

Cowan,

Earl

2,788,917

Dup. ✓

(Surname.)

(Christian name in full.)

(Army serial number.)

Pvt.

Co. C, 126th Inf.

(Rank and organization.)

State your relationship to the deceased

Father

Do you desire the remains brought to the United States?

(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)

Robert M. Cowan

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

3-6713

*Cowan-Earl
Europe*

checked - BCR

5-4-21

Noted

Date

5-3-21

1232 Sec. 54-44

Mrs. Robert M. Cowan,
Berkeley, M. Ark.

FEB 18 1928

DATE 11/2/21

1. NAME COWEN, Earl

SERIAL No. 2788917

RANK Pvt.

ORGANIZATION Co. C. 126th Inf.

& DIVISION 32

GRAVE LOCATION Meuse-Argonne Amer. ROMAGNE-s/s-MONTFAUCON (Meuse) 1232, Sec. 54

CTY. NAME

NUMBER

153

54

3

GRAVE

ROW

PLOT

Isolated, Romagne -s-Montfaucon, Sec.

2. ORIGINAL BATTLE AREA GRAVE LOCATION

GRAVE

COMMUNE Meuse

DEPT.

COORDINATES

Verdun 35 NE

282.6 N

307.7 E

CONCENTRATED TO

5/16/19

153

Sec 54

3

DATE

GRAVE

ROW

PLOT

Meuse Argonne Cemetery

1232

CEMETERY

CTY. NUMBER

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

Tag on body and cross.

DATE OF DEATH Oct 7 1918

STATE FROM WHICH HE CAME Meuse

data F-1.

SUBSEQUENT REBURIALS

MEALS OR DECORATIONS AWARDED none

ccg.

DATE

GRAVE

ROW

PLOT

CEMETERY

DATE

GRAVE

ROW

PLOT

CEMETERY

SIGNATURE, AREA SUPERVISOR

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

3. FINAL GRAVE LOCATION

11/2/21

15

39

A

DATE

GRAVE

ROW

PLOT

Block

Meuse-Argonne American Cty. Romagne-sous-Montfaucon (Meuse) 1232

CEMETERY Div.

Robert O. Davison
Major General
The Adjutant General
By

FEB 23 1928 BY
S&B 3/1/23
jc.

FEB 19 1928
WORLD WAR DIV.

5 MAR 30 1928

906

RECEIVED
GRAVES REGISTRATION SERVICE



FEB 31 1922

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.



GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Cowan 2788917 Carl
(Surname). (Number). (First Name and Initials).

Vt. Co. C. 1166 Inf
(Rank). (Organization).

PLACE OF DEATH: *Hill north of Leigro*

CAUSE OF DEATH: *killed in action*

DATE OF BURIAL: *Oct 23rd 1918*

PLACE OF BURIAL: *Hill north of Leigro*
West side of road
(Give Cemetery, Town and Department). Map reference must specify clearly what map is used.

Verden #28th Aug 12, 1918
coord 87.7 - 82.8
GRAVE NUMBER:

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?..... *Yes*

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

NEAREST RELATIVE:

ADDRESS:

RELATIONSHIP:

REPORTED BY: *A. Legowski*
(Signature and Rank of Reporting Officer).

CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME <i>Cowen</i>	<i>Cow</i>	3	<i>3 8- 12</i>
BURIED	CEMETERY <i>1232</i>	1	<i>1</i>
	GRAVE <i>15</i>	2	<i>15</i>
	ROW <i>39</i>	2	<i>39</i>
	BLOCK <i>a</i>	1	<i>1</i>
STATE	<i>Wyo.</i>	2	<i>59</i>
RANK	<i>Plt</i>	1	<i>2</i>
DIVISION	<i>32</i>	2	<i>32</i>
ORGANIZATION	<i>126</i>	3	<i>126</i>
ARM	<i>Inf.</i>	1	<i>1</i>
MARITAL	<i>no</i>	1	<i>2</i>
NAME <i>Cowan</i>		3	
<i>Robert M.</i>	STATE	2	
RESIDENCE	COUNTY	2	
<i>Phillipburg, Mont.</i>	CITY	3	
RELATION	<i>Mother</i>	1	<i>1</i>
OTHER <i>Father died 4-6-31</i>		1	
ELIGIBILITY <i>step M in 1934</i>	<i>Lead 1910</i>	1	<i>6</i>
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE 29/514		1	

