

PLOTTED BY WIMBERLY

1
USMC HAMM, LUX BOURG
PLOT E ROW 12 GRAVE 13
Reburied 19 Nov. 1948

Buried on: Rig C.J. SHELTER
0-446476

DISINTERMENT DIRECTIVE

Left: E. THOMPSON
34961101

Verified by: *W.R. Payson Lt*

SECTION A — GRS Officer
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

6020 06621

DATE

15 03 48
DAY MONTH YEAR

NAME

SAHLI CARL R

SERIAL NUMBER

35588131

RANK

S SG

ARM

1

DATE OF DEATH

DAY MONTH YEAR

CEMETERY

HAMM - LUXEMBOURG

DISPOSITION OF REMAINS

1

6001 80
CODE DIST. PT.

PLOT ROW GRAVE COUNTRY

L 5 112 LUXEMBOURG

CAUSE OF DEATH

1

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

HAMM, LUXEMBOURG

NAME AND ADDRESS OF NEXT OF KIN

MRS. LAURA LUCILLE SAHLI (WIDOW)

NORTH LIMA, OHIO

(FLAG SENT)

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

CARL R. SAHLI

SERIAL NUMBER

35588131

RANK

S SG

DATE OF DEATH

DATE DISTINTERRED

17 MAY 48

IDENTIFICATION TAG ON

ORGANIZATION

USAGF

RELIGION

P

IDENTIFICATION VERIFIED BY

CHARLES L. WALLS

CAPT QMC

NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

IN UNIFORM

CONDITION OF REMAINS ADVANCED DECOMPOSITION

FRACTURED SKULL - BODY COMPLETE

OTHER MEANS OF IDENTIFICATION

NONE

MINOR DISCREPANCIES 1

NONE

REMAINS PREPARED AND PLACED IN CASKET TRANSFER CASE

DATE 18 MAY 48

BY

RODERICK JAMES MURRAY

IDENT. TAG

CASKET SEALED BY

EMERSON W. WALKER

EMBALMER (Signature)

EMERSON W WALKER

CASKET BOXED AND MARKED

J. ANTONELLI

DATE 19 MAY 48 BY CLERK

SHIPPING ADDRESS VERIFIED BY

VERIFIED BY : ROGER E LEWIS CAPT CAV

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

FRITZ J. TOLLEMAN

SIGNATURE OF GRS INSPECTOR

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

NAT FILE
RECORDS ANNOTATED
DATE 14 MAR 1949
NAME R & R-BR

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

RECEIVED
DVL
FEB 19 1965
LITE
MIL

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

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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

RECEIVED BY MINBERG

14 February 1949

(S/Sgt. Carl R. Sahli, ASN 35 588 131
Plot E, Row 12, Grave 13
Headstone: Cross
Hamm U. S. Military Cemetery

Mrs. Laura Lucille Sahli
North Lima, Ohio

Dear Mrs. Sahli:

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,

THOMAS B. LARKIN
Major General
The Quartermaster General

oeY

FEB 15 5 53 PM '49
D. O. M. C.
MAIL & RECORDS BRANCH

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

E/Sgt. Carl R. Sahli, 35 588 131
 Plot L, Row 5, Grave 112,
 United States Military Cemetery
 Hamm, Luxembourg

31 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, Laura Lucille Sahli
 (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. Hamm, Luxembourg
☐ 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 _____, THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT _____
 (FOREIGN COUNTRY) (LOCATION OF CEMETERY SELECTED)

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

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

☐ YES ☐ NO

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

NONE

DD PROC 3/12/48
 coded 3/5/48 Mitchell

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.

Mrs. Laura Lucille Sahli North Lima Ohio
 (SIGNATURE OF NEXT OF KIN) (STREET AND NUMBER)
MRS. LAURA LUCILLE SAHLI NORTH LIMA OHIO
 (NAME PRINTED OR TYPED) (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 15 day of Oct,
 1947, at city (or town) of North Lima, county of Washington, and State (or Territory or
 District) of Ohio

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

(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

(OFFICIAL TITLE)

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 I 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)

ADDITIONAL REMARKS AND INSTRUCTIO

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



RECORDS BRANCH
OCT 17 6 02 PM '47
MEMORIAL DIVISION

S/Sgt. Carl R. Sahli, 35 588 131
Plot L, Row 5, Grave 112,
United States Military Cemetery
Bamm, Luxembourg

31 July 1947

Mrs. Laura L. Sahli
Rural Delivery #1
North Lima, Ohio

Dear Mrs. Sahli:

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.

