

RESTRICTED REBURIAL
REPORT OF BURIAL

13315
1 July 1944

REBURIAL

TM 10-630 AND AR 30-1815

Date

Fabuz Raymond S.

abc
Unknown
Rank

32134639
Serial No.

Unknown Co F 508 Para Inf Reg
Unit

Unknown

Organization

France

Place of Death

8 Jun 44

Unknown

Date of Death

KIA

Cause of Death

1 July 1944 (Reinterred)

Time and Date of Burial

Blosville

Name of Cemetery

France

Name or Coordinates of Location

63

Grave Number

4

Row Number

E

Plot Number

Peg

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?

DISINTERRED FROM COORD: 305:920

What means of identification were buried with the body?

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

Who is buried on:

Deceased's Right: King, Ernest J. 6903117 Unknown Unknown 64
Name Serial No. Rank Organization Grave No.

Deceased's Left: Hall Jr., James W. 18005671 Tec 5 Unknown 62
Name Serial No. Rank Organization Grave No.

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



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

Emergency Addressee Unknown
Name

Address

Religion Catholic

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

NONE

REBURIAL

Previously buried in isolated grave
located at Coord - 305-920

Signature of Officer or other person reporting burial

Dale C. Sherwood

Verified by G.R.S. Officer

DALE C. SHERWOOD
1st. Lt., QMC

JAN 30 1945

inc #27

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

153653 9275

—BATTLE CASUALTY REPORT

NAME FABUZ RAYMOND S				SERIAL NUMBER 32134639			GRADE PFC	ARM OR SERVICE INF	REPORTING THEATRE ETO
PLACE OF CASUALTY FRANCE		DATE OF CASUALTY DAY MONTH YEAR 08 JUN 44			FLYING OR JUMPING STAT J	TYPE OF CASUALTY KIA		SHIPMENT NUMBER 133	

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 MRS SOPHIE FABUZ			RELATIONSHIP MOTHER		DATE NOTIFIED 23 JUL 44. mab	
NO. AND NAME OF STREET—CITY—STATE 345 14TH STREET NIAGARA FALLS, NEW YORK						

REMARKS:

CORRECTED COPY

EVIDENCE OF DEATH REC'D IN WD ON 23 JUL 44.

ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED FORM 43 AG 201 REQ 22 July 44

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. CEMIF M. & M. NON-DEL.

REPORT NOT VERIFIED NO FORM 43 NO CAS. BR. FILE CHECKED BY Status 2/20/44 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	CREW POS.	RESIDENCE		COMP	RACE											
		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" _____ 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.

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE

WASHINGTON 25, D. C.

REPORT OF DEATH

DATE 2 August 1944

Kahn

FULL NAME <u>Fabuz, Raymond S.</u>		ARMY SERIAL NUMBER <u>32,134,639</u>		GRADE <u>PFC</u>	
HOME ADDRESS <u>Niagara Falls, New York</u>		ARM OR SERVICE <u>Infantry</u>		DATE OF BIRTH <u>17 Dec 1915</u>	
PLACE OF DEATH <u>European Area</u>		CAUSE OF DEATH <u>Killed in Action</u>		DATE OF DEATH <u>8 Jun 44</u>	
STATION OF DECEASED <u>European Area</u>		DATE OF ENTRY ON CURRENT ACTIVE SERVICE <u>17 Jun 1941</u>		LENGTH OF SERVICE FOR PAY PURPOSES	
				YEARS <u>2</u>	MONTHS <u>11</u>
				DAYS <u>22</u>	
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) <u>Mrs. Sophie Fabuz (mother) 345 14th Street, Niagara Falls, New York</u>					
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) <u>Mrs. Sophie Fabuz (mother) 345 14th Street, Niagara Falls, New York</u> <u>Mr. Valentine Fabuz (father) address same as above.</u>					
INVESTIGATION MADE		IN LINE OF DUTY		OWN MISCONDUCT	
YES	NO	YES	NO	YES	NO
WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS	
YES	NO	YES	NO	YES	NO
				X	
				OTHER PAY STATUS (SPECIFY BELOW)	
				YES *X	
				NO	

ADDITIONAL DATA AND/OR STATEMENT

On parachute pay.

