

gr.

To The A. G. O.

1283

215

G.R.S. Form #114-B

DEC 24 1925

DATE

1. NAME CONRAD, Clint

SERIAL No. 464732

RANK Pvt.

ORGANIZATION & DIVISION

Bat.A, 7th F.A.

GRAVE LOCATION Amer.Cty., ANGERS (Maine et Loire)

297

CTY. NAME

NUMBER

39

GRAVE

ROW

PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION

39

ANGERS

M. & L.

As shown by GRS Form 1-A dated 9/29/19

GRAVE

COMMUNE

DEPT.

COORDINATES None given

CONCENTRATED TO

Nothing of record

DATE

GRAVE

ROW

PLOT

CEMETERY

CTY. NUMBER

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

Nothing of record

SUBSEQUENT REBURIALS

Nothing of record

DATE OF DEATH

DATE

GRAVE

ROW

PLOT

CEMETERY

STATE FROM WHICH HE CAME

MEDALS OR DECORATIONS

DATE AWARDED

GRAVE

ROW

PLOT

CEMETERY

SIGNATURE, AREA SUPERVISOR

STANLEY J. GROGAN, Captain, Infantry.

3. FINAL GRAVE LOCATION Sept. 11, 1922

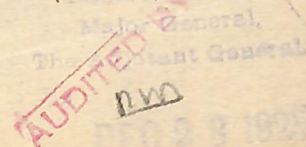
DATE

GRAVE

ROW

PLOT

Oise-Aisne American Cemetery #608, Seringes-et-Nesles (Aisne) CEMETERY



2/9/25

70 Regt C.A.C. 600

34

A.G.O. DIV. 1925

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.

464732

GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

Conrad 464732 ~~Clair~~

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

Pvt. Batt. a. 70th CAC

(Rank.) (Organization.)

DATE OF BURIAL... August 13, '18

PLACE OF BURIAL... St Leonard

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

Angers
met L.
France

GRAVE NUMBER... 39.

HOW MARKED: Name Peg? yes. Cross? Reg

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:

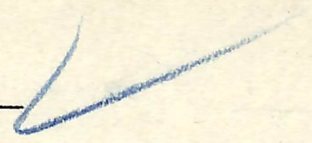
REPORTED BY:

James A. Cox Chaplain

(Signature and Rank of Reporting Officer.)

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

CODE SLIP



HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	Conrad, Clint	3	3 5 4
BURIED	CEMETERY 608	1	2
	GRAVE 18	2	18
	ROW 34	2	34
	BLOCK a	1	1
STATE	Illinois	2	13
RANK	Pvt 1/c	1	2
DIVISION	b. a. c	2	48
ORGANIZATION	70	3	070
ARM	69C Regt	1	1
MARITAL	no.	1	2
NAME	Conrad, A.F.	3	
RESIDENCE	STATE Illinois	2	13
	COUNTY Lawrence	2	51
	CITY	3	111
RELATION	(no loco) Mother	1	1
OTHER	(no SM)	1	1
ELIGIBILITY	Head	1	6
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF TRIP	MO.	1	
	YR.	1	
ACCEPTANCE	Head	1	3

Father

BR

29/514

AUDITED
AUG 18 1932 MB

pm

8

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Conrad, Clint 608-F

July 8, 1930.

Mr. A. F. Conrad,
Pinkstaff, Ill.

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress of March 2, 1929, together with an amendment thereto, approved May 15, 1930.

This office has no record of any person entitled under the Act mentioned to make a pilgrimage to the cemeteries in Europe as the mother or widow of the above named deceased service man. To complete the list of eligibles and to assure that, if the above named man is survived by a mother or widow entitled to make a pilgrimage she receive an invitation to do so, it is requested you answer the following questions in the space provided on this letter and return to this office in the enclosed envelope which requires no postage.

1. Is the deceased survived by a mother?

If so, give her name and address:

no

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

If so, give her name and address:

no

3. Is the deceased survived by any woman who stood in loco parentis to him according to the terms of Section 4 (a) of the enclosed Act as amended?

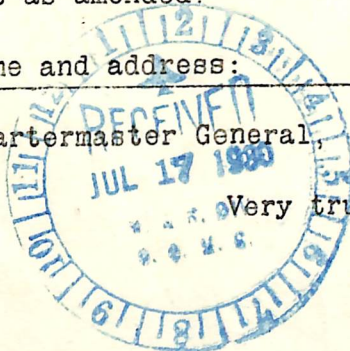
If so, give her name and address:

no

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment



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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Conrad, Clint
608

Aug. 29, 1929.

