

Tajm 2.16.26

25

JAN 21 1926

4641

FULL NAME.....ANCONA, Guiseppe

RANK...Private

SERIAL...1702671

DIVISION &amp; ORGANIZATION...77th Div. Company H, 306th Inf.

DATE OF DEATH...Aug. 28 '18

STATE FROM WHICH HE CAME...New York

MEDALS OR DECORATIONS AWARDED...None

FINAL GRAVE LOCATION.....

1

9

D

Date

Grave

Row

Block

608

Cemetery

24/292/EYS

stake used as a grave marker?

tha St. Buffalo

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

I was in comma  
We were holding a f  
east of St. Thibaut  
fire and this sold  
in front of the fun  
I personally  
rank, and identigic

on Aug. 28th, 1918.  
ak about 300 yds.  
were under shell  
all hiting directly

marked with name

REPORTED BY:

*Joseph J. Harpole*  
(Signature and Rank of Reporting Officer.)

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

Home:

1702517. Co. H. 306th Inf.  
20 Vernon St. Taunton, Mass.

Emergency address:  
Mr. Guiseppe Sirra,  
(same as above)  
G.P.

Extra lower jaw.

7. Disinterment  
supervised by

*H.S. Harpole*  
H.S. Harpole.  
2nd Lt. Q.M.C.

Approved: *M.B. Birdseye*

(Title)

8. Reburial  
supervised by

*H.S. Harpole*  
H.S. Harpole.  
2nd Lt. Q.M.C.

Approved: *M.B. Birdseye*

(Title)

WDW  
SC1

FILE

1/27/00  
K

D-5284



# GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

*Ancona (1702671) Giuseppe*  
(Surname.) (Number.) (First Name and Initials.)

*Private Co. H-306th Inf.*  
(Rank.) (Organization.)

DATE OF BURIAL *August 28, 1918*

PLACE OF BURIAL

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

*Along P.R. track 300 yards east of St. Thibault about 200 yds south of West.*

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?

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

Co. H. 306th Inf.  
77th Division.

vt. 1702671  
tha St. Buffalo

on Aug. 28th, 1918.  
ak about 300 yds.  
were under shell  
all hitting directly

marked with name

I was in comma  
We were holding a f  
east of St. Thibault  
five and this soldi  
in front of the fun  
I personally  
rank, and identigic

REPORTED BY:

*Joseph J. ...*  
(Signature and Rank of Reporting Officer.)

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

Home:

*... J. - 1st. Sgt.  
1702517. Co. H. 306th Inf.  
20 Vernon St. Taunton, Mass.*

Emergency address:  
Mr. Giuseppe Sirra,  
(same as above)  
G.P.

Extra lower jaw.

7. Disinterment supervised by

*H.S. Harpole*  
H.S. Harpole.  
2nd Lt. Q.M.C.

Approved:

*M.B. Birdseye*  
M.B. Birdseye.  
1st Lt. Q.M.C.

8. Reburial supervised by

*H.S. Harpole*  
H.S. Harpole.  
2nd Lt. Q.M.C.

Approved:

*M.B. Birdseye*  
M.B. Birdseye.  
1st Lt. Q.M.C.

WDW  
SC1

FILE

12/27/00

(Title)



Co. H. 306th Inf.  
77th Division.

ANCONA, Guiseppe - Pvt. 1702671  
Home: 88 Goetha St. Buffalo  
N.Y.

I was in command of 1st. Platoon Co. H. 306th Inf. on Aug. 28th, 1918. We were holding a front line position on a railroad track about 300 yds. east of St. Thibaut and 200 yds South of Vesle river. We were under shell fire and this soldier was hit and partly buried by a shell hitting directly in front of the funk hole which he was in.

I personally supervised his burial. His grave is marked with name rank, and identification number.

Informant: Patterson, Daniel J. - 1st. Sgt.  
1702517. Co. H. 306th Inf.  
Home: 20 Vernon St. Taunton, Mass.

Emergency address:  
Mr. Guiseppe Sirra,  
(same as above)  
G.P.

Extra lower jaw.

7. Disinterment  
supervised by

H.S. Harpole.  
2nd Lt. Q.M.C.

Approved:

M.B. Birdseye.  
1st Lt Q.M.C.

(Title)

8. Reburial  
supervised by

H.S. Harpole.  
2nd Lt Q.M.C.

Approved:

M.B. Birdseye.  
1st Lt Q.M.C.

