

G.R.S. Form #114 B

2717

JAN 7 - 1926

DATE

1. NAME ANDERSON, Carl *sol big* SERIAL No. 81496  
 RANK Pvt. *1/1* ORGANIZATION Military Specialist Co. *1st Depot*  
 & DIVISION Amer. Cty. NOYERS (Loir et Cher) *Division*  
 GRAVE LOCATION Amer. Cty. NOYERS (Loir et Cher) CTY. NAME NOYERS NUMBER 319

283

GRAVE

ROW

PLOT

2. ORIGINAL ~~BATTLE AREA~~ GRAVE LOCATION 283 Noyers Loir et Cher  
 As shown by cemetery directory GRAVE COMMUNE DEPT.  
 Hq.AGRS., Dec.9,1919 .  
 COORDINATES Not given

Reburied

CONCENTRATED TO July 15, 1920

283

DATE

GRAVE

ROW

PLOT

American Cty. Noyers (Loir et Cher)

319

CEMETERY

CTY. NUMBER

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

Body badly decomposed. Ident. tag corroded and fell to pieces. Impossible to identify body. Per GRS Form 16 signed by M.S.Crissy, Major, CAC.USA. July 15,1920.

SUBSEQUENT REBURIALS Nothing of record

DATE OF DEATH Oct. 13, '18 DATE GRAVE ROW PLOT CEMETERY

STATE FROM WHICH HE CAME Montana DATE GRAVE ROW PLOT CEMETERY

MEDALS OR DECORATIONS AWARDED None DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR Stanley J. Grogan  
STANLEY J. GROGAN, Capt. Inf. USA.

3. FINAL GRAVE LOCATION 9/11/22 11 39 Block B.  
DATE GRAVE ROW PLOT

Oise-Aisne, Amer. #608 Seringes-et-Nesles (Aisne)

CEMETERY

AUDITED BY  
gr.

K 11  
1/3

Rec'd  
4 M 12 1925

GRS  
3/10/25

INSTRUCTIONS FOR PREPARATION OF FORM 114 B

1. Forms 114-B are to be prepared by Registration Branch in quadruplicate, three copies to be forwarded to Area Supervisor who will accomplish paragraph 2 and return all three copies to Headquarters, American Graves Registration Service.

2. Paragraphs 1 and 3 will be accomplished by Registration Branch, Headquarters, American Graves Registration Service, Q.M.C., in Europe.

3. Paragraph 2 will be accomplished by Area Supervisor from data on file in his office.

4. If data is entered on Form 114-B from Form 1, Form I6, Form 1-A or Form 16-A, statement to this effect will be made on Form 114-B STATING WHICH G.R.S. form data is taken from. If data concerning co-ordinates is approximate and NOT accurate, statement to this effect will be made on these forms.



GF  
Sum  
LEAC  
CAL  
D

**GRAVE LOCATION BLANK**

LOCATION OF THE GRAVE OF

*R*  
*Anderson 81796 Carl*  
(Surname). (Number). (First Name and Initials).

*Pvt. Military Specialists*  
(Rank). (Organization).

*Montreuil, France*  
PLACE OF DEATH: *Infantry # 2*

CAUSE OF DEATH: *Lobed*

DATE OF BURIAL: *Oct. 17, 1918*

PLACE OF DEATH: *Mons, France*

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

*American Cemetery*  
*Mons, Loire at Cher*

GRAVE NUMBER: *2 F 4*

HOW MARKED: Name Peg?  Cross?

Headboard?  Bottle?

IDENTIFICATION TAGS:

Was one buried with body?

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

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

.....

NEAREST RELATIVE: *H. D. Anderson*

ADDRESS: *717 1/2 # 10th Ave. Minn.*

RELATIONSHIP: *Father*

REPORTED BY: *C. E. Ireland*

*Chap. 16th Inf.*  
(Signature and Rank of Reporting Officer).

portion to be forwarded to Central Records Office, A. G. O., A. E. F.

