

293 SUMRALL, LUCIOUS 34 230 954 T5th C.E. EUROP.A. (LA.) '45ll

Standard Form No. 1034a—Rev.
Form approved by
Comptroller General, U. S.
May 26, 1938
(Amended August 15, 1941)

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

D. O. Vou. No. **12395**
Bu. Vou. No. **1329**

GENERAL ACCOUNTING
OFFICE PREAUDIT

Certified for payment in the sum
of \$ _____
Comptroller General of the
United States

U. S. Department of the Army, Memphis General Depot

(Department, bureau, or establishment)

Voucher prepared at **Memphis 2, Tenn. 13 May 48**
(Give place and date)

THE UNITED STATES, Dr.,

To **G.F. Poole Mortuary, Inc.**
(Payee)

Address **Bogalusa, La.**

Payee's Account No. _____

PAID BY

(For use of Paying Office)

No. and Date of Order	Date of Delivery or Service	Articles or Services (Enter description, item number of contract or general supply schedule, and other information deemed necessary) Term _____ % Discount Cash _____ days	Quantity	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Brought forward from continuation sheet(s)					
		As per Invoice Attached 293					21.00
		Hearse Service for the late Lucious Sumrall, TEC 5 34230954					
						21.00	

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total **21.00**

(Payee must NOT use this space)

Differences _____

Account verified; correct for _____
(Signature or initials)

Contract No. _____ Date _____ Req. No. _____ Date _____ Invoice Rec'd _____

21.00

MEMORANDUM

H.A. PFANSCHMIDT
Fiscal Officer

FILE

ACCOUNTING CLASSIFICATION (for completion by Administrative Office)

Appropriation, limitation, or project symbol	Appropriation title	Limit'n or Proj't Amount	Appropriation Amount
21X1805	807-43 P430-03 S 99-999		10.50
21X1805	807-42 P422-02 S 99-999		10.50

Allotment symbol	Amount	Obligations liquidated	COST ACCOUNT		OBJECTIVE CLASSIFICATION	
			Symbol	Amount	Symbol	Amount

Paid by { Check No. **807463** dated **May 14, 1948** for \$ **21.00** } on Treasurer of the United States
{ Cash, \$ _____, on _____, 19____, Payee _____ } in favor of payee name above.
(Sign original only)

*When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary" or "Treasurer" as the case may be.
If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the blank space below "Approved for \$ _____", and over his official title.

Per _____

Title _____

Method of or Absence of Advertising
(Section 3769 of the Revised Statutes)

1. After advertising in newspapers.
2. (a) After advertising by circular letters sent to dealers.
(b) And by notices posted in public places.
(If notices were not posted in addition to advertising by circular letters sent to dealers, explanation of such omission must be made. The notation on the certificate on the face of the voucher must be "2(a)-(b)" or "2(a)", depending on whether or not notices were posted.)
3. Without advertising, under an exigency of the service which existed prior to the order and would not admit of the delay incident to advertising.
4. Without advertising in accordance with _____
5. Without advertising, it being impracticable to secure competition because of _____

(Here state in detail the nature of the exigency or circumstances under which the securing of competition was impracticable under 3 and 4)

NOTE.—The above form "Method of or Absence of Advertising" is to be used when purchases are made or services secured under proper authority without a written agreement in any form. In case of a written agreement (formal contract, proposal, and acceptance, or less formal agreement), Standard Form No. 1036—Excess should be used for abstracting the method of or absence of advertising and award of contract. (See General Regulations No 34, Supplement No. 6, General Accounting Office, Aug. 20, 1930.)

OFFICE OF THE GENERAL ACCOUNTING OFFICE
WASHINGTON, D. C.

DATE: _____

BY: _____

FOR: _____

AMOUNT: _____

DESCRIPTION: _____

REMARKS: _____

RECEIPT OF REMAINS

DISTRIBUTION CENTER

MEMPHIS GENERAL DEPOT, MEMPHIS, TENNESSEE

ROUTINE 30 APRIL 1948

POOLE FUNERAL HOME

REMAINS CONSIGNED TO: BOGALUSA, LOUISIANA

REMAINS OF THE LATE ^{ecul} TECHNICIAN FIFTH GRADE LUCIOUS SUMRALL SN 34230954 BEING SHIPPED TO YOU ACCOMPANIED BY MILITARY ESCORT ON TRAIN NUMBER TWO HUNDRED TWENTY THREE FRISCO RAILROAD LEAVING MEMPHIS SIX TEN PM **FIFTH MAY** AND DUE TO ARRIVE BOGALUSA STATION TRAIN NUMBER ONE GULF MOBILE AND OHIO RAILROAD AT EIGHT FORTY NINE AM RAILROAD TIME **SIXTH MAY.** REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL. REQUEST YOU SUBMIT ITEMIZED STATEMENT IN QUADRUPLICATE PROPERLY CERTIFIED TO THIS DEPOT FOR PAYMENT OF TRANSPORTATION CHARGES ONLY IF ANY FOR REMAINS AND ESCORT FROM BOGALUSA RAILROAD STATION TO FRANKLINTON LOUISIANA AND OF ESCORT FROM FRANKLINTON TO BOGALUSA LOUISIANA. YOU ARE DIRECTED TO NOTIFY NEXT OF KIN CONTENTS OF THIS MESSAGE.

