

G.R.S. Form #114-B

To The A. G. O.

68

1813

JAN 7 - 1926

FULL NAME *Beckner* BECKNER, Howard O. ✓

RANK *Private* Private ✓ SERIAL *2213796* 2213796 ✓

DIVISION & ORGANIZATION *3rd. Div.* Company G, 4th Infantry ✓

DATE OF DEATH *July 23, '18* July 23, 18 ✓

STATE FROM WHICH HE CAME *Nebraska* Nebraska ✓

MEDALS OR DECORATIONS AWARDED *None* ✓

FINAL GRAVE LOCATION. *4* ✓
Date Grave Row Block

608
Cemetery

23/306/ARK

*K.M.
713*

2 A.G.O.
JAN 7 1926
WORLD WAR DIV.

AUDITED BY
Y.B.W. 6/7/24

207

Place

Date

REPORT OF DISINTERMENT AND REBURIAL

Remains of:

Name: **BECKNER, Howard O.**

Number: **2213896**

Rank: **Pvt.**

Organization: **Co.G, 4th Inf.**

Disinterment and Reburial made by:

Disinterred (Date) **May 14, 1920**

From: (Give complete location)

Near Charveves, (Aisne) Map Ref. 49 NE 263.45N 192E

Reburied (Date) **May 14, 1920**

in: (Give complete location)

American E.F. Cemetery #608, Seringes-et-Nesles (Aisne)

Sec. H, Plot 7, Grave 357.

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

Was one identification tag found upon the body? **One**

What other means of identification were found upon the body? **None**

Remarks:

Supervised by **ORLIE B. WOOD**
Special Investigator

Zone Commander

2071A

Place

Date

REPORT OF DISINTERMENT AND REBURIAL

Remains of: **BECKNER, Howard O.**
Name:

Number: **2213896**

Rank: **Pvt.**

Organization: **Co. G, 4th Inf.**

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American E.F. Cemetery #608, Seringes-et-Nesles (Aisne)

Sec. H, Plot 7, Grave 357.

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

Was one identification tag found upon the body? **One**

What other means of identification were found upon the body? **None**

Remarks:

CONFIRMED No. D 20614

ORLIE B. WOOD

Supervised by **Special Investigator**

Zone Commander

Place **Seringes et Nesles (Aisne)**
CTY 608.

REPORT OF DISINTERMENT AND REBURIAL

Date **5.10.21.**

1. REMAINS OF **BECKNER, HOWARD O.** SERIAL NUMBER **2213896**

RANK **PVT** ORGANIZATION **CO. G. 4th. Inf.**

2. Disinterred (date): **5.10.21.** From (give complete location):

Gr. 357 Sec. H. Pt. 7
FIELD SECTION # 7
By: Group **Avery** Unit

3. Reburied (date): **5.10.21.** In (give complete location):

Given new gr. location for purpose of concentration,
Gr. 142 Sec. K. Pt. 3
FIELD SECTION # 7 Pine box.
By: Group **Avery** Unit Nature of reburial

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

BADLY DECOMPOSED **FEATURES UNRECOGNIZABLE**

Burlap and box.

5. (a) Identification tags: Buried with body? **YES** On grave marker? **NO**

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

NONE

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) **IMPOSSIBLE TO DETERMINE**

IMPOSSIBLE TO DETERMINE

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

Skull completely fractured: left femur, middle third fractured. Left numerous missing.

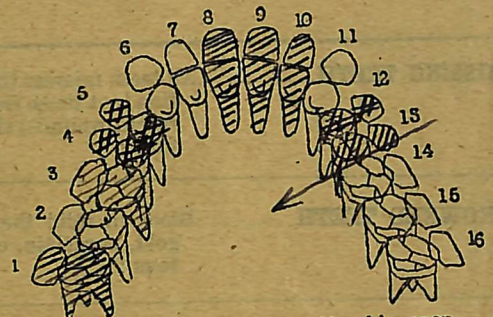
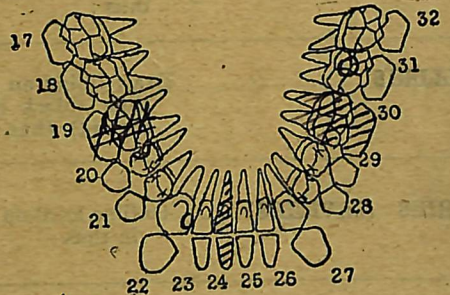


Diagram represents the mouth wide open.



