

8721/9

fei
G.R.S. Form #114 B

99

Mother refers to name as Julius A. Budde

1670

DATE

checked 2/15/27

1. NAME ^EBUDDS, Julius ^A SERIAL No. 2815327 ✓
 RANK Pvt. ORGANIZATION Co. D 355th Inf. ✓
 & DIVISION
 GRAVE LOCATION American E. F. Cty., Langres, Haute-Marne 13
 CTY. NAME NUMBER

164

GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 164 LANGRES (Haute-Marne),
 GRAVE COMMUNE DEPT.

COORDINATES E. 320.26 N.121.82

CONCENTRATED TO March 24, 1921, 164

DATE GRAVE ROW PLOT

A.E.F. Cem. Langres (Haute-Marne), 13

CEMETERY CTY. NUMBER

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

Tag found with body. Partly corroded: reads "JULIUS A. "BUDDS" (From data on form 16-A). No other data.

Subsequent Reburials Not of record
 DATE OF DEATH Sept 24 1918
 DATE GRAVE ROW PLOT CEMETERY

STATE FROM WHICH HE CAME Wis
 MEDALS OR DECORATIONS AWARDED not of rec
 DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR
 W ALTER F. BROWN, CAPT.QMC., Supervisor Area No. 4

3. FINAL GRAVE LOCATION August 19th, 1922. 27 18 B
 DATE GRAVE ROW PLOT
 Block

AUDITED BY
 REC'D
 NOV 2 1923
 M. & R. BRANT
 G. O. M. F.

4
 OCT 28 1925
 WORLD WAR DIV.

St. Mihiel American Cemetery, THIAUCOURT, (M.-et-M.)
 1233 CEMETERY

15 Received A. G. O. OCT 27 1925

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 I6, 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.

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Budde 2915327 Julius
(Surname). (Number). (First Name and Initials).

Pvt. Co. D. 355 Inf.
(Rank). (Organization).

PLACE OF DEATH: *Base Hospital 53*

CAUSE OF DEATH: *Pneumonia*

DATE OF BURIAL: *Sept 25, 1918*

PLACE OF BURIAL: *Cemetery 13*

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

U. S. Army Schools A. P. O. 714

GRAVE NUMBER: *164*

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

Headboard? Bottle?

IDENTIFICATION TAGS:

Was one buried with body? *yes*

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

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

NEAREST RELATIVE: *Clara Yeager*

ADDRESS: *Grand Rapids, Wis.*

RELATIONSHIP:

REPORTED BY: *John A. Harbitt, Chaplain*

Base Hospital 53
(Signature and Rank of Reporting Officer).

This portion to be forwarded to Central Records Office, A. G. O., A. E. F.

REPORT OF DISINTERMENT AND REBURIAL

Place Langres. (Hte-Marne)

Date 3/23/21.

1. REMAINS OF BUDDS, Julia SERIAL NUMBER 2815327

RANK Pvt.

ORGANIZATION Co. D. 355, Inf.

2. Disinterred (date):

3/23/21

From (give complete location):

Gr. No. 164 Cem. 13

By: Group 4

Unit Section 8

3. Reburied (date):

3/24/21

In (give complete location):

Gr. 164. Cem. 13

By: Group 1 E. J. Basch (checker)

Unit Sect. 8.

Nature of reburial Blanket Box.

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

U.S. Uniform, pine box, badly decomposed, features not recognizable.

5. (a) Identification tags: Buried with body? Yes On grave marker? No.

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

Tag on body partly corroded, shows, JULIUS A. "BUDD"

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

(a) Height (actual measurement) 5'7"

(b) Weight (estimated) 140lbs.

(c) Hair—Color Apparently dark brown.

Quantity Medium

Characteristics Straight.

