

To The A. G. O.

G.R.S. Form #114 B

102

CC

FEB 6 - 1926

DATE

1. NAME CARTER, James A *Col Sig* SERIAL No. 1,315,534

RANK Pvt. ORGANIZATION & DIVISION Co. E 119th Inf

GRAVE LOCATION St. Sever Rouen Seine Inf 56
CTY. NAME NUMBER

GRAVE 1 ROW G Block R PLOT 1

2. ORIGINAL BATTLE AREA GRAVE LOCATION *English numbering* 8184 (3), Block R, ROUEN S.I.
GRAVE COMMUNE DEPT.

COORDINATES St. Sever Cemetery #56

CONCENTRATED TO 4/7/21 1 G, Bl. R, 1
DATE GRAVE ROW PLOT

(St. Sever) ROUEN 56
CEMETERY CTY. NUMBER

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

Original burial

DATE OF DEATH *Oct 26/18*

STATE FROM WHICH HE CAME *MC*

SUBSEQUENT REBURIALS None MEDALS OR DECORATIONS AWARDED *None*
DATE GRAVE ROW PLOT CEMETERY

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR *H. Quackenbush*
G.V.S. Quackenbush, Lieut.-Col., Q.M.C.
Chief, Operations Division, S., Paris.

3. FINAL GRAVE LOCATION 8/22/22 16 4 Blk. A
DATE GRAVE ROW PLOT

Somme American Cemetery #636, BONY, Aisne
CEMETERY Major General

4
FEB 8 A.G.O.
1926
WORLD WAR DIV.

Rec'd World War Div.
2 NOV 17 1927

The Adjutant General
By *W.A. 2-10-26*
AUDITED BY

INSTRUCTIONS FOR PREPARATION OF FORM 114 B

RECEIVED WAR DIV.
8 1926
A.G.O.

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.

FEB 19 26
M. & R. BRANCH
Q.M.C.

GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

CARTER. 1315534. Jas. A.
(Surname.) (Number.) (First Name and Initials.)

Pte 119 US Inf
(Rank.) (Organization.)

DATE OF BURIAL 28 Oct 1918.

PLACE OF BURIAL St Sever Cemetery Rouen.

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

GRAVE NUMBER 8184.

HOW MARKED : Name Peg? Cross? Yes

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 :

REPORTED BY :

Lt Col
(Signature and Rank of Reporting Officer.)

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

Place Rouen (Seine Inf.)

REPORT OF DISINTERMENT AND REBURIAL

Date 4/7/21

1. REMAINS OF James A. Carter SERIAL NUMBER 1315534
RANK Pvt. ORGANIZATION Co. E. 119th Inf.

2. Disinterred (date): 4/7/21 From (give complete location):
Gr. 3, Row G, Bl. R, Plot 1, Cem. 56, St. Sever, Rouen (Seine Inf)
By: Group 1 Unit A. Sec. 5.

3. Reburied (date): 4/7/21 In (give complete location):
Gr. 3, Row G, Bl. R, Plot 1, St. Sever, Cem. 56, Rouen (Seine Inf.)
By: Group 1 Unit A. Sec. Nature of reburial Burlap in wooden box.

4. Report as to nature of original burial and condition of body upon disinterment:
Radio Hospital pajamas and shelter half.
Body badly decomposed.

5. (a) Identification tags: Buried with body? No On grave marker? Yes.
(b) Other means of identification found upon disinterment, and general remarks:
Bodies in adjacent graves identified under proper markers.

6. What does examination of body show as regards the following identifying items? Nos. 3, 7 & 8
estimated. Cavity.

(a) Height (actual measurement) 69 1/2 inches

(b) Weight (estimated) 165 lbs.

(c) Hair—Color Dark

Quantity Full

Characteristics Straight

(d) Hair on face—Color None

Location -

Quantity -

(e) Permanent marks on body (old scars, peculiarities, or missing parts) None discernable

