Graves Registration
Form No. 1
(Revised 1 Sept. 1943)

RESTRICTED

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

14897

1 July 1944
Date

10-11-44

Schuvie	Victor	F.	Tec 5	37004664
Last Name	First	Initial	Rank	Serial No.

~~Unknown~~ 330 Inf. Regt — Unit

83rd Div — Organization

700

France	30 June 1944	KIA
Place of Death	Date of Death	Cause of Death
1 July 1944	Blosville	France
Time and Date of Burial	Name of Cemetery	Name or Coordinates of Location

25	2	E	Peg
Grave Number	Row Number	Plot Number	Type of Marker

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

If No Identification Tags
How were remains identified?

700

What means of identification were buried with the body?

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

Who is buried on:

Deceased's Right:	Koontz, Frank P.	35143237	Pvt	90th Div	26
	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	Busa, Frank A.	16068694	Unknown	82nd A/B Div	24
	Name	Serial No.	Rank	Organization	Grave No.

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

VICTOR F SCHUVIE
37004664 T42 43 O
PETER SCHUVIE
234 E. 12TH ST.
HAYS KAN. C

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

Emergency Addressee Peter Schuvie
Name

234 E. 12th St., Hays, Kansas
Address

Religion Catholic

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

NONE

Filed Date
NOV 8 1944

Signature of Officer or other person reporting burial

Dale C. Sherwood

DALE C. SHERWOOD Verified by G.R.S. Officer
1st. Lt., QMC

EQ. SOR. 22/9/43. 380M/8/15219

Inc # 83

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		Right Hand
4		4
3		3
2		2
1		1
Thumb		Thumb

TOOTH CHART

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

Indicate: missing natural teeth by X; crowns by O; fillings by □; Bridges by ⊂ linking anchor teeth; replacements by artificial teeth $\overline{X}$

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.

V LH

amB

1

Interred 14 Februa 1949
E-16-33 USMC. St Laurent
C.H. HIEMSTRA
1/LT Inf, interring Officer

DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED	DIRECTIVE NUMBER	DATE		
	3508 04451	15 DAY	10 MONTH	48 YEAR

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
SCHUVIE VICTOR F	37004664	TEC5	1	1	2

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS	
BLOSVILLE FRANCE	E	2	25	3505 CODE	80 DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
ST. LAURENT, FRANCE	MR. PETE SCHUVIE (FATHER) 234 EAST 12TH STREET HAYS, KANSAS Flag sent 11 MAR 1949

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISTINTERRED
SCHUVIE VICTOR F	37004664	T/5		16 December 1947

IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY
[X] REMAINS [X] MARKER	USAGF	C	R.W. GANSEL, 1 LT. QMC. NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
UNIFORM	ADV. DECOMPOSITION.

OTHER MEANS OF IDENTIFICATION

NONE

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

NONE

REMAINS PREPARED AND PLACED IN CASKET

DATE 30 January 1948 BY H.F. PERGANDE

CASKET SEALED BY	EMBALMER (*Signature*)
H.F. PERGANDE	

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
DATE 30 Jan 48 BY H.B. RYDER	CHARLES J. MISSINGMAN, MORGUE SUPV.

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

CHARLES J. MISSINGMAN, MORGUE, SUPV.
SIGNATURE OF AGRS INSPECTOR

SIGNATURES AND SPECIAL INSTRUCTIONS

I certify that the entries on this form are true copies of the entries on Copy No. 4 of this Disinterment Directive which contains the signatures of persons whose names are typed hereon.

FILE
13 MAY 1949
REPATRIATION BRANCH MEM. DIV.

