293 LAPORTE, ROBERT W. SGT. (13-141-708) PACIFIC OCEAN AREA (MD.) 45dmt
AIR CORPS

RECEIPT OF REMAINS

DEC 14 1948

DISTRIBUTION CENTER
AGR DISTRIBUTION CENTER, PHILA. QM DEPOT

DAY LETTER
~~XXXXXXXXXE~~

EASTON SONS
608 FREDERICK AVENUE
CANTONSVILLE, MARYLAND

REMAINS CONSIGNED TO:

293-

REMAINS OF LATE SGT ROBERT W. LA PORTE, 13141708 BEING SHIPPED TO YOU ACCOMPANIED BY MILITARY ESCORT ON TRAIN NUMBER FORTY FIVE BALTIMORE AND OHIO RAILROAD LEAVING PHILADELPHIA ONE FORTY PM SEVENTEEN DECEMBER AND DUE TO ARRIVE BALTIMORE, MD.(MT.ROYAL STA.) THREE NINETEEN PM RAILROAD TIME SEVENTEEN DECEMBER. REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL AND DELIVER TO CANTONSVILLE, MD. AND NOTIFY NEXT OF KIN. REQUEST YOU SUBMIT ITEMIZED STATEMENT IN QUADRUPLICATE PROPERLY CERTIFIED TO THIS DEPOT FOR PAYMENT OF TRANSPORTATION CHARGES ONLY IF ANY FROM BALTIMORE, MARYLAND TO CANTONSVILLE, MD. ESCORT WILL BE PERMITTED TO REMAIN A MAXIMUM OF SEVENTY TWO HOURS.

C. R. YOST, LT COL,QMC

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

THIS 17 (DAY) DAY OF Dec. (MONTH), 19 48

M/Sgt. Michael J. Bovidge
WITNESS (Escort)

Easton Sons
Clinton M. Easton
CONSIGNEE

RAT
FILE
RECORDS ANNOTATED
DATE 2-Feb-49
NAME [illegible]
R & R BR.

mjd

QMC FORM 15 NOV 46 1193

16—52073-1 U. S. GOVERNMENT PRINTING OFFICE

2017

GH

1

DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER	DATE (DAY / MONTH / YEAR)
6372 00310	15 / 08 / 48

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
LA PORTE ROBERT W	13141708	SGT	1	1	1

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS (CODE)	DIST. CTR.
TINIAN MARIANAS IS	8	3	467	3100	03

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
EASTON SONS
608 FREDERICK AVENUE
CATONSVILLE, MARYLAND
(F/B PIKESVILLE, MARYLAND)

NAME AND ADDRESS OF NEXT OF KIN
MR. GEORGE CLARK LA PORTE (FATHER)
4102 MONDAWMIN AVENUE
BALTIMORE, MARYLAND

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISINTERRED
LA PORTE, Robert W.	13141708	Sgt	10 Feb. '45	8 Oct. '47

IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY (NAME AND TITLE)
☐ REMAINS ☐ MARKER none	USAAF	P	F. G. Abaya 2nd Lt. Inf.

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL
Nature of shroud undetermined

CONDITION OF REMAINS
Skeltal remains incomplete

OTHER MEANS OF IDENTIFICATION
Mort. plate

MINOR DISCREPANCIES (*Prepare Discrepancy Report QMC Form 1194a for major discrepancies.*)
None

REMAINS PREPARED AND PLACED IN CASKET
DATE 27 Oct. '48 BY J. N. ROBINSON, EMBALMER

CASKET SEALED BY
J. N. Robinson

EMBALMER (*Signature*)
J. N. Robinson
J. N. ROBINSON

CASKET BOXED AND MARKED
DATE 27 Oct 48 BY J. N. Robinson

SHIPPING ADDRESS VERIFIED BY
R. L. TRASK, INSPECTOR

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

R L Trask
R. L. TRASK, INSPECTOR
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS
"Inspected for identification only per paragraph 2, 1st Ind, OQMG, file QMGMO 293 (Pacific), dated 5 May 1948."

QMC FORM REV 11 FEB 48 1194

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM: U. S. ARMY MAUSOLEUM NO. 3	TO: USAT DALTON VICTORY
KIND OF CONVEYANCE: TRUCK	NAME OF CONVOYER:
SIGNATURE OF SHIPPER: J. E. WILSON, CAPT., QMC — DATE: 15 NOV 1948	SIGNATURE OF RECEIVER: OLAF NORDMANN 1ST LT TC — DATE: NOV 18 1948

2. SHIPPED

FROM: USAT DALTON VICTORY	TO: OAKLAND ARMY BASE
KIND OF CONVEYANCE: SHIP	NAME OF CONVOYER: NONE
SIGNATURE OF SHIPPER: OLAF NORDMANN 1ST LT TC — DATE: NOV 30 1948	SIGNATURE OF RECEIVER: [illegible] — DATE: DEC 1 1948

3. SHIPPED

FROM: HQ SFPE, FT MASON, CALIF.	TO: DC-3 Philadelphia QM Depot
KIND OF CONVEYANCE: RAIL	NAME OF CONVOYER: Davis H Flaherty
SIGNATURE OF SHIPPER: AMBROSE C ARTHUR MAJ TC — DATE: DEC 1 1948	SIGNATURE OF RECEIVER: [illegible] — DATE: DEC 10 1948

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:

O.I.

