

G.R.S. Form #114-B CAUSE OF DEATH

*Pneumonia*

✓ FULL NAME..... *OK* Allen, Louis

✓ RANK..... *OK* Private *OK* ✓ SERIAL..... 1801346

✓ DIVISION & ORGANIZATION..... *OK* Headquarters Co. 371st Infantry *93 Div.*

✓ DATE OF DEATH..... *OK* 10/9/18

✓ STATE FROM WHICH HE CAME..... *Tenn.*

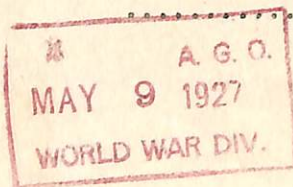
EDALS OR DECORATIONS AWARDED..... *none*

FINAL GRAVE LOCATION..... 12/7/22 64 5 B  
Date Grave Row Block

1764

Cemetery

24/292/EYS



✓

*22-5-132*

1570

## CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME <i>Allen</i>	<i>ALL</i>	3	<i>0 0</i> <i>1 2 2</i>
<i>Louis</i>	CEMETERY <i>1764</i>	1	<i>4</i>
BURIED	GRAVE <i>64</i>	2	<i>64</i>
	ROW <i>5</i>	2	<i>05</i>
	BLOCK <i>B</i>	1	<i>2</i>
STATE	<i>Tenn</i>	2	<i>48</i>
RANK	<i>Pvt</i>	1	<i>2</i>
DIVISION	<i>93</i>	2	<i>93</i>
ORGANIZATION	<i>371</i>	3	<i>371</i>
ARM	<i>Inf</i>	1	<i>1</i>
MARITAL	<i>Remarried</i>	1	<i>3</i>
NAME <i>Lewis, Mathie</i>	<i>(R-W)</i>	3	
<i>7258 Wellington</i>	STATE	2	
<i>apt. #7</i>	COUNTY	2	
<i>Memphis, Tenn.</i>	CITY	3	
RELATION	<i>Mother</i>	1	<i>1</i>
OTHER		1	
ELIGIBILITY	<i>Dead</i>	1	<i>6</i>
NATIVITY		1	
RACE	<i>BLACK</i>	1	<i>2</i>
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
. TRIP	YR.	1	
ACCEPTANCE 29/514/		1	

*audited*  
FEB 4 1932  
*W.D.*

Allen Louis

AM

X

vd

Pvt Hq Co 371st Inf

1801346

MOTHER

died before 1918

102872

WIDOW

rem. 9-1-20 -

Mattie Lewis

LOCO ~~no~~

725 S Wellington  
apt #7.

SM

died - 3 - 28 - 29

father died 10-21-20

Murphy's  
Linn

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-M

Allen, Louis (AM) Mx

October 2, 1931.

Mrs. Clara Allen,  
2933 Morgan Ave.,  
St. Louis, Missouri

Dear Madam:

Reference is made to previous correspondence relative to the pilgrimage to the cemeteries of Europe, authorized by the Act of Congress of March 2, 1929, as amended May 15, 1930. To date information has not been received as to whether or not you desire to make a pilgrimage during the summer months of 1932, in honor of the deceased veteran named above.

In order that the records may be complete, and arrangements made accordingly, it is requested you complete the form below by writing in the space provided, your answers to the questions listed, sign your name, and return this letter in the enclosed envelope which requires no postage.

1. Do you desire to make a pilgrimage in 1932?	
2. Please state your age and condition of health:	Age: Health:
3. Do you speak English?	
4. What other language do you speak?	

Sign here

For The Quartermaster General,

Very truly yours,

Encl:  
Env.

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



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM-293-AM

Allen, Louis Pvt (AM) M x

July 1, 1931

Mrs. Clara Allen,  
2938 Morgan Ave.,  
St. Louis, Mo.

Dear Madam:

Arrangements are now being made for conducting pilgrimages during the year 1932 to the cemeteries in Europe under the provisions of the Act of Congress of March 2, 1929, as amended.

