

123

13732

To The A. G. O.

DATE 10/4/21

1. NAME BODEEN, David E. OCT 6 - 1920 SERIAL No. 2150523

RANK Pvt. ORGANIZATION Co. K, 326th Inf. 82BW

GRAVE LOCATION Argonne Amer. Romagne-sous-Montfaucon, #1232 Sect. 84

166 Sect. 84 4

GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 204 Froidos Meuse

GRAVE COMMUNE DEPT.

Bar-le-Duc 51NE 255.3N 308.3E

COORDINATES

CONCENTRATED TO 6/16/19 166 Sec 84 4

DATE GRAVE ROW PLOT

Meuse Argonne 1232

CEMETERY CTY. NUMBER

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

Tag on body and on peg over body.

DATE OF DEATH Oct 15 1918

STATE FROM WHICH HE CAME Del

data f-1

MEDALS OR DECORATIONS AWARDED

SUBSEQUENT REBURIALS

DATE GRAVE ROW PLOT CEMETERY

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR M. B. BIRDSEY 1st Lt., Q.M. Corps, U.S. Army

3. FINAL GRAVE LOCATION 10/4/21 24 34 Block H.

DATE GRAVE ROW PLOT

AUDITED BY M.J.D. 4-25-23

Meuse-Argonne American Cemetery #1232, Romagne-sous-Montfaucon, Meuse.

OCT 6 1920 WORLD WAR DIV.

Robert O. Davis, Major General THE WAR DEPARTMENT

OCT 7 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.



GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Bolon *2150523* *David E.*
(Surname). (Number). (First Name and Initials)

Pvt. Co K 326 th Inf.
(Rank). (Organization).

PLACE OF DEATH: *Mobile Hospital No. 2*

CAUSE OF DEATH: *gas stomach. Profound shock*
Oct 15 1918

DATE OF BURIAL:

PLACE OF BURIAL:

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

American Cemetery, Chateau de Salvango,

Rarecourt, Meuse,

GRAVE NUMBER: *328*

HOW MARKED: Name Peg? *yes* Cross?

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:

NEAREST RELATIVE: *Dons Olof Bodum*

ADDRESS: *Lynn Center, Ill.*

RELATIONSHIP: *brother*

REPORTED BY: *John M. S. Allison*
1st Lt. San. Corps. Adjutant.

(Signature and Rank of Reporting Officer).

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

David, Pvt 2150523

*advance near St Juvin on Oct. 14th and
r after arriving at the hospital,
evacuated to or where he was*

*y, James D. 1st Sgt I902638
326th Inf.*

am, N.Y.

r, Louis C. 1ST LT. 326th Inf.



C°

*I h
but
bur*

HC

C° K. 326th Inf.
82nd Div.

BODEEN, David, Pvt 2150523

Pvt David Bodeen was wounded in advance near St Juvin on Oct. 14th and I have learned of late that he died later after arriving at the hospital, but I do not know which hospital he was evacuated to or where he was buried.

Informant : O'Leary, James D. 1st Sgt I902638
C° K. 326th Inf.

Home : Potsdam, N.Y.

Signed : Turner, Louis C. 1ST LT. 326th Inf.

HC



REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name BODEEN, David E.Number: 2150523Rank UnknOrganization: Unkn

Disinterment and Reburial made by Group _____ Unit _____

Disinterred (Date) _____ From: (Give complete location) _____

16th June 1919Amer Mil Cty Grave 204CHATEAU SALVANGE MEUSE51 NE E 308.3 N 255.3

Reburied (Date) _____

in: (Give complete location) _____

16th June 1919Grave No 166 Sec 84 Plot 4ARGONNE AMER CEMETERY NO 1232ROMAGNE MEUSE1232

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

Burial good; buried in uniform; body decomposed.Was one identification tag found upon body? YesWhat other means of identification were found upon the body? None12379

Note:

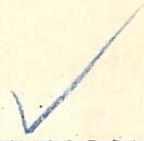
If upon disinterment, effects are found upon the bodies, they will be promptly sent to the Effects Depot direct, as is required by C.O. 170, G.H.Q. 1918., after being carefully examined to identity in doubtful cases, notation whereof will be made and reported to Chief, Graves Registration Service.

