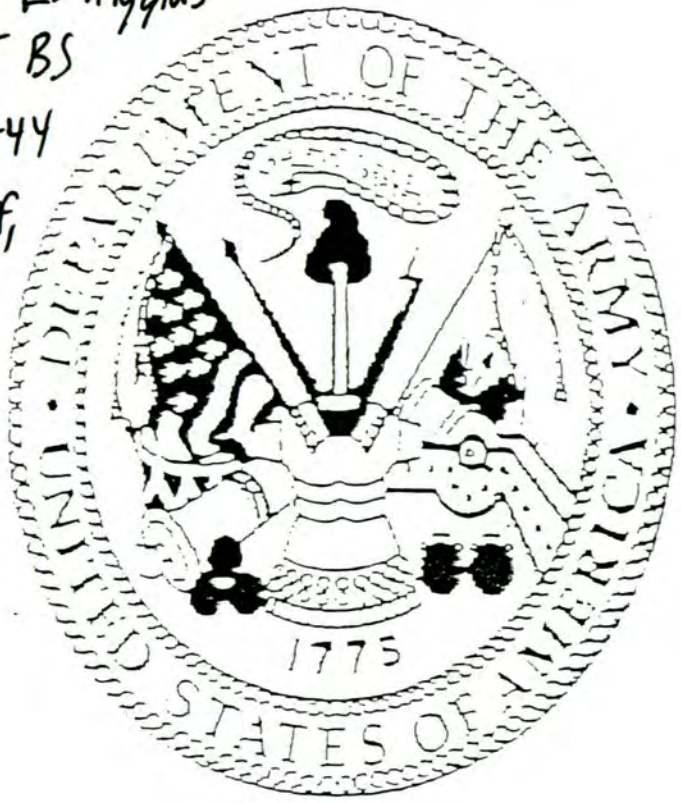


2nd Lt Walter K. Higgins
381 B6, 535 BS
KIA 5-24-44
over Nienloof,
Germany



INDIVIDUAL DECEASED
PERSONNEL FILE

COPY

BEST COPY POSSIBLE
POOR QUALITY ORIGINAL

Higgins

CAUTION: THESE RECORDS WILL BE USED FOR OFFICIAL PURPOSES ONLY. DO NOT REMOVE PAPERS NOR REVEAL CONTENTS TO PERSON CONCERNED. RETURN THEM PROMPTLY.

TRANSFER SLIP

No. A4 361064

DATE OF REQUEST

4/26/51

LAST DATE

RECORDS DESIRED

201 FILE

ENL REC

EFF REP

MED REC

LETTER

MEMO

MEMO

RADIO

OTHER (Specify)

FILE OR SERIAL NUMBER AND SUBJECT

293 Higgins, Walter K

REQUESTED PAPERS NOT IN FILE

TO

Hawkins, Robert L. OQM 6
219 North Lee Street
Alhambra, California

RETURN TO

DATE RETURNED

TO RETURN FILE, INITIAL HERE

INSTRUCTIONS

When transferring file to another person, complete self-addressed transfer coupon below, detach, stitch to blank letter-size paper and mail service.

TRANSFER COUPON

TO:

NOTE THAT FILE OF:

HAS BEEN TRANSFERRED TO: (Name)

DIVISION, BRANCH, SECTION, BUILDING

ROOM NO.

DATE

SIGNATURE

No. A4 361064

15 April 1949

2/Lt. Walter K. Higgins, ASN 0-749 242
Plot C, Row 25, Grave 60
Headstone: Cross
St. Avold (France) U. S. Military Cemetery

Mr. Walter B. Higgins
11862 - 16th Avenue, South
Seattle, Washington

Dear Mr. Higgins:

This is to inform you that the remains of your loved one have been permanently interred, as recorded above, side by side with comrades who also gave their lives for their country. Customary military funeral services were conducted over the grave at the time of burial.

After the Department of the Army has completed all final interments, the cemetery will be transferred, as authorized by the Congress, to the care and supervision of the American Battle Monuments Commission. The Commission also will have the responsibility for permanent construction and beautification of the cemetery, including erection of the permanent headstone. The headstone will be inscribed with the name exactly as recorded above, the rank or rating where appropriate, organization, State, and date of death. Any inquiries relative to the type of headstone or the spelling of the name to be inscribed thereon, should be addressed to the American Battle Monuments Commission, Washington 25, D. C. Your letter should include the full name, rank, serial number, grave location, and name of the cemetery.

While interments are in progress, the cemetery will not be open to visitors. You may rest assured that this final interment was conducted with fitting dignity and solemnity and that the grave-site will be carefully and conscientiously maintained in perpetuity by the United States Government.

Sincerely yours

H. FELIMAN
Major General
The Quartermaster General



RECEIVED
10M 14 1848
700

16 April 1947

Mrs. Mary B. Higgins
7406 28th Street, Northwest
Seattle, Washington

Dear Mrs. Higgins:

293 The War Department is most desirous that you be furnished the latest information regarding the burial location of your husband, the late Second Lieutenant Walter K. Higgins, A.S.N. 0 749 242.

The records of this office disclose that his remains were originally interred in a temporary cemetery established near the place where he met his death, but were later moved to a more suitable site where constant care of the grave can be assured by our Forces in the field.

The records further disclose that his remains are now interred in the U. S. Military Cemetery St. Avold, plot 1884, row 12, grave 282, located twenty-three miles east of Metz, France.

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 all legal next of kin with full information and solicit their detailed desires.

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

304

40-200-1078

RECEIVED
APR 17 1947
U.S. DEPT. OF WAR
OFFICE OF THE QUARTERMASTER GENERAL

2nd Lt Walter E. Higgins, O 749 242
Plot 18001, Row 12, Grave 202,
United States Military Cemetery
St Avold, France

20 October 1947

Mrs. Mary E. Higgins
7406 20th Street, Northwest
Seattle, Washington

Dear Mrs. Higgins:

The people of the United States, through the Congress have authorized the disinterment and final burial of the heroic dead of World War II. The Quartermaster General of the Army has been entrusted with this sacred responsibility to the honored dead. The records of the War Department indicate that you may be the nearest relative of the above-named deceased, who gave his life in the service of his country.

The enclosed pamphlets, "Disposition of World War II Armed Forces Dead," and "American Cemeteries," explain the disposition, options and services made available to you by your Government. If you are the next of kin according to the line of kinship as set forth in the enclosed pamphlet, "Disposition of World War II Armed Forces Dead," you are invited to express your wishes as to the disposition of the remains of the deceased by completing Part I of the enclosed form "Request for Disposition of Remains." Should you desire to relinquish your rights to the next in line of kinship, please complete Part II of the enclosed form. If you are not the next of kin, please complete Part III of the enclosed form.

If you should elect Option 2, it is advised that no funeral arrangements or other personal arrangements be made until you are further notified by this office.

Will you please complete the enclosed form, "Request for Disposition of Remains" and mail in the enclosed self-addressed envelope, which requires no postage, within 30 days after its receipt by you? Its prompt return will avoid unnecessary delays.

Sincerely,

THOMAS B. LANKIN
Major General
The Quartermaster General

Encls.

reg

OCT 27 1947

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

INTRAOFFICE REFERENCE SHEET

1st Lt. Walter K. Higgins

293

DUE, HOUR AND DATE

1 NO.	2 FROM-	3 TO-	4 DATE	5 MESSAGE
1.	LOI Section: R/R Br.	Record Section: R/S Br.	<i>22</i> April 1948	<p>1. As 333 card in this case could not be immediately located action has been taken with a view to resolving the case without the 333 card.</p> <p>2. File is forwarded to your Section for such correction in 333 card as may be indicated.</p> <p>3. When your action has been completed, please forward file to Mail and Records.</p>

CUNNINGHAM
71507

Snowden
6535

THIS FORM WILL REMAIN PART OF THE OFFICIAL FILE

26 APR 1948

*File
NAT
26 APR 48
R
Types by pay
9 April 1948
Dallen*

1

USMC ST. AVOLD, FRANCE

Plot C, Row 25, Grave 60

Date reburied: 15 Feb 48

DISINTERMENT DIRECTIVE

SECTION A —

NAME AND BURIAL LOCATION OF DECEASED

M.P. SWART

CAPT. QMC

DIRECTIVE NUMBER

3574 05272

DATE

15 05 48
DAY MONTH YEAR

NAME

HIGGINS, WALTER K

SERIAL NUMBER

0-749242

RANK

2 LT

ARM

1

DATE OF DEATH

DAY MONTH YEAR

CEMETERY

ST AVOLD - METZ

DISPOSITION OF REMAINS

1 3503 80
CODE DIST. PT.

PLOT

ROW

GRAVE

COUNTRY

4M 12 282 FRANCE

CAUSE OF DEATH

1

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

ST. AVOLD, FRANCE

NAME AND ADDRESS OF NEXT OF KIN

WALTER B. HIGGINS (FATHER)
11862 - 16TH AVENUE, SOUTH
SEATTLE, WASHINGTON (Flag sent)

FEB 18 1948

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISTINTERRED

IDENTIFICATION TAG ON

☐ REMAINS☐ MARKER

ORGANIZATION

USAAF

RELIGION

IDENTIFICATION VERIFIED BY

NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

SEE ATCHD WORK SHIT

MINOR DISCREPANCIES 1

REMAINS PREPARED AND PLACED IN CASKET

DATE

BY

CASKET SEALED BY

Richard F. Peterson, Embalmer

EMBALMER (Signature)

Richard F. Peterson

CASKET BOXED AND MARKED

All markings, tags & plates verified by:

DATE 13 Sept 48 Richard F. Peterson, Embalmer Kanemitsu Ito, 1st Lt Inf

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

Kanemitsu Ito, 1st Lt Inf 7857 AGRC Zone 3 Hq.