INSPECTION CHECK LIST

(For Use at Distribution Point)

Name	Rank	Serial Number
LA PORTE ROBERT W	SGT	13141708

Source: Mr. George Clark La Porte (Father)
4102 Mondawmin Avenue
Baltimore, Md.

Consignee: Easton Sons
608 Frederick Ave
Catonsville, Md. (F/B ~~Pikesville, Md.~~)

SHIPPING CASE - General Appearance
(Check ONLY Discrepancies)

Condition of Shipping Case (Check One)
[ ] Satisfactory [✓] Unsatisfactory

✓	FINISH (Exterior)
	FINISH (Interior)
	HANDLES
	HANDLE BOLTS
	STENCILING - NAMEPLATE
	HEALTH PERMIT MARKER
	HEALTH PERMIT NUMBER

Remarks

CASKET - General Appearance
(Check ONLY Discrepancies)

Condition of Casket (Check One)
[ ] Satisfactory [✓] Unsatisfactory

✓	FINISH (Exterior)
	HANDLES AND FASTENINGS
	STENCILING - NAMEPLATE
	CAM LOCKS (Sealing)
	CDOR OR MOISTURE

Remarks

ROUTED THROUGH

[ ] MORTUARY OPERATING ROOM

Condition of Remains
[ ] Satisfactory [ ] Unsatisfactory

Necessary Disinfection (Explain)

[ ] REPAIR SHOP

Casket Repaired [ ] Yes [ ] No
Casket Exchanged [ ] Yes [ ] No
Shipping Case Repaired [ ] Yes [ ] No
Shipping Case Exchanged [ ] Yes [ ] No

Remarks

Time	Date	Signature or Mortician	Time	Date	Signature of Inspector
				12/7/46	[illegible]

Remarks

Midway 12/7/46 [illegible]

OK to Ship

65

799

QMC Form R-5054 Local Reproduction Authorized

MESSAGEFORM

MESSAGE CENTER No.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT

CALLS	STA. SER. No.	PRECEDENCE	TRANSMISSION INSTRUCTIONS	ORIGINATOR	DATE-TIME GROUP
V	NR				

ACTION	INFORMATION	EXEMPT	OPERATING SIGNALS	GROUP COUNT
				GR

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (*Originator*)
PHILADELPHIA QUARTERMASTER DEPOT, PHILA., PA.

ACTION TO:
·MR. GEORGE CLARK LA PORTE GOVT PAID
·4102 MONDAWMIN AVENUE
·BALTIMORE, MARYLAND

INFORMATION TO: DLR AND CHECK ANY CHGS

SECURITY CLASSIFICATION

PRECEDENCE FOR
ACTION: DAY LETTER
INFORMATION:

☐ ORIGINAL MESSAGE

REFERS TO ANOTHER MESSAGE
IDENTIFICATION:
CLASSIFICATION:

WE HAVE BEEN ADVISED REMAINS OF THE LATE SGT. ROBERT W. LA PORTE ARE ENROUTE TO THE UNITED STATES. OUR RECORDS INDICATE YOU WISH REMAINS DELIVERED TO EASTON SONS, 608 FREDERICK AVENUE, CATONSVILLE, MARYLAND WITHIN FORTY EIGHT HOURS AFTER RECEIPT OF THIS MESSAGE PLEASE CONFIRM YOUR ORIGINAL INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS AND FURNISH YOUR CORRECT MAILING ADDRESS BY TELEGRAM COLLECT TO COMMANDING OFFICER PHILA. QUARTERMASTER DEPOT, PHILA PENNA. REPLY IS NECESSARY WITHIN THIS PERIOD SINCE IT WILL NOT BE POSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF FORTY EIGHT HOURS. PLEASE INSTRUCTIFUNERAL DIRECTOR TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL. WHILE DELIVERY OF THE REMAINS WILL BE MADE AS SOON AS PRACTICABLE AFTER RECEIPT FACTORS BEYOND OUR CONTROL MAY DELAY DELIVERY OF REMAINS FOR SEVERAL WEEKS. HOWEVER AS SOON AS REMAINS ARE RECEIVED HERE AND IT IS POSSIBLE TO SCHEDULE THEM FOR DELIVERY YOUR FUNERAL DIRECTOR WILL BE NOTIFIED BY TELEGRAM OF RAIL ROUTING AND SCHEDULED TIME REMAINS WILL ARRIVE AT RAILROAD STATION. ALSO HE WILL BE REQUESTED TO FURNISH YOU THIS INFORMATION SO THAT YOU MAY COMPLETE FUNERAL ARRANGEMENTS. THIS TELEGRAM WILL BE SENT AT LEAST THREE DAYS PRIOR TO ACTUAL SHIPMENT FROM THIS DISTRIBUTION CENTER REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. IF YOU DESIRE MILITARY HONORS AT FUNERAL YOU SHOULD ASK ANY LOCAL PATRIOTIC OR VETERANS ORGANIZATIONS TO MAKE ARRANGEMENTS. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.

