

ef

234

G.R.S. Form #114 B

To The A. G. O.

6599

MAY 14 1923

DATE 10/10/21

1. NAME CASANI, Luigi SERIAL No. 1981372

RANK Pvt. ORGANIZATION Co. Hq. 9th Inf. DIVISION

GRAVE LOCATION Argonne Amer. Romagne/s/Montfaucon 1232 sec 83

CTY. NAME NUMBER

39 sec 83 1

GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION Bac 8 Chetel Chehery(Ardennes)

GRAVE COMMUNE DEPT.

COORDINATES 35.S.E. 280.07-N. 300.52-E.

CONCENTRATED TO 6.2.19. 39. 83. 1.

DATE GRAVE ROW PLOT

Meuse Argonne cemetery 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 body.

DATE OF DEATH Nov 14/18

STATE FROM WHICH HE CAME Ky

Data form 1.

MEDALS OR DECORATIONS AWARDED

SUBSEQUENT REBURIALS

DATE GRAVE ROW PLOT CEMETERY

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR

M. B. Birdseye

M. B. BIRDSEYE, 1st Lt., Q.M. Corps, U.S. Army

3. FINAL GRAVE LOCATION 10/10/21

DATE GRAVE ROW Block PLOT

39 27 D

Meuse Argonne American Cemetery 1232 Romagne sous Montfaucon

Robert G. Devitt, Major General, The Adjutant General, MAY 19 1921

MAY 28 1921, WORLD WAR DIV.



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.

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Date 16, JUNE 1919REPORT OF DISINTERMENT AND REBURIAL

Remains of:

Name: CASANI, LuigoNumber 1981572Rank: UnknOrganization Hqrs. Co. 9th Inf.

Disinterment and Reburial made by Group:

Unit

Disinterred (Date)

From (Give complete location)

62, JUNE 1919Grave# 8 B/A CTY. CHATEL, CHERCHY, ARDENNESMap 35 SE E 300.52 N 260.07

Reburied (Date)

In: (Give complete location)

2, JUNE 1919Grave# 39 Sec 83 Plot 1ARGONNE AMERICAN CEMETERY #1232ROMAGNE, MEUSE.

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

Body buried in uniform and blanket and badly decomposed.

Was any identification tag found upon the body?

Yes

What other means of identification were found on the body?

None

Notes:

If upon disinterment, effects are found on bodies, they will be promptly sent to the Effects Report Direct as is required by G.P. 170, C.H. 2, 1918., 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. Zama.R. H. ROSENTHALand Lieut. O. M. C. U. S. A.G.O. GroupUnit

RECEIVED
25 JUN 1917
O. C. Q. M.
G. R. S.

CODE SLIP

| HEADING | SUB-HEADING | NO. OF COLS | CODE |
|-------------------------|----------------------|-------------|------------|
| NAME <i>CASANI</i> | <i>CAS</i> | 3 | <i>319</i> |
| <i>Luigi</i> | CEMETERY <i>1232</i> | 1 | <i>1</i> |
| BURIED | GRAVE <i>39</i> | 2 | <i>39</i> |
| | ROW <i>27</i> | 2 | <i>27</i> |
| | BLOCK <i>11</i> | 1 | <i>4</i> |
| STATE | <i>Ky</i> | 2 | <i>20</i> |
| RANK | <i>Pvt</i> | 1 | <i>2</i> |
| DIVISION | <i>2</i> | 2 | <i>02</i> |
| ORGANIZATION | <i>9</i> | 3 | <i>009</i> |
| ARM | <i>Inf</i> | 1 | <i>1</i> |
| MARITAL | <i>No</i> | 1 | <i>2</i> |
| NAME <i>Casani</i> | <i>CAS</i> | 3 | <i>319</i> |
| <i>Mary</i> | STATE | 2 | |
| RESIDENCE | COUNTY | 2 | |
| <i>All res foreign</i> | CITY | 3 | |
| RELATION | <i>mother</i> | 1 | <i>1</i> |
| OTHER | | 1 | |
| ELIGIBILITY | <i>Foreign</i> | 1 | <i>4</i> |
| NATIVITY | | 1 | |
| RACE | | 1 | |
| ENGLISH | | 1 | |
| ATTENDANT | | 1 | |
| HEALTH | | 1 | |
| NO. OF SONS | | 1 | |
| DATE OF | MO. | 1 | |
| TRIP | YR. | 1 | |
| 97 ACCEPTANCE 29/514 | <i>Italy</i> | 1 | |
| | | 2 | <i>01</i> |

RECORDED
 INDEXED
 FILED
PM

MA

Casani, Luigi
Pvt., Hq. Co., 9th Inf. KY.

