



INDIVIDUAL DECEASED PERSONNEL FILE

RECEIPT OF REMAINS

DISTRIBUTION CENTER

CHARLOTTE QUARTERMASTER DEPOT, CHARLOTTE, N. C.

ROUTINE 13 DECEMBER 1948

REMAINS CONSIGNED TO: SEYMOUR FUNERAL HOME
107 WEST CHESTNUT STREET
GOLDSBORO, NORTH CAROLINA

REMAINS OF THE LATE PRIVATE STEPHEN P. FAIRCLOTH SN 34 857 662

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

SOUTHERN RAILWAY LEAVING CHARLOTTE EIGHT FORTY PM

SIXTEEN DECEMBER AND DUE TO ARRIVE GOLDSBORO

SOUTHERN RAILWAY STATION SIX AM

RAILROAD TIME SEVENTEEN DECEMBER. REQUEST YOU MAKE ARRANGEMENTS TO

ACCEPT REMAINS AT STATION UPON ARRIVAL. REQUEST YOU IMMEDIATELY PASS THIS

INFORMATION ON TO NEXT OF KIN.

FREDERIC W. DENNIS, JR.
LT. COL., QMC

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

THIS 17 DAY OF Dec., 1948

Cpl. William H. Padrick
WITNESS (Escort)

Seymour Funeral Home Inc.
CONSIGNEE

NAT

FILE

RECORDS MAINTAINED

DATE 25 Jan 49

NAME S. J. Outtrim

- B & B -

(A)

DISINTERMENT DIRECTIVE

Handwritten: 54-45

SECTION A — NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER 3504 00874		DATE 15 06 48 DAY MONTH YEAR	
NAME FAIRCLOTH STEPHEN P			SERIAL NUMBER 34857662		RANK PVT	ARM 1	
CEMETERY ANDILLY - LAY ST REMY						DISPOSITION OF REMAINS 1 4600 04 CODE DIST. PT.	
PLOT F	ROW 6	GRAVE 145	COUNTRY FRANCE			CAUSE OF DEATH 1	
SECTION B — CONSIGNEE AND NEXT OF KIN							
NAME AND ADDRESS OF CONSIGNEE SEYMOUR FUNERAL HOME 107 WEST CHESTNUT STREET GOLDSBORO, NORTH CAROLINA (F/B STONEY CREEK, NORTH CAROLINA)				NAME AND ADDRESS OF NEXT OF KIN MRS. ELIZABETH MARSH FAIRCLOTH C/O PERRY SMITH (MOTHER) RURAL FREE DELIVERY #4 GOLDSBORO, NORTH CAROLINA			
SECTION C — DISINTERMENT AND IDENTIFICATION							
NAME		SERIAL NUMBER		RANK	DATE OF DEATH		DATE DISTINTERRED
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER		ORGANIZATION USAGF		RELIGION		IDENTIFICATION VERIFIED BY NAME AND TITLE	
SECTION D — PREPARATION OF REMAINS FOR SHIPMENT							
NATURE OF BURIAL				CONDITION OF REMAINS			
OTHER MEANS OF IDENTIFICATION <i>Handwritten:</i> SEE ATTCHD WORK SHEET							
MINOR DISCREPANCIES 1							
REMAINS PREPARED AND PLACED IN CASKET							
DATE		BY		EMBALMER (Signature)			
CASKET SEALED BY							
CASKET BOXED AND MARKED				SHIPPING ADDRESS VERIFIED BY			
DATE		BY					
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.							
SIGNATURE OF GRS INSPECTOR							
1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.							

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM		TO	
KIND OF CONVEYANCE <i>AGRC ANTWERP, Belgium</i>		NAME OF CONVOYER <i>C.O., CASHING POINT ANTWERP, Belgium.</i>	
SIGNATURE OF SHIPPER <i>E. R. King</i> <i>E. R. KING, 1/LT., INF.</i>	DATE	SIGNATURE OF RECEIVER <i>SGT. ROBERT M. MEISENHEIMER</i> <i>[Signature]</i>	DATE <i>27 SEP 1948</i>

2. SHIPPED

FROM		TO	
KIND OF CONVEYANCE <i>AGRC ANTWERP BELGIUM</i>		NAME OF CONVOYER <i>USAT CARROLL VICTORY</i>	
SIGNATURE OF SHIPPER <i>L E Butler Lt Col Inf</i>	DATE <i>28 OCT 1948</i>	SIGNATURE OF RECEIVER <i>R. W. WHEREOTT CAPT. I. C.</i> <i>[Signature]</i>	DATE <i>28 OCT 1948</i>

3. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER <i>[Signature]</i>	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>W. W. PRETSCH</i> <i>1. LIEUT. COLONEL, TC.</i> <i>PORT TRANSPORTATION OFFICER</i>	DATE <i>NOV 7 6 1948</i>

