

3008

FULL NAME *CLARK, Patrick* *Ad. Sig.* ✓ JAN 15 1926

RANK *Private* ✓ SERIAL *1238378* ✓

DIVISION & ORGANIZATION *H.G. Co., 109th Infantry* ✓ *28 div* ✓

DATE OF DEATH *Aug 18, 1918* ✓

STATE FROM WHICH HE CAME *Pan.* ✓

MEDALS OR DECORATIONS AWARDED *none found* ✓

FINAL GRAVE LOCATION.....	26	4	6
	Date	Grave	Row
			Block

..... 608
Cemetery

Rec'd World War Div.
5 NOV 30 1927

3 A.G.O.
JAN 16 1926
WORLD WAR DIV.

✓
GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF *PR*

Blank - 1238378 - Patrick
.....
(Surname.) (Number.) (First Name and Initials.)

Priv - M.G. Co. 109th Inf.
.....
(Rank.) (Organization.)

DATE OF BURIAL..... *August 16th 1918*

PLACE OF BURIAL..... *Shawmeyer Farm, Pa.*
(Give Cemetery, Town and Department.) Map reference must specify clearly what map is used.

In valley at 200,755 - 245,55
.....

(Firm map - 120,000)
.....

Dept. name
.....

GRAVE NUMBER.....

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

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:
.....
.....

REPORTED BY:

Chas. F. ... Capt. ... 109th Inf.
.....
(Signature and Rank of Reporting Officer.)

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

Co. M.G. 109th Infantry
28th Div

CLARK, Patrick - Pvt 1238378

In reference to Patrick Clark was killed in action in the battle of the Vesle near Fismes France on the 17th day of Aug. 1918 at 4.30 PM While resting during the day in a dugout with Ernest Ganer a direct hit by shell fire severely wounded them and while being taken to the first aid station he died His last words were (Oh White help me) and then died He was buried where he was killed on the hill south last of Fismes

Informant: WHITE, Charles E. - Corp 1238459
Co. M.G. 109th Infantry
Home: 230 So River St. Sayre Pa

Searcher: J. R. MAY - 1st Lt. Infantry

SH

FILE

7/23/30
15

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

QM 293 A-C

IN REPLY REFER TO _____

SUBJECT: Investigation.

TO: The Adjutant General,
Washington, D. C.

1. To assist this office in an investigation being instituted to locate the grave of the soldier named above, it is requested that you furnish as much of the following information, as possible:

- (a) Local Board and Mobilization dental charts,
- (b) Any comrades statements on file as to the death and burial place.
- (c) Places of death and burial, if of record,
- (d) Chaplain's burial report.
- (e) Names and addresses of

For The Quartermaster General:

26/180/EYS

REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name Patrick Clark

Number: 1238378

Rank: Pvt.

Organization: M.G.Co 109th Inf.

Disinterment and Reburial made by Group 1 Unit 304

Disinterred (Date) Apr.21, 1919 From: (Give complete location)

From 285.35 N 206.0 E Fismes (Marne)

Map #34 Reims S.W. Grave #1, Sketch #192-Forsberg

Reburied (Date) Apr.21, 1919 in: (Give complete location)

Grave No.2 Section B Cemetary #18 Fismes (Marne)

Map #34 Reims S.W. 286.25 N 205.75 E

617

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

Buried 2 feet deep- Body in fair condition

Was one identification tag found upon the body? Yes and one on cross

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

CONFIRMED No. D

20587

Note:

If upon disinterment, effects are found upon the 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: Sgt. Elmer Ulseth 1st. Lieut. Oscar W. Forsberg

7/1/00

C.O. Group 1 Unit 304



DEPT. OF AGRICULTURE

WASHINGTON

DC

TO: DIRECTOR, BUREAU OF PLANT INDUSTRY
FROM: [Illegible]

SUBJECT: [Illegible]

DATE: [Illegible]

RE: [Illegible]

BY: [Illegible]

FOR THE DIRECTOR: [Illegible]

BY: [Illegible]

DATE: [Illegible]

RE: [Illegible]

BY: [Illegible]

DATE: [Illegible]

Place Fismes, Marne.

REPORT OF DISINTERMENT AND REBURIAL

Date March 11, 1921

1. REMAINS OF Clark, Patrick SERIAL NUMBER 1238378

RANK Pvt. ORGANIZATION M.G. Co. 109th Inf.

2. Disinterred (date): March 11, 1921 From (give complete location): Gr. 2 Sec. B Pt. 1

By: Group Avery Unit Section NO. 7 AGRS.

