

DEC 1 - 1925 DATE

1. NAME CAMP, Chester C SERIAL No. 1534651
 RANK Cook ORGANIZATION Sup. Co., 135th F.A.
 & DIVISION 37
 GRAVE LOCATION French Mil. Cty. Commercy (Meuse) 614
 CTY. NAME NUMBER

GRAVE 21 ROW PLOT
 2. ORIGINAL BATTLE AREA GRAVE LOCATION 21 Commercy, (Meuse)
 GRAVE COMMUNE DEPT.

COORDINATES Commercy B 220.05 N 342.05 E

CONCENTRATED TO Hospital Burial 2a
 DATE GRAVE ROW PLOT
French Mil. Cty. Commercy, (Meuse) XXXX 614
 CEMETERY CTY. NUMBER

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

Tag on cross.

DATE OF DEATH Nov 28 1918

STATE FROM WHICH HE CAME Ohio

Data form 1-A.

MEDALS OR DECORATIONS AWARDED none

SUBSEQUENT REBURIALS

DATE GRAVE ROW PLOT CEMETERY

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR

I.H. Joffe. 1st Lt. OMC.

3. FINAL GRAVE LOCATION July 26th, 1922. 9 25 C
 DATE GRAVE ROW PLOT
Block

ccg

St. Mihiel American Cemetery, THIAUCOURT, (M.-et-M.)

Robert G. Davis
 Major General
 The Adjutant General.
 By MS

CEMETERY

1
 DEC 3 1925
 WORLD WAR BIV. AUDITED BY
Nov. 6-14-21



AUDITED BY

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 16, 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.

*Lied Bronc Sew. 11/28/18 Cont 22219 CC 357
12/12/18*

GRAVE LOCATION BLANK

R

LOCATION OF THE GRAVE OF

... Camp, ... (1534651), ... Chester C., ...
(Surname.) (Number.) (First Name and Initials.)

... Cook, 135th. F.A., Supply Co. ...
(Rank.) (Organization.)

DATE OF BURIAL Nov. 29, 1918.

PLACE OF BURIAL Commercy, France.

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

U.S. Army Cemetery.

GRAVE NUMBER 2, Plot 2.

HOW MARKED: Name Peg? yes. Cross? to be.

Headboard? Bottle?

IDENTIFICATION TAGS: two

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:

REPORTED BY:

W L Tower

(Signature and Rank of Reporting Officer.)

This portion to be forwarded to Adj. Gen'l., G. H. Q., A. E. F.

CODE SLIP

HEADING	SUB-HEADING	NO. OF COILS	CODE
NAME	Camp	3	3 1 30
	Chester C.		
	CEMETERY 1233	1	3
BURIED	GRAVE 9	2	09
	ROW 25	2	25
	BLOCK C	1	3
STATE	Ohio	2	41
RANK	Capt	1	2
DIVISION	37	2	37
ORGANIZATION	135	3	135
ARM	7A	1	3
MARITAL	Brother	1	2
	no		
NAME	Camp	3	3 1 3
	Wm W.		
RESIDENCE	403 Jefferson St		
	Fairmont, W. Va.		
	STATE W. Va.	2	47
	COUNTY Marion	2	25
	CITY Fairmont	5	010
RELATION	Mother	1	1
OTHER		1	
ELIGIBILITY	Head	1	6
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE		1	

AUDITED

APR 5 1932

AR

AW

ACCEPTANCE
29/514
Elm

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Camp, Chester C. 1233-B

July 7, 1930.

Mr. William W. Camp,
405 Jefferson St.,
Fairmont, W. Va.,

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

August 29, 1929.

Camp, Chester C.
1233

Mr. William W. Camp,
403 Jefferson St.,
Fairmont, W. Va.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated May 31, 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:

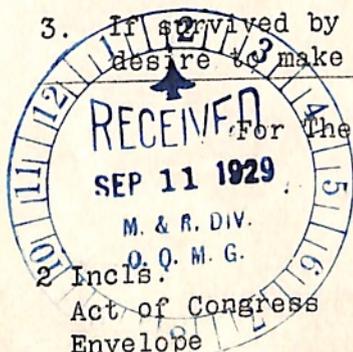
*He was single
not Married*

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 Dead

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

*No one entitled
to make Pilgrimage,
yours truly
William W. Camp
(His Brother)*



Very truly yours,

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Camp, Chester C.

