

Sol. Sgt. Sador

JAN 7 - 1926

1456

FULL NAME *BAYKO, Sador P.*

RANK *Private*

SERIAL *557361*

DIVISION & ORGANIZATION *4th Div. Company M, 39th Infantry*

6-auth 801 - Oct. 8-1926

DATE OF DEATH *Aug. 5 '18*

STATE FROM WHICH HE CAME *Maine*

MEDALS OR DECORATIONS AWARDED *none*

FINAL GRAVE LOCATION.

Date	33	1	B
	Grave	Row	Block

608
Cemetery

*@ 52055
Mother dead
no widow*

23/306/ARK

*K.M.
8/3*

8 160
JAN 7 1926
WORLD WAR DIV.

Wife
audited by
rw. 6/6/24
2-829

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Bayko **557361** **Seydon P.**
(Surname.) (Number.) (First Name and Initials.)

Pvt. **39th Infty.**
(Rank.) (Organization.)

DATE OF BURIAL **6 August, 1918**

PLACE OF BURIAL **Chateau de la Faret, France.**

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

GRAVE NUMBER **12**

HOW MARKED: Name Peg? Cross? **Yes**
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: *Ralph McReynolds*
Ralph McReynolds, 1st Lieut. MRC.
(Signature and Rank of Reporting Officer.)

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

REPORTED BY: *Boyd Williamson*
(Signature and Rank of Reporting Officer.)

Captain 4th Sanitary Train
to be forwarded to Adj. Gen'l., G. H. Q., A. E. F.

YKO, Sedor, P.- Pvt: 557361.-

p.m. in the afternoon, Pvt. Sedor, P. on Vesle River and was badly wounded received immediate medical attention at Hospital.

**ARMON, John.- Cpl. 2019599
M. 39th Inf.
Ann Arbor, Mich.**

**APPERSON, 2nd Lt.
th Inf.**

Piped Nov 8/13 CC 51

GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

Bayko **557361** **Sedor** **P.**
(Surname.) (Number.) (First Name and Initials.)

prt. **Co. M. 39th Inf.**
(Rank.) (Organization.)

DATE OF BURIAL.. **Aug. 7 1918**

PLACE OF BURIAL.. **American Military Cemetery**

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

Chateau de la Foret, Dept. of the Aisne,

France

GRAVE NUMBER..... **12**

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

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:

Bay Williamson

(Signature and Rank of Reporting Officer.)

Chaplain 4th Sanitary Train

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

YKO, Sedor, P.- Pvt: 557361.-

p.m. in the afternoon, Pvt. Sedor, P. on Vesle River and was badly wounded. Received immediate medical attention at Hospital.

**ARMON, John.- Cpl. 2019599
M. 39th Inf.
Ann Arbor, Mich.**

**APPERSON, 2nd Lt.
39th Inf.**

Co M. 39th Infantry
4th Division

BAYKO, Sedor, P.- Pvt: 55736I.-

On August 4th 1918 about 3:00 p.m. in the afternoon, Pvt.Sedor.P.
BAYKO was in the town of St Thibau, on Vesle River and was badly wounded by machine gun bullets. He received immediate medical attention but died the following day in Field Hospital.

Informant: CARMON, John.- Cpl. 2019599
Co M. 39th Inf.
Home: Cornnister, Mich.

Emergency address:
Konstantin BAKO
101 East Broaway
Ny.N.Y.

Signed: G. APPERSON, 2nd Lt.
39th Inf.

Date June 3, 19

Bayko, Sedor REPORT OF DISINTERMENT AND REBURIAL.

557341

Remains of:

Name: Sedor P. Bayko

Number: 557341

Rank: *1st Lt.*

Organization:

Co. 30th Inf.

Disinterment and Reburial made by Group 3 Unit 304

Disinterred (Date) June 3, 19 From: (Give complete location)

From Grave #12 Cemetery #1-Forsberg.

Reburied (Date) June 3, 19 in: (Give complete location)

Grave #182 Section L. Plot #4 Cemetery # -Carr. Seringes et Nesles (Aisne)

Map #33 Soissons. SE. 275.4N-195.25E

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

Buried 3 feet deep--- Body badly decomposed.

Was one identification tag found upon the body? None---One on cross.

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

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: Sgt. Glenn M. Mack

1st. Lt. Wm. N. Carr.