XC-145235

SINGLE

MOTHER IN ITALY

ins

~~SM?~~

~~LF?~~

all rel. foreign

4-5-33

Grisanti Statuary Company

MANUFACTURERS OF

Plastic Relief Ornaments

FOR INTERIOR AND EXTERIOR DECORATIONS

304-308 SOUTH CAMPBELL STREET

PHONE EAST 1100

Louisville, Ky.

August 27th, 1931

*Casani, Luigi
(MA)*

The Quartermaster General
Washington, D. C.

Re: QM 293 A.-M
Casani, Luigi (MA)

Dear Sir:

In reply to your letter of the 25th, the late Private
Luigi Casani was not married.

Very truly yours,

*Grisanti
mss.*

ZG MSG



QM 293 A-M
Casani, Luigi (MA)

August 25, 1951.

Mr. Teffiro Grisanti,
304 South Campbell St.,
Louisville, Kentucky.

Dear Sir:

In order that the records of this office may be complete and correct, it is requested that you advise whether or not the late Private Luigi Casani was married and is survived by a widow. If so, please furnish her name and address.

For your convenience in replying, there is enclosed herewith a self-addressed envelope which requires no postage. 0

For The Quartermaster General,

Very truly yours,

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

Encl:
Env.
MB

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Casani, Luigi
1232.

Sept. 4, 1929

Mr. Teffiro Grisanti,
304 S. Campbell St.,
Louisville, Ky.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated June 29, 1929 making inquiry concerning the name and address of the mother and widow of the deceased service man above named. These addresses are desired with a view to ascertaining the number of mothers and widows who desire to make a pilgrimage to the cemeteries of Europe in which the remains of their sons and husbands are interred.

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

Write answers in space below

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

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

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

Mother
Mary Casani
Prusnegnan,
Cortina, Antelminelli
Lucca, Italy

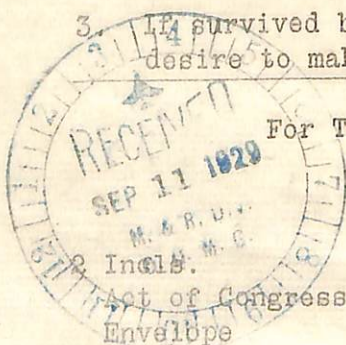
I do not know

For The Quartermaster General,

Very truly yours,

John Harris

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



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

June 29 , 1929.

(Casani, Luigi)

Mr. Teffiro Grisanti,
304 S. Campbell St.,
Louisville, Ky.

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 friend of the late Private Luigi Casani, Hdq. Co., 9th 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 mother or widow who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish the full names and addresses of the mother and widow in order that action may be taken to extend invitations to them to make the pilgrimage. Both mothers and widows are entitled to make the pilgrimage.

Your attention is particularly invited to Section 4 of the enclosed Act, which defines the terms "mother" and "widow". If the relative is a stepmother, mother through adoption, or any woman who stood in loco parentis to the decedent, a statement as to her relationship is requested. If he was survived by a widow who has since remarried it is also requested that a statement to that effect be made.

For your reply, you may use the enclosed envelope which requires no postage.

For The Quartermaster General,

Very truly yours,

2 incls.
Act of Congress.
Envelope.

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

QM 293 A-M
Casani, Luigi (MA)

August 25, 1931.

Mr. Teffiro Grisanti,
304 South Campbell St.,
Louisville, Kentucky.

Dear Sir:

In order that the records of this office may be complete and correct, it is requested that you advise whether or not the late Private Luigi Casani was married and is survived by a widow. If so, please furnish her name and address.

