

57864

2. Soldier's No. 1210782

3. Boag Geo
Surname (in block letters) First Name and Initials

4. Rank Company Regt. or Corps

5. 10/12/18 K.I.A.
Date of Death Cause, if known6. 10/17/18 Busigny Mil Cem
Date of Burial Cemetery7. Busigny
Town or Commune (in block letters) Department8. 7 c Amex
Grave No. Plot No. or Letter9. Name Peg? Cross? Headboard? Bottle?
Check Method of Marking10. Buried with Body? Attached to Grave Marker?
Identification Tags

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

OSP SS.

623

12. Map Reference, if interment is outside of cemetery

57b V 10 c 49

13. Give name of Chaplain or Burial Officer

Signed: J. F. ...

Group ... Unit 302 G. R. S.

57864

GRAVE LOCATION BOOK.

LOCATION OF THE GRAVE OF

Boag 1710782 George A.

(Surname.) (Number.) (First Name and Initials.)

~~POA~~ ~~Co H 107th Inf~~

(Rank.) (Organization.)

DATE OF BURIAL. Oct 18, 1918

PLACE OF BURIAL. Burgundy cem.

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

map sheet 57B, S.E.

V. 10 C 4-9

REVIEWED
OSP SS.

GRAVE NUMBER. C7

HOW MARKED: Name Peg? yes 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:

623

REPORTED BY:

H. P. Stapp Chaplain 119 Inf
(Signature and Rank of Reporting Officer.)

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

3 NOV 1918

CEMETERIAL DIVISION
REGISTRATION SECTION

FILE

January 30

1922

MEMO FOR:

Cards Department.

1.

CASE OF:

Co. F., 107th Inf ntry
ORGANIZATION (Old)BOAG. 1210782 George A, Pvt. 1/cl.
(Name)

Correction or additional data changes as shown below have been made on the Registration Card of the above-mentioned soldier and a corresponding change will be necessary on the Organization Card:

ORGANIZATION (New)

FILE NO.

SURNAME

SERIAL NUMBER

FIRST NAME AND INITIALS

RANK

DATE OF DEATH

CAUSE OF DEATH

	Date	Place	F-1A No.
Orig.			D-
1st. Reb.	1/28/21	623	D- 30090
2nd Reb.			D-
3rd Reb.			D-

(Note: In the above spaces below double line fill in ONLY the new date and data correcting previous information)

BY: Miss Lannon

Card.,

(Department)5 x 8 card was sent to file.

Corrections made
on Organization
File Card:

By A.B.
S/3324/LML

FEB 11 1926

1636

15
6, 10, 14

DATE

SERIAL No. 1210782

1. NAME BOAG, George A.

RANK Pvt. 1cl.

ORGANIZATION Co. F, 107th Inf.

& DIVISION 27

GRAVE LOCATION British Military - Busigny, Nord

623

CTY. NAME

NUMBER

20

A

1

GRAVE

ROW

PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION

7, Row A, Plot 1, Busigny

Nord

GRAVE

COMMUNE

DEPT.

COORDINATES

13 N.E. E.172.8. N.354.7.

CONCENTRATED TO

Jan. 28, 1921.

20

A

1

DATE

GRAVE

ROW

PLOT

Brit. Mil. Cty. Busigny (Nord)

623

CEMETERY

CTY. NUMBER

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

Tag found on body. Crosses reversed over graves of Pvt. 1/cl. Raymond Douglas (Cross #7) and Pvt. 1/cl. George A. Boag (Cross #8). Both bodies were identified by tags on bodies. Left leg fractured in two places above and two places below the knee. Right leg fractured below knee. Form 16-A dated 28, Jan. 1921.

(Transposition of bodies)

DATE OF DEATH

Oct 16, 1918

SUBSEQUENT REBURIALS

DATE DATE FROM GRAVE WHICH HE CAME ROW PLOT CEMETERY

MEDALS OR DECORATIONS AWARDED

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR

LOUIS R. DICE, Major, CAC.

3. FINAL GRAVE LOCATION

10/14/22

GRAVE

11

ROW

Blk. D

PLOT

AUDITED BY
FEB 11 1926
WORLD WAR DIV.

4 Somme American Cemetery #636, BONY, Aisne

CEMETERY

Robert O Davis

Major General

The Adjutant General

Rec'd World War Div.