RECEIVED
ADJUTANT GENERAL'S OFFICE
AUG 11 1944

COPIES FURNISHED:

P. O., U. S. A.

PAY EFFECTS BUREAU

BRANCH FILE

BATTLE

NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:

John T. Winn

John T. Winn

1

CIER MAY 11 1948

DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER 3508 01477		DATE 15 11 47 DAY MONTH YEAR			
NAME FABUZ RAYMOND S				SERIAL NUMBER 32134639		RANK PFC	ARM 1	DATE OF DEATH	
CEMETERY BLOSVILLE - CARENTAN						7	DISPOSITION OF REMAINS 2300 02 CODE DIST. PT.		
PLOT E	ROW 4	GRAVE 63	COUNTRY FRANCE			CAUSE OF DEATH 5			

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE CHESTER G. TUBINIS 1646 FALLS STREET NIAGARA FALLS, NEW YORK				NAME AND ADDRESS OF NEXT OF KIN MR. WALENTY FABUZ (FATHER) 345 - 14TH STREET - NIAGARA FALLS, NEW YORK			
---	--	--	--	---	--	--	--

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME Fabuz, Raymond S		SERIAL NUMBER 32134639		RANK Utd	DATE OF DEATH Utd		DATE DISTINTERRED 17 Dec, 1947	
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION USAGF			RELIGION Catholic		IDENTIFICATION VERIFIED BY R. W. GANSEL 1st Lt, QMC NAME AND TITLE		

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Uniform		CONDITION OF REMAINS Advanced Decomposition	
OTHER MEANS OF IDENTIFICATION None			
MINOR DISCREPANCIES I None			

REMAINS PREPARED AND PLACED IN CASKET			
DATE 19 January, 1948		BY Theodor R. Harrison Jr	
CASKET SEALED BY Theodor R. Harrison Jr		EMBALMER (Signature) <i>Theodor R. Harrison Jr</i>	
CASKET BOXED AND MARKED		SHIPPING ADDRESS VERIFIED BY	
DATE 19Jan48 BY H. Cummings		JOHN PALYOK JR, 1st Lieut, FA	

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

[Signature]
JOHN PALYOK JR, 1st Lieut, FA
SIGNATURE OF GRS INSPECTOR

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

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM US MC Blossville		TO Casketing Point "A"-Cherbourg	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER Private Michael Strange	
SIGNATURE OF SHIPPER <i>Ernest H. Craigo</i> H. E. ROSEN, 1st Lt, QMC	DATE 16Jan48	SIGNATURE OF RECEIVER <i>Ernest H. Craigo</i> JOHN PALYOK JR, 1st Lt, FA	DATE 16Jan48

2. SHIPPED

FROM Casketing Point "A"-Cherbourg		TO Port Unit - Cherbourg	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>Ernest H. Craigo</i> JOHN PALYOK JR, 1st Lt, FA	DATE	SIGNATURE OF RECEIVER <i>James R. Phillips</i> JOHN E. HENDRY JR Major, CAC	DATE

3. SHIPPED

FROM Port Unit, Cherbourg, France		TO NYPOE	
KIND OF CONVEYANCE USAT MC CARLEY		NAME OF CONVOYER ROBERT V. SCHNEIDER, 1st Lt. CTC.	
SIGNATURE OF SHIPPER <i>John E. Hendry Jr</i> JOHN E. HENDRY JR, Maj. CAC	DATE 10 March 48	SIGNATURE OF RECEIVER <i>Robert V. Schneider</i>	DATE 10 March 48

4. SHIPPED

FROM		TO <i>nype</i>	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>nype</i>	DATE	SIGNATURE OF RECEIVER <i>J. Jacobson</i> JAMES L. MCKINNON COLONEL, T. C.	DATE 4/5/48

5. SHIPPED

FROM <i>nype</i>		TO <i>DC #2</i>	
KIND OF CONVEYANCE <i>Train</i>		NAME OF CONVOYER <i>PFC James M. Johnson</i>	
SIGNATURE OF SHIPPER <i>James L. Johnson</i> JAMES L. JOHNSON COLONEL, T. C.	DATE APR 9 1948	SIGNATURE OF RECEIVER <i>J. M. Johnson</i> J. M. JOHNSON, CAPT., QMC	DATE APR 10 1948

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

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT Valenty Fabuz

SHIP TO: 345 14th Street

Niagara Falls, New York

Pfc. Raymond S. Fabuz

Effects of:

Name 32134629

ASN 153653-D

Case No.

