

CAUSE OF DEATH *K9a*

G.R.S. Form #114-B

*Soldier's leg. not plain*FULL NAME *BONANNI, Anacheto*RANK *Pvt. 1/cl*SERIAL *51476*DIVISION & ORGANIZATION *Co. 1. 23rd Inf. 2nd Div.*DATE OF DEATH *6-27-18*STATE FROM WHICH HE CAME *New York*MEDALS OR DECORATIONS AWARDED *None*

FINAL GRAVE LOCATION

*11-21-1922**85**11**A*

Date

Grave

Row

Block

MAY 9 1927

1764

WORLD WAR DIV.

24/292/EYS

Cemetery

985

5/11/27

Entered on list

France

Bonanni, Anacheto.

Pvt 1st class Co I 23d Inf.

Killed in action June 27, 1918.

E. A.- Not yet identified for
emergency address.

A. G. O. 7/16/18

Write nothing below this line.

Write nothing above this line.

CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	Bonanni	3	2 5 4
BURIED	CEMETERY	1	4
	GRAVE	2	85
	ROW	2	11
	BLOCK	1	1
STATE	NY	2	37
RANK	PFC	1	2
DIVISION	2	2	02
ORGANIZATION	23	3	023
ARM	Inf	1	1
MARITAL	W	1	2
NAME	Bonanni	3	2 5 4
STATE		2	
RESIDENCE		2	
		3	
RELATION	Mother	1	1
OTHER		1	
ELIGIBILITY	Dead	1	6
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE		1	

Miss Maria Bonanni
(sister) in Italy

AUDITED

AUG 17 1952

RS

29/514

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

DATE 8/18/31

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Bonanni, Anacheto	PFC	51476	Co I, 23rd Inf	6/27/18

STATE	CTY. NO. 1764	GRAVE 85	ROW 11	BLOCK A
-------	---------------	----------	--------	---------

	<u>Check relationship</u>	<u>Living - Deceased</u>	
NAME AND ADDRESS	MOTHER	: : ✓ :	
	STEMOTHER (For the year prior to commencement of service)	: : : :	
	MOTHER THRU ADOPTION (For the year prior to commencement of service)	: : : :	<i>Sister</i>
	MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	: : : :	<i>Maria Bonanni in Bonanni via Duritta</i>
	WIDOW (Who has not remarried)	: : : :	<i>Orvindoli</i>
	<i>Single Man</i>	: : : :	<i>Prov. di Aquila Italy</i>

Veterans Bureau Claim Number C 23449
29/156

WAR DEPARTMENT
 OFFICE OF THE QUARTERMASTER GENERAL
 WASHINGTON

DATE 8/18/31

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Bonanni, Anacheto	PFC	51476	Co I, 23rd Inf	6/27/18

STATE	CTY. NO.	GRAVE	ROW	BLOCK
	1764	85	11	A

NAME AND ADDRESS	Check relationship	Living - Deceased		
		Living	Deceased	
MOTHER	:	:	:	
STEMOTHER (For the year prior to commencement of service)	:	:	:	
MOTHER THRU ADOPTION (For the year prior to commencement of service)	:	:	:	
MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	:	:	:	_____
WIDOW (Who has not remarried)	:	:	:	_____
	:	:	:	_____
	:	:	:	_____

Single

Veterans Bureau Claim Number C 23449
 29/156

WAR DEPARTMENT
 OFFICE OF THE QUARTERMASTER GENERAL
 WASHINGTON

DATE 7-20-29

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
BONANNI, Anacheto	Pvt.1/cl.	51476	Co. I, 23rd Inf.	6-27-18

CTY. NO. 1764 GRAVE 85 ROW 11 BLOCK A

<u>Check relationship</u>	<u>Living - Deceased</u>	
MOTHER	:	:
STEPMOTHER (For the year prior to commencement of service)	:	:
MOTHER THRU ADOPTION (For the year prior to commencement of service)	:	:
MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	:	:
WIDOW (Who has not remarried)	:	:

Veterans Bureau Claim Number
 29/156

C-23449

71230

RECEIVED
1918
MAY 10
10-10-18

QM 293 A-C
(Bonanni, Anacheto)

December 11, 1926.

