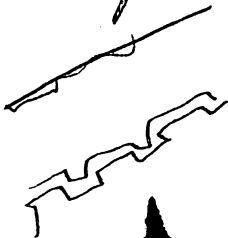


Age & date of
Enlist.

allbrought

per AHO

1313



CODE SLIP

HEADING	SUB- HEADING	NO. OF COLS	CODE
NAME <i>ALLbright</i>	<i>AL</i>	3	<i>122</i>
BURIED <i>Miles C.</i>	CEMENTERY <i>608</i>	1	<i>2</i>
	GRAVE <i>38</i>	2	<i>38</i>
	ROW <i>26</i>	2	<i>26</i>
	BLOCK <i>B</i>	1	<i>2</i>
STATE	<i>Texas</i>	2	<i>49</i>
RANK	<i>Priv.</i>	1	<i>2</i>
DIVISION	<i>36</i>	2	<i>36</i>
ORGANIZATION	<i>144</i>	3	<i>144</i>
ARM	<i>Inf.</i>	1	<i>1</i>
<i>Res</i> MARITAL	<i>no</i>	1	<i>2</i>
NAME <i>JETER</i>	<i>JET</i>	3	<i>0512</i>
<i>Mrs Lee Allbright</i>	STATE <i>Texas</i>	2	<i>49</i>
RESIDENCE	COUNTY <i>Jefferson</i>	2	<i>12</i>
<i>Gladewater, Tex</i>	CITY <i>Glade</i>	3	<i>12</i>
RELATION	<i>Mother</i>	1	<i>1</i>
OTHER		1	
ELIGIBILITY	<i>Head</i>	1	<i>6</i>
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
. TRIP	YR.	1	
ACCEPTANCE 29/514/		1	

AUDITED

MAR 26 1932

M

P510

l QM 293 A-M
Albright, Miles C. 608

January 3, 1931

Mrs. Lee Ola Jeter,
Gladewater,
Texas.

Dear Madam:

Receipt is acknowledged of your letter of recent date, furnishing information requested by this office in letter dated December 16, 1930.

The only provision of the law under which anyone other than the mother or widow could be considered for the privilege of making this pilgrimage is contained in section 4 (a) of the Act of March 2, 1929, as amended May 15, 1930, which reads in part as follows: "or any woman who stood in loco parentis to a deceased member of the military or naval forces for a period of not less than five years at any time prior to the soldier, sailor, or marine becoming eighteen years of age".

In the event you believe yourself eligible under this provision of the law to make a pilgrimage, it is requested that the enclosed forms be completed by at least two persons not related to you and returned to this office, in order that your eligibility under the Act may be determined. Under paragraphs 1 (c) and 1 (d), sufficient information should be included to permit an intelligible decision as to eligibility.

For The Quartermaster General.

Very truly yours,

A. D. HUGHES,
Captain, Q. M. Corps,
Assistant.

Enclosure:
Act-Amendment.
Aff. Forms.
Envelope.
KL

*No Loss
1931*

✓
Let

A. D. Honghe.
Captain Q. M. Corps-
Washington D.C.
Dear Sir:-

1910

In ans to your
letter of the 16-

Miles C. Albright's mother
died over 20 years ago -
Miles was my brother
and do wish some
member of the family
could visit his grave
in France - Could I -
his sister get this
trip or any other
member of the family

Yours truly



Mrs Lee Ola Jeter
Glodewater Tex

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-M
Albright, Miles C. 608
2

December 16, 1930

Mrs. Lee Ola Jeter,
Gladewater,
Texas.

Dear Madam:

In order that the records of this office may be complete and correct, it is requested that you advise whether or not the late Private Miles C. Albright is survived by a natural mother, and if so, her name and address.

For your convenience in replying, there is enclosed, herewith, a self-addressed envelope which requires no postage.

For The Quartermaster General.

Very truly yours,

A. D. Hughes
A. D. HUGHES,
Captain, Q. M. Corps,
Assistant.

Enclosure:
Envelope.



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

July 12, 1930

Albright, Miles G.

608-S

Mrs. Lee Ola Albright Jeter
Cladewater, Texas

Dear Madam:

Your attention is invited to the enclosed copy of an Act of Congress of March 2, 1929, together with an amendment thereto, approved May 15, 1930.

This office has no record of any person entitled under the Act mentioned to make a pilgrimage to the cemeteries in Europe as the mother or widow of the above named deceased service man. To complete the list of eligibles and to assure that, if the above named man is survived by a mother or widow entitled to make a pilgrimage she receive an invitation to do so, it is requested you answer the following questions in the space provided on this letter and return to this office in the enclosed envelope which requires no postage.

1. Is the deceased survived by a mother?

If so, give her name and address:

2. Is the deceased survived by a widow who has not remarried?

If so, give her name and address:

3. Is the deceased survived by any woman who stood in loco parentis to him according to the terms of Section 4 (a) of the enclosed Act as amended?

If so, give her name and address:

For The Quartermaster General,

Very truly yours,

Enclosures:

Envelope

Act

Amendment

A. D. HUGHES,
Captain, Q. M. Corps,
Assistant.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Allbright, Miles C. 606

March 3, 1930

Mrs. Lee Ola Allbright Jeter,
Cladwater, Tenn.

