

G.R.S. Form #114 B

FEB 11 1926

DATE

1. NAME CLEMENTS, Robert D. *Robert D. Clements* SERIAL No. 1210623

RANK Pvt. ORGANIZATION Co. E, 107th Inf.

GRAVE LOCATION British Military - Busigny, Nord & DIVISION - 27 CTY. NAME NUMBER

15 GRAVE A ROW 1 PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 3, Row C, Plot 1, Busigny Nord GRAVE COMMUNE DEPT.

COORDINATES 13 N.E. E.172.8. N.354.7.

CONCENTRATED TO Jan. 27, 1921. 15, A 1 DATE GRAVE ROW PLOT

Brit. Mil. Cem. Busigny, (Nord) 623 CEMETERY CTY. NUMBER

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

Tag found on body, corroded. Signet gold ring found on body with initials "R/C" Identified by clothes marker and ring. Head crushed. Form 16-A dated 27 Jan. 1921.

DATE OF DEATH Oct 16, 1918

SUBSEQUENT REBURIALS STATE FROM WHICH HE CAME *WY*

MEDALS OR DECORATIONS AWARDED *None*

Louis R. Dice
DATE GRAVE ROW PLOT CEMETERY

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

3. FINAL GRAVE LOCATION 10/16/22 20 Robert O. Davis, Lt. Col. General, The Adjutant General, By *[Signature]* DATE GRAVE ROW PLOT

AUDITED BY 4 A.G.O. FEB 11 1926 WORLD WAR DIV.

Somerset Amer. Ctry 636 CEMETERY #636 FEB 13 1926

MAR 3/24/26

MAR 23 1926

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.



CC 328 RL T 12/18
GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

Clements 1210623 R.D.
.....
(Surname.) (Number.) (First Name and Initials.)

Pvt
.....
(Rank.) *Co F 107 Inf.* (Organization.)

DATE OF BURIAL *Oct. 18, 1918*
.....

PLACE OF BURIAL *Busigny mil. Cem.*
.....

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

map sheet 57B, S.E.
.....

V. 10 C. 4-9
.....

GRAVE NUMBER *C3*
.....

HOW MARKED : Name Peg? *yes* 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 :

H. P. Stapp, Chaplain 119 Inf.
.....
(Signature and Rank of Reporting Officer.)

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

REPORT OF DISINTERMENT AND REBURIAL

Date 27th Jan 1921.

1. REMAINS OF Clements? Robert D? SERIAL NUMBER I210623.

RANK Pvt ORGANIZATION Co E. 107th Inf.

2. Disinterred (date) : 27th Jan 1921. From (give complete location) : Grave 3 Plot, I. Row, C.

By : Group 3 Unit Sec. 7.

3. Reburied (date) : 27th, Jan, 1921. In (give complete location) : Grave 15, Plot, I Row A.

By : Group 3 Unit Sec. 7. Nature of reburial Box & Burlap.

4. Report as to nature of original burial and condition of body upon disinterment : O/D. Uniform, & Blanket, Badly decomposed.

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

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

Signet gold ring found on body with initials "R/C."

Body tag corroded. Identified by cross marker & ring.

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

(a) Height (actual measurement) 5'8"

(b) Weight (estimated) 160

(c) Hair—Color Black

Quantity Thick

Characteristics Straight

(d) Hair on face—Color None

Location "

Quantity "

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

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

Head crushed

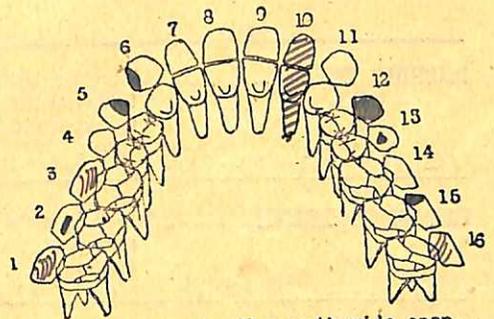
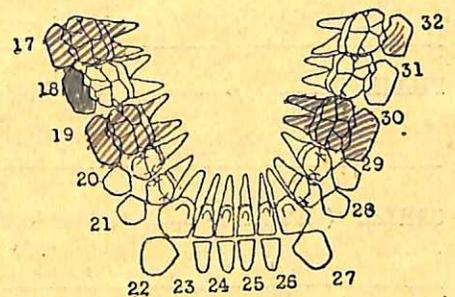


Diagram represents the mouth wide open.



