

293 HART, ISAH A. JR. 34-138-802
3413882 PVT. CAV. (MISS.)
EUROPEAN AREA 145ms

Declassified in accordance with D.O. 13526

HEADQUARTERS
3061st QUARTERMASTER GRAVES REGISTRATION COMPANY
APO 503

293 Hart, Irving W. (Clauson)
9 May 1946

C E R T I F I C A T E

The partially filled out Reports of Interment on the Sasebo and Nagasaki Cemeteries received from Lt. Viola from the 3064th QM Graves Registration Company, 1st Platoon, did not include a signed informational copy for this Headquarters files. Therefore some of the information on the R.O.I.'s submitted by this Headquarters was not received by this Unit in certified form. Also the Cemetery records of the Sasebo and Nagasaki Cemeteries received by this Unit from 8th Army Headquarters were not signed. The Reports of Disinterment received from Lt. Viola of the 3064th QM Graves Reg. Co. on the Sasebo and Nagasaki Cemeteries were signed, but the reports do not cover all of the information on the R.O.I.'s.

This Headquarters has received from Lt. Viola of the 3064th QM Graves Reg. Co. a list of additional information on the American Civilians buried in the fore mentioned Cemeteries which he received from QM General in Washington; however, this list is not signed or certified.

This Headquarters has been unable to get signatures on any of the above mentioned reports; therefore this Unit is attaching the above Certificate to the Reports of Interment retained in USAF Cemetery, Yokohama #1, files.

Due to the fact that authentication of information received by this Headquarters has been impossible, this Unit is submitting R.O.I.'s on the deceased personnel from Sasebo and Nagasaki Cemeteries, although all information is not certified.

Willis H. Fassett Jr.

WILLIS H. FASSETT JR.
1st Lt., QMC,
Commanding

John A. Reitze
JOHN A. REITZE
2nd Lt., QMC

*July 17-24-46
P. Rodgers
man*

QMC Form No. 1044
1 September 1944

REPORT OF DISINTERMENT FOR IDENTIFICATION

Place Sasebo Kyushu Japan

Date 11 April 1946

Social Sec. _____

Serial number 519-120-3567

1. Remains of IRVING W. HART Jr.

Rank _____ Organization American Civilian

2. Disinterred (date): _____ From (give complete location): _____

11 April 1946 USAF Cemetery No 1 Sasebo Kyushu Japan

By: Group 1st. Platoon Unit 3064th QM Gr Reg. Co.

3. Reburied (date) _____ In (give complete location) Row 22, Gr-1070
16 April 1946 USAF Cemetery, Yokohama #1, Honshu, Japan

By: Group Cemetery, Unit 3061st QM GR Co Nature of reburial Burial box

4. Report as to nature of original burial and condition of body upon disinterment:

Body buried in burial bag
Body bady, almost completely decomposed (bones)

5. (a) Identification tags: Buried with body? No On grave marker? No

(b) Other means of identification found upon disinterment, and general remarks: _____

NMS form "N" buried in canteen with body.

6. What does examination of body show as regards the following identifying items:

(a) Height (actual measurement) _____

(b) Weight (estimated) _____

(c) Hair-Color Sandy

Quantity _____

Characteristics Straight

(d) Hair on face-Color _____

Location _____

Quantity _____

(e) Permanent marks on body (old scars, peculiarities, or missing parts) _____

(f) Wounds or missing parts (received at time of casualty) _____

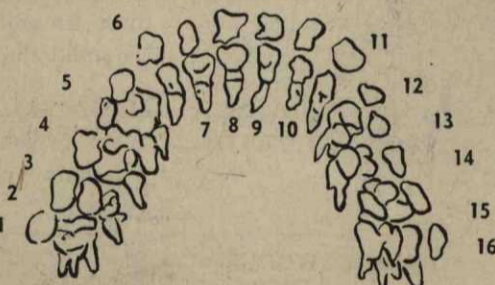
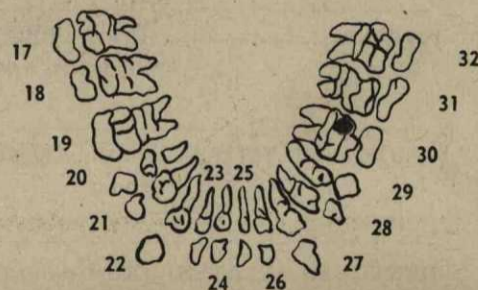


Diagram represents mouth wide open



(All of the above impossible to determine due to Decomposition)

7. Disinterment supervised by Leo J. Droppelman Approved: Joseph J. Viola

Sgt. Leo J Droppelman (Title) JOSEPH J. VIOLA
2nd Lt., QMC

8. Reburial supervised by _____ Approved: _____

(Title) _____

19 Jun 46

Instructions for the Proper Completion of G.R.S. Form No. 4

Enter information, as noted below, on reverse side of sheet in the corresponding numbered space.

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.

2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.

3. Give date and accurate information, as to location of reburial and the group and unit which made reburial, and how reburial was made—in casket, wooden box, etc.

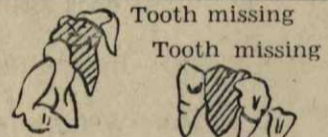
4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried—in a casket, box, burlap, etc. This statement should be as complete as possible.

5. (a) State whether identification tags were found buried with body and on grave marker by reporting "Yes" or "No".

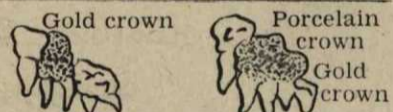
(b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying the body, other than that tabulated under Item No. 6. If additional remarks are necessary use additional sheet of paper and attach hereto.

6. Give all information as to body description and dental chart as nearly correct as the condition of the body will allow. Items (e) and (f) under the body description are very important and should be very complete. The dental chart is also very important and should be filled with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

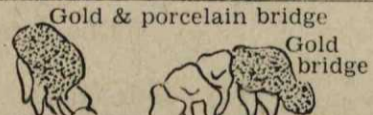
MISSING TEETH—All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus:



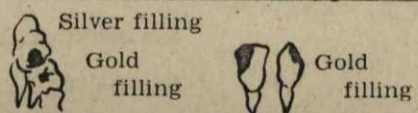
CROWNED TEETH—Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain) thus:



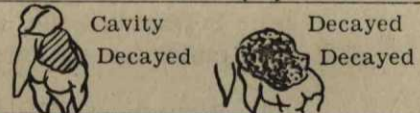
BRIDGE WORK—Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:



FILLINGS—Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus:



CARIES (CAVITIES)—Outline location and size of cavities, shade in thus:



DENTURES (PLATES) Draw diagram of relative size and shape of plate block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp".

7. Show name of person supervising the disinterment and the name and title of the person approving same.

8. Show name of person supervising the reburial and the name and title of the person approving same.

F.M.F. PAC Form 9

Graves Registration

REPORT OF INTERMENT

293
HART, **Irving W., Jr.** **519-12-3567** **Died: 3-18-45**
 (Last Name) (First) (Initial) (Serial Number) (Rank) (Organization)
cm **Civilian Employee**

Fukouka POW Camp #2 **U.S. Armed Forces #1, Sasebo, Kyushu, Japan.**
 (Place of death) (Name of Cemetery) (Name or coordinates of location)

15 **2** **1**
 (Grave Number) (Row Number) (Plot Number) (Religion, if known)

Disposition of identification tags: One Buried with body Yes No
 Remains located at One Attached to marker Yes No
Nagasaki-Ken, Kitamatsuura Gun Yukimuka Soto Cemetery.

(If no identification tags, what means of identification are buried with body?)
Form "N" in canteen buried with body. Identified by name on headboard.
 (If no identification tags, but identity definitely established, give particulars)

BODY BURIED ON RIGHT **MC EVERS** **14**
 (Name) (Ser. No.) (Rank) (Org) (Grave No.)

BODY BURIED ON LEFT **JOHNSON** **16**
 (Name) (Ser. No.) (Rank) (Org) (Grave No.)

FILE
NAVY SECTION
C. J. MOYER
AUG 16 1950

INSTRUCTIONS: Fill in all possible information, forward two (2) copies to CG, FMF, PAC as soon as practicable. Take prints of one finger (Preferably right index) of identified dead and all ten fingers of unidentified, if possible.

IF DECEASED UNIDENTIFIED

TAKE FINGERPRINTS OF BOTH HANDS. If unable to obtain a complete set of fingerprints, TAKE THOSE YOU CAN. And fill in as many of the following as possible.

HEIGHT: APPARENT NATIONALITY:
WEIGHT: LAUNDRY MARKS:
COLOR OF EYES: NUMBER OF RIFLE:
COLOR OF HAIR: RACE

IS TOOTH CHART ATTACHED?
(If possible, have medical personnel take a tooth chart)

In space below, locate and describe any scars, birthmarks, moles, deformities, etc.:

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

IF THIS IS AN ISOLATED BURIAL, ATTACH A SKETCH OF LOCATION, ORIENTED WITH PERMANENT LANDMARKS.

(Signature of officer or person reporting burial.)

LEFT HAND

RIGHT HAND

4
3
2
1
THUMB

4
3
2
1
THUMB

F.M.F. PAC Form 9

Graves Registration

REPORT OF INTERMENT

Social Security No.

Date 3-10-48

610-12-8807

Civilian Employee

HART, Irving I 010-12-8807
(Last Name) (First) (Initial) (Serial Number) (Rank) (Organization)

Fukuoka POW Camp #2 U.S. Armed Forces #1, Sasebo, Kyushu, Japan.
(Place of death) (Name of Cemetery) (Name or coordinates of location)

15 2 1
(Grave Number) (Row Number) (Plot Number) (Religion, if known)

Disposition of identification tags: One Buried with body Yes No

One Attached to marker Yes No

Remains located at Nagasaki-Ken, Kitamatsuura Gun Yukisuka Soto Cemetery.

(If no identification tags, what means of identification are buried with body?)

Form "N" in canteen buried with body. Identified by name on headboard.

(If no identification tags, but identity definitely established, give particulars)

BODY BURIED ON RIGHT MC EVERE 14
(Name) (Ser. No.) (Rank) (Org) (Grave No.)

BODY BURIED ON LEFT JOHNSON # 16
(Name) (Ser. No.) (Rank) (Org) (Grave No.)

FILE
NAVY SECTION
C. J. MOYER
AUG 1 1950

INSTRUCTIONS: Fill in all possible information, forward two (2) copies to CG, FMF, PAC as soon as practicable. Take prints of one finger (Preferably right index) of identified dead and all ten fingers of unidentified, if possible.

BASE DEPOT REPRODUCTION

IF DECEASED UNIDENTIFIED

TAKE FINGERPRINTS OF BOTH HANDS. If unable to obtain a complete set of fingerprints, TAKE THOSE YOU CAN, And fill in as many of the following as possible.

