

Interred 25 March 1949
 C-17-19 USMC by Laurent
C.H. HIEMSTRA
 1/Lt Inf, Interring Officer.

DISINTERMENT DIRECTIVE

SECTION A -
 NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
 3586 03136

DATE
 15 12 47
 DAY MONTH YEAR

NAME ORLER JOSEPH F JR		SERIAL NUMBER 13131556	RANK PVT	ARM 1	DATE OF DEATH DAY MONTH YEAR
CEMETERY ST MERE EGLISE NO 2 - CARENTAN					DISPOSITION OF REMAINS 1 3505 80 CODE DIST. PT.
PLOT N	ROW 3	GRAVE 54	COUNTRY FRANCE		CAUSE OF DEATH 2

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE ST. LAURENT, FRANCE	NAME AND ADDRESS OF NEXT OF KIN JOSEPH F. ORLER, SR. (FATHER) 160 MAPLEWOOD AVENUE AMBRIDGE, PENNSYLVANIA
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SECTION C - DISINTERMENT AND IDENTIFICATION *Flag Sent 25 March 1949*

NAME Orler, Joseph F. Jr.	SERIAL NUMBER 13131556	RANK Pvt	DATE OF DEATH	DATE DISTINTERRED 11 May 1948
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION USAGF	RELIGION Cath.	IDENTIFICATION VERIFIED BY W. G. Straube Embalmer NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL OD uniform.	CONDITION OF REMAINS Advanced decomposition.
OTHER MEANS OF IDENTIFICATION None.	

MINOR DISCREPANCIES 1

None.

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

DATE 19 May 1948	BY W. G. Straube
CASKET SEALED BY L. E. Price	EMBALMER (Signature)
CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
DATE 17 Jun 48 BY H. B. Albert	All tags, markings and plates verified by: R. B. HOWARD, 2d Lt, Inf.

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

copies of the entries on Copy No. 4 of this Disinterment Directive which contains the signatures of the persons who prepared the entries on this form are true

JOHN A. FAGAN, 1st Lt, Cav. SIGNATURE OF GRS INSPECTOR

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

FILE
15 JUN 1949
 REPAIRATION
 BRANCH
 MEM. DIV.

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC St. Mere Eglise #2		TO Gasketing Point B, St. Laurent	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER Tec 5 James E. Gregory	
SIGNATURE OF SHIPPER W. T. DAILEY, Capt, QMC	DATE 21 May 48	SIGNATURE OF RECEIVER D. A. MACKENZIE, Capt, Inf.	DATE 21 May 48

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER 21. GABRIEL, FRANCE	DATE	SIGNATURE OF RECEIVER JOSEPH E. ORTEG, 2B (FRANCE)	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

AMV

25 May 1949

Pvt Joseph F. Orler, Jr., ASN 13 131 556
~~Plot C, Row 17, Grave 19~~
Headstone: Cross
St. Laurent (France) U. S. Military Cemetery

Mr. Joseph F. Orler, Sr.
160 Maplewood Avenue
Ambridge, Pennsylvania

Dear Mr. Orler:

This is to inform you that the remains of your loved one have been permanently interred, as recorded above, side by side with comrades who also gave their lives for their country. Customary military funeral services were conducted over the grave at the time of burial.

After the Department of the Army has completed all final interments, the cemetery will be transferred, as authorized by the Congress, to the care and supervision of the American Battle Monuments Commission. The Commission also will have the responsibility for permanent construction and beautification of the cemetery, including erection of the permanent headstone. The headstone will be inscribed with the name exactly as recorded above, the rank or rating where appropriate, organization, State, and date of death. Any inquiries relative to the type of headstone or the spelling of the name to be inscribed thereon, should be addressed to the American Battle Monuments Commission, Washington 25, D. C. Your letter should include the full name, rank, serial number, grave location, and name of the cemetery.

While interments are in progress, the cemetery will not be open to visitors. You may rest assured that this final interment was conducted with fitting dignity and solemnity and that the grave-site will be carefully and conscientiously maintained in perpetuity by the United States Government.

