

To The A. G. C.

6391

188
293

mg

MAY 14 1921

DATE Oct. 27, 1921

1. NAME BURCH, Waldo

SERIAL No. 1489471

RANK Pvt. 1st Lt. ORGANIZATION Co. B. 142nd Inf. & DIVISION 36

GRAVE LOCATION Meuse-Argonne Amer. Romagne-sous-Montfaucon (Meuse) #1232, Sec. 66

57 Sec. 66 2

GRAVE PLOT

#8 Row 1 Near St. Etienne a Arnes (Ardennes) #825

2. ORIGINAL BATTLE AREA GRAVE LOCATION

GRAVE COMMUNE DEPT.

COORDINATES 34NE 283.5N 265.75E

CONCENTRATED TO 6-16-19 57 66 2
DATE GRAVE ROW PLOT

Meuse-Argonne 1232
CEMETERY CTY. NUMBER

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

Letters addressed to Waldo Burch, Co. B, 142 Inf. Camp Mills, G.R.S. Plaque.

DATE OF DEATH Oct 9/18

Data F.1
SUBSEQUENT REBURIALS STATE FROM WHICH HE CAME okla
DATE GRAVE ROW PLOT CEMETERY

MEDALS OR DECORATIONS AWARDED

DATE GRAVE ROW PLOT CEMETERY

M. B. BIRDSEY
1st Lt., Q.M. Corps, U.S.A.

SIGNATURE, AREA SUPERVISOR

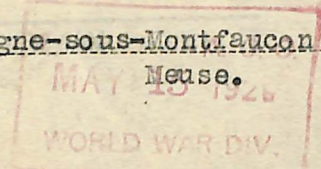
3. FINAL GRAVE LOCATION 10/27/21 31 22 Block D
DATE GRAVE ROW PLOT

Meuse-Argonne American Cemetery #1232 Romagne-sous-Montfaucon Meuse.

AUDITED BY 202419 1/3



Major General
Adjutant General
MAY 19 1926



INSTRUCTIONS FOR PREPARATION OF FORM 114 B

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

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

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

4. If data is entered on Form 114-B from Form 1, Form I6, Form 1-A or Form 16-A, statement to this effect will be made on Form 114-B STATING WHICH G.R.S. form data is taken from. If data concerning co-ordinates is approximate and NOT accurate, statement to this effect will be made on these forms.

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Burch 1489471 Waldo
(Surname) (Number) (First Name and Initials)

Pvt. 1cl. Co. B. 142d Infantry
(Rank) (Organization)

PLACE OF DEATH: St. Etienne France

CAUSE OF DEATH: Killed in Battle

DATE OF BURIAL: October 10th 1918

PLACE OF BURIAL: St. Etienne France

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

1 Kilometer S.E. of St. Etienne
a cross street from Gravel Pit.

Coordinates 283 1/2 point 5-265
Map of Rethel, Scale 1 to 50,000

GRAVE NUMBER:

HOW MARKED: Name Peg? Cross? Yes

Headboard? Bottle?

IDENTIFICATION TAGS:

Was one buried with body? Yes

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

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

NEAREST RELATIVE: Mrs. W.M.H. Burch

ADDRESS: Mariette Oklahoma

RELATIONSHIP: Mother

REPORTED BY:

1st Lt. Chaplain 142d Inf.
(Signature and Rank of Reporting Officer)

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

Co. B. 142nd Inf.
36th Division.

Hit in right
burial party repo

Emergency address:
Mrs. W. Burch,
Marietta, Okla.

1. 1489471
Okla.

report taken from

1489526

Co. B. 142nd Inf.
36th Division.

BURCH, Waldo - Pvt. 1st. 1489471
Home: Marietta, Okla.

Hit in right leg four times. NO eye witnesses but report taken from
burial party report. No other information obtainable.

Informant: Hall, Dewey - Sgt. 1489526
Co. B. 142nd Inf.
Home: Newkirk, Okla.