Mr. A. F. Conrad,
Pinkstaff, Ill.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated June 24, 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:

no

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.

no

3. If survived by a widow or mother does she desire to make the pilgrimage?

For The Quartermaster General,

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 293 A-C

Conrad, Clint.

June 24 1929.

Mr. A. F. Conrad,
Pinestaff, Ill.

Dear Sir:

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

The records of this office show that you are the father of the late **Private Clint Conrad, Btry A., 70th Art., C.A.C., whose remains are now interred in the Oise-Aisne American Cemetery, Seringes-et-Nesles, Aisne, France.**

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

Your attention is particularly invited to Section 4 of the enclosed Act, which defines the terms "mother" and "widow". If the relative is a stepmother, mother through adoption or any woman who stood in loco parentis to the decedent, a statement as to her relationship is requested. If he was survived by a widow who has since remarried it is also requested that a statement to that effect be made.

For your reply, you may use the enclosed envelope which requires no postage.

For The Quartermaster General,

Very truly yours,

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

2 incls.
Act of Congress.
Envelope.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Conrad, Blint 608-F

July 8, 1930.

Mr. A. F. Conrad,
Pinkstaff, Ill.

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress of March 2, 1929, together with an amendment thereto, approved May 15, 1930.

This office has no record of any person entitled under the Act mentioned to make a pilgrimage to the cemeteries in Europe as the mother or widow of the above named deceased service man. To complete the list of eligibles and to assure that, if the above named man is survived by a mother or widow entitled to make a pilgrimage she receive an invitation to do so, it is requested you answer the following questions in the space provided on this letter and return to this office in the enclosed envelope which requires no postage.

1. Is the deceased survived by a mother?

If so, give her name and address:

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

If so, give her name and address:

3. Is the deceased survived by any woman who stood in loco parentis to him according to the terms of Section 4 (a) of the enclosed Act as amended?

If so, give her name and address:

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 2, A-C

Conrad, Clint
608

Aug. 29, 1929.

Mr. A. F. Conrad,
Pinkstaff, Ill.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated June 24, 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?

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Conrad, Clint.

June 24 1929.

Mr. A. F. Conrad,
Pinkstaff, Ill.

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".

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For your reply, you may use the enclosed envelope which requires no postage.

For The Quartermaster General,

Very truly yours,

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

2 incls.
Act of Congress.
Envelope.

QH 293 A-C.

(Conrad, Clint)

(Ford, Donald I.)

February 23, 1927

Mr. John J. Holl,
Associate Editor,
The American Legion Monthly,
Indianapolis, Indiana.

Dear Sir:

In reply to your letters of February 17, 1927, The Quartermaster General desires that you be informed that the late, Private, first class, Clint Conrad, Battery A, 70th Artillery, Coast Artillery Corps, is permanently interred in Grave 18, row 39, Block A, Oise-Aisne American Cemetery, Seringes-et-Nesles, Aisne, France.

The records show that the late Donald I. Ford, Private, Company H, 28th Infantry, is permanently interred in Grave 19, row 17, block C, Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, France.

It is suggested that you write to The Adjutant General of the Army, Washington, D.C., for information concerning the details of the death and burial of these two soldiers.

Very truly yours,

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

ESM



PUBLICATION
OFFICES

The AMERICAN LEGION *Monthly*

INDIANAPOLIS
INDIANA

February Seventeenth
1 9 2 7

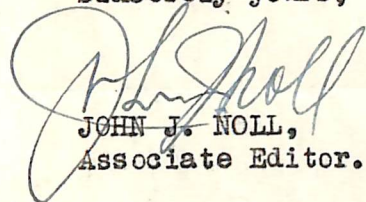
Dear Colonel:

Will you kindly advise me from your records the facts regarding the death in action of Private Clint Conrad, a member of the 170th Field Artillery.

The only information we have available is that he was killed while crossing a pontoon bridge, although the place and date of his death are not given.

Your cooperation is greatly appreciated.

Sincerely yours,


JOHN J. NOLL,
Associate Editor.

Lt. Col. E. R. Tompkins, Assistant,
Office of the Quartermaster General,
War Department,
Washington, D. C.

FEB 19 1927

QM 293 A-C

April 23, 1924

CONRAD, Clint Pvt. 1/cl.

Mr. A. F. Conrad,
Pinkstaff,
Illinois.