To assure proper and satisfactory accommodations, reservations for steamship transportation required during the summer of 1932 must be made by this office not later than August 1st of this year. It is therefore desired that you answer the question below by writing either of the words "Yes", "No", or "Undecided" in the blank space following the question.

As soon as you have answered the question, please sign your name and return this sheet in the enclosed addressed envelope which requires no postage. Do not delay, as a prompt reply is essential.

This letter is being sent to all eligible mothers and widows who did not make a pilgrimage at the expense of the Government during 1930 and are not making the journey in 1931.

For The Quartermaster General,

Very truly yours,

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

DO YOU DESIRE TO MAKE A PILGRIMAGE DURING THE YEAR 1932?

Write answer here

Sign here



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 295 A-C

Allen, Louis Pvt. (AM) M x

May 5, 1931.

Mrs. Clara Allen,  
2933 Morgan Ave.,  
St. Louis, Mo.

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.

The records of this office show that you are the mother of the deceased veteran named above and in order that plans may be completed for conducting the pilgrimages, it is requested you answer the following questions by filling out the blanks left therefor and return the letter to this office in the enclosed envelope which requires no postage.

1. Do you desire to make this pilgrimage?

2. Do you desire to make the pilgrimage in the calendar year 1931?

3. Please give your age and state your health.

4. Do you speak English?

5. What other language do you speak?

Age

Condition of Health

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-AM  
Allen, Louis Pvt (AM) M x

July 1, 1931

Mrs. Clara Allen,  
2938 Morgan Ave.,  
St. Louis, Mo.

Dear Madam:

Arrangements are now being made for conducting pilgrimages during the year 1932 to the cemeteries in Europe under the provisions of the Act of Congress of March 2, 1929, as amended.

To assure proper and satisfactory accommodations, reservations for steamship transportation required during the summer of 1932 must be made by this office not later than August 1st of this year. It is therefore desired that you answer the question below by writing either of the words "Yes", "No", or "Undecided" in the blank space following the question.

As soon as you have answered the question, please sign your name and return this sheet in the enclosed addressed envelope which requires no postage. Do not delay, as a prompt reply is essential.

This letter is being sent to all eligible mothers and widows who did not make a pilgrimage at the expense of the Government during 1930 and are not making the journey in 1931.

For The Quartermaster General,

Very truly yours,

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

DO YOU DESIRE TO MAKE A PILGRIMAGE DURING THE YEAR 1932? \_\_\_\_\_

Write answer here

Sign here



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Allen, Louis Pvt. (AM) M x

May 5, 1931.

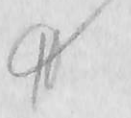
Mrs. Clara Allen,  
2933 Morgan Ave.,  
St. Louis, Mo.

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.

The records of this office show that you are the <sup>mother</sup> of the deceased veteran named above and in order that plans may be completed for conducting the pilgrimages, it is requested you answer the following questions by filling out the blanks left therefor and return the letter to this office in the enclosed envelope which requires no postage.

1. Do you desire to make this pilgrimage?	
2. Do you desire to make the pilgrimage in the calendar year 1931?	
3. Please give your age and state your health.	Age Condition of Health
4. Do you speak English?	
5. What other language do you speak?	

 For The Quartermaster General,

Very truly yours,

Enclosures:  
Envelope  
Act  
Amendment

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



QM 293 A-M  
Allen, Louis Pvt. (AM) M x

May 5, 1931.

Mrs. Clara Allen,  
2933 Morgan Ave.,  
St. Louis, Mo.

Dear Madam:

In order that your desires may be properly recorded and arrangements made for you accordingly, it is requested that you complete and return the enclosed questionnaire at your earliest convenience.

Kindly advise as to whether or not the late Private Louis Allen was married and is survived by a widow, 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,  
Captain, Q. M. Corps,  
Assistant.

