

282

8K

fei

G.R.S. Form #114-B

To The A. G. O.

7852

Soldiers Sig

JUN 1 1922

DATE Jan. 7th 1922.

1. NAME CICCHELLI, Vincent <sup>Benjamin</sup> SERIAL No. 1892687

RANK PFC ORGANIZATION Co. F 325th Inf.

GRAVE LOCATION Meuse-Argonne Amer., Romagne/s/Montfaucon, Meuse 1232, Sec. 18

CTY. NAME 206 Sec. 18 NUMBER 4

2. ORIGINAL BATTLE AREA GRAVE LOCATION St Juvin Ardennes

COORDINATES Verdun 35NW 285.8N 298.9E

CONCENTRATED TO 4/14/19 206 18 4

CEMETERY Meuse Argonne 1232 CTY. NUMBER

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

None available data f-1/pfb

DATE OF DEATH Oct 12, 1918

STATE FROM WHICH HE CAME ny

SUBSEQUENT REBURIALS MEDALS OR DECORATIONS AWARDED none

Robert O. Davis,  
Major General,  
The Adjutant General.  
By RIB  
JUN 10 1926

DATE GRAVE ROW PLOT CEMETERY

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

3. FINAL GRAVE LOCATION Jan. 7th 1922. 12 13 E  
DATE GRAVE ROW PLOT Block

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

AUDITED BY  
F. D. L. 3-21-22

MAY 17 1927  
WORLD WAR DIV.

JUN 9 1922

RECEIVED  
REGISTRATION SERVICE  
JUN 11 1922

## 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.

Received  
JUN 11 1922  
M & R BRANCH  
Q. M. C.

RECEIVED  
DIVISION

# GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Cicchelli, 1898687, Vincent  
(Surname). (Number). (First Name and Initials).

Pvt. Co. F, 325 Inf.  
(Rank). (Organization).

PLACE OF DEATH:.....

CAUSE OF DEATH:.....

DATE OF BURIAL:..... 10-21-18

PLACE OF BURIAL:.....

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

Hill beyond stable -  $\frac{1}{2}$  mile off  
San Juvin Road, and 1 mile from  
town. .... Buzancy map. Scale: 1 to  
20,000. 85.2 - 98.85

GRAVE NUMBER: .....

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:

NEAREST RELATIVE: .....

ADDRESS: .....

RELATIONSHIP: .....

REPORTED BY:

B. P. Tyler, Chaplain, 325 Inf.

(Signature and Rank of Reporting Officer).

Co. F, 325th Infantry  
82 nd. Division

CICCHEILLI Vincent - Pvt. 1898687

(Cicchelli)

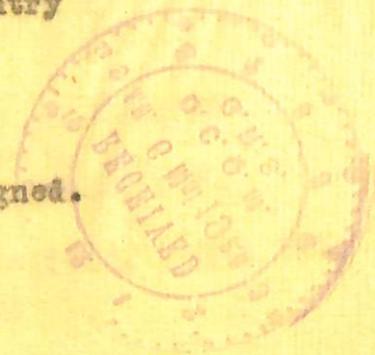
Pvt. CICCHEILLE was killed by fragment of high explosive shell on October 11th 1918. Private CICCHEILLI was killed during the advance of the 325th Infantry near St. Javin. When killed he was in the front line of the attacking battalion on the ridge just east of St. Javin. Private CICCHEILLI was hit in the head by a fragment of shell and unable to speak. Before any aid could be given he was dead. His grave is on what is known as hill 200 southeast of St. Javin.

Informant : FLOURNOY Walker R - Captain,  
Co. F, 325th Infantry

Home : Columbus, Ga.

Not Signed.

J.R.