Brother + Adm

Audited
APR 21 1932
MB

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

DATE June 3, 1931

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Cowen, Earl	Pvt.	2788917	Co. C, 126th Inf.	10-4-18

STATE	CTY. NO.	GRAVE	ROW	BLOCK
	1232	15	39	A

Check relationship Living - Deceased

MOTHER

: : ✓ :

STEPMOTHER (For the
year prior to com-
mencement 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)

: : : :

(B) and adm. of Estate
of Robert M. Cowen, Jr.

Box 158



Veterans Bureau Claim Number
29/156

Xc 141419

6-9

Single man

Cowen, Earl MA

Pvt., Co. C, 126th

XC 141419

vd

MOTHER

Wid 1910

~~WIDOW~~

father died 4-6-31

~~LOCO~~

STEP-M

Anna Phiffa Cowen

Cooperstown
N.Y.

on death
from
claim & Anna
became 8.00 in
1924

Adm + B.

Robt. M Cowen Jr
Phil ipburg mont

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-M

Cowen, Earl Pvt. (M-A) *B.*

May 19, 1931.

Mr. Robert M. Cowen, *Jr.*
~~Binford, North Dakota~~

Box 158

Dear Sir:

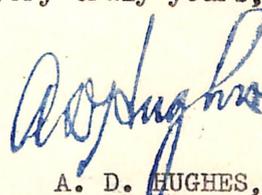
Haure, Mont.

According to our records this office has recieved no reply in response to our letter requesting that you advise as to whether or not the late Private Earl Cowen was married and id survived by a widow and if so, her name and address.

For your convenience in replying there is enclosed here- with a self-addressed envelope which requires no postage.

For The Quartermaster General.

Very truly yours,



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

Enclosure
Envelope

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON D. C.

OFFICIAL BUSINESS

**REASON FOR
NON-DELIVERY
CHECKED**

UNCLAIMED _____ UNKNOWN _____
DECEASED FOR BETTER ADDRESS _____
MOVED LEFT NO ADDRESS _____ REFUSED _____
NO SUCH POST OFFICE IN STATE NAMED _____



WASHINGTON, D.C.
MAY 19
6:30 PM
7831

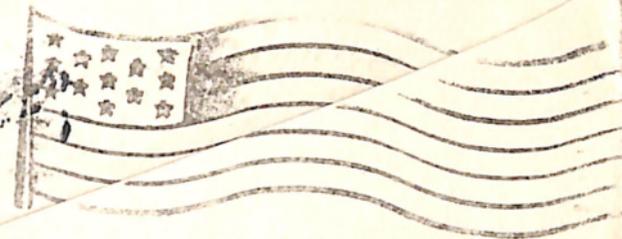
**NOTIFY
YOUR**
CORRESPONDENTS
OF CHANGE
OF ADDRESS

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

RECEIVED
MAY 25 1931
A. R. DIV.
U. S. A. O.



BINGHAM, N. D. A. K.
MAY 22
2-30 P.
1931



QM 295 A-M
Cowen, Earl 1232 F

December 12, 1930

Mr. Robert M. Cowen,
Binford,
North Dakota.

Dear Sir:

In order that the records of this office may be complete and correct, it is requested that you advise whether or not the late Private Earl Cowen is survived by a widow, and if so, her name and address.

For your convenience in replying, there is enclosed, herewith, a self-addressed envelope which requires no postage.

For The Quartermaster General.

Very truly yours,

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

Enclosure:
Envelope.
KL

ETK

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

July 8, 1930.

Cowen, Earl 1232 F

Mr. Robert M. Cowen,
Binford, No. Dak.

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

June 29, 1929.

~~Cowen, Earl~~

Mr. Robert M. Cowen,
Binford,
North Dakota.

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 Earl Cowen, Co. C., 126th Inf., whose remains are now interred in the Meuse-Argonne Amer. Cty., Romagne-Sous-Montfaucon, Meuse, 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,

2 incls.
Act of Congress.
Envelope.


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



Maj. Harris -

Carl Casen's matter
died in 1910.

No stop-matter -

Sincerely
Robert M. Casen

Brigadier N.D.
July 8th 1929.

