Barbieri (Surname.) Andrea (Christian name in full.) 1,681,856 (Army serial number.)

Pvt - Co. A 305th Inf. (Rank and organization.)

State your relationship to the deceased _____

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.

3—6713

ef

83

G.R.S. Form #114 B

To The A. G. C.

DATE 10/4/21

1. NAME BARBIERI, Andrea Joint Maine SERIAL No. 1681856

RANK Pvt. ORGANIZATION Co. A, 306th Inf. & DIVISION 77th

GRAVE LOCATION Argonne Amer. Romagne /s/Montfaucon 1232 sec 83

CTY. NAME NUMBER

19 sec 83 1

GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION Bac "A" La Chalade(Meuse).

GRAVE COMMUNE DEPT.

COORDINATES 35-S.W. 266.5-N. 297.6-E.

CONCENTRATED TO 6.2.19. 19. 83. 1.

DATE GRAVE ROW PLOT

Meuse Argonne Cemetery 1232.

CEMETERY CTY. NUMBER

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

~~Tag on body.~~

DATE OF DEATH Oct. 1, 18

STATE FROM WHICH HE CAME Mass.

Data form 1.

SUBSEQUENT REBURIALS MEDALS OR DECORATIONS AWARDED None

DATE GRAVE ROW PLOT CEMETERY

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR M. B. Birdseye M. B. BIRDSEYE 1st Lt., Q.M. Corps, U.S. Army

3. FINAL GRAVE LOCATION 10/4/21 31 32 E

DATE GRAVE ROW Block PLOT

AUDITED BY M. M. E. 4-24-28

Received JUN 10 M. & R. BRANCH O.Q.M.G.

Meuse Argonne American Cty # 1232 Romagne sous Montfaucon

CEMETERY

Rec'd World War Div. APR 2 1928

KM 1/3

O.Q.M.G. JUL 5 1928 WORLD WAR DIV.

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.

CC 335 RLT 12/11

GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

Barbiari (Surname.) 1681856 (Number.) Andrea (First Name and Initials.)

Pvt (Rank.) (Organization.)

DATE OF BURIAL. Oct. 1st.

PLACE OF BURIAL. La Chalade.

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

Map. Foret D'argonne.

66.7 - 97.7

GRAVE NUMBER. 14.

HOW MARKED: Name Peg? X Cross?

Headboard? Bottle?

IDENTIFICATION TAGS:

Was one buried with body? Yes.

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

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

REPORTED BY:

Samuel E Sentelgrass

(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 COLS	CODE
NAME Barbieri	BAR	3	218
Andrea	CEMETERY 1232	1	1
BURIED	GRAVE 31	2	31
	ROW 32	2	32
	BLOCK E	1	5
STATE	Mass	2	25
RANK	Pvt	1	2
DIVISION	77	2	77
ORGANIZATION	306	3	306
ARM	Inf	1	1
MARITAL Sister	No	1	2
NAME Barbera		3	
Giuseppa	STATE	2	
RESIDENCE	COUNTY	2	
" Italy "	CITY	3	
RELATION	Mother	1	1
OTHER		1	
ELIGIBILITY	Dead	1	6
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE		1	

AUDITED
MAR 31 1932

97
29/514

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

DATE 8-20-31

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Barbieri, Andrea	Pvt.	1681856	Co. A, 306th Inf.	10-1-18

STATE	CTY. NO. 1232	GRAVE 31	ROW 32	BLOCK E

	Check relationship	Living	Deceased
	MOTHER		✓
	STEPMOTHER (For the year prior to commencement of service)		
NAME AND ADDRESS	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)		

(S.)
Giuseppa Barbera
Via Stovigliai
Mazara del Vallo
Prov of Trapani
Italy

Smigleman

Veterans Bureau Claim Number C 130897
29/156

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON

DATE 7-23-29

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Barbieri, Andrea	Pvt.	1681856	Co. A, 306 th Inf.	10-1-18

STATE CTY. NO. 1232 GRAVE 31 ROW 32 BLOCK E

C 130897
7/26 BPW

	Check relationship	Living	Deceased
	MOTHER		✓
	STEPMOTHER (For the year prior to commencement of service)		
NAME AND ADDRESS	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)		

Sister.
Giuseppa Barbera,
Via Stovigliai,
Mazara del Vallo,
Prov. of Trapani, Italy

Veterans Bureau Claim Number _____
29/156

QM 293 C-R

September 21, 1923.

