

To The A. G. O.

G.R.S. Form #114-B

DEC 24 1925

217

466

297

FULL NAME CONSTANTINE, Charles F. *Solzig*

RANK Private, First Class SERIAL 1718681

Div-77

DIVISION & ORGANIZATION Company C, 302nd Field Signal Battalion

DATE OF DEATH *Aug 16, 1918*

STATE FROM WHICH HE CAME *ny*

MEDALS OR DECORATIONS AWARDED *none*

FINAL GRAVE LOCATION	Date	Grave	Row	Block
		12	14	A

608

Cemetery



Robert O. Day
Major General
The Adjutant General
BY *RM*

File
872
2-14-29

AUDITED BY
202 7-31-24

DEC 29 1925

23/306/ARK

mother

REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name: Charles Constantine

Number: 1718681

Rank: Pvt.

Organization:

Co.C. 30th. F.S.Bn.

Disinterment and Reburial made by Group 3

Unit 304

Disinterred (Date)

June 5, 19

From: (Give complete location)

Grave #35 Sketch #41-Carr. Map #33 Soissons. SE. 270.65N-185.35E

#41 Garrison

Reburied (Date)

June 5, 19

in: (Give complete location)

Grave # 53 Section D. Plot.#2. Fed.Cem. Seringes et Nesles (Aisne)

Map #33 Soissons. SE. 275.4N-195.25E

304

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

Buried 3 feet deep-- Body badly decomposed.

Was one identification tag found upon the body? None--One on cross.

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

CONFIRMED N° D 11861

Note:

If upon disinterment, effects are found upon bodies, they will be promptly sent to the Effects Depot direct, as is required by G.O. 170, G.H. 2, 1918., after being carefully examined for clues to identity in doubtful cases, notation whereof will be made and reported to Chief, Graves Registration Service.

Supervised by: Cpl. C.E. Wise.

1st. Lt. Wm. N. Carr.

C.O. Group 3 Unit 304



REPORT OF DISINTERMENT AND REBURIAL

Place Seringes et Nesles .

Date April 18th 1921.

1. REMAINS OF Charles F. Constantine . SERIAL NUMBER I71868b

RANK Pvt I/C. ORGANIZATION Co C. 302th F.S.B.

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

April 18. 1921. Grave 53 Sec D. Pt 2 ; Cem 608.

By : Group 2 Unit I

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

April 18th 1921. Grave 53, Sec D, Pt 2 Cem 608.

By : Group 2 Unit I Nature of reburial Pine box and burlap.

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

No Uniform O.D. blanket. 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 :

Post mortum 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) "

(c) Hair—Color "

Quantity "

Characteristics "

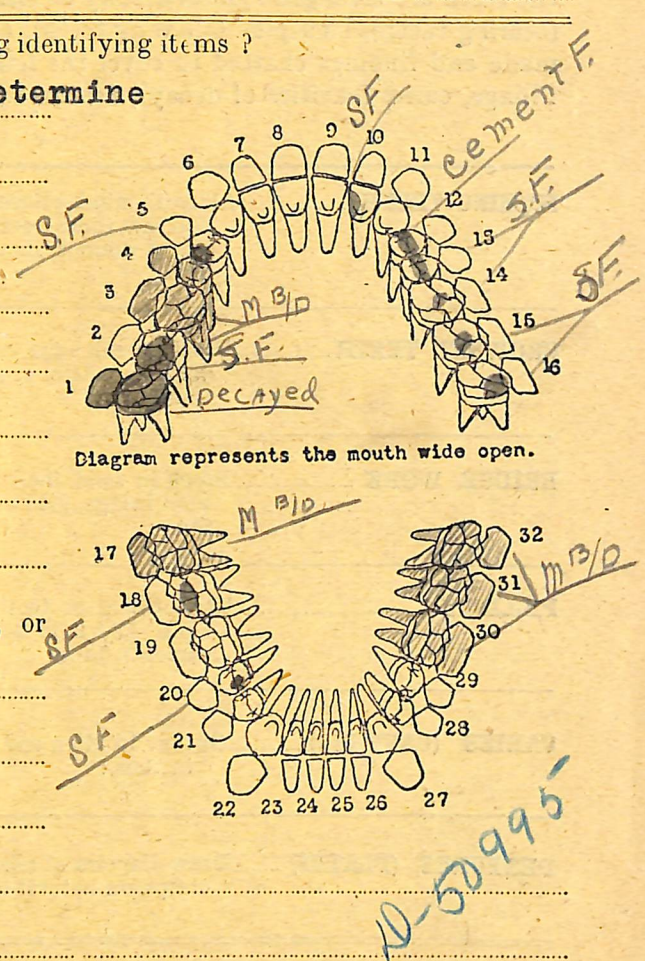
(d) Hair on face—Color "

Location "

Quantity "

(e) Permanent marks on body (old scars, peculiarities, or missing parts) None

(f) Wounds or missing parts (received at time of casualty) None



10-50995

7. Disinterment supervised by J A. Lee

Approved : R. Richards,
(Title) 1st Lt. Q.M.C.

8. Reburial supervised by J A. Lee,

Approved : R. Richards,
(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.

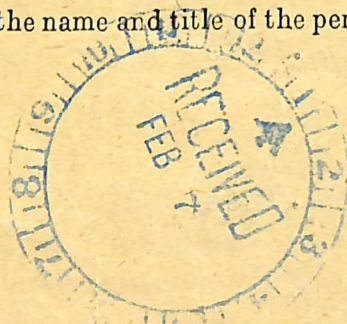
6. Give all information as to body description and dental chart as nearly correctly as the condition of the body will allow. Items (e) and (f) under the body description are very important and should be very complete. The dental chart is also very important and should be filled in with great care. There 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.

<p>MISSING TEETH.....All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus :</p>	
<p>CROWNED TEETH.....Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus :</p>	
<p>BRIDGE WORK.....Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :</p>	
<p>FILLINGS.....Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus :</p>	
<p>CARIES (CAVITIES).....Outline location and size of cavity, shade in thus :</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.



G. H. Gellag.

MEDICAL RECORD

Constantine, Charles F.
#112, Co C, 302 F.S. Bn.

Station: Louison's Party H
Date: 2 July 1930

Name Constantine Mrs Annie E.
Home address 671 Carroll St New York
Address of Nearest friend or relative Chas D. Munson (brother)
423 Front St Perth Amboy New Jersey
Religion Protestant Age 69 yrs
History of Present complaint: Constipation - Says she has
diabetes - appears well 7/7/30

INSTRUCTIONS. — This card will be started in all cases of Pilgrims requiring medical attention by the Medical Officer or Nurse first rendering such attention. Subsequently it will be carried by the nurse in attendance upon the group to which the Pilgrim is assigned. All Medical Officers rendering any assistance in the case will make an appropriate entry which will include date, time and signature. Upon final disposition of the case the Nurse in charge will deliver the card to the Office of the Chief Surgeon. Pilgrims sent to the American Hospital will be accompanied by this card properly completed, which will be authority for admission, in which case a duplicate card will be made and sent without delay to the Office of the Chief Surgeon.

