

G.R.S. Form #114 B

To The A. G. O.

3706

MMB
Soldier's Log
Angillo Natalo *

APR 27 1970

DATE 1/10/22

1. NAME ANGIILLO, Natalo SERIAL No. 2386484

RANK Pvt ORGANIZATION Co. C 61st Inf.

GRAVE LOCATION Amer. Cty. ~~Meuse~~ Meuse DIVISION 5th 524

CTY. NAME NUMBER

10 GRAVE 2 ROW E PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION Not known. GRAVE COMMUNE DEPT.

COORDINATES Not of record.

CONCENTRATED TO Not known. DATE GRAVE ROW PLOT

CEMETERY CTY. NUMBER

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

DATE OF DEATH Oct 18 1918

STATE FROM WHICH HE CAME n. y.

MEDALS OR DECORATIONS AWARDED none found

SUBSEQUENT REBURIALS Not of record. DATE GRAVE ROW PLOT CEMETERY

* For writing

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR Wm M. CLINE Captain Q.M.C.

3. FINAL GRAVE LOCATION 1/10/22 26 1 6 DATE GRAVE ROW Block PLOT

Meuse Argonne American Cty # 1232 Roanne sous Montfaucon CEMETERY

AUDITED BY
B.W. 2/5/23
8/3
A.G.O.
30 1926

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.



GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

R
Anriello.....386434.....Hotal.....
(Surname). (Number). (First Name and Initials).

Private.....51st Infantry Co., I.....
(Rank). (Organization).

PLACE OF DEATH: Mobile Hospital No. 5.....

CAUSE OF DEATH: G.W. (wound) Chest & Thigh.....

DATE OF BURIAL: October 19th 1918.....

PLACE OF BURIAL: American Cemetery.....

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

.....Les Fleurs, France.....

.....Department of France.....

GRAVE NUMBER: Sixty Eight (68).....

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

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

IDENTIFICATION TAGS: No.....

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

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:

NEAREST RELATIVE:

ADDRESS:

RELATIONSHIP:

REPORTED BY:

Charles M. [Signature] 1ST LIEUT. SAN. CORPS.
(Signature and Rank of Reporting Officer).

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

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

File 293 - Angillo, Natalo

Subject Pvt. Co. C - 61st Infantry

29/243

CODE SLIP



HEADING	SUB-HEADING	NO. OF COLS	CODE	
NAME	Angillo	ANG	3	1 4 7
BURIED	Natalo	CEMETERY 1232	1	1
		GRAVE 26	2	2.6
		ROW 1	2	01
		BLOCK C	1	3
STATE			2	37
RANK		Port	1	2
DIVISION		5	2	05
ORGANIZATION		61	3	061
ARM		Inf	1	1
MARTIAL		no	1	2
NAME	Angiello		3	1 4 7
RESIDENCE	Mr. Antonio (Bro)	STATE	2	
		COUNTY	2	
		CITY	3	
RELATION		mother	1	1
OTHER	no sm no loco		1	
ELIGIBILITY	no	Dead	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 31 1932
RS

14/25
29/514/PJ.

47

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Angillo, Natalo 1232 B

July 7, 1930

931 Mr. Antonio Angiello
~~219~~ Mary Street
Utica, New York

L

Dear Sir:

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

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

1. Is the deceased survived by a mother?

If so, give her name and address:

No she's dead

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

If so, give her name and address:

No was not married

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

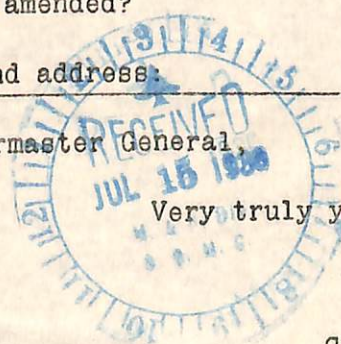
If so, give her name and address:

No

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment



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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Angilio, Natalo

Oct. 5, 1929.

Mr. Antonio Angiello,
919 - Mary St.,
Utica, 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 brother of the late Pvt. Natalo Angilio, Co. C, 61st. Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, France.

Will you please fill in the answers to the following questions in the space provided on this letter, and return 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?

2. If so, give her complete address.

3. 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.

