293 BOWDEN, CLYDE L. 36884111 PFC. INF. EUR. AREA (MICH.) '45eg

Declassified in accordance with D.O. 13526

Declassified in accordance with D.O. 13526

11844

RECEIPT OF REMAINS

COLUMBUS GENERAL DEPOT COLUMBUS 15 OHIO

DISTRIBUTION CENTER ROUTINE 25 JANUARY 1949

REMAINS CONSIGNED TO:

DONALD BELL FUNERAL HOME

219 ELM STREET

BIRMINGHAM MICHIGAN

FROM QMDCG_____BARDEN

REMAINS OF THE LATE PFC CLYDE L BOWDEN ASN 36884111 BEING SHIPPED TO YOU ACCOMPANIED BY MILITARY ESCORT ON TRAIN NO 21 GRAND TRUNK RAILROAD LEAVING COLUMBUS OHIO 9:50 PM TWENTY EIGHT JANUARY AND DUE TO ARRIVE BIRMINGHAM MICHIGAN 2:12 PM RAILROAD TIME TWENTY NINE JANUARY. REQUEST YOU IMMEDIATELY PASS THIS INFORMATION ON TO NEXT OF KIN. REQUEST FURTHER YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL AND TRANSPORT REMAINS AND ESCORT TO FRANKLIN MICHIGAN THE PLACE OF FINAL BURIAL AND RETURN ESCORT TO RAILROAD STATION. YOU SHOULD SUBMIT ITEMIZED STATEMENT IN QUADRUPLICATE PROPERLY CERTIFIED TOTHIS DEPOT FOR PAYMENT OF TRANSPORTATION CHARGES ONLY IF ANY FROM BIRMINGHAM RAILROAD STATION TO FRANKLIN MICHIGAN

NAT FILE RECORDS ANNOTATED DATE 2-7-76 BY NNRD

I, the undersigned, do hereby acknowledge receipt of the remains of the above-named deceased this 29th (Day) day of January (Month), 1949

Leroy E. Hohne
(Witness (Escort))
ER 33991031

(Consignee)

QMD FORM REV 5 MAR 48 1193

U. S. GOVERNMENT PRINTING OFFICE 16—54737-1

Declassified in accordance with D.O. 13526



Declassified in accordance with D.O. 13526

SB 11-66 Can 9

1

DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER: 4650 02199

DATE: 15 DAY | 04 MONTH | 48 YEAR

NAME	SERIAL NUMBER	RANK	ARM	DATE OF DEATH
BOWDEN CLYDE L	36884111	PFC	1	DAY | MONTH | YEAR

CEMETERY		DISPOSITION OF REMAINS
MARGRATEN, - AACHEN	1	6200 CODE | 07 DIST. PT.

PLOT	ROW	GRAVE	COUNTRY	CAUSE OF DEATH
Z	5	101	HOLLAND	1

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
DONALD BELL
219 ELM STREET
BIRMINGHAM, MICHIGAN
(F/B FRANKLIN, MICHIGAN)

NAME AND ADDRESS OF NEXT OF KIN
MILO BOWDEN (FATHER)
25820 - 14 MILE ROAD
RURAL ROUTE #1
BIRMINGHAM, MICHIGAN

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED
CLYDE L. BOWDEN	36884111	PFC		4 AUGUST 1948

IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY
[ ] REMAINS [X] MARKER	USAGF	P	ROBERT W. GANSEL 1/LT., QMC (NAME AND TITLE)

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: MATTRESS COVER.

CONDITION OF REMAINS: SEE ATTACHED SHEETS.

OTHER MEANS OF IDENTIFICATION: NONE

THIS IS TO CERTIFY that the above cemetery having now been completely disinterred and no conflicting evidence whatsoever having been found, the remains of this deceased are considered adequately identified in accordance with AGRC - EA 01 // 21.

MINOR DISCREPANCIES 1: NONE

REMAINS PREPARED AND PLACED IN ~~CASKET~~ TRANSFER BOX.

DATE: 18 AUGUST 1948 BY: FERRARS D. STEWART, EMBALMER

CASKET SEALED BY	EMBALMER (Signature)
JOHN A. BRICKLEY, EMB. SUPV.	JOHN A. BRICKLEY, EMB. SUPV.

CASKET BOXED AND MARKED	~~SHIPPING ADDRESS VERIFIED BY~~
DATE: 19/11/48 BY: ORVILLE W. BILLINGS CLERK RECORDER	ALL TAGS, PLATES, AND MARKINGS VERIFIED BY E. C. CRIST, MAJ. CAC.

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.

ROBERT W. GANSEL, 1/LT., QMC.
SIGNATURE OF GRS INSPECTOR

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

QMC FORM REV 15 MAR 46 1194 HN

Declassified in accordance with D.O. 13526

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM	TO	DATE
USMC MARGRATEN, HOLLAND	ANTWERP PORT - PIER 140	
KIND OF CONVEYANCE: RAIL	NAME OF CONVOYER: CPL STANLEY J. DUDA RA 32308467	
SIGNATURE OF SHIPPER: LLOYD L. H. MEYER 1/LT., INF 0-1327168	DATE: 10/11/48	SIGNATURE OF RECEIVER: [illegible] 12 NOV 1948

2. SHIPPED

FROM	TO	DATE
AGRC ANTWERP BELGIUM	USAT BARNEY KIRSCHBAUM	
KIND OF CONVEYANCE: VC. 2	NAME OF CONVOYER: [illegible]	
SIGNATURE OF SHIPPER: L E Butler Lt Col Inf	DATE: 7 DEC 1948	SIGNATURE OF RECEIVER: [illegible] 7 DEC 1948

3. SHIPPED

FROM	TO	DATE
	NYPE	
KIND OF CONVEYANCE	NAME OF CONVOYER: W. W. PREISCH LIEUT. COLONEL, TC. PORT TRANSPORTATION OFFICER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER: [illegible] JAN 3 19[illegible]

