

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

20 July 1944 Date

REBURIAL PFC

34303937

293

Lloyd Crady W. Unknown
 Last Name First Initial Rank
 Unknown 507 Paratrooper Regt Unknown
 Unit Organization
 France Unknown 11 June 1944 KIA
 Place of Death Date of Death Cause of Death
 17 July 1944 (Reinterred) Blosville France
 Time and Date of Burial Name of Cemetery Name or Coordinates of Location
 134 7 S Peg
 Grave Number Row Number Plot Number Type of Marker

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

If No Identification Tags
How were remains identified?

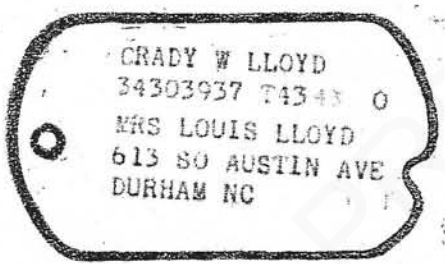
REINTERRED FROM COORD: 422:778

What means of identification were buried with the body?

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

Who is buried on:	UNKNOWN X -68	Unknown	Unknown	135
Deceased's Right:	Name	Serial No.	Rank	Grave No.
Deceased's Left:	UNKNOWN E -65	Unknown	Unknown	133
	Name	Serial No.	Rank	Grave No.

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



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

Emergency Addressee _____ Name _____
 _____ Address _____

Religion Protestant

List only Personal Effects Found on Body and disposition of same

NONE

REBURIAL R 24 1945

Person buried in isolated grave
 LOCATED AT Coord - 422-778

Signature of Officer or other person reporting burial
 F. A. GREULICH
 Capt., GIC Verified by G.I.C.S. Officer

Deck 49

File 9-20-45

1

C. A. Weinstein

DISINTERMENT DIRECTIVE

1st Lt. W. Interim Officer

SECTION A— NAME AND BURIAL LOCATION OF DECEASED	DIRECTIVE NUMBER	DATE
	3508 02892	15 02 49 DAY MONTH YEAR

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
LLOYD GRADY W	34303937	PFC	1	1	1

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS
BLOSVILLE FRANCE	S	7	134	3505 80 CODE DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN *Flag sent 2 April 1948*

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
ST. LAURENT, FRANCE	MRS. DAISY LLOYD (MOTHER) ROUTE 3 CHAPEL HILL, NORTH CAROLINA

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISTINTERRED
LLOYD, GRADY W.	34303937	Utd		8 December 47

IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY
<input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	USAGF	Prot.	W.J. SMITH, 1/Lt CE. NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
O.D. Uniform and mattress cover	Advanced decomposition

OTHER MEANS OF IDENTIFICATION

None

MINOR DISCREPANCIES (*Prepare Discrepancy Report QMC Form 1194a for major discrepancies.*)

None

REMAINS PREPARED AND PLACED IN CASKET

DATE 27 January 1948 BY R.W. AHEARN

CASKET SEALED BY	EMBALMER (Signature)
R.W. AHEARN	

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
DATE 27/1/48 BY T.C. SNIDER	G.J. MISSIGMAN, Morgue Supervisor.

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

JOHN PALYOK JR, 1st Lt., FA.

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

I certify that the entries on this form are true copies of the entries on Copy No. 4 of this Disinterment Directive which contains the signatures of the persons whose names are typed hereon.

D. A. MacGerrigle
Capt

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC BLOSVILLE		TO CASKETING POINT "A" CHERBOURG	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER PVT STRANGE	
SIGNATURE OF SHIPPER W.T. DAILEY, Capt., QMC.	DATE 26/1/48	SIGNATURE OF RECEIVER E.N. CIAMPO, 1st Lt., FA.	DATE 26/1/48

2. SHIPPED

FROM CASKETING POINT "A" CHERBOURG		TO CASKETING POINT "B" ST LAURENT	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER	
SIGNATURE OF SHIPPER E.N. CIAMPO, 1st Lt., FA.	DATE	SIGNATURE OF RECEIVER D.A. MAC KENZIE, Capt., Inf.	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

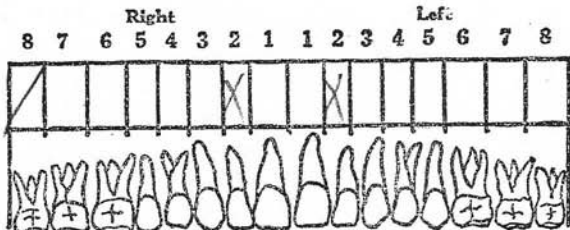
7. SHIPPED

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

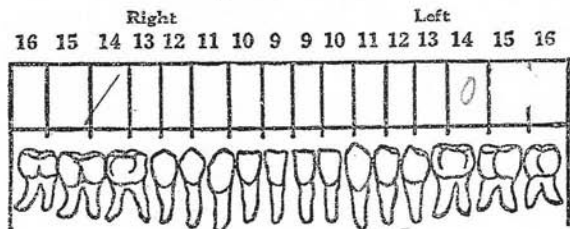
***REPORT OF DENTAL SURVEY**

31A

UPPER TEETH



LOWER TEETH



CLASS II

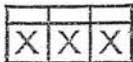
Occlusion _____: Calculus: Slight, Medium, Heavy
 Periodontoclasia _____
 Dental foci suspected: Yes No
 Other conditions _____

Date _____, 19____

Dental Corps, U. S. A.

