

DISINTERMENT DIRECTIVE

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
1240 14262

DATE
15 07 47
DAY MONTH YEAR

NAME
SMITH ALBERT D

SERIAL NUMBER
35073412

RANK
PVT

ARM
1
DATE OF DEATH
DAY MONTH YEAR

CEMETERY
HENRI CHAPELLE EUPEN

DISPOSITION OF REMAINS
1 5222 07
CODE DIST. PT.

PLOT ROW GRAVE COUNTRY
G 7 140 BELGIUM

CAUSE OF DEATH
1

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
ZACHARY TAYLOR NATIONAL CEMETERY
RURAL FREE DELIVERY #6, BOX 24
LOUISVILLE, KENTUCKY

NAME AND ADDRESS OF NEXT OF KIN
MRS. LEONA B. SMITH
2119 GRANT STREET
PORTSMOUTH, OHIO

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME
SMITH ALBERT D

SERIAL NUMBER
35073412

RANK
PVT

DATE OF DEATH
Est 14 Oct 44

DATE DISTINTERRED
29 Aug 47

IDENTIFICATION TAG ON
 REMAINS
 MARKER GRS

ORGANIZATION
CO B 48TH ARMD
INF BN 7TH ARMD DIV

RELIGION
P

IDENTIFICATION METHOD BY
WILLIAM E. WESPOVER, 1/Lt MG
NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL
MATTRESS COVER & UNIFORM

CONDITION OF REMAINS
multiple fractures of left
tibia- hand disarticulated.

OTHER MEANS OF IDENTIFICATION
marked on field jacket- S-3412
marked S-3412 on wool CD

MINOR DISCREPANCIES
None

REMAINS PREPARED AND PLACED IN CASKET
DATE 25 Aug 47 BY BERNARD BERGER, IDENT TECH.

CASKET SEALED BY
BERNARD BERGER, IDENT TECH.

EMBALMER
E.H. FIELDS, IDENT TECH.

CASKET BOXED AND MARKED
DATE 25 Aug 47 BY BERNARD BERGER, IDENT TECH.

SHIPPING ADDRESS VERIFIED BY F.O.S. PROT. (#1).
BERNARD BERGER, IDENT TECH.

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. BENEVOLOTTI, CAPT INF
SIGNATURE OF GRS INSPECTOR

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

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM US MI HERSI CHAPELLE BELGIUM		TO LIEGE BELGIUM (BACK LOADING PT.)	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER [Signature]	
SIGNATURE OF SHIPPER [Signature]	DATE 28/8/47	SIGNATURE OF RECEIVER [Signature]	DATE 28/8/47

2. SHIPPED

FROM LIEGE BELGIUM (BACK LOADING PT.)		TO ANTWERP PORT PIER 140.	
KIND OF CONVEYANCE BARGE MARONI		NAME OF CONVOYER T/S JAMES S. JONES, RA 98970769	
SIGNATURE OF SHIPPER [Signature]	DATE 28/8/47	SIGNATURE OF RECEIVER [Signature]	DATE 28/8/47

3. SHIPPED

FROM AGRIC. AT ANTWERP BELGIUM		TO JCS V...	
KIND OF CONVEYANCE ZPC		NAME OF CONVOYER Wm Henderson Capt R C	
SIGNATURE OF SHIPPER L E Butler Lt Col Inf	DATE 30/8/47	SIGNATURE OF RECEIVER [Signature]	DATE 30/8/47

4. SHIPPED

FROM JOSEPH V. CONNOLLY		TO [Signature]	
KIND OF CONVEYANCE X		NAME OF CONVOYER [Signature]	
SIGNATURE OF SHIPPER [Signature]	DATE 30/8/47	SIGNATURE OF RECEIVER [Signature]	DATE 30/8/47

5. SHIPPED

FROM [Signature]		TO [Signature]	
KIND OF CONVEYANCE [Signature]		NAME OF CONVOYER [Signature]	
SIGNATURE OF SHIPPER [Signature]	DATE 31/8/47	SIGNATURE OF RECEIVER [Signature]	DATE 31/8/47

6. SHIPPED

FROM [Signature]		TO [Signature]	
KIND OF CONVEYANCE [Signature]		NAME OF CONVOYER [Signature]	
SIGNATURE OF SHIPPER [Signature]	DATE [Signature]	SIGNATURE OF RECEIVER [Signature]	DATE [Signature]

7. SHIPPED

FROM [Signature]		TO [Signature]	
KIND OF CONVEYANCE [Signature]		NAME OF CONVOYER [Signature]	
SIGNATURE OF SHIPPER [Signature]	DATE [Signature]	SIGNATURE OF RECEIVER [Signature]	DATE [Signature]

CAN

RECEIPT OF REMAINS

DISTRIBUTION CENTER

COLUMBUS GENERAL DISTRIBUTION DEPOT COLUMBUS 15 OHIO

ROUTINE 28 NOVEMBER 1947

REMAINS CONSIGNED TO: CARL E HERBOLD FUNERAL HOME

LOUISVILLE KENTUCKY

FROM QMDCG _____ BARBER

REMAINS OF THE LATE PRIVATE ALBERT D SMITH SERIAL NUMBER
35073412 BEING SHIPPED TO YOU ACCOMPANIED BY ESCORT STAFF
SERGEANT HENRY C PAYNE ON TRAIN NUMBER 63 BALTIMORE AND
OHIO RAILROAD LEAVING COLUMBUS OHIO 2:35 PM TWENTY EIGHT
NOVEMBER AND DUE TO ARRIVE LOUISVILLE 8:50 PM RAILROAD TIME
TWENTY EIGHT NOVEMBER PD REQUEST YOU MAKE ARRANGEMENTS TO
ACCEPT REMAINS AT STATION UPON ARRIVAL

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

THIS 28 DAY OF Nov, 1947

Sgt Henry C Payne
WITNESS (Escort)

