

RESTRICTED REPORT OF BURIAL

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

43312
20 July 1944
Date

TM 10-630 AND AR 30-1815
REBURIAL

Last Name Stachowian		First Name Joseph		Initial A.		Rank Unknown		Serial No. 33407446	
Unit 507 PARA INF REGT		Organization Unknown		Place of Death France		Date of Death 11 June 44		Cause of Death France	
Time and Date of Burial 135 7		Name of Cemetery T		Name or Coordinates of Location Cross		Type of Marker Cross		Grave No. 136	

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

If No Identification Tags
How were remains identified?

*Re the dtd 28 Aug 45
(314.6 ETO, com of Berr) mb.*
DISINTERRED FROM COORD: 422:752

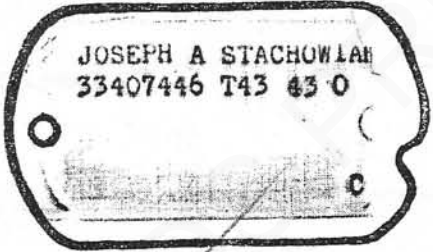
What means of identification were buried with the body?

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

Who is buried on:	Martinez, Arnold J.	18069123	Unknown	Unknown	136
Deceased's Right:	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	UNKNOWN X-95	Unknown	Unknown	Unknown	134

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

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



Emergency Addressee **Unknown** Name
Address

Religion **Catholic**

List only Personal Effects Found on Body and disposition of same

NONE

Stachowian, Joseph A. Remains buried in isolated grave located at Coord. 422:-752

Signature of Officer or other person reporting burial
F. A. GREHLICH
Capt., QMC

Verified by G.R.S. Officer

me #81

*File 43-45
m.x*

DISINTERMENT DIRECTIVE

1

SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
3508 04734

DATE
15 11 47
DAY MONTH YEAR

NAME
STACHOWIAK JOSEPH A

SERIAL NUMBER
33407446

RANK
PFC

ARM
1

DATE OF DEATH

CEMETERY
BLOSVILLE - CARENTAN

DISPOSITION OF REMAINS
3200 07
CODE DIST. PT.

PLOT ROW GRAVE COUNTRY
T 7 135 FRANCE

CAUSE OF DEATH
2

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
MILLER FUNERAL HOME
RURAL DELIVERY #7
NEW CASTLE, PENNSYLVANIA

NAME AND ADDRESS OF NEXT OF KIN
MR. PETER A. STACHOWIAK (FATHER)
MAHONINGTOWN, STATION
RURAL DELIVERY #7
NEW CASTLE, PENNSYLVANIA

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISTINTERRED
Stachowiak, Joseph A	33407446	Pfc	11 June, 1944	9 Dec, 1947

IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY	NAME AND TITLE
<input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	USAGF	Catholic	JOHN H. CLARK	2nd Lieut QMC

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
Uniform	Advanced Decomposition

OTHER MEANS OF IDENTIFICATION
None

MINOR DISCREPANCIES
None

REMAINS PREPARED AND PLACED IN CASKET
DATE 14 January, 1948 BY Henry A. Gentzel

CASKET SEALED BY Henry A. Gentzel EMBALMER (Signature)

CASKET BOXED AND MARKED SHIPPING ADDRESS VERIFIED BY JOHN PALYOK, 1st Lieut, FA

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.
JOHN PALYOK, 1st Lieut, FA
SIGNATURE OF GRS INSPECTOR

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

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM US MC Blossville	TO Casketing Point "A"-Cherbourg
ID OF CONVEYANCE Truck	NAME OF CONVOYER Sgt Gregorio Augustino
NATURE OF SHIPPER R. W. GANSEL, 1st Lt, QMC	DATE 12Jan48
SIGNATURE OF RECEIVER <i>John Palyok</i>	
DATE 12Jan48	

2. SHIPPED

FROM Casketing Point "A"-Cherbourg	TO Port Unit - Cherbourg
ID OF CONVEYANCE Truck	NAME OF CONVOYER <i>R. A. Cair</i>
NATURE OF SHIPPER JOHN PALYOK, 1st Lieut, FA	DATE 12Jan48
SIGNATURE OF RECEIVER <i>John L. Hendry</i>	
DATE 12Jan48	

3. SHIPPED

FROM Port Unit Cherbourg	TO NYPOE
ID OF CONVEYANCE USAT MC CARLEY	NAME OF CONVOYER ROBERT V. SNIDER, 1 LT TC
NATURE OF SHIPPER JOHN L. HENDRY JR, MAJ CAC	DATE 10 Mar 48
SIGNATURE OF RECEIVER <i>Robert V. Snider</i>	
DATE 10 Mar 48	

4. SHIPPED

FROM NYPC	TO NYPC
ID OF CONVEYANCE	NAME OF CONVOYER <i>J. L. McKinnon</i>
NATURE OF SHIPPER JAMES L. MCKINNON COLONEL, T. C.	DATE 4/10/48
SIGNATURE OF RECEIVER <i>James L. McKinnon</i>	
DATE 4/10/48	

5. SHIPPED PORT TRANSPORTATION OFFICER

FROM NYPC	TO DC#7
ID OF CONVEYANCE TRAIN	NAME OF CONVOYER <i>John A. Buckley</i>
NATURE OF SHIPPER JAMES L. MCKINNON COLONEL, T. C.	DATE APR 10 1948
SIGNATURE OF RECEIVER <i>John A. Buckley</i>	
DATE APR 10 1948	

