

G.R.S. Form #114-B

To The Adj. Gen.

4424

MT

Soldier's Sig

APR 27 1922

DATE Jan 14th, 1922

1. NAME ~~CONSTANTINI~~, Vito

SERIAL No. 546114

RANK Pvt

ORGANIZATION

Co G 30th Inf

GRAVE LOCATION Meuse-Argonne Amer. Cty. Romagne-s-Montfaucon 1232 Sec. 24

CTY. NAME

NUMBER

38

Sec. 24

1

GRAVE

ROW

PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 7. Cunel, (Meuse)

GRAVE

COMMUNE

DEPT.

COORDINATES

Verdun 35 N.E. - N.283.45 - E.309.4

CONCENTRATED TO

6/6-19

38

Sec. 24

1

DATE

GRAVE

ROW

PLOT

Meuse-Argonne

#1232

CEMETERY

CTY. NUMBER

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

DATE OF DEATH Oct 6, 1918 Tag on body and cross

STATE FROM WHICH HE CAME Pa

MEDALS OR DECORATIONS AWARDED none

Data from Form #1.

SUBSEQUENT REBURIALS

DATE

GRAVE

ROW

PLOT

CEMETERY

DATE

GRAVE

ROW

PLOT

CEMETERY

SIGNATURE, AREA SUPERVISOR

rhj

[Signature]
M. B. BIRDSEYE

1st Lt., Q.M. Corps, U.S. Army

3. FINAL GRAVE LOCATION Jan 14th, 1922

24

Block C.

19

DATE

GRAVE

ROW

PLOT

AUDITED BY

M. M. E. - Robert O. Davis
3-23-23 Major General,
The Adjutant General

Meuse-Argonne Amer. Cty # 1232, Romagne-sous-Montfaucon (Meuse)

CEMETERY

MAY 3 1920

4 A.G.O.
APR 30 1922
WORLD WAR DIV.

INSTRUCTIONS FOR PREPARATION OF FORM 114 B

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

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

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

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



✓

CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME <i>Costantini</i>	<i>Con</i>	3	<i>35-9⁰</i>
<i>Vito</i>	CEMETERY <i>1232</i>	1	<i>1</i>
BURIED	GRAVE <i>24</i>	2	<i>24</i>
	ROW <i>19</i>	2	<i>19</i>
	BLOCK <i>C</i>	1	<i>3</i>
STATE	<i>Pa</i>	2	<i>44</i>
RANK	<i>Pvt</i>	1	<i>2</i>
DIVISION	<i>3</i>	2	<i>03</i>
ORGANIZATION	<i>30</i>	3	<i>03D</i>
ARM	<i>Inf</i>	1	<i>1</i>
MARITAL	<i>Widow</i>	1	<i>1</i>
NAME <i>Constantini</i>	<i>Con</i>	3	<i>35-4⁰</i>
<i>Mrs Maria Anna</i>	STATE	2	
RESIDENCE	COUNTY	2	
	CITY	3	
RELATION <i>(Mother dead)</i>	<i>Widow</i>	1	<i>5-</i>
OTHER <i>(Father died 1913)</i>		1	
ELIGIBILITY	<i>Foreign</i>	1	<i>4</i>
NATIVITY		1	
RACE <i>(all relatives foreign)</i>		1	
ENGLISH		1	
ATTENDANT <i>(no record of loc or S.M.)</i>		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE	<i>Italy</i>	1	

ACCEPTANCE
29/514
Epom *Constantini*

Audited
APR 21 1932
MB
EW

21

ser.
546114

1232

XC 89881

Costantini, Vito - Put - Co G - 30 Aug.

