

191

G.R.S. Form #114-B

To The A. G. O. 11336

AUG 31 1926 DATE 12/23/21

m1

1. NAME CINAGLIA, Francesco SERIAL No. 1907068

RANK Pvt ORGANIZATION Co G, 327th Inf  
& DIVISION - 82

GRAVE LOCATION Meuse-Argonne, Amer. Cty #1232, ROMAGNE-s-MONTFAUCON #1232 sec 30  
 CTY. NAME Meuse NUMBER

61 sec 30 2

Plot 1. GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION Gr. #26, 1 of sketch 33, 4/5 K. NE Chatel Chehery, Meuse E. slope of hill 180. city #851

GRAVE COMMUNE DEPT.

COORDINATES 298.5E 280.7N Verdun 35NW

CONCENTRATED TO 4-5-19 61 sec 30 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.

DATE OF DEATH Oct 16, 1918

STATE FROM WHICH HE CAME Pa

Data from Form 1.

SUBSEQUENT REBURIALS \_\_\_\_\_ MEDALS OR DECORATIONS AWARDED none

DATE GRAVE ROW PLOT CEMETERY

Robert C. Davis,  
Major General,  
The Adjutant General,  
SEP 3 1926

SIGNATURE, AREA SUPERVISOR Wm M. Cline Wm M. CLINE  
Captain Q.M.C.

3. FINAL GRAVE LOCATION 12/23/21 31 16 Block G

DATE GRAVE ROW TROT

Meuse-Argonne American Cty #1232, Romagne-s-Montfaucou, Meuse  
 CEMETERY

AUDITED BY  
 FAX 3-26-23

A. G. O.  
 SEP 1 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.



C° G - 327th Infantry -  
82nd Infantry -

CINAGLIA, Francesco - Priv. 1907068  
Home address: Layton - Pa.

Killed by shell fire on Oct. 8th 1918 on hille 180 near Cornay  
France.  
Buried on hill 180.

Informant: LITTLE, Joseph - C° G - 327th Inf.  
1st Sgt. 1907015  
Home : P. O. Box 73 - Renton - Pa.

Signed: ROBERTS, M. M. - 1st Lieut.  
327th Inf. C° Commander.

Address next of kin:  
Wife: Filomena CINAGLIA  
Ascoli - Piceno -  
Cominenza - Italy.

Feb. 20th 1919.

AL.

AI.

Address next of kin:  
Wife: Filomena GINAGLIA  
Ascoli - Piacenza -  
Commanza - Italy.



Signed: ROBERTS, M. M. - 1st Lieut.  
327th Inf. Co. Commander.

Home: P. O. Box 73 - Renton - Wa.

Informant: LITTLE, Joseph - Co G - 327th Inf.  
1st Sgt. 190703

Killed by shell fire on Oct. 8th 1918 on hill 180 near Comany  
Company, killed on Hill 180.  
Home address: Renton - Wa.  
327th Inf. 190703

Feb? 20th 1919.

Cinaglia, Francesco

1907068

Pvt. Co. G

327th Inf.

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

*Rest Rept d 17/9/18/HF*  
Cinaglia 1907068 Francesco  
(Surname) (Number) (First Name and Initials)

pvt.  
(Rank) (Organization)

PLACE OF DEATH: *Chatel Chbery*

CAUSE OF DEATH: *G. S. W.*

DATE OF BURIAL: *Oct. 18<sup>th</sup> 1918*

PLACE OF BURIAL: *Chatel Chbery*

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

*Map Vouziers 150,000 - 298.3*

*280.5*

GRAVE NUMBER: *26*

HOW MARKED: Name Peg? .. Cross? *yes* ..

Headboard? .. Bottle? ..

IDENTIFICATION TAGS: *yes*

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:

*Chaplain B. H. G. Carhart P. M. F. K.*  
(Signature and Rank of Reporting Officer)

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

Cincinnati, Cincinnati

1907068

Pvt. G. G.

