

171
6/29/22

MT

AUG 31 1922

DATE 3/29/22

1. NAME ~~JOHNSTON, James C.~~ *Johnston, James C.* CARR, Johnson, D. SERIAL No. ~~1245905~~ 1244905.
 RANK ~~Pvt.~~ *Pvt.* ORGANIZATION *8 DIVISION* Co M 111th Inf *28 Div.*
 GRAVE LOCATION *Meuse-Argonne Amer. Cty. Romagne-s-Montfaucon 1232 sec.40*

CTY. NAME NUMBER

113 Sec. 40 3

GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION *Boureuilles Meuse*

GRAVE COMMUNE DEPT.

COORDINATES *Verdun 35SE 269.9N 300.9E*

CONCENTRATED TO *6/5/19 113 Sec 40 3*

DATE GRAVE ROW PLOT

Meuse Argonne 1232

CEMETERY CTY. NUMBER

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

~~Tag on leg over body and on chest~~ data f-1/pfb

DATE OF DEATH *Sep. 27, 1918*

STATE FROM WHICH HE CAME *Pa.*

SUBSEQUENT REBURIALS

DATE EDALS GRAVE DECORATIONS AWARDED *None* CEMETERY

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR *M. B. Birdseye* M. B. BIRDSEYE Ist Lt., Q.M. Corps, U.S. Army

3. FINAL GRAVE LOCATION *3/29/22 40 18 Block G.*

DATE GRAVE ROW

Meuse-Argonne American Cemetery #1232. Romagne-sous-Montfaucon. Meuse.

CEMETERY BY

AUDITED BY
M.S.D. 4-6-23

WORLD WAR DIV.
APR 19 1926
WORLD WAR DIV.

Robert G. Davis
Major General,
Adjutant General.

28/2

INSTRUCTIONS FOR PREPARATION OF FORM 114 B

1. Forms 114-B are to be prepared by Registration Branch in quadruplicate, three copies to be forwarded to Area Supervisor who will accomplish paragraph 2 and return all three copies to Headquarters, American Graves Registration Service.

2. Paragraphs 1 and 3 will be accomplished by Registration Branch, Headquarters, American Graves Registration Service, Q.M.C., in Europe.

3. Paragraph 2 will be accomplished by Area Supervisor from data on file in his office.

4. If data is entered on Form 114-B from Form 1, Form 16, Form 1-A or Form 16-A, statement to this effect will be made on Form 114-B STATING WHICH G.R.S. form data is taken from. If data concerning co-ordinates is approximate and NOT accurate, statement to this effect will be made on these forms.



10225 8/11 002609 HW 1/3

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

CARR 1244905 JOHNSON D.
(Surname.) (Number.) (First Name and Initials.)

Priv. Co. H 111th INF.
(Rank.) (Organization.)

DATE OF BURIAL Sep. 24, 1918

PLACE OF BURIAL 40. 85 - 00. 6

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

Forest d'Argonne 10000

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:

REPORTED BY:

Chaplain County 111th Inf Reg.
(Signature and Rank of Reporting Officer.)

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

Date 18th June 1919REPORT OF DISINTERMENT AND REBURIAL

Remains of:

Name: CARR, Johnston D.Number 1244905Rank: Pvt 1st Cl.Organization Co H 111th Inf

Disinterment and Reburial made by Group:

Unit

Disinterred (Date)

From (Give complete location)

6 5th June 1919B A Cty Grave 12 BOURBULLES MEUSE35 SE E 300.9 N 269.9

Reburied (Date)

In: (Give complete location)

5th June 1919Grave No 113 Sec 40 Plot 3ARLONNE AMER CEMETERY NO. 1232ROMAGNE MEUSE

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

Burial poor; buried in uniform; body badly decomposed.Was one identification tag found upon the body? YesWhat other means of identification were found on the body? NoneCONFIRMED No. 11028

Note:

If upon disinterment, effects are found on bodies, they will be promptly sent to the Effects Depot direct as is required by G.O. 170, C.H. 2, 1919., after being carefully examined for clues of identity in doubtful cases, notation whereof will be made and reported to Chief, Graves Registration Service.

Supervised by: Lt LewisR. H. ROSENTHAL2nd Lieut. Q. M. C. U. S. A.