Date + place of mother's death? 1912

Father ~~living~~ died 1913

no widow remarried? (Italy) 2-16-22

Sm a loco in US? no re conf

all rel frequ

MB

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

DATE 8/22/31

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Costantini, Vito	Pvt.	546114	Co. G30th Inf	10/6/18

STATE	CTY. NO.	GRAVE	ROW	BLOCK
	1232	24	19	C

NAME AND ADDRESS	Check relationship	Living - Deceased	
		Living	Deceased
	MOTHER	:	✓
	STEPMOTHER (For the year prior to commencement of service)	:	:
	MOTHER THRU ADOPTION (For the year prior to commencement of service)	:	:
	MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	:	:
	WIDOW (she has not remarried)	:	:
		:	Frattura di Scanno
		:	Prondi Aquila
		:	Italy

Veterans Bureau Claim Number XC 89 881
29/156

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

DATE 7-23-29

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Costantini, Vito	Pvt.	546114	Co. G, 30th Inf.	10-6-18

STATE	CTY. NO.1232	GRAVE 24	ROW 19	BLOCK C
-------	--------------	----------	--------	---------

	<u>Check relationship</u>	<u>Living - Deceased</u>	
	MOTHER	: : :	XC-89881 7-2608
	STEPMOTHER (For the year prior to commencement of service)	: : :	
NAME	MOTHER THRU ADOPTION	: : :	
AND	(For the year prior to commencement of service)	: : :	
ADDRESS	MOTHER IN LOCO PARENTIS	: : :	_____
	(For the year prior to commencement of service)	: : :	_____
	WIDOW ✓	: : :	_____
	(Who has not remarried)	: : :	

← Maria Anna Galante vedova
Constantini,
Frattura di Scanno,
Prov. di Aquila,
Italy.

Veterans Bureau Claim Number _____
29/156

In reply refer to:
293 C-R

May 28, 1923.

Mrs. Mariannina Constantino,
Frattura,
Prov. of Aquila, Italy.

Foreign

77173

Dear Madam:

²⁹³
The Quartermaster General desires that you be informed that
the permanent grave of Private Vito Constantini, Company G, 30th Infantry,
is Grave 24, Row 19, Block C, Meuse-Argonne American Cemetery, Romagne-
sous-Montfaucon (Meuse) France.

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

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

Very truly yours,

H. J. Canner,
Assistant.



MAY 28 1923
B.O.C.

RD
227

23/236/ARK

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE

LG 1-217

IN REPLY
REFER TO

AG 201 Costantini, Vito (WW) WASHINGTON

April 25, 1923

SUBJECT: Date of death.

77123

To: The Quartermaster General of the Army
Washington, D. C.

An investigation, recently completed by this Department, in the case of Vito Costantini, #546,114, Private, Company G 30 Infantry, who was reported killed in action between October 13th and 20th 1918, shows that he was killed in action October 6, 1918 and that the former report is erroneous.



By order of the Secretary of War:

W. H. Woodley
Adjutant General.

293 Costantini Vito

FILE

AG 201 Costantini, Vito (WW)

April 25, 1923

Date of death.

The Quartermaster General of the Army

Washington, D. C.

An investigation, recently completed by this Department, in the case of Vito Costantini, #543,114, Private, Company G 30 Infantry, who was reported killed in action between October 13th and 20th 1918, shows that he was killed in action October 6, 1918 and that the former report is erroneous.

By order of the Secretary of War:

Wm. A. Woodlief,

Adjutant General.



293 Costantini, Vito

Date 17th June 1919.

REPORT OF DISINTERMENT AND REBURIAL

Remains of: Costantini, Vito

Name: COSTANTINI. Unknown Number 546114
(Constantine, Vito)

Rank: Priv Organization Co D. 30th Inf. Unit

Disinterment and Reburial made by Group:

Disinterred (Date) 6th June 1919. From (Give complete location) Grave. #/ 7 B.A.C.

CUNEL MEUSE.

35 NE. E. 309.4. N. 283.45

Reburied (Date) 6th June 1919. In: (Give complete location) Grave. 38 sec. 24. plot 1.

ARGONNE AMERICAN CEMETERY. # 1232.

ROMAGNE. MEUSE.

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

Burial good. Buried In Uniform. Body badly decomposed.

Was one identification tag found upon the body?

That other means of identification were found on the body? yes None.

COSTANTINI. 546114 Co D. 30th Inf.

