

327

G.R.S. Form #114-B

FULL NAME BURCKELL, David

Pvt.

2266419

RANK SERIAL

DIVISION & ORGANIZATION Co. C, 364th Inf. 91st Div.

10-31-18

DATE OF DEATH

STATE FROM WHICH HE CAME Calif.

MEDALS OR DECORATIONS AWARDED.

None

FINAL GRAVE LOCATION. 6-21-22 9 3 D
Date Grave Row Block

Flanders Field, #1252

Cemetery

Co C. 364th Infantry
91st Division

Burckell, David, Pvt 22664I9

Informant was an eye witness.
The ground was held
Death was not instantaneous. Burckell lived about 10 minutes
Not certain as to place of burial.
Informant knew christian name
There was no other man of this name in company
Nickname "Dutch". Scar on forehead about an inch long at edge of hair.
Height about 66 inches, Weight about 160 lbs. Light Hair.

Informant's accuracy and intelligence reliable.

Informant: Hilton, Mark E. pt I/c
Co C. 364th Infantry
Home Maple City, Mich.

Searcher: W.N. Bingard, 2nd Lt, 364th Inf.

Emergency address:
Mr Henry C. Akin (stepfather)
Monrovia, Calif.

REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name: BURCKELL, David

Number: 2266419

Rank: unknown

Organization: unknown

Disinterment and Reburial made by Group 3 Unit 302

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

6-3-19 _____ Grave 1, American B/F, Cem. Waereghem, West Flanders,

Belgium. B.M. 1/40,000. Sht/ 29-D-28-a-4-4

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

6-3-19 _____ Grave 170, Plot C, American Mil. Cem., Waereghem West Flanders,

Belgium. B.M. 1/40,000. Sht/ 29-D28-d-6-9.5

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

Buried in uniform, badly decomposed.

Was one identification tag found upon the body? yes

What other means of identification were found on the body? none

Note:

If upon disinterment, effects are found upon bodies, they will be promptly sent to the Effects Depot direct, as is required by G. O. 170, G.H. 2, 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: Sgt. E.J. Crowley

C.O. Group 3

Unit 302
2nd Lt. OMCUSA

11530
CONFIRMED N° D

Date June 2, 1919

REPORT OF DISEASE AND BURIAL

Remains of:

Number: 2266419

Name: BURCKELL, David

Organization: unknown

Rank: unknown

Detachment and Burial made by Group 3 Unit 302

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

Grave 1, American B.F. Cem. West Flanders, Belgium

Belgium, Belgium

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

Grave 170, Plot G, West Flanders, Belgium

Belgium, Belgium

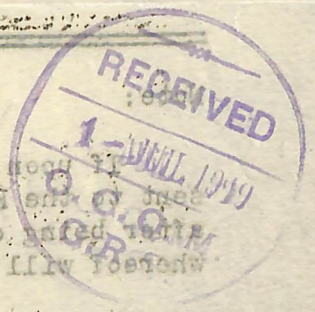
Report as to nature of original burial and condition of body upon disinterment:

Body in original - body decomposed.

Was one identification tag found upon the body? yes

What other means of identification were found on the body? none

When disinterment, effects are found upon bodies, they will be promptly sent to the Effects Depot direct, as is required by G. O. 170, G. R. 1918. After being carefully examined for clues to identify in doubtful cases, location whereof will be made and reported to Chief, Graves Registration Service.



CONTINUED ON D 11330

Supervised by: Sgt. Brewster
Unit: 302

OC 32/ GRAVE LOCATION BLANK 12/12

BURCHELL 2366419 DAVID
Surname Number First Name

Rank Company Organization

NOVEMBER 2, 1918
Date Of Burial

Place of Burial
MAP COURTRAI (THIEL)

193.4-461.4-1;40 000
Map Location And References

15 CROSS
Grave No. Kind of Marker

YES YES
Identification Tags- Body---Marker

If unknown Give Remarks Here And Below

C.A. REXROAD SENIOR CHAPLAIN 91ST. DIV.
Reported by:

CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME BURCKE II	BUR	3	2 12 80
DAVID	CEMETERY 1252	1	8
BURIED	GRAVE 9	2	09
	ROW 3	2	03
	BLOCK 10	1	4
STATE	Calif	2	04
RANK	Pvt	1	2
DIVISION	91	2	91
ORGANIZATION	364	3	364
ARM	Inf	1	1
MARITAL (step father)	No	1	2
NAME AKIN, HENRY C		3	
321 Hillcrest Blvd. Monrovia, Calif.	STATE Calif	2	
RESIDENCE	COUNTY Los Angeles	2	
	CITY Monrovia	3	
RELATION	Mother	1	1
OTHER		1	
ELIGIBILITY	Dead	1	6
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE 29/514/		1	

AUDITED
APR 26 1992
E/T/T

PSA

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Burkell David 1252-SF

July 7, 1930

Mr. Henry C. Akin,
321 Hillcrest Blvd.,
Monrovia, California

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress of March 2, 1929, together with an amendment thereto, approved May 15, 1930.

This office has no record of any person entitled under the Act mentioned to make a pilgrimage to the cemeteries in Europe as the mother or widow of the above named deceased service man. To complete the list of eligibles and to assure that, if the above named man is survived by a mother or widow entitled to make a pilgrimage she receive an invitation to do so, it is requested you answer the following questions in the space provided on this letter and return to this office in the enclosed envelope which requires no postage.

1. Is the deceased survived by a mother?

If so, give her name and address:

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

If so, give her name and address:

3. Is the deceased survived by any woman who stood in loco parentis to him according to the terms of Section 4 (a) of the enclosed Act as amended?

If so, give her name and address:

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

DATE February 15, 1930.

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Burckell, David	Pvt.	2266419	Co. C-364th Inf.	Oct. 31, 1918

STATE	CTY. NO.	GRAVE	ROW	BLOCK
California	1252	9	3	D

	<u>Check relationship</u>	<u>Living</u>	<u>-</u>	<u>Deceased</u>	
NAME AND ADDRESS	MOTHER	:	:	:	<div style="font-size: 1.2em; font-family: cursive;">C-124-624</div> <div style="font-size: 1.2em; font-family: cursive;">220 Bm</div> <div style="font-size: 1.2em; font-family: cursive;">Step-Father.</div> <div style="font-size: 1.2em; font-family: cursive;">Henry C. Akin</div> <div style="font-size: 1.2em; font-family: cursive;">321 Hillcrest Blvd.</div> <div style="font-size: 1.2em; font-family: cursive;">Monrovia Calif.</div> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/> <hr style="border: 0.5px solid black;"/>
	STEPMOTHER (For the year prior to commencement of service)	:	:	:	
	MOTHER THRU ADOPTION (For the year prior to commencement of service)	:	:	:	
	MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	:	:	:	
	WIDOW (Who has not remarried)	:	:	:	
		:	:	:	
		:	:	:	
		:	:	:	
		:	:	:	
		:	:	:	

Single

Veterans Bureau Claim Number _____
29/156/

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO _____

QM 293 A-C
Burekell, David

April 23, 1929.

Mr. H. C. Akin,
Monrovia,
Calif.

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 **step father** of the late Private David Burekell, Company C, 364th Infantry, whose remains are now interred in the Flanders Field American Cemetery, Waerghem, Belgium.

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,

J. McCLINTOCK,
Major, Q. M. Corps,
Assistant.

5/1/29
2 incls.
Act of Congress.
Envelope.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Burckell David 1252-SF

July 7, 1930

Mr. Henry C. Akin,
521 Hillcrest Blvd.,
Monrovia, California

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress of March 2, 1929, together with an amendment thereto, approved May 15, 1930.

This office has no record of any person entitled under the Act mentioned to make a pilgrimage to the cemeteries in Europe as the mother or widow of the above named deceased service man. To complete the list of eligibles and to assure that, if the above named man is survived by a mother or widow entitled to make a pilgrimage she receive an invitation to do so, it is requested you answer the following questions in the space provided on this letter and return to this office in the enclosed envelope which requires no postage.

