

G.R.S. Form #114 B

SEP 1 - 1926

11629

DATE 11/3/21

1. NAME Dame, Leo

SERIAL No. 2036973

RANK Pvt

ORGANIZATION Co. L. 115th Inf

& DIVISION 29

GRAVE LOCATION French Mil. Cty. Traubach-le-Haut (Alsace) 526

CTY. NAME

NUMBER

5

GRAVE

ROW

PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION

*Gr. # 5 per S. L. B. and office recs. Traubach le Haut Alsace # 526*

COORDINATES

E.452.38

N.96.61 Map Mulhouse S.W.101

*# 3 belongs to Dorsey, Joe. D. ret. to U.S.*

CONCENTRATED TO Dec. 7. 1920

5

DATE

GRAVE

ROW

PLOT

French Mil. Cty. Traubach le Haut

526

CEMETERY

CTY. NUMBER

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

Body buried in uniform and blanket. Tags found on grave marker and on body. Per GRS Form 16-A Dec. 7, 1920. Traubach le Haut, Alsace.

SUBSEQUENT REBURIALS

None

DATE OF DEATH Sept 1, 1918

STATE FROM WHICH HE CAME Mich.

MEDALS OR DECORATIONS AWARDED None found

SIGNATURE, AREA SUPERVISOR

Stanley J. Grogan  
STANLEY J. GROGAN, Capt. Inf. USA.

3. FINAL GRAVE LOCATION

11/3/21

4

24

G

DATE

GRAVE

ROW

Block 155

Robert C. Davis,

Major General

The Adjutant General

By C. L. C. 1926

SEP 8

1926

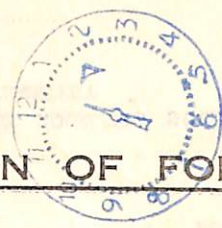
AUDITED BY 207 5-18-25

A. G. O. WORLD WAR DIV.

Meuse Argonne American Cemetery # 1232 Romagne sous Montcaumon

CEMETERY

RECEIVED  
GRAVES REGISTRATION SERVICE



SEP 7 11 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 I6, 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.



5020312

REPORT OF DISINTERMENT AND REBURIAL

Date Dec. 7, 1920

1. REMAINS OF Leo Dame. SERIAL NUMBER 2036973

RANK Pvt. ORGANIZATION Co. L. 115th Inf.

2. Disinterred (date): Dec. 7, 1920 From (give complete location): Grave #5, Cemetery #526

By: Group #3 Unit #2

3. Reburied (date): Dec. 7, 1920 In (give complete location): Grave #5, Cemetery #526

By: Group #6 Unit #3 Uniform, pine box and Nature of reburial wrapped in blanket.

4. Report as to nature of original burial and condition of body upon disinterment: Uniform and blanket Badly decomposed. Features not recognizable

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

(b) Other means of identification found upon disinterment, and general remarks: missing A-D

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

(a) Height (actual measurement) Impossible to estimate

(b) Weight (estimated) " " "

(c) Hair—Color None visible.

