HKW/is

7 August 1944

SUBJECT: Identification of U. S. Army Personnel

- TO : Officer in charge, Graves Registration Section, U.S. Army.
- 1. We enclose eight (8) dog tags, a New Testament and miscellaneous papers and a cigarette lighter which have today been handed to us by a civilian.
- 2. The tags and papers, etc., were removed from the bodies of eight (8) American soldiers, seven (7) enlisted men and an officer from whose body the Testament an other papers were removed.
- 3. The civilian tells us that these soldiers were Parachutists who landed at Graignes, the bodies being removed by civilians from water close by the Church at that place on June 11, 1944. Shortly after the bodies had been removed the civilian population had to be evacuated, and have only just returned to find that the bodies had been removed

For the Commanding Officer;

HUGH K. WALKER, Capt. R. A. (Br.) Deputy, Legal & Fiscal

Incls;

lst Ind. PR/cas

Hq, 610th QM Gr. Reg. Co., APO 350, U. S. Army, 22 August 1944

To: Chief, Graves Registration Section, 56th QM Base Depot, APO 562.

Attention basic communication.

POOLE ROGERS Captain, QMC Commanding

HKW/is

7 August 1944

SUBJECT: Identification of U. S. Army Personnel.

TO : Officer in Charge, Graves Registration Section, U. S. Army.

- 1. We enclose eight (8) dog tags, a New Testament and miscellaneous papers and a cigarette lighter which have today been handed to us by a civilian.
- 2. The tags and papers, etc., were removed from the bodies of eight (8) American soldiers, seven (7) enlisted men and an officer from whose body the Testament and other papers were removed.
- 3. The civilian tells us that these soldiers were Parachutists who landed at Graignes, the bodies being removed by civilians from water close by the Church at that place on June 11, 1944. Shortly after the bodies had been removed the civilian population had to be evacuated, and have only just returned to find that the bodies had been removed.

For the Commanding Officer:

HUGH K. WALKER, Capt. R. A. (Br.)

Deputy, Legal & Fiscal.

Incls:

1st Ind.

PR/cas

Hq, 610th QM Gr. Reg. Co., APO 350, U. S. Army, 22 August 1944

TO: Chief, Graves Registration Section, 56th QM Base Depot, APO 562.

Attention basic communication.

Captain, QMC Commanding GRD-293. Ltr. 56th QMBD to GR & E Div. OCQM - Sub: Ident. of US Army Personnel Cont'd 25 October 1944.

- b. Unknown X-68: (Clothing mark T-5218) Identified as Travers.

  Thomas J., 12 065 218 by comparison with identification tag with clothing mark.
- e. Unknown X-69: (Body partially burned) After eliminating X-68 and X-67 the remaining unidentified were X-65 and X-69. Of the two remaining identification tags, Reaves and Rushing, the tag of Rushing showed definite evidence of having been burned where as no such evidence showed on the tag of Reaves by which evidence was used in identifying X-69 as Rushing, Jesse J., 6 969 574.
- d. Unknown X-67: (Clothing marks H-3888) Identified as <u>Humphries</u>. Shuford N., 34 123 888 by comparison with identification tag with clothing mark.
- 4. The identification tags have been withdrawn for proper disposition. The Testament and papers referred to in attached letter as being removed from the officer (Maxwell, Lowell C., 01 321 322) are forwarded herewith.

For the Commanding Officer:

MAURICE WHITNEY
Lt. Col., QMC

3 Incls.

Chief, Graves Registration Div.

- 1 Ltr. Det. C-2, Co. B, 1st ECA Regt.
- 2 Effects, (Maxwell, Lowell C.)
- 3 Corrected Burial Reports
  Reaves, Lacy H.
  Travers, Thomas J.
  Rushing, Jesse J.
  Humphries, Shuford N.

## HEADQUARTERS 56th QUARTERMASTER BASE DEPOT APO 562. U.S. ARMY

CAD-293. Reaves, Lacy

25 October 1944

SUBJECT: Identification of U.S. Army Personnel

: CG., Com Zone ETO, APO 887, U. S. Army

ATTN: Graves Registration & Effects Div., OCOM

THRU: Channels.

Attention is invited to attached letter, Det. C-2, Co. B. 1st ECA Regt., 7 August 1944, inclosing the following listed eight (8) identification tags removed from the remains of deceased at Graignes.

Allen, Mervin H.	18 081	002
Humphries, Shuford N.	34 123 1	
Maxwell, Lowell C.	01 321	322
Murray. Harry W.	20 454	264
Beaves, Lacy H.	34 306 5	32
Rushing, Jesse J.	6 969	74
Sass, Peter	13 125	064
Travers, Thomas J.	12 065 2	218

2. Information obtained from Burial Reports show that the remains of these eight (8) men were removed from coordinates 422:778 and reburial in Blosville Cemetery as indicated below:

PLOT	ROW	GRAVE	NAME		ASN	REMARKS
s	7	132	Murray, Harry W.	20	454 264	(Identified by Tay Book)
S	7	133		ed.	water soa	ked Pay Book buried with
-		AND THE PROPERTY OF THE PARTY OF THE	renains)			The State of the S
S	7	135	X-68			(Clothing mark T-5218)
S	7	137	Maxwell, Lowell C.	01	321 322	(Identified by one ident- ification tag)
g.	7	138	Allen, Marvin H.	18	081 002	(Identified by Pay Book)
~	-		And the second s		The state of the s	
S	7	139	Sass, Peter	13	125 064	(Identified by Pay Book)
S	7	140	x-69			(Body partially burned)
S	7	141	x-67	, A.	14 1 1 1 1 1 1 1	(Clothing mark H-3888)

3. In view of the evidence set forth abov : the four (4) original burials as Unknowns have been identified as indicated below and corrected Report of Burial (GRS Form No. 1) prepared and submitted herewith.

a. Unknown X-65: (Body decomposed, water soaked Pay Book buried with remains) Remains were disinterred 22 October 1944 and no record of Fay Book found. By process of elimination remains are identified as Reaves. Lacy H., 34 306 532.