SIGNATURE OF GRS INSPECTOR

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

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

In Reply Refer to RR Br: QMGNR 293

*Walter H. Hyatt, Jr. 10842-16th Avenue South
Seattle, Washington 282*

*AKC
10842-16th Avenue South*

The Next of Kin of the above captioned deceased

Father
(relationship)

Walter H. Hyatt, Jr. 10842-16th Avenue South
(Name) (address) *Seattle, Washington*

has failed to return a Form 345 indicating disposition instructions for the remains.

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

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

Sincerely yours,

Incls.

JOHN O. HYATT
Colonel, QMC
Memorial Division

*Hyatt
17 Apr 48*

Hyatt

IF-2181

NOTICE OF DISINTERMENT
(Avis d'Exhumation)

GRS-GZ Form No 8

Date 20 Sept. 1946

The below listed U.S. deceased personnel have this date been disinterred from the location as shown and have been evacuated to U.S. Military Cemetery St. Avold, France for reburial.

La personne Américaine décédée, ci-dessous indiquée, a été, à cette date, exhumée du lieu indiqué et a été évacuée dans un cimetière américain a _____ pour être re-enterrée.

Unknown	X-7783	Unk	Unk	Buchholtz, Germany Sh: M 55/081 1/250,000
(NAME)	(RANK)	(ASN)	(PLACE OF DISINTERMENT)	
(NOM)	(GRADE)	(N.M)	(LIEU D'EXHUMATION)	

If communal cemetery, show
Plot, Row and Grave No, if
available.

Si le lieu d'exhumation est
un cimetière communal, indi-
quer l'endroit, le No du
chemin et celui de la tombe,
s'il y a lieu.

/t/ ALEXANDER ALTMAN SGT.
/s/ ALEXANDER ALTMAN SGT.

(Officer of NCO in charge of
disinterment)

95th QM BN. (M)

(Organization)

Gefangenenlager: *Higgins*

Gefangenen-Nr.:

Staatsangehörigkeit: *Walter*

U. S. A.

Nr. der Liste: *0-749242*

Seite der Liste:



Name:

Higgins

Beruf:

Vornamen:

R. Walter

Religion:

Rom. Kath. Amerikan

Dienstgrad: *Reg.*

Geburtstag u. Geburtsort:

Truppenteil:

Fortress Machine Fortress

Vorname des Vaters:

Komp. usw.:

Matr. Nr.

A. S. N.

0-749242/543

Familiennamen der Mutter:

Ort und Tag der Gefangennahme oder Internierung:

Verwundungen, Verletzungen oder Tod:

Dead

*10. Oct. 46
N.A.
Smith*

Name u. Anschrift der zu benachrichtigenden Person:

wann und von wo zugegangen:

Salchow / Rostock

Aufenthalt u. Veränderungen:

Buried: *25 May 1944*

Grabl: 25.5.44. Auf dem Friedhof für Holz. Kr. Rostock.

Correct name Higgins, Walter C - 0749242

KIA 24 May 44 - Remains 30 June 45

From d. Western. Standort Rostock N. L. in. Sterbefall n. 36.44.
F. IV a. Ref. IV 1

Abgel. ch. 7. 1083/44

Totant. 35

lfd. No. 141

Report from Armed Forces, Garrison
at Rostock + Death Certificate dated 3 June 1944

Cas. II a Ref. II.

American Cas. Report 1083/44

Appears on Dead List 35/141.

DDMG FORM 302a
1 Dec. 1944

BURIAL INFORMATION REPORTED BY THE ENEMY

THROUGH INTERNATIONAL COMMITTEE RED CROSS, GENEVA, SWITZERLAND

293

NAME Higgins, Walter K.

RANK Private

ORGANIZATION Air Corp
Sgt. O-749242 T43

DATE OF BIRTH

PLACE

EMERGENCY ADDRESSEE

DATE OF DEATH

PLACE

near Niendorf

Community Cem., Buckholz, District Rostock, Germany

ROW NUMBER

GRAVE NUMBER

TYPE OF BURIAL

DATE OF BURIAL May 29, 1944

DATE OF REBURIAL

☐ SINGLE

☐ COMRADE

Machine Fortress

OTHER MEMBERS OF CREW OF

NAME

RANK

NAME

RANK

1.

6.

2.

7.

3.

8.

4.

9.

5.

10.

PERSONAL EFFECTS

35/141

SOURCE OF INFORMATION: GERMAN LIST OF AMERICAN CASUALTIES NO.

Page 70

RUS NUMBER

DATED

22 Aug 1944

PLACE

Sasfeld, Saxe, Germany

STAMP: INFORMATION CENTER FOR PRISONERS OF WAR AND CASUALTIES

DATE

22 Aug 1944

REMARKS

This casualty list was received through the American Legation, Berne, Switzerland.
Sept. 14, 1944.

CORRECTED COPY
REPORT OF BURIAL
TM 10-630 AND AR 30-1815

ch

18 December 1946

Date

HIGGINS **Walter** **K.** **2/Lt.** **0-749242**
Last Name First Initial Rank Serial No.
535th Bomb. Sq. **381st Bomb. Gp.**
Unit Organization
POLCHOW, Germany **24 May 1944** **K I A**
Place of Death Date of Death Cause of Death
1500 - 7 October 1946 **U.S. Military Cemetery St Avoild, France**
Time and Date of Burial Name of Cemetery Name or Coordinates of Location
282 **12** **1000** **CROSS**
Grave Number Row Number Plot Number Type of Marker

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

If No Identification Tags Previously buried as Unknown X-7783 (St Avoild)

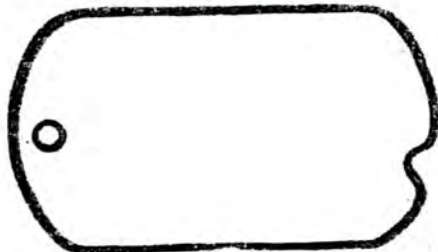
How were remains identified? Identified through: 1) Est. date and place of death for X-7783 in agreement with MACR for AC 42-31878 of which Lt. Higgins was a crew member. 2) Lt. Higgins only remaining crew member to be accounted for. 3) One identified crew member of AC 42-31878 disinterred from same civilian cemetery with X-7783. 4) Records at civilian cemetery from which X-7783 was disinterred indicate that only Americans interred in civilian cemetery were crew members of AC 42-31878. 5) German Dulag record KU-1933 lists Lt. Higgins as being interred in civilian cemetery from which X-7783 was disinterred.

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

Who is buried on:	HAINERT	39232197	S/Sgt	351st Bb. Gp. H.	283
Deceased's Right:	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	CARTER	T-126952	F/O	305th T.C. Sq.	281
	Name	Serial No.	Rank	Organization	Grave No.

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

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



Emergency Addressee **Unknown**
Name

Religion **Protestant** **Unknown** **Race** **White**
Address

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

REBURIAL

Previously buried in isolated grave located at: Civilian Cemetery Buchholtz, Germany, (M-54, T-71) 1/250,000.

This corrected copy of Report of Burial, prepared in the Office of the American Graves Registration Command.

Signature of Officer or other person reporting burial

PHILIP J. WOLF
M. J., GNC

Verified by G.R.S. Officer

IDENTIFICATION ACCEPTED

Initial

RESTRICTED

T-2181

DATE OF REPORT

7 October 1946

QMC Form 1042
(Rev. 1 Apr. 1946)
(Supersedes GRS Form 1, and
Rev. of 1 Apr. 45, which may be used.)

REPORT OF INTERMENT

(AR 30-1810 and AR 30-1815)

Imprint Identification Tag If Possible.
DO NOT TYPE

Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)

Unknown - X-7783
HIGGINS, Walter K.

SERIAL No.

0-749242
Unk

GRADE

Unk 2/Lt.

ORGANIZATION

Unk 381st. Bomb. Gp.

BRANCH OF SERVICE

AAF

RACE

Unk

RELIGION

Unk

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

PLACE OF DEATH

Polchow, Germany

CAUSE OF DEATH

Plane Crash KIA

DATE OF DEATH

24 May 1944

EMERGENCY ADDRESSEE (Name, relationship, and address)

Mrs. Walter K. Higgins, Mother, 7406-28th St., N. W., Seattle, Washington
Unk

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

None

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

None Identified by field - aprvd by OQMG 7 Feb 47

WERE SUBSTITUTE TAGS PROVIDED?(Yes or no)

Yes

COMPLETED TOOTH CHART ON QMC FORM 1045 ATTACHED HERETO

☒ YES☐ 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, St. Avold, France, (Q-260584)

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
7 October 1946	1500	Casket	Temp. Wooden Cross	MMM	12	282

WAS THIS A REBURIAL?
(Yes or no)

Yes

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

Civilian Cemetery, Buchholtz, Germany
(M-54 T-71) 1/250,000

PLOT No.

ROW No.

GRAVE No.

TYPE OF RELIGIOUS
CEREMONY

Joint Service

PERSON CONDUCTING BURIAL RITES

CH. Ch.R.Williams, 1st Lt.
CH. Herve M. Treabold. Capt.

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

One copy WD QMC Form 1042 - Report of
Interment - placed in burial bottle -
and buried with remains.

IDENTIFICATION TAG BURIED WITH
BODY (Yes or no)

No

IDENTIFICATION TAG ATTACHED TO
MARKER (Yes or no)

Yes-Embossed Plate

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

Carter, Wayne E.

RANK

F/O

SERIAL No.

T-126952

ORGANIZATION

A.A.F.

GRAVE No.

281

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

Hainert, Max S.

RANK

Unk

SERIAL No.

39232197

ORGANIZATION

A.A.F.

