

INDIVIDUAL DECEASED PERSONAL FILE

BEST COPY POSSIBLE
POOR QUALITY ORIGINAL

QMGMH 293
DeSouza, Moses

20 October 1950

Mr. Harry Bransky
Auditor Freight Traffic
The Baltimore and Ohio Railroad Company
Baltimore 1, Maryland

Dear Mr. Bransky:

In compliance with the request contained in your letter of 28 November 1950 (your file USG-NS-72708-6-339) there is inclosed a certificate in lieu of Bill of Lading No. WT 7290222, covering the shipment of a Government flat granite marker for the grave of the late Moses DeSouza.

Sincerely yours,

1 Incl
CIL of B/L WT 7290222
gam

L. M. FELLBAUM
Major, QMC
Memorial Division

OCT 20 3 54 PM '50

O. Q. M. G.
MAIL & RECORDS BRANCH

DEPARTMENT OF THE ARMY
WASHINGTON FINANCE OFFICE, U. S. ARMY
TRANSPORTATION DIVISION
WASHINGTON 25, D. C.

FINEF-7-554.4 F-1
Baltimore & Ohio RR. Co.

MLM/add
16 October 1950

SUBJECT: Bill of Lading WT-7290222

TO: Quartermaster General,
Memorial Division, Headstone Branch,
Room 2402, Tempo B,
2nd & T Streets, S. W.,
Washington 25, D. C.

1. The attached letter dated 26 September 1950, File: USG-NS-72708-6-339, received from The Baltimore & Ohio Railroad Company in connection with shipment made on subject bill of lading is forwarded as a matter pertaining to your office.

2. Bill of lading WT-7290222 is not of record in this office.

3. Carrier has been advised of this reference.

FOR THE FINANCE OFFICER:

H. A. Dragotta
H. A. DRAGOTTA
Capt., Finance Corps
Transportation Division

1 Incl
Ltr dtd 26 Sept. '50

293; Be Longal, Mover

QMGMH 293

DeSouza, Moses
SN 33 600 839

4 February 1949

Mr. W. V. Freudenheim
Alessi Brothers Inc.
10th Street at Cedar Avenue
Darby, Pennsylvania

Dear Mr. Freudenheim:

Receipt is acknowledged of your letter of recent date, regarding the Government flat granite marker furnished for the grave of the late Moses DeSouza.

The records on file in this office show that this stone was shipped under date of 24 November 1948 to Mr. Ellis DeSouza, 1331 North Franklin Street, Philadelphia, Pennsylvania.

It is suggested you contact Mr. DeSouza in order to ascertain what disposition has been made of the stone, as this office has received no notice of an unclaimed or lost shipment.

Sincerely yours,

NORMAN S. WIGGS
Lt Col, QMC
Memorial Division

mvl

RECEIPT OF REMAINS

DISTRIBUTION CENTER

AGR DISTRIBUTION CENTER, PHILADELPHIA QM DEPOT

MORRIS ROSENBERG'S SONS
2009 NORTH BROAD STREET
PHILADELPHIA, PA.

~~REGISTRATION~~

DAY LETTER

O.I. 4271

REMAINS CONSIGNED TO:

REMAINS OF LATE PVT MOSES DESOUZA 33600839 WILL BE DELIVERED TO YOU BY
GOVERNMENT HEARSE ON EIGHTEEN MAY AT APPROXIMATELY NINE FIFTEEN AM BY
THIS DEPOT ACCOMPANIED BY MILITARY ESCORT. REQUEST YOU MAKE ARRANGEMENTS
TO ACCEPT REMAINS UPON DELIVERY AND NOTIFY NEXT OF KIN.

REGISTRATION
RECORDS BRANCH

MAY 18 1 27 PM '48

GENERAL DIVISION

FRANK M. GREEN, JR.
MAJOR, QMC

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

THIS 18 DAY OF MAY, 19 48
DAY MONTH

Sgt. Peter G. Dugan
WITNESS (Escort)

Morris Rosenberg's Son
CONSIGNEE

Handwritten note:
File not
353 Documented
7 June 19
48 M. Green
1948

O.I.		INSPECTION CHECK LIST					
4271		(For Use at Distribution Point)					
Name DE SOUZA Moses ✓		Rank PVT ✓		Serial Number 33600839 ✓			
Source Ellis De Souza, (Father) 1331 North Franklin St. Phila., Penna.		Consignee Morris Rosenberg's Sons 2009 N. Broad St. Phila., Pa.					
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 Change consignee Fix base J.F. 5/11/48 J.F.					
	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 Pressure release valve Fill up seams at head and foot J.F. 5/17/48 J.F.					
	HANDLES AND FASTENINGS						
	STENCILING - NAMEPLATE						
	CAM LOCKS (Sealing)						
	ODOR OR MOISTURE						
ROUTED		THROUGH					
<input checked="" type="checkbox"/>	MORTUARY OPERATING ROOM	<input type="checkbox"/> REPAIR SHOP					
Condition of Remains <input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory		Casket Repaired <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
		Casket Exchanged <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Necessary Disinfection (Explain)		Shipping Case Repaired <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
DISINFECTED REMAINS + LID OF CASKET. CHECKED I.D. TAGS. INSERTED NEW PRESSURE RELEASE VALVE HERMETICALLY SEALED CASKET		Shipping Case Exchanged <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
		Remarks					
Time	Date	Signature or Mortician		Time	Date	Signature of Inspector	
	5/17/48	Paul Hagan			5/18/48	Paul Hagan	
Remarks Tuesday 5/18 Set for Ship							

2562 W W II

REQUEST FOR REIMBURSEMENT OF INTERMENT OR TRANSPORTATION EXPENSES

DATE

(Read Explanation on Reverse Side before completing form)

NAME OF DECEDENT (Last, First, Middle Initial)

BRANCH OF SERVICE

TO BE FILLED IN BY CLAIMANT

DESOUZA, Moses

AGF

A. INTERMENT EXPENSES
(Civilian or Private Cemetery) ✓

RANK OR GRADE

SERIAL NO.

B. TRANSPORTATION EXPENSES
(National or Post Cemetery)

PVT

33600839

INSTRUCTIONS TO PERSONS SIGNING THIS FORM

1. This form is NOT to be signed by Funeral Director.
2. Fill in as required and sign four copies.
3. Check Box "A" or Box "B" above, not both.
4. Check Box "A" when interment is in a civilian or private cemetery.
5. Check Box "B" when remains are delivered to home or other place prior to burial in a national or post cemetery.

FILL IN THIS STATEMENT IF BOX "A" IS CHECKED

FILL IN THIS STATEMENT IF BOX "B" IS CHECKED

I certify that the sum of \$ 175.00 was paid by me from personal funds in connection with the interment of the remains of the above-named decedent in the cemetery indicated below:

NAME: Har Zion Cemetery Co.
CITY OR COUNTY: Collingdale Del County
STATE: Penn.

I certify that the sum of \$ _____ was paid by me from personal funds in connection with the transportation of the remains of the above-named decedent from: (City, town, or place from which remains were shipped)

TO: (Name and Location of National or Post Cemetery)

RETURN FOUR COPIES TO

**Commanding Officer
Philadelphia Quartermaster Depot
2800 South 20th Street,
Philadelphia 45, Pa.
ATTN: AGR Division**

SIGNATURE OF CLAIMANT

Ellis De Souza
ADDRESS (Street number or RFD, City and State)
1731 N. Franklin St Phila Pa
RELATIONSHIP TO DECEDENT
Father

REMARKS

PAID

FAMILY CORRESPONDENCE BRANCH
ACCEPTANCE SECTION

Date 2/27/48

<u>NAME</u>	<u>RANK</u>	<u>SERIAL NO.</u>	<u>DD#</u>
MOSES De SOUZA, <i>MOSES</i>	PVT.	33 600 839	00464 03 3200
<u>CEMETERY</u>	<u>PLOT</u>	<u>ROW</u>	<u>GRAVE</u>
ST. MERE EGLISE #1, FRANCE	1	6	101

<u>OPTION</u>	<u>FROM</u>	<u>TO</u>
	NO CHANGE	
<u>CONSIGNEE</u>		
NAME	EDWARD MACK	MORRIS ROSENBERG'S SONS
ADDRESS	966 NORTH 5th ST., PHILA, PA.	2009 NORTH BROAD STREET, PHILA, PA.
DC #	<i>No Change</i>	
<u>NEXT OF KIN</u>	NO CHANGE	
NAME		
ADDRESS		

CHANGE

AUTHORITY
LTR. DATED 2/15/48 SIGNED BY NOK.

