

Case listed as Medical Corps - ok per Mrs. Ruth 7/16/28  
org to which officer received his commission.

308

G.R.S. Form #114-B

FEB 18 1926

DATE 11/3/21.

ml

1. NAME CRAIG, William F. SERIAL No. none  
RANK 1st Lt. ORGANIZATION San Det 315th Inf.  
GRAVE LOCATION Meuse-Argonne, Amer. Cty, ROMAGNE-sous-MONTFAUCON #1232 sec 55  
CTY. NAME (Meuse) NUMBER

9 GRAVE 55 Sec 1 PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 3 Bac. Malancourt, Meuse  
GRAVE COMMUNE DEPT.

COORDINATES Verdun 35 SE 275.3 N 313.55 E

CONCENTRATED TO 5/9/19 9 Sec 55 1  
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 Sept 26, 1918

STATE FROM WHICH HE CAME Penn

data F-1. MEDALS OR DECORATIONS AWARDED none found

ccg. DATE GRAVE ROW PLOT CEMETERY

DATE GRAVE ROW PLOT CEMETERY

M. B. BIRDSEYE

SIGNATURE, AREA SUPERVISOR 1st Lt., Q.M. Corps,

3. FINAL GRAVE LOCATION 11/3/21. 5 20 A.  
DATE GRAVE ROW Block

AUDITED BY

4-14-23

Meuse-Argonne, Amer. Cty. #1232 Romagne-sous-Montfaucon (Meuse) CEMETERY  
A.G.O.  
FEB 19 1926  
WORLD WAR DIV.  
Rec'd World War Div  
5 MAR 30 1928  
CRB  
adc



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.



No William F. Craig 1st Lt. Amm Detach 315th Inf  
4/26/18 Ser 13795 CC 296 - 12/10/18  
**GRAVE LOCATION BLANK**

LOCATION OF THE GRAVE OF

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

2nd Lt. (Rank). M. R. C. 315th Inf. (Organization).

PLACE OF DEATH: .....

CAUSE OF DEATH: Killed in action

DATE OF BURIAL: Oct. 2, 1918

PLACE OF DEATH: Malancourt

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

Argonne Special Map No, 48

13.5  
10.5-75.0

GRAVE NUMBER: 98

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:

Chaplain R. V. Lancaster  
(Signature and Rank of Reporting Officer).

This portion to be forwarded to Central Records Office, A. G. O., A. E. F.

CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	Craig	3	3-2-1
William F.	CEMETERY	1	1
BURIED	GRAVE	2	05
	ROW	2	20
	BLOCK	1	1
STATE	Penna	2	44
RANK	1st Lieut.	1	1
DIVISION	79	2	79
ORGANIZATION	315	3	315
ARM	Inf	1	1
MARITAL	Remarried	1	3
NAME	Craig, Ada	3	
STATE	Penna	2	
RESIDENCE	1229 Rising Sun Lane	2	
	Philadelphia, Pa	3	
RELATION	Widow	1	5
OTHER	(no loco or s.m.)	1	
ELIGIBILITY	No.	1	2
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF TRIP	MO.	1	
	YR.	1	
ACCEPTANCE		1	

Rem. with

Audited  
APR 2 2 1979  
MB

RM

M. H. 29/514/PJ

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C  
Craig, Wm. F. 1232 W

July 8, 1930.

Mrs. Ada Laura Craig,  
1229 Rising Sun Lane,  
Philadelphia, Pa.

Dear Madam:

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:

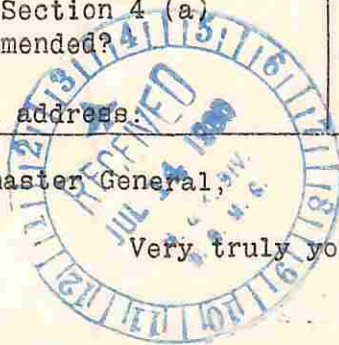
3. Is the deceased survived by any woman who stood in loco parentis to him according to the terms of Section 4 (a) of the enclosed Act as amended?

If so, give her name and address:

For The Quartermaster General,

Very truly yours,

Enclosures:  
Envelope  
Act  
Amendment

  
*A. B. Hughes*  
A. B. HUGHES,  
Captain, Q. M. Corps,  
Assistant.

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Craig, Wm. F.  
1232

August 30, 1929.

