

FULL NAME COMINA, Albert ✓

RANK Pvt. ✓ SERIAL 2779645 ✓

DIVISION & ORGANIZATION Co. D, 363 + nf. ✓ 91st Div

DATE OF DEATH 11/20/18 ✓

STATE FROM WHICH HE CAME Utah

MEDALS OR DECORATIONS AWARDED. None shown

FINAL GRAVE LOCATION.....
Date Grave Row Block

Flander's Filed Cty. 1252.

Cemetery

Foreign

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Comina *2779645* *Albert*
(Surname.) (Number.) (First Name and Initials.)

Pvt *C.D.* *363 Inf.*
(Rank.) (Organization.)

DATE OF BURIAL *Nov. 21 1918*

PLACE OF BURIAL *Staden Belgium*

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

Am. Cem. North end 1/1

Town 100ft from road.

GRAVE NUMBER *117*

HOW MARKED: Name Peg? Cross?

Headboard? Bottle?

IDENTIFICATION TAGS:

Was one buried with body? *yes*

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

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

REPORTED BY:

Wm R Campbell Chaplain A19C
(Signature and Rank of Reporting Officer.)

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

Date June 17, 1919REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name COMINA, AlbertNumber ~~XXX~~ 2779645Rank PvtOrganization: Co. D, 363 Inf.Disinterment and Reburial made by Group 3 Unit 302

Disinterred (Date) _____ From: (Give complete location)

6-5-19 Grave 116, Row 9, A.E.F. Cem., Staden, West Flanders, Belgium.Sheet Roulers-Thielt 168.5E 476.8N

Reburied (Date) _____ in: (Give complete location)

6-5-19 Grave 15, Plot C, American Mil. Cem., Waereghem, Westv Flanders,Belgium. B.M. 1/40,000. Sheet 29-D-28-d-6-9.5Report as to nature of original burial and condition of body upon
Body buried in blanket, badly de composed.Was one identification tag found on the body? yesWhat other means of identification were found upon the body? none

Note:

If upon disinterment, effects are found upon the bodies, they 115744
CO. FILMED NID
be promptly sent to the Effects Depot direct, as is required by G. O.
170, G. I. O., 1918, after being carefully examined for clues to identify
in doubtful cases, notation whereof will be made and reported to Chief,
Graves Registration Service.

Supervised by: Sgt. E. C. Crowley, Engrs. H. B. Peltor, 2nd Lieut., memCUSAC. O. Group 3 Unit 302

RECEIVED
RECEIVED
11 JUL 1970
OIG/OLM
G.R.

CODE SLIP

green carbon

| HEADING | SUB-HEADING | NO. OF COLS | CODE |
|-----------------|--|-------------|------------|
| NAME | <i>Comina</i> | 3 | <i>353</i> |
| BURIED | CEMETERY | 1 | <i>8</i> |
| | GRAVE | 2 | <i>08</i> |
| | ROW | 2 | <i>01</i> |
| | BLOCK | 1 | <i>2</i> |
| STATE | <i>Utah</i> | 2 | <i>52</i> |
| RANK | <i>Art</i> | 1 | <i>2</i> |
| DIVISION | <i>91</i> | 2 | <i>91</i> |
| ORGANIZATION | <i>363</i> | 3 | <i>363</i> |
| ARM | <i>Inf</i> | 1 | <i>1</i> |
| MARITAL | <i>Mar.</i> | 1 | <i>7</i> |
| NAME | <i>Comina</i> | 3 | <i>353</i> |
| Mrs. Redenta M. | STATE | 2 | |
| | RESIDENCE | 2 | |
| | CITY | 3 | |
| RELATION | <i>All rel. foreign</i> <i>mother</i> | 1 | <i>1</i> |
| OTHER | | 1 | |
| ELIGIBILITY | <i>Foreign</i> | 1 | <i>4</i> |
| NATIVITY | | 1 | |
| RACE | | 1 | |
| ENGLISH | | 1 | |
| ATTENDANT | | 1 | |
| HEALTH | | 1 | |
| NO. OF SONS | | 1 | |
| DATE OF | MO. | 1 | |
| . TRIP | YR. | 1 | |
| ACCEPTANCE | Country | 1 | |
| 29/514/ | <i>Italy</i> | 2 | <i>01</i> |

