

gr.

170

G.R.S. Form #114-B

To The A. G. O.

6682

MAY 14 1926

DATE 12-8-21

1. NAME BRION, Chester *u. OK* SERIAL No. 1782285 *OK*

RANK Pvt. *OK* ORGANIZATION Hq Co 314th Inf. *OK*  
& DIVISION 79

GRAVE LOCATION Meuse-Argonne Amer. Cty., Romagne-sous- 1232 Sec. 34  
CTY. NAME Montfaucon (Meuse) NUMBER

134 GRAVE Sec. 34 PLOT 3

2. ORIGINAL BATTLE AREA GRAVE LOCATION *6* *Haumont* *Fabas,* Meuse  
GRAVE COMMUNE DEPT.

COORDINATES Verdun 35 NE 279.05 N 326.92 E

CONCENTRATED TO 6/9/19 134 Sec 34 3  
DATE GRAVE ROW PLOT

Meuse Argonne Cemetery 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 cross and body.

DATE OF DEATH *Nov 3/18*

STATE FROM WHICH HE CAME *Pa*

*data F-1.*

SUBSEQUENT REBURIALS

*ccg.* DATE GRAVE ROW PLOT CEMETERY

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR *M. B. Birdseye*

**M. B. BIRDSEYE**  
1st Lt., Q.M. Corps, U.S. Army

3. FINAL GRAVE LOCATION 12-8-21 2 30 Block D  
DATE GRAVE ROW PLOT

Meuse-Argonne Amer. Cty. Romagne/s/Montfaucon 1232  
CEMETERY

*AUDITED BY*  
*M.M.E.*  
*3-30-23*  
Robert C. Davis  
Major General  
Adjutant General  
MAY 19 1926

A. G. O.  
MAY 15 1926  
WORLD WAR DIV.

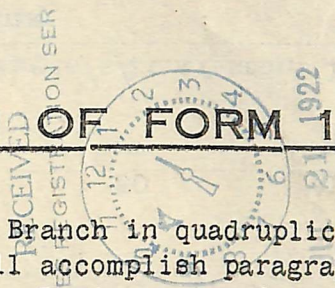
# INSTRUCTIONS FOR PREPARATION OF FORM 114 B

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 16, 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.



CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	<i>Brion</i>	3	<i>289</i>
BURIED	CEMETERY <i>1232</i>	1	<i>1</i>
	GRAVE <i>2</i>	2	<i>02</i>
	ROW <i>30</i>	2	<i>30</i>
	BLOCK <i>D</i>	1	<i>4</i>
STATE	<i>Pa</i>	2	<i>44</i>
RANK	<i>Port</i>	1	<i>2</i>
DIVISION	<i>79</i>	2	<i>79</i>
ORGANIZATION	<i>314</i>	3	<i>314</i>
ARM	<i>Inf</i>	1	<i>1</i>
MARITAL	<i>no</i>	1	<i>2</i> <i>(RM)</i>
NAME	<i>BRION</i>	3	
RESIDENCE	STATE	2	
	COUNTY	2	
	CITY	3	
RELATION	<i>Mother</i>	1	<i>1</i>
OTHER		1	
ELIGIBILITY	<i>Drad 7-15-16</i>	1	<i>6</i>
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE		1	

*Audited*  
APR 18 1932

*MB*

*mcl*

*Edm* 29/514

QM 293 A-M  
Brion, Chester (MA)

May 20, 1932

Mr. George J. Brion,  
Box #21,  
Cammal, Pennsylvania.

Dear Sir:

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

It is therefore requested that you advise whether or not the late Private Chester Brion is survived by a stepmother, and if so, her name and address and the date of your marriage to her.

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.

Enclosure:  
Envelope.

KK

*EM*

ser 178225

1232

XC 122791

Brion, Chester P. H. Co 314 Aug 79 liv  
single

Date mother's death? 7-15-16

Father - Des J. Brion, Box 21, Carmel, Pa.

~~SM?~~

MB

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Brion, Chester 1232 F

July 8, 1930

Mr. George J. Brion  
Box 21  
Cammal, Penna.

