

FULL NAME ..... **CARLOCK, George** .....

RANK..... Freight Clerk ..... SERIAL.....

DIVISION & ORGANIZATION ..... **Member Amer. Red Cross Commission** .....

DATE OF DEATH... October 22, 1918 .....

Birthplace: Hudson, Illinois.

STATE FROM WHICH HE CAME Residence: .. 107 Lincoln Parkway, Buffalo, N.Y. ....

**MEDALS OR DECORATIONS AWARDED.** No record.

|                           |       |     |       |
|---------------------------|-------|-----|-------|
| FINAL GRAVE LOCATION..... | 4     | 21  | B     |
| Date                      | Grave | Row | Block |

Suresnes, #34

.....  
Cemetery

*Alid. Pres. 10/22/18 llin 20282 CC 335*

*12/12/18*

### GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

**Carlock** ..... **George** .....  
(Surname). (Number). (First Name and Initials).

**Soldier** ..... **American Red Cross** .....  
(Rank). (Organization).

PLACE OF DEATH: **44 Rue Chauveau, Neuilly.**

CAUSE OF DEATH: **Pneumonia.**

DATE OF BURIAL: **Oct. 24th. 1918.**

PLACE OF BURIAL: **A. E. F. Cemetery No. 34.**

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

**Map of A. E. F. Cemetery No. 34.**

**Suresnes. Paris. Seine.**

GRAVE NUMBER: **502**

HOW MARKED: Name Peg? **yes** ..... Cross? **yes** .....

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:

NEAREST RELATIVE: **Mrs. J. D. Larkin** .....

ADDRESS: **107. Lincoln Parkway, Buffalo...**

RELATIONSHIP: **Aunt.** ..... **(N.Y.)** .....

REPORTED BY:  
*Mr. Walsh Chaplain Paris*  
(Signature and Rank of Reporting Officer).

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

NATIONAL OFFICERS

CALVIN COOLIDGE, PRESIDENT  
ROBERT W. DE FOREST, VICE PRESIDENT  
WILLIAM HOWARD TAFT, VICE PRESIDENT  
JAMES M. BECK, COUNSELOR  
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MABEL T. BOARDMAN, SECRETARY

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JAMES L. FIESER, VICE CHAIRMAN  
ERNEST P. BICKNELL, VICE CHAIRMAN



THE AMERICAN RED CROSS

NATIONAL HEADQUARTERS  
WASHINGTON, D. C.

September 9, 1924.

CENTRAL COMMITTEE

JOHN BARTON PAYNE, CHAIRMAN  
JAMES M. BECK  
MRS. AUGUST BELMONT  
CORNELIUS N. BLISS  
MABEL T. BOARDMAN  
MRS. HENRY P. DAVIDSON  
E. B. DOUGLAS  
JOSEPH C. GREW  
MRS. FRANK V. HAMMAR  
HERBERT HOOVER  
MAJ. GEN. M. W. IRELAND  
W. W. MORROW  
GUSTAVUS D. POPE  
MRS. HENRY R. REA  
JOHN D. RYAN  
GEORGE E. SCOTT  
REAR ADMIRAL E. R. STITT  
ELIOT WADSWORTH

The Quartermaster General,  
War Department,  
Washington, D.C.

Dear Sir:

Roy D. Carlisle.  
Re: George Read Carlock (Dec)  
Red Cross Worker.

Referring to your letter of September 25, 1924,  
(QM 293 AC) the enclosed Form G.R.S. #114-B, has been completed  
in the case of George Carlock.

A careful search has revealed no previous record  
of Roy D. Carlisle and the same is returned herewith.

Yours very truly,

*James M. Phalen*  
James M. Phalen, Lt.Col., M.C., U.S.Army,  
Director, Bureau of Army Affairs, A.R.C.



CHP.HF

*293 Carlisle  
293 Carlock  
080  
Census  
SEP 12 1924  
GRAVES REGISTRATION SERVICE  
George Read Carlock  
Census Rec.*

*FILE*  
*9/22*

O.Q.M.C.

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

WASHINGTON July 31, 1922.