FINAL LETTER SENT 9 MAY 1949

133

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM		TO	
ISMC BLOSVILLE		CASKETING POINT A, CHERBPORG.	
D OF CONVEYANCE		NAME OF CONVOYER	
TRUCK		SGT. AGOSTINO	
GNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
W.T. DAILEY, CAPT. QMC	26 Jan48	JOHN PALYOK, 1 LT. FA	26 Jan48

2. SHIPPED

FROM		TO	
CASKETING POINT A, CHERBOURG		CASKETING POINT B ST LAURENT	
IND OF CONVEYANCE		NAME OF CONVOYER	
TRUCK		PFC. SPACH	
GNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
JOHN PALYOK, 1 LT. FA	2 Feb 48	D.A. MAC KENZIE, CAPT. INF	2 Feb48

3. SHIPPED

FROM		TO	
IND OF CONVEYANCE		NAME OF CONVOYER	
GNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

FEB 3 12 14 PM '48 FEDERAL RECORDS BRANCH

4. SHIPPED

FROM		TO	
IND OF CONVEYANCE		NAME OF CONVOYER	
IGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

5. SHIPPED

FROM		TO	
IND OF CONVEYANCE		NAME OF CONVOYER	
IGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

FROM		TO	
IND OF CONVEYANCE		NAME OF CONVOYER	
IGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

7. SHIPPED

FROM		TO	
IND OF CONVEYANCE		NAME OF CONVOYER	
IGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

WAR DEPARTMENT

THE ADJUTANT GENERAL'S OFFICE

WASHINGTON 25, D. C.

REPORT OF DEATH

DATE 7 ~~XXX~~ Aug 1944

mfa

FULL NAME	ARMY SERIAL NUMBER	GRADE
Schuvie, Victor F.	37 004 664	T/5
HOME ADDRESS Hays, Kansas ~~XXXXX, XXXXXX~~	ARM OR SERVICE Inf	DATE OF BIRTH 23 Dec 1910
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action	DATE OF DEATH 30 Jun 1944
STATION OF DECEASED European Area	DATE OF ENTRY ON CURRENT ACTIVE SERVICE 18 Mar 1941	LENGTH OF SERVICE FOR PAY PURPOSES YEARS 3 MONTHS 3 DAYS 13

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)

Mr. Peter J. Schuvie (Father) 234 E. ~~125~~ 12th St., Hays, Kansas

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)

Mr. Peter J. Schuvie (Father) same as above
Mrs. Ann Schuvie (Mother) " "

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

ADDITIONAL DATA AND/OR STATEMENT

A

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

[X] BATTLE

[ ] NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:

R H Williamson

ADJUTANT GENERAL

WD. AGO. FORM NO. 52-1, 29 MAY 1944

WAR DEPARTMENT

THE ADJUTANT GENERAL'S OFFICE

WASHINGTON 25, D. C.

167033

REPORT OF DEATH

DATE 7 ~~MAR~~ Aug 1944

mfa

FULL NAME	ARMY SERIAL NUMBER	GRADE
Schuvie, Victor F.	37 004 664	T/5
HOME ADDRESS	**ARM OR SERVICE**	**DATE OF BIRTH**
Hays, Kansas ~~HAYS, KANSAS~~	Inf	23 Dec 1910

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
European Area	Killed in action	30 Jun 1944

STATION OF DECEASED	DATE OF ENTRY ON CURRENT ACTIVE SERVICE	LENGTH OF SERVICE FOR PAY PURPOSES		
		YEARS	MONTHS	DAYS
European Area	18 Mar 1941	3	3	13

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)

Mr. Peter J. Schuvie (Father) 234 E. ~~125~~ 12th St., Hays, Kansas

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)

Mr. Peter J. Schuvie (Father) same as above
Mrs. Ann Schuvie (Mother) " "

ARMY EFFECTS BUREAU RECEIVED AUG 12 1944

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

ADDITIONAL DATA AND/OR STATEMENT

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

[X] BATTLE

[ ] NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:

R H Williamson

ADJUTANT GENERAL

WD, AGO, FORM NO. 52-1, 29 MAY 1944

REQUEST FOR DISPOSITION OF REMAINS

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

Tec Victor F. Schuvie, 37 004 664 (ARC)
Plot E, Row 2, Grave 25,
United States Military Cemetery
Blosville, France

DATE:

18 March 1948

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

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

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

PART I

I, Pete Schuvie (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.)*

DD PROC 10/28/48 AB
19 Sept 48
Mathis

16—50411-1

OQMG FORM 14 NOV 1946 345 MILITARY

PAGE 1

19 JUL 1948

ADDITIONAL REMARKS AND INSTRUCTIONS

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

RECEIVED
JUN 17 1948
FAMILY CORRES. BR.