4. SHIPPED

FROM		TO	
KIND OF CONVEYANCE <i>[Signature]</i>		NAME OF CONVOYER <i>[Signature]</i>	
SIGNATURE OF SHIPPER <i>PRETSCH</i> <i>1. LIEUT. COLONEL, TC.</i> <i>PORT TRANSPORTATION OFFICER</i>	DATE <i>NOV 9 1948</i>	SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE <i>NOV 20 1948</i>

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER <i>FREDERIC W. DENNIS JR.</i> <i>1. LIEUT. COLONEL, QMG</i>	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

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

7. SHIPPED

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

DISINTERMENT DIRECTIVE

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

NAME

SERIAL NUMBER

RANK

ARM

DATE OF DEATH

FAIRCLOTH STEPHEN P

34857662 PVT

1

CEMETERY

DAY MONTH YEAR
DISPOSITION OF REMAINS

PLOT

ROW

GRAVE

COUNTRY

CODE DIST. PT.
CAUSE OF DEATH

F 5 145 ANDILLY FRANCE

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

NAME AND ADDRESS OF NEXT OF KIN

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISTINTERRED

FAIRCLOTH STEPHEN P

34857662

Pvt

29 JUNE 1948

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

REMAINS

MARKER

P

JOHN G WEST, EMBALMER

NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

MILITARY CLOTHING

CONDITION OF REMAINS DISARTICULATED. SMALL AMOUNT OF
DECOMPOSED TISSUE. MISSING RIGHT CLAVICLE.
FRACTURED RIGHT TIBIA.

OTHER MEANS OF IDENTIFICATION

GRS TAG FOUND ON MARKER.

MINOR DISCREPANCIES

NONE

REMAINS PREPARED AND PLACED IN ~~CASKET~~ transfer box

DATE 29 JUNE 1948

BY JOHN G WEST, EMBALMER

CASKET SEALED BY

EMBALMER (Signature)

RICHARD N CONRAD, EMB. SUPV.

RICHARD N CONRAD, EMB. SUPV.

CASKET BOXED AND MARKED

6/10/48 CHARLES R CARDER

SHIPPING ADDRESS VERIFIED BY all markings, plates
& tags verified by J. W. Patton

DATE

BY

CLERK RECORDER

JOHN W. PATTON, CAPT., Cml. C.

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

JESSE C HARRELL 1st Lt. CAC DET "A" AGRC

SIGNATURE OF GRS INSPECTOR

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

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

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

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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



NOV 11 1917

WU266 21 COLLECT 7 EXTRA

GOLDSBORO NCAR NOV 11 517P

COMMANDING OFFICER CHARLOTTE QA DEPOT

SHIP REMAINS OF THE LATE PVT STEPHEN P FAIRCLOTH AS PER
ORIGINAL INSTRUCTIONS

MRS ELIZABETH MARSH FAIRCLOTH CARE PERRY SMITH RTE 4
GOLDSBORO NCAR

NOV 12

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)
CHARLOTTE QUARTERMASTER DEPOT, CHARLOTTE, N. C.

SECURITY CLASSIFICATION

ACTION TO:

- .
- .
- .

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

INFORMATION TO:

PLEASE INSTRUCT FUNERAL DIRECTOR TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL. REMAINS WILL BE ACCOMPAINED BY MILITARY ESCORT. IF YOU DESIRE MILITARY HONORS AT FUNERAL YOU SHOULD ASK ANY LOCAL PATRIOTIC OR VETERANS ORGANIZATIONS TO MAKE ARRANGEMENTS. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.

FREDERIC W. DENNIS, JR.
LT. COL., QMC

SECURITY CLASSIFICATION		AUTHORIZATION	
ORIGINATING AGENCY		SIGNATURE	
SYMBOL	DATE-TIME GROUP	OFFICIAL TITLE	PAGE 2 OF
OMDVI CHIEF AGR DIVISION	NOV 10 1948	FREDERIC W. DENNIS, JR. LT. COL., QMC	

WD AGO FORM 11-168
15 JUN 1945

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

Revised 29 July 1948

(ADVANCE TELEGRAM C)

INCOMING

NOV 20 1948

INSPECTION CHECKLIST

(FOR USE AT OVERSEAS PORT, U.S. PORT, AND DISTRIBUTION CENTER) 5145

NAME FAIRCLOTH, Stephen P.	GRADE Pvt	SERIAL NUMBER I-365 34 857 662
--------------------------------------	---------------------	---

SOURCE Andilly - Lay St Remy, France	CONSIGNEE Seymour Funeral Home 107 West Chestnut Street Goldsboro, N. C.
--	--

SHIPPING CASE - General Appearance (Check ONLY Discrepancies)	CONDITION OF SHIPPING CASE (Check one) <input type="checkbox"/> SATISFACTORY <input checked="" type="checkbox"/> UNSATISFACTORY
<input checked="" type="checkbox"/> FINISH (Exterior) HANDLES DRAW BOLTS STENCILING - NAMEPLATE HEALTH PERMIT MARKER HEALTH PERMIT NUMBER	REMARKS <i>Repair to Case</i>

