

NOV 27 1925

2703

40 293

GC

DATE

1. NAME BARBER, Herbert H. SERIAL No. 2993993

RANK Pvt. ORGANIZATION Co. L., 165th Inf.

GRAVE LOCATION American Mil. Cty. Nevers Nievre 395
CTY. NAME NUMBER

353

GRAVE

ROW

PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 353 NEVERS (Nièvre)

GRAVE

COMMUNE

DEPT.

COORDINATES

CONCENTRATED TO Not of record

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 Dec. 18, 1918.

STATE FROM WHICH HE CAME North Carolina

MEDALS OR DECORATIONS AWARDED none

Not of record

SUBSEQUENT REBURIALS

DATE

GRAVE

ROW

PLOT

CEMETERY

DATE

GRAVE

ROW

PLOT

CEMETERY

SIGNATURE, AREA SUPERVISOR W. H. Quarterman

W. H. QUARTERMAN, CAPT. F. A., Supervisor Area N°4

3. FINAL GRAVE LOCATION July 10, 1922. 20 18 Block C

DATE

GRAVE

ROW

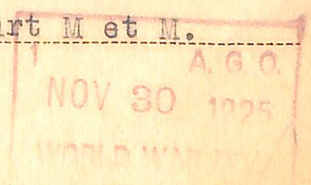
PLOT

St. Mihiel American #1233, Thiaucourt M et M.

CEMETERY

AUDITED BY

K.A.L. 8/13



INSTRUCTIONS FOR PREPARATION OF FORM 114 B

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

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

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

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

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Barber 2993993 Herbert H.
(Surname.) (Number.) (First Name and Initials.)

Pvt. Co. "L" - 165 Inf.
(Rank.) (Organization.)

DATE OF BURIAL Dec. 19 - 1918

PLACE OF BURIAL Military Cemetery

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

Hospital Center

Mars-sur-Allier

France

GRAVE NUMBER B 185

HOW MARKED: Name Peg? Yes Cross? Yes

Headboard? Bottle?

IDENTIFICATION TAGS: - 2 -

Was one buried with body? Yes

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

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

.....
.....
.....

REPORTED BY:

Clinton J. Grove - Chaplain
(Signature and Rank of Reporting Officer.)

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

CODE SLIP

HEADING	SUB-HEADING	NO. OF COILS	CODE
NAME <i>Barber</i>	<i>Bar</i>	3	<i>218</i>
<i>Herbert</i>	CEMETERY <i>1233</i>	1	<i>3</i>
BURIED <i>14.</i>	GRAVE <i>20</i>	2	<i>20</i>
	ROW <i>18</i>	2	<i>18</i>
	BLOCK <i>C</i>	1	<i>3</i>
STATE	<i>No Car</i>	2	<i>38</i>
RANK	<i>Port</i>	1	<i>21</i>
DIVISION	<i>42</i>	2	<i>42</i>
ORGANIZATION	<i>165</i>	3	<i>165</i>
ARM	<i>Inf</i>	1	<i>1</i>
MARITAL <i>Cam</i>	<i>no</i>	1	<i>2</i>
NAME <i>Barber</i>		3	
<i>L.T.</i>	STATE	2	
RESIDENCE	COUNTY	2	
<i>Palmetto Fla</i>	CITY	5	
RELATION	<i>Mother</i>	1	<i>1</i>
OTHER		1	
ELIGIBILITY	<i>Head</i>	1	<i>6</i>
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	NO.	1	
TRIP	YR.	1	
ACCEPTANCE <i>Edm</i>		1	

AUDITED
APR 1 1932
ax

B-50

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

July 3, 1930.

Barber, Herbert H. 1233 Adm.

Mr. L. T. Barber,
Palmetto, Fla.

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

Barber, Herbert H.
1233

Sept. 13, 1929

Mr. L. T. Barber,
Palmetto, Fla.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated July 30, 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:

No

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.

