

G.R.S. Form #114-B

NOV 27 1925

DATE

1. NAME AMMONS, Abraham SERIAL No. 1523792RANK Wagoner ORGANIZATION Hq. Co., 136th MG Bn.GRAVE LOCATION Amer. Cty., Toul, M-et-M CTY. NAME 91 NUMBERGRAVE 605 ROW 5 PLOT B2. ORIGINAL BATTLE AREA GRAVE LOCATION 605 Toul (M et M)  
GRAVE COMMUNE DEPT.COORDINATES 69 NE. E.361.4 N.209.15CONCENTRATED TO Hospital Burial 605 5 B  
DATE GRAVE ROW PLOTToul (M et M) 91  
CEMETERY CTY. NUMBER

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

Tag on cross. DATE OF DEATH Oct 23, '18STATE FROM WHICH HE CAME OhioData Form 1-1 EDALS OR DECORATIONS AWARDED NoneSUBSEQUENT REBURIALS  
DATE GRAVE ROW PLOT CEMETERY

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR L. H. JOHNSON, 1st Lieut., QMC3. FINAL GRAVE LOCATION July 28, 1922 8 9 Block C  
DATE GRAVE ROW PLOTSt. Mihiel American Cty. #1233, Thiaucourt, M et M.

CEMETERY

AUDITED BY  
K.M.  
1-3A.G.O.  
NOV 30 1925  
WORLD WAR DIV.



## 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.

GRAVE LOCATION  
Location of



R 1  
*Abraham*

GRAVE LOCATION BLANK

Location of the grave of *Anonymous* ~~Abraham~~  
*Pvt. Wag. Co. Hdqrs. 136th Y. Bn. 1523792*

Date of burial *10/24/18*

Place of burial *Toul*

Grave No. *605* Cross? *Yes*

Headboard? *No* Bottle? *No*

Identification tags.

Has one buried with body? *Yes*

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

Reported by *David Feldman*

*2nd Lieut. G. M. C.*

To be forwarded to Adjutant General,  
G.H.Q., A.E.F.



## CODE SLIP

HEADING	SUB HEADING	NO. OF COLS	CODE
NAME <i>Ammons</i>	<i>A M M</i>	3	<i>1 0 0</i>
<i>abraham</i>	CEMETERY <i>1233</i>	1	<i>3</i>
BURIED	GRAVE <i>8</i>	2	<i>08</i>
	ROW <i>9</i>	2	<i>09</i>
	BLOCK <i>C</i>	1	<i>3</i>
STATE	<i>Ohio</i>	2	<i>41</i>
RANK	<i>Wagoner</i>	1	<i>2</i>
DIVISION	<i>39</i>	2	<i>37</i>
ORGANIZATION	<i>136</i>	3	<i>136</i>
ATM	<i>mc. Bn</i>	1	<i>2</i>
MARITAL	<i>no</i>	1	<i>2</i>
NAME <i>Hughes</i>	<i>Hughes</i>	3	<i>8 1 7</i>
(sister) <i>Mrs. Eliza</i>	STATE <i>Ohio</i>	2	<i>41</i>
RESIDENCE	COUNTY <i>Columbiana</i>	2	<i>16</i>
<i>Nellie, Ohio</i>	CITY <i>Nellie</i>	3	<i>5 x x</i>
RELATION	<i>mother</i>	1	<i>1</i>
OTHER		1	
ELIGIBILITY	<i>dead</i>	1	<i>6</i>
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE		1	
29/514/EAB			

*Audited*  
**MAR 28 1932**  
*913*



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C  
Ammons, Abraham 1233 S

July 7, 1930

Mrs. Eliza Hughes,  
Nellie, Ohio

Dear Madam:

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

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

1. Is the deceased survived by a mother?

If so, give her name and address:

*mother is Dead.*

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

If so, give her name and address:

*never was married*

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:

*not E my -*

For The Quartermaster General

Very truly yours,

Enclosures:  
Envelope  
Act  
Amendment

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

War Department  
This is a reply to your letter  
Washington

1933

Abraham Wimmers -  
my brother our father and mother passed  
away more than 12 years ago and there  
is absent any step mother and my  
brother never was married.

Wm E. J. [unclear]  
[unclear]



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Ammons, Abraham

May <sup>25</sup>, 1929.

Mrs. Elisa Hughes,  
Nellie,  
Ohio.

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 sister of the late Abraham Ammons, Wagoner, Hq. Co., 136th M. G. Bn., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, 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.

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Ammons, Abraham 1233 S

July 7, 1930

Mrs. Eliza Hughes,  
Nellie, Ohio

Dear Madam:

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

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

1. Is the deceased survived by a mother?

If so, give her name and address:

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

If so, give her name and address:

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

If so, give her name and address:

For The Quartermaster General,

Very truly yours,

Enclosures:

Envelope

Act

Amendment

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



Ammons,

Abraham

1,523,792

(Surname.)