Sincerely yours,

H. FELDMAN
Major General
The Quartermaster General

lhc

MAY 27 11 29 AM '49

MAIL & RECORDS BRANCH
G. S. M. C.

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

Pvt. Joseph F. Orler, Jr., 13 131 556
Plot H, Row 3, Grave 54,
United States Military Cemetery
Ste. Marie Eglise #2, France

23 September 1947

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

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

If you are the next of kin or authorized representative of next of kin and desire to direct the disposition of the remains, please fill in PART I of this form.

PART I

1, Joseph F. Orler Sr.
(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. ST. LAURENT, FRANCE
- 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY

(NAME AND LOCATION OF CEMETERY)

- 3. BE RETURNED TO _____ (FOREIGN COUNTRY), THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT _____ (LOCATION OF CEMETERY SELECTED)

- 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT _____ (LOCATION OF NATIONAL CEMETERY SELECTED)

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

- YES
- NO

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

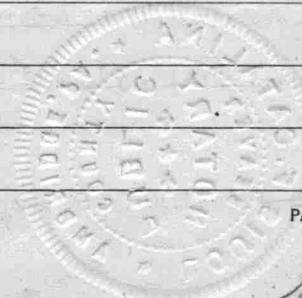
None.

LHO Base, 26 Dec 47
coded 11/21/47 Mitchell

OQMG FORM 345 MILITARY
14 NOV 1946

16-50411-1

PAGE 1



NOV 14

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

OR

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

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

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

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

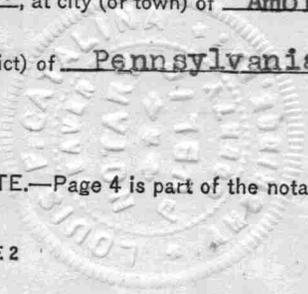
REMARKS OR ADDITIONAL INSTRUCTIONS (*For additional space use page 4.**)

AS EXPLAINED IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," I AM THE NEXT OF KIN AND THE INDIVIDUAL AUTHORIZED TO DIRECT THE DISPOSITION OF THE SAID REMAINS.

I, the undersigned, DO SOLEMNLY SWEAR (OR AFFIRM) that the statements made by me in the foregoing document are full and true to the best of my knowledge and belief.

Joseph F. Orler Sr. 160 Maplewood Ave.
(SIGNATURE OF NEXT OF KIN) (STREET AND NUMBER)
Joseph F. Orler Sr. Ambridge Penna.
(NAME PRINTED OR TYPED) (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 28th day of October, 1947, at city (or town) of Ambridge, county of Beaver, and State (or Territory or District) of Pennsylvania



Louis J. Stalina
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)
My Commission Expires Jan. 7, 1951
(OFFICIAL TITLE)

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

ADDITIONAL REMARKS AND INSTRUCTIONS

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

If by any chance the Government would send the next of kin overseas to visit graves of their loved ones I would like to be one of the party.

Yours respectfully,
Jos. F. Oeler Sr.

U.S. ARMY
RECORDS BRANCH

OCT 30 5 26 PM '47

MEMORIAL DIVISION



end

Pvt. Joseph F. Orlor, Jr., 13 131 556
Plot N, Row 3, Grave 54,
United States Military Cemetery
Ste. Mere Eglise #2, France

23 September 1947

Mr. Joseph F. Orlor, Sr.
160 Maplewood Avenue
Ambridge, Pennsylvania

Dear Mr. Orlor:

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

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

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

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

Sincerely,

THOMAS B. LARKIN
Major General
The Quartermaster General

Incls.

OCT 3 11 30 AM '47
MAIL & RECORDS

17 August 1946

Mr. Joseph F. Orlor, Sr.
160 Maplewood Avenue
Ambridge, Pennsylvania

Dear Mr. Orlor:

293 The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Private Joseph F. Orlor, Jr., A.S.N. 13 131 556.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Ste. Mere Eglise #2, plot N, row 3, grave 54. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located twenty miles southeast of Cherbourg, France, and is under the constant care and supervision of United States military personnel.