(over)

Diagnosis and complications: (include dates)

Constipation

Treatment and Progress: (include dates)

2 cc pills 2/7/30

I Triple Bromide 3/7/30

2 cc pills 7/5/30 no result

Milk of Magnesia 30 cc 7/6/30 good result

Disposition: (include dates)

Remarks:

CODE SLIP

HEADING	SUB HEADING	NO. OF COLS	CODE
NAME <i>Constantine</i>	<i>C O N</i>	3	<i>3 5 4</i>
<i>Charles F</i>	CEMETERY <i>608</i>	1	<i>2</i>
BURIED	GRAVE <i>12</i>	2	<i>12</i>
	ROW <i>14</i>	2	<i>14</i>
	BLOCK <i>A</i>	1	<i>1</i>
STATE	<i>ny</i>	2	<i>37</i>
RANK	<i>Port 1/cl</i>	1	<i>2</i>
DIVISION	<i>77</i>	2	<i>77</i>
ORGANIZATION	<i>302</i>	3	<i>302</i>
ARM	<i>4 Sig Bn</i>	1	<i>5</i>
MARITAL	<i>no</i>	1	<i>2</i>
NAME <i>Constantine</i>	<i>C O N</i>	3	<i>3 5 4</i>
<i>Mrs Anna E</i>	STATE <i>ny</i>	2	<i>37</i>
RESIDENCE	COUNTY <i>Kings</i>	2	<i>24</i>
	CITY <i>Brooklyn</i>	3	<i>101</i>
RELATION	<i>mother</i>	1	<i>1</i>
OTHER		1	
ELIGIBILITY	<i>yes</i>	1	<i>1</i>
NATIVITY		1	
RACE		1	
ENGLISH	<i>yes</i>	1	<i>1</i>
ATTENDANT		1	
HEALTH	<i>Good</i>	1	<i>1</i>
NO. OF SONS		1	
DATE OF TRIP	NO.	1	
	YR. <i>1930</i>	1	<i>1</i>
ACCEPTANCE	<i>yes</i>	1	<i>1</i>

29/514/EAB
Age
21/1/30

Audited
OCT 8 1931
A.S.

Party "H" - Itinerary - Base-Aisne Group

Sailed June 21, 1950 on SS ROOSEVELT. Major J. F. Cottrell in charge.

Arrived Cherbourg 5 a.m. June 28th. Met by Major Daily, Capt. Mitchell, Capt. Dalton, Lieut. Gregory, Lieut. Freeman, Major Enderman, three nurses and two civilian employees. Train left at 8.21 a.m. for Paris. Arrived Gare des Invalides at 2.33 p.m. Met by Lt. Col. Bartlett and members of the staff, with interpreters and nurses. Escorted to hotel. Remainder of day devoted to rest.

June 30th. Morning devoted to personal business; changing money, preparing laundry, etc. Left hotel at 3 p.m. for Arc de Triomphe. Wreath placed on tomb of the Unknown Soldier by Mrs. Wilhelmina Ohlson, who was selected by party for this duty. A wreath was also laid by Mrs. Anna Johnson on behalf of the N.Y. Fire Department. Proceeded to Restaurant Laurent after ceremony where tea and reception tendered by U.S. Government was held. Returned to hotel. Evening free.

July 1st. Morning free. 1.40 p.m. depart La Ferté Saconsans.

July 2nd. Visited Saconsans Cemetery. Saconsans. Pierrefonds. Saconsans.

July 3rd. Saconsans Cemetery. Saconsans. Belleau Woods Monument Hill 304. Coulonges - Saconsans.

July 4th. Saconsans Cemetery - Saconsans - Chemin-des-Dames - Reims.

July 5th. Morning free. Lunch at Reims. Fismes. Saconsans. Compiègne.

July 6th. Carrefour de l'Armistice. Lunch at Compiègne. Chantilly. Returned to Paris.

July 7th. Notre-Dame - Sacre-Coeur.

July 8th. Morning free. Napoleon's Tomb. Sightseeing Night Trip.

July 9th. Visit to Louvre - Versailles. Prepared for return trip.

July 10th. Due to the fact that the date of return was changed from July 10th to July 11th, this day was free and was devoted to shopping, etc.

July 11th. Left Hotel between 1 and 1.30 p.m. for Invalides Railway Station. Train left at 2.15 p.m. Accompanied by 5 officers, 1 doctor, 3 nurses and 1 civilian employee. Arrived Cherbourg 5.53 p.m. Sailed 7.25 p.m. on SS REPUBLIC. Major Cottrell in charge. Arrived Hoboken, N.J. 5 p.m. July 20th.

136
671 Carroll St. 2505

NAME CONSTANTINE, MRS. ANNA E.

S.S. REPUBLIC

JUL 19 1930

HOME BROOKLYN, KINGS COUNTY, N. Y.

R.R.

STATION

TRAIN #

CAR #

BERTH OR SEAT

TIME

DATE

Chas. O. Munson

132 Front St

Perth Amboy

N. J.

Name CONSTANTINE, Mrs., Anna E

Paris Hôtel HOTEL DE PARIS

ROULEVARD DE LA MARNE

Home address 671 Carroll St. Brooklyn, Kings County, New York

Party H Group 2 Unit §§. ROOSEVELT.

Date of arrival June 29, 1930 Date of departure §§. REPUBLIC. July 11, 1930.

Relationship Mother

Name of deceased CONSTANTINE, Charles

Rank Pvt 1 cl Organization Co. C, 302d. F.S. Bn

Cemetery Oise-Aisne

REMARKS



WAR DEPARTMENT
 "PILGRIMAGE, WAR MOTHERS AND WIDOWS"
 ROOM 901
 225 WEST 34TH ST., NEW YORK, N. Y.

CONSTANTINE, Charles F.

O.A.

Party **H**

Number .. **1505**

REQUEST FOR PULLMAN RESERVATION

MRS. ANNA E. CONSTANTINE Actual cost of through Pullman.
 Name of Traveler

BROOKLYN, KINGS COUNTY New York, to
 Home Address

NEW YORK \$

New York, to
 Destination

Via

.....
 Date of Departure

	Road	Tr. No.	Date	Time	Lower or Seat	Car	U. S. G. Order No.	Actual Cost
LV								
AR								
LV	<i>Motor Transportation to home</i>							
AR								
LV								
AR								
LV								
AR								
LV								
AR								
LV								
AR								

TOTAL

Remarks:

.....

June 12, 1930

Mrs. Anna E. Constantine
671 Carroll Street
Brooklyn, New York

Dear Madam:

In reply to letter from this office dated June 5th asking whether or not you desired transportation from your home to the Hotel Astor on June 20th, the day prior to your sailing on the S.S. Roosevelt, June 21st, you replied that it would not be necessary to furnish transportation.

Please be advised that it is the wish of the War Department at Washington, D.C., that all pilgrims check-in at the hotel the day previous to sailing, in order that proper record can be made and full instructions issued.

It is therefore requested that you arrange to report to the United States Army Officer who will be in uniform on duty in the lobby of the Hotel Astor, 44th Street and Broadway, New York, N.Y., the afternoon of June 20th, between the hours of 2:00 and 4:00 P.M.

Yours very truly

GEORGE F. R. TAYLOR
1st Lieut. Q.M.C.(DOL.)
Assistant

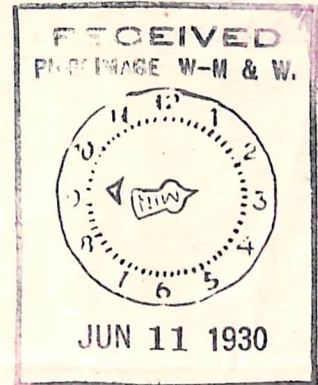
JFM:GER

WAR DEPARTMENT
"PILGRIMAGE, WAR MOTHERS AND WIDOWS"

----- Room 901 -----
225 WEST 34TH ST., NEW YORK, N.Y.

June 5, 1930

Mrs. Anna E. Constantine,
671 Carroll Street,
Brooklyn, N. Y.



