

LIST OF PAPERS

17-1856

File under No. 2938

Dewitt Bridges, # 222187 "17" 307 Lb. On.

GOVERNMENT PRINTING OFFICE 3-6788

SERIAL NUMBER	FROM—	DATE	TO—	SYNOPSIS
	Fort Myer, Va.	2-2-27	Mr. McCreight,	Miss Ruth, Com. A. I.

Records from
European Claims Unit
Ft. Myer, Va. No. 14.

FILE 2/10/27

Bridges,
(Surname.)

DeWitt
(Christian name in full.)

222,242
(Army serial number.)

Pvt

Co D, 307th Labor Bn
(Rank and organization.)

State your relationship to the deceased.

mother

Do you desire the remains brought to the United States?

yes

(Yes or no.)

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

no

(Yes or no.)

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

Eliza Sibley
(Name of person to receive remains.)

Summit
(Express office.)

Summit
(Telegraph office.)

(Number and street.)

(City or town.)

Miss
(State.)

(Sign here)

Eliza Sibley

RFD #1 Box 700
(Number and street or rural route.)

McComb
(City, town, or post office.)

Miss
(State.)

Read carefully the letter accompanying this card.

Drawn by PE
25-34
10-8

Checked by JER
10-18-20

159

66

G.R.S. Form #114-B

always be carried as "Dewitt"

Auth. A.G.O. State signature clearly gives name Deavit Bridges. case has/

LIST AS "DEWITT BRIDGES" Auth. E.E. Davis Mother write sons name in corr.

FULL NAME BRIDGES, Dewitt 2-3-1927

Pvt.

222242

RANK SERIAL

307th Labor Bn. Co. D. *not Div.*

DIVISION & ORGANIZATION

DATE OF DEATH..... *Sept 23/18*

STATE FROM WHICH HE CAME..... *Miss.*

MEDALS OR DECORATIONS AWARDED.

FINAL GRAVE LOCATION.....
Date Grave Row Block

Suresnes American Cemetery 34
Cemetery

15 Received A. G. O. SEP 3 1924

REC'D WORLD WAR DIV
SEP 3 24

23/306/ARK

GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

Bridges, 22242, Dewitt
(Surname.) (Number.) (First Name and Initials.)

Pvt. Co. D. 307th Labor Bn.
(Rank.) (Organization.)

DATE OF BURIAL... September 24, 1918.

PLACE OF BURIAL.....

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

American Expeditionary Forces

Cemetery No. 25, Talence, France.

Section B

GRAVE NUMBER..... 166

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

Headboard? ^{Yes}..... 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 :

G. W. Everberg
2nd Lieut. G. W. Everberg, Q.M., U.S.
(Signature and Rank of Reporting Officer.)

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
WASHINGTON

File

September 20, 1922.

FILE: 293.8 C-R #30687
SUBJECT: Permanent Grave Location of Private Dewitt Bridges,
Company D, 307th Labor Bn.
TO: Mrs. Elisha Sibley, McComb, Miss.

1. The permanent grave of this soldier is No. 32, Row 2, Block A, Suresnes American Cemetery at Suresnes, Department of Seine, France.

2. 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, organization and date of soldier's death. The 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.

3. In effecting removal, the utmost care and reverence were exacted and more than willingly accorded by those performing 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.

For the Quartermaster General:

MAILED

SEP 20 1922

GEORGE H. PENROSE,
Assistant.

G.R.S.

DS
#C74

EUROPEAN CLAIMS UNIT
Fort Myer, Va.

