

Fulton, ^{BK} NY
Oct. 11 44

Quartermaster General, A.S.F.

Dear Sir-

I received a letter upon request from Maxwell D. Taylor, Major General U.S.A. Commanding that my Son. P. ²⁹³ Joseph R. Fitzgerald # 32416057, was killed in Normandy France, on June 14th 44.

He states censorship restrictions prohibit giving further details concerning his place of burial & advised me to write to you for this information.

I will greatly appreciate any information you can give me concerning my Son's death & burial place, also if conditions are such that his remains can be sent home when hostilities cease:

He was with the 401st Glider Inf. 101st Airborne Div.

Respectfully
Mrs. Katherine Fitzgerald
216 Janovoort St.
Fulton, N.Y.

To B.R. in file
11/10/44 C.B.

RECEIVED
MAY 13 2 46 PM '44
CENTRAL MISSISSIPPI



REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

Pfc. Joseph R. Fitzgerald, 32 476 037
Plot C, Row 9, Grave 180,
United States Military Cemetery
La Caille, France

31 July 1947

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

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

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

PART I

I, Katherine E. Fitzgerald

(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

(Please indicate relationship to the deceased by placing an "X" in the proper box.)

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

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

- 1. BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS.
- 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY

St. Mary's Cemetery, Fulton, New York

(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

DD processed 16 Oct 47 [signature]

CODEN 8/10/47 - [signature]
OQMG FORM 14 NOV 1946 345 MILITARY

16-50411-1

OCT 4

PAGE 1

[Handwritten signature]

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 Thomas E. Nealis			
NUMBER AND STREET 518 Cayuga Street	CITY OR TOWN Fulton 02	COUNTY OR PROVINCE Oswego	STATE OR TERRITORY OF U. S. A., OR COUNTRY New York
EXPRESS OFFICE (Nearest railroad passenger station) Fulton, New York	TELEGRAPH ADDRESS Fulton, N. Y.	TELEPHONE No. Fulton 1076	

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 Manzer	FIRST NAME Catherine	MIDDLE INITIAL F.	RELATIONSHIP TO DECEASED Sister
NUMBER AND STREET 216 Gansworth Street	CITY OR TOWN Fulton	COUNTY OR PROVINCE Oswego	STATE OR TERRITORY OF U. S. A., OR COUNTRY New York

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.

Katherine E. Fitzgerald (SIGNATURE OF NEXT OF KIN) ~~216 Cayuga Street~~ 216 Gansworth Street (STREET AND NUMBER)
Katherine E. Fitzgerald (NAME PRINTED OR TYPED) Fulton, New York (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 6th day of August, 1947, at city (or town) of Fulton, county of Oswego, and State (or Territory or District) of New York

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

(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

NOTARY PUBLIC IN THE STATE OF NEW YORK

RESIDENCE AT TIME OF APPOINTMENT, OSWEGO COUNTY

OSWEGO COUNTY REGISTRATION #135

BY COMMISSION EXPIRES MARCH 30, 1948 50411-1

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 _____, 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.

Notary Public State of California

My Commission Expires _____

My Office is _____

My Term of Office is _____

My Commission No. _____

My Office No. _____

My Office Address _____

My Office City _____

My Office State _____

My Office Zip _____

My Office Phone No. _____

My Office Fax No. _____

My Office E-mail Address _____

My Office Website _____

My Office Mailing Address _____

My Office Mailing City _____

My Office Mailing State _____

My Office Mailing Zip _____

My Office Mailing Phone No. _____

My Office Mailing Fax No. _____

My Office Mailing E-mail Address _____

My Office Mailing Website _____



ab

WESTERN UNION

JOSEPH L. EGAN
PRESIDENT

1961

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

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

(106)

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

1948 JAN 19 PM 8 09

UA70 19/18 COLLECT=FULTON NY 19 520P
 SCHENECTADY GENERAL DISTRIBUTION DEPOT=
 ATTN AMERICAN GRAVES REGISTRATION DIVN SCHDY=

REGARDING PVT FIRST CLASS JOSEPH FITZGERALD 32476057
 HAVE NOTIFIED THOMAS E NEALIS UNDERTAKER NO CHANGES
 IN INSTRUCTIONS=
 KATHRYN E FITZGERALD.

n/c

32476057

THE COMPANY WILL APPRECIATE SUGGESTIONS FROM ITS PATRONS CONCERNING ITS SERVICE

QMGMR 314.6
Graves Registration
(European - U. S. Misc.)

12 MAR 1947

SUBJECT: Burial Records

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

1. Request the burial reports and grave markers for the following decedents interred in the United States Military Cemetery, LaCambre, France be changed to read as follows:

NAME	RANK GRADE	SERIAL NO.	DATE OF DEATH	ORGAN.	PLOT	ROW	GRAVE
✓ Cooper, Robert W. Jr.	S/Sgt.	11 117 976		Co. "L" 119 Inf. Regt. 30 Inf. Div.	K	3	60
Fmalisi, Michael P.	Pfc.	36 638 957	3 Jul 44		I	3	48
Fitzgerald, Joseph R.	Pfc.	32 476 057		Co. "A" 401 Gler. Inf. Regt. 82 A/B Div.	C	9	180
Fordham, Edward B.	S/Sgt.	32 575 076	11 Jul 44	Co. "C" 119 Inf. Regt. 30 Inf. Div.	J	5	95

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

FOR THE QUARTERMASTER GENERAL:

MARTIN G. RILEY
Major, QMG
Memorial Division

1 2 MAR 1947

General Register
Graves Registration
(European - U. S. Area)

Serials: Serial Numbers

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

4. Report the serial reports and grave markers for the following
incidents involved in the United States Military Cemetery, Lommel, France,
be changed to read as follows:

NAME	RANK	SERIAL NO.	DATE OF DEATH	ICM NO.	ICM	ICM
Cooper, Robert W. Jr.	Capt.	32 117 936	02. 11. 44	119	ICM No. 119	30 117 936
Kauffman, Michael P.	Pvt.	30 630 937	3 Jul 44	1	ICM No. 1	30 630 937
Elzenger, Joseph H.	Pvt.	32 110 074	02. 11. 44	119	ICM No. 119	30 110 074
Verdun, Albert B.	Capt.	32 512 016	02. 11. 44	119	ICM No. 119	30 512 016

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

FOR THE CHIEF OF BUREAU:

WALTER D. WILLY
Major, USA
Executive Assistant

Pfc. Joseph R. Fitzgerald, 32 476 057
 Plot C, Row 9, Grave 180,
 United States Military Cemetery
 La Cambe, France

31 July 1947

Mrs. Katherine E. Fitzgerald
 216 Gansvoort Street
 Fulton, New York

Dear Mrs. Fitzgerald:

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

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

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

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

Sincerely,

THOMAS B. LANKIN
 Major General
 The Quartermaster General

8 Incls.
 [Handwritten initials]

21 July 1947

Plt. Joseph S. Fitzgerald, SS W/O OVI
Plot O, Row 9, Grave 183
United States Military Cemetery
La Crosse, France

Mrs. Elizabeth S. Fitzgerald
215 Gansvoort Street
Wilton, New York

Dear Mrs. Fitzgerald:

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 Government of the Army has been entrusted with this sacred responsibility to the honored dead. The records of the War Department indicate that you are the nearest relative of the above-named deceased, who gave his life in the service of his country.

The enclosed pamphlet, "Disposition of World War II Armed Forces Dead," and "American Cemetery," 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 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 retain your rights to the next 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 B, 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 the receipt by you. The postage return will avoid unnecessary delays.

Sincerely,

THOMAS B. LARSEN
Major General
The Quartermaster General

Yours truly,

MAIL ROOM
JUL 21 1947
MILITARY CEMETERY

147909 ✓

vj

JRM:VJ:bh ✓
March 10, 1945 ✓

Mrs. Katherine E. Fitzgerald ✓
216 Gansvoort Street ✓
Fulton, New York ✓

Dear Mrs. Fitzgerald: ✓

The Army Effects Bureau has received some additional property of your son, Private First Class Joseph R. Fitzgerald.

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

83

SPQYG 293

Fitzgerald, Joseph R. - Pfc.
S.N. 32,476,057

13 January 1945.

Address Reply to THE
QUARTERMASTER GENERAL.

Mrs. Katherine E. Fitzgerald,
216 Gansvoort Street,
Fulton, New York.

Dear Mrs. Fitzgerald:

Reference is made to a letter from this office,
dated 13 November 1944, stating that you would be advised
as soon as information was received, relative to the burial
of your son, the late Private First Class Joseph R. Fitzgerald.

You are advised that the official report of inter-
ment received in this office shows that the remains of your
son were interred in the La Cambe Cemetery, La Cambe, France,
Grave 180, Row 9, Plot C.

