

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

Pfc. Oboert E. Terkelson, 39 315 835
 Plot D, Row 4, Grave 66,
 United States Military Cemetery
 Marigny, France

27 October 1947

DO NOT WRITE ABOVE THIS LINE

A		C	
B		D	

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, Martin Terkelson

(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 James, 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 _____, 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.)

00MG FORM 14 NOV 1946 345 MILITARY

16-50411-1

PAGE 1

DEC 8

Coded
20mch 48
M/Baker
cel DD Processed, Apr 48

ADDITIONAL REMARKS AND INSTRUCTIONS

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

Nov 20 5 55 PM '17
JAN 20 1918
RECEIVED



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
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS	STATE OR TERRITORY OF U. S. A., OR COUNTRY
		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.

x Martin Torkelson
(SIGNATURE OF NEXT OF KIN)

136²
749 West 8th Street
(STREET AND NUMBER)

Martin Torkelson
(NAME PRINTED OR TYPED)

Eugene Oregon
(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 14th day of November

1947, at city (or town) of Eugene, county of Lane, and State (or Territory or District) of Oregon

Loyle Rowling
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

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

Notary Public for Oregon

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.

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

PART III

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

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

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

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

att

P

293 Torkelson, Obert E. - 39,315,835 (Pfc)

OZMG FORM 381 11 MAR 47			NOTICE OF CHANGE IN ADDRESS	
NAME OF DECEASED		RANK	SERIAL NUMBER	
Obert E Torkelson		Pfc	39-315-835	
NAME OF NEXT OF KIN		RELATIONSHIP		
Martin Torkelson		Father		
OLD ADDRESS				
749 West 8th St, Eugene, Oregon				
NEW ADDRESS				
1362 West 8th St, Eugene, Oregon				
REMARKS				
FILED NAT 11-24-47 DA				
U. S. GOVERNMENT PRINTING OFFICE 16-51932-1				

att

P

293 Torkelson, Overt E. - 39,315,835 (Pfc)

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



OFFICE OF THE QUARTERMASTER GENERAL
MEMORIAL DIVISION, R. R. 1
WASHINGTON 25, D. C. U. S. M. G.
M. & R. BR.



2 March 1949

Mr. Martin Torhelson
1362 West Eighth Street
Eugene, Oregon

Pfc Othert E. Torhelson, ASN 39 315 035
Plot I, Row 2, Grave B
Headstone: Cross
St. James U. S. Military Cemetery

Dear Mr. Torhelson:

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. LARSON
Major General
The Quartermaster General

Enc

Pfc. Stort E. Torkelson, 39 315 835
Plot 2, Row 4, Grave 66,
United States Military Cemetery
Marigny, France

27 October 1947

Mr. Martin Torkelson
749 West 8th Street
Eugene, Oregon

Dear Mr. Torkelson:

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.

how

1 October 1946

Mr. Martin Torkelson
749 West 8th Street
Eugene, Oregon

Dear Mr. Torkelson:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Private First Class Overt E. Torkelson, A.S.N. 39 315 835.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Marigny, plot D, row 4, grave 66. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located nine miles west of St. Lo, 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

185598

RTB:VM:ag
September 4, 1945

Mr. Martin Torkelson
1148 West 5th Avenue
Eugene, Oregon

Dear Mr. Torkelson:

The Army Effects Bureau has received additional property of your son, Private First Class Obert E. Torkelson, consisting of funds in the amount of \$4.03. 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,

G. B. QUINN
2nd Lt., QMC
Chief, Files Branch

1 Incl-
Check

887

QU



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

IN REPLY REFER TO: 185,598 M

JRM:MM:cly
January 22, 1945

Mr. Martin Torkelson
1148 West 5th Avenue
Eugene, Oregon

Dear Mr. Torkelson:

The Army Effects Bureau has received from overseas some personal effects of your son, Private First Class Obert E. Torkelson.

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,

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

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

REPORT OF DEATH

DATE 10 Oct 1944

FULL NAME <u>Torkelson, Overt E.</u>		ARMY SERIAL NUMBER <u>59,315,835</u>	GRADE <u>Pfc.</u>
HOME ADDRESS <u>Eugene, Oregon</u>		ARM OR SERVICE <u>Inf.</u>	DATE OF BIRTH <u>24 Aug 1920</u>
PLACE OF DEATH <u>European Area</u>	CAUSE OF DEATH <u>Killed in action</u>		DATE OF DEATH <u>28 Jul 1944</u>
STATION OF DECEASED <u>European Area</u>		DATE OF ENTRY ON CURRENT ACTIVE SERVICE <u>24 Aug 1944</u>	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)

Mrs. Elizabeth Torkelson, mother, 749 W. 8th St., Eugene, Oregon

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)

Mrs. Elizabeth Torkelson, mother, same as above
Mr. Martin Torkelson, father, same as above

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

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 28 Jul 1944 until such absence was terminated on 5 Oct 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.