AUDITED
MAR 28 1938
RAM

EBM

PSB

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

DATE _____

NAME _____ RANK _____ SERIAL _____ ORGANIZATION ⁴⁻³⁰⁻²⁹ DATE OF DEATH _____

Foreign
COMINA, Albert Pvt. 2779645 Co. D, 363rd Inf. 11-20-18
STATE CTY. NO. GRAVE ROT BLOCK

Utah 1252 8 1 8

Check relationship Living - Deceased

MOTHER : : :

STEPMOTHER (For the year prior to commencement of service) : : :

NAME : : :

AND MOTHER THRU ADOPTION (For the year prior to commencement of service) : : :

ADDRESS : : :

MOTHER IN LOCO PARENTIS (For the year prior to commencement of service) : : :

WIDOW (Who has not remarried) : : :

Foreign

*File
773*

Veterans Bureau Claim Number _____

29/156

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

QM 293 A-C

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,
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,

Assistant,
R.L. FOSTER RD

1-Incl.
Record card.

O.Q.M.G.
Central Mail & Files Bx.



JAN 4 1924
H.B.

293
Comina, Redenta

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

1252-109 jdb
SEP 2 1920

Rush Answer
G.R.S. Europe

FROM: Chief, Graves Registration Service, Q.M.C.
TO: Celeste Casera, Main St., Bingham, Utah

SUBJECT: Remains of Pvt. Albert Comina, Co. D. 363rd Inf. (2779645)

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

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

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

By authority of the Quartermaster General:

CHARLES C. PIERCE, *9-20-20*
Major, U.S.A. *12-C*

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 | <i>Single men</i> | | |
| Soldier's Children | 1. <i>(blank)</i> 2. <i>(blank)</i> 3. <i>(blank)</i> | | |
| Father | <i>Dead</i> | | |
| Mother | <i>Mianna Comina Redenta</i> | <i>Valtayo</i> | <i>(Prov. Belluno Italy)</i> |
| Brothers | 1. <i>One Brother Comina</i> 2. <i>Teodoro</i> 3. <i>(blank)</i> | | |
| Sisters | 1. <i>one sister</i> 2. <i>dont know the name</i> 3. <i>(blank)</i> | | |

CEMETERIAL DIVISION
OVERSEAS PROJECT SECTION



Date: *Sept. 10-1920*
Signature: *Guy Della Lucia*
Address: *521 Main St.*
Relationship: *acting for the Deceased*
IMPORTANT: - CAREFULLY read instructions before filling out this paper. (OVER)

Grigham, W. Sep. 10 - 1920.

I, the undersigned, am the Acting for claimant 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)

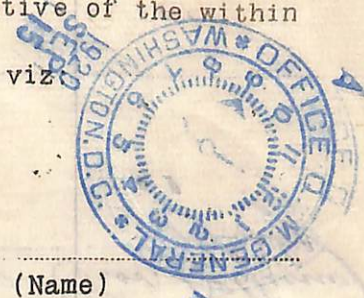
(R.R. Station)

(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



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.

To be prepared in triplicate.

DATE June 19, 1922

REPORT OF DISINTERMENT, PREPARATION, SHIPMENT AND REBURIAL OF BODY

DISINTERMENT

COMPARATIVE REPORT

Records of G.R.S. Headquarters.

Discrepancy found upon exhumation of body

1. Name Comina, Albert

10. Name

2. No. 2779645

11. No.

3. Rank Pvt.

12. Rank

4. Org. Co. D. 363rd. Inf

13. Org.

5. D.D. Nov. 20th 18

14. (a) D.D.

6. C.D. ~~DOD~~ Pneumonia

(b) D.B. none

Discrepancy found upon disinterment

7. Grave No. 151 Sec.

15. Grave No. Sec.

8. Plot C Row

16. Plot Row

9.