Quantity

Characteristics not empty

(d) Hair on face—Color

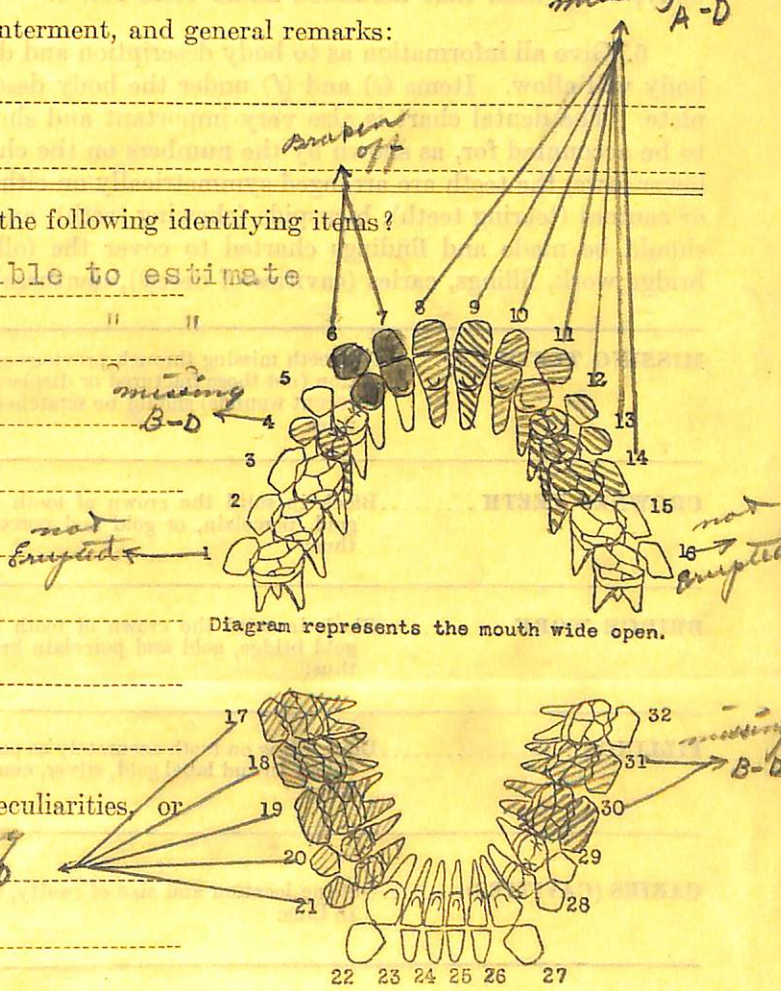
Location

Quantity

(e) Permanent marks on body (old scars, peculiarities, or

missing parts) missing B-D

(f) Wounds or missing parts (received at time of casualty) D-50664








7. Disinterment supervised by William James Approved: O B Bough (Title) major me

8. Reburial supervised by Harry E. Strong Approved: O B Bough (Title) major me

**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.

|  |  |
|--|--|
| <b>MISSING TEETH</b> .....All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus: |  <p align="center">TOOTH MISSING      TOOTH MISSING</p>  |
| <b>CROWNED TEETH</b> .....Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus:  |  <p align="center">GOLD CROWN      PORCELAIN CROWN</p>   |
| <b>BRIDGE WORK</b> .....Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:  |  <p align="center">GOLD AND PORCELAIN BRIDGE      GOLD BRIDGE</p>  |
| <b>FILLINGS</b> .....Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus:   |  <p align="center">SILVER FILLING      GOLD FILLING</p> <p align="center">GOLD FILLING      GOLD FILLING</p> |
| <b>CARIES (CAVITIES)</b> .....Outline location and size of cavity, shade in thus:  |  <p align="center">CAVITY DECAYED      DECAYED DECAYED</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."

3-7832

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.

V  
R

# GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

Name..... 2036973 ..... George ..... L. .....  
(Surname.) (Number.) (First Name and Initials.)

Private..... Co. "L"..... 115th..... Infantry.....  
(Rank.) (Organization.)

Date of Death: 1 Sept 18

DATE OF BURIAL... 2 Sept. 18.....

PLACE OF BURIAL Trambach le Haut, Alsace.....

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

GRAVE NUMBER.....

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 :

REPORTED BY :

A. C. Reynolds Chaplain, 115th Inf.....  
(Signature and Rank of Reporting Officer.)

This portion to be forwarded to Adj. Gen'l., G. H. Q., A. E. F.



CODE SLIP



| HEADING   | SUB-HEADING           | NO. OF COLS | CODE           |
|---|-----------------------|-------------|----------------|
| NAME  | <i>Dame, Les</i>      | 3           | 413            |
| BURIED  | CEMETERY <i>1232</i>  | 1           | 1              |
|   | GRAVE <i>4</i>        | 2           | 04             |
|   | ROW <i>24</i>         | 2           | 24             |
|   | BLOCK <i>8</i>        | 1           | 7              |
| STATE   | <i>Mich.</i>          | 2           | 26             |
| RANK  | <i>Pvt.</i>           | 1           | 3              |
| DIVISION  | <i>29</i>             | 2           | 29             |
| ORGANIZATION  | <i>115</i>            | 3           | 115            |
| ARM   | <i>Inf</i>            | 1           | 1              |
| MARITAL <i>(Adm.)</i>   | <i>20</i>             | 1           | 2 <i>(Adm)</i> |
| NAME  | <i>Eldredge, adda</i> | 3           |                |
| RESIDENCE<br><i>1-2-3 Masonic Temple<br/>Marquette, Mich.</i> | STATE                 | 2           |                |
|   | COUNTY                | 2           |                |
|   | CITY                  | 3           |                |
| RELATION <i>No Im<br/>No low</i>                              | <i>Mother</i>         | 1           | 1              |
| OTHER   |                       | 1           |                |
| ELIGIBILITY   | <i>Dead</i>           | 1           | 6              |
| NATIVITY  |                       | 1           |                |
| RACE  |                       | 1           |                |
| ENGLISH   |                       | 1           |                |
| ATTENDANT   |                       | 1           |                |
| HEALTH  |                       | 1           |                |
| NO. OF SONS   |                       | 1           |                |
| DATE OF   | MO.                   | 1           |                |
| . TRIP  | YR.                   | 1           |                |
| ACCEPTANCE<br>29/514/   |                       | 1           |                |

**AUDITED**

APR 22 1932

RB

RB

MILLER, ELDREDGE & ELDREDGE

ERT E. MILLER  
PH R. ELDREDGE  
A ELDREDGE

LAW OFFICE  
1-2-3 MASONIC TEMPLE  
MARQUETTE, MICHIGAN

May 4, 1932.

The Quartermaster General,  
Washington, D. C.

Dear Sir:-

Your letter QM 293 A-M Dame, Leo (MA).

Your letter of May 2, 1932, in the above matter, is  
at hand.

My file shows that Leo Dame was survived by a father;  
that his mother died before him. Our information does not show  
him to have been survived by a stepmother "or any woman who  
stood in loco parentis \* \* \*, etc." as in your letter.

I have, however, in my file a letter from Mrs. Mary  
Varney, Marquette, Mich., in which she states that she was his  
half-sister, and says: "No one would more intitle to the insur-  
ance than I. I spend my young life on them all. When mother  
died they were all very small."

Mrs. Varney's address in December, 1929, was care of  
Mr. Phaneuf, 619 W. Washington St., Marquette, Mich.

Yours very truly,

Miller Eldredge & Eldredge  
Adda Eldredge

AE:L

*HS / not a loss*



QM 293 A-M  
Dame, Leo (MA)

May 2, 1932

Mr. Adda Eldredge,  
1-2-3 Masonic Temple,  
Marquette, Michigan.

Dear Sir:

This office is making an earnest endeavor to communicate with all women who may be eligible to make a pilgrimage to the cemeteries of Europe under the provisions of the Act of March 2, 1929, as amended May 15, 1930.

It is therefore requested that you advise whether or not the late Private Leo Dame is survived by a stepmother or any woman who stood in loco parentis to him for a period of not less than five years prior to his reaching the age of eighteen, and if so, her name and address. It will be appreciated if you will also furnish the date of death of the mother of this late soldier.

A self-addressed envelope which requires no postage is enclosed for your convenience in replying.

For The Quartermaster General.

Very truly yours,

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

Enclosure:  
Envelope.

KK  
EM

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C  
Dane, Leo 1232 Adm

July 8, 1930

Mrs. Adda Eldredge  
1-2-3- Masonic Temple  
Marquette, Mich.

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

DATE 1/20/50

NAME DAME, Leo RANK Pvt. SERIAL 2036973 ORGANIZATION Co. L 115th Inf. DATE OF DEATH Sept. 1/18

STATE Michigan CTY. NO. #1252 GRAVE 4 ROW 24 BLOCK g

|         | <u>Check relationship</u>   | <u>Living</u> | <u>-</u> | <u>Deceased</u> |  |
|---------|---|---------------|----------|-----------------|--|
|         | MOTHER  | :             | :        | :               | <i>7c 46716</i><br><i>1/23 R</i><br><i>Admr of Estate</i><br><i>of Veteran -</i><br><i>Adda Eldredge</i><br><i>1-2-3-Masonic</i><br><hr/> <i>Temple</i><br><hr/> <i>Marquette</i><br><i>Mich</i> |
| NAME    | STEPMOTHER (For the year prior to commencement of service)              | :             | :        | :               |  |
| AND     | MOTHER THRU ADOPTION (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)   | :             | :        | :               |  |
|         | <i>single man</i>   | :             | :        | :               |  |
|         |   | :             | :        | :               |  |
|         |   | :             | :        | :               |  |
|         |   | :             | :        | :               |  |
|         |   | :             | :        | :               |  |

Veterans Bureau Claim Number 29/156/

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C  
Dame, Leo

June 29, 1929.

Mr. Peter Dame,  
423 W. Washington St.,  
Marquette, Mich.