Ratterman Bros.
by Carl Ratterman CONSIGNEE

MESSAGEFORM		MESSAGE CENTER NO.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT	
CALLS V	STA. SER. No. NR	PRECEDENCE	TRANSMISSION INSTRUCTIONS	ORIGINATOR	DATE-TIME GROUP
ACTION	INFORMATION		EXEMPT	OPERATING SIGNALS	GROUP COUNT GR
BOWMAN COMMANDING GENERAL					
<small>MESSAGE ABOVE FOR SIGNAL CENTER ONLY</small>					
FROM: (Originator) GENERAL DISTRIBUTION DEPOT COLUMBUS OHIO			SECURITY CLASSIFICATION UNCLASSIFIED		
ACTION TO: MRS LEONA B SMITH 2119 GRANT STREET PORTSMOUTH OHIO			PRECEDENCE FOR ACTION INFORMATION PRIORITY		
DLR AND REPORT ANY CHANGES			<input type="checkbox"/> ORIGINAL MESSAGE		
INFORMATION TO: FROM QMDCG <u>13120B</u> BARDEN			REFERS TO ANOTHER MESSAGE IDENTIFICATION CLASSIFICATION		

WAR DEPARTMENT WILL DELIVER REMAINS OF LATE PRIVATE ALBERT D SMITH IN NEAR FUTURE PD RECORDS OF THIS OFFICE INDICATE YOU WISH REMAINS INTERRED AT ZACHARY TAYLOR NATIONAL CEMETERY LOUISVILLE KENTUCKY PD REQUEST IMMEDIATE CONFIRMATION BY TELEGRAM COLLECT TO COLUMBUS GENERAL DISTRIBUTION DEPOT CMA ATTENTION CHIEF CMA AMERICAN GRAVES REGISTRATION DIVISION CMA COLUMBUS OHIO PD NATIONAL CEMETERY SUPERINTENDENT WILL NOTIFY YOU DATE AND HOUR FUNERAL SERVICES WILL BE HELD IN SUFFICIENT TIME TO PERMIT YOUR ATTENDANCE AT YOUR OWN EXPENSE PD CUSTOMARY MILITARY HONORS AND RELIGIOUS SERVICES WILL BE PROVIDED AT CEMETERY BY VETERANS ORGANIZATIONS CMA OR MILITARY OR NAVAL PERSONNEL PD ARRANGEMENTS FOR ADDITIONAL PRIVATE SERVICES AND CEREMONIES OF YOUR CHOICE TO BE HELD AT CONCLUSION OF REGULAR SERVICES MAY BE MADE BY YOU PD IF YOU WISH SUCH ADDITIONAL SERVICES OR CEREMONIES NOTIFY NATIONAL CEMETERY OF YOUR DESIRES PD NECESSARY YOU INCLUDE NAME OF DECEASED IN REPLY TELEGRAM

SECURITY CLASSIFICATION UNCLASSIFIED		AUTHORIZATION	
ORIGINATING AGENCY CAPT F PAPPIANO EXT 403		SIGNATURE	
SYMBOL QMDCG	DATE-TIME GROUP	OFFICIAL TITLE FRANCIS PAPPIANO CAPT, QMC, Asst AGR Div	PAGE 1 OF 1

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 (14) UNION

JOSEPH L. EGAN
PRESIDENT

SYMBOLS

DL = Day Letter

NL = Night Letter

LC = Deferred Cable

NLT = Cable Night Letter

Ship Radiogram

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.

JA437

J.PJ53 23 COLLECT=PORTSMOUTH OHIO 25 1105A

COLUMBUS GENERAL DISTRIBUTION DEPOT CMA=

ATTN CHIEF CMA AMERICAN GRAVES REGISTRATION DIVISION

CMA COLUMBUS OHIO= 5267

NO CHANGE IN PLANS FOR BURIAL OF MY HUSBAND PVT ALBERT D
SMITH AT MILITARY CEMETERY AT LOUISVILLE KENTUCKY I
WILL ATTEND=

MRS LEONA B SMITH.

THE COMPANY WILL APPRECIATE SUGGESTIONS FROM ITS PATRONS CONCERNING ITS SERVICE

MESSAGEFORM

MESSAGE CENTER NO.

TRANSMITTING MEANS

CRYPTOGRAPH OR CLEAR TEXT

CALLS

STA. SER. No.

PRECEDENCE

TRANSMISSION INSTRUCTIONS

ORIGINATOR

DATE-TIME GROUP

V

NR

ACTION

INFORMATION

EXEMPT

OPERATING SIGNALS

GROUP COUNT

GR

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Originator)

ROMAN CO 6018 GEN DIST DEPOT COLUMBUS OHIO

SECURITY CLASSIFICATION

ACTION TO:

- SUPERINTENDENT
- ZACHARY TAYLOR NATIONAL CEMETERY
- LOUISVILLE KENTUCKY

PRECEDENCE FOR
ACTION INFORMATION ORIGINAL MESSAGEREFERS TO ANOTHER MESSAGE
IDENTIFICATION CLASSIFICATION

INFORMATION TO:

FROM QMDCG ~~6018~~ BARDEN

REFERENCE LETTER 16 OCTOBER 1947 FILE QMDCG 687 PD THIS CONFIRMS THE INTERMENT OF REMAINS OF PVT ALBERT D SMITH SERIAL NUMBER 35073412 CMA RACE WHITE CMA RELIGION PROTESTANT CMA IN ZACHARY TAYLOR NATIONAL CEMETERY PD REQUEST YOU FURNISH COLUMBUS GENERAL DISTRIBUTION DEPOT CMA ATTN CHIEF AMERICAN GRAVES REGISTRATION DIVISION THE TIME YOU DESIRE THE REMAINS DELIVERED PD

293

SECURITY CLASSIFICATION

AUTHORIZATION

SIGNATURE

ORIGINATING AGENCY

DATE-TIME GROUP

OFFICIAL TITLE FRANCIS PAPPANO
Capt., GIC Asst., AGR Div.