327th Inf

~~Adkins Alvina 3061609~~

~~Buffalo Texas~~

~~May 1918~~

~~disg April 1919~~

~~1st Inf.~~

CODE SLIP



HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME <i>CINAGLIA</i>	<i>CIN</i>	3	<i>3904</i>
<i>Francisco</i>	CEMETERY <i>1232</i>	1	<i>1</i>
BURIED	GRAVE <i>31</i>	2	<i>31</i>
	ROW <i>16</i>	2	<i>16</i>
	BLOCK <i>G</i>	1	<i>7</i>
STATE	<i>Pa</i>	2	<i>44</i>
RANK	<i>Pvt</i>	1	<i>2</i>
DIVISION	<i>82</i>	2	<i>82</i>
ORGANIZATION	<i>327</i>	3	<i>327</i>
ARM	<i>Inf</i>	1	<i>1</i>
MARITAL	<i>yes (Foreign)</i>	1	<i>1</i>
NAME <i>CINAGLIA</i>	<i>CIN</i>	3	<i>3904</i>
<i>angela Pacitti</i>	STATE	2	
RESIDENCE	COUNTY	2	
<i>(widow - Italy)</i>	CITY	3	
RELATION	<i>Mother</i>	1	<i>1</i>
OTHER		1	
ELIGIBILITY	<i>Foreign</i>	1	<i>4</i>
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE <i>29/514</i>		1	

*no lead*

AUDITED  
MAR 17 1936  
*RJM*

*country*

*Italy*

*2 01*

*w ✓*  
*Filomena Maresca vedova Cinaglia*  
*Cassinino di Camunanza*  
*Prov. di Ascoli Piceno*

WAR DEPARTMENT  
 OFFICE OF THE QUARTERMASTER GEN  
 WASHINGTON

DATE 7-23-29

NAME Cinaglia, Francesco RANK Pvt. SERIAL 1907068 ORGANIZATION Co. G, 327th Inf. DATE OF DEATH 10-16-18

STATE \_\_\_\_\_ CTY. NO. 1232 GRAVE 31 ROW 16 BLOCK G

	<u>Check relationship</u>	<u>Living - Deceased</u>	
	MOTHER <i>caus</i>	: : :	<i>xc - 135371</i>
	STEPMOTHER (For the year prior to commencement of service)	: : :	
NAME	MOTHER THRU ADOPTION	: : :	<i>Angela Parenti</i>
AND	(For the year prior to commencement of service)	: : :	
ADDRESS	MOTHER IN LOCO PARENTIS	: : :	<i>in Cinaglia</i>
	(For the year prior to commencement of service)	: : :	
	<i>caus</i> <u>WIDOW</u>	: : :	<i>step</i>
	(Who has not remarried)	: : :	

*3-11-23*

Veterans Bureau Claim Number \_\_\_\_\_  
 29/156

K

In reply refer to:  
293 C-R

June 29, 1923.

Mrs. Filomena Cingolia,  
Ascoli,  
Piceno, Italy.

Dear Madam:

*293*  
*Foreman*

The Quartermaster General desires that you be informed that  
Private Francesco Cingolia, Company G, 527th  
the permanent grave of, Row 16, Block G, 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.

Very truly yours,

H. J. Conner,  
Assistant.

L  
RD  
23/236/ARK



51675

REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name: GINAGLIA, Francesco

Number: 1907068

Rank: Pvt

Organization: Unkn

Disinterment and Reburial made by Group

Unit

Disinterred (Date)

From: (Give complete location)

5, April 1919

Grave #26 B A Cemetery CHATEL CHEHERY MEUSE

Map.35NW Coord: E298.5 N280.7

Reburied (Date)

in: (Give complete location)

5, April 1919

Grave #61 Sec 30 Plot 2

Amer.B A Cemetery #1232 ROMAGNE MEUSE

Map.35NE Coord: E308.16 N284.87

1232

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

Burial good. Buried in uniform. Body badly decomposed.

Was one identification tag found upon the body? No

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

CONFIRMED N° D/10349  
10349

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 Zama

R. H. ROSENTHAL

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

C.O. Group                      Unit

Subscribed by: 10 1000

Whereof \$1000 is to be paid to the Secretary of the Board of Health and the balance to the Treasurer of the Board of Health.



1000

Amount of money to be paid to the Secretary of the Board of Health: None

Whereof \$1000 is to be paid to the Secretary of the Board of Health and the balance to the Treasurer of the Board of Health.

Subscribed by: 1000 1000

Whereof \$1000 is to be paid to the Secretary of the Board of Health and the balance to the Treasurer of the Board of Health.

1000

Whereof \$1000 is to be paid to the Secretary of the Board of Health and the balance to the Treasurer of the Board of Health.

