

REPORT OF BURIAL

20 Feb '45

TM 10-630 AND AR 30-1815

348

Date

2-370

0-1700222

Serial No.

SOPHIAN

ABRAHAM

Jr.

Capt.

Last Name

First

Initial

Rank

Unk

507 Para Inf Regt

Unk

Unit

Organization

Graignes France

1st Jan to July '44

\*11 June '44

KIA

Place of Death

Date of Death

Cause of Death

1300 20 Feb '45

Marigny, # 1.

Marigny, France.

Time and Date of Burial

Name of Cemetery

Name or Coordinates of Location

22

2

R

Star of David

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?

\*Per ltr.dtd. 30 Aug. '45 (314.6 T/O European, Corr. of Reports of BR)

What means of identification were buried with the body?

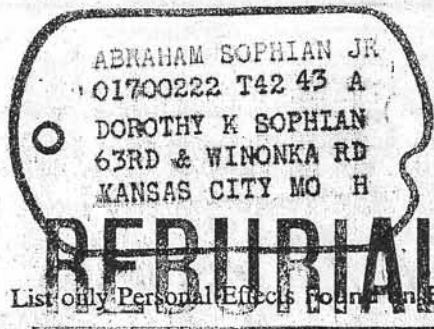
Ident. Tag.

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

Who is buried on:	Jacobson, Robert G.	0-1287012	-	Unk	23
Deceased's Right:	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	Hill, Jessie T.	34515406	-	Unk	21
	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 \_\_\_\_\_ Name

\_\_\_\_\_ Address

Religion H

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

Previously buried in isolated grave located at Graignes

Signature of Officer or other person reporting burial

SAM S. CLAYMAN 2nd Lt., QMC Grs Off.

HEADQUARTERS  
1ST QUARTERMASTER GROUP  
APO 562, U. S. ARMY

REPORT OF INVESTIGATION OF ISOLATED GRAVE  
OR  
UNBURIED REMAINS

Date... 20 Feb '45

\*U.S. ~~XXXXXXXXXXXX~~

1. Name, Rank, ASN of deceased: **SOPHIAN, ABRAHAM Jr. Rank(UNK) ASN O-1700222**
2. Organization of deceased: **Unk**
3. Means of identification: **Ident. Tag**
4. Cause of death: **KIA** 5. Date of death: **o/a July '44**
6. If isolated grave: **Frenchman who was passi thru and left vicinity,**
  - a. Date of burial: **Unk** b. By whom buried: .....
  - c. Inscription on marker: **No marker**
7. Location of grave/~~XXXXXXXXXXXX~~ **One Kilometer from Graignes on route to Tribehou. Coord. 395 - 745.**  
(Be specific, sketch on reverse)
8. Names of deceased and location of other \*graves/unburied remains in immediate vicinity: **None**
9. Description and location of wrecked or abandoned vehicles or equipment in immediate vicinity: **None**
10. Disposition of personal effects: (Itemize if possible) **46**
11. Other pertinent information: **None**  
(Use reverse side if necessary)
12. Information furnished by: **Mayor of Graignes.**  
(Name, title, address)
13. Names and addresses of other persons familiar with the case: .....

14. Action taken: .Remains removed to Marigny Military Cemetery #.1.....

.....  
.....  
.....  
Disinterment approved by: SAM. S. CLAYMAN. 2nd Lt., QMC. Grs. Off.....

Disinterment and ~~XXXXXX~~/reburial made by: SGT., ROBERT. SEEFELD.....

Date of ~~XXXXXX~~/reburial: ..... 20 Feb. ' 45.....

Place of ~~XXXXXX~~/reburial U. S. Military Cemetery: Marigny, France..

.....  
.....  
.....  
Plot ...R... Row .2... Grave .22..

*Sam S. Clayman*

SAM S. CLAYMAN.....

Signature of Investigator

2nd Lt., QMC..... 0-1589123

Rank, ASN

\* Cross out where not applicable

amb

1

# DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER 3555 02620	DATE 15 06 48 DAY MONTH YEAR		
NAME SOPHIAN ABRAHAM JR	SERIAL NUMBER 01700222	GRADE CAPT	ARM 1	RACE 1	RELIGION 3
CEMETERY MARIGNY - ST LO FRANCE	PLOT R	ROW 2	GRAVE 22	DISPOSITION OF REMAINS 7521 <i>08 09</i> CODE DIST. CTR.	

### SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE JEFFERSON CITY NATIONAL CEMETERY— FORT LEAVENWORTH NAT. CEM. JEFFERSON CITY, MISSOURI FORT LEAVENWORTH - KANS	NAME AND ADDRESS OF NEXT OF KIN ABRAHAM SOPHIAN, M.D. (FATHER) 6315 WENONGA ROAD RURAL FREE DELIVERY #7 KANSAS CITY, MISSOURI
---	---

### SECTION C — DISINTERMENT AND IDENTIFICATION

NAME Sophian, Abraham Jr.	SERIAL NUMBER 0-1700222	GRADE Capt	DATE OF DEATH	DATE DISTINTERRED 17 June 1948
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION USAGF	RELIGION H.	IDENTIFICATION VERIFIED BY W. G. Straube Embalmer NAME AND TITLE	

### SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL OD uniform.	CONDITION OF REMAINS Advanced decomposition.
---------------------------------	---

OTHER MEANS OF IDENTIFICATION  
None.

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)  
*(See attached copies)* None.

REMAINS PREPARED AND PLACED IN *Casket* Transfer case.

DATE 17 June 1948 BY W. G. Straube  
CASKET SEALED BY Thomas E. Jones EMBALMER (Signature)

CASKET BOXED AND MARKED  
DATE 2 Jul 48 BY M. H. Noyes  
Shipping address verified by All tags, markings and plates verified by:  
H. F. HILL, Capt, QMC

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

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.

JOHN L. BOYD, 2d Lt, FA  
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

*Signature of Thomas E. Jones*

Reinterment # NC-20507

15  
M  
1948

# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

FROM USMC Marigny		TO USMC St. James	
MODE OF CONVEYANCE Truck		NAME OF CONVOYER Pfc. Dalaney	
SIGNATURE OF SHIPPER J. J. ANDREWS, 1st Lt, Inf.	DATE 23 Jun 48	SIGNATURE OF RECEIVER H. F. HILL, Capt, QMC	DATE 23 Jun 48

## 2. SHIPPED

FROM USMC St. James		TO Casketing Point A, Cherbourg	
MODE OF CONVEYANCE Truck		NAME OF CONVOYER JAMES E. POWELL	
SIGNATURE OF SHIPPER H. F. HILL, Capt, QMC	DATE 9/9/48	SIGNATURE OF RECEIVER <i>E. N. Ciampo</i> E. N. CIAMPO, 1st Lt, FA	DATE 9/9/48

## 3. SHIPPED

FROM Casketing Point A, Cherbourg		TO Port Unit, Cherbourg	
MODE OF CONVEYANCE Truck		NAME OF CONVOYER SFC J. G. FULLER	
SIGNATURE OF SHIPPER E. N. CIAMPO, 1st Lt, FA	DATE 18/11/48	SIGNATURE OF RECEIVER <i>John E. Hendry Jr</i> JOHN E. HENDRY JR, Maj, CAC	DATE 18/11/48

## 4. SHIPPED

FROM Port Unit, Cherbourg		TO NYPOE	
MODE OF CONVEYANCE USAT JAMES E. ROBINSON		NAME OF CONVOYER ALLEN W. CANTRELL, 1st Lt Inf.	
SIGNATURE OF SHIPPER JOHN E. HENDRY JR, Maj, CAC	DATE 27/11/48	SIGNATURE OF RECEIVER <i>M Roberts</i> W. W. PREISCH LIEUT. COLONEL, TC.	DATE DEC 6 - 1948

## 5. SHIPPED

FROM NYPOE		TO DC 08	
MODE OF CONVEYANCE train		NAME OF CONVOYER Alfred J. Kearn Sgt	
SIGNATURE OF SHIPPER W. W. PREISCH LIEUT. COLONEL, TC.	DATE DEC 7 - 1948	SIGNATURE OF RECEIVER <i>L. A. Bockstahler</i> L. A. BOCKSTÄHLER	DATE DEC 9 1948

## 6. SHIPPED

FROM 1st Lt, INF		TO Chief Operations Dept.	
MODE OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

## 7. SHIPPED

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

INSPECTION CHECKLIST  
NC-20507

NAME <b>SOPHIAN, ABRAHAM, JR.</b>	RANK <b>CAPT</b>	SERIAL NO. <b>01700222</b>	ARM OR SERVICE <b>ARMY</b>	DIRECTIVE DATE <b>29 NOV. 48</b>
	RACE <b>WHITE</b>	RELIGION <b>HEBREW</b>	SEX <b>MALE</b>	DIRECTIVE NO. <b>3555 02620</b>

CONSIGNEE AND ADDRESS <b>FORT LEAVENWORTH NATIONAL CEMETERY FORT LEAVENWORTH, KANSAS</b>	NEXT-OF-KIN ADDRESS <b>ABRAHAM SOPHIAN, SR. (FATHER) 6515 AND WENONGA ROAD KANSAS CITY, MISSOURI</b>
---	---

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

<input checked="" type="checkbox"/> FINISH (Exterior) <i>OK</i> <input type="checkbox"/> FINISH (Interior) <input type="checkbox"/> HANDLES <input type="checkbox"/> HANDLE BOLTS <input type="checkbox"/> STENCILING - NAMEPLATE	REMARKS:
	INSPECTED BY: <i>J. Delacher</i>

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

<input type="checkbox"/> FINISH (Exterior) <input type="checkbox"/> HANDLES AND FASTENINGS <input type="checkbox"/> STENCILING - NAMEPLATE <input type="checkbox"/> CAM LOCKS (Sealing) <input type="checkbox"/> ODOR OR MOISTURE	REMARKS:
	INSPECTED BY:

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 REPAIR <input checked="" type="checkbox"/> Repair maintenance
---	---

NECESSARY DISINFECTION (Explain)	CASKET EXCHANGED <input type="checkbox"/>
	SHIPPING CASE REPAIRED <input type="checkbox"/>
	SHIPPING CASE EXCHANGED <input type="checkbox"/>
	REMARKS:

TIME	DATE	SIGNATURE OF MORTICIAN	TIME <i>10 AM</i>	DATE <i>12/18/48</i>	SIGNATURE OF INSPECTING OFFICER <i>Delacher</i>
------	------	------------------------	-------------------	----------------------	---

STORAGE LOCATION			PASS. LIST NO.	CONTROL NUMBER
FLOOR	SECTION	BAY	<b>022</b>	<b>NC-20507</b>
		<b>538</b>		
STAMP INCOMING OR OUTGOING <b>OUTGOING</b>				

FM UWXFE 2/SUPT FT LEAV NATL CEME FT LEAVENWORTH KANSAS 251800Z  
TO C O CHICAGO QM DEPOT 1819 WEST PERSHING ROAD CHICAGO 9 ILL

WD GRNC

FOR AMERICAN GRAVES REGISTRATION DIV REFER TO CONTROL NUMBER NC-20507 PD  
FUNERAL SERVICES FOR THE LATE CAPTAIN ABRAHAM SOPHIAN JUNIOR 01700222  
SCHEDULED FOR MONDAY 3 JANUARY 1949 AT 200 PM PD REQUEST DELIVERB BEFORE  
100 PM ON THAT DATE AND ADVICE OF EXPECTED TIME AND MEANS OF ARRIVAL  
PD J C DAVIS UNDERTAKING COMPANY DESIGNATED TO RECEIVE REMAINS PER  
CONTRACT PD

27/1541Z

# MESSAGEFORM

MESSAGE CENTER NO.

