

G.R.S. Form #114 B

DEC 18 1925

DATE

1. ^{Jv.} NAME BUDZYNSKI, John S. SERIAL No. 734410

RANK Pvt. ORGANIZATION Co. A, 11th Inf.

GRAVE LOCATION St. Mihiel American Cty, Thiaucourt, M-et-M. #1233
CTY. NAME NUMBER

30 Sec. 6 1
GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION #6 Vieville En Haye C-125
GRAVE COMMUNE DEPT.

COORDINATES 52NE, 238.2N, 365.6E

CONCENTRATED TO 4/28/19 30 Sec. 6 1
DATE GRAVE ROW PLOT
St. Mihiel 1233
CEMETERY CTY. NUMBER

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

Tag on cross. DATE OF DEATH Sept 13, 1915

STATE FROM WHICH HE CAME Ohio

MEALS OR DECORATIONS AWARDED No rec

Subsequent Reburials

DATE	GRAVE	ROW	PLOT	CEMETERY
<u>DEC 24 1925</u>				

SIGNATURE, AREA SUPERVISOR I.H. Joffe, 1st Lt., U.S.A.

3. FINAL GRAVE LOCATION July 31, 1922 30 14 Block D
DATE GRAVE ROW PLOT

St. Mihiel American No. 1233, Thiaucourt
CEMETERY

Robert C. Davis,
Major General

A.G.O.
DEC 13 1925
WORLD WAR DIV.

DEC 2 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.

MR 12-11-18 213
GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Budzynski, 734410, John S.
(Surname) (Number) (First Name and Initials)
Pvt. Co. A 11 Inf.
(Rank) (Organization)

PLACE OF DEATH: Near Bois de Four

CAUSE OF DEATH: In action

DATE OF BURIAL: Sep. 13, 18

PLACE OF BURIAL: N. O. de Four

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

Maucourt 50,000
365.5 - 238.0

GRAVE NUMBER: 6

HOW MARKED: Name Peg? Yes 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:

NEAREST RELATIVE:

ADDRESS:

RELATIONSHIP:

REPORTED BY:

Ernest M. Wood, Chaplain
(Signature and Rank of Reporting Officer)

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

MR 12-11-18 213
GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Budzynski, 734410, John S.
(Surname) (Number) (First Name and Initials)
Pvt. Co. A 11 Inf.
(Rank) (Organization)

PLACE OF DEATH: Near Bois de Four

CAUSE OF DEATH: Enemy shell

DATE OF BURIAL: Sep. 13, 1918

PLACE OF BURIAL: N. Bois de Four

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

Maucourt 50,000 365.5 - 238.0

North of Bois de Four, on German gun.

GRAVE NUMBER: 6

HOW MARKED: Name Peg? Yes 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:

NEAREST RELATIVE:

ADDRESS:

RELATIONSHIP:

REPORTED BY:

Ernest M. Wood, Chaplain
(Signature and Rank of Reporting Officer) 9 Inf.

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

ВНН

С.О. Служб

ОПТ

Subscribed by: И.И. Иванов

№ 00000000000000000000

В.Н. КОСОВИЧЕВ

Адрес: г. Москва, ул. Ленина, д. 10
 Место: г. Москва, ул. Ленина, д. 10



What other means of identification were found on the body; none
 Was one identification tag found upon the body; no

Was the body in a casket, body bag, decomposed, buried, lost.
 Report as to nature of clothing and condition of body upon disinterment:

ОБЪЕКТ ИЛИ ВЕЩЬ

№ 11111111111111111111

Дата выдачи

Срок исц. 30 лет с 1900 г.

Вид (дата)

(дата окончания хранения)

Адрес: г. Москва, ул. Ленина, д. 10

Дата выдачи

Исчислен срок

Дата выдачи (дата)

Всего: (дата окончания хранения)

Disinterment and burial made by whom

ОПТ

Имя: И.И. Иванов

Организация: С.О. Служб

Имя: В.Н. КОСОВИЧЕВ

Инициалы: В.Н.

Инициалы:

ВЕРНОЕ ОН ВИДИМЫЙ ИЛИ НЕВИДИМЫЙ

Дата: 2000-00-00

С.И.И. ИЛИ ИО. ИИ

Инициалы: В.Н.

