

1. G. Form No. 1.

Hq. G. B. File

41712

2. Soldier's No. 1205593 *Geo.*

3. *Bates* *Jas A*
Surname (in block letters) First Name and Initials

4. *Pvt* *Med. Corps*
Rank Company Regt. or Corps

5. *9/30/18* *K. I. A*
Date of Death Cause, if known

6. *10/4/18* *Gillemont Farm*
Date of Burial Cemetery

7.
Town or Commune (in block letters) Department

8. *20* ✓ *3* ✓ *A* ✓
Grave No. Plot No. or Letter

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

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

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

64

12.
Map Reference, if interment is outside of cemetery

13.
Give name of Chaplain or Burial Officer

REVIEWED
OSP SS.

Group Unit *307* G. B. S.



To The A. G. O.

G.R.S. Form #114-B

FEB 9 - 1926

1005

293

FULL NAME *BAMES, George A.* ✓ ✓

RANK *Private* ✓ *Pvt 1st* ✓ SERIAL *1205593* ✓

DIVISION & ORGANIZATION *27th Div* ✓ Sanitary Detachment, 105th Infantry ✓

DATE OF DEATH *Sept. 29 '18* ✓

STATE FROM WHICH HE CAME *New York* ✓

MEDALS OR DECORATIONS AWARDED *Citation Spec Order # 86*

FINAL GRAVE LOCATION *27th Div. 1919 B* ✓

Date Grave Row Block

1 636 29

Cemetery

4
FEB 9 1926
A. G. O.
WORLD WAR DIV.

1300 2
MAR 24

AUDITED BY
MAR 3-21-25

29
3/24/24
K.M.
813
24/292/EYS



1st Ind.

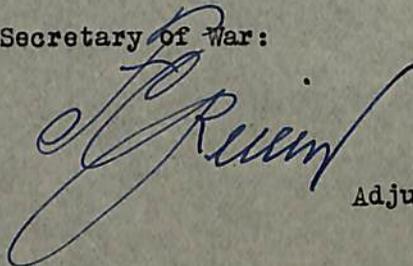
WW

EG/1-206

War Department, A.G.O., March 27, 1928. To: The Quartermaster General.

The records of this office show that George A. Bates, A.S.#1205593, held the rank of private first class at time of death.

By order of the Secretary of War:



Adjutant General.



CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME <i>Bates, George</i>	<i>BAT</i>	3	<i>21¹²0</i>
	CEMETERY <i>636</i>	1	<i>5</i>
BURIED	GRAVE <i>1</i>	2	<i>01</i>
	ROW <i>29</i>	2	<i>29</i>
	BLOCK <i>B</i>	1	<i>2</i>
STATE	<i>N.Y.</i>	2	<i>37</i>
RANK	<i>P7C</i>	1	<i>2</i>
DIVISION	<i>27</i>	2	<i>27</i>
ORGANIZATION	<i>105</i>	3	<i>105</i>
AFM	<i>Inf</i>	1	<i>1</i>
MARITAL	<i>No</i>	1	<i>2</i>
NAME <i>Hunziler</i>		3	
<i>Mrs Ethel</i>	STATE	2	
<i>649-2 ave</i>	COUNTY	2	
RESIDENCE <i>Troy ny</i>	CITY	3	
RELATION	<i>Mother</i>	1	<i>1</i>
OTHER		1	
ELIGIBILITY	<i>Dead</i>	1	<i>6</i>
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE		1	

AUDITED
 SEP 19 1952 MB

29/514
McL

RM

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Bates, George A.
636

Sept. 13, 1929.

Mrs. Ethel Hunzilsler,
649 - 2nd Ave.,
Troy, N.Y.

Dear Madam:

The records of this office do not indicate that a reply has been received to our communication dated July 31, 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

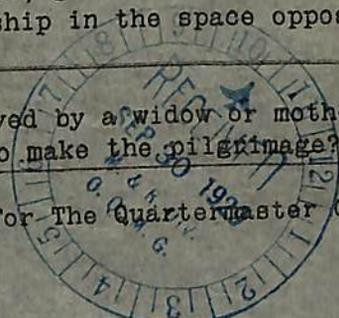
3. If survived by a widow or mother does she desire to make the pilgrimage?

No.

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
Bates, George A.

May 15, 1929.
C 92,154

Mrs. Mary Anna Bates,
352 8th Street,
Troy, N. Y.