1-3-16-32 decayed
2-5-6-13-16-metal filling
10 missing was pivot
12-18 gold crown
17-19-30 extracted

10-30090

7. Disinterment supervised by E.P. Doyle? Capt. Q/M/C/

Approved : Major E/W. Austin. F/A/
(Title)

8. Reburial supervised by E.P. Doyle. Capt. Q/M/C/

Approved : Major E/W. Austin. F.A.
(Title)

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

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

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

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

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

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

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

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

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

MISSING TEETH.....All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus:



CROWNED TEETH.....Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus:



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



FILLINGS.....Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus:



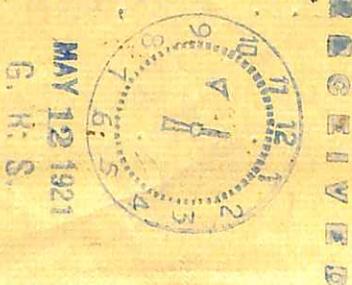
CARIES (CAVITIES).....Outline location and size of cavity, shade in thus:



DENTURES (PLATES).....Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

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

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



CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	CLEMENTS CLE	3	3 2 5
BURIED	Cemetery 636	1	5
	GRAVE 1	2	01
	ROW 20	2	20
	BLOCK 2	1	4
STATE	N.Y.	2	37
RANK	Priv	1	2
DIVISION	27	2	27
ORGANIZATION	107	3	107
ARM	Inf	1	1
MARITAL	No	1	2 m ^c L
NAME	Clements CLE	3	3 2 5
RESIDENCE	Seaford Manor 29, ny		
	STATE N.Y.	2	37
	COUNTY	2	30
	CITY	3	101
RELATION	Mother	1	1
OTHER		1	1
ELIGIBILITY	No locs Dead	1	6
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/			3 m ^c L

AUDITED
SEP 19 1932 MB

2910

QM 293 A-M

September 21, 1932.

Clements, Robert D. (Som)

Mr. Robert Clements,

Seaford Manor, LI.N.Y.

Dear Sir:

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

It will therefore be appreciated if you will advise whether or not your son, the late Private Robert D. Clements, is survived by a stepmother, and if so, her name and address and the date of your marriage to her.

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

For The Quartermaster General,

Very truly yours,

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

Encl.
Env.

mf

C

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

L

IN REPLY REFER TO QM 293 A-C

July 8, 1930.

Clements, Robert D. 636 F

Mr. Robert Clements,
Seaford Manor,
Long Island, N. Y.

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?

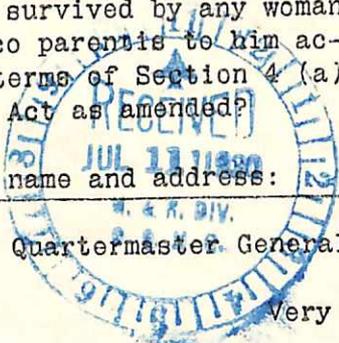
If so, give her name and address:

No

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment


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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

DATE May 14 1930

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
CLEMENTS Robert D	Pvt	1210623	Co E 107th Inf	10/16/18

STATE	New York	CTY. NO.	636	GRAVE	1	ROW	20	BLOCK	D
-------	----------	----------	-----	-------	---	-----	----	-------	---

	<u>Check relationship</u>	<u>Living - Deceased</u>	
NAME	MOTHER	: : ✓ :	<p style="font-size: 2em; margin: 0;">XC 90-826</p> <p style="margin: 0;">5/16</p> <p style="margin: 0;">6A</p> <p style="margin: 0;">⑦ Robert Clements</p> <p style="margin: 0;">Seaford Manor.</p> <p style="margin: 0;">Long Island</p> <p style="margin: 0;">N. Y.</p>
AND	STEPMOTHER (For the year prior to commencement of service)	: : : :	
ADDRESS	MOTHER THRU ADOPTION (For the year prior to commencement of service)	: : : :	
	MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	: : : :	
	WIDOW <i>Single man</i> (Who has not remarried)	: : : :	
		: : : :	
		: : : :	
		: : : :	
		: : : :	
		: : : :	