*Restorable carious teeth by O
 Nonrestorable carious teeth by /
 Missing natural teeth by X

Teeth replaced by denture
 (horizontal line)



Teeth replaced by fixed bridge
 (oval to include abutments)



Teeth replaced by
 fixed bridge
 (oral to include abutments)



Teeth replaced by
 denture
 (horizontal line)

*Restorable carious teeth by O
 Nonrestorable carious teeth by /
 Missing natural teeth by X

Dental Corps, U.S.A.

Dr. J. P. ...

Date 1-6-43, 19____

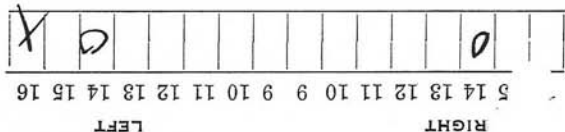
Other conditions _____

Dental foci suspected: Yes No

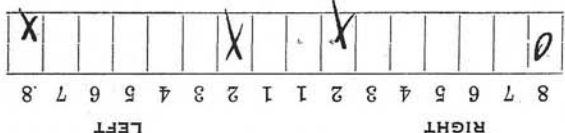
Periodontoclasia _____

Occlusion _____: Calculus: Slight, Medium, Heavy

Class II



LOWER TEETH



UPPER TEETH

***REPORT OF DENTAL SURVEY**

32A

REGISTER OF DENTAL PATIENTS AT

Lloyd, Grady W.

(1) SURNAME

(2) CHRISTIAN NAME

34303937

(3) RANK

(4) COMPANY

(5) REGIMENT OR STAFF CORPS

Pvt.

B

1st

(6) AGE, YEARS

(7) RACE

(8) NATIVITY

(9) SERVICE, YEARS

24

W

N. C.

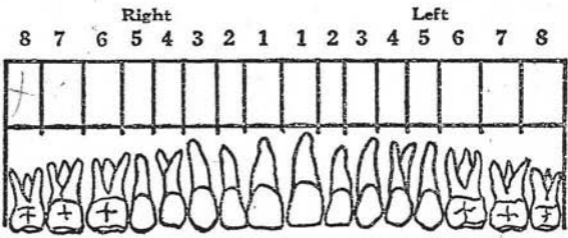
5/52

										(10) DISEASE OR INJURY WITH LOCATIONS, COMPLICATIONS, ETC.
										(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS
										(12) RESULTS AND REMARKS
										6/19/42
										R-Port R-14 G.I.T 6/19 1893
										I dental care

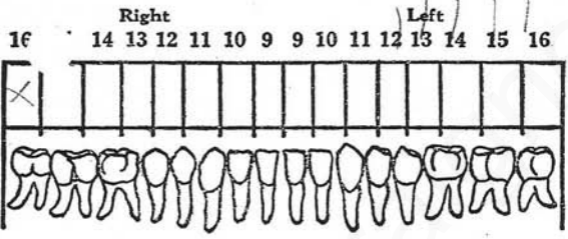
Dental Corps, U. S. A.

*REPORT OF DENTAL SURVEY

UPPER TEETH



LOWER TEETH



CLASS _____

Occlusion _____: Calculus: Slight, Medium, Heavy

Periodontoclasia _____

Dental foci suspected: Yes No

Other conditions _____

Date 1/19/42, 19____

Dental Corps, U. S. A.

*Restorable carious teeth by O
 Nonrestorable carious teeth by /
 Missing natural teeth by X

Teeth replaced by denture
 (horizontal line)

X	X	X
---	---	---

Teeth replaced by fixed bridge
 (oval to include abutments)