6. SHIPPED

FROM	TO
ID OF CONVEYANCE	NAME OF CONVOYER
NATURE OF SHIPPER	DATE
SIGNATURE OF RECEIVER	
DATE	

7. SHIPPED

FROM	TO
ID OF CONVEYANCE	NAME OF CONVOYER
NATURE OF SHIPPER	DATE
SIGNATURE OF RECEIVER	
DATE	

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

REPORT OF DEATH

DATE 16 November 1944
MI/hjp/4624

143

FULL NAME <u>Stachowiak Joseph A.</u>		ARMY SERIAL NUMBER <u>33 407 446</u>	GRADE <u>Pfc</u>						
HOME ADDRESS <u>Mahoningtown, Pennsylvania</u>		ARM OR SERVICE <u>MD</u>	DATE OF BIRTH <u>5 July 1922</u>						
PLACE OF DEATH <u>European Area</u>	CAUSE OF DEATH <u>Killed in action</u>		DATE OF DEATH <u>6 June 1944</u>						
STATION OF DECEASED <u>European Area</u>	DATE OF ENTRY ON CURRENT ACTIVE SERVICE <u>7 Dec 1942</u>		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)

Mrs. Stella Stachowiak, mother, R F D # 7, Mahoningtown, Pennsylvania

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)

Mrs. Stella Stachowiak, mother, same as above
Mr. Peter A. Stachowiak, father, same as above

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

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 June 1944 until such absence was terminated on 7 November 1944, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a Commander in the European Area.

FILE

Nov 30 1944

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

[Signature]

ADJUTANT GENERAL

*Corrected rpt for date of death. Orig fwd 18 Nov 1944.

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

159,658

DATE 25 Jan 1945 jca

REPORT OF DEATH

FULL NAME Stachowiak, Joseph A.		ARMY SERIAL NUMBER 33 407 446	GRADE Pfc				
HOME ADDRESS Mahoningtown, Pa		ARM OR SERVICE MD	DATE OF BIRTH 5 Jul 1922				
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH *11 Jun 1944				
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 7 Dec 1942	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS				
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Stella Stachowiak, mother, RFD #7, Mahoningtown, Pa.							
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Stella Stachowiak, mother, same as above. Mr. Peter A. Stachowiak, father, same as above.							
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	YES NO
						X	X

ADDITIONAL DATA AND/OR STATEMENT

BATTLE NON-BATTLE

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 June 1944 until such absence was terminated on 7 November 1944 when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

*Correct date of death 11 June 1944, previously reported 6 June 1944.

COPIES FURNISHED:

S. G. O.	F. S. I.	F. O., U. S. A.
2. G. O. H. 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.

J. P. O'Neil

ADJUTANT GENERAL

file
MI, 159,458

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

REPORT OF DEATH

DATE 16 November 1944
MI/hjp/4624

FULL NAME <u>Stachowiak Joseph A.</u>		ARMY SERIAL NUMBER <u>33 407 446</u>	GRADE <u>Pfc</u>
HOME ADDRESS <u>Mahoningtown, Pennsylvania</u>		ARM OR SERVICE <u>MD</u>	DATE OF BIRTH <u>5 July 1922</u>
PLACE OF DEATH <u>European Area</u>	CAUSE OF DEATH <u>Killed in action</u>		DATE OF DEATH <u>6 June 1944</u>
STATION OF DECEASED <u>European Area</u>	DATE OF ENTRY ON CURRENT ACTIVE SERVICE <u>7 Dec 1942</u>	LENGTH OF SERVICE FOR PAY PURPOSES	
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)		YEARS	MONTHS
<u>Mrs. Stella Stachowiak, mother, R F D # 7, Mahoningtown, Pennsylvania</u>		DAYS	

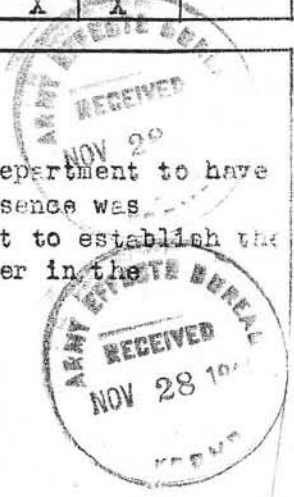
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)
Mrs. Stella Stachowiak, mother, same as above
Mr. Peter A. Stachowiak, father, same as above

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

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 June 1944 until such absence was terminated on 7 November 1944, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a Commander in the European Area.



COPIES FURNISHED:		
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2. O. C. M. G.	C. F. D.	ARMY EFFECTS BUREAU
G. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 301 FILE

BATTLE
 NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR.

[Handwritten Signature]

ADJUTANT GENERAL

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

159658

—BATTLE CASUALTY REPORT

NAME				SERIAL NUMBER				GRADE		ARM OR SERVICE		REPORTING THEATRE	
STACHOWIAK JOSEPH A				33407446				PFC		MD		ETO	
PLACE OF CASUALTY				DATE OF CASUALTY			FLYING OR JUMPING STAT		TYPE OF CASUALTY		SHIPMENT NUMBER		
				DAY	MONTH	YEAR							
FRANCE				06	JUN	44	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 STELLA STACHOWIAK			MOTHER			2 AUG 44		
NO. AND NAME OF STREET—CITY—STATE								
RURAL FREE DELIVERY 7			MAHONINGTOWN			PENNSYLVANIA		

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 _____ 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.

