293 RAFUSE, BENJAMIN W. 31 064 383 SGT. CAV. EUROPEAN AREA (MASS.) '44

RECEIPT OF REMAINS

DISTRIBUTION CENTER ROUTINE

REMAINS CONSIGNED TO:

HEADQUARTERS
NEW YORK PORT OF EMBARKATION
DISTRIBUTION CENTER #1, AGRS
1st AVENUE & 58th STREET
BROOKLYN, NEW YORK

SUPERINTENDENT

LONG ISLAND NATIONAL CEMETERY

HEREWITH THE REMAINS OF THE LATE:

SGT BENJAMIN W. RAFUSE, 31064383, USAGF

FOR INTERMENT IN YOUR CEMETERY.

ESCORT: SGT ANTHONY E. DETRI
ER 31 289 265
DET. #5, 1300 ASU

NAT
FILE
RECORDS ANNOTATED
DATE JAN 31 1949
NAME Dickson
R & R BR.

I, the undersigned, do hereby acknowledge receipt of the remains of the above-named deceased this 7 (Day) day of Dec. (Month), 19 48

Anthony E. Detri
(Witness (Escort))
Sgt ER 31289265

John C. Metzler Supt
(Consignee)
N. Johnson

QMC FORM REV 5 MAR 48 1193

U. S. GOVERNMENT PRINTING OFFICE 16—54737-1

CRJ

1

DISINTERMENT DIRECTIVE

89-7

SECTION A — NAME AND BURIAL LOCATION OF DECEASED	DIRECTIVE NUMBER	DATE (DAY / MONTH / YEAR)
	3504 02514	15 07 48

NAME	SERIAL NUMBER	RANK	ARM	DATE OF DEATH (DAY / MONTH / YEAR)
RAFUSE BENJAMIN W	31064383	SGT	1	

CEMETERY		DISPOSITION OF REMAINS (CODE / DIST. PT.)
ANDILLY - LAY ST REMY	1	2321 01

PLOT	ROW	GRAVE	COUNTRY	CAUSE OF DEATH
B	7	157	FRANCE	1

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
LONG ISLAND NATIONAL CEMETERY FARMINGDALE, NEW YORK	MRS. SALLY RAFUSE (WIFE) 7 BLACKWOOD STREET BOSTON, MASSACHUSETTS

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED

IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY (NAME AND TITLE)
☐ REMAINS ☐ MARKER	USAGF		

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

SEE ATCHD WORK SHT

MINOR DISCREPANCIES *1*

REMAINS PREPARED AND PLACED IN CASKET

DATE BY

CASKET SEALED BY	EMBALMER (*Signature*)
CASKET BOXED AND MARKED DATE BY	SHIPPING ADDRESS VERIFIED BY

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

SIGNATURE OF GRS INSPECTOR

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

QMC FORM REV 15 MAR 46 1194

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM: USMC ANDILLY, FRANCE	TO: CO, CASKETING POINT, ANTWERP BELGIUM
KIND OF CONVEYANCE: RAIL	NAME OF CONVOYER: Pvt. Thomas B. Abbott
SIGNATURE OF SHIPPER: ELMER R KING, 1st Lt Inf — DATE:	SIGNATURE OF RECEIVER: [illegible] — DATE: 20 SEP 1948

2. SHIPPED

FROM: AGRC ANTWERP BELGIUM	TO: U.S.A.T. Carroll Victory
KIND OF CONVEYANCE: VC 2	NAME OF CONVOYER: Captain R.W. Whereatt, Transport Comdr
SIGNATURE OF SHIPPER: L E Butler Lt Col Inf — DATE: 29 OCT 1948	SIGNATURE OF RECEIVER: R W Whereatt — DATE: 29 OCT 1948

3. SHIPPED

FROM:	TO: NYPE
KIND OF CONVEYANCE:	NAME OF CONVOYER:
SIGNATURE OF SHIPPER: — DATE:	SIGNATURE OF RECEIVER: [illegible] LIEUT. COLONEL, TC. PORT TRANSPORTATION OFFICER — DATE: NOV 16 1948

4. SHIPPED

FROM: NYPE	TO: DS#81
KIND OF CONVEYANCE: TRAILER	NAME OF CONVOYER: H O Young
SIGNATURE OF SHIPPER: LIEUT. COLONEL, TC. PORT TRANSPORTATION OFFICER — DATE: NOV 17 1948	SIGNATURE OF RECEIVER: H. O. YOUNG Captain, QMC — DATE: NOV 18 1948

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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

1

DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER	DATE (DAY / MONTH / YEAR)

NAME	SERIAL NUMBER	RANK	ARM	DATE OF DEATH (DAY / MONTH / YEAR)
RAFUSE BENJAMIN W	31064383	SGT	1	

CEMETERY	DISPOSITION OF REMAINS (CODE / DIST. PT.)

PLOT	ROW	GRAVE	COUNTRY	CAUSE OF DEATH
B	7	157	ANDILLY FRANCE	

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISTINTERRED
RAFUSE, Benjamin W.	31064383	Sgt		28 June 1948

IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY (NAME AND TITLE)
[X] REMAINS 2 [X] MARKER		P	W R BAILEY, Embalmer

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
MILITARY CLOTHING	SKELETAL STATE. COMPLETE.

OTHER MEANS OF IDENTIFICATION

SGT STRIPES FOUND WITH REMAINS.

MINOR DISCREPANCIES 1

~~NO IDENTIFICATION TAG FOUND WITH REMAINS.~~

REMAINS PREPARED AND PLACED IN CASKET x transfer box

DATE 29 June 1948 BY W. R. BAILEY, EMBALMER

CASKET SEALED BY	EMBALMER (Signature)
JOHN A. BRICKLEY, EMB. SUPV.	JOHN A. BRICKLEY, EMB. SUPV.

CASKET BOXED AND MARKED (DATE / BY)	SHIPPING ADDRESS VERIFIED BY
30/9/48 ORVILLE W. BILLINGS, CLERK RECORDER	All markings, tags and plates verified by: [illegible] QMC.

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

JESSE C. HARRELL, 1ST LT. CAC., DET. A. AGRC.

SIGNATURE OF GRS INSPECTOR

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

QMC FORM REV 15 MAR 46 1194

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER Pvt. Thomas B. Abbott	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

2. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

3. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

4. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

5. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

7. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

CASE NO	INSPECTION CHECK LIST	SPACE NO.
		1268

NAME OF DECEASED (*Last, First, Middle Initial*)	BRANCH OF SERVICE	RACE	RELIGION	SEX	DATE
RAFUSE, BENJAMIN W 55	USAGF	W		M	

RANK OR GRADE	SERIAL NUMBER	CONSIGNEE
SGT	31064383	LONG ISLAND NATIONAL CEM. FARMINGDALE, NEW YORK

SHIPPING CASE—GENERAL APPEARANCE (*Check ONLY Discrepancies*)		CONDITION OF SHIPPING CASE (*Check One*) ☑ SATISFACTORY ☐ UNSATISFACTORY
	FINISH (*Exterior*)	REMARKS
	FINISH (*Interior*)	OK
	HANDLES	
	HANDLE BOLTS	
	STENCILING—NAME PLATE	
	HEALTH PERMIT MARKER	
	HEALTH PERMIT NUMBER	

CASKET—GENERAL APPEARANCE (*Check ONLY Discrepancies*)		CONDITION OF CASKET (*Check One*) ☑ SATISFACTORY ☐ UNSATISFACTORY
	FINISH (*Exterior*)	REMARKS
	HANDLES AND FASTENINGS	Respray casket
	STENCILING—NAME PLATE	
	CAM LOCKS (*Sealing*)	OK
	ODOR OR MOISTURE	

ROUTED THROUGH

☐ MORTUARY OPERATING ROOM	☐ REPAIR SHOP
CONDITION OF REMAINS ☐ SATISFACTORY ☐ UNSATISFACTORY	CASKET REPAIRED ☐ YES ☐ NO
NECESSARY DISINFECTION (*Explain*)	CASKET EXCHANGED ☐ YES ☐ NO
	SHIPPING CASE REPAIRED ☐ YES ☐ NO
	SHIPPING CASE EXCHANGED ☑ YES ☐ NO
	REMARKS sanded Plaster

TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTOR
				15/1/49	Harrell

REMARKS

Painted C.P Inspected
12/1/48 C of A.

