#### DEPARTMENT OF THE ARMY

OFFICE OF THE CHIEF OF SUPPORT SERVICES WASHINGTON, D.C. 20315

SPTS-ME Faber, Edmund W. SN 36 314 011

8 November 1966

Mrs. Catherine V. Faber 6710 North Oliphant Avenue Chicago, Illinois 60631

Dear Mrs. Faber:

It is requested you furnish information necessary to complete the inscription authorized to appear on a Government marker for the above named decedent.

The official records show your son served as a Staff Sergeant with Company B, 23rd Armored Infantry Battalion, in the United States Army. This service may be shown in either manner listed below for your preference.

S SGT US ARMY \_\_\_\_ (or) S SGT CO B 23 ARMD INF BN X (Check one only)

YOUR SIGNATURE Mrs Catherine V. Faber

The inclosed envelope is for your convenience in replying. If no answer is received within forty-five days, your application will be filed without action.

Sincerely yours,

Inclosure Envelope

J. W. HELD RADSTONE BRANCH Chief, Headstone Branch Are: 18 NOV 1966 Memorial Division

OCOTSpTS FL 69 (10 Jan 66)

_
•

RECEIVED CONTROL CONTROL CONTROL CONTROL

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

9MC FORM 1194

		1. SHIP	PED	ne Politi
w U.S. M.C. Henri Chape	lle, Felgi	LTER	TO Mage, Belgins (Darge toul)	
<u></u>			NAME OF CONVOYER	racuela
OF CONVEYANCE Truck			R. A. 59670049	
NATURE OF SHIPPER	<del></del>	DATE	SIGNATURE OF RECEIVER	DATE
, ,	4	1/9/47	Mys.	1/9/47
Marle Kan Ray	of FA.		4110 /10	
		2. SHIF		
Liege, Belgium (Bar	rge Loadi	ng Pt)	Antwerp Port-Pier 140	· · · · · · · · · · · · · · · · · · ·
O OF CONVEYANCE Barge-M	<b>SOUW</b>	-	NAME OF CONVOYEROPL. Thomas I. R.A. 42177765	Mc Vicar
NATURE OF SHIPPERCAPE. Pau	1 Mc Gee	DATE	SIGNATURE OF RECEIVER	DATE
0505337	W.I.S.	1/9/47	1966	19.45
			Commer_	
		3. SHII		
M AGRE ANT	WELP 0	GIUN	MONTH SCE A CONNO	ľ"ľ X
D OF CONVEYANCE	ZEC	<del></del>	WAME OF CONVOYER derson Capt	TC
			1	
NATURE OF SHIPPER Butler 1	Lt Col Int	DATE	SIGNATURE OF RECEIVER	-4 Vet 194
BE Bullet .	- OOI 111	4 DC i 1947		
· · · · · · · · · · · · · · · · · · ·		4. SHI	PPFO	<del></del>
		4, 3111	III.EU	
OM	hooppit it		10 - UPP	
, MC	JOSEPH V.		10 m.y. P.E.	
ID OF CONVEYANCE	<del></del>		10 - UPP	ر مع
ND OF CONVEYANCE	JOSEPH V.		NAME OF CONVOYER Blame	DATE
ID OF CONVEYANCE	OSEPH V.	CONNOLLY CONNOLLY	NAME OF CONVOYER  SIGNATURE OF RESERVER 1 10 KINN 1	DATE 10/02/6
ID OF CONVEYANCE	<del></del>	CONNOLLY CONNOLLY	NAME OF CONVOYER Blame	DATE 102/4/
ID OF CONVEYANCE	OSEPH V.	CONNOLLY CONNOLLY 25 1947	NAME OF CONVOYER  SIGNATURE OF RECEIVER ( MOKINING)  COLONEL C.	DATE 16/27/4/
ON THE PER	OSEPH V.	CONNOLLY CONNOLLY 25 1947	NAME OF CONVOYER  SIGNATURE OF RECEIVER TO MOKING:  TOWN TO COLONIE TO COLONI	DATE 1/27/4/
ON THE PER	OSEPH V.	CONNOLLY CONNOLLY 25 1947	NAME OF CONVOYER  SIGNATURE OF REMARKS  FOR COLONIES COLONIES  TO DC, & Chucage	DATE 1/2/4,
OM  OF CONVEYANCE  SHAPPER  A A A A A A A A A A A A A A A A A A A	OSEPH V.	CONNOLLY CONNOLLY 25 1947	NAME OF CONVOYER  SIGNATURE OF RECEIVER ( MOKINING)  COLONEL C.	PATE 1/2/4,
OM  ND OF CONVEYANCE	OSEPH V.	CONNOLLY CONNOLLY 25 1947 5. SH	NAME OF CONVOYER  SIGNATURE OF RECEIVER  TO  OCTOBER  NAME OF CONVOYER  NAME OF CONVOYER  SIGNATURE OF RECEIVER	LA. DATE
OM  ND OF CONVEYANCE  SNATURE OF SHIPPER  OM  ND OF CONVEYANCE	OSEPH V.	CONNOLLY CONNOLLY 25 1947 5. SH	NAME OF CONVOYER  SIGNATURE OF RECEIVER  TO  OCTOBER  NAME OF CONVOYER  NAME OF CONVOYER  SIGNATURE OF RECEIVER	LA. DATE
OM  ND OF CONVEYANCE	OSEPH V.	CONNOLLY CONNOLLY 5. SH	NAME OF CONVOYER  SIGNATURE OF RECEIVER  TO  OCTOBER  NAME OF CONVOYER  NAME OF CONVOYER  SIGNATURE OF RECEIVER	LA. DATE
OM  OF CONVEYANCE  SNATUBE OF SHIPPER  SNATUBE OF SHIPPER	OSEPH V.	CONNOLLY CONNOLLY 25 1947 5. SH	NAME OF CONVOYER  SIGNATURE OF RECEIVER  NAME OF CONVOYER  NAME OF CONVOYER  SIGNATURE OF RECEIVER  SIGNATURE OF RECEIVER  HIPPED	LA. DATE
OM  OD OF CONVEYANCE  SHATURE OF SHIPPER  SHATURE OF SHIPPER	OSEPH V. OCT  Prima	CONNOLLY CONNOLLY 25 1947 5. SH	NAME OF CONVOYER  SIGNATURE OF RECEIVER  NAME OF CONVOYER  NAME OF CONVOYER  SIGNATURE OF RECEIVER  SIGNATURE OF RECEIVER  SIGNATURE OF RECEIVER	LA. DATE
OM	OSEPH V.	CONNOLLY CONNOLLY 25 1947 5. SH	NAME OF CONVOYER  SIGNATURE OF RECEIVER  NAME OF CONVOYER  SIGNATURE OF RECEIVER  SIGNATURE OF RECEIVER  TO  TO  TO  TO  TO  TO  TO  TO  TO  T	LA. DATE
OM OF CONVEYANCE	OSEPH V. OCT  Prima	CONNOLLY CONNOLLY 25 1947 5. SH	NAME OF CONVOYER  SIGNATURE OF RECEIVER  NAME OF CONVOYER  NAME OF CONVOYER  SIGNATURE OF RECEIVER  SIGNATURE OF RECEIVER  HIPPED	LA. DATE
OM  OM  OM  OM  OM  OF CONVEYANCE  SNATUBE OF SHIPPER!	OSEPH V. OCT  Prima	CONNOLLY CONNOLLY 25 1947 5. SH	NAME OF CONVOYER  SIGNATURE OF RECEIVER  NAME OF CONVOYER  SIGNATURE OF RECEIVER  SIGNATURE OF RECEIVER  TO  TO  TO  TO  TO  TO  TO  TO  TO  T	LA. DATE
OM  OM  OM  ON  ON  ON  ON  ON  ON  ON	OSEPH V. OCT  Prima	CONNOLLY CONNOLLY 25 1947  5. SH	NAME OF CONVOYER  SIGNATURE OF RECEIVER  NAME OF CONVOYER  SIGNATURE OF RECEIVER  NAME OF CONVOYER  NAME OF CONVOYER	DATE DATE
DOF CONVEYANCE  CHATURE OF SHIPPER  CHATURE OF	OSEPH V. OCT  Prima	CONNOLLY CONNOLLY 25 1947  5. SH	NAME OF CONVOYER  SIGNATURE OF RECEIVER  NAME OF CONVOYER  HIPPED  TO  NAME OF CONVOYER  SIGNATURE OF RECEIVER  SIGNATURE OF RECEIVER	DATE DATE
OM	OSEPH V. OCT  Prima	CONNOLLY CONNOLLY 25 1947  5. SH	NAME OF CONVOYER  SIGNATURE OF RECEIVER  HIPPED  TO  NAME OF CONVOYER  SIGNATURE OF RECEIVER  HIPPED  TO  NAME OF CONVOYER  SIGNATURE OF RECEIVER	DATE DATE
OM	OSEPH V. OCT  Print	CONNOLLY CONNOLLY 25 1947  5. SH	NAME OF CONVOYER  SIGNATURE OF RECEIVER  NAME OF CONVOYER  HIPPED  TO  NAME OF CONVOYER  SIGNATURE OF RECEIVER  SIGNATURE OF RECEIVER	DATE DATE
OM  ND OF CONVEYANCE  SNATUBE OF SHIPPER  ROM  ROM  ROM  ROM  ROM  ROM  ROM  R	OSEPH V. OCT  Print	CONNOLLY CONNOLLY 25 1947  5. SH	NAME OF CONVOYER  SIGNATURE OF RECEIVER  HIPPED  TO  NAME OF CONVOYER  SIGNATURE OF RECEIVER  HIPPED  TO  NAME OF CONVOYER  SIGNATURE OF RECEIVER	DATE DATE
OM  OM  OM  OM  OM  ON  ON  ON  ON  ON	OSEPH V. OCT  Print	CONNOLLY CONNOLLY 25 1947  5. SH	NAME OF CONVOYER  SIGNATURE OF RECEIVER  HIPPED  TO  NAME OF CONVOYER  SIGNATURE OF RECEIVER  HIPPED  TO  NAME OF CONVOYER  SIGNATURE OF RECEIVER	DATE
OM  ND OF CONVEYANCE  SNATUBE OF SHIPPER  ROM  ROM  ROM  ROM  ROM  ROM  ROM  R	OSEPH V. OCT  Print	CONNOLLY CONNOLLY 25 1947  5. SH	NAME OF CONVOYER  SIGNATURE OF RECEIVER  HIPPED  TO  NAME OF CONVOYER  SIGNATURE OF RECEIVER  HIPPED  TO  NAME OF CONVOYER  SIGNATURE OF RECEIVER	DATE DATE