PAGE OF

WU 4 GOVT PD LOUISVILLE KY NOV 21 930A
THE COLUMBUS GENERAL DISTRIBUTION DEPOT
ATTN CHIEF AMERICAN GRAVES REGISTRATION DIVN
US ARMY CLMBS

FUNERAL SERVICES FOR PVT ALBERT D SMITH 35073412 SCHEDULED
FOR ONE PM 29TH NOVEMBER REQUEST DELIVERY BEFORE TEN AM ON
THAT DATE AND ADVICE OF EXPECTED TIME AND MEANS OF ARRIVAL
CARL E HERBOLD FUNERAL HOME LOUISVILLE KY DESIGNATED
TO RECEIVE REMAINS PER CONTRACT
CLARNECE E SUDERS SUPT ZACHARY TAYLOR NATIONAL
CEMETERY

35073412 PM 29 AM

213

1119A

MESSAGEFORM

MESSAGE CENTER NO.

TRANSMITTING MEANS

CRYPTOGRAPH OR CLEAR TEXT

CALLS

STA. SER. NO.

PRECEDENCE

TRANSMISSION INSTRUCTIONS

ORIGINATOR

DATE-TIME GROUP

V

NR

ACTION

INFORMATION

EXEMPT

OPERATING SIGNALS

GROUP COUNT

BR

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Originator)

BOWMAN CO COLUMBUS GEN DIST DEPOT COLUMBUS OHIO

SECURITY CLASSIFICATION

ACTION TO:

- SUPERINTENDENT
- ZACHARY TAYLOR NATIONAL CEMETERY
- LOUISVILLE KENTUCKY

PRECEDENCE FOR
ACTION INFORMATION ORIGINAL MESSAGEREFERS TO ANOTHER MESSAGE
IDENTIFICATION CLASSIFICATION

INFORMATION TO:

FROM QMDCO 1502 275 23 BARDEN

REMAINS OF THE LATE PRIVATE ALBERT D SMITH SERIAL NUMBER
35073412 BEING SHIPPED TO CARL E HERBOLD FUNERAL HOME ON
TRAIN NUMBER 63 BALTIMORE AND OHIO RAILROAD LEAVING COLUMBUS
OHIO 2:35 PM TWENTY EIGHT NOVEMBER AND DUE TO ARRIVE LOUIS-
VILLE KENTUCKY 8:50 PM RAILROAD TIME TWENTY EIGHT NOVEMBER
PD FUNERAL DIRECTOR HAS BEEN NOTIFIED OF RAIL ROUTING

BOWMAN CO COLUMBUS GENERAL DISTRIBUTION DEPOT COLUMBUS OHIO

SECURITY CLASSIFICATION

AUTHORIZATION

SIGNATURE

ORIGINATING AGENCY

DATE-TIME GROUP

OFFICIAL TITLE

FRANCIS PAPPANO
CAPT QMDCO ANDY AGR DIV

PAGE 1 OF 1

INSPECTION CHECKLIST
(FOR USE AT DISTRIBUTION CENTER)

NAME Smith Albert D		RANK Pvt	SERIAL NUMBER 35073412
SOURCE		CONSIGNEE Zachary Taylor National Cemetery Rural Free Delivery #6, Box 24 Louisville, Kentucky	
SHIPPING CASE - GENERAL APPEARANCE (CHECK ONLY DISCREPANCIES)		CONDITION OF SHIPPING CASE (CHECK ONE) <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY	
FINISH (EXTERIOR) <input checked="" type="checkbox"/>		REMARKS <i>fill cracks, then to paint shop. O.K.</i>	
FINISH (INTERIOR)			
HANDLES			
HANDLE BOLTS			
STENCILING - NAMEPLATE			
HEALTH PERMIT MARKER			
HEALTH PERMIT NUMBER			
CASKET - GENERAL APPEARANCE (CHECK ONLY DISCREPANCIES)		CONDITION OF CASKET (CHECK ONE) <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY	
FINISH (EXTERIOR)		REMARKS	
HANDLES AND FASTENINGS			
STENCILING - NAMEPLATE			
CAM LOCKS (SEALING)			
ODOR OR MOISTURE			

3

Routed Through

<input type="checkbox"/> MORTUARY OPERATING ROOM		<input type="checkbox"/> MORTUARY REPAIR SHOP	
CONDITION OF REMAINS <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY		CASKET REPAIRED <input type="checkbox"/> YES <input type="checkbox"/> NO	
NECESSARY DISINFECTION (EXPLAIN)		CASKET EXCHANGED <input type="checkbox"/> YES <input type="checkbox"/> NO	
		SHIPPING CASE REPAIRED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
		SHIPPING CASE EXCHANGED <input type="checkbox"/> YES <input type="checkbox"/> NO	
		REMARKS	

TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTOR
			3:20	11/17/47	<i>L. Bando</i>

REMARKS **510-A-783**

Date 29 November 1947

TO: Mrs. Leona B. Smith,
2119 Grant Street,
Portsmouth, Ohio.

The authorized inscription for a Government headstone of the general type (furnished for all decedents except those who served only during the Civil and Spanish-American Wars) includes: (1) The State from which the veteran came; (2) religious emblem in a small circle above the inscription on the face of the headstone; and (3) the dates of birth and death.

In order that the appropriate information, as desired by the next of kin, may be shown on the headstone for the decedent whose name is listed below, it is requested that you fill in the proper spaces indicated below the data called for, and RETURN THIS FORM PROMPTLY TO THE

Superintendent, Zachary Taylor National Cemetery, RFD 6, Box 24, Louisville, Ky.
Superintendent of Cemetery or Commanding Officer of Post

If this form is not returned to the Superintendent within fifteen (15) days from date of mailing, the headstone will be ordered with the data as to religious emblem, State and date of birth inscribed thereon as shown in the official records, and NO CHANGE WILL BE MADE AT A LATER DATE AT GOVERNMENT EXPENSE.

