

293 NEGRELLI, JOSEPH J.

PVT. (36-314-167) EUROPEAN AREA (ILL.) INF. 45 mt

Declassified in accordance with D.O. 13526

REQ711301229 WNR-01-09-021-1-002-03-003
 Transfer#: W092-70A0001 Box:1234 CC:00
 Asset#: AAC1-23782452 Whole Container: N
 Created: 11/30/2012
 C/F: NEGRELLI, JOSEPH J. 3 OF 5 FOIA 13-0694
 General Reference Temporary Loan of Records
 Standard Standard (billed) N/A
 To: AARON ALTON
 1600 SPEARHEAD DIVISION AVE, FOIA/PA OFFICE BLDG 3 FL1 RM 37
 DEPARTMENT 107
 FT. KNOX, KY, 40122
 P: (502) 613-4202 F: (703) 325-1844
 N16723 N26771
 N36824
 N46837*

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

Pvt. Joseph J. Negrelli, 36 314 167
Plot B, Row 9, Grave 223,
United States Military Cemetery
Limay, France

18 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

I, ^{UEK} Mrs + Mr. Sam Negrelli

(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 Mary's Cemetery - EVERGREEN-Park ILL.
(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 Proc 8 Mar 48 BEM,
coded 3/2/48 Mitchell

FEB 12

X eq

JK

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 Neirelli	FIRST NAME SAMUEL MARY	MIDDLE INITIAL —
NUMBER AND STREET 943 W 51st ST.	CITY OR TOWN Chicago	COUNTY OR PROVINCE
EXPRESS OFFICE (Nearest railroad passenger station) Chicago, Ill	TELEGRAPH ADDRESS Chicago Ill	STATE OR TERRITORY OF U. S. A., OR COUNTRY Ill.
		TELEPHONE No. Harrison 9700

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 HENNY-BROTHERS			
NUMBER AND STREET 5438-50 HALSTED	CITY OR TOWN Chicago	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY Ill
EXPRESS OFFICE (Nearest railroad passenger station) Chicago Ill	TELEGRAPH ADDRESS Chicago Ill		TELEPHONE No. Harrison 9700

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 MRS MARY A. NEGRELLI	FIRST NAME MARY	MIDDLE INITIAL A	RELATIONSHIP TO DECEASED Mother
NUMBER AND STREET 943 W 51st	CITY OR TOWN Chicago	COUNTY OR PROVINCE —	STATE OR TERRITORY OF U. S. A., OR COUNTRY Ill.

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.

Samuel Neirelli (SIGNATURE OF NEXT OF KIN) 943 W 51st ST (STREET AND NUMBER)
SAMUEL NEGRELLI (NAME PRINTED OR TYPED) Chicago, Ill. (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 9 day of Dec,
1947 at city (or town) of Chicago, county of Cook, and State (or Territory or District) of Ill

John J. Tenney (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 _____ (PLEASE INSERT RELATIONSHIP) _____, AS THE NEXT OF KIN OF THE DECEASED 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:

_____ (SIGNATURE OF NEXT OF KIN)	_____ (DATE)
_____ (NAME PRINTED OR TYPED)	_____ (STREET AND NUMBER)
	_____ (CITY AND STATE)

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

_____ (SIGNATURE)	_____ (DATE)
_____ (NAME PRINTED OR TYPED)	_____ (STREET AND NUMBER)
	_____ (CITY AND STATE)

ADDITIONAL REMARKS AND INSTRUCTIONS

All remarks and information entered here will be considered as part of the Notarial Attestation.



RECORDS BRANCH
 OCT 13 5 59 PM '48
 MEMORIAL DIVISION

NAME **NEORELLI, JOSEPH J. PVT 4167**

BAY	PALLET	BOX	TALLY
	16	31	7629
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
CTN			

Dear Sir,

My folks got to see
 a sample of the marker
 we were to have & they
 don't seem to want that
 small of a marker.
 They prefer to have
 one made on their
 own, and a larger one.
 However if it's possible
 they would prefer
 the money so they can
 put it toward their own
 desired marker.

Sincerely
 Rose Negrelli
 (daughter)

NFT File
 Mr. Simon
 Oct 13, 1945
 Combr

Rose Negrelli, Joseph

[Faint, mostly illegible handwritten text in cursive script, covering the majority of the page.]

[A circular postmark stamp is visible in the lower-left quadrant of the page, containing some illegible text and numbers.]

CAUTION THESE RECORDS WILL BE USED FOR OFFICIAL PURPOSES ONLY DO NOT REMOVE PAPERS NOR REVEAL CONTENTS TO PERSON CONCERNED RETURN THEM PROMPTLY

TRANSFER SLIP

No. A5 730887
DATE OF REQUEST
28 Feb 52 dm

RECORDS DESIRED	201 FILE	ENL REC	EFF REP	MED REC	LETTER	IND	MEMO	RADIO	OTHER (Specify)	LAST DATE
FILE OR SERIAL NUMBER AND SUBJECT	293 Negrelli, Joseph J. <i>S</i>									REQUESTED PAPERS NOT IN FILE
TO	NAME AND EXTENSION OF PERSON REQUESTING FILE				DIVISION, BRANCH, SECTION, BUILDING AND ROOM NUMBER					
RETURN TO	McLaughlin - Gallagher				36314167 FA ODMG					
INSTRUCTIONS	Departmental Records Branch, AGO 218 North Lee Street Alexandria, Virginia									

No A5 730887

TRANSFER COUPON

TO	NOTE THAT FILE OF
HAS BEEN TRANSFERRED TO: (Name)	
DIVISION, BRANCH, SECTION, BUILDING AND ROOM NO.	
DATE	SIGNATURE

Departmental Records Branch, AGO
218 North Lee Street
Alexandria, Virginia

No. A5 730887

TRANSFER COUPON

TO:	NOTE THAT FILE OF:
HAS BEEN TRANSFERRED TO: (Name)	293 Negrelli Joseph J. Gallagher
DIVISION, BRANCH, SECTION, BUILDING AND ROOM NO.	FA
DATE	SIGNATURE
2/28/52	smc

Departmental Records Branch, AGO
218 North Lee Street
Alexandria, Virginia

WD AGO FORM 1 MAY 1946 543 Replaces WD AGO Form 06-33 which may be used until exhausted.

ORIGINAL

W II APPLICATION FOR HEADSTONE OR MARKER
(Please make out and return in duplicate)

CHECK TYPE REQUIRED
(See Instructions attached)

UPRIGHT MARBLE HEADSTONE

FLAT MARBLE MARKER

FLAT GRANITE MARKER

BRONZE MARKER (NOTE RESTRICTIONS)

EMBLEM (Check one)

CHRISTIAN

HEBREW

NONE

ENLISTMENT DATE
January 1942

SERIAL No.
36314167

PENSION No.

DISCHARGE DATE
Killed in France

STATE
Ill

RANK
PRIVATE

COMPANY
23rd Armored Inf.

U. S. REGIMENT, STATE ORGANIZATION, AND DIVISION
7th Army

U. S. ARMY

NAME (Last, First, Middle Initial)
NEGRELLI, JOSEPH J.

DATE OF BIRTH (Month, Day, Year)
September 23, 1917

DATE OF DEATH (Month, Day, Year)
Sept. 11, 1944

LOCATION (City and State)
Evergreen Park, Illinois

NEAREST FREIGHT STATION (City and State)
Chicago, Illinois

POST OFFICE ADDRESS OF CONSIGNEE
9127 Humboldt Ave
Evergreen Park, Ill.

NAME OF CEMETERY
St. Mary Cemetery EC

SHIP TO (I CERTIFY THE APPLICANT FOR THIS STONE HAS MADE ARRANGEMENTS WITH ME TO TRANSPORT THE STONE FROM THE FREIGHT STATION TO THE CEMETERY)

DO NOT WRITE HERE

FOR VERIFICATION
SEP 7 1948

ORDERED

B/L

SHIPPED

I certify this application is submitted for a stone for the unmarked grave of a veteran.
I hereby agree to assume all responsibility for the removal of the stone promptly upon arrival at destination, and properly place it at the decedent's grave at my expense.

APPLICANT'S SIGNATURE
Joseph Negrelli

DATE OF APPLICATION
Aug. 21, 1948

ADDRESS (Street, City, State)
943 West 51 Street, Chicago 9 Ill.

QMG FORM 623
REV 15 APR 47

IMPORTANT—Complete Reverse Side

CEM. BR

16-11453-0

229 Dea Rpt Shows D 16 23 Sept 16

I HEREBY CERTIFY that the type headstone or marker requested by the applicant will be permitted at the grave.

(Be sure you have noted what type is indicated by applicant on form)

Wm. C. Schaefer
(Signature of superintendent, sexton, or caretaker)

Date

Aug. 28-48

16-11453-4

Return to: OFFICE OF THE QUARTERMASTER GENERAL,
MEMORIAL DIVISION,
WASHINGTON 25, D. C.