1, 3, 30 ext; 4, 5, 12, 19, dec;
6, 9, 10, 13, 24 mis. a. d.;
14 met. fil; 20, 22, 31 cav;
between 14 & 15 fractured.

7. Disinterment supervised by **G. F. Avery**
G. F. AVERY, SUP. EMB.

Approved: **R. S. Williams**
(Title) **S. Williams, 1st Lieut, Q. M. Corps.**

8. Reburial supervised by **G. F. Avery**
G. F. AVERY, SUP. EMB.

Approved: **R. S. Williams**
(Title) **R. S. WILLIAMS, 1st. Lt. QMC.**

D-36583

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:

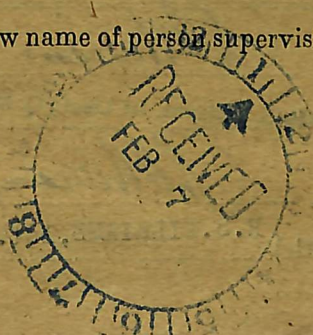


CARIES (CAVITIES).....Outline location and size of cavity, shade in thus:



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	Beckner	3	253
BURIED	CEMETERY	1	2
	GRAVE	2	04
	ROW	2	11
	BLOCK	1	2
STATE	Delaware	2	32
RANK	Priv.	1	2
DIVISION	3	2	03
ORGANIZATION	4	3	004
ARM	Inf.	1	1
MARTIAL	No	1	2
NAME	Beckner	3	
RESIDENCE	STATE	2	
5-36-1st St. S.E. Madison D.C.	COUNTY	2	
	CITY	3	
	RELATION	Mother	1
OTHER		1	
ELIGIBILITY	Dead	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	

RO
29/514/PJ

AUDITED
AUG 5 1932
RJR

RJR

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Beckner, Howard O. 608-F

July 3, 1930.

Mr. Frank H. Beckner,
536 1st St., S. E.
Madison, S. D.

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress of March 2, 1929, together with an amendment thereto, approved May 15, 1930.

This office has no record of any person entitled under the Act mentioned to make a pilgrimage to the cemeteries in Europe as the mother or widow of the above named deceased service man. To complete the list of eligibles and to assure that, if the above named man is survived by a mother or widow entitled to make a pilgrimage she receive an invitation to do so, it is requested you answer the following questions in the space provided on this letter and return to this office in the enclosed envelope which requires no postage.

1. Is the deceased survived by a mother?

If so, give her name and address:

No

2. Is the deceased survived by a widow who has not remarried?

If so, give her name and address:

No

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:

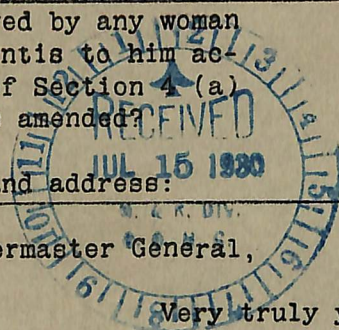
No

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment

A. D. Hughes
A. D. HUGHES
Captain, Q. M. Corps,
Assistant.



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Beckner, Howard O.
608

Sept. 12, 1929.

Mr. Frank H. Beckner,
536 1st St., S. E.,
Madison, S. Dak.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated July 30, 1929 making inquiry concerning the name and address of the mother and widow of the deceased service man above named. These addresses are desired with a view to ascertaining the number of mothers and widows who desire to make a pilgrimage to the cemeteries of Europe in which the remains of their sons and husbands are interred.

Will you please fill in the answers to the following questions in the space provided on this letter, and return the letter to this office in the enclosed envelope which requires no postage?

Write answers in space below

1. Is the deceased survived by a widow who has not since remarried? If so, give her complete address:

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

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

Dead

Dead

No

For The Quartermaster General,

Very truly yours,

2 Incls.
Act of Congress
Envelope

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Beckner, Howard O.

July 30, 1929.

Mr. Frank H. Beckner,
536 1st St., S. E.,
Madison, S. Dak.

Dear Sir:

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

The records of this office show that you are the father of the late Private Howard O. Beckner, Co. G, 4th Inf., 3rd Div., whose remains are now interred in the Oise-Aisne American Cemetery, Seringes-et-Nesles, 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.
4. 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
Beckner, Howard O.