R

teh

MAIL ROOM
JUL 31 1947
17 PM '47

my

QMGYG 293
Sahli, Carl R.
S.N. 35 588 131

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

15 August 1946

Mme Vve Jacob Streff
Rue de Strassen 4
Merl, Luxembourg

Dear Mme Streff:

Your letter addressed to the American Graves Registration Service Command, has been referred to this office for reply relative to the home address of the late Staff Sergeant Carl R. Sahli.

Your letter has been forwarded to the widow of the late Staff Sergeant Sahli for whatever action she may deem necessary to take regarding your request referred to in your letter.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

JAMES L. PRENN
Major, QMC
Assistant

JLP

vja

AUG 15 1 22 PM '46

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

RECORDS BRANCH
AUG 15 1946
12 13 PM '46

4095 Streff, Vve Jacob
314.6 Luxembourg

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN THEATER AREA
APO 887, US ARMY

WHF/GSA/mk

293
AGRRE (SAHLI, Carl R.)

9 July 1946

SUBJECT: Transmittal of Request for Home Address

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

1. Attached hereto is a letter requesting the address of the next-of-kin of S/Sgt. SAHLI, Carl R. 35588131, now buried at Hamm, L-5-112.

2. The inquirer has been informed of this reference.

FOR THE COMMANDING OFFICER:

Don B. Mohler
DON B. MOHLER
Major, QMC
Act Asst Adj Gen

Incl. a/s

21	22	23	24	1	2	3
20	-OUT-					4
19	4332					5
18	1 JUL 1946					6
17	AGR					7
16						8
15	14	13	12	11	10	9

RECORDED
INDEXED
JUL 11 1946
JUL 11 1946
JUL 11 1946

RECEIVED
U.S. DEPARTMENT OF JUSTICE
WASHINGTON, D.C. 20535

MEMORANDUM

July 23, 1946

AGREEMENT (SAB), Carl H.

SUBJECT: Remission of request for more money

TO : Commissioner General, Washington D.C.

1. Attached hereto is a letter requesting the return of the next-
of-kin of Capt. Carl H. Sabers, now located at home, 1-2-112.

2. The request has been returned of this reference.

FOR THE COMMANDING OFFICER:

Don E. Wheeler
Major, USA
Adj. Asst. Adj. Gen.

MEMORIAL DIVISION
JUL 23 11 36 AM '46
REGISTRATION AND
RECORDS BRANCH



American Graves Registration

Service Command
U.S.F.E.T. Rear
A.P.O. 887
U.S. Army

Since some weeks I have adopted the grave of an American Soldier.

Sahli, Carl R.
Cpl. 35588131

Who is buried on the American Military Cemetery Luxembourg Hamm. If it were possible to get from your registration the home address of the precedent soldier I would thank you were much.

Mme Vve Jacob-Streff
rue de Strassen 4
Merl, Luxembourg

c

o

p

y

QMGYG 293
Sahli, Carl R.
S.N. 35 588 131

ml
Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

15 August 1946

Mrs. Laura L. Sahli
Route #1
North Lima, Ohio

Dear Mrs. Sahli:

The attached letter in the enclosed envelope has been received in this office.

The communication is self-explanatory. Nothing is known by this office as to the writer and, accordingly, it is not felt that your name and address as the widow of the late Staff Sergeant Carl R. Sahli should be given unless you desire it.

While it is possible that the letter has been written in perfectly good faith, there have been some cases in other localities where similar persons have imposed upon or become a nuisance to the next of kin. Therefore, as indicated, the letter is being forwarded to you for such action as you desire.