Encl:  
Ques.  
Act - Amend.  
Env.  
MB

1931 MAY 11 11:22 AM

QM 293 A-M

October 21, 1930

Allen, Louis Pvt 1784 M

Mrs. Clara Allen  
2933 Morgan Avenue  
St. Louis, Missouri

Dear Madam:

A reply has not been received to office letter of recent date relative to the pilgrimage to the cemeteries of Europe, authorized by the Act of Congress of March 2, 1929, as amended May 15, 1930.

The records of this office show that you are the <sup>mother</sup> of the deceased veteran named above and in order that plans may be completed for conducting the pilgrimages in 1931, it is requested you answer the following questions by filling out the blanks left therefor and return the letter to this office in the enclosed envelope which requires no postage.

1. Do you desire to make this pilgrimage?	
2. Do you desire to make the pilgrimage in the calendar year 1931?	
3. Please give your age and state your health.	Age Condition of health
4. Do you speak English?	
5. What other language do you speak?	

For The Quartermaster General:

Very truly yours,

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

Encls:  
Act  
Amendment  
Envelope

30/150

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C  
Allen, Louis 1764-H

June 19, 1930

Mrs. Clara Allen,  
2932 Morgan Ave.,  
St. Louis, Missouri

Dear Madam:

Arrangements are now being made for conducting pilgrimages during the year 1931, to the cemeteries in Europe under the provisions of the Act of Congress of March 2, 1929.

To assure proper and satisfactory accommodations, reservations for steamship transportation required during the summer of 1931 must be made by this office not later than August 1st of this year. It is therefore desired that you answer the question below by writing the word "Yes" or "No" in the blank space following the question.

As soon as you have answered the question, please sign your name and return this sheet in the enclosed addressed envelope, which requires no postage. Do not delay, as a prompt reply is essential.

This letter is being sent to all mothers and widows who are not making the pilgrimage in 1930, regardless of whether or not they have expressed a desire to make the pilgrimage.

For The Quartermaster General,

Very truly yours,

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

DO YOU DESIRE TO MAKE THE PILGRIMAGE DURING THE YEAR 1931? \_\_\_\_\_  
(Write answer here)

\_\_\_\_\_  
(Sign here)

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

February 8, 1930

IN REPLY REFER TO QM 293 A-C

Allen, Louis 1764

Mrs. Clara Allen,  
2933 Morgan Ave.,  
St. Louis, Mo.

Dear Madam:

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 mother of the late Pvt. Louis Allen, Hq. Co., 371st Inf., whose remains are now interred in the Aisne-Marne American Cemetery, Belleau, 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.

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

Allen, Louis  
1764

Aug. 21, 1929.

Mrs. Clara Allen,  
2938 Morgan Ave.,  
St. Louis, Mo.

Dear Madam:

The records of this office do not indicate that a reply has been received to our communication dated June 11, 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

June 11, 1929.

**Allen, Louis**

**Mrs Clara Allen,  
2933 Morgan Ave.,  
St. Louis, Mo.**

Dear Madam:

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 mother of the late **Private Louis Allen, Hdq. Co., 371st Inf., whose remains are now interred in the Aisne-Marne American Cemetery, Belleau, Aisne, France.**

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

In the event your son was survived by a widow who has since remarried it is requested that a statement to that effect be made.

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

For The Quartermaster General,

Very truly yours,

2 incls.  
Act of Congress.  
Envelope.

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

DISPATCHED  
JUN 12 AM 10  
O.D.M. & R.D.V.

Place \_\_\_\_\_

Date \_\_\_\_\_

REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name: ALLEN, LOUIS

Number: 1801346

Rank: Pvt.

Organization: Hq. Co. 371st Inf.

Disinterment and Reburial made by Group \_\_\_\_\_

Unit \_\_\_\_\_

Disinterred (Date) Oct. 7, 1919. From: (Give complete location)

Military cemetery at Ecury sur Coole Grave No. 116 (41)

Reburied (Date) Oct. 6, 1919. in: (Give complete location)

Grave No. 185. Section V. Plot 4. Belleau No. ~~575~~ # 1764

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

Hospital burial in French cemetery.

