

138

To The A. G. O.

G.R.S. Form #114-B

JAN 7 - 1926

1980

FULL NAME ..... BRUSSI, Antonio

RANK..... Private ..... SERIAL..... 550945

DIVISION & ORGANIZATION ..... Company F, 38th Infantry

DATE OF DEATH..... July 15, 1918

STATE FROM WHICH HE CAME..... N.J.

MEDALS OR DECORATIONS AWARDED.

no record.

Date	Grave	Row	Block
	44	15	B

608

Cemetery

2 A.G.O.  
 JAN 7 1926  
 WORLD WAR DIV.

Major General,  
 The Adjutant General,  
 By H 1-9-26

AUDITED BK  
 FOR 7-28-24

C 45244

Rec'd World War Div

MAR 12 1928

23/306/ARK

1926

U.S. G. FORM 100-3

FULL NAME

HOME

RELIGION & ORGANIZATION

DATE OF DEATH

STATE FROM WHICH HE CAME

REMARKS OR DECORATIONS AWARDED

FINAL GRAVE LOCATION

12  
 11  
 10  
 9  
 8  
 7  
 6  
 5  
 4  
 3  
 2  
 1

**JAN 12 26**  
**M. & R. BRANCH**  
**O. O. M. G.**

1926

NRRLT 1 2/10

# GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

*Brussi*  
*Antonio* 550945 *Brussi*  
(Surname.) (Number.) (First Name and Initials.)

(Rank.) (Organization.)

DATE OF BURIAL... *26 July 1918*

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

*N. 2 A. July 15, 18*  
*C. C. 54*

Co. F. 38th Inf.

*3*

GRAVE NUMBER *Condie en Brui* Pvt 550945

HOW MARKED: Name Peg?  Cross?

Headboard?  Bottle?  *Co. - Pvt. 550945*

### 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:

*aw him after he was  
ound, about 2 o'clock  
ine gun bullets in  
right where he had  
He was a short,  
alk I told  
the last  
ater in the  
illage of  
No. 207*

REPORTED BY:

*Milton R. Barclay 1st Lt. 4th Inf. U.S.A.*  
(Signature and Rank of Reporting Officer.)

*NJ  
am. - PFC. 550913  
38th. Inf.  
N. J.*

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

S.V.

IB.

Co. F. 38th Inf.

BRUSSI Antonio Pvt 550945.

3

Missing in action July 15th/18.

"Pvt Antonio Brucsic came from Jersey City, NJ. I saw him after he was killed at Chateau Thierry, July 15th, lying on the ground, about 2 o'clock in the afternoon. He had been killed by three machine gun bullets in head and chest. I saw his grave about a week later right where he had died. His tag was in a bottle with about 14 others. He was a short, heavy set fellow, dark complected."

Informant : MONOCCO Dominick PFC 550906.  
Hosp : BH 65.  
Co : F 38th Inf.  
Home : 85 West 21st St Bayonne, NJ.  
March / 20/19.

Searcher : Beulah Whitney .

S.V.

8-A

REGISTERED : BELTAN MICHIEL

NUMBER / 50/18

HOME : 82 Main St of Belton Mich

CO : E 38th Inf

NOSE : BN 22

INFORMANT : MONOCO DOMINIK BEO 220000

Private Antonio Brusci, 550945, Co. F. 38th. Inf. was wounded by machine gun fire on the morning of the 15th of July 1918, about 8:00 A.M. he was hit in the arm and neck. He called for help and I went over and removed his equipment, I saw that he was badly wounded but was able to walk I told him to go back to the first aid station, this was the last seen of Private Brusci, until he was found dead later in the day. He was buried about 800 yards east of the village of Moulins, France in an orchard at the base of hill No. 207 grave marked with a cross.

Private Brusci in action July 15th 1918

BRUSCI Antonio Pvt 550945

Co. F. 38th. Inf.  
3rd. Division.

