

## DISINTERMENT DIRECTIVE

1	SECTION A — NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER 5258 01692	DATE 15 DAY 05 MONTH 48 YEAR		
	NAME VOSBURG WELLINGTON N		SERIAL NUMBER 33356720	RANK PVT	ARM 1	DATE OF DEATH DAY MONTH YEAR 1 3322 03
CEMETERY NAPLES ALLIED CEMETERY					DISPOSITION OF REMAINS 1 3322 03 CODE DIST. PT.	
PLOT I	ROW 1	GRAVE 5	COUNTRY ITALY		CAUSE OF DEATH 1	

## SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE ARLINGTON NATIONAL CEMETERY FORT MYER, VIRGINIA	NAME AND ADDRESS OF NEXT OF KIN MR. JOHN H. VOSBURG, (FATHER) RURAL DELIVERY #1 PITTSBURGH, PENNSYLVANIA
---	---

## SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISTINTERRED
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER		ORGANIZATION USAGF	RELIGION	IDENTIFICATION VERIFIED BY NAME AND TITLE

## SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL SHROUD	CONDITION OF REMAINS SKELETAL
OTHER MEANS OF IDENTIFICATION BURIAL REPORT	

MINOR DISCREPANCIES 1 NONE
-------------------------------

REMAINS PREPARED AND PLACED IN CASKET	
DATE 9 Aug 48 BY ROY E. MORGAN (EMBALMER)	EMBALMER (Signature) <i>Roy E. Morgan</i>
CASKET SEALED BY ROY E. MORGAN (EMBALMER)	SHIPPING ADDRESS VERIFIED BY ROY E. MORGAN (EMBALMER)
CASKET BOXED AND MARKED	DATE 9 Aug 48 BY FIRMAN I (RECORDER)

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

*B.K. Traynor*  
B.K. TRAYNOR WOJG USA

SIGNATURE OF GRS INSPECTOR

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

# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

FROM <b>USMC NAPLES ITALY</b>		TO <b>NAPLES PORTMORGUE</b>	
KIND OF CONVEYANCE <b>TRUCK</b>		NAME OF CONVOYER <b>B. K. TRAYNOR WOJG USA</b>	
SIGNATURE OF SHIPPER <b>PC CRAIG CAPT QMC</b>	DATE <b>5 Aug 48</b>	SIGNATURE OF RECEIVER <i>Frank A. Wilson</i> <b>FRANK A. WILSON CAPT QMC</b>	DATE <b>5 Aug 48</b>

## 2. SHIPPED

FROM <b>NAPLES PORT MORGUE</b>		TO <b>USAT LAWRENCE VICTORY</b>	
KIND OF CONVEYANCE <b>TRUCK</b>		NAME OF CONVOYER <b>F. A. WILSON CAPT QMC</b>	
SIGNATURE OF SHIPPER <b>F. A. WILSON CAPT QMC</b>	DATE <b>20 OCT 1948</b>	SIGNATURE OF RECEIVER <i>Joseph J. Carroll</i> <b>JOSEPH J. CARROLL LT TC</b>	DATE <b>20 OCT 1948</b>

## 3. SHIPPED

FROM <b>NY PE</b>		TO <b>NY PE</b>	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>W. W. Preisch</i> <b>W. W. PREISCH LIEUT. COLONEL, TC.</b>	DATE <b>5 NOV 1948</b>

## 4. SHIPPED PORT TRANSPORTATION OFFICER

FROM <b>NY PE Train</b>		TO <b>DC 03</b>	
KIND OF CONVEYANCE		NAME OF CONVOYER <i>Stanley Jacobs</i>	
SIGNATURE OF SHIPPER <b>W. W. PREISCH LIEUT. COLONEL, TC.</b>	DATE <b>NOV 10 1948</b>	SIGNATURE OF RECEIVER <i>Stanley Jacobs</i>	DATE <b>NOV 10 1948</b>

## 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

1

# DISINTERMENT DIRECTIVE

SECTION A —  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

DAY MONTH YEAR

NAME  
VOSBURG WELLINGTON N

SERIAL NUMBER  
33356720

RANK  
PVT

ARM  
1

DATE OF DEATH

DAY MONTH YEAR

CEMETERY  
NAPLES ALLIED CEM ITALY

DISPOSITION OF REMAINS

CODE DIST. PT.

PLOT I ROW 1 GRAVE 5 COUNTRY  
NAPLES ALLIED CEM ITALY

CAUSE OF DEATH

## 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  
VOSBURG WELLINGTON N

SERIAL NUMBER  
33356720

RANK  
PVT

DATE OF DEATH

DATE DISINTERRED  
4 Aug 48

IDENTIFICATION TAG ON  
 REMAINS  
 MARKER

ORGANIZATION  
USAGF

RELIGION  
UNK

IDENTIFICATION VERIFIED BY  
*M G Borres*  
M G BORRES 2 LT QMC  
NAME AND TITLE

## SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES

REMAINS PREPARED AND PLACED IN CASKET

DATE BY

EMBALMER (Signature)

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.  
*B K LSVARGH*  
SIGNATURE OF GRS INSPECTOR

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

# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

FROM <b>USMC NAPLES ITALY</b>	TO <b>NAPLES PORT MORGUE</b>
KIND OF CONVEYANCE <b>TRUCK</b>	NAME OF CONVOYER <b>B K TRAYNOR WOJG</b>
SIGNATURE OF SHIPPER <i>[Signature]</i> <b>P C CRAIG CAPT OMC</b>	DATE <b>5 Aug. 48</b>
SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE <b>NOV 10 1948</b>

## 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

# MESSAGEFORM

MESSAGE CENTER No. TRANSMITTING MEANS CRYPTOGRAPH OR CLEAR TEXT

CALLS

STA. SER. No. PRECEDENCE

TRANSMISSION INSTRUCTIONS

ORIGINATOR

DATE-TIME GROUP

v

NR

NOV 1 1948

ACTION

INFORMATION

EXEMPT

OPERATING SIGNALS

GROUP COUNT

GR

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Originator)

PHILADELPHIA QUARTERMASTER DEPOT, PHILA., PA.

ACTION TO:

- MR. JOHN H. VOSBURG GOVT PAID
- RURAL DELIVERY #1
- PITTSTON, PA.

