

# INDIVIDUAL DECEASED PERSONNEL FILE

A/38

1	USMC ST. VOI FRANCE Plot O, Row e, Grave 35 Date reburied: 26 Jan/49 <b>DISINTERMENT DIRECTIVE</b>			
	SECTION A — NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER 3547 04771	DATE 15 03 48 <small>DAY MONTH YEAR</small>
NAME SCHWARTZ WILLIS R		SERIAL NUMBER 37196120	RANK PFC	ARM 1
CEMETERY LIMEY TOUL				DATE OF DEATH 13 503 80 <small>DAY MONTH YEAR</small>
PLOT L	ROW 2	GRAVE 49	COUNTRY FRANCE	DISPOSITION OF REMAINS 1 CAUSE OF DEATH 1
SECTION B — CONSIGNEE AND NEXT OF KIN				
NAME AND ADDRESS OF CONSIGNEE ST. AVOLD, FRANCE			NAME AND ADDRESS OF NEXT OF KIN MR. FREDERICK G. SCHWARTZ (FATHER) RURAL FREE DELIVERY #4 WASHINGTON, IOWA (Flag sent)	
SECTION C — DISINTERMENT AND IDENTIFICATION				
NAME SCHWARTZ, WILLIS R.		SERIAL NUMBER 37196120	RANK Pfc	DATE OF DEATH Est. 26 Nov 1944
DATE DISTINTERRED 13 May 1948				
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER		ORGANIZATION USAGF	RELIGION P	IDENTIFICATION VERIFIED BY JOHN G. WEST, EMBALMER <small>NAME AND TITLE</small>
SECTION D — PREPARATION OF REMAINS FOR SHIPMENT				
NATURE OF BURIAL MILITARY CLOTHING		CONDITION OF REMAINS CRUSHED SKULL. PARTIALLY DISARTICULATED. LARGE AMOUNT OF FLESH, ADVANCED STAGE OF DECOMPOSITION.		
OTHER MEANS OF IDENTIFICATION NONE				
MINOR DISCREPANCIES NONE				
REMAINS PREPARED AND PLACED IN <del>CASKET</del> transfer box DATE 13 May 1948 BY JOHN G. WEST, EMBALMER.				
CASKET SEALED BY Melvin W. Blackburn Emb.		EMBALMER (Signature) <i>Melvin W. Blackburn</i>		
CASKET BOXED AND MARKED DATE 9 June 48 BY Melvin W. Blackburn		SHIPPING ADDRESS VERIFIED BY all markings, plates and tags verified by: <i>H. Mead</i>		
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 JAMES B. JOHNS, 1ST LT. INF. 337 QM.SV.BN. <small>SIGNATURE OF GRS INSPECTOR</small>				
1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.				

## RECORD OF CUSTODIAL TRANSFER

1. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>[Signature]</i>	DATE	SIGNATURE OF RECEIVER	DATE
2. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
3. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
4. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
5. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
6. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
7. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

5 April 1949

Mr. Frederick G. Schwartz  
Rural Free Delivery #4  
Washington, Iowa

Pfc. Willis R. Schwartz, ASN 37 196 120  
Plot G, Row G, Grave 35  
Headstone: Cross  
St. Avold (France) U. S. Military Cemetery

Dear Mr. Schwartz:

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, Washington 25, D. C. Your letter should include the full name, rank, serial number, grave location, and name of the cemetery.

While interments are in progress, the cemetery will not be open to visitors. 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,

H. REIDMAN  
Major General  
The Quartermaster General

fem

APR 5 4 26 PM '49  
O. G. H. G.  
MAIL & TELETYPE DIVISION



FORM FOR DISPOSITION OF REMAINS

GRADE OF DECEASED, NAME, ARM

NUMBER AND REPORTED PLACE OF BURIAL

DATE:

Pfc. Willis R. Schwartz, 37 196 120  
 Plot L, Row 2, Grave 49,  
 United States Military Cemetery  
 Limay, France

21 July 1947

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

NOTE.—The next of kin should familiarize himself with the contents of the pamphlet, "Disposition of World War II Armed Forces Dead," before filling out this form. When the proper part of this form is filled out and properly signed by the next of kin, it should be returned to the OFFICE OF THE QUARTERMASTER GENERAL, MEMORIAL DIVISION, WAR DEPARTMENT, WASHINGTON 25, D. C., in the self-addressed postage-free envelope provided for this purpose. If you are the next of kin or authorized representative of next of kin and desire to direct the disposition of the remains, please fill in PART I of this form.