DATE 10/27/21

1. NAME Bridges, Dewitt SERIAL No. 222242

RANK Pvt ORGANIZATION Co. D. 307th Labor. Bn

GRAVE LOCATION Talence (Gironde) 25
CTY. NAME NUMBER

166 - Sec. B

GRAVE ROW PLOT

2. ORIGINAL ~~BATTLE AREA~~ GRAVE LOCATION 166 Sect. B Talence Gironde
GRAVE COMMUNE DEPT.

COORDINATES

CONCENTRATED TO Sept. 24, 1918 166 Sect. B
DATE GRAVE ROW PLOT

Talence 25-B (Sec)
CEMETERY CTY. NUMBER

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

SUBSEQUENT REBURIALS

DATE GRAVE ROW PLOT CEMETERY

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR [Signature] R. NICHOLS
Major, C. A. C.

3. FINAL GRAVE LOCATION 10/27/21 32 2 A
DATE GRAVE ROW Block PLOT

Suresnes American Cty # 34 Suresnes Seine
CEMETERY

AUDITED BY
SER 8/25/22
FR

Place of interment (Com. 25)

REPORT OF DISINTERMENT AND REBURIAL

Date Sept. 5th, 1921

1. REMAINS OF BRIDGES, Dewitt SERIAL NUMBER 222282

RANK Pvt. ORGANIZATION Co. D. 307th Labor Bn.

2. Disinterred (date): Sept. 5th, 1921 From (give complete location): Gr. 166, Sec. B. Cem. 25.

By: Group 2 Unit Sec. 7

3. Reburied (date): October 27th, 1921. In (give complete location): Suresnes Cemetery. - Block A - Row 2 - Grave 32.

By: Group Field Operations Branch Unit Nature of reburial Blanket.

4. Report as to nature of original burial and condition of body upon disinterment: Wooden box and uniform. Badly decomposed, features not recognizable.

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

(b) Other means of identification found upon disinterment, and general remarks: Tag on body read "Dewitt, Bridges, 222167, 311 Labor Bn. Q.M.C."

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

(a) Height (actual measurement) Impossible to estimate

(b) Weight (estimated) Indiscernable due to decomposition

(c) Hair—Color None visible

Quantity

Characteristics

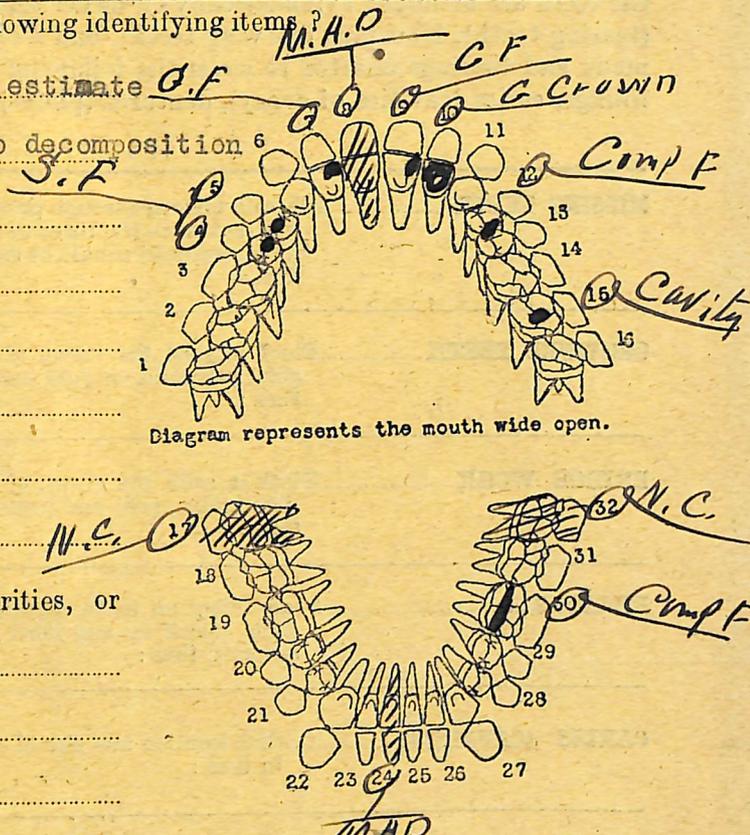
(d) Hair on face—Color None visible

Location

Quantity

(e) Permanent marks on body (old scars, peculiarities, or missing parts) None visible

(f) Wounds or missing parts (received at time of casualty) Indiscernable due to decomposition
Geo. S. Parker, checker.



