

gc

DATE

1. **NAME** BARTON, Edward **SERIAL No.** 948847  
**RANK** Pvt. **ORGANIZATION & DIVISION** Co.K., 166th Inf. 42nd Div.  
**GRAVE LOCATION** American Cty. Chaumont. Haute-Marne  
**CTY. NAME** **NUMBER** 10  
**GRAVE** 111 **ROW** C **PLOT**

2. **ORIGINAL BATTLE AREA GRAVE LOCATION** 111 **CHAUMONT (H.M.)** *cty 10*  
**COORDINATES** E. 307.6 N; 150.1  
**GRAVE** **COMMUNE** **DEPT.**

**CONCENTRATED TO** Mar. 25, 1921, 111 C  
**DATE** **GRAVE** **ROW** **PLOT**  
**AEF. Cem. Chaumont (HM.)** 10  
**CEMETERY** **CTY. NUMBER**

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

No tag found with body (From data on form 16-A.) No other data.

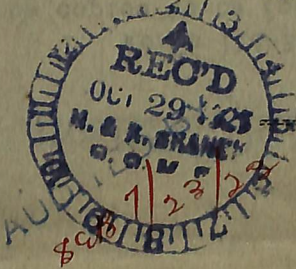
**SUBSEQUENT REBURIALS** Not of record *Feb. 16 - 1918*  
**DATE OF DEATH** **DATE** **GRAVE** **ROW** **PLOT** **CEMETERY**

**STATE FROM WHICH HE CAME** Ohio

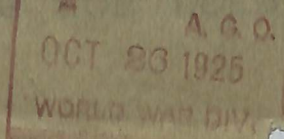
**MEDALS OR DECORATIONS AWARDED** *None* **DATE** **GRAVE** **ROW** **PLOT** **CEMETERY**

**SIGNATURE, AREA SUPERVISOR** *Walter F. Brown*  
 Walter F. BROWN, CAPT. QMC., Supervisor Area N°. 4

3. **FINAL GRAVE LOCATION** August 11th, 1922. 1 1 B  
**DATE** **GRAVE** **ROW** **Block**



**St. Mihiel American Cemetery, THIAUCOURT, (M.-et-M.)**  
**CEMETERY**



*144 7-3*

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.

C° K - 166th Infantry -  
42nd Division.

BARTON, Edward - Priv. 94847  
Home address: Prospect - Ohio.

This soldier died of lobar pneumonia at Base Hospital N° 15,  
February 16th 1918.  
No record of burial place.

No informant given.

Not signed.

AL.

# REPORT OF DISINTERMENT AND REBURIAL

Date March 25, 1921

1. REMAINS OF Barton, Edward SERIAL NUMBER no number

RANK Pvt. ORGANIZATION Co. K. 166th. Inf.

2. Disinterred (date): Mar. 25, 1921 From (give complete location): Grave 111, plot C, Amer. Cem. No. 10

By: Group 3 Unit 2

3. Reburied (date): Mar. 25, 1921 In (give complete location): Grave 111, plot C, Amer. Cem. No. 10

By: Group 3 Unit 2 Nature of reburial Burlap and wooden box

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

Box and U.S. uniform

Body badly decomposed, features unrecognizable

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

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

Body in grave 109 identified.

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

estimated

(a) Height (~~actual measurement~~) 5 ft. 8 in.