Miss Mary Bonanni,
Orvindoli,
Prov. Aquila, Italy.

Dear Madam:

The inclosed card gives the permanent cemetery and grave location of the late Anacheto Bonanni.

The Quartermaster General desires that you be informed that all American military cemeteries, both in Europe and in our own country, will be maintained by the Government forever, the graves permanently marked by headstones showing the decedent's name, rank, organization, State, and date of death, all of which will be done without the necessity of requests emanating from relatives.

Please understand that in effecting the final disposition of our heroic dead the utmost care and reverence is exercised.

Very truly yours,

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

1 Incl.
Record card.

28/692

DISPATCHED

IEB

Not Rept'd 12/9/14

GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

Anacheto 51476 Bonanni

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

Priv Co I 23rd Reg

(Rank.) (Organization.)

June 27th

DATE OF BURIAL

Couper

PLACE OF BURIAL

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

*about 50 yds outside country
with East in open field back
of houses parallel road*

#6

GRAVE NUMBER

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?

no

If name unknown and tags missing, description and marks should be given here:

REPORTED BY:

Chap. J. J. Donnelly, 1st Lt 23rd Reg

(Signature and Rank of Reporting Officer.)

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

RECEIVED
CENTRAL RECORDS OFFICE

3 JUL 1918

17639

GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

Anacheto 51476 Bonarrie
(Surname.) (Number.) (First Name and Initials.)
Pvt. Co D. 23rd Inf.
(Rank.) (Organization.)

DATE OF BURIAL June 27th

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

about 50 yds outside of country
north east in open field - Back of
houses parallel to road

GRAVE NUMBER #6

HOW MARKED: Name Peg? yes Cross? yes
Headboard? Bottle?

IDENTIFICATION TAGS: yes
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:

Comme Comp 49 N. E
E 174. V N 257.8

CMME. COUPRU (AISNE)

(026) SHT. 49 NE COORD E 174.2

REPORTED BY: Chap. L. J. Donnelly (1st Lt. Inf 23rd)
(Signature and Rank of Reporting Officer.)

This portion to be sent to Chief of Graves Registration Service.
3 JUL 1918

655

D :

A :

Annual List No. 26-655
Daily Report No.

Bonanni, Anacheto # files
~~Anacheto, Bonanni~~ 5 14 76

Co J 23 Inf 6/27

Bonanni, Anacheto (OK)

1st Burial - Cen. (unc) C 26

Compan,
Aisne

(h) FILE.

7659

Ed. — Mary Bonanni (Sis)
Ovindoli, Italy

Name appears on



For further data see Casualty Files

no Prov in state

by spelling m

Benf -
venfy e/a

23449

sigak

17639

Name..... Bananin, 51476, Anacheto.....

Rank..... Pvt..... Co..... I..... (Corps)..... 25rd Inf. (Regt).....

Date of Death.....

Place..... Exhumed.....

Cause..... Fr Copru.....

Date of Burial.....

Grave No..... 28.....

Cemetery..... 71- I. G. MYERS.....

Identified by { Tag Papers Clothing } .. tags.....

List of Effects.....

Field Record Made by.....

Company..... Graves Registration Service.....

For additional data use reverse side. 2 1918

FILE

714

OCT



copy

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

~~Harlow C.W.~~

NAME OF DECEASED SOLDIER

CEMETERY NO.

DATE

~~Bonani, Amchato, Pvt. 1/c.~~

~~1764 - 202~~

~~2/23/21.~~

SERIAL NUMBER

ORGANIZATION

~~51476~~

~~Co. 1, 23rd Inf.~~

~~Date of death - 6/27/18.~~

Adjustment Made
2-19-1922
File No. 17639
FILE

WAR RISK INSURANCE INFORMATION

NOTED FORM 115

DATE 3.16.21 - CL

DATE _____

NAME OF BENEFICIARY

RELATIONSHIP

Miss Mary Bonani
Address

sister (Em. add)

Avindoli, Province of Aquila, Italy

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

WAR DEPARTMENT
Office of the Quartermaster General of the
Washington

PLEASE
EXPEDITE

G.R.S. Form 8-W-A-0
Information requested of A.G.O.