(Christian name in full.)

(Army serial number)

Wagoner

Hdqs Co 136th MG Bn.

(Rank and organization.)

State your relationship to the deceased.

Sister

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 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)

Mrs Eliza Hughes.

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.



Orig letter sent to  
Mrs Eliza Hughes,  
Neville, Ohio.

*File 11/22/20*  
**REVIEWED**  
**OSP SS.**

*cc-cc-11*

*91-15*

*drawn by [unclear]*



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Ammons, Abraham

May 25, 1929.

Mrs. Eliza Hughes,  
Nellie,  
Ohio.

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 sister of the late Abraham Ammons, Wagoner, Hq. Co., 136th M. G. Bn., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, 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.



ALLMONS, Abraham - Wagoner

February 15, 1924

Mrs. Eliza Hughes,  
Nellie,  
Ohio.

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

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

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

Very truly yours,

1- Incl.  
Record card.





# COMPILATION OF DISPOSITION OF REMAINS DATA

File # 43470

7792

## I. LOCATION INDEX CARD:

(a) Name AMMONS, Abner ham (11-29) - O. K. Ser. No. 1523792

(b) Rank Wagoner Organization Hdq. Co. 136 M/G Bn.

(c) Date of death 10-23-18 (d) Cause of death Pneumonia

TYP. DB

CKR. AS

*5/22 Examined  
for Concentration  
St Michael 1233  
AT 5/25/22*

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

(a) Grave No. 605 Row - Plot - Sec. - TYP DB

(b) Emerg. Address Eliza Hughes, (Sister) Nellie, Ohio.

## III. Files of soldiers dying from contagious diseases

**NO CARD**

CKR. AS

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

Date of receipt none

(a) Name Mrs Eliza Hughes (b) Relationship sister

(c) Address Nellie, Ohio (reverse of card)

(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. Yes

Examiner's Initials SH Date 11/20, 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 SH Date 11/20, 1920.

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

no request for disposition.

(a) Cancellation memos referred to? Yes

Examiner's Initials JP Date 11-22, 1920.

COUNTRY FRANCE

CEMETERY No. 91

SHEET No. 15

G. R. S. Form No. 115  
Amended April 6, 1920

3-7720

Make Form No. 114

act 1-4-21

**CARDED**

**FORM 115 - A COMPLETED**

*Rev. 5-27-21 F.P.*

*checked 11-29*



Typed by  
VIII. FINAL A

Typed by \_\_\_\_\_, Checked by \_\_\_\_\_, MAY 5 1921, 1920.

### VIII. FINAL ACTION:

Cemeterial Division  
Overseas Project Sub-Section

Following advice forwarded to Europe by

cable on \_\_\_\_\_, 1920  
letter on 12-17-, 1920

JAN 10 1921

Ammons, Abraham  
Par. # 2. Not to be returned (ECL) 12-27-20.

## IX.

## CORRECTIONS

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

X. SUSPENSION REMARKS:



To be prepared in triplicate.

DATE Febr. 23, 1922

## 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 AMMONS, Abraham  
 2. No. 1523792  
 3. Rank Wagoner  
 4. Org. Hq. Co. 136th M.G. Bn.  
 5. D.D. Oct. 23rd, 1918  
 6. C.D. Pneumonia

10. Name \_\_\_\_\_  
 11. No. \_\_\_\_\_  
 12. Rank \_\_\_\_\_  
 13. Org. \_\_\_\_\_  
 14. (a) D.D. \_\_\_\_\_  
 (b) D.B. no discrep.

Discrepancy found upon disinterment

7. Grave No. 605 Sec. \_\_\_\_\_  
 8. Plot B Row 5  
 9. \_\_\_\_\_

15. Grave No. \_\_\_\_\_ Sec. \_\_\_\_\_  
 16. Plot \_\_\_\_\_ Row \_\_\_\_\_  
 17. This Cemetery is not divided into Plots and Rows at the present time.

18. Cemetery Amer.  
 20. Dept. or County M-et-M  
 22. G.R.S. Hdqrs. Code No. 91  
 23. Disinterred (Date) Febr. 23, 1922  
 24. Inscription on grave marker:

19. Commune or town Toul  
 21. Country France

Name Abe Ammons  
 Rank Wagoner

Serial No. \_\_\_\_\_  
 Organization Hq. Co. 136th. M.G. Bn.