(f) Wounds or missing parts (received at time of casualty) None discernable

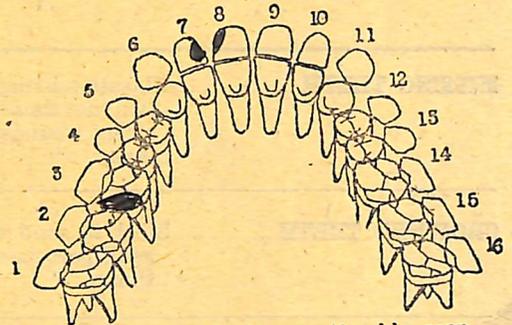
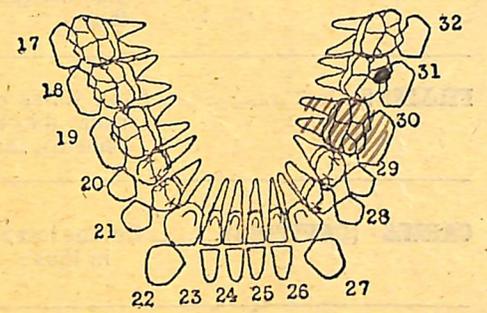


Diagram represents the mouth wide open.
No. 30. M.B.D. No. 31, S.F



HES.

7. Disinterment supervised by James McGourty
James McGourty
Sup. Emb.

Approved: J. Gerald Cole, Capt.
(Title) C.A.C. Inspector.

8. Reburial supervised by James McGourty
James McGourty
Sup. Emb.

Approved: J. Gerald Cole
J. Gerald Cole, Capt.,
(Title) C.A.C. Inspector.

D-30377

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".

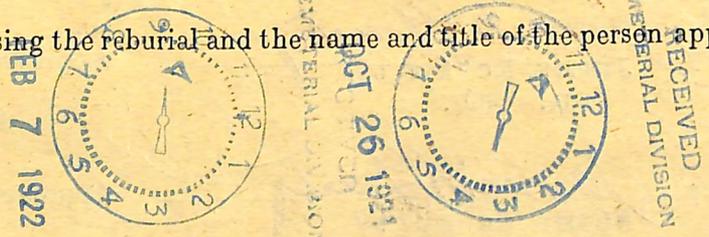
(b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying 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>MISSING TEETH.....All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus :</p>	
<p>CROWNED TEETH.....Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus :</p>	
<p>BRIDGE WORK.....Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :</p>	
<p>FILLINGS.....Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus :</p>	
<p>CARIES (CAVITIES).....Outline location and size of cavity, shade in thus :</p>	
<p>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."</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.



CODE SLIP

HEADING	SUB HEADING	NO. OF COLS	CODE
NAME	Carter, James A	3	3 1 8
BURIED	CEMETERY 636	1	5
	GRAVE 16	2	16
	ROW 4	2	04
	BLOCK A	1	1
STATE	N.C.	2	38
RANK	Pvt.	1	2
DIVISION	30	2	30
ORGANIZATION	119	3	119
ARM	Inf.	1	1
MARITAL	Single	1	1
NAME	Carter	3	3 1 8
RESIDENCE	David B	2	32
	Pungo, N.C.	2	07
RELATION	Mother	3	1
OTHER		1	1
ELIGIBILITY	Dead (4-9-29)	1	6
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF TRIP		1	
ACCEPTANCE		1	

Bur

AUDITED

SEP 19 1952

MO. *MD*
YR.

*Det. Single
for burial + Records*

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

July 8, 1930

Carter, James A. 636-B

Mr. David B. Carter
Fungo, N. C.

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
Carter, James A.

May 16, 1929.

Mrs. Eliza Carter,
Pungo, N. Car.

*My Mother Mrs. Eliza Carter
Died April 9th 1929 -
Yours David B. Carter*

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 Private James A. Carter, Co. E, 119th Infantry, whose remains are now interred in the Somme American Cemetery, Bony, Aisne, France.

Will you please advise this office whether or not he is survived by a 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 re-married 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.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

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July 8, 1930

Carter, James A. 636-B

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Fungo, N. C.

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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.

*File
11/2/31*

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Carter, James A.

May 16, 1929.

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For The Quartermaster General,

Very truly yours,

2 incls.
Act of Congress.
Envelope.

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

M.G.-M.C.R.DIV.
MAY 16 AM 10 47

DISPATCHED

J. H. ✓

(2nd Card)

22

Carter, James A.

1,315,534

(Surname.)

(Christian name in full.)

(Army serial number.)

Pvt. Co. E, 119th 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?

No

(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) Eliza T. Carter

Pungo N.C.

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

checked - BER

1-7-21

drawn by ~~MAH~~

566-47

1-6-21

QM 293 A-C

January 7, 1927.

CARTER, James A. - Private

Mrs. Eliza Carter,
Pungo, North Carolina.

Dear Madam:

The Quartermaster General desires to invite your attention to the inclosed card which gives the permanent cemetery location of the soldier's grave in which you are interested.