4. SHIPPED

FROM	TO	DATE
NYPE	Dec #7	
KIND OF CONVEYANCE: TRAIN	NAME OF CONVOYER: Lt. Charles [illegible]	
SIGNATURE OF SHIPPER: W. W. PREISCH LIEUT. COLONEL, TC. PORT TRANSPORTATION OFFICER	DATE: JAN 5 1949	SIGNATURE OF RECEIVER: E. Ingelmon 1st Sgt MC JAN 7 1949

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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

Declassified in accordance with D.O. 13526

MARGRATEN----Z-5-101

CLYDE L. BOWDEN 36884111 PFC

CONDITION OF REMAINS: ADVANCED DECOMPOSITION. FRACTURED L/CLAVICLE, R/TIBIA, FIBULA, RADIUS, ULNA, HUMERUS, L/SCAPULA, SACRUM. PART OF THORACIC CAGE MISSING. SKULL MISSING ALSO CERVICAL VERTEBRAE.

Declassified in accordance with D.O. 13526

MESSAGEFORM

MESSAGE CENTER No.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT

CALLS	STA. SER. No.	PRECEDENCE	TRANSMISSION INSTRUCTIONS	ORIGINATOR	DATE-TIME GROUP
V	NR	012	NY 023-R		

ACTION	INFORMATION	EXEMPT	OPERATING SIGNALS	GROUP COUNT
		WESTERN	UNION	GR

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: *(Originator)*

SECURITY CLASSIFICATION
GOVT PD

ACTION TO:

MILO BOWDEN
DLR AND REPORT ANY CHARGES
25820 14 MILE ROAD RURAL ROUTE 1
BIRMINGHAM MICHIGAN

INFORMATION TO: FROM QMDCC 19263-B BARDEN

PRECEDENCE FOR

ACTION	INFORMATION
DAY LETTER	

☐ ORIGINAL MESSAGE

REFERS TO ANOTHER MESSAGE

IDENTIFICATION	CLASSIFICATION

WE HAVE BEEN ADVISED REMAINS OF THE LATE PRIVATE FIRST CLASS

CLYDE L BOWDEN

ARE ENROUTE TO THE UNITED STATES. OUR RECORDS INDICATE YOU WISH REMAINS DELIVERED

TO DONALD BELL FUNERAL HOME

219 ELM STREET BIRMINGHAM MICHIGAN

WITHIN FORTY EIGHT HOURS AFTER RECEIPT OF THIS MESSAGE PLEASE CONFIRM YOUR ORIGINA

INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS AND FURNISH YOUR CORRECT MAILING ADDRESS BY TELEGRAM COLLECT TO COMMANDING OFFICER COLUMBUS GENERAL DISTRIBUTION DEPOT COLUMBUS OHIO. REPLY IS NECESSARY WITHIN THIS PRIOD SINCE IT WILL NOT BE POSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF FORTY EIGHT HOURS. WHILE DELIVERY O THE REMAINS WILL BE MADE AS SOON AS PRACTICABLE AFTER RECEIPT FACTORS BEYOND OUR CONTROL MAY DELAY DELIVERY OF REMAINS FOR SEVERAL WEEKS. HOWEVER AS SOON AS REMAINS ARE RECEIVED HERE AND IT IS POSSIBLE TO SCHEDULE THEM FOR DELIVERY YOUR FUNERAL DIRECTOR WILL BE NOTIFIED BY TELEGRAM OF RAIL ROUTING AND SCHEDULED TIME REMAINS WILL ARRIVE AT RAILROAD STATION. ALSO HE WILL BE REQUESTED TO FURNISH YOU THIS INFORMATION SO THAT YOU MAY COMPLETE FUNERAL ARRANGEMENTS. THIS TELEGRAM WIL BE SENT AT LEAST THREE DAYS PRIOR TO ACTUAL SHIPMENT FROM THIS DISTRIBUTION CENTER PLEASE INSTRUCT FUNERAL DIRECTOR TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL. REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. IF YOU DESIRE MILITARY HONORS AT FUNERAL YOU SHOULD ASK ANY LOCAL PATRIOTIC OR VETERANS ORGANIZATIONS TO MAKE ARRANGEMENTS. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM. NOTIFY THIS OFFICE OF PATRIOTIC OR VETERANS ORGANIZATION SELECTED BY YOU TO FURNIS MILITARY HONORS.

BOWMAN CO COLUMBUS GENERAL DISTRIBUTION DEPOT COLUMBUS OHIO

SECURITY CLASSIFICATION — AUTHORIZATION

SIGNATURE

ORIGINATING AGENCY

SYMBOL	DATE-TIME GROUP	OFFICIAL TITLE	PAGE	OF
		FRANCIS FAPPIANO CAPT, QMC, Asst AGR Div		

MAILED 12 17 48 AGRD COLUMBUS DISTRIBUTION

WD AGO FORM 11-168
15 JUN 1945

This form supersedes WD AGO Form 11-168, 23 Aug 44, and WD AGO Form 801, 12 Mar 43, which are obsolete.