JMB

C.O. Group Unit

RECEIVED
J. C. HUNTER
JAN 10 1914

1037

11628

1000

1000

THE UNIVERSITY OF CHICAGO

CHICAGO, ILL.

CODE SLIP



HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	<i>Carr</i>	3	<i>318</i>
BURIED	CEMETERY <i>1532</i>	1	<i>1</i>
	GRAVE <i>40</i>	2	<i>40</i>
	ROW <i>18</i>	2	<i>18</i>
	BLOCK <i>D</i>	1	<i>7</i>
STATE	<i>Pa.</i>	2	<i>44</i>
RANK	<i>Pvt. 1st</i>	1	<i>2</i>
DIVISION	<i>28</i>	2	<i>28</i>
ORGANIZATION	<i>111</i>	3	<i>111</i>
ARM	<i>Inf.</i>	1	<i>1</i>
MARTIAL	<i>(Bro) No</i>	1	<i>2</i>
NAME	<i>Carr</i>	3	
RESIDENCE <i>1839 Fuller St. Bustleton, Phila. Pa.</i>	STATE	2	
	COUNTY	2	
	CITY	3	
RELATION	<i>mother</i>	1	<i>1</i>
OTHER	<i>no Am no Love</i>	1	
ELIGIBILITY	<i>no 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 29/514/PJ.		1	

AUDITED
APR 18 1932
RS

RM

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

L

IN REPLY REFER TO QM 293 A-C

July 8, 1930

Carr, Johnson D. 1232-B

Mr. Samuel T. Carr
1839 Fuller St., Bustleton,
Philadelphia, Pa.

(Johnson, D. Carr is survived by
two full Brothers + 1 half brother)

Dear Sir:

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

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

1. Is the deceased survived by a mother?

If so, give her name and address:

No

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

If so, give her name and address:

No.

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?

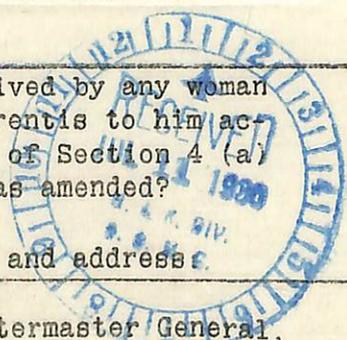
If so, give her name and address:

No.

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

Carr, Johnson D.

Aug. 13, 1929.

Mr. Samuel T. Carr,
1839 Fuller St.,
Bustleton,
Philadelphia, Pa.

Dear Sir:

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

The records of this office show that you are the brother of the late Pvt. Johnson D. Carr, Co. H, 111th Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, France.

Will you please fill in the answers to the following questions in the space provided on this letter, and return 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?
2. If so, give her complete address.
3. 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

*no one survives him
but 2 full brothers
& 1 half Brother*

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
Carr, Johnson D.

Bro Samuel J. Carr,
1839 Fuller St.
Bustleton
Phila, Pa.
June 29, 1929.

Mrs. Amy Carr Angeney,
2410 N. Orkney St.,
Philadelphia, Pa.

Xe-145-289
7/29

Dear 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 mother of the late Pvt. Johnson D. Carr, Co. H. 111th Inf. whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, France.

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

In the event your son was survived by a widow who has since remarried it is 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

2 incls.
Act of Congress.
Envelope.

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

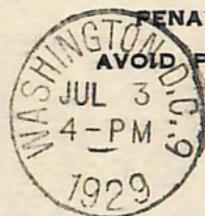


WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON, D. C.

OFFICIAL BUSINESS



PENALTY FOR PRIVATE USE TO
AVOID PAYMENT OF POSTAGE \$300



Not found
13.2255

TURN
TO WRITER
UNCLAIMED



Phil. Pa.
No. 40

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

July 8, 1930

Carr, Johnson D. 1232-B

Mr. Samuel T. Carr
1839 Fuller St., Bustleton,
Philadelphia, Pa.

Dear Sir:

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

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

1. Is the deceased survived by a mother?

If so, give her name and address:

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

If so, give her name and address:

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

If so, give her name and address:

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Carr, Johnson D.

Aug. 13, 1929.

Mr. Samuel T. Carr,
1839 Fuller St.,
Bustleton,
Philadelphia, Pa.

