

119

181

G.R.S. Form #114-B

FULL NAME **BULLBARD, John A.**

RANK **Pvt.** SERIAL **3199207**

DIVISION & ORGANIZATION **18th Infantry Co. E.** *1st Div.*

DATE OF DEATH *Nov 13/18*

STATE FROM WHICH HE CAME *Conn.*

MEDALS OR DECORATIONS AWARDED. ✓

FINAL GRAVE LOCATION. **11** **4** **A**  
Date Grave Row Block

**Suresnes American Cemetery 34**  
Cemetery

15 Received A. G. O. SEP. 3 1924

REC'D WORLD WAR DIV.  
SEP 3 24

23/306/ARK

DC 325 @ 12/12

# GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Bullard ..... 3199207 ..... John A. ....  
(Surname). (Number). (First Name and Initials).

Private ..... Company E., 18th Infantry .....  
(Rank). (Organization).

PLACE OF DEATH: Base Hospital 24

CAUSE OF DEATH: Spinal meningitis

DATE OF BURIAL: November 15, 1918.

PLACE OF BURIAL: Limoges, France

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

American Cemetery

GRAVE NUMBER: 161

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

Headboard? Yes ..... 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: Mrs. Eliza Bullard

ADDRESS: Strand St., Wicklow, Ireland

RELATIONSHIP: Mother

REPORTED BY: Stuart S. Unt

2nd Lieut. U.S.M.C.

(Signature and Rank of Reporting Officer).

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

OFFICE QUARTERMASTER GENERAL  
CEMETERIAL DIVISION

Date .....

To ..... Room .....

All Officers,  
Col. Penrose  
~~Lt. Col. Davis, O. R. C.~~  
Capt. Wynne  
Lieut. Conner

*hold*

Principal Clerk  
Personnel Clerk  
Files Clerk  
Cemeterial Clerk

Prepare reply( Sec'y of War  
for( General Rogers  
signature of( General Krauthoff  
( Col. Penrose  
( Lt. Col. Davis  
( Capt. Wynne  
( Lt. Conner

FOR:

- To note
- Information. Need not be returned
- Information and return
- Action or reply
- Approval
- Returned
- Remarks and recommendation
- Suspension to.....
- File
- Investigation and report
- Copies.....(State number)
- Papers in case
- Personal conference
- Draft of letter or endorsement
- Signature
- Check for correction
- See other side for remarks

Final return to:.....

From: COLONEL, GEO. H. PENROSE.....

NOTE: This form may be used a number of times on same case by crossing off previous marks and inserting new marks (and date) in different colors.

1 Strand St  
Wicklow  
11 Aug. 22  
Ireland.

Recorded, Cemeterial Div., O. O. M. G.

Sir

Yours to hand. re my  
son John. A Bullard. Private  
Co. E. 18<sup>th</sup> Infantry

grave. I am very thankful  
for the care etc you have  
taken in all matters connected  
with same, & ask you  
accept my heartfelt  
gratitude from his  
poor old mother.

Elizabeth Alley Bullard

5-16-22

Elizabeth Alley Bullard

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY  
WASHINGTON July 28, 1922.

*File  
HCX*

FILE: 293.8 C-R - #57307

SUBJECT: Permanent Grave Location of John A. Bullard, Private,  
Co. E. 18th Infantry.

TO: Mrs. Elizabeth Allen Bullard, 1 Strand St., Wicklow, Ireland.

1. The permanent grave of this soldier is No. 11 Row 4  
Block A, The American Cemetery of Suresnes, Department of Seine, France.

2. This is one of the permanent American military cemeteries to be maintained by this Government in Europe. Each grave will be marked by a headstone of white marble, of suitable design, with name, rank, organization and date of soldier's death. The headstones will be placed at all graves in connection with the improvement work now in progress, as soon as possible and without waiting for special action or request on the part of relatives.

3. In effecting removal, the utmost care and reverence were exacted and more than willingly accorded by those performing this sacred duty. The grave of the deceased will be perpetually maintained by this Government in a manner befitting the last resting place of our heroes.