Was one identification tag found upon the body? No.

What other means of identification were found on the body?

American cross on grave.

Note:

If upon disinterment, effects are found upon bodies, they will be promptly sent to the Effects Depot direct, as is required by G. O. 170, G.H. 2, 1918., after being carefully examined for clues to identity in doubtful cases, notation whereof will be made and reported to Chief, G.R.S.

Supervised by: F.M. van Natter

Captain, Inf.

C.O. Group \_\_\_\_\_

Unit \_\_\_\_\_

CONFIDENTIAL No. 10-10-10

20047

20047  
4/15/21



Place BELLEAU (AISNE) CTY 1764

## REPORT OF DISINTERMENT AND REBURIAL

Date 6.8.211. REMAINS OF ALLEN, LOUIS SERIAL NUMBER 1801346.RANK PVT. ORGANIZATION HQ. CO. 371st. INF.

2. Disinterred (date) :

From (give complete location) :

6.8.21GR. 185 SEC. V. PT. 4.By : Group RENOUARD. 7Unit FIELD SECTION 17

3. Reburied (date) :

In (give complete location) :

6.8.21GR. 185 SEC. V. PT. 4.By : Group Renouard.Unit FIELD SECTION 17Nature of reburial WOODEN BOX & BURLAP

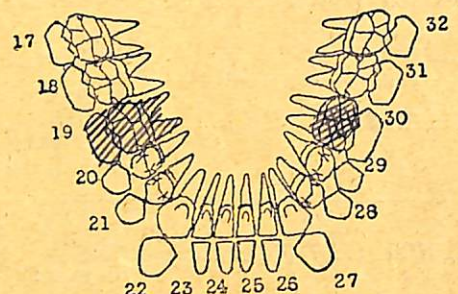
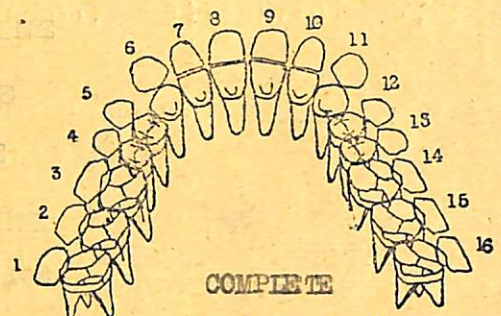
4. Report as to nature of original burial and condition of body upon disinterment :

BADLY DECOMPOSEDFEATURES UNRECOGNIZABLESheet, 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 :

NONE

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 DETERMINEQuantity IMPOSSIBLE TO DETERMINECharacteristics IMPOSSIBLE TO DETERMINE(d) Hair on face—Color IMPOSSIBLE TO DETERMINELocation IMPOSSIBLE TO DETERMINEQuantity 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) 19 e.ext. 30 dec.7. Disinterment supervised by E.J. Renouard  
E.J. RENOUARD SUP. EMB.Approved : R. Williams  
(Title) R. S. Williams, 1st Lieut., G. M. Corps8. Reburial supervised by E.J. Renouard  
E.J. RENOUARD SUP. EMB.Approved : R. Williams  
(Title) R. S. Williams, 1st Lieut., G. M. Corps






D-51085



## 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), 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.

<b>MISSING TEETH</b> ..... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus :	
<b>CROWNED TEETH</b> ..... Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus :	
<b>BRIDGE WORK</b> ..... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :	
<b>FILLINGS</b> ..... Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus :	
<b>CARIES (CAVITIES)</b> ..... Outline location and size of cavity, shade in thus :	
<b>DENTURES (PLATES)</b> ..... 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.





WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

QM 293 A-C.

IN REPLY REFER TO

ALLEN, Louis - Pvt.

June 26, 1926

Mr. Bob Allen,  
594 Chapin Place,  
Memphis, Tenn.

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 overseas military cemetery is to be maintained by the United States for all time. The graves will be permanently marked by white headstones inscribed with the name, rank, division, organization, date of soldier's death and State from which he came. Headstones will be placed at all graves, as soon as possible, and without necessity 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 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,



F.H. POPE,  
Colonel, Q.M.G.,  
Assistant.

