

BH J.M.P. CAM

DISINTERMENT DIRECTIVE

1
293

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
1240 011-9

DATE
02 07 47
DAY MONTH YEAR

NAME
BEVALAQUA JOHN

SERIAL NUMBER
33153733

RANK
PFC

ARM
I

DATE OF DEATH
DAY MONTH YEAR

CEMETERY
HENRI CHAPELLE

DISPOSITION OF REMAINS
3200 7
CODE DIST. PT.

PLOT
TT

ROW
8

GRAVE
159

COUNTRY
BELGIUM

CAUSE OF DEATH

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
JOHN F. YONEY FUNERAL HOME
216 EAST PIKE STREET
CANONSBURG, PENNSYLVANIA

NAME AND ADDRESS OF NEXT OF KIN
MR. ANTHONY F. BEVALAQUA
7 1/2 YOUNGSTOWN AVENUE
CANONSBURG, PENNSYLVANIA

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME
BEVALAQUA, JOHN

SERIAL NUMBER
33153733

RANK
Pfc

DATE OF DEATH
Est 26 Dec 44

DATE DISTINTERRED
20 Aug 47

IDENTIFICATION TAG ON
 REMAINS
 MARKER

ORGANIZATION
HQ CO, 48TH ARMD
INF BN, 5TH ARMD DIV.

RELIGION
0

IDENTIFICATION VERIFIED BY
David L. Benshoff
David L. Benshoff, Capt
NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL
In mattress cover and uniform

CONDITION OF REMAINS
Complete, skull fractured

OTHER MEANS OF IDENTIFICATION
None

MINOR DISCREPANCIES
None

REMAINS PREPARED AND PLACED IN CASKET

DATE 20/8/47 BY Edmond C. Lyons, Emb Supv

CASKET SEALED BY
Edmond C. Lyons, Emb Supv

EMBALMER (Signature)
Edmond C. Lyons
Edmond C. Lyons, Emb Supv

CASKET BOXED AND MARKED
SHIPPING ADDRESS VERIFIED BY 537 QM Sery Co

DATE 20/8/47 BY Charles E. Hackler, Clk Rec Edmond C. Lyons, 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.

David L. Benshoff
David L. Benshoff, Capt., Inf

SIGNATURE OF GRS INSPECTOR

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

file
H.A.T.
E. Caplan
1-12-48

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

| | | | |
|--|------------------------|---|------------------------|
| FROM J.S. MC. HENRI CHAPELLE, BELGIUM | | TO LIEGE, BELGIUM (BARGE LOADING POINT) | |
| KIND OF CONVEYANCE TRUCK | | NAME OF CONVOYER SAINT-VALENZUELA R A 39570049 | |
| SIGNATURE OF SHIPPER <i>[Signature]</i> | DATE 25/8/47 | SIGNATURE OF RECEIVER <i>[Signature]</i> | DATE 25/8/47 |

2. SHIPPED

| | | | |
|---|------------------------|---|----------------------------|
| FROM LIEGE, BELGIUM (BARGE LOADING POINT) | | TO ANTWERP PORT PIER 140 | |
| KIND OF CONVEYANCE TRUCK | | NAME OF CONVOYER LT. THOMAS L. MC VICAR R A 42177765 | |
| SIGNATURE OF SHIPPER CAPT PAUL MC GEE 0505337 M.I.S. | DATE 25/8/47 | SIGNATURE OF RECEIVER <i>[Signature]</i> | DATE 29 NOV 1947 |

3. SHIPPED

| | | | |
|--|-------------------------|---|-------------------|
| FROM AGRC ANTOWERP BELGIUM | | TO USA JCS V CONNOLLY | |
| KIND OF CONVEYANCE TRUCK | | NAME OF CONVOYER Wm S Henderson Capt I C | |
| SIGNATURE OF SHIPPER L. E. Butler Lt Col Inf | DATE 10/10/47 | SIGNATURE OF RECEIVER <i>[Signature]</i> | DATE 30 |

4. SHIPPED

| | | | |
|--|-------------------------|--|----------------------------|
| FROM JOSEPH V. CONNOLLY | | TO N Y P E | |
| KIND OF CONVEYANCE JOSEPH V. CONNOLLY | | NAME OF CONVOYER | |
| SIGNATURE OF SHIPPER <i>[Signature]</i> | DATE 10/10/47 | SIGNATURE OF RECEIVER JAMES L. MCKINNON COLONEL, T. O. | DATE 27 OCT 1947 |

5. SHIPPED

| | | | |
|---|-------------------------|---|------------------------|
| FROM N Y P E | | TO DC 7 Columbus Ohio | |
| KIND OF CONVEYANCE Train | | NAME OF CONVOYER Sgt Roy R Dyckste | |
| SIGNATURE OF SHIPPER JAMES L. MCKINNON COLONEL, T. O. PORT TRANSPORTATION OFFICER | DATE 10/31/47 | SIGNATURE OF RECEIVER <i>[Signature]</i> | DATE 11/1/47 |