C.O. Group 3 Unit 304

Left leg bandaged below knee,

stomach and chest

7. Disinterment supervised by John G. Bowes, S.E.

Approved: J.J. Powers, 1st Lt. QMC. (Title)

8. Reburial supervised by John G. Bowes, S.E.

Approved: J.J. Powers, 1st Lt. QMC. (Title)

REPORT OF DISINTERMENT AND REBURIAL

Place Seringes et Nesles

Date May 4/21

1. REMAINS OF BAYKO, SEDOR P. SERIAL NUMBER 557361

RANK Pvt. ORGANIZATION Co. M., 39th Inf.

2. Disinterred (date): May 4/21 From (give complete location):

Ager, Cty. Seringes et Nesles, #608, Gr. 199-L-4

By: Group Bowes Unit _____

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

same date, cemetery, Gr. 137-L-4

By: Group Bowes Unit _____ Nature of reburial box and burlap

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

5 ft. earthen grave, hospital shroud, blanket, burlap and box

disintegrated, unrecognizable

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

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

Tag on body reads: ---dor ---yko, 39th Inf. Pvt. Body exhumed from grave 199-L-4

under cross inscribed: Harry G. Surface, Pvt. Co. F, 39th Inf.

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

(a) Height (actual measurement) Impossible to determine

(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) Teeth 17-29-7-8- missing before death

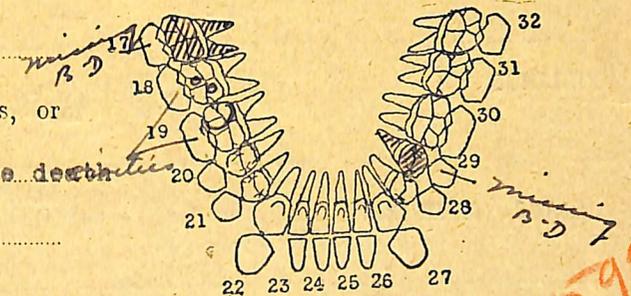
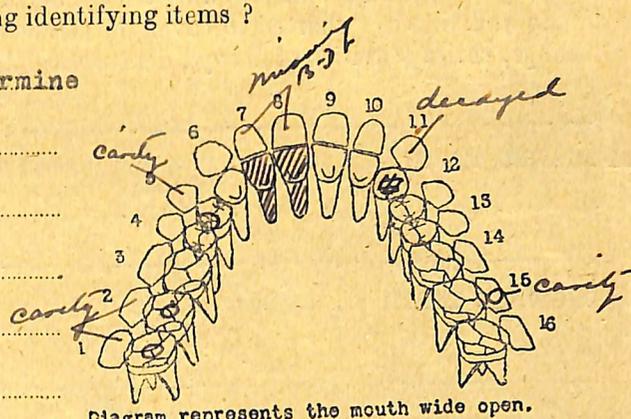
(f) Wounds or missing parts (received at time of casualty) _____

Left leg bandaged below knee, left arm amputated below shoulder, bandages over

stomach and chest

7. Disinterment supervised by John G. Bowes Approved: J.J. Powers
John G. Bowes, S.E. (Title) J.J. Powers, 1st Lt. QMC.

8. Reburial supervised by John G. Bowes Approved: J.J. Powers
John G. Bowes, S.E. (Title) J.J. Powers, 1st Lt. QMC.



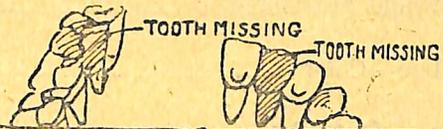
2-30597

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.



CODE SLIP



HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	Boiko	3	215
BURIED	CEMETERY 608	1	2
	GRAVE 33	2	33
	ROW 1	2	01
	BLOCK B	1	2
STATE	me	2	23
RANK	Post	1	2
DIVISION	4	2	04
ORGANIZATION	39	3	039
ARM	Inf	1	1
MARITAL	Mar	1	2
NAME	Boiko	3	
Anna Parloma (Sister)	STATE	2	
RESIDENCE	COUNTY	2	
Russia	CITY	3	
RELATION	Mother	1	1
OTHER		1	
ELIGIBILITY	Dead	1	6
NATIVITY	(1918 in Russia)	1	
RACE	all rel. foreign	1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE		1	

AUDITED

AUG 5 1932
PWB

EPH
ACCEPTANCE
29/514

County

22

X 52055

608

BAYKO, Sedor P. Pvt., Co. M, 39th Inf.

Date of Mother's death ?
In U. S. or foreign ?