PART I

I, Frederick G. Schwartz (Please indicate relationship to the deceased by placing an "X" in the proper box.)  
(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

- 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  
(NAME AND LOCATION OF CEMETERY) \_\_\_\_\_
3. BE RETURNED TO \_\_\_\_\_ THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT \_\_\_\_\_  
(FOREIGN COUNTRY)      (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.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

OCT 1

**PART I (Continued)**

If on Page 1 of this form you have selected Option Number 2 or 3, or Option Number 4 with your own funeral ceremonies desired at a location other than the selected national cemetery, complete one of these sections.

I, AS THE NEXT OF KIN, DO FURTHER DECLARE THAT I DESIRE THE REMAINS TO BE SENT TO THE FOLLOWING PERSON WHO HAS AGREED TO RECEIVE THEM:

LAST NAME	FIRST NAME	MIDDLE INITIAL	
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
EXPRESS OFFICE ( <i>Nearest railroad passenger station</i> )	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 ( <i>Nearest railroad passenger station</i> )	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.

*Frederick G. Schwartz*  
(SIGNATURE OF NEXT OF KIN)

R. F. D. #4  
(STREET AND NUMBER)

Frederick G. Schwartz  
(NAME PRINTED OR TYPED)

Washington, Iowa  
(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 8th day of August, 1947, at city (or town) of Washington, county of Washington, and State (or Territory or District) of Iowa

*Flourence P. Sherman*  
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

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

NOTARY PUBLIC  
(OFFICIAL TITLE)

**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.

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

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





Pfc. Willis R. Schwartz, 37 196 120  
Plot L, Row 2, Grave 49,  
United States Military Cemetery  
Limey, France

21 July 1947

Mr. Fredrick G. Schwartz  
Rural Free Delivery #4  
Washington, Iowa

Dear Mr. Schwartz:

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,

Encls.

THOMAS B. LARKIN  
Major General  
The Quartermaster General

QMGR 203  
Schwartz, Willis R.  
A.S.N. 37 196 120

23 April 1947

Mr. Fredrick N. Schwartz  
Rural Free Delivery #4  
Washington, Iowa

Dear Mr. Schwartz:

Inclosed herewith is a picture of the United States Military Cemetery Libey, France, in which your son, the late Private First Class Willis R. Schwartz, 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

mg

G. A. HOKKAN  
Brigadier General, QMC  
Chief, Memorial Division

20 August 1946

Mr. Fredrick G. Schwartz  
Rural Free Delivery  
Washington, Iowa

Dear Mr. Schwartz:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Private First Class Willis R. Schwartz, A.S.N. 37 196 120.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Limey, plot L, row 2, grave 49. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located eighteen miles northwest of Nancy, France, and is under the constant care and supervision of United States military personnel.

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

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN  
Major General  
The Quartermaster General

J. fl

EWZ

Form 10-630 AND AR 30-1815  
Revised (12/30/78)

# REPORT OF BURIAL

28 Nov 1944 780  
Date

203

SCHWARTZ Willis R. Unknown 37196120 576

Co "A" 38th Armored Inf. Bn Unknown 7th Armd Div

Feve, France ~~Estimated 26 Nov 1944~~ 22 Sept 1944 SF in Back

1000 28 Nov 1944 U. S. Military Cemetery Limey, France

49 2 L Cross

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.

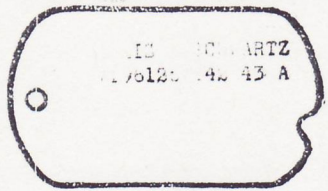
Who is buried on: \_\_\_\_\_

Deceased's Right: KONKEL 36150974 Unknown 7th Armd Div 48

Deceased's Left: LOMBARDI 20107851 Pvt 328th Inf 26th Div 50

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 Unknown

Religion Protestant

Name Address

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

Signature of Officer or other person reporting burial

JAMES T. PRIGMAN  
Capt MC  
Commanding 609 TM Gr Reg Co.