Wt.

DATE March 15, 1945
JRM:SF:bp

Carroll
FOR: Effects Quartermaster

REMARKS:

Inclose Bureau Check
Acct. No. 51908
Amount \$2.74 *ew*
 Inclose "Valuables" item
 Ship "Valuables" item(s)

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

ROUTING:

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

51908

153653

56367 er

March 26

45

Valenty Fabuz

2.74

Two and 74/100

1 ctn

REMARKS:

Franked **FRANKED**
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____
No. of packages 7

MAR 28 1945

mk

APR 5 1945

Shipping Clerk

CORRESPONDENCE ACTION SLIP

NAME		SERIAL NUMBER	INITIALS	DATE
Latus, Raymond S.		32134639	mm	11/19/48
NAME OF DECEDENT	ADDRESS	IDENTIFYING DATA	LETTER TO: Mr. Clyde McCallum, Supt., St. Michael Cemetery, Lewiston, New York Inclosed B/L returned by P.O. Dept marked "for better address" Frd Agt will be unable to contact you upon cover,	
BRONZE	NO UPRIGHT GRANITE	CONSIGNEE		
DISHONORABLE--DRAFT	NOT PERMANENTLY INTERRED	NOT RECOVERED		
CEMETERY REGULATIONS	AGO	MARINE		
NAVY	COAST GUARD	VETERANS ADMINISTRATION		
STATE PENSION	AUTHORIZED INSCRIPTION	ADDITIONAL INSPECTION		
APPLICATION FOR PROOF	NO AGENT	NO STATION		
DUE TO DISTANCE	UNCLAIMED B/L	BROKEN		
DAMAGED	CERTIFICATE IN LIEU	LOST		
FOREIGN	TRUCK	RESHIPMENT		

SHEET <u>1</u> of <u>1</u> SHEETS	ARMY EFFECTS BUREAU INVENTORY		DECEASED <input checked="" type="checkbox"/>
BOX NUMBER	ORIGINAL NUMBER OF PACKAGES <u>1</u>		MISSING <input type="checkbox"/>
TALLY NUMBER <u>6515</u>	INVENTORY DATE <u>30-JAN-48</u>	CASE NUMBER <u>153,653</u>	P O W <input type="checkbox"/>
EFFECTS OF <u>RAYmond S. FABUZ</u>	RANK <u>P. F. C.</u>		ABANDONED <input type="checkbox"/>
A.S.N. <u>32134639</u>	ORGANIZATION <u>Co. F 508th. Inf. Inf.</u>		
PACKAGE DESCRIPTION <u>1 Carton</u>			

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

1- Flashlight.

NAME

FABREZ, REYNOLDS PFC

BAY	PALLET	BOX	TALLY
<u>10</u>	<u>47</u>	<u>439</u>	<u>6515</u>

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
<u>CTN</u>		

FORM #54 FORM #100

345 14th. St. 8
Niagara Falls, N.Y.

Inventory of effects

C.A.T. none

FEB 10 1948

mk

WAREHOUSE SPACE 1747

STORED BY rw

WEIGHT	GI REMOVED
	<input checked="" type="checkbox"/> SHORTAGE ON REVERSE
	IDENT. TAGS REMOVED
	DIARY REMOVED
DATE SHIPPED	LOCKED STORAGE

SHORTAGES

U. S. money order
 #14155
 Amt. \$2.74

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

U. S. money order
 in Amt. Two dollars
 and seventy four cents.

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

Bain
 INVENTORY CLERK

A. G. Gube
 SUPERVISOR

G. I. REMOVED

3 copies to Effects Q.M. ETOUSA; 1 copy in box with effects; 1 copy retained)

9 August 1944
Date

HEADQUARTERS
508th PARACHUTE INFANTRY
APO 250 U. S. Army

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. #30, dated 25 Oct 1943, Hq. SCS, ETOUSA, is Inventory of Effects concerning subject named below.