5 MAR 24 1928

BY A
FEB 16 1926

INSTRUCTIONS FOR PREPARATION OF FORM 114 B

1. Forms 114-B are to be prepared by Registration Branch in quadruplicate, three copies to be forwarded to Area Supervisor who will accomplish paragraph 2 and return all three copies to Headquarters, American Graves Registration Service.

2. Paragraphs 1 and 3 will be accomplished by Registration Branch, Headquarters, American Graves Registration Service, Q.M.C., in Europe.

3. Paragraph 2 will be accomplished by Area Supervisor from data on file in his office.

4. If data is entered on Form 114-B from Form 1, Form I6, Form 1-A or Form 16-A, statement to this effect will be made on Form 114-B STATING WHICH G.R.S. form data is taken from. If data concerning co-ordinates is approximate and NOT accurate, statement to this effect will be made on these forms.



Report KIA 10/16 EC 326

GRAVE LOCATION BLANK.

Boag
Boag, 1210782 George A.
Pvt
(Surname.) (Number.) (First Name and Initials.)
(Rank.) (Organization.)

DATE OF BURIAL Oct 18, 1918

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

map sheet 57B, SE.
V 10 C 4-9

GRAVE NUMBER C7

HOW MARKED : Name Peg? yes 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 :
H. S. Stepp, Chaplain 119 Inf
(Signature and Rank of Reporting Officer.)

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

CODE SLIP

HEADING	SUB HEADING	NO. OF COLS	CODE
NAME	Boag, Genl.	3	231
	CEMETERY 636	1	5
BURIED	GRAVE 5	2	05
	ROW 11	2	11
	BLOCK 0	1	4
STATE	N. J.	2	35
RANK	Priv.	1	2
DIVISION	27th	2	27
ORGANIZATION	102th	3	107
ARM	Inf	1	1
MERIT	No	1	2
NAME	Boag	3	231
	STATE	2	35
RESIDENCE	49 Humboldt St Newark, N. J.	2	07
	CITY	3	071
RELATION	Mother	1	1
OTHER	no loco	1	
ELIGIBILITY	no SM	1	6
NATIVITY	Dead	1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	MB
NO. OF SONS		1	
DATE OF TRIP	NO.	1	
	YR.	1	
ACCEPTANCE		1	
29/514/EAB			

AUDITED
SEP 19 1952

Sept 27 - 1932

Mr Chas. W. Dietz

Dear Sir

32/43 George a Boag
has no stepmother as
I am still a widower.

Respectfully Yours

James M Boag
49 Humboldt St
Newark N.J.



QH 293 A-M
Boag, George A. (Son)

September 21, 1932.

Mr. James Boag,
49 Humboldt St.,
Newark, N. J.

Dear Sir:

This office is making an earnest endeavor to communicate with all women who may be eligible under the provisions of the Act of Congress of March 2, 1929, as amended May 16, 1930, to make a pilgrimage to the cemeteries of Europe.

It will therefore be appreciated if you will advise whether or not your son, the late Private George A. Boag, is survived by a stepmother, and if so, her name and address and the date of your marriage to her.

The enclosed self-addressed envelope which requires no postage is for your convenience in replying.

For The Quartermaster General,

Very truly yours,

CHAS. W. DIETZ,
Captain, Q. M. Corps,
Assistant.

Encl.
Env.

mf
C

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

L

IN REPLY REFER TO QM 293 A-C
Boag, George A. - 636 F

Mr. James M. Boag,
49 Humboldt St.,
Newark, N. J.

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?

No

If so, give her name and address:

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

No

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?

No

If so, give her name and address:

For The Quartermaster General,

Very truly yours,

A. D. Hughes

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

Enclosures:
Envelope
Act
Amendment



Major John J Harris

NEWARK, N. J.,

May 18th/29

Dear Sir,

In reply to your letter of the 16th, I will state, that George A. Boag Co F 107 Infantry, was never married, and his Mother is dead.

Respectfully Yours

James M Boag



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Boag, George A.

May 16, 1929.

Mr. James Boag,
49 Humboldt St.,
Newark, N. J.

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, first class George A. Boag, Company F, 107th Infantry, whose remains are now interred in the Somme American Cemetery, Bouy, 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,
Major, Q. M. Corps,
Assistant.

2 incls.
Act of Congress.
Envelope.

B

QM 293 A-M
Boag, George A. (Son)

September 21, 1932.