Dear Sir:

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

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

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

Very truly yours,

1-Incl.
Record card.

R. P. HARBOLD
Assistant.

MEK
702



APR 22 1924
B.

COMPILATION N/R REQUESTS

I. DATA COMPILATION

7/11/22 Exhumed.
for Concentration
Disc - Aisens 608
AH 3/6/22

A. Location Index Card:-

(1) Name Conrad, Clint Ser. No. 464732)
(2) Rank Pvt. *1st* Organization Battery A. 7th Field Artillery.) TYP. TW.
(3) Date of death 8/8/18) CKR. *MEN*

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

(4) Cause of death Drowned (Body not recovered)) TYP. TW.
(5) Grave No. 39 Row -- Plot -- Sect. --) CKR. *PH*

II. FILES EXAMINATION

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

B. A. G. O. DISPOSITION CARD Date of receipt none

(6) Relationship no card in file m 4-23-20

(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 J.S. (Date) 4-23-20

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

P.P.P

No request for disposition

(15) G. R. S. Files EXAMINED by aa (Date) 4-24-20

*Rechecked by KCP
12-13*

III. FINAL ACTION

A. MEMORANDUM to D. M. O. in E. made (Date)

(16) Removal of Remains (within custody of G.R.S.) to

(17) Instructions that remains be left undisturbed

(18) Typed by Checked by (Date)

B. G. R. S. FORM NO. 114 made (Date)

(19) Typed by Checked by (Date)

C. SUSPENSION REMARKS:

21 Father nearest of kin form 120 not dated directs that sons
remains be left in Europe 8/31/20 acc.

D. Dispatched (Date) (Let. Trans. No. **APR 27 1920**)

Approved by

(Date)

e/a - A. J. Conrad (father)
Pinkstaff, Ill.

gr.

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

STATION Angers #297

To be prepared in triplicate.

DATE Dec. 6, 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 CONRAD, Clint
 2. No. 464732
 3. Rank Pvt.
 4. Org. Bat. A, 7th F.A. *70th Art. C.O.C.*
 5. D.D. Aug. 8th. 1918
 6. C.D. Drowned

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

Discrepancy found upon disinterment

7. Grave No. 39 Sec. _____
 8. Plot _____ Row _____
 9. _____

15. Grave No. _____ Sec. _____
 16. Plot _____ Row _____
 17. No discp

18. Cemetery Amer.
 20. Dept. or County Maine et Loire
 22. G.R.S. Hdqrs. Code No. 297

19. Commune or town ANGERS
 21. Country France

23. Disinterred (Date) 12-6-21

By C.J. Osgood

24. Inscription on grave marker:
 Name Clint Conrad
 Rank Pvt.

Serial No. 464732
 Organization Bat. A. 7th F.A.

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

C. J. Osgood
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).
Body tag checks.

27. Condition of body Badly decomposed features unrecognizable.

28. Nature of burial Uniform and wooden 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 12-6-21 By C.J. Osgood

31. Casket sealed by C.J. Osgood

Signature of Embalmer, (Supervisor *C. J. Osgood*)

RECEIVED
DEC 11 1921

SHIPMENT. (Show actual marking of box.) Box No. C-22714

32. Designation of body:

Name Clint CONRAD Serial No. 464732

Rank Pvt. Organization Bat. A, 7th F.A.

33. Consigned to:

Name of Permanent Cemetery Oise-Aisne Amer. Cty. 608 Seringes-et-Nesles (Aisne).

34. Casket boxed and marked (Date) 12-6-21 By C. J. Osgood

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. Q.M.C.

36. Remarks

37. Shipped from point of Operation: (Date)

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 Oise Aisne, Am. Cty 608 Seringes et Nesles, Aisne (Name)

Convoyer C. J. Blake Signature Shipping Officer S. D. CAMPBELL, Capt. Q.M.C.

40. Received: Date 12 DEC 1921

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

41. Reinterred 9/11/22, Oise-Aisne Cem. 608, Seringes-et-Nesles, (Aisne) (Date)

42. Grave No. 18, Blk. A. Section

43. Plot Row 39

G.R.S. Representative C. J. Blake, Capt. QMC

REPORT OF DISINTERMENT AND REBURIAL

Place Gr. 39, Cem. 297

Date Dec. 6th, 1921

1. REMAINS OF CONRAD, Clint, SERIAL NUMBER 434752

RANK Pvt. 1st ORGANIZATION Det. 1st Inf. Div. 70 ant. C.A.C.

