

To The A. G. O.

G.R.S. Form #114 B

FEB 6 - 1926

167

1. NAME CHAPMAN, James B. *Sol. Sig.* SERIAL No. 45114  
*Reduced fr. Sgt. to Pvt 1-3-18*  
 RANK Private *100 5-1-18/orig* ORGANIZATION M.G. Co., 16th Infantry.  
 GRAVE LOCATION Town Cemetery, BEAUVAIS. & DIVISION 350  
 CTY. NAME 18 NUMBER American  
 GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 3, Range 21e, Tombe 17e, Beauvais Oise  
 GRAVE COMMUNE DEPT.

COORDINATES 32 N.W. E.90.85 N.308.75

CONCENTRATED TO Jan. 14, 1921 18 American  
 DATE GRAVE ROW PLOT  
Town Cem. Beauvais, Oise 350  
 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 agrees - Perforated number 26 found on body - lead plate found on pine box reads "Chapman James Decede 31 Mai 1918" apparently hospital case top body of three in grave. Form 16-A dated Jan. 14, 1921.

DATE OF DEATH May 30/18

SUBSEQUENT REBURIALS STATE FROM WHICH HE CAME W.C.  
 DATE GRAVE ROW PLOT CEMETERY

MEDALS OR DECORATIONS AWARDED Cited in 901 and Silver star 1st Div Jan 1/20

DATE for 1st Div near Cantigny, 1st Div May 8/18 GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR LOUIS R. DICE, Major, CAC.

3. FINAL GRAVE LOCATION Aug. 24, 1922 13 8 Block A.  
 DATE GRAVE ROW PLOT

4  
 FEB 8 1926  
 WORLD WAR DIV.

Rec'd World War Div.  
 2 NOV 17 1927

Somme Arm. Coy Bony, Oise  
 CEMETERY  
 Major General  
 The Adjutant General  
 By Iva 2/10-26  
 AUDITED BY  
 7636

WORLD WAR DIV.  
FEB 8 1926  
A.G.O.

# INSTRUCTIONS FOR PREPARATION OF FORM 114 B

1. Forms 114-B are to be prepared by Registration Branch in quadruplicate, three copies to be forwarded to Area Supervisor who will accomplish paragraph 2 and return all three copies to Headquarters, American Graves Registration Service.
2. Paragraphs 1 and 3 will be accomplished by Registration Branch, Headquarters, American Graves Registration Service, Q.M.C., in Europe.
3. Paragraph 2 will be accomplished by Area Supervisor from data on file in his office.
4. If data is entered on Form 114-B from Form 1, Form I6, Form 1-A or Form 16-A, statement to this effect will be made on Form 114-B STATING WHICH G.R.S. form data is taken from. If data concerning co-ordinates is approximate and NOT accurate, statement to this effect will be made on these forms.

FEB 12 28  
M.A.R. BRANCH  
Q.M.C.

*O. final*

Place *Beaurais - Ore*

REPORT OF DISINTERMENT AND REBURIAL

Date *Jan - 14 - 1921*

1. REMAINS OF *James B. Chapman* SERIAL NUMBER *45114*

RANK *Pvt.* ORGANIZATION *M.G. Co. 16 Inf.*

2. Disinterred (date) *Jan - 14 - 1921* From (give complete location) *Town Cem 350  
Grave 3 Range 218. Lumber 176 Beaurais Ore*

By : Group *one* Unit *see one*

3. Reburied (date) *Jan 14 - 1921* In (give complete location) *Town Cem 350  
Grave 18 Post American Beaurais Ore*

By : Group *one* Unit *see one* Nature of reburial *in blanket + pine box*

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

*Hospital shroud in pine box  
Badly decomposed unrecognizable*

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

*Tag on body agrees - Perforated number 26 found on body.*

(b) Other means of identification found upon disinterment, and general remarks :  
*Lead plate found on pine box read  
Chapman James Deeds. 31 mai 1918  
apparently hospital card*

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

(a) Height (actual measurement) *Impossible to state*

(b) Weight (estimated) *Impossible to estimate*

(c) Hair—Color *No hair on skull*

Quantity *none*

Characteristics *none*

(d) Hair on face—Color *None on face*

Location *none*

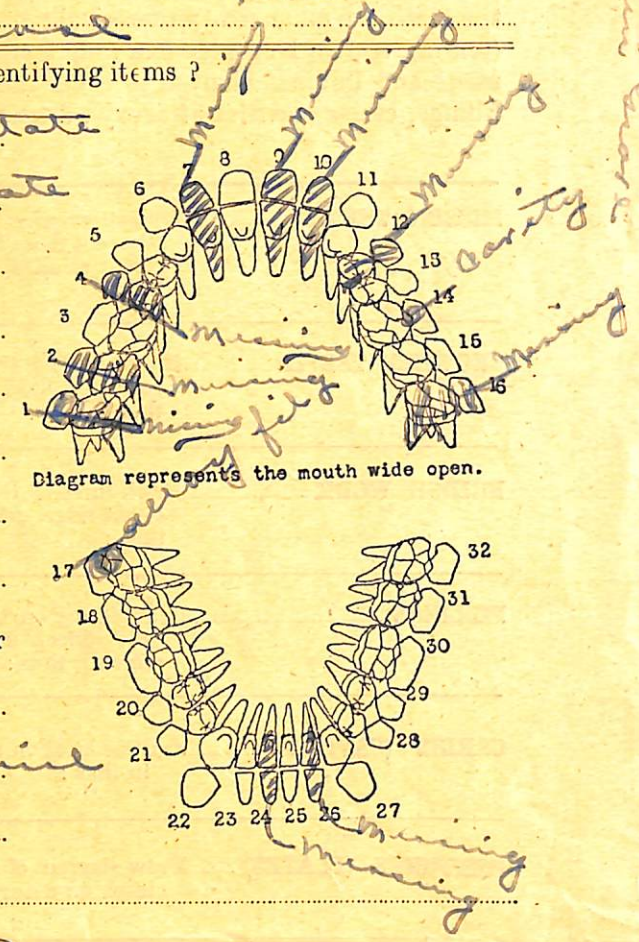
Quantity *none*

(e) Permanent marks on body (old scars, peculiarities, or missing parts)

*Impossible to determine*

(f) Wounds or missing parts (received at time of casualty)

*Impossible to report*



*D-30092*

7. Disinterment supervised by *Neil B. Simms*  
(Neil B. Simms)  
2nd Lt. QMC Inspector

Approved *Val E. Miltenberger*  
(Val E. Miltenberger)  
Major (Title) M.C. Mas. of Sec. #1






8. Reburial supervised by *Neil B. Simms*  
(Neil B. Simms)  
2nd Lt. QMC Inspector

Approved *Val E. Miltenberger*  
(Val E. Miltenberger)  
Major (Title) M.C. Mas. of Sec. #1

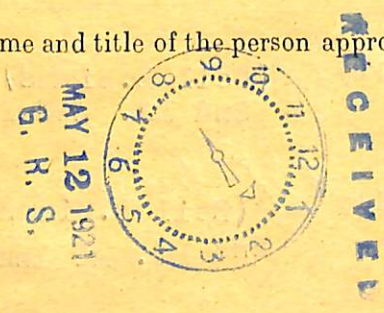
**INSTRUCTIONS FOR THE PROPER COMPLETION OF G. R. S. FORM NO. 16-A**

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.