CODE SLIP

HEADING	SUB-HEADING	NO. OF COCLS	CODE
NAME	Anderson	3	1 0 4
BURIED	Cemetary	1	2
	Grave	1	11
	ROW	2	3 4
	Block	1	2
STATE	Montana	2	3 1
RANK	Pvt 1st	1	2
DIVISION	Misc.	2	6 8
ORGANIZATION	XXX	3	XXX
ARM	X	1	X
PO MARITAL	Father	1	2
NAME	Anderson	3	
RESIDENCE	Haanel	2	
	Vet # 2	2	
	Peterson, Minn	3	
RELATION	Mother	1	1
OTHER		1	
ELIGIBILITY	head	1	6
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF TRIP	MO.	1	
	YR.	1	
ACCEPTANCE		1	

**AUDITED**

MAR 30 1932

*af*

*me*

*not*

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Anderson, Carl 608 F

July 7, 1930

Mr. Haavel Anderson  
Route 2,  
Peterson, Minn.

Dear Sir:

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

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

1. Is the deceased survived by a mother?

No

If so, give her name and address:

Mother deceased

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

No

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?

No

If so, give her name and address:

For The Quartermaster General

Very truly yours,

Enclosures:  
Envelope  
Act  
Amendment

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



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

DATE February 10 1930

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Anderson Carl	Pvt 1 cl	81496	Mil Spec Co	Oct 13 1918

STATE	MONTANA	CTY. NO.	608	GRAVE	11	ROW	34	BLOCK	B
-------	---------	----------	-----	-------	----	-----	----	-------	---

	<u>Check relationship</u>	<u>Living</u>	<u>- Deceased</u>	
	MOTHER	:	:	✓
	STEPMOTHER (For the year prior to commencement of service)	:	:	
NAME	MOTHER THRU ADOPTION	:	:	(7)
AND	(For the year prior to commencement of service)	:	:	
ADDRESS	MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	:	:	<u>Harvel Anderson</u>
	WIDOW (Who has not remarried)	:	:	<u>Rt-2</u>
		:	:	<u>Peterson</u>
		:	:	<u>Mein-</u>

*Single man*

Veterans Bureau Claim Number 29/156

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C  
Anderson, Carl

June 20, 1929.

Mr. Harold Anderson,  
R. F.D. #2,  
Peterson, Minn.

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress approved March 2, 1929, entitled an Act "To enable the mothers and widows of the deceased soldiers, sailors and marines of the American forces now interred in the cemeteries of Europe to make a pilgrimage to these cemeteries".

The records of this office show that you are the father of the late Private First class Carl Anderson, Military Specialist Co., 1st Depot Division, 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.

O. Q. M. G.  
MAIL & RECORD BRANCH

File 293 - Anderson, Carl (608)

Subject Ret. - Mil. Spec. - 1<sup>st</sup> Depot Div.

29/243

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Anderson, Carl 608 F

July 7, 1930

Mr. Havel Anderson  
Route 2,  
Peterson, Minn.

Dear Sir:

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

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

1. Is the deceased survived by a mother?

If so, give her name and address:

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

If so, give her name and address:

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

If so, give her name and address:

For The Quartermaster General,

Very truly yours,

Enclosures:  
Envelope  
Act  
Amendment

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

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Anderson, Carl  
608

Aug. 27, 1929.

Mr. Haavel Anderson,  
HFD#2,  
Peterson, Minn.

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

Anderson, Carl

June 20, 1929.

Mr. Haavel Anderson,  
R. F.D. #2,  
Peterson, Minn.

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress approved March 2, 1929, entitled an Act "To enable the mothers and widows of the deceased soldiers, sailors and marines of the American forces now interred in the cemeteries of Europe to make a pilgrimage to these cemeteries".

The records of this office show that you are the father of the late Private first class Carl Anderson, Military Specialist Co., 1st Depot Division, 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.