June 20, 1929.
XC 35 522

Mr. Frank Beckner,
218 High St.,
Cuyahoga Falls, Ohio.

F. Frank H. Beckner
536 1st St. S. E.
Madison, S. Dak.

Dear Sir:

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

The records of this office show that you are the father of the late Private Howard O. Beckner, Co. G, 4th Inf., 3rd Div., whose remains are now interred in the Oise-Aisen 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.

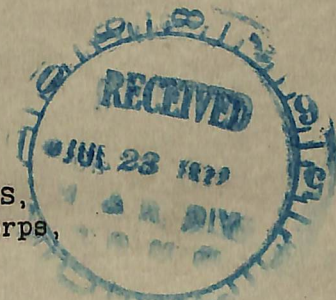
For your reply, you may use the enclosed envelope which requires no postage.

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

10

WASHINGTON, D.C.
JUN 20
6:30 PM
1929

PENALTY FOR PRIVATE USE

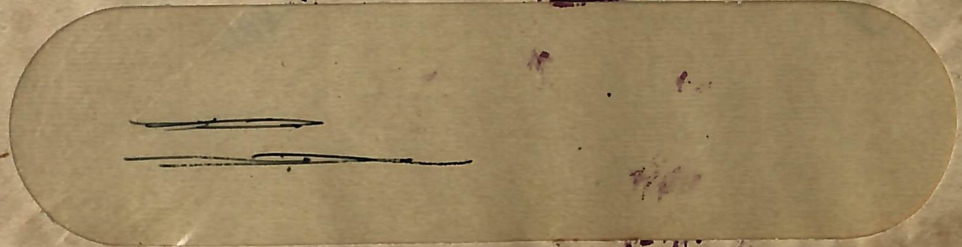
TO AVOID PAYMENT OF
CITIZEN POSTAGE \$300.
MILITARY TRAINING
- CAMPS -

REASON FOR
NON-DELIVERY
CHECKED

UNCLAIMED _____ UNKNOWN
REFUSED _____ FOR BETTER ADDRESS
NO ADDRESS _____ RETURNED
NO SUCH PERSON OR OFFICE IN STATE NAMED

RECEIVED
JUN 27 1929

Not at
218 High St.
Not lived here for
Several years



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Beckner, Howard O. 608-F

July 3, 1930.

Mr. Frank H. Beckner,
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Dear Sir: Your attention is invited to the enclosed copy of an Act of Congress of March 2, 1929, together with an amendment thereto, approved May 15, 1930.

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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

Beckner, Howard O.
608

Sept. 12, 1929.

Mr. Frank H. Beckner,
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Dear Sir:

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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

Beckner, Howard O.

July 30, 1929.

Mr. Frank H. Beckner,
536 1st St., S. E.,
Madison, S. Dak.

Dear Sir:

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

The records of this office show that you are the father of the late Private Howard O. Beckner, Co. G, 4th Inf., 3rd Div., whose remains are now interred in the Oise-Aisne American Cemetery, Seringes-et-Nesles, 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. | |
| 4. 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

June 20, 1929.

Beckner, Howard O.

Mr. Frank Beckner,
218 High St.,
Cuyahoga Falls, 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".

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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.

QM 293 A-C

B
Beckner, Howard O.

February 11, 1929.

Mr. Frank Beckner,
218 High Street,
Cuyahoga Falls, Ohio.

Dear Sir:

In order to conform to the plans for beautification of the permanent American Military Cemeteries in Europe it has been necessary to make a re-arrangement of the graves in these Cemeteries, which may be considered as permanent for all time.

The enclosed card gives the final resting place of ^{your son,} the late Howard O. Beckner, Private, Company G, 4th Infantry.

For The Quartermaster General,

Very truly yours,

J. McCLINTOCK,
Major, Q. M. Corps,
Assistant.

1 Incl.
Record card.

Q.M.G.-M

2 FEB 11 AM 1929

DISPATCHED

115

To be prepared in triplicate.

