

DEC 23 1925

DATE

1. NAME CLAYS, Leon

SERIAL No 545783

193

RANK Pvt

ORGANIZATION Co. C. 30th Inf.

GRAVE LOCATION Amer. City Savenay (Loire Inf.)

CTY. NAME

22

NUMBER

187

GRAVE

ROW

PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION

187

Savenay

L.I.

As shown by cemetery directory AGRS
of 12, 1919.

GRAVE

COMMUNE

DEPT.

COORDINATES

Not given

CONCENTRATED TO

Nothing of record

DATE

GRAVE

ROW

PLOT

CEMETERY

CTY. NUMBER

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

Nothing of record

DATE OF DEATH

Jan. 5, 1919

STATE FROM WHICH HE CAME

ny

MEDALS OR DECORATIONS AWARDED

none

SUBSEQUENT REBURIALS

None of record

DATE

GRAVE

ROW

PLOT

CEMETERY

DATE

GRAVE

ROW

PLOT

CEMETERY

SIGNATURE, AREA SUPERVISOR

Stanley J. Grogan

STANLEY J. GROGAN, CAPT. INF. USA.

3. FINAL GRAVE LOCATION Sept. 20/22

14

39
54

Block A.

DATE

GRAVE

ROW

PLOT

Oise-Aisne, Amer. #608 Seringes-et-Nesles (Aisne)

CEMETERY

DEC 22 1925
UNITED WAR DIV

AUDITED BY

R-10

INSTRUCTIONS FOR PREPARATION OF FORM 114 B

1. Forms 114-B are to be prepared by Registration Branch in quadruplicate, three copies to be forwarded to Area Supervisor who will accomplish paragraph 2 and return all three copies to Headquarters, American Graves Registration Service.

2. Paragraphs 1 and 3 will be accomplished by Registration Branch, Headquarters, American Graves Registration Service, Q.M.C., in Europe.

3. Paragraph 2 will be accomplished by Area Supervisor from data on file in his office.

4. If data is entered on Form 114-B from Form 1, Form 16, Form 1-A or Form 16-A, statement to this effect will be made on Form 114-B STATING WHICH G.R.S. form data is taken from. If data concerning co-ordinates is approximate and NOT accurate, statement to this effect will be made on these forms.



GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

Days
.....
(Surname.) *545 783* (Number.) (First Name and Initials.)

Pvt *C* *C* *30th* *Inf.*
(Rank.) (Organization.)

DATE OF BURIAL..... *January 6, 1919*.....

PLACE OF BURIAL..... *American Cemetery 22*.....

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

Savenay France

GRAVE NUMBER..... *188 A*.....

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

Headboard?..... Bottle?.....

IDENTIFICATION TAGS :

Was one buried with body?..... *Yes*.....

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

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

REPORTED BY :

J. W. Johnson
.....
(Signature and Rank of Reporting Officer.)

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

Received

A. G. O.

JAN. 12 1919

G. H. Q. A. R. F.

Stal

RECEIVED
G. H. Q. A. R. F.
JAN 12 1919

8# 545783

1/5/19

CODE SLIP

LF

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME <i>Clays</i>	<i>Clay</i>	3	<i>3 2 1</i>
BURIED	CEMETERY <i>608</i>	1	<i>2</i>
	GRAVE <i>14</i>	2	<i>14</i>
	ROW <i>29</i>	2	<i>29</i>
	BLOCK <i>A</i>	1	<i>1</i>
STATE	<i>ny</i>	2	<i>37</i>
RANK	<i>Dr. H</i>	1	<i>2</i>
DIVISION	<i>3</i>	2	<i>03</i>
ORGANIZATION	<i>30</i>	3	<i>030</i>
ARM	<i>Inf</i>	1	<i>1</i>
MARITAL	<i>no</i>	1	<i>2</i>
NAME <i>Vandembosche</i>		3	
<i>Mrs Rosalie</i>	STATE	2	
RESIDENCE <i>401 Manton Ave</i>	COUNTY	2	
<i>(Sister) - Providence, R.I.</i>	CITY	3	
RELATION	<i>mother</i>	1	<i>1</i>
OTHER <i>father dead</i>		1	
ELIGIBILITY <i>no SM</i>	<i>dead</i>	1	<i>6</i>
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE		1	

AUDITED

AUG 5 1919 MB

da

29/514

Providence 31-8-1932

R.I.