Dear Madam:

From advice received from the Quarter-
master General's Office, Washington, D. C.,
your name shows as a passenger scheduled to
sail for Europe on the S. S. "ROOSEVELT"
sailing June 21st, 1930.

Enclosed herewith please find two baggage
tags which should be attached to your baggage
for identification.

Reservations have been made for you to stop
at the Hotel "ASTOR", the night of June 20.
Necessary transportation will be provided for
you from your home to the hotel, unless you
desire to travel by your own transportation.

Please advise what your desires are in this
respect, using the lower portion of this
letter for your reply.

There is enclosed a self-addressed envelope
which requires no postage.

For the Officer in Charge.

George F. R. Taylor
George F. R. Taylor
1st Lieut. Q. M. C.
Assistant

I ~~will~~ require transportation from my home to hotel.
~~will~~ not
WILL

Anna E. Constantine

Hand Baggage - 2

H.
NAME Constantine Mrs Anna E.

ADDRESS 671 Canal St. Brooklyn, N.Y.

DATE _____

TO: OFFICER-IN-CHARGE,
PILGRIMAGE, WAR MOTHERS AND WIDOWS

I BEG TO INFORM YOU THAT I HAVE RETURNED
TO MY HOME SAFELY AND IN GOOD HEALTH.

SINCERELY,

(SIGNED) Mrs Anna E Constantine

WAR DEPARTMENT



OFFICIAL BUSINESS

PENALTY FOR PRIVATE USE \$300.



ADDRESS
YOUR MAIL
TO
STREET AND
NUMBER

PILGRIMAGE, WAR MOTHERS AND WIDOWS.

225 WEST 34TH STREET,

NEW YORK, N. Y.

STATE

NEW YORK

CONSTANTINE, CHAS. F.

M

NAME Constantine, Mrs. Anna E. HOME ADDRESS 671 Carroll St.
Kings County
Brooklyn

NAME AND ADDRESS OF NEAREST KIN Chas. Munson 132-1st Ave
Perth Amboy, N.J.

ARRIVAL IN NEW YORK

DATE June 20 HOTEL Astor ROOM NO. 136
Quarters with Mrs. Mary A. Reynolds

DEPARTURE NEW YORK

DATE 6/21/30 VESSEL Roosevelt CABIN NO. 109-C

DESTINATION Cherbourg, France CEMETERY Oise-Aiane

RETURN NEW YORK

DATE JUL 20 1930

671 Carroll St.
Kings County
Brooklyn, N. Y.

M
NAME Constantine, Mrs. Anna E. HOME ADDRESS

RETURN ON S. S. **S/S REPUBLIC** HOTEL ROOM NO.

Cabin 2-a

DEPARTURE NEW YORK

DATE

ROAD TRAIN CAR BERTH or SEAT

REMARKS

Local

MEDICAL RECORD

Party H

G. Sellar R.N.,

Station: Soissons

Date: July 3, 1930

Name Constantine, Mrs. Anna E.

Home address 671 Carrol St., New York City.

Address of Nearest friend or relative Brother, Chas. O. Munson

423 Front St., Perth Amboy, N. J.

Religion Prot.

Age 69

History of Present complaint: Constipation. Says she has diabetes. Appears well

INSTRUCTIONS. — This card will be started in all cases of Pilgrims requiring medical attention by the Medical Officer or Nurse first rendering such attention. Subsequently it will be carried by the nurse in attendance upon the group to which the Pilgrim is assigned. All Medical Officers rendering any assistance in the case will make an appropriate entry which will include date, time and signature. Upon final disposition of the case the Nurse in charge will deliver the card to the Office of the Chief Surgeon. Pilgrims sent to the American Hospital will be accompanied by this card properly completed, which will be authority for admission, in which case a duplicate card will be made and sent without delay to the Office of the Chief Surgeon.

(over)

Diagnosis and complications: (*include dates*)

Constipation

Treatment and Progress: (*include dates*)

July 2nd: 2 cc pills

3rd: 1 triple bromide

5th 2 cepillls no result

6th: milk of magnesia, good result

Disposition: (*include dates*)

Remarks:

7/11/30 to Cherbourg. HWK

15-25

RETURN RECEIPT

608

Present 6/21/30

Received from the Postmaster the Registered or Insured Article, the original number of which appears on the face of this Card.

Mr. Anne C. Constantine

(Signature or name of addressee.)

(Signature of addressee's agent.)

5/31/30

Date of delivery, _____, 192

Post Office Department

OFFICIAL BUSINESS

REGISTERED ARTICLE

No. 926595

INSURED PARCEL

No. _____

PENALTY FOR PRIVATE USE
TO AVOID PAYMENT OF
POSTAGE, \$300.

POSTMARK OF DELIVERING
OFFICE

AND DATE OF DELIVERY

Return to _____

Q. M. GENERAL

Street and Number,
or Post Office Box,

(NAME OF SENDER)
MUNITIONS BUILDING

STREET AND
NUMBER

TO

MAIL

ADDRESS

WASHINGTON

D. C.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Constantine, Charles F. 608 M
Roosevelt 6-21

May 12, 1930

Mrs. Anna E. Constantine,
671 Carroll St.,
Brooklyn, N. Y.

Dear Madam:

The records of this office show that you have not furnished the name of your Emergency Addressee as requested in letter of instructions from this office.

It is requested that in the blank space below you write the name and address of the person in the United States whom you desire to be notified in case you become seriously ill or other emergency arises while you are making the pilgrimage to Europe authorized by the Act of Congress approved March 2, 1929.

Noted ✓

Mr. C. C. Munson
Name

423- Front Street, Perth Amboy
Address
New Jersey.

Please fill in the above and mail it TODAY in the self-addressed envelope which requires no postage.

For The Quartermaster General,



Very truly yours,
A. D. Hughes
A. D. HUGHES,
Captain, Q. M. Corps,
Assistant.

Encl.
Env.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Constantine, Charles F. 608 M

April 10, 1930.

Mrs. Anna E. Constantine,
671 Carroll St.,
Brooklyn, N.Y.

Dear Madam:

The following instructions prepared by the Secretary of State contain the necessary instructions to be followed by you in obtaining the passport or travel document to be utilized in connection with your pilgrimage to the cemeteries in Europe. Please read the directions carefully and call in person upon the nearest Passport Agent or clerk of a Federal or State court having jurisdiction to naturalize aliens. Passport Agencies are located in Boston, Chicago, New Orleans, New York City, San Francisco and Seattle. In large cities there are usually two or more courts and at each county-seat a state court authorized to accept these passport applications.

When you make this call be sure to take with you the four photographs called for in the instructions together with your invitation as a means of identification. You should take with you to the passport office at this time a friend who is an American citizen and who has known you for several years. The passport Agent or clerk of the court will mail your application to the Secretary of State in Washington, D. C., who will issue the passports and travel documents and will deliver them to The Quartermaster General to be held by him until your arrival in New York.

The instructions prepared by the Secretary of State are as follows:

"A mother or widow who owes allegiance to the United States must apply to the Department of State for a Special Pilgrimage Passport through a Passport Agent or through a clerk of a Federal court or State court having jurisdiction to naturalize aliens and on the form prescribed by that Department. When making application, she should be accompanied by a credible witness who is an American citizen and who has known her for a period of two years or more. With her application she should submit four photographs on a light background and on thin paper not more than 3x3 inches in size not less than 2½x2½ inches in size and such documentary

evidence of her American citizenship as she may have in her possession. In the absence of evidence of citizenship, her application should be witnessed by a credible person residing in the same community who is an American citizen, has known her for a long period of time and is able to swear to the best of his or her knowledge and belief that she is a citizen of the United States.

