

To The A. G. O.

156

G.R.S. Form #114-B

FEB 18 1923

1640

FULL NAME ..... BRODERICK, William J. ✓

RANK ..... Pvt. ✓ ..... SERIAL ..... 1693965 ✓

DIVISION & ORGANIZATION ..... Co. B, 165th Inf. ✓ 42 Div. ✓

DATE OF DEATH.....

Oct 29/18 ✓

STATE FROM WHICH HE CAME.....

Mass  
none ✓

MEDALS OR DECORATIONS AWARDED.

FINAL GRAVE LOCATION..... 40..... 41..... A.....  
Date Grave Row Block  
Romagne, Cty. 1232.

Cemetery

41  
FEB 19 1923  
A.G.O.  
WORLD WAR DIV.

Rec'd World War Div.  
5 MAR 30 1928

Major General  
The Adjutant General  
BY swa 2/24/26

23/306/ARK





## GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

**Broderick**.....**1695865**.....**William J.**.....  
(Surname.) (Number.) (First Name and Initials.)

**Private**.....**Co, B, 55th Inf.**.....  
(Rank.) (Organization.)

DATE OF BURIAL.....**Oct. 30th 1918.**.....

PLACE OF BURIAL.....

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

**American E. F. Cemetery No. 6**.....

**Bazouilles-sur-Meuse,** plan of.....

**Aug. 29th, 1918.**.....

GRAVE NUMBER.....**333**.....

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

Headboard? **yes**..... Bottle? **yes**.....

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:

**Ernest E. Park 1st Lt QM, Co**.....  
(Signature and Rank of Reporting Officer.)

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



CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME <i>Broderick</i>	<i>Bro</i>	3	<i>285</i>
<i>Wm J.</i> BURIED	CEMETERY <i>1232</i>	1	<i>1</i>
	GRAVE <i>40</i>	2	<i>40</i>
	ROW <i>41</i>	2	<i>41</i>
	BLOCK <i>A</i>	1	<i>1</i>
STATE	<i>Mass</i>	2	<i>25</i>
RANK	<i>Pvt</i>	1	<i>2</i>
DIVISION	<i>42</i>	2	<i>42</i>
ORGANIZATION	<i>65</i>	3	<i>065</i>
ARM	<i>Inf</i>	1	<i>1</i>
MARITAL	<i>Y no</i>	1	<i>2</i>
NAME <i>Broderick</i>		3	
<i>John R.</i>	STATE	2	
RESIDENCE <i>53 Hyde Park Ave</i>	COUNTY	2	
<i>Forest Hills Mass</i>	CITY	3	
RELATION <i>father died</i>	<i>Mother</i>	1	<i>1</i>
OTHER <i>5-23-30</i>		1	
ELIGIBILITY	<i>Dead 6-4-18</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*

*EPB*  
29/514  
*AB*



Ser.  
1693905

1232

xe 91199

Broderrick, Wm J. Pot Co B 65 Aug 42 div

single

Mother died 6-4-18

~~S m?~~ father died 5-23-30

adm John R. Broderrick  
53 Hyde Park Ave  
Forest Hills,  
Mass.

mb



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

July 7, 1930

Broderick, Wm. J. 1232-F

Mr. Michael Joseph Broderick  
219 North St.  
Jamaica Plain, Mass.

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.



(7) Michael Joseph

Broderick

219 South St-

Jamaica Plain

Mass-

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON

DATE January 17, 1930

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Broderick, William J.	Pvt.	1693965	Co. B, 165th Inf.	Oct. 29, 1918

> Single

STATE	Massachusetts	CTY. NO.	1232	GRAVE	40	ROW	41	BLOCK	A
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Check relationship

Living - Deceased

MOTHER

STEPMOTHER (For the  
year prior to com-  
mencement 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)

no widow -

Veterans Bureau Claim Number  
29/156/

XC 91199



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Broderick, Wm. J.

August 20, 1929

Mr. Michael Joseph Broderick,  
83 Jamaica St.,  
Jamaica Plain, Mass.

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. Wm. J. Broderick, Co. B, 65th Inf., whose remains are now interred in the Meuse Argonne Amer. Cty. Romagne-sous-Montfaucon, Meuse, 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?

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.

4. Does she desire to make the pilgrimage?

For The Quartermaster General,

Very truly yours,

2 Incls.  
Act of Congress  
Envelope

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



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Broderick, William J.