16—45801-1 ☆ U. S. GOVERNMENT PRINTING OFFICE

Model 1 Rail - Funeral Director Designated

Declassified in accordance with D.O. 13526

WUB23 11 COLLECT

BIRMINGHAM MICH

BOWMAN CO

CARRY OUT PLANS PER ORIGINAL INSTRUCTIONS

MILO BOWDEN 25820 14 MILE ROAD

758A

25820 14

Declassified in accordance with D.O. 13526

INSPECTION CHECKLIST
(FOR USE AT DISTRIBUTION CENTER)

M/023R

NAME	RANK	SERIAL NUMBER
Bowdon, Clyde L.	Pfc.	36884111

SOURCE

CONSIGNEE: Donald Bell Funeral Home, 219 Elm Street, Birmingham, Michigan

SHIPPING CASE – GENERAL APPEARANCE (CHECK ONLY DISCREPANCIES)	
	FINISH (EXTERIOR)
	FINISH (INTERIOR)
	HANDLES
	HANDLE BOLTS
	STENCILING – NAMEPLATE
	HEALTH PERMIT MARKER
	HEALTH PERMIT NUMBER

CONDITION OF SHIPPING CASE (CHECK ONE): [ ] SATISFACTORY [ ] UNSATISFACTORY

REMARKS: Painted

CASKET – GENERAL APPEARANCE (CHECK ONLY DISCREPANCIES)	
	FINISH (EXTERIOR)
	HANDLES AND FASTENINGS
	STENCILING – NAMEPLATE
	CAM LOCKS (SEALING)
	ODOR OR MOISTURE

CONDITION OF CASKET (CHECK ONE): [ ] SATISFACTORY [ ] UNSATISFACTORY

REMARKS: Touched up

ROUTED THROUGH: Suitland Yard

[ ] MORTUARY OPERATING ROOM

[ ] MORTUARY REPAIR SHOP

CONDITION OF REMAINS: [ ] SATISFACTORY [ ] UNSATISFACTORY

NECESSARY DISINFECTION (EXPLAIN)

CASKET REPAIRED	[ ] YES	[ ] NO
CASKET EXCHANGED	[ ] YES	[ ] NO
SHIPPING CASE REPAIRED	[ ] YES	[ ] NO
SHIPPING CASE EXCHANGED	[ ] YES	[ ] NO

REMARKS

TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTOR
			0910	2 Jan 49	

REMARKS

QMC FORM R – 5024 4 MAR 46 LOCAL REPRODUCTION AUTHORIZED

Declassified in accordance with D.O. 13526

AMERICAN GRAVES REGISTRATION DIVISION
COLUMBUS GENERAL DISTRIBUTION DEPOT
COLUMBUS 15, OHIO

SUMMARY SHEET OF CLAIM OR POTENTIAL CLAIM BY FUNERAL DIRECTORS

In accordance with letter Office of the Quartermaster General dated 25 August 1948, file QMGMO, Subject: Discrepancies in Permanent 293 Files, the following information is furnished

_____

_____

To be filled in if claim has been received

1. Name and serial number of deceased: _____
2. Name of claimant: _____
3. Amount claimed: _____
4. Amount allowed (if any): _____
5. Purchase order number (if any): _____

_____

_____

To be filled in if a potential claim exists

1. Name of potential claimant: Donald Bell, Funeral Home, Birmingham, Mich
2. For transportation of remains of Pfc Clyde L. Bowden, USA 293

   Serial 36884111 from Birmingham, Mich

   to Franklin, Mich and return escort to railhead

   if necessary.

_____
Date

for Edward J. Engelman
FRANCIS FAPPIANO
Capt, QMC
OIC, Administrative Branch

FILE
C. T. POWELL
M. & R. BR.

COGD Form GR-19

Declassified in accordance with D.O. 13526

...STER OF DENTAL PA...

36884 111

(1) SURNAME	(2) CHRISTIAN NAME
Bowden,	Clyde L.

(3) RANK	(4) COMPANY	(5) REGIMENT OR STAFF CORPS
Pvt.		2nd. PtR

(6) AGE, YEARS	(7) RACE	(8) NATIVITY	(9) SERVICE, YEARS
18	W	Mich.	7/12

PENTAL IDENTIFICATION RECORD

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.	(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS	(12) RESULTS AND REMARKS

Dental Corps, U. S. A.

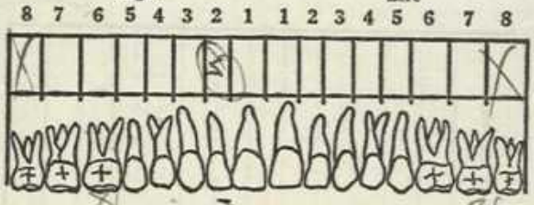
Form 79—Medical Department, U. S. A.
(Revised Feb. 24, 1941)
16—20622

Declassified in accordance with D.O. 13526

*REPORT OF DENTAL SURVEY

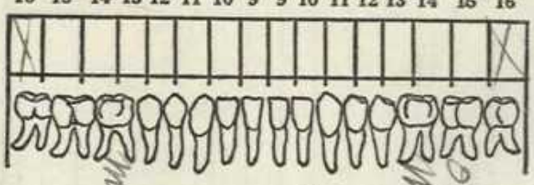
UPPER TEETH

Right 8 7 6 5 4 3 2 1 — Left 1 2 3 4 5 6 7 8



LOWER TEETH

Right 16 15 14 13 12 11 10 9 — Left 9 10 11 12 13 14 15 16



CLASS II

Occlusion mod: Calculus: Slight, Medium, Heavy

Periodontoclasia .....

Dental foci suspected: Yes No

Other conditions .....

Date MAY 6 1944, 19....

M. M. Roberts, Capt.
Dental Corps, U.S.A.

*Restorable carious teeth by O
Nonrestorable carious teeth by /
Missing natural teeth by X

Teeth replaced by denture (horizontal line) X X X

Teeth replaced by fixed bridge

Declassified in accordance with D.O. 13526

REGISTER OF DENTAL PATIENT AT

ASN 36884111

(1) SURNAME	(2) CHRISTIAN NAME	
Bowden	Clyde	L

(3) RANK	(4) COMPANY	(5) REGIMENT OR STAFF CORPS
Pvt.	I	2nd PTR

(6) AGE, YEARS	(7) RACE	(8) NATIVITY	(9) SERVICE, YEARS
18	W	Mich.	5/12

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.	(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS	(12) RESULTS AND REMARKS
Car R-2 M	1944 S May 11	ADL Cl II to IV JRF

Dental Corps, U. S. A.