7-18-18 Russia

father died 1907 "

Latest address in U. S.?

John T. Coggins (att.)
104 - East front st
Plainfield - N. J.

Stepmother or Loco? no record

ans to
S. Anna

Pavlovna
Russia

Boiko

All rel. foreign

LEB

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

DATE 8/18/31

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Bayko, Sedor P.	Pvt.		Co M, 39th Inf	

STATE	CTY. NO.	GRAVE	ROW	BLOCK
	608	33	1	B

NAME AND ADDRESS	Check relationship	Living - Deceased
	<u>MOTHER</u>	: : ✓ :
	STERMOTHER (For the year prior to commencement of service)	: : : :
	MOTHER THRU ADOPTION (For the year prior to commencement of service)	: : : (S) :
	MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	: : : Anna Pavlovna Boeko : : : : detevnia Korovayeva : : : : s/s Rudenski' : : : : rayon Smilovichi' : : : : obrug Minsk : : : : B.S.S.-R. : : : : Russia :
	<u>WIDOW</u> (Who has not remarried)	: : : Single man :

Veterans Bureau Claim Number XC 52 055
29/156

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Bayko, Sedor P.

June 20 , 1929.

XC 52 055

Mr. Konstantin Bayko, 101 E. Broadway, N.Y.
(S) Anna Pavlovna Boiko
derevnia Korovayevo
s/s Rudenski, rayon
Smilovichi, okrug Minsk B.S.S.R. Russia.

Dear Sir:

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

The records of this office show that you are the brother of the late Private Sedor P. Bayko, Co. M, 39th Inf., 4th Div., whose remains are now interred in the Oise-Aisne American Cemetery, Seringes-et-Nesles, Aisne, 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

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

R. H. [Signature]



3114 1515
RECEIVED
JUN 24 1929
M. & [illegible]
MOVED [illegible]

WASHINGTON, D. C.
JUN 20
8 30 PM
1929

PENALTY FOR PRIVATE USE

TO AVOID PAYMENT OF

POSTAGE, \$300.

CITIZENS
MILITARY
TRAINING
- CAMPS -

RETURNED TO SENDER
JUN 22 1929
DO NOT POST AGAIN IN THIS
ENVELOPE OR WRAPPER.
Postage Due.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

June 20 , 1929.

Bayko, Sedor P.

Mr. Konstantin Bayko,
101 E. Broadway, N.Y.

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

For The Quartermaster General,

Very truly yours,

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

2 incls.
Act of Congress.
Envelope.

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE

MB-ml-1-217

O.Q.M.G.

IN REPLY REFER TO AG 201 Bayko, Sedor P. (WW)

WASHINGTON

October 8, 1926.

SUBJECT: Date of death.

14676

To: The Quartermaster General,
Washington, D. C.

293

An investigation recently completed by this office in the case of Sedor P. Bayko, Army serial number 557,361, Private, Company M, 38th Infantry, who was reported to have died August 7, 1918 of wounds received in action, shows that the report is erroneous and that this soldier died August 6, 1918 of wounds received in action.

Bayko

By order of the Secretary of War:

Sedor P.



OCT-9-1926



JOHN DALTON
Adjutant General.

file
10-14-26

AG 201 Bayko, Sedor P. (WW)

October 8, 1926.

Date of death.

The Quartermaster General,
Washington, D. C.

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By order of the Secretary of War:

J. N. Dalton

Adjutant General.



Handwritten notes:
203
Bayko, Sedor P.

Vertical stamp:
203-217

Bayko,

Sedor P.

557,361,

Dup. ✓

(Surname.)

(Christian name in full.)

(Army serial number.)

Pvt.

Co. M, 39th Inf.

(Rank and organization.)

State your relationship to the deceased

Second Brother

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?

No

(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)

Constantin Bayko

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

drawn by ~~W.H.~~ 608-175

Mr. Kostantov² Bayko.

101 East Broadway,
New York, N. Y.

QM 293 A-C

BAYKO, Sedor P. - Pvt.

October 29, 1925

Mr. Konstantin Bayko,
101 East Broadway,
New York City, 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 military cemetery is one of those to be maintained by the United States for all time in Europe. Each grave will be marked by a headstone of white marble, of dignified design, with the name, rank, division, organization, date of soldier's death and State from which he came. Headstones will be placed at all graves in connection with the improvement work now in progress, as soon as possible and without waiting for special action or request on the part of relatives.