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress approved March 2, 1929, entitled an Act "To enable the mothers and widows of the deceased soldiers, sailors and marines of the American forces now interned in the cemeteries of Europe to make a pilgrimage to these cemeteries".

The records of this office show that you are the father of the late Pvt. Miles C. Allbright, Co. K, 144th Inf., whose remains are now interred in the Oise-Aisne American Cemetery, Serres-et-Scales, Aisne, France.

Will you please fill in the answers to the following questions in the space provided on this letter, and return to this office in the enclosed envelope which requires no postage?

Write answers in space below:

1. Is the deceased survived by a widow who has not since remarried?

2. If so, give her complete address.

3. If he is survived by a mother, stepmother, mother thru adoption, or any other woman who stood in loco parentis to him, according to the terms of Section 4 of the enclosed Act, give her name, address, and relationship in the space opposite.

4. Does she desire to make the pilgrimage?

For The Quartermaster General,

Very truly yours,

2 Incls:
Act of Congress
Envelope

JOHN T. HARRIS,
Major, Q. M. Corps,
Assistant.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Albright, Miles C. 608

March 3, 1930

Mrs. Lee Oia Albright Jeter,
Gladewater, Texas.

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress approved March 2, 1929, entitled an Act "To enable the mothers and widows of the deceased soldiers, sailors and marines of the American forces now interred in the cemeteries of Europe to make a pilgrimage to these cemeteries".

The records of this office show that you are the father of the late Pvt. Miles C. Albright, Co. K, 144th Inf., whose remains are now interred in the Oise-Aisne American Cemetery, Seringes-et-Nesles, Aisne, France.

Will you please fill in the answers to the following questions in the space provided on this letter, and return to this office in the enclosed envelope which requires no postage?

Write answers in space below:

1. Is the deceased survived by a widow who has not since remarried?
2. If so, give her complete address.
3. If he is survived by a mother, stepmother, mother thru adoption, or any other woman who stood in loco parentis to him, according to the terms of Section 4 of the enclosed Act, give her name, address, and relationship in the space opposite.
4. Does she desire to make the pilgrimage?

For The Quartermaster General,

Very truly yours,

2 Incls.
Act of Congress
Envelope

JOHN T. HARRIS,
Major, Q. M. Corps,
Assistant.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

DATE February 10 1930

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
<u>Allbright Miles C</u>	<u>Pvt</u>	<u>3063783</u>	<u>Co K 144th Inf</u>	<u>Oct 18 1918</u>

STATE	CTY. NO.	GRAVE	ROW	BLOCK
<u>Texas</u>	<u>608</u>	<u>38</u>	<u>26</u>	<u>B</u>

	<u>Check relationship</u>	<u>Living - Deceased</u>	<u>XC-90-457</u> <u>2-13-18 m</u>
NAME	MOTHER	<u>No Record</u>	
AND	STEPMOTHER (For the year prior to commencement of service)		
ADDRESS	MOTHER THRU ADOPTION (For the year prior to commencement of service)		
	MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)		
	WIDOW (Who has not remarried)		
	<u>Single name -</u>		
			<u>(s)</u> <u>mrs. L. C. Allbright</u> <u>Gladeswater</u> <u>Texas</u>

Veterans Bureau Claim Number 29/156

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Allbright, Miles Champion
608

Aug. 27, 1929.

Mr. W. M. Allbright,
Buffalo, Texas.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated June 20, 1929 making inquiry concerning the name and address of the mother and widow of the deceased service man above named. These addresses are desired with a view to ascertaining the number of mothers and widows who desire to make a pilgrimage to the cemeteries of Europe in which the remains of their sons and husbands are interred.

Will you please fill in the answers to the following questions in the space provided on this letter, and return the letter to this office in the enclosed envelope which requires no postage?

Write answers in space below

1. Is the deceased survived by a widow who has not since remarried? If so, give her complete address:

2. If he is survived by a mother, stepmother, mother thru adoption, or any other woman who stood in loco parentis to him, according to the terms of Section 4 of the enclosed Act, give her name, address, and relationship in the space opposite.

3. If survived by a widow or mother does she desire to make the pilgrimage?

For The Quartermaster General,

Very truly yours,

2 Incls.
Act of Congress
Envelope

JOHN T. HARRIS,
Major, Q. M. Corps,
Assistant.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

~~Allbright, Miles Champion~~

June 20 1929.

Mr. W. M. Allbright,
Buffalo, Texas.

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress approved March 2, 1929, entitled an Act "To enable the mothers and widows of the deceased soldiers, sailors and marines of the American forces now interred in the cemeteries of Europe to make a pilgrimage to these cemeteries".

The records of this office show that you are the father of the late Private Miles Champion Allbright, Co.K, 144th Inf., whose remains are now interred in the Oise-Aisne American Cemetery, Seringes-et-Nesles, Aisne, France.