FILE  
8/1/22-DS

FILE: 293.8 C-R - #62255

SUBJECT: Permanent Grave Location of George Carlock,  
Member of A.R.C. Comm.

TO: Mrs. J.D. Larkins, 107 Lincoln Parkway, Buffalo, N.Y.

1. The permanent grave of this officer is No. 4 Row 21  
Block B, The American Cemetery of Suresnes, Department of Seine, France.

2. This is one of the permanent American military cemeteries to be maintained by this Government in Europe. Each grave will be marked by a headstone of white marble, of suitable design, with name, rank, organization and date of soldier's death. The 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.

3. In effecting removal, the utmost care and reverence were exacted and more than willingly accorded by those performing this sacred duty. The grave of the deceased will be perpetually maintained by this Government in a manner befitting the last resting place of our heroes.

For the Quartermaster General:

GEORGE H. PENROSE,  
Assistant.

MAILED  
AUG 1 1922  
G.R.S.

DATE \_\_\_\_\_

1. NAME Carlock, George SERIAL No. \_\_\_\_\_

RANK \_\_\_\_\_ ORGANIZATION Member Amer. Red. Cross Comm

GRAVE LOCATION Suresnes American Cty. #34  
CTY. NAME NUMBER

502  
GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 502 SURESNES Seine.  
GRAVE COMMUNE DEPT.

COORDINATES Amer. Cty. #34.

CONCENTRATED TO Original burial.  
DATE GRAVE ROW PLOT

CEMETERY CTY. NUMBER

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

Original burial.

SUBSEQUENT REBURIALS None.  
DATE GRAVE ROW PLOT CEMETERY

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR G.V.S. QUACKENBUSH.  
Lieut.-Col., Q.M.C. Chief, Operations Div.

3. FINAL GRAVE LOCATION 8-23-21. 4. 21. Block B.  
DATE GRAVE ROW PLOT

*3/8/22  
Dreditor  
JHE*

SURESNES AMERICAN CEMETERY #34. (Seine) SURESNES.  
CEMETERY



FEB 16 1922

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.

George Carlock

G.R.S. FORM #114-A

STATION

Member Amer. Red Cross  
Suresnes (Seine) (Comm.)

To be prepared in triplicate.

DATE August 23 21

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 Carlock, George 10. Name \_\_\_\_\_
- 2. No. Metallie plaque on outside casket reads: "George Carlock A.R.C." no effects found - 11. No. casket reads: "George Carlock
- 3. Rank \_\_\_\_\_ 12. Rank Casket not opened
- 4. Org. Hermetically sealed casket. 13. Org. Member Amer. Red Cross Comm
- 5. D.D. Oct. 22 14. (a) D.D. \_\_\_\_\_
- 6. C.D. DOB None 15. (b) D.B. \_\_\_\_\_

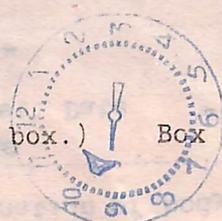
Discrepancy found upon disinterment

- 7. Grave No. 502 Sec. \_\_\_\_\_ 15. Grave No. \_\_\_\_\_ Sec. \_\_\_\_\_
- 8. Plot \_\_\_\_\_ Row \_\_\_\_\_ 16. Plot \_\_\_\_\_ Row \_\_\_\_\_
- 9. \_\_\_\_\_ 17. No discrepancy
- 18. Cemetery American 19. Commune or town Suresnes
- 20. Dept. or County Seine 21. Country France
- 22. G.R.S. Hdqrs. Code No. 34
- 23. Disinterred (Date) 8/23/21 By J.P. Madine
- 24. Inscription on grave marker:
  - Name George Carlock Serial No. \_\_\_\_\_
  - Rank \_\_\_\_\_ Organization Member, Amer. Red Cross (Comm.)
- 25. Was identification disc found on grave marker? No On body? No

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).  
Metallie plaque on outside casket reads: "George Carlock A.R.C." no effects found -
- 27. Condition of body Casket not opened
- 28. Nature of burial Hermetically sealed casket.
- 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 \_\_\_\_\_ By \_\_\_\_\_
- 31. Casket sealed by \_\_\_\_\_  
Signature of Embalmer, (Supervisor) J.P. Madine



FEB 16 1921

C-5028

SHIPMENT. (Show actual marking of box.) Box No. \_\_\_\_\_

32. Designation of body: \_\_\_\_\_

Name Carlock, George Serial No. \_\_\_\_\_

Rank \_\_\_\_\_ Organization Member Amer. Red Cross Comm.