1 Incl.  
Record card.

25/560/EYS

29  
a  
Allen  
June

● Soldier's ★ Overseas ●  
Grave

Name \_\_\_\_\_ Louis Allen \_\_\_\_\_

Rank \_\_\_\_\_ Private \_\_\_\_\_

Organization \_\_\_\_\_ Headquarters Company, 371st Infantry \_\_\_\_\_

Grave No. \_\_\_\_\_ 64 \_\_\_\_\_ Row \_\_\_\_\_ 5 \_\_\_\_\_ Block \_\_\_\_\_ B \_\_\_\_\_

Cemetery \_\_\_\_\_ Aisne-Marne American \_\_\_\_\_

Location \_\_\_\_\_ Belleau, Aisne, France \_\_\_\_\_

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON, D. C.

OFFICIAL BUSINESS

PENALTY FOR PRIVATE USE TO AVOID

PAYMENT OF POSTAGE IS \$3.00

LET'S GO!  
CITIZENS  
MILITARY  
TRAINING  
- CAMPS -



*6/28/26. 23*  
Mr. Bob Allen,

594 Chapin Place,

Memphis,

Tenn.

DIRECTORY SEARCHER # 5

CHECKED  
UNCLAIMED \_\_\_\_\_ UNKNOWN \_\_\_\_\_  
DECEASED \_\_\_\_\_  
MOVED LEFT NO ADDRESS \_\_\_\_\_ RETURN \_\_\_\_\_



CLAIM 102872

ALLEN, Louis 1801346  
Pvt. Hdq. Co. 371st Inf.

FATHER DECEASED.

Bob  
Clara 2933 Morgan, Ar.  
St. Louis, Mo

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

QM 293 A-C

ALLEN, Louis - Pvt.

June 26, 1926

Mr. Bob Allen,  
594 Chapin Place,  
Memphis, Tenn.

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 overseas military cemetery is to be maintained by the United States for all time. The graves will be permanently marked by white headstones inscribed with the name, rank, division, organization, date of soldier's death and State from which he came. Headstones will be placed at all graves, as soon as possible, and without necessity 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 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,

F.H. POPE,  
Colonel, Q.M.C.,  
Assistant.

1 Incl.  
Record card.

RD



25/560/EYS

*WPR  
ccv*



# COMPILATION OF DISPOSITION OF REMAINS DATA

File #43456

## I. LOCATION INDEX CARD:

(a) Name ALLEN, Louis Ser. No. 1801346  
 (b) Rank Private. Organization Hdq. Co. 371st Inf. TYP. EK  
 (c) Date of death 10/9/1918 (d) Cause of death Pneumonia. CKR. JA

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

(a) Grave No. 185 Row -- Plot 4 Sec. V TYP. EK  
 (b) Emerg. Address Bob Allen (father) 424 St. Paul St. Memphis, Tenn. OK 3/10/21

## III. Files of soldiers dying from contagious diseases --- CKR. JA

## IV. A. G. O. DISPOSITION CARD:

Date of receipt no card in file

(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 Imm Date 2-19-21, 1920.

## V. A. G. O. CORRESPONDENCE shows communication from \_\_\_\_\_

\_\_\_\_\_, dated \_\_\_\_\_

confirming request in Par. IV., item \_\_\_\_\_, above, or requesting that \_\_\_\_\_

no correspondence

Examiner's Initials Imm Date 2-19-21, 1920.

## VI. G. R. S. FILES, CORRESPONDENCE—shows as follows: \_\_\_\_\_

no request for disposition

(a) Cancellation memos referred to? yes - Imm

Examiner's Initials Imm Date 2-19-21, 1920.

COUNTRY France CEMETERY No. 1764 SHEET No. 30



RECEIVED.