17. none

18. Cemetery American

19. Commune or town Waereghem

20. Dept. or County

21. Country Belgium

22. G.R.S. Hdqrs. Code No 1252

23. Disinterred (Date) June - 19, 1922

By Edmo Maire

24. Inscription on grave marker:

Name COMINA, Albert.

Serial No. 2779645

Rank Pvt.

Organization Co. D 363rd Inf,

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

L.R. Knasin
Signature Junior Technical Assistant

L.R. Knasin.

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).
Body tag checks.

27. Condition of body Badly decomposed, features unrecognizable

28. Nature of burial Wooden box, burlap.

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? none

30. Body prepared and placed in casket: Date June 19, 1922 By Edmo Maire

31. Casket sealed by Edmo Maire

Signature of Embalmer, (Supervisor)

Edmo Maire
Edmo Maire

AUDITED BY
Edmo Maire
6/17/23

SHIPMENT. (Show actual marking of box.) Box No. C-895

32. Designation of body:

Name Comina, Albert Serial No. 2779645

Rank Pvt Organization Co. D. 583rd Inf

33. Consigned to:

Name of Permanent Cemetery Flanders Field American Cemetery #1252, Waereghem, Belgium.

34. Casket boxed and marked (Date) June 19, 1922 By Edmo Maire

35. I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.

Signature of G.R.S. Inspector O.E. Davis, 1st Lt QMC.

36. Remarks

None

37. Shipped from point of Operation: (Date) June 19, 1922

To point of Concentration _____ (Name)

Convoyer _____ Signature Shipping Officer

38. Received at Railhead or Point of Concentration: Date _____

By G.R.S. Representative _____

39. Shipped from Railhead or Point of Concentration: Date _____

To Permanent Cemetery Flanders Field, Amer Cem. 125 2 Waereghem Belgium. (Name)

Convoyer _____ Signature Shipping Officer O.E. Davis, 1st Lt QMC.

40. Received: Date June 19, 1922

G.R.S. Representative W.D. Cleary
W.D. Cleary, Chaplain.

41. Reinterred June 19, 1922. (Date)

42. Grave No. 8 Section _____

43. Plot BLOCK B Row 1

G.R.S. Representative W.D. Cleary
W. D. Cleary
Chaplain, U.S. Army

Place Waereghem, 1252.

REPORT OF DISINTERMENT AND REBURIAL

Date June 19, 1922

1. REMAINS OF COMINA Albert. SERIAL NUMBER 2779645
RANK Pvt. ORGANIZATION Co. D. 363rd Inf.

2. Disinterred (date) : June 19, 1922 From (give complete location) : Gr. 151 Plot C. Cem. 1252

By : Group 4 Unit Sec 2. Black

3. Reburied (date) June 19, 1922. In (give complete location) Gr. 8 Plot B Row 1 Flanders Field American Cemetery No. 1252 Waereghem, Belgium.
In regulation metallic casket and shipping case.
Bottle record placed with body.

By : Group Reburial Unit Section 2 Nature of reburial

4. Report as to nature of original burial and condition of body upon disinterment :
Wooden box, burlap.
Badly decomposed, features unrecognizable.

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

(b) Other means of identification found upon disinterment, and general remarks :
Body tag checks.

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

(a) Height (actual measurement) Indiscernable

(b) Weight (estimated) due to decomposition

(c) Hair—Color apparently dark

Quantity thick

Characteristics straight

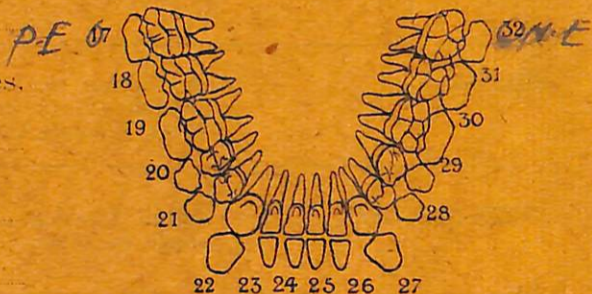
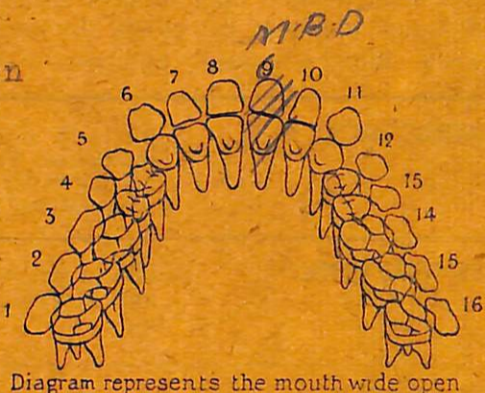
(d) Hair on face—Color none visible