Dear Sir

Answer to your letter dated
August 8-1932 I let you know
that my late brother Leon Clays
never haden no stepmother,
he has only survived by two sisters
in one brother.

59

M^{rs} Van den Bossche



QM 293 AM
Clays, Leon (OA)

August 8, 1932.

Mrs. Rosalie Vandebossche,
401 Manton Avenue,
Providence, R. I.

Dear Madam:

This office is making an earnest endeavor to communicate with all women who may be eligible to make a pilgrimage to the cemeteries of Europe under the provisions of the Act of March 2, 1929, as amended May 15, 1930.

It is therefore requested that you advise whether or not the late Private Leon Clays is survived by a stepmother, and if so, her name and address and the date of her marriage to your father.

A self-addressed envelope which requires no postage is enclosed for your convenience in replying.

For The Quartermaster General.

Very truly yours,

CHAS. W. DIETZ,
Captain, Q. M. Corps,
Assistant.

Enclosure:
Envelope.

FM

WAR DEPARTMENT
 OFFICE OF THE QUARTERMASTER GENERAL
 WASHINGTON

DATE 8/22/31

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Clays, Leon	Pvt.	545783	Co. C, 30th Inf.	1/5/19
STATE N.Y.	CTY. NO. 608	GRAVE 14	ROW 29	BLOCK A

	<u>Check relationship</u>	<u>Living - Deceased</u>	
	MOTHER	: : <input checked="" type="checkbox"/>	
	MOTHER	: : <input type="checkbox"/>	
	STEMOTHER (For the year prior to commencement of service)	: : <input type="checkbox"/>	
NAME	MOTHER THRU ADOPTION	: : <input type="checkbox"/>	
AND	(For the year prior to commencement of service)	: : <input type="checkbox"/>	
ADDRESS	MOTHER IN LOCO PARENTIS	: : <input type="checkbox"/>	
	(For the year prior to commencement of service)	: : <input type="checkbox"/>	
	WIDOW	: : <input type="checkbox"/>	
	(Who has not remarried)	: : <input type="checkbox"/>	

Single man

ms: Rosalie Vandembosche
401 Mantouan
Providence
Mrs R.I

Veterans Bureau Claim Number 6 125 331
 29/156

m

C#125-331

OFFICE

IN REPLY REFER TO QM 293 A-C
Clays, Leon

Mr. Leopold Clays,
Gen. Del.
Olneyville Station,
Providence, R.I.

(Sister) Mrs. Rosalie Vandebussche
86 bis - 1. Boulevard des
Quatre Mars,
Renaix, Belgique

(7-) incl.
+

[Handwritten signature]

Dear Sir:

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

The records of this office show that you are the father of the late Private Leon Clays, Co. C, 30th 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

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

2 incls.
Act of Congress.
Envelope.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Clays, Leon

June 24, 1929.

Mr. Leopold Clays,
Gen. Del.
Olneyville Station,
Providence, R.I.

Q125331
7-17
Harris

Dear Sir:

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

The records of this office show that you are the father of the late Private Leon Clays, Co. C, 30th Inf., whose remains are now interred in the Oise-Aisne American Cemetery, Seringes-et-Nesles, Aisne, France.

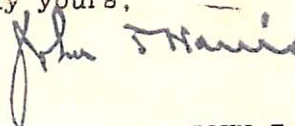
Will you please advise this office whether or not he is survived by a mother or widow who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish the full names and addresses of the mother and widow in order that action may be taken to extend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

M.D.
[Physician's signature]

[Number and street]

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Oliver, Leon

June 24 1923

Mr. Leopold Oliver,
Gen. Tel.
Oliveville Station,
Providence, R.I.

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress approved March 3, 1923, entitled an Act "to enable the mother and widow of the deceased soldiers, sailors and marines of the American forces now interred in the cemeteries of Europe to make a pilgrimage to these cemeteries."

The records of this office show that you are the father of the late Private Leon Oliver, Co. C, 30th Inf., whose remains are now interred in the Oise-Aisne American Cemetery, Serings-et-Meules, 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 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 mother and widow are entitled to make the pilgrimage.

Your attention is particularly invited to Section 4 of the an-

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 so requested that a statement be filed effect be made.

For your reply, you may use the enclosed envelope which contains

The Quartermaster General

Very truly yours,

John T. Harker

JOHN T. HARKER,
Major, U. S. Army,
Assistant



Act of Congress
Europe

WAR DEPARTMENT

WASHINGTON, D. C.