1. Is the deceased survived by a mother?

If so, give her name and address:

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

If so, give her name and address:

3. Is the deceased survived by any woman who stood in loco parentis to him according to the terms of Section 4 (a) of the enclosed Act as amended?

If so, give her name and address:

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Burckell, David

August 7, 1929.

**Mr. H. C. Akin,
Monrovia, Calif.**

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated **April 23, 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

S U S P E N D S L I P

It is requested that the attached file be returned to

G. Ruth
(Name)

Comm. Div
(Service)

57/13/29
(Date)

Return herewith _____
(Date) (Initials)

If further suspense is necessary, please indicate below; -

RESUSPEND TO _____

RESUSPEND TO _____

RESUSPEND TO _____

If no further suspense is necessary, please check here _____ and initial _____

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Burekell, David

April 23, 1929.

Mr. H. C. Akin,
Monrovia,
Calif.

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 **step father** of the late Private David Burekell, Company C, 364th Infantry, whose remains are now interred in the Flanders Field American Cemetery, Waereghem, Belgium.

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,

J. McCLINTOCK,
Major, Q. M. Corps,
Assistant.

2 incls.
Act of Congress.
Envelope.

DISPATCHED
MAY 25 PM 4
Q.M.G.M. - H.O.V.

✓
✓

BURCKELL, David Pvt.

February 9, 1924

Mr. Henry C. Akin,
Monrovia,
California.

Dear Sir:

The Quartermaster General desires to invite your attention to the inclosed card which gives the permanent cemetery location of the soldier's grave in which you are interested.

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

Please be assured that in effecting removal of the dead, the utmost reverential care was exercised and more than willingly accorded by those who performed this sacred duty. For the future, these graves will be perpetually maintained by the Government in a manner befitting the last resting place of our heroes.

Very truly yours,

1- Incl.
Record card.

R. L. FOSTER
Assistant.

MFK
702

O. Q. M. G.
CENTRAL MAIL ROOM



FEB 9 1924
R. O. C.

REPORT OF DISINTERMENT AND REBURIAL

Place Waerghem, 1252

Date June 21, 1922

1. REMAINS OF BURCKELL, David.

SERIAL NUMBER 2266419

RANK Pvt.

ORGANIZATION Co. C. 364th Inf.

2. Disinterred (date) :

June 21, 1922

From (give complete location) :

G r 170 Plot C. Co, 1252

By : Group 4

Unit

Sec 2.

Rock

3. Reburied (date) June 21, 1922. In (give complete location) : Gr. 9 Plot D Row C, Flanders Field American Cemetery No. 1252 Waereghem, Belgium.
In regulation metallic casket and shipping case. Bottle record placed with body

By : Group

Reburial

Unit

Section 2

Nature of reburial

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

Wooden box, uniform.

Body decomposed features unrecognizable.

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

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

Corroded body tag: D ----- EBL----- 66419
legible. rest illegible.

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

(a) Height (actual measurement) Indiscernable due to

(b) Weight (estimated) decomposition.

(c) Hair—Color none visible.

Quantity none

Characteristics none

(d) Hair on face—Color none visible

Location none

Quantity none

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

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

None visible

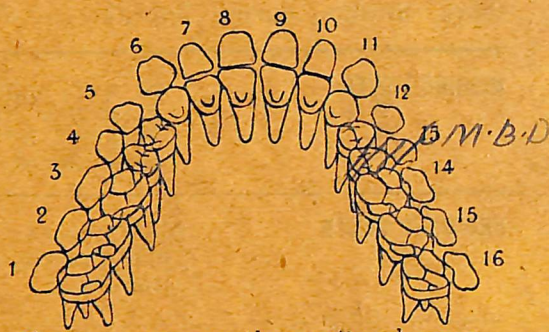
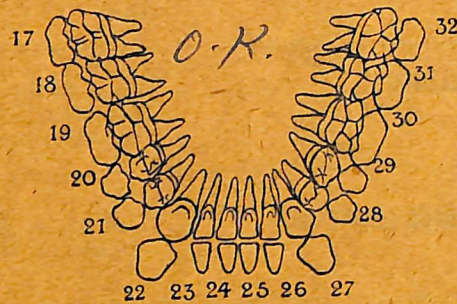


