

~~REPORT OF BURIAL~~ **REBURIAL**

TM 10-630 AND AR 30-1815

1 July 1944

Date

REBURIAL

<u>Layne Jr.,</u>	<u>Lewis</u>	<u>W.</u>	<u>Pvt</u>	<u>33641934</u>
Last Name	First	Initial	Rank	Serial No.
<u>Unknown</u>	<u>508</u>	<u>Para</u>	<u>82nd A/B Div</u>	<u>29 OCT 1944</u>
	Unit		Organization	
<u>France</u>	<u>1 July 44</u>	<u>Unknown</u>	<u>KIA</u>	
Place of Death	Date of Death		Cause of Death	
<u>1 July 1944 (Reinterred)</u>	<u>Blosville</u>	<u>France</u>		
Time and Date of Burial	Name of Cemetery	Name or Coordinates of Location		
<u>73</u>	<u>4</u>	<u>E</u>	<u>Peg</u>	
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?

DISINTERRED FROM COORD 306:927

REBURIAL

What means of identification were buried with the body?

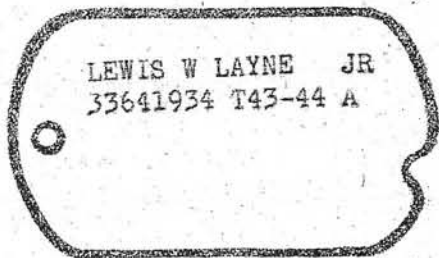
Previously buried in isolated grave

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

Who is buried on:

Deceased's Right:	<u>Lancaster, Eugene (NMI)</u>	<u>34336459</u>	<u>Unknown</u>	<u>82nd A/B Div</u>	<u>74</u>
	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	<u>Molina, Julian (NMI)</u>	<u>36560310</u>	<u>Pvt</u>	<u>82nd A/B Div</u>	<u>72</u>
	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 Protestant

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

NONE

Signature of Officer or other person reporting burial

Dale C Sherwood
DALE C. SHERWOOD Verified by G.R.S. Officer
1st. Lt., QMC

Handwritten notes: 7-26, 11-11-44, 44

1

Interred 27 Feb 1948
D-11-20 - USA St Laurent
C.H. HELMSTRA
1/LT Inf, interring Officer

DISINTERMENT DIRECTIVE

7/3

SECTION A - NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER 3508 02798		DATE 15 11 47 DAY MONTH YEAR		
NAME LAYNE LEWIS W JR				SERIAL NUMBER 33641934		RANK PVT		ARM 1
CEMETERY BLOSVILLE - CARENTAN						1		DATE OF DEATH 3505 80 DAY MONTH YEAR CODE DIST. PT.
PLOT E	ROW 4	GRAVE 73	COUNTRY FRANCE			CAUSE OF DEATH 1		

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE ST. LAURENT, FRANCE				NAME AND ADDRESS OF NEXT OF KIN LEWIS W. LAYNE, SR. (FATHER) 1831 WEST GRACE RICHMOND, VIRGINIA Flag sent			
--	--	--	--	---	--	--	--

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME Layne, Lewis W Jr.		SERIAL NUMBER 33641934		RANK Utd	DATE OF DEATH Utd		DATE DISTINTERRED 17 Dec 47		
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER		ORGANIZATION USAGF			RELIGION Prot.		IDENTIFICATION VERIFIED BY R.W. GANSEL 1st LT GMC NAME AND TITLE		

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL O.D. Uniform				CONDITION OF REMAINS Adv. Decomposition			
OTHER MEANS OF IDENTIFICATION "NE Jr. - 1934" on waistband of trousers. "Layne" on handkerchief							
MINOR DISCREPANCIES 1 None							

NOT FILED
RECORDS ANNOTATED
DATE 11-11-48
BY S & SGT BMS
RECORDS SECTION

REMAINS PREPARED AND PLACED IN CASKET							
DATE 3 Feb 48				BY George Avakian			
CASKET SEALED BY George Avakian				EMBALMER (Signature) <i>George Avakian</i>			
CASKET BOXED AND MARKED				SHIPPING ADDRESS VERIFIED BY Charles J. Missigman			
DATE 3 Feb 48				BY Marvin Noyes			

