

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY 31-29
GRAVES REGISTRATION SERVICE
WASHINGTON

JUN 7 1920

FROM: Chief, Graves Registration Service, Q.M.C.
TO: Mr. Michael Chippie, #115^{1/2} West 1st St., Corning, N.Y.
SUBJECT: Remains of Pvt. Albert M. Chippie.

377 W. E. ave
Rush Answer
Ms Chippie

The records of this office show that you have ~~requested that~~
~~xxxxxx~~ not expressed your wishes as to the return of the body.

I wish to have the body of Pvt. Albert Chippie remain in France.

If these are not the correct instructions, please change them. Make changes on reverse side of this sheet.

The nearest living relative may choose between, (1) return of the body to any address in the United States; (2) interment in Arlington, Va., National Cemetery; or (3) remain in France.

Noted on Form No. 118
Date 6-14-20

By authority of the Quartermaster General:

CHARLES C. PIERCE,
Colonel, U.S. Army.

NAME OF	NO. & STREET	TOWN	STATE
Soldier's Widow	<i>hasnt any.</i>		
Soldier's Children	1. <i>hasnt any</i>		
(Name oldest first)	2.		
	3.		
Father	<i>Michael Chippie</i>		
Mother	<i>Florence Chippie</i>		
Brothers	1.		
(Name oldest first)	2. <i>Anthony</i>		
Sisters	<i>Mrs. Carrie Meloy</i>		
	<i>Sarah & Helen Chippie</i>		
Date	<i>June 8th</i>		
	Signature <i>Michael Chippie</i>		
Address	<i>377 W. E. ave.</i>		
	Relationship <i>Father</i>		

Note:- Instructions on the reverse side of this sheet should be carefully read before filling out this paper.

The transfer of bodies will be made entirely at government expense.

7. Use the enclosed envelope - pay no postage.

the case of this body.

6. You are requested to return this paper AT ONCE in order to avoid delay in

5. IF YOU are not the nearest living relative and do not know who or where the nearest relatives are, please fill out this paper AT ONCE and mail to this office.

4. IF YOU are not the nearest relative, please ask the nearest relative, if living near you, to fill out this paper.

3. 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.

2. This paper must be returned showing the name and address of each of the nearest living relatives in the spaces provided therefor on the other side of this sheet.

1. This paper MUST be signed by the person who is the NEXT of kin in the order shown in the square on other side of this sheet.

INSTRUCTIONS FOR FILLING OUT



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
GRAVES REGISTRATION SERVICE
WASHINGTON

MAY 21 1920

31-29

Push Answer

FROM: Chief, Graves Registration Service, Q.M.C.
TO: Mrs. Florence Chippie. 115 1/2 W. 1st St. Corning, New York.
SUBJECT: Remains of Pvt. Albert M. Chippie.

JUN 7 1920

The records of this office show that you have requested that his
body be Not returned to U.S.

If these are not the correct instructions, please change them. Make changes on reverse side of this sheet.

The nearest living relative may choose between, (1) return of the body to any address in the United States; (2) interment in Arlington, Va., National Cemetery; or (3) remain in France.

By authority of the Quartermaster General:

CHARLES C. PIERCE,
Colonel, U.S. Army.

NAME OF	NO. & STREET	TOWN	STATE
---------	--------------	------	-------

→ Soldier's Widow *un marry*

→ Soldier's Children 1.
(Name oldest first) 2.
3.

→ Father

Mother *Michel Chippie. Corning city.*

Brothers (Name oldest first) 1. *Mrs Florence Chippie 212 Choctaw Corning city.*
2. *Amathery 115 1/2 W 1st St Corning city.*
3. *Chippie*

Sisters *carry Mabel 844 W. 1st St Corning city.*
only Sarah. in history hall east south city
Michigan Chippie 212 Choctaw Rockton city.

Date _____ Signature *Mrs Florence Chippie*
Address _____ Relationship _____

Note:- Instructions on the reverse side of this sheet should be carefully read before filling out this paper.

(OVER) JEK

The transfer of bodies will be made entirely at government expense.

I do not want my son sent to
W.S. You may leave him there
for he is at rest and he is just
as well off as though we brought
him here.