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

Please be assured that in effecting removal of the dead, the utmost reverential care was exercised by those who performed this sacred duty. For the future, these graves will be perpetually maintained by the Government in a manner befitting the last resting place of our heroes.

Very truly yours,

1 Incl.
Record card.

F.H. POPE,
Colonel, Q.M.C.
Assistant.

25/560/EYS



5350

COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

File #44012

(a) Name CARTER, James A. Ser. No. 1315534
 (b) Rank Pvt. Organization Co. E, 119th Infantry
 (c) Date of death 10/26/18 (d) Cause of death Pneumonia

*5/23/22 Examined
 for calibration
 Amer 636
 att 6/13/22*

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

(a) Grave No. 3 Row G Plot 1 Sec. R TYP. DMA
 (b) Emerg. Address Mrs. Eliza Carter (mother) Pungo, N.C.

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

IV. A. G. O. DISPOSITION CARD:

Date of receipt _____

(a) Name Mrs. Eliza J. Carter (b) Relationship Mother
 (c) Address Pungo, N.C.
 (d) Remains to be brought to U. S. No
 (e) To be interred in National Cemetery in U. S. at No
 (f) Shipping instructions upon arrival of body in U. S. _____
 (g) Disposition instructions if not brought to U. S. _____

Examiner's Initials MH Date 1-6-21, 1920.

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

Eliza J. Carter
Pungo, N.C., dated June 14, 1919
 confirming request in Par. IV., item _____, above, or requesting that Requested

sometime ago for the body of my son to be returned but since I decided to let it remain in France

Examiner's Initials MH Date 1-6-21, 1920.

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

No request for disposition

(a) Cancellation memos referred to? Yes att

Examiner's Initials att Date 1-7-21, 1920.

COUNTRY FRANCE

CEMETERY No. 56

SHEET No. 47

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

3-7720

Make Form No. 115

FORM 115 - A COMPLETED

231-31-21

See description
Revised 2/21/21 E.O.

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

RECEIVED

Typed by _____, Checked by _____, 1920.

MAR 18 1921

VIII. FINAL ACTION:

Following advice forwarded to Europe by

cable on _____

Cemeterial Division

1920

JAN 22 1921

Organic Project Sub-Section

letter on _____, 1920

Par. #2, Not To Be Returned

IX.

CORRECTIONS

CHANGE OF ADVICE.

ACTION TAKEN.

Desires body be _____

Body to be shipped to _____

X. SUSPENSION REMARKS: Form 120 dated 2-21-21 from Mrs. Eliza T. Carter, Mother,

Pungo, N. C., Requests the remains of her late son left in Europe.

Father deceased. No widow or children survive.

H 3-1-21 (GA)

3/10/21 Hoboken advises Mother her wish will be complied with. 3/21/21-EP

FORM 115 RETURNED BY HOBOKEN - BODY

Mar 18, 1921 **TO REMAIN IN EUROPE.** *Sub.*

COMPILATION OF DISPOSITION OF REMAINS DATA

See Form 115
att 6/13/22

I. LOCATION INDEX CARD:

(a) Name Ser. No. **File #44012**
CARTER, James A. **1315534** TYP.
 (b) Rank Organization **DMA**
Pvt. **Co. E, 119th Infantry**
 (c) Date of death Cause of death **B.J.**
10/26/18 **Pneumonia**

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

(a) Grave No. Row Plot **Block** TYP.
3 **G** **1** **R** **DMA**
 (b) Emerg. Address

III. Files of soldiers dying from contagious diseases **Mrs. Eliza Carter (mother) Pungo, N.C.** **NO CARD** CKR **B.J.**

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

*A.P. Co. - Eliza T. Carter, (mother)
 6-14-19 - [Pungo, N.C.], requests remains
 left in France. AP 1/28/21*

V. Following advice forwarded to Europe by - (cable on 192
 (letter of transmittal on **JAN 22 1921**)

Par. #2, Not To Be Returned **A**

FEB 2 - 1921

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
 C.R.S. FORM 115-A
 August , 1920

CEMETERY NO.

SHEET NO.

S-666/MB

FRANCE

56

47

MB1-31-21

To be prepared in triplicate.

DATE Sept. 28, 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 **CARTER, James A**

2. No. **1,315,534**

3. Rank **Pvt.**

4. Org. **Co. E. 119th Inf**

5. D.D. **Oct 26 1918**

6. C.D. **Pneumonia**

10. Name

11. No.

12. Rank

13. Org.

14. (a) D.D.

