

*Connelly - Michael
Europe*

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

... **Connelly, 737201, Michael**
(Surname). (Number). (First Name and Initials).

Pvt. Co. M, 11th Inf.
(Rank). (Organization).

PLACE OF BURIAL: **Verdun Front**

CAUSE OF DEATH: **Oct. 25, 1918.**

DATE OF BURIAL:

PLACE OF BURIAL:

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

... **Map Montfaucon, 1/500000-864-093**

GRAVE NUMBER: **15**

HOW MARKED: Name Peg? **yes** Cross?

Headboard? Bottle?

IDENTIFICATION TAGS: **yes**

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:

NEAREST RELATIVE:

ADDRESS:

RELATIONSHIP:

REPORTED BY:

F. Fitzgibbon, 2nd Lt. 358th Inf.
(Signature and Rank of Reporting Officer).

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

Serial 4-11-28
10254

G.R.S. Form #114 B

1. NAME **CONNELLY, Michael** DATE **Oct. 12th, 1921**
 SERIAL No. **737201**
 RANK **Pvt.** ORGANIZATION **Co. M, 11th Inf. 5 Div.**
& DIVISION
 GRAVE LOCATION **Meuse-Argonne, Romagne/s/Montfaucon** **1232 sec 87**
 CTY. NAME NUMBER
194 sec 87 **4**
 GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION **15 Bac Ancreville Meuse** **City #733**
 GRAVE COMMUNE DEPT.
 COORDINATES **Verdun 35 SW E 296.3 N 276.4**
 CONCENTRATED TO **6-19-19** **194** **87** **4**
 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 body

DATE OF DEATH **Oct. 22, 1918**

STATE FROM WHICH HE CAME **Ohio**

Data-F-1
SUBSEQUENT REBURIALS

MEDALS OR DECORATIONS AWARDED **none**
 DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR **M. B. BIRDSEYE**
1st Lt., Q.M. Corps U.S. Army

3. FINAL GRAVE LOCATION **Oct. 12th, 1921** **18** **31** **Bl. F.**
 DATE GRAVE ROW PLOT
Meuse-Argonne American Cemetery #1232, Romagne-sous-Montfaucon, (Meuse)
 CEMETERY

AUDITED BY
LDR 476-23

2. A.G.O.
AUG 11 1926
WORLD WAR DIV.

War Div.
APR 4 1928

By **610**
AUG 14 1920

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.



CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	CONNELLY	3	3 5 4
	Michael		
BURIED	CEMETERY 18 32	1	1
	GRAVE 18	2	18
	ROW 31	2	31
	BLOCK 7	1	6
STATE	Ohio	2	41
RANK	Pvt	1	2
DIVISION	5	2	05
ORGANIZATION	11	3	011
ARM	Inf	1	1
MARITAL	no	1	2
NAME	Connolly (Bro)	3	
	John		
RESIDENCE	1207 - E. 81st St Cleveland, O.		
STATE		2	
COUNTY		2	
CITY		3	
RELATION	mother	1	1
OTHER		1	2
ELIGIBILITY	Dead	1	6
NATIVITY	8-25-31 -	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			

AUDITED
MAR 23 1933
RAM

Jm

Came to US 1711 age 30

DA 7-23-29

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Gonnelly, Michael	Pvt.	737201	Co. M, 11th Inf.	10-22-18

STATE	CTY. NO. 1232	GRAVE 18	ROW 31	BLOCK F
-------	----------------------	-----------------	---------------	----------------

Check relationship	Living - Deceased
--------------------	-------------------

MOTHER	<i>Dead 8-25-31</i>	:	:
STEPMOTHER (For the year prior to commencement of service)		:	:
MOTHER THRU ADOPTION (For the year prior to commencement of service)		:	:
MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)		:	:
WIDOW (Who has not remarried)		:	:

Xe 296559

Single
~~*(M) Margaret Gonnelly*~~
~~*Drubicoggy*~~
~~*Strals, Claremorris*~~
~~*County Mayo, Ireland.*~~

Single

3-18-33

(Bro.) John Gonnelly
1207 East 81st St.
Cleveland, Ohio

Veterans Bureau Claim Number 29/156

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Connelly, Michael

Oct. 5, 1929.

Mr. John Connelly,
1207 - East 81st St.,
Cleveland, Ohio.