GRAVE No.

283

SIGNATURE OF PERSON PREPARING REPORT

ELLSWORTH T. MAC INTYRE
Capt. QMC., C.I.P.

SIGNATURE OF GRS OFFICER VERIFYING REPORT


VERNE C. EDMUNDS

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

16-43997-2

RESTRICTED

Section -- UNIDENTIFIED REMAINS.											
LITTLE FINGER LEFT	INSTRUCTIONS: (a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks. (b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.										
RING FINGER LEFT	<table border="1"> <tr> <th>HEIGHT</th> <th>WEIGHT</th> <th>COLOR OF EYES</th> <th>COLOR OF HAIR</th> <th>BIRTHMARKS, SCARS, OR TATTOOS</th> </tr> <tr> <td>Utd</td> <td>Utd</td> <td>Utd</td> <td>None found</td> <td>Utd</td> </tr> </table>	HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS	Utd	Utd	Utd	None found	Utd
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS							
Utd	Utd	Utd	None found	Utd							
MIDDLE FINGER LEFT	<table border="1"> <tr> <th>WEAPON AND SERIAL No.</th> <th>LAUNDRY MARKS</th> <th>WHERE BODY WAS BURIED OR FOUND</th> </tr> <tr> <td>None</td> <td>None</td> <td>Buchholtz, Germany</td> </tr> </table>	WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND	None	None	Buchholtz, Germany				
WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND									
None	None	Buchholtz, Germany									
INDEX FINGER LEFT	OTHER IDENTIFICATION CLUES										
THUMB LEFT	<p>This is one of the crew members listed on MACR Extract: FF 164.</p> <p>German green burial card attached with Name:</p> <p>"SMITH, ROBERT F. ASN 38074381"</p> <p>(See attached narrative of disinterment.</p>										
THUMB RIGHT											
INDEX FINGER RIGHT											
MIDDLE FINGER RIGHT											
RING FINGER RIGHT											
LITTLE FINGER RIGHT											
FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY											
											
REMARKS: Form # 11 Checklist of Unknown accomplished. No Fingerprints, Hands too Decomposed. Estimate weight of remains recovered: 12 lbs.											

RESTRICTED

DENTAL CHART

Unknown X-1792 - t. covered

Higgs, Walter K.

Name-

0-749 = 42

R-8 P
R-7 7/10/11
R-6 7/10/11
R-5 7/10/11 (messid chipped)
R-4 7/10/11
R-3 X
R-2 7/10/11
R-1 7/10/11

R-8 X
R-7 be A
R-6 let me A
R-5 mod A
R-4 be A
R-3
R-2 X
R-1

L-1 _____
L-2 _____
L-3 X
L-4 Heaton
L-5 B
L-6 Mon. dola
L-7 Ida
L-8 X

L-1	
L-2	X
L-3	
L-4	
L-5	do A
L-6	me dol A
L-7	do A
L-8	X

R-16 X
R-15 Yoda
R-14 Yoda
R-13 Yoda
R-12 Yoda
R-11 Yoda
R-10 _____
R-9 _____

R-16 X
R-15 mod A
R-14 mod A
R-13 mod A
R-12 FOA
R-11 _____
R-10 _____
R-9 _____

L-9 _____
L-10 _____
L-11 _____
L-12 mpa
L-13 doa
L-14 moda
L-15 mpa
L-16 hipped

L-9 _____
L-10 _____
L-11 _____
L-12 fA
L-13 hA
L-14 $\text{mod } A$
L-15 $\text{me } A$
L-16 $\text{mod } A$

Note - R-243 & L-243 could be in-house.

IDENTIFICATION SECTION
MEMORIAL DIVISION

25

IDENTIFICATION DATA

LAST NAME - FIRST NAME - MIDDLE INITIAL HIGGINS WALTER K			ARMY SERIAL NUMBER 39377148 O-749242		GRADE 2nd LT
HEIGHT 69	WEIGHT 170	COLOR EYES BLUE	COLOR HAIR BLONDE	SHOE SIZE 9C	DATE OF DEATH 24 MAY 44

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

335 Bomb Sq 381st Bomb Gp

PLACE OF DEATH OR PLACE LAST SEEN IF MIA

NEAR NIENDORF, 7mi SE of ROSTOCK, GER.

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

STATION	DATES
<p>FROM: W.O. AGO CLINICAL RECORDS BRANCH NO LIST.</p>	

FRACTURES AND/OR BREAKS

FRACTURE RIGHT RADIUS, Simple
LOWER 1/3, 1927

TATTOOS AND/OR BIRTH MARKS

NONE SHOWN

DENTAL CHART **25 Apr 43**

X 7 6 5 4 3 **X** 1

UPPER RIGHT

1 **X** 3 4 5 6 7 **X**

UPPER LEFT

X 15 14 13 12 11 10 9

LOWER RIGHT

9 10 11 12 13 14 15 16

LOWER LEFT

X - EXTRACTED

O - CARIOUS

I - CARIOUS NON-RESTORABLE

1F 2181

Attention: Registration Division,
Hq. AGMC, for use Casualty
Clearance.

20 Sept. 1946

AGRC Form 10 (Revised)

1 January 1946

NAME Unknown X-7783

RANK Unk

ASN Unk

ORGANIZATION

Unk

AAAF

MEANS OF IDENTIFICATION

None

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

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

1. Was positive identity acquired for the deceased through the surface investigation? If so, state
the following information:

a. NAME	RANK	ASN
1. [Name]	[Rank]	[ASN]
2. [Name]	[Rank]	[ASN]
3. [Name]	[Rank]	[ASN]
4. [Name]	[Rank]	[ASN]
5. [Name]	[Rank]	[ASN]
6. [Name]	[Rank]	[ASN]
7. [Name]	[Rank]	[ASN]
8. [Name]	[Rank]	[ASN]
9. [Name]	[Rank]	[ASN]
10. [Name]	[Rank]	[ASN]
11. [Name]	[Rank]	[ASN]
12. [Name]	[Rank]	[ASN]
13. [Name]	[Rank]	[ASN]
14. [Name]	[Rank]	[ASN]
15. [Name]	[Rank]	[ASN]
16. [Name]	[Rank]	[ASN]
17. [Name]	[Rank]	[ASN]
18. [Name]	[Rank]	[ASN]
19. [Name]	[Rank]	[ASN]
20. [Name]	[Rank]	[ASN]
21. [Name]	[Rank]	[ASN]
22. [Name]	[Rank]	[ASN]
23. [Name]	[Rank]	[ASN]
24. [Name]	[Rank]	[ASN]
25. [Name]	[Rank]	[ASN]
26. [Name]	[Rank]	[ASN]
27. [Name]	[Rank]	[ASN]
28. [Name]	[Rank]	[ASN]
29. [Name]	[Rank]	[ASN]
30. [Name]	[Rank]	[ASN]
31. [Name]	[Rank]	[ASN]
32. [Name]	[Rank]	[ASN]
33. [Name]	[Rank]	[ASN]
34. [Name]	[Rank]	[ASN]
35. [Name]	[Rank]	[ASN]
36. [Name]	[Rank]	[ASN]
37. [Name]	[Rank]	[ASN]
38. [Name]	[Rank]	[ASN]
39. [Name]	[Rank]	[ASN]
40. [Name]	[Rank]	[ASN]
41. [Name]	[Rank]	[ASN]
42. [Name]	[Rank]	[ASN]
43. [Name]	[Rank]	[ASN]
44. [Name]	[Rank]	[ASN]

b. ORGANIZATION

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

a. NAME SMITH, ROBERT F. RANK Cpl. ASN 38074381

b. ORGANIZATION 381 Bomb Gp H

3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY

HIGGINS, WALTER K
(Use reverse side for listing of crew members from MARC)

a. Date of above burials 25 May 1944 Common Graves? No

5. Name and Type of Cemetery New Cemetery, Buchholz, Germany
(Military or Civilian) Civilian cemetery

6. Map Coordinates of the Cemetery M 54 T 71 1/250,000

a. Town Buchholz Country Germany

7. Give exact location in cemetery of the remains.

a. Section	Row	Grave
Unknown	Unknown	Unknown

b. Is Sketch attached? ☐

8. If remains are not located ^{Yes} in a cemetery, give exact location.

a. Town _____ Coordinates _____

b. Is Sketch attached? ☐ Does not apply

c. Is area mined?

9. How is the grave marked? Not marked

10. If grave is marked with cross, give exact markings thereon Does not apply

a. From what source was this information obtained?

(Identification tags, personal effects)

Does not apply

1. By whom

Does not apply

11. Where are the cemetery records?

Burgemeister's office (Burgemeister's office)

- a. What information was contained hereon? **Two unknown American soldiers buried in the cemetery**
- b. Where was the information obtained? **Unknown**
- c. By whom? **Unknown**
12. What is the date of death? **24 May 1944**
- a. Give basis **German burial card**
13. What is the cause of death? **Unknown**
- b. Give basis
14. What is the date of burial? **25 May 1944**
- a. Give basis **German burial card**
15. What was the place of death? **Polchow, Ger.** **M 54 T 71**
- b. Give basis **German burial card** **Coords 1/250,000**
16. Where were the remains found? **Unknown**
- a. By whom? **Unknown** **Coords**
- b. Is sketch attached? **No**
17. Was a casket used? **Unknown** **Unknown**
- Type of casket **Unknown** Who furnished the casket? **Unknown**
18. Who made the burial **Unknown** How marked? **Unknown**
- a. What are the names and addresses? **Unknown** (Civilian, American Mil. or German Mil.)

SECTION B — AIR CORPS DECEASED (To be completed only if **Unknown** believed to be a member of the AAF).