TRANSMITTING MEANS

CRYPTOGRAPH OR CLEAR TEXT

CALLS

STA. SER. No.

PRECEDENCE

TRANSMISSION INSTRUCTIONS

ORIGINATOR

DATE-TIME GROUP

V

NR

DAY LTR

ACTION

INFORMATION

EXEMPT

OPERATING SIGNALS

GROUP COUNT

GR

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Original) AGR DIVISION, CHICAGO QUARTERMASTER DEPOT  
18 19 W. PERSHING RD., CHICAGO, ILL.

SECURITY CLASSIFICATION

ACTION TO:

- SUPERINTENDENT
- FORT LEAVENWORTH NATIONAL CEMETERY
- FORT LEAVENWORTH, KANSAS

INFORMATION TO:

PRECEDENCE FOR  
ACTION INFORMATION ORIGINAL MESSAGEREFERS TO ANOTHER MESSAGE  
IDENTIFICATION CLASSIFICATION

REFERENCE ROSTER THIS DISTRIBUTION CENTER DATED 7 DECEMBER 48 THE  
REMAINS OF THE LATE CAPT. ABRAHAM SOPHIAN, JR.  
ARE READY FOR DELIVERY TO YOUR NATIONAL CEMETERY REQUEST YOU ADVISE DESIRED DATE  
AND HOUR OF DELIVERY IN REPLY REFER TO CONTROL NUMBER NC-20507 AND NAME OF  
DECEASED NOK'S CORRECT ADDRESS IS 6315 WENONGA ROAD, R. F. D. #7,  
~~MO~~ KANSAS CITY, MO.

R. D. BLANKENHORN  
LT. COLONEL, QMC  
CHIEF, AGR DIVISION

DEC 22 4 21 PM '48

WESTERN UNION

17

SECURITY CLASSIFICATION

AUTHORIZATION

SIGNATURE

ORIGINATING AGENCY

SYMBOL

DATE-TIME GROUP

OFFICIAL TITLE

THOS. O. CALL  
MAJOR, QMC

PAGE OF

23 DEC 48



WU A034 38/37 CORRECT

KANSASCITY MO DEC 3 1948 820A

COMDG OFCR

CHGO QM DEPOT AGRD

I CONFIRM INSTRUCTIONS TO HAVE REMAINS MY SON ABRAHAM  
SOPHIAN JR CONTROL NUMBER NC20507 INTERRED IN FORT

LEAVENWORTH NATIONAL CEMETERY FORT LEAVENWORTH KANSAS  
MY CORRECT MAILING ADDRESS 6315 WENONGA ROAD KANSAS CITY

FIVE MISSOURI RFD 7

ABRAHAM SOPHIAN MD

853A

NC20507 6315 7..

DEC 3 9 09 AM '48

RECEIVED  
SIGNAL CENTER

*noted ✓  
EQA*

*change in  
not address  
EWS*

3

34206

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

0

MESSAGEFORM		MESSAGE CENTER No.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT	
CALLS V	STA. SER. No. NR	PRECEDENCE DAY LETTER	TRANSMISSION INSTRUCTIONS	ORIG. IATOR	DATE TIME GROUP
ACTION	INFORMATION		EXEMPT	OPERATING SIGNALS	GROUP COUNT GR
SPACE ABOVE FOR SIGNAL CENTER ONLY					
FROM: (Originator) AGR DIV., CHICAGO QUARTERMASTER DEPOT 18 19 W, PERSHING RD., CHICAGO, ILL.			SECURITY CLASSIFICATION		
ACTION TO:			PRECEDENCE FOR		
<ul style="list-style-type: none"> <li>• ABRAHAM SOPHIAN, SR.</li> <li>• 6315 AND WENONGA ROAD</li> <li>• KANSAS CITY, MISSOURI</li> </ul>			ACTION                      INFORMATION <input type="checkbox"/> ORIGINAL MESSAGE REFERS TO ANOTHER MESSAGE IDENTIFICATION                      CLASSIFICATION		
INFORMATION TO:					
WE HAVE BEEN ADVISED REMAINS OF THE LATE <b>CAPT. ABRAHAM SOPHIAN, JR.</b>					
ARE ENROUTE TO THE UNITED STATES. OUR RECORDS INDICATE YOU WISH REMAINS INTERRED IN <b>FORT LEAVENWORTH NATIONAL CEMETERY, FORT LEAVENWORTH, KANSAS</b>					
WITHIN 48 HOURS AFTER RECEIPT OF THIS MESSAGE PLEASE CONFIRM YOUR ORIGINAL INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS AND FURNISH YOUR CORRECT MAILING ADDRESS BY TELEGRAM COLLECT TO COMMANDING OFFICER CHICAGO QUARTERMASTER DEPOT AGRD 1819 WEST PERSHING ROAD CHICAGO ILLINOIS. REPLY IS NECESSARY WITHIN THIS PERIOD SINCE IT WILL NOT BE POSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF 48 HOURS. WHILE FINAL INTERMENT OF THE REMAINS WILL BE MADE AS SOON AS PRACTICABLE AFTER RECEIPT FACTORS BEYOND OUR CONTROL MAY DELAY DELIVERY OF REMAINS TO NATIONAL CEMETERY FOR SEVERAL WEEKS. HOWEVER NATIONAL CEMETERY SUPERINTENDENT WILL NOTIFY YOU BY TELEGRAM DATE AND HOUR FUNERAL SERVICES WILL BE HELD IN SUFFICIENT TIME TO PERMIT YOUR ATTENDANCE AT YOUR OWN EXPENSE. APPROPRIATE JOINT MILITARY AND RELIGIOUS SERVICES WILL BE PROVIDED AT GRAVESIDE BY VETERANS ORGANIZATION. REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. INTERMENT EXPENSE ALLOWANCE OF \$75.00 IS NOT AUTHORIZED IN ANY CASE WHERE BURIAL IS MADE IN A NATIONAL CEMETERY. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. IN TELEGRAM REPLY REFER TO CONTROL					
NUMBER	<b>NC-20507</b>		AND NAME OF DECEASED.		
			<b>R. W. BENNETT LT. COLONEL, QMC CHIEF, AGR DIVISION</b>		
WESTERN UNION		REV. 4G-1			
SECURITY CLASSIFICATION			AUTHORIZATION		
ORIGINATING AGENCY			SIGNATURE		
SYMBOL	DATE-TIME GROUP	OFFICIAL TITLE		PAGE OF	
	DEC 2 1949	<b>THOS. O. CALL MAJOR, QMC</b>			

Date 3 January 1949

TO: Abraham Sopian Sr.  
6315 Wenonga Rd.  
R.F.D. # 7  
Kansas City Missouri

The authorized inscription for a Government headstone of the general type (furnished for all decedents except those who served only during the Civil and Spanish-American Wars) includes: (1) The State from which the veteran came; (2) religious emblem in a small circle above the inscription on the face of the headstone; and (3) the dates of birth and death.

In order that the appropriate information, as desired by the next of kin, may be shown on the headstone for the decedent whose name is listed below, it is requested that you fill in the proper spaces indicated below the data called for, and RETURN THIS FORM PROMPTLY TO THE

Superintendent, Fort Leavenworth National Cemetery, Fort Leavenworth Kansas

Superintendent of Cemetery or Commanding Officer of Post

If this form is not returned to the Superintendent within fifteen (15) days from date of mailing, the headstone will be ordered with the data as to religious emblem, State and date of birth inscribed thereon as shown in the official records, and NO CHANGE WILL BE MADE AT A LATER DATE AT GOVERNMENT EXPENSE.

To be filled in by Superintendent or Commanding Officer

Name of Veteran Abraham Sopian Jr.  
Rank, etc. 01700222 Captain, U.S. Army  
Grave or lot No. 233 # 2 Officers Section  
Date of death W.W. II Deceased  
Date buried 3 January, 1949

To be filled in by Next of Kin

State desired MISSOURI  
Religious emblem desired STAR OF DAVID  
(Latin Cross for Christian Faith, Star of David for Hebrew Faith)  
Date of birth April 28th 1915  
Address of kin 6315 WENONGA ROAD, KANSAS CITY, 5, MO  
Signature Abraham Sopian, M.D. Date JANUARY 6, 1949

FEB 11 1949 FILE

*Handwritten signatures and initials:*  
S. S. S. S. S.  
S. S. S. S. S.

**DISINTERMENT DIRECTIVE  
CHANGE ACTION SHEET**

TO: <b>DISINTERMENT DIRECTIVE SECTION REPATRIATION RECORDS BRANCH</b>		FROM: <b>REPLY FORM ACCEPTANCE SECTION FAMILY CORRESPONDENCE BRANCH</b>	
DISINTERMENT DIRECTIVE NO.  02620	FINAL DISPOSITION CODE  09-7521	DISPATCH DATE OF PREVIOUS DD  22 Oct 48	
NAME (Last, First, Middle)  Sophian, Jr. Abraham		RANK  Capt.	SERIAL NUMBER  01-700 222
CEMETERY  Marigny, France	PLOT  R	ROW  2	GRAVE  22

ITEM	CHANGE	
	FROM	TO
OPTION	No Change	
CONSIGNEE NAME	Jefferson City National Cemetery	Fort Leavenworth National Cemetery
ADDRESS	Jefferson City, Missouri	Ft. Leavenworth, Kansas
DISTRIBUTION CENTER NUMBER	#09	09
NEXT OF KIN NAME	No Change <b>CHANGE</b>	
ADDRESS	<b>CHANGE</b>	

AUTHORITY

Per letter signed by Next of Kin and dated 29 Oct 1948.