Please be assured that in effecting removal of the dead, the utmost reverential care was exercised and more than willingly accorded by those who performed this sacred duty. For the future, these graves will be perpetually maintained by the Government in a manner befitting the last resting place of our heroes.

Very truly yours,

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

1-Incl.
Record card.

RD
202



To be prepared in triplicate.

DATE February 25, 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 BAYKO, Sedor P. *Maine* 10. Name _____
 2. No. 557361 11. No. _____
 3. Rank Pvt. 12. Rank _____
 4. Org. Co. M, 39th Inf. *4th Div.* 13. Org. _____
 5. D.D. August 5, ⁶ 1918 14. (a) D.D. _____
 6. C.D. Wounds (b) D.B. _____

Discrepancy found upon disinterment

7. Grave No. 33 Sec. _____ 15. Grave No. _____ Sec. _____
 8. Plot Block B Row 1 16. Plot _____ Row _____
 9. _____ 17. _____
 18. Cemetery Oise-Aisne 19. Commune or town Seringes-et-Nesles
 20. Dept. or County Aisne 21. Country France
 22. G.R.S. Hdqrs. Code No. 608
 23. Disinterred (Date) February 25, 1928 By P.D. Woodman
 24. Inscription on grave marker:
 Name BAYKO, Sedor P. Serial No. 557361
 Rank Pvt. Organization Co. M, 39th Inf.
 25. Was identification disc found on grave marker? _____ On body? Yes

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).

 27. Condition of body _____
 28. Nature of burial Pine box and burlap
 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 February 25, 1928 By P.D. Woodman
 31. Casket sealed by P.D. Woodman

Signature of Embalmer, (Supervisor)

P.D. Woodman.

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

32. Designation of body:

Name BAYKO, Sedor P. Serial No. 557361

Rank Pvt. Organization Co. M, 39th Inf.

33. Consigned to:

Name of Permanent Cemetery Oise-Aisne, Seringes-et-Nesles, Aisne

34. Casket boxed and marked (Date) February 25, 1928 By Charles E. Spahn

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 Charles E. Spahn

Charles E. Spahn

36. Remarks _____

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 February 25, 1928, Oise-Aisne American Cty.

(Date)

42. Grave No. 33 Section _____

43. Plot Block B Row 1

G.R.S. Representative William E. Moore

William E. Moore, Superintendent.

REPORT OF DISINTERMENT AND REBURIAL

Date February 28, 1928

1. REMAINS OF BAYKO, Sedor P. SERIAL NUMBER 557361
RANK Pvt. ORGANIZATION Co. M, 39th Inf.

2. Disinterred (date): February 25, 1928 from (give complete location):
Grave 33, Block B, Row 1
By: Group _____ Cty _____ Unit _____

3. Reburied (date): February 25, 1928 In (give complete location):
Grave 33, Block B, Row 1
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

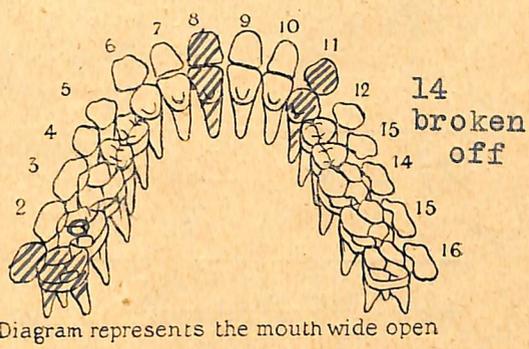
5. (a) Identification tags: Buried with body? Yes On grave marker?
(b) Other means of identification found upon disinterment, and general remarks:

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

(a) Height (actual measurement) _____ 8 & 11 MBD

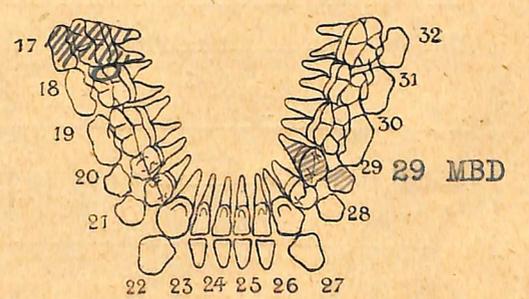
(b) Weight (estimated) _____

(c) Hair—Color _____
Quantity _____ 2 CAV
Characteristics _____ 1 MBD



(d) Hair on face—Color _____
Location _____
Quantity _____ 17 MBD

(e) Permanent marks on body (old scars, peculiarities, or missing parts) _____ 18 CAV
_____ 29 MBD



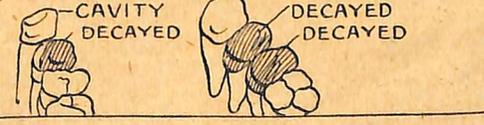
(f) Wounds or missing parts (received at time of casualty)
Left radius and ulna missing. Left humerus amputated 6 inches from shoulder.