For the Quartermaster General:

MAILED

JUL 29 1922

G.R.S.

GEORGE H. PENROSE,  
Assistant.

DATE Oct. 20th 1921.

1. NAME Bullard, John A SERIAL No. 3199207

RANK Pvt. ORGANIZATION Co.E 18th Inf.

GRAVE LOCATION Limoges - Haute Vienne CTY. NAME 151 NUMBER

161 GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 161 Limoges, (Hte, Vienne) GRAVE COMMUNE DEPT.

COORDINATES None.

CONCENTRATED TO Nov. 13, 1918. 161 DATE GRAVE ROW PLOT  
Limoges, (Hte, Vienne) CEMETERY 151 CTY. NUMBER

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

SUBSEQUENT REBURIALS DATE GRAVE ROW PLOT CEMETERY

DATE GRAVE ROW PLOT CEMETERY

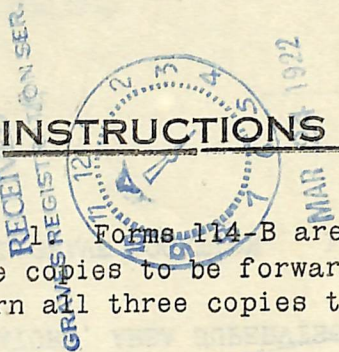
SIGNATURE, AREA SUPERVISOR W. R. Nichols

W. R. Nichols, Major, C.A.C.

3. FINAL GRAVE LOCATION 10-20-21. 11. 4. Block A. DATE GRAVE ROW PLOT

SURESNES AMERICAN CEMETERY #34 SURESNES (SEINE). CEMETERY

**INSTRUCTIONS FOR PREPARATION OF FORM 114 B**



1. Forms 114-B are to be prepared by Registration Branch in quadruplicate, three copies to be forwarded to Area Supervisor who will accomplish paragraph 2 and return all three copies to Headquarters, American Graves Registration Service.

2. Paragraphs 1 and 3 will be accomplished by Registration Branch, Headquarters, American Graves Registration Service, Q.M.C., in Europe.

3. Paragraph 2 will be accomplished by Area Supervisor from data on file in his office.

4. If data is entered on Form 114-B from Form 1, Form 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.

Place

Oct. 14th, 1921

Date

3199207

# REPORT OF DISINTERMENT AND REBURIAL

**BULLARD, John A.**

1. REMAINS OF Pvt. SERIAL NUMBER Co. E, 18th Inf.  
 RANK ORGANIZATION

2. Disinterred (date): Oct. 14th, 1921 From (give complete location): Gr. 161, Cem. 151

By: Group 2 Unit Sec. 7

3. Reburied (date): October 20th, 1921. - Suresnes Cemetery, Block A :- Row 4 - Grave 11.

Field Operations Branch.

Metal Casket and Blanket.

By: Group Unit Nature of reburial

4. Report as to nature of original burial and condition of body upon disinterment:  
Wooden box and uniform. Badly decomposed, features not recognizable.

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

(b) Other means of identification found upon disinterment, and general remarks:  
Body tag checks.