CODE SLIP

✓

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	Budzynski Bud	3	2 7 4
BURIED	CEMETERY 1233	1	3
	GRAVE 30	2	30
	ROW 14	2	14
	BLOCK 2	1	4
STATE	Ohio	2	41
RANK	Port	1	2
DIVISION	5	2	05
ORGANIZATION	11	3	011
ARM	Inf	1	1
MARITAL	Single	1	2
NAME	Budzynski Bud	3	2 7 4
MARITAL	Married	1	1
RESIDENCE	STATE Ohio	2	41
	COUNTY Lucas	2	48
	CITY Toledo	3	12 6
RELATION	Mother	1	1
OTHER	Father	1	
ELIGIBILITY	Head	1	6
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 4 1932

af

ACCEPTANCE
29/314

CPM

RDA

2

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Budzynski John S 1233-F

July 7, 1930

Mr. Martin Budzynski,
2748 Fellows Ave.,
Toledo, Ohio

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:

Mother dead

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

If so, give her name and address:

no

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?

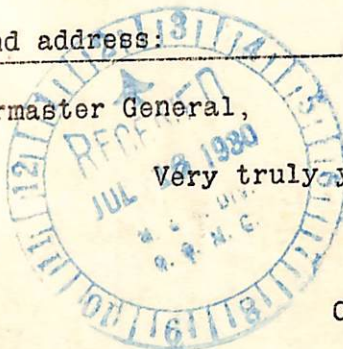
If so, give her name and address:

no

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment



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

Toledo. O

9-1-29

Gentleman

Regret very much that I cant make the trip
baws I am not fixed financial.

And have a job that I cant get away very
well.

Thank You

Mr. Martin Budzynski

2748. Fellows Ave

Toledo. O.



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Budzynski, John S.

May 27, 1929.

Mr. Martin Budzynski,
1658 Nebraska Ave.,
Toledo, O.

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 Private John S. Budzynski, Co. A, 11th Inf., whose remains are now interred in the St. Mihael 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.

H

2 incls.
Act of Congress.
Envelope.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

REPLY REFER TO QM 293 A-C
BUDZYNSKI JOHN S 1235-R

July 7, 1930

Mr. Martin Budzynski,
2748 Fellows Ave.,
Toledo, Ohio

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.

Budzynski

John S

734,410 ✓

(Surname.)

Pvt

(Christian name in full.)

Co A 11 Inf

(Army serial number.)

(Rank and organization.)

State your relationship to the deceased

Father

Do you desire the remains brought to the United States?

No

(Yes or no.)

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

(Yes or no.)

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

(Name of person to receive remains.)

(Express office.)

(Telegraph office.)

(Number and street.)

(City or town.)

(State.)

(Sign here)

Martin Budzynski
1653 Nebraska Ave.

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

3-6713

Toledo, Ohio

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

August 28, 1929.

Budzynski, John S.
1233

Mr. Martin Budzynski,
1658 Nebraska Ave.,
Toledo, Ohio.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated May 27, 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.

QM 293 A-C

BUDZYNSKI, John S. - Pvt.

March 14, 1924

Mr. Martin Budzynski,
1653 Nebraska Ave.,
Toledo, O.

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,

1-Incl.
Record card.

Assistant Quartermaster

RD

702

O. Q. M. G.
CENTRAL MAIL ROOM



MAR 14 1924

B. O. C.

COMPILATION OF DISPOSITION OF REMAINS DATA

File # 77769

I. LOCATION INDEX CARD

(a) Name ^{Budzinski} ~~BUDZINSKI~~, John S. Ser. No. 734410
(b) Rank Pvt. Organization Co. A, 11th Inf.
(c) Date of death 9-13-18 (d) Cause of death K/A

TYP. OB
CKR. *aw*

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

(a) Grave No. 30 Row -- Plot 1 Sec. 6 TYP. OB
(b) Emerg. Address Martin Budzinski, (Father), 1653 Nebraska Ave., Toledo, Ohio.