(b) Weight (estimated) Impossible to determine

(c) Hair—Color Brown

Quantity Impossible to determine

Characteristics Straight and long

(d) Hair on face—Color Impossible to determine

Location do

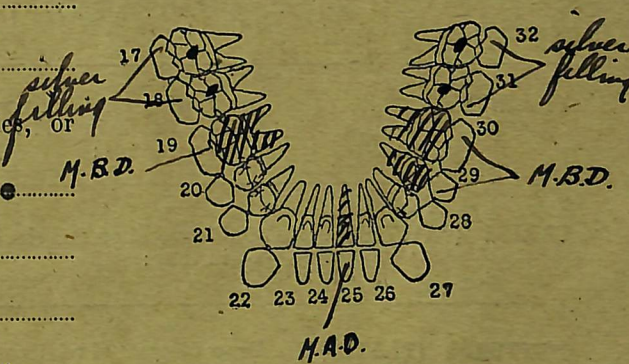
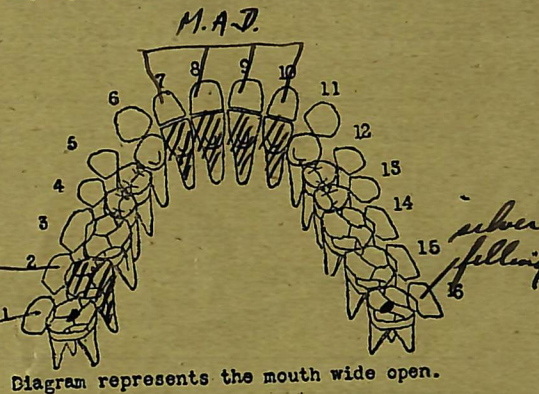
Quantity do

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

missing parts) Impossible to determine

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

Impossible to determine



D-50490

Checker: J. B. Lyon  
F. B. Lyon

7. Disinterment supervised by R. F. O'Leary  
~~S. D. Archer 1st Lt. QMC~~

Approved: [Signature]  
R. L. Fain Capt. QMC  
(Title) Master of Section






8. Reburial supervised by R. F. O'Leary  
~~S. D. Archer 1st Lt. QMC~~

Approved: [Signature]  
R. L. Fain Capt. QMC  
(Title) Master of Section

**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.

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

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.

*Entered on list.*

France

BARTON, Edward

Private, Co. K, 166th Inf.

Died Feb. 16/18, in France, of pneumonia.

(AGO reports "Not Identified" 293.3-2/21/18)

Emergency address: Charles Barton,  
cousin, ~~FDRFD~~ #4, Cooleyville,  
Ohio.

CODE SLIP



HEADING	SUB HEADING	NO. OF COLS	CODE	
NAME	Banton, Edwin	Bar	3	218
	CEMETERY	1233	1	3
BURIED	GRAVE	1	2	01
	ROW	1	2	01
	BLOCK	B.	1	2
STATE	Ohio		2	41
RANK	Priv.		1	2
DIVISION	42nd		2	42
ORGANIZATION	166th		3	166
ARM	Inf.		1	1
MARITAL	Wife	No	1	2
NAME	Congrove		3	357
RESIDENCE	Mrs Dullie	STATE W. Va.	2	37
	Bellville, W. Va.	COUNTY Wood	2	57
		CITY Bellville	3	57
RELATION	Mother		1	1
OTHER			1	
ELIGIBILITY	plead		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**  
 APR 1 1932  
 AL

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Barton, Edward

August 5, 1929

Mrs. Sallie Congrove,  
Belleville, West Virginia

Dear Madam:

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 sister of the late Private Edward Barton, Co. K. 166th Inf., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-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?

*He is not*

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.

*Has not*

For The Quartermaster General,

Very truly yours,

*John T. Harris*

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

Barton, Edward

August 5, 1929

Mrs. Annie May Fleater,  
Havenswood, W. Virginia  
Jackson County.

Dear Madam:

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 **sister of the late Private Edward Barton, Co. K, 166th Inf., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-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.

C 2 1

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C  
Barton, Edward

May 25, 1929.  
X C 7 154

Mr. Charles Barton,  
Route #4,  
Coelville, Ohio.

(S) Sallie Congrove,  
Belleville, W. Va.

(S) Annie May Fleater  
Ravenswood, W. Va.  
Jackson Co.

Dear Sir:

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

The records of this office show that you are the cousin of the late Private Edward Barton, Co. K, 166th Inf., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, France.

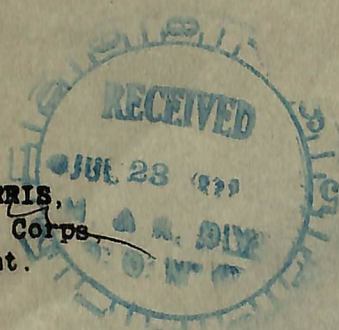
Will you please advise this office whether or not he is survived by a mother or widow who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish the full names and addresses of the mother and widow in order that action may be taken to extend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

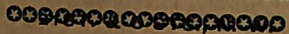
For The Quartermaster General,

Very truly yours,

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

2 incls.  
Act of Congress.  
Envelope.

WAR DEPARTMENT



WASHINGTON, D. C.