CASKET - General Appearance (Check ONLY Discrepancies)	CONDITION OF CASKET (Check one) <input type="checkbox"/> SATISFACTORY <input checked="" type="checkbox"/> UNSATISFACTORY
<input checked="" type="checkbox"/> FINISH (Exterior) HAND RAILS AND FINIALS NAMEPLATE CAM LOCKS (Sealing) AND GASKET ODOR OR MOISTURE	REMARKS <i>Repaired to Order</i> <i>of Home</i>

ROUTED TO

<input type="checkbox"/> MORTUARY SECTION	<input checked="" type="checkbox"/> MAINTENANCE AND REPAIR SECTION
---	--

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
					<i>[Signature]</i>

REMARKS

ok - 12-11-48

OK-OUTGOING *John L. Green*

[Signature]

DEC 16 1948

NY 2020-R U.S. AT CARROLL VICTORY

WWW II
2928-R

REQUEST FOR REIMBURSEMENT OF INTERMENT OR TRANSPORTATION EXPENSES

(Read Explanation on Reverse Side before completing form)

DATE

10/31/48

NAME OF DECEDENT (Last, First, Middle Initial)

PAIRCLOTH, Stephen F.

BRANCH OF SERVICE

USA

TO BE FILLED IN BY CLAIMANT

A. INTERMENT EXPENSES
(Civilian or Private Cemetery)

B. TRANSPORTATION EXPENSES
(National or Post Cemetery)

RANK OR GRADE

Pvt

SERIAL NO.

34 857 662

INSTRUCTIONS TO PERSONS SIGNING THIS FORM

1. This form is NOT to be signed by Funeral Director.
2. Fill in as required and sign four copies.
3. Check Box "A" or Box "B" above, not both.
4. Check Box "A" when interment is in a civilian or private cemetery.
5. Check Box "B" when remains are delivered to home or other place prior to burial in a national or post cemetery.

FILL IN THIS STATEMENT IF BOX "A" IS CHECKED

I certify that the sum of \$ 75.00 was paid by me from personal funds in connection with the interment of the remains of the above-named decedent in the cemetery indicated below:

NAME: Paircloth Family Cemetery

CITY OR COUNTY: Rt 4 Greensboro

STATE: North Carolina

FILL IN THIS STATEMENT IF BOX "B" IS CHECKED

I certify that the sum of \$ _____ was paid by me from personal funds in connection with the transportation of the remains of the above-named decedent from: (City, town, or place from which remains were shipped)

USE

DO

RETURN FOUR COPIES TO

AMERICAN GRAVES REGISTRATION DIVISION
CHARLOTTE QUARTERMASTER DEPOT
CHARLOTTE 6, N. C.

SIGNATURE OF CLAIMANT

Donald Lyndell Mahala Paircloth

ADDRESS (Street number or RFD, City and State)

Rt 4 Greensboro N.C.

RELATIONSHIP TO DECEDENT

Mother

REMARKS

"CLAIM VALID, REPATRIATION"

RALPH W. RICHARDSON
CAPTAIN QMC

JAN 6 1949

Paid \$75.00

JAN 18 1949

460917

PART A

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.

PART B

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.

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

Pvt. Stephen P. Faircloth, 34 857 662
 Plot F, Row 6, Grave 145,
 United States Military Cemetery
 Andilly, France

29 July 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

1, Mrs Elizabeth Marsh Faircloth
(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
Family Cemetery (Stoney Creek, T.S.) Wayne Co. N.C.
(NAME AND LOCATION OF CEMETERY)
- 3. BE RETURNED TO _____, THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT _____
(FOREIGN COUNTRY) (LOCATION OF CEMETERY SELECTED)
- 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT _____
(LOCATION OF NATIONAL CEMETERY SELECTED)
(Please indicate if your own religious services at a location other than the selected national cemetery are desired by placing an "X" in the proper box)
 YES NO

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

546
 Cadet A. J. Jones
 6-18-48

OCT 10

PART I (Continued)

If on Page 1 of this form you have selected Option Number 2 or 3, or Option Number 4 with your own funeral ceremonies desired at a location other than the selected national cemetery, complete one of these sections.

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

LAST NAME	FIRST NAME	MIDDLE INITIAL
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE
STATE OR TERRITORY OF U. S. A., OR COUNTRY	TELEGRAPH ADDRESS	TELEPHONE No.
EXPRESS OFFICE (Nearest railroad passenger station)		

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 <i>Seymour Fenner Home</i>			
NUMBER AND STREET <i>107 W. Walnut St</i>	CITY OR TOWN <i>Goldston</i>	COUNTY OR PROVINCE <i>Wayne Co</i>	STATE OR TERRITORY OF U. S. A., OR COUNTRY <i>N.C.</i>
EXPRESS OFFICE (Nearest railroad passenger station) <i>Goldston N.C.</i>	TELEGRAPH ADDRESS	TELEPHONE No. <i>1065</i>	

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.