7. Disinterment supervised by W. Woodman Approved: W. E. Moore
(Title)
8. Reburial supervised by Charles E. Jahn Approved: _____
(Title)

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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 # 14676

(a) Name **BAYKO, Sedor P.** Ser. No. **557361**
 (b) Rank **Pvt.** Organization **Co.M, 39th Inf.**
 (c) Date of death **8/5/18** (d) Cause of death **DWRIA**

TYP. **EK**
 CKR. *WBB*

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

acc 3/3/20 199

(a) Grave No. **187** Row **--** Plot **4** Sec. **L** TYPE **EK**
 (b) Emerg. Address **Konstantin Bayko, (brother) 101 East Broadway, New York City.**

III. Files of soldiers dying from contagious diseases **---** CKR. *S*

IV. A. G. O. DISPOSITION CARD:

Date of receipt *None*

(a) Name *Constantin Bayko* (b) Relationship *second brother*
 (c) Address *omitted*
 (d) Remains to be brought to U. S.? *no*
 (e) To be interred in National Cemetery in U. S. at *---*

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

3/12/21 10:45 AM 4730' Mr. Konstantin Bayko, second brother

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

Examiner's Initials *MH* Date *12-11*, 1920.

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

---, dated *---*

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

No correspondence

Examiner's Initials *MH* Date *12-11*, 1920.

IA

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

No request for disposition

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

Examiner's Initials *E.M.* Date *12-11*, 1920.

COUNTRY **France** CEMETERY No. **608** SHEET No. **175**

CARD

WBB

VII. 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 *Jan 15*, 1920

Par. 2. Not to be returned (JAN-17-21)

CEMETERY DIVISION
CORRESPONDENCE BY
HOBOKEN, N. J.
JAN 27 1921

RECEIVED

JUL 5 1921

CEMETERY DIVISION
OVERSEAS PROJECT 1920 REG.

IX. CORRECTIONS

CHANGE OF ADVICE.	ACTION TAKEN.
Desires body be _____	
Body to be shipped to _____	
<i>Investigation made by this office and grave location shown on our records is correct. MCH 3/23/21</i>	

X. SUSPENSION REMARKS: *2/18/21, Form # 120, Mr. Konstantin Bayko, second brother, wishes body remain in France. N-2/17/21/ep*

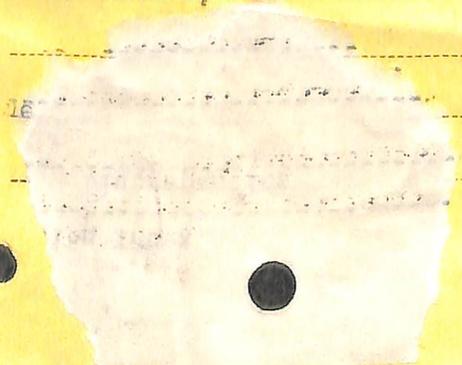
War Risk (E.A.)

Mr. Kostantin Bayko, (Brother)

101 East Broadway,

New York, N.Y.

H/5/2/21 -RM



COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

File # 14676

(a) Name BAYKO, Sedor P. Ser. No. 557361
 (b) Rank Pvt. Organization Co.H, 39th Inf.
 (c) Date of death 8/5/18 Cause of death DWRIA

TYP BK

WSE

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

200 3/3/22 187-199

(a) Grave No. 187 Row 199 Plot 4 Sect. L

TYP BK

(b) Emerg. Address Konstantin Bayko, (brother) 101 East Broadway, New York City.

III. Files of soldiers dying from contagious diseases

CKR

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

also card - Constantin Bayko, second brother (no address given) desires body to remain in Europe (JES 1-17-21)

V. Following advice forwarded to Europe by (cable on 1/12/1921) (letter of transmittal on 1/12/1921)

Par 3 - Not to be returned (JES)

VI. Form 115 forwarded to G.R.S. Hoboken, N.J. JAN 26 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
 G.R.S. FORM 115-A
 August , 1920

CEMETERY NO.