1929 JUL 8

U.S. DEPARTMENT OF JUSTICE

RECORDED

INDEXED

U.S. DEPARTMENT OF JUSTICE

QM 293 A+M
Cowen, Earl Pvt. (M-A) F

May 19, 1931.

Mr. Robert M. Cowen,
Binford, North Dakota

Dear Sir:

According to our records this office has recieved no reply in response to our letter requesting that you advise as to whether or not the late Private Earl Cowen was married and is survived by a widow and if so, her name and address.

For your convenience in replying there is enclosed herewith a self-addressed envelope which requires no postage.

For The Quartermaster General.

Very truly yours,

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

gb
Enclosure
Envelope

MAY 19 10 01 AM '31

QM 293 A-M
Cowen, Earl 1232 F

December 12, 1930

Mr. Robert M. Cowen,
Binford,
North Dakota.

Dear Sir:

In order that the records of this office may be complete and correct, it is requested that you advise whether or not the late Private Earl Cowen is survived by a widow, and if so, her name and address.

For your convenience in replying, there is enclosed, herewith, a self-addressed envelope which requires no postage.

For The Quartermaster General.

Very truly yours,

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

Enclosure:
Envelope.
KL

1930 DEC 12 2 57

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

July 8, 1930.

Cowen, Earl 1232 F

Mr. Robert M. Cowen,
Binford, No. Dak.

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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

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Cowen, Earl

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North Dakota.

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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,
Major, Q. M. Corps,
Assistant.

In reply refer to:

293 C-R

80345

April 16, 1923.

Mr. Robert M. Cowen,
Bimford, North Dakota.

Dear Sir:

The Quartermaster General desires that you be informed that the permanent grave of Private Earl Cowen, Company C, 126th Infantry is Grave 15, Row 39, Block A, Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Department of 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 maintained by this Government in a manner befitting the last resting place of our heroes.

Very truly yours,

H. J. Conner,
Assistant.

23/236/ARK

Central Mail & File
APR 17 1923

LM

Office NEURCHATEAU

Date 13th June 1919

80346 No

REPORT OF DISINTERMENT AND REBURIAL

Remains of:

Name: COWEN, Earl

Number 2788917

Rank: Unkn

Organization Unkn

Disinterment and Reburial made by Group:

Unit

Disinterred (Date)

From (Give complete location)

6 16th May 1919

Isolated Grave ROMAGNE MEUSE

35 NE E 307.7 N 282.6

Reburied (Date)

In: (Give complete location)

16th May 1919

Grave No 153 Sec 54 Plot 3

ARGONNE AMERICAN CEMETERY NO. 1232

ROMAGNE MEUSE

1232

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

Burial good; buried in uniform; body slightly decomposed.

Was any identification tag found upon the body? Yes

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

CONFIRMED N° D 10238

Note:

If upon disinterment, effects are found on bodies, they will be promptly sent to the Director's Dept 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 Zama

R. H. ROSENTHAL

2nd Lieut. Q.M.G.U.S.A

JMB

G.O. Group Unit

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900

1900



REPORT OF DISINTERMENT AND REBURIAL

1. REMAINS OF COWEN EARL SERIAL NUMBER 2788917
 RANK Pvt. ORGANIZATION Co., C. 126th Inf.

2. Disinterred (date): Nov, 2, 1921. From (give complete location):
Gr. 153 sec 54 pt 3 Cem., #1232.

By: Group 3 Unit Sec. 1

3. Reburied (date): Nov. 2, 1921. In (give complete location):
Row 39. Block A. Grave 15, Cem. 1232.

By: Group Reburial S. Unit Nature of reburial Unlined Casket.

4. Report as to nature of original burial and condition of body upon disinterment:
box, U.S. uniform, burlap, body badly decomposed features unrecognizable.

