

AD 7-16-17

ORIGINAL

1. NAME OF DECEASED—LAST—FIRST—MIDDLE (<i>Print or type</i>) Linden, George E.			APPLICATION FOR HEADSTONE OR MARKER (See attached instructions. Complete and submit original and duplicate)		
2. ENLISTMENT DATE (<i>Month, Day, Year</i>) 4/2/17 <i>NG</i>		3. DISCHARGE DATE (<i>Month, Day, Year</i>) 6/28/19 <i>Hon</i>		12. EMBLEM (<i>Check one</i>) <input checked="" type="checkbox"/> CHRISTIAN (<i>Latin Cross</i>) <input type="checkbox"/> HEBREW (<i>Star of David</i>) <input type="checkbox"/> NONE	
4. SERVICE NO. 1 201 563		5. PENSION OR VA CLAIM NO. 61 37 12		13. CHECK TYPE REQUIRED <input type="checkbox"/> UPRIGHT MARBLE HEADSTONE <input type="checkbox"/> FLAT MARBLE MARKER <input checked="" type="checkbox"/> FLAT GRANITE MARKER <input type="checkbox"/> FLAT BRONZE MARKER	
6. STATE New Jersey		7. GRADE Sgt. 1st Class <i>TIME</i>		8. MEDALS <i>TIME</i>	
9. BRANCH OF SERVICE, COMPANY, REGIMENT, AND DIVISION OR SHIP U.S. Army <i>7 DIV</i> <i>Hqs DET, CHEMICAL WARFARE SERVICE</i>			14. SHIP TO (<i>Name and address of person who will transport stone or marker to cemetery</i>) New York & New Jersey Railroad Co.		
10. DATE OF BIRTH (<i>Month, Day, Year</i>) 6/6/95 <i>over</i>			11. DATE OF DEATH (<i>Month, Day, Year</i>) 6/2/59		
15. FREIGHT STATION Essex Street, Hackensack, N.J.			16. NAME AND LOCATION OF CEMETERY (<i>City and State</i>) Hackensack Cemetery Hackensack, New Jersey		
DO NOT WRITE HERE RECEIVED JUN 11 1959			17. I CERTIFY THE APPLICANT FOR THIS STONE OR MARKER HAS MADE ARRANGEMENTS WITH ME TO TRANSPORT SAME TO THE CEMETERY. SIGNATURE <i>George W Harris Supt</i> 815-59		
VERIFIED AUG 4 1959			18. NAME AND ADDRESS OF APPLICANT (<i>Print or type</i>) Mrs. Gloria Mc Naught 27 Spruce St., Pompton Lakes, N.J.		
B/L WY- 8878375			19. I certify this application is submitted for a stone or marker for the unmarked grave of a deceased member or former member of the Armed Forces of the United States, soldiers of Union and Confederate Armies of the Civil War. I hereby agree to accept responsibility for properly placing the stone or marker at the grave at no expense to the Government.		
ORDERED H. E. FLETCHER CO., INC.			SIGNATURE OF APPLICANT <i>Gloria Mc Naught</i>		DATE 6/4/59

QMC FORM 646 WEST CHELMSFORD, MASS. REPLACES OQMG FORM 623, 8 FEB 49 WHICH MAY BE USED

IMPORTANT—Reverse Side Must Be Completed

16-11453-9 GPO