HEIGHT: APPARENT NATIONALITY:
WEIGHT: LAUNDRY MARKS:
COLOR OF EYES: NUMBER OF RIFLE:
COLOR OF HAIR: RACE

IS TOOTH CHART ATTACHED?
(If possible, have medical personnel take a tooth chart)

In space below, locate and describe any scars, birthmarks, moles, deformities, etc.:

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

IF THIS IS AN ISOLATED BURIAL, ATTACH A SKETCH OF LOCATION, ORIENTED WITH PERMANENT LANDMARKS.

(Signature of officer or person reporting burial.)

LEFT HAND

RIGHT HAND

4

3

2

1

THUMB

4

3

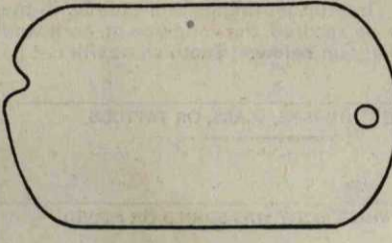
2

1

THUMB

RESTRICTED

(REINTERMENT)

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)				DATE OF REPORT 24 May 1946	
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.				SERIAL No.	
		NAME (Last, first, middle initial) HART, Irving W. Jr.				See remarks	
		GRADE		ORGANIZATION American Civilian		BRANCH OF SERVICE	
		RACE White		RELIGION		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	
PLACE OF DEATH Fukuoka POW Camp #2		CAUSE OF DEATH			DATE OF DEATH 18 March 1945		
EMERGENCY ADDRESSEE (Name, relationship, and address) Mrs. Irving W. Hart Sr., (Mother) 1817 Vermont St., Boise, Idaho.							
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) Identified by original R.O.I.					
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes							
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME No personal effects found on body							
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.							
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY USAF Cemetery, Yokohama #1, Honshu, Japan.							
DATE OF BURIAL 16 April 1946	HOUR 0920	BURIED IN (Shroud, blanket, or name of other) Burial Box	TYPE OF GRAVE MARKER Reg. Cross	PLOT No. USAF	ROW No. 22	GRAVE No. 1070	
WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery, Sasebo #1, Kyushu, Japan. CO-OR 1112-1284			PLOT No. 1	ROW No. 2	GRAVE No. 15	
TYPE OF RELIGIOUS CEREMONY Non-denominational	PERSON CONDUCTING BURIAL RITES Chaplains: J.S. Elliott T.F. Reilly		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY Report of Interment buried with remains. (In bottle)				
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) No	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) No						
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) JOHNSON, Edwin W.		RANK	SERIAL No. See remarks	ORGANIZATION American Civilian	GRAVE No. 1071		
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) McEVERS, Ralph (NMI)		RANK	SERIAL No. See remarks	ORGANIZATION American Civilian	GRAVE No. 1069		
SIGNATURE OF PERSON PREPARING REPORT Vincent A. Rackiewicz S/Sgt. V. A. RACKIEWICZ			SIGNATURE OF GRS OFFICER VERIFYING REPORT John A. [Signature] 2nd Lt., GRC.				
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.							

RESTRICTED

16-43897-1

RESTRICTED

Section UNIDENTIFIED REMAINS.

INSTRUCTIONS:

(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks.

(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR Sandy	BIRTHMARKS, SCARS, OR TATTOOS
WEAPON AND SERIAL No.		LAUNDRY MARKS		WHERE BODY WAS BURIED OR FOUND

OTHER IDENTIFICATION CLUES

NMS Form "N" buried with remains. (In Canteen)

Finger prints impossible due to decomposing of remains.

FILLINGS	<p>SILVER FILLING GOLD FILLING</p>	<p>UPPER</p> <p>LOWER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
CAVITIES	<p>CAVITY DECAYED</p>	
MISSING TEETH	<p>TOOTH MISSING</p>	
CROWNED TEETH	<p>PORCELAIN CROWN GOLD CROWN</p>	
BRIDGE WORK	<p>GOLD BRIDGE</p>	

FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY

**Disinterred from USAF Cemetery, Sasebo #1, Kyushu, Japan.
CO-OR 1112-1284. Plot 1, Row 2, Grave 15.**

Remains located at Nagasaki-Ken Kitamatsuura-Gun Yukimuka Soto Cemetery.

REMARKS: Soc. Sec. No. of **HART, Irving W. Jr. 519-12-3567**
 Sec. Sec. No. body on left, **JOHNSON, Edwin W. 526-18-5823**
 Sec. Sec. No. body on right, **McIVERS, Ralph 540-16-2201**

REMARKS:

Embossing plate and substitute tag on Cross and substitute tag buried with remains. These were made by GRO.

RESTRICTED

10A

10A

Corrected Report

RESTRICTED

CH #350

WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)REPORT OF INTERMENT
(AR 30-1810 and AR 30-1815)

DATE OF REPORT

29 April 1948

Imprint Identification Tag if Possible. DO NOT TYPE		Section 1.—IDENTIFICATION.		SERIAL NO.	
		NAME (Last, first, middle initial)		HART, Irving W. Jr.	
		GRADE	ORGANIZATION	BRANCH OF SERVICE	
			American Civilian		
		RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	
White					
PLACE OF DEATH	CAUSE OF DEATH			DATE OF DEATH	
Fukuoka POW Camp #2	Unk			18 March 1945	
EMERGENCY ADDRESSEE (Name, relationship, and address)					
Mrs. Irving W. Hart Sr., (Mother) 1817 Vermont St., Boise, Idaho.					
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none)		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)			
None		Identified by original R.O.I.			
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)					
Yes					
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME					
File NAT 4/14/48 Estab Daniel R-11 B-2					
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.					
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY					
USAF Mausoleum Yokohama #2, Honshu, Japan					
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO. GRAVE NO.
16 Feb 1948		Casket			70 Niche 280B
WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE			PLOT NO.	ROW NO GRAVE NO.
Yes	USAF Cemetery Yokohama #1, Honshu, Japan			USAF	22 1070
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY		
Non-denominational	Chaplains: J.S. Elliott T.F. Reilly		Report of Interment stored with remains.		
IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)				
Yes	Yes				
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)		RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.
NIKLAUS, John F.				American Civilian	Niche 280A
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)		RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.
WILLIAMS, Donald M.				American Civilian	Niche 280C
SIGNATURE OF PERSON PREPARING REPORT			SIGNATURE OF GRS OFFICER VERIFYING REPORT		
UNA L. PARKER, T/Sgt, W.A.C.			ROBERT G. LAY, CAPT., QMC		
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.					

RESTRICTED

RESTRICTED

Section 3. UNIDENTIFIED REMAINS.

INSTRUCTIONS:

(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks.

(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS

WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND

OTHER IDENTIFICATION CLUES

FILLINGS	<p>SILVER FILLING GOLD FILLING</p>	<p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
CAVITIES	<p>CAVITY DECAYED</p>	
MISSING TEETH	<p>TOOTH MISSING</p>	
CROWNED TEETH	<p>PORCELAIN CROWN GOLD CROWN</p>	
BRIDGE WORK	<p>GOLD BRIDGE</p>	

FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY

Report of Interment of Unidentified Remains

IDENTIFICATION TAG ATTACHED TO BODY BURIED WITH MARKER YES NO

IDENTIFICATION TAG NOT USED YES NO

IDENTIFICATION TAG NOT USED YES NO

IDENTIFICATION TAG NOT USED YES NO

IDENTIFICATION TAG NOT USED YES NO

REMARKS

SIGNATURE OF PERSON FURNISHING REPORT

DATE

RESTRICTED

F.M.F. PAC Form 9
Graves Registration

REPORT OF INTERMENT

HART, Irving W., Jr. Social Security No. 519-12-3567 Died: 3-18-45
(Last Name) (First) (Initial) (Serial Number) (Rank) (Organization)
Civilian Employee

Fukouka POW Camp #2 U.S. Armed Forces #1, Sasebo, Kyushu, Japan.
(Place of death) (Name of Cemetery) (Name or coordinates of location)

15 2 1
(Grave Number) (Row Number) (Plot Number) (Religion, if known)

Disposition of identification tags: One Buried with body Yes No
Remains located at Nagasaki-Ken, Kitamatsuura Gun Yukimuka Soto Cemetery. One Attached to marker Yes No

(If no identification tags, what means of identification are buried with body?)
Form "N" in canteen buried with body. Identified by name on headboard.
(If no identification tags, but identity definitely established, give particulars)

BODY BURIED ON RIGHT MC EVERS 14
(Name) (Ser. No.) (Rank) (Org) (Grave No.)

BODY BURIED ON LEFT JOHNSON 16
(Name) (Ser. No.) (Rank) (Org) (Grave No.)

INSTRUCTIONS: Fill in all possible information, forward two (2) copies to CG, FMF, PAC as soon as practicable. Take prints of one finger (Preferably right index) of identified dead and all ten fingers of unidentified, if possible.

BASE DEPOT REPRODUCTION

4/22/46
gk

22 DEC 1947 .IST

DUPLICATE

APPLICATION FOR HEADSTONE OR MARKER

(Please make out and return in duplicate)

CHECK TYPE REQUIRED (See Instructions attached)		ENLISTMENT DATE Feb 5 1942		SERIAL No. 34 138 802		EMBLEM (Check one) <input checked="" type="checkbox"/> CHRISTIAN <input type="checkbox"/> HEBREW <input type="checkbox"/> NONE	
<input type="checkbox"/> UPRIGHT MARBLE HEADSTONE <input checked="" type="checkbox"/> FLAT MARBLE MARKER <input type="checkbox"/> FLAT GRANITE MARKER <input type="checkbox"/> BRONZE MARKER (NOTE RESTRICTIONS)		DISCHARGE DATE		PENSION No.		COMPANY A	
NAME (Last, First, Middle Initial) 293 HART, ISAH A JR				STATE MISS		RANK PVT	
DATE OF BIRTH (Month, Day, Year) JUNE 27 1916				DATE OF DEATH (Month, Day, Year) December 21 1944			
NAME OF CEMETERY UNION CHURCH CEMETERY				LOCATION (City and State) MOUNT OLIVE MISS			
SHIP TO (I CERTIFY THE APPLICANT FOR THIS STONE HAS MADE ARRANGEMENTS WITH ME TO TRANSPORT THE STONE FROM THE FREIGHT STATION TO THE CEMETERY) Mrs Judie Hart (SIGNATURE OF CONSIGNEE)				U. S. REGIMENT, STATE ORGANIZATION, AND DIVISION 87th ARMD RCN Bn			
NEAREST FREIGHT STATION (City and State) MOUNT OLIVE MISS				POST OFFICE ADDRESS OF CONSIGNEE			
DO NOT WRITE HERE				I certify this application is submitted for a stone for the unmarked grave of a veteran. I hereby agree to assume all responsibility for the removal of the stone promptly upon arrival at destination, and properly place it at the decedent's grave at my expense.			
FOR VERIFICATION DEC 22 1947				APPLICANT'S SIGNATURE Mrs Judie Hart		DATE OF APPLICATION DECEMBER 8 1947	
ORDERED				ADDRESS (Street, City, State) R.R. 1 Mount Olive Miss			
B/L				JAN 14 1948			
SHIPPED				11422-3 GFC			

FLAT MARBLE
 FOR ORD. 13 JAN 1948

OQMG FORM
 REV 15 APR 47 623

IMPORTANT—Complete Reverse Side

I HEREBY CERTIFY that the type headstone or marker requested by the applicant will be permitted at the grave.