AMERICAN GRAVES REGISTRATION DIVISION
COLUMBUS GENERAL DISTRIBUTION DEPOT
COLUMBUS 15, OHIO

SUMMARY SHEET OF CLAIM OR POTENTIAL CLAIM BY FUNERAL DIRECTORS

In accordance with letter Office of the Quartermaster General dated 25 August 1948, file QMGMO, Subject: Discrepancies in Permanent 293 Files, the following information is furnished

To be filled in if claim has been received

1. Name and serial number of deceased: Pfc Joseph A. Stachowiak, USA 33407446
2. Name of claimant: Robert M. Miller Funeral Home, New Castle, Pa.
3. Amount claimed: \$30.00
4. Amount allowed (if any): \$30.00
5. Purchase order number (if any): SP- 7927-49

To be filled in if a potential claim exists

1. Name of potential claimant: _____
2. For transportation of remains of _____
Serial _____ from _____
to _____ and return escort to railhead
if necessary.

MAY 27 1949

Date

for Edward Engelman
FRANCIS FAPIANO
Capt, QMC
OIC, Administrative Branch

FILE

CERTIFICATE

(AR 30-1830) WORLD WAR II DECEASED

1. FILL IN EITHER PART A OR PART B; NOT BOTH.
2. USE PART A WHEN INTERMENT IS IN A CIVILIAN OR PRIVATE CEMETERY.
3. USE PART B WHEN REMAINS ARE DELIVERED TO HOME OR OTHER PLACE PRIOR TO BURIAL IN A NATIONAL OR POST CEMETERY.

PART A - CIVILIAN OR PRIVATE CEMETERY

A	REQUEST FOR REIMBURSEMENT OF INTERMENT EXPENSES		
(PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)			
<small>NAME OF DECEDENT</small> <i>Joseph A. Stachowiak</i>	<small>GRADE</small> Pfc	<small>SERIAL NUMBER</small> 33407446	<small>COMPONENT</small> U. S. Army
I certify that the sum of \$ <u>155.00</u> was paid by me from personal funds in connection with the interment of the remains of the above named decedent in the below named cemetery.			
<small>INSERT NAME OF CEMETERY</small> St. Joseph's Cemetery	<small>CITY OR COUNTY</small> Payette	<small>STATE</small> Penna.	
<small>INSTRUCTIONS TO PERSON SIGNING THIS FORM</small> 1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR. 2. Return four copies to: <div style="text-align: center; border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> AMERICAN GRAVES REGISTRATION DIVISION COLUMB'S GENERAL DEPOT COLUMBUS, OHIO </div>	<small>SIGNATURE OF CLAIMANT</small> <i>Peter A. Stachowiak</i>		
	<small>ADDRESS OF CLAIMANT (City, Street or RFD, and State)</small> R.D. #7, Mahoningtown, Pa.		
	<small>RELATIONSHIP TO DECEDENT</small> Father	<small>DATE</small> May 10, 1948	
	<small>RELATIONSHIP TO DECEDENT</small> Father		

PART B - NATIONAL OR POST CEMETERY

B	REQUEST FOR REIMBURSEMENT OF TRANSPORTATION EXPENSES		
(PLEASE READ EXPLANATION ON REVERSE SIDE BEFORE COMPLETING FORM)			
<small>NAME OF DECEDENT</small>	<small>GRADE</small>	<small>SERIAL NUMBER</small>	<small>COMPONENT</small>
I certify that the sum of \$ <u>648.48</u> was paid by me from personal funds in connection with the transportation of the remains of the above named decedent from and to the following places:			
<small>INSERT CITY OR TOWN (OR ADDRESS NOT IN A CITY OR TOWN) FROM WHICH REMAINS WERE SHIPPED</small>	<small>INSERT NAME AND LOCATION OF NATIONAL OR POST CEMETERY TO WHICH REMAINS WERE SHIPPED</small>		
<small>INSTRUCTIONS TO PERSON SIGNING THIS FORM</small> 1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR. 2. Return four copies to:	<small>SIGNATURE OF CLAIMANT</small>		
	<small>ADDRESS OF CLAIMANT (City, Street or RFD, and State)</small>		
	<small>RELATIONSHIP TO DECEDENT</small>	<small>DATE</small>	
	<small>RELATIONSHIP TO DECEDENT</small>		

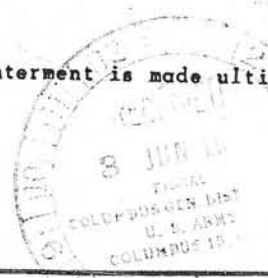
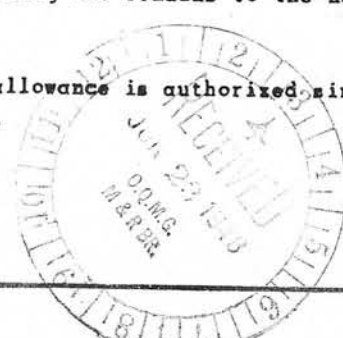
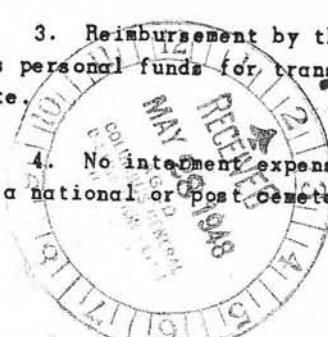
FORM 1228 REPLACES WD AGO FORM R-5507, OMC FORM R-5048