Dear Sir:

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

The records of this office show that you are the
brother of the late
Pvt. Johnson D. Carr, Co. H, 111th Inf., whose remains are now interred
in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse,
France.

Will you please fill in the answers to the following questions in the space provided on this letter, and return 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?

2. If so, give her complete address.

3. 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.

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

IN REPLY REFER TO QM 293 A-C
Carr, Johnson D.

June 29, 1929.

Mrs. Amy Carr Angeney,
2410 N. Ordway St.,
Philadelphia, Pa.

Dear 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 mother of the late Pvt. Johnson D. Carr, Co. H. 111th Inf. whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, France.

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

In the event your son was survived by a widow who has since remarried it is 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,

2 incls.
Act of Congress.
Envelope.

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

4/15/24

INDEX SHEET

SYNOPSIS

Letter

From: Q.M.G.O.
To: Mr. C. Wilson Fry, Fox Chase, Pa. - Post Commander,
Corp. John Loudenslager Post 366, American Legion.

Advising the permanent grave location of:

Private Johnson D. Carr, 1244905, Company H, 111th Inf.
Buried in Grave 40, Row 18, Block G, Meuse-Argonne American Cemetery,
Romagne-sous-Montfaucon, Meuse, France.

DOCUMENT FILED UNDER NO. 293 Loudenslager, John

30

INSTRUCTIONS.—Under "Synopsis" make brief entry showing date of communication and from whom received and synopsis sufficient to identify the papers. When these index sheets become numerous under a subject they will be entered on the consolidated index sheet and then destroyed.

3-6642

Carr
(Surname.)

Johnson D
(Christian name in full.)

1, 244, 905
(Army serial number)

Pvt

Co H 111 Inf
(Rank and organization.)

State your relationship to the deceased

Mother

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)

*Mrs Jacob Angerer
2410 N. Oakwood St.*

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

3-6713

Phila

Letter Filed

Mr Jacob August

2418 N. Ordway
St

Philadelphia

Drawn Pm

1232 Sec 40

4-9-21

checked
FD-4-9-21

In reply refer to:
QM - 293 C-R

July 24, 1923.

Mrs. Amy Carr Angency,
2410 North Orinney St.,
Philadelphia, Pa.

Dear Madam:

The Quartermaster General desires that you be informed that the permanent grave of Private Johnson D. Carr, Company H, 111th Infantry, is Grave 40, Row 18, Block G, Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon (Meuse), France.

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

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.

Very truly yours,

H. J. Conner,
Assistant.



JUL 24 1923
C. E. H.

RD
7

COMPILATION OF DISPOSITION OF REMAINS DATA

File # 80577

I. LOCATION INDEX CARD:

4-16-21c

(a) Name CARR, Johnson, D Ser. No. 1244905
(b) Rank Pvt. Organization Co. H. 111th Inf.
(c) Date of death 9-27-18 (d) Cause of death K/A

TYP. hmp

CKR. B. J.

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

(a) Grave No. 113 Row --- Plot 3 Sec. 40 TYP. hmp
(b) Emerg. Address Mrs. Amy Carr (Mother) 2410 N. Ortney St., Phila. Pa.

III. Files of soldiers dying from contagious diseases / / / / /

or per S.W. (master card) 4-16-21-c CKR. B. J.

IV. A. G. O. DISPOSITION CARD:

4-16-21c

Date of receipt

(a) Name Mrs. Jacob Angeney (b) Relationship Mother
(c) Address 2410 N. Ortney St., Phila. 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 Am Date 4-9-21, 1920.

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

dated

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

No Coms

Examiner's Initials Am Date 4-9-21, 1920.

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

No request for disposition

(a) Cancellation memos referred to?

Examiner's Initials Am Date 4-9-21, 1920.

COUNTRY

FRANCE

CEMETERY No. 1232 Sec. 40

SHEET No. 29

Checked by H 4-25-21

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

Typed by _____, Checked by _____, 1920.

VIII. FINAL ACTION:

Following advice forwarded to Europe by { cable on _____, 1920
letter on 4/19, 1920

Sec 40
Par 2 not to be returned LSW
Carr, Johnson D.

IX.

CORRECTIONS

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

X. SUSPENSION REMARKS:

B/A W R
Mrs. Amy Carr Angenev Mother
24 10th N. Orkney St Philadelphia
Penna
(6-25-21) H

To be prepared in triplicate.