U.S. M. G. M. S. DIV.  
29 JUN 23 PM 3 41  
DISPATCH

QM 293 A-C

April 25, 1924

ANDERSON, Carl Pvt. 1/01.

Mr. Haavel Anderson,  
R.F.D. #2,  
Peterson, Minn.

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. HARBOLD  
Assistant.

MFK  
7/2

1-Incl.  
Record card.



COMPILATION OF DISPOSITION OF REMAINS DATA

File #34723

1. LOCATION INDEX CARD:

(a) Name ANDERSON, Carl Ser. No. 81496 )  
 (b) Rank Pvt. 1st Organization Military Specialist, 1st Depot Division ) TYP. HDP  
 (c) Date of death 10-13-18 of death Lobar Pneumonia ) CKR. A.A.

11. Registration Card:- (Check Reg. Card Inf. against Loc. Ind. Inf.)

(a) Grave No. 284 Row 11 Plot ---- Sect. ---- ) TYP. HDP  
 (b) Emerg. Address H. O. Anderson (father), RFD #2, Peterson, Minn.

111. Files of soldiers dying from contagious diseases; No Card ) CKR. A.A.

IV. A.G.O. DISPOSITION CARD:

(a) Name No card in file (b) Relationship JK 5-13-20  
 (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. \_\_\_\_\_

SEE SUSPENSION REMARKS

(g) Disposition instructions if not brought to U.S., \_\_\_\_\_

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

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

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

Examiner's Initials P.D. Date 5-13-1920

VI. G.R.S. Files - Correspondence - shows as follows: \_\_\_\_\_

(a) Cancellation memos referred to? Yes - P.D.

Examiner's Initials P.D. Date 5-13-1920

1-16-22  
 Concentration Camp - Aachen  
 608  
 7/6/22

OK  
Pm  
11-11

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

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

VIII. FINAL ACTION:

Following advice forwarded to Europe by- { cable on \_\_\_\_\_, 1920  
letter on 6/28, 1920

*Not to be returned (MacB)*

IX.

CORRECTIONS

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

X. SUSPENSION REMARKS:

*Form 170 7-6-20 Haavel  
Anderson, father, nearest of kin,  
Peterson, Minn., requests body remain  
in France. G.C. 7-13-20  
F.S. 7/13/20*

COMPILATION OF DISPOSITION OF REMAINS DATA

File--34723

Form 115  
See 7/6/20  
att

I. LOCATION INDEX CARD:

(a) Name	Anderson, Carl	Ser. No.	81496	} TYP	HDP
(b) Rank	Pvt.	Organization	Military Specialist Co., <i>1st Depot Div</i>		AW
(c) Date of death	10-13-18	Cause of death	Lobar Pneumonia		LM <i>24</i>

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

(a) Grave No.	<i>283</i> 284	Row	11	Plot	---	sect.	---	TYP	BML
(b) Emerg. Address	H. O. Anderson (father) RFD #2, Peterson, Minn.								

III. Files of soldiers dying from contagious diseases *no card* CNR AW

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 of 6-28 ..... 1920  
.....  
Not to be returned MacB

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
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.....

.....

.....

.....

.....

VIII. Form 115 received from G.R.S. Hoboken, N.J. 192

COUNTRY France

CEMETERY NO. 319

SHEET NO. 5

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

gr.

G.R.S. FORM #114-A.

STATION St. Aignan(L-et-C)

To be prepared in triplicate.

DATE Oct 24th 1921

REPORT OF DISINTERMENT, PREPARATION, SHIPMENT AND REBURIAL OF BODY

DISINTERMENT

COMPARATIVE REPORT

Records of G.R.S. Headquarters.

Discrepancy found upon exhumation of body

1. Name ANDERSON, Carl

10. Name

2. No. 81496

11. No.

3. Rank Pvt. 1/2

12. Rank

4. Org. Military Specialist Co.

13. Org.

5. D.D. 10.13.-1918

14. (a) D.D.

6. C.D. Lobar pneumonia

(b) D.B. none

Discrepancy found upon disinterment

7. Grave No. 283 Sec.

15. Grave No. Sec.

8. Plot Row

16. Plot Row

9.