EXPLANATION OF PART A - CIVILIAN OR PRIVATE CEMETERY

1. When the remains are delivered for interment in a civilian or private cemetery, you are responsible for paying all interment expenses. In this connection, you are entitled to the allowance mentioned in paragraph 2 below.
2. An amount not to exceed \$75 is allowed by the government toward actual interment expenses when final interment of the remains is in a private or civilian cemetery. No allowance is authorized toward interment expenses when interment is in a national or post cemetery.
3. The \$75 maximum allowance by the government toward interment expenses includes but is not limited to the payment of one or more of the following items: hearse hire from the railroad station to your home, the funeral home, church, cemetery, or any other place designated by you; vault; church services; newspaper notices; transportation for friends and relatives to and from cemetery; and the services of a funeral director.
4. Reimbursement by the government is made only to the person who paid from his personal funds the expenses of or incident to interment in a private or civilian cemetery. Receipted bills are not required to accompany this form. Any expenses over and above the \$75 maximum must be borne by the person who incurred or paid the additional expenses.

EXPLANATION OF PART B - NATIONAL OR POST CEMETERY

1. When the remains are delivered to you at government expense prior to burial in a national or post cemetery, you are responsible for all additional expenses necessary to deliver the remains from that point to the national or post cemetery grave site. However, you may be entitled to an allowance for the cost of transporting the remains from your home to the national or post cemetery grave site subject to the conditions outlined in paragraph 2, below.
2. Reimbursement of transportation expenses is allowed only when the cost to the government to deliver the remains to you is LESS than what it would have cost the government to deliver the remains direct to the national or post cemetery of final interment. However, the amount which you may be allowed (the difference between cost of delivery to you and cost of delivery by the government direct to the national or post cemetery) may not exceed the amount actually expended by you to deliver the remains to the cemetery grave site. **WHETHER OR NOT YOU WILL BE GRANTED AN ALLOWANCE IS DEPENDENT UPON AN AUDIT OF THIS REQUEST. IN ANY EVENT YOU WILL BE NOTIFIED OF ANY ALLOWANCE DUE YOU BY THE OFFICE TO WHICH THIS FORM IS SENT.**
3. Reimbursement by the government will be made only to the person who paid from his personal funds for transporting the remains to the national or post cemetery grave site.
4. No interment expense allowance is authorized since interment is made ultimately in a national or post cemetery.



3342

RECEIPT OF REMAINS

DISTRIBUTION CENTER

COLUMBUS GENERAL DISTRIBUTION DEPOT, COLUMBUS 15, OHIO

ROUTINE

30 APRIL 1948

REMAINS CONSIGNED TO: MILLER FUNERAL HOME
NEW CASTLE PENNSYLVANIA
FROM QMDCG _____ BARDEN

REMAINS OF THE LATE PFC JOSEPH A STACHOWIAK ASN 33407446 BEING SHIPPED TO YOU ACCOMPANIED BY MILITARY ESCORT ON TRAIN NO 625-34 PENNSYLVANIA RAILROAD LEAVING COLUMBUS 3:05 AM THIRTY APRIL AND DUE TO ARRIVE NEW CASTLE JUNCTION PENNSYLVANIA 10:09 AM RAILROAD TIME THIRTY APRIL. REQUEST YOU IMMEDIATELY PASS THIS INFORMATION ON TO NEXT OF KIN. REQUEST FURTHER YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL AND TRANSPORT REMAINS AND ESCORT TO MR PETER A STACHOWIAK AT NEW CASTLE PENNSYLVANIA AND RETURN ESCORT TO RAILROAD STATION. YOU SHOULD SUBMIT ITEMIZED STATEMENT IN QUADRUPPLICATE PROPERLY CERTIFIED TO THIS DEPOT FOR PAYMENT OF TRANSPORTATION CHARGES ONLY IF ANY FROM NEW CASTLE JUNCTION PENNSYLVANIA STATION TO NEW CASTLE

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

THIS 30 DAY OF April, 1948.
DAY MONTH

Louis H. C. Schilder Sgt. USA.

WITNESS (Escort)

Robert M. Miller

CONSIGNEE

*File
NAT
Records
D. J. ...
W. H. ...*

MESSAGEFORM

MESSAGE CENTER No. TRANSMITTING MEANS

CRYPTOGRAPH OR CLEAR TEXT

CALLS V	STA. SER. No. NR	PRECEDENCE	TRANSMISSION INSTRUCTIONS	ORIGINATOR	DATE-TIME GROUP
ACTION	INFORMATION	EXEMPT	OPERATING SIGNALS	GROUP COUNT GR	

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Originator)

SECURITY CLASSIFICATION
GOVT PD

ACTION TO: ~~PRIORITY~~
 MR PETER A STACHOWIAK
 DLR AND REPORT ANY CHARGES
 MAHONINGTOWN STATION
 RURAL DELIVERY #7
 NEW CASTLE PENNSYLVANIA

