

INDIVIDUAL DECEASED PERSONNEL FILE

1	USMC, ST. AVOLD, FRANCE Plot C, Row 3, Grave 72 Date reburied: 1 Feb. 49		Buried at deceased Left: DISINTERMENT DIRECTIVE	
SECTION A - NAME AND BURIAL LOCATION OF DECEASED M.R. SWART CAPT. QMC		DIRECTIVE NUMBER 3504 03159		DATE 15 07 48 <small>DAY MONTH YEAR</small>
NAME VENNE MAURICE A		SERIAL NUMBER 31109266	RANK PVT	ARM 1
CEMETERY ANDILLY - LAY ST REMY		DISPOSITION OF REMAINS 1 3503 80 <small>CODE DIST. PT.</small>		DATE OF DEATH <small>DAY MONTH YEAR</small>
PLOT H	ROW 6	GRAVE 139	COUNTRY FRANCE	CAUSE OF DEATH 2
SECTION B - CONSIGNEE AND NEXT OF KIN				
NAME AND ADDRESS OF CONSIGNEE ST AVOLD, FRANCE			NAME AND ADDRESS OF NEXT OF KIN DELIA M. VENNE (MOTHER) 20 HOLLY STREET CONCORD, NEW HAMPSHIRE FEB 5 1949 (Flag sent)	
SECTION C - DISINTERMENT AND IDENTIFICATION				
NAME		SERIAL NUMBER	RANK	DATE OF DEATH
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER		ORGANIZATION USAGF	RELIGION	IDENTIFICATION VERIFIED BY NAME AND TITLE
SECTION D - PREPARATION OF REMAINS FOR SHIPMENT				
NATURE OF BURIAL		CONDITION OF REMAINS		
OTHER MEANS OF IDENTIFICATION SEE ATTACHED WORK SHEET				
MINOR DISCREPANCIES /				
REMAINS PREPARED AND PLACED IN CASKET				
DATE BY		EMBALMER (Signature)		
CASKET SEALED BY Geo W Lowry, Embalmer		Geo W Lowry <i>Geo W Lowry</i>		
CASKET BOXED AND MARKED 35 Aug 48 Geo W Lowry, Embalmer		SHIPPING ADDRESS VERIFIED BY all markings, tags and plates <i>W. H. Sackett</i>		
DATE BY		SIGNATURE OF GRS INSPECTOR W. H. Sackett, 1st Lt QMC		
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct. Final casketing by <i>W. H. Sackett</i>				
RECORDS MAINTAINED DATE 25-9-49 R & R BR.				
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> 1st Lt Inf		DATE AUG 18 1948	SIGNATURE OF RECEIVER <i>[Signature]</i>
		DATE	DATE
2. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER		DATE	SIGNATURE OF RECEIVER
		DATE	DATE
3. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER		DATE	SIGNATURE OF RECEIVER
		DATE	DATE
4. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER		DATE	SIGNATURE OF RECEIVER
		DATE	DATE
5. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER		DATE	SIGNATURE OF RECEIVER
		DATE	DATE
6. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER		DATE	SIGNATURE OF RECEIVER
		DATE	DATE
7. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER		DATE	SIGNATURE OF RECEIVER
		DATE	DATE

DISINTERMENT DIRECTIVE

1

**SECTION A —
NAME AND BURIAL LOCATION OF DECEASED**

DIRECTIVE NUMBER

DATE

NAME
VENNE MAURICE A

SERIAL NUMBER
31109266

RANK
PVT

ARM
1

DATE OF DEATH
DAY MONTH YEAR

CEMETERY

DISPOSITION OF REMAINS

LOT ROW GRAVE COUNTRY
H 6 139 ANDILLY FRANCE

CODE DIST. PT.
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
VENNE, Maurice A

SERIAL NUMBER
31109266

RANK
Pvt.

