

fei

To The A. G. O.

8353

G.R.S. Form #114-B

JUN 1 - 1928

DATE 10-29-21

1. NAME COLLIER, Orion E. *See name* SERIAL No. 2025346

RANK Sgt. ORGANIZATION Co. D 39th Inf. & DIVISION 4

GRAVE LOCATION Meuse-Argonne Amer. Cty., Romagne/s/Montfaucon 1232, Sec. 52  
CTY. NAME (Meuse) NUMBER

126 GRAVE SEC. 52 ROW 3 PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 24 BAC *Plot A*, Malancourt Mouse *city #1046*

GRAVE COMMUNE DEPT.

COORDINATES 35SE 275.3N 313.55E

CONCENTRATED TO 5/9/19 126 GRAVE 52 ROW 3 PLOT

DATE GRAVE ROW PLOT

Meuse Argonne 1232

CEMETERY CTY. NUMBER

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

Tag on cross data f-1/pfb

DATE OF DEATH Sept. 26, 1918 ✓

SUBSEQUENT REBURIALS STATE FROM WHICH HE CAME Texas ✓

DATE GRAVE ROW PLOT CEMETERY ✓

MEDALS OR DECORATIONS AWARDED none ✓

DATE GRAVE ROW PLOT CEMETERY

M. B. BIRDSEVE

1st Lt., Q.M. Corps, 1918 ✓

SIGNATURE, AREA SUPERVISOR

3. FINAL GRAVE LOCATION 10-29-21 33 GRAVE 25 ROW Block E.

DATE GRAVE ROW PLOT

Meuse-Argonne Amer. Cty. 1232, Romagne-sous-Montfaucon, Meuse.

CEMETERY

See'd World War Div.

APR 2 1928

AUDITED BY  
2014-13-WS

JUN 9 1928  
WORLD WAR DIV.

no  
4/9/28

# 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.

Co: D. 39th. infantry.  
4th. Division

Collier Orion E. -Sgt. 2021875.

Killed in action Sept-26-1918, in the Argonne . He was lying down on crest of hill in front line. His men were being hit by machine gun bullets when he raised up on elbows to locate gun with field glasses, he was hit in stomach. He lived about twenty minutes after being hit.

Informant: Reilly Mortimer -Pvt. 1cl. 5737570  
Co: D. 39th. Inf.

Home: 406 Games St.  
Elmira, N.Y.

Signed: IG Towson, Capt.  
39th. Infantry.

Emergency address:  
Mrs. Annie Collier  
Foresville, Texas.  
R.F.D. 5.

MB.

CODE SLIP



HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME <i>Collins</i>	<i>col</i>	3	<i>3-5-2</i>
<i>Orion E.</i>	CEMETERY <i>1232</i>	1	<i>1</i>
BURIED	GRAVE <i>33</i>	2	<i>33</i>
	ROW <i>25</i>	2	<i>25</i>
	BLOCK <i>E</i>	1	<i>5</i>
STATE	<i>Texas</i>	2	<i>49</i>
RANK	<i>Sgt.</i>	1	<i>2</i>
DIVISION	<i>4</i>	2	<i>04</i>
ORGANIZATION	<i>39</i>	3	<i>039</i>
ARM	<i>Inf</i>	1	<i>1</i>
MARTIAL ( <i>Step-sister</i> )	<i>No</i>	1	<i>2</i>
NAME <i>Rounds</i>		3	
<i>Mrs. A.C.</i>	STATE	2	
<i>P.O. Box 244</i>	COUNTY	2	
<i>RESIDENCE</i>	CITY	3	
<i>Ft. Sam Houston, Tex.</i>			
RELATION <i>Sm Inelig</i>	<i>mother</i>	1	<i>1</i>
<i>married 1923</i>		1	
OTHER			
ELIGIBILITY	<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**  
 APR 20 1932  
*RS*