Supervised by Lt WilsonJMB

C.O. Group _____

Unit _____

CODE SLIP



HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	Bodeen	3	254
BURIED	David E		
	CEMETERY 1232	1	1
	GRAVE 24	2	24
	ROW 34	2	34
	PLOCK RT	1	8
STATE	Ill	2	13
PANK	Pnt	1	2
DIVISION	82	2	82
ORGANIZATION	326	3	326
ARM	Inf	1	1
MARTIAL	200	1	2
NAME	Bodeen	3	
RESIDENCE	Mr. Olaf (Father)		
	STATE	2	
	COUNTY	2	
	CITY	3	
RELATION	Mother	1	1
OTHER	no sm no low	1	
ELIGIBILITY	Dead 12-9-28	1	6
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT			
HEALTH		1	
NO. OF SONS		1	
DATE OF TRIP	MO.	1	
	YR.	1	
ACCEPTANCE		1	

AUDITED

APR 12 1932
RS

KPM

29/514/PJ

da

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-M
Bodeen, David E. Pvt. (M-A)

August 14, 1931.

Mr. Olaf Bodeen,
Lynn Center,
Illinois.

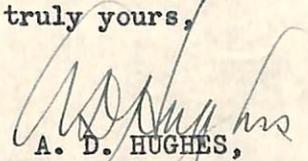
Dear Sir:

In order that the records of this office may be complete and correct, it is requested that you advise whether or not the late Private David E. Bodeen is survived by a widow, and if so, her name and address.

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

For The Quartermaster General,

Very truly yours,


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

Encl.
Env.

*David E. Bodeen was NOT
survived by a widow*



QM 293 A-M
Bodeen, David E. Pvt. (M-A)

May 19, 1931.

Mr. Peter A. Bodeen,
Lynn Center, Illinois

Dear Sir:

According to our records this office has received no reply in response to our letter requesting that you advise as to whether or not the late Private David E. Bodeen was married and is survived by a widow and if so, her name and address.

For your convenience in replying there is enclosed herewith a self-addressed envelope which requires no postage.

For The Quartermaster General.

Very truly yours,

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

gb
Enclosure
Envelope

QM 293 A-M
Bodeen, David E. Pvt 1232

December 15, 1920.

Mr. Peter A. Bodeen,
Lynn Center, Illinois.

Dear Sir:

In order that the records of this office may be complete and correct, it is requested that you advise whether or not the late Private David E. Bodeen is survived by a widow, and if so, her name and address.

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

For The Quartermaster General,

Very truly yours,

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

Encl.
Env.
KG

ETK

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Bodeon, David H. - 1232 Other

July 7, 1930.

Mr. Peter A. Bodeon,
Lynn Center, Ill.

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.

United States Post Office

LYNN CENTER, ILLINOIS

Sept 10, 1929

The Quartermaster General
Washington, D. C.

Ms. Olof Bodem Mother of David E. Bodem
died Dec 9, 1928.

Peter A. Bodem

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Bodeen, David E.
1232

Sept. 4, 1929.

Mrs. Olaf Boddeen,
Lynn Center, Ill.

*Rec'd
12-9-28*

Dear Madam:

The records of this office do not indicate that a reply has been received to our communication dated June 29, 1929 making inquiry concerning the name and address of the mother and widow of the deceased service man above named. These addresses are desired with a view to ascertaining the number of mothers and widows who desire to make a pilgrimage to the cemeteries of Europe in which the remains of their sons and husbands are interred.

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

Write answers in space below

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

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

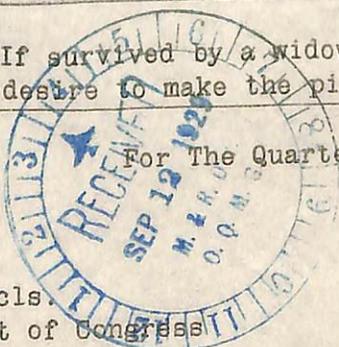
3. If survived by a widow or mother does she desire to make the pilgrimage?