Date 2/23/21.

File No. Requisition.

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 ~~Bonanni~~ or (Bonanni) *OK*
- b. Christian name Anacheto *OK*
- c. Serial Number 51476 *OK*
- d. Organization Co. I, 23rd Inf. *OK*
- e. Rank Pvt..1/c. *OK*
- f. Date of death 6/27/18. *OK*
- g. Cause of death K/A. *OK*
- h. Authority (C.O.#)
- i. Emergency address *Mary Bonanni
Cvindoli, Italy*
- j. Relationship *Sister.*

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 *file No.*
enlistment (Old fractures or breaks)

DENTAL CHARTS
(See Physical report of examination prior to enlistment)

a. 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				

Adjustment Made
MAR 24 1921

1763

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

BY:

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

Rec'd S & S Div., A.G.O.

FEB 24 1921 6

C.W.
CEMETERY NO: 1764

SHEET NO: 202

TYPED BY: I.W.

S/713/MLL

War Dept War Div.

Date: 2/29/21

Donnelly per 884-2 ps-48-2/29/21

24

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 2/23/21.

File No. Requisition.

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 ~~Bonanni~~ or (Bonanni) *OK*
- b. Christian name Anacheto *OK*
- c. Serial Number 51476 *OK*
- d. Organization Co. I, 23rd Inf. *OK*
- e. Rank Pvt..1/c. *OK*
- f. Date of death 6/27/18. *OK*
- g. Cause of death K/A. *OK*
- h. Authority (C.O.#)
- ~~i. Emergency address~~ *Mary Bonanni
Ovindoli, Italy*
- ~~j. Relationship~~ *Sister*

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 *File No.*
enlistment (Old fractures or breaks)

DENTAL CHARTS
(See Physical report of examination prior to enlistment)

- a. 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

Adjustment Made
MAR 24 1921

17639

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

BY:

H. J. Gennier
H. J. GENNIER,
1st. Lieut., Q.M.C.

Rec'd S & S Div., A.G.O.

FEB 24 1921 8

C.W.
CEMETERY NO: 1764
SHEET NO: 202
TYPED BY: I.W.
S/713/LML

WAR DEPT. War Div.

DATE: FEB 24 1921

Donnelly per 884-4PS-WB-2/24/21

24

FEB 25 1921

RECEIVED

Date June 6, 1919REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name: Bonanin, Anacheto,Number: 51476Rank: Pvt.Organization: Co. I, 23rd Inf.

Disinterment and Reburial made by Group

Unit "B"

Disinterred (Date)

From: (Give complete location)

June 6, 1919Plot-71 Myers west of LaThiolet on Paris-Metz roadCoord. 258.6N - - 176.35EGrave 28

Reburied (Date)

in: (Give complete location)

June 6, 1919National Cemetery at Belleau Woods, Aisne.Coord. 262.60N - - 176.04EPlot-4, Sec. G, Grave 160.

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

Body in poor conditionWas one identification tag found upon the body? yesWhat other means of identification were found on the body? none11144
CONFIRMED No. D

Note:

If upon disinterment, effects are found upon bodies, they will be promptly sent to the Effects Depot direct, as is required by G.O. 170, G.H. 2, 1918., after being carefully examined for clues to identity in doubtful cases, notation whereof will be made and reported to Chief, Graves Registration Service.

Supervised by: Sgt. E. C. TurnerH. C. M. Cameron
C.O. Group

Unit

Prov. Unit B G.R.S.

Name: _____

Date: _____

REPORT OF DISTINGUISHMENT AND REBURIAL

Remains of:

Number: _____

Name: _____

Organization: _____

Rank: _____

Unit: _____

Disturbance and Reburial made by _____

Disturbed (Date) _____

From: (Give complete location) _____

1107-VI Myers west of Ishiolo on Panhandle road

June 2, 1919

Coord. 333.5N - 176.55E

Grave 26

Reburied (Date) _____

In: (Give complete location) _____

National Cemetery at Belle Fourche, S.D.