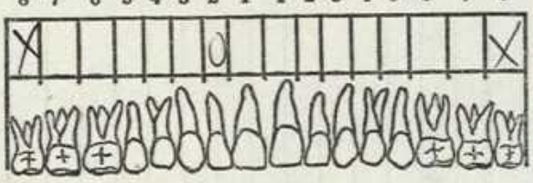
Form 79—MEDICAL DEPARTMENT, U. S. A.
(Revised Feb. 24, 1941)
16—20622

Declassified in accordance with D.O. 13526

*REPORT OF DENTAL SURVEY

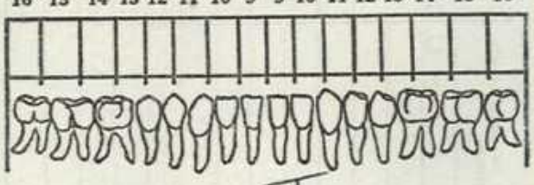
UPPER TEETH

Right 8 7 6 5 4 3 2 1 | 1 2 3 4 5 6 7 8 Left



LOWER TEETH

Right 16 15 14 13 12 11 10 9 | 9 10 11 12 13 14 15 16 Left



CLASS II

Occlusion Mal: Calculus: Slight, (Medium) Heavy

Periodontoclasia none

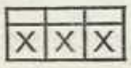
Dental foci suspected: Yes (No)

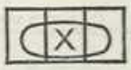
Other conditions

Date May 10, 1944

Capt J R Serrano
Dental Corps, U. S. A.

*Restorable carious teeth by O
Nonrestorable carious teeth by /
Missing natural teeth by X

Teeth replaced by denture (horizontal line) 

Teeth replaced by fixed bridge (oval to include abutments) 

16—20622

Declassified in accordance with D.O. 13526

PART 1 OF 3

AMEX FR DEM PERS REC BR AGO SL MD 8 MAR 49

FOR MAJ SEKOWSKI QM LN REUHNR 57 4 MAR ON CLYDE L BOWDEN 36884111 HT 65 IN WT 122 LBS HAIR BROWN EYES BLUE COMPLEXION RUDDY FRAME LIGHT BORN 15 JUL 25 SHOE SIZE 7 1/2C DENTAL CHART AT INDCTN 2 OCT 43 TEETH MISSING R 8 16 L 8 16 RMKS SHOW UNILATERAL CROSSBITE R UNDERBITE SEVERE 2 FORMS 79 BEING SENT

Declassified in accordance with D.O. 13526

293 Bowden, Clyde L.

NAN
File
29 MAR 1949
P. A. McDonald
Branch

Declassified in accordance with D.O. 13526

TELEPHONE CALL FROM VETERANS ADMINISTRATION

VA BRANCH NUMBER	
CLERK CALLING	
DATE OF CALL	

IDENTIFYING INFORMATION FURNISHED BY THE VETERANS ADMINISTRATION

NAME	GRADE	ARMY SERIAL NUMBER
ORGANIZATION	VA CLAIM NUMBER	

THE VA WANTS INFORMATION OR VERIFICATION ON THE ITEMS CHECKED OR ADDED BELOW

ARMY SERIAL NUMBER	VA CLAIM NUMBER
ORGANIZATION	
INSURANCE	
DATE OF ENLISTMENT OR INDUCTION	
DISCHARGE *(Give date, reason, and character of)*	
NATURE OF DISABILITY	
DATE OF BIRTH	PLACE OF BIRTH
HAS FORM 3101 BEEN FURNISHED ?	DATE
OTHER ITEMS:	

REMARKS:



SURNAME OF CLERK HANDLING CASE IN THIS OFFICE:

THIS FORM IS TO BE FILED WITH THE PAPERS OF VETERAN IF IT FORMS THE BASIS OF A WRITTEN COMMUNICATION PREPARED IN THIS OFFICE.

(Used by Hq. Personnel Records Section and Special Service Unit. See also Arc. Div. Mim. Nos. 42, 154, and 181.)

WD AGO FORM 0511
1 NOV 1944

25-9862-5M

Declassified in accordance with D.O. 13526

COPY

WORLD WAR II DECEASED

REQUEST FOR REIMBURSEMENT OF INTERMENT OR TRANSPORTATION EXPENSES

(Read Explanation on Reverse Side before completing form)

DATE: February 28, 1949

NAME OF DECEDENT (*Last, First, Middle Initial*)	BRANCH OF SERVICE
Bowden, Clyde L.	USAGF

RANK OR GRADE	SERIAL NO.
Pfc.	36884111

TO BE FILLED IN BY CLAIMANT

A. [X] INTERMENT EXPENSES *(Civilian or Private Cemetery)*

B. [ ] TRANSPORTATION EXPENSES *(National or Post Cemetery)*

INSTRUCTIONS TO PERSONS SIGNING THIS FORM

1. This form is NOT to be signed by Funeral Director.
2. ~~Fill in as required and sign in ink.~~
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

I certify that the sum of $ 100.25 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: of cemetery Franklin

CITY OR COUNTY: Oakland

STATE: Michigan

FILL IN THIS STATEMENT IF BOX "B" IS CHECKED

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

AMERICAN GRAVES REGISTRATION DIVISION
COLUMBUS GENERAL DEPOT
COLUMBUS 15, OHIO

SIGNATURE OF CLAIMANT

(Sign original copy only)

ADDRESS (*Street number or RFD, City and State*)

25880 14 mile Rd. R.F.D. #1, Birmingham Michigan

RELATIONSHIP TO DECEDENT

Father

REMARKS

PAID ON VOUCHER 100498
MAR 21 1949
ACCOUNTS OF
W. KNICKERBOCKER, Lt. Col. F. D.

SYMBOL NO. 211-943

QMC FORM REV 5 MAR 48 1236 PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE

16—54738-1

Declassified in accordance with D.O. 13526

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.

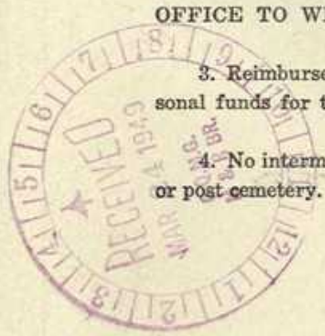
PART B

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.