"A mother or widow who does not owe allegiance to the United States must apply to the Department of State for a Pilgrimage Travel Document through a clerk of a Federal court or a State court having jurisdiction to naturalize aliens or through a Passport Agent upon the form of application prescribed for that purpose, entitled APPLICATION FOR A PILGRIMAGE TRAVEL DOCUMENT, issued under the Act of March 2, 1929, submitting therewith four photographs on a light background and on thin paper not more than 3 x 3 inches in size and not less than 2½ x 2½ inches in size. When making application she should be accompanied by a credible witness who has known her for a period of two years or more.

"The Act of March 2, 1929, provides that no fee shall be charged for the execution of an application for a passport or travel document or for the issue of a passport or travel document to a mother or widow making a pilgrimage to the cemeteries of Europe in which deceased soldiers, sailors, and marines of the American forces are now interred.

"Special Pilgrimage Passports and Pilgrimage Travel Documents when issued by the Department of State will be forwarded to the War Department.

"Applicants resident in Boston, Chicago, New Orleans, New York City, San Francisco and Seattle should execute applications at the Passport Agencies in those cities."

For The Quartermaster General,

Very truly yours,

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

Roosevelt
6/21/30
608

Constantine, Charles F

Mrs. Anna E. Constantine
671-Carroll Street Brooklyn
N. Y.

I Accept the invitation extended
(Accept or decline)

me to make a pilgrimage to Europe at the expense of the Government of the United States under the provisions of the Act of Congress approved March 2, 1929.

Mrs. Anna E. Constantine

(Name)

671 Carroll St., Brooklyn, Kings Co., N. Y.

(Town or City)

(State)



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Constantine, Charles F. 608 M

October 7, 1929.

Mrs. Anna E. Constantine,
671 Carroll Street,
Brooklyn, N. Y.

Sailed
JUN 21 1930

Dear Madam:

The Act of Congress which provides for pilgrimages to cemeteries in Europe by mothers and widows of members of the military or naval forces of the United States who died in the military or naval service at any time between April 5, 1917 and July 1, 1921, and whose remains are now interred in such cemeteries, all necessary expenses of which pilgrimages are to be paid by the United States Government, requires that the Secretary of War make an investigation and submit the results of such investigation in a report to Congress not later than December 15, 1929. The purpose of the investigation is to determine the total number of mothers and widows entitled to make the pilgrimages, the number of such mothers and widows who desire to make the pilgrimages, the number who desire to make the pilgrimages during the calendar year 1930 and the probable cost of the pilgrimages to be made.

In order that the report referred to may be made and plans completed for conducting the pilgrimages, it is requested that you answer the following questions by filling out the blanks left therefor and return the letter to this office by return mail in the enclosed envelope which requires no postage.

1. Do you desire to make this pilgrimage if eligible?	(Yes) <i>Yes</i>	(No)
2. Do you desire to make the pilgrimage in the calendar year 1930?	(Yes) <i>Yes</i>	(No)
3. Have you at any time made a previous visit to the grave of the deceased member of the military or naval forces in whom you are interested?	(Yes)	(No) <i>No</i>
4. Please give your age and state of health.	Age <i>69</i> (Years)	Health <i>Good</i> (Good) (Poor)
5. What language do you speak?	English - <i>Yes</i> (Yes)	(No)
	Other language <i>None</i>	(Specify language spoken)

For The Quartermaster General,

RECEIVED
OCT 15 1929
M. & R. S. W.
Q. Q. M. G.

Very truly yours,

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

Encl.
Act
Envelope

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Constantine, Charles F.

July 31, 1929.

Mrs. Anna E. Constantine,
671 Carroll St.,
Brooklyn, N. Y.

Dear Madam:

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

The records of this office show that you are the mother of the late Pvt. 1/c Charles F. Constantine, Co. C. 302nd F. S. Bn., whose remains are interred in the Oise-Aisne American Cemetery, Seringes-et-Nesles, Aisne, France.

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

Write answers in space below:

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

No

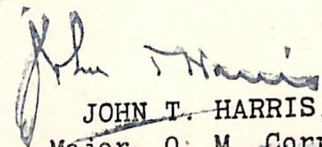
2. If so, give her complete address.

3. Will you make the pilgrimage?

Yes

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

June 24 , 1929.

Constantine, Charles F.

XC 36 696

Mrs. Anna E. Constantine,
99 St. Marks Place,
Brooklyn, N. Y.

M. Anna E. Constantine
671 Carroll St.
Brooklyn, N.Y.

Dear Madam:

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

The records of this office show that you are the mother of the late Pvt.1/c Charles F. Constantine, Co. C. 302nd F. S. Bn., whose remains are 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 widow who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish her full name and address in order that action may be taken to extend an invitation to her to make the pilgrimage. Both mothers and widows are entitled to make the pilgrimage.

In the event your son was survived by a widow who has since re-married it is requested that a statement to that effect be made.

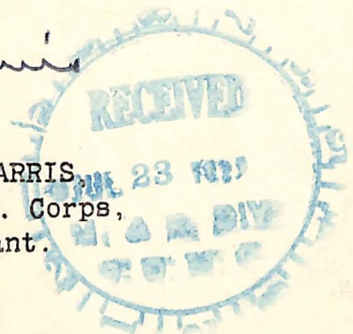
For your reply, you may use the enclosed envelope which requires no postage.

For The Quartermaster General,

Very truly yours,

2 incls.
Act of Congress.
Envelope.

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

June 12, 1930.

Constantine, Chas. F. 608 M

Mrs. Anna E. Constantine,
671 Carroll St.,
Brooklyn, N. Y.

Dear Madam:

Somewhat heavier clothing is required to be worn in Europe than is necessary in the United States, in order to be comfortable. During the summer in Europe it is cool during the day and the nights are frequently chilly. Considerable rain is usually encountered during this time.

In order that you may be comfortable at all times, regardless of the condition of the weather, and may avoid missing any of the sights or any part of the itinerary which has been planned for you, the following suggestions are made.

The clothing which you will take with you should be slightly heavier and warmer than you would normally wear in the United States during the summer and should be strong and durable. It is essential that you take with you the necessary equipment to afford protection from the cold and dampness. Be sure to take at least two pairs of comfortable shoes to provide a change in the event your feet become wet, a pair of rubbers, an umbrella, and a sweater or some warm wrap to be used should the weather become uncomfortably cool. It is very desirable that, in addition to the sweater, you have with you a full length coat of medium weight for general wear.

The shortages of suitable facilities for laundry and the frequency of the moves you will make while in Europe will make it impracticable to secure as frequent service of this nature as may be desired. You should therefore provide yourself with sufficient underwear, nightgowns, stockings and handkerchiefs to meet your requirements should it be impossible to have your washing done more frequently than once in two weeks.

BOOKMAN W. L.
507 CANTON ST.
NEW YORK N. Y. CONDOR
COMPENSATION CARD
D-A 208 W
ON 502 A-C

If you will read carefully the suggestions made above, and comply with them, it will add greatly to your comfort throughout the trip and will assist the Government in carrying out successfully its plans for conducting the pilgrimage. This letter is being sent to every mother and widow who has accepted the invitation sent to her by the Government to visit the grave of her son or husband.

For The Quartermaster General,

Very truly yours,

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Constantine, Charles F. 608 M
Roosevelt 6-21

May 12, 1930

Mrs. Anna E. Constantine,
671 Carroll St.,
Brooklyn, N. Y.