June 27, 1929.

Mrs. Mary Broderick,  
265 Roxbury St.,  
Roxbury, Mass.

(M) dead  
(P) Michael Joseph Broderick  
83 Jamaica St. X C 9/199  
Jamaica Plain 7/29/29  
Mass

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 William J. Broderick, Co. B, 65th Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, France.

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

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

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

For The Quartermaster General,

Very truly yours,

2 incls.  
Act of Congress.  
Envelope.

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



WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON, D. C.

OFFICIAL BUSINESS

*not here  
H. H. C.*

**RETURN TO WRITER**  
REASON FOR NON-DELIVERY CHECKED

Unclaimed \_\_\_\_\_ Unknown \_\_\_\_\_  
Deceased \_\_\_\_\_ For better address \_\_\_\_\_  
or sent to address \_\_\_\_\_ Refused \_\_\_\_\_  
No such \_\_\_\_\_ state named \_\_\_\_\_

*over*



PENALTY FOR PRIVATE USE TO  
AVOID PAYMENT OF POSTAGE, \$300

CITIZENS  
MILITARY  
TRAINING  
- CAMPS -





7-2-29  
J.C. 188

BOSTON, MASS. Y  
JUL 3  
11-AM  
1929



RECEIVED  
JUL 3 1929



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

July 7, 1930

Broderick, Wm. J. 1232-F

Mr. Michael Joseph Broderick  
219 North St.  
Jamaica Plain, Mass.

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

Broderick, Wm. J.  
1232

September 10, 1929.

Mr. Michael Joseph Broderick,  
83 Jamaica St.,  
Jamaica Plain, Mass.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated Aug. 20, 1929 making inquiry concerning the name and address of the mother and widow of the deceased service man above named. These addresses are desired with a view to ascertaining the number of mothers and widows who desire to make a pilgrimage to the cemeteries of Europe in which the remains of their sons and husbands are interred.

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

Write answers in space below

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

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

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

For The Quartermaster General,

Very truly yours,

2 Incls.  
Act of Congress  
Envelope

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



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Broderick, Wm. J.

August 20, 1929

Mr. Michael Joseph Broderick,  
83 Jamaica St.,  
Jamaica Plain, Mass.

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. Wm. J. Broderick, Co. B, 65th Inf., whose remains are now interred in the Meuse Argonne Amer. Cty. Romagne-sous-Montfaucon, Meuse, 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?
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.
4. Does she desire to make the pilgrimage?

For The Quartermaster General,

Very truly yours,

2 Incls.  
Act of Congress  
Envelope

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



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C  
**Broderick, William J.**

June 27, 1929.

**Mrs. Mary Broderick,  
265 Roxbury St.,  
Roxbury, Mass.**

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 William J. Broderick, Co. B, 65th Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, France.**

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

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

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

For The Quartermaster General,

Very truly yours,

2 incls.  
Act of Congress.  
Envelope.

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



In reply refer to:

293.8 C-R

# 49386

File  
Nov. 29, 1922.

Mrs. Mary Broderick,  
265 Roxbury St.,  
Roxbury, Mass.

Dear Madam:

The Quartermaster General desires that you be informed that the permanent grave of the late William J. Broderick, Private, Co. B, 65th Infantry, is Grave 40, Row 41, Block A, Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Department of 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, 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 maintained by this Government in a manner befitting the last resting place of our heroes.

Very truly yours,

MAILED

H. J. CONNER,  
Assistant.

DEC 2 1922

22/1281/ARK

G.R.S.

hs  
HCTH



DATE 11/23/21

1. NAME Broderick, William J SERIAL No. 1693965  
 RANK Pvt. ORGANIZATION Co. B 65th Inf.  
 GRAVE LOCATION Amer. Bazoilles-sur-Meuse - Vosges CTY. NAME 6 NUMBER  
400  
 GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 333. Bazoilles-sur-Meuse. Vosges.  
 GRAVE COMMUNE DEPT.

COORDINATES E.346-21. N.170-12. Map: Mirecourt NW 84.

CONCENTRATED TO Feb. 1921. 400. DATE GRAVE ROW PLOT  
Bazoilles-sur-Meuse. 6.  
 CEMETERY CTY. NUMBER

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

Nothing of record.