MULLIGAN

KROOP

Kroop

3 MAR 1948

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

IN REPLY REFER TO QMGLF 293
De Souza, Moses
SN 33 600 839

IMPORTANT

3 February 1948

Address reply and envelope to:
THE QUARTERMASTER GENERAL
Do NOT include the name of the
official who signed the communica-
tion.

Mr. Ellis De Souza
1331 North Franklin Street
Philadelphia 3, Pennsylvania

Dear Mr. Souza:

Your letter pertaining to the remains of your son, the late
Private Moses De Souza, has come to my attention.

I wish to advise you that it is not necessary that you complete
a new "Request for Disposition of Remains" form in order to change
your funeral director.

Therefore, if you will furnish us the name and address of the
funeral director or consignee whom you wish to receive the remains of
your son, our records will be amended accordingly.

Please furnish the above information at your earliest convenience.

Sincerely yours,

Richard B. Coombs

RICHARD B. COOMBS
Major, MC
Memorial Division

1 Incl
Return Envelope

Pvt. Moses DeSouza, 33 600 839
Plot I, Row 6, Grave 101,
United States Military Cemetery
St. Mere Eglise #1, France

22 September 1947

Mr. Ellis DeSouza
1331 North Franklin Street
Philadelphia, Pennsylvania

Dear Mr. DeSouza:

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

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

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

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

Sincerely,

THOMAS B. LARKIN
Major General
The Quartermaster General

8
Incls.

gep

QMGMR 314.6
Graves Registration
(European, U. S. Misc.)

21 JAN 1947

SUBJECT: Burial Records

TO: Commanding Officer
American Graves Registration Command
European Theater Area
APO 887, c/o Postmaster
New York, New York

1. Request the burial reports and grave markers for the following decedents, interred in the United States Military Cemetery, St. Mere Eglise #1, France, be changed to read as follows:

<u>NAME</u>	<u>RANK GRADE</u>	<u>SERIAL NO.</u>	<u>PLOT</u>	<u>ROW</u>	<u>GRAVE</u>
Cobb, Albert L. Jr.	Pvt	20 407 543	I	7	129
DeSouza, Moses	Pvt	33 600 839	I	6	101

2. The records of this office have been reverified with the records of The Adjutant General, War Department, and have been found to be correct as indicated above.

FOR THE QUARTERMASTER GENERAL:

MARTIN G. RILEY
Major, QMC
Assistant

EC
4733
SPQIG 293
DeSouza, Moses

15 April 1946

Mr. Ellis DeSouza
1331 North Franklin Street
Philadelphia, Pennsylvania

Dear Mr. DeSouza:

The War Department is most desirous that you be furnished the burial location of your son, the late Private Moses DeSouza, A.S.N. 33 600 839.

The records of this office disclose that his remains are interred in the U.S. Military Cemetery #1, Ste. Mere Eglise, France, plot I, row 6, grave 101.

This cemetery is located approximately six miles north and east of Carentan and twenty one miles southeast of Cherbourg, both in France and is under the constant care and supervision of United States military personnel.

It is anticipated that, in the near future, the War Department will receive authority to return the remains of your son, at Government expense, to the final resting place which you select. When the necessary arrangements have been completed, this office will, without any action on your part, give full information and solicit your detailed desires.

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

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

IMS

mbk

APR 15 2 45 PM '46

C.O.M.G.
& RECORDS DIVISION

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

REPORT OF DEATH

DATE 5 August 1944
ac-4627

FULL NAME DeSouza, Moses		ARMY SERIAL NUMBER 33 600 839		GRADE Pvt.									
HOME ADDRESS Philadelphia, Pa.		ARM OR SERVICE Corps of Engineers		DATE OF BIRTH 11 Sep 1924 <i>P.C.</i>									
PLACE OF DEATH European Area		CAUSE OF DEATH Killed in Action		DATE OF DEATH 12 Jun 1944									
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 16 Apr 1943		LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS 1 1 27									
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Gwendoline A. DeSouza, mother, 1331 N. Franklin St., Philadelphia, Pa.													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Gwendoline A. DeSouza, mother, 1331 N. Franklin St., Philadelphia, Pa. Ellis DeSouza, father, Same as above.													
INVESTIGATION MADE		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
												X	X

ADDITIONAL DATA AND/OR STATEMENT

* On Parachute Pay.

The individual named in this report of death is held by the War Department to have been in a missing in action status from 6 Jun 1944 and subsequently reported killed in action on 12 Jun 1944 such absence was terminated on 25 July 1944, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from the Commanding General, European Area.

21 AUG 1944 FILE

COPIES FURNISHED:		
E. G. O.	F. B. I.	F. O. U. S. A.
L. Q. C. M. S.	O. F. D.	ARMY EFFECTS BUREAU
G. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BATTLE
 NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR

James W. Reinhart
James W. Reinhart

ADJUTANT GENERAL

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

BATTLE CASUALTY REPORT

NAME DE SOUZA MOSES			SERIAL NUMBER 33600839			GRADE PVT		ARM OR SERVICE CE		REPORTING THEATRE ETO	
PLACE OF CASUALTY FRANCE				DATE OF CASUALTY DAY: 06 MONTH: JUN YEAR: 44		FLYING OR JUMPING STAT J		TYPE OF CASUALTY MIA		SHIPMENT NUMBER 104	

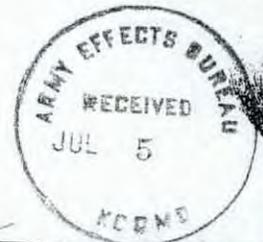
NAME AND ADDRESS OF EMERGENCY ADDRESSEE

THE INDIVIDUAL NAMED ABOVE DESIGNATED THE FOLLOWING PERSON AS THE ONE TO BE NOTIFIED IN CASE OF EMERGENCY, AND THE OFFICIAL TELEGRAPHIC AND LETTER NOTIFICATIONS WILL BE SENT TO THIS PERSON. THE RELATIONSHIP, IF ANY, IS SHOWN BELOW. IT SHOULD BE NOTED THAT THIS PERSON IS NOT NECESSARILY THE NEXT-OF-KIN OR RELATIVE DESIGNATED TO BE PAID SIX MONTHS' PAY GRATUITY IN CASE OF DEATH.

MR.-MRS.-MISS MRS	FIRST NAME GWENDOLINE	MIDDLE INITIAL A	LAST NAME DE SOUZA		RELATIONSHIP MOTHER
NO. AND NAME OF STREET 1331 NORTH FRANKLIN		CITY PHILADELPHIA	COUNTY		STATE PENNSYLVANIA

REMARKS:

CORRECTED COPY



ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED FORM 43 AG 201 REQ

CASUALTY BRANCH FILE ATTACHED OR CHARGED TO DATE

PREVIOUSLY REPORTED NO YES (AS INDICATED BELOW):

FILE NO.	MESSAGE NO.	TYPE	DATE AND AREA	E. A. NOTIFIED

REPORT NOT VERIFIED NO FORM 43 NO CAS. BR. FILE CHECKED BY REVIEWED BY

THIS SPACE FOR USE OF MACHINE RECORDS BRANCH, A.G.O.