327-4-EEJ

9 SEP 1948 LIST

DUPLICATE

FLAT GRANITE

CHECK TYPE REQUIRED (See Instructions attached) <input type="checkbox"/> UPRIGHT MARBLE HEADSTONE <input type="checkbox"/> FLAT MARBLE MARKER <input checked="" type="checkbox"/> FLAT GRANITE MARKER <input type="checkbox"/> BRONZE MARKER (NOTE RESTRICTIONS)		WW II ENLISTMENT DATE January 1942 DISCHARGE DATE Killed in France		APPLICATION FOR HEADSTONE OR MARKER (Please make out and return in duplicate) SERIAL No. 36314167 PENSION No.		EMBLEM (Check one) <input checked="" type="checkbox"/> CHRISTIAN <input type="checkbox"/> HEBREW <input type="checkbox"/> NONE	
NAME (Last, First, Middle Initial) NEGRELLI, JOSEPH J		STATE PRIVATE		RANK PRIVATE		COMPANY 23rd Armored Inf.	
U. S. REGIMENT, STATE ORGANIZATION, AND DIVISION 7th Army				U. S. ARMY			
DATE OF BIRTH (Month, Day, Year) September 23, 1917		DATE OF DEATH (Month, Day, Year) Sept. 11, 1944		LOCATION (City and State) Evergreen Park, Illinois			
NAME OF CEMETERY St. Mary Cemetery EC		SHIP TO (I CERTIFY THE APPLICANT FOR THIS STONE HAS MADE ARRANGEMENTS WITH ME TO TRANSPORT THE STONE FROM THE FREIGHT STATION TO THE CEMETERY) <i>Supt</i> (SIGNATURE OF CONSIGNEE)		NEAREST FREIGHT STATION (City and State) Chicago Evergreen Park, Ill.			
DO NOT WRITE HERE		FOR VERIFICATION SEP 7 1948		I certify this application is submitted for a stone for the unmarked grave of a veteran. I hereby agree to assume all responsibility for the removal of the stone promptly upon arrival at destination, and properly place it at the decedent's grave at my expense. <i>Joseph J. Negrelli</i> APPLICANT'S SIGNATURE			
ORDERED		B/L		DATE OF APPLICATION Aug. 21, 1948			
SHIPPED		ADDRESS (Street, City, State) 943 West 51 Street Chicago, Illinois					

OQMG FORM 623
REV 15 APR 47

IMPORTANT—Complete Reverse Side

16-11453-6 GPO

I HEREBY CERTIFY that the type headstone or marker requested by the applicant will be permitted at the grave



(Be sure you have noted what type is indicated by applicant on form)

John A. Schaefer

(Signature of superintendent, sexton or caretaker)

16-11453-4

Date Aug. 28-48

Return to: OFFICE OF THE QUARTERMASTER GENERAL,
MEMORIAL DIVISION,
WASHINGTON 25, D. C.

ORIGINAL ORDER

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

FLAT GRANITE MARKER

Below you will find a copy of the inscription taken from the OFFICIAL RECORDS as it will appear on the flat granite marker you ordered. CHECK IT CAREFULLY before the marker is manufactured. Check the INSCRIPTION, NAME AND LOCATION OF CEMETERY. Check with CEMETERY OFFICIALS and make sure a government flat granite marker will be allowed at grave. Check NAME AND ADDRESS OF THE PERSON to whom marker is to be shipped. After you have CORRECTED ANY ERRORS, sign and return promptly in the inclosed envelope which requires no postage.

UNTIL YOU RETURN THIS SLIP THE FLAT GRANITE MARKER CANNOT BE ORDERED. DO NOT DELAY-SIGN & RETURN TODAY.

INSCRIPTION: LATIN CROSS

JOSEPH J NEGRELLI / ILLINOIS / PVT 23 ARMD INF BN 7 ARMD
DIV / WORLD WAR II / SEPT 23 1917 SEPT 11 1944

SHIP TO: WILLIAM C SCHAEFER, SUPT
ST. MARY CEMETERY
FOR: 91ST & TRUMBULL AVE
EVERGREEN PARK
ILLINOIS

R. R. STATION:
CHICAGO
ILLINOIS
R. R. STATION:

4th OCT 1948

APPLICANT: SAMUEL NEGRELLI
943 WEST 51ST STREET
CHICAGO 9
ILLINOIS

CEMETERY:
ST. MARY
EVERGREEN PARK
ILLINOIS

ns
RAR

OGMG FORM
Rev. 1 NOV. 46 312

APPROVAL AND ACCEPTANCE

SIGNATURE

CONTRACTOR'S COPY

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

FLAT GRANITE MARKER

Herewith order for marker to be inscribed as follows:

INSCRIPTION: *LATIN CROSS*

JOSEPH J NEGRELLI / ILLINOIS / PVT 23 ARMD INF BN 7 ARMD
DIV / WORLD WAR II / SEPT 23 1917 SEPT 11 1944

SHIP TO:

WILLIAM C SCHAEFER, SUPT
ST. MARY CEMETERY
91ST & TRUMBULL AVE
EVERGREEN PARK
ILLINOIS

R. R. STATION:

CHICAGO
ILLINOIS

FOR:

R. R. STATION:

4 OCT 1948

APPLICANT:

SAMUEL NEGRELLI
943 WEST 51ST STREET
CHICAGO 9
ILLINOIS

CEMETERY:

ST. MARY
EVERGREEN PARK
ILLINOIS

RAR

OQMG FORM 312
Rev. 1 NOV. 45

CONTRACTOR'S COPY

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

FLAT GRANITE MARKER

Herewith order for marker to be inscribed as follows:

INSCRIPTION: *LATIN CROSS*

JOSEPH J NEGRELLI / ILLINOIS / PVT 23 ARMD INF BN 7 ARMD
DIV / WORLD WAR II / SEPT 23 1917 SEPT 11 1944

SHIP TO:

WILLIAM C SCHAEFER, SUPT
ST. MARY CEMETERY
91ST & TRUMBULL AVE
EVERGREEN PARK
ILLINOIS

R. R. STATION:

CHICAGO
ILLINOIS

FOR:

R. R. STATION:

APPLICANT:

SAMUEL NEGRELLI
943 WEST 51ST STREET
CHICAGO 9
ILLINOIS

CEMETERY:

ST. MARY
EVERGREEN PARK
ILLINOIS

QGMG FORM
Rev. 1 NOV. 45 312

RAR

INSPECTOR'S COPY

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

FLAT GRANITE MARKER

Herewith copy of order placed with Contractor for marker to be inscribed as follows:

INSCRIPTION: LATIN CROSS

JOSEPH J NEGRELLI / ILLINOIS / PVT 23 ARMD INF BN 7 ARMD
DIV / WORLD WAR II / SEPT 23 1917 SEPT 11 1944

SHIP TO:

WILLIAM C SCHAEFER, SUPT
ST. MARY CEMETERY
91ST & TRUMBULL AVE
EVERGREEN PARK
ILLINOIS

R. R. STATION:

CHICAGO
ILLINOIS

FOR:

R. R. STATION:

APPLICANT:

SAMUEL NEGRELLI
943 WEST 51ST STREET
CHICAGO 9
ILLINOIS

CEMETERY:

ST. MARY
EVERGREEN PARK
ILLINOIS

RAR

INSPECTOR'S COPY

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

FLAT GRANITE MARKER

Herewith copy of order placed with Contractor for marker to be inscribed as follows:

INSCRIPTION: LATIN CROSS

JOSEPH J NEGRELLI / ILLINOIS / PVT 23 ARMD INF BN 7 ARMD
DIV / WORLD WAR II / SEPT 23 1917 SEPT 11 1944

SHIP TO:

R. R. STATION:

WILLIAM C SCHAEFER, SUPT
ST. MARY CEMETERY
91ST & TRUMBULL AVE
EVERGREEN PARK
ILLINOIS

CHICAGO
ILLINOIS

FOR:

R. R. STATION:

APPLICANT:

CEMETERY:

SAMUEL NEGRELLI
943 WEST 51ST STREET
CHICAGO 9
ILLINOIS

ST. MARY
EVERGREEN PARK
ILLINOIS

OQMG FORM
Rev. 1 NOV. 45 312

RAR

**COPY OF INSCRIPTION
TO BE PLACED ON MARKER**

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

FLAT GRANITE MARKER

INSCRIPTION: *LATIN CROSS*

**JOSEPH J NEGRELLI / ILLINOIS / PVT 23 ARMD INF BN 7 ARMD
DIV / WORLD WAR II / SEPT 23 1917 SEPT 11 1944**

SHIP TO:

R. R. STATION:

**WILLIAM C SCHAEFER, SUPT
ST. MARY CEMETERY
91ST & TRUMBULL AVE
EVERGREEN PARK
ILLINOIS**

**CHICAGO
ILLINOIS**

FOR:

R. R. STATION:

APPLICANT:

**SAMUEL NEGRELLI
943 WEST 51ST STREET
CHICAGO 9
ILLINOIS**

CEMETERY:

**ST. MARY
EVERGREEN PARK
ILLINOIS**

RAR

**COPY OF INSCRIPTION
TO BE PLACED ON MARKER**

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

FLAT GRANITE MARKER

Below you will find a copy of the inscription taken from the OFFICIAL RECORDS as it will appear on the flat granite marker you ordered. CHECK IT CAREFULLY before the marker is manufactured. Check the INSCRIPTION, NAME AND LOCATION OF CEMETERY. Check with CEMETERY OFFICIALS and make sure a government flat granite marker will be allowed at grave. Check NAME AND ADDRESS OF THE PERSON to whom marker is to be shipped. After you have CORRECTED ANY ERRORS, sign and return promptly in the inclosed envelope which requires no postage.

UNTIL YOU RETURN THIS SLIP THE FLAT GRANITE MARKER CANNOT BE ORDERED. DO NOT DELAY-SIGN & RETURN TODAY.

INSCRIPTION: LATIN CROSS

JOSEPH J NEGRELLI / ILLINOIS / PVT 23 ARMD INF BN 7 ARMD
DIV / WORLD WAR II / SEPT 23 1917 SEPT 11 1944

SHIP TO:

R. R. STATION:

WILLIAM C SCHAEFER, SUPT
ST. MARY CEMETERY
91ST & TRUMBULL AVE
EVERGREEN PARK
ILLINOIS

CHICAGO
ILLINOIS

FOR:

R. R. STATION:

APPLICANT:

CEMETERY:

SAMUEL NEGRELLI
943 WEST 51ST STREET
CHICAGO 9
ILLINOIS

ST. MARY
EVERGREEN PARK
ILLINOIS

OQMG FORM
Rev. 1 NOV. 45 312

APPROVAL AND ACCEPTANCE

SIGNATURE

RAR

FLAT GRANITEWORKER

OFFICE OF THE DISTRICT ATTORNEY
WASHINGTON, D.C.

TO BE PLACED ON MARKER
COPY OF INSCRIPTION

THIS IS TO CERTIFY THAT THE ABOVE DESCRIBED MONUMENT OR MARKER WAS FOUND BY THE DISTRICT ATTORNEY OF THE DISTRICT OF COLUMBIA ON THE DATE AND AT THE PLACE HEREIN SPECIFIED AND THAT THE SAME IS THE PROPERTY OF THE DISTRICT OF COLUMBIA AND IS TO BE KEPT AS A PUBLIC MONUMENT AND MARKER FOR THE DISTRICT OF COLUMBIA.