60346

7. Disinterment supervised by A. J. Harvey, Sup. Emb.

Approved: R. P. Harbold
(Title) Major, Q.M.C.

8. Reburial supervised by R. G. RICHARDS, 1st Lieut. Q.M.C.

Approved: R. P. Harbold
(Title) Major, Q.M.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), 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.

<p>MISSING TEETH.....All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus :</p>	 <p>TOOTH MISSING TOOTH MISSING</p>
<p>CROWNED TEETH.....Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus :</p>	 <p>GOLD CROWN PORCELAIN CROWN</p>
<p>BRIDGE WORK.....Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :</p>	 <p>GOLD AND PORCELAIN BRIDGE GOLD BRIDGE</p>
<p>FILLINGS.....Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus :</p>	 <p>SILVER FILLING GOLD FILLING GOLD FILLING GOLD FILLING</p>
<p>CARIES (CAVITIES).....Outline location and size of cavity, shade in thus :</p>	 <p>CAVITY 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.



To be prepared in triplicate.

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 Bridges, Dewitt
- 2. No. 222242
- 3. Rank Pvt.
- 4. Org. Co. D. 307th Labor Bn
- 5. D.D. Sept. 24. 18
- 6. C.D. DOD

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

Discrepancy found upon disinterment

- 7. Grave No. 166 Sec. B
- 8. Plot _____ Row _____
- 9. _____

- 15. Grave No. _____ Sec. _____
- 16. Plot _____ Row _____
- 17. No discrep.

- 18. Cemetery American
- 20. Dept. or County Gironde
- 22. G.R.S. Hdqrs. Code No. 25

- 19. Commune or town Talence
- 21. Country _____

- 23. Disinterred (Date) Sept. 5th, 1921

By A. J. Harvey

- 24. Inscription on grave marker:
Dewitt Bridges
- Name _____
- Rank Pvt.

Serial No. _____

Organization Co. D. 307th Labor Bn.

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

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).
Tag on body read: "Dewitt Bridges, 222187, 311 Labor Bn."

- 27. Condition of body Badly decomposed, features not recognizable.

- 28. Nature of burial Wooden box and uniform.

- 29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? No discrep.

- 30. Body prepared and placed in casket: Date Sept. 5th, 1921 By A. J. Harvey

- 31. Casket sealed by A. J. Harvey.

Signature of Embalmer, (Supervisor)

A. J. Harvey

SHIPMENT. (Show actual marking of box.) Box No. **C-1858**

32. Designation of body:

Name **Bridges, Dewitt** Serial No. **222242**

Rank **Pvt** Organization **Co. D. 307th Labor. Bn**

33. Consigned to:

Name of Permanent Cemetery **SURESNES AMERICAN CEMETERY #34**

34. Casket boxed and marked (Date) **Sept. 5th, 1921** By **A. J. Harvey**

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 **[Signature]**
G. S. Denny, 1st Lt., CAC.

36. Remarks

37. Shipped from point of Operation: (Date)

To point of Concentration **Sept. 5th, 1921**

Convoyer **Pierre de Montozon** **Bassons (Gironde)** (Name) Signature Shipping Officer **[Signature]**

38. Received at Railhead or Point of Concentration: Date **Campbell, Capt. CAC.**

By G.R.S. Representative **H. A. WADSWORTH** **[Signature]** **Sept 5, 1921**

39. Shipped from Railhead or Point of Concentration: Date **Oct 14 1921**

39 (a) Received from Paris Morgue, October 17, 1921. **[Signature]**
H. L. WARD,
Major, Q.M.C.