RECORDED
MAY 2 2 26
MEMPHIS

Charles M. Odenwalder
CHARLES M ODENWALDER
CAPTAIN, QMC

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

THIS 6 DAY OF May 1948

Wsgt James A. Gourley
WITNESS (Escort)

Paul James Home
PO. Box 1000 Bogalusa, La.
CONSIGNEE

File
MAJ
Recorded under file
25 May 48
in front
RR Branch

Shipment NY-006-R Robert F. Burns *A.P.M.C.* BHR

1

L.B.

DISINTERMENT DIRECTIVE

1456

SECTION A - NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER 1240 15051	DATE 10 09 47 DAY MONTH YEAR	
NAME SUMRALL LUCIOUS		SERIAL NUMBER 34230954	RANK TEC5	ARM 1
CEMETERY HENRI CHAPELLE EUPEN		DISPOSITION OF REMAINS 1 8800 06 CODE DIST. PT.		DATE OF DEATH DAY MONTH YEAR
PLOT NNN	ROW 10	GRAVE 193	COUNTRY BELGIUM	
CAUSE OF DEATH 1				

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE Change: LEVI W. SUMRALL FRANKLINTON, LOUISIANA <i>(Ship remains to Franklinton, La.)</i>	NAME AND ADDRESS OF NEXT OF KIN LEVI W. SUMRALL FRANKLINTON, LOUISIANA
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SECTION C - DISINTERMENT AND IDENTIFICATION

NAME SUMRALL LUCIOUS	SERIAL NUMBER 34230954	RANK TEC/5	DATE OF DEATH Est 10 Jan 45	DATE DISTINTERRED 9 Oct 47
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION CO B 33 ARMD ENG BN 7 ARMD DIV	RELIGION P	IDENTIFICATION VERIFIED BY Robert C Mallory 1/Lt. Inf 537 QM.Sv.Co. NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL UNIFORM	CONDITION OF REMAINS Skull crushed, Multiple fractures of lower extremities.
-----------------------------	---

OTHER MEANS OF IDENTIFICATION
T/5 chevrons on mackinaw.
7th. armd patch on field jacket.
Deceased clothed in ground force's uniform.

MINOR DISCREPANCIES
NONE

REMAINS PREPARED AND PLACED IN CASKET

DATE 16 Oct 47 BY Harrie D Nelson Emb.Supv.
CASKET SEALED BY Harrie D Nelson Emb.Supv. *Harrie D Nelson*
EMBARKER SIGNATURE
FOS.Provisional.

CASKET BOXED AND MARKED
DATE 16/10/47 BY John Shinko Clk.Rec. SHIPPING ADDRESS VERIFIED BY Harrie D Nelson Emb.Supv.

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

William L. Benschoff
David L Benschoff Capt. Inf.
SIGNATURE OF GRS INSPECTOR

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

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED			
FROM	U.S.M.C. HENRI CHAPELLE, BELGIUM		TO
KIND OF CONVEYANCE	TRUCK		LIEGE, BELGIUM (BARGE LOADING PT)
SIGNATURE OF SHIPPER	for CAPT MATHIAS HUMMEL 0-397092		NAME OF CONVOYER SGT LUPE J VALENZUELA RA 39570049
DATE	13/1/48		DATE
SIGNATURE OF RECEIVER			
13/1/48			
2. SHIPPED			
FROM	LIEGE, BELGIUM (BARGE LOADING PT)		TO
KIND OF CONVEYANCE	BARGE VICTORIA		ANTWERP PORT PIER # 140
SIGNATURE OF SHIPPER	1/LT VERNON N HOYT 0-1325894		NAME OF CONVOYER T/5 CLAYTON R BEDFORD RA 13206604
DATE	13/1/48		DATE
SIGNATURE OF RECEIVER			
17 JAN 1948			
3. SHIPPED			
FROM	AGRC ANTWERP BELGIUM		TO
KIND OF CONVEYANCE	ZEC		USAT ROBERT F. BURNS
SIGNATURE OF SHIPPER	LE Butler Lt Col Inf - 8 MAR 1948		NAME OF CONVOYER ELROY N. NATHAN, 1st LT. T.C.
DATE	- 8 MAR 1948		DATE
SIGNATURE OF RECEIVER			
- 8 MAR 1948			
4. SHIPPED			
FROM	USAT "ROBERT F. BURNS"		TO
KIND OF CONVEYANCE	ZEC DIA		NYDE
SIGNATURE OF SHIPPER	ELROY N. NATHAN 1st LT T.C. 31 MAR 1948		NAME OF CONVOYER ELROY N. NATHAN, 1st LT T.C.
DATE	31 MAR 1948		DATE
SIGNATURE OF RECEIVER			
for JAMES E MCKINNON 31 MAR 1948 COLONEL T.C.			
5. SHIPPED			
FROM	2 NYDE		TO
KIND OF CONVEYANCE	TRAIN		PORT TRANSPORTATION OFFICER
SIGNATURE OF SHIPPER	for JAMES E MCKINNON 1948		NAME OF CONVOYER PORT TRANSPORTATION OFFICER
DATE	1948		DATE
SIGNATURE OF RECEIVER			
1948			
6. SHIPPED			
FROM	PORT TRANSPORTATION OFFICER		TO
KIND OF CONVEYANCE			
SIGNATURE OF SHIPPER			NAME OF CONVOYER
DATE			DATE
SIGNATURE OF RECEIVER			
7. SHIPPED			
FROM			TO
KIND OF CONVEYANCE			
SIGNATURE OF SHIPPER			NAME OF CONVOYER
DATE			DATE
SIGNATURE OF RECEIVER			