JOSEPH J. MCGRELL / ILLINOIS / 1911
DIVISION OF WAR / DEPT. OF WAR / 1911

CHICAGO
ILLINOIS

WILLIAM C. SCHAEFER, SGT.
ST. MARY CEMETERY
21ST & TRUMBULL AVE
EVERGREEN PARK
ILLINOIS

ST. MARY
EVERGREEN PARK
ILLINOIS

JOSEPH J. MCGRELL
21ST & TRUMBULL AVE
CHICAGO
ILLINOIS

4059

RECORDED AND INDEXED
MAY 1 1911

H 2

153117
~~Joseph J. Negrelli~~

QMGXO 293
Negrelli, Joseph J. 36,314,167

29 November 1951

Mrs. Maryanne Negrelli
943 West 51st Street
Chicago 9, Illinois

Dear Mrs. Negrelli:

Receipt is acknowledged of your letter dated
23 November 1951.

Your letter has been forwarded to The Adjutant
General, U. S. Army for reply. It is requested that any
further necessary correspondence be addressed directly to
The Adjutant General, U. S. Army, Washington 25, D. C.

Very truly yours,

MLJones/C&E/52035

C. W. COLISON
Supply Division

CC
AFH

Nov 29 4 11 PM '51
MAIL & RECORDS BRANCH

check for spirit
table
C. W. Colison

H B

QMCO 293
Negrelli, Joseph J.

1st Ind

Dept of the Army, OCMG, Washington 25, D. C. 29 October 1951

TO: The Adjutant General, U. S. Army, Washington 25, D. C.

MLJones/C&E/52035

C. W. COLISON
Supply Division

Col
AFH

Nov 29 4 15 PM '51
O.C.M.G.
MAIL & RECORDS DIVISION

Chicago, Ill
Nov 23, 51

Sirs:

I am writing in to apply for my gold star representing a
a gold star mother.

I was tol to apply for it. My son was Joseph J Negrelli
Killed Sept 11-1944 No. SN 36-314-167

Thank you

Mrs. Maryanne Negrelli
943 W 51 St
Chgo 9 Ill

C
O
P
Y

QMGME 293
Negrelli, Joseph J.
SN 363 14 167

20 October 1948

Mr. Samuel Negrelli
943 West 51st Street
Chicago 9, Illinois

Dear Mr. Negrelli:

This office is in receipt of a letter of recent date, written in your behalf by Rose Negrelli, regarding the furnishing of a money allowance to be applied to the purchase of a stone, from private funds, to mark the grave of the late Joseph J. Negrelli.

You are advised the authorization for the furnishing of Government headstones and markers provides they be used for the unmarked graves of veterans dying in the service or for those honorably discharged therefrom; however, there is no provision for a money allowance in lieu of the stone for any purpose whatsoever.

In view of the above, your application for a Government flat granite marker for the grave of the decedent, has been cancelled and it is regretted a more favorable reply cannot be made.

Sincerely yours,

G. L. RUTH
Memorial Division

[Handwritten signature]
OCT 29 12 38 PM '48
O. O. M. G.
MAIL & RECORDS BRANCH

RECEIPT OF REMAINS DAY LETTER

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

KENNY BROTHERS
5438 SO. HALSTED ST.
CHICAGO, ILLINOIS

ROUTINE

REMAINS CONSIGNED TO:

REMAINS OF THE LATE PVT. JOSEPH J. NEGRELLI
WILL BE DELIVERED TO YOU ON FRI. 6 AUGUST 1948 AT APPROXIMATELY 8:30 AM
CST
ACCOMPANIED BY MILITARY ESCORT. REQUEST YOU IMMEDIATELY INFORM THE NEXT OF
KIN AND THAT YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS UPON DELIVERY. REFER
TO CONTROL NUMBER 9630

CARROLL J. GRINNELL
LT. COL. QMC

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

THIS 6th DAY OF August, 1948

[Signature]
WITNESS (Escort)

Kenny Brothers
[Signature]
CONSIGNEE

REV. 18A

GP

FILE
RECORDS ANNOTATED
DATE 13 Sept '48
NAME maples
R & R BR.

CORRESPONDENCE ACTION SLIP

NAME		SERIAL NUMBER	INITIALS	DATE
NEGRELLI, JOSEPH J		36314167	ms	10-13-48
NAME OF DECEDENT	ADDRESS	IDENTIFYING DATA	LETTER TO: appl: application for marker cancelled as requested. However there can be no reimbursement for stone OCT 15 1948	
BRONZE	NO UPRIGHT GRANITE	CONSIGNEE		
DISHONORABLE-DRAFT	NOT PERMANENTLY INTERRED	NOT RECOVERED		
CEMETERY REGULATIONS	AGO	MARINE		
NAVY	COAST GUARD	VETERANS ADMINISTRATION		
STATE PENSION	AUTHORIZED INSCRIPTION	ADDITIONAL INSPECTION		
APPLICATION FOR PROOF	NO AGENT	NO STATION		
DUE TO DISTANCE	UNCLAIMED	BROKEN		
DAMAGED	CERTIFICATE IN LIEU	LOST		
FOREIGN	TRUCK	RESHIPMENT		

BEH LH

DISINTERMENT DIRECTIVE

70-31

1

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER 3547 03855

DATE 15 03 48 DAY MONTH YEAR

NAME NEGRELLI JOSEPH J SERIAL NUMBER 36314167 RANK PVT ARM 1 DATE OF DEATH DAY MONTH YEAR

CEMETERY LIMEY TOUL DISPOSITION OF REMAINS 1 6100 08 CODE DIST. PT.

PLOT OF ROW GRAVE COUNTRY CAUSE OF DEATH B 9 223 FRANCE 2

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE KENNY BROTHERS 5438 - SOUTH HALSTED CHICAGO, ILLINOIS (F/B EVERGREEN PARK, ILLINOIS)

NAME AND ADDRESS OF NEXT OF KIN MR. SAMUEL NEGRELLI (FATHER) 943 WEST 51ST STREET CHICAGO, ILLINOIS

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER RANK DATE OF DEATH DATE DISTINTERRED

IDENTIFICATION TAG ON REMAINS 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 SEE ATTACHED WORK SHEET

MINOR DISCREPANCIES 1

REMAINS PREPARED AND PLACED IN CASKET DATE 29 May 1948 BY BYRON F JOHNSTON, MORGUE DIRECTOR

CASKET SEALED BY BYRON F JOHNSTON, MORGUE DIRECTOR EMBALMER (Signature) BYRON F JOHNSTON, MORGUE DIRECTOR

CASKET BOXED AND MARKED 29/5/48 CHARLES R CARDER CLERK RECORDER SHIPPING ADDRESS VERIFIED BY all markings, tags and plates verified by: F.R. MAC DONALD, CAPT., OMC.

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 OMC Form 1194a for major discrepancies.

RECORD OF CRYPTOLOGICAL TRANSMISSION

9630

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM	LIMBY, FRANCE	TO	OTC ANTWERP, BELGIUM
KIND OF CONVEYANCE	RATD	NAME OF CONVOYER	T/5 G A HUSMANN
SIGNATURE OF SHIPPER	ORVILLE R STEPPER, CAPT. INF.	SIGNATURE OF RECEIVER	<i>[Signature]</i>
DATE	10-5-48	DATE	18 MAY 1948

2. SHIPPED

FROM	AGRC ANTWERP BELGIUM	TO	USAT LAWRENCE VICTORY
KIND OF CONVEYANCE	ZEC	NAME OF CONVOYER	JOSEPH J. GARROLE 1 ST LT
SIGNATURE OF SHIPPER	L E Butler Lt Col Inf	SIGNATURE OF RECEIVER	<i>[Signature]</i>
DATE	JUN 7 1948	DATE	JUN 1948

3. SHIPPED

FROM		TO	N-Y-D-E
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER		SIGNATURE OF RECEIVER	<i>[Signature]</i>
DATE		DATE	JUN 28 1948

4. SHIPPED

FROM	N-Y-P-E	TO	PORT TRANSPORTATION OFFICER
KIND OF CONVEYANCE	Train	NAME OF CONVOYER	JAMES L. MCKINNON COLONEL, T. C.
SIGNATURE OF SHIPPER	JAMES L. MCKINNON COLONEL, T. C.	SIGNATURE OF RECEIVER	<i>[Signature]</i>
DATE	JUN 30 1948	DATE	JUL 2 1948

5. SHIPPED

FROM	PORT TRANSPORTATION OFFICER	TO	CHICAGO, ILLINOIS
KIND OF CONVEYANCE		NAME OF CONVOYER	CHICAGO, ILLINOIS
SIGNATURE OF SHIPPER		SIGNATURE OF RECEIVER	<i>[Signature]</i>
DATE		DATE	

6. SHIPPED

FROM	B 2 553 EVANCE	TO	S
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER		SIGNATURE OF RECEIVER	
DATE		DATE	

7. SHIPPED

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

DISINTERMENT DIRECTIVE

Section A -- Burial Location of Deceased

Section A --		Directive Number	Date
Burial Location			Day Month Year
Deceased			
NEGRELLI Joseph J		SERIAL NUMBER 36314167	Rank Arm Date of Death
Cemetery LIMEY			Day Month Year
			Disposition of Remains

Plot	Row	Grave	Country	Code	Dist. Pt.
B	9	223	FRANCE		
					Cause of Death

Section B -- Consignee and Next of Kin

Name and Address of Consignee	Name and Address of Next of Kin

Section C -- Disinterment and Identification

Serial Number	Rank	Date of Death	Date Disinterred
NEGRELLI JOSEPH, J.	36314167	EST. 9 SEPT. 44	2 April 1948
Identification Tag on Remains	Organization	Religion	Identification Verified by
<input checked="" type="checkbox"/> Marker	EMB.PL.	UNK	Philip F PRAFF (Embalmer).
			Name & Title

Section D -- Preparation of Remains for Shipment

Nature of Burial	Condition of Remains
Military clothing	Fractured left femur. Semi skeletal state. Disarticulated.
Other Means of Identification	

Report of Burial found with remains.