U. S. GOVERNMENT PRINTING OFFICE

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 (*Nearest railroad passenger station*)	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 (*Nearest railroad passenger station*)	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.

Pete Schuvie
(SIGNATURE OF NEXT OF KIN)

234 East 12 th St.--
(STREET AND NUMBER)

Pete Schuvie
(NAME PRINTED OR TYPED)

Hays, Kansas
(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 14 day of June, 1948, at city (or town) of Hays, county of Ellis, and State (or Territory or District) of June 14, 1948 / Kans

W M Stanton
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

Notary Public
(OFFICIAL TITLE)

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

Com. Exp 4-29-49

16—50411-1

PART II—RELINQUISHMENT OF DISPOSITION AUTHORITY

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

I, THE _____ (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.

(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)

THE AMERICAN NATIONAL RED CROSS
MIDWESTERN AREA
1709 WASHINGTON AVE., ST. LOUIS 3, MO.

May 3, 1948

Memorial Division
Department of the Army
Office of the Quartermaster General
Washington 25, D.C.

Re: RR Br: QMGMR 293
SCHUVIE, Victor F., Tec. 5
37 004 664
Plot E, Row 2, Grave 25
U. S. Military Cemetery
Blosville, France

Gentlemen:

This is an interim report in connection with your request of 18 March 1948 regarding disposition of the remains of Victor F. Schuvie.

Our chapter Home Service worker reports the father, Peter J. Schuvie, 234 E. 12th Street, Hays, Kansas, has not yet reached a decision concerning the final burial of the body of his son.

We will write you again as soon as we have further information.

Sincerely yours,

Janet Neel

(Miss) Janet Neel
Director, Home Service
Midwestern Area

file now
7 May 48
5 copy
2 correspondence

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

In Reply Refer To RR Br: QMGMR 293 Schuvie, Victor F., Tec 5, 37 004 664
Plot E, Row 2, Grave 25
United States Military Cemetery
Blosville, France

18 March 1948

P R I O R I T Y

Miss Janet Neal, Home Service Director
Midwestern Area, American Red Cross
1709 Washington Avenue
Saint Louis 3, Missouri

Dear Miss Neal:

The Next of Kin of the above captioned deceased father (relationship)
Mr. Peter J. Schuvie, (name) 234 East 12th Street, (address) Hays, Kansas
has failed to return a Form 345 indicating disposition instructions for the remains.

It is respectfully requested that the attached OQMG Form 345 be properly accomplished by the Next of Kin and legal documents obtained through assistance of your representative if appropriate, be furnished this office. In the event you are unable to secure disposition instructions from the Next of Kin, it is further requested that a statement of the action taken by your representative be furnished this office for use as a basis for final disposition of remains of the decedent.

It is recommended that in contact with the Next of Kin mentioned above, they first be queried as to whether or not they have submitted the appropriate form, as it may have been mailed to this office since receipt by you of this request.

Sincerely yours,

Indls

JOHN O. HYATT
Colonel, QMC
Memorial Division

ve

MAR 18 1948 AM '48
O. Q. M. G.
U. S. RECORDS BRANCH

ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT
601 Hardesty Avenue
Kansas City 1, Missouri

Case No. 167,033 hjb

Date 12 January 1945

SUBJECT: Report of transactions in disposing of the effects of

Victor F. Schuvie (Name of deceased), 37004664 (Army Serial Number) late a

T/5 (Grade), Infantry (Organization, Army or Service) who died

on the 30th day of June, 19 44, ~~XXX~~ in 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 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 inclosed receipt none, Incl. _____)

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

FINDING

Before a Summary Court-Martial which convened at Kansas City, Missouri, on 9 January 1945, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application or affidavit of Mr. Peter J. Schuvie 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, Mr. Peter J. Schuvie (Name of person found entitled) of 234 E. 12th Street (Number, Street or Avenue), Hays (City, Town or Village) State of Kansas, is the father (Relationship or Capacity) of the 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.