19. Were remains found in the plane wreckage? **Unknown**
- a. Give location in plane from which the bodies were removed
- (Tail gunner, pilot, radio, turret, etc., or front, side of plane) **Unknown**
- b. Near wreckage? **Unknown**
20. Scene of crash must be investigated. Give complete results of investigation (if removed, state when and by whom). **Unknown**
- a. Type of Plane **Unknown**
- b. Markings and/or name on plane
- c. Give numbers on motors, machine guns, instruments, radios or other equipment: **Unknown**
21. How did crash occur? **Unknown** **Unknown**
- Enemy Planes? **Unknown** Anti-aircraft **Unknown**
22. Did plane explode in the air? **Unknown** **Unknown**
23. Did plane burn in the air? **Unknown** On ground? **Unknown**
24. What was the direction of the flight? **Unknown** On ground? **Unknown**
25. What was the civilian opinion regarding destination of plane? **Unknown**

26. Had bombs been released prior to the crash? **Unknown**
27. Does specific time and date of crash correspond with date of death of above named deceased? **Unknown**
28. Number of planes in formation prior to crash **Unknown**
29. State precise time and date of plane crash **Unknown**
(Night?) (Day?)
30. Were parachutists seen? **Unknown** How many? Escaped?
Prisoners?

SECTION C — ARMORED CORPS DECEASED (To be completed only if deceased is believed to have been a member of the Armored Force).

31. Were remains found in wreckage of a tank? **This section does not apply**
- 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).

39. Did death occur from any other means? (i. e., truck, jeep, mines, drowning, or small arms fire)
- If so, give complete and thorough results of the interrogation.
- a. Are all certificates and statements of people who possessed knowledge of the case attached?
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? **No**
- If not, state reason — **All papers and personal effects taken by German army**
- a. Were identification tags found at the time of death? **Unknown**
- Where? By whom?
- 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 the time of death? **Unknown**

Where? By whom?

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 immunization shot?

42. Was Deceased given first aid? **Unknown** If so, where?

By whom? Are statements from the medical people attached?

43. Was deceased evacuated to a German civilian hospital? **Unknown**

Where? Names of people concerned

44. Is it possible on surface investigation to obtain from civilian sources a physical description of the deceased? **No**

45. Is it possible on surface investigation to obtain from civilian sources the condition of the remains? **No**

(Burnt? Decapitated? etc)

46. Do facts surrounding death show any evidence that it might be an atrocity case? **No**

a. If so, give basis for positive assumption

b. If so, has higher headquarters been notified?

47. Was case previously investigated? By whom?

When?

48. Give full names, addresses, and information obtained from each person interviewed

Hans Wessendorf, Buchholz, Germany, Burgermeister

49. Are 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, Soviet Zone**

(If special investigation, give case number)

52. Give Brief Narrative **The Burgermeister is new and the only information available were the records in his office that two American soldiers were buried in the cemetery.**

(Use attached, sheets if necessary)

Signature of Interpreter

Rank

ASN

Organization

Signature of Investigator

WALTER W. MCCABE

1st Lt. 0-1597188

Rank

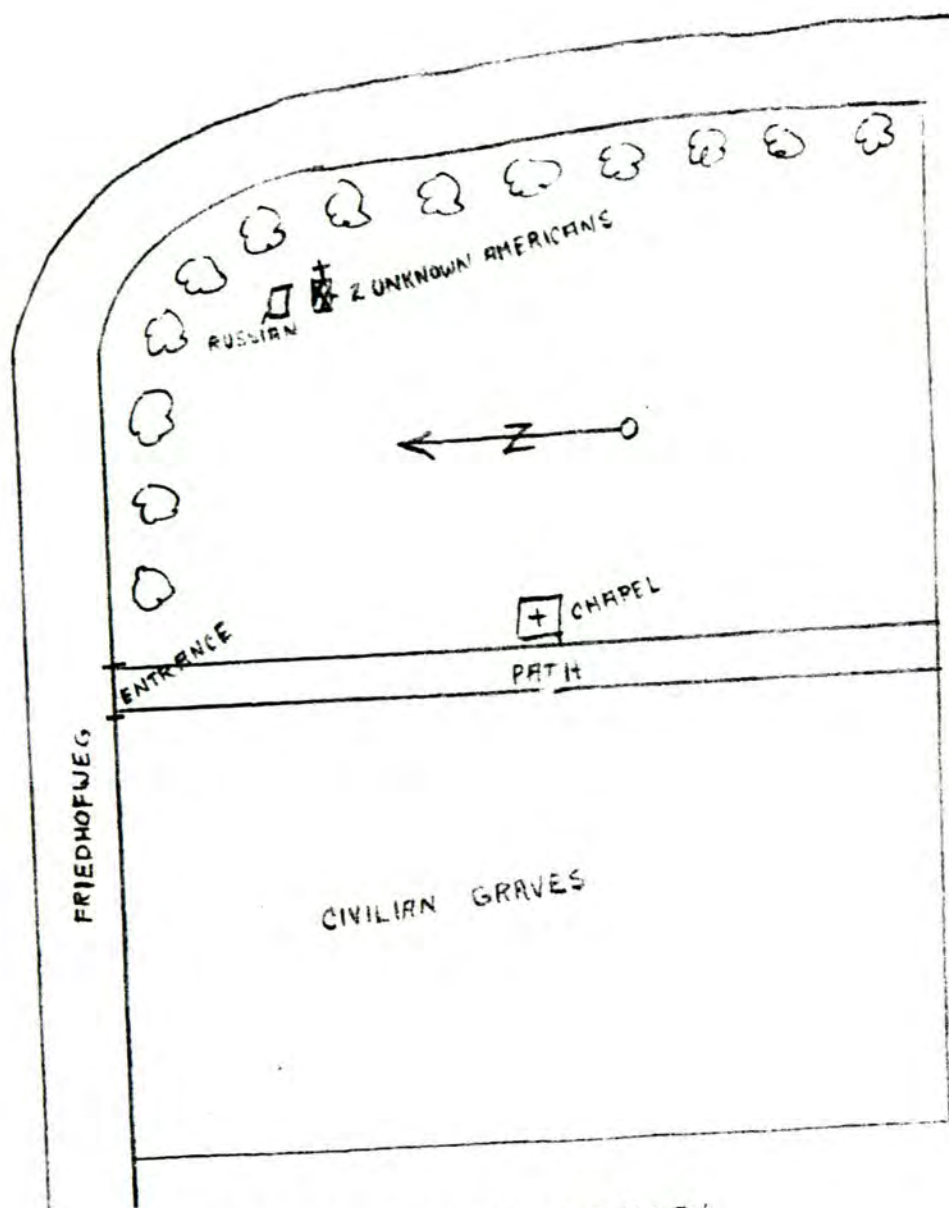
ASN

AGRC

Organization

Note: These cases were investigated by an officer now redeployed and this headquarters can assume no responsibility of their correctness and completeness

Jack E. Cauley
JACK E CAULEY 2nd Lt. Inf
95th QM Bn (M)



BUCHHOLTZ CIVILIAN CEMETERY
M 55/081 1/250,000
BUCHHOLTZ, GERMANY

293 Higgins, Walter H. C-7-0-2-2

AFPPA-8

AAF 201 - (5177) Higgins, Walter K.
(KU 1933) 0-749242
(AV 1083)

V. Swetell
AFPPA-8/VB/wrg/6484
Rm 32867 5/15/46

Mrs. Walter K. Higgins
7406 28th Street, Northwest
Seattle, Washington

Dear Mrs. Higgins:

I am writing to you in reference to your husband who gave his life in the service of his Country during the European conflict.

In an effort to furnish the next of kin with all available details concerning casualties among our personnel, the Army Air Forces recently completed the translation of several volumes of captured German records.

In regard to Second Lieutenant Walter K. Higgins, these records indicate that he was killed when his plane crashed 24 May 1944, at 11:18 a.m., near Niendorf, Germany. Niendorf is approximately seven miles southeast of Rostock (54° 51' N, 12° 8' E). These records further state that interment was made in the Keesin Community Cemetery, 25 May 1944.

The Quartermaster General in his capacity as Chief, American Graves Registration Service, is charged with the responsibility of notifying the legal next of kin concerning grave locations of members of the military forces who are killed or die outside the continental limits of the United States. If the report of your husband's burial has not been confirmed and you have not been notified by the Quartermaster General, that official will furnish you definite information immediately upon receipt of the official report of interment from the Commanding General of the Theater concerned.