Dear Madam:

The records of this office show that you have not furnished the name of your Emergency Addressee as requested in letter of instructions from this office.

It is requested that in the blank space below you write the name and address of the person in the United States whom you desire to be notified in case you become seriously ill or other emergency arises while you are making the pilgrimage to Europe authorized by the Act of Congress approved March 2, 1929.

Name

Address

Please fill in the above and mail it TODAY in the self-addressed envelope which requires no postage.

For The Quartermaster General,

Very truly yours,

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

Encl.
Env.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Constantine, Chas. F. 608M
Roosevelt 6-21

May 8 1930

Mrs. Anna E. Constantine,
671 Carroll St.,
Brooklyn, N.Y.

Dear Madam:

Requests for stop-overs on return from the pilgrimage to the American cemeteries in Europe are being received by this office, in some cases, too late to take action.

Transportation arrangements for the round-trip are made a month before departure and requests for stop-overs on return must be in this office at that time.

Stop-overs can not be allowed on the trip to New York or in Europe, but may be allowed at any point on return from New York provided there is no additional cost or, if there is, that it is paid in advance by the pilgrim.

If you desire stop-overs at any point on return, please advise this office AT ONCE as to the cities where you desire to stop and we will be glad to arrange accordingly, or advise you if there is any additional cost to be paid by you. Send your request direct to this office and do NOT include it with your passport application.

For The Quartermaster General,

Very truly yours,

R. E. SHANNON,
Captain, Q. M. Corps,
Assistant.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Constantine, Charles F. 608 M

April 10, 1930.

Mrs. Anna E. Constantine,
671 Carroll St.,
Brooklyn, N.Y.

Dear Madam:

The following instructions prepared by the Secretary of State contain the necessary instructions to be followed by you in obtaining the passport or travel document to be utilized in connection with your pilgrimage to the cemeteries in Europe. Please read the directions carefully and call in person upon the nearest Passport Agent or clerk of a Federal or State court having jurisdiction to naturalize aliens. Passport Agencies are located in Boston, Chicago, New Orleans, New York City, San Francisco and Seattle. In large cities there are usually two or more courts and at each county-seat a state court authorized to accept these passport applications.

When you make this call be sure to take with you the four photographs called for in the instructions together with your invitation as a means of identification. You should take with you to the passport office at this time a friend who is an American citizen and who has known you for several years. The passport Agent or clerk of the court will mail your application to the Secretary of State in Washington, D. C., who will issue the passports and travel documents and will deliver them to The Quartermaster General to be held by him until your arrival in New York.

The instructions prepared by the Secretary of State are as follows:

"A mother or widow who owes allegiance to the United States must apply to the Department of State for a Special Pilgrimage Passport through a Passport Agent or through a clerk of a Federal court or State court having jurisdiction to naturalize aliens and on the form prescribed by that Department. When making application, she should be accompanied by a credible witness who is an American citizen and who has known her for a period of two years or more. With her application she should submit four photographs on a light background and on thin paper not more than 3x3 inches in size not less than 2½x2½ inches in size and such documentary

evidence of her American citizenship as she may have in her possession. In the absence of evidence of citizenship, her application should be witnessed by a credible person residing in the same community who is an American citizen, has known her for a long period of time and is able to swear to the best of his or her knowledge and belief that she is a citizen of the United States.

"A mother or widow who does not owe allegiance to the United States must apply to the Department of State for a Pilgrimage Travel Document through a clerk of a Federal court or a State court having jurisdiction to naturalize aliens or through a Passport Agent upon the form of application prescribed for that purpose, entitled APPLICATION FOR A PILGRIMAGE TRAVEL DOCUMENT, issued under the Act of March 2, 1929, submitting therewith four photographs on a light background and on thin paper not more than 3 x 3 inches in size and not less than 2½ x 2½ inches in size. When making application she should be accompanied by a credible witness who has known her for a period of two years or more.

"The Act of March 2, 1929, provides that no fee shall be charged for the execution of an application for a passport or travel document or for the issue of a passport or travel document to a mother or widow making a pilgrimage to the cemeteries of Europe in which deceased soldiers, sailors, and marines of the American forces are now interred.

"Special Pilgrimage Passports and Pilgrimage Travel Documents when issued by the Department of State will be forwarded to the War Department.

"Applicants resident in Boston, Chicago, New Orleans, New York City, San Francisco and Seattle should execute applications at the Passport Agencies in those cities."

For The Quartermaster General,

Very truly yours,

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

In reply refer to QM 293 A-C

Constantine, Charles F. 608-M

March 24, 1930

Mrs. Anna E. Constantine,
671 Carroll St.,
Brooklyn, New York
Dear Madam:

This letter, which contains general information regarding the pilgrimage to the cemeteries of Europe, is being sent to each mother and widow who has expressed a desire to make the pilgrimage during the calendar year 1930. The general plan for the conduct of the pilgrimage is shown in the Pilgrimage Regulations, a copy of which is enclosed herewith. In addition to the information shown in the regulations, the following explains in detail some of the most important things connected with the pilgrimage.

Formal invitations are being extended to each mother and widow who has expressed a desire to make the pilgrimage during 1930. In so far as practicable, these invitations are being extended with a view to keeping the women from each state together and the order in which the invitations to the women from the several states are issued is based on a drawing by lot which was held about one month ago. Inclosed with each invitation is a card for acknowledgment and it is quite important that you accept or decline this invitation promptly in order that the necessary railroad, steamship and hotel reservations may be arranged. The government will defray all the necessary expenses of the pilgrimage, including railroad fare, hotel accommodations, steamship fare and all other incidental expenses. It will not provide anything other than the necessary expenses so that you should bring with you such funds as you may desire to use for making small purchases and for other uses distinctly of a personal nature.

Arrangements have been made with the American Railroad Association which assures us the united support and cooperation of all of the railroads in the United States in handling the movement to and from New York City. The local ticket agent will secure your railroad and sleeper ticket and will make the necessary pullman reservations. Before your departure from your home we will mail you a check, sufficient to pay for your meals and other travelling expenses while enroute to New York. Your railroad ticket will provide for a round trip from your home to New York and upon arrival in New York the army officer in charge of the New York office will collect the return trip stub and hold it until your return to New York from Europe.

Upon arrival in New York, you will be met by an army officer

and escorted to a first class hotel where reservations have been made. The duration of your stay in New York will be from 24 to 48 hours. At the proper time, you will be escorted to the steamship upon which passage has been engaged for Europe. All of the women making this trip will be provided with cabin class accommodations aboard steamers which means that from two to four will be quartered in the same stateroom. If you have any friend that you would like to be quartered with we will endeavor to arrange it if you will communicate with this office.

The ocean voyage will last about 8 days and when the ship docks at Cherbourg, France, each party will be met by officers especially detailed for the purpose and taken in a special train to Paris where first class hotel accommodations have been reserved. The first day in Paris will be a day of rest. On the 2d day, the women of each party will place a wreath on the tomb of the French unknown soldier. In the afternoon there will be a reception in which the French war mothers, government officials, and prominent civilians will participate. The following morning the groups going to the different cemeteries will leave Paris, travelling in motor busses, and proceed to the cemeteries where they will remain for about 7 days. Twenty-five women will be assigned to each bus and an army officer will have charge of the bus. The itineraries to and from the cemeteries and the daily itineraries while at the cemeteries have been varied so as to take in points of historical interest as well as some parts of the battlefields where American troops were engaged. Upon return to Paris, each party will remain for about 5 days and during this time an opportunity will be given to see the points of historical interest in Paris and vicinity. The entire duration of your stay in Europe will be 14 days, and the itineraries have been so arranged that each day will be provided for. Except in case of illness or other unavoidable cause it will not be possible for any woman making the pilgrimage to remain in Europe for a longer period than 14 days nor to leave the party with which she is travelling unless she is prepared to pay all of her expenses after leaving the party since the Act of Congress authorizing the pilgrimage specifically states that the government shall not pay the expenses of any woman who willfully leaves her party.