BRUSCI, Antonio.-Pvt.550945

Private Antonio Brusci, 550945, Co. F. 38th. Inf. was wounded by machine gun fire on the morning of the 15th of July 1918, about 8:00 A.M. he was hit in the arm and neck. He called for help and I went over and removed his equipment, I saw that he was badly wounded but was able to walk I told him to go back to the first aid station, this was the last seen of Private Brusci, until he was found dead later in the day. He was buried about 800 yards east of the village of Moulins, France in an orchard at the base of hill No. 207 grave marked with a cross.

Informant: Perkel, Abraham.-PFC.550913  
Co. F. 38th. Inf.

Home : 1204 Summit Ave.  
Jersey City N. J.

Signed : Abraham Perkel.

G.R.S. FORM NO. 16.

Place Seringes (Aisne)

Date June 6, 19

REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name BRUSSI, Antonio  
~~Bruce Antonio~~

Number: 550945

Rank: Pvt/

Organization: U.S. Inf.

Disinterment and Reburial made by Group

Unit 304

Disinterred (Date) June 6.19 From: (Give complete location)

Grave #<sup>18</sup>8 Cemetery #597

Reburied (Date) June 6.19 in: (Give complete location)

Grave #<sup>42</sup>608 Section K. Plot. #1. Cemetery #608 Seringes et Nesles (Aisne)

Map #33 Soissons. SE. 275.4N-195.25E

608

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

Buried 4 feet deep--- Body badly decomposed.

Was one identification tag found upon the body? None--One on cross.

What other means of identification were found upon the body? None

**CONFIRMED** No. 11814

Note:

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

Supervised by: F. Davidson

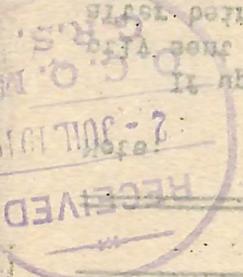
1st. Lt. Oscar W. Forsberg

C.O. Group \_\_\_\_\_ Unit 304

Received by: J. Johnson

Received by: M. Johnson

It is hereby certified that the above named person is a member of the Order of the Sons of the American Revolution and is entitled to the same rights and privileges as other members of the Order.



That other means of identification were found upon the body: none

and one identification tag found upon the body: none--one on shoes.

There is no record of any other identification tags found upon the body: none

Date of death: 10-15-45  
Place of death: (State complete location)  
Date: 9-18-45

Date of birth: 1-1-1900  
Place of birth: (State complete location)

Signature and name of member: J. Johnson

Name: J. Johnson

Address: 1234 Main St, City, State

Number of: 1

OFFICE OF DISKIMINENT AND REVENUE

Date: 10-15-45

Place: (State complete location)

C.O. No. 1000



Place CTY. 608.

Date 4.23.21

# REPORT OF DISINTERMENT AND REBURIAL

1. REMAINS OF BRUSSI, ANTONIO SERIAL NUMBER 550945

RANK PVT. ORGANIZATION CO. F. 38 TH. INF.

2. Disinterred (date): 4.23.21 From (give complete location): GR. 42. SEC. K. PT. 1.

By: Group FOSTER'S Unit FIELD SECTION # 7

3. Reburied (date): 4.23.21 In (give complete location): GR. 42. SECTION K. PT. 1.

By: Group FOSTER'S Unit FIELD SECTION # 7 Nature of reburial PINE BOX & BURLAP

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

BADLY DECOMPOSED FEATURES UNRECOGNIZABLE

UNIFORM & BURLAP

5. (a) Identification tags: Buried with body? NO On grave marker? YES

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

NONE

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

(a) Height (actual measurement) IMPOSSIBLE TO DETERMINE

(b) Weight (estimated) IMPOSSIBLE TO DETERMINE

(c) Hair—Color IMPOSSIBLE TO DETERMINE

Quantity IMPOSSIBLE TO DETERMINE

Characteristics IMPOSSIBLE TO DETERMINE

(d) Hair on face—Color IMPOSSIBLE TO DETERMINE

Location IMPOSSIBLE TO DETERMINE

Quantity IMPOSSIBLE TO DETERMINE

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

missing parts) IMPOSSIBLE TO DETERMINE

(f) Wounds or missing parts (received at time of casualty) 2, 8, 9, 15, 25 to 27 incl., 29, mis. a. d.; 1, 16, 17, 32, undev; 19, cavity; 20, ext.