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

DATE January 17, 1930

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Brion, Chester	Pvt.	1782285	Hq. Co. 314th Inf.	Nov. 3, 1918

STATE	CTY. NO.	GRAVE	ROW	BLOCK	
Pennsylvania	1232	2	30	D	

Check relationship

Living - Deceased

MOTHER

STEPMOTHER (For the  
year prior to com-  
mencement of service)

NAME

AND

ADDRESS

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)

:	:	:	:	:	:	:	:	:	:
:	:	✓	:	:	:	:	:	:	:
:	:	:	:	:	:	:	:	:	:
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:	:	:	:	:	:	:	:	:	:

Xc-122791  
1/21  
H

Father  
George J. Brion  
Box 21, Cammal.  
Pa

Single man

Veterans Bureau Claim Number \_\_\_\_\_  
29/156/

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

June 29, 1929.

Brion, Chester U.

Mr. Geo. Brion,  
Okome,  
Lycoming Co.,  
Pa.

Dear Sir:

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

The records of this office show that you are the father of the late Pvt. Chester U. Brion, Hq. Co., 314th 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 mother or widow who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish the full names and addresses of the mother and widow in order that action may be taken to extend invitations to them to make the pilgrimage. Both mothers and widows are entitled to make the pilgrimage.

Your attention is particularly invited to Section 4 of the enclosed Act, which defines the terms "mother" and "widow". If the relative is a stepmother, mother through adoption, or any woman who stood in loco parentis to the decedent, a statement as to her relationship is requested. If he was survived by a widow who has since remarried it is also requested that a statement to that effect be made.

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

For The Quartermaster General,

Very truly yours,

2 incls.  
Act of Congress.  
Envelope.

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

7  
QM 293 A-M  
Brion, Chester (MA)

May 20, 1932

Mr. George J. Brion,  
Box #21,  
Cammal, Pennsylvania.

Dear Sir:

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

It is therefore requested that you advise whether or not the late Private Chester Brion is survived by a stepmother, and if so, her name and address and the date of your marriage to her.

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.

0763  
MAY 20 PM 4:43  
COMM M & R BR  
Enclosure:  
Envelope.

KK

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Brion, Chester 1232 F

July 8, 1930

Mr. George J. Brion  
Box 21  
Cammal, Penna.

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

Brion, Chester U.  
1232

Sept. r, 1929.

Mr. Geo. Brion,  
Okome,  
Lycoming Co., Pa.

Dear Sir:

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

Brion, Chester U.

29

IN REPLY REFER TO QM 293 A-C

June , 1929.

Mr. Geo. Brion,  
Ozone,  
Lycoming Co.,  
Pa.

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".

~~Pvt. Chester U. Brion, Hq. Co., 314th Inf., whose remains are now interred in the records of this office show that you are the father of the late, France.~~

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

Your attention is particularly invited to Section 4 of the enclosed Act, which defines the terms "mother" and "widow". If the relative is a stepmother, mother through adoption, or any woman who stood in loco parentis to the decedent, a statement as to her relationship is requested. If he was survived by a widow who has since remarried it is also requested that a statement to that effect be made.

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

For The Quartermaster General,

Very truly yours,

2 incls.  
Act of Congress.  
Envelope.

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

In reply refer to:  
293 C-R

July 7, 1923.

Mr. George Brion,  
Okono, Lycoming County,  
Pa.

Dear Sir:

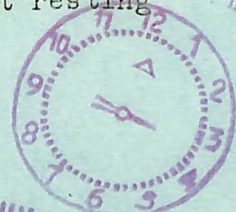
The Quartermaster General desires that you be informed that  
the permanent grave of Private Chester G. Brion, Headquarters Company,  
Grave 2, Row 30, Block D, Meuse-Argonne American  
Cemetery, Romagne-sous-Montfaucon (Meuse), France.

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. 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.

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 main-  
tained by this Government in a manner befitting the last resting  
place of our heroes.

Very truly yours,

H. J. Conner,  
Assistant.



JUL 7 1923  
H.B.