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

7. Show name of person supervising the disinterment and the name and title of the person approving same.
8. Show name of person supervising the reburial and the name and title of the person approving same.



CODE SLIP  
 LOCO PARENTIS



HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	CHAPMAN	3	381
	James B.		
BURIED	CEMETERY	1	5
	636		
	GRAVE	2	13
	13		
	ROW	2	08
	8		
	BLOCK	1	1
	a		
STATE	N.C.	2	38
RANK	Priv. 1cl	1	2
DIVISION	1	2	01
ORGANIZATION	16	3	016
ARM	Inf.	1	1
MARITAL	No	1	2
			sm
NAME	Chapman	3	381
	Cha		
RESIDENCE	STATE	2	38
	N.C.		
	COUNTY	2	02
	Alexander		
	CITY	3	XXX
	Stony Point		
RELATION	Loco	1	4
OTHER	Brother	1	3
ELIGIBILITY	No	1	2
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE		1	
29/514/			

Born 9-15-82  
 Ent. 10-12-14

Mrs. Walter L.  
 (mother dead)

Father died before War was over about 18 yrs. old

AUDITED  
 APR 21 1937  
 hurb

UW

100

X<sup>C</sup> 129 933 Chapman, James B.

born 9-15-86 enl 10-16-14

single

made by Walter Huff (Huff) 6/28/92  
28

Mother dead by 1918

Father dead 1904

Is <sup>M</sup>rs Walter S. Chapman recognized as a loco

born \_\_\_\_\_

no claim made for loco.

Batten

atn

QM 293 A-M  
Chapman, James B., -PFC-(SOM)

August 24, 1931.

Mrs. W. S. Chapman,  
Route # 1,  
Stony Point, N.C.

Dear Madam:

Reference is made to office letter of July 17, 1930, wherein you were requested to furnish affidavits in the event you considered yourself eligible to make a pilgrimage to the grave of the late Private first class James B. Chapman under the provisions of section 4 (a) of the Act of Congress of March 2, 1929, as amended, which reads in part "or any woman who stood in loco parentis to the deceased member of the military or naval forces for a period of not less than 5 years at any time prior to the soldier, sailor or marine becoming 18 years of age."

To date the affidavits have not been received and in order that the records may be completed, it is requested you advise whether or not you consider yourself eligible to make a pilgrimage under this provision of the law. A self-addressed envelope which requires no postage is enclosed for your convenience in replying.

In the event you consider yourself eligible and desire to make a pilgrimage, it is requested the affidavit forms sent you be completed by two persons not related to you and returned to this office. If you have misplaced the forms mentioned, another set will be mailed you at once upon request.

For The Quartermaster General,

Very truly yours,

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

Encl:  
Env.

LFH

July 17, 1930.

QM 293 A-M  
Chapman, James B. 636 LP

Mrs. W. S. Chapman,  
Route 1,  
Stony Point, N. C.

Dear Madam:

Information has been furnished this office which indicates that you may be eligible to make the pilgrimage to the grave of the late James B. Chapman under the provisions of the Act of March 2, 1929, as amended May 15, 1930. Section 4 (a) of the Act has been amended so that it now reads in part as follows: "or any woman who stood in loco parentis to the deceased member of the military or naval forces for a period of not less than five years at any time prior to the soldier, sailor, or marine becoming eighteen years of age."

In order to satisfy legal requirements it will be necessary for you to furnish as proof of your relationship, in loco parentis, the affidavits of at least two persons not related to you.

In the event you consider yourself eligible under this amendment to make the pilgrimage it is requested that the enclosed form be completed and returned to this office in order that your eligibility may be determined. Under paragraphs 1 (c) and 1 (d) sufficient information should be included to permit an intelligible decision as to eligibility.

For The Quartermaster General.

Very truly yours,

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

Enclosures:  
Act - Amend.  
Forms - Env.  
mf

EST

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Chapman, James B. 636 B

July 8, 1930

Mr. Walter S. Chapman  
R. F. D. #3,  
Stony Point, N. C.

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress of March 2, 1929, together with an amendment thereto, approved May 15, 1930.

This office has no record of any person entitled under the Act mentioned to make a pilgrimage to the cemeteries in Europe as the mother or widow of the above named deceased service man. To complete the list of eligibles and to assure that, if the above named man is survived by a mother or widow entitled to make a pilgrimage she receive an invitation to do so, it is requested you answer the following questions in the space provided on this letter and return to this office in the enclosed envelope which requires no postage.

1. Is the deceased survived by a mother?

If so, give her name and address:

*no*

2. Is the deceased survived by a widow who has not remarried?

If so, give her name and address:

*no*

3. Is the deceased survived by any woman who stood in loco parentis to him according to the terms of Section 4 (a) of the enclosed Act as amended?

If so, give her name and address:

*yes*

*Mrs. W. S. Chapman*

*Stony point, N.C. R#1.*

For The Quartermaster General,

Very truly yours,

Enclosures:  
Envelope  
Act  
Amendment

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



*no loco*  
*9/8-185a*  
*BBB*

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

DATE 2/7/30

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
CHAPMAN, James B.	Pvt.1/cl	45114	MG Co. 16th Inf.	May 30/18

STATE	North Carolina	CTY. NO.	636	GRAVE	13	ROW	8	BLOCK	A
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	<u>Check relationship</u>	<u>Living</u>	<u>-</u>	<u>Deceased</u>
NAME	MOTHER	:	:	: <input checked="" type="checkbox"/>
AND	STEPMOTHER (For the year prior to commencement of service)	:	:	: <input type="checkbox"/>
ADDRESS	MOTHER THRU ADOPTION (For the year prior to commencement of service)	:	:	: <input type="checkbox"/>
	MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	:	:	: <input type="checkbox"/>
	WIDOW (Who has not remarried)	:	:	: <input type="checkbox"/>

*Single man*

*C 129933*

*2/11/30*

*(B)*

*Walter S. Chapman*

---

*R. 7-D-3*

---

*Stony Point*

---

*N. C.*

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

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO ~~QM 293-A-C~~  
Chapman, James B.

May 16, 1929.

Mr. Walter Chapman,  
RFD #3,  
Statesville, N. Car.

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 <sup>brother</sup> late Private James B. Chapman, Machine Gun Company, 16th Infantry, whose remains are now interred in the Somme American Cemetery, Bony, Aisne, 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.

QM 293 A-M  
Chapman, James B. -PFC-(SOM)

August 24, 1931.

Mrs. W. S. Chapman,  
Route # 1,  
Stony Point, N.C.

Dear Madam:

Reference is made to office letter of July 17, 1930, wherein you were requested to furnish affidavits in the event you considered yourself eligible to make a pilgrimage to the grave of the late Private first class James B. Chapman under the provisions of section 4 (a) of the Act of Congress of March 2, 1929, as amended, which reads in part "or any woman who stood in loco parentis to the deceased member of the military or naval forces for a period of not less than 5 years at any time prior to the soldier, sailor or marine becoming 18 years of age."

