Graves Registration Pown No. 1 (Revised 1 Sept. 1943)

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What means o	f identification were b	ouried with the body?			
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of Mac Till Sty				+ A	
Signature or Name, Ras	ik and if possible Organiz	ration of person furnishing above	Data when other than office	r reporting burial.	1.
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		Company of the second		1/	200 to

Signature of Officer or other person reporting burial

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

E-2-35

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Grade Pace Rank	
Organization 101 Cinterna	
Address	
Address Nearest Relative mas, magnine B.	Carrottro
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Killed in Action Added Died of Disease	
Date 7/1/440 Hospital	
Battle Area Information	
Place of Burial monarch Ce	was the say
Point of Coordination	\/
Description of Body	
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n /1-10-5, 15/18" 12 3 70	DIGINATINE DIDECTIVE
Will of the STRA	DISINTERMENT DIRECTIVE
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NAME	SERIAL NUMBER RANK ARM DATE OF DEATH
BAILEY HERMAN F	34593480 PFC 1 DAY MONTH Y
CEMETERY	DISPOSITION OF REA
BLOSVILLE - CARENTAN	1 3505 E
PLOT ROW GRAVE COUNTRY E 2 35 FRANCE	CAUSE OF DEATH
SECTION B — C	CONSIGNEE AND NEXT OF KIN
SAINT LAURENT, FRANCE	MRS. MAYME B. CANNON (MOTHER) SYLVA, NORTH CAROLINA MAR 8 - 1949
NAME SECTION C — DISIN	INTERMENT AND IDENTIFICATION
Bailey, Herman F 34593480	RANK DATE OF DEATH DATE DISTINTERRED
	Utd Utd 16 Dec, 1947
IDENTIFICATION TAG ON ORGANIZATION REMAINS MARKER USAGF	Protestant IDENTIFICATION VERIFIED BY R. W. GANSEL 1st Lt, QMC NAME AND TITLE
NATURE OF BURIAL SECTION D — PREPARA	RATION OF REMAINS FOR SHIPMENT
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OTHER MEANS OF IDENTIFICATION	100000
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ATE 28 January, 1948 ASKET SEALED BY	Henry Cantrell
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Marvin H. Noyes	JAMES A. HOOVER JOH THE
I hereby certify that all the foregoing operations we and that the report above is correct	FINALES A. HOOVLER, 1st Lieut, Inf
I hereby certify that all the foregoing operations we and that the report above is correct.	ere conducted and accomplished under my immediate supervision
I hereby certify that all the foregoing operations we and that the report above is correct.	Giff What he latter and JAMES A. HOOLVER, 1st Lieut, Inf

GMC FORM REV 15 MAR 46 1194

RECORD OF CUSTODIAL TRANSFER

LARGE CONTRACTOR

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FROM US MC Blosville	3	Casketing Point "B"-St Lau	rent
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WAR DEPARTMENT

THE ADJUTANT GENERAL'S OFFICE

WASHINGTON 25, D. C.

REPORT OF DEATH

FULL NA	AME				ARMY SERIA	glm/4627	GRADE		• •
293 Bailey, Herman F.				34 5	593 480	PFC			
HOME ADDRESS					ARM OR SER	ARM OR SERVICE			
Sylva, North Carolina			Int	fantry	30 Nov. 21				
LACE	F DEATH			CAUSE OF DEATH		-	DATE O	F DEATH	
	Eu	ropean Area	*	Killed in	n action		6 3	June 1	14
TATION	OF DECEAS	ED			DATE OF EN	TRY ON		GTH OF S	
	Eu	ropean Area			4 Dec	4 Dec. 42		MONTHS	DAYS
1ERGE!	NCY ADDRES	SEE (NAME, RELATIONS	HIP & ADDRESS)						
	Mir: iary (name, Ma;	s. Mayme B. C	annon, mother,	Box 71, Sylva	₽ ₀				
NEFICI	Mir: iary (name, Ma;	s. Mayme B. C	annon, mother,		₽ ₀			THER PAY	

ADDITIONAL DATA AND/OR STATEMENT

Jump Status

The individual named in this report of death is held by the War Dept. to have been in a missing in action status from 6 June 1944 until such absence was terminated on 2 Aug. 44 when evidence considered sufficient to establish the fact of death was received by the Secretary of War from the Commanding General, European Area.