ACCT. AREA	CASUALTY STATUS	ORIGINAL CAS. DATE			MESSAGE NO.	LATEST CAS. DATE			REFERENCE AREA	CREW POS.	RESIDENCE		COMP	RACE											
		DAY	MO.	YR.		DAY	MO.	YR.			STATE	COUNTY													
34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59

DISTRIBUTION 21

COPIES FURNISHED:

- AIR ADJUTANT GENERAL
- AMERICAN RED CROSS
- ARMY EFFECTS BUREAU
- ASST. CHIEF OF STAFF, G-1
- BUREAU OF PUBLIC RELATIONS
- CASUALTY PAY RECORDS BR., O.F.D.
- CHIEF OF ARM OR SERV. CONCERNED
- CHIEF OF STAFF
- CHRONOLOGICAL UNIT, CAS. BR.
- CHIEF, P.O.W. BR., M.I.S., W.D.G.S.

- CHIEF, WAR BOND DIVISION
- CHIEF, WAR BOND OFFICE
- C.G., ARMY GROUND FORCES
- C.G. SERVICE COMMAND
- DIR. OF SPECIAL SERVICES DIV.
- DIRECTOR, W.A.C.
- ENLISTED BRANCH, A.G.O.
- FINANCE OFFICER, U. S. ARMY, WASH., D.C.
- MACHINE RECORDS BRANCH, A.G.O.
- OFFICE OF DEPENDENCY BENEFITS

- OFFICERS BRANCH, A.G.O.
- P.O.W. INFO. BUREAU, O.P.M.G.
- SEAMEN'S RECORDS & WELFARE UNIT U.S.C.G.
- SOCIAL SECURITY BOARD
- SURGEON GENERAL
- THE ADJUTANT GENERAL
- U. S. EMPLOYEE'S COMPENS. COMM.
- WAR SHIPPING ADMINISTRATION
- WILLS UNIT, CASUALTY BRANCH

1621-2

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

—BATTLE CASUALTY REPORT

NAME DE SOUZA MOSES	SERIAL NUMBER 33600839	GRADE PVT	ARM OR SERVICE CE	REPORTING THEATRE ETO
PLACE OF CASUALTY FRANCE	DATE OF CASUALTY DAY MONTH YEAR 24 JUN 44		FLYING OR JUMPING STAT J	TYPE OF CASUALTY KIA
			SHIPMENT NUMBER 131	

NAME AND ADDRESS OF EMERGENCY ADDRESSEE

THE INDIVIDUAL NAMED ABOVE DESIGNATED THE FOLLOWING PERSON AS THE ONE TO BE NOTIFIED IN CASE OF EMERGENCY, AND THE OFFICIAL TELEGRAPHIC AND LETTER NOTIFICATIONS WILL BE SENT TO THIS PERSON. THE RELATIONSHIP, IF ANY, IS SHOWN BELOW. IT SHOULD BE NOTED THAT THIS PERSON IS NOT NECESSARILY THE NEXT-OF-KIN OR RELATIVE DESIGNATED TO BE PAID SIX MONTHS' PAY GRATUITY IN CASE OF DEATH.

MR.-MRS.-MISS—FIRST NAME—MIDDLE INITIAL—LAST NAME MRS GWENDOLINE A DESOUZA	RELATIONSHIP MOTHER	DATE NOTIFIED 25 JULY 1944
NO. AND NAME OF STREET—CITY—STATE 1331 NORTH FRANKLIN STREET PHILADELPHIA PENNSYLVANIA		

REMARKS:

CORRECTED COPY

EVIDENCE OF DEATH RECEIVED OF W D (23 JULY 44)



ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED FORM 43 AG 201 REQ *25 July 44*

CASUALTY BRANCH FILE ATTACHED OR CHARGED TO _____ DATE _____

PREVIOUSLY REPORTED NO YES (AS INDICATED BELOW):

FILE NO.	MESSAGE NO.	TYPE	DATE AND AREA	E. A. NOTIFIED
<i>Shipment</i>	<i># 104</i>	<i>MIA</i>	<i>24 JUN 44 ETO</i>	<i>27 June 44</i>

FORWARDED TO: SPEC. IDEN. TELEGRAM WOUNDED LETTER CORRES. S. R. & D. CERTIF. M. & M. NON-DEL.

REPORT NOT VERIFIED NO FORM 43 NO CAS. BR. FILE CHECKED BY _____ REVIEWED BY _____

THIS SPACE FOR USE OF MACHINE RECORDS BRANCH, A.G.O.

ACCT. AREA	CASUALTY STATUS	ORIGINAL CAS. DATE			MESSAGE NO.	LATEST CAS. DATE			REFERENCE AREA	CREW POS.	RESIDENCE		COMP	RACE											
		DAY	MO.	YR.		DAY	MO.	YR.			STATE	COUNTY													
34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59

DISTRIBUTION "A" 28 COPIES

(ALL TYPES OF CASUALTIES PERTAINING TO MILITARY PERSONNEL, EXCEPT WOUNDED.)
 COPIES FURNISHED: SEE CASUALTY BRANCH MEMORANDUM NO. 48, 1944.

DISTRIBUTION "B" _____ COPIES

(ALL WOUNDED MILITARY PERSONNEL AND ALL TYPES OF CASUALTIES PERTAINING TO CIVILIANS WHO ARE W. D. EMPLOYEES, EMPLOYEES OF W. D. CONTRACTORS AND OTHERS SUBJECT TO MILITARY LAW.)
 COPIES FURNISHED: SEE CASUALTY BRANCH MEMORANDUM NO. 48, 1944.

serv. com. 2

163136 ✓

JRM:VC:mas
April 11, 1945

Mr. Ellis DeSouza
1331 North Franklin Street
Philadelphia, Pennsylvania ✓

Dear Mr. DeSouza:

This refers to previous correspondence in connection with the personal effects of your son, Private Moses DeSouza. ✓

Since forwarding property to you on January 11 the Army Effects Bureau has received funds in the amount of \$1.20, which belonged to him. A check for this amount is inclosed herewith. ✓

As previously indicated, personal property and funds are transmitted by this Bureau for distribution according to the laws of the state of the soldier's legal residence. ✓

Yours very truly,

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

1 Incl--Check

Handwritten signature

ARMY SERVICES FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO: Ellis DeSouza

Effects of:
Name
ASN
Case No. 163136
Wt.

DATE April 11, 1945
JRM:VC:mas

W J M C
FOR: Effects Quartermaster

REMARKS:

x Inclose Bureau Check
Acct. No. 81148
Amount \$1.20
Inclose "Valuables" item
Ship "Valuables" item(s)

Remove G.I.
Note discrepancy in
Films removed
Diary removed
Laundry removed

ROUTING:

1 Accounting Branch ew
Warehouse Division
Files Branch, Adm. Divl

81148

163136

62228 em

April 16

45

Ellis DeSouza

1.20

One and 20/100

REMARKS:

Franked _____
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____
No. of packages _____

APR 18 1945

Shipping Clerk

ARMY EFFECTS BUREAU
INVENTORY

ms'

163/36 Dh

CASE NO.		
TYPED BY	fy	
DATE	3/3/45	
STATUS	DEC'D	
NAME	Moses De Souza	
A.S.N.	33600839	
RANK	Pvt	
ORGANIZATION	-	
AMOUNT	1.20	ACCOUNT NO. <i>81148</i>
LIST NO.	UK 419	<i>ck# 62228</i>
REMARKS		

A C C O U N T I N G I N V E N T O R Y

MAR 6 1945

ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT.
601 H. RDE. TY AVE.,
KANSAS CITY, MISSOURI.

(S-5 Mar45)
JRM:HE;nc

5 January, 1945.

In reply refer to SPQDK 122.1.(133,321
163,136 E)

SUBJECT: U. S. Postal Money Orders.