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

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

AUG 20 11 55 AM '46
O O M C
MAIL & RECORDS BRANCH

Eliz

SENSITIVE SURFACE - HANDLE EDGES ONLY

*Corrected report for other pay status. Orig. issued 10 August 1944.
WAR DEPARTMENT
 THE ADJUTANT GENERAL'S OFFICE
 WASHINGTON 25, D. C.

REPORT OF DEATH

DATE 22 October 1945 dmb

FULL NAME Orler, Joseph F., Jr.		ARMY SERIAL NUMBER 13 131 556	GRADE Pvt.
HOME ADDRESS Ambridge, Pa.		ARM OR SERVICE Inf.	DATE OF BIRTH 21 Jan 1924
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH 4 July 1944
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 19 October 1942	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS

EMERGENCY ADDRESSEE (Name, relationship, and address)
 Mr. Joseph F. Orler, Sr. (father) 160 Maplewood Avenue, Ambridge, Pa.

BENEFICIARY (Name, relationship, and address)
 Mr. Joseph F. Orler, Sr. (father) same as above
 Miss Virginia May Orler (sister) same as above

INVESTIGATION MADE		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (Specify below)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
											X		X

ADDITIONAL DATA AND/OR STATEMENT

BATTLE NON-BATTLE

The individual named in this report of death is held by the War Department to have been in a missing in action status from 4 July 1944 until such absence was terminated on 4 August 1944, when evidence considered sufficient to establish the fact of death was rec'd by the Secretary of War from a commander in the European Area.

*Combat Infantryman, GO #11, Hq. 329th Inf. dated 11 August 1944.

CORRECTED COPY

BY ORDER OF THE SECRETARY OF WAR

E. L. Shultz

ADJUTANT GENERAL

Final
26 OCT 1945
file
ef

RESTRICTED REPORT OF BURIAL

TM 10-630 AND AR 30-1815

SEP 14 1944

13 July 44
Date

Order
Last Name ORDER First Joseph

Initial F J Rank Pvt.

Serial No. 13131556

Unit 329 INF REGT

Organization 83rd Inf. Div.

Place of Death Normandy, France

Date of Death 2 July 44

Cause of Death K.I.A.

Time and Date of Burial 2000 13 July 44

Name of Cemetery St Mere Eglise #2

Name or Coordinates of Location St Mere Eglise, Fr.

Grave Number 54 Row Number 3

Plot Number N

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?

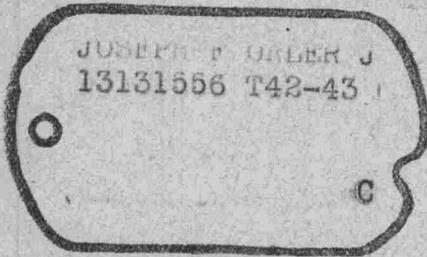
176

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

Who is buried on:

Deceased's Right:	<u>Combs G.</u> Name	<u>35665291</u> Serial No.	Rank	Organization	<u>55</u> Grave No.
Deceased's Left:	<u>Verovich</u> Name	<u>36766233</u> Serial No.	Rank	<u>83rd Inf. Div.</u> Organization	<u>53</u> Grave No.

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



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

Emergency Addressee Joseph Order
Name
160 Maplewood ave. Ambridge, Pa.
Address

Religion _____

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

Insignias
Bracelet
Ring
Fwd. to Effects QM.

Signature of Officer or other person reporting burial

Verified by G.R.S. Officer

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.

Left Hand

4	
3	
2	
1	
Thumb	

Right Hand

4	
3	
2	
1	
Thumb	

TOOTH CHART

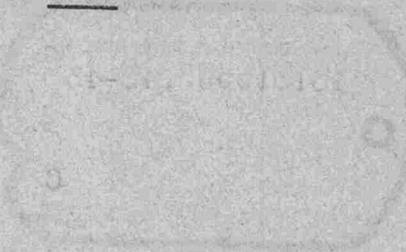
		Deceased's Left							
Upper	Lower	8	7	6	5	4	3	2	1
		8	7	6	5	4	3	2	1

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.



WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE

WASHINGTON 25, D. C.