SUBSEQUENT REBURIALS Not of record.  
 DATE GRAVE ROW PLOT CEMETERY

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR Wm. H. QUARTERMAN, Capt. F.A. USA.

3. FINAL GRAVE LOCATION 11/23/21 40 41 A.  
 DATE GRAVE ROW Block

Meuse-Argonne American Cty. Romagne-sous-Montfaucon (Meuse) 1232  
 CEMETERY



# 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.



Place Bazoilles (Vosges) France.

## REPORT OF DISINTERMENT AND REBURIAL

Date Sept. 27, 1921.

1. REMAINS OF BRODERICK, William J. SERIAL NUMBER 1693965

RANK Pvt. ORGANIZATION Co. B, 65th. Inf.

2. Disinterred (date): Sept. 27, 1921. From (give complete location) Gr. No. 400

Amer. Cem. # 6, Bazoilles (Vosges)

By: Group 3 Unit Section No. 4.

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

Nov. 23, 1921 Meuse-Argonne Cty. #1232 Gr. 40, Block A, row 41.

By: Group Reburial S Unit Nature of reburial Lined casket.

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

Buried in uniform, blanket, in wooden box. Body badly

decomposed, recognition impossible.

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

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

Bottle containing hospital and reburial records found on

body. No effects found.

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

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

(b) Weight (estimated) Unable to determine.

(c) Hair—Color Brown.

Quantity Abundant.

Characteristics Straight.

(d) Hair on face—Color None found.

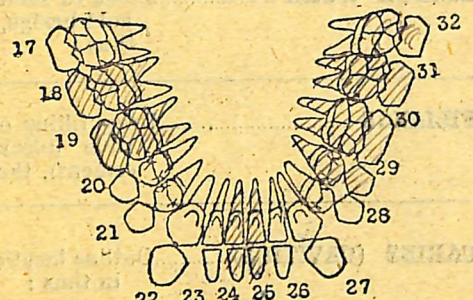
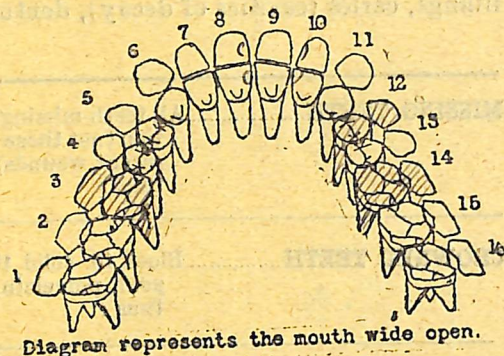
Location -

Quantity -

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

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

None.



No. 3, 12, 14, 18, 19, 30, 31,  
M.B.D. No. 8, 10, cavity.  
No. 24, 25, 29, M.A.D. No. 32  
decayed.

7. Disinterment supervised by Theo Miller. Approved: R. I. FAIN, GCD. (Title) Capt. Q.M.C. bjm.

8. Reburial supervised by A. U. DURAULT. Approved: JAMES W. YOUNGER, (Title) Capt. 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.

**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 :



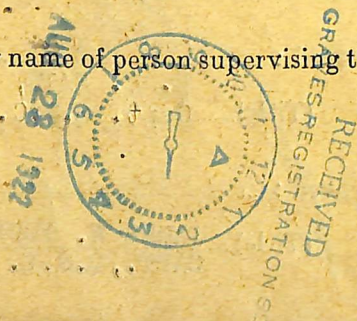
**CARIES (CAVITIES)**.....Outline location and size of cavity, shade in thus :



**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 Sept. 27, 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 <u>Broderick, William J</u>	10. Name <u>Willian J. Broderick.</u>
2. No. <u>1693965</u>	11. No. <u>VI</u>
3. Rank <u>Pvt.</u>	12. Rank <u>Section</u>
4. Org. <u>Co. B 65th Inf.</u>	13. Org. <u>S35</u>
5. D.D. <u>10-29-21</u>	14. (a) D.D.
6. C.D. <u>Broncho Pneumonia and Gastro Enteritis</u>	(b) D.B.