(Title)

WDW  
SC1

FILE

122/00

R

D-5284



From (give complete location):

2. Disinterred (date):  
March 8, 1921

Gr. 85 Sec. C Pt. 2

By: Group Bosse's

Unit

Section 7 AGRS

3. Reburied (date):  
March 8, 1921

In (give complete location):

Gr. 85 Sec. C Pt. 2

Pine box &amp;

By: Group Bosse's

Unit Sec. 7 AGRS

Nature of reburial burlap.

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

U.S. uniform and wrapped in burlap. Features unrecognizable.

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

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

None

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

(a) Height (actual measurement) Impossible to determine

(b) Weight (estimated) do.

(c) Hair—Color do.

Quantity do.

Characteristics do.

(d) Hair on face—Color None

Location do.

Quantity do.

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

Impossible to determine.

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

Extra lower jaw.

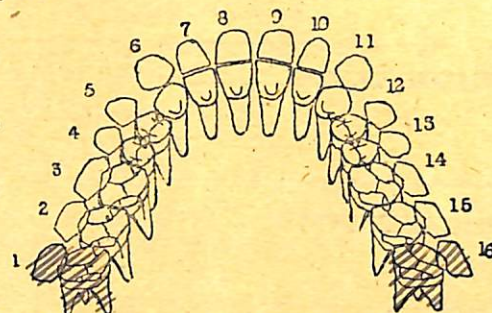
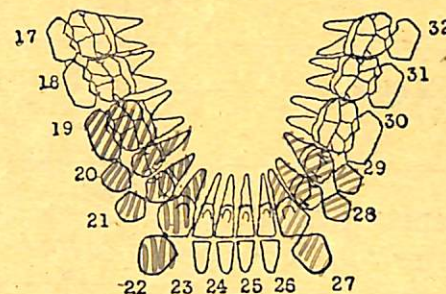


Diagram represents the mouth wide open.

1 ext.; 16 ext.; 19 broken off;  
20, 21, 22 miss.; 27, 28 & 29 miss..

7. Disinterment supervised by

H.S. Harpole  
2nd Lt. Q.M.C.

Approved: M.B. Birdseye.

1st Lt. Q.M.C.

8. Reburial supervised by

H.S. Harpole  
2nd Lt. Q.M.C.

Approved: M.B. Birdseye.

1st Lt. Q.M.C.

WDW  
SC1

FILE

1/27/00 R

D-52841



## 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 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.



## CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME <i>ANCONA</i>	<i>Anc</i>	3	<i>1 4 3</i>
BURIAL <i>Giuseppe</i>	CEMETERY <i>608</i>	1	<i>2</i>
	GRAVE <i>1</i>	2	<i>01</i>
	ROW <i>9</i>	2	<i>09</i>
	BLOCK <i>D</i>	1	<i>4</i>
STATE	<i>New York</i>	2	<i>37</i>
RANK	<i>Priv.</i>	1	<i>2</i>
DIVISION	<i>77</i>	2	<i>77</i>
ORGANIZATION	<i>306</i>	3	<i>306</i>
ARM	<i>Inf</i>	1	<i>1</i>
<i>list</i> MARITAL	<i>No</i>	1	<i>2</i> <i>per</i>
NAME <i>Ancona, Anna</i>	<i>Anc</i>	3	<i>1 4 3</i>
<i>Montanaro in</i>	STATE	2	
RESIDENCE	COUNTY	2	
<i>All rel. foreign</i>	CITY	3	
RELATION	<i>Mother</i>	1	<i>1</i>
OTHER		1	
ELIGIBILITY	<i>Foreign</i>	1	<i>4</i>
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
. TRIP	YR.	1	
ACCEPTANCE 29/514/ <i>Country</i>	<i>Italy</i>	1 2	<i>01</i>

AUDITED  
JAN 11 1933

*per*







WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C  
Alzona, Giuseppe

June 20, 1929.

Mr. Giuseppe Sirra,  
88 Goethe Street,  
Buffalo, N.Y.

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 cousin of the late Private Giuseppe Alzona, Co. H, 808th Inf. whose remains are now interred in the Oise-Aisne American Cemetery, Bazinges-et-Nogles, 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.



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Ancona, Guiseppe  
608

Aug. 27, 1929.

Mr. Guiseppe Sirra,  
88 Geothe St.,  
Buffalo, N. Y.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated June 20, 1929 making inquiry concerning the name and address of the mother and widow of the deceased service man above named. These addresses are desired with a view to ascertaining the number of mothers and widows who desire to make a pilgrimage to the cemeteries of Europe in which the remains of their sons and husbands are interred.