Mrs. Ada Laura Craig,  
1229 Rising Sun Lane,  
Philadelphia, Pa.

Dear Madam:

The records of this office do not indicate that a reply has been received to our communication dated June 27, 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:

*Widow remarried*

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.

*Mother deceased*

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  
Craig, Wm. F.

June 27, 1929.

Mrs. Ada Laura Craig,  
1229 Rising Sun Lane,  
Philadelphia, Pa.

Dear Madam:

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

The records of this office show that you are the widow of the late 1st Lt. Wm. F. Craig, Med. Det. 315th Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, France.

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

Your attention is particularly invited to Section 4 of the enclosed Act, which defines the terms "mother" and "widow". If the relationship is that of a stepmother, mother through adoption or a woman who stood in loco parentis to the decedent, a statement as to her relationship is requested. In case you have 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.

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

July 8, 1930.

Craig, Wm. F. 1232 W

Mrs. Ada Laura Craig,  
1229 Rising Sun Lane,  
Philadelphia, Pa.

Dear Madam:

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

Craig, Wm. F.  
1232

August 30, 1929.

Mrs. Ada Laura Craig,  
1229 Rising Sun Lane,  
Philadelphia, Pa.

Dear Madam:

The records of this office do not indicate that a reply has been received to our communication dated June 27, 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

Craig, Wm. QM 293 A-C  
IN REPLY REFER TO

June 27, 1929.

Mrs. Ada Laura Craig,  
1229 Rising Sun Lane,  
Philadelphia, Pa.

Dear Madam:

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

Records of this office show that you are the widow of the <sup>late</sup> 1st Lt. Wm. P. Craig, Med. Det. 516th Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, France.

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

Your attention is particularly invited to Section 4 of the enclosed Act, which defines the terms "mother" and "widow". If the relationship is that of a stepmother, mother through adoption or a woman who stood in loco parentis to the decedent, a statement as to her relationship is requested. In case you have 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.

QM 293 A-C

Craig, William, F.

May 29, 1924.

Dr. A. C. Morgan,  
2018 Chestnut St.,  
Philadelphia,  
Pa.

Dear Sir:

The Quartermaster General desires that receipt be acknowledged of your letter of May 26, 1924, requesting information as to the location of the grave of Captain William F. Craig, Medical Detachment, 315th Infantry.

Please be informed that this officer was a 1st Lieutenant at the time of his death. The body now rests in Grave 5, Row 20, Block A, Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, France. This is one of the American military cemeteries to be maintained by the United States for all time in Europe. The grave will be appropriately marked and maintained in the most careful and reverent manner.

The inclosed card, giving the burial location, is being transmitted to you in slight token of the officer's service to his country.

Very truly yours,

1 incl.  
Record card.

R. P. HARBOLD,  
Assistant.

LN  
WPR  
EED



DR. A. C. MORGAN  
2018 CHESTNUT STREET  
PHILADELPHIA

May 26, 1924.

Supt. of the Graves  
Registration Bureau  
Washington, D. C.

Dear Sir:

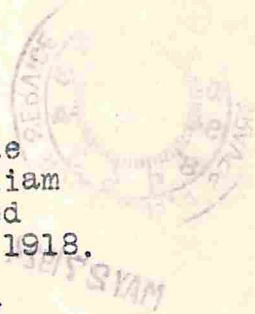
I am desirous of learning the  
location of the grave of Captain William  
F. Craig, M.C., U.S.A., who was killed  
in action in France, September 26th, 1918.

This will be appreciated by

Yours truly,

*A. C. Morgan*

ACM/MEM



QMG

293

*Craig, William F.*

DR. A. C. MORGAN  
2018 CHESTNUT STREET  
PHILADELPHIA  
May 28, 1924

Regt. of the Graves  
Registration Bureau  
Washington, D. C.

Dear Sir:

I am desirous of learning the  
location of the grave of Captain William  
F. Craig, M.O., U.S.A., who was killed  
in action in France, September 28th,

This will be appreciated by

Yours truly,

*A. C. Morgan*



MAY 27 1924



Craig

(Surname.)

William F

(Christian name in full.)

(Army serial number)

1st Lt

San Det

315 Inf

(Rank and organization.)

State your relationship to the deceased.

*Wife*

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.)

