

293

FULL NAME BUNDIC, William X

RANK Pvt. ✓ SERIAL 2336687 ✓

DIVISION & ORGANIZATION Co. I, 372nd Inf. ✓ 93 Div.

DATE OF DEATH Oct 7/18

STATE FROM WHICH HE CAME Md.

MEDALS OR DECORATIONS AWARDED. ✓

FINAL GRAVE LOCATION 13 5 B
Date Grave Row Block

Suresnes, #34

Cemetery

15 Received A. G. O. SEP 3 1924

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Bundeck, (2336687).....**W.**.....
(Surname). (Number). (First Name and Initials).

Pvt......**Co. B. 372. Inf.**.....
(Rank). (Organization).

PLACE OF DEATH:**Hosp. No. 5.**.....

CAUSE OF DEATH:**G.S.W.**.....

DATE OF BURIAL:**Oct. 8, 1918.**.....

PLACE OF BURIAL:**A.E.F. Cemetery No. 34**

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

.....**Map of A.E.F. Cemetery No. 34**.....

.....**Suresnes, Paris, Seine.**.....

GRAVE NUMBER:**400**.....

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

Headboard? **XXXX** Bottle? **XXXX**

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:

J. Buckley **Chaplain U.S. Navy**
(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 Suresnes (Seine)

Date Sept., 2, 1921

1. REMAINS OF Bundic William

SERIAL NUMBER 2336687

RANK Pvt.

ORGANIZATION Co. I., 372d Inf.

2. Disinterred (date):

From (give complete location):

Sept., 2, 1912

Gr. 400 Cem 34

By: Group 4

Unit Sec. 6

3. Reburied (date):

In (give complete location):

Sept., 2, 1921

Gr. 13 Row 5, Cem. 34 Block B
Metallic casket and

By: Group 4

Unit Sec. 6

Nature of reburial blanket

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

Wooden coffin and shroud. Partly decomposed; unrecognizable

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

On grave marker? yes

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

No effects found

6. What does examination of body show as regards the following identifying items? Tooth chart not made as this body is apparently embalmed

(a) Height (actual measurement) 5 ft. 7 in.

and identified and the making of tooth chart will require cutting the flesh

(b) Weight (estimated) 145 lbs.

breaking the jaws and unnecessary mutilation.

(c) Hair—Color Black

Quantity Medium

Characteristics kinky

(d) Hair on face—Color Imp. to det.

Location Imp. to det.

Quantity Imp. to det.

(e) Permanent marks on body (old scars, peculiarities, or missing parts) Imp. to det.

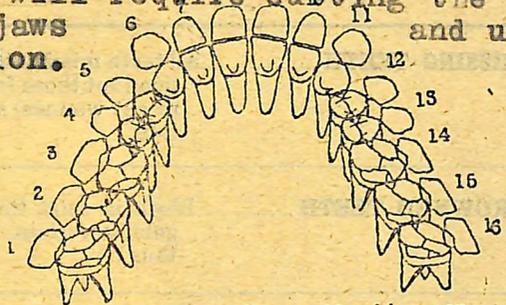
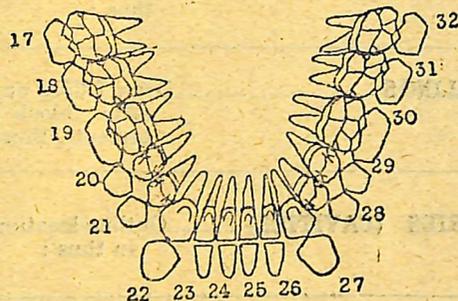


Diagram represents the mouth wide open.



10-30396

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

Imp. to det.

7. Disinterment

supervised by [Signature]

Approved: [Signature]
(Title) R F O'Leary, 1st Lt. QMC

8. Reburial

supervised by [Signature]

Approved: [Signature]
(Title) R F O'Leary, 1st Lt. QMC

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

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

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.
2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.
3. Give date and accurate information as to location of reburial and the group and unit which made reburial, and how reburial was made—in casket, wooden box, etc.
4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried—in a casket, box, burlap, etc. This statement should be as complete as possible.
5. (a) State whether identification tags were found buried with body and on grave marker by reporting "Yes" or "No".