Fabuz	Raymond	S.	Pfc.	32154639	
(Last Name)	(First Name) (MI)	(Rank)	(A.S.N.)	(Control No.)	(For use of Effects QM. ETOUSA)

Organization Co "F" 508th Parcht. Inf.
(UNIT - - - - Not Branch of Service)

*Status. (Deceased, ~~My~~ ~~Wife~~ ~~Wife~~ ~~Wife~~ ~~Wife~~ ~~Wife~~ ~~Wife~~ ~~Wife~~ ~~Wife~~ ~~Wife~~) on the Eighth day of June 1944

Designated beneficiary (With Address) Mrs. Sophie Fabuz (Mother)
545 14th St., Niagara Falls, N. Y.

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

U.S.M.O. # <u>14155</u>	Amt \$ <u>\$2.74</u>	U.S.M.O. # _____	Amt \$ _____
U.S.M.O. # _____	Amt \$ _____	U.S.M.O. # _____	Amt \$ _____

U.S. Official Check # _____ Amt. _____ Bank _____
(Name & Branch)

#Bank Accounts _____

#Debtors N

#Creditors N

#Inclosed is E

(Will, Power of Attorney, War Bond, Travelers Checks. Describe Fully)

REMARKS (if any)

U. S. Money Order in Amt. Two dollars and Seventy-four Cents

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

INVENTORY OF EFFECTS

(Attach extra sheets if necessary)

- 1 Frcht. Qual. Badge ✓
- 2 Regt. Backgrounds ✓
- 2 Good Conduct Ribbons ✓
- 2 EAME Ribbons ✓
- 1 American Defense Ribbon ✓
- 2 Pencils ✓
- 1 Chain ✓
- 1 Regt. Patch ✓
- 1 Razor ✓
- 2 Pipes ✓
- 1 Flashlight ✓
- 1 Toilet Bag ✓
- 1 Pr. Tennis Shoes ✓

I certify that the foregoing inventory comprises all of subject's effects and that effects were shipped to Effects QM, ETOUSA, A.P.O. 50 G-14, U.S. Army by delivering to Effects, QM 82nd A/B Div on 9 August 1944.

Joseph E. Hartough

Signature - (In ink)

JOSEPH E. HARTOUGH

Name

(Block letters)

2nd I.T.I.M.F., PERSONNEL OFFICER

Rank and organization

*guc
ll*

March 8, 1945

IMMEDIATE ACTION

Re: Raymond S. Fabuz

Parents: Sophie Fabuz and Valenty Fabuz
345-14th Street
Niagara Falls, N.Y.

153653

Mr. P. L. Koob , 2nd Lt. Q.M.C.
Chief, Correspondence Branch
Army Service Forces
Kansas City Quartermaster Depot
Army Effects Bureau
601 Hardesty Avenue
Kansas City 1, Missouri

Dear Mr. Koob:

We have your letter of March 2, 1945 regarding the personal property of my son, Pfc. Raymond Fabuz.

Raymond was 19 years old at the time of his death June 8, 1944. He was not married. Prior to his entry into the service he resided with his parents at the above address.

He did not leave a will, but, named his mother beneficiary for all legal purposes.

I will appreciate your forwarding the property to us at your earliest convenience.

Sincerely

Valenty Fabuz
Valenty Fabuz - Father

File
Bp

den

SUBJECT: Report of transactions in disposing of the effects of

Raymond S. Fabuz, 32154639 late a
(Name of deceased) (Army Serial Number)
Private First Class, Infantry who died
(Grade) (Organization, Army or Service)
on the 8 day of June, 19 44, at France.

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

1. Complying with A.W. 112, a Summary Court-Martial, convened at Kansas City, Mo., pursuant to S.O., 228, Hq., KCQM Depot, dated 25 September 1943, for the purpose of disposing of the effects of the above-named soldier, or person subject to military law, reports that:

- a. No legal representative or widow of decedent being present at decedents camp or quarters, effects of decedent were forwarded to this Summary Court-Martial.
- b. Local debtors owed decedent's estate \$ none, of which the sum of \$ none was collected. (If nothing was found due or collected, state "None"; otherwise attach itemized statement of sums owing and collected.) (Incl. _____.)
- c. Decedent owed undisputed local creditors the sum of \$ none, which has been paid by the Summary Court-Martial from funds of decedent. (See inclosed receipt _____, Incl. _____)
- d. Disposition of decedent's effects (less money paid creditors, if any) has been made by the Summary Court-Martial by transmittal through the quartermaster Corps, at Government expense to person found entitled (See Summary Court-Martial FINDING below)