For your convenience in replying, there is enclosed herewith a self-addressed envelope which requires no postage.

For The Quartermaster General,

Very truly yours,

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

0462

Encl:
Env.
MB

200 AUG 25 3:25

CO. MG M & R BR

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Casani, Luigi
1232.

Sept. 4, 1929

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Very truly yours,

2 Incls.
Act of Congress
Envelope

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Major, Q. M. Corps,
Assistant.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

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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.

QM 293 C-R

September 20, 1923.

Mr. Teffiro Grisanti,
304 South Campbell,
Louisville, Ky.

Dear Sir:

The Quartermaster General has been informed that the
permanent grave of
Infantry, in Grave 39, Row 27, Block D, 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 a headstone of white marble, of suitable design, with name, rank, division, organization, date of soldier's death and State from which he came. 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.

You are assured in effecting removal of the remains, the utmost care and reverence were exercised and more than willingly accorded by those who performed 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.H. CHEAL

Assistant.

O.Q.M.G.
Central Mail & Files Bn



SEP. 20, 1923
H. B.

23/592/ARK

RD

WPK

72002

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

.....CASANI.....1981372.....LUIGO.....
(Surname). (Number). (First Name and Initials).

.....unknown.....Coy. HQ.....9 Inf.....
(Rank). (Organization).

PLACE OF DEATH: Mobile. Hp./48, Exermont...

CAUSE OF DEATH:.....G. S. W. Side L.....

DATE OF BURIAL:.....Nov. 14, 1918.....

PLACE OF BURIAL: Exermont, Ardennes, France

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

BRAND

GRAVE NUMBER:8.....

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:

~~CRIME. EVERMONT ARDENNES~~
~~(C-209) SHT. 35 NE. COORD~~

NEAREST RELATIVE:

ADDRESS:

RELATIONSHIP:

REPORTED BY:

H. B. Wilmer, Capt. U.S.A.
(Signature and Rank of Reporting Officer).

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



Communal List No. C-269-28-1
Daily Report No. _____

72003

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

CASANI 1981372 LUIGO
(Surname). (Number). (First Name and Initials).

unknown Coy. HQ. 9 Inf.
(Rank). (Organization).

PLACE OF DEATH: Mobile Hp/#8, Exermont...

CAUSE OF DEATH: G.S.W. Side L.

DATE OF BURIAL: Nov. 14, 1918

PLACE OF DEATH: Exermont, Ardennes, France

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

GRAVE NUMBER: 8

HOW MARKED: Name Peg? Cross? yes

Headboard? Bottle?

IDENTIFICATION TAGS: 2

Was one buried with body?

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:

GMME. EXERMONT (ARDENNES)
(C 209) SHT. 35 N.E. COORD

NEAREST RELATIVE:

ADDRESS:

RELATIONSHIP:

REPORTED BY:

H. B. Wilmer, Capt. M. C. USA



Communal List No. 709-282
Daily Report No. _____

72 002

Soldier's No. 981372

NAME Casani Luigo (none)
un (Regt.)

Rank known Co. Hq (Corps) 4th Inf.

Nov. 11/ 1918 D. of Wounds
Date of Death Cause

Nov. 14/ 1918 American
Date of Burial Cemetery
Map VERDUN S.E. 35, 200.1 N. 300.55 E.

Exerment Ardennes
Town or Commune Dept.

Grave No. 8 Plot 1 Sec. H

Tag buried with body

Tag attached to Cross

Est. Lt. C. D. WILDER, M.C., U.S.A. *M.H. 8*

Chaplain - Burial Officer (which?)

David E. Miller Sgt. A.M.C.
Signature Rank

Group 7 Unit 310 G.R.S.

CHATEL-CHENEY (ARDENNES)
246 **CHATEL-CHENEY** **E-30055**
35 S.E. 300RD **N-280.10**

Chatel - Chbery -

() Amur P/A - ordennes

255
P/A

844



CHATTEL-CHBERY
M-30010

WAR DEPARTMENT
Office of the Quartermaster General of the Army
Washington

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

PLEASE
EXPEDITE.