Fracture of both hip bones, and left arm below elbow.

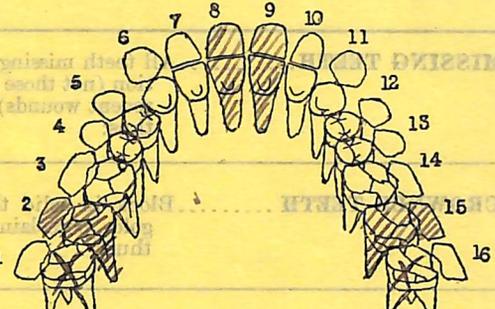
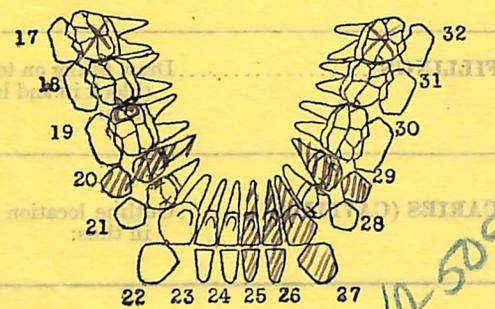


Diagram represents the mouth wide open.



10-50999

7. Disinterment supervised by N. N. Foster Approved: R. S. Williams  
H. H. FOSTER, SUP. EMB. (Title) R. S. WILLIAMS, 1st Lt. QMC.

8. Reburial supervised by N. N. Foster Approved: R. S. Williams  
H. H. FOSTER, SUP. EMB. (Title) R. S. WILLIAMS, 1st Lt. QMC.

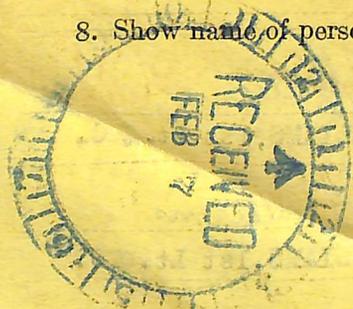
**INSTRUCTIONS FOR THE PROPER COMPLETION OF G. R. S. FORM NO. 16-A**

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.

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



CODE SLIP

HEADING	SUB-HEADING	NO. OF COILS	CODE
NAME <i>BRUSSI</i>	<i>Bru</i>	3	<i>2812</i>
<i>Antonio</i>	CEMETERY <i>608</i>	1	<i>2</i>
BURIED	GRAVE <i>9</i>	2	<i>09</i>
	ROW <i>15</i>	2	<i>15</i>
	BLOCK <i>B</i>	1	<i>2</i>
STATE	<i>49</i>	2	<i>35</i>
RANK	<i>Pvt</i>	1	<i>2</i>
DIVISION	<i>3</i>	2	<i>03</i>
ORGANIZATION	<i>38</i>	3	<i>038</i>
ARM	<i>Inf</i>	1	<i>1</i>
MARITAL	<i>No</i>	1	<i>2</i>
NAME <i>Bruzzi</i>	<i>Bru</i>	3	<i>2812</i>
<i>Maria Rosa</i>	STATE	2	
RESIDENCE <i>Romoin</i>	COUNTY	2	
<i>all rel. foreign</i>	CITY	3	
RELATION	<i>mother</i>	1	<i>1</i>
OTHER		1	
ELIGIBILITY	<i>Foreign</i>	1	<i>4</i>
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE <i>Country</i>	<i>Italy</i>	1	<i>01</i>