QMC FORM REV 15 MAR 46 1194

ELL SENT O MAY 164

3.8.160

# RECORD OF CUSTODIAL TRANSFER

	1 0	HIPPED	
FROM	1. 3	TO	
USMC BLOSVILLE			5.7
KIND OF CONVEYANCE	***************************************	NAME OF CONVOYER POINT A, CHERBOURG	
TRUCK		PVT JAMES STRANGE	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF PECEIVER	DATE
und allow	1	E, N. Cumpo	4
W.T. DAILER, CAPT, OMC.	26 Jan	48 E.N. CIAMPO, 1st. LT. FA.	26 Jan
The DATE WATER WITH		HIPPED	
FROM		TO	
· CASKETING POINT A., CHERBO	OURG	CASKETING POINC B., ST. LAUR	ENT.
KIND OF CONVEYANCE		NAME OF CONVOYER	
TRUCK		Pfc Jack Fagan	
SIGNATURE OF SHIPPER	DATE .	SIGNATURE OF RECEIVER	DATE
SIGNATURE OF SHIPPER E. N. Crampo		prelikenzie	
E.N. CIAMPO, 1st. LT. FA.	22Mar	48 D.A. MACKENZIE, CAPT. INF.	22Mar48
	3. S	HIPPED	
FROM		TO	***************************************
KIND OF CONVEYANCE	15000	NAME OF CONVOYER 2 00	
		NAME OF CONVOYER 2	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
SIGNATURE OF STREET	I SAIL	77	1
			1
	4. S	HIPPED 5	
FROM			
		10 1518	
KIND OF CONVEYANCE		NAME OF CONVOYER	West Market Street
			• . •
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
	5. S	HIPPED	
FROM		TO	1:
KIND OF CONVEYANCE		NAME OF CONVOYER	
		FAYETTEVILLE, MORTH CAROLIA	V
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
ST. LAURENT, FRANCE		LOU M. REAVES (MOTHER) E.	,
	6. S	HIPPED	
FROM		TO	**
		1	ν
KIND OF CONVEYANCE		NAME OF CONVOYER	
			- (- - 3-
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
		1.0	10
	31	1.00	7
	7. SI	HIPPED	- 33460-30403-3-34003-
FROM		TO	75
ž. ,			
KIND OF CONVEYANCE		NAME OF CONVOYER	21 - 80 H
			¥
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
the second secon			
and the same of th	2004		

RRE Form #43 20 Sep 48

States Military Cemetery

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

make a	REAVES	LACY	H	PFC	34306532
•	(Last Name)	(First Name)	(Initial)	(Rank)	(ASN)
Su	bject remains hav	re been permanently	interred overs	eas in the	IInited

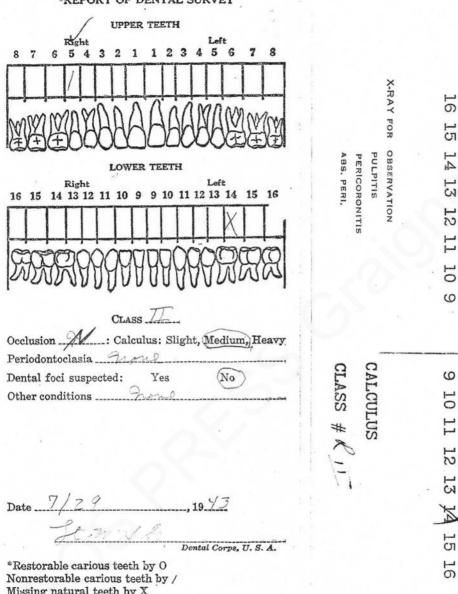
ST LAURENT

STATION FILE

Incl #

293 FILE DATA	ON REMAIN	IS NOT YET	RECOVERED OR ID	ENTIFIED
NAME (Last, First, Middle Initial)	*		GRADE	PRESENT SERIAL NUMBER
REAVES LATU A.			2-1	223 24.
ORGANIZATION	or story and a second contract of	RACE	CREED	FORMER SERIAL NUMBER (If applicable)
			The state of the s	NOWINER (1) applicable)
100000000000000000000000000000000000000		WHITE	17 Ta 17	NONE
DATE OF DEATH/MIA CAUSE OF DEATH			PLACE OF DEATH OR I	PLACE LAST SEEN IF MIA
DATE OF FOD		2	3-RATE VET	
HEIGHT WEIGHT	COLOR EY		COLOR HAIR	SHOE SIZE
67/2 139	BROIM	FN	BROWN	9 C
,	DENTA	L CHART	9 JUN	E 42
UPPER RIGHT		UPPER LEFT		1,630,000
8 7. 6 5 4 3 2 1			1 2 3 4 5	6 7 8
LOWER RIGHT		LOWER LEF	T	
16 15 14 13 12 11 10	9	9	10 11 12 13	15 16
X = Extracted	O = Carious		1=Ca	rious Non-Restorable
FRACTURES AND/OR BREAKS	The second	TATTOOS A	ND/OR BIRTHMARK	•
NONE			NONG	
ADDITIONAL INFORMATION	=0.			
ATTACHED 2 F	ORM	79		
	- 1	A		
		<i>.</i>		
	74			
	1	**-		
	*	- 12		
	1.1	44		

#### \*REPORT OF DENTAL SURVEY



Missing natural teeth by X

Teeth replaced by denture (horizontal line)



Teeth replaced by fixed bridge (oval to include abutments)



00

16-20622

## REGISTER OF DENTAL PATIENTS AT

AAB Alliance, Neb	raska	REGISTER	OF DELITE 211	VOD V
AAB, Alliance, Neb	NAME OF	CAMP	SHANKS, NEW	27
	ARTON )	DE	NTAL CLINIC NO. 3430 653	/
Reaves, Lacy H. 34306 (3) RANK   (4) COMPANY   (5) REGIMENT	OR STAFF CORPS		34306930	CHRISTIAN NAME
	th Freht	SURNAME		
(6) AGE, YEARS (7) RACE (8) NATIVITY	(9) SERVICE, YEARS	Blaves,	Jacy	#
22 W X 0	l yr	RANK CO.	REGINERT OR	STAFF CORFS
22   "   25 0	0	P. A Ma	0501	-EF
	5.0	AUE KACE	MAYOUTY	SERVICE
	(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.  Papi Alis R-5	an me	m10	14/12
	SEA	dd	Land Comment	La fe fell de
	in z m			
	OR INJ		The case of	Negative Statement of the Statement of t
				The state of the s
	CAT			The state of the s
	RY WITI			N. W.
	.   ? ±			C+3
	Fo le ti a			S. S
	(II) DATES ANI DXBIII Do Ames Sutures			
	DAT A			
	ATES AN			2
	to to No	And the same of th		-
	S OZ			Z vanous y
	PER	And the second		1 1 2 1 1
	DITO			120
	Lnf 7			1
	(II) DATES AND NATURE OF TREATMENTS TX AIII TO A HAS LUT 7/29/45 Buturos removed 0/5/			}
	MALY (SS)			
	4.3 (4.3			
	5 43 A			6,2
	ICA   I			16
	(12) RESULTS AND REMARKS C1 II LEG C1 IX-IV CII			TWEE
	RES	and the same of th		<b>E</b> > 1
		The state of the s		17 27
		operation of the contract of t		177
	TV ND	1		E
	N M	-		1 7
	MARKS CIU			1.3×
	CIT	District of the second		BIN
	1 2 -	the same of		128
19 Malter X	1. Myon	And the state of t		19.3
	tal Corps, U. S. A.			34
Form 79—Medical Department, (Revised Feb. 24, 1941)	U.S.A.	Control of the Contro		71. ×2
16-20622				1 2 1 17 1