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

(a) Height (actual measurement) Indiscernable due  
to decomposition

(b) Weight (estimated) None

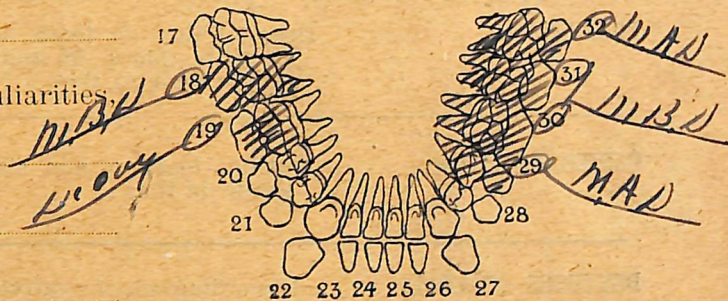
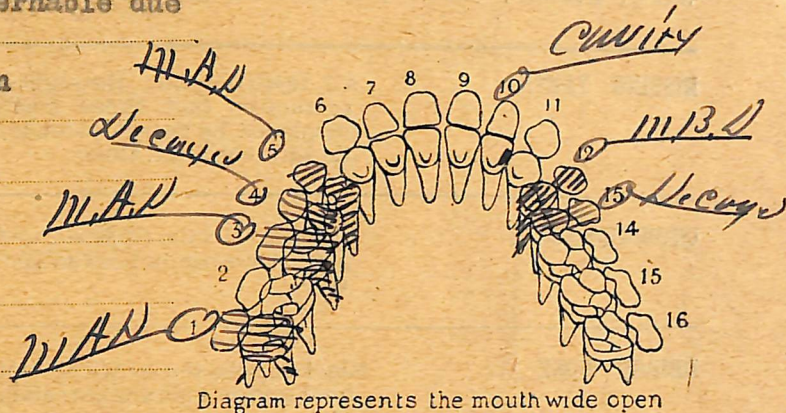
(c) Hair—Color None  
 Quantity  
 Characteristics

(d) Hair on face—Color

Location

Quantity

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



(f) Wounds or missing parts (received at time of casualty)  
Post mortem on skull.

Geo. S. Parker, checker.

7. Disinterment supervised by A. J. Harvey, Sup. and.

Approved: R. P. Harbold  
 (Title)

8. Reburial Supervised by R. G. RICHARDS, 1st Lieut. Q.M.C.






Approved: R. P. HARBOLD, Major, Q.M.C.  
 (Title)

*D-60268*

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

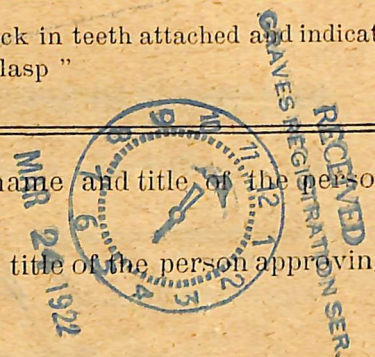
Enter information, as noted below, on reverse side of sheet in the *corresponding numbered space*. This form is supplemental to and is to be forwarded with G. R. S. Form 1-a, reporting reburial locations. To be used in answer to Question 26, Form 114, in case no means of identification on body.

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

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

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

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



To be prepared in triplicate.

DATE Oct. 14th, 1921

REPORT OF DISINTERMENT, PREPARATION, SHIPMENT AND REBURIAL OF BODY

DISINTERMENT

COMPARATIVE REPORT

Records of G.R.S. Headquarters.

Discrepancy found upon exhumation of body

1. Name Bullard, John A

10. Name \_\_\_\_\_

2. No. 3199207

11. No. \_\_\_\_\_

3. Rank Pvt.

12. Rank \_\_\_\_\_

4. Org. Co. E 18th Inf.

13. Org. \_\_\_\_\_

5. D.D. 11-3-18

14. (a) D.D. \_\_\_\_\_

6. C.D. Cerebro spinal meningitis.

(b) D.B. \_\_\_\_\_

Discrepancy found upon disinterment

7. Grave No. 161 Sec. \_\_\_\_\_

15. Grave No. \_\_\_\_\_ Sec. \_\_\_\_\_

8. Plot \_\_\_\_\_ Row \_\_\_\_\_

16. Plot \_\_\_\_\_ Row \_\_\_\_\_

9. \_\_\_\_\_

17. No discrep.

18. Cemetery Amer.

19. Commune or town Limoges

20. Dept. or County Haute Vienne

21. Country France

22. G.R.S. Hdqrs. Code No. 151

23. Disinterred (Date) Oct. 14th, 1921

By A. J. Harvey

24. Inscription on grave marker:

Name John A. Bullard

Serial No. --

Rank Pvt.

Organization Co. E. 18th Inf.

25. Was identification disc found on grave marker? Yes On body? Yes

Gust R...  
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).