Mrs. Rosa Conco,
6 Salemi Mazara-Del Valla,
Sicily, Italy.

Dear Madam:

The Quartermaster General desires you to be informed that the permanent grave of Private Andrea Barbieri, Company A, 306th Infantry, is at Plot E, Row 2, Grave 17, 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. 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.

You are assured in effecting removal of the remains, the utmost care and reverence were exercised and more than willingly accorded by those who performed 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,

H.H. CRAIL

Assistant.

WBR

RD
23/592/ARK

Co. A. 306th Inf.
77th Division.

BARBIERI, Andrea - Pvt. 1681856,
Home: 95 Irving St. Winshester,
Mass.

Wounded by sniper through neck and right cheek Oct.1 and sent to hospital. No subsequent record. This soldier was in company action he was a member of the 153rd Brigade Combat Liaison platoon when wounded under cover in the Argonne Forest.

Informant: Markes, Lawrence - Sgt. 1700787
Co. A. 306th Inf.
Home; 1007 DecaturSt. Brooklyn N.Y.

Emergency address:
Mrs. Rose Barbieri,
Sicili. Italy.

Searcher:

7/26/2

G.P.

FILE UNDER NO.

INDEX SHEET

SYNOPSIS

DOCUMENT FILED UNDER NO.

INSTRUCTIONS.—Under "Synopsis" make brief entry showing date of communication and from whom received and synopsis sufficient to identify the papers. When these index sheets become numerous under a subject they will be entered on the consolidated index sheet and then destroyed.

3—6642

Q. M. C. Form 489
Revised July 26, 1918

COMPILATION OF DISPOSITION OF REMAINS DATA

File #78875

I. Location Index Card:

(a) Name BARBIERI, Andrea. Ser. No. 1681856

(b) Rank Private. Organization Co. A. 306th Inf.

(c) Date of death 10/1/18 (d) Cause of death DWRIA

TYP. jek

CKR. GB

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

(a) Grave No. 19 Row --- Plot 1 Sec. 83 TYP. jek

(b) Emerg. Address Rosa Barbieri. (Mother.) Sicily, Italy. (Over)

III. ~~Files of soldiers dying from wounds~~ CKR. GB

no card in file AR 4-19-21

IV. A. G. O. Disposition Card: Date of receipt

(a) Name (b) Relationship

(c) Address

(d) Remains to be brought to U. S.?

(e) To be interred in National Cemetery in U. S. at

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

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

Examiner's Initials Date , 1920.

V. A. G. O. Correspondence shows communication from

, dated

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

Examiner's Initials Date , 1920.

VI. G. R. S. Files, Correspondence—shows as follows:

no request for disposition

(a) Cancellation memos referred to? yes

Examiner's Initials HR Date 4-19, 1920.

COUNTRY France. Cemetery No. 1232-Sec. 83 Sheet No. 11

G. R. S. Form No. 115
Amended April 6, 1920

3—7729

Make Form No. 114

Checked 4/24/21 F. J. P.

4/1/21

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 4/14-8/21, ~~1920~~

Dec. #83

Para. 2 - Not to be returned

LAS

IX. **CORRECTIONS**

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

X. SUSPENSION REMARKS: B/a. W.R.

Mrs. Rosa Genco (m)

6- Salemi Mazara Del Valla

Sicily, Italy.

(6-28-21) H

G.R.S. FORM #114-A STATION Romagne sous Montfaucon.1232

To be prepared in triplicate DATE October 4th 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	BARBIERI, Andrea	10. Name	----IARI, Andrea
2. No.	1681856	11. No.	1681856
3. Rank	Pvt.	12. Rank	
4. Org.	Co. A, 306th Inf.	13. Org.	
5. D.D.	Oct. 1st, 1918	14. (a) D.D.	
6. C.D.	DOW	(b) D.B.	No discrepancy.