REPORT OF DEATH

DATE 10 Aug 1944
sfm 4632

FULL NAME Orler, Joseph F., Jr.		ARMY SERIAL NUMBER 13, 131, 556		GRADE Pvt.									
HOME ADDRESS Ambridge, Pennsylvania		ARM OR SERVICE Infantry		DATE OF BIRTH 21 Jan 1924									
PLACE OF DEATH European Area		CAUSE OF DEATH Killed in action		DATE OF DEATH 4 Jul 1944									
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 19 Oct 1942		LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS									
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mr. Joseph F. Orler, Sr., Father, 160 Maplewood Avenue, Ambridge, Pennsylvania													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mr. Joseph F. Orler, Sr., Father, same as above Miss Virginia May Orler, Sister, 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
											<input checked="" type="checkbox"/>		

ADDITIONAL DATA AND/OR STATEMENT

The individual named in this report of death is held by the War Department to have been in a missing in action status from 4 July 1944 until such absence was terminated on 4 August 1944, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.

Handwritten:
10 AUG 1944 FILE
Wing

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

BATTLE

NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:

J.A. Marshall
J. A. Marshall

ADJUTANT GENERAL

SENSITIVE SURFACE - HANDLE EDGES ONLY

*Corrected report for other pay status. Orig. issued 10 August 1944.

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

171529
BN

REPORT OF DEATH

DATE 22 October 1945 dmb

FULL NAME Orler, Joseph F., Jr.		ARMY SERIAL NUMBER 13 131 556		GRADE Pvt.	
HOME ADDRESS Ambridge, Pa.		ARM OR SERVICE Inf.		DATE OF BIRTH 21 Jan 1924	
PLACE OF DEATH European Area		CAUSE OF DEATH Killed in action		DATE OF DEATH 4 July 1944	
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 19 October 1942		LENGTH OF SERVICE FOR PAY PURPOSES	
				YEARS	MONTHS
					DAYS
EMERGENCY ADDRESSEE (Name, relationship, and address) Mr. Joseph F. Orler, Sr. (father) 160 Maplewood Avenue, Ambridge, Pa.					
BENEFICIARY (Name, relationship, and address) Mr. Joseph F. Orler, Sr. (father) same as above Miss Virginia May Orler (sister) 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
ADDITIONAL DATA AND/OR STATEMENT					
<input checked="" type="checkbox"/> BATTLE <input type="checkbox"/> NON-BATTLE					

The individual named in this report of death is held by the War Department to have been in a missing in action status from 4 July 1944 until such absence was terminated on 4 August 1944, when evidence considered sufficient to establish the fact of death was rec'd by the Secretary of War from a commander in the European Area.

*Combat Infantryman, GO #11, Hq. 329th Inf. dated 11 August 1944.

CORRECTED COPY

BY ORDER OF THE SECRETARY OF WAR

E. J. Schultz

ADJUTANT GENERAL

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

171529

REPORT OF DEATH

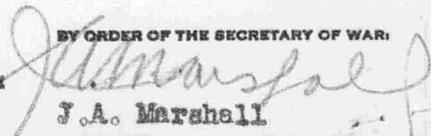
DATE 10 Aug 1944
sfm 4632

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				YEARS	MONTHS
					DAYS
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mr. Joseph F. Orler, Sr., Father, 160 Maplewood Avenue, Ambridge, Pennsylvania					
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mr. Joseph F. Orler, Sr., Father, same as above Miss Virginia May Orler, Sister, same as above					
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT	
YES	NO	YES	NO	YES	NO
WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS	
YES	NO	YES	NO	YES	NO
					<input checked="" type="checkbox"/>
OTHER PAY STATUS (SPECIFY BELOW)				YES	
				NO	

ADDITIONAL DATA AND/OR STATEMENT

The individual named in this report of death is held by the War Department to have been in a missing in action status from 4 July 1944 until such absence was terminated on 4 August 1944, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a commander in the European Area.