W-S

DATE  22 Nov 48	CLERK'S SIGNATURE  <i>Alston</i> Alston #2
-----------------------	---

2

# DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER: 3555 02620

DATE: 15 06 48  
DAY MONTH YEAR

NAME: SOPHIAN ABRAHAM JR

SERIAL NUMBER: 01700222

GRADE: CAPT

ARM: 1

RACE: 1

RELIGION: 3

CEMETERY: MARIGNY - ST LO FRANCE

PLOT: R

ROW: 2

GRAVE: 22

DISPOSITION OF REMAINS: 7521 08 09  
CODE DIST. CTR.

## SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE: JEFFERSON CITY NATIONAL CEMETERY, JEFFERSON CITY, MISSOURI

NAME AND ADDRESS OF NEXT OF KIN: ABRAHAM SOPHIAN, M.D. (FATHER), 6315 WENONGA ROAD, RURAL FREE DELIVERY #7, KANSAS CITY, MISSOURI

## SECTION C — DISINTERMENT AND IDENTIFICATION

NAME: Sophian, Abraham Jr.

SERIAL NUMBER: 0-1700222

GRADE: Capt

DATE OF DEATH: [blank]

DATE DISTINTERRED: 17 June 1948

IDENTIFICATION TAG ON:  REMAINS,  MARKER

ORGANIZATION: USAGF

RELIGION: H.

IDENTIFICATION VERIFIED BY: W. G. Straube, Embalmer

## SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: OD uniform.

CONDITION OF REMAINS: Advanced decomposition.

OTHER MEANS OF IDENTIFICATION: None.

# CANCELLED

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

None.

REMAINS PREPARED AND PLACED IN ~~CASKET~~ Transfer case.

DATE: 17 June 1948

BY: W. G. Straube

CASKET SEALED BY: Thomas E. Jones

EMBALMER (Signature): [Signature]

CASKET BOXED AND MARKED

DATE: 2 Jul 48

BY: M. H. Noyes

SHIPPING ADDRESS VERIFIED BY ALL tags, markings and plates verified by: H. F. HILL, Capt, QMC

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

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.

REMARKS AND SPECIAL INSTRUCTIONS

Signature of AGRS Inspector: [Signature]

Signature of AGRS Inspector: [Signature]

NOV 30 1948

NOV 30 1948

# RECORD OF CUSTODIAL TRANSFER

~~FORM 1003 30 JUN 48~~  
~~1003~~  
~~1003~~

## 1. SHIPPED

FROM USMC St. James	TO USMC St. James
KIND OF CONVEYANCE Truck	NAME OF CONVOYER Pfc Dalaney
SIGNATURE OF SHIPPER J. J. ANDREWS, 1st Lt, Inf.	SIGNATURE OF RECEIVER H. F. HILL, Capt, OMC
DATE 23 Jun 48	DATE 23 Jun 48

## 2. SHIPPED

FROM USMC St. James	TO Casketing Point A, Cherbourg
KIND OF CONVEYANCE Truck	NAME OF CONVOYER JAMES E. POWELL
SIGNATURE OF SHIPPER H. F. HILL, Capt, OMC	SIGNATURE OF RECEIVER E. N. CIAMPO, 1st Lt, FA
DATE 9/9/48	DATE 9/9/48

## 3. SHIPPED

FROM Casketing Point A, Cherbourg	TO Port Unit, Cherbourg
KIND OF CONVEYANCE Truck	NAME OF CONVOYER SPC J. G. FULLER
SIGNATURE OF SHIPPER E. N. CIAMPO, 1st Lt, FA	SIGNATURE OF RECEIVER JOHN E. HENDRY JR, Maj, CAC
DATE 18/11/48	DATE 18/11/48

## 4. SHIPPED

FROM Port Unit, Cherbourg	TO HYPOE
KIND OF CONVEYANCE USAT JAMES E. ROBINSON	NAME OF CONVOYER ALLEN W. CANTRELL, 1st Lt Inf.
SIGNATURE OF SHIPPER JOHN E. HENDRY JR, Maj, CAC	SIGNATURE OF RECEIVER
DATE 27/11/48	DATE

## 5. SHIPPED

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

## 6. SHIPPED

FROM JEFFERSON CITY NATIONAL CEMETERY	TO JEFFERSON CITY NATIONAL CEMETERY
KIND OF CONVEYANCE	NAME OF CONVOYER
SIGNATURE OF SHIPPER	SIGNATURE OF RECEIVER
DATE	DATE

## 7. SHIPPED

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

ORIGINAL

CORRESPONDENCE ACTION SHEET

NAME OF DECEDENT (Last, First, Middle)

Sophian, Abraham, Jr.

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

U.S.M.C., Marigny, France

R 2 22

MR. Mrs. Abraham Sophian, Sr.

1406 Bryant Bldg.

Kansas City 6, Mo.

Father

PARAGRAPHS (Sequence)      ADDITIONAL DATA — MODIFICATIONS

165a

83aa — Jefferson City National Cemetery,  
Jefferson City Missouri — Fort Leavenworth  
National Cemetery, Fort Leavenworth, Kansas.

166m

Not on b.b. checked 11-24-48.

GRADE

Capt.

SERIAL NUMBER

01700222

ANALYST INITIALS AND DATE      TYPYST INITIALS      REVIEWER INITIALS AND DATE

MAV 11-24-48

REQUEST FOR INFORMATION  
ON DISPOSITION OF REMAINS

TO: REPLY FORM ACCEPTANCE SECTION FAMILY CORRESPONDENCE BRANCH		FROM: FAMILY LETTERS SECTION FAMILY CORRESPONDENCE BRANCH	
NAME OF DECEDENT (Last, First, Middle) <i>Sophian, Abraham</i>		GRADE <i>Capt.</i>	SERIAL NUMBER <i>0-1700222</i>
CEMETERY <i>Mariigny</i>	PLOT	ROW	GRAVE

THE ATTACHED CORRESPONDENCE PERTAINS TO THE DISPOSITION OF THE REMAINS OF THE ABOVE NAMED DECEDENT. IT IS REQUESTED THAT INFORMATION ON ITEMS CHECKED BELOW BE FURNISHED THIS OFFICE IN ORDER TO REPLY TO CORRESPONDENCE.

<input type="checkbox"/> HAS QOMG FORM 345 BEEN DISPATCHED?	
<input type="checkbox"/> HAS QOMG FORM 345 BEEN RECEIVED AND ACCEPTED?	
<input type="checkbox"/> WHAT OPTION WAS SELECTED?	
<input type="checkbox"/> BY WHOM WAS QOMG FORM 345 EXECUTED?	
<input type="checkbox"/> DID ROSTER INDICATE RELINQUISHMENT OF DISPOSITION AUTHORITY?	
<input checked="" type="checkbox"/> CHANGE OF DECISION	
<input type="checkbox"/> FORWARDED FOR YOUR INFORMATION AND ANY ACTION DEEMED NECESSARY.	

REMARKS

*cc 3555  
02620  
09-7521  
Dreg, 22 Oct '48*

*(5' 6" tall)*

ANALYST SIGNATURE	DATE <i>3 Nov.</i>
-------------------	--------------------



RRE Form #39  
13 Jul 48

Attached hereto correspondence and/or other identifying media of possible archival value, pertaining to:

SOPHIAN	Abraham	JR	CAPT	01700222
(Last Name)	(First Name)	(Initial)	(Rank)	(ASF)

Repatriated to the United States: \_\_\_\_\_

25 NOV 1948

STATION 414

OFFICE OF THE QUARTERMASTER GENERAL  
MEMORIAL DIVISION

SUBJECT: NEW LOI  
MACHINE SECTION, R & R BRANCH, Memorial Division  
Room 2701, Temporary B Bldg

Date 2-27- 1948

*293*  
CAPT.

Rank

ABRAHAM SOPHIAN Jr

Name

0-1700222

Serial No.

GRAVE LOCATION:

MARIGNY

Cemetery

R

Plot

2

Row

22

Grave

LOI TO BE SENT TO:

Mr

Miss

Mrs

ABRAHAM SOPHIAN Sr

Name FATHER

631 - WENONGA

Street

KANSAS CITY 5, MISSOURI

City

State

*new* L. O. L. UNIT APR 5 1948

*to file in Mulligan*  
MULLIGAN

401 5057

*File in P. Mulligan  
Madame*

# REQUEST FOR DISPOSITION OF REMAINS VS

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

DATE: 12-4-22-48  
Podu

Capt Abraham Sophian, Jr., 01 700 222  
Plot R, Row 2, Grave 22,  
United States Military Cemetery  
Marigny, France

5 April 1948

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

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

## PART I

I, ABRAHAM SOPHIAN M.D.  
(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

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

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

I HAVE FAMILIARIZED MYSELF WITH THE OPTIONS WHICH HAVE BEEN MADE AVAILABLE TO ME WITH RESPECT TO THE FINAL RESTING PLACE OF THE DECEASED 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.)

A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS.

IN 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 \_\_\_\_\_ 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 JEFFERSON CITY, MISSOURI  
(Please indicate if your own religious services at a location other than the selected national cemetery are desired by placing an "X" in the proper box)

YES  NO

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

NONE

DD PROC 10/12/48 AB

6/23/48  
Shunnell

**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.

Abraham Sophian M.D.  
(SIGNATURE OF NEXT OF KIN)

6315 WENONGA ROAD  
(STREET AND NUMBER)

ABRAHAM SOPHIAN, M.D.  
(NAME PRINTED OR TYPED)

KANSAS CITY 5, Mo - R.F.D 7  
(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 14<sup>th</sup> day of April, 1948, at city (or town) of Kansas City, county of Jackson, and State (or Territory or District) of Missouri

Alameda M. Smith  
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)  
Notary Public  
(OFFICIAL TITLE)

\*NOTE.--Page 4 is part of the notarial attestation.

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

293

Capt Abraham Soghian, Jr., O-1 700 222  
Plot R, Row 2, Grave 22,  
United States Military Cemetery  
Marigny, France

28 October 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, \_\_\_\_\_ (PLEASE PRINT OR TYPE NAME OF NEXT OF KIN) (Please indicate relationship to the deceased by placing an "X" in the proper box.)