Subscribed by (Date)

In: (State complete location)

1000

Subscribed by: 1000 1000

Whereof \$1000 is to be paid to the Secretary of the Board of Health and the balance to the Treasurer of the Board of Health.

1000

Subscribed by (Date)

In: (State complete location)

Whereof \$1000 is to be paid to the Secretary of the Board of Health and the balance to the Treasurer of the Board of Health.

1000

Name: 1000

Organization: 1000

1000

Name: 1000

Number: 1000

Name of:

BEFORE ME, DISTRICT CLERK AND SECRETARY

Date: 10 1000

1000

1000

CEMETRIAL DIVISION  
REGISTRATION SECTION

**April 20** 192 **1**

MEMO FOR:  
Cards Department.

1.  
CASE OF:

\_\_\_\_\_  
ORGANIZATION (Old)  
**ANAGLIA 1907068 Francisco**  
\_\_\_\_\_  
(Name)

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

ORGANIZATION (New)

FILE NO.

SURNAME

SERIAL NUMBER

FIRST NAME AND INITIALS

RANK

DATE OF DEATH

CAUSE OF DEATH

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

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

*2# 82139*  
5 x 8 Blue card cancelled in favor of white card *2# 51675*  
Cinaglia, Francesco.

BY: Helen A. Souder

**Adjustment**

(Department)

5 x 8 card was sent to file.

Corrections made  
on Organization  
File Card:

By *mjc*

S/1105/LML

FILE

51675

Name appears on



Q



For further data see Casualty Files

~~Quaglia, Francisco~~  
1907068

Cinaglia, Francesco  
# files

OK  
OK

(hc)

1st Burial - Cem.

(unc) C246  
Chatef Chetony  
(ardennes)

Cost of goods

5 16 75

From

8 2 1 3 9

Cost of materials

# GRAVE LOCATION BLAN

LOCATION OF THE GRAVE OF

Anaglia 1907068 Francisco  
(Surname) (Number) (First Name and Initials)

Pvt.  
(Rank) (Organization)

PLACE OF DEATH: Chatel Chehery

CAUSE OF DEATH: G.I.W.

DATE OF BURIAL: Oct 18<sup>th</sup> 1918

PLACE OF BURIAL: Chatel Chehery

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

Map Vouziers 1:50,000 - 298.3

280.5

GRAVE NUMBER: 26

HOW MARKED: Name Peg? Cross?

Heaven? 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.

C-246 Chatel-Chehery (Ardenne)  
MAP-35 NW (E-298.3) 279  
(N-280.5)

NEAREST RELATIVE:

ADDRESS: Chatel-Chehery (Ardenne)

RELATIONSHIP: (C-246) 35 NW (E-298.3) (N-280.5)

REPORTED BY:

Chaplain R.H. Gearhart, Pvt. M.F.K.  
(Signature and Rank of Reporting Officer)

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

66139  
828

NO. 26

OMME  
C-246

246-758

Communist List No. \_\_\_\_\_

Daily Report No. \_\_\_\_\_

51675

Number... 1907468

Name... CINAGLIA FRANCESCO

Rank... Pvt. Co Unknown (Corp) Inf.

Date of Death... Oct 10th 1918

Place... CHATEL CHERRY MEUSE

Cause... Killed in action

Date of Burial... Oct. 16th 1918

Grave No... 26

Cemetery...

Identified By... (Tags) Papers (Clothing) Tags

List of effects...

Field Rec... made by Paul J. Holt  
S.M. Sgt. Sr. Gr.

Company... Graves Registration Service.

For additional data use reverse side

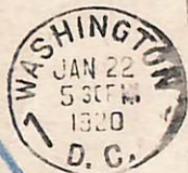
P. B. Sh  
130

slope of Hill 180  
70 yds. N. W. Railroad  
1.3 K., N. E. Chatel Chehery  
N. O. Verdun 35, 298.5 E, x 280.7 N.



WAR DEPARTMENT.  
GRAVES REGISTRATION SERVICE.  
WASHINGTON, D. C.

OFFICIAL BUSINESS.



PENALTY FOR PRIVATE USE TO AVOID  
PAYMENT OF POSTAGE, \$300.