Verified by G.R.S. Officer



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

REPORT OF DEATH

DATE 28 December 1944  
mlb/tel/4626

FULL NAME <u>Schwartz, Willis R.</u>		ARMY SERIAL NUMBER <u>37196120</u>	GRADE <u>PFC</u>										
HOME ADDRESS <u>Washington, Iowa</u>		ARM OR SERVICE <u>Inf.</u>	DATE OF BIRTH <u>10 Feb 30</u>										
PLACE OF DEATH <u>European Area</u>	CAUSE OF DEATH <u>Killed in action</u>		DATE OF DEATH <u>22 Sep 44</u>										
STATION OF DECEASED <u>European Area</u>	DATE OF ENTRY ON CURRENT ACTIVE SERVICE <u>22 May 42</u>	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS											
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) <u>Mr. Fredrick G. Schwartz, Father, RFD #4, Washington, Iowa.</u>													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) <u>Mr. Fredrick G. Schwartz, Father, same as above.</u> <u>Mrs. Lulu Schwartz, Mother, same as above.</u>													
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
												<b>X</b>	

ADDITIONAL DATA AND/OR STATEMENT

The individual named in this report of death is held by the War Department to have been in a missing in action status from 22 September 1944 until such absence was terminated on 20 December 1944, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

**FILE**

5 - 1945

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

BATTLE

NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR

*J. Carl*

ADJUTANT GENERAL

260,000

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

REPORT OF DEATH

DATE 28 December 1944  
mlb/tel/4626

FULL NAME <u>Schwartz, Willis R.</u>		ARMY SERIAL NUMBER <u>37196120</u>	GRADE <u>PFC</u>										
HOME ADDRESS <u>Washington, Iowa</u>		ARM OR SERVICE <u>Inf.</u>	DATE OF BIRTH <u>10 Feb 30</u>										
PLACE OF DEATH <u>European Area</u>	CAUSE OF DEATH <u>Killed in action</u>		DATE OF DEATH <u>22 Sep 44</u>										
STATION OF DECEASED <u>European Area</u>	DATE OF ENTRY ON CURRENT ACTIVE SERVICE <u>22 May 42</u>	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS											
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) <u>Mr. Fredrick G. Schwartz, Father, RFD #4, Washington, Iowa.</u>													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) <u>Mr. Fredrick G. Schwartz, Father, same as above.</u> <u>Mrs. Lulu Schwartz, Mother, same as above.</u>													
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
												X	

ADDITIONAL DATA AND/OR STATEMENT

The individual named in this report of death is held by the War Department to have been in a missing in action status from 22 September 1944 until such absence was terminated on 20 December 1944, 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. Q. M. G.	O. F. D.	ARMY EFFECTS BUREAU
G. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BATTLE  
 NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR

*J. Carl*

ADJUTANT GENERAL



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

280002

—BATTLE CASUALTY REPORT

NAME <b>SCHWARTZ WILLIS R</b>			SERIAL NUMBER <b>37196120</b>		GRADE <b>PFC</b>	ARM OR SERVICE <b>INF</b>	REPORTING THEATRE <b>ETO</b>
PLACE OF CASUALTY <b>FRANCE 9</b>		DATE OF CASUALTY DAY MONTH YEAR <b>22 SEP 44</b>			FLYING OR JUMPING STAT	TYPE OF CASUALTY <b>MIA</b>	SHIPMENT NUMBER <b>211</b>

NAME AND ADDRESS OF EMERGENCY ADDRESSEE

INDIVIDUAL NAMED ABOVE DESIGNATED THE FOLLOWING PERSON AS THE ONE TO BE NOTIFIED IN CASE OF EMERGENCY, AND THE OFFICIAL TELEPHONIC 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 <b>MR FREDRICK G SCHWARTZ</b>	RELATIONSHIP <b>FATHER</b>	DATE NOTIFIED <b>11 OCT 1944 lfw</b>
NO. AND NAME OF STREET—CITY—STATE <b>RURAL FREE DELIVERY NUMBER FOUR WASHINGTON IOWA</b>		

REMARKS:

CORRECTED COPY

ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED  FORM 43  AG 201 REQ

CASUALTY BRANCH FILE ATTACHED  OR CHARGED TO  DATE

PREVIOUSLY REPORTED NO  YES  (AS INDICATED BELOW):

FILE NO.	MESSAGE NO.	TYPE	DATE AND AREA	E. A. NOTIFIED
----------	-------------	------	---------------	----------------

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

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

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

ACCT. AREA	CASUALTY STATUS	ORIGINAL CAS. DATE			MESSAGE NO.	LATEST CAS. DATE			REFERENCE AREA	CREW POS.	RESIDENCE		COMP	RACE											
		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"  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.