3:10 PM

Change #1			INSPECTION CHECKLIST (FOR USE AT OVERSEAS PORT, U.S. PORT, AND DISTRIBUTION CENTER)		
NAME SUMRALL, LUCIOUS		RANK TEC 5	SERIAL NO. 34 230 954		
SOURCE HENRI CHAPELLE EUPEN, BELGIUM		CONSIGNEE POOL FUNERAL HOME FRANKLINTON, LOUISIANA			
SHIPPING CASE - General Appearance (Check Only Discrepancies)		CONDITION OF SHIPPING CASE (Check One)			
<input checked="" type="checkbox"/> FINISH (Exterior) <input type="checkbox"/> FINISH (Interior) <input type="checkbox"/> HANDLES <input checked="" type="checkbox"/> HANDLE BOLTS <input checked="" type="checkbox"/> STENCILING - NAMEPLATE <i>Re-stenciled</i> <input type="checkbox"/> HEALTH PERMIT MARKER <input type="checkbox"/> HEALTH PERMIT NUMBER		<input type="checkbox"/> SATISFACTORY <input checked="" type="checkbox"/> UNSATISFACTORY REMARKS: <i>Repair under case Refresh Riv. all around Paint Case touch up 10 min KP</i>			
CASKEY - General Appearance (Check Only Discrepancies)		CONDITION OF CASKEY (Check One)			
<input checked="" type="checkbox"/> FINISH (Exterior) <input checked="" type="checkbox"/> HANDLES AND FASTENINGS <input type="checkbox"/> STENCILING - NAMEPLATE <input type="checkbox"/> CAM LOCKS (Sealing) <input type="checkbox"/> ODDOR AND MOISTURE		<input type="checkbox"/> SATISFACTORY <input checked="" type="checkbox"/> UNSATISFACTORY REMARKS: <i>Touch up caskey Paint Riv on ends no knobs on caskey touch up 5 min KP</i>			
ROUTED THROUGH					
<input type="checkbox"/> MORTUARY OPERATING ROOM		<input checked="" type="checkbox"/> REPAIR SHOP			
Condition of Remains <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory		Casket Repaired <input type="checkbox"/> Yes <input type="checkbox"/> No			
NECESSARY DISINFECTION (Explain)		Casket Exchanged <input type="checkbox"/> Yes <input type="checkbox"/> No			
		Shipping Case Repaired <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
		Shipping Case Exchanged <input type="checkbox"/> Yes <input type="checkbox"/> No			
		REMARKS <i>25 MIN 8:48 4-15-48 ok for shipment AHC 0920</i>			
TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTOR
			<i>2:50</i>	<i>4/5/48</i>	<i>C.B.</i>
REMARKS <i>O.K. Out going 3/5/48 C.B.</i>					

DPNR16 WUX 121 GOVT PAID MEMPHIS TENN APRIL 30 1948

POOLE FUNERAL HOME
BOGALUSA LOUISIANA

REMAINS OF THE LATE TECHNICIAN FIFTH GRADE LUCIOUS SUMRALL SN34230954
BEING SHIPPED TO YOU ACCOMPANIED BY MILITARY ESCORT ON TRAIN NUMBER
TWO HUNDRED TWENTY THREE FRISCO RAILROAD LEAVING MEMPHIS SIX TEN
PM FIFTH MAY AND DUE TO ARRIVE BOGALUSA STATION TRAIN NUMBER ONE GULF
MOBILE AND OHIO RAILROAD AT EIGHT FORTY NINE AM RAILROAD TIME SIXTH
MAY. REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS AT RAILROAD
STATION UPON ARRIVAL. REQUEST YOU SUBMIT ITEMIZED STATEMENT IN QUAD-
RUPLICATE PROPERLY CERTIFIED TO THIS DEPOT FOR PAYMENT OF TRANSPORTATION
CHARGES ONLY IF ANY FEE FOR REMAINS AND ESCORT FROM BOGALUSA RAIL-
ROAD STATION TO FRANKLINTON LOUISIANA AND OF ESCORT FROM FRANKLINTON
TO BOGALUSA LOUISIANA. YOU ARE DIRECTED TO NOTIFY NEXT OF KIN CON-
TENTS OF THIS MESSAGE. QMDMK595

C M ODENWALDER
CAPTAIN QMC

new

7/20/62

WU L 22 24 COLLECT GOVT

FRANKLINTON LA MARCH 26 755A

CHARLES M ODENWALDER

RETEL REMAINS LATE TEG LUCIOUS SUMRALL SHIP TO

POOL FUNERAL HOME BOGALUSA LA NO CHANGE IN DELIVERY

ARRANGEMENTS AS OUTLINED BY YOU

LEVC U SUMRALL.