Respectfully yours
Mrs Florence Chippis
912 Cohasset St
Carmine, Caly

INSTRUCTIONS FOR FILLING OUT

1. This paper MUST be signed by the person who is the NEXT of kin in the order shown in the square on other side of this sheet.
2. This paper must be returned showing the name and address of each of the nearest living relatives in the spaces provided therefor on the other side of this sheet.
3. 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.
4. If YOU are not the nearest relative, please ask the nearest relative, if living near you, to fill out this paper.
5. If YOU are not the nearest living relative and do not know who or where the nearest relatives are, please fill out this paper AT ONCE and mail to this office.
6. You are requested to return this paper AT ONCE in order to avoid delay in the case of this body.
7. Use the enclosed envelope - pay no postage.

JUN 7 1920

You have failed to furnish this office the names and addresses of those persons indicated by the blue arrow on the enclosed form.

You are requested to furnish this office at the earliest practicable moment the name and address of each of those persons indicated by the blue arrow. If these persons are not living you should so state on the attached form and return the same at once to this office, otherwise there will be an endless and unnecessary delay in the handling of this case. Prompt action is necessary.

NS-8794/L

REPORT OF DISINTERMENT AND REBURIAL

Date **November 18 1921.**

1. REMAINS OF **Chippie Albert M** SERIAL NUMBER **2416533**
 RANK **Pvt** ORGANIZATION **Co M 54th Engrs**

2. Disinterred (date): **November 18, 1921.** From (give complete location): **Gr. 94 Cemetery 31**

By : Group **3** Unit **Sec 5**

3. Reburied (date): **June 13 1922** In (give complete location): **Gr. 31 Blk. A Row 27**

By : Group **Reburial** Unit _____ Nature of reburial **Casket & shipping case**

4. Report as to nature of original burial and condition of body upon disinterment :
unrecognizable, badly decomposed, in pine box

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

(b) Other means of identification found upon disinterment, and general remarks :
none

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

(a) Height (actual measurement) **unable to report.**

(b) Weight (estimated) **-do**

(c) Hair—Color **none**

Quantity **none**

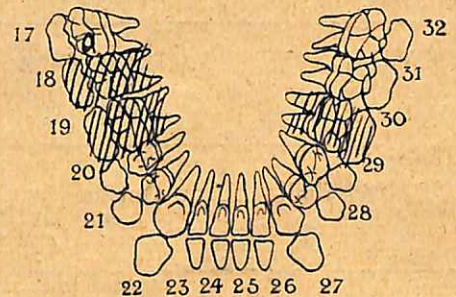
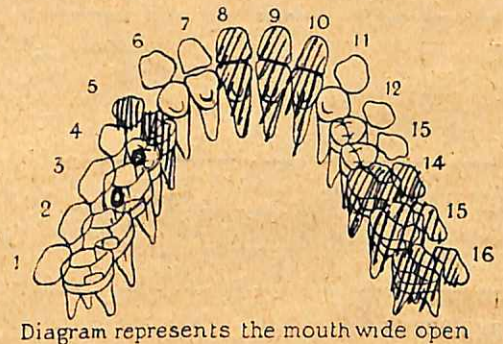
Characteristics **none**

(d) Hair on face—Color **none**

Location **none**

Quantity **none**

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



(f) Wounds or missing parts (received at time of casualty) **MBD 5 10 14 15 18 19 30**
post mortem on skull **cavity 3 4 17 MAD 8 9 16**

Checker **J A Dougherty**

7. Disinterment supervised by **E T Anderson, Superv. Emb** Approved: **S H Hunsicker**
 (Title) **1st Lieut QMC**

8. Reburial Supervised by **H L Kramer** Approved: **A E Dewey**
 (Title) **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), 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.

To be prepared in triplicate.

DATE November 18, 1921.

REPORT OF DISINTERMENT, PREPARATION, SHIPMENT AND REBURIAL OF BODY

DISINTERMENT rms. COMPARATIVE REPORT

Records of G.R.S. Headquarters.

Discrepancy found upon exhumation of body

1. Name CHIPPIE, Albert M.
 2. No. 2416553
 3. Rank Pvt.
 4. Org. Co. A. 54th Engrs.
 5. D.D. Oct. 22nd. 1918
 6. C.D. Acute Peritonitis

10. Name _____
 11. No. _____
 12. Rank _____
 13. Org. _____
 14. (a) D.D. _____
 (b) D.B. none

Discrepancy found upon disinterment

7. Grave No. 94 Sec. _____
 8. Plot _____ Row _____
 9. _____

15. Grave No. _____ Sec. _____
 16. Plot _____ Row _____
 17. none

18. Cemetery American Cty.

19. Commune or town Chateauroux.

20. Dept. or County Indre.

21. Country France.

22. G.R.S. Hdqrs. Code No. 31

23. Disinterred (Date) November 18, 1921 By E T Anderson

24. Inscription on grave marker:

Name Alb rt M. Chippie

Serial No. --

Rank Pvt.