○	X	○
---	---	---

KK

EUA 022

RR UEPOG

Jan 26 10 12 AM '49

O. G. M. G.
TEL & CAB SECTION

UEP 7P/ 30 GOVT COLLECT 6 EXTRA

1376

CHAPEL HILL NCAR JAN 25 511P

SMITH MEMORIAL DIVISION OQMG

WASHDC

DESIRE PERMANENT BURIAL OF REMAINS OF PRIVATE FIRST CLASS

²⁷³
GRADY W LLOYD 34 303 937 BE MADE IN UNITED STATES MILITARY

CEMETERY OVERSEAS - *St Laurent*

not
MRS DAISY LLOYD MOTHER ROUTE 3 CHAPEL HILL NC - *current address*

712P

34 303 937 3

used in *2C 2L*
Bill 1/345

Delayed
Permit
1-19-49
3 LC

FEB 9 1949

Kogebale

alms

INTRAOFFICE REFERENCE SHEET

34 303 937

293 Lloyd Grady W.

DUE, HOUR AND DATE _____

1 NO.	2 FROM	3 TO	4 DATE	5 MESSAGE
1.	Chief FL Section FC Branch Mem. Div.	Chief FR Section FC Branch Mem. Div.	26 Jan. 1949	<p>Forwarded as a matter pertaining to your office.</p> <p>2 Incls:</p> <p>1. 293 File Lloyd, Grady W. 34 303 937</p> <p>2. Copy of telegram</p> <p><i>[Signature]</i> SMITH 5072</p> <p><i>[Signature]</i> SNOWDEN 6535</p> <p><i>[Signature]</i> CMT CMT</p>

FILE

Name _____

Action _____

Date _____

Reference Section _____

Corres. Branch _____

CORRESPONDENCE ACTION SHEET

NAME OF DECEDENT (Last, First, Middle)

PREVIOUS BURIAL LOCATION (Cemetery and Country)	PLOT	ROW	GRAVE
PRESENT BURIAL LOCATION (Cemetery and Country)	PLOT	ROW	GRAVE
ADDRESSEE	ADDRESS (Street, City, State)		
RELATIONSHIP			

Handwritten: Wood, Nancy W.

PARAGRAPHS (Sequence)	ADDITIONAL DATA — MODIFICATIONS
	<p align="center"><u>Letter "P"</u></p> <p>#1 Son of Gady W. Wood</p> <p>#2</p> <p>#3 - Revise to read: Inasmuch as your son's widow has remarried, our records have been amended to show that you are the next of kin and person authorized to direct the final disposition of the remains of the decedent. (Continue with remainder of this par.)</p> <p>#4</p> <p>#5</p> <p>INCL: cc: Mr. Snowden</p>

GRADE

SERIAL NUMBER

ANALYST INITIALS AND DATE	TYPIST INITIALS	REVIEWER INITIALS AND 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	GROUP COUNT GR

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Originator) ~~SMITH~~
 QMGMF DEPT OF ARMY WASH D ~~SMITH~~ EXT 6535

ACTION TO:

- MRS DAISY LLOYD
- RURAL FREE DELIVERY
- ROUTE #3
- CHAPEL HILL NORTH CAROLINA

INFORMATION TO:

CHARGE GRAVES WW II

FINAL INTERMENTS ARE NOW BEING MADE IN THE PERMANENT UNITED STATES
 MILITARY CEMETERIES OVERSEAS. THE REMAINS OF YOUR LATE **SON**
PRIVATE FIRST CLASS GRADY W LLOYD 34 303 937

ARE BEING HELD IN ABOVE GROUND STORAGE PENDING DISPOSITION INSTRUCTIONS
 FROM YOU. IN ORDER THAT WE MAY COMPLY WITH YOUR WISHES COMMA IT IS
 URGENT THAT YOU ADVISE THIS OFFICE WITHIN FIFTEEN DAYS BY COLLECT
 TELEGRAM IF YOU DESIRE PERMANENT OVERSEAS BURIAL OR RETURN OF THE
 REMAINS TO THE UNITED STATES FOR BURIAL IN A NATIONAL OR PRIVATE
 CEMETERY. INCLUDE NAME OF NATIONAL CEMETERY OR CONSIGNEE IF REMAINS
 ARE REQUESTED FOR RETURN TO THIS COUNTRY END SMITH

jpm

SMITH
 Memorial Division
 OQMG

O. Q. M. G.
 TEL & CAB SECTION

JAN 25 11 00 AM '49

FM

SECURITY CLASSIFICATION UNCLASSIFIED		AUTHORIZATION	
ORIGINATING AGENCY QMGMF 293		SIGNATURE	
DATE-TIME GROUP 251630Z Jan 49	OFFICIAL TITLE J F VOGL Capt., QMG, Memorial Division	PAGE	OF
LLOYD GRADY W 34 303 937			

ANALYST ACTION REQUEST FORM

Name

Lloyd Grady W.

Grade

Pfc

Serial Number

54 303 937

This case has been thoroughly analyzed and the following action is to be taken:

Miss Hernandez

Request Form A tele-

gram sent to:

Mrs Daisy Lloyd
Route #3
Chapel Hill, N.C.