(d) Hair on face—Color None

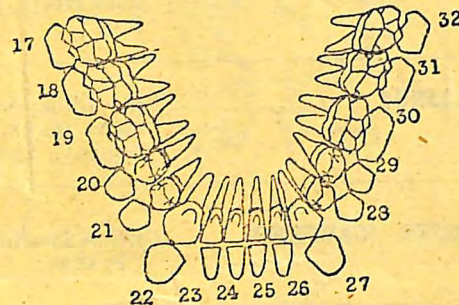
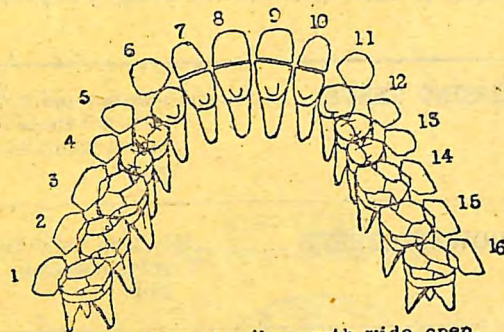
Location ----

Quantity -----

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

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

None



H.S. Parker. Checker.

7. Disinterment supervised by

Approved:

(Title)

8. Reburial supervised by

Approved:

(Title)

Frederic R. Whipple.

1st. Lt. Q.M.C.






D-50809
SAMUEL J. HEIDNER
Major Infantry
C.O., Sec. 8., A. G. R. S.

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



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

✓

CODE SLIP

HEADING	SUB-HEADING	NO. OF COILS	CODE
NAME <i>Budde</i>	<i>Bud</i>	3	<i>2 1 4</i>
<i>Julius A</i>	CEMETERY <i>1233</i>	1	<i>3</i>
BURIED	GRAVE <i>27</i>	2	<i>27</i>
	ROW <i>18</i>	2	<i>18</i>
	BLOCK <i>B</i>	1	<i>2</i>
STATE	<i>Wisc.</i>	2	<i>58</i>
RANK	<i>Private</i>	1	<i>2</i>
DIVISION	<i>89</i>	2	<i>89</i>
ORGANIZATION	<i>353</i>	3	<i>353</i>
ARM	<i>Inf</i>	1	<i>1</i>
MARITAL <i>Sister</i>	<i>No</i>	1	<i>2</i>
NAME <i>Wager</i>		3	<i>517</i>
<i>Mrs Clara</i>	STATE <i>Wisc</i>	2	<i>58</i>
<i>R.D. # 1</i>	COUNTY <i>Win</i>	2	<i>51</i>
<i>Keeper, Wisc</i>	CITY <i>Wisc</i>	3	<i>517</i>
RELATION	<i>Mother</i>	1	<i>1</i>
OTHER		1	<i>3</i>
ELIGIBILITY	<i>Head</i>	1	<i>6</i>
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	<i>af</i>
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE		1	

AUDITED

APR 4 1932

29/514

B. J. M.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Budde Julius A 1233-S

July 7, 1930

Mrs. Clara Yager,
R.D. #1,
Veeper, Wisconsin

Dear Madam:

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:

No his mother is dead

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Budde, Julius A.
1233.

Sept. 4, 1929

Mrs. Clara Yager,
R. D. #1,
Vesper, Wisc.

Dear Madam:

The records of this office do not indicate that a reply has been received to our communication dated June 19, 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:

no

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.

no

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

no

For The Quartermaster General,

Very truly yours,

John T. Harris

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



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Budde, Julius A.

June 19, 1929.

Mrs. Clara Tager,
R.D. #1,
Vesper, Wisc.

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 sister of the late Private Julius A. Budde, Co. D, 355th Inf., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, 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,

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

2 incls.
Act of Congress.
Envelope.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Budde Julius A 1233-S

July 7, 1930

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If so, give her name and address:

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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

Budde, Julius A.
1233.

Sept. 4, 1929

Mrs. Clara Yager,
R. D. #1,
Vesper, Wisc.

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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

Budde, Julius A.

June 19, 1929.

Mrs. Chara Yager,
R.D. #1,
Vesper, Wisc.

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".

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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,

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

2 incls.
Act of Congress.
Envelope.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Budde, Julius A

Sister,
Mrs. Clara Yager,
R.D.#1,
Vesper, Wisc.

May 27 , 1929.
C- 61 204

Mother died 6-6-27

Mrs. Lizzie Budde,
Rudolph,
Wisconsin.

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 Julius A. Budde, Co. D, 355th Inf., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, 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 re-married 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.