*M.S.H.*

*da*

Collier, Orion E. C 69 678 Sgt. Co.D, 39th Inf. Texas

Natural mother?

died before 1918

Single

father died 11-11-27

Seebode

S m is living

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON

IN REPLY REFER TO QM 293 A-C

Collier, Orion E. - 1232 SS

Mrs. A. C. Rounds  
Hdq. 2nd Division  
Fort Sam Houston, Texas

July 8, 1930

Dear Madam:

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:

See explanatory note  
on reverse side hereof:

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

Mrs. Alma Collier, stepmother of Orion E. Collier, is still alive, being the widow of Mr. Joseph J. Collier, who is the father of Orion. However, Orion never knew of this stepmother as they were married (Mr. & Mrs. Collier), some time in 1923, several years after Orion's death. Mr. Joseph Collier died two or three years ago, at which time Mrs. Collier came to live with me.

Col. A. C. Rounds  
Hqs. 2nd Division  
Fort Sam Houston, Texas

Dear Madam:  
Mrs. A. C. Rounds,  
P.O. Box 244,  
Ft. Sam Houston, Texas.

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 cemetery 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.

NO.	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:
See explanatory note on reverse side hereof:	3. Is the deceased survived by any woman who stood in loco parentis to him according to the terms of Section 10 of the enclosed Act as amended? If so, give her name and address:



*Alma Collier*  
Assistant  
Captain, U.S. Corps

Enclosure  
Envelope  
AGF  
Amendment

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Collier, Orion E.

August 30, 1929

Mrs. A. C. Rounds,  
Hdq. 2nd Division,  
Fort Sam Houston, Tex.

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 Administratrix of the estate of the late Sgt. Orion E. Collier, Co.D. 39th Inf., whose remains are now interred in the Aisne-Marne Amer. Cty. Belleau, Aisne, France.

*Mrs. A. C. Rounds*

Will you please fill in the answers to the following questions in the space provided on this letter, and return to this office in the enclosed envelope which requires no postage?

Write answers in space below:

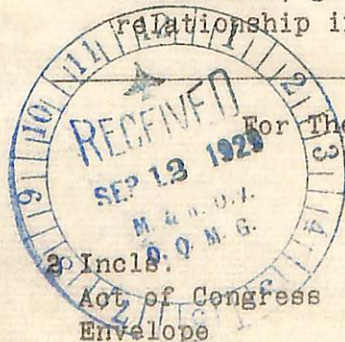
1. Is the deceased survived by a widow who has not since remarried?

*No.*

2. If so, give her complete address.

3. 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.

*# Stepmother  
Mrs. J. J. Collier  
1311 Austin St.  
San Antonio,  
Texas*



For The Quartermaster General,

*# See note on reverse side hereof.*

Very truly yours,

*John T. Harris*  
JOHN T. HARRIS,  
Major, Q. M. Corps,  
Assistant.

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 223 A-0

Mrs. A. C. Rounds is not administratrix of the Orion Collier estate but was appointed temporary administratrix of the estate of Mr. J. J. Collier father of Orion. Mr. J. J. Collier, father, died at San Antonio, Texas, on November 11, 1927.

Mrs. Rounds is daughter of Mrs. Collier, who married Mr. J. J. Collier on or about May 16, 1923.

The marriage of Mr. Collier or Mrs. Rounds' mother made Mrs. Collier Orion's stepmother although they never knew each other, Orion's death taking place many years before the above mentioned marriage.

Any further information required may be obtained by writing Mrs. A. C. Rounds, P. O. Box 244, Fort Sam Houston, Texas.

Your attention is invited to an Act approved March 2, 1925, entitled "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 Administratrix of the estate of the late Sgt. Orion E. Collier, Co. D, 324th Inf., whose remains are now interred in the American War Cemetery, Aisne, France.

Will you please fill in the answers to the following questions in the space provided on this letter, and return 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?
2. If so, give her complete address.
3. 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.