SECURITY CLASSIFICATION

AUTHORIZATION
SIGNATURE: C. R. YOST, LT COL., QMC

ORIGINATING AGENCY
SYMBOL:
DATE-TIME GROUP:
OFFICIAL TITLE:

PAGE 1 OF 1

WD AGO FORM 11-168 15 JUN 1945 This form supersedes WD AGO Form 11-168, 23 Aug 44, and WD AGO Form 801, 12 Mar 43, which are obsolete.

69—16—45801-1 U. S. GOVERNMENT PRINTING OFFICE

mjd

T-6

WESTERN UNION

A.G.R. DIVISION
PHILA. QM DEPOT
1948 NOV 30 PM 11:07

WU S23 22 GOVT COLLECT

BALTIMORE MD NOV 30 944A

COMMANDING OFFICER ATTN C R YOST LT COL QMC PHILA
QUARTERMASTER DEPOT

RETEL. CONFIRMING OUR PREVIOUS INSTRUCTIONS SEND REMAINS MY SON SARGENT ROBERT WALFORD LAPORTE TO EASTONS SONS 608 FREDERICK AVENUE CATONSVILLE MARYLAND

GEORGE CLARK LAPORTE

608

1017A..

MESSAGEFORM

MESSAGE CENTER No.	TRANSMITTING MEANS	CRYPTOGRAPH OR CLEAR TEXT

CALLS	STA. SER. No.	PRECEDENCE	TRANSMISSION INSTRUCTIONS	ORIGINATOR	DATE-TIME GROUP
V	NR			DEC 14 1948	

ACTION	INFORMATION	EXEMPT	OPERATING SIGNALS	GROUP COUNT
				GR

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Originator)
AGR DISTRIBUTION CENTER, PHILA. QM DEPOT

ACTION TO:

EASTON SONS
608 FREDERICK AVENUE
CANTONSVILLE, MARYLAND

INFORMATION TO:

SECURITY CLASSIFICATION

PRECEDENCE FOR

ACTION	INFORMATION
DAY LETTER XXXXXXXX	

☐ ORIGINAL MESSAGE

REFERS TO ANOTHER MESSAGE

IDENTIFICATION	CLASSIFICATION

REMAINS OF LATE SGT ROBERT W. LA PORTE, 13141708 BEING SHIPPED TO YOU ACCOMPANIED BY MILITARY ESCORT ON TRAIN NUMBER FORTY FIVE BALTIMORE AND OHIO RAILROAD LEAVING PHILADELPHIA ONE FORTY PM SEVENTEEN DECEMBER AND DUE TO ARRIVE BALTIMORE, MD.(MT.ROYAL STA.) THREE NINETEEN PM RAILROAD TIME SEVENTEEN DECEMBER . REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL AND DELIVER TO CANTONSVILLE, MD. AND NOTIFY NEXT OF KIN. REQUEST YOU SUBMIT ITEMIZED STATEMENT IN QUADRUPLICATE PROPERLY CERTIFIED TO THIS DEPOT FOR PAYMENT OF TRANSPORTATION CHARGES ONLY IF ANY FROM BALTIMORE, MARYLAND TO CANTONSVILLE, MD. . ESCORT WILL BE PERMITTED TO REMAIN A MAXIMUM OF SEVENTY TWO HOURS.

C. R. YOST, LT COL, QMC

SECURITY CLASSIFICATION

AUTHORIZATION

SIGNATURE

ORIGINATING AGENCY

SYMBOL	DATE-TIME GROUP	OFFICIAL TITLE	PAGE OF

7 JAN 1949

REMAINS OF LATE

SHIPPED TO YOU ACCOMPANIED BY MILITARY ESCORT ON TRAIN NUMBER

RAILROAD LEAVING PHILADELPHIA

AND DUE TO ARRIVE

RAIL-

. REQUEST YOU MAKE ARRANGEMENTS

TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL AND DELIVER TO

AND NOTIFY NEXT OF KIN. REQUEST YOU

SUBMIT ITEMIZED STATEMENT IN QUADRUPLICATE PROPERLY CERTIFIED TO

THIS DEPOT FOR PAYMENT OF TRANSPORTATION CHARGES ONLY IF ANY FROM

TO . ESCORT WILL BE

REQUIRED TO REMAIN A MAXIMUM OF SEVENTY TWO HOURS.

