

LIST OF PAPERS

File under No. 293 - Cooper, Clyde H. (#2354253)

293 Files h

Pvt. 1st Cl., Med. Det., 327th Lab. Bn.

3-8788

SERIAL NUMBER	FROM—	DATE	TO—	SYNOPSIS
	<p>ARCHIVES AND CLAIMS DIVISION WASHINGTON Q. M. DEPOT CAMERON, VIRGINIA <i>Returned 12/6/43</i></p>	<p>11-29-43</p>	<p>Mrs. Conley, (Thru M&R) 1716 Tempo "B" 2nd & T Sts., S. W.</p>	<p><i>Returned to Cameron, Va 12/3/43 Conley</i></p>

OUTGOING TELEGRAMS AND RADIOS.....OCT. 15th to 20th, 1928, Incl.

PERSONNEL SERVICE

mg

DATE

1. NAME COOPER, Clyde H. SERIAL No. 234253

5

RANK Pvt. 1/c ORGANIZATION Med. Det. Co. M. 327th Lab. Bn.
& DIVISION 1st Div.

GRAVE LOCATION Amer. Cty. Dijon, Cote d'Or #14
CTY. NAME NUMBER

24

Enl.

GRAVE

ROW

PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 24 (Enl.p.) DIJON (Côte d'Or)

GRAVE

COMMUNE

DEPT.

COORDINATES E.298.5 N.59.5 (Lambert Zone Nord)

CONCENTRATED TO Not of record

DATE

GRAVE

ROW

PLOT

CEMETERY

CTY. NUMBER

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

DATE OF DEATH Nov 17, 1918

STATE FROM WHICH HE CAME Missouri

MEDALS OR DECORATIONS AWARDED none

SUBSEQUENT REBURIALS Not of record

DATE

GRAVE

ROW

PLOT

CEMETERY

DATE

GRAVE

ROW

PLOT

CEMETERY

SIGNATURE, AREA SUPERVISOR W.H. Quarterman

W.H. QUARTERMAN, CAPT. F.A., Supervisor AREA N°4

3. FINAL GRAVE LOCATION June 23rd, 1922 35 10 Block A-

DATE

GRAVE

ROW

PLOT

St-Mihiel Amer. #1233, Thiaucourt (M-et-M).

CEMETERY

Robert O. Davis,
Major General,
The Adjutant General.
By MAY 27 1925

1st World War Div
MAY 25 1925

AUDITED BY
MAY 28 1925
Received A.G.O. MAY 25 1925

INSTRUCTIONS FOR PREPARATION OF FORM 114 B

1. Forms 114-B are to be prepared by Registration Branch in quadruplicate, three copies to be forwarded to Area Supervisor who will accomplish paragraph 2 and return all three copies to Headquarters, American Graves Registration Service.

2. Paragraphs 1 and 3 will be accomplished by Registration Branch, Headquarters, American Graves Registration Service, Q.M.C., in Europe.

3. Paragraph 2 will be accomplished by Area Supervisor from data on file in his office.

4. If data is entered on Form 114-B from Form 1, Form 16, Form 1-A or Form 16-A, statement to this effect will be made on Form 114-B STATING WHICH G.R.S. form data is taken from. If data concerning co-ordinates is approximate and NOT accurate, statement to this effect will be made on these forms.

*diied acute Bronc Pneum 11/17/18 (last 20507)
cc 338
12/12/18*

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Cooper 234253 Clyde H.
(Surname). (Number). (First Name and Initials).
Private, Co. M, 327th Labor Bn.
(Rank). (Organization).

PLACE OF DEATH: Base Hospital No. 17.

CAUSE OF DEATH: Acute broncho pneumonia

DATE OF BURIAL: November 19th 1918

PLACE OF BURIAL: Municipal Cemetary

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

Annexe, Polygone AA., Dijon, Cote
d'Or, France.

GRAVE NUMBER: 24.