U. S. GOVERNMENT PRINTING OFFICE 16—54733-1

Declassified in accordance with D.O. 13526

BUDGET BUREAU No. 49-R077.

REQUEST FOR DISPOSITION OF REMAINS

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

DATE: 3-22-48
333-P

Pfc Clyde L. Bowden, 36 884 111
Plot Z, Row 5, Grave 101,
United States Military Cemetery
Margraten, Holland

28 November 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, MILO BOWDEN
(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

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

☐ WIDOW ☐ WIDOWER ☐ SON OVER 21 YEARS OLD ☐ DAUGHTER OVER 21 YEARS OLD

☒ FATHER ☐ MOTHER ☐ BROTHER OVER 21 YEARS OLD ☐ SISTER OVER 21 YEARS OLD

☐ RELATIONSHIP OTHER THAN ABOVE (*Specify*) _____

HAVING FAMILIARIZED MYSELF WITH THE OPTIONS WHICH HAVE BEEN MADE AVAILABLE TO ME WITH RESPECT TO THE FINAL RESTING PLACE OF THE DECEASED DESIGNATED ABOVE, NOW DO DECLARE THAT IT IS MY DESIRE THAT THE REMAINS: (*Please place an "X" in the box opposite the option you have selected.*)

☐ 1. BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS.

☒ 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY

FRANKLIN CEMETERY at FRANKLIN MICHIGAN
(NAME AND LOCATION OF CEMETERY)

☐ 3. BE RETURNED TO _____ (FOREIGN COUNTRY), THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT _____ (LOCATION OF 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.*)

none

CODED 26/4/48 Bryan 31 MAR

OQMG FORM 14 NOV 1946 345 MILITARY 16—50411-1

G. Fisher

Declassified in accordance with D.O. 13526

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:

SEE BELOW

LAST NAME	FIRST NAME		MIDDLE INITIAL
BELL	DONALD		
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
219 ELM ST	BIRMINGHAM	OAKLAND	MICHIGAN
EXPRESS OFFICE (*Nearest railroad passenger station*)	TELEGRAPH ADDRESS		TELEPHONE No.
AMERICAN Ry EXPRESS BIRMINGHAM MICH	BIRMINGHAM MICH		LONGACRE 5-2497

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			
DONALD BELL			
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
219 ELM ST	BIRMINGHAM 07	OAKLAND	MICHIGAN
EXPRESS OFFICE (*Nearest railroad passenger station*)	TELEGRAPH ADDRESS		TELEPHONE No.
american Ry Express Birmingham Mich	Birmingham Mich		BIRMINGHAM 29

IN CASE OF EMERGENCY THE NAME AND ADDRESS OF THE PERSON NEXT IN LINE OF KINSHIP AFTER ME, AS SET FORTH IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," IS:

LAST NAME	FIRST NAME	MIDDLE INITIAL	RELATIONSHIP TO DECEASED
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY

REMARKS OR ADDITIONAL INSTRUCTIONS (*For additional space use page 4.**)

AS EXPLAINED IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," I AM THE NEXT OF KIN AND THE INDIVIDUAL AUTHORIZED TO DIRECT THE DISPOSITION OF THE SAID REMAINS.

I, the undersigned, DO SOLEMNLY SWEAR (OR AFFIRM) that the statements made by me in the foregoing document are full and true to the best of my knowledge and belief.

Milo Bowden
(SIGNATURE OF NEXT OF KIN)

MILO BOWDEN
(NAME PRINTED OR TYPED)

25820 14 Mile Rd
RR1
(STREET AND NUMBER)

Birmingham Mich
(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 10 day of Jan, 1948, at city (or town) of Birmingham, county of Oakland, and State (or Territory or District) of Michigan

Clint Kirk
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

Notary Public
(OFFICIAL TITLE)

Comm Ex July 29 1950

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

16—50411-1

Declassified in accordance with D.O. 13526

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

LAST NAME	FIRST NAME	MIDDLE INITIAL
BOWDEN	MILO	
RELATIONSHIP TO THE DECEASED: FATHER		
NUMBER AND STREET: 25820 W 14 MILE RD	CITY OR TOWN: BIRMINGHAM	STATE OR COUNTRY: MICHIGAN

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

January 10th 1948
(DATE)

Henrietta D. Craig
(SIGNATURE OF NEXT OF KIN)

23180 Middlebelt
(STREET AND NUMBER)

Henrietta D. Craig
(NAME PRINTED OR TYPED)

Farmington Michigan
(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)

16—50410-1

Declassified in accordance with D.O. 13526

ADDITIONAL REMARKS AND INSTRUCTIONS

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

Henrietta D. Craig was widow of deceased Clyde L Bowden and has since remarried.

RECEIVED JAN 14 1948 COMG. M&N SEC.

U. S. GOVERNMENT PRINTING OFFICE

Declassified in accordance with D.O. 13526

Pfc Clyde L. Bowden, 36 884 111
Plot Z, Row 5, Grave 101,
United States Military Cemetery
Margraten, Holland

28 November 1947

Mrs. Henerietta D. Bowden
25820 14 Mile Road
Rural Free Delivery #1
Birmingham, Michigan

Dear Mrs. Bowden:

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

Encls.

bk

Declassified in accordance with D.O. 13526

18 October 1946

Mrs. Henerittа D. Bowden
25820 - 14 Mile Road
Rural Free Delivery #1
Birmingham, Michigan

Dear Mrs. Bowden:

The War Department is most desirous that you be furnished information regarding the burial location of your husband, the late Private First Class Clyde L. Bowden, A.S.N. 36 884 111.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Margraten, Holland, plot Z, row 5, grave 101. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located ten miles west of Aachen, Germany, and is under the constant care and supervision of United States military personnel.