WAR DEPARTMENT

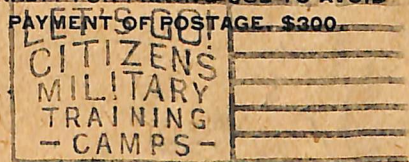


21ST & C STS N.W.
WASHINGTON, D. C.

OFFICIAL BUSINESS

OFFICE OF THE QUARTERMASTER GENERAL

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



Return

*Deceased
Her daughter gets mail
at Vesper Wis*

R.F.



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Budde, Julius A

May 27, 1929.

Mrs. Lizzie Budde,
Rudolph,
Wisconsin.

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 Julius A. Budde, Co. D, 355th Inf., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, 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.

HV

November 26, 1925.

Mrs. Lizzie Budde,
Rudolph,
Wisc.

Dear Madam:

The Quartermaster General desires you to be informed that the permanent grave of **Private Julius A. Budde, Company D, 355th Infantry, is Grave 27, Row 18, Block B, St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, 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. 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.

You are assured in effecting removal of the remains, the utmost care and reverence were exercised and more than willingly accorded by those who performed 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,

R. L. FOSTER
Assistant.

RD

LDF



293 Budde Lizzie

To be prepared in triplicate.

DATE Jan 30 1922

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 BUDDS, Julia^E A.
 2. No. 2815327
 3. Rank Pvt.
 4. Org. Co. D 355th Inf.
 5. D.D. Sept. 24th 1918
 6. C.D. Lobar Pneumonia

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

Discrepancy found upon disinterment

7. Grave No. 164 Sec. _____
 8. Plot _____ Row _____
 9. _____

15. Grave No. _____ Sec. _____
 16. Plot _____ Row _____
 17. None

18. Cemetery American E. F.
 20. Dept. or County Haute-Marne
 22. G.R.S. Hdqrs. Code No. 13

19. Commune or town Langres
 21. Country France

23. Disinterred (Date) Jan 30 1922

By A R Cheney

24. Inscription on grave marker:

Name Budds, Julia
 Rank Pvt

Serial No. 2815327
 Organization Co. D. 355 Inf

25. Was identification disc found on grave marker? yes On body? yes, partly corroded

Glenn C Dorsey
 Signature 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. Bottle containing reburial record found on body

27. Condition of body Badly decomposed, recognition impossible.

28. Nature of burial Uniform, blanket and wooden box.

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? see line 10

30. Body prepared and placed in casket: Date Jan 30 1922 By A R Cheney

31. Casket sealed by A R Cheney

AUDITED BY

Signature of Embalmer, (Supervisor

A R Cheney

5 B 8

SHIPMENT. (Show actual marking of box.) Box No. C-26241

32. Designation of body:

Name Julia BUDDS Serial No. 2815327

Rank Pvt Organization Co. D 355th Inf.

33. Consigned to:

Name of Permanent Cemetery St. Mihiel Amer. #1233, Thiaucourt, M-et-M

34. Casket boxed and marked (Date) Jan 30 1922 By A R Cheney

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, C apt. QMC

36. Remarks Disc on body partly corroded, reading ---lius A Bud--

37. Shipped from point of Operation: (Date) Jan 30 1922

To point of Concentration Chaumont, Ht. M arne

Convoyer Clinton T. Rieten Signature Shipping Officer WALTER F. BROWN

38. Received at Railhead or Point of Concentration: Date Captain, Q.M. Corps, U. S. A

By G.R.S. Representative G. D. GAMBLE

39. Shipped from Railhead or Point of Concentration: Date Captain, Q.M. Corps, U. S. Army

To Permanent Cemetery St. Mihiel (1233) Thiaucourt M et M

Convoyer Michael Plotkin Signature Shipping Officer WALTER F. BROWN

40. Received: Date 23 FEB 1922 Captain, Q.M. Corps, U.S. Army

G.R.S. Representative G. D. GAMBLE, Captain, Q.M.C.,

41. Reinterred August 19, 1922 (Date)

42. Grave No. 27 Section

43. ~~Plot~~ Block B, Row 18

G.R.S. Representative A. E. Dewey, 1st Lt., QMC.