DATE February 17, 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 BECKNER, Howard O. *Nebu* 10. Name _____
 2. No. 2213796 11. No. II
 3. Rank Pvt. 12. Rank _____
 4. Org. Co. G, 4th Inf. *3rd Div.* 13. Org. _____
 5. D.D. July 23rd 1918 14. (a) D.D. _____
 6. C.D. KIA (b) D.B. _____

Discrepancy found upon disinterment

7. Grave No. 40 Sec. _____ 15. Grave No. _____ Sec. _____
 8. Plot Block B Row 11 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 17, 1928 By P.D. Woodman
 24. Inscription on grave marker:
 Name BECKNER, Howard O. Serial No. 2213796
 Rank Pvt. Organization Co. G, 4th 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 17, 1928 By P.D. Woodman
 31. Casket sealed by P.D. Woodman

Signature of Embalmer, (Supervisor)

P.D. Woodman

To be prepared in triplicate.

DATE February 17, 1928

REPORT OF DISINTERMENT, PREPARATION, SHIPMENT AND REBURIAL OF BODY

DISINTERMENT

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Discrepancy found upon disinterment

- 7. Grave No. 40 Sec. _____ 15. Grave No. _____ Sec. _____
- 8. Plot Block B Row 11 16. Plot _____ Row _____
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PREPARATION

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Signature of Embalmer, (Supervisor)

P.D. Woodman

To be prepared in triplicate.

DATE February 17, 1928

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COMPARATIVE REPORT

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- 2. No. 2213796 11. No. 11
- 3. Rank Pvt. 12. Rank _____
- 4. Org. Co. G, 4th Inf. *3rd Div.* 13. Org. _____
- 5. D.D. July 23rd 1918 14. (a) D.D. _____
- 6. C.D. KIA (b) D.B. _____

Discrepancy found upon disinterment

- 7. Grave No. 40 Sec. _____ 15. Grave No. _____ Sec. _____
- 8. Plot Block B Row 11 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 17, 1928 By P.D. Woodman
- 24. Inscription on grave marker:
 - Name BECKNER, Howard O. Serial No. 2213796
 - Rank Pvt. Organization Co. G, 4th 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 17, 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 BECKNER, Howard O. Serial No. 2213796

Rank Pvt. Organization Inf Co. G, 4th Inf.

33. Consigned to: _____

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

34. Casket boxed and marked (Date) February 17, 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 17, 1928, Oise-Aisne American Cty. (Date)

42. Grave No. 4 Section _____

43. Plot Block B Row 11

G.R.S. Representative William E. Moore
William E. Moore, Superintendent.

REPORT OF DISINTERMENT AND REBURIAL

Place Oak-Aisne Cty 608

Date February 17, 1928.

1. REMAINS OF BECKNER, Howard O. SERIAL NUMBER 2213796

RANK Private ORGANIZATION Co. G, 4th Inf.

2. Disinterred (date) : February 17, 1928 From (give complete location) :
Grave 40, Block B, Row 11

By : Group Cty. Unit

3. Reburied (date) : February 17, 1928 In (give complete location) :
Grave 4, Block B, Row 11

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) 7 to 10 MAD

(b) Weight (estimated)

(c) Hair—Color

Quantity

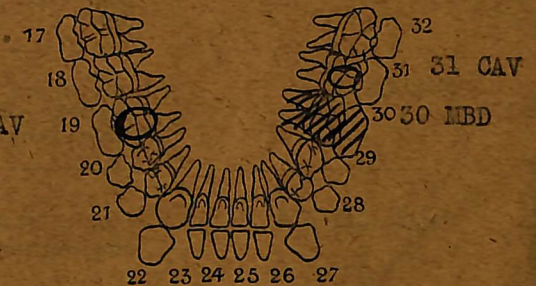
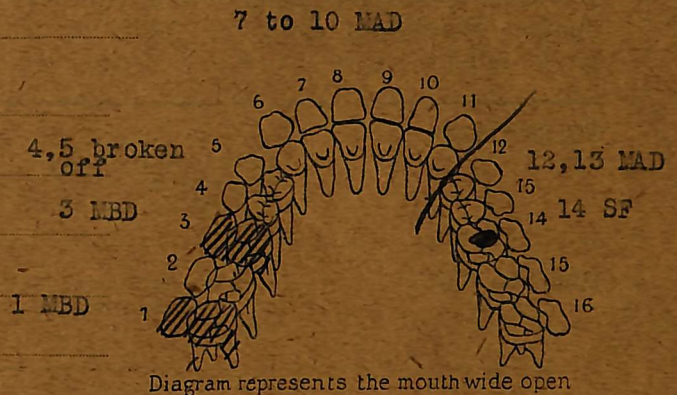
Characteristics

(d) Hair on face—Color

Location

Quantity

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



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

Left humerus missing. Left femur fractured middle. Head and upper jaw shattered.