No

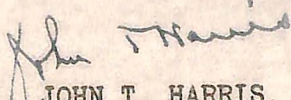
Non

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

No

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

Barber, Herbert H.
1233.

Sept. 4, 1929

Mr. L. T. Barber,
Palmetto, Fla.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated July 30, 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:

*Deceased was
not married*

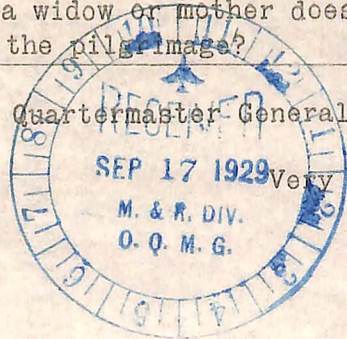
2. If he is survived by a mother, stepmother, mother thru adoption, or any other woman who stood in loco parentis to him, according to the terms of Section 4 of the enclosed Act, give her name, address, and relationship in the space opposite.

Mother Dead

Step-mother Dead

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Barber, Herbert H.

July 30, 1929.

Mr. L. T. Barber,
Palmetto, Fla.

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 Administrator of the estate of the late Private Herbert H. Barber, Co. L, 165th Inf., whose remains are now interred in the St. Mihiel American Cemetery, Thiancourt, Mourthe-et-Moselle, 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



WASHINGTON, D. C.

OFFICIAL BUSINESS

OFFICE OF THE QUARTERMASTER GENERAL

PENALTY FOR PRIVATE USE TO AVOID
PAYMENT OF POSTAGE, \$800.



REASON FOR NON-DELIVERY CHECKED

RETURN TO WRITER

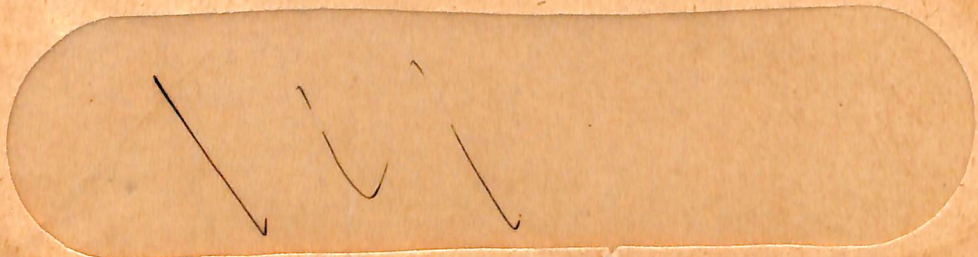
Unclaimed **Unknown**

Delivered to wrong address **For better address**

Refused

For office in state named

Deceased



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Barber, Herbert H.

Mother not shown (estate)
Write to Adm. of soldier's May 25, 1929.
Mr. L.T. Barber, XC 144 986
Palmetto, Fla.

Mr. David Riley Barber,
R.F.D. #1,
Elon College, N. C.

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 Herbert H. Barber, Co. L, 165th Inf., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, France.

Will you please advise this office whether or not he is survived by a mother or widow who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish the full names and addresses of the mother and widow in order that action may be taken to extend invitations to them to make the pilgrimage. Both mothers and widows are entitled to make the pilgrimage.

Your attention is particularly invited to Section 4 of the enclosed Act, which defines the terms "mother" and "widow". If the relative is a stepmother, mother through adoption, or any woman who stood in loco parentis to the decedent, a statement as to her relationship is requested. If he was survived by a widow who has since remarried it is also requested that a statement to that effect be made.

For your reply, you may use the enclosed envelope which requires no postage.

For The Quartermaster General,

Very truly yours,


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

2 incls.
Act of Congress.
Envelope.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

July 3, 1930.

Barber, Herbert H. 1233 Adm.

Mr. L. T. Barber,
Palmetto, Fla.

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

Barber, Herbert H.
1233

Sept. 13, 1929

Mr. L. S. Barber,
Palmetto, Fla.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated July 30, 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

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1233.