3. Reburied (date): March 11, 1921 In (give complete location): Gr. 2 Sec. B pt. 1

By: Group Avery Unit Sec. 7 Nature of reburial pine box & burlap.

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

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

(b) Other means of identification found upon disinterment, and general remarks: Scapular, crucifix and sacred heart medal found on body.

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

(a) Height (actual measurement) Impossible to determine

(b) Weight (estimated) do.

(c) Hair—Color do.

Quantity do.

Characteristics do.

(d) Hair on face—Color do.

Location do.

Quantity do.

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

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

Fracture of right femur at hip; left femur, lower third; one fibula and one tibia. Right lower leg missing.

7. Disinterment supervised by H. S. Harpole
H. S. Harpole
2nd Lt. Q.M.C.

8. Reburial supervised by H. S. Harpole
H. S. Harpole
2nd Lt. Q.M.C.

Approved: M. B. Birdseye
1st Lt. Q.M.C.

(Title) M. B. Birdseye
M. B. Birdseye
1st Lt. Q.M.C.

Approved: M. B. Birdseye
(Title) M. B. Birdseye

JJO
SCL

FILE
7/27/30
K

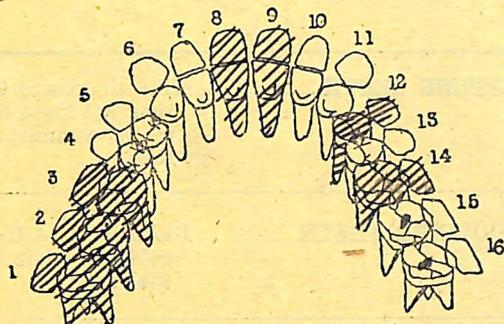
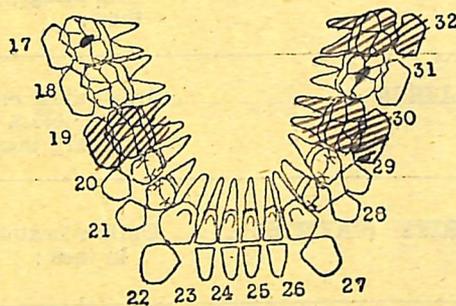


Diagram represents the mouth wide open.



s 1, 2, 3, 12, 14, 19, 30, 32 ext.;
15 & 16, 17, 31 met. fill.; 8 & 9,
missing after death.

D-52835

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.

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

1238378
 D.D. 5/18/18

CODE SLIP



HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	Clark	3	3 2 1
	Patrick	1	2
BURIED	CEMETERY 608	2	26
	GRAVE 26	2	04
	ROW 4	1	3
	BLOCK C	2	44
STATE	Pa	1	2
RANK	Port	2	28
DIVISION	28	3	109
ORGANIZATION	109	1	1
ARM	Inf	1	2
MARITAL	not	3	3 2 1
NAME	Clark	2	
	Mrs Catherine	2	
RESIDENCE	STATE	2	
	COUNTY	3	
	CITY	1	1
RELATION	Mother	1	
OTHER		1	
ELIGIBILITY	Foreign	1	4
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
	YR.	1	
TRIP	Ireland	1	05
ACCEPTANCE	Country		2a

AUDITED

JAN 11 1938

Rtm.

ACCEPTANCE
 29/514
 E.P.M. Country

many Higgins
 3608 Fishers Ave
 Philadelphia - Pa
 1918. ad. of sister

WAR DEPARTMENT
 OFFICE OF THE QUARTERMASTER GENERAL
 WASHINGTON

DATE 8/22/31

NAME RANK SERIAL ORGANIZATION DATE OF DEATH

Clark, Patrick Pvt. 1238378 M.G.Co., 109th Inf. 8/18/18

STATE Pa. CITY. NO. 608 GRAVE 26 ROW 4 BLOCK C

	<u>Check relationship</u>	<u>Living - Deceased</u>	
<i>carry</i>	MOTHER	: <input checked="" type="checkbox"/>	: :
	STEMOTHER (For the year prior to commencement of service)	: :	: :
NAME	MOTHER THRU ADOPTION (For the year prior to commencement of service)	: :	: <u>m</u>
AND	MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	: :	: <u>Mrs Catherine Clark</u>
ADDRESS	WIDOW (Who has not remarried)	: :	: <u>Ballymachola</u>
<i>no record</i>	<i>Single man</i>	: :	: <u>Crossmolina</u>
		: :	: <u>County Mayo</u>
		: :	: <u>Ireland</u>

Veterans Bureau Claim Number XC 39 285
 29/156

12/20/31

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Clark, Patrick

June 24 , 1929.
XC-39,285

Mrs. Mary Higgins,
3608 Fiska Ave.,
Philadelphia, Pa.

M-
Mrs. Catherine Clark,
Ballymachola,
Crossmolina,
County Mayo, Ireland.

Dear Madam:

Your attention is invited to the enclosed copy of an Act of Congress approved March 2, 1929, entitled an Act "To enable the mothers and widows of the deceased soldiers, sailors and marines of the American forces now interred in the cemeteries of Europe to make a pilgrimage to these cemeteries".

The records of this office show that you are the sister of the late Pvt. Patrick Clark, M.G.Co., 109th Inf., whose remains are now interred in the Oise-Aisne American Cemetery, Seringes-et-Nesles, Aisne, France.

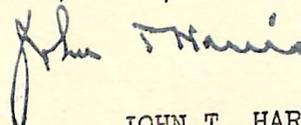
Will you please advise this office whether or not he is survived by a mother or widow who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish the full names and addresses of the mother and widow in order that action may be taken to extend 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.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

June 24, 1929
XS-22,282

IN REPLY REFER TO QM 293 A-C

Clark, Patrick

M-

Mrs. Mary Higgins, 3808 Park Ave., Philadelphia, Pa.
Mrs. Catherine Clark, Springfield, Mass.
County Mayo, Ireland.

Dear Madam:

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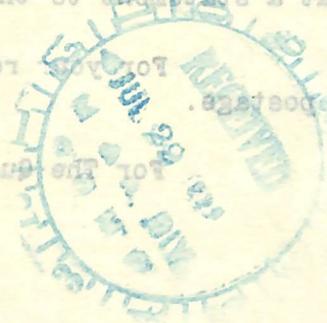
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Very truly yours,

John T. Harris

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



2 inches
Act of Congress
Envelope

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

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June 24 , 1929.

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For The Quartermaster General,

Very truly yours,

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

2 incls.
Act of Congress.
Envelope.

QM 293 A-C
CLARK, Patrick - Pvt.

September 27, 1924

Mrs. Mary Higgins,
3608 Fiska Ave.,
Philadelphia, Pa.

Dear Madam:

The Quartermaster General desires to invite your attention to the inclosed card which gives the permanent cemetery location of the soldier's grave in which you are interested.

This American military cemetery is one of those to be maintained by the United States for all time in Europe. Each grave will be marked by a headstone of white marble, of dignified design, with the name, rank, division, organization, date of soldier's death and State from which he came. Headstones will be placed at all graves in connection with the improvement work now in progress, as soon as possible and without waiting for special action or request on the part of relatives.

Please be assured that in effecting removal of the dead, the utmost reverential care was exercised and more than willingly accorded by those who performed this sacred duty. For the future, these graves will be perpetually maintained by the Government in a manner befitting the last resting place of our heroes.

Very truly yours,

R. P. HARBOLD,
Major, Q.M.C.,
Assistant.

1-Incl.
Record card.

RD
155



COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

File # 17235

(a) Name CLARK, Patrick Ser. No. 1238378
 (b) Rank Pvt. Organization M.G. Co. 109th Inf.
 (c) Date of death 8/18/18 (d) Cause of death K/A

TYP. EK

CKR. gd

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

(a) Grave No. 1 Row -- Plot --1 Sec. B TYP. EK

(b) Emerg. Address Mrs. Mary Higgins (sister) 3608 Fiska Ave., Phila, Pa.

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

CKR. gd

IV. A. G. O. DISPOSITION CARD:

Date of receipt no card in file - 200-12-1-20

(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 _____

no correspondence

Examiner's Initials SA Date 12-1, 1920.

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

No request for disposition

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

Examiner's Initials S.M. Date 12-2, 1920.

COUNTRY France

CEMETERY No. 617

SHEET No. 202

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

3-7729

Make Form No. 114

FORM 115 - A COMPLETED

541-17-21

CARDED

fei

G.R.S. Form #114-A.

STATION

Fismes 617

To be prepared in triplicate.

DATE

Jan. 19, 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 CLARK, Patrick

10. Name

2. No. 1238378

11. No.

3. Rank Pvt.

12. Rank

4. Org. MG Co. 109th Inf.

13. Org.

5. D.D. Aug. 18th 1918

14. (a) D.D.

6. C.D. KIA

(b) D.B.