RD

23/236/ARK

# COMPILATION OF DISPOSITION OF REMAINS DATA

File 64387

## I. LOCATION INDEX CARD:

(a) Name BRION, Chester <sup>U. (4-11-21) E.M.</sup> Ser. No. 1782285  
 (b) Rank Pvt. Organization Hdq. Co., 314th Inf.  
 (c) Date of death 11-3-18 (d) Cause of death K/A

TYP. B  
 CKR. 30

*Examined 3/1/22  
 for concentration  
 of Munsie-Argonne at 3/25/22  
 #1232*

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

(a) Grave No. 134 Row - Plot 3 Sec. 34 TYP. B  
 (b) Emerg. Address George Brion (father) Okome, Lycoming Co., Pa. <sup>at (4-11-21) E.M.</sup>

III. Files of soldiers dying from contagious diseases: / / / / / / / / / / CKR. 30

## IV. A. G. O. DISPOSITION CARD:

Date of receipt None

(a) Name Geo. J. Brion (b) Relationship Father

(c) Address omitted

(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 JD Date 4-5, 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 JD Date 4-5, 1920

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

No request for disposition

(a) Cancellation memos referred to? Yes

Examiner's Initials JD Date 4-5, 1920

COUNTRY FRANCE CEMETERY No. 1232-Sec. 34 SHEET No. 25

*checked 4-11-21  
 E.M.*

*904*





Place ... Romagne 1232.

REPORT OF DISINTERMENT AND REBURIAL

Date ... Dec 8, 1921.

1. REMAINS OF ... BRION, Chester U. SERIAL NUMBER ... 1782285

RANK ... Pvt. ORGANIZATION ... Hq. Co. 314th Inf.

2. Disinterred (date) : Dec 8, 1921 From (give complete location) : gr 134, sec 34, plot 3. Cty. 1232.

By : Group ... 1 Unit ... sec 1

3. Reburied (date) : Dec 8th 1921 In (give complete location) : Meuse Argonne Cemetery # 1232 Gr 2 block D row 30

By : Group ... re-burial 3 Unit ... Nature of reburial ... unlined casket

4. Report as to nature of original burial and condition of body upon disinterment : wooden box and burlap 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 : Chester Brion 1782285 on body tag.

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

(a) Height (actual measurement) ... impossible to determine.

(b) Weight (estimated) ... do

(c) Hair—Color ... do

Quantity ... do

Characteristics ... do

(d) Hair on face—Color ... do

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) ... none visible.

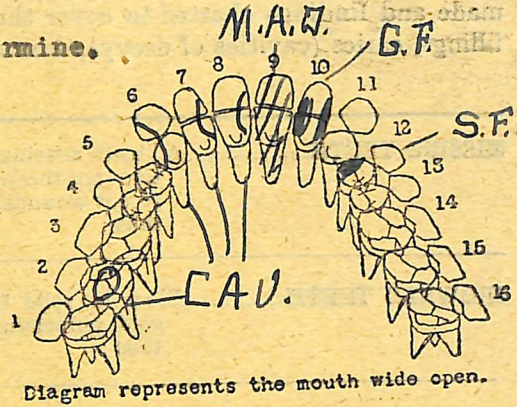
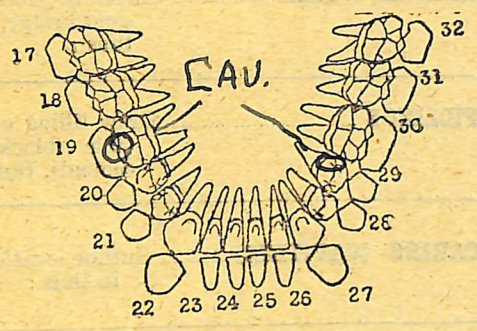


Diagram represents the mouth wide open.



7. Disinterment supervised by ... N. N. Foster H.H. Foster.

Approved: ... G.F. Spann G.F. Spann, Capt. Q.M.C. (Title)

8. Reburial supervised by ... A. J. Dufault

Approved: ... James W. Younger, Capt QMC. (Title)

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

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

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

**MISSING TEETH** ..... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus :



**CROWNED TEETH** ..... Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus :



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



**FILLINGS** ..... Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus :



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



**DENTURES (PLATES)** ..... Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

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

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



GRAVES REGISTER

To be prepared in triplicate.