APR 21 1919

(Sign here)

*Ada L. Hoerthle Craig*

(over).

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

Letter Sent to:

Mrs Ada L. Craig. Lane,  
1229 Rising Sun ~~Save~~,  
Philadelphia, Pa.

*Handwritten:*  
12-27-21  
12-27-21  
12-27-21

*Handwritten:*  
1232  
Box 55-42  
5-26-21

*Handwritten:*  
Ann. City # 1046

In reply refer to:  
QM - 293 C-R

August 11, 1923.

Mrs. Ada Laura Craig,  
1229 Rising Sun Lane,  
Philadelphia, Pa.

Dear Madam: Quartermaster General desires that you be informed that the permanent grave of

1st Lieutenant William F. Craig, Sanitary Detachment, 315th Infantry, is Grave 5, Row 20, Block A, 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 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,

O.Q.M.G.  
Central Mail & Files Bt.



AUG 11 1923

H. B.

H. J. Conner,  
Assistant.

ID  
L

REPORT OF DISINTERMENT AND REBURIAL

3 7885

Remains of:

Name: CRAIG William F

Number

Rank: 1st Lt

Organization

M R D 315 Inf

Disinterment and Reburial made by Group:

Unit

Disinterred (Date)

From (Give complete location)

9 May 1919

Grave #3 B A C MALANCOURT MEUSE

35SE E313.55 N275.3

Reburied (Date)

In: (Give complete location)

9 May 1919

Grave #9 Sec 55 Plot 1

1232

Argonne Am Cemetery #1232

ROMAGNE MEUSE

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

Burial good, Buried in uniform, body in fair condition.

Was one identification tag found upon the body?

Yes

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

10718

Note:

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 Lewis

R. H. ROSENTHAL

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

C.O. Group

Unit

VED

O.C.O.M.  
G.R.S.

4

1. The first part of the document is a letterhead containing the name of the organization and its address. This section is partially obscured by a circular stamp in the upper right corner.

2. The second part of the document is a series of numbered paragraphs, likely detailing the terms of an agreement or a set of instructions. The text is faint and difficult to read.

3. The third part of the document appears to be a list or a set of conditions, possibly related to the agreement mentioned in the previous section.

4. The fourth part of the document is a concluding section, which may include a signature line or a date.

5. The fifth part of the document is a final section, possibly a footer or a reference to other documents.

6. The sixth part of the document is a final section, possibly a footer or a reference to other documents.

7. The seventh part of the document is a final section, possibly a footer or a reference to other documents.

8. The eighth part of the document is a final section, possibly a footer or a reference to other documents.

9. The ninth part of the document is a final section, possibly a footer or a reference to other documents.

10. The tenth part of the document is a final section, possibly a footer or a reference to other documents.

11. The eleventh part of the document is a final section, possibly a footer or a reference to other documents.

12. The twelfth part of the document is a final section, possibly a footer or a reference to other documents.

13. The thirteenth part of the document is a final section, possibly a footer or a reference to other documents.

14. The fourteenth part of the document is a final section, possibly a footer or a reference to other documents.

# COMPILATION OF DISPOSITION OF REMAINS DATA

File #. 3788 5

4/22/22  
 1/22  
 Lot Concentration  
 Madame - Argonne 12332  
 Att 3/10/22

**I. LOCATION INDEX CARD:**

(a) Name CRAIG, William F. Ser. No. ---  
 (b) Rank 1st. Lt. Organization San. Detch. 315th Inf.  
 (c) Date of death 9-26-18 (d) Cause of death k/a

TYP. hmp  
 CKR. 13 J.

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

(a) Grave No. 9 Row - Plot 1 Sec. 55 TYP. hmp  
 (b) Emerg. Address Mrs. Ada Laura Craig, (wife) 1229 Rising Sun Lane,  
Phila. Pa.

III. Files of soldiers dying from contagious diseases / / CKR. 13 J.

**IV. A. G. O. DISPOSITION CARD:**

Date of receipt \_\_\_\_\_

(a) Name Ada L. Woerthle Craig (b) Relationship wife  
 (c) Address \_\_\_\_\_  
 (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 PM Date 5-26-21, 192

**V. A. G. O. CORRESPONDENCE shows communication from \_\_\_\_\_**

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

Examiner's Initials \_\_\_\_\_ Date \_\_\_\_\_, 192

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

no request for disposition

(a) Cancellation memos referred to? yes

Examiner's Initials PM Date 5-26-21, 192

COUNTRY FRANCE CEMETERY No. 1232 Sec. 55 SHEET No. 42

JUN 15 1921 - AT

checked by  
 216-14-24  
 C

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 JUN - 7 1921, 192

*Sec. 55.*  
Par. 2 Not To Be Returned (EES)

IX.

REMARKS

To be prepared in triplicate.

DATE Nov. 3, 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 CRAIG, William F.  
 2. No. -----  
 3. Rank 1st Lt.  
 4. Org. San Det 315th Inf.  
 5. D.D. Sept 26th, 1918  
 6. C.D. KIA.

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

Discrepancy found upon disinterment

7. Grave No. 9 Sec. 55  
 8. Plot 1 Row -----  
 9. -----  
 18. Cemetery Meuse-Argonne, Amer.  
 20. Dept. or County Meuse  
 22. G.R.S. Hdqrs. Code No. #1232 sec 55  
 23. Disinterred (Date) Nov. 3, 1921.

15. Grave No. ----- Sec. -----  
 16. Plot ----- Row -----  
 17. No discrepancies.

24. Inscription on grave marker:

Name William F. Craig  
 Rank 1st Lt.

Serial No. ---  
 Organization San Det. 315th Inf.

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

E. J. Renouard  
 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).

Tag on peg over body agrees. No effects.

27. Condition of body Badly decomposed; features unrecognizable.

28. Nature of burial US officers uniform and wooden box. Burlap

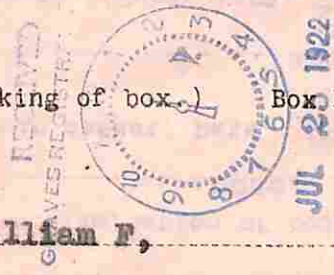
29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? None.

30. Body prepared and placed in casket: Date Nov. 3, 1921. by E. J. Renouard.

31. Casket sealed by E. J. Renouard

AUDITED BY Signature of Embalmer, (Supervisor) E. J. Renouard  
E. J. Renouard.

SHIPMENT. (Show actual marking of box.) Box No. C-14176



32. Designation of body:

Name CRAIG, William F. Serial No. -----

Rank 1st Lt. Organization San Det 315th Inf.

33. Consigned to:

Name of Permanent Cemetery Meuse-Argonne, Amer. Cty #1232, ROMAGNE-SOUS-MONTFAUCON (Meuse)

34. Casket boxed and marked (Date) Nov. 3, 1921. By E. J. Renouard

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, Capt. OMC.

36. Remarks None.

37. Shipped from point of Operation: (Date) Nov. 3, 1921. d

To point of Concentration Morgue, Romagne.

Convoyer W. J. Royed. Signature Shipping Officer G. F. Spahn, 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

Convoyer (Name) Signature Shipping Officer

40. Received: Date

G.R.S. Representative

41. Reinterred Meuse Arg. Cemetery. Nov. 3, 1921. (Date)

42. Grave No. 5. Section

43. ~~Plot~~ Block A. Row 20.

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

# REPORT OF DISINTERMENT AND REBURIAL

Date Nov, 3, 1921.

1. REMAINS OF CRAIG WILLIAM F. SERIAL NUMBER -----  
RANK 1st. Lt. ORGANIZATION San, Det. 315th Inf.

2. Disinterred (date) Nov, 3, 1921. From (give complete location) :  
Gr. 9 sec 55 pt 1 Cem., #1232.

By: Group 7 Unit Sec. 1

3. Reburied (date) : Nov. 3, 1921. In (give complete location) :  
Meuse Arg. Cemetery, Row 20, Block A, Gr. 5, Cem. 1232.

By: Group Reburial S. Unit \_\_\_\_\_ Nature of reburial Unlined

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

U.S. ~~uniform~~ officers uniform, burlap and wooden box, badly decomposed  
features unrecognizable.

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

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

U.S. officers uniform and tag on peg over body.