19 OUTSIDE FILE

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. O. 201 FILE

☒ BATTLE

☐ NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:

[Signature]

ADJUTANT GENERAL

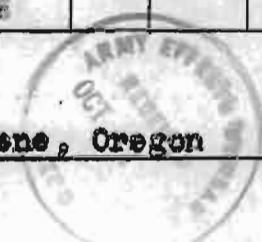
WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE
WASHINGTON 25, D. C.

185,598

REPORT OF DEATH

DATE 10 Oct 1944

FULL NAME Torkelson, Obert E.		ARMY SERIAL NUMBER 39,315,835	GRADE Pfc.
HOME ADDRESS Eugene, Oregon		ARM OR SERVICE Inf.	DATE OF BIRTH 24 Aug 1920
PLACE OF DEATH European Area	CAUSE OF DEATH Killed in action		DATE OF DEATH 28 Jul 1944
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 24 Aug 1941	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Elizabeth Torkelson, mother, 749 W. 8th St., Eugene, Oregon			
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Elizabeth Torkelson, mother, same as above Mr. Martin Torkelson, father, same as above			
INVESTIGATION MADE?		IN LINE OF DUTY	OWN MISCONDUCT
YES NO	YES NO	YES NO	YES NO
		WAS DECEASED ON DUTY STATUS	AUTHORIZED ABSENCE
		YES NO	YES NO
			IN FLYING PAY STATUS
			YES NO
			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 28 Jul 1944 until such absence was terminated on 5 Oct 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:		
S. G. O.	P. B. I.	F. O., U. S. A.
S. O. C. M. O.	O. F. D.	ARMY EFFECTS BUREAU
G. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. SOI FILE

☒ BATTLE
☐ NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:

[Signature]
ADJUTANT GENERAL

185598

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

--BATTLE CASUALTY REPORT

NAME			SERIAL NUMBER			GRADE		ARM OR SERVICE		REPORTING THEATRE		
TORKELSON OBERT E			39315835			PFC		INF		ETO		
PLACE OF CASUALTY				DATE OF CASUALTY			FLYING OR JUMPING STAT		TYPE OF CASUALTY		SHIPMENT NUMBER	
FRANCE				28 JUL 44					MIA		156	

NAME AND ADDRESS OF EMERGENCY ADDRESSEE

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

MR.-MRS.-MISS--FIRST NAME--MIDDLE INITIAL--LAST NAME		RELATIONSHIP	DATE NOTIFIED
MRS ELIZABETH TORKELSON		MOTHER	19 AUG 1944 lv
NO. AND NAME OF STREET--CITY--STATE			
749 WEST 8TH STREET HIGHER OBTION			

REMARKS:

☐ CORRECTED COPY



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

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. ☐ E. R. & D. ☐ CERTIF. ☐ M. & M. ☐ NON-DEL.

REPORT NOT VERIFIED _____ NO FORM 43 _____ NO CAS. BR. FILE _____ CHECKED BY _____ REVIEWED BY _____

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

THIS SPACE FOR USE OF MACHINE READER (PRINTED FIRST)																											
ACCT. AREA			CASUALTY STATUS			ORIGINAL CAS. DATE			MESSAGE NO.			LATEST CAS. DATE			REFERENCE AREA		OVR. FILE		RESIDENCE				COMP.		PAGE		
						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" ☐ _____ 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.

ARMY EFFECTS BUREAU
INVENTORY

185598

CASE NO.

TYPED BY

dg
DATE

6/2/45
STATUS
KIA

NAME
Osbert E. Torkelson

A.S.N.
39315835

RANK

Pfc

ORGANIZATION

AMOUNT

4.03

LIST NO.

F-171-2

REMARKS

148.005 m4.
ACCOUNT NO.

PAID-Check No. 13699723

ACCOUNTING INVENTORY

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mr. Martin Torkelson

1148 West 5th Avenue

Eugene, Oregon

Effects of:

Name Mr. Ubert E. Torkelson

ASN 39315635

Case No. 185598 D

Wt.