33. Consigned to: \_\_\_\_\_

Name of Permanent Cemetery Suresnes American Cty. #34

34. Casket boxed and marked (Date) 8/23/21 By J.F. Madine

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 R.F. O'Leary  
1st Lieut., A.M.C.

36. Remarks \_\_\_\_\_

Hermetically sealed casket - positive identification - casket not opened.

8/23/21

37. Shipped from point of Operation: (Date) \_\_\_\_\_

To point of Concentration Suresnes (Seine)

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 \_\_\_\_\_

To Permanent Cemetery \_\_\_\_\_ (Name)

Convoyer \_\_\_\_\_ Signature Shipping Officer \_\_\_\_\_

40. Received: Date \_\_\_\_\_

G.R.S. Representative August 23/21

41. Reinterred \_\_\_\_\_ (Date)

42. Grave No. 4 Section \_\_\_\_\_

43. Plot BLOCK B Row 21 (Cem. #34)

Signature of G.R.S. Representative R.F. O'Leary  
1st Lieut., A.M.C.

Place Suresnes (Seine)

# REPORT OF DISINTERMENT AND REBURIAL

Date Aug. 23/21

1. REMAINS OF CARLOCK, George SERIAL NUMBER ---  
RANK --- ORGANIZATION Member of Amer. Red Cross Comm.

2. Disinterred (date): 8/23/21 From (give complete location):  
Gr. 502. Cem. 34. Suresnes (Seine)  
By: Group 4 Unit F.S. #6

3. Reburied (date): 8/23/21 In (give complete location): BLOCK B  
Gr. 4, Row 21, Cem. 34. Suresnes Metallic lined casket  
By: Group 4 Unit F. #6 Nature of reburial

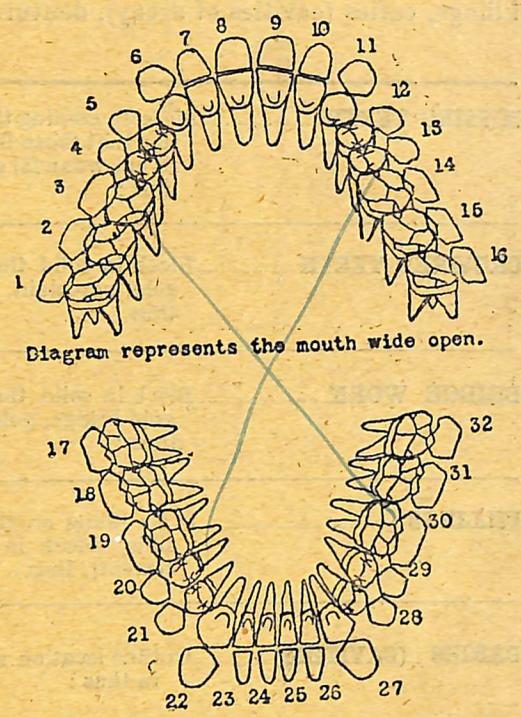
4. Report as to nature of original burial and condition of body upon disinterment:  
Metallic lined casket - Casket not opened.

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

(b) Other means of identification found upon disinterment, and general remarks:  
Hermetically sealed casket - positive identification - casket not opened. Metallic plaque on outside of casket reads: "George Carlock. A.R.C." No effects found.

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 J.F. Madine S.E.

Approved: R.E. O'Leary  
(Title) 1st Lt. U.S.M.C.

8. Reburial supervised by J.F. Madine S.E.

Approved: R.E. O'Leary  
(Title) 1st Lt. U.S.M.C.

