293 DENTON, DEVERE D. 32,227,47 6 SGT. INF. EUROPEAN AREA.
(N.W.) 44ch

ORIGINAL

RECEIPT OF REMAINS

HEADQUARTERS, NYPE - DISTRIBUTION CENTER #1, AGRS

DISTRIBUTION CENTER 58th ST. & 1st AVE., BROOKLYN, N.Y ROUTINE

REMAINS CONSIGNED TO: QUACKENBUSH FUNERAL HOME

17 EAST MAIN ST.

PORT JERVIS, NEW YORK

REMAINS OF THE LATE SGT DE VERE D. DENTON ACCOMPANIED BY AN ESCORT WILL BE DELIVERED TO YOU BY MOTOR VEHICLE ~~DURING~~ ABOUT NOON ON WEDNESDAY 1 DECEMBER PLEASE MAKE ARRANGEMENTS TO ACCEPT REMAINS UPON ARRIVAL AND PLEASE NOTIFY THE NEXT OF KIN OF THE DATE AND TIME OF ARRIVAL.

ESCORT: CPL ARMAND SLOUILLETTE
ER 32 999 019
DET. #5, 1300 ASU

G. H, BARE

COLONEL, QMC

NAT
FILE
RECORDS ANNOTATED
DATE JAN 31 1949
NAME Dickson
R & R BR.

I, the undersigned, do hereby acknowledge receipt of the remains of the above-named deceased this 1 (Day) day of DECEMBER (Month), 1948

Cpl. Armand P. Brouillette
(Witness (Escort))
32999019 F.F.F.

Quackenbush Funeral Home
(Consignee)
Willis R. Quackenbush

QMC FORM REV 5 MAR 48 1193

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

JS

1

DISINTERMENT DIRECTIVE

86-95

SECTION A — NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER: 3504 00710			DATE: 15 (DAY) 07 (MONTH) 48 (YEAR)
NAME: DENTON DE VERE D	SERIAL NUMBER: 32227476	RANK: SGT	ARM: 1
			DATE OF DEATH: DAY / MONTH / YEAR
CEMETERY: ANDILLY - LAY ST REMY			1
			DISPOSITION OF REMAINS: CODE 2300 / DIST. PT. 01
PLOT: G / ROW: 6 / GRAVE: 149	COUNTRY: FRANCE		CAUSE OF DEATH: 1

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
QUACKENBUSH FUNERAL HOME 17 EAST MAIN STREET PORT JERVIS, NEW YORK	FRANK DENTON (FATHER) 29 KINGSTON AVENUE PORT JERVIS, NEW YORK

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISTINTERRED

IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY
☐ REMAINS ☐ MARKER	USAGF		NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

SEE ATCHD WORK SHT

MINOR DISCREPANCIES *1*

REMAINS PREPARED AND PLACED IN CASKET

DATE BY

CASKET SEALED BY

EMBALMER (*Signature*)

CASKET BOXED AND MARKED

DATE BY

SHIPPING ADDRESS VERIFIED BY

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

SIGNATURE OF GRS INSPECTOR

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

QMC FORM REV 15 MAR 46 **1194**

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM U3ME ANDILLY, FRANCE	TO CO GASKETING POINT, ANTWERP BELGIUM
KIND OF CONVEYANCE RAIL	NAME OF CONVOYER PFC HERMAN D. SHARROCK
SIGNATURE OF SHIPPER ELMO R KING 1st Lt Inf — DATE	SIGNATURE OF RECEIVER — DATE -5 OCT 1948

2. SHIPPED

FROM AGRC ANTWERP BELGIUM	TO USAT CARROLL VICTORY
KIND OF CONVEYANCE VC. 2	NAME OF CONVOYER Captain R.W. Whereatt Transport Comdr
SIGNATURE OF SHIPPER L E Butler Lt Col Inf — DATE 29 OCT 1948	SIGNATURE OF RECEIVER K W Whereatt — DATE 29 OCT 1948

3. SHIPPED

FROM	TO WYPE
KIND OF CONVEYANCE	NAME OF CONVOYER
SIGNATURE OF SHIPPER — DATE	SIGNATURE OF RECEIVER for W. W. PREISCH LIEUT. COLONEL, TC. PORT TRANSPORTATION OFFICER — DATE

4. SHIPPED

FROM WYPE	TO Q Col
KIND OF CONVEYANCE TRAILER	NAME OF CONVOYER H O Young
SIGNATURE OF SHIPPER W. W. PREISCH LIEUT. COLONEL, TC. PORT TRANSPORTATION OFFICER — DATE NOV 17 1948	SIGNATURE OF RECEIVER H. O. YOUNG Captain, QMC — DATE NOV 18 1948

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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

1

DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER:

DATE: DAY | MONTH | YEAR

NAME	SERIAL NUMBER	RANK	ARM	DATE OF DEATH
DENTON DEVERE D	32227476	SGT	1	DAY | MONTH | YEAR

CEMETERY:

DISPOSITION OF REMAINS: CODE | DIST. PT.

