

1206

274
293

G.R.S. Form #114-B

FULL NAME CONROY, Richard L.

RANK Overseas Secy SERIAL
.....

DIVISION & ORGANIZATION K. of C. Overseas Service

DATE OF DEATH 3/5/19

STATE FROM WHICH HE CAME Born in South Abington, Mass. Lived in New York City N. Y.

At time of enlistment

MEDALS OR DECORATIONS AWARDED.

certificate of Merit and Medal issued.

FINAL GRAVE LOCATION 8 18 B

Date Grave Row Block

Suresnes, #34

.....
Cemetery

GRAVE LOCATION BLANK

R

LOCATION OF THE GRAVE OF

Conroy.....Richard Luke.....
(Surname.) (Number.) (First Name and Initials.)

Secretary.....Knights of Columbus.....
(Rank.) (Organization.)

Died March 5, 1919
DATE OF BURIAL.....March 6, 1919.....

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

American Military Cemetery

Limoges, France

GRAVE NUMBER.....233.....

HOW MARKED: Name Peg?.....Yes..... Cross?.....

Headboard?..... Bottle?.....

IDENTIFICATION TAGS:

Was one buried with body?.....No.....

Was one fastened to name peg or stake used as a grave marker?.....No.....

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

REPORTED BY:

E. J. Muthenthal 2nd Lt. P. A. C.
(Signature and Rank of Reporting Officer.)

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

RECEIVED
STATISTICAL DIVISION
10 Mar 19
G.H.Q., A.E.F.

RECEIVED
CENTRAL
11 MARS 1919
6161
O
Received

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
WASHINGTON July 28, 1922.

*File
HCX.*

FILE: 293.8 C-R - #98720
SUBJECT: Permanent Grave Location of Richard L. Conroy, Sec.
Knights of Columbus.
TO: Mrs. John Shehan, 246 School St., Whitman, Mass.

1. The permanent grave of this civilian is No. 8 Row 18
Block B, The American Cemetery of Suresnes, Department of Seine, France.

2. 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, organization and date of soldier's death. The headstones will be placed at all graves in connection with the improvement work now in progress, as soon as possible and without waiting for special action or request on the part of relatives.

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

For the Quartermaster General:

MAILED

JUL 29 1922

G.R.S.

GEORGE H. PENROSE,
Assistant.

DATE October 28th 1921

1. NAME Conroy, Richard L SERIAL No. _____

RANK 518 extra ORGANIZATION Knights of Columbus

GRAVE LOCATION Limoges - Haute Vienne 151

CTY. NAME NUMBER

233

GRAVE ROW PLOT

2. ORIGINAL ~~BATTLE AREA~~ GRAVE LOCATION 233 Limoges, (Hte. Vienne)

GRAVE COMMUNE DEPT.

COORDINATES None.

CONCENTRATED TO March 6, 1919. 233

DATE GRAVE ROW PLOT

Limoges, (Hte. Vienne) 151

CEMETERY CTY. NUMBER

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

SUBSEQUENT REBURIALS

DATE GRAVE ROW PLOT CEMETERY

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR [Signature]

W. R. Nichols, Major, G.A.C.

3. FINAL GRAVE LOCATION 10-28-21. 8 18. Block B.

DATE GRAVE ROW PLOT

SURESNES AMERICAN CEMETERY #34 / SURESNES (SEINE) CEMETERY

4/10/44
AUDITED BY
J. J. OGG
81

MAR 24 1952

INSTRUCTIONS FOR PREPARATION OF FORM 114 B

1. Forms 114-B are to be prepared by Registration Branch in quadruplicate, three copies to be forwarded to Area Supervisor who will accomplish paragraph 2 and return all three copies to Headquarters, American Graves Registration Service.
2. Paragraphs 1 and 3 will be accomplished by Registration Branch, Headquarters, American Graves Registration Service, Q.M.C., in Europe.
3. Paragraph 2 will be accomplished by Area Supervisor from data on file in his office.
4. If data is entered on Form 114-B from Form 1, Form I6, Form 1-A or Form 16-A, statement to this effect will be made on Form 114-B STATING WHICH G.R.S. form data is taken from. If data concerning co-ordinates is approximate and NOT accurate, statement to this effect will be made on these forms.

