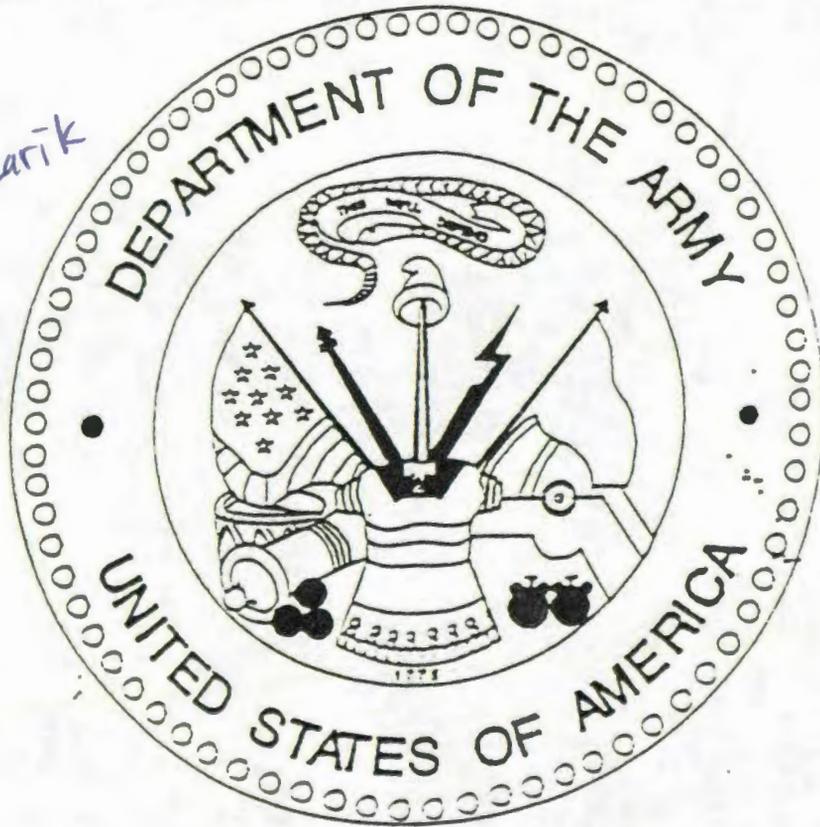


Staff Sgt  
Steven Koleszarik



# INDIVIDUAL DECEASED PERSONNEL FILE

February 16

February 20

125

REGISTER OF DENTAL PATIENTS AT  
Hunter Field, Georgia 13030228

(1) SURNAME		(2) CHRISTIAN NAME	
Koleszarik,		Stephen A.	
(3) RANK	(4) COMPANY	(5) REGIMENT OR STAFF CORPS	
Sgt.	Combat	Crew	
(6) AGE, YEARS	(7) RACE	(8) NATIVITY	(9) SERVICE, YEARS
20	W	Pa.	3
		(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.	
		Car R-5 do & f	
		(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS	
		A(2)-3 January 1944	
		(12) RESULTS AND REMARKS	
		Class II-IV J. Keller	

*[Signature]*  
ROBERT B. LOOS, Lt. Col. Dental Corps, U. S. A.

Form 79—MEDICAL DEPARTMENT, U. S. A.  
(Revised Feb. 24, 1941)

16-20622

REGISTER OF DENTAL PATIENTS AT

~~GODMAN FIELD DENTAL CLINIC~~

(1) SURNAME		(2) CHRISTIAN NAME	
Koleszarik		Stephen 13030228	
(3) RANK	(4) COMPANY	(5) REGIMENT OR STAFF CORPS	
Sgt	574	391 BG	
(6) AGE, YEARS	(7) RACE	(8) NATIVITY	(9) SERVICE, YEARS
20	W	Pa	3
		(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.	
		Car es Lam	
		(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS	
		Exam 11/17 11/17 1943	
		(12) RESULTS AND REMARKS	
		C Kendrick's CWK C1 2-4 Close CWK	

*[Signature]*  
Dental Corps, U. S. A.

Form 79—MEDICAL DEPARTMENT, U. S. A.  
(Revised Feb. 24, 1941)

16-20622

**\*REPORT OF DENTAL SURVEY\***

**UPPER TEETH**

Right Left

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8

**LOWER TEETH**

Right Left

16 15 14 13 12 11 10 9 9 10 11 12 13 14 15 16

CLASS II

Occlusion \_\_\_\_\_: Calculus: Slight, Medium, Heavy  
 Periodontoclasia \_\_\_\_\_  
 Dental foci suspected: Yes  No   
 Other conditions \_\_\_\_\_

Date Jan 3, 1944  
H. J. [Signature]  
 Dental Corps, U. S. A.

\*Restorable carious teeth by O  
 Nonrestorable carious teeth by /  
 Missing natural teeth by X

Teeth replaced by denture (horizontal line) 

X	X	X
---	---	---

Teeth replaced by fixed bridge (oval to include abutments) 

○	X	○
---	---	---

15-20623

**\*REPORT OF DENTAL SURVEY\***

**UPPER TEETH**

Right Left

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8

**LOWER TEETH**

Right Left

16 15 14 13 12 11 10 9 9 10 11 12 13 14 15 16

CLASS II

Occlusion Fair: Calculus: Slight, Medium, Heavy  
 Periodontoclasia no  
 Dental foci suspected: Yes  No   
 Other conditions none

Date Nov. 17, 1943  
Capt. C. W. Kendrick  
 Dental Corps, U. S. A.

\*Restorable carious teeth by O  
 Nonrestorable carious teeth by /  
 Missing natural teeth by X

Teeth replaced by denture (horizontal line) 

X	X	X
---	---	---

Teeth replaced by fixed bridge (oval to include abutments) 

○	X	○
---	---	---

16-20623

REGISTER OF DENTAL PATIENTS AT  
Station Hosp. Camp Cooke California.

(1) SURNAME		(2) CHRISTIAN NAME		
Koleszarik, Stephen A, Jr.		13030228		
(3) RANK	(4) COMPANY	(5) REGIMENT OR STAFF CORPS		
Pfc		3rd Obs. Sqd.		
(6) AGE, YEARS	(7) RACE	(8) NATIVITY	(9) SERVICE, YEARS	
19	W.	Pa.	12/12	
(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.				
				Caries R-4-mod
				Caries R-4-mo
				Caries R-15-o
				Caries L-4-do
				Caries L-4-m
(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS				
				May 19/12 Exam
				OA
				A
				OA
				OA
				A
				A
				A
(12) RESULTS AND REMARKS				
				Class 2
				Class 4
				IWA
				DNM
				DNB
				GWB
				GWB
				TSK
				TSK
				TSM

W. E. Sankey

Lt. Col., DC

Dental Corps, U. S. A.

FORM 79—MEDICAL DEPARTMENT, U. S. A.  
(Revised Feb. 24, 1941)

16-20622

REGISTER OF DENTAL PATIENTS AT

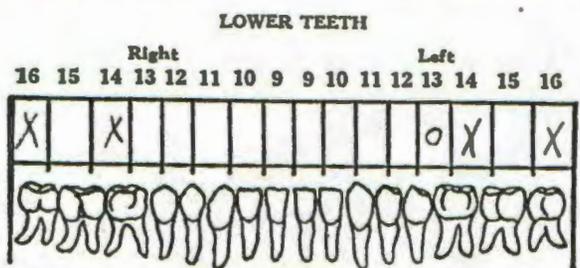
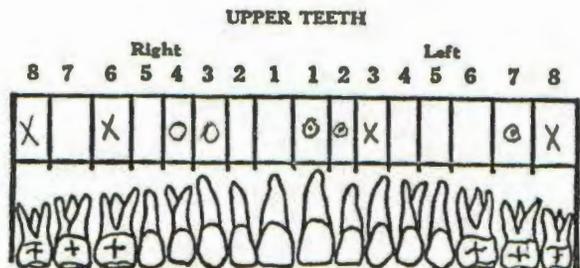
Langley Field, Va. 13030228

(1) SURNAME		(2) CHRISTIAN NAME		
Koleszarik,		Stephen A. Jr.		
(3) RANK	(4) COMPANY	(5) REGIMENT OR STAFF CORPS		
Pvt.		3rd Obsn.		
(6) AGE, YEARS	(7) RACE	(8) NATIVITY	(9) SERVICE, YEARS	
18	W	Pa.	8/12	
(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.				
				Dental Exam
				Car. I-2 d
				Car. I-2 m
				Car. I-1 d
				Car. I-7 o
(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS				
				February 1942
				14
				2
(12) RESULTS AND REMARKS				
				WTX
				WTX
				WTX

*W. E. Sankey*  
Dental Corps, U. S. A.

FORM 79—MEDICAL DEPARTMENT, U. S. A.  
(Revised Feb. 24, 1941)

GPO 16-20622



CLASS II

Occlusion N: Calculus: Slight, ~~Medium~~, Heavy

Periodontoclasia none

Dental foci suspected: Yes No

Other conditions \_\_\_\_\_

Date 2/2/42, 1942

W.H.  
Dental Corps, U. S. A.

\*Restorable carious teeth by O  
Nonrestorable carious teeth by /  
Missing natural teeth by X

Teeth replaced by denture  
(horizontal line) 

X	X	X
---	---	---

Teeth replaced by fixed bridge  
(oval to include abutments) 

	X	
--	---	--

10-720333

Teeth replaced by fixed bridge  
(oval to include abutments) 

	X	
--	---	--

Teeth replaced by denture  
(horizontal line) 

X	X	X
---	---	---

Missing natural teeth by X

\*Restorable carious teeth by O  
Nonrestorable carious teeth by /

Date 5.23, 1942

L.H.  
Dental Corps, U. S. A.