(Be sure you have noted what type is indicated by applicant on form)

(Signature of superintendent, sexton, or caretaker)

Date _____

16-11453-4

Return to: OFFICE OF THE QUARTERMASTER GENERAL,
MEMORIAL DIVISION
WASHINGTON 25, D. C.

OFF MEMORIAL BRANCH
1947 DEC 19 PM 4 00

293
CORRESPONDENCE ACTION SLIP

NAME		SERIAL NUMBER	INITIALS	DATE
Hart, Isak A Jr		34138802	thor	1/6/48
NAME OF DECEDENT	ADDRESS	IDENTIFYING DATA	LETTER TO: April.	
BRONZE	NO UPRIGHT GRANITE	CONSIGNEE	No A.D. permitted	
DISHONORABLE-DRAFT	NOT PERMANENTLY INTERRED	NOT RECOVERED	on flat stones	
CEMETERY REGULATIONS	AGO	MARINE	R70	
NAVY	COAST GUARD	VETERANS ADMINISTRATION		
STATE PENSION	AUTHORIZED INSCRIPTION	ADDITIONAL INSPECTION		
APPLICATION FOR PROOF	NO AGENT	NO STATION	JAN 7 - 1948	
DUE TO DISTANCE	UNCLAIMED	BROKEN		
DAMAGED	CERTIFICATE IN LIEU	LOST	JAN 14 1948	
FOREIGN	TRUCK	RESHIPMENT		

Will you Please Put this
vise on the tome as
it was his former scribe

vise for Tome

Hear my Prayers O Lord and
let my cry come unto
the

JAN 14 1948

ROBERT F. BURNS
SHIPMENT # NY-003-R

DISINTERMENT DIRECTIVE

633

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

1240 06327

10 07 47

DAY MONTH YEAR

NAME

SERIAL NUMBER

RANK

ARM

DATE OF DEATH

HART ISAH A JR

34138802

PVT

1

DAY MONTH YEAR

CEMETERY

HENRI CHAPELLE EUPEN

SIGNATURE OF RECEIVER

1

DISPOSITION OF REMAINS

4500 06

CODE DIST. PT.

PLOT

ROW

GRAVE

COUNTRY

NAME OF COMRADE

CAUSE OF DEATH

MMM 8 158 BELGIUM

1

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

MIMS MITCHELL FUNERAL HOME
MAGEE, MISSISSIPPI

NAME AND ADDRESS OF NEXT OF KIN

MR. ISAH A. HART, SR.
ROUTE #1
MT. OLIVE, MISSISSIPPI

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISINTERRED

HART ISAH A JR

34138802

Pvt.

22 Jan 45

18 Sept 47

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY
Max W. Stine 1/Lt. Inf.
562 QM. Sv. Co. NAME AND TITLE

REMAINS
 MARKER

HQ & SV TRP, 87TH CAV RCN
SQ M, 7TH ARMD DIV

P

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

Uniform and mattress cover

CONDITION OF REMAINS

L/ulna, femur fractured.
Skull crushed.

OTHER MEANS OF IDENTIFICATION

NONE

MINOR DISCREPANCIES

NONE

REMAINS PREPARED AND PLACED IN CASKET

DATE 22 Sept. 47

BY

Esmond C Lyons Emb. Supv.

CASKET SEALED BY

Esmond C Lyons Emb. Supv.

EMBALMER (Signature)

Esmond C Lyons Emb. Supv.
537 QM. Sv. Co.

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY

DATE 22/9/47 BY Chas. E Hackler Clk. Rec.

Esmond 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 I Benshoff
David I Benshoff Capt. Inf.

SIGNATURE OF GRS INSPECTOR

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

RECORD OF CUSTODIAN TRANSFER

File
Mat
M. Stine
13 Jan 48

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM U.S. M.C. Henri Chapelle, Belgium	TO Liege Belgium (Barge Loading Point)
KIND OF CONVEYANCE Truck	NAME OF CONVOYER Sgt Lupe J Valenzuela RA 39570049
SIGNATURE OF SHIPPER <i>Merle Kay</i> Capt Merle Kay O-290506	DATE 3/10/47
SIGNATURE OF RECEIVER <i>James Mitchell</i>	DATE 3/10/47

2. SHIPPED

FROM Liege Belgium (Barge Loading Point)	TO Antwerp Port, Pier # 140
KIND OF CONVEYANCE Barge Matador	NAME OF CONVOYER M/Sgt Edward J Malloy RA 6129790
SIGNATURE OF SHIPPER Lt James P Mitchell O-1298270	DATE 3/10/47
SIGNATURE OF RECEIVER <i>James Butler</i>	DATE 4 OCT 1947

3. SHIPPED

FROM AGRC ANTWERP BELGIUM	TO USAT ROBERT F. BURNS
KIND OF CONVEYANCE ZEC	NAME OF CONVOYER EROY N. NATHAN, 1st LT. T.C.
SIGNATURE OF SHIPPER L E Butler Lt Col inf	DATE 6 NOV 1947
SIGNATURE OF RECEIVER <i>W. R. Nathan</i>	DATE 6 NOV 1947

4. SHIPPED

FROM USAT "ROBERT F. BURNS"	TO W. R. Nathan
KIND OF CONVEYANCE ZEC	NAME OF CONVOYER EROY N. NATHAN, 1st LT. T.C.
SIGNATURE OF SHIPPER EROY N. NATHAN, 1st LT. T.C.	DATE 24 NOV 1947
SIGNATURE OF RECEIVER <i>W. R. Nathan</i>	DATE 24 NOV 1947

5. SHIPPED

FROM W. R. Nathan	TO DCDC Memphis, Tenn.
KIND OF CONVEYANCE Truck	NAME OF CONVOYER Daniel J. Keith
SIGNATURE OF SHIPPER <i>W. R. Nathan</i>	DATE 11-30-47
SIGNATURE OF RECEIVER <i>W. R. Nathan</i>	DATE 12/1/47

6. SHIPPED

FROM WWW 8 128 BELGIUM	TO 1
KIND OF CONVEYANCE CHABETTE	NAME OF CONVOYER
SIGNATURE OF SHIPPER CHABETTE	DATE
SIGNATURE OF RECEIVER	DATE

7. SHIPPED

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

Wax

RECEIPT OF REMAINS

DISTRIBUTION CENTER
MEMPHIS GENERAL DEPOT, MEMPHIS, TENNESSEE

ROUTINE 1 DECEMBER 1947

REMAINS CONSIGNED TO:
MIMS MITCHELL FUNERAL HOME
MAGEE, MISSISSIPPI

REMAINS OF THE LATE PRIVATE ISAH A HART JR ASN 34138802 BEING SHIPPED TO YOU ACCOMPANIED BY ESCORT TECHNICIAN FOURTH GRADE JOE A DUNAJ ON TRAIN NUMBER TWENTY FIVE ILLINOIS CENTRAL RAILROAD LEAVING MEMPHIS TEN FIFTEEN PM FOURTH DECEMBER AND DUE TO ARRIVE MAGEE STATION ON TRAIN NUMBER ONE HUNDRED FIVE AT EIGHT FIFTY SIX AM RAILROAD TIME FIFTH DECEMBER. REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS AT STATION UPON ARRIVAL. YOU ARE DIRECTED TO NOTIFY NEXT OF KIN THE CONTENTS OF THIS MESSAGE.

Charles M. Odenwalder
CHARLES M ODENWALDER
CAPTAIN, QMC

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

THIS 5th DAY OF December, 19 47

Mims Mitchell Funeral Home

Joe A. Dunaj Tec. 4
WITNESS (Escort)

By: David Johnson
CONSIGNEE
Kumbalmer

DP 21 86 GOVT PAID WUX MEMPHIS TENN DEC 2
MIMS MITCHELL FUNERAL HOME
MAGEE MISS
REMAINS OF THE LATE PRIVATE ISAH A HART JR ASN 34138802 BEING SHIPPED
TO YOU ACCOMPANIED BY ESCORT TECHNICIAN FOURTH GRADE JOE A DUNAJ
ON TRAIN NUMBER TWENTY FIVE ILLINOIS CENTRAL RAILROAD LEAVING MEMPHIS
TEN FIFTEEN PM FOURTH DECEMBER AND DUE TO ARRIVE MAGEE STATION ON
TRAIN NUMBER ONE HUNDRED FIVE AT EIGHT FIFTY SIX AM RAILROAD TIME
FIFTH DECEMBER REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS AT
STATION UPON ARRIVAL YOU ARE DIRECTED TO NOTIFY NEXT OF KIN THE
CONTENTS OF THIS MESSAGE QMDMK 433

CHARLES M ODENWALDER

CAPTAIN QMC.

ALL

*NY 003-R. a-2
Conf*

R SVC 32 P LD THANK U

WU L 116 2 COLLECT

MAGEE MISS 21 310P

MEMPHIS GEN DEPOT

AMERICAN GRAVES LEG

ARRANGEMENTS MADE FOR WIMS MITCHELL FUNERAL DIRECTOR

MAGEE MISSISSIPPI ~~ACCEPT~~ ACCEPT AND MEET REMAINS OF PVT

ISAAC A HART JR WHEN YOU NOTIFY THEM ARRIVAL

ISAAC A HART SR.