For The Quartermaster General:

Sincerely yours,

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

MAR 10 1945
Q.M.C.
RECEIVED

JAN 13 8 45 AM '45
MEMORIAL DIVISION

CCP

R

1945 100

Elizabeth, Joseph R. - 174
S.N. 02,482,087

13 January 1945

Address Reply to
QUARTMASTER GENERAL

Mrs. Katherine E. Fitzgerald,
218 Garwood Street,
Bronx, New York

Dear Mrs. Fitzgerald:

Reference is made to a letter from this office,
dated 13 November 1944, stating that you would be advised
as soon as information was received, relative to the burial
of your son, the late Private First Class Joseph R. Fitzgerald.

You are advised that the official report of inter-
ment received in this office shows that the remains of your
son were interred in the La Campa Cemetery, La Campa, Panama,
Zone 100, Box 9, Plot 8.

For the Quartermaster General:

Sincerely yours,

100-100-100-100

RECEIVED QUARTERMASTER GENERAL

WALTER A. CARLSON,
Lieutenant Colonel, U.S.A.,
Adjutant General

100-100-100-100

SPQYG 293
Fitzgerald, Joseph R. - Pfc.
S.N. 32,476,057

Address Reply to THE
QUARTERMASTER GENERAL.

13 November 1944.

Mrs. Katherine E. Fitzgerald,
216 Gansvoort Street,
Fulton, New York.

Dear Mrs. Fitzgerald:

Your letter of 11 October 1944 has been forwarded to this office for necessary action regarding the return of the remains and burial of your son, the late Private First Class Joseph R. Fitzgerald.

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 son 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.

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 son has not been received in this office. It is possible that months may elapse before information of this nature is received in this office, 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.

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

For The Quartermaster General:

Sincerely yours,

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

NOV 13 4 26 PM '44
MEMORIAL DIVISION

ccp
CCP

cbj

NOV 13 4 52 PM '44
Q.M.C. For
MAIL & RECORDS

SP4Y 283
Fitzgerald, Joseph R. - Pfc.
S.W. 82, 478, 087

13 November 1944

Address Reply to THE
QUARTERMASTER GENERAL

Mrs. Katherine E. Fitzgerald,
216 Gansvoort Street,
Palton, New York.

Dear Mrs. Fitzgerald:

Your letter of 11 October 1944 has been forwarded to this office for necessary action regarding the return of the remains and burial of your son, the late Private First Class Joseph R. Fitzgerald.

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 son 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.

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 son has not been received in this office. It is possible that records may elapse before information of this nature is received in this office, 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.

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

Very truly yours,
The Quartermaster General:

Sincerely yours,

MAYO A. DARLING,
Lt. Colonel, U.S.A.,
Assistant.

RECORDS DIVISION
NOV 13 4 56 PM '44

GCP

RECORDED
NOV 13 1944
CLERK
V 35 111

INVENTORY OF EFFECTS
(See AR 600-550)

Fitzgerald, Joseph R. 32476057
(Last name), (First), (M.D., unit) (ASN)

Rate a _____
(Grade) (Orgn or arm or service)

who died on the 14th day of June 1944

CLASS I--Saber, insignia, decorations, medals, campaign badges, watches, manuscripts, and other articles valuable chiefly as keepsakes.

Number	Articles	*Package Number

Handwritten signature

*To be filled out in case of shipment to The Adjutant General.

CLASS II--Other effects

Number	Articles
1	letters
1	silver cross
9	photos, 300 Francs
1	lighter, 30¢ Canadian
1	knife, dian
1	chain and medals, money, 1 Farthing

CLASS — Continued

Number	Articles

Money { Specie \$ _____
 (Notes \$ _____)

I certify that ~~the foregoing inventory~~ comprises all the effects of the decedent ~~as shown on the first page of this inventory and that the effects were delivered to~~

to _____
 (Give name and degree of relationship;
 if legal representative)

or beneficiary named by the decedent,
 so state)

*The effects of class I ~~have been delivered~~ ~~to the Adjutant General~~ and those of class II have been ~~delivered~~ to the Cl II Dump and that all funds have been delivered to the Fin O.

Raymond L. Dennis

(Station) **RAYMOND E. DENNIS**
1st Lt., QMC

(Date)

*Strike out words not applicable

Serial No. 32476057 Name FITZGERALD, JOS B

Grade _____ Rank _____

Organization _____

Address _____

Nearest Relative James Fitzgerald

Address 608 Hannibal St. Fulton NY

Killed in Action Yes Died of Disease _____

Date 6-16-44 Hospital _____

Battle Area 29th Information _____

Place of Burial Amer Cem #3 Lakeville

Point of Coordination _____

Description of Body sp

Members Missing _____

17

Signed _____

147909

SPJDK 201

JRM:ldf
8 January 1945

SUBJECT: Disposal of Pay Records

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

Transmitted herewith for disposal by personnel officers concerned, in accordance with par. 11d(2), AR 145-125 019, W.D., A.G.O. Form No. 28, (Soldier's Individual Pay Record) of:

Alaris, Vicente	3520442	Pvt.	Unknown
Crescenzi, Columbo H.	31311473	Pvt.	Unknown
Cummings, Howard (MHI)	33001002	Pfc.	Infantry
Gagryk, Edward J.	12084003	A/C	Air Corps
Elder, Damon C.	13086025	A/C	Air Corps
Davis, Young H.	14052660	A/C	Air Corps
Hilton, Harvey L.	35233765	Pvt.	Unknown
McGowan, Dominic H.	13007793	Pvt.	Unknown
Fitzgerald, Joseph R.	32476057	Pfc.	Infantry
Flanagan, Walter J.	3496383	Pvt.	Infantry

For the Effects Quartermaster:

G. H. GALVIN, JR.
Capt., Q.M.C.
Chief, Administrative Division

10 Incls—W.D., A.G.O. Form No. 28

yule

Jule 19

1-77909

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

IN REPLY REFER TO: 247909 A

JRM:HA:cms
January 6, 1945

fc
Mrs. Katherine E. Fitzgerald
216 Gansvoort Street
Fulton, New York

Dear Mrs. Fitzgerald:

The Army Effects Bureau has received from overseas some personal effects of your son, Private First Class Joseph R. Fitzgerald.

I am inclosing a check for \$6.05, representing funds which belonged to him. The remainder of the property is being forwarded to you in one package.

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

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

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

Yours very truly,

A. F. TIMMS
Administrative Assistant
Army Effects Bureau

1 Incl--
Check

NAME

FITZGERALD, JOSEPH R. PFC

BAY	PALLET	BOX	TALLY
49	71		6712
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	

CTN
Est. QM Form 43

CONTRACTOR'S COPY

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

FLAT GRANITE MARKER

Handwritten initials
Herein order for marker to be inscribed as follows:

INSCRIPTION: LATIN CROSS

Handwritten initials
JOSEPH R FITZGERALD / NEW YORK / PFC INFANTRY / WORLD WAR II /
FEB 22 1915 JUNE 14 1944

SHIP TO: JOSEPH H BEALE
FULTON
NEW YORK

R. R. STATION:

FOR:

R. R. STATION:

24 FEB 1948

APPLICANT: KATHERINE E FITZGERALD
216 GANSVOORT STREET
FULTON
NEW YORK

CEMETERY: ST MARY'S
FULTON
NEW YORK

HMB

QMG FORM 312
Rev. 1 NOV. 45

FILE

1 MAR 1948 *Handwritten initials*

MOORE BUSINESS FORMS, INC., NIAGARA FALLS, N. Y.

CONTRACTOR'S COPY

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

FLAT GRANITE MARKER

Herewith order for marker to be inscribed as follows:

INSCRIPTION: *LATIN CROSS*

JOSEPH R FITZGERALD / NEW YORK / PFC INFANTRY / WORLD WAR II /
FEB 22 1915 JUNE 14 1944

SHIP TO: JOSEPH H BEALE
FULTON
NEW YORK

R. R. STATION:

FOR:

R. R. STATION:

APPLICANT:

KATHERINE E FITZGERALD
216 GANSVOORT STREET
FULTON
NEW YORK

CEMETERY: ST MARY'S
FULTON
NEW YORK

HMB

OQMG FORM 312
Rev. 1 NOV. 45

INSPECTOR'S COPY

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

FLAT GRANITE MARKER

Herewith copy of order placed with Contractor for marker to be inscribed as follows:

INSCRIPTION: LATIN CROSS

JOSEPH R FITZGERALD / NEW YORK / PFC
FEB 22 1915

INFANTRY / WORLD WAR II /
JUNE 14 1944

SHIP TO: JOSEPH H BEALE
FULTON
NEW YORK

R. R. STATION:

FOR:

R. R. STATION:

APPLICANT: KATHERINE E FITZGERALD
216 GANSVOORT STREET
FULTON
NEW YORK

CEMETERY: ST MARY'S
FULTON
NEW YORK

HMB

OQMG FORM 312
Rev. 1 NOV. 45

WAGNER BUSINESS FORMS, INC. - NIAGARA FALLS, N. Y.