SECURITY CLASSIFICATION

PRECEDENCE FOR ACTION INFORMATION

DAY LETTER

O. I. 11917

 ORIGINAL MESSAGE

REFERS TO ANOTHER MESSAGE IDENTIFICATION CLASSIFICATION

INFORMATION TO:

DLR AND CHECK ANY CHGS

WE HAVE BEEN ADVISED REMAINS OF THE LATE WELLINGTON N. VOSBURG ARE ENROUTE TO THE UNITED STATES. OUR RECORDS INDICATE YOU WISH REMAINS INTERRED IN ARLINGTON NATIONAL CEMETERY. WITHIN FORTY EIGHT HOURS AFTER RECEIPT OF THIS MESSAGE PLEASE CONFIRM YOUR ORIGINAL INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS AND FURNISH YOUR CORRECT MAILING ADDRESS BY TELEGRAM COLLECT TO COMMANDING OFFICER PHILA. QUARTERMASTER DEPOT, PHILA. PENNA. REPLY IS NECESSARY WITHIN THIS PERIOD SINCE IT WILL NOT BE POSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF FORTY EIGHT HOURS. WHILE FINAL INTERMENT OF THE REMAINS WILL BE MADE AS SOON AS PRACTICABLE AFTER RECEIPT FACTORS BEYOND OUR CONTROL MAY DELAY DELIVERY OF REMAINS TO THE NATIONAL CEMETERY FOR SEVERAL WEEKS. HOWEVER NATIONAL CEMETERY SUPERINTENDENT WILL NOTIFY YOU BY TELEGRAM DATE AND HOUR FUNERAL SERVICES WILL BE HELD IN SUFFICIENT TIME TO PERMIT YOUR ATTENDANCE AT YOUR OWN EXPENSE. APPROPRIATE JOINT MILITARY AND RELIGIOUS SERVICES WILL BE PROVIDED AT GRAVESIDE BY VETERANS ORGANIZATIONS OR MILITARY OR NAVAL PERSONNEL. REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. INTERMENT EXPENSE ALLOWANCE OF SEVENTY FIVE DOLLARS IS NOT AUTHORIZED IN ANY CASE WHERE BURIAL IS MADE IN A NATIONAL CEMETERY. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.

C. R. YOST, LT COL., QMC

SECURITY CLASSIFICATION

AUTHORIZATION

SIGNATURE

ORIGINATING AGENCY

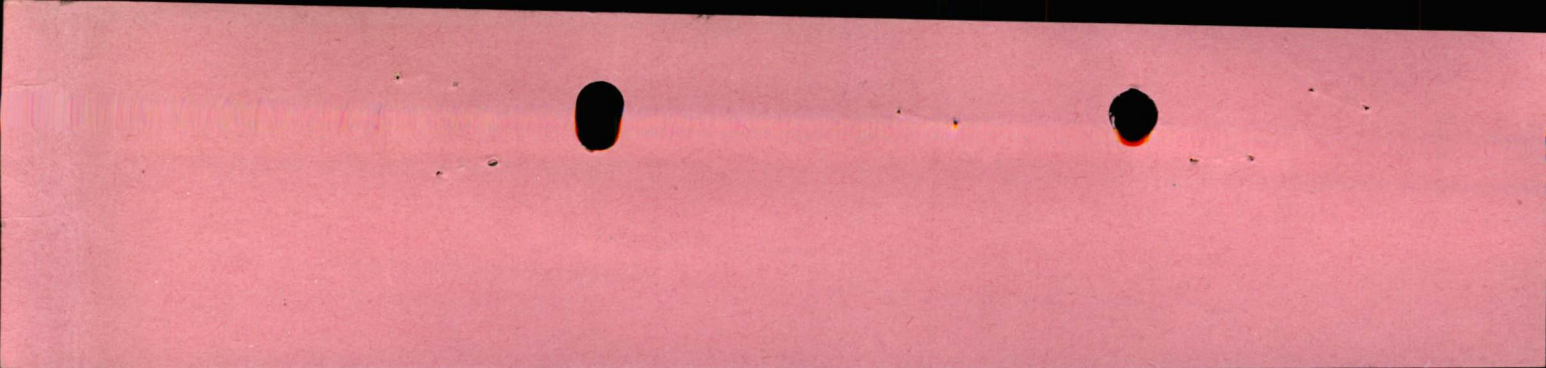
DATE-TIME GROUP

OFFICIAL TITLE

SYMBOL

PAGE 1 OF 1

Ret.  
1/2/47



Prk.

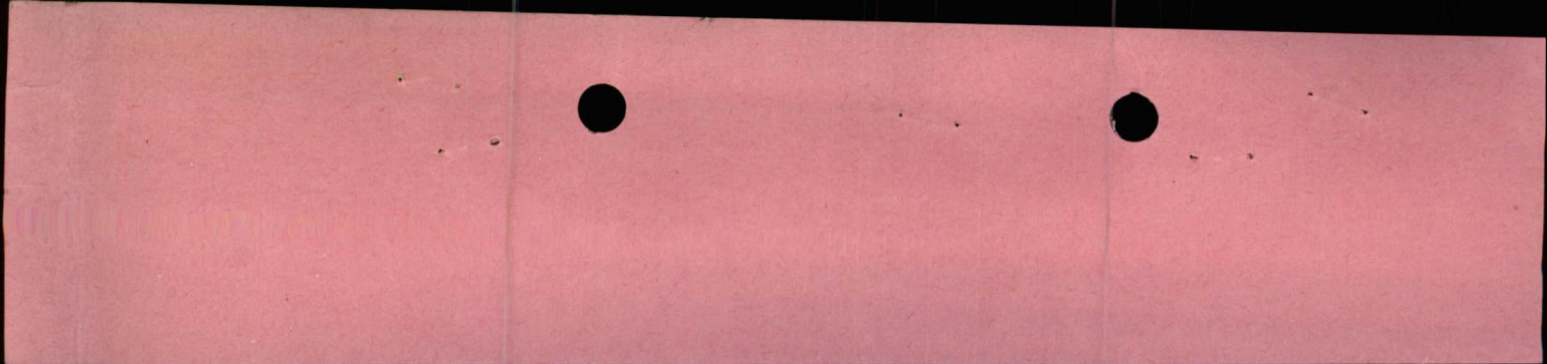
293

Gasburg, Wellington N.

mj

3325672





# REQUEST FOR DISPOSITION OF REMAINS

GRADE OF DECEASED, NAME, ARMY SERIAL NUMBER AND REPORTED PLACE OF BURIAL \_\_\_\_\_ DATE: \_\_\_\_\_

Pvt Wellington N. Vosburg, 33 356 720  
Plot I, Row 1, Grave 5,  
United States Military Cemetery  
Naples, Italy

24 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, John Henry Vosburg  
(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

PRIVATE CEMETERY LOCATED AT \_\_\_\_\_ (LOCATION OF CEMETERY SELECTED)

4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT Ft. Myer Virginia (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

*DD Form 1300  
10/24/47*

*Cad 14 May 48  
Mathis*

OQMG FORM 14 NOV 1946 345 MILITARY

16-50411-1

APR 17

M. L. LOFTIN

**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 <del>XXXXXXXX</del>	FIRST NAME <del>XXXXXXXX</del>	MIDDLE INITIAL <del>XXXXX</del>
NUMBER AND STREET <del>XXXXXXXXXXXX</del>	CITY OR TOWN <del>XXXXXXXXXX</del>	COUNTY OR PROVINCE <del>XXXXXXXXXX</del>
EXPRESS OFFICE (Nearest railroad passenger station) <del>XXXXXXXXXX XX XXXXXXXXX</del>	TELEGRAPH ADDRESS <del>XXXXXXXXXXXX XXXXXXXXX</del>	STATE OR TERRITORY OF U. S. A., OR COUNTRY <del>Pennax</del>
		TELEPHONE NO. <del>XXXXXXXXXX XXXXX</del>

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 <del>Edgar H. Henry</del>			
NUMBER AND STREET <del>111 Parke Street</del>	CITY OR TOWN <del>Pittston</del>	COUNTY OR PROVINCE <del>Lucerne Co</del>	STATE OR TERRITORY OF U. S. A., OR COUNTRY <del>Pennax</del>
EXPRESS OFFICE (Nearest railroad passenger station) <del>XXXXXXXXXX XXXXX</del>	TELEGRAPH ADDRESS <del>XXXXXXX</del>	TELEPHONE NO. <del>XXXX</del>	

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 <del>Vosburg</del>	FIRST NAME <del>XXXXXXXX</del>	MIDDLE INITIAL <del>XX</del>	RELATIONSHIP TO DECEASED <del>xxxxxxx</del>
NUMBER AND STREET <del>XXXXXXXXXX</del>	CITY OR TOWN <del>Pittston</del>	COUNTY OR PROVINCE <del>Lucerne Co</del>	STATE OR TERRITORY OF U. S. A., OR COUNTRY <del>Pennax</del>

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.

*John H. Vosburg* (SIGNATURE OF NEXT OF KIN)      R. D. 1. (STREET AND NUMBER)  
John H. Vosburg (NAME PRINTED OR TYPED)      Pittston Penna. (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 1st day of Dec, 1947, at city (or town) of Harding, county of Lucerne, and State (or Territory or District) of Pennsylvania;

*James A. Bal* (SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)  
Justices of the Peace (OFFICIAL TITLE)

\*NOTE.—Page 4 is part of the notarial attestation.  
 My Commission expires January 1, 1950

## 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.

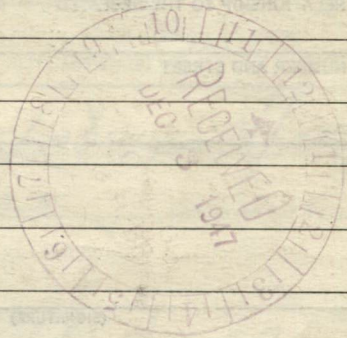
THIS IS TO NOTIFY YOU THAT I AM NOT THE NEXT OF KIN AUTHORIZED TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED NAMED ON PAGE 1 OF THIS FORM. THE FOLLOWING PERSON, TO THE BEST OF MY KNOWLEDGE, IS THE NEXT OF KIN TO WHOM THIS FORM SHOULD BE DIRECTED.

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

_____	_____ (DATE)
(SIGNATURE)	(STREET AND NUMBER)
_____	_____ (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.*



E F Q M 12-2-43  
V.W.

# INVENTORY OF EFFECTS

(See AR 600 550)

Vosburg, Wellington N 33356720  
(Last name) (First name) (Middle initial) (Army serial number)

late a Private 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	Billfold & Misc Papers	
	Nearest of Kin - Mother	
	Mrs Mary Vosburg	
	RD # 1	
	Pittston, Penna	
	Effects delivered to Quartermaster, 82nd Airborne Division, APO 469, for shipment to Effects Quartermaster, Army Effects Bureau, Kansas City, Missouri.	

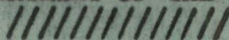
\*To be filled out only in case of shipment to The Adjutant General

## CLASS II - Other effects

NUMBER	ARTICLES



DEPARTMENT OF THE ARMY



QMCMF 293  
Vosburg, Wellington N.  
SN 33 356 720

28 November 1947

Mr. John H. Vosburg  
Rural Delivery #1  
Pittston, Pennsylvania

Dear Mr. Vosburg:

Your letter pertaining to the remains of your son, the late Private Wellington N. Vosburg, has come to my attention.

In compliance with your recent request, I am inclosing another "Request for Disposition of Remains" form for your son.

This form must be completed and properly accomplished, including notarized certification by you who are indicated on our records as the next of kin of the decedent. The form should then be returned to this office at the earliest opportunity to enable us to record and initiate the proper action in accordance with your desires.