DATE Dec 8 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 BRION, Chester U. 10. Name \_\_\_\_\_  
 2. No. 1782285 11. No. \_\_\_\_\_  
 3. Rank Pvt. 12. Rank \_\_\_\_\_  
 4. Org. Hq Co 314th Inf. 13. Org. \_\_\_\_\_  
 5. D.D. Nov 3rd. 1918 14. (a) D.D. \_\_\_\_\_  
 6. C.D. KIA (b) D.B. None

Discrepancy found upon disinterment

7. Grave No. 134 Sec. 34 15. Grave No. \_\_\_\_\_ Sec. \_\_\_\_\_  
 8. Plot 3 Row \_\_\_\_\_ 16. Plot \_\_\_\_\_ Row \_\_\_\_\_  
 9. \_\_\_\_\_ 17. \_\_\_\_\_ None  
 18. Cemetery Meuse-Argonne Amer. 19. Commune or town Romagne-sous-Montisaucon  
 20. Dept. or County Meuse 21. Country France  
 22. G.R.S. Hdqrs. Code No. 1232 Sec. 34  
 23. Disinterred (Date) Dec 8 1921 By H H Foster.  
 24. Inscription on grave marker:  
 Name Chester Brion Serial No. 1782285  
 Rank Pvt Organization Hq Co 314 Inf  
 25. Was identification disc found on grave marker? Yes On body? Yes

*John H. Crawford*  
 Signature Junior Technical Assistant

John H Crawford

## 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).

None

27. Condition of body Badly decomposed, features unrecognizable

28. Nature of burial Uniform, burlap and 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 Dec 8 1921 By H H Foster.

31. Casket sealed by H H Foster.

Signature of Embalmer, (Supervisor *H. H. Foster*)

SHIPMENT. (Show actual marking of box.)

Box No.



32. Designation of body:

Name **Chester BRION**

Rank **Pvt.**

Organization **Hq Co 314th Inf.**

33. Consigned to:

Name of Permanent Cemetery **Meuse-Argonne Amer. Cty. #1232, Romagne-sous-Montfaucon (Meuse)**

34. Casket boxed and marked (Date)

**Dec 8 1921**

By

**H H Poster**

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

**G F Spann, Capt. QMC**

36. Remarks

37. Shipped from point of Operation: (Date)

**Dec 8 1921**

**cc**

To point of Concentration

**Morgue Romagne**

(Name)

Convoyer

**W J Royed**

Signature Shipping Officer

**J. Gerald Cole**  
**J. GERALD COLE**  
**Captain, C. A. C.**

38. Received at Railhead or Point of Concentration: Date

By G.R.S. Representative

39. Shipped from Railhead or Point of Concentration: Date

To Permanent Cemetery

(Name)

Convoyer

Signature Shipping Officer

40. Received: Date

G.R.S. Representative

41. Reinterred

**Meuse Argonne Cemetery # 1232 (Dec 9th 1921)**

42. Grave No.

Section

43. ~~Plot~~ **Block**

Row

**30**

G.R.S. Representative

**James W. Younger, Capt QMC**

jt.

Date 21st June 1919.

REPORT OF DISINTERMENT AND REBURIAL

Remains of :

NAME: **BRION Chester W.**

NUMBER: **1782285**

RANK: **Pvt.**

ORGANIZATION: **U.S.A.**

DISINTERMENT AND REBURIAL MADE BY GROUP:

UNIT:

DISINTERMENT (Date)

FROM: (Give complete location)

**9th June 1919.**

**Grave 6 B.A.C.**

**HAUMONT MEUSE.**

**35 NE. E 326.92. N 279.05.**

REBURIAL (Date)

IN: (Give complete location)

**9th June 1919.**

**Grave 134 sec 34 plot 3.**

**ARGONNE AMERICAN CEMETERY # 1232.**

**ROMAGNE MEUSE.**

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

**Burial good In uniform baldy decomposed.**

Was any identification tag found upon the body? **yes**

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

Note:

If, upon disinterment, effects are found on bodies, they will be promptly sent to the Effects Depot, direct, as is required by G. C. 110, G.H. 3, 1918, after being carefully examined for clues of identity in doubtful cases, notation there of will be made and reported to the Chief, Graves Registration Service.