To be filled in by Superintendent or Commanding Officer

Name of Veteran 293 Albert D. Smith, (35073412)
Rank, etc. Private, Co. "B", 48th Armd. Inf. Bn. AGRC - EA.
Grave or lot No. 994 - (Section "A")
Date of death _____ (Death occurred overseas) (WW II Dead Program)
Date buried 29 November 1947

To be filled in by Next of Kin

State desired Ky.
Religious emblem desired Latin Cross
(Latin Cross for Christian Faith, Star of David for Hebrew Faith)
Date of birth Jan. 6 - 1924
Address of kin 2119 Grant St. Portsmouth, Ohio
Signature Mrs. Leona B. Smith Date Nov. 29 - 1947

File
12/19/47
[Signature]

QUEST FOR DISPOSITION OF REMAINS

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

DATE:

Mrs. Leona B. Smith
2119 Grant St.
Portsmouth, Ohio
3 March 1947

Pvt. Albert D. Smith, 35 073 412
Plot G, Row 7, Grave 140,
United States Military Cemetery
Mari-Ghannelle, Belgium

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

MRS. LEONA B. SMITH
(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

(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.

Added - 11 July '47 - Portsmouth

MAY 9 1947

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
EXPRESS OFFICE (Nearest railroad passenger station)	STATE OR TERRITORY OF U. S. A., OR COUNTRY	TELEPHONE No.
TELEGRAPH ADDRESS		

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

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

IN CASE OF EMERGENCY THE NAME AND ADDRESS OF THE PERSON NEXT IN LINE OF KINSHIP AFTER ME, AS SET FORTH IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," IS:

LAST NAME	FIRST NAME	MIDDLE INITIAL	RELATIONSHIP TO DECEASED
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY

REMARKS OR ADDITIONAL INSTRUCTIONS (For additional space use page 4.)

AS EXPLAINED IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," I AM THE NEXT OF KIN AND THE INDIVIDUAL AUTHORIZED TO DIRECT THE DISPOSITION OF THE SAID REMAINS.

I, the undersigned, DO SOLEMNLY SWEAR (OR AFFIRM) that the statements made by me in the foregoing document are full and true to the best of my knowledge and belief.

Mrs Leona B. Smith (SIGNATURE OF NEXT OF KIN) 2119. GRANT ST (STREET AND NUMBER)
MRS. LEONA B. SMITH (NAME PRINTED OR TYPED) PORTSMOUTH, Ohio (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 24th day of APRIL, 1947, at city (or town) of PORTSMOUTH, county of Scioto, and State (or Territory or District) of Ohio

JARVEN HLOYD, Notary Public
 My commission expires 9 1949
 *NOTE.—Page 4 is part of the notarial attestation.

Jarven Hloyd
 Notary Public (OFFICIAL TITLE)

Pvt. Albert D. Smith, 35 073 A12
Plot G, Row 7, Grave 140,
United States Military Cemetery
Henri-Chapelle, Belgium

18 April 1947

Mrs. Leona B. Smith
2119 Grant Street
Portsmouth, Ohio

Dear Mrs. Smith:

Reference is made to the inclosed form "Request for Disposition of Remains" signed by you. This form is being returned to you for correction of those parts circled in red.

In making the necessary changes please do not erase any of the information already on the form but draw a line through the incorrect information and enter the correction just above.

Your promptness in returning the corrected form will avoid further delay.

Sincerely,

2 Incls.

RICHARD B. COOMBS
Major, GSC
Memorial Division

T
0-11

498
Pvt. Albert D. Smith, 35 073 412
Plot G, Row 7, Grave 140,
United States Military Cemetery
Henri-Chapelle, Belgium

3 March 1947

Mrs. Leona B. Smith
1514 Grandview Avenue
Portsmouth, Ohio

Dear Mrs. Smith:

The people of the United States, through the Congress have authorized the disinterment and final burial of the heroic dead of World War II. The Quartermaster General of the Army has been entrusted with this sacred responsibility to the honored dead. The records of the War Department indicate that you may be the nearest relative of the above-named deceased, who gave his life in the service of his country.

The enclosed pamphlets, "Disposition of World War II Armed Forces Dead," and "American Cemeteries," explain the disposition, options and services made available to you by your Government. If you are the next of kin according to the line of kinship as set forth in the enclosed pamphlet, "Disposition of World War II Armed Forces Dead," you are invited to express your wishes as to the disposition of the remains of the deceased by completing Part I of the enclosed form "Request for Disposition of Remains." Should you desire to relinquish your rights to the next in line of kinship, please complete Part II of the enclosed form. If you are not the next of kin, please complete Part III of the enclosed form.

If you should elect Option 2, it is advised that no funeral arrangements or other personal arrangements be made until you are further notified by this office.

Will you please complete the enclosed form, "Request for Disposition of Remains" and mail in the enclosed self-addressed envelope, which requires no postage, within 30 days after its receipt by you? Its prompt return will avoid unnecessary delays.

Sincerely,

THOMAS B. LARKIN
Major General
The Quartermaster General

* Enclosures

1. Pamphlet (Options)
2. Disposition Form
3. Envelope
4. Pamphlet (Cemeteries)

Form 3547
Rev. 9-46

NOTICE TO SENDER OF FORWARDING ADDRESS

United States Post Office

MAR 7 1947

PORTSMOUTH, OHIO

(Office)

(State)

In accordance with your request you are notified that the matter mailed by you to Mrs. Leonard D. Smith's 140 Franklin

(Key No. _____)

PORTSMOUTH, OHIO

is incorrectly addressed because the addressee has removed to _____

219 Grant St PORTSMOUTH, OHIO

Forwarding postage required _____ cents.

Matter bearing a pledge to pay forwarding or return postage is forwarded or returned, rated with the postage due. Matter not bearing such pledge is treated as prescribed by the Postal Laws and Regulations.