TO : Effects Quartermaster, U. K. Depot Q-114, APO #507, c/o
Postmaster, New York, N.Y.

1. Referred, for appropriate action, are two Postal Money Orders,
dated 6 July 1944, payable to Effects Quartermaster, ETOUSA, as follows:

#17910, effects of Pvt. Joseph H. Passmore, 18248034,
deceased, \$4.89.

35516

#17911, effects of Pvt. Mosēs De Souza, 33600839,
deceased, \$1.20

2. Request acknowledgement of receipt.

For the Commanding Officer:

W. F. HEHMAN,
Major. Q.M.C.
Asst. Effects Quartermaster

2 Incls:

U.S. Postal Money Orders No's #17910
#17911

MAR 6 1945

Handwritten initials



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

IN REPLY REFER TO: #163136 A

JRM:HA:mam
January 10, 1945

Mr. Ellis DeSouza
1331 North Franklin Street
Philadelphia, Pennsylvania

Dear Mr. DeSouza:

The Army Effects Bureau has received some additional property of your son, Private Moses DeSouza.

These effects, contained in one package, are being forwarded to you. If delivery is not made within thirty days from this date, please notify me so that tracer action may be instituted.

As previously indicated, personal property is transmitted by this Bureau for distribution according to the laws of the state of the soldier's legal residence.

Extending every sympathy, I am

Sincerely yours,

A. F. TIMMS
Administrative Assistant
Army Effects Bureau

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Effects of:
Name

ASN

Base No.

Wt.

Pvt. Moses DeSouza

33600839

163136 D

DATE January 9, 1945

JRM:HA:mt

Mr. Ellis DeSouza

1331 North Franklin Street

Philadelphia, Pennsylvania

B. Hurst
FOR: Effects quartermaster

REMARKS:

Inclose Bureau Check
 Acct. No. _____
 Amount _____
 Inclose "Valuables" item
 Ship "Valuables" item(s)

Remove G.I.
 Note discrepancy in _____
 Films removed
 Diary removed
 Laundry removed

ROUTING: ~~1. Adm. Div.~~

Accounting Branch
1. 2 Warehouse Division
2. Files Branch, Adm. Div.

REMARKS:

1 pt - g

Fracked **FRANKED**
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____
No. of packages 1

JAN 13 1945

JAN 11 1945

JAN 10 1945

Shipping Clerk *MIF*



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

(S-5 Mar 45)

JRM:HE:nc

5 January 1945

IN REPLY REFER TO: SPQDK 122.1 (153,321
 163,136 E)

SUBJECT: U. S. Postal Money Orders

TO : Effects Quartermaster, U. K., Q-114, APO #507, c/o Postmaster,
 New York, New York

1. Referred for appropriate action, are two Postal Money Orders,
 dated 6 July 1944, payable to Effects Quartermaster, ETOUSA, as follows:

#17910, effects of Pvt. Joseph H. Passmore, 18248034,
 deceased

#17911, effects of Pvt. Moses DeSouza, 33600839,
 deceased

2. Request acknowledgment of receipt.

For the Commanding Officer:

*Acknowledgment of
 Receipt received at ALB
 Feb 9-1945 - Filed in*

W. F. NEHMAN *Case # 153321*
 Major Q.M.C.
 Asst. Effects Quartermaster *HE*

2 Incls:
 U.S. Postal Money Orders No's. #17910
 #17911

*Tom
 Yee*



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

JRM:NM:slb
November 30, 1944

IN REPLY REFER TO: 163136 M

Mr. Ellis DeSouza
1331 North Franklin Street
Philadelphia, Pennsylvania

Dear Mr. DeSouza:

The Army Effects Bureau has received from overseas some personal effects of your son, Private Moses DeSouza.

I am inclosing a check for \$4.64, representing funds which belonged to him. The remainder of the property, consisting of the following items, is being forwarded to you in one package:

- 1 Pin (damaged)
- 1 Knife
- 1 Fountain pen

If, by any chance, the property has not reached you at the expiration of thirty days from this date, please notify me and tracer will be instituted.

The action of this Bureau in transmitting personal effects does not, of itself, vest title in the recipient. Such property is forwarded for distribution according to the laws of the state of the soldier's legal residence.

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

Yours very truly,

F. A. ECKHARDT
Captain Q.M.C.
Assistant

1 Incl--Check

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

Alie 2

ORDER FOR SHIPMENT

Ship to:

Mr. Ellis DeSouza
1331 North Franklin Street
Philadelphia, Pennsylvania

Effects of:

Name Pvt. Moses DeSouza

ASN 33600839

Case No. 163136 D

Wt.

Ship Via FRANKED G B/L No. _____

Date November 30, 1944
JRM:NM:slb

He Mc Mullan
For the Effects Quartermaster

PACKAGES SHIPPED

1 pkg

TOTAL _____ WT. _____

Franked
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____
Date Shipped DEC 2 1944

REMARKS:

DEC 1 1944 3

DEC 5 1944

A-J
(Shipping Clerk)

JRM:NM:slb
November 30, 1944

ROUTING

1. Fiscal Dept. - Emma White
2. Capt. ECKHARDT
3. _____
4. _____

Attach following item(s) from
Office Safe: -

Case No. 163136 M

Attach Bureau Check:

Account No. 45451 Amount \$4.64 ew

Account No. _____ Amount _____

Payable to

Ellis DeSouza
1331 North Franklin Street
Philadelphia, Pennsylvania

 (Correspondent) *NM dm*

Check No. 36351

Initials emh

45451

163136

December 1 44

Ellis DeSouza

4.64

Four and 64/100

Major Q.M.C.
Asst.

REQUEST FOR DISPOSITION OF REMAINS L

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

DATE:

Pvt. Moses DeSouza, 33 600 839
 Plot I, Row 6, Grave 101,
 United States Military Cemetery
 St. Mere Eglise #1, France

22 September 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, Ellis M. Souza

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

(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

- WIDOW WIDOWER SON OVER 21 YEARS OLD DAUGHTER OVER 21 YEARS OLD
- FATHER MOTHER BROTHER OVER 21 YEARS OLD SISTER OVER 21 YEARS OLD

RELATIONSHIP OTHER THAN ABOVE (Specify) Brother Norman - Mother

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
Grave Israel Beth - Col - Cemetery 55 and Market St. Phila. Pa
 (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 _____
 (FOREIGN COUNTRY) (LOCATION OF CEMETERY SELECTED)
4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT _____
 (LOCATION OF NATIONAL CEMETERY SELECTED)
- (Please indicate if your own religious services at a location other than the selected national cemetery are desired by placing an "X" in the proper box)
- YES NO

THE NAME OF THE DECEASED, THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (If no corrections are necessary, indicate this fact by inserting the word "NONE" in the space below.)

Pvt. Moses M. Souza 33600 839

WDB P. 106 10/17
coded 10/18/47 Mitchell

OCT 24

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 <i>Mr. Souza</i>		FIRST NAME <i>Moses</i>		MIDDLE INITIAL
NUMBER AND STREET <i>1331 N. Franklin St</i>		CITY OR TOWN <i>Phila</i>	COUNTY OR PROVINCE <i>Phila</i>	STATE OR TERRITORY OF U. S. A., OR COUNTRY <i>Pa.</i>
EXPRESS OFFICE (Nearest railroad passenger station) <i>North Phila R. R. Station</i>		TELEGRAPH ADDRESS		TELEPHONE No. <i>Po. 5-3279</i>

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 <i>Edward Inack</i>				
NUMBER AND STREET <i>966 N. 5th Street</i>		CITY OR TOWN <i>Phila 23</i>	COUNTY OR PROVINCE <i>Phila</i>	STATE OR TERRITORY OF U. S. A., OR COUNTRY <i>Pa.</i>
EXPRESS OFFICE (Nearest railroad passenger station) <i>North Phila R. R. Station</i>		TELEGRAPH ADDRESS		TELEPHONE No. <i>Inc. 7-0782</i>

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 <i>Mr. Souza</i>		FIRST NAME <i>Ewendoline</i>		MIDDLE INITIAL	RELATIONSHIP TO DECEASED <i>Mother</i>
NUMBER AND STREET <i>1331 N. Franklin St</i>		CITY OR TOWN <i>Phila 22</i>	COUNTY OR PROVINCE <i>Phila 22</i>	STATE OR TERRITORY OF U. S. A., OR COUNTRY <i>Pa.</i>	

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.

