

~~Caralunas, Frank - 56,328~~

Port. 1/2. M. S. Co. 28 Aug.

~~Caralunas~~

K La

5/21/18

1st. 207/11 - 1263

FILE

3025



G.R.S. Form #114 B

To The A. G. O.

FEB 10 1926

DATE 1373

1. NAME Carelunas, Frank SERIAL No. 56328
 RANK Pvt. 1st. cl ORGANIZATION MG. Co. 28th Inf
 GRAVE LOCATION Amer. Cty. Villers-Tournelle (Somme) 176
CTY. NAME NUMBER
106 B
GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 15-D AM .MIL. CTY. CANTIGNY Somme
GRAVE COMMUNE DEPT.

COORDINATES 21 SE-121.98 331.90

CONCENTRATED TO 6/2/19. 2 A
DATE GRAVE ROW PLOT
Am. Mil. Cty. Villers Tournelle (Somme) Map 21 SE. E 119.8.
N. 330.8. 176
CEMETERY CTY. NUMBER

Form 16, 6/2/19.

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

Form 16, 6/2/19. signed Lt. Temple Bowling shows Ident. tag found on cross.

Form 16-A, 12/8/20. signed S.D. Campbell, Capt. Inf. shows ident. tag found on cross. No other means of identification.

SUBSEQUENT REBURIALS 11/8/20. 106 B 176
DATE GRAVE ROW PLOT CEMETERY

Form 16-A, 12/8/20.

STATE FROM WHICH HE CAME Ohio Pa

MEDALS OR DECORATIONS AWARDED cit of 1st div Jan 1-20
DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR W.R. BUCKLEY, Capt. QMC.

3. FINAL GRAVE LOCATION Oct. 17, 1922. 15 17 Block C
DATE GRAVE ROW PLOT

Robert O. Davis, Major General

The Adjutant General By E. P.

Somme American #636, Bony (Aisne).

CEMETERY

FEB 13 1926

A.G.O. FEB 10 1926 WORLD WAR DIV.

MAR 24 1928

AUDITED BY

WS 3/28/28 80

86

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.



Co. MG. 28th Infantry
1st Division.

CARALUNAS Franck - PFC 56328

I was with Caralunas when he was killed. He was shot by a sniper as he was looking the gun on the tripod. He lived about 45 minutes after he was hit. The only remark he made was : "I am going to die." This was about 200 yards to the right of Cantigny and about 75 yards to the left of the Montdidier road. We took him to the regimental aid station but I do not know where he was buried.

Informant : CHRISTENSON Walter T - Sgt. 56299
Co. MG, 28th Infantry.

Home : R.F.D. #2 Bridgman, Mich.

Signed : George A. GARRIGAN, 1st Lieutenant
28th Infantry

REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name: CARAJUNAS, Frank

Number: 56328

Rank: Pvt.

Organization: 1st. Co. M. G. BN. 28th. Inf

Disinterment and Reburial made by Group 1 Unit 302

Disinterred (Date) 6-2-19 From: (Give complete location)

Grave-15-D- AM.MIL.CEM., Cantigny, Somme- 21SE-121.98-331.90

Reburied (Date) 6-2-19 in: (Give complete location)

Grave-2-#-Sec A -Villers-Tournelle, Somme-21SE-119.76-330.92

176

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

Buried in Burlap-- Decomposed

Was one identification tag found upon the body?

What other means of identification were found on the body?

Tag on Cross

11264

Note:

CONFIRMED N° D

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: Lt. Temple Bowling

Lt. Temple Bowling

C.O. Group 1 Unit 302

Date 6-2-19

REPORT OF DISTURBANCE AND REBURIAL

Remains of:

Name: CARLINA, Frank

Number: 58328

Rank: Pvt.

Organization: 1st Co. M. G. B. N. 88th Inf.

Disturbance and Reburial made by Group 1

Unit: 302

Date: 6-2-19

From: (Give complete location)

Grave-15-D-AM.HIL.G.M., Gentry, Somme - 218-121.98-321.90

Date: 6-2-19

From: (Give complete location)

Grave-2-A-302 A - Villers-Tornelle, Somme - 218-119.78-320.92

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

Buried in Burlap - Decomposed

Was the identification tag found upon the body?

What other means of identification were found on the body?

Tag on Cross

Note:

If upon disturbance, effects are found upon bodies, they will be promptly sent to the Medical Dept direct as required by G.O. 170, S.M. 2, 1918. After being carefully examined for clues to identity in dental cases, no other record will be made and referred to Chief, Graves Registration Service.