Will you please advise this office whether or not he is survived by a mother or widow who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish the full names and addresses of the mother and widow in order that action may be taken to extend invitations to them to make the pilgrimage. Both mothers and widows are entitled to make the pilgrimage.

Your attention is particularly invited to Section 4 of the enclosed Act, which defines the terms "mother" and "widow". If the relative is a stepmother, mother through adoption or any woman who stood in loco parentis to the decedent, a statement as to her relationship is requested. If he was survived by a widow who has since remarried it is also requested that a statement to that effect be made.

For your reply, you may use the enclosed envelope which requires no postage.

The Quartermaster General,

Very truly yours,

2 incs.
Act of Congress.
Envelope.

JOHN T. HARRIS,
Major, Q. M. Corps,
Assistant.

QM 293 A-C

Allbright, Miles Champion

February 5, 1929.

Mr. W. M. Allbright,
Buffalo,
Texas.

Dear Sir:

The inclosed card gives the permanent cemetery and grave location of the late **Miles Champion Allbright**.

All American military cemeteries, both in Europe and in our own country, will be maintained by the Government forever, the graves permanently marked by headstones showing the decedent's name, rank, organization, State, and date of death, all of which will be done without the necessity of requests emanating from relatives.

Please understand that in effecting the final disposition of our heroic dead the utmost care and reverence is exercised.

For The Quartermaster General,

Very truly yours,

J. McCLINTOCK,
Major, Q. M. Corps,
Assistant.

IASB

1 Incl.
Record card.

To be prepared in triplicate.

DATE January 11, 1928

REPORT OF DISINTERMENT, PREPARATION, SHIPMENT AND REBURIAL OF BODY

DISINTERMENT

COMPARATIVE REPORT

Records of G.R.S. Headquarters.

Discrepancy found upon exhumation of body

1. Name ALLBRIGHT, Miles C. *Champion Texas* 10. Name _____
2. No. 3063783 11. No. _____
3. Rank Pvt. 12. Rank _____
4. Org. Co. K, 144th Inf. *36th Div* 13. Org. _____
5. D.D. October 18, 1918. 14. (a) D.D. _____
6. C.D. Broncho Pneumonia. (b) D.B. _____

Discrepancy found upon disinterment

7. Grave No. 7. Sec. _____ 15. Grave No. _____ Sec. _____
8. Plot Block B Row 22 16. Plot _____ Row _____
9. _____ 17. _____
18. Cemetery Oise-Aisne 19. Commune or town Seringes-et-Nesles
20. Dept. or County Aisne 21. Country France
22. G.R.S. Hdqrs. Code No. 608
23. Disinterred (Date) January 11, 1928 By P.N. McCabe
24. Inscription on grave marker:
Name ALLBRIGHT, Miles C. Serial No. 3063783
Rank Pvt. Organization Co. K, 144th Inf.
25. Was identification disc found on grave marker? no On body? no

Signature Junior Technical Assistant

PREPARATION

26. What other means of identification were on body? (If no disc or other means of identification on body, give description of body in detail).

French burila plaque No. 107

27. Condition of body _____
28. Nature of burial Pine box and burlap.
29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? _____
30. Body prepared and placed in casket: Date January 11, 1928 By P.N. McCabe
31. Casket sealed by P.N. McCabe

Signature of Embalmer, (Supervisor)

P.N. McCabe
P.N. McCabe

SHIPMENT. (Show actual marking of box.) Box No. _____

32. Designation of body: _____

Name ALLBRIGHT, Miles C. Serial No. 3063783

Rank Pvt. Organization Co. K, 144th Inf.

33. Consigned to: _____

Name of Permanent Cemetery Oise-Aisne, Seringes-et-Nesles, Aisne

34. Casket boxed and marked (Date) January 11, 1928 By C. E. Spahn

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

Signature of G.R.S. Inspector C. E. Spahn

36. Remarks _____

37. Shipped from point of Operation: (Date) _____

To point of Concentration _____

Convoyer _____ (Name)
Signature Shipping Officer _____

38. Received at Railhead or Point of Concentration: Date _____

By G.R.S. Representative _____

39. Shipped from Railhead or Point of Concentration: Date _____

To Permanent Cemetery _____

Convoyer _____ (Name)
Signature Shipping Officer _____

40. Received: Date _____

G.R.S. Representative _____

41. Reinterred January 11, 1928, Oise-Aisne American Cty.

42. Grave No. 38 (Date) _____ Section _____

43. Plot Block B Row 26

G.R.S. Representative William E Moore
William E. Moore, Superintendent.

Place **Oise-Aisne Cty. 608**

REPORT OF DISINTERMENT AND REBURIAL

Date **Jan. 11, 1928.**1. REMAINS OF **ALLBRIGHT, Miles C. ^{champion}** SERIAL NUMBER **3063783**RANK **Pvt.** ORGANIZATION **Co. K, 144th Inf.**2. Disinterred (date) : **Jan. 11, 1928.** From (give complete location) : **Grave 7 Block B Row 22**By : Group **Cty.** Unit3. Reburied (date) : **Jan. 11, 1928.** In (give complete location) : **Grave 38 Block B Row 26**By : Group **Cty.** Unit Nature of reburial **Metal Casket**4. Report as to nature of original burial and condition of body upon disinterment : **Pine box & burlap**5. (a) Identification tags: Buried with body? **Yes Al. strip** Grave marker?