Searcher: B. Kiehn - 1st. Lt.
142nd Inf.
2/16/19.

Emergency address:
Mrs. W. Burch,
Marietta, Okla.

G.P.

REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name BURCH, Waldo Number: 1489471

Rank Pvt. Organization: Co. B 142 Inf.

Disinterment and Reburial made by Group _____ Unit _____

Disinterred (Date) _____ From: (Give complete location) _____

16 JUNE 1919 Grave 8 Row 1 B A C

ST. ETIENNE A ARNES ARDENNES

34 NE E265.75 N283.50

Reburied (Date) _____ in: (Give complete location) _____

16 JUNE 1919 Grave 57 Sec 66 Plot 2

ARGONNE AMERICAN CEMETERY #1232

ROMAGNE MEUSE

1232

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

Body buried in uniform and badly decomposed. Burial good.

Was one identification tag found upon body? No

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

12400

Note:

CONFIRMED No D

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

Supervised by Lt. Tucker

R. H. ROSENTHAL

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

C.O. Group _____ Unit _____

RECEIVED
5 JUL 1944
O.C.

U.S. AIR FORCE
HEADQUARTERS
W. H. ROSS

TO: [Illegible]

FROM: [Illegible]

SUBJECT: [Illegible]

[Illegible text]

BOYD

TO: [Illegible]

BY: [Illegible]

DATE: [Illegible]

[Illegible text]

RECEIVED

6-2-44

TO: [Illegible]

2 Sons

CODE SLIP

other son - Ralph Wm. Burch - 1232



HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	Burch	3	2 12 0 1 8
BURIED	Waldo		
	CEMETERY 1232	1	1
	GRAVE 31	2	3 1
	ROW 22	2	2 2
	BLOCK D	1	4
STATE	Okla	2	4 2
BANK	Post 1a	1	2
DIVISION	36	2	3 6
ORGANIZATION	142	3	1 4 2
ARM	Inf	1	1
MARTIAL	No	1	2
NAME	Burch	3	2 12 0 1 8
Mrs. Ola May	STATE Okla	2	4 2
RESIDENCE	COUNTY Love	2	4 3
	CITY Marietta	3	++
RELATION	Mother	1	1
OTHER	Father	1	1
ELIGIBILITY	yes	1	1
NATIVITY		1	
RACE		1	
ENGLISH	yes	1	1
ATTENDANT		1	
HEALTH	Good	1	1
NO. OF SONS	Two	1	2
DATE OF TRIP	MO. May	1 2	0 5
	YR. 1931	1	2
ACCEPTANCE		1	1
29/514/PJ	Age 54	yes	54 1 2a

Sailed May 6, 1931

AUDITED
NOV 5 1931
RS

KPLS

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Burch, Ralph Wm. (M A) M Pvt.
Burch, Waldo (M A)

April 10, 1931.

Mrs. Ola May Burch,
Marietta, Okla.

Dear Madam:

There is enclosed herewith Check No. **590956** in the amount of \$ **22.50** to pay for your meals and incidental expenses from your home to New York on the pilgrimage authorized by the Act of March 2, 1929.

UNDER NO CIRCUMSTANCES MUST THIS CHECK BE CASHED AND USED FOR ANY PURPOSE OTHER THAN THAT SPECIFIED.

If for any reason, you are not able to sail on the date mentioned in your invitation, the check must be returned to this office immediately.

For The Quartermaster General,

Very truly yours,

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

1 Incl.
Check No.

✓

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

QM 293 A-M

IN REPLY REFER TO _____

October 21, 1930.

Burch, Waldo 1232 M PFC

Mrs. Ola May Burch,
Marietta, Okla.

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?	Yes
2. Do you desire to make the pilgrimage in the calendar year 1931?	yes
3. Please give your age and state your health.	Age 54 Condition of health very good
4. Do you speak English?	yes
5. What other language do you speak?	none

For The Quartermaster General:

Very truly yours,

A. D. Hughes
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

Burch, Waldo,
1232

Sept. 4, 1929.