SHEET NO.

S-666/MB *France*

608

175

JAN 24 1921 - *acp*

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

608-175

File No. 293.8 Cem.Div., Cor. Br.
(BAYKO, Sedor P.)

June 30th, 1921.

MEMORANDUM FOR:

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

SUBJECT: Return of Records, Cemetery No. 608,
Cable Reference No. 175, Transmittal,
Memorandum No. H-602.

1. Returned herewith are records per-
taining to the case of the late Sedor P. Bayko, Private,
Serial Number 557361, Company M. 39th Infantry, no request
having been made for the return of the remains to the
United States.

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

BY:


J. C. PALLAS,
Executive Assistant,

Incl(records)

R- 7-7-21 m

File No. 295.8 Cem.Div., Cor. Br.
(BAYKO, Sedor P.)

June 30th, 1921.

MEMORANDUM FOR:

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

SUBJECT:

Return of Records, Cemetery No. 608,
Cable Reference No. 175, Transmittal,
Memorandum No. H-602.

1. Returned herewith are records per-
taining to the case of the late Sedor P. Bayko, Private,
Serial Number 557361, Company M, 39th Infantry, no request
having been made for the return of the remains to the
United States.

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

BY:

F. C. PALAS,
Executive Assistant,

rs/el
Incl(records)



RECEIVED PROJECT AND OFF
COMMITTEE DIVISION

JUN 2 1921

H. E. SHANNON

File No. 293.8 Com.Div., Cur. Br.
(BAYKO, Sedor P.)

June 30th, 1921.

Mr. Konstantine Bayko,
101 East Broadway,
New York City, N.Y.

Pvt. Sedor P. Bayko,
re: Ser. No. 587361, Co.
M. 59th Infantry.

Dear Sir:

Your Shipping Inquiry Form #120, dated February 13th, 1921, requesting that the remains of the deceased soldier named above be left in France for burial in a permanent American Cemetery has been forwarded to the Cemeterial Division, Office of the Quartermaster General, Washington, D.C., for necessary action.

The Cemeterial Division, Washington, D.C. will furnish you the grave location in the permanent American Cemetery as soon as possible after the body has been placed therein.

The Department desires to renew its previous expression of sympathy in your bereavement.

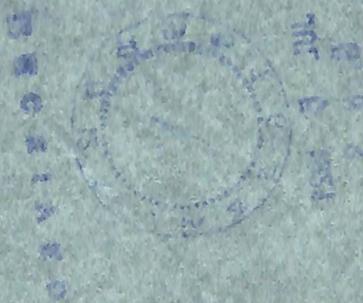
By authority of the Quartermaster General:

R. H. SHANNON,
Captain, C.M.C.,
Officer in Charge.

cc/ol

BY:

F. G. PALLAS,
Executive Assistant.



MAILED
JUL 5 1921
COR. BR. C. R. S.

OFFICE OF THE QUARTERMASTER GENERAL
CENTRAL DIVISION
QUARTERMASTER PROJECTOR SUB-SECTION

HOBOKEN, N.J.

NAME OF DECEASED SOLDIER

CENTRAL NO.

DATE

Bayko, Sedor P.

608-175

2/24/21

SERIAL NUMBER

ORGANIZATION

Date of Death.

557361

Co. M., 39th Inf.

8/5/18

WAR RISK INSURANCE INFORMATION

DATE

NAME OF BENEFICIARY

RELATIONSHIP

Address

Cor. Sec.

suspend

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

608-175 e1

FROM: Chief, Cemeterial Division, O. Q. M. G.

FEB 1 1921

To: Mr. Konstantin Bayko, 101 East Broadway, New York City, N.Y.

SUBJECT: Remains of Pvt. Sedor P. Bayko, Ser. No. 557361 Co. M, 39th Inf.

The records of this office show that you have requested that the body of the above-named soldier remain in France.

If these are not the correct instructions, please correct them. Make corrections on reverse side of this sheet.

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

By authority of the Quartermaster General.

CHARLES C. PIERCE,
 Lieut. Colonel, U. S. Army.