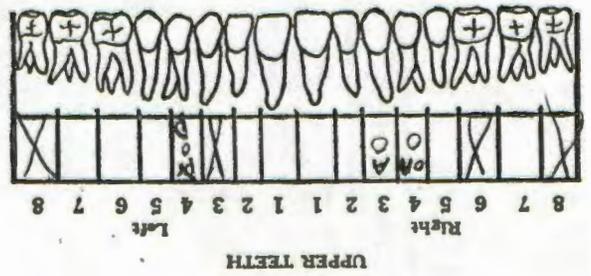
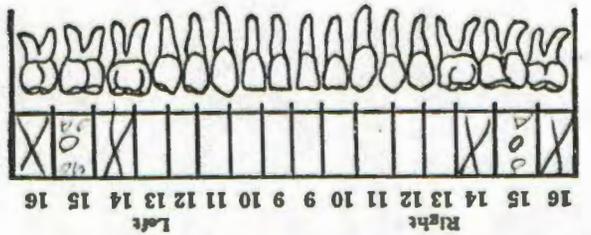
Other conditions \_\_\_\_\_

Dental foci suspected: Yes No

Periodontoclasia \_\_\_\_\_

Occlusion Normal: Calculus: Slight, ~~Medium~~, Heavy

CLASS 2



\*REPORT OF DENTAL SURVEY

293

8

ON STEPHEN REPEAT

STEPHEN A. KOLESZARIK JR 13030228 RACE WHITE HEIGHT 66 1/2 IN WT 118  
LBS FRAME M EYES BROWN HAIR BROWN COMPLEXTION RUDDY BORN 14 MAY 23  
SHOE SIZE 8E DENTAL CHART AT ENL 27 MAY 41 TEETH MISSING R 6 8 14 16

PAGE TWO UWYGP 86

WYFR DEM PERS REC BR AGO SL MO 23 MAY 49

4 14 16 4 FORMS 79 BEING SENT

86

23/18207

File  
Lamin  
IP Sec  
1 June 49

RRF #39  
13 Jul 48

Attached hereto correspondence and/or other identifying media of possible archival value, pertaining to:

KOLESZARIK

S

A

Jr

S SGT

13030228

(Last Name)

(First Name)

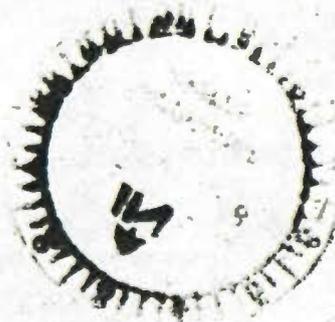
(Initial)

(Rank)

(ASN)

Repatriated to the United States:

17 June 1948



STATION FILE

Incl # 103

REPORT OF INVESTIGATION

AREA SEARCH

GhC Form # 10 (revised)

January 1946

3 August 1946

Date

NAME Koleszarik, Stephen, NMI RANK S/Sgt ASN 13030228

ORGANIZATION 391 Bomb Group

MEANS OF IDENTIFICATION Two (2) Identification tags found with body

(All statements above this line will be completed, upon final processing by the clerical staff at the unit processing int)

SECTION A-GENERAL (To be completed by investigators in all cases)

1. Was positive identify acquired for the deceased through the surface investigation? No If so, state the following information:

a. NAME DNA RANK DNA ASN DNA

b. ORGANIZATION DNA

2. Was partial identification established? Yes If so, state the facts as to whom you believe the deceased to be:

a. NAME Stephen A. Koleszarik RANK S/Sgt ASN 13030228

b. ORGANIZATION 9th Bomb. Cnd, 391 Bomb. Gp. 574 Sqd.

3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY?

4 Unknown American flyers

(Use reverse side for listing of crew members from MACH)

a. Date of above burials 8 August 1944 Common graves? Yes

Subject and 3 Unknown in common grave -- 1 Unknown single.

5. Name and Type of Cemetery Civilian Cemetery  
(Military or civilian)
6. Map Coordinates of the Cemetery "Cherbourg-Caen" Sh 3-8 (1/250,000) (T 92)  
St. Honorine-La-  
 a. Town Chardonne Country Orne, France
7. Give exact location in cemetery of the remains.  
 a. Section Left Row 8th from left Grave 3rd  
 b. Is Sketch attached? Yes
8. If remains are not located in a cemetery, give exact location,  
 a. To DNA Coordinates DNA  
 b. Is sketch attached? DNA  
 c. Is area mined? No
9. How is the grave marked? Wooden cross
10. If grave is marked with cross, give exact marking thereon  
See narrative
11. a. From what source was this information obtained? Personal effects  
(Identification tags, personal effects)  
 b. By whom Mr. Mercier
11. Where are the cemetery records? Town Hall  
(Town Hall, cemetery, burgomaster's office)  
 a. What information was contained thereon? No information  
pertaining to this case  
 b. Where was the information obtained? DNA  
 c. By whom? DNA
12. What is the date of death? 7 August 1944  
 a. Give basis See statements
13. What is the cause of death? Plane crash  
 a. Give basis See statements
14. What is the date of burial? 8 August 1944

a. Give basis See statements  
15. What was the place of death? St. Honorine-la-Chardonne Coords "Cherbourg-Caen" (1/250,000)  
Sh: 3-8 (T 92)

Give basis See statements  
16. Where were the remains found? St. Honorine-la-Chardonne Coords "Cherbourg-Caen" (1/250,000)  
Sh: 3-8 (T-92)

a. By whom? Civilians  
b. Is sketch attached? Yes

17. Was casket used? No Who furnished the casket? DNA  
Type of casket DNA How marked? DNA

18. Who made the burial Civilians  
(Civilian, American Mil, or German Mil.)

a. What are the names and addresses? \_\_\_\_\_  
See statements  
b. Are certificates and statements attached? Yes

SECTION B - AIR CORPS DECEASED (To be completed only if deceased is believed to be a member of the AAF).

19. Were remains found in the plane wreckage? Yes

a. Give location in plane from which the bodies were removed \_\_\_\_\_  
Pilot  
(Tail gunner, pilot, radio, burret, etc., or front side of plane)

b. Near \_\_\_\_\_? No

20. Scene of crash must be investigated. Give complete results of investigation (if removed, state when and by whom)

a. Type of plane B 26 (B 90) Bomber  
b. Markings and/or name of plane Bluesed  
c. Give numbers on motors, machine guns, instruments, radios or other equipment: NJ 87417 - 916870

21. How did crash occur? \_\_\_\_\_ Anti-aircraft? Yes  
Enemy planes? No Collision? No

22. Did plane burn in the air? No On ground? No
23. Did plane burn in the air? No On ground? Yes
24. What was the direction of the flight? Unknown
25. What was the civilian opinion regarding destination of plane?  
Unknown
26. Had bombs been released prior to the crash? No
27. Does specific time and date of crash correspond with the date of death of above named deceased? Yes
28. Number of planes in formation prior to crash? Unknown
29. State precise time and date of plane crash 1900 Hrs 7 August 1944  
(Night? Day?)
30. Were parachutists seen? Yes How many? 2 Escaped? No  
Prisoners? 1 Prisoner, 1 dead

SECTION C - ARMORED CORPS DECEASED (To be completed only if deceased is believed to have been a member of the Armored Forces).  
DOES NOT APPLY

31. Were remains found in wreckage of tank?  
a. Give specific position in tank from which deceased was removed.  
(Radio man, driver, assistant driver or front, side or back)  
b. Near wreckage? \_\_\_\_\_
32. Location of destroyed tank must be investigated. Give complete results of investigation. (If removed, state when and by whom)  
a. Type of tank \_\_\_\_\_  
b. Markings and/or name of tank \_\_\_\_\_  
c. Numbers on motors, machine guns, ammunition, instruments, etc \_\_\_\_\_
33. What was the type of enemy action that resulted in the tank's disablement?  
\_\_\_\_\_
34. Did tank explode? \_\_\_\_\_ Burn? \_\_\_\_\_

35. Number of tanks in immediate vicinity at time of disablement \_\_\_\_\_

36. Does specific time and date of disablement correspond with date of death  
of above named deceased? \_\_\_\_\_

37. Precise time and date of destruction of tank \_\_\_\_\_  
(Night?) \_\_\_\_\_ (Day?) \_\_\_\_\_

38. Did any of the crew members escape? \_\_\_\_\_ Prisoners? \_\_\_\_\_

**SECTION D - OTHER BRANCH (To be filled out if B & C are not applicable)**  
**DOES NOT APPLY**

39. Did death occur from any other means? (I.E., truck, jeep, mines, drowning  
or small arms fire) \_\_\_\_\_

40. State the specific clues and evidence that were obtained in securing the  
name and facts regarding the above listed deceased \_\_\_\_\_

**SECTION E - GENERAL (To be completed by investigation in all cases)**

41. Were personal effects recovered by the investigating team? Yes

If not, state reason: Not available

a. Were identification tags found at the time of death? Yes

Where? DNA By whom? DNA

Present disposition: Unknown

If deceased is not identified, personal effects will not be forwarded  
to PE Depot, but will remain with this form until final identification  
is made, or investigation is abandoned.

b. Were personal effects found at the time of death? Yes

Where? DNA By whom? DNA

Present disposition? Unknown

- c. Was deceased identified by living members of the crew at the time of death? No
- d. Did Cemetery register or cross indicate the immuncation shot? No
42. Was deceased given first aid? No If so, where? DNA  
 By whom? DNA Are statements from the medical people attached?  
No
43. Was deceased evacuated to a German civilian hospital? No  
 Where? DNA Names of people concerned DNA
44. Is it possible on surface investigation to obtain from civilian sources the condition of the remains? Yes, burned  
 (burnt, decapitated, etc)
45. Is it possible on surface investigation to obtain from civilian sources a physieal description of the deceased? No
46. Do facts surrounding death show any evidence that it might be an atrocity case? No  
 a. If so, give basis for positive assumption DNA  
 b. If so, has higher Headquarters been notified? DNA
47. Was case previously investigated? No By whom? DNA  
 When? DNA
48. Give full names, addresses, and information obtained from each person interviewed See statements
49. Give all positive statements regarding identification and particulars surrounding death attached? Yes

50. Has any information been given concerning isolated burials in the area outside the immediate vicinity?       No
51. Was investigation preceded by advanced publicity?       No
52. Give brief narrative       See attached sheet

(Use attached sheets, if necessary)

Signature of Interpreter

*James L. Finley*  
 \_\_\_\_\_  
 JAMES L. FINLEY  
 Signature of Investigator

Rank \_\_\_\_\_ ASN \_\_\_\_\_

2nd Lt. \_\_\_\_\_ 0-1338330 \_\_\_\_\_  
 Rank \_\_\_\_\_ ASN \_\_\_\_\_

Organization \_\_\_\_\_

531 QM Group Hqs \_\_\_\_\_  
 Organization \_\_\_\_\_

STATEMENT.