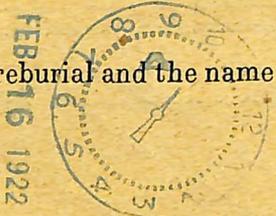
(b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying the body, other than that tabulated under Item No. 6.

6. Give all information as to body description and dental chart as nearly correctly as the condition of the body will allow. Items (e) and (f) under the body description are very important and should be very complete. The dental chart is also very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

<p>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.



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

6/17/23

File No. Registration.

From: The Quartermaster General, U. S. Army, Graves Registration Service,
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 *Bundic* ✓
- b. Christian name *Wm* ✓
- c. Serial Number *2336687* ✓
- d. Organization *J 372* ✓
- e. Rank *Pvt* ✓
- f. Date of death *Oct 7/18* ✓
- g. Cause of death *wounds received in action* ✓
- h. Authority (C.O.#)
- i. Emergency address
- j. Relationship

BODY DESCRIPTION

(See page #2 of the Service Record)

- a. Age of enlistment *29 yrs* ✓
- b. Color of eyes
- c. Color of hair
- d. Height *63 1/4 inches* ✓
- e. Weight *144 lbs.* ✓

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

none missing ✓



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

BY: Charles J. Wynne,
Captain, Q.M.C., U.S.A.

Benj. Alvord
Acting The Adj. General

CEMETERY NO:

SHEET NO:

TYPED BY:

S/3310/LML

2 REG'S WORLD WAR DIV
JUN 8 1923

ADDRESS REPLY TO
CHIEF, REAL ESTATE SERVICE
MUNITIONS BUILDING

WAR DEPARTMENT
REAL ESTATE SERVICE
OFFICE OF THE CHIEF OF THE REAL ESTATE SERVICE
WASHINGTON

FILE NO. _____

MEMORANDUM FOR THE CHIEF OF THE REAL ESTATE SERVICE
SUBJECT: [Illegible]

1. [Illegible]

2. [Illegible]

3. [Illegible]

4. [Illegible]

5. [Illegible]

6. [Illegible]

7. [Illegible]

8. [Illegible]

9. [Illegible]

9. [Illegible]

10. [Illegible]

10. [Illegible]

11. [Illegible]

11. [Illegible]

12. [Illegible]

12. [Illegible]

13. [Illegible]

14. [Illegible]

15. [Illegible]

16. [Illegible]

17. [Illegible]

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

WASHINGTON

June 10, 1922.

File

FILE: 293.8 C-R - #32688-- (Bundic, William. Private.)
FROM: The Quartermaster General, U. S. Army.
TO: Mrs. Besty Bundic, Parksley, Virginia.
SUBJECT: Permanent Grave Location of Private William Bundic,
Company I, 372nd Infantry.

1. The permanent grave of this soldier is No. 13, Row 5.
Block B, 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 main-
tained by this Government in a manner befitting the last resting
place of our heroes.

*Reported
Head
6/16/22*

By authority of the Quartermaster General:

George H. Penrose

GEORGE H. PENROSE,
Colonel, Q. M. Corps,
Chief, Graves Registration Service.

DATE _____

1. NAME Bundic, William SERIAL No 2336687

RANK Pvt ORGANIZATION Co.I.372nd Inf

GRAVE LOCATION Suresnes American Cty 34

CTY. NAME NUMBER

400

GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 400 SURESNES Seine.

GRAVE COMMUNE DEPT.

COORDINATES Amer. Cty. #34.

CONCENTRATED TO Original burial.

DATE GRAVE ROW PLOT

CEMETERY CTY. NUMBER

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

Original burial.

SUBSEQUENT REBURIALS None.

DATE GRAVE ROW PLOT CEMETERY

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR G.V.S. QUACKENBUSH.

Lieut.-Col., Q.M.C. Chief, Operations Div.

3. FINAL GRAVE LOCATION 9-2-21. 13. 5. Block B.

DATE GRAVE ROW PLOT

SURESNES AMERICAN CEMETERY #34 (Seine) SURESNES

CEMETERY

FR

AUDITED BY
2/11-2-25-22



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.