CODE SLIP



HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	<i>CICCHELLI</i>		
	<i>Vincent</i>		
	<i>bic</i>	3	393
BURIED	CEMETERY <i>1232</i>	1	1
	GRAVE <i>12</i>	2	12
	ROW <i>13</i>	2	13
	BLOCK <i>6</i>	1	5
STATE	<i>NY</i>	2	37
RANK	<i>Private</i>	1	2
DIVISION	<i>82</i>	2	82
ORGANIZATION	<i>325</i>	3	325
ARM	<i>Inf</i>	1	1
MARITAL	<i>no</i>	1	2
NAME	<i>Cicchelli</i>		
	<i>Mari Antonia</i>		
	<i>Arcomano in</i>		
RESIDENCE	<i>Michu Seaf</i>		
	<i>Cic</i>	3	393
STATE		2	
COUNTY		2	
CITY		3	
RELATION	<i>Stepmother</i>	1	3
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		1	
<i>29/514</i>	<i>Italy</i>	2	01

**AUDITED**  
FEB 27 1938  
RTM

*RM - MAB*

WASHINGTON

DA January 16, 1930

NAME RANK SERIAL ORGANIZATION DATE OF DEATH  
 Cicchelli, Vincent PFC 1898687 Co. F 325th Inf. Oct. 12, 1918

STATE New York CTY. NO. 1232 GRAVE 12 ROW 13 BLOCK E

	<u>Check relationship</u>	<u>Living - Deceased</u>	
	MOTHER	: : ✓ :	
	STEPMOTHER (For the year prior to commencement of service)	: ✓ : : :	
NAME	MOTHER THRU ADOPTION (For the year prior to commencement of service)	: : : : :	Boyd
AND	MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	: : : : :	father in U.S. until 19.
ADDRESS	WIDOW (Who has not remarried)	: : : : :	S. m.
		: : : : :	<u>Mariantonio</u>
		: : : : :	<u>Arcomano in</u>
		: : : : :	<u>Cicchelli</u>
		: : : : :	San Martino
		: : : : :	10' Agri, Prov. di Potenza, Italy

*single man*

Veterans Bureau Claim Number Xc-116163  
 9/156/

*1/22 10 2-2-33*

Butle cut, gives father Giuseppe

mother Antonia Zatina

active ad. in 10 years older than nt  
Mary Cinghiano  
6" East 187 St  
N. Y. City

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C  
Cicchelli, Vincent

June 29 1929.

Mr. Joseph Cicchelli,  
611 E. 182nd St.,  
Bronx, New York City, 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 father of the late Pvt. 1/c Vincent Cicchelli, Co. F, 325th 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.

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Cicchelli, Vincent  
1232.

Sept. 5, 1929

Mr. Joseph Cicchelli,  
611 E. 182nd St.,  
Bronx, New York, N. Y.

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?

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  
Cicchelli, Vincent

June 29 1929.

Mr. Joseph Cicchelli,  
611 E. 182nd St.,  
Bronx, New York City, 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 father of the late Pvt. 1/c Vincent Cicchelli, Co. F, 325th 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.

42947

In reply refer to:  
293 C-R

June 11, 1923.

Mr. Joseph Cicchelli,  
611 East 182nd St.,  
Bronx, New York City, N.Y.

Dear Sir:

The Quartermaster General desires that you be informed that the permanent grave of **Private 1/c Vincent Cicchelli, Company F, 325th Infantry, is Grave 12, Row 13, Block E, 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. 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.

U.S.M.G.  
Central Mail & Files Br.

JUN 10 1923

B. O. C.  
Very truly yours,

H. J. Conner,  
Assistant.

HD  
L. D. Z.

42947

REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name: CISCHELLI, Vincent

Number: 1898687

Rank: Unkn

Organization: Unkn

F 325 Inf.

Disinterment and Reburial made by Group

Unit

Disinterred (Date)

From: (Give complete location)

14th. April, 1919

Grave #2 ISOLATED ST. JUVIN, ARDENNES

Map 35 N.W. E 298.9 N 285.8

Reburied (Date)

in: (Give complete location)

1232

14th. April, 1919

Grave #206 Section #18 Plot #4

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:

Burial good. Body buried in uniform. Body slightly decomposed.