✓ Mrs Elizabeth Marsh Faircloth
(SIGNATURE OF NEXT OF KIN) (STREET AND NUMBER)
Co Perry Smith Goldston N.C. F.D.A.H
(NAME PRINTED OR TYPED) (CITY AND STATE) *N.C.*

Subscribed and duly sworn to before me according to law by the above-named applicant this 12th day of August, 1947, at city (or town) of Goldston N.C., county of Wayne Co, and State (or Territory or District) of North Carolina

Thelma Pearson
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)
Notary Public
(OFFICIAL TITLE)

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

PART II—RELINQUISHMENT OF DISPOSITION AUTHORITY

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

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

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

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

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

PART III

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

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

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

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

DEPARTMENT OF THE ARMY



CMIF 275
Faircloth, Stephen P.
SN 30 657 662

11 December 1947

Mrs. Eula A. Herring
Route 4, Box 112
Goldboro, North Carolina

Dear Mrs. Herring:

Your letter pertaining to the remains of your former husband, the late Private Stephen P. Faircloth, has come to my attention.

The Secretary of the Army, pursuant to the authority granted under Public Law 305, 70th Congress, has established the precedence of relatives eligible to designate the disposition of the remains of the deceased. Accordingly the widow has the prior disposition right unless she was separated, divorced or remarried. In either of these events the disposition right reverts to the parent of the decedent, the father having precedence over the mother.

Inasmuch as you have remarried, the right to designate the final disposition of the remains of your former husband, automatically reverts to his mother.

Sincerely yours,

RICHARD B. COOMBS
Major, QMC
Memorial Division

ec

ed
RBC

CORRESPONDENCE ACTION SHEET

Mr. Miss. Addressee: Mrs. Zula A. Herring General Relationship
State Route 4, Box 112
City, State Goldsboro, North Carolina '47 Date letter

Cemetery Temporary: _____

Permanent: _____
Plot Row Gr Cem. Name or No. City Country

PARAGRAPHS (sequence)

-- ADDITIONAL -- DATA -- MODIFICATIONS --

165A

154B

mother

EP

Analyst Typist Reviewer

Modifications

OKed

Decedent: Faircloth, Stephen P.
Last First Initial Rank ASN 1st. 34857 662

[Handwritten initials and date]
12/11/47

Buddham, 479.

June 12, 1917

Dear Sir,

I see where you got
how that money had
been sent down here
I want the balance
of my husband's P.F.
Get them to come with you
send back at the
earliest possible date
you can get to it.

Please send me any
information you can
get to this matter.

Sincerely,
Mrs. O. J. Fleming
My address on other side

Miss Julia B. Goring
Rt. 1 Box 10
Bridgewater, N.J.

Pvt. Stephen P. Faircloth, 34 857 662
Plot F, Row 6, Grave 145,
United States Military Cemetery
Andilly, France

29 July 1947

Mrs. Elizabeth Marsh Faircloth
Route #4
Goldsboro, North Carolina

Dear Mrs. Faircloth:

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

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

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

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

Incls.

Sincerely,

THOMAS B. LARKIN
Major General
The Quartermaster General

wj

JUL 31 11 10 AM '47

U.S. MILITARY CEMETERY
ANDILLY, FRANCE

1247
Amey

25 July 1947

Mrs. Elizabeth Marsh Faircloth
Route #4
Goldsboro, North Carolina

Dear Mrs. Faircloth:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Private Stephen P. Faircloth, A.S.N. 34 857 662.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Andilly, plot F, row 6, grave 145. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located fifteen miles northwest of Nancy, 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 all legal next of kin with full information and solicit their detailed desires.

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

gh

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

attch 4
13 MAR 1947
XC-5735-656

In Reply Refer To: QMGMR 293

293 Faircloth, Stephen P.
SN 54 857 652

Date of Birth 50 November 1918

SUBJECT: Request for information re next of kin of above named deceased serviceman of World War II.

3-17-47
Mc

TO : Director, Dependents and Beneficiaries Claims Service
Veterans Administration
Washington 25, D. C.

For use in determination of final disposition of remains of the above identified deceased serviceman, it is requested that appropriate information be entered on the lower portion of this letter and that one copy of the completed letter be returned to this office.

1 Incl. *PK*
Envelope

Martin G. Riley
MARTIN G. RILEY
Major, QMC
Memorial Division

Date _____
Veteran's Name _____
XC- _____

Information in the VA case file indicates that the deceased serviceman was survived by the relatives listed below.