#### RECEIPT OF REMAINS

DISTRIBUTION CENTER AGR DIVISION, CHICAGO QUARTERMASTER DEPOT 1819 W. Pershing Road, Chicago 9, III.

> JOHN V. MAY FUNERAL HOME 4553-61 MILWAUKEE AVENUE CHICAGO, ILLINOIS

ROUTINE

REMAINS CONSIGNED TO:

REMAINS OF THE LATE S/SGT. EDMUND W. FABER, #36314011

WILL BE DELIVERED TO YOU ON FRI. 21 NOV. 1947 AT APPROXIMATELY 2:00 P.M.

ACCOMPANIED BY ESCORT TEC 3, DONALD E. PUTNAM

REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS UPON DELIVERY REFER TO

CONTROL NUMBER 458

CARROLL J. GRINNELL LT. COL. Q.M.C.

I, THE SHOEMSIGHED, CO	,,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
THIS 21st DAY OF	<b>Ботембег</b>	, <sub>19</sub> <b>47</b>	JOHN V. MAY FUNERAL HOME
WITNESS (E)	Luliam	A.s.	CONSIGNEE
18-A			

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

ĞΡ

WU A149 59/57 GOVT COLLECT

CHICAGO ILL 25 1111A

AMERICAN GRAVES ADMINISTRATION

CHGO QM DEPOT

REPLY TO YOUR TELEGRAM REGARDING THE LATE STAFF SERGEANT EDMUND FAFER ASN 36314011 CONTROL NUMBER 458 WE WISH REMAINS DELIVERED TO JOHN V MAY FUNERAL HOME 4553-61 MILWAUKEE AVENUE CHICAGO ILLINOIS AND THE NAME OF THE ORGANIZATION WE HAVE SELECTED FOR MILITARY HONOR AT THE FUNERAL IS GLADSTONE POST NUMBER 777 5641 MILWAUKEE AVENUE CHICAGO ILLINOIS STANLEY F FABER.

1145A.

o6314011 458 4553-61 777 5641.

file

SE II CAN TER

MESSAGEFORM	MESSAGE CENTER NO.	TRANSMITTING MEA	NS CRYPTOGRAF	H OR CLEAR TEXT
C431.5		<u> </u>		
CAELS STA, SER. No. ;	PRECEDENCE	TRANSMISSION	NSTRUCTIONS	ORIGINATOR DATE TIME GROUP
ACTION NR	<del>-</del> _:.			
MFORMAT	ION	EXI	MPT OPERATING SIGNALS	GROUP COUNT
FROM: (Originator) AGR DIVISION, CHIC	'1CO ON 10MB NO 100	R SIGNAL CENTER		GR
1819 W. PERSHING I	ED., CHICAGO, 11	L.	SECURITY CLA	SSIFICATION
. W. STANLEY P. P	ARER		PRECEDEN	
. 5104 W. HAMLIN A		Ì	ACTION	INFORMATION
	VB.		ORIGINAL MESSAGE	
CHICAGO 25, ILL.			REFERS TO ANOT	HER MESSAGE CLASSIFICATION
INFORMATION TO:		<u>L</u>	<del></del>	<del></del>
WAR DEPARTMENT WILL DELIVE	R REMAINS OF	LATE 5	SOT REMOVED W PAR	ER \$6334017
			_	
IN NEAR FUTURE. RECORDS OF	THIS OFFICE	INDICATE YO	U WISE REMAINS DE	LIVERED TO
REQUEST IMMEDIATE CONFIDMAN		MALMAURES AV	s., CHICAGO, ILLI	MOIG
REQUEST IMMEDIATE CONFIRMAT				
DIVISION CHICAGO QUARTERMAS	TER DEPOT CH	ICAGO ILLINO	IS. FUNERAL DIRE	CTOR WILL BE
NOTIFIED WHEN REMAINS WILL				-
ARE DESIRED MAKE ARRANGEMEN				
YOUR OWN CHOICE. ADVISE TH		NAME OF OR	SANIZATION SELECT	ED. IN YOUR
TELEGRAM REPLY REFER TO CON	TROL NUMBER	458	AND NAME OF	DECEASED.
Maireon	ET GRENNIN			İ
‡ <b>7</b> → .	200 (S. Cr.) )			
			,	
				İ
				1
				n
•			1.	le
-A			47	
SECURITY CLASSIFICATIO	N ————	SIGNATURE	AUTHORIZATION-	
				1
BOL ORIGINATING AGENCY_	DATE-TIME GROUP	OFFICIAL TITLE	ALCOHOLD TO THE PARTY OF	· <sub>-</sub>
IGO FORM 4.4 4.00 Thir form wounded Till	OCT 24 194	ı		PAGE OF