39 (b) Shipped from Paris Morgue, **Oct. 26** 1921. To Permanent Cemetery No. 34, American, Suresnes (Seine) by Shipping Officer, Convoys by: **[Signature]**
H. L. WARD,
Major, Q.M.C.

43. Plot **Block** Row **A.** **32.** **2.**

G.R.S. Representative **[Signature]**
R. G. RICHARDS,
1st Lieut. Q.M.C.

SHIPMENT. (Show actual marking of box.) Box No. **C-1858**

32. Designation of body:

Name **Bridges, Dewitt** Serial No. **222242**

Rank **Pvt** Organization **Co. D. 37th Labor. Bn**

33. Consigned to:

Name of Permanent Cemetery **SURESNES AMERICAN CEMETERY #3**

34. Casket boxed and marked (Date) _____ By _____

Sept. 5th, 1921

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

A. J. Harvey

Signature of G.R.S. Inspector **[Signature]**

36. Remarks

C. S. Denny, 1st Lt., CAD

37. Shipped from point of Operation: (Date) _____

Sept. 5th, 1921

To point of Concentration _____

Convoyer **Pierre de Montozon** Bassons (Gironde) Signature Shipping Officer **[Signature]**

38. Received at Railhead or Point of Concentration: Date **Sept 5, 1921**

By G.R.S. Representative **H. A. WADSWORTH**

Major of Infantry

39. Shipped from Railhead or Point of Concentration: Date **Oct 14 1921**

at Cemetery **Paris Morgue**

Jack Roberts (Name) Signature Shipping Officer **[Signature]**

Date **October 27th, 1921.**

representative **R. G. RICHARDS, 1st Lieut. Q.M.C.**

Suresnes Cemetery. (October 27th, 1921.)

Section _____

32. _____

43. Plot ~~xxxx~~ Block _____

A. _____

Row _____

2. _____

G.R.S. Representative **[Signature]**

R. G. RICHARDS, 1st Lieut. Q.M.C.

COMPILATION OF DISPOSITION OF REMAINS DATA

File No. 30687

1. LOCATION INDEX CARD:

(a) Name BRIDGES, Dewitt Ser. No. 222242)
(b) Rank Pvt. Organization Co. D. 307th Labor Bn.) TYP. EML
(d) Cause) CKR
(c) Date of death 9-24-18 of death Lobar Pneumonia)

*144 Edward
222242
For Contention
Suresness 34
Oct 3/31/22*

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

(a) Grave No. 166 Row ---- Plot ---- Sect. B) TYP. EML
(b) Emerg. Address Mrs. Elisha Sibley (Mother), McComb City, Miss.

111. Files of soldiers dying from contagious diseases; No Card) CKR

IV. A.G.O. DISPOSITION CARD:

Date of receipt none

(a) Name Eliza Sibley (b) Relationship mother
(c) Address R #1 Box 70 McComb, Miss.
(d) Remains to be brought to U. S.? yes
(e) To be interred in National Cemetery in U. S. at no

(f) Shipping instructions upon arrival of body in U.S. Eliza Sibley
McComb, Miss. (Ex + Tel) Summit, Miss.

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

SEE SUSPENSION REMARKS 777 4-24-20

Examiner's Initials Date 1920

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

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

No correspondence
Examiner's Initials Date 4-26-1920

VI. G.R.S. Files - Correspondence - shows as follows: Letter 6-24-20 Mother-

Eliza Sibley, R#1, McComb, Miss. giving names of nearest relatives of dead son
Brother - Sadore Bridges, Ruth, Miss. - Brother - Penny Bridges, R#1, McComb, Miss.
Sister - Lilley Neal, McComb, Miss. - Sister - Solena Omlal, Summit, Miss. - No request
for disposition.