DATE Dec 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 CARR, Johnson D.
~~JOHNSTON, James G~~

2. No. 1244905
~~1245903~~

3. Rank PFC Pvt

4. Org. Co M 111th Inf

5. D.D. 8-11/18

6. C.D. MIA K.A.

10. Name Johnson D Carr

11. No. 1244905

12. Rank PFC

13. Org. Co M 111th. Inf

14. (a) D.D.

(b) D.B.

Discrepancy found upon disinterment

7. Grave No. 113 Sec. 40

8. Plot 3 I Row

9.

15. Grave No. Sec.

16. Plot Row

17. None

18. Cemetery Meuse-Argonne Amer

19. Commune or town Romagne-s-Montfaucon

20. Dept. or County Meuse

21. Country France

22. G.R.S. Hdqrs. Code No. 1232 Sec.40

23. Disinterred (Date) Dec 16 1921

By H E Strong

24. Inscription on grave marker:

Name James C Johnson

Rank PFC

Serial No. 1245903

Organization Co M 111th Inf

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

L B Ayers
 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).
 Records of office, Supervisor Area #1 show that th remains were concentrated to Gr 113, Sec 40, Plot 3 as "Johnson D Carr 1244905 on June 5 1919 and that the inscription in grave marker was changed to read James C Johnson 1245903 PFC Co M 111th Inf in accordance with letter Hq. AGRS.

27. Condition of body Badly decomposed, features unrecognizable

28. Nature of burial Pine box, uniform

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? None See Items 10 to 13

30. Body prepared and placed in casket: Date Dec 16 1921 By H E Strong

31. Casket sealed by H E Strong

Signature of Embalmer, (Supervisor

H E Strong
H E Strong

AUDITED BY

C-18442

MT

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

32. Designation of body:

Name ~~Johnson D. CARR~~ ~~James C. Johnston~~ Serial No. ~~--1245906~~ 1244905
Rank ~~-PTG~~ Pvt. Organization Co M 111th Inf

33. Consigned to:

Name of Permanent Cemetery Meuse-Argonne Amer. Cty. Romagne-s-Montfaucon 1232

34. Casket boxed and marked (Date) Dec 16 1921 By H E Strong

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 *H S Harpole*
H S Harpole

36. Remarks _____

37. Shipped from point of Operation: (Date) Dec 16 1921 cc

To point of Concentration Morgue Romagne
Convoyer W J Royed Signature Shipping Officer *J. Gerald Cole*
J. GERALD COLE
Captain, C. A. C.

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 _____
Convoyer _____ Signature Shipping Officer _____

40. Received: Date _____
G.R.S. Representative _____

41. Reinterred Meuse-Argonne Cemetery 1232, Dec. 17, 1921
(Date)

42. Grave No. 40 Section
block

43. ~~Block~~ G Row 18

G.R.S. Representative *James W. Younger*
James W. Younger
Captain G.M.C.

FTB

CONCENTRATION

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

Place ROMA, 1232

REPORT OF DISINTERMENT AND REBURIAL

Date Dec. 16 1921

1244905

1. REMAINS OF CARR, Johnson D SERIAL NUMBER 1244905

RANK Pvt ORGANIZATION Co. M. 111th Inf.

2. Disinterred (date): Dec 16 1921 From (give complete location): Gr. 113, sec 40, plot 3, cem 1232

By: Group Reburial Sec. Unit Section 1

3. Reburied (date): Dec. 17, 1921, grave 40, block G, row 18, X9 Cem. 1232 In (give complete location):

By: Group Reburial Sec. Unit unlined casket Nature of reburial

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

Body decomposed, unrecognizable. In pine box and uniform.

5. (a) Identification tags: Buried with body? Yes (Tags attached to forms) On grave marker? Yes, peg.

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

Body and peg tags show "Johnson D. Carr, Pvt. 1-cl. Co. M. 111th Inf. 1244905"
Records of office Supervisor Area No. 1 show that the remains were concentrated
to grave 113, sec 40, plot 3 as Johnson D. Carr, 1244905, on June 5th 1919, and
that the inscription on grave marker was changed to read "James C. Johnson,
1244905, Pvt. 1-cl. Co. M. 111th Inf." in accordance with letter from H.Q.G.H.S.