DATA ON REMAINS	NOT YET RECOV	_ ED OR IDE	NTIFIED
NAME (Last, First, Middle Initial)	GRADE	1 8	PRESENT SERIAL NUMBER
REAVES, LACY H.	PP	-c	34 306532
REAVES, LACY H. ORGANIZATION PARA INF.	RACE CREED		FORMER SERIAL NUMBER (If applicable)
	VHITEPROT	ESTANT	ACE LAST SEEN IF MIA
DATE OF DEATH/MIA CAUSE OF DEATH  DATE OF FOD			
HEIGHT WEIGHT COLOR EYES	COLOR H	II GNES	FRANCE SHOE SIZE
672 139 BROW	A COMPANIES CARACTER STR	own	The state of the s
DENTAL		9 JUN	1E 42
UPPER RIGHT	UPPER LEFT		
8 7 6 \$ 4 3 2 1 PHOTOSTATS	ATTACHE	3 4 5	5 7 8
LOWER RIGHT	LOWER LEFT	10 10	15 16
16 15 14 13 12 11 10 9	9 10 11	12 13	15 16
X=Extracted 0=Caricus			s Non-Restorable
FRACTURES AND/OR BREAKS	TATTOOS AND/OR BIR	THMARK	
NONE ADDITIONAL INFORMATION 12 FEB. 21	NON	E	
ADDITIONAL INFORMATION 12 FEB. 21			
			3.4
			*
		/	
			NAT
			2 ill
			2 1913 40 /
	4	,	a year
	S	e of	
			x lend on.
			tu. N

## DISINTERMENT DIRECTIVE SUBJECTION RECORDS SECTION NEMORIAL DIVIJION

SUBJECT: Remains to be interred in a Permanent Overseas Cemetery, instructions from the Next of Kin.  The Remains of Reaves, Lacy H., Pro (Rank)  34 306 532, buried in Blosville, France (Rank)  7, 135, are to be interred in a Permanent Mili (Row) (Grave No.)  Cemetery Overseas; per authority:  Remains to be left overseas in St. Laurent-Sur-Mer, France. See Page 1  Form 345 for signature of Mrs. Lou M. Reaves, Mother, Route #6, Fayette North Carolina.  FEB I 8 1948  Poole Rogers, CAPTAIN, QMC	Blosville, France, S,7, ASN 34 306 532	133		30 October 1947 (Date)	7
instructions from the Next of Kin.  The Remains of Reaves, Lacy H. Pro (Rank)  34 306 532 , buried in Blosville, France (ASN) , are to be interred in a Permanent Mili (Row) (Grave No.)  The Remains of Reaves, Lacy H. Pro (Rank)  7 , 133 , are to be interred in a Permanent Mili (Row) (Grave No.)  The Remains to be left overseas in St. Laurent-Sur-Mer, France. See Page 1  Form 345 for signature of Mrs. Lou M. Reaves, Mother, Route #6, Fayette North Carolina.  The Remains of Reaves, Lacy H. Pro (Rank)  The Remains of Reaves, Isou H. Reaves, Mother Reaves are properties.  The Remains of Reaves, Lacy H. Pro (Rank)  The Remains of Reaves, Isou H. Reaves are properties.  The Remains of Reaves, Lacy H. Pro (Rank)  The Remains of Reaves, Lacy H. Pro (Rank	AON 74 700 772			(Date)	
(Name) (Rank)  34 306 532 , buried in Blosville, France , S (Cemetery) (Plot)  7				verseas Cemeter	ry,
(Name) (Rank)  34 306 532 , buried in Blosville, France , S (Cemetery) (Plot)  7	The Remai	ns of Reaves.	Lacy H.	,Pro	
(ASN)  (Cemetery)  (Plot)  7  (Row)  (Grave No.)  Cemetery Overseas; per authority:  Remains to be left overseas in St. Laurent-Sur-Mer, France. See Page 1  Form 345 for signature of Mrs. Lou M. Reaves, Mother, Route #6, Fayette  North Carolina.  (FEB I 8 1948  Poole Rogers  POOLE ROGERS,  CAPTAIN, QMC	*	(Name	e)	(Rar	nk)
Remains to be left overseas in St. Laurent-Sur-Mer, France. See Page 1  Form 345 for signature of Mrs. Lou M. Reaves, Mother, Route #6, Fayetts  North Carolina.  FEB I 8 1948  Poole Rogers  POOLE ROGERS,  CAPTAIN, QMC	34 306 532 , buried in	Blosville, Fran (Cemetery)	ce )	,	)
Remains to be left overseas in St. Laurent-Sur-Mer, France. See Page 1  Form 345 for signature of Mrs. Lou M. Reaves, Mother, Route #6, Fayetts  North Carolina.  FEB I 8 1948  Poole Rogers  POOLE ROGERS,  CAPTAIN, QMC	7 , 133	. are to h	e interred in	n a Permanent 1	ſili
Remains to be left overseas in St. Laurent-Sur-Mer, France. See Page 1  Form 345 for signature of Mrs. Lou M. Reaves, Mother, Route #6, Fayette North Carolina.  ### Laurent 1  **Property of the Pages Property of the Proper	(Row) (Grave No	).)			
Form 345 for signature of Mrs. Lou M. Reaves, Mother, Route #6, Fayette North Carolina.  ### Louist Louist  FEB I 8 1948  Poole Rogers  POOLE ROGERS,  CAPTAIN, QMC	Jemetery Overseas; per aut	hority:			
Form 345 for signature of Mrs. Lou M. Reaves, Mother, Route #6, Fayette North Carolina.  ### Louist Louist  FEB I 8 1948  Poole Rogers  POOLE ROGERS,  CAPTAIN, QMC	Remains to be left overse	eas in St. Laure	nt-Sur-Mer. F	rance. See Pa	ge 1
North Carolina.  It Lowert Land  FEB I 8 1948  Poole Rogers  POOLE ROGERS,  CAPTAIN, QMC					
FEB I 8 1948  Poole Rogers  POOLE ROGERS,  CAPTAIN, QMC	Form 345 for signature of	Mrs. Lou M. Res	aves, Mother,	Route #6, Fay	ette
FEB I 8 1948  Poole Rogers  POOLE ROGERS,  CAPTAIN, QMC	N				
FEB I 8 1948  Poole Rogers  POOLE ROGERS,  CAPTAIN, QMC	North Carolina.				
POOLE ROGERS,  CAPTAIN, QMC	North Carolina.		14 4		,
POOLE ROGERS,  CAPTAIN, QMC	North Carolina.		It Z	owent to	da
POOLE ROGERS,  CAPTAIN, QMC	North Carolina.		St Z	owent, t	da
POOLE ROGERS,  CAPTAIN, QMC	North Carolina.		it I	arrivet to	der.
POOLE ROGERS,  CAPTAIN, QMC	North Carolina.		St. Z	owert to	, de
POOLE ROGERS,  CAPTAIN, QMC	North Carolina.		st I	ament, E	, da
POOLE ROGERS,  CAPTAIN, QMC	North Carolina.		St. Z	owert to	, d.s.
POOLE ROGERS,  CAPTAIN, QMC	North Carolina.		jt I	auent, Z	, d.a
POOLE ROGERS,  CAPTAIN, QMC	North Carolina.		St. I	awent to	<i>d</i>
POOLE ROGERS,  CAPTAIN, QMC	North Carolina.		1t I	owert to	, d.,
POOLE ROGERS,  CAPTAIN, QMC	North Carolina.		jt I	ament, Z	, d.,
POOLE ROGERS,  CAPTAIN, QMC					, d.,
		EB I 8 1948			da
		EB I 8 1948	Poole	Rogers	da
d. R. Jones		EB I 8 1948	Poole R	Rogers OGERS,	da
		EB I 8 1948	Poole R	Rogers OGERS,	da
	11.15 per 5		Poole R	Rogers OGERS,	, d.,