AE *Ellis de Souza* (SIGNATURE OF NEXT OF KIN) *1331 No. Franklin St.* (STREET AND NUMBER)
ELLIS DE SOUZA (NAME PRINTED OR TYPED) *Phila - 22 - Pa.* (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this *11th* day of *October*,
 19*47*, at city (or town) of *Philadelphia*, county of *Philadelphia*, and State (or Territory or District) of *Penna.*

Doris J. Dean
 (SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)
Notary Public
 (OFFICIAL TITLE)
My Com. expires 3/6/49

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

1

DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER 3584 00454		DATE 15 12 47 DAY MONTH YEAR		
NAME DESOUZA MOSES				SERIAL NUMBER 33600839		RANK PVT		ARM 1
CEMETERY ST MERE EGLISE NO 1 - CARENTAN								DATE OF DEATH DAY MONTH YEAR 3200 03
LOT I				ROW 6		GRAVE 101		COUNTRY FRANCE
								DISPOSITION OF REMAINS CODE DIST. PT. 3
								CAUSE OF DEATH 3

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE EDWARD MACK MORRIS ROSENBERGSSON 966 NORTH 5TH STREET 2009 N BRUNST PHILADELPHIA, PENNSYLVANIA		NAME AND ADDRESS OF NEXT OF KIN ELLIS DESOUZA (FATHER) 1331 NORTH FRANKLIN STREET PHILADELPHIA, PENNSYLVANIA	
---	--	---	--

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME DESOUZA, Moses		SERIAL NUMBER 33600839		RANK Pvt		DATE OF DEATH 12 JUNE 44		DATE DISTINTERRED 1 APR 48	
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER		ORGANIZATION RUSAGF		RELIGION H		IDENTIFICATION VERIFIED BY J. Earl Tucker, Embalmer NAME AND TITLE			

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Uniform		CONDITION OF REMAINS Advanced decomposition	
OTHER MEANS OF IDENTIFICATION ID tag with remains - 82nd AB patch.			
MINOR DISCREPANCIES / None			
REMAINS PREPARED AND PLACED IN CASKET. Transfer case.			

DATE 2 APR 48		BY J. Earl Tucker	
CASKET SEALED BY W. T. Bush		EMBALMER (Signature) W. T. Bush	
CASKET BOXED AND MARKED		SHIPPING ADDRESS VERIFIED BY: All markings, tags and plates verified by: JOHN L. BOYD, PVT., PA	
DATE 7 APR 48		BY	

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

JOHN L. BOYD, PVT., PA
SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report OMC Form 1194a for major discrepancies.

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM St. Mere Eglise No.1, Carentan		TO Casketing Point A, Cherbourg	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER T/5 Gregory	
SIGNATURE OF SHIPPER <i>W.P. King</i> ALLAN P. KING, 1/Lt., CAV	DATE 3 APR 48	SIGNATURE OF RECEIVER <i>E.N. Ciampo</i> E.N. CIAMPO, 1/Lt., FA	DATE 3 APR 48

2. SHIPPED

FROM Casketing Point A, Cherbourg		TO Fort Unit, Cherbourg	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER <i>Bain</i>	
SIGNATURE OF SHIPPER <i>E.N. Ciampo</i> E.N. CIAMPO, 1/Lt., FA	DATE	SIGNATURE OF RECEIVER <i>Joseph E. Hendry Jr.</i> JOSEPH E. HENDRY JR., MAJOR, CAC	DATE

3. SHIPPED

FROM CHERBOURG PORT UNIT		TO NYPE	
KIND OF CONVEYANCE USSS LAWRENCE VICTORY		NAME OF CONVOYER JOSEPH J. CARROLL, 1st Lt TC	
SIGNATURE OF SHIPPER JOHN L. HENDRY JR. MAJ. CAC	DATE 26 April 48	SIGNATURE OF RECEIVER <i>Joseph J. Carroll</i>	DATE APR 26 1948

4. SHIPPED

FROM		TO NYPE	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>NYPE</i>	DATE	SIGNATURE OF RECEIVER <i>James L. McKinnon</i> for JAMES L. MCKINNON COLONEL, T. C.	DATE MAY 7 1948

5. SHIPPED

FROM NYPE		TO PORT TRANSPORTATION OFFICER	
KIND OF CONVEYANCE <i>Taxi</i>		NAME OF CONVOYER <i>DC #3</i>	
SIGNATURE OF SHIPPER <i>James L. McKinnon</i> EDWARD JAMES L. MCKINNON COLONEL, T. C.	DATE 5/8/48	SIGNATURE OF RECEIVER <i>Alex Novakoff</i> ALEXANDER NOVAKOFF PORT TRANSPORTATION OFFICER	DATE MAY 10 1948

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

~~RESTRICTED~~
REPORT OF BURIAL
TM 10-630 AND AR 30-1815

12073
25 June 1944
Date

De Souza Moses
 Last Name First Initial Rank Serial No.
 C. B. 307abng Long Bn 82nd A/B 33600839
 89 Unit Organization 362
 Normandy France 12 June 1944 KIA
 Place of Death Date of Death Cause of Death
 23 June 1944 St Mere Eglise #1
 Time and Date of Burial Name of Cemetery Name or Coordinates of Location
 101 6 I Temp
 Grave Number Row Number Plot Number Type of Marker

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

If No Identification Tags
How were remains identified?

What means of identification were buried with the body?

To determine Right or Left use Deceased's Right and Left.

Who is buried on: Dixon E. 6785709 Pvt 4th Div 102
 Deceased's Right: Name Serial No. Rank Organization Grave No.
 Deceased's Left: Start of row
 Name Serial No. Rank Organization Grave No.

Signature or Name, Rank and if possible Organization of person furnishing above Data when other than officer reporting burial.



If print of identification tag is not affixed fill in below:

Emergency Addressee Givenoaline De Soriza
 Name
 1331 N. Franklin St. Phil, Pa.
 Address

Religion _____

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

- Pen
- Pin
- Knife
- 190 Francs
- Forwarded to the effects quartermaster

C. J. Pennie
Signature of Officer or other person reporting burial

Capt G M C
Verified by G.R.S. Officer

300 # 69

14
FILE
LONG

101 R 6

1

Dr. Susan M. (Wm) 33600839

GRADE

ARM OR SERVICE

AGE

RACE

NATIVITY

SERVICE
YEARS

P-1

V. ^{ad 11} AB

W

P. S. W.

LOCATION WHERE TAGGED:

DATE

HOUR

VII Case Cen

DIAGNOSIS: IF INJURY, STATE HOW, WHEN, WHERE INCURRED

K / A

LINE OF DUTY:

TREATMENT GIVEN: YES

TETANUS TOXOID: DOSE

TIME:

OR
ANTITETANIC SERUM: DOSE

TIME:

MORPHINE: DOSE

TIME:

DISPOSITION:

DATE

HOUR

VII Case Cen Fenice

SIGNATURE, WITH RANK:

101 R 6

NAME AND ARMY SERIAL NUMBER

1

DE SOUZA, MOSES (NIND) 33 600 839

H

GRADE	ARM OR SERVICE	AGE	RACE	NATIVITY	SERVICE, YEARS
PVT	82 nd AB	-	W	Portugal	

LOCATION WHERE TAGGED:	DATE	HOUR
307 HBH E. 1 st Bn VII Corp Com	6/24/44	

DIAGNOSIS: IF INJURY, STATE HOW, WHEN, WHERE INCURRED

R. I. A 12 June 44

LINE OF DUTY: YES

TREATMENT GIVEN:

TETANUS TOXOID: DOSE TIME:
OR
ANTITETANIC SERUM: DOSE TIME:
MORPHINE: DOSE TIME:

DISPOSITION:	DATE	HOUR
VII Corp Com Francisco	6/24/44	

SIGNATURE, WITH RANK:

Sgt Shusterman

SUBJECT: Report of transactions in disposing of the effects of

Moses DeSouza

33600839

late a

(Name of decedent)

(Army Serial Number)

Private

Corps of Engineers

, who died

(Grade)

(Organization, Army or Service)

on the 12th day of June, 1944, at European Area.