<i>Day Letter</i>	PRECEDENCE FOR ACTION INFORMATION
PRIORITY	
<input type="checkbox"/>	ORIGINAL MESSAGE
IDENTIFICATION	REFERS TO ANOTHER MESSAGE CLASSIFICATION

INFORMATION TO: FROM QMDCG 14736 C BARDEN

THIS HEADQUARTERS HAS BEEN ADVISED THAT THE REMAINS OF LATE

PRIVATE FIRST CLASS JOSEPH A STACHOWIAK

ARE ENROUTE TO THE UNITED STATES. RECORDS OF THIS OFFICE INDICATE YOU WISH REMAINS
 DELIVERED TO MILLER FUNERAL HOME

RURAL DELIVERY #7 NEW CASTLE PENNSYLVANIA

PLEASE INSTRUCT FUNERAL DIRECTOR TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL.
 WE REGRET IT IS NOT POSSIBLE AT THIS TIME TO GIVE YOU A DEFINITE DELIVERY DATE
 HOWEVER THREE DAYS PRIOR TO SHIPMENT FROM THIS DEPOT YOUR FUNERAL DIRECTOR WILL BE
 NOTIFIED BY TELEGRAM OF RAIL ROUTING AND SCHEDULED TIME REMAINS WILL ARRIVE AT
 RAILROAD STATION. HE WILL BE REQUESTED TO PASS THIS INFORMATION TO YOU SO THAT YOU
 MAY MAKE FUNERAL ARRANGEMENTS. REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT.

WITHIN 48 HOURS OF DATE OF THIS MESSAGE PLEASE CONFIRM BY TELEGRAM COLLECT TO
 COLUMBUS GENERAL DISTRIBUTION DEPOT COLUMBUS OHIO ABOVE DELIVERY INSTRUCTIONS OR
 SUBMIT NEW DELIVERY INSTRUCTIONS. PLEASE BE ADVISED THAT IT WILL NOT BE POSSIBLE
 TO COMPLY AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY INSTRUCTIONS
 RECEIVED AFTER THE EXPIRATION OF THE 48 HOUR PERIOD. YOUR PROMPT COOPERATION WILL
 GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. IF YOU SHOULD DESIRE MILITARY
 HONORS AT FUNERAL YOU SHOULD ASK ANY LOCAL PATRIOTIC OR VETERANS ORGANIZATION TO
 MAKE ARRANGEMENTS. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM. NOTIFY
 THIS OFFICE OF PATRIOTIC OR VETERANS ORGANIZATION SELECTED BY YOU TO FURNISH
 MILITARY HONORS.

BOWMAN 126 COLUMBUS GENERAL DISTRIBUTION DEPOT COLUMBUS OHIO

SECURITY CLASSIFICATION

AUTHORIZATION

SIGNATURE

SYMBOL

MAILED
 MAR 25 1948
 AGRD
 COLUMBUS GENERAL
 DISTRIBUTION DEPOT

U. S. ARMY
 11-168

ORIGINATING AGENCY

DATE-TIME GROUP

OFFICIAL TITLE

FRANCIS FAPPIANO
 CAPT, QMC, Asst AGR Div

PAGE 1 OF 1

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

16-45801-1

U. S. GOVERNMENT PRINTING OFFICE

Mod II Rail - Funeral Director Designated

INSPECTION CHECKLIST
(FOR USE AT DISTRIBUTION CENTER)

NAME Stachowiak, Joseph A.		RANK Pfc	SERIAL NUMBER 33407446		
SOURCE WV006R-E		CONSIGNEE Miller Funeral Home Rural Delivery #7 New Castle, Penna.			
SHIPPING CASE - GENERAL APPEARANCE (CHECK ONLY DISCREPANCIES)		CONDITION OF SHIPPING CASE (CHECK ONE) <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY			
<input checked="" type="checkbox"/> FINISH (EXTERIOR)	REMARKS <i>Draw bolt aff Detached in bag missing caps</i>				
<input type="checkbox"/> FINISH (INTERIOR)					
<input type="checkbox"/> HANDLES					
<input type="checkbox"/> HANDLE BOLTS					
<input type="checkbox"/> STENCILING - NAMEPLATE					
<input type="checkbox"/> HEALTH PERMIT MARKER					
<input type="checkbox"/> HEALTH PERMIT NUMBER					
<input checked="" type="checkbox"/> DRAW BOLT					
CASKET - GENERAL APPEARANCE (CHECK ONLY DISCREPANCIES)		CONDITION OF CASKET (CHECK ONE) <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY			
<input type="checkbox"/> FINISH (EXTERIOR)	REMARKS <i>Touch up in bag</i>				
<input type="checkbox"/> HANDLES AND FASTENINGS					
<input type="checkbox"/> STENCILING - NAMEPLATE					
<input type="checkbox"/> CAM LOCKS (SEALING)					
<input type="checkbox"/> ODOR OR MOISTURE					
<input checked="" type="checkbox"/> SCRATCHES IN FRONT					
Routed Through					
<input type="checkbox"/> MORTUARY OPERATING ROOM		<input type="checkbox"/> MORTUARY REPAIR SHOP			
CONDITION OF REMAINS <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY		CASKET REPAIRED <input type="checkbox"/> YES <input type="checkbox"/> NO			
NECESSARY DISINFECTION (EXPLAIN)		CASKET EXCHANGED <input type="checkbox"/> YES <input type="checkbox"/> NO			
		SHIPPING CASE REPAIRED <input type="checkbox"/> YES <input type="checkbox"/> NO			
		SHIPPING CASE EXCHANGED <input type="checkbox"/> YES <input type="checkbox"/> NO			
		REMARKS			
TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTOR
			0945	4-28-48	<i>[Signature]</i> HMM
REMARKS					

