

G.R.S. Form #114-B

To The A. G. O.

JUN 1 - 1926

293

ime.

DATE 1/6/22

1. NAME ANACKER, David

SERIAL No. 42213.

RANK Pfc.

ORGANIZATION Co.C. 16th Inf. & DIVISION

15iv

GRAVE LOCATION Meuse Argonne American, Romagne/s/Montfaucon, Meuse. 1232, Sec. 23

CTY. NAME

NUMBER

59

Sect. 23

2

GRAVE

ROW

PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 14 Exermont Ardennes

GRAVE

COMMUNE

DEPT.

COORDINATES 282.9N 301.18 35NE

CONCENTRATED TO

6-5-19

59

Sec. 23

2

DATE

GRAVE

ROW

PLOT

Meuse Argonne

CEMETERY

1232

CTY. NUMBER

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

DATE OF DEATH Oct 8/1918

Data from Form 1

STATE FROM WHICH HE CAME NY

MEDALS OR DECORATIONS AWARDED

SUBSEQUENT REBURIALS

extra 901 1/1/20 - 15iv

DATE

GRAVE

ROW

PLOT

CEMETERY

ejr/tm

DATE

GRAVE

ROW

PLOT

CEMETERY

SIGNATURE, AREA SUPERVISOR

Wm M. Cline

Wm M. CLINE
Captain Q.M.C.

3. FINAL GRAVE LOCATION

1/6/22

25

8

Block E

DATE

GRAVE

ROW

PLOT

AUDITED BY

3-20-23

2. A.G.O.
JUN 5 1926
WORLD WAR DIV.

Meuse-Argonne American Cty. Romagne-ss-Montfaucon (Meuse) 1232
CEMETERY

Rec'd World War Div.
2 APR 2 1928

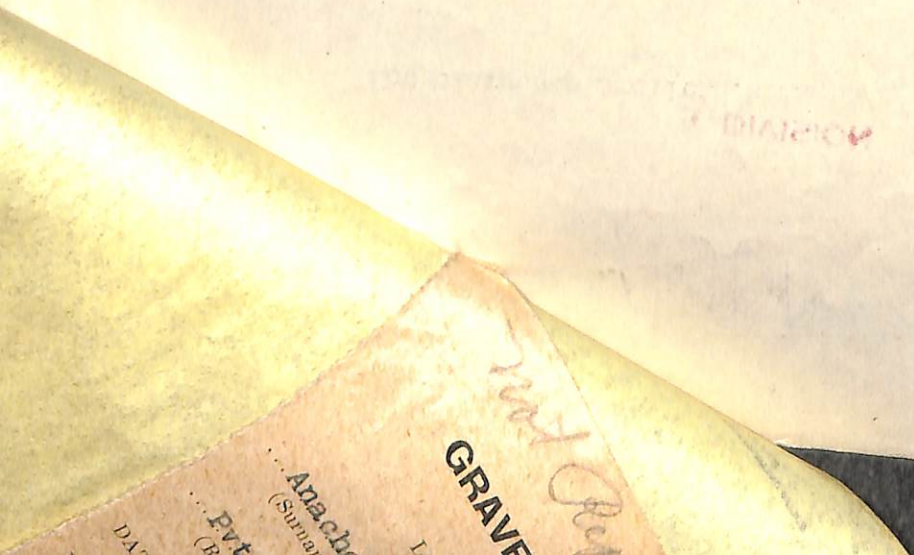


INSTRUCTIONS FOR PREPARATION OF FORM 114 B

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.



DIAGRAM



not Rept of 12/1/18

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Anachers **42213** **David**
(Surname.) (Number.) (First Name and Initials.)

Pvt. Co. B. 16th Infantry
(Rank.) (Organization.)

DATE OF BURIAL **October 19th 1918**

PLACE OF BURIAL

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

Burial plot 200 metres south, 400

metres from western extremity hill

272. Dept. Meuse. Two kilo. North 12213

of Exermont.
GRAVE NUMBER

HOW MARKED: Name Peg? Cross? **Yes**

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: **Chaplain H. C. Stuntz.**
166th Infantry

H. C. Stuntz
(Signature and Rank of Reporting Officer.)

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

Co C. 16th Infantry
1st Division

ANACKER David Pvt I/cl. 42213

" No information can be found about this soldier . "

The report not signed .