Location none

Quantity none

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

or missing parts) none visible



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

Post mortem on skull

7. Disinterment supervised by Edmo Maire Approved: [Signature]
Edmo Maire (Title) Lt. Davis, 1st

8. Reburial supervised by J. S. Pantelis Approved: [Signature]
J. S. Pantelis (Title) W. D. Cleary
Chaplain, U.S. Army

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.



Place Waereghem, Belgium.

REPORT OF DISINTERMENT AND REBURIAL

Date 3/7/21.

1. REMAINS OF ALBERT COMINA. SERIAL NUMBER 2779645.
RANK Pvt. ORGANIZATION Co. D 363rd Inf.

2. Disinterred (date): 3/3/21. From (give complete location): Grave 159, Plot A, American cemetery 1252. Waereghem, Belgium.

By: Group 3 Section 4.

3. Reburied (date): 3/7/21. In (give complete location): Grave 151, Plot C, American cemetery 1252. Waereghem, Belgium.

By: Group 3 Section 4. Nature of reburial In burlap, wooden box, with bottle and metal strip.

4. Report as to nature of original burial and condition of body upon disinterment: In blanket, burlap and wooden box. Body badly decomposed, recognition impossible.

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

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

No effects found. Apparently hospital case. Skull posted. This body found under cross reading: Archie A. Roselinsky, Pvt. Co. E 146 Inf. #159 Plot A. Should have been under cross # 15 Plot C.

6. What does examination of body show as regards the following identifying items? Nos. 9, 32 Missing before death.

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

(b) Weight (estimated) -

(c) Hair—Color -

Quantity -

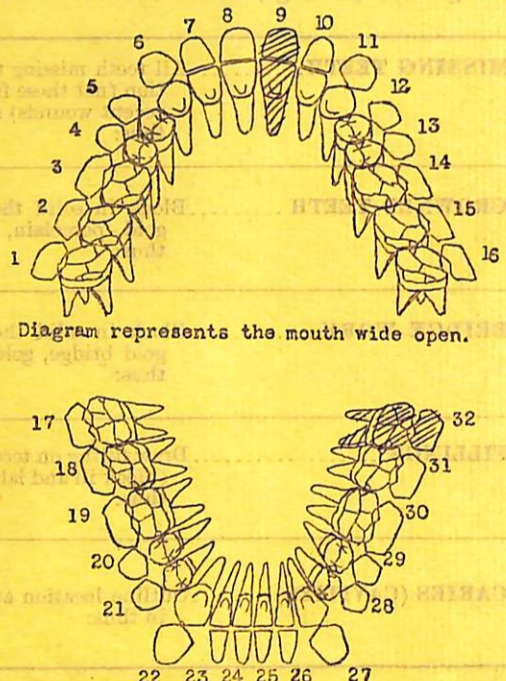
Characteristics -

(d) Hair on face—Color -

Location -

Quantity -

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



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

7. Disinterment supervised by F.A. JORGENSEN. Approved: F.A. JORGENSEN.

D-30142
G.B. KIDWELL
Approved: G.B. KIDWELL, hem
(Title) 2nd Lt. Q.M.C.






8. Reburial supervised by F.A. JORGENSEN. Approved: F.A. JORGENSEN.

A.J. MCSHANE
Approved: A.J. MCSHANE,
(Title) 1st Lt. 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 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: |  <p>TOOTH MISSING TOOTH MISSING</p> |
| CROWNED TEETH | Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus: |  <p>GOLD CROWN PORCELAIN CROWN</p> |
| BRIDGE WORK | Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus: |  <p>GOLD AND PORCELAIN BRIDGE GOLD BRIDGE</p> |
| FILLINGS | Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus: |  <p>SILVER FILLING GOLD FILLING GOLD FILLING GOLD FILLING</p> |
| CARIES (CAVITIES) | Outline location and size of cavity, shade in thus: |  <p>CAVITY DECAYED DECAYED DECAYED</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."