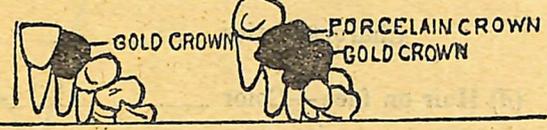
*D-30426*

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

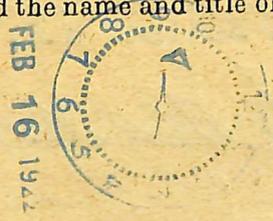
Enter information, as noted below, on reverse side of sheet in the *corresponding numbered space*. This form is supplemental to and is to be forwarded with G. R. S. Form 1-a, reporting reburial locations. To be used in answer to Question 26, Form 114, in case no means of identification on body.

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.
2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.
3. Give date and accurate information as to location of reburial and the group and unit which made reburial, and how reburial was made—in casket, wooden box, etc.
4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried—in a casket, box, burlap, etc. This statement should be as complete as possible.
5. (a) State whether identification tags were found buried with body and on grave marker by reporting "Yes" or "No".  
 (b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying the body, other than that tabulated under Item No. 6.

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

|   |  |
|---|--|
| <p><b>MISSING TEETH</b>.....All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus :</p>                   |  <p style="text-align: center;">TOOTH MISSING      TOOTH MISSING</p>           |
| <p><b>CROWNED TEETH</b>.....Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus :</p>  |  <p style="text-align: center;">GOLD CROWN      PORCELAIN CROWN</p>            |
| <p><b>BRIDGE WORK</b>.....Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :</p>  |  <p style="text-align: center;">GOLD AND PORCELAIN BRIDGE      GOLD BRIDGE</p> |
| <p><b>FILLINGS</b>.....Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus :</p>   |  <p style="text-align: center;">SILVER FILLING      GOLD FILLING</p>           |
| <p><b>CARIES (CAVITIES)</b>.....Outline location and size of cavity, shade in thus :</p>  |  <p style="text-align: center;">CAVITY DECAYED      DECAYED</p>                |
| <p><b>DENTURES (PLATES)</b>.....Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."</p> |  |

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

## I. LOCATION INDEX CARD:

File #62255 ✓

(a) Name CARLOCK, George Ser. No. ---  
 (b) Rank --- Organization Member of A. R. C. Comm. TYP. SH  
 (c) Date of death 10/22/18 (d) Cause of death Pneumonia CKR. 9/1

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

(a) Grave No. 502 Row - Plot - Sec. - TYP. SH  
 (b) Emerg. Address Mrs. J. D. Larkins (Aunt), 107 Lincoln Parkway, Buffalo, N.Y.

III. Files of soldiers dying from contagious diseases NO-CARL CKR. 9/1

## IV. A. G. O. DISPOSITION CARD:

*no card in file L.G. 12-30-20*  
 Date of receipt \_\_\_\_\_

(a) Name \_\_\_\_\_ (b) Relationship \_\_\_\_\_  
 (c) Address \_\_\_\_\_  
 (d) Remains to be brought to U. S.? \_\_\_\_\_  
 (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 \_\_\_\_\_ Date \_\_\_\_\_, 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 L.G. Date 12-30-, 1920.

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

*Disposition -*

*No request for*

(a) Cancellation memos referred to? \_\_\_\_\_

*yes. S.M.B.*

Examiner's Initials S.M.B. Date 1-3-21, 1920.

COUNTRY France CEMETERY No. 34 SHEET No. 134

*checked by me 1-3-21*



COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

File #62255

(a) Name CARLOCK, George Ser. No. \_\_\_\_\_ TYP. SH  
 (b) Rank --- Organization Member of A. R. C. Comm.  
 (c) Date of death 10/22/18 Cause of death Pneumonia

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

(a) Grave No. 502 Row \_\_\_\_\_ Plot \_\_\_\_\_ Sect. \_\_\_\_\_ TYP. SH  
 (b) Emerg. Address Mrs, J. D. Larkins (Aunt), 107 Lincoln Parkway, Buffalo, N.Y.