CONFIRMED NO. 10997

Notes:

If upon disinterment, effects are found on 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 of identity in doubtful cases, notation whereof will be made and reported to Chief, Graves Registration Service.

Supervised by: Lt. Babbitt.

B. H. ROSENTHAL
2nd Lieut. O.M.C.U.S.A
G.O. Group Unit

LPB.



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Faint, illegible text, possibly bleed-through from the reverse side of the page.

Faint, illegible text, possibly bleed-through from the reverse side of the page.

Place Romagne Sous Montfaucon

REPORT OF DISINTERMENT AND REBURIAL

Date Jan, 12, 1922.

1. REMAINS OF CONSTANTINI VITO SERIAL NUMBER 546114
RANK Pvt. ORGANIZATION Co., G. 30th Inf.

2. Disinterred (date): Jan, 12, 1922. From (give complete location):
Gr. 38 ssec 24 pt 1 Cem., #1232.

By: Group 1 Unit Sec. 1

3. Reburied (date): Jan. 14, 1922, Grave 24, Block C, Row 19, Cemetery 1232,
Unlined Casket

By: Group Reburial S Unit Nature of reburial

4. Report as to nature of original burial and condition of body upon disinterment:
decomposed unrecognizable. US uniform burlap and box.

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

(b) Other means of identification found upon disinterment, and general remarks:
body tag reads: " Constantini Viti 546114 Pvt. Co., G. 30th Inf.

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

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

(b) Weight (estimated) do

(c) Hair—Color do

Quantity do

Characteristics do

(d) Hair on face—Color do

Location do

Quantity do

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

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

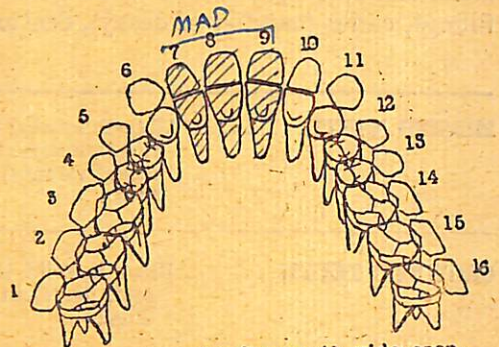
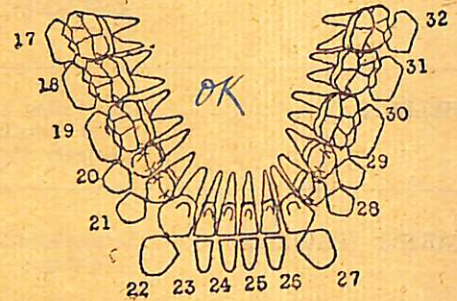


Diagram represents the mouth wide open.



7. Disinterment supervised by H. H. Foster

Approved: Geo. C. Bland
Geo. C. Bland 1st Lt. QMC
(Title)

8. Reburial supervised by A. U. Dufault
concentration

Approved: James W. Younger
James W. Younger,
(Title) Captain 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.

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 Jan 12 1922

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 CONSTANTINI, Vito 10. Name Viri
 2. No. 546114 11. No. _____
 3. Rank Pvt 12. Rank _____
 4. Org. Co G 30th Inf 13. Org. _____
 5. D.D. 10-13/20-18 14. (a) D.D. _____
 6. C.D. KIA (b) D.B. None

Discrepancy found upon disinterment

7. Grave No. 38 Sec. 24 15. Grave No. _____ Sec. _____
 8. Plot 1 Row _____ 16. Plot _____ Row _____
 9. _____ 17. None
 18. Cemetery Meuse-Argonne Am r. 19. Commune Romagne-s-Montfaucon
 20. Dept. or County Meuse 21. Country France
 22. G.R.S. Hdqrs. Code No. 1232 Sec. 24
 23. Disinterred (Date) Jan 12 1922 By H H Foster.
 24. Inscription on grave marker:
 Name Vito Constantini Serial No. 546114
 Rank Pvt Organization Co G 30 Inf
 25. Was identification disc found on grave marker? Yes On body? Yes

John H. Crawford
 Signature Junior Technical Assistant

John H Crawford.