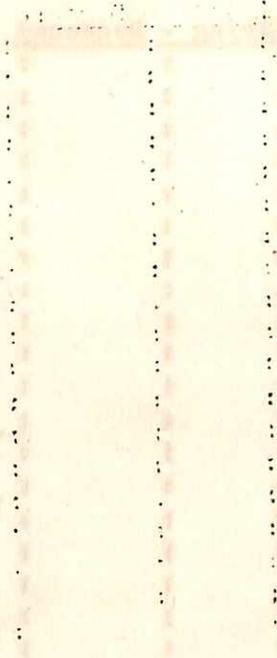
Veterans Bureau Claim Number _____
29/156/

RECEIVED

U.S. DEPARTMENT OF THE INTERIOR



TO THE DIRECTOR
FROM THE
OF THE



FOR THE DIRECTOR
OF THE
U.S. DEPARTMENT OF THE INTERIOR

U.S. DEPARTMENT OF THE INTERIOR

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Clements, Robert Daniel

May 16, 1929.

Mr. Robert Clements,
125 W. 88th St.,
New York, N. Y.

636
G. 2, Row 20,
Bl. D.

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 Robert Daniel Clements, Company B, 107th 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

September 21, 1932.

Clements, Robert D. (Son)

Mr. Robert Clements,

Seaford Manor, LI.N.Y.

Dear Sir:

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

It will therefore be appreciated if you will advise whether or not your son, the late Private Robert D. Clements, is survived by a stepmother, and if so, her name and address and the date of your marriage to her.

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

For The Quartermaster General,

Very truly yours,

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

Encl
Env.

1932 SEP - 21 - PM 4:14

not

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

July 8, 1930.

Clements, Robert D. 636 F

Mr. Robert Clements,
Seaford Manor,
Long Island, N. Y.

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:

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

Clements, Robert Daniel
636

August 27, 1929.

Mr. Robert Clements,
125 W. 88th St.,
New York, N. Y.

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

Clements, Robert Daniel

May 16, 1929.

Mr. Robert Clements,
125 W. 88th St.,
New York, N. Y.

Dear Sir:

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

The records of this office show that you are the father of the late Private Robert Daniel Clements, Company E, 107th 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.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

March 14, 1927.

CLEMENTS, Robert Daniel - Pvt.
Company E, 107th Infantry.

Mr. Robert Clements,
125 W. 88th Street,
New York, New York.

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,

K. J. Hampton
K. J. HAMPTON,
Lt. Col. Q.M.C.
Assistant.

1 Incl.
Record card.

25/560/LBM

File
5/19/27
R

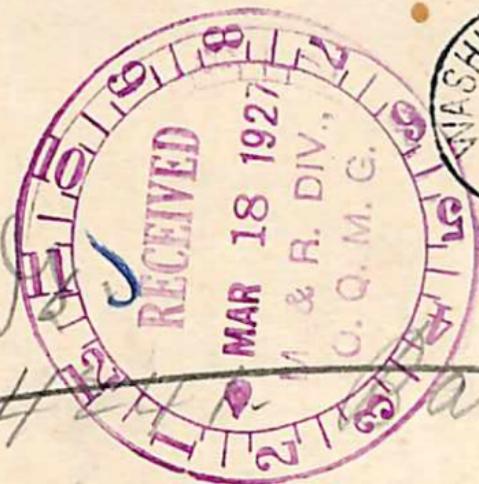
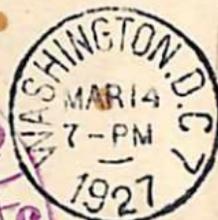
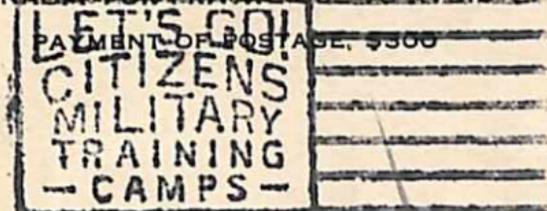
WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON, D. C.

OFFICIAL BUSINESS

PENALTY FOR PRIVATE USE TO AVOID



~~Mr. Robert Clements,~~

~~125 W. 88th Street,~~

~~New York, New York.~~

NOT FOUND F. H. 1537

Not here

Handwritten signature



REGISTER
OR
INSURE
VALUABLE MAIL



Soldier's  Overseas
Grave

Name Robert Daniel Clements

Rank Private

Organization Company E, 107th Infantry

Grave No. 2 Row 20 Block D

Cemetery Somme American Cemetery

Location Bony, Aisne, France.

