

U.S.N. 31200 1948

Archives

ORIGINAL

CHECK TYPE REQUIRED <i>(See Instructions attached)</i>		APPLICATION FOR HEADSTONE OR MARKER <i>(Please make out and return in duplicate)</i>		
<input type="checkbox"/> UPRIGHT MARBLE HEADSTONE	ENLISTMENT DATE 6-5-18	SERIAL No. 191 92 70	EMBLEM (Check one)	
<input type="checkbox"/> UPRIGHT GRANITE HEADSTONE	DISCHARGE DATE 9-30-21	PENSION No.	<input checked="" type="checkbox"/> CHRISTIAN	
<input type="checkbox"/> FLAT MARBLE MARKER		STATE R. I.	<input type="checkbox"/> HEBREW	
<input checked="" type="checkbox"/> FLAT GRANITE MARKER		RANK MM 2/c	<input type="checkbox"/> NONE	
<input type="checkbox"/> BRONZE MARKER (NOTE RESTRICTIONS)		COMPANY 1st Naval District	U. S. REGIMENT, STATE ORGANIZATION, AND DIVISION U.S. Naval Reserve Force, Class 2	
NAME (Last, First, Middle Initial) SHEEHAN, William Edward		LOCATION (City and State) East Blackstone, Mass.		
DATE OF BIRTH (Month, Day, Year) 11-7-93	DATE OF DEATH (Month, Day, Year) 5-30-47	NEAREST FREIGHT STATION (City and State) Woonsocket, Rhode Island		
NAME OF CEMETERY St. Charles Cemetery		POST OFFICE ADDRESS OF CONSIGNEE 205 Railroad St., Woonsocket, R. I.		
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)		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.		
<i>Thomas R. Murray & Son</i> (SIGNATURE OF CONSIGNEE)		<i>Ward M. Hayes</i> APPLICANT'S SIGNATURE		
DO NOT WRITE HERE		DATE OF APPLICATION March 1, 1948		
FOR VERIFICATION MAR 19 1948	ORDERED WILMSPORD, ILL. 22 APR 1948	ADDRESS (Street, City, State) 239 Summer Street, Woonsocket, Rhode Island		
B/L 972584	SHIPPED			

OQMG FORM REV 6 NOV 45 623

IMPORTANT—Complete Reverse Side

16-11453-5 GPO