Discrepancy found upon disinterment

7. Grave No.	19 Sec. 83	15. Grave No.	Sec.
8. Plot	1 Row	16. Plot	Row
9.		17.	No discrepancy.

18. Cemetery Argonne Amer. 19. Commune or town Romagne/s/Montfaucon

20. Dept. or County Meuse 21. Country France

22. G.R.S. Hdqrs. Code No. 1232 Sec 83

23. Disinterred (Date) Oct. 4th 1921 By A.C.DAWE

24. Inscription on grave marker:

Name Andrea Barbieri Serial No. 1681856

Rank Pvt. Organization Co. A. 306 Inf.

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

Rex M. Moody. Rex M Moody
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). No, other means of identification or effects found. Tag on body gives part of last name as, "----arai. tari"

27. Condition of body Badly decomposed, features unrecognizable.

28. Nature of burial Uniform raincoat and wooden box.

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? See par. 10.

30. Body prepared and placed in casket: Date Oct. 4th 1921 By A?C.DAWE

31. Casket sealed by A.C.DAWE

AUDITED

Signature of Embalmer, (Supervisor) A. C. Dawe
A.C.DAWE

SHIPMENT. (Show actual marking of box.) Box No. C-8211

32. Designation of body:

Name BARBIERI, Andrea Serial No. 1681856

Rank Pvt. Organization Co. A, 306th Inf.

33. Consigned to:

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

34. Casket boxed and marked (Date) October 4th 21 By A.C.DAME

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

F B Daniel

Signature of G.R.S. Inspector F.B.DANIEL CAPT. Q.M.C.

36. Remarks

None.

October 4th 1921

37. Shipped from point of Operation: (Date)

Morgue Romagne sous Montfaucon.

To point of Concentration

W.J.ROYED (Name) Albert M. Jackson

Convoyer Signature Shipping Officer Capt. Q.M.C. QMC

38. Received at Railhead or Point of Concentration: Date

By G.R.S. Representative

39. Shipped from Railhead or Point of Concentration: Date

To Permanent Cemetery

(Name)

Convoyer Signature Shipping Officer

40. Received: Date

G.R.S. Representative

41. Reinterred Meuse Argonne Cemetery # 1232 Oct 4th 1921

(Date)

42. Grave No. Gr 31 block E row 32 Section

43. Plot Row

G.R.S. Representative James W. Younger

James W. Younger, Capt QMC.

of

jjt.

Concentration.

G. R. S. Form. No. 16-A

Place Romagne 1232.

REPORT OF DISINTERMENT AND REBURIAL

Date Oct. 4, 1921.

1. Remains of BARBIERI, Andrea Serial Number 6181856

Rank Pvt. Organization Co. A 306th Inf.

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

Oct. 4, 1921 Gr 19, Sec 82. Plot 1

By: Group 7 Unit Sec 2.

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

Oct 4th 1921 Meuse Argonne Cemetery # 1232 gr 31 block E row 32

By: Group re-burial S Unit Nature of reburial unlimed casket

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

wooden box and ~~mx~~ uniform. and raincoat. badly decomposed, features not recognizable.

5. (a) Identification tags: Buried with body? yes. On grave marker? yes.
(Partly corroded)

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

Cross Tags reads "Andrea Barbiari 1681856 U.S.A."

Tag on body reads "Andrea - iari, 1681856, USA"

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

(a) Height (actual measurement) impossible to determine.

(b) Weight (estimated) do

(c) Hair—Color do

Quantity do

Characteristics do

(d) Hair on face—Color do

Location do

Quantity do

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

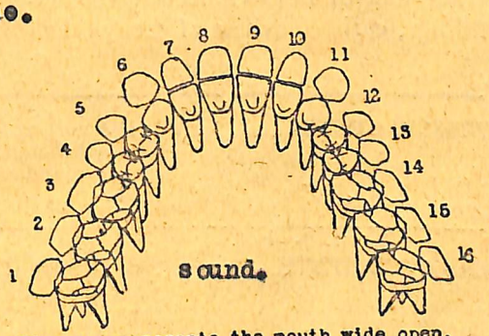
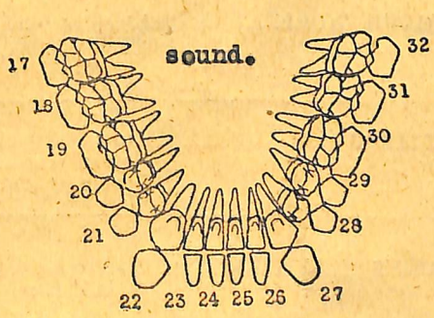


Diagram represents the mouth wide open.