Organization Co A 54th Engrs

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

J. A. Dougherty
 Signature Junior Technical Assistant

J A Dougherty

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).

bottle record giving name, rank and organization

27. Condition of body badly decomposed

28. Nature of burial in pine 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 November 18, 1921 By E T Anderson

31. Casket sealed by E T Anderson

Signature of Embalmer, (Supervisor)

E. T. Anderson
E T Anderson

DATE BY
2021-10-23

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

32. Designation of body:

Name _____ C-16662.
Serial No. _____

Rank _____ Organization _____
Albert M. CHIPPIE 2416583.

33. Consigned to:

Pvt. Co.A. 54th Engrs.
Name of Permanent Cemetery _____

34. Casket boxed and marked (Date) _____ 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.
St. Mihiel Amer. Cty. #1233, Thiaucourt, M-et-M.

Signature of G.R.S. Inspector *S. H. Hunsicker*
S. H. Hunsicker
1st Lieut OMC

36. Remarks _____

None

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

To point of Concentration _____
Convoyer _____ (Name)
Signature Shipping Officer _____

38. Received at Railhead or Point of Concentration: Date _____

By G.R.S. Representative _____

39. Shipped from Railhead or Point of Concentration: Date ³⁰ November 18, 1921.

To Permanent Cemetery *St. Mihiel Amer. Cty 1233 Thiaucourt M-et-M*
Convoyer *R. E. Williams* ^{6 - DEC 1921} Signature Shipping Officer *A. M. Jackson*
(Name) A. M. Jackson, Capt. CAC.

40. Received: Date ^{6 - DEC 1921} _____

G.R.S. Representative *F B Daniel, Capt, 2MC*

41. Reinterred ^{June 13 1922} _____

(Date) _____

42. Grave No. ³¹ _____ Section _____

43. Plot ^{Blk. A} _____ Row ²⁷ _____

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

COMPILATION OF DISPOSITION OF REMAINS DATA

File #44063

1. LOCATION INDEX CARD:

OK. (3-3-21) (6R)

(a) Name CHIPPIE, Albert M. Ser. No. 2416533)
 (b) Rank Private Organization Co. A, 54th Engineers) TYP. HDP
 (c) Date of death 10-22-18 (d) Cause of death Acute Peritonitis) CKR. SL

11. Registration Card:- (Check Reg. Card Inf. against Loc. Ind. Inf.)

(a) Grave No. 94 Row - - Plot Amer. Sect. - -) TYP. HDP
 (b) Emerg. Address Mrs. Florence Chippie (Mother) West Water St., Corning, N. Y.
 No Card

111. Files of soldiers dying from contagious diseases;) CKR. SL

IV. A.G.O. DISPOSITION CARD:

Date of receipt None

(a) Name Florence Chippie (b) Relationship Mother
 (c) Address 115 1/2 W. 1st St. Corning, N. Y.
 (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.

SEE SUSPENSION REMARKS

(g) Disposition instructions if not brought to U.S., _____

Examiner's Initials F.L. Date 5-17-1920

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

dated _____, confirmed request in Par. IV. item _____, above, or requesting that

No Correspondence

Examiner's Initials MM Date 5-17-1920

VI. G.R.S. Files - Correspondence - shows as follows:

No request for disposition

(a) Cancellation memos referred to? yes - MHS

Examiner's Initials MHS Date 5-18-1920

3/13/22 Examined
for Concentration
St. Michel 1233
att 3/29/22

OK. also
3-3-21
6R

see file #10-3-7-21

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

Typed by _____ Checked by _____ 1920

VIII. FINAL ACTION:

Following advice forwarded to Europe by-

{ cable on _____ 1920
{ letter on May 25 1920

Not to be returned

IX. CORRECTIONS

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

X. SUSPENSION REMARKS:

*Form 120 6-10-20 - from Michael Chippie,
father & nearest of kin, 377 W. E. Ave.,
Corning, N. Y., requests that body
remain in Europe - 6-14-20 J*

QM 293 A-C

April 17, 1924

CHIPPIE, Albert M., Pvt.

Mr. Michael Chippie,
377 West E Ave.,
Corning, N. Y.

Dear Sir:

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 military cemetery is one of those to be maintained by the United States for all time in Europe. Each grave will be marked by a headstone of white marble, of dignified design, with the 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.

Please be assured that in effecting removal of the dead, the utmost reverential care was exercised and more than willingly accorded 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,

R. P. HAROLD
Assistant.

1-Incl.
Record card.