DATE OF DEATH

DATE DISTINTERRED
23 June 48

IDENTIFICATION TAG ON
 REMAINS
 MARKER

ORGANIZATION

RELIGION
C

IDENTIFICATION VERIFIED BY
PHILIP F. PFAFF, Embalmer
NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

Military Clothing

CONDITION OF REMAINS

**Advanced stage of decomposition. Extremities
disarticulated. Fractured skull & Facial
bones.**

OTHER MEANS OF IDENTIFICATION

GRS. Tag found on marker

MINOR DISCREPANCIES

GRS Tag Reads "MAURICE A. WENNE"

REMAINS PREPARED AND PLACED IN CASKET: **transfer box**

DATE
23 June 48

CASKET SEALED BY

BY

Philip F. Pfaff
PHILIP F. PFAFF, Embalmer

EMBALMER (Signature)

CASKET BOXED AND MARKED

DATE BY

SHIPPING ADDRESS VERIFIED BY: **All drawings, tags &
plates verified by:**

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

James B. Jones
JAMES B. JONES, 1ST. LT. INF. 337 QM. SV. BN.

SIGNATURE OF GRS INSPECTOR

GH

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

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

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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

8 April 1949

Pvt. Maurice A. Venne, ASN 31 109 266
Plot C, Row 3, Grave 72
Headstone: Cross
St. Avold (France) U. S. Military Cemetery

Mrs. Delia M. Venne
20 Holly Street
Concord, New Hampshire

Dear Mrs. Venne:

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. FELDMAN
Major General
The Quartermaster General

oej

APR 12 12 40 PM '49

U. S. ARMY
MAIL RECORDS BRANCH

~~Prvt. Maurice A. Venne, 31 109 266~~
Plot H, Row 6, Grave 139,
United States Military Cemetery
Andilly, France

30 July 1948

Mrs. Delia Mary Venne
20 Holly Street
Concord, New Hampshire

Dear Mrs. Venne:

Since the dispatch of the Letter of Inquiry "Request for Disposition of Remains", it has been necessary to designate the United States Military Cemetery St. Avold, France, as the permanent resting place for those deceased now interred in the United States Military Cemetery Andilly, France.

The remains of your loved one will be interred in the United States Military Cemetery St. Avold, located twenty-three miles east of Metz, France, instead of Epinal France as previously advised. When final interment has been accomplished, you will be advised of the exact grave location.

Sincerely yours,

G. A. HORKAN
Major General, GMC
Chief, Memorial Division

AUG 5 12 23 PM '48
O. D. M. C.
MAIL & RECORDS BRANCH

J. M.

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

Pvt. Maurice A. Venne, 31 109 266
 Plot H, Row 6, Grave 139,
 United States Military Cemetery
 Andilly, France

29 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, Delia Mary Venne (PLEASE PRINT OR TYPE NAME OF NEXT OF KIN) (Please indicate relationship to the deceased by placing an "X" in the proper box.)

- | | | | |
|---------------------------------|--|--|---|
| <input type="checkbox"/> WIDOW | <input type="checkbox"/> WIDOWER | <input type="checkbox"/> SON OVER 21 YEARS OLD | <input type="checkbox"/> DAUGHTER OVER 21 YEARS OLD |
| <input type="checkbox"/> FATHER | <input checked="" type="checkbox"/> MOTHER | <input type="checkbox"/> BROTHER OVER 21 YEARS OLD | <input type="checkbox"/> 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 _____ (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.)

66: 25

PART I (Continued)

If on Page 1 of this form you have selected Option Number 2 or 3, or Option Number 4 with your own funeral ceremonies desired at a location other than the selected national cemetery, complete one of these sections.
 I, AS THE NEXT OF KIN, DO FURTHER DECLARE THAT I DESIRE THE REMAINS TO BE SENT TO THE FOLLOWING PERSON WHO HAS AGREED TO RECEIVE THEM:

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

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

FULL NAME OF FUNERAL DIRECTOR			
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.)*

~~Delia Mary Venne, Mother is next of kin. Arthur G. Venne, father, deceased in 1943~~

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.

Delia Mary Venne
 (SIGNATURE OF NEXT OF KIN)

20 Holly Street, Concord, New Hampshire
 (STREET AND NUMBER)

Delia Mary Venne (Mrs.)
 (NAME PRINTED OR TYPED)

(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 4th day of Sept.