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

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

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

Roda 3/5  
NONE

File  
P. S. ...  
sup  
PAGE 1

**PART II—RELINQUISHMENT OF DISPOSITION AUTHORITY**

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

I, THE decedent's widow (remarried), 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  SOPHIAN	FIRST NAME  ABRAHAM	MIDDLE INITIAL
RELATIONSHIP TO THE DECEASED  FATHER		
NUMBER AND STREET  63rd & Wenonga Road	CITY OR TOWN  Kansas City 5,	STATE OR COUNTRY  Missouri

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

<p><i>Dorothy Keck Carey</i>  <small>(SIGNATURE OF NEXT OF KIN)</small></p> <p>DOROTHY KECK CAREY  <small>(NAME PRINTED OR TYPED)</small></p>	<p>November 8th, 1947  <small>(DATE)</small></p> <p>539 27th St., N.E.  <small>(STREET AND NUMBER)</small></p> <p>Cedar Rapids, Iowa  <small>(CITY AND STATE)</small></p>
---	---

**PART III**

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

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

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

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

30

INFORMATION GUIDE FOR CW/L TO NOK

CEMETERY USMC MARIGNY, FRANCE FLOT R ROW 2 GRAVE 22  
 NAME SOPHIAN, ABRAHAM, JR. RANK CAPT. ASN 01 700 222

Next of Kin (Relationship) WIFE

NAME MRS. DOROTHY K. SOPHIAN

Street 63<sup>rd</sup> + WENONGA ROAD

City & State KANSAS CITY, MISSOURI

Original Burial  Reburial

DATE 19 Aug. 1946 Name of Person Executing Form Mrs. N. Wake  
 (First) (Last)

Photo Yes  No

**WAR DEPARTMENT**  
**THE ADJUTANT GENERAL'S OFFICE**

WASHINGTON 25, D. C.

REPORT OF DEATH

DATE 9 April 1945 geb/382

FULL NAME <i>Tr</i> SOPHIAN, ABRAHAM JR.		ARMY SERIAL NUMBER 01700222		GRADE Capt.									
HOME ADDRESS Kansas City, Missouri		ARM OR SERVICE MC		DATE OF BIRTH 28 April 1915									
PLACE OF DEATH European Area		CAUSE OF DEATH Killed in action		DATE OF DEATH 11 June 1944									
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 17 Aug 1942		LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS									
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Dorothy K. Sophian, wife, 63rd and Wenonga Road., Kansas City, Missouri													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Dorothy K. Sophian, wife, 63rd and Wenonga Road., Kansas City, Missouri Dr. Abraham Sophian, Sr., father, 63rd and Wenonga Road, Kansas City, Missouri													
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

BATTLE  NON-BATTLE

\*Jump status.

The individual named in this report of death is held by the War Dept to have been in a missing in action status from 11 June 1944 until such absence was terminated on 3 April 1945, when evidence considered sufficient to establish the fact of death was rec'd 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.
2. G. O. M. G.	O. F. D.	ARMY EFFECTS BUREAU
G. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BY ORDER OF THE SECRETARY OF WAR:

*John M. O'Brien*  
ADJUTANT GENERAL



162.407

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

REPORT OF DEATH

DATE 9 April 1945 *job/382*

FULL NAME <b>SOPHIAN, ABRAHAM JR.</b>				ARMY SERIAL NUMBER <b>01700222</b>				GRADE <b>Capt.</b>							
HOME ADDRESS <b>Kansas City, Missouri</b>						ARM OR SERVICE <b>MC</b>				DATE OF BIRTH <b>28 April 1915</b>					
PLACE OF DEATH <b>European Area</b>						CAUSE OF DEATH <b>Killed in action</b>						DATE OF DEATH <b>11 June 1944</b>			
STATION OF DECEASED <b>European Area</b>						DATE OF ENTRY ON CURRENT ACTIVE SERVICE <b>17 Aug 1942</b>				LENGTH OF SERVICE FOR PAY PURPOSES					
										YEARS		MONTHS		DAYS	
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)															
<b>Mrs. Dorothy K. Sophian, wife, 63rd and Wenonga Road., Kansas City, Missouri</b>															
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)															
<b>Mrs. Dorothy K. Sophian, wife, 63rd and Wenonga Road., Kansas City, Missouri</b>															
<b>Dr. Abraham Sophian, Sr., father, 63rd and Wenonga Road, Kansas City, Missouri</b>															
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

BATTLE  NON-BATTLE

\*Jump status.

The individual named in this report of death is held by the War Dept to have been in a missing in action status from 11 June 1944 until such absence was terminated on 3 April 1945, when evidence considered sufficient to establish the fact of death was rec'd 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.
2. O. C. M. O.	O. F. D.	ARMY EFFECTS BUREAU
G. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BY ORDER OF THE SECRETARY OF WAR.

*John M. O'Keefe*  
ADJUTANT GENERAL

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

-BATTLE CASUALTY REPORT

16240

NAME				SERIAL NUMBER			GRADE		ARM OR SERVICE		REPORTING THEATRE	
SOPHIAN ABRAHAM JR				01700222			CAPT		MC		ETO	
PLACE OF CASUALTY				DATE OF CASUALTY			FLYING OR JUMPING STAT		TYPE OF CASUALTY		SHIPMENT NUMBER	
FRANCE				DAY	MONTH	YEAR	J		MIA		141	

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 DOROTHY K <del>KERRICK</del> SOPHIAN			WIFE			1 Aug 44 ent		
NO. AND NAME OF STREET—CITY—STATE								
63RD AND WENONGA ROAD						KANSAS CITY MISSOURI		

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 Danson 1 Aug 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.

Date 3 January 1949

TO: Abraham Sopian Sr.  
6315 Wenonga Rd.  
R.F.D. # 7  
Kansas City Missouri

The authorized inscription for a Government headstone of the general type (furnished for all decedents except those who served only during the Civil and Spanish-American Wars) includes: (1) The State from which the veteran came; (2) religious emblem in a small circle above the inscription on the face of the headstone; and (3) the dates of birth and death.

In order that the appropriate information, as desired by the next of kin, may be shown on the headstone for the decedent whose name is listed below, it is requested that you fill in the proper spaces indicated below the data called for, and RETURN THIS FORM PROMPTLY TO THE

Superintendent, Fort Leavenworth National Cemetery, Fort Leavenworth Kansas

Superintendent of Cemetery or Commanding Officer of Post

If this form is not returned to the Superintendent within fifteen (15) days from date of mailing, the headstone will be ordered with the data as to religious emblem, State and date of birth inscribed thereon as shown in the official records, and NO CHANGE WILL BE MADE AT A LATER DATE AT GOVERNMENT EXPENSE.

To be filled in by Superintendent or Commanding Officer

Name of Veteran Abraham Sopian Jr.  
Rank, etc. 01700222 Captain, U.S. Army  
Grave or lot No. 233 # 2 Officers Section  
Date of death W.W. II Deceased  
Date buried 3 January, 1949

To be filled in by Next of Kin

State desired MISSOURI  
Religious emblem desired STAR OF DAVID  
(Latin Cross for Christian Faith, Star of David for Hebrew Faith)  
Date of birth April 28th 1915  
Address of kin 6315 WENONGA ROAD, KANSAS CITY, 5 Mo  
Signature Abraham Sopian, M.D. Date JANUARY 6 1949

FEB 11 1949 File  
16-4438-1 U. S. GOVERNMENT PRINTING OFFICE

*Handwritten signatures and initials:*  
Sopian  
Clem

MESSAGEFORM		MESSAGE CENTER No.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT	
CALLS V	STA. SER. No. NR	PRECEDENCE DAY LETTER	TRANSMISSION INSTRUCTIONS	ORIG.ATOR	DATE-TIME GROUP
ACTION	INFORMATION	EXEMPT	OPERATING SIGNALS	GROUP COUNT GR	
SPACE ABOVE FOR SIGNAL CENTER ONLY					
FROM: (Originator) AGR DIV., CHICAGO QUARTERMASTER DEPOT 1819 W, PERSHING RD., CHICAGO, ILL.			SECURITY CLASSIFICATION		
ACTION TO:			PRECEDENCE FOR		
<ul style="list-style-type: none"> <li>• ABRAHAM SOPHIAN, SR.</li> <li>• 6315 AND WENONGA ROAD</li> <li>• KANSAS CITY, MISSOURI</li> </ul>			ACTION                      INFORMATION <input type="checkbox"/> ORIGINAL MESSAGE REFERS TO ANOTHER MESSAGE IDENTIFICATION                      CLASSIFICATION		
INFORMATION TO:					
WE HAVE BEEN ADVISED REMAINS OF THE LATE <b>CAPT. ABRAHAM SOPHIAN, JR.</b>					
ARE ENROUTE TO THE UNITED STATES. OUR RECORDS INDICATE YOU WISH REMAINS INTERRED IN <b>FORT LEAVENWORTH NATIONAL CEMETERY, FORT LEAVENWORTH, KANSAS</b>					
WITHIN 48 HOURS AFTER RECEIPT OF THIS MESSAGE PLEASE CONFIRM YOUR ORIGINAL INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS AND FURNISH YOUR CORRECT MAILING ADDRESS BY TELEGRAM COLLECT TO COMMANDING OFFICER CHICAGO QUARTERMASTER DEPOT AGRD 1819 WEST PERSHING ROAD CHICAGO ILLINOIS. REPLY IS NECESSARY WITHIN THIS PERIOD SINCE IT WILL NOT BE POSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF 48 HOURS. WHILE FINAL INTERMENT OF THE REMAINS WILL BE MADE AS SOON AS PRACTICABLE AFTER RECEIPT FACTORS BEYOND OUR CONTROL MAY DELAY DELIVERY OF REMAINS TO NATIONAL CEMETERY FOR SEVERAL WEEKS. HOWEVER NATIONAL CEMETERY SUPERINTENDENT WILL NOTIFY YOU BY TELEGRAM DATE AND HOUR FUNERAL SERVICES WILL BE HELD IN SUFFICIENT TIME TO PERMIT YOUR ATTENDANCE AT YOUR OWN EXPENSE. APPROPRIATE JOINT MILITARY AND RELIGIOUS SERVICES WILL BE PROVIDED AT GRAVESIDE BY VETERANS ORGANIZATION. REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. INTERMENT EXPENSE ALLOWANCE OF \$75.00 IS NOT AUTHORIZED IN ANY CASE WHERE BURIAL IS MADE IN A NATIONAL CEMETERY. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. IN TELEGRAM REPLY REFER TO CONTROL					
NUMBER		<b>NC-20507</b>		AND NAME OF DECEASED.	
			<b>R. W. BENNETT LT. COLONEL, QMC CHIEF, AGR DIVISION</b>		
WESTERN UNION		REV. 4G-1			
SECURITY CLASSIFICATION			AUTHORIZATION		
ORIGINATING AGENCY			SIGNATURE		
SYMBOL		DATE-TIME GROUP		OFFICIAL TITLE	
		<b>DEC 2 1940</b>		<b>THOS. O. CALL MAJOR, QMC</b>	
				PAGE OF	

WU A034 38/37 CORRECT

KANSASCITY MO DEC 3 1948 820A

COMDG OFCR

CHGO QM DEPOT AGRD

I CONFIRM INSTRUCTIONS TO HAVE REMAINS MY SON ABRAHAM

SOPHIAN JR CONTROL NUMBER NC20507 INTERRED IN FORT

LEAVENWORTH NATIONAL CEMETERY FORT LEAVENWORTH KANSAS

MY CORRECT MAILING ADDRESS 6315 WENONGA ROAD KANSAS CITY

FIVE MISSOURI RFD 7

ABRAHAM SOPHIAN MD

853A

NC20507 6315 7..