To date the affidavits have not been received and in order that the records may be completed, it is requested you advise whether or not you consider yourself eligible to make a pilgrimage under this provision of the law. A self-addressed envelope which requires no postage is enclosed for your convenience in replying.

In the event you consider yourself eligible and desire to make a pilgrimage, it is requested the affidavit forms sent you be completed by two persons not related to you and returned to this office. If you have misplaced the forms mentioned, another set will be mailed you at once upon request.

For The Quartermaster General,

Very truly yours,

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

Encl:  
Env.

LPH

0242

1931 AUG - 23 - PM 11:11  
OQMG M & R

July 17, 1930.

QM 293 A-M  
Chapman, James B. 836 LP

Mrs. W. S. Chapman,  
Route 1,  
Stony Point, N. C.

Dear Madam:

Information has been furnished this office which indicates that you may be eligible to make the pilgrimage to the grave of the late James B. Chapman under the provisions of the Act of March 2, 1929, as amended May 15, 1930. Section 4 (a) of the Act has been amended so that it now reads in part as follows: "or any woman who stood in loco parentis to the deceased member of the military or naval forces for a period of not less than five years at any time prior to the soldier, sailor, or marine becoming eighteen years of age."

In order to satisfy legal requirements it will be necessary for you to furnish as proof of your relationship, in loco parentis, the affidavits of at least two persons not related to you.

In the event you consider yourself eligible under this amendment to make the pilgrimage it is requested that the enclosed form be completed and returned to this office in order that your eligibility may be determined. Under paragraphs 1 (c) and 1 (d) sufficient information should be included to permit an intelligible decision as to eligibility.

For The Quartermaster General.

Very truly yours,

Enclosures:  
Act & Amend.  
Forms + Env.  
mf

1930 JUN 11 AM 11 33

DISPATCHED

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

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Chapman, James B. 636 B

July 8, 1930

Mr. Walter S. Chapman  
R. F. D. #5,  
Stony Point, N. C.

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress of March 2, 1929, together with an amendment thereto, approved May 15, 1930.

This office has no record of any person entitled under the Act mentioned to make a pilgrimage to the cemeteries in Europe as the mother or widow of the above named deceased service man. To complete the list of eligibles and to assure that, if the above named man is survived by a mother or widow entitled to make a pilgrimage she receive an invitation to do so, it is requested you answer the following questions in the space provided on this letter and return to this office in the enclosed envelope which requires no postage.

---

1. Is the deceased survived by a mother?

If so, give her name and address:

---

2. Is the deceased survived by a widow who has not remarried?

If so, give her name and address:

---

3. Is the deceased survived by any woman who stood in loco parentis to him according to the terms of Section 4 (a) of the enclosed Act as amended?

If so, give her name and address:

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For The Quartermaster General,

Very truly yours,

Enclosures:  
Envelope  
Act  
Amendment

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

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Chapman, James B.  
636

August 27, 1929.

Mr. Walter Chapman,  
RFD #3,  
Statesville, N. Car.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated May 16, 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  
Chapman, James B.

May 16, 1929.

Mr. Walter Chapman,  
RFD #3,  
Statesville, N. Car.

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 late Private James B. Chapman, Machine Gun Company, 16th Infantry, whose remains are now interred in the Somme American Cemetery, Bony, Aisne, 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. ~~4~~  
Act of Congress.  
Envelope.

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

QM 293 A-C

IN REPLY REFER TO \_\_\_\_\_

CHAPMAN, James B.- Private

January 28, 1927.

Mr. Walter Chapmen,  
Statesville, North Carolina.

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 overseas military cemetery is to be maintained by the United States for all time. The graves will be permanently marked by white headstones inscribed with the name, rank, division, organization, date of soldier's death and State from which he came. Headstones will be placed at all graves, as soon as possible, and without necessity 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 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,

*Edmond R. Tompkins*  
EDMOND R. TOMPKINS,  
Lt. Colonel, Q.M.C.,  
Assistant.

1 Incl.  
Record card.

*File  
7/14/27  
WPA*

25/560/LBM

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON, D. C.

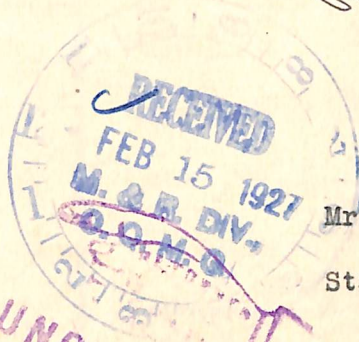
OFFICIAL BUSINESS

*Walter Chapman*



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

ADDRESS  
YOUR MAIL  
TO  
STREET AND  
NUMBER



FEB 3 1927

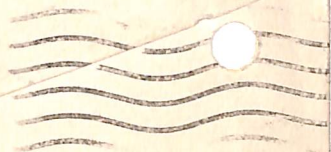
Mr. Walter Chapman,  
Statesville, North Carolina.

Unknown to Carrier  
2-3-4-5-6

UNCLAIMED

Not in Directory

STATESVILLE  
FEB 14  
1 20PM  
1927  
N.C.



Soldier's  Overseas  
Grave

Name ..... James B. Chapman, .....

Rank ..... Private .....

Organization ..... Machine Gun Company, 16th Infantry .....

Grave No. .... 27 ..... Row ..... 10 ..... Block ..... A .....

Cemetery ..... Somme American Cemetery .....

Location ..... Bony, Aisne, France, .....

350-6

Chapman,

James B.

45,114

(Surname.)

(Christian name in full.)

(Army serial number)

Pvt.

M G. Co, 16th Inf

(Rank and organization.)

State your relationship to the deceased.

sister

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)

Mrs. J. C. Beck

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Park Ave.

Salisbury, N. C.

Read carefully the letter accompanying this card.

Drawn by *PM*

350-6

1-19

REVIEWED

OSP SS.

*JW* 1-20-21

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

QM 293 A-C

January 28, 1927.

CHAPMAN, James B.- Private

Mr. Walter Chapmen,  
Statesville, North Carolina.

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 overseas military cemetery is to be maintained by the United States for all time. The graves will be permanently marked by white headstones inscribed with the name, rank, division, organization, date of soldier's death and State from which he came. Headstones will be placed at all graves, as soon as possible, and without necessity 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 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,

1 Incl.  
Record card.



EDMOND R. TOMPKINS,  
Lt. Colonel, Q.M.C.  
Assistant.

25/560/EYS

MM

COMPILATION OF DISPOSITION OF REMAINS DATA

File #63926

I. LOCATION INDEX CARD:

(a) Name CHAPMAN, James B. Ser. No. 45114
(b) Rank Pvt. Organization M.G.Co. 16th Inf.
(c) Date of death 5/30/18 (d) Cause of death DWRIA

TYP. JDB
CKR. J.A.

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

(a) Grave No. 3 Row Range 21e Tombe 17e Sec. - TYP. HAB
(b) Emerg. Address Miss Ella Chapman (sister) Taylorville, N.C.

III. Files of soldiers dying from contagious diseases

CKR.