260002

DSJ:WB:cms  
May 7, 1946

22  
5/8

Dear Mr. Schwartz:

The Army Effects Bureau has received some additional property of your son, Private First Class Willis R. Schwartz.

This property, contained in one carton, is being sent you for distribution. If, for some reason, it has not been received within the next thirty days, this Bureau should be informed so that tracer may be instituted.

Yours very truly,

D. S. JOHNSTON  
2nd Lt., QMC  
Chief, Adm. Div.

AMOUNT OF CHECK	DISCREPANCY IN	INCLOSE VALUA	RECIPIENT FROM
	NAME	SHIP VALUABLES	CASUALTY REPORT
ACCOUNT NUMBER	SERIAL NUMBER	VALUABLES SHIPPED BY (clerk)	INVENTORY
	RANK		FORM 20
<p style="text-align: right;">Mr. Fredrick H. Schwartz</p> <p style="text-align: right;">REF #4</p> <p style="text-align: right;">Washington, Iowa</p> <p>Pfc. Willis R. Schwartz</p> <p>37196120</p> <p>260002 D</p>			LETTER
			NO. & TYPE OF CONTAINER
			ENVELOPE
			CARTONS
			PACKAGE
			FOOT LOCKER
			SPECIAL INSTRUCTIONS
			REMOVE GI
			SHIP BLOODSTAINED
			SHIP DAMAGED
REMOVE BL'DSTAINED			
REMOVE DAMAGED			
FILMS REMOVED			
DIARY REMOVED			
WB:mb SUMMARY COURT DATA			DATE ACTION TAKEN
DATE OF FINDING	APPLICANT		5-8-46
REMARKS			MAIL REVIEWER (initials)
			ll
			SHIPPED
			FRANKED
			EXPRESS
			MAY 10 1946
			DATE SHIPPED
			SHIPPING CLERK
			ROUTING
			ACCOUNTING BRANCH
WAREHOUSE			
FILE			
ORDER FOR ACTION			

EFF OM FORM 14  
10 OCT 1945

SCHWARTZ, WILLIS		PFC	6120	
DAY	PALLET	BOX	TALLY	TYPE PKG
9		7	7232	PKG

<input checked="" type="checkbox"/>	INBOUND INVENTORY
<input type="checkbox"/>	G. R. OR SUB GR LABEL
<input type="checkbox"/>	WILL OR POWER OF ATTY.
<input checked="" type="checkbox"/>	TALLY IN FORM 43

### EFFECTS INVENTORY ARMY EFFECTS BUREAU

DECEASED	
MISSING	
P. O. W.	
ABANDONED	
UNKNOWN	

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

CONTAINERS ADDRESSED TO <p style="font-size: 2em; text-align: center;"><i>None.</i></p>	INFORMATION <p style="font-size: 1.2em;"><i>Miss HELEN SCHWARTZ RURAL ROUTE #4 W. ASHLINGTON, IOWA</i></p>
NAME AND STATUS VARIATIONS <p style="font-size: 1.2em;"><i>#43 stone Willis Schwartz</i></p>	CROSS REFERENCE

DAMAGED

<input type="checkbox"/> CHECK	REC'D BY		NUMBER		BUREAU CHECK
<input type="checkbox"/> MONEY ORDER		SYMBOL		TRANSMIT ORIGINAL	
<input type="checkbox"/> BOND		AMOUNT		ORIG. REG. MAIL	
<input type="checkbox"/> TRAV. CHECK		DATE		TO G. A. O.	
<input type="checkbox"/> FOREIGN CURRENCY				MUTILATED	
<input type="checkbox"/> U. S. CURRENCY				TO ISSUING AGENCY	
BANK OR PLACE OF ISSUE					
PAYEE					
REMITTER OR DRAWER					