INSPECTOR'S COPY

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

FLAT GRANITE MARKER

Herewith copy of order placed with Contractor for marker to be inscribed as follows:

INSCRIPTION: LATIN CROSS

JOSEPH R FITZGERALD / NEW YORK / PFC INFANTRY / WORLD WAR II /
FEB 22 1915 JUNE 14 1944

SHIP TO: JOSEPH H BEALE
FULTON
NEW YORK

R. R. STATION:

FOR:

R. R. STATION:

APPLICANT: KATHERINE E FITZGERALD
216 GANSVOORT STREET
FULTON
NEW YORK

CEMETERY: ST MARY'S
FULTON
NEW YORK

HMB

DDMG FORM 312
Rev. 1 NOV. 45

MOORE BUSINESS FORMS, INC., NIAGARA FALLS, N. Y.

COPY OF INSCRIPTION
TO BE PLACED ON MARKER

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

FLAT GRANITE MARKER

INSCRIPTION: *LATIN CROSS*

JOSEPH R FITZGERALD / NEW YORK / PFC
FEB 22 1915

INFANTRY / WORLD WAR II /
JUNE 14 1944

SHIP TO: JOSEPH H BEALE
FULTON
NEW YORK

R. R. STATION:

FOR:

R. R. STATION:

APPLICANT: KATHERINE E FITZGERALD
216 GANSVOORT STREET
FULTON
NEW YORK

CEMETERY: ST MARY'S
FULTON
NEW YORK

HMB

OQMG FORM
Rev. 1 NOV. 45 312

MOORE BUSINESS FORMS, INC., NIAGARA FALLS, N. Y.

**COPY OF INSCRIPTION
TO BE PLACED ON MARKER**

**WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.**

FLAT GRANITE MARKER

Below you will find a copy of the inscription taken from the OFFICIAL RECORDS as it will appear on the flat granite marker you ordered. CHECK IT CAREFULLY before the marker is manufactured. Check the INSCRIPTION, NAME AND LOCATION OF CEMETERY. Check with CEMETERY OFFICIALS and make sure a government flat granite marker will be allowed at grave. Check NAME AND ADDRESS OF THE PERSON to whom marker is to be shipped. After you have CORRECTED ANY ERRORS, sign and return promptly in the inclosed envelope which requires no postage.

UNTIL YOU RETURN THIS SLIP THE FLAT GRANITE MARKER CANNOT BE ORDERED. DO NOT DELAY-SIGN & RETURN TODAY.

INSCRIPTION: LATIN CROSS

**JOSEPH R FITZGERALD / NEW YORK / PFC INFANTRY / WORLD WAR II /
FEB 22 1915 JUNE 14 1944**

SHIP TO: **JOSEPH H BEALE
FULTON
NEW YORK**

R. R. STATION:

FOR:

R. R. STATION:

APPLICANT: **KATHERINE E FITZGERALD
216 GANSVOORT STREET
FULTON
NEW YORK**

CEMETERY: **ST MARY'S
FULTON
NEW YORK**

HMB

**QGMG FORM
Rev. 1 NOV. 45 312**

APPROVAL AND ACCEPTANCE

SIGNATURE

rev. 10-1-40 Death Rpt 7 Sept 44 + 2957 WW II

ORIGINAL

APPLICATION FOR HEADSTONE OR MARKER

(Please make out and return in duplicate)

FLAT GRANITE

CHECK TYPE REQUIRED

(See Instructions attached)

- UPRIGHT MARBLE HEADSTONE
- FLAT MARBLE MARKER
- FLAT GRANITE MARKER
- BRONZE MARKER (NOTE RESTRICTIONS)

ENLISTMENT DATE
26 September 1942

DISCHARGE DATE
14 June 1944
Killed in action

SERIAL No.
A 32 476 057

EMBLEM (Check one)

- CHRISTIAN
- HEBREW
- NONE

NAME (Last, First, Middle Initial)
FITZGERALD, JOSEPH R.

STATE
New York

RANK
PFC

COMPANY
101st Airborne Div

DATE OF BIRTH (Month, Day, Year)
23 Feb 1915

DATE OF DEATH (Month, Day, Year)
14 June 1944

U. S. REGIMENT, STATE ORGANIZATION, AND DIVISION
Private First Class
101st Airborne Division (over)
(not shown)

NAME OF CEMETERY
St. Marys Cemetery

LOCATION (City and State)
Fulton, New York

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)

Joseph H. Seale
(SIGNATURE OF CONSIGNEE)

NEAREST FREIGHT STATION (City and State)
Fulton, New York

POST OFFICE ADDRESS OF CONSIGNEE
Fulton, New York

DO NOT WRITE HERE

FOR VERIFICATION
FEB 18 1944

ORDERED

R/L
Cancel

SHIPPED

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.

Katherine E. Fitzgerald
APPLICANT'S SIGNATURE

ADDRESS (Street, City, State)
216 Gansvoort Street, Fulton, N.Y.

DATE OF APPLICATION

OQMG FORM 623
REV 15 APR 47

FILE

IMPORTANT—Complete Reverse Side
1 MAR 1948

16-11453-6 GPO

FORM 11453-4

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

Date Feb 16, 1948

(Signature of superintendent, section, or contractor)
[Handwritten Signature]

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

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

401 GLEBE Co. Right. 82 R/S Co. [unclear] [unclear] Ppt.

FEB 19 1948 LISI

WW II

DUPLICATE

FLAT GRANITE

CHECK TYPE REQUIRED <small>(See Instructions attached)</small> <input type="checkbox"/> UPRIGHT MARBLE HEADSTONE <input type="checkbox"/> FLAT MARBLE MARKER <input checked="" type="checkbox"/> FLAT GRANITE MARKER <input type="checkbox"/> BRONZE MARKER (NOTE RESTRICTIONS)		APPLICATION FOR HEADSTONE OR MARKER <small>(Please make out and return in duplicate)</small>		
ENLISTMENT DATE 26 September 1942 DISCHARGE DATE Killed in action 14 June 1944		SERIAL No. A 32 476 057		EMBLEM (Check one) <input checked="" type="checkbox"/> CHRISTIAN <input type="checkbox"/> HEBREW <input type="checkbox"/> NONE
NAME (Last, First, Middle Initial) FITZGERALD, JOSEPH R.		STATE New York	RANK PFC	COMPANY 101st Airborne Div
DATE OF BIRTH (Month, Day, Year) 22 Feb 1915		DATE OF DEATH (Month, Day, Year) 14 June 1944		
NAME OF CEMETERY M St. Marys Cemetery		U. S. REGIMENT, STATE ORGANIZATION, AND DIVISION Private First Class-U. S. Army 101st Airborne Division		
LOCATION (City and State) Fulton, New York		NEAREST FREIGHT STATION (City and State) Fulton, New York		
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) <i>Joseph R. Seal</i> <small>(SIGNATURE OF CONSIGNEE)</small>		POST OFFICE ADDRESS OF CONSIGNEE Fulton, New York		
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 FEB 18 1948		APPLICANT'S SIGNATURE <i>Katherine E. Fitzgerald</i>		
ORDERED <i>Chancel</i>		DATE OF APPLICATION		
B/L		ADDRESS (Street, City, State) 216 Gansvoort St. Fulton, N.Y.		
SHIPPED		IMPORTANT—Complete Reverse Side		

Should be done 7-10

OQMG FORM 623
REV 15 APR 47

FILE

1 MAR 1948

16-11453-6 GPO

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)

Harold J. Flynn
(Signature of superintendent, sexton, or caretaker)

Date Feb 10, 1948

16-11453-4

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

ORIGINAL ORDER

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

FLAT GRANITE MARKER

Below you will find a copy of the inscription taken from the OFFICIAL RECORDS as it will appear on the flat granite marker you ordered. CHECK IT CAREFULLY before the marker is manufactured. Check the INSCRIPTION, NAME AND LOCATION OF CEMETERY. Check with CEMETERY OFFICIALS and make sure a government flat granite marker will be allowed at grave. Check NAME AND ADDRESS OF THE PERSON to whom marker is to be shipped. After you have CORRECTED ANY ERRORS, sign and return promptly in the inclosed envelope which requires no postage. UNTIL YOU RETURN THIS SLIP THE FLAT GRANITE MARKER CANNOT BE ORDERED. DO NOT DELAY-SIGN & RETURN TODAY.

INSCRIPTION: LATIN CROSS

JOSEPH R FITZGERALD / NEW YORK / PFC
FEB 22 1915

INFANTRY / WORLD WAR II /
JUNE 14 1944

SHIP TO: JOSEPH H BEALE
FULTON
NEW YORK

R. R. STATION:

FOR:

R. R. STATION:

24 FEB 1948

APPLICANT:

KATHERINE E FITZGERALD
216 GANSVOORT STREET
FULTON
NEW YORK

CEMETERY: ST MARY'S
FULTON
NEW YORK

HMB

QMG FORM 312
Rev. 1 NOV. 45

FILE ✓ 1 MAR 1948
APPROVAL AND ACCEPTANCE

SIGNATURE

Over

Fulton ny
Feb. 27. 48

Dear Sirs

Since ordering this marker, I have
decided, I would rather purchase a marker
to correspond with the one I already
have on family plot,

Please cancel my order

Respectfully

Mrs. Katherine & Fitzgerald



CCG 1008

NEW YORK
FULTON
ST MARK'S

NEW YORK
FULTON

auth
file over

APPROVAL AND ACCEPTANCE

over

JOSEPH H. BEALE
OSWEGO COUNTY VETERANS SERVICE OFFICER
FULTON, NEW YORK

13 February 1948

Office of the Quartermaster General
Memorial Division
Washington 25, U. C.