MHX
702

Chippie

Albert ~~Michael~~

2,416,533

(Surname.)

(Christian name in full.)

(Army serial number.)

Pvt

Co A 54 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.)

yes

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.)

see above

(State.)

(Sign here)

Flourence + Chippie

*Witness
Florence MacQueen*

(Number and street or rural route.)

115 1/2

(City, town, or post office.)

W 1st St

(State.)

Conning ny

Read carefully the letter accompanying this card.

Drawn by JH
31-29
2-18-21

REVIEWED
OSP SS.
710-2-19-21

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Chippie, Albert H.

May 31, 1929.

Mrs. Florence Chippie,
377 W. E. Ave.,
Corning, N. Y.

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
Private Albert H. Chippie, Co. A, 54th Engineers, whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, 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,

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

August 29, 1929.

Chippie, Albert M.
1233

Mrs. Florence Chippie,
377 W. E. Ave.,
Corning, N.Y.

Dear Madam:

The records of this office do not indicate that a reply has been received to our communication dated May 31, 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?

For The Quartermaster General,

Very truly yours,

2 Incls.
Act of Congress
Envelope

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Chippie, Albert M. 1233

February 15, 1930

Mrs. Florence Chippie,
377 W. E. Ave.,
Corning, New York.

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 Albert M. Chippie, Co. A, 54th Engrs., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, France.

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

Write answers in space below:

1. Is the deceased survived by a widow who has not since remarried?
2. If so, give her complete address.
3. If he is survived by a mother, stepmother, mother thru adoption, or any other woman who stood in loco parentis to him, according to the terms of Section 4 of the enclosed Act, give her name, address, and relationship in the space opposite.

For The Quartermaster General,

Very truly yours,

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

2 Incls.
Act of Congress
Envelope

Q.M.G.M. DIV.
AM 9 27
1930 FEB 17
DISPATCH

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Chippie, Albert M.

May 31, 1929.

Mrs. Florence Chippie,
377 W. E. Ave.,
Corning, N. Y.

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 *mother*
Private Albert M. Chippie, Co. A, 54th Engineers, whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, 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,

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

2 incls.
Act of Congress.
Envelope.

B

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON, D. C.

OFFICIAL BUSINESS



PENALTY FOR PRIVATE USE 10c

PAYMENT OF POSTAGE



SAVES TIME

*Mrs. Schiffe
is now deceased.
This was signed by
the Husband*



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Chippie, Albert M. 1233

February 15, 1930

~~Mrs. Florence Chippie,~~
~~377 W. E. Ave.,~~
~~Corning, New York.~~

XC 110724
in dict 4-28-24 - single
adm. Sarah P. Whittenhaer
4 Agnew Court
Rocky Hill Conn.

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 ^{deceased} of the late Private Albert M. Chippie, Co. A, 54th Engrs., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, France.

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

Write answers in space below:

1. Is the deceased survived by a widow who has not since remarried?
2. If so, give her complete address.
3. If he is survived by a mother, stepmother, mother thru adoption, or any other woman who stood in loco parentis to him, according to the terms of Section 4 of the enclosed Act, give her name, address, and relationship in the space opposite.

For The Quartermaster General,

Very truly yours,

2 Incls.
Act of Congress
Envelope

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

CHIPPIE, Alton M
Pvt. Co A 54 Eng.

C- 110-724

Mother died 4-28-24
Veteran single.

332-437

~~Edwards~~
EX. 255/22

Auth 5/22
RECEIVED

MAY 15 1930

Examining Section No. 4
AWARDS DIVISION

Whipple 110724

m died 4/28/24 - single

adm. Sarah J. Whittenhall
& Agnew Court

1233

Rochester N.Y.

CODE SLIP



HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	CHI	3	389
	albert m		
	CEMETERY 1233	1	3
BURIED	GRAVE 31	2	31
	ROW 27	2	27
	BLOCK a	1	1
STATE	New York	2	37
RANK	Prvt	1	2
DIVISION	Engns	2	49
ORGANIZATION	54	3	054
ARM	Engns	1	1
MARITAL	No	1	2
adm NAME	Whittenhall	3	389
	Sarah T.		
RESIDENCE	STATE New York	2	37
	COUNTY Steuben	2	51
+ Agnew Court	CITY Corning	3	223
ROCHESTER	RELATION Mother	1	1
N.Y.		1	
OTHER		1	
ELIGIBILITY	plead	1	6
NATIVITY	plead 4-28-24	1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
. TRIP	YR.	1	
ACCEPTANCE		1	
29/514/			

AUDITED
APR 5 '24

cm
7

R

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Chippie 2416533 Allen M.
(Surname.) (Number.) (First Name and Initials.)