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

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

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

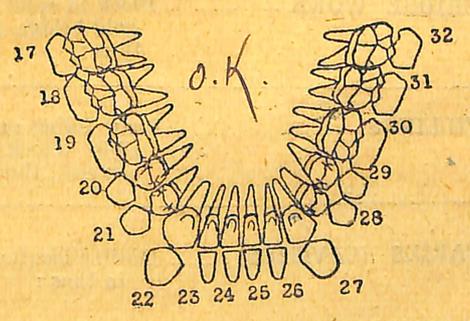
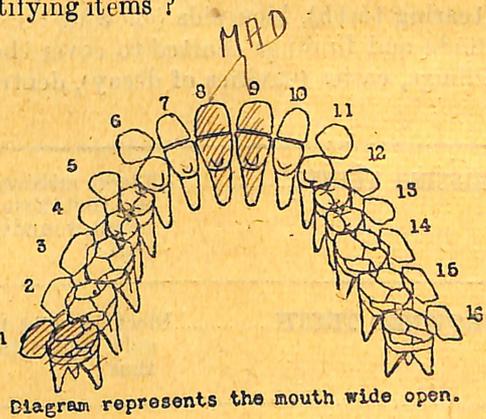
(d) Hair on face—Color do

Location do

Quantity do

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

(f) Wounds or missing parts (received at time of casualty)
right humerus fractured.



30792

7. Disinterment supervised by E. G. Howell S. S. Approved: F. B. Daniel
F. B. Daniel Capt. QMC
 (Title)

8. Reburial supervised by A. U. Dufault concentration Approved: James W. Younger
WS (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), bicuspid (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

<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>	
<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."</p>	

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.

JUL 31 1922



RECEIVED
GRAVE REGISTRATION SER.

To be prepared in triplicate.

DATE Nov 2 1921

REPORT OF DISINTERMENT, PREPARATION, SHIPMENT AND REBURIAL OF BODY

DISINTERMENT

COMPARATIVE REPORT

Records of G.R.S. Headquarters.

Discrepancy found upon exhumation of body

- 1. Name COWEN, Earl
- 2. No. 2738917
- 3. Rank Pvt.
- 4. Org. Co. C. 126th Inf.
- 5. D.D. Oct. 4th
- 6. C.D. KIA.
- 10. Name _____
- 11. No. _____
- 12. Rank _____
- 13. Org. _____
- 14. (a) D.D. _____
- (b) D.B. None

Discrepancy found upon disinterment

- 7. Grave No. 153 Sec. 54
- 8. Plot 3 Row _____
- 9. _____
- 15. Grave No. _____ Sec. _____
- 16. Plot _____ Row _____
- 17. None
- 18. Cemetery Meuse-Argonne American
- 19. Commune or town ROMAGNE-a/s-MONTFAUCON
- 20. Dept. or County Meuse
- 21. Country France
- 22. G.R.S. Hdqrs. Code No. 1232--Sec. 54

23. Disinterred (Date) Nov 2 1921 By E. G. Howell

24. Inscription on grave marker:

Name Earl Cowen Serial No. 2738917
 Rank Pvt. Organization Co. C. 126 Inf.

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

E. J. Rasch.
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).

Tags check.

27. Condition of body Badly decomposed, features unrecognizable

28. Nature of burial Box, US uniform, burlap

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 2 1921 By E. G. Howell

31. Casket sealed by E. G. Howell.

Signature of Embalmer, (Supervisor) E. G. Howell

AUDITED BY
Jo.



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

32. Designation of body: _____

Name COWEN, Earl Serial No. 2788917

Rank Pvt. Organization Co. C. 126th Inf.

33. Consigned to: _____

Name of Permanent Cemetery Meuse-Argonne American Cty. 1232, ROMAGNE-a/s-
MONTFAUCON (Meuse)

34. Casket boxed and marked (Date) Nov 2 1921 By E G Howell

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 F B Daniel

36. Remarks F B Daniel, Capt. QMC

37. Shipped from point of Operation: (Date) Nov 2 1921 cc

To point of Concentration Morgue Romagne (Name)

Convoyer W J Royed Signature Shipping Officer G F Spann
G F Spann, Capt. QMC.

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 Arg. Cemetery. (Date) Nov. 2, 1921.

42. Grave No. 15. Section _____

43. Plot Block A. Row 39.

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

COMPILATION OF DISPOSITION OF REMAINS DATA

File #80345

I. LOCATION INDEX CARD:

(a) Name COWEN, Earl Ser. No. 2788917
(b) Rank Pvt. Organization Co. C, 126th Infantry
(c) Date of death 10/4/18 (d) Cause of death K/A

TYP. DMA
CKR.