To be prepared in triplicate.

DATE 9/2/21

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 Bundic, William
 2. No. 2336687
 3. Rank Pvt.
 4. Org. Co. I. 372nd Inf
 5. D.D. Oct. 7
 6. C.D. DOWA

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

Discrepancy found upon disinterment

7. Grave No. 400 Sec. _____
 8. Plot _____ Row _____
 9. _____

15. Grave No. _____ Sec. _____
 16. Plot _____ Row _____
 17. No discrepancy

18. Cemetery American19. Commune or town Suresnes20. Dept. or County Seine21. Country France22. G.R.S. Hdqrs. Code No. 3423. Disinterred (Date) 9/2/21By C.O. Handy

24. Inscription on grave marker:

Name William BundicSerial No. NoneRank Pvt.Organization Co. I. 372nd Inf.25. Was identification disc found on grave marker? Yes On body? Yes

Thomas L. Collins
 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).

No effects found.27. Condition of body Partly decomposed - unrecognizable.28. Nature of burial Wooden coffin and shroud.29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? None30. Body prepared and placed in casket: Date 9/2/21 By C.O. Handy31. Casket sealed by C.O. Handy

Signature of Embalmer, (Supervisor)

C.O. Handy

SHIPMENT. (Show actual marking of box.) Box No. **C-5020**



32. Designation of body:

Name **Bundic, William** Serial No. **2336687**

Rank **Pvt** Organization **Co. I. 372nd Inf**

33. Consigned to:

Name of Permanent Cemetery **Suresnes American Cty. #34**

34. Casket boxed and marked (Date) **9/2/21** By **C.O. Handy**

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.F. O'Leary, 1st Lieut., QMC.**

36. Remarks

37. Shipped from point of Operation: (Date) **9/2/21**

To point of Concentration **Suresnes (Seine)** (Name)

Convoyer **[Signature]** 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 (Name)

Convoyer **[Signature]** Signature Shipping Officer

40. Received: Date

G.R.S. Representative

41. Reinterred **13x Sept. 2/21** (Date)

42. Grave No. **13** Section **--**

43. Plot **Block B** Row **5 (Cem. 34)**

G.R.S. Representative **R.F. O'Leary, 1st Lieut., QMC.**

COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

File #32688

(a) Name *ok* BUNDIC, William *ok* (1-10-21) Ser. No. 2336687
 (b) Rank Pvt. Organization Co. I, 372nd Infantry
 (c) Date of death 10/7/18 (d) Cause of death DWR1A

TYP. DMA
 CKR. *[Signature]*

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

(a) Grave No. 400 Row --- Plot --- Sec. --- TYP. DMA
 (b) Emerg. Address Mrs. Besty Bundic (mother) Parksley, Va.

III. Files of soldiers dying from contagious diseases

--- NO CARD

CKR. *[Signature]*

no card in file H.R. 12/30/20

IV. A. G. O. DISPOSITION CARD:

Date of receipt

(a) Name _____ (b) Relationship _____
 (c) Address _____
 (d) Remains to be brought to U. S.? _____
 (e) To be interred in National Cemetery in U. S. at _____
 (f) Shipping instructions upon arrival of body in U. S. _____
 (g) Disposition instructions if not brought to U. S. _____

Examiner's Initials _____ Date _____, 1920.

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

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

no correspondence

Examiner's Initials *H.R.* Date 12/30, 1920.

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

No request for disposition

(a) Cancellation memos referred to? *Yes*

Examiner's Initials *[Signature]* Date 3-1-21, 1920.

COUNTRY FRANCE

CEMETERY No. 34

SHEET No. 117

G. R. S. Form No. 115
 Amended April 6, 1920

3-7729

Concentrated into P. A. C. 34

Make Form No. 114

CARDED

*Checked M-
1-10-21*

FORM 115 - A COMPLETED

FEB 25 1921 H.S.

Name

Rank

Serial No.

Org.

Remarks:

A. G. O. Card & Corr.

Discrepancies

Name

Rank

Serial No.

Org.

Remarks:

G. R. S. Corr.

Discrepancies

Name

Rank

Serial No.

Org.