The official Report of Burial discloses that the remains of your husband were interred in Plot L, Row 5, Grave 112, in the United States Military Cemetery Hamm, Luxembourg, located two and one half miles east of the city of Luxembourg.

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

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

JAMES L. PRENN
Major, QMC
Assistant

1 Incl: 1
ltr from
Mme Vve Jacob Streff

vja

43

Aug 15 1 22 PM '46

MAIL RECORDS BRANCH
O.Q.M.G.

MEMORIAL DIVISION

Aug 15 12 13 PM '46

MAIL RECORDS BRANCH

JLP

RESTRICTED

REPORT OF BURIAL

TM 10-630 AND AR 30-115

15 January 1945
Date

SAHLI

Carl

R

Cpl

35588131

Last Name

First

Initial

Rank

Serial No.

134th Inf

35th Div

Unit

Organization

Luttrebois, Belg Belgium

Unk (Estimated 4 January 1945)

SFW head & chest

Place of Death

Date of Death

Cause of Death

1700 15 Jan 1945

U. S. Military Cemetery

Hamm, Luxembourg

Time and Date of Burial

Name of Cemetery

Name or Coordinates of Location

112

5

L

Cross

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?

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:

STONE

36974306

Unknown 134th Inf 35th Div 111

Name

Serial No.

Rank

Organization

Grave No.

Deceased's Left:

McCOY

34612867

Unknown 12th Inf 4th Div 113

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.

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

Emergency Addressee

Laura Sahli

Name

Rt #1 North Lima, Ohio

Address

Religion

Protestant

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

Signature of Officer or other person reporting burial

For the Commanding Officer:

CARL D. THUAX

1st Lt QMC

Verified by G.R.S. Officer

609th QM Gr Reg Co

RESTRICTED

Incl 18

NOV 24 1945

REPORT OF BURIAL 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

2

1

Thumb

Right Hand

2

1

Thumb

TOOTH CHART

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.

Decedent's Left															
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
Upper															
Lower															

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

Characteristics:

Other Data:

RESTRICTED REPORT OF BURIAL

TM 10-630 AND AR 20-15

73818
15 January 1945
Date

SAHLI

Last Name

Carl

First

Initial

Cpl

Rank

35588131

Serial No.

134th Inf

Unit

35th Div

Organization

Luttrebois, Belg Belgium

Unk (Estimated)

4 January 1945

SFW head & chest

Place of Death

Date of Death

Cause of Death

1700 15 Jan 1945

U. S. Military Cemetery

Hamm, Luxembourg

Time and Date of Burial

Name of Cemetery

Name or Coordinates of Location

112

Grave Number

5

Row Number

L

Plot Number

Cross

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?

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:

STONE

Name

36974306

Serial No.

Unknown

Rank

134th Inf 35th Div 111

Organization

Grave No.

Deceased's Left:

McCOY

Name

34612867

Serial No.

Unknown

Rank

12th Inf 4th Div 113

Organization

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:

CARL R SAHLI

35588131 T43 44 A

Emergency Addressee

Laura Sahli

Name

Rt #1 North Lima, Ohio

Address

Religion

Protestant

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

Signature of Officer or other person reporting burial
For the Commanding Officer:

CARL D. TRUAX

1st Lt

QMC

Verified by G.R.S. Officer

609th QM Gr Reg Co

RESTRICTED

Line # 80

File 11-45

REPORT OF BURIAL

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

2

1

Thumb

Right Hand

2

1

Thumb

TOOTH CHART

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.

Deceased's Right								Deceased's Left							
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
Upper								Lower							

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

Characteristics:

Other Data:

AG P BR HQ SOS

122560

SPQYO 293

Shali, Carl R.

293 Shali, Carl R.

1 May 1946

Mrs. Laura L. Shali
RD #1
North Lima, Ohio

Dear Mrs. Shali:

The War Department is most desirous that you be furnished information regarding the burial location of your husband, the late Staff Sergeant, Carl R. Shali, A.S.W. 35 588 131.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery, Hamm, Luxembourg, plot L, row 5, grave 112.