Discrepancy found upon disinterment

7. Grave No. <u>400</u> Sec.	15. Grave No. Sec.
8. Plot Row	16. Plot Row
9.	17. <u>None.</u>
18. Cemetery <u>Amer.</u>	19. Commune or town <u>Bazoilles-sur-Meuse</u>
20. Dept. or County <u>Vosges</u>	21. Country <u>France</u>
22. G.R.S. Hdqrs. Code No. <u>6</u>	
23. Disinterred (Date) <u>Sept. 27, 1921.</u>	By <u>Theo Miller.</u>

24. Inscription on grave marker:

Name <u>BRODERICK, William J.</u>	Serial No.
Rank <u>Pvt.</u>	Organization <u>Co. B, 65th. Inf. Gr. 400</u>

25. Was identification disc found on grave marker? Yes. On body? Yes.Signature Glenn C. Dorsey Junior Technical Assistant

GLENN C. DORSEY.

## 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).

No effects found. Form 16a accomplished. Bottle containing hospital and reburial records found on body. Disc on body reads (William J. Broderick.)

27. Condition of body Badly decomposed, recognition impossible.

28. Nature of burial Buried in uniform and blanket in wooden box.29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? See No. 10.30. Body prepared and placed in casket: Date Sept. 27, 1921. By Theo Miller.31. Casket sealed by Theo Miller.

Signature of Embalmer, (Supervisor)

THEO MILLER.



SHIPMENT. (Show actual marking of box.)

Box No.

C-10694

32. Designation of body:

Name Broderick, William J

Serial No. 1693965

Rank Pvt.

Organization

Co. B 65th Inf.

33. Consigned to:

Name of Permanent Cemetery Meuse Argonne Amer #1232 -Romagne-sous-Montfaucon Meuse

34. Casket boxed and marked (Date) Sept. 27, 1921. By Theo Miller.

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

R. L. FAIN, Capt. Q.M.C.

bjm

36. Remarks

37. Shipped from point of Operation: (Date) Sept. 27, 1921.

To point of Concentration NEUFCHATEAU (VOSGES)

(Name

Convoyer

Signature Shipping Officer

Capt. Q.M.C.

38. Received at Railhead or Point of Concentration: Date

By G.R.S. Representative

39. Shipped from Railhead or Point of Concentration: Date 30 OCT 1921

To Permanent Cemetery Romagne-sous-Montfaucon (Meuse)

(Name

Convoyer

L. RIELEY

Signature Shipping Officer

W. R. BUCKLEY,  
Capt. Q.M.C.

40. Received: Date

G.R.S. Representative

41. Reinterred: Nov. 23, 1921 Meuse-Argonne Cty. #1232.

(Date

42. Grave No. 40

Section

43. Block A

Row 41

el

G.R.S. Representative

JAMES W. YOUNGER, CAPT., Q.M.C.



# COMPILATION OF DISPOSITION OF REMAINS DATA

## I. LOCATION INDEX CARD:

(a) Name BRODERICK, William J. Ser. No. 1693965  
 (b) Rank Private Organization Co. B, 65th Infantry  
 (c) Date of death 10-29-18 (d) Cause of death Broncho pneumonia & Gastro Enteritis

TYP. vbbCKR. WJ

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

(a) Grave No. 333 Row -- Plot -- Sec. -- TYP. vbb  
 (b) Emerg. Address Mrs. Mary Broderick (mother) 265 Roxbury St., Roxbury, Mass.

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

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

Date of receipt no card in file - 10/12/20

(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 \_\_\_\_\_ Date \_\_\_\_\_, 1920.

## V. A. G. O. CORRESPONDENCE shows communication from \_\_\_\_\_

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

no correspondenceExaminer's Initials WJ Date 10/12, 1920.

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

no request for disposition(a) Cancellation memos referred to? yes momExaminer's Initials mom Date 10-12, 1920.COUNTRY FRANCECEMETERY No. 6SHEET No. 70

CARDED

FORM 115 - A COMPLETED

WB 12-16-20checked  
Apr 10/13/20  
Ltransmit to  
Meuse Argonne 1232  
11-21-20



RECEIVED BY  
MAIL UNIT

JUN 15 1921

Cemeterial Division  
Overseas Project Sub-Section

VII. G. R. S. Form No. 154 made \_\_\_\_\_, 1920.

Typed by \_\_\_\_\_, Checked by \_\_\_\_\_, \_\_\_\_\_

VIII. FINAL ACTION

Following advice forwarded to Europe by

cable on \_\_\_\_\_, 1920

letter on \_\_\_\_\_, 1920

NOV 17 1920

PARAGRAPH 2 - NOT TO BE RETURNED (H.S.)