AUDITED

JAN 11 1938

RAM

Elm  
29/514

*24*

WAR DEPARTMENT  
 OFFICE OF THE QUARTERMASTER GENERAL  
 WASHINGTON

DATE 8/17/31

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
<u>B russi, Antonio</u>	<u>Pvt.</u>	<u>550945</u>	<u>Co F 38th Inf</u>	<u>7/15/18</u>

STATE	CTY. NO.	GRAVE	ROW	BLOCK
	<u>608</u>	<u>44</u>	<u>15</u>	<u>B</u>

*inst copy*

Check relationship

Living - Deceased

NAME  
 AND  
 ADDRESS

~~MOTHER~~  
~~STEPMOTHER (For the year prior to commencement of service)~~  
~~MOTHER THRU ADOPTION (For the year prior to commencement of service)~~  
~~MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)~~  
~~WIDOW (Who has not remarried)~~

*✓ ✓*  
*act rel foreign*  
*12/21/32*  
*(m)*  
Maria Rosa Demoro in  
Brizzi  
via Giardinelli 10  
Cellanova  
Prov. di Reggio  
Calabria  
Italy

*Single man*

Veterans Bureau Claim Number C 45244  
 29/156



1931

CO. 5 2000 144

20000

1000

2 1000 1000 0

1000  
1000  
1000

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

DATE 7/20/29

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
BRUSSI, Antonio	Pvt.	550945	N. J. Co. F. 38th Inf. 3rd Div.	7/15/18

STATE	CTY. NO.	GRAVE	ROF	BLOCK
	608	44	15	B

NAME AND ADDRESS	Check relationship	Living - Deceased		C 45244 712713044
		Living	Deceased	
	MOTHER ✓	: ✓ :	:	
	STEPMOTHER (For the year prior to commencement of service)	: :	:	Maria Rosa Demoro in Bruzzi, Via Giardinelli 10, Cittanora, Prov. di Reggio Calabria, Italy.
	MOTHER THRU ADOPTION (For the year prior to commencement of service)	: :	:	
	MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	: :	:	
	WIDOW (Who has not remarried)	: :	:	

Veterans Bureau Claim Number \_\_\_\_\_

29/156



Foreign

B QM 293 A-C

Brussi, Antonio

February 13, 1929.

Mr. Giuseppe Brussi fu Antonino,  
Via Giardinelli 10, Cittanova,  
N. Prov. di Reggio,  
Calabria, Italy.

Dear Sir:

In order to conform to the plans for beautification of the permanent American Military Cemeteries in Europe it has been necessary to make a re-arrangement of the graves in these Cemeteries, which may be considered as permanent for all time.

The enclosed card gives the final resting place of your son, the late Antonio Brussi, Private, Company F, 38th Infantry.

For The Quartermaster General,

Very truly yours,

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

1 Incl.  
Record card.

DISPATCHED  
RECEIVED  
Q. M. G. M. C. S. 13 FEB 1929



auth V.B. 2-13-29

el. 45244 -

Giuseppe Buzzi fu  
antonino,

Via Giardinelli 10, Cittanova

E. Prov. di Reggio,

Calabria, Italy

Shoulder signs name in  
V.B. records as Bussi

Relative's signature Buzzi.

To be prepared in triplicate.

DATE February 8, 1928

## 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 BRUSSI, Antonio *79* 10. Name \_\_\_\_\_  
 2. No. 550945 *Block B* 11. No. \_\_\_\_\_  
 3. Rank Pvt. 12. Rank \_\_\_\_\_  
 4. Org. Co. F, 38th Inf. *3rd Div* 13. Org. \_\_\_\_\_  
 5. D.D. July 15, 1918 14. (a) D.D. \_\_\_\_\_  
 6. C.D. KIA. (b) D.B. \_\_\_\_\_