III. Files of soldiers dying from contagious diseases -- CKR. *aw*

IV. A. G. O. DISPOSITION CARD:

o.k. card (2-23-21) ce

Date of receipt _____

(a) Name *Martin Budzinski* (b) Relationship *Father*
(c) Address *1653 Nebraska Ave., Toledo Ohio*
(d) Remains to be brought to U. S.? *No*
(e) To be interred in National Cemetery in U. S. at _____
(f) Shipping instructions upon arrival of body in U. S. _____
(g) Disposition instructions if not brought to U. S. _____

Examiner's Initials *MH* Date *2-1-21*, 1920.

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

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

No correspondence

Examiner's Initials *MH* Date *2-1-21*, 1920.

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

No Request for disposition

(a) Cancellation memos referred to? _____
Examiner's Initials *EB* Date *2-1-21*, 1920.

COUNTRY *France.* CEMETERY No. *1233* SHEET No. *444*

FEB 26 1921

CARDED

checked 2-23-21

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Budzynski, John S.

May 27, 1929.

Mr. Martin Budzynski,
1658 Nebraska Ave.,
Toledo, O.

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 Private John S. Budzynski, Co. A, 11th Inf., whose remains are now interred in the St. Michel 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.

H ✓
✓

To be prepared in triplicate.

DATE July 31, 1922

REPORT OF DISINTERMENT, PREPARATION, SHIPMENT AND REBURIAL OF BODY

DISINTERMENT

COMPARATIVE REPORT

jw.

Records of G.R.S. Headquarters.

Discrepancy found upon exhumation of body

1. Name <u>BUDZYNSKI, John S.</u>	10. Name _____
2. No. <u>734410</u>	11. No. _____
3. Rank <u>Pvt.</u>	12. Rank _____
4. Org. <u>Co. A, 11th Inf.</u>	13. Org. _____
5. D.D. <u>Ant. Sept. 13/18</u>	14. (a) D.D. _____
6. C.D. <u>KIA</u>	(b) D.B. <u>None</u>

Discrepancy found upon disinterment

7. Grave No. <u>30</u> Sec. <u>6</u>	15. Grave No. _____ Sec. _____
8. Plot <u>1</u> Row _____	16. Plot _____ Row _____
9. _____	17. <u>None</u>

18. Cemetery <u>St. Mihiel American</u>	19. Commune or town <u>Thiaucourt</u>
20. Dept. or County <u>M-et-M.</u>	21. Country <u>France</u>
22. G.R.S. Hdqrs. Code No. <u># 1233</u>	

23. Disinterred (Date) July 31, 1922 By Edmo Maire

24. Inscription on grave marker:

Name <u>BUDZYNSKI, John S.</u>	Serial No. <u>734410</u>
Rank <u>Pvt.</u>	Organization <u>Co. A, 11th Inf.</u>

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

E. E. Cohn
Signature Junior Technical Assistant

PREPARATION

E.E.Cohn

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).

Crucifix found on body. No evidence found to disprove identity

27. Condition of body Badly decomposed, features unrecognizable.

28. Nature of burial Wooden box, burlap and U.S. uniform

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? None

30. Body prepared and placed in casket: Date July 31, 1922 By Edmo maire

31. Casket sealed by Edmo Maire

Signature of Embalmer, (Supervisor)

Edmo maire
Edmo Maire

AUDITED
11-13-23

SHIPMENT. (Show actual marking of box.) Box No. C-29462

32. Designation of body:

Name John S. BUDZYNSKI Serial No. 734410

Rank Pvt. Organization Co.A, 11th Inf.

33. Consigned to:

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

34. Casket boxed and marked (Date) July 31, 1922 By Edmo Maire

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

Signature of G.R.S. Inspector *[Signature]*
O.E.Davis, 1st Lt., Q.M.C.

36. Remarks

None

37. Shipped from point of Operation: (Date) July 31, 1922

To point of Concentration

(Name)

Convoyer 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 St.Mihiel Amer. 1233, Thiaucourt, France.

(Name)

Convoyer Signature Shipping Officer *[Signature]*

O.E.Davis, 1st Lt., Q.M.C.

40. Received: Date

G.R.S. Representative

41. Reinterred July 31, 1922

(Date)

42. Grave No. 30 Section

43. ~~Plot~~ Block D Row 14

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

A.E.Dewey 1st Lt/QMC.

Place Thiaucourt, France.

REPORT OF DISINTERMENT AND REBURIAL

Date July 31, 1922.