Langres, Ht. Marne

Place

REPORT OF DISINTERMENT AND REBURIAL

Date

Jan 30 1922

1. REMAINS OF

^E BUDDS, Julius ^{us} A.

SERIAL NUMBER

2815327

RANK

Pvt

ORGANIZATION

Co. D. 355 Inf.

2. Disinterred (date):

Jan 30 1922

From (give complete location):

Gr 164

Amer Cem No. 13 Langres H t Marne

By: Group

3

Unit

4

3. Reburied (date):

August 19, 1922

In (give complete location):

Gr.27, Block B, Row 18, Cem.1233

By: Group

Reburial

Unit

Casket & Shipping

Nature of reburial case

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

Uniform and wooden box. Body badly decomposed, recognition impossible.

5. (a) Identification tags: Buried with body?

yes, partly corroded

On grave marker?

yes

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

No effects found. Bottle containing reburial record found on body

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

(a) Height (actual measurement)

Unable to determine

(b) Weigh, (estimated)

Unable to determine

(c) Hair—Color

Unable to determine

Quantity

Unable to determine

Characteristics

Unable to determine

(d) Hair on face—Color

None

Location

None

Quantity

None

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

or missing parts) Unable to determine

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

None

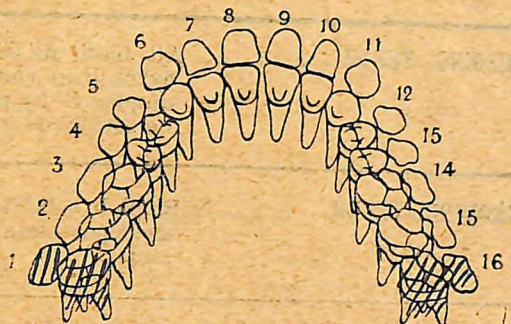
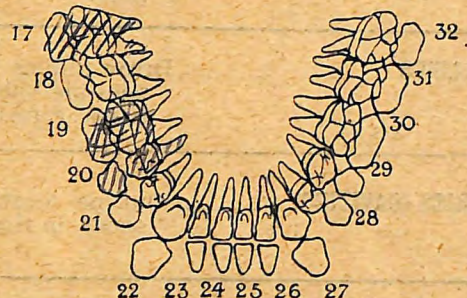


Diagram represents the mouth wide open



NG.1,16,17 MAD.20, Dec.19

7. Disinterment

supervised by

A R Cheney

Approved:

GCD

R L Fair, Capt. MC

(Title)

8. Reburial

Supervised by

H. L. Kramer

Approved:






A. E. Dewey,
1st. Lt., 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 Questions 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.

COMPILATION N/R REQUESTS

I. DATA COMPILATION

A. Location Index Card:-

(1) Name Budde, Julius A. Ser. No. 2815327)
 (2) Rank Pvt. Organization Co. D, 355th Inf.) TYP. ESW
 (3) Date of death 9-24-18) CKR. MEH

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

(4) Cause of death Lobar Pneumonia) TYP. JS
 (5) Grave No. 164 Row ----- Plot ----- Sect. -----) CKR. MEH

5/26/22
 Exhumed for
 concentration
 St. Michel #1233
 macB-6-16-22

II. FILES EXAMINATION

A. Files of soldiers dying from contagious diseases; no card

B. A. G. O. DISPOSITION CARD Date of receipt None

(6) Relationship Mother
 (7) Name Mrs. Lizzie Budde
 (8) Address Rudolph, Wis.
 (9) Desires remains brought to U. S.? Yes
 (10) Desires remains brought to U. S. and interred in National Cemetery at Yes
 (11) If brought back, what shipping instructions? Yes

SEE SUSPENSION REMARKS

AA-4-16-20

C. A. G. O. CORRESPONDENCE Date of communication

(12) Does correspondence change or qualify request as made on A.G.O. card? If so, specify such information. No correspondence.