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

Angiello, Natalo

August 6, 1929

Mr. Antonio Angiello,
919 Mary Street,
Utica, New York

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 brother of the late Private Natalo Angiello, Co. C. 61st Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, France.

Will you please fill in the answers to the following questions in the space provided on this letter, and return 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?

no

2. If so, give her complete address.

3. 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.

no

For The Quartermaster General,

Very truly yours,

2 Incls.
Act of Congress
Envelope

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

Bro.

96743

Mr. Antonio Angiello,
919 Mary St,
Utica, N.Y.

(m dead)

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

DATE 7-23-29

Angiello

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Angilio, Natalo	Pvt.	2586484	Co. C. 61 st. Inf.	10-18-18

STATE	CTY. NO.	GRAVE	ROW	BLOCK
	1232	26	1	C

7-26-30m

	<u>Check relationship</u>	<u>Living</u>	<u>-</u>	<u>Deceased</u>	
	MOTHER	:	:	:	<i>XC-96743</i>
	STEPMOTHER (For the year prior to commencement of service)	:	:	:	
NAME	MOTHER THRU ADOPTION	:	:	:	
AND	(For the year prior to commencement of service)	:	:	:	
ADDRESS	MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	:	:	:	
	WIDOW (Who has not remarried)	:	:	:	
		:	:	:	
		:	:	:	
		:	:	:	
		:	:	:	

Veterans Bureau Claim Number _____

29/156

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON



DATE 7-23-29

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Angilio, Natalo (<i>Single</i>)	Pvt.	2586494	Co. C. 61 st. Inf.	10-18-18

STATE	CTY. NO.	GRAVE	ROW	BLOCK
	1232	26	1	0

	<u>Check relationship</u>	<u>Living - Deceased</u>	
MOTHER	:	:	: <input checked="" type="checkbox"/> : <i>xc96743</i>
STEPMOTHER (For the year prior to commencement of service)	:	:	:
MOTHER THRU ADOPTION (For the year prior to commencement of service)	:	:	:
MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	:	:	:
WIDOW (Who has not remarried)	:	:	:

Bro
Mr. Antonio Angiello,
919 - Mary St,
Utica, N.Y.

Veterans Bureau Claim Number _____

29/156

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Angillo, Natalo 1232 B

July 7, 1930

Mr. Antonio Angiello
919 Mary Street
Utica, New York

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

Angiello, Natalo

August 6, 1929

**Mr. Antonio Angiello,
919 Mary Street,
Utica, New York**

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 **brother of the late Private Natalo Angiello, Co. C. 61st Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, France.**

Will you please fill in the answers to the following questions in the space provided on this letter, and return 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? | |
| 2. If so, give her complete address. | |
| 3. 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. | |

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

Angilio, Natalo

Oct. 5, 1929.

Mr. Antonio Angiello,
919 - Mary St.,
Utica, 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 brother of the late Pvt. Natalo Angilio, Co. C, 61st. Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, France.

Will you please fill in the answers to the following questions in the space provided on this letter, and return 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?

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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.

(also)
Angiello

(Surname)

Pvt.

Natalo

(Christian name in full.)

Co. C, 61st Inf.

(Rank and organization.)

2,386,484

(Army service number.)

State your relationship to the deceased..... *son*

Do you desire the remains brought to the United States?

(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)

.....
(Number and street or rural route.) (City, town, or post office.) (State.)

Read carefully the letter accompanying this card.

Dear Sir, I thank you for the
politeness that you use towards us, but
it would be a horrible thing for
me to see my sons remains, if he is dead
it is no use transporting him here. I think
I would die at the sight of his bones.

again, I thank you.

Yours truly
Paola Perrelli
la

Ms. A. 9. 2. 1. 129/21. E. M. J. Perrelli

17893

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

In reply refer to: 293 C-R

April 3, 1923.

Mrs. Paola Pezzolla,
Alberobello, Via Contento/22
Prov. di Bari, Italy.

Dear Madam:

The Quartermaster General desires that you be informed that the permanent grave of
Pvt. Natalo Angillo, Co. C, 61st Infantry,
is No. 26, Row 1, Block C, Meuse-Argonne American cemetery, 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.

Very truly yours,

APR 3 1923
H. J. Conner,
Assistant.