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

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

G. G. O. - No card in file  
G. R. S. - No request for disposition  
ABR - 2/24/21

V. Following advice forwarded to Europe by - (cable on \_\_\_\_\_ 192\_\_\_\_\_  
 (letter of transmittal on 1/20/1921)

Par. # 2, not to be returned  
Carlock, George

VI. Form 115 forwarded to G.R.S. Hoboken, N.J. \_\_\_\_\_ 192\_\_\_\_\_  
MAR 10 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. \_\_\_\_\_ 192\_\_\_\_\_  
 \_\_\_\_\_ 192\_\_\_\_\_

COUNTRY France CEMETERY NO. 34 SHEET NO. 134  
 G.R.S. FORM 115-A  
 August, 1920  
 S-666/MB

Concentrated into P. A. C. 34

FEB 25 1921 4-5

DINERS

62255-

from

61830

Cont of

Cont of

GRAVE LOCATION BLANK

IDENTIFICATION OF THE GRAVE OF

Carl oak

(Surname).

(Number).

George

(First Name and Initials).

Soldier

(Rank).

American R.C.

(Organization).

PLACE OF DEATH: 44 Rue Charveau, Neuilly.

CAUSE OF DEATH: Pneumonia

DATE OF BURIAL: Oct. 24, 1918

PLACE OF BURIAL: A. E. F. Cemetery, # 34

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

Suresnes (Seine) Paris

GRAVE NUMBER: 502

HOW MARKED: Name Peg? Yes Cross? Yes

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?

NEAREST RELATIVE: Mrs. J. D. Larkin

ADDRESS: 107 Lincoln Parkway, Buffalo N.Y.

RELATIONSHIP: Aunt

REPORTED BY:

M. Walsh Chaplain Paris

(Signature and Rank of Reporting Officer).

REVIEWED  
OSP SS.

RECEIVED  
A.M. 2: Nov 18 P.M.  
O. C. Q. M.  
e. n. s.

62258

Refer to this

(Office)

No.

INQUIRY

**FILE**

Request by **Mrs. Holderman.**

European address **Hotel Byron.**

**New York City.**

Relationship to dec'd **Friend**

For location grave of:

**Carlock,**

**George.**

Last name. Serial No. First name

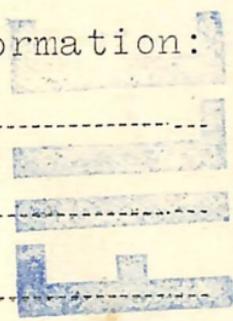
**Member Amer Red Cross Comm.**

Rank                      Org.                      Date of death

Date of request **5/7/21**

Rec'd. by **JMK**

(Initials)                      Other information:



**INFORMATION FURNISHED**

Location of grave                      Country

**#34. Suresnes. Amer. Cty.**

Cemetery                      Commune (town) Dept.

**Paris. Seine.**

Grave No. **502**                      Section

Plot                      Row

Furnished by                      Date **5/7/21**

(Initials)



RECEIVED



JUN 27 1921  
G. H. S.

6/27/21

INFORMATION FURNISHED

(mirrored text)

Date of receipt 6/27/21

Name of person

Member of the Board of Directors

Address

City

State

Business

New York City

Telephone

Reference

FILE

62255

May 27, 1921.

293.8-Cem. (Adm. Files American Red Cross).

The Quartermaster General, U. S. Army, (Cemeterial Division).

Mr. John C. Smith, Assistant to the Director, Bureau of Personnel,  
The American Red Cross, National Headquarters, Washington, D. C.

Disposition of Remains.

1. In reply to your letter of May 17, 1921, you are advised that the records of this office show that in the cases of seventeen of the American Red Cross Workers, whose names you submitted, request for permanent interment abroad is on file; that in four cases request for the return of the body is on file.