25. Was identification disc found on grave marker? yes On body? yes

W. N. Tucker  
 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 Decomposed. Features not recognizable.

28. Nature of burial On board; in uniform.

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? See No. 17 above. Body disc reads: "A. Ammons, 1523792, U.S.A"

30. Body prepared and placed in casket: Date Febr. 23, 1922 By E.T. Anderson

31. Casket sealed by E.T. Anderson

AUDIT BY  
8/24/23  
 Signature of Embalmer, (Supervisor

E.T. Anderson



SHIPMENT. (Show actual marking of box.) Box No. C-24527

32. Designation of body:

Name Abe AMMONS Serial No. 1523792

Rank Wagoner Organization Hq. Co. 136th M.G. Bn.

33. Consigned to:

Name of Permanent Cemetery St. Mihiel Amer. #1233, Thiaucourt, M-et-M

34. Casket boxed and marked (Date) Febr. 23, 1922 By E.T. Anderson

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 R. O'Leary, 1st. Lt. QMC

36. Remarks

None

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

To point of Concentration Toul (M-et-M)

Convoyer Frank Atwell Signature Shipping Officer R. O'Leary, 1st. Lt. QMC

38. Received at Railhead or Point of Concentration: Date Febr. 23, 1922

By G.R.S. Representative L. B. Massie, Captain, QMC

39. Shipped from Railhead or Point of Concentration: Date 23 MAR 1922

To Permanent Cemetery No. 1233, Thiaucourt, (M-et-M), Amer. Cem. St. Mihiel

Convoyer Frank Atwell Signature Shipping Officer L. B. Massie, Capt. QMC

40. Received: Date 2 MAR 1922

G.R.S. Representative G. D. GAMBLE, Captain, Q.M.C.

41. Reinterred July 28, 1922 (Date)

42. Grave No. 8 Section

43. Plot Bk. C Row 9

G.R.S. Representative A E Dewey 1st. Lt. QMC



Place Toul (M&M)

## REPORT OF DISINTERMENT AND REBURIAL

Date Feb. 23, 1922.

1. REMAINS OF AMMONS, Abraham SERIAL NUMBER 1523792  
 RANK Wagoner ORGANIZATION Hq.Co., 136 M.G.Bn.

2. Disinterred (date): Feb. 23, 1922, Gr. 605, Cem. 91, Toul (M&M), France.  
 From (give complete location):

By: Group Anderson's Unit F.S.8

3. Reburied (date): July 28 1922 In (give complete location): Gr. 8 Bk.C Row 9  
Cty. # 1233

By: Group Reburial Unit \_\_\_\_\_ Nature of reburial Casket & shipping case

4. Report as to nature of original burial and condition of body upon disinterment:  
Board and uniform. Body decomposed. Features not recognizable.

5. (a) Identification tags: Buried with body? Yes. On grave marker? Yes.

(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 ascertain

(b) Weight (estimated) Impossible to estimate

(c) Hair—Color None visible

Quantity \_\_\_\_\_

Characteristics \_\_\_\_\_

(d) Hair on face—Color None

Location \_\_\_\_\_

Quantity \_\_\_\_\_

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

missing parts) Impossible to determine

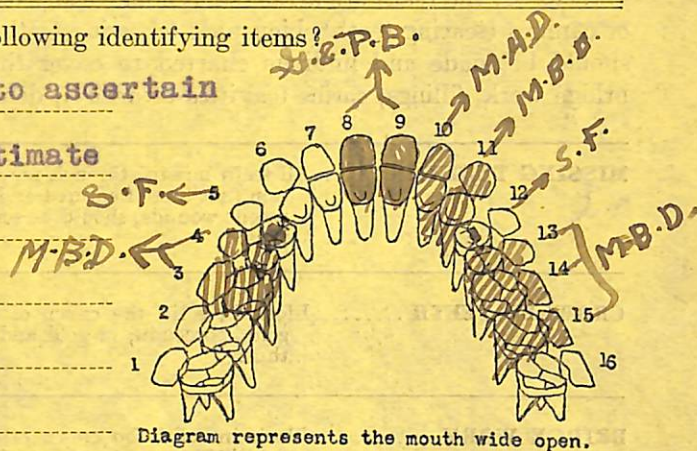
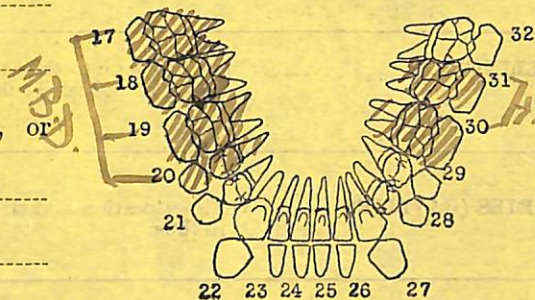


Diagram represents the mouth wide open.