For The Quartermaster General,

Very truly yours,

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

2 Incls.
Act of Congress
Envelope



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Bodeen, David E.

June 29 1929.

Mrs. Olaf Bodeen,
Lynn Center, Ill. *dead*

Dear Madam:

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

The records of this office show that you are the mother of the late Private David E. Bodeen, Co. K, 326th Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, France.

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

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

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

For The Quartermaster General,

Very truly yours,

2 incl.
Act of Congress.
Envelope.

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

QM 293 A-M
Bodeen, David E. Pvt. (M-A)

August 14, 1931.

Mr. Olaf Bodeen,
Lynn Center,
Illinois.

Dear Sir:

In order that the records of this office may be complete and correct, it is requested that you advise whether or not the late Private David E. Bodeen is survived by a widow, and if so, her name and address.

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

For The Quartermaster General,

Very truly yours,

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

Encl.
Env.

0599
MAY 14 3:50

QMG M&R BR

leb

Bodeen,

(Surname.)

David E.

(Christian name in full.)

2,150,523

(Army serial number)

Pvt

Co K, 326th Inf

(Rank and organization.)

State your relationship to the deceased

Do you desire the remains brought to the United States?

(Yes or no.)

If remains are brought to the United States, do you wish them interred in a national cemetery?

(Yes or no.)

If you desire the remains interred at the home of the deceased, give full information below as to where they should be sent:

(Name of person to receive remains.)

(Express office.)

(Telegraph office.)

(Number and street.)

(City or town.)

(State.)

(Sign here)

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

3-6713

(over)

Al mail. See send
to Lynn Carter JTB

Respectfully
Drawn Pm
Clay Bodwin

1232 Sec 84-14

4-12-

checked
4/13/21
set

QM 293 A-M
Bodeen, David E. Pvt. (M-A)

May 19, 1931.

Mr. Peter A. Bodeen,
Lynn Center, Illinois

Dear Sir:

According to our records this office has received no reply in response to our letter requesting that you advise as to whether or not the late Private David E. Bodeen was married and is survived by a widow and if so, her name and address.

For your convenience in replying there is enclosed herewith a self-addressed envelope which requires no postage.

For The Quartermaster General.

Very truly yours,

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

gb
Enclosure
Envelope

11
MAY 21 1931

OM 293 A-M
Bodeen, David E. Pvt 1232

December 13, 1920.

Mr. Peter A. Bodeen,
Lynn Center, Illinois.

Dear Sir:

In order that the records of this office may be complete and correct, it is requested that you advise whether or not the late Private David E. Bodeen is survived by a widow, and if so, her name and address.

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

For The Quartermaster General,

Very truly yours,

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

20 Dec 13 PM 2 34
Encl.
Env.
KG

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Bodeen, David B. - 1232 Other

July 7, 1930.

Mr. Peter A. Bodeen,
Lynn Center, Ill.

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

Bodeen, David E.
1232

Sept. 4, 1929.

Mrs. Olaf Boddeen,
Lynn Center, Ill.

Dear Madam:

The records of this office do not indicate that a reply has been received to our communication dated June 29, 1929 making inquiry concerning the name and address of the mother and widow of the deceased service man above named. These addresses are desired with a view to ascertaining the number of mothers and widows who desire to make a pilgrimage to the cemeteries of Europe in which the remains of their sons and husbands are interred.

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

Write answers in space below

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

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

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

For The Quartermaster General,

Very truly yours,

2 Incls.
Act of Congress
Envelope

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Bodden, David E.

June 29, 1929.

Mrs. Olaf Bodden,
Lynn Center, Ill.

Dear Madam:

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

The records of this office show that you are the mother of the late Private David E. Bodden, Co. K, 326th Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, France.

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

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

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

For The Quartermaster General,

Very truly yours,

2 incls.
Act of Congress.
Envelope.

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

September 26, 1925.

Mr. Olaf Bodaen,
Lynn Center,
Ill.