C.F.

ORIGINAL BYTES LKED

CB INDEX

1947
1948
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EMERGENCY DOCUMENTS

U. S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION

REPORT OF THE

COMMISSION

O. O. M. G.

CROSS INDEX

ORIGINAL PAPER FILED

CODE SLIP



HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	Anacker, Ana	3	1 4 1
BURIED	CEMETERY	1	1
	GRAVE	2	25
	ROW	2	08
	BLOCK	1	5
STATE	ny	2	37
RANK	Pvt	1	2
DIVISION	1	2	01
ORGANIZATION	16	3	016
AFM	Inf	1	1
MARITAL	No	1	2
NAME		3	
RESIDENCE	STATE	2	
	COUNTY	2	
	CITY	3	
	Died 1930-1931		
RELATION	mother	1	1
OTHER	no, no loco	1	
ELIGIBILITY	Dead	1	6
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE		1	

AUDITED

MAR 31 1932

RS

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-M
Anacker, David Pvt. 1 cl (M-A) M

June 9, 1931.

Mrs. Jesse Anacker,
1016 Cleveland Ave.,
Utica, N. Y.

David Anacker

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 D. C.
OFFICIAL BUSINESS

PENALTY FOR PRIVATE USE TO AVOID
PAYMENT OF POSTAGE \$300

REGISTER
OR
INSURE
VALUABLE MAIL

WASHINGTON, D.C. 4
JUN 9
5-PM
1931

RECEIVED
JUN 12 1931
M. R. DN.
O. O. M. G.

RETURNED TO
SWITZER

UNCLAIMED

10000000

Richard
616



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

June 7, 1930.

IN REPLY REFER TO QM 293 A-C

Anacker, David-1232 M

Mrs. Jesse Anacker,
1016 Cleveland Avenue,
Utica, New York.

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)

Jessie Anacker
(Sign here)



✓

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

October 7, 1929.

Anacker, David 1232 M

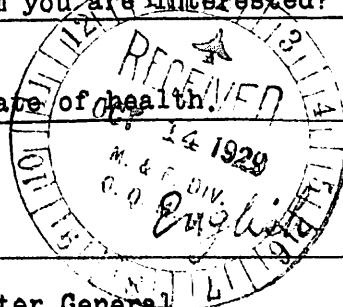
Mrs. Jesse Anacker,
1016 Cleveland Avenue,
Utica, New York.

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) <i>no</i>
2. Do you desire to make the pilgrimage in the calendar year 1930?	(Yes)	(No) <i>no</i>
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) <i>no</i>
4. Please give your age and state of health.	Age <i>32</i> (Years)	Health <i>poor</i> (Good) (Poor)
5. What language do you speak?	English - (Yes) <i>yes</i> (No)	Other language <i>no</i> (Specify language spoken)



For The Quartermaster General,

Very truly yours,

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

Encl.
Act
Envelope

Utica New York
July 10-1929

From: Mrs Jesse Anacker

To : John. T. Harris
Major I. M. Corps.
Assisant

1. In Reply to your letter
I. M. 293 A. C. June 24-29.
2. Anacker, David. Pt 16h. Co
Co. 16. Inf was not a
married man.

Very Truly Yours.

Mrs Jesse Anacker
1016 Cleveland Ave
Utica New York.



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

June 29, 1929.

Anacker, David.

Mrs. Jossie Anaker,
~~1422 Martin St.,~~
Utica, N.Y.

1016 Cleveland Ave

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 1st Cl., David Anacker, Co. C, 16th Inf., whose remains were now interred in the Meuse-Argonne Amer. Cty., 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 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.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO Q. M. 295 A-M
Anacker, David Pvt. 1st (1-A) M

June 9, 1931.

Mrs. Jesse Anacker,
1018 Cleveland Ave.,
Utica, N. Y.