WD AGO form 1 1-168 This form supersedes WD AGO Form 1 1-168, 23 Aug 44, 25 JR N 1845 1 1-168

ASPECTION	CHECKLIS.
NAME	RANK SERIAL HUMBER
FABER EDMUND W	S SG 36314011
NEXT OF KIN	ADDRESS
SHIPPING CASE - General Appearance	CONDITION OF SHIPPING CASE (Check One)
(Check OMLY Discrepencies)	[ ] SATISFACTORY [ ] UNSATISFACTORY
FINISH (Exterior)	R EM A RK S
FINISH (Interior)	
HANDLES HANDLE BOLTS	<del>_</del>
STENCILING - NAMEPLATE	
STERCILING - NAMEPLATE	
	INSPECTED BY: ON SUMMERS
CASKET - General Appearance	CONDITION OF CASKET (Check, Pre)
(Check ONLY Disorspancies)	[ ] SATI SPACTORY [ ] UNSATI SPACTORY
FINISH (Exterior)	R EM A RK S
HANDLES AND FASTENINGS	
STENCILING - NAMEPLATE	
CAM LOCKS (Sealing)	
ODOR OR MOISTURE	
	INSPECTED DY: PRAL NACASEUN
ROUTED	THROUGH
[ ] MORTUARY OPERATING ROOM	[ ] MORTUARY REPAIR SHOP
CONDITION OF REMAINS	CAST ET REPAIRED 10
SATISFACTORY UNSATISFACTORY	→ Free
NECESSARY DISINFECTION (Baptoin)	CASKET EXCHANGED
	SHIPPING CASE REPARENT
	SHIPPING CHASE LENCHANGED
	REMARKS
TIME DATE SIGNATURE OF MORISCIAM	TIME CONTROL LIGHTURE OF INSPECTING
REWARKS	119
STORAGE LOCATION	PASS. LIST NUMBER
FLOOR SECTION BAY STORAGE NUMBER  S / 08/	PASS. LIST NUMBER
STAMP INCOMING OR OUTGOING	444
INCOMINO	CONTROL NUMBER
INCOMING	458
	<u> </u>

Standard Form No. Form approve Comptroller Gener	ed by ral, U.S.	PUBLIC VOUC	HER FOR PURCH	ASES AND JERVICES	OTHEP THAN P	ERSONAL J		_	
May 26, 19 Amended August	38 -						), (), Vau, N 3u, Vau, No.		
GENERAL AC OFFICE PR		U.S. Depart	(Departme	Array, Chi cago	QM Depot	/28/\i7		PAID BY	
Certified for pa		Voucher prep	ared at 1619	V. Pershin Rd.	Chicago 9				
sum of \$		THE UNITED		(Give place s	nd date)	·			
Comptroller Ge United S		To Stanle	F. Faber	(Payee)					
Ву		Address	unt No. 15	Lio Aymua, Chi	caga.PS, II	1.	(For use	e of Paying Oi	ffice)
		(Enter des	Articles o	r Services r of contract or general s	nnlv	UNIT	PRICE	AMOU	NT
No. and Date of Order	Date of Deliver or Service	Terms	dule, and other inform	nation deemed necessary) ount Cash continuation sheet(s)	Quantit days	Cost	Per	Dollars	Cts.
	77/25/71	Interne	mt empense i - 5 80T - 30 tificate at	for the late at	mund w.			386	
	1				" • "		†	<u>311</u> 75	<u>00</u>
1937	aley	Edm	und u	V. 36314	011				
Shipped from	te	<u> </u>	Weight	Government E	3/L No	[	Total	75	00
		•			(Payee must )				
Formard	convolv	roucher to	Office of		Differences			-1.8.8.0	
			shingtons 25	D.C.			••••••		
Attn:	Hdqrs, A.	G.R.S.	, , , , , , , , , , , , , , , , , , ,	,		fied; correct f	or	75	
M	<u> </u>			D N		or initials)		<del></del>	
ontract No.	<del>-</del>	<u>.</u>	ate	Reg. No.	Date	- 11	invoice Re	ec'd	
		ACCOU		MORANDUM	V. 190	4 OF C	Assist	Se S	-
Appropriation, il project sy	imitation, or rmbol	· ·	Арргор	riation title	V.	Limit'n or		Appropria:	
2111805		667 <del>-</del> 67	Pi00-07	999-999				75,00	·
									•••
			Obligation	COST ACCO	UNT	ОВЈЕ	CTIVE CLA	SSIFICATION	
Allotmest (	ymbol	Amount	Obligations liquidated	Symbol	Amount	Symbo	1	Amoun	t .
	······		-	· · · · · · · · · · · · · · · · · · ·	· <b>,</b>				
			-						
····									
Paid by Check I	No	dated	·	, 19, for \$ <b>75</b> 49	<u> </u>			of the Unit	
Cash, \$.	<del> </del>	, on		, 19 Payee		•••••	iginal only)	•	
e corporate name, as well etary", or "Treasurer", a †15 the ability to cer	I as the capacity in wish the case may be, tify and authority to n in the blank space	hich he signs, must ap approve are combined below "Approved for	pear. For example: "John	me of the person writing the com- Doc Company, per John Smith are only is necessary; otherwise is official title.	Per	••••••	******	******	

#### CERTIFICATE OF INTERMENT EXPENSES

DATE 11-27-47

Ir. Stanley F. Faber, 5104 No. Hamlin Avenue, Chicago 25, Illineis
(Name and address of person inverting interment expenses)

nection with the interment of the remains of the late Amund W. Fabra

PABER, Edmund W. - S Sgt - 36514011 - U S Army
(Grade, Serial Number, & Arm of Service of Decedent)

who died while on active duty with the United States Armed Forces on

Od-16-44

Home of Cometery: All Saints Address: Des Plaines County: Cook State: Illinois

Stanlest. Taber

- NOTE 1. This certificate will be completed in quadruplicate and nigned by the person who engaged the receiving undertaker and is responsible for payment of his bill. It is NOT to be accomplished or signed by the funeral director.
  - 2. Return to:

Commanding Officer
Chicago Quartermaster Depot
1819 West Pershing Road
Chicago 9, Illinois

Att'a: AMERICAN GRAVES REGISTRATION DIVISION

11.26.4795

488

(Control Number)

#### SQUEST FOR DISPOSITION OF REMA 3

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

DATE:

	Komund Row 1			314	011
United	States TrapELL	Mil	itary	rter;	<b>,</b>

OFFICE OF THE QUARTERMASTER GENERAL, MEMORIAL DIVISION, WAR DEPARTMENT, WASHINGTON 25, D. C., it 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 PA of this form.  PART I  I, Stanley F. Faber (Please indicate relationship to the deceased by please of this form)  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 FAMILLARIZED MYSELF WITH THE OPTIONS WHICH HAVE BEEN MADE AVAILABLE TO ME WITH RESPECT TO THE FINAL RESTING PLACE OF THE DECEASIONATED ASOVE, NOW DO DECLARE THAT IT IS MY DESIRE THAT THE REMAINS: (Please place an "X" in the box opposite the option you have selected as the proper box of the proper bo		s Military Comstery		22 Apri	11 1947	
TE.—The next of kin should familiarize himself with the contents of the pamphiet. "Disposition of World War II Armed Forces Daad." Billing 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 OFFICE OF THE QUARTERMASTER GENERAL, MEMORIAL DIVISION, WAR DEPARTMENT, WASHINGTON 25, D. C., is self-addressed postuge-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 PA of this form.  PART I	emri-Chap <sub>E</sub>	At Elizabeth		A	c	
Self-addressed postage-free envelope provided for this purpose.  If you are the next of kin or authorized representative of next of kin and desire to direct the disposition of the remains, please fill in PA    PART		DO NOT WRITE ABOVE	THIS LINE	В	D	
I, Stanley F. Faber  (PLASE PRINT OR TYPE NAME OF NEXT OF KIN)  WIDOW  WIDOWER  BROTHER OVER 21 YEARS OLD  SISTER 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 DECEDISIONATED 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 decided in the proper box.)  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  (MAME AND LOCATION OF CEMETERY)  3. BE RETURNED TO  (FOREIGN COUNTRY)  THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN  PRIVATE CEMETERY LOCATED AT  (LOCATION OF CEMETERY SELECTED)  4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT  (LOCATION OF RATIONAL CEMETERY SELECTED  YES  NO  E NAME OF THE DECEASED. THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (If no corrections are necessary, indicated by inserting the word "NONE" to the space below.)	OFFICE OF T self-addressed If you are the n	HE QUARTERMASTER GEN postage-free envelope provided	this form is fined out and prop BERAL, MEMORIAL DIVISIO for this purpose.	N, WAR DEPARTMENT	of kin, it should be Γ, WASHINGTON	returned to the 25, D. C., in the
WIDOW   WIDOWER   SON OVER 21 YEARS OLD   DAUGHTER OVER 21 YEARS OLD    FATHER   MOTHER   BROTHER OVER 21 YEARS OLD   SISTER OVER 21 YEARS OLD    FATHER   MOTHER   BROTHER OVER 21 YEARS OLD   SISTER OVER 21 YEARS OLD    FATHER   MOTHER 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 DECE 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 in the intermed in a permanent american military cemetery overseas.  1. BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS.  2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY (MAME AND LOCATION OF CEMETERY)  3. BE RETURNED TO (FOREIGN COUNTRY)   THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN PRIVATE CEMETERY LOCATED AT (LOCATION OF RATIONAL CEMETERY SELECTED)  4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT (LOCATION OF NATIONAL CEMETERY SELECTED)  4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY DOCATED AT (LOCATION OF NATIONAL CEMETERY SELECTED)  4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY DOCATED AT (LOCATION OF NATIONAL CEMETERY SELECTED)  4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY DOCATED AT (LOCATION OF NATIONAL CEMETERY SELECTED)  5. MORE OF THE DECEASED. THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (1/ no corrections are necessary, independently interesting the word "NONE" in the space below.)	·	<u>-</u>	PART I			
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 DECEDINATED ABOVE, NOW DO DECLARE THAT IT IS MY DESIRE THAT THE REMAINS: (Place place an "X" in the box opposite the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the option you have selected and the properties of the properties of the option you have selected and the properties of the option you have selected and the properties of the properties of the properties of the properties of the properties of the option you have selected and the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the properti	<i>I</i> ,St	anley F. Faber (PLEASE PRINT OR TYPE	NAME OF NEXT OF KIN)	(Please indicate rela "X" in the proper b	tionship to the decea	sed by placing a
RELATIONSHIP OTHER THAN ABOVE (Specity)  HAVING FAMILIARIZED MYSELF WITH THE OPTIONS WHICH HAVE BEEN MADE AVAILABLE TO ME WITH RESPECT TO THE FINAL RESTING PLACE OF THE DECE DESIGNATED ABOVE, NOW DO DECLARE THAT IT IS MY DESIRE THAT THE REMAINS: (Ploase place an "X" in the box opposite the option you have selected desired and the properties of the united states or any possession or territory thereof for interment by next of kin in a private ceme   Ridgewood Constery, Wilwows Ave. & Contral Ave. Desplaines; Illinois  (RAME AND LOCATION OF CEMETERY)  3. BE RETURNED TO	] widow	r1		oro 🗀	DAUGHTER OVER 21 Y	EARS OLD
HAVING FAMILIARIZED MYSELF WITH THE OPTIONS WHICH HAVE BEEN MADE AVAILABLE TO ME WITH RESPECT TO THE FINAL RESTING PLACE OF THE DECEDESIGNATED 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 CEMETAL AVE. DESPLAINES; Illinois  (RAME AND LOCATION OF CEMETERY)  3. BE RETURNED TO (FOREIGN COUNTRY)  THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN PRIVATE CEMETERY LOCATED AT  (LOCATION OF CEMETERY SELECTED)  4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT  (LOCATION OF NATIONAL CEMETERY SELECTED)  4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT  (LOCATION OF NATIONAL CEMETERY SELECTED)  4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY DOCUMENT 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 NAME OF THE DECEASED, THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (If no corrections are necessary, indicate by inserting the word "NONE" in the space below.)	FATHER	MOTHER	BROTHER OVER 21 Y	EARS OLD	SISTER OVER 21 YEAR	es old
HAVING FAMILIARIZED MYSELF WITH THE OPTIONS WHICH HAVE BEEN MADE AVAILABLE TO ME WITH RESPECT TO THE FINAL RESTING PLACE OF THE DECEDISIONATED 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 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 and the place and "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 (NAME AND LOCATION OF CEMETERY)  3. BE RETURNED TO (FOREIGN COUNTRY)  4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY SELECTED)  4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT (LOCATION OF RATIONAL CEMETERY SELECTED)  4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY are desired by placing an "X" in the proper box yes and located in the selected national cemetery are desired by placing an "X" in the proper box yes and location of the place of the place of the place of the place of the place of the place of the place of the place of the place of the place of the place of the place of the place of the place of the place of the place of "NONE" in the space below.)	RELATIONSHIP OT	HER THAN ABOVE (Specify)				
(LOCATION OF CEMETERY SELECTED)  4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT	Ridgewo	ood Cemetery, Milwoo	(NAME AND LOCATION OF CEN	Ave. Desplaines;	Illinois	_
4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT (LOCATION OF NATIONAL CEMETERY SELECTER (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  NAME OF THE DECEASED, THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (If no corrections are necessary, indicate by inserting the word "NONE" in the space below.)	PRIVATE CEMETER	RY LOCATED AT	(LOCATION	OF CENETERY EN FOREN		·
(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  NAME OF THE DECEASED, THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (If no corrections are necessary, indicate by inserting the word "NONE" in the space below.)	4. BE RETURNED	TO THE UNITED STATES FOR FINA		·		
YES NO  NAME OF THE DECEASED. THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (If no corrections are necessary, indefact by inserting the word "NONE" in the space below.)				(LOC	ATION OF NATIONAL CEME	TERY SELECTED)
	(* 10000 Intidute It I				placing an "X" in th	e proper box)
	E NAME OF THE DECI	EASED, THE SERIAL NUMBER AND C he word "NONE" in the space belo	GRADE ARE CORRECT EXCEPT FOR T	THE FOLLOWING CHANGES: (1	f no corrections are n	ecessary, indicat
		1/	(8)			<del></del>
,			*?**			·
			•			<u></u>