Respectfully,

SMITH, ALBERT D. - 35073412

POSTMASTER

POSTMASTER.—Fill in amount of forwarding postage ONLY when requested by 4/18-47
16-21556-3 U. S. GOVERNMENT PRINTING OFFICE

Hen.-chap-Bel-G-7-140

Kalavik

Post Office Department

OFFICIAL BUSINESS

PENALTY FOR PRIVATE USE TO AVOID
PAYMENT OF POSTAGE, \$300
(GPO)



POSTAGE DUE 2 CENTS

*War Dept
Office of Quartermaster Gen
Wash D.C.*

16-21556-1

ORDER 293
Smith, Albert D.
A.S.N. 25 073 412

15 January 1947

Mrs. Leona B. Smith
1514 Grandview Avenue
Perramouth, Ohio

Dear Mrs. Smith:

Inclosed herewith is a picture of the United States Military Cemetery Henri-Chapelle, Belgium, in which your husband, the late Private Albert D. Smith, 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 these 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,

1 Incl
Photograph

G. A. BORKAN
Brigadier General, (MC)
Assistant

cb

QMG
Graves Registration
(European, U. S., Misc.)

9 December 1946

SUBJECT: Burial Records

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

1. Request the burial reports and grave markers for the following decedents, interred at the United States Military Cemetery, Henri-Chapelle, Belgium, be changed to read as underscored:

<u>NAME</u>	<u>RANK/ GRADE</u>	<u>SERIAL NO.</u>	<u>ORGAN</u>	<u>PLOT</u>	<u>LOT</u>	<u>GRAVE</u>
Smith, Clarence T.	Pfc	35 646 334	<u>Co "H"</u> <u>504 Pchgt Inf</u> <u>East</u> <u>SPans/B Div</u>	29	9	173
Tom, Robert F.	Pfc	38 517 992	<u>Co "B"</u> <u>148th Inf East</u> <u>1st Inf Div</u>	2	9	177
Smith, Albert D.	Pvt	35 073 412	<u>Co "D"</u> <u>48th Acad Inf</u> <u>2d</u> <u>7th Armd Div</u>	6	7	140

2. The records of this office have been reverified with the records of The Adjutant General, War Department, and have been found to be correct as indicated above.

FOR THE QUARTERMASTER GENERAL:

MARTIN C. WILEY
Major, QMG
Assistant

REQUEST FOR PREPARATION OF LETTER
FOR 293 INFORMATION

TE

29 Nov. 46

NAME

79-
Smith, Albert D. Pvt.

SERIAL NUMBER

35 073 412

LETTER TO

Field

<input type="checkbox"/>	NAME			
<input type="checkbox"/>	RANK			
<input type="checkbox"/>	ASN			
<input checked="" type="checkbox"/>	ORGANIZATION			
<input type="checkbox"/>	NEXT OF KIN			
<input type="checkbox"/>	LATEST ADDRESS OF NEXT OF KIN			
<input type="checkbox"/>	DATE OF DEATH			
<input type="checkbox"/>	CEMETERY	PLOT	ROW	GRAVE
<input type="checkbox"/>	MISCELLANEOUS			<i>Handwritten notes</i>

SPECIAL CHECKER (Signature)

L. E. Wise

SPQYG 293

Smith, Albert D.

10 June 1946

35 073 412

Mrs. Leona B. Smith
1514 Grandview Avenue
Portsmouth, Ohio

Dear Mrs. Smith:

The War Department is most desirous that you be furnished information regarding the burial location of your husband, the late Private Albert D. Smith, A.S.N. 35 073 412.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery, Mourri-Chapelle, Belgium, plot G, row 7, grave 140.

This cemetery is located approximately seven miles southwest of Aachen, Germany, five miles northwest of Eupen and eight miles east of Liege, both in Belgium, and is under the constant care and supervision of United States military personnel.

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

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

pdj

lk

REGISTRATION
No. 1
Revised 1 Sept. 1943

RESTRICTED

REPORT OF BURIAL

FM 10-430 AND AFM 30-1815

921 4092 16
15 October 1944
Date

16 44

Smith, Albert D. Pvt 35073412
 Last Name First Initial Rank Serial No.
 "CO. B" 48 4th Inf. Bn Unknown 7th ARMD. DIV. P.R.
 Unknown Unit Organization
 15 October 1944 EST KIA GSW crest
 Place of Death Date of Death Cause of Death
 1700 15 October 1944 Henri Chapelle #1 705352
 Time and Date of Burial Name of Cemetery Name or Coordinates of Location
 140 7 G Cross
 Grave Number Row Number Plot Number Type of Marker

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

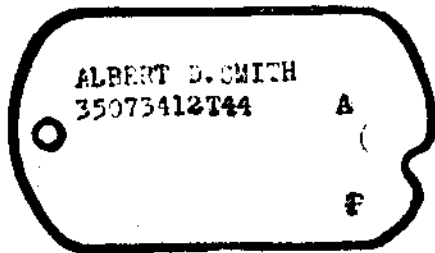
If No Identification Tags
How were remains identified?

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: end of row
 Name Serial No. Rank Organization Grave No.
 Deceased's Left: Scott
 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 P

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

Harry Dubrov
 Signature of Officer or other person reporting burial
 HARRY DUBROV, 1st Lt. GAO

6/26-45
APG

**WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE**

WASHINGTON 25, D. C.

REPORT OF DEATH

DATE 2 Nov 1944

MI/100/4626

FULL NAME Smith, Albert D.		ARMY SERIAL NUMBER 35 073 412	GRADE Pvt
HOME ADDRESS Portsmouth, Ohio		ARM OR SERVICE Inf	DATE OF BIRTH 6 Jan 1914
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH 14 Oct 1944
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 17 Mar 1944	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS
EMERGENCY ADDRESSES (NAME, RELATIONSHIP & ADDRESS) Mrs. Leona B. Smith, wife, 1514 Grandview Ave., Portsmouth, Ohio			
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Leona B. Smith, wife, same as above. William D., Janice F. Smith, children, 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

Beneficiaries continued;
Mr. William W. Smith, father, Rexton, Ky
Mr. Herman A. Smith, brother, Greenfield, Ohio

COPIES FURNISHED:			<input checked="" type="checkbox"/> BATTLE
S. G. O.	F. S. I.	F. O. U. S. A.	<input type="checkbox"/> NON-BATTLE
S. G. C. M. C.	G. F. D.	ARMY EFFECTS BUREAU	
G. A. C.	VET. ADMIN.	CASUALTY BRANCH FILE	
			A. S. 201 FILE

BY *[Signature]* SECRETARY OF WAR
 8 NOV 1944
 T-101
 ADJUTANT GENERAL

**WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE**

WASHINGTON 25, D. C.