I, the undersigned, OUFRAY, MARIE, LOUISE, barkeeper at ST, HONORINE la CHARDONNE, certify to have seen an American plane in flames coming down on the ground of LA MARCELLINE, at ST. HONORINE la CHARDONNE, which was hit by the A.A., and I've seen coming down two paratroopers, one of them was killed by the German soldiers, in his fall, and the other is presumed to have been taken prisoner.

The first paratrooper who's name is unknown, has been buried alone, in a coffin, in the Cemetery of ST. HONORINE la CHARDONNE. The other members of the plane have been carbonised, and their remains have been buried in a common grave, and their papers have been taken away by the Gendarmes of ATHIS.

Written at ST, HONORINE la CHARDONNE,

The 24<sup>th</sup>. of July. 1946.

s/ M<sup>me</sup>. OUFRAY, MARIE, LOUISE.

Certify a true translation,

L. BLITS.

*Blits*

H E A D Q U A R T E R S  
4444. Comp Co Hqs (AC)  
531 QM Group AGRC  
APO 887 US Army

26 July 1946

N A R R A T I V E

On 7 August 1944 over the town of St. Honorine-La-Chardonne, Orne, France an American bomber was hit by anti-aircraft fire and fell on the territory of that town. One of the plane occupants parachuted but was killed in his fall. This one was buried alone in a coffin. Four others were found in and about the wreckage and were buried without coffins in a common grave. When these four were buried a plan was made of which body was located in which place. Identification by civilians of these four men was made by the identification tags found on each. Comparing the MACR attached case letter (Orne 4834) the fifth is identified, at least partially by the process of elimination.

All five remains have been disinterred and removed to 531st QM Group Processing Point for final processing and eventual reburial.

VERNE C. EDMUNDS  
2nd. Lt. INF  
Operations Officer

This narrative concerns STEPHEN A. KOLESZARIK, S/Sgt 13030228 known by location by sketch of his position in the grave and the identify tags from his remains recovered by civilians, then by this unit during investigation.

CIVILIAN - CEMETERY -

F/L NESBITT  
(BRITISH)

1-	2-	3-	4-	5-	6-	7-
----	----	----	----	----	----	----

4 AMERICAN. 1 AMERICAN.

\*

\* Subject Soldier one of the FOUR  
in this COMMON GRAVE.

R  
O  
9  
9-

IDENTIFICATION SECTION  
MEMORIAL DIVISION

10885

IDENTIFICATION DATA

LAST NAME - FIRST NAME - MIDDLE INITIAL			ARMY SERIAL NUMBER		GRADE
Koleszarik, Stephen A Jr.			13030228		S. Sgt
HEIGHT	WEIGHT	COLOR EYES	COLOR HAIR	SHOE SIZE	DATE OF DEATH
5 ft. 6 1/2 in.	118 lbs.	Brown	Bv.	8E.	7 Aug. 1944

LAST ORGANIZATION TO WHICH ATTACHED OR ASSIGNED (Give complete designation)

574<sup>th</sup> Bomb Sq. 391<sup>st</sup> Bomb Grp (M)

PLACE OF DEATH OR PLACE LAST SEEN IF MIA

killed in action on 7 Aug. 1944 near St. Honorine, Arne, France.

LIST ALL CAMPS IN WHICH STATIONED IN U.S. PRIOR TO SERVICE OVERSEAS, WITH INCLUSIVE DATES AT EACH.

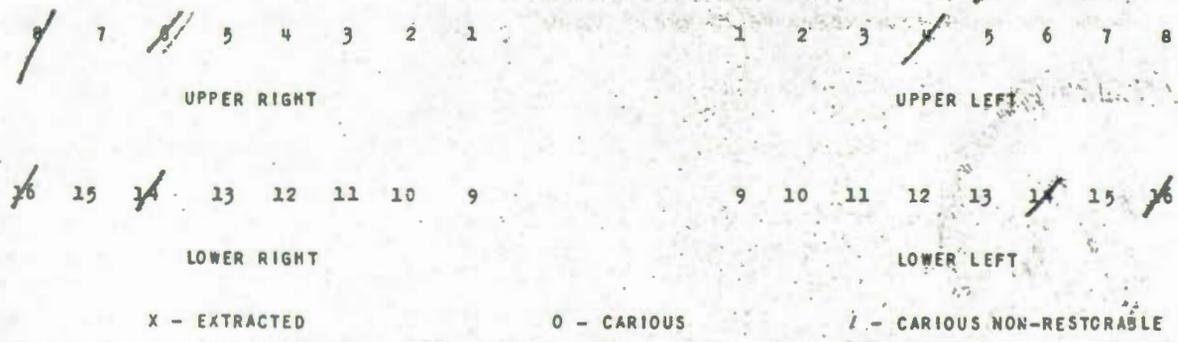
STATION	DATES
U. S. Army Rec. Sta. Harrisburg, Pa.	May 1941
Co: Langley Fld, Va	May 1941
3rd Assn Sq. OAS, OAB, Olythe Calif.	Nov 1942
CO: 71 <sup>st</sup> Assn Sq. Salinas, Calif.	Nov. 1942
CO: 25 <sup>th</sup> Assn Sq. Salinas Calif.	Nov. 1942
CO: 98 <sup>th</sup> Base Hq. TAB Sq. Eiler Fld. La.	Mar. 1943
CO: San Antonio Avn. Cadet Cen. San Antonio, Tex.	April 1943
CO: OAFRTC (Tech) Wichita Falls, Tex.	April 1943
CO: TS. OAFTC, Sioux Falls, S. Dak.	July 1943
CO: OAFBGS, Kingman, Ariz.	Sept. 1943
391 <sup>st</sup> Bomb Grp, FT. Knox, Ky.	Oct. 1943
	Nov 1943

FRACTURES AND/OR BREAKS

NO RECORDS IN FILE

TATTOOS AND/OR BIRTH MARKS

DENTAL CHART - 26 May 1941



# RECEIPT OF REMAINS

DISTRIBUTION CENTER

AGR DISTRIBUTION CENTER, PHILA. QM DEPOT

SUPERINTENDENT  
BALTIMORE NATIONAL CEMETERY  
BALTIMORE MARYLAND

DAY LETTER  
~~XXXXXXXX~~

O.I. 8956

REMAINS CONSIGNED TO:

24 3

REMAINS OF LATE S SGT S. A. KOLESZARIK, JR., 13030228 BEING SHIPPED  
TO YOU ACCOMPANIED BY MILITARY ESCORT ON TRAIN NUMBER TWENTY ONE  
BALTIMORE AND OHIO RAILROAD LEAVING PHILADELPHIA SEVEN ONE AM  
FIFTEENTH JULY AND DUE TO ARRIVE BALTIMORE MARYLAND MOUNT ROYAL  
STATION EIGHT FIFTY TWO AM RAILROAD TIME FIFTEENTH JULY. REQUEST  
YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS AT STATION UPON ARRIVAL  
AND NOTIFY NEXT OF KIN.

FRANK M. GREEN, JR., MAJOR, TC

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

THIS 15 DAY OF July, 1948

William Goetz Jr 1st Lt.  
WITNESS (Escort)

Roy B. Donaldson  
CONSIGNEE per py

NAT

FILE

RECORDS ANNOTATED

DATE 14 Aug 48

NAME Resident

F. & I. CO.

## RECORD OF CUSTODIAL TRANSFER

### 1. SHIPPED

FROM USMC Blosville		TO Casketing Point "A" Cherbourg	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER Pvt Spach	
SIGNATURE OF SHIPPER <i>Theodore C. Murray</i> Theodore C. Murray, Capt QMC	DATE 5-3-48	SIGNATURE OF RECEIVER <i>Everett N. Ciampo</i> Everett N. Ciampo, 1st Lt FA	DATE 5-3-48

### 2. SHIPPED

FROM Casketing Point "A" Cherbourg		TO Port Unit, Cherbourg	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER T/Sgt Fuller	
SIGNATURE OF SHIPPER <i>Everett N. Ciampo</i> Everett N. Ciampo, 1st Lt FA	DATE	SIGNATURE OF RECEIVER <i>John A. Hendry, Jr.</i> John A. Hendry, Jr. Maj CAC	DATE

### 3. SHIPPED

FROM CHERBOURG PORT UNIT		TO NYPE	
KIND OF CONVEYANCE USAT GREENVILLE VICTORY		NAME OF CONVOYER RAYMOND MC MANUS CAPT., TC	
SIGNATURE OF SHIPPER JOHN E. HENDRY, JR., MAJ CAC	DATE 17-6-48	SIGNATURE OF RECEIVER <i>Raymond E. McManus</i>	DATE 17/6/48

### 4. SHIPPED

FROM USAT GREENVILLE VICTORY		TO N.Y.P.E.	
KIND OF CONVEYANCE		NAME OF CONVOYER <i>m. Siegel</i>	
SIGNATURE OF SHIPPER RAYMOND E. MC MANUS, TC Captain, TC Transport Commander	DATE 25/6/48	SIGNATURE OF RECEIVER <i>for James L. McKinnon</i> JAMES L. MCKINNON COLONEL, T. C. PORT TRANSPORTATION OFFICER	DATE 20 JUN 1948

### 5. SHIPPED

FROM N.Y.P.E.		TO DCO3	
KIND OF CONVEYANCE <i>Main</i>		NAME OF CONVOYER <i>1st. Eugene J. Pate</i>	
SIGNATURE OF SHIPPER JAMES L. MCKINNON COLONEL, T. C. PORT TRANSPORTATION OFFICER	DATE JUN 27 1948	SIGNATURE OF RECEIVER <i>Eugene J. Pate</i>	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. 8956

# INSPECTION CHECK LIST

(For Use at Distribution Point)

Name <b>KOLESZARIK, S. A. Jr.</b>	Rank <b>S SG</b>	Serial Number <b>13030228</b>
--------------------------------------	---------------------	----------------------------------

Source <b>Susan E. Koleszarik (Mother) Oak St., Post Office Box 592 Central City, Pa.</b>	Consignee <b>Baltimore National Cemetery Baltimore, Maryland</b>
--	---

SHIPPING CASE - General Appearance (Check ONLY Discrepancies)	Condition of Shipping Case (Check One) <input type="checkbox"/> Satisfactory <input checked="" type="checkbox"/> Unsatisfactory
--	--