ISAH

Declassified in accordance with D.O. 13526



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

FROM: (Originator) MEMPHIS GENERAL DEPOT MEMPHIS, TENN		SECURITY CLASSIFICATION UNCLASSIFIED	
ACTION TO:		PRECEDENCE FOR	
<ul style="list-style-type: none"> MR ISAH A HART SR ROUTE # 1 MT OLIVE MISSISSIPPI 		ACTION INFORMATION	
INFORMATION TO:		<input type="checkbox"/> ORIGINAL MESSAGE <input checked="" type="checkbox"/> REFERS TO ANOTHER MESSAGE IDENTIFICATION CLASSIFICATION	

WAR DEPARTMENT WILL DELIVER REMAINS OF LATE **PVT ISAH A HART JR**
 IN NEAR FUTURE. RECORDS OF THIS
 OFFICE INDICATE YOU WISH REMAINS DELIVERED TO **MRS MITCHELL FUNERAL HOME**
MAGEE MISSISSIPPI. PLEASE INSTRUCT FUNERAL DIRECTOR TO MAKE ARRANGEMENTS
 TO ACCEPT REMAINS AT RAIIROAD STATION UPON ARRIVAL. PRIOR TO SHIPMENT
 FUNERAL DIRECTOR WILL BE NOTIFIED OF RAIL ROUTING AND SCHEDULED TIME
 REMAINS WILL ARRIVE AT RAIIROAD STATION. REQUEST IMMEDIATE CONFIRMATION
 OF ABOVE SHIPPING INSTRUCTIONS BY TELEGRAM COLLECT TO MEMPHIS GENERAL
 DEPOT ATTENTION AMERICAN GRAVES REGISTRATION DIVISION MEMPHIS TENNESSEE.
 IF YOU DESIRE MILITARY HONORS AT FUNERAL YOU SHOULD ASK LOCAL PATRIOTIC
 OR VETERANS ORGANIZATION OF YOUR CHOICE TO MAKE ARRANGEMENTS. NECESSARY
 YOU INCLUDE NAME OF DECEASED IN REPLY TELEGRAM. **CONSIGNEE FUNERAL DIRECTOR**
WILL BE NOTIFIED BY THIS DISTRIBUTION CENTER THREE DAYS PRIOR TO SHIPMENT OF
REMAINS SO THAT FUNERAL ARRANGEMENTS MAY BE MADE.

CHARLES M. ODENWALDER
 CAPTAIN, QMC

/c/

SECURITY CLASSIFICATION UNCLASSIFIED		AUTHORIZATION	
ORIGINATING AGENCY ODENWALDER		SIGNATURE DAN L. MILLER	
SYMBOL QDMK	DATE-TIME GROUP NOV 21 47	OFFICIAL TITLE Major, QMC	PAGE 1 OF 1

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

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

D. O. Vou. No. 3949
 Bu. Vou. No. 473

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

U. S. Department of the Army, Memphis General Depot
 (Department, bureau, or establishment)
 Voucher prepared at Memphis 2, Tenn. 15 Dec 47
 (Give place and date)
THE UNITED STATES, Dr.,
 To Ludie Hart
 (Payee)
 Address RFD 1, Mount Olive, Miss.
 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)					
	12/8/47	Interment expense for the late Isah A. Hart, Jr. PVT, 34 138 802, USA as per certificate attached				75.00	
						Total	75.00

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total _____
 (Payee must NOT use this space)
 Differences _____
 Account verified; correct for _____
 (Signature or initials) _____

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

75.00

MEMORANDUM

H. A. PFANSCHNIDT
 Fiscal Officer

ACCOUNTING CLASSIFICATION (for completion by Administrative Office)

Appropriation, limitation, or project symbol	Appropriation title	Limit'n or Proj't Amount	Appropriation Amount
21X1805	807-47-P490-07-S-99-999		75.00

Allotment symbol	Amount	Obligations liquidated	COST ACCOUNT		OBJECTIVE CLASSIFICATION	
			Symbol	Amount	Symbol	Amount
				75.00		

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

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

Per _____
 Title _____

METHOD OF OR ABSENCE OF ADVERTISING

(Section 3709 of the Revised Statutes)

1. After advertising in newspapers.

2. (a) After advertising by circular letters sent to _____ dealers.

(b) And by notices posted in public places.

(If notices were not posted in addition to advertising by circular letters sent to dealers, explanation of such omission must be made. The notation on the certificate on the face of the voucher must be "2(a)(b)" or "2(a)", depending on whether or not notices were posted.)

3. Without advertising under an exigency of the service which existed prior to the order and would not admit of the delay incident to advertising.

4. Without advertising in accordance with _____

5. Without advertising, it being impracticable to secure competition because of _____

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

NOTE.—The above form "Method of or Absence of Advertising" is to be used when purchases are made or services secured under proper authority without written agreement in any form. In case of a written agreement (formal contract, proposal, and acceptance, or less formal agreement) Standard Form No. 1036—Revised should be used for abstracting the method of or absence of advertising and award of contract. (See General Regulations No. 51, Supplement No. 6, General Accounting Office, Aug. 20, 1930.)

16-22900-1

Table with columns for Description of Goods or Services, Quantity, Unit Price, and Amount. Includes a section for 'Description of Goods or Services' and 'Quantity'.

Administrative section containing fields for Budget Account No., Address, Date, and Office Name. Includes the text 'OFFICE OF GENERAL ACCOUNTING' and 'PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL'.

QMGMH 293
Hart, Isah A., Jr.
SN 341 38 802

12 January 1948

Mrs. Ludie Hart
Route Number One
Mt. Olive, Mississippi

Dear Mrs. Hart:

Reference is made to your communication of recent date, wherein it is requested a verse be added to the inscription to be cut on a Government flat marble marker for the grave of the late Isah A. Hart, Jr.

It is regretted to advise it will not be possible to comply with the above request, as a verse does not form a part of the authorized inscription to appear on a Government headstone or marker and there is not sufficient space on a flat marker for any additional inscription, even at private expense.

In view of the above, your application has been placed in line for ordering, in turn.

Sincerely yours,

G. L. RUTH
Memorial Division

JAN 12 5 10 PM '48
MAIL & RECORDS DIVISION
O. D. M. G.

3949

CLAIM VALID
REPATRIATIONCERTIFICATE
(AR 30-1830)ACCTS. OF
G. L. BOYLE
Col., F.D.
Memphis, Tenn.
210-237
STA. 586
DEC 1947

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

PART A - CIVILIAN OR PRIVATE CEMETERY

A

REQUEST FOR REIMBURSEMENT OF INTERMENT EXPENSES

(PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)

NAME OF DECEDENT	GRADE	SERIAL NUMBER	COMPONENT
HART, ISAIAH A JR	PVT	34 138 802	USA

I certify that the sum of \$ 115.20 was paid by me from personal funds in connection with the interment of the remains of the above named decedent in the below named cemetery.

INSERT NAME OF CEMETERY	CITY OR COUNTY	STATE
UNION CHURCH CEMETERY	MOUNT OLIVE COVINGTON COUNTY	MISS

INSTRUCTIONS TO PERSON SIGNING THIS FORM

1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR.
2. Return four copies to: (Original & 3 copies)
Memphis General Depot
AGR Division
Memphis 2, Tennessee
3. Type or print name underneath your signature in space marked "Signature of Claimant".

SIGNATURE OF CLAIMANT	ADDRESS OF CLAIMANT (City, Street or RFD, and State)	RELATIONSHIP TO DECEDENT	DATE
<i>Judith Hart</i>	MOUNT OLIVE RFD 1 MISS	MOTHER	12-8-47

PART B - NATIONAL OR POST CEMETERY

B

REQUEST FOR REIMBURSEMENT OF TRANSPORTATION EXPENSES

(PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)

NAME OF DECEDENT	GRADE	SERIAL NUMBER	COMPONENT

I certify that the sum of \$ _____ was paid by me from personal funds in connection with the transportation of the remains of the above named decedent from and to the following places:

INSERT CITY OR TOWN (OR ADDRESS NOT IN A CITY OR TOWN) FROM WHICH REMAINS WERE SHIPPED	INSERT NAME AND LOCATION OF NATIONAL OR POST CEMETERY TO WHICH REMAINS WERE SHIPPED

INSTRUCTIONS TO PERSON SIGNING THIS FORM

1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR.
2. Return four copies to: (Original & 3 copies)
Memphis General Depot, AGR Division
Memphis 2, Tennessee
3. Type or print name underneath your signature in space marked "Signature of Claimant".

SIGNATURE OF CLAIMANT	ADDRESS OF CLAIMANT (City, Street or RFD, and State)	RELATIONSHIP TO DECEDENT	DATE
			DEC 17 1947

QMC FORM 1236
23 OCT 47REPLACES WD AGO FORM R-5507, QMC FORM R-5046
AND QMC FORM R-5066, WHICH ARE OBSOLETE.

473

EXPLANATION OF PART A - CIVILIAN OR PRIVATE CEMETERY

1. When the remains are delivered for interment in a civilian or private cemetery, you are responsible for paying all interment expenses. In this connection, you are entitled to the allowance mentioned in paragraph 2 below.

2. An amount not to exceed \$75 is allowed by the government toward actual interment expenses when final interment of the remains is in a private or civilian cemetery. No allowance is authorized toward interment expenses when interment is in a national or post cemetery.

3. The \$75 maximum allowance by the government toward interment expenses includes but is not limited to the payment of one or more of the following items: hearse hire from the railroad station to your home, the funeral home, church, cemetery, or any other place designated by you; vault; church services; newspaper notices; transportation for friends and relatives to and from cemetery; and the services of a funeral director.

4. Reimbursement by the government is made only to the person who paid from his personal funds the expenses of or incident to interment in a private or civilian cemetery. Receipted bills are not required to accompany this form. Any expenses over and above the \$75 maximum must be borne by the person who incurred or paid the additional expenses.

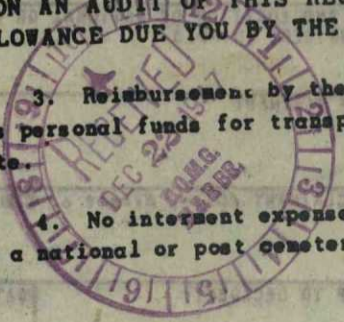
EXPLANATION OF PART B - NATIONAL OR POST CEMETERY

1. When the remains are delivered to you at government expense prior to burial in a national or post cemetery, you are responsible for all additional expenses necessary to deliver the remains from that point to the national or post cemetery grave site. However, you may be entitled to an allowance for the cost of transporting the remains from your home to the national or post cemetery grave site subject to the conditions outlined in paragraph 2. below.

2. Reimbursement of transportation expenses is allowed only when the cost to the government to deliver the remains to you is LESS than what it would have cost the government to deliver the remains direct to the national or post cemetery of final interment. However, the amount which you may be allowed (the difference between cost of delivery to you and cost of delivery by the government direct to the national or post cemetery) may not exceed the amount actually expended by you to deliver the remains to the cemetery grave site. **WHETHER OR NOT YOU WILL BE GRANTED AN ALLOWANCE IS DEPENDENT UPON AN AUDIT OF THIS REQUEST. IN ANY EVENT YOU WILL BE NOTIFIED OF ANY ALLOWANCE DUE YOU BY THE OFFICE TO WHICH THIS FORM IS SENT.**

3. Reimbursement by the government will be made only to the person who paid from his personal funds for transporting the remains to the national or post cemetery grave site.