FINDING

Before a Summary Court-Martial which convened at Kansas City, Missouri, on 13 March 1945, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application or affidavit of Valenty Fabuz 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, Valenty Fabuz of (Name of person found entitled)
345 14th Street, Niagara Falls State of (Number, Street or Avenue) (City, Town or Village)
New York, is the father of the (Relationship or Capacity)

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

(Signature of Summary Court Officer)

INSPECTION CHECKLIST
(FOR USE AT DISTRIBUTION POINT)

NAME FABUZ, RAYMOND S?		RANK PFC	SERIAL NUMBER A 32 134 639
NEXT OF KIN Mr. Walenty Fabuz		ADDRESS 345 - 14th Street Niagara Falls, New York	
SHIPPING CASE - General Appearance (Check ONLY Discrepancies)		CONDITION OF SHIPPING CASE (Check one) <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY	
FINISH (Exterior)	REMARKS <i>Refinish</i>		
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 <i>OK</i>		
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	SIGNATURE OF INSPECTING OFFICE
			4/13/48 <i>[Signature]</i>

REMARKS

Consignee:

Chester G. Tubinis, F. D.
1646 Falls Street
Niagara Falls, New York

ARMY EFFECTS BUREAU

Missing _____
 A.W.O.L. _____
 P.O.W. _____
 Abandoned _____

Flat _____ Box _____

INVENTORY

Shown on Tally In as _____

TALLY IN NO. _____ INVENTORY DATE 10/11/44 CASE NO. 153653

EFFECTS OF RAYMOND S. FABUZ RANK _____ PFC

ARMY SERIAL NO. 32134639 ORG. _____

CONSIGNOR G 14 UK

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

Package No.	Article Description	Remarks
1	<u>\$2.74</u>	Included in one
ENVELOPE	<u>ck # 56357</u>	U. S. Treasurer's Check # 3973 dated 29 Sept 1944 Symbol 212-426 Amount 4533.81 Payable to E. G. M Indorsed to Effects W.M. List # 286 to Section File File attached

CERTIFICATE

(AR 30 - 1830)

Vow. No. **10011**
Att

H. A. BULLOCK
 Capt., F.D.
 SCHENECTADY, N. Y.
 Sp. No. 312-450
 Sta. No. 880

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 NATIONAL OR POST CEMETERY.

PART A - CIVILIAN OR PRIVATE CEMETERY

MAY 1948

A
 REQUEST FOR REIMBURSEMENT OF INTERMENT EXPENSES
 (PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)

NAME OF DECEDENT 295 Raymond S. Fabuz	GRADE PFC	SERIAL NUMBER A 32 134 630	COMPONENT USAGF
---	---------------------	--------------------------------------	---------------------------

I certify that the sum of \$ 75⁰⁰ 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. MICHAEL	CITY OR COUNTY LEWISTON	STATE NEW YORK
---	-----------------------------------	--------------------------

<p><i>INSTRUCTIONS TO PERSON SIGNING THIS FORM</i></p> <ol style="list-style-type: none"> 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, New York ATTN: AGR Division 	<p>SIGNATURE OF CLAIMANT Walentz Fabuz</p> <p>ADDRESS OF CLAIMANT (City, Street or RFD, and State) 345-14ST NIAGARA FALLS N.Y.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">RELATIONSHIP TO DECEDENT FATHER</td> <td style="width: 30%;">DATE MAY-5-1948</td> </tr> </table>	RELATIONSHIP TO DECEDENT FATHER	DATE MAY-5-1948
RELATIONSHIP TO DECEDENT FATHER	DATE MAY-5-1948		

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
--	---

<p><i>INSTRUCTIONS TO PERSON SIGNING THIS FORM</i></p> <ol style="list-style-type: none"> 1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR. 2. Return four copies to: 	<p>SIGNATURE OF CLAIMANT</p> <p>ADDRESS OF CLAIMANT (City, Street or RFD, and State)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">RELATIONSHIP TO DECEDENT</td> <td style="width: 30%;">DATE</td> </tr> </table>	RELATIONSHIP TO DECEDENT	DATE
RELATIONSHIP TO DECEDENT	DATE		

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.