ME

23/236/ARK

Place RAMPOUT.

REPORT OF DISINTERMENT AND REBURIAL

Date October 26th, 1921.

1. REMAINS OF MICHELLO Natalo SERIAL NUMBER 2386484

RANK Pvt. ORGANIZATION Co. C., 61st Inf.

2. Disinterred (date): Oct. 26, 1921. From (give complete location):

Grave 10, Plot E., Row 2, Cemetery 624.

By: Group 2 Unit Field Section 3.

3. Reburied (date): In (give complete location):

Jan. 10th, 1922, Grave 26, Block C, Row 1, Cemetery 1232.

Lined Casket

By: Group Reburial S Unit Nature of reburial

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

Burlap and Pine Box under Cross.

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/Effects

Bottle record shows body worked 3-31-21.

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

(a) Height (actual measurement) Imp. to determine. MAD 1-16-29.

(b) Weight (estimated) Impossible to determine.

(c) Hair—Color None visible.

Quantity None visible

Characteristics None visible

(d) Hair on face—Color None visible

Location None visible

Quantity None

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

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

None visible.

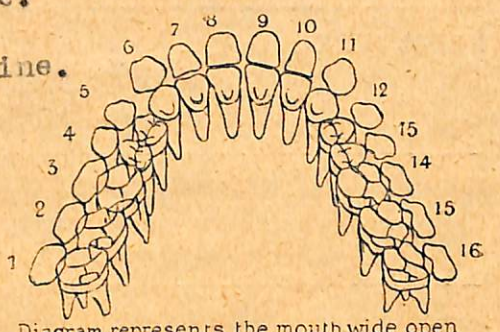
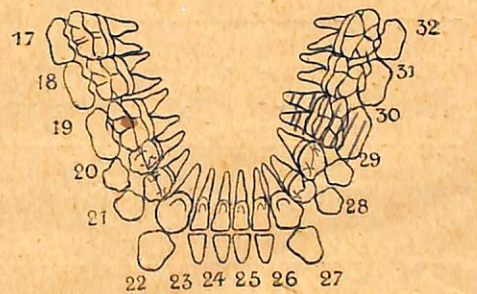


Diagram represents the mouth wide open



7. Disinterment supervised by H.L. Hurlbut Approved: W.A. Road

H.L. HURLBUT. (Title) L. Maloney, Capt. MC.

8. Re-burial supervised by A.U. Dufault Approved: James Younger

JEL A.U. Dufault, (Title) James W. Younger, Captain Q.M.C.

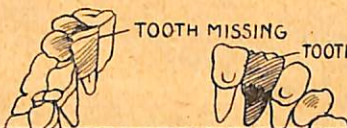




INSTRUCTIONS FOR THE PROPER COMPLETION OF G. R. S. FORM NO. 16-A

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".

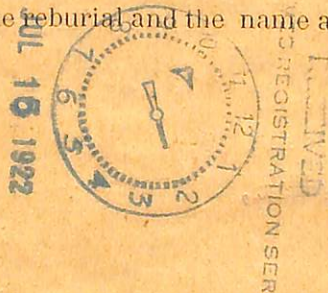
(b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying 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), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

MISSING TEETH	All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus:	 <p style="text-align: center;">TOOTH MISSING TOOTH MISSING</p>
CROWNED TEETH	Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus:	 <p style="text-align: center;">GOLD CROWN PORCELAIN CROWN GOLD CROWN</p>
BRIDGE WORK	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>
FILLINGS	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>
CARIES (CAVITIES)	Outline location and size of cavity, shade in thus:	 <p style="text-align: center;">CAVITY DECAYED DECAYED DECAYED</p>
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.



To be prepared in triplicate.

DATE October 26-21

REPORT OF DISINTERMENT, PREPARATION, SHIPMENT AND REBURIAL OF BODY

DISINTERMENT

COMPARATIVE REPORT

Records of G.R.S. Headquarters.

Discrepancy found upon exhumation of body

1. Name ANGIOLLO, Natalo

10. Name

2. No. 2386484

11. No.

3. Rank Pvt

12. Rank

4. Org. Co. C 61st Inf.

13. Org.

5. D.D. 10-18

14. (a) D.D.

6. C.D. D.O. W.ria

(b) D.B.