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

Charles J. Missigman
Charles J. Missigman

SIGNATURE OF GRS INSPECTOR

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

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC Blossville		TO Basketing Pt. B	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER Sgt. Augustino	
SIGNATURE OF SHIPPER <i>W. T. Dalley</i> W.T. DALLEY, CAPT. LMC	DATE 29 Jan 48	SIGNATURE OF RECEIVER <i>Douglas MacKenzie</i> DOUGLAS MACKENZIE, CAPT LMC	DATE 30 Jan 48

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER 12VGE	DATE	SIGNATURE OF RECEIVER	DATE

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER RICHMOND AIRFIELD	
SIGNATURE OF SHIPPER ST. GARRETT BRANCE	DATE	SIGNATURE OF RECEIVER GEMIS M. FRAME SR (FATHER)	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

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

* Corrected Report
original forwarded
9 Aug 44

REPORT OF DEATH

DATE 7 Sept 44
tlc/4630

FULL NAME <i>243</i> Layne, Lewis W. Jr. <i>pc</i>		ARMY SERIAL NUMBER 33 641 934	GRADE Pvt
HOME ADDRESS		ARM OR SERVICE	DATE OF BIRTH
PLACE OF DEATH	CAUSE OF DEATH		DATE OF DEATH * 1 Jul 44
STATION OF DECEASED		DATE OF ENTRY ON CURRENT ACTIVE SERVICE	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)			
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)			
INVESTIGATION MADE?		IN LINE OF DUTY	OWN MISCONDUCT
YES	NO	YES	NO
WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE	IN FLYING PAY STATUS
YES	NO	YES	NO
OTHER PAY STATUS (SPECIFY BELOW)			
YES	NO		

ADDITIONAL DATA AND/OR STATEMENT

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

BATTLE
 NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR

J.A. Marshall
J.A. Marshall

OCT 6 1944
File
Brink

ADJUTANT GENERAL

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

REPORT OF DEATH

DATE 9 Aug 1944
eg 4632

FULL NAME Layne Lewis W Jr		ARMY SERIAL NUMBER 33 641 936		GRADE Pvt	
HOME ADDRESS Richmond, Virginia.		ARM OR SERVICE Parachute Infantry		DATE OF BIRTH 24 Mar 25	
PLACE OF DEATH European Area		CAUSE OF DEATH Killed in action		DATE OF DEATH 2 Jul 44	
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 25 Jun 43		LENGTH OF SERVICE FOR PAY PURPOSES	
				YEARS	MONTHS
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Alma C. Layne, mother, 1831 W Grace St., Richmond, Va.					
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Alma C. Layne, mother, same as above Lewis W. Layne, Sr., father, same as above					
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT	
YES	NO	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	X

ADDITIONAL DATA AND/OR STATEMENT

On Parachute Pay.

The individual named in this report of death is held by the War Department to have been in a missing in action status from 6 Jun 1944 until such absence was terminated on 2 Aug 1944, when ^{evidence} ~~was~~ considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

9 Aug 1944
[Signature]

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

BATTLE
 NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:

[Signature]
J. A. Marshall
ADJUTANT GENERAL

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

* Corrected Report
 original forwarded
 9 Aug 44

REPORT OF DEATH

DATE 7 Sept 44
tlc/4630

FULL NAME <p style="text-align: center;">Layne, Lewis W. Jr.</p>		ARMY SERIAL NUMBER <p style="text-align: center;">33 641 934</p>	GRADE <p style="text-align: center;">Pvt</p>						
HOME ADDRESS		ARM OR SERVICE	DATE OF BIRTH						
PLACE OF DEATH	CAUSE OF DEATH		DATE OF DEATH * <u>1 Jul 44</u>						
STATION OF DECEASED		DATE OF ENTRY ON CURRENT ACTIVE SERVICE	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)									
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)									
INVESTIGATION MADE?		IN LINE OF DUTY	OWN MISCONDUCT						
YES	NO	YES	NO						
WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE	IN FLYING PAY STATUS						
YES	NO	YES	NO						
OTHER PAY STATUS (SPECIFY BELOW)									
YES	NO								