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 determine

(c) Hair—Color do

Quantity do

Characteristics do

(d) Hair on face—Color do

Location do

Quantity do

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

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

None visible

7. Disinterment supervised by H.E. Strong

H.E. Strong

Approved: H.S. Harpole

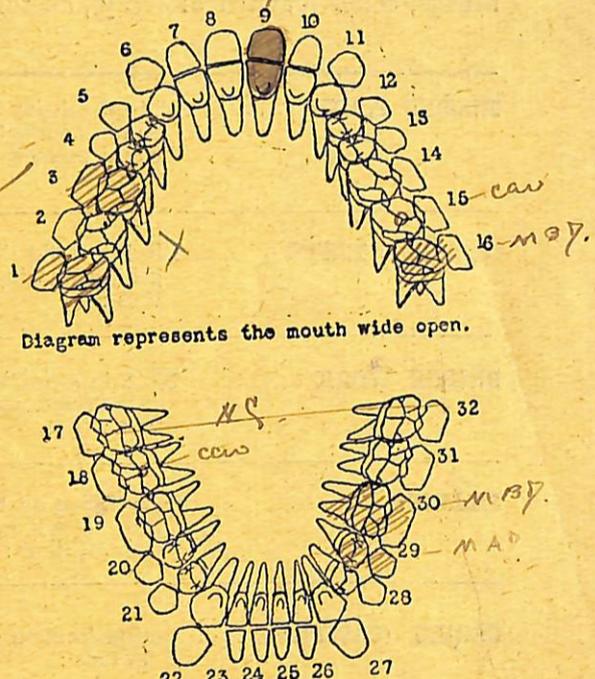
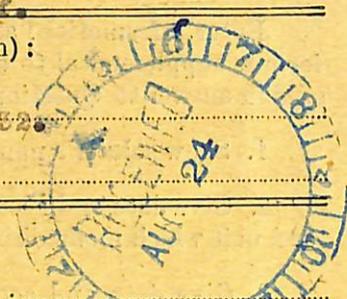
(Title) H.S. Harpole,
1st Lieut. U.S.A.

8. Reburial supervised by A.U. Dufault

A.U. Dufault

Approved: James V. Younger

(Title) James V. Younger
Captain U.S.A.



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.

REPORT OF DISINTERMENT AND REBURIAL

Date March 25th 1922.

1. REMAINS OF CARR, Johnson D SERIAL NUMBER 1244905

RANK Pvt. ORGANIZATION Co. M. 111th Inf.

2. Disinterred (date): March 25th 1922 Gr. 40, Block G. Row 18 Cem. 1232.
From (give complete location):

By: Group Foster. Unit ---

3. Reburied (date): March 29th 1922 in same grave location.
In (give complete location):

By: Group Re-burial S Unit --- Nature of reburial lined casket.

4. Report as to nature of original burial and condition of body upon disinterment:
in blanket in concentration case. Badly decomposed features unrecognizable.

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

(b) Other means of identification found upon disinterment, and general remarks:
GRS plaque reads CARR, Johnson -- Co. M. formerly reburied as Johnston James G 1245903 Pvt. 1/c Co. M. 111th Inf.

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 no hair on skull

Quantity none

Characteristics none

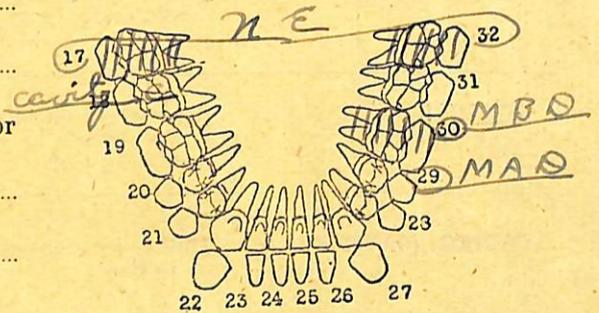
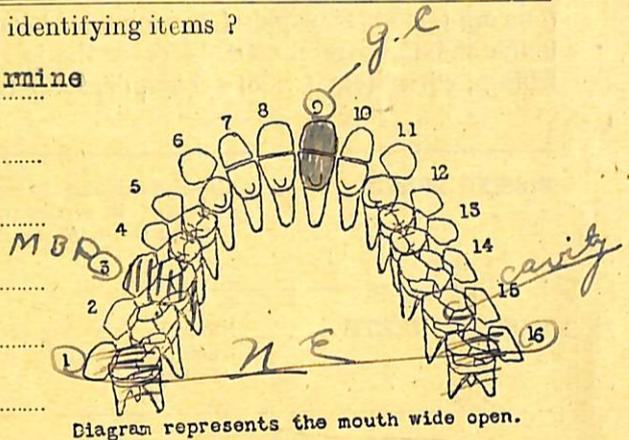
(d) Hair on face—Color no hair on face