PLOT	ROW	GRAVE	COUNTRY
G	6	149	ANDILLY FRANCE

CAUSE OF DEATH:

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE:

NAME AND ADDRESS OF NEXT OF KIN:

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED
DENTON DEVERE D	32227476	Sgt		12 JULY 1948

IDENTIFICATION TAG ON: [ ] REMAINS [X] MARKER

ORGANIZATION:

RELIGION: P

IDENTIFICATION VERIFIED BY: John. G WEST, Embalmer. NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: MILITARY CLOTHING

CONDITION OF REMAINS: FRACTURED LEFT SCAPULA, CRUSHED SKULL..COMPLETE.SMALL AMOUNT OF DECOMPOSED TISSUE.SKELETAL STATE

OTHER MEANS OF IDENTIFICATION: NONE

MINOR DISCREPANCIES 1: NO IDENTIFICATION TAG FOUND WITH REMAINS.

REMAINS PREPARED AND PLACED IN ~~CASKET~~ transfer box

DATE 13 JULY 1948 BY JOHN G WEST EMBALMER John G. West

CASKET SEALED BY: ELLIS P. THOMAS EMB SUPV.

EMBALMER (Signature): ELLIS P. THOMAS EMB. SUPV.

CASKET BOXED AND MARKED

DATE 15/10/48 BY J. HADDAD CLERK RECORDER

SHIPPING ADDRESS VERIFIED BY: All markings, plates and tags verified by: F. R. McKenzie

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

Elmer C Norum

ELMER C NORUM 1st Lt Inf 527 QM SV CO

SIGNATURE OF GRS INSPECTOR

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

QMC FORM REV 15 MAR 46 1194

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

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

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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

CASE NO	INSPECTION CHECK LIST	SRCE NO. 1196

NAME OF DECEASED (*Last, First, Middle Initial*)	BRANCH OF SERVICE	RACE	RELIGION	SEX	DATE
DENTON DE VERE D	GF	W		M	

RANK OR GRADE	SERIAL NUMBER	CONSIGNEE
SGT	32 227 476	QUACKENBUSH FUNERAL HOME 17 EAST MAIN ST PORT JERVIS NY

SHIPPING CASE—GENERAL APPEARANCE (*Check ONLY Discrepancies*)

- [ ] FINISH (*Exterior*)
- [ ] FINISH (*Interior*)
- [ ] HANDLES
- [ ] HANDLE BOLTS
- [x] STENCILING—NAME PLATE
- [ ] HEALTH PERMIT MARKER
- [ ] HEALTH PERMIT NUMBER

CONDITION OF SHIPPING CASE (*Check One*): [x] SATISFACTORY [ ] UNSATISFACTORY

REMARKS: Name Stenciling put on Shipping Case J.N.

CASKET—GENERAL APPEARANCE (*Check ONLY Discrepancies*)

- [x] FINISH (*Exterior*)
- [ ] HANDLES AND FASTENINGS
- [ ] STENCILING—NAME PLATE
- [ ] CAM LOCKS (*Sealing*)
- [ ] ODOR OR MOISTURE

CONDITION OF CASKET (*Check One*): [x] SATISFACTORY [ ] UNSATISFACTORY

REMARKS: Abrasions on Casket sanded and grained over with paint Casket cleaned and polished J.N.

ROUTED THROUGH

[ ] MORTUARY OPERATING ROOM

CONDITION OF REMAINS: [ ] SATISFACTORY [ ] UNSATISFACTORY

NECESSARY DISINFECTION (*Explain*)

[ ] REPAIR SHOP

CASKET REPAIRED: [ ] YES [ ] NO

CASKET EXCHANGED: [ ] YES [ ] NO

SHIPPING CASE REPAIRED: [x] YES [ ] NO

SHIPPING CASE EXCHANGED: [ ] YES [ ] NO

REMARKS: plastic wood sanding

TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTOR
				11-24-48	John Milk

REMARKS: Painted 11-24-48 Final Inspection

QMC FORM 4 MAR 48 **1251** Replaces QMC Form R-5054, which is obsolete.

16—54755-1 U. S. GOVERNMENT PRINTING OFFICE

WU173 14 COLLECT

PORT JERVIS NY NOV 11 1039A

COL G H BARE

DISTR CTR ONE NYPOE

REMAINS SGT DEVERE D DENTON THIS CONFIRMS TELEGRAM

RECEIVED NO CHANGE IN ARRANGEMENTS

FRANK DENTON

1118A.

DISTRIBUTION CENTER #1
NEW YORK PORT OF EMBARKATION
BROOKLYN, NEW YORK

I certify that this message is on official business and that its transmission with a lower precedence, or by air mail, regular mail, or scheduled messenger would be prejudicial to the public interest.

JAMES McCARTHY
Major, TC
Admin O, AGR Div.

FRANK DENTON

29 KINGSTON AVE

PORT JERVIS NEW YORK

PLEASE BE ADVISED THE REMAINS OF THE LATE **SGT DE VERE D. DENTON** ARE ENROUTE TO THE UNITED STATES. OUR RECORDS INDICATE YOU WISH REMAINS DELIVERED TO **QUACKENBUSH FUNERAL HOME, 17 EAST MAIN ST., PORT JERVIS, NEW YORK**

WE CANNOT GIVE A DEFINITE DELIVERY DATE. IT IS EXPECTED THAT AN INTERVAL OF FROM FIVE DAYS TO FOUR WEEKS WILL ELAPSE BEFORE DELIVERY CAN BE EFFECTED. YOUR FUNERAL DIRECTOR WILL BE NOTIFIED BY TELEGRAM THREE DAYS PRIOR TO DELIVERY GIVING DATE AND TIME REMAINS WILL ARRIVE AT RAILROAD STATION. PLEASE INSTRUCT FUNERAL DIRECTOR TO ACCEPT REMAINS AT RAILROAD STATION ON ARRIVAL. HE WILL BE REQUESTED TO INFORM YOU SO YOU MAY MAKE FINAL FUNERAL ARRANGEMENTS. REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. SUGGEST YOU ARRANGE WITH LOCAL PATRIOTIC OR VETERANS' ORGANIZATION IF YOU DESIRE MILITARY HONORS AT FUNERAL. PLEASE CONFIRM ABOVE DELIVERY INSTRUCTIONS WITHIN FORTY EIGHT HOURS OF RECEIPT OF THIS MESSAGE BY TELEGRAM COLLECT TO DISTRIBUTION CENTER ONE, NEW YORK PORT OF EMBARKATION OR SUBMIT NEW INSTRUCTIONS. WE REGRET IT WILL BE IMPOSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER EXPIRATION OF THE FORTY EIGHT HOURS. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.

G. H. BARE, COL, QMC

241

DOG

21801

REQUEST FOR REIMBURSEMENT OF INTERMENT OR TRANSPORTATION EXPENSES

(Read Explanation on Reverse Side before completing form)

DATE: 1 DEC. 1948

NAME OF DECEDENT (*Last, First, Middle Initial*)	BRANCH OF SERVICE	TO BE FILLED IN BY CLAIMANT
DENTON DE VERE D	GF	A. ☒ INTERMENT EXPENSES (*Civilian or Private Cemetery*)
RANK OR GRADE: SGT	SERIAL NO.: 32 227 476	B. ☐ TRANSPORTATION EXPENSES (*National or Post Cemetery*)

PAID

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

I certify that the sum of $ 75.00 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: LAUREL GROVE CEMETERY

CITY OR COUNTY: PORT JERVIS

STATE: NEW YORK

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

SIGNATURE OF CLAIMANT: Frank Denton

ADDRESS (*Street number or RFD, City and State*): 27 Kingston Ave Port Jervis N.Y.

RELATIONSHIP TO DECEDENT: Father

REMARKS

J. C. Kovarik
Col., F. D.
Brooklyn, N. Y.

DEC 1948

Sym. 210-344
Sta. 625

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

16—54738-1

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

BUDGET BUREAU No. 49-R277.

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

Per AGO

DeVERE

Sgt. Devere D. Denton, 32 227 476
Plot G, Row 6, Grave 149,
United States Military Cemetery
Andilly, France

28 July 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, Frank Denton
(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.

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

Laurel Grove Cemetery, Port Jervis, New York
(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.)*

Codell V. Hance
6-25-48

Dd Proc, 7-14-48

OQMG FORM 14 NOV 1946 345 MILITARY

16—50411-1

OCT 13

LSS

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	FIRST NAME		MIDDLE INITIAL
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
EXPRESS OFFICE (*Nearest railroad passenger station*)	TELEGRAPH ADDRESS		TELEPHONE No.

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			
Quackenbush Funeral Home			
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
17 East Main St.	Port Jervis	Orange	New York
EXPRESS OFFICE (*Nearest railroad passenger station*)	TELEGRAPH ADDRESS		TELEPHONE No.
Port Jervis, New York	Port Jervis, New York		33-184

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.

Frank Denton
(SIGNATURE OF NEXT OF KIN)

29 Kingston Ave.
(STREET AND NUMBER)

Frank Denton
(NAME PRINTED OR TYPED)

Port Jervis, New York
(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 25 day of August, 19 47, at city (or town) of Port Jervis, county of Orange, and State (or Territory or District) of New York

Kenneth G. Drake #824
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

KENNETH G. DRAKE
NOTARY PUBLIC, ORANGE COUNTY
COMMISSION EXPIRES MARCH 30, 1948
(OFFICIAL TITLE)

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

16—50411-1

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 _____ (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
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)

16—50410-1

ADDITIONAL REMARKS AND INSTRUCTIONS

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

U. S. GOVERNMENT PRINTING OFFICE

Post Office Department

OFFICIAL BUSINESS

PENALTY FOR PRIVATE USE TO AVOID PAYMENT OF POSTAGE, $300
(GPO)

POR JERVIS N.Y. AUG 1 3-PM 1947

POSTAGE DUE 2 CENTS

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

16—21556-1

Henton, LeVere H. 32227476 A-2

Form 3547
Rev. 9-46

NOTICE TO SENDER OF FORWARDING ADDRESS

United States Post Office

Port Jervis, N. Y.

_____ (Office), _____ (State)

In accordance with your request you are notified that the matter mailed by you to Mr. Frank Henton

(Key No. _____) 67 Franklin st

is incorrectly addressed because the addressee has removed to 27 Kingston Ave

Port Jervis N.Y.

Forwarding postage required _____ cents.

Matter bearing a pledge to pay forwarding or return postage is forwarded or returned, rated with the postage due. Matter not bearing such pledge is treated as prescribed by the Postal Laws and Regulations.

Respectfully,

POSTMASTER.

NHT 10-4 CH

POSTMASTER.—Fill in amount of forwarding postage ONLY when requested by sender.

16—21556-3 U. S. GOVERNMENT PRINTING OFFICE

File

Andilly, Fr. G 6-149 32227476

JPW

293 Denton, De Vere D.
32,227,476

Sgt. Devere D. Denton, 32 227 476
Plot G, Row 6, Grave 149,
United States Military Cemetery
Andilly, France

28 July 1947

Mr. Frank Denton
67 Franklin Street
Port Jervis, New York

Dear Mr. Denton:

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.

emj

Sgt. Bovey D. Denton, 32 827 476
Plot G, Row 6, Grave 180,
United States Military Cemetery
Andilly, France

28 July 1947

Mr. Frank Denton
87 Franklin Street
Fort Jervis, New York

Dear Mr. Denton:

The people of the United States, through the Congress have authorized the disinterment and final burial of the hero 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 pamphlet, "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 return 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 the receipt by you? This prompt reply will avoid unnecessary delays.

Sincerely,

Incls.

THOMAS B. LARKIN
Major General
The Quartermaster General

cmd

QMGMR 314.6 Yes must
Graves Registration
(European)

2 December 1946

SUBJECT: Burial Records Gen.

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 be changed to read as underscored:

CEMETERY: United States Military Cemetery Andilly, France.

NAME	RANK GRADE	SERIAL NO.	PLOT	ROW	GRAVE	ORGANIZATION
Dacewicz, Edward	PVT	33 896 863	H	3	60	—
Clint, Arthur V.	PFC	17 107 308	K	9	224	Co K, 10th Inf Regt, 5th Inf Div
Denton, Devere D.	SGT	32 227 476	G	6	149	—

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

jew

VD

REPATRIATION
RECORDS BRANCH

23 NOV 46
DATE

NAME DENTON, DEVERE D.
SERIAL NO. 32 227 476
CEMETERY #1 ANDILLY, FRANCE
PLOT G
ROW 6
GRAVE 149

LETTER Fld

RANK

J C Brown
SPECIAL CHECKER

File
2 Dec 46
J Dougherty
Nat

24 September 1946

Mr. Frank Denton
67 Franklin Street
Port Jervis, New York

Dear Mr. Denton:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Sergeant Devere D. Denton, A.S.N. 32 227 476.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Andilly, plot G, row 6, grave 149. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located fifteen miles northwest of Nancy, France, 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

24 September 1946

Mr. Frank Denton
67 Franklin Street
Port Jervis, New York

Dear Mr. Denton:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Sergeant Steven G. Denton, A.S.N. 32 227 476.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Anzilly, plot G, row 6, grave 149. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located fifteen miles northeast of Nancy, France, 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

GRAVES REGISTRATION
FORM No. 1
(Revised 1 Sept. 1943)

RESTRICTED

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

41805

24 Sept.1944
Date

Last Name	First	Initial	Rank	Serial No.
Denton	Devere	D	~~Cpl.~~ SGT	32227476

Serial No. 554

Unit	Organization
Co "C" 31 Tk. Bn.	7TH ARMD - DIV

Place of Death	Date of Death	Cause of Death
Metz France	20 Sept.1944	KIA

Time and Date of Burial	Name of Cemetery	Name or Coordinates of Location
23 Sept.1944 1500	US Mil.Cem.No.1 Andilly France	

Grave Number	Row Number	Plot Number	Type of Marker
149	6	G	Cross

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

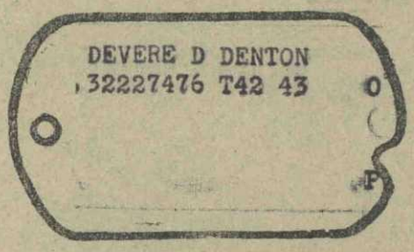
If No Identification Tags
How were remains identified?

What means of identification were buried with the body?

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

	Name	Serial No.	Rank	Organization	Grave No.
Who is buried on:	Robert Paxton	32803567	Ukn.	10 Inf.	148
Deceased's Right:	William Little	37511262	Ukn.	Ukn.	150
Deceased's Left:					

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 Ethel Denton
Name

27 Kingston Ave. Port Jervis, N.Y.
Address

Religion Protestant

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

Signature of Officer or other person reporting burial

WILLIAM C NUGENT
1st.Lt. QMC.

Verified by G.R.S. Officer

JAN 22 1945

H.Q. SOS. 9/5/44. 500M/8/.

Dec #21

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:
Weight:
Color of Eyes:
Color of Hair:
Race:

Laundry Marks:
Number of Rifle:
Wear Glasses?
Is Tooth Chart Attached?

(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: Thumb, 1, 2, 3, 4

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

TOOTH CHART

	Deceased's Right															Deceased's Left	
Upper	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
Lower	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	

Indicate: missing natural teeth by ×; 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.

30

WAR DEPARTMENT

THE ADJUTANT GENERAL'S OFFICE

WASHINGTON 25, D. C.

REPORT OF DEATH

DATE 1 November 1944
1s 4627

FULL NAME	ARMY SERIAL NUMBER	GRADE
Ch Denton, DeVere D.	32 227 476	SGT
HOME ADDRESS	**ARM OR SERVICE**	**DATE OF BIRTH**
Port Jervis, New York	Infantry	24 July 1918
PLACE OF DEATH	**CAUSE OF DEATH**	**DATE OF DEATH**
European Area	Killed in Action	14 Sept. 1944
STATION OF DECEASED	**DATE OF ENTRY ON CURRENT ACTIVE SERVICE**	**LENGTH OF SERVICE FOR PAY PURPOSES** (YEARS / MONTHS / DAYS)
European Area	13 March 1942	

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)

Mrs. Ethel Denton, Mother, 27 Kingston Avenue, Port Jervis, New York

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)

Mrs. Ethel Denton, Mother, Same as above.
Mr. Frank Denton, Father, 67 Franklin Street, Port Jervis, New York

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

"The individual named in this report of death is held by the War Department to have been in a missing in action status from 14 September 1944 until such absence was terminated on 21 October 1944, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from the Commanding General, European Area."

Gib

2 NOV 1944

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

[X] BATTLE

[ ] NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR

James A. Reinhart

ADJUTANT GENERAL

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

267069

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

REPORT OF DEATH

DATE 1 November 1944
1s 4627

FULL NAME	ARMY SERIAL NUMBER	GRADE
Denton, DeVere D.	32 227 476	SGT
HOME ADDRESS	**ARM OR SERVICE**	**DATE OF BIRTH**
Port Jervis, New York	Infantry	24 July 1918
PLACE OF DEATH	**CAUSE OF DEATH**	**DATE OF DEATH**
European Area	Killed in Action	14 Sept. 1944
STATION OF DECEASED	**DATE OF ENTRY ON CURRENT ACTIVE SERVICE**	**LENGTH OF SERVICE FOR PAY PURPOSES** (YEARS / MONTHS / DAYS)
European Area	13 March 1942	

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)

Mrs. Ethel Denton, Mother, 27 Kingston Avenue, Port Jervis, New York

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)

Mrs. Ethel Denton, Mother, Same as above.
Mr. Frank Denton, Father, 67 Franklin Street, Port Jervis, New York

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

ARMY EFFECTS BUREAU RECEIVED NOV 6 1944 KCMO

ADDITIONAL DATA AND/OR STATEMENT

"The individual named in this report of death is held by the War Department to have been in a missing in action status from 14 September 1944 until such absence was terminated on 21 October 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. G. O.	F. B. I.	F. O., U. S. A.
2. O. Q. M. G.	O. F. D.	ARMY EFFECTS BUREAU CASUALTY BRANCH FILE
G. A. O.	VET. ADMIN.	A. G. 201 FILE

[X] BATTLE
[ ] NON-BATTLE

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

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

267068

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

—BATTLE CASUALTY REPORT

NAME	SERIAL NUMBER	GRADE	ARM OR SERVICE	REPORTING THEATRE
DENTON DE VERE D	32227476	SGT	INF	ETO

PLACE OF CASUALTY	DATE OF CASUALTY DAY	MONTH	YEAR	FLYING OR JUMPING STAT	TYPE OF CASUALTY	SHIPMENT NUMBER
FRANCE 9	14	SEP	44		MIA	217

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	RELATIONSHIP	DATE NOTIFIED
MRS ETHEL DENTON	MOTHER	19 OCT 44. mab

NO. AND NAME OF STREET—CITY—STATE

27 KINGSTON AVENUE PORT JERVIS, NEW YORK.

REMARKS:

☐ CORRECTED COPY

ARMY EFFECTS BUREAU RECEIVED OCT 24 1944 CMBC

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 [illegible]

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

ACCT. AREA	CASUALTY STATUS	ORIGINAL CAS. DATE DAY	MO.	YR.	MESSAGE NO.	LATEST CAS. DATE DAY	MO.	YR.	REFERENCE AREA	CREW POS.	RESIDENCE STATE	COUNTY	COMP	RACE
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" ☐ 9 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 NO. 0365
16 JUNE 1944

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

GHG:KD:ns
June 23, 1945

IN REPLY REFER TO 367069

Mrs. Ethel Denton
27 Kingston Avenue
Port Jervis, New York

Dear Mrs. Denton:

I have your recent inquiry regarding the personal effects of your son, Sergeant DeVere D. Denton.

It is regretted that the items about which you inquire were not received here. All of his property received at this Bureau has been sent you.

So that you may better understand the difficulties encountered in the recovery of personal effects, I am inclosing an information circular on the subject.

I wish to assure you that in the event additional property is received at a later date, it will be forwarded promptly.

Yours very truly,

HARRY NIEMIEC
2nd Lt. Q.M.C.
Chief, Correspondence Branch

1 Incl--
Form 51

File pm

27 Kingston Ave.,
Pt. Jervis, N.Y.,
June 11th. 1945

Re- 267069

2nd Lt. P.L. Kool,
Army Effects Bureau,
Kansas City, Missouri.

JUN 15 1945

Dear Sir:-

We received two packages from you, of personal effects of our son Sgt. Deverne Denton, killed September 14. 1944. in France.

As our son was killed in every line, as they were going back to rest camp, I would like to know what he came of some his other personals. In this last package, that was only supposed to contain a brief, we also some letters & pictures I had sent him. He had a wallet, and wrist watch, and pen and ring. Due to the way son died, I am wondering why I didn't receive things of his, as others have of their son & this girls husband in the same outfit & they were killed in action.

Any information would be greatly appreciated.

Yours truly,

Mrs Ethel Denton, Mother
of Sgt. Deverne Denton, 32227476

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO: Mr. Frank Denton
27 Kingston Avenue
Port Jervis, New York

Effects of: Sgt. DeVere D. Denton

Name 32227476

ASN 267069-D

Case No.

Wt.

DATE 27 April 1945
JRM:IB:bt

H. Larson
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 Filec Branch, Adm. Div.

File
mt

1 pkg

REMARKS:

FRANKED
Franked MAY 3 1945
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____
No. of packages 1

MK
Shipping Clerk

Eff. QM Form 14 (26 Dec 44)

PACKAGE DESCRIPTION #1 pkg

ARMY EFFECTS BUREAU INVENTORY

Kn. 4/23
267069 US

DECEASED	X
MISSING	
P.O.W.	
ABANDONED	
TALLY NO.	7187
INV. DATE	12 Apr. 45
ORIG. NO. OF PKGS.	1
BOX NO.	2
SHEET	1
OF	1 SHEETS
ORGANIZATION	31 Tk. Bn.

NAME Devere D. Denton
A.S.N. 32227476 RANK Cpt.

	BELT		TOWELS & WASHCLOTHS		WINGS
	BELT, MONEY (NO MONEY)		CLOTHING		BAGS, CLOTH OR TRAVEL
	CLOTH, WASH		BRACELET IDENT.		BILLFOLD, (NO MONEY)
	COATS		BRUSHES		CASE
	FOOTWEAR, PR.		CAMERAS		FOOTLOCKER
	GLOVES, PR.		GLASSES		KIT, SEW, TLT, OR WRITING
	HANDKERCHIEFS	X1	KNIVES		BOOKS
	HEADWEAR		LIGHTERS		BOOKS, ADDRESS
	JACKETS		MISC. INSIGNIA		BOOKS, PILOT LOG
	OVERCOATS		PEN, FOUNTAIN		DIARY (REMOVED FOR DUR
	SCARFS		PENCIL, MECHANICAL		FILMS
	SHIRTS		PIPES		LETTERS
	SOCKS, PR.		RELIGIOUS ARTICLES		PAPERS, PERSONAL
	TIES		RIBBONS, DECORATION		PHOTOS
	TOWELS		RINGS		SHOE SHINE ARTICLES
	TROUSERS, PR.		TOBACCO		SHORT SNORTER
	TRUNKS, PR.		TOILET ARTICLES		SOUVENIRS
	UNDERWEAR		WATCH		SOUVENIR MONEY
					STATIONERY
					TESTAMENTS
					U.S. MONEY (AMOUNT)

REMARKS Mother:
Mrs. Ethel Denton
27 Kingston Ave.,
Port Jervis, N.Y.
* Rusty

ATTACHMENTS | | FORM #54 | | FORM #100
1 Inventory
1 GL.

DAMAGED

C.A.T. None

WEIGHT	
G.I. REMOVED	
SHORTAGE ON REVERSE	
IDENT. TAGS REMOVED	
DIARY REMOVED	
LOCKED STORAGE	
LAUNDRY REMOVED	
FILM REMOVED	

WAREHOUSE SPACE 2249
STORED BY
DATE SHIPPED MAY 3 1945
INVENTORIED BY Hace
PACKED BY Yallaly
CHECKED BY
X #43 OR ADDITIONAL

Eff. OM Form 11 (24 Feb 45)

ADDITIONAL REMARKS

SHORTAGES

U. S. GOVT. CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

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

INVENTORY CLERK

SUPERVISOR

G.I. REMOVED

E[illegible] Form 11 (12 Dec '44)

NAME ~~DENTON~~, DEVERE D CPL 7476

BAY	PALLET	BOX	TALLY
		2	7187

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
GRB		

Eff. QM Form 43

Serial No. 32229476 Name DENTON Devere D

Grade CPL Rank

Organization Inf

Address

Nearest Relative ETHEL DENTON - MOTHER

Address 27 ~~[illegible]~~ KINGSTON AVE.

Killed in Action yes Died of Disease PORT JERVIS NY

Date Hospital

Battle Area Information

Place of Burial US MIL CEM - H

Point of Coordination ANOILLY - FRANCE

Description of Body

Members Missing

Signed SGT Burnmaha

B-6-144

DEVERE D DENTON
32227476 T42 43

(RESTRICTED)
INVENTORY OF PERSONAL EFFECTS

US Mil. Cem. No.1 Andilly, France
24 September 1944
(Date)

SUBJECT: Inventory of Personal Effects of:

Denton, Devere D. Cpl. 32227476
(Last Name) (First Name) (MI) (Rank) (ASN)

TO: Effects Quartermaster, Communication Zone, APO _____ US Army

The above named individual of Unk (Unit)

31 Tk. Bn. (Organization) was reported KIA (Status-Killed, MIA, Hospitalized, etc.) about 20 September (Date) 1944.

Designated Beneficiary if information readily accessible _____

- -

INVENTORY OF EFFECTS

Class 1

1 Knife ✓
1 Ring ✓
1 Cig. lighter ✓
6 Letters ✓
7 Photos ✓

NO CURRENCY

Money in the amount of _____ 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 _____ (Rail, Truck, etc.) on _____ (Date) 1944.

Name W O Nugent ~~WILLIAM O NUGENT~~

Rank & ASN 1st Lt.

Organization QMC

Any additional pertinent information:

267069

JRM:IB:bt
April 27, 1945

Mr. Frank Denton
27 Kingston Avenue
Port Jervis, New York

Dear Mr. Denton:

The Army Effects Bureau has received some additional property of your son, Sergeant DeVere D. Denton.

This property, consisting of one knife, is 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.

Extending every sympathy, I am

Sincerely yours,

P. L. KOOB
2nd Lt. Q.M.C.
Officer-in-Charge
SJ Unit

83

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mr. Frank Denton
27 Kingston Avenue
Port Jervis, New York

SHIP TO:
Sgt. DeVere D. Denton

Effects of:
Name 32227476
ASN 267069 D
Case No.
Wt.

DATE 21 March 1945
JRM:WA:an

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.