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

IDENTIFICATION TAGS:

Was one buried with body? *yes*

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

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

NEAREST RELATIVE: Lemeul Cooper

ADDRESS: Knoboster, Mo.

RELATIONSHIP: Father

REPORTED BY:

Angus McLean

(Signature and Rank of Reporting Officer).

Angus McLean, Lieut.-Col., M.C.

RECEIVED
22 NOV 1918
CENTRAL PRINTING OFFICE

AMERICAN EXPEDITIONARY FORCES
BASE HOSPITAL NO. 17
APO NO. 721.

November 19, 1918

From: Commanding Officer.

To: Adjutant General, American E. F.

Subject: Report of Burial:

1. Name: Clyde H. Cooper

2. Rank: Private.

3. Company: "I"

4. Regiment or Corps: 527th Labor Battalion.

5. Date of Death: November 17, 1918 - 2:30 PM

6. Cause of Death: Acute Broncho Pneumonia. In line of duty,
not result of own misconduct.

7. Place of Death: Base Hospital No. 17, America E. F.

8. Date of Burial: November 19, 1918 - 10:30 AM

9. Name of Cemetery: Municipal Cemetery Annexe, Polygone AA

10. In what Town and Department: Dijon, Cote d'Or, France.

11. Number of Grave: 24.

12. Was original tag buried with body? Yes. Placed between
undershirt and O. D. Shirt.

14. Disposition of duplicate tag? Duplicate tag fastened to
side of burial peg, as per Art. (5), Par 4, G.O. #30,
G.H.Q., A.E.F., February 15, 1918.

15. Nearest Relative of Deceased: Lemeul Cooper.

16. Relationship and Address: Father, Knoboster, Mo.

Angus McLean
Angus McLean,
Colonel, M.C.

Cooper, Clyde H.

CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME <i>Cooper</i>	<i>Coop</i>	3	<i>3 58⁰</i>
BURIED <i>Clyde H.</i>	CEMETERY <i>1233</i>	1	<i>3</i>
	GRAVE <i>35-</i>	2	<i>35-</i>
	ROW <i>10</i>	2	<i>10</i>
	BLOCK <i>A</i>	1	<i>1</i>
STATE	<i>Mo</i>	2	<i>29</i>
RANK	<i>Port 1/c</i>	1	<i>3</i>
DIVISION	<i>QMC</i>	2	<i>57</i>
ORGANIZATION	<i>327</i>	3	<i>327</i>
ARM	<i>Int. Div</i>	1	<i>1</i>
MARITAL <i>Father</i>	<i>No</i>	1	<i>2</i>
NAME <i>Cooper</i>	<i>Coop</i>	3	<i>3 58</i>
RESIDENCE <i>Samuel</i> <i>Jensbroster, Mo.</i>	STATE <i>Mo</i>	2	<i>29</i>
	COUNTY <i>Jackson</i>	2	<i>57</i>
	CITY <i>Jensbroster</i>	3	<i>XXX</i>
RELATION	<i>Mother</i>	1	<i>1</i>
OTHER		1	
ELIGIBILITY	<i>Head</i>	1	<i>6</i>
NATIVITY		1	
RACE	<i>BLACK</i>	1	<i>2</i>
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF TRIP	MO.	1	
	YR.	1	
ACCEPTANCE <i>29/514</i>		1	

AUDITED

APR 6 1932

AK

RM

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Cooper, Clyde H. 1233-F

July 8, 1930.

Mr. Lemuel Cooper,
Knobnoster, Mo.

Dear Sir:

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

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

1. Is the deceased survived by a mother?

If so, give her name and address:

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

If so, give her name and address:

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

If so, give her name and address:

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

August 29, 1929.