Discrepancy found upon disinterment.

7. Grave No. 10 Sec.

15. Grave No. Sec.

8. Plot E Row 2

16. Plot Row

9.

17. None.

18. Cemetery Amer. Cty.

19. Commune or town Rampont

20. Dept. or County Meuse.

21. Country France.

22. G.R.S. Hdqrs. Code No. 1824

23. Disinterred (Date) October 26-21

By H.L. Marlbut

24. Inscription on grave marker:

Name Natalo Angiollo

Serial No.

Rank Pvt.

Organization Co. C. 61st Inf

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

H.L. Marlbut
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 shows body worked 3 21 21

27. Condition of body Badly decomposed recognition impossible.

28. Nature of burial burial and pine box. Found under cross.

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

30. Body prepared and placed in casket: Date October 26-21 By H.L. Marlbut

31. Casket sealed by H.L. Marlbut

Signature of Embalmer, (Supervisor)

H.L. Marlbut
H.L. Marlbut

AUDITED BY

SHIPMENT. (Show actual marking of box.)

Box No. C-12778

32. Designation of body:

Name ANGIELLO, N. talo Serial No. 2386484
Rank Pvt Organization Co. C 61st Inf.

33. Consigned to: Officer in Charge Operations,

Meuse-Argonne Amer. Cty. Romagne/s/Montfaucon 1232
Name of Permanent Cemetery

34. Casket boxed and marked (Date) October 26-21 By H. L. Hurlbut

35. I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.

Signature of G.R.S. Inspector W. H. Roach, 1st Lt. MC.

36. Remarks

37. Shipped from point of Operation: (Date) October 26-21

To point of Concentration Verdun Meuse.,

Convoyer Robert Cronin. Signature Shipping Officer W. H. Roach, 1st Lt. MC. (Name) W. H. Roach

38. Received at Railhead or Point of Concentration: Date Oct 26-21.

By G.R.S. Representative T. A. Lake, Capt., F.A.

39. Shipped from Railhead or Point of Concentration: Date Nov 26, 1921

To Permanent Cemetery Meuse Argonne 1232

Convoyer O. Seeliger Signature Shipping Officer R. RICHARDS, 1st Lt QMC (Name) R. Richards

40. Received: Date

G.R.S. Representative

41. Reinterred Meuse Argonne Cemetery 1232. Jan. 10th, 1922,

(Date)

42. Grave No. 26 Section

43. Plots Block C Row 1

G.R.S. Representative James W. Younger

JEL

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

7025

COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD: File #42893
(a) Name ANGIELLO, Natalo Ser. No. 2386484
(b) Rank Pvt. Organization Co. C, 61st Infantry
(c) Date of death 10/18/18 (d) Cause of death DWRIA
TYP. DMA
CKR. B

*3/24 Examined
22
Concentration
Mines - Argentine
att 4/12/22
1232*

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

(a) Grave No. 10 Row 2 Plot E Sec. ---- TYP. DMA
(b) Emerg. Address Mrs. Paula Pizzolla (mother) Albergo Bello, Italy

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

IV. A. G. O. DISPOSITION CARD: *ok - also (2-26-21) "M"* Date of receipt Jan. 26

(a) Name ----- (b) Relationship -----
(c) Address -----
(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. -----

*request each
I thank you for the
information that you have
forwarded us but it would
be a horrible thing for me
to see my corpse buried, if
we is defect it is no need
transporting, how best I
think I would die at the
sight of his bones again
I thank you
Paula Pizzolla*

Examiner's Initials MH Date 1-27-21, 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 MH Date 1-28-21, 1920.

VI. G. R. S. FILES, CORRESPONDENCE—shows as follows: Let. 1/11/21 Antonio Angiello

*(brother) #608 Kasuth Av. Utica, N. Y. requests location
of grave and picture of same.*

(a) Cancellation memos referred to? yes

Examiner's Initials yes Date 1-29-, 1920.

COUNTRY FRANCE CEMETERY No. 624 SHEET No. 4

MAR 1 1921

CARDED

2-26-21

VII. G. R. S. Form No. 114 made _____, 1920.

RECEIVED

Typed by _____, Checked by _____, 1920.