Remarks:

Checkers

Discrepancies

Name

Rank

Serial No.

Org.

Remarks:

Bundack

T. S. Wisent.

1-4-21

*checked
1-3-21
M M*

32180
GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Bundeck, (Surname) **(2336687)** (Number) **V.** (First Name and Initials)

Pvt. (Rank) **Co. B. 372 Inf.** (Organization)

PLACE OF DEATH: **Hosp. No. 5.**

CAUSE OF DEATH: **G.S.W.**

DATE OF BURIAL: **Oct. 8, 1918.**

PLACE OF BURIAL: **A.E.F. Cemetery No. 34.**

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

Map of A.E.F. Cemetery No. 34

Suresnes, Paris, Seine.

GRAVE NUMBER: **400**

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

Headboard? **XXXX** Bottle? **XXXX**

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:

W. Beckley **Chaplain US Navy**
(Signature and Rank of Reporting Officer)

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



WAR DEPARTMENT
Office of the Quartermaster General of the Army
Washington

PLEASE
EXPEDITE

G.R.S. Form 8-W-A-0
Information requested of A.G.O.

Date 1/4/21.

File No. *32688* 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 ~~Bundeck~~ or (Bundic) *OK*
- b. Christian name ~~W.~~ or (William) *OK*
- c. Serial Number 2336687 *OK*
- d. Organization *Co. I, 372nd Inf. OK*
- e. Rank Pvt. *OK*
- f. Date of death 10/7/18. *OK*
- g. Cause of death DWRIA. *OK*
- h. Authority (G.O.#)
- i. Emergency address
- j. Relationship *S.*

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 |

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

BY: *H. J. Conner*

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

CEMETERY NO: 34

SHEET NO: 117

TYPED BY: I.W.

S/713/LML

Donnelly Mt
El. Bessie
Wg. 8 145-211
Rec'd World War Div.
Date.....*5 21*

REC'D B & S DIV. AGO
JAN 5 1921

WAR. DEPARTMENT
Office of the Quartermaster General of the Army
Washington

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

Date 1/4/21.

File No. *32688* 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.

- m*
- | | |
|---|-------------------------------------|
| a. Surname Bundeck
or (Bundic) <i>OK</i> | f. Date of death 10/7/18. <i>OK</i> |
| b. Christian name W.
or (William) <i>OK</i> | g. Cause of death DWRIA. <i>OK</i> |
| c. Serial Number 2336687 <i>OK</i> | h. Authority (C.O.#) |
| d. Organization <i>Co. I, 372nd Inf.</i> <i>OK</i> | i. Emergency address |
| e. Rank Pvt. <i>OK</i> | j. Relationship <i>S.</i> |

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

- 1921*
- Age of enlistment
 - Color of eyes
 - Color of hair
 - Height
 - Weight
 - 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 | | | | | | | |

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

BY: *H. J. Conner*

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

CEMETERY NO: 34

SHEET NO: 117

TYPED BY: I.W.

S/713/LML

Donnelly
W. J. Pessier
W. J. 8 1 15 21

Rec'd World War Div.
Date.....*1 5 21*

Rec'd S & D Div. AGC
JAN 5 1921

5

2/11/21
SERIAL NO: 111
SERIAL NO: 111
SERIAL NO: 111

JAN 6 1921
RECEIVED

BY: [Signature]
Quartermaster General, U.S.A.
H. L. BOLLES,
H. J. COOPER,
Capt. Henry C.M.C.

FORM DESCRIPTION
(See page 18 of the Service Record)

- a. Rank 1st Lt.
- b. Organization Co. 1, 82nd Inf.
- c. Serial Number 222222
or (William)
- d. Christian Name Wm.
or (Benjamin)
- e. Signature [Signature]
- f. Date of entry 10/1/18
- g. Date of discharge 10/1/18
- h. Date of death 10/1/18
- i. Date of burial 10/1/18
- j. Date of interment 10/1/18
- k. Date of return 10/1/18
- l. Date of re-employment 10/1/18
- m. Date of re-employment 10/1/18
- n. Date of re-employment 10/1/18
- o. Date of re-employment 10/1/18
- p. Date of re-employment 10/1/18
- q. Date of re-employment 10/1/18
- r. Date of re-employment 10/1/18
- s. Date of re-employment 10/1/18
- t. Date of re-employment 10/1/18
- u. Date of re-employment 10/1/18
- v. Date of re-employment 10/1/18
- w. Date of re-employment 10/1/18
- x. Date of re-employment 10/1/18
- y. Date of re-employment 10/1/18
- z. Date of re-employment 10/1/18

Confirmation of all information shown.