Sept. 4, 1929

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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.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Barber, Herbert H.

July 30, 1929.

Mr. L. T. Barber,
Palmetto, Fla.

Dear Sir:

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The records of this office show that you are the ~~estate of the late Private~~ Administrator of the ~~Herbert H. Barber, Co. L, 165th Inf., whose~~ remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, ~~Mourthe-et-Moselle, 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
Barber, Herbert H.

May 25, 1929.

Mr. David Riley Barber,
R.F.D. #1,
Elon College, N. C.

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 Herbert H. Barber, Co. L, 165th Inf., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, France.

Will you please advise this office whether or not he is survived by a mother or widow who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish the full names and addresses of the mother and widow in order that action may be taken to extend invitations to them to make the pilgrimage. Both mothers and widows are entitled to make the pilgrimage.

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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.

Barber Herbert H. 2,993,993
(Surname) (Christian name in full.) (Army service number.)

Pvt Co L 165 Inf
(Rank and organization.)

State your relationship to the deceased Father

Do you desire the remains brought to the United States? No
(Yes or no.)

If remains are brought to the United States, do you wish them interred in a national cemetery? } Yes
(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) David R. Barber

R.F.D.#1 Elon College, N.C.
(Number and street or rural route.) (City, town, or post office.) (State.)

Drawn by PM

395-23

REVIEWED²¹
OSP SS.

ad 17571-20

QM 293 A-C

BARBER, Herbert H. - Pvt.

November 25, 1924

Mr. David Riley Barber,
R.F.D.#1,
Elon College, N.C.

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,
Major, Q.M.G.
Assistant,

1-Incl.
Record card.

RD



File 292210

REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name: Hubert H. Barber, Number: 2993993

Rank: Pvt. Organization: Co. L., 165th Inf.

Disinterment and Reburial made by Group _____ Unit Detachment.

Disinterred (Date) _____ From: (Give Complete location)
June 15, 1919. Grave B-185, American E.F. Cemetery
No. 85, Mars-sur-Allier (Nievre).

Reburied (Date) _____ in: (Give complete location) 395
June 15, 1919. Grave 353, American E.F. Cemetery
No. 395, Nevers (Nievre).

Report as to nature of original burial and condition of body upon disinterment:
Buried in strong coffin, body clothed, badly decomposed, water
covered coffin.

Was one identification tag found upon the body? No question as to identity.
What other means of identification were found on the body?

10186

CONFIRMED N° D

Note:

If upon disinterment, effects are found upon bodies, they will be promptly sent to the Effects Depot direct, as is required by G. O. 170, G.H. 2, 1918., after being carefully examined for clues to identity in doubtful cases, notation whereof will be made and reported to Chief, G.R.S.

Supervised by: Harry S. Sands Chas. S. Denny **CHAS. S. DENNY**
2nd Lt. C. A.
C.O. Group _____ Unit _____

1914

COMPILATION OF DISPOSITION OF REMAINS DATA

File No. 72210

1. LOCATION INDEX CARD:

12/30/20

(a) Name **BARBER, Hubert H.** Ser. No. **2993993**)
 (b) Rank **Pvt.** Organization **Co. L. 165th Infantry**) TYP. **EML**
 (d) Cause of death **Wounds & Septicemia**) CKR. **Ex**
 (c) Date of death **12-18-18** of death)

2/10/27 Exhumed
 1/22/22
 For Concentration
 1283
 Ist Michiel
 att 3/10/22

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

(a) Grave No. **353** Row --- Plot --- Sect. ---) TYP. **ILH**
 (b) Emerg. Address **David Riley Barber, (Father), RFD #1, Elon College, N. C.**

111. Files of soldiers dying from contagious diseases; **NO CARD**) CKR. **Ex**

IV. A.G.O. DISPOSITION CARD:

Date of receipt **None**

(a) Name **David R Barber** (b) Relationship **Father**
 (c) Address **RR #1, Elon College, N. Car.**
 (d) Remains to be brought to U. S.? **No**
 (e) To be interred in National Cemetery in U. S. at _____