Discrepancy found upon disinterment

7. Grave No. 44 Sec. \_\_\_\_\_ 15. Grave No. \_\_\_\_\_ Sec. \_\_\_\_\_  
 8. Plot Block B Row 15 16. Plot \_\_\_\_\_ Row \_\_\_\_\_  
 9. \_\_\_\_\_ 17. \_\_\_\_\_  
 18. Cemetery Oise-Aisne 19. Commune or town Seringes-et-Nesles  
 20. Dept. or County Aisne 21. Country France  
 22. G.R.S. Hdqrs. Code No. 608  
 23. Disinterred (Date) February 8, 1928 By P.D. Woodman  
 24. Inscription on grave marker:  
 Name BRUSSI, Antonio Serial No. 550945  
 Rank Pvt. Organization Co. F, 38th Inf.  
 25. Was identification disc found on grave marker? \_\_\_\_\_ On body? \_\_\_\_\_

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).  
 \_\_\_\_\_  
 27. Condition of body \_\_\_\_\_  
 28. Nature of burial Pine box and burlap  
 29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above?  
 \_\_\_\_\_  
 30. Body prepared and placed in casket: Date February 8, 1928 By P.D. Woodman  
 31. Casket sealed by P.D. Woodman

Signature of Embalmer, (Supervisor)

P.D. Woodman

SHIPMENT. (Show actual marking of box.) Box No. \_\_\_\_\_

32. Designation of body:

Name BRUSSI, Antonio Serial No. 550945

Rank Pvt. Organization Co. F, 38th Inf.

33. Consigned to:

Name of Permanent Cemetery Oise-Aisne, Seringes-et-Nesles, Aisne

34. Casket boxed and marked (Date) February 8, 1928 By Charles E. Spahn

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 Charles E. Spahn  
Charles E. Spahn

36. Remarks \_\_\_\_\_

37. Shipped from point of Operation: (Date) \_\_\_\_\_

To point of Concentration \_\_\_\_\_

Convoyer \_\_\_\_\_ (Name)  
Signature Shipping Officer \_\_\_\_\_

38. Received at Railhead or Point of Concentration: Date \_\_\_\_\_

By G.R.S. Representative \_\_\_\_\_

39. Shipped from Railhead or Point of Concentration: Date \_\_\_\_\_

To Permanent Cemetery \_\_\_\_\_

Convoyer \_\_\_\_\_ (Name)  
Signature Shipping Officer \_\_\_\_\_

40. Received: Date \_\_\_\_\_

G.R.S. Representative \_\_\_\_\_

41. Reinterred February 8, 1928, Oise-Aisne American Cty.

42. Grave No. 9 (Date) \_\_\_\_\_ Section \_\_\_\_\_

43. Plot Block B Row 15

G.R.S. Representative William E. Moore  
William E. Moore, Superintendent.

# REPORT OF DISINTERMENT AND REBURIAL

Place Oise-Aisne Cty. 608

Date February 8, 1928.

1. REMAINS OF BRUSSI, Antonio SERIAL NUMBER 550945

RANK Private ORGANIZATION Co. F. 38th Inf.