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 |

RECEIPT OF REMAINS

DISTRIBUTION CENTER

COLUMBUS GENERAL DISTRIBUTION DEPOT, COLUMBUS 15, OHIO

ROUTINE

14 NOVEMBER 1947

REMAINS CONSIGNED TO:

JOHN F YONEY FUNERAL HOME

126 EAST PIKE STREET

CANNONSBURG PENNSYLVANIA

FROM QMDCG _____ BARDEN

REMAINS OF THE LATE PRIVATE FIRST CLASS JOHN BEVALAQUA SERIAL NO
33153733 BEING SHIPPED TO YOU ACCOMPANIED BY ESCORT TECHNICIAN
FIFTH GRADE RAYMOND W D'ERRICO ON TRAIN NO 767 PENNSYLVANIA
RAILROAD LEAVING COLUMBUS 12:20 PM FOURTEEN NOVEMBER AND DUE TO
ARRIVE CANNONSBURG PA 6:53 PM RAILROAD TIME FOURTEEN NOVEMBER PD
REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS AT STATION UPON
ARRIVAL PD

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

THIS 14th DAY OF Nov. MONTH, 1947

Raymond W. D'Errico
WITNESS (Escort)

John F. Yoney
CONSIGNEE

CLASS OF SERVICE

This is a full-rate Telegram or Cablegram unless its deferred character is indicated by a suitable symbol above or preceding the address.

WESTERN UNION

1201

SYMBOLS

- DL = Day
- NL = Night Letter
- LC = Deferred Cable
- NLT = Cable Night Letter
- Ship Radiogram

A. N. WILLIAMS
PRESIDENT

The filing time shown in the date line on telegrams and day letters is STANDARD TIME at point of origin. Time of receipt is STANDARD TIME at point of destination.

GA147 27 COLLECT=CANONSBURG PENN 5 149P
 COLUMBUS GENERAL DISTRIBUTION DEPOT ATTENTION CHIEF
 AMERICAN GRAVES REGISTRATION DIVISION=CLMBS:

(503)

APR 25 2 45

=DELIVER REMAINS OF LATE PRIVATE FIRST GLASS JOHN
 BEVALAQUA TO JOHN F YONEY FUNERAL HOME CANONSBURG
 PENN AMERICAN LEGION POST NO 253 WILL PROVIDE
 MILITARY HONORS=

ANTHONY BEVALAQUA.

253.

THE COMPANY WILL APPRECIATE SUGGESTIONS FROM ITS PATRONS CONCERNING ITS SERVICE

MESSAGEFORM

MESSAGE CENTER NO.

TRANSMITTING MEANS

CRYPTOGRAPH OR CLEAR TEXT

CALLS

SIA, SER, NO.

PRECEDENCE

TRANSMISSION INSTRUCTIONS

ORIGINATOR

DATE-TIME GROUP

v

NR

ACTION

INFORMATION

EXEMPT

OPERATING SIGNALS

GROUP COUNT

GR

ROMAN COMMANDING GENERAL

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Originator)

GENERAL DISTRIBUTING DEPOT COLUMBUS OHIO

SECURITY CLASSIFICATION

UNCLASSIFIED

ACTION TO:

MR ANTHONY F NEVALAGUA
74 YOUNGSTOWN AVENUE
CANONSBURG PENNSYLVANIA

PRIORITY

PRECEDENCE FOR

ACTION

INFORMATION

PRIORITY

 ORIGINAL MESSAGE

IDENTIFICATION

REFERS TO ANOTHER MESSAGE

CLASSIFICATION

INFORMATION TO:

FROM QMDCG 12486 B. BARLEN

WAR DEPARTMENT WILL DELIVER REMAINS OF LATE

PRIVATE FIRST CLASSJOHN NEVALAGUA

IN NEAR FUTURE

PD RECORDS OF THIS OFFICE INDICATE YOU WISH REMAINS DELIVERED TO

JOHN F YOBEY FUNERAL HOME CANONSBURG PA

PD PLEASE INSTRUCT

FUNERAL DIRECTOR TO MAKE ARRANGEMENTS TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL PD PRIOR TO SHIPMENT FUNERAL DIRECTOR WILL BE NOTIFIED OF RAIL ROUTING AND SCHEDULED TIME REMAINS WILL ARRIVE AT RAILROAD STATION PD REQUEST IMMEDIATE CONFIRMATION OF ABOVE SHIPPING INSTRUCTIONS BY TELEGRAM COLLECT TO COLUMBUS GENERAL DISTRIBUTION DEPOT CMA ATTENTION CHIEF CMA AMERICAN GRAVES REGISTRATION DIVISION CMA COLUMBUS OHIO PD IF YOU DESIRE MILITARY HONORS AT FUNERAL YOU SHOULD ASK LOCAL PATRIOTIC OR VETERANS ORGANIZATION OF YOUR CHOICE TO MAKE ARRANGEMENTS PD NECESSARY YOU INCLUDE NAME OF DECEASED IN REPLY TELEGRAM

SECURITY CLASSIFICATION

AUTHORIZATION

UNCLASSIFIED

ORIGINATING AGENCY

SIGNATURE

SYMBOL

CAPT F FAPPIANO EXT 403

DATE-TIME GROUP

OFFICIAL TITLE

FRANCIS FAPPIANO
CAPT, QMC, Asst AGR Div

PAGE

of

QMDCG

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

D. O. Vou. No.

36764

U. S. _____ R DEPARTMENT

(Department, bureau, or establishment)

Bu. Vou. No.

**GENERAL ACCOUNTING
 OFFICE PREAUDIT**
 Certified for payment in the
 sum of \$ _____
 Comptroller General of the
 United States

Voucher prepared at Columbus General Distribution Depot
(Give place and date)
 THE UNITED STATES, Dc., Columbus 16, Ohio 11/21/47

To Anthony Bevalaqu
(Payee)

Address 7 1/2 Youngstown St., Canonsburg, Pennsylvania
 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) Terms _____ % Discount Cash _____ days | Quantity | UNIT PRICE | | AMOUNT | |
|-----------------------|-----------------------------|---|----------|------------|-----|---------|------|
| | | | | Cost | Per | Dollars | Cts. |
| | | Brought forward from continuation sheet(s) | | | | | |
| | 11/19/47 | Internet Expense Remains of John Bevalaqu PFC., 33155738 U. S. Army | | | | \$75 | 00 |

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total **\$75 00**

(Payee must NOT use this space)

Differences _____

Account verified, correct for _____

(Signature or initials)

See Certificate attached.

MEMORANDUM

H. R. Trunk

Authorized Certifying Officer

ACCOUNTING CLASSIFICATION (for completion by Administrative Office)

| Appropriation, limitation, or project symbol | Appropriation title | | | Limit'n or Proj't Amount | Appropriation Amount | |
|--|---------------------|------------------------|--------------|--------------------------|--------------------------|--------|
| A21X1806 | 807-47 | P-490-07 | 899-999 | | \$75.00 | |
| Allotment symbol | Amount | Obligations liquidated | COST ACCOUNT | | OBJECTIVE CLASSIFICATION | |
| | | | Symbol | Amount | Symbol | Amount |
| | | | | | | |

Paid by { Check No. **6445** dated **DEC 3 1947** for \$ **75.00** } on Treasurer of the United States in favor of payee named above.
 { Cash \$ _____ on _____ 19 _____ *Payee _____ }
(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person signing the voucher or receipt shall be as the capacity in which he signs, as set appear. For example: "John Doe Company, per John Smith, Secretary," or "Treasury," 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.

Title _____

RETURN OF REMAINS - WORLD WAR II DEAD
CERTIFICATE OF INTERMENT EXPENSES

Date November 15, 1947

I Anthony Bevalague - 7 1/2 Youngstown Street - Canonsburg, Pa.,
(Name and address of person responsible for payment of interment expenses)

hereby certify that the total sum of \$75.00 was incurred by me in connection

with the interment of the remains of the late John Bevalague

PPG 33153733, U. S. Army

(Grade, Serial Number, & Arm of Service of Decedent)

in the St. Patrick's Canonsburg Pennsylvania
(Name of Cemetery) (County or City) (State)

Witnesses:
Joseph A. Krafick
Philip Eonta

Ant
Anthony X Bevalague
(Signature)
mbh

I swear and subscribed before me **JUSTICE OF THE PEACE**
this 15th day of November, 1947. **MY COMMISSION EXPIRES**
FIRST MONDAY IN JAN. 1950

Note: 1. This certificate will be completed in quintuplicate and signed by the person who engaged the receiving funeral director and is responsible for payment of his bill. It is NOT to be accomplished or signed by the funeral director.

2. Return to: Commanding Officer
Columbus General Distribution Depot
Columbus 15, OHIO
ATTN: Chief, American Graves Registration Division

INSPECTION CHECKLIST
(FOR USE AT DISTRIBUTION CENTER)

| | | | | |
|--|--|--|------------------------------------|------------------------|
| NAME Bevalaqua, John ✓ | | RANK Pfc. ✓ | SERIAL NUMBER 33153733 ✓ | |
| SOURCE | | CONSIGNEE John F. Yoney 216 East Pike Street ✓ Canonsburg, Pennsylvania | | |
| SHIPPING CASE - GENERAL APPEARANCE (CHECK ONLY DISCREPANCIES) | | CONDITION OF CASKET (CHECK ONE) shipping case <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY | | |
| <input checked="" type="checkbox"/> FINISH (EXTERIOR) <i>Repair & Paint</i> | REMARKS <i>For Carpenter & Paint Shop</i> (4) | | | |
| <input type="checkbox"/> FINISH (INTERIOR) | | | | |
| <input type="checkbox"/> HANDLES | | | | |
| <input type="checkbox"/> HANDLE BOLTS | | | | |
| <input type="checkbox"/> STENCILING - NAMEPLATE | | | | |
| <input type="checkbox"/> HEALTH PERMIT MARKER | | | | |
| <input type="checkbox"/> HEALTH PERMIT NUMBER | | | | |
| CASKET - GENERAL APPEARANCES (CHECK ONLY DISCREPANCIES) | | CONDITION OF CASKET (CHECK ONE) <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY | | |
| <input type="checkbox"/> FINISH (EXTERIOR) | REMARKS <i>Touch up scratch</i> <i>OK</i> | | | |
| <input type="checkbox"/> HANDLES AND FASTENINGS | | | | |
| <input type="checkbox"/> STENCILING - NAMEPLATE | | | | |
| <input type="checkbox"/> CAM LOCKS (SEALING) | | | | |
| <input type="checkbox"/> ODOOR OR MOISTURE | | | | |
| <input type="checkbox"/> | | | | |
| <input type="checkbox"/> MORTUARY OPERATING ROOM ROUTED THROUGH <input type="checkbox"/> MORTUARY REPAIR SHOP | | CONDITION OF REMAINS <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY | | |
| NECESSARY DISINFECTION (EXPLAIN) | | CASKET REPAIRED <input type="checkbox"/> YES <input type="checkbox"/> NO | | |
| | | CASKET EXCHANGED <input type="checkbox"/> YES <input type="checkbox"/> NO | | |
| | | SHIPPING CASE REPAIRED <input type="checkbox"/> YES <input type="checkbox"/> NO | | |
| | | SHIPPING CASE EXCHANGED <input type="checkbox"/> YES <input type="checkbox"/> NO | | |
| | | REMARKS | | |
| TIME | DATE | SIGNATURE OF MORTICIAN | | SIGNATURE OF INSPECTOR |
| | | | | <i>g. Gumer</i> |

REMARKS *S13-J-358*

Carp. & Paint Shop
O.K. 40.

DISPOSITION FORM

SECURITY CLASSIFICATION (if any)

FILE No. **OMGA 295**SUBJECT **Ltr 20 April 1950 from Mr, Phillip F. Bevalaqu, Bevalaqu, John 33 153 735 Canonsburg, Pa. re notification of death**

| TO | FROM | DATE | COMMENT No. 1 |
|-----------------------------|--|----------------------|---------------------------|
| The Adjutant General | OQMG Administrative Division General Service Branch | 24 April 1950 | Sutherin 74238 |

1. Forwarded as a matter pertaining to your office.
2. The writer has been advised of this reference.

FOR THE QUARTERMASTER GENERAL:

Incl:
Ltr 20 Apr 50

E. PACKARD
Administrative Division

ES

BLA

APR 24 4 17 PM '50

O.C.M.G.
MAIL & RECORDS BRANCH

RETURN OF REMAINS - WORLD WAR II DEAD
CERTIFICATE OF INTERMENT EXPENSES

John Bevalacqua, John (33153733)
Date November 15, 1947

I Anthony Bevalacqua - 7 1/2 Youngstown Street - Canonsburg, Pa.
(Name and address of person responsible for payment of interment expenses)

hereby certify that the total sum of \$75.00 was incurred by me in connection

with the interment of the remains of the late John Bevalacqua

PTC 33153733, U. S. Army

(Grade, Serial Number, & Arm of Service of Decedent)

in the St. Patrick's Canonsburg Pennsylvania
(Name of Cemetery) (County or City) (State)

Witnesses:

Joseph A. Hafick
Philip Conter

his
Anthony X Bevalacqua
(Signature)

Sworn and subscribed before me
this 15th day of November, 1947
John W. Rogowski JUSTICE OF THE PEACE
MY COMMISSION EXPIRES
FIRST MONDAY IN JAN. 1950

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

2. Return to: Commanding Officer
Columbus General Distribution Depot
Columbus 15, OHIO
ATTN: Chief, American Graves Registration Division

26764
12/3/7

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

**Pfc. John Bevalaqua, SS 153 733
Plot 17, Row 8, Grave 159,
United States Military Cemetery
Henri-Chapelle, Belgium**

4 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

I, Anthony F. Bevalaqua

(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

St. Patrick's Roman Catholic Cemetery, Canonsburg, Pennsylvania

(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.)

None

OK

PART I (Continued)

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

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

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

OR

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

| | | | |
|--|--------------------------|--------------------|--|
| FULL NAME OF FUNERAL DIRECTOR <p align="center">John P. Voney</p> | | | |
| NUMBER AND STREET | CITY OR TOWN | COUNTY OR PROVINCE | STATE OR TERRITORY OF U. S. A., OR COUNTRY |
| 216 East Pike Street | Canonsburg ⁰⁷ | Washington | Pennsylvania |
| EXPRESS OFFICE (Nearest railroad passenger station) | TELEGRAPH ADDRESS | TELEPHONE No. | |
| Canonsburg | Canonsburg | 908 | |

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 |
| Bevalaqua | Frances | | Mother |
| NUMBER AND STREET | CITY OR TOWN | COUNTY OR PROVINCE | STATE OR TERRITORY OF U. S. A., OR COUNTRY |
| 7 1/2 Youngstown Ave. | Canonsburg | Washington | Pennsylvania |

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.

Witness to his Mark: Shelby J. Bavel

Rose M. Bastis 1/2 Youngstown Ave.

Anthony F. Bevalaqua

Canonsburg, Pennsylvania

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

(STREET AND NUMBER)
(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 11th day of March

1947, at city (or town) of Canonsburg, county of Washington, and State (or Territory or

District) of Pennsylvania

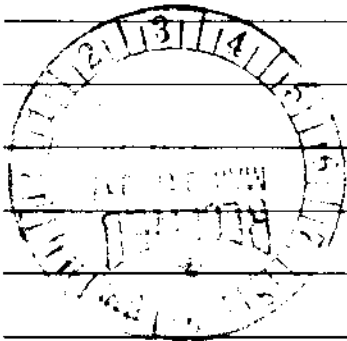
Rose M. Bastis
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)
Notary Public
(OFFICIAL TITLE)

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

My commission expires; March 9th, 1951

ADDITIONAL REMARKS AND INSTRUCTIO

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



Pfc. John Bevalaqua, 33 133 733
Plot 7E, Row 8, Graves 159,
United States Military Cemetery
Henri-Chapelle, Belgium

4 March 1947

Mr. Anthony F. Bevalaqua
7 Youngstown Avenue
Gettysburg, Pennsylvania

Dear Mr. Bevalaqua:

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. LANKIN
Major General
The Quartermaster General

Incls.

maf

QMR 293
Bevalaqua, John
A.S.N. 33 153 733

Bevalaqua, John

21 January 1947

Mr. Anthony F. Bevalaqua
7 Youngstown Avenue
Canonsburg, Pennsylvania

Dear Mr. Bevalaqua:

Inclosed herewith is a picture of the United States Military Cemetery Henri-Chapelle, Belgium, in which your son, the late Private First Class John Bevalaqua, 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,

G. A. HOKKAN
Brigadier General, QMC
Assistant

Jan 23 11 53 AM '47
RECORDS BRANCH
Photograph

ADVISORY

Bevalaqua, John

25 August 1945

Mr. Anthony Francis Bevalaqua
7 Youngstown Avenue
Gettysburg, Pennsylvania

Dear Mr. Bevalaqua:

The War Department is most desirous that you be furnished the burial location of your son, the late Private First Class John Bevalaqua.

The records of this office disclose that he is interred in the U. S. Military Cemetery #1, Henri Chapelle, Belgium, plot TT, row 8, grave 159.

This cemetery is located approximately 7 miles southwest of Aachen, Germany, and is under the constant care and supervision of United States military personnel.

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

Sincerely yours,

E. B. GREGORY
Lieutenant General
The Quartermaster General

GRAVES REGISTRATION SECTION

AUG 24 2 30 PM '45

MEMORIAL DIVISION

PORT OF BURIAL

10-10-530 AND AR 33-1815

29^r

28 Dec 44

Date

Revalaqua, John

Last Name First Initial Rank

Unknown

Unknown

Place of Death

1400 28 Dec 44

Time and Date of Burial

150 9

Grave Number

Row Number

Date of Death

Name of Cemetery

Plot Number

Unknown

Organization

Cause of Death

701-343

Name or Coordinates of Location

1 22A

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?

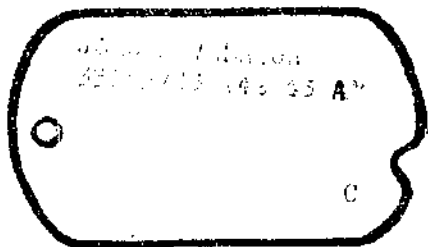
To determine Right or Left use Deceased's Right and Left.

Who is buried on:

Deceased's Right: Stokes, Harry E. 9-463846 130
Name Serial No. Rank Organization Grave No.

Deceased's Left: Sojolewski, Marshall 3561810 138
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 Name

Address

Religion

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

Signature of Officer or other person reporting burial.

Verified by G.R.S. Officer

REGISTRATION

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

REPORT OF DEATH

DATE 27 January 1945

| | | | | | |
|--|----|--|----|---|----|
| FULL NAME <i>Bevalaqua, John</i> Bevalaqua, John | | ARMY SERIAL NUMBER 33 153 733 | | GRADE <i>par 4627</i> PFC | |
| HOME ADDRESS Canonsburg, Pennsylvania | | ARM OR SERVICE Infantry | | DATE OF BIRTH 10 May 1905 | |
| PLACE OF DEATH European Area | | CAUSE OF DEATH Killed in Action | | DATE OF DEATH 26 Dec 1944 | |
| STATION OF DECEASED European Area | | DATE OF ENTRY ON CURRENT ACTIVE SERVICE 24 Feb 1942 | | LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS | |
| EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Miss Jane C. Capozzi, friend, 340 West College St., Canonsburg, Pennsylvania. | | | | | |
| BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mr. Anthony Francis Bevalaqua, father, 7 Youngstown Ave., Canonsburg, Pa. Frances Bevalaqua, mother, 7 Youngstown Ave., Canonsburg, Pa. | | | | | |
| INVESTIGATION MADE? | | IN LINE OF DUTY | | OWN MISCONDUCT | |
| YES | NO | YES | NO | YES | NO |
| | | | | WAS DECEASED ON DUTY STATUS | |
| | | | | YES | NO |
| | | | | AUTHORIZED ABSENCE | |
| | | | | YES | NO |
| | | | | IN FLYING PAY STATUS | |
| | | | | YES | NO |
| | | | | OTHER PAY STATUS (SPECIFY BELOW) | |
| | | | | X | X* |

ADDITIONAL DATA AND/OR STATEMENT

BATTLE NON-BATTLE

*Combat Infantryman.
 Source & date of order number will be furnished when rec'd.

Evidence of death rec'd in Wd 13 Jan 45.

COPIES FURNISHED:

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

BY ORDER OF THE SECRETARY OF WAR

James W. Reinhart

ADJUTANT GENERAL

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

JRM:KB:bh

Case No. 389121

Date 26 April 1945

SUBJECT: Report of transaction in disposing of the effects of

John Bevalagua, 33153733 late a
(Name of deceased) (Army Social Number)
Private First Class, Infantry who died
(Grade) (Organization, Army or Service)
on the 26 day of December, 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 was 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 unliquidated local creditors the sum of none which has been paid by the Summary Court-Martial from funds of decedent. (Incl. 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 24 April 1945

_____ pursuant to Special Orders 321, Headquarters KCQM Depot, dated 25 September 1943, the application or affidavit of Anthony Francis Bevalagua 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 Anthony Francis Bevalagua

A.W. 112, _____ of
7 Youngstown Avenue (Name of person found entitled) Canonsburg
(Number, Street or Avenue) (City, Town or Village)
Pennsylvania (Father)
_____, is the _____ 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, Q.M.C.

(Name, Rank, Organization)
SUMMARY COURT-MARTIAL

TIME ACTION SHEET

| DATE | ACTION TO BE TAKEN | INITIAL | SUSPEND |
|------|---------------------|------------|---------|
| 4-21 | Trip to Dallas 14st | [initials] | |
| | arr 6:30 (1975) | [initials] | |
| 4-24 | 1 of 75 | [initials] | |
| 4-24 | no response yet | | |
| 7-10 | 1 of 9 to father | Ej | --- |
| | incl check 14 | Ej | --- |
| | complete | Ej | --- |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

0 46526

ROUTING SLIP

Form No 41

Date

1 FEB 1945

- 1. Routing Sec. U.S.
- 2. Case Control MC
- 3. Fiscal Sec. WJ
- 4. M.R.U. File [Signature]
- 5. #54 Inv. File [Signature]
- 6. EM Inv. File [Signature]
- Hosp-Unit Req. File [Signature]
- Correspondence _____
- as File _____

REMARKS

389121

RTB:HL:men
July 23, 1945

Mr. Anthony Francis Bevalacqua
7 Youngstown Avenue
Canonsburg, Pennsylvania

Dear Mr. Bevalacqua:

The Army Effects Bureau has received additional property of your son, Private First Class John Bevalacqua, consisting of funds in the amount of \$49.39. 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 yours,

C. E. QUINN
2nd Lt., GAC
Chief, Files Branch

1 Incl-
Check

527

as

SCANNED
3-4-85

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mr. Anthony Francis Bevalaqua
7 Youngstown Avenue
Canonsburg, Pennsylvania

Effects of:
Name Pfc. John Bevalaqua

ASN 33153733

Case No. 389121 D

Att.

DATE 23 July 1945
RTB:HL:men

FOR: Effects Quartermaster

REMARKS:

- Enclose Bureau Check
Check No. 123282
Amount \$49.89 *49.89*
Inclose "Valuables" item
Ship "Valuables" item(s)

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

ROUTING:

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

101221 emh

123282

389121

July 24

45

Anthony Francis Bevalaqua

49.89

~~Forty-Nine and 89/100~~

REMARKS:

Franked _____
Est. Exp. Chgs. _____
Est. Int. Chgs. _____
No. of packages _____

Shipping Clerk

ARMY AIR FORCE BUREAU
INVENTORY

7154

R

CASE NO. _____

389,121

TYPED BY _____

jc

DATE _____

6/20/45

STATUS _____

DEC

NAME _____

John MI Bevalacqua

A.S.N. _____

33153733

RANK _____

ORGANIZATION _____

AMOUNT _____

49.89

ACCOUNT NO. _____

123 282 RCP

FILE

67

PAID Check No. 12122/71

LIST NO. _____

F 202

REMARKS _____

ACCOUNTING INVENTORY

389,121

JRM:KB:dn
April 28, 1946

Mr. Anthony Francis Bevalacqua
7 Youngstown Avenue
Canonsburg, Pennsylvania

Dear Mr. Bevalacqua:

The Army Effects Bureau has received from overseas some personal effects of your son, Private First Class John Bevalacqua.

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.G.
Officer-in-Charge
SJ Unit

44-65

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mr. Anthony Francis Bevalaqua
7 Youngstown Avenue
Canonsburg, Pennsylvania

Effects of: Pfc. John Bevalaqua
Name
33153733
ASN
389121 D
Case No.
Wt.

DATE 27 April 1945
JRM:KB;bh

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.

*File
EG
7-10*

1 pkg

REMARKS:

FRANKED
Franked
Est. Exp. Chgs. MAY 2 1945
Est. Frt. Chgs.
No. of packages 1

AA

Shipping Clerk

| | | | |
|-----------------------------------|--------------------------------------|-----------------------------|--|
| SHEET <u>1</u> OF <u>1</u> SHEETS | ARMY EFFECTS BUREAU INVENTORY | | DECEASED <input checked="" type="checkbox"/> |
| BOX NUMBER <u>6</u> | ORIGINAL NUMBER OF PACKAGES <u>1</u> | | MISSING <input type="checkbox"/> |
| TALLY NUMBER <u>7131</u> | INVENTORY DATE <u>6 - apr - 45</u> | CASE NUMBER <u>389, 121</u> | |
| EFFECTS OF <u>JOHN BEVALAQUA</u> | | | RANK <u>Pvt.</u> |
| A.S.N. <u>33153733</u> | ORGANIZATION _____ | | |

PACKAGE DESCRIPTION

| CLOTHING | PERSONAL ITEMS | CONTAINERS |
|---|--|--|
| <input type="checkbox"/> BELT | <input type="checkbox"/> BRACELET, IDENTIFICATION | <input type="checkbox"/> BAGS, CLOTH |
| <input type="checkbox"/> BELT, MONEY (NO MONEY) | <input type="checkbox"/> BRUSHES | <input checked="" type="checkbox"/> BAGS, TRAVEL |
| <input type="checkbox"/> CLOTH, WASH | <input type="checkbox"/> CAMERAS | <input checked="" type="checkbox"/> BILLFOLD, (NO MONEY) w/c |
| <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 checked="" 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 checked="" type="checkbox"/> PENCIL, MECHANICAL | <input checked="" 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 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"/> SHIRT SHORTER |
| | | <input type="checkbox"/> SOUVENIRS |
| | | <input type="checkbox"/> SOUVENIR MONEY |
| | | <input type="checkbox"/> STATIONERY |
| | | <input type="checkbox"/> TESTAMENTS |
| | | <input type="checkbox"/> U.S. MONEY (AMOUNT) |

File

| | |
|---------------------------|---|
| REMARKS: <u>Friend</u> | ATTACHMENTS: <u>FORM #54</u> <u>FORM #100</u> |
| <u>Jane E. Capozzi,</u> | <u>Inventory</u> |
| <u>340 N. College St.</u> | <u>1 form - 28</u> |
| <u>Canonsburg, Pa.</u> | <u>1 grave tag</u> |

| | | |
|----------------------------------|--------------------------------|---|
| C.A.T. <u>None</u> | WEIGHT | GI REMOVED |
| WAREHOUSE SPACE <u>1279</u> | DATE SHIPPED <u>MAY 2 1945</u> | <input checked="" type="checkbox"/> SHORTAGE ON REVERSE |
| INVENTORIED BY <u>D Anderson</u> | STORIED BY <u>[Signature]</u> | <input type="checkbox"/> IDENT. TAGS REMOVED |
| PACKED BY | CHECKED BY <u>[Signature]</u> | <input type="checkbox"/> DIARY REMOVED |
| | | <input type="checkbox"/> LOCKED STORAGE |
| | | <input type="checkbox"/> LAUNDRY REMOVED |
| | | <input type="checkbox"/> FILM REMOVED |

SHORT

U.S. GOVT. CHECK SHORT

95 Guilders, Dutch
\$10.00 U.S. Money
1 pound English

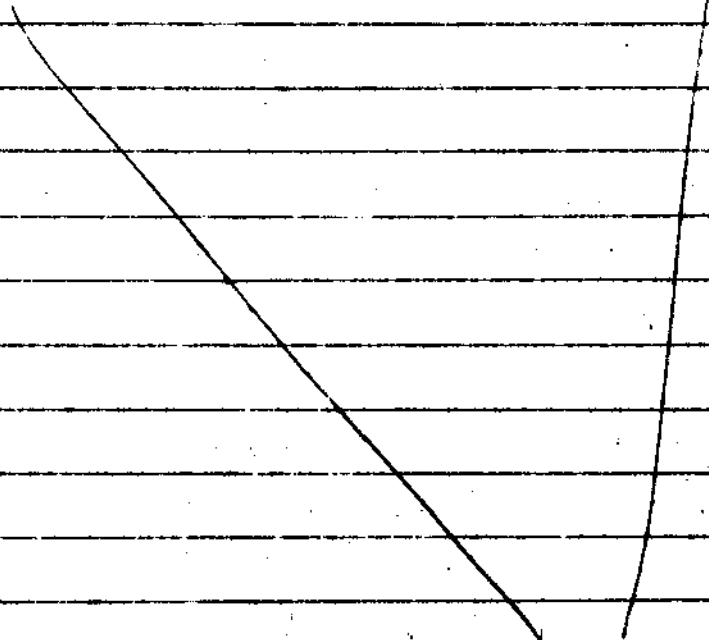
NUMBER

DATE

SYMBOL

AMOUNT

Serial Num. 211-901



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

Davidson
INVENTORY CLERK

Nolan
SUPERVISOR

C.I. REMOVE

Mailed direct to KC
Pouch No. 215

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

TT 159 H.C.