Upon return to the United States each ship will be met in New York City by army officers who will escort the mothers and widows to the trains which will take them home. Before leaving New York each woman will be provided with her return railroad ticket, a sleeping car ticket and funds to cover the cost of meals and other travelling expenses.

Army officers are being used as guides and escorts throughout this entire movement and care has been taken to select officers who will see that proper care is taken of the women who are entrusted to their charge. Arrangements have been made for taking care of women who may be taken sick during the pilgrimage and also to care for the remains of any who may die and provision has been made for returning the remains of any who may die to their homes. It is essential that each woman making the pilgrimage furnish The Quartermaster General with an emergency address of some relative or friend to be notified in the event of an emergency. Medical care will be provided by civilian agencies. If such care is needed in New York City it will be furnished by the hotel physicians or

by local hospitals. Aboard ship, medical care will be provided by the ship's doctors and in Paris arrangements have been made with the American Hospital for the hospitalization and treatment of any women who may need it. In addition to this, six doctors of the regular army will be on duty throughout the pilgrimage.

Baggage will be limited to not to exceed two pieces of hand baggage and the articles taken should be such as will be required for a trip of about one month. Laundry service can be obtained in New York and Paris. Since the climate of Europe is much colder than that of the United States, each woman should provide herself with sufficient warm clothing to stand the motor bus trip and the visit to the cemeteries.

Since it is necessary for this office to make all reservations for your accommodations throughout this pilgrimage, it will be greatly appreciated if you will make prompt reply to any communications received from this office.

For The Quartermaster General:

Very truly yours,

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

1 Enclosure.
Regulation.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

October 7, 1929.

IN REPLY REFER TO QM 293 A-C
Constantine, Charles F. 608 H

Mrs. Anna E. Constantine,
671 Carroll Street,
Brooklyn, N. Y.

Dear Madam:

The Act of Congress which provides for pilgrimages to cemeteries in Europe by mothers and widows of members of the military or naval forces of the United States who died in the military or naval service at any time between April 5, 1917 and July 1, 1921, and whose remains are now interred in such cemeteries, all necessary expenses of which pilgrimages are to be paid by the United States Government, requires that the Secretary of War make an investigation and submit the results of such investigation in a report to Congress not later than December 15, 1929. The purpose of the investigation is to determine the total number of mothers and widows entitled to make the pilgrimages, the number of such mothers and widows who desire to make the pilgrimages, the number who desire to make the pilgrimages during the calendar year 1930 and the probable cost of the pilgrimages to be made.

In order that the report referred to may be made and plans completed for conducting the pilgrimages, it is requested that you answer the following questions by filling out the blanks left therefor and return the letter to this office by return mail in the enclosed envelope which requires no postage.

1. Do you desire to make this pilgrimage if eligible?	(Yes)	(No)
2. Do you desire to make the pilgrimage in the calendar year 1930?	(Yes)	(No)
3. Have you at any time made a previous visit to the grave of the deceased member of the military or naval forces in whom you are interested?	(Yes)	(No)
4. Please give your age and state of health.	Age (Years)	Health (Good) (Poor)
5. What language do you speak?	English - (Yes) (No)	Other language (Specify language spoken)

For The Quartermaster General,

Very truly yours,

Encl.
Act
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

Constantine, Charles F.

July 31, 1929.

Mrs. Anna E. Constantine,
671 Carroll St.,
Brooklyn, N. Y.

Dear Madam:

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

The records of this office show that you are the mother of the late Pvt. 1/c Charles F. Constantine, Co. C. 302nd F. S. Bn., whose remains are interred in the Oise-Aisne American Cemetery, Seringes-et-Nesles, Aisne, France.

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

Write answers in space below:

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

2. If so, give her complete address.

3. Will you 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

June 24 , 1929.

Constantino, Charles F.

Mrs. Anna E. Constantino,
99 St. Marks Place,
Brooklyn, N. Y.

Dear Madam:

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

The records of this office show that you are the mother of the late Pvt. 1/c Charles F. Constantino, Co. C. 302nd F. S. Bn., whose remains are 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 widow who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish her full name and address in order that action may be taken to extend an invitation to her to make the pilgrimage. Both mothers and widows are entitled to make the pilgrimage.

In the event your son was survived by a widow who has since remarried it is 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,

2 incl.
Act of Congress.
Envelope.

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

To be prepared in triplicate.

DATE February 11, 1928

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 CONSTANTINE, Charles F. 10. Name _____
 2. No. 1718681 11. No. _____
 3. Rank Pvt., 1/cl. 12. Rank _____
 4. Org. Co. C, 302nd F.S.Bn. 13. Org. _____
 5. D.D. August 16, 1918 14. (a) D.D. _____
 6. C.D. Cerebral Hemorrhage (b) D.B. _____

Discrepancy found upon disinterment

7. Grave No. 12 Sec. _____ 15. Grave No. _____ Sec. _____
 8. Plot Block A Row 14 16. Plot _____ Row _____
 9. _____ 17. _____

18. Cemetery Oise-Aisne 19. Commune or town Seringes-et-Nesles

20. Dept. or County Aisne 21. Country France

22. G.R.S. Hdqrs. Code No. 608

23. Disinterred (Date) February 11, 1928 By P.D. Woodman

24. Inscription on grave marker: _____

Name CONSTANTINE, Charles F. Serial No. 1718681

Rank Pvt., 1/cl. Organization Co. C, 302nd F.S.Bn.

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

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).

27. Condition of body _____

28. Nature of burial Pine box and burlap

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 February 11, 1928 By P.D. Woodman

31. Casket sealed by P.D. Woodman

Signature of Embalmer, (Supervisor _____

P.D. Woodman.

SHIPMENT. (Show actual marking of box.) Box No. _____

32. Designation of body : _____

Name CONSTANTINE, Charles E. Serial No. 1718681

Rank Pvt., 1/cl. Organization Co. C, 302nd F.S. Bn.

33. Consigned to : _____

Name of Permanent Cemetery Oise-Aisne, Seringes-et-Nesles, Aisne

34. Casket boxed and marked (Date) February 11, 1928 By Charles E. Spahn

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 Charles E. Spahn
Charles E. Spahn

36. Remarks _____

37. Shipped from point of Operation : (Date) _____

To point of Concentration _____

Convoyer _____ Signature Shipping officer _____ (Name)

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

By G.R.S. Representative _____

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

To Permanent Cemetery _____

Convoyer _____ Signature Shipping Officer _____ (Name)

40. Received : Date _____

G.R.S. Representative _____

41. Reinterred February 11, 1928, Oise-Aisne American Cty. (Date)

42. Grave No. 12 Section _____

43. Plot Block A Row 14

G.R.S. Representative William E. Moore

William E. Moore, Superintendent.