OKAID)7 14 4 EXTRA COLLECT

NEWCASTLE PENN APR 9 1031A

COLUMBUS GENERAL DISTRIBUTION DEPOT

ATTN CHIEF AMERICAN GRAVES REGISTRATION

DIVISION COLUMBUS OHIO

REFERENCE TELEGRAM CONCERNING PDC JOSEPH STACHOWIAK

FUNERAL ARRANGEMENTS UNCHANGED

PETER A STACHOWIAK RD 7 MAHONINGTOWN PA.

7.

1107AM...

RETURN RECEIPT

Received from the Postmaster the Registered or Insured Article, the original number of which appears on the face of this Card.

1 Jose A. Stachowick
(Signature or name of addressee)

2 _____
(Signature of addressee's agent—Agent should enter addressee's name on line ONE above)

Date of delivery _____, 194

U. S. GOVERNMENT PRINTING OFFICE: 16-12421

NAME STACHOWICK, JOSE A. PFC 7446

BAY	PALLET	BOX	TALLY
XI 62	38	13	7609
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
CTN			

Post Office Department

OFFICIAL BUSINESS



PENALTY FOR PRIVATE USE TO AVOID PAYMENT OF POSTAGE: \$300

(GPO)

POSTMARK OF DEPARTING OFFICE

Return to

AMERICAN GRAVES REGISTRATION DIVISION

COLUMBUS GENERAL DISTRIBUTION DEPOT

COLUMBUS 15, OHIO

Street and Number,
or Post Office Box.

REGISTERED ARTICLE

NO. 321627

INSURED PARCEL

COLUMBUS,

OHIO.

No.

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

Pfc. Joseph A. Stachowiak, 33 407 446
Plot T, Row 7, Grave 135,
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, PETER A. STACHOWIAK
(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

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

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

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

- 1. BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS.
- 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY
ST. JOSEPH'S CEM. EVERSON PENNA.
(NAME AND LOCATION OF CEMETERY)
- 3. BE RETURNED TO _____ (FOREIGN COUNTRY), THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT _____ (LOCATION OF CEMETERY SELECTED)
- 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT _____ (LOCATION OF NATIONAL CEMETERY SELECTED)
(Please indicate if your own religious services at a location other than the selected national cemetery are desired by placing an "X" in the proper box)
 YES NO

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

NONE

DD Process 11/21/47 Rg

Coded
3 Nov 47
71 Baker WR

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 (Nearest railroad passenger station)	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 MILLER FUNERAL HOME			
NUMBER AND STREET P.O.#7	CITY OR TOWN NEW CASTLE PA. 07	COUNTY OR PROVINCE LAWRENCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY TENNA.
EXPRESS OFFICE (Nearest railroad passenger station) NEW CASTLE PA.	TELEGRAPH ADDRESS NEWCASTLE 8018-J-4		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.)*

This Body To Be shipped To FATHER & ABOVE LISTED UNDERTAKER FOR SERVICE'S AT HOME. IT WILL THEN BE BURIED IN CEMETARY NAMED IN SEC. 1. APPLICATION

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.

Peter A. Stachowiak (SIGNATURE OF NEXT OF KIN) **P.O.#7 MAHONINGTOWN STA NEW CASTLE PA.** (STREET AND NUMBER)
PETER A. STACHOWIAK (NAME PRINTED OR TYPED) **P.O.#7 MAHONINGTOWN STA NEW CASTLE PA.** (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 15th day of OCT., 1947, at city (or town) of NEW CASTLE, county of LAWRENCE, and State (or Territory or District) of PENNSYLVANIA.

Francis J. Sargent
 (SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

NOTARY PUBLIC

(OFFICIAL TITLE)

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

507TH PARASHUTE INFANTRY
APO 830, U.S. ARMY

~~7 August~~
Date

1944

SUBJECT: Transmittal of Inventory of Personal Effects.

TO : Effects Quartermaster, HHCUSA, Depot 3-14, APO 507
U. S. Army.

Transmitted herewith in accordance with Adm. Cir # 80,
dated 25 Oct 1943, Hq. HHCUSA, is inventory of Effects con-
cerning subject named below.

<u>Stachowiak</u>	<u>Joseph</u>	<u>A.</u>	<u>Pfc</u>	<u>55407448</u>	
(Last Name)	(First Name)	(MI)	(Rank)	(A.S.N.)	(Control No.) (For use of Effects AM HHCUSA)

Organization Med Det., 507th Parachute Inf.
(~~Unit~~ ~~Not~~ Branch of Service)

*Status. (~~Deceased~~, Missing in Action, ~~Prisoner of War~~) on the 6th
day of June 19 44.

Designated Beneficiary (With address)
Mrs. Stella Stachowiak, (Mother)
2227,
Edinburgh, Pa.

filed

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

U.S.M.O. None Amt. U.S.M.O. Amt.