VII. G. R. S. Form No. 114 made \_\_\_\_\_, 1920.

APR 2 1921

Typed by \_\_\_\_\_, Checked by \_\_\_\_\_, 1920.

VIII. FINAL ACTION:

CLERICAL DIVISION  
OVERSEAS PROJECT SUB-SEC.

Following advice forwarded to Europe by { cable on \_\_\_\_\_, 1920  
letter on \_\_\_\_\_, 1920

MAR 10 1921

Par. # 2 Not To Be Returned

new

IX.

CORRECTIONS

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

X. SUSPENSION REMARKS:

B. A. N. R. Mr. Bob Allen (Gatherer)  
594 Chapin Place, Memphis, Tenn.  
3-16-21  
E.M.



# COMPILATION OF DISPOSITION OF REMAINS DATA

File #43456

## I. LOCATION INDEX CARD:

(a) Name Allen, Louis Ser. No. 1801346  
 (b) Rank Private Organization Hdq. Co. 371st Inf. } TYPE EK  
 (c) Date of death 10/9/1918 (d) Cause of death pneumonia } 3/1

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

(a) Grave No. 185 Row -- Plot 4 Sec. V TYP. EK  
 (b) Emerg. Address Bob Allen(father) 424 St. Paul St. Memphis, Tenn. OK 3/10/21

III. Files of soldiers dying from contagious diseases --- CKR. 3/1

## IV. Information on which advice to Europe in letter of transmittal was based:

G. G. O. - No card in file.  
G. R. S. - No request for disposition.  
APR 3/17/21

V. Following advice forwarded to Europe by { cable on ---, 192  
 letter of transmittal on MAR 10 1921, 192

Par. # 2 Not To Be Returned

VI. Form 115 forwarded to G. R. S., Hoboken, N. J., MAR 22 1921, 192

## VII. SUPPLEMENTARY REQUESTS.

Date of and source.	Relationship and name.	Desires.	Action taken.

VIII. Form 115 received from G. R. S., Hoboken, N. J., APR 28 1921, 192

COUNTRY \_\_\_\_\_ CEMETERY No. \_\_\_\_\_ SHEET No. \_\_\_\_\_



To be prepared in triplicate.

DATE November 23, 1922.

## REPORT OF DISINTERMENT, PREPARATION, SHIPMENT AND REBURIAL OF BODY

nem

## DISINTERMENT

## COMPARATIVE REPORT

Records of G.R.S. Headquarters.

Discrepancy found upon exhumation of body

1. Name ALLEN Louis

10. Name

2. No. 1801346

11. No.

3. Rank Pvt.

12. Rank

4. Org. Hqrs.Co. 371st Inf.

13. Org.

5. D.D. 10-9-18

14. (a) D.D.

6. C.D. Pneumonia(b) D.B. no discrepancy

Discrepancy found upon disinterment

7. Grave No. 185 Sec. V

15. Grave No. Sec.

8. Plot 4 Row

16. Plot Row

9.

17. no discrepancy18. Cemetery Aisne-Marne Amer.19. Commune or town Belleau20. Dept. or County Aisne.21. Country France

22. G.R.S. Hdqrs. Code No.

1764

23. Disinterred (Date) Nov. 23, 1922.By C.P. Keating

24. Inscription on grave marker:

Name Louis AllenSerial No. -Rank Pvt.Organization Hq. Co. 371 Inf.25. Was identification disc found on grave marker? No On body? NoSignature W.D. Wall Jr. Junior Technical Assistant

W.D. Wall Jr.

## 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).

Bottle record agrees.27. Condition of body Badly decomposed. Features unrecognizable.28. Nature of burial Wooden box and burlap29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? none30. Body prepared and placed in casket: Date Nov. 23, 1922. By C.P. Keating31. Casket sealed by C.P. Keating

Signature of Embalmer, (Supervisor)

C.P. KEATING

9/23/27



SHIPMENT. (Show actual marking of box.) Box No. C-31126

32. Designation of body:

Name Louis ALLEN. Serial No. 1801346

Rank Pvt. Organization Hqrs.Co. 371st Inf.