(a) Cancellation memos referred to? yes-a-a
Examiner's Initials Date 6-29-1920

VII. G. R. S. FORM No. 114 made 4/27/20, 1920

Typed by HJM, Checked by [Signature], 4/27/ 1920

VIII. FINAL ACTION:

Following advice forwarded to Europe by-
(cable on _____, 1920
(letter on MAY 7, 1920

Par #1 To be returned. MB 10-19-20

CORRECTIONS

IX.

CHANGE OF ADVICE

ACTION TAKEN

Desires body be

Body to be shipped to

X. SUSPENSION REMARKS:

Form 120 5/18/20 Mrs. Eliza Sibley, mother, nearest of kin, requests body remain in France. E.C. 5/20/20

*Cable 5/24/20 advises overseas body to remain France.
* Cable 449. Par. 4 issued 5/25/20. "Do not return". (E.C.) 4/23/21*

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

25-54

MAY 4 1920

FROM: Chief, Graves Registration Service, Q.M.C.
TO: Mrs. Elisha Sibley, McComb City, Miss.
SUBJECT: Remains of Pvt. Dewitt Bridges

Quick Answer

Remain in

Europe

The records of this office show that you have requested that his body be returned to the U. S.

Shipped to: Eliza Sibley, Summit, Miss.

*(you may let the Body remain in France)
I have changed my mind -*

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

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

*noted on Form 115-
see. 5/20/20*

By authority of the Quartermaster General:

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

NAME OF	NO. & STREET	TOWN	STATE
Soldier's Widow			
Soldier's Children	1.		
(Name oldest first)	2.		
	3.		
Father			
Mother	<i>Elisha Austin Sibley</i>		
Brothers	1.		
(Name oldest first)	2.		
Sisters			

*Body to remain
France Cable 5/24/20
no advising \$403.*

Date *May 12 - 1920*

Signature *Elisha Austin Sibley*

Address *McComb Miss R#1* Relationship *mother*

Note: - Instructions on the reverse side of this sheet should be carefully read before filling out this paper. HJM (OVER)

The transfer of bodies will be made entirely at government expense.



INSTRUCTIONS FOR FILLING OUT

1. This paper **MUST** be signed by the person who is the **NEXT** of kin in the order shown in the square on other side of this sheet.
2. This paper must be returned showing the names and address of each of the nearest living relatives in the spaces provided therefor on the other side of this sheet.
3. 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.
4. If **YOU** are not the nearest relative, please ask the nearest relative, if living near you, to fill out this paper.
5. 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.
6. You are requested to return this paper **AT ONCE** in order to avoid delay in the case of this body.
7. Use the enclosed envelope - pay no postage.

Correspondence
noted on Form 125
29 6-29-20

6/24-1920

Mc Comb Miss

Ann

R 1st box 70

29318 cur 30687

Quarter master General
U.S. Army dear Sir
Received a letter from
your Cemetery division
Societies in funerals. he
has a mother Eliza Sibley
address Mc Comb miss. R 1st
two brothers Isadora Bridge
Ruth miss.



Bridges
Dewitt

Benny Bridges

Mc Comb miss. R 1st

2 sisters Lilly Neal

Mc Comb. City miss.

Solena Oneal. Summit miss.

Dewitt Bridges. Pvt.

Co. D. 807 Lab. br.

died Sept 24. 1918.

his body is yet in
France

from his mother
Eliza Sibley

JUN 28 1920
G. H. S.



RECEIVED

DIV. 2, M. B.

GENERAL

JUN 29 1920

INT. SEC. DIV.
RECEIVED

of 25

Quarter Master



General.

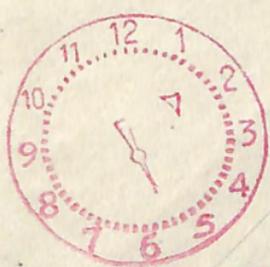
U.S. Army

Genetarial

Division.

Washington, D.C.

RECEIVED



JUN 28 1920

G. K. S.



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

JUL 10 1920

FROM: Chief, Graves Registration Service, Q.M.C.