*no relation indicated*

*Mr. Alphonse J.C. 46716  
Saurier, Peping B.M.  
Saurier, Manitoba, Canada*

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 Leo Dame, Co. L, 115th 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 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*

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

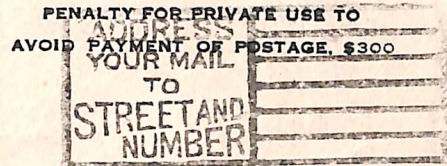
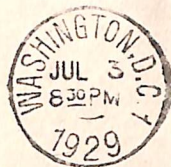


**WAR DEPARTMENT**

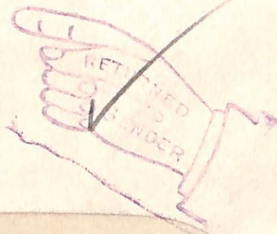
OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON, D. C.

**OFFICIAL BUSINESS**



*Enclosure*



QM 293 A-M  
Dame, Leo (MA)

May 2, 1932

Mr. Adda Eldredge,  
1-2-3 Masonic Temple,  
Marquette, Michigan.

Dear Sir:

This office is making an earnest endeavor to communicate with all women who may be eligible to make a pilgrimage to the cemeteries of Europe under the provisions of the Act of March 2, 1929, as amended May 15, 1930.

It is therefore requested that you advise whether or not the late Private Leo Dame is survived by a stepmother or any woman who stood in loco parentis to him for a period of not less than five years prior to his reaching the age of eighteen, and if so, her name and address. It will be appreciated if you will also furnish the date of death of the mother of this late soldier.

A A self-addressed envelope which requires no postage is enclosed for your convenience in replying.

For The Quartermaster General.

Very truly yours,

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

Enclosure:  
Envelope.

KK

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Dame, Leo 1232 Adm

July 8, 1930

Mrs. Adda Eldredge  
1-2-3- Masonic Temple  
Marquette, Mich.

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

Dame, Leo

June 29, 1929.

Mr. Peter Dame,  
423 W. Washington St.,  
Marquette, Mich.

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 Leo Dame, Co. L, 115th 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 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.

QM 293 A-C

IN REPLY REFER TO

DAME, Leo - Pvt.

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

January 21, 1924

Mr. Peter Dame,  
423 West Washington St.,  
Marquette, Mich.


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.



WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

WASHINGTON, D. C.

OFFICIAL BUSINESS

WASHINGTON, D.C. 5  
JAN 21  
4-AM  
1924

PENALTY FOR PRIVATE USE TO AVOID  
PAYMENT OF POSTAGE, \$300.  
REGISTER  
OR  
INSURE  
VALUABLE MAIL

RECEIVED  
FEB 4 11 1924  
N. & R. BRANCH  
O. O. M. O.

*Address unknown*

Mr. Peter Dame,

~~423 West Washington St.,~~

Marquette,

Mich.

MARQUETTE  
JAN 31  
9 PM  
MICH. 1924



MARQUETTE  
FEB 11  
1 PM  
MICH. 1924

RETURNED  
TO  
SENDER

RECEIVED  
O. O. M. O.  
SERVICE

GRAVES

Soldier's  Overseas  
Grave

Name DAME, Leo

Rank Private

Organization Company L, 115th Infantry

Grave No. 4 Row 24 Block G

Cemetery Meuse-Argonne American Cemetery

Location Romagne-sous-Montfaucon (Meuse), France

Dame,  
(Surname.)

Leo  
Christian name in full.)

2,036,973  
(Army serial number.)

Pvt.

Co L 115 Inf  
(Rank and organization.)

State your relationship to the deceased. Son

Do you desire the remains brought to the United States? No  
(Yes or no.)

If remains are brought to the United States, do you  
wish them interred in a national cemetery? }  
(Yes or no.)

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

(Name of person to receive remains.)

(Express office.)

(Telegraph office.)

(Number and street.)

(City or town.)

(State.)

(Sign here)

*Leo X Dame*

Marquette,  
Mich.

Witness:

(Number and street of rural route.)

(City, town, or post office.)

(State.)

Marquette Mich. March 25, 1919.

423 W. Washing  
St.

3-6713

*over*

Marquette, Mich., March 25, 1919.

Deebel  
a/c  
11-11-20

The Adjutant General  
War Dept., Washington. D.C.