Clements,

623-11
Robert Daniel

210,623

(Surname)
Pvt

(Christian name in full.)

(Army serial)

Co E, 107 Inf

(Rank and organization.)

State your relationship to the deceased

Father

Do you desire the remains brought to the United States?

No

(Yes or no.)

If remains are brought to the United States, do you wish them interred in a national cemetery?

} —

(Yes or no.)

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

(Name of person to receive remains.)

(Express office.)

(Telegraph office.)

(Number and street.)

(City or town.)

(State.)

(Sign here)

Robert Clements
175 West 88th St, N.Y.C.

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

Drawn by *[Signature]*

623-11

1-25

REVIEWED
OSP SS.

700-1-25-21

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

QM 293 A-C

March 14, 1927.

CLEMENTS, Robert Daniel - Pvt.
Company E, 107th Infantry.

Mr. Robert Clements,
125 W. 88th Street,
New York, New York.

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.

K. J. HAMPTON,
Lt. Col. Q.M.C.
Assistant.

MEM
For

25/560/EYS



To be prepared in triplicate.

DATE Oct. 10, 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 CLEMENTS, Robert D.
- 2. No. 1210623
- 3. Rank Pvt.
- 4. Org. Co. E. 107th Inf.
- 5. D.D. 10/16/18
- 6. C.D. KIA

- 10. Name _____
- 11. No. _____
- 12. Rank _____
- 13. Org. _____
- 14. (a) D.D. _____
- (b) D.B. _____

Discrepancy found upon disinterment

- 7. Grave No. 15 Sec. _____
- 8. Plot 1 Row A
- 9. _____

- 15. Grave No. _____ Sec. _____
- 16. Plot _____ Row _____
- 17. no discrepancy

- 18. Cemetery British Mil., American Plot
- 20. Dept. or County Nord
- 22. G.R.S. Hdqrs. Code No. 623

- 19. Commune or town Busigny
- 21. Country France

23. Disinterred (Date) Oct. 10, 1921

By H.T. Geiler

24. Inscription on grave marker:

Name Robert D. Clements

Rank Pvt.

Serial No. - -

Organization Co. E. 107th. Inf.

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

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. Tag corroded. Bottle record and 2 strips agree with form.

27. Condition of body Badly decomposed. Features unrecog.

28. Nature of burial Wooden box, uniform and 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 Oct. 10, 1921 By H.T. Geiler

31. Casket sealed by H.T. Geiler

Signature of Embalmer, (Supervisor) H.T. Geiler

SHIPMENT. (Show actual marking of box.) Box No. C-1632

32. Designation of body:

Name CLEMENTS, Robert D. Serial No. 1210623

Rank Pvt. Organization Co. E, 107th Inf.

33. Consigned to:

Name of Permanent Cemetery Bony, Aisne, No. 636

34. Casket boxed and marked (Date) Oct. 10, 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 J.F. Powers, 1st Lt. QMC

36. Remarks

Tag on cross read: "R.D. Clements U.S.A. 1210623"

37. Shipped from point of Operation: (Date) Oct. 10, 1921

To point of Concentration Roisel, Somme

Convoyer E. C. Helms (Name) J.F. Powers
Signature Shipping Officer J.F. Powers, 1st Lt. QMC

Oct. 10, 1921

38. Received at Railhead or Point of Concentration Date

By G.R.S. Representative Hubert W. Beyette, Capt. QMC

39. Shipped from Railhead or Point of Concentration: Date Oct 10, 1921

To Permanent Cemetery No. 636, Bony, Aisne

Convoyer E.C. Helms, (Name) Hubert W. Beyette
Signature Shipping Officer H.W. Beyette, Capt. QMC

40. Received: Date 11 OCT 1921

G.R.S. Representative J.F. Powers

41. Reinterred Oct. 16, 1922

(Date)

42. Grave No. 2, Section

43. Plot Block D Row 20

G.R.S. Representative D.E. Lowry

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

Place Busigny (Nord), France.

REPORT OF DISINTERMENT AND REBURIAL

Date Oct. 10, 1921.

1. REMAINS OF CLEMENTS, Robert D. SERIAL NUMBER 1210623
RANK Pvt. ORGANIZATION Co. E, 107th Inf.

2. Disinterred (date): Oct. 10, 1921, Gr. 15, Plot 1, Row A, Brit. Mil. Cem. 623, Busigny (Nord)
From (give complete location):
By: Group 3 Unit F.S.S.