293
Re: Joseph R. Fitzgerald *jd*
Deceased Veteran
World War II

Dear Sir;

Enclosed please find OQMG, Form 623, Application for Headstone or Marker, for the above-named deceased veteran.

Kindly advise on any action that is taken.

Very truly yours,

Joseph H. Beale
JOSEPH H. BEALE
Oswego County Veterans Service Officer

JHB:MG
Encl 1

FILE

1 MAR 1948

Mr. Tammy

JOSEPH H. BEALE
DISTRICT ATTORNEY
LUTON, NEW YORK

To: [Faint recipient name]

By: [Faint name]

Witness: [Faint name]

Date: [Faint date]

[Faint body text]

[Faint signature]



1948 FEB 17 PM 2 23

METERNAL BRANCH

RECEIPT OF REMAINS

DISTRIBUTION CENTER SCENECTADY GEN DIST DEPOT US ARMY DAY LETTER
SCENECTADY, NEW YORK

DLR AND REPORT ANY DELIVERY CHARGES ROUTINE

293

REMAINS CONSIGNED TO: THOMAS E. NEALIS
518 CAYUGA STREET
FULTON, NEW YORK

REMAINS OF THE LATE PRIVATE FIRST CLASS JOSEPH R FITZGERALD ASN 32 476 057
BEING SHIPPED TO YOU ACCOMPANIED BY A MILITARY ESCORT ON TRAIN NUMBER 337 NYC
RAILROAD LEAVING ALBANY 2:54 AM 4 FEBRUARY AND DUE TO ARRIVE FULTON STATION
7:30 AM RAILROAD TIME 4 FEBRUARY. REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT
REMAINS AT STATION UPON ARRIVAL AND THAT YOU IMMEDIATELY PASS THIS INFORMATION
ON TO NEXT OF KIN.

R. D. BLANKENHORN
LT. COLONEL, QMC

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

THIS 4 DAY OF February 19 48
DAY MONTH

T/S Charles W. Long
WITNESS (Escort)

Thomas E. Nealis
CONSIGNEE

*file
NAT
333 am
2/27/48
Richardson
R + R 121*

RECEIPT OF REMAINS

RECEIVED OF THE UNITED STATES DEPARTMENT OF THE ARMY
WASHINGTON, D.C. 20315

THIS RECEIPT IS VALID ONLY IF SIGNED BY THE PROPER OFFICER
OF THE ARMY AND THE DELIVERY OFFICER

THESE REMAINS ARE THE PROPERTY OF THE UNITED STATES DEPARTMENT OF THE ARMY
AND ARE TO BE KEPT IN A SAFE PLACE UNTIL THE ORDER OF THE ARMY
OFFICIALS IS RECEIVED.

THESE REMAINS ARE THE PROPERTY OF THE UNITED STATES DEPARTMENT OF THE ARMY
AND ARE TO BE KEPT IN A SAFE PLACE UNTIL THE ORDER OF THE ARMY
OFFICIALS IS RECEIVED.

BY: _____
DATE: _____

BHR *Beall*

DISINTERMENT DIRECTIVE

1	SECTION A — NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER 3539 01231	DATE 15 10 47 DAY MONTH YEAR		
	NAME FITZGERALD JOSEPH R	SERIAL NUMBER 32476057	RANK PFC	ARM 1	DATE OF DEATH DAY MONTH YEAR	
CEMETERY LA CAMBE ISIGNY				1	DISPOSITION OF REMAINS 2300 02 CODE DIST. PT.	
PLOT C	ROW 9	GRAVE 180	COUNTRY FRANCE	CAUSE OF DEATH 2		

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE THOMAS E. NEALIS 518 CAYUGA STREET FULTON, NEW YORK	NAME AND ADDRESS OF NEXT OF KIN KATHERINE E. FITZGERALD (MOTHER) 216 GANSWORTH STREET FULTON, NEW YORK
---	--

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME FITZGERALD, Joseph R.	SERIAL NUMBER 32476057	RANK Pfc	DATE OF DEATH 14 June 44	DATE DISTINTERRED 13 Nov 47
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION USAGF	RELIGION Cath	IDENTIFICATION VERIFIED BY WM. J. SMITH, 1st Lt., CE NAME AND TITLE	

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Fatigues	CONDITION OF REMAINS Advanced dec omposition
OTHER MEANS OF IDENTIFICATION None	MINOR DISCREPANCIES <i>1</i> None
REMAINS PREPARED AND PLACED IN CASKET DATE 26 Nov 47 BY V. K. SORENSON	
CASKET SEALED BY V. K. SORENSON	EMBALMER (Signature) <i>V. K. Sorenson</i> E.F.V.
CASKET BOXED AND MARKED DATE 26 Nov 47 BY H. J. CUMMINGS	SHIPPING ADDRESS VERIFIED BY JAMES F. NABORS, MAJOR, INF.

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

James F. Nabors
JAMES F. NABORS, MAJOR, INF.

SIGNATURE OF GRS INSPECTOR

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

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC LA CAMBE		TO CASKEATING POINT A, CHERBOURG	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER JOSEPH GAINNEY, Cpl.	
SIGNATURE OF SHIPPER <i>W. T. Dailey</i> W. T. DAILEY, CAPT., QMC	DATE 24 Nov 47	SIGNATURE OF RECEIVER <i>James F. Nabors</i> JAMES F. NABORS, MAJOR, INF.	DATE 24 Nov 47

2. SHIPPED

FROM CASKEATING POINT A, CHERBOURG		TO PORT UNIT, CHERBOURG	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>James F. Nabors</i> JAMES F. NABORS, MAJOR, INF.	DATE	SIGNATURE OF RECEIVER <i>John E. Hendry Jr.</i> JOHN E. HENDRY, JR., MAJOR, CAC	DATE

3. SHIPPED

FROM PORT UNIT CHERBOURG		TO NYPE	
KIND OF CONVEYANCE USAT		NAME OF CONVOYER CPL ERIC G. GIBSON	
SIGNATURE OF SHIPPER <i>Everett N. Ciampo</i> EVERETT N. CIAMPO	DATE 2 Jan. 48	SIGNATURE OF RECEIVER <i>Robert I. Urffer</i> ROBERT I. URFFER, MAJOR, QMC	DATE 2 Jan. 48

4. SHIPPED

FROM		TO NYPE	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>Colonel T. G. McKinnon</i>	DATE	SIGNATURE OF RECEIVER <i>Colonel T. G. McKinnon</i> COLONEL, T. G.	DATE JAN 22 1948

5. SHIPPED

FROM NYPE		TO D C #2	
KIND OF CONVEYANCE REGION MEM AOBK Train		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>James M. Johnson</i> JAMES M. JOHNSON COLONEL, T. G.	DATE 1/26/48	SIGNATURE OF RECEIVER <i>James M. Johnson</i> JAMES M. JOHNSON Capt., QMC	DATE 1-27-48

6. SHIPPED

FROM C 2 180 SERVICE		TO S	
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

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
SPACE ABOVE FOR SIGNAL CENTER ONLY					GROUP COUNT GR
FROM: (Originator) SCHEENECTADY GEN DIST DEPOT U S ARMY SCHEENECTADY, NEW YORK			SECURITY CLASSIFICATION UNCLASSIFIED		
ACTION TO: DLK AND REPORT ANY DELIVERY CHANGES			PRECEDENCE FOR ACTION INFORMATION ROUTINE		
<p>KATHERINE B FITZGERALD</p> <p>216 GANSWORTH STREET</p> <p>FULTON NEW YORK</p>			<input checked="" type="checkbox"/> ORIGINAL MESSAGE		
INFORMATION TO:			REFERS TO ANOTHER MESSAGE IDENTIFICATION CLASSIFICATION		
<p>THIS HEADQUARTERS HAS BEEN ADVISED THAT THE REMAINS OF LATE</p> <p style="text-align: center;">PRIVATE FIRST CLASS JOSEPH B FITZGERALD</p> <p>ARE ENROUTE TO THE UNITED STATES. RECORDS OF THIS OFFICE INDICATE YOU WISH REMAINS DELIVERED TO THOMAS E NEALIS, 518 CAYUGA STREET, FULTON, NEW YORK</p> <p>PLEASE INSTRUCT FUNERAL DIRECTOR TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL. WE REGRET IT IS NOT POSSIBLE AT THIS TIME TO GIVE YOU A DEFINITE DELIVERY DATE HOWEVER THREE DAYS PRIOR TO SHIPMENT FROM THIS DEPOT YOUR FUNERAL DIRECTOR WILL BE NOTIFIED BY TELEGRAM OF RAIL ROUTING AND SCHEDULED TIME REMAINS WILL ARRIVE AT RAILROAD STATION. HE WILL BE REQUESTED TO PASS THIS INFORMATION TO YOU SO THAT YOU MAY MAKE FUNERAL ARRANGEMENTS. REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. WITHIN 48 HOURS OF DATE OF THIS MESSAGE PLEASE CONFIRM BY TELEGRAM COLLECT TO SCHEENECTADY GENERAL DISTRIBUTION DEPOT ATTENTION AMERICAN GRAVES REGISTRATION DIVISION SCHEENECTADY NEW YORK ABOVE DELIVERY INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS. PLEASE BE ADVISED THAT IT WILL NOT BE POSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF THE 48 HOUR PERIOD. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. IF YOU</p>					
SECURITY CLASSIFICATION			AUTHORIZATION		
ORIGINATING AGENCY			SIGNATURE		
SYMBOL		DATE-TIME GROUP	OFFICIAL TITLE		PAGE 1 OF 2