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 brother of the late Pvt. Michael Connelly, Co. M, 11th Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, 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?

Mothers

2. If so, give her complete address.

Mrs Peter Connelly

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.

Drimsoggy

Irish P. O.

Claremorris

Co Mayo

Ireland

For The Quartermaster General,

Very truly yours,

John T. Harris

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

2 Incls.
Act of Congress
Envelope

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Connolly, Michael

August 10, 1929

Mr. John Connolly,
1189 E. 80th Street,
Cleveland, Ohio

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 ^{brother of the late} Private Michael Connolly, Co. M, 11th Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, 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.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

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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.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Connelly, Michael
1232

September 10, 1929.

Mr. John Connelly,
1189 E. 80th St.,
Cleveland, Ohio.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated Aug. 10, 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

Connolly, Michael

August 10, 1929

Mr. John Connolly,
1189 E. 80th Street,
Cleveland, Ohio

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 brother of the late Private Michael Connolly, Co. M. 11th Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, 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.
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For The Quartermaster General,

Very truly yours,

2 Incls.
Act of Congress
Envelope

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

Co M. IIth Infantry
5th Division

CONNELLY, Michael Pvt 737201

Killed in action at about 9,30 AM of October 21st; 1918 on the Argonne Sector, approximately one (1) Kilometer of Cunel, France. His last words were "Give 'em Hell." after having completed these words he was hit in the temple of the head by a machine gun bullet and death was instant. He was supposedly hit in the left temple.

Informant; Ellis, George L. 1st Sgt
737106, Co E. IIth Inf.

Home: Milltown, Ga.

Emergency address:
Mr Peter Connelly
Srih PO
County Mayo,
Ireland.

signed; Wm G. Ryan, Capt.
Comdg Officer

S/A

*file
2/10/31*

Date June 28 1919

REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name CONNELLY, Michael

Number: 737201

Rank Pvt.

Organization: Co. M. 11th Inf.

Disinterment and Reburial made by Group

Unit

Disinterred (Date)

From: (Give complete location)

19th June 1919

Unknown

Blaise 733 Amervalles 15

310.1-287.1

Reburied (Date)

in: (Give complete location)

19th June 1919

Grave #194 Sec #87 Plot #4

1232

ARGONNE AMERICAN CEMETERY #1232

ROMAGNE-MEUSE

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

Burial good; buried in uniform; normally decomposed.

Was one identification tag found upon body?

Yes

What other means of identification were found upon the body?

None

Note:

CONFIRMED No. D 12144

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

Supervised by Lt babbitt

LGG

R. H. ROSENTHAL

G.O. Group

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

Unit

1930

RECEIVED

1930

1930

1930

1930

1930

1930

one



QM 293 C-R

September 28, 1923.

Mr. Peter Connelly,
Duncozgy, Srah P.O.,
County Mayo, Ireland.

Dear Sir:

The Quartermaster General desires you to be informed that the
is Grave 18, now 31, Block 1, Meuse-Argonne American Cemetery, Romagne-
permanent grave of (House), 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

Assistant.

O.Q.M.G. ✓
Central Mail & Files Bldg



SEP 28 1923

H.H.

RD 23/592/ARK

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 H-23-, 1920

*Section - 87
Par. 2. Not to be returned (JEX)*

IX.

CORRECTIONS

CHANGE OF ADVICE.	ACTION TAKEN.
Desires body be _____	
Body to be shipped to _____	

X. SUSPENSION REMARKS:

*P.A.W.B. Mr. Peter Connelly (Father)
Duncooghy, Irish, Post office Mays, Ireland.*

(4-30-21) C

To be prepared in triplicate.

DATE Oct. 11, 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 CONNELLY, Michael

10. Name _____

2. No. 737201

11. No. _____

3. Rank Pvt.

12. Rank _____

4. Org. Co. M, 11th Inf.

13. Org. _____

5. D.D. Oct. 22nd

14. (a) D.D. _____

6. C.D. KIA

(b) D.B. _____

Discrepancy found upon disinterment

7. Grave No. 194 Sec. 87

15. Grave No. _____ Sec. _____

8. Plot 4 Row _____

16. Plot _____ Row _____

9. _____

17. No descp.

18. Cemetery Meuse-Argonne

19. Commune or town Romagne/s/Montfaucon

20. Dept. or County Meuse

21. Country France

22. G.R.S. Hdqrs. Code No. 1232 sec 87

23. Disinterred (Date) 10-11-21

By E. Maire

24. Inscription on grave marker:

Name Michael Connelly

Serial No. 737201

Rank Pvt

Organization Co. M. 11th Inf.