Date

29 Jun 49

Signature of Analyst

A. Pennington

Division

mem

Branch

FD

Section

7AC

REQUEST FOR DISPOSITION OF REMAINS

24-26-48

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

DATE:

WJ

Pfc Grady W. Lloyd, 34 303 937
~~Plot S, Row 7, Grave 134,~~
 United States Military Cemetery
 Blosville, France

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

- | | | | |
|---|----------------------------------|--|---|
| <input type="checkbox"/> WIDOW | <input type="checkbox"/> WIDOWER | <input type="checkbox"/> SON OVER 21 YEARS OLD | <input type="checkbox"/> DAUGHTER OVER 21 YEARS OLD |
| <input type="checkbox"/> FATHER | <input type="checkbox"/> MOTHER | <input type="checkbox"/> BROTHER OVER 21 YEARS OLD | <input type="checkbox"/> SISTER OVER 21 YEARS OLD |
| <input type="checkbox"/> RELATIONSHIP OTHER THAN ABOVE (<i>Specify</i>) _____ | | | |

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)

- 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.)*

FILE
WJ
 Action *17 Jan 1949*
 Reference Section
 Family Corres. Branch

RODA

PART II—RELINQUISHMENT OF DISPOSITION AUTHORITY

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

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

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

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

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

PART III

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

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

LAST NAME RIGSBEE	FIRST NAME LOIS	MIDDLE INITIAL M
RELATIONSHIP TO THE DECEASED <i>remarried widow</i>		
NUMBER AND STREET <i>207 S. Alston Avenue</i>	CITY OR TOWN <i>Durham</i>	STATE OR COUNTRY N.C.

Lois M. Rigbee
(SIGNATURE)

April 14, 1948
(DATE)
207 S. Alston Avenue
(STREET AND NUMBER)

LOIS M. RIGSBEE
(NAME PRINTED OR TYPED)

Durham, N.C.
(CITY AND STATE)

346
Repatriation Records Branch
Disinterment Locator Section
Office of the Quartermaster General.
Department of the Army
Washington 25, D.C.

DATE: April 20, 1948

FROM: (Miss) Edna Mattox

SUBJECT: Lloyd, Grady W.
34 303 937

Next of Kin:
Old Address:
New Address:

Blasville S-7-184

Your Reference: QMGMR 293

In compliance with your request of _____ for an investigation in connection with the disposition of the remains of this deceased serviceman, we submit the following information:

1. OQMG Form 345 has been submitted by _____, _____
(Name) (Relationship)
 will be submitted on _____
(date)

2. Remarks: Our Durham, North Carolina chapter worker has learned that the widow of the above named deceased serviceman listed as next of kin, has remarried and is now Mrs. Lois Rigsbee at 207 S. Alston Avenue, Durham, North Carolina.

She was assisted in completing Section 3 of Form 345, relinquishing her rights as next of kin. The serviceman's mother, Mrs. Daisy Lloyd of Rte. 3, Chapel Hill, North Carolina, was designated as next of kin.

We hope that this form has been received and if further services on our part are indicated, please advise.

Edna Mattox

(Miss) Edna Mattox
Director, Home Service
Southeastern Area

NAT
17 Jan 1949
RECEIVED
17 JAN 1949

DATA ON REMAINS NOT YET RECOVERED OR IDENTIFIED

NAME (Last, First, Middle Initial)

GRADE

PRESENT SERIAL NUMBER

ORGANIZATION

RACE

CREED

FORMER SERIAL NUMBER (If applicable)

DATE OF DEATH/MIA

CAUSE OF DEATH

PLACE OF DEATH OR PLACE LAST SEEN IF MIA

DATE OF FOD

HEIGHT

WEIGHT

COLOR EYES

COLOR HAIR

SHOE SIZE

DENTAL CHART

DATE 16 MAY 42

UPPER RIGHT

UPPER LEFT

8 7 6 5 4 3 2 1

1 2 3 4 5 6 7 8

LOWER RIGHT

LOWER LEFT

16 15 14 13 12 11 10 9

9 10 11 12 13 14 15 16

X=Extracted

O=Cariou

1=Cariou Non-Restorable

FRACTURES AND/OR BREAKS

TATTOOS AND/OR BIRTHMARK

NONE

NONE

ADDITIONAL INFORMATION

BSA MEM 7 MAY 42

ATTACHED 3 FORM 79

DATA ON REMAINS NOT YET RECOVERED OR IDENTIFIED

NAME (Last, First, Middle Initial) LLOYD GRADY W.		GRADE PFC	PRESENT SERIAL NUMBER 34 30 3 937
ORGANIZATION 507 th PARA. INF. REGT.		RACE WHITE	CREED PROTESTANT
DATE OF DEATH/MIA 11 JUNE '44	CAUSE OF DEATH KILLED IN ACTION	PLACE OF DEATH OR PLACE LAST SEEN IF MIA FRANCE	
DATE OF FOD	HEIGHT 70"	WEIGHT 149	COLOR EYES BLUE
		COLOR HAIR BROWN	SHOE SIZE 8 1/2 E