OQMG FORM 345 MILITARY

PAGE 1

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.
AS THE NEXT OF KIN, DO FURTHER DECLARE THAT I	DESIRE THE REMAINS TO BE SENT	TO THE FOLLOWING FUNERAL	DIRECTOR WHO HAS AGREE
PRECEIVE THEM: FULL NAME OF FUNERAL DIRECTOR			
John V. May Funer		COUNTY OF BOOKINGS	STATE OR TERRITORY OF
NUMBER AND STREET 4553-61 Kilwaukee Ave.	Chicago 0	COOK	Illinois
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS		TELEPHONE No.
Chicago, Illinois	Chicago, Ill	inois	Kildare 2115
I CASE OF EMERGENCY THE NAME AND ADDRESS OF THE ORLD WAR II ARMED FORCES DEAD," IS:	: PERSON NEXT IN LINE OF KINSHIP	AFTER ME, AS SET FORTH IN TH	HE PAMPHLET, "DISPOSITION (
LAST NAME	FIRST NAME	MIDDLE INITIAL	RELATIONSHIP TO DECEASED
Fab <b>et</b>	Catherine	T	Mother
NUMBER AND STREET 5104 No. Hamlin Ave.	Chicago	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY Tllinois
KS OR ADDITIONAL INSTRUCTIONS (For additional ap	ace use page 4.*)	/	<u> </u>
		:	
SITION OF THE SAID REMAINS. undersigned, DO SOLEMNLY SWEAR (OR A		•	
SITION OF THE SAID REMAINS. undersigned, DO SOLEMNLY SWEAR (OR A	AFFIRM) that the statements r	made by me in the foregoi	ng document are full and
SITION OF THE SAID REMAINS. undersigned, DO SOLEMNLY SWEAR (OR A	AFFIRM) that the statements r	Made by me in the foregoi	ng document are full and
PLAINED IN THE PAMPHLET, "DISPOSITION OF WORLD WESTION OF THE SAID REMAINS.  The undersigned, DO SOLEMNLY SWEAR (OR A sest of my knowledge and belief.  STATION OF NEXT OF KIM)	AFFIRM) that the statements r	Made by me in the foregoing the second of th	ong document are full and
SITION OF THE SAID REMAINS. e undersigned, DO SOLEMNLY SWEAR (OR A	AFFIRM) that the statements r	Made by me in the foregoi	ong document are full and  NUMBER)
stanley T. Paber  (NAME PRINTED OR TYPED)	AFFIRM) that the statements r	Made by me in the foregoing the street and the stre	ong document are full and  NUMBER)

PAGE 2

10-60411-1

S/Bgt. Bimund V. Faber, 36 314 011
Plot 0, Row 1, Grave 2,
United States Military Comstary
Henri-Chapelle, Belgium

22 April 1947

Mr. Stanley F. Faber 5104 Worth Hemlin Avenue Chicago, Illinois

Boar Mr. Pabor:

Reference is made to the inclosed form "Request for Disposition of Remains" signed by someone other than yourself.

This form was originally sent to you becomes according to the records of the War Department you are the legal next of kin of the above-named deceased and are therefore the only person authorized to direct the final disposition of his remains by signing this form.

There is inclosed for your convenience another copy of the form "Request for Disposition of Remains". Will you therefore, please complete this form in accordance with your desires concerning the disposition of the above-named deceased, sign it yourself, and mail it in the inclosed self-addressed envelope, which requires no postage. Its prompt return will avoid further delay.

Sincerely.

3 Incls.

RICHARD B. COURS Major, QUC Memorial Division

S/Sgt. Edmind W. Faber, 36 314 011 Plot 0; Row 1, Grave 2, United States Military Cometery Monri-Chapelle, Belgium

3 March 1947

Mr. Stanley F. Faber 1542 Vest Thorndale Avenue Chicago, Illinois

Dear Mr. Fabert

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

The enclosed pemphlets, "Disposition of World War II Armed Forces Dead," and "American Cometeries," explain the disposition, eptions and services made available to you by your floverment. If you are the next of kin according to the line of kinship as set forth in the enclosed pemphlet, "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 III 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.

Vill you please complete the enclosed form, "Request for Dispecition 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,

\* Enclosures

1. /Pemphlet (Options)

2. Disposition Form

3. Envelope

4. Pamphlet (Comsteries)

THOUAS B. LANGE Major General

The Quartermester General

Jaber, Edward V. 7/-A.S.H. 36 314 011

16 Jamery 1947

Mr. Stanley F. Faber 1542 West Thorndale Avenue Chicago, Illinois

Deer Mr. Faber:

Inclosed herewith is a picture of the United States Military Cometery Menri-Chapelle, Belgium, in which your son, the late Staff Sergeant Edmand W. Faber, is buried.

It is my sincere hope that you may gain some sclace from this view of the surroundings in which your loved one rests. As you can see, this is a place of simple dignity, neat and well cared for. Here, assured of continuous care, now rest the remains of a few of those heroic dead who fell together in the service of our country.

This cometery will be maintained as a temperary resting place until, in accordance with the wishes of the next of kin, all remains are either placed in permanent American cometeries overseas or returned to the Ecceland for final burial.

FOR THE QUARTESMAPTER GENERAL:

Sincerely yours,

1 Incl Photograph

G. A. MORKAN Brigadier General, QMC Assistant

40

#### WAR DEPARTMENT OFFICE OF THE QUARTER/ASTER OFFICE WASHINGTON 25, D. C.

In keply Refer To CMTTR 314.6 Graves Registration

25 Rownshor, 1946

(Marupana) Malete

SUBJECT: Buriel Records ( X 17 .

TO

· Commanding Officer

Accrican Swave Registration Compani

European Thouter Area API 807, e/o Pertunater New York, New York

1. Request the burial reports and grave markers for the following decedents be changed to read as underscored:

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

FOR THE CUARTERY ASTER GENERAL:

MARTIN G. PILEY

Major, QC Assistant

طلع

## REMITRIATION RECORDS BRANCH

***	. 0 .010
	NOV 1 9 1946
_	DATE Stagt
MANT FABER E	OMUNO W
STRIAL W. 363/40	
CTPTERY Henri Chap	elle #1 Belgium
	FLOT O
	ROW
	CRAVE
H.S.N.  Sig.  vate of shear	t Records to Real
	SPECIAL OHECKER J

# 293 Faher, Edmund 11. (35, 314, 011

Formy 333

Changes made in information on Burisl Reportare from sources listed below:

	760. CA	lauge of	address for
· ·			. 0
			*********
	·	<del></del>	

Officer's Initials

Father's address should be -1542 West Thorndale Hre, Chiago, Illinois

الم العروا

DP390 293 Fabrer Edward W. 363 18011

14 July 1945

Mr. Stanley F. Faber 15h2 West Thorndale Avenue Chicago, Illinois

Dear Mr. Faber:

The War Department is most desirous that you be furnished the burial location of your son, the late Staff Sergeant Edmind W. Faber.

The records of this office disclose that he is interred in the U. S. Military Cometery #1, Henri Chapelle, Belgium, plot O, row 1, grave 2,

This cometery is located approximately 7 miles southwest of Aachen, Germany, and is under the care and supervision of our military personnel.

