

293

24

1019

MT

DATE 11/2/21

1. NAME ALLIN, Elijah F

SERIAL No. 1496812

RANK Pvt

ORGANIZATION Co A 144th Inf.

GRAVE LOCATION Meuse-Argonne Amer. Cty. Romagne-s-Montfaucon 1232 Sec. 53

CTY. NAME

NUMBER

30 Sec. 53

1

GRAVE

ROW

PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION

Isolated 1

Givry

Ardennes

GRAVE

COMMUNE

DEPT.

COORDINATES No record

CONCENTRATED TO 5/10/19

30

53

1

DATE

GRAVE

ROW

PLOT

Meuse Argonne 1232

CEMETERY

CTY. NUMBER

Data concerning any identification found on remains when concentrated, such as collar insignias, letters, broken bones, missing parts, etc.

Tag on body

data f-1/pfb

DATE OF DEATH October 13, 1918

STATE FROM WHICH HE CAME Texas

MEDALS OR DECORATIONS AWARDED None

SUBSEQUENT REBURIALS

DATE

GRAVE

ROW

PLOT

CEMETERY

DATE

GRAVE

ROW

PLOT

CEMETERY

SIGNATURE, AREA SUPERVISOR

M. B. BIRDSEYE
1st Lt., Q.M. Corps, U.S. Army

3. FINAL GRAVE LOCATION 11/2/21

19

26

DATE

GRAVE

ROW

Block Plot

Meuse Argonne American Cty # 1232. Romagne sous Montfaucon

Rec'd World War Div.

CEMETERY

Rec'd World War Div.

5 MAR 30 1928

MAR 14 1928

AUDITED BY
Row. 4-14-23

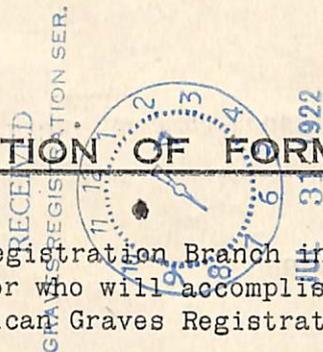
Robert C. ...
Major General
The Adjutant General
By W.C.

18 1925

US 3/31/25

Verified 3/27/25, J.C.

INSTRUCTIONS FOR PREPARATION OF FORM 114 B



1. Forms 114-B are to be prepared by Registration Branch in quadruplicate, three copies to be forwarded to Area Supervisor who will accomplish paragraph 2 and return all three copies to Headquarters, American Graves Registration Service.
2. Paragraphs 1 and 3 will be accomplished by Registration Branch, Headquarters, American Graves Registration Service, Q.M.C., in Europe.
3. Paragraph 2 will be accomplished by Area Supervisor from data on file in his office.
4. If data is entered on Form 114-B from Form 1, Form I6, Form 1-A or Form 16-A, statement to this effect will be made on Form 114-B STATING WHICH G.R.S. form data is taken from. If data concerning co-ordinates is approximate and NOT accurate, statement to this effect will be made on these forms.

Co. A. 144th Inf.
36th Division.

ALLIN, Elijah F. - Pvt. 1496812
Home: Brady, Texas.

Statement from Capt. Grover C. McGown, Commanding Co. A. 144th Inf.

"Pvt. Elijah F. Allin was last seen by me about 3.00 P.M. on the afternoon of Oct. 13th, 1918. He was at that time with the company in a woods about 2 kilometers south of Givry, France. On the morning of Oct. 14th, 1918 he could not be found, and after investigation he was found dead. Killed by a high explosive shell. No eye witness. Death was instantaneous.

Place of Burial not known.

Informant: McGown, Grover C. - Capt.
Co. A. 144th Inf.
Home: Ft. Worth Texas, 924-5th, Ave.

Searcher: (same as above)
Feb. 15/1919.

Emergency address:
W.S. Allin,
Brady, Texas.
G.P.

✓

CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	Allin	3	1 2 2
BURIED	Elijah	1	1
	CEMETERY 1232	2	19
	GRAVE 19	2	26
	ROW 26	1	1
	BLOCK A	2	49
STATE	Tex	1	2
RANK	Pvt.	2	36
DIVISION	36	3	114
ORGANIZATION	114	1	1
ARM	Inf	1	2
MARTIAL	No	1	
NAME	Allin	3	
RESIDENCE	STATE	2	
	COUNTY	2	
	CITY	3	
RELATION	mother	1	1
OTHER		1	
ELIGIBILITY	Head	1	6
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF TRIP	MO.	1	
	YR.	1	
ACCEPTANCE		1	
29/514/PJ.			

AUDITED

MAR 29 1932
RS

APP

PM

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-M
Allin, Elijah F. Pvt. (M-A) M

June 9, 1931.