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

0542

1931 JUN 9 - PM 2 34

COMM. R. BR.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

June 7, 1930.

IN REPLY REFER TO QM 293 A-C

Anacker, David-1232 M

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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

IN REPLY REFER TO QM 293 A-C

October 7, 1929.

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Mrs. Jesse Anacker,
1016 Cleveland Avenue,
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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 (Years)	Health (Good) (Poor)
5. What language do you speak?	English - (Yes) (No) Other language (Specify language spoken)	

For The Quartermaster General,

Very truly yours,

Encl.
Act
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 29, 1929.

Anacker, David.

Mrs. Jessie Anaker,
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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 invitation to her to make the pilgrimage. Both mothers and widows are entitled to make the pilgrimage.

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For The Quartermaster General,

Very truly yours,

2 incls.
Act of Congress.
Envelope.

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

Anacker,
(Surname.)
Pvt 1st cl

David
(Christian name in full.)

42,213
(Army serial number.)

Co C 16 Inf.
(Rank and organization.)

State your relationship to the deceased.

Mother

Do you desire the remains brought to the United States?

Yes
(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

Mr Jesse Anacker
1516 Cleveland, Ohio
Og.

(Number and street or rural route.)

(City, town, or office)

(State.)

Read carefully the letter accompanying this

4-2-21

checked over

drawn by,

W.P. 4-2-21

cty 1232 sec 23-6

In reply refer to:
293 C-R

June 20, 1923.

Mrs. Jesse Anacker,
1016 Cleveland Ave.,
Utica, N.Y.

Dear Madam:

Private 1/c David Anacker, Company O, 16th
The Quartermaster General desires that you be informed that
Infantry, is Grave 25, Row 8, Block E, Meuse-Argonne American Cemetery,
the permanent grave of
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 a 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.

RD

L.H.

Very truly yours,

H. J. Conner,
Assistant,

23/236/ARK

COMMUNICATIONS SECTION
JUN 20 1923
M. H. W.

80052

Date 17th., June, 1919

REPORT OF DISINTERMENT AND REBURIAL

Remains of:

Name: ANACHER, David

Number 42213

Rank: Pvt.

Organization Co. C. 16th., Inf.

Disinterment and Reburial made by Group:

Unit

Disinterred (Date)

From (Give complete location)

6 5th., June, 1919

Grave #154 B.A.C. EXERMONT. MEUSE

Map. 35 N. E. E. 301.8 N. 282.9

Reburied (Date)

In: (Give complete location)

5th., June, 1919

Grave #59 Sec. #23 Plot #2

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? None

10243

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. Ripper.

R. H. ROSENTHAL

2nd Lieut. O. M. C. U. S. A.

C.O. Group Unit

COMPILATION OF DISPOSITION OF REMAINS DATA File #80052

I. LOCATION INDEX CARD:

(a) Name ANACKER, David Ser. No. 42213
(b) Rank Pvt. 1/c Organization Co. C, 16th Inf.
(c) Date of death Abt. 10-8-18 (d) Cause of death K/A
TYP. aew
CKR. [initials]

4/57 Expedited 22
for concentration
Morse - Argonne - 2320 at [unclear]

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

(a) Grave No. 59 Row - Plot 2 Sec. 23 TYP. aew
(b) Emerg. Address Mrs. Bessie Anacker, Mother, 1422 Martin St., Utica, N.Y.

III. Files of soldiers/dying from contagious diseases/ CKR. [initials]

IV. A. G. O. DISPOSITION CARD:

Date of receipt None
(a) Name Mrs. Jessie Anacker (b) Relationship Mother
(c) Address 1416 Cleveland Ave. Utica, N.Y.
(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 [initials] Date 4-2, 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 [initials] Date 4-2, 1920

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

No request for disposition

(a) Cancellation memos referred to? Yes

Examiner's Initials [initials] Date 4-2, 1920

COUNTRY France CEMETERY No. 1232, Sec. 23 SHEET No. 6

AP 4-16-21

checked 4-4-21

To be prepared in triplicate.