MAY 7 10 22 AM 1948

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.

Valenty Fabus
345 M Street,
Niagara Falls, 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.

MAY 11 1948

RECEIPT OF REMAINS

DISTRIBUTION CENTER **SCHEENCTADY GEN DIST DEPOT US ARMY**
SCHEENCTADY, N. Y.

DAY LETTER

ROUTINE

REMAINS CONSIGNED TO: **CHESTER G TUBINIS**
1646 FALLS ST
NIAGARA FALLS, N. Y.

REMAINS OF THE LATE PRIVATE FIRST CLASS RAYMOND S. FABUZ, A 32 134 639
BEING SHIPPED TO YOU ACCOMPANIED BY A MILITARY ESCORT ON TRAIN NUMBER
257 NEW YORK CENTRAL RAILROAD LEAVING ALBANY 10:15 AM EST 30 APRIL AND
DUE TO ARRIVE NIAGARA FALLS STATION 5:28 PM EST 30 APRIL. 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 30 DAY OF April, 1948

WITNESS (Escort)

CONSIGNEE

REPAIRS
RECORDS BRANCH
MEMORIAL DIVISION
1 45 PM '40

Paul Kromley

Chester G Tubinis

*File
not
Records Account
9 June 48
M. Smith
R. M.*

QMGMH 293
Fabus, Raymond S.
SN 321 34 639

22 November 1948

Mr. Clyde McCallum, Supt.
St. Michael Cemetery
Lewiston, New York

Dear Mr. McCallum:

Reference is made to Bill of Lading No. WT 7950426, covering the shipment of a Government upright marble headstone furnished to mark the grave of the late Raymond S. Fabus.

This Bill of Lading was mailed to you under date of 5 November 1948; however, it was inadvertently addressed Niagara Falls, New York and in view of this fact, same was returned to this office, marked, "For Better Address".

Since the stone was shipped, also, under date of 5 November 1948 to the above address, it is requested you contact the freight agent of the New York Central Railroad Company, Niagara Falls, New York, forwarding to him your correct mailing address, in order that there will be no delay in your receiving the arrival notice. Bill of Lading No. WT 7950426, which will enable you to secure the headstone from the freight station upon its arrival is inclosed.

Your cooperation in this matter will be appreciated.

Sincerely yours,

- 2 Incls
1. B/L WT 7950426
2. instr form

AUDREY W. PRIEBE
Captain, QMC
Memorial Division

gbh

FORM 314.6
Graves Registration
(European, U.S.Misc.)

17 FEB 1947

SUBJECT: Burial Records

TO: Commanding Officer
American Graves Registration Command
European Theater Area
APO 827, c/o Postmaster
New York, New York

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

<u>NAME</u>	<u>RANK/ GRADE</u>	<u>SERIAL NO.</u>	<u>ORGAN.</u>	<u>PLOT</u>	<u>ROW</u>	<u>GRAVE</u>	<u>DATE OF DEATH</u>
<u>Fabun, Raymond S.</u>	Pfc	32134639	Co F 508 Prcnt Inf Rgt	E	4	63	8JUN44
Faerber, Richard P.	Pfc	31466709	Co A 264 Inf Rgt 66 Inf Dv	AA	10	189	25DEC44
Faist, Arthur G.	Sgt	32113034	—	Q	10	187	15JUN44
Field, Floyd H., Jr	Pvt	12000805	Co E 28 Inf Rgt 8 Inf Dv	O	1	3	—
Field, Edward K.	Pvt	12200690	Hq Hq Co 2 Bn 508 Prcnt Inf	A	9	174	—
Fields, Thomas H.	Pfc	34012335	Co L 121 Inf Rgt 8 Inf Dv	Q	2	23	15JUN44
Field, William W.	Opl	34192048	—	L	10	195	6JUN44

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. RELAY
Major, QMG
Assistant

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

Pfc. Raymond S. Fabuz, 39 134 639
 Plot E, Row 4, Grave 63,
 United States Military Cemetery
 Blosville, France

12 September 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, WALENTY FABUZ
(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 checked="" 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 <small>(Specify)</small> _____ | | | |