C. R. YOST, LT COL, QMC

CLAIMS FOR RAILHEAD TO INLAND TOWN TRANSPORTATION

DECEASED Sgt Robert N La Porte, 13141708

CONSIGNEE Easton Sons

ADDRESS 608 Frederick Ave
Cantonsville, Md

FROM: Baltimore, Md

TO: Cantonsville, Md.

(A) AUTHORIZED-PAYMENT MADE:
PURCHASE ORDER AND AMOUNT:

(B) AUTHORIZED-INVOICES NOT RECEIVED:
(REASONS ~~IF KNOWN~~)
unknown

WW II

675f

6812

REQUEST FOR REIMBURSEMENT OF INTERMENT OR TRANSPORTATION EXPENSES

(Read Explanation on Reverse Side before completing form)

DATE JAN 7 1949 73725

NAME OF DECEDENT (*Last, First, Middle Initial*)	BRANCH OF SERVICE	TO BE FILLED IN BY CLAIMANT
LA PORTE, Robert W.	USAAF	A. ☐ INTERMENT EXPENSES (*Civilian or Private Cemetery*)
RANK OR GRADE: SGT	SERIAL NO.: 16141708	B. ☐ TRANSPORTATION EXPENSES (*National or Post Cemetery*)

W. G. STEIGER
COL., F. D.
PHILA., PA.
SYMBOL 212-345
STA 669

INSTRUCTIONS TO PERSONS SIGNING THIS FORM

1. This form is NOT to be signed by Funeral Director.
2. Fill in as required and sign four copies.
3. Check Box "A" or Box "B" above, not both.
4. Check Box "A" when interment is in a civilian or private cemetery.
5. Check Box "B" when remains are delivered to home or other place prior to burial in a national or post cemetery.

FILL IN THIS STATEMENT IF BOX "A" IS CHECKED

I certify that the sum of $ 265.50 was paid by me from personal funds in connection with the interment of the remains of the above-named decedent in the cemetery indicated below:

NAME: Druid Ridge

CITY OR COUNTY: Pikesville

STATE: Maryland

FILL IN THIS STATEMENT IF BOX "B" IS CHECKED

I certify that the sum of $ was paid by me from personal funds in connection with the transportation of the remains of the above-named decedent from: (*City, town, or place from which remains were shipped*)

TO: (*Name and Location of National or Post Cemetery*)

RETURN FOUR COPIES TO

SIGNATURE OF CLAIMANT: Gilbert LaPorte

ADDRESS (*Street number or RFD, City and State*): 4102 Mondawmin Ave Balto. 16 Md.

RELATIONSHIP TO DECEDENT: Father

REMARKS

PAID

JAN 1949
ANCE OFFICE
S. ARMY
MILAN

QMC FORM REV 5 MAR 48 1236 PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE

16—54738-1

PART A

1. When the remains are delivered for interment in a civilian or private cemetery, you are responsible for paying all interment expenses. In this connection, you are entitled to the allowance mentioned in paragraph 2 below.

2. An amount not to exceed $75 is allowed by the Government toward actual interment expenses when final interment of the remains is in a private or civilian cemetery. No allowance is authorized toward interment expenses when interment is in a national or post cemetery.

3. The $75 maximum allowance by the Government toward interment expenses includes but is not limited to the payment of one or more of the following items: Hearse hire from the railroad station to your home, the funeral home, church, cemetery, or any other place designated by you; vault; church services; newspaper notices; transportation for friends and relatives to and from cemetery; and the services of a funeral director.

4. Reimbursement by the Government is made only to the person who paid from his personal funds the expenses of or incident to interment in a private or civilian cemetery. Receipted bills are not required to accompany this form. Any expenses over and above the $75 maximum must be borne by the person who incurred or paid the additional expenses.

PART B

1. When the remains are delivered to you at Government expense prior to burial in a national or post cemetery, you are responsible for all additional expenses necessary to deliver the remains from that point to the national or post cemetery grave site. However, you may be entitled to an allowance for the cost of transporting the remains from your home to the national or post cemetery grave site subject to the conditions outlined in paragraph 2 below.

2. Reimbursement of transportation expenses is allowed only when the cost to the Government to deliver the remains to you is LESS than what it would have cost the Government to deliver the remains direct to the national or post cemetery of final interment. However, the amount which you may be allowed (the difference between cost of delivery to you and cost of delivery by the Government direct to the national or post cemetery) may not exceed the amount actually expended by you to deliver the remains to the cemetery grave site. WHETHER OR NOT YOU WILL BE GRANTED AN ALLOWANCE IS DEPENDENT UPON AN AUDIT OF THIS REQUEST. IN ANY EVENT YOU WILL BE NOTIFIED OF ANY ALLOWANCE DUE YOU BY THE OFFICE TO WHICH THIS FORM IS SENT.