1. REMAINS OF BUDZYNSKI, John S. SERIAL NUMBER 734410
RANK Pvt. ORGANIZATION Co. A. 11 Inf.

2. Disinterred (date) : July 31, 1922. From (give complete location): Gr 30. Sec 6. Pl 1. Cem 1233.
By : Group 4 Unit 1

3. Reburied (date) July 31, 1922 In (give complete location): Gr. 30 Row 14 Bk. D
Cem. 1233 Casket & shipping case
By : Group _____ Unit _____ Nature of reburial Reburial

4. Report as to nature of original burial and condition of body upon disinterment :
Wooden box burlap and U.S. Uniform.
Badly decomposed, features unrecognizable.

5. (a) Identification tags : Buried with body? No On grave marker? Yes.
(b) Other means of identification found upon disinterment, and general remarks :
Crucifix found on body.
No evidence found to disprove identity,

6. What does examination of body show as regards the following identifying items?
(a) Height (actual measurement) Impossible to determine.

(b) Weight (estimated) do
(c) Hair—Color do
Quantity do
Characteristics do
(d) Hair on face—Color do
Location do
Quantity do

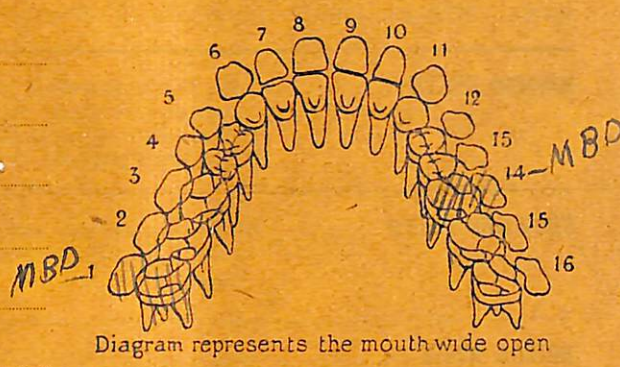
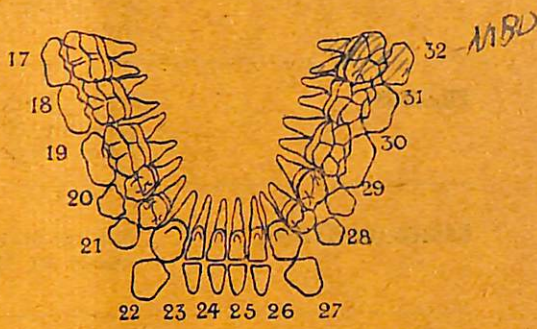


Diagram represents the mouth wide open

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



(f) Wounds or missing parts (received at time of casualty) None visible.

7. Disinterment supervised by Edmo Maire Approved : O. E. Davis
Edmo Maire. (Title) O. E. Davis, 1st Lt. QMC.

8. Reburial supervised by H. L. Kramer Approved : A. S. Dewey
H. L. Kramer (Title) A. S. Dewey 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.

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

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 OF DISPOSITION OF REMAINS DATA

File # 77769

I. LOCATION INDEX CARD:

(a) Name. ²⁻⁹⁻²¹ ~~Budzinski~~ ^{2-21-21) cl} **BUDZINSKI, John S.** Ser.No. **734410**
(b) Rank. **Pvt.** Organization **Co. A, 11th Inf.** Cause of death
(c) Date of death. **9-13-18** death **K/A**

TYP. **OB** *acu*

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

(a) Grave No. **60** Row **---** Plot **1** Sect. **6** TP. **OB**

(b) Emerg. Address **Martin Budzinski, (Father), 1653 Nebraska Ave., Toledo, Ohio.**

III. Files of soldiers dying from contagious diseases. ¹¹⁻²⁻²¹ ¹²⁻²²⁻²¹ *cl* CKR. *acu*

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

.....
.....
.....
.....

V. Following advice forwarded to Europe by (letter of transmittal on ^{(cable on.....192}.....192

Par. 2 Not to be returned.

MAR 1- 1921

FEB 18 1921 *EW*

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

VII. SUPPLEMENTARY REQUESTS

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

.....
.....
.....
.....
.....

VIII. Form 115 received from G.R.S. Hoboken, N.J. ⁶⁻²⁴⁻.....1921

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

CEMETERY NO.