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

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

(b) Weigh. (estimated) do

(c) Hair—Color do

Quantity do

Characteristics do

(d) Hair on face—Color do

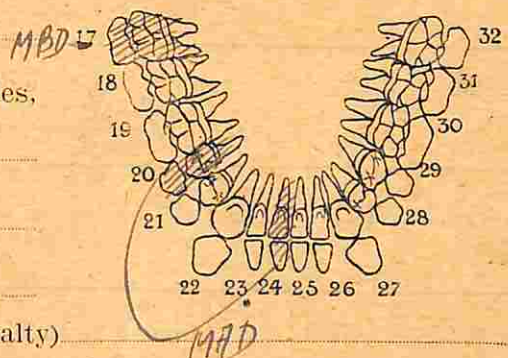
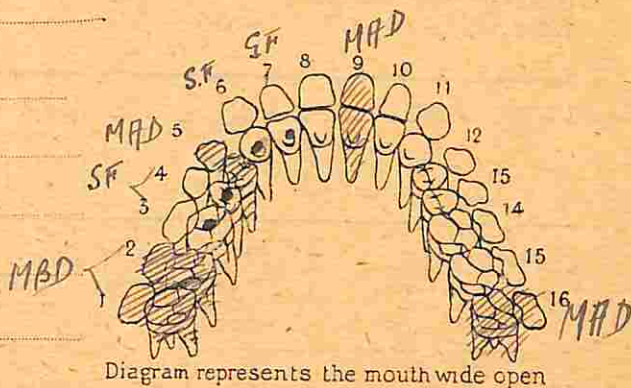
Location do

Quantity do

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

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

None discernable.



7. Disinterment supervised by E. J. Renouard Approved: F. B. Daniel

E. J. Renouard S. M.

F. B. Daniel Capt. OMC

8. Reburial Supervised by A. U. Dufault Approved: James W. Younger

WS A., U. Dufault,

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 Questions 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.





37885

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

2. Soldier's No. OFFICER

3. CRAIG, WILLIAM F.  
Surname (In Block Letters) First Name and Initials

4. 1ST LIEUT. M.R.C. 313 INF.  
Rank Company Regt. or Corps

5. \_\_\_\_\_  
Date of Death Cause, if known

6. \_\_\_\_\_  
Date of Burial Cemetery

7. MALANCOURT MEUSE  
Town or Commune (In Block Letters) Department

8. 39  
Grave No. Plot No. or Letter

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

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

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

SKETCH H 46  
AMERICAN CEMETERY  
5M OFF ROAD FROM MALANCOURT MONTFUCON

12. 1. KILOM. JUNCTION OFF ROAD FROM CUISY  
Map Reference, if interment is outside of cemetery

276 BN + 313 INF 35 SF

13. 2 KILOM. N. W. OFF MALANCOURT  
Give name of Chaplin or Burial Officer,

Signed. GEORGE DIERHOFF

RBH  
1114

Group. 4.... Unit. 306. G. R. S.



**GRAVE LOCATION BLANK**

~~37885~~  
37885

LOCATION OF THE GRAVE OF

**Craig** ..... **X** ..... **William F.** .....  
(Surname), (Number), (First Name and Initials).

**2nd Lt.** ..... **M. R. C. 315th Inf.** .....  
(Rank), (Organization).

PLACE OF DEATH: .....

CAUSE OF DEATH: **Killed in action** .....

DATE OF BURIAL: **Oct. 2, 1918** .....

PLACE OF BURIAL: **Malancourt** .....

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

... **Argonne Special Map No. 48** .....

... **10.5-75.0** .....

GRAVE NUMBER: **98** .....

HOW MARKED: Name Peg? **yes** ..... Cross? **---** .....

Headboard? **---** ..... Bottle? **---** .....

IDENTIFICATION TAGS: .....

Was one buried with body? **yes** .....

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

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

**Malancourt (Museum)**

**177** DIST. **35 SE** ..... **E. 313.5** .....

NEAREST RELATIVE: ..... **N. 275** .....

ADDRESS: .....

RELATIONSHIP: .....

REPORTED BY: .....

**Chaplain R. V. Lancaster** .....  
(Signature and Rank of Reporting Officer).

MEMORANDUM

NOV 9 1918

896

177-896

Communal List No. \_\_\_\_\_

Daily Report No. \_\_\_\_\_

37885

**FILE**

5-27-21

(Date)

FORM 115 has been compiled on the following case:-

CEMETERY NO. 1232 SECTION 5-5-

FORM 115 Sheet No. 42

F.D.

(Initials)

OSP-SS  
Form No. 1011.