COPIES FURNISHED:			<input checked="" type="checkbox"/> BATTLE <input type="checkbox"/> NON-BATTLE	BY ORDER OF THE SECRETARY OF WAR:  J.A. Marshall ADJUTANT GENERAL
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		

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

-BATTLE CASUALTY REPORT

NAME ORLER JOSEPH F JR			SERIAL NUMBER 13131556			GRADE PVT	ARM OR SERVICE INF	REPORTING THEATRE ETO
PLACE OF CASUALTY FRANCE			DATE OF CASUALTY DAY MONTH YEAR 04 JUL 44	FLYING OR JUMPING STAT	TYPE OF CASUALTY MIA	SHIPMENT NUMBER 133		

NAME AND ADDRESS OF EMERGENCY ADDRESSEE

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

MR.-MRS.-MISS—FIRST NAME—MIDDLE INITIAL—LAST NAME MR MR JOSEPH F ORLER SR			RELATIONSHIP FATHER		DATE NOTIFIED 24 JULY 44 1jt
NO. AND NAME OF STREET—CITY—STATE 160 MAPLEWOOD AVENUE AMBRIDGE PENNSYLVANIA					

REMARKS:

CORRECTED COPY

ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED FORM 43 AG 201 REQ _____

CASUALTY BRANCH FILE ATTACHED _____ OR CHARGED TO _____ DATE _____

PREVIOUSLY REPORTED NO YES _____ (AS INDICATED BELOW):

FILE NO.	MESSAGE NO.	TYPE	DATE AND AREA	E. A. NOTIFIED

FORWARDED TO SPEC. IDEN. TELEGRAM WOUNDED LETTER CORRES. S. R. & D. CERTIF. M. & M. NON-DEL.

REPORT NOT VERIFIED NO FORM 43 NO CAS. BR. FILE CHECKED BY W. J. [Signature] REVIEWED BY [Signature]

THIS SPACE FOR USE OF MACHINE RECORDS BRANCH, A.G.O.

ACCT. AREA	CASUALTY STATUS	ORIGINAL CAS. DATE			MESSAGE NO.	LATEST CAS. DATE			REFERENCE AREA	CREW POS.	RESIDENCE		COMP	RACE											
		DAY	MO.	YR.		DAY	MO.	YR.			STATE	COUNTY													
34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59

DISTRIBUTION "A" 32 COPIES

(ALL TYPES OF CASUALTIES PERTAINING TO MILITARY PERSONNEL, EXCEPT WOUNDED.)
 COPIES FURNISHED: SEE CASUALTY BRANCH MEMORANDUM NO. 48, 1944.

DISTRIBUTION "B" _____ COPIES

(ALL WOUNDED MILITARY PERSONNEL AND ALL TYPES OF CASUALTIES PERTAINING TO CIVILIANS WHO ARE W. D. EMPLOYEES, EMPLOYEES OF W. D. CONTRACTORS AND OTHERS SUBJECT TO MILITARY LAW.)
 COPIES FURNISHED: SEE CASUALTY BRANCH MEMORANDUM NO. 48, 1944.

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

JRM:NM:unh

Case No. 171529 M

Date 27 December 1944

SUBJECT: Report of transactions in disposing of the effects of

Joseph F. Orler, Jr., 13131556 late a
(Name of deceased) (Army Serial Number)
Private, Infantry who died
(Grade) (Organization, Army or Service)
on the 4 day of July, 1944, at European Area.

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

1. Complying with A.W. 112, a Summary Court-Martial, convened at Kansas City, Mo., pursuant to S.O. 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 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. None.)

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

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

FINDING

Before a Summary Court-Martial which convened at Kansas City, Missouri, on 2 November 1944, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application or affidavit of Joseph F. Orler, Sr. for the effects of the above-named deceased soldier, or person subject to military law, now in the possession of the United States, with other relevant evidence, was duly considered;

Whereupon, this Summary Court-Martial finds that, under the provisions of A.W. 112, Joseph F. Orler, Sr. of 160 Maplewood Avenue, Ambridge State of Pennsylvania, is the Father of the deceased

United States, with other relevant evidence, was duly considered;

Whereupon, this Summary Court-Martial finds that, under the provisions of

A.W. 112, Joseph F. Orlor, Sr. of
(Name of person found entitled)

160 Maplewood Avenue, Ambridge State of
(Number, Street or Avenue) (City, Town or Village)

Pennsylvania, is the Father of the
(Relationship or Capacity)

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

(Signature of Summary Court Officer)

W. F. HEHMAN, Major, Q. M. C.
(Name, Rank, Organization)
SUMMARY COURT MARTIAL



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

(S-2-20-45)
JRM:NM:cly
January 20, 1945

IN REPLY REFER TO: 171,529 M

Mr. Joseph F. Orler, Sr.
160 Maplewood Avenue
Ambridge, Pennsylvania

Dear Mr. Orler:

Reference is made to our letter of November 2, 1944, reporting shipment of personal effects of your son, Private Joseph F. Orler, Jr..