Mrs. W. S. Allin,
Brady, Texas

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
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

June 7, 1930.

IN REPLY REFER TO QM 293 A-C

Allin, Elijah F. -1232 M

Mrs. W. S. Allin,
Brady, Texas.

2 Dec 10

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



DO YOU DESIRE TO MAKE THE PILGRIMAGE DURING THE YEAR 1931? Yes ✓

(Write answer here)

Lorenda Allin

(Sign here)

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

October 7, 1929.

Allin, Elijah F 1232 -M

Mrs. W. S. Allin,
Brady, Texas.

Recd

Dear Madam:

The Act of Congress which provides for pilgrimages to cemeteries in Europe by mothers and widows of members of the military or naval forces of the United States who died in the military or naval service at any time between April 5, 1917 and July 1, 1921, and whose remains are now interred in such cemeteries, all necessary expenses of which pilgrimages are to be paid by the United States Government, requires that the Secretary of War make an investigation and submit the results of such investigation in a report to Congress not later than December 15, 1929. The purpose of the investigation is to determine the total number of mothers and widows entitled to make the pilgrimages, the number of such mothers and widows who desire to make the pilgrimages, the number who desire to make the pilgrimages during the calendar year 1930 and the probable cost of the pilgrimages to be made.

In order that the report referred to may be made and plans completed for conducting the pilgrimages, it is requested that you answer the following questions by filling out the blanks left therefor and return the letter to this office by return mail in the enclosed envelope which requires no postage.

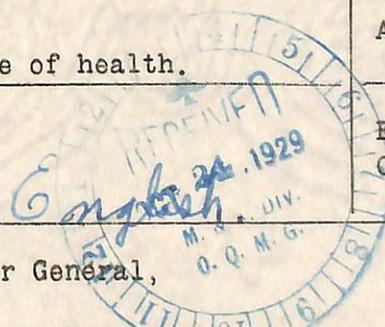
1. Do you desire to make this pilgrimage if eligible?	(Yes)	(No)
2. Do you desire to make the pilgrimage in the calendar year 1930?	(Yes)	(No)
3. Have you at any time made a previous visit to the grave of the deceased member of the military or naval forces in whom you are interested?	(Yes)	(No)
4. Please give your age and state of health.	Age <u>72</u> Health <u>Very</u> (Years) (Good) (Poor)	
5. What language do you speak?	English - (Yes) (No) Other language <u>No.</u> (Specify language spoken)	

For The Quartermaster General,

Very truly yours,

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

Encl.
Act
Envelope



Brady Tex.

July 8 - 1929.

War Dept. Washington

In Reply, will state that
private ~~Eliza~~ Elijah F. Allin.
was a single man. Had never
been married.

and I, ~~am~~ his mother am
not able to make a trip to
France. am past 70, year
old. and not able to travel
a great distance.

Thanking you. I remain
Mrs. W. S. Allin.

written by her daughter.

Mrs. Lula McKay.

Brady Tex.

Brady Tex.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Allin, Elijah F.

June 27, 1929.

Mrs. W. S. Allen,
Brady, Texas.

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 Elijah F. Allin, Co. A., 144th Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, 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
JOHN T. HARRIS,
Major, Q. M. Corps,
Assistant.

In reply refer to:
QM - 293 C-R

August 7, 1923.

Mrs. W.S. Allen,
Brady,
Texas.

Dear Madam:

The Quartermaster General desires that you be informed that the permanent grave of Private Elijah F. Allin, Company A, 144th Infantry, is Grave 19, Row 26, Block A, Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon (Meuse), France.

This is one of the permanent American military cemeteries to be maintained by this Government in Europe. Each grave will be marked by headstone of white marble, of suitable design, with name, rank, division, organization, date of soldier's death and State from which he came. The 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.

In effecting removal, the utmost care and reverence were exacted and more than willingly accorded by those performing this sacred duty. The grave of the deceased will be perpetually maintained by this Government in a manner befitting the last resting place of our heroes.

Very truly yours,

H. J. Conner,
Assistant.



RD

Allin

Elijah F

1,496,812 ✓

(Surname)

(Christian name in full.)

(Army serial number.)

Pvt.

Co. G, 144th Inf.

(Rank and organization.)

State your relationship to the deceased

Father

Do you desire the remains brought to the United States?

no

(Yes or no.)

If remains are brought to the United States, do you wish them interred in a national cemetery?

yes

(Yes or no.)

If you desire the remains interred at the home of the deceased, give full information below as to where they should be sent:

(Name of person to receive remains.)

(Express office.)

(Telegraph office.)

(Number and street.)

(City or town.)