TO : The Adjutant General, War Department, Washington 25, 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, or person subject to military law, reports that:

a. No legal representative or widow of decedent being present at decedent's camp or quarters, effects of decedent were forwarded to this Summary Court-Martial.

b. Local debtors owed decedent's estate \$ none, of which the sum of \$ none was collected. (If nothing was found due or collected, state "None"; otherwise attach itemized statement of sums owing and collected.) (Incl. none.)

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 none, Incl. none.)

d. Disposition of decedent's effects (less money paid creditors, if any) has been made by the Summary Court-Martial by transmittal through the Quartermaster Corps, at Government expense to person found entitled (See Summary Court-Martial FINDING below.)

FINDING:

Before a Summary Court-Martial which convened at Kansas City, Missouri, on 29 November 1944, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application or affidavit of Ellis DeSouza for the effects of the above-named deceased soldier, or person subject to military law, now in the possession of the United States, with other relevant evidence, was duly considered;

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

1331 North Franklin Street, (Number, Street or Avenue)

Philadelphia (City, Town or Village)

State of

Pennsylvania

, is the

Father

of the

(Relationship or Capacity)

above-named decedent and appears to be entitled to receive his or her effects.

(Signature of Summary Court Officer)

TALLY NUMBER 5416 ✓ INVENTORY DATE 12/26/44 CASE NUMBER 163136
 EFFECTS OF MOSES (W.M.) DE SAUZA RANK 1st Lt
 A.S.N. 03600839 ORGANIZATION Co B. 307 A/B Engr Bn
 PACKAGE DESCRIPTION #1 Package

CLOTHING	PERSONAL ITEMS	CONTAINERS
BELT	BRACELET, IDENTIFICATION	BAGS, TRAVEL
BELT, MONEY (NO MONEY)	BRUSHES	BAGS, CLOTH
HEADWEAR	GLASSES	BILLFOLD (NO MONEY) <u>w-e</u>
CLOTH, WASH	KNIVES	CASE, _____
COATS	LIGHTERS	FOOTLOCKER
FOOTWEAR, PR.	X MISC. INSIGNIA ✓	KIT, SEWING
GLOVES, PR.	MISC. ITEMS	KIT, TOILET
HANDKERCHIEFS	* / PEN, FOUNTAIN ✓	KIT, WRITING
JACKETS	PENCIL, MECHANICAL	PAPERS AND MISC.
OVERCOATS	PIPES	X BOOKS ✓
SHIRTS	RELIGIOUS ARTICLES	X FILMS
SOCKS, PR.	X RIBBONS, DECORATION	X LETTERS ✓
TIES	RINGS	X PAPERS, PERSONAL ✓
TOWELS	TOBACCO	X PHOTOS ✓
TROUSERS, PR.	TOILET ARTICLES	SHOE SHINE ARTICLES
TRUNKS, PR.	L WINGS <u>Small</u> ✓	SOUVENIRS
UNDERWEAR	WATCH	SOUVENIR MONEY
SCARFS	CAMERAS	TESTAMENTS

1 medal ✓
1 watch band ✓
1 part of a pencil ✓

** #1 U.S. postal money order
 no 17911 date July 6 1944
 amt \$1.20 m.c.
 brought. Attached.

REMARKS: Mather
Gwendoline De Souza
1331 North Franklin Street
Philadelphia, Penna
 * Pay to Effects Quartermaster Sousa
 * Remitter A.T. Zhinder
 * broken via pen point

ATTACHMENTS: FORM #54 ✓ FORM #100

C.A.T. none JAN 2 1945

WEIGHT	X #43 OF ADDITIONAL <u>Form 11</u> <u>Heading</u>
	GI REMOVED
	X SHORTAGE IN REVERSE ✓
	IDENT. TAGS REMOVED
	DIARY REMOVED

WAREHOUSE SPACE _____ STORED BY M

INVENTORY OF EFFECTS

(See AR 600-300)

De Souza, MOSES (MNT) 33600839
 (Last name) (First name) (Middle Initial) (Army serial number)
 Pvt. (Grade) (Organization or arm of service)
 who died on the 12th day of June, 1944

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

NUMBER	ARTICLES	*PACKAGE NUMBER
	Pen ✓	
	Pen ✓	
	Knife ✓	

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

CLASS II—Other effects

NUMBER	ARTICLES
	100 FRAGS
	2 Sh. Hats

INVENTORY OF EFFECTS

(See AR 600-300)

De Souza, MOSES (MNT) 33600839
 (Last name) (First name) (Middle Initial) (Army serial number)
 Pvt. (Grade) (Organization or arm of service)
 who died on the 24th day of June, 1944

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

NUMBER	ARTICLES	*PACKAGE NUMBER
1	Packet of Letters ✓	
1	Pair Paratrooper Wings ✓	
2	Address Books ✓	
1	Wallet ✓	
1	Personal Papers (Packet) ✓	
1	Broken Pen ✓	
1	Part of Pencil ✓	
1	Book "Twelfth Night" ✓	
1	Book "Macbeth" ✓	
1	Packet of stationery ✓	
6	Picture Portraits ✓	

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

CLASS II—Other effects

NUMBER	ARTICLES
	None

ARMY EFFECTS BUREAU INVENTORY

Sheet ___ of ___ Sheets
 Box No. ___

Pay 45
 by 336

Deceased
 Missing
 P.O.W.
 Abandoned

SHOWN ON TALLY-IN AS Moses, Moses ORIGINAL NO. OF PKGS. 5416

TALLY-IN NO. 5416 INVENTORY DATE June 1944 CASE NO. 336

EFFECTS OF _____ RANK _____

A.S.N. _____ ORG. _____

CLASS II-Continued

NUMBER	ARTICLE
	None
1	<p>Effects were sent to 82nd A/B Div "QM" for delivery to: Effects Co, FTGUSA, APO 871 U. S. Army.</p> <p>Guendoline De Souza - Mother 1331 North Franklin Street Philadelphia, Penn'a.</p>
	U.S. Postal Money Order
	#17911 \$1.20 ✓
	<p>Money { Specie... \$304 (1s 6d) 0</p> <p>Notes... \$1.00 0</p>

I CERTIFY that the foregoing inventory comprises all the effects of the deceased whose name appears on the first page hereof, and that the effects were delivered to _____ (Give name and degree of relationship; if legal representative

or beneficiary named by the deceased, so state)

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

A. T. ZBYEDEN,
CWO, USN, Personnel Adjutant

APC 469 IV (1) NY
(Station)

3 July 1944
(Date)

*Strike out words not applicable.

VALUABLES RECEIPT

TALLY NO. 5416

NAME Masas (w mi) De Souza

RANK Pvt

S.S.N. 33600839

DATE 6/26/44

ff. QM Form 56

**#1 To Locked Storage
U.S. Postal Money Order
no 17911 Date July 6, 1944
Amt \$1.20

Canon

17911

DOLLARS	20
	CENTS

RECEIPT

FOR REMITTER
TO DETACH AND HOLD



ALESSI BROTHERS ^I_N^C

MONUMENTS - MAUSOLEUMS

10th STREET AT CEDAR AVENUE

DARBY, PENNA.