If you have received these effects, I will appreciate your acknowledging delivery in accordance with the above-mentioned letter. Should that communication have been misplaced, you may receipt for the property by signing in the space provided below and returning one copy of this letter.

In the event the property has not been received, please so advise, and tracer action will be instituted by this Bureau.

Although I prefer to have your acknowledgment, unless we hear from you within a month from this date, I shall assume that satisfactory delivery was made and that no further action on our part is necessary.

For your convenience in replying, there is enclosed an addressed envelope which needs no postage.

Yours very truly,

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

1 Incl--Envelope

Receipt acknowledged:

Signature

Date



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

(S-12-2-144)
JRM:NM:ct
November 2, 1944

171529 M

IN REPLY REFER TO: _____

Mr. Joseph F. Orler, Sr.
160 Maplewood Avenue
Ambridge, Pennsylvania

Dear Mr. Orler:

The Army Effects Bureau has received from overseas some personal effects of your son, Private Joseph F. Orler, Jr.

These effects, consisting of a ring, an identification bracelet, and two insignia, are being forwarded and should reach you in the near future.

When delivery has been made, I shall appreciate your acknowledging receipt by signing one copy of this letter in the space provided, and returning that copy to this Bureau. For your convenience, there is inclosed an addressed envelope which needs no postage.

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

Yours very truly,

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

1 Incl—Envelope

Receipt acknowledged:

Joseph F. Orler, Sr.

Date

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

File
4

Ship To: Mr. Joseph F. Orler, Sr.

160 Maplewood Avenue

Effects Of

Name Pvt. Joseph F. Orler, Jr. Ambridge, Pennsylvania

ASN 13131556

Case No. 171529 D

Wt.

FRANKED

Ship Via _____ G B/L No. _____

Date 2 November 1944
JRM:NM:ct

W. Mc Mission
For Effects Quartermaster

PACKAGES SHIPPED

1 pkg

TOTAL *1* WT. _____

Franked
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____
Date Shipped NOV 4 1944

NOV 3 1944

REMARKS: Receipt letter mailed

NOV 6 1944

AJ
Shipping Clerk

REMARKS:

No information

Rechecked

ATTACHMENTS:

Inventory of effects *←*

No Correspondence

~~NO CORRESPONDENCE~~

~~SHORTAGE ON REVERSE~~

C.A.T. Not available

~~G.I. ON REVERSE~~

AS

STORAGE)
SPACE)

2262

SAFE STORAGE _____
VAULT STORAGE _____

WEIGHT _____
SHIPPED _____

JCM

Inventoried by:

Beard-

Packed by:

M. Becker

NOV 4 1944

OCT 31 1944

←

HW

File
W

INVENTORY OF EFFECTS

The following listed effects
were found on Pvt
(rank,

Orler, Joseph F. 13131556
(name, (..SN)

83rd Div. 2 July 1944
(Orgn) (Date Died,

buried at St Mere Eglise#2

and effects forwarded to effects div.

- ✓ insignia
- ✓ bracelet
- ✓ ring

Joseph F. Orler

#171529 C

JRM:VC:okm
October 9, 1944

Mr. Joseph F. Orler, Sr.
160 Maplewood Avenue
Ambridge, Pennsylvania

Dear Mr. Orler:

The Army Effects Bureau has received Form
14, War Department Claim For Amounts Due Deceased
Personnel.

It is thought that perhaps this claim was
missent to us and we are, therefore, returning it to
you.

Yours very truly,

B. B. FRIESS
Administrative Assistant
Army Effects Bureau

1 Incl.
Form 14

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.

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

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