OFFICIAL BUSINESS

OFFICE OF THE QUARTERMASTER GENERAL

PENALTY FOR PRIVATE USE TO AVOID

PAYMENT OF POSTAGE, \$300.



REASON FOR  
NON-DELIVERY  
CHECKED  
UNCLAIMED \_\_\_\_\_ UNKNOWN \_\_\_\_\_  
DECEASED \_\_\_\_\_ FOR BETTER ADDRESS \_\_\_\_\_  
MOVED LEFT NO ADDRESS \_\_\_\_\_ REFUSED \_\_\_\_\_  
NO SUCH POST OFFICE IN STATE NAMED \_\_\_\_\_



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

July 3, 1930.

Barton, Edward 1233 S

Mrs. Sallie Congrove,  
Belleville, W. Va.

Dear Madam:

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

Barton, Edward

August 5, 1929

Mrs. Annie May Fleeter,  
Ravenswood, W. Virginia  
Jackson County.

Dear Madam:

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 sister of the late Private Edward Barton, Co. K, 166th Inf., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-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

Barton, Edward

August 5, 1929

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Belleville, West Virginia

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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".

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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  
Barton, Edward

May 25, 1929.

Mr. Charles Barton,  
Route #4,  
Coolville, Ohio.

Dear Sir:

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

The records of this office show that you are the cousin of the late Private Edward Barton, Co. K, 166th 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  
July 29th  
1929

IN REPLY REFER TO QM 293 A-C

Barton, Edward

Mrs. Annie May Fleater  
Jackson County  
Ravenswood, W. Va.

Dear Madam:

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".

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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.

ORIGINAL PAPER FILED

CROSS INDEX

QM 293 A-C

Weinberger, Frank

Nov. 3, 1924.

Director of the Veterans' Bureau,  
Washington, D. C.

Dear Sir:

The Quartermaster General desires that the inclosed Forms 3101 be returned to your Bureau with the following information:

WEINBERGER, Frank, Pvt. 3113087, Co. D, 316th Inf. -  
Body was received by Mr. Joseph W. Hessling,  
Honesdale, Pa. on May 26, 1921, for private interment.

~~BARTON, Edward, Pvt., Co. K, 166th Inf. -~~  
Body has been permanently buried in Grave 1, Row 1,  
Block B, St. Mihiel American Cemetery, Thioncourt,  
Mourthe-et-Moselle, France.

Very truly yours,

R. P. HARBOLD,  
Major, Q. M. G.,  
Assistant.

2 incs.  
Forms 3101.

O. Q. M. G. ~~X~~ 293 Barton, Edward

✓  
QM 293 C.R

Barton Edward

November 22, 1923.

Mr. Charles Barton,  
Route #4,  
Coolville, Ohio.

Dear Sir:

The Quartermaster General desires you to be informed that the permanent grave of Private Edward Barton, Company K, 166th Infantry, is Grave 1, Row 1, Block B, St. Mihiel American Cemetery, Thiaucourt, Mourthe-et-Moselle, 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,

R. D. FOSTER  
Assistant.

RD



23/668/ARK

Dup

Barton

Edward

(Surname.)

(Christian name in full.)

(Army serial number.)

Pvt

Co K 166 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

RETURNED  
UNCLAIMED

G. R. S. Form No. 115

COUNTRY FRANCE

Cemetery No. 10

Sheet No. 28

File No. 53

*Excluded from  
Cancellation 5/22  
which 4.33  
Mach 2  
6-5-22*

COMPILATION N/R REQUESTS

*Encl: 6-30-17  
Delaware, Ohio*

I. DATA COMPILATION

A. Location Index Card:-

(1) Name BARTON, Edward Ser. No. none ) TYP. MCH  
 (2) Rank Pvt. Organization Co. K, 166th Inf. ) CKR. EP  
 (3) Date of death 2/16/18 )

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

(4) Cause of death Lobar Pneumonia ) TYP. FR *(over)*  
 (5) Grave No 111 Row --- Plot C. Sect. --- ) CKR. *[Signature]*