DATE Jan 6 1922

REPORT OF DISINTERMENT, PREPARATION, SHIPMENT AND REBURIAL OF BODY

DISINTERMENT rms. COMPARATIVE REPORT

Records of G.R.S. Headquarters. Discrepancy found upon exhumation of body

1. Name <u>ANACKER, David</u>	10. Name _____
2. No. <u>42213</u>	11. No. _____
3. Rank <u>Pfc.</u>	12. Rank _____
4. Org. <u>Co. C. 16th Inf.</u>	13. Org. _____
5. D.D. <u>Abt. 10-8-18</u>	14. (a) D.D. _____
6. C.D. <u>KIA</u>	(b) D.B. <u>None</u>

Discrepancy found upon disinterment

7. Grave No. <u>59</u> Sec. <u>23</u>	15. Grave No. _____ Sec. _____
8. Plot <u>2</u> Row _____	16. Plot _____ Row _____
9. _____	17. <u>None</u>

18. Cemetery <u>Meuse Argonne American,</u>	19. Commune or. town <u>Romagne/s/Montfaucon,</u>
20. Dept. or County <u>Meuse,</u>	21. Country <u>France.</u>
22. G.R.S. Hdqrs. Code No. <u>1232, Sect. 23.</u>	

23. Disinterred (Date) Jan 6 1922 By J L Haky

24. Inscription on grave marker:

Name <u>David Anacker</u>	Serial No. <u>42213</u>
Rank <u>:PFC</u>	Organization <u>Co C 16 Inf</u>

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

C T Brown
Signature Junior Technical Assistant
C T Brown

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 Pine box burlap and uniform

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 Jan 6 1922 By J L Haky

AUDITED BY

31. Casket sealed by _____

Signature of Embalmer, (Supervisor) J L Haky
J L Haky

SHIPMENT. (Show actual marking of box.)



Box No. C-20892.

32. Designation of body:

Name David ANACKER

Serial No. 42213

Rank Pfc.

Organization

Co. C. 16th Inf.

33. Consigned to:

Name of Permanent Cemetery Meuse Argonne American, 1232, Romagne/s/Montfaucon, Meuse.

34. Casket boxed and marked (Date) Jan 6 1922

By J L Haky

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

Geo C Bland
Geo C Bland 1st Lt. QMC

36. Remarks

37. Shipped from point of Operation: (Date)

Jan 6 1922

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, Jan 6th, 1922,
(Date)

42. Grave No. 25

Section

43. ~~Block~~
~~Plot~~
~~XXXXX~~

Row

G.R.S. Representative

JEL

James W. Younger
James W. Younger,
Captain Q.M.C.

Place Romagne Sous Montfaucon

REPORT OF DISINTERMENT AND REBURIAL

Date Jan, 6, 1922.

1. REMAINS OF ANACKER DAVID SERIAL NUMBER 42213
RANK Pvt. 1/c ORGANIZATION Co., C. 16th Inf.

2. Disinterred (date): Jan, 6, 1922. From (give complete location):
Gr. 59 sec 23 pt 2 Cem., #1232.

By: Group 3 Unit Sec. 1

3. Reburied (date): Jan. 6th, 1922, Grave 25, Block E, Row 8, Cemetery 1232.
In (give complete location):

By: Group Reburial 3 Unit Unlined Casket,
Nature of reburial Nature of reburial

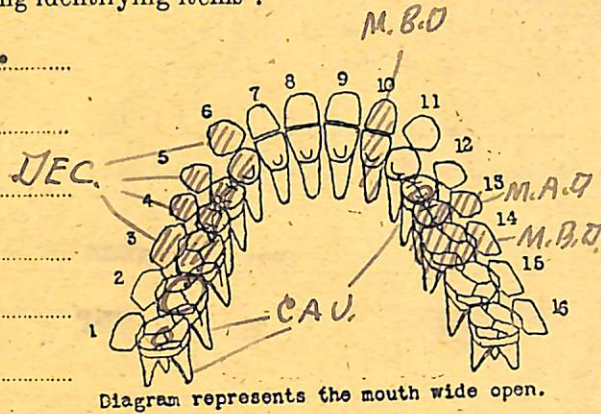
4. Report as to nature of original burial and condition of body upon disinterment:
Fine box, burlap and uniform, body badly decomposed features
unrecognizable.