Mr. W. M. H. Burch,
Marietta, Okla.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated June 29, 1929 making inquiry concerning the name and address of the mother and widow of the deceased service man above named. These addresses are desired with a view to ascertaining the number of mothers and widows who desire to make a pilgrimage to the cemeteries of Europe in which the remains of their sons and husbands are interred.

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

Write answers in space below

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

no

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

Mother

Ola May Burch, Marietta,
Okla. desires to make trip
about May 1931

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

Mother desires to make
pilgrimage about May 1931

For The Quartermaster General

SEP 20 1929

M. & R. DIV.
Q. Q. M. G.

Very truly yours,

John T. Harris

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

2 Incls.
Act of Congress
Envelope

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO: QM 293 A-C

June 29, 1929.

Mrs. W.M.H. Burch,
Marietta, Okla.

(m)
Mrs. Ola May Burch
Marietta Oklahoma

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 Pvt. Waldo Burch, Co.B, 142nd Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, 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,

2 incls.
Act of Congress.
Envelope.

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

FILE UNDER NO. 293 Burch, Waldo

INDEX SHEET

SYNOPSIS

4-10-31.

Letter.

From: O.Q.M.G.
To: Mrs. Ola May Burch,
Marietta, Okla.

Enclosing check No. 590956 to pay for your meals and incidental expenses from your home to New York on the pilgrimage authorized by Act of March 2, 1929.

DOCUMENT FILED UNDER NO. 293 Burch, Ralph William.

INSTRUCTIONS.—Under "Synopsis" make brief entry showing date of communication and from whom received and synopsis sufficient to identify the papers. When these index sheets become numerous under a subject they will be entered on the consolidated index sheet and then destroyed.

EPC

3-6642

QM 295 A-M

October 21, 1930.

Burch, Waldo 1232 M PFC

Mrs. Ola May Burch,
Marietta, Okla.

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

October 7, 1929.

Burch, Waldo 1232 M

Mrs. Ola May Burch,
Marietta, Okla.

Dear Madam:

The Act of Congress which provides for pilgrimages to cemeteries in Europe by mothers and widows of members of the military or naval forces of the United States who died in the military or naval service at any time between April 5, 1917 and July 1, 1921, and whose remains are now interred in such cemeteries, all necessary expenses of which pilgrimages are to be paid by the United States Government, requires that the Secretary of War make an investigation and submit the results of such investigation in a report to Congress not later than December 15, 1929. The purpose of the investigation is to determine the total number of mothers and widows entitled to make the pilgrimages, the number of such mothers and widows who desire to make the pilgrimages, the number who desire to make the pilgrimages during the calendar year 1930 and the probable cost of the pilgrimages to be made.

In order that the report referred to may be made and plans completed for conducting the pilgrimages, it is requested that you answer the following questions by filling out the blanks left therefor and return the letter to this office by return mail in the enclosed envelope which requires no postage.

1. Do you desire to make this pilgrimage if eligible?	(Yes)	(No)
2. Do you desire to make the pilgrimage in the calendar year 1930?	(Yes)	(No)
3. Have you at any time made a previous visit to the grave of the deceased member of the military or naval forces in whom you are interested?	(Yes)	(No)
4. Please give your age and state of health.	Age (Years)	Health (Good) (Poor)
5. What language do you speak?	English - (Yes) (No) Other language (Specify language spoken)	

For The Quartermaster General,

Very truly yours,

Encl.
Act
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

Burch, Waldo,
1232

Sept. 4, 1929.

Mr. W. M. H. Burch,
Marietta, Okla.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated June 29, 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,

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

2 Incls.
Act of Congress
Envelope

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

Burch, Waldo.
IN REPLY REFER TO QM 293 A-C

29
June , 1929.

Mrs. W.M.H. Burch,
Marietta, Okla.

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 Pvt. Waldo Burch, whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, 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,

2 incl.
Act of Congress.
Envelope.

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

September 13, 1923.

Mrs. W.M.H. Burch,
Marietta,
Okla.