II. FILES EXAMINATION

A. Files of soldiers dying from contagious diseases; No card

B. A. G. O. DISPOSITION CARD Date of receipt 5-4-20

(6) Relationship Record in file  
 (7) Name \_\_\_\_\_  
 (8) Address \_\_\_\_\_  
 (9) Desires remains brought to U. S.? \_\_\_\_\_  
 (10) Desires remains brought to U. S. and interred in National Cemetery at \_\_\_\_\_  
 (11) If brought back, what shipping instructions? \_\_\_\_\_

C. A. G. O. CORRESPONDENCE Date of communication \_\_\_\_\_

(12) Does correspondence Change or qualify request as made on A. G. O. card? If so, specify such information. \_\_\_\_\_

*No Correspondence*  
(13) A. G. O. Files EXAMINED by [Signature] (Date) 5-4

D (14) G. R. S. Files - Correspondence. (Has reference been made to File No. Cancellation memos.?) Yes-aa. Does such correspondence, if containing request for disposition, reconcile with that of A. G. O.? ---  
 (Specify "Yes or "No".) If "No", give date of communication, the name, address, and relationship and substance of request.

*No request for disposition*

(15) G. R. S. Files EXAMINED by [Signature] (Date) \_\_\_\_\_

FORM 115 - A COMPLETED

(over) CARDED

*4-5-22-21*



COMPLETION OF DISPOSITION OF REMAINS

Emil, 6-30-17  
Delaware, Ohio  
File No. 53

(1-14-21)  
5/12/22  
max B  
6-5-22

I. LOCATION INDEX CARD:

(a) Name BARTON, Edward. Ser. No. 7751 } TYP MCH  
(b) Rank Pvt. Organization Co. K. 166th Inf. } EP  
(c) Date of death 2/16/18 Cause of death Lobar Pneumonia } jek

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

(a) Grave No. 111 Row --- Plot C Sect. --- TYP FR  
(b) Emerg. Address ---

III. Files of soldiers dying from contagious diseases No Card. CKR EML

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

no request as to disposition aen 1/6/21

P. V. R. & A. Mr Charles Barton (cousin) R. # 4 Coatesville, Ohio

V. Following advice forwarded to Europe by (cable on 192  
(Letter of transmittal on DEC 27 1920  
aen

VI. Form 115 forwarded to G.R.S. Hoboken, N.J. FEB 24 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. 192

COUNTRY France. CEMETERY NO. 10 SHEET NO. 28

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

S-666/MB

25-2-21-21

To be prepared in triplicate.

DATE Feb. 8th, 1922

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

go

## DISINTERMENT

## COMPARATIVE REPORT

Records of G.R.S. Headquarters.

Discrepancy found upon exhumation of body

1. Name BARTON, Edward 10. Name \_\_\_\_\_  
 2. No. --- 11. No. \_\_\_\_\_  
 3. Rank Pvt. 12. Rank \_\_\_\_\_  
 4. Org. Co.K., 166th Inf. 13. Org. \_\_\_\_\_  
 5. D.D. Feb 16th. 18 14. (a) D.D. \_\_\_\_\_  
 6. C.D. DOD (b) D.B. \_\_\_\_\_

Discrepancy found upon disinterment

7. Grave No. 111 Sec. \_\_\_\_\_ 15. Grave No. \_\_\_\_\_ Sec. \_\_\_\_\_  
 8. Plot C Row \_\_\_\_\_ 16. Plot \_\_\_\_\_ Row \_\_\_\_\_  
 9. \_\_\_\_\_ 17. No discrep.  
 18. Cemetery American 19. Commune or town Chaumont  
 20. Dept. or County Haute-Marne 21. Country France.  
 22. G.R.S. Hdqrs. Code No. 10  
 23. Disinterred (Date) Feb. 8th, 1922 By A. R. Cheney  
 24. Inscription on grave marker:  
 Name Edward Barton Serial No. - -  
 Rank Pvt. Organization Co. K., 166th Inf.  
 25. Was identification disc found on grave marker? No On body? No

Signature Junior Technical Assistant

RLD:

## 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 on body agrees with G. R. S. form.  
 27. Condition of body Badly decomposed, features unrecognizable.  
 28. Nature of burial Wooden box and burlap.  
 29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? No discrep.  
 30. Body prepared and placed in casket: Date Feb. 8th, 1922 By A. R. Cheney  
 31. Casket sealed by A. R. Cheney,  
 Signature of Embalmer, (Supervisor) A. R. Cheney

2038

SHIPMENT. (Show actual marking of box.) Box No. C-26657

32. Designation of body:

Name Edward BARTON Serial No. --

Rank Pvt. Organization Co.K., 166th Inf.