REPORT OF DEATH

DATE 2 Nov 1944
MI/10a/4625

FULL NAME Smith, Albert D.		ARMY SERIAL NUMBER 35 073 412	GRADE Pvt										
HOME ADDRESS <i>re</i> Portsmouth, Ohio		ARM OR SERVICE Inf	DATE OF BIRTH 6 Jan 1914										
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH 14 Oct 1944										
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 17 Mar 1944	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS										
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Leona B. Smith, wife, 1514 Grandview Ave., Portsmouth, Ohio													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Leona B. Smith, wife, same as above. William D., Janice F. Smith, children, same as above.													
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

ADDITIONAL DATA AND/OR STATEMENT

Beneficiaries continued;
Mr. William W. Smith, father, Rexton, Ky
Mr. Herman A. Smith, brother, Greenfield, Ohio

FILE
OCT 12 1944

M/B

COPIES FURNISHED:			<input checked="" type="checkbox"/> BATTLE
S. S. C.	F. B. I.	F. O. U. S. A.	<input type="checkbox"/> NON-BATTLE
S. S. C. M. C.	C. F. D.	ARMY EFFECTS BUREAU	
S. A. C.	VET. ADMIN.	CASUALTY BRANCH FILE	
		A. G. 201 FILE	

BY ORDER OF THE SECRETARY OF WAR
[Signature]
ADJUTANT GENERAL

288117

RTB:GC:dh
January 5, 1946

Mrs. Leona B. Smith
1514 Grandview Avenue
Portsmouth, Ohio

Dear Mrs. Smith:

The Army Effects Bureau has received additional property of your husband, Private Albert D. Smith, consisting of funds in the amount of \$23.65. 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.

Yours very truly,

A. G. SCHUMACHER
Captain, QMC
Asst. Chief, Adm. Division

1 Incl--
Check

1-7-46

PR-1

AMOUNT OF CHECK 288.17	NOTE DISCREPANCY IN NAME	ENCLOSE VALUABLE SHIP VALUABLES	RECIPIENT FROM <input checked="" type="checkbox"/> CASUALTY REPORT
ACCOUNT NUMBER 1797	SERIAL NUMBER	VALUABLES SHIPPED BY (clerk)	INVENTORY FORM 20
Mrs. Leona B. Smith Pvt. Albert D. Smith 35 073 412 288,117			LETTER
			NO. & TYPE OF CONTAINER
			ENVELOPE
			CARTONS
			PACKAGE
			FOOT LOCKER
			SPECIAL INSTRUCTIONS
			REMOVE GI
			SHIP BLOODSTAINED
			SHIP DAMAGED
			REMOVE BL'DSTAINED
REMOVE DAMAGED			
PTB:GC:dh			DATE ACTION TAKEN 1-5-46
DATE OF FINDING	APPLICANT	MAIL REVIEWER (initials) YL	
REMARKS			SHIPPED
			FRANKED
			EXPRESS
			FREIGHT
			DATE SHIPPED
			SHIPPING CLERK
			ROUTING
1 ACCOUNTING BRANCH			
WAREHOUSE			
2 FILE			
ORDER FOR ACTION			

ARMY EFFECTS BUREAU
ACCOUNTING INVENTORY

CASE NO.

288 117

TYPED BY

DATE

12-28-45

STATUS

D

NAME

Albert D. Smith

A.S.N.

35073412

RANK

Pat.

ORGANIZATION

Inf.

CONSIGNOR

Mrs. Helen Smith
Route 1, Jackson Center, Ohio

AMOUNT

\$23.65

ACCOUNT NO.

PAID-Check No 168465 ew
176907 ego

LIST NO.

CHECK DESCRIPTION:

INCLUDED IN ONE U.S. TREASURER'S CHECK
NEGOTIABLE BY EQM

DATED

* Refunded by above consignee,
funds erroneously sent out
on case of Robert D. Smith, 35073133,
Case No. 52 3423

SYMBOL

AMOUNT

REMARKS:

523423

KTB:KW:am
December 13, 1945

~~Mrs. Helen N. Smith~~
~~Route #1~~
~~Jackson Center, Ohio~~

Dear Mrs. Smith:

This refers to our letter of November 16, regarding funds in the amount of \$23.65, which were transmitted to you by the Army Effects Bureau.

I regret to inform you that upon rechecking our records, we find that the money does not belong to your son, Private First Class Robert D. Smith, but to a Private Albert D. Smith, who was killed in action. Due to the similarity of names, these funds were forwarded to you as the property of your son; however, I will appreciate it if you will return this money to this Bureau in order that it may be transmitted to the widow of Private Albert D. Smith.

Please accept my apology for this error. I sincerely regret any inconvenience it has caused you.

Our records do not indicate receipt of either funds or property belonging to your son.

Yours very truly,

R. T. BROWN
1st Lt., QMC
Chief, Adm. Division

288117

GIG:V:rdh
June 29, 1945

Mrs. Leona B. Smith
1514 Grandview Avenue
Portsmouth, Ohio

Dear Mrs. Smith:

The Army Effects Bureau has received from overseas some more property of your husband, Private Albert D. Smith.

This property, contained in one package, 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,

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

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mrs. Leona B. Smith
1514 Grandview Avenue
Portsmouth, Ohio

SHIP TO:

Pvt. Albert D. Smith

Effects of:
Name

35073412

ASN

288117 D

Case No.

Wt.