4. No interment expense allowance is authorized since interment is made ultimately in a national or post cemetery.



REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

Pvt. Isah A. Hart, Jr., 34 138 802
 Plot MM, Row 8, Grave 158,
 United States Military Cemetery
 Henri-Chapelle, Belgium

14 March 1947

A	C
B	D

DO NOT WRITE ABOVE THIS LINE

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

If you are the next of kin or authorized representative of next of kin and desire to direct the disposition of the remains, please fill in PART I of this form.

PART I

I, Isah A. Hart, Jr. (Please indicate relationship to the deceased by placing an "X" in the proper box.)
 (PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

- WIDOW
- WIDOWER
- SON OVER 21 YEARS OLD
- DAUGHTER OVER 21 YEARS OLD
- FATHER
- MOTHER
- BROTHER OVER 21 YEARS OLD
- SISTER OVER 21 YEARS OLD
- RELATIONSHIP OTHER THAN ABOVE (Specify) _____

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

- 1. BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS.
- 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY
Union Cemetery, Mount Olive Miss R 70
 (NAME AND LOCATION OF CEMETERY)
- 3. BE RETURNED TO _____ (FOREIGN COUNTRY), THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT _____ (LOCATION OF CEMETERY SELECTED)
- 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT _____ (LOCATION OF NATIONAL CEMETERY SELECTED)
 (Please indicate if your own religious services at a location other than the selected national cemetery are desired by placing an "X" in the proper box)
 YES NO

THE NAME OF THE DECEASED, THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (If no corrections are necessary, indicate this fact by inserting the word "NONE" in the space below.)

None

14 JUL 1947
1510
Coded 7 July 47 Toatley

gd

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			
<i>Mims Mitchell Funeral Home</i>			
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
<i>06</i>	<i>Magee</i>	<i>Simpson</i>	<i>Miss-</i>
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS	TELEPHONE No.	
<i>Magee Miss-</i>	<i>Magee, Miss</i>	<i>100</i>	

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
<i>Hart</i>	<i>Ludie</i>	<i>-</i>	<i>Mother</i>
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
<i>Rt # 1</i>	<i>Mount Olive</i>	<i>Covington</i>	<i>Miss</i>

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.

Isiah A. Hart sr. ^{See} _X _{mark} _____ (SIGNATURE OF NEXT OF KIN) _____ (STREET AND NUMBER)

(NAME PRINTED OR TYPED) _____ (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 21 day of March, 1947, at city (or town) of Collins, county of Covington, and State (or Territory or District) of _____

C. Deas _____ (SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)
Chauncy Clerk _____ (OFFICIAL TITLE)

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

PART II—RELINQUISHMENT OF DISPOSITION AUTHORITY

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

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

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

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

_____	_____
<small>(SIGNATURE OF NEXT OF KIN)</small>	<small>(DATE)</small>
_____	_____
<small>(NAME PRINTED OR TYPED)</small>	<small>(STREET AND NUMBER)</small>
_____	_____
<small>(NAME PRINTED OR TYPED)</small>	<small>(CITY AND STATE)</small>

PART III

If you are NOT the next of kin authorized to direct the disposition of remains, please fill in PART III of this form.

THIS IS TO NOTIFY YOU THAT I AM NOT THE NEXT OF KIN AUTHORIZED TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED NAMED ON PAGE 1 OF THIS FORM. THE FOLLOWING PERSON, TO THE BEST OF MY KNOWLEDGE, IS THE NEXT OF KIN TO WHOM THIS FORM SHOULD BE DIRECTED.

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

_____	_____
<small>(SIGNATURE)</small>	<small>(DATE)</small>
_____	_____
<small>(NAME PRINTED OR TYPED)</small>	<small>(STREET AND NUMBER)</small>
_____	_____
<small>(NAME PRINTED OR TYPED)</small>	<small>(CITY AND STATE)</small>

ADDITIONAL REMARKS AND INSTRUCTIONS

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

Ship the Remains of Pvt. Asah A. Hart Jr 34138802 to Magee, Miss and notify Miss Mitchell Funeral Home of arrival.

If it can be arranged it is the request that the Casket will be opened. This is the request of the Father and Mother.



8m's
Pvt. Isah A. Hart, Jr., 34 138 802
Plot 221, Row 8, Grave 158, *gn*
United States Military Cemetery
Henri-Chapelle, Belgium

14 March 1947

Mr. Isah A. Hart, Sr.
Route 1
Mount Olive, Mississippi

Dear Mr. Hart:

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

3
Incis.
MAR 25 1947
MAIL & RECORDS BRANCH

lhc

Mad

QMGMRE293

Hart, Isah A., Jr.
SN 34 138 802

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

29 January 1947

Mrs. Lucile Hart
Mount Olive, Mississippi

Dear Mrs. Hart:

Your letter concerning your son, the late Private Isah A. Hart, Jr., has been received in this office.

The War Department has now been authorized to remove, at Government expense, to the final resting place designated by the next of kin, the remains of those American citizens who died while serving overseas with our armed forces during this war.

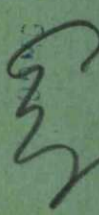
When the necessary preliminaries have been completed, a "Letter of Inquiry -- Return of World War II Dead" will be sent to the next of kin of those American dead. The response to this letter will constitute a formal expression of the next of kin's detailed desires. Since letters to next of kin will be dispatched automatically and according to the records here, communications with this office regarding this subject will not be necessary. The necessity for complete coordination of movement in many parts of the world makes it impossible, at this time, to estimate when this letter will be mailed. Responses to them will be acted upon with a minimum of delay. Please be assured that your feelings in this matter are fully appreciated.

Sincerely yours,

JAMES L. PRENN
Major, QMC
Assistant

dhd

JAN 29 5 34 PM '47
V & R BR



JAN 29 4 12 PM '47
REGISTRATION AND RECORDS BRANCH
MEMORIAL DIVISION



B
JLP
①

MEMORANDUM
Hart, Leah A., Jr.
2N 3A 188 802

Attention: Memorial Division
THE QUARTERMASTER GENERAL
Address Reply To

22 January 1947

Mrs. Leah A. Hart
Mount Olive, Mississippi

Dear Mrs. Hart:

Your letter concerning your son, the late Private Leah A. Hart, Jr., has been received in this office.

The War Department has now been authorized to remove, at Government expense, to the final resting place designated by the next of kin, the remains of those American citizens who died while serving overseas with our armed forces during this war.

When the necessary preliminaries have been completed, a "Letter of Inquiry -- Return of World War II Dead" will be sent to the next of kin of those American dead. The response to this letter will constitute a formal expression of the next of kin's detailed desires. Since letters to next of kin will be dispatched automatically and according to the records here, communications with this office regarding this subject will not be necessary. The necessity for complete coordination of movement in many parts of the world makes it impossible, at this time, to estimate when this letter will be mailed. Responses to them will be acted upon with a minimum of delay. Please be assured that your feelings in this matter are fully appreciated.

Sincerely yours,

JAMES L. PERRY
Major, GPO
Assistant

MEMORIAL DIVISION
JAN 30 4 15 PM '47
RECORDS BRANCH AND
REGISTRATION UNIT

OUT
CORRESPONDENCE
JAN 29 1947
R 48

Mr. Perry
R 48
R 48
R 48

218

Jan 13 1947

Mr G. A. Harkon
Brigadier General
assistant

Dear Sir just received
 your most welcome
 letter sure was glad of
 the picture of the graves
 of the United States
 cemetery of Belgium
 in which my dear son
 is lying rest
 and to answer to my prayer
 please send his body
 home to me please rite
 and let me know if it
 can be sent at Wance
 o this cemetery seems to
 be a more nice place
 But you or a mother
 wants here Boy sent

213

Back to the homeland
afe they are
so please give me a
cancel at Wancy
this is the another
afe Hart gisah A gr
and any wishes have
all was Ben fare him
to Bee sent Back to us

Sincerely yours

Judis Hart
out alive

miss



RECORDED
JAN 16 1947
MAIL ROOM

Blank lined paper with horizontal ruling lines.

RECEIVED
JAN 16 1947
1111

EMERGENCY
CONFERENCE
7:48 PM
LIT

RECORDS BRANCH
JAN 16 2 18 PM '47
MEMORIAL DIVISION

777
293 QMGM 293

Hart, Isah A., Jr.

A.S.N. 34 138 802

8 January 1947

Mr. Isah A. Hart, Sr.
Route 1
Mount Olive, Mississippi

Dear Mr. Hart:

Inclosed herewith is a picture of the United States Military Cemetery Henri-Chapelle, Belgium, in which your son, the late Private Isah A. Hart, Jr., 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. HORKAY
Brigadier General, QMG
Assistant

1 Incl
Photograph

lln

JAN 9 10 20 AM '47
O.C.M.C.
MAIL & RECORDS BRANCH

pg

HEADQUARTERS, ARMY SERVICE FORCES

MEMO ROUTING SLIP

TO THE FOLLOWING IN ORDER INDICATED:

	NAME OR TITLE	ORGANIZATION	BUILDING AND ROOM	INITIALS
1	EFFECTS QUARTERMASTER	ARMY EFFECTS BUREAU		DATE
2		KANSAS CITY 1, MISSOURI		
		<i>113 Hart, Leah A, Jr.</i>		
3			<i>34, 138, 802</i>	

For necessary action.

PIERCE

Orig. fwd to K. G. by this office, CTB**2 Incl.**

copy ltr dtd 16 April 45
cc ltr of e/d

FROM:	NAME	ORGANIZATION	BUILDING AND ROOM	DATE
				<i>24 July 45</i>
				TELEPHONE
				<i>no</i>

MEMORIAL DIVISION, PLANNING & REGISTRATION
 BRANCH, TEMPO "C" WASHINGTON 25, D. C.

W. D., A. G. O. Form 0115
1 October 1944This Form supersedes W. D., A. G. O. Form 0115, 23 March 1944,
which may be used until existing stocks are exhausted.

25-37607-6250

SPQYG 293
Hart, Isah A. Jr.
S.N. 34,138,802

24 July 1945

Mrs. Ludie Hart
Route 1
Mt. Olive, Mississippi

Dear Mrs. Hart:

Reference is made to your letter in which you request information concerning your son, the late Private Isah A. Hart Jr.

It is contemplated returning the remains of our military personnel after the war ends in all theaters of operation. At the proper time this office will contact the legal next of kin regarding their wishes as to the final disposition of the remains. The expense incident to the preparation and shipment of the remains to the place designated by the legal next of kin will be borne by the Government.

In view of the fact that the Army Effects Bureau, Kansas City Quartermaster Depot, Kansas City 1, Missouri, has been designated to receive and ship the personal effects of our military personnel who die outside the United States, a copy of your letter has been forwarded to that office for a direct reply to you.