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mr. Peter J. Schuvie
234 E. 12th Street
Hays, Kansas

Effects of:
Name T/5 Victor F. Schuvie

ASN 37004664

Case No. 167,033

Wt.

DATE 12 January 1945
JRM:VM:hjb

C Barber
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.

JAN 16 1945

1 pkg

REMARKS:

Franked _____
Est. Exp. Chgs. FRANKED
Est. Frt. Chgs. _____
No. of Packages 1

JAN 20 1945

JAN 13 1945

Shipping Clerk

Eff. QM Form 14 (26 Dec. 44)

Circular No. 90, Hq First Army, 9 July 1944 (cont'd)

ANNEX A

SPECIMEN INVENTORY FORM*

18 July 1944
(date)

SUBJECT: Inventory of Personal Effects of:

Schuvie	Victor	F	T/5	37004664
LAST NAME	FIRST NAME	MI	RANK	ASN

TO: Effects uartermaster, Communication Zone, APO 83
US Army

The above named individual of Co. "B" 330th Inf. APO 83 C/O Postmaster
(unit)

New York, New York was reported KIA

about 8 July 1944
(date)

Designated Benaficiary if information readily accessible.

Peter John Schuvie, (father) 234 E. 12 th St. Hays , Kans.

INVENTORY OF EFFECTS

1 Ket shaving
1 comb
2 insignias collar
1 kit religious, cross medal etc.

Circular No. 90, Hq First Army, 9 July 1944 (cont'd)

ANNEX A (cont'd)

Money in the amount of _____ has been turned into

_____. Form WD FD No. 38
(Name of Finance Officer and symbol number)

enclosed.

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 _____ 1944
(date)

William L Burnell

Name WILLIAM L BURNELL

Rank & ASN Capt., O-414568

Org. 330th Infantry

Any additional pertinent information:

NONE

BOX NUMBER Pal 8	ORIGINAL NUMBER OF PACKAGES	P O W ABANDONED
TALLY NUMBER 5749	INVENTORY DATE 1-1-45	CASE NUMBER 167033

EFFECTS OF Victor F. Schuvie

RANK T/5

A.S.N. 37004664 ORGANIZATION Co B. 330 Inf.

PACKAGE DESCRIPTION

II 1 pkg.

CLOTHING		PERSONAL ITEMS		CONTAINERS	
	BELT		BRACELET, IDENTIFICATION		BAGS, CLOTH
	BELT, MONEY (NO MONEY)		BRUSHES		BAGS, TRAVEL
	CLOTH, WASH		CAMERAS		BILLFOLD (NO MONEY)
	COATS		GLASSES		CASE,
	FOOTWEAR, PR.		KNIVES		FOOTLOCKER
	GLOVES, PR.		LIGHTERS		KIT, SEWING
	HANDKERCHIEFS	X	MISC. INSIGNIA	1	KIT, TOILET
	HEADWEAR		MISC. ITEMS		KIT, WRITING
	JACKETS		PEN, FOUNTAIN		PAPERS AND MISC.
	OVERCOATS		PENCIL, MECHANICAL		BOOKS
	SCARFS		PIPES		BOOKS, ADDRESS
	SHIRTS	X	RELIGIOUS ARTICLES		BOOKS, NOTE
	SOCKS, PR.		RIBBONS, DECORATION		BOOKS, PILOT LOG
	TIES		RINGS		DIARY (REMOVED FOR DURATION)
	TOWELS		TOBACCO		FILMS
	TROUSERS, PR.		TOILET ARTICLES		LETTERS
	TRUNKS, PR.		WATCH		PAPERS, PERSONAL
	UNDERWEAR		WINGS		PHOTOS
					SHOE SHINE ARTICLES
					SHORT SNORTER
					SOUVENIRS
					SOUVENIR MONEY
					STATIONERY
					TESTAMENTS
					U.S. MONEY (AMOUNT)

file JB

AK

REMARKS:

ATTACHMENTS: FORM #54 | FORM #100

Inventory

Rechecked
No correspondence
No Information

A.J.