May 31 , 1929.

Mr. William W. Camp,
403 Jefferson St.,
Fairmont, W. Va.

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 mother of the late Chester C. Camp, Cook, Supply Co., 135th P. A., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, France.

Will you please advise this office whether or not he is survived by a mother or widow who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish the full names and addresses of the mother and widow in order that action may be taken to extend invitations to them to make the pilgrimage. Both mothers and widows are entitled to make the pilgrimage.

Your attention is particularly invited to Section 4 of the enclosed Act, which defines the terms "mother" and "widow". If the relative is a stepmother, mother through adoption, or any woman who stood in loco parentis to the decedent, a statement as to her relationship is requested. If he was survived by a widow who has since remarried it is also requested that a statement to that effect be made.

For your reply, you may use the enclosed envelope which requires no postage.

For The Quartermaster General,

Very truly yours,

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

2 incls.
Act of Congress.
Envelope.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Camp, Chester C. 1233-B

July 7, 1930.

Mr. William W. Camp,
403 Jefferson St.,
Fairmont, W. Va.,

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

August 29, 1929.

Camp, Chester C.
1233

Mr. William W. Camp,
403 Jefferson St.,
Fairmont, W. Va.

D
Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated **May 31, 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
OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Camp, Chester C.

May 31, 1929.

Mr. William W. Camp,
403 Jefferson St.,
Fairmont, W. Va.

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 brother of the late Chester C. Camp, Cook, Supply Co., 135th F. A., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, France.

Will you please advise this office whether or not he is survived by a mother or widow who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish the full names and addresses of the mother and widow in order that action may be taken to extend invitations to them to make the pilgrimage. Both mothers and widows are entitled to make the pilgrimage.

Your attention is particularly invited to Section 4 of the enclosed Act, which defines the terms "mother" and "widow". If the relative is a stepmother, mother through adoption, or any woman who stood in loco parentis to the decedent, a statement as to her relationship is requested. If he was survived by a widow who has since remarried it is also requested that a statement to that effect be made.

For your reply, you may use the enclosed envelope which requires no postage.

For The Quartermaster General,

Very truly yours,

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

2 incls.
Act of Congress.
Envelope.

QM 293 A-C

CAMP, Chester C. - Cook

January 19, 1924

Mr. William W. Camp,
403 Jefferson St.,
Fairmont, W.Va.

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.

O.Q.M.G.
Central Mail & Files Bldg.

Assistant Quarter

RD



JAN 19 1924
H.E.

Camp

(Surname.)

Chester C.

(Christian name in full.)

1,534,651

(Army number.)

Cook

Sup Co 135 FA

(Rank and organization.)

State your relationship to the deceased *Brother*

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)

*William H. Camp
Fairmount N.Y.*

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

of Troy Landing

Checked
1-25-21
E.M.

Drawn by mks
614-25
1-25-21

To be prepared in triplicate.

DATE Feb. 16, 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 CAMP, Chester C
 2. No. 1534651
 3. Rank Cook
 4. Org. Sup.Co. 135th F.A.
 5. D.D. Nov. 28th.
 6. C.D. Broncho Pneumonia

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

Discrepancy found upon disinterment

7. Grave No. 21 Sec. _____
 8. Plot _____ Row _____
 9. _____

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

18. Cemetery French Mil.
 20. Dept. or County Meuse
 22. G.R.S. Hdqrs. Code No. 614

19. Commune or town Commercy
 21. Country France.

23. Disinterred (Date) Feb. 16, 1922

By W.C. Follmer

24. Inscription on grave marker:

Name Chester C. Camp
 Rank Cook

Serial No. _____
 Organization Sup.Co., 135 F.A.