June 2, 1919

Coord. 333.5N - 176.55E

Grave 180

Report as to nature of original burial and condition of body upon disturbance

Body in poor condition

Was one identification tag found upon the body? _____

What other means of identification were found on the body? _____

Note: It upon disturbance, effects are found upon bodies, they will be sent to the Ethics Dept direct, as required by G.O. 170, after being carefully examined for signs to identify in order whereof will be made and reported to Chief, Graves Registration



Supervised by: _____

Place BELLEAU. AISNE. 1764.

REPORT OF DISINTERMENT AND REBURIAL

Date 7.15.21

1. REMAINS OF BONANNI, ANACHETO SERIAL NUMBER 51476

RANK PFC ORGANIZATION CO. I. 23rd Inf.

2. Disinterred (date): 7.15.21 From (give complete location): Gr 160 Sect G Plot 4

By: Group BOSSE Unit FIELD SECTION # 7

3. Reburied (date): 7.15.21 In (give complete location): Gr 160 Sect G Plot 4

By: Group BOSSE Unit FIELD SECTION # 7 Nature of reburial BOX & BURLAP

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

BADLY DECOMPOSED FEATURES UNRECOGNIZABLE
UNIFORM AND BURLAP

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

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

DISC ON BODY GAVE S.NO. "51476" AND RANK AS "PVT". DISC ON MARKER GAVE RANK AND S.NO. "PVT.51476" BURIED JUNE 27th 1918. COL.INSIG. "U.S.". "23RD INF".

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

(a) Height (actual measurement) IMPOSSIBLE TO DET RMINE

(b) Weight (estimated) IMPOSSIBLE TO DET RMINE

(c) Hair—Color IMPOSSIBLE TO DET RMINE

Quantity IMPOSSIBLE TO DET RMINE

Characteristics IMPOSSIBLE TO DET RMINE

(d) Hair on face—Color IMPOSSIBLE TO DET RMINE

Location IMPOSSIBLE TO DET RMINE

Quantity IMPOSSIBLE TO DET RMINE

(e) Permanent marks on body (old scars, peculiarities, or missing parts) IMPOSSIBLE TO DET RMINE

IMPOSSIBLE TO DET RMINE

(f) Wounds or missing parts (received at time of casualty) IMPOSSIBLE TO DET RMINE

IMPOSSIBLE TO DET RMINE

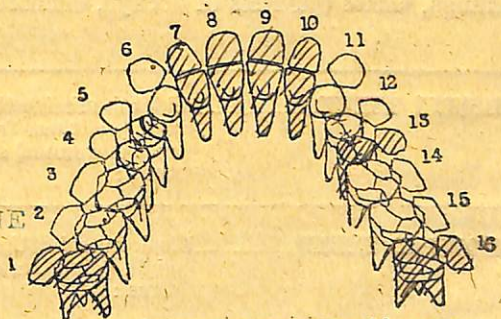
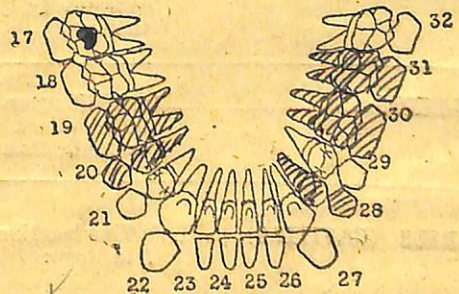


Diagram represents the mouth wide open.



1, 13, 16, 19, 20, 28, 30, 31, ext. 5, cav. 7, 8, 9, 10, mis. a. d. 17, al. fil.

7. Disinterment supervised by HARRY V. BOSSE

Approved: M. B. BIRDSEYE. 1st LT. QMC.

(Title)

8. Reburial supervised by HARRY V. BOSSE

Approved: M. B. BIRDSEYE. 1st LT. QMC.