33. Consigned to:

Name of Permanent Cemetery Aisne-Marne Amer.Cty.1764, Belleau, Aisne.

34. Casket boxed and marked (Date) Nov. 23, 1922. By C.P. Keating

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

A.E. DEWEY, 1st Lt. MC.

36. Remarks

none

37. Shipped from point of Operation: (Date) Nov. 23, 1922.

To point of Concentration

(Name)

Convoyer 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 Aisne-Marne Amer. Cem.1764, Belleau (Aisne)

(Name)

Convoyer Signature Shipping Officer

A.E. DEWEY, 1st Lt. MC.

40. Received: Date

G.R.S. Representative

41. Reinterred Dec. 7, 1922. Aisne-Marne Amer. Cem.1764, Belleau (Aisne)  
(Date)

42. Grave No. 64 Section

43. Plot BLOCK 19 B Row 5

G.R.S. Representative

W.D. CLEARY  
W.D. CLEARY, Lt. Chaplain USA



## REPORT OF DISINTERMENT AND REBURIAL

Place Belleau (Aisne)Date Nov. 23, 1922.1. REMAINS OF ALLEN, LouisSERIAL NUMBER 1801346RANK Pvt.

ORGANIZATION

Hq. Co. 371st Inf.

2. Disinterred (date):

From (give complete location):

Nov. 23, 1922.Grave 185, Sec. V, Plot 4, Cem. 1764.

By: Group

1

Unit

F.S.I., Aisne-Marne Cem.

3. Reburied (date):

In (give complete location):

Dec. 7, 1922.Grave 64, Row 5, Block B, Aisne-Marne Cem. 1764,

By: Group

re-burial group

Unit

Nature of Reburial lined casket

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

Wooden box and burlapBadly decomposed. Features unrecognizable.

5. (a) Identification tags: Buried with body?

No

On grave marker?

No

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

Bottle record agrees.

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

(a) Height (actual measurement) Impossible to determine

(b) Weight (estimated)

"

(c) Hair—Color

"

Quantity

"

Characteristics

"

(d) Hair on face—Color

"

Location

"

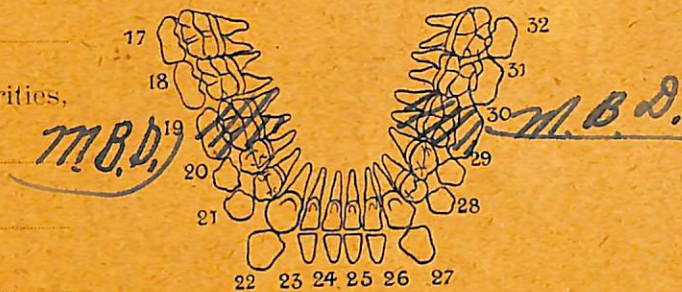
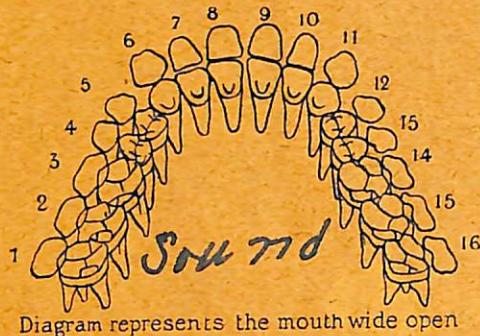
Quantity

"

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

"

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

None visible.W.D. Wall Jr. Checker

7. Disinterment supervised by

C.P. KEATING, S.E.

Approved:

A.E. DEWEY, 1st Lt. MC.

(Title)

8. Reburial supervised by

L.D. HAYS

Approved:

W.D. CLEARY, Lt. Chaplain USA

(Title)



## 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), 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.



*Copy*

OFFICE OF THE QUARTERMASTER GENERAL  
CEMETERIAL DIVISION  
OVERSEAS PROJECT SUB-SECTION

C.W. Harlow

NAME OF DECEASED SOLDIER

CEMETERY NO.