17. none

18. Cemetery American Cty.

19. Commune or town Noyers

20. Dept. or County Loir et Cher

21. Country France

22. G.R.S. Hdqrs. Code No. 319

23. Disinterred (Date) Oct 24th 1921

By J.F. Meyer

24. Inscription on grave marker:

Name Carl Anderson

Serial No. -----

Rank Pvt

Organization Military Specialist Co.

Died Oct 13-18

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

R.L. de Montozon  
Signature Junior Technical Assistant  
R.L. de Montozon

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).

Previous reburial. Metallic strip on body reads "Carl Anderson 81496"

27. Condition of body badly decomposed, features unrecognizable.

28. Nature of burial wooden box 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 Oct 24th 1921 By J.F. Meyer

31. Casket sealed by J.F. Meyer

Signature of Embalmer, (Supervisor) J.F. Meyer

AUDITED BY  
1125724  
Sub

Joseph F Meyer

SHIPMENT. (Show actual marking of box.) Box No **C-12388**

32. Designation of body:

143 Name **ANDERSON, Carl** Serial No. **81496**  
Rank **Pvt.** Organization **Military Specialist Co.**

33. Consigned to:

Name of Permanent Cemetery **Oise-Aisne Amer. Cty. 608, Seringes-et-Nesles (Aisne)**  
~~Aisne-Marne Amer. Cty. #1764, BELLEAU (Aisne)~~

34. Casket boxed and marked (Date) **Oct 24th 1921** By **J.F. Meyer**

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 *S.H. Hunsicker*  
**S.H. Hunsicker, 1st Lt. QMC**

36. Remarks **none**

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

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

Convoyer \_\_\_\_\_ (Name) \_\_\_\_\_  
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 **Nov 10th 1921**

To Permanent Cemetery **Oise-Aisne Amer. Cty. 608, Seringes-et-Nesles (Aisne)**  
~~Aisne-Marne Amer. Cty. #1764, BELLEAU (Aisne)~~

Convoyer **H.F. Tebeau** (Name) \_\_\_\_\_  
Signature Shipping Officer *G.A. Ross*  
**G.A. Ross, Capt. QMC**

40. Received: Date **16 NOV 1921**

G.R.S. Representative **G. F. WAUGH**

41. Reinterred **9/11/22, Oise-Aisne Cem. 608, Seringes-et-Nesles, (Aisne)**

42. Grave No. **11, BLK. B** (Date) \_\_\_\_\_  
Section \_\_\_\_\_

43. Plot \_\_\_\_\_ Row **39**

G.R.S. Representative *G. Blake*  
**G. Blake, Capt. QMC**

Place Noyers L-et-C

# REPORT OF DISINTERMENT AND REBURIAL

Date October 24, 1921

1. REMAINS OF Anderson, Carl SERIAL NUMBER 81496  
RANK Pvt. 1/ef ORGANIZATION Military Specialist Co. 1st Depot

2. Disinterred (date): October 24, 1921. From (give complete location): Gr. 283 Cemetery 319  
By: Group 1 9/11/22 Unit Sec 5 Gr. 11, Blk. B. Row 39.

3. ~~Place of~~ Dis-Place: Cem. 608, Seringes-et-Nesles, (Aisne):  
reburial group metal lined casket.  
By: Group \_\_\_\_\_ Unit \_\_\_\_\_ Nature of reburial \_\_\_\_\_

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

5. (a) Identification tags: Buried with body? no On grave marker? yes  
(b) Other means of identification found upon disinterment, and general remarks:  
Previous burial metallic strip on body was Carl Anderson 81496