U.S.M.O. Amt. U.S.M.O. Amt.

U.S. Official Check None Amt. Bank
(Name & 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) None

INVENTORY OF EFFECTS
(Attach extra sheets if necessary)

- 1 Wrist Watch ✓
- 1 Pipe ✓
- 2 Good Conduct Ribbons ✓
- 2 GPO Ribbons ✓
- 1 Natl. Defense Ribbon ✓
- 1 pr of Wings, pilot ✓
- 1 Sgt. Background ✓
- 3 Photos ✓
- 1 Cigarette Lighter ✓
- 1 Expert Medal ✓

I certify that the foregoing inventory comprises all of the subject's effects and that effects were shipped to Effects Co., ETCUSA, APO #507, 3-14, U. S. Army by delivering to 44, 44th A/B Div.,

APO 430, USA on 7 August 1944.

Signature - (In ink)

(Block Letters)

Rank and organization

159.658

PACKAGE DESCRIPTION <i># I pkg.</i>	ARMY EFFECTS BUREAU INVENTORY	DECEASED <input type="checkbox"/>
		MISSING <input checked="" type="checkbox"/>
		P.O.W. <input type="checkbox"/>
		ABANDONED <input type="checkbox"/>
		TALLY NO. <i>7609</i>
		INV. DATE <i>11 May 45</i>
		ORIG. NO. OF PKGS. <i>1</i>
		BOX NO.
		SHEET OF <i>1</i> SHEETS
		ORGANIZATION <i>Med Det 507th Prot Coy</i>

NAME *Joseph A. Stachowick*
 U.S.N. *33407440* RANK *pfc*

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

SEP 25

REMARKS <i>Mrs Stella Stachowick Rd # 7 Mahoningtown Pa.</i>	ATTACHMENTS	FORM #54	FORM #100
		<i>1 Inventory</i>	

WEIGHT	G.I. REMOVED
--------	--------------

SHORTAGES

1 wrist watch

U.S. GOVT. CHECK SHORT

1 pipe

QUANTITY

DATE

SYMBOL

AMOUNT

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

BH Smith

INVENTORY CLERK

J. J. Green

SUPERVISOR

5.1. REMOVED

Summary Court-Martial
ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPT
601 Hardesty Avenue
Kansas City 1, Missouri

JRM:MH:aw

Case No. 159,618

Date 28 May 1945

SUBJECT: Report of transaction in disposing of the effects of

Joseph A. Stachowiak, 33407446 late a
(Name of decedent) (Army Serial Number)

Private First Class Medical Department who had
(Grade) (Organization, Army or Service)

on the 11 day of June, 1944, at in European Area

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

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

a. No legal representative or widow of decedent being present at decedent's camp or quarters, effects of decedent were forwarded to this Summary Court-Martial.

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

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

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

FINDING

Before a Summary Court-Martial which convened at Kansas City, Missouri, on 25 May 1945, pursuant to Special Orders 228, Headquarters KCOM Depot, dated 25 September 1943, the application or affidavit of Peter A. Stachowiak 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, Peter A. Stachowiak of _____ (Name of person found entitled)

RD 7, Mahoningtown State of _____ (Number, Street or Avenue) (City, Town or Village)
Pennsylvania, is the father of the _____ (Relationship or Capacity)

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

ac

(Signature of Summary Court Officer)

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mr. Peter A. Stachowiak

RFD 7

Mahoningtown, Pennsylvania

SHIP TO:
Pfc. Joseph A. Stachowiak

Effects of: 33407446
Name 159,658 D

ASN

Case No.

Wt.

DATE 28 May 1945
GHG:MH:dw

AB Cowart

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.

1 pkg

REMARKS:

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

FRANKED JUN 2 1945

N.K.
Shipping Clerk



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

IN REPLY REFER TO _____ 159,658 ✓

GHG:MH:dw
May 28, 1945

Mr. Peter A. Stachowiak ✓
RFD 7
Mahoningtown, Pennsylvania

Dear Mr. Stachowiak: ✓

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

These effects are being forwarded to you in one package.

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

The action of this Bureau in transmitting personal effects does not, of itself, vest title in the recipient. Such property is forwarded for distribution according to the 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, ✓

P. L. KOOB ✓
2nd Lt. Q.M.C.
Officer-in-Charge
SJ Unit

ac

114

REQUEST FOR DISPOSITION OF REMAINS

QMOYG 293
Stachowiak, Joseph A.
S. N. 33 407 446

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

13 September 1946

DO NOT WRITE ABOVE THIS LINE
Mr. Peter A. Stachowiak
R. F. D. # 7
Mahoningtown, Pennsylvania

Dear Mr. Stachowiak:

Your letter concerning your son, the late Private First Class Joseph A. Stachowiak, has been received in this office.

The War Department has now been authorized to remove the remains of our honored dead, at Government expense, to the final resting place which next of kin may designate.

When the necessary verification of records has been completed, a letter with an information pamphlet and a "Request for Disposition" form attached will be mailed to you. The "Request for Disposition" form, when properly filled out, will constitute the formal expression of your detailed desires as next of kin. Until you receive these forms, therefore, it will not be necessary for you to communicate with this office regarding this subject, unless you desire to report any change of address.