Cooper, Clyde H.
1233

Mr. Lemuel Cooper,
Knobnoster,
Missouri.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated May 28, 1929 making inquiry concerning the name and address of the mother and widow of the deceased service man above named. These addresses are desired with a view to ascertaining the number of mothers and widows who desire to make a pilgrimage to the cemeteries of Europe in which the remains of their sons and husbands are interred.

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

Write answers in space below

1. Is the deceased survived by a widow who has not since remarried? If so, give her complete address:

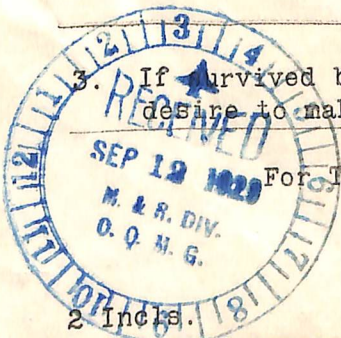
2. If he is survived by a mother, stepmother, mother thru adoption, or any other woman who stood in loco parentis to him, according to the terms of Section 4 of the enclosed Act, give her name, address, and relationship in the space opposite.

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

For The Quartermaster General,

Very truly yours,

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



2 Incls.
Act of Congress
Envelope

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

May , 1929.

Cooper, Clyde H

28

Mr. Lemuel Cooper,
Knobnoster,
Missouri.

Dear Sir:

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

The records of this office show that you are the father of the late Private, first class, Clyde H. Cooper, Med. Dt., 327th Labor Bn., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, France.

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

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

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

For The Quartermaster General,

Very truly yours,

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

2 incls.
Act of Congress.
Envelope.

H

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
Cooper, Clyde H. 1233-F

July 8, 1930.

Mr. Lemuel Cooper,
Knobnoster, Mo.

Dear Sir:

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

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

1. Is the deceased survived by a mother?

If so, give her name and address:

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

If so, give her name and address:

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

If so, give her name and address:

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

August 29, 1929.

Cooper, Clyde H.
1233

Mr. Lemuel Cooper,
Knobnoster,
Missouri.

Dear Sir:

The records of this office do not indicate that a reply has been received to our communication dated May 28, 1929 making inquiry concerning the name and address of the mother and widow of the deceased service man above named. These addresses are desired with a view to ascertaining the number of mothers and widows who desire to make a pilgrimage to the cemeteries of Europe in which the remains of their sons and husbands are interred.

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

Write answers in space below

1. Is the deceased survived by a widow who has not since remarried? If so, give her complete address:

2. If he is survived by a mother, stepmother, mother thru adoption, or any other woman who stood in loco parentis to him, according to the terms of Section 4 of the enclosed Act, give her name, address, and relationship in the space opposite.

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

For The Quartermaster General,

Very truly yours,

2 Incls.
Act of Congress
Envelope

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

May 28, 1929.

Cooper, Clyde H

Mr. Lemuel Cooper,
Knobnoster,
Missouri.

Dear Sir:

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

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

For The Quartermaster General,

Very truly yours,

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

2 incls.
Act of Congress.
Envelope.

IN REPLY REFER TO QM 293 A-C

WAR DEPARTMENT

COOPER, Clyde H., Pvt. 1/cl. OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

February 16, 1924

Mr. Lemuel Cooper,
Knobnoster,
Missouri.

Dear Sir:

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

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

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

Very truly yours,



R. L. FOSTER
Assistant.

1-Incl.
Record card.

FILE

copy green

WAR DEPARTMENT.

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

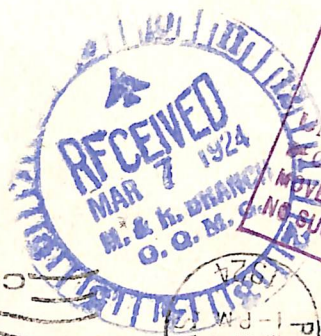
WASHINGTON, D. C.

OFFICIAL BUSINESS

PENALTY FOR PRIVATE USE, \$300.