*6922*

*FILE*

Mrs. Filomena Cingalia

Ascoli, Piceno, Italy

*51675*

RECEIVED  
JUN 9

RECEIVED  
JUN 9  
11-AM

O.D.P. & S.M. & R.B.R.  
JUN 9  
11-AM  
1920

SEGNASCINTO  
DAI PORTALETTI

# COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

File #51675

(a) Name CINAGLIA, Francesco Ser. No. 1907068

(b) Rank Pvt. Organization Co. G, 327th Infantry

(c) Date of death 10/16/18 (d) Cause of death K/A

TYP. DMA

CKR. go

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

(a) Grave No. 61 Row - Plot 2 Sec. 30 TYP. DIA

(b) Emerg. Address Mrs. Filomena Cingalia (wife) Ascoli, Piceno, Italy

III. Files of/soldiers dying from contagious/diseases

CKR. go

IV. A. G. O. DISPOSITION CARD:

Date of receipt

*Record in file. (S.D. 4-27-21)*

(a) Name \_\_\_\_\_ (b) Relationship \_\_\_\_\_

(c) Address \_\_\_\_\_

(d) Remains to be brought to U. S.? \_\_\_\_\_

(e) To be interred in National Cemetery in U. S. at \_\_\_\_\_

(f) Shipping instructions upon arrival of body in U. S. \_\_\_\_\_

(g) Disposition instructions if not brought to U. S. \_\_\_\_\_

Examiner's Initials \_\_\_\_\_ Date \_\_\_\_\_, 1920.

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

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

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

Examiner's Initials \_\_\_\_\_ Date \_\_\_\_\_, 1920.

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

(a) Cancellation memos referred to? Yes. P. L.

Examiner's Initials P. L. Date 4-27-21, 1920.

COUNTRY FRANCE

CEMETERY No. 1232-Sec. 30

SHEET No. 33



Location Index

Discrepancies

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

Checkers

Discrepancies

Name

Rank

Serial No.

Org.

Remarks

*NR ER*

S-1783/MB

*checked  
4/25/04  
SH*

# COMPILATION OF DISPOSITION OF REMAINS DATA

File #51675

I. LOCATION INDEX CARD:

(a) Name CINAGLIA, Francesco Ser. No. 1907068 } DMA  
 (b) Rank Pvt. Organization Co.G, 327th Infantry } TYP.  
 (c) Date of death 10/16/18 (d) Cause of death K/A } 30

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

(a) Grave No. 61 Row - Plot 3 Sec. 30 TYP. DMA  
Mrs. Filomena Cingalia (wife) Ascoli, Piaceno, Italy  
 (b) Emerg. Address //////

III. Files of soldiers dying from contagious diseases ..... CKR. [Signature]

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

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

V. Following advice forwarded to Europe by { cable on ....., 192  
 letter of transmittal on 5/7/21, 192  
Section # 30  
pas # 2 - Not to be returned - AD

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. ....

Place Romagne (Meuse)

# REPORT OF DISINTERMENT AND REBURIAL

Date Dec. 23, 1921

1. REMAINS OF CINAGLIA, FRANCESCO SERIAL NUMBER 1907068

RANK Pvt. ORGANIZATION Co. G, 327th. Inf.

2. Disinterred (date) : Dec. 23, 1921 From (give complete location) :  
Gr. 61, Sec. 30, Pl. 2, Cem. 1232.

By : Group 5 Unit F.S. #1

3. Reburied (date) : In (give complete location) :  
Dec. 23rd, 1921. Grave 31, Row 16, Block G, Cemetery 1232.

By : Group Reburial S Unit \_\_\_\_\_ Nature of reburial Unlined Casket

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

Body badly decomposed, features unrecognizable.

Uniform, burlap and box.

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

(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) Imp. to determine

(b) Weight (estimated) do

(c) Hair—Color do

Quantity do

Characteristics do

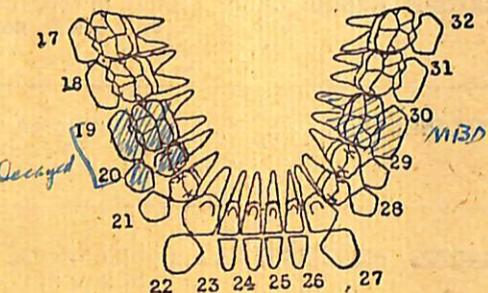
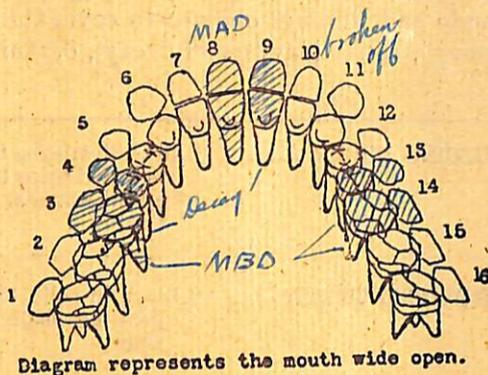
(d) Hair on face—Color do