<input checked="" type="checkbox"/> FINISH (Exterior) <input type="checkbox"/> FINISH (Interior) <input type="checkbox"/> HANDLES <input type="checkbox"/> HANDLE BOLTS <input type="checkbox"/> STENCILING - NAMEPLATE <input type="checkbox"/> HEALTH PERMIT MARKER <input type="checkbox"/> HEALTH PERMIT NUMBER	Remarks  <b>J.F.</b>
---	----------------------------

CASKET - General Appearance (Check ONLY Discrepancies)	Condition of Casket (Check One) <input type="checkbox"/> Satisfactory <input checked="" type="checkbox"/> Unsatisfactory
---	---

<input checked="" type="checkbox"/> FINISH ( Exterior ) <input type="checkbox"/> HANDLES AND FASTENINGS <input type="checkbox"/> STENCILING - NAMEPLATE <input type="checkbox"/> CAM LOCKS (Sealing) <input type="checkbox"/> ODOR OR MOISTURE	Remarks  <b>J.F.</b>
--	----------------------------

ROUTED THROUGH

<input type="checkbox"/> MORTUARY OPERATING ROOM	<input type="checkbox"/> REPAIR SHOP
--	--------------------------------------

Condition of Remains <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory	Casket Repaired <input type="checkbox"/> Yes <input type="checkbox"/> No
Necessary Disinfection (Explain)	Casket Exchanged <input type="checkbox"/> Yes <input type="checkbox"/> No
	Shipping Case Repaired <input type="checkbox"/> Yes <input type="checkbox"/> No
	Shipping Case Exchanged <input type="checkbox"/> Yes <input type="checkbox"/> No
	Remarks

Time	Date	Signature or Mortician	Time	Date	Signature of Inspector
				<b>7/14/48</b>	<b>A. J. B. Mully</b>

Remarks

**Thursday 7/15**

**Sat. for Ship to Annapole 7-13-48**

**Reys**

**(4)**

**B-547**

WESTERN  
UNION

WESTERN  
UNION

WESTERN  
UNION

WU AA75 17 COLLECT

WINDBER PENN JUN 23 824A

A.G.R. DIVISION  
PHILA QM DEPOT

PHILA QM DEPOT

FRANK M GREEN JR MAJOR ASST

1948 JUN 23 AM 9:38

REGARDING S/SGT S. A. KOLES<sup>Z</sup>ARIK JR. CONFIRMING.

INFORMATION WISH REMAINS DETERRED BALTIMORE NATIONAL CEM-  
ETERY BALTIMORE MARYLAND

SUSAN E KOLES<sup>Z</sup>ARIK.

932A..



# MESSAGEFORM

MESSAGE CENTER No. TRANSMITTING MEANS

CRYPTOGRAPH OR CLEAR TEXT

CALLS

STA. SER. No.

PRECEDENCE

TRANSMISSION INSTRUCTIONS

ORIGINATOR

DATE-TIME GROUP

V

NR

JUN 21 1948

ACTION

INFORMATION

EXEMPT

OPERATING SIGNALS

GROUP COUNT

BR

SPACE ABOVE FOR SIGNAL CENTER ONLY

FROM: (Originator)

PHILADELPHIA QM DEPOT, PHILA., PA.

SECURITY CLASSIFICATION

ACTION TO:

- SUSAN E KOLESZARIK GOVT PAID
- OAK ST., POST OFFICE BOX 592
- CENTRAL CITY, PA.

PRECEDENCE FOR INFORMATION

DAY LETTER

O.I. 8956

 ORIGINAL MESSAGE

REFERS TO ANOTHER MESSAGE IDENTIFICATION CLASSIFICATION

INFORMATION TO:

DLR AND CHECK ANY CHGS

THIS HEADQUARTERS HAS BEEN ADVISED THAT THE REMAINS OF THE LATE S S G S A KOLESZARIK, JR

ARE ENROUTE TO THE UNITED STATES. RECORDS OF THIS OFFICE INDICATE YOU WISH REMAINS INTERRED AT BALTIMORE NATIONAL CEMETERY BALTIMORE, MD. WITHIN 48 HOURS OF DATE OF THIS MESSAGE PLEASE CONFIRM ABOVE DELIVERY INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS BY DAY LETTER TELEGRAM COLLECT TO PHILADELPHIA QUARTERMASTER DEPOT. PLEASE BE ADVISED THAT IT WILL NOT BE POSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF THE 48 HOUR PERIOD. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. NATIONAL CEMETERY SUPERINTENDENT WILL NOTIFY YOU BY TELEGRAM DATE AND HOUR FUNERAL SERVICES WILL BE HELD IN SUFFICIENT TIME TO PERMIT YOUR ATTENDANCE AT YOUR OWN EXPENSE. MILITARY ESCORT WILL ACCOMPANY REMAINS TO NATIONAL CEMETERY. PAYMENT OF SEVENTY FIVE DOLLAR INTERMENT EXPENSE ALLOWANCE NOT REPEAT NOT AUTHORIZED IN ANY CASE WHERE BURIAL IS IN A NATIONAL CEMETERY. APPROPRIATE JOINT MILITARY HONORS AND RELIGIOUS SERVICES WILL BE PROVIDED AT GRAVESIDE. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.

SECURITY CLASSIFICATION

D. G. POLLARD, 1LT COL., QMC

SIGNATURE

AUTHORIZATION

ORIGINATING AGENCY

SYMBOL

DATE-TIME GROUP

OFFICIAL TITLE

PAGE 1 OF 1

Date 15 July 1948

TO: Mrs. Susan E. Koleszarik  
Oak St, P.O. Box 592,  
Central City, Pa.

The authorized inscription for a Government headstone of the general type (furnished for all decedents except those who served only during the Civil and Spanish-American Wars) includes: (1) The State from which the veteran came; (2) religious emblem in a small circle above the inscription on the face of the headstone; and (3) the dates of birth and death.

In order that the appropriate information, as desired by the next of kin, may be shown on the headstone for the decedent whose name is listed below, it is requested that you fill in the proper spaces indicated below the data called for, and RETURN THIS FORM PROMPTLY TO THE  
Superintendent, Baltimore National Cemetery  
5501 Frederick Ave., Baltimore 28, Md.

Superintendent of Cemetery or Commanding Officer of Post

If this form is not returned to the Superintendent within fifteen (15) days from date of mailing, the headstone will be ordered with the data as to religious emblem, State and date of birth inscribed thereon as shown in the official records, and NO CHANGE WILL BE MADE AT A LATER DATE AT GOVERNMENT EXPENSE.

To be filled in by Superintendent or Commanding Officer

Name of Veteran <sup>243</sup> KOLESZARIK, S.A. Jr.  
Rank, etc. S/Sgt USA  
Grave or lot No. 5031 Section B  
Date of death \_\_\_\_\_  
Date buried 15 July 1948

To be filled in by Next of Kin

State desired Pa.  
Religious emblem desired Latin Cross  
(Latin Cross for Christian Faith, Star of David for Hebrew Faith)  
Date of birth 14 May 1923  
Address of kin Oak St P.O. Box 592 Central City Pa  
Signature Mrs Susan E. Koleszarik Date 15 July 1948

Stamp: AUG 20 1948  
Handwritten signature: *Al...*

REQUEST FOR DISPOSITION OF REMAINS

43/3

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

DATE:

S/Sgt. Stephen A. Koleszarik, Jr. 13 030 228  
 Plot DD, Row 3, Grave 41  
 United States Military Cemetery  
 Blossville, France

31 December 1947

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

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

PART I

1. MRS SUSAN KOLESZARIK  
(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

(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 Baltimore, PENNA

(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 Baltimore National Cemetery

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.)

03 5501 FREDERICK AVE  
Baltimore, Maryland

*Coded  
 3 apr 48  
 m Baker*

*St. Louis #1*

*Winn*

**PART I (Continued)**

If on Page 1 of this form you have selected Option Number 2 or 3, or Option Number 4 with you in 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 ( <i>Nearest railroad passenger station</i> )	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 ( <i>Nearest railroad passenger station</i> )	TELEGRAPH ADDRESS	TELEPHONE No.	

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

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

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

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

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

Mrs Susan Koleszarik  
(SIGNATURE OF NEXT OF KIN)

MRS. SUSAN KOLESZARIK  
(NAME PRINTED OR TYPED)

Box 592 (STREET AND NUMBER)

Central City, Pennsylvania  
(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 13th day of January,

19 48 at city (or town) of Central City, county of Somerset; and State (or Territory or District) of Pennsylvania

Fay R. Mulsally  
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

**NOTARY PUBLIC**  
(OFFICIAL TITLE)  
My Commission Expires Jan. 2, 1949

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

**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 Stephen Koleszarik, Father 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 <u>Koleszarik</u>	FIRST NAME <u>Susan</u>	MIDDLE INITIAL <u>E</u>
RELATIONSHIP TO THE DECEASED <u>Mother</u>		
NUMBER AND STREET <u>P.O. Box 592, Oak St.</u>	CITY OR TOWN <u>Central City</u>	STATE OR COUNTRY <u>PENNA.</u>

WHOM I UNDERSTAND SHALL HAVE THE RIGHT TO DIRECT FINAL DISPOSITION OF THE REMAINS OF THE DECEASED.

<u>Stephen Koleszarik</u> <small>(SIGNATURE OF NEXT OF KIN)</small>	<u>January 10, 1948</u> <small>(DATE)</small>
<u>Stephen Koleszarik</u> <small>(NAME PRINTED OR TYPED)</small>	<u>P.O. Box 592 Oak St.</u> <small>(STREET AND NUMBER)</small>
	<u>Central City, Pa</u> <small>(CITY AND STATE)</small>

**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

_____	_____
<small>(SIGNATURE)</small>	<small>(DATE)</small>
_____	_____
<small>(NAME PRINTED OR TYPED)</small>	<small>(STREET AND NUMBER)</small>
_____	_____
	<small>(CITY AND STATE)</small>

DEPARTMENT OF THE ARMY



*all*

QMGMT 293

S/Sgt Stephen A. Koleszarik, Jr.  
S.N. 13 030 228

16 February 1948

Mrs. Susan Koleszarik  
Box 592  
Central City, Pennsylvania

Dear Mrs. Koleszarik:

Reference is made to the inclosed form "Request for Disposition of Remains" designating a National Cemetery as the final resting place for your loved one.