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
RIVERDALE CEMETERY - LEWISTON NEW YORK
(NAME AND LOCATION OF CEMETERY)
3. BE RETURNED TO _____, THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT _____
(FOREIGN COUNTRY) (LOCATION OF CEMETERY SELECTED)
4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT _____
(LOCATION OF NATIONAL CEMETERY SELECTED)
(Please indicate if your own religious services at a location other than the selected national cemetery are desired by placing an "X" in the proper box)
 YES NO

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

PFC. RAYMOND S. FABUZ 39-134-639
PLOT E, ROW 4 GRAVE 63
UNITED STATES MILITARY CEMETERY
BLOSVILLE, FRANCE

*Order 24 Oct 47
 M. Balle*

111 France 24 Nov 47

OCT 17

MZ

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	TELEPHONE No.	
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS	

OR

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

FULL NAME OF FUNERAL DIRECTOR			
CHESTER G. TUBINIS			
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
1646 FALLS ST.	NIAGARA FALLS	NIAGARA	NEW YORK
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS	TELEPHONE No.	
NIAGARA FALLS N.Y.	FALLS ST. STATION	6824	


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

LAST NAME	FIRST NAME	MIDDLE INITIAL	RELATIONSHIP TO DECEASED
FABUZ	ZOFIA	NONE	MOTHER
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
345-14 th STREET	NIAGARA FALLS	NIAGARA	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.


 (SIGNATURE OF NEXT OF KIN)

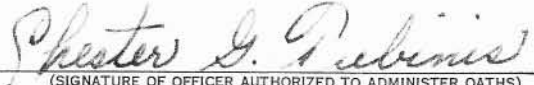
345-14th STREET
 (STREET AND NUMBER)

WALENTY FABUZ
 (NAME PRINTED OR TYPED)

NIAGARA FALLS, NEW YORK
 (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 6th day of October, 1947 at city (or town) of Niagara Falls, county of Niagara, 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
 (OFFICIAL TITLE)

MESSAGEFORM

MESSAGE CENTER No.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT
CALLS V	STA. SER. No. NR	PRECEDENCE
TRANSMISSION INSTRUCTIONS		ORIGINATOR
ACTION		DATE-TIME GROUP MAR 29 1948
INFORMATION	EXEMPT	OPERATING SIGNALS
		GROUP COUNT GR

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Originator) SCHENECTADY GEN DIST DEPOT U S ARMY
SCHENECTADY, NEW YORK

ACTION TO: DEL AND REPORT ANY DELIVERY CHARGES

MR. WALENTY FABUZ

345 - 14th STREET

INFORMATION TO: NIAGARA FALLS, NEW YORK

SECURITY CLASSIFICATION
~~XXXXXXXXXX~~ DAY LETTER

PRECEDENCE FOR
ACTION ROUTINE INFORMATION

ORIGINAL MESSAGE

REFERS TO ANOTHER MESSAGE
IDENTIFICATION CLASSIFICATION

THIS HEADQUARTERS HAS BEEN ADVISED THAT THE REMAINS OF LATE

PRIVATE FIRST CLASS RAYMOND S. FABUZ *ny 005-R*

ARE ENROUTE TO THE UNITED STATES. RECORDS OF THIS OFFICE INDICATE YOU WISH REMAINS

DELIVERED TO CHESTER G. TUBINIS 1646 FALLS STREET NIAGARA FALLS

NEW YORK. 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 SCHENECTADY GENERAL DISTRIBUTION DEPOT ATTENTION AMERICAN GRAVES REGISTRATION DIVISION SCHENECTADY 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

SECURITY CLASSIFICATION

AUTHORIZATION

SIGNATURE

ORIGINATING AGENCY

SYMBOL

DATE-TIME GROUP

OFFICIAL TITLE

PAGE 1 OF 2

MESSAGEFORM

MESSAGE CENTER NO.		TRANSMITTING MEANS		CRYPTOGRAPH OR CLEAR TEXT	
CALLS V	STA. SER. No. NR	PRECEDENCE	TRANSMISSION INSTRUCTIONS	ORIGINATOR	DATE-TIME GROUP
ACTION	INFORMATION	EXEMPT	OPERATING SIGNALS	GROUP COUNT GR	

FROM: (Originator)

SPACE ABOVE FOR SIGNAL CENTER ONLY

SECURITY CLASSIFICATION	
ACTION	PRECEDENCE FOR INFORMATION
<input type="checkbox"/> ORIGINAL MESSAGE	
IDENTIFICATION	REFERS TO ANOTHER MESSAGE CLASSIFICATION

ACTION TO:

.