DATE 30 June 1945

GHG:JFH:da

J. J. [Signature]
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.

REMARKS:

SHIP DAMAGED PROPERTY

1 JFH
Fracked _____
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____
No. of packages _____

JUL 5 1945

N.K.
Shipping Clerk

JUN-23 34

PACKAGE DESCRIPTION

ARMY EFFECTS BUREAU INVENTORY

288,117
ns

DECEASED
 MISSING
 P.O.W.
 ABANDONED
 TALLY NO. 8375
 INV. DATE 14 June 45
 ORIG. NO. OF PKGS. 1
 BOX NO. 69
 SHEET 11 OF 1 SHEETS
 ORGANIZATION 48 Armid Div
 Wm...

NAME ALBERT D. SMITH
 A.S.N. 35073412 RANK PVT

Belt	<u>1</u>	<u>BELT, MONY (NO MONY)</u>	<u>TOWELS & WASHCLOTHS</u>	<u>RINGS</u>
Cloth, Wash			<u>CLOTHING</u>	<u>BAGS, CLOTH OR TRAVEL</u>
Coats			<u>BRACELET IDENT.</u>	<u>BULLFOLD, (NO MONY)</u>
Footwear, Pr.			Brushes	Case
Gloves, Pr.			<u>CAMBRAS</u>	Foot Locker
Handkerchiefs			Glasses	<u>LET. SEW. TLT. OR WRITING</u>
Headwear			Knives	<u>BOOKS</u>
Jackets			Lighters	Books, Address
Overcoats			<u>MISC. Souvenirs</u>	Books, Pilot Log
Scarfs			Pen, Fountain	<u>DIARY (REMOVED FOR DUP)</u>
Shirts			Pencil, Mechanical	<u>FILMS</u>
Socks, Pr.			Pipes	Letters
Ties			<u>RELIGIOUS ARTICLES</u>	Papers, Personal
Towels			<u>RIBBONS, DECORATION</u>	Photos
Trousers, Pr.			Rings	Shoe shine articles
Trunks, Pr.			Tobacco	<u>SHORT SHORTER</u>
Underwear			Toilet articles	<u>SOUVENIRS</u>
			<u>WATCH</u>	<u>SOUVENIR MONY</u>
				Stationery
				<u>TESTAMENTS</u>
				<u>U.S. MONEY (AMOUNT)</u>

REMARKS No Information ATTACHMENTS FORM #54 FORM #100

Note: Testaments damaged by moisture and pages discolored.
 * Cards have monies

1- Souvenirs
 1- RR Label

DAMAGED

C.A.T. <u>None</u>	WEIGHT	G.I. REMOVED
WAREHOUSE SPACE	DATE SHIPPED <u>JUL 5 1945</u>	SHORTAGE ON REVERSE
INVENTORIED BY <u>H. Rissler</u>	STORIED BY <u>J.K.</u>	IDENT. TAGS REMOVED
PACKED BY	CHECKED BY <u>E</u>	DIARY REMOVED
		LOCKED STORAGE
		LAUNDRY REMOVED
		FILM REMOVED

Serial No. 35073412 Name Albert D. Smith
Grade Pvt. Rank Pvt.
Organization 48th A-F. Bn., 7th A.D.
Address _____
Nearest Relative _____
Address _____
Killed in Action KIA Died of Disease _____
Date 14 Oct. 1944 Hospital _____
Battle Area _____ Information _____
Place of Burial _____
Point of Coordination _____
Description of Body _____
Members Missing _____

Signed Sam B. Plyler
Capt. G. M. C.

NAME SMITH, ALBERT D PV 3412

BAY	PALLET	BOX	TALLY
	11	69	8375

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
GRB		

ES. QM Form 48

RESTRICTED
INVENTORY FORM

10 JAN 45

Date

SUBJECT: Inventory of Personal Effects of:

SMITH ALBERT D PVT 35073412
(Last Name) (First Name) (MI) (Rank) (ASN)

TO: Effects Quartermaster, Communication Zone, APO _____ US Army

The above named individual of 48TH ARMD INF BN 7TH ARMORED DIVISION
(Unit) (Organization)

was reported KIA about 14 OCTOBER 1944
Status (KIA, MIA, Hosp. etc.) (Date)

Designated Beneficiary if information readily accessible NOT KNOWN

INVENTORY OF EFFECTS

- 1 SHAVING KIT ✓
- 1 NEW TESTAMENT ✓
- 1 MONEY BELT ✓
- 1 COLLAR INSIGNIA ✓

Money in the amount of NONE has been turned into _____
(Name of Finance Office
Form WDFD 38 enclosed.
and symbol number)

NOT KNOWN
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 TRUCK on 10 JAN 45.
(Rail, Truck, etc.)

Name Sam B. Plyler
Rank & ASN SAN B PLYLER
CAPT OMC O-1016266
Organization HEADQUARTERS 7th A.D.

Any additional pertinent information:



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

JRM:MH:dw
April 21, 1945

IN REPLY REFER TO 288,117

Mrs. Leona B. Smith
1514 Grandview Avenue
Portsmouth, Ohio

Dear Mrs. Smith:

The Army Effects Bureau has received some additional property of your husband, Private Albert D. Smith.

These effects, contained in one package, are being forwarded to you. If delivery is not made within thirty days from this date, please notify me so that tracer action may 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.

Extending every sympathy, I am

Sincerely yours,

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

83

ARMY SERVICES FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mrs. Leona B. Smith

SHIP TO:

1514 Grandview Avenue

Pvt. Albert D. Smith

Portsmouth, Ohio

Effects of:
Date

35073412

QNH

268,117 0

Case No.

It.

DATE 21 April 1945
JRM:MH:dw

Mildred Blawie
FOR: Effects Quartermaster

REMARKS:

_____ Enclose Bureau Check
_____ Acct. No. _____
_____ Amount _____
_____ Include "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.