FILE

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

File No. *Adjustment Made*
File No. 79002
File No. 7 1921
Requisition

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 4-27-21

- a. Surname **CASANI** ✓
- b. Christian name ~~Luigo~~ Luigi
- c. Serial Number **1981372** ✓
- d. Organization **Hdqrs. Co., 9th Inf.** ✓
- e. Rank **Pvt.** ✓
- f. Date of death **11-14-18** ✓
- g. Cause of death **DWRIA** ✓
- h. Authority (C.O.#) **389**
Jeffro Brisanti
- i. Emergency address **304 S. Campbell Louisville, Ky**
- j. Relationship **Cousin**

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.

CW

BY: *H. J. Conner*

CEMETERY NO:

1232-Sec. 83

SHEET NO:

32

TYPED BY:

VH.

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

Donnelly
Apr 27 1/2 3/4

3/713/LML

Rec'd World War Div
Date
APR 22 1921

APR 22 1921

WAR DEPARTMENT
Office of the Quartermaster General of the Army
Washington

FILE

Date 4-21-21

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

File No. Requisition

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.

- a. Surname **CASANI** ✓
- b. Christian name ~~Luigo~~ Luigi
- c. Serial Number **1981372** ✓
- d. Organization **HdQRS.Co., 9th Inf.** ✓
- e. Rank **Pvt.** ✓
- f. Date of death **11-14-18** ✓
- g. Cause of death **DWRIA** ✓
- h. Authority (C.O.#) **389**
- i. Emergency address Jeffris Brisanti
304 S. Campbell Louisville Ky
- j. Relationship Cousin

NOTED FORM 115
DATE 4-27-21

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.

GW

BY: H. J. Conner

CEMETERY NO:

1232-Sec. 83

SHEET NO:

32

TYPED BY:

VH.

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

8/713/LML

Rec'd World War Div
Date APR 22 1921

Rec'd S.S. Div
Date APR 22 1921

Donnelly
Apr 17 1/2 21

FILE

WAR DEPARTMENT
Office of the Quartermaster General
Washington

Date 4-21-21

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

File No. 4-21-21

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

1. It is 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. Cause of death
- h. Authority (C.O.W.)
- i. Emergency address
- j. Date of death

RECEIVED

BODY DESCRIPTION
(See page 12 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)

M. L. ROGERS
Quartermaster General, U.S. Army

M. J. CONNER
Adj. Gen., G.M.C.

APR 25 1921

RECEIVED

CEMETERIAL DIVISION
REGISTRATION SECTION

FILED

June 1st 1921

MEMO FOR:

Cards Department,

1. CASE OF:

Hdqrs. Co. 9th Infantry.

ORGANIZATION (Old)

CASANI, #1981372, Luigo -- Private.

(Name)

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

ORGANIZATION (New)

FILE NO.

SURNAME

SERIAL NUMBER

FIRST NAME AND INITIALS Luigi

RANK

DATE OF DEATH

CAUSE OF DEATH

| | Date | Place | F-1A No. |
|----------|------|-------|----------|
| Orig. | | | D- |
| 1st Reb. | | | D- |
| 2nd Reb. | | | D- |
| 3rd Reb. | | | D- |

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

BY: Muriel D. Towne.

Investigation & Adjustment.

(Department)

5 x 8 card was sent to file.

Corrections made
on Organization
File Card:

By *MJC*

COMPILATION OF DISPOSITION OF REMAINS DATA

File #72002

I. LOCATION INDEX CARD:

(a) Name CASANI, Luigi Ser. No. 1981572
(b) Rank Private Organization Hdqrs. Co. 9th Inf.
(c) Date of death 11/14/18 (d) Cause of death DWRIA

TYP. jek
CKR. S.M.

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

(a) Grave No. 39 Row --- Plot 1 Sec. 83 TYP. jek

(b) Emerg. Address Mrs. Maria Casani. (Mother) Gromignana, Italy.