DISINTERMENT

REPORT OF DISINTERMENT PRESERVATION SHIPMENT AND REBURYING OF BODY
To be prepared in duplicate

DATE February 11, 1928
STATION Oise-Aisne, Seringes-et-Nesles, Aisne

REPORT OF DISINTERMENT AND REBURIAL

Place Oise-Aisne Cty. 608

Date February 11, 1928

1. REMAINS OF CONSTANTINE, Charles F. SERIAL NUMBER 1718681
RANK Pvt., 1/cl. ORGANIZATION Co. C, 302nd F.S.Bn.

2. Disinterred (date) February 11, 1928 From (give complete location) :
Grave 12, Block A, Row 14

By : Group Cty. Unit _____

3. Reburied (date) : February 11, 1928 In (give complete location) :
Grave 12, Block A, Row 14

By : Group _____ Cty. _____ Unit _____ Nature of Reburial Metallic casket

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

5. (a) Identification tags : Buried with body ? No. On grave marker ? _____

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

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

(a) Height (actual measurement) _____ **8 MAD.**

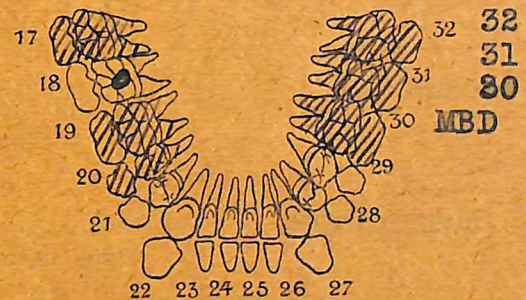
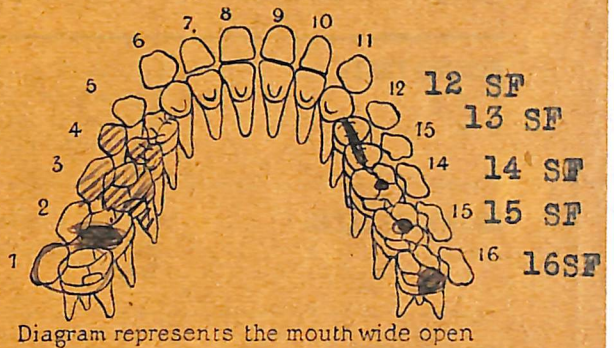
(b) Weight (estimated) _____

(c) Hair—Color _____ **4 MBD**
Quantity _____ **3 MBD**
Characteristics _____ **2 SF**
1 rotted off

(d) Hair on face—Color _____
Location _____
Quantity _____ **17 MBD**

(e) Permanent marks on body (old scars, peculiarities, or missing parts) _____ **18 SF**
_____ **19 MBD**
_____ **20 MBD**

(f) Wounds or missing parts (received at time of casualty) _____ **24 MAD**
Top of head sawed off. Right tibia and fibula missing.



7. Disinterment supervised by P. D. Woodman

Approved : _____

(Title) _____

8. Reburial supervised by Charles E. Spahr

Approved : _____

(Title) _____



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.

Constantine,

Charles F.

1,718,681

Pvt 1/cl
(Surname.)

(Christian name in full.)

(Army serial number)

Co C 302nd Fld Bn Sig Corps

(Rank and organization.)

State your relationship to the deceased.

Mother

Do you desire the remains brought to the United States?

No
(Yes or no.)

If remains are brought to the United States, do you wish them interred in a national cemetery?

(Yes or no.)

If you desire the remains interred at the home of the deceased, give full information below as to where they should be sent:

(Name of person to receive remains.)

(Express office.)

(Telegraph office.)

(Number and street.)

(City or town.)

(State.)

(Sign here)

(Mrs.) Annie Elizabeth Constantine

648 Baltic
(Number and street or rural route.)

St. Brooklyn, New York
(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

3-5713

drawn by M.H.

608-1160.

12-16-20

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO ~~QM~~ 293 A-C

CONSTANTINE, Charles F. - Pvt. 1cl.

October 31, 1925

Mrs. Anna E. Constantine,
99 St. Marks Place,
Brooklyn, N.Y.

Dear Madam:

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,

L. W. Redington
L. W. REDINGTON,
Major, Q.M.C.,
Assistant.

1-Incl.
Record card.

*File
11-24-25*

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

OFFICIAL BUSINESS

WASHINGTON, D. C.

Constantine Class 7

Handwritten scribbles and initials



PENALTY FOR PRIVATE USE

TO AVOID PAYMENT OF POSTAGE, \$300



Mrs. Anna E. Constantine,

99 St. Marks Place,

Brooklyn,

N.Y.

Returned to Writer

BRONX, N.Y.
NOV 3
5:30 PM
1955

TIMES PLAZA S

Soldier's  Overseas
Grave

Name Charles F. Constantine

Rank Private, First class

Organization Company C, 302nd Field Signal Battalion

Grave No. 12 Row 14 Block A

Cemetery Oise-Aisne American

Location Seringes-et-Nesles, Aisne, France

QM 293 A-C

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L.W. REDINGTON,
Major, Q.M.C.,
Assistant.

1-Incl.
Record card.



RD
YDL

COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

File # 16560

(a) Name *C. 12/17/18* **CONSTANTINE, Charles F.** Ser. No. **1718681**
 (b) Rank **Private. 1/c** Organization **Co.C, 302nd F.S.Bn.** TYP **EK**
 (c) Date of death **8/16/18** Cause of death **death**

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

(a) Grave No. Row Plot Sect. TYP
 (b) Emerg. Address

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

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

*AYO Card - Mrs. Annie Elizabeth Constantine (mother)
 648 Baltic St. Brooklyn N.Y. desires body
 to remain in Europe. 1/17/21 - LPW*

V. Following advice forwarded to Europe by (cable on 192
 (Letter of transmittal on 1/15/1921

*Part II, Not to be returned LPW
 Constantine, Charles F.*

JAN 28 1921

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

VII. SUPPLEMENTARY REQUESTS

Date of Relationship
 and Source and name Desires action taken

VIII. Form 115 received from G.R.S. Hoboken, N.J. *4-15-* 1921

COUNTRY

CEMETERY NO.

SHEET NO.

U.S. FORM 115-A
 August, 1920

6-666/LB

France

608

1160

Sp 1/24/21

COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD: File # 16560

(a) Name *C. CONSTANTINE, Charles F.* Ser. No. 1718681

(b) Rank *Private. 1/c* Organization *Co. C, 302nd F.S. Bn.*

(c) Date of death *8/16/18* (d) Cause of death *--*

TYP. *EK*
CKR. *JD*

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

(a) Grave No. _____ Row _____ Plot _____ Sec. _____ TYP. _____

(b) Emerg. Address _____

III. Files of soldiers dying from contagious diseases _____ CKR. _____

IV. A. G. O. DISPOSITION CARD: Date of receipt *None*

(a) Name *Mrs. Annie Elizabeth Constantine* (b) Relationship *Mother*

(c) Address *648 Baltic St. Brooklyn, New York*

(d) Remains to be brought to U. S.? *No*

(e) To be interred in National Cemetery in U. S. at _____

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

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

Examiner's Initials *MH* Date *12-16*, 1920.

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

_____, dated _____

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

No correspondence

Examiner's Initials *MH* Date *12-16*, 1920.

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

No request for disposition

(a) Cancellation memos referred to? _____

Examiner's Initials *E. M.* Date *12-17*, 1920.

COUNTRY *France* CEMETERY No. *608* SHEET No. *1160*

FORM 115, A COMPLETED
ep 12/21

CARDÉD

Reviewed 4/29/21 EJP

RECEIVED

APR 15 1921

Consular Division
Overseas Project Sub-Section

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 1/15/21, 1920

*Par. II, not to be returned LPW
Constantine, Charles F.*

IX.

CORRECTIONS

CHANGE OF ADVICE.

ACTION TAKEN.