(Title)

10-51043

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:



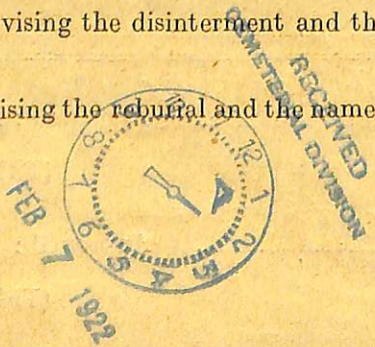
CARIES (CAVITIES).....Outline location and size of cavity, shade in thus:



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.



To be prepared in triplicate.

DATE November 21, 1922.

REPORT OF DISINTERMENT, PREPARATION, SHIPMENT AND REBURIAL OF BODY

^{nem}
DISINTERMENT

COMPARATIVE REPORT

Records of G.R.S. Headquarters.

Discrepancy found upon exhumation of body
Body disc read:

1. Name BONANNI, Anacheto
 2. No. -- 51476
 3. Rank Pvt 1/c.
 4. Org. Co. I, 23rd Inf.
 5. D.D. June 27th. 1918
 6. C.D. KIA

10. Name "Anacheto Bonanni"
 11. No. -----
 12. Rank Pvt.
 13. Org. Co. I, 23rd Inf."
 14. (a) D.D. _____
 (b) D.B. _____

Discrepancy found upon disinterment

7. Grave No. 160 Sec. 100 G
 8. Plot 4 Row _____
 9. _____

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

18. Cemetery Aisne-Marne Amer.
 20. Dept. or County Aisne.
 22. G.R.S. Hdqrs. Code No. 1764

19. Commune or town Belleau
 21. Country France

23. Disinterred (Date) Nov. 21, 1922.

By C.P. Keating

24. Inscription on grave marker:

Name Anacheto Bonanni
 Rank Pvt.1/c.

Serial No. _____
 Organization Co. I, 23 Inf.

25. Was identification disc found on grave marker? Yes, On body? Yes

Signature W.D. Wall Jr. 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).

Bottle record agrees. Collar insignias: "I-23 Inf." "U.S."

27. Condition of body Badly decomposed. Features unrecognizable.

28. Nature of burial Wooden box, burlap and uniform

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? See item #12 above.

30. Body prepared and placed in casket: Date Nov. 21, 1922. By C.P. Keating

31. Casket sealed by C.P. Keating

Signature of Embalmer, (Supervisor W.D. Wall Jr.)

C.P. KEATING

C-31392

SHIPMENT. (Show actual marking of box.) Box No. ~~FM 1000000000~~

32. Designation of body:

Name Anachetq BONANNI. Serial No.


Rank Pvt 1/c. Organization Co. I. 23rd Inf.

33. Consigned to:

Name of Permanent Cemetery Aisne-Marne Amer. Cty. 1764, Belleau, Aisne.

34. Casket boxed and marked (Date) Nov. 21, 1922. By C.P. Keating

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, 1st Lt. MC.

36. Remarks

none

37. Shipped from point of Operation: (Date) November 21, 1922.

To point of Concentration (Name)

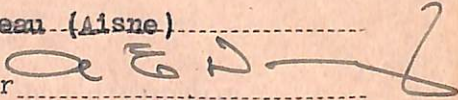
Convoyer Signature Shipping Officer

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 Aisne-Marne Amer. Cem. 1764, Belleau (Aisne) (Name)

Convoyer Signature Shipping Officer 
A.E. DEWEY, 1st Lt. MC.

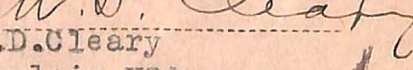
40. Received: Date

G.R.S. Representative

41. Reinterred Nov. 21, 1922, Aisne-Marne Cem. 1764, Belleau (Aisne) (Date)

42. Grave No. 85 Section

43. Plot BLOCK A Row 11

G.R.S. Representative 
W.D. Cleary
Lt., Chaplain, USA.

REPORT OF DISINTERMENT AND REBURIAL

1. REMAINS OF BONANNI, Anacheto SERIAL NUMBER 51476
RANK Pvt. 1/c. ORGANIZATION Co. I, 23rd Inf.

2. Disinterred (date): Nov. 21, 1922. From (give complete location): Grave 160, Sec. G, Plot 4, Cem. 1764.
By: Group 1 Unit F.S.I, Aisne-Marne Cem.