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

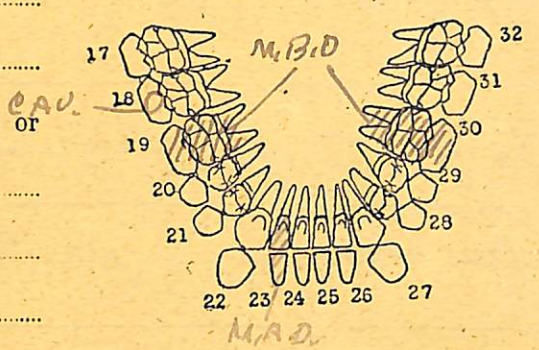
(b) Other means of identification found upon disinterment, and general remarks:
None

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

- (a) Height (actual measurement) Imp to det.
- (b) Weight (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) None visible



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






7. Disinterment supervised by J. L. Haky Approved: Geo. C. Bland 1st. Lt. QMC
(Title)

8. Reburial supervised by A.U. Dufault, concentration Approved: James W. Younger,
JEL (Title) Captain Q.M.C.

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

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

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

MISSING TEETHAll teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus :	
CROWNED TEETHBlock in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus :	
BRIDGE WORKBlock in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :	
FILLINGSDraw 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 File #80052

See Form 115
att 4/24/22

I. LOCATION INDEX CARD:

(a) Name ANACKER, David Ser. No. 42213
 (b) Rank Pvt. 1/c Organization Co. C, 16th Inf.
 (c) Date of death abt. 10-8-18 (d) Cause of death K/A

aew
TYP.
A/B

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

(a) Grave No. 59 Row - Plot 2 Sec. 23 TYP. aew
 (b) Emerg. Address Mrs. Bessie Anacker, Mother, 1422 Martin St., Utica, N.Y.

III. Files of soldiers dying from contagious diseases _____ CKR. A/B

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 4/12/22, 192

Section # 23
par # 2 - Not to be returned - FD

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. _____

AP. 4-16-21

80052

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Anachers 42213 David
(Surname.) (Number.) (First Name and Initials.)

Pvt. Co. B 10th Infantry.
(Rank.) (Organization.)

DATE OF BURIAL. October 19th 1913.

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

Burial plot 200 metres south, 400 metres from western extremity hill 272, Dept. Meuse. Two kilo. North of Exermont.

GRAVE NUMBER.

HOW MARKED: Name Peg? Cross? Yes

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:

~~COMM. FIEVILLE (MEUSE)~~
(C 215) 35th REGT (CORP) NE
E 300.6
N 2814

NOV 5 1913

REPORTED BY: Chaplain H.C. Stuntz.
100th Infantry

H.C. Stuntz
(Signature and Rank of Reporting Officer.)

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

1. G. R. S. Form No. 1.

Hq. G. R. S. File

2. Soldier's No. 42210

3. Anacher W.
Surname (in block letters) First Name and Initials

4. C 16th Inf.
Rank Company Regt. or Corps

5. Date of Death Cause, if known

6. B.A.C.
Date of Burial Cemetery

7. Exermont Ardennes
Town or Commune (in block letters) Department

8. 14
Grave No. Plot No. or Letter

9. Name Peg? Cross? ¹ Headboard? Bottle?
Check Method of Marking

10. Buried with Body? Attached to Grave Marker? ¹
Identification Tags

11. If name unknown and tags missing, give marks and description.

12. "A" sketch 94
Map reference, if interment is outside of cemetery

13. Give name of Chaplain or Burial Officer

GROUP No. 2 Signed Sgt. Horsley

PROV. UNIT "A" Group G.R.S. Unit.....G. R. S.

4-2-21
(Date)

FORM 115 has been compiled on the following case:-

CEMETERY NO. 1232 SECTION 23

FORM 115 Sheet No. 6

HR
(Initials)

OSP-SS
Form No. 1011.

S/2053/LML