

BHR

USMC EPINAL, FRANCE BURIED AT DECEASED'S LEFT JOHN SON HENRY Y. 36119350 SGT

1

DISINTERMENT DIRECTIVE  
DATE REBURIED: 21 OCT '48  
RIGHT: PLOTTED BY NIMBERLY

SECTION A - RAYMOND W. ASHLEY WJG AUS  
NAME AND BURIAL LOCATION OF DECEASED  
DIRECTIVE NUMBER 3515 01070  
DATE 15 06 48  
DAY MONTH YEAR

NAME MC CLURE GEORGE E  
SERIAL NUMBER 38516244  
RANK PFC  
ARM 1  
DATE OF DEATH  
CEMETERY CHAMPIGNEUL CHALONS SUR MARN E  
DISPOSITION OF REMAINS 3502 80  
CODE DIST. PT.  
PLOT A ROW 5 GRAVE 108 COUNTRY FRANCE  
CAUSE OF DEATH 1

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE EPINAL, FRANCE  
NAME AND ADDRESS OF NEXT OF KIN MARTHA L. MC CLURE (MOTHER)  
708 OAK STREET, APT. 9 26 NOV 1948  
SAN FRANCISCO, CALIFORNIA (FLAG SENT)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER RANK DATE OF DEATH DATE DISINTERRED  
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 ATTACHED TENTATIVE DISINTERMENT DIRECTIVES. NAT

MINOR DISCREPANCIES 1  
RECORDS ANNOTATED  
DATE 10 MAR 1949  
NAME DA MAT. HEWS

REMAINS PREPARED AND PLACED IN CASKET transfer box  
DATE BY

CASKET SEALED BY J. EARL TUCKER  
EMBALMER (Signature) J. EARL TUCKER

CASKET BOXED AND MARKED SHIPPING ADDRESS VERIFIED BY All markings, tags & plates verified by: JOHN A FAGAN 1st Lt CAV.  
DATE 18 Oct '48 BY G. LONG

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

SIGNATURE OF GRS INSPECTOR

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



# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

FROM USMC CHAMIGNEUL (FRANCE)		TO C.I.C. USMC EPINAL (FRANCE)	
KIND OF CONVEYANCE RAIL		NAME OF CONVOYER PATIA, CARLO PFC RA6376979	
SIGNATURE OF SHIPPER <i>Dewey R. Bell</i> DEWEY R. BELL 1ST LT. CAV.	DATE 17/9/48	SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE 18-9-48

## 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 ЕВНАУГ ЕВАНСЕ	DATE	SIGNATURE OF RECEIVER МАВТНА Г. МС СЛОВЕ (MOTHER)	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



**DISSENTMENT DIRECTIVE**

Section A		Directive Number		Date
Name & Burial Location of deceased		Day	Month	Year
NAME	SERIAL NUMBER	RANK	ARM	DATE OF DEATH
MC CLURE, George E.	38516244	Pfc		Day Month Year
Cemetery			Disposition of Remains	
Champigneul				
PLOT	ROW	GRAVE	COUNTRY	Code Dist. Pt.
A	5	108	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
MC CLURE GEORGE E	38516244	PFC		18 August 1948
Identification tag on Remains Marker	Organization	Religion	Identification verified by:	
		Unk	William EDunn, Embalmer	Name & Title

Section D. Preparation of Remains for Shipment	
Nature of Burial	Condition of Remains
O.D. Uniform	Skeletal form Multiple fractures Missing skull, and two (2) Mandibles

Other means of Identification:  
 Embossed plate found with remains  
 Embossed plate found with marker

Minor discrepancies:  
 "E" the middle initial is omitted on Embossed plate found with remains

Remains prepared and placed in transfer box	
Date 20 August 1948	By William E Dunn, Embalmer
Casket sealed by	Embalmer (Signature)
Casket Marked	All markings, tags, plates verified
Date	By

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

Philip A Monahan CAPT FA 587 cm Sv Co  
 Signature of GNS Inspector (Gr & Org)

1. Prepare Discrepancy Report GIC Form 1194a for major discrepancies. GIC Form 1194 - This form modified by Hq Third Zone, AGRC, EA, APO 58 US ARMY. Dated 4 March 1948.