RECEIVED  
SIGNAL CENTER  
DEC 3 9 09 AM '48

*Noted ✓  
EJM*

*change in  
not address  
EJM*

# MESSAGEFORM

MESSAGE CENTER No.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT
CALLS V	STA. SER. No. NR	PRECEDENCE <b>DAY LTR</b>
ACTION	INFORMATION	EXEMPT OPERATING SIGNALS
		ORIGINATOR DATE-TIME GROUP
		GROUP COUNT GR

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Originator) AGR DIVISION, CHICAGO QUARTERMASTER DEPOT  
1819 W. PERSHING RD., CHICAGO, ILL.

### SECURITY CLASSIFICATION

ACTION TO:

- SUPERINTENDENT
- FORT LEAVENWORTH NATIONAL CEMETERY
- FORT LEAVENWORTH, KANSAS

PRECEDENCE FOR ACTION INFORMATION

ORIGINAL MESSAGE

REFERS TO ANOTHER MESSAGE IDENTIFICATION CLASSIFICATION

INFORMATION TO:

REFERENCE **ROSTER** THIS DISTRIBUTION CENTER DATED **7 DECEMBER 48** THE  
REMAINS OF THE LATE **CAPT. ABRAHAM SOPHIAN, JR.**  
ARE READY FOR DELIVERY TO YOUR NATIONAL CEMETERY REQUEST YOU ADVISE DESIRED DATE  
AND HOUR OF DELIVERY IN REPLY REFER TO CONTROL NUMBER **NC-20507** AND NAME OF  
DECEASED **NOK'S CORRECT ADDRESS IS 6315 WENONGA ROAD, R. F. D. #7,**  
~~MO~~ **KANSAS CITY, MO.**

R. D. BLANKENHORN  
LT. COLONEL, QMC  
CHIEF, AGR DIVISION

DEC 22 4 21 PM '48  
FR

**WESTERN UNION**

17	SECURITY CLASSIFICATION	SIGNATURE	AUTHORIZATION
SYMBOL	ORIGINATING AGENCY	DATE-TIME GROUP <b>23 DEC 48</b>	OFFICIAL TITLE <b>THOS. O. CALL MAJOR, QMC</b>
			PAGE OF

INSPECTION CHECKLIST  
NC-20507

NAME <b>SOPHIAN, ABRAHAM, JR.</b>	RANK <b>CAPT</b>	SERIAL NO. <b>01700222</b>	ARM OR SERVICE <b>ARMY</b>	DIRECTIVE DATE <b>29 NOV. 48</b>
	RACE <b>WHITE</b>	RELIGION <b>HEBREW</b>	SEX <b>MALE</b>	DIRECTIVE NO. <b>3555 02620</b>

CONSIGNEE AND ADDRESS <b>FORT LEAVENWORTH NATIONAL CEMETERY FORT LEAVENWORTH, KANSAS</b>	NEXT-OF-KIN ADDRESS <b>ABRAHAM SOPHIAN, SR. (FATHER) 6315 AND WENONGA ROAD KANSAS CITY, MISSOURI</b>
---	---

SHIPPING CASE - General Appearance (Check ONLY Discrepancies)	CONDITION OF SHIPPING CASE (Check One) <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY
<input checked="" type="checkbox"/> FINISH (Exterior) <i>(X)</i> <input type="checkbox"/> FINISH (Interior) <input type="checkbox"/> HANDLES <input type="checkbox"/> HANDLE BOLTS <input type="checkbox"/> STENCILING - NAMEPLATE	REMARKS:
	INSPECTED BY: <i>F. Salaker</i>

CASKET - General Appearance (Check ONLY Discrepancies)	CONDITION OF CASKET (Check One) <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY
<input type="checkbox"/> FINISH (Exterior) <input type="checkbox"/> HANDLES AND FASTENINGS <input type="checkbox"/> STENCILING - NAMEPLATE <input type="checkbox"/> CAM LOCKS (Sealing) <input type="checkbox"/> ODOR OR MOISTURE	REMARKS:
	INSPECTED BY:

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 REPAIR <input checked="" type="checkbox"/> <i>observed maintenance</i>
NECESSARY DISINFECTION (Explain)	CASKET EXCHANGED <input type="checkbox"/>
	SHIPPING CASE REPAIRED <input type="checkbox"/>
	SHIPPING CASE EXCHANGED <input type="checkbox"/>
	REMARKS:

TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTING OFFICER
			<i>10 AM</i>	<i>11/29/48</i>	<i>F. Salaker</i>

STORAGE LOCATION			PASS. LIST NO.	CONTROL NUMBER
FLOOR	SECTION	BAY	<b>022</b>	<b>NC-20507</b>
		<b>538</b>		
STAMP INCOMING OR OUTGOING				
<b>OUTGOING</b>				

# RECEIPT OF REMAINS

DISTRIBUTION CENTER AGR DIV., CHICAGO QUARTERMASTER DEPOT  
1819 W. PERSHING RD., CHICAGO, ILLINOIS

SUPERINTENDENT

ROUTINE

FORT LEAVENWORTH NATIONAL CEMETERY

FORT LEAVENWORTH, KANSAS

REMAINS CONSIGNED TO:

REMAINS OF THE LATE CAPT. ABRAHAM SOPHIAN, JR. *01700 222*  
BEING SHIPPED TO YOU ACCOMPANIED BY MILITARY ESCORT. ON TRAIN NUMBER

27, CB&Q RR

~~LEAVING CHICAGO~~

~~AND DUE~~ TO ARRIVE BEVERLY, MISSOURI 3 JANUARY 1949, 9:40 AM

REFER TO CONTROL NUMBER NC-20507

R. D. BLANKENHORN  
LT. COLONEL, QMC

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

THIS 3 DAY OF January 19 (48) 49

Wm. B. Wain Capt. 2nd  
WITNESS (Escort)

R. D. Blankenhorn  
CONSIGNEE  
Supt 2d Leavenworth Natl Cemetery

REV. 18D

28 Dec. 1948

**NAS**  
**FILE**  
**RECORDS ANNOTATED**  
DATE 8 mar 49  
NAME Wain  
**R & R BR.**



armB

1

# DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER: 3555 02620

DATE: 15 06 48  
DAY MONTH YEAR

NAME: SOPHIAN ABRAHAM JR

SERIAL NUMBER: 01700222

GRADE: CAPT

ARM: 1

RACE: 1

RELIGION: 3

CEMETERY: MARIGNY - ST LO FRANCE

PLOT: R

ROW: 2

GRAVE: 22

DISPOSITION OF REMAINS: 7521 08 09  
CODE DIST. CTR.

### SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE: JEFFERSON CITY NATIONAL CEMETERY - FORT LEAVENWORTH NAT. CEM. JEFFERSON CITY, MISSOURI FORT LEAVENWORTH - KANS

NAME AND ADDRESS OF NEXT OF KIN: ABRAHAM SOPHIAN, M.D. (FATHER) 6315 WENONGA ROAD RURAL FREE DELIVERY #7 KANSAS CITY, MISSOURI

### SECTION C — DISINTERMENT AND IDENTIFICATION

NAME: Sophian, Abraham Jr.

SERIAL NUMBER: 0-1700222

GRADE: Capt

DATE OF DEATH: 17 June 1948

IDENTIFICATION TAG ON:  REMAINS  MARKER

ORGANIZATION: USAGF

RELIGION: H.

IDENTIFICATION VERIFIED BY: W. G. Straube  
Embalmer

NAME AND TITLE: NAME AND TITLE

### SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: OD uniform.

CONDITION OF REMAINS: Advanced decomposition.

OTHER MEANS OF IDENTIFICATION: None.

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies):  
(See attached copies) None.

REMAINS PREPARED AND PLACED IN ~~CASKET~~ Transfer case.

DATE: 17 June 1948 BY: W. G. Straube  
CASKET SEALED BY: Thomas E. Jones EMBALMER (Signature)

CASKET BOXED AND MARKED: DATE 2 Jul 48 BY M. H. Noyes

SHIPPING ADDRESS/VERIFIED BY: All tags, markings and plates verified by: H. F. HILL, Capt, QMC

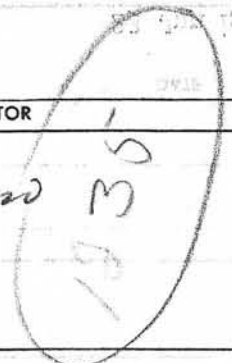
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct. except casketing

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.

JOHN L. BOYD, 2d Lt, FA  
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS: Special changes

Central # NC-20507



# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

FROM USMC Marigny		TO USMC St. James	
MODE OF CONVEYANCE Truck		NAME OF CONVOYER Pfc. Dalaney	
SIGNATURE OF SHIPPER J. J. ANDREWS, 1st Lt, Inf.	DATE 23 Jun 48	SIGNATURE OF RECEIVER H. F. HILL, Capt, QMC	DATE 23 Jun 48

## 2. SHIPPED

FROM USMC St. James		TO Casketing Point A, Cherbourg	
MODE OF CONVEYANCE Truck		NAME OF CONVOYER JAMES E. POWELL	
SIGNATURE OF SHIPPER H. F. HILL, Capt, QMC	DATE 9/9/48	SIGNATURE OF RECEIVER <i>E. N. Ciampo</i> E. N. CIAMPO, 1st Lt, FA	DATE 9/9/48

## 3. SHIPPED

FROM Casketing Point A, Cherbourg		TO Port Unit, Cherbourg	
MODE OF CONVEYANCE Truck		NAME OF CONVOYER SFC J. G. FULLER	
SIGNATURE OF SHIPPER E. N. CIAMPO, 1st Lt, FA	DATE 18/11/48	SIGNATURE OF RECEIVER <i>John E. Hendry Jr.</i> JOHN E. HENDRY JR, Maj, CAC	DATE 18/11/48

## 4. SHIPPED

FROM Port Unit, Cherbourg		TO NYPOE	
MODE OF CONVEYANCE USAT JAMES E. ROBINSON		NAME OF CONVOYER <i>Allen W. Cantrell</i> ALLEN W. CANTRELL, 1st Lt Inf.	
SIGNATURE OF SHIPPER JOHN E. HENDRY JR, Maj, CAC	DATE 27/11/48	SIGNATURE OF RECEIVER <i>M. Roberts</i> W. W. PREISCH LIEUT. COLONEL, TC.	DATE DEC 6-1948