(b) D.B.

7. Grave No. **1** Sec.

8. Plot **1** Row **G**

9. **Block R**

Discrepancy found upon disinterment

15. Grave No. Sec.

16. Plot Row

17. **No discrepancy**

18. Cemetery **St. Sever**

20. Dept. or County **Seine Inf**

22. G.R.S. Hdqrs. Code No. **56**

19. Commune or town **Rouen**

21. Country **France**

23. Disinterred (Date) **Sept. 28, 1921**

By **H.T. Geller**

24. Inscription on grave marker:

Name **James A. Carter**

Rank **Pvt.**

Serial No. **- - -**

Organization **Co. E. 119th. Inf.**

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

Henry Hoffmann
 Signature Junior Technical Assistant
 Henry Hoffmann

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). **This body previously reburied by Field Section. Two strips and bottle record found. Both agree with form.**

27. Condition of body **Badly decomposed. Features unrecog,**

28. Nature of burial **Wooden box. 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 **Sept. 28, 1921** By **H.T. Geller**

31. Casket sealed by **H.T. Geller**

Signature of Embalmer, (Supervisor) *H.T. Geller*

AUDITED BY
187 1-23-25

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

32. Designation of body: C-10117

Name _____ Serial No. _____

Rank CARTER, James A. Organization _____ 1,315,534

33. Consigned to: Pvt. Co. E. 119th Inf

Name of Permanent Cemetery _____

34. Casket boxed and marked (Date) Somme American Cemetery, 636, Bony, Aisne
By _____

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. Williams

36. Remarks R.S. Williams, 1st Lt. QMC

Tag on cross read: "J.A. Carter, Pvt. 110 Inf. U.S.A. 1315534"

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

To point of Concentration Sept. 28, 1921

(Name) _____

Convoyer B. J. Flynn Signature R. Williams Shipping Officer

38. Received at Railhead or Point of Concentration: Date R.S. Williams, 1st Lt. QMC

By G.R.S. Representative Hubert W. Boyette Sept. 28, 1921

39. Shipped from Railhead or Point of Concentration: Date 3-OCT 1921

To Permanent Cemetery _____

(Name) _____

Convoyer B. J. Flynn No. 636 Signature Hubert W. Boyette Shipping Officer

40. Received: Date 7 OCT 1921

G.R.S. Representative Hubert W. Boyette, Capt. QMC

41. Reinterred Aug. 22, 1922

(Date) _____

42. Grave No. 30 Section _____

43. ~~Block~~ Block A Row 6

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

Place Rouen (Seine Inf.)

REPORT OF DISINTERMENT AND REBURIAL

Date Sept. 28, 1921.

1. REMAINS OF CARTER, James A. SERIAL NUMBER 1315534

RANK Pvt. ORGANIZATION Co. 4, 119th Inf.

2. Disinterred (date): Sept. 28, 1921 From (give complete location):

Gr. 1, Plot 1, Row "G", Block "R", St. Sever Cem. 56, Rouen, France.

By: Group 3 Unit U.S.A.

3. Reburied (date): Aug. 22, 1922 In (give complete location):

Gr. 30, Block A, Row 6, Somme Cemetery, Bony (4isne)

By: Group Reburial Unit U.S.A. Nature of reburial Casket & shipping case

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

Wooden box, burlap. Badly decomposed. Features unrecognisable.

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

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

This body previously reburied by field section. Two strips and bottle record found - both agree with form.

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 Impossible to determine

Quantity Scant

Characteristics Impossible to determine

(d) Hair on face—Color None visible

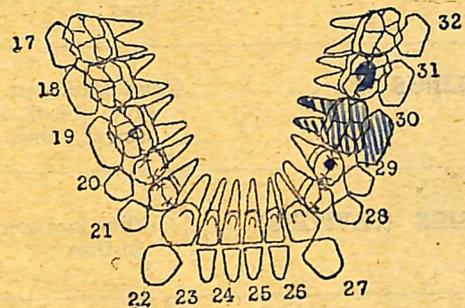
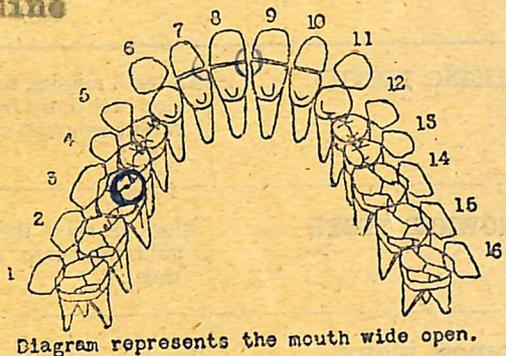
Location

Quantity

(e) Permanent marks on body (old scars, peculiarities, or missing parts) None discernible

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

None visible.