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

lower jaw fractured behind number 17 tooth.

7. Disinterment supervised by A. C. Dawe. Approved: F. B. Daniel
A.C.Dawe. F.B.Daniel. Capt. QMC.
(Title)

8. Reburial supervised by W. B. Sheilds Approved: James W. Younger
W. B. Sheilds James W. Younger, Capt QMC.
(Title)

jjt

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.

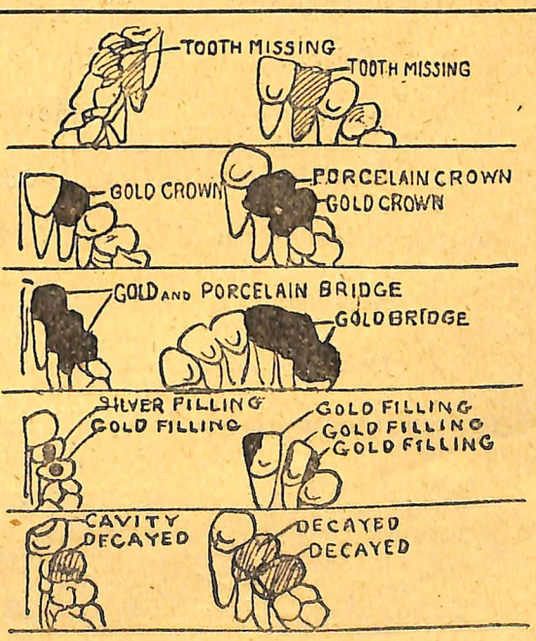
MISSING TEETH.....All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus:

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.

COMPILATION OF DISPOSITION OF REMAINS DATA

I. Location Index Card: File #78875

(a) Name BARBIERI, Andrea. Ser. No. 1681856

(b) Rank Private. Organization Co. A. 306th Inf.

(c) Date of death 10/1/18 (d) Cause of death HWR IA

TYP. jek

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

(a) Grave No. 19 Row --- Plot 1 Sec. 83 TYP. jek

(b) Emerg. Address Rosa Barbieri. (Mother.) Sicily, Italy.

III. ~~Files of soldiers dying from contagious diseases~~ CKR.

IV. Information on which advice to Europe in letter of transmittal was based:

V. Following advice forwarded to Europe by { cable on ....., 192 / letter of transmittal on 4/28/21, ~~192~~

Sec. #83

Par. 2 - Not to be returned

VI. Form 115 forwarded to G. R. S., Hoboken, N. J., LAS, 192

VII. Supplementary Requests.

Date of and source.	Relationship and name.	Desires.	Action taken.

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

COUNTRY Cemetery No. ..... Sheet No. .....

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

3—8020

France. 1232-Sec. 83 11

AG 7/1/21

OSP-SS
Form No. 1009

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

Revised

NAME OF DECEASED SOLDIER	CEMETERY NO.	DATE
Harlow C.W.		
Barbieri, Andrea, Pvt.	1232 - Sec. 83 - 11	4/25/21
SERIAL NUMBER / ORGANIZATION		DATE OF DEATH
1681856 / Co. A, 306th Inf.		10/1/18

Copy forwarded to
Adjustment Department
Date 6-28-21-H

WAR RISK INSURANCE INFORMATION

C-130897
I-103710

DATE

TWENTY-EIGHT 75/100 DOLLARS $28.75

PERSON NAMED BY SOLDIER TO BE BENEFICIARY OF INSURANCE — RELATIONSHIP

MRS ROSA GENCO

I-103710

6 SALEMI
ADDRESS MAZARA DEL VALLA
SICILY ITALY

M
A

PERSON RECEIVING DEATH COMPENSATION — RELATIONSHIP

TWENTY DOLLARS ONLY $20.00

MRS ROSA GENCO

C-130897

6 SALEMI MAZARA DEL VALLA
SICILY
ITALY

M
A

S/1868/LML

Barbieri, Andrea 1,6[illegible],856 Deceased
Pvt. Co. A 305th Inf[illegible]
EA-Mother
LM/DRSEC/6&B
12/9/19

78875

WAR DEPARTMENT,
THE ADJUTANT GENERAL'S OFFICE,
WASHINGTON.