Supervised by: Lt. Stein

**R. H. ROSENTHAL**

**2nd Lieut. O.M.C.U.S.A.**

G.O. Group            Unit           

1232

CONFIRMED No. D. 11322

11322



RECEIVED

1911

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...

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5 104387

# GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Brion 1782285 Chester W.  
(Surname.) (Number.) (First Name and Initials.)

Pol Co C 314<sup>th</sup> Inf  
(Rank.) (Organization.)

DATE OF BURIAL 4-1918

PLACE OF BURIAL Stannumont

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

27+0 - 79+2 Map Extract from Montfaucon and Etain sheet 304 Eng.

GRAVE NUMBER

HOW MARKED: Name Peg? 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:

MEUSE

CMMR HAN NUNT-PRES-SAMOGNEUX  
(O-228) SHIT. 355.E COORD E 327.  
N 279.2

REPORTED BY: Geo Bonarius  
Coflaint 1st Lt  
(Signature and Rank of Reporting Officer.)

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



Bryan

1782285

Chester

Pvt.

U.S.A.

Battle

Area

Cem.

Haumont

Meuse

Map. Verdun NE. 35

E 326.92 N 279.05

Grave No. 6

Grave marked with cross

Tag on cross

Sketch No. 50

745

E.

F.

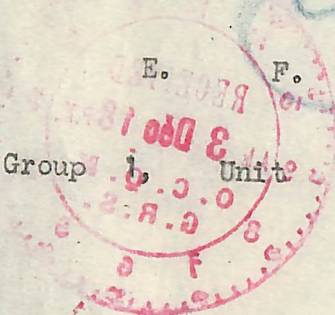
Fiene

Group

Unit

311

GRS



RB5K  
893

*Handwritten red scribbles*

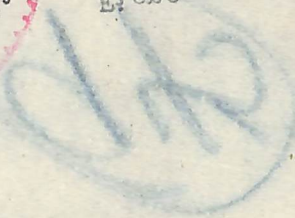


211

672

E. E.

sketch no. 20



128 on cross

grave marked with cross

grave no. 2

Map. Verduin ME. 22  
Hampson

E 250.05 N 570.02

Mence

Battle

yles

Cem.

Blaf.

U.S.A.

Blasen

1785582

Chester

Handwritten number 138

5 (6438)

# GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Brion 1782285 Chester W.  
(Surname.) (Number.) (First Name and Initials.)

Pvt. Co. C. 314 Inf.  
(Rank.) (Organization.)

DATE OF BURIAL Nov 4-1918

PLACE OF BURIAL Hammont

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

27+0-79+2 Map Extract  
from Montfaucon and  
Etain Sheet 304 Eng.

GRAVE NUMBER No 5

HOW MARKED: Name Peg? \_\_\_\_\_ 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:

NAME \_\_\_\_\_  
(0 \_\_\_\_\_) SHT. \_\_\_\_\_ COORD \_\_\_\_\_

REPORTED BY:  
George Donatus Choplain  
(Signature and Rank of Reporting Officer.)

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



Commercial  
Daily Report No.

151-751

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-H  
Information requested of A.G.O.

File No. Requisition

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

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 **Brion** *OK*
- b. Christian name **Chester U. or (Chester)** *OK*
- c. Serial Number **1782285** *OK*
- d. Organization **Hq. Co., 314th Inf.** *OK*
- e. Rank **Pvt.** *OK*
- f. Date of death **11/3/18.** *OK*
- g. Cause of death **K/A.** *OK*
- h. Authority (C.O.#)
- i. Emergency address **Geo. Brion**  
**Shome, Pa.**
- j. Relationship **father.**

NOTED FORM IS  
DATE 4-11-21 E.M.

BODY DESCRIPTION  
(See page #2 of the Service Record)

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

- a. Age of enlistment
- b. Color of eyes
- c. Color of hair
- d. Height
- e. Weight
- f. Permanent marks and physical defects at enlistment (Old fractures or breaks)
- a. Strike out teeth missing

RECEIVED  
APR 18 1921  
64387  
File No. ...