(M) Died
(S) Mrs. Ethel Hunziler
649 - 2nd Ave.,
Troy, N. Y.

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 mother of the late Private George A. Bates, Sanitary Detachment, 105th Infantry, whose remains are now interred in the Somme American Cemetery, Bony, Aisne, France.

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

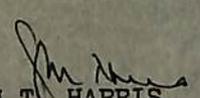
In the event your son was survived by a widow who has since re-married it is requested that a statement to that effect be made.

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

For The Quartermaster General,

Very truly yours,

2 incls.
Act of Congress.
Envelope.


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

1913
MAY 13 1913
MAY 13 1913

RECEIVED
JUN 6 1913
M. & R. DIX
C. C. M. O.

WAR DEPARTMENT



WASHINGTON, D. C.

OFFICIAL BUSINESS

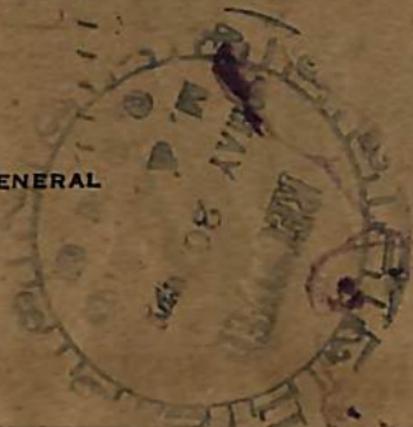
OFFICE OF THE QUARTERMASTER GENERAL



PENALTY FOR PRIVATE USE TO AVOID

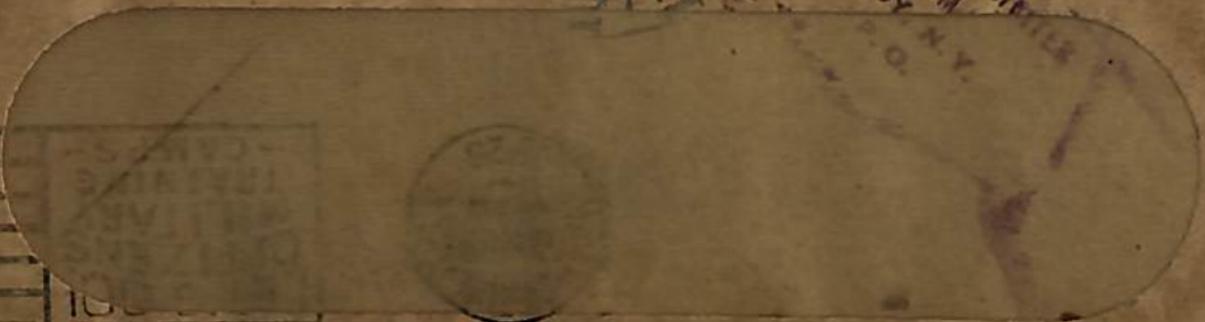
PAYMENT OF POSTAGE, \$300.

CITIZENS
MILITARY
TRAINING
- CAMPS -



RETURNED TO WRITER
FROM
TROY N.Y.
D.C.

Received
DJH





To be prepared in triplicate.

DATE March 27, 1928

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 BATES, George A.
 2. No. 1205593
 3. Rank Pvt.
 4. Org. San. Det. 105th Inf.
 5. D.D. Sept. 29, 1918
 6. C.D. KIA

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

Discrepancy found upon disinterment

7. Grave No. 2 Sec. _____
 8. Plot Block B Row 30
 9. _____

15. Grave No. _____ Sec. _____
 16. Plot _____ Row _____
 17. _____

18. Cemetery Somme
 20. Dept. or County Aisne
 22. G.R.S. Hdqrs. Code No. #636

19. Commune or town Bony
 21. Country France

23. Disinterred (Date) March 27, 1928

By L. Gordon

24. Inscription on grave marker:

Name BATES, George A.
 Rank Pvt.

Serial No. 1205593
 Organization San. Det. 105th Inf.

25. Was identification disc found on grave marker? _____ On body? T.O.B.

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).

1 collar ornament U.S.N.G.

27. Condition of body _____

28. Nature of burial Pine box and hurlap

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

30. Body prepared and placed in casket: Date March 27, 1928 By L. Gordon

31. Casket sealed by L. Gordon

Signature of Embalmer, (Supervisor)

L. Gordon
L. GORDON

SHIPMENT. (Show actual marking of box.) Box No. _____

32. Designation of body: _____

Name BATES, George A. Serial No. 1205593

Rank Pvt. Organization _____ San. Det. 105th Inf.