Unfortunately, this National Cemetery is now closed to additional burials inasmuch as no grave space remains available. May I suggest that you select a Cemetery from the inclosed list of National Cemeteries presently having available grave space. In making the necessary change draw a line through the previously selected National Cemetery and enter the new one just above.

Your cooperation and promptness will avoid unnecessary delay and will be greatly appreciated.

Sincerely yours,

RICHARD B. COOMBS  
Major, QMC  
Memorial Division

Incls.  
Disposition Form  
Nat. Cem. list  
Return env.

RECORDS BRANCH  
FEB 17 8 55 AM '48  
MEMORIAL DIVISION

*K*

DEPARTMENT OF THE ARMY



QMGT 293  
Koleszarik, Stephen A. Jr.  
SN 13 030 228

31 December 1947

Mrs. Susan Koleszarik  
Oak Street  
Central City, Pennsylvania

Dear Mrs. Koleszarik:

Your letter pertaining to the remains of your son, the late Staff Sergeant Stephen A. Koleszarik, Jr., has come to my attention.

As you requested, I am forwarding a new "Request for Disposition of Remains" form. Since your husband is the next of kin authorized to direct disposition of your son's remains, it is necessary that he complete this form, indicating his desires in the matter.

Should your husband prefer to relinquish his right, he may do so by signing Part II of the form, and action will be taken on the instructions you give.

Your cooperation in returning this form to our office at your earliest convenience will be greatly appreciated.

Sincerely yours,

RICHARD B. COOMBS  
Major, QMC  
Memorial Division

Incls:  
Disposition Form  
Self addressed envelope

cc: sent to Mr. Arrowsmith

el

RBC

MEMORIAL DIVISION  
JAN 5 9 26 AM '48  
CORPUS BRANCH

75 10 03 11 20  
D. M. G.  
CORPUS BRANCH

CORRESPONDENCE ACTION SHEET

Addressee: <sup>Mr.</sup> ~~Miss.~~ Mrs. Susan Koleszarik mother  
 State Pa. Relationship  
 City, State Central City, Pa. Date letter '47  
 Cemetery  
 Temporary: \_\_\_\_\_  
 Permanent: - \_\_\_\_\_  
 Plot Row Gr Cem. Name or No. City Country

Decedent:

Koleszarik  
 Last  
 First  
 Initial  
 Rank  
 ASN  
 13 030 228

PARAGRAPHS  
(sequence)

-- ADDITIONAL -- DATA -- MODIFICATIONS --

165A

As you requested, I am ~~MMMN~~ forwarding a new "R for D of R" form. ~~the~~  
 Since your husband is ~~MMMN~~ next of kin authorized to direct disposition  
 of your son's remains, it is necessary that he complete this form,  
 indicating his desires in the matter.

Should your husband prefer to relinquish his right, he may do so  
 by signing Part II of the form, and action will be taken on the  
 instructions you give.

Your cooperation in returning this form to our office at your  
 earliest convenience will be greatly appreciated.

- 2 Incls.  
 1. OQMG Form 345  
 2. Envelope

Analyst Typist Reviewer  
 12-23

Modifications

OKed

Dec 15, 1947

Dear Sir:

In reading your letter I understand that my son will be moved to a cemetery and that he will not stay where he is now. And since he is to be moved I would like to have him brought home, if it is at all possible and its not to late. Please consider and if it is possible to have him brought home kindly send me another blank and I will return it promptly. Thank you kindly for your help and services.

Yours Very Truly  
Mrs. Susan Koleszarik  
Oak Street  
Central City, Penna.

993 Koleszarik, Stephen A 13030228

243 Koleszarik, Stephen A S/Sgt, 13030228 JW

**NIF**  
DDMG FORM 381  
11 MAR 47

**NOTICE OF CHANGE IN ADDRESS**

NAME OF DECEASED Stephen A. Koleszarik	RANK S/Sgt.	SERIAL NUMBER 13030228
NAME OF NEXT OF KIN Stephen A. Koleszarik	RELATIONSHIP Father	
OLD ADDRESS P.O. Box 282		
NEW ADDRESS Stephen A. Koleszarik Oak Street.		
REMARKS Central City, Penna. BLOSVILLE, PA DD-3-41		

U. S. GOVERNMENT PRINTING OFFICE 16-51932-1

*NAT-11/28/47  
File-1100*

.....  
293  
QMMF 293  
Kolessarik, Stephen A., Jr.  
SN 13 030 228

2 December 1947

Mrs. Susan Kolessarik  
Oak Street  
Central City, Pennsylvania

Dear Mrs. Kolessarik:

We have received the "Request for Disposition of Remains" form in regard to the final interment of the remains of your son, the late Staff Sergeant Stephen A. Kolessarik, Jr.

I have noted you wish the remains of your loved one to rest in the United States Military Cemetery, Elsoville, France; however, I must inform you this will not be possible as this cemetery will not be permanently maintained by our government. If the next of kin request permanent burial overseas, the remains will be moved to the United States Military Cemetery, St. Laurent, France, which has been designated as a permanent American Military Cemetery, dedicated in grateful remembrance of the Dead of World War II in this area.

I wish to assure you all necessary movement of the remains of your son will be made in a reverent and dignified manner under military protection. Appropriate religious services will be conducted by a Chaplain of his professed Faith at the time of the final burial and military honors provided. The exact location of his grave will be communicated to the next of kin, at a later date, together with other pertinent information of special interest.

However, we must return the form for additional information as the legal requirements of the legislation governing the final interment of the remains of our deceased military personnel make it necessary that we recognize the father's prior right. If your husband is in agreement with you as to the disposition of the remains of your son and wishes you to be the person authorized to act in this matter, he should complete Part II, at the top of page 3, thereby making your signature legally acceptable.

QMOMF 293 Koleszarik, Stephen A., Jr. - SN 13 030 228 2 December 1947 (Cont'd)

If your husband is no longer living, we should be furnished a certified copy of his certificate of death, or you may make a signed statement to this effect giving the date of death. This statement may be made on the last page of the form under "Additional Remarks and Instructions".

Your cooperation in this matter will be sincerely appreciated, and we have inclosed an envelope, which requires no postage, for your convenience in returning the completed form. Its prompt return will avoid further delay.

If you believe we can be of further assistance, please feel free to communicate with us at any time.

Sincerely yours,

2 Incls:  
#1 Form 345 - 15 Sept 47  
#2 Franked Envelope

RICHARD B. COOMBS  
Major, QMG  
Memorial Division

rcv  
SCV

rfs

2 4 copies  
D. Q. M. C.  
RECORDS

DEC 7 3 10 PM '47  
RECORDS SECTION

S/Sgt. Stephen A. Koleszarik Jr., 13 030 228  
Plot DD, Row 3, Grave 41,  
United States Military Cemetery  
Elsoville, France

15 September 1947

Mr. Stephen A. Koleszarik  
Post Office Box 282  
Cairnbrook, Pennsylvania

Dear Mr. Koleszarik:

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 R. LANKIN  
Major General  
The Quartermaster General

8 Incls.  
7/10

SEP 18 2 41 PM '47  
OQMG M&R

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON 25, D. C.

IN REPLY REFER TO

QMGYG 293

Koleszarik, Stephen A. Jr.

SN 13 030 228

RECORDS BRANCH

OCT 16 11 40 AM '46

MEMORANDUM FOR

11 September 1946



SUBJECT: Burial Records.

TO: Commanding Officer  
American Graves Registration Command  
European Theater Area  
APO 887, Postmaster  
New York, New York

1. Request the burial report and grave marker for the following decedent, interred at the United States Military Cemetery, Blosville, France, be changed to read as underlined:

NAME	RANK/ GRADE	SERIAL NO.	PLOT	ROW	GRAVE
Koleszarik, Stephen <u>A. Jr.</u>	S/Sgt.	13 030 228	DD	3	41

2. Records this office have been amended accordingly.

FOR THE QUARTERMASTER GENERAL:

*Martin G. Riley*  
MARTIN G. RILEY  
Major, QMC  
Assistant

TO: THE QUARTERMASTER GENERAL, WASHINGTON, D. C.  
FROM: THE AMERICAN GRAVES REGISTRATION COMMAND, NEW YORK, N. Y.  
SUBJECT: BURIAL RECORDS

12 10 45 AM '46

*G. L. W. 9-11*

O.C.H.G.  
OFFICE OF THE QUARTERMAS-TER GENERAL

Basic ltr. QMG, QMGYG 293, dtd 11 Sept. 46, sub: Burial records.

RRE (Blosville DD-3-41) 1st Ind. RGP/ww/rr  
HQ. AMERICAN GRAVES REGISTRATION COMMAND, ETA, APO 887, US Army, 26 Sept. 46.

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

Basic communication complied with. Major, GEC  
FOR THE COMMANDING OFFICER: *Joseph E. McCluskey*

JOSEPH E. McCLUSKEY  
1st Lt. Inf  
Actg Asst Adj Gen

12 030 533  
SECRET

HEADQUARTERS  
A G R C  
27 SEPT 1946  
52660  
OUT

GENERAL: Blosville, please be advised to lead as usual. The following decedent, interred at the United States Army Burial Center, Blosville, New York, is being reported and please check records.

TO: COMMANDING OFFICER

SUBJECT: BURLING RECORDS



11 September 1946

12 030 533  
OFFICE OF THE QUARTERMAS-TER GENERAL  
WAR DEPARTMENT

*10-14-46*  
*File*  
*Butler*  
FREE  
15 OCT 1946

*993 Katozavnik Stephen & Co.*

18 September 1946

Mr. Stephen A. Koleszarik  
Post Office Box 282  
Cairnbrook, Pennsylvania

Dear Mr. Koleszarik:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Staff Sergeant Stephen A. Koleszarik, Jr., A.S.N. 13 030 228.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Blueville, plot DD, row 3, grave 41. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

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

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

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN *Hm*  
Major General  
The Quartermaster General

Koleszarik, Jr

Stephen

A

13030228

S/sgt

14 Aug 23

#

AC 391 Bomb Sq

6 Aug 66

#

#

Koleszarik, Stephen A.

Father

P.O. Box 262

Cairnbrook, Pennsylvania

US Mil Com Bloisville, France

DD

3

hl

Koleszarik, Jr

Stephen A

13030228

QMGYG 293  
Koleszarik, Stephen A. Jr.  
SN 13 030 228

11 September 1946

SUBJECT: Burial Records.