(13) A. G. O. Files EXAMINED by T.L. (Date) 4-16-20

D. (14) G. R. S Files - Correspondence. (Has reference been made to File No. Cancellation memos. Yes). Does such correspondence, if containing request for disposition, reconcile with that of A. G. O.? (Specify "Yes" or "No".) If "No", give date of communication, the name, address, and relationship and substance of request. MIH

No request for disposition

(15) G. R. S. Files EXAMINED by M.H.E. (Date) 5-4-20

1/19/21, P.L.
Checked
11/27/20

III. FINAL ACTION

A. MEMORANDUM to D. M. O. in E. made (Date) _____

(16) Removal of Remains (within custody of G.R.S.) to _____

(17) Instructions that remains be left undisturbed _____

(18) Typed by _____ Checked by _____ (Date) _____

B. G. R. S. FORM NO. 114 made (Date) _____ 5-4-

(19) Typed by esm Checked by P. F. (Date) _____ 5-4-

C. SUSPENSION REMARKS:

7.6-7-20

Form 120, 6-2-20 from Mrs. Lydia Bualde, mother
nearest of kin, reports that body remains
in Europe. 6/2/20

D. Dispatched (Date) _____ (Let. Trans. No. JAN 5 1921)

PARAGRAPH 2 - NOT TO BE RETURNED

am

Approved by _____

(Date) _____

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

MAY 11 1920

13-21

FROM: Chief, Graves Registration Service, Q.M.C.
TO: Mrs. Lizzie Budde, Rudolph, Wisc.
SUBJECT: Remains of Private Julius A. Budde

Push Answer

The records of this office show that you have requested that his body be returned to United States

(Interred in National Cemetery, Arlington, Va.) *Remain in France*

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

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

By authority of the Quartermaster General:

Noted on Form No. 118
CHARLES C. PIERCE, 6/2/20
Colonel, U.S. Army.

NAME OF	NO. & STREET	TOWN	STATE
Soldier's Widow	<i>No Widow</i>		
Soldier's Children	<i>No Children</i>		
(Name oldest first)	<i>No Father</i>		
Father			
Mother	<i>Mrs Lizzie Budde Rudolph Wisconsin</i>		
Brothers	<i>Albert Budde Rudolph Wisc</i>		
(Name oldest first)			
Sisters	<i>Lena Budde Rudolph Wisconsin</i>		
Date	<i>May 20 1920</i>		
Signature	<i>Mrs Lizzie Budde</i>		
Address	<i>Rudolph Wisconsin</i>		
Relationship	<i>Mother</i>		

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

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

(OVER)

esm

Rudolph Wisconsin
May 20, 1920

Dear Sirs:—

I am going to let you know
that I have changed my mind that I
am going to leave the body of
Private Julius A Budd, remain in
France.



INSTRUCTIONS FOR FILLING OUT

1. This paper MUST be signed by the person who is the NEXT of kin in the order shown in the square on other side of this sheet.
2. This paper must be returned showing the name and address of each of the nearest living relatives in the spaces provided therefor on the other side of this sheet.
3. If there are minor children of the deceased soldier and no widow, the legally appointed guardian of the children should ascertain their wishes and act for them in this matter.
4. If YOU are not the nearest relative, please ask the nearest relative, if living near you, to fill out this paper.
5. If YOU are not the nearest living relative and do not know who or where the nearest relatives are, please fill out this paper AT ONCE and mail to this office.
6. You are requested to return this paper AT ONCE in order to avoid delay in the case of this body.
7. Use the enclosed envelope - pay no postage.

COMPILATION OF DISPOSITION OF REMAINS DATA

File--22087

See Form 115
March
6-16-22

I. LOCATION INDEX CARD:

(a) Name	BUDDE, Julius A.	Ser. No.	2815327	} TYP	ESW
(b) Rank	Pvt.	Organization	Co.D, 355th Inf.		MEH
(c) Date of death	9-24-18	Cause of death	Lobar Pneumonia		LM

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

(a) Grave No. 164 Row --- Plot --- Sect. --- TYP JS
 (b) Emerg. Address -----

III. Files of soldiers dying from contagious diseases no card CKR MEH

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

form 120 6/2/20 Mrs Lizzie Budde (mother-in-law)
Rudolph Wisc requests that body be not
returned to US acn 1/8/21

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

PARAGRAPH 2 - NOT TO BE RETURNED
acn

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

VII. SUPPLEMENTARY REQUESTS

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

VIII. Form 115 received from G.R.S. Hoboken, N.J. 192

COUNTRY France

CEMETERY NO. 13

SHEET NO. 21

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

1/19/21 J.L.