FOR PRIVATE USE TO AVOID
PAYMENT OF POSTAGE \$300



Mr. Lemuel Cooper,
Knobnoster,

Missouri.



UNCLAIMED
RECEIVED
NO SUCH POST OFFICE IN STATE NAMED
FOR BETTER ADDRESS
UNKNOWN
REFUSED

Pitts Burg Kansas,
DIRECTOR SEARCHER

Soldier's  Overseas
Grave

Name Clyde H. Cooper

Rank Private, First class

Organization Medical Detachment, 327th Labor Battalion

Grave No. 35 Row 10 Block A

Cemetery St. Mihiel American

Location Thiaucourt, Meurthe-et-Moselle, France

Cooper, Clyde H

2,354,253

(Surname.)

(Christian name in full.)

(Army serial number.)

Pvt. ¹⁰²¹ Med Det 327 LBN OMC

(Rank and organization.)

State your relationship to the deceased:

Grandmother

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

(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)

Mr. David Carter

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Mobile, Ala

no

Read carefully the letter accompanying this card.

Drawn by P.M.

14-69
12-17

REVIEWED
OSP SS.

Handwritten signature

Letter sent to:
Mrs. Laura Carter,
Knobnoster, Mo.

COOPER, Clyde H., Pvt. 1/cl.

February 16, 1924

Mr. Lemuel Cooper,
Knobnoster,
Missouri.

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

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

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

Very truly yours,

1-Incl.
Record card.

Assistant.

R. J. FOSTER

MFK
72K

O. Q. M. G.
CENTRAL MAIL ROOM.



FEB. 16 1924
B. O. C.

12/28/20

Examined
3/2/22
For Correlation
St. Michael #1233-1
att 4/5/22

1. LOCATION INDEX CARD:

(a) Name Cooper, Clyde H. Ser. No. 234253)
(b) Rank Pvt. 1st Organization Med Det Co. M-327th Labor Bn.) TYP. ILH
(c) Date of death 11-17-18 of death Broncho Pneumonia) CKR. [Signature]

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

(a) Grave No. 24 Row - - Plot Enlisted Sect. - -) TYP. HDP
(b) Emerg. Address Lemuel Cooper, (Father) Knobnoster, Mo.

111. Files of soldiers dying from contagious diseases; No Card) CKR. [Signature]

IV. A.G.O. DISPOSITION CARD:

Date of receipt None

(a) Name Mrs. Laura Carter (b) Relationship Grandmother
(c) Address Knobnoster, Mo
(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 aa Date 5-12-1920

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

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

No Correspondence

Examiner's Initials mm Date 5-12-1920

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

No request for disposition

(a) Cancellation memos referred to? yes - mm

Examiner's Initials mm Date 5/12/1920

COUNTRY France CEMETERY NO. 14 SHEET NO. 69

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

Make Form #114

CARDED

FORM 115 A COMPLETED

11-11-37

Rechecked
12/18
mm mm

CEMETERY DIVISION



JAN 6 1921

VII. G. S. 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 Dec. 4, 1920

Par. 2 - not to be returned yet

RECEIVED
CEMETERY DIVISION
OVERSEAS
APR 29 1921

IX.

CORRECTIONS

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

XI. SUSPENSION REMARKS: 4/5/21 WR. En. Add. Mrs. Laura Carter (G. Mother)

Knobnoster, Missouri.

H-4-14-21 BF

Place Dijon, Cote d'Or, France

REPORT OF DISINTERMENT AND REBURIAL

Date Nov 28, 1921

1. REMAINS OF COOPER, Glyde H.

SERIAL NUMBER 234253⁵

RANK Pvt. 1/c

ORGANIZATION Med. Det. Co. M. 327th Labor Bn.

2. Disinterred (date): Nov 28 1921

From (give complete location): Grave No. 24

Ames Cem. No. 14 Dijon, Cote d'Or, France

By: Group 3

Unit 4

3. Reburied (date):

In (give complete location):

June 23rd, 1922.