Discrepancy found upon disinterment

7. Grave No. 2 Sec. B

15. Grave No. Sec.

8. Plot 1 Row

16. Plot Row

9.

17. No discop

18. Cemetery Amer.

19. Commune or town Fismes

20. Dept. or County Marne

21. Country France

22. G.R.S. Hdqrs. Code No. 617

23. Disinterred (Date) 1-19-22

By C.J.Osgood

24. Inscription on grave marker:

Name Patrick Clark

Serial No. 1238378

Rank Pvt.

Organization MG Co 109th Inf.

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

Signature Junior Technical Assistant

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).

Formerly reburied by field section Disc on blanket which checked.

27. Condition of body Badly decomposed features unrecognizable

28. Nature of burial Wooden box and burlap

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 1-19-22 By C.J.Osgood

31. Casket sealed by C.J.Osgood

Signature of Embalmer, (Supervisor)

ADMITTED 10.5 5-24-24

SHIPMENT. (Show actual marking of box.) Box No. **C-22905**

32. Designation of body:

Name **Patrick CLARK** Serial No. **1238378**
Rank **Pvt.** Organization **M G Co. 109th Inf.**

33. Consigned to:

Name of Permanent Cemetery **Oise-Aisne Amer. #608, Seringes-et-Nesles, Aisne**

34. Casket boxed and marked (Date) **1-19-22** By **C.J. Osgood**

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 *O. E. Davis*
O. E. Davis, 1st Lt. G.M.C.

36. Remarks

37. Shipped from point of Operation: (Date)

To point of Concentration (Name)
Convoyer Signature Shipping Officer

38. Received at Railhead or Point of Concentration: Date

By G.R.S. Representative

39. Shipped from Railhead or Point of Concentration: Date

To Permanent Cemetery **Oise Aisne, Am. Cty 608 Seringes et Nesles, Aisne.** (Name)
Convoyer Signature Shipping Officer *O. E. Davis*

40. Received: Date **JAN 23 1922**

G.R.S. Representative *R. H. Wood*

41. Reinterred **Aug. 21, 1922, Oise-Aisne Cem. 608, Seringes et Nesles (Aisne)** (Date)

42. Grave No. **26** Section **----**

43. Plot **BLOCK C** Row **4**

G.R.S. Representative *W. D. Cleary*
W. D. Cleary
Lt., Chaplain, USA.

tab

REPORT OF DISINTERMENT AND REBURIAL

Place Fismes, Cem. 617

Date Jan. 19th, 1922

1. REMAINS OF CLARK, Patrick SERIAL NUMBER 1238378

RANK Pvt. ORGANIZATION M. G. Co. 109th Inf.

2. Disinterred (date): Jan. 19th, 1922 From (give complete location):

Gr. 2, Plot 1, Sec. B, Cem. 617

By: Group 3 Unit Sec. 7

3. Reburied (date): Aug. 21, 1922 In (give complete location): Gr. 26, Block C,

Row 4, Oise-Aisne Cem. 608, Seringes et Nesles (Aisne)

By: Group re-burial group Unit ----- Nature of reburial Lined
Casket

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

Badly decomposed, features unrecognizable. Buried in burlap and wooden box.

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

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

Formerly reburied by field section. Disc on blanket which checked.

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

(a) Height (actual measurement) Indiscernable due

(b) Weight (estimated) to decomposition.

(c) Hair—Color None

Quantity

Characteristics

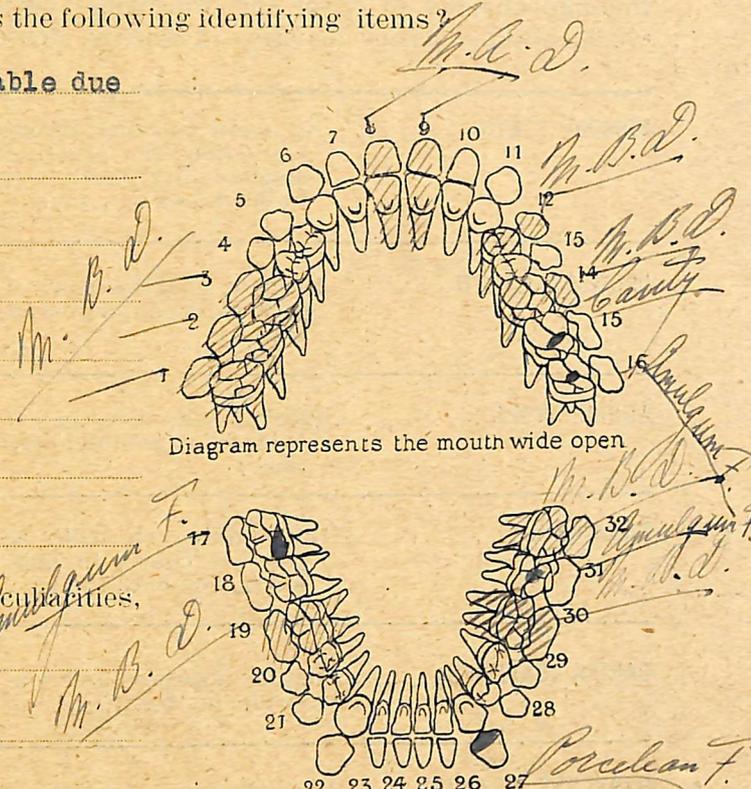
(d) Hair on face—Color None

Location

Quantity

(e) Permanent marks on body (old scars, peculiarities,

or missing parts) None



(f) Wounds or missing parts (received at time of casualty) All major and minor bones

below hips shattered or missing in part.

F. H. Chunn,

7. Disinterment supervised by C. J. Osgood, Supl. Bmb.

Approved: O. E. Davis, 1st Lt., QMC.
(Title)

8. Reburial supervised by L. D. Hays

Approved: W. D. Cleary
(Title) Lt., Chaplain, USA.

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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.

COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

File # 17235

(a) Name CLARK, Patrick Ser. No. 1238378
 (b) Rank pvt. Organization M.G. Co. 109th Inf. } TYP EK
 (c) Date of death 8/18/18 Cause of death K/A } *gd*

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

(a) Grave No. 1 Row 1 Plot 1 Sect. B TYP EK
 (b) Emerg. Address Mrs. Mary Higgins (sister) 3608 Fiska Ave., Phila, Pa.

III. Files of soldiers dying from contagious diseases --- CKR *gd*

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

Agg - No Card
G.P.S. - No Correspondence
1-8-21 XB

V. Following advice forwarded to Europe by (cable on 12/22/1920)
 (Letter of transmittal on 12/22/1920)
Paragraph 2
Not to be returned

VI. Form 115 forwarded to G.R.S. Hoboken, N.J. JAN 18 1921 192

VII. SUPPLEMENTARY REQUESTS

Date of and Source	Relationship and name	Desires	Action taken

VIII. Form 115 received from G.R.S. Hoboken, N.J. 5/16 192 1

COUNTRY _____ CEMETERY NO. _____ SHEET NO. _____

G.R.S. FORM 115-A August, 1920

17235
GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Black - 1235 - Patrick
.....
(Surname.) (Number.) (First Name and Initials.)

Pvt - M. G. Co. 109th Inf.
.....
(Rank.) (Organization.)

DATE OF BURIAL *August 1st 1918*

PLACE OF BURIAL *Warren Cemetery*
(Give Cemetery, Town and Department.) Map reference must specify clearly what map is used.

In valley at ~~200000~~
(Fisher Map 750000)

Sept. 2000

GRAVE NUMBER.....

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

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:

~~*Co. M. C. 72 Fisher (Marine)*~~
~~*Map 248000*~~

~~*F 200000 285.55*~~

REPORTED BY:

(over)

C. P. Fitch Lt. Col. 109th Inf.
.....
(Signature and Rank of Reporting Officer.)

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

544

OMME. FISHERS (TACURAE)
(O-72) SHIP. 345W COORD

E 205.65

N 285.55

Daily Report No.

72-544

I, the undersigned, am the _____ and nearest living next of kin of the within-named soldier, and desire the following disposition of his remains, viz: (Strike out all except the one showing the disposition desired.)

RECEIVED BY MAIL UNIT MAY 16 1921 Cemeterial Division Overseas Project Sub-Section

- 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 instructions for the disposition of a body are not received from the next of kin 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 next of kin 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 next of kin, please ask the nearest next of kin, if living near you, to fill out this paper.
7. If YOU are not the nearest living next of kin 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.

NOTE.—INSTRUCTIONS FOR THE DISPOSITION OF REMAINS will be issued by this office upon the properly executed authority of the legal next of kin in each case. The widow is the first person having disposition of the remains of her husband. Should there be no widow or children, the father and, in turn (upon his decease), the mother, is the proper authority. The brothers, in order of seniority, and then the sisters in order of seniority, if there are no brothers, rank next in authority to decide. Under an opinion rendered by the Judge Advocate General of the Army, if a widow has remarried she forfeits her right, and the next of kin as given above will make decision.