Sir: Mrs Adelaire Buldric has nothing  
to do with the death of Leo Darné, therefore  
please address all correspondance relative  
to said deceased to:

423 W. Washington St.  
Marquette, Mich.

Yours truly,  
Edgar Darné,  
by [Signature]  
Notary Public

Drawn by [Signature]  
576-15  
10-11-20

My Commission expires August 29, 1919.  
Marquette Co.  
Mich.

QM 293 A-C  
DAME, Leo - Pvt.

January 21, 1924

Mr. Peter Dame,  
423 West Washington St.,  
Marquette, Mich.

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,

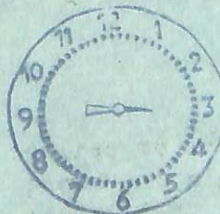
R. L. FOSTER

Assistant.

RD  
ZDX

1-Incl.  
Record card.

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



JAN 21 1924

B. O. C.

COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

File # 22335

(a) Name DAME, Leo Ser. No. 2036973
(b) Rank Pvt. Organization Co. I, 115th Inf.
(c) Date of death 9/1/18 (d) Cause of death DWRIA

TYP. EK
CKR.

10-1-21
Museum
Argonne 1234
10-26-21

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

(a) Grave No. 5 Row Plot Sec. TYP. EK
(b) Emerg. Address Mrs. Adaline Buldnic (sister) 517 Washington St., Marquette, Mich.

III. Files of soldiers dying from contagious diseases CKR.

IV. A. G. O. DISPOSITION CARD:

Date of receipt

(a) Name Peter Dame (b) Relationship (son)
(c) Address 423 W. Washington St., Marquette, Mich.
(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 mks Date 10-11, 1920.

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

dated
confirming request in Par. IV., item, above, or requesting that
no correspondence

Examiner's Initials mks Date 10-11, 1920.

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

No request for disposition

(a) Cancellation memos referred to?

Examiner's Initials Date 12-11, 1920.

COUNTRY France

CEMETERY No. 526

SHEET No. 15

Handwritten notes and signatures at bottom right.



REPORT OF DISINTERMENT AND REBURIAL

Date Sept. 6, 1921.

1. REMAINS OF DANE, Leo SERIAL NUMBER 2036973

RANK Pvt. ORGANIZATION Co. I, 115th Inf.

2. Disinterred (date): Sept. 6, 1921. From (give complete location): Gr. No. 5 French Military Cemetery # 526. Traubach-le-Haut (Alsace)

By: Group 1. Unit Sect. No. 4.

3. Reburied (date): Nov 3rd 1921 MeuseArgonne Cemetery # 1232 Gr 4 block G row 24 In (give complete location):

By: Group re-burial S Unit Nature of reburial unlined casket

4. Report as to nature of original burial and condition of body upon disinterment: Buried in wooden box in blanket. Body badly decomposed, recognition impossible.

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

(b) Other means of identification found upon disinterment, and general remarks: No effects found.

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

(a) Height (actual measurement) Unable to determine.

(b) Weight (estimated) Unable to determine.

(c) Hair—Color Unable to determine.

Quantity Unable to determine.

Characteristics Unable to determine.

(d) Hair on face—Color None.

Location None.

Quantity None.

(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.

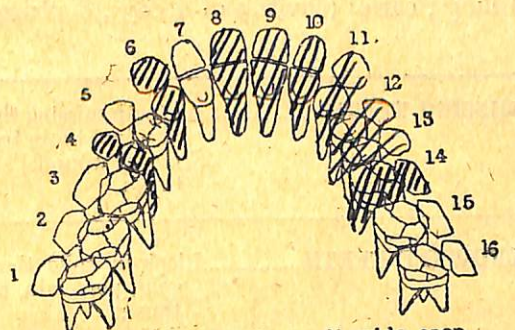
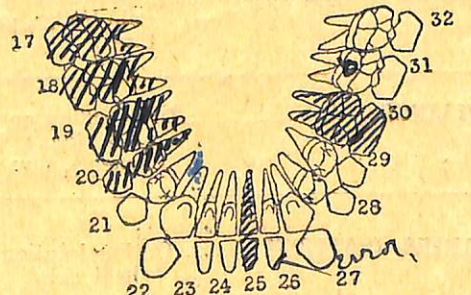


Diagram represents the mouth wide open.