ADDITIONAL DATA AND/OR STATEMENT

COPIES FURNISHED:		
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G. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BATTLE

NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR

J.A. Marshall
 J.A. Marshall

ADJUTANT GENERAL

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

165603

REPORT OF DEATH

DATE 9 Aug 1944
eg 4632

FULL NAME <p style="text-align: center;">Layne Lewis W Jr</p>				ARMY SERIAL NUMBER <p style="text-align: center;">33 641 93A</p>				GRADE <p style="text-align: center;">Pvt</p>					
HOME ADDRESS <p style="text-align: center;">Richmond, Virginia.</p>				ARM OR SERVICE <p style="text-align: center;">Parachute Infantry</p>				DATE OF BIRTH <p style="text-align: center;">24 Mar 25</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;">2 Jul 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;">25 Jun 43</p>				LENGTH OF SERVICE FOR PAY PURPOSES					
								YEARS	MONTHS	DAYS			
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)													
<p style="text-align: center;">Mrs. Alma C. Layne, mother, 1831 W Grace St., Richmond, Va.</p>													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)													
<p style="text-align: center;">Alma C. Layne, mother, same as above Lewis W. Layne, Sr., father, same as above</p>													
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	X

ADDITIONAL DATA AND/OR STATEMENT

On Parachute Pay.

The individual named in this report of death is held by the War Department to have been in a missing in action status from 6 Jun 1944 until such absence was terminated on 2 Aug 1944, when ^{evidence} ~~was~~ considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.



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BATTLE

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BY ORDER OF THE SECRETARY OF WAR:

J. A. Marshall
J. A. Marshall

ADJUTANT GENERAL

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

-BATTLE CASUALTY REPORT

NAME				SERIAL NUMBER			GRADE	ARM OR SERVICE	REPORTING THEATRE
LAYNE LEWIS W JR				33641934			PVT	INF	ETO
PLACE OF CASUALTY			DATE OF CASUALTY			FLYING OR JUMPING STAT	TYPE OF CASUALTY	SHIPMENT NUMBER	
FRANCE			DAY	MONTH	YEAR	J	MIA	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		RELATIONSHIP	DATE NOTIFIED
MRS ALMA C LAYNE		MOTHER	25 JULY 44
NO. AND NAME OF STREET—CITY—STATE			
1831 WEST GRACE STREET RICHMOND VIRGINIA			FMC

REMARKS:

CORRECTED COPY



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 *Farrington* REVIEWED BY *W. J. ...*

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" 32 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.

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

Pvt. Lewis W. Layne, Jr., 33 641 934
Plot E, Row 4, Grave 73,
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, LEWIS W. LAYNE, SR. (Please indicate relationship to the deceased by placing an "X" in the proper box.)
(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

- WIDOW
- WIDOWER
- SON OVER 21 YEARS OLD
- DAUGHTER OVER 21 YEARS OLD
- FATHER
- MOTHER
- BROTHER OVER 21 YEARS OLD
- SISTER OVER 21 YEARS OLD

RELATIONSHIP OTHER THAN ABOVE (Specify) _____

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

- 1. BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS. ST. LAURENT, FRANCE
- 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.)

NONE

220 220 47
11/2
coded 11/4/47 Mitchell

NOV 3

M

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
EXPRESS OFFICE (<i>Nearest railroad passenger station</i>)	TELEGRAPH ADDRESS	STATE OR TERRITORY OF U. S. A., OR COUNTRY
		TELEPHONE No.

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

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

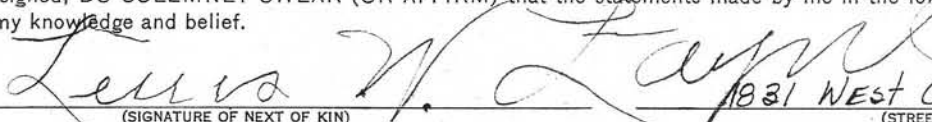
IN CASE OF EMERGENCY THE NAME AND ADDRESS OF THE PERSON NEXT IN LINE OF KINSHIP AFTER ME, AS SET FORTH IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," IS:

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

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

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)