Diagram represents the mouth wide open



7. Disinterment supervised by Edmo Maure

Edmo Maure

Approved : O. E. Davis

O. E. Davis.

(Title) 1st Lt. U.S. Army

8. Reburial supervised by J. S. Pantelis

J. S. Pantelis

Approved : W. D. Cleary

Chaplain, U.S. Army

(Title)

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

Enter information, as noted below, on reverse side of sheet in the *corresponding numbered space*. This form is supplemental to and is to be forwarded with G. R. S. Form 1-a, reporting reburial locations. To be used in answer to 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~~ ^{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.

Place Waereghem, Belgium.

REPORT OF DISINTERMENT AND REBURIAL

Date 3-7-21.

1. REMAINS OF BURCKELL, David SERIAL NUMBER 2266419

RANK Pvt. ORGANIZATION Co. C, 364th Inf.

2. Disinterred (date): 3-7-21. From (give complete location):
Gr. 170, Plot C, American Cemetery #1252, Waereghem, Belgium.

By: Group 3 Unit Section No. 4

3. Reburied (date): 3-7-21. In (give complete location):
Gr. 170, Plot C, American Cemetery #1252, Waereghem, Belgium.

By: Group 3 Unit Section No. 4 Nature of reburial In burlap and wooden box with bottle and metal strip.

4. Report as to nature of original burial and condition of body upon disinterment: ~~XXXXXXXXXXXX~~ Missing
~~XXXXXXXXXXXX~~ Buried in uniform; blanket; burlap; body badly decomposed;
recognition impossible.

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

(b) Other means of identification found upon disinterment, and general remarks:
No effects found. Disc on body, partly corroded, but letters "BUR--KEL" visible.

6. What does examination of body show as regards the following identifying items? No. 13 - Missing before death.

(a) Height (actual measurement) Unable to determine

(b) Weight (estimated) -

(c) Hair—Color -

Quantity -

Characteristics -

(d) Hair on face—Color -

Location -

Quantity -

(e) Permanent marks on body (old scars, peculiarities, or missing parts) Unable to determine

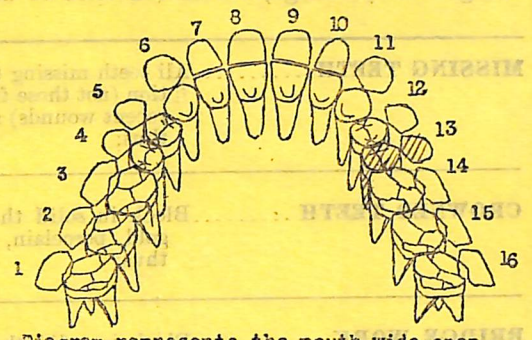
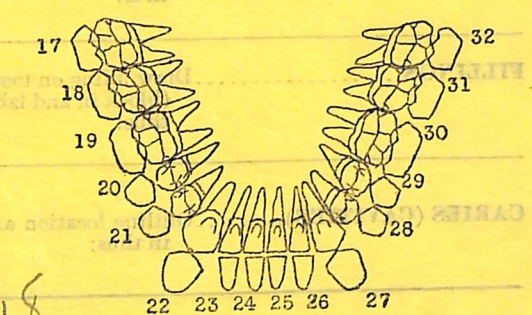


Diagram represents the mouth wide open.