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	

*Donnelly (K.E.M.)*  
*Pres. Sec. 4/6/21*  
*W.G.B.*

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

BY: *H. J. Conner*  
H. J. CONNER,  
1st. Lieut. Q.M.C.

CHEMISTRY NO: **1232-Sec.34.**

SHEET NO: **25**  
TYPED BY: **I.W.**

S/713/LML

Rec'd World War Div.  
Date... APR. 8... 1921

APR 8 1921

**FILE**

WAR DEPARTMENT  
Office of the Quartermaster General of the Army  
Washington

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

Date 4/7/21.

File No. Requisition

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

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

Subject: Information required for G.R.S.

NOTED FORM 115  
DATE 4-11-21 E.M.

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

- a. Surname **Brion** *OK*
- b. Christian name **Chester U. or (Chester)** *OK*
- c. Serial Number **1782285** *OK*
- d. Organization **Hq. Co., 314th Inf.** *OK*
- e. Rank **Pvt.** *OK*
- f. Date of death **11/3/18** *OK*
- g. Cause of death **K/A.** *OK*
- h. Authority (C.O.#)
- i. Emergency address **Geo. Brion**  
**Okome, Pa.**
- j. Relationship **father.**

BODY DESCRIPTION  
(See page #2 of the Service Record)

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

- a. Age of enlistment
  - b. Color of eyes
  - c. Color of hair
  - d. Height
  - e. Weight
  - f. Permanent marks and physical defects at enlistment (Old fractures or breaks)
- Adjustment Made**
- APR 18 1921**
- 64387**
- File No. ....**
- 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 |   |   |   |   |

*Donnelly (K.E.M.)*  
*Pres. Sec. 4/8/21*  
*W.G.S.*

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

C.W.  
CEMETERY NO: **1232-Sec.34.**

BY: *H. J. Conner*  
H. J. CONNER,  
1st. Lieut. Q.M.C.

SHEET NO: **25**  
TYPED BY: **I.W.**

S/713/LML

Rec'd World War Div.  
Date... APR. 8... 1921

APR 8 1921

Office of the Quartermaster General of the Army  
WASHINGTON, D.C.

Date: 4/7/21

U.S.A. Form 2-W-A-H  
Information requested of A.G.O.

From: The Quartermaster General, U.S. Army, (General Division) (SPECIAL)  
To: The Adjutant General of the Army, 5th & B-Str., W.W. Washington, D.C.  
Subject: Information requested for G.R.S.

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

- a. Surname *Byron*
- b. Christian name *Chester U. or (Chester)*
- c. Serial Number *1482266*
- d. Organization *Hq. Co., 31st Inf.*
- e. Rank *Pvt.*
- f. Relationship
- g. Date of birth *11/3/18*
- h. Cause of death *K/A*
- i. Authority *(C.G.S.)*
- j. Emergency address

PHYSICAL EXAMINATION  
(See physical report of  
examination prior to enlistment)

BODY DESCRIPTION  
(See page 2 of the Service Record)

RECEIVED  
APR - 9 1921

Adjustment Made  
APR 18 1921

- a. Age of enlistment
- b. Color of eyes
- c. Color of hair
- d. Height
- e. Weight
- f. Permanent marks and physical defects at enlistment (Old fractures or breaks)

H. I. ROBERTS  
Quartermaster General, U.S.A.

*[Handwritten signatures and initials]*

APR 8 1921

QUARTERY NO. 1222-26334

SHEET NO. 25  
TYPED BY: I.W.

*[Handwritten text]*

Brion

Chester U

1,782,285

(Surname.)

(Christian name in full.)

(Army serial number.)

Pvt

Hq Co 314 Inf

(Rank and organization.)

State your relationship to the deceased

Father

Do you desire the remains brought to the United States?

no

(Yes or no.)

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

(Yes or no.)

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

(Name of person to receive remains.)

(Express office.)

(Telegraph office.)

(Number and street.)

(City or town.)

(State.)

(Sign here)

Geo J Brion

(over)

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

F.M.

Letter Sent to:

Mr George Brion  
Okome, Pa.

Drawn by JAD  
1232-sec 34-20  
4-5-21

checked JAD  
4-5-21