*Mr. J. J. Collier*

*1311 West 24th St.*

*Fort Sam Houston, Texas*

I am very sorry to hear of your loss.

Very truly yours,  
John T. Harris  
Major, 6th Corps  
Assistant



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

69678

DATE 7-23-29

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Collier, Orion E.	Sgt.	2025346	Co. D, 39th Inf.	9-26-18

STATE	CTY. NO.	GRAVE	ROW	BLOCK
	1232	33	25	E

NAME AND ADDRESS	Check relationship	Living - Deceased			
		Living	-	Deceased	
	MOTHER	:	:	:	Father Deceased 11-11-27
	STEPMOTHER (For the year prior to commencement of service)	:	:	:	Mother Deceased no date ?
	MOTHER THRU ADOPTION (For the year prior to commencement of service)	:	:	:	Step Sister Adm of Estate
	MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	:	:	:	Mrs A.C. Rounds Hdq. 2nd Division Fort Sam. Houston Texas
	WIDOW (Who has not remarried)	:	:	:	

Veterans Bureau Claim Number C69678  
29/156

7/27/29 *Am*

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Collier, Orion E. - 1232 SS

July 8, 1930

Mrs. A. C. Rounds  
HQ. 2nd Division  
Fort Sam Houston, Texas

Dear Madam:

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

Collier, Orion E.

August 30, 1929

Mrs. A. C. Rounds,  
Hdq. 2nd Division,  
Fort Sam Houston, Tex.

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 Administratrix of the estate of the late Sgt. Orion E. Collier, Co.D. 39th Inf., whose remains are now interred in the Aisne Marne Amer. Cty. Belleau, Aisne, France.

Will you please fill in the answers to the following questions in the space provided on this letter, and return 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?
2. If so, give her complete address.
3. 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.

For The Quartermaster General,

Very truly yours,

2 Incls.  
Act of Congress  
Envelope

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

IN REPLY REFER TO QM 293 C-R

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

September 6, 1923.

Mrs. Anna Collier,  
R.F.D. #2, Box 90,  
Floresville, Texas.

Dear Madam:

The Quartermaster General desires you to be informed that the permanent grave of Sergeant Orion E. Collier, Company D, 39th Infantry, is Grave 33, Row 25, Block E, Meuse-Argonne American Cemetery, Romagnous-Montfaucon (Meuse), France.

This is one of the permanent American military cemeteries to be maintained by this Government in Europe. Each grave will be marked by a headstone of white marble, of suitable design, with name, rank, division, organization, date of soldier's death and State from which he came. 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.

You are assured in effecting removal of the remains, the utmost care and reverence were exercised and more than willingly accorded by those who performed this sacred duty. The grave of the deceased will be perpetually maintained by this Government in a manner befitting the last resting place of our heroes.

Very truly yours,

*H. H. Cheal*  
H. H. CHEAL  
Assistant.

23/592/ARK

RD

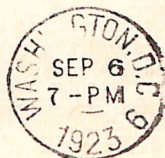
*R15/24*

WAR DEPARTMENT.

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

WASHINGTON, D. C.

OFFICIAL BUSINESS



PENALTY FOR PRIVATE USE \$300

PENALTY FOR PRIVATE USE,

TO AVOID PAYMENT OF POSTAGE \$300

INSURE VALUABLE MAIL

Mrs. Anna Collier,

~~Wash~~ R.F.D. #2, Box 90,

Elcoresville,

Texas.

wife of J. J. Collier deceased  
R 3



1923

Dup.

Collier, Orion E.

2,025,346

(Surname)

(Christian name in full.)

(Army serial no.)

Sgt.

Co. D, 39th 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?

no

(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:

no.

(Name of person to receive remains.)

(Express office.)

(Telegraph office.)

(Number and street.)

(City or town.)

(State.)

(Sign here)

J. J. Collier

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

checked 10/14

50-21

Mrs. Annie Collier

Floresville, Texas

R#2, Box 90.

Document by AP  
1732 No 82 - 87  
4-30-21

In reply refer to:  
QM 293 C-R

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

September 6, 1923.

Mrs. Anna Collier,  
R.F.D. #2, Box 90,  
Floresville, Texas.

Dear Madam:

The Quartermaster General desires you be informed that the  
is Grave 25, Block E, Mouse-Argonne American Cemetery, Romagne-  
sous-Montfaucon (Meuse), France.

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

In effecting removal, the utmost care and reverence were  
exacted and more than willingly accorded by those performing this  
sacred duty. The grave of the deceased will be perpetually main-  
tained by this Government in a manner befitting the last resting  
place of our heroes.

Very truly yours,

Assistant.



SEP 6 1923  
M. H. W.

RD

23/584/ARK

COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

File #26204

(a) Name COLLIER, Orion E. Ser. No. 2025346  
(b) Rank Sgt. Organization Co. D, 39th Infantry  
(c) Date of death 9/26/18 (d) Cause of death K/A

TYP. DMA  
CKR. 2/8/22

Exhumed  
for Concentration  
Munich-Argonne 2/23/22  
att 2/27/22

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

(a) Grave No. 126 Row - Plot 3 Sec. 52 TYP. DMA  
(b) Emerg. Address Mrs. Anna Collier (mother) RFD 2, Box 90, Floresville, Texas

III. Files of soldiers dying from contagious diseases CKR. B. J.

IV. A. G. O. DISPOSITION CARD:

Date of receipt none

(a) Name J. J. Collier (b) Relationship father  
(c) Address Omitted  
(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 HP Date 4-30, 1920

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

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

Examiner's Initials Date, 1920

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

no request for disposition

(a) Cancellation memos referred to? yes

Examiner's Initials HP Date 4-30, 1920

COUNTRY FRANCE CEMETERY No. 1232-sec. 52 SHEET No. 37

Checked with 5/10/21



Name .....

Rank .....

Serial No. ....

Org. ....

Remarks .....

A. G. O. Card & Corr. ....

Discrepancies .....

Name .....

Rank .....

Serial No. ....

Org. ....

Remarks .....

G. R. S. Corr .....

Discrepancies .....

Name .....

Rank .....

Serial No. ....

Org. ....

Remarks .....

Checkers .....

Discrepancies .....

Name .....

Rank .....

Serial No. ....

Org. ....

Remarks .....

*checked 2/17*

S-1783/MB

*5-2-21*

# COMPILATION OF DISPOSITION OF REMAINS DATA

File #26204

See Form 115  
Att 2/27/22

**I. LOCATION INDEX CARD:**

(a) Name	COLLIER, Orion E.	Ser. No.	2025346	} DMA TYP. .... B. J.
(b) Rank	Sgt.	Organization	Co. D, 39th Infantry	
(c) Date of death	9/26/18	(d) Cause of death	K/A	

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

(a) Grave No.	126	Row	-	Plot	3	Sec.	52	TYP.	DMA
(b) Emerg. Address	Mrs. Anna Collier (mother) RFD #, Box 90, Floresville, Texas								

III. Files of soldiers dying from contagious diseases ..... CKR. B. J.

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

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

V. Following advice forwarded to Europe by { cable on ..... 192  
 letter of transmittal on 5/12/21 ..... 192  
*Section # 252*  
*Case # 2* Not to be returned AD

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

**VII. SUPPLEMENTARY REQUESTS.**

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

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

COUNTRY ..... CEMETERY No. .... SHEET No. ....

Concentration.

G. R. S. Form. No. 16-A

Place Romagne 1232.

REPORT OF DISINTERMENT AND REBURIAL

Date Oct. 28, 1921.