Budde,
(Surname.)

Julius A.
(Christian name in full.)

2,815,327
(Army serial number.)

Pvt

Co D 355th Inf
(Rank and organization.)

State your relationship to the deceased

Mother

Do you desire the remains brought to the United States?

Yes

(Yes or no.)

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

Yes

(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)

Mrs Lizzie Buddle
Rudolph, Miss

(Number and street or rural route.)

(City, town, or post office.)

(State.)

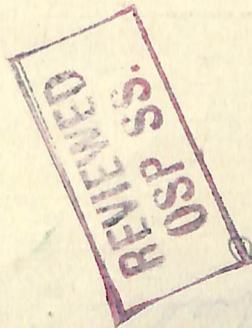
Read carefully the letter accompanying this card.

3-6713

Drawn by Am

13-21

11-23



11/27/22
PMS

22087
GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Budde 2915327 Julia
(Surname). (Number). (First Name and Initials).

Pvt. Co D. 355 Inf
(Rank). (Organization).

PLACE OF DEATH: *Base Hospital 53*

CAUSE OF DEATH: *Pneumonia*

DATE OF BURIAL: *Sept 25, 1918*

PLACE OF BURIAL: *Cemetery 13*
(Give Cemetery, Town and Department). Map reference must specify clearly what map is used.

U. S. Army Schools a. P. O. 714

GRAVE NUMBER: *164*

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

IDENTIFICATION TAGS:
Was one buried with body? *yes*
Was one fastened to name peg or stake used as a grave marker? *yes*

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

NEAREST RELATIVE: *Clara Yeager*
ADDRESS: *Grand Rapids, Wis.*

RELATIONSHIP:
REPORTED BY: *John A. Noobitt, Chaplain*
Base Hospital 53
(Signature and Rank of Reporting Officer).

5 OCT 1918

1. G. R. S. Form No. 1. *22087* Eq. G. R. S. File

2. Soldier's No.

2910-327

3. *Budde* *Ruhus*
Surname (in block letters) First Name and Initials

4. *Pvt.* *D* *355 Inf.*
Rank Company Regt. or Corps

5. *Sept 24 1918*
Date of Death Cause, if known

6. *13*
Date of Burial Cemetery

7. *Langres*
Town or Commune (in block letters) Department

8. *164*
Grave No. Plot No. or Letter

9. Name Peg? Cross? Headboard? Bottle?
Check Method of Marking

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

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

12. *13*
Map Reference, if interment is outside of cemetery

13. Give name of Chaplain or Burial Officer

Signed *S. A. Brown*

Group..... Unit *303* G. R. S.



12

RECEIVED

JAN. 29 1890 18 P.M.

O. C. O. M.

G. R. S.



Knights of Columbus,

U.S.A.

OVERSEAS SERVICE.



St Sulpice France
4/30/19,

Dear Sir

Please give me some information regarding the following men who died here on the battle field or got wounded and died later and where they are buried.

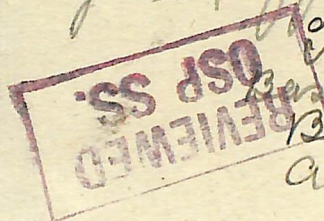
Wm Brockman Appleton Wisconsin, got wounded or killed about July 18th 1918

Gilbert Stanelle Forest Jct Wisconsin, got killed about October 15th 1918

Julius Budde Grand Rapids or Rudolph Wisconsin, got killed about Sept or October

Any information of the following men would be greatly appreciated Truly yours

J. Gustav F. Henneman
Base Ordnance Dept No 4
Base Section No 2
A.P.O. 705 A & F
France





RECEIVED

MAY 5 19 P.M.

O. C. Q. M.

G. R. S.