	COPIES FUI	RNISHEDI	Y BATTLE	1 -0:0	- Indian
s. g. o.	F. B. I.	F. O., U. S. A.		Tames to Einha	1 8 1
2. O. Q. M. G.	O. F. D.	ARMY EFFECTS BUREAU CASUALTY BRANCH FILE	NON-BATTLE	James W. Reinhart	80 0
G. A. O.	VET. ADMIN.	A. G. 201 FILE			DJUTANT GENERAL

WD. AGO. FORM NO. 52-1, 29 MAY 1944 @

PROJEST FOR DISPOSITION OF REMAIN

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

DATE:

Thirt E Row 2, Grews 35 United States Military Centery Hilder Management of the part of this form. 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 QUARTER MASTER 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 I, WIS LAYING B. CARMON PART I I, WIS LAYING B. CARMON PART II (Please Indicate relationship to the deceased by placing an "X" in the proper box.) PART I I, WIS LAYING B. CARMON PART II (Please Indicate relationship to the deceased by placing an "X" in the proper box.) PART II I, WIS LAYING B. CARMON PART II (Please Indicate relationship to the deceased by placing an "X" in the proper box.) PART II I, WIS LAYING B. CARMON PART II (Please Indicate relationship to the deceased by placing an "X" in the proper box.) PART II I, WIS LAYING B. CARMON PART II (Please Indicate relationship to the deceased by placing an "X" in the proper box.) PART II I, WIS LAYING B. CARMON PART II (Please Indicate relationship to the deceased by placing an "X" in the proper box.) PART II I, WIS LAYING B. CARMON PART II (Please Indicate relationship to the deceased by placing an "X" in the box opposite the option you have selected.) PART II I, WIS LAYING B. CARMON PART IN 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.) PART II (Please Indicate II your own religious services at a location of the The The Selected Indicate In Your own religious			201				
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 self-addressed postage-from a very part of this form is filled out and properly signed by the next of kin, it should be returned to the self-addressed postage-from a very part of this form is filled out and properly signed by the next of kin, it should be returned to the self-addressed postage-from a very part of this form. PART I I, WIRS LAYING B. COMMON PART I I, WIRS LAYING B. COMMON WIDOW WIDOWER SON OVER 2! YEARS OLD DAUGHTER OVER 2! YEARS OLD FATHER MOTHER OF NEXT O	United States Military Constern			9 September 1947			
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,			Α		c		
Hilling 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, WARD 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 INTELLATING B. CARMON (Please Indicate relationship to the deceased by placing an "A" in the proper box.) WIDOW WIDOW SON OVER 2! YEARS OLD DAUGHTER OVER 2! YEARS OLD FATHER MOTHER BROTHER OVER 2! YEARS OLD SISTER OVER 2! 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) 3. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY DICATION OF CEMETERY (COCATION OF NATIONAL CEMETERY SELECTED) 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY UNCATED AT (COCATION OF NATIONAL CEMETERY SELECTED) 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY DICATION OF NATIONAL CEMETERY SELECTED) 14. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY DICATION OF NATIONAL CEMETERY SELECTED) 15. PRIVATE CEMETERY LOCATED AT (COCATION OF NATIONAL CEMETERY SELECTED) 16. PRIVATE CEMETERY THE PROPERTY OF THE FOLLOWING CHANGES: (If no corrections are necessary, Indicate that fact by Inserting the word	DO NOT WRITE ABOVE TH	IS LINE	В		Ď		
I, Mrs. Laying B. Carnon (Please Indicate relationship to the deceased by placing an (Please Indicate relationship to the deceased by placing an (Please Indicate relationship to the deceased by placing an (Please Indicate relationship to the deceased by placing an (Please Indicate relationship to the deceased by placing an (Please Indicate relationship to the deceased by placing an (Please Indicate relationship to the deceased by placing an Place of the Deceased Senior of the United States on 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 UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY (PROBLEM OF THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT (LOCATION OF CEMETERY) 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A 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.) 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.)	filling out this form. When the proper part of this OFFICE OF THE QUARTERMASTER GENERA self-addressed postage-free envelope provided for the support of the property of the pr	form is filled out and properly signe L, MEMORIAL DIVISION, WAR his purpose.	DEPA	the next of kin, it s RTMENT, WASHI	hould I NGTO	be returned to the N 25, D. C., in the	
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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' (FOREIGN COUNTRY) THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT (LOCATION OF NATIONAL 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) 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.)	I, Mrs. Mayme B. Cannon (PLEASE PRINT OR TYPE NAME)	L ay	ease in " in th	dicate relationship to e proper box.)	the dec	eased by placing an	
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this fact by inserting the word "NONE" in the space below.)		ERMENT IN A NATIONAL CEMETERY LO	CATED A	AT(LOCATION OF NAT			
None	THE NAME OF THE DECEASED, THE SERIAL NUMBER AND GRADE this fact by inserting the word "NONE" in the space below.)	212 200	WING C	HANGES: (If no correct	ions are	necessary, indicate	
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OQMG FORM 345 MILITARY