WD AGO FORM 11-168
15 JUN 1945This form supersedes WD AGO Form 11-168, 23 Aug 44,
and WD AGO Form 801, 12 Mar 43, which are obsolete.

16-45801-1

U. S. GOVERNMENT PRINTING OFFICE

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	
SPACE ABOVE FOR SIGNAL CENTER ONLY					
FROM: (Originator)			SECURITY CLASSIFICATION		
ACTION TO:			PRECEDENCE FOR		
•			ACTION		
•			INFORMATION		
•			<input type="checkbox"/> ORIGINAL MESSAGE		
INFORMATION TO:			REFERS TO ANOTHER MESSAGE		
			IDENTIFICATION		
			CLASSIFICATION		
<p>YOU SHOULD DESIRE MILITARY HONORS AT FUNERAL YOU SHOULD ASK ANY LOCAL PATRIOTIC OR VETERANS ORGANIZATION TO MAKE ARRANGEMENTS. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.</p> <p style="text-align: center;">R. D. BLANKENHORN LT. COLONEL, QMC</p>					
SECURITY CLASSIFICATION			AUTHORIZATION		
ORIGINATING AGENCY			SIGNATURE		
SYMBOL	DATE-TIME GROUP	OFFICIAL TITLE		PAGE 2 OF 2	

MESSAGEFORM		MESSAGE CENTER No.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT		
		CALLS V	STA. SER. No. NR	PRECEDENCE	TRANSMISSION INSTRUCTIONS	ORIGINATOR JAN 30 3 24 PM 1947
ACTION	INFORMATION		EXEMPT	OPERATING SIGNALS		GROUP COUNT GR
SPACE ABOVE FOR SIGNAL CENTER ONLY						
FROM: (Originator)			SECURITY CLASSIFICATION			
ACTION TO: . . . INFORMATION TO: THOMAS E. HEALIS 516 CAYUGA STREET FULTON, NEW YORK			SCHENECTADY GEN DIST DEPOT US ARMY			
			SCHENECTADY, NEW YORK			
			DLR AND REPORT ANY DELIVERY CHARGES			
			DAY LETTER			
			PRECEDENCE FOR			
			ACTION INFORMATION			
			<input type="checkbox"/> ORIGINAL MESSAGE			
			REFERS TO ANOTHER MESSAGE			
			IDENTIFICATION CLASSIFICATION			
<p>REMAINS OF THE LATE PRIVATE FIRST CLASS JOSEPH R FITZGERALD ASN 32 476 067 BEING SHIPPED TO YOU ACCOMPANIED BY A MILITARY ESCORT ON TRAIN NUMBER 337 NYC RAILROAD LEAVING ALBANY 2:54 AM 4 FEBRUARY AND DUE TO ARRIVE FULTON STATION 7:30 AM RAILROAD TIME 4 FEBRUARY. REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS AT STATION UPON ARRIVAL AND THAT YOU IMMEDIATELY PASS THIS INFORMATION ON TO NEXT OF KIN.</p> <p style="text-align: right;">R. D. BLANKENHORN LT. COLONEL, QMC</p>						
SECURITY CLASSIFICATION			AUTHORIZATION			
ORIGINATING AGENCY			SIGNATURE			
SYMBOL	DATE-TIME GROUP		OFFICIAL TITLE		PAGE OF	

RESTRICTED

INSPECTION CHECKLIST
(FOR USE AT DISTRIBUTION POINT)

NAME FITZGERALD, JOSEPH R	RANK PFC	SERIAL NUMBER ASN32476057
-------------------------------------	--------------------	-------------------------------------

NEXT OF KIN Katherine E. Fitzgerald (Mother)	ADDRESS 216 Gansworth St. Fulton, N.Y.
--	--

SHIPPING CASE - General Appearance (Check ONLY Discrepancies)	CONDITION OF SHIPPING CASE (Check one) <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY
--	---

FINISH (Exterior)	REMARKS REFINISH 1 NEW DRAW BOLT
FINISH (Interior)	
HANDLES	
HANDLE BOLTS	
STENCILING - NAMEPLATE	

CASKET - General Appearance (Check ONLY Discrepancies)	CONDITION OF CASKET (Check one) <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY
---	--

FINISH (Exterior)	REMARKS OK
HANDLES AND FASTENINGS	
STENCILING - NAMEPLATE	
CAM LOCKS (Sealing)	
ODOR OR MOISTURE	

ROUTED THROUGH

<input type="checkbox"/> MORTUARY OPERATING ROOM	<input type="checkbox"/> MORTUARY REPAIR SHOP
--	---

CONDITION OF REMAINS <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY	CASKET REPAIRED <input type="checkbox"/>
NECESSARY DISINFECTION (Explain)	CASKET EXCHANGED <input type="checkbox"/>
	SHIPPING CASE REPAIRED <input type="checkbox"/>
	SHIPPING CASE EXCHANGED <input type="checkbox"/>
	REMARKS

TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTING OFFICER
				1/27/48	Smith

REMARKS

Consignee

Thomas E. Nealis
518 Cayuga St.
Fulton, N.Y.

Final Inspection by: *SW Smith* Date **2/3/48**

C-1-17

RESTRICTED

Vol. # 6182

CERTIFICATE

(AR 30-1830)

H. A. BULLOCK
Capt., F.D.
SCHENECTADY, N.Y.
Sym. No. 212-450
Sta. No. 820

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.

FEB 1948

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 <i>293</i> Joseph E. Fitzgerald		GRADE PFC	SERIAL NUMBER A 32476057	COMPONENT USAOF
I certify that the sum of \$ <u>87.00</u> 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 St. Marys Cemetery		CITY OR COUNTY Fulton	STATE New York	
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: Schenectady Gen. Dist. Depot U.S. Army Schenectady, N. Y. ATTN. AGR. DIVISION		SIGNATURE OF CLAIMANT <i>Katherine E. Fitzgerald</i>		
		ADDRESS OF CLAIMANT (City, Street or RFD, and State) 216 Geneva Street, Fulton, NY		
		RELATIONSHIP TO DECEDENT Mother	DATE 2/9/48	

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: <i>Mail to OAGC</i>		SIGNATURE OF CLAIMANT		
		ADDRESS OF CLAIMANT (City, Street or RFD, and State)		
		RELATIONSHIP TO DECEDENT	DATE	

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

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.

Eatherine E. Fitzgerald 216 Gansvoort Street Fulton, New York

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.