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

Impossible to determine.

W.N. Tucker, Checker.

7. Disinterment supervised by E.T. Anderson  
E.T. Anderson, Sup. Emb.

Approved: R. O'Leary  
 (Title) 1st Lt. QMC

8. Reburial supervised by H. L. Kramer  
H. L. Kramer






Approved: A. E. Dewey  
 (Title) 1st Lt. QMC



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

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

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

<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:	

**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."

3-7832

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.



See Form 118  
Att 5/25/27

I. LOCATIONAL INDEX CARD taham. (11-29)

DB

TYP

## Pneumoniae

Cause of death

DB

TYP

W. H. HART

CKR

A. A. Card: Mrs. Eliza Hughes (sister)  
Nellie, Ohio, requests body to remain  
in Europe. (Esl) 12-27-20.

Par. #2 Not to be returned. (EAS) 12-22-20

1 JAN 8 1921

192

## Desires

Action taken

5/5

192

CEMETERY NO.

SHEET NO.

91

15

S-666/MB

act 1-4-21.



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY  
GRAVES REGISTRATION SERVICE  
HOBOKEN, N.J.

JAN 18 1921

FROM: Chief, Graves Registration Service, Q.M.G.  
Mrs. Eliza Hughes, Nello, Ohio.  
TO: Wagoner Abraham Ammons, Ser. No. 1523792 Hdq.Co., 186 MFG Bn.  
SUBJECT: Remains of.....

The records of this office show that you have requested that his body  
remain in Europe.

If these are not the correct instructions, please correct them. Make  
corrections on second page.

The nearest relative may choose between, (1) returned of the body to any  
address in the United States; (2) interment in Arlington, Va., or any other  
National Cemetery; or (3) remain in Europe. All removals are at Government expense.

By authority of the Quartermaster General.

CHARLES C. PIERCE,  
Lt. Col., Major, U.S.A.

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

NAME OF	NO. AND STREET	TOWN	STATE
Was soldier married?			
Soldier's Widow			
Soldier's children (Name oldest first)	1 2 3		
Father			
Mother			
Brothers (Name oldest first)	1 2 3		
Sisters (Name oldest first)	1 2 3		

Date: \_\_\_\_\_ Signature \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_

Important.-- CAREFULLY read instructions before filling out this paper.



#3470

GRAVE LOCATION BLANK

Location of the grave of Anonymous, Abe  
Pvt. Wag. Co. Adgts. 136th Inf. B'n. 1523792

Date of burial 10/24/18

Place of burial Toul

Grave no. 605 Cross? Yes

Headboard? No Bottle? No

Identification tags.

Has one buried with body? Yes

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

Reported by David Feldman  
2nd Lieut. G. H. C.

To be forwarded to the Chief Grave  
Registration Service.

91

REVIEWED  
OSP SS.



March 24th, 1921.

File No. 293.8 Com. Div. Cor. Br.  
(Ammons, Abraham)

Mrs. Eliza Hughes,  
Hollie, Ohio.

Dear Madam:

Kindly advise this office at your earliest convenience whether or not the late Abraham Ammons, Wagoner, Serial No. 1533792, Reg. Co. 136 M.G. Bn., is survived by widow, children, father, mother, brothers, or sisters older than yourself, and if so, please furnish their names and addresses.

This information is necessary in order that the Department may be assured that the legal next of kin of the late soldier may have an opportunity of expressing his or her wishes relative to the disposition of the remains.

If the late soldier is not survived by any of the above mentioned relatives, please state this fact, and also whether you desire the body left in France and buried in a permanent American Cemetery, returned to the United States and shipped to you, or interred in the National Cemetery at Arlington, Va.

Your prompt reply will be greatly appreciated.

By authority of the Quartermaster General:

R. E. SHANNON,  
Captain, Q.M. Corps,  
Officer in Charge.

BY:

J. F. BUTLER,  
Captain, Infantry.

Mailed-C.F.D.

MAR 26 1921



Adjustment Made  
DEC 2 1920

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 11/23/20.

File No. Requisition.

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 Ammons, *OK* f. Date of death 10-23-18. *OK*  
b. Christian name Abe (Abraham) *OK* g. Cause of death Pneumonia. *OK*  
c. Serial Number 1523792. *OK* h. Authority (C.O.#)  
d. Organization Hq. Co. 136th MG Bn. *OK* i. Emergency address  
e. Rank Wagoner. *OK* j. Relationship

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

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

BY:

*H. J. Conner*  
H. J. CONNER,  
1st. Lieut. Q.M.C.

CEMETERY NO: 91.

SHEET NO: 15.  
TYPED BY: rln.

Rec'd World War Div.  
Date 11.23.20...

S/713/LML