

279

G.R.S. Form #114-B

To The A. G. O.

2345

FULL NAME *DECITIO, Alesandro* JAN 7 - 1926

RANK *Private* SERIAL *1239231*

DIVISION & ORGANIZATION *M.G. Co., 110th Infantry* *28 Div*

DATE OF DEATH *July 15, 1918*

STATE FROM WHICH HE CAME *N.J.*

MEDALS OR DECORATIONS AWARDED *none found.*

| FINAL GRAVE LOCATION | 24 | 25 | B |
|----------------------|-------|-----|-------|
| Date | Grave | Row | Block |

608

Cemetery

23/306/ARK

CRS

3 A.G.O.
 JAN 8 1926
 HEADQUARTERS DIV.

AUDITED BY
228 & 4-11

1 2 3 4 5 6 7 8 9 10 11 12
JAN 9 26
M. & R. BRANCH
O. Q. M. G.
13 14 15 16 17 18 19 20 21 22

GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

De Getio, 1239231, Alessandro
(Surname.) (Number.) (First Name and Initials.)

1st Cl. Private, M. G. Co., 110th Inf.
(Rank.) (Organization.)

DATE OF BURIAL *July 15, 1918*

PLACE OF BURIAL *In field*

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

Map - Conde-en-Brie 20,000

Location near Confremaux

Map Co-ordination - 193.42 - 252.54

GRAVE NUMBER *three (3)*

HOW MARKED : Name Peg? *Yes* Cross? *No*

Headboard? *No* Bottle? *yes*

IDENTIFICATION TAGS : *Two*

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 :

Joseph L. N. Wolfe 1st Lt & Chaplain
(Signature and Rank of Reporting Officer.)

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

RECEIVED
STATISTICAL DIVISION

27 JUL 1918

Received
JUL 27 1918

Co. M.G., 110 th Inf.
28 th Div.

DE GITIO, Alessandro - P.F.C. 123923I

Pvt. Alessandro de Gitio was killed by a shell on July 15, 1918, near Conde en Brie, France. He was found dead with six others in a dugout on which a direct hit was made. Death was probably instantaneous. He was buried on afternoon of July 15, 1918, near Conde en Brie - France.

Informant: Lirrangì, Lorengo - Pvt. 1239212
Co. M.G. - 110 th Inf.
Home : 1039 So. 8th St. Philadelphia Pa.
Feb. 19, 1919.

Searcher : William B. Harney - 2nd Lieut.
110 th Inf.

M.S.

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

The Quartermaster General desires you to be informed that the investigations which are being conducted with a view towards locating the graves of the Unlocated World War Dead, are proving successful in many cases where sufficient identifying marks can be secured. To assist in the investigation work, it will be appreciated if you will secure, if possible, a chart from the dentist who may have performed dental work for the soldier named above, prior to enlistment. The chart should include crowns, fillings, bridges, and extractions, if any. Should you be unable to obtain a chart, kindly report which teeth you recall crowned or filled.

Any information, sketches or descriptions which you may have received from comrades or officers, regarding the death and burial of this soldier, or which you may now secure from the Local Legion Post, may be of valuable aid in locating his grave, and it will be appreciated if you will forward same to this office.

You may be assured that everything possible will be done by the Department to bring the case to a successful conclusion.

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

Very truly yours,

1 incl.
envelope.

25/256/EYS

Place Seringes
Date June 5, 19

REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name: ^{an} Alexandro Degitto

Number: 1239231

Rank: Pvt. 1cl1

Organization:

MG. Co. 110th. Inf.

Disinterment and Reburial made by Group Unit 304

Disinterred (Date) June 5, 19 From: (Give complete location)

Grave # 3 Comm. of Courboin. Map #49 Meaux NE. 252.4N-193.6E

Reburied (Date) June 5, 19 in: (Give complete location) 608

Grave #4 Section B Plot #1. Cemetery #608 Seringes et Mesles (Aisne)

Map #33 Soissons. SE. 275.4N-195.25E

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

Buried 4 feet deep--- Body badly decomposed.

Was one identification tag found upon the body? None--One on cross

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

Note:

If upon disinterment, effects are found upon the bodies, they will be promptly sent to the Effects Depot direct, as is required by G.O. 170, G.H.Q., 1918, after being carefully examined for clues to identity in doubtful cases, notation whereof will be made and reported to Chief, Graves Registration Service.

Supervised by: C.E. Wise.

1st. Lt. Oscar W. Forsberg.

304

C.O. Group Unit

11745

CO FIRMED N° D

REPORT OF INVESTIGATION AND SURVEILLANCE

Remains of:
Name: [illegible]
Rank: [illegible]
Organization: [illegible]
District and Division: [illegible]
Date: [illegible]
Graves & Sons of [illegible]

Reported (Date): [illegible]
In: (City: [illegible])

[illegible text]

Report as to nature of original [illegible]
Investigation: [illegible]

Was one identification [illegible]
What other means of identification were [illegible]

[illegible text]



✓

CODE SLIP

| HEADING | SUB-HEADING | NO. OF COLS | CODE |
|--------------|---------------|-------------|------|
| NAME | Degitio | 3 | 457 |
| BURIED | CEMETERY 608 | 1 | 2 |
| | GRAVE 24 | 2 | 24 |
| | ROW 25 | 2 | 25 |
| | BLOCK B | 1 | 2 |
| STATE | 78 | 2 | 25 |
| RANK | Pvt 1/c | 1 | 2 |
| DIVISION | 28 | 2 | 28 |
| ORGANIZATION | 110 | 3 | 110 |
| ARM | Eng | 1 | 1 |
| MARITAL | No | 1 | 2 |
| NAME | Di Egidio | 3 | 495 |
| RESIDENCE | STATE | 2 | |
| | COUNTY | 2 | |
| | CITY | 3 | |
| RELATION | Nester | 1 | 1 |
| OTHER | | 1 | |
| ELIGIBILITY | Real (1917) | 1 | 6 |
| NATIVITY | | 1 | |
| RACE | | 1 | |
| ENGLISH | | 1 | |
| ATTENDANT | | 1 | |
| HEALTH | | 1 | |
| NO. OF SONS | | 1 | |
| DATE OF TRIP | MO. | 1 | |
| | YR. | 1 | |
| ACCEPTANCE | Country Italy | 1 | 01 |

(Burdick)

Audited
 MAR 29 1932
 DMB

la

608

C 34696

Legittio, Alessandro, Pvt. 110th Inf. 1st G. Co.

Single

Brother in Italy

Mother died 1917

Father died 12-14-21

S.M. ^P no record

MB

tm

Bro + adm.

Giuseppe Di Egidio fu Stanislas

Mosciano Sant Angelo

Pvor Tramo

Italy

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

DATE 8-26-31

NAME RANK SERIAL ORGANIZATION DATE OF DEATH
Degitto, Alesandro Pvt. 1cl. 1239231 MG Co., 110th Inf. 7-15-18

STATE CTY. NO. 608 GRAVE 24 ROW 25 BLOCK B

| | <u>Check relationship</u> | <u>Living - Deceased</u> | |
|---------|---|--------------------------|-------------------|
| | <u>MOTHER</u> | : : ✓ : | |
| | | : : 1917 : | |
| | STEMOTHER (For the year prior to commencement of service) | : : : : | |
| NAME | MOTHER THRU ADOPTION | : : : : | Royal Practor of |
| AND | (For the year prior to commencement of service) | : : : : | Giulianova |
| ADDRESS | | : : : : | adm. of Estate of |
| | MOTHER IN LOCO PARENTIS | : : : : | Father + Benef. |
| | (For the year prior to commencement of service) | : : : : | Giulianova |
| | <u>WIDOW</u> | : : : : | Prov. of Teramo |
| | (Who has not remarried) | : : : : | Italy |
| | <u>single man</u> | : : : : | |

Veterans Bureau Claim Number C 34696
29/156

9/1 ✓

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

DATE 7-20-29

| NAME | RANK | SERIAL | ORGANIZATION | DATE OF DEATH |
|--------------------|------------|---------|---------------------|---------------|
| DEGITIO, Alesandro | Pvt. 1/cl. | 1239231 | M.G.Co., 110th Inf. | 7-15-18 |

| STATE | CTY. NO. | GRAVE | ROT | BLOCK |
|-------|----------|-------|-----|-------|
| | 608 | 24 | 25 | B |

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

C-34696
7-26-29

Brother
Giuseppe di Egidio fu
Stanislao,
Mosciano S. Angelo,
Prov. of Teramo,
Italy.

Veterans Bureau Claim Number _____
29/156

B
QM 295 A-G
Degitio, Alexandro

March 5, 1929.

~~X~~
SUBJECT: Discrepancy in Records.

TO: The Chief, American Graves Registration Service, Q.M.C., in
Europe, 29 rue Molitor, Paris, France.

1. It is requested the records and Organization Directories be adjusted in the case of Alexandro Degitio, 1239231, Private, Machine Gun Company, 110th Infantry, interred in Grave 24, Row 25, Block B, Oise-Aisne American Cemetery, to show the name as ~~A~~lesandro Degitio, the rank as Private, first class.

For The Quartermaster General:

J. McCLINTOCK,
Major, Q. M. Corps,
Assistant.

LEB

Q.M.C. DIV.
MAR 5 PM 2 59
DISPATCHED

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

QM 293 A-C

DEGITIO, Alesandro - Pvt.

November 5, 1925

Mr. Stanley Degitio,
Musciano,
Teramo, Italy.

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 overseas military cemetery is to be maintained by the United States for all time. The graves will be permanently marked by white headstones inscribed with the name, rank, division, organization, date of soldier's death and State from which he came. Headstones will be placed at all graves, as soon as possible, and without necessity 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 by those who performed this sacred duty. For the future, these graves will be perpetually maintained by the Government in a manner befitting the last resting place of our heroes.

Very truly yours,

1 Incl.
Record card.

L. W. REDINGTON,
Major, Q.M.G.,
Assistant.

RD
LRL

25/560/EYS



GRAVE LOCATION FORM.

LOCATION OF THE GRAVE OF

CONFIRMED

DeGittio 123923 Alexander
(Surname.) (Number.) (First Name and Initials.)

Private M.G.Co., 110th Inf.
(Rank.) (Organization.)

Date of death: July 15, 1918.

DATE OF BURIAL July 15, 1918

PLACE OF BURIAL Near Coufremaux, France.

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

Sketch showing location attached.

Conde-en-Brie map 1:20000 of

July 9/18, Sketch No. 7.

GRAVE NUMBER

362

HOW MARKED: Name Peg? Yes. Cross? Yes.

Head board? 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:

#62 (Hisne)
Cmme. Courboin 49 NE.

CONFIRMED

E 193.35 - 11252.55

REPORTED BY:

Clinton M. Cameron

and Lt. F.A.N.G. Adv. Gr. #1-304-CRS.

(Signature and Rank of Reporting Officer.)

ortion to be sent to Chief of Graves Registration Service.

30 AOU Reg

GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

De Gitio 1239231 Alessandra
(Surname.) (Number.) (First Name and Initials.)

1st Cl. Private, M.G. Co., 110th Inf.
(Rank.) (Organization)

DATE OF BURIAL *July 15, 1918*

PLACE OF BURIAL *In field.*

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

Map - Conde-en-Brie 20,000.

Location near Confremaux

Map Co-ordination - 19342 - 252,54

GRAVE NUMBER *three (3)*

HOW MARKED: Name Peg? *yes* Cross? *no*

Headboard? *no* Bottle? *yes*

IDENTIFICATION TAGS: *Two*

Was one buried with body? *yes*

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

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

REPORTED BY:

Joseph L. N. Wolfe, 1st Lt & Chaplain
(Signature and Rank of Reporting Officer)

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

GRAVE LOCATION BOOK

12367

LOCATION OF THE GRAVE OF

Debitie, 1239231 11es. 110
(Surname), (Number), (First Name and Initials).

Pvt. M.G.Co. 110th Inf.
(Rank), (Organization).

PLACE OF DEATH: *As of Conde en Brie*

CAUSE OF DEATH: *Shell striking dug-out*

DATE OF BURIAL: *July 15th 1918*

PLACE OF BURIAL: *As of Conde en Brie*

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

*Buried with six others in separate
graves S. of Conde en Brie France*

GRAVE NUMBER:

HOW MARKED: Name Peg? Cross? *Yes*

Headboard? Bottle?

IDENTIFICATION TAGS: *Yes*

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? *(Aisne)*

CMMR. Conde-en-Brie

134 SHT 49 NE COORD

ADDRESS:

RELATIONSHIP:

REPORTED BY: *Yves Horner Capt 110th Inf*
(Signature and Rank of Reporting Officer).

RECEIVED
MAR 26 1919
O. C. G. M.
G. R. S.

RECEIVED
APR 10 1919
O. C. G. M.
G. R. S.

G.R.S. FORM NO. 12

GENERAL HEADQUARTERS
AMERICAN EXPEDITIONARY FORCES
ADJUTANT GENERAL'S OFFICE.

FROM : ADJUTANT GENERAL.

TO : C. O. M.G.Co., 110th. Inf.

SUBJECT : Information for burial Register.

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

By Command of General Pershing:

Robert C. Davis
Adjutant General.

Note:

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

Nearest relative of deceased:

Relationship: _____

Address: _____

Hog...
...
...
...
...



Communal List No. 134-2388
Daily Report No. _____



1239231

Name De Gitis, Alexander

Rank Prvt Co. M. Y. {Corps 110 Regt. tho}

Date of Death 7/15/18

Place

Cause K in A.

Date of Burial 7/15/18

Grave No. Isolated

3 kilo. east of Courboin (Main)

Cemetery Graves in field 30 ft north of road

Identified by { Tag }
 { Papers }
 { Clothing }

List of Effects

CMATE

(C-)SIIT. COORD

Field Record Made by

Group # 2

Company 303, Graves Registration Service

3 Div Hdqrs

For additional data use reverse side

- 4 AOU Rcu

1239231

C 16

copy

Harlow - C. W.

CIMITERIAL DIVISION
OVERSEAS PROJECT SUB-SECTION

NAME OF DECEASED SOLDIER

CEMETERY NO.

DATE

Degitio, Alessandro, Pvt.

608 - 751

Dec. 15, 1920

SERIAL NUMBER

ORGANIZATION

ADJUSTMENT MADE

1239231

M. G. Co. 110th Inf.

Date of death - 7-15-18

FEB 16 1921

WAR RISK INSURANCE INFORMATION

FILE

12367

Original attached to F 1157

DATE

2-2-21

g.c.

NAME OF BENEFICIARY

RELATIONSHIP

Mr Stanley De Gitis

Father

Address

Musciano, Isernia, Italy

S-709/MB

A.

B

Place CTY 608

Date 4.28.21

REPORT OF DISINTERMENT AND REBURIAL

1. REMAINS OF DEGITIO, ALEXANDRO SERIAL NUMBER 1239231

RANK pvt ORGANIZATION M.G.CO. 110th Inf.

2. Disinterred (date): 4.28.21 From (give complete location): Gr 24 Sect B Plot 1

By: Group BOSSE Unit FIELD SECTION # 7

3. Reburied (date): 4.28.21 In (give complete location): Gr 24 Sect B Plot 1

By: Group BOSSE Unit FIELD SECTION # 7 Nature of reburial BURLAP & WOODEN BOX

4. Report as to nature of original burial and condition of body upon disinterment: BADLY DECOMPOSED. FEATURES UNRECOGNIZABLE

U.S. UNIFORM? BURLAP AND PINE BOX.

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

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

DISC ON BODY COMPLETELY CORRODED. DISC ON MARKER READ "ALEXANDER FOR FIRST NAME"

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

(a) Height (actual measurement) _____

(b) Weight (estimated) _____

(c) Hair—Color _____

Quantity _____

Characteristics _____

(d) Hair on face—Color _____

Location _____

Quantity _____

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

IMPOSSIBLE TO DETERMINE

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

FRACTURES: Right shoulder blade; right humerus; radial and ulna, right and left legs completely shattered above and below knees.

7. Disinterment supervised by HARRY V. BOSSE Approved: H.S. HARPOLE. 1st LT. QMC.

(Title) _____

8. Reburial supervised by HARRY V. BOSSE Approved: H.S. HARPOLE. 1st LT. QMC.

(Title) _____

wdw. fh

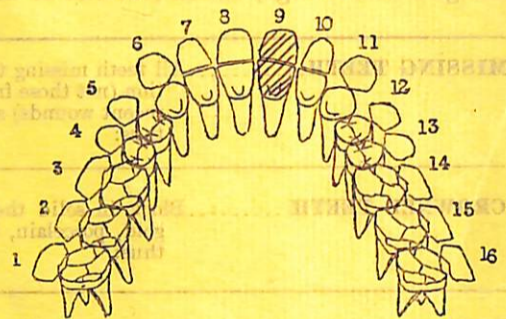
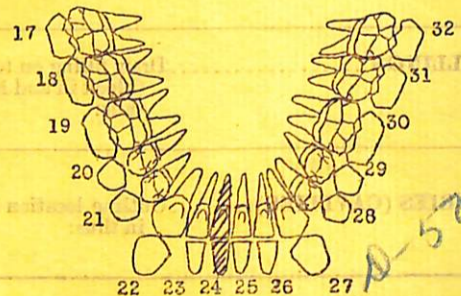


Diagram represents the mouth wide open.



9, broken off. 24, mis. a. d.






D-57989

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."

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.



HEADQUARTERS
CEMETERY DIVISION

STATION Seringes-et-Nesles, Aisne

To be prepared in triplicate.

DATE January 21, 1928

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 DEGITIO, Alexandro

10. Name

2. No. 1239231

11. No.

3. Rank Pvt. 1/cl.

12. Rank

4. Org. M.G. Co. 110th Inf.

13. Org.

5. D.D. July 15, 1918

14. (a) D.D.

6. C.D. K.I.A.

(b) D.B.

Discrepancy found upon disinterment

7. Grave No. 24 Sec.

15. Grave No. Sec.

8. Plot Block B Row 25

16. Plot Row

9.

17.

18. Cemetery Oise-Aisne

19. Commune or town Seringe-et-Nesles

20. Dept. or County Aisne

21. Country France

22. G.R.S. Hdqrs. Code No. 608

23. Disinterred (Date) January 21, 1928 By P. N. McCabe

24. Inscription on grave marker:

Name DEGITIO, Alexandro

Serial No. 1239231

Rank Pvt.

Organization M.G. Co. 110th Inf.

25. Was identification disc found on grave marker? no On body? yes

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).

27. Condition of body

28. Nature of burial Pine box and burlap

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above?

30. Body prepared and placed in casket: Date January 21, 1928 By P. N. McCabe

31. Casket sealed by P. N. McCabe

Signature of Embalmer, (Supervisor)

P. N. McCabe

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

32. Designation of body:

Name DEGITIO, Alexandro Serial No. 1239231

Rank Pvt. Organization M.G. Co. 110th Inf.

33. Consigned to:

Name of Permanent Cemetery Oise-Aisne Cty., Seringes-et-Nesles, Aisne

34. Casket boxed and marked (Date) January 21, 1928 By C. E. Spahn

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. E. Spahn

36. Remarks

37. Shipped from point of Operation: (Date) _____

To point of Concentration _____ (Name)

Convoyer _____ Signature Shipping Officer _____

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 January 21, 1928, Oise-Aisne American Cty. (Date)

42. Grave No. 24 Section _____

43. Plot Block B Row 25

G.R.S. Representative William E. Moore
William E. Moore, Superintendent

REPORT OF DISINTERMENT AND REBURIAL

Place Oise-Aisne Cty. 608.

Date January 21, 1928.

1. REMAINS OF DEGITIO, Alexandro SERIAL NUMBER 1239231

RANK Pvt. ORGANIZATION M.G.Co., 110th Inf.

2. Disinterred (date): January 21, 1928 From (give complete location): XXXX
Grave 24, Block B, Row 25

By: Group Cty. Unit _____

3. Reburied (date): January 21, 1928 In (give complete location):
Grave 24, Block B, Row 25

By: Group _____ Unit _____ Nature of Reburial Casket

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

Pine box & burlap

5. (a) Identification tags: Buried with body? T.O.B. On grave marker? Pl. Strip.

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

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

(a) Height (actual measurement) _____

(b) Weight (estimated) _____

(c) Hair—Color _____

Quantity _____

Characteristics _____

(d) Hair on face—Color _____

Location _____

Quantity _____

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

or missing parts) _____

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

~~Right femur missing~~ **Right femur missing. Left tibia and right tibia shattered. Right and left fibula missing. Right humerus fractured middle thigh. Left radius and pelvis missing. Left femur fractured upper third.**