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

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

hn

Declassified in accordance with D.O. 13526

14 October 1946

Mrs. Henrietta D. Bowden
25820 14 Mile Road
Rural Free Delivery #1
Birmingham, Michigan

Dear Mrs. Bowden:

The War Department is most desirous that you be furnished information regarding the burial location of your husband, the late Private First Class Clyde L. Bowden, A.S.N. 36 884 111.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Margraten, Holland, plot Z, row 5, grave 101. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located ten miles west of Aachen, Germany, and is under the constant care and supervision of United States military personnel.

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

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

igp

Declassified in accordance with D.O. 13526

IN
APR 14 1947
IDENTIFICATION
SECTION

Declassified in accordance with D.O. 13526

RESTRICTED

Graves Registration Form No. 1 (Revised 1 Sept. 1943) 338

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

31 March 1945
Date

Bowden, Last Name — Clyde First — L. Initial — ~~Unk~~ Pfc Rank — x~~36884111~~ 36884111 Serial No.

17th A/B Div 507 Para Inf Regt
Unit — Organization

Near Fluren, Germany — Place of Death — 24 March 1945 Date of Death — KIA Cause of Death

1030-31 Mar 1945 — Time and Date of Burial — US Mil. Cem., Margraten, Holland — Name of Cemetery — vk 645482 Name or Coordinates of Location

101 Grave Number — 5 Row Number — Z Plot Number — Wooden Cross 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?

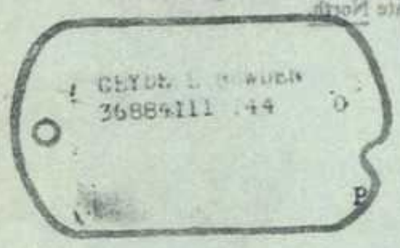
To determine Right or Left use Deceased's Right and Left.

Who is buried on:

Deceased's Right: X Beginning of row (Name) (Serial No.) (Rank) (Organization) (Grave No.)

Deceased's Left: Alonzo H. Greene (Name) 37344207 (Serial No.) Unknown (Rank) 17 A/B Div (Organization) 102 (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 Unknown Name

Address

Religion

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

NONE

RESTRICTED

EDWIN J. DONOVAN
Signature of officer reporting burial
1st Lt. QMC GRS Officer
611 ~~QM~~ Gr. Reg. Co.

FILE

78

file 10/26/45 M. Tonagle

Declassified in accordance with D.O. 13526

IF DECEASED UNIDENTIFIED

Take Fingerprints of Both Hands. If unable to obtain a complete set of Fingerprints, Take Those You Can, and fill in the following:

Height: Laundry Marks:
Weight: Number of Rifle:
Color of Eyes: Wear Glasses?
Color of Hair: Is Tooth Chart Attached?
Race:

(If possible, have medical personnel take a tooth chart, if no medical personnel present, fill in a tooth chart below.) In space below, locate and describe any scars, birthmarks, moles, deformities, etc.

Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc.:

Left Hand: 4, 3, 2, 1, Thumb

Right Hand: 4, 3, 2, 1, Thumb

TOOTH CHART

Deceased's Left / Deceased's Right

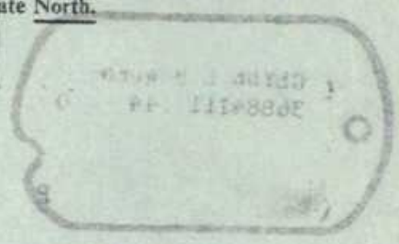
	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Upper	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Lower																

Indicate: missing natural teeth by X; crowns by ○; fillings by □; Bridges by ○ linking anchor teeth; replacements by artificial teeth ⊠

Characteristics:

Other Data:

If this is an Isolated Burial, make a Sketch of the Location, oriented with Permanent Landmarks. If more space needed attach separate sheet. Indicate North.



AG P BR HQ 5/K 122560

Declassified in accordance with D.O. 13526

SENSITIVE SURFACE - HANDLE EDGES ONLY

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

REPORT OF DEATH DATE 17 Apr 45
Jad 2831

FULL NAME	ARMY SERIAL NUMBER	GRADE
293 Bowden, Clyde L.	36884111	Pfc.
HOME ADDRESS	**ARM OR SERVICE**	**DATE OF BIRTH**
Birmingham, Mich.	Infantry	15 Jul 25
PLACE OF DEATH	**CAUSE OF DEATH**	**DATE OF DEATH**
European Area	Killed in action.	24 Mar 45
STATION OF DECEASED	**DATE OF ENTRY ON CURRENT ACTIVE SERVICE**	**LENGTH OF SERVICE FOR PAY PURPOSES** (YEARS / MONTHS / DAYS)
European Area	2 Oct 43	

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)
Mrs. Heneritta D. Bowden, wife, 25820 14 Mile Rd., RFD #1, Birmingham, Mich.

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)
Henrietta Bowden, wife, Same as above.
Gladys, Bowden, mother, Same as above.
Milo Bowden, 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

[X] BATTLE [ ] NON-BATTLE

*Combat Infantryman entitled to additional pay for parachute duty. Source and date of order number will be furn. when rec'd.

The individual named in this report of death is held by the War Dept. to have been in a missing in action status from 24 Mar 45, until such absence was terminated on 9 Apr 45, when evidenceconsidered sufficient to establish the fact of death was rec'd by the Secretary of War from the Commanding General, European Area.

FILE
APR 20 1945
VE

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

BY ORDER OF THE SECRETARY OF WAR:
James A. Ulio
ADJUTANT GENERAL

WD AGO FORM 52-1
1 FEBRUARY 1945

THIS FORM SUPERSEDES WD AGO FORM 52-1, 1 DECEMBER 1944, WHICH MAY BE USED UNTIL EXISTING STOCKS ARE EXHAUSTED.