## 5. SHIPPED

FROM NYPOE		TO DC 08	
MODE OF CONVEYANCE train		NAME OF CONVOYER <i>Alfred J. Keam</i> ALFRED J. KEAM, Sgt	
SIGNATURE OF SHIPPER W. W. PREISCH LIEUT. COLONEL, TC.	DATE DEC 7-1948	SIGNATURE OF RECEIVER <i>L. A. Bockstahler</i> L. A. BOCKSTÄHLER	DATE DEC 9 1948

## 6. SHIPPED

FROM 1st Lt, INF		TO Chief Operations Br.	
MODE OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

## 7. SHIPPED

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

FM UWXFE 2/SUPT FT LEAV NATL CEME FT LEAVENWORTH KANSAS 251800Z  
TO C O CHICAGO QM DEPOT 1819 WEST PERSHING ROAD CHICAGO 9 ILL

WD GRNC

FOR AMERICAN GRAVES REGISTRATION DIV REFER TO CONTROL NUMBER NC-20507 PD  
FUNERAL SERVICES FOR THE LATE CAPTAIN ABRAHAM SOPHIAN JUNIOR 01700222  
SCHEDULED FOR MONDAY 3 JANUARY 1949 AT 200 PM PD REQUEST DELIVERB BEFORE  
100 PM ON THAT DATE AND ADVICE OF EXPECTED TIME AND MEANS OF ARRIVAL  
PD J C DAVIS UNDERTAKING COMPANY DESIGNATED TO RECEIVE REMAINS PER  
CONTRACT PD

27/1541Z

ARMY SERVICE FORCES  
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mrs. Dorothy K. Sophian

SHIP TO:  
Capt. Abraham Sophian, Jr.

63rd and Wenonga Road  
Kansas City, Missouri

Effects of: C-1700222

Name 162407 D

ASN

Case No.

Wt.

*ga 16464*

DATE 2 July 1945

*E. Burton*  
FOR: Effects Quartermaster

GHG:JFH:dt

REMARKS:

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

Remove G.I.  
 Note discrepancy in \_\_\_\_\_  
 Films removed  
 Dairy removed  
 Laundry removed

ROUTING:

Accounting Branch  
 Warehouse Division  
 2 Files Branch, Adm. Div.

REMARKS:

"SHIP DAMAGED ITEM"

*1 Footlocker have down at  
back 10:00  
W. J. [unclear] Tuesday  
[unclear]*

Franked \_\_\_\_\_  
Est. Exp. Chgs. \_\_\_\_\_  
Est. Pct. Chgs. \_\_\_\_\_  
No. of packages \_\_\_\_\_

*[Signature]*  
Shipping Clerk

JUL 25 1945

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL

2 July 1945


194

TO: COLONEL HARBOLD

FOR:

1. \_\_\_ Necessary action.
2. \_\_\_ Necessary action and direct reply.
3. \_\_\_ Preparation of reply for signature of QMG.
4. \_\_\_ Information on which to base reply.
5. \_\_\_ Notation and filing.
6. \_\_\_ Notation and return.
7. \_\_\_ Remark and recommendation. (In turn)
8. \_\_\_ Information. (In turn)
9. \_\_\_ Please see me.
10. \_\_\_ Keep me advised.
11. \_\_\_\_\_

Preparation of reply for signature of General  
Gregory.

  
L. DUEHAY

Incl: ltr 6/27/45

*end*

NAME

SOPHIAN, ABRAH

CAPT

0222

BAY	PALLET	BOX	TALLY
63	25		7609

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
VAL PAK		

NAME

~~SM~~ SOPHIAN, ABRAH

CAPT

0222

BAY	PALLET	BOX	TALLY
63	25		7609

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
VAL PAK		

ABRAHAM SOFARIAN JR

CAPTAIN

O-1700222

MED. DET



HEADQUARTERS, ARMY SERVICE FORCES

MEMORANDUM SLIP

*2*

TO THE FOLLOWING IN ORDER INDICATED:

	NAME OR TITLE	ORGANIZATION	BUILDING AND ROOM	INITIALS ALK/ac
1	Director, Memorial Division	OQMG	Room 1007 Temp "C" Washington 25, D.C.	DATE 14 May 45
2				
3				

*293*  
 RE: Captain Abraham Sophian, Jr.,  
 O-1700222

1. Attention is invited to the attached copy of letter from Dr. A. Sophian, father of the late Captain Abraham Sophian, Jr., O-1700222 who was killed on 11 June 1944 in the European Area, and to copy of reply from this office.

*D. D. Lewis*

2 Inclosures  
 Copy ltr 3 May 45  
 Copy ltr 14 May 45



NAME	ORGANIZATION	BUILDING AND ROOM	DATE
Chief of Staff & War Department Sub-section & Corres Sec Cas Br	AGO Rm 4641		14 May
			TELEPHONE 79030

# TALLY-OUT

(Packing or Loading List)

ARMY EFFECTS BUREAU - KCQMD

(Station)

Serial No. \_\_\_\_\_  
Req. No. \_\_\_\_\_  
No. of sheets \_\_\_\_\_  
Sheet No. \_\_\_\_\_

162407

Warehouse 9th Floor Date 7-25-45  
Consignee Mrs. Dorothy K. Sophian Carrier \_\_\_\_\_  
Destination 63rd and Wenonga Road  
Kansas City, Missouri B/L No. \_\_\_\_\_  
Routing GOVERNMENT TRUCK Car No., Initials, \_\_\_\_\_  
Seals No. \_\_\_\_\_  
Date shipped \_\_\_\_\_ Authority \_\_\_\_\_

U. S. NOS. ON PACKAGES	NUMBER AND KIND OF PACKAGES	CONTENTS	GROSS WEIGHT (Pounds)		CUBIC MEASURE
			UNIT	TOTAL	
1	Footlocker	(Case <u>3162407</u> ) (Capt. Abraham Sophian, Jr., O-1700222) Personal Effects	85		

Checker.

C.R. Allbee - ed Packer.  
C.R. ALLBEE, MAJ, QMC Shipper.

Received the above articles in apparent good order and condition (except as noted) this date

Mrs. D. Sophian CRA:mew  
(Signature)  
By J. Mada  
(Designation)  
63rd x Wenonga Rd Cite

# RECEIPT OF REMAINS

DISTRIBUTION CENTER AGR DIV., CHICAGO QUARTERMASTER DEPOT  
18 19 W. PERSHING RD., CHICAGO, ILLINOIS

SUPERINTENDENT

ROUTINE

FORT LEAVENWORTH NATIONAL CEMETERY

FORT LEAVENWORTH, KANSAS

REMAINS CONSIGNED TO:

REMAINS OF THE LATE CAPT. ABRAHAM SOPHIAN, JR. 01700 222

BEING SHIPPED TO YOU ACCOMPANIED BY MILITARY ESCORT. ON TRAIN NUMBER

27, CB&Q RR

~~LEAVING CHICAGO~~

~~AND DUE~~ TO ARRIVE BEVERLY, MISSOURI 3 JANUARY 1949, 9:40 AM

REFER TO CONTROL NUMBER NC-20507

R.D. BLANKENHORN  
LT. COLONEL, QMC

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

THIS 3 DAY OF January 19 48 49

Wm. B. Williams Capt. 2nd  
WITNESS (Escort)

R.D. Blankenhorn  
CONSIGNEE  
Supt 20 Leavenworth National Cem

REV. 18D

28 Dec. 1948

**NAT**  
**FILE**  
**RECORDS ANNOTATED**  
DATE 8 Mar 49  
NAME W. B. Williams  
R & R/BR.

PACKAGE DESCRIPTION

ARMY EFFECTS BUREAU INVENTORY

DECEASED	<input type="checkbox"/>
MISSING	<input type="checkbox"/>
P.O.W.	<input type="checkbox"/>
ABANDONED	<input type="checkbox"/>
TALLY NO.	76091
INV. DATE	30 April 51
ORIG. NO. OF PKGS.	1
BOX NO.	
SHEET OF	1 SHEETS
ORGANIZATION	med Det

NAME Abraham Sophia  
 A.S.N. 04700222 RANK Capt

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

REMARKS

*no information  
 restricted*

ATTACHMENTS

FORM #54

FORM #100

*stay*

LAUND

C.A.T. *none*

WAREHOUSE SPACE

*1.17 v*

STORED BY

*[Signature]*

WEIGHT

JUN 29 1951

G.I. REMOVED

SHORTAGE ON REVERSE

IDENT. TAGS REMOVED

DIARY REMOVED

LOCKED

507TH PARACHUTE INFANTRY  
APO 230, U.S. Army

6 Aug 1944  
Date

SUBJECT: Transmittal of Inventory of Personal Effects.

TO : Effects Quartermaster, HQ USA, Depot G-24, APO 507,  
U.S. Army.

Transmitted herewith in accordance with ADA, Cir. # 80, dated 25 Oct. 1943, Hq. SOS. WACUSA, is inventory of Effects concerning subject named below.

Sophian Jr.      Abraham      NMI      Captain O-1700222  
(Last Name)      (First Name)      (Grade)      (A.S.C.)      (Control No.)  
(For use of Effects Cl. ETCUSA)

Organization Medical detachment, 597th precht Inf.  
(UNIT - - - - - Post Branch of Service)

\*Status. (~~Deceased~~, Missing in Action, ~~xxxxxx~~) on the 11

day of June 19 44

Designated Beneficiary (With Address)

Mrs. Dorothy K. Sophian (Wife)  
63rd & Wenonga Road,  
Kansas City, Missouri

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

U.S.A.C. # none Amt \$ \_\_\_\_\_ U.S.A.C. # \_\_\_\_\_ Amt \$ \_\_\_\_\_

U.S.A.C. # \_\_\_\_\_ Amt \$ \_\_\_\_\_ U.S.A.C. # \_\_\_\_\_ 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)

- 1 book - fiction
- 1 envelope With insignias
- 1 bundle of envelopes
- 1 pad writing paper
- 1 pr binoculars
- 4 golf balls
- 2 boxes of bulbs - flashlight
- 2 pair sun glasses
- 1 stethoscope
- 1 watch chain
- 1 box of insignia
- 1 sewing kit
- 1 brush
- 1 ETO ribbon
- 1 miniature chess board
- 10 cards
- 19 photos
- 1 fountain pen
- 14 shirts
- 9 pants
- 1 blouse
- 1 drawings & and Background
- 1 belt
- 11 ties
- 2 jackets
- 5 hats
- 2 pr. shoes
- 2 pr slippers
- 1 rain coat
- 1 overcoat
- 2 coverhalls
- 1 house coat
- 29 pieces of underwear
- 1 pr trunks
- 2 pr gloves
- 10 handkerchiefs
- 6 towels
- 10 pr socks
- 4 bars

I certify that the foregoing inventory comprises all of the subject's effects and that effects were shipped to Effects Co. ETCUSA, A.P.O. 507, G-14, U.S. Army by delivering to QM 82nd A/B Div. APO 469 USA

on Aug 1 1944.