Rush Answer

TO: Mrs. Eliza Austin Sibley, Route #1, McComb City, Miss.

SUBJECT: Remains of Pvt. Dewitt Bridges

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

no change

You have failed to furnish this office the names and addresses of those persons indicated by the blue arrow on the enclosed form.

You are requested to furnish this office at the earliest practicable moment the name and address of each of those persons indicated by the blue arrow. If these persons are not living you should so state on the attached form and return the same at once to this office, otherwise there will be an endless and unnecessary delay in the handling of this case. Prompt action is necessary.
NS-6794/L

Soldier's Widow

Left None

Soldier's Children (Name oldest, first) 1. 2. 3.

Left None

Father

Dead

Mother

Eliza Austin Sibley

Brothers (Name oldest first) 1. 2.

Sisters

Date: *July 23 - 1920*

Signature: *Eliza Austin Sibley*

Address: *McComb Miss* Relationship: *Mother*

Note: - Instructions on the reverse side of this sheet should be carefully read before filling out this paper. jdb (OVER)

The transfer of bodies will be made entirely at government expense.

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

JUL 10 1920

FROM: Chief, Graves Registration Service, Q.W.C.

Rush Answer

TO: Mrs. Eliza Austin Sibley, Route #1, McComb City, Miss.

SUBJECT: Remains of Pvt. Dewitt Bridges

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

no change

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

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

By authority of the Quartermaster General:

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

NAME OF	NO. & STREET	TOWN	STATE
Soldier's Widow	<i>Left none</i>		
Soldier's Children (Name oldest, first)	1. <i>Left none</i> 2. <i>Left none</i> 3.		
Father	<i>Dead</i>		
Mother	<i>Eliza Austin Sibley</i>		
Brothers (Name oldest first)	1. 2.		
Sisters			

The transfer of bodies will be made entirely at government expense.

Date: *July 23 - 1920*

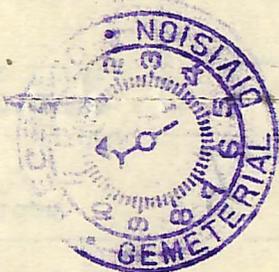
Signature: *Eliza Austin Sibley*

Address: *McComb Miss* Relationship: *Mother*

Note: - Instructions on the reverse side of this sheet should be carefully read before filling out this paper.

jdb

(OVER)



JUL 27 1920

INSTRUCTIONS FOR FILLING OUT

1. This paper **MUST** be signed by the person who is the **NEXT** of kin in the order shown in the square on other side of this sheet.
2. 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.
3. 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.
4. If **YOU** are not the nearest relative, please ask the nearest relative, if living near you, to fill out this paper.
5. 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.
6. You are requested to return this paper **AT ONCE** in order to avoid delay in the case of this body.
7. Use the enclosed envelope - pay no postage.

30687

30682

GIVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

Bridges, 22242, Dewitt

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

Pvt. Co. D. 307th Labor Btn.

(Rank.) (Organization.)

DATE OF BURIAL... **Sept ember 24, 1918.**

PLACE OF BURIAL.....

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

American Expeditionary Forces

Cemetery No. 25, Talence, France.

Section B

GRAVE NUMBER..... **166**

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

Headboard? **Yes**..... 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:

25

REPORTED BY: *G. W. Everberg*

2nd Lieut. G. W. Everberg, Q.M., U.S.

(Signature and Rank of Reporting Officer.)