APR 28 1921

VIII. FINAL ACTION:

Following advice forwarded to Europe by { cable on _____, 1920
letter on _____, 1920

Cemeterial Division

Overseas Project Sub-Section

2/4/21

Part #2 Not to be returned aen.

IX.

CORRECTIONS

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

X. SUSPENSION REMARKS

B. A. U. P. - Mrs Paola Pezzolla (mother)
Alberobello, Via Contento # 22, Prov di Bari,

Italy
2-16-21 P

\$120 sent to Mr. Antonio Angiello - 608
Kassuth Ave, Utica, N.Y. but returned
unclaimed N4-16-21 ems

Rank

Serial No.

Serial No.

Org.

Remarks

..... *Hughes*
A. G. O. Card & Corr. *1-28-21*

Discrepancies

Name

Rank

Serial No.

Org.

Remarks *Ed*

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

Discrepancies

Name

Rank

Serial No.

Org.

Remarks

Chackers

Discrepancies

Name

Rank

Serial No. *7.8W. ant.*

Org. *2-18-21.*

Remarks

S-1357/MB

checked
1-29-21
E.M.

OFFICE OF THE QUARTERMASTER GENERAL
CEMETERY DIVISION
OVERSEAS PROJECT SUB-SECTION

Harlow C.W.

Passage made

NAME OF DECEASED SOLDIER

CEMETERY NO.

DATE

C 96743

Angiello, Natalo, Pvt.

624 - 4

1/31/21.

SERIAL NUMBER

ORGANIZATION

2386484

Co. C, 61st Inf.

Date of death - 10/18/18.

WAR RISK INSURANCE INFORMATION

Copy fwd to Adj Dept.

DATE

2-16-21

NAME OF BENEFICIARY

RELATIONSHIP

Mrs. Paola Pezzolla

Mother

Address

Alberobello, Via Contento #22, Prov di Bari, Italy.

S/709/LML

js
APR 7 - 1921

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
CEMETERIAL DIVISION
WASHINGTON.

APR 7 - 1921

FROM: Chief, Cemeterial Division, O.Q.M.G.
TO: Mr. Antonio Angiello, 608 Kassuth Ave., Utica, N.Y.
SUBJECT: Remains of Pvt. Natalo Angillo, Ser. No. 2386484, Co. C, 61st Inf.
Mrs. Paola Pezzolla has
The records of this office show that ~~you have~~ requested that the body of the above
named soldier remain in France.

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 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.

GEO. H. PENROSE,
Colonel, Q.M.G.

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			
1			
Soldier's children (Name oldest first)			
2			
3			
Father			
Mother			
1			
Brothers, (Name oldest first)			
2			
3			
1			
Sisters, (Name oldest first)			
2			
3			

noted on file
emb
unclaimed

Date _____ Signature _____
Address _____ Relationship _____

Important - CAREFULLY read instructions before filling out this paper

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

1. As stated on first page of this sheet.
2. To be returned to the U.S. and shipped to _____
 (Name)

 (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.

WAR DEPARTMENT
QUARTERMASTER CORPS
GRAVES REGISTRATION SERVICE
PIER 2, HOBOKEN, N. J.

April 22nd, 1921.

File No. 293.8 Cem.Div., Cor.Br.
(ANGILIO, Natalo)

MEMORANDUM FOR: Chief, Cemeterial Division, O.Q.M.G.,
Washington, D. C.

SUBJECT: Return of Records, Cemetery #624, Ref.
#4. Transmittal Memorandum Number H-2534.

1. Returned herewith are records pertaining to the case of the late Natalo Angilio, Private, Serial Number 2386484, Company G, 61st Infantry.
2. It is recommended that authority be granted to comply with the request of Mrs. Paola Pezzalla, mother, that the remains be left in France, in view of her statement on Form 115.

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

BY:

J. F. Butler
J. F. BUTLER,
Captain, Infantry.

Recorded, Cemeterial Div., O. Q. M. G.
File # 293.8 - 42893

Angilio, Natalo

*4/20/21
Certainly
Form 115
should not
have been
sent 2/20*

*5/2/21
encs.
April 7, Form 115
were sent on all
cases. No instructions
to contrary at that time
& 1200 had always
being sent on all cases
where relatives were known.
JFB*

R-4-30-21.C.M.

April 22nd, 1921.