7. Disinterment supervised by W. Woodman

Approved : W. G. Woodman
(Title)

8. Reburial supervised by Charles E. Spahn

Approved : W. G. Woodman
(Title)

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.

QM 293 A-C

BECKNER, Howard O. - Pvt.

October 28, 1925

Mr. Frank Beckner,
218 High St.,
Cuyahoga Falls, Ohio

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.

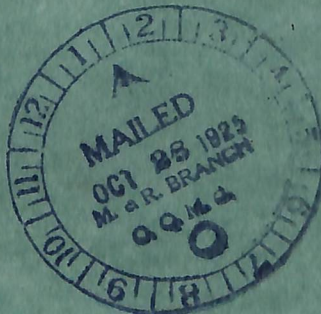
This American military cemetery is one of those to be maintained by the United States for all time in Europe. Each grave will be marked by a headstone of white marble, of dignified design, with the name, rank, division, organization, date of soldier's death and State from which he came. Headstones will 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

Vol

COMPILATION OF DISPOSITION OF REMAINS DATA

File # 12725

I. LOCATION INDEX CARD:

(a) Name BECKNER, Howard O. Ser. No. 2213896
(b) Rank Pvt. Organization Co.G, 4th Inf.
(c) Date of death 7/23/18 (d) Cause of death K/A

TYP. EK

CKR.

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

(a) Grave No. 357 Row -- Plot 7 Sec. H TYP. EK
(b) Emerg. Address Frank H. Beckner (father) Mantua, Ohio.

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

IV. A. G. O. DISPOSITION CARD:

Date of receipt none

(a) Name Frank Beckner (b) Relationship father
(c) Address Omitted (218 High St. Cuyahoga Falls, Ohio)
(d) Remains to be brought to U. S.? no
(e) To be interred in National Cemetery in U. S. at ---
(f) Shipping instructions upon arrival of body in U. S. ---
(g) Disposition instructions if not brought to U. S. ---

Examiner's Initials H.P. Date 12/29, 1920.

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

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

no correspondence

Examiner's Initials H.P. Date 12/29, 1920.

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

No request for disposition
E.A. Frank M. Beckner, Mantua, Ohio.

(a) Cancellation memos referred to? Yes all

Examiner's Initials AH Date 11-3-20, 1920.

COUNTRY France

CEMETERY No. 608

SHEET No. 3775

A.B.R. 1/26/21

Rev. 5-31-20

VII. G. Form No. 114 made _____, 1920.

Typed by _____, Checked by _____, 1920.

VIII. FINAL ACTION:

Following advice forwarded to Europe by

cable on _____, 1920

letter on 1/15/21, 1920

Cemeterial Division
Overseas Project Sub-Section

RECEIVED BY
MAIL UNIT

MAY 12 1921

Par. II not to be returned SPW

IX.

CORRECTIONS

CHANGE OF ADVICE.

ACTION TAKEN.

Desires body be _____

Body to be shipped to _____

X. SUSPENSION REMARKS:

Name

Rank

Serial No.

Name

Rank

Serial No.

Org.

Remarks:

Rosenbly

A. G. O. Card & Corr.

12/29/20

Discrepancies

Name

Rank

Serial No. ✓

Org.

Remarks:

G. R. S. Corr.

Discrepancies

Name

Rank

Serial No.

Org.

Remarks:

Checkers

Discrepancies

Name

Rank

Serial No.

Org.

Remarks:

*8 W. Pent
1/31/21
906*

*chk by web
1-3-21*

44

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

CEMETERIAL DIVISION

WASHINGTON, D. C.
 HOBOKEN, N. J.

FEB 16 1921

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

To: Mr. Frank Beckner, 218 High St., Cuyahoga Falls, Ohio.

SUBJECT: Remains of Pvt. Howard O. Beckner, Ser. No. 2213796, Co. G, 4th 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? _____

NAME OF—	NO. AND STREET.	TOWN.	STATE.
Soldier's widow			
Soldier's children. (Name oldest first.)	1		
	2		
	3		
Father			
Mother			
Brothers. (Name oldest first.)	1		
	2		
	3		
Sisters. (Name oldest first.)	1		
	2		
	3		

Date _____ Signature _____
 Address _____ Relationship _____

Address _____ Relationship _____, 192
Date _____ Signature _____

I, the undersigned, am the _____ 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 BY
MAIL UNIT
MAY 12 1921

1. As stated on first page of this sheet.
2. To be returned to the U. S. and shipped to _____
(Name) _____
Cemeterial Division
Overseas Project Sub-Section
(State) _____
(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 _____

INSTRUCTIONS FOR FILING OUT.