1831 WEST GRACE
 (STREET AND NUMBER)

LEWIS W. LAYNE, SR.
 (NAME PRINTED OR TYPED)

Richmond, VIRGINIA
 (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 13th day of October, 1947, at city (or town) of Richmond, county of _____, and State (or Territory or District) of Virginia


 (SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

Notary Public
 (OFFICIAL TITLE)

*NOTE.—Page 4 is part of the notarial attestation.
 My commission expires May 31, 1948.
 PAGE 2

5 August

1944

Date

HEADQUARTERS
508th PARACHUTE INFANTRY
APO 230 U. S. Army

(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. SCS. ETOUSA, is Inventory of Effects concerning subject named below.

<u>Layne</u> (Last Name)	<u>Lewis</u> (First Name)	<u>W. Jr.</u> (MI)	<u>Pvt</u> (Rank)	<u>33641934</u> (A.S.N.)	(Control No.) (For use of Effects QM. ETOUSA)
-----------------------------	------------------------------	-----------------------	----------------------	-----------------------------	--

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

*Status. (Deceased, ~~MISSING, MIA, POW, Prisoner of War~~) on the 2nd
day of July 19 44

Designated beneficiary (With Address)

Mrs Alma C. Layne (Mother)

1831 W. Grace St., Richmond, Va.

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

U.S.M.O. # _____ Amt \$ _____ U.S.M.O. # _____ Amt \$ _____

U.S.M.O. # _____ Amt \$ _____ U.S.M.O. # _____ Amt \$ _____

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

#Bank Accounts _____

#Debtors _____

#Creditors _____

#Inclosed is _____

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

R E M A R K S (if any)

INVENTORY OF EFFECTS

(Attach extra sheets if necessary)

- 1 Regt Patch ✓
- 1 Bible ✓
- 1 Tie Clasp ✓
- 2 3 Cent Stamps ✓
- 4 1 Cent Stamps ✓
- 7 10 Cent Stamps ✓
- 1 Social Security Card ✓
- 1 Red Cross Card ✓
- 6 Snap Shots ✓
- 1 Toilet Kit ✓

I certify that the foregoing inventory comprises all of subject's effects and that effects were shipped to Effects QM, ETOUSA, A.P.O. 507, G-14, U.S. Army by delivering to Effects, QM 82d A/B Div on 5 August 1944.

Joseph E. Hartsough
Signature - (In Ink)

JOSEPH E. HARTSOUGH)
Name) (Block
) letters)
2nd IT. INF., PERSONNEL OFFICER
Rank and organization

ORDER FOR SHIPMENT

SHIP TO: Mr. Lewis W. Layne, Sr.
1321 West Grace Street
Richmond, Virginia

Effects of:

Name - Pvt. Lewis W. Layne, Jr.

ASN 33641934

Case No. 168603 D

Wt.

DATE January 25, 1945

JRM:NM:wb

L. M. McNeelan
FOR: Effects Quartermaster

REMARKS:

 Inclose Bureau Check
 Acct. No.
 Amount
 Inclose "Valuables" item
 Ship "Valuables" item(s)

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

ROUTING:

 Accounting Branch
 Warehouse Division
 Files Branch, Adm. Div.

1 Ctr

JAN 27 1945

REMARKS:

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

AL

Shipping Clerk

JAN 26 1945

NAME

LAYNE, LEVIS W

PVT

BAY	PALLET	BOX	TALLY
55	81	412	5962

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
CTN		

SUBJECT: Report of transactions in disposing of the effects of

Lewis W. Layne, Jr., 33341934 late a
(Name of deceased) (Army Serial Number)
Private, Parachute Infantry who died
(Grade) (Organization, Army or Service)
on the 1 day of July, 1944, at European Area

TO : The Adjutant General, War Department 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 of \$ None was collected. (If nothing was found due or collected, state "None"; otherwise attach itemized statement of sums owing and collected.) (Incl. None.)

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 None, Incl. None)

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 24 January 1945, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application or affidavit of Lewis W. Layne, Sr. for the effects of the above-named deceased soldier, or person subject to military law, now in the possession of the United States, with other relevant evidence, was duly considered;

Whereupon, this Summary Court-Martial finds that, under the provisions of A.W. 112, Lewis W. Layne, Sr. of 1831 West Grace Street, Richmond State of Virginia, is the Father of the above-named decedent and appears to be entitled to receive his or her effects.