Dear Sir:

The Quartermaster General desires you to be informed that the
Private David E. Bodaen, Company K, 526th Infantry,
in Grave 24, Block 11, Bois de la Croix American Cemetery, (nonagne-
permanent graves of 1918), France.

This is one of the permanent American military cemeteries to be maintained by this Government in Europe. Each grave will be marked by a headstone of white marble, of suitable design, with name, rank, division, organization, date of soldier's death and State from which he came. Headstones will be placed at all graves in connection with the improvement work now in progress, as soon as possible and without waiting for special action or request on the part of relatives.

You are assured in effecting removal of the remains, the utmost care and reverence were exercised and more than willingly accorded by those who performed this sacred duty. The grave of the deceased will be perpetually maintained by this Government in a manner befitting the last resting place of our heroes.

Very truly yours,

H.H. CHRAL

Assistant.



COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

File #37546

(a) Name BODHNN, David E. Ser. No. 2150523
 (b) Rank pvt. Organization Co. K, 326th Infantry } TYP DMA
 (c) Date of death 10/15/18 (d) Cause of death DWRIA } B. J.

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

(a) Grave No. 166 Row Plot 4 Sec. 84 TYP. DMA

(b) Emerg. Address Mrs. Olaf Bodean (mother) Lynn Center, Ill.

III. ~~Files of soldiers dying from contagious diseases~~ CKR. B. J.

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

.....

V. Following advice forwarded to Europe by { cable on _____, 192
Section - 84 { letter of transmittal on 4-21-, 192 /
Par 2 - Not to be returned (J80V)

VI. Form 115 forwarded to G. R. S., Hoboken, N. J., _____, 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 _____ CEMETERY No. _____ SHEET No. _____

To be prepared in triplicate.

DATE October 3rd 1921

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 BODEEN, David E.

10. Name _____

2. No. 2150523

11. No. _____

3. Rank Pvt.

12. Rank _____

4. Org. Co. K. 326th Inf.

13. Org. _____

5. D.D. Oct. 15th / 18

14. (a) D.D. _____

6. C.D. DOW

(b) D.B. No discrepancy.

Discrepancy found upon disinterment

7. Grave No. 166 Sec. 84

15. Grave No. _____ Sec. _____

8. Plot 4 Row _____

16. Plot _____ Row _____

9. _____

17. No discrepancy.

18. Cemetery Argonne Amer.

19. Commune or town Romagne-sous-

Montfaucon

20. Dept. or County Meuse

21. Country France

22. G.R.S. Hdqrs. Code No. 1232 Sect. 84

23. Disinterred (Date) Oct. 3rd 1921

By E.G.HOWELL

24. Inscription on grave marker:

Name David E. Bodeen.

Serial No. 2150523

Rank Pvt.

Organization Co. K. 326 Inf.

25. Was identification disc found on grave marker? No On body? Yes
On peg over body? Yes.

Wk J.C.ANNABEL.

Signature J. Annabel
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). Tag on body and tag on peg over body check.

27. Condition of body Badly decomposed, recognition impossible.

28. Nature of burial Burlap and wooden box.

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? None.

30. Body prepared and placed in casket: Date Oct. 3rd 1921 By E.G.HOWELL

31. Casket sealed by E.G.HOWELL

Signature of Embalmer, (Supervisor)

E. G. Howell
E.G.HOWELL

AUDITED

SHIPMENT. (Show actual marking of box.) Box No. **C-8296**

32. Designation of body:

Name **BODEEN, David E.** Serial No. **2150523**

Rank **Pvt.** Organization **Co. K, 326th Inf.**

33. Consigned to:

Name of Permanent Cemetery **Argonne Amer. Romagne-sous-Montfaucon, #1232**

34. Casket boxed and marked (Date) **Oct. 3rd 1921** By **E.G. HOWELL**

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 *A. E. Dewey*
A.E. DEWEY 1st Lieut Q.M.C.

36. Remarks

None.