DENTAL CHART

UPPER RIGHT 8 7 6 5 4 3 2 1 PHOTOSTATS ATTACHED		UPPER LEFT 1 2 3 4 5 6 7 8 16 MAY '42	
LOWER RIGHT 16 15 14 13 12 11 10 9		LOWER LEFT 9 10 11 12 13 14 15 16	

X=Extracted

O=Carious

1=Carious Non-Restorable

FRACTURES AND/OR BREAKS NONE	TATTOOS AND/OR BIRTHMARK NONE
---------------------------------	----------------------------------

ADDITIONAL INFORMATION
BORN: 7 MAY '18

MAY 3 1948

NAT
Jim
A. C. Mc
Ident Br.

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

REPORT OF DEATH

DATE 11 November 1944
Garton/4627

FULL NAME <p style="text-align: center;">Lloyd, Grady W.</p>		ARMY SERIAL NUMBER <p style="text-align: center;">34303937</p>		GRADE <p style="text-align: center;">Pfc.</p>									
HOME ADDRESS <p style="text-align: center;">Durham, North Carolina</p>		ARM OR SERVICE <p style="text-align: center;">Infantry</p>		DATE OF BIRTH <p style="text-align: center;">7 May 18</p>									
PLACE OF DEATH <p style="text-align: center;">European Area</p>		CAUSE OF DEATH <p style="text-align: center;">Killed in Action</p>		DATE OF DEATH <p style="text-align: center;">11 Jun 44</p>									
STATION OF DECEASED <p style="text-align: center;">European Area</p>		DATE OF ENTRY ON CURRENT ACTIVE SERVICE <p style="text-align: center;">16 May 42</p>		LENGTH OF SERVICE FOR PAY PURPOSES <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">YEARS</td> <td style="text-align: center;">MONTHS</td> <td style="text-align: center;">DAYS</td> </tr> <tr> <td style="text-align: center;"> </td> <td style="text-align: center;"> </td> <td style="text-align: center;"> </td> </tr> </table>		YEARS	MONTHS	DAYS					
YEARS	MONTHS	DAYS											
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) <p style="text-align: center;">Mrs. Lois Lloyd, Wife, 613 South Alston Ave., Durham, North Carolina ✓</p>													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Lois Lloyd, Wife, same as above Grady Jean Lloyd, Daughter, same as above Mrs. Daisy Lloyd, Mother, Chapel Hill, Route #3, North Carolina*													
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

On Parachute Pay

*Beneficiaries, Continued

Mr. Paul Lloyd, Father, Chapel Hill, Route #3, North Carolina

The individual named in this report of death is held by the War Department to have been in a missing in action status from 11 June 1944, until such absence was terminated on 7 November 1944, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

FILED

NOV 18 1944

COPIES FURNISHED:		
S. G. O.	F. B. I.	F. O., U. S. A.
2. C. 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

[Handwritten Signature]

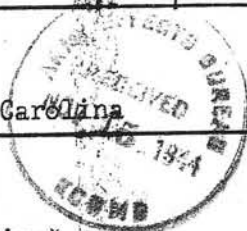
ADJUTANT GENERAL

WAR DEPARTMENT
 THE ADJUTANT GENERAL'S OFFICE 290460
 WASHINGTON 25, D. C.

REPORT OF DEATH

DATE 11 November 1944
Garton/4627

FULL NAME <p style="text-align: center;">Lloyd, Grady W.</p>		ARMY SERIAL NUMBER <p style="text-align: center;">34303937</p>	GRADE <p style="text-align: center;">Pfc.</p>						
HOME ADDRESS <p style="text-align: center;">Durham, North Carolina</p>		ARM OR SERVICE <p style="text-align: center;">Infantry</p>	DATE OF BIRTH <p style="text-align: center;">7 May 18</p>						
PLACE OF DEATH <p style="text-align: center;">European Area</p>	CAUSE OF DEATH <p style="text-align: center;">Killed in Action</p>		DATE OF DEATH <p style="text-align: center;">11 Jun 44</p>						
STATION OF DECEASED <p style="text-align: center;">European Area</p>		DATE OF ENTRY ON CURRENT ACTIVE SERVICE <p style="text-align: center;">16 May 42</p>	LENGTH OF SERVICE FOR PAY PURPOSES <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>YEARS</td> <td>MONTHS</td> <td>DAYS</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	YEARS	MONTHS	DAYS			
YEARS	MONTHS	DAYS							
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) <p style="text-align: center;">Mrs. Lois Lloyd, Wife, 613 South Alston Ave., Durham, North Carolina</p>									
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Lois Lloyd, Wife, same as above Grady Jean Lloyd, Daughter, same as above Mrs. Daisy Lloyd, Mother, Chapel Hill, Route #3, North Carolina*									
INVESTIGATION MADE?		IN LINE OF DUTY	OWN MISCONDUCT						
YES	NO	YES	NO						
WAS DECREASED ON DUTY STATUS		AUTHORIZED ABSENCE	IN FLYING STATUS						
YES	NO	YES	NO						
OTHER PAY BASIS (SPECIFY BELOW)									
YES		NO							
X									