This cemetery is located approximately two miles east of the city of Luxembourg, 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 comply, at Government expense, with your wishes regarding final interment, here or abroad, of the remains of your husband. At a later date, this office will, without any action on your part, provide you with full information and solicit your detailed desires.

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

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

lbt

12 03 PM '46
O.C.H. 81
MAIL & RECORDS BRANCH

LMS

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

REPORT OF DEATH **ESS/4624**

DATE **5 February 1945**

FULL NAME Sahli, Carl R.		ARMY SERIAL NUMBER 35 588 131	GRADE S/Set						
HOME ADDRESS North Lima, Ohio		ARM OR SERVICE INF	DATE OF BIRTH 1 Jan 1922						
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH 9 January 1945						
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 27 Oct 1942	LENGTH OF SERVICE FOR PAY PURPOSES <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">YEARS</td> <td style="width: 33%;">MONTHS</td> <td style="width: 33%;">DAYS</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	YEARS	MONTHS	DAYS			
YEARS	MONTHS	DAYS							
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Laura L. Sahli, wife, RD #1, North Lima, Ohio									
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Laura L. Sahli, wife, same as above Mrs. Olive H. Sahli, mother, North Lima, Ohio Mr. Arch M. Sahli, father, same as mother's									
INVESTIGATION MADE?		IN LINE OF DUTY	OWN MISCONDUCT						
YES	NO	YES	NO						
WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE	IN FLYING PAY STATUS						
YES	NO	YES	NO						
OTHER PAY STATUS (SPECIFY BELOW)									
YES	NO								

ADDITIONAL DATA AND/OR STATEMENT

☒ BATTLE ☐ NON-BATTLE

Combat Infantryman (Authorization furnished when available)

The individual named in this report of death is held by the War Department to have been in a missing in action status from 5 January 1945 until such absence was terminated on 31 January 1945, when evidence considered sufficient to establish the fact of death on 9 January 1945 was received by the Secretary of War from a Commander in the European Area.

audit

FILE

FEB 8 1945

C.B.

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

BY ORDER OF THE SECRETARY OF WAR,

J. Carl

ADJUTANT GENERAL

m
372,029

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

REPORT OF DEATH **ISS/4624**

DATE **5 February 1945**

FULL NAME Sahli, Carl R.				ARMY SERIAL NUMBER 35 588 131		GRADE S/Sgt	
HOME ADDRESS North Lima, Ohio				ARM OR SERVICE INF		DATE OF BIRTH 1 Jan 1922	
PLACE OF DEATH European Area			CAUSE OF DEATH Killed in action			DATE OF DEATH 9 January 1945	
STATION OF DECEASED European Area				DATE OF ENTRY ON CURRENT ACTIVE SERVICE 27 Oct 1942		LENGTH OF SERVICE FOR PAY PURPOSES	
						YEARS	MONTHS
						DAYS	
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Laura L. Sahli, wife, RD #1, North Lima, Ohio							
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Laura L. Sahli, wife, same as above Mrs. Olive H. Sahli, mother, North Lima, Ohio Mr. Arch M. Sahli, father, same as mother's							
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS	
YES	NO	YES	NO	YES	NO	YES	NO
AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)			
YES	NO	YES	NO	X		X	

ADDITIONAL DATA AND/OR STATEMENT

☒ BATTLE ☐ NON-BATTLE

Combat Infantryman (Authorization furnished when available)

The individual named in this report of death is held by the War Department to have been in a missing in action status from 5 January 1945 until such absence was terminated on 31 January 1945, when evidence considered sufficient to establish the fact of death on 9 January 1945 was received by the Secretary of War from a Commander in the European Area.



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

BY ORDER OF THE SECRETARY OF WAR:

[Signature]

ADJUTANT GENERAL

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

372029

2980

—BATTLE CASUALTY REPORT

NAME		SERIAL NUMBER	GRADE	ARM OR SERVICE	REPORTING THEATRE
SAHLI CARL R		35588131	S SC	INF	ETO
PLACE OF CASUALTY	DATE OF CASUALTY		FLYING OR JUMPING STAT	TYPE OF CASUALTY	SHIPMENT NUMBER
BELGIUM 9	DAY MONTH YEAR	05 JAN 45	V	MIA	015

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 TELEPHONIC 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.