33. Consigned to:

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

34. Casket boxed and marked (Date) Feb. 8th, 1922 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. Rain, Capt., QMC.

36. Remarks

37. Shipped from point of Operation: (Date) Feb. 8th, 1922

To point of Concentration Chaumont, (H te. Marne) (Name)

Convoyer James Flynn Signature Shipping Officer Walter F. Brown, Capt., QMC

38. Received at Railhead or Point of Concentration: Date Captain, Q.M. Corps, U.S.A.

By G.R.S. Representative C. J. BLAKE

39. Shipped from Railhead or Point of Concentration: Date Captain, Q. M. Corps, U. S. Army

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

Convoyer M. PLOTKIN Signature Shipping Officer WALTER F. BROWN. CAPT. Q.M.C.

40. Received: Date 23 FEB 1922

G.R.S. Representative G. D. GAMBLE, Captain, O. M. C.,

41. Reinterred, Aug. 11, 1922 (Date)

42. Grave No. 1 Section

43. ~~Blk. B~~ Row 1

G.R.S. Representative A. E. Dewey, 1st. Lieut. Q.M.C.

AUDITED BY PCB 7/23/23

# REPORT OF DISINTERMENT AND REBURIAL

1. REMAINS OF BARTON, Edward SERIAL NUMBER       

RANK Pvt. ORGANIZATION Co. K. 166th Inf.

2. Disinterred (date): Feb. 8th, 1922 From (give complete location): Plot C. Gr. 111/ Cem. 10,

By: Group 3 Unit        Sec. 4

3. Reburied (date): Aug. 11, 1922 In (give complete location): Cem. 1235. Grave 1, Block B, Row 1

By: Group Reburial. Unit        Nature of reburial Casket and shipping case.

4. Report as to nature of original burial and condition of body upon disinterment: Badly decomposed, features unrecognizable. Wooden box and burlap.

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

(b) Other means of identification found upon disinterment, and general remarks: Bottle record on body agrees with G. R. S. form.

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

(a) Height (actual measurement) Impossible to determine

(b) Weight (estimated) Impossible to determine

(c) Hair—Color Impossible to determine

Quantity Impossible to determine

Characteristics Impossible to determine

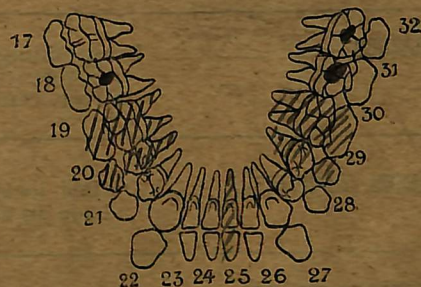
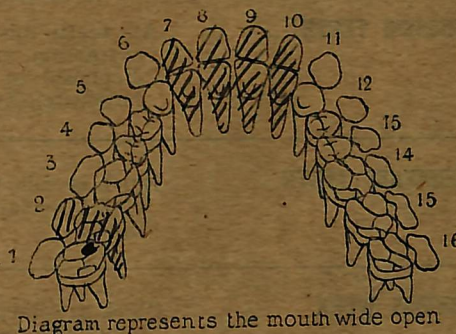
(d) Hair on face—Color Impossible to determine

Location Impossible to determine

Quantity Impossible to determine

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

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



MBD-2-19-29-30  
MAD-7-8-9-10-20-25  
SF-1-18-31-32






7. Disinterment supervised by A. R. Cheney Approved: R. L. Fain, Capt., Q M C.  
R.L.F. (Title)

8. Reburial supervised by H. L. Kramer Approved: A. E. Dewey.  
A.E.D. (Title) 1st. Lieut. . . 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), 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.

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

7. Show name of person supervising the disinterment and the name and title of the person approving same.
8. Show name of person supervising the reburial and the name and title of the person approving same.

G.R.S. Form #120  
Shipping Inquiry.

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

10--28 <sup>R</sup>

MAY 14 1920

*Push Answer*

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

TO: Charles Barton, Cooleyville, Ohio.

