

To The A. G. O.

G.R.S. Form #114-B

FEB 6 - 1926

603

FULL NAME..... DEMETRION, Plato H. ✓

RANK..... Private ✓ SERIAL..... 2671085 ✓

DIVISION & ORGANIZATION..... Company I, 107th Infantry ✓

DATE OF DEATH..... Oct 13, 1918 ✓

STATE FROM WHICH HE CAME..... ny ✓

MEDALS OR DECORATIONS AWARDED..... none ✓

FINAL GRAVE LOCATION..... 24 15 58 12 D

| | | | |
|----------|-------|-----|-------|
| Date | Grave | Row | Block |
| | 636 | | |
| Cemetery | | | |

Port O. Davis,
Major General,
The Adjutant General,
Br.

4
FEB 8 A.G.O.
1926
WORLD WAR DIV.

24/292/EYS

AUDITED FEB 9 1926
282 3-24-25
MAR 24 1926

906

4
FEB 8 1926
A.G.O.
WORLD WAR DIV.

U.S. DEPARTMENT OF THE ARMY
FEB 10 26
M. & R. BRANCH
O. O. M. G.

Place Bony, Aisne.

REPORT OF DISINTERMENT AND REBURIAL

Date November 30, 1920.

1. REMAINS OF Plato H. DEMETRION SERIAL NUMBER 2671085

RANK Private ORGANIZATION Co. I. 107th Infantry

2. Disinterred (date): 11/18/20 From (give complete location): British Map
Reference 57B. W 13.d.9.5.

By: Group Labor Group Unit Area #3, AMiens, Somme.

3. Reburied (date): 11/18/20 In (give complete location): Grave 107, Row 5,
Plot I, American Military Cemetery, Bony, Aisne.

By: Group Labor Group Unit Area #3, Nature of reburial in coffin

4. Report as to nature of original burial and condition of body upon disinterment:
Buried in uniform in burlap. body in poor condition.

5. (a) Identification tags: Buried with body? yes On grave marker? no

(b) Other means of identification found upon disinterment, and general remarks:
Pocket book found on body marked "PLATO DEMETRION, Wilson Lodge No. 679.
B. of R. Jersey City, N.J." Two Collar Ornaments - one marked "Co. I. 107 Inf."
the other marked "H.G."

6. What does examination of body show as regards the following identifying items?
Size of shoes: 8.

(a) Height (actual measurement) 5 ft. 6 in.

(b) Weight (estimated) ---

(c) Hair—Color very fair

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) ---

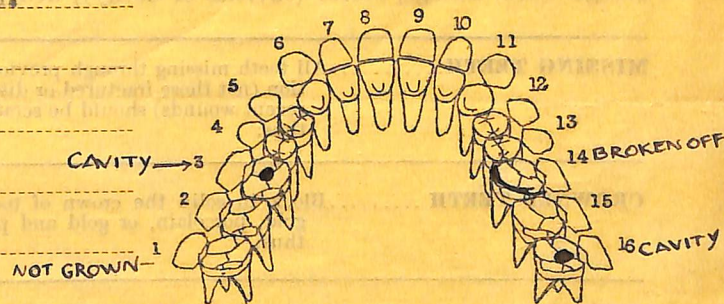
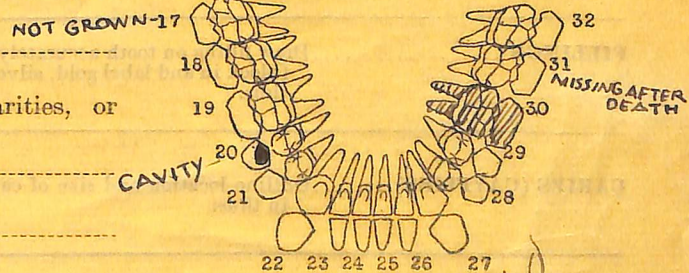


Diagram represents the mouth wide open.



CONFIRMED No. D 21210

7. Disinterment supervised by John T. Lewis
JOHN T. LEWIS
1st Lieut. CAC.

Approved: John T. Lewis
JOHN T. LEWIS
1st Lieut. CAC.
(Title)

8. Reburial supervised by John T. Lewis
JOHN T. LEWIS
1st Lieut. CAC.






Approved: John T. Lewis
JOHN T. LEWIS
1st Lieut. CAC.
(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.

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

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.