MRS.-MISS—FIRST NAME—MIDDLE INITIAL—LAST NAME		RELATIONSHIP	DATE NOTIFIED
MRS LAURA L SAHLI		WIFE	23 JAN 45
NO. AND NAME OF STREET—CITY—STATE			
R D NUMBER ONE NORTH LIMA OHIO 1a			

REMARKS:

☐

CORRECTED COPY

ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED ☒ FORM 43 ☒ AS 301 REG.					
CASUALTY BRANCH FILE ATTACHED ☒ OR CHAINED 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. S. S. D. ☐ CONF. ☐ M. S. S. ☐ NON-DEL.					
REPORT NOT VERIFIED ☐ NO FORM 43 ☐ NO CAS. BR. FILE ☒ CHECKED BY <i>Edward J. [Signature]</i>					

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

AGCT. AREA	CASUALTY STATUS	ORIGINAL CAS. DATE			MESSAGE NO.	LATEST CAS. DATE			OFFICE AREA	ORIG. FILE	REFERENCE		CORR.	RECK.
		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" ☐ 23 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.

RECEIVED
JAN 27 9 30 AM '45
CASUALTY BRANCH, A.G.O.

372,029

REB:MR:hms
Jul 31, 1945

Mrs. Laura L. Sahli
RFD #1
North Lima, Ohio

Dear Mrs. Sahli:

The Army Effects Bureau has received additional property of your husband, Staff Sergeant Carl R. Sahli, consisting of funds in the amount of \$98.94. A check for this sum is inclosed.

As previously indicated, such property is forwarded for distribution in accordance with the laws of the state of the soldier's legal residence.

Sincerely,

C. B. QUINN
2nd Lt. CMG
Chief, Files Branch

1 Incl
Check

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Laura L. Sahli

RTD #1

North Lima, Ohio

Effects of:

Name S/Sgt Carl R. Sahli

ASN 35588131

Case No. 372,029 D

Wt.

DATE 31 July 1945

RTB:MH:hms

REMARKS:

X Inclose Bureau Check

Acct. No. 126286

Amount \$98.94

Inclose "Valuable" item

Ship "Valuable" item(s)

Remove G.I.

Note discrepancy in

Films removed

Diary removed

Laundry removed

FOR: Effects Quartermaster

ROUTING:

1

Accounting Branch

Warehouse Division

2

Files Branch, Adm. Div.

126286

372029

August 1

45

Laura L. Sahli

98.94

Ninety-Eight and 94/100

REMARKS:

Franked

Est. Exp. Chgs.

Est. Pmt. Chgs.

No. of Packages

Shipping Clerk

Eff. 04 Form 14 (26 Dec 44)

ARMY EFFECTS BUREAU
INVENTORY

JUL 13 1945

L.L.

372,029

CASE NO.

TYPED BY

Ramsey

DATE

6-4-45

STATUS

deceased

NAME

Sahli, Carl R.

A.S.N.

35588131

RANK

Cpl.

ORGANIZATION

Unk

AMOUNT

\$98.94

LIST NO.

126286 ei
ACCOUNT NO.

PAID-Check No. 10749277

F-203

REMARKS

A C C O U N T I N G I N V E N T O R Y

372029
Dilek

SPQDK 314.6

RTB:KD:at
21 July 1945

SUBJECT: Transmittal of Reports of Burial

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

Transmitted herewith QR Forms No. 1, Reports of Burial, of:

Baldrige, Harold D.	36977225	Pvt.	Infantry
Beauchaine, Louis N.	31289639	Pvt.	Infantry
Buchanan, Raymon A.	19004986	Pfc.	Infantry
Davis, Billie B.	34920726	Pvt.	
Dean, Paul	35882732	Pvt.	Infantry
Fallwell, Andre P.	13187017	Pfc.	Infantry
Finn, John E.	31429684	Pvt.	
Finnigan, Leo J.	0-1325486	1st Lt.	Infantry
Fitts, Earl A.	36030701	S/Sgt.	
Gray, Walter H.	34864900	Pvt.	Infantry
Hamm, James W.	33659579	Pfc.	Infantry
Hayes, James R.	34779833	Pvt.	Infantry
Holley, James H.	34949547	Pvt.	
Loulakis, Coatas A.	31266045	Pvt.	
Marines, Niginio F.	37567555	Pvt.	
O'Rourke, Harry J.	39031035		Infantry
Poore, Sam P.	15059565		
Schli, Carl R.	35588131	Cpl.	Infantry
Thudium, Harry M.	36056641	Cpl.	
Whittmore, Watson	38296279	Pfc.	Infantry