50418

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

7. Disinterment supervised by F. A. JORGENSEN

Approved: G. B. Kidwell
(Title) 2nd Lt., Q.M.C. gvc

8. Reburial supervised by F. A. JORGENSEN






Approved: G. B. Kidwell
(Title) 2nd 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 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 align="center">TOOTH MISSING TOOTH MISSING</p>
<p>CROWNED TEETH.....Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus:</p>	 <p align="center">GOLD CROWN PORCELAIN CROWN</p>
<p>BRIDGE WORK.....Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:</p>	 <p align="center">GOLD AND PORCELAIN BRIDGE GOLD BRIDGE</p>
<p>FILLINGS.....Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus:</p>	 <p align="center">SILVER FILLING GOLD FILLING</p> <p align="center">GOLD FILLING GOLD FILLING</p>
<p>CARIES (CAVITIES).....Outline location and size of cavity, shade in thus:</p>	 <p align="center">CAVITY DECAYED DECAYED DECAYED</p>

DENTURES (PLATES).....Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

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

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

To be prepared in triplicate.

DATE June 21, 1922

REPORT OF DISINTERMENT, PREPARATION, SHIPMENT AND REBURIAL OF BODY

DISINTERMENT

COMPARATIVE REPORT

Records of G.R.S. Headquarters.

Discrepancy found upon exhumation of body

- | | |
|---------------------------------|----------------------|
| 1. Name <u>BURCKELL, DAVID</u> | 10. Name |
| 2. No. <u>2266419</u> | 11. No. |
| 3. Rank <u>Pvt.</u> | 12. Rank |
| 4. Org. <u>Co. C 364th Inf.</u> | 13. Org. |
| 5. D.D. <u>10-31-18</u> | 14. (a) D.D. |
| 6. C.D. <u>KIA</u> | (b) D.B. <u>none</u> |

Discrepancy found upon disinterment

- | | |
|------------------------------|--------------------|
| 7. Grave No. <u>170</u> Sec. | 15. Grave No. Sec. |
| 8. Plot <u>C</u> Row | 16. Plot Row |
| 9. | 17. <u>none</u> |

- | | |
|---|--------------------------------------|
| 18. Cemetery <u>AMERICAN</u> | 19. Commune or town <u>WAEREGHEM</u> |
| 20. Dept. or County | 21. Country <u>BELGIUM</u> |
| 22. G.R.S. Hdqrs. Code No. <u>1252</u> | |
| 23. Disinterred (Date) <u>June 21, 1922</u> | By <u>Edmo Maire</u> |
| 24. Inscription on grave marker: | |

Name <u>Burckell, David</u>	Serial No. <u>2266419</u>
Rank <u>Pvt.</u>	Organization <u>Co. C. 364th Inf.</u>

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

L. R. Knasin
Signature Junior Technical Assistant

L.R. Knasin.

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).
Corroded body tag: D----- KRL----- 66419 legible.
rest illegible.
27. Condition of body Badly decomposed, features unrecognizable.
28. Nature of burial Wooden box, unif orm.
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 June 21, 1922 By Edmo Maire
31. Casket sealed by Edmo Maire

Signature of Embalmer, (Supervisor)

Edmo Maire
Edmo Maire

AUDITED BY
M.J.D. 5/15/23.
C.R.70

SHIPMENT. (Show actual marking of box.) Box No. C-878

32. Designation of body:

Name BURCKELL, DAVID Serial No. 2266419

Rank Pvt Organization Co. C 364th Inf.

33. Consigned to:

Name of Permanent Cemetery Flanders Field American Cemetery #1252, Waereghem, Belgium.

34. Casket boxed and marked (Date) June 21, 1922 By Edmo Maire

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

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

36. Remarks _____

None

37. Shipped from point of Operation: (Date) June 21, 1922

To point of Concentration _____

(Name)

Convoyer _____ Signature Shipping Officer

38. Received at Railhead or Point of Concentration: Date _____

By G.R.S. Representative _____

39. Shipped from Railhead or Point of Concentration: Date _____

To Permanent Cemetery Flanders Field, Amer Cem. 1252 Waereghem Belgium

(Name)

Convoyer 1st Lt Signature Shipping Officer *O. E. Davis*

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

40. Received: Date June 21, 1922

G.R.S. Representative *W. D. Cleary*

W.D. Cleary, Chaplain.