Was one identification tag found upon the body? Yes

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

CONFIRMED No. 10267  
10267

Note:

If upon disinterment, effects are found upon bodies, they will be promptly sent to the Effects Depot direct as is required by G.O. 170, G.H. 2, 1918., after being carefully examined for clues to identity in doubtful cases, notation whereof will be made and reported to Chief, Graves Registration Service.

Supervised by: Lt. Kominz

R. H. ROSENTHAL

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

G.O. Group          Unit



WAR DEPARTMENT  
Office of the Quartermaster General of the  
Washington

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

PLEASE  
EXPEDITE

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 **CICCHELLI,**
- b. Christian name **Vincent**
- c. Serial Number **1898687**
- d. Organization **Co. F, 325th Inf.**
- e. Rank **Pvt. 1/c** ~~or (Pvt.)~~
- f. Date of death **10-12-18**
- g. Cause of death **K/A**
- h. Authority (C.O.#)
- i. Emergency address **611 East 181st St. New York City**  
*Mary Singhiano*
- j. Relationship **sister**

NOTED FORM 115  
DATE 4-6-21

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

Adjustment Made

APR 12 1921

42947

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

CW

BY:

CEMETERY NO: 1232-Sec. 18

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

SHEET NO: 21

TYPED BY:

S/713/LLL

VH.

Rec'd World War  
Data... APR 1 - 1921

Rec'd S & S Div. A.G.O.

Connelly  
APR 1 1921  
EPS-4/1/21

2

WAR DEPARTMENT  
Office of the Quartermaster General of the Army  
Washington

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

Date 3-30-21

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 **CICCHELLI** ✓
- b. Christian name **Vincent** ✓
- c. Serial Number **1898687** ✓
- d. Organization **Co.F, 325th Inf.** ✓
- e. Rank **Pvt. 1/c** or (Pvt.) ✓
- f. Date of death **10-12-18** ✓
- g. Cause of death **K/A** ✓
- h. Authority (C.O.#)
- i. Emergency address **Mary Singhiana 611 East 181st St. New York City N.Y.**
- j. Relationship **sister**

NOTED FORM 115  
DATE 4-6-21

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							

Adjustment Made

APR 12 1921

42947

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

CW

BY:

CEMETERY NO: 1232-Sec. 18

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

SHEET NO: 21

TYPED BY: none

VH.

Rec'd from W...  
Date... APR 1 - 1921

Rec'd S & S Div., A.G.O.

S/713/LLL

Connelly Eps-4/1/21 1921 R

2

WAR DEPARTMENT  
Office of the Quartermaster General of the Army  
Washington

Date 3-30-21

Form 9-2-1918  
Information requested of A.G.O.

Requester

(SPECIAL)

The Quartermaster General, U.S. Army, (Central Division)

The Adjutant General of the Army, 5th & Pennsylvania, Washington, D.C.

Subject: Information requested for A.G.O.

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

1. Date of death 10-12-18

a. Service Record

2. Cause of death R/A

b. Christian name Vincent

3. Authority (G.O.)

c. Serial Number 199887

4. Relationship

d. Organization Co. Y, 388th Inf.

e. Rank Pvt. 1st class

5. Final report of  
(See Physical report of  
examination prior to enlistment)

f. Description  
(See page 42 of the Service Record)

6. Service out to

g. Age at enlistment

7. Service in  
under right under left

h. Color of eyes

8. Service in  
under right under left

i. Color of hair

j. Height

k. Weight

9. Remarks (See page 42 of the Service Record)  
entirely in presence of (priest)

RECEIVED

APR - 2 1921

Quartermaster General, U.S. Army

FILED  
MOILED 1921

42947

# GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Cicchelli, 1898687, Vincent  
(Surname). (Number). (First Name and Initials).

Pvt. Co. E, 325 Inf.  
(Rank). (Organization).

PLACE OF DEATH: .....