Sincerely yours,

- 2 Incls  
1. Disposition  
2. Envelope

RICHARD B. COOMBS  
Major, QMC  
Memorial Division

leh

Nov 29 4 25 PM '47

RBC



O.I.		INSPECTION CHECK LIST			
11917		(For Use at Distribution Point)			
Name		Rank		Serial Number	
Vosburg, Wellington N. ✓		Pvt. ✓		33356720 ✓	
Source		Consignee			
Mr. John H. Vosburg (Father) Rural Delivery #1, Pittston, Pa.		SUPERINTENDENT Arlington National Cemetery Fort Myer, Virginia ✓			
SHIPPING CASE - General Appearance (Check ONLY Discrepancies)		Condition of Shipping Case (Check One)			
		<input type="checkbox"/> Satisfactory		<input checked="" type="checkbox"/> Unsatisfactory	
FINISH (Exterior)		Remarks			
FINISH (Interior)					
HANDLES					
HANDLE BOLTS					
STENCILING - NAMEPLATE					
HEALTH PERMIT MARKER					
HEALTH PERMIT NUMBER					
CASKET - General Appearance (Check ONLY Discrepancies)		Condition of Casket (Check One)			
		<input type="checkbox"/> Satisfactory		<input checked="" type="checkbox"/> Unsatisfactory	
FINISH ( Exterior )		Remarks			
HANDLES AND FASTENINGS					
STENCILING - NAMEPLATE					
CAM LOCKS (Sealing)					
ODOR OR MOISTURE					
ROUTED THROUGH					
<input type="checkbox"/> MORTUARY OPERATING ROOM			<input type="checkbox"/> REPAIR SHOP		
Condition of Remains			Casket Repaired		
<input 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			Remarks		
			Remarks		
Time	Date	Signature or Mortician	Time	Date	Signature of Inspector
		<i>Arlington</i>			<i>Ok E.H. et 15 Nov 48</i>

# RECEIPT OF REMAINS

*Vosburg, Wellington N.*

DISTRIBUTION CENTER  
AGH DISTRIBUTION CENTER, PHILA QM DEPOT

SUPERINTENDENT  
ARLINGTON NATIONAL CEMETERY  
FORT MYER, VIRGINIA

~~XXXXXXXX~~  
DAY LETTER

REMAINS CONSIGNED TO: *43 Vosburg, Wellington N.*  
*8356720*

SIXTY FIVE REMAINS DELIVERED TO YOU BY THIS DEPOT ACCOMPANIED BY  
MILITARY ESCORT AT APPROXIMATELY 7:00 AM TWENTY SECOND NOVEMBER.

C. R. YOST, LT COL., QMC

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

THIS 23rd DAY OF Nov., 19 48

Ralph G. Soden, M.M.C.  
WITNESS (Escort)

Joseph J. Walsh, Sr. Supt.  
CONSIGNEE

Original receipt filed under "PFC Evan N. Alex,  
SN 35 065 958"

NAT  
FILE  
RECORDS ANNOTATED  
DATE JAN 15 1949  
NAME Wheeler  
R & R BR.

REPAIRS  
RECORDS BRANCH

DEC 20 8 48 AM '48

MEMORIAL DIVISION

RECEIVED  
DEC 21 1948









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

(S-4-6-44)  
JRM:BB:ret  
March 6, 1944

IN REPLY REFER TO #39471 D

Mr. John Vosburg  
R.D. 1  
Pittston, Pennsylvania

Dear Mr. Vosburg:

The Army Effects Bureau has received from overseas some personal property of your son, Private Wellington N. Vosburg, consisting of a billfold and papers.

To make proper disposition of such property, it is necessary that this Bureau have certain information regarding the family of your son. If he was married, please state the name and address of his widow.

If your son left a will which has been probated, please furnish the original or a certified copy of the letters of administration. Any papers submitted will be returned to you as soon as possible.

Please mail your reply in the inclosed self-addressed envelope which needs no postage, as this will accelerate disposal of the property.

Yours very truly,

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

1 Incl.  
Envelope



39471

IMMEDIATE ACTION

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

(S-4-6-44)  
JRM:BB:ret  
March 6, 1944

IN REPLY REFER TO #39471 D

*File  
pc*

Mr. John Vosburg  
R.D. 1  
Pittston, Pennsylvania

Dear Mr. Vosburg:

The Army Effects Bureau has received from overseas some personal property of your son, Private Wellington N. Vosburg, consisting of a billfold and papers.

To make proper disposition of such property, it is necessary that this Bureau have certain information regarding the family of your son. If he was married, please state the name and address of his widow.

If your son left a will which has been probated, please furnish the original or a certified copy of the letters of administration. Any papers submitted will be returned to you as soon as possible.

Please mail your reply in the inclosed self-addressed envelope which needs no postage, as this will accelerate disposal of the property.

Yours very truly,

*Leon D. Glasscock*

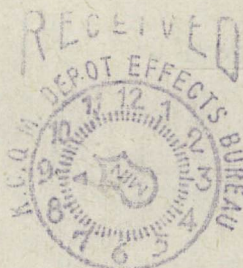
LEON D. GLASSCOCK  
Captain Q.M.C.  
Assistant

1 Incl.  
Envelope

*Pittston, Pa.  
march 9-44*

*Gentlemen  
my son was single and left  
no will lived his entire life previous to entering  
service with us Mr & Mrs John Vosburg*

ARMY SERVICE FORCES  
KANSAS CITY QUARTERMASTER DEPT.  
501 BRADLEY AVENUE  
KANSAS CITY 1, MISSOURI



KANSAS CITY, MO.

MAR 13 1944 PM

*att*

Date 13 December 1948

TO: Mr. John H. Vosburg  
Rural Del. #1  
Pittston, Penna.

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

EXECUTIVE OFFICE  
ARLINGTON NATIONAL CEMETERY  
Fort Myer, Virginia

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.

*293* To be filled in by Superintendent or Commanding Officer

Name of Veteran Wellington N. Vosburg - 33,356 720  
Rank, etc. Pvt AGF 82nd Division 307th Engr. Co. B  
Grave or lot No. 5721 Section 12  
Date of death October 10 1943  
Date buried 2 December 1948

To be filled in by Next of Kin

State desired Pennsylvania  
Religious emblem desired Christian  
(Latin Cross for Christian Faith, Star of David for Hebrew Faith)  
Date of birth January 14 1922  
Address of kin R. D. I. Pittston Pa.  
Signature John H Vosburg Date Dec. 17 1948

JAN 6 1949

*file  
14 Jan 49  
Pittston*

Date 12 December 1948

Mr. John H. ...  
...  
...  
...  
...