1.13.49

SIR:

WE HAVE BEEN AUTHORIZED BY MRS. DE SOUZA
OF 1331 N. FRANKLIN STREET , PHILADELPHIA PA
TO ACT IN HER BEHALF IN THIS MATTER.

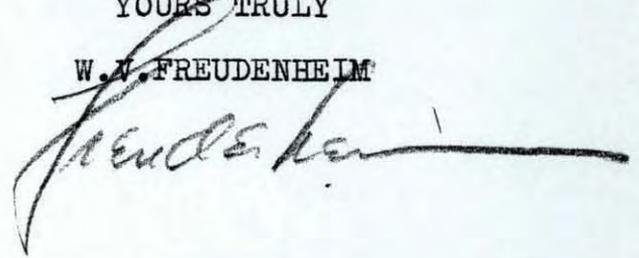
JULY 1 , 1948 SHE ORDERED A FLAT GRANITE MARKER
FOR HER SOLDIER SON REINTERRED IN THE HAR ZION
CEMERTERY, COLLINGDALE PA.

HER PURCHASE NUMBER IS W 49-056 SINCE THIS
COMMUNICATION SHE HAS HAD NO FURTHER WORD.

WILL YOU KINDLY MAKE ALL FURTHER COMMUNICATION
WITH THIS OFFICE.

YOURS TRULY

W. F. FREUDENHELM



*293 Mr. Souza
Morse 35600837*

THE BALTIMORE AND OHIO RAILROAD COMPANY
OFFICE OF AUDITOR FREIGHT TRAFFIC

BALTIMORE, 1, MD. September 26, 1950

HARRY BRANSKY
AUDITOR FREIGHT TRAFFIC
W. A. MCCLEAN
ASST. AUDITOR FREIGHT TRAFFIC

IN REPLYING QUOTE FILE NO.

USG-NS-72708-6-339

SUBJECT:

West Chelmsford, Mass. to Darby, Pa., W/B 1951, November 28, 1948.
Govt. B/L WT-7290222.

Officer of Finance
U. S. Army
Washington, D.C.

Attn: Maj. Genl. T. B. Larkin

Dear Sir:

Kindly refer to waybill as per caption, covered by
Govt. B/L WT-7290222, and will thank you to furnish us with cer-
tificate in lieu of lost Government bill of lading. Shipment in
question consists of 1 crated headstone, weight 125 lb.

Your cooperation in this matter will be appreciated.

Yours truly,

Harry Bransky
Auditor Freight Traffic

n

CK

2931
See Sawyer, Moore

1331 W. Franklin St.
Philadelphia 23, Pa.
July 15, 1948

War Department
Office of the Quartermaster General
Washington 25, D. C.

Gentlemen:

In reply to the enclosed letter we are sending you the below address of our new funeral director.

MORRIS ROSENBERG'S SON
FUNERAL DIRECTOR
2009 N BROAD ST.
PHILADELPHIA, PA
PHONE ST-4-1644

Thanking you kindly,
The DeSoyza & family

293 The DeSoyza, Newark 33600839

1331 W. Franklin St.
Philadelphia 23, Pa.
January 26, 1948

War Department
Office of the Quartermaster General
Washington 25, D. C.

Gentlemen:

Some time ago you sent us a form to fill out to have Moses DeSoyza's body sent back to the states. Pvt. Moses DeSoyza 33 600 839
Plat 1, Row 6, Grave 101
United States Military Cemetery
St. Marie Eglise #1, France.

WI
U

WESTERN
UNION

WUAA134 10 COLLECT PHILADELPHIA PENN 3 530P
PHILA Q M DEPOT , ATTN AMN GRAVES REC DIV
PHILA

A.G.P. DIVISION
PHILA

300 MAY 4

8:04

~~1948 MAY 3 PM 8 41~~

RECEIVED
PHILA. Q. M. DEPOT

TELEGRAM RECEIVED AND CONFIRMED REMAINS LATE PVT

MOSES DESOUZA .

ELLIS DESOUZA.

WESTERN
UNION

703P



WESTERN
UNION

We filled out this form and sent it to you. However, we have now decided that we wish to change the undertaker. We have been informed that in order to do so we must have new forms to fill out. Please send me the proper forms to fill out for this purpose.

*Thanking you, I am
Very truly yours,
Mr. Ellis Desouza*

JAN 19 1949

ROUTING SLIP

TO	ACTION TAKEN	INITIALS	DATE
IDENTIFICATION			
SPECIAL CHECKERS			
✓ CORRESPONDENCE SECTION	<i>Family Letters</i>		
CORRESPONDENCE SUBSECTION			
CONTROL (In)			
A-Z AND 333 (For recheck)			
PLOT MAP			

ACTION REQUIRED	REMARKS
NAME	<i>Notify</i>
RANK	
ASN	<i>Ellis De Souza</i>
ORGANIZATION	<i>1331 No Franklin St. Philadelphia Pa</i>
ITEM No. 1	
ITEM No. 2	
ITEM No. 4	
ITEMS Nos. 5 AND 6	<i>Not to charge travel</i>
ITEM No. 7	<i>Directors</i>
ITEM No. 8	<i>Flynn</i>
ITEM No. 9	
SUSPENSE	<i>74173</i>

STATUS OF HEADSTONE APPLICATION

NAME OF DECEDENT <i>DeSouza, Moses</i>		<i>33600839</i>
DATE RECEIVED <i>9/3/48</i>	TYPE OF STONE FLAT GRANITE	
DATE ORDERED <i>10-20-48</i>	DATE SHIPPED <i>Nov. 24, 1948</i>	
QUARRY AND RAILROAD <i>W. Chelmsford, Mass</i>		
BILL OF LADING <i>7290222</i>		
CONSIGNEE <i>and applicant;</i> <i>Ellis De Souza,</i> <i>1331 No. Franklin St.</i> <i>Philadelphia, Pa.</i>		
LAST SHIPMENT		
BILL OF LADING <i>It should be there.</i>		
ORDERED <i>no use notice this office. Suggest she contact Ellis De Souza.</i>		
SHIPPED <i>JAN 2 8 1949</i>		

1331 No. Franklin St.
Philadelphia 22, Pa.
Feb, 15, 1948

War Department
Office of the Quartermaster General
Washington 25, D.C.

Gentlemen:

In reply to the enclosed
letter we are sending you the
below address of our new funeral
director.

MORRIS ROSENBERG'S SON
FUNERAL DIRECTOR
2009 N BROAD ST.
PHILADELPHIA, PA
PHONE ST-4-1644

Thanking You kindly,
Ellis De Souza & family

993 No. Louisa, Philadelphia 33600889



MEMORIAL DIVISION
FEB 18 10 29 AM '48
RECORDS BRANCH

CORRESPONDENCE ACTION SHEET

Addressee: ^{Mr.} Miss. Mrs. Ellis De Souza Relationship Father
 State 1331 North Franklin St.
 City, State Philadelphia 3, Pennsylvania '47 Date letter
 Cemetery _____
 Temporary: _____
 Permanent: _____
 Plot Row Gr Cem. Name or No. City Country

PARAGRAPHS
(sequence)

--- ADDITIONAL --- DATA --- MODIFICATIONS ---

165-A

The information which you furnished has enabled us to amend our records to show the change of Funeral Directors, and your desires in this matter will be complied with.