RECEIVED
GRAVES REGISTRATION SERVICE

(100-47000)

DATE: _____

COORDINATES: _____

ORIGIN: _____

TYPE: _____

REMARKS: _____

APPROVED: _____

DATE: _____

INITIALS: _____

REPORT OF DISINTERMENT AND REBURIAL

1. REMAINS OF CONROY, Richard L. SERIAL NUMBER _____

RANK See. ORGANIZATION Knights of Columbus

2. Disinterred (date): _____ From (give complete location): _____

Oct. 14th, 1921 Gr. 233, Cem. 151

By: Group 1 Unit Sec. 7

3. Reburied (date): _____ In (give complete location): _____

October 28th, 1921. - Suresnes Cemetery. - Block B - Row 18 - Grave 8.

By: Group Field Operations Branch Unit _____ Nature of reburial Metal Casket and Blanket.

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

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

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

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

Disc on body read: "R. L. Conroy, K. of C., Q. E. F." "K. of C. insignia on right sleeve of blouse, Autopsy on skull.

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

(a) Height (actual measurement) Impossible to determine

(b) Weight (estimated) Impossible to estimate

(c) Hair—Color None

Quantity _____

Characteristics _____

(d) Hair on face—Color None

Location _____

Quantity _____

(e) Permanent marks on body (old scars, scars, dentures, Procel teeth or missing parts) None

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

None

E. S. Parker, checker.

7. Disinterment supervised by Ben A. Bradford

Approved: [Signature]

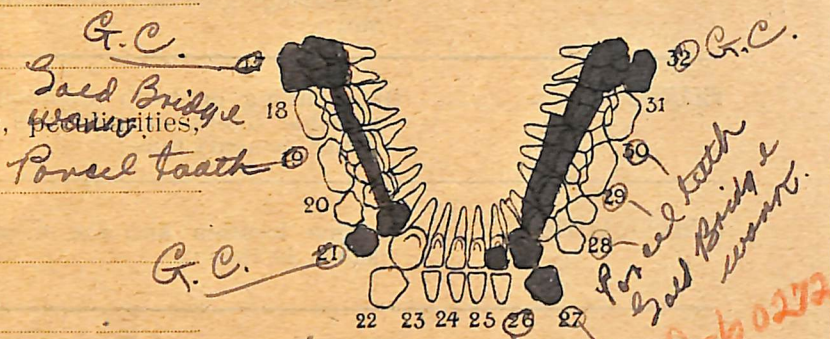
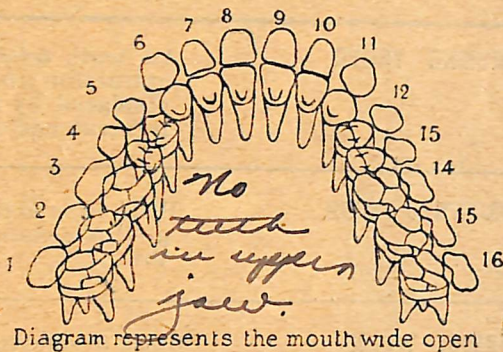
8. Reburial supervised by [Signature]

R. G. RICHARDS,
1st Lieut. Q.M.C.

(Title) G. S. Denny, 1st Lt., CAC.

Approved: [Signature]

(Title) R. P. HARBOLD,
Major, Q.M.C.



Permal teeth
Said Bridge & dentures
D-6 0273

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.

RECEIVED
GRAVES REGISTRATION



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

STATION Limoges, Cen. 151

To be prepared in triplicate.

DATE Oct. 14th, 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 Conroy, Richard L.

10. Name

2. No.

11. No.

3. Rank Sec.

12. Rank

4. Org. Knights of Columbus

13. Org.

5. D.D. 3-5

14. (a) D.D.

6. C.D. Cerebro Spinal Meningitis

(b) D.B.

Discrepancy found upon disinterment

7. Grave No. 233 Sec.

15. Grave No. Sec.

8. Plot Row

16. Plot Row

9.

17. No discrep.

18. Cemetery Amer.

19. Commune or town Limoges

20. Dept. or County Haute Vienne

21. Country France

22. G.R.S. Hdqrs. Code No. 151

23. Disinterred (Date) Oct. 14th, 1921

By Ben A. Bradford

24. Inscription on grave marker:

Name Richard L. Conroy

Serial No.

Rank Secretary

Organization Knights of Columbus

25. Was identification disc found on grave marker?

On body? Yes

E. S. Parker.

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).

Disc on body read: "R. L. Conroy, K. of C., A.E.F." K. of C. insignia on right sleeve of blouse.

27. Condition of body

Badly decomposed, features not recognizable.

28. Nature of burial

Pine box and uniform.

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above?

No discrep.

30. Body prepared and placed in casket: Date

Oct. 14th, 1921

By Ben A. Bradford

31. Casket sealed by Ben A. Bradford

Signature of Embalmer, (Supervisor)

Ben A Bradford

SHIPMENT. (Show actual marking of box.) Box No. C-7676

32. Designation of body:

Name Conroy, Richard L. Serial No. _____

Rank _____ Organization Knights of Columbus

33. Consigned to:

Name of Permanent Cemetery Suresnes Amer. Cem. #34.

34. Casket boxed and marked (Date) Oct. 14th, 1921 By Ben A. Bradford

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 C. S. Denny

C. S. Denny, 1st Lt., CAC.

36. Remarks _____

37. Shipped from point of Operation: (Date) Oct. 17th, 1921

To point of Concentration Paris Morgue (Seine) (Name) _____

Convoyer James J. O'Hara Signature Shipping Officer [Signature]

38. Received at Railhead or Point of Concentration: Date Paris, Morgue, Octob. 19, 1921

By G.R.S. Representative Atwood H. L. WARD? Major Q.M.C.

39. Shipped from Railhead or Point of Concentration: Date

39 (a) Received at Paris Morgue, October 19, 1921.

Atwood
H. L. WARD,
Major, Q.M.C. ✓

39 (b) Shipped from Paris Morgue, Oct. 28 1921. To Permanent Cemetery No. 34, American, Suresnes (Seine) by Shipping Officer, Convoyed by:

Atwood
H. L. WARD,
Major, Q.M.C. ✓

42. Grave No. 8. Section _____

43. ~~Block~~ Block B. Row 18.

el

G.R.S. Representative [Signature]

R. G. RICHARDS,
1st Lieut. Q.M.C.

SHIPMENT. (Show actual marking of box.) Box No. C-7676

32. Designation of body:

Name Conroy, Richard L. Serial No. _____

Rank _____ Organization Knights of Columbus

33. Consigned to:

Name of Permanent Cemetery Suresnes Amer. Cem. #34.

34. Casket boxed and marked (Date) Oct. 14th, 1921 By Sam A. Bradford

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 C. S. Denny

C. S. Denny, 1st Lt., CAC.

36. Remarks _____

37. Shipped from point of Operation: (Date) Oct. 17th, 1921

To point of Concentration Paris Morgue (Seine) (Name) _____

Convoyer James J. Shea Signature Shipping Officer [Signature]

38. Received at Railhead or Point of Concentration: Date Paris, Morgue, Octob. 19, 1921

By G.R.S. Representative [Signature] H.L. WARD? Major Q.M.C.

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

Permanent Cemetery _____

er _____ (Name) _____
Signature Shipping Officer _____

ed: Date October 28th, 1921.

Representative [Signature] R. G. RICHARDS, 1st Lieut. Q.M.C.

rred Suresnes Cemetery. October 28th, 1921.
(Date)

42. Grave No. 8. Section _____

43. ~~Row~~ Block B. Row 18.

el

G.R.S. Representative [Signature]

R. G. RICHARDS,
1st Lieut. Q.M.C.

COMPILATION OF DISPOSITION OF REMAINS DATA

File #98720

*Examined
2-4-22
for Concentration
att
34 7/23/22
Sweeney*

1. LOCATION INDEX CARD:

(a) Name CONROY, Richard L. Ser. No. _____)
(b) Rank Secretary Organization Knights of Columbus) TYP. HP
(c) Date of death 3-5-19 of death C. Spinal Meningitis) CKR _____

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

(a) Grave No. 233 Row --- Plot --- Sect. ---) TYP. 1LH
(b) Emerg. Address ----

111. Files of soldiers dying from contagious diseases; No Card) CKR ---

IV. A.G.O. DISPOSITION CARD:

Date of receipt _____

(a) Name No card in file (b) Relationship _____
(c) Address _____
(d) Remains to be brought to U. S.? _____
(e) To be interred in National Cemetery in U. S. at _____

(f) Shipping instructions upon arrival of body in U.S. _____

(g) Disposition instructions if not brought to U.S. _____

Examiner's Initials MM Date 5-6- 1920

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

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

No Correspondence

Examiner's Initials gob Date 3/6/ 1920

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

No request for disposition.

(a) Cancellation memos referred to? Yes - MHS

Examiner's Initials MHS Date 5-7- 1920

COUNTRY FRANCE CEMETERY NO. 151 SHEET NO. 42

G.R.S. Form #115
Amended April 6, 1920.

Make Form #114

FORM 115 A COMPLETED

137 12-20 H.

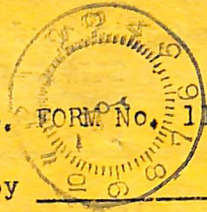
Concentrated into P.A.C. 34

Rechecked
MHS 12-8
over

Division of War Relocation Authority
RECEIVED
AUG 25 1921

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 MAY 13, 1920

Part 2 - Not to be returned. WLL

IX. CORRECTIONS

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

X. SUSPENSION REMARKS:

No. E.A.

*5/7/20
Rem*

*Ed is Mrs John Sheehan
29 Pearl St
Whitman Mass.*

*12-9-20 - Letter from sister (address given above) L-12-8-20
states it was the soldier's own wish and the
wish of all the brothers & sisters that his body remain
in France L.T. 12-20-20*

UNITED STATES DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION

I. IDENTIFICATION
(a) Name of subject
(b) Date of birth
(c) Place of birth

II. OCCUPATION AND EDUCATION
(a) Occupation
(b) Education

III. LIST OF AGENCIES WITH WHICH CONTACT HAS BEEN MADE

IV. INFORMATION ON WHICH ADVISE TO BE BASED IN CASE OF ARREST

V. OTHER AGENCIES ADVISED BY THIS BUREAU

VI. DATE OF REPORT

VII. SIGNATURE AND TITLE OF SPECIAL AGENT IN CHARGE

RECEIVED
DEC 23 1920

GENERAL INVESTIGATIVE SECTION
DIVISION OF INVESTIGATION

Whitman Dec 9. 1920.

noted on 115
L.T. 12-20-20

Co

Dear Sir.

In reply to your letter of the thirtieth giving me the grave number and location of my dear deceased brother Richard L. Conroy K. of C. Secretary's grave.

Recorded, Cemetery Div. O. C. M. E.
Filed 1/3/21

6556

I wish to state it was his own request in a letter to me, that if any thing should happen to him, he wanted to be buried in France. I have been very

Conroy, Richard E.

fortunate in getting all
the details of my brother
sickness, death, burial
Had a letter from a dear
friend telling of the
beautiful funeral he
had. all the brothers and
sister agree to comply
with his request and
leave his remains where
he wished to be buried.

I have a picture of his
grave sent me by kind

friends who visit his grave
and decorate it, will be
pleased to hear any
particulars in changes
made Very Respectfully

Yours John Sherman.

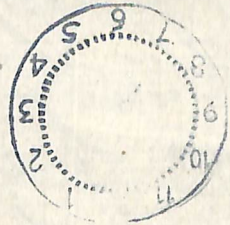
new address

246 School St.

Winturan!

Mass.

RECEIVED
DEC 13 1920



GENERAL DIVISION
OVERSEAS PROJECT SECTION

RECEIVED



DEC 11 1920
G. H. S.



DEC 17 1920

WAR DEPARTMENT
 CEMETRIAL DIVISION, GRAVES REGISTRATION SERVICE,
 PIER 2, HOBOKEN, N.J.

January 3, 1921.

FILE NO. 293.8 Cem. Div., Cem. Div.,
 (CONROY, Richard L.)

Mrs. John Sheehan,
 246 School Street,
 Whitman, Mass.

Dear Madam:

Receipt of your communication dated December 9, 1920, relative to the remains of your brother, the late Richard L. Conroy, Secretary, Knights of Columbus, is acknowledged.

Before your request that the remains of your late brother remain in France can be complied with, it is necessary that you inform this office if the deceased is survived by widow, children, of father, mother, brothers or older sister than yourself, giving the name and address of each.

Your early attention to this matter will be greatly appreciated.

The Department desires to convey to you renewed assurance of its sympathy in your bereavement.

By authority of the Quartermaster General:

R. E. SHANNON,
 Captain, Quartermaster Corps,
 Officer in charge.

By:

F. C. PALLAS,
 Executive Assistant.

RECEIVED
 JAN 22 1921

121-42

WAR DEPARTMENT
GENERAL INVESTIGATIVE DIVISION, GRAVES REGISTRATION SERVICE

W. R. S. HOBSON, P. 1.

January 3, 1921

File No. 233.8 Gen. Div. Com. Div.
(CORNER, Richard A.)

Mrs. John Sheehan,
246 Street
Whitman, Mass.

Dear Madam:

Receipt of your communication dated December 2,
1920, relative to the remains of your brother, the late
Richard A. Conroy, secretary, Knights of Columbus, is ac-
knowledged.

Before your request that the remains of your
late brother remain in France can be complied with, it
is necessary that you inform this Office of the deceased
as survived by widow, children, father, mother, brothers
or other sister than yourself, giving the name and address
of each.

Your early attention to this matter will be great-
ly appreciated.

The Department desires to convey to you renewed
assurance of its sympathy in your bereavement.

By authority of the Quartermaster General:

W. R. S. HOBSON

AUG 25 1921
G. H. S.



RECEIVED

RECEIVED
AUG 25 1921

Division
Graves Registration Sub-Section

98720

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Conroy.....Richard Luke.....
(Surname.) (Number.) (First Name and Initials.)

Secretary.....Knights of Columbus.....
(Rank.) (Organization.)

Died March 5, 1919
DATE OF BURIAL March 6, 1919

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

American Military Cemetery

Limoges, France

FILE

GRAVE NUMBER 233

HOW MARKED: Name Peg? **Yes**..... Cross?.....

Headboard?..... Bottle?.....

IDENTIFICATION TAGS:

Was one buried with body? **No**.....

Was one fastened to name peg or stake used as a grave marker? **No**.....

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

151

**REVIEWED
OSP SS:**

REPORTED BY:

E. S. Nuttall 2nd Lt. M.C.
(Signature and Rank of Reporting Officer)

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

RECEIVED
MAR 10 Mar 1912
O. C. O. N.
G. R. S.

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Cowroy *Richard L.*
(Surname.) (Number.) (First Name and Initials.)

R of C Secretary
(Rank.) (Organization.)

DATE OF BURIAL... *6th March*

PLACE OF BURIAL... *American Cemetery*

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

Tery Limoges France

GRAVE NUMBER... *233*

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?

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

151

REVIEWED
OSP SS.

REPORTED BY:

James W. McKay Chap
(Signature and Rank of Reporting Officer.)

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

02120
98720

RECEIVED
MAR 22 1919
O. C. Q. M.
G. R. S.

W. J. [Signature]
GEO. L. F.
20 MAR 1919
L. S. D.
L. S. D.

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

98720

Conroy *Richard Luke*
(Surname.) (Number.) (First Name and Initials.)

KafC *Secretary*
(Rank.) (Organization.)

DATE OF BURIAL. *March 6 1919*

PLACE OF BURIAL. *American Cemetery*

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

Limoges France

GRAVE NUMBER. *233*

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:

151

REVIEWED
OSP SS.

REPORTED BY:
James W. McStay, 1st Lt Col
(Signature and Rank of Reporting Officer.)

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