The authorized institution for a Government headstone or the general type (furnished for all  
descendants 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 part of him, may be shown on the  
headstone for the descendant whose name is listed below, it is requested that you fill in the proper space  
indicated below the data called for, and RETURN THIS FORM PROMPTLY TO THE

WASHINGTON NATIONAL CEMETERY  
FORT MYER, VIRGINIA

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 or date of birth and death  
thereon as shown in the official records, and NO CHANGE WILL BE MADE AT A LATER DATE.  
AT GOVERNMENT EXPENSE

RECEIVED  
WASHINGTON NATIONAL  
CEMETERY

MAR 21 8 23 AM 1949  
FORT MYER, VIRGINIA

To be filled in by Superintendent or Commanding Officer

Name of Veteran Wellington H. ...  
Rank, etc. ...  
Grave or lot No. ...  
Date of death ...  
Date buried ...

To be filled in by Next of Kin

State desired Pennsylvania  
Religious emblem desired  
Date of birth ...  
Address of Mr. R. D. I. ...  
Signature ...  
Date Dec. 17 1948

JAN 9 1949

FORM 318

ARMY SERVICE FORCES  
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

BB:vb

MAR 17 1944

Suspense (S-3-28-44) ✓

Case No. 39471 D ✓

Date March 14, 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 Wellington N. Vosburg ✓ Serial No. 33356720 ✓

Ship to: Mr. John Vosburg ✓

Street and Number R.D. 1 ✓

City and State Pittston, Pennsylvania ✓

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

For the Effects Quartermaster

LIST OF PACKAGES SHIPPED

*1 Box*

Franked Mail: 4# or less  
Personal Post Charges  
Estimated Express Charges  
Estimated Freight Charges

*Frank* ✓

Total Number of Pieces: *1*

Weight of Shipment: *1 #*

Shipping Clerk *JLR*

Date

MAR 16 1944

*mailed*

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

Case No. 39471 fo

(Date) 15 April 1944

Subject: Report of transactions in disposing of the effects of

Wellington N. Vosburg, 33,356,720, 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 Oct., 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 ~~XXXXXXXX~~ (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 13 March, 1944, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application and/or affidavit of Mary H. John (Name of Vosburg for the effects of the above-named deceased soldier, now (Claimant) 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 John Vosburg (Name of person found entitled)

of R. D. 1 Pittston, State of (Number, Street or Avenue) (City, Town or Village)

Pennsylvania, is the father of the above- (Relationship or Capacity)

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

(Signature of Summary Court Officer)

RECEIVED  
JAN 10 1900  
U.S. DEPARTMENT OF AGRICULTURE  
WASHINGTON, D.C.

10

10

Subject: Report of transactions in disposing of the effects of

Wellington N. Vosburg , 33,356,720 , 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 Oct. , 19 43 , 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., KCCM 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 ~~XXXXXXXX~~ (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 13 March, 1944, pursuant to Special Orders 228, Headquarters, KCCM Depot, dated 25 September 1943, the application and/or affidavit of Mary H. John (Name of Vosburg for the effects of the above-named deceased soldier, now (Claimant) 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 John Vosburg (Name of person found entitled)

of R. D. 1 Pittston , State of (Number, Street or Avenue) (City, Town or Village)

Pennsylvania , is the father of the above- (Relationship or Capacity)

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

(Signature of Summary Court Officer)  
W. P. HENMAN, Major Q.M.C.  
(Name, Rank, Organization)  
SUMMARY COURT-MARTIAL



CONFIDENTIAL

[Faint, illegible text covering the upper and middle sections of the page]

SECTION

[Faint, illegible text covering the lower section of the page]

*20*

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

JEM:BB:fc  
15 April 1944

In reply refer to SPQDK 250.414

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

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

There are submitted herewith reports of transactions by the Summary Courts-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>
28931-D	Chiocciariello, Albert J.	Cpl.	32,194,960
30126-D	Bower, Jacob K.	FFC	33,233,956
38623-D	Lewis, William H.	Pvt.	33,276,536
39181-D	Mandel, Sol L.	TFG	32,161,692
<i>ml</i> 39471-D	Vosburg, Wellington N.	Pvt.	33,256,729

For the Commanding Officer:

W. F. HEIMAN  
Major G.W.O.  
Asst. Effects Quartermaster

5 Incls.  
Incl. 1-- Case No. 28931  
Incl. 2-- Case No. 30126  
Incl. 3-- Case No. 38623  
Incl. 4-- Case No. 39181  
Incl. 5-- Case No. 39471

**SCREENED**  
*Amu 5-18-48*

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

(S-4-22-44)  
JRM:BB:vb  
March 22, 1944

IN REPLY REFER TO 39471 D

*File*

Mr. and Mrs. John Vosburg  
R.D. 1  
Pittston, Pennsylvania

Dear Mr. and Mrs. Vosburg:

Thank you for the information given the Army Effects Bureau in connection with disposal of personal effects consisting of one billfold with papers and snapshots belonging to your son, Private Wellington N. Vosburg.

This property has been forwarded by mail under separate cover, so that distribution may be made in accordance with the laws of the state of your son's legal residence.

This Bureau has to date received no more property of Private Vosburg, however, you may rest assured that you will be notified immediately if additional property of his is received.

When you have received the package please sign in the space provided below and return the acknowledgment to this Bureau in the inclosed self-addressed envelope which needs no postage. Mrs. Vosburg may sign as witness. You may retain one copy of this letter.

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

Yours very truly,

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

1 Incl.  
Envelope

Receipt acknowledged

*John Vosburg*  
Signature

*March 25-44*  
Date

*John Vosburg*  
Witness



RECEIVED

KANSAS CITY, MO.

MAR 29 1944 AM

293  
AGRS-DC-S 201 Vosburg, Wellington N.  
(16 Oct 48)

4 March 1949

Mrs. Dorothy V. Moyer  
Box 26  
Hepatcong, New Jersey

Dear Mrs. Moyer:

Reference is made to your letter addressed to the Adjutant General, Washington 25, D. C., requesting information regarding the death of your brother.

The casualty message received from the Commanding General of the North African Area stated only that your brother, Private Wellington N. Vosburg, Army serial number 33 356 720, was killed in action 10 October 1943 in Italy. Further information now available confirms this report and shows that death occurred at Naples, Italy as the result of a fractured skull incurred when an explosion of undetermined origin demolished the barracks in which he was quartered. No further details have been received.