25. Was identification disc found on grave marker? Yes On body? Yes (20)

John H. Crawford
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).

11 Inf. Co. M. Collar ornament

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 10-11-21 By E. Maire

31. Casket sealed by E. Maire

Signature of Embalmer, (Supervisor) Edmond Maire

AUDITED BY

SHIPMENT. (Show actual marking of box.) Box No. C-8449

32. Designation of body: _____

Name CONNELLY, Michael Serial No. 737201

Rank Pvt. Organization Co. M, 11th Inf.

33. Consigned to: _____

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

34. Casket boxed and marked (Date) 10-11-21 By E. Meire

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 R.C. Worthington, 1st Lt.

36. Remarks _____

37. Shipped from point of Operation: (Date) 10-11-21

To point of Concentration Meuse Argonne Cem. #1232

Convoyer _____ Signature Shipping Officer J. Gerald Cole
(Name)

38. Received at Railhead or Point of Concentration: Date J. GERALD COLE
Captain, C. A. C.

By G.R.S. Representative _____

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

To Permanent Cemetery _____
(Name)

Convoyer _____ Signature Shipping Officer _____

40. Received: Date _____

G.R.S. Representative _____

41. Reinterred Meuse Argonne Cem. 1232, Oct. 12, 1921.
(Date)

42. Grave No. Row 31 Bl. F. Gr. 18. Section _____

43. Plot _____ Row _____

G.R.S. Representative James W. Young
JAMES W. YOUNG
CAPT. SMC.



Place Romagne Sous Montfaucon

REPORT OF DISINTERMENT AND REBURIAL

Date Oct. 11, 1921.

1. REMAINS OF CONNELLY, MICHAEL SERIAL NUMBER 737201

RANK Pvt. ORGANIZATION Co., M. 11, th Inf.

2. Disinterred (date): Oct. 11, 1921. From (give complete location):
G. 194 sec 87 pt 4, Meuse-Argonne Cem., #1232.

By: Group Maire Unit Sec. 1

3. Reburied (date): Oct. 12, 1921 In (give complete location):
Meuse Argonne Cem. 1232, Row 31 Bl. F. Gr. 18.

By: Group Reburial Sec. Unit unlined casket Nature of reburial

4. Report as to nature of original burial and condition of body upon disinterment:
badly decomposed features unrecognizable. U.S. uniform burlap and pine box,

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

(b) Other means of identification found upon disinterment, and general remarks:
conn. - - - Mich - - - 737201 - - - Pvt. Co., M.
col. orn. Co., M. 11th Inf.

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

(a) Height (actual measurement) Imp to det.

(b) Weight (estimated) Imp to det.

(c) Hair—Color None visible

Quantity None

Characteristics None

(d) Hair on face—Color None

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)

left scapula fractured.

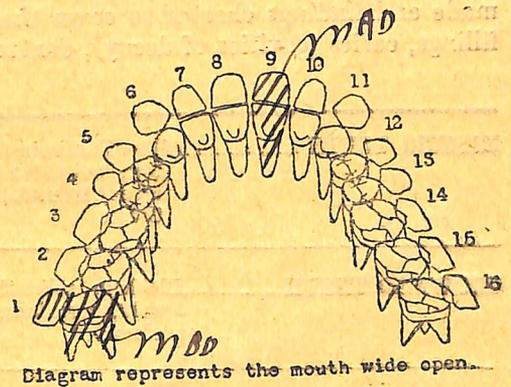
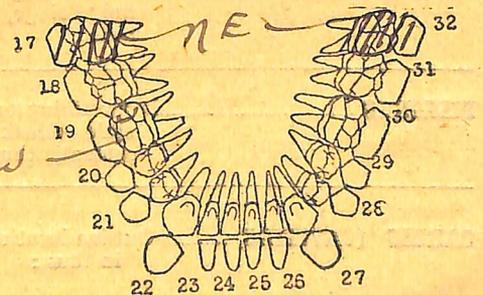


Diagram represents the mouth wide open.