3 Cav., 7, 8, 9 Cav., 19 Cav., 29 SF, 30 MBD, 31 SF

7. Disinterment supervised by H.T. Coiler
H.T. Coiler, Sup. Smb.

Henry Hoffman, Checker.
Approved: R.S. Williams
(Title) 1st Lt., C.E.C.

8. Reburial supervised by B.A. Bradford
B.A. Bradford.

Approved: D.E. Lowry
(Title) D.E. Lowry, 1st Lt. QMC

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

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

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.
2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.
3. Give date and accurate information as to location of reburial and the group and unit which made reburial, and how reburial was made—in casket, wooden box, etc.
4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried—in a casket, box, burlap, etc. This statement should be as complete as possible.
5. (a) State whether identification tags were found buried with body and on grave marker by reporting "Yes" or "No".
(b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying the body, other than that tabulated under Item No. 6.
6. Give all information as to body description and dental chart as nearly correctly as the condition of the body will allow. Items (e) and (f) under the body description are very important and should be very complete. The dental chart is also very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), 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 TEETHAll teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus :	
CROWNED TEETHBlock in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus :	
BRIDGE WORKBlock in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :	
FILLINGSDraw 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.

March 10th, 1921.

File No. 293.8 Cem.Div., Corr.Branch,
(CARTER, James A.)

Mrs. Eliza T. Carter,
Pungo, N. C.

Dear Madam:-

Receipt of shipping inquiry dated February 21, 1921,
relative to the remains of your son, the late Private James A.
Carter, Serial Number 1315534, Company E, 119th Infantry, is
acknowledged.

In accordance with your desire, the remains will be
left in France for burial in a permanent American Cemetery. You
are assured that the grave site will always be maintained as a
fitting memorial of the late soldier's sacrifice.

The Department wishes to convey to you renewed
assurance of its sympathy in your bereavement.

By authority of the Quartermaster General:

R. E. SHANNON,
Captain, Q.M. Corps,
Officer in Charge.

BY:

F. C. PALLAS,
Executive Assistant.

ff-ga

RECEIVED



MAR 18 1921
2. H. D.

Noted on Form No. 115
Date 3/21/21 - EP

MAILED
MAR 17 1921
COR. BR. C. P. S.

March 10th, 1921

File No. 293.8 Com. Div., Court Branch,
(CARTER, James A.)

Mrs. Eliza T. Carter,
Pungo, N. C.

Dear Madam:-

Receipt of shipping invoice dated February 21, 1921, relative to the remains of your son, the late Private James A. Carter, Serial Number 1315234, Company B, 115th Infantry, is acknowledged.

In accordance with your desire, the remains will be left in France for burial in a permanent American Cemetery. You are assured that the grave site will always be maintained as a fitting memorial of the late soldier's sacrifice.

The Department wishes to convey to you renewed assurance of its sympathy in your bereavement.

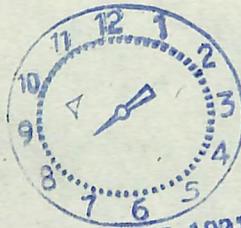
By authority of the Quartermaster General:

R. E. SHANNON,
Captain, G. M. Corps,
Officer in Charge.

BY:

F. C. PALLAG,
Executive Assistant.

RECEIVED



MAR 18 1921
G. R. S.

MAILED

MAR 17 1921

CO. BR. C. R. S.

17-22

Complete
Return records

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

CEMETERIAL DIVISION

WASHINGTON
Hoboken, N. J.

FEB 14 1921

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

To: Mrs. Eliza T. Carter, Pungo, N.C.

SUBJECT: Remains of Pvt. James A. Carter, Ser. No. 1315534, Co. E, 119 Inf.

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

No change EC'S

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.