SHEET NO.

S/666/LML France

1233

444

PRIORITY 104

FEB 26 1921

NR

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
CEMETERIAL DIVISION
WASHINGTON

APR 1 1921

1233-444

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

To: Mr. Martin Budzinski, 1653 Nebraska Ave., Toledo, Ohio.

SUBJECT: Remains of Pvt. John J. Budzynski, ser. No. 734410 Co. A, 11th Inf.

The records of this office show that you have requested that the body of the above-named soldier remain in France.

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.

GEORGE H. PENROSE,
Colonel, Q. M. C.

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 _____

RECEIVED BY

JUN 24 1921

Cemeterial Division
Overseas Project Sub-section

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 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

U.S. GOVERNMENT PRINTING OFFICE: 1918

1888

77769

From

102886

No. 102886

UNITED STATES OF AMERICA

Communal List No. _____

Daily Report No. _____

687-111

687

Bodzynski, John S. 734410

Co A 11 Inf.

Budzynski, John S.

Buried

files

B.C.

OK
D

FILE

77769



Name appears on

This soldier, having been reported as missing in action or
prisoner in Germany in C. C. — — is now reported

1ST BURL. CEM

For further data see Casualty Files

R

4-23-19

77769

G.R.S. Form No. 3; Central Records Liaison.
 Memo For: G.R.S. representative, C.R.O.
 SUBJECT: Information required for G.R.S.

FILE
new name

1. Items checked are to be completed:

BUDZYNSKI

() Surname: **BODZYNSKI**
 () Number: **734410**
 () First name: **John S.**
 () Rank: **Pvt.**
 () Company: **Co.A.**
 () Organization: **11th Inf.**
 () Date of death:
 () Cause: *r/a* **9/13/18**
 () Place:

Location of hospital:

() Number " "
 () Class " "
 () Relative: **Martin Budzynski**
 () Relationship: **Father**
 () Address: **1653 Nebraska Ave.**
 () Authority:
 Cablegram No: **408**
 Telegram from: **Toledo**

Ohio

dated:

() Reported to Washington:
 S.C. Nos:
 (UnderSCORE the "official" C.C.)
 () Remarks:
 () Show present status on reverse side.

CHARLES C. PIERCE,
 Lieut.-Colonel, Q.M.C., U.S.A.

Initials of Reporter:

578

Buried:

Cemetery No. C-125

Cemetery Cmme. Vieville, En Haye, M-et-



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

FILE

March 28, 1921.

MEMORANDUM TO A.G. O. WORLD WAR DIVISION CORRESP. SECTION
Mr. Lynch, Branch 1388.

Confirming telephonic conversation of March 26, 1921,
re. case of Pvt. John S. Budzynski, Co. A. 11th Infantry, Ser. #734410,
the records of this office show that Pvt. John S. Budzynski, Co. A. 11th
Infantry, Ser. #734410, was reburied in:

Grave #30, Section #6, Plot #1,

St. Mihiel American Cemetery #1233,

Thiaucourt, Meurthe-et-Moselle.

Original burial Isolated Grave, Commune of Vieville-en-Haye, Meurthe-et-Moselle.

Date of original burial 9/13/18

Date of reburial 4/28/19

By authority of the Quartermaster General:

CHARLES C. PIERCE,
Lt. Col., U. S. Army,
Chief, Cemeterial Division.
By:

CHARLES J. WYNNE,
2nd. Lt. Q. M. C.,

MAILED
MAR 30 1921

C.R.S.

File Number 77769

TO: REGISTRATION BRANCH, G. R. S.

Date 3-26-21

FROM: INQUIRY BRANCH.