Supervised by Lt. Temple Bowling

Lt. Temple Bowling

RECEIVED

7 JUL 1919

O. C. G. M.

G. R. S.

France

Caralunas, Frank.

Pvt 1st class Machine Gun Co. 28th
Infantry.

Killed in action May 21, 1918.

Emergency address: Mrs. Mary
Caber, sister, 420 Charion St.,
Tamaqua, Pa.

A.G.O. 6/22/18

Card on file

Write nothing below this line.

Write nothing above this line.

CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME <i>Caralunas</i>	<i>CAR</i>	3	<i>318</i>
BURIED	CEMETERY <i>636</i>	1	<i>5</i>
	GRAVE <i>15</i>	2	<i>15</i>
	ROW <i>17</i>	2	<i>17</i>
	BLOCK <i>C.</i>	1	<i>3</i>
STATE	<i>Penn</i>	2	<i>44</i>
RANK	<i>P7C</i>	1	<i>2</i>
DIVISION	<i>1</i>	2	<i>01</i>
ORGANIZATION	<i>28</i>	3	<i>028</i>
ARM	<i>Inf</i>	1	<i>1</i>
MARITAL	<i>No</i>	1	<i>2</i>
NAME <i>Gover, Mrs</i>		3	<i>7</i>
RESIDENCE <i>420 Union St. Yamagua, Pa</i>	STATE <i>Penn</i>	2	<i>44</i>
	COUNTY <i>Delaware</i>	2	<i>4</i>
	CITY <i>Yamagua</i>	3	<i>275</i>
RELATION	<i>Mother</i>	1	<i>1</i>
OTHER	<i>Sister</i>	1	
ELIGIBILITY <i>No SM</i>	<i>Dead</i>	1	<i>6</i>
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF TRIP	MO.	1	
	YR.	1	
ACCEPTANCE <i>29/514</i>		1	

Sister

AUDITED
SEP 10 1932 *MB*

BM

QM 293 A-M
Caralunas, Frank (SON)

September 21, 1932

Mrs. Mary Gover,
420 Union Street,
Tamaqua, Pennsylvania.

Dear Madam:

This office is making an earnest endeavor to communicate with all women who may be eligible to make a pilgrimage to the cemeteries of Europe under the provisions of the Act of March 2, 1929, as amended May 15, 1930.

It is therefore requested that you advise whether or not your brother, the late Private first class Frank Caralunas, is survived by any woman who stood in loco parentis to him for a period of five years at any time prior to his reaching eighteen years of age, and if so, her name and address. It will be appreciated if you will also furnish the dates of death of your parents.

A self-addressed envelope which requires no postage is enclosed for your convenience in replying.

For The Quartermaster General. ①

Very truly yours,

CHAS. W. DIETZ,
Captain, Q. M. Corps,
Assistant.

Enclosure:
Envelope.

KK
C

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

July 8, 1930

Caralunas, Frank 636-S

Mrs. Mary Grover
420 Union St.
Tamaqua, Pa.

Dear Madam:

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

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
Caralunas, Frank
636

August 27, 1929.

Mrs. Mary Gover,
420 Union St.,
Tamaqua, Pa.

Dear Madam:

The records of this office do not indicate that a reply has been received to our communication dated May 16, 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.

No.

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
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

May 15, 1929.

Caralunas, Frank

Mrs. Mary Gover,
420 Union St.,
Tamaqua, Pa.

Dear ~~Sir~~: **MADAM**

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

The records of this office show that you are the sister of the late Private Frank Caralunas, first-class, Machine Gun Co., 28th Infantry, whose remains are now interred in the Somme American Cemetery, Bony, Aisne, 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-M
Caralunas, Frank (SOM)

September 21, 1932

Mrs. Mary Gover,
420 Union Street,
Tamaqua, Pennsylvania.

Dear Madam:

This office is making an earnest endeavor to communicate with all women who may be eligible to make a pilgrimage to the cemeteries of Europe under the provisions of the Act of March 2, 1929, as amended May 15, 1930.

It is therefore requested that you advise whether or not your brother, the late Private first class Frank Caralunas, is survived by any woman who stood in loco parentis to him for a period of five years at any time prior to his reaching eighteen years of age, and if so, her name and address. It will be appreciated if you will also furnish the dates of death of your parents.