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

142,909

REPORT OF DEATH

DATE 7 Sept 1944
Feb 4635

FULL NAME Fitzgerald, Joseph R.			ARMY SERIAL NUMBER 32,476,057			GRADE Pfc							
HOME ADDRESS Fulton, New York			ARM OR SERVICE Infantry			DATE OF BIRTH 22 Feb 1915							
PLACE OF DEATH European Area			CAUSE OF DEATH Killed in action			DATE OF DEATH 14 Jun 1944							
STATION OF DECEASED European Area			DATE OF ENTRY ON CURRENT ACTIVE SERVICE 12 Sept 1942			LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS							
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mr. James F. Fitzgerald (brother) 608 Hannibal St., Fulton, N. Y.													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Katherine E. Fitzgerald (mother) 216 Gansvoort St., Fulton, N. Y. James F. Fitzgerald (brother) 608 Hannibal St., Fulton, N. Y.													
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
											<input checked="" type="checkbox"/>		

ADDITIONAL DATA AND/OR STATEMENT

The individual named in this report is shown by the records of the War Department to have been absent in a missing in action status on 13 June 1944 and subsequently reported killed in action on 14 June 1944, such absence was terminated on 3 September 1944 on which date evidence 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.
Z. O. C. M. G.	O. F. D.	ARMY EFFECTS BUREAU
G. A. C.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BATTLE
 NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:

John T. Winn
John T. Winn ADJUTANT GENERAL

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

147909

—BATTLE CASUALTY REPORT

NAME		SERIAL NUMBER	GRADE	ARM OR SERVICE	REPORTING THEATRE
FITZGERALD JOSEPH R		32476057	PEC	INF	ETO
PLACE OF CASUALTY	DATE OF CASUALTY			FLYING OR JUMPING STAT	TYPE OF CASUALTY
	DAY	MONTH	YEAR		
FRANCE	13	JUN	44		MIA
					SHIPMENT NUMBER
					130

NAME AND ADDRESS OF EMERGENCY ADDRESSEE

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

MR.-MRS.-MISS—FIRST NAME—MIDDLE INITIAL—LAST NAME	RELATIONSHIP	DATE NOTIFIED
MR JAMES P. FITZGERALD	BROTHER	20 July 44
NO. AND NAME OF STREET—CITY—STATE		
608 HANNIBAL STREET FULTON NEW YORK		

REMARKS:

CORRECTED COPY 20 July 44 el



ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED FORM 43 AG 201 REQ _____

CASUALTY BRANCH FILE ATTACHED _____ OR CHARGED TO _____ DATE _____

PREVIOUSLY REPORTED NO YES _____ (AS INDICATED BELOW):

FILE NO.	MESSAGE NO.	TYPE	DATE AND AREA	E. A. NOTIFIED

FORWARDED TO SPEC. IDEN. TELEGRAM WOUNDED LETTER CORRES. S. R. & D. CERTIF. M. & M. NON-DEL.

REPORT NOT VERIFIED _____ NO FORM 43 _____ NO CAS. BR. FILE _____ CHECKED BY Hindman REVIEWED BY _____

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

ACCT. AREA	CASUALTY STATUS	ORIGINAL CAS. DATE			MESSAGE NO.	LATEST CAS. DATE			REFERENCE AREA	SER. POS.	RESIDENCE		CORP	RICE											
		DAY	MO.	YR.		DAY	MO.	YR.			STATE	COUNTY													
34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59

DISTRIBUTION "A" 52 COPIES

(ALL TYPES OF CASUALTIES PERTAINING TO MILITARY PERSONNEL, EXCEPT WOUNDED.)
COPIES FURNISHED: SEE CASUALTY BRANCH MEMORANDUM NO. 48, 1944.

DISTRIBUTION "B" _____ COPIES

(ALL WOUNDED MILITARY PERSONNEL AND ALL TYPES OF CASUALTIES PERTAINING TO CIVILIANS WHO ARE W. D. EMPLOYEES, EMPLOYEES OF W. D. CONTRACTORS AND OTHERS SUBJECT TO MILITARY LAW.)
COPIES FURNISHED: SEE CASUALTY BRANCH MEMORANDUM NO. 48, 1944.

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

RESTRICTED
REPORT OF BURIAL
TM 10-630 AND AR 30-1615

28058
17 June 1944

Date OCT 10 1944

293

Fitzgerald, Joseph R
 Last Name First Initial Rank
 Unit: COA 401 GLDR INF. REGT. (PR)
 Organization: 82 A/B DIV 686
 Date of Death: 14 June 1944
 Cause of Death: E W in abdomen
 Place of Death: 1300 hrs. 17 June 1944 La Cambe
 Name of Cemetery: Amer Cem No 3
 Name or Coordinates of Location: La Cambe
 Time and Date of Burial: 180 9
 Grave Number Row Number
 Plot Number: C
 Type of Marker: Stake

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?

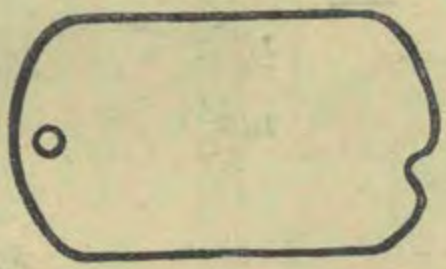
Identification Tag

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

Who is buried on:

Deceased's Right:	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	Edmonson G	34369985			179

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



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

Emergency Addressee: James F. Fitzgerald
 Name
 608 Hannibal St., Fulton, N.Y.
 Address
 Religion: Catholic

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

- letters
- 1 silver cross
- 9 photos
- 1 lighter
- 1 knife
- 1 chain and medals
- 300 Francs
- 30 Canadian money
- 1 Farthing

Signature of Officer or other person reporting burial
E. H. HOSFORD

Verified by G.R.S. Officer

HQ. 508. 20.5.44. 150M/8/25715

1ST LT. G.M.C.
E. H. HOSFORD

14 NOV 1944

File
CB

IF DECEASED UNIDENTIFIED

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

- | | |
|----------------|--------------------------|
| Height: | Laundry Marks: |
| Weight: | Number of Rifle: |
| 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.

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

Left Hand

2

1

Thumb

Right Hand

2

1

Thumb

TOOTH CHART

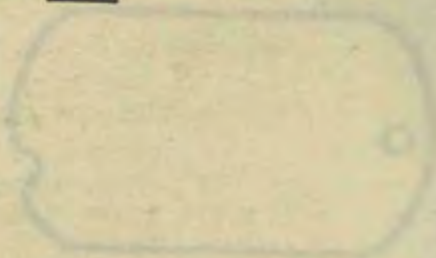
		Deceased's Left								
		8	7	6	5	4	3	2	1	8
		8	7	6	5	4	3	2	1	8
Upper	Lower									

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

Characteristics:

Other Data:

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



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

59

REPORT OF DEATH

DATE 7 Sept 1944
Feb 4633

FULL NAME <i>293</i> Fitzgerald, Joseph R.		ARMY SERIAL NUMBER 32,476,057	GRADE Pfc
HOME ADDRESS <i>hs</i> Fulton, New York		ARM OR SERVICE Infantry	DATE OF BIRTH 22 Feb 1915
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH 14 Jun 1944
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 12 Sept 1942	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mr. James F. Fitzgerald (brother) 608 Hannibal St., Fulton, N. Y.			
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Katherine E. Fitzgerald (mother) 216 Gansvoort St., Fulton, N. Y. <i>OK</i> James F. Fitzgerald (brother) 608 Hannibal St., Fulton, N. Y.			
INVESTIGATION MADE?		IN LINE OF DUTY	DWN MISCONDUCT
YES	NO	YES	NO
WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE	
YES	NO	YES	NO
IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO
	X		

ADDITIONAL DATA AND/OR STATEMENT

The individual named in this report is shown by the records of the War Department to have been absent in a missing in action status on 13 June 1944 and subsequently reported killed in action on 14 June 1944, such absence was terminated on 3 September 1944 on which date evidence of death was received by the Secretary of War from a commander in the European Area.

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

BATTLE
 NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:

John T. Winn
John T. Winn
ADJUTANT GENERAL

3 OCT 1944 FILE

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Katherine E. Fitzgerald
216 Gansvoort Street
Fulton, New York

Effects of:
Name Pfc. Joseph R. Fitzgerald
ASN 32476057
Case No. 147909 D
Wt.

*File
F&H*

DATE 8 March 1945

REMARKS: JRM:HA:vf

J. Schumann
FOR: Effects Quartermaster

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
 Warehouse Division
 Files Branch, Adm. Div.

REMARKS:

WCH

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

MAR 13 1945

MAR 10 1945

mk
Shipping Clerk

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mrs. Katherine E. Fitzgerald
216 Gansvoort Street

Pfc. Joseph R. Fitzgerald: ^{Ship to:} Fulton, New York

32476057

Effects of
Name 147909 D
ASN
Case No.
Wt.