NOTE - A. Identify two persons in the following order of preference:

- | | |
|----------------------------------|---------------------------|
| 1. Widow | 5. Mother |
| 2. Male children over 21 years | 6. Brothers over 21 years |
| 3. Female children over 21 years | 7. Sisters over 21 years |
| 4. Father | 8. Other relatives |

B. If parent is listed, state whether natural, step-, adoptive or foster parent.

C. If no information is available concerning any surviving relatives, state "None".

Relationship :	Name :	Address :
WIDOW :	Zula A. Herring :	823 Snow Hill Street, Goldsboro, North Carolina
(If none, state "None" :	Has she remarried? <u>yes</u> :	If so, is proof of remarriage on file? <u>Yes</u>
Daughter :	Jo Ann Faircloth :	823 Snow Hill Street, Goldsboro, North Carolina
Daughter :	Betty Lou Faircloth :	823 Snow Hill Street, Goldsboro, North Carolina

M. B. Uppercue
DIRECTOR,
CLAIMS SERVICE
(Address) Branch Office No. 4, 900 N. Lombardy, St.
Richmond 20, Virginia

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

13 MAR 1947

In Reply Refer To: QMGMR 293

Faircloth, Stephen P.

SN 34 857 862

Date of Birth **30 November 1918**

SUBJECT: Request for information re next of kin of above named deceased serviceman of World War II.

TO : Director, Dependents and Beneficiaries Claims Service
Veterans Administration
Washington 25, D. C.

For use in determination of final disposition of remains of the above identified deceased serviceman, it is requested that appropriate information be entered on the lower portion of this letter and that one copy of the completed letter be returned to this office.

1 Incl.
Envelope

Martin G. Riley

MARTIN G. RILEY
Major, QMC
Memorial Division

Date _____
Veteran's Name _____

XC- _____

Information in the VA case file indicates that the deceased serviceman was survived by the relatives listed below.

NOTE - A. Identify two persons in the following order of preference:

- | | |
|----------------------------------|---------------------------|
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| 2. Male children over 21 years | 6. Brothers over 21 years |
| 3. Female children over 21 years | 7. Sisters over 21 years |
| 4. Father | 8. Other relatives |

B. If parent is listed, state whether natural, step-, adoptive or foster parent.

C. If no information is available concerning any surviving relatives, state "None".

Relationship	Name	Address
WIDOW	:	:
(If none, state "None")	:	:
Has she remarried?	_____	If so, is proof of marriage on file? _____
:	:	:
:	:	:
:	:	:

MAR 13 2 39 PM '47
 MEMORIAL DIVISION
 RECORDS BRANCH

MAR 13 3 32 PM '47
 OQMG M&R BR

DIRECTOR,
CLAIMS SERVICE
(Address) _____

QMGMM 293 Faireloth, Stephen P. 1st Ind LWS/jg/205/304
34 857 662 CA

*att to
3-17*

Army Finance Center, Office of the Chief of Finance, St. Louis 20, Mo.

JUL 2 1947

TO: The Quartermaster General, Washington 25, D. C.

Army Finance Center records indicate the following recipients of arrears of pay and death gratuity pay for the above decedent:

ARREARS OF PAY

DEATH GRATUITY PAY

Zula Anderson Faireloth, widow
823 Snowhill Street
Goldstoro, North Carolina

Same.

FOR THE COMMANDING OFFICER, AFC:

S. H. Smith
S. H. SMITH
Lt Col, FD
Finance Officer

*File
copy
N.A.
M*

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

17 MAR 1947

In Reply Refer To
OQMG#R 293
Fairclott, Stephen P.
ASN 34 57 662

293

SUBJECT: Address of Legal Next of Kin of Deceased Veteran

TO: Army Finance Center, OCF
Correspondence Section
Special Settlement Accounts Division
Pay Settlements Branch
Building 205
St. Louis 20, Missouri

1. Records on file in this office indicate that Mrs. Lulu A. Fairclott, wife, born [redacted] [redacted], [redacted], Mo., is the legal next of kin of:

NAME: Fairclott, Stephen P.
RANK: Private
SERIAL NO: 34 57 662

2. It is requested that this office be furnished the latest address and relationship of the legal next of kin, and any other relatives of the deceased veteran mentioned above.

3. In case the next of kin is not as indicated above, request copies of such documentary evidence as may have been submitted to your office to establish this relationship.