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

Sincerely yours,

E. B. GREGORY Lieutenant General The Quartermaster deperal

Ju. 14 4 37 PN "E.
MENORIAL DIVISION

N

## CASUALTY BRANCH The Adjutant General's Office Washington,

DL..TII 293

11 Jamesty 1945.

AGPC-G SOL

(18 Dec 44)

MEMORANDUM FOR RECORD

SUBJECT: Change of Address of Emergency Addressee:

A communication has been received from

Fr. Stealey F. Paber,

father of Staff Sorgeant Edward W. Fabor, 36, 314, 611, who was killed

in motion on 16 october 1944 in Belland,

requesting that the records of this office be amended as follows:

FROM

TO

Mr. Stanley F. Faber, (Father), 2644 North Secremento Avenue, Chicago 47, Illinois. Mr. Stanley F. Faber, (Father), 1542 West Thorndale Avenue, Chicago, Illinois.

W. L. DAY

Adjutant General

Copies furnished:
General Accounting Office
Quartermaster General
Social Securiety Board
CG Service Command
Chief, Army War Bond Office
Director, Bureau of Public Relations
Decorations and Awards Branch

CG, Army Air Force
If POW send copy to OPMG
AG 201 file



1 10 mm

RAVES REGISTRATION	i de la companya de la companya de la companya de la companya de la companya de la companya de la companya de				1994
evised I Sept. 1948)	Tours 1	KOK KO	BUKI	AL 19	October 19
	CICIED Land	O INTERNATION	WK 10-1812	.9	6314011
Faber	Edmun	TEACHER TO SEE THE SECOND SECO	·	s/sov - 24	311011 -
Co B	First T31A2	and In I		Runk Underson 7 A	Serial No.
	Unit	16 atolle	1944 PK	Organization	o coma in
Ger many Place of De		16 October 19	) <sub>1</sub>		Head
600, 20 Octobe		Date of I Henri Chanel	-4		of Death IOだったっ
Time and Date of B		Name of Co		Name or Coor	<del></del>
2	1	0			<b>1088</b>
Grave Number	Row Number	P	lot Number	T	ype of Marker
sposition of Identificati	on Tags: Buried wit	h bedy Yes 🔁 No	☐ Attached	to Marker Yes 🔁 No	• 🗖
No Identification T					
How were remain	s recitified t				
What means of	identific <b>ation were</b> bu	ried with the body?			
What means of it o determine Right of			ft.		
o determine Right o Tho is buried on:	r Left use Deceas	sed's Right and Le 34254900	Unk	Unknown	3
o determine Right o Tho is buried on:	or Left use Decease Owen	sed's Right and Le 34254900 Serial No.	Unk Rank	Organization	Grave No.
o determine Right o ho is buried on: eceased's Right:	r Left use Deceas	sed's Right and Le 34254900	Unk		Grave No.
o determine Right of the is buried on: ecceased's Right: ecceased's Left: Signature or Name, Rank	Owen Name Johnson Name	sed's Right and Le  34254900 Serial No. 3701.9490 Serial No.	Rank Pfc Rank  Rank  Pfc  Rank  converge Data when other cation tag is not	Organization Unknown Organization Organization er than officer reporting burial affixed fill in below: Name	Grave No.
o determine Right of the is buried on: ecceased's Right: ecceased's Left: Signsture or Name, Rank	Owen  Name  Johnson  Name  and if possible Organizat	sed's Right and Le  34254900 Serial No. 3701.9490 Serial No.  tion of person furnishing st	Rank Pfc Rank  Rank  Pfc  Rank  converge Data when other cation tag is not	Organization Unknown Organization, er than officer reporting burial affixed fill in below:	Grave No.
o determine Right of the is buried on: ecceased's Right: ecceased's Left:  Signature or Name, Rank  DMUND	Owen  Name  Johnson  Name  and if possible Organizat	sed's Right and Le  34254900 Serial No. 3701.9490 Serial No.  tion of person furnishing st	Rank Pfc Rank  Rank  Pfc  Rank  converge Data when other cation tag is not	Organization Unknown Organization Organization er than officer reporting burial affixed fill in below: Name	Grave No.
o determine Right of the is buried on: ecceased's Right: ecceased's Left:  Signsture or Name, Rank  DMUND W	Owen  Name  Johnson  Name  and if possible Organizate  ABER  43 AB	Serial No.  312514900  Serial No.  370191490  Serial No.  tion of person furnishing at  If print of identifi  Emergency Addre	Pfc Rank Pfc Rank  ewe Data when other cation tag is not sace	Organization Unknown Organization Organization er than officer reporting burial affixed fill in below: Name	Grave No.

HARRI DUBROF of Bier Lether progressoring burial

#### WAR DEPARTMENT

## THE ADJUTANT GENERAL'S OFFICE

WASHINGTON 28, D. C.

REPORT OF DEATH

FULL NAME			DAT	- 8 N		4	
Faber, Edmind W.			1	Web MAL NUMBER 14,011	-	/8gt	
Chicago, Illinois			AND ON A		BAY	10' 44	
European Area	CAUSE OF BEAT		acti	on	BAT	OF DEA	
European Area	<del></del>		DATE OF S		GE .	ENGTH OF	
Mr. Stanley F. Faber (fath	ner) 2644	N. S	<del> </del>			1000	
Catherine V. Faber (mother Stanley F. Faber (father)	a) some as					I	11.
MADET IN LINE OF BUTY OWN MISCONDUCT O	WAS DECEASED ON DUTY STATUS YES	AB4	EHGE EHGE	IN PLYIN	NG PAY	OTHER PA	Y STATUS
	YES NO	YES	No	YES	NO I	XXX	RO.

ADDITIONAL DATA AND/OR STATEMENT

\*Combat Infantryman

Attended the

P. B. I. F. O., U. B. A.

O. O. F. D. GARUALTY BRANCH PILE

VET. ADMIN. A. O. 201 PILE

BY ORDER OF THE SECURTARY OF WAR

MARTANT OFFICE

D. AGO, PORM NO. 82-1, 29 MAY 1844

#### WAR DEPARTMENT

291943

## THE ADJUTANT CANERAL'S OFFICE

WASHINGTON 25, D. C.

REPORT OF DEATH

									DATE	<b>Veb</b>		<del></del>	-
FULL NAI	ME				<u>-</u> -		<del>- 1</del> .		ARMY MAPPLE	LHUMBER	12	Hor	<del>,</del>
	Fat	er, E	dmund	W.					36,31	4,011		3/Sgt	
HOME AD	20144								ARM OR SES	MICE		W- 1-4.	<del>† 44.0.00</del>
	Chi	cago,	ILLi	no1#				}	Infan	try	- 1	Apr	1917
PLACE OF	PEATH					CAU	<b>56 QP PSA</b> TT	н	4 <del>7</del>		144		*******
	Eur	opean	Area				Kille	ed in	actio	n.	14	Oct	1944
#7ATION	OF DECEASE	(D					<del></del>		SUPPLEMENT A	THY ON		LEHETH OF	
	Eur	opean	Area					}	27 Ja	n 194	e		- 1 44
EMERGEN				HIP & ADDRE				<del></del>		<del></del> -		<del></del>	
, <u>"</u>				. Fabe	r (fa	ther)	2544	N. Se	w (v.) Rorama	nto A	70., (	Jhioag I	o 47.
BENEFICE		herin	e 7.	raber ber (f					70		·		
INVEST	IDATION	IK LINE	OF DUTY	OWN HIM	сонрист	WAS DI	CEA 400		O/MERIO BINGE		NO PAY	OTHER P	
MA	DET			L		- CM - DO 1	PERMIT		The second second	Į STA	TUE	) (#PEGN	Y MELOWS

ADDITIONAL DATA AND/OR STATEMENT

\*Combat Infantryman

	COPIES FUI	SKIEHED.	X DATTLE		
8. 4. O.	P. D. I.	F, O., U. S, A,		BY ORDER OF THE SPECIA	TARY OF WAR
1. 0, Q. M. 6,	O. F. D,	ARMY EFFECTS BUREAU CASUALTY BRANCH FILE	NON-BATTLE	Hones	Julian
8. A. O.	VET, ADMIN,	A. G. 201 FILE	,		AMPLIANT STREAM





## ARMY SERVICE FORCES KANSÁS CITY QUARTERMASTER DEPOT

601 HARDESTY AVENUE KANSAS CITY 1, MISSOURI

201,945

IN REPLY REFER TO.....