ADDITIONAL DATA AND/OR STATEMENT

On Parachute Pay

*Beneficiaries, Continued

Mr. Paul Lloyd, Father, Chapel Hill, Route #3, North Carolina

The individual named in this report of death is held by the War Department to have been in a missing in action status from 11 June 1944, until such absence was terminated on 7 November 1944, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

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

BATTLE
 NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR

J. H. Marshall

ADJUTANT GENERAL

2, 700 m L

R E S T R I C T E D

201 - Lloyd, Grady W. (Enl) 1st Ind.

ENL/wjm

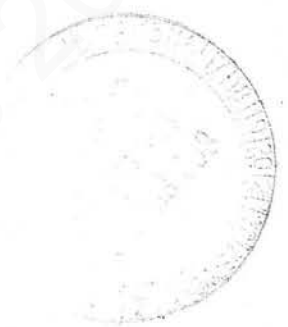
HEADQUARTERS 82D AIRBORNE DIVISION, APO 469, U. S. Army,

TO: Effects Quartermaster, ETOUSA, APO 871, U. S. Army.

[Handwritten signature]

[Handwritten signature]
G. B. B.

~~XXXXXX~~



© EQS PRESS Graignes 2021

R E S T R I C T E D

C O P Y
KCQMD
AEB-wdt

EFFECTS QUARTERMASTER U.K.
DEPOT G-14
United States Army

HGL/jg

15th October, 1944.

SUBJECT: Transmittal of Inventories of Effects.

TO : The Effects Quartermaster, Kansas City QM Depot,
601 Hardesty Avenue, Kansas City, Missouri.

1. The attached Inventories have been on hand at this office for 30 days or more; the effects to which they refer have never been received by this office. It is believed the effects may have been erroneously forwarded direct to your office, to the beneficiary; or to the Effects Quartermaster in France. In view of the fact that we are unable to contact the Units to ascertain disposition of the effects, and that ultimately all effects will be received by your office, we are forwarding these forms for your records.

2. The method of handling Form 54's at this office is that all Form 54's are checked against effects on hand. Where effects have been received, such forms will be forwarded by letter of transmittal to your office giving information as to the disposition of the effects, and at the expiration of one month, if no effects are received, the forms will be transmitted to your office in accordance with paragraph 1.

R. J. MOULTON.
Lt. Col. QMC.
Effects Q M U.K.

Incls: Inventories and
List in duplicate.

JUN 15 1945

PACKING DESCRIPTION <i>#1 - Suit</i>	ARMY EFFECTS BUREAU INVENTORY	DECEASED <input type="checkbox"/>
		MISSING <input checked="" type="checkbox"/>
		P.O.W. <input type="checkbox"/>
		ABANDONED <input type="checkbox"/>
	290,460	TALLY NO. 7609 ✓
		INV. DATE 2 - June 45
		ORIG. NO. OF PKGS. 1
		BOX NO. 18
		SHEET OF 1 SHEETS ✓
		ORGANIZATION Ho 203rd Bn
		367th Proch. Comp

NAME *W Rady W Lloyd*
A.S.N. *34303931* ✓
RANK *1st Lt*

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

REMARKS *(wife)*
Mrs Lois Lloyd
413 South Alston Ave
Durham North
Carolina

ATTACHMENTS *Inventory* ✓
FORM #54
FORM #100

C.A.T. *none*

WAREHOUSE SPACE <i>13x9</i>	STORED BY <i>[Signature]</i>	WEIGHT	<input type="checkbox"/> G.I. REMOVED
INVENTORIED BY <i>[Signature]</i>	CHECKED BY <i>[Signature]</i>	DATE SHIPPED <i>JUL 2 1945</i>	<input type="checkbox"/> SHORTAGE ON REVERSE
PACKED BY <i>[Signature]</i>	#43 or ADDITIONAL		<input type="checkbox"/> IDENT. TAGS REMOVED
			<input type="checkbox"/> DIARY REMOVED
			<input type="checkbox"/> LOCKED STORAGE
			<input type="checkbox"/> LAUNDRY REMOVED
			<input type="checkbox"/> FILM REMOVED

507TH PARACHUTE INFANTRY
APO 290, U.S. ARMY

27 July 1944
Date

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>GRAY</u> (Last Name)	<u>GRAY</u> (First Name)	<u>U.</u> (I.I.)	<u>Sgt.</u> (Rank)	<u>Paratrooper</u> (A.S.N.)	(Control No.) (For use of Effects Cl. ETOUSA)
----------------------------	-----------------------------	---------------------	-----------------------	--------------------------------	--

Organization Hq. Co., 507th Para. Inf.
(Unit - - - - - None Branch of Service)

*Status. (~~Deceased~~, ~~Missing in Action~~, ~~Prisoner of War~~) on the 11th
day of June 19 44.