FOR THE QUARTERMASTER GENERAL:

Mar 17 3 47 PM '47
MAIL & RECORDS BRANCH

J. B. COLSON
Colonel, OMC
Memorial Division

Mar 17 2 05 PM '47
MEMORIAL DIVISION
RECORDS BRANCH

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

In Reply Refer To
QMGR 314.6

**Graves Registration
(European, U. S. M.S.O.)**

17 FEB 1947

SUBJECT: Burial Records

TO : **Commanding Officer
American Graves Registration Command
European Theater Area
APO 887, c/o Postmaster
New York, New York**

1. Request the burial reports and grave markers for the following decedent be changed to read as follows:

Cemetery: **U. S. Military Cemetery, Andilly, France**

<u>NAME</u>	<u>RANK/ GRADE</u>	<u>SERIAL NO.</u>	<u>DATE OF DEATH</u>	<u>PLOT</u>	<u>ROW</u>	<u>GRAVE</u>	<u>ORGAN.</u>
Buring, Paul A.	Tec 5	38 504 757		M	3	73	
Faircloth, Stephen P.	Pvt	34 667 662	20 Sep 44	F	6	145	Co "C" 38th Armd Inf Regt 7th Armd Div
Feebeck, Robert A.	Sgt	35 453 004		K	1	17	Co "G" 317th Inf Regt 80th Inf Div

2. The records of this office have been reverified with the records of The Adjutant General, War Department, and have been found to be correct as indicated above.

FOR THE QUARTERMASTER GENERAL:

Martin G. Riley
MARTIN G. RILEY
Major, QMC
Assistant

erb

VI

SPCYG 293
Faircloth, Stephen P.
34 857 662

Address Reply to THE
QUARTERMASTER GENERAL.
Attn: Memorial Division.

4 January 1946

Mrs. William O. Herring,
Route #4, Goldsboro, N. C.
Box 29.

Dear Mrs. Herring:

Your letter concerning your husband, the late Private Stephen P. Faircloth, has been received in this office.

The official Report of Burial discloses that the remains of your husband were interred in Plot F, Row 6, Grave 145, in the United States Military Cemetery, No. 1, Andilly, France, located approximately five miles north of Toul and fourteen miles south and east of St. Mihiel, both in France.

The War Department anticipates that, in the near future, authority will be granted to return at Government expense, the remains of those who died overseas to a final resting place as selected by the next of kin. Upon receipt of such authority, the War Department, through this office, will furnish full information to the proper next of kin and solicit their desires. It should be realized that this 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.

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

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

JAMES L. PRENN,
Major, Q. M. C.,
Assistant.

RECEIVED
100

9th. MAR 1946

QUARTERMASTER GENERAL

bt

Heldob...

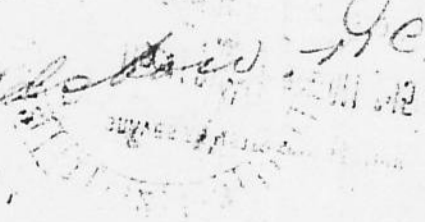
Dear Sir
In writing in regards of \$8
my husband

154-34857662

But. Stephen P. Finckh
Co C. 38th Am. Inf. 2nd. 093
Apr. 357

I'm interested in finding out
when I can get his body
back. I understand I can get
it after the war was over but
I don't know where it will
be seen or where I can go
to see it. Please give me
some information regarding
this matter. He was killed
in France the 2nd
Sept. 1918.

Sincerely,
Mrs. William C. Gering
1414 Gallop Ave.
Box 27.



REPORT OF BURIAL

TM 10-630 AND AR 30-1815

22 Sept. 1944

243

Faircloth Stephen P POTM

Last Name: Unk First: CO "G" Initial: 38 Rank: ~~Sgt~~ Serial No.: 32857662

Unit: Lorry, France Organization: 38 Armd Inf Bn 7th INF DIV

Place of Death: Lorry, France Date of Death: 20 Sept. 1944 Cause of Death: KIA

Time and Date of Burial: 21 Sept. 1944 1700 U.S. Mil. Cem. No. 1 Name of Cemetery: F Name or Coordinates of Location: Andilly, France

Grave Number: 145 Row Number: 6 Plot Number: F Type of Marker: Cross

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

If No Identification Tags
How were remains identified?

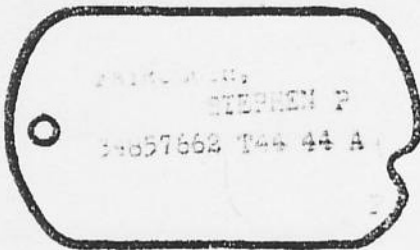
What means of identification were buried with the body?

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

Who is buried on:

Deceased's Right:	Name	Serial No.	Rank	Organization	Grave No.
	Roy F. Davis	32273576	E/5		144
Deceased's Left:	Name	Serial No.	Rank	Organization	Grave No.
	Charles T. Irizarry	32246101	Pfc.		146

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: Unk Name

Address

Religion: Protestant

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

None

Signature of Officer or other person reporting burial

WILLIAM C. NUGENT
1st Lt. GMC

Verified by G.R.S. Officer

JAN 30 1945

IF DECEASED UNIDENTIFIED

Take Fingerprints of Both Hands. If unable to obtain a complete set of Fingerprints, Take Those You Can, and fill in the following:

Height:	Laundry Marks:
Weight:	Number of Rifle:
Color of Eyes:	Wear Glasses?
Color of Hair:	Is Tooth Chart Attached?
Race:	

(If possible, have medical personnel take a tooth chart, if no medical personnel present, fill in a tooth chart below.) In space below, locate, and describe any scars, birthmarks, moles, deformities, etc.

Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc.:

Thumb			
1			
2			
3			
4			

Left Hand

Thumb			
1			
2			
3			
4			

Right Hand

TOOTH CHART

Deceased's Right				Deceased's Left											
8	7	6	5	4	3	2	1	8	7	6	5	4	3	2	1
8	7	6	5	4	3	2	1	8	7	6	5	4	3	2	1
Upper								Lower							

Indicate: missing natural teeth by X; crowns by O; fillings by □; Bridges by ⊙; linking anchor teeth; replacements by artificial teeth X

Characteristics:

Other Data:

If this is an Isolated Burial, make a Sketch of the Location, oriented with Permanent Landmarks. If more space needed attach separate sheet. Indicate North.

262148
mf

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

REPORT OF DEATH

DATE 25 Oct 1944
veh

FULL NAME Faircloth, Stephen P.		ARMY SERIAL NUMBER 34,857,662		GRADE Pvt									
HOME ADDRESS Goldsboro, North Carolina		ARM OR SERVICE Infantry		DATE OF BIRTH 30 Nov 1918									
PLACE OF DEATH European Area		CAUSE OF DEATH Killed in action		DATE OF DEATH 20 Sept 1944									
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 28 Jan 1944		LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS									
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Zula A. Faircloth (wife) 825 Snow Hill St., Goldsboro, N. C.													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Zola Anderson Faircloth (wife), Betty Lou Faircloth (daughter), Jo Ann Faircloth (daughter) same as above Elizabeth Marsh Faircloth (mother) Rt. #4, Goldsboro, N. C.													
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
												X	

ADDITIONAL DATA AND/OR STATEMENT

The individual named in this report is shown by the records of the War Department to have been absent in a missing action status on 19 Sept 44 and subsequently reported killed in action on 20 Sept 44, such absence was terminated on 20 Oct 44, on which date evidence of death was received by the Secretary of War from a commander in the European Area.

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

BATTLE
 NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR
James W. Pinkhart
John T. Winn
ADJUTANT GENERAL

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

262148 1085

-BATTLE CASUALTY REPORT

NAME FAIRCLOTH STEPHEN P		SERIAL NUMBER 34857662	GRADE PVT	ARM OR SERVICE INF	REPORTING THEATRE ETO
PLACE OF CASUALTY FRANCE 9	DATE OF CASUALTY			FLYING OR JUMPING STAT	TYPE OF CASUALTY
	DAY 19	MONTH SEP	YEAR 44		MIA
					SHIPMENT NUMBER 214

NAME AND ADDRESS OF EMERGENCY ADDRESSEE

THE INDIVIDUAL NAMED ABOVE DESIGNATED THE FOLLOWING PERSON AS THE ONE TO BE NOTIFIED IN CASE OF EMERGENCY, AND THE OFFICIAL TELEGRAPHIC AND LETTER NOTIFICATIONS WILL BE SENT TO THIS PERSON. THE RELATIONSHIP, IF ANY, IS SHOWN BELOW. IT SHOULD BE NOTED THAT THIS PERSON IS NOT NECESSARILY THE NEXT-OF-KIN OR RELATIVE DESIGNATED TO BE PAID SIX MONTHS' PAY GRATUITY IN CASE OF DEATH

MR.-MRS.-MISS—FIRST NAME—MIDDLE INITIAL—LAST NAME MRS. XXX ZULA A. FAIRCLOTH	RELATIONSHIP WIFE	DATE NOTIFIED 13 Oct 44 lmb
NO. AND NAME OF STREET—CITY—STATE 823 SNOW HILL STREET GOLDSBORO, NORTH CAROLINA		

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" 28 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.

262148

JRM:VJ:bn
April 14, 1945

Mrs. Zula A. Faircloth
823 Snow Hill Street
Goldsboro, North Carolina

Dear Mrs. Faircloth:

The Army Effects Bureau has received from overseas some personal effects of your husband, Private Stephen P. Faircloth.

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 laws of the state of the soldier's legal residence.

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

Yours very truly,

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

SUMMARY COURT-MARTIAL
ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT
601 Hardisty Avenue
Kansas City 1, Missouri

Case No. 262148
Date 14 April 1945

SUBJECT: Report of transaction in disposing of the effects of

Stephen P. Faircloth, 34857662 late a
(Name of deceased) (Army Serial Number)
Private, Infantry who died
(Grade) (Organization, Army or Service)
on the 20 day of September, 1944, at European Area.