Location none

Quantity none

(e) Permanent marks on body (old scars, peculiarities, or missing parts) impossible to report.

(f) Wounds or missing parts (received at time of casualty) none visible.



7. Disinterment supervised by H. H. Foster
H. H. Foster,

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

8. Reburial supervised by A. U. Dufault
A. U. Dufault

Approved: J. H. Joffe
J. H. Joffe, 1st. Lt. QMC.
jt.

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.

OSP-SS
Form No. 1009

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

Deceased
145287

Harlow C.W.
NAME OF DECEASED SOLDIER CEMETERY NO. DATE

Carr, Johnson, Pvt. 1232-Sec.40 - 29 4/11/21.
SERIAL NUMBER ORGANIZATION DATE OF DEATH

Copy of 1244905 to Co. H, 111th Inf. 9/27/18.
Adjustment Department

Date 6-25-21-H

WAR RISK INSURANCE INFORMATION

DATE _____

PERSON NAMED BY SOLDIER TO BE BENEFICIARY OF INSURANCE RELATIONSHIP

Mrs. Amy Carr Angeney Mother
ADDRESS

2410 N. Arkney St., Philadelphia, Penna.

PERSON RECEIVING DEATH COMPENSATION RELATIONSHIP

S/1868/LML

no record
11/26/21

COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

File # 80577

(4-16-21) C

(a) Name CARR, Johnson, D. Ser. No. 1244905
 (b) Rank Pvt. Organization Co. H. 111th Inf. } TYP hmp
 (c) Date of death 9-27-18 (d) Cause of death E/A } B. J.

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

(a) Grave No. 113 Row ---- Plot 3 Sec. 40 TYP. hmp
 (b) Emerg. Address Mrs. Amy Carr (Mother) 2410 N. Ortney St., Phila. Pa.

III. Files of soldiers dying from contagious diseases ////// *ok per D.W. (master card) (4-16-21) C* CKR. B. J.

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

.....

V. Following advice forwarded to Europe by { cable on _____, 192
Sec 40 letter of transmittal on 4/19, 192 /
Par 2 not to be returned LPO
Carr, Johnson D.

VI. Form 115 forwarded to G. R. S., Hoboken, N. J., _____, 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. _____, 192

COUNTRY _____ CEMETERY No. _____ SHEET No. _____

N
44 7/1/24

1. G. S. Form No. 1.

Hq. G. R. File

2. Soldier's No. 1244905

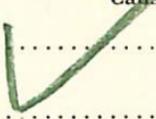
80377

3. CARR JOHNSON T
Surname (In Block Letters) First Name and Initials

4. Pvt. 1/C H 111 INF
Rank Company Regt. or Corps

5. Unknown In Action
Date of Death Cause, if known

6. Unknown
Date of Burial Cemetery



7. Town or Commune (In Block Letters) Department

8. 27
Grave No. Plot No. or Letter

9. Name Peg?..... Cross? Headboard?..... Bottle?.....
Check Method of Marking

1037

10. Buried with Body?..... Attached to Grave Marker?..... X
Identification Tags

11. If name unknown and tags missing, give marks and description

(MARNE)

~~C. 275~~ VIENNE-LE-CHAPEAU

(C. 275) HIT. 33SE (0000) {E-299.7
N-270.9}

12. MAP Verdun SW E 35 270.9 N 299.7 E
Map Reference, if interment is outside of cemetery

SKETCH 8

13. Give name of Chaplain or Burial Officer

RBSH
1247

Signed. 2ND LIEUT. OMCUS.A.

Group... 1.... Unit. 305... G. R. S.



80577

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

CARR 1244905 JOHNSON D.
(Surname.) (Number.) (First Name and Initials.)