33. Consigned to: _____

Name of Permanent Cemetery Somme, Bony, Aisne

34. Casket boxed and marked (Date) March 27, 1928 By J.J. DILLON

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 _____

J.J. DILLON

36. Remarks _____

J.J. Dillon

37. Shipped from point of Operation: (Date) _____

To point of Concentration _____

(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 _____

To Permanent Cemetery _____

(Name)

Convoyer _____ Signature Shipping Officer _____

40. Received: Date _____

G.R.S. Representative _____

41. Reinterred March 27, 1928 Somme American Cty

(Date)

42. Grave No. 1 Section _____

43. Plot Block B Row 29

G.R.S. Representative _____

J.F.V. Brady
J.F.V. BRADY
Superintendent.

REPORT OF DISINTERMENT AND REBURIAL

1. REMAINS OF BATES, George A. SERIAL NUMBER 1205593
 RANK Pvt. ORGANIZATION San. Det., 105th Inf.

2. Disinterred (date) : March 27, 1928 From (give complete location) :
Grave 2, Block B, Row 30
 By : Group _____ Cty. _____ Unit _____

3. Reburied (date) : March 27, 1928 In (give complete location) :
Grave 1, Block B, Row 29
 By : Group _____ Cty. _____ Unit _____ Nature of reburial Metallic casket

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

5. (a) Identification tags : Buried with body ? T.O.B. On grave marker ? _____
 (b) Other means of identification found upon disinterment and general remarks :

1 collar ornament U.S.N.G.

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

(a) Height (actual measurement) _____ 7,8,9, CF.

(b) Weight (estimated) _____

(c) Hair—Color _____

Quantity _____ 3 Dec. to rts.

Characteristics _____ 1 Dec. to rts.

(d) Hair on face—Color _____

Location _____

Quantity _____ 18 CAV

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

missing parts) _____

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

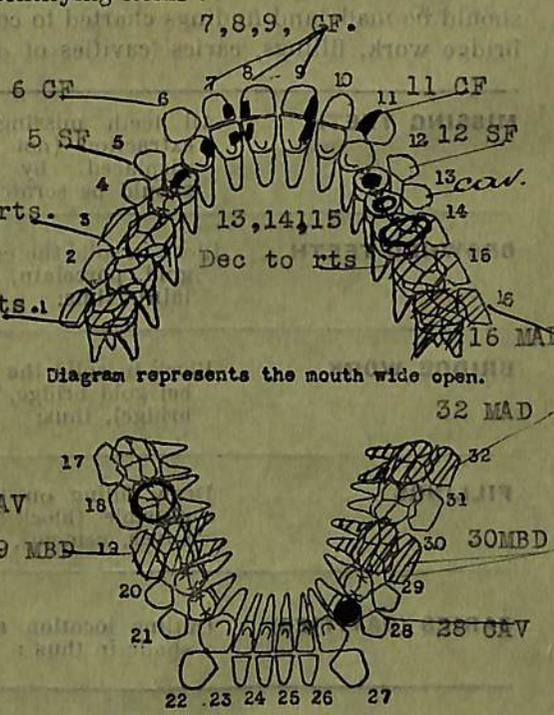


Diagram represents the mouth wide open.

7. Disinterment supervised by L. Gordon Approved : _____ (Title)
 8. Reburial supervised by J. J. Dillon Approved : _____ (Title)
 3-7832

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:



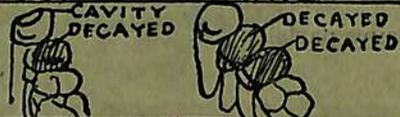
BRIDGE WORK Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:



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.

Bates, George A

6 36 + 74
1,205,593

(Surname.)

(Christian name in full.)

(Army serial number.)

Pvt., San Det 105th Inf.

(Rank and organization.)

State your relationship to the deceased

Mother

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 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)

352 - 8th St.

Mrs. Mary Anna Bates
Evoy, N.Y.

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

3-6713

Drawn by Pm

636-74

2-8

REVIEWED
OSP SS.

2-8-21

COMPILATION OF DISPOSITION OF REMAINS DATA

File # 41712

I. LOCATION INDEX CARD:

(a) Name Bates, George A. Ser. No. 1205593 } TYP HB
 (b) Rank Pvt. Organization San. Det., 105th Inf. } JCW
 (c) Date of death 9/29/18 Cause of death K/A

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

(a) Grave No. 54 Row 3 Plot H Sect. - - TYP HB
 (b) Emerg. Address George H. Bates (Father) 272 River St., Troy, N.Y.