File No. 293,8 Com.Div.,Cor.Br.
(ANGILLO, Natalo)

MEMORANDUM FOR: Chief, Cemeterial Division, O.Q.M.G.,
Washington, D. C.

SUBJECT: Return of Records, Cemetery #624, Ref.
#4. Transmittal Memorandum Number H-2534.

1. Returned herewith are records pertaining
to the case of the late Natalo Angillo, Private, Serial
Number 2366484, Company C, 61st Infantry.

2. It is recommended that authority be granted
to comply with the request of Mrs. Paola Tessella, mother,
that the remains be left in France, in view of her statement
on Form 115.

R. E. SHANNON,
Captain, O.Q.M.G.,
Officer in Charge.

BY:

J. P. BURIER,
Captain, Infantry.

encs.

Division of Inspection
Cemeterial Division

APR 23 1921

RECEIVED

RECEIVED



APR 21 1921
O. Q. M. G.

COMPILATION OF DISPOSITION OF REMAINS DATA

See Form 115-
att 4/1/22

I. LOCATION INDEX CARD: File #42893
 (a) Name ANGI BILLO, Natalo Ser. No. 2386484 TYP. DMA
 (b) Rank Pvt. Organization Co. C, 61st Infantry
 (c) Date of death 10/18/18 Cause of death DWRIA B.I.

II. REGISTRATION CARD.-(Check Reg., Card Inf. against Loc. Ind. Inf.):
 (a) Grave No. 10 Row 2 Plot E Sect. ---- TYP. DMA
 (b) Emerg. Address Mrs. Paula Pizzolla (mother) Albano Bello, Italy
also (2-26-21) "M" *also (2-26-21) "M"*

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

IV. Information on which advice to Europe in letter of transmittal was based:
Europe advised not to return body pending investigation of rest of kin. (U.S. 3-1-21)

V. Following advice forwarded to Europe by - (cable on ----- 192
 (letter of transmittal on 2/4/21 192)
Par. # 2 Not to be returned aen

VI. Form 115 forwarded to G.R.S. Hoboken, N.J. MAR 8- 1921 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. 4-28- 1921

MAR 1 1921 T.L.

Copy

OFFICE OF THE QUARTERMASTER GENERAL
CEMETERIAL DIVISION
OVERSEAS PROJECT SUB-SECTION

Harlow C.V.

NAME OF DECEASED SOLDIER

CEMETERY NO.

DATE

Angiello, Natalo, Pvt.

624 - 4

1/31/21.

SERIAL NUMBER

ORGANIZATION

2386484

Co. C, 61st Inf.

Date of death - 10/18/18.

Adjustment Made
5-1-1922

File No. 4289B

WAR RISK INSURANCE INFORMATION

Original attached to 9115

DATE

2-16-21

NAME OF BENEFICIARY

RELATIONSHIP

Mrs Paola Pezzolla
Address

mother

Alberobello, Via Contento # 22 Prov. di Bari, Italy
S/709/LML

42893

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Angiello 2386484 Natalo.....
(Surname). (Number). (First Name and Initials).

Private, 61st Infantry Co. C.
(Rank). (Organization).

PLACE OF DEATH: Mobile Hospital No. 5.....

CAUSE OF DEATH: GSW (shell) Chest & Thigh...

DATE OF BURIAL: October 19th 1918.....

PLACE OF BURIAL: American Cemetery.....

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

Les Placys, France.....

Department Meuse.....

GRAVE NUMBER: Sixty Eight (68).....

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

Headboard? Bottle?.....

IDENTIFICATION TAGS: Two

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: .....

ADDRESS:

RELATIONSHIP:

REPORTED BY: .....

(Signature and Rank of Reporting Officer).

1ST LIEUT. SAN. CORPS.

23 OCT 1918

MAP. 51. N. E. 258. 2 N. 317. 6 E.

No 2386484 42893

Name ANGIELLO, NATALS.

Rank Pvt. Co. C (Corps) 612nf (Regt)

Date of Death Oct 18 1918

Place Les Plancy Meuse

Cause W. R. in A.

Date of Burial Oct 20 1918

Grave No. 68 Plot 2 Row 2

Cemetery Amer Mill

Identified by (Tag Papers Clothing)

List of Effects Leg on cross

Tag on cross and Buried

Field Record Made by M. A. Gallagher Corp

Company... Graves Registration Ser.

For additional data use reverse side.

NOV 1918

FROM. O. Q. M. G.
CEMETERIAL DIVISION
Munitions Building
Room

PLEASE
EXPEDITE

WAR DEPARTMENT
Office of the Quartermaster General of the Army
Washington
Adjustment Made

FILE

G.R.S. Form 8-W-A-0
Information requested of A.G.O. **APR 4 1921** Date **2/18/21.**

File No. _____ Requisition **42893**
File No. **70**
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.

- Angillo Sig. on Enl. pp.*
- a. Surname **Angiello** ✓
 - b. Christian name **Natalo** ✓
 - c. Serial Number **2386484** ✓
 - d. Organization **Co. C, 61st Inf.** ✓
 - e. Rank **Pvt.** ✓
 - f. Date of death **10/18/18.** ✓
 - g. Cause of death **DWRIA.** ✓
 - h. Authority (C.O.#) _____
 - i. Emergency address *Paula Pizzolla, Albero Bello, Italy*
 - j. Relationship **mother**

BODY DESCRIPTION
(See page #2 of the Service Record)

- a. Age of enlistment _____
- b. Color of eyes _____
- c. Color of hair _____
- d. Height _____
- e. Weight _____
- f. Permanent marks and physical defects at enlistment (Old fractures or breaks) _____

DENTAL CHARTS
(See Physical report of examination prior to enlistment)

a. Strike out teeth missing

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8
upper right upper left

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8
lower right lower left

*Drumelly, 8D, 2 P.S. No 8,
2-21-21*

C.W.
CEMETERY NO: **624**
SHEET NO: **4**
TYPED BY: **I.W.**

H. L. ROGERS,
Quartermaster General, U.S.A.
BY: *H. J. Conner*
H. J. CONNER,
1st. Lieut. Q.M.G. S & S Div., A.G.O.

2021 World War I
FEB 21 1921

FEB 21 1921 6

CEMETERY DIVISION
REGISTRATION SECTION

FILE

FILE

April 2, 1921

MEMO FOR: Cards Department.

1.
CASE OF:

ANG Company C. 61st Infantry
ORGANIZATION (Old)
ANGIELLO 2386484 Natalo
(Name)

Correction or additional data changes as shown below have been made on the Registration Card of the above-mentioned soldier and a corresponding change will be necessary on the Organization Card:

ORGANIZATION (New)

FILE NO.

SURNAME ANGILLO

SERIAL NUMBER

FIRST NAME AND INITIALS

RANK

DATE OF DEATH

CAUSE OF DEATH

	Date	Place	F-1A No.
Orig.			D-
1st Reb.			D-
2nd Reb.			D-
3rd Reb.			D-

(Note: In the above spaces below double line fill in ONLY the new data and data correcting previous information)

BY: Helen A. Souder

Investigation & Adjustment
(Department)

5 x 8 card was sent to file.

Corrections made
on Organization
File Card:

By me

S/1105/ML

File #42893.

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

May 14th 1919.

FROM : Chief, Graves Registration Service, American E.F.
TO : Mr Antonio Angiullo, #608 Kossuth Ave., Utica, N.Y.
SUBJECT: Pvt. Natale Angiullo, Co.G. 61st Infantry, American E.F.

In reply to your letter of inquiry, with reference to the
regretted death of this soldier, according to the records at these
headquarters he is buried in Grave #68, R.#2, Pl.#2, American
Cemetery, LES-PLACYS, department of the MEUSE.

By direction:

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

Per

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

(Enclosures-G.R.S.:)
(10-B. .004.5)

MBD/mt.

NAME *Nat e Aignall*

FILE NUMBER

42893

SERIAL NUMBER

RANK

ORGANIZATION

Lvt

Co G 61st Inf

NO.

QUESTION

REPLY

1. Do particulars of soldier given above agree with records?

Angiello

2. Date of Death

3. Grave Location:

*2 City #624 Cr. #68 R. 2 Pl. 2 City Am. Les.
Placys (meuse)*

4. Who reported burial?

5. Confirmed by G.R.S.?

Yes

6. How is grave marked?

7. Identification Tags:

(a) Buried with Body?