The Quartermaster General of the Army, Washington 25, D. C., has jurisdiction over matters pertaining to the burial of our military personnel who die overseas. A copy of your letter has accordingly been forwarded to that official for necessary action.

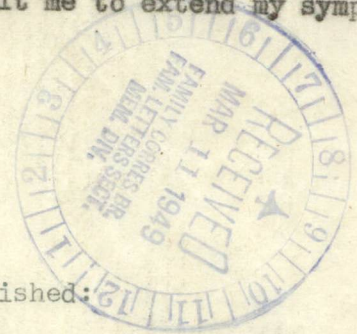
Permit me to extend my sympathy.

Sincerely yours,

CHARLES D. CARLE  
Colonel, AGD  
Commanding

Copy furnished:  
The Quartermaster General  
Washington 25, D. C.

1 Incl  
Ext cpy ltr 16 Oct 48.



*Remission in Nov 48  
to det. Oct 48*

*22  
10 Nov 49  
FLA*

Hopatcong, New Jersey  
Box 26  
16 October 1948

Adjutant General  
Dept. of the Army  
Washington 25, D. C.

Gentlemen:

\*\*\*\*\*

My brother Carl, 6942393, Co. A, 2nd C.M.L. Bn., visited his brother's Grave in Naples, while he was overseas during the war. My brother, Wellington, is buried at Plot A - Row 1, Grave 5, allied cemetery, Naples, Wellington Vosburg, Private, 33 356 720, Co B, 307th Engineer Bn. Sir, would you be kind enough to send me the following information where my brother died, when, how he was killed, about when his body will arrive home for burial, if not for some time, if its possible to go and visit his grave, and who in our family are allowed to visit it, I mena is, any of this transportation free, to mother or sister, etc.,

\*\*\*\*\*

Mrs. Dorothy V. Moyer

Washington, New Jersey  
in October 1943

Adjutant General  
Dept. of the Army  
Washington 25, D. C.

Dear Sir:

In another copy of your letter of October 1, 1943, you mentioned that you were interested in the possibility of having a copy of the records of the 1st Cavalry Division made available to you. I am sorry that I cannot give you a more definite answer at this time. The records of the 1st Cavalry Division are being processed and it will be some time before they are available. I will advise you when they are available.

Very truly yours,  
Mrs. Gordon V. Meyer

WESTERN  
UNION

WESTERN  
UNION

WESTERN  
UNION

A.G.R. DIVISION  
PHILA. QM DEPOT

WU AA394 21 3 EXTRA COLLECT

1948 NOV 3 AM 7:53  
PITTSTON PENN NOV 2 135P

*agr*

PHILA QM DEPOT GRAVES REGISTRATION

RETEL NOV 1 OUR WISH REMAINS SAME WELLINGTON NELSON VOSBURG

TO BE INTERRED IN ARLINGTON NATIONAL CEMETERY

MR AND MRS J. H. VOSBURG SR PITTSTON RD NO1



1 1



NO. 100-27-2 EXTRA COLLECT

PITTSBURGH PENN NOV 2 1939

PHILA. DEPOT GRAVES REGISTRATION

RETEL NOV 1 OUR WISH REMAINS SAME WILLINGTON KILSON VOSBURG

TO BE INTERRED IN ARLINGTON NATIONAL CEMETERY

MR AND MRS W. H. VOSBURG SR PITTSBURGH PA

Pittston Pa.

Nov. 17 47

Gentlemen

Would you kindly mail me another blank form

oqmg  
14- Nov. #6 ) MILITARY 345

293  
Pvt. Wellington N. Vosburg 33356720

Plot I Row I Grave 5

United States Military Cemetery

Naples, Italy

To John H. Vosburg

R. D. I.

Pittston Pa.



NOV 19 4 35 PM '47

RECORDS BRANCH

GENERAL DIVISION

CORRESPONDENCE ACTION SHEET

Mr. Addresssee: Mrs. John H. Vosburg Relationship Father

State P.D. #1

City, State Pittston, Penna. Date letter '47

Cemetery Temporary: \_\_\_\_\_

Permanent: Plot Row Gr Cem. Name or No. City Country

PARAGRAPHS (sequence)

-- ADDITIONAL -- DATA -- MODIFICATIONS --

165a

84A2

1st para, omit "the late \_\_\_\_\_";  
2nd para. revise 2nd line thus:  
by you who are indicated on our records as the nok of the decedent.

Incl  
DF

Decedent:

Last

First

Initial

Rank

ASN

Analyst Typist Reviewer

Modifications

OKed

Pvt Wellington N. Vosburg, 33 356 720  
Plot I, Row 1, Grave 5,  
United States Military Cemetery  
Naples, Italy

24 October 1947

Mr. John Vosburg  
Rural Delivery #1  
Pittston, Pennsylvania

Dear Mr. Vosburg:

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

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

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

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

Sincerely,

THOMAS B. LARKIN  
Major General  
The Quartermaster General

Incls.

OCT 29 2 55 PM '47  
MAIL & RECORDS BRANCH

fbj

1942  
10 October 1942  
The Honorable  
The Secretary of War  
Washington, D.C.

10 October 1942

Dear Sir:

Enclosed for you are two copies of the report of the War Relocation Authority, dated October 1, 1942, regarding the activities of the Japanese American Citizens League (JACL) in the United States.

The report of the War Relocation Authority, dated October 1, 1942, regarding the activities of the Japanese American Citizens League (JACL) in the United States. The report contains information regarding the activities of the JACL in the United States, including its efforts to assist Japanese American citizens and its activities in the United States.

The enclosed report, dated October 1, 1942, regarding the activities of the Japanese American Citizens League (JACL) in the United States. The report contains information regarding the activities of the JACL in the United States, including its efforts to assist Japanese American citizens and its activities in the United States.

If you should have any questions regarding the enclosed report, please contact the War Relocation Authority, 1200 K Street, N.W., Washington, D.C.

Very truly yours,  
The Secretary of War

THOMAS H. LADD  
Major General  
The War Relocation Authority

RECEIVED  
OCT 10 1942  
U.S. DEPARTMENT OF WAR  
WASHINGTON, D.C.

17 October 1946

Mr. John Vosburg  
Route #1  
Pittston, Pennsylvania

Dear Mr. Vosburg:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Private Wellington N. Vosburg, A.S.N. 33 356 720.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Naples, plot I, row 1, grave 5. 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

mg

Pg

IN REPLY TO

Dear Sir,  
Reference is made to your letter of the 12th inst.

dated the 12th inst.