RTB:H:geo August 1945

Dear Mr. Pabers

I have your recent inquiry regarding the personal effects of your son, Staff Sergeant Edmand W. Faber.

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 preparty is received at a later date, it will be/ forwarded promptly.

Yours very truly,

l Inel--Form 51

HARRY NIMITEC 2nd Lt., QMC Chief, Cerrespondence Branch July 6 1 - 45

Refermander 291943

Shis is to notifey you my change of address new is 510 # h. Hamling old address was 1542 W. Thorndaleg I got a few of my lone effects but mot: his good wrist watch as yet.

Reforms
Stanley F Faber
5104 h. Hamlin Alex
Chicago 25 Illinois.

-

291943

Mr. Stanely F. Faber 1542 W. Thorndale Avenue Chicago 26, Illinois

Dear Mr. Faber:

The Army Effects Bureau has received some additional property of your sop, Staff Sergeant Edmuni W. Faber.

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

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

Extending every sympathy, I am

Sincerely yours.

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

## ARMY SERVICE MORCES

	ORDER FOR SHIPARIT	Mr. Stanley F. Faber
	SHIP TO: 5/Egt. Edward N. Faber	1542 W. Thorndale Avenue
Effects of: Name	36314011 291943 D	Chicago 26, Illinois
ASN Case No.		
76.		
DATE 3 July 1945 GHG:AC:ih		POR: Effocts Quartermaster
Acc Amo Incl.c	ese Bureav Check et. No cunt ese "Valuables" item "Valuables" item(s)	Remove G.I.  Rete discrepancy in Films removed  Diary removed Laundry removed
Accou	nting Branch couse Division Branch, Adm. Div.	
RIMARES:		Franked Est. Exp. Chgs. Ust. Frt. Chgs. Uc. of packages
		Shipping Clark

eff, en e

-	i kak		`.		
	-				
•					
a-21 No. 3/214/	11 . 54	] [d] +	1		
Serial No. 363146 Grade SISS Organization 23	Name F 9 2	Icat	a Dar	•	•
Organization 23	A. T. P.	7#4 4.15	7**		
Address			******		•
Nearest Relative	# P. # # # # * * * * * * * * * * * * * * *	•••••••			
Address					
Address Killed in Action	Died of I	Disquise			•
Date		****			
Battle Area	Information	n			
**************************************	**********				
Place of Burial	4.4.44				
Point of Coordination,					
Description of Body		**********			
Members Missing	94044 4 9 9 7 7 4 9 5 5 4 4 4 6 6 6 4 8 4 6 8 4 6 6 6 9 6 7	<b>** 40 pq pp 20</b> ************************************	*************		
***************************************					
**************************************					
	1.	ODC	f.		
e gr <sub>ess</sub> ament	Signed Signed	D. J. S.Y	Le.		
· · · · · · · · · · · · · · · · · · ·	Signed Jam Capt	Q.My/C	<b>;</b>		
		J			•
		•			

·

.

•

· . ·

.

•

NAME FARDA, ADMIND W 3 FOT 4011

BAY	PALLET	BOX	TALLY
	12		78 3375
TYPE OF PKG.	WHSE	SPACE	INVENTORIED
	{		
GRB		}	
t. QK Form 41	1		

## RESTRICTED IMPORTORY FORM

a <b>n</b> 45

Data

SUBJECT: Inventory of Personal Effects of:

PAREZ 8/8GT 36314011 (Last Hame) (First Mana) (MI) (Rank) (ASN) TO: 300 ots Quartermaster, Communication Zong, APO\_\_\_\_\_ \_US Army The above named individual of 2300 AROD INV BR THE ARMORED DIVISION 16 OCTOBER anization) (Unit) was reported apont. Status (KIA, MIA, Hesp. atc.) Designated Beneficiary if information readily accessible (Date) MOT KINOWN

#### INVENTORY OF BEFEROTS

1 CASE GLASEES
1 POURLAIN PER
1 SEVING KIT
1 RIPLE MARKSMAN MEDAL
2 COLLAR INSIGNIAS
8 NAPSHOTS
1 SOUVENIR PLAG

Money in the amount of has been turned into and symbol number)

Names and addresses of any Banks in which saccome it cartify that the above items constitut: the above named individual and that they were by (Reil, Truck, etc.)

Any additional portirant information:





## ARMY SERVICE FORCES KANSAS CITY QUARTERMASTER DEPOT

801 HARDESTY AVENUE KANSAS CITY 1, MISSOURI

IN REPLY REFER TO

JRM: HA: mb
May 18, 1945

Mr. Stanley F. Paber 1542 W. Thorndale Avenue Chicago 26, Illinois

Dear Mr. Fabor: /

This acknowledges your regent letter relative to the personal effects of your son, Staff Sergeant Edmund W. Faber.

Our records indicate that your son's property was forwarded to your old address, 2644 North Sacramento Avenue, Chicago 47, Illinois, on April 30. If you have not already received this property, it is suggested that you contact your postmaster regarding the forwarding of the package to you.

In the event the effects should be returned to this Bureau, they will be forwarded promptly to your new address.

Yours very truly,

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

1.(1.)) 3

Stanly F. Faber 1542 W. Thorndale G Chicago 26 Dep mag-1-45 Keply 291943 Wear Sir; Please send my sons army or personal effects to our mew address I did change it with the War Deptrome time ago. My new address is 1542 W. Thorndale a Chieago 26, Del. I he old one was 2644 h Sacramento al. Ithank Stanley F. Faber 1542 W. Thorndale as Chicago 26 26

891943

Mr. Stanley F. Faber 2644 North Sacramento Avenue Chicago 47, Illinois

Dear Mr. Faber:

The Army Effects Bureau has received from overseas some personal effects of your son, Staff Sergeant Edmind W. Faber.

These effects are being forwarded to you in one package.