DATE

ALLEN, Louis

Pvt.

1764:30

2-19-21

SERIAL NUMBER

ORGANIZATION

1801346

Hdq. Co. 371st Inf.

D/D: 10-9-18

WAR RISK INSURANCE INFORMATION

NOTED FORM 115

DATE *3/16/51 E.M.*

DATE *3/12/51*

*Adjustment Made  
5-19-1922*

NAME OF BENEFICIARY

RELATIONSHIP

*Mr. Bob Allen*

*Widow*

Address

*594 Chapin Place, Memphis, Tenn*

S/708/LML

*File No.*



OFFICE OF THE QUARTERMASTER GENERAL  
CENTRAL DIVISION  
OVERSEAS PROTECT SUB-SECTION

C.W. Harlow

NAME OF DECEASED SOLDIER

CEMETERY NO.

DATE

C-102872

ALLEN, Louis

Pvt.

SERIAL NUMBER

ORGANIZATION

1764:30

2-19-21

1801346

Hdq. Co. 371st Inf.

D/D: 10-9-18

WAR RISK INSURANCE INFORMATION

Copy forwarded to

Adjustment Department

Date 3-16-21 E.M.

NAME OF BENEFICIARY

RELATIONSHIP

Mr. Bob Allen,

Father

Address

594 Chapin Place, Memphis, Tenn.  
S/709/LIT



WAR DEPARTMENT  
Office of the Quartermaster General of the Army  
Washington

G.R.S. Form 8-W-A-0

Information requested of A.G.O.

Date 2/21/21.

File No.

Registration

From: The Quartermaster General, U. S. Army, (Cemeterial Division)

To: The Adjutant General of the Army, 6th & B Sts., N.W., Washington, D.C.

Subject: Information required for G.R.S.

1. It is requested that the items checked below be completed, Request confirmation of all information shown.

a. Surname Allen *OK*

f. Date of death 10/9/18. *OK*

b. Christian name Louis *OK*

g. Cause of death Pneumonia. *OK*

c. Serial Number 1801346 *OK*

h. Authority (C.O.#) 304

d. Organization Hq. Co., 371st Inf. *OK*

i. Emergency address *Bob Allen,  
424 St. Paul Ave. Memphis, Tenn.*

e. Rank Pvt. *OK*

j. Relationship *Father*

BODY DESCRIPTION

(See page #2 of the Service Record)

a. Age of enlistment

b. Color of eyes

c. Color of hair

d. Height

e. Weight

f. Permanent marks and physical defects at enlistment (Old fractures or breaks)

DENTAL CHARTS

(See Physical report of examination prior to enlistment)

a. Strike out teeth missing

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8  
upper right upper left

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8  
lower right lower left

*Donnelly Enl. Pers. Sec.  
LVR Mings 2-24-21*

C.W.

CEMETERY NO: 1764

SHEET NO: 30

TYPED BY: L.W.

*none*  
S/713/LML

H. L. ROGERS,  
Quartermaster General, U.S.A.

BY:

*H. J. CONNER*  
H. J. CONNER,  
1st. Lieut, O.M.C.

Rec'd S & S Div, A.G.O.

FEB 23 1921 6



43456

FILE  
Oct. 19, 1919.

Allen #1801346 Louis Pvt.

Hq. Co. 371st Inf.

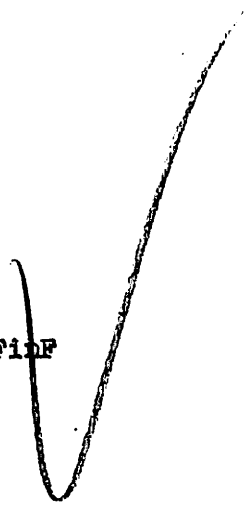
Moved from Cemetery #320. To

Grave #185, Section "V", Plot #4,

American Cty ~~#579~~, #1764

Belleau, (Aisne)

Letter from G.R.S., AFIP



F-4

FILE