Will you please fill in the answers to the following questions in the space provided on this letter, and return the letter to this office in the enclosed envelope which requires no postage?

Write answers in space below

1. Is the deceased survived by a widow who has not since remarried? If so, give her complete address:

2. If he is survived by a mother, stepmother, mother thru adoption, or any other woman who stood in loco parentis to him, according to the terms of Section 4 of the enclosed Act, give her name, address, and relationship in the space opposite.

3. If survived by a widow or mother does she desire to make the pilgrimage?

For The Quartermaster General,

Very truly yours,

2 Incls.  
Act of Congress  
Envelope

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



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Ancona, Guiseppe

June 20, 1929.

Mr. Guiseppe Sirra,  
88 Goethe Street,  
Buffalo, N.Y.

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 cousin of the late Private Guiseppe Ancona, Co.H, 306th Inf. whose remains are now interred in the Oise-Aisne American Cemetery, Seringes-et-Nesles, 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.



✓ B  
OM 293 A-C  
ANGINA, Giuseppe - Pvt.

November 6, 1924

Mr. Giuseppe Sirra,  
88 Goethe St.,  
Buffalo, N.Y.

Dear Sir:

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

This American 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,

R.P. HARBOID,  
Major, Q.M.C.,

1-Incl.  
Record card.

Assistant.

RD  
FBI





# COMPILATION OF DISPOSITION OF REMAINS DATA

File # 17207

## I. LOCATION INDEX CARD:

(a) Name ANCONA, Guiseppe Ser. No. 17 02671  
 (b) Rank Pvt. Organization Co. H, 306th Inf.  
 (c) Date of death 8-28-18 (d) Cause of death K/A  
 TYP. DB  
 CKR. J

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

(a) Grave No. 85 Row - Plot 2 Sec. C TYP. DB  
 (b) Emerg. Address Guiseppe Sirra, (Cousin) 88 Goethe St. Buffalo, N.Y.

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

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

Date of receipt no card in file L.G. 11-30-20

(a) Name \_\_\_\_\_ (b) Relationship \_\_\_\_\_  
 (c) Address \_\_\_\_\_  
 (d) Remains to be brought to U. S.? \_\_\_\_\_  
 (e) To be interred in National Cemetery in U. S. at \_\_\_\_\_  
 (f) Shipping instructions upon arrival of body in U. S. \_\_\_\_\_  
 (g) Disposition instructions if not brought to U. S. \_\_\_\_\_

Examiner's Initials \_\_\_\_\_ Date \_\_\_\_\_, 1920.

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

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

Examiner's Initials L.G. Date 11-30-, 1920.

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

no request for disposition.

(a) Cancellation memos referred to? yes - als

Examiner's Initials als Date 12-1-, 1920.

COUNTRY FRANCE

CEMETERY No. 617

SHEET No. 20



MAY 16 1921

Typed by 21, Checked by MAY 16 1921, 1920.

JAN 21 1921

Cemeterial Division

Overseas Project Sub-Section

Following advice forwarded to Europe by { cable on -----, 1920  
letter on 12/27, 1920

Par #2. Not to be returned (P)

## CORRECTIONS

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

X. SUSPENSION REMARKS:



To be prepared in triplicate.

DATE Jan 26th. 1922.

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

DISINTERMENT mg

COMPARATIVE REPORT

Records of G.R.S. Headquarters.

Discrepancy found upon exhumation of body

1. Name ANCONA, Guiseppe  
 2. No. 1702671  
 3. Rank Pvt.  
 4. Org. Co.H. 306th Inf/  
 5. D.D. Aug. 28th 1918  
 6. C.D. KIA

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

Discrepancy found upon disinterment

7. Grave No. 85 Sec. C  
 8. Plot 2 Row \_\_\_\_\_  
 9. \_\_\_\_\_

15. Grave No. \_\_\_\_\_ Sec. \_\_\_\_\_  
 16. Plot \_\_\_\_\_ Row \_\_\_\_\_  
 17. No disp.

18. Cemetery Amer.  
 20. Dept. or County Marne  
 22. G.R.S. Hdqrs. Code No. 617

19. Commune or town Fismes  
 21. Country France

23. Disinterred (Date) 1-26-22.  
 24. Inscription on grave marker:

By Roy M. Perry

Name Guiseppe Ancona  
 Rank Pvt.

Serial No. 1702671  
 Organization Co.H. 306th Inf.