Designated Beneficiary (With Address) Mrs. Lois Lloyd (Wife)
618 South Alston, Ave.,
Durham, North Carolina

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

U.S.L.O. # None Amt \$ _____ U.S.M.O. # _____ Amt \$ _____

U.S.L.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 No Inclosures
(Will, Power of Attorney, War Bond, Travelers Checks, Describe Fully)

REMARKS (if any)

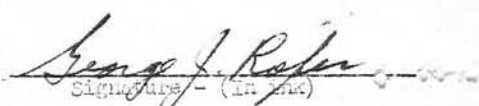
*Strike out words not applicable.
#Negative report where applicable.

INVENTORY OF EFFECTS
(attach extra sheets if necessary)

2 photos ✓

I certify that the foregoing inventory comprises all of the subject's effects and that effects were shipped to Effects QM, EXUSA, A.P.O. 507, G-14, U.S. Army by delivering to ~~AM, 507 A/B DL, APO 400~~

on 27 July 1944.


Signature - (in ink)

GEORGE J. ROPER
Capt. 507 PCHQ. Int.
Personnel Officer

(Block letters)

Rank and organization

ARMY SERVICE FORCES

KANSAS CITY QUARTERMASTER DEPT.

Case No. 290460

601 Hardesty Avenue

Date 22 June 1945

Kansas City 1, Missouri

SUBJECT: Report of transaction in disposing of the effects of

Grady W. Lloyd34503987

(Name of decedent)

(Army Serial Number)

PFCInfantry

who died

(Grade)

(Organization, Army or Service)

on the 11 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., 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 decedent's camp or quarters, effects of decedent were forwarded to this Summary Court-Martial.

b. Local debtors owed decedent's estate none, of which the sum of \$ none was collected. (If nothing was found due or collected, state "None"; otherwise, attach itemized statement of sums owing and collected.) (Incl. _____)

c. Decedent owed 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 20 June 1945, pursuant to Special Orders 228, Headquarters KCQM Depot, dated 25 September 1943, the application or affidavit of Mrs. Lois Lloyd 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. Lois Lloyd of

(Name of person found entitled)

613 South Alston AvenueDurham

State of

(Number, Street or Avenue)

(City, Town or Village)

North Carolina, 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, C.M.C.

(Name, Rank, Organization)

SUMMARY COURT-MARTIAL

290460

GHG:JFH:dn
June 27, 1945

Mrs. Lois Lloyd
613 South Alston Avenue
Durham, North Carolina

Dear Mrs. Lloyd:

The Army Effects Bureau has received from overseas some property of your husband, Private First Class Grady W. Lloyd.

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

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

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

Yours very truly,

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

SPQYG 293
Lloyd, Grady W.

1 April 1946

Mrs. Lois Lloyd
613 South Alston Avenue
Durham, North Carolina

Dear Mrs. Lloyd:

The War Department is most desirous that you be furnished the burial location of your husband, the late Private First Class Grady W. Lloyd, A.S.N. 34 303 937.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery, Blosville, France, plot S, row 7, grave 134.

This cemetery is located twenty miles northwest of St. Lo, twenty-four miles southeast of Cherbourg and five miles north and slightly west of Carentan, all in France, and is under the constant care and supervision of United States military personnel.

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

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

is

LMS

Pfc. Grady W. Lloyd, 34 303 937
Plot S, Row 7, Grave 134,
United States Military Cemetery
Blosville, France

17 September 1947

Mrs. Lois Lloyd
613 South Alston Avenue
Durham, North Carolina

Dear Mrs. Lloyd:

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

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

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

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

Sincerely,

THOMAS B. LARKIN
Major General
The Quartermaster General

Incls.

8P

SEP 23 2 52 PM '47
O. C. M. G.
MAIL & RECORDS DIVISION

ARRIVED
14 MARCH

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

In Reply Refer To RR Br: QMGR 293

Pfc Grady W. Lloyd, 34 303 937
Plot S, Row 7, Grave 134
United States Military Cemetery
Bloisville, France

18 March 1948

P R I O R I T Y

Miss Edna Mattox, Director of Home Service
Southeastern Area, American Red Cross
230 Spring Street, Northwest
Atlanta 3, Georgia

Dear Miss Mattox:

The Next of Kin of the above captioned deceased wife
(relationship)

Mrs. Lois Lloyd, 613 South Alston Avenue, Durham, North Carolina

(name) (address)
has failed to return a Form 345 indicating disposition instructions for the remains.