166-E

[Handwritten signature]

Analyst Typist Reviewer

Modifications

OKed

Decedent: DE SOUZA Last
MOSES First
 Initial
P.T. Rank
33
600 ASN
839



With Effects
INVENTORY OF EFFECTS

(See AR 600-350)

De Souza Moses (NMI) 33500839
 (Last name) (First name) (Middle initial) (Army serial number)
 late a Pvt Co B 307 A/B Engr Bn
 (Grade) (Organization or arm or service)

who died on the 24th day of June, 19 44

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

NUMBER	ARTICLES	*PACKAGE NUMBER
1	Packet of Letters	✓
1	Pair Paratrooper Wings Insignia	✓
2	Address Books	✓
1	Wallet	
1	Personal Papers (Packet)	✓
1	Broken Pen	✓
1	Part of Pencil	✓
1	Book "Twelfth Night"	✓
1	Book "Macbeth"	✓
1	Packet of Stationery	✓
6	Picture Portraits	✓

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

CLASS II—Other effects

NUMBER	ARTICLES
	None
	<i>File</i>
	<i>Print</i>



SEP 25 11 42 AM '77
WASHINGTON
SEP 27 11 42 AM '77

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

1-63136

REPORT OF DEATH

DATE 5 August 1944
 ac-4627

FULL NAME DeSouza, Moses		ARMY SERIAL NUMBER 33 600 839	GRADE Pvt.
HOME ADDRESS Philadelphia, Pa.		ARM OR SERVICE Corps of Engineers	DATE OF BIRTH 11 Sep 1924
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in Action		DATE OF DEATH 12 Jun 1944
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 16 Apr 1943	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS 1 1 27

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)
 Gwendoline A. DeSouza, mother, 1331 N. Franklin St., Philadelphia, Pa.

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)
 Gwendoline A. DeSouza, mother, 1331 N. Franklin St., Philadelphia, Pa.
 Ellis DeSouza, father, Same as above.

INVESTIGATION MADE		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
												X	



ADDITIONAL DATA AND/OR STATEMENT
 * On Parachute Pay.

The individual named in this report of death is held by the War Department to have been in a missing in action status from 6 Jun 1944 and subsequently reported killed in action on 12 Jun 1944 such absence was terminated on 25 July 1944, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from the Commanding General, European Area.

COPIES FURNISHED:		
S. S. O.	F. B. I.	F. O., U. S. A.
S. S. G. M. S.	O. F. D.	ARMY EFFECTS BUREAU
G. A. C.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. S. 301 FILE

BATTLE
 NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR
James W. Reinhart
 James W. Reinhart
 ADJUTANT GENERAL

REQUEST FOR PREPARATION OF LETTER
FOR 293 INFORMATION

12/19/46

NAME

DE SOUZA MOSES

SERIAL NUMBER

33600839

LETTER TO

FIELD

NAME

RANK

ASN

ORGANIZATION

NEXT OF KIN

LATEST ADDRESS OF NEXT OF KIN

DATE OF DEATH

CEMETERY

PLOT

ROW

GRAVE

MISCELLANEOUS

SPECIAL CHECKER (Signature)

M. Kalinip

CORRESPONDENCE ACTION SHEET

Addressee: ^{Mr.} Mrs. Ellis W. Loung Relationship Father
 State 1331 N. Franklin St
 City, State Philadelphia, Penn Date letter '47
 Cemetery
 Temporary: _____
 Permanent: _____
 Plot Row Gr Cem. Name or No. City Country

Decedent:

Last W. Loung
 First Wm
 Initial W. L.
 Rank 1st Lt
 ASN 32608839

PARAGRAPHS (sequence)

--- ADDITIONAL --- DATA --- MODIFICATIONS ---

165 A
 I wish to advise you that it is not necessary that you complete a new "Request for Disposition" form in order to change your funeral director.

Therefore, if you will furnish us the name and address of the funeral director or consignee whom you wish to receive the remains of your son, our records will be amended accordingly.

Please furnish the above information at your earliest convenience.

Handwritten initials

File
 2/13/48
Handwritten initials

Analyst Typist Reviewer

Modifications

OKed

2248

LIENS

U S GOV. CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

Specie 304 (1s 6d)
notes \$1.00

I certify that the above listed items were not in the containers inventoried by me:

Cam...
INVENTORY CLERK

A. G. Gule
SUPERVISOR

G. I. REMOVED

Shortage.

190 Francs.

4 Shillings

I certify that the above items
were not contained in the
package when checked by me.

Inventory Clerk

Inventory Clerk

D. B. [Signature]
Supervising Officer

293 Desouza, Moses 33,600,839

PART II—RELINQUISHMENT OF DISPOSITION AUTHORITY

If you are the next of kin and you desire to relinquish your disposition authority, please fill in PART II of this form.

I, THE _____, AS THE NEXT OF KIN OF THE DECEASED
(PLEASE INSERT RELATIONSHIP)
NAMED IN PART I OF THIS FORM, DO HEREBY RELINQUISH MY RIGHTS TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED.
THE NEXT EXISTING PERSON IN THE ORDER OF ELIGIBILITY OF DECEDENT'S SURVIVORS IS:

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

WHOM I UNDERSTAND SHALL HAVE THE RIGHT TO DIRECT FINAL DISPOSITION OF THE REMAINS OF THE DECEASED.

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

PART III

If you are NOT the next of kin authorized to direct the disposition of remains, please fill in PART III of this form.

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

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

_____	_____ (DATE)
(SIGNATURE)	(STREET AND NUMBER)
_____	_____
(NAME PRINTED OR TYPED)	(CITY AND STATE)

ADDITIONAL REMARKS AND INSTRUCTIONS

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

UN
RECORDS BRANCH
OCT 16 5 53 PM '49
MEMPHIS DIVISION





KANSAS CITY, MO.

FEB 28 1945

PART A

1. When the remains are delivered for interment in a civilian or private cemetery, you are responsible for paying all interment expenses. In this connection, you are entitled to the allowance mentioned in paragraph 2 below.

2. An amount not to exceed \$75 is allowed by the Government toward actual interment expenses when final interment of the remains is in a private or civilian cemetery. No allowance is authorized toward interment expenses when interment is in a national or post cemetery.

3. The \$75 maximum allowance by the Government toward interment expenses includes but is not limited to the payment of one or more of the following items: Hearse hire from the railroad station to your home, the funeral home, church, cemetery, or any other place designated by you; vault; church services; newspaper notices; transportation for friends and relatives to and from cemetery; and the services of a funeral director.

4. Reimbursement by the Government is made only to the person who paid from his personal funds the expenses of or incident to interment in a private or civilian cemetery. Receipted bills are not required to accompany this form. Any expenses over and above the \$75 maximum must be borne by the person who incurred or paid the additional expenses.

PART B

1. When the remains are delivered to you at Government expense prior to burial in a national or post cemetery, you are responsible for all additional expenses necessary to deliver the remains from that point to the national or post cemetery grave site. However, you may be entitled to an allowance for the cost of transporting the remains from your home to the national or post cemetery grave site subject to the conditions outlined in paragraph 2 below.

2. Reimbursement of transportation expenses is allowed only when the cost to the Government to deliver the remains to you is LESS than what it would have cost the Government to deliver the remains direct to the national or post cemetery of final interment. However, the amount which you may be allowed (the difference between cost of delivery to you and cost of delivery by the Government direct to the national or post cemetery) may not exceed the amount actually expended by you to deliver the remains to the cemetery grave site. **WHETHER OR NOT YOU WILL BE GRANTED AN ALLOWANCE IS DEPENDENT UPON AN AUDIT OF THIS REQUEST. IN ANY EVENT YOU WILL BE NOTIFIED OF ANY ALLOWANCE DUE YOU BY THE OFFICE TO WHICH THIS FORM IS SENT.**

3. Reimbursement by the Government will be made only to the person who paid from his personal funds for transporting the remains to the national or post cemetery grave site.

4. No interment expense allowance is authorized since interment is made ultimately in a national or post cemetery.



DEPARTMENT OF THE ARMY
WASHINGTON FIELD OFFICE
WASHINGTON, D. C.

43-1012-12



253 DEKOTA, MOSE 33 600 839 FVT. EUROPEAN AREA (P.A.) 1/4/11

2276

90204-1

2270

9117152-1