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

R. L. de Montezon  
 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).

Bottle record agrees with form27. Condition of body Entirely decomposed skeleton disarticulated.28. Nature of burial Woodenbox and burlap.29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? None30. Body prepared and placed in casket: Date 126-22. By Roy M. Perry31. Casket sealed by Roy M. Perry

Signature of Embalmer, (Supervisor

Roy M. Perry

AUDITED BY  
 1025-28-11



SHIPMENT. (Show actual marking of box.) Box No. C-22922

32. Designation of body:

Name Guiseppe ANCONA Serial No. 1702671

Rank Pvt. Organization Co.H. 306th Inf.

33. Consigned to:

Name of Permanent Cemetery Oise-Aisne Amer. #608, Seringes-et-Nesles, Aisne

34. Casket boxed and marked (Date) 1-26-22 By Roy M. Perry

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. Richards

36. Remarks R. Richards, 1st. Lt. QMC.

None.

37. Shipped from point of Operation: (Date) \_\_\_\_\_

To point of Concentration \_\_\_\_\_

(Name)

Convoyer \_\_\_\_\_ Signature Shipping Officer \_\_\_\_\_

38. Received at Railhead or Point of Concentration: Date \_\_\_\_\_

By G.R.S. Representative \_\_\_\_\_

39. Shipped from Railhead or Point of Concentration: Date \_\_\_\_\_

To Permanent Cemetery Oise Aisne Amer. Cty. #608 Seringes et Nesles, Aisne

Convoyer \_\_\_\_\_ Signature Shipping Officer R. Richards

40. Received: Date JAN 28 1922 R. Richards, 1st. Lt. QMC.

G.R.S. Representative R. W. Woods

41. Reinterred, Aug. 21, 1922, Oise-Aisne Cem. 608, Seringes et Nesles (Aisne)  
(Date)

42. Grave No. 1 Section ----

43. Plot BLOCK D Row 9

G.R.S. Representative

W.D. Cleary  
Lt., Chaplain, USA.

tab



## REPORT OF DISINTERMENT AND REBURIAL

Place Fismes Cty. 617.Date Jan. 26, 19221. REMAINS OF Ancona, Guiseppe SERIAL NUMBER 1702671RANK Pvt. ORGANIZATION Co. H. 306th Inf.

2. Disinterred (date) :

From (give complete location) :

Jan. 26, 1922. Gr. 85. Sec. C. Plot 4. Cty. 617.By : Group 5 Unit F.S. #7.3. Reburied (date) : Aug. 21, 1922In (give complete location) : Gr. 1, Block D,Row 9, Oise-Aisne Cem. 608, Seringes et Nesles (Aisne)By : Group re-burial group Unit ----- Nature of reburial Lined  
casket

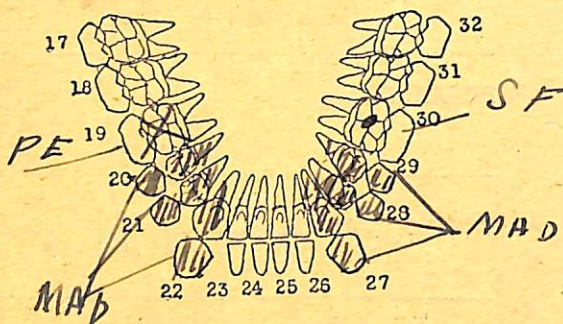
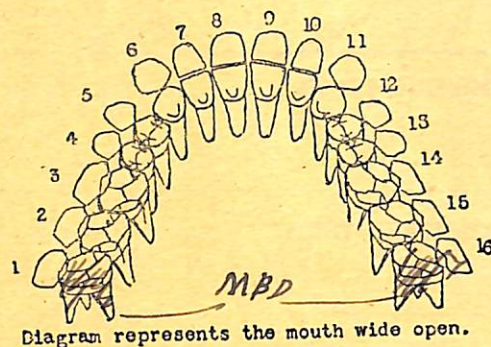
4. Report as to nature of original burial and condition of body upon disinterment :

Entirely decomposed. Features unrecognizable. Wooden box and burlap.5. (a) Identification tags : Buried with body ? No On grave marker ? No

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

Bottle record agrees with Form.

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

(a) Height (actual measurement) Imp. to Det.(b) Weight (estimated) -----(c) Hair—Color -----Quantity -----Characteristics -----(d) Hair on face—Color -----Location -----Quantity -----(e) Permanent marks on body (old scars, peculiarities, or missing parts) None visible(f) Wounds or missing parts (received at time of casualty) -----7. Disinterment supervised by Roy M. PerryApproved : R. Richards,  
(Title) 1st Lieut. OMC.8. Reburial supervised by L.D. HaysApproved : W.D. Cleary  
(Title) Lt., Chaplain, USA.