3. Reburied (date): Nov. 21, 1922 In (give complete location): Gr. 85, Block A, Row 11, Aisne-Marne Cem. 1764, Belleau (Aisne)
By: Group re-burial group Unit _____ Nature of Reburial Lined casket

4. Report as to nature of original burial and condition of body upon disinterment:
Wooden box, burlap and uniform
Badly decomposed. Features unrecognizable.

5. (a) Identification tags: Buried with body? Yes On grave marker? Yes
(b) Other means of identification found upon disinterment, and general remarks:
Bottle record agrees. Collar insignias: "I-23rd Inf." "U.S."

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

(a) Height (actual measurement) Impossible to determine

(b) Weight (estimated) "

(c) Hair—Color "

Quantity "

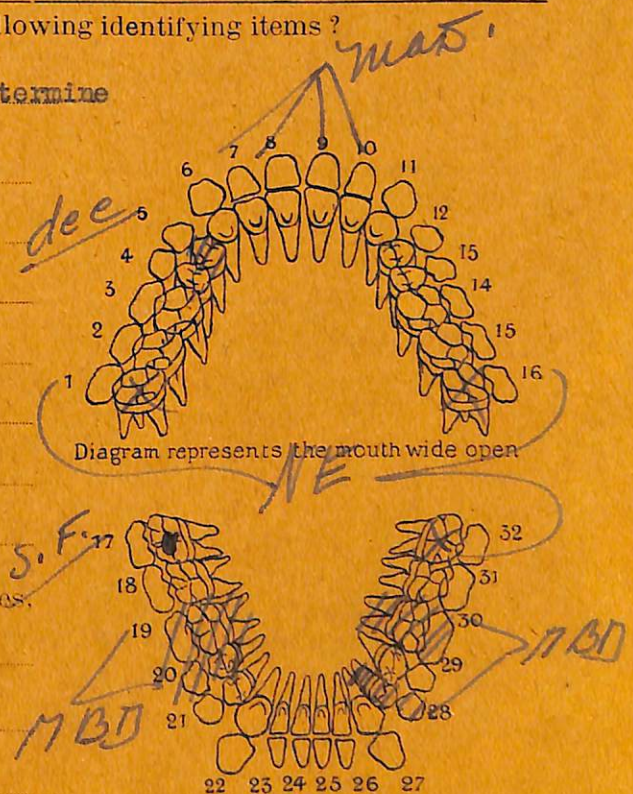
Characteristics "

(d) Hair on face—Color "

Location "

Quantity "

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



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

W.D. Vall Jr. Checker.

7. Disinterment supervised by C.P. Keating, S.E. Approved: A.E. Dewey, 1st Lt. MC.
(Title)

8. Reburial supervised by L.D. Hays Approved: W.D. Cleary
(Title) Lt., Chaplain, USA.

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:	 <p style="text-align: center;">TOOTH MISSING TOOTH MISSING</p>
CROWNED TEETH	Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus:	 <p style="text-align: center;">GOLD CROWN PORCELAIN CROWN GOLD CROWN</p>
BRIDGE WORK	Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge) thus:	 <p style="text-align: center;">GOLD AND PORCELAIN BRIDGE GOLD BRIDGE</p>
FILLINGS	Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus:	 <p style="text-align: center;">SILVER FILLING GOLD FILLING GOLD FILLING GOLD FILLING</p>
CARIES (CAVITIES)	Outline location and size of cavity, shade in thus:	 <p style="text-align: center;">CAVITY DECAYED DECAYED DECAYED</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"	

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

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

COMPILATION OF DISPOSITION OF REMAINS DATA

File #72209

I. LOCATION INDEX CARD:

(a) Name BONANNI, Anacheto Ser. No. 51476
(b) Rank Pvt. 1/c Organization Co. I, 23rd Inf.
(c) Date of death 6/27/18 (d) Cause of death K/A

TYP. EK
CKR. B.J.

