

172

To The A. G. O.

G.R.S. Form #114-B

JAN 7 - 1926

1739

✓ FULL NAME CARAMANNA, Salvatore *Sign* ✓

✓ RANK Private SERIAL 1811459 ✓

✓ DIVISION & ORGANIZATION Company L, 109th Infantry *28 Div*

DATE OF DEATH *7-15-15* ✓

STATE FROM WHICH HE CAME *Pu* ✓

MEALS OR DECORATIONS AWARDED.

none

FINAL GRAVE LOCATION
Date Grave Row Block

608
Cemetery

*file
2-13-29*

8
JAN 7 1926
WORLD WAR

AUDITED BY
757 7-29-24

23/306/ARK

(a)

JAN 12 26
M. & R. BRANCH
O. Q. M. G.

Place Seringes (Aisne)Date June 3.19REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name: Semial CaramannaNumber: ?Rank: ? Organization: ?

Disinterment and Reburial made by Group

Unit 304Disinterred (Date) June 3.19 From (Give complete location)Grave # 59 Cemetery #597Reburied (Date) June 3/19 in: (Give complete location)Grave #40 Section H. Plot.#1.Cem.#608 Seringes et Nesles (Aisne)Map #33 Soissons.SEno body found in gr. 40Body found between graves 39 & 40None 12-7-21

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

Buried 4 feet deep--- Body badly decomposed.Was one identification tag found upon the body? No tags.What other means of identification were found upon the body? None### Identified by name on cross.11814CONFIRMED No D

Note:

If upon disinterment, effects are found upon the bodies, they will be promptly sent to the Effects Depot direct, as is required by G.O.170, G.H.Q., 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: Cpl.F. Davidson1st.Lt.Oscar W. Forsberg.

C.O.Group _____ Unit _____

304

Place Germany (Austria)

Date 8.19

REPORT OF DISINTERMENT AND REBURIAL

Remains of:

Name: General Gernanna

Rank: ? Organization: ?

Disinterment and Reburial made by Group 304

Disinterred (Date) June 8.19 From (Give complete location)

Grave # 22 Cemetery #897

Reburied (Date) June 8.19 in: (Give complete location)

Grave # 40 Section H. Plot #1. Cem. #808 Berling et Nestes (Austria)

Map # 58 Johnsons. 22

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

Buried 4 feet deep-- Body badly decomposed.

Was one identification tag found upon the body? No tags.

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

Was identified by name on cross. Yes



Note: If upon disinterment, effects are found upon the bodies, they will be promptly sent to the Effects Depot direct, as is required by G.O. 170. In doubtful cases, notation thereof will be made and reported to Chief, Graves Registration Service.

Supervised by: Cpl. F. Davidson

Det. Lt. Geor. W. Forsberg

C. O. Group 304 Unit 304

S# 1811459

DD. 7/15/18

CODE SLIP



| HEADING | SUB-HEADING | NO. OF COLS | CODE |
|--|-----------------|-------------|------|
| NAME | Caramanna | 3 | 318 |
| BURIED | CEMETERY | 1 | 2 |
| | GRAVE | 2 | 37 |
| | ROW | 2 | 09 |
| | BLOCK | 1 | 2 |
| STATE | Pa | 2 | 44 |
| RANK | Port | 1 | 2 |
| DIVISION | 28 | 2 | 28 |
| ORGANIZATION | 109 | 3 | 109 |
| ARM | Inf | 1 | 1 |
| MARITAL | no | 1 | 2 |
| NAME | Caramanna | 3 | |
| Mrs. Giuseppina Mascchiardi, Michele 2030 S-17th St. Phila. Pa. (adm.) | STATE | 2 | |
| | COUNTY | 2 | |
| | CITY | 3 | |
| RELATION | Mother | 1 | 1 |
| OTHER | | 1 | |
| ELIGIBILITY | (no loco no SM) | 1 | 6 |
| NATIVITY | (7-27-26) | 1 | |
| RACE | | 1 | |
| ENGLISH | | 1 | |
| ATTENDANT | | 1 | |
| HEALTH | | 1 | |
| NO. OF SONS | | 1 | |
| DATE OF | MO. | 1 | |
| TRIP | YR. | 1 | |
| ACCEPTANCE | | 1 | |
| 29/514 | | | |