PART I FOURTH THE QUARTER THAN BOYE THIS LINE  DO NOT WRITE ABOVE THIS LINE  I, WRITE ABOVE THE QUARTER THIS WASHINGTON TO THE ABOVE THIS WRITE ABOVE THIS WRITE ABOVE THIS WRITE ABOVE THIS WRITE ABOVE THE ABOVE THE ABOVE INSTITUTE WASHINGTON TO THE WRITE ABOVE THE A	COLUMN A		PLACE OF BURIAL	UF REMAINS	BUDGET	
DO NOT WRITE ABOVE THIS LINE    DO NOT WRITE ABOVE THIS LINE	4/2	State of the state				lo. 49-R
DO NOT WRITE ABOVE THIS LINE    The next of kin should familiarize himself with the contents of the pamphlet, "Disposition of World War II Armed Forces, the pamphlet of the form, when the proper part of this form is filled out and properly used by the next of kin, it should be returned for the pamphlet of the pamphlet, "Disposition of World War II Armed Forces, the pamphlet of th						
DO NOT WRITE ABOVE THIS LINE    A   B	United States	Military Cometer	20			
DO NOT WRITE ABOVE THIS LINE    DO NOT WRITE ABOVE THIS LINE   B	Blosville, Fre	700	10	12.		
DO NOT WRITE ABOVE THIS LINE    DO NOT WRITE ABOVE THIS LINE   B					leptember 1047	
DU NOT WRITE ABOVE THIS LINE   The next of kin should familiarize himself with the contents of the pamphiet. "Disposition of World War II Armed Force. 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 reformed to the proper part of this form. When the proper part of this form is filled out and properly signed by the next of kin it should be reformed to the proper part of this form. When the proper part of this form. When the proper part of 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 P. of this form.    PART						
Siling out this form. When the proper part of this form is filled out and properly signed by the lext of the CFTCE OF THE QUARTERMASTER GENERAL, MEMORIAL DIVISION, WAR DEPARTMENT, WASHINGTON 25, D. C., 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 P. of this form.  PART I  I, WARD DEPARTMENT, WASHINGTON 25, D. C., 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 P. of this form.  PART I  I, WARD DEPARTMENT, WASHINGTON 25, D. C., self-addressed by place "X" in the proper box.)  WIDOW WIDOWER SON OVER 21 YEARS OLD DAUGHTER OVER 21 YEARS OLD AUGHTER OVER 21 YEARS OLD AUGHTER OVER 21 YEARS OLD SISTER OVER 21 YEARS OLD SISTER OVER 21 YEARS OLD SISTER OVER 21 YEARS OLD AUGHTER OVER 21 YEARS OLD SISTER OVER 21 YEARS OLD SISTER OVER 21 YEARS OLD AUGHTER OVER 21 YEARS OLD SISTER OVER 21 YEARS OLD AUGHTER OVER 21 YEARS OLD SISTER OVER 21 YEARS OLD AUGHTER OVER 21 YEARS OLD AUGHTER OVER 21 YEARS OLD AUGHTER OVER 21 YEARS OLD SISTER OVER 21 YEARS OLD AUGHTER OVER 21 YEARS OLD AU		DO NOT WRITE ABOVE	THIS LINE	В		
PART I  I, MALE PRINT OR TYPE NAME OF NEXT OF KIN)  WIDOW   WIDOWER   SON OVER 2! YEARS OLD   DAUGHTER 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 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 sell selected in a Permanent american military cemetery overseas.  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 OVERSEAS.  1. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY OVERSEAS.  1. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY SELECTED)  1. A. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY SELECTED (COCATION OF INTERMENT BY NEXT OF KIN THE PROPER BY THE PROPER BOY. THE PROPER BY THE PROPER BOY. THE PROPER BY THE PROPER BOY. THE PROPER	filling out this form. OFFICE OF THE (	When the proper part of QUARTERMASTER GEN	this form is filled out and prop IERAL, MEMORIAL DIVISION for this purpose.	erly signed by the	MENT, WASHINGTON 25, D.	
I, WIDOW   WIDOWER   SON OVER 21 YEARS OLD   DAUGHTER OVER 21 YEARS OLD   SISTER OVER 21 YEARS OLD   S		of kin or authorized repres	entative of next of Kin and desir	e to direct the disp	osition of the remains, please in h	II FAI
WIDOW   WIDOWER   SON OVER 21 YEARS OLD   DAUGHTER OVER 21 YEARS OLD    FATHER   MOTHER   BROTHER OVER 21 YEARS OLD   SISTER 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 DECEMBER ABOVE, NOW DO DECLARE THAT IT IS MY DESIRE THAT THE REMAINS: (Please place an "X" in the box opposite the option you have set    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   (FOREIGN COUNTRY)   THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN PRIVATE CEMETERY LOCATED AT (LOCATION OF RATIONAL CEMETERY SELECTED)  4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL 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)    4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY are desired by placing an "X" in the proper be less indicate if your own religious services at a location other than the selected national cemetery are desired by placing an "X" in the proper be less indicate if your own religious services at a location other than the selected national cemetery are desired by placing an "X" in the proper be less indicate if your own religious services at a location of the Than the selected national cemetery are desired by placing an "X" in the proper be less indicate if your own religious services at a location of the Than the selected part of the proper be less indicate if your own religious services at a location of the Than the selected part of the proper be less indicate if your own religious services at a location of the Than the selected par	- Dallos and a state of the sta		PART I	7	6	
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 DEC 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 set  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 CEM  (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  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 RATIONAL CEMETERY SELECT  (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 be yES  NO  BE NAME OF THE DECEASED, THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (If no corrections are necessary, to is fact by inserting the word "NONE" in the space below.)	i, mie	(PLEASE PRINT OR TYPE	NAME OF NEXT OF KIN)	(Please indic	cate relationship to the deceased by proper box.)	placing
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 DEC 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 set  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	WIDOW	WIDOWER	SON OVER 21 YEARS O	DLD	DAUGHTER OVER 21 YEARS OF	LD
HAVING FAMILIARIZED MYSELF WITH THE OPTIONS WHICH HAVE BEEN MADE AVAILABLE TO ME WITH RESPECT TO THE FINAL RESTING PLACE OF THE DEC 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 self.  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	FATHER	MOTHER	BROTHER OVER 21 Y	EARS OLD	SISTER OVER 21 YEARS OLD	