(b) Other means of identification found upon disinterment, and general remarks :

French reburial plaque No. 107

6. What does examination of body show as regards the following identifying items ?

(a) Height (actual measurement)

(b) Weight (estimated)

(c) Hair—Color

Quantity

Characteristics

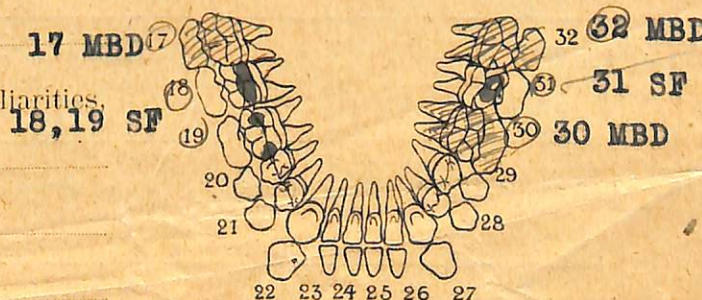
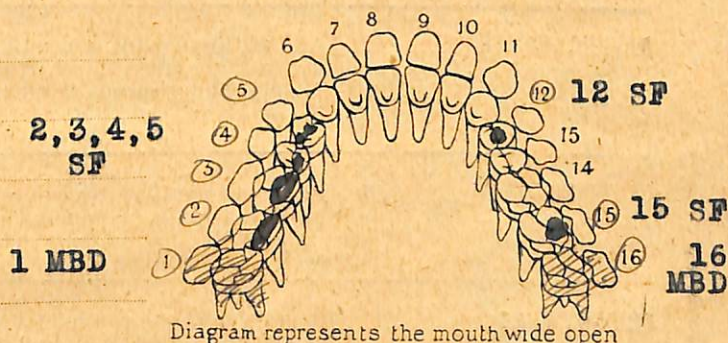
(d) Hair on face—Color

Location

Quantity

(e) Permanent marks on body (old scars, peculiarities, or missing parts)






(f) Wounds or missing parts (received at time of casualty)



INSTRUCTIONS FOR THE PROPER COMPLETION OF G. R. S. FORM NO. 16-A

Enter information, as noted below, on reverse side of sheet in the *corresponding numbered space*. This form is supplemental to and is to be forwarded with G. R. S. Form 11-a, reporting reburial locations. To be used in answer to Question 26, Form 114, in case no means of identification on body.

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.
2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.
3. Give date and accurate information as to location of reburial and the group and unit which made reburial, and how reburial was made—in casket, wooden box, etc.
4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried—in a casket, box, burlap, etc. This statement should be as complete as possible.
5. (a) State whether identification tags were found buried with body and on grave marker by reporting "Yes" or "No".
(b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money, order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying the body, other than that tabulated under Item No 6.
6. Give all information as to body description and dental chart as nearly correctly as the condition of the body will allow. Items (e) and (f) under the body description are very important and should be very complete. The dental chart is also very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

MISSING TEETH	All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus:	
CROWNED TEETH	Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus:	
BRIDGE WORK	Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge) thus:	
FILLINGS	Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus:	
CARIES (CAVITIES)	Outline location and size of cavity, shade in thus:	
DENTURES (PLATES)	Draw diagram of relative size and shape of plate block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp"	

7. Show name of person supervising the disinterment and the name and title of the person approving same.

8. Show name of person supervising the reburial and the name and title of the person approving same.

QM 293 A-C

ALLBRIGHT, Miles C. - Pvt.

October 24, 1925



Mr. W.M. Albright,
Buffalo,
Texas.

Dear Sir:

The Quartermaster General desires to invite your attention to the inclosed card which gives the permanent cemetery location of the soldier's grave in which you are interested.

This American military cemetery is one of those to be maintained by the United States for all time in Europe. Each grave will be marked by a headstone of white marble, of dignified design, with the name, rank, division, organization, date of soldier's death and State from which he came. Headstones will be placed at all graves in connection with the improvement work now in progress, as soon as possible and without waiting for special action or request on the part of relatives.

Please be assured that in effecting removal of the dead, the utmost reverential care was exercised and more than willingly accorded by those who performed this sacred duty. For the future, these graves will be perpetually maintained by the Government in a manner befitting the last resting place of our heroes.

Very truly yours,

L.W. REDINGTON,
Major, Q.M.G.
Assistant.

1-Incl.
Record card.

RD
8413

5503 COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

(a) Name ALLBRIGHT, Miles C. Ser. No. 3063783 } TYP. vbb
 (b) Rank Private Organization Co. K, 144th Infantry } CKR. 173
 (c) Date of death 10-18-18 (d) Cause of death Broncho Pneumonia

II. REGISTRATION CARD.—(Check Reg., Card Inf. against Loc., Ind., Inf.):

(a) Grave No. 316 Row -- Plot 7 Sec. G TYP. vbb
 (b) Emerg. Address W.M. Albright (father) Buffalo, Texas.