1947, at city (or town) of Concord, county of MERRIMACK, and State (or Territory or District) of New Hampshire

Alice F. Drury
 (SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

Notary Public
 (OFFICIAL TITLE)

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

PAGE 2 My Commission Expires Jan. 30, 1952

PART II —RELINQUISHMENT OF DISPOSITION AUTHORITY

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

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

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

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

_____	_____
(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 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

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

Pvt. Maurice A. Venne, 31 109 266
Plot H, Row 6, Grave 139,
United States Military Cemetery
Andilly, France

29 July 1947

Mr. Arthur G. Venne
20 Holly Street
Concord, New Hampshire

Dear Mr. Venne:

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.

MAIL ROOM

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

Incls.

fbc

21 July 1947

Mr. Arthur G. Venne
20 Holly Street
Concord, New Hampshire

Dear Mr. Venne:

293 The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Private Maurice A. Venne, A.S.N. 31 109 266.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Andilly, plot H, row 6, grave 139. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

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

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

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

JUL 21 12 10 PM '47
O. Q. M. G.
MAIL & RECORDS BRANCH

RESTRICTED

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

34 46974
8 Oct 1944
Date

am

Venne Maurice A Pvt 31109266
 Last Name Initial Rank Serial No.
 Unk 38 Unk Inf. Un
 Unit Organization
 Metz France 1 Oct 1944 app KIA
 Place of Death Date of Death Cause of Death
 7 Oct 1944 1030 U S Mil Cem #1 Andilly France
 Time and Date of Burial Name of Cemetery Name or Coordinates of Location
114 139 6 5 H 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?

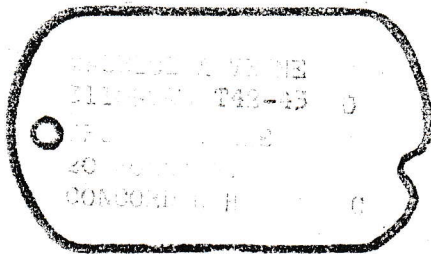
What means of identification were buried with the body?

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

Who is buried on: Robert Spears 0-1180055 2nd Lt 733 FAD 138
 Deceased's Right: Name Serial No. Rank Organization Grave No. 1183 (K)

Deceased's Left: James H Brown 36896974 Unk Unk 140
 Name Serial No. Rank Organization Grave No. 115

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 _____ Name
 _____ Address
 Religion C

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

[Signature]
 Signature of Officer or other person reporting burial
 BORIS MILLER
 1st Lt QMC
 3043 QMGR CO
 Verified by G.R.S. Officer

File 8-17-45
015

IF DECEASED UNIDENTIFIED

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

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

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

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

Left Hand

4	3	2	1
Thumb			

4	3	2	1
Thumb			

Right Hand

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	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8

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.

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

REPORT OF DEATH

DATE 30 Oct 1944
KS/4624

FULL NAME Venne, Maurice A.		ARMY SERIAL NUMBER 31,109,266	GRADE Pvt.						
HOME ADDRESS Concord, New Hampshire		ARM OR SERVICE Inf.	DATE OF BIRTH 13 Dec 1914						
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH 11 Sept 1944						
STATION OF DECEASED European Area	DATE OF ENTRY ON CURRENT ACTIVE SERVICE 1 Jun 1942	LENGTH OF SERVICE FOR PAY PURPOSES <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>YEARS</td> <td>MONTHS</td> <td>DAYS</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>		YEARS	MONTHS	DAYS			
YEARS	MONTHS	DAYS							
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Delia M. Venne, mother, 20 Holly St., Concord, New Hampshire									
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Delia M. Venne, mother, same as above Mr. Arthur G. Venne, father, same as above									
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)									
YES	NO								

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 11 Sept 1944 until such absence was terminated on 27 Oct 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.
S. O. G. 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. P. Carl