FOR THE EFFECTS QUARTERMASTER:

R. T. BROWN
1st Lt., QMC
Chief, Adm. Division

20 Incls.—QR Forms No. 1

372029

RTB:JFH:dt
July 11, 1945

Mrs. Laura L. Sahli
R. F. D. #1
North Lima, Ohio

Dear Mrs. Sahli:

The Army Effects Bureau has received from overseas some personal effects of your husband, Staff Sergeant Carl R. Sahli.

These effects are being forwarded to you in one package.

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

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

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

Yours very truly,

P. L. KOOB
1st Lt., QMC
Officer-in-Charge
SJ Unit

65

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

In Reply Refer To _____

The Army Effects Bureau has received some personal property belonging to

Since our records indicate that he is missing in action, it is desired that some close relative receive this property for safe-keeping pending the return of the owner, or the receipt of additional information. I sincerely hope that he may later be reported safe.

If you will please confirm your address, the property will be forwarded to you at Government expense. At the same time, a receipt will be mailed for your signature.

Your reply may be made at the foot of this letter, if desired, and mailed in the inclosed self-addressed envelope which needs no postage.

Yours very truly,

1 Incl--
Envelope

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Laura L. Sahli

Effects of:
Name **S/Sgt. Carl R. Sahli**

F. F. D. # 1

North Lima, Ohio

ASN **35588131**

Case No. **372029 D**

Wt.

DATE 6 July 1945
GHG:MH:mch

A. Stika
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.

JUL 16 1945

1 pkg

REMARKS:

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

S H
Shipping Clerk

PACKAGE DESCRIPTION

ARMY EFFECTS BUREAU INVENTORY

DECEASED

MISSING

P.O.W.

ABANDONED

TALLY

NO. 8895

INV.

DATE 26 June 45

ORIG. NO. 1

OF PKGS.

BOX

NO. 16

SHEET

OF 1 SHEETS

ORGANIZATION

134 sub.

35. Sum.

NAME

CARL R SAHLI

A.S.N.

35588131

RANK

Cpl.

Belt

~~BELT, MONEY (NO MONEY)~~

Cloth, wash

Coats

Footwear, Pr.

Gloves, Pr.

Handkerchiefs

Headwear

Jackets

Overcoats

Scarfs

Shirts

Socks, Pr.

Ties

Towels

Trousers, Pr.

Trunks, Pr.

Underwear

TOWELS & WASPOLOTHS

CLOTHING

BRACELET IDENT.

Brushes

CAMERAS

Glasses

Knives

Lighters

MISC.

Pen, Fountain

Pencil, mechanical

Pipes

RELIGIOUS ARTICLES

RIBBONS, DECORATION

Rings

Tobacco

Toilet articles

WATCH

KINGS

BAGS, CLOTH OR TRAVEL

~~BILLFOLD, (NO MONEY)~~

Case

Footlocker

KIT, SEW, TLT, OR WRITING

BOOKS

Books, Address

Books, Pilot Log

DIARY (REMOVED FOR DUK)

FILMS

Letters

Papers, Personal

Photos

Shoe shine articles

SHORT SHORTER

SOUVENIRS

SOUVENIR MONEY

Stationery

TESTAMENTS

U.S. MONEY (AMOUNT)

REMARKS

Bank
Laura Sahli
At #1. North
Lima Ohio

ATTACHMENTS

FORM #54

FORM #100

1 S.P. label
1 Report at Burial
1 Inventory

C.A.T.