Dec. 9, 1919

Mrs. Rosa Barbieri, mother
Sicily, Italy.

AGO CARD RETURNED UNCLAIMED

Dear Madam:

The War Department desires to ascertain the wishes of the families of officers, enlisted men, and civilian employees regarding the permanent disposition of the bodies of those who have died overseas.

The original plan of the Department was to deliver the body in every case at the home address of the deceased to the person legally entitled to dispose of the remains. A desire has been expressed, however, in numerous instances to have the body remain abroad, and General Pershing is likely soon to enter into negotiations with the French and Allied Governments with the view of establishing permanent cemeteries for members of the American Expeditionary Forces. Marshal Petain in a most courteous letter has informed General Pershing that "France would be happy and proud to retain the bodies of the American victims who have fallen upon her soil."

A bill is now before Congress for the establishment of "Fields of Honor" abroad, which will insure future care by the United States Government as national cemeteries are now cared for. Burials have been made heretofore in cemeteries of the Allied nations or at or near the battle field in land set apart for this purpose as a cemetery, and religious services in accordance with the rites of the Protestant, Catholic, or Hebrew faith have been held at the grave.

In case the remains of a deceased soldier are returned to the United States they will be interred either at the former home of the deceased or at a national cemetery, according to the wishes of the one authorized to direct the disposition of the remains, and all expenses, including transportation, casket, shipping case, flag, and the preparation of the remains for shipment, will be paid by the United States. Hire of a hearse and other burial expenses incurred at the home of the deceased may be paid, on application by the relatives, by the Bureau of War Risk Insurance, Treasury Department.

In order that the proper disposition of the remains may be made, and that such disposition be directed by the person entitled to do so, the War Department will recognize the right to direct the disposition of remains in the following order:

In the case of an unmarried man—

(1) Father; (2) mother, if father is dead; (3) brother, if both parents are dead; (4) sister, if both parents are dead and there are no brothers.

In the case of a married man—

(1) Wife; (2) parents or children and other relatives in order set forth above.

It is desired that the information indicated on the inclosed card be furnished concerning the person named thereon at the earliest practicable date. If the card is received by some one not authorized to direct the disposition to be made of the remains, please deliver this circular and the card to the person who is entitled to do so.

The Department is unable to state when it will be possible to begin the removal of the remains of the soldiers, but the information requested is being collected at this time in order that there may be no delay when the time comes for such removal.

In returning the card please use the inclosed addressed penalty envelope, which requires no postage.

Very respectfully,

P. C. HARRIS,
The Adjutant General.

3—6703

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

7887

REGISTRATION CARD FILE
SECTION# 2 "B"
FILE #~~35910~~

25 FEV 19

MEMO FOR : G.R.S. representative, C.R.O.

SUBJECT : Information required for G R S.

I. Items checked are to be completed :

(✓)	Surname :	Barbian	(Barbieri)
(✓)	Number :	1681856	(1681656)
( )	First name :	Andrea	1681856
( )	Rank :	Pvt.	
( )	Company :	"A"	
( )	Organization	305th Inf.	(306th Inf)
(✓)	Date of death :	10/1/18	
( )	Cause :	W/A	
( )	Place :		

Location of hospital :

Number » »
Class » »

( ) Relative :
( ) Relationship :
( ) Address :

( ) Authority :
Cablegram No :
Telegram from :

dated : 11/12/18 (12/13/18)

(✓) Reported to Washington :
C.C. Nos : CC 292 (CC 335)

(Underscore the "official" C.C.)

(✓) Remarks :

Official report?