(f) Shipping instructions upon arrival of body in U.S. _____

(g) Disposition instructions if not brought to U.S. _____

Examiner's Initials **att** Date **5-26-** 1920

V. A.G.O. CORRESPONDENCE shows communication from _____

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

No Correspondence

Examiner's Initials **JOB** Date **5/26/** 1920

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

No request for disposition

(a) Cancellation memos referred to? **yes - MMS**

Examiner's Initials **MMS** Date **5/27/** 1920

COUNTRY **FRANCE**

CEMETERY NO. **395**

SHEET NO. **23**

G.R.S. Form #115

Amended April 6, 1920.

Make Form #114

CARDED

checked by
12-21-20

RECEIVED.

JAN 12 1921

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

Typed by _____ Checked by _____ 1920

CEMETERY L. O. V. Y.
OVERSEAS POST

VIII. FINAL ACTION:

Following advice forwarded to Europe by-
(cable on _____ 1920
(letter on 8/2 1920

Par. # 2. Not to be returned (Mask)

IX. CORRECTIONS

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

X. SUSPENSION REMARKS:

*Form 12-0-6-16-20 from father w/les
D.R. Barber, Elon College, N.C. confirms
previous instructions that body remain
in France* *el. m. - 21 - 20*

FORM 115 RETURNED BY HOBOKEN - BODY
TO REMAIN IN EUROPE. JAN 11 1921

Jan

To be prepared in triplicate.

DATE Dec, 19, 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 BARBER, Herbert H.
 2. No. 2993993
 3. Rank Pvt.
 4. Org. Co.L., 165th Inf.
 5. D.D. Dec. 18th, 1918
 6. C.D. wounds and Septicemia

10. Name Herburt H. Barber
 11. No. _____
 12. Rank _____
 13. Org. _____
 14. (a) D.D. _____
 (b) D.B. _____

Discrepancy found upon disinterment

7. Grave No. 353 Sec. _____
 8. Plot _____ Row _____
 9. _____

15. Grave No. _____ Sec. _____
 16. Plot _____ Row _____
 17. _____ none

18. Cemetery American Mil

19. Commune or town Nevers

20. Dept. or County Nievre

21. Country France

22. G.R.S. Hdqrs. Code No. 395

23. Disinterred (Date) Dec, 19, 1921 By A.R. CHENEY

24. Inscription on grave marker:

Name Herbert H. Barber

Serial No. --

Rank Pvt.

Organization Co.L. 165th Inf

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

Glenn A. Dorsey
 Signature Junior Technical Assistant

PREPARATION

GLENN A. DORSEY

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).

No effects found.

27. Condition of body Badly decomposed. Recognition impossible

28. Nature of burial uniform and wooden box.

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? Disc on body reads ~~Herburt~~ Herbert H. Barber

30. Body prepared and placed in casket: Date Dec, 19, 1921 By A.R. CHENEY

31. Casket sealed by A.R. CHENEY

Signature of Embalmer, (Supervisor A.R. Cheney)

A.R. CHENEY

AUDITED BY
498
9/29/23

SHIPMENT. (Show actual marking of box.) Box No. C- 23679

32. Designation of body:

Name Herbert H. BARBER Serial No. 2993993

Rank Pvt. Organization Co.L., 165th Inf.

33. Consigned to:

Name of Permanent Cemetery St. Mihiel American Cty. #1233 Thiaucourt. M-et-M.