3. Reimbursement by the Government will be made only to the person who paid from his personal funds for transporting the remains to the national or post cemetery grave site.

4. No interment expense allowance is authorized since interment is made ultimately in a national or post cemetery.

U. S. GOVERNMENT PRINTING OFFICE 16—54738-1

BUDGET BUREAU No. 49-R277.

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

Sgt. Robert W. La Porte, 13 141 708
Plot 8, Row 3, Grave 467,
American Cemetery
Tinian Island, Marianas Islands

2 September 1947

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

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

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

PART I

I, George Clark LaPorte (PLEASE PRINT OR TYPE NAME OF NEXT OF KIN) *(Please indicate relationship to the deceased by placing an "X" in the proper box.)*

☐ WIDOW ☐ WIDOWER ☐ SON OVER 21 YEARS OLD ☐ DAUGHTER OVER 21 YEARS OLD

☒ FATHER ☐ MOTHER ☐ BROTHER OVER 21 YEARS OLD ☐ SISTER OVER 21 YEARS OLD

☐ RELATIONSHIP OTHER THAN ABOVE (*Specify*) _____

HAVING FAMILIARIZED MYSELF WITH THE OPTIONS WHICH HAVE BEEN MADE AVAILABLE TO ME WITH RESPECT TO THE FINAL RESTING PLACE OF THE DECEASED DESIGNATED ABOVE, NOW DO DECLARE THAT IT IS MY DESIRE THAT THE REMAINS: *(Please place an "X" in the box opposite the option you have selected.)*

☐ 1. BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS.

☒ 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY Druid Ridge Cemetery, Pikesville, Md. (NAME AND LOCATION OF CEMETERY)

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

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

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

☒ YES ☐ NO

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

None

DD None
10 Sep 48

Coded: 9-12-48

OQMG FORM 14 NOV 1946 345 MILITARY

16—50411-1

NOV 17

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			
EASTON SONS - Clinton M. Easton Mgr			
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
608 FREDERICK AVE.	CATONSVILLE 03	BALTIMORE Co.	MD.
EXPRESS OFFICE (*Nearest railroad passenger station*)	TELEGRAPH ADDRESS		TELEPHONE No.
BALTIMORE CITY MD.	608 FREDERICK AVE CATONSVILLE-28, MD.		CATONSVILLE 2113

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.

G. Clark LaPorte (SIGNATURE OF NEXT OF KIN) — 4102 Mondawmin Ave., Balto #16 Md. (STREET AND NUMBER)

George Clark LaPorte (NAME PRINTED OR TYPED) — 4102 Mondawmin Ave., Balto. #16 Md. (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this _____ day of _____, 19____, at city (or town) of _____, county of _____, and State (or Territory or District) of _____

(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

(OFFICIAL TITLE)

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

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)

ADDITIONAL REMARKS AND INSTRUCTIONS

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

U. S. GOVERNMENT PRINTING OFFICE

Sgt. Robert W. La Porte, 13 141 708
Plot 8, Row 3, Grave 467,
American Cemetery
Tinian Island, Marianas Islands

2 September 1947

Mr. George C. LaPorte
4102 Mondawmin Avenue
Baltimore, Maryland

Dear Mr. La Porte:

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.

THOMAS B. LARKIN
Major General
The Quartermaster General

lm

wd

QMGMR 293
La Porte, Robert W.
A.S.N. 13 141 708

30 April 1947

Mr. George C. La Porte
4102 Mondawmin Avenue
Baltimore, Maryland

Dear Mr. La Porte:

Inclosed herewith is a picture of the American Cemetery, Tinian Island, Marianas Island, in which your son, the late Sergeant Robert W. La Porte, is buried.

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

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

Sincerely yours,

1 Incl
Photograph

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

kag

1.

16 September 1946

Mr. George C. La Porte
4102 Mondawmin Avenue
Baltimore, Maryland

Dear Mr. La Porte:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Sergeant Robert W. La Porte, A.S.N. 13 141 708.

The records of this office disclose that his remains are interred in the American Cemetery, plot 8, row 3, grave 467. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located on Tinian Island, Marianas Islands, 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

Graves Registration
Form No. 1
(Revised May 11, 1943)

REPORT OF INTERMENT
(TM 10-630 AND AR 30-1815 RESTRICTED (P)

LA PORTE (Last name) ROBERT (First) W. (Initial) 13-141-708 (Serial number) Sgt (Rank) 505th ~~Bomb Group~~ 483rd Bomb Sq (Organization) USA

TINIAN ISLAND (Place of death) 10 February, 1945 ELT (Date of death) Plane Crash, Complete Mutilation (Cause of death)

1400, 11 February, 1945 ELT. (Time and date of burial) American Cemetery, Tinian Island, Marianas Group. (Name of cemetery) (Name or coordinates of location)

Lat ~~[illegible]~~ Lat 15° 04'11.157"N-Long 145° 36'53.723"E

467 (Grave number) 3 (Row number) 8 (Plot number) CROSS (Type of marker—Regulation V-shaped or other)

Disposition of identification tags: Buried with body Yes ☐ No ☒ Attached to marker Yes ☐ No ☒

IDENTIFICATION ACCEPTED

One (1) G. R. Form No. 1, buried with body.
(If no identification tags, what means of identification are buried with the body?) Initial

Body identified by Capt. Frank H. Bowles
(If no identification tags, but identity definitely established, give particulars)

Body buried on RIGHT Jack R. Kemper (Name) 13-187-797 (Serial number) Sgt. (Rank) 505th ~~Bomb Gp~~ 483rd Bomb Sq (Organization) 466 (Grave number)

Body buried on LEFT Paul A. Hughes (Name) 18-159-901 (Serial number) Sgt (Rank) 505th ~~Bomb Gp~~ 483rd Bomb Sq (Organization) 468 (Grave number)

Mr. George C. LaPorte, 4102 Mondawmin Ave., Baltimore, Md. Father (Name and address of EMERGENCY ADDRESSEE) Same (Name and address of LEGAL NEXT OF KIN)

64A

List only personal effects FOUND ON BODY and disposition of same: NONE

Incl #44

RESTRICTED

LEFT HAND

4

3

2

1

THUMB

IF DECEASED UNIDENTIFIED

TAKE FINGERPRINTS OF BOTH HANDS (W. D. Cir. No. 79; 3/19/43). If unable to obtain a complete set of fingerprints, **TAKE THOSE YOU CAN,** and fill in as many of the following as you are able:

Height:
Weight:
Color of eyes:
Color of hair:
Race:

Apparent nationality:
Laundry marks:
Number of rifle:
Wear glasses?
Is tooth chart attached?

(If possible, have medical personnel take a tooth chart)

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.:

IF THIS IS AN ISOLATED BURIAL, ATTACH A SKETCH OF THE LOCATION, ORIENTED WITH PERMANENT LANDMARKS.

(Signature of officer or other person reporting burial)

8075 65A

(Verified by Army GRS Officer)
LEO H. BLUM, 2ND LT. QMC.

RIGHT HAND

4

3

2

1

THUMB

WAR DEPARTMENT

THE ADJUTANT GENERAL'S OFFICE

WASHINGTON 25, D. C.

REPORT OF DEATH hbp/3707

DATE 6 March 1945

FULL NAME	ARMY SERIAL NUMBER	GRADE
LaPorte, Robert W.	13 141 708	Sgt
HOME ADDRESS	**ARM OR SERVICE**	**DATE OF BIRTH**
Baltimore, Maryland	Air Corps	11 July 25
PLACE OF DEATH	**CAUSE OF DEATH**	**DATE OF DEATH**
Pacific Ocean Area	Killed in action	10 Feb 45
STATION OF DECEASED	**DATE OF ENTRY ON CURRENT ACTIVE SERVICE**	**LENGTH OF SERVICE FOR PAY PURPOSES** (YEARS / MONTHS / DAYS)
Pacific Ocean Area	10 July 43	

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)

Mr. George C. LaPorte, father, 4102 Mondawmin Ave., Baltimore, Maryland.

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)

George C. LaPorte, father, same as above.
Edith W. LaPorte, mother, same as above.

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

ADDITIONAL DATA AND/OR STATEMENT

Evidence of death received in WD 2 Mar 45

[X] BATTLE [ ] NON-BATTLE

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

BY ORDER OF THE SECRETARY OF WAR:

J. A. Ulio

ADJUTANT GENERAL

WD AGO FORM 53-1
1 DECEMBER 1944

THIS FORM SUPERSEDES WD AGO FORM 53-1, 15 MAY 1944, WHICH STOCKS ARE EXHAUSTED.

WAR DEPARTMENT

THE ADJUTANT GENERAL'S OFFICE

WASHINGTON 25, D. C.

439188

REPORT OF DEATH hbp/3707

DATE 6 March 1945

FULL NAME	ARMY SERIAL NUMBER	GRADE
LaPorte, Robert W.	13 141 708	Sgt
HOME ADDRESS	**ARM OR SERVICE**	**DATE OF BIRTH**
Baltimore, Maryland	Air Corps	11 July 25
PLACE OF DEATH / **CAUSE OF DEATH**		**DATE OF DEATH**
Pacific Ocean Area	Killed in action	10 Feb 45
STATION OF DECEASED	**DATE OF ENTRY ON CURRENT ACTIVE SERVICE**	**LENGTH OF SERVICE FOR PAY PURPOSES** (YEARS / MONTHS / DAYS)
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Mr. George C. LaPorte, father, 4102 Mondawmin Ave., Baltimore, Maryland.