TO: Commanding Officer  
American Graves Registration Command  
European Theater Area  
APO 887, Postmaster  
New York, New York

1. Request the burial report and grave marker for the following decedent, interred at the United States Military Cemetery, Bloisville, France, be changed to read as underlined:

<u>NAME</u>	<u>RANK/ GRADE</u>	<u>SERIAL NO.</u>	<u>PLOT</u>	<u>ROW</u>	<u>GRAVE</u>
Koleszarik, Stephen <u>A. Jr.</u>	<u>S/Sgt.</u>	13 030 228	DD	3	41

2. Records this office have been amended accordingly.

FOR THE QUARTERMASTER GENERAL:

odb

MARTIN G. RILEY  
Major, QMC  
Assistant

SEP 12 9 10 AM '46  
REGISTRATION AND  
RECORDS BRANCH  
MEMORIAL DIVISION

SEP 12 10 43 AM '46

RECORDS SECTION

JJ  
EK

28 Aug. 46  
Date

293  
NAME: Koleszanski, Stephen

SERIAL NO. 13030228

CEMETERY Blossville + Home

PLOT DD

ROW 3

GRAVE 41

LETTER TO: Field

Correct Records to Read:

Koleszanski, Stephen Jr  
Pailey  
Special Checker

Changes made in information on Burial Report are from sources listed below:

1. A.C.I. Death Report
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

J. Jacks.  
Officer's Initials:

*[Handwritten signature/initials]*

14 CORRECTIONS AND ADDITIONS TO BURIAL REPORTS AS TAKEN FROM AG CAS CAP

CEMETERY BLOSVILLE PLOT DD ROW 3 GRAVE 41  
NAME *293* KOLESZARIK STEPHEN A  
RANK *DA*  
ASN. : : B SGT  
ORGANIZATION : : 13030228  
DATE OF DEATH : : 391 BOMB GP *8-23*  
PLACE OF DEATH : : ---  
CAUSE OF DEATH : : ---

SEP 13 2 03 PM '46  
RECORDS BRANCH  
MEMORIAL DIVISION

T. CYR 15 Aug. 46  
(Signature)

4 FEB 1947  
FILE

RESTRICTED

(Orne 4834)

105

WD QMC FORM 1042  
(Rev. 1 Apr. 1945)  
(Supersedes GRS Form 1)

REPORT OF INTERMENT  
(AR 30-1810 and AR 30-1815)

DATE OF REPORT  
3 August 1946

Imprint Identification Tag If Possible.  
DO NOT TYPE

Section 1.—IDENTIFICATION.



NAME (Last, first, middle initial)

143 Koleszarik, Stephen, ~~III~~ A., Jr.

SERIAL No.

13030228

GRADE

S/Sgt

ORGANIZATION

391 Bomb. Group

BRANCH OF SERVICE

A.A.F.

RACE

White

RELIGION

Catholic

IF OTHER THAN U. S. DEAD, GIVE  
NAME OF COUNTRY

DNA

PLACE OF DEATH Cherbourg-Caen  
St. Honorine la Chardonne,  
Orne, France 3&8 1/250,000

CAUSE OF DEATH

Plane crash

DATE OF DEATH

7 August 1944

EMERGENCY ADDRESSEE (Name, relationship, and address)

Unknown

IDENTIFICATION TAGS FOUND ON BODY  
(1, 2, or none)

Two (2)

IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)

WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)

No

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

None

Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

U S Military Cemetery, Blosville, France T-346960

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
6 Aug 46	1500	Casket	Cross	DD	3	41

WAS THIS A REBURIAL?  
(Yes or no)

Yes

IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE

Civ cemetery, St. Honorine-La Chardonne, Orne, France  
Cherbourg-Caen Sh: 3 & 8 1/250,000 T 92

PLOT No.	ROW No.	GRAVE No.
left	8th	3rd

TYPE OF RELIGIOUS CEREMONY

Committal

PERSON CONDUCTING BURIAL RITES

IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY

FILE

23 SEP 1946

IDENTIFICATION TAG BURIED WITH BODY (Yes or no)

Yes

IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)

Yes

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)

Beginning of Row

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)

McFarland, John W.

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

SIGNATURE OF PERSON PREPARING REPORT

JAMES L. FINLEY  
2nd Lt. INF  
531 QM Group Hqs

SIGNATURE OF GRS OFFICER VERIFYING REPORT

Major A. Lilly Jr.

Major A. Lilly Jr.  
2nd Lt. Inf.  
Reintering Officer

DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.

RESTRICTED

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

**-BATTLE CASUALTY REPORT**

1946 APR 12  
 DATE CAS. REPORT RECEIVED

AG 201	NAME KOLESZARIK STEPHEN A JR ASN 13 030 228	GRADE S/SGT SON	
NAME AND ADDRESS OF F. A.	MRS SUSAN KOLESZARIK /MOTHER/ POST OFFICE BOX 282 CAIRNBROOK PENNSYLVANIA		10 45 DATE TELEGRAM SENT

THE INDIVIDUAL NAMED BELOW DESIGNATED THE ABOVE 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.

THE SECRETARY OF WAR HAS ASKED ME TO EXPRESS HIS DEEP REGRET THAT YOUR SON

GRADE	NAME	SERIAL NUMBER	ARM OR SERVICE	REPORTING THEATRE	F OR J STATUS	SHIPMENT NUMBER	
S/SGT	KOLESZARIK, STEPHEN A., JR.	13030228	AC		L	100019- U-1X	
TYPE OF CASUALTY		PLACE OF CASUALTY			DATE OF CASUALTY		
KILLED IN ACTION		IN FRANCE			DAY	MONTH	YEAR
					7	AUG	44
				CASUALTY CODE			

REMARKS:  CORRECTED COPY  
 AG 201 /8 APR 46/

MEMO SR AND D SECT, APPROVED BY ACTING CHIEF, CAS. BR. SOURCE, MESSAGE FM. FROM HQS, US FORCES, EUROPEAN THEATER, DTD 23 MAR 46. PLACE NEAR ST. HONORINE /ORNE/. FINDING OF DEATH HAS BEEN ISSUED PREVIOUSLY UNDER SECT. 5, PUBLIC LAW 490, 7 MAR 42, AS AMENDED, SHOWING PRESUMED DATE OF DEATH AS 3 AUG 45. THIS REPORT OF DEATH, BASED ON INFO REC'D SINCE THAT DATE, IS ISSUED IN ACCORDANCE WITH SECTION 9 OF SAID ACT, AND ITS EFFECT ON PRIOR PAYMENTS AND SETTLEMENTS IS AS PRESCRIBED IN SECT. 9.

DO NOT SEND TELEGRAM. PROCESS IN ACCORDANCE WITH PARA 2B OF BUL. 35, 1945.

Reports of death issued 18 Apr 46 ecw 28 Apr 46 *MIDY*

ACTION BY COMPOSITE SECTION: REPORT VERIFIED <input checked="" type="checkbox"/>		FORM 43	AG 201 REG.
CASUALTY BRANCH FILE ATTACHED <input checked="" type="checkbox"/> OR CHARGED TO			DATE
PREVIOUSLY REPORTED NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> (AS INDICATED BELOW):			
FILE NO. <i>Form 0353</i>	MESSAGE NO.	TYPE <i>Ded</i>	DATE AND AREA <i>8 Aug 45 ETO</i>
FORWARDED TO		E. A. NOTIFIED <i>8 Aug 45</i>	
SPEC. IDEN.	C. & P.	TELEGRAM	LETTER
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
REPORT NOT VERIFIED		NO FORM 43	NO CAS. BR. FILE
CHECKED BY <i>Purser</i>		REVIEWED BY <i>Beary</i>	

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

3792

**FINDING OF DEATH OF MISSING PERSON**

Pursuant to the provisions of Section 5 of the Act of 7 March 1942 (Public Law 490 77th Cong.) as amended, upon direction and delegation by The Secretary of War, The Chief, Casualty Branch, The Adjutant General's Office, finds Staff Sergeant Stephen A.

Koleszarik, Junior, Army Serial Number 13,030,228, Air Corps,  
to be dead. He was officially reported as missing in action as of the 7th day of August 1944. For the purposes stated in said Act, death is presumed to have occurred on the 8th day of August, 1945.

BY ORDER OF THE SECRETARY OF WAR

*George F. Hebert*

ADJUTANT GENERAL  
CHIEF, CASUALTY BRANCH

SUMMARY OF INFORMATION

AREA		PLNS STATUS	JUMP STATUS	LINE OF DUTY	C MIS-CONDUCT	ON DUTY STATUS	ABSENCE AUTH'D
European		Yes	No	Yes	No	Yes	
PREVIOUS REVIEWS							
None							
DATE OF BIRTH	HOME ADDRESS	DATE OF ENTRY ON CURRENT ACTIVE SERVICE		LENGTH OF SERVICE (AS OF PRESUMED DATE OF DEATH)			
14 May 1923	Cairnbrook, Pennsylvania	27 May 1941		YEARS	MONTH	DAYS	
over three years							
EMERGENCY ADDRESSEE							
NAME		RELATIONSHIP	ADDRESS				
Mrs. Susan Koleszarik		Mother	Post Office Box 282 Cairnbrook, Pennsylvania				
BENEFICIARIES							
NAME		RELATIONSHIP	ADDRESS				
Mrs. Susan Koleszarik		Mother	Post Office Box 282 Cairnbrook, Pennsylvania				
Mr. Stephen A. Koleszarik		Father	Cairnbrook, Pennsylvania				
REMARKS							
Distribution -- 56							
Circumstances of disappearance: He was a crew member aboard a B-26 (Marauder) aircraft which failed to return from bombing mission to Nogent Le Roi, France.							