III. Files of soldiers dying from contagious diseases --- NO CARD CKR. 173-

IV. A. G. O. DISPOSITION CARD:

Date of receipt no card in file. MA-12-10-20

(a) Name _____ (b) Relationship _____
 (c) Address _____
 (d) Remains to be brought to U. S.? _____
 (e) To be interred in National Cemetery in U. S. at _____
 (f) Shipping instructions upon arrival of body in U. S. _____
 (g) Disposition instructions if not brought to U. S. _____

Examiner's Initials _____ Date _____, 1920.

V. A. G. O. CORRESPONDENCE shows communication from _____

_____, dated _____
 confirming request in Par. IV., item _____, above, or requesting that _____

Examiner's Initials MAH Date 12-10, 1920.

VI. G. R. S. FILES, CORRESPONDENCE—shows as follows: _____

(a) Cancellation memos referred to? Yes S.H.

Examiner's Initials S.H. Date 12-10-, 1920.

COUNTRY FRANCE CEMETERY No. 608 SHEET No. 23

Reviewed 3/25/21 E.O.

VII. G. R. S. Form No. 114 made _____, 1920.

Typed by _____, Checked by _____, 1920.

VIII. FINAL ACTION

Following advice forwarded to Europe by

cable on _____

letter on _____

1/15/21, 1920

Par #2 not to be returned (LRM)

IX.

CORRECTIONS

CHANGE OF ADVICE.	ACTION TAKEN.
Desires body be _____	
Body to be shipped to _____	

X. SUSPENSION REMARKS: 2/5/21-F-120 William Allbright (father), next of kin, Buffalo, Texas. wishes body to remain in Europe. H-3/4/21-rmj

MAR 17 1921

C M,

FORM 115 RETURNED BY HOBOKEN - BODY
TO REMAIN IN EUROPE.

March 12, 1921.

File No. 293.8 Gen.Div.Cor.Br.
(ALBRIGHT, Miles C.)

Mr. William Albright,
Buffalo, Texas.

Dear Sir:-

Receipt of shipping inquiry dated February 5th, 1921, relative to the remains of your son, the late Private Miles C. Albright, serial number 3063783, Company K, 144th Infantry, is acknowledged.

In accordance with your desire, the remains will be left in France for burial in a permanent American Cemetery. You are assured that the grave site will always be maintained as a fitting memorial of the late soldier's sacrifice.

The Department wishes to convey to you renewed assurance of its sympathy in your bereavement.

By authority of the Quartermaster General,

R. B. SHANNON,
Captain, Q.M.G.,
Officer in Charge.

MAILED
MAR 16 1921
COR. BR. G. R. S.

BY:

F. C. DALLAS,
Executive Assistant.

WAR DEPARTMENT

608-23 cbm

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

CEMETERIAL DIVISION

WASHINGTON

Hoboken, N.J.

FROM: Chief, Cemeterial Division, O. Q. M. G.

JAN 31 1921

To: Mr. W. M. Allbright, Buffalo, Texas.

SUBJECT: Remains of Pvt. Miles C. Allbright, Ser. No. 3063783, Co. K, 144th Inf.

The records of this office show that you have requested that the body of the above named

~~no request has been made for the disposition of his remains.~~ *to be*

left in Europe.

If these are not the correct instructions, please correct them. Make corrections on reverse side of this sheet.

The nearest next of kin may choose between, (1) return of the body to any address in the United States; (2) interment in the National Cemetery, Arlington, Va., or any other National Cemetery; or (3) body to remain in Europe.

By authority of the Quartermaster General.

CHARLES C. PIERCE,
Lieut. Colonel, U. S. Army.

If all blank spaces below are not filled out, it will necessitate a return of this paper and a SERIOUS DELAY in the shipment of this body. State in each case WHETHER or not these relatives are STILL LIVING.

Was soldier married? *No*

NAME OF—	NO. AND STREET.	TOWN.	STATE.
Soldier's widow			
Soldier's children. { 1			
(Name oldest first.) { 2			
{ 3			
Father <i>William Allbright</i>		<i>Buffalo</i>	<i>Tex</i>
Mother <i>Dead</i>			
Brothers. { 1 <i>Allen, Allbright</i>		<i>Coolidge</i>	<i>Tex</i>
(Name oldest first.) { 2 <i>Chester</i>		<i>Buffalo</i>	
{ 3 <i>John</i>			
<i>Griffith</i>			
<i>Indy</i>			
Sisters. { 1 <i>Emilie Castleberry</i>		<i>Freist</i>	<i>Tex</i>
(Name oldest first.) { 2 <i>Marionne Dambard</i>		<i>Mart</i>	<i>Tex</i>
{ 3 <i>Mrs. Olga Jeter</i>		<i>Buffalo</i>	<i>Tex</i>
<i>Mrs. Louise Allbright</i>			<i>H</i>

Date *2/5 - 1921*

Signature *Wm Allbright*

Address *Buffalo Tex*

Relationship *Father*

I, the undersigned, am, the Father and nearest living next of kin of the within-named soldier, and desire the following disposition of his remains, viz:
(Strike out all except the one showing the disposition desired.)