(State.)

(Sign here)

Michael S. Allin
Brody Tex.

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

10/10/17
checked
10/10/17

Drawn S.M.

5-2-21

1232-53-2

COMPILATION OF DISPOSITION OF REMAINS DATA

File #38885

Examined
For Concentration
Munich - Argonne 1232
att 2/16/20

I. LOCATION INDEX CARD:

(a) Name ALLIN, Elijah F. Ser. No. 1496812
(b) Rank Pvt. Organization Co. A, 144th Inf.
(c) Date of death 10-13-18 (d) Cause of death k/a.

TYP. HWE.
CKR. [Signature]

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

(a) Grave No. 30 Row - Plot 1 Sec. 53 TYP. HWL.
(b) Emerg. Address Mrs. W. S. Allen (Mother) Brady, Texas.

III. ~~Files of soldiers dying from contagious diseases~~

CKR. [Signature]

IV. A. G. O. DISPOSITION CARD:

Date of receipt none

(a) Name Mr. Wilburn D. Allin (b) Relationship Father
(c) Address Brady, Texas.
(d) Remains to be brought to U. S.? no
(e) To be interred in National Cemetery in U. S. at If brought, yes.
(f) Shipping instructions upon arrival of body in U. S.
(g) Disposition instructions if not brought to U. S.

Examiner's Initials [Signature] Date 5-2-, 1921

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

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

Examiner's Initials [Signature] Date 5-2-, 1921

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

* no papers in file etc.

(a) Cancellation memos referred to? yes s.m.

Examiner's Initials [Signature] Date 5-2-, 1921

COUNTRY France CEMETERY NO. 1232, Sec. 53 SHEET NO. 2.

VII. G. R. S. Form No. 114 made _____, 192

Typed by _____, Checked by _____, 192

VIII. FINAL ACTION:

Following advice forwarded to Europe by { cable on _____, 192
letter on **MAY 13 1921**, 192

Sec. # 53

Par. # 2 Not To Be Returned

met

IX.

REMARKS

Multiple horizontal dashed lines for writing remarks.

COMPILATION OF DISPOSITION OF REMAINS DATA

File #38885

Form 115
7/16/22
See
AH

I. LOCATION INDEX CARD:

(a) Name ALLIN, Elijah F. Ser. No. 1496812
(b) Rank Pvt. Organization Co. A, 144th Inf.
(c) Date of death 10-13-18 (d) Cause of death is/a.
TYP. HWL.

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

(a) Grave No. 30 Row - Plot 1 Sec. 53 TYP. HWL.
(b) Emerg. Address Mrs. W. S. Allen (Mother) Brady, Texas.

III. Files of soldiers dying from contagious diseases _____ CKR. CB

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

V. Following advice forwarded to Europe by { cable on _____, 192
letter of transmittal on MAY 13 1921, 192

Sec. # 53

Par. # 2 Not To Be Returned

met

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

COUNTRY _____ CEMETERY No. _____ SHEET No. _____

Concentration.

G. R. S. Form. No. 16-A

Place Comagne 1232.

REPORT OF DISINTERMENT AND REBURIAL

Date Nov 2, 1921.

1. REMAINS OF ALLIN, Elijah F SERIAL NUMBER 1496812
RANK Pvt. ORGANIZATION Co. A. 144th Inf.

2. Disinterred (date): Nov. 2, 1921 From (give complete location): gr 30, sec 53, plot 1
By: Group 4 Unit sec 1

3. Reburied (date): Nov 2nd 1921 Meuse Argonne Cemetery # 1232 Gr 19 block A row 26 In (give complete location):
By: Group re-burial S Unit sec 1 Nature of reburial unlined casket

4. Report as to nature of original burial and condition of body upon disinterment :
wooden box and burlap and uniform.
badly decomposed, features not recognizable.

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

(b) Other means of identification found upon disinterment, and general remarks :
Name on body tag "Elijah E Allin"

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

(a) Height (actual measurement) impossible to determine.

(b) Weigh, (estimated) do

(c) Hair—Color do

Quantity do

Characteristics do

(d) Hair on face—Color do

Location do

Quantity do

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

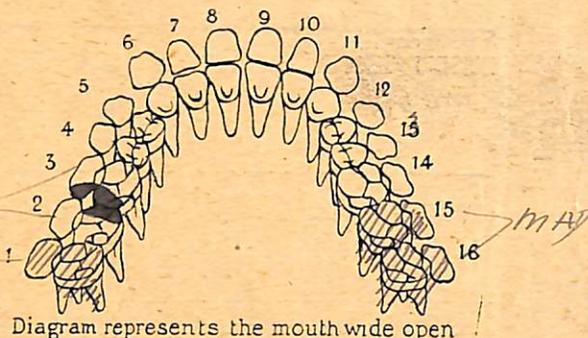
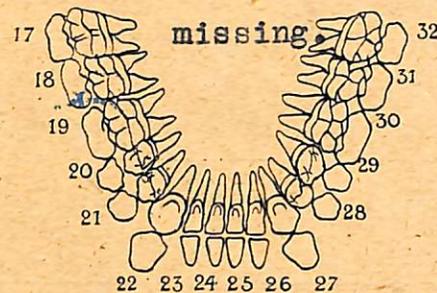