2. Disinterred (date) : Dec. 6th, 1921 From (give complete location) : Gr. 39, Cem. 297

By : Group 3 Unit Sec. 7

3. Reburied (date) 9/11/22 In (give complete location) : Gr. 18, Blk. A. Row 39.

9/11/22, Oise-Aisne Cem. 608, Seringes-et-Nesles, (Aisne)

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

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

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

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 due to

(b) Weight (estimated) decomposition.

(c) Hair—Color None

Quantity

Characteristics

(d) Hair on face—Color None

Location

Quantity

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

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

None

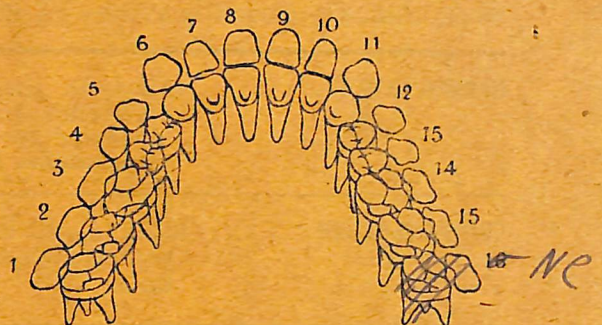
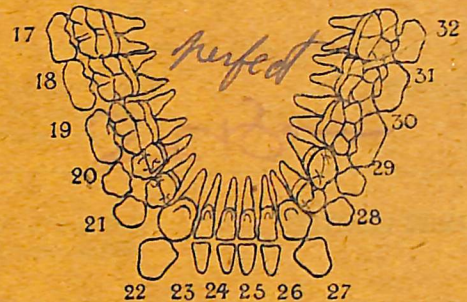


Diagram represents the mouth wide open



7. Disinterment supervised by C. J. Osgood, Sup. Emb.

Approved: O. E. Davis
C. E. Davis, 1st Lt., QMG.
(Title)

8. Reburial supervised by L. D. Hays

Approved: C. J. Blake
C. J. Blake
(Title) Capt. QMG

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.

GRAVE LOCATION FORM.

LOCATION OF THE GRAVE OF

Conrad.

Clint.

(Surname.)

(Number.)

(First Name and Initials.)

(Rank.)

(Organization.)

DATE OF BURIAL

Aug 12, 1918

PLACE OF BURIAL

St Leonards

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

Angers.

M. et L.

France

GRAVE NUMBER

39.

HOW MARKED : Name Peg?

Yes.

Cross?

Req.

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 :

REVIEWED
OSP SS.

REPORTED BY :

James P. Coy, Captain

(Signature and Rank of Reporting Officer.)

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

GRAVE LOCATION FORM.

LOCATION OF THE GRAVE OF

959
Conrad. 464732 Clint.
(Surname.) (Number.) (First Name and Initials.)

Out. C.A.C. art. 70th
(Rank.) Batt A. (Organization.)

DATE OF BURIAL August 13, 1918

PLACE OF BURIAL St. Leonard's

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

Angers.

M. et L.

France

GRAVE NUMBER 39.

HOW MARKED: Name Peg? yes. Cross? Req.

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:

REVIEWED
OSP SS.

REPORTED BY:

James B. Chaplain
(Signature and Rank of Reporting Officer.)

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

21 AOU Req

9599

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Conrad 464732 Clint
(Surname.) (Number.) (First Name and Initials.)

Private 70th Inf. C.A.C.
(Rank.) (Organization.)

DATE OF BURIAL Aug. 12, 1918

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

St. Leonard's Cemetery - Angers
Department of Maine et Loire

GRAVE NUMBER 39

HOW MARKED: Name Peg? yes Cross? yes
Headboard? Bottle?

IDENTIFICATION TAGS:
Was one buried with body? yes
Was one fastened to name peg or stake used as a grave marker? yes

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

REVIEWED
OSP SS.

23-B

REPORTED BY:
Chaplain C. J. Gaskin - 70th C.A.C.
(Signature and Rank of Reporting Officer.)

This portion to be forwarded to Adj. Genl. G. H. C. A. F. P.

GRAVE LOCATION BLANK

9579

LOCATION OF THE GRAVE OF

Conrad *464732* *Clint*
(Surname.) (Number.) (First Name and Initials.)

Private *70th. Inf. C. A. C.*
(Rank.) (Organization.)