Dear Madam:

The Quartermaster General desires you to be informed that the permanent grave of Private Waldo Burch, Company B, 142nd Infantry, is Grave 11, Row 22, Block D, Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon (Meuse), France.

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

You are assured in effecting removal of the remains, the utmost care and reverence were exercised and more than willingly accorded by those who performed this sacred duty. The grave of the deceased will be perpetually maintained by this Government in a manner befitting the last resting place of our heroes.

Very truly yours,

O. Q. M. H. H. CHEAL
Central Mail & Files Branch, Assistant.



SEP 13 1923

Burch (Surname.) Waldo (Christian name in full.) 1,489,471 (Army serial number.)

Pvt 1st Cl Co B 142 Inf (Rank and organization.)

State your relationship to the deceased *mother*

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) *my old m. Burch*

Marietta Okla
(Number and street or rural route.) (City, town, or post office.) (State.)

Read carefully the letter accompanying this card.

drawn by M.H.
1232 - Sep 66 - 29
5-14-21

checked
11/6/21
TH

COMPILATION OF DISPOSITION OF REMAINS DATA

File 41741

I. LOCATION INDEX CARD:

(a) Name BURCH, Wildo Ser. No. 1489471
(b) Rank Pvt. Organization Co. B, 142nd Inf. } TYP. b
(c) Date of death 10-9-18 (d) Cause of death k/a } CKR. CP

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

(a) Grave No. 57 Row - Plot 2 Sec. 66 TYP. b
(b) Emerg. Address Mrs. W. M. H. Burch (mother) Marrietta, Okla.

III. Files of soldiers dying from contagious diseases /// CKR. CP

IV. A. G. O. DISPOSITION CARD:

Date of receipt _____

(a) Name Mrs. W. M. H. Burch (b) Relationship Mother
(c) Address Marrietta Okla
(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 5/14, 1921

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

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

Examiner's Initials _____ Date _____, 192

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

7/1 No request for disposition

(a) Cancellation memos referred to? _____

Examiner's Initials MH Date 5/14, 1921

COUNTRY FRANCE CEMETERY No. 1232-Sec. 66 SHEET No. 29

VII. G. R. S. Form No. 114 made _____, 192

Typed by _____, Checked by _____, 192

VIII. FINAL ACTION:

Following advice forwarded to Europe by { cable on _____, 192
letter on JUN 3 1921, 192

See 66
Par. 2 Not to be returned. *LPW*

IX.

REMARKS

G. L. B. Ed. Mrs. W. M. H. Busch, Marietta, Okla
Mother

WRITE NOTHING BELOW THIS LINE.

Location Index

Discrepancies

Location Index

Discrepancies

Name

Rank

Serial No.

Org.

Remarks

Hughes

A.G.O. Card & Corr.

5-14

Discrepancies

Name

Rank

Serial No.

Org.

Remarks

Ed

G. R. S. Corr

Discrepancies

Name

Rank

Serial No.

Org.

Remarks

Checkers

Discrepancies

Name

Rank

Serial No.

Org.

Remarks

S-1733/MB

*Checked
7/6/24
AH*

COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

File 41741

(a) Name BURCH, W. Leo Ser. No. 1489471
 (b) Rank Pvt. Organization Co. B, 142nd Inf. } TYP. b
 (c) Date of death 10-9-18 (d) Cause of death k/a } 3p

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

(a) Grave No. 57 Row Plot 2 Sec. 66 TYP. b
 (b) Emerg. Address Mrs. W. M. H. Burch (mother) Marrietta, Okla.

III. ~~Files of soldiers dying from contagious diseases~~ CKR. 3p

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

V. Following advice forwarded to Europe by { cable on _____, 192
 { letter of transmittal on JUN 3 1921, 192
Sub 6
Par. 2 Not to be returned. RPW

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

VII. SUPPLEMENTARY REQUESTS.

Date of and source.	Relationship and name.	Desires.	Action taken.
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----

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

COUNTRY _____ CEMETERY No. _____ SHEET No. _____

Concentration.