7. Disinterment supervised by Eduard Maire Approved: R. C. Worthington 1st. Lt. QMC
E. Maire S. E. (Title)

8. Reburial supervised by W. B. SHEILD Approved: JAMES W. YOUNGER
concentration (Title) CAPT. QMC.

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

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

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.
2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.
3. Give date and accurate information as to location of reburial and the group and unit which made reburial, and how reburial was made—in casket, wooden box, etc.
4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried—in a casket, box, burlap, etc. This statement should be as complete as possible.
5. (a) State whether identification tags were found buried with body and on grave marker by reporting "Yes" or "No".
 (b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying the body, other than that tabulated under Item No. 6.
6. Give all information as to body description and dental chart as nearly correctly as the condition of the body will allow. Items (e) and (f) under the body description are very important and should be very complete. The dental chart is also very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspid (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

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 :



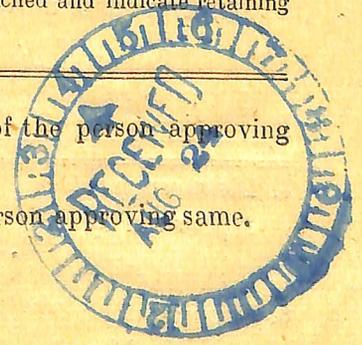
CARIES (CAVITIES).....Outline location and size of cavity, shade in thus :



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.



OSP-SS
Form No. 1009

OFFICE OF THE QUARTERMASTER GENERAL
CEMETERIAL DIVISION
OVERSEAS PROJECT SUB-SECTION

296559

Harlow C.W.

NAME OF DECEASED SOLDIER

CEMETERY NO.

DATE

Connelly, Michael, Pvt.

SERIAL NUMBER

ORGANIZATION

1232-Sec.87 - 40

4/16/21.

DATE OF DEATH

737201

Co. M, 11th Inf.

10/22/18.

Copy forwarded to

WAR RISK INSURANCE INFORMATION

Adjustment Department

Date 4-30-21-C

DATE 4-27-21

PERSON NAMED BY SOLDIER TO BE BENEFICIARY OF INSURANCE

RELATIONSHIP

ADDRESS

Mrs Margaret Connelly mother

PERSON RECEIVING DEATH COMPENSATION

RELATIONSHIP

Duncoggy Lrah Post Office, Major Ireland

104 file over

Mr. Peter Connelly

Father

Duncoggy, Irah, Post Office Mayo, Ireland

RECEIVED
APR 29 1921
General Division
Overseas Postal Section

1. G. B. S. Form No. 1.

Hq. G. B. S. File

49574

2. Soldier's No. 737201

3. Connelly Michael
Surname (in block letters) First Name and Initials

4. A 11th. Inf.
Rank Company Regt. or Corps

5. Date of Death Cause, if known

6. B.A.C.
Date of Burial Cemetery

7. Ainerville Meuse
Town or Commune (in block letters) Department

8. 15
Grave No. Plot No. or Letter

9. Name Peg? Cross? 1 Headboard? Bottle?
Check Method of Marking

10. Buried with Body? Attached to Grave Marker? 1
Identification Tags

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

733

12. "A" sketch 29
Map Reference, if interment is outside of cemetery

13. Give name of Chaplain or Burial Officer

GROUP 1 Signed Lt. Hodson

Group Unit G. B. S.

PROV. UNIT "A" G.R.S.



49514

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

..... Connelly, 737201,
(Surname), (Number), (First Name and Initials).

..... Pvt. Co. M, 11th Inf.
(Rank), (Organization).

PLACE OF DEATH: Verdun Front

CAUSE OF DEATH:
DATE OF BURIAL: Oct 25, 1918.

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

..... Map Montfaucon, 1/500000-864-093

GRAVE NUMBER: 15

HOW MARKED: Name Peg? yes 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:

NEAREST RELATIVE:

ADDRESS:

RELATIONSHIP:

REPORTED BY: 

..... F. Fitzgibbon, 2nd Lt. 358th Inf.
(Signature and Rank of Reporting Officer).



FROM: O.Q.M.G.
CEMETERIAL DIVISION
Munitions Building
Room

PLEASE
EXPEDITE

WAR DEPARTMENT
Office of the Quartermaster General of the Army
Washington

G.R.S. Form 8-10-21
Information Requested of A.G.O.