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.

COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

File # 12725

(a) Name BECKNER, Howard O. Ser. No. 2213896
 (b) Rank Pvt. Organization Co. G, 4th Inf.
 (c) Date of death 7/23/18 Cause of death K/A

OK (R-4)
7 (1-8-21)

TYP BK

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

(a) Grave No. 357 Row -- Plot 7 Sect. H TYP BK
 (b) Emerg. Address Frank H. Beckner (father) Mantua, Ohio.

III. Files of soldiers dying from contagious diseases --- CKR H

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

*a. G.O. Card - Frank Beckner (father)
 218 High St. Cuyahoga Falls, Ohio desires
 body to remain in Europe 11/17/21 - LPW*

V. Following advice forwarded to Europe by - (cable on --- 192
 (letter of transmittal on 11/15 1921)

Par. II Not to be returned LPW

VI. Form 115 forwarded to G.R.S. Hoboken, N.J. FEB 1-1921 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/Brance

608

3775

A.B.R. - 1/26/21

Beckner,

(Surname.)

Howard O.

(Christian name in full.)

2,213,796

(Army serial number.)

Pvt.

Co G 4th Inf.

(Rank and organization.)

State your relationship to the deceased

Father

Do you desire the remains brought to the United States?

no

(Yes or no.)

If remains are brought to the United States, do you

}

wish them interred in a national cemetery?

(Yes 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)

Frank Beckner

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

3-6713

Letter sent to-

Mrs. Frank Beckner,
218 High St.,
Cuyahoga Falls, Ohio.

Drawn by A. R.

6057 3775

12/29/20.

**REVIEWED
OSP SS.**

WEB 1-3-21

RAVE LOCATION BLANK

FILE

LOCATION OF THE GRAVE OF

BECKNER 221389 Howard O.
(Surname). (Number). (First Name and Initials).

Pvt. Co. G. 4th Infantry
(Rank) (Organization).

PLACE OF DEATH: In the Forest de Sere about 1 1/2 Kilos from Mont St Pierre

CAUSE OF DEATH: Shell Ferg

DATE OF BURIAL: 23 July 1918.

PLACE OF BURIAL: place of death

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

GRAVE NUMBER: ✓

HOW MARKED: Name Peg? ✓ Cross? *ye*

Headboard? Bottle?

IDENTIFICATION TAGS:

Was one buried with body? *ye*

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

If name unknown and tags missing description and mark should be given *Paul gonnie (cousin)*

B 4976 (COORD)

NEAREST RELATIVE: Frank N. Beckner

ADDRESS: Marcella, Ohio

RELATIONSHIP: Father

REPORTED BY:

J.E. Collins Capt 4th Inf

(Signature and Rank of Reporting Officer).

REVIEWED
OSP SS.



Communal List No. _____
Daily Report No. _____

22306

G.R.S. FORM NO. 2.

GENERAL HEADQUARTERS
AMERICAN EXPEDITIONARY FORCES
ADJUTANT GENERAL'S OFFICE

FROM : ADJUTANT GENERAL.

TO : C.O. Co. "G", 4th 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.

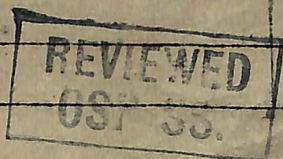
Note:

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

Nearest relative of deceased:

Relationship: _____

Address: _____



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

PLEASE
EXPEDITE

FILE

Adjustment Made
JAN 14 1921

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 1/3/21

File No. Registration.

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

To: The Adjutant General of the Army, 6th & B Sts., N.W., Washington, D.C.

Subject: Information required for G.R.S.

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

- a. Surname **Beckner** *OK*
- b. Christian name **Howard O.** *OK*
- c. Serial Number ~~2213896~~ **(2213796)** *OK*
- d. Organization **Co. G, 4th Inf.** *OK*
- e. Rank **Pvt.** *OK*
- f. Date of death **7/23/18** *OK*
- g. Cause of death **K/A** *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)

RECEIVED
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							

S.M.