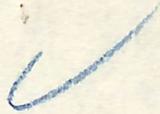
1. If in duplicate that two copies checked both by [Signature] [Signature]

Subject: Information required for S.H.S.
To: The Adjutant General of the Army, c/o S. B. Co., 1111 Washington, D.C.
From: The Quartermaster General, U. S. Army, (Contracted by [Signature])

File No. [Signature]
Information requested of A.S.O.
S.A.S.O. Form 9-1-18-0
Date 1/1/21

Office of the Quartermaster General of the Army
WAR DEPARTMENT

CODE SLIP



HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME BUNDIC	BUN	3	2 12 0
<i>Wm.</i>	CEMETERY 34	1	6
BURIED	GRAVE 31	2	31
	ROW 5	2	05
	BLOCK B	1	2
STATE	md.	2	24
RANK	Priv.	1	2
DIVISION	93	2	93
ORGANIZATION	372	3	372
ARM	Inf.	1	1
MARITAL	no	1	2
NAME Parkes		3	
<i>Mora (center)</i>	STATE	2	
RESIDENCE	COUNTY	2	
<i>Parkesly, Va.</i>	CITY	3	
RELATION <i>no sm</i>	<i>mother</i>	1	1
OTHER <i>no how</i>		1	
ELIGIBILITY	<i>dead - since enl.</i>	1	6
NATIVITY		1	
RACE	Black	1	2
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
. TRIP	YR.	1	
ACCEPTANCE		1	
29/514/			

AUDITED

SEP 22 1952

RS

Dr/

un

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

DATE Sept. 12, 1931

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Bundio, Wm.	Pvt.	2336687	Co. I, 372nd Inf.	10-7-18

STATE	CTY. NO.	GRAVE	ROW	BLOCK
Md.	34	13	5	B

	<u>Check relationship</u>	<u>Living - Deceased</u>	
		Living	Deceased
	MOTHER	:	✓ :
	STEMOTHER (For the year prior to commencement of service)	:	:
NAME	MOTHER THRU ADOPTION	:	:
AND	(For the year prior to commencement of service)	:	:
ADDRESS		:	: Sister
		:	: Nora Parks
	MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	:	: <u>Parkesly</u>
		:	: <u>VA.</u>
	WIDOW (Who has not remarried)	:	:

single man -

XC-84885

Veterans Bureau Claim Number
29/156

9-16-714

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM-293-AM

Bundio, Wm. Pvt (Sur) M x

July 1, 1931.

Pvt. Co. D, 372nd Inf.

Mrs. Betsy Bundio, *2226687*
Parksley,
Va.

10-7-18

13-5-18

md.

Dear Madam:

Arrangements are now being made for conducting pilgrimages during the year 1932 to the cemeteries in Europe under the provisions of the Act of Congress of March 2, 1929, as amended.

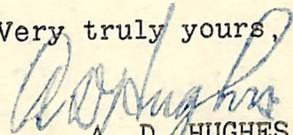
To assure proper and satisfactory accommodations, reservations for steamship transportation required during the summer of 1932 must be made by this office not later than August 1st of this year. It is therefore desired that you answer the question below by writing either of the words "Yes", "No", or "Undecided" in the blank space following the question.

As soon as you have answered the question, please sign your name and return this sheet in the enclosed addressed envelope which requires no postage. Do not delay, as a prompt reply is essential.

This letter is being sent to all eligible mothers and widows who did not make a pilgrimage at the expense of the Government during 1930 and are not making the journey in 1931.

For The Quartermaster General,

Very truly yours,



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

DO YOU DESIRE TO MAKE A PILGRIMAGE DURING THE YEAR 1932? _____

Write answer here

Sign here

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON D. C.