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



7. Disinterment supervised by H.E. Strong

Approved : G. F. Spann  
G. F. Spann, Capt. QMC  
(Title)

8. Reburial supervised by A. U. Dufault

Approved : James V. Younger  
James V. Younger, Captain Q.M.C.  
(Title)

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

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

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.

2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.

3. Give date and accurate information as to location of reburial and the group and unit which made reburial, and how reburial was made—in casket, wooden box, etc.

4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried—in a casket, box, burlap, etc. This statement should be as complete as possible.

5. (a) State whether identification tags were found buried with body and on grave marker by reporting "Yes" or "No".

(b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying the body, other than that tabulated under Item No. 6.

6. Give all information as to body description and dental chart as nearly correctly as the condition of the body will allow. Items (e) and (f) under the body description are very important and should be very complete. The dental chart is also very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), 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:



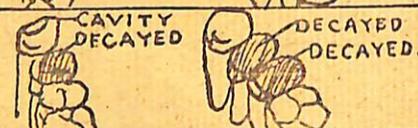
**BRIDGE WORK**.....Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:



**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 Dec 23, 1921.

REPORT OF DISINTERMENT, PREPARATION, SHIPMENT AND REBURIAL OF BODY

DISINTERMENT

COMPARATIVE REPORT

Records of G.R.S. Headquarters.

Discrepancy found upon exhumation of body

1. Name CINAGLIA, Francesco  
 2. No. 1907068  
 3. Rank Pvt  
 4. Org. Co G 327th Inf  
 5. D.D. Oct 16th  
 6. C.D. KIA

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

Discrepancy found upon disinterment

7. Grave No. 61 Sec. 30  
 8. Plot 2 Row \_\_\_\_\_  
 9. \_\_\_\_\_

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

18. Cemetery Meuse-Argonne, Amer.

19. Commune or town ROMAGNE-s-MONTFAUCON

20. Dept. or County Meuse

21. Country France

22. G.R.S. Hdqrs. Code No. #1232 sec 30

23. Disinterred (Date) Dec 23, 1921

By H.E.Strong.

24. Inscription on grave marker:

Name Francesco Cinaglia  
 Rank Pvt.

Serial No. 190 7 068  
 Organization Co. G. 327th Inf.

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

*H. E. Strong*  
Signature Junior Technical Assistant

W.H. Woodward.

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 Dec 23, 1921 By H.E.Strong.

31. Casket sealed by H.E.Strong.

Signature of Embalmer, (Supervisor

*H. E. Strong*  
H.E.Strong.

H.E.Strong.



100 24 1922

SHIPMENT. (Show actual marking of box.) Box No. **C-21088**

32. Designation of body:

Name **Francesco, CINAGLIA** Serial No. **1907068**

Rank **pvt** Organization **Co G 327th Inf**

33. Consigned to:

Name of Permanent Cemetery **Meuse-Argonne, Amer. Cty #1232, ROMAGNE-sous-MONTFAUCON**  
**Dec 23, 1921**

34. Casket boxed and marked (Date) **Dec 23, 1921** By **Romagne 122 (Meuse) Long.**

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

*G.F. Spain*  
**G.F. Spain, Capt. Q.M.C.**

36. Remarks

**none.**

37. Shipped from point of Operation: (Date) **Dec 23, 1921.**

To point of Concentration **Romagne Morgue.**

Convoyer **W.J. Royed.** Signature Shipping Officer *G.F. Spain*  
**G.F. Spain, 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

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

40. Received: Date

G.R.S. Representative

41. Reinterred **Meuse Argonne Cemetery 1232. Dec. 23rd, 1921.**

(Date)

42. Grave No. **31** Section

43. Plot ~~Block~~ **G** Row **16**

G.R.S. Representative

*James W. Younger*  
**James W. Younger,**  
**Captain Q.M.C.**

JEL