1. REMAINS OF COLLIER, Orion E. SERIAL NUMBER 2025346  
RANK 1st Sgt ORGANIZATION Co. D, 39th Inf.

2. Disinterred (date) : Oct. 28, 1921 From (give complete location) : gr 126, sec 52, plot 3.

By : Group 9 Unit sec 1

3. Reburied (date) : Oct. 29, 1921. In (give complete location) : Row 25 Block E Grave 33, Cem. 1232.

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

4. Report as to nature of original burial and condition of body upon disinterment :  
wooden box and burlap and uniform, badly decomposed, features not recognizable

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

(b) Other means of identification found upon disinterment, and general remarks :  
Grave marker only. stake tag placed upon body.

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

(a) Height (actual measurement) impossible to determine.

(b) Weigh, (estimated) do

(c) Hair—Color apparently lgith brown.

Quantity plentiful

Characteristics straight.

(d) Hair on face—Color none.

Location do

Quantity do

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

do

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

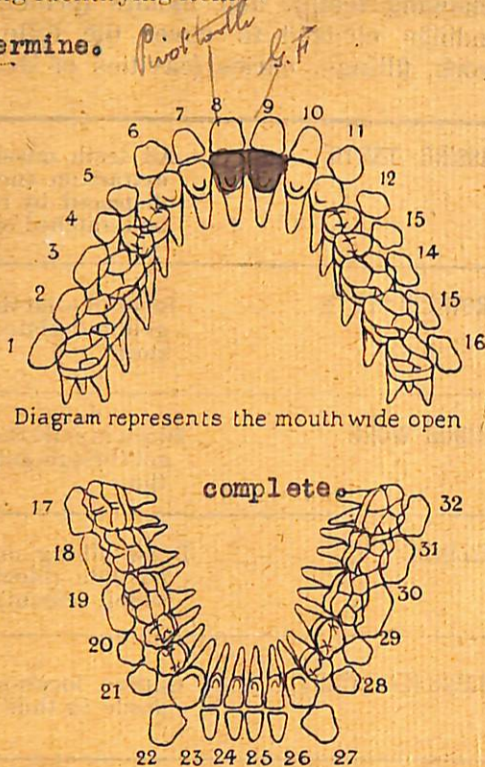
none visible.

7. Disinterment supervised by H.E. Strong

Approved : Geo. C. Bland  
Geo. C. Bland 1st Lt. Q.M.C.  
(Title)

8. Reburial supervised by A. U. Dufault  
WS A. U. Dufault.






Approved : Geo. C. Bland  
(Title) Geo. C. Bland,  
1st. Lieut. Q.M.C.



## 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 Questions 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.



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

STATION Romagne s/ Montfaucon

To be prepared in triplicate.

DATE Oct. 28, 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>COLLIER, Orion E.</u>	10. Name
2. No. <u>2025346</u>	11. No.
3. Rank <u>Sgt.</u>	12. Rank
4. Org. <u>Co. D, 39th Inf.</u>	13. Org.
5. D.D. <u>Sept. 26th</u>	14. (a) D.D.
6. C.D. <u>KIA</u>	(b) D.B.

Discrepancy found upon disinterment

7. Grave No. <u>126</u> Sec. <u>52</u>	15. Grave No.	Sec.
8. Plot <u>3</u> Row	16. Plot	Row
9.	17. <u>No discp</u>	

18. Cemetery Meuse-Argonne Amer. 19. Commune or town Romagne/s/Montfaucon

20. Dept. or County Meuse 21. Country France

22. G.R.S. Hdqrs. Code No. Cty. #1232, Sec. 52

23. Disinterred (Date) 10-28-21 By H.E. Strong

24. Inscription on grave marker:

Name Orion E. Collier Serial No. \_\_\_\_\_

Rank Sgt. Organization Co. D, 39th Inf.

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

Archie A. Pope  
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).

Grave marker only. Stake tag placed upon body.