3. Reburied (date): Oct. 16, 1922 In (give complete location): Grave no. 2, Row 20, Block D, Somme Amer. Cty. 636, Bony (Aisne)
By: Group Reburial Unit Reg. Casket & shipping case.
Nature of reburial case.

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

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

(b) Other means of identification found upon disinterment, and general remarks:
This body previously reburied by Field Section. Tag found attached to blanket. Bottle record and two strips agree with form.

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) Skull shattered.

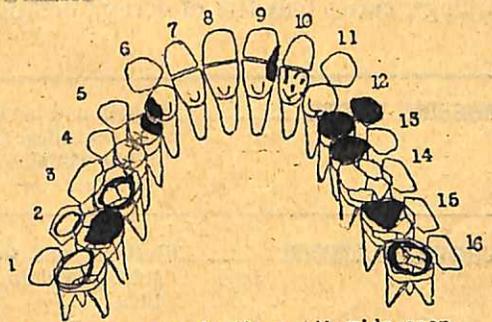
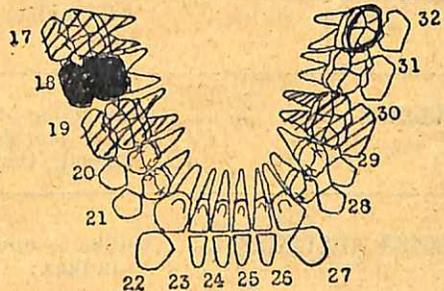


Diagram represents the mouth wide open.



(1 CAV., 2 Cav., 2 SF, 3 Cav., 5&6 SF, 9 SF, 10 Roots only, 12 CC, 13 SF, 15 SF, 16 Dec., 17 MBD, 18 CC, 19 MBD, 20 MBD, 22 Cav.)

7. Disinterment supervised by H. T. Seiler Approved: Henry Hoffman, Checker.

H. T. Seiler, Sup. Emb. (Title) J. J. Powers, 1st Lt., G.H.C.

8. Reburial supervised by Ben A. Bradford Approved: D. E. Lowry

Ben. A. BRADFORD (Title) 1st Lt. G.H.C.
Sup. Embalmer

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>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>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.

COMPILATION OF DISPOSITION OF REMAINS DATA

File # 58690

1. LOCATION INDEX CARD:

(a) Name CLEMENTS, Robert D. Ser. No. 1210623
(b) Rank Pvt. Organization Co. E, 107th Inf.
(c) Date of death 10-16-18 of death K/A

5/29/22 Examined.
Concentration.
Sound # 636
March 6-20-20

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

(a) Grave No. 3 Row C Plot 1 Sect. - TYP. DB
(b) Emerg. Address Robert Clements, (Father) 125 W. 88th St., New York, N.Y.

111. Files of soldiers dying from contagious diseases; NO CARD) CKR. J.C.W.

IV. A.G.O. DISPOSITION CARD:

Date of receipt none
(a) Name Robert Clements (b) Relationship Father
(c) Address 125 West 88 St., N.Y.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 B.E.R. Date 8/19, 1920

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

, dated
confirmed request in Par. IV. item , above, or requesting that
no correspondence.

Examiner's Initials B.E.R. Date 8/20 1920

VI. G.R.S. Files - Correspondence - shows as follows:

Father Robert Clements
125 W. 88th St. N.Y. City, 7-14-19 asks
for date of death, and grave location

(a) Cancellation memos referred to? yes H.W.

Examiner's Initials H.W. Date 8-20 1920

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 8/24 1920

Par. # 2 not to be returned (mch)

IX. CORRECTIONS

CHANGE OF ADVISE

ACTION TAKEN

Desires body be

Body to be shipped to

X. SUSPENSION REMARKS: *10-1-20 - Form 120. Father Robert Clements, 125 West 88th St., N.Y.C., requests body remain in France. 9-1-20-P.
10/1/20 Let. to Robert Clements re. widow or children of Robert D. Clements. 10/2/20 III-9. 10-11-20 Letter, from Robert Clements states Soldier not married. 10-7-20 P*

ADDRESS REPLY TO THE
QUARTERMASTER GENERAL
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
MUNITIONS BUILDING

623-11

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
WASHINGTON

CEMETERIAL DIVISION
OVERSEAS PROJECT SECTION



1-21850

File No.