FILE  
AUG 13 1945  
*U/S*

# SENSITIVE SURFACE - HANDLE EDGES ONLY

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

REPORT OF DEATH

DATE 18 April 1946 ecw

FULL NAME <b>Koleszarik, Stephen A. Jr.</b>		ARMY SERIAL NUMBER <b>13030228</b>	GRADE <b>S/Sgt</b>
HOME ADDRESS <b>Cairnbrook, Pennsylvania</b>		ARM OR SERVICE <b>Air Corps</b>	DATE OF BIRTH <b>14 May 1923</b>
PLACE OF DEATH <b>European Area</b>	CAUSE OF DEATH <b>Killed in action</b>		DATE OF DEATH <b>7 Aug 44</b>
STATION OF DECEASED <b>European Area</b>		DATE OF ENTRY ON CURRENT ACTIVE SERVICE <b>27 May 41</b>	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS

EMERGENCY ADDRESSEE (Name, relationship, and address)  
**Mrs. Susan Koleszarik (mother) Post Office Box 282, Cairnbrook, Pa.**

BENEFICIARY (Name, relationship, and address)  
**Mrs. Susan Koleszarik (mother) same as above**  
**Mr. Stephen A. Koleszarik (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
										<input checked="" type="checkbox"/>			

ADDITIONAL DATA AND/OR STATEMENT  BATTLE  NON-BATTLE

Finding of death has been issued previously under Sec 5, Public Law 490, 7 Mar 42, as amended, showing presumed date of death as 8 Aug 45. This Report of Death based on information received since that date, is issued in accordance with Sec 9 of said Act, and its effect on prior payments and settlements is as prescribed in Sec 9.

BY ORDER OF THE SECRETARY OF WAR

*Marie W. Delton*

ADJUTANT GENERAL

FILE

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

180968 043

BATTLE CASUALTY REPORT

NAME		SERIAL NUMBER		GRADE	ARM OR SERVICE	REPORTING THEATRE
KOLESZARIK STEPHEN A.		13030228		S SG	AC	ETO
PLACE OF CASUALTY		DATE OF CASUALTY		FLYING OR JUMPING STAT	TYPE OF CASUALTY	SHIPMENT NUMBER
FRANCE		DAY	MONTH	YEAR		
		07	AUG	44	H	MIA
						163

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 SUSLAN KOLESZARIK	MOTHER	23 AUG 44
NO. AND NAME OF STREET—CITY—STATE		
MILANBROOK PENNSYLVANIA		

REMARKS:

CORRECTED COPY

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

CASUALTY BRANCH FILE ATTACHED \_\_\_\_\_ OR CHARGED TO \_\_\_\_\_ DATE \_\_\_\_\_

PREVIOUSLY REPORTED NO  YES \_\_\_\_\_ (AS INDICATED BELOW):

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

FORWARDED TO  SPEC. IDEN.  TELEGRAM  WOUNDED  LETTER  CORRES.  S. R. & D.  CER. IF.  M. & M.  NON-DET.

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.

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

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COPIES FURNISHED: SEE CASUALTY BRANCH MEMORANDUM NO. 48, 1944.

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COPIES FURNISHED: SEE CASUALTY BRANCH MEMORANDUM NO. 48, 1944.

190.968

CASUALTY BRANCH  
The Adjutant General's Office  
Washington

21 December 1944.

MISSING

~~XXXX~~ AGFC-G 201 Koleszarik, Stephen A. Jr.  
(8 Dec 44)

MEMORANDUM FOR RECORD

SUBJECT: Change of Address of Emergency Addressee.

A communication has been received from ~~Mrs. Susan Koleszarik~~  
~~relative to her son, Staff Sergeant Stephen A. Koleszarik, Jr., 13,030,228,~~  
~~who has been reported missing in action since 7 August 1944 over France,~~  
requesting that the records of this office be amended as follows:

FROM

Mrs. Susian Koleszarik, mother,  
Cairnbrook, Pennsylvania.

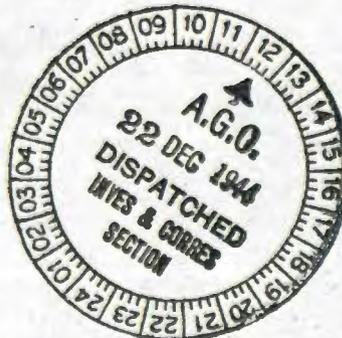
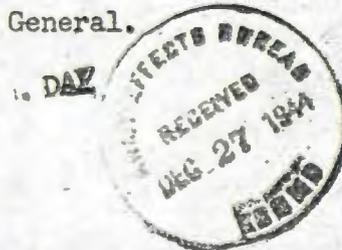
TO

Mrs. Susan Koleszarik, mother,  
Post Office Box 282,  
Cairnbrook, Pennsylvania.

Copies Furnished:

Adjutant General.

- Director, Bureau of Public Relations
- ~~Effects~~ Quartermaster, Kansas City, Mo.
- C. G., Army Air Forces (If Air Corps Personnel)
- Cas. Pay Rec. Bureau, FD
- Gravelly Point, Bldg., T-7.
- AG 201 file



# SENSITIVE SURFACE - HANDLE EYES ONLY

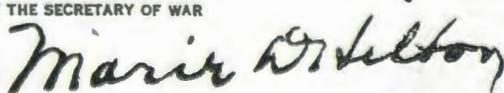
**WAR DEPARTMENT**  
**THE ADJUTANT GENERAL'S OFFICE**  
 WASHINGTON 25, D. C.

180,968

*BL*

**REPORT OF DEATH**

DATE 18 April 1946 ecw

FULL NAME <b>Koleszarik, Stephen A. Jr.</b>				ARMY SERIAL NUMBER <b>13030228</b>				GRADE <b>S/Sgt</b>					
HOME ADDRESS <b>Cairnbrook, Pennsylvania</b>				ARM OR SERVICE <b>Air Corps</b>				DATE OF BIRTH <b>14 May 1923</b>					
PLACE OF DEATH <b>European Area</b>				CAUSE OF DEATH <b>Killed in action</b>				DATE OF DEATH <b>7 Aug 44</b>					
STATION OF DECEASED <b>European Area</b>				DATE OF ENTRY ON CURRENT ACTIVE SERVICE <b>27 May 41</b>				LENGTH OF SERVICE FOR PAY PURPOSES					
								YEARS		MONTHS		DAYS	
EMERGENCY ADDRESSEE (Name, relationship, and address)  <b>Mrs. Susan Koleszarik (mother) Post Office Box 282, Cairnbrook, Pa.</b>													
BENEFICIARY (Name, relationship, and address) <b>Mrs. Susan Koleszarik (mother) same as above</b> <b>Mr. Stephen A. Koleszarik (father) same as above</b>													
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
										YES <input checked="" type="checkbox"/>	NO	YES	NO
ADDITIONAL DATA AND/OR STATEMENT													
										<input checked="" type="checkbox"/> BATTLE		<input type="checkbox"/> NON-BATTLE	
<p>Finding of death has been issued previously under Sec 5, Public Law 490, 7 Mar 42, as amended, showing presumed date of death as 8 Aug 45. This Report of Death based on information received since that date, is issued in accordance with Sec 9 of said Act, and its effect on prior payments and settlements is as prescribed in Sec 9.</p>													
BY ORDER OF THE SECRETARY OF WAR  ADJUTANT GENERAL													

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

**BATTLE CASUALTY REPORT**

1946 APR 12 10 45  
CAS. REPORT RECEIVED  
DATE TELEGRAM SENT

AG 201	NAME KOLESZARIK STEPHEN A JR ASN 13 030 228	GRADE S/SGT SON
NAME AND ADDRESS OF E. A.	MRS SUSAN KOLESZARIK /MOTHER/ POST OFFICE BOX 282 CAIRNBROOK PENNSYLVANIA	

THE INDIVIDUAL NAMED BELOW DESIGNATED THE ABOVE 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.

THE SECRETARY OF WAR HAS ASKED ME TO EXPRESS HIS DEEP REGRET THAT YOUR SON

GRADE	NAME	SERIAL NUMBER	ARM OR SERVICE	REPORTING THEATRE	P OR J STATUS	SHIPMENT NUMBER
S/SGT	KOLESZARIK, STEPHEN A., JR.	13030228	AC		L	100019-U-1X
TYPE OF CASUALTY		PLACE OF CASUALTY		DATE OF CASUALTY		
KILLED IN ACTION		IN FRANCE		DAY	MONTH	YEAR
				7	AUG	44
				CASUALTY CODE		

REMARKS:  CORRECTED COPY  
AG 201 /8 APR 46/

MEMO SR AND D SECT, APPROVED BY ACTING CHIEF, CAS. BR. SOURCE, MESSAGE FM. FROM HQS, US FORCES, EUROPEAN THEATER, DTD 23 MAR 46. PLACE NEAR ST. HONORINE /ORNE/. FINDING OF DEATH HAS BEEN ISSUED PREVIOUSLY UNDER SECT. 5, PUBLIC LAW 490, 7 MAR 42, AS AMENDED, SHOWING PRESUMED DATE OF DEATH AS 8 AUG 45. THIS REPORT OF DEATH, BASED ON INFO REC'D SINCE THAT DATE, IS ISSUED IN ACCORDANCE WITH SECTION 9 OF SAID ACT, AND ITS EFFECT ON PRIOR PAYMENTS AND SETTLEMENTS IS AS PRESCRIBED IN SECT. 9.

DO NOT SEND TELEGRAM. PROCESS IN ACCORDANCE WITH PARA 2B OF BUL. 35, 1945.

Reports of death issued 18 Apr 46 ecw 28 Apr 46 *M. D. T.*

ACTION BY COMPOSITE SECTION: REPORT VERIFIED <input checked="" type="checkbox"/>		FORM 43	AG 201 REQ
CASUALTY BRANCH FILE ATTACHED <input checked="" type="checkbox"/>		OR CHARGED TO _____ DATE _____	
PREVIOUSLY REPORTED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>		(AS INDICATED BELOW):	
FILE NO. <i>Form 0353</i>	MESSAGE NO.	TYPE <i>Ded</i>	DATE AND AREA <i>8 Aug 45 ETO</i>
		E. A. NOTIFIED <i>8 Aug 45</i>	
FORWARDED TO <input checked="" type="checkbox"/>	SPEC. IDEN. <input type="checkbox"/>	G. & P. <input type="checkbox"/>	TELEGRAM <input type="checkbox"/>
	LETTER <input checked="" type="checkbox"/>	CERTIF. <input type="checkbox"/>	F. REL. <input type="checkbox"/>
	CORRES. <input type="checkbox"/>	REPAT. <input type="checkbox"/>	S. R. & D. <input type="checkbox"/>
	NON-DEL. <input type="checkbox"/>	REPORT NOT VERIFIED <input type="checkbox"/> NO FORM 43 <input type="checkbox"/> NO CAS. BR. FILE <input type="checkbox"/>	
CHECKED BY <i>P. R. S.</i>		REVIEWED BY <i>4/12/46 B. S.</i>	

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

3792

180,968  
BA

**FINDING OF DEATH OF MISSING PERSON**

Pursuant to the provisions of Section 5 of the Act of 7 March 1942 (Public Law 490 77th Cong.) as amended, upon direction and delegation by The Secretary of War, The Chief, Casualty Branch, The Adjutant General's Office, finds Staff Sergeant Stephen A. Koleszarik, Junior, Army Serial Number 13,030,228, Air Corps, to be dead. He was officially reported as missing in action as of the 7th day of August 1944. For the purposes stated in said Act, death is presumed to have occurred on the 8th day of August, 1945.

BY ORDER OF THE SECRETARY OF WAR

*George F. Herbert*

ADJUTANT GENERAL  
CHIEF, CASUALTY BRANCH

SUMMARY OF INFORMATION

PLACEMENT STATUS	JUMP STATUS	LINE OF DUTY	DISCONDUCT	ON DUTY STATUS	ABSENCE AUTH'D
European	Yes	No	Yes	No	Yes

PREVIOUS REVIEWS	None
------------------	------

DATE OF BIRTH	HOME ADDRESS	DATE OF ENTRY OR CURRENT ACTIVE SERVICE	LENGTH OF SERVICE (AS OF PRESUMED DATE OF DEATH)		
			YEARS	MONTH	DAYS
14 May 1923	Cairnbrook, Pennsylvania	27 May 1941	over	three	years

EMERGENCY ADDRESSEE

NAME	RELATIONSHIP	ADDRESS
Mrs. Susan Koleszarik	Mother	Post Office Box 282 Cairnbrook, Pennsylvania

BENEFICIARIES

NAME	RELATIONSHIP	ADDRESS
Mrs. Susan Koleszarik	Mother	Post Office Box 282 Cairnbrook, Pennsylvania

NAME	RELATIONSHIP	ADDRESS
Mr. Stephen A. Koleszarik	Father	Cairnbrook, Pennsylvania

REMARKS

Distribution 56

Circumstances of disappearance: He was a crew member aboard a B-26 (Marauder) aircraft which failed to return from bombing mission to Nogent Le Roi, France.

ARMY SERVICE FORCES  
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO:

Mrs. Susan Koleszarik

P.O. Box #282

Ceairbrook, Pennsylvania

Effects of:

Name

S/Sgt. Stephen A. Koleszarik

ASN

13030228

Case No.

180968 M

Wt.

DATE 16 July 1945

*E. Gillette*

FOR: Effects Quartermaster

REMARKS: RTB:RW:11

- Inclose Bureau Check  
Acct. No. 94029  
Amount \$95.10 *4/10*
- Inclose "Valuables" item
- Ship "Valuables" item(s)

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

101306 dk

ROUTING:

- Accounting Branch *ser*
- Warehouse Division
- Files Branch, Adm. Div.

94029

180968

REGISTERED

867-217  
VALUABLES SHIPPED

July 24 45

Susan Koleszarik

95.10

DATE 11/30/45

Ninety-Five and 10/100

BY *EG*

FRANKED AUG 3 1945

REMARKS:

- Franked \_\_\_\_\_
- Est. Exp. Chgs. \_\_\_\_\_
- Est. Frt. Chgs. \_\_\_\_\_
- No. of packages 2

Ship damaged items

*JMA*  
Shipping Clerk

PACKAGE DESCRIPTION  
#1 Chn

ARMY EFFECTS BUREAU INVENTORY

180,968  
712

DECEASED  
MISSING   
P.O.W.  
ABANDONED  
TALLY NO. 8224  
INV. DATE June 1945  
Orig. No. 1  
CF PKGS. 1  
PCX NO.  
SHEET OF 1 SHEETS  
ORGANIZATION  
574<sup>th</sup> Bomb Sq  
391st Bomber Grp

NAME Stephen F. Koleszarki  
A.S.N. 13030228 RANK S/Sgt

Belt		TOWELS & WASHCLOTHS		RINGS	
REF. MONEY (NO MONEY)	X	CLOTHING		BAGS, CLOTH OR TRAVEL	
Cloth, Wash		BRACELET IDENT.	1	BILLFOLD, (NO MONEY) w/c	
Coats		Brushes		Case	
Footwear, Pr.		CAMBRAS		Footlocker	
Gloves, Pr.		Glasses		KIT, SEE, FIL, OR WRITING	
Handkerchiefs		Knives		BOOKS	
Headwear		Lighters		Books, Address	
Jackets	X	MISC. insignias		Books, Pilot Log	
Overcoats		Pen, Fountain		DIARY (REMOVED FOR DTE)	
Scarfs		Pencil, Mechanical		FLIMS	
Shirts		Pipes		Letters	
Socks, Pr.	X	RELIGIOUS ARTICLES		Papers, Personal	
Ties		RIBBONS, DECORATION		Photos	
Towels		Rings		Shoe Shine Articles	
Trousers, Pr.		Tobacco		SHORT SHORTER	
Trunks, Pr.		Toilet articles		SOUVENIRS	
Underwear	X 1	WATCH	X	SOUVENIR MONEY	
				Stationery	
				TESTAMENTS	
				U. S. MONEY (AMOUNT)	

Stephen F. Koleszarki ML

13030228 S/Sgt 7 June 1945

1 air medal with ribbon  
B.S.

\*\* 1 Visiter

VALUABLES SHIPPED

DATE 7/30/45

BY EG

LAUNDRY DAMAGED

REMARKS: Mrs Susan E. Koleszarki (mother), P.O. Box 282, Cairnbrook, Pennsylvania. \* crown missing, \*\* Visiter slightly damaged.

ATTACHMENTS: 1 inventory

C.A.T. none first

WAREHOUSE SPACE: 19322

INVENTORIED BY: Gunn

PACKED BY: [Signature]

WEIGHT: 1-40

DATE SHIPPED: AUG 3 1945

FORM #54, FORM #100

G.I. REMOVED: SHORTAGE ON REVERSE, IDENT. TAGS REMOVED, DIARY REMOVED, LOCKED STORAGE, LAUNDRY REMOVED

SHORTAGES

U.S. GOVT. CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

1 U.S. m.o. # 4116 amt \$95.10

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

*Gunn*

INVENTORY CLERK

*Arley*

SUPERVISOR

G. I. REMOVED

3 copies to Effects Q.M. (TOUSA, 1 copy in box with effects), 1 copy retained)

25 August 1944  
Date

574th Bomb Sq, 391st Bomb Gp, APO 140  
(Organization and A.P.O. Number)

SUBJECT: Transmittal of Inventory of Personal Effects.

TO : Effects Quartermaster, ETOUSA, Depot G-14, APO 507,  
U. S. Army.

Transmitted herewith in accordance with Am. Cir. # 80, dated 25 Oct.  
1943, Hq. SOS. ETOUSA, in Inventory of Effects concerning subject named below.

<u>Koleszarik</u>	<u>Stephen</u>	<u>F.</u>	<u>S/Sgt</u>	<u>13030228</u>	
(Last Name)	(First Name)	(MI)	(Rank)	(A.S.N.)	(Control No.)
					(For use of Effects QM. ETOUSA)

Organization 574th Bombardment Squadron, 391st Bombardment Group  
(UNIT - - - - Not Branch of Service)

\*Status. ( ~~Deceased~~, Missing in Action, ~~Disappeared~~ ) on the 7th  
day of August 19 44.

Designated Beneficiary (With Address) Mrs. Susan E. Koleszarik (Mother)  
P. O. Box 282  
Cairnbrook, Pennsylvania

Cl. II Assets: Cash found in effects, less cost of money order inclosed herewith.

U.S.M.O. # <u>4116</u>	Amt \$ <u>95.10</u>	U.S.M.O. # _____	Amt \$ _____
U.S.M.O. # _____	Amt \$ _____	U.S.M.O. # _____	Amt \$ _____

U.S. Official Check # None Amt. \_\_\_\_\_ Bank \_\_\_\_\_  
(Name and Branch)

#Bank Accounts None

#Debtors None

#Creditors None

#Inclosed is \_\_\_\_\_  
(Will, Power of Attorney, War Bond, Travelers Checks. Describe fully.)

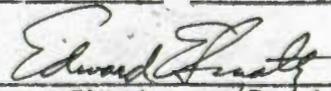
REMARKS (if any)  
None

INVENTORY OF EFFECTS

(Attach extra sheets if necessary)

1 Wallet ✓  
1 Watch, Siro ✓  
1 Shoes, service ✓  
1 Sneakers ✓  
1 Trousers, wool OD ✓  
1 Coat, wool, OD ✓  
1 Shirt, wool OD ✓  
1 Belt, web waist ✓  
1 Necktie, cotton mohair ✓  
4 Towels, bath ✓  
2 Towels, face ✓  
1 Undershirt, wool ✓  
2 Drawers, wool ✓  
5 Drawers, cotton ✓  
4 Undershirts, cotton ✓  
1 Pajamas ✓  
1 Kit, toilet ✓  
1 Box mis. equipment ✓  
1 Box Gum ✓  
8 Handkerchiefs ✓  
3 Flashlights ✓  
1 Book ✓  
2 Bags misc. items ✓  
3 Cotton socks ✓  
2 Socks, wool ✓  
1 Suit, bathing ✓  
1 Cloth, wash ✓  
1 Box, stationery ✓  
1 Folder, portrait ✓  
1 Tie, black ✓  
1 Folder, snapshot ✓  
1 Violin ✓  
1 Folder, writing, ✓

I certify that the foregoing inventory comprises all of 350 object's effects  
and that effects were shipped to Effects QM, ETOUSA, A.P.O. ~~666~~, G-14, U.S. Army  
by delivering to Effects, QM, ETOUSA on 28 Aug 1944.

  
Signature - (In Ink)

EDWARD E. SMALTZ

ARMY EFFECTS BUREAU  
INVENTORY

180,968 <sup>71B</sup>

CASE NO.

TYPED BY

fy

DATE

4/23/45

STATUS

MIA

NAME

Stephen F. Koleszarik ✓

A.S.N.

13030228 ✓

RANK

S/Sgt ✓

ORGANIZATION

AMOUNT

95.10

ACCOUNT NO.

9/c = 94024 P.O.

LIST NO.

UK 472

PAID-Check No.

101306 48

REMARKS

Copy 7-12

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