None

WAREHOUSE SPACE

1382

STORED BY

Lui

INVENTORIED BY

Watters

PACKED BY

Yacoby

CHECKED BY

B

WEIGHT

C.I. REMOVED

X SHORTAGE
ON REVERSEIDENT. TAGS
REMOVEDDIARY
REMOVED

DATE SHIPPED

JUL 16 1945

LOCKED
STORAGELAUNDRY
REMOVEDX WAS OR
ADDITIONAL

FILM REMOVED

ADDITIONAL REMARKS.

SHORTAGES

U. S. GOVT. CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

4650 Frances

\$5.00 VS

2 Rentenmark

4650 Frances

\$5.00 VS. 2 Rentenmark

1 Form 38

211-226

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

Waters

INVENTORY CLERK

OPR

SUPERVISOR

G.I. REMOVED

Serial No. 35588131 Name SAHLI CARL R
Grade CPL Rank
Organization
Address
Nearest Relative
Address
Killed in Action Died of Disease
Date Hospital
Battle Area Information

Place of Burial
Point of Coordination
Description of Body
Members Missing

nlc
7-3-45
12-5-L
Tanner

NAME SAHLI, CARL R. CPI 8131

BAY	PALLET	BOX	TALLY
	6	16	8895
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
GRB			

RESTRICTED
INVENTORY FORM

15 January 1945

DATE

SUBJECT: Inventory of Personal Effects of:

SAHLI

(LAST NAME)

Carl

(FIRST NAME)

R

(MI)

Cpl

(RANK)

35588131

(ASN)

TO: Effects Quartermaster, Communications Zone, APO 507 US Army

The above named individual of 134th Inf 35th Div
(UNIT) (ORGANIZATION)

was reported Deceased about Unk (Estimated 4 Jan) 1944.5
STATUS (KIA, MIA, Hosp. etc.) (DATE)

Designated Beneficiary if information readily accessible

Laura L Sahli Rt #1 North Lima, Ohio

INVENTORY OF EFFECTS

1 wallet, brown ✓
16 Photos ✓
1 patch, 35th Div ✓
1 French coin, 1 Franc ✓
1 German coin, 10 Reichspfennig ✓

4650 Francs
\$5.00 U. S.
2 Rentenmark

4650 Francs
\$5.00 U. S. 2 Rentenmark

Money in the amount of 4650 Francs \$5.00 U. S. 2 Rentenmark has been turned into Chas S. McCormick Jr., Lt Col.,
(NAME OF FINANCE OFFICE AND

FD 211-226 Form WDFD 38 enclosed.
SYMBOL NUMBER)

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 3 Feb 1945.
(RAIL, TRUCK, ETC.)

For the Commanding Officer:

Name CARL D. TRUAX
Rank & ASN 1st Lt 0-1595875
Organization 609th QM Gr Reg Co

Any additional pertinent information:

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

Case No. 372029Date 6 July 1945

SUBJECT: Report of transaction in disposing of the effects of

Carl R. Sahli, 35588131 late a
(Name of deceased) (Army Serial Number)

Staff Sergeant, Infantry who died
(Grade) (Organization, Army or Service)

on the 9 day of January, 19 45, at: European Area

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

1. Complying with A.W. 112, a Summary Court-Martial, convened at Kansas City Mo. Pursuant to S.O., 228 Hq., KCCM 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 _____, 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 3 July 1945, pursuant to Special Orders 228, Headquarters KCCM Depot, dated 25 September 1943, the application or affidavit of Mrs. Laura L. Sahli for the effects of the above-named deceased soldier, or person subject to military law, now in the possession of the United States, with other relevant evidence, was duly considered;

Whereupon, this Summary Court-Martial finds that, under the provisions of A.W. 112, Mrs. Laura L. Sahli of
(Name of person found entitled)
R. F. D. # 1, North Lima State of
(Number, Street or Avenue) (City, Town or Village)
Ohio is the widow of the
(Relationship or Capacity)

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

(Signature of Summary Court Officer)

JOHN R. MURPHY, Colonel, Q.M.C.

(Name, Rank, Organization)
SUMMARY COURT MARTIAL