DATE 4 September 1945
RTB:VM:ag

W. J. Torkelson
FOR: Effects Quartermaster

REMARKS:

☒ Inclose Bureau Check
Acct. No. 148005
Amount 4.03 *me*
Inclose "Valuables" item
Ship "Valuables" item(s)

Remove G.I.
Note discrepancy in
Films removed
Diary removed
Laundry removed

ROUTING:

1 Accounting Branch
Warehouse Division
2 Files Branch, Adm. Div.

136997 hmc

148005

185598

September 5

45

Martin Torkelson

4.03

Four and 03/100
REMARKS:

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

Shipping Clerk

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mr. Martin Torkelson

SHIP TO:

1148 West 5th. Avenue

Eugene, Oregon

Effects of: Pfc. Obert E. Torkelson

Name

ASN

39315835

Case No.

185598 D.

At.

DATE

20 January 1945

REMARKS:

JRM:NM:bfn

Inclose Bureau Check

Acct. No.

Amount

Inclos: "Valuables" item

Ship "Valuables" item(s)

W Mc Nicoll
FOR: Effects Quartermaster

Remove G.I.

Note discrepancy in

Films removed

Diary removed

Laundry removed

ROUTING:

Accounting Branch

Warehouse Division

Files Branch, Adm. Div.

REMARKS:

1 pkg
✓
Franked

Est. Exp. Chgs. 11.00

Est. Pmt. Chgs. 0.00

No. of Packages 1

JAN 23 1945

JAN 22 1945

AD
Shipping Clerk

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

JRM:NM:bfb
Case No. 185598
Date 20 January 1945

SUBJECT: Report of transactions in disposing of the effects of

Obert E. Torkelson, 39315835 late a
(Name of deceased) (Army Serial Number)
Private First Class, Infantry who died
(Grade) (Organization, Army or Service)
on the 28 day of July, 19 44, 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. 223, 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 18 January 1945, pursuant to Special Orders 223, Headquarters, KCQM Depot, dated 25 September 1943, the application or affidavit of Martin Torkelson 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, Martin Torkelson of
(Name of person found entitled)
1148 West 5th Avenue, Eugene State of
(Number, Street or Avenue) (City, Town or Village)
Oregon 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. HEIDMAN, Major, Q.M.C.

(Name, Rank, Organization)
SUMMARY COURT MARTIAL

W. TORKELSON

Serial No. 39315835 Name OBERT E
Grade Pfc 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
Signed

INVENTORY OF EFFECTS

The following listed effects
were found on Pfc
(Rank)

Torkelson, Obert E 39315835
(Orgn)(Name) (..SN)

Unk. Est. 25 July 1944
(Orgn) (Date Died,

Buried at Marigny #1

and effects forwarded to Effects W.M.

Photos ✓
Wallet ✓
Khatok Pencil ✓
Knife ✓
Bracelet ✓
Testament ✓

200 Francs 0

9 August 1944
Arlwin W. Lisius 0
Capt. F. D. SN 211-515

W. Torkelson
1st Lt

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

In Reply Refer To _____

Reference is made to our letter dated
reporting shipment of the personal property belonging to

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

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 inclosed an
addressed envelope which needs no postage.

Yours very truly,

1 Incl--Envelope

(Signature)

(Date)

RESTRICTED
REPORT OF BURIAL 198
TM 10-630 AND AR 30-1815

43500
8 August 1944

Date

Torkelson	Obert	E	Pfc	39315835
Last Name	First	Initial	Rank	Serial No.
	320	INF	REGT	Unknown
Unit		Organization		
Normandy, France		KIA Body Decomposed		
Place of Death		Date of Death		Cause of Death
2100 8 August 1944		Marigny #1		393633
Time and Date of Burial		Name of Cemetery		Name or Coordinates of Location
60 4		D		Temp
Grave Number	Row Number	Plot Number		Type of Marker

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

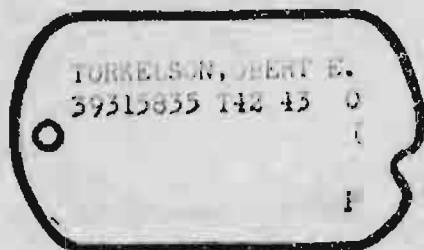
If No Identification Tags
How were remains identified?

What means of identification were buried with the body?

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

Who is buried on:	Robertson	34547295	Pvt	67
Deceased's Right:	Name	Serial No.	Rank	Grave No.
Deceased's Left:	Sidloski	31281266		65
	Name	Serial No.	Rank	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	Elizabeth Torkelson
Name	
Address	1148 W. 5th Ave., Eugene, Oregon
Religion	P

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

Photos
Wallet
Pencil
Knife
Bracelet
Testament
200 francs
Fwd. to effects QM.