Q. G. O. Jeffers Grisanti (cousin), 304 S. Campbell, Louisville, Ky.
CKR. S.M.

III. Files of soldiers dying from contagious diseases

no card in file RR 4-19-21

IV. A. G. O. DISPOSITION CARD:

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

Examiner's Initials Date, 1920.

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

no request for disposition

(a) Cancellation memos referred to? yps

Examiner's Initials RR Date 4-19, 1920

COUNTRY France. CEMETERY No. 1232-Sec. 83 SHEET No. 32

MAY 3 1921 - DP

check RR 4-26-21

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

Dec. # 83

{ letter on ~~4/28/21~~, 1920

Par. 2 - not to be returned

Casoni, Luigi

LAS

IX.

CORRECTIONS

CHANGE OF ADVICE.

ACTION TAKEN.

Desires body be _____

Body to be shipped to _____

X. SUSPENSION REMARKS: _____

SHIPMENT. (Show actual marking of box.) Box No. C-8219

32. Designation of body:

Name CASANI, Luigi Serial No. 1981372

Rank Pvt. Organization Co. Hq. 9th Inf.

33. Consigned to:

Name of Permanent Cemetery Argonne Amer. 1232 Romagne/s/Montfaucon

34. Casket boxed and marked (Date) Oct. 10, 1921. By Martin Styles

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 Geo. C. Bland, 1st Lieut., M.C.

36. Remarks None

37. Shipped from point of Operation: (Date) October 10th, 1921

To point of Concentration Morgue, Romagne.

Convoyer W. J. Royed Signature Shipping Officer Albert W. Jackson, 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 (Name) Signature Shipping Officer

40. Received: Date

G.R.S. Representative

41. Reinterred Meuse Argonne Com. #1232, Oct. 10th, 1921.

42. Grave No. Row 27 Block D Gr. 39 Section

43. Plot Row

G.R.S. Representative James W. Younger, Capt., QMC.
irz.

AUDITED BY

To be prepared in triplicate.

DATE Oct. 10, 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 CASANI, Luigi
- 2. No. 1981372
- 3. Rank Pvt.
- 4. Org. Hq. Co. 9th Inf.
- 5. D.D. 11-14-18
- 6. C.D. DOW
- 10. Name _____
- 11. No. _____
- 12. Rank _____
- 13. Org. _____
- 14. (a) D.D. _____
- (b) D.B. No discrepancies.

Discrepancy found upon disinterment

- 7. Grave No. 39 Sec. 83
- 8. Plot 1 Row _____
- 9. _____
- 15. Grave No. _____ Sec. _____
- 16. Plot _____ Row _____
- 17. No discrepancies.

- 18. Cemetery 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 83
- 23. Disinterred (Date) Oct. 10, 1921. By Martin Styles.

24. Inscription on grave marker:

Name Luigi Casani Serial No. - - -
 Rank Pvt. Organization Hq Co 9 Inf.

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

Clarence J. Hughes
 Signature Junior Technical Assistant
Clarence J. Hughes.

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).

Tag on body badly corroded; tag on marker reads "Luigi Casani 19--372"

27. Condition of body Badly decomposed; features not recognizable.

28. Nature of burial Uniform, burban and wooden box.

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 Oct. 10, 1921 By Martin Styles

31. Casket sealed by Martin Styles

Signature of Embalmer, (Supervisor) Martin Styles
Martin Styles.

Place Romagne 1232.

REPORT OF DISINTERMENT AND REBURIAL

Date Oct. 10, 1921.

1. REMAINS OF CASANI, Luigi SERIAL NUMBER 1981372

RANK Pvt. ORGANIZATION Hq. Co. 9th Inf.

2. Disinterred (date): Oct. 10, 1921 From (give complete location): Gr. 39, Sec 83, Plot 1

By: Group 3 Unit Sec 2.

3. Reburied (date): Oct. 10th, 1921. Meuse Argonne Cem. #1232, Row 27 Black D Gr. 39 In (give complete location): Unlined Casket.

By: Group Reburial Sec. Unit Nature of reburial

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

wooden box and burlap and uniform. badly decomposed, features not recognizable.

5. (a) Identification tags: Buried with body? yes On grave marker? yes

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

Tag on peg badly corroded, reads "Cas----" Tag on marker reads "Luigo Casani

19-372" USA" no effects. 3, 14, 15, 31 met. fill

6. What does examination of body show as regards the following identifying items 18, 20 ~~teeth~~ cavity

(a) Height (actual measurement) impossible to determine. 19 decayed, 30 MBD.

(b) Weight (estimated) do

(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.

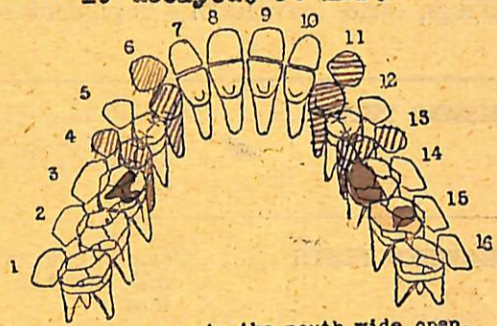
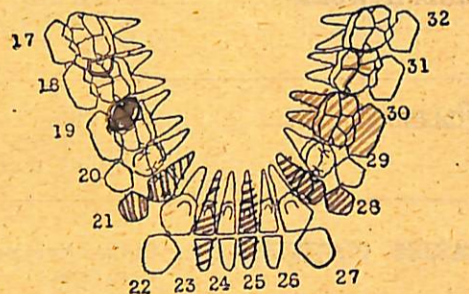


Diagram represents the mouth wide open.



7. Disinterment supervised by Martin Styles Approved: George C. Bland 1st Lt. QMC. (Title)






8. Reburial supervised by W. B. SHEILD Approved: JAMES W. YOUNGER, CAPT., QMC. (Title)

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

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

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.
2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.
3. Give date and accurate information as to location of reburial and the group and unit which made reburial; and how reburial was made—in casket, wooden box, etc.
4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried—in a casket, box, burlap, etc. This statement should be as complete as possible.
5. (a) State whether identification tags were found buried with body and on grave marker by reporting "Yes" or "No".

(b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying the body, other than that tabulated under Item No. 6.
6. Give all information as to body description and dental chart as nearly correctly as the condition of the body will allow. Items (e) and (f) under the body description are very important and should be very complete. The dental chart is also very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspid (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

| | |
|---|---|
| <p>MISSING TEETH.....All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus :</p> |  <p>TOOTH MISSING TOOTH MISSING</p> |
| <p>CROWNED TEETH.....Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus :</p> |  <p>GOLD CROWN PORCELAIN CROWN GOLD CROWN</p> |
| <p>BRIDGE WORK.....Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :</p> |  <p>GOLD AND PORCELAIN BRIDGE GOLD BRIDGE</p> |
| <p>FILLINGS.....Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus :</p> |  <p>SILVER FILLING GOLD FILLING GOLD FILLING GOLD FILLING</p> |
| <p>CARIES (CAVITIES).....Outline location and size of cavity, shade in thus :</p> |  <p>CAVITY DECAYED DECAYED DECAYED</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.



COMPILATION OF DISPOSITION OF REMAINS DATA

File #72002

I. LOCATION INDEX CARD: *42-213 C*

(a) Name CASANI, Luigi Ser. No. 1981572
 (b) Rank Private Organization HdQRS. Co. 9th Inf.
 (c) Date of death 11/14/18 (d) Cause of death DWRIA

} TYP. jok
 } S.M.

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

(a) Grave No. 39 Row --- Plot 1 Sec. 83 TYP. jok
 (b) Emerg. Address Mrs. Maria Casani. (Mother) Gromignana, Italy.

III. ~~Files of soldiers dying from contagious diseases~~ *Q. Q. O. Jeffiso Grisanti (Cousin), 304 S. Campbell, Louisville, Ky* CKR. S.M.

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

V. Following advice forwarded to Europe by { cable on _____, 192
 { letter of transmittal on 4/28/21, 192

Sec. #83
Part 2 - not to be returned
 VI. Form 115 forwarded to G. R. S., Hoboken, N. J., L.A.T., 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. _____

MAY 3 1921 - *AP*