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 dircumstances 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

he

#### ARMY SERVICE FORCES ARMY EFFECTS BUREAU

#### ORDER FOR SHIPMENT

	SHIP TO:	Mr. Stanley F. Faber
		2644 North Secrements Avenue
Effects of: Name	S/Sgt. Edmund W. Faber	Chicago 47, Illinois
ASN	36314011	
Case No.	291945 D	
Wt.		
DATE 27 April JRM:VJ:k		FUR: Effects Quartermaster
Ac A: Inc	lose Bureau Check cct. No nount lose "Valuables" item p "Valuables" item(s)	Remove G.I.  Note discrepancy in  Films removed  Diary removed  Laundry removed
, War	ounting Branch ehouse Division es Granch, Adm. Div.	A Lins
REMARKS:		Franked ANIED  Est. Exp. Chgs. Est. Frt. Chgs. No. of packages  Shipping Clerk

Eff. JM Form 14 (26 Dec 44)

PACKAGE DESCRIPTION	ARMY EFFECTS BUREAU INVE	NYORY	DECEASED AND MISSING
		29/,943	TALLY 7240
<del></del>			* 1417
	• • • • • • • • • • • • • • • • • • • •		ORIG. No.
			OF PKGS.
NAME Edmand W	, taber-		80X NO.
A.S.N.	RANK S/Sa/s		SHEET SHEETS
36314011	3/341		ORGANIZATION .
	· ,		00 B.
BELT	TOWELS & WASHCLOTHS	WINGS	23darmoli
BELT, MONEY (NO MONEY)	CLOTHING BRACELET IDENT.		CLOTH OR TRAVEL
COATS	BRUSHES	CASE	LD, (NO MONEY)
FOOTWEAR, PR.	CAMERAS	E00TL00	
GLOVES, PR. HANDKERCHEEFS	GLI SACE	BOOKS	W.TLT.OR WRITING
HEADNEAR	LIMITED THE LEVEL A	F	ADDRESS
JACKETS OVERCOATS	MISC, INSIGNIA		PILOT LOG (REMOVED FOR DUR
SCARFS	PENCIL, MECHANICAL	FILMS	,
SHIRTS SOCKS, PR.	PIPES RELIGIOUS ARTICLES	LETTERS PAPERS.	PERSONAL
TIES	X RIBBONS, DECORATION	PHOTOS	
TOWELS TROUSERS, PR.	RINGS TOBACCO		INE ARTICLES SNORTER
TRUNKS, PR.	TOILET ARTICLES	SOUVEN	IRS
UNDERWEAR	WATCH	SCUVEN	IR MONEY
		TESTAM	ENTS
V		LaSa W	ONEY (AMOUNT)
			•
		······································	
		<del></del>	
	<del></del>		
	<u> </u>	)	·
· · · · · · · · · · · · · · · · · · ·	700		
	,		
	* <del></del>	<del></del>	· · · · · · · · · · · · · · · · · · ·
REMARKS	ATTACHMENTS	FORM #54	FORM #100
		h - <del></del>	
no Infarma	(April	Inven	tory ? Label.
A Georgian Com Co		Sub-91	P. Label
	<del></del>	IGHT	G.I. REMOVED
		<u> </u> -	<del> </del>
			SHOR TAGE ON REVERSE
Gale To	man hall		IDENT. TAGS REMOVED
none	1/1/	-	DIARY
WAREHOUSE SPACE	STORED BY	TE ON LOOK	REMOVED
1804	APR	3 0 100	LOCKED STORAGE
INVENTORIED BY MC COZ	well a	301945	LAUNDRY REMOVED
PACKED BY /17	CHECKER	Mag OR	PILM REMOVED
Eff. (N. Perm 11 (24 Fec 45)		- Paritianas	<u> </u>

NAME F/

FABER, EDMOND W S SGT 4011

BAY	PALLET	ВОХ		TALLY
		2	^	7260
TYPE OF PKG.	WHSE	SPACE	IN	VENTORIED
P.E.BAG				
QM Form 48	]			

#### RESTRICTED

MEAD CLOTERS AND SEED LOCASTING BACKETTON MEDITORS JAMES ATTENT

7 NOV 44

_	faber Bil		MICHE	Effacts of:	<b>₩</b> 80 <b>%</b> ~	-58514011 · ·
(	Last	Name)	(First Na	me) (MI)	(Rank).	
D:	Effe	cts Quarter	master, Comm	unication Zone, A	APO s71	•
	The a	above named	individual	of <u>Gu</u>	(Unit)	·· •••
274	Azwá	lai on.		was nononted	sۈ 1 nadil	•
	~ (bi	ganization)	)	mas reported	(Status-Kil	led, MEA.
		zed, etc.)		about to Us	(Date)	1944
sig	nated	l Beneficiar	y if infolas	ation readily acc	essible	
		1/	INIM	ORY OF EFFECTS		
	1 -	Marks / was		ORY OF EFFECTS		

#### RESTRICTED

Mone	y in the amou	nt of	None	hes	s been t	urned	into
(Name	e of finance	officer and s	vahol nurber		_ Form	WDFD	<b>3</b> 8
	osed.	The state of the state of	Jacob Hambory				
				•	•		1.
			Unknown	_		_	
secia wa rak	red by me, of		items constitute med individual a Truck	nd that they			
	. 0	ánn nahan ni	(Rail, Tru		<del></del>	_ 011	
7	November	194 <u>4</u> .					
		-	Nam	afferner w.	M.	Ken	

Rank & ASN 1st Lt., 0-441672

Organization 23d Armd Inf. Bn.

Any additional pertinent information:

TO: ARMY EFFECTS BUREAU
KANSAS CITY OM DEPOT
KANSAS CITY, MO., U.S.A.
PERSONAL EFFECTS OF:

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

Case No. 291945

Date 27 April 1945

y 1, Missouri Date 27 April 1945

SUBJECT: Report	of transaction in disp	osing of the effects of	,
	Edmind W. Faber	36314	Oli late a
	Name of decaased)	(Army Ser	ial Mumber)
Sta	ff Sargeent ,	Infantry	who died
	(Grade)	(Organization, Army or S	BIVICO /
on the	16 May of October ,	19 44 , at Buropeen	Area ·
TO : The Adjut	ant General, War Depa	rtment, Washington 25, D.C	•
Mo. pursuant to S.	.O., 228 Hq., KCQM Dep of the effects of the	ary Court-Martial, convene ot, dated 25 September 1944 above-named soldier, or pe	3, for the pur-
		ilow of decedent being breadecedent were forwarded to	
none was coil	lected. (If nothing w	s estate & none, of whas found out or collected, sums owing and collected.)	state "None";
		al creditors the sum of \$\frac{1}{2}\text{t-Martial from funds of decoup.}  Incl.	cedent. (See
has been made by t	the Summary Court-Mert	fects (less money paid creekal by transmittal through found entitled (See Summary	the Quartermaster
•	F	INDING	·
Before a Summa	ry Court-Martial which	o corvened at Kansas City,	Misscuri, on
25 April	1945 purs	uant to Special Orders 223	. Headquarters
		e application or affidavit	
Stanley Y.	in the same of the	for the effects of the al	
		<del></del>	
·	· ·	litary law, now in the pos	session of the
United States, wit	h other relevant evid	e ce, was duly considered;	
Whereupon, thi	is Summary Court-Marti	al finds that under the p	rovisions of
A.W. 112,		I. Faber	of
	(Name of p	erson found entitled)	
3644 North (Number, Stree	Secremento Avenue	(City, Town or Village)	'tState of
			parameter.
Illinois	, is th	e <b>father</b> (Relationship or Ca	of the apacity)
nhava namad dagada	ant and appears to be	•	
anova-imiled decede	me and appears to be	entitled to receive his or	Hat effects.
		(Signature of Summary	Court Officer)
		JOHN R. MURPHY Golon (Name, Rank, Organia	zation)
		SUMMARY COURT MARTI	