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

1. Complying with A.W. 112, a Summary Court-Martial, convened at Kansas City, Mo. pursuant to S.O., 225 Hq., KQDM 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 12 April 1945, pursuant to Special Orders 228, Headquarters KQDM Depot, dated 25 September 1943, the application or affidavit of _____

Mrs. Zula A. Faircloth for the effects of the above-named deceased soldier, or person subject to military law, now in the possession of the United States, with other relevant evidence, was duly considered;

Whereupon, this Summary Court-Martial finds that, under the provisions of A.W. 112, Mrs. Zula A. Faircloth of _____
(Name of person found entitled)

823 Snow Hill Street, Goldboro State of
(Number, Street or Avenue) (City, Town or Village)
North Carolina, is the widow of the
(Relationship or Capacity)

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

(Signature of Summary Court Officer)

JOHN R. MURPHY, Colonel, G.M.C.
(Name, Rank, Organization)
SUMMARY COURT-MARTIAL

ARMY SERVICES FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mrs. Zula A. Faircloth

SHIP TO:

823 Snow Hill Street

Pvt. Stephen P. Faircloth

Coldsboro, North Carolina

Effects of:
Name

34857662

ASN

262148 D

Case No.

Wt.

DATE 14 April 1945
JRM:VJ:bh

Mildred Blavars
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.

REMARKS:

1 pkg

Franked J R A A A A A
Est. Exp. Chgs.
Est. Frt. Chgs.
No. of packages 1

APR 18 1945

Shipping Clerk

SHEET <u>1</u> OF <u>1</u> SHEETS	ARMY EFFECTS BUREAU INVENTORY		DECEASED <input checked="" type="checkbox"/>
BOX NUMBER <u>7</u>	ORIGINAL NUMBER OF PACKAGES <u>1</u>		MISSING <input type="checkbox"/>
TALLY NUMBER <u>6999</u>	INVENTORY DATE <u>24 Mar 45</u>	CASE NUMBER <u>262148</u>	P.O.W. <input type="checkbox"/>
EFFECTS OF <u>Stephen P Faircloth</u>	RANK <u>Pvt</u>		ABANDONED <input type="checkbox"/>
S.S.N. <u>34257662</u>	ORGANIZATION <u>unk.</u>		

PACKAGE DESCRIPTION

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

REMARKS: wife
Lola Faircloth
823 Snow Hill St
Soldburg N.Y.
 damaged

ATTACHMENTS: FORM #51 FORM #100
Inventory
1 GR label

RECEIVED

C.A.T. <u>Lola Faircloth</u> <u>823 Snow Hill St</u> <u>Soldburg N.Y.</u>	WEIGHT	GI REMOVED
WAREHOUSE SPACE <u>877</u>	DATE SHIPPED <u>APR</u>	SHORTAGE ON REVERSE
INVENTORIED BY <u>[Signature]</u>	STORIED BY <u>[Signature]</u>	IDENT. TAGS REMOVED
		DIARY REMOVED
		LOCKED STORAGE
		LAUNDRY REMOVED

NAME

FAIRCLOTH, STEPHEN P PVT

BAY	PALLET	BOX	TALLY
		7	6999
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
GRB			

Ref. QM Form 48

(RESTRICTED)

INVENTORY OF PERSONAL EFFECTS

US Mil. Cem. No.1 Andilly, France
27 September 1944 (Date)

SUBJECT: Inventory of Personal Effects of

Faircloth, Stephen P. Pvt. 54857662
(Last Name) (First Name) (I) (Rank) (ASN)

TC: Effects Quartermaster, Communication Zone, 180
US Army

The above named individual of Unk
(Unit)

Unk was reported KIA
(Organization) (Status-Killed, MIA)
about 12 September 1944
(Hospitalized, etc.) (Date)

Designated Beneficiary if information readily accessible _____

INVENTORY OF EFFECTS

Class 1

- 17 Photos ✓
- 1 Billfold ✓
- 1 Religious Book ✓
- 1 Wrist watch ✓
- 1 Fountain pen ✓
- 1 Soc. Sec. Card ✓
- 8 Souvenir coins ✓

Money in the amount of NO CURRENCY has been turned into _____
(Name of)

Form 100 33 Enclosed.
Finance officer (and symbol number)

Name and addresses of any banks in which accounts may be carried:

I certify that the above items constitute all of the effects, secured by me, of the above named individual and that they were forwarded to the Effects Depot _____ on _____ 1944
(Rail, Truck, Etc.) (Date)

Name W. C. Nugent
WILLIAM C. NOGENT
Rank & ASN 1st Lt.

Any additional pertinent information: Organization 3043 QM GR Co.

Serial No. 105741 Name William T. T. T.
Grade _____ Rank _____
Organization _____
Address _____
Nearest Relative _____
Address St. Gall...
Killed in Action _____ Died of Disease _____
Date _____ Hospital _____
Battle Area _____ Information _____
Place of Burial _____
Point of Coordination _____
Description of Body _____
Members Missing _____
Signed 6999