## 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 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.



File # 17207

INDEX CARD.  
ANCONA, Giuseppe

17 02671

Ser. No.

Co. H, 306th Inf.

DB

(b) Rank

## Organization

TYP

8-26-18

Cause of death

K/A

(c) Date of death

death

## DB

(a) Grave No

Row

Plot.

Debt

TYP

Row Plot Seat Typ  
Guisepppe Sirra (Cousin) 86 Goethe St. Buffalo, N.Y.

(b) Emerg. Address

CKR

also Card - No Card in File.

GRS File Corres- No request for  
disposition. 118

1/8/21-P.

## 22192

(Letter of transmittal on ~~1/2/28~~ 1928)

Ex #2. Not to be returned (P)

JAN 18 1921

192

Date of  
and Source

Relationship  
and name

Desires

Action taken

5-16

192 /

COUNTRY

CEMETERY NO.

SHEET NO.

G. R. S. FORM 115-A  
August 1920

FRANCE

617

20

S-666 MB



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY  
CEMETERIAL DIVISION  
~~WASHINGTON~~  
Hoboken, N.J.

FROM: Chief, Cemeterial Division, O. Q. M. G.

JAN 27 1921

To: Mr. Giuseppe Sirra, 80 Goethe St., Buffalo, N.Y.

SUBJECT: Remains of Pvt. Giuseppe Ancona, Ser. No. 1762571, Co. A, 305th Inf.

The records of this office show that you have ~~requested that the body of the above named~~  
~~made no request for the disposition of his remains.~~

If these are not the correct instructions, please correct them. Make corrections on reverse side of this sheet.

The nearest next of kin may choose between, (1) return of the body to any address in the United States; (2) interment in the National Cemetery, Arlington, Va., or any other National Cemetery; or (3) body to remain in Europe.

By authority of the Quartermaster General.

CHARLES C. PIERCE,  
Lieut. Colonel, U. S. Army.

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 or not these relatives are STILL LIVING.

Was soldier married? .....

NAME OF—	NO. AND STREET.	TOWN.	STATE.
Soldier's widow .....			
Soldier's children. { 1 .....			
(Name oldest first.) { 2 .....			
{ 3 .....			
Father .....			
Mother .....			
Brothers. { 1 .....			
(Name oldest first.) { 2 .....			
{ 3 .....			
Sisters. { 1 .....			
(Name oldest first.) { 2 .....			
{ 3 .....			

Date .....

Signature .....

Address .....

Relationship .....



I, the undersigned, am the \_\_\_\_\_ and nearest living next of kin of the within-named  
 (Relationship.)  
 soldier, and desire the following disposition of his remains, viz:  
 (Strike out all except the one showing the disposition desired.)

RECEIVED BY  
MAIL UNIT

MAY 16 1921

1. As stated on first page of this sheet.

2. To be returned to the U. S. and shipped to \_\_\_\_\_  
 (Name.)

Cemeterial Division

Overseas Project Sub-Section

(R. R. station.)

(State.)

3. To be returned to the U. S. and buried in \_\_\_\_\_ National Cemetery.

4. To remain in Europe, for burial in a permanent American Cemetery.

Signature \_\_\_\_\_

### INSTRUCTIONS FOR FILLING OUT.

1. If definite instructions for the disposition of a body are not received from the next of kin within two weeks of its arrival at New York, burial will be made without further notice in the World War Section of Arlington National Cemetery.

2. The transfer of bodies will be made ENTIRELY at Government expense.

3. This paper MUST BE SIGNED BY THE PERSON WHO IS THE NEXT of kin IN THE ORDER shown in the square on the other side of this sheet.

4. This paper must be returned showing the name and address of each of the nearest next of kin in the spaces provided therefor on the other side of this sheet.

5. If there are minor children of the deceased soldier and no widow, the LEGALLY APPOINTED GUARDIAN of the children should ascertain their wishes and act for them in this matter.

6. If YOU are not the nearest next of kin, please ask the nearest next of kin, if living near you, to fill out this paper.

7. If YOU are not the nearest living next of kin and do not know who or where the nearest relatives are, please fill out this paper AT ONCE and mail to this office.