The official records of this office show that the remains of your son were interred in the Henri Chapelle Cemetery #1, Henri Chapelle, Belgium, Plot MMM, Row 8, Grave 158. With reference to other larger cities the approximate location of Henri Chapelle, Belgium is seven miles southwest of Aachen, Germany, five miles northwest of Eupen and eight miles east of Liege, both in Belgium.

This office regrets, sincerely, the delay in answering your letter and wishes to extend its deepest sympathy in the loss of your son.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

ARTHUR L. WARREN
Colonel, QMC
Assistant

JUL 26 9 17 AM '45
MEMORIAL DIVISION

CCP
CCP

nb

Mt Olive Miss
April 16, 1945.

Dear Sir,

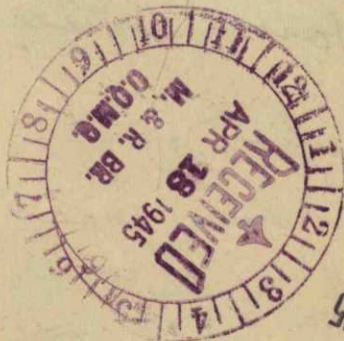
I am write you in regard of my son.
293. Charles A. Hart Jr. 34 138 802 he was killed in
action on Dec. 21, 1944.

I rate two 79. 87th Cav. Reg. Sq. Meq.
A.P.O. # 257. at postmaster New York, New York.
He rate. + told me to write you. So here I try
you.

I want to know if I could get my
son body sent back to the state + about
his bible + thing he had such as his picture
clock and watch.

I would like to hear from you
about this + if it possible I like to have
his bible + watch return home.

Yours Truly
Ludie Hart.
Mt Olive Miss
ret. 1.



GRAVES REGISTRATION SECTION
APR 18 4 58 PM '45
MEMORIAL DIVISION

APR 18 4 41 PM '45
MEMORIAL DIVISION

GRAVES REGISTRATION
FORM NO. 1
(Revised 1 Sept. 1948)

183

RESTRICTED
REPORT OF BURIAL

8 Feb. 45.

HART ISAH A. JR. PVT. 34138802

Last Name: Unknown, First: H.A., Initial: H.A., Rank: PVT., Organization: 87th Cav. RCN SQ M.

Unit: Vic. N28 & N 15, Belg., Date of Death: 22 Jan 45 Est., Cause of Death: Shrap. M.W. Head

Place of Death: 1630-hrs, 8 Feb. 45, Name of Cemetery: Henri Chapelle # 1, Name or Coordinates of Location: K 721-348

Time and Date of Burial: 158, Grave Number: 158, Row Number: 8, Plot Number: MMM, Type of Marker: Perm.

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

If No Identification Tags
How were remains identified?

Paybook

What means of identification were buried with the body?

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

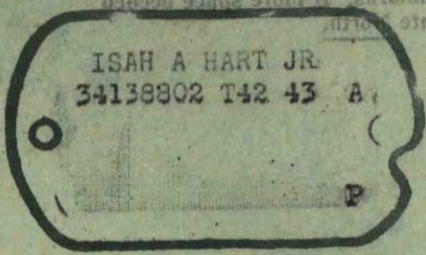
Who is buried on: Woodall, Charles G. 14154435 159

Deceased's Right: Name, Serial No., Rank, Organization, Grave No.

Deceased's Left: Johnson, Bluford B 38048515 157

Signature or Name, Rank and if possible Organization of person furnishing above Data when other than officer reporting burial.

If print of identification tag is not affixed fill in below:



Emergency Address: Name

Address

Religion

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

Table with columns for identification tag details and a vertical label 'Deceased's Left'.

Signature of Officer or other person reporting burial

Verified by G.R.S. Officer

RESTRICTED

Signature: RAKER, Lt. GMC, 5237

46

RESTRICTED

REPORT OF BURIAL
IF DECEASED UNIDENTIFIED

183

GRAVE REGISTRATION
Form No. 1
(Revised 8 Dec. 1948)

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

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

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

4
 HART
 3
 Vic. NSB & N 15
 1630-112, 8 Feb. 1950
 158
 Grave Number

2
 No Identification Tag
 How were remains identified?

1
 What means of identification were buried with the body?

1
 Who is buried on:

Deceased's Right:

Deceased's Left:

Johnson, Blanford B
 38048212

Woodell, Charles G.
 14154435

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

Psybook

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

Who is buried on:

Deceased's Right:

Deceased's Left:

Johnson, Blanford B
 38048212

Woodell, Charles G.
 14154435

Who is buried on:

Deceased's Right:

Deceased's Left:

Johnson, Blanford B
 38048212

Woodell, Charles G.
 14154435

Who is buried on:

Deceased's Right:

Deceased's Left:

Johnson, Blanford B
 38048212

TOOTH CHART

If this is an Isolated Burial, make a Sketch of the Location, oriented with Permanent Landmarks. If more space needed attach separate sheet. Indicate North.

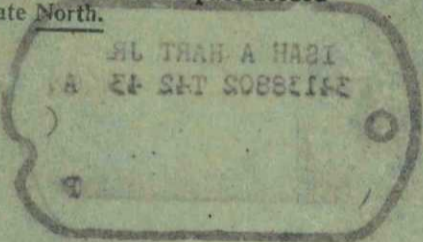
Upper	Deceased's Right								Deceased's Left							
	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Lower	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8

Indicate: missing natural teeth by X; crowns by O; fillings by □; Bridges by ○; linking anchor teeth; replacements by artificial teeth X

Characteristics:

Other Data:

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



Left Hand

Right Hand

Thumb

Thumb

Head

4

4

3

2

1

1

1

1

1

1

1

1

1

1

1

1

1

RESTRICTED

AG P BR HO 505

W22560

8 Feb. 45.

413802

Serial No.

W.M. Sharp

Case of Death

K 751-348

Name or Coordinates of Location

Perim

Type of Marker

2

1

1

150

Grave No.

157

Grave No.

157

Grave No.

157

Grave No.

157

Grave No.

157

Grave No.

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Grave No.

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Grave No.

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Grave No.

157

Grave No.

157

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

REPORT OF DEATH

DATE 5 Mar 1945
100 3697

FULL NAME Hart, Isah A. Jr.		ARMY SERIAL NUMBER 34138802	GRADE Pvt.
HOME ADDRESS Braxton, Mississippi		ARM OR SERVICE Cavalry	DATE OF BIRTH 27 June 1916
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in Action		DATE OF DEATH 21 Dec 1944
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 6 Feb 1942	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Luddie Hart (mother) Star Route, Braxton, Mississippi			
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Luddie Kirkland Hart (mother) Star Route, Braxton, Mississippi Isah A. Hart Sr. (father) Star Route, Braxton, Mississippi			
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

 BATTLE NON-BATTLE

The individual named in this report of death is held by the War Department to have been in a missing in action status from 21 Dec 1944 until such absence was terminated on 24 Feb 1945 when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

COPIES FURNISHED:

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

WD AGO FORM 52-1
1 DECEMBER 1944

THIS FORM SUPERSEDES WD AGO FORM 52-1, 29 MAY 1944, WHICH STOCKS ARE EXHAUSTED.

BY ORDER OF THE SECRETARY OF WAR:

audit

Final

File 3/12/45

J. P. Curl

ADJUTANT GENERAL

Declassified in accordance with D.O. 13526



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

376,239

5 Mar 1945

DATE FCC 3637

REPORT OF DEATH

FULL NAME Hart, Isah A. Jr.		ARMY SERIAL NUMBER 34138802		GRADE Pvt.									
HOME ADDRESS Braxton, Mississippi		ARM OR SERVICE Cavalry		DATE OF BIRTH 27 June 1916									
PLACE OF DEATH European Area		CAUSE OF DEATH Killed in Action		DATE OF DEATH 21 Dec 1944									
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 6 Feb 1942		LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS									
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Luddie Hart (mother) Star Route, Braxton, Mississippi													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Luddie Kirkland Hart (mother) Star Route, Braxton, Mississippi Isah A. Hart Sr. (father) Star Route, Braxton, Mississippi													
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

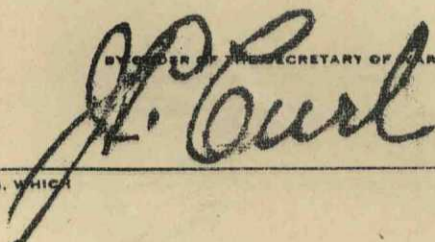
 BATTLE NON-BATTLE

The individual named in this report of death is held by the War Department to have been in a missing in action status from 21 Dec 1944 until such absence was terminated on 24 Feb 1945 when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

COPIES FURNISHED:

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

BY ORDER OF THE SECRETARY OF WAR:



ADJUTANT GENERAL

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

376239

BATTLE CASUALTY REPORT

5489

NAME		SERIAL NUMBER		GRADE	ARM OR SERVICE	REPORTING THEATRE
HART ISAH A JR		34138802		PVT	CAV	ETO
PLACE OF CASUALTY		DATE OF CASUALTY		STATUS AFTER CASUALTY	SHIPMENT NUMBER	
BELGIUM 9		DAY	MONTH	YEAR	MIA	
		21	DEC	44	005	

NAME AND ADDRESS OF EMERGENCY ADDRESSEE

THE PERSONNEL NAMED ABOVE REPRESENT THE FOLLOWING POINTS AS THE ONE TO BE NOTIFIED IN CASE OF EMERGENCY, AND THE OFFICIAL TELEGRAMS AND OTHER NOTIFICATIONS WILL BE SENT TO THIS PERSON. THE RELATIONSHIP, IF ANY, IS SHOWN BELOW. IT SHOULD BE NOTED THAT THIS PERSON IS NOT NECESSARILY THE NEXT-OF-KIN OR RELATIVE DESIGNATED TO BE PAID FOR MENTOR PAY BENEFIT IN CASE OF DEATH.

MR. MRS. MISS FIRST NAME-SIBBLE INITIAL-LAST NAME	RELATIONSHIP	DATE NOTIFIED
MRS LIDDIE HART	MOTHER	16 Jan 45 m/s
NO. AND NAME OF STREET-CITY-STATE		
STAR ROUTE BRAXTON MISSISSIPPI		

REMARKS:

CORRECTED COPY



ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED YES NO AS 201 REG.