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).
None
 27. Condition of body Badly decomposed features unrecognizable
 28. Nature of burial US Uniform burlap and 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 Jan 12 1922 By H H Foster.
 31. Casket sealed by H H Foster.
 AUDITED BY _____
 Signature of Embalmer, (Supervisor *H H Foster*
H H Foster.

C-20469

SHIPMENT. ^{MT} (Show actual marking of box.)

RECEIVED
GRAVES REGISTRATION



32. Designation of body: Vito Constantini
Name 546114
Serial No.
Rank Pvt Organization Co G 30th Inf

33. Consigned to: Meuse-Argonne Am r. Cty. Romagne-s-Montfaucon 1232
Name of Permanent Cemetery

34. Casket boxed and marked (Date) Jan 12 1922 By H H Foster.

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 Geo C Bland

36. Remarks Geo C Bland 1st Lt. OMC

37. Shipped from point of Operation: (Date) Jan 12 1922 cc

To point of Concentration Morgue Romagne
(Name)
Convoyer W J Royed Signature Shipping Officer G F Spann, 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
To Permanent Cemetery
(Name)
Convoyer Signature Shipping Officer

40. Received: Date
G.R.S. Representative

41. Reinterred Meuse Argonne Cemetery 1232, Jan 14, 1922.
(Date)

42. Grave No. Section

43. ~~Plot~~ block Row 19

G.R.S. Representative James W. Younger
James W. Younger,
Captain O.M.C.

COMPILATION OF DISPOSITION OF REMAINS DATA

File 77123

I. LOCATION INDEX CARD:

(a) Name COSTANTINI, Vito Ser. No. 546114

(b) Rank Pvt. Organization Co. G, 30th Inf.

(c) Date of death 10-13-20-18 (d) Cause of death K/A

TYP. B

CKR.

Handwritten notes: 3/29/21, 3/22/21, 4/17/22, for Concentration, 1232, 4/17/22, 1232

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

(a) Grave No. 38 Row - Plot 1 Sec. 24 TYP. B

(b) Emerg. Address Mr. John Costantini (brother) Fraturro, Prov. Del Aquila, Italy.

Handwritten: A. G. O. Constantini wife of

III. Files of soldiers dying from contagious diseases

Handwritten: Oratturo, Italy 11/1

CKR.

Handwritten: No card in file. MH 4/4/21

IV. A. G. O. DISPOSITION CARD:

Date of receipt

(a) Name (b) Relationship

(c) Address

(d) Remains to be brought to U. S.?

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

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

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

Examiner's Initials Date, 192

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

, dated

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

Handwritten: No correspondence

Examiner's Initials MH Date 4/4, 1921

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

Handwritten: No request for disposition

(a) Cancellation memos referred to? yes

Examiner's Initials MH Date 4/4, 1921

COUNTRY FRANCE

CEMETERY No. 1232-Sec. 24 SHEET No. 41

Handwritten: a.c.p. 5-27-21

Handwritten: Checked by MH 5-27-21

VII. G. R. S. Form No. 114 made _____, 192

Typed by _____, Checked by _____, 192

VIII. FINAL ACTION:

Following advice forwarded to Europe by { cable on _____, 192
letter on **MAY 17 1921**, 192

Sec 24

PARAGRAPH 2 - NOT TO BE RETURNED

(QRS)

IX.

REMARKS

*YLB-6A - Mrs. Mariannina Costantino
mother, Scanno per Frattura Prov, Di Aquila,
Italy.*

*B/a.w.R. Mrs. Mariannina Costantino
Frattura Prov. of Aquila, Italy.
4/4/21 - SH
5-9-21-H*

WRITE NOTHING BELOW THIS LINE.

2-7720

Location Index

..... Discrepancies

Name

Rank

Serial No.

Org.

Remarks

.....
A.G.O. Card & Corr.

..... Discrepancies

Name

Rank

Serial No.

Org.

Remarks

.....
G. R. S. Corr.

..... Discrepancies

Name

Rank

Serial No.

Org.

Remarks

.....
Checkers

..... Discrepancies

Name

Rank

Serial No.