Discrepancies 1

None

Remains prepared and placed in ~~transfer~~ transfer box. *Philip F. Praff*
 3 April 1948 Sealed by *Philip F. Praff* (Embalmer).
 Embalmer (Signature)

Casket Boxed and Marked By Shipping Address verified by

I hereby certify that all the foregoing operations were accomplished under my immediate supervision except casketing and the report above is correct.
James B. Johns
 James B. JOHNS 1st Lt Inf. 337 QM SV BN.
 Signature of QM Inspector (Grade & Orgn)

Prepare Discrepancy Report GIC Form 1194a for major discrepancies.
 Form 1194

This form modified by: Hq 3rd Zone, AGRC, EA, APO #58,

INSPECTION CHECKLIST

25

NAME Negrelli, Joseph J.	RANK Pvt.	SERIAL NUMBER 36314167
------------------------------------	---------------------	----------------------------------

NEXT OF KIN	ADDRESS
-------------	---------

SHIPPING CASE - General Appearance (Check ONLY Discrepancies)		CONDITION OF SHIPPING CASE (Check One) <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY
<input checked="" type="checkbox"/> FINISH (Exterior) <input type="checkbox"/> FINISH (Interior) <input type="checkbox"/> HANDLES <input checked="" type="checkbox"/> HANDLE BOLTS <input type="checkbox"/> STENCILING - NAMEPLATE	REMARKS <i>defective draw bolt foot end</i>	
		INSPECTED BY: <i>J. N. Malinowski</i>

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

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 <i>Albion mortuary</i>
NECESSARY DISINFECTION (Explain)	CASKET EXCHANGED <input type="checkbox"/>
	SHIPPING CASE REPAIRED <input checked="" type="checkbox"/> <i>of J. Dalaker</i>
	SHIPPING CASE EXCHANGED <input type="checkbox"/>
	REMARKS

TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTING OFFICER
			<i>1:00 PM</i>	<i>8/5/48</i>	<i>Dalaker</i>

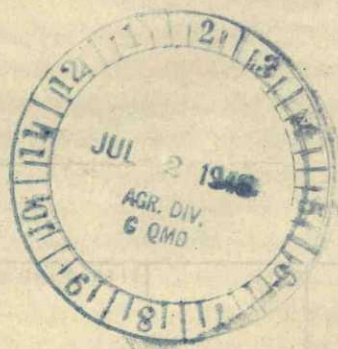
REMARKS

INSPECTION

STORAGE LOCATION				PASS. LIST NUMBER
FLOOR	SECTION	BAY	STORAGE NUMBER	
			<i>355</i>	<i>009</i>

STAMP INCOMING OR OUTGOING <h2 style="text-align: center;">OUTGOING</h2>	CONTROL NUMBER 9630
---	-------------------------------

<p>RECEIVED</p> <p>AGRICULTURAL DIVISION</p> <p>U.S. DEPARTMENT OF AGRICULTURE</p> <p>WASHINGTON, D.C.</p>	<p>NO. 1000</p> <p>DATE</p> <p>RECEIVED</p> <p>AGRICULTURAL DIVISION</p> <p>U.S. DEPARTMENT OF AGRICULTURE</p> <p>WASHINGTON, D.C.</p>	<p>RECEIVED</p> <p>AGRICULTURAL DIVISION</p> <p>U.S. DEPARTMENT OF AGRICULTURE</p> <p>WASHINGTON, D.C.</p>
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RECEIVED

RECEIVED

0230

WU A304 22 COLLECT

CHICAGO ILL JUN 25 1948 948A

Lia

CHGO QM DEPOT

I WISH TO CONFIRM ORIGINAL INSTRUCTIONS FOR PVT JOSEPH J NEGRELLI
CONTROL NUMBER 9630 TO KENNY BROTHERS 5438 SOUTH HALSTED CHICAGO

SAMUEL NEGRELLI

1240P

RECEIVED
SIGNAL CENTER
JUN 25 1948 1245 PM '48

9630 5438..

File

1634

CHGO QM DEPT

RECEIVED
MAIL ROOM
JUN 22 1948
7:55 PM '48

CHICAGO ILL JUN 22 1948 948A

WM 4304 SS COLLECT

CHGO QM DEPT

I WISH TO CONFIRM ORIGINAL INSTRUCTIONS FOR PVT JOSEPH J NEGRELLI
CONTROL NUMBER 8830 TO KENNY BROTHERS 2438 SOUTH HALSTED CHICAGO

SAMUEL NEGRELLI

1240P

8830 2438..

36314167

MESSAGEFORM		MESSAGE CENTER No.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT	
CALLS V	STA. SER. No. NR	PRECEDENCE DAY LETTER	TRANSMISSION INSTRUCTIONS	ORIGINATOR	DATE-TIME GROUP
ACTION	INFORMATION	EXEMPT	OPERATING SIGNALS	GROUP COUNT GR	
SPACE ABOVE FOR SIGNAL CENTER ONLY					
FROM: (Originator) AGR DIV., CHICAGO QUARTERMASTER DEPOT 1819 W. PERSHING RD., CHICAGO, ILL.			SECURITY CLASSIFICATION		
ACTION TO: MR. SAMUEL NEGRELLI 943 W. 51ST STREET CHICAGO, ILLINOIS			DELR. & REPORT ANY CHARGES PRECEDENCE FOR ACTION INFORMATION <input type="checkbox"/> ORIGINAL MESSAGE REFERS TO ANOTHER MESSAGE IDENTIFICATION CLASSIFICATION		
INFORMATION TO:					
THIS HEADQUARTERS ADVISED REMAINS OF LATE PVT JOSEPH J. NEGRELLI ARE ENROUTE TO UNITED STATES. RECORDS OF THIS OFFICE INDICATE YOU WISH REMAINS DELIVERED TO KENNY BROTHERS, 5438 SOUTH HALSTED ST., CHICAGO, ILLINOIS. (F/B EVERGREEN PARK, ILL) PLEASE CONFIRM ABOVE DELIVERY INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS BY TELEGRAM COLLECT WITHIN 48 HOURS TO CHICAGO QUARTERMASTER DEPOT CHICAGO ILLINOIS. THIS IS YOUR FINAL OPPORTUNITY TO CHANGE DELIVERY INSTRUCTIONS AT GOVERNMENT EXPENSE. IMPOSSIBLE TO GIVE YOU DEFINITE DELIVERY DATE. THREE DAYS PRIOR TO SHIPMENT FROM THIS DEPOT YOUR FUNERAL DIRECTOR WILL BE NOTIFIED BY TELEGRAM DATE WHEN REMAINS ACCOMPANIED BY MILITARY ESCORT WILL BE DELIVERED TO HIM AND REQUESTED TO INFORM YOU TO COMPLETE FUNERAL ARRANGEMENTS. YOUR COOPERATION WILL GREATLY ASSIST THIS OFFICE. IF YOU DESIRE MILITARY HONORS AT FUNERAL YOU SHOULD REQUEST LOCAL PATRIOTIC OR VETERANS ORGANIZATION TO MAKE ARRANGEMENTS. IN TELEGRAM REPLY REFER TO CONTROL NUMBER 9630 AND NAME OF DECEASED.					
REV. 4A			SECURITY CLASSIFICATION AUTHORIZATION SIGNATURE CARROLL J. GRINNELL, LT. COLONEL, QMC, CHIEF, AGR DIV.		
ORIGINATING AGENCY		DATE-TIME GROUP	OFFICIAL TITLE		PAGE OF
		JUN 24 1948			

WESTERN UNION

RECEIVED
 CARROLL J. GRINNELL
 LT. COLONEL, QMC
 CHIEF, AGR DIV.
 JUN 23 1948

File

WESTERN UNION

MESSAGE FORM

DAY LETTER

MR. SAMUEL WHEELER
305 W. 51st STREET
CHICAGO, ILLINOIS

JOSEPH J. WHEELER



ARMY BROTHERS 246 SOUTH WABASH ST. CHICAGO, ILLINOIS
(W. B. HARRISON PARK, ILL.)

0800

RRE Form #39
13 Jul 48

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

NEGRELLI	JOSEPH	J	Pvt	36314167
(Last Name)	(First Name)	(Initial)	(Rank)	(ASN)

Repatriated to the United States:

18 JUN 1948

STATION FILE

Incl #

CHECK LIST FOR DISINTERMENTS

Only PART I should be completed, if identification tags are available. Both PART I & PART II should be completely filled out if identification tags are not available. If information is unavailable, so indicate.

RESTRICTED

PART I (Positive Identification)

- 1. Joseph J NEGRELLI 36314167 (Full name of deceased) (Rank) (ASN) (Organization)
2. State if identification tags were attached to remains, how many, and where attached No tags
3. Give exact location from which disinterred furnishing coordinates and map series used Map Ref. - Chambley - Scale - 1 : 50,000 Coord (792 528) 2 Km S.W. on Highway 57 From Town of Jouy-Aux-Archier
NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION IN WITH PERMANENT LANDMARKS.
4. Full name of cemetery (if buried in an organized cemetery) Not in Cemetery
5. Approximate or established date of death (state which & give basis for date selected) September 9, 1944 Approx Mayor of Jouy-Aux-Archier gave this information
6. Approximate or established date of burial (give basis for date established) Was not buried
7. Manner in which grave was marked and all information contained on the marker No Grave
8. List personal effects found in possession of civilian or unauthorized military personnel, furnishing name and address of individuals concerned
9. Names and addresses of all persons questioned concerning death or burial and information each furnished (contact local Mayor, priest, cemetery caretaker, those responsible for burial and any others possessing important information)
See Par 5
Information leading to the identity of this man was determined at the cemetery by cemetery personnel.

PART II - *

(Doubtful or Undetermined Identification)

*Not Applicable.

Henry Councilman T/Sgt 20518190 3048 QM G.R. Co. (Individual in Charge of Disinterment) (Rank) (ASN) (Organization)

27 - Dec 44 (Date)

A TRUE COPY

Carl Duval

CARL D. TRUAX 1st Lt. QMC 609th QM Gr. Reg. Co.

RESTRICTED

CERTIFICATE

(AR 30-1830)

WW II
CONTROL NO. 9630

210-587
STA. 199
E. G. DOYEL
LT. COL., F. D.
CHICAGO, ILL.
TO OFFICE OF
GENERAL SEP 7 1948
ATTN: HDQRS., A. G. R. S.

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 NATIONAL OR POST CEMETERY.

FORWARD COPY
QUARTERMASTER GENERAL
ATTN: HDQRS., A. G. R. S.

PART A - CIVILIAN OR PRIVATE CEMETERY

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

NAME OF DECEDENT	GRADE	SERIAL NUMBER	COMPONENT
MEGRELLI, JOSEPH J.	PVT.	36314167	US ARMY

I certify that the sum of \$ 25.00 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.

CLAIM-VALID-REPATRIATION AUG 12 1948

INSERT NAME OF CEMETERY	CITY OR COUNTY	STATE
<i>St. Louis Cemetery</i>	<i>Chicago</i>	<i>Ill.</i>

INSTRUCTIONS TO PERSON SIGNING THIS FORM

1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR.
2. Return four copies to:
Chicago OM Depot
American Graves Registration Div.
1819 W. Pershing Rd.
Chicago 9, Illinois

SIGNATURE OF CLAIMANT
Sam Megrelli

ADDRESS OF CLAIMANT (City, Street or RFD, and State)
943 WEST 51ST STREET, CHICAGO, ILLINOIS

RELATIONSHIP TO DECEDENT	DATE
FATHER	Aug 7 48

PART B - NATIONAL OR POST CEMETERY

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

NAME OF DECEDENT	GRADE	SERIAL NUMBER	COMPONENT

I certify that the sum of \$ _____ was paid by me from personal funds in connection with the transportation of the remains of the above named decedent from and to the following places:

INSERT CITY OR TOWN (OR ADDRESS NOT IN A CITY OR TOWN) FROM WHICH REMAINS WERE SHIPPED	INSERT NAME AND LOCATION OF NATIONAL OR POST CEMETERY TO WHICH REMAINS WERE SHIPPED

INSTRUCTIONS TO PERSON SIGNING THIS FORM

1. Fill in as required and sign four copies. THIS FORM NOT TO BE SIGNED BY FUNERAL DIRECTOR.
2. Return four copies to:

SIGNATURE OF CLAIMANT

ADDRESS OF CLAIMANT (City, Street or RFD, and State)

RELATIONSHIP TO DECEDENT	DATE

QMC FORM 1236
23 OCT 47

REPLACES WD AGO FORM R-5507, QMC FORM R-5048 AND QMC FORM R-5066, WHICH ARE OBSOLETE.

F.O.D. & ARMA, CHICAGO, ILL.
PAID IN FULL
Symbol Number 210-587
SEP 7 1948

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.

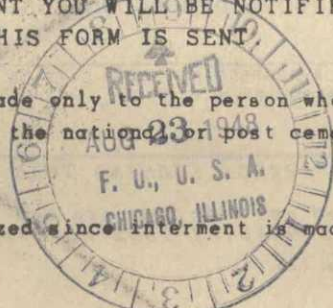
EXPLANATION OF PART B - NATIONAL OR POST CEMETERY

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.



QMGMF 293
Negrelli, Joseph J.
SN 36 314 167

18 September 1947

Mr. Samuel Negrelli
943 West 51st Street
Chicago, Illinois

Dear Mr. Negrelli:

Your letter pertaining to the remains of your son, the late Private Joseph J. Negrelli, has come to my attention.

The Secretary of War, pursuant to Public Law 383, 79th Congress, has directed the War Department to accomplish the Return of World War II Dead Program. This Program provides for all qualified deceased military personnel to be returned to their Homeland for final burial in a National or Private Cemetery or concentrated for final burial in a permanent American Military Cemetery overseas, in accordance with the expressed wishes of their next of kin.

The "Request for Disposition of Remains" questionnaire was mailed to you, who, according to the present records of the War Department, is the only next of kin legally authorized to direct the final disposition of the remains of your son.

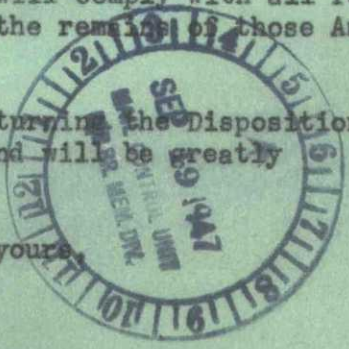
This form should be completely and properly accomplished, including notarized certification, and returned to this office at your earliest opportunity to enable us to record and initiate the proper action in accordance with your desires.

Please rest assured that the War Department will comply with all feasible wishes of the next of kin for the disposition of the remains of those Americans who have made the supreme sacrifice.

Your prompt cooperation in completing and returning the Disposition Form to us will avoid further unnecessary delay and will be greatly appreciated.

Sincerely yours,

RICHARD B. COOMBS
Major, QMC
Memorial Division



RBC

SEP 22 10 16 AM '47
QMG M&R BR

34917

CORRESPONDENCE ACTION SHEET

Mr.
Miss.
Mrs.

Addressee: Mrs. SAMUEL NEGRELLI

Father
Relationship

State 943 WEST 51st ST,

City, State CHICAGO, ILL.

'47
Date letter

Cemetery
Temporary: _____

Permanent: _____

Plot Row Gr Cem. Name or No. City Country

PARAGRAPHS
(sequence)

--- ADDITIONAL --- DATA --- MODIFICATIONS ---

165-A Son
 78-B - 2nd P only.
 82-B - 1st P "you"
 83-A - 2nd & 3rd P only omit "new" in 2nd P
 85-AA -

Decedent:

Negrelli Joseph J.
Last First Initial

Rank

Priv

ASN

36 314 167

gill
9/18/47

J
Analyst Typist Reviewer

Modifications

OKed

check
LOI
Following up
Mr. Sept
& Sept.

Chicago 9, Ill
Sept 9, 1947

Dear Sir,

This is to inform you that we want the "Disposition of Remains" of my brother ²⁹³ Joseph J. ^{negrelli} (36, 314, 167, Plot 13, Row 9, Grave 223) brought to the U. S. where we will bury him in our own private burial lot.

We will wait for further instructions in regard to the procedure.

Thanking you we are

Sincerely,
The Negrelli Family

RECEIVED

0034917



[Faint, mostly illegible handwritten text on lined paper]



RECEIVED
MAR BR OAMS



9 SEP 17

JP

293

Pvt. Joseph J. Negrelli, 36 314 167
Plot B, Row 9, Grave 223,
United States Military Cemetery
Limey, France

2 September 1947

Mr. Samuel Negrelli
943 West 51st Street
Chicago, Illinois

Dear Mr. Negrelli:

Reference is made to the "Letter of Inquiry - Disposition of Remains" sent to you about 30 days ago, requesting you to complete and mail the "Request for Disposition of Remains" form to this office.

The War Department is obliged to inter in permanent U. S. Military Cemeteries the remains of World War II Dead whose next of kin do not request their return to the United States for final burial. After burial in a permanent American Military Cemetery overseas, the next of kin will be mailed the interment flag that was actually used during the military funeral service and advised of the name and the location of the cemetery, together with the plot, row and grave number in which final interment was made.

If the form, "Request for Disposition of Remains," or a reply to this letter is not received from you within fifteen days, the War Department will proceed on the assumption that you do not wish the remains returned to the United States for permanent burial.

Sincerely,

REGISTERED
NO. 1320914

GEO. A. HORKAN
Brigadier General, ~~440 Success Avenue~~
Chief, ~~Memorial~~

RETURN RECEIPT DEMANDED O.O.M.C.

Pfc. Edwin A. Deputa, 31 278 589
United States Military Cemetery
Limey, France

SEP 3 8 51 AM '47
O. O. M. C.
MAIL & RECORDS BRANCH

Pvt. Joseph J. Negrelli, 36 314 167
Plot B, Row 9, Grave 223,
United States Military Cemetery
Limey, France.

18 July 1947

Mr. Samuel Negrelli
943 West 51st Street
Chicago, Illinois

Dear Mr. Negrelli:

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 Incls.

JUL 24 2:00 PM '47

D. Q. M. G.
MAIL & RECORDS BRANCH

oil

mb

2. M. G. M. R.
Negrelli, Joseph, J.
A. S. N. 36 314 147

6-14-47

Dear Sir,

In regard to my brother Joseph's body being brought to the states - my parents want and approve the idea.

Please let us know more about it.

Mr. Sam Negrelli
943 W. 51 St.
Chgo 9, Ill.

Warrant

0006070
NAN
Nancy
KRL

ON AND
BRANCH

0000000

3 42 PM '47



TRIAL DIVISION

cc

QMEMR 293
Negrelli, Joseph J.
A.S.N. 36 314 167

16 April 1947

Mr. Samuel Negrelli
943 West 51st Street
Chicago, Illinois

Dear Mr. Negrelli:

Inclosed herewith is a picture of the United States Military Cemetery Limey, France, in which your son, the late Private Joseph J. Negrelli, is buried.

It is my sincere hope that you may gain some solace from this view of the surroundings in which your loved one rests. As you can see, this is a place of simple dignity, neat and well cared for. Here, assured of continuous care, now rest the remains of a few of those heroic dead who fell together in the service of our country.

This cemetery will be maintained as a temporary resting place until, in accordance with the wishes of the next of kin, all remains are either placed in permanent American cemeteries overseas or returned to the Homeland for final burial.

Sincerely yours,

G. A. HORKAN
Brigadier General, GMC
Chief, Memorial Division

1 Incl
Photograph

ell

APR 17 12 36 PM '47
O O H C
MAIL RECORDS BRANCH

mmg

HEADQUARTERS, ARMY SERVICE FORCES

MEMO ROUTING SLIP

TO THE FOLLOWING IN ORDER INDICATED:

	NAME OR TITLE	ORGANIZATION	BUILDING AND ROOM	INITIALS
1	EFFECTS QUARTERMASTER	ARMY EFFECTS BUREAU	KANSAS CITY 1, MISSOURI	DATE
2	<i>293 Negrelli, Joseph J</i>			
3	<i>36, 314, 147</i>			

For necessary action.

CHRISTENSEN

2 Incl.
cy ltr 3 Feb 46
cy ltr e/d

L

FROM:	NAME	ORGANIZATION	BUILDING AND ROOM	DATE
		MEMORIAL DIVISION, REGISTRATION AND RECORDS BRANCH, TEMPO "C"	WASHINGTON 25, D. C.	27 Feb 46

pa
Orig. fwd. to K. O. by this office.

W. D., A. G. O. Form 0115
1 October 1944
25-68886-16M

This Form supersedes W. D., A. G. O. Form 0115, 23 March 1944,
which may be used until existing stocks are exhausted.

16-31046-2 GPO

SPQYG 293
Negrelli, Joseph J.
S. N. 36 314 167 *rm*

27 February 1946

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

Miss Rose Negrelli
943 W. 51 Street
Chicago 9, Illinois

Dear Miss Negrelli:

Your letter to The Adjutant General concerning your brother, the late Private Joseph J. Negrelli, has been referred to this office.

The official Report of Burial discloses that the remains of your brother were interred in Plot B, Row 9, Grave 223, in the United States Military Cemetery, Limey, France, located approximately sixteen miles east of St. Mihiel and fifteen miles north of Toul, both in France.

There are no provisions at the present time whereby the War Department may furnish photographs of military cemeteries or of individual graves overseas. However, it is anticipated that, within the current calendar year, the War Department, through the Headquarters, Army Air Forces, will be able to provide, upon request of the next of kin, air photographs of most of the principal established military cemeteries overseas.

With reference to your inquiry concerning your brother's uniform, please be advised that the clothing worn by enlisted personnel is Government issue and at the time of death all but one uniform, used to clothe the remains, are extracted from the personal effects and are not forwarded to the next of kin.

In view of the fact that the Army Effects Bureau, Kansas City Quartermaster Depot, 601 Hardesty Avenue, Kansas City 1, Missouri, has been designated to receive and ship personal effects of military personnel who died overseas, a copy of your letter has been forwarded to that office for direct reply to eliminate duplication of effort.

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

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

WILLIAM B. CHRISTENSEN
1st Lt., QMC
Assistant

L

WBC

20 10 40 AM '46
RECORDS BRANCH
FEB 7 1946
MEMORIAL DIVISION
da

efi

ARMY SERVICE FORCES
MEMO ROUTING SLIP

TO THE FOLLOWING IN THE ORDER INDICATED		CHECK ACTION	
TO: (Name, organization, building) 1 Dir., Memorial Division QMGO 1007 Tempo C Washington, D. C.	INITIALS	<input type="checkbox"/>	CONCURRENCE
	DATE	<input type="checkbox"/>	SIGNATURE
2.		<input type="checkbox"/>	NOTE AND RETURN
		<input type="checkbox"/>	NOTE AND FORWARD
		<input type="checkbox"/>	COMPLETE ACTION
3.		<input type="checkbox"/>	CIRCULATE
		<input type="checkbox"/>	INFORMATION
		<input type="checkbox"/>	FILE

1. For necessary action regarding personal effects.
2. ²⁹³ Private Joseph J. Negrelli, 36314167, was killed in action on 11 September 1944 in France.
3. Reference has been made to ^{14 15 16} branch. Personnel Records Branch for reply.
4. Writer has not been informed of reference.



1 Incl
copy ltr dtd 3 Feb 46

*DLE
8 Feb 46*

FROM: (Name, organization, building)		DATE
Operating Section B	3631	8 Feb 46
Family Relations Munitions MLC/cmm		TEL. 79990



GRAVES REGISTRATION SECTION
MEMORIAL DIVISION
FEB 11 1 05 PM '46

Pvt Joseph J. Negrelli 36,314,167

died Sept 14, 1944

Chicago 9, Ill
2-3-46

Dear Sir,

Two years ago we were advised by Washington that my brother Pvt Joseph J. Negrelli 36,314,167, was killed in France on Sept 11, 1944. Since that time we have been trying to get information as to where and how he died, and the nature of his death.

We have just been referred to you as the source for this much wanted information.

In the first part of 1945 we had a letter returned to us which reached his address while he was missing. It was marked "Hospitalized" and yet we have never received any word of his being in a hospital. Please explain.

There is another question as to his personal belongings. Everyone we know got their brothers and sons belongings returned to them but outside of a shaving set and 2 pictures we have received nothing among his belongings were: a wallet, wrist watch, ring & cigarette lighter, another item is his uniform. This factor led us to believe he might yet be alive. If he is really dead will you please explain why we haven't received any of his things and also let us know the exact position of his grave? We really would appreciate a picture of his grave.

I am writing this letter for my mother who has been ill ever since the news of his death. This information, I feel sure will help her. Thank you for any trouble.

(Miss) Rose Negrelli
943 W 51 St
Chgo 9, Ill

Could you please give me the address of some of his buddies including Sgt George Smith whom I would like to write to in regard to my brother. Sgt Smith was a close buddy of Joes. I am referring to the boys in his outfit. Please don't forget to send me their address. Mom wants to invite them to our home for a vacation and take the opportunity to speak to them.

c

o

p

y

JK
YK3

SPQIG 293

Negrelli, Joseph J. 36 314 167 gms

3 May 1946

Mr. Samuel Negrelli
943 West 51st Street
Chicago, Illinois

Dear Mr. Negrelli:

The War Department is most desirous that you be furnished the burial location of your son, the late Private Joseph J. Negrelli, A.S.N. 36 314 167.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery, Limey, France, plot B, row 9, grave 223.

This cemetery is located approximately sixteen miles east of St. Mihiel and fifteen miles north of Toul, both in France, and is under the constant care and supervision of United States military personnel.

It is anticipated that, in the near future, the War Department will receive authority to return the remains of your son, at Government expense, to the final resting place which you select. When the necessary arrangements have been completed, this office will, without any action on your part, give full information and solicit your detailed desires.

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

Sincerely yours,

me
neg

125

MAY 2 5 02 PM '46
O O M G
MAIL & RECORDS BRANCH

T. B. LARKIN
Major General
The Quartermaster General

RESTRICTED
448 68201
28 Dec. 1944

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

REPORT OF BURIAL

243

NEGRELLI Joseph J. Unknown 36314167

Last Name First Initial Rank Serial No.

Unit: 22 Command Inf Bn Organization: US Military Cemetery

Place of Death: Jouy-Aux-Arches, France Date of Death: (Estimated) 9 Sept. 1944 Cause of Death: GSW. Back

Time and Date of Burial: 1300 28 Dec. 1944 Name of Cemetery: US Military Cemetery Name or Coordinates of Location: Limey, France

Grave Number: 223 Row Number: 9 Plot Number: B 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? Name on billfold
Name on order for G.I. Glasses
Name & ASN. on pass from Ft. Benning, Ga.
Leggings marked "N 4167"

What means of identification were buried with the body?
GRS. Form #1 in sealed GRS. Bottle

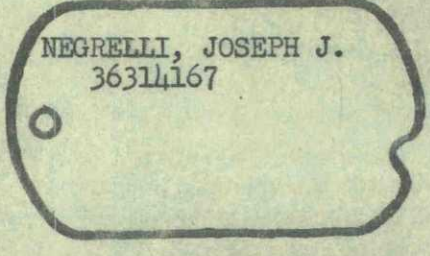
IDENTIFICATION ACCEPTED
Initial me

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

Who is buried on:	<u>MONTGOMERY</u>	<u>34027894</u>	<u>Pvt</u>	<u>Unknown</u>	<u>222</u>
Deceased's Right:	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	<u>DRIVER</u>	<u>33685561</u>	<u>Unknown</u>	<u>Unknown</u>	<u>224</u>
	Name	Serial No.	Rank	Organization	Grave No.

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

No Identification Tags.



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

Emergency Addressee: Unknown Name: _____

Address: _____

Religion: Unknown

List only Personal Effects Found on Body and disposition of same:
NO PERSONAL EFFECTS.

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02	02
03	03
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99	99

RESTRICTED

Signature of Officer or other person reporting burial
For the Commanding Officer Carl D. Truax

Verified by G.R.S. Officer
CARL D. TRUAX 1st Lt. QMC 609th QM Gr. Reg. Co.

me #71

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.

IDENTIFICATION ACCEPTED

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

Initials: _____

GRS. Form #1 in sealed GRS. Bottle

What means of identification were buried with the body?

Name & ASN. on pass from Ft. Benning, Ga.

Name on order for G.I. Glasses

Name on billfold

How were remains identified?

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

Left Hand

4

3

2

1

Thumb

Grave No. _____

Organization _____

Right Hand

4

3

2

1

Thumb

Grave No. _____

Organization _____

TOOTH CHART

Upper	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Lower	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8

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

Characteristics: _____

Other Data: _____

Name: _____

Emergency Address: _____

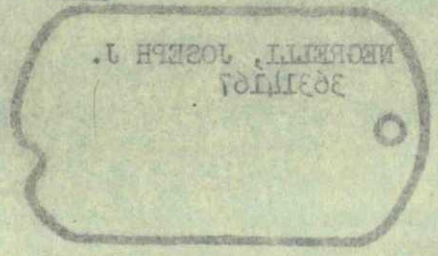
Address: _____

Religion: _____

Last only Personal Effects Found on Body and disposition of same: _____

NO PERSONAL EFFECTS.

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.



AG P BR HQ SOS 122560

CARL D. TRUAX
 1st Lt. OMC 605th OM Gr. Reg. Co. 1st Reg. Co.

CHECK LIST FOR DISINTERMENTS
(To accompany Report of Reburial)

Only PART I should be completed, if identification tags are available.
Both PART I & PART II should be completely filled out if identification tags are not available.
If information is unavailable, so indicate.