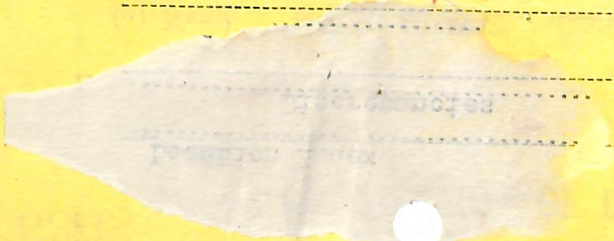
Desires body be _____

Body to be shipped to _____

**FORM 115 RETURNED BY HOBOKEN - BODY
TO REMAIN IN EUROPE. 5/5/21 EP**

X. SUSPENSION REMARKS: 2/10/21 F.120 - Mother Mrs. Annie E. Constantine, 99 St. Marks Place, Brooklyn, NY, requests body remain in France. H-2/25/21 aep.

*3/4/21 Hoboken advises Mother
her request for body to
remain in Europe will be
complied with. 4/29/21 EP*



MARCH 4, 1921.

FILE NO. 293.8 Gen.Div., Cor. Branch.
(CONSTANTINE, Charles F.)

Mrs. Annie E. Constantine,
99 St. Marks Place,
Brooklyn, New York.

Dear Madam:

Receipt of executed Shipping Inquiry Form dated
February 10, 1921, is acknowledged.

In accordance with your wishes instructions have
been issued to leave the remains of your late son, Charles
F. Constantine, Serial Number 1718681, Company C, 502nd
Field Signal Battalion, in France for burial in a permanent
American Cemetery.

You are assured that the grave site will always
be maintained as a fitting memorial of the late soldier's
sacrifice.

The Department wishes 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.

Mailed-O. R. D.

MAR 7 1921

FP:LLK

Noted on Form No. 118
Date 4/29/21 *EP*

RECEIVED
APR 12 1921
G. H. S.

Date 4/15/21
MAY 2 1921

RECEIVED



APR 15 1921
G. H. S.

RECEIVED

APR 15 1921

Division of Investigation
Federal Bureau of Investigation
U. S. Department of Justice

MAY 2 1921
MAY 2 1921

RECEIVED
APR 15 1921
Division of Investigation
Federal Bureau of Investigation
U. S. Department of Justice

MAY 2 1921

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

608-1160 el

CEMETERIAL DIVISION

WASHINGTON
 HOBOKEN, NJ.

FEB 4 1921

FROM: Chief, Cemeterial Division, O. Q. M. G.

To: Mrs. Annie Elizabeth Constantine, ^{99 St Marks Pl} ~~648 Baltic St.~~, Brooklyn, N.Y.

SUBJECT: Remains of Pvt. 1/c Charles F. Constantine, Ser. No. 1718681 Co. G. 302nd F.S. Bn.

The records of this office show that you have requested that the body of the above-named soldier remain in France.

no change *Hu*

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

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

By authority of the Quartermaster General.

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

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 or not these relatives are STILL LIVING.

Was soldier married? *no*

NAME OF—	NO. AND STREET.	TOWN.	STATE.
Soldier's widow			
Soldier's children. (Name oldest first.)			
Father	<i>Deceased.</i>		
Mother	<i>Annie E. Constantine</i>	<i>99 St Marks Place</i>	<i>Brooklyn N.Y.</i>
Brothers. (Name oldest first.)			
Sisters. (Name oldest first.)			

Date *February 10th 1921*

Signature *Annie Elizabeth Constantine*

Address *99 St. Marks Place*

Relationship *Mother*

INSTRUCTIONS FOR FILLING OUT THIS LABEL

Address *dd pt Jumbo*

Relationship *Feb. 10th, 1921*

Date _____
I, the undersigned, am the *Mother* and nearest living next of kin of the within-named
(Relationship.)

soldier, and desire the following disposition of his remains, viz:
(Strike out all except the one showing the disposition desired.)

RECEIVED
APR 15 1921

1. As stated on first page of this sheet. *yes.*

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

Cemeterial Division
Order Project Sub-Section

(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 *Annie Elizabeth Constantine*

INSTRUCTIONS FOR FILLING OUT.

1. If definite instructions for the disposition of a body are not received from the next of kin within two 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 next of kin 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 next of kin, please ask the nearest next of kin, if living near you, to fill out this paper.
7. If **YOU** are not the nearest living next of kin 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 inclosed envelope—pay no postage.

GRAVES REGISTRATION SERVICE
CORRESPONDENCE BRANCH

NOTE.—INSTRUCTIONS FOR THE DISPOSITION OF REMAINS will be issued by this office upon the properly executed authority of the legal next of kin in each case. The widow is the first person having disposition of the remains of her husband. Should there be no widow or children, the father and, in turn (upon his decease), the mother, is the proper authority. The brothers, in order of seniority, and then the sisters in order of seniority, if there are no brothers, rank next in authority to decide. Under an opinion rendered by the Judge Advocate General of the Army, if a widow has remarried she forfeits her right, and the next of kin as given above will make decision.

NAVY DEPARTMENT

U. S. GOVERNMENT PRINTING OFFICE
1918

EB 11 1921

12/19/20.

Mr. Wilson:

Constantine, Charles F.

1718681 - Private 1cl.
Co. C. 302nd Inf. F.S. Bn.

Adjustment Made

DEC 21 1920:

File No. 16560

Make adjustment

B

8

T

Name Constantine Charles 1778648

Rank Pvt 1st Cl. Co. C { Corps } 13th Bn. S.C.
Regt.

Date of Death

16560

Place Evacuation # 4, Mobile # 2 Hospitals

Cause mmme Brecy (airing)

C-63 33 S.E. { E. 185.45
N. 270.7 }

Date of Burial Aug 16 1918

Grave No.

Cemetery Trench Map Soissons 33 S.E.

N. 270.7 E. 185.45

Identified by { Tag } Tag on peg
Papers
Clothing

List of Effects

CMME.

COORD

Field Record Made by

Company 302 Graves Registration Service

Advance Group # 3

For additional data use reverse side

29 AOU Rqu

16570

GRAVE LOCATION BLANK
FIELD REPORT.

LOCATION OF THE GRAVE OF

Constantine, 1718681. Charles.

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

Pvt 1st Cl. Co. C 30th Bn. SC.

(Rank.) (Organization.)

Aug. 16/18

DATE OF BURIAL

PLACE OF BURIAL

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

Map. Soissons. S.E. No. 33

Key. ^{E 71} 185.5 & 270.7

Com. C. ~~3~~ Brey (Aisne)

GRAVE NUMBER

35

HOW MARKED: Name Peg? 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?

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

533

13 OCT 1918

REPORTED BY: *William A. Grebing*
Capt. F.A.N.G.

(Signature and Rank of Reporting Officer.)

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

16560

File No:

~~Constantine, 1718648 Charles.~~
~~Pvt. 1/c Co. C. 30th, FD. Bn. Sig. Cor.~~
Date of Death: _____

File No:

Date Buried: _____

Cemetery: Amer. B/A. Cty. _____

Grave No: _____ Sect: _____

Commune (No: 63) Brecy. _____

Dep't: _____ Aisne Map: 33SE

Coordinates: E185.3, N270.62

Remarks: _____

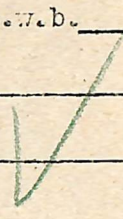
553

Sketch No: 2

WF _____ CROSS _____ HD BD _____ BTFL _____

Ident. Tag on Gr. Mr. _____ b.w.b. _____

Authority: _____



23 SEP 1919

B 157