ADJUTANT GENERAL

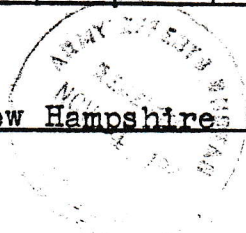
24250
15

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

REPORT OF DEATH

DATE 30 Oct 1944
KS/4624

FULL NAME <p style="text-align: center;">Venne, Maurice A.</p>		ARMY SERIAL NUMBER <p style="text-align: center;">31,109,266</p>	GRADE <p style="text-align: center;">Pvt.</p>						
HOME ADDRESS <p style="text-align: center;">Concord, New Hampshire</p>		ARM OR SERVICE <p style="text-align: center;">Inf.</p>	DATE OF BIRTH <p style="text-align: center;">13 Dec 1914</p>						
PLACE OF DEATH <p style="text-align: center;">European Area</p>	CAUSE OF DEATH <p style="text-align: center;">Killed in action</p>		DATE OF DEATH <p style="text-align: center;">11 Sept 1944</p>						
STATION OF DECEASED <p style="text-align: center;">European Area</p>		DATE OF ENTRY ON CURRENT ACTIVE SERVICE <p style="text-align: center;">1 Jun 1942</p>	LENGTH OF SERVICE FOR PAY PURPOSES <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>YEARS</td> <td>MONTHS</td> <td>DAYS</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	YEARS	MONTHS	DAYS			
YEARS	MONTHS	DAYS							
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) <p style="text-align: center;">Mrs. Delia M. Venne, mother, 20 Holly St., Concord, New Hampshire</p>									
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) <p style="text-align: center;">Mrs. Delia M. Venne, mother, same as above Mr. Arthur G. Venne, father, same as above</p>									
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)		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 11 Sept 1944 until such absence was terminated on 27 Oct 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.
I. G. Q. M. G.	G. F. D.	ARMY EFFECTS BUREAU
G. A. O.	VEY. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BATTLE

NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:

J. P. Curl

ADJUTANT GENERAL

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

204120

—BATTLE CASUALTY REPORT

NAME		SERIAL NUMBER		GRADE	ARM OR SERVICE	REPORTING THEATRE
VENNE MAURICE A		31109386		PVT	INF	ETC
PLACE OF CASUALTY	DATE OF CASUALTY			FLYING OR JUMPING STAT	TYPE OF CASUALTY	SHIPMENT NUMBER
		DAY	MONTH			
FRANCE	11	SEP	44		MIA	197

NAME AND ADDRESS OF EMERGENCY ADDRESSEE

THE INDIVIDUAL NAMED ABOVE DESIGNATED THE FOLLOWING PERSON AS THE ONE TO BE NOTIFIED IN CASE OF EMERGENCY, AND THE OFFICIAL TELEGRAPHIC AND LETTER NOTIFICATIONS WILL BE SENT TO THIS PERSON. THE RELATIONSHIP, IF ANY, IS SHOWN BELOW. IT SHOULD BE NOTED THAT THIS PERSON IS NOT NECESSARILY THE NEXT-OF-KIN OR RELATIVE DESIGNATED TO BE PAID SIX MONTHS' PAY GRATUITY IN CASE OF DEATH

MR.-MRS.-MISS—FIRST NAME—MIDDLE INITIAL—LAST NAME	RELATIONSHIP	DATE NOTIFIED
MRS DEBRA H VALL	SISTER	26 SEPT 44
NO. AND NAME OF STREET—CITY—STATE		
20 HOLLY STREET BOSTON NEW HAMPSHIRE		

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 CURRES. 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.

244120

JRM:JFH:md
April 13, 1945

Mr. Arthur G. Venne
20 Holly Street
Concord, New Hampshire

Dear Mr. Venne:

The Army Effects Bureau has received from overseas some personal effects of your son, Private Maurice A. Venne.

These effects are being forwarded to you in one package.

If, by any chance, the property has not reached you at the expiration of thirty days from this date, please notify me and tracer will be instituted.

The action of this Bureau in transmitting personal effects does not, of itself, vest title in the recipient. Such property is forwarded for distribution according to the laws of the state of the soldier's legal residence.