27 SEP 1918

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

Name *301687*
Scott Bilger

Rank *Pvt* Co. *D.* {Corps} *307* {Regt.} *Labor*

Date of Death *Sept-23-1918*

Place

Cause

Date of Burial *Sept-24-1918*

Grave No. *166 - Section B*

Cemetery *A E F # 25*

Identified by { Tag } *Headboard*
 { Papers }
 { Clothing }

List of Effects *# 22242*

Field Record Made by *Lt E. M. ...*

Company *A* Graves Registration Service

For additional data use reverse side

301687



CODE SLIP



HEADING	SUB HEADING	NO. OF COLS	CODE	
NAME	Bridges, DeWitt	BR 1	3	2 8 9
	CEMETERY	34	1	6
BURIED	GRAVE	32	2	32
	ROW	2	2	02
	BLOCK	A	1	1
STATE	Miss.		2	28
RANK	Pvt		1	2
DIVISION	Q MC Corps		2	57
ORGANIZATION	307		3	307
ARM	Lab. Bn		1	1
MARITAL	(Atty for Est) no		1	2
NAME	Harris, E.B.		3	
RESIDENCE	Brookhaven, Miss.		2	
	STATE		2	
	COUNTY		2	
	CITY		3	
RELATION	mother		1	1
OTHER	not a loco		1	
ELIGIBILITY	no Dead - since war		1	6
NATIVITY			1	
RACE	BLACK		1	2
ENGLISH			1	
ATTENDANT			1	
HEALTH			1	
NO. OF SONS			1	
DATE OF TRIP	MO.		1	
	YR.		1	
ACCEPTANCE	Dead		1	
29/514/EAB				

AUDITED

SEP 22 1932

RS

KPS
la

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WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Bridges, Dewitt 34 Att.

July 8, 1930

Mr. E. B. Harris
Attorney at law
Brookhaven, Miss.

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?

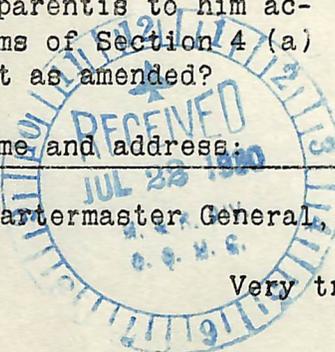
No

If so, give her name and address:

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment


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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Bridges, Dewitt

Aug. 2, 1929.

Mr. E. B. Harris,
Att. at Law
Brookhaven, Miss.

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 Att. for the estate of the mother of the late Private Dewitt Bridges, Co. D, 307th Labor Bn., whose remains are now interred in the Suresnes American Cemetery, Suresnes, Seine, France.

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

Write answers in space below:

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

He is not

2. If so, give her complete address.

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

*Mother deceased
No step mother or adoption
One child like orphan
E. B. Harris
Aug 6 2 1929*

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
Bridges, Dewitt

May 6, 1929.

XC 81 136

Mrs. Elizha Sibley,
McComb,
Mississippi.

Mother dead
No widow shown
Att. for mother's estate:

Mr. E.B. Harris
Att. at Law
Brookhaven, Miss.

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 Dewitt Bridges, Company D, 307th Labor Battalion, whose remains are now interred in the Suresnes American Cemetery, Suresnes, Seine, 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
JOHN T. HARRIS,
Major, Q. M. Corps,
Assistant.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON, D. C.
OFFICIAL BUSINESS



PENALTY FOR PRIVATE USE TO
REGISTER
OR
INSURE
VALUABLE MAIL

MAY 19 1929

Mrs. Eliza Sibley,
McComb,
Mississippi.



MISSISSIPPI
MAY 9
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MEMPHIS

MISSISSIPPI
MAY 10
10 A

MISSISSIPPI
MAY 10
10 A

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Bridges, Dewitt 34 Att.

July 8, 1930

Mr. E. B. Harris
Attorney at law
Brookhaven, Miss.

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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

Bridges, Dewitt

Aug. 2, 1929.

**Mr. E. B. Harris,
Att. at Law
Brookhaven, Miss.**

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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~~
Bridges, Dewitt

May 6, 1929.

Mrs. Elisha Sibley,
McComb, C
Mississippi.

Dear Madam:

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

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Act of Congress.
Envelope.