

[Signature]
LFP/ch4635

DATE **13 November 1943**

FULL NAME Fitzpatrick, William (nm1)		ARMY SERIAL NO. 32 359 057
GRADE Pvt	ARM OR SERVICE Corps of Engineers	DATE OF BIRTH 25 Feb 1920
HOME ADDRESS New York City, New York		
DATE OF DEATH 10 Oct 43	PLACE OF DEATH North African Area	CAUSE OF DEATH Killed in Action
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP, & ADDRESS) Mrs Emelia Fitzpatrick (wife) 313 East 69th St., New York City, N. Y.		
BENEFICIARY (NAME, RELATIONSHIP, & ADDRESS) Emelia Fitzpatrick (wife) 313 East 69th St., New York City, N. Y. Agnes Fitzpatrick (mother) 550 East 81st St., New York City, N. Y.		

BY ORDER OF THE SECRETARY OF WAR:

J. W. Reinhart

ADJUTANT GENERAL

WAR DEPARTMENT

THE JOINT CHIEFS OF STAFF

WASHINGTON

REPORT OF DEATH

12 FEBRUARY 1943

DATE

12 FEB 43

REPORT OF DEATH (4-2)

12 FEB 43

REPORT OF DEATH

12

REPORT OF DEATH

REPORT OF DEATH

REPORT OF DEATH

12 FEB 43

REPORT OF DEATH (4-2) 12 FEB 43

REPORT OF DEATH (4-2) 12 FEB 43

REPORT OF DEATH (4-2) 12 FEB 43

REPORT OF DEATH (4-2) 12 FEB 43

REPORT OF DEATH (4-2) 12 FEB 43