CAUSE OF DEATH: .....

DATE OF BURIAL: 10-21-18

PLACE OF BURIAL: .....

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

Hill beyond stable 1/2 mile off  
San Juvin Road, and 1 mile from  
town. Luzancy map. Scale: 1 to  
20,000. 85.2 - 98.85

GRAVE NUMBER: .....

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:

**OMME.** St Juvin (Ardenne)

(C-250) SHIT. 35 N.W. COORD { E 298.8  
N 285.18

ADDRESS: .....

RELATIONSHIP: .....

REPORTED BY:  
B. P. Tyler, Chaplain 325 Inf.  
(Signature and Rank of Reporting Officer).

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

MEMORANDUM



Communal List No. 357-617  
Daily Report No. \_\_\_\_\_

42947



OSPCC - CTY. no. 1232

Sec 18 case no 21

F.D.

Reference: 42947.

42947  
AMERICAN EXPEDITIONARY FORCES  
HEADQUARTERS SERVICES OF SUPPLY  
OFFICE OF THE CHIEF QUARTERMASTER, A.E.F.  
GRAVES REGISTRATION SERVICE,

May 6th, 1919.

FROM : Chief, Graves Registration Service, American E.F.  
TO : Mrs. Mary Cingliano, 611 E. 182nd Street, Bronx, New York.  
SUBJECT : Private Vincent Cicchelli, Co.F., 325th Infantry.

In reply to your letter of inquiry, with reference to the  
regretted death of this soldier, according to the records at these head-  
quarters he is buried in the Commune of ST. JUVIN, Department of ARDENNES.

By direction

CHARLES C. PIERCE,  
Lieut.-Colonel, Q.M.C., U.S.A.

Per MAURICE B. DIX,  
Captain, American Red Cross  
Representative assigned to  
Graves Registration Service.

MBD/cac.  
Encl. 10.B. & 004.5

42944

611 E. 182 St Bronx N. Y.

March 23, 1919

Chief Graves Registration Service,  
Headquarters Services of Supply,  
A. P. O. 77. A. C. F.

Dear Sir;

In regards to one Priv.  
Vincent Cicchelli 325 Inf. Co. F.  
Killed in action Oct. 12, 1918. I, as his  
sister would like to ask of you  
a favor. I would like to have the  
Photographs and location of grave  
that my brother was buried sent  
to me. Any kindness on your  
part will be greatly esteemed  
by me and the deceased's rela-  
tives. I am

Yours Very Truly  
Mrs. Mary Cirigliano



Cicchelli, Vincent

1,898,687 ✓

(Surname.)

(Christian name in full.)

(Army serial number.)

Pvt. 1/c. Co F 325th Inf.

(Rank and organization.)

State your relationship to the deceased *Father*

Do you desire the remains brought to the United States? *No*

(Yes or no.)

If remains are brought to the United States, do you wish them interred in a national cemetery? } (Yes or no.)

If you desire the remains interred at the home of the deceased, give full information below as to where they should be sent:

(Name of person to receive remains.)

(Express office.)

(Telegraph office.)

(Number and street.)

(City or town.)

(State.)

(Sign here)

*Joseph Cicchelli*  
*611 E. 1182 St. Bronx N.Y. N.Y.*

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

Drawn 8.m

3-29-21

1232-16-21

checked

FD-3-30-21

Place Romagne sous Montfaucon

# REPORT OF DISINTERMENT AND REBURIAL

Date Jan, 6, 1922.

1. REMAINS OF CICCHELLI <sup>Vincent</sup> ~~BENJAMIN~~ SERIAL NUMBER 189868 7  
 RANK Pvt. 1/c ORGANIZATION Co., F. 325th Inf.