41. Reinterred June 21, 1922.

(Date)

42. Grave No. 9 Section _____

43. Plot BLOCK D Row 3

EL

G.R.S. Representative *W. D. Cleary*

W. D. CLEARY
Chaplain, U. S. Army

COMPILATION N/R REQUESTS

I. DATA COMPILATION

A. Location Index Card:-

(1) Name Burckell, David Ser. No. 2266419)
) TYP. TW.
 (2) Rank Pvt. Organization Co. C. 364th Inf.)
) CKR. TH.
 (3) Date of death 10/31/18)

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

(4) Cause of death Killed in Action) TYP. ESW
)
 (5) Grave No. 170 Row --- Plot C Sect. ---) CKR. TH.

II. FILES EXAMINATION

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

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

(6) Relationship Step-Father
 (7) Name Henry C. Akin
 (8) Address Monrovia, Calif.
 (9) Desires remains brought to U. S.? No
 (10) Desires remains brought to U. S. and interred in National Cemetery at _____
 (11) If brought back, what shipping instructions? _____

Disposition
 M.C.E. 8/29/20

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

(12) Does correspondence Change or qualify request as made on A.G.O. card? If so, specify such information. _____

No correspondence

(13) A. G. O. Files EXAMINED by J.P. (Date) 3-30-21

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

No requests for disposition.
grave location blank only

(15) G. R. S. Files EXAMINED by mch (Date) 3-31-20

checked
10/27/20

III. FINAL ACTION

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

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

(17) Instructions that remains be left undisturbed

(18) Typed by Checked by (Date)

B. G. R. S. FORM NO. 114 made (Date)

(19) Typed by Checked by (Date)

C. SUSPENSION REMARKS: *Form 120 9-9-20 Henry C. Akud, w/p
step-father to Arthur C. Verge, 904 Merritt
Bldg. Los Angeles Calif. requests body
remains in Europe. cc. 9-20-20*

D. Dispatched (Date) (Let. Trans. No. *12/3/20*)

PARAGRAPH 2 - NOT TO BE RETURNED

HA

Approved by

(Date)

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

SEP 2 1920

Push Answer

FROM: Chief, Graves Registration Service, Q.M.C.
TO: Henry C. Akin, Monrovia, Calif.
SUBJECT: Remains of Pvt. David Burckell, Co. C. 364th Inf. (2266419)

The records of this office show that you have requested that his body remain in Europe

If these are not the correct instructions, please correct them. Make corrections on reverse side of this sheet.
The nearest relative may choose between, (1) return of the body to any address in the United States; (2) interment in Arlington, Va., or any other National Cemetery; or (3) remain in Europe.

By authority of the Quartermaster General:

CHARLES C. PIERCE,
Major, U.S.A.

If all blank spaces below are not filled out, it will necessitate a return of this paper and a SERIOUS DELAY in the shipment of this body. State in each case WHETHER these relatives are STILL LIVING.

RECEIVED
Form No. 115
9-20-20

NAME OF	NO. & STREET	TOWN	STATE
Soldier's Widow	<i>None</i>		
Soldier's Children (Name oldest first)	<i>None</i>		
Father	<i>H.C. Akin Step Father only living</i>	<i>Monrovia</i>	<i>California</i>
Mother	<i>Dead</i>		
Brothers (Name oldest first)	<i>1/2 Brothers only 1. Henry C. Akin Jr 2. Raymond " " 3. Arthur</i>	<i>9000 W. Verge</i>	<i>Los Angeles Meritt Blvd Calif</i>
Sisters (Name oldest first)	<i>1/2 Sister only 1. Elizabeth Akin</i>		

Date: *Sept 9th 1920*
Address: *9000 W. Verge Meritt Blvd. L.A. Calif*
Relationship: *Step-father*
Signature: *Henry C. Akin*

IMPORTANT: - CAREFULLY read instructions before filling out this paper. (OVER)

1920.

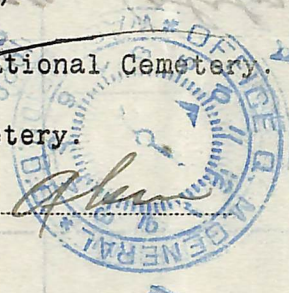
I, the undersigned, am the step father and nearest living relative of the within
(Relationship)
named soldier, and desire the following disposition of his remains, viz:
(Strike out all except the one showing the disposition desired).