1. ~~As stated on first page of this sheet.~~

2. ~~To be returned to the U. S. and shipped to~~

(Name.)

(R. R. station.)

(State.)

3. ~~To be returned to the U. S. and buried in~~

National Cemetery.

4. To remain in Europe, for burial in a permanent American Cemetery.

(*Wish to Remain there if he did not get Back*)

Signature

Wm Albright

INSTRUCTIONS FOR FILLING OUT.

1. If definite instructions for the disposition of a body are not received from the next of kin within two weeks of its arrival at New York, burial will be made without further notice in the World War Section of Arlington National Cemetery.

2. The transfer of bodies will be made ENTIRELY at Government expense.

3. This paper MUST BE SIGNED BY THE PERSON WHO IS THE NEXT of kin IN THE ORDER shown in the square on the other side of this sheet.

4. This paper must be returned showing the name and address of each of the nearest next of kin in the spaces provided therefor on the other side of this sheet.

5. If there are minor children of the deceased soldier and no widow, the LEGALLY APPOINTED GUARDIAN of the children should ascertain their wishes and act for them in this matter.

6. If YOU are not the nearest next of kin, please ask the nearest next of kin, if living near you, to fill out this paper.

7. If YOU are not the nearest living next of kin and do not know who or where the nearest relatives are, please fill out this paper AT ONCE and mail to this office.

8. You are requested to return this paper AT ONCE in order to avoid delay in the case of this body.

9. Use the inclosed envelope—pay no postage.

NOTE.—INSTRUCTIONS FOR THE DISPOSITION OF REMAINS will be issued by this office upon the properly executed authority of the legal next of kin in each case. The widow is the first person having disposition of the remains of her husband. Should there be no widow or children, the father and, in turn (upon his decease), the mother, is the proper authority. The brothers, in order of seniority, and then the sisters in order of seniority, if there are no brothers, rank next in authority to decide. Under an opinion rendered by the Judge Advocate General of the Army, if a widow has remarried she forfeits her right, and the next of kin as given above will make decision.

(a) Name ALLBRIGHT, Miles C. Ser. No. 3063783

(b) Rank Private Organization Co. K, 144th Infantry

(c) Date of death 10-18-18 Cause of death Broncho Pneumonia

(a) Grave No. 316 Row -- Plot 7 Sect. G b3b
TYP
(b) Emerg. Address W.M.Allbright (father) Buffalo, Texas.

III. Files of soldiers dying from contagious diseases..... CKR 243

Also. no card in file
H.E.S. no request for disposition
(Samp. 7/21)

V. Following advice forwarded to Europe by - (cable on.....192
(letter of transmittal on 11/15/21 192

Par #2 Not to be returned (LPM)

VI. Form 115 forwarded to G.R.S. Hoboken, N.J. 192.....

Date of and Source	Relationship and name	Desires	Action taken
-----------------------	--------------------------	---------	--------------

VIII. Form 115 received from G.R.S. Hoboken, N.J. MAR 17 1921 192

COUNTRY
G.R.S. FORM 115-A
August , 1920

S-666/MB FRANCE

CEMETERY NO.

SHEET NO.

608

23

SurK-1-22-21.

#38868

File Number #38868.

FILES.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

October 6, 1920.

MEMORANDUM TO A.G.O. World War Division, Corresp. Section.
Miss Bloxton, Branch-1159.

Confirming telephonic conversation of October 6, 1920.
re. case of Pvt. Miles C. Allbright, Co. K, 144th Infantry, Ser. #None.
the records of this office show that Pvt. Miles C. Allbright, Co. K, 144th
Infantry, Serial #3063183 is buried in:-

Reburied:-

Grave 316, Section G, Plot 7,

American Cty. #608,

Seringes-et-Mesles, (Aisne).

Original burial No record.

Date of original burial No record.

Date of reburial No record.

Date of death 10/18/18.

By authority of the Quartermaster General:

mail
OCT 6 - 1920

CHARLES C. PIERCE,
Major, U. S. Army,
Chief, Graves Registration Service.
By:

ER.

CHARLES J. WYNNE,
Captain, Q.M.C.,
Graves Registration Service.

TO:- REGISTRATION BRANCH, G.R.S.

Date 10/6/20.

FROM:- INQUIRY BRANCH.

Please furnish information as checked (✓) below regarding the following soldier:

NAME Allbright, Miles E.

Serial Number

RANK Pvt.

ORGANIZATION

Co K, 144th Inf.