2. Disinterred (date): Jan, 6, 1922. From (give complete location):  
Gr. 206 sec 18 pt 4 Cem., #1232.  
 By: Group Russell Unit Sec.1

3. Reburied (date): Jan 7th 1922 In (give complete location):  
MouzeArgonne Cemetery # 1232 Gr 12 block E row 13  
unlined casket  
 By: Group re-burial S Unit  Nature of reburial

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

5. (a) Identification tags: Buried with body? Yes On grave marker? Yes  
 (b) Other means of identification found upon disinterment, and general remarks:  
body tag reads: " Cicchelli Vincent 1898687.

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

(a) Height (actual measurement) Imp to det.  
 do do

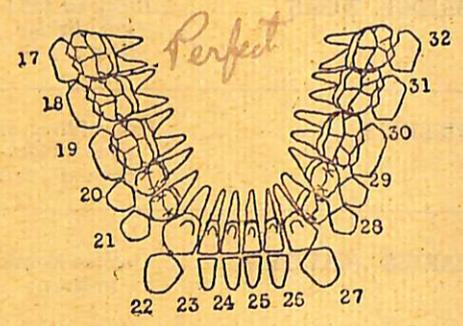
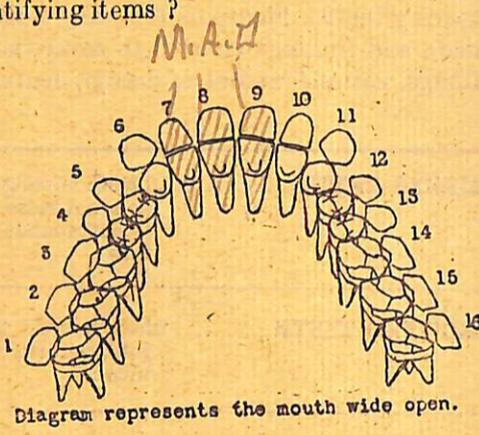
(b) Weight (estimated) do

(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) None visible

(f) Wounds or missing parts (received at time of casualty) Imp to det.



7. Disinterment supervised by C. V. Russell Approved: A. E. Dewey 1st Lt. QMC  
 (Title)

8. Reburial supervised by A. U. Dufault concentration Approved: James W. Younger Capt QMC.  
 (Title)

jt.

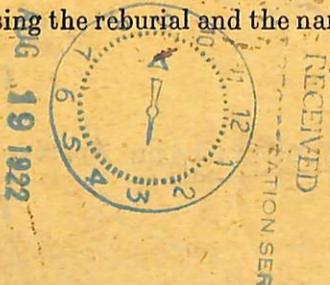
**INSTRUCTIONS FOR THE PROPER COMPLETION OF G. R. S. FORM NO. 16-A**

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), 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.

<b>MISSING TEETH</b> .....	All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus :	
<b>CROWNED TEETH</b> .....	Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus :	
<b>BRIDGE WORK</b> .....	Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :	
<b>FILLINGS</b> .....	Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus :	
<b>CARIES (CAVITIES)</b> .....	Outline location and size of cavity, shade in thus :	
<b>DENTURES (PLATES)</b> .....	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 Jan 6, 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 CICCHELLI, Benjamin  
 2. No. 1898687  
 3. Rank PFC  
 4. Org. Co. F 325th Inf.  
 5. D.D. Oct. 12th  
 6. C.D. KIA

10. Name Vincent Cicchelli.  
 11. No. \_\_\_\_\_  
 12. Rank \_\_\_\_\_  
 13. Org. \_\_\_\_\_  
 14. (a) D.D. \_\_\_\_\_  
 (b) D.B. \_\_\_\_\_

Discrepancy found upon disinterment

7. Grave No. 206 Sec. 18  
 8. Plot 4 Row \_\_\_\_\_  
 9. \_\_\_\_\_

15. Grave No. \_\_\_\_\_ Sec. \_\_\_\_\_  
 16. Plot \_\_\_\_\_ Row \_\_\_\_\_  
 17. none.

18. Cemetery Meuse-Argonne Amef.  
 20. Dept. or County Meuse  
 22. G.R.S. Hdqrs. Code No. 1232, Sec. 18

19. Commune or town Romagne/s/Montfaucon  
 21. Country France

23. Disinterred (Date) Jan 6, 1922

By C.V. Russell.