As you probably know, the supply of steel for the manufacture of caskets is at present uncertain. Without this essential item, the projected 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 the mentioned forms will be mailed. Every effort, however, will be made to shorten the time between now and the date of mailing and your desires will be acted upon with a minimum of delay.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

JAMES L. PRENN
Major, QMC
Assistant

MEMORIAL DIVISION
RECORDS BRANCH
SEP 13 12 15 PM '46

NONE

JOV

SCV

293
Pfc. Joseph A. Stachowiak, 33 407 446
Plot T, Row 7, Grave 135,
United States Military Cemetery
Blosville, France

12 September 1947

Mr. Peter A. Stachowiak
Rural Free Delivery #7
Mahoningtown, Pennsylvania

Dear Mr. Stachowiak:

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

8-7-47
gh
Incls.

SEP 17 1 47 PM '47

O. O. H. G. B. B. B. B.
MAIL RECORDS B. B. B. B.

SPQYG 293

Joseph A. Stachowiak

1 April 1946

Mr. Peter A. Stachowiak
R.F.D. #7
Mahoningtown, Pennsylvania

Dear Mr. Stachowiak:

The War Department is most desirous that you be furnished the burial location of your son, the late Private First Class Joseph A. Stachowiak, A.S.N. 33 407 446.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery, Bloisville, France, plot T, row 7, grave 135.

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

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

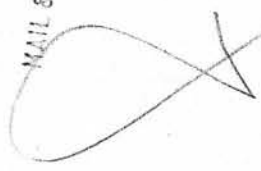
Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

ewz

APR 2 1946

MAIL & RECORDS BRANCH



LM



September - 3 - 46
New Castle, Pa.

Dear Sir:

I would like to be advised
what steps to take in getting
my son's body back for
burial here.

Burial Location is -

Gr. First Class ⁹⁴³ Joseph A. Stachewick

A. I. N. 33 40 74 46

U. S. Military Cemetery

Blossville, France

Plot T - Row 7 - grave 135.

Thanking you.

Remain

Mr. Peter A. Stachewick

R. D. # 7

Wahoningtown, Pa.

Mahoningtown, Pa.
Rural Route #7,

IMMEDIATE ACTION

January 32-1945.

Effects Quartermaster
Army Effects Bureau
Kansas City Lt. Division
Kansas City, Montana.

159,658
CP

Dear Sir;

I am writing, concerning the personal belongings of my son, Pfc. Joseph Stackowiak, A.S. No., 33407446, who was killed in action on June 6th, 1944, in the European theater of operations—somewhere in France. We would appreciate receiving them thanking you

Very Sincerely Yours.

Peter A. Stackowiak

R.D. #7

Mahoningtown, Pa.

1-27
WT

New Castle, Pa.
April - 16 - 48

Dear Sir:

I am enclosing the following information which was omitted from telegram, concerning the body of Pfc. Joseph A. Stachowiak of R. D. 7 - New Castle Pa.

The V. F. Jr. of New Castle, will serve as Honor Guard & have military services at church. When body is to be taken to Everson for burial where Hamilton - Maloy Post 595 V. F. Jr. will have military services at cemetery.

Thank you.

Mr. Peter A Stachowiak
R. D. #7

Wakoningtown Station
New Castle, Pa.

COLUMBUS GENERAL DEPOT
UNITED STATES ARMY
COLUMBUS 15, OHIO

6 April 1948

Mr. Peter A. Stachowiak
Mahoningtown Station
Rural Delivery # 7
New Castle, Pennsylvania

Dear Mr. Stachowiak:

Reference is made to telegram dispatched from this Distribution Center 29 March 1948 stating Department of the Army will deliver remains of late Private First Class Joseph A. Stachowiak in the near future.

Records of this office indicate you wish remains delivered to Miller Funeral Home, Rural Delivery # 7, New Castle, Pennsylvania. To date no reply has been received from you confirming your previous desires.

Request you furnish immediately by telegram collect to Columbus General Distribution Depot, Columbus, Ohio, Attention: Chief, American Graves Registration Division, confirmation of above shipping instructions.

On behalf of a grateful nation, I extend to you my continued sympathy in your great loss. If I may be of any assistance to you please feel free to contact this office at any time.

Sincerely,

ALBERT BARDEN
Lt. Col., QMC
Chief, AGR Div

APR 10 1948
COLUMBUS, OHIO

COLUMBUS GENERAL DEPOT
UNITED STATES ARMY
COLUMBUS 15, OHIO

6 April 1948

Mr. Peter A. Stachowiak
Mahoningtown Station
Rural Delivery # 7
New Castle, Pennsylvania

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Chief, AGR Div



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

JRM:NM:s1b
February 1, 1945

IN REPLY REFER TO: 159658

Mr. Peter A. Stachowiak
~~REF 7~~
Mahoningtown, Pennsylvania

Dear Mr. Stachowiak:

This will acknowledge your letter of January 22, making inquiry regarding the personal effects of your son, Private First Class Joseph A. Stachowiak.

I am sorry to report that the Army Effects Bureau has not yet received any of your son's effects. Due to hazards of the sea and the many difficulties in transportation of property from overseas, it is impossible to determine accurately when effects will arrive here. However, it often requires ten months or longer for property to reach this Bureau from the European Area.

You are assured that upon arrival of the personal effects belonging to your son, you will be notified promptly.

Yours very truly,

F. A. ECKHARDT
Captain QMC
Assistant