Mr. James Boag,
49 Humboldt St.,
Newark, N. J.

Dear Sir:

This office is making an earnest endeavor to communicate with all women who may be eligible under the provisions of the Act of Congress of March 2, 1929, as amended May 15, 1930, to make a pilgrimage to the cemeteries of Europe.

It will therefore be appreciated if you will advise whether or not your son, the late Private George A. Boag, is survived by a stepmother, and if so, her name and address and the date of your marriage to her.

The enclosed self-addressed envelope which requires no postage is for your convenience in replying.

For The Quartermaster General,

Very truly yours,

CHAS. W. DIETZ,
Captain, Q. M. Corps,
Assistant.

Encl.

1932 SEP - 22 - AM 10: 23

mf

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Boag, George A. - 636 F

Mr. James M. Boag,
49 Humboldt St.,
Newark, N. J.

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:

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

Boag, George A.

May 16 1929.

Mr. James Boag,
49 Humboldt St.,
Newark, N. J.

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, first class George A. Boag, Company F, 107th Infantry, whose remains are now interred in the Somme American Cemetery, Bony, Aisne, France.

Will you please advise this office whether or not he is survived by a 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.

Boag

George A

623-3
1,210,782

Pvt (Surname.) Co F, 107th Inf (Christian name in full.) (Army serial number.)

(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) *James M Boag*

(Number and street or rural route.) (City, town, or post office.) (State.)

Read carefully the letter accompanying this card.

Drawn by Jm

62.3-3

1-25

REVIEWED

OSP SS.

~~7-10~~ 1-25-21

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

QM 293 A-C

March 14, 1927.

BOAG, George A. - Pvt 1/c
Co. F, 107th Infantry.

Mr. James Boag,
49 Humboldt St.,
Newark, New Jersey.

Dear Sir:

The Quartermaster General desires to invite your attention to the inclosed card which gives the permanent cemetery location of the soldier's grave in which you are interested.

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

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

Very truly yours,

1 Incl.
Record card.



K. J. HAMPTON,
Lt. Col. Q. M. G.
Assistant.

MM
WTR

25/560/EYS

Oct. 10, 1921

To be prepared in triplicate.

Roisel, Somme
DATE

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 BOAG, George A.
 2. No. 1210782
 3. Rank Pvt. 1st.
 4. Org. Co. F, 107th Inf.
 5. D.D. Oct. 16, 1918
 6. C.D. KIA

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

Discrepancy found upon disinterment

7. Grave No. 20 Sec. _____
 8. Plot 1 Row A
 9. _____

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

18. Cemetery British Mil., American Plot

19. Commune or town Buzigny

20. Dept. or County Nord

21. Country France

22. G.R.S. Hdqrs. Code No. 625

23. Disinterred (Date) Oct. 10, 1921

By E.L. Reid

24. Inscription on grave marker:

Name George A. Boag,
 Rank Pvt. 1/1st.

Serial No. _____
 Organization Co. F, 107th Inf.

25. Was identification disc found on grave marker? no On body? yes

M.P. Wallace, Jr.
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)
Body previously worked by Field Section, Reburial bottle and 2 metal strips; data checks with form 114-A Disc on body reads: "George A. Boag, 1210782, U.S.A."

27. Condition of body Badly decomposed. Features unrecog,

28. Nature of burial Uniform, blanket and wooden box.

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 Oct. 10, 1921 By E.L. Reid

31. Casket sealed by _____

Signature of Embalmer, (Supervisor) E.L. Reid E.G. Reid

AUDITED BY
Supt
8/2/25

SHIPMENT. (Show actual marking of box.) Box No. Q-1650

32. Designation of body:

Name ROAG, George A. Serial No. 1210762

Rank Pvt. 1st. Organization Co. F, 107th Inf.

33. Consigned to:

Name of Permanent Cemetery Bony, Aisne, No. 636

34. Casket boxed and marked (Date) Oct. 10, 1921 By E.L. Reid

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

Signature of G.R.S. Inspector J.J. Powers
J.J. Powers, 1st Lt. MC

36. Remarks _____

37. Shipped from point of Operation: (Date) Oct. 10, 1921

To point of Concentration Roisel, Somme

Convoyer E.C. Helms, Signature Shipping Officer J.J. Powers, 1st Lt. MC

(Name) J.J. Powers

38. Received at Railhead or Point of Concentration: Date Oct. 10, 1921

By G.R.S. Representative Hubert W. Boyette
Hubert W. Boyette, Captain, MC

39. Shipped from Railhead or Point of Concentration: Date Oct. 10, 1921

To Permanent Cemetery No. 636, Bony, Aisne

Convoyer E.C. Helms, Signature Shipping Officer H.W. Boyette, Capt. MC

(Name) Hubert W. Boyette

40. Received: Date 11 OCT 1921

G.R.S. Representative J.P.D.M.

41. Reinterred Oct. 14, 1922

(Date)

42. Grave No. 6 Section _____

43. ~~Box~~ Block D Row 11

G.R.S. Representative D.E. Lowry
D.E. Lowry, 1st Lt. MC.

Place Busigny (Nord), France.

REPORT OF DISINTERMENT AND REBURIAL

Date Oct. 10, 1921.

1. REMAINS OF BOAG, George A. SERIAL NUMBER 1210782

RANK Pvt. 1/cl. ORGANIZATION Co. F, 107th Inf.

2. Disinterred (date): Oct. 10, 1921, Gr. 20, Plot 1, Row A, Cem. 623, Busigny (Nord), France.

From (give complete location):

By: Group 4 Unit F.S. 8

3. Reburied (date): 10/14/22 In (give complete location):

Grave 6 Row 11 Block D, Somme Cem. #636, (isne)

By: Group Reburial Unit Reg. Casket Shipping Case Nature of reburial Case

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

Badly decomposed. Features unrecognizable. U.S. uniform, blanket and wooden box.

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

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

Body previously worked by Field Section. Reburial bottle and 2 metal strips - data checks with form 114-A.

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 estimate

(c) Hair—Color Apparently dark brown

Quantity Thin

Characteristics Straight

(d) Hair on face—Color None visible

Location

Quantity

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

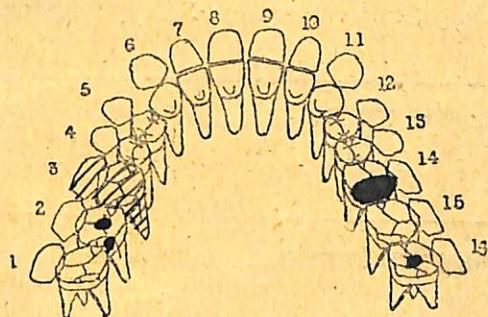
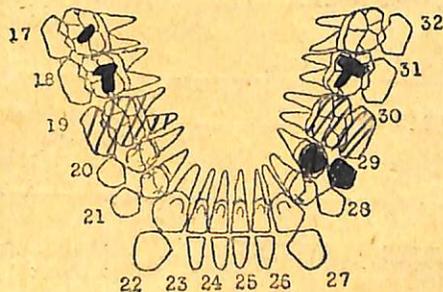


Diagram represents the mouth wide open.



(f) Wounds or missing parts (received at time of casualty) (2 SF, 3 MBD, 14&16 SF, 17&18 SF (19 MBD, 29 GD, 30 MBD, 31 SF

Left leg shattered. Right leg fractured below knee.

7. Disinterment supervised by E. L. Reid W. D. Wall, Jr., Checker. Approved: J. Powers

E. L. Reid, Sup. Sub. (Title) J. Powers

8. Reburial supervised by B. A. Bradford Approved: E. Lowry

B. A. Bradford, S. S. (Title) E. Lowry, 1st Lt. U.S.C.

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

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

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

<p>MISSING TEETH.....All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus :</p>	 <p style="text-align: center;">TOOTH MISSING TOOTH MISSING</p>
<p>CROWNED TEETHBlock in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus :</p>	 <p style="text-align: center;">GOLD CROWN PORCELAIN CROWN GOLD CROWN</p>
<p>BRIDGE WORKBlock in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :</p>	 <p style="text-align: center;">GOLD AND PORCELAIN BRIDGE GOLDBRIDGE</p>
<p>FILLINGSDraw filling on tooth accurately as possible (block in and label gold, silver, cement), thus :</p>	 <p style="text-align: center;">SILVER FILLING GOLD FILLING GOLD FILLING GOLD FILLING</p>
<p>CARIES (CAVITIES)Outline location and size of cavity, shade in thus :</p>	 <p style="text-align: center;">CAVITY DECAYED DECAYED DECAYED</p>
<p>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."</p>	

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

Place ³ B.M.Cty. 625 Busigny.
Date 28th Jan. 1921

REPORT OF DISINTERMENT AND REBURIAL

1. REMAINS OF BOAG, George A. SERIAL NUMBER 1210782
RANK Pvt. 1st Cl. ORGANIZATION Co. F., 107th Inf.

2. Disinterred (date): 28th Jan. 1921 From (give complete location): Grave no.7 under cross no.7 with inscription "PFC Raymond Douglas" on cross (See remarks). Plot 1, Row-A.
By: Group Two Unit Sect. 7.

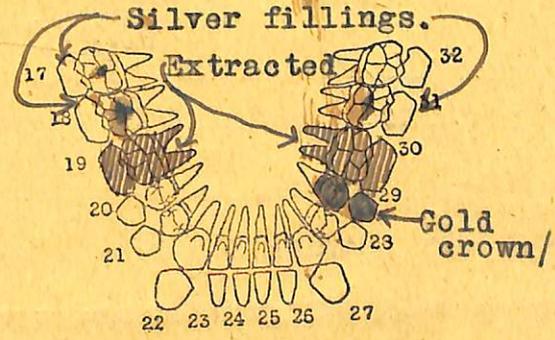
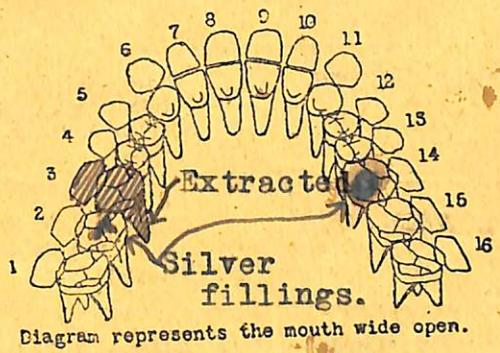
3. Reburied (date): 28th Jan. 1921 In (give complete location): Grave No/ 20, Plot 1, Row-A.
By: Group Two. Unit Sect. 7 Nature of reburial Wrapped in blanket and placed in box.

4. Report as to nature of original burial and condition of body upon disinterment:
In uniform and wrapped in burlap.

5. (a) Identification tags: Buried with body? Yes. On grave marker? Yes.
(b) Other means of identification found upon disinterment, and general remarks: Crosses reversed over graves of Pvt/1st Cl. Raymond Douglas (Cross #7) and Pvt. 1st Cl. George A. Boag (Cross #8). Both bodies were identified by tags on bodies

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

- (a) Height (actual measurement) 5 ft/ 7-in.
- (b) Weight (estimated) 160 lbs.
- (c) Hair—Color Black.
Quantity Heavy.
Characteristics Long and straight.
- (d) Hair on face—Color Impossible to determine.
Location do.
Quantity do.



(e) Permanent marks on body (old scars, peculiarities, or missing parts) Impossible to determine.
(f) Wounds or missing parts (received at time of casualty) Left leg fractured in two places above and two places below the knee. Right leg fractured below knee.

P. 30090

7. Disinterment supervised by E. P. Doyle Capt. 57th Inf. Approved: E. W. Austin, Maj. F.A.
(Title) [Signature]
8. Reburial supervised by E. P. Doyle Capt. 57th Inf. Approved: [Signature]
(Title) [Signature]

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.



1. LOCATION INDEX CARD:

(a) Name BOAG, George A. Ser. No. 1210782)
(b) Rank Pvt. 1/c Organization Co. F, 107th Inf.) TYP. DB
(c) Date of death 10-16-18 (d) Cause of death K/A) CKR. B

5/27/99 Exhumed.
Concentration.
Same # 636
Mar B-6-20-22

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

(a) Grave No. 8 Row C Plot 1 Sect. ---) TYP. LS
(b) Emerg. Address James Boag, (Father) 123 N. 11th St., Newark, N.J.

111. Files of soldiers dying from contagious diseases; NO CARD) CKR. B

IV. A.G.O. DISPOSITION CARD:

Date of receipt none.
(a) Name James M. Boag (b) Relationship Father
(c) Address 123 Rosedale Ave. Newark, N.J.
(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. ---

OK
AH

Examiner's Initials BBR Date 8/19 1920

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

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

no correspondence

Examiner's Initials BBR Date 8/19 1920

VI. G.R.S. Files - Correspondence - shows as follows:

No request for disposition

(a) Cancellation memos referred to? yes AH

Examiner's Initials AH Date 8-20- 1920

AUG 25 1920 6237-3

JMS.
SG

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

no change address enter.
Push Answer.

FROM: Chief, Graves Registration Service, Q. M. C.
49 Humboldt ave.
To: James M. Boag, ~~183 Roseville Ave.~~, Newark, N. J.
SUBJECT: Remains of Pvt. 1/c George A. Boag, Ser. No. 1210782, Co. F, 107th Inf.

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

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

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

By authority of the Quartermaster General.

CEMET. CHARLES C. PIERCE,
OVERSEAS PROJECT SECTION Major, U. S. A.

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

NAME OF—	NO. AND STREET.	TOWN.	STATE.
Soldier's widow	<i>None</i>		
Soldier's children. (Name oldest first.)	1		
	2	<i>None</i>	
	3		
Father	<i>James M Boag</i>	<i>49 Humboldt St</i>	<i>Newark N J</i>
Mother	<i>Dead</i>		
Brothers. (Name oldest first.)	1	<i>William</i>	<i>117 N 6th St</i>
	2	<i>James</i>	<i>49 Humboldt St</i>
	3		
Sisters. (Name oldest first.)	1		
	2	<i>None</i>	
	3		

40
9
8
7
6
5
4
3
2
1
AUG 30 1920
RECEIVED

Date *August 28th* Signature *James M Boag*
Address *49 Humboldt St* Relationship *Father*

noted on 11-11-20
2115-9-29-20

....., 1920.

I, the undersigned, am the Father and nearest living relative of the within-named
(Relationship.)

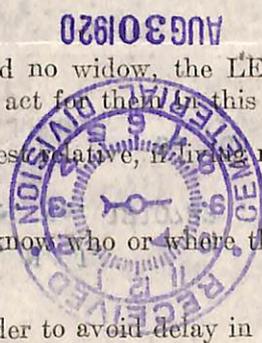
soldier, and desire the following disposition of his remains, viz:
(Strike out all except the one showing the disposition desired.)

- 1. As stated on first page of this sheet.
- 2. ~~To be returned to the U. S. and shipped to~~
(Name.)
.....
(R. R. station.) (State.)
- 3. ~~To be returned to the U. S. and buried in~~ National Cemetery.
- 4. To remain in Europe, for burial in a permanent American Cemetery.

Signature James M Boag

INSTRUCTIONS FOR FILLING OUT.

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



COMPILATION OF DISPOSITION OF REMAINS DATA

Sec. Form 115
Misc B
6-20-22

I. LOCATION INDEX CARD:

FILE #57864

(a) Name BOAG, George W. Ser.No. 1210782
(b) Rank Pvt. 1/c Organization Co. # 107th Inf. TYP. DB
Cause of death K/A JCW
(c) Date of death 10-16-18

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

(a) Grave No. 87 Row 9 Plot 1 Sect. --- TP. LS
Transposition of bodies
(b) Emerg. Address James Boag, (Father) 123 N. 11th St., Newark, N.J.

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

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

*A.G.O. Card - James M. Boag (Father) 123
Rosehill Ave., Newark, N.J. requests
body be not returned to U.S. M31-28-21*

V. Following advice forwarded to Europe by (letter of transmittal on 8/24.1920)
..... Par. #2. Not to be returned. (MCH)

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

VII. SUPPLEMENTARY REQUESTS

Date of Relationship
and Source, ...and name..... Desires..... Action taken..

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

2/3/21. R.L.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

3/24/25

~~OCT 14 1924~~

Date _____

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 Boag
- b. Christian name George A
- c. Serial number 1210782
- d. Organization Co. 67, 107th Inf.
- e. Rank 1st Lt
- f. Emergency Address _____
- g. Date of death _____
- h. Authority _____
- i. Cause of death _____
- j. Place of death _____
- k. Place of burial _____
- l. Date of discharge _____

white

BODY DESCRIPTION

- a. Date of enlistment _____
- b. Age at enlistment _____
- c. Color of hair Brown
- d. Height 5 ft 9 in
- e. Weight* 139
- f. Fractures or breaks _____

DENTAL CHARTS

At Camp		By Local Board	
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
Lower right	Lower left	Lower right	Lower left

24/552/EYS

For The Quartermaster General:

*Auth. A. G. B. Telephone 8. R.
4-2*