A self-addressed envelope which requires no postage is enclosed for your convenience in replying.

For The Quartermaster General.

Very truly yours,

CHAS. W. DIETZ,
Captain, Q. M. Corps,
Assistant.

Enclosure:
Envelope.

KK

1932 SEP - 21 - PM 4:24

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

July 8, 1930

Caralunas, Frank 636-S

Mrs. Mary Grover
420 Union St.
Tamaqua, Pa.

Dear Madam:

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

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

Caralunas, Frank
636

August 27, 1929.

Mrs. Mary Gover,
420 Union St.,
Tamaqua, Pa.

Dear Madam:

The records of this office do not indicate that a reply has been received to our communication dated **May 16, 1929**, making inquiry concerning the name and address of the mother and widow of the deceased service man above named. These addresses are desired with a view to ascertaining the number of mothers and widows who desire to make a pilgrimage to the cemeteries of Europe in which the remains of their sons and husbands are interred.

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

Write answers in space below

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

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

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

For The Quartermaster General,

Very truly yours,

2 Incls.
Act of Congress
Envelope

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

QM 293 A-C
IN REPLY REFER TO
Caralunas, Frank

May 16, 1929.

Mrs. Mary Gover,
420 Union St.,
Tamaqua, Pa.

Dear Sir: *Malaw*

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 sister of the late Private Frank Caralunas, first-class, Machine Gun Co., 28th Infantry, whose remains are now interred in the Somme American Cemetery, Bony, Aisne, 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.

DISPATCHED

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

QM 293 A-C

February 19, 1927.

CARALUNAS, Frank - Pvt 1/c.

Mrs. Mary Geber,
420 Union Street,
Tamaqua, Penna.

Dear Madam:

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 overseas military cemetery is to be maintained by the United States for all time. The graves will be permanently marked by white headstones inscribed with the name, rank, division, organization, date of soldier's death and State from which he came. Headstones will be placed at all graves, as soon as possible, and without necessity 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 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.

K. J. HAMPTON,
Lt. Col. Q.M.G.
Assistant.

4PR

25/560/EYS



3025

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

CARALUNAS, 56328, Frank

(Surname). (Number). (First Name and Initials).

Pvt. 1cl. MG. Co. 28th., Infantry

(Rank). (Organization).

PLACE OF DEATH: Cantigny, France

CAUSE OF DEATH: Rifle fire
was taken to aid station

DATE OF BURIAL: (not known, soldier's body

PLACE OF BURIAL: not known

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

GRAVE NUMBER:

HOW MARKED: Name Peg? Cross?

Headboard? Bottle?

IDENTIFICATION TAGS:

Was one buried with body?

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?

Cantigny (Somme)
10 21 S. E. ROAD —

NEAREST RELATIVE: Mrs. Mary Gober,

ADDRESS: 420 Union St. Tamiqua, Pa.

RELATIONSHIP: Sister

REPORTED BY:

R. Wallace / 1st Lt 28th Inf
(Signature and Rank of Reporting Officer).

~~SECRET~~
GENERAL HEADQUARTERS
AMERICAN EXPEDITIONARY FORCES
ADJUTANT GENERAL'S OFFICE

FROM : ADJUTANT GENERAL
TO : C.O.Co. MG. 28th., Infantry
SUBJECT : Information for Burial Register.

1. You are directed to transmit without delay to the Chief, Graves Registration Service, the information indicated on enclosed Grave Location Blank as necessary for the completion of official records.

By Command of General Pershing:

Robert C. Davis
Adjutant General.

Note:

In case this item is checked, you will note hereon:

Nearest relative of deceased:

Relationship: _____

Address: _____

CEMETERIAL DIVISION
REGISTRATION SECTION

FILE
October 29th 1921

MEMO FOR: Cards Department.

1. CASE OF:

~~Machine Gun Co. 28th Inf.~~
ORGANIZATION (Old)

CARALUNAS 56328 Frank Pvt. 1/cl.
(Name)

Correction or additional data changes as shown below have been made on the Registration Card of the above-mentioned soldier and a corresponding change will be necessary on the Organization Card:

ORGANIZATION (New)

FILE NO.

SURNAME

SERIAL NUMBER

FIRST NAME AND INITIALS

RANK

DATE OF DEATH

CAUSE OF DEATH

	Date	Place	F-1A No.
Orig.			D-
1st Reb.			D-
2nd Reb.	12/8/20	176	D- 30268
3rd Reb.			D-

FILE

(Note: In the above spaces below double line fill in ONLY the new date and data correcting previous information)

BY: Miss Iannon

Card.
(Department)

5 x 8 card was sent to file.