Noted on Form No. 118

Date *2-3-21* *lsa*

Per E.P. (Wash)

Was soldier married? *No*

NAME OF—	NO. AND STREET.	TOWN.	STATE.
Soldier's widow	<i>Not married</i>		
Soldier's children. (Name oldest first.)	1		
	2		
	3		
Father	<i>Dead</i>		
Mother	<i>Eliza T. Carter</i>	<i>Pungo</i>	<i>N.C.</i>
Brothers. (Name oldest first.)	1	<i>David B. Carter</i>	<i>"</i>
	2	<i>Henry O. Carter</i>	<i>"</i>
	3		
Sisters. (Name oldest first.)	1		
	2		
	3		

Date *2/21/1921*

Signature *Eliza T. Carter*

Address *Pungo, N.C.*

Relationship *Mother*

Feb 21st, 1921

Address
Date

I, the undersigned, am the Mother 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 Eliza J. Carter

FEB 24 1921

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.

AVB DEBYRLEML

(OFFICE OF THE) JUDGE ADVOCATE GENERAL
WASHINGTON, D. C.

44012

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

CARTER. 1315534 Jas. A.
(Surname.) (Number.) (First Name and Initials.)

Ote. 119 U.S. Inf.
(Rank.) (Organization.)

DATE OF BURIAL. 28 Oct 1918

PLACE OF BURIAL. St Sever Cemetery Rouen

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

GRAVE NUMBER. 8184

HOW MARKED: Name Peg? Cross? Yes

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:

56

REPORTED BY:

(Signature and Rank of Reporting Officer.) Lt Col

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



12

44012

CARTER J.A.

1315534

Private 119/Inf.

D.D. 26.10.18

Buried St. Sever Rouen.

56



a 344

44012

Carter J.A. #1315534

Pvt. 119th U.S. Inf.

10/26/18

Buried St Sever Cemetery, Rouen

56

B 417



44012
Carter J.A. #1315534

Pvt. 119th Inf.

DD 10/26/18

Buried St Sever, Rouen

BB

9283 ✓

47012

CARTER, J. A. #1315534

Pvt. 119th, Inf.

10-26-18

Block R. Plot 1. F 3.

8184

E.

St. Sever Cemetery at Rouen

56

9 335

44012

Carter J.A. #1315534

Pvt. 119th Inf.

DD 10/26/18

Buried St Sever Cem-Ext. Rouen
Blk.R. P.1. Row G Grave 3

56



a 373

drawn by JPH

56-47

1-6-21

checked - BER

1-7-21

44012

AGO

Adj. J. C. Harris

Washington, D.C.

Dear Sir,

you ask me sometime ago if I wanted the body of my son brought to this country and I ~~had~~ wrote you that I did but I have decided to let it remain where it is as I had a letter from the Chaplain saying the Cemetery was well cared for His name Private James A. Carter Co E 119th Inf # 1315534 and he was buried in St. Sever Cemetery Rouen France the Grave # 8184

yours Respect

Elyse J. Carter

20 Received A G O, JUN 18 1919

REC'D ENLISTED DIVISION



JUN 19 1919

A. G. O.

Received Enlisted Division

JUN 19 1919

T.B.

44012

AGO

Punigo, N.C.
June 14th 1919

Adj. P. C. Harris
Washington, D.C.

Dear Sir,

you ask me sometime ago if I wanted the body of my son brought to this country and I ~~had~~ wrote you that I did but I have decided to let it remain where it is as I had a letter from the Chaplain saying the cemetery was well cared for His name Private James A. Carter Co E 119th Inf # 1315534 and He was Buried in St. Sever cemetery Rouen France the Grave # 8184

Yours Respect
Eliza J. Carter

Received A G O, JUN 18 1919

REC'D
ENLISTED DIVISION



Received Enlisted Division

JUN 19 1919

A. G. O. T.R.

293.8 (Carter, James A.)
Burial Records, 7th & B Sts.

DATE

amh

June 25, 1919.

Mrs. Eliza T. Carter,
Pungo, N. C.

Dear Madam:

DATES ON WHICH THIS FILE IS CHARGED OUT
Replying to your letter of June 14th, 1918,
relative to the final disposition of the remains
of your son, James A. Carter, I beg to advise you
that the card previously sent in by you is herewith
returned, together with a new one. It is requested
that you fill out the new card, showing you present
wishes, and return it to this office in the inclosed
envelope, which requires no postage.

It is desired to express to you the deep sympathy
of the Department on account of the great loss you
have sustained, and to commend you for the contribution
you have made to the cause for which your son gave
his life.

Very respectfully yours,

W. V. Carter,

The Adjutant General
per



File amh 1425/19
3 Incl.