Date 4/16/21.

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.

(SPECIAL)

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

a. Surname **Connelly** ✓

f. Date of death **10/22/18.** ✓

b. Christian name **Michael** ✓

g. Cause of death **K/A.** ✓

c. Serial Number **737201** ✓

h. Authority (C.O.#)

d. Organization **Co. M, 11th Inf.** ✓

i. Emergency address

e. Rank **Pvt.** ✓

j. Relationship

PHYSICAL DESCRIPTION

(See page #2 of the Service Record)

Mr. Peter Connelly, Irish, P.O.

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

a. Age of enlistment

a. Strike out teeth missing

b. Color of eyes

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

c. Color of hair

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

d. Height

e. Weight

f. Permanent marks and physical defects at enlistment (Old fractures or breaks)

Noted on Form 113
Date 4-21-21

Connelly send card
4-18-21-7 reg.
RECEIVED

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

BY:

H. J. Conner

H. J. CONNER,
1st. Lieut. Q.M.C.

Rec'd S & S Div, A.G.O.

CEMETERY NO: **1232-Sec .87.**

SHEET NO: **40**
TYPED BY: **I.W.**

APR 18 1921 6

Rec'd World War Div.
Date **APR 18 1921**

U.S. DEPARTMENT OF THE ARMY
Office of the Quartermaster General of the Army
Washington

Date: 4/19/21

Information Form 2
Registration
MAY 1 9 1921

File No. Registration

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

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

(SPECIAL)

Subject: Information required for D.I.S.

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

f. Date of death 10/22/18.

g. Cause of death X/A.

h. Authority (C.O.#)

i. Maturity address

j. Relationship

PHYSICAL CHARTS

(See Physical report of examination prior to enlistment)

a. Strike out teeth missing

8 7 6 5 4 3 2 1 0

upper right upper left

8 7 6 5 4 3 2 1 0

lower right lower left

a. Surname Gonnally

b. Christian name Michael

c. Serial Number WY501

d. Organization Co. M, 11th Inf.

e. Rank Pvt.

ROY REGISTRATION

(See page 2 of the Service Record)

a. Age at enlistment

b. Color of eyes

c. Color of hair

d. Height

e. Weight

f. Permanent marks and

physical defects of

enlistment (Old fractures or breaks)

APR 20 1921

RECEIVED

H. L. ROOPERS
Quartermaster General, U.S. A.

H. J. CONRAD
Jvt. Lieut. U.S.A.

C.W. 1233-500.87

40 I.W.

APR 18 1921

OFFICE OF THE QUARTERMASTER GENERAL
CEMETERIAL DIVISION
OVERSEAS PROJECT SUB-SECTION

COPY

FILE

Harlow G.W.

JUL 29 1921
49514

NAME OF DECEASED SOLDIER	CEMETERY NO.	DATE
Connelly, Michael, Pvt.	1232-Sec.87 - 40	4/16/21.
SERIAL NUMBER	ORGANIZATION	DATE OF DEATH
737201	Co. M, 11th Inf.	10/22/18.

NOTED FORM 115 WAR RISK INSURANCE INFORMATION
DATE 4-30-21-c DATE _____

PERSON NAMED BY SOLDIER TO BE BENEFICIARY OF INSURANCE RELATIONSHIP

ADDRESS

Mrs. Margaret Connelly, mother
PERSON RECEIVING DEATH COMPENSATION RELATIONSHIP

Duncozgy, Irish Post Office Mayo Ireland

(over)

Mr. Peter Connelly, ~~Connelly~~ (father), same add.

49514

File #49514.

AMERICAN EXPEDITIONARY FORCES
HEADQUARTERS SERVICES OF SUPPLY
OFFICE OF THE CHIEF QUARTERMASTER, A.E.F.
GRAVES REGISTRATION SERVICE.

June 21st 1919.

FROM : Chief, Graves Registration Service, American E.F.
TO : Mr John Connelly, 1509 E. 81st St. Cleveland, Ohio.
SUBJECT : Pvt. Michael Connelly, Company M. 11th Infantry,
American E.F.