The work in progress in the Department is being carried out in accordance with the programme of work approved by the Council of the Department on the 12th inst.

The programme of work in progress in the Department is being carried out in accordance with the programme of work approved by the Council of the Department on the 12th inst.

The programme of work in progress in the Department is being carried out in accordance with the programme of work approved by the Council of the Department on the 12th inst.

The programme of work in progress in the Department is being carried out in accordance with the programme of work approved by the Council of the Department on the 12th inst.

Yours faithfully,  
[Signature]

Director General

W. S. L. [Signature]  
[Address]  
[Address]



*Fam*  
QMGYG 293  
Vosburg, Wellington N.  
S.N. 33 556 720

*to*  
Address Reply To  
THE QUARTERMASTER GENERAL  
Attention: Memorial Division

1 November 1946

Mr. John H. Vosburg  
Rural Delivery #1  
Pittston, Pennsylvania

Dear Mr. Vosburg:

Your letter concerning your son, the late Private Wellington N. Vosburg, has been received in this office.

The War Department has now been authorized to remove the remains of our honored dead, at Government expense, to the final resting place which next of kin may designate.

When the necessary verification of records has been completed, a letter with an information pamphlet and a "Request for Disposition" form attached will be mailed to you. The "Request for Disposition" form, when properly filled out, will constitute the formal expression of your detailed desires as next of kin. Until you receive these forms, therefore, it will not be necessary for you to communicate with this office regarding this subject, unless you desire to report any change of address. The necessity for complete coordination of movement in many parts of the world makes it impossible, at this time, to estimate when the mentioned forms will be mailed. Every effort, however, will be made to shorten the time between now and the date of mailing and your desires will be acted upon with a minimum of delay.

A copy of your letter has been forwarded to The Adjutant General Washington 25, D. C., for direct reply relative to circumstances surrounding the death of your son as that office has jurisdiction over matters of this nature.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours

*ng*  
*Ch*  
*ped*  
JAMES L. PRENN  
Major, QMC  
Assistant

MEMORIAL DIVISION

Nov 1 10 04 AM '46

RECORDS AND RECORDS BRANCH

MAIL & RECORDS BRANCH

O O M G

Nov 1 11 30 AM '46

GENERAL INVESTIGATIVE  
DIVISION, WASHINGTON, D. C.  
NOVEMBER 23 1946

1 November 1946

Address Reply to  
THE QUARTERMASTER GENERAL  
Attention: Memorial Division

Mr. John H. Voorburg  
Postal Delivery #1  
Pittston, Pennsylvania

Dear Mr. Voorburg:

Your letter concerning your son, the late Private William H. Voorburg, has been received in this office.

The War Department has now been authorized to remove the remains of our honored dead, at Government expense, to the final resting place which next of kin designate.

When the necessary verification of records has been completed, a letter with an information pamphlet and a "Request for Deposition" form attached will be mailed to you. The "Request for Deposition" form, when properly filled out, will contain the formal expression of your detailed desire as next of kin. Until you receive these forms, therefore, it will not be necessary for you to communicate with this office regarding this subject, unless you desire to report any change of address. The necessary for complete coordination of movement in many parts of the world takes it impracticable, at this time, to advise when the mentioned forms will be mailed. Every effort, however, will be made to shorten the time between now and the date of mailing and your desires will be noted upon this minimum of delay.

A copy of your letter has been forwarded to the Adjutant General, Washington 25, D. C., for direct reply relative to administrative matters of the War Department over matters of this nature.

FOR THE QUARTERMASTER GENERAL

Sincerely yours

JAMES L. FINNIN  
Major, GPO  
Adjutant

RECORDS BRANCH

RECORDS BRANCH  
MAIL & RECORDS BRANCH  
O O M C

NOV 1 11 30 AM '46

*to*  
QMGYG 293 Vosburg, Wellington N.  
S.N. 33 356 726

1st Ind

~~WD, OQMG, Washington 25, D. C., 1 November 1946~~

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

Forwarded for reply to so much thereof as pertains to your office.

FOR THE QUARTERMASTER GENERAL:

1 Incl  
Cy ltr dtd 1 Nov 46

JAMES L. PRENN  
Major, OMC  
Assistant  
*see*

JLP

mg

*EB*

Nov 1 11 30 AM '46  
O O M G  
MAIL & RECORDS BRANCH  
RECORDS BRANCH

NOV 1 10 00 AM '46

MEMORANDUM DIVISION

*[Handwritten signature]*

1916  
Washington, D. C.  
November 1916  
The Adjutant General, Washington, D. C.

Forwarded for reply to the office as set forth in your letter.  
FOR THE QUARTERMASTER GENERAL

111

LAMAR L. BRIDEN  
Major, USA  
Adjutant

1916  
Nov 19 4 1916

NOV 1 11 30 AM '16

MAIL & RECORDS BRANCH  
D. C. M. C.

RECORDS BRANCH

War Department

Pittston Pa  
Oct. 22, 46

Quartermaster General

In answer to your letter of the  
seventeenth in regards to our wishes  
of the disposition of our sons remains  
Pvt. Wellington N Vosburg A.S.N. 33-356-720  
it is our desire that they be brought  
home so that they can be interred in  
our family plot

Sincerely yours

John N Vosburg  
P. D. I.

Pittston Pa

P.S. Would you kindly inform us  
in what action he lost his life

J. N. V.

OCT 24 15 46

RECORDED & INDEXED

REGISTRATION AND  
RECORDS BRANCH

OCT 24 12 46 PM '46

MEMORIAL DIVISION



~~RESTRICTED~~  
~~CONFIDENTIAL~~

**REBURIAL**

**REPORT OF BURIAL**  
AR 30-1815 & TM 10-630

**AUG 19 1944**

11 July 1944 435

Date Report Filled Out

VOSBURG	Wellington	N.	33356720	White
(Last Name)	(First Name)	(Middle Initial)	(Serial No.)	(Race)
Pvt.	Co. "B", 307th AIB Engr. Bn.		Army	USA
(Rank)	(Organization)	(KIA)	(Branch)	(Country)
Naples, Italy	10 October 1943	Building explosion		
(Place of Death)	(Date of Death)	(Cause of Death)		(Religion : P, C, H, etc.)