Gr 35. Row 10. Block A.

By: Group Reburial

Unit

Casket and shipping Case.
Nature of reburial

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

In uniform and wooden box. Body badly decomposed recognition impossible.

5. (a) Identification tags: Buried with body? yes, partly corroded

On grave marker? yes

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

No effects found, Post Mortem on head

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

(a) Height (actual measurement) U to D

(b) Weight (estimated) U to D

(c) Hair—Color Black

Quantity Medium

Characteristics Kinky

(d) Hair on face—Color None

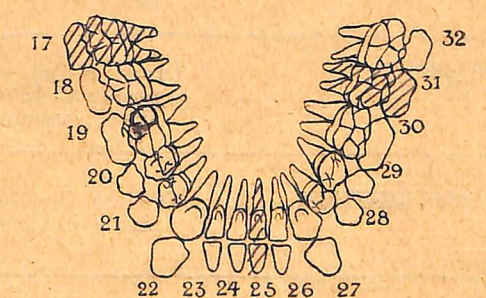
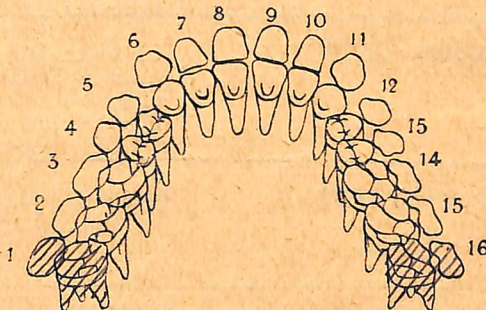
Location

Quantity

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

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

None



7. Disinterment

supervised by A R Cheney

A R Cheney

Approved: R L Fain

R L Fain

(Title) Capt QMC

jsk

8. Reburial

Supervised by H. L. Kramer

H. L. Kramer






Approved: A. J. Dewey, 1st Lt. QMC.

(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.

To be prepared in triplicate.

DATE Nov 28 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

mg 1. Name COOPER, Clyde H.
 2. No. 234253
 3. Rank Pvt. ⁵ 1/c
Med. Det.
 4. Org. Co. M. 327th Lab. Bn.
 5. D.D. 11-17-18
 6. C.D. Lobar Pneum.

10. Name _____
 11. No. 2354253
 12. Rank _____
 13. Org. _____
 14. (a) D.D. _____
 (b) D.B. _____

Discrepancy found upon disinterment

7. Grave No. 24 Sec. _____
 8. Plot Enl. Row _____
 9. _____

15. Grave No. _____ Sec. _____
 16. Plot _____ Row _____
 17. none

18. Cemetery Amer.

19. Commune or town Dijon

20. Dept. or County Cote d'Or

21. Country France

22. G.R.S. Hdqrs. Code No. 14

23. Disinterred (Date) Nov 28 1921

By A R Cheney

24. Inscription on grave marker:

Name COOPER, Clyde H.
 Rank ~~xxxxxxx~~ Pvt.

Serial No. 234253
 Organization Co. M. 327th Labor Bn.
Gr. No. 24

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

Glenn C. Dorsey
 Signature Junior Technical Assistant

PREPARATION

Glenn C. Dorsey

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).

No effects found, form 16a accomplished. Post mortem on head.

27. Condition of body ~~xxxxxxx~~ Badly decomposed. recognition impossible.

28. Nature of burial In uniform and wooden box.

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

30. Body prepared and placed in casket: Date Nov 28 1921 By A R Cheney

AJ31. Casket sealed by A R Cheney

Signature of Embalmer, (Supervisor) A R Cheney

SHIPMENT. (Show actual marking of box.) Box No. C-17622

32. Designation of body:

Name Clyde H. COOPER Serial No. 234253

Rank Pvt. Organization Co.M. 327th Lab.Bn.