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 N/R REQUESTS

I. DATA COMPILATION

A. Location Index Card:-

(1) Name COMINA, Albert Ser. No. 2779645)
 (2) Rank Pvt. Organization Co.D, 363rd Inf.) TYP. SH
 (3) Date of death 11-20-18) CKR. UH

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

(4) Cause of death Pneumonia) TYP. SH
 (5) Grave No. 159 Row --- Plot a Sect. 848 5/24/23) CKR. EC

II. FILES EXAMINATION

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

B. A. G. O. DISPOSITION CARD Date of receipt

(6) Relationship no card in file eye 3/29/20
 (7) Name _____
 (8) Address _____
 (9) Desires remains brought to U. S.? _____
 (10) Desires remains brought to U. S. and interred in National Cemetery at _____
 (11) If brought back, what shipping instructions? _____

SEE SUSPENSION REMARKS

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 ALS (Date) 3-29-20

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

No request for disposition same location Blank only

(15) G. R. S. Files EXAMINED by HPC (Date) 3/31/20

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) 5-12-20

(19) Typed by EPP Checked by *HTB* (Date) 5-12-20

C. SUSPENSION REMARKS: Form 120 9-10-20 *Isuy Della*

Lucia, acting for the deceased 521

Main St. Bingham, Utah fills in 120

but no wish expressed, state Mother's

Misana Comina Redenta, Voltago,

(Prov. Belluno) Italy. sec. 9-20-20

D. Dispatched (Date) _____ (Let. Trans. # *12/6/20*)

Par. # 3. Europe advised to communicate and comply with wishes of Misana Comina Redenta, (Mother) Italy

Approved by _____

(Date) _____

E/a: Celeste Casera (Cousin)

Main St., Bingham, Utah.

10/11/21 Letter from Europe states no replies being seen rec'd from Mother, body will be buried in a P.O.C., France 11/10/21 DA

REPORT OF DISINTERMENT, PREPARATION AND SHIPMENT OF BODYDISINTERMENTCOMPARATIVE REPORT

Records Office Chief G.R.S.

Discrepancy found upon examination
of body

1. Name COMINA, Albert
 2. No. 2779645
 3. Rank Pvt.
 4. Org. Co. D., 363rd Inf.
 5. D.D. 11-20-18
 6. C.D. Pneumonia

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

Discrepancy found upon disinterment

7. Grave No. 15 Sect. ---
 8. Plot C Row ---
 9. -----

15. Grave No. _____ Sect. _____
 16. Plot _____ Row _____
 17. _____

18. Cemetery American
 19. (Commune or Town) Waereghem
 20. (Dept. or County) ---
 21. (Country) Belgium
 22. G.R.S. Hdqrs. Code No. 1252
 23. Disinterred (Date) _____ By _____
 24. Inscription (Name) _____ SERIAL NO. _____
 on _____ ORGANIZATION _____
 25. Was Identification Disc found on Grave Marker? _____ On Body? _____

Signature of Junior Technical Assistant

(The following space is reserved for notations to be made by office Chief Graves
Registration Service)

Cable Reference # 109

(over)

PREPARATION

(CONT.)

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.)

27. Condition of body

28. Nature of burial

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) By

31. Casket sealed by

(Signature of Embalmer Supervisor)

SHIPMENT (Show actual marking of box) Box No.