IX.

### CORRECTIONS

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

X. SUSPENSION REMARKS: \_\_\_\_\_



6-70 rr

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

JAN 7 1921

GRAVES REGISTRATION SERVICE

~~XXXXXXXXXX~~  
HOBOKEN, N.J.

FROM: Chief, Graves Registration Service, Q. M. C.  
To: Mrs. Mary Broderick, 265 Roxbury St., Roxbury, Mass.  
SUBJECT: Remains of Pvt. William J. Broderick, #1692965, Co. B, 65th Inf.

The records of this office show that ~~no request has been made~~ **no request has been made** for the disposition of his remains.

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

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

By authority of the Quartermaster General.

CHARLES C. PIERCE,  
Major, U. S. A.

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

NAME OF—	NO. AND STREET.	TOWN.	STATE.
<b>Was soldier married?</b>			
Soldier's widow			
Soldier's children. (Name oldest first.)	1		
	2		
	3		
Father			
Mother			
Brothers. (Name oldest first.)	1		
	2		
	3		
Sisters. (Name oldest first.)	1		
	2		
	3		

Date

Signature

Address

Relationship

IMPORTANT.—CAREFULLY read instructions before filling out this paper.



Address \_\_\_\_\_, 1920.

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

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

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

Signature \_\_\_\_\_

### INSTRUCTIONS FOR FILLING OUT.

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

3-7860

CIVILIAN REGISTRATION SERVICE

OFFICE OF THE GOVERNMENT GENERAL OF THE UNITED STATES

NAVY DEPARTMENT

(HONORARY)  
SPECIAL AGENT  
C. H. S. ROOM NO. 120

6-10-11



## COMPILATION OF DISPOSITION OF REMAINS DATA

## I. LOCATION INDEX CARD:

(a) Name BRODERICK, William J. Ser. No. 1693965 } TYP vbb  
 (b) Rank Private Organization Co. B, 65th Infantry  
 (c) Date of death 10-29-18 Cause of death Broncho pneumonia & Gastro Enteritis W.B.

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

(a) Grave No. 333 Row -- Plot -- Sect. -- TYP vbb  
 (b) Emerg. Address Mrs. Mary Broderick (mother) 265 Roxbury St., Roxbury, Mass. CKR W.B.

## III. Files of soldiers dying from contagious diseases

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

No card in file, no request for disposition  
(H.S. 11-23-20)

V. Following advice forwarded to Europe by (cable on 192  
 (Letter of transmittal on 192  
NOV 17 1920)

**PARAGRAPH 2 - NOT TO BE RETURNED** (X.S.)

VI. Form 115 forwarded to G.R.S. Hoboken, N.J. DEC 18 1920 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. 6-15- 1921

COUNTRY

CEMETERY NO.

SHEET NO.

G.R.S. FORM 115-A  
August , 1920

S-666/MB FRANCE

6

70

MB12-16-20



## REPORT OF DISINTERMENT AND REBURIAL

Place Bazoilles Cem. #6Date 1-29-211. REMAINS OF BRODERICK, William J.SERIAL NUMBER 1693965RANK Pvt.ORGANIZATION Co.B. 65 th. Inf.2. Disinterred (date): 1-29-21

From (give complete location):

Grave 333Cem. #6By: Group 5Unit Section 83. Reburied (date): 1-29-21

In (give complete location):

Grave 400Cem. #6By: Group 5Unit Section 8Pine box and blanket

Nature of reburial

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

Army uniform and pine box. Badly decomposed. Features not recognizable5. (a) Identification tags: Buried with body? YesOn grave marker? Yes.

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

Complete hospital record found in bottle, buried with body

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

(a) Height (actual measurement) 5 ft. 7 in.(b) Weight (estimated) 145 lbs.(c) Hair—Color Apparently dark brownQuantity ConsiderableCharacteristics Straight(d) Hair on face—Color None visible

Location

Quantity

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

missing parts) None

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

G.D. Dabney

Checker

None

7. Disinterment supervised by

R.G. Richard 2nd. Lt. Q.M.C.Approved J. Gerald Cole 1st. Lt. C.A.C.

Inspector

(Title) Master of Section #8

8. Reburial supervised by

R.G. Richard 2nd. Lt. Q.M.C.Approved J. Gerald Cole 1st. Lt. C.A.C.