IV. A. G. O. DISPOSITION CARD:

Date of receipt none

(a) Name Mrs. D.C. Beck (b) Relationship Sister
(c) Address Park Ave, Salisbury, N.C.
(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 Bm Date 8-25, 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 Pw Date 8-25, 1920.

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

Brother, Walter, S. Chapman
Salisbury, N.C., 10-11-19 requests
photo of grave

(a) Cancellation memos referred to? Yes M.O.M.

Examiner's Initials M.O.M. Date 8-28, 1920.

COUNTRY FRANCE CEMETERY No. 350 SHEET No. 6

FORM 115 G. R. S. Form No. 115 Amended Apr. 16, 1920. 3-7729
JAN 21 1921 m.B.

Make Form No. 114
rechecked
J.D. - 1-20-21

1/20 for transfer for concentration
Miss Chapman (686) 10-8-21
C.A.P.

SEE SUSPENSION REMARKS

OK
985

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 8/28 \_\_\_\_\_, 1920

*Par. #2 not to be returned (mex)*

IX. CORRECTIONS

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

X. SUSPENSION REMARKS: *B. W. R. Beneficiary - Walter Chapman  
(brother) Statesville, North Carolina 11-18-20*  
*11/27/20 - Form 120. Brother Walter Chapman, <sup>73 mds.</sup>  
Route 3, Statesville, N. C., requests body  
remain in France. 1/46/21 - Soldier not married.  
Letter to brother re father & mother - 12-10-20 F.  
Letter rec'd 1/14/21 with signatures of all brothers and sisters, requests  
body remain in France. Mother and father dead. 12-31-20 F. L.*

COMPILATION OF DISPOSITION OF REMAINS DATA

File #63926

I. LOCATION INDEX CARD:

(a) Name.... **CHAPMAN, James B.** ..... Ser.No... **45114** .....  
 (b) Rank.... **Pvt.** ..... Organization ... **M.G.Co., 16th Inf.** ..... TYP... **JDB** .....  
 Cause of ..... **FL** .....  
 (c) Date of death.. **5/30/18**.. death ..... **DWRIA** .....

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

(a) Grave No. **3** ..... ~~207~~ Range ... ~~18~~ **21e** ... ~~18~~ **17e** ... Tombe... Sect..... **--** ..... TP... **HAB** .....  
 (b) Emerg. Address... **Miss Ella Chapman (sister) Taylorville, N.C.** .....

III. Files of soldiers dying from contagious diseases... NO. CARD... CKR... JCW

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

*A.P. Card - Mrs. DeBeck (sister) Park Ave.,  
 Salisbury, N.C. desires remains to be  
 left in France. - a.p. 1/21/21*

V. Following advice forwarded to Europe by (letter of transmittal on 8/28<sup>192</sup>1920

*Par. #2, Not to be returned (MCH)*

VI. Form 115 forwarded to G.R.S. Hoboken, N.J. ....192

VII. SUPPLEMENTARY REQUESTS

Date of Relationship  
 and Source ..... and name ..... Desires ..... Action taken ..

VIII. Form 115 received from G.R.S. Hoboken, N.J. ....192

COUNTRY **France** CEMETERY NO. **350** SHEET NO. **6**  
 G.R.S. FORM 115-A  
 August , 1920

S/666/LML

JAN 21 1921

*MBJ-21-21*

*See form 115 -  
 MCH  
 10-8-21-CAR*

To be prepared in triplicate.

DATE September 7, 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 CHAPMAN, James B. 10. Name \_\_\_\_\_  
 2. No. 45114. 11. No. \_\_\_\_\_  
 3. Rank Private. 12. Rank \_\_\_\_\_  
 4. Org. M.G. Co., 16th Infantry. 13. Org. \_\_\_\_\_  
 5. D.D. May <sup>30</sup> 28th, 1918. 14. (a) D.D. \_\_\_\_\_  
 6. C.D. Wounded in action. (b) D.B. \_\_\_\_\_

Discrepancy found upon disinterment

7. Grave No. 18 Sec. \_\_\_\_\_ 15. Grave No. \_\_\_\_\_ Sec. \_\_\_\_\_  
 8. Plot American. Row \_\_\_\_\_ 16. Plot \_\_\_\_\_ Row \_\_\_\_\_  
 9. \_\_\_\_\_ 17. No discrepancy

18. Cemetery Town Cemetery. 19. Commune or town BEAUVAIS.  
 20. Dept: or County Oise. 21. Country France.  
 22. G.R.S. Hdqrs. Code No. 350  
 23. Disinterred (Date) Sept. 7, 1921 By H. T. Geiler

24. Inscription on grave marker:

Name James B. Chapman Serial No. \_\_\_\_\_  
 Rank Private Organization M.G. Co. 16th Infantry

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

Henry Hoffmann  
 Signature Junior Technical Assistant  
Henry Hoffmann

## 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).

This body previously reburied by Field Section. Tag found attached to blanket. GRS strip and bottle record also found. - Both agree with form. Metal plate attached to blanket read: "Chapman, James B. Decede May 30, 1918"

27. Condition of body Badly decomposed. Features unrecog. Disc on body-inscription agrees with form.  
 28. Nature of burial Wooden box. Blanket.

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? \_\_\_\_\_

30. Body prepared and placed in casket: Date Sept. 7, 1921 By H. T. Geiler31. Casket sealed by H. T. Geiler

Signature of Embalmer, (Supervisor)

H. T. Geiler  
H. T. Geiler

AUDITED BY  
1921-3-9-25

SHIPMENT. (Show actual marking of box.) Box No. C-1799

32. Designation of body:

Name CHAPMAN, James B. Serial No. 45114

Rank Private. Organization M.G. Co., 16th Infantry.

33. Consigned to:

Name of Permanent Cemetery Cemetery #636, Bony, (Aisne).

34. Casket boxed and marked (Date) September 7, 1921 By H. T. Geiler

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 R.S. Williams, Ist.Lt. QMC

36. Remarks

37. Shipped from point of Operation: (Date) September 7, 1921

To point of Concentration Amiens, (Somme)

Convoyer Frank Atwell Signature Shipping Officer R.S. Williams, Ist.Lt. QMC

38. Received at Railhead or Point of Concentration: Date Sept. 7, 1921

By G.R.S. Representative Jos. J. McConville, Capt. QMC

39. Shipped from Railhead or Point of Concentration: Date 14 SEP 1921

To Permanent Cemetery No. 636, Bony, (Aisne)

Convoyer Sidney Stewart Signature Shipping Officer Jos. J. McConville, Capt. QMC

40. Received: Date 17 SEPT 1921

G.R.S. Representative

41. Reinterred August 24, 1922

(Date)

42. Grave No. 27 Section

43. Plot Block A Row 10

G.R.S. Representative H.S. Smith, Chaplain.

Place BEAUVAIS (Oise)

# REPORT OF DISINTERMENT AND REBURIAL

Date September 7, 1921.

1. REMAINS OF CHAPMAN, James B. SERIAL NUMBER 45114

RANK Pvt. ORGANIZATION M.G.Co., 16th Inf.