Org.

Remarks

Handwritten: 4-5-21, 4-5-21, 4-5-21, 4-5-21

Handwritten: checked 4/1/51 SA

COMPILATION OF DISPOSITION OF REMAINS DATA

File 77123

Form 115
att 4/17/21
see

I. LOCATION INDEX CARD:

(a) Name COSTANTINI, Vito Ser. No. 546114
(b) Rank Pvt. Organization Co. W, 30th Inf. } TYP. C
(c) Date of death 10-13-20-18 (d) Cause of death K/A

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

(a) Grave No. 88 Row - Plot 1 Sec. 24 TYP. B

(b) Emerg. Address Mr. John Costantini (brother) Frature, Prov. Del Aquila, Italy.

A. G. O. gives Maryama Constantini (wife)
III. Files of soldiers dying from contagious diseases Italy - 11/1 (12-21) E.M. CKR. C

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

.....
.....
.....

V. Following advice forwarded to Europe by { cable on _____, 192
letter of transmittal on MAY 17 1921, 192

Sec. 24.
PARAGRAPH 2 - NOT TO BE RETURNED (H.A.S.)

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

VII. SUPPLEMENTARY REQUESTS.

Date of and source.	Relationship and name.	Desires.	Action taken.
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

VIII. Form 115 received from G. R. S., Hoboken, N. J. _____, 192

COUNTRY _____ CEMETERY No. _____ SHEET No. _____

OSP-SS
Form No. 1009

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

*Dease
must!*

Harlow C.W.
NAME OF DECEASED SOLDIER CEMETERY NO. DATE

Costantini, Vito, Pvt. 1232-Sec.24 - 41 4/5/21.
SERIAL NUMBER ORGANIZATION DATE OF DEATH

546114 Co. G, 30th Inf. 10-13-20-18.

Copy forwarded to
Adjustment Department
Date 5-9-21-H

WAR RISK INSURANCE INFORMATION

DATE C-8988

~~THIRTY-FIVE DOLLARS ONLY~~
PERSON NAMED BY ~~SOB~~ \$35.00 ONLY TO BE BENEFICIARY OF INSURANCE RELATIONSHIP

MRS MARIANNINA COSTANTINO C-89881

~~FRATTURA~~
ADDRESS PROV OF AQUILA W-C
ITALY

PERSON RECEIVING DEATH COMPENSATION RELATIONSHIP

Co G 30th Infantry.,
3rd Division.,

COSTANTINI, Vito, Pvt 546114
Home; 1306 Lock St.,
McKeesport Pa.,

Letter received in this office Co G 30th Infantry dated
October 30, 1918 from Chaplain J.D. Van Horn 11th Infantry, stating that
he had buried the above named soldier on the 20th day of October 1918
He was found in a group of 21 men all killed and buried by this chaplain
Grave 7. Map U.S. Eng Montfaucon 09.2.-83.5.

No Informant given.,

Signed; Joseph H. Moenig, 2nd Lt
30th Inf., Commanding Co.,

Emergency address:
John Costantini. (Brother)
Fratturo Pr. Del Aquila Italy.,

TS

177/23

FILE UNDER NO.

77123 Constantini Vito

INDEX SHEET

SYNOPSIS

See case of Beernacki, Joseph
H 5-2188 in letter in this case

DOCUMENT FILED UNDER NO.

INSTRUCTIONS.—Under "Synopsis" make brief entry showing date of communication and from whom received and synopsis sufficient to identify the papers. When these index sheets become numerous under a subject they will be entered on the consolidated index sheet and then destroyed.

3-6642

70123

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

.....**CONSTANTINE**, **546114**, **Vito**
(Surname). (Number). (First Name and Initials).

.....**Pvt.**, **Co. G**, **30th.**, **Infantry**
(Rank). (Organization).

PLACE OF DEATH: **Argonne - Meuse sector**

CAUSE OF DEATH: **Gun shot wounds**

DATE OF BURIAL: **October 20th, 1918**

PLACE OF BURIAL: **Meuse-Argonne sector**

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

.....**Map U.S. Eng. Montaucon 09.2 - 83.5**

INDIVIDUAL FILE

GRAVE NUMBER: **7**

HOW MARKED: Name Peg? Cross?