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)

George C. LaPorte, father, same as above.
Edith W. LaPorte, mother, same as above.

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

ADDITIONAL DATA AND/OR STATEMENT

Evidence of death received in WD 2 Mar 45 [X] BATTLE [ ] NON-BATTLE

COPIES FURNISHED:

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

BY ORDER OF THE SECRETARY OF WAR:

J. A. Ulio

ADJUTANT GENERAL

WD AGO FORM 53-1
1 DECEMBER 1944

THIS FORM SUPERSEDES WD AGO FORM 53-1, 25 MAY 1944, WHICH STOCKS ARE EXHAUSTED.

439188

RTB:VM:md
August 15, 1945

Mr. George C. LaPorte
4102 Mondawmin Avenue
Baltimore, Maryland

Dear Mr. LaPorte:

The Army Effects Bureau has received from overseas some personal effects of your son, Sergeant Robert W. LaPorte.

I am inclosing ninteen cents in coins which were included with your son's effects. The remainder of the property is being forwarded to you in one carton.

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,

A. G. SCHUMACHER
1st Lt., QMC
Chief, Accounting Branch

Incl--Coins

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mr. George C. LaPorte
4102 Mondawmin Avenue
Baltimore, Maryland

SHIP TO:
Sgt. Robert W. LaPorte

Effects of: 13141708
Name

439188 D

ASN

Case No.

Wt.

DATE 15 August 1945
RTB:VM:md

Schreiber
VOF: Effects Quartermaster

REMARKS:

_____ Inclose Bureau Check
Acct. No. _____
Amount _____
x Inclose "Valuables" item
_____ Ship "Valuables" item(s)

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

ROUTING:

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

VALUABLES SHIPPED
DATE 8/17/45
BY

1 Ctn

REMARKS:

SHIP DAMAGED PROPERTY

Franked FRANKED AUG 23 1945
Est. Exp. Chgs. _____
Est. Frt. Chgs. _____
No. of packages 1

Shipping Clerk

Eff. QM Form 14 (26 Dec 44)

B11

PACKAGE DESCRIPTION: #I etc

ARMY EFFECTS BUREAU INVENTORY

439,188

DECEASED	X
MISSING	
P.O.W.	
ABANDONED	
TALLY NO.	9057
INV. DATE	26-Jul-45
ORIG. NO. OF PKGS.	1
BOX NO.	—
SHEET	1
OF	1 SHEETS

NAME: Robert W. LaPorte

A.S.N.: 13141708 RANK: Sgt

ORGANIZATION: 483 Bmb Sqdn.

	Belt	X	TOWELS & WASHCLOTHS	1	WINGS
1	BELT, MONEY (NO MONEY)	X	CLOTHING		BAGS, CLOTH OR TRAVEL
	Cloth, Wash	1	BRACELET IDENT.	1	BILLFOLD, (NO MONEY) w/c
	Coats		Brushes		Case
	Footwear, Pr.	1	CAMERAS w/case		Footlocker
	Gloves, Pr.		Glasses	4	KIT, SEW, FLP, OR WRITING
	Handkerchiefs		Knives	X	BOOKS
	Headwear		Lighters		Books, Address
	Jackets	X	MISC.		Books, Pilot Log
	Overcoats		Pen, Fountain		DIARY (REMOVED FOR DUR)
	Scarfs		Pencil, Mechanical		FILMS
	Shirts		Pipes		Letters
	Socks, Pr.		RELIGIOUS ARTICLES		Papers, Personal
	Ties		RIBBONS, DECORATION		Photos
	Towels		Rings		Shoe Shine Articles
	Trousers, Pr.		Tobacco		SHORT ENCRYPTER
	Trunks, Pr.		Toilet Articles	X	SOUVENIRS
	Underwear		WATCH		SOUVENIR MONEY
					Stationary
					TESTAMENTS
					U.S. MONEY (AMOUNT)

JP 8-7

REMARKS: Church address in 3121 Walbrook Avenue Baltimore 16 Maryland

ATTACHMENTS: X FORM #54 | FORM #100

1 toilet kit stained red shoe polish

WEIGHT	
G.I. REMOVED	
X	SHORTAGE ON REVERSE
	IDENT. TAGS REMOVED
	DIARY REMOVED
DATE SHIPPED	AUG 23 1945
	LOCKED STORAGE
	LAUNDRY REMOVED
X	#43 OR ADDITIONAL
	FILM REMOVED

C.A.T. none.