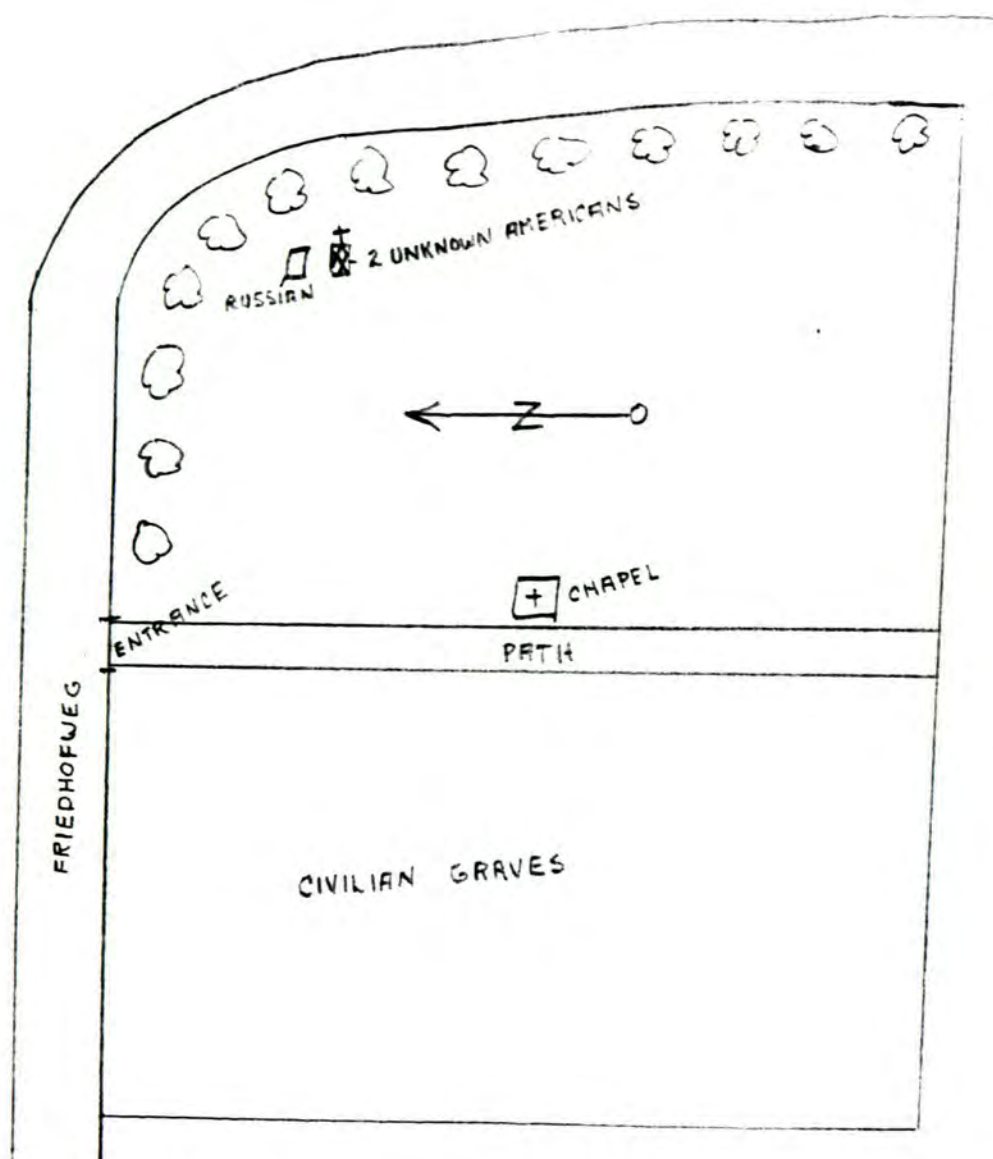
May the knowledge of your husband's valuable contribution to our cause sustain you in your bereavement.

Sincerely yours,

LEON W. JOHNSON
Brigadier General, U.S. Army
Deputy, AC/AS-1

381 Bomb Gp. MACF TF 164

BURNS, H ROBERT A. JR.	2nd Lt. 0-755276)	
BECK, JAMES A.	2nd Lt. 0-753126)	RMC 29 Apr. 44
HUGHES, ROBERT E.	1st Lt. 0-735870)	
BAIRD, JOHN E.	T/Sgt. 15330438)	
X HIGGINS, WALT R E.	0-749242)	KIA 28 May 44
SMITH, ROBERT F.	Cpl. 38074381)	
DELGADO, EDDIE	T/Sgt. 39266163)	
COLLISTER, FRANKLIN	S/Sgt. 12208378)	KIA 24 May 44
THOMSON, ROBERT H.	Sgt. 13042931)	
THOMAS, DONALD H.	Sgt. 11115439)	



BUCHHOLTZ CIVILIAN CEMETERY
M 55/081 1/250,000
BUCHHOLTZ, GERMANY

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

REPORT OF DEATH

DATE 8 Nov 1944

mbb

FULL NAME Higgins, Walter E				ARMY SERIAL NUMBER C749242		GRADE 2nd Lt							
HOME ADDRESS Seattle, Washington				ARM OR SERVICE Air Corps		DATE OF BIRTH 14 Dec 17							
PLACE OF DEATH European Area			CAUSE OF DEATH Killed in action			DATE OF DEATH 24 May 44							
STATION OF DECEASED European Area				DATE OF ENTRY ON CURRENT ACTIVE SERVICE 22 Jun 43		LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS							
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Mary B. Higgins (wife) 7406 28th St., Northwest, Seattle, Washington													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Mary B. Higgins (wife) Same as above Mrs. Nellie A. Higgins (mother) 11862 16th Ave., So. Seattle, Wash. Mr. Walter B. Higgins (father) Same as mother													
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
										X			

ADDITIONAL DATA AND/OR STATEMENT

The individual named in this report of death is held by the War Department to have been in a ~~missing~~ missing in action status from 24 May 1944 until such absence was terminated on 29 Oct 1944, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from the German Government through the International Red Cross.

21 NOV 1944

File
JRP

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

☒ BATTLE

☐ NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR:

John L. ...
ADJUTANT GENERAL

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

2nd Lt Walter E. Higgins, O 749 242
 Plot M4H, Row 12, Grave 282,
 United States Military Cemetery
 St Avold, France

20 October 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, _____

(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

(FOREIGN COUNTRY)

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.)

L.O. 5 SENT FEB 16 1948

FILE

19 FEB 1948

Capt. Mulligan

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 <i>Mr. Harold Higgins</i>	FIRST NAME <i>Nellie</i>	MIDDLE INITIAL <i>B.</i>
RELATIONSHIP TO THE DECEASED <i>mother</i>		
NUMBER AND STREET <i>11862 - 16th Ave. S.W.</i>	CITY OR TOWN <i>Seattle</i>	STATE OR COUNTRY <i>Wash.</i>

(SIGNATURE) <i>Mrs. Harold G. Guins</i>	(DATE) <i>Nov. 3, 1947</i>
(STREET AND NUMBER) <i>7701 - 24th N. E.</i>	(CITY AND STATE) <i>Seattle, Wash.</i>

M. Barbara Juris

293
2nd Lt Walter K. Higgins, O 749 242
Plot 888M, Row 12, Grave 282,
United States Military Cemetery
St. Avold, France

16 February 1948

Mr. Walter B. Higgins
11862 16th Avenue, South
Seattle, Washington

Dear Mr. Higgins:

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 receipt by you? Its prompt return will avoid unnecessary delay.

Sincerely,

THOMAS B. LARKIN
Major General
The Quartermaster General



gwf

OFFICE OF THE QUARTERMASTER GENERAL
MEMORIAL DIVISION

SUBJECT: NEW LOI
TO: MACHINE SECTION, R & R BRANCH, MEMORIAL DIVISION
ROOM 2701, TEMPORARY B BLDG

Date 11 Feb 1948

293
2nd Lt. Walter K. Higgins 0749242
Rank Name Serial No.

LOI to be sent to: Father Grave Location:

Mr.
Mrs.
Miss

Walter B. Higgins
Name

USMC
St. Aulard, France
Cemetery

Street

City

State

Plot

Row

Grave

11862 16th Ave **FILE** MMMM 12 282
Seattle, Wash. 19 FEB 1948
Capt. Mulligan
MULLIGAN
5057

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

2nd Lt Walter K. Higgins, O 749 242
 Plot M44M, Row 12, Grave 282,
 United States Military Cemetery
 St. Avold, France

16 February 1948

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

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

PART I

I, WALTER K. HIGGINS
 (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 _____
 (LOCATION OF NATIONAL CEMETERY SELECTED)

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

☐ YES ☐ NO

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

DD Form 1
1 June 48

Added 5/1/48
Hall

APR 8 1948

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 (<i>Nearest railroad passenger station</i>)	TELEGRAPH ADDRESS		TELEPHONE No.

OR
I, AS THE NEXT OF KIN, DO FURTHER DECLARE THAT I DESIRE THE REMAINS TO BE SENT TO THE FOLLOWING FUNERAL DIRECTOR WHO HAS AGREED TO RECEIVE THEM:

FULL NAME OF FUNERAL DIRECTOR			
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
EXPRESS OFFICE (<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.

<u>Walter B Higgins</u> (SIGNATURE OF NEXT OF KIN)	<u>11862 - 16th Avenue South</u> (STREET AND NUMBER)
<u>Walter B. Higgins</u> (NAME PRINTED OR TYPED)	<u>Seattle 88, Wash.</u> (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 17th day of March, 1948 at city (or town) of Seattle, county of King, and State (or Territory or District) of Washington

27 D Phillips
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)
Notary Public
(OFFICIAL TITLE)

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

238127 T

DATE 8 Nov 1944

mbb

The individual named in this report of death is held by the War Department to have been in a ~~missing~~ missing in action status from 24 May 1944 until such absence was terminated on 29 Oct 1944, when evidence considered sufficient to establish the fact of death was received by the Secretary of War from the German Government through the International Red Cross.

☒ BATTLE

☐ NON-BATTLE

BY ORDER OF THE SECRETARY OF WAR

James T. Lusk
ADJUTANT GENERAL

FORM NO. 14A
BY THE PRESIDENT
MARCH 10, 1925

TELEGRAM

OFFICIAL BUSINESS—GOVERNMENT RATES

FROM	WAR DEPARTMENT
BUREAU	AGO
DEK 3814	238127

AG 201 HIGGINS WALTER E (3 JUNE 44) SPIPC-E ETO 084 5 JUNE 1944
ASK 0-749242

MRS MARY B HIGGINS
7406 28TH NORTHWEST
SEATTLE WASHINGTON

THE SECRETARY OF WAR DESIRES ME TO EXPRESS HIS DEEP REGRET THAT YOUR
HUSBAND SECOND LIEUTENANT WALTER E HIGGINS HAS BEEN REPORTED MISSING IN
ACTION SINCE TWENTY FOUR MAY OVER GERMANY IF FURTHER DETAILS OR OTHER
INFORMATION ARE RECEIVED YOU WILL BE PROMPTLY NOTIFIED

ULIO

THE ADJUTANT GENERAL

OFFICIAL:

ADJUTANT GENERAL

BATTLE

238127

DSJ:AP:sh
May 20, 1946

Dear Mrs. Higgins:

The Army Effects Bureau has received some additional property of your husband, Lieutenant Walter K. Higgins.