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

(a) Height (actual measurement) impossible to determine

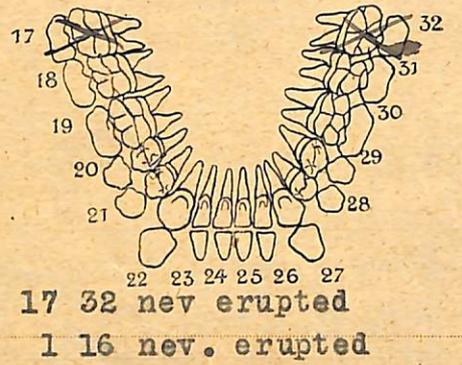
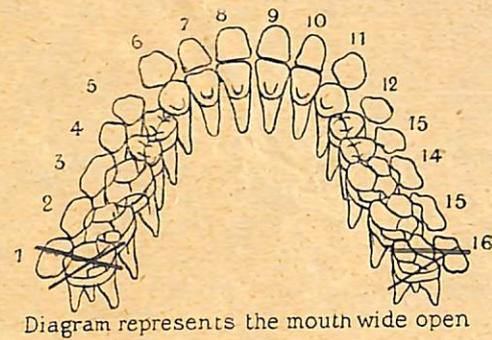
(b) Weight (estimated) -do

(c) Hair—Color -do  
Quantity small quantity  
Characteristics straight

(d) Hair on face—Color impossible to det  
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)  
none visible



R L de Mantozon

7. Disinterment supervised by Joseph F Meyer  
J. F Meyer, Supervising Emb

Approved: S H Hunsicker  
(Title) 1st Lieut OMC

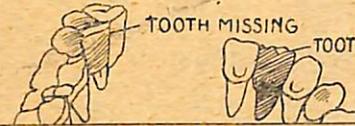
8. Reburial supervised by L.D. Hays

Approved: C.J. Blake  
Capt. OMC  
(Title) gs

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

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

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

<b>MISSING TEETH</b>	All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus:	 <p style="text-align: center;">TOOTH MISSING      TOOTH MISSING</p>
<b>CROWNED TEETH</b>	Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus:	 <p style="text-align: center;">GOLD CROWN      PORCELAIN CROWN</p>
<b>BRIDGE WORK</b>	Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge) thus:	 <p style="text-align: center;">GOLD AND PORCELAIN BRIDGE      GOLD BRIDGE</p>
<b>FILLINGS</b>	Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus:	 <p style="text-align: center;">SILVER FILLING      GOLD FILLING GOLD FILLING      GOLD FILLING</p>
<b>CARIES (CAVITIES)</b>	Outline location and size of cavity, shade in thus:	 <p style="text-align: center;">CAVITY DECAYED      DECAYED</p>
<b>DENTURES (PLATES)</b>	Draw diagram of relative size and shape of plate block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp"	

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.

34723

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

Date 1-16-1924

SUBJECT: Information required for Cemeterial Division.

TO: The Adjutant General of the Army, World War Division, Washington, D.C.

1. It is requested that the items checked below be completed:

- a. Surname Anderson ✓
- f. Date of death K/A 10/13/18
- b. Christian name Carl A. No initials ✓
- g. Cause of death Acute lobar pneumonia
- c. Serial number 81496
- h. Authority Cable 290 10/23/18
- d. Organization Co. F. 163rd Inf.
- i. Emergency Address Haavel Anderson
- e. Rank Pvt. 1/cl ✓
- j. Relationship R+2 Peterson, Minn
- k. Relationship Father

193 Quaker, Carl

BODY DESCRIPTION:

- a. Date of enlistment March 30/17
- d. Height 66 1/2 inches
- b. Age at enlistment 24 yrs
- e. Weight Not of record
- c. Color of hair Light Brown
- f. Fractures or breaks None noted

DENTAL CHARTS: Not of record

Mobilization.

Local Board.

8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8	8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8
Upper right	Upper left	Upper right	Upper left
8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8	8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8
Lower right	Lower left	Lower right	Lower left

OTM 319

Gene Ruth, Room 2111

Was he Duesch?

Robert C. Davis  
The Adjutant General  
per Bd B 1/22/24

For the Quartermaster General:

R.L. Foster,  
Assistant.