SUBJECT: Remains of Pvt. Edward Barton

The records of this office show ~~that you have requested that his~~  
~~body be~~ **your request to be**  
**not expressed**

*Correct*

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.

NAME OF	NO. & STREET	TOWN	STATE
Soldier's Widow			
Soldier's Children	1.		
(Name oldest first)	2.		
	3.		
Father			
Mother			
Brothers	1.		
(Name oldest first)	2.		
Sisters			

*unclaimed*

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

Date \_\_\_\_\_ Signature \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_

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



Mr. Wilson

Inw. of Effects <sup>and</sup> Master Card  
put Co K 166 Inw. shows: cause  
of death Lobar Pneumonia.

Med. cards shows: Oper. Feb. 14/18  
Appendectomy. Died Feb. 16, 1918

Cause of death, peritonitis, acute,  
fibrinous. Immediate cause of  
death same as cause of death.

To Coroner. Sect. for det.  
of cause of death -

Hornelley A. L.  
E. P. S. 208

1-12-21

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

*Please rush!*

**Hogue.**

NAME OF DECEASED SOLDIER

CEMETERY NO.

DATE

**Barton, Edward, Pvt.**

**10 - 28**

**1/11/21.**

SERIAL NUMBER

ORGANIZATION

*C 7154*

**Co. K, 166th Inf.**

**Date of death - 2/16/18.**

*Copy fwd to  
Adm Dept  
2-16-21*

WAR RISK INSURANCE INFORMATION

DATE \_\_\_\_\_

NAME OF BENEFICIARY

RELATIONSHIP

Address

*Mr. Charles Barton* *Cousin*  
*R.F.D. #4 Cooleyville, Ohio.*

HEADQUARTERS BASE HOSPITAL 15. -AEF.

53

Report of Deaths.

Name	Edward Barton
Rank	Private
Organization	Co.K. 166th Infantry
Date of death	Feb.16,1918.
Cause of Death	Lobar Pneumonia
Autopsy findings	Chronic congestion of lungs,liver,and spleen. Obselete tuberculosis of lungs,multiple septic infection of right kidney.
Place of burial	American Military Cemetery,Chaumont,Haute Marne France.
Number and location of grave.	Grave # 111,Plot C.
Disposal of effects.	In hands of Quartermaster,Base Hosp. 15. AEF



FROM: G. Q. M. G.  
CEMETERIAL DIVISION  
Munitions Building  
Room 1128

PLEASE  
EXPEDITE

WAR DEPARTMENT  
Office of the Quartermaster General of the Army  
Washington

G.R.S. Form 8-W-A-0  
Information requested of A.G.O.

Date 1/11/21.

File No.

Adjusted Made  
JAN 27 1921  
Registration.  
FILE NO. 33

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 **Barton** *OK ✓*
- b. Christian name **Edward** *OK ✓*
- c. Serial Number **-----** *none*
- d. Organization **Co. K, 166th Inf.** *OK ✓*
- e. Rank **Pvt.** *OK ✓*
- f. Date of death **2/16/18.** *OK ✓*
- g. Cause of death **L. Pneumonia.** *OK ✓*
- h. Authority (C.O.#)
- i. Emergency address
- j. Relationship

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 |   |   |   |   |   |   |  |

Date of enlistment. *June 30, 1917*  
Place of enlistment. *Delaware, Ohio*

*SM*  
*Dannely - use EPS - Wg 8*  
*1-12-21*

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

BY:

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

CEMETERY NO: 10

SHEET NO: 28  
TYPED BY: I.W.

S/713/LML

Rec'd World War Div  
Date 1 12 21

Rec'd S & S Div., A.G.O.

JAN 12 1921 6

*12*

53

Case of Barton, Edward... Pvt.

Burial Report - Corrections or Additions.

Requested by The Chief, Burial Department, A.E.F.

Reported by F.B. Barnett

Feb. Date 18 1918.

Omissions Noted or Verifications desired only on items checked below:- (No notation is desired unless the item is preceded by a check mark in the column at left of figures.)

