

ORIGINAL

WW II APPLICATION FOR HEADSTONE OR MARKER
(Please make out and return in duplicate)

CHECK TYPE REQUIRED
(See Instructions attached)

☐ UPRIGHT MARBLE HEADSTONE
☐ FLAT MARBLE MARKER
☒ FLAT GRANITE MARKER
☐ BRONZE MARKER

ENLISTMENT DATE 1943,
 (date uncertain)
 DISCHARGE DATE
 Died in Service

SERIAL No. 12120782

PENSION No.

STATE N.J.
 RANK S/SGT

U. S. REGIMENT, STATE ORGANIZATION, AND DIVISION
 1st AIR CORPS 5th Bomb Group,
 31st Squadron.

NAME (Last, First, Middle Initial)
 EMPTAGE HAROLD L.

DATE OF BIRTH (Month, Day, Year)
 August 30, 1921

DATE OF DEATH (Month, Day, Year)
 March 7, 1945

NAME OF CEMETERY
 Grove Church Cemetery

LOCATION (City and State)
 NORTH BERGEN, N.J.

SHIP TO (I CERTIFY THE APPLICANT FOR THIS STONE HAS MADE ARRANGEMENTS WITH ME TO TRANSPORT THE STONE FROM THE FREIGHT STATION TO THE CEMETERY)
 1224 - 46th St., North Bergen, N.J.

NEAREST FREIGHT STATION (City and State)
 North Bergen N.J.

POST OFFICE ADDRESS OF CONSIGNEE
 1224 - 46th St., North Bergen, N.J.

(SIGNATURE OF CONSIGNEE)
[Signature]

DO NOT WRITE HERE
 FOR VERIFICATION
 ORDERED 24 MAY 1949
 R/L W. CHILMSEFORD, MASS. 14 JUN 1949
 SHIPPED 8292110

I certify this application is submitted for a stone for the unmarked grave of a veteran.
 I hereby agree to assume all responsibility for the removal of the stone promptly upon arrival at destination, and properly place it at the decedent's grave at my expense.

APPLICANT'S SIGNATURE *Mr. James Knapp*
 ADDRESS (Street, City, State)
 845 WILLIAMS AVE, TEANECK, NEW JERSEY

OQMG FORM 623
 REV 6 JUL 48

IMPORTANT—Complete Reverse Side

16-11453-7 GPO