QMC FORM 4 MAR 48 1251 Replaces QMC Form R-5054, which is obsolete.

16—54755-1 U. S. GOVERNMENT PRINTING OFFICE

Rec'd

WU544 20 COLLECT

BOSTON MASS NOV 12 603P

COLONEL G H BARE

QM CORP DISTRIBUTION CENTER 1 PORT OF NXXX OF EMBARKATION

PROCED WXXX PROCEED ~~WITH ARANGXXX~~ WITH ARRANGEMENT FOR THE BURIAL

OF SGT BENJAMIN W RAFUSE ~~AT ONXXX~~ AT LONG ISLAND CEMTERY IN FARMINGDALE

NEW YORK

MRS SALLY RAFUSE

741P

RECEIVED

DISTRIBUTION CENTER #1
NEW YORK PORT OF EMBARKATION
BROOKLYN, NEW YORK

I certify that this message is on official business and that its transmission with a lower precedence, or by air mail, regular mail, or scheduled messenger would be prejudicial to the public interest.

MRS. SALLY RAFUSE

7 BLACKWOOD STREET

BOSTON, MASS.

JAMES McCARTHY
Major, TC
Admin O, AGR Div.

PLEASE BE ADVISED REMAINS OF THE LATE SGT BENJAMIN W. RAFUSE ARE ENROUTE TO THE UNITED STATES. OUR RECORDS INDICATE YOU WISH REMAINS BURIED IN LONG ISLAND NATIONAL CEMETERY, FARMINGDALE, NEW YORK.

WE CANNOT GIVE A DEFINITE DELIVERY DATE, BUT SUPERINTENDENT OF NATIONAL CEMETERY WILL NOTIFY YOU BY TELEGRAM GIVING DATE AND HOUR FUNERAL SERVICES WILL BE HELD IN SUFFICIENT TIME TO PERMIT YOUR ATTENDANCE AT YOUR OWN EXPENSE. IT IS EXPECTED THAT AN INTERVAL OF FROM FIVE DAYS TO FOUR WEEKS WILL ELAPSE BEFORE FUNERAL CAN TAKE PLACE. MILITARY ESCORT WILL ACCOMPANY REMAINS TO NATIONAL CEMETERY. PAYMENT OF SEVENTY FIVE DOLLARS INTERMENT EXPENSE ALLOWANCE IS NOT REPEAT NOT AUTHORIZED IN CASES WHERE BURIAL IS IN A NATIONAL CEMETERY. APPROPRIATE JOINT MILITARY HONORS AND RELIGIOUS SERVICES WILL BE PROVIDED AT GRAVESIDE BY VETERANS' ORGANIZATION OR BY MILITARY OR NAVAL PERSONNEL. PLEASE CONFIRM ABOVE DELIVERY INSTRUCTIONS WITHIN FORTY EIGHT HOURS OF RECEIPT OF THIS MESSAGE OR SUBMIT NEW DELIVERY INSTRUCTIONS BY TELEGRAM COLLECT TO DISTRIBUTION CENTER ONE, NEW YORK PORT OF EMBARKATION. WE REGRET IT WILL BE IMPOSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER EXPIRATION OF THE FORTY EIGHT HOURS. INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.

ITEM G. H. BARE, COL, QMC

160B

Date 7 Dec. 1948

TO: Sally Rafuse
7 Blackwood St.,
Boston, Mass.

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

LONG ISLAND NATIONAL CEMETERY
FARMINGDALE, NEW YORK
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 Benjamin W. Rafuse

Rank, etc. Sgt. 7th Armd. Div. TR-B-87th Cav. RCN Sq. Mecz

Grave or lot No. Gr.No. 16105 Sec. J

Date of death Sept 13 - 1944

Date buried 7 Dec. 1948

To be filled in by Next of Kin

State desired Massachusetts

Religious emblem desired Latin Cross for Christian Faith
(Latin Cross for Christian Faith, Star of David for Hebrew Faith)

Date of birth May 27 - 1926

Address of kin 7 Blackwood St - Boston Mass

Signature Sally Rafuse Date 12/14/48

OQMG FORM 315
(20 March 1945)

JAN 10 1949

16—44438-1 U. S. GOVERNMENT PRINTING OFFICE

Letter to Kerr 24 Jan 49

BUDGET BUREAU No. 49-R277.

REQUEST FOR DISPOSITION OF REMAINS

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

Sgt. Benjamin W. Rafuse, 31 064 383
Plot B, Row 7, Grave 157,
United States Military Cemetery
Andilly, France

DATE: 7 April 1948

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, MRS. SALLY RAFUSE (PLEASE PRINT OR TYPE NAME OF NEXT OF KIN) *(Please indicate relationship to the deceased by placing an "X" in the proper box.)*

- [X] 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 _____ (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)
- [X] 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT ~~Fort Devens Mass~~ Fall River Mass (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

Coded 7-14-48

X J. Williams

OQMG FORM 14 NOV 1946 345 MILITARY

16—50411-1

PAGE 1

12 JUL 1948

L S Smith 1 July

PART I (*Continued*)

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

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

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

OR

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

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

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

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

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

X

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 Sally Rafuse — 7 Blackwood St Boston Mass
(SIGNATURE OF NEXT OF KIN) (STREET AND NUMBER)

MRS - SALLY RAFUSE - 7 BLACKWOOD ST BOSTON MASS
(NAME PRINTED OR TYPED) (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 14. day of April, 19 49, at city (or town) of Boston, county of Suffolk, and State (or Territory or District) of Mass

George Romanos
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

N. P.
(OFFICIAL TITLE)

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

16—50411-1

If you are the next of kin and you desire

I, THE

NAMED IN PART I OF THIS FORM, DO HER
THE NEXT EXISTING PERSON IN THE OR

LAST NAME

RELATIONSHIP TO THE DECEASED

NUMBER AND STREET

WHOM I UNDERSTAND SHALL HAVE TH

(SIGNATURE OF NEXT

(NAME PRINTED OR

If you are NOT the next of kin authoriz

THIS IS TO NOTIFY YOU THAT I AM NOT T
NAMED ON PAGE 1 OF THIS FORM. THE
SHOULD BE DIRECTED.

LAST NAME

RELATIONSHIP TO THE DECEASED

NUMBER AND STREET

(SIGNATURE)

(NAME PRINTED OR TY

16—50410-1

PART II—RELINQUISHMENT OF DISPOSITION AUTHORITY

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

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

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

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

(DATE)

(SIGNATURE OF NEXT OF KIN) (STREET AND NUMBER)

(NAME PRINTED OR TYPED) (CITY AND STATE)

PART III

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

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

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

(DATE)

(SIGNATURE) (STREET AND NUMBER)

(NAME PRINTED OR TYPED) (CITY AND STATE)

ADDITIONAL REMARKS AND INSTRUCTIONS

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

* U. S. Senate just approved bill to establish National Cemetery at Fort Devens Mass.

U. S. GOVERNMENT PRINTING OFFICE

MEMORIAL DIVISION
FAMILY CORRESPONDENCE BRANCH
FCA SECTION, ACCEPTANCE UNIT

TO BE USED ON IRFS

Benjamin W. Rafuse Sgt 31 064383 W-2
NAME RANK ASN 345 signed by the Option Selected

Andilly Fr. B - 7 - 157
Cemetery PLOT ROW GRAVE Consignee

Address

Write NOK Mr. Mrs. Miss Sally Rafuse W
relationship
7 Blackwood St (Address)
Boston Mass. (City and State)

A. Action to Family Letters Section

1. ( ) Indicate RELATIONSHIP

2. ( ) Indicate OPTION desired.

3. ( ) Indicate CEMETERY in which interment desired.

4. ( ) Indicate Country (HOMELAND) of deceased or NOK.

5. ( ) Indicate CONSIGNEE Name and/or address.

6. ( ) Obtain SIGNATURE of NOK.

7. ( ) Obtain NOTARIZATION

8. ( ) Advise NOK that NATIONAL CEMETERY SELECTED ~~IS CLOSED~~ has not been established + ~~and~~ request that another choice be made. Nearest Nat Cem. - Farmingdale, LI, N.Y.