243  
12 January 1949

Pfc George E. McClure, ASN 38 516 244  
~~Plot A, Row 18, Grave 44~~  
Headstone: Cross  
Epinal U. S. Military Cemetery

Mrs. Martha L. McClure  
708 Oak Street, Apartment 9  
San Francisco, California

Dear Mrs. McClure:

This is to inform you that the remains of your loved one have been permanently interred, as recorded above, side by side with comrades who also gave their lives for their country. Customary military funeral services were conducted over the grave at the time of burial.

After the Department of the Army has completed all final interments, the cemetery will be transferred, as authorized by the Congress, to the care and supervision of the American Battle Monuments Commission. The Commission also will have the responsibility for permanent construction and beautification of the cemetery, including erection of the permanent headstone. The headstone will be inscribed with the name exactly as recorded above, the rank or rating where appropriate, organization, State, and date of death. Any inquiries relative to the type of headstone or the spelling of the name to be inscribed thereon, should be addressed to the American Battle Monuments Commission, the central address of which is Room 713, 1712 "G" Street, N. W., Washington 25, D. C. Your letter should include the full name, rank, serial number, grave location, and name of the cemetery.

While interment activities are in progress, the cemetery will not be open to visitors. However, upon completion thereof, due notice will be carried by the press.

You may rest assured that this final interment was conducted with fitting dignity and solemnity and that the grave-site will be carefully and conscientiously maintained in perpetuity by the United States Government.

Sincerely yours,

THOMAS B. LARKIN  
Major General  
The Quartermaster General

JAN 12 6 10 PM '49



# REQUEST FOR DISPOSITION OF REMAINS

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

DATE

Pfc. George E. McClure, 38 516 244  
Plot A, Row 5, Grave 108,  
United States Military Cemetery  
Champagnoul, France

29 July 1947

**DO NOT WRITE ABOVE THIS LINE**

A		C	
B		D	

**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, MARTHA L. MCLURE

(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. *Exp. in France*
- 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY

(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.)

*DD proc JUL 8 1948*

*June 17 1948*  
*Mathis*

OQMG FORM 14 NOV 1946 345 MILITARY

*16 MAY 1948*

16-50411-1

*M. Mathis*



**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	TELEGRAPH ADDRESS	TELEPHONE No.
EXPRESS OFFICE (Nearest railroad passenger station)		

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			
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.	

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.

Mrs Martha L. McLure      708 OAK ST. APARTMENT 9  
(SIGNATURE OF NEXT OF KIN)      (STREET AND NUMBER)  
MRS. MARTHA L. MC LURE      SAN FRANCISCO, CALIF.  
(NAME PRINTED OR TYPED)      (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 11th day of August, 1947, at city (or town) of SAN FRANCISCO, county of SAN FRANCISCO, and State (or Territory or District) of CALIFORNIA

MY COMMISSION EXPIRES  
 Sept. 5 1950

Scott Goodwin  
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)  
Notary Public  
(OFFICIAL TITLE)

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



**PART II - RELINQUISHMENT OF DISPOSITION AUTHORITY**

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

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

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

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

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

**PART III**

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

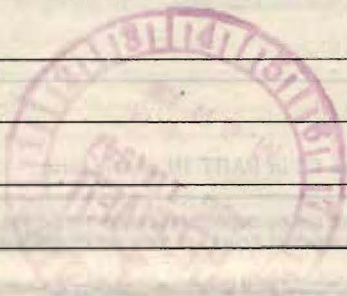
THIS IS TO NOTIFY YOU THAT I AM NOT THE NEXT OF KIN AUTHORIZED TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED NAMED ON PAGE 1 OF THIS FORM. THE FOLLOWING PERSON, TO THE BEST OF MY KNOWLEDGE, IS THE NEXT OF KIN TO WHOM THIS FORM SHOULD BE DIRECTED.