HAVING FAMILIARIZED MYSELF WITH THE OPTIONS WHICH HAVE BEEN MADE AVAILABLE TO ME WITH RESPECT TO THE FINAL RESTING PLACE OF THE DEC 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 self.  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	1			C*		
3. BE RETURNED TO, THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN PRIVATE CEMETERY LOCATED AT	1. BE INTERRED IN A PE	ERMANENT AMERICAN MILITAR	Y CEMETERY OVERSEAS.			
(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 SELECT (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 be YES NO  HE NAME OF THE DECEASED, THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (If no corrections are necessary, in this fact by inserting the word "NONE" in the space below.)	2. BE RETURNED TO	THE UNITED STATES OR ANY	POSSESSION OR TERRITORY THE	REOF FOR INTERME	NT BY NEXT OF KIN IN A PRIVATE	CEMET
4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT	2. BE RETURNED TO	THE UNITED STATES OR ANY			NT BY NEXT OF KIN IN A PRIVATE	CEMET
4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT (LOCATION OF NATIONAL CEMETERY SELECT (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 be no less an interpretation of the proper be no less and not of the Deceased, the serial number and grade are correct except for the following changes: (If no corrections are necessary, in this fact by inserting the word "NONE" in the space below.)	-		(NAME AND LOCATION OF CE	METERY)		
(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 by YES NO  IE NAME OF THE DECEASED, THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (If no corrections are necessary, in its fact by inserting the word "NONE" in the space below.)	3. BE RETURNED TO	(FOREIGN COUNTRY)	(NAME AND LOCATION OF CE	METERY) ECEASED OR NEXT	OF KIN, FOR INTERMENT BY NEXT O	
YES NO  HE NAME OF THE DECEASED, THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (If no corrections are necessary, in this fact by inserting the word "NONE" in the space below.)	3. BE RETURNED TO _	(FOREIGN COUNTRY)  OCATED AT	(NAME AND LOCATION OF CE	METERY) ECEASED OR NEXT N OF CEMETERY SELECT	OF KIN, FOR INTERMENT BY NEXT O	
HE NAME OF THE DECEASED, THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (If no corrections are necessary, in this fact by inserting the word "NONE" in the space below.)	3. BE RETURNED TO PRIVATE CEMETERY LO	(FOREIGN COUNTRY)  OCATED AT  THE UNITED STATES FOR FIN.	(NAME AND LOCATION OF CEI , THE HOMELAND OF THE D (LOCATIO	METERY) ECEASED OR NEXT N OF CEMETERY SELECT	OF KIN, FOR INTERMENT BY NEXT OF	F KIN
none	3. BE RETURNED TO PRIVATE CEMETERY LO	(FOREIGN COUNTRY)  OCATED AT  THE UNITED STATES FOR FIN.	(NAME AND LOCATION OF CEI , THE HOMELAND OF THE D  (LOCATION  AL INTERMENT IN A NATIONAL CEI  cocation other than the selected nat	METERY) ECEASED OR NEXT N OF CEMETERY SELECT METERY LOCATED A	OF KIN, FOR INTERMENT BY NEXT OF	F KIN
Aversead form occupted "1/2 Levino"  Party 1947	3. BE RETURNED TO	(FOREIGN COUNTRY)  OCATED AT  THE UNITED STATES FOR FIN.  Town religious services at a location of the country of the cou	(NAME AND LOCATION OF CELL  THE HOMELAND OF THE D  (LOCATION  AL INTERMENT IN A NATIONAL CELL  Cocation other than the selected nat  YES  GRADE ARE CORRECT EXCEPT FOR	METERY) ECEASED OR NEXT N OF CEMETERY SELECT METERY LOCATED A Sonal cemetery are d NO	OF KIN, FOR INTERMENT BY NEXT OF SECOND CONTROL OF SECOND CONTROL CEMETERY SECOND CONTROL CONTROL CEMETERY SECOND CONTROL CEMETERY SECOND CONTROL CEMETERY SECOND CONTROL CONT	F KIN
Wereau form occupted "1/12 Levino"  18 Nov 1947  18 Person	3. BE RETURNED TO	(FOREIGN COUNTRY)  OCATED AT  THE UNITED STATES FOR FIN.  Town religious services at a location of the country of the cou	(NAME AND LOCATION OF CELL  THE HOMELAND OF THE D  (LOCATION  AL INTERMENT IN A NATIONAL CELL  Cocation other than the selected nat  YES  GRADE ARE CORRECT EXCEPT FOR	METERY) ECEASED OR NEXT N OF CEMETERY SELECT METERY LOCATED A Sonal cemetery are d NO	OF KIN, FOR INTERMENT BY NEXT OF SECOND CONTROL OF SECOND CONTROL CEMETERY SECOND CONTROL CONTROL CEMETERY SECOND CONTROL CEMETERY SECOND CONTROL CEMETERY SECOND CONTROL CONT	F KIN
1/12 Levino	3. BE RETURNED TO	(FOREIGN COUNTRY)  OCATED AT  THE UNITED STATES FOR FIN.  Town religious services at a love of the serial number and the space be	(NAME AND LOCATION OF CELL  THE HOMELAND OF THE D  (LOCATION  AL INTERMENT IN A NATIONAL CELL  Cocation other than the selected nate  YES  GRADE ARE CORRECT EXCEPT FOR low.)	METERY) ECEASED OR NEXT N OF CEMETERY SELECT METERY LOCATED A Sonal cemetery are d NO	OF KIN, FOR INTERMENT BY NEXT OF SECOND CONTROL OF SECOND CONTROL CEMETERY SECOND CONTROL CONTROL CEMETERY SECOND CONTROL CEMETERY SECOND CONTROL CEMETERY SECOND CONTROL CONT	F KIN
PROVIDE NOVIGIAL	3. BE RETURNED TO	(FOREIGN COUNTRY)  OCATED AT  THE UNITED STATES FOR FIN.  Town religious services at a love of the serial number and the space be	(NAME AND LOCATION OF CELL  THE HOMELAND OF THE D  (LOCATION  AL INTERMENT IN A NATIONAL CELL  Cocation other than the selected nate  YES  GRADE ARE CORRECT EXCEPT FOR low.)	METERY) ECEASED OR NEXT N OF CEMETERY SELECT METERY LOCATED A Sonal cemetery are d NO	OF KIN, FOR INTERMENT BY NEXT OF SECOND CONTROL OF SECOND CONTROL CEMETERY SECOND CONTROL CONTROL CEMETERY SECOND CONTROL CEMETERY SECOND CONTROL CEMETERY SECOND CONTROL CONT	F KIN
Nicotal	3. BE RETURNED TO	(FOREIGN COUNTRY)  OCATED AT  THE UNITED STATES FOR FIN.  Town religious services at a love of the serial number and the space be	(NAME AND LOCATION OF CELL  THE HOMELAND OF THE D  (LOCATION  AL INTERMENT IN A NATIONAL CELL  Cocation other than the selected nate  YES  GRADE ARE CORRECT EXCEPT FOR low.)	METERY) ECEASED OR NEXT N OF CEMETERY SELECT METERY LOCATED A Sonal cemetery are d NO	OF KIN, FOR INTERMENT BY NEXT OF SECOND CONTROL OF SECOND CONTROL CEMETERY SECOND CONTROL CONTROL CEMETERY SECOND CONTROL CEMETERY SECOND CONTROL CEMETERY SECOND CONTROL CONT	F KIN
16-50411-1	3. BE RETURNED TO	(FOREIGN COUNTRY)  OCATED AT  THE UNITED STATES FOR FIN.  Town religious services at a love of the serial number and the space be	(NAME AND LOCATION OF CELL  THE HOMELAND OF THE D  (LOCATION  AL INTERMENT IN A NATIONAL CELL  Cocation other than the selected nate  YES  GRADE ARE CORRECT EXCEPT FOR low.)	METERY) ECEASED OR NEXT N OF CEMETERY SELECT METERY LOCATED A Sonal cemetery are d NO	OF KIN, FOR INTERMENT BY NEXT OF SECOND CONTROL OF SECOND CONTROL CEMETERY SECOND CONTROL CONTROL CEMETERY SECOND CONTROL CEMETERY SECOND CONTROL CEMETERY SECOND CONTROL CONT	F KIN