RESTRICTED

PART I
(Positive Identification)

1. Unknown Joseph J. Negrelli 36314467
(Full name of deceased) (Rank) (ASN) (Organization)
2. State if identification tags were attached to remains, how many, and where attached
No tags No tags
3. Give exact location from which disinterred, furnishing coordinates and map series used
Map Ref. - Chambley - Scale - 1 : 50,000 Coord (792 528)
2 Km S.W. on Highway 57 From Town of Jouy-Aux-Archier
- NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION IN WITH PERMANENT LANDMARKS.
4. Full name of cemetery (if buried in an organized cemetery)
Not in Cemetery
5. Approximate or established date of death (state which & give basis for date selected)
September 9, 1944 Approx
Mayor of Jouy-Aux-Archier gave this information
6. Approximate or established date of burial (give basis for date established)
was not buried
7. Manner in which grave was marked and all information contained on the marker
No Grave
8. List personal effects found in possession of civilian or unauthorized military personnel, furnishing name and address of individuals concerned
9. Names and addresses of all persons questioned concerning death or burial and information each furnished (contact local Mayor, priest, cemetery caretaker, those responsible for burial and any others possessing important information)
See par 5
Information leading to the identity of this man was determined at the cemetery by cemetery personnel.

PART II
(Doubtful or Undetermined Identification)

10. Fill in any information available regarding name, rank, ASN, or organization (Check cemetery records and office)
11. (Est Height) (Est Weight) (Color of Hair) (Color of Eyes)
12. Give description of facial features and body characteristics if possible, including the presence of scars, moles, circumcision, tattoos, length of hair, presence of mustache or beard, etc.

RESTRICTED

449

13. Give as detailed description as possible of condition and amount of remains

14. Give probable cause of death, type & location of wounds (is there evidence that body was burned)

15. Give minute description of all effects, clothing & shoes, including clothes markings & sizes, as well as shoe size. List each item of clothing, with a description of any unusual cuts, design markings, pockets, colors, patches, etc. Also list, with detailed descriptions, all effects without intrinsic value, such as gum, food, soap, papers, letters, tobacco, etc., giving brands when applicable:

16. Give description of any vehicle found in the area that could be connected with the death of the deceased

(Type) (WD Serial No.) (Organization) (Serial No. & Type of each gun)

17. Give exact location of remains in vehicle before removal

18. If buried in a coffin, give description and markings

19. List names of all other deceased persons buried in the vicinity. Also give available information concerning the cause & place of death of each that may assist in identification of these remains

20. Other pertinent information which would aid in establishing identity

file
8 1945
file

Henry Councilman T/Sgt 20518190 3048 QM G.R. Co.
(Individual in Charge of Disinterment) (Rank) (ASN) (Organization)

L. Dec 44
(Date)

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

DATE **23 January 1945**

REPORT OF DEATH

FULL NAME Negrelli, Joseph J.		ARMY SERIAL NUMBER 36 314 167	GRADE PVT										
HOME ADDRESS Chicago, Ill.		ARM OR SERVICE Infantry	DATE OF BIRTH 23 Sep 16										
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH 11 Sep 44										
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 27 Jan 42	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS										
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Mary Negrelli, mother, 943 West 51st St., Chicago, Ill.													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mary Negrelli, mother, same as above Samuel Negrelli, father, same as above													
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IS FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO

ADDITIONAL DATA AND/OR STATEMENT

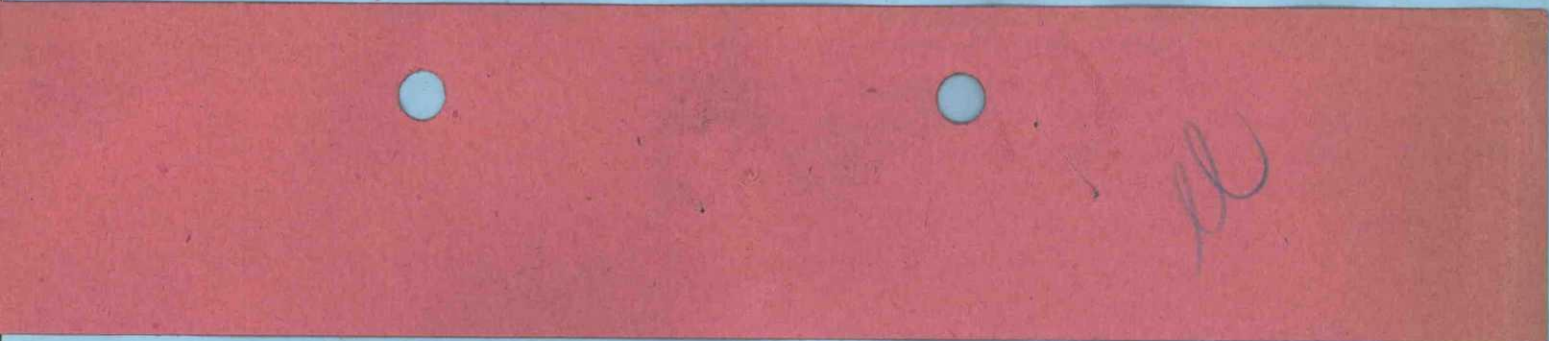
BATTLE NON-BATTLE

The individual named in this report of death is held by the War Dept. to have been in a missing in action status from 11 Sep 1944 until such absence was terminated on 17 Jan 1945, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a Commander in the European Area.

30 JAN 1945
[Handwritten initials]

COPIES FURNISHED:		
S. C. O.	F. O. L.	F. G. U. S. A.
S. O. C. M. S.	C. F. D.	ARMY EFFECTS BUREAU
S. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BY *[Signature]* ADJUTANT GENERAL



255572

DSJ:WB:cms
June 10, 1946

ll

Dear Mrs. Negrelli:

Your inquiry to The Adjutant General's Office has been referred to the Army Effects Bureau for reply in connection with the personal effects of your son, Private Joseph J. Negrelli.

7 /

It is regretted that the items about which you inquire were not received here. All of his property received at this Bureau has been forwarded.

52 /

So that you may better understand the difficulties encountered in the recovery of personal effects, I am inclosing an information circular on the subject.

47 /

I wish to assure you that in the event additional property is received at a later date, it will be forwarded promptly.

18 /

Yours very truly,

1 Incl—
Form 51

D. S. JOHNSTON
2nd Lt., QMC
Chief, Adm. Div.

255572
m l

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

REPORT OF DEATH

DATE 23 January 1945

FULL NAME Negrelli, Joseph J.		ARMY SERIAL NUMBER 36 314 167	GRADE PVT			
HOME ADDRESS Chicago, Ill.		ARM OR SERVICE Infantry	DATE OF BIRTH 23 Sep 16			
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH 11 Sep 44			
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 27 Jan 42	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS			
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Mary Negrelli, mother, 943 West 51st St., Chicago, Ill.						
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mary Negrelli, mother, same as above Samuel Negrelli, 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

ARMY EFFECTS BUREAU
RECEIVED
JAN 20 1945

ADDITIONAL DATA AND/OR STATEMENT

BATTLE NON-BATTLE

The individual named in this report of death is held by the War Dept. to have been in a missing in action status from 11 Sep 1944 until such absence was terminated on 17 Jan 1945, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a Commander in the European Area.

COPIES FURNISHED:

S. G. O.	F. G. I.	F. G., U. S. A.
S. G. O. M. G.	G. F. D.	ARMY EFFECTS BUREAU
S. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BY _____ THE SECRETARY OF WAR

James H. ...
ADJUTANT GENERAL

VP

255572
1086

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

—BATTLE CASUALTY REPORT

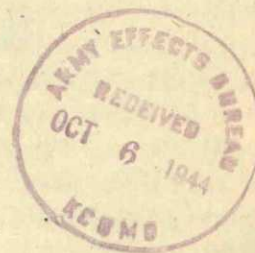
NAME		SERIAL NUMBER		GRADE	ARM OR SERVICE	REPORTING THEATRE
NEGRELLI JOSEPH J		36314167		PVT	INF	ETO
PLACE OF CASUALTY		DATE OF CASUALTY		FLYING OR JUMPING STAT	TYPE OF CASUALTY	SHIPMENT NUMBER
FRANCE 9		DAY	MONTH	YEAR		
		11	SEP	44	MIA	199

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. MARY NEGRELLI	MOTHER	28 Sept 44 lmb
NO. AND NAME OF STREET—CITY—STATE		
934 WEST 51st STREET		CHICAGO, ILLINOIS

REMARKS:

 CORRECTED COPY


ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED <input checked="" type="checkbox"/> FORM 43 <input checked="" type="checkbox"/> AG 201 REQ _____					
CASUALTY BRANCH FILE ATTACHED _____ OR CHARGED TO _____ DATE _____					
PREVIOUSLY REPORTED NO <input checked="" type="checkbox"/> YES _____ (AS INDICATED BELOW):					
FILE NO.	MESSAGE NO.	TYPE	DATE AND AREA	E. A. NOTIFIED	
FORWARDED TO	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	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 <u>Angela [unclear]</u> REVIEWED BY <u>[unclear]</u>					

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.

INQUIRY CLERK

255572
m

AGRS-DG 201 Negrelli, Joseph J.
(2 May 46)

23 May 1946

Mrs. Mary Negrelli
943 West 51st Street
Chicago 9, Illinois

Dear Mrs. Negrelli:

Reference is made to your letter received in the Adjutant General's Office, Washington, D. C., requesting additional information regarding the death of your son.

I can well understand your desire to be fully informed regarding the death of your son, Private Joseph J. Negrelli, Army serial number 36 314 167, Infantry. Additional records have now been received which show that on 11 September 1944 he was participating with his organization in an assault-boat crossing of the Moselle River, in a mission to take and hold a position 900 yards east of the River at Dornot, France. Subsequent to this operation, he was reported missing in action and later a casualty message received from the Commanding General of the European Theater of Operations stated only that he was killed in action 11 September 1944 in France. Additional records have now been received which show that at the time he was reported missing, he was at Arnaville, France, but unfortunately, no further details regarding his death, or the specific cause, were given. I am sure you will understand how extremely difficult it was, under actual battle conditions, to obtain complete reports regarding casualties.

Regarding mail returned to you with the notation "Hospitalized", I wish to advise you that this was not abnormal. Many factors affected the information received by the postal authorities used in the forwarding of mail, but the only official information is that which is furnished by the War Department. At the time of his death, your son was a member of Headquarters Company, 23rd Armored Infantry Battalion, but that organization has now been returned to the United States from overseas and inactivated. The names and addresses of the other members of his company were not included with the messages to this office. In this connection, may I state that casualty reports received from our overseas commanders were submitted individually and were not associated with the names of those who comprised units.