TALLY NUMBER 5962 INVENTORY DATE 11 Jan 1945 CASE NUMBER 165603

EFFECTS OF Lewis W. Layne Jr. RANK PVT 4

A.S.N. 3364 1934 ORGANIZATION Co. C. 508th Arct. Inf.

PACKAGE DESCRIPTION #1 etc

CLOTHING	PERSONAL ITEMS	CONTAINERS
BELT	BRACELET, IDENTIFICATION	BAGS, CLOTH
BELT, MONEY (NO MONEY)	BRUSHES	BAGS, TRAVEL
CLOTH, WASH	CAMERAS	BILLFOLD (NO MONEY)
COATS	GLASSES	CASE,
FOOTWEAR, PR.	KNIVES	FOOTLOCKER
GLOVES, PR.	LIGHTERS	KIT, SEWING
HANDKERCHIEFS	X MISC. INSIGNIA ✓	KIT, TOILET ✓
HEADWEAR	MISC. ITEMS	KIT, WRITING
JACKETS	PEN, FOUNTAIN	PAPERS AND MISC.
OVERCOATS	PENCIL, MECHANICAL	BOOKS
SCARFS	PIPES	BOOKS, ADDRESS
SHIRTS	RELIGIOUS ARTICLES	BOOKS, NOTE
SOCKS, PR.	RIBBONS, DECORATION	BOOKS, PILOT LOG
TIES	RINGS	DIARY (REMOVED FOR DURATION)
TOWELS	TOBACCO	FILMS
TROUSERS, PR.	TOILET ARTICLES	LETTERS
TRUNKS, PR.	WATCH	PAPERS, PERSONAL
UNDERWEAR	WINGS	X PHOTOS 4 ✓ cards ✓
		SHOE SHINE ARTICLES
		SHORT SNOOTER
		SOUVENIRS
		SOUVENIR MONEY
		STATIONERY
		TESTAMENTS ✓
		U.S. MONEY (AMOUNT)

REMARKS: Mrs. Alma C. Layne mother 1831 W. Grace St. Richmond, Va. ATTACHMENTS: FORM #54 FORM #100

no correspondence



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

IN REPLY REFER TO: 165603 M

JRM: NM: cms
January 31, 1945

Mr. Lewis W. Layne, Sr. /
1831 West Grace Street /
Richmond, Virginia /

Dear Mr. Layne:

The Army Effects Bureau has received from overseas some personal effects of your son, Private Lewis W. Layne, Jr. /

These effects are 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 regret the circumstances prompting this letter, and wish to express my sympathy in the loss of your son. /

Yours very truly,

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

SPQYG 293
Layne, Lewis W. Jr.

12 March 1946

Mr. Lewis W. Layne Sr.
1831 West Grace Street
Richmond, Virginia

Dear Mr. Layne Sr.:

The War Department is most desirous that you be furnished the burial location of your son, the late Private Lewis W. Layne, Jr., A.S.N. 33 641 934.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery, Bloisville, France, plot E, row 4, grave 73.

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

kbt

IMS

Pvt. Lewis W. Layne, Jr., 33 641 934
Flot E, Row 4, Grave 73,
United States Military Cemetery
Eloville, France

12 September 1947

Mr. Lewis W. Layne, Sr.
1831 West Grace Street
Richmond, Virginia

Dear Mr. Layne:

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.

Incls.

Sincerely,

THOMAS B. LARKIN
Major General
The Quartermaster General

SEP 17 11 04 AM '47

U. S. M. C. RECORDS

ebf

23 May 1949

MB
Pvt. Lewis W. Layne, Jr., ASN 33 641 934
Plot D, Row 11, Grave 20

Headstone: Cross
St. Laurent (France) U. S. Military Cemetery

Mr. Lewis W. Layne, Sr.
1831 West Grace
Richmond, Virginia

Dear Mr. Layne:

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

ehl

MB
MAY 21 11 23 AM '49
D. O. M. S. BRANCH
MAIL & TELEPHONE BRANCH