**MEANS OF IDENTIFICATION**

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

If no identification tags, other means used to identify body (identification card, letters, etc.) : 2-A medical FDDM #52 E.M.T.

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

None

None

(Name of Emergency Addressee)

(Address of Emergency Addressee)

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

Shroud 1000 hrs. 11 July 1944 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

"I"

1

5

Wooden Cross

Protestant

(Plot No.)

(Row No.)

(Grave No.)

(King Grave Markers)

(Type of Religious Ceremony)

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

If Identification Tags not present, what other identification data were buried with the body and in what kind of container? QMC Form-1 GRS sealed in bottle and buried one foot below grave marker

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

Right side : MacWILLIAMS, Malcolm B. 33475782 Co.H, 36th Engr. Bn. 4

(Name)

(Rank) Pvt. (ASN)

(Organization)

(Grave No.)

Left side : FORNEY, Llwllyn G. 12082123 Co. B, 307th Engrs. 6

(Name)

(Rank) (ASN)

(Organization)

(Grave No.)

S/ George L. Riddle, Chaplain.

(Signature of Officer Reporting Burial)

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

LEO E. TRITSCHLER, 1st Lt. 602nd 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.

CLASSIFICATION DOWNGRADED

By Authority The QMG

Signature Alcorley

Date 4-4-50

30720 apn-AR 30-18N-c2

~~RESTRICTED~~  
~~CONFIDENTIAL~~

**20 NOV 1944**

2-36

**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 Graves 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 11 July 1944 from Plot A, Row 1, Grave 5, Allied Cemetery, Naples, Italy.  
 Reinterred same date in Plot "I" Row 1, Grave 5, Allied Cemetery, Naples, Italy.

**TOOTH-CHART**

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

Indicate ; missing natural teeth by X; crowns by O; fillings by □ ; bridges by — linkings 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



14574

NOV 23 1943

Q.M.C. FORM 1 - GRS  
SOS NATOUA  
July 1943

**CONFIDENTIAL**

**REPORT OF BURIAL**

AR 30-1815 & TM 10-630

18 OCTOBER 1943

Date Report Filled Out

293

VOSBURG, WELLINGTON N. 33356720 WHITE  
 (Last Name) (First Name) (Middle Initial) (Serial No.) (Race)

PVT. CO "B" 307TH AIB. ENGR. BN. ARMY UNITED STATES  
 (Rank) (Organization) (Branch) (Country)

NAPLES, ITALY 10 OCTOBER 1943 BUILDING EXPLOSION  
 (Place of Death) (Date of Death) (Cause of Death) (Religion : P, C, H, etc.)

**MEANS OF IDENTIFICATION**

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

If no identification tags, other means used to identify body (identification card, letters, etc.) : 2-A. MEDICAL

FORM # 52 E.M.T.

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:

(Name of Emergency Addressee)

(Name of Emergency Addressee)

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

SATURDAY 1600: 16 OCTOBER 1943

ALLIED CEMETERY, NAPLES

(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

A 1 5 WOODEN CROSS PROTESTANT:  
 (Plot No.) (Row No.) (Grave No.) (King Grave Markers) (Type of Religious Ceremony)

Identification Tag buried with body ( ) ; 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 ? COPY Q.M.C. FORM G.R.S. NO. 1, BURIED W/BODY.

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

Right side : McWILLIAMS, MALCOLM B. PVT. 33475782 CO "H" 36TH ENGRS. BN. 4  
 (Name) (Rank) (ASN) (Organization) (Grave No.)

Left side : FORNEY, LLYWLLYN G. PVT. 12082123 CO "B" 307TH ENGRS. 6  
 (Name) (Rank) (ASN) (Organization) (Grave No.)

*George L. Hader, Chap*  
(Signature of Officer Reporting Burial)

*John P. Mitchell*  
(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.

**RESTRICTED**  
CONFIDENTIAL

H.Q. - 160-Q. - 743 - 200 M.

15 JUL 1944 FILL  
2-58

INSTRUCTIONS FOR BURIAL

14574

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.

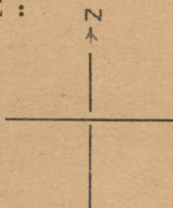
2. BURIAL : Dig grave to a depth five feet hasty battlefield burials, to sufficient depth to prevent elements from exposing the body.) Place only one body in a grave. Dig graves side by side, row behind row.

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

	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
(Left)	16	15	14	13	12	11	10	9	8	7	6	5	4	3	2	1
(Right)	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24

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

Characteristics :

Other Data :

When unidentified, take thumb and fingerprints of both hands.

4  
3  
2  
1  
Thumb  
Left  
Right  
Thumb  
1  
2  
3  
4

If this not possible, fill in tooth chart.

24,512

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

293 Vosburg, Wellington N

DATE 12 Nov. 43.

Basic/cmq 4628

FULL NAME Vosburg, Wellington N.		ARMY SERIAL NO. 33 356 720
GRADE Pvt.	ARM OR SERVICE Corps of Engineers	DATE OF BIRTH 14 January 1922
HOME ADDRESS Pittston, Pa.		
DATE OF DEATH 10 Oct. 43		PLACE OF DEATH North African Area
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP, & ADDRESS) Mrs. Mary H. Vosburg (Mother) R.D. #1, Pittston, Pa.		CAUSE OF DEATH Killed in action
BENEFICIARY (NAME, RELATIONSHIP, & ADDRESS) Mrs. Mary H. Vosburg (Mother) R.D. #1, Pittston, Pa. Mr. John Vosburg (father) R.D. #1, Pittston, Pa.		

CLASSIFICATION DOWNGRADED  
By Authority The OMC  
Signature *E. J. Conley*  
Date 4-4-50

as per ar 30-151  
@

*[Handwritten initials and date]*  
2/19/44

BY ORDER OF THE SECRETARY OF WAR:

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

RESTRICTED

DANIEL J. REIDY.

ADJUTANT GENERAL

ADDITIONAL DATA: (CONFIDENTIAL)

RESTRICTED

STATION OF DECEASED

*Algiers*

Nov 13 5 23 PM '43

MEMORIAL DIVISION

615/116