- 1. Name of deceased. Barton, Edward (Initials and spelling)
2. Rank. Pvt.
3. Company. K
4. Regiment or Corps. 166 Inf.
5. Date of death. Feb 16 18
6. Cause of death. H. S. Pneumonia
7. Place of death. Base Hospital 15
8. Date of burial. Feb 18 18
9. Name of Cemetery. Amer. Mil. Cemo.
10. In what town and Department? Haute Marne
11. Number of grave. 111
12. Marking of grave. Bottle with record
13. Was original tag buried with body? yes
14. Has duplicate tag been sent to this office? (See Par. 6, G.O. 21, H.A.E.F. 1917) yes
15. Nearest relative of deceased. Charles Barton
16. Relationship and address. Cousin Cooleyville, O.

It is requested that this information may be forwarded as soon as practicable, to -

Chief, Burial Department, A. E. F., A. P. O. No. 706.

Major, A. Q. M., U. S. A.

G. O. 21 and 27, A. E. F., 1917, require that one aluminum identification tag shall be buried with body of deceased, and that duplicate tag shall be sent to this office.

FEB 21 Rec'd

DEPARTMENT

Division

D. C.

BUSINESS.

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



REASON FOR  
NON-DELIVERY

RETURNED  
TO  
SENDER

NO SUCH POST OFFICE IN STATE LISTED

Mr. Charles Barton,

Cooleyville, Ohio.

1. G.R.S. Form No.1.

HQ.GRS File

53 1.

2. Surname (block letters) 1st name & initials. 2.

3. *BARTON* *EDWARD* 3.

4. *Pvt. Co. H. 161 INF* 4.

5. Rank Co. Rgt & corp. 5.

6. *Sub. 10/19/18* Date of Death Cause if Known 6.

7. *WID* Date of Burial Cemetery 7.

8. *111* Grave No. Plot No. or letter 8.

9. *CHAUMONT HAUTE MARNE* Town-Commune (block letter) Dept. 9.

10. Name regt., Cross? *X* Edboard? *X* B.T.I.P.? *X* Check method of marking 10.

11. Buried with *no* Attached grave mark Identification tags *no* or 11.

12. If name unknown, tags missing, give mark and description 12.

13. Map reference if interment outside cemetery 13.

14. Give name of Chaplain-Burial Officer 14.

Signed *C. N. Russey* Group.....Unit.....GRS

663-6

Barton, Edward

Plt. C. H. 166<sup>th</sup> Inf

Follow up letter sent to

Mr. Charles Barton

R. F. D. # 4,

Cooleyville, Ohio.

Returned unclaimed

No other address  
available

53

AGO  
RETURNED  
UNCLAIMED.

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

August 11, 1919

Dear Sir:

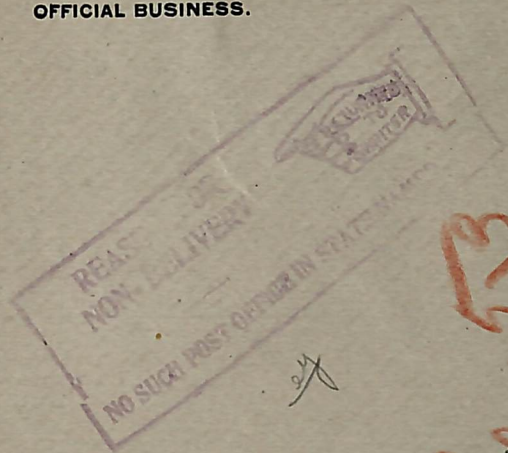
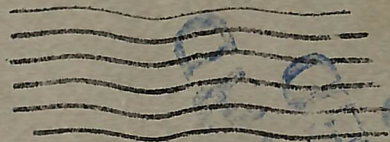
This is the second request for information concerning this matter that has been sent to you. Inasmuch as no reply has been received to the first request it is presumed you did not receive it, and as the information indicated on the inclosed card is necessary to complete the records it will be appreciated if you will fill in and return the card at the earliest practicable date.

P. C. HARRIS,  
*The Adjutant General.*

AGO  
RETURNED  
UNCLAIMED

WAR DEPARTMENT,  
THE ADJUTANT GENERAL'S OFFICE.  
OFFICIAL BUSINESS.

Penalty for private use, \$300.



Mr. Charles Barton,  
R. F. D. # 4,  
Cooleyville, Ohio.

File 53

Enlisted Division

Received A G O, AUG 13 1919

AUG 15 1919

RECEIVED  
RECEIVED  
RECEIVED

**THRIVE by THRIFT**  
**Buy War Savings Stamps.**