2. Disinterred (date): From (give complete location):

September 7, 1921, Gr. 18, Plot American, Town Beauvais (Oise) #350,

By: Group 3 Unit Sec. #8

3. Reburied (date): Aug. 24, 1922 In (give complete location):

Grave 27 Row 10 Block A, Cem. 636, Bony (Aisne)

By: Group Reburial Unit \_\_\_\_\_ Nature of reburial \_\_\_\_\_

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

Wooden box, blanket, Badly decomposed. Features unrecognizable.

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

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

This body previously reburied by field section; tag found attached to blanket. GRS strip and bottle record also found, both agree with form. Metal plate also attached to blanket read "Chapman, James B., decede May 30, 1918."

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

(a) Height (actual measurement) Impossible to determine

(b) Weight (estimated) Impossible to estimate

(c) Hair—Color None

Quantity \_\_\_\_\_

Characteristics \_\_\_\_\_

(d) Hair on face—Color None visible

Location \_\_\_\_\_

Quantity \_\_\_\_\_

(e) Permanent marks on body (old scars, peculiarities, or missing parts) None discernible

(f) Wounds or missing parts (received at time of casualty)

None visible

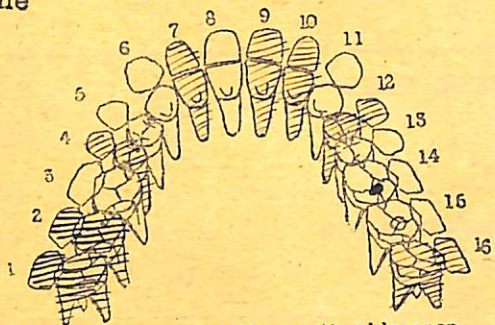
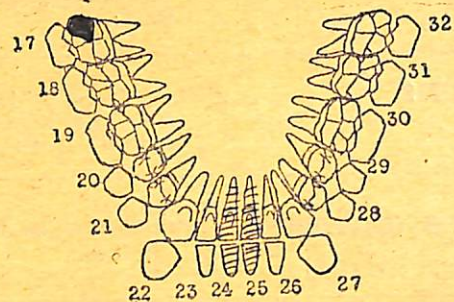


Diagram represents the mouth wide open.



(1&2 MAD, 4 MAD, 7 MAD, 9&10 MAD, 12 MAD, 14 SF, 15 Cav., 16 MAD, 17 SF, 24&25 MAD.)

7. Disinterment supervised by H. T. Geiler

H. T. Geiler, Sup. Emb.

Henry Hoffman, Checker.

Approved: R. S. Williams

(Title) R. S. Williams, 1st Lt., M.C.

8. Reburial supervised by D. E. Lowry

D. E. Lowry, 1st Lt. QMC.






Approved: H. S. Smith

(Title) H. S. Smith, Chaplain

## 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.

<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.

**FILE**

CEMETERIAL DIVISION  
REGISTRATION SECTION

December 21, 1921

MEMO FOR: Cards Department.

1. CASE OF:

M. G. Co. 16th Inf.  
ORGANIZATION (Old)  
CHAPMAN 54114 James B. Pvt.,  
(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.	1/14/21	350	D- 30092
2nd Reb.			D-
3rd Reb.			D-

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

BY: Miss Cannon

Card.  
(Department)

5 x 8 card was sent to file.

Corrections made  
on Organization  
File Card:

By MLC  
S/3324/LML



Recorded, Cemeterial Div., C.Q.M.G.  
File 293.8 #63926  
Chapman, James B.

C O P Y

WAR DEPARTMENT  
Office of the Quartermaster General  
Washington

December 10, 1920.

File No. 293.8 Reg. Sec. Cem. Div.  
(CHAPMAN, James B.)

FILE

Mr. Walter Chapman,  
Route #3,  
Statesville, N.C.

Dear Sir:-

Referring to your request that the body of your late brother, Private James B. Chapman, Serial No. 45114, M. G. Co. 16th Inf., remain in France, you are advised that the Department can honor your wishes only in the event that you are the legal nearest of kin of the deceased.

It is therefore requested that you inform this Department definitely whether or not the deceased is survived by father and mother, and if so, that you furnish the name and address of each such relative.

The Department wishes to convey to you its assurance of sympathy in your bereavement.

An immediate reply is requested using the enclosed penalty envelope which requires no postage.

By authority of the Quartermaster General:

CHARLES C. PIERCE,  
Lieut. Colonel, U.S.A.  
Chief, Cemeterial Division.

BY:

F. B. DANIEL,  
1st Lieut., Q.M.G.

OSP:SS  
(1 Encl.)  
C. & C. DEPT.

Copied by L. Gros s.

(OVER)

REVIEWED  
OSP SS.

answer to letter on other side.

Father Mother deceased. Nearest Relative Bros and sisters it is requested that the body of James B. Chapman 45114 M. G. Co. remain in france.

Sisters living  
Ida Chuble  
Ella Beck  
Neala Martin

Brothers  
Joe Chapman  
Charl. "  
Jake "

By John and Walter Chapman.

Copied by L. Cross

Recorded, Cemeterial Div., Q.M.G.  
File 293.8 #63926  
Chapman, James B.

COPY  
Answer to letter of January 10, 1920

WAR DEPARTMENT  
Office of the Quartermaster General  
Washington  
Father Mother deceased. Nearest relatives and sisters if in France. requested that the body of James B. Chapman & 5114 M. G. Co. remain in France.

December 10, 1920  
Sisters Mary Ida Annie Neale  
Brothers Joe Chapman  
File No. 293.8 Reg. Sec. Com. Div.  
(CHAPMAN, James B.)

By John and Walter Chapman.  
Mr. Walter Chapman,  
Route #3,  
Statesville, N.C.

Dear Sir:-

Referring to your request that the body of your late brother, Private James B. Chapman, Serial No. 45114, M. G. Co. 16th Inf., remain in France, you are advised that the Department can honor your wishes only in the event that you are the legal nearest of kin of the deceased.

It is therefore requested that you inform this Department definitely whether or not the deceased is survived by father and mother, and if so, that you furnish the name and address of each such relative.

The Department wishes to convey to you its assurance of sympathy in your bereavement.

An immediate reply is requested using the enclosed penalty envelope which requires no postage.

By authority of the Quartermaster General:

CHARLES C. PIERCE,  
Lieut. Colonel, U.S.A.  
Chief, Cemeterial Division.

BY: F. B. DANIEL,  
1st Lieut., Q.M.G.

OSP:SS  
(1 Encl.)  
C. & C. DEPT.

Copied by L. Cross.

(OVER)

REVIEWED  
OSP SS.

copy  
answer to letter on other side

WAR DEPARTMENT

Office of the Quartermaster General  
Father Mother deceased. Nearest Relative Bros and sisters it is requested that the body of James B. Chapman 45114 M. G. Co. remain in France.

Sisters living	December 10, 1918	Brothers	File No.
Ida Chible		Joe Chapman	222.8 Reg. Sec. G. M. G.
Ella Beck		Charles	(CHAPMAN, James B.)
Neala Martin		John	

By John and Walter Chapman.

Mr. Walter Chapman,  
Route #3,  
Statesville, N.C.

Dear Sir:-

Referring to your request that the body of your late brother, Private James B. Chapman, Serial No. 45114, M. G. Co. 1st Inf., remain in France, you are advised that the Department can honor your wishes only in the event that you are the legal nearest of kin of the deceased.