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

E Seils
Erich Seils, Checker.
 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).

Bodies on either side exhumed and identified.

27. Condition of body Badly decomposed. Features unrecognizable.

28. Nature of burial U.S. 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 Feb. 16, 1922 By W.C. Follmer

31. Casket sealed by W.C. Follmer

Signature of Embalmer, (Supervisor

W.C. Follmer

AUDITED BY

SHIPMENT. (Show actual marking of box.) Box No. C-24193

32. Designation of body:

Name Chester C. CAMP Serial No. 1534651

Rank Cook Organization Sup. Co., 135th FAI

33. Consigned to:

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

34. Casket boxed and marked (Date) Feb. 16, 1922 By W.C. Follmer

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 *D. E. Lowry*

D. E. Lowry, 1st Lt. QMC

36. Remarks Tag on body entirely corroded.

37. Shipped from point of Operation: (Date) ~~Feb. 16, 1922~~

To point of Concentration _____

Convoyer _____ Signature Shipping Officer _____ (Name)

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

By G.R.S. Representative _____

39. Shipped from Railhead or Point of Concentration: Date Feb. 16, 1922

To Permanent Cemetery St. Mihiel Amer. Cem. #1233, Thiaucourt (M&M)

Convoyer Frank Atwell Signature Shipping Officer *D. E. Lowry*

D. E. Lowry, 1st Lt. Q.M.C.

40. Received: Date 18 FEB 1922

G.R.S. Representative *R. M. Overcheat* *Margue Sept*

41. Reinterred, July 26, 1922

(Date)

42. Grave No. 9 Section _____

43. ~~Plot~~ Block C Row 25

G.R.S. Representative *A. E. Dewey*

1st Lt. QMC

Place Commercy (Meuse)

REPORT OF DISINTERMENT AND REBURIAL

Date Feb. 16, 1922.

1. REMAINS OF CAMP. Chester C. SERIAL NUMBER 1534651

RANK cook ORGANIZATION Sup. Co., 135th I.A.

2. Disinterred (date): Feb. 16, 1922, Gr. 21, Cem. 614, Commercy.
From (give complete location):

By: Group Follmer's Unit I. S. #8

3. Reburied (date): July 26, 1922, Grave 9, Block C, Row 25, Cemetery #1233, Thiaucourt.
In (give complete location):

By: Group Reburial Unit _____ Nature of reburial Casket and shipping case.

4. Report as to nature of original burial and condition of body upon disinterment:
U.S. uniform and wooden box. Badly decomposed. features unrecognizable.

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

(b) Other means of identification found upon disinterment, and general remarks:
Bodies on either side exhumed and identified.

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

(a) Height (actual measurement) Impossible to determine

(b) Weight (estimated) Impossible to estimate

(c) Hair—Color None

Quantity _____

Characteristics _____

(d) Hair on face—Color None

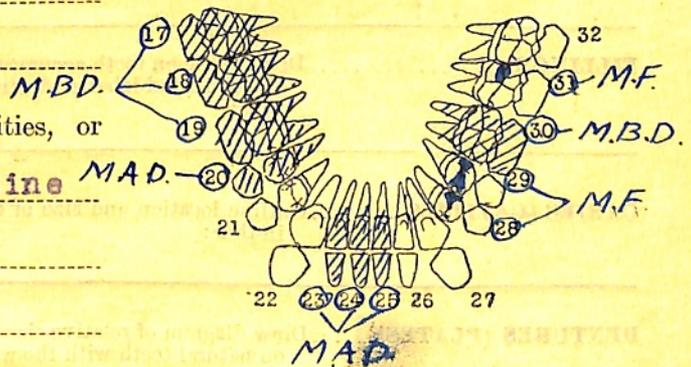
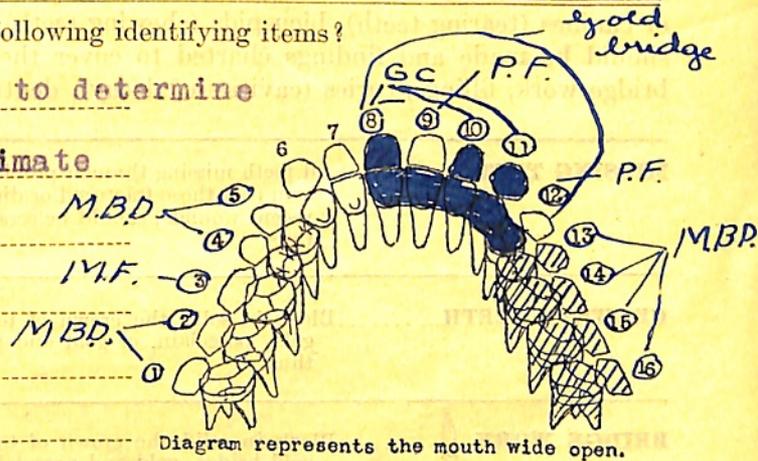
Location _____