October 11, 1920.

File No. 293.8 Reg. Sec. Cem. Div.
(CLEMENTS, Robert D.)

Robert Clements,
125 West 88 St.,
New York City, N.Y.

Dear Sir:-

It is requested that you inform this office with the least possible delay whether late Private Robert D. Clements is survived by widow and children, and if so, the name and address of each is desired.

By authority of the Quartermaster General:

CHARLES C. PIERCE,
Major, U.S. Army,
Chief, Cemeterial Division.

BY:

Thomas G. Hanson Jr.
THOS. G. HANSON, Jr.,
1st Lieut., Q.M.C.

OSP:SS
(1 Encls.)

Private Robert D. Clements is survived only by father, sister, and brother. It is our wish that his body remain in France.

Robert Clements

*Noted
FM 3115-
10-7-20
P*

653-11

ADDRESS ONLY TO THE
QUARTERMASTER GENERAL
WASHINGTON, D.C.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

File No.



OCT-15 1920

October 11, 1920.

File No. 238.8 Reg. Sec. Com. Div.
(CLEMENTS, Robert D.)

Robert Clements,
125 West 88 St.,
New York City, N.Y.

Dear Sir:-

It is requested that you inform this office
with the least possible delay whether the private Robert
D. Clements is survived by widow and children, and if so,
the name and address of each is desired.

By authority of the Quartermaster General:

CHARLES C. TIMMONS,
Major, U.S. Army,
Chief, Genealogical Division.

THOS. G. HANSON, Jr.,
1st Lieut., G.M.C.

OP: 88
(1 Encls.)



OCT 11 1920

[Faint handwritten notes and signatures at the bottom of the page, including the name "Robert Clements"]

1,
October 17, 1920.

File No. 293.8 Reg. Sec. Cem. Div.
(CLEMENTS, Robert D.)

Robert Clements,
125 West 88 St.,
New York City, N.Y.

Dear Sir:-

It is requested that you inform this office with the least possible delay whether late Private Robert D. Clements is survived by widow and children, and if so, the name and address of each is desired.

By authority of the Quartermaster General:

CHARLES G. PIERCE,
Major, U.S. Army,
Chief, Cemeterial Division.

BY:

T. C. U. Jr
THOS. C. HANSON, Jr.,
1st Lieut., Q.M.C.

S. C.

F/GC *Y*

OSP:SS
(1 Encls.)

MAILED

fe
OCT 1 1920

OVERSEAS PROJ. SEC.
CEMETERIAL DIVISION.

Indexed on Form No. 115
Date *10-2-20* *1119*

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

October 11, 1920.

File No. 293, 3 Reg. Sec. Cem. Div.
(CLEMENTS, Robert D.)

Robert Clements,
125 West 88 St.,
New York City, N.Y.

Dear Sir:-

It is requested that you inform this office with the least possible delay whether late Private Robert D. Clements is survived by widow and children, and if so, the name and address of each is desired.

By authority of the Quartermaster General:

CHARLES C. PIERCE,
Major, U.S. Army,
Chief, Cemeterial Division.

BY:

THOS. G. HANSON, Jr.,
1st Lieut., Q.M.C.

T. G.

F/GC 8
OSP:SS
(1 Encls.)

AUG 25 1920

F.

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

TO: Robert Clements, 125 West 88 St., New York City, N.Y.

SUBJECT: Remains of ~~Private Robert D. Clements, Co. E, 107th Inf.~~

Ser. No. 1210623

The records of this office show that you have requested that his body

Be not returned to the United States.

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)	1. <i>[Signature]</i> 2. <i>[Signature]</i> 3. <i>[Signature]</i>		
Father	<i>not request return of body</i>		
Mother	<i>[Signature]</i>		
Brothers (Name oldest first)	1. <i>[Signature]</i> 2. <i>[Signature]</i> 3. <i>[Signature]</i>		
Sisters (Name oldest first)	1. <i>[Signature]</i> 2. <i>[Signature]</i> 3. <i>[Signature]</i>		

CENTRAL DIVISION
OVERSEAS PROJECT SECTION



SEP 2 1920
RECEIVED

Date _____ Signature _____

Address _____ Relationship _____

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

(OVER)

Jan
215-10-1-27
10-1-20-1-2

1920.

I, the undersigned, am the Father and nearest living relative of the within
(Relationship)
named 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 Robt Clements

INSTRUCTIONS FOR FILLING OUT

- 1. If definite instructions 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.



NOV 5 2 1918

COMPILATION OF DISPOSITION OF REMAINS DATA

See Form 115-
made
6-20-22

I. LOCATION INDEX CARD:

File #58690.

(a) Name CLEMENTS, Robert Daniel ^{aniel (2-4-21)} Ser. No. 1210623 } TYP. DB
 (b) Rank Pvt. Organization Co. E, 107th Inf. } LS
 (c) Date of death 10-16-18. (d) Cause of death K/A. } H.W.L.

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

(a) Grave No. 3 Row C Plot 1 Sec. - TYP. DB
 (b) Emerg. Address Robert Clements (Father) 125 W88th St., New York, N.Y.

III. Files of soldiers dying from contagious diseases No Card CKR. DB

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

A.G.O. Card - Robert Clements (father) 125 West 88 St., New York City requests body be not returned to U.S. mch 2-7-21

V. Following advice forwarded to Europe by { cable on _____, 192
 letter of transmittal on 8-24-, 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 and source.	Relationship and name.	Desires.	Action taken.

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

COUNTRY FRANCE CEMETERY No. 623 SHEET No. 11

2/7/21, H.L.

58690

GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

Clements ~~#~~ 1210623 R.D.

(Surname.) (Number.) (First Name and Initials.)

Put

(Rank.)

(Organization.)

DATE OF BURIAL

Oct 18, 1918

PLACE OF BURIAL

Bucigny mil. Cem

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

map sheet 57 B, S, E,

V-10-C-4-9

GRAVE NUMBER

C 3

HOW MARKED : Name Peg?

yes

Cross?

yes

Headboard?

Bottle?

IDENTIFICATION TAGS :

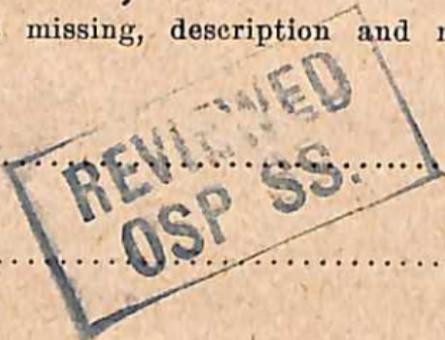
Was one buried with body?

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 :

H. P. Staff, Chaplain 119 Inf.

(Signature and Rank of Reporting Officer.)

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

3 NOV 1918

58690

2. Soldier's No. 1210623

3. ... Clements R. D.
Surname (in block letters) First Name and Initials4.
Rank Company Regt. or Corps5. ... 10/12/18 K. I. A.
Date of Death Cause, if known6. ... 10/17/18 Busigny Mil Cem
Date of Burial Cemetery7. ... Busigny
Town or Commune (in block letters) Department8. ... 3 c Amex
Grave No. Plot No. or Letter9. Name Peg? Cross? Headboard? Bottle?
Check Method of Marking10. Buried with Body? Attached to Grave Marker?
Identification Tags11. If name unknown and tags missing, give marks and description.
.....
.....REVIEWED
OSP SS.

623

12.
Map Reference, if interment is outside of cemetery

57b. V. 10. c. 49.

13.
Give name of Chaplain or Burial OfficerSigned. *J. J. Joseph King*Group *302* Unit *302* G. R. S.



Adjustment Made
FEB 9 1921

WAR DEPARTMENT
Office of the Quartermaster General of the Army
Washington

G.R.S. Form 8-W-1-0
Information requested of A.G.O.

Date 2/1/21.

File No. Requisition.

From: The Quartermaster General, U. S. Army, (Cemeterial Division)

To: The Adjutant General of the Army, 6th & B Sts., N.W., Washington, D.C.

Subject: Information required for G.R.S.

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

- a. Surname Clements ✓
- b. Christian name Robert Daniel ✓
or (Robert D.)
- c. Serial Number 1210623 ✓
- d. Organization Co. E, 107th Inf. ✓
- e. Rank Pvt. ✓
- f. Date of death 10/16/18. ✓
- g. Cause of death K/A. ✓
- h. Authority (C.O.#)
- i. Emergency address
- j. Relationship

BODY DESCRIPTION
(See page #2 of the Service Record)

- a. Age of enlistment
- b. Color of eyes
- c. Color of hair
- d. Height
- e. Weight
- f. Permanent marks and physical defects at enlistment (Old fractures or breaks)

DENTAL CHARTS
(See Physical report of examination prior to enlistment)

a. Strike out teeth missing

8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
upper right								upper left							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
lower right								lower left							

FILE

Rec'd World War Div
Date FEB 2 1921

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

BY: *H. J. Conner*

H. J. CONNER,
1st. Lieut. Q.M.G.
S & S Div, A.G.O.

CEMETERY NO: 623
SHEET NO: 11
TYPED BY: I.W.