OFFICIAL BUSINESS

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON, D. C.
JUN 25
1 - P M
1929

PENALTY FOR PRIVATE USE
TO AVOID PAYMENT OF
CITIZENSHIP POSTAGE \$300.
MILITARY TRAINING
- CAMPS -

THE SENDER

PROVIDENCE, R. I.
JUL 10
2 - P M
NEW HILLS 1929

PROVIDENCE, R. I.
JUL 10
1 - P M
NEW HILLS 1929



PROVIDENCE, R. I. - N. H.
JUN 28
7. AM
GLYNNVILLE, CT.

1929



QM 293 AM
Clays, Leon (OA)

August 8, 1932.

Mrs. Rosalie Vandebossche,
401 Manton Avenue,
Providence, R. I.

Dear Madam:

This office is making an earnest endeavor to communicate with all women who may be eligible to make a pilgrimage to the cemeteries of Europe under the provisions of the Act of March 2, 1929, as amended May 15, 1930.

It is therefore requested that you advise whether or not the late Private Leon Clays is survived by a stepmother, and if so, her name and address and the date of her marriage to your father.

A self-addressed envelope which requires no postage is enclosed for your convenience in replying.

For The Quartermaster General.

Very truly yours,

CHAS. W. DIETZ,
Captain, Q. M. Corps,
Assistant.

Enclosure:
Envelope.

FM

0861

1932 AUG - 8 - PM 4:31

QMG M&R BR

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Clays, Leon

June 24 1929.

Mr. Leopold Clays,
Gen. Del.
Olneyville Station,
Providence, R.I.

Dear Sir:

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

The records of this office show that you are the father of the late **Private Leon Clays, Co. C, 30th 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

IN REPLY REFER TO QM 293 A-C
CLAYS, Leon Pvt.

April 9, 1924

Mr. Leopold Clays,
General Delivery,
Olneyville Station, Providence, R.I.

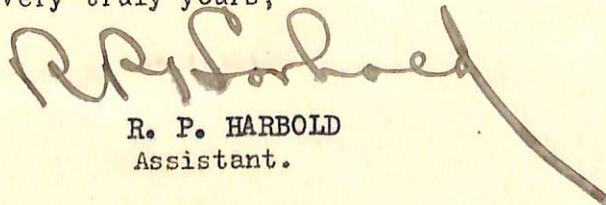
Dear Sir:

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

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

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

Very truly yours,


R. P. HARBOLD
Assistant.

1-Incl.
Record card.

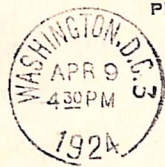
APR 12 1924

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON, D. C.

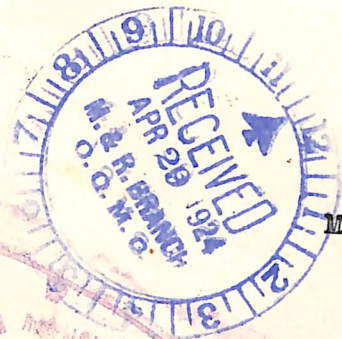
OFFICIAL BUSINESS



PENALTY FOR PRIVATE USE TO AVOID

LET'S GO!
PAYMENT OF POSTAGE, \$300

CITIZENS
MILITARY
TRAINING
- CAMPS -



Mr. Leopold Clays,

General Delivery,

Olneyville Station,

Providence,

Rhode Island.

NO ANSWERS TO WRITEN
UNSLAID

PROVIDENCE R.I.
APR 28
3 PM
1924
OLNEYVILLE STA.



APR 10
8 AM
924



Soldier's  Overseas
Grave

Name Leon Clays

Rank Private

Organization Company C, 30th Infantry

Grave No. 14 Row 34 Block A

Cemetery Oise-Aisne American

Location Seringes-et-Nesles, Aisne, France

QM 293 A-C

April 9, 1924

CLAYS, Leon Pvt.

Mr. Leopold Clays,
General Delivery,
Olneyville Station, Providence, R.I.

Dear Sir:

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

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

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

Very truly yours,
O. Q. M. G.
GENERAL ROOM



MPK

ZAZ

1-Incl.
Record card.

APR 9 1924

C.

file

22-51

X

Clays,

Leon

545,783

Dup.

(Surname.)

(Christian name in full.)

(Army serial number.)

Pvt.

Co. C, 30th Inf.

(Rank and organization.)

State your relationship to the deceased

Father Louis Clays

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)

Mr. Louis Clays, Father

9 Appleton St.

Providence

R.I.

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

3-6713

note

22

~~Mrs. Rose~~
~~157 Deane St.~~
~~Providence, R.I.~~



Mr. Louis Clays
Appleton St., Olneyville end
Sta. Prov. R.I.

To be prepared in triplicate.

DATE Nov. 22, 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 <u>CLAYS, Leon</u>	10. Name
2. No. <u>545783</u>	11. No.
3. Rank <u>Pvt.</u>	12. Rank
4. Org. <u>Co.C.30th Inf.</u>	13. Org.
5. D.D. <u>Jan. 5, 19</u>	14. (a) D.D.
6. C.D. <u>DOW</u>	(b) D.B.

Discrepancy found upon disinterment

7. Grave No. <u>187</u> Sec.	15. Grave No.	Sec.
8. Plot Row	16. Plot	Row
9.	17. <u>No discp</u>	

18. Cemetery Amer.19. Commune or town Savenay20. Dept. or County Loire Inf.21. Country France22. G.R.S. Hdqrs. Code No. 2223. Disinterred (Date) 11-22-21 By B.A. Bradford

24. Inscription on grave marker:

Name <u>Leon Clays</u>	Serial No. <u>545783</u>
Rank <u>/ Pvt.</u>	Organization <u>Co. C. 30th Inf.</u>

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

E. S. Parker
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).

No means of identification other than grave marker No evidence to disprove identity.27. Condition of body Badly decomposed features unrecognizable28. Nature of burial Pine box and uniform.29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? None30. Body prepared and placed in casket: Date 11-22-21 By B.A. Bradford31. Casket sealed by B.A. Bradford

Signature of Embalmer, (Supervisor)

Ben A. Bradford
1921 Nov 23

SHIPMENT. (Show actual marking of box.) Box No. **C-19096**

32. Designation of body:

Name **Leon CLAYS** Serial No. **545783**

Rank **Pvt** Organization **Co.C.30th Inf.**

Blue

33. Consigned to:

BSQJA

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

34. Casket boxed and marked (Date) **11-22-21** By **B.A. Bradford**

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 *E. J. Riordan*
E. J. Riordan, Capt. QMC

36. Remarks

37. Shipped from point of Operation: (Date)

To point of Concentration

Convoyer **Jack Roberts** Signature Shipping Officer (Name)

38. Received at Railhead or Point of Concentration: Date

By G.R.S. Representative

39. Shipped from Railhead or Point of Concentration: Date **28 NOV 1921**

To Permanent Cemetery **Oise Aisne, Am. Cty. 608 Seringes et Nesles, Aisne**

Convoyer **Jack Roberts** Signature Shipping Officer (Name)

40. Received: Date **2 DEC 1921** **S.D. CAMPBELL, Capt. QMC**

G.R.S. Representative **G. F. WAUGH**

41. Reinterred **9/20/22, Oise-Aisne Cem. 608, Seringes-et-Nesles, (Aisne)**

(Date)

42. Grave No. **14, Blk. A** Section

43. Plot Row **34**

fr

G.R.S. Representative *W.D. Cleary*
W.D. Cleary, 1st Lt. Chaplain, USA
gs

REPORT OF DISINTERMENT AND REBURIAL

1. REMAINS OF CLAYS, Leon SERIAL NUMBER 545783

RANK Pvt. ORGANIZATION Co. C. 30th Inf.

2. Disinterred (date): Nov. 22nd, 1921 From (give complete location): Gr. 187, Cem. 22

By: Group 1 Unit Sec. 7

3. Reburied (date): 9/20/22 In (give complete location): Gr. 14, Blk. A. Row 34

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

By: Group reburial group Unit metal lined casket Nature of reburial

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

Pine box and uniform. Badly decomposed, features not recognizable.

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

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

No means of identification other than grave marker. No evidence to disprove identity.