Signature of Officer or other person reporting burial
HARRY DUBROV, 1st Lt QMC.

Verified by G.R.S. Officer

File 2-17-45
GRS

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 Tobth 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.:

4	
3	
2	
1	
Thumb	

4	
3	
2	
1	
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												
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8												
Indicate: missing natural teeth by X; crowns by O; fillings by □; Bridges by ○ linking anchor teeth; replacements by artificial teeth X																											
Upper																											
Lower																											

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.

AG P BR HQ SCS

172560

SEP 22 1964

1	Interred 10 Decem 1948 I-2-2 ST JAMES H.F. HILL CAPT QMC GTY. SUPT.				DISINTERMENT DIRECTIVE			
	SECTION A — NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER 3555 02787		DATE 15 03 48 DAY MONTH YEAR	
	NAME TORKELSON OBERT E		SERIAL NUMBER 39315835		RANK PFC		ARM 1	
CEMETERY MARIGNY - ST LO						DATE OF DEATH 1 3504 80 DAY MONTH YEAR		
PLOT D		ROW 4		GRAVE 66		COUNTRY FRANCE		
						CAUSE OF DEATH 1		
SECTION B — CONSIGNEE AND NEXT OF KIN Flag sent 7 January 1949								
NAME AND ADDRESS OF CONSIGNEE ST. JAMES, FRANCE				NAME AND ADDRESS OF NEXT OF KIN MARTIN TORKELSON (FATHER) 1362 WEST 8TH STREET EUGENE, OREGON				
SECTION C — DISINTERMENT AND IDENTIFICATION								
NAME TORKELSON, Obert E.		SERIAL NUMBER 39315835		RANK PFC		DATE OF DEATH 19 MAY 48		
IDENTIFICATION TAG ON ☒ REMAINS ☒ MARKER		ORGANIZATION USAGF		RELIGION P		IDENTIFICATION VERIFIED BY E.E.CASTELLARIN, Embalmer NAME AND TITLE		
SECTION D — PREPARATION OF REMAINS FOR SHIPMENT								
NATURE OF BURIAL O.D. uniform				CONDITION OF REMAINS Advanced decomposition. Fractured skull.				
OTHER MEANS OF IDENTIFICATION None								
MINOR DISCREPANCIES None				NAT FILE RECORDS ANNOTATED DATE MAR 1 6 1949 NAME [Signature] R R R R				
REMAINS PREPARED AND PLACED IN CASE transfer case.								
DATE 26 May 1948		BY E.E. Castellarin						
CASKET SEALED BY Thomas E. Jones		EMBALMER (Signature)						
CASKET BOXED AND MARKED		SHIPPING ADDRESS VERIFIED BY All markings, tags and plates verified by:						
DATE 29/6/48 BY M.H..Noyes.		KANEMITSU.ITO, 1/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 I certify that the entries on this form are true copies of the entries on Copy No. 4 of this Dis Directives which contains the of the persons whose names								
				SIGNATURE OF GRS INSPECTOR ROBERT B. HOWARD, 2/LT., INF.				
1 Prepare Discrepancy Report QMC Form 194a for major discrepancies.								
John Brown Capt CAC								

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC, Marigny		TO USMC, St. James ..	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER Pfc. Spach	
SIGNATURE OF SHIPPER J.J. ANDREWS, 1/LT., INF.	DATE 18/6/48	SIGNATURE OF RECEIVER HARRY F. HILL, CAPT., QMC.	DATE 18/6/48

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. THREE LEVINCE	DATE	SIGNATURE OF RECEIVER HARRY F. HILL (LEVINCE)	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

CASUALTY BRANCH
The Adjutant General's Office
Washington

18 November 1944.

DEATH

293 Torkelson, Albert E. 39,315,835

~~RECORDED~~

AG 201 Torkelson, Albert E.
(3 Oct 44) 39,315,835

MEMORANDUM FOR RECORD

SUBJECT: Change of address of Emergency Addressee:

A communication has been received from Mr. C. L. Kelly, friend of
Private First Class Albert E. Torkelson, 39,315,835, who was killed in action
on 28 July 1944 in France,

requesting that the records of this office be amended as follows:

FROM

TO

Mrs. Elizabeth Torkelson, mother,
749 West 8th Street,
Eugene, Oregon.

Mrs. Elizabeth Torkelson, mother,
1148 West 5th Avenue,
Eugene, Oregon.

Copies furnished:

Adjutant General.

Walter C. MOOR
Adj. Gen. A.G.O.