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

(a) Grave No. 160 Row - Plot 4 Sec. G TYP. EK
(b) Emerg. Address Mary Bonanni (sister) Ovindole, Italy. (over)

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

IV. A. G. O. DISPOSITION CARD:

no card in file 2-19-21
Date of receipt PF

(a) Name (b) Relationship
(c) Address
(d) Remains to be brought to U. S.?
(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 PF Date 2-19-1920

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

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

No correspondence

Examiner's Initials PF Date 2-19-1920

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

No request for disposition

(a) Cancellation memos referred to? Yes PF

Examiner's Initials PF Date 2-19-1920

COUNTRY France

CEMETERY No. 1764

SHEET No. 202

checked 4
3-16-21

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 of **MAR 10 1921**, 1920

Par. # 2 Not To Be Returned

mch

IX.

CORRECTIONS

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

X. SUSPENSION REMARKS: *B.C.W.A. Miss Mary Bonnanis (sister) Emer. add. Orindoli, Province of Aquila, Italy. (3/11/21) CL*

Serial No.

Remarks

Discrepancies

Name
Rank
Serial No.
Org.
Remarks

A.G.O. Card & Corr.

Discrepancies

Name
Rank
Serial No.
Org.
Remarks

G. R. S. Corr.

Discrepancies

Name
Rank
Serial No.
Org.
Remarks

Checkers ✓

Discrepancies

Name ✓
Rank
Serial No. ~~874~~ *42W. cent.*
Org. *2-23-21.*
Remarks *H. P. S. A.*

S/1357/LML

checked
2-19-21

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

*Peace
rush*

Harlow C.W.

NAME OF DECEASED SOLDIER

CEMETERY NO.

DATE

Bomani, Anacheto, Pvt. 1/c.

1764 - 202

2/23/21.

SERIAL NUMBER

ORGANIZATION

C-23449

51476

Co. I, 23rd Inf.

Date of death - 6/27/18.

WAR RISK INSURANCE INFORMATION

Adjustment Department

Date 3-16-21-CL

DATE _____

NAME OF BENEFICIARY

RELATIONSHIP

Miss Mary Bomani

(Sister) Em. Address,

Address

Coindoli, Province of Aquila, Italy.

S/709/LML

April 18, 1921.

1764 Reg. Sec., Com. Div.

The Quartermaster General, U.S. Army (Cometorial Division).

Chief, American Graves Registration Service, Q.M.G., in Europe.

Supplementary advice on American Concentration Cemetery, #1764,
Bellevue, Aisne, France.

1. Reference paragraph 2, office letter of March 10th, 1921. (File No. 1764 Reg. Sec., Com. Div.), it is requested that you ascertain the desires of the next of kin of the deceased soldier named below and initiate Form 114 if necessary.

Cable
Ref. No.

202. Bonanni, Anacheto, Private 1/c., 51476, Company 1, 23rd Infantry.

2. The records of this office show that Miss Mary Bonanni, of Ovindole, Italy, is the sister and the Bureau of War Risk states that Miss Mary Bonanni, of Ovindoli, Province of Aquila, Italy, is the sister and beneficiary.

3. There is no correspondence in the files of this office concerning this case.

By authority of the Quartermaster General:

THOS. G. HANCOX, Jr.,
Captain, Q.M. Corps.

OSP:33
C & C Dept.

COMPILATION OF DISPOSITION OF REMAINS DATA

File #72209

I. LOCATION INDEX CARD: *264*
U.N. 3-10-21

(a) Name BONANNI, Anacheto Ser. No. 51476 } TYP. EK
 (b) Rank Pvt. 1/c Organization Co. I, 23rd Inf. } B.J.
 (c) Date of death 6/27/18 (d) Cause of death K/A

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

(a) Grave No. 160 Row --- Plot 4 Sec. 0 TYP. EK
 (b) Emerg. Address Mary Bonanni(sister) Ovindole, Italy.

III. Files of soldiers dying from contagious diseases --- CKR. 13.J

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

No card in file. ^{*2-19-21*} _{*P. 7.*}
No request for disposition. _{*W. 4-22-21*}

V. Following advice forwarded to Europe by { cable on ---, 192
 letter of transmittal on MAR 10 1921, 192

Par. # 2 Not To Be Returned
men

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. _____