AUDITED
AUG. 4 1932
MB

Ju

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

DATE 8/22/31

| NAME | RANK | SERIAL | ORGANIZATION | DATE OF DEATH |
|----------------------|------|---------|-------------------|---------------|
| Caramanna, Salvatore | Pvt. | 1811459 | Co. L, 109th Inf. | 7/15/18 |

| STATE | Pa. | CTY. NO. 608 | GRAVE 37 | ROW 9 | BLOCK B |
|-------|-----|--------------|----------|-------|---------|
|-------|-----|--------------|----------|-------|---------|

| | <u>Check relationship</u> | <u>Living - Deceased</u> | |
|---|---------------------------|--------------------------|---------------------------|
| <u>MOTHER</u> | : | : | : |
| | : | : | 7-27-26 |
| STERMOTHER (For the year prior to commencement of service) | : | : | : |
| MOTHER TERU ADOPTION (For the year prior to commencement of service) | : | : | adm. of estate of Veteran |
| MOTHER IN LOCO PARENTIS (For the year prior to commencement of service) | : | : | Michelle Mascchiaroli |
| <u>WIDOW</u> (Who has not remarried) | : | : | 2030 S - 17th St |
| Single man | : | : | Philadelphia |
| | : | : | Pa- |

Veterans Bureau Claim Number XC 40135
29/156

M Died

40135

Caramanna Salvatore

(Sister) Miss Giuseppina Caramanna
Via Cesare Battista n. 3.
Delia,
Provincia di Caltanissetta,
Italy.

X

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

June 24 , 1929.

Caramanna, Salvatore

Mr. Frank Gianpleard,
725 Reed Street,
Philadelphia, Penna.

XC-40135
7/11/29

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 cousin of the late Pvt. Salvatore Caramanna, Co. L. 109th Inf., whose remains are interred in the Oise-Aisne American Cemetery, Seringes-et-Nesles, 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

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 233 A-0

June 24, 1929

Germany, Bavaria

Mr. Frank G. [unclear]
722 Reed Street
Philadelphia, Penna.

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 interned in the countries of Europe to make a pilgrimage to these countries."

The records of this office show that you are the owner of the late Pvt. [unclear] Germany, Co. I, 100th Inf., whose remains are interred in the [unclear] Cemetery, [unclear] 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 name and address of the mother and widow in order that action may be taken to extend invitations to them to make the pilgrimage. Both mother and widows are entitled to make the pilgrimage.



Your attention is invited to the fact that a statement to that effect is required to be submitted to the [unclear] office through [unclear] of the [unclear] office. If he was survived by a widow who is entitled to make the pilgrimage, a statement to that effect is requested. If he was not so survived, a statement to that effect is also requested.

For your reply, you may use the envelope which you return by post.

For The Quartermaster General,

Very truly yours,

John T. Harker
JOHN T. HARKER
Major, U. S. Army
Assistant

Enclosure
Aug 11 1929
Bureau

16-10132
11

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON, D. C.

OFFICIAL BUSINESS



PENALTY FOR PRIVATE USE TO
AVOID PAYMENT OF POSTAGE, \$300
LET'S GO!
CITIZENS
MILITARY
TRAINING
- CAMPS -



not at 3575

Pa.
. 5

RETURN
TO WRITER
UNCLAIMED



ST
HITZE
HITZE
RAIN
CAM

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

June 24 , 1929.

Caramanna, Salvatore

**Mr. Frank Gianpleard,
725 Reed Street,
Philadelphia, Penna.**

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 **cousin of the late Pvt. Salvatore Caramanna, Co. L. 109th Inf., whose remains are interred in the Oise-Aisne American Cemetery, Seringes-et-Nesles, 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.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

QM 293 A-C

CARAMANNA, Salvatore - Pvt.