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

Initials of reporter : REG

1. G.[redacted]S. Form No. 1. 18875 Hq. G. R. S. File

2. Soldier's No. 1681[redacted]6

3. Andrea B[redacted]brare
Surname (in block letters) First Name and Initials

4. Pvt.
Rank Company Regt. or Corps

5. Sept.27/18 GSW.
Date of Death Cause, if known

6. Sept.28/18 AEF.
Date of Burial Cemetery

7. LaChalade Meuse
Town or Commune (in block letters) Department

8. 14
Grave No. Plot No. or Letter

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

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

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

.....

.....

12. .....
Map Reference, if interment is outside of cemetery

.....

13. .....
Give name of Chaplain or Burial Officer

Signed Sgt.R.L.Wolf

21 OCT Reçu

Group...2...Unit...A...G. R. S.

78875

GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

Barbiari .... 1681856 .... Andrea
(Surname.) (Number.) (First Name and Initials.)

Pvt ....
(Rank.) (Organization.)

DATE OF BURIAL..Oct. 1st. ....

PLACE OF BURIAL..La Chalade. ....

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

...Map Foret D argonne...

........66.7 - 97.7 ....

....

GRAVE NUMBER....14. ....

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

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

IDENTIFICATION TAGS:

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

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

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

CMME. La Chalade (meuse)

(C- 150)SHT. 355W COORD {E 297.7 / N 266.7

(C-)SHT. COORD

....

REPORTED BY:

Samuel E. Dougherty 1st Lt. Q.M.

(Signature and Rank of Reporting Officer.)

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

Communist List No. 462-150

Daily Report No.

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

BIABIERI 1681856 Andrea
(Surname). (Number). (First Name and Initials).

Pvt. Co. A. 308th Infantry
(Rank). (Organization).

PLACE OF DEATH: .....

CAUSE OF DEATH: .....

DATE OF BURIAL: .....

PLACE OF BURIAL: .....

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

See correspondance - WHITE, Albert F

.....

GRAVE NUMBER: .....

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

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

IDENTIFICATION TAGS:

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: Rosa Biabieri

ADDRESS: Sicily Italy

RELATIONSHIP: Mother

REPORTED BY:

.....
(Signature and Rank of Reporting Officer).

G.R.S. FORM NO. 12.

GENERAL HEADQUARTERS
AMERICAN EXPEDITIONARY FORCES
ADJUTANT GENERAL'S OFFICE

FROM : ADJUTANT GENERAL.

TO : C.O., Co. "A", 306th Infantry

SUBJECT : Information for burial Register.

1. You are directed to transmit without delay to the Chief, Graves Registration Service, the information indicated on enclosed Grave Location Blank as necessary for the completion of official records.

By Command of General Pershing:

Robert C. Davis
Adjutant General.

Note: ☑

In case this item is checked, you will note hereon:

Nearest relative of deceased:

Rosa Biabieri

Relationship: mother

Address: Sicily, Italy

File No. Reg. Cards. 78875

May 3 1919

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

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

Subject: Information required for G.R.S.

1. Items checked are to be completed:

( ) Surname: Barbieri
( ) Number:- 1681856
( ) First Name: Andrea.
( ) Rank: Pvt.
( ) Company: A.
( ) Organization: 306th Inf.
( ) Date of Death: Oct.1st 1918.
( ) Cause:
( ) Place:

Location of hospital:

Number " "
Class " "

(✓) Relative: Mrs Rosa Barbieri
( ) Relationship: Mother
( ) Address: Sicily, Italy.

( ) Authority:
Cablegram No.: 335
Telegram from:

dated:

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

(Underscore the "official" C.C.)

( ) Remarks:

( ) Show present status on reverse side.

Burial notification returned, advise correct and complete addr of N.R.

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

Initials of Reporter:

G.R.S. Fo[illegible] No. [illegible]

Place NEUFCHATEAU

Date June 12th, 1919.

REPORT OF DISINTERMENT AND REBURIAL

Remains of:

Name: BARBIARI, Andrea Number 1681856

Rank: Unkn Organization Unkn

Disinterment and Reburial made by Group: Unit

Disinterred (Date) From (Give complete location)

6 2nd June 1919. Grave #14. B/A Cty. LaCHALADE, MEUSE.