34. Casket boxed and marked (Date) Dec, 19, 1921 By A. R. CHENEY

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. L. FAIN, CAPT. QMC

36. Remarks Disc on body reads: Herbut H. Barber. G.R.S strip checks.

37. Shipped from point of Operation: (Date) Dec, 19, 1921

To point of Concentration Nevers. (Nievre) (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 Dec, 22, 1921

To Permanent Cemetery St. Mihiel Amer Cty. 1233, Thiaucourt, (M et M) (Name)

GBT Convoyer R. L. HALL Signature Shipping Office W. R. BUCKLEY, CAPT. QMC

40. Received: Date 26 DEC. 1921

G.R.S. Representative T. B. Daniel, Capt, 2 MC

41. Reinterred, July 10, 1922 (Date)

42. Grave No. 20 Section

43. ~~XXIX~~ Bk. C Row 18

G.R.S. Representative A. E. Dewey Ist. Lt. QMC

REPORT OF DISINTERMENT AND REBURIAL

1. REMAINS OF BARBER, Herbert H. SERIAL NUMBER 2993993
RANK Pvt. ORGANIZATION Co.L. 165th Inf.

2. Disinterred (date): Dec, 19, 1921 From (give complete location): Grave 353, Amer Mil, Cty 395, Nevers.
By: Group 3 Unit Section 4.

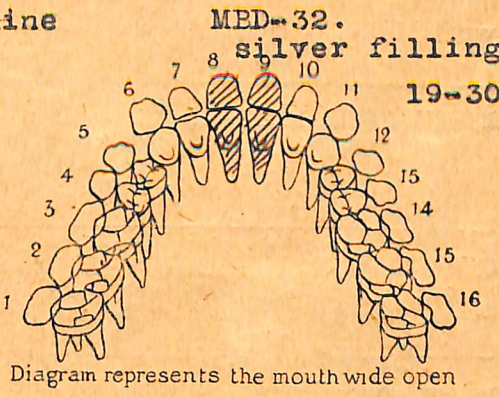
3. Reburied (date): July 10 1922 In (give complete location): Gr. 20 Bk.C Row 18
By: Group Reburial Unit Casket & shipping case Nature of reburial Nature of reburial

4. Report as to nature of original burial and condition of body upon disinterment :
Uniform and wooden box. Body badly decomposed.
Recognition impossible.

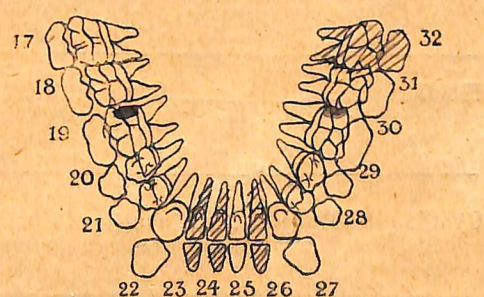
5. (a) Identification tags: Buried with body? Yes On grave marker? Yes
(b) Other means of identification found upon disinterment, and general remarks :
No effects found.

6. What does examination of body show as regards the following identifying items ?
MAD-8-9-23-24-26

(a) Height (actual measurement) Unable to determine
(b) Weigh, (estimated) do
(c) Hair—Color do
Quantity do
Characteristics do
(d) Hair on face—Color none
Location none
Quantity none



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



(f) Wounds or missing parts (received at time of casualty) none






7. Disinterment supervised by A.R. CHENEY Approved; R.L. FAIN
gbt (Title) CAPT. QMC

8. Reburial supervised by H L Kramer Approved: A E Dewey
xHbx (Title) Ist. Lt. QMC

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

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

[Handwritten signatures and names]
 (Signature) (Signature)
 (Signature) (Signature)

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Barber 2993993 Herbert H.
(Surname.) (Number.) (First Name and Initials.)

Pvt. Co. L 165 Inf.
(Rank.) (Organization.)

DATE OF BURIAL Dec. 19-1918

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

Hospital Center

Mars-sur-Albi

France

GRAVE NUMBER B 185

HOW MARKED: Name Peg? Yes Cross? Yes

Headboard? Bottle?

IDENTIFICATION TAGS: - 2 -

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:

B 185

REVIEWED
OSP SS.

REPORTED BY:

Clinton J. Greene - Chaplain
(Signature and Rank of Reporting Officer.)