REC'D WORLD WAR DIV.  
8 JAN 18 1924

WAR DEPARTMENT  
OFFICE THE QUARTERMASTER GENERAL OF THE ARMY  
GRAVES REGISTRATION SERVICE  
WASHINGTON

319-5

MAY 20 1920

JUN 5 1920

FROM: Chief, Graves Registration Service, Q.M.C.  
TO: Mr. H.O. Anderson. R.F.D. #2, Peterson, Minn.  
SUBJECT: Remains of Pvt. Carl Anderson.

Rush Answer

Remains in France

The records of this office show that you have ~~requested that the~~  
~~body be~~ Made no Request.

Request made (3) Remain in France.

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

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

By authority of the Quartermaster General:

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

Noted on Form No. 116

Date 7-13-20 JAC

The transfer of bodies will be made entirely at government expense.

NAME OF	NO. & STREET	TOWN	STATE
Soldier's Widow	<i>None</i>		
Soldier's Children	1.		
(Name oldest first)	2.		
	3.	<i>None</i>	
Father	Haavel Anderson,	Peterson,	Minn.
Mother			
Brothers	1. Andrew Anderson,	Belmont,	Montana.
(Name oldest first)	2. Gynter <del>Anderson</del> , Anderson,	Peterson,	Minn.
	Howard	"	"
Sisters	Bertha Anderson,	Fargo,	N.D.

Date 5/27/20

Signature Haavel Anderson

Address Peterson, Minn

Relationship Father

Note:- Instructions on the reverse side of this sheet should be carefully read before filling out this paper.

(OVER)

JEK

made expense

The transfer of bodies will be made  
entirely at Government expense.



INSTRUCTIONS FOR FILLING OUT

1. This paper MUST be signed by the person who is the NEXT of kin in the order shown in the square on other side of this sheet.
2. This paper must be returned showing the name and address of each of the nearest living relatives in the spaces provided therefor on the other side of this sheet.
3. 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.
4. If YOU are not the nearest relative, please ask the nearest relative, if living near you, to fill out this paper.
5. If YOU are not the nearest living relative and do not know who or where the nearest relatives are, please fill out this paper AT ONCE and mail to this office.
6. You are requested to return this paper AT ONCE in order to avoid delay in the case of this body.
7. Use the enclosed envelope - pay no postage.

Verify Organization

Anderson, 81496, Carl

Pvt. Military Specialist or Military Specialist Co.

AGO report.1/30/24.

Pvt. 1/cl. ~~Military~~ Specialist Co., 1st Depot Div.

BW

*The American Red Cross*

*sends you the photograph of the grave of*

*this American Soldier*

*who gave his life for his country*

34723

# GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Anderson #1496 Carl  
(Surname) (Number) (First Name and Initials)

1st Lt Military Specialists Co  
(Rank) (Organization)

PLACE OF DEATH: Montichard, France  
Infirmary # 2

CAUSE OF DEATH: Lobar Pneumonia

DATE OF BURIAL: Oct. 17, 1918

PLACE OF BURIAL: Nogers France

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

American Cemetery  
Nogers Loire et Cher

GRAVE NUMBER: ~~284~~ 283

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:

319

NEAREST RELATIVE: H.D. Anderson

ADDRESS: N.F.D. # 2, Peterson, Minn.

RELATIONSHIP: Father

REPORTED BY: C.C. [Signature]

(Signature and Rank of Reporting Officer)



74 OCT 1918

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

34723

# GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

*Anderson* 81496 *Carl*  
(Surname). (Number). (First Name and Initials).

*Pvt.* **FILE** *Specialists*  
(Rank). (Organization).