Examined 7/19/22
for Concentration # 1232
Munster Argonne 7/28/22
Att 7/28/22

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

(a) Grave No. 153 Row - Plot 3 Sec. 54 TYP. DMA
(b) Emerg. Address Mr. Robert M. Cowen (father) Binford, N. Dakota

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

IV. A. G. O. DISPOSITION CARD:

Date of receipt none

(a) Name Robert M. Cowen (b) Relationship Father
(c) Address not given
(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 E. C. Date 5-3-21, 1920.

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

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

Examiner's Initials Date, 1920.

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

No request for disposition.

(a) Cancellation memos referred to?

Examiner's Initials E. C. Date 5-3-21, 1920.

COUNTRY FRANCE CEMETERY No. 1232-Sec. 54 SHEET No. 44

Handwritten mark resembling a stylized 'C' or 'U' at the bottom right corner.

Serial No.

Org.

Remarks

Bitchett

5-3-21

A.G.O. Card & Corr.

Discrepancies

Name

Rank

Serial No.

Org.

Remarks *E. A.*

G. R. S. Corr

Discrepancies

Name

Rank

Serial No.

Org.

Remarks

Checkers

Discrepancies

Name

Rank

Serial No.

Org.

Remarks

S-1783/MB

*Checked - 6012
5-4-21*

COMPILATION OF DISPOSITION OF REMAINS DATA

File #80345

See Form 115
Att 2/28/22

I. LOCATION INDEX CARD:

(a) Name COWEN, Earl Ser. No. 2788917
 (b) Rank Pvt. Organization Co. C, 126th Infantry } TYP. DMA
 (c) Date of death 10/4/18 (d) Cause of death K/A } B. J.

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

(a) Grave No. 153 Row - Plot 3 Sec. 54 TYP. DMA
 (b) Emerg. Address Mr. Robert M. Cowen (father) Binford, N. Dakota

III. ~~Files of soldiers dying from contagious diseases~~ CKR. B. J.

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

.....

V. Following advice forwarded to Europe by { cable on, 192
Sec. #54 letter of transmittal on MAY 26 1921, 192
Par. # 2 Not To Be Returned — AD

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. _____

80345

1. G. R. S. File No. 1. Hq. G. R. S. File

2. Soldier's No. 2788917

3. Cowen Earl
Surname (in block letters) First Name and Initials

4. Pvt.
Rank Company Regt. or Corps

5. Date of Death Cause, if known

6. Isolated
Date of Burial Cemetery

7. Romagne Meuse
Town or Commune (in block letters) Department

8. 1057
Grave No. Plot No. or Letter

2980

9. Name Peg? Cross? Headboard? Bottle?
Check Method of Marking

10. Buried with Body? Attached to Grave Marker?
Identification Tags

11. If name unknown and tags missing, give marks and description.

(meuse)

ROMAGNE-SOUS-MONTFAUCON

(280) SHT. 35 NE COORD { E 307.48

{ N 283.77

12. "A" sketch 69
Map reference, if interment is outside of cemetery

283.77 N 307.48 E.

13. RB Br 1735/1736
Give name of Chaplain or Burial Officer

GROUP 1 Signed Lt. Hodson

PROV. UNIT "A" Group Unit G. R. S.
G.R.S.



80345
GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Coven 2788917 Carl.

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

(Rank) (Organization)

PLACE OF DEATH: *Hill of Curges*

CAUSE OF DEATH: *K in A*

DATE OF BURIAL: *Oct. 23. 1918*

PLACE OF BURIAL: *Hill of Curges*

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

Regd. No 284 Aug 12, 1918
Coord. 07.7 82.8.

GRAVE NUMBER:

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? *yes*

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

CMVT. Romagne-sous-Montfaucon

(280) (SIT) 35 N. E. COORD {E-307.7}
{N-282.8}

ADDRESS:

RELATIONSHIP:

REPORTED BY:

W. Legowski.

(Signature and Rank of Reporting Officer).



280-926

Communal List No. _____
Daily Report No. _____

P
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5-4-21

(Date)

FORM 115 has been compiled on the following case:-

CEMETERY NO. 1232 SECTION 54

FORM 115 Sheet No. 44

BER

(Initials)

FILE

OSP-SS
Form No. 1011.

S/2052/LML