November 3, 1925

Mr. Frank Gianpleard,
725 Reed St.,
Philadelphia, Pa.

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 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,

L.W. REDINGTON,
Major, Q.M.C.,
Assistant.

1 Incl.
Record card.

RD

YBL

25/560/EYS



17232-
Name

Rank

Co.

{ Corps
Regt. }

Date of Death

Place

Cause

Date of Burial

Grave No.

Cemetery

Identified by

{ Tag
Papers
Clothing }

List of Effects

Field Record Made by

Company 303 Graves Registration Service

For additional data use reverse side

Group 2
Fellin Hq
12 ADJ Rgn

17232

NAME. Mary (Anne)

(C-79) SHT. 46 COORD SE-19214
70-259.8

Name. Caramanna, Samuel

Rank, Co. L (Corps) 109 (Regt) Inf

Date of Death. July 1918

Place. Mexy

Cause. K. A.

disinterred and reburied
Date of Burial. 11/4/18

Grave No. 597 Route 100 (Amn)

Cemetery. Mexy (Anne)

Identified by { Tag } Sketch #17
 { Papers }
 { Clothing }

List of Effects. 49 NE
193 E
260.757N

Field Record Made by GROUP N° 2
Unit 303, G. R. S.

Company....Graves Registration Service

For additional data use reverse side

RECEIVED
3 Dec 18 P.M.
O.C.O.M.
G.R.S.

Reg. No. 1488

File 17232

CARAMANNA, Salvatore
Pvt Co L 109th Inf

REGISTRATION BRANCH DIRECTION TICKET

TO: Lieut. Noetzel
Lieut. Hutchison
Lieut. La Perriere
Lieut. Walters
Lieut. Price
Chief Clerk - Reg. Branch
Chief Clerk - A & O Divs.
File Clerk
Stenographer

Sgt. [unclear]
4/24
Wain

File
Record
Recorded _____
Make Copy _____
Cross Reference _____
Forward Papers on Case _____
Note and Return _____
For Information _____
For Action _____
For Necessary Reply _____
For Personal Conference _____
Return To _____

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

CEMETERIAL DIVISION

WASHINGTON

Hoboken, N.J.

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

Feb 2 1921

To: Mr. Frank Gianplearo, 725 Reed St., Philadelphia, Pa.

SUBJECT: Remains of Pvt. Salvatore Caramanna, Ser. No. 1811459

The records of this office show that you have requested that the body of the above-named 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.

CHARLES C. PIERCE,
Lieut. Colonel, U. S. Army.

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? INSSTRUCTIONS FOR FILLING OUT

| NAME OF— | NO. AND STREET. | TOWN. | STATE. |
|---|-----------------|-------|--------|
| 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 _____

I, the undersigned, am the and nearest living next of kin 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 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.

NAVY DEPARTMENT

17232

AMERICAN EXPEDITIONARY FORCES
HEADQUARTERS SERVICES OF SUPPLY
OFFICE OF THE CHIEF QUARTERMASTER A.E.F.
GRAVES REGISTRATION SERVICE

France, April 24, 1919.

From: Chief, G.R.S., Hq. S.O.S., A.E.F., A.P.O. #717.
To: Mr. F. Gianpleard, 725 Reed St., Phila., Pa., U.S.A.
Subject: Disposition of Remains.

1. Referring to your letter of March 19, 1919, you are advised that due note has been made of your request that the body of your friend may remain permanently interred in France. To that extent, the War Department has already given assurance that your wish will be carried out. Our own Government, however, is hardly competent to make the promise that the body of any American shall remain permanently interred in the exact spot where he fell. It must be remembered that France has jurisdiction over the soil and final censorship over all regulations which pertain to the interment of the dead within her borders. Whatever permanent arrangement may be made for fields of honor for the dead in France will be made in conference between France and her allies, but you may rest assured that this arrangement will conform as nearly as possible to the wishes of the people most directly concerned.

2. There is enclosed herewith G.R.S. Bulletin #10-B entitled, "Information for the Friends of Our Dead," which will answer some of the questions that are likely to arise in your mind.