It is respectfully requested that the attached OQMG Form 345 be properly accomplished by the Next of Kin and legal documents obtained through assistance of your representative if appropriate, be furnished this office. In the event you are unable to secure disposition instructions from the Next of Kin, it is further requested that a statement of the action taken by your representative be furnished this office for use as a basis for final disposition of remains of the decedent.

It is recommended that in contact with the Next of Kin mentioned above, they first be queried as to whether or not they have submitted the appropriate form, as it may have been mailed to this office since receipt by you of this request.

Sincerely yours,

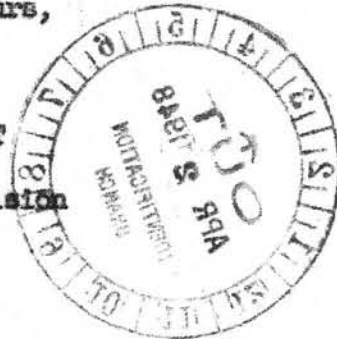
JOHN O. HYATT
Colonel, QMG
Memorial Division

Incls.

amt

MAR 18 10 43 AM '48

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



17 January 1949

QMCMF 293
Lloyd, Grady W.
ASN 34 303 937

ms

Mrs. Daisy Lloyd
Route #3
Chapel Hill, North Carolina

Dear Mrs. Lloyd:

The Department of the Army is most desirous that you be furnished information regarding the burial location of your son, the late Private First Class Grady W. Lloyd.

The records of this office disclose that his remains were interred in the United States Military Cemetery Blosville, France, Plot S, Row 7, Grave 134. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity. The remains are now casketed and being held pending disposition instructions from the next of kin, either for return to the United States or for permanent burial in an overseas cemetery.

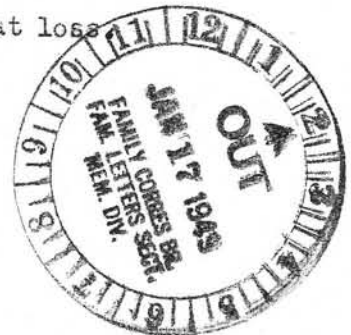
Inasmuch as your son's widow has remarried, our records have been amended to show that you are the next of kin and person authorized to direct the final disposition of the remains of the decedent. We are, therefore, inclosing informational pamphlets regarding the Return of World War II Dead Program, including a Disposition form on which you may indicate your desires in the matter. Upon receipt of the completed form, you may be assured that the Department of the Army will attempt to comply with your instructions as indicated thereon.

In order that this office may take immediate action toward the final disposition of the remains of your son, it is urged that you complete the inclosed form "Request for Disposition of Remains", and mail it to this office, without delay, in the inclosed self-addressed envelope which requires no postage.

May I extend my sincere sympathy in your great loss

Sincerely yours,

JAMES F. SMITH
Major, QMC
Memorial Division



Incls.

bek

Jan 17 3 38 PM '49
MAIL & RECORDS DIV.
O. O. M. G.

Special L. O. I. SENT JAN 17 1949 *3 minton*

JFS

2 June 1949

Pfc Grady W. Lloyd, ASN 34 303 937
Plot A, Row 11, Grave 25
Headstone: Cross
St. Laurent (France) U. S. Military Cemetery

Mrs. Daisy Lloyd
Route #3
Chapel Hill, North Carolina

Dear Mrs. Lloyd:

This is to inform you that the remains of your loved one have been permanently interred, as recorded above, side by side with comrades who also gave their lives for their country. Customary military funeral services were conducted over the grave at the time of burial.

After the Department of the Army has completed all final interments, the cemetery will be transferred, as authorized by the Congress, to the care and supervision of the American Battle Monuments Commission. The Commission also will have the responsibility for permanent construction and beautification of the cemetery, including erection of the permanent headstone. The headstone will be inscribed with the name exactly as recorded above, the rank or rating where appropriate, organization, State, and date of death. Any inquiries relative to the type of headstone or the spelling of the name to be inscribed thereon, should be addressed to the American Battle Monuments Commission, Washington 25, D. C. Your letter should include the full name, rank, serial number, grave location, and name of the cemetery.

While interments are in progress, the cemetery will not be open to visitors. You may rest assured that this final interment was conducted with fitting dignity and solemnity and that the grave-site will be carefully and conscientiously maintained in perpetuity by the United States Government.

Sincerely yours,

H. FELDMAN
Major General
The Quartermaster General

fed.

JUN 6 4 00 PM '49

MAIL & RECORDS BRANCH