C.A.T. Peter John Schuvie
234 East 12 St
Hays, Kansas

JAN 5 1945

WEIGHT

GI REMOVED

SHORTAGE ON REVERSE

IDENT. TAGS REMOVED

DIARY REMOVED

WAREHOUSE SPACE 1022

STORED BY

DATE SHIPPED JAN 16 1945

LOCKED STORAGE

INVENTORIED BY B MacLaird

LAUNDRY REMOVED

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

SAVE
USE AT YOUR CONSERVATION TASK

VICTORY
BUY UNITED STATES WAR BONDS AND STAMPS

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

IN REPLY REFER TO: ~~#167033~~ Mc

JRM:VM:mam
January 13, 1945

Mr. Peter J. Schuvie
234 E. 12th Street
Hays, Kansas

Dear Mr. Schuvie:

The Army Effects Bureau has received from overseas some personal effects of your son, Technician Fifth Grade Victor F. Schuvie.

These effects are being forwarded to you in one package.

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

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

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

Yours very truly,

E. L. RICHTER
Administrative Assistant
Army Effects Bureau

SPQYG 293
Schuvie, Victor F.

13 March 1946

Mr. Peter J. Schuvie
234 E. 12th Street
Hays, Kansas

Dear Mr. Schuvie:

The War Department is most desirous that you be furnished the burial location of your son, the late Technician Fifth Grade Victor F. Schuvie, A.S.N. 37 004 664.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery, Blosville, France, plot E, row 2, grave 25.

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

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

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

as

LMS

T/5 Victor F. Schuvie, 37 004 664
Plot E, Row 2, Grave 25,
United States Military Cemetery
Blosville, France

9 September 1947

Mr. Peter J. Schuvie
234 East 12th Street
Hays, Kansas

Dear Mr. Schuvie:

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,

Incls.

rj

THOMAS B. LARKIN
Major General
The Quartermaster General

THE AMERICAN NATIONAL RED CROSS

MIDWESTERN AREA
1709 WASHINGTON AVE., ST. LOUIS 3, MO.

April 5, 1948

Ltr. 3-18-48

Repatriation Records Branch
Disinterment Locator Section
Office of the Quartermaster General
Department of the Army
Washington, D. C.

Re: RR Br: QMGMR 293
SCHUVIE, Victor F.
37004664
Plot E, Row 2, Grave 25
US Military Cemetery
Blosville, France

Gentlemen:

Your letter dated March 18, 1948, indicated Mr. Peter J. Schuvie, father, 234 East 12th Street, Hays, Kansas, had failed to return Form 345 indicating disposition instructions for his son's remains.

A worker from the Hays, Kansas, chapter talked with the parents who stated they had been unable to come to any decision regarding the return of their son's remains at the present time. As soon as a decision has been reached, they will complete the form, and we will notify you of the date on which it is mailed.

Sincerely yours,

Janet Neel
by LRC
(Miss) Janet Neel
Director, Home Service

Dictated 4/2

File NAN
a. Kennedy
201-mc62
7 April 48

9 May 1949

Tec 5 Victor F. Schuvie, ASN 37 004 664
Plot E, Row 16, Grave 33
Headstone: Cross
St. Laurent (France) U. S. Military Cemetery

Mr. Pete Schuvie
234 East 12th Street
Hays, Kansas

Dear Mr. Schuvie:

This is to inform you that the remains of your loved one have been permanently interred, as recorded above, side by side with com rades 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.

MAY 9 3 32 PM '49
O. Q. M. G.
MAIL & RECORDS BRANCH

Sincerely yours,

H. FELDMAN
Major General
The Quartermaster General

lhc