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 Apparently brown

Quantity Moderate

Characteristic straight

(d) Hair on face—Color None

Location

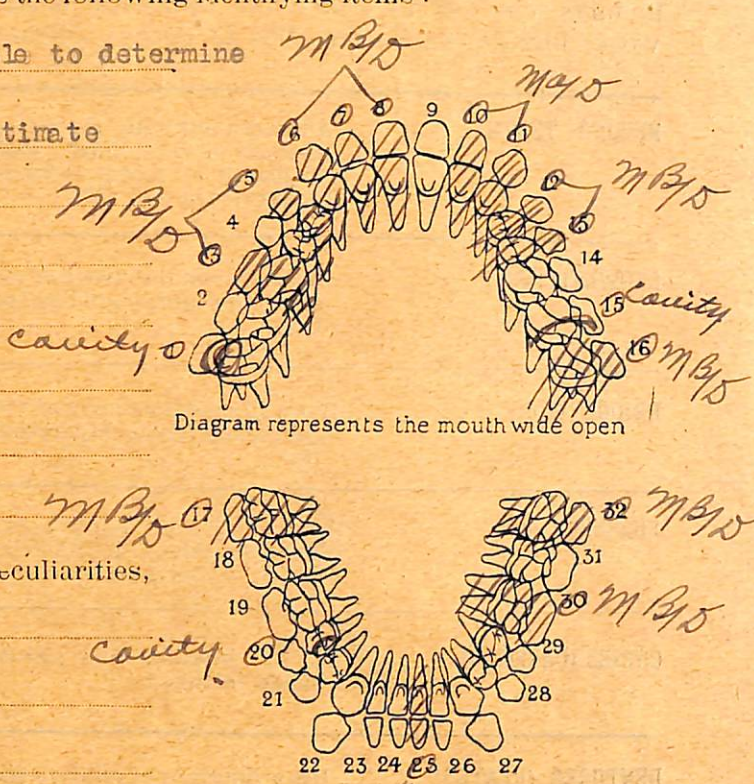
Quantity

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

or missing parts) None

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

Right leg amputated 6" below hip.



7. Disinterment supervised by Ben A. Bradford Approved: E. J. Riordan

Ben A. Bradford, Sup. Emb. (Title) E. J. Riordan, Capt., AMC. (Title)

8. Reburial supervised by L. D. Hays Approved: W. D. Cleary

L. D. Hays (Title) W. D. Cleary, 1st Lt. Chaplain, USA (Title) gs

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






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

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.
2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.
3. Give date and accurate information as to location of reburial and the group and unit which made reburial, and how reburial was made—in casket, wooden box, etc.
4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried—in a casket, box, burlap, etc. This statement should be as complete as possible.

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

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

6. Give all information as to body description and dental chart as nearly correctly as the condition of the body will allow. Items (e) and (f) under the body description are very important and should be very complete. The dental chart is also very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

MISSING TEETH	All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus:	
CROWNED TEETH	Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus:	
BRIDGE WORK	Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge) thus:	
FILLINGS	Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus:	
CARIES (CAVITIES)	Outline location and size of cavity, shade in—thus:	
DENTURES (PLATES)	Draw diagram of relative size and shape of plate block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp"	

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

*2/13/22 Examined
for Concentration
Diseases - Arsons 608
att 3/4/22*

COMPILATION N/R REQUESTS

I. DATA COMPILATION

A. Location Index Card:-

(1) Name Clays, Leon Ser. No. 545783)
(2) Rank Pvt. Organization Co. C. 30th Inf.) TYP. TW.
(3) Date of death 1/5/19) CKR. M.H.

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

(4) Cause of death DWARIA) TYP. SH
(5) Grave No. 188 Row --- Plot --- Sect. A) CKR. F.H.P.

II. FILES EXAMINATION

A. Files of soldiers dying from contagious diseases; no card

B. A. G. O. DISPOSITION CARD Date of receipt Jan 26, 20

(6) Relationship Father
(7) Name Mr. Louis Clays
(8) Address 9 Appleton St, Providence, Rhode Island
(9) Desires remains brought to U. S.? No
(10) Desires remains brought to U. S. and interred in National Cemetery at _____
(11) If brought back, what shipping instructions? _____ *OK 2/20*

G.S.B-4/3/20

C. A. G. O. CORRESPONDENCE Date of communication _____

(12) Does correspondence change or qualify request as made on A.G.O. card? If so, specify such information. _____

No correspondence.

(13) A. G. O. Files EXAMINED by J.L. (Date) 4-5-20

D. (14) G. R. S. Files - Correspondence. (Has reference been made to File No. Cancellation memos.?) Yes, Does such correspondence, if containing request for disposition, reconcile with that of A. G. O.? Yes
(Specify "Yes or "No".) If "No", give date of communication, the name, address, and relationship and substance of request.