CHARLES C PIERCE
Lieut.,-Colonel, Q.M.C., USA.

WAT/mwl.
1 Incl. ✓

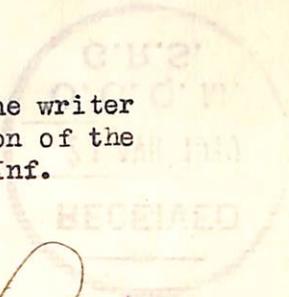
17232

201 (Caramanna, Salvatore) Enl. 1st Ind. amc/mo/63
War Dept., A.G.O. March 26th, 1919. To: Commanding General, American Expeditionary Forces.

1. With the view of carrying out the wishes of the writer in the foregoing letter with respect to the final disposition of the body of Salvatore Caramanna, formerly Private, Co. L, 109th Inf.

By order of the Secretary of War.

[Signature]
Adjutant General.



Synopsis made.

misc

lgsos-gps
jgm

(Misc) 20851-A-277 2nd Ind.

G.H.Q., American E. F., France, April 15, 1919 - To Commanding General, S.O.S. - G.R.S.

gmw.

65



G.R.S.
d



[Faint, illegible handwritten text]



General: B.O.S. - G.P.S.
O.H.S.
(12 40) 10001-4-311 200 100

[Faint, illegible text]



G.H.O. A.E.F. 20851-7277

4/12/19

(2)

A.G.O., S.O.S. 201 *Carmanana, Sabatone*

Carmanana, Sabatone

Phila. Mar. 19. 1919. ²²

Dear Sir. Please
let the remains rest
in France with the
Comrades he fell with.
as he is just as happy.
and I know it would
his wish to stay with
his companions.

Please let me know
if he was insured as
we have never been
notified. and he made
his home with us.

Yours Res.

^{S. Granpleard}
Frank Granpleard

725 Reed St.

Phila. Pa.

11
11
(card 3-713 filed) psd-3-21-1942

RECEIVED
21 AVR 1919
O. C. Q. M.
G. R. S.

Caramanna,

Salvatore

1,811,459

(Surname.)

(Christian name in full.)

(Army serial number.)

~~Pvt.~~

Co. L, 109th Inf.

(Rank and organization.)



State your relationship to the deceased

Cousin

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.)

725 Reed.

(City or town.)

Phila.

(State.)

(Sign here)

Frank Scanpleas

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

Letter accy relative inc. ans. 3-21-19- B2-62

RECORDED

Handwritten notes, possibly "Johnston" or similar, written vertically on the left side of the page.

12-13-22

608-471

Answer by ~~Mr~~ [unclear]



Place Langes et Nesles (Aisne)
QTY 608

Date 5.12.21

REPORT OF DISINTERMENT AND REBURIAL

1. REMAINS OF CARAMANA, SALVATORE SERIAL NUMBER 1811459
RANK PVT ORGANIZATION CO. I. 109th. Inf.

2. Disinterred (date) : 5.12.21 From (give complete location) : Between Grs. 39 and 40 Sec. H. Pt. 1.
By : Group Kelly Unit FIELD SECTION # 7

3. Reburied (date) : 5.12.21 In (give complete location) : Given new gr. location for purpose of concentraion. Gr. 191 Sec. K. Pt. 4.
By : Group Kelly Unit FIELD SECTION # 7 Nature of reburial Pine Box & Burlap.

4. Report as to nature of original burial and condition of body upon disinterment :
BADLY DECOMPOSED FEATURES UNRECOGNIZABLE
Uniform, burlap and pine box.