.

.

INFORMATION TO:

~~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.

R. D. BLANKENHORN
LT. COLONEL, QMC

SECURITY CLASSIFICATION		AUTHORIZATION	
ORIGINATING AGENCY		SIGNATURE	
SYMBOL	DATE-TIME GROUP	OFFICIAL TITLE	PAGE 2 OF 2

WU74 32 COLLECT 3 EXTRA NIAGARAFALLS NY 30 1054A

DISTRIBUTION DEPT AMER GRAVES REG

CONFIRMING TELEGRAM ON LATE PVT 1ST CLASS RAYMOND S FABUZ

PLEASE SHIP AS INSTRUCTED IN TELEGRAM TO CHESTER G TUBINIS

FUNERAL DIRECTOR 1646 FALLS ST NIAGARA FALLS NY

WALENTY FABUZ 345 14 ST.1 1646 345 14.(35)

pd

plc

153653

(S-4-2-45)
JRM:BT:mm
March 2, 1945

Mrs. Sophie Fabuz
345 14th Street
Niagara Falls, New York

Dear Mrs. Fabuz:

The Army Effects Bureau has received from overseas some personal property of your son, Private First Class Raymond S. Fabuz.

To make proper disposition of this property, it is necessary that we have certain information regarding your son's family. I would like to know whether he was married and, if so, the name and address of his widow, also the name and address of his father, if he is living.

If your son left a Will which has been probated, please furnish the original or a certified copy of the Letters Testamentary. Any papers submitted will be returned to you as soon as possible.

Please mail your reply in the inclosed self-addressed envelope which needs no postage, as this will accelerate delivery of the property.

Sincerely yours,

F. L. KOOB
2nd Lt. Q.M.C.
Chief, Correspondence Branch

1 Incl--
Envelope

arrival of same, due to
incorrect address on B/L,
therefore, it is suggested
you contact Ed Agh at the
New York Central RR Co. Ed
station, Niagara Falls, New
York, thereby avoiding storage
charges which occur daily
when etc.

Storage charges are the res-
ponsibility of the Appl.

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

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

Hand
Returned
TO
Sender

REASON CHECKED
Unclaimed
Unknown
For better address
Moved, Left no address
No such office

NOV 10 1940

293 Fabry, Raymond S.

*File in 15 months
Raymond S. Fabry
Shelburne*

Returned
TO
Writer

REASON CHECKED
Unclaimed
Unknown
For better address
Moved, Left no address
No such office in state

|||||

|||||



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

JEM:VJ:co
March 22, 1945

153653
IN REPLY REFER TO

MB

Mr. and Mrs. Valenty Fabuz
345 14th Street
Niagara Falls, New York

Dear Mr. and Mrs. Fabuz:

Thank you for the information furnished the Army Effects Bureau in connection with the personal effects of your son, Private First Class Raymond S. Fabuz.

I am inclosing a check for \$2.74, representing funds which belonged to him. The remainder of the property is being forwarded to you in one carton.

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 wish to express my sympathy in the loss of your son.

Sincerely yours,

A. G. SCHUMACHER
1st Lt. Q.M.C.
Asst. Chief, Admin. Division

1 Incl--
Check

84

spqyg 293
Fabuz, Raymond S.

11 March 1946

Mr. Valentine Fabuz
345 14th Street
Niagara Falls, New York

Dear Mr. Fabuz:

The War Department is most desirous that you be furnished the burial location of your son, the late Private First Class Raymond S. Fabuz, A.S.N. 32 134 639.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery, Bloisville, France, plot E, row 4, grave 63.

This cemetery is located approximately 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 son.

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

LME

503
Pfc. Raymond S. Fabuz, 33 134 639
Plot E, Row 4, Grave 63,
United States Military Cemetery
Bosville, France

12 September 1947

Mr. Valentine Fabuz
345 14th Street
Niagara Falls, New York

Dear Mr. Fabuz:

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.

msh
8 M. V.

SEP 16 2 10
M. V.