Please furnish information as checked (✓) below regarding the following soldier:

NAME: *Budzynski, John S.* Serial Number 734410
 RANK: ORGANIZATION: *Co. A - 11th Inf*

No.	QUESTION	REPLY
1.	Do particulars of soldiers given above agree with records?	Cross reference refers to: <u>Budzynski, John S., Pvt.</u> 734410, Co. A - 11th Inf
2.	Date of death.	(2) 9-13-18
3.	Cause and place of death.	(3) KIA
4.	Number of casualty cablegram.	(4) 408
5.	Date buried.	(5) 9-13-18
6.	Grave location. (a) Complete record required. (b) Name of cemetery or commune only required. (c) Note reinterments.	(6) Isolated Grave, C-125, Vierville - en - Haye, M. et - M
7.	Who reported burial?	(7) Re: 4-28-19.5
8.	Confirmed by G. R. S.?	Grave 30, Sec. 6, Plot 1, St. Michel Amer. Cty. #1298, 5 Piau-court, M. et M.
9.	Report as to grave marker.	(8) 2 - yes
10.	Identification tags: (a) Buried with body? (b) Attached to grave marker?	(9) 2 - yes
11.	Complete emergency address?	(10) Martin Budzynski (father) 1658 Nebraska Ave., Toledo, O.
12.	Has been notified? (Give date.)	(11) 11-22-19 - 107
13.	Report the exact position of your inquiry on this case. (Reply in all cases if no information on record.)	(12) D-16070
14.	What is the photograph number?	(13) M.M.E.-
15.	Inquiry made by: <i>Ans 3/26/21 Jmy 19388</i>	(14) RELEASED BY INFORMATION CONTROL DEPARTMENT.

N. B.—All proper names to be typewritten, or printed in PLAIN BLOCK LETTERS.

..... X Confirmed.
 Unconfirmed. RK

INVESTIGATION AND ADJUSTMENT DEPARTMENT

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

FROM: O.Q.M.G.
CEMETERIAL DIVISION
Munitions Building
Room 1109
1233-444
PLEASE
EXPEDITE

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
WASHINGTON

77769

FILE

Date March 1, 1921

File No. 102886 Registration.

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

To: The Adjutant General of the Army, Sixth and B Streets NW., Washington, D. C.

Subject: Information required for G. R. S.

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

a. Surname. BODZYNSKI or BUDZYNSKI

f. Date of death. Sept. 13/18

b. Christian name. John S.

g. Cause of death. Killed in action.

c. Serial number. 734410

h. Authority (C. C. No.) 408

d. Organization. Co. A. 11th Infantry

i. Emergency address. Martin Budzynski

e. Rank. Priv.

j. Relationship. (father)

BODY DESCRIPTION.

(See page 2 of the Service Record.)

DENTAL CHARTS.

(See physical report of examination prior to enlistment.)

a. Age at enlistment.

a. Strike out teeth missing:

b. Color of eyes.

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8
Upper right. Upper left.

c. Color of hair.

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8
Lower right. Lower left.

d. Height.

e. Weight.

f. Permanent marks and physical defects at enlistment. (Old fractures or breaks.)

Donnelly with
Enl. Pers. Sec. log. 8
2/2/21

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

By

H. J. CONNER,
1st Lieut Captains, Q. M. G.

Mr. Wilson
DTD

MAR 2 - 1921

Rec'd 5 & 5 D. A. G.

MAR 2 1921

INVESTIGATION AND ADJUSTMENT DEPARTMENT

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
WASHINGTON

77769

Date March 1, 1921

File No. ~~102886~~ Registration.

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

To: The Adjutant General of the Army, Sixth and B Streets NW., Washington, D. C.

Subject: Information required for G. R. S.

FILE

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

- a. Surname. BODZYNSKI or BUDZYNSKI *OK*
- b. Christian name. John S. *HE*
- c. Serial number. 734410 *MC*
- d. Organization. Co. A. 11th Infantry *MC*
- e. Rank. Priv.

- f. Date of death. Sept. 13/18
- g. Cause of death. Killed in action.
- h. Authority (C. C. No.) 408
- i. Emergency address. Martin Budzynski
1563 Nebraska Ave
- j. Relationship. (father) Toledo, Ohio.

BODY DESCRIPTION.

(See page 2 of the Service Record.)

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

DENTAL CHARTS.

(See physical report of examination prior to enlistment.)

a. Strike out teeth missing:

8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Upper right.								Upper left.							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Lower right.								Lower left.							

*Donnelly with
Ed. Pers. Sec. log. 8
3/2/21.*

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

By

H. J. Conner
H. J. CONNER,
1st Lieut *Captain*, Q. M. G.

Mr. Wilson
DTD

MAR 2 - 1921

Rec'd S & S Div. A.G.O.