This property, contained in one envelope, is being sent you for distribution. If, for some reason, it has not been received within the next thirty days, this Bureau should be informed so that tracer may be instituted.

Yours very truly,

D. B. JOHNSTON
2nd Lt., QMC
Chief, Adm. Division

9

65

AMOUNT OF CHECK	NOTE DISCREPANCY IN		INCLOSE VALUABLES	RECIPIENT FROM
ACCOUNT NUMBER	<input checked="" type="checkbox"/> NAME		SHIP VALUABLES	<input checked="" type="checkbox"/> CASUALTY REPORT
	SERIAL NUMBER	VALUABLES SHIPPED BY (clerk)		INVENTORY
	RANK			FORM 20
Mrs. Mary B. Higgins ✓ 7406 - 28th Street, Northwest ✓ Seattle, Washington ✓ 2nd Lt. Walter K. Higgins ✓ 0749242 ✓ 238127 D ✓				LETTER
				NO. & TYPE OF CONTAINER
				ENVELOPE
				CARTONS
				PACKAGE
				FOOT LOCKER
				SPECIAL INSTRUCTIONS
				REMOVE GI
				SHIP BLOODSTAINED
				SHIP DAMAGED
REMOVE BL'DSTAINED				
REMOVE DAMAGED				
FILMS REMOVED				
DIARY REMOVED				
DSJ:AP:dm	SUMMARY COURT DATA		DATE ACTION TAKEN	
DATE OF FINDING	APPLICANT		5-20-46	
REMARKS				MAIL REVIEWER (initials)
				SHIPPED
				FRANKED
				EXPRESS
				FREIGHT
				DATE SHIPPED
				MAY 22 1946
				SHIPPING CLERK
				ROUTING
				ACCOUNTING BRANCH
WAREHOUSE				
FILE				
ORDER FOR ACTION				

EFF OM FORM 14
10 OCT 1945

239127

RTP:GC:kl
November 2, 1945

Dear Mrs. Higgins:

The Army Effects Bureau has received some additional property of your husband, Lieutenant Walter E. Higgins.

These effects, contained in one package, are being forwarded to you. If delivery is not made within thirty days from this date, please notify me so that tracer action may be instituted.

As previously indicated, personal property is transmitted by this Bureau for distribution according to the laws of the state of the officer's legal residence.

Extending every sympathy, I am

Sincerely yours,

HARRY NIEMIEC
2nd Lt., QMC
Chief, Correspondence Branch

11/5

AMOUNT OF CHECK	<input checked="" type="checkbox"/> DISCREPANCY IN	<input checked="" type="checkbox"/> INCLOSE VALUABLES	RECIPIENT FROM
	<input checked="" type="checkbox"/> NAME	<input checked="" type="checkbox"/> SHIP VALUABLES	<input checked="" type="checkbox"/> CASUALTY REPORT
ACCOUNT NUMBER	<input checked="" type="checkbox"/> SERIAL NUMBER	VALUABLES SHIPPED BY (clerk)	INVENTORY
	<input checked="" type="checkbox"/> RANK	11-6-45	FORM 20
Mrs. Mary B. Higgins 2/Lt Walter K. Higgins O-749242 238,127 D			LETTER
			NO. & TYPE OF CONTAINER
			ENVELOPE
			CARTONS
			PACKAGE
			FOOT LOCKER
			SPECIAL INSTRUCTIONS
			REMOVE GI
			SHIP BLOODSTAINED
			SHIP DAMAGED
			REMOVE BL'DSTAINED
			REMOVE DAMAGED
			FILMS REMOVED
			DIARY REMOVED
SUMMARY COURT DATA			DATE ACTION TAKEN
DATE OF FINDING	APPLICANT		11-5-45
			MAIL REVIEWER (initials)
			SL
REMARKS			SHIPPED
			FRANKED
			EXPRESS
			FREIGHT
			DATE SHIPPED
			SHIPPING CLERK
			ROUTING
			1 ACCOUNTING BRANCH
			WAREHOUSE
			2 FILE
ORDER FOR ACTION			

EFF OM FORM 114
10 OCT 1945

ATTACHMENTS			EFFECTS INVENTORY ARMY EFFECTS BUREAU			STATUS	
<input type="checkbox"/> INBOUND INVENTORY <input type="checkbox"/> G. R. OR SUB GR LABEL <input type="checkbox"/> WILL OR POWER OF ATTY. <input type="checkbox"/> TALLY IN FORM 43 <input checked="" type="checkbox"/> <i>Attachment</i>			<div style="font-size: 1.5em; font-weight: bold;">158024?</div> <div style="font-size: 1.5em; font-weight: bold;">238,127</div>			<div style="font-size: 0.8em;"> <input type="checkbox"/> DECEASED <input type="checkbox"/> MISSING <input type="checkbox"/> P. O. W. <input type="checkbox"/> ABANDONED <input type="checkbox"/> UNKNOWN </div>	
<div style="font-size: 0.8em;"> <input type="checkbox"/> BAGS, CLOTH OR TRAVEL <input type="checkbox"/> BELT, MONEY (NO MONEY) <input type="checkbox"/> BILLFOLD (NO MONEY) <input type="checkbox"/> BOOKS <input type="checkbox"/> BRACELET, IDENT. <input type="checkbox"/> CAMERAS <input type="checkbox"/> CLOTHING <input type="checkbox"/> MISC. ARTICLES <input type="checkbox"/> RELIGIOUS ARTICLES <input type="checkbox"/> RIBBONS, DECORATION <input type="checkbox"/> SHORT SNORTER <input type="checkbox"/> SOUVENIR MONEY <input type="checkbox"/> SOUVENIRS <input type="checkbox"/> TESTAMENTS <input type="checkbox"/> TOWELS & WASHCLOTHS <input type="checkbox"/> U. S. MONEY (AMOUNT) <input type="checkbox"/> WATCH <input type="checkbox"/> WINGS </div>			<div style="font-size: 0.8em;"> <input type="checkbox"/> BELT <input type="checkbox"/> BOOKS, ADDRESS <input type="checkbox"/> BOOKS, PILOT LOG <input type="checkbox"/> BRUSHES <input type="checkbox"/> CASE <input type="checkbox"/> CLOTH, WASH <input type="checkbox"/> COATS <input type="checkbox"/> FOOTLOCKER <input type="checkbox"/> FOOTWEAR, PR. <input type="checkbox"/> GLASSES <input type="checkbox"/> GLOVES, PR. <input type="checkbox"/> HANDKERCHIEFS <input type="checkbox"/> HEADWEAR <input type="checkbox"/> JACKETS <input type="checkbox"/> KITS <input type="checkbox"/> KNIVES <input type="checkbox"/> LETTERS <input type="checkbox"/> LIGHTERS </div>			<div style="font-size: 0.8em;"> <input type="checkbox"/> OVERCOATS <input type="checkbox"/> PAPERS, PERSONAL <input type="checkbox"/> PENCIL, MECHANICAL <input type="checkbox"/> PEN, FOUNTAIN <input type="checkbox"/> PHOTOS <input type="checkbox"/> PIPES <input type="checkbox"/> RINGS <input type="checkbox"/> SCARFS <input type="checkbox"/> SHIRTS <input type="checkbox"/> SOCKS, PR. <input type="checkbox"/> STATIONERY <input type="checkbox"/> TIES <input type="checkbox"/> TOBACCO <input type="checkbox"/> TOILET ARTICLES <input type="checkbox"/> TOWELS <input type="checkbox"/> TROUSERS, PR. <input type="checkbox"/> TRUNKS, PR. <input type="checkbox"/> UNDERWEAR </div>	
<div style="text-align: center; font-weight: bold;">CONTAINERS ADDRESSED TO</div> <div style="font-size: 1.5em; font-weight: bold;">None</div>			<div style="text-align: center; font-weight: bold;">INFORMATION</div> <div style="font-size: 1.5em; font-weight: bold;">None</div>			<div style="text-align: center; font-weight: bold;">GROSS REFERENCE</div> <div style="font-size: 1.5em; font-weight: bold;">GERMAN A.E.B.</div>	
<div style="font-size: 0.8em;"> <input type="checkbox"/> CHECK <input type="checkbox"/> MONEY ORDER <input type="checkbox"/> BOND <input type="checkbox"/> TRAV. CHECK <input type="checkbox"/> FOREIGN CURRENCY <input type="checkbox"/> U. S. CURRENCY </div>		REC'D BY	NUMBER		BUREAU CHECK		
			SYMBOL		<input checked="" type="checkbox"/> TRANSMIT ORIGINAL <input type="checkbox"/> ORIG. REG. MAIL <input type="checkbox"/> TO G. A. O. <input type="checkbox"/> MUTILATED <input type="checkbox"/> TO ISSUING AGENCY		
			AMOUNT		DATE		
			867-702		VALUABLES SHIPPED		
			BANK OR PLACE OF ISSUE		DATE 11-4-45		
			PAYEE		BY		
			REMITTER OR DRAWER		1-WRISTWATCH (ELGIN) 1 RING w/ DARK RED STONE		
TALLY NO.		ORIG. NO. OF PKGS.		EXAMINING DATE		BOX NO.	
4230				19 Oct. 45		SHEET OF SHEETS	
NAME				A. S. N.		RANK	
WALTER HIGGENS						CASE NO.	
ORGANIZATION				EXAMINED BY		DIARY REMOVED	
WAREHOUSE SPACE				Bar		PHOTO FILM REMOVED	

1227/44

KM 1933

Eigenhändig des Toten englischen Fliegers

11208078
LEO, Francis, COLLISTER, HIGGENS

abgegeben am 24.5.44
einer FORTRESS

GRATZE 2,5 km SO GRÜNTAL

11 km S. EBERSDORF

An O.K.W. Ausl./Abw. I G.