III. Files of soldiers dying from contagious diseases NO CARD CKR JCW

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

*A.G.O. Card: Mrs. Mary Anna Bates (mother)
 35-2-8th St., Troy, N.Y. requests body
 not to be returned to U.S. EGS 9/25/20.*

V. Following advice forwarded to Europe by (cable on 192)
 (letter of transmittal on 9/4/1920)

Par. # 2, Not to be returned. (EGS)

VI. Form 115 forwarded to G.R.S. Hoboken, N.J. SEP 28 1920 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. 10-8-1920

COUNTRY France CEMETERY NO. 636 SHEET NO. 74
 G.R.S. FORM 115-A
 August , 1920

S-666/MB

RETURN TO OSP-SS

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: Mrs. Mary Anna Bates, 352-8th St. Troy, New York.

SUBJECT: Remains of Pvt. George A. Bates.
San Det. 105th Inf. Ser. No. 1205593

The records of this office show that you have requested that his body
be not returned to U.S.

no change

We do not wish body returned to U.S.
If these are not the correct instructions, please correct them. Make corrections on reverse side of this sheet.

The nearest relative may choose between, (1) return of the body to any address in the United States; (2) interment in Arlington, Va., or any other National Cemetery; or (3) remain in Europe.
By authority of the Quartermaster General.

CONFIDENTIAL DIVISION
CHARLES C. PIERCE,
Major, U. S. A.

If all blank spaces below are not filled out, it will necessitate a return of this paper and a SERIOUS DELAY in the shipment of this body. State in each case WHETHER these relatives are STILL LIVING.

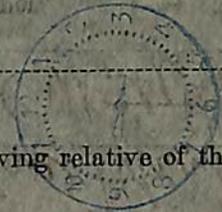
NAME OF—	NO. AND STREET.	TOWN.	STATE.
Soldier's widow	<i>None</i>		
Soldier's children. (Name oldest first.)	1 <i>None</i>		
	2 <i>None</i>		
	3		
Father	<i>George Henry Bates 352-8th St.</i>	<i>Troy</i>	<i>N.Y.</i>
Mother	<i>Mary Anna Bates 352-8th St.</i>	<i>Troy</i>	<i>N.Y.</i>
Brothers. (Name oldest first.)	1 <i>Irman Dora Bates 8-Rensselaer St.</i>	<i>Troy</i>	<i>N.Y.</i>
	2 <i>John Chester Bates 22-Orr St.</i>	<i>Troy</i>	<i>N.Y.</i>
Sisters. (Name oldest first.)	1 <i>Mrs. Marion Dickson Albany Road</i>	<i>Schenectady</i>	<i>N.Y.</i>
	2 <i>Mrs. Ethel Hunziker 352-8th St.</i>	<i>Troy</i>	<i>N.Y.</i>
	3		

SEP 13 1920
RECEIVED

*Noted on 9-11-20
9-17-20-21-21*

old firm

Date *September 9* Signature *Mrs. Mary Anna Bates*
Address *352-8th St Troy, N.Y.* Relationship *Mother*



OCT 8 1920 H. S. I.

RECEIVED

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

1. As stated on first page of this sheet.

2. To be returned to the U. S. and shipped to _____ (Name.) _____ (R. R. station.) _____ (State.)

3. To be returned to the U. S. and buried in _____ National Cemetery.

4. To remain in Europe, for burial in a permanent American Cemetery.

Signature _____

INSTRUCTIONS FOR FILLING OUT.

- 1. If definite instruction as to the disposition of a body are not received from the nearest relative within two weeks of its arrival at New York, burial will be made without further notice in the World War Section of Arlington National Cemetery.
2. The transfer of bodies will be made ENTIRELY at Government expense.
3. This paper MUST BE SIGNED BY THE PERSON WHO IS THE NEXT of kin IN THE ORDER shown in the square on the other side of this sheet.
4. This paper must be returned showing the name and address of each of the nearest living relatives in the spaces provided therefor on the other side of this sheet.
5. If there are minor children of the deceased soldier and no widow, the LEGALLY APPOINTED GUARDIAN of the children should ascertain their wishes and act for them in this matter.
6. If YOU are not the nearest relative, please ask the nearest relative, if living near you, to fill out this paper.
7. 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.
8. You are requested to return this paper AT ONCE in order to avoid delay in the case of this body.
9. Use the inclosed envelope—pay no postage.

Place Bony, France.

Date June 3, 1919.

Date _____

REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name: Bates, Geo, A.

Number: 1205593

Rank: Pvt.

Med. Corps.

Organization: _____

Disinterment and Reburial made by Group _____

#2

Unit 302

Unit _____

Disinterred (Date) June 2, 1919.

From: (Give complete location)

Grave 20, Row 3, Plot A, Guillmont Farm Military Cemetery, Map Rf. Cambrai S.W.

East 174.9, North 364.3.

Reburied (Date) June 2, 1919.

55-16-a (3000 series M.G.D.)

in: (Give complete location)

Grave 54, Row 3, Plot H, Bony Military Cemetery Map Rf. 13 S.W. East 176.3

North 363.8.

626

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

Wrapped in burlap, condition poor.

Was one identification tag found upon the body? Yes.

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

file
recd
6/17/20

11221

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, Graves Registration Service.

Supervised by: James M. Simpson

W.E. Bradley 2nd Lt. MC

G.O. Group #2 Unit 302

CONFIRMED

REPORT OF DISTRICT AND INDUSTRIAL

Date _____
Place _____

Name of _____

Address _____

City _____

Department _____

Information and material made by Group _____

Date _____

Reference (date) _____

Report to be made of _____ and condition of each upon disbursement

_____ wrapped in _____

_____ the one identification tag found upon the body _____

_____ that other means of identification were found on the body _____



_____ If upon disbursement, all items are found upon _____
_____ sent to the _____ report should be prepared as _____
_____ after being carefully examined, the items to identify _____
_____ which will be made as _____ to Chief, or you _____

REPORT OF DISINTERMENT AND REBURIAL

Date 1-14-21

1. REMAINS OF George A. Bates SERIAL NUMBER 1205593

RANK Pvt. ORGANIZATION San. Det., 105th Inf.

2. Disinterred (date): 1-14-21 From (give complete location):

Plot H, Row 3, Gr. 55, Cem. #636, Bony (Aisne) France.

By: Group 7 Unit Section No. 4

3. Reburied (date): 1-14-21 In (give complete location):

Plot H, Row 3, Gr. 54, Cem. #636, Bony (Aisne) France.

By: Group 7 Unit Sect. No. 4 Nature of reburial Burlap; wooden box, with bottle and metal strip.

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

Uniform; burlap; body badly decomposed.

5. (a) Identification tags: Buried with body? Yes On grave marker? Yes

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

pvt. 1/cl. Medical Corps chevron in blouse pocket. M.C. brassard on left arm. Tag on body badly corroded; not legible.

6. What does examination of body show as regards the following identifying items No. 1 - missing after death. Nos 3, 13, 14, 15, 16 - decayed. Nos. 6, 7, 8 - gold filling.

(a) Height (actual measurement) cannot be determined.

(b) Weight (estimated) "

(c) Hair—Color "

Quantity "

Characteristics "

(d) Hair on face—Color "

Location "

Quantity "

(e) Permanent marks on body (old scars, peculiarities, or missing parts) Cannot be determined

(f) Wounds or missing parts (received at time of casualty) Cannot be determined.

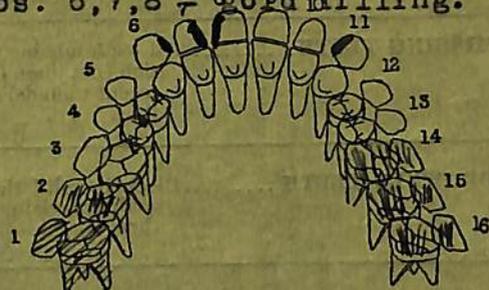
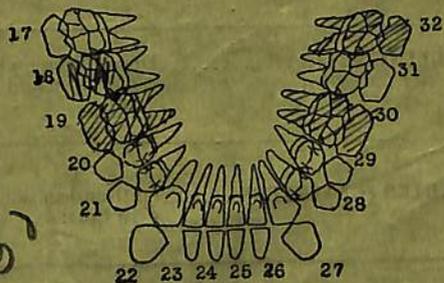


Diagram represents the mouth wide open.



No. 11 - porcelain filling. No. 18 - decayed. Nos. 19, 30 & 32 - extracted.

7. Disinterment supervised by D. Bachman

Approved: W. T. Doran

D. BACHMAN

(Title) W. T. DORAN

gvc

1st Lt., Q.M.C.

8. Reburial supervised by D. Bachman

Approved: W. T. Doran

D. BACHMAN

(Title) W. T. DORAN

1st Lt., Q.M.C.

22-30498

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

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

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

MISSING TEETHAll teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus:	
CROWNED TEETHBlock in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus:	
BRIDGE WORKBlock in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:	
FILLINGSDraw filling on tooth accurately as possible (block in and label gold, silver, cement), thus:	
CARIES (CAVITIES)Outline location and size of cavity, shade in thus:	

DENTURES (PLATES).....Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

3-7832

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

File #41712

I. LOCATION INDEX CARD:

(a) Name BATES, George A. Ser. No. 1205593
(b) Rank Pvt. Organization SAN Det., 105th Inf.
(c) Date of death 9/29/18 (d) Cause of death K/A
TYP. HB
CKR J.E.H.

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

(a) Grave No. 54 Row 3 Plot H Sec. - TYP. HB
(b) Emerg. Address George H. Bates (father) 272 River St., Troy, N.Y.

III. Files of soldiers dying from contagious diseases NO CARD CKR J.E.H.

IV. A. G. O. DISPOSITION CARD:

Date of receipt 2/10/21

(a) Name Mrs Mary Anna Bates (b) Relationship Mother
(c) Address 352 4 8th St. Troy N.Y.
(d) Remains to be brought to U. S.? Yes
(e) To be interred in National Cemetery in U. S. at

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

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

Examiner's Initials M.M. Date 9-1-20, 1920.

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

, dated

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

In correspondence

Examiner's Initials M.M. Date 9-1-20, 1920.

VI. G. R. S. FILES, CORRESPONDENCE shows as follows:

No request for disposition

(a) Cancellation memos referred to? yes. 76 St

Examiner's Initials 76 St Date 9-2-20, 1920.

COUNTRY France

CEMETERY No. 636

SHEET No.

74

checked by el 2-8-21

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 _____, 1920

RECEIVED



OCT 8 1920
G. R. S.

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

IX.

CORRECTIONS

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

X. SUSPENSION REMARKS:

*Form 120, 9/16/20, Mrs. Mary Anna Bates (mother)
352-8th St., Troy, N. Y., requests body remain in Europe.
Father, George H. Bates, (nearest of kin) has same address. 9-17-20. S.H.*

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Bates, George A. 656-S

July 3, 1930.

Mrs. Ethel Hunsilser,
649 2nd Ave.,
Troy, N. Y.

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

Bates, George A.

July 31, 1929.

Mrs. Ethel Hunziler,
649 - 2nd Ave.,
Troy, N. Y.

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 George A. Bates, Sanitary Detachment, 105th Inf., whose remains are now interred in the Somme American Cemetery, Bony, Aisne, 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

Bates, George A. 636-S

July 3, 1930.

Mrs. Ethel Hunsicker,
649 2nd Ave.,
Troy, N. Y.

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

Bates, George A.
636

Sept. 13, 1929.

Mrs. Ethel Hunzilsor,
649 - 2nd Ave.,
Troy, N.Y.

Dear Madam:

The records of this office do not indicate that a reply has been received to our communication dated **July 31, 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

Bates, George A.

July 31, 1929.

Mrs. Ethel Hunsilser,
649 + 2nd Ave.,
Troy, N. Y.

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 George A. Bates, Sanitary Detachment, 105th Inf., whose remains are now interred in the Somme American Cemetery, Bony, Aisne, 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

Bates, George A.

May 15, 1929.

Mrs. Mary Anna Bates,
352 8th Street,
Troy, N. Y.

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 mother of the late Private George A. Bates, Sanitary Detachment, 105th Infantry, whose remains are now interred in the Somme American Cemetery, Bony, Aisne, France.

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

In the event your son was survived by a widow who has since remarried it is 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,

2 incls.
Act of Congress.
Envelope.

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

QM 293 A-C

BATES, George A. - Pvt.

April 23, 1926

Mr. George H. Bates,
352 8th St.,
Troy, N.Y.

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 overseas military cemetery is to be maintained by the United States for all time. The graves will be permanently marked by white headstones inscribed with the name, rank, division, organization, date of soldier's death and State from which he came. Headstones will be placed at all graves, as soon as possible, and without necessity 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 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,

L.W. REDINGTON,
Major, Q.M.G.,
Assistant.

1 Incl.
Record card.



25/560/EYS