24. Inscription on grave marker:

Name Benjamin. Cicchelli  
 Rank Pfc.

Serial No. 1898687  
 Organization Co. F. 325th Inf.

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

J.T. White  
 Signature Junior Technical Assistant  
J.T. White.

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).  
none.

27. Condition of body body decomposed, unrecognizable.

28. Nature of burial wooden box and burlap and 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 Jan 6, 1922 By C.V. Russell

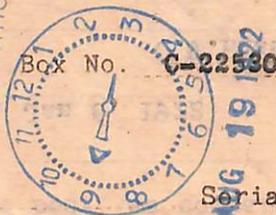
31. Casket sealed by C.V. Russell

Signature of Embalmer, (Supervisor) C.V. Russell  
C.V. Russell.

AUDITED

SHIPMENT. (Show actual marking of box.)

RECEIVED  
GRAVES REGISTRATION SER.



32. Designation of body:

Name **Benjamin CICCHELLI**

Serial No. **1898687**

Rank **PFC**

Organization **Co. F 325th Inf.**

33. Consigned to:

Name of Permanent Cemetery **Meuse-Argonne Amer. #1232, Romagne/s/Montfaucon, Meuse**

34. Casket boxed and marked (Date) **Jan 6, 1922**

By **C.V. Russell.**

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

*A.E. Dewey*  
**A.E. Dewey 1st Lt. Q.M.C.**

36. Remarks

none.

37. Shipped from point of Operation: (Date) **Jan 6, 1922.**

To point of Concentration **Romagne Morgue.**

(Name)

Convoyer **W.J. Royed.**

Signature Shipping Officer

*G.F. Syam*  
**G.F. Syam, Capt. Q.M.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

(Name)

Convoyer

Signature Shipping Officer

40. Received: Date

G.R.S. Representative

41. Reinterred

**Meuse Argonne Cemetery # 1232 (Date) 7th 1922.**

42. Grave No.

**12**

Section

43. Plot Block

**E**

Row

**13**

G.R.S. Representative

*James W. Younger*  
**James W. Younger, Capt QMC.**

jt.

# COMPILATION OF DISPOSITION OF REMAINS DATA

File #42947

I. LOCATION INDEX CARD:

(a) Name CICCHELLI, Vincent Ser. No. 1898687  
 (b) Rank Pvt. 1/c <sup>O.K. 4-5-21-W</sup> Organization Co. F, 325th Inf. } TYP. aeu  
 (c) Date of death 10-12-18 (d) Cause of death K/A } CKR. 13.7

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

(a) Grave No. 206 Row - Plot 4 Sec. 18 TYP. Aew  
 (b) Emerg. Address Mary Eingliano, Sister, 611 E. 182nd St., New York, N.Y. <sup>O.K. 4-5-21-W</sup>

III. Files of soldiers dying from contagious diseases \_\_\_\_\_ CKR. 13.7

IV. A. G. O. DISPOSITION CARD:

Date of receipt none  
 (a) Name Mr. Joseph Cicchelli (b) Relationship Father  
 (c) Address 611 E. 182 St. Bronx, N.Y., N.Y.  
 (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 S.M. Date 3-29, 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 S.M. Date 3-29, 1920.

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

Mrs. Mary Eingliano <sup>sister</sup>  
611 E. 182 St. Bronx, N.Y., 3-23-19 desires  
location and photograph of brother's  
grave.  
 (a) Cancellation memos referred to? yes S.M.

Examiner's Initials S.M. Date 3-29, 1920.

COUNTRY France CEMETERY No. 1232, Sec. 18 SHEET No. 21

ap. 4-14-21.

APR 14 1921  
 137-131  
 C

VII. G. R. S. Form No. 715 made \_\_\_\_\_, 1920.

Typed by \_\_\_\_\_ Checked by \_\_\_\_\_, 1920.