2. Disinterred (date) : February 8, 1928 From (give complete location) :

Grave 44, Block B, Row 15

By : Group Cty. Unit \_\_\_\_\_

3. Reburied (date) February 8, 1928 In (give complete location) :

Grave 9, Block B, Row 15

By : Group Cty. Unit \_\_\_\_\_ Nature of reburial Metallic casket

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

Pine box and burlap

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

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

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

(a) Height (actual measurement) \_\_\_\_\_

(b) Weight (estimated) \_\_\_\_\_

(c) Hair—Color \_\_\_\_\_

Quantity \_\_\_\_\_

Characteristics \_\_\_\_\_

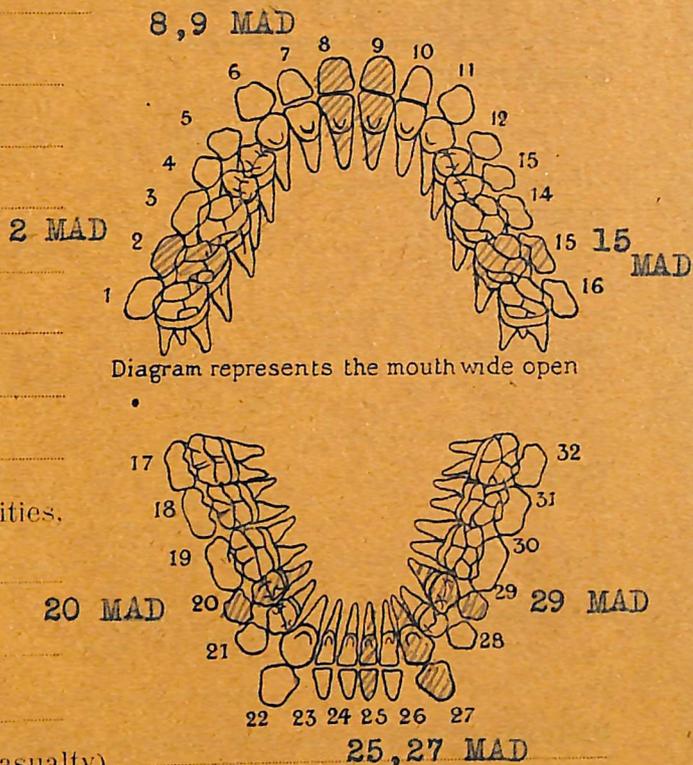
(d) Hair on face—Color \_\_\_\_\_

Location \_\_\_\_\_

Quantity \_\_\_\_\_

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

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



7. Disinterment supervised by W. Woodman

Approved : \_\_\_\_\_

(Title) \_\_\_\_\_

8. Reburial supervised by Charles E. Spahn

Approved : \_\_\_\_\_

(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.

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<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:	
<b>DENTURES (PLATES)</b>	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.

QM 293 A-C

BRUSSI, Antonio - Pvt.

November 2, 1925

Mr. Giuseppe Bruzzi,  
10th Giardinelli,  
Cittanova, Calabria, Italy.

Dear Sir:

The Quartermaster General desires to invite your attention to the inclosed card which gives the permanent cemetery location of the soldier's grave in which you are interested.

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

Please be assured that in effecting removal of the dead, the utmost reverential care was exercised and more than willingly accorded by those who performed this sacred duty. For the future, these graves will be perpetually maintained by the Government in a manner befitting the last resting place of our heroes.

Very truly yours,

L. W. REDINGTON,  
Major, Q.M.C.,  
Assistant.

1-Incl.  
Record card.

RD

115



COMPILATION OF DISPOSITION OF REMAINS DATA

File # 17226

I. LOCATION INDEX CARD:

(a) Name BRUS SI, Antonio Ser. No. 550945  
 (b) Rank Pvt. Organization Co. F, 38th Inf. } TYP DB  
 (c) Date of death 7-15-18 (d) Cause of death K/A } CKR. SH

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

(a) Grave No. 42 Row - Plot 1 Sec. K TYP. DB  
 (b) Emerg. Address Mr. Joe August, (Friend) 45 Wright Ave. Jersey City.  
N.J. (over)  
 III. Files of soldiers dying from contagious diseases -- CKR. SH

*no card in file 12-13-20 mfs*

IV. A. G. O. DISPOSITION CARD:

Date of receipt \_\_\_\_\_  
 (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 ca*

Examiner's Initials mfs Date 12-13, 1920.

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

*No request for disposition*

(a) Cancellation memos referred to? Yes, E.M.  
 Examiner's Initials E.M. Date 12/13, 1920.

COUNTRY **FRANCE**

CEMETERY No. 608

SHEET No. 383

Make Form No. 114

CARDED

*Rev. 5-10-21 60*

FEB 5 1921 - *ap*

FORM 115 A COMPLETED

*check*

GENERAL DIVISION

VII. G. R. S. Form No. 114 made \_\_\_\_\_, 1920.

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

VIII. PENAL ACTION:

Following advice forwarded to Europe by { cable on \_\_\_\_\_, letter on **JAN 15 1921**, 1920

FEB 8 1921

RECEIVED.  
MAY 3 1921  
GENERAL DIVISION  
OVERSEAS ROBERT S. S. S.