37. Shipped from point of Operation: (Date) **October 3rd 1921**

To point of Concentration **Morgue Romagne sous Montfaucon.**

Convoyer **W.J. ROYED** Signature Shipping Officer *Albert M. Jackson*
Albert M. Jackson, Capt. C.A.C. ewr

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

Convoyer Signature Shipping Officer

40. Received: Date

G.R.S. Representative

41. Reinterred **Meuse-Argonne Cty 1232** **Oct 4, 1921**

42. Grave No. **Row 34, Block H, Gr 24** (Date) Section

43. Plot Row

G.R.S. Representative *James W Younger*
JAMES W YOUNGER, CAPT. QMC



Concentration.

G. R. S. Form. No. 16-A

Place Romagne 1232.

REPORT OF DISINTERMENT AND REBURIAL

Date Oct. 3, 1921.

1. REMAINS OF BODEEN, David E SERIAL NUMBER 2150523

RANK Pvt. ORGANIZATION Co. K. 326th Inf.

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

Oct. 3, 1921

Gr. 166, Sec 84, Plot 4.

By: Group 2 Unit Sec 2.

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

Oct 4, 1921

Cty 1232, Row 34, Block H, Gr 24

By: Group Reburial S Unit Unit Nature of reburial Unlined casket

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

wooden box and burlap. b dly decomposed, features not recognizable.

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

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

Tag on peg over body, and tag on body, check.

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

(a) Height (actual measurement) impossible to determine. 2,3,4,16,14,17,30,32

(b) Weight (estimated) do 24,25,26, MAD.

(c) Hair—Color do 8,9,18,31 cavity.

Quantity do

Characteristics so

(d) Hair on face—Color br

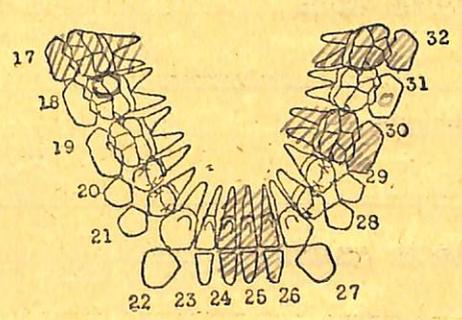
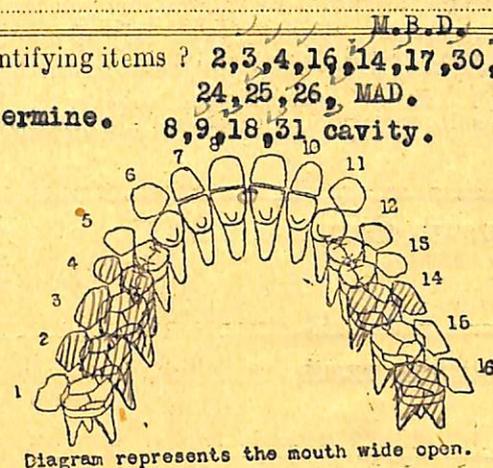
Location do

Quantity do

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

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

do



7. Disinterment supervised by E. G. Howell Approved: A. E. Dewey

E.G. Howell

(Title) A.E. Dewey 1st Lt. Q.M.C.

8. Reburial supervised by W B SHEILD Approved: James Younger

W B SHEILD

(Title) JAMES W YOUNGER, CAPT., QMC

AEB

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

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

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.
2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.
3. Give date and accurate information as to location of reburial and the group and unit which made reburial, and how reburial was made—in casket, wooden box, etc.
4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried—in a casket, box, burlap, etc. This statement should be as complete as possible.
5. (a) State whether identification tags were found buried with body and on grave marker by reporting "Yes" or "No":

(b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying the body, other than that tabulated under Item No. 6.
6. Give all information as to body description and dental chart as nearly correctly as the condition of the body will allow. Items (e) and (f) under the body description are very important and should be very complete. The dental chart is also very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspid (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

MISSING 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:



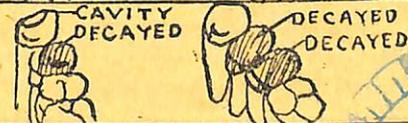
BRIDGE WORK.....Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:



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 #37546

(a) Name BODEEN, David E. Ser. No. 2150523
(b) Rank Pvt. Organization Co. K, 326th Infantry
(c) Date of death 10/15/18 (d) Cause of death DWRIA

TYP. DMA
CKR. B. J.