TALLY NO. <i>7232</i>	ORIG. NO. OF PKGS.	EXAMINING DATE <i>16 Apr. 46</i>	BOX NO.	SHEET _____ OF _____ SHEETS
NAME <i>Willis P. Schwartz</i>			A. S. N. <i>3719/120</i>	
ORGANIZATION			RANK <i>P. Lt.</i>	CASE NO.
WAREHOUSE SPACE		EXAMINED BY <i>Es...</i>	DIARY REMOVED	
PACKED BY		PHOTO FILM REMOVED		
INSPECTED BY		MOTION PICTURE FILM REMOVED		
PACKAGE DESCRIPTION		SHIPPED		
WEIGHT		DATE	BY WHOM	



October 7, 1944

Subject: Inventory of Personal Effects of:

Pfc. Willie A. Schwartz, 37196120

Effects Quartermaster, Communication Zone

The above named individual of 36th Armored Infantry Bn.  
36th Armored Division was reported MIA about 22 September 1944.

Next of kin beneficiary is not readily accessible.

---

INVENTORY OF EFFECTS

- 1 Pr. Civilian Shoes ✓
- 1 Pr. Glasses ✓
- 1 Fountain Pen ✓
- 1 Envelope Letter ✓
- 1 Civilian Lip ✓

No Money

I certify that the above items constitute all of the effects,  
known by me, of the above named individual and that they were  
forwarded to the Effects Depot by Truck on October 7, 1944.

*H. A. Pickford*

H. A. PICKFORD

1st Lt., USG, 8-1010270

Headquarters 7th . . .

260002

RTB:WA:am  
August 9, 1945

Mr. Fredrick G. Schwartz  
R. F. D. #4  
Washington, Iowa

Dear Mr. Schwartz:

The Army Effects Bureau has received additional property of your son, Private First Class Willis R. Schwartz, consisting of funds in the amount of \$5.28. A check for this sum is inclosed.

As previously indicated, such property is forwarded for distribution in accordance with the laws of the state of the soldier's legal residence.

Sincerely,

C. B. QUINN  
2nd Lt., GMC  
Chief, Files Branch

1 Incl--  
Check

ARMY SERVICE FORCES  
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mr. Fredrick G. Schwartz

Effects of:  
Name 1fc. Willis P. Schwartz  
ASN 37196120  
Case No. 260002 D  
Wt.

P. P. O. #4  
Washington, Iowa

DATE 9 August 1945  
RTB:WA:am

Bob  
FOR: Effects Quartermaster

REMARKS:

x Inclose Bureau Check  
Acct. No. 116714  
Amount 35.28 *Use*  
— Inclose "Valuables" item  
— Ship "Valuables" item(s)

— Remove G.I.  
— Note discrepancy in         
— Films removed  
— Diary removed  
— Laundry removed

ROUTING:

1 Accounting Branch *ev*  
— Warehouse Division  
2 Files Branch, Adm. Div.

116714

260002

117375 dk

August 14 45

Fredrick G. Schwartz

5.28

Five and 28/100

REMARKS:

Franked         
Est. Exp. Chgs.         
Est. Frt. Chgs.         
No. of packages       

Shipping Clerk



ARMY EFFECTS BUREAU  
INVENTORY

CASE NO.	260,002 <i>ns</i>
TYPED BY	jc
DATE	6/13/45
STATUS	DEC
NAME	Willis E. Schwartz
A.S.N.	37196120 ✓ <i>filed</i>
RANK	Unk
ORGANIZATION	
AMOUNT	PAID-Check No. 117325 <i>m.s.</i> ACCOUNT NO. 116714 <i>LE</i> 5.28
LIST NO.	F 185
REMARKS	

A C C O U N T I N G   I N V E N T O R Y

KANSAS CITY QUARTERMASTER DEPOT  
601 Hardesty Avenue  
Kansas City 1, Missouri

Case No. 240002  
Date 16 June 1945

SUBJECT: Report of transaction in disposing of the effects of

Willis D. Schwartz, 37196120 late a  
(Name of deceased) (Army Serial Number)

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

on the 22 day of September, 1944, at European Area

TO : The Adjutant General, War Department, Washington 25, D.C.