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

(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)

(b) Weight (estimated)

(c) Hair—Color

Quantity

Characteristics

(d) Hair on face—Color

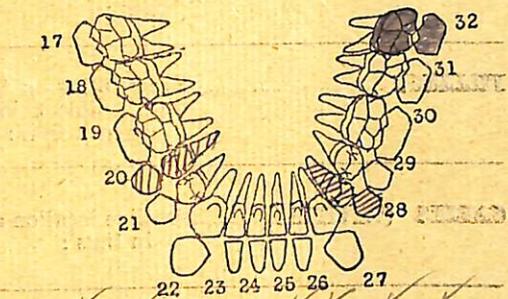
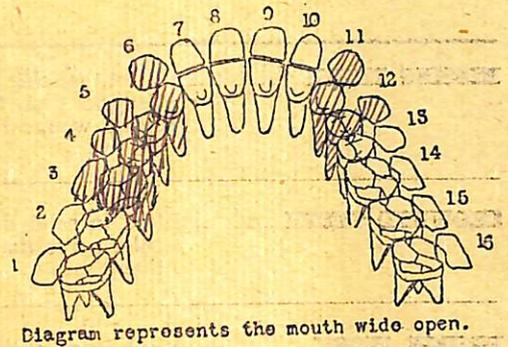
Location

Quantity

(e) Permanent marks on body (old scars, peculiarities, or missing parts) IMPOSSIBLE TO DETERMINE

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

Impossible to determine.



IMPOSSIBLE TO DETERMINE

3 - 6 incl, 11, 12, 20, 28, mis. a.d.; 32' gld. crwn.

10-30576

7. Disinterment supervised by F. G. KELLY, SUP. EMB.

Approved : A. E. DEWEY, 1st. Lt. OMC.
(Title)

8. Reburial supervised by F. G. KELLY, SUP. EMB.
RHCov

Approved : A. E. DEWEY, 1st. Lt. OMC.
(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), 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.



Supervised by
Reburied by

To be prepared in triplicate.

DATE January 19, 1928

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 CARAMANNA, Salvatore Pa

10. Name

2. No. 1811459

11. No.

3. Rank Pvt.

12. Rank

4. Org. Co. L, 109th Inf. 28th Div

13. Org.

5. D.D. July 15, 1918

14. (a) D.D.

6. C.D. KIA.

(b) D.B.

Discrepancy found upon disinterment

7. Grave No. 37 Sec.

15. Grave No. Sec.

8. Plot Block B, Row 9

16. Plot Row

9.

17.

18. Cemetery Oise-Aisne

19. Commune or town Seringes-et-Nesles

20. Dept. or County Aisne

21. Country France

22. G.R.S. Hdqrs. Code No. 608

23. Disinterred (Date) January 19, 1928

By H.E.N. Stine

24. Inscription on grave marker:

Name CARAMANNA, Salvatore

Serial No. 1811459

Rank Pvt.

Organization Co. L, 109th Inf.

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

H.E.N. Stine
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).

27. Condition of body

28. Nature of burial Pine box and burlap

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 January 19, 1928 By H.E.N. Stine

31. Casket sealed by H.E.N. Stine

Signature of Embalmer, (Supervisor) H.E.N. Stine
H.E.N. Stine

SHIPMENT. (Show actual marking of box.) Box No. _____

32. Designation of body:

Name **CARAMANNA, Salvatore** Serial No. **1811459**

Rank **Pvt.** Organization **Co. L, 109th Inf.**

33. Consigned to:

Name of Permanent Cemetery **Oise-Aisne Cty., Seringes-et-Nesles, Aisne**

34. Casket boxed and marked (Date) **January 19, 1928** By **C.E. Spahn**

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 *C. E. Spahn*

C.E. Spahn

36. Remarks _____

37. Shipped from point of Operation: (Date) _____

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 _____

(Name)

Convoyer _____ Signature Shipping Officer _____

40. Received: Date _____

G.R.S. Representative _____

41. Reinterred **January 19, 1928, Oise-Aisne American Cty.**

(Date)

42. Grave No. **37** Section _____

43. Plot **Block B.** Row **9**

G.R.S. Representative *William E. Moore*

William E. Moore, Superintendent.