MAR 2 1921

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
WASHINGTON

Date March 1, 1921

Registration

File No. Rogers

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

To: The Adjutant General of the Army, Sixth and B Streets, N.W., Washington, D. C.

Subject: Information required for G. R. S.

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

a. Date of death.

a. Surname: BOZYMENI or BUDZYNSKI

b. Cause of death.

b. Christian name: John S.

c. Authority (C. C. No.)

c. Serial number: 734410

d. Emergency address.

d. Organization: Co. A, 11th Infantry

e. Relationship.

e. Rank: Pvt.

DENTAL CHARTS

(See physical report of examination prior to enlistment)

a. Strike out teeth missing:

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8
Upper right Upper left

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8
Lower right Lower left

MAR 18 1921

RECEIVED

ROBY RESERVE
(See page 2 of the Service Record)

a. Age at enlistment

b. Color of eyes

c. Color of hair

d. Height

e. Weight

f. Permanent marks and physical defects at enlistment (Old fractures or breaks)

H. I. ROGERS

Quartermaster General, U. S. A.

By

H. J. CONNER

1st Lieut Adjutant, U. S. A.

Mr. Wilson

DTD

MAR 3 - 1921

FROM: O. Q. M. G.
CEMETERIAL DIVISION
Munitions Building
Room 1128

WAR DEPARTMENT

Office of the Quartermaster General of the
Washington

PLEASE
EXPEDITE

G.R.S. Form 8-W-4
Information requested of A.G.O.

Date 2/3/21.

Adjustment Made
MAR 1 1921
File No. 77769

File No. Requisition.

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

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

Subject: Information required for G.R.S.

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

- a. Surname Budzynski or (Budzinski) *OK*
- b. Christian name John S. *OK*
- c. Serial Number 734410 *OK*
- d. Organization Co. A, 11th Inf. *OK*
- e. Rank Pvt. *OK*
- f. Date of death 9/13/18. *OK*
- g. Cause of death K/A. *OK*
- h. Authority (C.O.#)
- i. Emergency address
- j. Relationship

BODY DESCRIPTION

(See page #2 of the Service Record)

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

DENTAL CHARTS

(See Physical report of examination prior to enlistment)

- a. Strike out teeth missing
- | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|-------------|---|---|---|---|------------|
| 8 | 7 | 6 | 5 | 4 | 3 | 2 | 1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| | | | | | | | | | | upper right | | | | | upper left |
| 8 | 7 | 6 | 5 | 4 | 3 | 2 | 1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| | | | | | | | | | | lower right | | | | | lower left |

FILE

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

C.W. *Donnelly, Lt*
and Prof Sec
BY: *2/5/21*

CEMETERY NO: 1233

SHEET NO: 444

TYPED BY: I.W.

S/713/LML

H. J. CONNERY
1st. Lieut, Q.M.G.

Rec'd World War
date FEB 4 1921

FEB 4 1921

WAR DEPARTMENT
Office of the Quartermaster General of the Army
Washington

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

Date 2/3/21.

File No. Requisition.

From: The Quartermaster General, U. S. Army, (Cometarial Division)

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

Subject: Information required for G.R.S.

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

- a. Surname Budzynski ^{OK}
or (~~Budzinski~~)
- b. Christian name John S. ^{OK}
- c. Serial Number 734410 ^{OK}
- d. Organization Co. A, 11th Inf. ^{OK}
- e. Rank Pvt. ^{OK}
- f. Date of death 9/13/18. ^{OK}
- g. Cause of death K/A. ^{OK}
- h. Authority (C.O.#)
- i. Emergency address
- j. Relationship

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

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

- a. Age of enlistment
- b. Color of eyes
- c. Color of hair
- d. Height
- e. Weight

- a. Strike out teeth missing
- 8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8
upper right upper left
- 8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8
lower right lower left

f. Permanent marks and physical defects at enlistment (Old fractures or breaks)

FILE

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

C.W. Donnelly, H.H.
and Byrd, Sec
BY: 1/5/21

H. J. CONNERY,
1st. Lieut, Q.M.C.

CEMETERY NO: 1233

SHEET NO: 444

TYPED BY: I.W.

S/713/LML

Rec'd World War
Date FEB 4 1921

FEB 4 1921

FEB 7 1921

RECEIVED