Ship Via FRANKED G B/L NO. _____

Date 3 January 1945
JRM:EA:djs

B. Hurst
For Effects Quartermaster

PACKAGES SHIPPED

1 pkg

Franked _____
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____

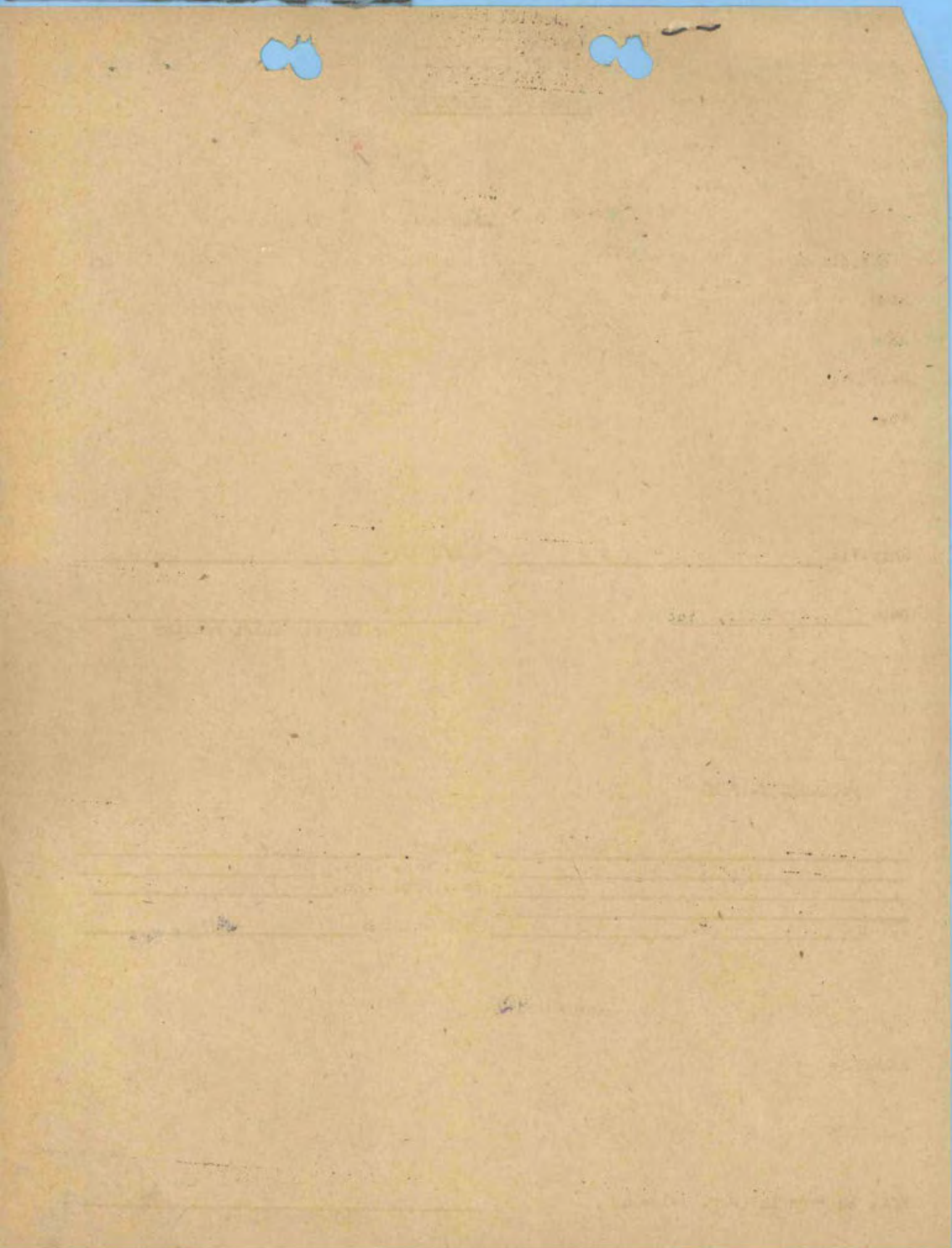
TOTAL 1 WT. _____ Date Shipped JAN 11 1945

JAN 10 1945

REMARKS:

JAN 13 1945

ARJ
Shipping Clerk



JRM:EA:djs

ent

ROUTING

- 1. ~~A. F.~~
- 2. A. F. TIMMS
- 3. Accounting *ent*
- 4. Warehouse

Case No. 147,909 A

Attach Bureau Check:

Account No. 40335 Amount \$6.05

Account No. _____ Amount _____

Payable to:

Katherine E. Fitzgerald

Helen Alexander

(Correspondent)

Check No. 42180

Initials emh

40335

147909

January 10 45

Katherine E. Fitzgerald

6.05

Six and 05/100

Major Q.M.C.
Asst.

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

Sheet 1 of 1 Sheets

Deceased
Missing _____
A.W.O.I. _____
P.O.W. _____
Abandoned _____

INVENTORY

Flat _____ Box _____

Shown on Tally In as _____

TALLY IN NO. _____ INVENTORY DATE 9/31/44 CASE NO. 147,909

EFFECTS OF Joseph R. Fitzgerald RANK _____

ARMY SERIAL NO. 32476057 ORG. _____

CONSIGNOR D-14 N.K.

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

Package No.	Article Description	Remarks
<u>1</u>	<u>605</u>	Included in one
ENVELOPE	<u>2/c # 40335</u>	U. S. Treasurer's Check
	<u>en</u>	# <u>3860</u>
	<u>ck # 42180</u>	dated <u>16 Aug 44</u>
	<u>en</u>	Symbol <u>211-640</u>
		Amount <u>14 727.29</u> Payable to
		<u>627M</u>
		Indorsed to Effects QM
		<u>List 203 to acct file</u>
	<u>[Signature]</u>	

JAN 11 1945

Warehouse Space _____ Inventoried By [Signature]
Locked Storage Space _____ Office _____ Packed By _____

Fitzgerald, Jas.

SHEET <u>1</u> OF <u>1</u> SHEETS	ARMY EFFECTS BUREAU INVENTORY		DECEASED <input checked="" type="checkbox"/>
BOX NUMBER <u>38</u> <i>Rel 56 - Box 25</i>	ORIGINAL NUMBER OF PACKAGES <u>1</u>		MISSING <input type="checkbox"/>
TALLY NUMBER <u>5486</u>	INVENTORY DATE <u>12-23-44</u>	CASE NUMBER <u>147,909</u>	POW <input type="checkbox"/>
EFFECTS OF <u>Joseph R Fitzgerald</u>		RANK <u>P.F.C.</u>	ABANDONED <input type="checkbox"/>
A.S.N. <u>32476057</u>	ORGANIZATION <u>Co A 401st glider Inf</u>		
PACKAGE DESCRIPTION <u># 1 Pkg</u>			

CLOTHING	PERSONAL ITEMS	CONTAINERS
BELT	BRACELET, IDENTIFICATION	BAGS, TRAVEL
BELT, MONEY (NO MONEY)	BRUSHES	BAGS, CLOTH
CAPS	GLASSES	BILLFOLD (NO MONEY)
CLOTH, WASH	KNIVES <u>✓</u>	CASE,
COATS	LIGHTERS <u>✓</u>	FOOTLOCKER
FOOTWEAR, PR.	MISC. INSIGNIA	KIT, SEWING
GLOVES	MISC. ITEMS	KIT, TOILET
HANDKERCHIEFS	PEN, FOUNTAIN	KIT, WRITING
JACKETS	PENCIL, MECHANICAL	
OVERCOATS	PIPES	PAPERS AND MISC.
SHIRTS	RELIGIOUS ARTICLES <u>✓</u>	BOOKS
SOCKS	RIBBONS, DECORATION	FILMS AND NEGATIVES
TIES	RINGS	LETTERS AND POSTERS <u>✓</u>
TOWELS	TOBACCO	PAPERS, PERSONAL <u>✓</u>
TROUSERS, PR.	TOILET ARTICLES	PHOTOS <u>✓</u>
TRUNKS, PR.	WINGS	SHOE SHINE ARTICLES
UNDERWEAR	WATCH	SOUVENIRS
		SOUVENIR MONEY

REMARKS *Brother*
James F Fitzgerald
608 Hannibal St
Fulton N. Y.
Mother
K Fitzgerald
216 Ganswoot St
Fulton N. Y.
Ca 7 as above

ATTACHMENTS
Form 54 ✓
G.R. Label ✓
Form 28 ✓

WEIGHT	64 REMOVED
	<input checked="" type="checkbox"/> SHORTAGE ON REVERSE <u>✓</u>
	ID TAGS REMOVED
	DIARY REMOVED
	LOCKED STORAGE
	LAUNDRY REMOVED
	FILM REMOVED

WAREHOUSE SPACE <u>162</u>	STORED BY <u>Jcm</u>
INVENTORIED BY <u>Gill</u>	DATE SHIPPED
PACKED BY <u>Bushman</u>	