DATE OF BURIAL. *Aug. 12, 1918.*

PLACE OF BURIAL.

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

*St. Leonard's Cemetery - Angers.
Department of Maine et Loire.*

GRAVE NUMBER. *39*

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

IDENTIFICATION TAGS:

Was one buried with body? *Yes*
Was one fastened to name peg or stake used as a grave marker? *Yes*
If name unknown and tags missing, description and marks should be given here:

**REVIEWED
OSP SS.**

REPORTED BY:

Chaplain C. J. Gaskin - 70th. C. A. C.
(Signature and Rank of Reporting Officer.)

This portion to be sent to Chief of *9400 Regt*

9597

Conrad C. #464752

Pvt. Brautfra

DD 8/12/18

Buried American Cemetery at Angers

grave 39

297

REVIEWED
OSP 50

B 578

DISINTERRED

File No: 9599

CONRAD, Clint

Date of Death: _____

File No: _____

Date Buried: 9/19/18

Cemetery: A. E. F. 297

Grave No: 39 Sect: _____

Column (No: _____)

Depth: _____

Coordinates: _____

Remarks: _____

Sketch No: 797

NP CROSS ED BD BTTL

Ident. Tag on Gr. Mkr: b.w.b.

Authority: _____

28 SEP 1918

B 170

REVIEWED
OFF SS

Disinterred

9599

Conrad Clint

DD 8/12/18

Disinterred 9/19/18 from ST LEONARD
CEMETERY TO A.E.F. CEMETERY # 297

Grave 39

REVIEWED
OSP SS.

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

Push Answer

Remain in Europe

2nd 120

FROM: Chief, Graves Registration Service, Q.M.C.
TO: Mr. A.F. Conrad Pinkstaff, Ill.
SUBJECT: Remains of Pvt. Clint Conrad.

The records of this office show that you have ~~requested that his body~~
not expressed wishes.

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

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

By authority of the Quartermaster General:

CHARLES C. PIERCE,
Major, U.S.A.

If all blank spaces below are not filled out, it will necessitate a return of this paper and a SERIOUS DELAY in the shipment of this body. State in each case WHETHER these relatives are STILL LIVING.

NAME OF	NO. & STREET	TOWN	STATE
Soldier's Widow	<i>New Marraet</i>		
Soldier's Children (Name oldest first)	1. 2. 3. <i>None</i>		
Father			
Mother	<i>Deceased</i>		
Brothers (Name oldest first)	1. 2. 3.		
Sisters (Name oldest first)	1. 2. 3.		

Date.....

Signature.....

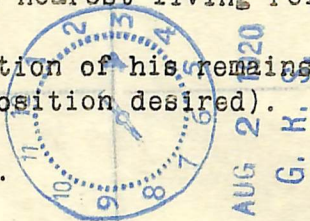
Address..... Relationship.....

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

(OVER)

Date _____ 1920.

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



1. As stated on first page of this sheet.

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

Station _____
(R.R. Station) (State)

3. To be returned to the U.S. and buried in _____ National Cemetery.

4. To remain in Europe, for burial in a permanent American Cemetery.

(Name of nearest relative) _____
Signature [Handwritten Signature]

INSTRUCTIONS FOR FILLING OUT

- | NAME OF | NO. & SHEET | JOHN | STATE |
|--|-------------|------|-------|
| 1. If definite instruction as to the disposition of a body are not received from the nearest relative within 2 weeks of its arrival at New York, burial will be made without further notice in the World War Section of Arlington National Cemetery. | | | |
| 2. The transfer of bodies will be made ENTIRELY at Government expense. | | | |
| 3. This paper MUST BE SIGNED BY THE PERSON WHO IS THE NEXT of kin IN THE ORDER shown in the square on the other side of this sheet. | | | |
| 4. This paper must be returned showing the name and address of each of the nearest living relatives in the spaces provided therefor on the other side of this sheet. | | | |
| 5. If there are minor children of the deceased soldier and no widow, the LEGALLY APPOINTED GUARDIAN of the children should ascertain their wishes and act for them in this matter. | | | |
| 6. If YOU are not the nearest relative, please ask the nearest relative, if living near you, to fill out this paper. | | | |
| 7. If YOU are not the nearest living relative and do not know who or where the nearest relatives are, please fill out this paper AT ONCE and mail to this office. | | | |
| 8. You are requested to return this paper AT ONCE in order to avoid delay in the case of this body. | | | |
| 9. Use the enclosed envelope - pay no postage. | | | |