32. DESIGNATION (Name COMINA, Albert Serial No. 2779645
OF (Rank Pvt. Organization Co. D., 363rd Inf.
BODY

33. CONSIGNEE - Name Quartermaster General, Graves Registration Service,
Address Hoboken, N.J. (Arlington National Cemetery)

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

36. Remarks

37. Shipped from Cemetery (Date) To (Point of Concentration)

Convoyer Sign. Shpg. Officer

38. Received at Point of concentration (Date)

Sign. Receiving Officer

39. Shipped from Point of Concentration (Date)

To (Port) Convoyer

Sign. Shipping Officer

40. Received European Port (Date)

Signature of G.R.S. Representative

41. Shipped to (U.S. Port) On (Boat)
Date Convoyer (Sign. Shpg. Officer)

42. Received (Date) By G.R.S. Rep. (Signature)

43. Shipped to destination (Date) B/L or Express Order No.
Convoyer Shpg. Officer

REPORT OF DISINTERMENT, PREPARATION AND SHIPMENT OF BODYDISINTERMENTCOMPARATIVE REPORT

Records Office Chief G.R.S.

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(over)

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Cable Reference # 109

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Convoyer Shpg. Officer

COMPLETION OF DISPOSITION OF REMAINS

File No. 63716

I. LOCATION INDEX CARD:

(a) Name COMINA, Albert Ser. No. 2779645 } TYP SH
 (b) Rank Pvt. Organization Co. D., 363rd Infantry. }
 Cause of death Pneumonia. } VH

ENS. *H.C.*

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

(a) Grave No. 15-159 Plot C Sect. --- TYP SH
 (b) Emerg. Address -----

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

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

*Foreign communication - nearest of kin
 lives in Europe*

12/13/20. HJ

V. Following advice forwarded to Europe by (cable on ----- 192
 (Letter of transmittal on 12/16/1920.)

*Par. # 3. Europe advised to communicate and comply
 with wishes of Maria Comina Bedenta, (mother) Italy. HJ*

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 |
|--------------------|-----------------------|---------|--------------|
|--------------------|-----------------------|---------|--------------|

*(Hope) Let from Europe states no replies having
 been rec'd from mother in Italy, body will be
 buried in a P.A.C., France 11/10/20 da*

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

COUNTRY Belgium CEMETERY NO. 1252 SHEET NO. 109.
 G.R.S. FORM 115-A
 August 1920

S-666/AB

MB12-71-70

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

~~SEP 2 1920~~

JUL 20 1920

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

TO: Celeste Casera, Main St., Bingham, Utah.

SUBJECT: Remains of Pvt. Albert Comina

The records of this office show that you have ~~requested that this~~

~~body be~~ not expressed your desire as to the disposition of the body.

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

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

By authority of the Quartermaster General:

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

rem

| NAME OF | NO. & STREET | TOWN | STATE |
|---------|--------------|------|-------|
|---------|--------------|------|-------|

Soldier's Widow

| | |
|---------------------|----|
| Soldier's Children | 1. |
| (Name oldest first) | 2. |
| | 3. |

Father

Mother

| | |
|---------------------|----|
| Brothers | 1. |
| (Name oldest first) | 2. |

Sisters

Date _____

Signature _____

Address _____ Relationship _____

Note: - Instructions on the reverse side of this sheet should be carefully read before filling out this paper.

(OVER)

INSTRUCTIONS FOR FILLING OUT

1. This paper **MUST** be signed by the person who is the **NEXT** of kin in the order shown in the square on other side of this sheet.
2. 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.
3. 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.
4. If **YOU** are not the nearest relative, please ask the nearest relative, if living near you, to fill out this paper.
5. 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.
6. You are requested to return this paper **AT ONCE** in order to avoid delay in the case of this body.
7. Use the enclosed envelope - pay no postage.

63716

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Comina 2779645 Albert
(Surname.) (Number.) (First Name and Initials.)

Pvt Co D 363 Inf
(Rank.) (Organization.)

DATE OF BURIAL *Nov. 21 1918*

PLACE OF BURIAL *Staden Belgium*

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

*Am. Cem. North end of
Town 100 ft from road.*

GRAVE NUMBER *117*

HOW MARKED: Name Peg? Cross?

Headboard? Bottle?

IDENTIFICATION TAGS:

Was one buried with body? *Yes*

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

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

807

REPORTED BY:

Wm R Campbell Chaplain 1000
(Signature and Rank of Reporting Officer.)

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



Comina Albert #2779645

Pvt. Co. D. 363rd Inf,

II/22/18

Buried Near Staden, Belgium.