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

Yours very truly,

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

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO: Mr. Arthur G. Venne
20 Holly Street
Concord, New Hampshire

Effects of: Pvt. Maurice A. Venne
Name
ASN 31109266
Case No. 244120 D
Wt.

DATE 13 April 1945
JRM:JFH:md

[Handwritten Signature]
FOR: Effects Quartermaster

REMARKS:

<input type="checkbox"/> Inclose Bureau Check	<input type="checkbox"/> Remove G.I.
<input type="checkbox"/> Acct. No. _____	<input type="checkbox"/> Note discrepancy in _____
<input type="checkbox"/> Amount _____	<input type="checkbox"/> Films removed
<input type="checkbox"/> Inclose "Valuables" item	<input type="checkbox"/> Diary removed
<input type="checkbox"/> Ship "Valuables" item(s)	<input type="checkbox"/> Laundry removed

ROUTING:

Accounting Branch
 1 Warehouse Division
 2 Files Branch, Adm. Div.

REMARKS:

[Handwritten Signature]

Franked MAIL APR 17 1945
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____
No. of packages 1

[Handwritten Signature]
Shipping Clerk

BOX NUMBER <i>5</i>	ORIGINAL NUMBER OF PACKAGES <i>1</i>	MISSING P O W ABANDONED
TALLY NUMBER <i>6778</i>	INVENTORY DATE <i>21 March 1945</i>	CASE NUMBER <i>244, 120</i>
EFFECTS OF <i>MAURICE A VENNE</i>		RANK <i>PIT</i>
A.S.N. <i>31109266</i>	ORGANIZATION	

PACKAGE DESCRIPTION		
CLOTHING	PERSONAL ITEMS	CONTAINERS
<input type="checkbox"/> BELT	<input checked="" type="checkbox"/> BRACELET, IDENTIFICATION	<input type="checkbox"/> BAGS, CLOTH
<input type="checkbox"/> BELT, MONEY (NO MONEY)	<input type="checkbox"/> BRUSHES	<input type="checkbox"/> BAGS, TRAVEL
<input type="checkbox"/> CLOTH, WASH	<input type="checkbox"/> CAMERAS	<input type="checkbox"/> BILLFOLD, (NO MONEY)
<input type="checkbox"/> COATS	<input type="checkbox"/> GLASSES	<input type="checkbox"/> CASE
<input type="checkbox"/> FOOTWEAR, PR.	<input type="checkbox"/> KNIVES	<input type="checkbox"/> FOOTLOCKER
<input type="checkbox"/> GLOVES, PR.	<input type="checkbox"/> LIGHTERS	<input type="checkbox"/> KIT, SEWING
<input type="checkbox"/> HANKERCHIEFS	<input type="checkbox"/> MISC. INSIGNIA	<input type="checkbox"/> KIT, TOILET
<input type="checkbox"/> HEADWEAR	<input type="checkbox"/> MISC. ITEMS	<input type="checkbox"/> KIT, WRITING
<input type="checkbox"/> JACKETS	<input checked="" type="checkbox"/> PEN, FOUNTAIN	<input type="checkbox"/> PAPERS AND MISC.
<input type="checkbox"/> OVERCOATS	<input type="checkbox"/> PENCIL, MECHANICAL	<input type="checkbox"/> BOOKS
<input type="checkbox"/> SCARFS	<input type="checkbox"/> PIPES	<input type="checkbox"/> BOOKS, ADDRESS
<input type="checkbox"/> SHIRTS	<input type="checkbox"/> RELIGIOUS ARTICLES	<input type="checkbox"/> BOOKS, NOTE
<input type="checkbox"/> SOCKS, PR.	<input type="checkbox"/> RIBBONS, DECORATION	<input type="checkbox"/> BOOKS, PILOT LOG
<input type="checkbox"/> TIES	<input type="checkbox"/> RINGS	<input type="checkbox"/> DIARY (REMOVED FOR DURATION)
<input type="checkbox"/> TOWELS	<input type="checkbox"/> TOBACCO	<input type="checkbox"/> FILMS
<input type="checkbox"/> TROUSERS, PR.	<input type="checkbox"/> TOILET ARTICLES	<input type="checkbox"/> LETTERS
<input type="checkbox"/> TRUNKS, PR	<input type="checkbox"/> WATCH	<input checked="" type="checkbox"/> PAPERS, PERSONAL
<input type="checkbox"/> UNDERWEAR	<input type="checkbox"/> WINGS	<input type="checkbox"/> PHOTOS
		<input type="checkbox"/> SHOE SHINE ARTICLES
		<input type="checkbox"/> SHORT SNORTER
		<input type="checkbox"/> SOUVENIRS
		<input type="checkbox"/> SOUVENIR MONEY
		<input type="checkbox"/> STATIONERY
		<input type="checkbox"/> TESTAMENTS
		<input type="checkbox"/> U.S. MONEY (AMOUNT)