File
my

1 Ctn

REMARKS:

Franked FRANKED APR 2 1945
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____
No. of packages 1

APR 14 1945

Shipping Clerk

Eff. QM Form 14 (26 Dec 44)

267069DL

PACKAGE DESCRIPTION #1 Chr

ARMY EFFECTS BUREAU INVENTORY

DECEASED ☑
MISSING ☐
P.O.W. ☐
ABANDONED ☐

TALLY NO. 6972
INV. DATE 7 March 45
ORIG. NO OF PKGS. 1
BOX NO.
SHEET 1 OF 1 SHEETS
ORGANIZATION Co. C 31st Tank Bn.

NAME De Vere D. Denton
A.S.N. 32227476 RANK Cpl

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

REMARKS no Information
Rechecked

ATTACHMENTS | FORM #54 | FORM #100
2 - Inventory

C.A.T. none

WEIGHT

G.I. REMOVED
SHORTAGE ON REVERSE
IDENT. TAGS REMOVED
DIARY REMOVED
LOCKED STORAGE
LAUNDRY REMOVED
FILM REMOVED

WAREHOUSE SPACE 846
STORED BY
DATE SHIPPED APR 2 1945
INVENTORIED BY Covert & Tuttle
PACKED BY Garwood
CHECKED BY
X BAGS OR ADDITIONAL

EFF. QM Form 11 (24 Feb 45)

ADDITIONAL REMARKS

SHORTAGES

U.S. GOVT. CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

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

INVENTORY CLERK

SUPERVISOR

G.I. REMOVED

Eff. QM Form 11 (24 Feb 45)

NAME

DENTON, DEVERE D. CPL

BAY	PALLET	BOX	TALLY
	1		6972

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
CTN (DAMAGED)		

Eff. QM Form 48

UNCLASSIFIED

ANNEX A

SPECIMEN INVENTORY FORM*

18 September, 1944

SUBJECT: Inventory of Personal Effects of:

Denton, De Vere D. Cpl. 32227476
(Last Name) (First Name) (MI) (Rank) (ASN)

TO : Effects Quartermaster, Communication Zone, APO _____ U.S. ARMY

The above named individual of Company "C" (Unit)

31st Tank Battalion (Organization) was reported killed in action (Status-Killed, MIA, Hospitalized, etc.)

about 16 September 1944 (Date)

Designated Beneficiary if information readily accessible _____

INVENTORY OF EFFECTS

1 pr. Civilian Shoes
Belt
1 pr. Swimming Trunks.
1 Bar with Good Conduct & European Theatre Ribbon
1 Sharpshooter Qualifying Badge with machine gun, submachine gun & tank weapons bars
1 Golfball
1 Prayerbook

* Copies of this form should be reproduced locally, pending availability of supply for issue upon requisition.

UNCLASSIFIED

RESTRICTED

ANNEX A (Cont'd)

Money in the amount of _____ has been turned into

_____ Form [illegible] 38

(Name of Finance Officer and & Symbol Number)

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 Truck. on
(Rail, Truck, etc.)

Sept, 18 1944.

NAME James E. Carey

RANK & ASN 1st Lt. O 101130

ORGANIZATION Co 'C' 31st Tank Bn.

Any additional pertinent information:

RESTRICTED

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

IN REPLY REFER TO 267069

JRM:WA:an
March 21, 1945

Mr. Frank Denton
27 Kingston Avenue
Port Jervis, New York

Dear Mr. Denton:

The Army Effects Bureau has received from overseas some personal effects of your son, Sergeant DeVere D. Denton.

These effects are being forwarded to you in one carton.

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,

P. L. KOOB
2nd Lt. Q.M.C.
Officer-in-Charge
SJ Unit

69

JRM:WA: an

Summary Court-Martial
ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT Case No. 267069
601 Hardesty Avenue
Kansas City 1, Missouri Date 21 March 1945

SUBJECT: Report of transactions in disposing of the effects of

DeVere D. Denton, 32227476 late a
(Name of deceased) (Army Serial Number)

Sergeant, Infantry who died
(Grade) (Organization, Army or Service)

on the 14 day of September, 19 44, 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 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. _____.)

c. Decedent owed undisputed local creditors the sum of $ none, which has been paid by the Summary Court-Martial from funds of decedent. (See inclosed receipt _____, Incl. _____)

d. Disposition of decedent's effects (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 15 March 1945, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application or affidavit of Frank Denton 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, Frank Denton of
(Name of person found entitled)

27 Kingston Avenue, Port Jervis State of
(Number, Street or Avenue) (City, Town or Village)

New York, 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)

JOHN R. MURPHY, Colonel, Q.M.C.
(Name, Rank, Organization)
SUMMARY COURT MARTIAL

Eff. QM Form 75

4900

to

4999