CASUALTY BRANCH FILE ATTACHED OR CHANGED TO _____ DATE _____

PREVIOUSLY REPORTED NO YES (AS INDICATED BELOW)

FILE NO.	MESSAGE NO.	TYPE	GRADE AND AREA	S. A. NOTIFIED

FORWARDED TO: REG. COMM. TELEGRAM WOUNDED LETTER COPIES S. A. PARCEL

REPORT NOT VERIFIED NO FORM 45 NO CAS. BR. FILE CHECKED BY *White 19 Dec 44* RECORDED BY *W. J. Jones*

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

ADDT. AREA	CASUALTY STATUS	ORIGINAL CAS. RATE			MESSAGE NO.	LATEST CAS. RATE			DATE	BY	DATE	BY	DATE	BY	DATE	BY	DATE	BY								
		DAY	MO.	YR.		DAY	MO.	YR.																		
34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60

DISTRIBUTION 'A' 28 COPIES *fmc*

(ALL TYPES OF CASUALTIES PERTAINING TO MILITARY PERSONNEL EXCEPT WOUNDED) COPIES FURNISHED. SEE CASUALTY BRANCH MEMORANDUM NO. 49, 1944.

DISTRIBUTION 'B' COPIES

(ALL WOUNDED MILITARY PERSONNEL AND ALL TYPES OF CASUALTIES PERTAINING TO CIVILIANS WHO ARE W. D. EMPLOYEES, EMPLOYEES OF W. D. CONTRACTORS AND OTHERS SUBJECT TO MILITARY LAW.) COPIES FURNISHED. SEE CASUALTY BRANCH MEMORANDUM NO. 28, 1944.

376239

REB:BT:dt
August 31, 1945

Mr. Isah A. Hart, Sr.
Route #1
Mt. Olive, Mississippi

Dear Mr. Hart:

The Army Effects Bureau has received some additional property of your son, Private Isah A. Hart, Jr.

These effects, contained in one carton and 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.

As previously indicated, personal property is transmitted by this Bureau for distribution according to the laws of the state of the soldier's legal residence.

Sincerely yours,

P. L. KOOB
1st Lt., QMC
Officer-in-Charge
SJ Branch

JS

ARMY SERVICES FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mr. Isah A. Hart, Sr.

Route #1

Effects of:
Name

Pvt. Isah A. Hart, Jr.

Mt. Olive, Mississippi

ASN

54138802

Case No.

376239 D

Wt.

DATE 31 August 1945
RTB:BT:dt

Wiznetock
FOR: Effects Quartermaster

REMARKS:

 Inclose ^Dureau 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"

Franked **SEP 5 1945**
Est. Exp. Chgs.
Est. Frt. Chgs.
No. of packages 2

 Shipping Clerk
mtf

ATTACHMENTS		EFFECTS INVENTORY ARMY EFFECTS BUREAU	STATUS	
<input checked="" type="checkbox"/>	INBOUND INVENTORY ✓		DECEASED	
<input type="checkbox"/>	G. R. OR SUB GR LABEL		MISSING	<input checked="" type="checkbox"/>
<input type="checkbox"/>	WILL OR POWER OF ATTY.		P. O. W.	
<input checked="" type="checkbox"/>	TALLY IN FORM 43 ✓		ABANDONED	
		UNKNOWN		

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

CONTAINERS ADDRESSED TO		INFORMATION	
none		none	
NAME AND STATUS VARIATIONS		CROSS REFERENCE	
none		rechecked	

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

TALLY NO. 9997	ORIG. NO. OF PKGS. 1	EXAMINING DATE 13-Aug-45	BOX NO.	SHEET 12
NAME Isah A. Hart, Jr			A. S. N. 34138802	OF 1 SHEETS
ORGANIZATION 77 RCN Sq. 7 Almd. Div.			RANK pvt	CASE NO.
WAREHOUSE SPACE 1328A	EXAMINED BY M Smith	DIARY REMOVED		
PACKAGE DESCRIPTION #1 etc	PACKED BY Coffman	PHOTO FILM REMOVED		
WEIGHT	INSPECTED BY	MOTION PICTURE FILM REMOVED		
	STORED BY RC	SHIPPED		
		DATE SEP 5 1945	BY WHOM	

DAMAGED
LAUNDRY

ADDITIONAL REMARKS

REMOVALS (other than G. I.)

DAMAGES (List type of damage-extent)

1 Flashlight slightly rusty
1 New Testament ink stained

SHORTAGES

U. S. GOV'T CHECK SHORT

7 Pa shoes

NUMBER

DATE

SYMBOL

AMOUNT

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

M. Smith
INVENTORY CLERK

L. Zuercher
SUPERVISOR

G. I. REMOVED

NAME HART, ISAH A JR. F. 8802

BAY	PALLET	BOX	TALLY
18	2		9997
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
PKG.			

Std. QM Form 43

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

21 JANUARY 1945

Date

SUBJECT: Inventory of Personal Effects of:

HART JR

ISAH

A

PVT

34138802

(Last Name)

(First Name)

(MI)

(Rank)

(ASN)

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

The above named individual of 87 HON SQ 7TH ARMORED DIVISION
(Unit) (Organization)

was reported MIA about 21 DECEMBER 1944
Status (KIA, MIA, Hosp. etc.) (Date)

Designated Beneficiary if information readily accessible NOT KNOWN

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

3 HATS ✓
2 PAIR SHOES ① ✓
1 FLASH LIGHT ✓
1 NEW THERMOS ✓
2 COLLAR INSIGNIAS ✓
2 RIBBONS ✓
1 MEDAL ✓
1 NECKTIE ✓
1 SHOE BRUSH ✓
1 PAIR ATHLETIC TRUNKS ✓

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 TRINK on 21 JANUARY 1945.
(Rail, Truck, etc.)

Name

Sam B. Pyle

Rank & ASN

SAM B PYLE
CAPT JEC 3-1016266

Organization

HEADQUARTERS 7th A.D.

Any additional pertinent information:

376239 BW

051010

LAUNDRY INVENTORY
ARMY EFFECTS BUREAU

H-8802E

H-8802E

DRY CLEANING		Do not use	LAUNDRY		Do not use
TROUSERS, WOOL			SHIRTS, WOOL		
COAT, SERVICE, WOOL			TROUSERS, COTTON		
OVERCOAT, LONG			TIE, COTTON		
OVERCOAT, SHORT, WOOL			UNDERSHIRTS, COTTON		
2 CAP, GARRISON ✓	26	3	SHIRTS, DRESS, COTTON		
CAP, SERVICE			DRAWERS, COTTON		
TIES, WOOL			SWEATSHIRTS, COTTON OR WOOL		
GLOVES, LEATHER OR WOOL			DRAWERS, WOOL		
SCARFS, SILK, RAYON, OR WOOL			SOCKS, COTTON, PR.		
SWEATERS			SOCKS, WOOL, PR.		
TRUNKS, SWIM			PAJAMA TOPS		
LEGGINGS			PAJAMA BOTTOMS		
BATHROBES			FATIGUES, 1 PC., COTTON		
BED ROLL			FATIGUES, TOPS, COTTON		
COMFORTER			FATIGUES, TROUSERS, COTTON		
			FATIGUES, CAP		
			BELT, COTTON		
			TOWEL, HAND		
			TOWEL, BATH		
			CLOTH, WASH		
			GLOVES, COTTON		
			JACKET, FIELD		
			SUPPORTERS, ATHLETIC		
			HANDKERCHIEFS		
			SCARFS, COTTON		
			CASE, PILLOW		
			1 TRUNKS, GYM ✓	12	1
			SHEETS, COTTON		
			BAGS, BARRACKS		

TALLY NO. 9997	ORIG. NO. OF PKGS. 1	EXAMINING DATE 13-Aug-45	BOX NO.	SHEET OF SHEETS
NAME Isah A. Hart, Jr ✓		A. S. N. 34138802 ✓		
ORGANIZATION 77 RCN Sg. 7 Almd. Div.		RANK Pvt. ✓	CASE NO.	
WAREHOUSE SPACE 1412	EXAMINED BY M Smith	SUPERVISOR'S OK WK	LAUNDRY REMOVED FROM FOOTLOCKER	
PACKAGE DESCRIPTION 21/45 1 PKG	WEIGHT	LISTED BY Bradley	SHIPPED	
		CHECKED BY Smith	DATE	BY WHOM
		CHECKED AND PACKED BY Danley		

LAUNDRY INVENTORY
ARMY EFFECTS BUREAU

H-8805E

H-8805E

Do not use	LAUNDRY	Do not use	DRY CLEANING
	SHIRTS WOOL		TRUSSETS WOOL
	TROUSERS COTTON		COAT SETTEE WOOL
	THE COTTON		OVERCOAT LONG
	UNDERSHIRTS COTTON		OVERCOAT SHORT WOOL
	UNDERSHIRTS COTTON		CAR GARMENT
	UNDERSHIRTS COTTON		CAR SERVICE
	DRAWERS COTTON		MEN WOOL
	SWEATSHIRTS COTTON OR WOOL		COVER LEATHER CLOTH
	DRAWERS WOOL		SCARFS SILK RAYON
	SOCKS COTTON		SWEATERS
	SOCKS WOOL		TRUNKS SWIM
	PAJAMA TOPS		LEGGINGS
	PAJAMA BOTTOMS		BATHING
	BATHING P.C. COTTON		BED LINEN
	YANGERS TOPS COTTON		CONFECTION
	BATHING TROUSERS COTTON		
	BATHING CAP		
	BELT COTTON		
	TOWEL HAND		
	CLOTH WASH		
	GLOVES COTTON		
	JACKET FIELD		
	SUPPORTERS ATHLETIC		
	MARKERSHETS		
	SCARFS COTTON		
	CASE BELLOW		
	TRUNKS GYM		
	SHEETS COTTON		
	BAGS BARRACKS		

[Large, dark, illegible scribbles and markings covering the right side of the page, possibly representing a signature or a large stamp.]

SHEET NO. _____
 SHEET _____
 BOX NO. _____
 DATE _____
 SHIPPED BY _____
 CHECKED BY _____
 RECEIVED BY _____
 DATE _____

*File my
8/11
prop shipped*

376,239
M

INQUIRY CLERK

Mt. Olive, Miss
April 16, 1945

Dear Sir:

I am writing you in regard of my son, Isah A. Hart, Jr., 34138802 he was killed in action on Dec. 21, 1944.

I wrote two Hqs. 87th Car. Ren. Sq. Mecz. APO # 257 c/o Postmaste, New York, New York. He wrote and told me to write you so here I try you.

I want to know if I could get my son body sent back to the state and about his bible and things he had such as his picture clothes and watch.

I would like to hear from you about this and if it possible I like to have his bible and watch returned home.

Yours truly,

Ludie Hart
Mt. Olive, Miss
Rt. I

APR 17 1945
2408 S 101

Final #1

INQUIRY CLERK

April 13, 1945
Mt. Olive, Miss

Dear Sir:

I am writing you in regard of my son, Isiah A. Hart, Jr., 34138802 he was killed in action on Dec. 31, 1944.

I wrote two Hqs. 87th Gar. Regt. 2d. Meas. APO # 257 c/o Postmaster, New York, New York. He wrote and told me to write you so here I try you.