-16--50411-

PAGE 1

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FARI	(Continuea)

LAST NAME	FIRST NAME		MIDDLE INITIAL
LASI NAME	111011111111111111111111111111111111111	*	
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS		TELEPHONE NO.
I, AS THE NEXT OF KIN, DO FURTHER DECLARE THAT I DI	ESIRE THE REMAINS TO BE SENT	TO THE FOLLOWING FUNERAL	DIRECTOR WHO HAS AGREE
FULL NAME OF FUNERAL DIRECTOR	ж.		
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS	1	TELEPHONE No.
N CASE OF EMERGENCY THE NAME AND ADDRESS OF THE PROPORTION OF THE	RSON NEXT IN LINE OF KINSHIP	AFTER ME, AS SET FORTH IN TH	E PAMPHLET, "DISPOSITION (
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
RKS OR ADDITIONAL INSTRUCTIONS (For additional space	use page 4.*)		
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DITION OF THE SAID REMAINS.	8		
OSITION OF THE SAID REMAINS. e undersigned, DO SOLEMNLY SWEAR (OR AFF	8		
CPLAINED IN THE PAMPHLET, "DISPOSITION OF WORLD WAR DISTION OF THE SAID REMAINS. The undersigned, DO SOLEMNLY SWEAR (OR AFFOrest of my knowledge and belief. The control of the pamph of	8		g document are full and
OSITION OF THE SAID REMAINS. e undersigned, DO SOLEMNLY SWEAR (OR AFF	8	nade by me in the foregoin	ng document are full and the number)
e undersigned, DO SOLEMNLY SWEAR (OR AFF best of my knowledge and belief. SMULLE B. CALLERON (SIGNATURE OF MEXT OF KIN) S. Mayrie B. Cannon	TRM) that the statements m	(STREET AND Sylva, N. C.	NUMBER)
e undersigned, DO SOLEMNLY SWEAR (OR AFF best of my knowledge and belief. Surge B. Carrier (SIGNATURE OF NEXT OF KIN) S. Mayme B. Cannon (NAME PRINTED OR TYPED) Subscribed and duly sworn to before me according	TRM) that the statements n	(STREET AND Sylva, N. C.	ng document are full and the number) STATE)
e undersigned, DO SOLEMNLY SWEAR (OR AFF best of my knowledge and belief. Surge B. Carrier (SIGNATURE OF NEXT OF KIN) S. Mayme B. Cannon (NAME PRINTED OR TYPED) Subscribed and duly sworn to before me according	TRM) that the statements n	(STREET AND Sylva, N. C. (CITY AND	NUMBER) STATE) day of October
e undersigned, DO SOLEMNLY SWEAR (OR AFF best of my knowledge and belief. SWEAR (OR AFF best of my knowledge and belief. SWEAR (OR AFF best of my knowledge and belief. SWEAR (OR AFF best of my knowledge and belief. SWEAR (OR AFF best of my knowledge and belief. SWEAR (OR AFF best of my knowledge and belief. SWEAR (OR AFF best of my knowledge and belief. SWEAR (OR AFF best of my knowledge and belief. SWEAR (OR AFF best of my knowledge and belief. SWEAR (OR AFF best of my knowledge and belief. SWEAR (OR AFF best of my knowledge and belief. SWEAR (OR AFF best of my knowledge and belief. SWEAR (OR AFF best of my knowledge and belief. SWEAR (OR AFF best of my knowledge and belief. SWEAR (OR AFF best of my knowledge and belief.	to law by the above-named, county of	(STREET AND Sylva, N. C. (CITY AND	NUMBER) STATE) day of October , and State (or Terri

ARMY SERVICE FORCES ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

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INVENTORY OF EFFECTS

(See AR 600-550)

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	—Saber, insignia, decorations, med badges, watches, manuscripts, as valuable chiefly as keepsakes.	*PACKAGE
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D.	ALE C.	SHERWOOD , QMC
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Strike out words not applicable.