Quantity _____

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

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

Impossible to determine



Erich Seils, Checker.

7. Disinterment supervised by W.C. Follmer, Sup. Emb.

Approved: D. G. Lowry, 1st Lt. QMC

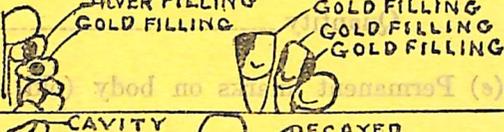
8. Reburial supervised by H. I. Kramer

Approved: A. E. Dewey, 1st Lt. QMC

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

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

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

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

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

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

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

COMPILATION OF DISPOSITION OF REMAINS DATA

File #62246

I. LOCATION INDEX CARD:

(a) Name CAMP, Chester C. Ser. No. 1534651
(b) Rank Cook Organization Sup. Co. 135th F.A.
(c) Date of death 11/28/18 (d) Cause of death Broncho. Pneu.

TYP. evs
CKR.

41/25 Exhumed
1/22
For Concentration
St. Michael 1233
att 5/17/22

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

(a) Grave No. 21 Row - Plot - Sec. - TYP. evs
(b) Emerg. Address Mrs. Attie F. Tracewell (Mother) 1895 E. 97th St., Cleveland, Ohio.

III. Files of soldiers dying from contagious diseases NO CARD CKR.

IV. A. G. O. DISPOSITION CARD:

Date of receipt -

(a) Name William W. Camp (b) Relationship Brother
(c) Address Fairmont - W Va - 90 Troy Laundry
(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 mks Date 1-25-21, 1920.

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

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

No correspondence

Examiner's Initials mks Date 1-25-21, 1920.

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

No Request for Disposition

(a) Cancellation memos referred to?

Examiner's Initials EB Date 1-25-21, 1920.

COUNTRY FRANCE CEMETERY No. 614 SHEET No. 25

Mo. Camp

m p

VII. G. R. S. Form No. 114 made _____, 1920.

Typed by _____, Checked by _____, 1920.

VIII. FINAL ACTION:

Following advice forwarded to Europe by { cable on _____, 1920
letter on **FEB 1 1921**, 1920

Par. 2 Not to be returned.

EW

IX.

CORRECTIONS

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

X. SUSPENSION REMARKS:

*B. A. H. P. - Mr. John N. Camp (Brother)
418 W. 5th St. Corvallis, Oregon.*

*F-120 - 4/15/21 - William W. Camp, Brother,
n/k/j - 403 Jefferson St., Fairmont, W. Va. -
leave in Europe, - H - 7/18/21 - sec.*

Location Index

..... Discrepancies

Name

Rank

Serial No.

Org.

Remarks

A. G. O. Card & Corr. *Stevens*

..... Discrepancies *1-25-21*

Name

Rank

Serial No.

Org.

Remarks *ea*

G. R. S. Corr.

..... Discrepancies

Name

Rank

Serial No.

Org.

Remarks

Checkers

..... Discrepancies

Name

Rank

Serial No. *4, 20 sent,*

Org. *2-25-21,*

Remarks

*Just
1-25-21
E.M.*

August 10th, 1921.

File No. 293.8 Cem.Div.Cor.Br.

Mr. William W. Camp,
403 Jefferson St.,
Fairmont, W.Va.

Re:- Camp, Chester C., Cook,
Serial No. 1534651,
Sup. Co., 135th P.A.

Dear Sir:-

Our Shipping Inquiry Form #120, dated April 15th, 1921, requesting that the remains of the deceased soldier named above be left in France for burial in a permanent American cemetery has been forwarded to the Cemeterial Division, Office of the Quartermaster General, Washington, D.C., for necessary action.

The Cemeterial Division, Washington, D.C., will furnish you the grave location in the permanent American cemetery as soon as possible after the body has been placed therein.

The Department desires to renew its previous expression of sympathy in your bereavement.

By authority of the Quartermaster General:

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

BY:

ew
F. C. PALLAS, *mics*
Executive Assistant.

MAILED
AUG 10 1921
COR. BR. G. P. S.

mcs/ew

RECEIVED

AUG 11 1921

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

*Deane
moh*

Harlow *dw.*

NAME OF DECEASED SOLDIER

CEMETERY NO.

DATE

Camp, Chester C. Cook

614 - 25

1/28/18²¹

SERIAL NUMBER

ORGANIZATION

C-705-163

1534651

Sup. Co., 135th F.A.

Date of Death, 11/28/18

WAR RISK INSURANCE INFORMATION

Copy fwd to Adj Weps.

DATE

2-23-21

NAME OF BENEFICIARY

RELATIONSHIP

Mr. John H Camp

Brother

Address

418 N. 5th St., Corvallis, Oregon.

S/709/LML

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

Row

NAME OF INCORPORATED SOCIETY

IDENTIFY NO.

DATE

Gen. Chester G. Cook

614 - 28

1/28/18

ORGANIZATION

SERIAL NUMBER

Date of Death 11/28/18

Sup. Co. 135th T.A.

153451

WAR RISK INSURANCE INFORMATION

DATE

RELATIONSHIP

NAME OF BENEFICIARY

Mr. John H. Cook

Address

AUG 11 1921

RECEIVED

4th Division

Overseas Project Sub-Section

Copy for [unclear]

418 2nd St., Cornwall, N.Y.

2/25/18

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
CEMETERIAL DIVISION

WASHINGTON

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

To: Mrs. Attie F. Tracewell, 1895 E. 97th St., Cleveland, Ohio

SUBJECT: Remains of Cook Chester C. Camp Ser No. 1534651 Sup Co 135 F A

William W. Camp (Brother) Fairmont, W. Va. c/o Troy Laundry
The records of this office show that you have requested that the body of the above-named Chester C. Camp

soldier remain in Europe

If these are not the correct instructions, please correct them. Make corrections on reverse side of this sheet.

The nearest next of kin may choose between, (1) return of the body to any address in the United States; (2) interment in the National Cemetery, Arlington, Va., or any other National Cemetery; or (3) body to remain in Europe.

By authority of the Quartermaster General.

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

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

Was soldier married? No

CEMETERIAL DIVISION

NAME OF—	NO. AND STREET.	TOWN.	STATE.
Soldier's widow <u>Single</u>	<u>noted</u>		
Soldier's children. (Name oldest first.)	<u>116</u>		
1 <u>None</u>	<u>7/18/21</u>		
2 <u>Dead</u>			
3 <u>Dead</u>			
Father			
Mother			
Brothers. (Name oldest first.)	<u>403 Jefferson St</u>	<u>Fairmont</u>	<u>W. Va</u>
1 <u>William W. Camp</u>		<u>Corvallis</u>	<u>Oregon</u>
2 <u>John H. Camp</u>			
3			
Sisters. (Name oldest first.)			
1 <u>None</u>			
2 <u>None</u>			
3			

Date 4/15-1921

Signature William W. Camp

Address Fairmont W. Va

Relationship Brother

Address *Johnnie M. ...* Relationship *brother*, 192
 Date *11-11-1921*
 I, the undersigned, am the *brother* (Relationship.) and nearest living next of kin of the within-named

soldier, and desire the following disposition of his remains, viz: *To be buried in*
 (Strike out all except the one showing the disposition desired.) *one of the American Cemeteries*

1. As stated on first page of this sheet.
2. To be returned to the U. S. and shipped to *no* (Name.)
 (R. R. station.) (State.)
3. To be returned to the U. S. and buried in *no* National Cemetery.
4. To remain in Europe, for burial in a permanent American Cemetery. *yes*

Signature *William M. Camp*

INSTRUCTIONS FOR FILLING OUT.

1. If definite instructions for the disposition of a body are not received from the next of kin within two weeks of its arrival at New York, burial will be made without further notice in the World War Section of Arlington National Cemetery.
2. The transfer of bodies will be made ENTIRELY at Government expense.
3. This paper MUST BE SIGNED BY THE PERSON WHO IS THE NEXT OF KIN IN THE ORDER shown in the square on the other side of this sheet.
4. This paper must be returned showing the name and address of each of the nearest next of kin in the spaces provided therefor on the other side of this sheet.
5. If there are minor children of the deceased soldier and no widow, the LEGALLY APPOINTED GUARDIAN of the children should ascertain their wishes and act for them in this matter.
6. If YOU are not the nearest next of kin, please ask the nearest next of kin, if living near you, to fill out this paper.
7. If YOU are not the nearest living next of kin and do not know who or where the nearest relatives are, please fill out this paper AT ONCE and mail to this office.
8. You are requested to return this paper AT ONCE in order to avoid delay in the case of this body.
9. Use the inclosed envelope—pay no postage.

NOTE.—INSTRUCTIONS FOR THE DISPOSITION OF REMAINS will be issued by this office upon the properly executed authority of the legal next of kin in each case. The widow is the first person having disposition of the remains of her husband. Should there be no widow or children, the father and, in turn (upon his decease), the mother, is the proper authority. The brothers, in order of seniority, and then the sisters in order of seniority, if there are no brothers, rank next in authority to decide. Under an opinion rendered by the Judge Advocate General of the Army, if a widow has remarried she forfeits her right, and the next of kin as given above will make decision.

COMPILATION OF DISPOSITION OF REMAINS DATA

File #62246

*Form 115
at 5/17/22*

I. LOCATION INDEX CARD:

(a) Name CAMP, Chester C. Ser. No. 1534651
 (b) Rank Cook Organization Sup. Co. 135th F.A.
 (c) Date of death 11/28/18 Cause of death Broncho. Pneu.

TYP. *gvs*

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

(a) Grave No. 21 Row - Plot - Sect. - TYP. *gvs*
 (b) Emerg. Address Mrs. Attie F. Tracwell (Mother) 1395 E. 97th St.,
Cleveland, Ohio.

III. Files of soldiers dying from contagious diseases **NO CARD** CKR

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

*No case pending investigation as to N/A.
 W.R.E.A. Mr. John H. Camp (brother) MB 3/10/21
 418 W. 5th St., Corvallis, Oregon.*

V. Following advice forwarded to Europe by - (cable on 1921
 (letter of transmittal on **FEB 1 1921**)

Par. 2 Not to be returned.

MAR 12 1921

VI. Form 115 forwarded to G.R.S. Hoboken, N.J. 1921

VII. SUPPLEMENTARY REQUESTS

Date of and Source	Relationship and name	Desires	Action taken

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

COUNTRY CEMETERY NO. SHEET NO.
 C.R.S. FORM 115-A
 August, 1920

S-666/MB FRANCE 614 25

PRIORITY 104

MAR 10 1921 *A.L.*

Copy

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

Please
rush

Harlow *cu*

NAME OF DECEASED SOLDIER

CEMETERY NO.

DATE

Camp, Chester C. Cook

614 - 25

1/28/21

SERIAL NUMBER

ORGANIZATION

C - 705-152

1543651

Sup. Co. 135th F.A.

Date of Death 11/28/18

WAR RISK INSURANCE INFORMATION

Advance Made

Orig attached to #115

5-1 1922

DATE

6 2-23-21

NAME OF BENEFICIARY

Mr John K Camp

RELATIONSHIP

Brother

Address

418 N. 5th St. Corvallis Oregon

S/709/LML

67246

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Camp, (153465I), Chester C.,
(Surname.) (Number.) (First Name and Initials.)

Cook, 135th. F.A., Supply Co..
(Rank.) (Organization.)

DATE OF BURIAL. Nov. 29, 1918.

PLACE OF BURIAL. Commercy, France.
(Give Cemetery, Town and Department.) Map reference must specify clearly what map is used.

U.S. Army Cemetery.

FILE

GRAVE NUMBER. # 2, Plot 2.

HOW MARKED: Name Peg? yes... Cross? to be..

Headboard? Bottle? ..

IDENTIFICATION TAGS: two

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:

614

REPORTED BY:

W. J. Towner
(Signature and Rank of Reporting Officer.)

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



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

WAR DEPARTMENT

Office of the Quartermaster General of the
Washington

PLEASE
EXPEDITE

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

Date 2/26/21.

File No. Requisition.

(SPECIAL)

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 Camp ✓
- b. Christian name Chester C. ✓
- c. Serial Number 1534651 ✓
- d. Organization Sup. Co., 135th F.A. ✓
- e. Rank Cook. ✓
- f. Date of death 11/28/18. ✓
- g. Cause of death B. Pneumonia. ✓
- h. Authority (C.O.#) 357
- i. ~~Emergency address~~ Mrs. Attie Tracewell
- j. ~~Relationship~~ 1895 E. 97 St. Cleveland Ohio
(mother)

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

ADJUSTMENT MADE
MAR 21 1921
62246
FILE

FILE

J

Howe, J. A. E. P.S.
W7 3/3/21

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

CEMETERY NO: 614
SHEET NO: 25
TYPED BY: I.W.
S/713/LML

BY: *H. J. Conner*
H. J. CONNER,
1st. Lieut, Q.M.C.

Rec'd World War Div.
Date MAR. 3. 1921

MAR 2 1921

WAR DEPARTMENT
Office of the Quartermaster General of the Army
Washington

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

Date 2/26/21.

File No. Requisition.

(SPECIAL)

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 Camp ✓
- b. Christian name Chester C. ✓
- c. Serial Number 1534651 ✓
- d. Organization Sup. Co., 135th F.A. ✓
- e. Rank Cook. ✓
- f. Date of death 11/28/18. ✓
- g. Cause of death B. Pneumonia. ✓
- h. Authority (C.O.#) 357
- i. Emergency address Mrs. Attie Tracewell
1895 E. 97 St. Cleveland
Ohio.
- j. Relationship (mother)

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

ADJUSTMENT MADE
MAR 21 1921
FILE 62246

FILE

J

Donnelly J.A.E.P.S.
W7 3/3/21

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

CEMETERY NO: 614
SHEET NO: 25
TYPED BY: I.W.
S/713/LML

BY: *H.J. Conner*
H. J. CONNER,
1st. Lieut. O.M.C.

Rec'd World War Div.
Date MAR 3... 1921

MAR 2 1921

Office of the Comptroller General of the United States
Washington

Information received of A.C.C. (1910)

1910

Registration

File No.

The Comptroller General, U.S. Army, (General Division)

To: The Adjutant General of the Army, 2nd & 3rd Sts., Washington, D.C.

Information required for A.C.C.

It is requested that the items indicated below be prepared, and
submitted to the Information Bureau.

- 1. Name of each person
- 2. Date of birth
- 3. Date of entry into service
- 4. Service number
- 5. Organization and Co., 1st Regt. I.A.
- 6. Rank

FOR INFORMATION
(See page 12 of the Service Record)

ADJUSTMENT

MAR 31 1921

FILE

MAR 3 1921

RECEIVED