33. Consigned to:

Name of Permanent Cemetery St. Mihiel Amer. #1233, Thiaucourt, M-et-M

34. Casket boxed and marked (Date) Nov. 28 1921 By A R Cheney

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 [Signature]

36. Remarks Disc on cross reads, Clyde H. Cooper. R. L. Fain, Capt. OMC. Pvt. F.C.M.D. Dept. USA. 327 Lbr. Bn.

37. Shipped from point of Operation: (Date) Nov 28 1921

To point of Concentration Dijon, Cote d'Or. France

Convoyer [Signature] Signature Shipping Officer Capt OMC

38. Received at Railhead or Point of Concentration: Date

By G.R.S. Representative

39. Shipped from Railhead or Point of Concentration: Date Nov 30 1921

To Permanent Cemetery St. Mihiel (1233) Thiaucourt M et M

Convoyer E L Rieley Signature Shipping Officer [Signature] Capt. OMC.

40. Received: Date 5-DEC-1921

G.R.S. Representative [Signature] Capt. OMC

41. Reinterred, June 23rd, 1922. (Date)

42. Grave No. 35 Section

43. ~~Plot~~ Block A. Row 10

G.R.S. Representative [Signature] A. E. Dewey 1st Lt. OMC.

Changed Rheid 2/14

90
4/10/21
a.k.
RUSH

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

WASHINGTON, D.C.

NAME OF DECEASED SOLDIER	CEMETERY NO.	DATE
Cooper, Clyde H.	14-69	2/24/21
SERI. NUMBER	ORGANIZATION	Date of Death.
2354253	Med. Det., 327th Labor Bn.	11-19-18

@131876-

Copy forwarded to
Adjustment Department
Date 4-5-21 gpc

WAR RISK INSURANCE INFORMATION

STATE _____

NAME OF BENEFICIARY Mrs Lorna Carter RELATIONSHIP (G. Mother)

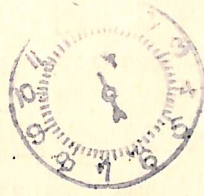
Address Krohnoster, Mo Emil Address

Cor. Sec.



RECEIVED

ION



RECEIVED.

FEB 26 1921

APR 9 1921

GENERAL DIVISION
OVERSEAS PROJECT SUB-SEC.

[Faint, mostly illegible text on a lined form, including fields for name, address, and other details.]

11-13-10
DEPT. OF COMMERCE

POSTAL



January 19, 1921

File No. 293.8 Cem. Div. Cor. Br.
(COOPER, CLYDE H.)

Mrs. Laura Carter,
Knolnoster, Mo.

Dear Madam:-

In order to complete the records of this office and before final disposition of the remains of the late Clyde H. Cooper, 1st. class Private, Med. Det. 327th. Labor Bn., Serial Number 2354253, can be determined, it is necessary that you state definitely whether or not he is survived by a widow, children, father, mother, brothers or sisters, and if so, furnish the name and address of each.

If the late soldier is not so survived, it is requested that you inform this office whether or not you desire the body left in France in a permanent American Cemetery, returned to the United States and shipped to you, or interred in the National Cemetery, at Arlington, Virginia.

Your early reply will be greatly appreciated.

By authority of the Quartermaster General:

RECEIVED

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

APR 29 1921

By: CEMETERY DIVISION

J.F. BUTLER,
1st. Lieut. Infantry.

BR/dw

MAIL ROOM
JAN 21 1921

14-69
8-2-3-21

January 19, 1921

File No. 2038 Com. Div. Cor. Br.
(GOOPER, CLYDE H.)

Mrs. Laura Carter,
Knohnester, Mo.

Dear Madam:-

In order to complete the records of this office and before final disposition of the remains of the late Clyde H. Cooper, late class Private, Med. Det. 327th Labor Bn., Serial Number 2354253, can be determined, it is necessary that you state definitely whether or not he is survived by a widow, children, father, mother, brothers or sisters, and if so, furnish the name and address of each.