1. As stated on first page of this sheet. *to remain in Europe.*
2. ~~To be returned to the U.S. and shipped to _____~~

(R.R. Station) _____ (State) _____
3. ~~To be returned to the U.S. and buried in _____ National Cemetery.~~
4. ~~To remain in Europe, for burial in a permanent American Cemetery.~~

Signature

Henry C. [Signature]



INSTRUCTIONS FOR FILLING OUT

1. If definite instructions as to the disposition of a body are not received from the nearest relative within 2 weeks of its arrival at New York, burial will be made without further notice in the World War Section of Arlington National Cemetery.

The transfer of bodies will be made ENTIRELY at Government expense.

3. This paper MUST BE SIGNED BY THE PERSON WHO IS THE NEXT of kin IN THE ORDER shown in the square on the other side of this sheet.

4. This paper must be returned showing the name and address of each of the nearest living relatives in the spaces provided therefor on the other side of this sheet.

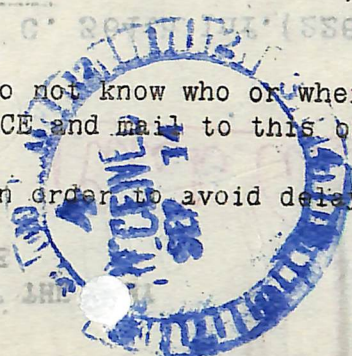
5. If there are minor children of the deceased soldier and no widow, the LEGALLY APPOINTED GUARDIAN of the children should ascertain their wishes and act for them in this matter.

6. If YOU are not the nearest relative, please ask the nearest relative, if living near you, to fill out this paper.

7. 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.

8. You are requested to return this paper AT ONCE in order to avoid delay in the case of this body.

9. Use the enclosed envelope - pay no postage.



J.M.S.

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

JUL 20 1920

FROM: Chief, Graves Registration Service, Q.M.C.
Henry C. Akin, Monrovia, Calif.
TO:
SUBJECT: Remains of Pvt. David Burckell

The records of this office show that you have requested that his
Not returned to United States.

body be _____

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~~ *Europe*.

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.

(OVER)

INSTRUCTIONS FOR FILLING OUT

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

Burckell,

David

2,266,419

(Surname.)

(Christian name in full.)

(Army serial number.)

Pvt

Co C, 364 Inf

(Rank and organization.)

State your relationship to the deceased.

Step father

Do you desire the remains brought to the United States?

No

(Yes or no.)

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

No

(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)

Henry C. Abin

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

Letter sent to-

Mr. Henry C. Akin
Monrovia, Calif.

Checked
10/27/20

Monrovia - Aug 27
1252 - 70
10-15

GRAVE LOCATION BLANK

MURCHELL

2266419

DAVIL

Surname

Number

First Name

Rank

Company

Organization

NOVEMBER 2, 1918

Date Of Burial

Place of Burial

MAP COURTRAI (THIEL)

198.4-461.4-1;40 000

Map Location And References

15
Grave No.CROSS
Kind of Marker

Identification Tags- Body---Marker

YES

YES

If unknown Give Remarks Here And Below

*Warezhem (Belgium)**(C-909) SHT. 79 NE COORD. 198.4
Courtrai (N: 461.4)*C. A. REXROAD SENIOR CHAPLAIN 81ST. DI
Reported by:

FRANK O'CONNOR

DAVID
First Name

BRUCE
Number

MURPHY
Surname

20
RECEIVED
NOV 18 1952
C. I. O. (UNITED)
P. M. 3
1111 12th St. N.W.
WASHINGTON 5, D. C.

OFFICE

Kind of Matter

YES

YES

Identification Yes - Body - Matter

If answers are "Yes" here and below

909-2070

ON: NO.

Report No.

C. A. BARNARD SENIOR CHAIRMAN CASE 61
Reported by