With an assurance of very deep sympathy, and in reply to your letter of enquiry, you are advised that information has been filed in this office by the burial officer concerned, to the effect that the above named soldier is buried in **Grave #15, American Battle Area Cometary at AINGREVILLE, department of the MEUSE.**

The grave is marked with the regulation cross, with one identification tag attached to marker.

(Encl:-G.R.S.:)
(10-B. :)

CCP/mt.

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

Copy for:- Home Communication Section, American Red Cross, Paris.



49514

File #49514.

AMERICAN EXPEDITIONARY FORCES
HEADQUARTERS SERVICES OF SUPPLY
OFFICE OF THE CHIEF QUARTERMASTER, A.E.F.
GRAVES REGISTRATION SERVICE.

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FROM : Chief, Graves Registration Service, American E.F.
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SUBJECT : Pvt. Michael Connelly, Company M. 11th Infantry,
American E.F.

With an assurance of very deep sympathy, and in reply to your letter of enquiry, you are advised that information has been filed in this office by the burial officer ~~concerning~~ ^{concerning} ~~the~~ ^{the} ~~above~~ ^{above} ~~named~~ ^{named} ~~soldier~~ ^{soldier} ~~is~~ ^{is} ~~buried~~ ^{buried} ~~in~~ ⁱⁿ ~~the~~ ^{the} ~~Area~~ ^{Area} ~~Cemetery~~ ^{Cemetery} ~~at~~ ^{at} ~~AINCHEVILLE,~~ ^{AINCHEVILLE,} ~~department~~ ^{department} ~~of~~ ^{of} ~~the~~ ^{the} ~~MEUSE.~~ ^{MEUSE.}

The grave is marked with the regulation cross, with one identification tag attached to marker.

(Encl:-G.R.S.:)
(10-B. :)

CCP/mt.

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



NAME **Connelly, Michael.**

RANK **Private.**

ORGANIZATION **Co.M. 11th Inf.** SERIAL NUMBER

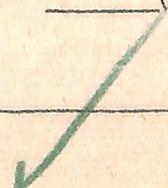
NO.	QUESTION	REPLY
1.	Do particulars of soldier given above agree with records?	1. CONNELLY, 737201 Michael Pvt. Co. M, 11th Inf.
2.	Date of death?	2. 10-22-18.
3.	Cause and place of death?	3. K/A.
4.	Has this been reported on Casualty Cablegram, if so, give reference.	4. Yes. 308.
5.	Date of burial?	5. Not given.
6.	Grave Location:	6. Grave #15, Amer. B/A Cty. #733, Aincreville, Meuse.
7.	Who reported burial?	
8.	Confirmed by G.R.S.?	
9.	How is grave marked?	9. Cross.
10.	Identification Tags: (a) Buried with body? (b) Attached to grave marker?	10. One attached to grave marker.
11.	Emergency address:	11. Peter Connelly, (Father) Srih. PO, County Mayo, Ireland.
12.	Has above been notified? (Give date)	12. Yes. 12-27-18.

CONFIRMED N° D —

ANALYSIS OF INQUIRY

Flowers, flags, etc. (Par. #5, Bul. 10-B)	Effects (G.R.S. Form No. 7&7-A)
Monuments (Par. #6, Bul. 10-B)	Accrued Pay (G.R.S. Forms Nos. 19 & 22)
Disinterments (Par. #8, Bul. 10-B)	Liberty Bonds (G.R.S. Forms Nos. 21 & 22)
Circumstances of death (G.R.S. Form No. 6)	War Risk Insurance (G.R.S. Forms Nos. 20 & 22)
Photographs requested (File 004.5)	Disposition of Remains
Grave Location <i>no. 3.</i>	(a) Return to U.S. (Form 25)
	(b) Remain in France (Form 24)
	(c) Miscellaneous (Letter)

Remarks:



AMERICAN RED CROSS

(CROIX-ROUGE AMÉRICAINÉ)



495-14

Paris, May 22, 1919.

Ref.No.92599

From: Bureau Home & Hospital Service

To : Graves Registration Bureau, APO 717, Tours.

Subj:Pvt. Michael Connelly, #737201
Co. M, 11th Inf.

The above soldier reported killed in action October 22nd, 1918.
Please send burial report to John Connelly, 1509 E. 81st St., Cleveland,
Ohio, also copy for our files.

Yours very truly,

LP:EW

HOME COMMUNICATION SECTION