REMARKS: <i>Was Maurice Venne 50 Kelly St. Camden N.H.</i>	ATTACHMENTS: <i>10/1/45</i>	FORM #54	FORM #100
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C.A.T. <i>MC</i>	WEIGHT	GI REMOVED
		SHORTAGE ON REVERSE
		IDENT. TAGS REMOVED
		DIARY REMOVED
WAREHOUSE SPACE	STORED BY	DATE SHIPPED
		LOCKED STORAGE
INVENTORIED BY		LAUNDRY REMOVED

NAME

VENNE, MAURICE A 31109266

BAY	PALLET	BOX	TALLY
		5	6978
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
GRB			

Eff. QM Form 48

MAURICE A VENNE
31109266 T42-43 O
DEPT. OF DEFENSE
20 HOLLY ST
CONCORD N H C

RESTRICTED

INVENTORY OF PERSONAL EFFECTS

US Mil. Cem. No. 1 Andilly, France
8 October 1944

file ch

Date

SUBJECT: Inventory of Personal Effects of:

Venne, Maurice A. Pvt. 31109266
(Last Name) (First Name) (II) (Rank) (ASN)

TO: Effects Quartermaster, Communication Zone, APO
US Army

The above named individual of Unk
(Unit) (Organization)

was reported KIA about 1 Oct. 1944
(Status-killed, MIA, Hospitalized, etc.) (Date)

Designated beneficiary if information readily accessible _____

INVENTORY OF EFFECTS

Class 1

- 1 Postal MO rec. (\$100.00) ✓
- 1 Ident. bracelet ✓
- 1 Fountain pen ✓

NO CURRENCY

Money in the amount of _____ has been turned into _____
(Name of finance officer)

Form WTB 38 enclosed.
(and 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 were forwarded to the Effects Depot by _____ on _____ 1944.
(Mail, Truck, etc.)

Name *Boris Miller*
Rank & ASN BORIS MILLER
1st Lt. QMC
Organization 3043 QM GR CO

Any additional pertinent information:

Serial No. 115226 Name PERMETHANE A
Grade _____ Rank _____
Organization _____
Address _____
Nearest Relative _____ MOTHER
Address _____
Killed in Action _____ Died of Disease _____
Date _____ Hospital _____
Battle Area _____ Information _____
Place of Burial _____
Point of Coordination _____
Description of Body _____
Members Missing _____
Signed _____

6978

H-5-114

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

Case No. 244120
Date 13 April 1945

SUBJECT: Report of transaction in disposing of the effects of

Maurice A. Venne, 31109668 late a
(Name of Decedent) (Army Serial Number)
Private, Infantry who died
(Grade) (Organization, Army or Service)
on the 11 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., 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 10 April 1945, pursuant to Special Orders 228, Headquarters KQCM Depot, dated 25 September 1943, the application or affidavit of _____

Arthur G. Venne 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, Arthur G. Venne of
(Name of person found entitled)
20 Holly Street, Concord, State of
(Number, Street or Avenue) (City, Town or Village)
New Hampshire, is the father of the
(Relationship or Capacity)

above-named decedent and appears to be entitled to receive his or her effects.

(Signature of Summary Court Officer)

JOHN R. MURPHY, Colonel, G.M.C.

(Name, Rank, Organization)
SUMMARY COURT MARTIAL