633-3043

PACKAGE DESCRIPTION

ARMY EFFECTS BUREAU INVENTORY

DECEASED
MISSING
ABANDONEDTALLY
NO.INV.
DATEORIG. NO. /
OF PKGS.BOX
NO.SHEET
OF SHEETS

ORGANIZATION

NAME Walter K. Higgins
U.S.N. 0-749500 RANK 1st Lt

BELT	TOWELS & RASH CLOTHS	WINGS
BELT, MONEY (NO MONEY)	CLOTHING	BAGS, CLOTH OR TRAVEL
CLOTH, WASH	BRACELET IDENT.	RIFFFOLD, (NO MONEY)
COATS	BRUSHES	CASE
FOOTWEAR, PR.	COMBS	FOOTLOCKER
GLOVES, PR.	GLASSES	KIT, SER, TLT, OR WRITING
HANDKERCHIEFS	KNIVES	BOOKS
HEATWEAR	LIGHTERS	BOOKS, ADDRESS
JACKETS	MISC. INSIGNIA	BOOKS, PILOT LOG
OVERCOATS	PEN, FOUNTAIN	DIARY (REMOVED FOR DUE)
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 SHORTER
TRUNKS, PR.	TOILET ARTICLES	SOUVENIRS
UNDERWEAR	WATCH	SOUVENIR MONEY
		STATIONERY
		TESTAMENTS
		U.S. MONEY (AMOUNT)

REMARKS

ATTACHMENTS

FORM #54

FORM #100

DAMAGED

Wife
Mrs. Mary B. Higgins
7206 - 38th N.W.
Seattle, Wash.
Born in West Virginia

1 in inventory
12-1-57

C.A.T.

WAREHOUSE SPACE

STORED BY

WEIGHT

G.I. REMOVED

SHORTAGE
ON REVERSEIDENT. TAGS
REMOVEDDIARY
REMOVED

DATE SHIPPED

LOCKED

SHORTAGES

U. S. GOVT. CHECK SHEET

NUMBER

DATE

SYMBOL

AMOUNT

I certify that the items listed herein are
not in the containers inventoried by me:

Ford

INVENTORY CLERK

W. L. L.
SUPERVISOR

2-1. 2-1. 2-1.

Missing _____
A.W.O.L. _____
P.O.W. _____
Abandoned _____

A.W.O.L.

P.O.W.

Abandoned

ARMY EFFECTS BUREAU

at _____ Box

TALLY IN NO. _____ INVENTORY DATE 7-6-45 CASE NO. 238/127

CASE NO. 238,127

EFFECTS OF Walter & Higgins RANK 2nd Lt

RANK 2nd Lt

ARMY SERIAL NUMBER 0-749242 ORG. XXXXXX

ORG.

CONSIGNOR _____ Ref. C 114

DELIVERING CARRIER Mail G B/L NO. _____ G B/L DATE _____

G B/L NO. G B/L DATE

G B/L DATE

[illegible]

NAME HIGGINS, WALTER K LT 9242

BAY	PALLET	BOX	TALLY
26	58		7303
TYPE OF PKG.	WHSE. SPACE	INVENTORIED	
BOX 1			

I A Form 43

10 June 1944
(Date)

535th Forward Air Support Squadron
301st Air Transport Group (C)
POW

SUBJECT: Transmittal of Inventory of Personal Effects.

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

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

<u>Higgins,</u>	<u>Walter</u>	<u>I.</u>	<u>2nd Lt.</u>	<u>G 49242</u>
(Last Name)	(First Name)	(MI)	(Rank)	(ASN)
				(Control No.)
				(For use of
				Effects QM, ETOUSA)

Organization 535th Forward Air Support Squadron
(UNIT-----Not branch of Service)

*Status. (Deceased, Missing in Action, Prisoner of War) on the 24th
day of May 1944.

Designated Beneficiary (With address) Mrs. Mary L. Higgins (Wife)
7406 28th N.W.
Seattle, Wash.

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

U.S.M.O. # 40998 Amt \$ 39.23 U.S.M.O. # _____ Amt \$ _____

U.S.M.O. _____ Amt \$ _____ U.S.M.O. # _____ Amt \$ _____

U.S. Official Check # _____ Amt _____ Bank _____
(Name & Branch)

Bank Accounts NONE

Debtors NONE

Creditors NONE

Inclosed is _____
(Will, Power of Attorney, War Bond, Travelers Checks. Describe full)

REMARKS: (If any)

*Strike out words not applicable.
#Negative report where applicable.

(Over)

INVENTORY OF EFFECTS
(Attach extra sheets if necessary)

CLASS 1

2 Wallets ✓
3 Snapshots ✓
Misc. personal papers ✓
1 Pen ✓
2 Photographs ✓
5 Smoking pipes ✓
1 Snap folder ✓
1 Electric razor ✓
1 Cigarette lighter ✓
1 Wristwatch band ✓
35 Letters ✓
"201" file ✓

CLASS 11

2 Hats ✓
1 Gloves ✓
2 Shoes ✓
2 Shave kits ✓
3 Neckties ✓
1 Sewkit ✓
4 Caps ✓
5 Handkerchiefs ✓
11 Socks ✓
1 Toilet kit ✓
1 Gym shorts ✓
11 Undershirts ✓
7 Drawers ✓
6 Trousers ✓
9 Shirts ✓
1 Blouse ✓
1 Topcoat ✓

I certify that the foregoing inventory comprises all of subject's effects and that effects were shipped to Effects QM. ETOUSA, APO 507, G-14, U.S. Army by delivering to Station 11 on 10 June 1944

Richard T. Tinsley
Signature - (In ink)

Richard T. Tinsley
Name
Capt., 535th Bomb. Squadron
Rank and organization

ATTACHMENTS	
INBOUND INVENTORY	
G. R. OR SUB OR LABEL	
WILL OR POWER OF ATTORNEY	
TALLY IN FORM 43	

EFFECTS INVENTORY ARMY EFFECTS BUREAU

DECEASED
MISSING
P. O. W.
ABANDONED
UNKNOWN

Allen
B. J. Hays

BAGS, CLOTH OR TRAVEL	BELT	OVERCOATS
BELT, MONEY (NO MONEY)	BOOKS, ADDRESS	PAPERS, PERSONAL
BILLFOLD (NO MONEY)	BOOKS, PILOT LOG	PENCIL, MECHANICAL
BOOKS	BRUSHES	PEN, FOUNTAIN
BRACELET, IDENT.	CASE	PHOTOS
CAMERAS	CLOTH, WASH	PIPES
CLOTHING	COATS	RINGS
MISC. ARTICLES	FOOTLOCKER	SCARFS
RELIGIOUS ARTICLES	FOOTWEAR, PR.	SHIRTS
RIBBONS, DECORATION	GLASSES	SOCKS, PR.
SHORT SNORTER	GLOVES, PR.	STATIONERY
SOUVENIR MONEY	HANDKERCHIEFS	TIES
SOUVENIRS	HEADWEAR	TOBACCO
TESTAMENTS	JACKETS	TOILET ARTICLES
TOWELS & WASHCLOTHS	KITS	TOWELS
U. S. MONEY (AMOUNT)	KNIVES	TROUSERS, PR.
WATCH	LETTERS	TRUNKS, PR.
WINGS	LIGHTERS	UNDERWEAR

CONTAINERS ADDRESSED TO	INFORMATION
<i>none</i>	<i>Mrs Barbara Higgins</i> <i>7406 28th Ave</i> <i>NW</i> <i>Seattle</i> <i>(w/2)</i>
NAME AND STATUS VARIATIONS	CROSS REFERENCE

CHECK	REC'D BY	NUMBER	BUREAU CHECK
MONEY ORDER		SYMBOL	TRANSMIT ORIGINAL
BOND		AMOUNT	ORIG. REG. MAIL
TRAV. CHECK		DATE	TO G. A. O.
FOREIGN CURRENCY			MUTILATED
U. S. CURRENCY			TO ISSUING AGENCY
BANK OR PLACE OF ISSUE			
PAYEE			
REMITTER OR DRAWER			
TALLY NO.	ORIG. NO. OF PKGS.	EXAMINING DATE	POX NO.
<i>7331</i>		<i>272246</i>	
NAME	AS N.		SHEET
<i>WALTER KENNETH Higgins</i>	<i>0749342</i>		OF SHEETS
ORGANIZATION	RANK	CASE NO.	
<i>5258 381</i>	<i>23</i>		
WAREHOUSE SPACE	EXAMINED BY	DIARY REMOVED	
<i>122</i>	<i>272246</i>	PHOTO FILM REMOVED	
	PACKED BY	MOTION PICTURE FILM REMOVED	
	<i>272246</i>	SHIPPED	

ATTACHMENTS

INBOUND INVENTORY

G. R. OR SUB GP LABEL

WILL OR POWER OF ATTY

TALLY IN FORM 43

EFFECTS INVENTORY
ARMY EFFECTS BUREAU

DECEASED

MISSING

P. O. W.

ABANDONED

UNKNOWN

BAGS, CLOTH OR TRAVEL

BELT, MONEY (NO MONEY)

BILLFOLD (NO MONEY)

BOOKS

BRACELET, IDENT.