It is therefore requested that you advise this Department definitely whether or not the deceased is survived by father and mother, and if so, that you furnish the name and address of each such relative.

The Department wishes to convey to you its assurance of sympathy in your bereavement.

An immediate reply is requested as the enclosed penalty envelope which requires no postage.

By authority of the Quartermaster General:

CHARLES C. FLETCHER,  
Lieut. Colonel, U.S.A.,  
Chief, Cemetery Division.

P. B. DANIEL,  
1st Lieut., G.M.G.

BY:

022:22  
(1 Incl.)  
G. & U. DEPT.

Copied by J. Cross.

REVIEWED  
022 22

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
DIRECTOR OF PURCHASES AND STOCKS  
WASHINGTON

Recorded, Cemeterial Div., O. O. M. G.  
Recorded, Cemeterial Div., O. O. M. G.  
File # 29 3.8 # 6392.6

Co

File No. 293.8 Reg. Sec. Cem. Div.  
(CHAPMAN, James B.)

December 10, 1920.

1173

Mr. Walter Chapman,  
Route # 3,  
Statesville, N.C.

Dear Sir:-

Referring to your request that the body of your late brother, Private James B. Chapman, Serial No. 45114, M. G. Co. 16th Inf., remain in France, you are advised that the Department can honor your wishes only in the event that you are the legal nearest of kin of the deceased.

It is therefore requested that you inform this Department definitely whether or not the deceased is survived by father and mother, and if so, that you furnish the name and address of each such relative.

The Department wishes to convey to you its assurance of sympathy in your bereavement.

An immediate reply is requested using the enclosed penalty envelope which requires no postage.

By authority of the Quartermaster General:

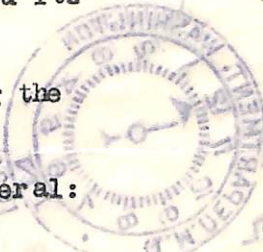
CHARLES C. PIERCE,  
Lieut. Colonel, U.S.A.,  
Chief, Cemeterial Division.

BY: *F. B. Daniel*

F. B. DANIEL,  
1st Lieut., Q.M.C.

OSP:SS  
(1 Encl.)  
C. & C. DEPT.

RECEIVED  
DEC 5 1920  
MAILING TO OFFICE OF THE QUARTERMASTER GENERAL  
CEMETERIAL DIVISION



*Chapman James B.*

*Over*

POSTAGE WILL BE PAID BY ADDRESSEE  
ADDRESS ONLY TO THE  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

File No.

(CHAPMAN, James B.)  
S.M.'s Reg. Sec. Gen. Div.

December 10, 1920

Mr. Walter Chapman  
M.C. Co. - Remains  
in France

Father mother  
deceased. nearest  
Relative Bros and  
sister it is  
Requested that the  
Body of James B.  
Chapman - US 11th  
M.C. Co. - Remains  
in France.

Sister living  
Elda - Chubbe -  
Ella - Beck -  
Mala - Martin

Brothers  
Joe Chapman  
Charl. - - - -  
Jake - - - -  
By - John and  
Walter Chapman



RECEIVED.  
DEC 27 1920

CEMETERY DIVISION  
OVERSEAS PROJECT SUB-SEC.



BY: [Signature]  
Chief, Cemetery Division

1st Lieut. J. B. C.

[Handwritten signature]

293.8 Reg. Sec. Com. Div.  
(CHAPMAN, James B.)

December 10, 1920.

Mr. Walter Chapman,  
Route # 3,  
Statesville, N.C.

Dear Sir:-

Referring to your request that the body of your late brother, Private James B. Chapman, Serial No. 45114, M. G. Co. 16th Inf., remain in France, you are advised that the Department can honor your wishes only in the event that you are the legal nearest of kin of the deceased.

It is therefore requested that you inform this Department definitely whether or not the deceased is survived by father and mother, and if so, that you furnish the name and address of each such relative.

The Department wishes to convey to you its assurance of sympathy in your bereavement.

An immediate reply is requested using the enclosed penalty envelope which requires no postage.

By authority of the Quartermaster General:

CHARLES C. PIERCE,  
Lieut. Colonel, U.S.A.,  
Chief, Cemeterial Division.

BY:

F. B. DANIEL,  
1st Lieut., Q.M.C.

OSP:SS  
(1 Encl.)  
C. & C. DEPT.

Noted on Form No. 116

Date

12-10-207

MAILED  
44  
DEC 11 1920  
OVERSEAS PROJ. SEC.  
CEMETERIAL DIVISION.

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

GRAVES REGISTRATION SERVICE

WASHINGTON

350 - 6

*Rush answer.*

NOV 23 1920

FROM: Chief, Graves Registration Service, Q. M. C.

To: Mr. Walter Chapman, Statesville, N.C.

SUBJECT: Remains of Pvt. James B. Chapman, Serial Number 45114.

The records of this office show that you have requested that his body not expressed your desire regarding disposition of remains.

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

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

By authority of the Quartermaster General.

CHARLES C. PIERCE,  
Major, U. S. A.

*Noted on Form No. 115  
Date 12/6/20 - P*

If all blank spaces below are not filled out, it will necessitate a return of this paper and a **SERIOUS DELAY** in the shipment of this body. State in each case **WHETHER** these relatives are **STILL LIVING**.

	NAME OF—	NO. AND STREET.	TOWN.	STATE.
→	Soldier's widow	<i>Soldier was not married</i>		
→	Soldier's children. (Name oldest first.)	1		
		2		
		3		
→	Father			
→	Mother			
→	Brothers. (Name oldest first.)	1		
		2		
		3		
→	Sisters. (Name oldest first.)	1		
		2		
		3		

Date *Nov-27-1920* Signature *Walter Chapman*

Address *Statesville N.C. Route 3.* Relationship *Brother*

IMPORTANT.—CAREFULLY read instructions before filling out this paper.

*Sm*

Washington, D.C., 1920.

I, the undersigned, am the Brother and nearest living relative of the within-named

(Relationship.)

soldier, and desire the following disposition of his remains, viz:

(Strike out all except the one showing the disposition desired.)

1. As stated on first page of this sheet.

2. ~~To be returned to the U. S. and shipped to~~

(Name.)

(R. R. station.)

(State.)

3. ~~To be returned to the U. S. and buried in~~

National Cemetery.

4. To remain in Europe, for burial in a permanent American Cemetery.

Signature

Walter Chapman

INSTRUCTIONS FOR FILLING OUT.

1. If definite instruction as to the disposition of a body are not received from the nearest relative within two weeks of its arrival at New York, burial will be made without further notice in the World War Section of Arlington National Cemetery.

2. The transfer of bodies will be made ENTIRELY at Government expense.

3. This paper **MUST BE SIGNED BY THE PERSON WHO IS THE NEXT** of kin **IN THE ORDER** shown in the square on the other side of this sheet.

4. 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.

5. 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.

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

7. 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.