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

WAR DEPARTMENT.

GRAVES REGISTRATION SERVICE

WASHINGTON, D. C.

OFFICIAL BUSINESS.

01236

FILE

722
2/22

Returned to Writer.

Mr. Tim Moriarty,
Fort Worth, Texas

From
Ft. Worth, Tex.
P.O.

APR 3 1920

WASHINGTON
MAR 20
630 AM
1920
D.C.

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

RECEIVED
MAR 20 1920

7/107
9/19/20

RECEIVED
NO 4

11111
11111
11111

1920
MAR 20

- 1. Form 11b corrected by *Dec 7/24/21*
- 2. Form 115 A corrected by *Not supplied, 2/1/21*
- 3. Reg. Rec. corrected by *2/2/26/21*

WAR. DEPARTMENT
Office of the Quartermaster General of the Army
Washington

Jan 1/21
Wash

G.R.S. Form 8-W-A-0
Information requested of A.G.O. Date **1/13/21.**

File No. _____
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.

Adjustment Made
FEB 26 1921
7-2-210

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

Information from b. b.

- a. Surname **Barber,** *Herbert H.*
- b. Christian name ~~Hubert H.~~
- c. Serial Number **2993993.**
- d. Organization **Co. L, 165th Inf.**
- e. Rank **Pvt.**
- f. Date of death **12-18-18.**
- g. Cause of death
- h. Authority (G.O.#)
- i. Emergency address
- j. Relationship

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

FILE

- a. Age of enlistment
- b. Color of eyes
- c. Color of hair
- d. Height
- e. Weight

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

- a. Strike out teeth missing
- 3 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

f. Permanent marks and physical defects at enlistment (Old fractures or breaks)

Previously Corrected

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

2

CEMETERY NO: **395.**

BY:

SHEET NO:
TYPED BY: **rln.**

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

23 Card in dead file

S/713/LML

WAR. DEPARTMENT
Office of the Quartermaster General of the Army
Washington

G.R.S. Form 1-A-0
Information request A.G.O.

Date 12/24/20.

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 Barber *OK* f. Date of death 12/18/18.

b. Christian name ~~Herbert H.~~ *OK* g. Cause of death Wounds & septicemia. *OK*

c. Serial Number or (Herbert H.) 2993993 *OK* h. Authority (C.O.#)

d. Organization Co.L, 165th Inf. *OK* i. Emergency address

e. Rank Pvt. *OK* j. Relationship

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

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

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)

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

FILE

Donnelly - dpc - 9 PS - Wgs
12-27-20
BY: *H. L. ROGERS,*
Quartermaster General, U.S.A.

CEMETERY NO: 395

SHEET NO: 23

TYPED BY: I.W.

S/713/LML

Rec'd World War Div.

Date... 12 27 '20

H
12/30/20

ADJUSTMENT MADE
JAN 5 - 1921

FILE

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

Rush Answer

FROM: Chief, Graves Registration Service, Q.M.C.

TO: Mr. David R. Barber, RR#1, Elon, College, N. Car.

SUBJECT: Remains of Pvt. Hubert H. Barber

JUN 9 - 1920

The records of this office show that you have requested that his
body be left in France

This is my desire.

no change

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.

KMB

NAME OF	NO. & STREET	TOWN	STATE
---------	--------------	------	-------

Soldier's Widow

not married.

Soldier's Children 1.
(Name oldest first) 2.
3.

Father

David R. Barber.

Mother

Deceased

Brothers 1.
(Name oldest first) 2.

Sisters S. J. Barber, Gibsonville N. C. (oldest)
Mrs. J. N. Adams, Raleigh, N. C. (oldest)

Date June 16, 1920.

Signature D. R. Barber,

Address Elon College, N. C. Relationship Father.

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

(OVER)

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

I prefer the body to remain in France.

RECEIVED



JUN 21 1920

G. R. S.

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.