(b) Attached to grave marker?

8. Emergency address:

9. Has above been notified? (Give date).

ANALYSIS OF INQUIRY

Flowers, flags etc.
(Par. #5, Bul, 10-B)

Effects (G.R.S. Form Nos
7 & 7-A)

Monuments (Par. #6, Bul.
10-B)

Accrued Pay (G.R.S.
Forms 19 & 22)

Disinterments (Par. #8,
Bul. 10-B)

Liberty Bonds
(G.R.S. Forms 21 & 22)

Circumstances of death
(G.R.S. Form No. 6)

War Risk Insurance
(G.R.S. Forms 20 & 22)

Photograph requested
(File 004.5)

Disposition of Remains
(a) Return to U.S.) Form 23

Grave Location

(b) Remain in France Form 24

(c) Miscellaneous letter

REMARKS:

RD7

2260

5-1-19

W.C.

42893

April 11th, 1919.

Pvt. Natale Angiullo
Age 23.
Entered service Sept. 1917 at Little Falls, N.Y
Co. "G" 61st Inf., Am. E.F.

Chief, Graves Registration Service,
Headquarters Services of Supply,
A.P.O. 717,
American E. F., France,

Dear Sir:-

My brother, the above named enlisted man
died from wounds received in France, Oct. 18th, 1918.

I would like very much to know where he
is buried and if possible, to have a picture of his
grave.

I shall be very grateful for anything which
you can do for me in regard to this matter.

Very truly yours,

Antonio Angiullo,
#608 Kossuth Ave.,
Utica, N. Y.

Antonio Angiullo
E.B.F.

EBG/C

Place Rampont #624.

REPORT OF DISINTERMENT AND REBURIAL

Date March 31, 1921.

1. REMAINS OF natalo, Angiello SERIAL NUMBER 2386484

RANK Pvt. ORGANIZATION Co. C. 61st Inf.

2. Disinterred (date): From (give complete location):

March 31, 1921 Gr. #10. Plot B.

By: Group 3 Unit 2

3. Reburied (date): In (give complete location):

March 31, 1921 Gr. #10. Plto E. wooden box

By: Group 3 Unit 2 Nature of reburial end burlap

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

hospital shroud. badly decomposed.

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) unable to estimate.

(b) Weight (estimated) height to roweight.

(c) Hair—Color dark brown.

Quantity unknown.

Characteristics straight.

(d) Hair on face—Color none dark brown.

Location mustache

Quantity unknown.

(e) Permanent marks on body (old scars, peculiarities, or missing parts) none discernable.

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

none discernable.

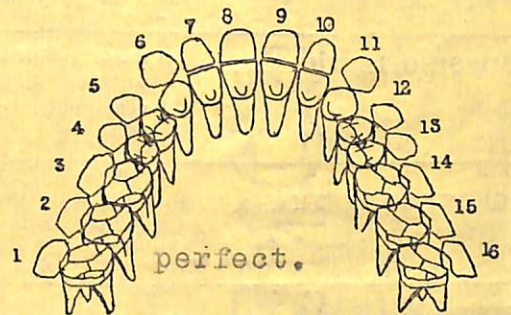
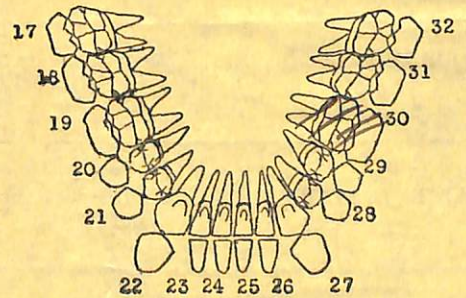


Diagram represents the mouth wide open.
30 M.B.D.



D-50407

7. Disinterment supervised by C. J. Blake
C. J. Blake 2nd Lt. Q.M.C.

Approved: E. J. Riordan
E. J. Riordan Capt. Q.M.C.
(Title)






8. Reburial supervised by C. J. Blake

Approved: E. J. Riordan
Capt. Q.M.C.
(Title)

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

Enter information, as noted below, on reverse side of sheet in the *corresponding numbered space*. This form is supplemental to and is to be forwarded with G. R. S. Form 1-a, reporting reburial locations. To be used in answer to 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.