REMARKS:

1 pkg

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

AD
Shipping Clerk

SHEET <u>1</u> OF <u>1</u> SHEETS ✓	ARMY EFFECTS BUREAU INVENTORY		DECEASED MISSING <input checked="" type="checkbox"/>
BOX NUMBER <u>8</u>	ORIGINAL NUMBER OF PACKAGES <u>1</u>		P.O.W. ABANDONED <input type="checkbox"/>
TALLY NUMBER <u>6978</u> ✓	INVENTORY DATE <u>21-Mar-45</u>	CASE NUMBER <u>288, 117 m</u>	
EFFECTS OF <u>Albert D. Smith</u>	RANK <u>Pvt</u>		
A.S.N. <u>35073412</u> ✓	ORGANIZATION <u>unp.</u>		

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

Handwritten signature

REMARKS: wife
Leona B. Smith
2012 Grant St.
Portsmouth, Ohio

ATTACHMENTS: Inventory
1st P. Sub

A. Smith
Norton Kentucky

G.A.T. none

WAREHOUSE SPACE 2243 STORED BY [Signature]

INVENTORIED BY McTelure

PACKED BY [Signature] CHECKED BY E

WEIGHT	GI REMOVED
	SHORTAGE ON REVERSE <input checked="" type="checkbox"/>
	IDENT. TAGS REMOVED
	DIARY REMOVED
DATE SHIPPED <u>MAY 5 1945</u>	LOCKED STORAGE
	LAUNDRY REMOVED
	FILM REMOVED

ADDITIONAL REMARKS

STORAGE

U.S. GOVT. CHECK BOOK

NUMBER

DATE

SYMBOL

AMOUNT

1172 - French Francs

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

M. Kelso

INVENTORY CLERK

A. Grube

SUPERVISOR

G.I. APPROVAL

NAME

SMITH, A PVT

BAY	PALLET	BOX	TALLY
		8	6978
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
P.E.BAG			

Eff. QM Form 43

INVENTORY OF EFFECTS

The following listed effects
were found on Pvt
(Rank)

Smith, Albert D 35072412
(Name) (ASN)

Unkn Est 10-13-44
(Orgn) (Date Died)


Buried at Henri Chapelle # 1

and effects forwarded to
Effects QM.

Watch ↙
Lighter ↙
Knife ↙
Pen ↙
Bracelet ↙
Soc Sec Card ↙
Ring ↙
16 Souv Coins ↙

1172 French Francs 0

16 October 1944
ARWIN W LISIUS
Capt FD
SN 211-515


HARRY DUEPOV, 1ST LT, QMG

6 3507 3412
R SMITH
V L
711-239





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

IN REPLY REFER ~~208,117~~

JRM:JM:dn
April 14, 1945

Mrs. Leona B. Smith
1514 Grandview Avenue
Portsmouth, Ohio

Dear Mrs. Smith:

The Army Effects Bureau has received from overseas some property of your husband, Private Albert D. Smith.

This property, consisting of a few small items, is being sent you.

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 husband.

Yours very truly,

P. L. KOEB
2nd Lt. Col. G.
Officer-in-Charge
SJ Unit

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Leona B. Smith
1514 Grandview Avenue
Portsmouth, Ohio

Effects of: Pvt. Albert D. Smith
Name
ASN 35073412
Case No. 208117 D
Wt.

DATE 9 April 1945
JRM:IB:vw

Ruth Smith
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.

file

REMARKS:

1 pkg

Franked _____
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____
No. of packages 1

APR 20 1945

Shipping Clerk *mk*

SHEET <u>1</u> OF <u>1</u> SHEETS	ARMY EFFECTS BUREAU INVENTORY		DECEASED MISSING <input checked="" type="checkbox"/>
BOX NUMBER <u>8</u>	ORIGINAL NUMBER OF PACKAGES		P.O.W. ABANDONED
TALLY NUMBER <u>6915</u>	INVENTORY DATE <u>17 Mar 45</u>	CASE NUMBER <u>288, 117</u>	<u>m</u>
EFFECTS OF <u>Albert D. Smith</u>	RANK <u>Pat.</u>		
A.S.N. <u>35073412</u>	ORGANIZATION <u>48th Armd Inf Bn 7th Armd Div</u>		

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

REMARKS: no information

ATTACHMENTS: FORM #54 FORM #300

Inventory
Sub. to Label

G.A.T. <u>none</u>	WEIGHT	GI REMOVED
WAREHOUSE SPACE	STORER BY <u>mk</u>	SHORTAGE ON REVERSE
INVENTORIED BY <u>1197</u>	DATE SHIPPED <u>APR 20 1945</u>	IDENT. TAGS REMOVED
PACKED BY <u>Curtis</u>	CHECKED BY <u>E</u>	DIARY REMOVED
		LOCKED STORAGE
		LAUNDRY REMOVED
		ADDITIONAL

RESTRICTED

October 25 1944

SUBJECT: Inventory of Personal Effects of: Pvt Albert D. Smith 35073412
48th Armored Inf Bn 7th Armored Division
KIA about October 14 1944.

TO : Effects Quartermaster, Communication Zone
Designated Beneficiary not readily accessible.

Inventory of Effects

1 Sewing Kit ✓
2 Patches ✓
6 Souvenir Spoons ✓

No Money ✓

Names and addresses of banks not known ✓

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 truck on October 25 1944.

H. A. Pickford
H. A. PICKFORD
1st Lt. QMC O-1016270
Headquarters, 7th A.D.

NAME

SMITH, ALBERT D.

PVT

BAY	PALLET	BOX	TALLY
		8	6915
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
PE BAG Est. QM Form 48			

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

M:IB:vw
Case No. 238117
Date 9 April 1945

SUBJECT: Report of transactions in disposing of the effects of

Albert D. Smith, 35073412 late a
(Name of deceased) (Army Serial Number)
Private, Infantry who died
(Grade) (Organization, Army or Service)
on the 14 day of October, 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 at decedents 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 8 April 1945, pursuant to Special Orders 223, Headquarters, KCQM Depot, dated 25 September 1943, the application or affidavit of _____

Mrs. Leona B. Smith 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, Mrs. Leona B. Smith of _____ (Name of person found entitled)

1514 Grandview Avenue, Portsmouth State of
(Number, Street or Avenue) (City, Town or Village)
Ohio, is the widow 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

Handwritten initials