52225

REGISTRY CARD

23 May 1948

4038-DC 201 Kereilly, Joseph J. (2 May 48)

Mrs. Mary Kereilly
222 West 27th Street
Chicago 9, Illinois

Dear Mrs. Kereilly:

Reference is made to your letter received in the Adjutant Gen-
eral's Office, Washington, D. C., requesting additional information
regarding the death of your son.

I can well understand your desire to be fully informed regarding
the death of your son, Private Joseph J. Kereilly, Army serial number
36 314 13V, Infantry. Additional reasons have now been received which
show that on 11 September 1944 he was participating with his organi-
zation in an assault-boat crossing of the Moselle River, in a mission
to take and hold a position 300 yards west of the River at Dornot,
France. Subsequent to this operation, he was reported missing in
action and later a casualty manager received from the Commanding Gen-
eral of the European Theater of Operations stated only that he was
killed in action 11 September 1944 in France. Additional reports
dated in action 11 September 1944 at the time he was reported
missing, he was at Dornot, France, but unfortunately, no further
details regarding his death, or the specific cause, were given. I
am sure you will understand how extremely difficult it was, under
actual battle conditions, to obtain complete reports regarding cas-
ualties.

Regarding mail, you will find the notation "hospitalized".
I wish to advise you that when we received your letter, the
information received from the post office indicated that in the forward-
ing of mail, the only address listed was that which is cur-
rently listed by the War Department. At the time of his death, you were
a member of Headquarters Company, 1st Infantry Battalion, but
that organization has now been returned to the United States from over-
seas and inactivated. The name and address of the other members of
his company were not included with the message to this office. In
this connection, may I state that casualty reports received from our
overseas command were checked individually and were not associated
with the names of those who supplied mail.

MAY 28 1948
MAIL ROOM

AGRS-DC 201 Negrelli, Joseph J.
(2 May 46)

The Effects Quartermaster, Army Effects Bureau, Kansas City Quartermaster Depot, Kansas City 1, Missouri, has jurisdiction over the personal effects of our military personnel who die overseas. A copy of your letter has accordingly been forwarded to that officer for necessary action.

Permit me again to extend my sympathy.

Sincerely yours,

ob
COPY FOR:
Effects Quartermaster
Army Effects Bureau
Kansas City Quartermaster Depot
Kansas City 1, Missouri

CHARLES D. CARLE
Colonel, AGD
Commanding

1 Incl
Copy ltr dtd 2 May 46

Sub-4

MRS. J. M. HENNING, Joseph J.
(2 May 48)

The Elletts Quartermaster, Army Elletts Bureau, Kansas City
Quartermaster Depot, Kansas City 1, Missouri, has jurisdiction over
the personal effects of our military personnel who die overseas. A
copy of your letter has accordingly been forwarded to that office
for necessary action.

Permit me again to extend my sympathy.

Sincerely yours,

CHARLES D. CARLIS
Colonel, ADJ
Commanding

COPIES FOR:
Elletts Quartermaster
Army Elletts Bureau
Kansas City Quartermaster Depot
Kansas City 1, Missouri

1 Incl
Copy for det 2 May 48

File 4

MAY 28 1948
KANSAS CITY, MO.



C O P Y

5-2-46
Chigo 9, Ill.

Dear Sir:

Sometime ago I wrote to you asking for information about my son, Joseph J. Negrelli, 36'314 167, and was very dissatisfied with the results. All they told me was that he was buried at such and such a place and we already have had that information sent to us.

I think you owe it to a war mother to tell me how my son died and where and all the details involved. It's a shame I don't know anything about my son and it doesn't give me any rest worrying about it.

Another question you didn't answer is this: Right before Joseph was reported killed, one of my letters were returned marked "hospitalized". He was supposed to be missing during that time and I knew nothing about his being hospitalized. Please explain and don't let this go unanswered.

Another thing I want to know is why his personal belongings weren't returned. They included a wrist watch, ring, cigarette lighter and billfold.

I won't rest at ease until I get an answer to these things. Please write and ease my heatache.

Sincerely

Mrs. Mary Negrelli

I have asked you for the names and addresses of some of the boys from his division so I may write to them. If you cannot oblige could you please tell me how to obtain them?

COPY

Chicago 9, Ill. 5-2-48

Dear Sir:

Sometime ago I wrote to you asking for information about my son, Joseph J. Negrelli, 36 314 187, and was very dissatisfied with the results. All they told me was that he was buried at such and such a place and we already have had that information sent to us.

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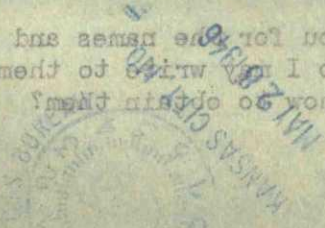
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Summary Court-Martial
ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT
601 Hardisty Avenue
Kansas City 1, Missouri

JIM:WA:mj
Case No. 255572
Date 18 June 1945

SUBJECT: Report of transaction in disposing of the effects of

Joseph J. Negrelli, 36314167 late
(Name of deceased) (Army Serial Number)
Private, Infantry who died
(Grade) (Organization, Army or Service)
on the 11 day of September, 1944, at European Area

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

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

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

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

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

d. Disposition of decedent's effects (less money paid creditors, if any, has been made by the Summary Court-Martial by transmission 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 15 June 1945, pursuant to Special Orders 228, Headquarters KCQM Depot, dated 25 September 1943, the application or affidavit of Samuel Negrelli 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, Samuel Negrelli of (Name of person found entitled) 943 West 51st Street, Chicago State of (Number, Street or Avenue) (City, Town or Village) Illinois, is the Father of the (Relationship or Capacity)

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

(Signature of Summary Court Officer)
JOHN R. MURPHY, Colonel, Q.M.C.
(Name, Rank, Organization)
SUMMARY COURT MARTIAL



ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT

601 HARDESTY AVENUE
KANSAS CITY 1, MISSOURI

GHG:WA:mj
June 18, 1945

IN REPLY REFER TO 255572

Mr. Samuel Negrelli
943 West 51st Street
Chicago, Illinois

Dear Mr. Negrelli:

The Army Effects Bureau has received from overseas some personal effects of your son, Private Joseph J. Negrelli.

These effects are being forwarded to you in one carton. I regret to advise that included among your son's effects are a writing kit and a pen which were damaged prior to receipt at this Bureau.

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

The action of this Bureau in transmitting personal effects does not, of itself, vest title in the recipient. Such property is forwarded for distribution according to the laws of the state of the soldier's legal residence.

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

Yours very truly,

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

65

as

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mr. Samuel Negrelli
943 West 51st Street
Chicago, Illinois

SHIP TO
Pvt. Joseph J. Negrelli

36314167

Effects of:
re

255572-D

file p

ASN
Case No.
Wt.

DATE 18 June 1945
GEG:WA:mj

A. O'Brien
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 other

REMARKS:

Ship damaged property

Franchised **FRANKED**
Est. Exp. Chgs. _____ JUN 21 1945
Est. Frt. Chgs. _____
No. of packages _____

[Signature]
Shipping Co.

JUN 11 1945

222

PACKAGE DESCRIPTION
#1 Ctn

ARMY EFFECTS BUREAU INVENTORY

255,572

DECEASED	<input type="checkbox"/>
MISSING	<input checked="" type="checkbox"/>
P.O.W.	<input type="checkbox"/>
ABANDONED	<input type="checkbox"/>
TALLY NO.	7629
INV. DATE	29 May 45
ORIG. NO. OF PKGS.	1
BOX NO.	-
SHEET	1
OF SHEETS	1
ORGANIZATION	330 Armbrist.

NAME **JOSEPH J. NEGRELLI**
A.S.N. **36314167** RANK **Pvt.**

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

** 1

* 1

file go

REMARKS *address on letter
Mrs Irene Keeslin
Box 154 - Edison, Pa.*

ATTACHMENTS

FORM #54

FORM #100

Inventory

DAMAGED

*corn. - (writing kit)
pen - points broken.*

C.A.T.

None

WAREHOUSE SPACE

1426

STORED BY

[Signature]

DATE SHIPPED

JUN 21 1945

G.I. REMOVED

SHORTAGE ON REVERSE

IDENT. TAGS REMOVED

DIARY REMOVED

LOCKED STORAGE

LAUNDRY REMOVED

FILM REMOVED

INVENTORIED BY

Davidson

PACKED BY

to my warehouse

CHECKED BY

[Signature]

#13 OR ADDITIONAL

ADDITIONAL REMARKS

SHORTAGES

U.S. GOVT. CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

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

INVENTORY CLERK

SUPERVISOR

G. I. REMOVED

RESTRICTED

14 Sep 44
Date

SUBJECT: Inventory of Personal Effects of:

NEGRELLI JOSEPH J. PVT. 36314167
(Last Name) (First Name) (MI) (Rank) (ASN)

TO: Effects Quartermaster, Communication Zone, APO 971
US Army

The above named individual of HEADQUARTERS CO.
(Unit)

23D ARMD INF. BN. was reported MIA
(Organization) (Status-Killed, MIA,

Hospitalized, etc.) about 11 September 1944
(Date)

Designated Beneficiary if information readily accessible _____

INVENTORY OF EFFECTS

- Fountain pen ✓
- Mirror ✓
- Razor set ✓
- Portfolio with personal correspondence ✓
- Photographs ✓
- Snapshots ✓

RESTRICTED

RESTRICTED

Money in the amount of None has been turned into

_____ Form WDFD 38
(Name of finance officer and symbol number)

enclosed.

(Unknown)

Names 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 by Truck on _____ (Rail, Truck, etc.)

14 September 1944.

Stuart P. Edson

Name STUART P. EDSON

Rank & ASN 1st Lt., O-467449

Organization 23d Armd Inf. Bn.

Any additional pertinent information:

DEPARTMENT OF THE ARMY
THE ADJUTANT GENERAL'S OFFICE
WASHINGTON



DEPARTMENTAL RECORDS BRANCH, A.G.O.

*Departmental Records Branch, AGO
215 North Lee Street
Alexandria, Virginia*