Leri

RECEIVED
26 MAR 1948
AGRD
Memphis General Depot

MESSAGEFORM		MESSAGE CENTER No.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT	
CALLS V	STA. SER. No. NR	PRECEDENCE	TRANSMISSION INSTRUCTIONS	ORIGINATOR	DATE-TIME GROUP
ACTION	INFORMATION		EXEMPT	OPERATING SIGNALS	GROUP COUNT GR
SPACE ABOVE FOR SIGNAL CENTER ONLY					
FROM: (Originator) MEMPHIS GENERAL DEPOT, MEMPHIS, TENNESSEE			SECURITY CLASSIFICATION UNCLASSIFIED		
ACTION TO: <ul style="list-style-type: none"> • LEVI W SUMRALL • FRANKLINTON LOUISIANA • 			PRECEDENCE FOR ACTION INFORMATION ROUTINE		
			<input checked="" type="checkbox"/> ORIGINAL MESSAGE REFERS TO ANOTHER MESSAGE IDENTIFICATION CLASSIFICATION		
INFORMATION TO:					
<p>THIS HEADQUARTERS HAS BEEN ADVISED THAT THE REMAINS OF LATE TEC 5 LUCIOUS SUMRALL ARE ENROUTE TO THE UNITED STATES. RECORDS OF THIS OFFICE INDICATE YOU WISH REMAINS DELIVERED TO YOU AT ABOVE ADDRESS. PLEASE MAKE ARRANGEMENTS WITH FUNERAL DIRECTOR OF YOUR CHOICE TO ACCEPT REMAINS AT BOGALUSA-IA RAILROAD STATION UPON ARRIVAL. WE REGRET IT IS NOT POSSIBLE AT THIS TIME TO GIVE YOU A DEFINITE DELIVERY DATE HOWEVER THREE DAYS PRIOR TO SHIPMENT FROM THIS DEPOT YOUR FUNERAL DIRECTOR WILL BE NOTIFIED BY TELEGRAM OF RAIL ROUTING AND SCHEDULED TIME REMAINS WILL ARRIVE AT RAILROAD STATION. HE WILL BE REQUESTED TO PASS THIS INFORMATION TO YOU SO THAT YOU MAY MAKE FUNERAL ARRANGEMENTS.</p> <p>REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. WITHIN 48 HOURS OF DATE OF THIS MESSAGE PLEASE FURNISH NAME AND ADDRESS OF FUNERAL DIRECTOR SELECTED AND CONFIRM ABOVE DELIVERY INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS BY TELEGRAM COLLECT TO MEMPHIS GENERAL DEPOT ATTENTION AMERICAN GRAVES REGISTRATION DIVISION MEMPHIS TENNESSEE. PLEASE BE ADVISED THAT IT WILL NOT BE POSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF THE 48 HOUR PERIOD. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. IF YOU SHOULD DESIRE MILITARY HONORS AT FUNERAL YOU SHOULD ASK ANY LOCAL PATRIOTIC OR VETERANS ORGANIZATION TO MAKE ARRANGEMENTS. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.</p>					
			CHARLES M. ODENWALDER CAPTAIN QMC /D/		
SECURITY CLASSIFICATION UNCLASSIFIED			AUTHORIZATION		
ORIGINATING AGENCY ODENWALDER			SIGNATURE		
SYMBOL QMDMK	DATE-TIME GROUP 738	OFFICIAL TITLE DAN L. MILLER, Lt.Col., QMC	PAGE 1 OF 1		
		Chief, AGR Division			

ACCTS. OF 12330

CLAIM VALID
REPATRIATION

CERTIFICATE
(AR 30-1830)

G. L. BOYLE
Col., F.D.
Memphis, Tenn.
210-237
STA. 586
MAY 1948

1. FILL IN EITHER PART A OR PART B; NOT BOTH.
2. USE PART A WHEN INTERMENT IS IN A CIVILIAN OR PRIVATE CEMETERY.
3. USE PART B WHEN REMAINS ARE DELIVERED TO HOME OR OTHER PLACE PRIOR TO BURIAL IN A NATIONAL OR POST CEMETERY.

PART A - CIVILIAN OR PRIVATE CEMETERY

A			
REQUEST FOR REIMBURSEMENT OF INTERMENT EXPENSES			
<small>(PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)</small>			
NAME OF DECEDENT SUMRALL, LUCIOUS	GRADE TBC 5	SERIAL NUMBER 34 230 954	COMPONENT USA
I certify that the sum of \$ <u>75.00</u> was paid by me from personal funds in connection with the interment of the remains of the above named decedent in the below named cemetery.			
INSERT NAME OF CEMETERY <i>Mables</i>	CITY OR COUNTY <i>Washington Parish La</i>	STATE <i>La</i>	
INSTRUCTIONS TO PERSON SIGNING THIS FORM		SIGNATURE OF CLAIMANT	
<ol style="list-style-type: none"> 1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR. 2. Return four copies to: (Original & 3 copies) Memphis General Depot AGR Division Memphis 2, Tennessee 3. Type or print name underneath your signature in space marked "Signature of Claimant". 		<i>MR</i> <i>LEVI W. SUMRALL</i>	
		ADDRESS OF CLAIMANT (City, Street or RFD, and State) <i>Franklin RFD 1, La</i>	
		RELATIONSHIP TO DECEDENT <i>Father</i>	DATE <i>5/7/48</i>