WAREHOUSE SPACE: 1914 X STORED BY: JPB

INVENTORIED BY: O. Cadwalader

PACKED BY: Strebton CHECKED BY:

DAMAGED

Eff. QM Form 11 (24 Feb 45)

ADDITIONAL REMARKS

SHORTAGES

19¢

U.S. GOVT. CHECK SHORT

NUMBER # 10758820

DATE Date 17-Feb-45

SYMBOL

AMOUNT

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

O. Cadwalader
INVENTORY CLERK

Curley
SUPERVISOR

G.I. REMOVED

NAME LAPORTE, ROBERT W. SGT 1708

BAY	PALLET	BOX	TALLY
53	44		9057

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
BOX		

Form 48

INVENTORY OF EFFECTS

(See AR 600-550)

LaPorte Robert W 13141708

(Last name) (First name) (Middle initial) (Army serial number)

late a Sgt 483 Bomb Sqdn

(Grade) (Organization or arm or service)

who ~~died~~ KIA on the 10 day of February, 19 45

CLASS I—Saber, insignia, decorations, medals, campaign badges, watches, manuscripts, and other articles valuable chiefly as keepsakes.

NUMBER	ARTICLES	*PACKAGE NUMBER
1	Camera and case	
1	Folder with pictures	
1	Wings	
1	Prayer book	
1	Wallet and bracelet	
1	Envelope containing pictures, letters, and book	

File

*To be filled out only in case of shipment to The Adjutant General.

CLASS II—Other effects

NUMBER	ARTICLES
5	T-Shirts
2	Bath towels
1	Khaki shirt
4	Pairs of socks
2	Gym trunks
1	Pair of civilian shoes
1	Pair of gym shoes
2	Khaki caps
1	Toilet kit and contents
1	Money belt

W.D., A.G.O. Form No. 54
July 1, 1933

16—31164

CLASS II—Continued

NUMBER	ARTICLES
3	Books
1	Belt
1	Carton of razor blades
9	Bars of soap
1	Pocket knife
1	Razor
2	Wrist watch straps
2	Handkerchiefs
1	Camera strap
1	Lock
5	Cans of powders & lotions
1	Shower soap canteen
2	Puzzle games

United States Government check #10,758,820 dated 17 Feb. 45 in the amount of nineteen cents ($.19) has been forwarded in letter of transmittal.

Money { Specie ... $ ..... Notes ... $ .....

I CERTIFY that the foregoing inventory comprises all the effects of the deceased whose name appears on the first page hereof, and that *~~the effects have been delivered~~

~~to~~ .....

(Give name and degree of relationship; if legal representative or beneficiary named by the deceased, so state)

*~~the effects of this person have been forwarded to the Adjutant General and those of this person have been sold.~~

Francis M. Farris

FRANCIS M FARRIS 1st Lt AC

Summary Court Officer

APO #247

(Station)

20 February, 19 45

(Date)

*Strike out words not applicable.

16—21164

MA

439188

483RD BOMBARDMENT SQUADRON
505TH BOMBARDMENT GROUP
APO #247, %Postmaster
San Francisco, California.

22 February 1945

SUBJECT: Effects of Personnel Killed in Action

TO : Effects Quartermaster, Kansas City Quartermaster Depot, Kansas City, Missouri.

1. One (1) Box containing personal Effects of Sgt Robert W. La Porte, 13141708, KILLED IN ACTION, has been forwarded to Effects Quartermaster, Kansas City Quartermaster Depot, Kansas City, Missouri.

2. United States Government Check #10758820, dated 17 February 1945 in the amount of Ninteen cents(.19) and WD AGO Form #54 are inclosed herewith.

3. Nearest of Kin is as follows: 3/30/45 pm

George C. LaPorte, Father
4102 Mondawmin Ave.
Baltimore, Maryland.

2 Incls:
1 Check, gov't (#10758820)
1 WD AGO Form #54

211756.

FRANCIS M. FARRIS,
1st Lt., Air Corps,
Commanding.

VALUABLES SHIPPED
DATE 8/18/45
BY

INVENTORY

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

JRM:VM:md

Case No. 439188

Date 14 August 1945

SUBJECT: Report of transaction in disposing of the effects of

Robert W. LaPorte (Name of deceased), 13141708 (Army Serial Number) late a

Sergeant (Grade), Air Corps (Organization, Army or Service) who died

on the 10 day of Feb, 1945, at Pacific Ocean 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., 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 _____, 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 7 August 1945, pursuant to Special Orders 228, Headquarters KCQM Depot, dated 25 September 1943, the application or affidavit of George C. LaPorte 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, George C. LaPorte (Name of person found entitled) of 4102 Mondawmin Avenue (Number, Street or Avenue), Baltimore (City, Town or Village) State of Maryland, 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)

JOHN R. MURPHY, Colonel, GMC
(Name, Rank, Organization)
SUMMARY COURT MARTIAL

Eff. QM Form 75