Donnelly *US EPD W 7* FEB 2 1921 6
2/3/21

FEB 4 1921
RECEIVED

Address reply to
DIRECTOR OF PURCHASE & STORAGE
Munitions Building

WAR DEPARTMENT
OFFICE OF THE DIRECTOR OF PURCHASE AND STORAGE
WASHINGTON

HHH

File 58690
FILES

293.3 (Clements, Robert D., Pvt.)G.R.S.

Oct. 13, 1919.

Graves Registration Service.

Mr. Robert Clements, 125 West 88th St., New York City.

Location of Grave.

REVIEWED
OSP SS.

1. Your communication of July 14, 1919, has been referred to us by the Adjutant General of the Army for information concerning the grave location of your son.

2. The records of this office show Private Robert D. Clements, #1210623, Co. E, 107th Infantry, died October 16, 1918, and buried October 17, 1918 in Grave 3, Row C, Plot 1, British Military Cemetery, American Plot, Busigny, Nord.

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 14 1919

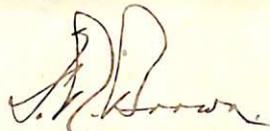
201 (Clements, Robert D) DRD 1st Ind.

PJ 1-213

War Dept., A.G.O., September 18, 1919.--To the Graves Registration Service, Quartermaster General's Office, Cemeterial Branch.

1. For reply direct to the writer of the foregoing communication, relative to the location of grave in the case of Private Robert D. Clements, Co. E. 107th Inf.
2. The records of this office show that this soldier was killed in action October 18, 1918.
3. The writer has been advised of the action taken.

By order of the Secretary of War,


Adjutant General.



201 (Clements, Robert D) DRD 1st Ind.

PJ 1-213

War Dept., A.G.O., September 18, 1919.--To the Graves Registration Service, Quartermaster General's Office, Cemeterial Branch.

1. For reply direct to the writer of the foregoing communication, relative to the location of grave in the case of Private Robert D. Clements, Co. E. 107th Inf.

2. The records of this office show that this soldier was killed in action October 18, 1918.

3. The writer has been advised of the action taken.

By order of the Secretary of War.

F. R. Brown.

Adjutant General.

REVIEWED
OSP SS.

July 14, 1919.

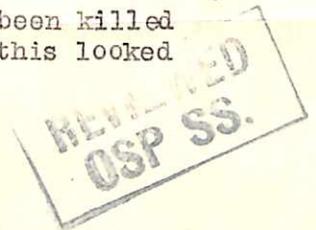
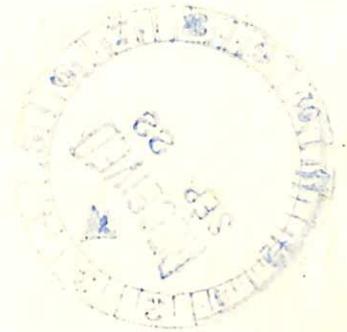
P. C. Harris,
Adjutant General.

Dear Sir:

I received your letter of July 11 in which you advise me my son Private Robert D. Clements, Co. E. 107th Infantry was not killed on October 16 as telegram stated, but on Sept. 29th. This is not correct as I received a letter from my son dated Oct. 4th. Please let me know immediately if my son has been killed and what date and where he is buried. Please have this looked up immediately and let me know as soon as possible.

Sgd. Robert Clements,

125 West 88th St., N. Y. City.



CEMETERY DIVISION
REGISTRATION SECTION

FILE

January 30 1922

MEMO FOR:
Cards Department.

1.
CASE OF:

~~Co. E., 107th Infantry~~
ORGANIZATION (Old)

~~CLEMENTS., 1210623 Robert Daniel., 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.	1/27/21	623	D- 30090
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 Lannon

Card.,
(Department)

5 x 8 card was sent to file.

Corrections made
on Organization
File Card:

By A.B.
S/3324/LML