Body tag checks.

27. Condition of body Badly decomposed, features not recognizable.

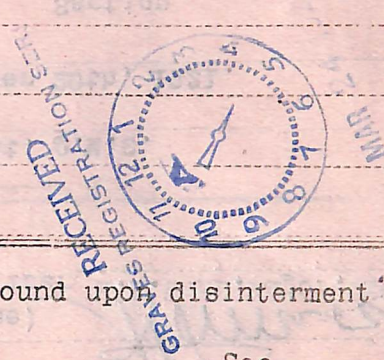
28. Nature of burial Wooden box and uniform.

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? No discrep.

30. Body prepared and placed in casket: Date Oct. 14th, 1921 By A. J. Harvey

31. Casket sealed by A. J. Harvey

Signature of Embalmer, (Supervisor) A. J. Harvey



SHIPMENT. (Show actual marking of box.) Box No. C-7669

32. Designation of body:

Name Bullard, John A Serial No. 3199207

Rank Pvt. Organization Co. E 18th Inf.

33. Consigned to:

Name of Permanent Cemetery Suresnes Amer. Cem. #34.

34. Casket boxed and marked (Date) Oct. 14th, 1921 By A. J. Harvey

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 C. S. Donny  
C. S. Donny, 1st Lt., GAC.

36. Remarks

37. Shipped from point of Operation: (Date) Oct. 17th, 1921

To point of Concentration Paris Morgue (Seine) (Name)  
Convoyer James J. Shea Signature Shipping Officer W. J. Temple

38. Received at ~~Railhead~~ or Point of Concentration: Date Paris Morgue, Oct. 19, 1921  
By G.R.S. Representative Harvard H. L. WARD, Major, QMC

39. Shipped from ~~Railhead~~ or Point of Concentration: Date Oct. 20, 1921  
To Permanent Cemetery No. 34, Suresnes, (Seine)  
Convoyer Harvard Signature Shipping Officer H. L. WARD, Major, QMC

40. Received: Date October 20th, 1921.  
G.R.S. Representative R. G. RICHARDS, 1st Lieut. Q.M.C.

41. Reinterred Suresnes Cemetery. October 20th, 1921.  
(Date)

42. Grave No. 11. Section

43. ~~xxxx~~ Block A. Row 4.  
Plot

el

G.R.S. Representative R. G. RICHARDS,  
1st Lieut. Q.M.C.

3858

COMPILATION OF DISPOSITION OF REMAINS DATA

File #57307

1. LOCATION INDEX CARD:

(a) Name Bullard, John A. Ser. No. 3199207 )  
(b) Rank Pvt. Organization Co. E. 18th Inf. ) TYP. ILH  
(c) Date of death 11-13-18 of death Cerebro Spinal Meningitis ) CKR

2-4-23 Exhumed  
for Concentration  
Surboxes 34  
att 2/23/228

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

(a) Grave No. 161 Row --- Plot --- Sect. --- ) TYP. ILH  
(b) Emerg. Address Mrs. Eliza Bullard, (Mother), 1 Strand St., Wicklow, Ireland.

111. Files of soldiers dying from contagious diseases Card agrees with (d) CKR. *OK*

IV. A.G.O. DISPOSITION CARD:

Date of receipt \_\_\_\_\_  
(a) Name *no card in file* (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 *mm* Date *5-6-* 1920

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

dated \_\_\_\_\_, confirmed request in Par. IV. item \_\_\_\_\_, above, or requesting that  
*No Correspondence*

Examiner's Initials *JOB* Date *5/6/* 1920

VI. G.R.S. Files - Correspondence - shows as follows:

*No request for disposition*

(a) Cancellation memos referred to? *yes - HW*

Examiner's Initials *HW* Date *5/7/* 1920

COUNTRY France CEMETERY NO. 151 SHEET NO. 26

G.R.S. Form #115 Amended April 6, 1920. Make Form #114

Concentrated into P.A.C. 34

FORM 115 - A COMPLETED  
ACP 12-6-20.