2. In the following fourteen cases no request has been made:

- |                           |                           |
|---------------------------|---------------------------|
| ✓ Carlock, George,        | Roche, John A.            |
| Doster, Orland L.         | Scotchard, Ethel Fannie,  |
| McCord, William F.        | Sherman, Raymond H.       |
| MacDonald, John D.        | Tyler, Elizabeth Stearns, |
| Needham, Elmer J.         | West, Paul,               |
| O'Brien, James L.         | Wetzel, Hervey Edward,    |
| Platt, William Davenport. | Wright, Benjamin.         |

3. In the following seven cases there is no record in this office:

- Erkins, Joseph F.
- Fairfield, Richard C.
- Maas, Charles O.
- McCauley, Edna,
- McKey, Edgar M.
- Merritt, Henry K.
- Rock, Mark G.

By authority of the Quartermaster General:

MVB

GEORGE H. PENROSE,  
Colonel, G. M. C.,  
Chief, Cemeterial Division.

JEW

X 43575

THE AMERICAN RED CROSS  
National Headquarters  
WASHINGTON, D. C.

May 17, 1921.

Colonel George H. Penrose, Q. M. C.,  
Chief of Cemeterial Division,  
Office of the Quartermaster General,  
War Department,  
Washington, D. C.

Dear Sir:

Attached is a list of American Red Cross workers who have died in our foreign service. After consultation with your office we had drafted the attached letter for issuance, together with Cemeterial Division Bulletin 10 G-W, to the next of kin of each deceased worker. This letter was approved by you under date of April 9th, 1921.

We have, during the past month, by correspondence with our various offices, eliminated many names from our list, where we have returned the remains, or where they have been returned by your organization, or where the next of kin has definitely stated that they do not desire the return of the remains.

The one last check which we wish to make before sending out the attached letter is to have your office go over the attached list, eliminating therefrom the name of any deceased worker regarding whom you may have been in communication with the next of kin, to the effect that the remains should, or should not, be returned, since, as you will see, our proposed letter is merely to advise our families of your service, and we wish to make no duplication whatever.

We will, therefore, greatly appreciate it if you will have the attached list checked as indicated, so that our proposed letter may be released.

Yours sincerely,

John C. Smith  
Assistant to the Director,  
Bureau of Personnel.

JCS/E

For enclosures See Case of Barker, Fred Demeritte  
File #43585.

7

To: Inquiry Section.  
From: Overseas Project Sub-Section.

I. GENERAL INFORMATION on Cemetery No. (furnished by M. V. M.) (date 5/19/21)  
Data sent Overseas Body not to be returned, Set Trans 1/21/21.  
Operations to commence (approx.) June 1921  
Operations to be completed (approx.) \_\_\_\_\_  
Bodies shipped from European Port \_\_\_\_\_  
Bodies arrived at Hoboken \_\_\_\_\_

II. CASE OF Carluck, George, Member A. R. C. Com  
The following information was abstracted (Date) 5-14-21 from: Form 115

| SOURCE                            | CLK. | in OFFICE | Shppg. Inquiry (sent.....)      | Clk. | in OFFICE |
|-----------------------------------|------|-----------|---------------------------------|------|-----------|
| A. G. O. Cards                    |      | <u>no</u> | To.....                         |      |           |
| A.G.O. Corresp.                   |      | <u>—</u>  | OSP S-S Corresp. (see Remarks.) |      |           |
| G.R.S. Corresp. relative to disp. |      | <u>—</u>  |                                 |      |           |

DESIRES as to Disposition.

| Name of Relative             | RETURN                            |      |      | REMAIN | SPECIAL |
|------------------------------|-----------------------------------|------|------|--------|---------|
|                              | N. C.                             | Pvt. | Int. |        |         |
| Widow                        |                                   |      |      |        |         |
| Children (Name oldest first) |                                   |      |      |        |         |
| Father                       | <u>No request for disposition</u> |      |      |        |         |
| Mother                       |                                   |      |      |        |         |
| Brothers                     |                                   |      |      |        |         |
| Sisters                      |                                   |      |      |        |         |

Body to be shipped to \_\_\_\_\_  
was shipped (Date) \_\_\_\_\_

REMARKS Chg 34 Audited  
Operations Commence June 1921 7 115 m Wash  
5/19/21  
M. V. M.