Declassified in accordance with D.O. 13526

Declassified in accordance with D.O. 13526

461,635 A

SENSITIVE SURFACE - HANDLE EDGES ONLY

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

REPORT OF DEATH DATE 17 Apr 45 Jun 2851

FULL NAME	ARMY SERIAL NUMBER	GRADE
Bowden, Clyde L.	36684111	Pfc.
HOME ADDRESS	**ARM OR SERVICE**	**DATE OF BIRTH**
Birmingham, Mich.	Infantry	15 Jul 25
PLACE OF DEATH	**CAUSE OF DEATH**	**DATE OF DEATH**
European Area	Killed in action.	24 Mar 45
STATION OF DECEASED	**DATE OF ENTRY ON CURRENT ACTIVE SERVICE**	**LENGTH OF SERVICE FOR PAY PURPOSES** (YEARS / MONTHS / DAYS)
European Area	2 Oct 43	

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)
Mrs. Heneritta D. Bowden, wife, 25820 14 Mile Rd., RFD #1, Birmingham, Mich.

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)
Henrietta Bowden, wife, Same as above.
Gladys, Bowden, mother, Same as above.
Milo Bowden, 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

[X] BATTLE [ ] NON-BATTLE

*Combat Infantryman entitled to additional pay for parachute duty. Source and date of order number will be furn. when rec'd.

The individual named in this report of death is held by the War Dept. to have been in a missing in action status from 24 Mar 45, until such absence was terminated on 9 Apr 45, when evidence considered sufficient to establish the fact of death was rec'd by the Secretary of War from the Commanding General, European Area.

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

BY ORDER OF THE SECRETARY OF WAR:

James A. Ulio

ADJUTANT GENERAL

WD AGO FORM 52-1
1 FEBRUARY 1945

THIS FORM SUPERSEDES WD AGO FORM 52-1, 1 DECEMBER 1944, WHICH MAY BE USED UNTIL EXISTING STOCKS ARE EXHAUSTED.

Declassified in accordance with D.O. 13526

BOWDEN, Clyde L Pfc KIA

SHIPPED 31 Jul 45

K.C.List # 20 Sheet # 33

CTN (659-28)

461 635

Declassified in accordance with D.O. 13526

461635

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

—BATTLE CASUALTY REPORT

AG 201	NAME	GRADE	DATE CAS. REPORT RECEIVED
	BOWDEN CLYDE L 36 884 111	PFC HUS	EMA

NAME AND ADDRESS OF E. A.	DATE TELEGRAM SENT
MRS HENERITTA D BOWDEN 25820 14 MILE ROAD [redacted] R F D 1 BIRMINGHAM MICHIGAN	5 APRIL 1945

THE INDIVIDUAL NAMED BELOW DESIGNATED THE ABOVE 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

RELATIONSHIP HUSBAND

GRADE	NAME	SERIAL NUMBER	ARM OR SERVICE	REPORTING THEATRE	F OR J STATUS	SHIPMENT NUMBER
PFC	BOWDEN CLYDE L	36884111	INF	ETO	2	091

HAS BEEN TYPE OF CASUALTY	PLACE OF CASUALTY	DATE OF CASUALTY DAY	MONTH	YEAR	CASUALTY CODE
MISSING IN ACTION	IN GERMANY SINCE	24	MAR	45	9

IF FURTHER DETAILS OR OTHER INFORMATION ARE RECEIVED YOU WILL BE PROMPTLY NOTIFIED

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

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 [illegible] REVIEWED BY Chamt

DISTRIBUTION "A" ☐ 20 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.

W.D. A.G.O. Form 0365 # JANUARY 1945 — This form supersedes W.D. A.G.O. Form 0365, 16 June 1944, and W.D. A.G.O. Forms 802-1, 802-3, 802-4, of 1 February 1944, and 802-5, 802-6, 1 August 1944, which may be used until existing stocks are exhausted.

Declassified in accordance with D.O. 13526

461,635

RTB:LD:tn
October 19, 1945

Mrs. Henrietta D. Bowden
25820 14 Mile Road
R. F. D. # 1
Birmingham, Michigan

Dear Mrs. Bowden:

The Army Effects Bureau has received from overseas some property of your husband, Private First Class Clyde L. Bowden.

This property, consisting of a few small items, is being sent you.

If, for some reason, it has not been received at the expiration of thirty days from this date, please notify me so that tracer may be instituted.

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

Yours very truly,

R. T. BROWN
1st Lt., QMC
Chief, Adm. Division

SCREENED
6-8-78 RK

Declassified in accordance with D.O. 13526

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT Mrs. Henrietta D. Bowden

SHIP TO: 25820 14 Mile Road

PFC Clyde L. Bowden R. F. D. # 1

Effects of 36834111 Birmingham, Michigan

Name

ASN 461,635 D

Case No.

Wt.

DATE 19 October 1945

L. Dinwiddie:tn

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:

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

REMARKS

SHIP DAMAGED ITEMS

Franked 24 1945
Est. Exp. Chgs.____
Est. Frt. Chgs.____
No. of package____

Shipping Clerk

Eff. QM Form 14 (26 Dec 44)