CW

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

BY: *H. J. Conner*

CEMETERY NO: 608

SHEET NO: 3775

TYPED BY: JBC

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

Rec'd World War Div.
Date 6/21

S/713/1ML

Donnelley - a.L.
2-P, 21 W8
1-6-21

FILE

7725

C° G - 4th Infantry -
3rd Division.

BECKNER, Howard O. - Priv. 2213796
Home address: Manuta - Ohio.

Killed in action on 23rd July 1918, in the Forêt de Fère, France
at 9:00 P.M. by shell fire, shell hit at head of dugout which he occupied
and killed him instantly. He buried about one and a half kilometers
Northeast of Mont St Pierre, France, France, In the Forêt de Fère.

Informant: STEVENS, Albert P. - Sgt. 2339009
C° G Infantry -
Home: 250 University Ave. - Cinn. - Ohio
Signed: Same as above.

AL.

REVIEWED
OSP SS.

G.P.S. Form No. 10
Notification of Grave Location.

File # 293.8 Cem. Div. # 12725 Registration.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
GRAVES REGISTRATION SERVICE
WASHINGTON, D.C.

July 12, 1920.

To: Mr. Frank H. Beckner,
Manitua, Ohio.

Case of: Private Howard O. Beckner, # 2213896,
Company G. 4th Infantry.

Place of Burial: Disinterred and reburied in:
Grave # 357, Sec. H. Plot 7,
American Cemetery # 608,
Seringes et Nesles, Aisne.

1.- It would be likely to involve further delay if we should write personal letters in each of the many cases of notification of relatives as to the present resting places of their noble dead who glorify the nation's roll of honor.

2.- Will you therefore, please accept this letter as being the best we can do, just now? And will you also accept the sympathy of those who have been working hard for many months to render worthy service to tens of thousands of sorrowing people, in the care of their dead?

3.- Many delays in notification have resulted from our ignorance of proper addresses, shortage of clerical personnel, incomplete and imperfect information, or non-delivery and return of former letters.

4.- Thousands of bodies have been transferred to larger and better cemeteries, for reasons which were deemed imperative by the military authorities of all the Allied Nations, and the great task of improving these cemeteries is well under way. The most diligent care has been exercised to insure accuracy, and this immense project is being carried through as an unquestionable service to the friends of our dead.

5.- In serving you and others, we have been hampered by conditions and consequences of such a war as we hope may never involve our country again.

By authority of the Quartermaster General:

CHARLES C. PIERCE,
Colonel, Q.M. Corps,
Chief, Graves Registration Service.

CCP/jad
JJ

NS-3816/MB



WAR DEPARTMENT

~~Quartermaster General~~
~~Cemeterial Division.~~
~~Washington, D. C.~~

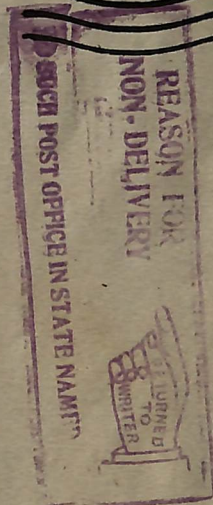
OFFICIAL BUSINESS

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



RECEIVED
POST OFFICE
WASHINGTON, D.C.

Mr. Frank H. Beckner,
Manitua, Ohio.



Classification _____

Adjustment _____

CEMETERY DIVISION
GRAVES REGISTRATION SERVICE
REGISTRATION SECTION

Date 7/13/20

MEMORANDUM:

To: Registration Files Sub-Section.

Subject: Adjustments made on Registration Files.

1. Changes as checked have been made in the Registration Files which will necessitate a corresponding change in the Classification Files.

	CORR.	ADD. DATA		CORR.	ADD. DATA
File Number			Date of Burial		
Name			Date of Reburial		
Serial Number			Burial Information		
Rank			Nearest Relative		
Organization			Notified Nearest Relative		
Cause of Death			Blue Card thrown out		
Date of Death			Reburial — 3x5 White Card set up 5x8	o	o
Casualty Cablegram Number			4x6 n/c Confirmed		✓

O.K. Alphabetical Files A.E.S. 7-31-20

~~O.K. Organization Files~~

~~O.K. State Files~~

**REVIEWED
OSP SS.**

Cemetery Audit Department
Investigation & Adjustment Dept.

By V.B. Cohen

3 Cards attached.