8. You are requested to return this paper AT ONCE in order to avoid delay in the case of this body.

9. Use the inclosed envelope—pay no postage.

WASHINGTON

GRAVES REGISTRATION SERVICE

380 - 2

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

WAR DEPARTMENT

Critchett

OFFICE OF THE QUARTERMASTER GENERAL  
CEMETERIAL DIVISION  
OWI EAS PROJECT SUB-SECTION

*Please Rush*

NAME OF DECEASED SOLDIER

CEMETERY NO.

DATE

Chapman, James B. Pvt.

350

- 6

Nov. 8, 1920

SERIAL NUMBER

*Adjustment Made*

*DEC 16 1920*

*63926*

*File No.* M.G. Co. 16th Inf.

*C-129933*

45114

Date of death - 5-30-18

WAR RISK INSURANCE INFORMATION

*Washington*  
*Noted on Form No. 116*  
*Date 12/6/20 - P.*

DATE 11/12/20

NAME OF BENEFICIARY

RELATIONSHIP

Mr. Walter Chapman

Brother

Address

Statesville, North Carolina

REVIEWED  
OSP SS.

**FILE**

S709/MB

*T.*

*B*

Critchett

OFFICE OF THE QUARTERMASTER GENERAL  
CEMETERIAL DIVISION  
OVERSEAS PROJECT SUB-SECTION

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NAME OF DECEASED SOLDIER	CEMETERY NO.	DATE
Chapman, James B. Pvt.	350 - 6	Nov. 8, 1920

---

SERIAL NUMBER	ORGANIZATION
45114	M.G. Co. 16th Inf.

---

Date of death - 5-30-18

---

---

WAR RISK INSURANCE INFORMATION

DATE \_\_\_\_\_

NAME OF BENEFICIARY

RELATIONSHIP

---

Address \_\_\_\_\_

---

8709/MB

AUG 30 1920  
350 - 6

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

als

FROM: Chief, Graves Registration Service, Q. M. C.

TO: Mrs. D. C. Beck, Park Ave., Salisbury, N.C.

SUBJECT: Remains of Pvt. James B. Chapman, Ser.No. 45114, M.G.Co. 16th Inf.

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 correct them. Make corrections on reverse side of this sheet.

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

By authority of the Quartermaster General.

CHARLES C. PIERCE,  
Major, U. S. A.

If all blank spaces below are not filled out, it will necessitate a return of this paper and a SERIOUS DELAY in the shipment of this body. State in each case WHETHER these relatives are STILL LIVING.

NAME OF—	INSTRUCTIONS FOR RETURN	NO. AND STREET	TOWN.	STATE.
Soldier's widow				
Soldier's children. (Name oldest first.)	1			
	2			
	3			
Father				
Mother				
Brothers. (Name oldest first.)	1			
	2			
	3			
Sisters. (Name oldest first.)	1			
	2			
	3			

Date

Signature

Address

Relationship

IMPORTANT.—CAREFULLY read instructions before filling out this paper.

Address \_\_\_\_\_

City \_\_\_\_\_, 1920.

I, the undersigned, am the \_\_\_\_\_ and nearest living relative of the within-named  
(Relationship.)

soldier, and desire the following disposition of his remains, viz:

(Strike out all except the one showing the disposition desired.)

1. As stated on first page of this sheet.

2. To be returned to the U. S. and shipped to \_\_\_\_\_ (Name.)

(R. R. station.)

(State.)

3. To be returned to the U. S. and buried in \_\_\_\_\_ National Cemetery.

4. To remain in Europe, for burial in a permanent American Cemetery.

Signature \_\_\_\_\_

**INSTRUCTIONS FOR FILLING OUT.**

1. If definite instruction as to the disposition of a body are not received from the nearest relative within two weeks of its arrival at New York, burial will be made without further notice in the World War Section of Arlington National Cemetery.

2. The transfer of bodies will be made ENTIRELY at Government expense.

3. This paper MUST BE SIGNED BY THE PERSON WHO IS THE NEXT of kin IN THE ORDER shown in the square on the other side of this sheet.

4. 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.

5. 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.

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

7. 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.

8. You are requested to return this paper AT ONCE in order to avoid delay in the case of this body.

9. Use the inclosed envelope—pay no postage.

WASHINGTON  
SERVICES REGISTRATION SERVICE  
OFFICE OF THE GOVERNMENT GENERAL OF THE ARMY  
WAR DEPARTMENT

(Please)  
MAILING INSTRUCTIONS  
U. S. DEPARTMENT OF THE ARMY

320 - 2  
MAY 20 1920

Reg. Cards.

File No.

June

1919

G.R.S. Form No. 8: Central Records Liaison.

Memo. For: G.R.S. representative, C.R.O.

Subject: Information required for G.R.S.

1. Items checked are to be completed:

- Surname: Chapman.
- Number: -
- First Name: James.B.
- Rank: Pvt.
- Company: M.G.Co.
- Organization: 16th Inf.
- Date of Death:
- Cause:
- Place:

Location of hospital:

Number " "  
Class " "

- Relative:
- Relationship:
- Address:

- Authority:
- Cablegram No.:
- Telegram from:

dated:

- Reported to Washington:
- C.C. Nos:

(Underscore the "official" C.C.)

- Remarks:
- Show present status on reverse side.

Burial notification returned, advise correct address of CHARLES C. PIERCE,  
Lieut.-Colonel, Q.M.C., U.S.A.

Initials of Reporter:



Address reply to  
DIRECTOR OF PURCHASE & STORAGE  
Munitions Building

WAR DEPARTMENT  
OFFICE OF THE DIRECTOR OF PURCHASE AND STORAGE  
WASHINGTON

63926  
hhh

293.3 (Chapman, James B., Pvt.)G.R.S.

Oct. 18, 1919.

Graves Registration Service.

Mr. Walter S. Chapman, Statesville, N. C.

Location of Grave.

1. Replying to your letter of the 11th instant I have to advise that the records of this office show Private James B. Chapman, #45114, Machine Gun Co., 16th Infantry, died of wounds received in action May 30, 1918, and buried in Grave #3, Town Cemetery, Beauvais, Oise.

By authority of the Quartermaster General, Director of Purchase and Storage.

Charles C. Pierce,  
Colonel, Q. M. C.,  
Chief, Graves Registration Service.

By:

Charles J. Wynne,  
Captain, Q. M. C.,  
Graves Registration Service.

G. R. S. MAILED

OCT 18 1919

REVIEWED  
OSP SS.

63926

Grave Location.

Statesville, N.C.  
Oct. 11, 1919

Graves Registration Service,  
War Department,  
Washington, D.C.

In re; James B. Chapman, Pvt.,  
Machine Gun Co. 16th Infantry  
Died of wounds received in  
action 5-30-18.

Sirs;

I am the brother and next of kin to the above named man. I shall be very grateful if you can furnish me with any information as to the exact location of my brother's grave, and any other information you can send me.

Very truly yours,

Walter S. Chapman,  
Statesville, N.C.

REVIEWED  
OSP SS.

REVIEWED  
OSP SS.

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

Date Oct. 16th. 1919

FROM: - INQUIRY BRANCH.

Please furnish information as checked (✓) below regarding the following soldier:

NAME Chapman, James B.

Serial Number 45114

RANK Private.

ORGANIZATION Machine Gun Co., 16th. Inf.