Map 35 SW 297.6 E 266.5 N.

Reburied (Date) In (Give complete location)

1232

2nd June 1919. Grave #19, Sec. 83, Plot 1/

ARGONNE AMERICAN CEMETERY No. 1232

ROMAGNE MEUSE

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

Burial good Buried in uniform Body in fair condition

Was one identification tag found upon the body ? Yes

What other means of identification were found on the body? None

10960

CONFIRMED No. D.....

Note:

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

Supervised by: Lt. Lewis

R. H. ROSENTHAL
2nd Lieut. Q.M.C.U.S.A.
C.O. Group Unit

H.O'K

OSP-SS
Form No. 1009

COPY

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

FILE

Harlow C.W.
NAME OF DECEASED SOLDIER | CEMETERY NO. | DATE

Barbieri, Andrea, Pvt. | 1232 - Sec. 83 - 11 | 4/25/21
SERIAL NUMBER | ORGANIZATION | DATE OF DEATH

1681856 | Co. A, 306th Inf. | 10/1/18

WAR RISK INSURANCE INFORMATION

Original Attached to
Form 115
Date 6-28-21 H

DATE

Mrs. Rosa Genco — M.
PERSON NAMED BY SOLDIER TO BE BENEFICIARY OF INSURANCE | RELATIONSHIP

6- Salemi Mazara-Del Valla
ADDRESS — Sicily, Italy.

Adjustment Made Apl. 28 1922
File No. 78875

PERSON RECEIVING DEATH COMPENSATION | RELATIONSHIP

S/1868/LML

GRS Form 121a

File No. 78875

CEMETERIAL DIVISION
REGISTRATION SECTION

FILE

September 20, 1921 192 .

MEMO FOR:
Cards Department.

1.
CASE OF:

Company A. 306th Infantry
ORGANIZATION (Old)

BIABIERI # 1681856 Andrea - Private
(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

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)

5 X 8 White Card File No. 30444 Canceled to 5 X 8 White Card File No. 78875
BARBIERI # 1681856 Andrea

BY: D. T. Dodson

Adjustment Section.
(Department)

5 x 8 card was sent to file.

Corrections made
on Organization
File Card:

By mjb

S/1105/LML

Adjustment Made-

AUG 24 192.

File No. 78875

WAR DEPARTMENT
Office of the Quartermaster General of the Army
Washington

G.R.S. Form 8-W-A-H
Information requested of A.G.O.

Date 4-21-21

File No. Requisition

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

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 BARBIERI, O K

b. Christian name Andrea O K

c. Serial Number 1681856 O K

d. Organization Co.A, 306th Inf. O K

e. Rank Pvt. O K

f. Date of death 10-1-18 O K

g. Cause of death DWRIA

h. Authority (C.O.#)

i. Emergency address Rosa Barbieri Sicily, 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

Donnelly - ADC-APS-Wy 8 - 4-22-21

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

BY: H. J. Conner

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

CW

CEMETERY NO: 1232-Sec. 83

SHEET NO: 11

TYPED BY: VH.

S/713/LML

Rec'd World War Div. Date JUL 20 1921

REC'D MAIL SECTION, W.W. Div., A. G. O.
JUL 20 1921 4

WAR DEPARTMENT.

THE ADJUTANT GENERAL'S OFFICE,

OFFICIAL BUSINESS

Return Washington Navy Yard

WASHINGTON D.C. DEC 10 6 PM 19

PENALTY FOR PRIVATE USE, $300.

U.S. POSTAGE 5 CENTS 5

Rec'd A. G. O. FEB 11 1920

Rec'd C. S. C. Div. A. G. O. FEB 11 1920

Feb 7 1920

THRIVE by THRIFT
Buy War Savings Stamps

WAR DEPARTMENT.
THE ADJUTANT GENERAL'S OFFICE,

OFFICIAL BUSINESS.

PENALTY FOR PRIVATE USE, $300.

THE ADJUTANT GENERAL,

WAR DEPARTMENT,

WASHINGTON, D. C.

(DISPOSAL OF REMAINS)