Headboard? Bottle?

IDENTIFICATION TAGS:

INDIVIDUAL

Was one buried with body?

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:

Card (Meuse)
249 35 NE

NEAREST RELATIVE: **Mrs. Mariannina Costantine**

ADDRESS: **Scanno per. Frattura Prov. Di**

Aquila, Italy Relationship: **Mother**

REPORTED BY:

[Handwritten Signature]

(Signature and Rank of Reporting Officer).

Government of India
Ministry of Education
New Delhi

Communal List No. ~~249470~~ 2408
Daily Report No. _____



85948 77123

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF
Constantine Vido

Tinivi.....*46114*.....*Costa R.*
(Surname). (Number). (First Name and Initials).

Pol......*Co., Dist. Inf.*
(Rank). (Organization).

PLACE OF DEATH: *2 Kil, S. Cunel*

CAUSE OF DEATH: *K.I.A.*

DATE OF BURIAL: *10/*

PLACE OF BURIAL: *1. Farm De Madeleine*

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

Montfaucon.....*9-83*

GRAVE NUMBER: *7*

HOW MARKED: Name Cross?

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

IDENTIFICATION TAGS:

Was one buried with body?

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

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

COMME. *Cunel (mouse)*

(C-249) SIT. *35 N.E.*

NEAREST RELATIVE: *6-309-23*
7-283-55

ADDRESS:

RELATIONSHIP:

REPORTED BY:

J. Van Horn
(Signature and Rank of Reporting Officer).
Chaplain 11th Infantry,

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

RECORDED

77123

MEMORANDUM

249-1140

Communal List No. _____
Daily Report No. _____

FILE

7712



Name appears on

ca
John B. Stantoni, Pres.
Fratturo Provincie
Del Aquila,
Italy.

For further data see Casualty Files

~~Tsimi, Costa N~~

5-46114

G. 30. Inf.
Costantini, Veto

Kra-

Buried 10-2-18-

1ST BURI. GEM C-249 = Cuneel, Mense

unc

B/C

F# 85-948-

GENERAL HEADQUARTERS
AMERICAN EXPEDITIONARY FORCES
ADJUTANT GENERAL'S OFFICE.

FROM : ADJUTANT GENERAL.

TO : C.O.Co. G 30th., Infantry

SUBJECT : Information for burial Register.

1. You are directed to transmit without delay to the Chief, Graves Registration Service, the information indicated on enclosed Graves Location Blank as necessary for the completion of official records.

By Command of General Pershing:

Robert C. Davis
Adjutant General.

Note:

In case this item is checked, you will note hereon:

Nearest relative of deceased:

Mrs. Mariannina Costantine

Relationship: Mother

Address: Scanne per Frattura Prov. Di Aquila,
Italy



Adjustment Made
File No. 77103
MIN 27 1921

WAR DEPARTMENT

Office of the Quartermaster General of the Army
Washington

G.R.S. Form 8-W-A-H
Information requested of A.G.O.

Date 4/5/21.

File No. Requisition

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

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.

NOTED FORM 115
DATE 4-12-21

a. Surname **Costantini**

f. Date of death ~~10-13-18~~ 10-13-18

b. Christian name **Vito**

g. Cause of death **K/A**

c. Serial Number **546114**

h. Authority (C.O.#)

d. Organization **Co. G, 30th Inf.**

i. Emergency address **Marianna Costantini (wife)**

e. Rank **Pvt.**

j. Relationship **Spattina, Italy**

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

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

a. Age of enlistment

a. Strike out teeth missing

b. Color of eyes

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

c. Color of hair

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

d. Height

e. Weight

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

Donnelly, Lea CRJ
4-6-21

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

C.W.
CEMETERY NO: **1232-Sec.24.**

BY: *[Signature]*
H. J. CONNER,
1st. Lieut. Q.M.C.