CAMERAS

CLOTHING

MISC. ARTICLES

RELIGIOUS ARTICLES

RIBBONS, DECORATION

SHORT SNORTER

SOUVENIR MONEY

SOUVENIRS

TESTAMENTS

TOWELS & WASHCLOTHS

U. S. MONEY (AMOUNT)

WATCH

WINGS

BELT

BOOKS, ADDRESS

BOOKS, PILOT LOG

BRUSHES

CASE

CLOTH, WASH

COATS

FOOTLOCKER

FOOTWEAR, PR.

GLASSES

GLOVES, PR.

HANDKERCHIEFS

HEADWEAR

JACKETS

KITS

KNIVES

LETTERS

LIGHTERS

OVERCOATS

PAPERS, PERSONAL

PENCIL, MECHANICAL

PEN, FOUNTAIN

PHOTOS

PIPES

RINGS

SCARFS

SHIRTS

SOCKS, PR.

STATIONERY

TIES

TOBACCO

TOILET ARTICLES

TOWELS

TROUSERS, PR.

TRUNKS, PR.

UNDERWEAR

CONTAINERS ADDRESSED TO

INFORMATION

NAME AND STATUS VARIATIONS

CROSS REFERENCE

CHECK

MONEY ORDER

BOND

TRAV. CHECK

FOREIGN CURRENCY

U. S. CURRENCY

REC'D BY

NUMBER

SYMBOL

AMOUNT

DATE

BANK
OR
PLACE OF ISSUE

PAYEE

REMITTER
OR
DRAWER

BUREAU CHECK

TRANSMIT ORIGINAL

ORIG. REG. MAIL

TO G. A. O.

MUTILATED

TO ISSUING AGENCY

TALLY NO.

ORIG. NO. OF PKGS.

EXAMINING DATE

BOX NO.

SHEET

OF SHEETS

NAME

ORGANIZATION

WAREHOUSE SPACE

DESCRIPTION

WEIGHT

PACKED BY

RANK

CASE NO.

DIARY REMOVED

PHOTO FILM REMOVED

MOTION PICTURE FILM REMOVED

SHIPPED

INFORMATION GUIDE TO CW/L TO NOR

	JT	ROW	GRAVE
CEMETERY <u>St. Avoild, France</u>	<u>MMMM</u>	<u>12</u>	<u>282</u>
NAME <u>Higgins, Walter K.</u>	<u>PANK 2nd Lt.</u>	<u>ASN</u>	<u>0 749 242</u>
Next of Kin (Relationship) <u>Wife</u>			
Name <u>Mrs. Mary B. Higgins</u>			
Street <u>7406 28th Street, Northwest</u>			
City & State <u>Seattle, Washington</u>			
Original Burial <input type="checkbox"/>		Reburial <input type="checkbox"/> <u>XXX</u>	
Name of Person			
DATE _____	Executing Form _____		
	(First)	(Last)	
Photo	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Familien- u. Vorname: HIGGINS K. Walter		M. F. d. 20	
geboren am		in:	Kreis: 3150
Truppenteil:			
Dienstgrad: Fly Flier			
Erkennungsmarke: 0-449242/1.43			
Tag des Todes: 29.5.44		Ort des Todes: Niendorf-Pölchow/Rostock	
		Beerdigt am: 25.5.44	
Lage und Nr. des Grabes: Auf dem Geme. Friedhof Buchholz			
Geme. At: Buchholz, Kreis Rostock			
Gemeldet durch: B.F. Ref. I. W.G.D. West. Trupp-2. VI			
Prof. VIII 268 Walter Handorf Rostock Nachr. in Herbstfall			

RRE Form #43
20 Sep 48

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

RM

HIGGINS	WALTER	K	2 LT	0-749242
(Last Name)	(First Name)	(Initial)	(Rank)	(ASN)

Subject remains have been permanently interred overseas in the United States Military Cemetery ST AVOLD

Incl #

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

In Reply Refer to OSMG 293

Higgins, Walter K.
O-749 242

10 October 1946

BURIAL INFORMATION

NAME: **Higgins, Walter K.** GRADE: **2nd Lt.** A.S.N.: **O-749 242**

DATE OF DEATH: **24 May 1944.**

The following information has been received in this office, and is forwarded for aid in recovering this deceased.

PLACE OF DEATH: **Near Niendorf-Polchow/Rostock, Germany.**

PLACE OF BURIAL: **Community Cemetery at Buchholz/Rostock, Germany.**

Above information has been obtained from: **Captured German Record.**

Transmittal Ltr No. 314.6 Service Reg (European) 715711

62/E

10 October 1946

Incl **8**

REPORT OF INVESTIGATION AREA SEARCH

AGRC Form 10 (Revised)

20 Sept. 1946
Date

1 January 1946

NAME Unknown X-7783

RANK

Unk

ASN

Unk

ORGANIZATION

AAF

MEANS OF IDENTIFICATION

None

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

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

1. Was positive identity acquired for the deceased through the surface investigation? If so, state the following information:

a. NAME

RANK

ASN

b. ORGANIZATION

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

a. NAME

SMITH, ROBERT F.

RANK

Cpl.

ASN

38074381

b. ORGANIZATION

381 Bomb Gp H

3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY

HIGGINS, WALTER K.

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

- a. Date of above burials 25 May 1944 Common Graves? No

5. Name and Type of Cemetery New Cemetery, Buchholz, Germany
(Military or Civilian) Civilian cemetery

6. Map Coordinates of the Cemetery M 54 T 71 1/250,000

- a. Town Buchholz Country Germany

7. Give exact location in cemetery of the remains.

a. Section Unknown

Row

Unknown

Grave

Unknownb. Is sketch attached? Yes

8. If remains are not located in a cemetery, give exact location.

a. Town Coordinates

b. Is Sketch attached?

Does not apply

c. Is area mined?

9. How is the grave marked? Not marked

10. If grave is marked with cross, give exact markings thereon

Does not apply

- a. From what source was this information obtained?

Does not apply

(Identification tags, personal effects)

1. By whom

Does not apply

11. Where are the cemetery records?

Burgermeister's office

(Town Hall, cemetery, burgermeister's office)

a. What information was contained thereon? **Two unknown American soldiers buried in the cemetery**

b. Where was the information obtained? **Unknown**

c. By whom? **Unknown**

12. What is the date of death? **24 May 1944**

a. Give basis **German burial card**

13. What is the cause of death? **Unknown**

b. Give basis

14. What is the date of burial? **25 May 1944**

a. Give basis **German burial card**

15. What was the place of death? **Holchow, Ger.** Coords **1. 54 T 71**

b. Give basis **German burial card**

16. Where were the remains found? **Unknown** Coords

a. By whom? **Unknown**

b. Is sketch attached? **No**

17. Was a casket used? **Unknown** Who furnished the casket? **Unknown**

Type of casket **Unknown** How marked? **Unknown**

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

a. What are the names and addresses? **Unknown**

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

19. Were remains found in the plane wreckage?

a. Give location in plane from which the bodies were removed

(Tail gunner, pilot, radio, turret, etc., or front, side of plane)

b. Near wreckage? **Unknown**

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

a. Type of Plane **Unknown**

b. Markings and/or name on plane **Unknown**

c. Give numbers on motors, machine guns, instruments, radios or other equipment:

21. How did crash occur? **Unknown** Anti-aircraft **Unknown**

Enemy Planes? **Unknown** Collision? **Unknown**

22. Did plane explode in the air? **Unknown** On ground? **Unknown**

23. Did plane burn in the air? **Unknown** On ground? **Unknown**

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? Unknown

27. Does specific time and date of crash correspond with date of death of above named deceased? Unknown

28. Number of planes in formation prior to crash Unknown

29. State precise time and date of plane crash (Night?) (Day?)

30. Were parachutists seen? Unknown How many? Escaped?

Prisoners?

SECTION C — ARMORED CORPS DECEASED (To be completed only if deceased is believed to have been a member of the Armored Force).

31. Were remains found in wreckage of a tank? This section does not apply

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 where 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).

39. Did death occur from any other means? (i. e., truck, jeep, mines, drowning, or small arms fire)

If so, give complete and thorough results of the interrogation.

a. Are all certificates and statements of people who possessed knowledge of the case attached?

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? No

If not, state reason All papers and personal effects taken by German army

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

Where? By whom?

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.

Unknown

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

Where?

By whom?

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 immunization shot?

42. Was Deceased given first aid? Unknown If so, where?

By whom?

Are statements from the medical people attached?

43. Was deceased evacuated to a German civilian hospital? Unknown

Where?

Names of people concerned

44. Is it possible on surface investigation to obtain from civilian sources a physical description of the deceased? No

45. Is it possible on surface investigation to obtain from civilian sources the condition of the remains? No

(Burnt? Decapitated? etc)

46. Do facts surrounding death show any evidence that it might be an atrocity case? No

a. If so, give basis for positive assumption

b. If so, has higher headquarters been notified?

47. Was case previously investigated?

By whom?

When?

48. Give full names, addresses, and information obtained from each person interviewed

Hans Wessendorf, Buchholz, Germany, Burgermeister

49. Are 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, Soviet Zone

(If special investigation, give case number)

52. Give Brief Narrative The Burgermeister is new and the only information available were the records in his office that two American soldiers were buried in the cemetery.

(Use attached, sheets if necessary)

Signature of Interpreter

Rank

ASN

Signature of Investigator

WALTER W. MCCABE

1st Lt. 0-1597188

Rank

ASN

AGRC

Organization

Organization

Note: These cases were investigated by an officer now redeployed and this headquarters can assume no responsibility of their correctness and completeness

JACK E CAULEY 2nd Lt. Inf
95th OM Bn (M)