Corrections made
on Organization
File Card:

By S/3324/LML

ADDRESS REPLY TO

Division
DIRECTOR OF STORAGE
MUNITIONS BUILDING

WAR DEPARTMENT
PURCHASE, STORAGE, AND TRAFFIC DIVISION
OFFICE OF THE DIRECTOR OF PURCHASE AND STORAGE
WASHINGTON

No:

From:

To:

Subject:

UNIT OF MEAS

UNIT OF MEAS

UNIT

UNIT OF MEAS AND WEIGHTS

UNIT OF MEAS

UNIT

UNIT

UNIT OF MEAS (PWA)

UNIT OF MEAS AND WEIGHTS

CBM

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

NOV 6 1920

FROM: Chief, Graves Registration Service, Q. M. C.

To: Mrs. Mary Gober, 420 Union St., Tamaqua, Pa.

SUBJECT: Remains of Pvt. 1/01. Frank Carolunas, Serial No. 56328,
M.G.Co., 28th Infantry.

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.

NAME OF—	NO. AND STREET.	TOWN.	STATE.
Was soldier married?			
Soldier's widow			
Soldier's children. (Name oldest first.)	1		
	2		
	3		
Father			
Mother			
Brothers. (Name oldest first.)	1		
	2		
	3		
Sisters. (Name oldest first.)	1		
	2		
	3		

Date

Signature

Address

Relationship

IMPORTANT.—CAREFULLY read instructions before filling out this paper.

RECEIVED BY
MAIL UNIT

(DATE)

JUN 29 1921

, 1920.

Cemeterial Division
Overseas Project Sub-Section

I, the undersigned, am the _____ and nearest living relative of the within-named
(Relationship.)
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.

2. To be returned to the U. S. and shipped to _____
(Name.)
_____ (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 _____

INSTRUCTIONS FOR FILLING OUT.

1. If definite instruction as to the disposition of a body are not received from the nearest relative 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 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 inclosed envelope—pay no postage.

3-7860

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

(Revised)
C. H. S. FORM NO. 100

7-17-22

SEP 20 1920

OM: O. Q. M. G.
CEMETERY DIVISION
Conditions Building
Room 128
PLEASE EXPEDITE

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

G.R.S. Form 8-W-A-30
Information requested of A.G.O.

Date Sept. 18, 1920

File Adjustment Made
Registration.

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 **Caralunas** *OK*
- b. Christian name **Frank** *OK*
- c. Serial Number **56328 (56238)** *OK*
- d. Organization **Machine Gun Co. 28th Infantry.** *OK*
- e. Rank **Pvt. 1/cl.** *OK*
- f. Date of death **5/21/18** *may 28/18*
- g. Cause of death **K/A** *OK*
- h. Authority (C.C.#) **201**
- i. Emergency address **Mrs. Mary Gaby 420 Union St., Jamaica, Penn.**
- j. Relationship **Sister**

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

B

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								

FILE

Donnelly J.A. E.P.S.
W7-9-20-20

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

CEREMETRY NO: 176

BY:

SHEET NO:
TYPED BY:

H.J. Conner
H. J. CONNER,
~~Quartermaster~~

FTD

Rec'd World War Div.

1st Lieut. Q. M. G.

S-713/MB

Date 9/20/20

8
18

SEP 20 1920

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

G.R.S. Form 8-W-430
Information Requested of A.G.O.

Date Sept. 18, 1920

File Adjustment Made
Registration.

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.

Special
3025
File No.

NOV 16 1920

1. It is requested that the items checked below be completed. Request confirmation of all information shown.

- a. Surname **Caralunas** *OK*
- b. Christian name **Frank** *OK*
- c. Serial Number **56328 (56238)** *OK*
- d. Organization **Machine Gun Co. 28th Infantry.** *OK*
- e. Rank **Pvt. 1/cl.** *OK*
- f. Date of death **5/21/18** *may 28/18*
- g. Cause of death **K/A** *OK*
- h. Authority (C.C.#) **201**
- i. Emergency address **Mrs. Mary Gabry 420 Union St., Tanawagua, Penn.**
- j. Relationship **Sister**

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

B

FILE

Donnelly J.A. E.P.S.
W7-9-20-20

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

CEMETERY NO: 176

BY:

SHEET NO:
TYPED BY:

H.J. Conner
H. J. CONNER,
~~Quartermaster General~~

FED

Rec'd World War Div.