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

Was soldier married? not

NAME OF—	NO. AND STREET.	TOWN.	STATE.
Soldier's widow			
Soldier's children. (Name oldest first.)	1		
	2		
	3		
Father	<u>dead</u>		
Mother	<u>dead</u>		
Brothers. (Name oldest first.)	1 <u>Ovan P. Bayko</u>	<u>Russia</u>	<u>Rapawass Mink</u>
	2 <u>Ruzma P. Bayko</u>		
	3 <u>Michael P. Bayko</u>		
Sisters. (Name oldest first.)	1 <u>Sedora</u>		
	2 <u>Eugenia</u> — —		
	3 <u>Ana</u> — —		

Date February 13, 1921

Signature Konstantine Bayko

Address 101 E. Broadway

Relationship second brother

February 13, 1921

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

RECEIVED
JUL 5 1921

CEMETERY DIVISION
OVERSEAS PROJECT SUB-SEC.
(Name)
(State.)

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

INSTRUCTIONS FOR FILLING OUT.

FEB 15 1921

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

NOTE.—INSTRUCTIONS FOR THE DISPOSITION OF REMAINS will be issued by this office upon the properly executed authority of the legal next of kin in each case. The widow is the first person having disposition of the remains of her husband. Should there be no widow or children, the father and, in turn (upon his decease), the mother, is the proper authority. The brothers, in order of seniority, and then the sisters in order of seniority, if there are no brothers, rank next in authority to decide. Under an opinion rendered by the Judge Advocate General of the Army, if a widow has remarried she forfeits her right, and the next of kin as given above will make decision.

4-27

Please
MC-52055
92

OFFICE OF THE QUARTERMASTER GENERAL
CENTRAL DIVISION
OVERSEAS PROJECT SUB-DIVISION

HOBOKEN, N.J.

NAME OF DECEASED SOLDIER	ORGANIZATION NO.	DATE
Bayko, Sedor P.	608-175	2/24/21
SERIAL NUMBER	ORGANIZATION	Date of Death.
557361	Co. M., 39th Inf.	8/5/18

4-6
Khal

Copy forwarded to
Adjustment Department
Date 4-23-21

WAR RISK INSURANCE INFORMATION

DATE _____

NAME OF BENEFICIARY

RELATIONSHIP

Mr. Konstantin Bayko - (Brother) Em address

Address

101-East Broadway, New York, N.Y.

Cor. Sec.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

14676
5-2811

Date 1-18-1924

SUBJECT: Information required for Cemeterial Division.

TO: The Adjutant General of the Army, World War Division, Washington, D.C.

1. It is requested that the items checked below be completed:

- a. Surname Boyko *Bayko* f. Date of death 8-7- ✓
- b. Christian name Sedor P. *Sidor P.* g. Cause of death D/W ✓
- c. Serial number 557361 ✓ h. Authority Cable 263 *9/25/18*
- d. Organization 39th Inf. Co.M. ✓ i. Emergency Address Konstantin Bayko
- e. Rank Pvt. ✓ 101 E. Broadway, New York, N.Y.
- j. Relationship Brother.

Was He Discharged? *no*

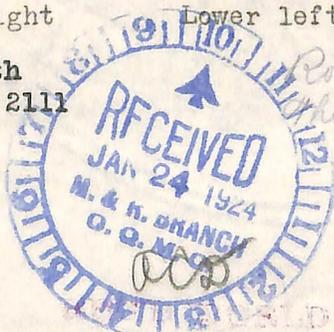
BODY DESCRIPTION:

- a. Date of enlistment Oct 3/17 d. Height 66 1/4 inches
- b. Age at enlistment 23 9/12 yrs e. Weight 155 lbs.
- c. Color of hair Sk Brown f. Fractures or breaks None noted.

DENTAL CHARTS:

Mobilization,								Local Board.							
<i>Not inducted</i>															
8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8	8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8	8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8	8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8	8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8	8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8	8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8		
Upper right				Upper left				Upper right				Upper left			
8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8	8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8	8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8	8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8	8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8	8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8	8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8		
Lower right				Lower left				Lower right				Lower left			

Gene Ruth
Room 2111



Robert C. Davis
The Adjutant General
per 4213. 1/22/24
For the Quartermaster General:

R.L. Foster
Assistant.

R. 1/25

8 JAN 21 1924

14676

Concentrated
from

21987

14676

GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

14676

Bayko 557361 Seydon P.
(Surname.) (Number.) (First Name and Initials.)

..... Pvt. Co. ... M. 39th ... Inf.
(Rank.) (Organization.)

DATE OF BURIAL. Aug. 7 1918

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

Chateau de la Foret, Dept of the Aisne,
France

GRAVE NUMBER. 12

HOW MARKED : Name Peg? Cross? yes
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 :

EW 112
25th Reg

REPORTED BY :
Boyd Williamson
(Signature and Rank of Reporting Officer.)