NO.	QUESTION	REPLY
1.	Do particulars of soldiers given above agree with Records?	1. Yes, (Ser# 306 3183.)
2.	Date of Death.	2. 10/18/18.
3.	Cause and place of death.	3. Broncho pneumonia.
4.	Number of Casualty Cablegram.	4. #296.
5.	Date buried.	5. no record.
6.	Grave Location. (a) Complete record required (b) Name of Cemetery or Commune only required. (c) Note reinterments.	6. Re: - no date. Grave 316, Sec. "G", Plot 7, Amer. Cty. #608, Seringes-et-Nestes, (Hiscne.)
7.	Who reported burial?	
8.	Confirmed by G.R.S.?	
9.	Report as to Grave Marker.	(10)-a. no rec. (10)-b. " "
10.	Identification Tags: (a) Buried with body? (b) Attached to grave marker?	11. W. M. Allbright, (fath.) Buffalo, Texas.
11.	Complete Emergency Address?	
12.	Has been notified? (Give date)	12. 11/12/18. 8/9/20.
13.	Report the exact position of your inquiry on this case. (Reply in all cases if no information on record)	14. no record.
14.	What is the Photograph No.?	
15.	Inquiry made by? <u>Miles Blyton -1159</u> <u>Ans 10/6/20 80</u> N.B. All Proper names to be typewritten, or printed in PLAIN BLOCK LETTERS.	Released by Information Control Dept. Directory X Cards 5x8 Cards 4x6

EIR

Classification

Adjustment

CEMETERIAL DIVISION
GRAVES REGISTRATION SERVICE
REGISTRATION SECTION

File # 38868

MEMORANDUM:

Date 8-10-20-

To: Registration Files Sub-Section

Subject: Adjustments made on Registration Files

1. Changes as checked have been made in the Registration Files which will necessitate a corresponding change in the Classification Files.

	CORP.	ADD. DATA		CORP.	ADD. DATA
File Number			Date of Burial		
Name			Date of Reburial		
Serial Number			Burial Information	✓	
Rank			Nearest Relative		
Organization			Notified Nearest Relative		✓
Cause of Death			Blue Card thrown out		
Date of Death			White Card set up		
Casualty Cablgram Number					

O.K. Alphabetical Files G.M.C. 8-11-20.

O.K. Organization Files

O.K. State Files

✓ Card kept.
Cemetery Audit Department
Investigation & Adjustment Dept.

2 Cards attached.

By

Mary R. Bills

To The A. G. O.

G.R.S. Form #114-B

JAN 7 - 1926

2226

FULL NAME ALBRIGHT, Miles C. *Champion*

RANK Private SERIAL 3063785

DIVISION & ORGANIZATION *36th Div.* Company K, 144th Infantry

DATE OF DEATH *Oct. 18, '18*

STATE FROM WHICH HE CAME *Texas*

MEDALS OR DECORATIONS AWARDED. *none*

FINAL GRAVE LOCATION *38 - 26 - 22 - B*
Date Grave Row Block

Unburied

608 Cemetery

2 A.G.O.
JAN 7 1926
WORLD WAR DIV.

AUDITED BY
RW. 6/4/24

23/306/ARK

K/M 7/3

Was one identification tag found upon the body? *No.*

What other means of identification were found upon the body? *None.*

Name on cross above grave.

Remarks:

CONFIRMED No. D. *21028*

Supervised by *I.C. Welch*
2nd Lt. Inf.

Zone Commander

7. Disinterment supervised by *E. J. Renouard*
E. J. RENOUEARD. SUP. EMB.

Approved: *R. S. Williams*
(Title) R. S. Williams, 1st Lieut., Q. M. Corps.

8. Reburial supervised by *E. J. Renouard*
JJO.FH E. J. RENOUEARD. SUP. EMB.

Approved: *R. S. Williams*
(Title) R. S. Williams, 1st Lieut., Q. M. Corps.

10-3054

Place.....

Date.....

REPORT OF DISINTERMENT AND REBURIAL

Name: ALLBRIGHT, Miles C.

Number: 3063783.

Rank: Pvt.

Organization: Co.K., 144th Inf.

Disinterment and Reburial made by:

Disinterred (Date) November 27, 1919

From: (Give complete location)

French Cemetery at Vertus. (Mamel) Grave #281. City #1086.

Reburied (Date) November 29th, 1919.

in: (Give complete location)

Section G. Plot #7. Grave #316. Seringes-et-Nesles. American E.F.

Cemetery #608.

Report as to nature of original burial and condition of body upon disinterment: Buried in coffin. Grave five feet deep. Body in advanced stage of decomposition.

Was one identification tag found upon the body? No.

What other means of identification were found upon the body? None.

Name on cross above grave.

Remarks:

CONFIRMED NO. D. 21028

Supervised by I.C. Welch,
2nd Lt. Inf.

Zone Commander

7. Disinterment
supervised by

E. J. RENOARD. SUP. EMB.

Approved: R. S. Williams

(Title) R. S. Williams, 1st Lieut., Q. M. Corps.

8. Reburial
supervised by

E. J. RENOARD. SUP. EMB.

Approved: R. S. Williams

(Title) R. S. Williams, 1st Lieut., Q. M. Corps.

JJO.FH

No. 16

Place

Date

REPORT OF DISINTERMENT AND REBURIAL

Remains of:

Name: ALLBRIGHT, Miles C.

Number: 3063783.

Rank: Pvt.

Organization: Co.K., 144th Inf.

Disinterment and Reburial made by:

Disinterred (Date) November 27, 1919

From: (Give complete location)

French Cemetery at Vertus (Marne) Grave #281. Cty #1086.