WAR DEPARTMENT FINANCE DEPARTMENT FORM No. 38 Approved Nov. 24, 1930

WAR DEPARTMENT FINANCE DEPARTMENT

RECEIPT FOR MISCELLANEOUS COLLECTIONS

s 11.14	APO 350, U. S. Army	The state of the s
* Received in cash of .* Collected on Vor. from	(Station) Dale C. Sherwood, 1st Lt. QM	(Date)
Four***	Dollars and Four	teen*** Cents,
on account of Herman F. Bailey	t, 34593480, PFC, Inf, 101st	A/B Div
KIAdate unknow		
APP. TF 218916		
which sum I have passed to the credit of t	the United States, and hold myself accountable	lark DEPUTY
*Strike out words not applicable. Sym #211901 AS	R. J. Ócilio, Oct P BR NO SOS 2-44/800M/22473	Finance Department.

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ARTH EFFECTS DUFEAU SUMMARY Court-Martial KANSAS CITY QUARTERMASTER DEPOT 601 Hardesty Avenue Kanses City 1, Missouri

Case	No.	(3)
		166898
D	ate _	HOC/AN/ps
	14	April 1946

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(Relationship or Capacity)

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Mrs. Mayme B. Cannon Box 71 Sylve, North Carolina

Dear Mrs. Cannon:

The Army Effects Bureau has received from oversees one insignia which belonged to your son, Private First Class Herman F. Bailey. This item is inclosed herewith.

Also, I am inclosing Bureau check for \$4.14 which represents funds belonging to your son.

In the event additional property is received in the future you will be notified promptly.

I wish to express my sympathy in the loss of your son/

Sincerely yours,

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

Incls--Check Insignia

pl



Mrs. Mayme B. Cannon Box 71 Sylva, North Carolina

Dear Mrs. Cammon:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the Late Private First Class Hermen F. Bailey, \$5.N. 34 593 480.

The records of this office disclose that his remains are interred in the U.S. Military Cemetery Blosville, plot E, row 2, grave 35. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located twenty-five miles southeast of Cherbourg, France, and is under the constant care and supervision of United States military personnel.

The War Department has now been enthorized 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 hext 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

Dr

293

Mrs. Mayme B. Carmon Box #71 Sylva, North Carolina

Dear Mrs. Cannon:

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 pemphlets, "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.

24 May 1949

Pfc Herman F. Bailey, ASN 34 593 480 Plot D, Row 19, Grave 5 Headstone: Cross St. Laurent (France) U. S. Military Cemetery

2011

Mrs. Mayme B. Cannon

Sylva, North Carolina

Dear Mrs. Cannon:

This is to inform you that the remains of your loved one have been permanently interred as recorded above, side by side with comrades who also gave their lives for their country. Customary military funeral services were conducted over the grave at the time of burial.

After the Department of the Army has completed all final interments, the cemetery will be transferred, as authorized by the Congress, to the care and supervision of the American Battle Monuments Commission. The Commission also will have the responsibility for permanent construction and bea tification of the cemetery, including erection of the permanent headstone. The headstone will be inscribed with the name exactly as recorded above, the rank or rating where appropriate, organization, State, and date of death. Any inquiries relative to the type of headstone or the spelling of the name to be inscribed thereon, should be addressed to the American Battle Monuments Commission, Washington 25, D. C. Your letter should include the full name, rank, serial number, grave location, and name of the cemetery.

While interments are in progress, the cemetery will not be open to visitors. You may rest assured that this final interment was conducted with fitting dignity and solemnity and that the grave-site will be carefully and conscientiously maintained in perpetuity by the United States Government.

Sincerely yours,

H, FELDMAN
Major General
The Quartermaster General

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