SHEET NO: **41**
TYPED BY: **I.W.**

Rec'd War Dept
Date: **APR 6 1921**

9
4/713/LML

Rec'd H & B Div, AGO
APR 8 1921

CEMETERY DIVISION
REGISTRATION SECTION

July 15, 1921

FILE

MEMO FOR:

Cards Department.

1.

CASE OF:

Co. G, 30th Inf.

ORGANIZATION (Old)

Costantini, Vito

(Name)

Correction or additional data changes as shown below have been made on the Registration Card of the above-mentioned soldier and a corresponding change will be necessary on the Organization Card:

ORGANIZATION (New)

FILE NO.

SURNAME

SERIAL NUMBER

FIRST NAME AND INITIALS

RANK

DATE OF DEATH

CAUSE OF DEATH

	Date	Place	F-1A No.
Orig.	10/20/18		D-
1st Reb.			D-
2nd Reb.			D-
3rd Reb.			D-

(Note: In the above spaces below double line fill in ONLY the new data and data correcting previous information)

BY: Ethel C. Cawley

Inv. & Adj.
(Department)

5 x 8 card was sent to file.

Corrections made
on Organization
File Card:

By AB

S/1105/LML

CEMETERIAL DIVISION
REGISTRATION SECTION

June 25, 1921

MEMO FOR:

Cards Department.

1.

CASE OF:

Company G, 30th Inf.ORGANIZATION (Old)COSTANTINI, #546114, Vito -- Private.
(Name)

Correction or additional data changes as shown below have been made on the Registration Card of the above-mentioned soldier and a corresponding change will be necessary on the Organization Card:

ORGANIZATION (New)

FILE NO.

SURNAME

SERIAL NUMBER

FIRST NAME AND INITIALS

RANK

DATE OF DEATH 10/13/18

CAUSE OF DEATH

	Date	Place	F-1A No.
Orig.			D-
1st Reb.			D-
2nd Reb.			D-
3rd Reb.			D-

(Note: In the above spaces below double line fill in ONLY the new data and data correcting previous information)

BY: Muriel D. Towne.

Investigation & Adjustment.
(Department)

5 x 8 card was sent to file.

Corrections made
on Organization
File Card:

By mgb

S/1105/LML

File #77123

Feb. 13, 1920

CTY. # 232, GR. 18
Research Section Card Dept.
G.R.S Form No. 8-W; Central Records
Liaison.

Memo For: G.R.S. representative, C.R.O.
Subject: Information required for G.R.S.

Costantini, Vito

1. Items checked are to be completed:

Surname:	Constantino
Number:	546114 ✓ O.K.
First name:	Vito ✓
Rank:	Private ✓
Company:	Co. G, ✓
Organization:	30th Inf. ✓
Date of death:	10-13/20-18 ✓
Cause:	K/A ✓
Place:	

Location of hospital:

Number " "
Class " "

Emergency address Mr. John Costantini
Featuro, Prov Del Aquila, Italy
Relationship: Brother

Authority:

Cablegram No: 461
Telegram from

*Papers of
Diamond 2-6-20
7. B. 6-318
2/17/20*

dated:
Reported to Washington:
C.G. Nos.

(Underscore the "official" C.C.)
Remarks:

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

mg
NS-3404/MB

Feb. 12, 1950

WFO 12118

Research Section, G.S. Form No. 8-W; Central Records Division

Form 1-A, D-10997 shows:

Cemetery #1232,

Grave #38

Name: Costantini,

Co. D,

Memo For: G.S. representative, C.R.O.

Subject: Information regarding G.S.

Costantini, Vito

1. Items checked are to be completed:

Number:	10-12/20-18
First name:	30th Inf.
Rank:	Co. D
Company:	Private
Organization:	
Date of death:	
Cause:	
Place:	

Location of hospital:

Number: " " " "

*Relationship: Brother
Address: Mr. John Costantini
John P. Biala, 27th St.*

Telephone: 461

Reported to Washington: C.G. Nos.

(Reference the "official" C.G.)

CHARLES C. FINKE
Colonel, G.S.

NS-3407B