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

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

**ADDITIONAL REMARKS AND INSTRUCTIONS**

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





Pfc. George E. McClure, 38 516 244  
Plot A, Row 5, Grave 108,  
United States Military Cemetery  
Champigneul, France

29 July 1947

Mrs. Martha L. McClure  
708 Oak Street, Apartment 9  
San Francisco, California

Dear Mrs. McClure:

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.

fml

POP  
M&R  
BC

ccs



QMCMF 293  
McClure, George E.  
A.S.N. 38 516 244

27 May 1947

Mrs. Martha L. McClure  
708 Oak Street  
Apartment 9  
San Francisco, California

Dear Mrs. McClure:

Inclosed herewith is a picture of the United States Military Cemetery Champigneul, France. in which your son, the late Private First Class George E. McClure, is buried.

It is my sincere hope that you may gain some solace 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 cemetery will be maintained as a temporary resting place until, in accordance with the wishes of the next of kin, all remains are either placed in permanent American cemeteries overseas or returned to the Homeland for final burial.

Sincerely yours,

1 Incl  
Photograph

ell

G. A. HORKAN  
Brigadier General, OMC  
Chief, Memorial Division

U.S. MAIL & RECORDS BRANCH  
O. M. D. U.  
MAY 27 4 15 PM '47

284



26 September 1946

Mrs. Martha L. McClure  
708 Oak Street  
Apartment 9  
San Francisco, California

Dear Mrs. McClure:

293  
The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Private First Class George E. McClure, A.S.N. 38 516 244.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Champignoul, plot A, row 5, grave 108. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located twenty miles southeast of Reims, 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

SEP 26 12 41 PM '46  
WAR DEPT  
RECORDS SECTION

M. W.



FILE UNDER NO. 293 - McClure, George E. 38,516,244

INDEX SHEET

SYNOPSIS

8th Ind

8 Mar 45

FROM: HQ 7th Armd Div APO 257 U. S. Army  
TO: CG, 3rd U. S. Army, APO 403, U. S. Army  
(ATTN: AG Casualty Div.)(Through Channels)

RE: Unk. Remains.....

DOCUMENT FILED UNDER NO.  
jpm

293 - Pozolante, Joseph V. 32,984,977



RESTRICTED

# REPORT OF BURIAL

449

35754

TM 10-630 AND AR 30-1815

September 1944

Date

293

McClure George E. ~~Unknown~~ *ofc* 3  
 Unknown *23 Armored Division* Unknown  
 France Unit *1 Sept 44* Unknown Organization  
 1720 Place of Death Date of Death KIA, Hit by Bomb Cause of Death  
 3 September 1944 Champigneul Cemetery France 407:465  
 108 Time and Date of Burial Name of Cemetery Name or Coordinates of Location  
 5 Grave Number Row Number Plot Number Type of Marker  
 Temporary

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

If No Identification Tags  
How were remains identified?

IDENTIFIED BY SOLDIER'S INDIVIDUAL PAY RECORD

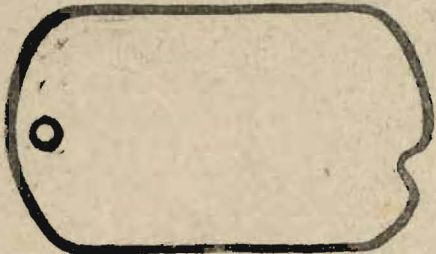
What means of identification were buried with the body?

GRS FORM # 1 IN BOTTLE

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

Who is buried on: Scott, Paul E. 34197069 Unknown 7th Armored 107  
 Deceased's Right: Name Serial No. Rank Organization Grave No.  
 Deceased's Left: Wilson, William 32284975 Pvt 7th Armored 109  
 Name Serial No. Rank Organization Grave No.

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



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

Emergency Addressee Mrs. Martha L. McClure  
 Name  
 72 Saturn St., San Francisco, California  
 Address

Religion Unknown

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

NONEZ

*F. A. Greulich*

Signature of Officer or other person reporting burial

F. A. GREULICH  
Capt., QMC

Verified by G.R.S. Officer

*File*  
5-24-45  
AED



## IF DECEASED UNIDENTIFIED

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

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

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

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

4			
3			
2	Left Hand		
1			
Thumb			

	Right Hand		
			Thumb

### TOOTH CHART

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

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

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.