Rechecked by *[Signature]*  
11-23-20

FEB 16 1921

Typed by \_\_\_\_\_, Checked by \_\_\_\_\_, 1920

CENETRIAL DIVISION  
OVERSEAS PROJECT SUB-SEC.

VIII. FINAL ACTION:

Following advice forwarded to Europe by-  
( cable on \_\_\_\_\_, 1920  
( letter on ~~MAY 13~~, 1920

**PARAGRAPH 2 - NOT TO BE RETURNED**

*E.A.L. (12-1-20)*

CORRECTIONS

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

*Advice fwd to Europe 2/14/21 for follow up. Del. 7/14/21 Hoboken*

X. SUSPENSION REMARKS: War Risk-E.A. 1/27/21.

Mrs. Eliza Allen Bullard (Mother)

1 Strand St., Wicklow, Ireland. H-1/8/21 VL.

**FEB 16 1921, FORM 115 RETURNED BY HOBOKEN - BODY TO REMAIN IN EUROPE.**

*5-11-21 - Rethers states that mother desires permanent burial in France.*

*A.E. 5-7-21.*

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

67

FROM: Chief, Graves Registration Service, Q.M.C.  
TO: Mrs. Eliza Bullard, 1 Strand St., Wicklow Ireland.  
SUBJECT: Remains of Pvt. John A. Bullard

MAY 12 1919

The records of this office show that you have requested that his

#####  
body be Not expressed desire as to disposition of body

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:

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

NAME OF	NO. & STREET	TOWN	STATE
Soldier's Widow			
Soldier's Children	1.		
(Name oldest first)	2.		
	3.		
Father			
Mother			
Brothers	1.		
(Name oldest first)	2.		
Sisters			

Date \_\_\_\_\_ Signature \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_

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

NAME OF DECEASED SOLDIER \_\_\_\_\_  
 GRADE \_\_\_\_\_  
 BRANCH \_\_\_\_\_  
 REGIMENT \_\_\_\_\_  
 COMPANY \_\_\_\_\_  
 BATTALION \_\_\_\_\_  
 DIVISION \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_  
 STATE \_\_\_\_\_  
 ZIP \_\_\_\_\_  
 NAME OF NEAREST RELATIVE \_\_\_\_\_  
 GRADE \_\_\_\_\_  
 BRANCH \_\_\_\_\_  
 REGIMENT \_\_\_\_\_  
 COMPANY \_\_\_\_\_  
 BATTALION \_\_\_\_\_  
 DIVISION \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_  
 STATE \_\_\_\_\_  
 ZIP \_\_\_\_\_

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 names 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--57307

See Form 115  
Att 2/23/22

I. LOCATION INDEX CARD:

(a) Name	BULLARD, John A.	Ser. No.	3199207	} TYP	ILH
(b) Rank	Pvt.	Organization	Co. E. 18th Inf.		MET
(c) Date of death	11-13-18	Cause of death	Cerebro Spinal Meningitis		LM

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

(a) Grave No. 161 Row -- Plot -- Sect. -- TYP ILH

(b) Emerg. Address Mrs. Eliza Bullard (Mother) 1 Strand St., Wicklow, Ireland.

III. Files of soldiers dying from contagious diseases card agrees with-d CKR AW E.A.L.

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

*no request for disposition E.A.L. (12-2-20)*

V. Following advice forwarded to Europe by (cable on 192  
(Letter of transmittal on 5-13-1920

Par. 2. Not to be returned EAL 12-2-20

VI. Form 115 forwarded to G.R.S. Hoboken, N.J. DEC 7 1920 192

VII. SUPPLEMENTARY REQUESTS

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

VIII. Form 115 received from G.R.S. Hoboken, N.J. FEB 16 1921 192

COUNTRY France

CEMETERY NO. 151

SHEET NO. 26

P.R.S. FORM 115-A  
August 1920

Concentrated into P. A. C. 34

June 3, 1921.

MEMORANDUM for: Mrs. Levis, Preparation of Data Dept.