27. Condition of body Badly decomposed features unrecognizable

28. Nature of burial US Uniform, burlap and pine box.

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 10-28-21 By H.E. Strong

31. Casket sealed by H.E. Strong

Signature of Embalmer, (Supervisor) H.E. Strong

SHIPMENT. (Show actual marking of box.) Box No. **C-14110**

32. Designation of body:

Name **COLLIER, Orion E.**

Serial No. **2025346**

Rank **Sgt.**

Organization **Co. D, 39th Inf.**

33. Consigned to:

Name of Permanent Cemetery **Meuse-Argonne Amer./1232, Romagne/s/Montfaucon**

**10-28-21**

**H. E. Strong**

34. Casket boxed and marked (Date)

By

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

*Geo. C. Bland*  
**Geo. C. Bland, 1st Lt. QMC**

36. Remarks

37. Shipped from point of Operation: (Date)

**10-28-21**

To point of Concentration

**Morgue, Romagne**

Convoyer

**W. J. Royed**

(Name

Signature Shipping Officer

*W. J. Royed*  
**W. J. Royed, Capt. QMC**

38. Received at Railhead or Point of Concentration: Date

By G.R.S. Representative

39. Shipped from Railhead or Point of Concentration: Date

To Permanent Cemetery

Convoyer

(Name

Signature Shipping Officer

40. Received: Date

G.R.S. Representative

41. Reinterred **Meuse Arg. Cemetery. 1232** **Oct. 29, 1921.**

(Date

42. Grave No. **33**

Section

43. Plot **Block E.**

Row **25**

G.R.S. Representative

*Geo. C. Bland*  
**Geo. C. Bland,  
1st. Lieut. QMC.**

Place \_\_\_\_\_

NEUFCHATEAU

15th June, 1919

REPORT OF DISINTERMENT AND REBURIAL

26204

Remains of:

Name: COLLIER Orien

Number 2025346

Rank: Sgt.

Organization Co. D39 Inf.

Disinterment and Reburial made by Group:

Unit

Disinterred (Date)

From (Give complete location)

9th May, 1919

B/A Cty Grave No1 24 MA LANCURT MEUSE

35 SE E 313.55 N 275.3

Reburied (Date)

In: (Give complete location)

9th May, 1919

Grave No. 186 Sect. 52 Plot 3

1232

ARGONNE AMERICAN CTY NO. 1232

ROMAGNE MEUSE

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

Body buried in uniform; in fair condition.

Was any identification tag found upon the body? No

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

10210

Notes

If upon disinterment, effects are found on 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 of identity in doubtful cases, notation will be made and reported to Chief, Graves Registration Service.

10210

Supervised by: Lt. Lewis

R. H. ROSENTHAL

2nd Lieut. O.M.C.U.S.A.

C.O. Group Unit

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26204

1. U. S. Form No. 1. Hq. G S File

2. Soldier's No. 2025346

3. COLLIER ORIEN

Surname (In Block Letters) First Name and Initials

4. SERGEANT A 39 INF

Rank Company Regt. or Corps

5. Date of Death Cause, if known

6. AMERICAN NO 1

Date of Burial Cemetery

7. MALANCOURT MEUSE

Town or Commune (In Block Letters) Department

8. 17

Grave No. Plot No./or Letter

9. Name Peg?..... Cross?..... Headboard? X... Bottle?.....  
Check Method of Marking

10. Buried with Body? YES Attached to Grave Marker? YES  
Identification Tags

11. If name unknown and tags missing, give marks and description

Sketch X 15 M. OFF ROAD FROM MALANCOURT MONT FAUCON RD. 11 KILO

12. JUNCTION OFF ROAD FROM CUISY

Map Reference, if interment is outside of cemetery

275.3N + 313.7E 35. S.E.

13. 2 KILO N.W. OFF MALANCOURT

Give name of Chaplin or Burial Officer

Signed GEORGE DIE KHOFF

Group 4 Unit 306 G. R. S.

1114



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