Private C H 111th INF
(Rank.) (Organization.)

DATE OF BURIAL Sept 27, 1918

PLACE OF BURIAL 70.85-00.6

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

Forest D'Argonne 1/10,000

GRAVES REGISTRATION

GRAVE NUMBER

HOW MARKED: Name Peg? Cross?
Headboard? Bottle?

IDENTIFICATION TAGS:

Was one buried with body? yes

Was one fastened to name peg or stake used as a grave marker? yes

If name unknown and tags missing, description and marks should be given here:

CMME. BOUREVILLES (MEUSE)
(C-244) SHIT. 355.E. COORD F 3001
N 240.85

REG DIST BCU

REPORTED BY:

Chaplain Conaty 111th Inf Reg.
(Signature and Rank of Reporting Officer.)

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

299

Communal List No. 577-299
Daily Report No. _____

OSP-SS
Form No. 1009

COPY

Harlow C.W.

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

FILE

NAME OF DECEASED SOLDIER	CEMETERY NO.	DATE
Carr, Johnson, Pvt.	1232-Sec.40 - 29	4/11/21.
SERIAL NUMBER	ORGANIZATION	DATE OF DEATH
1244905	Co. H, 111th Inf.	9/27/18.

Original Attached to
Form 115

WAR RISK INSURANCE INFORMATION

Date 6-25-21-H

DATE _____

Mrs. Amy Carr Angeleny (Mother)
PERSON NAMED BY SOLDIER TO BE BENEFICIARY OF INSURANCE RELATIONSHIP

2410 W. Orkney St. Philadelphia,
ADDRESS Penna

Adjustment Made
PERSON RECEIVING DEATH COMPENSATION RELATIONSHIP

APR 17 1922
File No. 80577

S/1868/LML

INVESTIGATION & ADJUSTMENT DEPARTMENT.

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
WASHINGTON MADE

JUL 26 1921
80577

Date June 29, 1921.

File No. 80577 Registration.

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

To: The Adjutant General of the Army, Sixth and B Streets NW., Washington, D. C.

Subject: Information required for G. R. S.

FILE

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

- ✓ a. Surname. CARR ✓
- ✓ b. Christian name. Johnson D. ✓
- ✓ c. Serial number. 1244905 ✓
- ✓ d. Organization. Co. H, 111th Inf. ✓
- ✓ e. Rank. (over)
- ✓ f. Date of death. 9/27/18 ✓
- ✓ g. Cause of death. K/A ✓
- ✓ h. Authority (C. C. No.) Cable 260
- ✓ i. Emergency address. Mrs. Flora Kerstetter, 19 Main St., Darby, Pa., Delaware County
- ✓ j. Relationship. friend

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.							

City # 1232
Sed 40
Sheet 29 6/27

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

By

H. J. Conner

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

MDT/Mr. Wilson

WAR DEPT. AGO

JUL 1 1921

Rec'd World War Div.
Date JUL 2 1921

Donnelly / Allen
E. P. A. 119, 7-2-21

WAR DEPARTMENT
Office of the Quartermaster General of the Army
Washington

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

Date 4/11/21.

ADJUSTMENT MADE

File No. Requisition

JUL 26 1921

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

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.

NOTED FORM 115
DATE 4-16-21

a. Surname Carr. ✓

f. Date of death 9/27/18. ✓

b. Christian name Johnson D. ✓
or (Johnson)

g. Cause of death K/A. ✓

c. Serial Number 1244905 ✓

h. Authority (C.O.#) Mrs. Flora Kurstetter ✓
19 Main St.,

d. Organization Co. H, 111th Inf. ✓

i. Emergency address Sarby, Pa. ✓

e. Rank Pvt. (over) ✓

j. Relationship friend ✓

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

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

BY: *[Signature]*

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

CEMETERY NO: 1252-Sec. 80.

SHEET NO: 29
TYPED BY: I.W.

S/713/LML

Donnelly, L.A.A.
2, P. A. 4/11/21
World War Div.
APR 12 1921

Investigation and Adjustment Dept.
WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
DIRECTOR OF PURCHASE AND STORAGE
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.