B. Action to Case Resolution Unit, FCA:

9. (Secure DOCUMENTS (Remarriage),(Birth), (Death), (Other_____)

10. ( ) Reply to REMARKS on IRF

11. ( ) SPECIAL INSTRUCTIONS: _____

12. ( ) Inform Party listed Below of Action taken by this Office

Name_____ _____
Relationship

_____ (address)

_____ (city and state)

Orig-With 345
Dup-ORT for 293 file

Lice 5-13-48
Acceptance Clerks Name Date

FILE
Name M.C. Mac
Action Inf Below
Acceptance Section
Family Corres. Branch

QMGMF 293
Rafuse, Benjamin W., SN 31 064 383
Plot B, Row 7, Grave 157
USMC Andilly, France

24 May 1948

Mrs. Sally Rafuse
7 Blackwood Street
Boston, Massachusetts

Dear Mrs. Rafuse:

The inclosed form, "Request for Disposition of Remains," pertaining to the final burial of the remains of your husband, the late Sergeant Benjamin W. Rafuse, and signed by yourself, is returned for correction and completion of those parts checked in red pencil. You will understand that this vital information is necessary to enable us to properly comply with the desires of the next of kin.

I regret to inform you the legislation for the establishment of new and additional national cemeteries which was presented before the last Congress failed to pass. There is, therefore, no authority at present for any new national cemeteries.

The nearest national cemetery in which grave space is still available is the Long Island National Cemetery located at Farmingdale, New York.

May I suggest that you carefully consider the cemeteries listed on the inclosed roster of national cemeteries and designate your desires to us at your earliest convenience.

In making the necessary correction, please do not erase any of the entries already made. Instead, draw a line through the incorrect entries; then enter the correct information immediately above or in the correct place as indicated.

Your prompt cooperation in completing and returning the Disposition form to us will avoid further unnecessary delay and will be greatly appreciated.

Sincerely yours,

RICHARD B. COOMBS
Major, QMC
Memorial Division

3 Incls
1. Req for Disp Fm
2. Nat'l Cem List
3. Envelope

cc: Mr. Arrowsmith
Mleh

Ans w/o 293 fwd

RBC

OMNMC 293
Ralnes, Benjamin W., SM 21 006 363
Plot E, Row 7, Grave 137
NMC Andilly, France

24 May 1948

Mrs. Sally Ralnes
7 Blackwood Street
Boston, Massachusetts

Dear Mrs. Ralnes:

The inclosed form, "Request for Disposition of Remains," pertaining to the final burial of the remains of your husband, the late Sergeant Benjamin W. Ralnes, and signed by yourself, is returned for correction and completion of those parts checked in red pencil. You will understand that this vital information is necessary to enable us to properly comply with the desires of the next of kin.

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Your prompt cooperation in completing and returning the inclosed form to us will avoid further unnecessary delay and will be greatly appreciated.

Sincerely yours,

RICHARD B. COOK
Major, QMC
Memorial Division

3 Incls
1. Req for Disp Fm
2. Nat'l Cem List
3. Envelope

cc: Mr. Arrowsmith

lcb

CORRESPONDENCE ACTION SHEET

NAME OF DECEDENT (Last, First, Middle)	GRADE	SERIAL NUMBER	
Rafuse Benjamin W.	Sgt	31 064 383	
PREVIOUS BURIAL LOCATION (Cemetery and Country)	PLOT	ROW	GRAVE
PRESENT BURIAL LOCATION (Cemetery and Country)	PLOT	ROW	GRAVE
USMC Andilly, France	B	7	157

ADDRESSEE	ADDRESS (Street, City, State)
MR. MISS MRS. Sally Rafuse	7 Blackwood Street
RELATIONSHIP ~~A~~ Widow	Boston, Massachusetts

PARAGRAPHS (Sequence)	ADDITIONAL DATA — MODIFICATIONS
85-A	husband
62-A	I regret to inform you the legislation etc
67-B	Pt 2, 1st sentence only — Long Island — Farmingdale, New York. Add: Pt 3 —
85-B	
85-AA	

2 Enclosures
Form 3445
Envelope

ANALYST INITIALS AND DATE	TYPIST INITIALS	REVIEWER INITIALS AND DATE
LS 19 May		

QMG FORM 1902
23 APR 48

48 8410

DEPARTMENT OF THE ARMY

QMGMF 293
Rafuse, Benjamin W.
SN 31 064 383

7 April 1948

Mrs. Sally Rafuse
7 Blackwood Street
Boston 15, Massachusetts

Dear Mrs. Rafuse:

Your recent letter indicating your desire for the final disposition of the remains of your husband, the late Sergeant Benjamin W. Rafuse, has been brought to my attention. Unfortunately, your decision cannot be officially recorded for action in its present letter form.

The Department of the Army will make every effort to comply with all wishes of the next of kin, if at all possible. However, it is very necessary that you properly complete and return a "Request for Disposition of Remains" form. All information requested on this form is vitally essential to enable us to legally comply with your desires.

We are inclosing a blank Disposition Form for your convenience. Your prompt cooperation in completing and returning the form to us will avoid further unnecessary delay and will be greatly appreciated.

Sincerely yours,

Incl 2 Incls
1. Req for Disp Fm
2. Envelope

RICHARD B. COOMBS
Major, QMC
Memorial Division

CC: Mr. Smith

DEPARTMENT OF THE ARMY

QMGMT 222
Hafner, Benjamin F.
SN 21 Gen 323

7 April 1948

Mrs. Sally Hafner
7 Bicknell Street
Boston 13, Massachusetts

Dear Mrs. Hafner:

Your recent letter indicating your desire for the final disposition of the remains of your husband, the late Sergeant Benjamin F. Hafner, has been brought to my attention. Unfortunately, your decision cannot be officially recorded for action in the present letter form.

The Department of the Army will make every effort to comply with all wishes of the next of kin, if at all possible. However, it is very necessary that you properly complete and return a "Request for Disposition of Remains" form. All information requested on this form is vitally essential to enable us to legally comply with your desires.

We are inclosing a blank Disposition Form for your convenience. Your prompt cooperation in completing and returning the form to us will avoid further unnecessary delay and will be greatly appreciated.

Sincerely yours,

RICHARD D. GOCHNES
Major, QMC
Memorial Division

Incl 2 Incls
1. Ltr for Disp Rm
2. Envelope

CORRESPONDENCE ACTION SHEET

Addressee: Mrs. Sally Rafuse, — Widow (Relationship)

State: 7 Blackwood Street,

City, State: Boston 15, Mass. — '47 (Date letter)

Cemetery
Temporary: ___ ___ ___ _____ _____ _____

Permanent: ___ ___ ___ _____ _____ _____
Plot Row Gr Cem. Name or No. City Country

Decedent: Rafuse (Last) Benjamin (First) W. (Initial) Sgt (Rank) 31 064 383 (ASN)

PARAGRAPHS (sequence) -- ADDITIONAL -- DATA -- MODIFICATIONS --

86 par 1 only husband

The Department of the Army will make every effort to comply with all feasible wishes of the next of kin. However, it is very necessary that you properly complete and return a "Request for Disposition of Remains" form. All information requested on this form is vitally ~~xxxxxx~~ essential to enable us to legally comply with your ~~xxx~~ desires.

We are inclosing a blank Disposition Form for your convenience. Your prompt cooperation in completing and returning the form to us will avoid further unnecessary delay and will be greatly appreciated.

Incl: Blank Disposition Form
Framked envelope

Analyst Typist Reviewer — Modifications — OKed

47 11117

FROM: Family Letter Section 13 Mar 48
(Date)

TO: Reply Form Acceptance Section

Rafuse	Benjamin	W.	31 064 383
(Last Name)	(First Name)	(Initial)	(ASN)

USMC Andilly France	B	7	157
(Cemetery)	(Plot)	(Row)	(Grave)

The attached correspondence pertains to the disposition of the remains of the subject decedent. It is requested that the following information be supplied this Section in order to reply to correspondent:

[x] 1. Has 345 been dispatched? No record according to Roster.

[x] 2. Has 345 been received and accepted?

[x] 3.a. What option was selected?
b. What cemetery and location?

[x] 4. 345 was executed by whom?

[ ] 5. Did N.O.K. relinquish disposition authority?

[ ] 6. Did widow indicate remarriage?

[ ] 7. Did documents accompany reply form?
(If so, what documents?)

[ ] 8. Have necessary records been amended to reflect this change in NOK?

[ ] 9. Has L.O.I. been dispatched to new N.O.K.?

[ ] 10. Attach reply form and return to this section.

[x] 11. Forwarded for your information and any action deemed necessary.

[x] 12. Change of decision.

J. T. Creamer
1522 B
COOLIDGE
5072

Returned 19 March '48

Sgt Benjamin Rafise 31064383
Plot B, Row 7, Grave 157
U. S. Military Cemetery
Andilly, France

Dear Sir:

Received your letter in regards to the permanent burial of my husband, Sgt Benjamin Rafise (31064383)

393 It has been over three years that I wrote and requested that his body be returned to the United States

Thinking there may be an National Cemetery opened in Massachusetts was constantly in my mind, but since there

2

isn't, I request that his remains be interred in the nearest Cemetary, which I think would be Long Island N. Y.

Mrs Sally Rapuse
7 Blackwood St
Boston 15, Mass.

Sgt Benjamin W. Rafuse, 31 064 383
Plot B, Row 7, Grave 157,
United States Military Cemetery
Andilly, France

9 January 1948

Mrs. Sally Rafuse
7 Blackwood Street
Boston, Massachusetts

Dear Mrs. Rafuse:

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

In the event that you expressed a desire for permanent overseas burial, the remains of your loved one will be interred in the United States Military Cemetery St. Avold, located twenty-three miles east of Metz, France, inasmuch as grave space is no longer available in the United States Military Cemetery Epinal, France. When final interment has been accomplished, you will be advised of the exact grave location.

In order that your concurrence in this matter may be of official record, it is requested that you complete the form below and return it to this office. The inclosed envelope, which requires no postage, may be used for its return.

Sincerely yours,

1 Incl
Franked envelope

THOMAS B. LARKIN
Major General
The Quartermaster General

EC

I, _____ next of kin of the late _____
Name Name of decedent
_____ have no objection to his remains being permanently
Serial number
interred in the United States Military Cemetery St. Avold, France.

_____
Signature

lmh

Sgt. Benjamin W. Rafuse, 31 064 383
Plot B, Row 7, Grave 157,
United States Military Cemetery
Andilly, France

28 July 1947

Mrs. Sally Rafuse
7 Blackwood Street
Boston, Massachusetts

Dear Mrs. Rafuse:

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,

Incls.

THOMAS B. LARKIN
Major General
The Quartermaster General

ehl

SPQXG 293
Rafuse, Benjamin W.
SN 31 064 383

13 June 1946

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

Mrs. Sally Rafuse
7 Blackwood Street
Boston, Massachusetts

Dear Mrs. Rafuse:

Your letter to The Adjutant General concerning your husband, the late Sergeant Benjamin W. Rafuse, has been referred to this office.

The War Department has now been authorized to remove the remains of your husband, at Government expense, to the final resting place which you designate.

When the necessary preliminaries have been completed, a letter with an information pamphlet and a "Request for Disposition" form attached will be mailed to you. The "Request for Disposition" form, when properly filled out, will constitute the formal expression of your detailed desires. Until you receive these forms, therefore, it will not be necessary for you to communicate with this office regarding this subject.

The necessity for complete coordination of movement in many parts of the world, and the uncertainity regarding the supply of steel for caskets, makes it impossible, at this time, to estimate when these forms will be mailed. Please be assured, however, that your feelings in this matter are fully appreciated, and that your response, when received, will be acted upon with a minimum of delay.

All communications issuing from this office have been addressed to you at 7 Blackwood Street, Boston, Massachusetts.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

WM. B. CHRISTENSEN
1st Lieut., QMC
Assistant

lrl

WBC

61-J.N.

PC

File Reference

B08B.33.22

273 Rafuse, Benjamin W.

XC-3,709,250

Dear Sir

I am writing this letter for a little information in regards to the return of the above named veteran's body to the United States.

About two months ago a letter was received at 23 Belvidere St, asking if they wanted him brought back. As yet I have not even received a form to fill out.

Being his wife and next of kin, that letter

should have been mailed to me at 7 Blackwood St. Would you please make a note of that and address all future letters to the above address, Also send me a form to fill out and any information you may have in regards to this matter.

Mrs Sally Rafuse
7 Blackwood St
Boston Mass.

SPQYG 293
Rafuse, Benjamin W.
S.N. 31 064 383

23 March 1945

Mrs. Sally Rafuse
7 Blackwood Street
Boston, Massachusetts

Dear Mrs. Rafuse:

Reference is made to a letter from this office, dated 8 December 1944, stating that you would be advised as soon as information was received, relative to the burial of your husband, the late Sergeant Benjamin W. Rafuse.

The official records of this office show that the remains of your husband were interred in the United States Military Cemetery #1, Andilly, France, Plot B, Row 7, Grave 157.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

MAYO A. DARLING
Lt Colonel, QMC
Assistant

CCP

ep

SPQYG 293
Rafuse, Benjamin W. - Sgt.
ASN 31 064 383

Address Reply to The
Quartermaster General.

8 December 1944.

Mrs. Sally Rafuse,
7 Blackwood Street,
Boston, Massachusetts.

Dear Mrs. Rafuse:

Your letter of recent date has been forwarded to this office by The Adjutant General for necessary action in connection with the burial and return of the remains of your husband, the late Sergeant Benjamin W. Rafuse.

It is with deep regret that I must advise you that, up to the present time information pertaining to the burial of the remains of your husband has not yet been received. However, it is possible that months may elapse before information of this nature is received, and I feel certain you will understand this delay when you consider the existing conditions under which it must be obtained. You may be assured, however, that upon receipt of such information in this office you will be notified.

You may be assured, that a notation has been made on the official records of this office that it is your desire to have the remains of your husband returned to the United States for final interment, if possible after the war. All expenses incident to the preparation and shipment of the remains to the place thus designated by the legal next of kin will be borne by the Government.

Please accept my sincere sympathy and condolence in the loss of your husband.

For The Quartermaster General:

Sincerely yours,

MAYO A. DARLING,
Lt. Colonel, Q.M.C.,
Assistant.

cbj

CCP

DJL/rie

WAR DEPARTMENT
ARMY SERVICE FORCES

TRANSMITTAL SHEET

28 October 1944.

TO	Dir., Memorial Division, OQMG, Room 1007, Tempo C., Washington, D. C. (Service, division, or organization) (Location) (Branch or unit) (Attention)
DESCRIPTION OF ATTACHED COMMUNICATION	Rafuse (Originator) The Adjutant General (Addressee) 10 October 1944 (Date) Burial and return of remains. (Subject) (File No.)
FROM	Casualty Branch, A. G. O., Investigation and Correspondence Section, Family Relations Sub-Section, Room 3711, Munitions Building. 77826 (Service, division, or organization) (Location) (Telephone)

1. For necessary action.

2. Sergeant Benjamin W. Rafuse, 31064383, Cavalry, was killed in action in France on 13 September 1944.

3. Writer has ~~not~~ been advised of this reference.

For the Chief, Casualty Branch:

2 Incl
Copy ltr dtd 10 Oct 44.
Copy reply dtd 28 Oct 44.

Samuel J. Cole,
Major, A. G. D.

To Bureau file
12-7-44 C.B.
RP
3-10-45 TB

DJL/rie

AGPC-G 201 Rafuse, Benjamin W.
(10 Oct 44) 31064383

28 October 1944.

Mrs. Sally Rafuse,
7 Blackwood Street,
Boston, Massachusetts.

Dear Mrs. Rafuse:

Reference is made to your recent letter in which you requested information concerning your husband, the late Sergeant Benjamin W. Rafuse.

Your desire for details concerning the death of your husband is fully understood and it is regretted that no additional information has been received in this office since my letter of 30 September 1944. You may be assured that in the event any additional information concerning him is received, you will be notified promptly.

I regret that I cannot advise you as to whose territory your husband was fighting on at the time of his death.

Matters pertaining to burial and return of remains come under the jurisdiction of The Quartermaster General, Washington 25, D. C., and a copy of your letter has been furnished that official for direct reply.

Permit me to again extend my deepest sympathy in the loss you have sustained.

Sincerely yours,

ROBERT H. DUNLOP
Brigadier General,
Acting The Adjutant General.

October 10, 1944.

Dear Mr. Ulio:

Recently I received a telegram from the War Department, informing me of the death of my husband, Sgt. Benjamin W. Rafuse, (31064383) killed in action Sept 13th. They also stated a letter would follow the telegram, yes, I received the letter confirming the telegram, but in it there wasn't one bit of information as to how it happened. Surely by this time you must have received some information that you could tell me.

Perhaps you could at least answer this question. Do they bury these boys just the same way they find them on the battle fields, and why aren't they brought back to the United States where they started from and where they rightfully belong, they certainly don't belong over there. I realize there are hundreds of boys killed and lack of transportation has a great deal to do with it, still time and time again we read in the papers about servicemen who have married since they have gone across, and have brought their wives, children and whole families over here. That certainly takes up space, why not bring our own American wounded boys home who are waiting for transportation, and let these wives, children and families wait until the war is over, just the same as we American wives and mothers have to do.

One other thing you micht tell me, if at the time of my husbands death (Sept 13th) was the place where they were fighting in German or American hands. That question might seem strange to ask, but if it were in German hands, I still have hopes of him being captured and alive.

Anxiously awaiting a reply.

Mrs. Sally Rafuse.

GRAVES REGISTRATION
FORM NO. 1
(Revised 1 Sept. 1943)

RESTRICTED

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

44467

1 Oct. 1944
Date

Last Name	First	Initial	Rank	Serial No.
Rafuse,	Benjamin	W	Unk	31064383

Unit: Unk

Organization: 87 CAV RCN Sq M

Place of Death	Date of Death	Cause of Death
Metz France App.	25 Sept. 1944	KIA

Time and Date of Burial	Name of Cemetery	Name or Coordinates of Location
30 Sept. 1944 1300	U.S. Mil. Cem. # 1	Andilly, France

Grave Number	Row Number	Plot Number	Type of Marker
157	7	B	Cross

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

If No Identification Tags
How were remains identified?

What means of identification were buried with the body?

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

Who is buried on:

	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Right:	Glenn G. Bellamy	0-1285533	Capt.		156
Deceased's Left:	Kenneth H. Burns	34851471	Pvt.		158

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

BENJAMIN W RAFUSE
31064383 T42 43 A
P

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

Emergency Addressee Unk
Name

Address

Religion Protestant

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

File
2 MAY 1945
CB

Signature of Officer or other person reporting burial

BORIS MILLER
1st Lt. QMC
3043 QM. GR. CO.

Verified by G.R.S. Officer

H.Q. SOS. 9/5/44 500M/8/.

Inc #71

Left Hand

Thumb	1	2	3	4

IF DECEASED UNIDENTIFIED

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

Height:
Weight:
Color of Eyes:
Color of Hair:
Race:

Laundry Marks:
Number of Rifle:
Wear Glasses?
Is Tooth Chart Attached?

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

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

Right Hand

Thumb	1	2	3	4

TOOTH CHART

Deceased's Right — Deceased's Left

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

Indicate: missing natural teeth by ×; crowns by ○; fillings by □; Bridges by ⊂ linking anchor teeth; replacements by artificial teeth ⊠

Characteristics: _____

Other Data: _____

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

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

REPORT OF DEATH

DATE 24 Oct 44
eg/4632

FULL NAME	ARMY SERIAL NUMBER	GRADE
Rafuse, Benjamin W.	31 064 383	Sgt
HOME ADDRESS	**ARM OR SERVICE**	**DATE OF BIRTH**
Boston, Mass.	Cavalry	27 May 20

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
European Area	Killed in action	13 Sep 44

STATION OF DECEASED	DATE OF ENTRY ON CURRENT ACTIVE SERVICE	LENGTH OF SERVICE FOR PAY PURPOSES		
		YEARS	MONTHS	DAYS
European area	12 Feb 42			

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)
Mrs. Sally Rafuse, wife, 7 Blackwood St., Boston, Mass.

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)
Mrs. Bertha Rafuse, mother, 23 Belvidere St., Boston, Mass.
Mr. Kenneth Rafuse, father, same as above.
Mrs. Sally Rafuse, wife, 7 Blackwood St., Boston, Mass. (Not designated)

INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
											X		

ADDITIONAL DATA AND/OR STATEMENT
—

FILE
NOV 9 1944

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

[X] BATTLE
[ ] NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:
John A. Hopkins Jr
ADJUTANT GENERAL

WD, AGO, FORM NO. 52-1, 29 MAY 1944

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

JRM:TS:mlm
Case No. 402840
Date 1 September 1945

SUBJECT: Report of transaction in disposing of the effects of

Benjamin W. Rafuse, 31064383 late a
(Name of deceased) (Army Serial Number)

Unknown, Cavalry who died
(Grade) (Organization, Army or Service)

on the ____ day of Unknown, 19__, at Unknown

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 27 August 1945, pursuant to Special Orders 228, Headquarters KCQM Depot, dated 25 September 1943, the application or affidavit of Mrs. Sally Rafuse 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. Sally Rafuse of
(Name of person found entitled)

7 Blackwood Street, Boston State of
(Number, Street or Avenue) (City, Town or Village)

Massachusetts, 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, CMC
(Name, Rank, Organization)
SUMMARY COURT MARTIAL

Eff. QM Form 75

5 Apts

ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT
ARMY EFFECTS BUREAU
601 Hardesty Avenue
Kansas City 1, Missouri

SHIPMENT CLERK
Case # 402840
RTB:AP:sc
(S 9 Oct 45)
9 July 1945

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

Please complete and return to the Effects Quartermaster, Army Effects Bureau, Kansas City Quartermaster Depot, Kansas City 1, Missouri.

SECOND REQUEST

1. Last Name **	2. First Name	3. Middle Initial	4. Serial Number *	5. Grade
RAFUSE Pfuse	Benjamin	W.	31064383	

6. Casualty Status	7. Organization and APO Address
(X) Deceased ( ) Prisoner of War ( ) Missing ( ) Internee ( ) Unknown: Please furnish: KIA 13 Sept. 44	Tr. B. 87th Cav. Rcn Sq. Mecz

8. Name of Beneficiary	9. Relationship	10. Address
Mrs. Bertha Refuse	mother	23 Belvidere St. Boston, Mass
11. Alternate Beneficiary	**12. Relationship**	**13. Address**
Mr. Kenneth Refuse	father	same address
14. Emergency Address	**15. Relationship**	**16. Address**
Mrs. Dally Refuse	wife	1 Blackwood St. Boston, Mass
17. Bailee	**18. Relationship**	**19. Address**
Same as Eff		

*If the above ASN is not assigned to the soldier named, it is requested that the AEB be advised the name, rank and present mailing address of the soldier to whom this ASN is assigned, together with the information requested in 8-19 above.

**In the event the above ASN is not assigned to this soldier, it is further requested that this Bureau be furnished available information regarding this soldier of record in your office.

Edward F. Witsell
Major General
Acting the Adjutant General
By: [illegible]

Death file

RD-P 2 August 1945

Eff. Q. Form 20 (12 Dec 44)

RECEIVED
26 JUL 1945
AGO MESSAGE CENTER
BLUE POINT, L. I.
19

OUT
21 JUL 1945
Mimeograph Section AGO
Casualty Branch

A.G.O.
JUL 1945
MAIL ROOM
RECEIVED
12
CASUALTY BRANCH

12 JUL 1945
Mail Room
AGO

AGO
12 JUL 1945
Mail

5A-PAV

ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT
ARMY EFFECTS BUREAU
601 Hardesty Avenue,
Kansas City 1, Missouri

JUN 28 1945

Case No. 402840
S-12 September 45
GHG:AP:bb
12 June 45

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

Please complete and return to the Effects Quartermaster, Army Effects Bureau, Kansas City Quartermaster Depot, Kansas City 1, Missouri.

1. Last Name **	2 First Name	3. Middle Initial	4. Serial * Number	5. Grade
PFUSE	BENJAMIN	W.	31064383	----

6. Casualty Status	7. Organization and APO Address
(X) Deceased ( ) Prisoner of War ( ) Missing ( ) Internee ( ) Unknown: Please furnish:	

8. Name of Beneficiary	9. Relationship	10. Address
11. Alternate Beneficiary	**12. Relationship**	**13. Address**
14. Emergency Addressee	**15. Relationship**	**16. Address**
17. Bailee	**18. Relationship**	**19. Address**

*If the above ASN is not assigned to the soldier named, it is requested that the AEB be advised the name, rank and present mailing address of the soldier to whom this ASN is assigned, together with the information requested in 8-19 above

**In the event the above ASN is not assigned to this soldier, it is further requested that this Bureau be furnished available information regarding this soldier of record in your office.

Cause of identity
16 Jun 45
CMH

Eff. QM Form 20 (12 Dec 44)

403840

WDS

WTB:TS:mlm
September 3, 1945

Mrs. Sally Rafuse
7 Blackwood Street
Boston, Massachusetts

Dear Mrs. Rafuse:

I am inclosing a check for $26.53, representing funds of your husband, Benjamin W. Rafuse.

No other property belonging to him has been received at the Army Effects Bureau to date.

Our action in transmitting funds does not, of itself, vest title in the recipient. Such property is forwarded for distribution according to the laws of the state of decedent's legal residence.

Money ordinarily is sent from overseas by mail in advance of other effects; therefore, it is probable that additional belongings of decedent will reach this Bureau at a later date. As it is intended to forward any such property to you promptly upon receipt here, I ask that you please notify this Bureau if there is a change in your address within the next few months.

I wish to express my sympathy in the loss of your husband.

Sincerely,

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

1 Incl—
Check

WD

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Sally Rafuse
7 Blackwood Street
Boston, Massachusetts

Effects of:
Name Benjamin W. Rafuse
ASN 31064383
Case No. 402840 D
Wt.

DATE 3 September 1945
RTB:TS:mlm

Schreiber
FOR: Effects Quartermaster

REMARKS:

x Inclose Bureau Check
Acct. No. 75819
Amount ~~$26.53~~ m D
____ Inclose "Valuables" item
____ Ship "Valuables" item(s)

____ Remove C. I.
X Note discrepancy in Last name
____ Films removed
____ Diary removed
____ Laundry removed

137789 VH

ROUTING:
1 Accounting Branch 75819
____ Warehouse Division
2 Files Branch, Adm. Div. 402840

September 6, 45

Sally Rafuse 26.53

Twenty-Six and 53/100

REMARKS:

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

Shipping Clerk

Eff. QM Form 14 (26 Dec 44)

ARMY EFFECTS BUREAU

Deceased x
Missing
A.W.O.L.
P.O.W.
Abandoned

Flat Box

3-2
PHS

Shown on Tally In as

TALLY IN NO. INVENTORY DATE 9 Feb 45 CASE NO. 402840

EFFECTS OF Benjamin W. Pfuse RANK

ARMY SERIAL NUMBER 31064383 RA ORG. ----

CONSIGNOR CZ

DELIVERING CARRIER Mail G B/L NO. G B/L DATE

Package No.	Article Description	Remarks
1	$26.53 ad # 75819	Included in one
ENVELOPE	PAID-Check No. 137789 m.s.	U.S. Treasurer's Check
		# 2117
		Dated 8 Nov 44
		Symbol 212-779
		Amount27,929.28 Payable to
		~~Inurred to~~ Effects QM
		List F168

Warehouse Space Inventoried by mjg

Locked Storage Space FEB 16 1945 Packed by

Eff. QM Form 11a

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

JRM:IB:vd

Case No. 277082

Date 14 March 1945

SUBJECT: Report of transactions in disposing of the effects of

Benjamin W. Refuse (Name of deceased), 31084283 (Army Serial Number) late a

Sergeant (Grade), Cavalry (Organization, Army or Service) who died

on the 13 day of September 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 5 March 1945, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application or affidavit of Mrs. Sally Refuse 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. Sally Refuse (Name of person found entitled) of 7 Blackwood Street (Number, Street or Avenue), Boston (City, Town or Village) State of Massachusetts, is the widow (Relationship or Capacity) of the 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

Eff. QM Form 75

WAR DEPARTMENT

277082

THE ADJUTANT GENERAL'S OFFICE

WASHINGTON 25, D. C.

REPORT OF DEATH

DATE 24 Oct 44

eg/4632

FULL NAME	ARMY SERIAL NUMBER	GRADE
Rafuse, Benjamin W.	31 064 383	Sgt
HOME ADDRESS	**ARM OR SERVICE**	**DATE OF BIRTH**
Boston, Mass.	Cavalry	27 May 20

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
European Area	Killed in action	13 Sep 44

STATION OF DECEASED	DATE OF ENTRY ON CURRENT ACTIVE SERVICE	LENGTH OF SERVICE FOR PAY PURPOSES		
		YEARS	MONTHS	DAYS
European area	12 Feb 42			

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)

Mrs. Sally Rafuse, wife, 7 Blackwood St., Boston, Mass.

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)

Mrs. Bertha Rafuse, mother, 23 Belvidere St., Boston, Mass.
Mr. Kenneth Rafuse, father, same as above.
Mrs. Sally Rafuse, wife, 7 Blackwood St., Boston, Mass, (Not designated)

INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
											X		

ADDITIONAL DATA AND/OR STATEMENT

—

ARMY EFFECTS BUREAU RECEIVED OCT 31 1944

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

[X] BATTLE

[ ] NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:

John A. Hopkins Jr

ADJUTANT GENERAL

WD. AGO. FORM NO. 52-1, 29 MAY 1944

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

IN REPLY REFER TO 277082

JRM:WA:an
May 8, 1945

Mrs. Sally Rafuse
7 Blackwood Street
Boston, Massachusetts

Dear Mrs. Rafuse:

The Army Effects Bureau has received from overseas some more property of your husband, Sergeant Benjamin W. Rafuse.

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

S LH5

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Sally Rafuse
7 Blackwood Street
Boston, Massachusetts

Effects of:
Name: Sgt. Benjamin W. Rafuse
ASN: 31064383
Case No.: 277082 D
Wt.:

DATE 8 May 1945
JRM:WA:an

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.

1 pkg

REMARKS:

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

MAY 12 1945

Shipping Clerk

Eff. QM Form 14 (26 Dec 44)

SHEET 1 OF 1 SHEETS

ARMY EFFECTS BUREAU INVENTORY

DECEASED X
MISSING
P O W
ABANDONED

BOX NUMBER 11

ORIGINAL NUMBER OF PACKAGES 1

TALLY NUMBER 7227

INVENTORY DATE 12 April 1945

CASE NUMBER 277082 PS

EFFECTS OF Benjamin W. Ratuse

RANK —

A.S.N. 31064383

ORGANIZATION —

PACKAGE DESCRIPTION # 1 Pkg.

CLOTHING		PERSONAL ITEMS		CONTAINERS	
	BELT		BRACELET, IDENTIFICATION		BAGS, CLOTH
	BELT, MONEY (NO MONEY)		BRUSHES		BAGS, TRAVEL
	CLOTH, WASH		CAMERAS		BILLFOLD (NO MONEY)
	COATS		GLASSES		CASE,
	FOOTWEAR, PR.	1	KNIVES		FOOTLOCKER
	GLOVES, PR.	1	LIGHTERS		KIT, SEWING
	HANDKERCHIEFS		MISC. INSIGNIA		KIT, TOILET
	HEADWEAR		MISC. ITEMS		KIT, WRITING
	JACKETS		PEN, FOUNTAIN		**PAPERS AND MISC.**
	OVERCOATS		PENCIL, MECHANICAL		BOOKS
	SCARFS		PIPES		BOOKS, ADDRESS
	SHIRTS	X	RELIGIOUS ARTICLES		BOOKS, NOTE
	SOCKS, PR.		RIBBONS, DECORATION		BOOKS, PILOT LOG
	TIES	1	RINGS		DIARY (REMOVED FOR DURATION)
	TOWELS		TOBACCO		FILMS
	TROUSERS, PR.		TOILET ARTICLES		LETTERS
	TRUNKS, PR.		WATCH		PAPERS, PERSONAL
	UNDERWEAR		WINGS	X	PHOTOS
					SHOE SHINE ARTICLES
					SHORT SNORTER
					SOUVENIRS
				X	SOUVENIR MONEY
					STATIONERY
					TESTAMENTS
				.46	U.S. MONEY (AMOUNT)

REMARKS: no information
Rechecked

ATTACHMENTS: FORM #54 | FORM #100
1 inventory
1 G.R. Label

C.A.T. Sally Ratuse (wife)
Boston mass

WEIGHT

	GI REMOVED
X	SHORTAGE ON REVERSE
	IDENT. TAGS REMOVED
	DIARY REMOVED
	LOCKED STORAGE
	LAUNDRY REMOVED
	FILM REMOVED

WAREHOUSE SPACE 1942

STORED BY LW

DATE SHIPPED MAY 12 1945

INVENTORIED BY Gunn

PACKED BY Yalloley

CHECKED BY E

X #43 OR ADDITIONAL

Eff. QM Form 11 (12 Dec 44)

ADDITIONAL REMARKS

SHORTAGES

	U.S. GOVT. CHECK SHORT
	NUMBER
	DATE
	SYMBOL
	AMOUNT

75 francs
5 pounds 19 shillings
$1.00

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

Grunn
INVENTORY CLERK

Smart
SUPERVISOR

G.I. REMOVED

Eff. QM Form 11 (12 Dec 44)

NAME RAFUSE, BENJAMIN W 31064383

BAY	PALLET	BOX	TALLY
		11	7227

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
GRB		

Eff. QM Form 48

BENJAMIN W. RAFUSE
31064383 42 43 A

RESTRICTED

P

INVENTORY OF PERSONAL EFFECTS

US Mil. Cem. #1 Andilly, France
1 Oct. 1944
(Date)

SUBJECT: Inventory of Personal Effects of:

Rafuse (Last Name) Benjamin (First Name) W. (MI) Unk (Rank) 31064383 (ASN)

To: Effects Quarterrmaster, Communication Zone, ATC US Army

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

was reported KIA (Status-Killed, MIA, Hospitalized, etc.) about 25 Sept. 1944 (Date)

Designated beneficiary if information readily accessible

INVENTORY OF EFFECTS

Class 1		Class 2
3 Photos	Knife	30 Coins — 75 Francs
6 Postal MO rec. $150.00	Ring	5 Pounds 19 Shillings
Marriage Cert.	3 Holy medals	$1.00
Cig. lighter	Ger. note	

Money in the amount of above has been turned into B. P. GUERIN, Lt. Col.
(Name of Finance Officer

11th Fin. Office Form DPD 38 enclosed.
(and symbol number)

Name and Address of any Bank in which accounts may be carried:

I certify that the above items constitute all of the effects, secured by me, of the above named individual and that they were forwarded to the Effects Depot by _____ on _____.
(Mail, Truck, etc.) (Date)

Name Brush
BORIS MILLER
Rank & Asn 1st Lt.

Organization 3043 QM GR CO.

Any additional pertinent information:

Serial No. 31014383 Name RAFUSE BENJAMIN W.
Grade [illegible] Rank
Organization [illegible]
Address
Nearest Relative SALLY RAFUSE - WIFE
Address BOSTON MASS.
Killed in Action YES Died of Disease
Date Hospital
Battle Area Information

Place of Burial U.S. MIL. CEM. #1 - ANTILLY - FR.
Point of Coordination
Description of Body

Members Missing TE-203

Signed [illegible]

R-7-157

277082

JRM:IB:prh
April 17, 1945

Mrs. Sally Rafuse
7 Blackwood Street
Boston, Massachusetts

Dear Mrs. Rafuse:

The Army Effects Bureau has received some additional property of your husband, Sergeant Benjamin W. Rafuse.

These effects, contained in one carton, 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.

Extending every sympathy, I am

Sincerely yours,

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

ARMY SERVICES FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO: Mrs. Sally Rafuse
7 Blackwood Street
Boston, Massachusetts

Effects of:
Name: Sgt. Benjamin W. Rafuse
ASN: 31064383
Case No.: 277082-D
Wt.:

DATE 17 April 1945
JRM:IB:prh

U. Russell
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.

1 ctn

REMARKS:

PACKING
Franked_____
Est. Exp. Chgs._____
Est. Frt. Chgs._____
No. of packages 1

APR 20 1945

MC
Shipping Clerk

Eff. QM Form 14 (26 Dec 44)

PACKAGE DESCRIPTION: H' Barton

ARMY EFFECTS BUREAU INVENTORY

277,082

DECEASED [X]
MISSING [ ]
P.O.W. [ ]
ABANDONED [ ]

TALLY NO. 6975
INV. DATE 3 Mar 1945
ORIG. NO OF PKGS. 1
BOX NO.
SHEET 1 OF 1 SHEETS
ORGANIZATION 87 Cav. Rcn Sq. 7 armd Div

NAME BENJAMIN, W. RAFUSE
A.S.N. 31064883 RANK Sgt

	BELT		TOWELS & WASHCLOTHS		WINGS
	BELT, MONEY (NO MONEY)	X	CLOTHING		BAGS, CLOTH OR TRAVEL
	CLOTH, WASH		BRACELET, IDENT.		BILLFOLD, (NO MONEY)
	COATS		BRUSHES		CASE
	FOOTWEAR, PR		CAMERAS		FOOTLOCKER
	GLOVES, PR		GLASSES		KIT, CEM, TLT, OR WRITING
	HANDKERCHIEFS		KNIVES	X	BOOKS
	HEADWEAR		LIGHTERS		BOOKS, ADDRESS
	JACKETS	X	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, DECORATIONS		PHOTOS
	TOWELS		RINGS		SHOE SHINE ARTICLES
	TROUSERS, PR		TOBACCO		SHORT SNORTER
	TRUNKS, PR		TOILET ARTICLES	X	SOUVENIRS
	UNDERWEAR	/	WATCH Lenator		SOUVENIR MONEY
					STATIONERY
				X	TESTAMENTS
					U.S. MONEY (AMOUNT)

REMARKS: Sally K. Sherlock
7 Blackwood St.
Boston Mass.

ATTACHMENTS: [ ] FORM #54 [ ] FORM #100
inventory tag

C.A.T. none

MC

WEIGHT		G.I. REMOVED	
		SHORTAGE ON REVERSE	X
		IDENT. TAGS REMOVED	
		DIARY REMOVED	
DATE SHIPPED	APR 20 1945	LOCKED STORAGE	
		LAUNDRY REMOVED	
#43 OR ADDITIONAL	X	FILM REMOVED	

WAREHOUSE SPACE 2199
STORED BY LC
INVENTORIED BY Passch
PACKED BY Rose
CHECKED BY 6

QEF. QM Form 11 (24 Feb 45)

ADDITIONAL REMARKS

SHORTAGES

U. S. GOVT. CHECK SHORT

Ribbons

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

ETT. QM Form 11 (12 Dec 44)

NAME

RAFUSE, BENJAMIN W SGT

BAY	PALLET	BOX	TALLY
	25		6975

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
CTN		

Eff. QM Form 43

WAR DEPARTMENT
EFFECTS QUARTERMASTER CZ
APO 887, US ARMY

Penalty for private use to avoid payment of postage $300

Official Business

TO: Army Effects Bureau
Kansas City QM Depot
Kansas City, Mo.
U.S.A.

KIA.

Inv. ad. 9-11-44

PERSONAL EFFECTS OF: RAFUSE BENJAMIN W.
SGT 31064383

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

23456
IN REPLY REFER TO_____

JRM:ALS:jd
9 February 1945

Mr. John Doe
123 Main Street
Hamilton, Missouri

Dear Mr. Doe:

Since our previous correspondence with you, the Army Effects Bureau has received additional property of your son, Private Frank T. Doe, consisting of a flight record.

This record is transmitted herewith.

Yours very truly,

P. L. EGGS
2nd Lt. Q.M.C.
Chief, Correspondence Branch

1 Incl--Flight Record

SL Form 2 - Transmittal of flight record as additional property.