*No request for disposition.
Grant Location Blank only*

(15) G. R. S. Files EXAMINED by H.C. (Date) 4-5-20

III. FINAL ACTION

- A. MEMORANDUM to D. M. O. in E. made (Date) _____
- (16) Removal of Remains (within custody of G.R.S.) to _____
- (17) Instructions that remains be left undisturbed _____
- (18) Typed by _____ Checked by _____ (Date) _____
- B. G. R. S. FORM NO. 114 made (Date) _____
- (19) Typed by _____ Checked by _____ (Date) _____

C. SUSPENSION REMARKS:

9/24/20 letter to father asking whether deceased is sur-
vived by widow or children if so to furnish names and
addresses of each. 9/27/20 E.C.S.

Letter 9-29-20. Father states that deceased
is not survived by widow or children.

- D. Dispatched (Date) _____ (Let. Trans. No. APR 21 1920 ^{L.T. 9-30-20})
Per 2 - Not to be returned. HJ

Approved by _____

(Date) _____

Director
Project Child Survival

RECEIVED
AUG 24 1921



AUG 24 1921
G. R. S.

Serial no 278 Omona Court,
of Leon Clays Providence R.I.
545 783
Sept 29, 1920

File no 293.8 Cemeterial Division
{ Clays, Leon }

Dear Sir

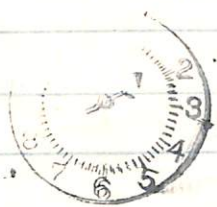
The late private Leon Clays
was not married and has no
children.

Yours Truly
Leopold Clays

General Deliverie
Olneyville Station

Cty 22-51

CEMETERIAL DIVISION



SEP 30 20

RECEIVED

AUG 24 1921

September 24th, 1920.

FILE NO. 293.8 Cemeterial Division,
(CLAYS, Leon,)

Mr. Louis Clays,
9 Appleton St.,
Providence, R.I.

Dear Sir:

It is requested that you inform this office without delay whether the late Private Leon Clays, Serial Number 545783, Co. C., 30th Infantry, is survived by a widow or children, and if so kindly furnish names and addresses of each.

Your early attention to this matter using the enclosed penalty envelope will be greatly appreciated.

By authority of the Quartermaster General:

R. E. SHANNON,
Major, Q.M. Corps.,
Officer in Charge.

BY:

fol

CPA
C. D. ANNIS,
1st Lieut., Q.M. Corps.

10/14/20

*Suspected until
Dec 10
EE*

Mailed-Q.P.D.
922

SEP 25 1920

RECEIVED
AUG 24 1921
#115
ECL
Checked Project correspondence
Division

September 24th, 1920.

FILE NO. 223.8 Cemetery Division,
(CLAY, Leon.)

Mr. Louis Clay,
9 Appleton St.,
Providence, R.I.

Dear Sir:

It is requested that you inform this office without delay whether the late Private Leon Clay, Serial Number 545783, Co. C., 30th Infantry, is survived by a widow or children, and if so kindly furnish names and addresses of each.

Your early attention to this matter using the enclosed penalty envelope will be greatly appreciated.

By authority of the Quartermaster General:

R. E. SHANNON,
Major, U.S. Corps,
Officer in Charge.

BY:

C. D. ANNIS,
1st Lieut., U.S. Corps.

Division
Cemetery Project Sub-Section

AUG 24 1921

RECEIVED

Mailed - P.D.

SEP 25 1920

Handwritten notes:
checked
sent to
10
20

G. R. S. Form #120
Shipping Inquiry.

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

tvh

APR 21 1920

FROM: Chief, Graves Registration Service, Q.M.C.
TO: Mr. Louis Clays, 9 Appleton St., Providence, R. I.
SUBJECT: Disposition of remains of Pvt. Leon Clays.

Records of this office show your request to be as follows:

Remains to be not returned to U. S. ~~XXXXXXXX~~ interred

~~XXXXXXXX~~

If any modifications of the foregoing are desired please write same fully on the other side of this sheet.

The nearest living relative may choose between, (1) return of remains to homes for burial; (2) interment in Arlington, Va., National Cemetery; or (3) remain in France.

You are requested to fill out the following without delay and return in enclosed penalty envelope, which does not require postage.