## WAR DEPARTMENT

## THE ADJUTANT GENERAL'S OFFICE

WASHINGTON 28, D. C.

Mr Mi	SS KEY Reaves,	es, mother, sister, sa		WAS DE	CEASED STATUS		ORIZED	IN FLYING		THER PAY	STATU
enefici. Mr	s. Lou M. Reav	es, mother,		evoc							
Mr	s. Lou M. Reav	es, mother,			8				7 m		
ENEFICI			0.000 0.0	a about				er di			
	s. Lou M. Reave	as, mother,	Rt #0 1	ayette	8VIII89	N. C.		19			- E
	icy addressee (name, re					N C	. , _			4-9	. 4
	ropean Area						7 0444	The second second		L	
							9 Jun 4		YEARS	MONTHS	DAY
	OF DECKASED	**********					DATE OF ENT	RY ON TIVE SERVICE		STH OF SI	
Eu	ropean Area				Killed	in ac	tion		11.	Jun 4	4
LACE OF	DEATH			CAUS	E OF DEATH				4.	78.7	
Fa	yetteville, N.	C					Infantr	У.		DEATH	, 21
IOME ADI	DRESS						* 1	I		12 Fel	27
Re	aves, Lacy H.		-		11		RM OR SERV		DATEO	PRINTH	
0267.15			7	* 1			34 306	532	PF	3	101 2 8
	AR ,		NAME OF TAXABLE			1	RMY SERIAL	NUMBER	GRADE		
ULL NAM	a / Leur of	mund	/ V					trs	4632		

#### ADDITIONAL DATA AND/OR STATEMENT

ON PARACHUTE PAY

The individual named in this report of death is held by the War Dept to have been in a missing in action status on 6 Jun 44 until such absence was terminated om 3 Dec 44, when evidence considered sufficient to establish the fact of death waxweeless on 11 Jun 44, was received by the Secretary of War from a commander in the European Area.