Par. 2 Not to be returned. (P. S.)

IX.

CORRECTIONS

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

X. SUSPENSION REMARKS:

*B. A. W. P. — Mr Giuseppe Bruggi (Father)  
10th Giardinelli, Cittanova, Calabria,  
Italy  
2-4-21*

COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

File # 17226

(a) Name ..... Ser. No. ....  
 (b) Rank **BRUS SI, Antonio** Organization **550945** TYP .....  
 (c) Date of death **Pvt.** Cause of death **Co. F, 38th Inf.** DB *LH*

7-15-18

K/A

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

(a) Grave No. .... Row ..... Plot ..... Sect. .... TYP .....  
 (b) Emerg. Address **42** ..... **1** ..... **K** ..... DB *(over)*

III. Files of soldiers dying from contagious diseases **Mr. Joe August, (Friend) 45 Wright Ave. Jersey City, N.J.** *LH*

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

*No A.G.O. card in file*  
*No correspondence*  
*No request for disposition (L.S. 1/17/21)*

V. Following advice forwarded to Europe by (cable on ..... 192  
 (Letter of transmittal on **JAN. 15 1921**)

**Par. 2 Not to be returned. (L.S.)**

**FEB 8 - 1921**

VI. Form 115 forwarded to G.R.S.Hoboken, N.J. .... 192

VII. SUPPLEMENTARY REQUESTS

Date of and Source	Relationship and name	Desires	Action taken
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

VIII. Form 115 received from G.R.S. Hoboken, N.J. **5/3** 192 **11**

COUNTRY

CEMETERY NO.

SHEET NO.

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

6-666/AB

FRANCE

608

383

FEB 5 1921

*ap*

B.A.N.P. — Mr. Giuseppe Bruzzi (Father)  
10th. Giordinelli, Cittanova,  
Italy  
2-4-21 ©

FEB 8 - 1921

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

CEMETERIAL DIVISION

WASHINGTON  
Hoboken, N. J.

FEB 12 1921

FROM: Chief, Cemeterial Division, O. Q. M. G.

To: Mr. Joe August, 45 Wright Ave., Jersey City, N. J.

SUBJECT: Remains of Pvt. Antonio Brussi, Ser. No. 550945

Co. F, 38th Inf.

The records of this office show that you have requested that the body of the above named ~~x~~ 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 next of kin may choose between, (1) return of the body to any address in the United States; (2) interment in the National Cemetery, Arlington, Va., or any other National Cemetery; or (3) body to remain in Europe.

By authority of the Quartermaster General.

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

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 or not these relatives are STILL LIVING.

Was soldier married? .....

NAME OF—	NO. AND STREET.	TOWN.	STATE.
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 .....

Address \_\_\_\_\_ Relationship \_\_\_\_\_, 192  
 Date \_\_\_\_\_ Signature \_\_\_\_\_  
 I, the undersigned, am the \_\_\_\_\_ and nearest living next of kin 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 instructions for the disposition of a body are not received from the next of kin 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 next of kin in the spaces provided therefor on the other side of this sheet.
5. If there are not the 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 next of kin, please ask the nearest next of kin, if living near you, to fill out this paper.
7. If YOU are not the nearest living next of kin 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.

NOTE.—INSTRUCTIONS FOR THE DISPOSITION OF REMAINS will be issued by this office upon the properly executed authority of the legal next of kin in each case. The widow is the first person having disposition of the remains of her husband. Should there be no widow or children, the father and, in turn (upon his decease), the mother, is the proper authority. The brothers, in order of seniority, and then the sisters in order of seniority, if there are no brothers, rank next in authority to decide. Under an opinion rendered by the Judge Advocate General of the Army, if a widow has remarried she forfeits her right, and the next of kin as given above will make decision.

WAR DEPARTMENT

(BY OTHER MAIL)  
 SHIP TO  
 G. B. S. BOX NO. 150

17274  
**GRAVE LOCATION BLANK**

LOCATION OF THE GRAVE OF

*Antonio 550945 Brussi*

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

(Rank.)