REPORT OF DISINTERMENT AND REBURIAL

Place **Oise-Aisne Cty. 608**

Date **Jan. 19, 1928.**

1. REMAINS OF **CARAMANNA, Salvatore** SERIAL NUMBER **1811459**
RANK **Pvt.** ORGANIZATION **Co.L, 109th Inf,**

2. Disinterred (date): **Jan. 19, 1928.** From (give complete location): **Grave 37 Block B Row 9**

By: Group **Cty.** Unit

3. Reburied (date): **Jan. 19, 1928.** In (give complete location): **Grave 37 Block B Row 9**

By: Group **Cty.** Unit Nature of Reburial **Metal Casket**

4. Report as to nature of original burial and condition of body upon disinterment:
Pine box & burlap

5. (a) Identification tags: Buried with body? **Al. strip** On grave marker?

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

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

(a) Height (actual measurement)

(b) Weight (estimated)

(c) Hair—Color

Quantity

Characteristics

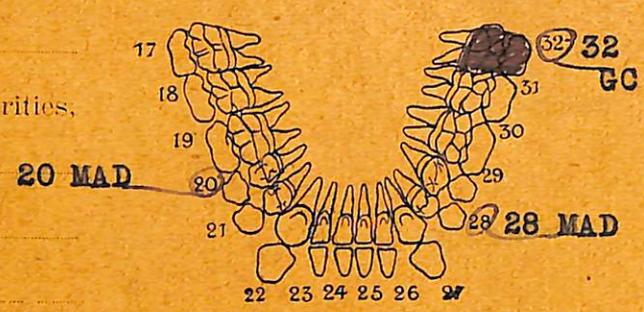
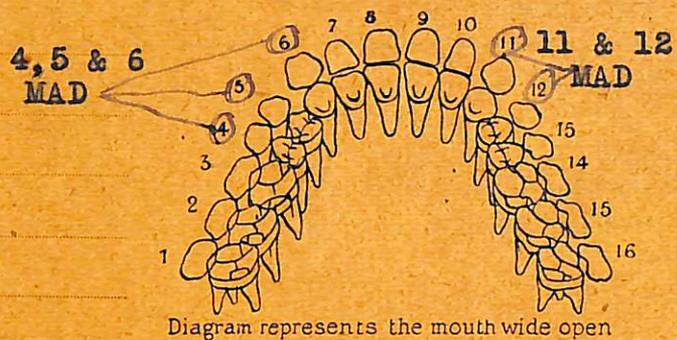
(d) Hair on face—Color

Location

Quantity

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

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



7. Disinterment supervised by *[Signature]*

Approved: *[Signature]*
(Title)

8. Reburial supervised by *[Signature]*

Approved: *[Signature]*
(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), 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.

7735 COMPILATION OF DISPOSITION OF REMAINS DATA

File # 17232

I. LOCATION INDEX CARD:

(a) Name CARAMANNA, Salvatore Ser. No. 1811459
(b) Rank Pvt. Organization VCo.L, 109th Inf.
(c) Date of death 7/15/18 (d) Cause of death K/A

TYP. EK
CKR. E.M.

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

(a) Grave No. 40 Row -- Plot 1 Sec. H TYP. EK
(b) Emerg. Address Mr. Frank Gianplearo (cousin) 746 Passyunk Ave., Phila, Pa.

III. Files of soldiers dying from contagious diseases --- CKR. E.M.

IV. A. G. O. DISPOSITION CARD:

Date of receipt None

(a) Name Frank Gianplearo (b) Relationship Cousin
(c) Address 725 Reid St, Phila
(d) Remains to be brought to U. S.? No
(e) To be interred in National Cemetery in U. S. at
(f) Shipping instructions upon arrival of body in U. S.
(g) Disposition instructions if not brought to U. S.

Examiner's Initials MH Date 12-13, 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 MH Date 12-13, 1920.

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

Frank Gianplearo 725 Reid St, Phila, Pa (3-19-19) Corroborates request on card

(a) Cancellation memos referred to? Yes all

Examiner's Initials AH Date 12-14, 1920.

COUNTRY France

CEMETERY No. 608

SHEET No. 471

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

3-7729

Make Form No. 114

CARDED

FORM 115 - A COMPLETED JAN 24 1921 - aep

Rev. 5-10-21 60

checked 12-14-20