1. Complying with A.W. 112, a Summary Court-Martial, convened at Kansas City Mo. Pursuant to S.O., 228 Hq., KCQM Depot, dated 25 September 1943, for the purpose of disposing of the effects of the above-named soldier, or person subject to military law, reports that:

a. No legal representative or widow of decedent being present 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 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 14 June 1945, pursuant to Special Orders 228, Headquarters KCQM Depot, dated 25 September 1943, the application or affidavit of Fredrick G. Schwartz 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, Fredrick G. Schwartz of R.F.D. #4, Washington State of Iowa, is the Father of the above-named decedent and appears to be entitled to receive his or her effects.

(Signature of Summary Court Officer)

JOHN E. MURPHY, Colonel, C.M.C.  
(Name, Rank, Organization)



ARMY SERVICE FORCES  
KANSAS CITY QUARTERMASTER DEPOT

601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

GHG:WA:mp  
June 19, 1945

260002  
IN REPLY REFER TO

Mr. Fredrick G. Schwartz  
R.F.D. #4  
Washington, Iowa

Dear Mr. Schwartz:

The Army Effects Bureau has received from overseas some property of your son, Private First Class Willis R. Schwartz.

This property, consisting of a knife and souvenir coins, is being sent you. Regrettably the knife was damaged prior to receipt at this Bureau.

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

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

67  
Yours very truly,

P. L. KOEB  
1st Lt. Q.M.C.  
Officer-in-Charge  
BJ Unit

NOT REMOVED

SUPERVISOR

*[Handwritten signature]*

INVENTORY CLERK

*[Handwritten signature]*

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

262 pieces  
262 pieces  
1 piece # 38

AMOUNT

211-226

SYMBOL

DATE

NUMBER

U.S. GOVT. CHECK SHORT

SHORTAGES

ORDER FOR SHIPMENT

Mr. Fredrick G. Schwartz

R.F.D. #4

Washington, Iowa

SHIP TO  
PFC Willis R. Schwartz

37196120 ✓

260002 D

*filed*

Effects of:

Name

ASN

Case No.

Qt.

DATE 19 June 1945

GHG:WA:mp

*R. G. Schwartz*  
PO: 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.

*1 phy*

REMARKS:

NOTE: Ship damaged property.

\_\_\_\_ Franked  
\_\_\_\_ Est. Exp. Chgs.  
\_\_\_\_ Est. Frt. Chgs.  
\_\_\_\_ No. of packages

FRANKED

JUN 25 1945

*J.K.*

Shipping Clerk

# 49 Row 2 - L

Schwartz, Willis R.

Unlabeled

37196120

NI 20 Jan 45

NAME SCHWARTZ, WILLIS R. -- 6120

BAY	PALLET	BOX	TALLY
	7	14	8034
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
PEB			

EF. QM Form 48

R E S T R I C T E D  
INVENTORY FORM

30 Nov 44  
Date

SUBJECT: Inventory of Personal Effects of:

SCHWARTZ Willis R Unknown 37196120  
(Last Name) (First Name) (MI) (Rank) (ASN)

TO: Effects Quartermaster, Communications Zone, APO 507 US Army

The above named individual of 38th Arm'd Inf. Bn Unknown  
(Unit) (Organization)

was reported Deceased about Estimated 26 Nov 1944.  
Status (KIA, MIA, Hosp. etc.) (Date)

Designated Beneficiary if information readily accessible Unknown

I N V E N T O R Y O F E F F E C T S

- 1 Pen Knife ✓
- 3 English Coins 2 1/2 Pence ✓
- 262 Francs ○

Money in the amount of 262 Francs has been turned into CHAS. S. MCCORMICK Jr. Lt. Col.  
(Name of finance office and

F. D. 211-226 Form WDFD 38 enclosed. ○  
symbol number)

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

I certify that the above items constitute all of the effects, secured by me, of the above named individual and that they ~~will be~~ forwarded to the Effects Depot by Truck on 7 Dec 1944.  
(Rail, Truck, etc.)

Name \_\_\_\_\_  
Rank & ASN JAMES T. PASSMAN  
capt 0-455018  
Organization 609 CM Gr Reg Co.

Any additional pertinent information: