

24

G.R.S. Form #114-B CAUSE OF DEATH *Died of wounds*

FULL NAME ..... *AMES, Bert E. vent* .....

RANK ..... *Corporal* SERIAL ..... *118255* .....

DIVISION & ORGANIZATION ..... *47<sup>th</sup> Co. M, 5th <sup>Regt.</sup> Marines 2<sup>nd</sup> Div* .....

DATE OF DEATH ..... *6-25-18* .....

STATE FROM WHICH HE CAME ..... *Kansas* .....

MEDALS OR DECORATIONS AWARDED! *Croix de Guerre (G.S.)*

FINAL GRAVE LOCATION ..... *33* ..... *3* ..... *B* .....  
Date Grave Row Block

..... *1764* .....  
Cemetery

*61336-2x1*  
NOTED BY

✓

1371

Place La Feto sans Jouane (S+M)

REPORT OF DISINTERMENT AND REBURIAL

Date Apr 8, 1921

1. REMAINS OF AMES, BERT E. SERIAL NUMBER 118255

RANK CPL ORGANIZATION Co M 5th Marines

2. Disinterred (date): Apr 8, 1921 From (give complete location): Gr 231 Row 5  
F.C. Cen Am Sec #241 La Feto sans Jouane (S+M)

By: Group Three Unit Section One

3. Reburied (date): Apr 8, 1921 In (give complete location): Gr 231 Row 5  
F.C. Cen Am Sec #241 La Feto sans Jouane (S+M)

By: Group Three Unit Section One Nature of reburial in burlop in pine

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

in burlop, in blanket, cross at feet  
badly decomposed

5. (a) Identification tags: Buried with body? none On grave marker? yes

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

apparently prop case, surgical dressing on left arm

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 estimate

(c) Hair—Color no hair on skull

Quantity none

Characteristics none

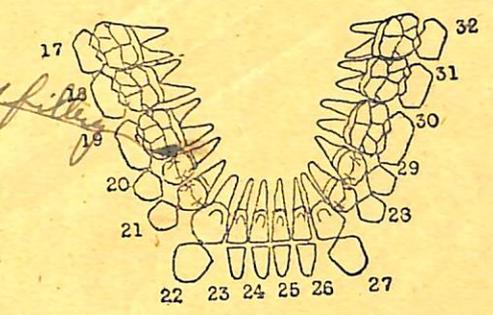
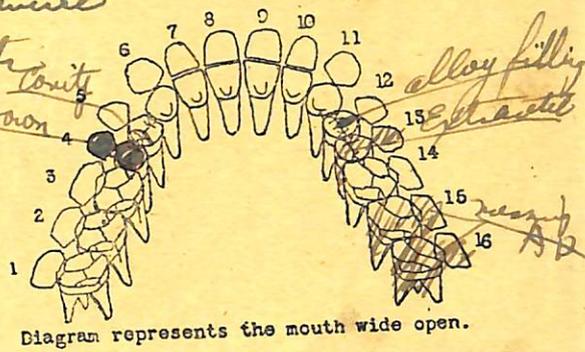
(d) Hair on face—Color none

Location none

Quantity none

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

(f) Wounds or missing parts (received at time of casualty) lower right leg fracture  
left hip has surgical dressing



7. Disinterment supervised by H.C. Luck, Capt. Inf. Inspector

Approved: Val E. Miltenberger  
(Title) Major, Med. Corps.  
Commanding Sec. One.

8. Reburial supervised by H.C. Luck, Capt. Inf. Inspector

Approved: Val E. Miltenberger  
(Title) Major, Med. Corps.  
Commanding Sec. One.

EAJ

RECEIVED  
CEMETERY DIVISION



OCT 13 1921

**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.

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

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.

Entered on list

A M E S, Bert E.

118,255

Corpl., Co. M, 5th Marines

Died June 25, 1918, from wounds received in action.



CODE SLIP

HEADING	SUB HEADING	NO. OF COLS	CODE	
NAME	Ames Bert Evert	A.M.E	5	135
BURIED	CEMETERY	1764	1	4
	GRAVE	33	2	33
	ROW	3	2	03
	BLOCK	B	1	2
STATE	Kansas		2	18
RANK	Cpl.		1	4
DIVISION	2nd		2	02
ORGANIZATION	5		3	005
ARM	U.S.M.C		1	X
MARITAL	(Father)	W	1	2
NAME	Ames		3	
RESIDENCE	STATE		2	
	COUNTY		2	
	CITY		3	
RELATION	Wife	Mother	1	1
OTHER	W		1	
ELIGIBILITY	Dead		1	6
NATIVITY			1	
RACE			1	
ENGLISH			1	
ATTENDANT			1	
HEALTH			1	
NO. OF SONS			1	
DATE OF TRIP			1	
ACCEPTANCE			1	
29/514/EAB			1	

**AUDITED**

AUG 17 1982

RS

me

Dead

3

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

7

IN REPLY REFER TO QM 293 A-C  
Ames, Bert Evert 1764 F

July 7, 1930

Mr. Louis H. Ames  
Americus, Kansas

Dear Sir:

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:

No

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

If so, give her name and address:

No

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:

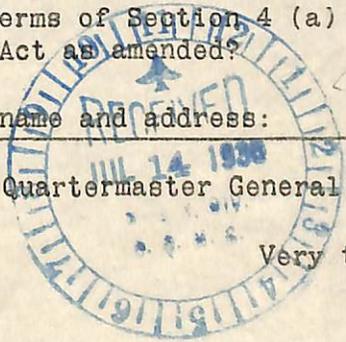
No

For The Quartermaster General,

Very truly yours,

*Louis H. Ames*

Enclosures:  
Envelope  
Act  
Amendment



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

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

June 11, 1929.

Ames, Bert Evert.

Mr. Louis H. Ames,  
Americus, Kans.

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 Corporal Bert Evert Ames, Co. 47th 5th Reg. U.S. M.C., whose remains are now interred in the Aisne-Marne American Cemetery, Belleau, Aisne, France.

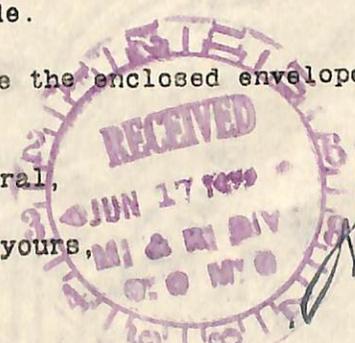
Will you please advise this office whether or not he is survived by a mother or widow who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish the full names and addresses of the mother and widow in order that action may be taken to extend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

For The Quartermaster General,

Very truly yours,



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

2 incls.  
Act of Congress.  
Envelope.

*L. H. Ames*  
*Louis H. Ames*

*No Mother*  
*Widow*

*J. Harris*

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

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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

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The records of this office show that you are the father of the late Corporal Bert Evert Ames, Co. 47th 5th Reg. U.S. M.C., whose remains are now interred in the Aisne-Marne American Cemetery, Belleau Wood, 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 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.

For The Quartermaster General,

Very truly yours,

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

2 incls.  
Act of Congress  
Envelope.

DISPATCHED  
JUN 10 10 10 AM '29  
Q. M. G. & R. DIV.

FR

G.R.S. Form #114-B

293

DATE \_\_\_\_\_

1. NAME Ames, Bert Evert SERIAL No. 118255

RANK Cpl ORGANIZATION 47 Co. 5 Regt USMC  
Co. M. 5th Marines

GRAVE LOCATION French Mil. Cty. La Ferte-sous-Jouarre (S.&M) #241  
CTY. NAME NUMBER

231 Amer. Sec. 5  
GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 231 Fr. Mil. Cem. #241, La Ferte-sous-Jouarre,  
GRAVE COMMUNE DEPT. (S-et-M).

COORDINATES \_\_\_\_\_

CONCENTRATED TO \_\_\_\_\_  
DATE GRAVE ROW PLOT

CEMETERY CTY. NUMBER

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

(Information in paragraph 2 taken from Form 1-A).

SUBSEQUENT REBURIALS \_\_\_\_\_

DATE GRAVE ROW PLOT CEMETERY

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR G.F. Waugh

G.F. WAUGH, Major, Inf., Supervisor, Area 82.

3. FINAL GRAVE LOCATION Dec. 14, 1922. 33 3 Block B  
DATE GRAVE ROW PLOT

Aisne-Marne American Cemetery #1764, Belleau (Aisne).

CEMETERY

AUDITED BY

## 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 16, 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.

To be prepared in triplicate.

DATE November 18-21

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 Ames, Bert Evert

10. Name

2. No. 118255

11. No.

3. Rank Cpl.

12. Rank

4. Org. Co. M. 5th Marines

13. Org.

5. D.D. June 25, 1918

14. (a) D.D.

6. C.D. DOWRIA

(b) D.B.

Discrepancy found upon disinterment

7. Grave No. 231 Sec. Amer

15. Grave No. Sec.

8. Plot Row 5

16. Plot Row

9.

17. None.

18. Cemetery French Mil.

19. Commune or town Le Ferte-sous-Jouarre

20. Dept. or County Seine & Marne

21. Country France

22. G.R.S. Hdqrs. Code No. 241

23. Disinterred (Date) November 18-21

By H.L. Harlbut

24. Inscription on grave marker:

Name Bert E. AMES

Serial No.

Rank Cpl.

Organization Co. M. 5th Marines

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

H.L. Harlbut  
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).

No effects. bottle record agrees Grave marker tag checks.

27. Condition of body Badly decomposed recognition impossible.

28. Nature of burial Burlap and Pine box. Found under cross.

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

30. Body prepared and placed in casket: Date Nov. 18-21 By H.L. Harlbut

31. Casket sealed by H.L. Harlbut

Signature of Embalmer, (Supervisor) H.L. Harlbut

*Handwritten notes and signatures in red ink at the bottom left corner.*

SHIPMENT. (Show actual marking of box.) Box No. C-16741

32. Designation of body:

Name Bert E. Ames Serial No. 118255

Rank Cpl Organization Co. M. 5th Marines

33. Consigned to: Officer in Charge Operations,

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

34. Casket boxed and marked (Date) November 18-21 By H.L. Hurlbut

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 J.P. Glandon Capt. QMC.

36. Remarks

37. Shipped from point of Operation: (Date) November 18-21

To ~~point of Concentration~~ Aisne Marne Am. Cty # 1764 Belleau Aisne

Convoyer R.H. Cronin Signature Shipping Officer J.P. Glandon 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

Convoyer Signature Shipping Officer

40. Received: Date Nov. 19, 1921

G.R.S. Representative W.D. Cleary

41. Reinterred Dec. 14, 1922. Aisne-Marne Amer. Cem. 1764.

(Date)

42. Grave No. 33 Section

43. Plot Block B Row 3

G.R.S. Representative W.D. Cleary

W.D. CLEARY, Lt. Chaplain USA.

# REPORT OF DISINTERMENT AND REBURIAL

Date November 18-21

1. REMAINS OF AMES Bert E. vert SERIAL NUMBER 118255  
 RANK Cpl. ORGANIZATION 47 Co. 5th Reg. U.S.M.C.  
Co. M. 5th Marines.

2. Disinterred (date) November 18-21 From (give complete location) Grave 231 SW 5  
Cty 241.

By : Group 2 Unit F.S.# 3.

3. Reburied (date) : Dec. 14, 1922. In (give complete location) : Grave 33, Row 3, Block B, Cem.1764, Belleau (Aisne)

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 :  
Bottle record does not state we find in burlap and Pine box.  
Badly decomposed recognition impossible.

5. (a) Identification tags : Buried with body ? No On grave marker ? Yes  
 (b) Other means of identification found upon disinterment, and general remarks :

No effects. Bottle record agrees Grave marker tag checks

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

(a) Height (actual measurement) impossible to determine gold crown 4

(b) Weigh, (estimated) impossible to determine

(c) Hair—Color None visible.

Quantity None.

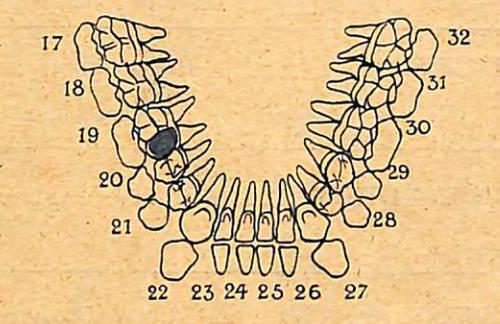
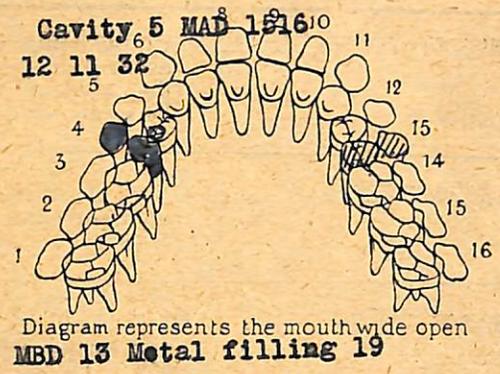
Characteristics None visible.

(d) Hair on face—Color None visible.

Location None visible.

Quantity None.

(e) Permanent marks on body (old scars, peculiarities, or missing parts) None visible.



(f) Wounds or missing parts (received at time of casualty) right leg fractured below knee

7. Disinterment supervised by H.L. Hurlbut Approved ; J.P. Glandon Capt. Q.M.  
 (Title) \_\_\_\_\_

8. Reburial supervised by L.D. HAYS Approved : W.D. Cleary  
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 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.

COMPILATION OF DISPOSITION OF REMAINS DATA

Marine

I. LOCATION INDEX CARD:

11/17/21 File # 4766

(a) Name AMES, Bert E. vert Ser. No. 118255
(b) Rank Cpl. Organization Co. M, 5th Marines
(c) Date of death 6/25/18 (d) Cause of death DWRIA
TYP. EK
CKR. B. J.

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

(a) Grave No. 231 Row 5 Plot -- Sec. AMCF. TYP. EK
(b) Emerg. Address Louis H. Ames (father) Americus, Kansas.

III. Files of soldiers dying from contagious diseases --- CKR. B. J.

IV. A. G. O. DISPOSITION CARD:

Date of receipt ---

(a) Name Louis H. Ames (b) Relationship Father
(c) Address Americus - Kan
(d) Remains to be brought to U. S.? no
(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 mks Date 1-10-21, 1920.

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

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

no correspondence

Examiner's Initials mks Date 1-10-21, 1920.

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

no request for disposition

(a) Cancellation memos referred to? Yes. PT

Examiner's Initials PT Date 1-11-21, 1920.

COUNTRY France CEMETERY No. 241 SHEET No. 6

Checked 11/17/21

MB 210-21

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

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

VIII. FINAL ACTION:

Following advice forwarded to Europe by *Ames* *Per Event* { cable on \_\_\_\_\_, 1920  
letter on *air* JAN 25 1921, 1920

IX.

CORRECTIONS

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

X. SUSPENSION REMARKS: Form 124 to Marine Corps. Form 840 from Marine Corps

Date Sent 1/12/21 Date Rec'd 1/15/21

*Form 840 conferred Marine card*  
*136 R. 1/17/21*

Serial No. \_\_\_\_\_

Ordn. \_\_\_\_\_

.....  
Rank .....  
Serial No. ....  
Org. ....  
Remarks .....

.....  
A. G. O. Card & Corr. *Stevens*  
.....  
Discrepancies 1-10-21

.....  
Name  .....  
Rank .....  
Serial No.  .....  
Org.  .....  
Remarks .....

.....  
G. R. S. Corr. ....  
.....  
Discrepancies .....

.....  
Name .....  
Rank .....  
Serial No. ....  
Org. ....  
Remarks .....

.....  
Chackers .....  
.....  
Discrepancies .....

.....  
Name .....  
Rank .....  
Serial No. ....  
Org. ....  
Remarks .....

*[Handwritten signature]*

67192-AB-25-vvw



# Headquarters U. S. Marine Corps,

Washington, January 13, 1921.



From: The Major General Commandant.

To: The Chief, Cemeterial Division, Office of Quartermaster General of the Army.

Subject: A.E.F. dead: Confirmation or revision of G.R.S. record of disposition status.

Reference: Form No. 124, File No. 4766 dated 1/12/21  
Case of Bert Evert AMES 118255 Corporal  
47th Co. 5th Marines 241-

1. It is requested that the remains of the above-named man be disposed of as follows:

DISPOSITION: Return of remains not desired

CONSIGNEE: Name: \_\_\_\_\_  
Address: \_\_\_\_\_

NEXT OF KIN: Name: Mr. Louis H. Ames  
Relationship: Father  
Address: Americus, Kansas

REMARKS: \_\_\_\_\_

By H. LAY,  
Lt. Colonel, U.S.M.C.  
Asst. Adjutant & Inspector.  
Special Assistant to the  
Major General Commandant.



Ames, Bert Evert, Cpl.,  
47th Co., 5th Regt.

-----  
Marines.

Disposition: Return of Remains,  
not desired.

Next of Kin: Louis H. Ames, Rej. Father.  
Americus, Kansas.

Brown Bay 4th Ed

1-10-21



W. J. ...  
...



# GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Ames, 118235, Burt  
(Surname.) (Number.) (First Name and Initials.)

Cpl 47th Co. 5th Mar.  
(Rank.) (Organization.)

DATE OF BURIAL..... June 25 1918.....

PLACE OF BURIAL..... Cimetiere de La Ferte.....

(Give Cemetery, Town and Department.) Map reference must specify clearly what map is used.

American Section.....

GRAVE NUMBER..... 130.....

HOW MARKED: Name Peg?..... Cross?.....

Headboard?..... Bottle?.....

IDENTIFICATION TAGS:

Was one buried with body?..... Yes.....

Was one fastened to name peg or stake used as a grave marker?..... Yes.....

If name unknown and tags missing, description and marks should be given here:

REPORTED BY:

Captain JRC

(Signature and Rank of Reporting Officer.)

This portion to be forwarded to Adj. Gen'l., G.H.Q., A.E.F.

# GRAVE LOCATION BLANK

## LOCATION OF THE GRAVE OF

H 760

Ames, 118235, Burt  
(Surname.) (Number.) (First Name and Initials.)

Cpl. 47th Co. 5th Mar.  
(Rank.) (Organization.)

DATE OF BURIAL: June 25 1918

PLACE OF BURIAL: Cimetiere de La Ferte

(Give Cemetery, Town and Department.) Map reference must specify clearly what map is used.

American Section

GRAVE NUMBER: 130

HOW MARKED: Name Peg? Cross?

Headboard? Bottle?

### IDENTIFICATION TAGS:

Was one buried with body? Yes

Was one fastened to name peg or stake used as a grave marker? Yes

If name unknown and tags missing, description and marks should be given here:

REPORTED BY:

Captain MRC

(Signature and Rank of Reporting Officer.)

This portion to be sent to Chief of Graves Registration Service.

2 JUL 1918



Mr Wilson

BILL OF FARE

Ames, Bert Evert

cpl # 118 255

Co 47th 5th Marines

Form 840 from Marine Corps

Date Rec'd 1/15/21

**FILE**

L

Adjustment Made

JAN 21 1921

File No. 4766

mkw

8.

Reference #4766

American Expeditionary Force  
Headquarters Service of Supplies  
Office of the Chief Quartermaster - American E. F.  
Graves Registration Service  
France.

January 17, 1919.

FROM: Chief, Graves Registration, American Expeditionary Forces  
TO: Home Communication Section, American Red Cross, Paris, France.  
SUBJECT: Corporal Bert P. Ames, Co. M., 5th Marines.

1. In reply to your inquiry dated January 2nd, 1919, in respect of place of burial of above mentioned soldier, I beg to advise that burial took place in the French cemetery at LaFerte, in the Department of the Seine-et-Marne.
2. This information is furnished for the official use of the American Red Cross only, and may not be communicated to the public.

By direction CHARLES C. PIERCE,  
Lieut.-Colonel, Q.M.C., A.E.F.

per MAURICE B. DIX,  
Captain, American Red Cross,  
Representative assigned to  
Graves Registration Service.

MBD/im.

File - a

Headquarters. Graves Registration Service  
Quartermaster Corps  
American Expeditionary Forces

4766  
January 10, 1919.

FROM: Chief, Graves Registration Service, American E. F.

TO: Home Communication Section A. R. G., Paris.

SUBJECT: Corporal Bert E. Ames, 47th Co., 5th Regiment Marines, American E.F.

1. Reference your File No. 8020, dated November 21, 1918, this office does not keep hospital records; the records at these headquarters show that the above soldier is buried in Grave No. 130, American Section, French Cemetery at LA FERTE, Department of the SEINE-et-MARNE.

2. This information is furnished for the official use of the American Red Cross and may not be communicated to the public.

By direction

CHARLES C. PIERCE,  
Lieut.-Colonel, Q.M.C., A.E.F.

per

MAURICE B. DIX,  
Captain, American Red Cross,  
Representative assigned to  
Graves Registration Service.

MBD-dn

Capt. Dix  
Graves Registrar  
APO 717

1-9-19

AMERICAN RED CROSS

Paris, January 2, 1919.

Name of Soldier: Bert F. Ames

Rank: Cpl.

Company: M

Regiment: 5th Marines, (formerly  
47th Co., 5th Marines)

Forward Burial Report to  
"Bureau of Communication" for  
Washington

Burial report required for Paris.

LER

AMERICAN EXPEDITIONARY FORCES  
HEADQUARTERS SERVICES OF SUPPLY  
OFFICE OF THE CHIEF QUARTERMASTER, A. E. F.  
GRAVES REGISTRATION SERVICE  
FRANCE

Burial information for the American Red Cross.  
-----

Soldier's name: Ames Bert F.

Rank: Corporal

Organization: Co. M., 5th Marines

Date of Death: 6-25-18

Place of Burial: ~~FRANCH CEMETERY at ALFERTE, in~~  
~~the DEPARTMENT of the SEINE-et-MARNE.~~

*4766*

Reference number: 4766

(All communications regarding this Grave location should  
quote the above reference number and be addressed to :-  
Chief, Graves Registration Service  
Headquarters Service of Supply  
Office of the Chief Quartermaster  
American E. F.  
France.)

CHARLES C. PIERCE  
Lieut. Colonel. Q.M.C., U.S.A.

For Washington.

AMERICAN RED CROSS

4766

INTER-OFFICE LETTER

1-10-19

From

Bureau of Home and Hospital Service

Ref. 8026

Date Nov. 21, 1918.

To

Capt. M.B. Dix, A.R.C., Graves Registration Bureau, APO 717

Subject

Cpl. Bert E. Ames, 47th Co., 5th Reg. U.S.M.C. APO 701

Can you give us name of hospital where above man died?

*8026*

Home Communication Section

Bureau of Home and Hospital Service, Paris

ESM MMB

J. B.

*[Handwritten signature]*

Enq / 25 / A

*Burial info  
back of letter  
Hospital info  
known*

City # 241 Grave # 130 Union, Pa.

Buried 6-25-18

City Pa. State Secured  
Mame,

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

File Number 4766

From: - A. R. D.

Date:

Please furnish information as indicated below regarding the following soldier:

NAME AMES, BERT

NUMBER 118255

RANK

ORGANIZATION

PARM MARINES

Formerly 4th Co 5th Marine

No.	Question	Reply
1	Do particulars of soldier given above agree with Records?	N.B. All Proper names to be printed in PLAIN BLOCK LETTERS
2	Date of Death	
3	Cause and place of death	1. Yes
4	Number of Casualty Cablegram	2. 6-25-18
5	Date buried	4. 189
6	Grave Location (a) Complete record required (b) Name of Cemetery or Command only required	5. 6-25-18
7	Who reported burial	6. La Ferte French Cty. (SEINE-ET-MARNE) CTY # 2
8	Has report been confirmed by G.R.S.	(P) - YES,
9	Report as to Grave Marker	
10	Report as to Identification Tags	
11	Who is nearest relative?	
12	Has M/R been notified? (Give date)	
13	Report the exact position of your inquiry on this case. (Reply in all cases if no information on record)	
14	What is the photograph No.?	

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