No. 8, 9, 10, 25, M.A.D. No. 4, 6, 11, 12, 13, 14, 17, 18, 19, 20, 30, M.B.D. No. 1, 16, 32, not cut.

7. Disinterment supervised by W. R. ROBINSON.

Approved: G. J. BLAKE, Capt. Q.M.C. hjm.

8. Reburial supervised by A. U. Dufault

Approved: James W. Younger, Capt QMC

## 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 :



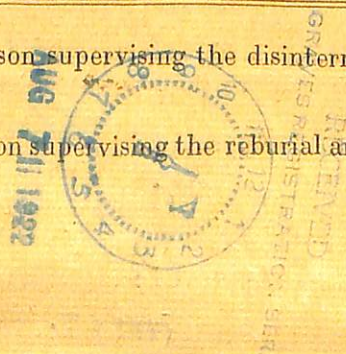
**CARIES (CAVITIES)**.....Outline location and size of cavity, shade in thus :



**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 Sept. 6, 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 Dame, Leo

10. Name

2. No. 2036973

11. No.

3. Rank Pvt.

12. Rank

4. Org. Co. L. 115th Inf

13. Org.

5. D.D. 9. 1.18

14. (a) D.D.

6. C.D. DOW

(b) D.B. None.

Discrepancy found upon disinterment

7. Grave No. 5 Sec.

15. Grave No. 5 Sec. 5

8. Plot Row

16. Plot Row

9.

17. None.

18. Cemetery French Military

19. Commune or town Traubach-le-Haut

20. Dept. or County Alsace

21. Country France

22. G.R.S. Hdqrs. Code No. 526

23. Disinterred (Date) Sept. 6, 1921.

By W. R. Tomlinson.

24. Inscription on grave marker:

Name Dame, Leo

Serial No. 2036973

Rank Pvt.

Organization Co. L, 115th, Inf, Gr. 5

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

Thos. A. Pace  
Signature Junior Technical Assistant

THOS APACE.

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).

No effects found. Form 16a accomplished. Reburial record on body.

27. Condition of body Badly decomposed, recognition impossible.

28. Nature of burial Buried in wooden box and in blanket.

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? No.

30. Body prepared and placed in casket: Date Sept. 6, 1921. By W. R. Tomlinson.

31. Casket sealed by W. R. Tomlinson.

Signature of Embalmer, (Supervisor) W. R. Tomlinson  
W. R. TOMLINSON.

AUDITED BY



SHIPMENT. (Show actual marking of box) Box No. C.4837

32. Designation of body:

Name Dame, Leo Serial No. 2036973

Rank Pvt Organization Co.L.115th Inf

33. Consigned to:

Name of Permanent Cemetery Argonne Amer. Cty #1232 Romagne-sous-Montfaucon

34. Casket boxed and marked (Date) Sept. 6, 1921. By W. R. Tomlinson.

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 C. J. BLAKE, Capt. Q.M.C. bjm.

36. Remarks

37. Shipped from point of Operation: (Date) Sept. 6, 1921.

To point of Concentration Belfort (Terr. de Belfort)

(Name) Convoyer Signature Shipping Officer Capt. G.H.C.

38. Received at Railhead or Point of Concentration: Date

By G.R.S. Representative

39. Shipped from Railhead or Point of Concentration: Date Sept. 17, 1921.

To Permanent Cemetery Romagne-sous-Montfaucon (Meuse)

(Name) Convoyer RAY HALL. Signature Shipping Officer W. R. BUCKLEY, Capt. Q.M.C.

40. Received: Date Sept 21, 1921.

G.R.S. Representative Meuse Argonne Cemetery # 1232

41. Reinterred Nov 3rd 1921

(Date)

42. Grave No. 4 Section

43. block G Row 24

FR

G.R.S. Representative James W. Younger, Capt QMC.

jt.

# GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

Name 2036973 George L.  
(Surname) (Number) (First Name and Initials.)

Private Co. "L" 115th Infantry  
(Rank) (Organization.)

Date of Death: 1 Sept 18  
DATE OF BURIAL 2 Sept. 18

PLACE OF BURIAL Traubach le Haut, Alsace

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

French Military Cemetery

Traubach Le Haut

GRAVE NUMBER 5 American Plot

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:

From Lt Bissel

526

28 SEP 1918

REPORTED BY:

F. C. Reynolds Chaplain, 115th Inf.  
(Signature and Rank of Reporting Officer.)

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

WAR DEPARTMENT

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

NOV 8 1920

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

To: Mr. Peter Dame, 423 W. Washington St. Marquette, Mich.