8. You are requested to return this paper AT ONCE in order to avoid delay in the case of this body.

9. Use the inclosed envelope—pay no postage.

NOTE.—INSTRUCTIONS FOR THE DISPOSITION OF REMAINS will be issued by this office upon the properly executed authority of the legal next of kin in each case. The widow is the first person having disposition of the remains of her husband. Should there be no widow or children, the father and, in turn (upon his decease), the mother, is the proper authority. The brothers, in order of seniority, and then the sisters in order of seniority, if there are no brothers, rank next in authority to decide. Under an opinion rendered by the Judge Advocate General of the Army, if a widow has remarried she forfeits her right, and the next of kin as given above will make decision.



Address Reply To  
QUARTERMASTER GENERAL  
DIRECTOR OF PURCHASE & STORAGE  
Munitions Building

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

Information requested of A.G.O.

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
DIRECTOR OF PURCHASE AND STORAGE  
WASHINGTON

Date 6-7-20

File No. Registration.

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

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

Subject: Information required for G.R.S.

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

- |                                  |                      |
|----------------------------------|----------------------|
| a. Surname Hucona                | f. Date of death     |
| b. Christian name J.             | g. Cause of death    |
| c. Serial number                 | h. Authority (C.C.#) |
| d. Organization Co. H 306th Inf. | i. Emergency address |
| e. Rank Pvt.                     | j. Relationship      |

BODY DESCRIPTION

(See page #2 of the Service Record)

- a. Age at 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 CHART

(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.,  
Director of Purchase & Storage.

By:

H. J. CONNER,  
Captain, Q.M.C.

REVIEWED  
OSP SS.7



# GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

ANCONA 17026 Guisepppe  
(Surname). (Number). (First Name and Initials).

Pvt. Co H 306th Inf.  
(Rank). (Organization).

PLACE OF DEATH:

CAUSE OF DEATH: Shell Fire

DATE OF BURIAL: Aug. 28th 1918

PLACE OF BURIAL:

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

Buried alongside of Railroad track  
300 yds East of St. Thibault

GRAVE NUMBER:

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?

St Thibault (Ancon)

73 3356 Guiseppi Sera  
NEAREST RELATIVE:

ADDRESS: 88 E. 10th St. Buffalo, N.Y.

RELATIONSHIP: Cousin

REPORTED BY:

REVIEWED  
OSP SS.

(Signature and Rank of Reporting Officer).

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



# GRAVE LOCATION BLANK

LOCATION THE GRAVE OF

(Surname.) (Number.) (First Name and Initials.)

(Rank.) (Organization.)

DATE OF BURIAL

PLACE OF BURIAL

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

GRAVE NUMBER

HOW MARKED: Name Peg? Cross? *yes*

IDENTIFICATION TAGS: *CMME, St. J. Thibault (Aisne), (C-73) SGT. 337. WORD SE 201.2*

Was one buried with body? *yes* *(N. 286.37)*

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

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

*Com. C. 73 St. J. Thibault  
E. 201, 207, 286.37 Aisne  
Map 33 S. E.*

REPORTED BY:

(Signature and Rank of Reporting Officer.)

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

22 SEP 1918



G.R.S. Form No. 8: Central Records Liaison.

Memo. For: G.R.S. representative, C.R.O.

Subject: Information required for G.R.S.

1. Items checked are to be completed:

- ( ) Surname: ~~Hucana~~ *Ancona*  
 ( ) Number: *1702671* *OK*  
 ( ) First Name: *Giuseppe*  
 ( ) Rank: *Pvt* *OK*  
 ( ) Company: *H* *OK*  
 ( ) Organization: *306th Infantry* *OK*  
 ( ) Date of Death: *Aug 28, 1918*  
 ( ) Cause: *shell fire, in line duty.*  
 ( ) Place: *A. E. F. (station not given)*

Location of hospital:

(OVER)

- ( ) Number " "  
 ( ) Class " "  
 ( ) Relative: *Giuseppe Serra*  
 ( ) Relationship: *cousin*  
 ( ) Address: *88 Goethe St., Buffalo, N.Y.*  
 ( ) Authority:  
 Cablegram No.: *254* *9/16/18*  
 Telegram from:

dated:

- ( ) Reported to Washington:  
 C.C. Nos:

(Underscore the "official" C.C.)

- ( ) Remarks:  
 ( ) Show present status on reverse side.

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

Initials of Reporter:

REVIEWED

*Pennesse*  
*Feb 3/20*



Buried

Commune of Ville-Savoie, Aisne.

Reported by G R S