CASE OF: Pvt. John Bullard, #3199207,  
Co. B. 18th Inf.  
Com. #151 - 28

Letter from Rethers states that mother desires body  
of son left in France for final burial in a Permanent American Cemetery.

*Rem*  
*rem*

F.E. Boland,  
Clerk in Charge, O.S.P. S.S?

File No. 293.9 Disp. Cem. #151.

May 11, 1921.

Mrs. Eliza Allen Bullard,  
1 Strand Street,  
Co. Wicklow,  
Ireland.

Dear Madam:

We have been notified, through the kind offices of Reverend U. J. Coyan, Wicklow, that it is your desire to have the body of your late son, Private John A. Bullard, left in France for final burial in a permanent American Cemetery.

We are pleased to inform you that your wishes have been made of record and will be complied with. When the body of your late son has been placed in a permanent American Cemetery in France, you will be advised as to its location.

Yours sincerely,

<sup>K</sup>  
WSE/BB

CHAS. A. MORROW,  
Captain, C.M.C.

RECEIVED  
MAY 11 1921  
C. H. S.

Division of Cemeteries  
Cemeteries Division

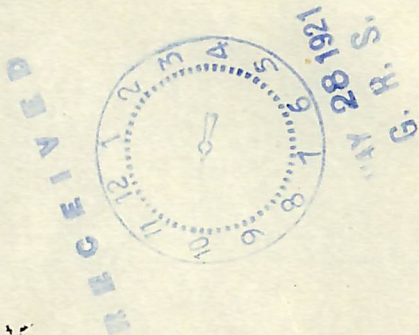
MAY 11 1921

RECEIVED BY

RECEIVED BY  
MAIL UNIT

JUN 2 1921

Cemeterial Division  
Overseas Project Sub-Section



MSB/BB

CHINA & HONGKONG

U.S. MAIL

re advised as to the location  
was read through in a Department of the Cemetery in France, and that  
of record and will be compared with the other records of the  
the the Bureau to inform you that your matter will be  
in a Department of the Cemetery.

There will be a list of names of the  
U.S. Bureau of the Cemetery, and if you have any questions  
we will be pleased to answer them.

Best regards:

Very truly,  
Sincerely,  
Respectfully,  
Yours truly,

Very truly,  
Sincerely,  
Respectfully,  
Yours truly,

Very truly,  
Sincerely,  
Respectfully,  
Yours truly,

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE, Q.M.C., IN EUROPE  
8, AVENUE D'IENA

File No. 293.9 Disp.Cem.#151.

PARIS May 11, 1921.

From: Chief.

To: Quartermaster General, Munitions Building, Washington, D.C.

Subject: Disposition of remains of Pvt. John A. Bullard, #3199207,  
Co. E, 18th Inf., Cem. #151, Limoges, Haute-Vienne, France.

1. Reference letter Cem.Div.Hoboken dated February 14, 1921, File #293.8, to this office, wherein it was directed that we communicate with the next of kin of the above deceased soldier, you are advised that reply has been received from Reverend U.J. Coyan, Catholic Clergyman, Wicklow, Ireland, acting on behalf of Mrs. Eliza Allen Bullard, #1 Strand St., Co. Wicklow, Ireland, stating that it is her desire to have the body of her son left in France for final burial in a permanent American Cemetery.

2. There is enclosed herewith for your records copy of the letter from this office to Mrs. Bullard, advising her that her wishes have been made of record and will be complied with.

K  
1 enc.  
WSE/BB

A. L.  
6-7-21

H. F. BETHERS,  
Colonel, Q.M.C.

Received, Cemeterial Div., O. Q. M. G.  
File # 293.8 - 57907

Bullard's John A.

RECEIVED  
MAY 15 1921  
MUNITIONS BUILDING  
WASHINGTON, D. C.



WAR DEPARTMENT  
QUARTERMASTER CORPS  
GRAVES REGISTRATION SERVICE  
PIER 2, HOBOKEN, N. J.

151-26

February 14th, 1921.