Diagram represents the mouth wide open



(f) Wounds or missing parts (received at time of casualty) 30774

hole in skull. both humerus fractured. Right ulner and radius missing.

Pelvis shattered. right femur fractured upper third. right foot shattered.

7. Disinterment supervised by P.P. Kierce Approved: R.C. Worthington
(Title) 1st Lt. Q.M.C.

8. Reburial supervised by A. U. Dufault Approved: Geo. C. Bland
(Title) 1st Lt. Q.M.C.

jt.

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 Questions 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.



To be prepared in triplicate.

DATE Nov 2 1921

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 ALLIN, Elijah F
2. No. 1496812
3. Rank Pvt
4. Org. Co A 144th Inf.
5. D.D. 10.13-18
6. C.D. KIA

10. Name Elijah E Allin
11. No.
12. Rank
13. Org.
14. (a) D.D.
(b) D.B. None

Discrepancy found upon disinterment

7. Grave No. 30 Sec. 53
8. Plot 1 Row
9.

15. Grave No. Sec.
16. Plot Row
17.

18. Cemetery Meuse-Argonne Amer.
20. Dept. or County Meuse-
22. G.R.S. Hdqrs. Code No. 1232 Sec. 53

19. Commune or town Romagne-s-Montfaucon
21. Country France

23. Disinterred (Date) Nov 2 1921

By P P Kierce

24. Inscription on grave marker:

Name Elijah F Allin
Rank Pvt

Serial No. 1496812
Organization Co A 144 Inf

25. Was identification disc found on grave marker? No On body? Yes

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).

None

27. Condition of body Badly decomposed, features unrecognizable

28. Nature of burial Uniform, burlap and pine box

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? None - See Item 10

30. Body prepared and placed in casket: Date Nov 2 1921 By P P Kierce

31. Casket sealed by P P Kierce

Signature of Embalmer, (Supervisor

AUTHENTICATED BY

MT

SHIPMENT. (Show actual marking of box.)



32. Designation of body:

Name ALLIN, Elijah F

Rank Pvt

Organization

Serial No. 1496812

Co A 144th Inf

33. Consigned to:

Name of Permanent Cemetery Meuse-Argonne Amer. Cty. Romagne-s-Montfaucon
House 1232

34. Casket boxed and marked (Date) Nov 2 1921 By P P Kierce

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

P C Worthington
P C Worthington

36. Remarks

37. Shipped from point of Operation: (Date) Nov 2 1921 cc

To point of Concentration Morgue Romagne (Name)

Convoyer W J Royed

Signature Shipping Officer

G F Spann
G F Spann, Capt. QMC.

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

(Name)

Convoyer

Signature Shipping Officer

40. Received: Date

G.R.S. Representative

41. Reinterred

Meuse Argonne Cemetery # 1232 (Date) Nov 2nd 1921

42. Grave No.

19

Section

43. Plot

xxxx block A

Row

26

G.R.S. Representative

Geo C Bland
Geo. C. Bland, 1st Lt. QMC.

jt.

REPORT OF DISINTERMENT AND REBURIAL

38885

Remains of:

Name: ALLIN, Elijah E. Number 1496812

Rank: Unkn Organization Unkn

Disinterment and Reburial made by Group: _____ Unit _____

Disinterred (Date) _____ from (Give complete location)

6 5/10/19 ISOALTE D CEMETERY. GRAVE #1

GIVRY ARDENNES

Reburied (Date) _____ In: (Give complete location)

5/10/19 Grave # 30 Sec #53 Plot #1

1232

ARGONNE AMERICAN CEMETERY # 1232

ROMAGNE MEUSE

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

Burial good; buried in uniform; badly decomposed.

Was one identification tag found upon the body? Yes

What other means of identification were found on the body? Noen

CONFIRMED No. 10615

10615

Note:

If upon disinterment, effects are found on 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 of identity in doubtful cases, notation whereof will be made and reported to Chief, Graves Registration Service.

Supervised by: Lt Stirn

LGG

R. H. ROSENTHAL
2nd Lieut. Q.M.C.U.S.A.
Unit _____

G.O. Group _____