Reburied (Date) November 29th, 1919.

in: (Give complete location)

Section G, Plot #7, Grave #316. Seringes-et-Nesles, American E.F.

Cemetery #608.

Report as to nature of original burial and condition of body upon disinterment: Buried in coffin. Grave five feet deep. Body in advanced stage of decomposition.

Was one identification tag found upon the body? No.

What other means of identification were found upon the body? None.

Name on cross above grave.

Remarks:

CONFIRMED No. D

Supervised by J.C. Welch,

2nd Lt. Inf.

Zone Commander

3. Reburied (date):

GIVEN NEW LOCATION FOR PURPOSE OF CONETNATION
Gr 85 Sect B Plot 2

5.21.21

By : Group

RENOUARD

Unit

FIELD SECTION

Nature of reburial

PINE BOX
& BURLAP

4. Report as to nature of original burial and condition of body upon disinterment :

BADLY DECOMPOSED FEATURES UNRECOGNIZABLE

U.S. UNIFORM. BLANKET. BURLAP AND WOODEN BOX

5. (a) Identification tags : Buried with body ? NO On grave marker ? NO

(b) Other means of identification found upon disinterment, and general remarks :

FRENCH REBURIAL PLAQUE NO.107.

6. What does examination of body show as regards the following identifying items ?

(a) Height (actual measurement) IMPOSSIBLE TO DETERMINE

(b) Weight (estimated) IMPOSSIBLE TO DETERMINE

(c) Hair—Color IMPOSSIBLE TO DETERMINE

Quantity IMPOSSIBLE TO DETERMINE

Characteristics IMPOSSIBLE TO DETERMINE

(d) Hair on face—Color IMPOSSIBLE TO DETERMINE

Location IMPOSSIBLE TO DETERMINE

Quantity IMPOSSIBLE TO DETERMINE

(e) Permanent marks on body (old scars, peculiarities, or missing parts)

IMPOSSIBLE TO DETERMINE

(f) Wounds or missing parts (received at time of casualty)

IMPOSSIBLE TO DETERMINE

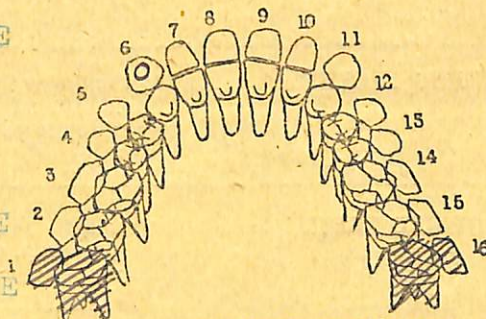
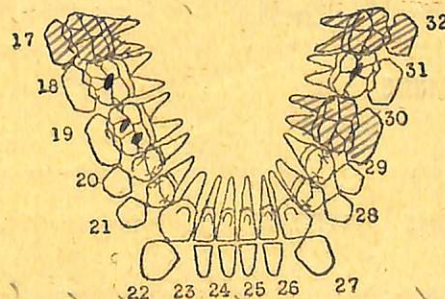


Diagram represents the mouth wide open.



1, 16, 17, 32, 30, e. ext. 6, ca
18, 19, 31, sil. fil.

7. Disinterment
supervised by

E. J. RENOUEAU. SUP. EMB.

Approved :

(Title) S. Williams, 1st Lieut., Q. M. Corps,

8. Reburial
supervised by

E. J. RENOUEAU. SUP. EMB.

Approved :

(Title) S. Williams, 1st Lieut., Q. M. Corps,

JJO.FH

10-30540

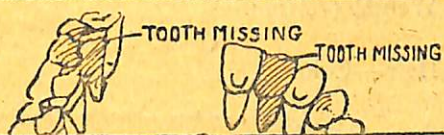
INSTRUCTIONS FOR THE PROPER COMPLETION OF G. R. S. FORM NO. 16-A

Enter information, as noted below, on reverse side of sheet in the *corresponding numbered space*. This form is supplemental to and is to be forwarded with G. R. S. Form 1-a, reporting reburial locations. To be used in answer to Question 26, Form 114, in case no means of identification on body.

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.
2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.
3. Give date and accurate information as to location of reburial and the group and unit which made reburial, and how reburial was made—in casket, wooden box, etc.
4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried—in a casket, box, burlap, etc. This statement should be as complete as possible.
5. (a) State whether identification tags were found buried with body and on grave marker by reporting "Yes" or "No".
(b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying the body, other than that tabulated under Item No. 6.

6. Give all information as to body description and dental chart as nearly correctly as the condition of the body will allow. Items (e) and (f) under the body description are very important and should be very complete. The dental chart is also very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspid (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

MISSING TEETH.....All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus:



CROWNED TEETH.....Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus:



BRIDGE WORK.....Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:



FILLINGS.....Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus:



CARIES (CAVITIES).....Outline location and size of cavity, shade in thus:



DENTURES (PLATES).....Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

7. Show name of person supervising the disinterment and the name and title of the person approving same.

8. Show name of person supervising the reburial and the name and title of the person approving same.