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

(a) Grave No. 166 Row - Plot 4 Sec. 84 TYP. DMA
(b) Emerg. Address Mrs. Olaf Bodeen (mother) Lynn Center, Ill.

III. Files of soldiers dying from contagious/diseases CKR. B. J.

IV. A. G. O. DISPOSITION CARD:

Date of receipt

(a) Name Olaf Bodeen (b) Relationship Father
(c) Address Lynn Center, Ill.
(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 Pm Date 4-12-21, 1920.

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

, dated

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

No Comms

Examiner's Initials Pm Date 4-12-21, 1920.

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

No req for disp

(a) Cancellation memos referred to? Yes

Examiner's Initials Pm Date 4-12-21, 1920.

COUNTRY FRANCE CEMETERY No. 1232-Sec. 84 SHEET No. 14

H. S. 4-23-21

Checked 4/13/21

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

Typed by _____, Checked by _____, 1920.

VIII. FINAL ACTION:

Following advice forwarded to Europe by { cable on _____, 1920
letter on 4-21-, 1920

Section - 84
Par. 2 - Not to be returned (JEX)

IX.

CORRECTIONS

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

X. SUSPENSION REMARKS:

9 L B Ed - Mother, Mrs. Olof Bodeen,
Lynn Center, Ill. (Pm + - - - 21)

37546

26 DEC 1918

G.R.S. Form No. 8; Central Records Liaison.

Registration Card.

B.

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

SUBJECT: Information required for G R S.

I. Items checked are to be completed:

- () Surname: BODEEN,
- () Number: 1250523 (2150523)
- () First name: David E.
- () Rank: Pvt.
- () Company: K.
- () Organization: 326th, Inf.
- () Date of death: 10-15-18.
- () Cause: w/a
- () Place:

Location of hospital:

Number » »
Class » »

- () Relative:
- () Relationship:
- () Address:

- () Authority:
- Cablegram No:
- Telegram from:

dated: 11-12-18. (12-22-18)

- (✓) Reported to Washington:
- C.C. Nos: 292, (374)

(Underscore the "official" C.C.)

- (✓) Remarks:

✓ Duplicate cards.

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

Initials of reporter: *CH*

J.P.

37546

1. G. R. S. Form No. 1. Hq. G. R. S. File

2. Soldier's No. 21505

3. Bodeen David E
Surname (in block letters) First Name and Initials

4. Pvt. K 325th. Inf.
Rank Company Regt. or Corps

5. 10/15/18
Date of Death Cause, if known

6. 10/15/18 A.E.F.
Date of Burial Cemetery

7. Chateau-de-Salvange Meuse
Town or Commune (in block letters) Department

8. ~~###~~ 329
Grave No. Plot No. or Letter

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

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

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

.....
.....

12. Map Reference, if interment is outside of cemetery

13. William Wood ARC
Give name of Chaplain or Burial Officer

Signed Joseph Baker, Sgt. 1cl.

Group 3 Unit A G. R. S.

528
27 OCT 1918

37546

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Bodeen 2150523 David E.

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

Pvt. Co K 326 th Inf.

(Rank). (Organization).

PLACE OF DEATH: Mobile Hospital No. 2

CAUSE OF DEATH: jaw Stomach. Profound Shock
Oct 15 1918

DATE OF BURIAL:

PLACE OF BURIAL:

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

American Cemetery, Chateau de Salvango,

Rarecourt, Meuse

GRAVE NUMBER: 328

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 marks should be given here:

558

NEAREST RELATIVE: Mrs. Olof Bodeen

ADDRESS: Lynn Center, Ill.

RELATIONSHIP: Mother

REPORTED BY: John M. S. Allison
1st Lt. San. Corps. Adjutant.

(Signature and Rank of Reporting Officer).

30 OCT 1918