I want to know if I could get my son body sent back to the state and about his bible and things he had such as his picture clothes and watch.

I would like to hear from you about this and if it possible I like to have his bible and watch returned home.

Yours truly,

Luddie Hart
Mt. Olive, Miss
Rt. 1

RECEIVED
LEGIS BUREAU
KANSAS CITY, MO.
JUL 2 8 1945

Handwritten mark



SPQYG 293
Hart, Isah A. Jr.
S.N. 34,138,802

ARMY SERVICE FORCES
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

24 July 1945

Mrs. Ludie Hart
Route 1
Mt. Olive, Mississippi

Dear Mrs. Hart:

Reference is made to your letter in which you request information concerning your son, the late Private Isah A. Hart Jr.

It is contemplated returning the remains of our military personnel after the war ends in all theaters of operation. At the proper time this office will contact the legal next of kin regarding their wishes as to the final disposition of the remains. The expense incident to the preparation and shipment of the remains to the place designated by the legal next of kin will be borne by the Government.

In view of the fact that the Army Effects Bureau, Kansas City Quartermaster Depot, Kansas City 1, Missouri, has been designated to receive and ship the personal effects of our military personnel who die outside the United States, a copy of your letter has been forwarded to that office for a direct reply to you.

The official records of this office show that the remains of your son were interred in the Henri Chapelle Cemetery #1, Henri Chapelle, Belgium, Plot MMM, Row 8, Grave 158. With reference to other larger cities the approximate location of Henri Chapelle, Belgium is seven miles southwest of Aachen, Germany, five miles northwest of Eupen and eight miles east of Liege, both in Belgium.

This office regrets, sincerely, the delay in answering your letter and wishes to extend its deepest sympathy in the loss of your son.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

ARTHUR L. WARREN
Colonel, QMC
Assistant

Encl #2



ARMY SERVICE FORCES
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

2. W. 34, 138, 808
Hart, Leah A. Jr.
8740 293

24 July 1945

Mrs. Ludie Hart
Route 1
Mt. Olive, Mississippi

Dear Mrs. Hart:

Reference is made to your letter in which you request information concerning your son, the late Private Leah A. Hart Jr.

It is contemplated returning the remains of our military personnel after the war ends in all theaters of operation. At the proper time this office will contact the legal next of kin regarding their wishes as to the final disposition of the remains. The expense incident to the preparation and shipment of the remains to the place designated by the legal next of kin will be borne by the Government.

In view of the fact that the Army Effects Bureau, Kansas City Quartermaster Depot, Kansas City 1, Missouri, has been designated to receive and ship the personal effects of our military personnel who die outside the United States a copy of your letter has been forwarded to that office for a direct reply to you.

The official records of this office show that the remains of your son were interred in the Henri Chapelle Cemetery at Henri Chapelle, Belgium, Plot 1211, Row 8, Grave 158. With reference to other larger cities the approximate location of Henri Chapelle, Belgium is seven miles southwest of Ascher, Germany, five miles northwest of Tapan and eight miles east of Liège, both in Belgium.

This office regrets, sincerely, the delay in answering your letter and wishes to extend its deepest sympathy in the loss of your son.

Sincerely yours,

ARTHUR L. WARREN
Colonel, GMC
Assistant



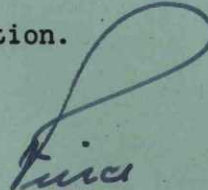
Arthur L. Warren

HEADQUARTERS, ARMY SERVICE FORCES
MEMO ROUTING SLIP

TO THE FOLLOWING IN ORDER INDICATED:

	NAME OR TITLE	ORGANIZATION	BUILDING AND ROOM	INITIALS
				DATE
1	EFFECTS QUARTERMASTER ARMY EFFECTS BUREAU			
2	KANSAS CITY 1, MISSOURI			
3				

For necessary action.



PIERCE

2 Incl.

cpy ltr dtd 16 April 45
cc ltr of e/d

FROM:	NAME	ORGANIZATION	BUILDING AND ROOM	DATE
				24 July 45
				TELEPHONE
				nb

MEMORIAL DIVISION, PLANNING & REGISTRATION
BRANCH, TEMPO "C" WASHINGTON 25, D. C.

W. D., A. G. O. Form 0115
1 October 1944

This Form supersedes W. D., A. G. O. Form 0115, 23 March 1944,
which may be used until existing stocks are exhausted.

25-37607-6250

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

Case No. 376239
 Date 17 May 1945

SUBJECT: Report of transaction in disposing of the effects of

Isah A. Hart, Jr., 34138802 late
 (Name of deceased) (Army Serial Number)
Private, Cavalry who died
 (Grade) (Organization, Army or Service)
 on the 21 day of December, 19 44, 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 15 May 1945, pursuant to Special Orders 228, Headquarters KCQM Depot, dated 25 September 1943, the application or affidavit of _____

Isah A. Hart, Sr. 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, Isah A. Hart, Sr. of
 (Name of person found entitled)

Star Route, Braxton State of
 (Number, Street or Avenue) (City, Town or Village)

Mississippi, is the father of the
 (Relationship or Capacity)

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

(Signature of Summary Court Officer)

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

(Name, Rank, Organization)

SUMMARY COURT MARTIAL

376239

JRM:IB:ms
May 17, 1945

Mr. Isah A. Hart, Sr.
Star Route
Braxton, Mississippi

Dear Mr. Hart:

The Army Effects Bureau has received from overseas some property of your son, Private Isah A. Hart, Jr.

This property, consisting of a few small items, is being sent you. Regrettably, some of the property was damaged prior to receipt at this Bureau.

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

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

Yours very truly,

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

67

KA

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mr. Isah A. Hart, Sr.

SHIP TO:

Star Route

Braxton, Mississippi

Effects of: Pvt. Isah A. Hart, Jr.
Name 34138802
ASN 376239 D
Case No.
Wt.

File no 8/1

DATE 17 May 1945

JRM:IB:ms

FCR: Effects Quartermaster

REMARKS:

 Inclose Bureau Check
 Acct. No.
 Amount
 Inclose "Valuables"
 Ship "Valuables"

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

ROUTING:

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

1 phg

REMARKS:

Fracked **FRANKED**
 Est. Exp. Chgs.
 Est. Frt. Chgs.
 No. of packages

MAY 22 1945

[Signature]
Shipping Clerk

MAY 12 1945

PACKAGE DESCRIPTION # 1 pkg	ARMY EFFECTS BUREAU INVENTORY	DECEASED <input checked="" type="checkbox"/>
		MISSING <input type="checkbox"/>
		P.O.W. <input type="checkbox"/>
		ABANDONED <input type="checkbox"/>
	376239	TALLY NO. 7671
		INV. DATE 2 May 45
		ORIG. NO. OF PKGS. 1
NAME ISAH A. HART JR.		BOX NO. 2
A.S.N. 34138802 RANK Plut.		SHEET 1 OF 1 SHEETS
		ORGANIZATION 87th Cav.

Belt	TOWELS & WASHCLOTHES	WINGS
BELT, MONEY (NO MONEY)	CLOTHING	BAGS, CLOTH OR TRAVEL
Cloth, Wash	BRACELET IDENT.	BILLFOLD, (NO MONEY)
Coats	Brushes	Case
Footwear, Pr.	CAMERAS	Footlocker
Gloves, Pr.	Glasses	KIT, SEW, TLT, OR WRITING
Handkerchiefs	Knives	BOOKS
Headwear	Lighters	Books, Address
Jackets	MISC. INSIGNIA	Books, Pilot Log
Overcoats	Pen, Fountain	DIARY (REMOVED FOR DUR)
Scarfs	Pencil, Mechanical	FILMS
Shirts	Pipes	Letters
Socks, Pr.	RELIGIOUS ARTICLES	Papers, Personal
Ties	RIBBONS, DECORATION	Photos
Towels	Rings	Shoe Shine Articles
Trousers, Pr.	Tobacco	SHORT SNORTER
Trunks, Pr.	Toilet articles	SOUVENIRS Stamp
Underwear	WATCH Weatherman	SOUVENIR MONEY
		Stationery
		TESTAMENTS
		U.S. MONEY (AMOUNT)

Full m 8/1
Lead

(Mother)

REMARKS Mrs Luddie Hart Star Route Braxton, Miss.	ATTACHMENTS	FORM #54	FORM #100
** Rusty * Crystal Broken		1 Inventory	1 Grave Label
		1 Form 28	

DAMAGED

C.A.T. none	WEIGHT	G.I. REMOVED
WAREHOUSE SPACE		SHORTAGE ON REVERSE
INVENTORIED BY 1199 Jackson	STORED BY JK	IDENT. TAGS REMOVED
PACKED BY McCoy	CHECKED BY SB	DIARY REMOVED
	DATE SHIPPED MAY 22 1945	LOCKED STORAGE
	#43 OR ADDITIONAL <input checked="" type="checkbox"/>	LAUNDRY REMOVED
		FILM REMOVED

ADDITIONAL REMARKS

SHORTAGES

U. S. GOVT. CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

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

INVENTORY CLERK

SUPERVISOR

G. I. REMOVED

NAME HART, ISAH A JR PVT- 02

BAY	PALLET	BOX	TALLY
		2	7671
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
GRB			

Eff. QM Form 43

~~RESTRICTED~~
INVENTORY FORM

Mailed Direct to KC

Pouch No. 210

Reg. No. 133

Henri Chappelle # 1 MM 158

8 Feb 45

Date

SUBJECT: Inventory of Personal Effects of:

Hart, Jr. Isah A. Pvt. 34138102
(Last Name) (First Name) (MI) (Rank) (ASN)

TO: Effects Quartermaster, Communications Zone, APO 887 US Army

The above named individual of Unk 87th Cav.
(Unit) (Organization)

was reported Unk about 8 Feb 45 1944.
Status (KIA, MIA, Hosp. etc.) (Date)

Designated Beneficiary if information readily accessible Unk

INVENTORY OF EFFECTS

- 1 broken wrist watch ✓
- 1 knife ✓
- pictures ✓
- souvenir coins ✓
- 1 pen ✓

Money in the amount of _____ has been turned into _____
(Name of finance office and

_____ 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 D. Herman
Rank & ASN S. HERMAN
2nd Lt, OMC
O-1587315
Organization G. R. O.

Any additional pertinent information:

158 M M M

Serial No.	34138802	Name	HART, ISAAC A JR
Grade	PT	Rank	
Organization	87 Pen Cav		
Address			
Nearest Relative			
Address			
Killed in Action	YES	Died of Disease	
Date	22 Jan 1945	Hospital	
Battle Area	Information		
Place of Burial	HENRI CHAPELLE #1		
Point of Coordination			
Description of Body			
Members Missing			
Signed		158 M M M	