\_\_\_\_\_  
Signature - (In Ink)

\_\_\_\_\_  
Rank and Organization

(Block  
Letters)

PACKAGE DESCRIPTION	ARMY EFFECTS BUREAU INVENTORY	DECEASED	<input type="checkbox"/>
		MISSING	<input checked="" type="checkbox"/>
		P. C. W.	<input type="checkbox"/>
		ABANDONED	<input type="checkbox"/>
		TALLY NO.	7992
		INV. DATE	17-71 Aug 45
		ORIG. NO. OF PKGS.	1
		BOX NO.	
		SHEET OF SHEETS	1
		ORGANIZATION	

NAME Abraham Sophian  
 A.S.N. 01700222 RANK Capt

<input type="checkbox"/>	BELT	<input checked="" type="checkbox"/>	TOWELS & WASHCLOTHS	<input type="checkbox"/>	WINGS
<input type="checkbox"/>	BELT, MONEY (NO MONEY)	<input checked="" 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"/>	GLASSES	<input type="checkbox"/>	KIT, SW. KIT, OR WRITING
<input type="checkbox"/>	HANDKERCHIEFS	<input type="checkbox"/>	KNIVES	<input type="checkbox"/>	BOOKS
<input type="checkbox"/>	HEADWEAR	<input type="checkbox"/>	LIGHTERS	<input checked="" type="checkbox"/>	BOOKS ADDRESS
<input type="checkbox"/>	JACKETS	<input checked="" type="checkbox"/>	MISC. INCIPTS	<input type="checkbox"/>	BOOKS, RELAY LOG
<input type="checkbox"/>	OVERCOATS	<input type="checkbox"/>	PEN, FOUNTAIN	<input type="checkbox"/>	DIARY (REMOVED FOR DJR)
<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 checked="" 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 SHORTER
<input type="checkbox"/>	TRUNKS, PR.	<input type="checkbox"/>	TOILET ARTICLES	<input checked="" type="checkbox"/>	SOLVENTS
<input type="checkbox"/>	UNDERWEAR	<input type="checkbox"/>	WATCH	<input type="checkbox"/>	SOLVENT MONEY
				<input type="checkbox"/>	STATIONERY
				<input type="checkbox"/>	TESTIMENTS
				<input type="checkbox"/>	U.S. MONEY AMOUNT

DAMAGED

(F)

LAUNDRY

REMARKS	ATTACHMENTS	FORM #54	FORM #100
Mrs. Dorothy K. Sophian 63rd & Wenona Rd, Kansas City MO * Rem. Part missing Laundry returned to F/4 June 5/45 Marie		1 Inventory	
C.A.T.	WAREHOUSE SPACE	WEIGHT	G.I. REMOVED
	1270X	1-85	SHORTAGE ON PAPERSE ✓
	STORED BY		IDENT. TAGS REMOVED
	BC		DIARY REMOVED
		DATE SHIPPED	LOCKED STORAGE





## SHORTAGES

U.S. GOVT. CHECK SHORT

14 shirts,

NUMBER

1 Blouse,

. DATE

9 pants,

SYMBOL

1 pr. window Background,

AMOUNT

1 Belt.

11 ties

26 pieces of Underwear.

2 pr. gloves

4 Towels.

8 pr socks.

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

Tipler

INVENTORY CLERK

Smart

SUPERVISOR

G.I. REMOVED



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

IN REPLY REFER TO \_\_\_\_\_ 162,407

GHG:GC:mjk  
June 25, 1945

Mrs. Dorothy K. Sophian  
63rd and Wenonga Road  
Kansas City, Missouri

Dear Mrs. Sophian:

The Army Effects Bureau has received from overseas some personal effects of your husband, Captain Abraham Sophian, Jr.

These effects are being forwarded to you in two cartons.

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 officer's legal residence.

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

Yours very truly,

HARRY NIEMIEC  
2nd Lt. Q.M.C.  
Chief, Correspondence Branch

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Dorothy K. Sophian

63rd and Wenonga Road

Kansas City, Missouri

Effects of:

Name Capt. Abraham Sophian, Jr.

ASN 0-1700222

Case No. 162,407-D

Wt.

DATE 25 June 45  
GHG:GC:mjk

L. Walker  
FOR: Effects Quartermaster

REMARKS:

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

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

ROUTING:

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

*no 1 Cartage  
✓ 2 ✓ 4-30-45*

REMARKS:

Franked FRANKED JUN 29 1945  
Est. Exp. Chgs.                   
Est. Frt. Chgs.                   
No. of package           2          

          
Shipping Clerk

162407

GHG:JFH:mj  
July 3, 1945

Mrs. Dorothy K. Sophian  
63rd and Wenonga Road  
Kansas City, Missouri

Dear Mrs. Sophian:

The Army Effects Bureau has received some additional property of your husband, Captain Abraham Sophian, Jr.

These effects, contained in one footlocker, are being forwarded to you. If delivery is not made within thirty days from this date, please notify me so that further action may be instituted.

As previously indicated, personal property is transmitted by this Bureau for distribution according to the laws of the state of the officer's legal residence.

Extending every sympathy, I am

Sincerely yours,

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

u  
85

3 September 1946

Mrs. Dorothy K. Sophian  
63rd and Wenonga Road  
Kansas City, Missouri

Dear Mrs. Sophian:

293  
mb  
The War Department is most desirous that you be furnished information regarding the burial location of your husband, the late Captain Abraham Sophian, Jr., A.S.N. O-1 700 222.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Marigny, plot R, row 2, grave 22. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located nine miles west of St. Lo, France, and is under the constant care and supervision of United States military personnel.

The War Department has now been authorized to comply, at Government expense, with the feasible wishes of the next of kin regarding final interment, here or abroad, of the remains of your loved one. At a later date, this office will, without any action on your part, provide the next of kin with full information and solicit his detailed desires.

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN  
Major General  
The Quartermaster General

scw

*el*  
Capt Abraham Sophian, Jr., O-1 700 222  
Plot B, Row 2, Grave 22,  
United States Military Cemetery  
Marigny, France

28 October 1947

Mrs. Dorothy K. Sophian  
63rd and Wenona Road  
Kansas City, Missouri

Dear Mrs. Sophian:

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.

*8 M.W.*

OCT 31 4 04 PM '47

U. S. ARMY  
MAIL & RECORDS BRANCH

*el*

*new* 15 03 3 2007 APR 5 1948 *to father*  
*part*

QMGYG 293  
Sophian, Abraham, Jr.  
SN C-1 700 222

27 August 1946

Address Reply To  
THE QUARTERMASTER GENERAL  
Attn: Memorial Division

Dr. A. Sophian  
1406 Bryant Building  
Kansas City 6, Missouri

Dear Dr. Sophian:

Your letter concerning your son, the late Captain Abraham Sophian, Junior, has been received in this office.

The War Department has now been authorized to remove, at Government expense, to the final resting place designated by the next of kin, the remains of those American citizens who died while serving overseas with our armed forces during this war.

When the necessary preliminaries have been completed, a letter with an information pamphlet and a "Request for Disposition" form attached will be sent to the next of kin of those American dead. The "Request for Disposition" form, when properly filled out, will constitute the formal expression of the next of kin's detailed desires. Since letters to the next of kin will be dispatched automatically and according to the records here, communications with this office regarding this subject will not be necessary.

As you probably know, the supply of steel for the manufacture of caskets is, at present, uncertain. Without this essential item, the movement of remains cannot properly be initiated. This fact and the necessity for complete coordination of movement in many parts of the world make it impossible, at this time, to estimate when these forms will be mailed. Responses to them will be acted upon with a minimum of delay.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

JAMES L. PRENN  
Major, QMC  
Assistant

REGISTRATION AND  
RECORDS BRANCH  
AUG 28 10 45 AM '46  
MEMORIAL DIVISION

AUG 28 11 42 AM '46  
Q.M.G.  
MAIL & RECORDS BRANCH

JLP  
D

BK

A. SOPHIAN, M.D.  
H. STATLAND, M.D.  
1406 BRYANT BUILDING  
KANSAS CITY 6, MO.

July 8, 1946

Quartermaster General  
Washington, D. C.

Dear Sir:

Will you be kind enough to send me any available information regarding return of our war dead to their families. My son Capt. Abraham Sophian is buried in Eastern France. 293

Thanking you, I am,

Very truly yours,



A. Sophian, M. D.

AS:le



SPQYG 293

Sophian, Abraham, Jr.

S.N. O-1700222

18 September 1945

Dr. A. Sophian  
1406 Bryant Building  
Kansas City 6, Missouri

Dear Dr. Sophian:

Acknowledgment is made of your recent letter requesting information concerning the return of the remains of your son, the late Captain Abraham Sophian, Jr.

Now that Japan has been defeated immediate plans are being formulated with a view to returning to the next of kin the remains of their loved ones. This sacred duty will be carried out by the Government at its expense and insofar as practicable in accordance with the expressed wishes of the legal next of kin, who will be notified by this office well in advance of the actual return of the remains. The mission as a whole is world wide in scope and of necessity time consuming, but you may rest assured that this office fully appreciates your desires and will do everything in its power to fulfill them at the earliest possible date.

It will not be necessary to make application for the return of the remains, as the Government, at the proper time will contact the legal next of kin requesting them to designate the place of final shipment.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

ARTHUR L. WARREN  
Colonel, QMC  
Assistant

CCP:

if:

SEP 17 2 16 PM '45  
MEMORIAL DIVISION

file  
9-20-45

*Handwritten notes and signatures:*  
PCW  
SEP 17 9 07 AM '45  
A. Sophian  
A. Sophian, Jr.

DR. A. SOPHIAN  
1406 BRYANT BUILDING  
KANSAS CITY 6, MO.

September 3, 1945

Army Service Forces  
Office of The Quartermaster General  
Washington, D. C.

Attn: Arthur L. Warren  
Colonel QMC - Assistant

Re: SPQYG 293  
Sophian, Abraham, Jr.  
~~S.N. O-1 700 222~~

Dear Colonel Warren:

Wish to acknowledge your letter of August 25th.  
It is my understanding that the Government has  
made arrangements to bring the remains of our  
boys back home.

Will you kindly advise me if that is the case  
so we may act accordingly.