7. Disinterment supervised by [Signature]

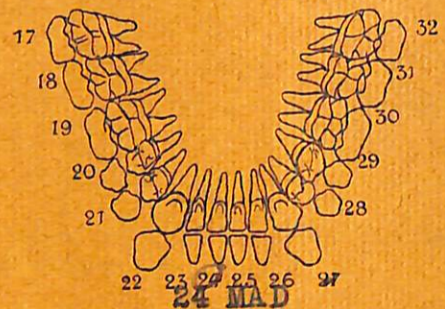
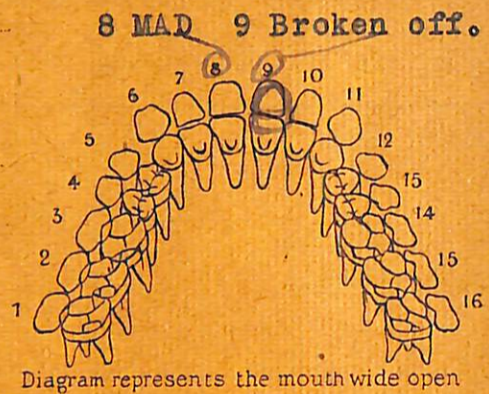
Approved: [Signature]

(Title) _____

8. Reburial supervised by [Signature]

Approved: [Signature]

(Title) _____



INSTRUCTIONS FOR THE PROPER COMPLETION OF G. R. S. FORM NO. 16-A

Enter information, as noted below, on reverse side of sheet in the *corresponding numbered space*. This form is supplemental to and is to be forwarded with G. R. S. Form 1-a, reporting reburial locations. To be used in answer to Question 26, Form 114, in case no means of identification on body.

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.
2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.
3. Give date and accurate information as to location of reburial and the group and unit which made reburial, and how reburial was made—in casket, wooden box, etc.
4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried—in a casket, box, burlap, etc. This statement should be as complete as possible.

5. (a) State whether identification tags were found buried with body and on grave marker by reporting "Yes" or "No".

(b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying the body, other than that tabulated under Item No 6.

6 Give all information as to body description and dental chart as nearly correctly as the condition of the body will allow. Items (e) and (f) under the body description are very important and should be very complete. The dental chart is also very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

MISSING TEETH

All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus:



CROWNED TEETH

Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus:



BRIDGE WORK

Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge) thus:



FILLINGS

Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus:



CARIES (CAVITIES)

Outline location and size of cavity, shade in thus:



DENTURES (PLATES)

Draw diagram of relative size and shape of plate block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp"

7. Show name of person supervising the disinterment and the name and title of the person approving same.

8. Show name of person supervising the reburial and the name and title of the person approving same.

COMPILATION OF DISPOSITION OF REMAINS DATA

File #12367

I. LOCATION INDEX CARD:

(a) Name DEGITIO, Alesandro Ser. No. 1239231 TYP. DMA
(b) Rank Pvt. Organization M.G.Co., 110th Infantry CKR. 14
(c) Date of death 7/15/18 (d) Cause of death K/A

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

(a) Grave No. 24 Row ----- Plot 1 Sec. B TYP. DMA
(b) Emerg. Address Mr. Stanley Degitio (father) Muscano, Teramo, Italy. (over)

III. Files of soldiers dying from contagious diseases ----- CKR. 14

IV. A. G. O. DISPOSITION CARD:

Date of receipt ----- no card in file 12-14 PF

(a) Name ----- (b) Relationship -----
(c) Address -----
(d) Remains to be brought to U. S.? -----
(e) To be interred in National Cemetery in U. S. at -----
(f) Shipping instructions upon arrival of body in U. S. -----
(g) Disposition instructions if not brought to U. S. -----

Examiner's Initials ----- Date -----, 1920.

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

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

Examiner's Initials PF Date 12-14, 1920.

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

No request for disposition
(a) Cancellation memos referred to? -----

Examiner's Initials E.M. Date 12/15, 1920.

COUNTRY FRANCE CEMETERY No. 608 SHEET No. 751

Handwritten notes and signatures at the bottom right of the page.

VII. G. R. S. Form No. 114 made _____, 1920.

Typed by _____, Checked by _____, 1920.

VIII. FINAL ACTION:

Following advice forwarded to Europe by { cable on _____, 1920
letter on **JAN 15 1921**, 1920

PARAGRAPH 2 - NOT TO BE RETURNED

Alan

IX.

CORRECTIONS

| CHANGE OF ADVICE. | ACTION TAKEN. |
|-----------------------------|---------------|
| Desires body be _____ | |
| Body to be shipped to _____ | |
| _____ | |
| _____ | |
| _____ | |

X. SUSPENSION REMARKS: *B.A.W.R - Mr Stanley De Gitis. (Father)
Muscianno, Teramo, Italy. 2-2-21 "g.c."*

USNY
AGS

OFFICE OF SERVICE DIVISION