RECEIVED

APR 29 1921

VIII. FINAL ACTION

Following advice forwarded to Europe by

cable on \_\_\_\_\_, 1920  
letter on H-7- \_\_\_\_\_, 1920

*Section # 18.*

*Par. 2. Not to be returned (JEN)*

IX.

**CORRECTIONS**

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

X. SUSPENSION REMARKS: \_\_\_\_\_

Name .....

Rank .....

Serial No. ....

Org. ....

Remarks

Name .....  
Rank .....  
Serial No. ....  
Org. ....  
Remarks

..... S.M. 3-29-21

A:G.O. Card & Corr. ....  
..... Discrepancies .....

Name .....  
Rank ..... ✓  
Serial No. ....  
Org. ....  
Remarks = E.A.

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

Name .....  
Rank .....  
Serial No. ....  
Org. ....  
Remarks

Checkers .....  
..... Discrepancies .....

Name .....  
Rank .....  
Serial No. ....  
Org. ....  
Remarks

*GW 20-21*

*name: Ed - spelling of  
also difference in E.A.  
checked 7-3-30-21*

S/1783/LML

# COMPILATION OF DISPOSITION OF REMAINS DATA

File #42947

I. LOCATION INDEX CARD:

(a) Name CICCHELLI, Vincent Ser. No. 1998687  
*(O.K. - 4-5-21-41)* } TYP. Aw  
 (b) Rank Pvt. 1/c Organization Co. F, 325th Inf. } B. J.  
 (c) Date of death 10-12-18 (d) Cause of death K/A

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

(a) Grave No. 206 Row - Plot 4 Sec. 18 TYP. Aw  
*let: (O.K. - 4-5-21-41)*  
 (b) Emerg. Address Mary Ingliano, Sister, 611 E. 182nd St., New York, N.Y.

III. Files of soldiers dying from contagious diseases CKR. B. J.

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

-----  
 -----  
 -----

V. Following advice forwarded to Europe by { cable on \_\_\_\_\_, 192  
*Section - 18* letter of transmittal on 4-7-, 1921  
*Par. 2 - Not to be returned (JEX)*  
APR 14 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 \_\_\_\_\_ CEMETERY No. \_\_\_\_\_ SHEET No. \_\_\_\_\_

*AP 4-14-21*

TO: - REGISTRATION BRANCH, G.R.S.

FILE NUMBER 42947

FROM:-

DATE: 4/14/19

Please furnish information as indicated below regarding the following soldier:

NAME CICCHELLI, Vincent

NUMBER

RANK Pvt.

ORGANIZATION Co. F., 325th Infantry

NO,	QUESTION	REPLY
1.	Do particulars of soldier given above agree with Records?	① 1898687.-Pvt. 1st CL.
2.	Date of Death.	② 10/12/18
3.	Cause and place of death.	③ K/a
4.	Number of Casualty Cablegram	④ 299
5.	Date buried.	⑤ 10/21/18
6.	Grave Location (a) Complete record required (b) Name of Cemetery or Commune only required	⑥ C-250. ST. JUVIN (ARDENNES) 35 NW.-E-298.8 - N.285.18
7.	Who reported burial:	⑦ B.T. TYLER Chap 325 Inf
8.	Has report been confirmed by G.R.S.	⑧ No
9.	Report as to Grave Marker.	⑨ CROSS
10.	Report as to Identification Tags.	⑩ One - body One - marker
11.	Who is nearest relative?	⑪ MARY EINGLIANO (SISTER) 611 E. 182ND. ST. NEW YORK CITY.
12.	Has N/R been notified? (Give Date)	⑫ no.
13.	Report the exact position of your inquiry on this case. (Reply in all cases if no information on record).	
14.	What is the Photograph No.?	
N.B. All Proper names to be printed in PLAIN BLOCK LETTERS.		

D.P.F.