Chaplain 4th Sanitary Train

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

14676
GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF **14676**

Bayko **557361** **Seydon P.**
(Surname.) (Number.) (First Name and Initials.)

Pvt. **39th Infty.**
(Rank.) (Organization.)

DATE OF BURIAL... **6 August, 1918**

PLACE OF BURIAL **Chateau de la Faret, France.**

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

GRAVE NUMBER.. **12**

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

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:

Ralph McReynolds
..... **Ralph McReynolds, 1st Lieut. MRC.**
(Signature and Rank of Reporting Officer.)

This portion to be sent to Chief of Graves Registration Service

14676 B.G.

14676

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

FILE

BOYKO **587361** **Sedor** **P.**
(Surname). (Number). (First Name and Initials).

Pvt. **CO. M.** **39th. 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 correspondence - McKee, John V. L.
557254

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 mark should be given here?

NEAREST RELATIVE:

ADDRESS:

RELATIONSHIP:

REPORTED BY:

(Signature and Rank of Reporting Officer).

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

G.R.S. FORM NO. 12.

GENERAL HEADQUARTERS
AMERICAN EXPEDITIONARY FORCES
ADJUTANT GENERAL'S OFFICE

FROM : ADJUTANT GENERAL.
TO : C. O. CO. M. 39th. 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:

Konstantine Bayko

Relationship:

Address: 101 East Broadway New York N.Y.

14676

Name Bayko 557361 ~~S~~ or P

Rank Private Co. M {Corps Regt.} 39th Inf.

Date of Death

Place At junction of roads leading NW to Fere-en-Tardenois, NE to La Folie.

Cause

Wounds received in action.

Date of Burial Approximately Aug. 5, 1918.

Grave No. 12 Row A.

Cemetery A.E.F. plot Verbal acquisition from French Major at Fere-en-Tardenois.

Identified by {Tag Papers Clothing} Tags.

List of Effects

Field Record Made by Charles J. Wynne, 2nd Lt. Inf. R.C. Com'd 'g

(Pvt 1/Cl Ide)

Company 304, Graves Registration Service Group No. 1.

For additional data use reverse side

7 SEP 1918

Field sketch No. 1 - Wynne.

21987

Registration Card File

Section #2 "B"

File #21987

20 FÉV 1919

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

SUBJECT : Information required for G R S.

I. Items checked are to be completed :

- () Surname : Boyko (Bayko)
- () Number : 587361 (557361)
- () First name : Sedor P.
- () Rank : Pvt.
- () Company : M
- () Organization : 39th Inf.
- () Date of death : 8/7/18 (8/5/18)
- () Cause : W/A
- () Place :

Location of hospital :

- Number » »
- Class » »
- () Relative :
- () Relationship :
- () Address :
- () Authority :
- Cablegram No :
- Telegram from :

- dated : 9/25/18 (12/3/18)
- () Reported to Washington : C.C. Nos : CC 263 (CC 312)

- () (Underscore the "official" C.C.)
- () Remarks : Official Report ?

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

Initials of reporter :

REG
E.W.D.
J.P.V.

COPY

CSP-SS
Form No. 1009

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

Hoboken, N.J.

NAME OF DECEASED SOLDIER

CEMETERY NO.

DATE

Bayko, Sedor P.

SERIAL NUMBER

ORGANIZATION

608 - 175

2/24/21.

DATE OF DEATH

557361

Co. M, 39th Inf.

8/5/18.

WAR RISK INSURANCE INFORMATION

Original Forwarded
to Hoboken

DATE _____

Date 4-23-21

Mr. Kostantin Bayko

Brother

PERSON NAMED BY SOLDIER TO BE BENEFICIARY OF INSURANCE

RELATIONSHIP

101 East Broadway, New York, N.Y.

ADDRESS

Adjustment Made

6-15 1922

File No. 4676

FILE

PERSON RECEIVING DEATH COMPENSATION

RELATIONSHIP

S/1868/LML

FILE UNDER NO. 14676, Bayko, Sedor P.

INDEX SHEET

SYNOPSIS

See Board of Review letter dated 8/20/21 and reply thereto. The letter referred to above and the Board of Review Proceedings dated 8/10/21, which are held in this Department pending completion of their cases, will be filed in File #300.4, Board of Review, Cty. 608.

DOCUMENT FILED UNDER NO.

ECC

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