COPIES FURNISHED:

S. G. O. F. B. 1. F. O., U. S. A.

2. O. Q. M. G. O. F. D. CASUALTY BRANCH FILE

G. A. O. VET. ADMIN. A. G. 201 FILE

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

#### WAR DEPARTMENT

164,378

## THE ADJUTANT GENERAL'S OFFICE

WASHINGTON 25, D. C.

#### REPORT OF DEATH

Miss Kay Res		OWN MISCONDUCT	WAS DECEASED ON DUTY STATUS	AUTHORIZED ABSENCE	IN PLYING P	7.	THER PAY	
Mrs. Lou M.		er, same as abo	ove .				41.	1
		ther, same as				*		
Mrs. Lou M.		ther, Rt #6 Fa	ayetteville, N	. C.				
European Arg	12			9 Jun 4	,2	YEARS	MONTHS	DAYE
TATION OF DECRASED		0	1.	DATE OF ENT	TIVE SERVICE		GTH OF SE	
European Are	ıa.		Killed i	n action		11.	Jun 44	
LACE OF DEATH			CAUSE OF DEATH			DATE O	PDEATH	A
Fayetteville	, N. C.	12		Infant	'Y		12 F <b>e</b> b	21
OME ADDRESS	and the same of th			ARM OR SERV	ICE	DATEO	F DIRTH	
Reaves, Lacy	н.		(C)	34 306	532	PF	C.	
				ARMY SERIAL	NUMBER	GRADE		
ULL NAME						1.632		

ADDITIONAL DATA AND/OR STATEMENT

ON PARACHUTE PAY

The individual named in this report of death is held by the War Dept to have been in a missing in action status on 6 Jun 44 until such absence was terminated om 3 Dec 44, when evidence considered sufficient to establish the fact of death waxxxxxxxxxx on 11 Jun 44, was received by the Secretary of War from a commander in the European Area.

COPIES FURNISHED:

S. G. O. F. B. I. F. O., U. S. A.
2. O. Q. M. G. O. F. D. CASUALTY BRANCH FILE
G. A. O. VET. ADMIN. A. G. 201 FILE

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

STATE SECRETARY OF WAR

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

16437

HARRIST.

## -BATTLE CASUALTY REPORT

A STEEL THE PARTY.

				THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.					SERVICE	THEATRE
REAVES I	14 C 3"	$\mathcal{H}$				306	532	PFC	INF	ETO
PLACE OF	CASU	4 L T Y		DAT	E OF CASU	ALTY YEAR	FLYING OR	TYPE OF	SHIPM	ENT NUMBER
FRANC	<b>Y</b> + <del>T</del>		x.							
7 1) A 1 (				06	JUN	144	J	MIA		141
		NAM	TE AND	ADDRE	SS OF E	MERGEN	CY ADDR	RESSEE		
HE INDIVIDUAL NAMED A RAPHIC AND LETTER NOT ERSON IS NOT NECESSAR										
RMRSMISSFIRST NA	ME-MIDDLE	INITIAL-	LAST NAM	VE	TATEL TO		ATIONSHIP	- GRAIGHT	DATE NOT	
MES LOU		M	RE	AVES -			MO	THER	2	AUG 44
AND NAME OF STREE	T-CITY-ST	ATE								
BOUTH NUMBE	R SIX	FATET	TEVIL	LE			NO	RTH CAROL	INA	EN
EMARKS:					· · · · · · · · · · · · · · · · · · ·					
									1	Tic 11 1
			4		*					Ter.
								*		Teby.
SUALTY BRANCH FILE A	TTACHED		R CHARG	ED TO				*	3 201 REQ	Jeir'
UALTY BRANCH FILE A	NO		R CHARG	ED TO	AS INDICAT		);		DATE	
UALTY BRANCH FILE A	NO		R CHARG	ED TO	AS INDICAT				DATE	. A. NOTIFIED
UALTY BRANCH FILE A	NO		R CHARG	ED TO	AS INDICAT		);		DATE	
VIOUSLY REPORTED FILE NO. WARDED	NO		R CHARG	ED TO	AS INDICAT		);		DATE	
VARDED SPEC. 1	NO MESS	AGE NO.	R CHARG	TYPE	AS INDICAT	ED BELOW	);		DATE	
VARDED SPEC.	NO MESS	AGE NO.	R CHARG	TYPE	AS INDICAT	ED BELOW	DATE AND	AREA	E M. & M.	. A. NOTIFIED
WARDED SPEC.	NO MESS  DEN. TELE NO FORM 43	GRAM NO CA	WOUNDED AS. BR. FI	TYPE  LETTE  CHI  USE OF	AS INDICAT	ED BELOW	DATE AND	AREA  CERTIF.	M. & M.	. A. NOTIFIED
FILE NO.  WARDED  ORT NOT VERIFIED  CT.   CASUALTY   OF	NO MESS  DEN. TELE NO FORM 43  THEIGINAL CAS.	GRAM NO CA	WOUNDED	TYPE  LETTE  CHI  USE OF	AS INDICAT	ED BELOW	DATE AND	CERTIF.	M. & M.	. A. NOTIFIED
SUALTY BRANCH FILE ASSISTANCE OF THE NO.  WARDED SPEC. I ORT NOT VERIFIED  CT. CASUALTY OF	NO MESS  DEN. TELE NO FORM 43  THEIGINAL CAS.	AGE NO.	WOUNDED AS. BR. FI DE FOR MESSAGE	TYPE  LETTE  CH  USE OF  LATES	AS INDICAT	ED BELOW	DATE AND	CERTIF.  REVIEWED  ANCH, A.G. RESIDENCE	M. & M.	NON-DEL.
CT. CASUALTY OF	NO MESS  DEN. TELE NO FORM 43  THRIGINAL CAS. DAY MO.	AGE NO.  GRAM  NO GA  IIS SPAC  DATE  YR.	WOUNDED AS. BR. PI CE FOR MESSAGE NO.	TYPE  LETTE CHI USE OF LATEST	ER COI ECKED BY F MACH! T CAS. DAT	RRES.	DATE AND  S. R. & D.  ORDS BR  CE CREW POS. ST	AREA  CENTIF.  REVIEWEL  ANCH, A.G.  RESIDENCE  TATE COU	M. & M.  D BY  O.  NTY CONF	NON-DEL.
VIOUSLY REPORTED  FILE NO.  WARDED  ORT NOT VERIFIED  CT.   CASUALTY   OF	NO MESS  DEN. TELE NO FORM 43  THRIGINAL CAS. DAY MO.	AGE NO.	WOUNDED AS. BR. FI DE FOR MESSAGE	TYPE  LETTE CHI USE OF LATEST	ER COI ECKED BY F MACH! T CAS. DAT	ED BELOW	DATE AND  S. R. & D.  ORDS BR  CE CREW POS. ST	AREA  CENTIF.  REVIEWEE  ANCH, A.G.  RESIDENCE  TATE COU	M. & M.  D BY  O.  NTY CONF	NON-DEL.
SUALTY BRANCH FILE A EVIOUSLY REPORTED  FILE NO.  PWARDED TO PSPEC. I SPEC. I	NO MESS  DEN. TELE  NO FORM 43  THE RIGINAL CAS.  DAY MO.  9 40 41	AGE NO.  GRAM Y  NO GA  HIS SPAC  DATE M  YR.  DIST  PERTAI	WOUNDED AS. BR. FI CE FOR MESSAGE NO. 1 44 45	TYPE  LETTE CHI USE OF LATEST DAY  1 46 4	ER COI ECKED BY F MACH! T CAS. DAT MO. YI	NE RECO	DATE AND  S. R. & D.  ORDS BR  E CREW POS. ST	AREA  CENTIF.  REVIEWEL  ANCH, A.G.  RESIDENCE  PATE COUNTY  54 55 50	M. & M. D BY O. TYP COMP	NON-DEL.
PWARDED  TO → SPEC. 1  PORT NOT VERIFIED  CCT. CASUALTY OF REA STATUS	MESS  DEN. TELE NO FORM 43  THEIGINAL CAS. DAY MO. 9 40 41  SUALTIES D: SEE CA	AGE NO.  AGE	WOUNDED AS. BR. FI DE FOR MESSAGE NO. 1 44 45 TRIBUT INING T Y BRAN TRIBUT	LETTE CHILLE CHI	ER CONTROL OF MACHINE TO CAS. DATE OF MACHINE TO CAS.	NE RECENTED TO SERVICE OF THE PROPERTY OF THE	DATE AND  S. R. & D.  ORDS BR  CREW POS. ST  1 52 53  COPIES EL. EXCE 48, 1944.  COPIES	CERTIF.  REVIEWER ANCH, A.G. RESIDENCE PATE COUN	M. & M. D BY O. NYY COMP	NON-DEL.