DEC 29 1944
DEC 11 1945

ADDITIONAL REMARKS

SHORTAGES

300 Francs
30⁺ Canadian money
1 Farthing

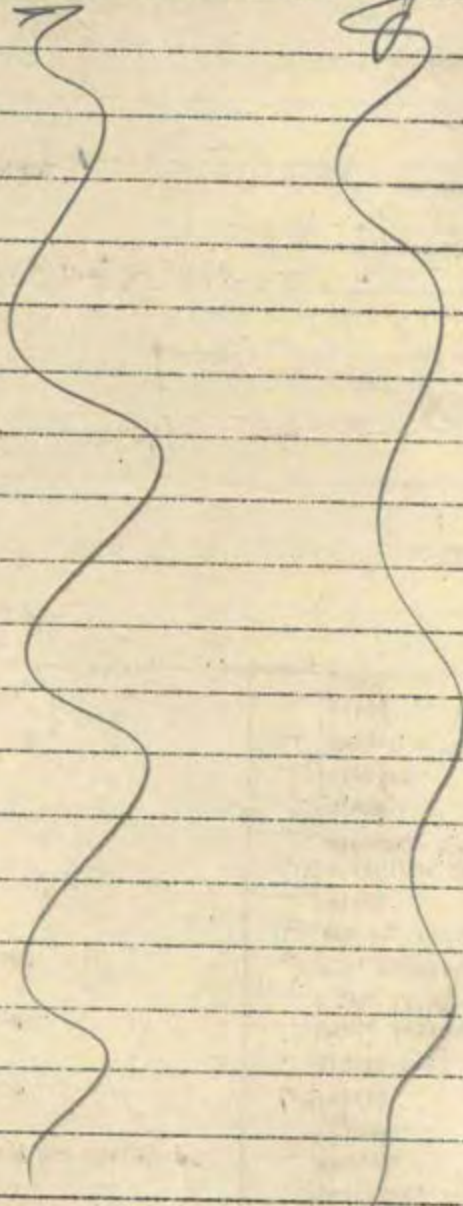
U S GOVT. CHECK SHORT

NUMBER

AMOUNT

DATE

SYMBOL



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

Gill
INVENTORY CLERK

Blanton
SUPERVISOR

G. I. REMOVED

SHEET 11 OF 1 SHEETS	ARMY EFFECTS BUREAU INVENTORY		DECEASED MISSING X
BOX NUMBER	ORIGINAL NUMBER OF PACKAGES 1		P.O.W. ABANDONED
TALLY NUMBER 6712	INVENTORY DATE 23 Feb 45	CASE NUMBER 147,909	7102
EFFECTS OF JOSEPH R. FITZGERALD	RANK <i>1st Lt</i>		
A.S.N. 32476459	ORGANIZATION Co. "A" 401st Glider Inf Ar 472		
PACKAGE DESCRIPTION # 1 Ctn			

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

1 flashlight ✓
 1 sweater ✓
 3 hangers ✓
 1 medal ✓

REMARKS: (mother)
 Mrs Katherine E. Fitzgerald
 216 Sansvoort St.
 Dulton. N. Y.

ATTACHMENTS: FORM #54 | FORM #100
 1 Inventory ✓

MAR 5 1945

C.A.T. none

WAREHOUSE SPACE 1249
 INVENTORIED BY Jackson
 PACKED BY M Cox
 STORED BY JEM
 CHECKED BY E

WEIGHT	GI REMOVED
	SHORTAGE ON REVERSE
	IDENT. TAGS REMOVED
	DIARY REMOVED
DATE SHIPPED	LOCKED STORAGE
	LAUNDRY REMOVED
#43 OR ADDITIONAL	FILM REMOVED

dm
mp

(3 copies to Effects Q.M. ETOUSA, 1 copy in box with effects, 1 copy retained

10 July 1944
Date

Company "A", 401st Glider Infantry, APO 472
(Organization and A.P.O. Number)

SUBJECT: Transmittal of Inventory of Personal effects.
TO : Effects Quartermaster, ETOUSA, Depot G-14, APO. 507, U. S. Army.

Transmitted herewith in accordance with Adm. Cir. # 80, dated 25 Oct. 1943, Hq. SOS. ETOUSA, is Inventory of Effects concerning subject named below.

<u>Fitzgerald</u>	<u>Joseph</u>	<u>R</u>	<u>Pvt 1cl</u>	<u>32 476 057</u>	<u> </u>
(Last Name)	(First Name)	(MI)	(Rank)	(A.S.N.)	(Control No.)
					(For use of Effects (@ ETOUSA)

Organization Company "A", 401st Glider Infantry
(UNIT - - - - Not Branch of Service)

*Status. (~~DECEASED~~, Missing in Action, ~~Prisoner of War~~) on the 13th
day of June 1944

Designated Beneficiary (With Address)
Mrs. Katherine E. Fitzgerald
216 Gansvoort St.
Fulton, N. Y.

Cl. II Assets: Cash found in effects, less cost of money order inclosed herewith

U.S.M.O.# amt none U.S.M.O. # amt

U.S.M.O.# amt U.S.M.O. # amt

U.S. Official Check # none amt. bank
(name and branch)

#Bank accounts none

#Debtors none

#Creditors none

#Inclosed is none
(Will, Power of attorney, War Bond, Travelers Checks. Describe fully

REMARKS (if any)
none

OF EFFECTS

(attach extra sheets if necessary)

- 2 wadded coats ✓
- 1 pair of socks ✓
- 1 pair of pants ✓
- 1 pair of underwear ✓
- 15 pack of cigarettes ✓
- 1 pr. both rain gloves ✓
- 9 religious pamphlets ✓
- 1 ABC Life Saving Book ✓
- 1 ABC Shoulder Patch ✓
- 1 ABC Uniform Certificate ✓
- 1 writing tablet ✓
- 3 razors ✓
- 2 notebooks ✓
- 2 coat hangers ✓
- 1 pr. gloves ✓
- 1 money belt ✓
- 2 pr. socks ✓
- 1 sweater ✓
- 1 service sash ✓
- 1 writing paper & envelopes, etc. ✓
- 2 undershirt, cotton ✓
- 51 photographs ✓
- 3 sewing kits ✓
- 3 pr. shoe laces ✓
- 1 bottle hair oil ✓
- 2 tubes shave soap ✓
- 1 shave stick ✓
- 1 can powder ✓
- 1 flashlight, P.M. ✓
- 1 salt, 3/4 bottle ✓
- 1 washcloth ✓
- 2 brushes ✓
- 1 comb ✓
- 1 tie ✓
- 4 cans soap ✓
- 1 wash brush ✓
- 1 can tooth powder ✓
- 1 rifle ✓
- 3 tooth brushes ✓
- 2 cigarette lighter ✓
- 2 pencils ✓
- 1 pen, fountain ✓
- 1 tube of tooth paste ✓
- 3 slider insignia ✓
- 4 shoulder patches ✓
- 3 airline straps ✓
- 10 playing cards ✓
- 14 boxes of razor blades ✓
- 2 US Good Conduct Ribbon ✓
- 3 ties ✓

- 1 pair of shoes ✓
- 1 pair of socks ✓
- 1 pair of pants ✓
- 1 pair of underwear ✓
- 10 newspaper clippings ✓
- 1 set of compass ✓
- 1 identification or card ✓
- 2 rosaries ✓
- 1 religious medal ✓
- 4 rolls of film (KODAK SAFETY) ✓
- 1 Bill Bill with contents as follows: ✓
- 1 registration and classification card. ✓
- 1 match-book cover ✓
- 1 operator's license ✓
- 1 wire flower ✓
- 9 closures ✓
- 5 miscellaneous cards ✓
- 2 names and addresses ✓
- 1 strip of paper ✓
- 1 plastic ruler kit ✓

I certify that the foregoing inventory comprises all of subject's effects and that effects were shipped to Effects Co., ETOUSA, A.P.O. 507, G-14, U.S. Army by delivering to _____ on 26 July 1944.

26 July 44

Allen J. Fessenden
Signature - (In ink)

Name)
_____) (Block
_____) letters)
Rank and organization

JRM:VJ:bh

Summary Court-Martial
ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT Case No. 147909
601 Hardesty Avenue
Kansas City 1, Missouri Date 10 March 1945

SUBJECT: Report of transactions in disposing of the effects of

Joseph R. Fitzgerald, 32476057 late a
(Name of deceased) (Army Serial Number)
Private First Class, Infantry who died
(Grade) (Organization, Army or Service)
on the 14 day of June, 1944, at European Area.

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

1. Complying with A.W. 112, a Summary Court Martial, convened at Kansas City, Mo, pursuant to S.O., 223, 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 o \$ none was collected, (If nothing was found due or collected, state "None"; otherwise attach itemized statement of sums owing and collected.) (Incl. _____.)

c. Decedent owed undisputed local creditors the sum of \$ none, which has been paid by the Summary Court-Martial from funds of decedent. (See inclosed receipt _____, Incl. _____)

d. Disposition of decedent's effects (less money paid creditors, if any) has been made by the Summary Court-Martial by transmittal through the Quartermaster Corps, at Government expense to person found entitled (See Summary Court-Martial FINDING below)

FINDING

Before a Summary Court-Martial which convened at Kansas City, Missouri, on 8 January 1945, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application or affidavit of Mrs. Katherine E. Fitzgerald 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. Katherine E. Fitzgerald of 216 Gansvoort Street, Fulton State of New York, is the mother 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

General Court-Martial
Army Service Forces
The Adjutant General
1000 Army Avenue
Washington, D.C.

TO THE COMMANDER OF THE ARMY OF THE UNITED STATES OF AMERICA

FROM THE ADJUTANT GENERAL, ARMY SERVICE FORCES

RE: [Illegible Name]

DATE: [Illegible Date]

TO THE ADJUTANT GENERAL, ARMY SERVICE FORCES

1. [Illegible text]

2. [Illegible text]

3. [Illegible text]

4. [Illegible text]

5. [Illegible text]

REFERENCE

1. [Illegible text]

2. [Illegible text]

3. [Illegible text]

4. [Illegible text]

5. [Illegible text]

6. [Illegible text]

7. [Illegible text]

8. [Illegible text]

9. [Illegible text]