(Organization.)

DATE OF BURIAL *26 July 1918*

PLACE OF BURIAL *near Mezz*

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

GRAVE NUMBER *Condre en Brie <sup>map</sup>*

HOW MARKED: Name Peg?  Cross?

Headboard?  Bottle?

IDENTIFICATION TAGS:

Was one buried with body? *yes*

Was one fastened to name peg or stake used as a grave marker? *yes*

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

CMME. \_\_\_\_\_

(C-\_\_\_\_)SHT. \_\_\_\_\_ COORD \_\_\_\_\_

REPORTED BY: *Milton R. Barclay 1st Lt. 4th Inf. U.S.A.*  
(Signature and Rank of Reporting Officer.)

This portion to be sent to Chief of Graves Registration Service.  
# 2 AOU Reg

550945

Name Victoria Rossi

Rank 17905 Co. 17226 {Corps Regt.}

Date of Death (Cause)

Place Came - Mezy - 49 N E

Cause C-79-E 191.35 N 260.4

Date of Burial 7/26/18

Grave No. C-79

Cemetery near Mezy

Identified by {Tag Papers Clothing} C-143

List of Effects CMME. COORD  
(C- )SHT.

Field Record Made by Group # 2  
Company 303 Graves Registration Service

For additional data use reverse side  
San Luis Stg.  
13 AUG R. GU

1726

Brussi Antonio #550945

k/a 7/15-18/1918.

Cmme Mezy (Aisne)

c 79 Sht 49 NE Coord E 193.2 (app  
N 259.7)

Hill 207- 800 yds E. Moullins.

marked with cross.

B 849  
B 843

~~#~~  
17226

RBS  
1114

550945

Name..... *Brussi, Antonio* .....

Rank..... Co..... (Corps)  
(Regt) .....

Date of Death..... *July 1918* .....

Place..... *Modena* .....

Cause..... *K. in A* .....

.....  
Date of Burial..... *Reinterred and reburied*  
*10/3/18* .....

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

Cemetery..... *Mortino (Aisne)* .....

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

List of Effects.....

597

Field Record Made by..... **GROUP N° 2**  
**Unit 303. G. R. S.** .....

Company..... Graves Registration Service

For additional data use reverse side



CORRECTION

17226

File No. ....

Brussi, 550945, Antonio

Date of Death \_\_\_\_\_

File No \_\_\_\_\_

Date Buried 7/26/18

Cemetery On hillslope between Moulins and Varennes. South of Main road. Together with approx. 40 other graves.

Grave No: \_\_\_\_\_ Sect: \_\_\_\_\_

Commune (No c-99) Courtemont-Varennes

Dept Aisne Sheet 49N.E.

Coordinates E193. - N260.65

Remarks: Coreection in location of grav

Sketch No: \_\_\_\_\_

HP \_\_\_\_\_ CROSS \_\_\_\_\_ HD BD \_\_\_\_\_ BTTL \_\_\_\_\_

Ident. Tag \_\_\_\_\_ on Gr. mkr. \_\_\_\_\_ b.w.b. \_\_\_\_\_

Authority: Letter fr Lieut Chase

August 18/1918

B.9

*Copy*

Harlow C. W.

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

**FILE**

17226

NAME OF DECEASED SOLDIER

CEMETERY NO.

DATE

Brussi, Antonio, Pvt.

608

- 383

Dec. 14, 1920

SERIAL NUMBER

ORGANIZATION

550945

Co. F. 38th Inf.

Date of death - 7-15-18

Adjustment Made

FEB 12 1921

WAR RISK INSURANCE INFORMATION

*Original attached to #115*

DATE

2-4-21

File No. 17226

NAME OF BENEFICIARY

RELATIONSHIP

Mrs Giuseppe Bruzzi

Father

Address

10th Giardinelli, Cittanova, Calabria, Italy

S-709/MB

*A*

*J*