Very sincerely yours,

*A Sophian*

A. Sophian, M. D.

AS:ls

*Remains.*

SPQYG 293  
Sophian, Abraham, Jr.  
S.N. 0-1 700 222

25 August 1945

Doctor A. Sophian  
1406 Bryant Building  
Kansas City 6, Missouri

Dear Doctor Sophian:

Reference is made to the letter from this office dated 4 July 1945, regarding the place of burial of your son, the late Captain Abraham Sophian, Jr.

The official report of interment received in this office reveals that the remains of your son were interred in the United States Military Cemetery #1, Marigny, France, Plot R, Row 2, Grave 22. With reference to other larger cities the approximate location of Marigny, France is five miles west and south of St. Lo and ten miles east and north of Coutances, both in France.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

ARTHUR L. WARREN  
Colonel, QMC  
Assistant

at

QMC  
MAIL & RECORDS BRANCH

AUG 25 1 05 PM '45

MEMORIAL DIVISION

AUG 25 11 24 AM '45

CCP:

AGFC-G 201 Sophian, Abraham Jr.  
(3 May 45) 01700222

14 May 1945

Dr. A. Sophian  
1406 Bryant Building  
Kansas City 6, Missouri

Dear Dr. Sophian:

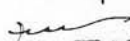
I have received for reply your letter of 3 May 1945, concerning your son, Captain Abraham Sophian, Jr., who was killed in action on 11 June 1944 in France.

It would be gratifying indeed to be able to encourage you in your hopes that Captain Sophian still survives. However, I must inform you that our theater commanders exercise every precaution to insure that casualty reports are thoroughly checked before they are forwarded to the War Department and no death reports are submitted unless conclusive evidence of death exists. In this connection, it may be stated that the commanding general of the various theaters of operations report as "missing in action" personnel whose whereabouts, due to enemy action, is unknown. In many of these cases our overseas commanders subsequently obtain conclusive evidence of death, such as the recovery of the remains and as soon as information of this nature is secured, a report is submitted to the War Department giving the data on which the evidence discloses that death occurred.

I fully realize the comfort you would derive in obtaining information concerning the burial of the remains of your son. I am forwarding a copy of your communication to The Quartermaster General, Washington 25, D. C., who is charged with the matters of this nature with the request that you be furnished data in this respect providing it is available.

You have my heartfelt sympathy in the great loss you have been called upon to bear.

Sincerely yours,

  
J. A. ULLO  
Major General  
The Adjutant General of the Army

*Enc. 2*

COPY

DR. A. SOPHIAN

1406 BRYANT BUILDING  
KANSAS CITY 6, MO.

May 3, 1945

Secretary of War  
War Department  
Washington, D. C.

Dear Sir:

My son, Abraham Sophian, Jr. Serial No. O-1700222, was reported killed by your department recently.

He was Captain in the 507th Paratroopers Infantry Regiment, 82nd. Airborne Division; Colonel Millett, Senior Officer. Ten months ago he was reported missing as of June 11th. 1944 by your Department; we heard nothing further until the telegram and confirming letter advising us of his death, which we received about a month ago.

In view of the circumstances, namely: the fact that he was reported missing almost ten months before confirmation of his death, we feel very much concerned about the exact situation and I wish to know what definite information has been obtained on which was based the final report.

It seems very strange that confirmation could not be obtained at the time when one would expect confirmation much more possible, namely, on the date he was reported missing rather than ten months later when evidence of confirmation surely must be much more difficult to obtain.

I would appreciate an early answer. It is not fair, in a matter of this kind with the circumstances as explained, for your Department not to submit confirmatory evidence at an early date.

Yours very truly,

Dr. A. Sophian

AS:le

*inc. # 1*

COPY



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

IN REPLY REFER TO SPOYG 293

Sophian, Abraham Jr.  
S.N. 0-1 700 222

4 July 1945

SUBJECT: Report of Interment.

TO : Commanding General, Comzone  
European Theater of Operations  
APO 887, c/o Postmaster  
New York, New York  
FOR: The Chief Quartermaster

1. Information is desired as to whether or not the remains of the decedent named below have been recovered and interred, as to date a report covering the disposition of these remains has not been received in this office.

NAME: Sophian, Abraham, Jr. (Captain)

SERIAL NUMBER: 0-1 700 222

DATE OF DEATH: 11 June 1944

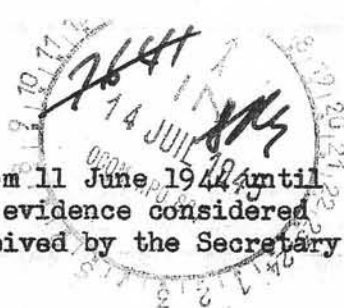
PLACE OF DEATH: European Area (France)

REMARKS: In a missing in action status from 11 June 1944 until such absence was terminated on 3 April 1945, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

Information received in this office states that the remains of Captain Sophian were interred in Eastern France.

FOR THE QUARTERMASTER GENERAL.

ARTHUR L. WARREN  
~~MAXXAXX DARRING~~  
Lt Colonel, QMC  
Assistant





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

IN REPLY REFER TO SPQYG 293

Sophian, Abraham Jr.  
S.N. O-1 700 222

4 July 1945

SUBJECT: Report of Interment.

TO : Commanding General, Comzone  
European Theater of Operations  
APO 887, c/o Postmaster  
New York, New York  
FOR: The Chief Quartermaster

1. Information is desired as to whether or not the remains of the decedent named below have been recovered and interred, as to date a report covering the disposition of these remains has not been received in this office.

NAME: Sophian, Abraham, Jr. (Captain)

SERIAL NUMBER: O-1 700 222

DATE OF DEATH: 11 June 1944

PLACE OF DEATH: European Area (France)

REMARKS: In a missing in action status from 11 June 1944 until such absence was terminated on 2 April 1945, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

Information received in this office states that the remains of Captain Sophian were interred in Eastern France.

FOR THE QUARTERMASTER GENERAL:

ARTHUR L. WARREN  
MAYO A. DARLING  
Lt Colonel, QMC  
Assistant

CCI

irz

JUL 3 5 37 PM '45  
O.O.M.C.  
MAIL & RECORDS DIVISION

SPQYG 293

Sophian, Abraham Jr.

S.N. 0-1 700 222

4 July 1945

Doctor A. Sophian  
1406 Bryant Building  
Kansas City 6, Missouri

Dear Doctor Sophian:

Acknowledgment is made of your letter of 27 June 1945 requesting information concerning your son, the late Captain Abraham Sophian, Jr.

It is regretted that your original letter of 11 May 1945 was not acknowledged at the time of its receipt but reference to our files indicated a report of burial had not yet been received. As information has not as yet reached this office pertaining to the burial of your son, an investigation has been requested and upon its receipt you will be notified.

Sincerely yours,

E. B. GREGORY  
Lieutenant General  
The Quartermaster General

CCF  
ALW  
DFB  
DFB



DR. A. SOPHIAN  
1406 BRYANT BUILDING  
KANSAS CITY 6, MO.

June 27, 1945

General Edmund B. Gregory  
The Quartermaster General  
Washington, D. C.

Dear General Gregory:

On May 11, 1945 I wrote you concerning my son, Captain Abraham Sophian, who was killed in France and requested information from your department such as it is customary to give. Up to this time I have had neither an answer to my question or the ordinary courtesy of an acknowledgment to my letter.

I am writing this letter to you personally because I cannot believe that you approve of actions of that kind; actions which are both callous and unkind.

I am fully aware that I am not the only one but I do feel that I have allowed enough time to at least have had an acknowledgment from your department.

I am writing this letter to request an early response to my letter.

Very truly yours,



A. Sophian, M. D.

AS:le

7/2/45  
7/2/45

DR. A. SOPHIAN  
1406 BRYANT BUILDING  
KANSAS CITY 6, MO.

May 11, 1945

Quartermaster General  
A. S. F.  
Washington, D. C.

Sir: 293

My son, Captain Abraham Sophian, No. O-1700222, 507th Parachute Infantry, Medical Detachment, was reported killed in France June 11, 1944. We have been advised by the War Department that he has been buried in an American Cemetery in the East of France.

Will you kindly advise us as to the exact location of the cemetery and all information usual for situations of this kind.

Very truly,

*A. Sophian*

Dr. A. Sophian

AS:le

Burial of  
Capt. Abraham S. Sopian, Jr. - 01 700 222  
Plot R, Row 2, Grave 22,  
U. S. Military Cemetery  
Marigny, France.

DR. A. SOPHIAN  
1406 BRYANT BUILDING  
KANSAS CITY 6, MO.

October 29, 1948

Major General Thomas B. Larkin  
Office of The Quartermaster General  
Washington 25, D. C.

Dear Major General Larkin:

If it is not too late to make another selection of a United States National cemetery as a final resting place for our son, we would like to have him buried at the Fort Leavenworth National Cemetery, Fort Leavenworth, Kansas instead of the Jefferson City National Cemetery at Jefferson City, Missouri - which <sup>place</sup> we elected a number of months ago when the form was sent us -

Will you be good enough to advise us if this can be done?

Thank you for your kind consideration of our request -

Very truly yours -

Abraham Sopian M.D.



QMGMF 293  
Sophian, Abraham, Jr.  
SN 01 700 222

26 November 1948

Dr. Abraham Sophian, Sr.  
1406 Bryant Building  
Kansas City 6, Missouri

Dear Dr. Sophian:

Your letter pertaining to the remains of your son, the late Captain Abraham Sophian, Jr., has come to my attention.

I wish to inform you that your previous request to have the remains of your son returned to the United States for final burial in the Jefferson City National Cemetery, Jefferson City Missouri, has been cancelled and, we will comply with your wishes to have his remains returned for final burial in the Fort Leavenworth National Cemetery, Fort Leavenworth, Kansas.

Please be assured of my continued sympathy in your great loss.

Sincerely yours,

JAMES F. SMITH  
Major, QMC  
Memorial Division

hmb

Nov 26 12 11 PM '48

Q. Q. H. G.  
MAIL & RECORDS BRANCH





ARMY SERVICE FORCES  
KANSAS CITY QUARTERMASTER DEPOT

601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

IN REPLY REFER TO \_\_\_\_\_ 162,407

GHG:GC:mjk  
June 25, 1945

Mrs. Dorothy K. Sophian  
63rd and Wenonga Road  
Kansas City, Missouri

Dear Mrs. Sophian:

The Army Effects Bureau has received from overseas some personal effects of your husband, Captain Abraham Sophian, Jr.

These effects are being forwarded to you in two cartons.

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 officer's legal residence.

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

Yours very truly,

HARRY NIEMIEC  
2nd Lt. Q.M.C.  
Chief, Correspondence Branch