OFFICIAL BUSINESS

RETURN TO WRITER
REASON FOR NON-DELIVERY BY CHECKED
No address
No such post office
Refused

WASHINGTON, D.C. 15
JUL 1
7 30 PM
1931

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

RECEIVED
AUG 12 1931
U.S. R. DIV.
D.O.M.G.
1 2 3 4 5 6 7 8 9 10 11 12





QM 293 A-M
Bundic, Wm. (Sur) M x

May 5, 1931.

Mrs. Betsy Bundic,
Parksley,
Virginia.

Dear Madam:

In order that your desires may be properly recorded and arrangements made for you accordingly, it is requested that you complete and return the enclosed questionnaire at your earliest convenience.

Kindly advise us to whether or not the late Private William Bundic was married and is survived by a widow, and if so, her name and address.

For your convenience in replying, there is enclosed herewith a self-addressed envelope which requires no postage.

For The Quartermaster General,

Very truly yours,

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

Encl:
Ques.
Act - Amend.
Env.
MB

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Bundic, Wm 34 -M

June 20, 1930

Mrs. Betsy Bundic,
Parkeley,
Virginia

Dear Madam:

Arrangements are now being made for conducting pilgrimages during the year 1931, to the cemeteries in Europe under the provisions of the Act of Congress of March 2, 1929.

To assure proper and satisfactory accommodations, reservations for steamship transportation required during the summer of 1931 must be made by this office not later than August 1st of this year. It is therefore desired that you answer the question below by writing the word "Yes" or "No" in the blank space following the question.

As soon as you have answered the question, please sign your name and return this sheet in the enclosed addressed envelope, which requires no postage. Do not delay, as a prompt reply is essential.

This letter is being sent to all mothers and widows who are not making the pilgrimage in 1930, regardless of whether or not they have expressed a desire to make the pilgrimage.

For The Quartermaster General,

Very truly yours,

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

DO YOU DESIRE TO MAKE THE PILGRIMAGE DURING THE YEAR 1931? _____

(Write answer here)

(Sign here)

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Bundic, William

May 6, 1929.

Mrs. Besty Bundic,
Parksley,
Virginia.

Dear Madam:

Your attention is invited to the enclosed copy of an Act of Congress approved March 2, 1929, entitled an Act "To enable the mothers and widows of the deceased soldiers, sailors and marines of the American forces now interred in the cemeteries of Europe to make a pilgrimage to these cemeteries".

The records of this office show that you are the mother of the late Private William Bundic, Company I, 372nd Infantry, whose remains are now interred in the Suresnes American Cemetery, Suresnes, Seine, 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,

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-AM

Bundic, Wm. Pvt (Sur) M x

July 1, 1931.

Mrs. Betsy Bundic,
Parksley,
Va.

Dear Madam:

Arrangements are now being made for conducting pilgrimages during the year 1932 to the cemeteries in Europe under the provisions of the Act of Congress of March 2, 1929, as amended.

To assure proper and satisfactory accommodations, reservations for steamship transportation required during the summer of 1932 must be made by this office not later than August 1st of this year. It is therefore desired that you answer the question below by writing either of the words "Yes", "No", or "Undecided" in the blank space following the question.

As soon as you have answered the question, please sign your name and return this sheet in the enclosed addressed envelope which requires no postage. Do not delay, as a prompt reply is essential.

This letter is being sent to all eligible mothers and widows who did not make a pilgrimage at the expense of the Government during 1930 and are not making the journey in 1931.

For The Quartermaster General,

Very truly yours,

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

DO YOU DESIRE TO MAKE A PILGRIMAGE DURING THE YEAR 1932? _____

Write answer here

Sign here

0489

1-11-31
OFFICE OF THE QUARTERMASTER GENERAL

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Bundic, Wm. Pvt. (Sur) M x

May 5, 1931.

Mrs. Betsy Bundic,
Parksley,
Virginia.

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.

The records of this office show that you are the ~~mother~~ of the deceased veteran named above and in order that plans ~~may be~~ completed for conducting the pilgrimages, it is requested you answer the following questions by filling out the blanks left therefor and return the letter to this office in the enclosed envelope which requires no postage.