Private Co. A. 54 Eng.
(Rank.) (Organization.)

DATE OF BURIAL October 24, 1918

PLACE OF BURIAL Chateaugay

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

R. F. F. Cemetery rd 3/

Chateaugay Indis

Official Map

GRAVE NUMBER 94

HOW MARKED: Name Peg? Cross?

Headboard? Bottle?

IDENTIFICATION TAGS:

Was one buried with body?

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

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

.....
.....
.....

REPORTED BY:

R. S. Brown, Chaplain
(Signature and Rank of Reporting Officer.)

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

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1. NAME CHIPPIE, Albert M. ✓ DATE _____
 RANK Pvt. ORGANIZATION Co. A. 54th Engrs. ✓
& DIVISION none. ✓ SERIAL No. 2416533 ✓
 GRAVE LOCATION American Cty., Chateauroux, Indre. 31
 CTY. NAME NUMBER

94
 GRAVE ROW PLOT
 2. ORIGINAL ~~BATTLE AREA~~ GRAVE LOCATION 94 Chateauroux Indre
As shown on AGRS Form 1-A dated 11/12/20 GRAVE COMMUNE DEPT.
 COORDINATES None given
 CONCENTRATED TO None of record
 DATE GRAVE ROW PLOT
 CEMETERY CTY. NUMBER

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

Nothing of record
 DATE OF DEATH Oct 22, 1918 ✓
 STATE FROM WHICH HE CAME New York ✓
 MEDALS OR DECORATIONS AWARDED none ✓
 SUBSEQUENT REBURIALS None of record
 DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR Stanley J. Grogan
STANLEY J. GROGAN, Captain, Infantry.

3. FINAL GRAVE LOCATION June 13, 1922 31 27 Block A
 DATE GRAVE ROW PLOT

St. Mihiel American No. 1233, Thisucourt

CEMETERY

EDITED BY

rme.



Major General,
 The Adjutant General,
 By CLL

MAY 18 1925

RECEIVED A. G. O. MAY 14 1925
 MAY 14 1925

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.

44063

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Chippie 2416533 Allen M.
(Surname.) (Number.) (First Name and Initials.)

Private Co. A. 54 Eng.
(Rank.) (Organization.)

DATE OF BURIAL October 24, 1918

PLACE OF BURIAL Chateaux

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

A. E. F. Cemetery No. 3,
Chateaux, Indre,
Official map.

GRAVE NUMBER 94

HOW MARKED: Name Peg? Yes Cross? Yes

Headboard? Bottle? Yes

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:

REVIEWED
OSP SS.

30 OCT 1918

REPORTED BY:

Raymond S. Brown Chaplain
(Signature and Rank of Reporting Officer.)

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

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

PLEASE
EXPEDITE

WAR DEPARTMENT

Office of the Quartermaster General of the Army
Washington

G.R.S. Form 8-A-0
Information requested for A.G.C.

Date 2/24/21.

File No. Registration.

(SPECIAL)

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

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

Subject: Information required for G.R.S.

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

a. Surname **Chippie** ✓

f. Date of death **10/22/18** ✓

b. Christian name **Albert M.** ✓

g. Cause of death **Acute Peritonitis** ✓

~~(Albert Michael)~~

c. Serial Number **2416533** ✓

h. Authority (C.O.#)

d. Organization **Co. A. 54th Eng.** ✓

i. Emergency address **Florence Chippie**

e. Rank **Private** ✓

West Water St., Corning, N.Y.
j. Relationship **Mother**

BODY DESCRIPTION

(See page #2 of the Service Record)

a. Age of enlistment

b. Color of eyes

c. Color of hair

d. Height

e. Weight

f. Permanent marks and physical defects at enlistment (Old fractures or breaks)

DENTAL CHARTS

(See Physical report of examination prior to enlistment)

a. Strike out teeth missing

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8
upper right upper left

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8
lower right lower left

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

BY:

[Signature]
H. J. CONNER, X
1st. Lieut. Q.M.C.

CEMETERY NO: **31**

SHEET NO: **29**

TYPED BY: **ZS**

S/713/LML

Rec'd World War Div.

Date FEB 26 1921

Donnelly EMR- 2105-2/26/21

Rec'd 8 & 6 Div. A.G.C.

FEB 26 1921 6