PLACE OF DEATH: *Montreuil France* # *2*

CAUSE OF DEATH: *Lobar Pneumonia*

DATE OF BURIAL: *Oct. 14, 1918*

PLACE OF BURIAL: *Noyers France*

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

*American Cemetery*

*Noyers Loire et Cher*

GRAVE NUMBER: ~~284~~ *283*

HOW MARKED: Name Peg? *311* Cross? *Yes*

Headboard? *of bodies* 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:

NEAREST RELATIVE: *H. D. Anderson*

ADDRESS: *P.O. #2 Petersen, Minn.*

RELATIONSHIP: *Father*

REPORTED BY: *C. E. Ireland*

*C. Ireland*  
(Signature and Rank of Reporting Officer).

**REVIEWED  
OSP SS.**

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE, Q.M.C. IN EUROPE  
8 Avenue D'Iena, Paris.

July 2nd, 1920.

FILE NO. 293 Anderson, Carl

FROM : Chief

TO : Quartermaster General, Munitions Building, Washington, D.C.

SUBJECT: Change of Inscription.

1. Reference your letter File No. 34723 Registration dated June 1st, 1920 and received by these headquarters June 18th, 1920, concerning change of inscription on the cross marking the grave of Carl Anderson, Pvt., Military Specialist, it is estimated that a reply will be forwarded your office within twenty-five days.

*RHR*  
RHR/

*H. F. Rethers*  
H. F. RETHERS  
Lieut. Col., QMC

293.8 - 34723  
Anderson Carl

REVIEWED  
OSP SS.

H E A D Q U A R T E R S  
AMERICAN GRAVES REGISTRATION SERVICE., Q.M.C. IN EUROPE  
8, avenue d'Iena, Paris

June 28th, 1920

File No.293, Anderson, Carl

FROM : Chief  
TO : Quartermaster General, Munitions Building, Washington, D.C.  
SUBJECT : Change of Inscription

RECEIVED

1. Referring to your letter (G.R.S. Form #122) dated June 1st, 1920, concerning change of inscription over the grave of Private Carl Anderson, #81496, Military Specialist., it is estimated that a reply will be forwarded your office within 20 days.

RECEIVED  
JUN 29 1920  
RFR/1b

*H. F. Rethers*  
H. F. RETHERS  
Lieut.Col., QMC

293.8 Com  
34723  
Anderson, Carl

RECEIVED  
QMC

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE, Q.M.C. IN EUROPE  
8 Avenue d'Iena, Paris.

FILE.  
34723

293-Anderson, Carl

June 25th 1920.

FROM : Chief.

TO : Quartermaster General, Munitions Building,  
WASHINGTON, D.C.

SUBJECT: Change of Inscription on Grave Marker.

1. Referring to your letter (File #34723 Registration) dated June 1, 1920, in the case of Private Carl ANDERSON, 81496, Military Specialist, it is estimated that a reply will be forwarded to your Office within twenty days.

*RFR*  
RFR/mt. ✓

*H. F. Remhers*  
H. F. REMHERS,  
Lieut. Col., Q.M.C.

REVIEWED

FILE

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY  
WASHINGTON

June 1, 1920

File No. 54723 Registration.

From: Office of the Quartermaster General, Chief, Cemeterial Division, (GRS)  
Munitions Building, 19th & B Streets, N.W., Washington, D. C.

To: Chief, American Graves Registration Service, Q.M.C., in Europe,  
8 Avenue d'Iena, Paris, France.

Subject: Change of Inscription on Grave Marker.

1. It is requested that the inscription on the marker erected  
over grave # 284, plot Row #11, section \_\_\_\_\_, Cty. # 319,  
American Cemetery, Moyers, Loire-et-Cher.

be corrected to correspond with the records of this office which show  
Private Carl Anderson, Serial #81496, Military Specialist

Date of death 10/15/18

2. When this has been done, advise the Red Cross Photographic  
Section in order that another photograph may be taken of the grave with  
the correct inscription.

By authority of the Quartermaster General:

CHARLES C. PIERCE,  
Colonel, U.S. Army,  
Chief, Cemeterial Division.

CMN/ms  
Inv.S.S. mg  
Inv. & Adj. Dept.

REVIEWED  
OSP SS.

JUN 2 - 1920  
G. R. S. MAIL ROOM