RESTRICTED

24 September 1944
Date

SUBJECT: Inventory of Personal Effects of:

RAFU E	BENJAMIN	N.	Pvt.	31 044 [illegible]
(Last Name)	(First Name)	(MI)	(Rank)	(ASN)

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

The above named individual of 87th. Cav. Rcn. Sq. Mecz., 7th. Armd. Div.
(Unit)

Troop B
(Organization) was reported Killed in Action
(Status-Killed, MIA,

Hospitalized, etc.) about 13 September 1944
(Date)

Designated Beneficiary if information readily accessible _____

_____

- -

INVENTORY OF EFFECTS

1 pr. Shoes, civil
1 ea. Cap garrison
2 ea. Belt eb
1 ea. Cap garr's
1 ea. Watch,po
3 ea. Handkerch
1 ea. Ribbon Good Conduct
1 ea. Ribbon
1 ea. News b[illegible] & papers

1 pr. Shoe laces
1 ea. Tooth brush
1 ea. Razor
1 ea. New Testament
1 ea. Kit sewing
1 ea. Pencil
1 ea. Knife w/wen
1 ea. Watch band
1 ea. Ribbon E.T.
2 ea. Badge Expert
1 ea. Badge Marksman
1 ea. Bar sub-machine gun
1 ea. Comb.
1 ea. Shaving brush
1 ea. Nail brush
1 ea. Dictionary

RESTRICTED

RESTRICTED

Money in the amount of ____NONE____ has been turned into

_____ Form WDFD 38
(Name of finance officer and symbol number)

enclosed.

_____
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
(Rail, Truck, etc.)

____25 September____194__.

Name R. J. Frazier
R. J. FRAZIER

Rank & ASN W.O.J.G., W2 106 437

Organization Hq. 87th. Cav. Ren. Sq.
~~A.P.O. 327, Postmaster~~
New York, N.Y.

Any additional pertinent information:

RESTRICTED

Tally in No. 861

TALLY IN INVENTORY RECORD

NAME Refuse Benjamin W. RANK Sgt ASN 31064383

SHOWN ON CONSIGNORS T.O. AS

ORGANIZATION 87 Cav Rcn Sq Mech

DATE 9-11-44 CASE PARCEL Box STATUS KIA

ITEMS	DESCRIPTION	REMARKS
	Cap Wool O.D. ✓	
	Knife w/case ✓	
	Watch ✓	
	Cir Glass ✓	
	Lower Trunks ✓	
	Sewing Kit ✓	
	Note & Address Book ✓	
	Toilet articles ✓	
	Handkerchiefs ✓	
	Shorts cotton ✓	
	Cap Khaki ✓	
	Testament ✓	
	Belts ✓	
	Ribbons or Medals ✓	
	Metal Band ✓	
	Purse Mesh ✓	
	Razor ✓	
	Dental Floss ✓	
	Shoe Laces ✓	

INVENTORIED [illegible] WHSE SPACE

TYPE CONTAINER

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

IN REPLY REFER TO 277,082

JRM:VM:cly
March 10, 1945

Dear Mrs. Rafuse:

The Army Effects Bureau has received from overseas some personal effects of your husband, Sergeant Benjamin W. Rafuse.

These effects are being forwarded to you in one package.

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

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

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

Yours very truly,

F. A. ECKHARDT
Captain Q.M.C.
Assistant

ARMY SERV[illegible]ICES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO: Mrs. Sally Rafuse
7 Blackwood Street
Boston, Massachusetts

Effects of:
Name Sgt. Benjamin W. Rafuse
ASN 31 064 383
Case No. 277,082 D

DATE 6 March 1945
JRM:VM:vmh

C Barber
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.

1 pkg

REMARKS:

MAR 10 1945

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

MAR 8 1945

mlc
Shipping Clerk

Eff. QM Form 14 (26 Dec 44)

SHEET 1 OF 1 SHEETS

BOX NUMBER

ARMY EFFECTS BUREAU INVENTORY

ORIGINAL NUMBER OF PACKAGES 1

DECEASED X
MISSING
P O W
ABANDONED

TALLY NUMBER 6805

INVENTORY DATE 20 Feb 1945

CASE NUMBER 277,082 PHS

EFFECTS OF Benjamin W. Rafer

RANK Sgt

A.S.N. 31064383

ORGANIZATION 87th Cav Recon Sq Mechanized

PACKAGE DESCRIPTION #4 Tbx

CLOTHING		PERSONAL ITEMS		CONTAINERS
	BELT	1	BRACELET, IDENTIFICATION	BAGS, CLOTH
	BELT, MONEY (NO MONEY)		BRUSHES	BAGS, TRAVEL
	CLOTH, WASH	1	CAMERAS	BILLFOLD (NO MONEY)
	COATS		GLASSES	CASE,
	FOOTWEAR, PR.	2	KNIVES Pen Knife	FOOTLOCKER
	GLOVES, PR.		LIGHTERS	KIT, SEWING
	HANDKERCHIEFS		MISC. INSIGNIA	KIT, TOILET
	HEADWEAR		MISC. ITEMS	KIT, WRITING
	JACKETS		PEN, FOUNTAIN	**PAPERS AND MISC.**
	OVERCOATS		PENCIL, MECHANICAL	BOOKS
	SCARFS		PIPES	BOOKS, ADDRESS
	SHIRTS		RELIGIOUS ARTICLES	BOOKS, NOTE
	SOCKS, PR.		RIBBONS, DECORATION	BOOKS, PILOT LOG
	TIES		RINGS	DIARY (REMOVED FOR DURATION)
	TOWELS		TOBACCO	X FILMS
	TROUSERS, PR.		TOILET ARTICLES	LETTERS
	TRUNKS, PR.		WATCH	PAPERS, PERSONAL
	UNDERWEAR		WINGS	PHOTOS
				SHOE SHINE ARTICLES
				SHORT SNORTER
				X SOUVENIRS
				SOUVENIR MONEY
				STATIONERY
				1 TESTAMENTS
				U.S. MONEY (AMOUNT)

file dlp

1 Wood Chest

REMARKS: No Information
Rechecked

ATTACHMENTS: FORM #54 | FORM #100
Inventory

MAR 2 1945

Films removed for development

C.A.T. None

WEIGHT

GI REMOVED

SHORTAGE ON REVERSE

IDENT. TAGS REMOVED

DIARY REMOVED

WAREHOUSE SPACE 1033

STORED BY

DATE SHIPPED MAR 8 1945

LOCKED STORAGE

INVENTORIED BY Pischel

LAUNDRY REMOVED

PACKED BY Dailey

CHECKED BY B

X #43 OR ADDITIONAL

X FILM REMOVED

Eff. QM Form 11 (12 Dec 44)

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

C.I. REMOVED

Eff. QM Form 11 (12 Dec 44)

NAME

RAFUSE, BENJAMIN W. SGT.

BAY	PALLET	BOX	TALLY
	14	12	6808

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
CTN.		

Eff. QM Form 48

RESTRICTED

21 September 1944
Date

SUBJECT: Inventory of Personal Effects of:

RAPUSE	BENJAMIN	W.	Sgt.	31 064 383
(Last Name)	(First Name)	(MI)	(Rank)	(ASN)

TO: Effects Quartermaster, Communication Zone, APO US Army

The above named individual of 87th. Cav. Recn. Sq. Mecz., 7th. Armd. Div. (Unit)

Troop B (Organization) was reported Killed in Action (Status-Killed, MIA, Hospitalized, etc.) about 13 September (Date) 1944

Designated Beneficiary if information readily accessible _____

- -

INVENTORY OF EFFECTS

1 ea. Chest
1 ea. Bracelet, Identifaction
1 ea. Camera, "Baby Browing"
5 Rolls Films V127
1 ea. Ash tray
1 ea. Souvenir Bird
1 ea. Knife
1 ea. Knife w/scabbard
1 ea. New Testament
1 ea. Cake knife

fldlp

RESTRICTED

RESTRICTED

Money in the amount of XXXXXXXXXXXXXXXXXXXXXXXXXXXXXX has been turned into

_____ Form WDFD 38
(Name of finance officer and symbol number)

enclosed.

_____
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 TRU OK on
(Rail, Truck, etc.)

21 September 194 .

Name R. J. Frasier
R. J. FRASIER

Rank & ASN W.O.J.G., W2 106 437

Organization Hq. 87th. Cav. Ron. Sq.
A.P.O. #257, Postmaster
New York, N.Y.

Any additional pertinent information:

RESTRICTED