SUBJECT: Remains of Pvt. Leo Dame, Ser. No. 2036973,  
Co. L. 115th Inf.  
The records of this office show that you have requested that his body remain in Europe.

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

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

By authority of the Quartermaster General.

CHARLES C. PIERCE,  
Major, U. S. A.

If all blank spaces below are not filled out, it will necessitate a return of this paper and a **SERIOUS DELAY** in the shipment of this body. State in each case WHETHER these relatives are STILL LIVING.

| NAME OF—                                    | NO. AND STREET. | TOWN. | STATE. |
|---|-----------------|-------|--------|
| <b>Was soldier married?</b>                 |                 |       |        |
| Soldier's widow                             |                 |       |        |
| Soldier's children.<br>(Name oldest first.) | 1               |       |        |
|   | 2               |       |        |
|   | 3               |       |        |
| Father                                      |                 |       |        |
| Mother                                      |                 |       |        |
| Brothers.<br>(Name oldest first.)           | 1               |       |        |
|   | 2               |       |        |
|   | 3               |       |        |
| Sisters.<br>(Name oldest first.)            | 1               |       |        |
|   | 2               |       |        |
|   | 3               |       |        |

Date \_\_\_\_\_ Signature \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_

IMPORTANT.—CAREFULLY read instructions before filling out this paper.

Address \_\_\_\_\_, 1920.

I, the undersigned, am the \_\_\_\_\_ and nearest living relative of the within-named  
(Relationship.)

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

1. As stated on first page of this sheet.
2. To be returned to the U. S. and shipped to \_\_\_\_\_  
(Name.)  
\_\_\_\_\_ (R. R. station.) \_\_\_\_\_ (State.)
3. To be returned to the U. S. and buried in \_\_\_\_\_ National Cemetery.
4. To remain in Europe, for burial in a permanent American Cemetery.

Signature \_\_\_\_\_

**INSTRUCTIONS FOR FILLING OUT.**

1. If definite instruction as to the disposition of a body are not received from the nearest relative within two weeks of its arrival at New York, burial will be made without further notice in the World War Section of Arlington National Cemetery.
2. The transfer of bodies will be made ENTIRELY at Government expense.
3. This paper MUST BE SIGNED BY THE PERSON WHO IS THE NEXT OF KIN IN THE ORDER shown in the square on the other side of this sheet.
4. This paper must be returned showing the name and address of each of the nearest living relatives in the spaces provided therefor on the other side of this sheet.
5. If there are minor children of the deceased soldier and no widow, the LEGALLY APPOINTED GUARDIAN of the children should ascertain their wishes and act for them in this matter.
6. If YOU are not the nearest relative, please ask the nearest relative, if living near you, to fill out this paper.
7. 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.
8. You are requested to return this paper AT ONCE in order to avoid delay in the case of this body.
9. Use the inclosed envelope—pay no postage.

WASHINGTON  
CHIEF REGISTRATION SERVICE  
OFFICE OF THE GOVERNMENT GENERAL OF THE ARMY  
WAR DEPARTMENT

3-7860  
NOV 8 1920

RECEIVED  
AUG 2 1921

COMPILATION OF DISPOSITION OF REMAINS DATA

File # 22335

*Dec 115-  
11-11-20*

I. LOCATION INDEX CARD: **DAME, Leo** **2036973**

(a) Name **Pvt.** Ser. No. **Co. L, 115th Inf.** TYP **EK**  
 (b) Rank **about** Organization **9/1/18** Cause of death **DWRIA** **AB**  
 (c) Date of death

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

(a) Grave No. Row **Mrs. Adaline Buldnic** (sister) **517 Washington St.,** TYP **EK**  
 (b) Emerg. Address **Marquette, Mich.**

III. Files of soldiers dying from contagious diseases **NO CARD** CKR **AB**

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

*A. G. O. Card - Peter Dame (son) 423 W. Washington St. Marquette, Mich. requests body be not returned to U.S. MB 11-2-20*

V. Following advice forwarded to Europe by (cable on **192**) (Letter of transmittal on **11-1-1920**)

*Par. 2. not to be returned. MB 11-2-20*

VI. Form 115 forwarded to G.R.S. Hoboken, N.J. **NOV 3 1920** 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

*11-3-20*