G. R. S. Form. No. 16-A

Place Comagne 1232.

REPORT OF DISINTERMENT AND REBURIAL

Date Oct. 26, 1921.

1. REMAINS OF BURCH, Waldo SERIAL NUMBER 1489471

RANK Pvt. 1/c ORGANIZATION Co. B. 142nd Inf.

2. Disinterred (date) : From (give complete location) :

Oct. 26, 1921 gr 57, sec 66, plot 2.

By : Group 5 Unit sec 1

3. Reburied (date) : In (give complete location) :

Oct. 27, 1921 Meuse-Argonne Cty. #1232 Gr. 31, Bl. D. row 22.

By : Group Reburial S Unit _____ Nature of reburial Unlined Casket.

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

wooden box ~~and~~ and uniform, badly decomposed, features not recognizable.

5. (a) Identification tags : Buried with body? no On grave marker? tag on peg over b body

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

Tag on peg over body and letters addressed to Waldo Burch, Co. B. 142nd Inf. Camp. Mills.

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

(a) Height (actual measurement) impossible to determine.

(b) Weigh, (estimated) do

(c) Hair—Color do

Quantity do

Characteristics do

(d) Hair on face—Color do

Location do

Quantity do

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

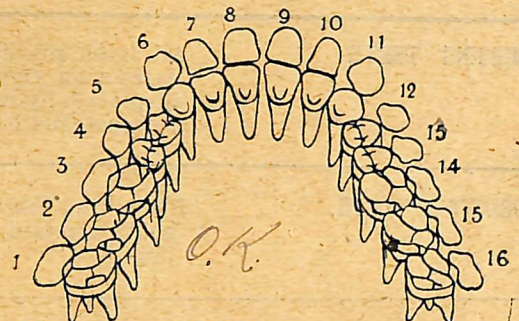
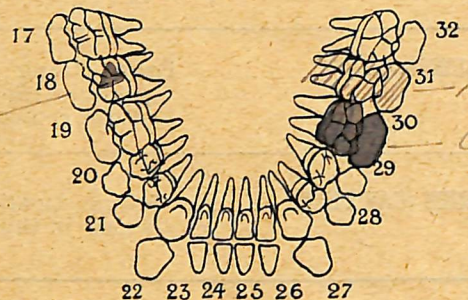


Diagram represents the mouth wide open



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

none visible.

7. Disinterment supervised by Ed Lavelle

Approved F.B. Daniel

(Title)

8. Reburial supervised by A. U. Dufault

Approved : Geo Bland

(Title) GEO. C. BLAND,
1st Lt., Q.M.C.






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

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

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

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

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

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

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

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



To be prepared in triplicate.

DATE Oct. 26, 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 BURCH, Waldo
- 2. No. 1489471
- 3. Rank Pvt. 1/cl
- 4. Org. Co. B. 142nd Inf.
- 5. D.D. Oct. 9th.
- 6. C.D. KIA

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

Discrepancy found upon disinterment

- 7. Grave No. 57 Sec. 66
- 8. Plot 2 Row _____
- 9. _____

- 15. Grave No. _____ Sec. _____
- 16. Plot _____ Row _____
- 17. No discp

- 18. Cemetery Meuse-Argonne Amer.
- 20. Dept. or County Meuse
- 22. G.R.S. Hdqrs. Code No. 1232-Sec.66

- 19. Commune or town Romagne-sous-Montfaucon.
- 21. Country France

23. Disinterred (Date) 10-26-21

By J. Lavelle

24. Inscription on grave marker:

Name Waldo Burch

Rank Pvt. 1/cl

Serial No. 1489481

Organization Co. B. 142nd Inf.

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

Signature Junior Technical Assistant J. M. Moody

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). Tag on peg over body and letters addressed to Waldo Burch Co. B. 142nd Inf, Camp Mills.

27. Condition of body Badly decomposed features unrecognizable

28. Nature of burial US Uniform and wooden box.

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 10-26-21 By Ed. Lavelle

31. Casket sealed by Ed. Lavelle

Signature of Embalmer, (Supervisor) Ed. Lavelle

SHIPMENT. (Show actual marking of box.) Box No. C-13092

32. Designation of body:

Name BURCH, Waldo Serial No. 1489471

Rank Pvt.1/cl. Organization Co.B. 142nd Inf.

33. Consigned to:

Name of Permanent Cemetery Meuse-Argonne Amer. Cty. #1232,
Romagne-sous-Montfaucon (Meuse)

34. Casket boxed and marked (Date) 10-26-21 By Ed. Lavelle

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 F.B. Daniel
F.B. Daniel, Capt. QMC

36. Remarks

37. Shipped from point of Operation: (Date) 10-26-21

To point of Concentration Morgue, Romagne

Convoyer W.J. Royed Signature Shipping Officer G.F. Spann, Capt. QMC

38. Received at Railhead or Point of Concentration: Date

By G.R.S. Representative

39. Shipped from Railhead or Point of Concentration: Date

To Permanent Cemetery

Convoyer Signature Shipping Officer

40. Received: Date

G.R.S. Representative

41. Reinterred Oct. 27, 1921 Meuse-Argonne Cty. #1232.
(Date)

42. Grave No. 31 Section

43. Plot Block D Row 22

G.R.S. Representative Geo. C. Spann
GEO. C. SPANN, 1st Lt., Q.M.C.



41741

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Burch 1489471 Waldo
(Surname) (Number) (First Name and Initials)

Pvt. 1st. Co. B. 142d Infantry
(Rank) (Organization)

PLACE OF BURIAL St. Etienne France

CAUSE OF DEATH Killed in battle.

DATE OF BURIAL October 10th 1918.

PLACE OF BURIAL St. Etienne France.

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

1 Kilometer S.E. of St. Etienne
across street from gravel pit.

Coordinates 283 point 5-265-

Map of Rehel, scale 1 to 50,000

GRAVE NUMBER:

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?

Creme C-217 St Etienne d-Aves
If name unknown and tags missing, description and marks should be given here:

(Ardennes) 34 N-E E 265 N 285 J

NEAREST RELATIVE: Mrs. W.M.H. Burch

ADDRESS: Mariette Oklahoma.

RELATIONSHIP: Mother

REPORTED BY: *C.H. Barnes*

1st Lt. Chaplain. 142d Inf.
(Signature and Rank of Reporting Officer)

RECORDED

27 OCT 1918

217-819

Communal List No. _____
Daily Report No. _____

Soldier's No 1489471

Name : Burch, Waldo-

Rank : *Pvt.* Co *B*

41741
Reg. *17. Inf.*

Died:

Buried :

Cemetery : Battlefield trench burials .

Commune of St. Etienne-a-Arnes .

Grave No. *3* - Avery sketch No 16

Grave found unnumbered, should be *#8* as
per sketch

How marked ? *Cross, tag attached .*

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

Map reference : *Map 24 N.E.*

287.7 N. 265.7 E.

Name of chaplain or burial officer .

Signed-

C. P. O. White
Group One, Unit "B", G.R.S.

White
1504



41741

Burch, W. Co., 1489471

Pvt Co B 142nd Infantry

1 kilo SE of St Etienne across street from gravel pit coordiance 283 $\frac{1}{2}$.5 - 265 Map of Rehel 1-50000

Buried by Chap. C.H. Barnes.

IN
D
R
A
N
D
O
R
I
E
S

(ARDENNES)

~~ST-ETIENNE A. ARNES~~

(C-27) SHT. 34 N.E COORDE 265

N 283 $\frac{1}{2}$
12

B 213 ✓

1941

For the year ending

1941 of the ...
amount from ...
1-2000

Printed by Geo. G. H. Barnes.

(ARDEWAL)

STETTENBERG AREA
217-819
MAY 1941

217-819

Communal List No. _____
Daily Report No. _____