File No. 293.8 ( BULLARD, John A. )

MEMORANDUM FOR: Cemeterial Division, O.Q.M.G., Overseas Project,  
Sub-Section, Washington, D. C.

SUBJECT: Return of Records.  
Transmittal Memorandum Number H-1168.

1. Returned herewith are records pertaining to the late Private John A. Bullard, serial number 3199207, Company E., 18th Infantry, whose nearest of kin resides in a foreign country. This case has been referred to the Chief, American Graves Registration Service in Europe for follow up and it is recommended that the records be held in your office pending further advice from Europe as to the final disposition of the remains of the deceased soldier.

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

BY:

*F. C. Pallas*  
F. C. PALLAS,  
Executive Assistant.

1 incl.

R. 2/17/21 R



February 14th, 1921.

File No. 293.8 ( HULLARD, John A. )

FROM: The Graves Registration Service, Hoboken, New Jersey.  
TO: Chief, American Graves Registration Service, Paris, France.  
SUBJECT: Data relating to deceased soldier whose nearest of kin resides in a foreign country.

1. Reference remains, the late Private John A. Hullard, serial number S199207, Company B., 10th Infantry, cemetery 151, cable reference number 26; the records of this office indicate that Mrs. Eliza Allen Hullard, mother and nearest of kin to the late soldier resides at #1 Strand Street, Wicklow, Ireland.

2. Papers are forwarded for your information and it is requested that your office ascertain the desires of the next of kin and take such action as may be deemed advisable.

MAILED

FEB 15 1921

COR. BR. C. R. S.

*Resp*  
W. S. SHANNON,  
Captain, Quartermaster Corps,  
Officer in Charge.

1 incl.  
Copy of W.R.E.A.  
3/12/21

*Copy detached files  
for adm. files  
2/17/21*

*Noted  
UB  
6-10-21*

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

HOBOKEN, N.J.

10 2344

Please Check

NAME OF DECEASED SOLDIER \_\_\_\_\_ CEMETERY NO. \_\_\_\_\_ DATE \_\_\_\_\_

Bullard, John A. Pvt. 151 - 26 11/6/21  
SERIAL NUMBER ORGANIZATION Date of Death

3199207 Co. E, 18th Inf. 11-13-18

*copy sent to  
ad. Dept.  
1/27/21*

WAR RISK INSURANCE INFORMATION

NAME OF BENEFICIARY \_\_\_\_\_ DATE \_\_\_\_\_  
RELATIONSHIP \_\_\_\_\_

Mrs. Eliza Allen Bullard Mother  
Address 1 Strand St., Wicklow, Ireland

Cor. Sec. \_\_\_\_\_



78

OFFICE OF THE ASSISTANT GENERAL  
CENTRAL DIVISION  
OVERSEAS PROTECTIVE SECTION

HOBOKEN, N.J.

NAME OF DECEASED PERSON

Bulford, John A. 1st.

151 - 26

12/8/21

Date of Death

SERIAL NUMBER

11-15-18

Co. E, 18th Inf.

RECEIVED  
JAN 10 1922  
METEOROLOGICAL DIVISION  
U.S. DEPARTMENT OF AGRICULTURE

NAME OF BENEFICIARY

Mrs. Eliza Allen Bulford

Widow of J. Wicklow, Ireland

Mother



JAN 16 1922

87

57303  
**GRAVE LOCATION BLANK**

LOCATION OF THE GRAVE OF

**Bullard** **3199207** **John A.**  
(Surname). (Number). (First Name and Initials).

**Private** **Company E 18th Infantry**  
(Rank). (Organization).

PLACE OF DEATH: **Base Hospital 24**

CAUSE OF DEATH: **Spinal meningitis**

DATE OF BURIAL: **November 13, 1918.**

PLACE OF BURIAL: **Lineages France**

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

**American Cemetery**

GRAVE NUMBER: **161**

HOW MARKED: Name Peg?  Cross?

Headboard? **Yes** 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: **Mrs. Alice Bullard**

ADDRESS: **Strand St., Wicklow, Ireland**

RELATIONSHIP: **Mother**

REPORTED BY: **Stuart S. Unz**  
**2nd Lieut. U.S.A.**

(Signature and Rank of Reporting Officer)

REVIEWED  
OSP SS.

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



File # 57307

FILE

February 14th, 1921

FILE

File No. 293.8 ( BULLARD, John A. )

FROM: The Graves Registration Service, Hoboken, New Jersey.

TO: Chief, American Graves Registration Service, Paris, France.

SUBJECT: Data relating to deceased soldier whose nearest of kin resides in a foreign country.

1. Reference remains, the late Private John A. Bullard, serial number 3199307, Company B., 16th Infantry, cemetery 181, cable reference number 26; the records of this office indicate that Mrs. Eliza Allen Bullard, mother and nearest of kin to the late soldier resides at #1 Strand Street, Wicklow, Ireland.

2. Papers are forwarded for your information and it is requested that your office ascertain the desires of the next of kin and take such action as may be deemed advisable.

*GI*

MAILED

FEB 15 1921

COR. BR. G. R. S.

*Jab*

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

1 incl.  
 Copy f W.R.E.A.  
 S/lab

OFFICE OF THE QUARTERMASTER GENERAL  
CEMETERIAL DIVISION

Hoboken, N. J. OVERSEAS PROJECT SUB-SECTION

*Copy*

NAME OF DECEASED SOLDIER

**FILE**

CEMETERY NO.

DATE

Bullard, John A. Pvt.

151-26

1-6-21

SERIAL NUMBER

ORGANIZATION

3199207

Co. E, 18th Inf.

Date of death 11-13-18

Adjustment Made

WAR RISK INSURANCE INFORMATION

DATE

FEB 1 1921

File No. 57307

NAME OF BENEFICIARY

RELATIONSHIP

Mrs. Eliza Allen Bullard,

Mother.

Address

1 Strand St., Wicklow, Ireland

S/709/LML

*orig. filed  
Hoboken  
1/27/21*



*30 green carbon*

CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME BULLARD	BUL	3	2 1 2
<i>John A.</i>	CEMETERY 34	1	6
BURIED	GRAVE 11	2	11
	ROW 4	2	04
	BLOCK A	1	1
STATE	<i>Conn.</i>	2	06
RANK	<i>Priv.</i>	1	2
DIVISION	1	2	01
ORGANIZATION	18	3	018
ARM	<i>Inf</i>	1	1
MARITAL	<i>No</i>	1	2
NAME Bullard	Bul	3	2 1 2
<i>Mrs. Eliza Allen</i>	STATE	2	
RESIDENCE	COUNTY	2	
<i>No loc.</i>	CITY	3	
RELATION	<i>Mother</i>	1	1
OTHER		1	
ELIGIBILITY	<i>Foreign</i>	1	4
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
. TRIP	YR.	1	
ACCEPTANCE		1	
<i>29/514/ Country</i>	<i>Ireland</i>	2	05

AUDITED  
FEB 2 1948  
RAM

*[Signature]*

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

DATE 8/18/31

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Bullard, John A.	Pvt.	3199207	Co E, 18th Inf	11/13/18

STATE \_\_\_\_\_ CTY. NO. 34 GRAVE 11 ROW 4 BLOCK A

	<u>Check relationship</u>	<u>Living - Deceased</u>
NAME	MOTHER <i>ms</i>	: <input checked="" type="checkbox"/> : :
AND	<del>STERMOTHER (For the year prior to commencement of service)</del>	: : : :
ADDRESS	<del>MOTHER THRU ADOPTION (For the year prior to commencement of service)</del>	: : : <i>m. ✓</i>
	<del>MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)</del>	: : : <i>Eliza Allen Bullard</i>
	<del>WIDOW (Who has not remarried)</del>	: : : <i>1 Strand St.</i>
		: : : <i>St. Charles Island</i>

Single man

*1-22-33*

Veterans Bureau Claim Number XC-102344  
29/156