Inspector

(Title) Master of Section #8













# 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.

<b>MISSING TEETH</b> .....	All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus:		
<b>CROWNED TEETH</b> .....	Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus:		
<b>BRIDGE WORK</b> .....	Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:		
<b>FILLINGS</b> .....	Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus:		
<b>CARIES (CAVITIES)</b> .....	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."

3-7832

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.



6-4/21/21

March 25, 1921

File No. 295.8 Cem. Div. Cor. Br.  
(BRODERICK, William J.)

Mrs. Mary Broderick,  
265 Roxbury St.,  
Roxbury, Mass.

Dear Madam:-

Kindly inform this office at your earliest convenience whether or not the late William J. Broderick, Private, Serial No. 1693965, Co. B. 65th. Infantry is survived by widow, children or father and if so, furnish the name and address of each.

This information is desired in order that the Department may be assured that the proper person to determine the disposition of remains of the late soldier is given an opportunity of expressing his or her wishes.

If the late soldier is not survived by any of the above mentioned relatives, please state whether you desire the body left in France in a permanent American Cemetery, returned to the United States and shipped to you for burial, or interred in the National Cemetery at Arlington, Virginia.

The Department desires to convey to you assurance of sympathy in your bereavement.

Your early reply will be greatly appreciated.

By authority of the Quartermaster General:

R. E. SHANNON,  
Captain Quartermaster Corps,  
Officer in Charge.

J. F. BUTLER,  
Captain Infantry

By-

Mailed - O.P.D.  
MAR 26 1921

RECEIVED

*Drum*



49386

1. G. R. S. Form No. 1. 1690165 Hq. G. R. S. File

2. Soldier's No.

3. BRODERICK WILLIAM J.

Surname (in block letters) First Name and Initials

4. Ptl. B. 58 Inf.

Rank

Company

Regt. or Corps

5. Oct. 29-18.

Date of Death

Cause, if known

6. American Hill 6.

Date of Burial

Cemetery

7. BAZOILLES

Town or Commune

(in block letters)

Department

8. 333

Grave No.

Plot No. or Letter

9. Name Peg? X Cross? X Headboard? Bottle? X

Check Method of Marking

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

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

12. Map reference, if interment is outside of cemetery

13. Give name of Chaplain or Burial Officer

Signed

Albert Burns

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







49382  
**GRAVE LOCATION BLANK**

LOCATION OF THE GRAVE OF

... **Broderick** ..... **1695965** ..... **William J.** .....  
(Surname.) (Number.) (First Name and Initials.)

... **Private** ..... **Co, B, 65th Inf** .....  
(Rank.) (Organization.)

DATE OF BURIAL ..... **Oct. 30th 1918.** .....

PLACE OF BURIAL .....

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

... **American E.F. Cemetery No. 6** .....

... **Bazailles-sur-Meuse, plan of** .....

... **Aug. 29th, 1918.** .....

GRAVE NUMBER ..... **333** .....

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

Headboard? ----- Bottle? ... **yes** .....

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:

**Lomesh E. Park 1st Lt Q MC** .....  
(Signature and Rank of Reporting Officer.)

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



CEMETERIAL DIVISION  
REGISTRATION SECTION

October 14th 1921

FILE

MEMO FOR:

Cards Department.

1.

CASE OF:

Co. B 65th Inf.

ORGANIZATION (Old)

BRODERICK 1693965 William J. Pvt.

(Name)

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

## ORGANIZATION (New)

FILE NO.

SURNAME

SERIAL NUMBER

FIRST NAME AND INITIALS

RANK

DATE OF DEATH

CAUSE OF DEATH

	Date	Place	F-1A No.
Orig.			D-
1st Reb.			D-
2nd Reb.	1/29/21	6	D-30259
3rd Reb.			D-

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

BY: Miss Lannon

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

Corrections made  
on Organization  
File Card:

By 7/19/22  
S/3324/IMI.



ADDRESS REPLY TO

Division  
DIRECTOR OF STORAGE  
MUNITIONS BUILDING

WAR DEPARTMENT  
PURCHASE, STORAGE, AND TRAFFIC DIVISION  
OFFICE OF THE DIRECTOR OF PURCHASE AND STORAGE  
WASHINGTON

No:

From:

To:

Subject: