

290  
293

G.R.S. Form #114-B

To The A. G. O.

2875

MAR 10 1926

DATE 2/10/22.

1. NAME CECCARINI, Alcibiade SERIAL No. 1685482  
 RANK Pvt. ORGANIZATION Co. C. 326th Inf.  
& DIVISION 82  
 GRAVE LOCATION Meuse-Argonne Amer. Cty. Romagne-sous-Montfaucon, Meuse. 1232 - 14  
 CTY. NAME 77 Sec.14. NUMBER 2

2. ORIGINAL BATTLE AREA GRAVE LOCATION Isolated, 7 Chevieres, Ardennes  
 GRAVE COMMUNE DEPT.  
 COORDINATES Verdun 35 NW 282.2 N 294.1 E

CONCENTRATED TO 4/10/19 77 Sec 14 2  
 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 body.

DATE OF DEATH Oct 10, 1918

STATE FROM WHICH HE CAME P. I.

data F-1.  
MEDALS OR DECORATIONS AWARDED None

SUBSEQUENT REBURIALS  
 Robert C. G. Davis,  
 Major General,  
 The Adjutant General,  
 By R.V.B.  
 DATE GRAVE ROW PLOT CEMETERY  
 DATE GRAVE ROW PLOT CEMETERY

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

3. FINAL GRAVE LOCATION 2/10/22 35 26 Block B.  
 DATE GRAVE ROW PLOT

AUDITED BY  
M.M.B.  
3-17-23

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

MAR 11 A.G.O.  
 1926  
 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 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.



# GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

CECCARINI 1685482 ALCIBRIADE.  
(Surname) (Number) (First Name and Initials)

Private Co. C. 326<sup>th</sup> INF.  
(Rank) (Organization)

PLACE OF DEATH: .....

CAUSE OF DEATH: .....

DATE OF BURIAL: Oct. 11, 1918.

PLACE OF BURIAL: .....

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

294.1-282.15 Fort D. Argonne  
Buzancy

GRAVE NUMBER: .....

HOW MARKED: Name Peg? No Cross? Yes

Headboard? No Bottle? No

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:

NEAREST RELATIVE: .....

ADDRESS: .....

RELATIONSHIP: .....

REPORTED BY:  
DUNCAN. H. BROWNE. CHAPLAIN. 305<sup>th</sup> INF.

(Signature and Rank of Reporting Officer).

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

CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	<i>Ceccarini</i>		
	<i>Cec</i>	3	353
<i>Alcibiade</i> BURIED	CEMETERY	<i>1232</i>	1
	GRAVE	<i>35</i>	2
	ROW	<i>26</i>	2
	BLOCK	<i>13</i>	1
STATE	<i>Rhode Island</i>	2	45
RANK	<i>Pvt</i>	1	2
DIVISION	<i>82</i>	2	82
ORGANIZATION	<i>326</i>	3	326
AFM	<i>Inf.</i>	1	1
MARITAL	<i>Remarried</i>	1	3-
NAME	<i>Ceccarini</i>		
	<i>Cek</i>	3	353
<i>Mrs Cecilia Bernardini</i> RESIDENCE <i>Vedona</i>	STATE	2	
	COUNTY	2	
	CITY	3	
RELATION	<i>Mother</i>	1	1
OTHER		1	
ELIGIBILITY	<i>Foreign</i>	1	4
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE	<i>Italy</i>	1	
29/514		2	01

AUDITED  
FEB 17 1933  
RAM

MA

Ceccarini Alcibiade

Pvt

Co C 326th Inf

xc 111900

M-comp

Cecilia

Bunardini

rdova

Ceccarini

Italy

Wifow sem 9-29-28

no record of any loss 2-1-33

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

1119000

IN REPLY REFER TO QM 293 A-C (21)

June 27, 1929.

Ceccarini, Alcibiade *Mrs. Carola Baudieri Vedova Ceccarini,*

Mrs. Carola Ceccarini,  
121 Water St.,  
Pawtucket, R. I.

*Convallè di Pescaglia,  
Provincia di Lucca,  
Italy.*

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 widow of the late Pvt. Alcibiade Ceccarini, Co. C, 326th Inf., whose remains are 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 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.

Your attention is particularly invited to Section 4 of the enclosed Act, which defines the terms "mother" and "widow". If the relationship is that of a stepmother, mother through adoption or a woman who stood in loco parentis to the decedent, a statement as to her relationship is requested. In case you have remarried it is also requested that a statement to that effect be made.

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

For The Quartermaster General,

Very truly yours,

*John T. Harris*  
JOHN T. HARRIS,  
Major, Q. M. Corps,  
Assistant.

2 incls.  
Act of Congress.  
Envelope.

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C  
Ceccarini, Alcibiade

June 27, 1929.

Mrs. Carola Ceccarini,  
121 Water St.,  
Pawtucket, R. I.

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

For The Quartermaster General,

Very truly yours,

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

2 incls.  
Act of Congress.  
Envelope.

WAR DEPARTMENT

BPV-GMM 1-217

THE ADJUTANT GENERAL'S OFFICE

IN REPLY REFER TO

AG 201 Ceccarini, Alcibiade (WV) WASHINGTON

April 18, 1923.

SUBJECT: Report of Death.

40379

To: Quartermaster General of the Army,  
Washington, D.C.

O.D.M.C.

1. An investigation recently completed by this Department in the case of Alcibiade Ceccarini, #1,685,482, private, Co C, 326th Infantry, who had been previously reported as killed in action between October 10 and 11, 1918, now shows that he was killed in action October 10, 1918 and that the former report is erroneous.

By order of the Secretary of War:

*W. H. Woodruff*  
Adjutant General.

AG Ceccarini, Alcibiade



FILE

AG 201 Ceccarini, Alcibiade (WW)

April 18, 1923.

Report of Death.

Quartermaster General of the Army,  
Washington, D.C.

O.Q.M.G.

1. The investigation recently completed by this Department in the case of Alcibiade Ceccarini, #1,685,482, private, Co C, 326th Infantry, who had been previously reported as killed in action between October 10 and 11, 1918, now shows that he was killed in action October 10, 1918 and that the former report is erroneous.

By order of the Secretary of War:

WM A WOODLEIF

Adjutant General.



293  
Ceccarini, Alcibiade

40379

In reply refer to:  
293 C-R

*Ceccarini Alcibiade*

June 13, 1923.

Mrs. Carola Ceccarini,  
121 Water St.,  
Pawtucket, R.I.

Dear Madam:

The Quartermaster General desires that you be informed that the permanent grave of Pvt. Alcibiade Ceccarini, Co. C, 326th Inf., is No. 35 Row 26, Block B, Meuse-Argonne American cemetery, Romagnous-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. 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.

MM  
23/236/ARK

Place Romagne 1232.

# REPORT OF DISINTERMENT AND REBURIAL

Date Feb 18, 1922.

1. REMAINS OF CECCARINI, Alcibiade. SERIAL NUMBER 1685482  
RANK Pvt. ORGANIZATION Co. C. 326th Inf.

2. Disinterred (date): Feb 10, 1922 From (give complete location): gr 77, sec 14, plot 2. Cty. 1232.

By: Group \_\_\_\_\_ Haky. Unit sec 1

3. Reburied (date): Feb. 10th 1922 In (give complete location): Meuse Argonne Cemetery # 1232 Gr. 35 block B row 26

By: Group re-burial S Unit \_\_\_\_\_ Nature of reburial unlined casket.

4. Report as to nature of original burial and condition of body upon disinterment: wooden box and burlap and U.S. uniform. body decomposed, unrecognizable.

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

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

G.R.S. plaque on body reads-----Carini

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

(a) Height (actual measurement) impossible to determine.

(b) Weight (estimated) do

(c) Hair—Color do

Quantity do

Characteristics do

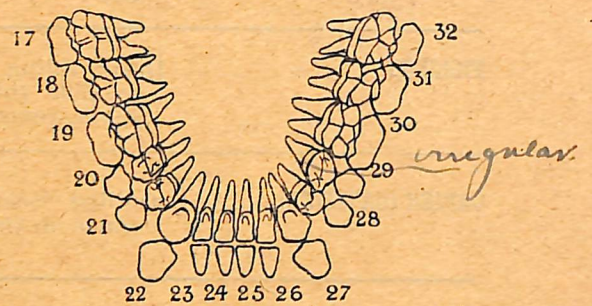
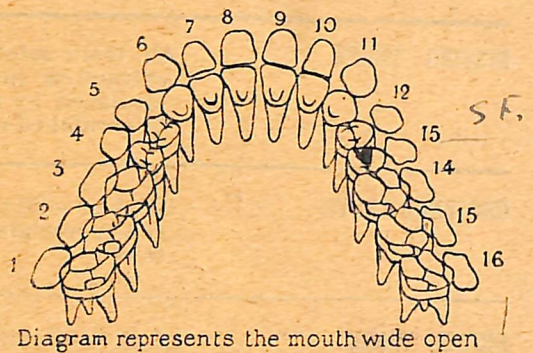
(d) Hair on face—Color do

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 visible.



7. Disinterment supervised by J. L. Haky  
J. L. Haky.

Approved: Geo. C. Bland  
Geo. C. Bland 1st Lt. Q.M.  
(Title)

8. Reburial supervised by W. B. Shields  
W. B. Shields

Approved: A. E. Dewey, 1st Lt. QMC.  
(Title) 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), 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.

AUG 16 1922



RECEIVED

To be prepared in triplicate.

DATE Feb 10 1922

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 CECCARINI, Alcibiade

10. Name

2. No. 1685482

11. No.

3. Rank Pvt.

12. Rank

4. Org. Co. C. 326th Inf.

13. Org.

5. D.D. 10-11-18

14. (a) D.D.

6. C.D. KIA

(b) D.B. None

Discrepancy found upon disinterment

7. Grave No. 77 Sec. 14

15. Grave No. Sec.

8. Plot 2 Row

16. Plot Row

9.

17. None

18. Cemetery Meuse-Argonne Amer.

19. Commune or town Romagne-sous-Montfaucon

20. Dept. or County Meuse.

21. Country France

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

1232 - 14

23. Disinterred (Date) Feb 10 1922

By J L Haky

24. Inscription on grave marker:

Name Alcibiade Ceccarini

Serial No. 1685482

Rank Pvt

Organization Co C 326 Inf

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

C. Brown  
Signature Junior Technical Assistant

C. Brown

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).

GRS plaque on body reads: ---- carini

27. Condition of body Badly decomposed, features unrecognizable

28. Nature of burial Pine box burlap and US Uniform

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

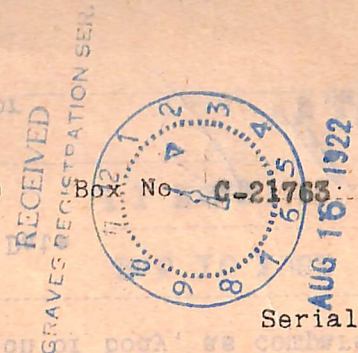
30. Body prepared and placed in casket: Date Feb 10 1922 By J L Haky

31. Casket sealed by J L Haky

Signature of Embalmer, (Supervisor J. L. Haky)

AUDITED BY

SHIPMENT. (Show actual marking of box.)



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

Name Alcibiade CECCARINI. Serial No. 1685482

Rank Pvt. Organization Co. C. 326th Inf.

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

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

34. Casket boxed and marked (Date) Feb 19 1922 By J. L. Baky

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

Geo C Bland 1st Lt OMC

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

37. Shipped from point of Operation: (Date) Feb 10 1922 cc

To point of Concentration \_\_\_\_\_ (Name) Morgue Romagne

Convoyer W. J. Royed Signature Shipping Officer Geo C Bland

38. Received at Railhead or Point of Concentration: Date \_\_\_\_\_

By G.R.S. Representative \_\_\_\_\_

39. Shipped from Railhead or Point of Concentration: Date \_\_\_\_\_

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

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

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

G.R.S. Representative \_\_\_\_\_

41. Reinterred, Meuse-Argonne Cemetery # 1232 Feb. 10th 1922. (Date)

42. Grave No. 35 Section \_\_\_\_\_

43. Block B Plot B Row \_\_\_\_\_

G.R.S. Representative A. E. Dewey, 1st. Lt. OMC.

jt.

# COMPILATION OF DISPOSITION OF REMAINS DATA

**I. LOCATION INDEX CARD:**

File #40379 ✓

(a) Name CECCARINI, Alcibiade Ser. No. 1685482

(b) Rank Pvt. Organization Co. C, 326th Infantry

(c) Date of death 10/10-11/18 (d) Cause of death K/A

TYP. DMA

CKR. 30

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

(a) Grave No. 77 Row - Plot 2 Sec. 14 TYP. DMA

(b) Emerg. Address Mrs. Carola Ceccarini (Wife) 121 Water St., Pawtucket,

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

OK 3/28/21 - C

CKR. R.I.

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

Date of receipt \_\_\_\_\_

(a) Name Carola Ceccarini

(b) Relationship Wife

(c) Address omitted

(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 3-25

, 1920

**V. A. G. O. CORRESPONDENCE shows communication from** \_\_\_\_\_

\_\_\_\_\_, dated \_\_\_\_\_

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

No correspondence

Examiner's Initials AM

Date 3-25

, 1920

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

No request for disposition

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

yes AM

Examiner's Initials AM

Date 3-25

, 1920

COUNTRY FRANCE

FRANCE

CEMETERY No. 12-32-sec. 14

SHEET No. 29

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

3-723

Make Form No. 114

**FORM 115 - A COMPLETED**

**CARDED**

#-5-4-8-21



Name .....

Rank .....

Serial No. ....

Org. ....

Remarks

.....  
A.G.O. Card & Corr. ....

..... Discrepancies .....

Name .....

Rank .....

Serial No. ....

Org. ....

Remarks

.....  
G. R. S. Corr. ....

..... Discrepancies .....

Name .....

Rank .....

Serial No. ....

Org. ....

Remarks

*ok no s n sent 3/28/21*

Checkers .....

..... Discrepancies .....

Name .....

Rank .....

Serial No. ....

Org. ....

Remarks

*W. R. BA for spelling of EA.*

*checked for 10-3-26-21*

# COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

File #40379

(a) Name CECCARINI, Aloibiade Ser. No. 1685482  
 (b) Rank Pvt. Organization Co.C, 326th Infantry  
 (c) Date of death 10/10-11/18 (d) Cause of death K/A

DMA  
TYP. 30

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

(a) Grave No. 77 Row - Plot 2 Sec. 14 TYP. DMA

(b) Emerg. Address Mrs. Carola Ceccarini (wife) 121 water St., Pawtucket, R.I.

III. Files of soldiers dying from contagious diseases sh 3/28/21 - C CKR 30

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

*A.G.O. Card Carola Ceccarini (wife) address omitted, requests body not returned to U.S. ins 4-7-21*

V. Following advice forwarded to Europe by { cable on \_\_\_\_\_, 192  
*Section 14* letter of transmittal on 4/5/, 192  
*Par-2 - Not to be returned (JEN)*

VI. Form 115 forwarded to G. R. S., Hoboken, N. J., APR 13 1921, 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. APR 20 1921 APR 20 1921, 192

COUNTRY \_\_\_\_\_ CEMETERY No. \_\_\_\_\_ SHEET No. \_\_\_\_\_

*H.S. 4-8-21*

Ceccarini,

(Surname.)

Pvt.

Alcibiade,

(Christian name in full.)

Co. C, 326th. Infantry.

(Rank and organization.)

Duplicate.  
1,685,482

State your relationship to the deceased.

*Wife*

Do you desire the remains brought to the United States?

(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)

*Carlo A. Ceccarini*

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

Mrs. Carola Ceccarini,  
121 Water St.  
Pawtucket, R. I.

3-25-21

drawn HW - 1232 - Sec 14 - 29

REPORT OF DISINTERMENT AND REBURIAL.

40379

Remains of:

Name ALCIBAIDE, Ceccarini  
(Alcibriade,)

Number: 1685482

Rank: Unkn

Organization: Unkn

C, 324 Inf.

Disinterment and Reburial made by Group

Unit

Disinterred (Date)

From: (Give complete location)

10th, April, 1919

Grave # 7 ISOLATED MARCQ, ARDENNES

Map 35 N.W. E 294.1 N 282.2

Reburied (Date)

in: (Give complete location)

1232

10th, April, 1919

Grave #77 Section #14 Plot #2

Amer. B.A.Cty. #1232 ROMAGNE, MEUSE

Map 35 N.E. E 308.16 N 284.87

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

Buried in uniform. Burial poor. Body badly decomposed.

Was one identification tag found upon the body? Yes

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

CONFIRMED No. 10790

Note:

I  
sent  
aft  
wh

...e found upon bodies, they will be promptly  
...is required by G.O. 170, G.H. 2, 1918.,  
...ues to identity in doubtful cases, notation  
...hief, Graves Registration Service.

R. H. ROSENTHAL

2nd Lieut. O.M.C.U.S.A.

C.O. Group            Unit           

S

Date 30th April, 1919

REPORT OF DISINTERMENT AND REBURIAL

Remains of:

Name: ALIBRIDE, Geocorini (Alibride)

Rank: Unknown

Number: 1888483

Organization: Unknown

Unit: Unknown

Disinterment and Reburial made by Group: Unknown

Disinterred (Date): 10th April, 1919

From: (Give complete location): Grave # 7 ISOLATED MARCO, ARDENNES

10th April, 1919

Grave # 7 ISOLATED MARCO, ARDENNES

Map 55 N.W. E 294.1 N 282.2

Reburied (Date): 10th April, 1919

To: (Give complete location): Grave # 77 Section # 14 Plot # 2

10th April, 1919

Grave # 77 Section # 14 Plot # 2

Amer. B.A. Coy. # 1325 BOMBER, MEUSE

Map 55 N.E. E 308.18 N 284.87

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

Buried in uniform. Burial poor. Body badly decomposed.

Was one identification tag found upon the body? Yes

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

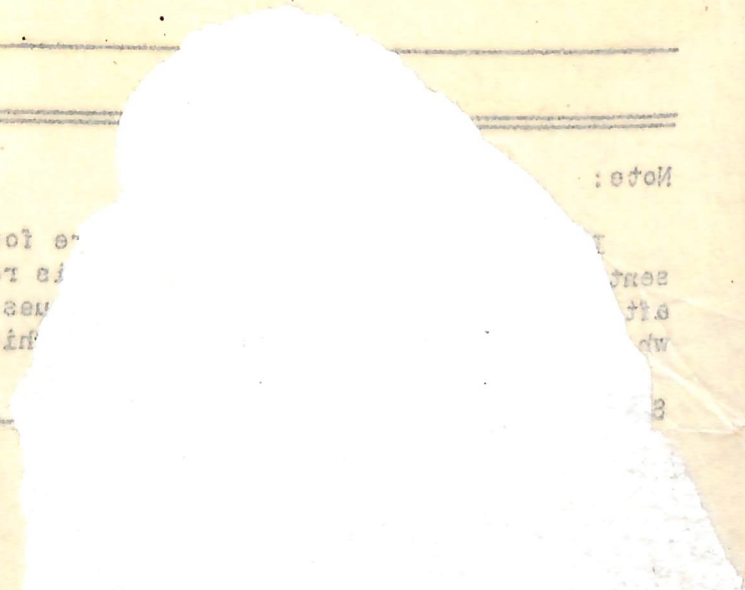
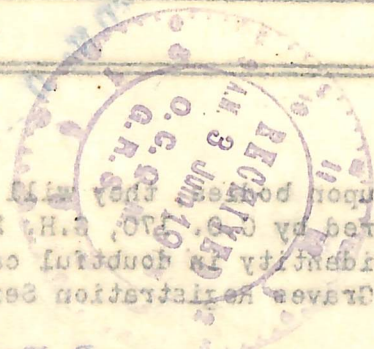
Note:

is found upon bodies they will be promptly reported by G.R.S. 2, 1918. use to identify in doubtful cases, notation chief, Graves Registration Service.

R. H. ROSENTHAL

2nd Lieut. G.M.G.S.A.

C.O. Group Unit



40379

# GRAVE LOCATION BOOK

LOCATION OF THE GRAVE OF

CECCARINI 1685482 ALCIBRIADE  
(Surname). (Number). (First Name and Initials).

Private C. C. 326<sup>th</sup> INF.  
(Rank). (Organization).

PLACE OF DEATH: .....

CAUSE OF DEATH: .....

DATE OF BURIAL: Oct. 11, 1918

PLACE OF BURIAL: .....

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

294.1 - 282.15 Fort D. Argonne.

Buzancy

GRAVE NUMBER: .....

HOW MARKED: Name Peg? No Cross? Yes  
Headboard? No Bottle? No

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. Muncy (Ardennes)  
(C 234) SHT. 25 MW. E 294.1  
W 282.15

NEAREST RELATIVE: .....

ADDRESS: .....

RELATIONSHIP: .....

REPORTED BY: DUNCAN H. BROWNE. CHAPLAIN. 305<sup>th</sup> INF.

(Signature and Rank of Reporting Officer).

RECEIVED

20 OCT 1918

621

Communal List No. 256621  
Daily Report No. \_\_\_\_\_

40329

1. G. R. S. Form No. 1. G. R. S. File

2. Soldier's No. 1685482

3. CECCARINI ALCIBRIADE  
Surname (in block letters) First Name and Initials

4. Pvt. X 326 Inf.  
Rank Company Regt. or Corps

5. X X  
Date of Death Cause, if known

6. Oct. 11/18 Isolated Battle area  
Date of Burial Cemetery

7. Near CHEVIERES ARDENNES  
Town or Commune (in block letters) Department

8. 7 Sketch No. 16.  
Grave No. Plot No. or Letter

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

10. Buried with Body? NO Attached to Grave Marker? NO  
Identification Tags

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

OMME. MARCO (ARDENNES)  
(O-282) SHT. 33 N. W. COORD } E 294.1  
W 282.2

12. 282.2 N -- 294.1 E Verdun 35 NW  
Map reference, if interment is outside of cemetery

13. X  
Give name of Chaplain or Burial Officer

W. B. Smith  
Signed W. B. Smith

W. B. Smith  
1479

Group Hdqrs. Unit 305 G. R. S.



X0379



OSPSS CTY. NO. 1232

Sec 14 case no 29