If the late soldier is not so survived, it is requested that you inform this office whether or not you desire the body left in France in a permanent American Cemetery, returned to the United States and shipped to you, or interred in the National Cemetery, at Arlington, Virginia.

Your early reply will be greatly appreciated.

By authority of the Quartermaster General:

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

RECEIVED.

APR 29 1921

BY: CEMETERY DIVISION
OVERSEAS SUB-JEC.

L. V. BUTLER,
1st Lieut. Infantry

RECEIVED
JAN 1 1921

BR/DA

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

MAY 25 1920

14-69

S.M.C.

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

TO: Mrs. Laura Carter, Knobnoster, Mo.

SUBJECT: Remains of Pvt. Clyde H. Cooper

The records of this office show that you have requested that his
body be **not returned to U. S.**

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

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

By authority of the Quartermaster General:

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

NAME OF	NO. & STREET	TOWN	STATE
Soldier's Widow			
Soldier's Children	1.		
(Name oldest first)	2.		
	3.		
Father			
Mother			
Brothers	1.		
(Name oldest first)	2.		
Sisters			

Date _____

Signature _____

Address _____ Relationship _____

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

(OVER)

INSTRUCTIONS FOR FILLING OUT

1. This paper MUST be signed by the person who is the NEXT of kin in the order shown in the square on other side of this sheet.
2. This paper must be returned showing the name and address of each of the nearest living relatives in the spaces provided therefor on the other side of this sheet.
3. If there are minor children of the deceased soldier and no widow, the legally appointed guardian of the children should ascertain their wishes and act for them in this matter.
4. If YOU are not the nearest relative, please ask the nearest relative, if living near you, to fill out this paper.
5. If YOU are not the nearest living relative and do not know who or where the nearest relatives are, please fill out this paper AT ONCE and mail to this office.
6. You are requested to return this paper AT ONCE in order to avoid delay in the case of this body.
7. Use the enclosed envelope - pay no postage.

GRAVE LOCATION BLANK

63404

LOCATION OF THE GRAVE OF

Cooper 234253 Clyde H.
(Surname). (Number). (First Name and Initials).

Private, Co. M, 327th Labor Bn.
(Rank). (Organization).

PLACE OF DEATH: Base Hospital No. 17.

CAUSE OF DEATH: Acute broncho pneumonia

DATE OF BURIAL: November 19th 1918.

PLACE OF BURIAL: Municipal Cemetary.

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

Annexe, Polygone AA., Dijon, Cote
d'Or, France.

GRAVE NUMBER: 24.

HOW MARKED: Name Peg? Cross? yes.

Headboard? Bottle? yes.

IDENTIFICATION TAGS:

Was one buried with body? yes.

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

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

NEAREST RELATIVE: Lemeul Cooper

ADDRESS: Knoboster, Mo.

RELATIONSHIP: Father

REPORTED BY:

Angus McLean
(Signature and Rank of Reporting Officer).

Angus McLean, Lieut.-Col., M.C.

REVIEWED
23 SEP 1918

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

Return this form to Washington.

- 1. Form 115 corrected by *6-2-21-2-H-OK*
- 2. Form 115 A. corrected by *Dec 3-3-21* *W. H. ...* WAR DEPARTMENT
- 3. Reg. Rec. corrected by *...* Office of the Quartermaster General of the Army
Washington.

2-14
Khil

G.R.S. Form 8-W-A-0
Information requested of A.G.O. .Date 1/10/21.

File No. **63408** Registration.

FILE

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

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

Subject: Information required for G.R.S.

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

Information from C. S.

- a. Surname **Cooper,**
- b. Christian name **Clyde H.**
- c. Serial Number **234253.2354253**
incl. Det.
- d. Organization **Co. M, 327th Labor Bn.**
- e. Rank **Pvt. 1/cl.**
- f. Date of death *11/19/18.*
11/17/18.
- g. Cause of death
- h. Authority (C.C.#)
- i. Emergency address
- j. Relationship

BODY DESCRIPTION
(See page #2 of the Service Record)

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

- a. Age of enlistment
 - b. Color of eyes
 - c. Color of hair
 - d. Height
 - e. Weight
 - f. Permanent marks and physical defects at enlistment (Old fractures or breaks)
 - a. Strike out teeth missing
- | |
|---|
| 8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8 |
| upper right upper left |
| 8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8 |
| lower right lower left |

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


CEMETERY NO: 14.

TY:

SHEET NO: *69*
TYPED BY: **rln.**

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

G.F.

FROM:  M. G.
CEMETERIAL DIVISION
Munitions Building
Room 1128

PLEASE
EXPEDITE

WAR. DEPARTMENT
Office of the Quartermaster General of the Army
Washington

G.R.S. Form 3-W-A-O
Information requested of A.G.O.

Date 12/21/20.

File No. 63408
Registration.

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

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

Subject: Information required for G.R.S.

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

- a. Surname Cooper, ✓
- b. Christian name Clyde H. ✓
- c. Serial Number ~~234253~~ 2354253 ✓
- d. Organization Co. M. 327th Lab. Bn. ✓
Med. Det., 327th Lab. Bn. ✓
- e. Rank Pvt. 1cl
- f. Date of death 11/19/18. ✓
- g. Cause of death Broncho pneumonia. ✓
- h. Authority (C.O.#) 9.9.201
- i. Emergency address Mrs. Laura Carter (Grandmother)
Knabrook, Wis.
- j. Relationship

BODY DESCRIPTION

(See page #2 of the Service Record)

- a. Age of enlistment
- b. Color of eyes
- c. Color of hair
- d. Height
- e. Weight
- f. Permanent marks and physical defects at enlistment (Old fractures or breaks)

DENTAL CHARTS

(See Physical report of examination prior to enlistment)

- a. Strike out teeth missing
- | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|-------------|---|---|---|---|---|---|---|--|------------|
| 8 | 7 | 6 | 5 | 4 | 3 | 2 | 1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | | |
| | | | | | | | | upper right | | | | | | | | | upper left |
| | | | | | | | | | | | | | | | | | |
| 8 | 7 | 6 | 5 | 4 | 3 | 2 | 1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | | |
| | | | | | | | | lower right | | | | | | | | | lower left |

FILE

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

BY: *H. J. Conner*
H. J. CONNER,
1st. Lieut. Q.M.C.

Rec'd World War Div
Date DEC 23 1920

CEMETERY NO: 14.
69.
SHEET NO:
TYPED BY: I.W.

8/713/LML

12/28/20
L

Somerville - Geo
OPR-12-24-20

13

03408
AMERICAN EXPEDITIONARY FORCES
BASE HOSPITAL NO. 17
APO NO. 721.

November 19, 1918.

From: Commanding Officer.

To: Graves Registration Bureau, American E. F.

Subject: Report of Death:

1. Name: Clyde H. Cooper.
2. Rank: Private.
3. Company: "M"
4. Regiment or Corps: 327th Labor Battalion.
5. Date of Death: November 17th 1918 - 2:30 PM
6. Cause of Death: Acute Broncho Pneumonia. In line of duty, not result of own misconduct.
7. Autopsy Findings: Above diagnosis verified. Autopsy performed by Central Medical Department Laboratory.
8. Place of Burial: Dijon, Cote ~~de~~ d'Or, France.
9. Cemetery: Municipal Cemetery Annexe, Polygone AA
10. Grave Number: 24.
11. Age: 20 years.
12. Address of Nearest Relative: Knoboster, Missouri.
13. Nearest Relative: Father, Lemuel Cooper.

Angus McLean
Angus McLean,
Colonel, M.C.



