Request for Disposition of Remains, James Vrtatko

United States Department of the Army

PAGE 1

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. BARBARA VRTATKO

(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 INERTED 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

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

☐ YES ☐ NO

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

NONE

29 AUG 1948

2

30 JUL 1948

345 MILITARY

30 JUL 1948
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PART 1 (Continued)

If on Page 1 of this form you have selected Option Number 2 or 3, or Option Number 4 with your 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:

<table>
<thead>
<tr>
<th>LAST NAME</th>
<th>FIRST NAME</th>
<th>MIDDLE INITIAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>NUMBER AND STREET</td>
<td>CITY OR TOWN</td>
<td>COUNTY OR PROVINCE</td>
</tr>
<tr>
<td>EXPRESS OFFICE (Nearest railroad passenger station)</td>
<td>TELEGRAPH ADDRESS</td>
<td>TELEPHONE No.</td>
</tr>
</tbody>
</table>

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:

<table>
<thead>
<tr>
<th>FULL NAME OF FUNERAL DIRECTOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>NUMBER AND STREET</td>
</tr>
<tr>
<td>EXPRESS OFFICE (Nearest railroad passenger station)</td>
</tr>
</tbody>
</table>

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:

<table>
<thead>
<tr>
<th>LAST NAME</th>
<th>FIRST NAME</th>
<th>MIDDLE INITIAL</th>
<th>RELATIONSHIP TO DECEASED</th>
</tr>
</thead>
<tbody>
<tr>
<td>NUMBER AND STREET</td>
<td>CITY OR TOWN</td>
<td>COUNTY OR PROVINCE</td>
<td>STATE OR TERRITORY OF U.S.A., OR COUNTRY</td>
</tr>
</tbody>
</table>

REMARKS OR ADDITIONAL INSTRUCTIONS (For additional space use page 5.)

___________________________________________________________________________________


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.

BARBARA VRTATKO

(route and number)

BARBARA VRTATKO

(city and state)

Subscribed and duly sworn to before me according to law by the above-named applicant this 12th day of May, 1951.

NOTE—Page 4 to the notarial attestation.

PAGE 2