1. Do you desire to make this pilgrimage?

2. Do you desire to make the pilgrimage in the calendar year 1931?

3. Please give your age and state your health.

4. Do you speak English?

5. What other language do you speak?

Age
Condition of Health

For The Quartermaster General,

Very truly yours,

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

Enclosures:
Envelope
Act
Amendment

QM 293 A-M
Bundic, Wm. (Sur) M x

May 5, 1931.

Mrs. Betsy Bundic,
Parksley,
Virginia.

Dear Madam:

1931 MAY 16 - PM 10
In order that your desires may be properly recorded and arrangements made for you accordingly, it is requested that you complete and return the enclosed questionnaire at your earliest convenience.

Kindly advise as to whether or not the late Private William Bundic was married and is survived by a widow, and if so, her name and address.

For your convenience in replying, there is enclosed herewith a self-addressed envelope which requires no postage.

For The Quartermaster General,

Very truly yours,

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

Encl:
Ques.
Act - Amend.
Env.
MB

QM 293 A-M

October 21, 1930

Bundic, Wm. Pvt 34 M

Mrs. Detsy Bundic
Parksley
Virginia

Dear Madam:

A reply has not been received to office letter of recent date relative to the pilgrimage to the cemeteries of Europe, authorized by the Act of Congress of March 2, 1929, as amended May 15, 1930.

The records of this office show that you are the mother of the deceased veteran named above and in order that plans may be completed for conducting the pilgrimages in 1931, it is requested you answer the following questions by filling out the blanks left therefor and return the letter to this office in the enclosed envelope which requires no postage.

1. Do you desire to make this pilgrimage?	
2. Do you desire to make the pilgrimage in the calendar year 1931?	
3. Please give your age and state your health.	Age Condition of health
4. Do you speak English?	
5. What other language do you speak?	

For The Quartermaster General:

Very truly yours,

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

Encls:
Act
Amendment
Envelope

30/150

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Bundio, Wm 34 -M

June 20, 1930

Mrs. Betsy Bundio,
Parksley,
Virginia

Dear Madam:

Arrangements are now being made for conducting pilgrimages during the year 1931, to the cemeteries in Europe under the provisions of the Act of Congress of March 2, 1929.

To assure proper and satisfactory accommodations, reservations for steamship transportation required during the summer of 1931 must be made by this office not later than August 1st of this year. It is therefore desired that you answer the question below by writing the word "Yes" or "No" in the blank space following the question.

As soon as you have answered the question, please sign your name and return this sheet in the enclosed addressed envelope, which requires no postage. Do not delay, as a prompt reply is essential.

This letter is being sent to all mothers and widows who are not making the pilgrimage in 1930, regardless of whether or not they have expressed a desire to make the pilgrimage.

For The Quartermaster General,

Very truly yours,

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

DO YOU DESIRE TO MAKE THE PILGRIMAGE DURING THE YEAR 1931? _____
(Write answer here)

(Sign here)

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Bundic, William
54

August 9, 1929.

Mrs. Besty Bundic,
Parksley,
Virginia.

Dear Madam:

The records of this office do not indicate that a reply has been received to our communication dated **May 6, 1929** making inquiry concerning the name and address of the mother and widow of the deceased service man above named. These addresses are desired with a view to ascertaining the number of mothers and widows who desire to make a pilgrimage to the cemeteries of Europe in which the remains of their sons and husbands are interred.

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

Write answers in space below

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

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

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

For The Quartermaster General,

Very truly yours,

2 Incls.
Act of Congress
Envelope

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Bundic, William

May 6, 1929.

Mrs. Besty Bundic,
Parksley,
Virginia.

Dear Madam:

Your attention is invited to the enclosed copy of an Act of Congress approved March 2, 1929, entitled an Act "To enable the mothers and widows of the deceased soldiers, sailors and marines of the American forces now interred in the cemeteries of Europe to make a pilgrimage to these cemeteries".

The records of this office show that you are the mother of the late Private William Bundic, Company I, 372nd Infantry, whose remains are now interred in the Suresnes American Cemetery, Suresnes, Seine, 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,

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

2 incls.
Act of Congress.
Envelope.