NO.	QUESTION	REPLY
1.	Do particulars of soldiers given above agree with Records?	1. Yes.
2.	Date of Death.	2. 5-30-18
3.	Cause and place of death.	3. DWRIA
4.	Number of Casualty VCablegram.	5. 5-30-18
5.	Date buried.	Original burial.
6.	Grave Location. (a) Complete record required. (b) Name of Cemetery or Commune only required. (c) Note reinterments.	6. Grave #3, Town Cty. Beauvais, Oise Cty. 350
7.	Who reported burial?	
8.	Confirmed by G.R.S.?	
9.	Report as to Grave Marker.	
10.	Identification Tags: (a) Buried with body? (b) Attached to grave marker?	
11.	Complete Emergency Address?	11. Miss Ella Chapman, (Sister) Taylorville, N. C.
12.	Has above been notified? (Give date)	12. 4-23-19.
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.?	
15.	Inquiry made by?	

REVIEWED  
OSP SS.

Released by Information Control Dept. Directory  
Cards 5 x 8  
Cards 4 x 6

N.B. All Proper names to be typewritten, or printed in PLAIN BLOCK LETTERS.

G.R.S. Form No. 113  
Reply to G. L. Inquiry.

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
GRAVES REGISTRATION SERVICE  
WASHINGTON, D. C.  
October 28, 1919

Walter S. Chapman,  
Statesville, North Carolina.

1. In reply to your inquiry we beg to say that the records of the Graves Registration Service contain the following information as to grave location:

Case of: Private James B. Chapman  
16th Infantry, Machine Gun Co.

Place of burial: Town Cemetery  
Beauvais, Department of Oise.  
Grave #3, Range 21e, Tombe 17e.

2. The grave has been registered and suitably marked for present purposes, pending the adoption of a more permanent monument by the National Fine Arts Commission, which now has the matter under consideration.

3. While it is a sad duty on our part to convey information concerning the burial of men who were our valient comrades, it is a satisfaction to answer the queries of those who suffer so grievously by the casualties of War.

By authority of the Quartermaster General:

REVIEWED  
OSP SS.

CHARLES C. PIERCE,  
Colonel, Q. M. Corps,  
Chief, Graves Registration Service.

/vme

63926

AG 201 (Chapman, James B.) DR 1st Ind.


OKB/2-201

War Dept., A. G. O., October 23, 1919. - To the Chief, Graves  
Registration Service, Washington, D. C.

1. Inviting attention to the foregoing communication and  
for reply direct, relative to the location of the grave of James  
B. Chapman, a former private 1st class of Machine Gun Company,  
16th Infantry.

2. Mr. Walter S. Chapman has been advised of this reference.

By order of the Secretary of War:

  
Adjutant General.

REVIEWED  
OSP SS.



63926

AG 201 (Chapman, James B.) DR 1st Ind.

OKB/2-201

War Dept., A. G. O., October 23, 1919. - To the Chief, Graves  
Registration Service, Washington, D. C.

1. Inviting attention to the foregoing communication and  
for reply direct, relative to the location of the grave of James  
B. Chapman, a former private 1st class of Machine Gun Company,  
16th Infantry.

2. Mr. Walter S. Chapman has been advised of this reference.

By order of the Secretary of War:

F. R. Brown.

Adjutant General.

REVIEWED  
OSP SS.

1345

OKB/2-201

AG 201 (Chapman, James B.) DR 1st Inf.

War Dept., A. G. O., October 22, 1919. - To the Chief, Graves  
Registration Service, Washington, D. C.

1. Inviting attention to the foregoing communication and  
for reply direct, relative to the location of the grave of James  
B. Chapman, a former private 1st class of Machine Gun Company,  
10th Infantry.

2. Mr. Walter S. Chapman has been advised of this reference.

By order of the Secretary of War:

W. H. Brown.

Adjutant General.



6,3926  
O-4901 Chapman, James B.

Statesville, N.C.  
Oct. 11.1919.

Casualty Division,  
Adjutant General of the Army,  
Washington, D.C.

In re; James B. Chapman, Pvt.,  
Machine Gun Company, 16th Inf.  
Died of wounds received in  
action 5-30-18.

Dear Sir;

I am the brother of the above named man. On March  
4, 1919, I received notice of his death. Can you furnish me with  
any further details as to his death? Any information that you  
can send me will be gratefully received.

Very truly yours,

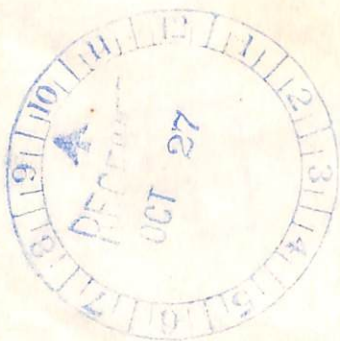
Walter S. Chapman,  
Statesville, N.C.

18 RECD A G O. OCT 13 1919

7 REC'D RECORDS BR. A. G. O. OCT 14 1919

REC'D CAN  
OCT 16 1919

REVIEWED  
OSP SS.



OCT 27 1900

WAR DEPARTMENT

GRAVES REGISTRATION SERVICE  
American Expeditionary Forces

OFFICIAL BUSINESS

63926



RETURNED TO  
UNCLAIMED  
SALISBURY, N.C.



REVIEWED  
OSP SS.

Miss Birch Chapman,  
Taylorville,  
N.C.

~~Mrs Dan Beck  
36 High,  
Salisbury, N.C.~~  
Not for N.C.,  
Salisbury, N.C.

RECEIVED  
29 Mai 1915  
O.C.G.M.  
G.R.S.

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

Date 10-27-19.

FROM:- INQUIRY BRANCH.

Please furnish information as checked (✓) below regarding the following soldier:

NAME Chapman, Jas. B.

Serial Number

RANK Pvt.

ORGANIZATION 16th Inf. Machine Gun Co.

NO.	QUESTION	REPLY
1.	Do particulars of soldiers given above agree with Records?	/ Ser-no. <u>#45114</u>
2.	Date of Death.	
3.	Cause and place of death.	
4.	Number of Casualty VCablegram.	
5.	Date buried.	
6.	Grave Location. (a) Complete record required. (b) Name of Cemetery or Commune only required. (c) Note reinterments.	6 - <u>Crng - burial</u> <u>Grave #3, Range 21e,</u> <u>Tombe 17e, Town Cty, #350</u> <u>Beauvais, Oise,</u> <u>Beauvais</u>
7.	Who reported burial?	
8.	Confirmed by G.R.S.?	
9.	Report as to Grave Marker.	
10.	Identification Tags: (a) Buried with body? (b) Attached to grave marker?	10-a <u>not-given</u> 10-b <u>not-given</u>
11.	Complete Emergency Address?	11- <u>Miss Ella Chapman</u> <u>Taylorville, N.C.</u>
12.	Has above been notified? (Give date)	12- <u>4-23-19</u>
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.?	
15.	Inquiry made by?	

Released by Information Control  
Dept. Directory  
Cards 5 x 8  
Cards 4 x 6

**REVIEWED  
OSP SS.**

N.B. All Proper names to be typewritten, or printed in PLAIN BLOCK LETTERS.