1st Lieut. Q. M. C.

S-713/MB

Date *9/22/20*

8
18

Classification _____

CEMETRIAL DIVISION
GRAVES REGISTRATION SERVICE
REGISTRATION SECTION

Adjustment _____

Date 9-25-20

MEMORANDUM:

To: Registration Files Sub-Section

Subject: Adjustments made on Registration Files

- 1. Changes as checked have been made in the Registration Files which will necessitate a corresponding change in the Classification Files.

	CORP.	ADD. DATA		CORP.	ADD. DATA
File Number			Date of Burial		
Name			Date of Reburial		
Serial Number			Burial Information		
Rank			Nearest Relative		
Organization			Notified Nearest Relative		
Cause of Death			^{white} Blue Card thrown out 4X6	0	0
Date of Death <u>5X8</u>	✓		^{RB} White Card set up 3X5		✓
Casualty Cablgram Number <u>5X8</u>		✓			
<u>Remarks</u> <u>5X8</u>		✓			

O.K. Alphabetical Files R.E.S. 9-27-20.

O.K. Organization Files _____

O.K. State Files _____

FILE

Cemetery Audit Department
✓ Investigation & Adjustment Dept.

By Helene Myers

4 Cards attached.

SEP 22 1920

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL OF THE
WASHINGTON

FROM: O. Q. M. G.
CEMETERIAL DIVISION
Munitions Building
Room 1131

PLEASE
EXPEDITE

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

Date 9-21-20

File No. 3025 Registration.

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 CARALUNAS *OK.*
- b. Christian name Frank *OK.*
- c. Serial number 56328 *OK.*
- d. Organization M.G. Co., 28th Inf. *OK.*
- e. Rank Pvt. 1st Class. *OK.*
- f. Date of death *May 28/18*
- g. Cause of death K/A *OK.*
- h. Authority (C.C.#) 153 *OK.*
- i. Emergency address *OK.*
Mary Gaber,
420 Union St., Tamaqua, Pa.
- j. Relationship *OK.*
Sister.

BODY DESCRIPTION

(See page #2 of the Service Record)

- a. Age at 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			

FILE

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

Connelly I.A.
E.P.S. W-9-23-20

BY:

H. J. Conner

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

Rec'd Field War Div.
Date *9/23/20*

SEP 22 1920

WAR DEPT. & INVEST. DEPT.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
WASHINGTON

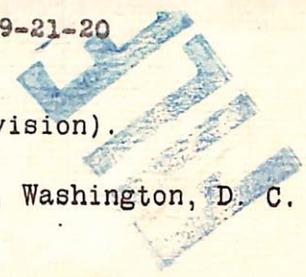
176

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

Date 9-21-20

File No. 3025 Registration.

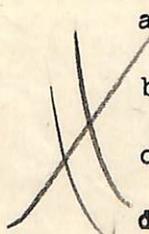
From: The Quartermaster General, U. S. Army, (Cemeterial Division).
To: The Adjutant General of the Army, 6th & B Sts., N. W., Washington, D. C.
Subject: Information required for G R.S.



1. It is requested that the items checked below be completed. Request confirmation of all information shown.

- a. Surname CARALUNAS *OK.*
- b. Christian name Frank *OK.*
- c. Serial number 56328 *OK.*
- d. Organization M.G. Co., 28th Inf. *OK.*
- e. Rank Pvt. 1st Class. *OK.*
- f. Date of death *May 28/18*
- g. Cause of death K/A *OK.*
- h. Authority (C.C.#) 153 *OK.*
- i. Emergency address *OK.*
Mary Gaber,
420 Union St., Tamaqua, Pa.
- j. Relationship *OK.*
Sister.

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



- a. Age at 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)

FILE

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

Handwritten initials 'HJ' in red ink.

Connelly I.A.
E.P.S.W. 7-9-23-20

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

BY:

HJ Conner
H. J. CONNER,

1st Lieut. ~~Captain~~ Q.M.C.

Rec'd by War Div.
Date *9/23/20*

176-65

56328

Caralunas,

Frank

(Surname.)

(Christian name in full.)

(Army serial number.)

Pvt 1cl MG Co 28 Inf

(Rank and organization.)

State your relationship to the deceased Sister

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)

Mary Guber

420 Union St.

Tamaqua

Penna.

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

COMPILATION OF DISPOSITION OF REMAINS DATA

File 3025

I. LOCATION INDEX CARD:

(a) Name CARALUNAS, Frank Ser. No. 56258
(b) Rank Pvt. 1/c Organization M/G Co. 28th Inf.
(c) Date of death 5/21/18 (d) Cause of death K/A

Exhumed - Concentration #636
5/22/20
Lou
Samson
mact
6-8-22

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

(a) Grave No. 2 Row - Plot - Sec. A TYP. HB
(b) Emerg. Address Mary Gaber (sister) 420 Union St. Tamaqua, Pa.

III. Files of soldiers dying from contagious diseases -- CKR 104

IV. A. G. O. DISPOSITION CARD:

Date of receipt Done

(a) Name Mary Gaber (b) Relationship Sister
(c) Address 420 Union St., Tamaqua, Pa
(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 AH Date 9-15-, 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 HW Date 9-15-, 1920.

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

No request for disposition

(a) Cancellation memos referred to? yes HW

Examiner's Initials HW Date 9-15-, 1920.

COUNTRY France CEMETERY No. 176 SHEET No. 65

Checked
AKC 11-2-20

RECEIVED BY
MAIL UNIT

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

Typed by _____, Checked by _____, JUN 29 1921, 1920.



VIII. FINAL ACTION:

Nov 5 20

Cemeterial Division

Overseas P. 1920 Sub-Section

Following advice forwarded to Europe by { cable on _____, 1920
letter on 9/24, 1920

Par. #2. Not to be returned (E.S.).

IX.

CORRECTIONS

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

X. SUSPENSION REMARKS:

Find (10-6) Mrs. Cavins; to advise Europe change in serial #

Place *Villers-Francais*
Date *Dec-8-20*

REPORT OF DISINTERMENT AND REBURIAL

1. REMAINS OF *CARALUNAS-FRANK* SERIAL NUMBER *56328*
RANK *POW-1/c* ORGANIZATION *M-4-Co-28th Inf-*

2. Disinterred (date) : *12-8-20* From (give complete location) : *Gr-2 Plot-A-
Amer-Cem-176-Villers-Francais-Somme*
By : Group *2* Unit *1*

3. Reburied (date) : *12-8-20* In (give complete location) : *Gr-106 Plot-B-
Amer-Cem-176-Villers-Francais-Somme*
By : Group *2* Unit *1* Nature of reburial *in pine box
in uniform*

4. Report as to nature of original burial and condition of body upon disinterment :
*in pine box - in uniform - badly decomposed
unrecognizable*

5. (a) Identification tags : Buried with body ? *No* On grave marker ? *Yes*
(b) Other means of identification found upon disinterment, and general remarks :
None

6. What does examination of body show as regards the following identifying items ?
(a) Height (actual measurement) *impossible to determine*
(b) Weight (estimated) *unable to estimate*
(c) Hair—Color *None on skull*
Quantity *None*
Characteristics *None*
(d) Hair on face—Color *None on face*
Location *None*
Quantity *None*
(e) Permanent marks on body (old scars, peculiarities, or missing parts) *unable to determine*
(f) Wounds or missing parts (received at time of casualty) *impossible to determine*

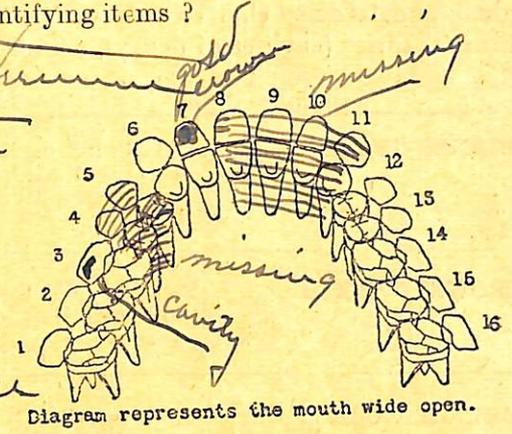
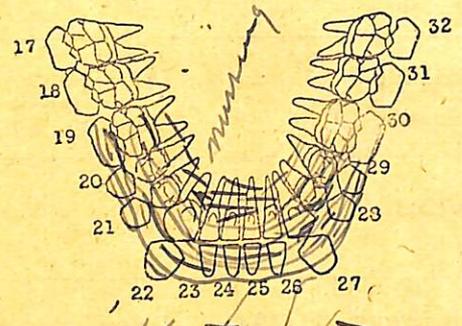


Diagram represents the mouth wide open.



Part

7. Disinterment supervised by *Arthur B. Proctor*
1st Lieut. Q.M.C. Inspector
8. Reburial supervised by *Arthur B. Proctor*
1st Lieut. Q.M.C. Inspector

Approved : *S.D. Campbell*
(Title) *Capt. Infantry Mas. of Sec. #1*
Approved : *S.D. Campbell*
(Title) *Capt. Infantry Mas. of Sec. #1*

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), bicuspid (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 :



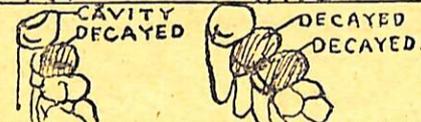
BRIDGE WORK.....Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



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.

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

Place Villers Tournelle, Somme

REPORT OF DISINTERMENT AND REBURIAL

Date Nov. 16, 1921

1. REMAINS OF CARALUNAS, Frank SERIAL NUMBER 56328
 RANK Pvt. 1/c ORGANIZATION M.G.Co.28th.Inf.

2. Disinterred (date): Nov. 16, 1921. Gr. 106, Plot B. Amer.Mil.Cem.176, Villers Tournelle, Somme
 From (give complete location):

By: Group 1 Unit F.S.8

3. Reburied (date): 10/17/22 In (give complete location):

Grave 16 Row 17 Block C, Somme Cem.#636, Bony (Aisne)

By: Group Reburial Unit _____ Nature of reburial Reg.Casket, Shipping Case

4. Report as to nature of original burial and condition of body upon disinterment:
Wrapped in blanket and in wooden box.

Skeleton disarticulated. Features unrecognizable.

5. (a) Identification tags: Buried with body? no On grave marker? yes

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

Body previously reburied by Field Section. Metal strips and bottle record agree with form 114-A.

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 visible

Quantity _____

Characteristics _____

(d) Hair on face—Color none visible

Location _____

Quantity _____

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

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

Left fibula missing.

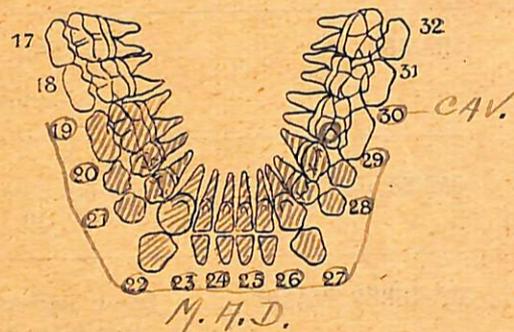
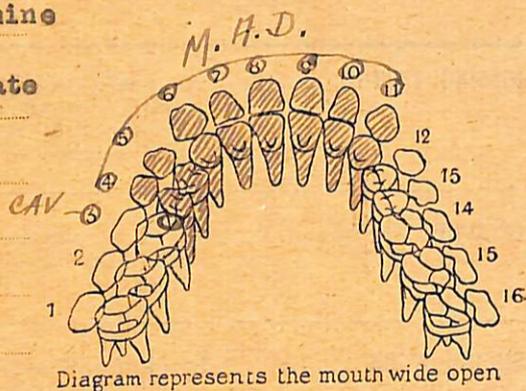
Checker: B. J. Black.

7. Disinterment supervised by James McCourty, S.E.

Approved: J.J. Powers
 J.J. Powers, 1st Lt. MC
 (Title) Insp.

8. Reburial supervised by B.A. Bradford, S.E.

Approved: D.E. Lowry
 D.E. Lowry, 1st Lt. MC.
 (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 and unit which made disinterment.

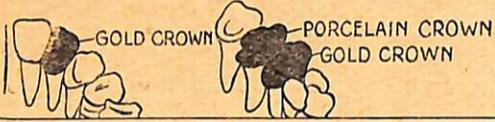
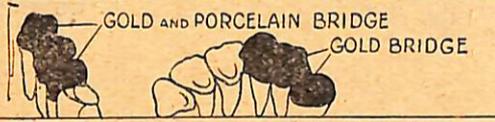
3. Give date and accurate information as to location of reburial and the group and unit which made reburial, and how reburial was made—in casket, wooden box, etc.

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), bicuspid (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 Nov. 16, 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 Caralunas, Frank

10. Name

2. No. 56328

11. No.

3. Rank Pvt. 1st. cl.

12. Rank

4. Org. MG. Co. 28th Inf

13. Org.

5. D.D. May 21 28, 1922

14. (a) D.D.

6. C.D. KIA

(b) D.B.

Discrepancy found upon disinterment

7. Grave No. 106 Sec.

15. Grave No. Sec.

8. Plot B Row

16. Plot Row

9.

17. no discrepancy

18. Cemetery Amer. Cty

19. Commune or town Villers-Tournelle

20. Dept. or County Somme

21. Country France

22. G.R.S. Hdqrs. Code No. 176

23. Disinterred (Date) Nov. 16, 1921

By James McGourty

24. Inscription on grave marker:

Name Frank Caralunas

Serial No. - -

Rank PFC

Organization MG Co. 28th. Inf.

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

Bernard J. Black
Signature Junior Technical Assistant
Bernard J. Black.

PREPARATION

26. What other means of identification were on body? (If no disc or other means of identification on body, give description of body in detail).
Body previously reburied by Field Section. Metal strips and bottle record agree with form 114-A.

27. Condition of body Skeleton disarticulated. Features unrecognizable.

28. Nature of burial Wrapped in blanket and in wooden box.

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above?

30. Body prepared and placed in casket: Date Nov. 16, 1921 By James McGourty

31. Casket sealed by James McGourty

Signature of Embalmer, (Supervisor) James McGourty
James McGourty

RECEIVED BY
1012252

SHIPMENT. (Show actual marking of box.) Box No. C-13515

32. Designation of body:

Name Caralunas, Frank Serial No. 56328

Rank Pvt. 1st. cl Organization MG. Co. 28th Inf

33. Consigned to:

Name of Permanent Cemetery Somme Amer. Cty. #636 Bony Aisne

34. Casket boxed and marked (Date) Nov. 16, 1921 By James McGourty

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 J.J. Powers
J.J. Powers, 1st. Lt. QMC

36. Remarks

37. Shipped from point of Operation: (Date) November 16, 1921

To point of Concentration Amiens, Somme

Convoyer Charles Hornback Signature Shipping Officer J.J. Powers
J.J. Powers, 1st. Lt. QMC

38. Received at Railhead or Point of Concentration: Date Nov. 16, 1921

By G.R.S. Representative H. W. Beyette
Hubert W. Beyette, Capt. QMC

39. Shipped from Railhead or Point of Concentration: Date 21 NOV. 1921

To Permanent Cemetery No. 636, Bony, Aisne

Convoyer H.C. Stewart Signature Shipping Officer H.W. Beyette
H.W. Beyette, Capt. QMC

40. Received: Date 25 NOV 1921

G.R.S. Representative S.P. Dice

41. Reinterred Oct. 17, 1922

42. Grave No. 16 Section

43. Plot Block C Row 17

G.R.S. Representative D.E. Lowry
D.E. Lowry, 1st Lt. QMC

COMPILATION OF DISPOSITION OF REMAINS DATA

File #3025

I. LOCATION INDEX CARD:

(a) Name..... CARALUNAS, Frank Ser. No. 56238
 (b) Rank..... Pvt./L.c. Organization M/G. Co., 28th Inf.
 (c) Date of death... 5/28/18 death K/A

5/28/18 Exhumed.
 1920 Concentration
 Camp # 636 mass
 6-8-22

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

(a) Grave No. 2 Row 10 Plot 7 Sect. A TYP. HB
 (b) Emerg. Address Mary Gaber (sister) 420 Union St. Tamaqua, Pa.

III. Files of soldiers dying from contagious diseases..... CKR AGH

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

A.G.C. Card - Mary Guber (sister) 420 Union St., Tamaqua, Pa. requests body be not returned to U.S. 11-3-20

V. Following advice forwarded to Europe by (cable on..... 1920)
 (letter of transmittal on 9/24 1920)

Parl. # 2 - not to be returned (jeks)

VI. Form 115 forwarded to G.R.S. Hoboken, N.J. NOV 3 1920 192.....

VII. SUPPLEMENTARY REQUESTS

Date of and Source	Relationship and name	Desires	Action taken

VIII. Form 115 received from G.R.S. Hoboken, N.J. 6-29 192.....

COUNTRY France CEMETERY NO. 176 SHEET NO. 65
 G.R.S. FORM 115-A August, 1920

S-666/MB

1920
11/3/20