80577

Date July 21

File No. 80577 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 CARR
- b. ✓ Christian name Johnson *JD.*
- c. ✓ Serial number 1244905 *OK.*
- d. ✓ Organization /Co. "H" 111th Inf. *OK.*
- e. ✓ Rank Pvt. *OK.*
- f. ✓ Date of death 9-27-18 *OK.*
- g. ✓ Cause of death K/A *OK.*
- h. ✓ Authority (C.C.#) 404 SP 94 *OK.*
- i. ✓ Emergency address Mrs. Amy Carr, 2410 N. Ortney St. Phil.Pa.
- j. ✓ Relationship Mother *see attach. sheet.*

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							

Mrs. Shivers.

H. L. ROGERS,
Quartermaster General, U.S.A.,
Director of Purchase and Storage.

BY:

H. J. Conner

H. J. CONNER,
Captain, Q.M.C.

Honnelly, J.A.
Encl. P. Div. Sect.
W7-7-26-20

Rec'd World War Div.
Date *7-24-20*

Investigation and Adjustment Dept. Invest. Unit
WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
DIRECTOR OF PURCHASE AND STORAGE
WASHINGTON

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

80577

Date July 23, 1920

File No. 80577 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 CARR
- b. ✓ Christian name Johnson *JD.*
- c. ✓ Serial number 1244905 *OK.*
- d. ✓ Organization /Co. "H" 111th Inf. *OK.*
- e. ✓ Rank Pvt. *OK.*
- f. ✓ Date of death 9-27-18 *OK.*
- g. ✓ Cause of death K/A *OK.*
- h. ✓ Authority (C.C.#) 404 SP 94 *OK.*
- i. ✓ Emergency address Mrs. Amy Carr, 2410 N. Ortney St. Phil.Pa.
- j. ✓ Relationship Mother *see attach. sheet.*

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

Mrs. Shivers.

H. L. ROGERS,
Quartermaster General, U.S.A.,
Director of Purchase and Storage.

BY: *H J Conner*

H. J. CONNER,
Captain, Q.M.C.

*Donnelly, J.A.
Encl. Cont. Sect.
W7-7-26-20*

Rec'd World War Div.
Date 7-24-20

WAR DEPARTMENT
 OFFICE OF THE QUARTERMASTER GENERAL
 DIRECTOR OF PURCHASE AND STORAGE
 WASHINGTON

G.R. 2 Form 8-W-A
 Information requested of A.G.O.

File No. _____ Registration _____

From: The Quartermaster General, U. S. Army, (Cometarial Division).

To: The Adjutant General of the Army, 6th & B Sts., N.W., Washington, D.C.

Subject: Information requested for G.R. 2.

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

- a. Surname
- b. Christian name
- c. Serial number
- d. Organization
- e. Rank
- f. Relationship
- g. Emergency address
- h. Authority (C.G.#)
- i. Cause of death
- j. Date of death

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

H. I. ROGERS,
 Quartermaster General, U.S.A.
 Director of Purchase and Storage.

BY:

H. J. CONNER,
 Captain, G.M.C.

DO NOT USE SMALL SLIPS.

c 3-6536

{ Each clerk will sign his surname to steps
taken by him, adding his room number.
Indicate dates thus: 4-8-18. }

DO NOT USE SMALL SLIPS.

THIS SPACE FOR OFFICE MEMORANDA.

80577

Encl. papers gives E.A. as

Mrs. Flora Kerstetter (Friend)

19 Main St., Darby Pa. Del. Co.

Effects Bureau receipt gives E.A. as

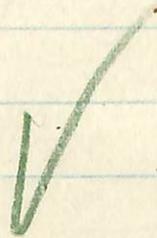
Mrs. Amy Carr Angemy signature (mother)

575 Stanwood St, Fox Chase, Phila.

Gas. report gives E.A. as

Mrs. Jacob Angemy (mother)

2410 N. Arkenly St., Phila. Pa.



FILE

80577

Co. H, 111th Infantry
28th division.

Carr, Johnson D - Pvt. 1244905

Killed by shell fire near Mt. Blainville, woods near
Varennnes, at about 9 a.m. 27th. Death was instantaneous. He was
buried on the spot the same day by Chaplain Connody.

Informant : Dawson, Paul F, Pvt. 1244924
Co. H, 111th Infantry.

Searcher : J.C. Bates, 1st Lt.

J.R.