PART B - NATIONAL OR POST CEMETERY

B			
REQUEST FOR REIMBURSEMENT OF TRANSPORTATION EXPENSES			
<small>(PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)</small>			
NAME OF DECEDENT	GRADE	SERIAL NUMBER	COMPONENT
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 and to the following places:			
INSERT CITY OR TOWN (OR ADDRESS NOT IN A CITY OR TOWN) FROM WHICH REMAINS WERE SHIPPED	INSERT NAME AND LOCATION OF NATIONAL OR POST CEMETERY TO WHICH REMAINS WERE SHIPPED		
INSTRUCTIONS TO PERSON SIGNING THIS FORM		SIGNATURE OF CLAIMANT	
<ol style="list-style-type: none"> 1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR. 2. Return four copies to: (Original & 3 copies) Memphis General Depot, AGR Division Memphis 2, Tennessee 3. Type or print name underneath your signature in space marked "Signature of Claimant". 		<i>MAY 1948</i>	
		ADDRESS OF CLAIMANT (City, Street or RFD, and State) <i>MAY 13 1948</i>	
		RELATIONSHIP TO DECEDENT	DATE

QMC FORM 1236
23 OCT 47

REPLACES WD AGO FORM R-5507, QMC FORM R-5046
AND QMC FORM R-9066, WHICH ARE OBSOLETE.

1307

EXPLANATION OF PART A - CIVILIAN OR PRIVATE CEMETERY

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.

EXPLANATION OF PART B - NATIONAL OR POST CEMETERY

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.

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

T/5 Lucious Sumrall, 34 230 954
Plot MMH, Row 10, Grave 193,
United States Military Cemetery
Henri-Chapelle, Belgium

14 March 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

1. *Betty Thomas & Lewis Sumrall*
(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

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

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

RELATIONSHIP OTHER THAN ABOVE (Specify)

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

- 1. BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS.
- 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY

Nobles Cemetery - Rfd. Franklinton, Louisiana
(NAME AND LOCATION OF CEMETERY)

- 3. BE RETURNED TO *USA* (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.)

No change

*checked
11 July 47
M Baker*

DD PROCESSED ON 27 AUG 1947

(QPMc)

2

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 LEVI <u>SUMRALL</u>	FIRST NAME <u>LEVI</u>	MIDDLE INITIAL <u>W</u>
NUMBER AND STREET	CITY OR TOWN <u>FRANKLINTON</u>	STATE OR TERRITORY OF U. S. A., OR COUNTRY <u>LOUISIANA</u>
EXPRESS OFFICE (Nearest railroad passenger station) <u>FRANKLINTON LA</u>	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			
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.

OK
 Betty Sumrall Thomas (sister) Betty Sumrall Thomas
 (SIGNATURE OF NEXT OF KIN) (STREET AND NUMBER)
 Levi W. Sumrall (father) Levi W. Sumrall
 (NAME PRINTED OR TYPED) (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 31st day of March
 1947, at city (or town) of Franklinton, county of Washington, and State (or Territory or District) of Louisiana

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

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

PART

If you are the next of kin and you desire to receive the remains, I, THE _____ (PLEASE PRINT NAME)
 NAMED IN PART I OF THIS FORM, DO HEREBY REQUEST THAT THE NEXT EXISTING PERSON IN THE ORDER OF KINSHIP TO THE DECEASED
 LAST NAME _____
 RELATIONSHIP TO THE DECEASED _____
 NUMBER AND STREET _____
 WHOM I UNDERSTAND SHALL HAVE THE RIGHT TO RECEIVE THE REMAINS

(SIGNATURE OF NEXT OF KIN) _____
 (NAME PRINTED OR TYPED) _____

If you are NOT the next of kin authorized to receive the remains, THIS IS TO NOTIFY YOU THAT I AM NOT THE NEXT OF KIN NAMED ON PAGE 1 OF THIS FORM. THE FOLLOWING PERSON SHOULD BE DIRECTED.
 LAST NAME _____
 RELATIONSHIP TO THE DECEASED _____
 NUMBER AND STREET _____

(SIGNATURE) _____
 (NAME PRINTED OR TYPED) _____

16-50410-1

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 _____, 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 INSTRUCTION

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

Lined area for additional remarks and instructions.



T/5 Lucious Sumrall, 34 230 954
 Plot NBN, Row 10, Grave 193,
 United States Military Cemetery
 Henri-Chapelle, Belgium

14 March 1947

Mr. Levy W. Sumrall
 Route #1, Box 33 A
 Franklinton, Louisiana

Dear Mr. Sumrall;

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

5 Incls.

Mar 17 1947
 MAIL & RECORDS SECTION

249
CMGR 293
Sumrall, Lucious
A.S.N. 34 230 954

3 January 1947

Mr. Levy W. Sumrall
Route #1, Box #33A
Franklinton, Louisiana

Dear Mr. Sumrall:

Inclosed herewith is a picture of the United States Military Cemetery Henri-Chapelle, Belgium, in which your son, the late Technician Fifth Grade Lucious Sumrall, A.S.N. 34 230 954 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.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

GEO. A. HORKAN
Brigadier General, QMC
Assistant

sb

pg

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

In Reply Refer To
QMGR 314.6
Graves Registration
(European, U. S. Misc.)

12 December 1946

SUBJECT: Burial Records

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

Cemetery: United States Military Cemetery Henri-Chapelle, Belgium.