W.D., A.G.O. FORM NO. 0355

## RESTRICTED

201 - Reaves, Lacy H. (Enl.) lst Ind.

ENL/w in

HEADQUARTERS 82D AIRBORNE DIVISION, AFO 469, U. S. Army, 21 August 1944.

TO: Effects Quartermaster, ETOUSA, APO 871, U. S. Army.

Ane K(SX)



#### 507TH PARACHUTE IMFAHTRY APO 230, U.S. ARMY

-		200	10/1/1	
Two-	44.1	· ·	TD:44	

SUBJECT: Transmittel of Inventory of Personal Effects.

TO : Effects Quartermaster, ETCUSA, Depat G-14, APO 507 U.S. Arry.

Transmitted homewith in secondaries with Adm. Cir # 80, dated 25 Cot 1543, Eq. 635. HIRORA, is inventory of Effects concerning subject north below.

(Lost Note) (Lost

\*Status. (Decrees, Figure in action, Pressurer on the 6th

day of June 1944.

Designated Baneficiary (with Address)

Louis 15, heaves, the contraction of the contracti

Cl. II Assets: Cash found in offects, less cost of money order inclosed herovith.

U.3.N.O. 3 Amt 3 U.5.M.O. 3 Amt 3 U.5.M.O. 3 Amt 3

U.S. Official Check " The Ant Bank (Name 3 Branc

#Bank Accounts 2 6

#Inclosed is No Isols.

(will, Power of Attorney, war Bond, Travelers Checks
Describe fully)

PEMMRES (1f any)

\*Strike out words no applicable. #Negative report where applicable.

(OVER)

(Att.ch extra sheeta If peoperary)

No orservi effects.

I certify that the fere o an investory occurred all of the subject's offects and thit effects were almost to lifects QM. ETCUSA, APO #307, 3-14, U.S. Army by delivering to Effects QM 326 A/B Div.,

AFT 455 USA on 2 August 1944.

George H Ropes

(Block Lettors)

GECRAE J. ROPER

Sept., 507th Probt Inf. Rink and organization

1 April 1946

Mrs. Lou M. Reaves Route #6 Fayetteville, North Carolina

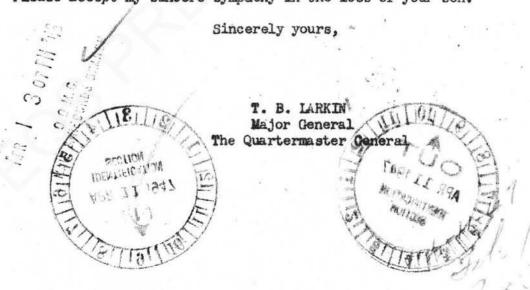
Dear Mrs. Reaves:

The War Department is most desirous that you be furnished the burial location of your son, the late Private First Class Lacy H. Reaves, A.S.N. 34 306 532.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery, Blosville, France, plot S; row 7, grave 133.

This cemetery is located twenty miles northwest of St. Lo, twenty-four miles southeast of Cherbourg and five miles north and slightly west of Carentan, all in France, and is under the constant care and supervision of United States military personnel.

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



17 September 1947

Mrs. Lou M. Reaves Route #6 Fayetteville, North Carolina

Dear Mrs. Reaves:

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,

EP 23

THOMAS B. LARKIN
Major General
The Quartermaster General

gen

Pfc Lacy H. Reaves, ASN 34 306 532 Plot G, Row 13, Grave 37 Headstone: Cross St. Laurent (France) U. S. Military Cemetery

Mrs. Lou M. Reaves Route #6 Fayetteville, North Carolina

Dear Mrs. Reaves:

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 beautification 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.

lhc

Sincerely yours,

H. FEIDMAN Major General The Quartermaster General