28 Dec 44
Date

Reg. No. 36

SUBJECT: Inventory of Personal Effects of:

Wm BEVALAQUA JOHN NMI UNK 3315372233
(Last Name) (First Name) (MI) (Rank) (ASN)

TO: Effects Quartermaster, Communications Zone, APO 867 US Army

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

was reported ~~lost~~ buried ~~about~~ 28 Dec 1944.
~~lost~~ Status (MIA, MIA, Hosp. etc.) ~~about~~ (Date)

Designated Beneficiary if information readily accessible Unk

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

- 1 billfold ✓
- 2 pens ✓
- 1 pencil ✓
- 2 prayer books ✓
- 1 religious piece ✓
- 1 lighter ✓
- 1 paybook ✓

95 Gulden, Dutch ○
\$10.00 U. S. Money ○
1 Pound, English ○

Money in the amount of above has been turned into Maj. R. J. Collie, FD
(Name of finance office and

211-001 Form WDFD 38 enclosed.
symbol number)

Unk
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 reg mail on 194 .
(Rail, Truck, etc.)

Name Nicholas J. Sloane
Rank & ASN NICHOLAS J. SLOANE
Lt, Q.M.C.
Graves Registration Officer
Organization

Any additional pertinent information:

0-1591451

BEVALAQUA, JOHN 33153733
NAME ~~BEVALAQUA,~~

| BAY | PALLET | BOX | TALLY |
|--------------|-------------|----------------------|-------|
| | | BOX #6 POUCH #215 | 7131 |
| TYPE OF PKG. | WHSE. SPACE | INVENTORIED | |
| ORB | | | |

Ref. QM Form 48

15111
Serial No. 33153733 Name BEVALAQUA, JOHN
Grade _____ Rank _____
Organization _____
Address _____
Nearest Relative _____
Address _____
Killed in Action YES Died of Disease _____
Date 26 DEC 1944 Hospital _____
Battle Area _____ Information _____
Place of Burial HENRI CHAPELLE #1
Point of Coordination _____
Description of Body _____
Members Missing _____

154 Signed _____

BEVALAQUA, JOHN, UNK 33153733 KIA C 96526

D

BEVALAQUA, JOHN (NMI) -- 33153733

KIA.

\$49.89

F. 202

C.V. 1555. R. J. COLLIE., MAJOR F.O.D

BEVALAQUA, John NMI 33153733 KIA CASE 96526

359121

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

REPORT OF DEATHDATE 27 January 1945

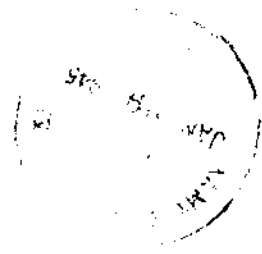
| | | | | | | | | | | | | | |
|--|----|-----------------|---|---|----|---|----|--------------------|----|----------------------|----|----------------------------------|----|
| FULL NAME Bevalaqua, John | | | | ARMY SERIAL NUMBER 33 153 733 | | GRADE PMR 4627 PFC | | | | | | | |
| HOME ADDRESS Canonsburg, Pennsylvania | | | | ARM OR SERVICE Infantry | | DATE OF BIRTH 10 May 1905 | | | | | | | |
| PLACE OF DEATH European Area | | | CAUSE OF DEATH Killed in Action | | | DATE OF DEATH 26 Dec 1944 | | | | | | | |
| STATION OF DECEASED European Area | | | | DATE OF ENTRY ON CURRENT ACTIVE SERVICE 24 Feb 1942 | | LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS | | | | | | | |
| EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Miss Jane C. Capozzi, friend, 340 West College St., Canonsburg, Pennsylvania. | | | | | | | | | | | | | |
| BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mr. Anthony Francis Bevalaqua, father, 7 Youngstown Ave., Canonsburg, Pa. Frances Bevalaqua, mother, 7 Youngstown Ave., Canonsburg, Pa. | | | | | | | | | | | | | |
| 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 | X* |

ADDITIONAL DATA AND/OR STATEMENT

 BATTLE NON-BATTLE

*Combat Infantryman.
 Source & date of order number will be furnished when rec'd.

Evidence of death rec'd in Wd 13 Jan 45.



COPIES FURNISHED:

| | | |
|----------------|-------------|----------------------|
| S. O. C. | F. B. I. | F. O., U. S. A. |
| S. O. C. N. S. | C. F. D. | ARMY EFFECTS BUREAU |
| S. A. O. | VET. ADMIN. | CASUALTY BRANCH FILE |
| | | A. G. 201 FILE |

BY ORDER OF THE SECRETARY OF WAR

James W. Pinkhart
 ADJUTANT GEN

BEVALAQUA, John NMI 33153733 KIA CASE 96526