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

NAME	RANK/ GRADE	SERIAL NO.	DATE OF DEATH	ORGAN.	PLOT	ROW	GRAVE
<u>Smrall,</u> <u>Ludwig</u>	<u>1st/5</u>	34 230 954	--	--	NNN	10	193
Tuder, Robert E.	2nd	35 079 569	--	--	SKR	2	33

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, QMG
Assistant

REPATRIATION
RECORDS BRANCH

27 Nov 1946

NAME SOMRALL LUCIOUS

SERIAL NO 34 230954

CEMETERY HENRI CHAPELLE BEL

PLOT NNN

ROW 10

GRAVE 193

LETTER FIELD

Rhuk

Tele...
SPECIAL CHECKER

QMGYG 293
 Sumrall, Lucious

27 June 1946

Mr. Levy W. Sumrall
 Route #1, Box 33 A
 Franklinton, Louisiana

Dear Mr. Sumrall:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Technician Fifth Grade Lucious Sumrall, A.S.N. 34 230 954.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery, Henri-Chapelle, Belgium, plot 888, row 10, grave 193.

This cemetery is located approximately seven miles southwest of Aachen, Germany, five miles northwest of Eupen and eight miles east of Liege, both in Belgium, 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 your feasible wishes 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 you with full information and solicit your detailed desires.

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN
 Major General
 The Quartermaster General

LK

100 27 12 20 PM '46
 000 M.C.
 with a facsimile stamp

pdj


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

RESTRICTED 463
REPORT OF BURIAL 10 Feb 45
TM 10-630 AND AR 30-1815

Sumrall **Lucious** **Unk** **34230954**
Last Name First Initial Rank Serial No.
Unknown **33** **Armed Corp Bn** **7th Arm'd Div.**
Unit Organization
Crombach, Belgium **23 Dec 44** **10 Jan 45 EST** **M W Body**
Place of Death Date of Death Cause of Death
1600 10 Feb 45 **Henri Chapelle No 1** **K 721-348**
Time and Date of Burial Name of Cemetery Name or Coordinates of Location
193 **10** **NNN** **Perm**
Grave Number Row Number Plot Number Type of Marker

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

If No Identification Tags
How were remains identified?

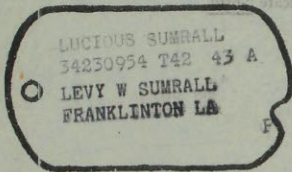
What means of identification were buried with the body?

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

Who is buried on: **Fox, Howard A** **Sgt.** **35266092** **194**
Deceased's Right: Name Serial No. Rank Organization Grave No.
Fykerude, Norman L **39180860** **192**
Deceased's Left: 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 Address _____ Name _____
Address _____
Religion _____

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

None

#62

RESTRICTED

Signature of Officer or other person reporting burial

Verified by G.R.S. Officer

N. F. RAKER
1st Lt, QMC
O-515287
G. R. O.

File 45
5-23
AKED

REPORT OF BURIAL OF 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: 5'7 1/2" Laundry Marks: unknown
 Weight: 150 lbs Number of Rifle: 1
 Color of Eyes: Blue Wear Glasses? No
 Color of Hair: Black Tooth Chart Attached? No
 Race: Hebrew Heart Condition: None

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

Left Hand 2 Right Hand

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

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

Who is buried on: Deceased's Right Deceased's Left

1st 2nd 3rd 4th

1st 2nd 3rd 4th

1st 2nd 3rd 4th

1st 2nd 3rd 4th

TOOTH CHART

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.

Emergency Address: _____
 Address: _____
 Religion: _____

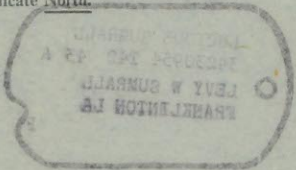
Indicate missing natural teeth by X; crosses by C; Bridges by □, Bridges by ○ linking anchor teeth, replacements by artificial teeth.

Decayed's Right	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	Decayed's Left

Characteristics: _____
 Other Data: _____

AG P BR HO 505 722560

ESTRICTED



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

DATE 15 Mar 1945

REPORT OF DEATH

FULL NAME Sumrall, Lucious		ARMY SERIAL NUMBER 34230954	GRADE Tec 5
HOME ADDRESS Franklinton, La.		ARM OR SERVICE Coops of Engineers	DATE OF BIRTH 16 Mar 1920
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH 23 Dec 44
STATION OF DECEASED European Area	DATE OF ENTRY ON CURRENT ACTIVE SERVICE 7 Feb 1942	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS	
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mr. Levy W. Sumrall, father, Rt #1 Box 33 A. Franklinton, La.			
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Levy W. Sumrall, father, same as above Betty Sumrall, Thomas, sister, Rt #1 Box 33A Franklinton, La.			
INVESTIGATION MADE?		IN LINE OF DUTY	OWN MISCONDUCT
YES	NO	YES	NO
WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE	IN PLYING PAY STATUS
YES	NO	YES	NO
OTHER PAY STATUS (SPECIFY BELOW)		YES	
NO		X	

ADDITIONAL DATA AND/OR STATEMENT

BATTLE NON-BATTLE

The individual named in this report of death is held by the War Dept to have been in a missing in action status from 23 Dec 44 until such absence was terminated on 2 Mar 45, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

COPIES FURNISHED:

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

BY ORDER OF THE SECRETARY OF WAR.

ADJUTANT GENERAL

34520820

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

REPORT OF DEATH

DATE 15 Mar 1945

FULL NAME Sumrall, Lucious		ARMY SERIAL NUMBER 34230954	GRADE Tec 5
HOME ADDRESS Franklinton, La.		ARM OR SERVICE CoFps of Engineers	DATE OF BIRTH 16 Mar 1920
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH 23 Dec 44
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 7 Feb 1942	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mr. Levy W. Sumrall, father, Rt #1 Box 33 A. Franklinton, La.			
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Levy W. Sumrall, father, same as above Betty Sumrall, Thomas, sister, Rt #1 Box 33A Franklinton, La.			
INVESTIGATION MADE?		IN LINE OF DUTY	OWN MISCONDUCT
YES	NO	YES	NO
WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE	IN FLYING PAY STATUS
YES	NO	YES	NO
OTHER PAY STATUS (SPECIFY BELOW)		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO

ADDITIONAL DATA AND/OR STATEMENT

BATTLE NON-BATTLE

The individual named in this report of death is held by the War Dept to have been in a missing in action status from 23 Dec 44 until such absence was terminated on 2 Mar 45, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

CB

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

BY ORDER OF THE SECRETARY OF WAR:

[Signature]

ADJUTANT GENERAL

352,800

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

288235

-BATTLE CASUALTY REPORT

NAME SUMRALL, LUCIOUS		SERIAL NUMBER 34230954	GRADE TEC5	ARM OR SERVICE CE	REPORTING THEATRE ETO
PLACE OF CASUALTY BELGIUM9	DATE OF CASUALTY DAY MONTH YEAR 23 DEC 44		FLYING OR JUMPING STAT MIA	TYPE OF CASUALTY MIA	SHIPMENT NUMBER 006

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. NAME, MRS. MRS. MISS, FIRST NAME, MIDDLE INITIAL, LAST NAME Mr. Levy W. Sumrall	RELATIONSHIP Father	DATE NOTIFIED 15 Jan 45
NO. AND NAME OF STREET-CITY-STATE Route #1, Box #33A, Franklinton, Louisiana		

REMARKS: CORRECTED COPY

NO ACTION IN TELETYPE SECTION
 21 Jan 45
 Led



BRANCH A.G.O.
 50 PM '45
 RECEIVED

ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED FORM 43 AS 201 REG.

CASUALTY BRANCH FILE ATTACHED OR CHARGED TO 216 707 DATE 14 Jan 45

PREVIOUSLY REPORTED NO. YES (AS INDICATED BELOW)

FILE NO.	MESSAGE NO.	TYPE	DATE AND AREA	E. A. NOTIFIED
<u>216 707</u>	<u>1</u>	<u>MIA</u>	<u>23 Dec 44 ETO</u>	<u>Beany pl</u>

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

REPORT NOT VERIFIED NO FORM 43 NO CAS. BR. FILE CHECKED BY 2001 159 REVIEWED BY 2001 159

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

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

DISTRIBUTION "A" 23 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.

352800

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

BATTLE CASUALTY REPORT

NAME SUMRALL LUCIOUS		SERIAL NUMBER 34230954	GRADE TECS-5	ARM OF SERVICE GE	REPORTING THEATRE ETO
PLACE OF CASUALTY BELGIUM9	DATE OF CASUALTY DAY MONTH YEAR 21 DEC 44		RYTES OR JURISDICT STATE	TYPE OF CASUALTY MIA	SHIPMENT NUMBER 005
NAME AND ADDRESS OF EMERGENCY ADDRESSEE					
THE INDIVIDUAL NAMED ABOVE DESIGNATES THE FOLLOWING PERSON AS THE ONE TO BE NOTIFIED IN CASE OF EMERGENCY, AND THE OFFICIAL THEATRE BRANCH 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 Mr. Levy W. Sumrall,		RELATIONSHIP father		DATE NOTIFIED 15 January 45	
ADDRESS AND NAME OF STREET-CITY-STATE Route #1, Box 33 A, Franklinton, Louisiana.					
REMARKS: lme					

CORRECTED COPY



RECEIVED
JAN 14 10 34 AM '45

SECTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED FORM 42 NO 201 REG.

CASUALTY BRANCH FILE SYMBOLS OR CHANGED TO: _____ DATE: _____

PROBABLY REPORTED: YES (AS INDICATED BELOW) NO

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

FORWARDED TO: SPC. INSP. YOUNG M. WOUNDED LETTER SERVICE S. P. & S. COMPT. M. S. B. MEMORANDUM

REPORT NOT VERIFIED: NO FORM 42 NO CAS. BR. FILE COVERED BY: _____ REVIEWED BY: _____

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

DOCT. SYMBOL	CASUALTY STATUS	SERIALIZED DATE	MESSAGE NO.	LISTED DATE	INDEXED DATE	FILE NO.	RECORDED DATE	FILE NO.	STATE	OTHER	DATE																								
24	25	26	27	28	29	30	31	32	33	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" 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 M. D. CONTRACTORS AND OTHERS ASPECTS OF MILITARY LAW.)
COPIES FURNISHED. SEE CASUALTY BRANCH MEMORANDUM NO. 48, 1944.

G.P.O. FORM NO. 6248
19 JUNE 1943

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mr. Levy W. Sumrall

SHIP TO:

Route #1, Box 33 A

T/5 Lucious Sumrall

Franklinton, Louisiana

Effects of:
Name

34230954

ASN

352800 D

Case No.

Wt.

DATE 1 August 1945

RTB:MH:dw

Margaret Hill
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.

1ctm
REMARKS:

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

FRANKED AUG 7 1945

SHIP DAMAGED PROPERTY:

mt
Shipping Clerk

PACKAGE DESCRIPTION: *HE T. Ctr.*

ARMY EFFECTS BUREAU INVENTORY *352,800*

NAME: *Lucious S. SUMRALL*

A.S.N. *34230954* RANK *T/5*

DECREASED MISSING P.O.W. RECORDED YALDY NO. *9781* INV. DATE *18 July 65* OF IG. NO. OF PGS. *1* BOX NO. *26* SHEET *1* OF *1* SHEETS ORGANIZATION *33 1st En 7 and Div.*

Belt		POWES & MARKINGS		KNIVES	
BELT, MONEY (NO MONEY)	X	CLOTHING	X	RATS, CLOTH OR TRAVEL	
Cloth, wash		CRIMINAL IDENT.		RAINFOLD (NO MONEY)	
Coats		Brushes		Case	
Footwear, Pr.		CAMERAS		Footlocker	
Gloves, Pr.		Glasses		KIT, GEN. PLE. OR WRITING	
Handkerchiefs		Knives		BOOKS	
Headwear		Lighters		Books, Address	
Jackets	X	MISC.		Books, Pilot Log	
Overcoats		Pen, Fountain		DIARY (REMOVED FOR EVI)	
Scarfs		Pencil, Mechanical		FIRES	
Shirts		Pipes		Letters	
Socks, Pr.		RELIGIOUS ARTICLES		Papers, Personal	
Ties	X	RELIGIOUS DEVIATION		Photos	
Towels		Rings		Shoe shine articles	
Trousers, Pr.		Tobacco		SCOPE SPORES	
Trunks, Pr.		Toilet articles		SOUVENIRS	
Underwear	XX	<i>WASH Westfield</i>		SOUVENIR MONEY	
				Stationery	
				TSPANNERS	
				U.S. MONEY (MONEY)	

REMARKS: *no information checked*

ATTACHMENTS: *1 inventory*

FORM 854

FORM 8100

2 - caps soiled & appear rust stained

** 1 cloth bag appears rust stained*

1 pr. shoes mangled & bent out of shape

*** Part of mist strap missing crown missing with running*

G.A.T. *none*

WAREHOUSE SPACE *1590*

STORED BY *HJB*

INVENTORIED BY *Probt*

DATE SHIPPED *AUG 7*

LOCKED STORAGE

CHECKED BY *Mc*

LAUNDRY REMOVED

FILM REMOVED

WEIGHT

G.I. REMOVED

SHORTAGE ON REVERSE

IDENT. TAGS REMOVED

DIARY REMOVED

LOCKED STORAGE

LAUNDRY REMOVED

FILM REMOVED

DAMAGED

ADDITIONAL REMARKS

1- testament cover taped + appears
water damaged -

SHORTAGES

U.S. GOVT. CHECK SHORT

2 medals.

NUMBER

DATE

SYMBOL

AMOUNT

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

Probit
INVENTORY CLERK

SUPERVISOR

G.I. REMOVED

NAME

UNIDENTIFIED # 3

BAY	PALLET	BOX	TALLY
66	26	26	9781
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
PKG.			

Eff. QM Form 48

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

JEM:MHidw
 Case No: 352800
 Date 2 August 1945

SUBJECT: Report of transaction in disposing of the effects of
Lucious Sumrall 34230954 late a
 (Name of deceased) (Army Serial Number)
Technician Fifth Grade Corps of Engineers who died
 (Grade) (Organization, Army or Service)
 on the 23 day of December, 1944, at ** in 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., KQCM Depot, dated 25 September 1943, for the purpose of disposing of the effects of the above-named soldier, or person subject to military law, reports that:

- a. No legal representative or widow of decedent being present at decedent's camp or quarters, effects of decedent were forwarded to this Summary Court-Martial.
- b. Local debtors owed decedent's estate \$ none, of which the sum of \$ none was collected. (If nothing was found due or collected, state "None"; otherwise attach itemized statement of sums owing and collected.) (Incl. _____.)
- 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 25 July 1945, pursuant to Special Orders 228, Headquarters KQCM Depot, dated 25 September 1943, the application or affidavit of Levy W. Sumrall 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, Levy W. Sumrall of Route #1, Box 33 A (Name of person found entitled) Franklintown State of Louisiana (Number, Street or Avenue) (City, Town or Village) father is the (Relationship or Capacity) of the above-named decedent and appears to be entitled to receive his or her effects.

(Signature of Summary Court Officer)
JOHN R. MURPHY, Colonel, C.M.C.
 (Name, Rank, Organization)
 SUMMARY COURT MARTIAL



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

RTB:MH:dw
August 1, 1945

352800

IN REPLY REFER TO _____

Mr. Levy W. Sumrall
Route #1, Box 33 A
Franklinton, Louisiana

Dear Mr. Sumrall:

The Army Effects Bureau has received from overseas some personal effects of your son, Technician Fifth Grade Lucious Sumrall.

These effects are being forwarded to you in one carton. Regrettably, included with his effects are two caps, a cloth bag, a pair of shoes, a watch and a testament which were damaged prior to receipt at this Bureau.

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
1st Lt., QMC
Officer-in-Charge
SJ Unit

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