63716

807

B

379

✓

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE Q.M.C., IN EUROPE
6, AVENUE D'IENA.

Recorded, Cemeterial Div., O. G. M. G.
File # 293.8 #63176

File
293.8
PARIS October 11th 1921.

File No. 293.9 Disp. Cem. #1252 - 109

From : Chief
To : Quartermaster General, Munitions Building, Washington, D.C.
Subject : Disposition of remains of Pvt. Albert COMINA, #2779645,
Co. D, 363rd Inf., Cem. #1252, Waereghem, Belgium.

1. Reference letter from your office, dated December 3rd, 1920, File No. 1252, Reg. Sec., Cem. Div., to this Service, wherein it was directed that we communicate with the Next of Kin of the above deceased soldier, you are advised that a letter was written, as instructed, to Mrs. Miana Comina Redenta (Mother), Voltago, Province of Belluno, Italy, on February 1st, 1921. Another letter was written, enclosing our official form certificate for execution, on February 23rd, 1921. The first follow-up letter was sent on May 10th, and the second follow-up letter on July 29th, 1921.

2. No replies having been received to said correspondence, the remains of the above deceased soldier will be buried in a Permanent American Cemetery in France.

Bus
rem

K
JLK/CR

H. F. Rethers
H. F. RETHERS,
Colonel, Q.M.C.



Noted by Statistical Clerk
Date 11-4-21
a. e.

Noted on Form No. 115 *ta*
Date 11/10/21 *Da*

COPY FILED IN O. S. P.

Comina Albert

RECEIVED
SEMETRIAL DIVISION



OCT 26 1921

RECEIVED
M.C. & CO.

NOV 1 1921

RECEIVED
GENERAL INVESTIGATION DIVISION
OCT 26 1921

RECEIVED
GENERAL INVESTIGATION DIVISION
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GENERAL INVESTIGATION DIVISION
OCT 26 1921

CEMETERIAL DIVISION
REGISTRATION BRANCH
Inquiry & Correspondence Section
Registration Section
Overseas Project Section

Mr Houghton

Date 11-5-21

TO:

CAPTAIN WYNNE

MR. HUGHITT

MISS BOLAND

MISS MINOGUE

MAIL & PREPARATION OF DATA
CONGRESSIONAL & SPECIAL REPLY
GENERAL REPLY
PHOTOGRAPH SECTION

INVESTIGATION & ADJUSTMENT
AUDIT
CARDS

COMPILATION OF DATA
STATISTICS

Return to *JHC*

From *ALL JHC*

Action
Adjustment
Approval
Copies
Correction
Draft of letter
Investigation & Report
Note (need not return)
~~Note and Return~~
Papers in Case
Personal Conference
Remark
Reply
Returned
Signature

Preparation of Reply for Signature of
Secretary of War
Quartermaster General
Colonel Penrose
Lt. Col. Davis, O.R.C.
Captain Wynne

(See other side)

S/3040/LML

FILE
 MATERIAL DIVISION
 REGISTRATION SECTION

January 30

192²

MEMO FOR:

Cards Department.

1.

CASE OF:

Co. D., 363rd., Infantry.,

ORGANIZATION (Old)

COMINA. 2779645 Albert., 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. | 3/7/21 | 1252 | D-30142 |
| 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 B

S/3324/LML

Address reply to

WAR DEPARTMENT
PURCHASE, STORAGE, AND TRAFFIC DIVISION
OFFICE OF THE DIRECTOR OF PURCHASE AND STORAGE
WASHINGTON

Division

DIRECTOR OF PURCHASE
Munitions Building

No:

From:

To:

Subject:

OFFICE OF THE DIRECTOR

OF PURCHASE AND STORAGE

FORM

STANDARD FORM NO. 64

REVISED 1-22-53

ISSUE

NO. 1

CLASSIFICATION (FORM)

THIS FORM IS OBSOLETE AND SHOULD NOT BE USED

FOR OFFICIAL BUSINESS - THE UNITED STATES GOVERNMENT PRINTING OFFICE: 1953 O - 245,000

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED DATE 08-14-2013 BY 60322 UCBAW/PJL

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