By authority of the Quartermaster General:

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

NAME OF	NO. & STREET	TOWN	STATE
Widow			
Children (Name oldest first)			
Father			
Mother			
Brothers			
Sisters			

Date

Signature

Address

Relationship

HBC

NS/7154/LML

AUG 9 1920

G.R.S. Form #120
Shipping Inquiry.

(Revised) OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
GRAVES REGISTRATION SERVICE
WASHINGTON

22-51

epp

FROM: Chief, Graves Registration Service, Q.M.C.
TO: Mr. Louis Clays, 9 Appleton St., Providence, R.I.
SUBJECT: Remains of Pvt. Leon Clays, Co. C., 30th Inf. (545783)

The records of this office show that you have requested that his body remain in France.

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	NO. & STREET	TOWN	STATE
Soldier's Widow			
Soldier's Children			
(Name oldest first)			
Father			
Mother			
Brothers			
(Name oldest first)			
Sisters			
(Name oldest first)			

Date.....

Signature.....

Address..... Relationship.....

IMPORTANT:- CAREFULLY read instructions before filling out this paper. (OVER)

DATE _____ 1920.

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

(Name As stated on) first page of this sheet.

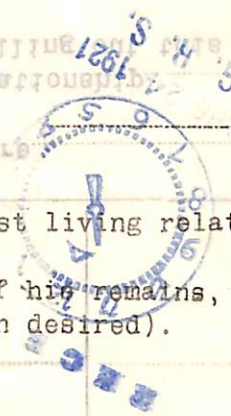
2. To be returned to the U.S. and shipped to _____ (Name)

_____ (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.

(Name of next of kin) _____ Signature _____



RECEIVED

AUG 24 1921

SOLDIER'S WIDOW

INSTRUCTIONS FOR FILLING OUT

1. If definite instruction as to the disposition of a body are not received from the nearest relative within 2 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 enclosed envelope - pay no postage.

COMPILATION OF DISPOSITION OF REMAINS DATA

FILENO. 80594

*See Form 115
cut 3/4/22*

I. LOCATION INDEX CARD:

(a) Name CLAYS, Leon, Ser. No. 545783
 (b) Rank Pvt., Organization Co. C., 30th Infantry.
 Cause of death d D. W. R. I. A.
 (c) Date of death 1-5-19

TYP TW
MEH
 isb *ED*

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

(a) Grave No. 188 Row --- Plot --- Sect. A
 (b) Emerg. Address -----

TYP SH

III. Files of soldiers dying from contagious diseases No card CKR FLR

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

.....

V. Following advice forwarded to Europe by (cable on 192)
 (letter of transmittal on 4/21, 1920)

Par. 2, Not to be returned.

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

SEP 18 1920

VII. SUPPLEMENTARY REQUESTS

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

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

COUNTRY FRANCE CEMETERY NO. 22 SHEET NO. 51
 G.R.S. FORM 115-A
 August 1920

S-666/MB

RETURN TO OSP-SS

80594
from
79801

THE SCHOOL FOR B
INSTRUCTION

INSTRUC

INSTRUC

80594

GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

Clays, 545, 783 Leon (Surname.) (Number.) (First Name and Initials.)

Pvt Co C 30th Inf. (Rank.) (Organization.)

DATE OF BURIAL January 6, 1919

PLACE OF BURIAL American Cemetery 22

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

Savenay France

GRAVE NUMBER 188 A

HOW MARKED: Name Peg? Cross? Yes

Headboard? Bottle?

IDENTIFICATION TAGS:

Was one buried with body? Yes

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

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

REPORTED BY:

(Signature and Rank of Reporting Officer.)

J.W. Cochran, Chaplain.

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



Reg. Cards.

April 9 1919

MEMO FOR : G.R.S. representative, C.R.O.

SUBJECT : Information required for G R S.

I. Items checked are to be completed :

- Surname : Clays
 Number : 545783 ✓
 First name : Leon ✓
 Rank : Pvt
 Company : Co C,
 Organization 30th Inf
 Date of death : Jan, 5th 1919
 Cause :
 Place :

Location of hospital :

- Number » » ✓
 Class » » ✓
 Relative : Mr. Lewis Clays o.k.
 Relationship : father
 Address : 417 Newton St., Newtonville,
 Mass.
 Authority :
 Cablegram No :
 Telegram from :

dated :

- Reported to Washington :
 C.C. Nos : 413

(Underscore the "official" C.C.)

- Remarks :

Burial notification was sent to this address and returned, advise correct address,

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

Initials of reporter :