Finance Officer, US Army
Chief of Finance
General Accounting Office
Quartermaster General
Effects Quartermaster, Kansas City, Mo.
Social Security Board
CG ~~201~~ Service Command Fort Douglas, Utah.
Chief, Army War Bond Office
Director, Bureau Public Relations
Director, Office Dependency Benefits
~~AG 201 Torkelson, Albert E.~~
Chief of Staff
Decorations and Awards Br.
CG, Army Air Forces (If Air Corps Personnel
If POW Send copy to OPMG
AG 201 file





rma

185598

CASUALTY BRANCH
The Adjutant General's Office
Washington

16 November 1944.

DEATH

REFERENCE

AGPO-G 201 Torkelson, Overt E.
(3 Oct 44) 39,315,835

MEMORANDUM FOR RECORD

SUBJECT: Change of address of Emergency Addressee:

A communication has been received from Mr. C. L. Kelly, friend of
Private First Class Overt E. Torkelson, 39,315,835, who was killed in action
on 28 July 1944 in France,

requesting that the records of this office be amended as follows:

FROM
Mrs. Elizabeth Torkelson, mother,
749 West 8th Street,
Eugene, Oregon.

TO
Mrs. Elizabeth Torkelson, mother,
1148 West 5th Avenue,
Eugene, Oregon.

Adjutant General.

Copies furnished:

Finance Officer, US Army
Chief of Finance
General Accounting Office
Quartermaster General
Effects Quartermaster, Kansas City, Mo.
Social Security Board
CG 9th Service Command Fort Douglas, Utah.
Chief, Army War Bond Office
Director, Bureau Public Relations
Director, Office Dependency Benefits
~~National Headquarters, American Red Cross~~
Chief of Staff
Decorations and Awards Br.
CG, Army Air Forces (If Air Corps Personnel
If POW Send copy to OPMG
AG 201 file

Ralph C. Moor
Major, A.G.O.





SHEET 1 OF 1 SHEETS		ARMY EFFECTS BUREAU INVENTORY		DECEASED	
BOX NUMBER 29		ORIGINAL NUMBER OF PACKAGES 1		MISSING	
TALLY NUMBER 5738		INVENTORY DATE 18 Jan. 45		P O W	
EFFECTS OF Robert E. Torkelson		CASE NUMBER 83598		ABANDONED	
A.S.N. 59315835		ORGANIZATION unknown		RANK 72fc	
PACKAGE DESCRIPTION #1 package					
CLOTHING		PERSONAL ITEMS		CONTAINERS	
BELT	1	BRACELET, IDENTIFICATION		BAGS, CLOTH	
BELT, MONEY (NO MONEY)		BRUSHES		BAGS, TRAVEL	
CLOTH, WASH		CAMERAS		BILLFOLD (NO MONEY) w/c	
COATS		GLASSES		CASE,	
FOOTWEAR, PR.	1	KNIVES		FOOTLOCKER	
GLOVES, PR.		LIGHTERS		KIT, SEWING	
HANDKERCHIEFS		MISC. INSIGNIA		KIT, TOILET	
HEADWEAR		MISC. ITEMS		KIT, WRITING	
JACKETS		PEN, FOUNTAIN		PAPERS AND MISC.	
OVERCOATS	1	PENCIL, MECHANICAL		BOOKS	
SCARFS		PIPES		BOOKS, ADDRESS	
SHIRTS		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 SNOOTER	
				SCUENIRS	
				SOUVENIR MONEY	
				STATIONERY	
				TESTAMENTS	
				U.S. MONEY (AMOUNT)	

REMARKS: Relation ship unknown Mr & Mrs Otto Torkelson 514 North F. St. Aberdeen, Washington Mrs Torkelson 749 West 8th St. Eugene Oregon		ATTACHMENTS: 1 Inventory 1 gr Label	FORM #54	FORM #100
C.A.T. none	JAN 16 1945			
WAREHOUSE SPACE 2158	STORED BY [Signature]	WEIGHT	GI REMOVED	
INVENTORIED BY Ford			V SHORTAGE ON REVERSE	
PACKED BY [Signature]	CHECKED BY [Signature]		IDENT. TAGS REMOVED	
			DIARY REMOVED	
			LOCKED STORAGE	
			LAUNDRY REMOVED	
			FILM REMOVED	

G.I. RETURN

SUPERVISOR

INVENTORY CLERK

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

DeFaver

Ford

AMOUNT

SYMBOL

DATE

NUMBER

U S GOVT. CHECK MARK

August 1944
211-515

200 francs

SIGNATURE

ADDITIONAL REMARKS