Declassified in accordance with D.O. 13526

401635

EFFECTS INVENTORY
ARMY EFFECTS BUREAU

ATTACHMENTS	
X	INBOUND INVENTORY ✓
	G. R. OR SUB GR LABEL
	WILL OR POWER OF ATTY.
1	TALLY IN FORM 43 ✓

STATUS	
	DECEASED
	MISSING
	P. O. W.
	ABANDONED
	UNKNOWN

	BAGS, CLOTH OR TRAVEL		BELT		OVERCOATS		
	BELT, MONEY (NO MONEY)		BOOKS, ADDRESS		PAPERS, PERSONAL		
	BILLFOLD (NO MONEY)		BOOKS, PILOT LOG		PENCIL, MECHANICAL		
	BOOKS		BRUSHES		PEN, FOUNTAIN		
	BRACELET, IDENT.		CASE		PHOTOS		
	CAMERAS		CLOTH, WASH		PIPES		
X	CLOTHING ✓		COATS		RINGS		
X	MISC. ARTICLES ✓		FOOTLOCKER		SCARFS		
	RELIGIOUS ARTICLES		FOOTWEAR, PR.		SHIRTS		
	RIBBONS, DECORATION		GLASSES		SOCKS, PR.		
	SHORT SNORTER		GLOVES, PR.		STATIONERY		
	SOUVENIR MONEY		HANDKERCHIEFS		TIES		
	SOUVENIRS		HEADWEAR		TOBACCO		
	TESTAMENTS		JACKETS		TOILET ARTICLES		
	TOWELS & WASHCLOTHS		KITS		TOWELS		
	U. S. MONEY (AMOUNT)		KNIVES		TROUSERS, PR.		
	WATCH		LETTERS		TRUNKS, PR.		
	WINGS		LIGHTERS		UNDERWEAR		

DAMAGED

CONTAINERS ADDRESSED TO
none

INFORMATION
Mrs. Henrietta Bowden
Rt # 1 Fourteen Mile Rd;
Burmingham Michigan

NAME AND STATUS VARIATIONS

CROSS REFERENCE

	CHECK	REC'D BY	NUMBER		BUREAU CHECK
	MONEY ORDER				TRANSMIT ORIGINAL
	BOND		SYMBOL		ORIG. REG. MAIL
	TRAV. CHECK				TO G. A. O.
	FOREIGN CURRENCY		AMOUNT		MUTILATED
	U. S. CURRENCY				TO ISSUING AGENCY

DATE

BANK OR PLACE OF ISSUE

PAYEE

REMITTER OR DRAWER

TALLY NO.	ORIG. NO. OF PKGS.	EXAMINING DATE	BOX NO.	SHEET ___ OF ___ SHEETS
		12 Oct 45 ✓		

NAME CLYDE L. BOWDEN ✓ A. S. N. 36884111 ✓

ORGANIZATION RANK PFC ✓ CASE NO. 2d

WAREHOUSE SPACE	EXAMINED BY		DIARY REMOVED
1724	Baw		PHOTO FILM REMOVED
PACKAGE DESCRIPTION / WEIGHT	PACKED BY		MOTION PICTURE FILM REMOVED
#1 pkg	merchant		SHIPPED
	INSPECTED BY		DATE / BY WHOM
	STORED BY		OCT 24 1945

EFF. QM FORM 11 (15 JUNE 45) 360M LA RUE, K. C. 8-17-45

Declassified in accordance with D.O. 13526

ADDITIONAL REMARKS

REMOVALS (*other than G. I.*)	DAMAGES (*List type of damage-extent*)
	swim trunks slightly rust stained
	wrist watch Crystal out won't run

SHORTAGES

U. S. GOV'T CHECK SHORT

	NUMBER
	DATE
	SYMBOL
	AMOUNT

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

INVENTORY CLERK

SUPERVISOR

G. I. REMOVED

Declassified in accordance with D.O. 13526

NAME BOWDEN, CLYDE L PFC ----

BAY	PALLET	BOX	TALLY
11	6	11	3414

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
CTN		

ZH. QM Form 48

Declassified in accordance with D.O. 13526

HEADQUARTERS 507TH PARACHUTE INFANTRY
APO 452 U. S. ARMY

~~1 June 1945~~
Date

SUBJECT: Inventory of Personal Effects of:

~~BOWDEN~~ Bowden, ~~Clyde~~ [illegible] ~~Lt~~ ~~Pfc~~, ~~36062111~~
(Last Name) (First Name) (MI) (Rank) (ASN)

TO: Effects Quartermaster, Communication Zone, APO 513, U.S. Army.

The above named individual of ~~Hq Co 1st Bn~~, 507th Prcht Inf.,
was reported Killed In Action about ~~5 April 1945~~ 1944
(Status-Killed, MIA, Hosp. Etc) (Date)

Designated Beneficiary if information readily accessible
Mrs. Henrietta Bowden, (Wife) rt# 1 Fourteen Mile Rd., Birmingham, Michigan

INVENTORY OF EFFECTS

1 Boulava Wrist Watch
1 Tan Bathing Suit
[redacted]
2- PHOTOS

Money in the amount of ~~None~~ has been turned into _____
(Name of finance officer and symbol number) Form WDFD 38 enclosed.

Names and addresses of any Banks in which accounts may be carried:

I certify that the above items constitute all of the effects, secured by me, of the above named individual and that they were forwarded to the Effects Depot by _____ on _____
(~~Army~~, Truck, etc.) about 1 Jun 45
194__.

Name Anthony D Baker
Anthony D. Baker
Rank & ASN 1st Lt 01286007
Organization 507th Prcht Inf.

Any additional pertinent information:

R-E-S-T-R-I-C-T-E-D

Declassified in accordance with D.O. 13526

WFH:LD:tn

Summary Court-Martial
ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT
601 Hardesty Avenue
Kansas City 1, Missouri

Case No. 461,635

Date 19 October 1945

SUBJECT: Report of transactions in disposing of the effects of

Clyde L. Bowden (Name of deceased), 36884111 (Army Serial Number) late a

Private First Class (Grade), Infantry (Organization, Army or Service) who died

on the 24 day of March, 1945, in European Area

TO : The Adjutant General, War Department 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 decedents 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 19 October 1945, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application or affidavit of Henrietta D. Bowden 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, Henrietta D. Bowden (Name of person found entitled)
25820 14 Mile Road
R. F. D. # 1 (Number, Street or Avenue), Birmingham (City, Town or Village) State of Michigan, is the widow (Relationship or Capacity) of the above-named decedent and appears to be entitled to receive his or her effects.

(Signature of Summary Court Officer)

W. F. HEHMAN, Major, QMC
(Name, Rank, Organization)
SUMMARY COURT MARTIAL

Eff. QM Form 75
23 Aug. 1945