CODE SLIP

| HEADING | SUB-HEADING | NO. OF COLS | CODE |
|----------------------------|------------------------|-------------|-------------------------------|
| NAME <i>Demetrios</i> | <i>Dem</i> | 3 | 45 ⁰ ₃ |
| <i>Plato 21</i> | CEMETERY <i>636</i> | 1 | 3 ⁻ |
| BURIED <i>2671885</i> | GRAVE <i>15</i> | 2 | 15 |
| <i>10-13-18</i> | ROW <i>12</i> | 2 | 12 |
| | BLOCK <i>A</i> | 1 | 4 |
| STATE | <i>ny</i> | 2 | 37 |
| RANK | <i>Pvt.</i> | 1 | 2 |
| DIVISION | <i>27</i> | 2 | 27 |
| ORGANIZATION | <i>107</i> | 3 | 107 |
| ARM | <i>Inf</i> | 1 | 1 |
| MARITAL | <i>No</i> | 1 | 2 |
| NAME <i>Hatzidemetrios</i> | <i>Hat</i> | 3 | 81 ¹² ₀ |
| <i>Arkaterini M.</i> | STATE | 2 | |
| RESIDENCE | COUNTY | 2 | |
| <i>all rel. foreign</i> | CITY | 3 | |
| RELATION | <i>mother</i> | 1 | 1 |
| OTHER | | 1 | |
| ELIGIBILITY | <i>foreign</i> | 1 | 4 |
| NATIVITY | | 1 | |
| RACE | | 1 | |
| ENGLISH | | 1 | |
| ATTENDANT | | 1 | |
| HEALTH | | 1 | |
| NO. OF SONS | | 1 | |
| DATE OF | MO. | 1 | |
| TRIP | YR. | 1 | |
| ACCEPTANCE 29/514 | <i>Courtesy Greece</i> | 1 | 03 <i>PM</i> |

WAR DEPARTMENT
 OFFICE OF THE QUARTERMASTER GENERAL
 WASHINGTON

DATE 8/27/31

NAME RANK SERIAL ORGANIZATION DATE OF DEATH
Demetrios, Plato H. Pvt. 2671085 Co. I, 107th Inf. 10/13/18

STATE N. Y. CTY. NO. 636 GRAVE 15 ROW 12 BLOCK D

Check relationship Living - Deceased

| | | | |
|---|---|---|---|
| MOTHER | : | : | : |
| STEPMOTHER (For the year prior to commencement of service) | : | : | : |
| MOTHER THRU ADOPTION (For the year prior to commencement of service) | : | : | : |
| MOTHER IN LOCO PARENTIS (For the year prior to commencement of service) | : | : | : |
| WIDOW (Who has not remarried) | : | : | : |

all rel foreign 3-16-33

*Mr. Arkiaterini Nikolaos
 Hatzidemetrios
 Anavarantoi
 Samon
 Greece*

Single

Veterans Bureau Claim Number XC 119 356
 29/156

9/11

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

Mr. Letter
Foreign

QM 293 A-C

IN REPLY REFER TO

Demetrios, Plato H.

May 16, 1929.

XC 119 356

Mr. Antonios M. Zeppos,
231 First Avenue,
New York, N. Y.

Mother:

Aikaterini Nikolaon
Hatzidemetrios
Ano Arvanitoi, Samon, Greece

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 uncle of the late Private Plato H. Demetrios, Co. I, 107th Inf., whose remains are now interred in the Somme American Cemetery, Bony, Aisne, 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,

JOHN T. WARRIS,
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

May 16, 1929.

Demetrios, Plato H.

Mr. Antonios M. Zeppos,
231 First Avenue,
New York, N. Y.

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 uncle of the late Private Plato H. Demetrios, Co. I, 107th Inf., whose remains are now interred in the Somme American Cemetery, Bony, Aisne, 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,

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

2 incls.
Act of Congress.
Envelope.

Dup.



Demetrios

Plato H.

2,671,085

(Surname)

(Christian name in full.)

(Army serial number.)

Pvt. Co. I 107th Inf.

(Rank and organization.)

State your relationship to the deceased *uncle*

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) *Antoniou M Zeppos*

231 First Ave. N York City

(Number and street or rural route.) (City, town, or post office.) (State.)

Read carefully the letter accompanying this card.

3-6713
over

But please advise me
the name of ermitary, town
and place in France, so I
or his family can visit it.

checked by *drawn by JH*
Q4-23-21 636 - 1787
4-22-21

QM 295 A-C

B) DEMETERION, Plato H. - Pvt.

April 19, 1926

Mr. Antonios M. Zeppos,
231 First Ave.,
New York City, N.Y.

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. BEDINGTON,
Major, Q.M.G.,
Assistant.

RD

702

25/560/EYS



File This Under # 110950

MEMORANDUM TO FILES DEPARTMENT

--REGISTRATION BRANCH--

TRANSFER ALL PAPERS

FROM:

File # 110950 ✓

(Cancelled)

Demetrios, Plato H.

TO:

File # 59386 ✓

Demetrios, Plato H. (P)

By: M. K. Gilbert.

Adjustment - Section

Audit Dept.

Date 2/27/20.

O. K. NUMERICAL - FILE - INDEX _____

Papers Transferred By: *EMW 2/12/20*

To be prepared in triplicate.

DATE March 15, 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 <u>DEMETRION, Plat^o H.</u> | 10. Name _____ |
| 2. No. <u>2671085</u> | 11. No. _____ |
| 3. Rank <u>Pvt.</u> | 12. Rank _____ |
| 4. Org. <u>Co. I, 107th Inf.</u> | 13. Org. _____ |
| 5. D.D. <u>Oct. 13, 1918</u> | 14. (a) D.D. _____ |
| 6. C.D. <u>KIA</u> | (b) D.B. _____ |

Discrepancy found upon disinterment

| | |
|--|---------------------------------------|
| 7. Grave No. <u>24</u> Sec. _____ | 15. Grave No. _____ Sec. _____ |
| 8. Plot <u>Block A</u> Row <u>36</u> | 16. Plot _____ Row _____ |
| 9. _____ | 17. _____ |
| 18. Cemetery <u>Somme</u> | 19. Commune or town <u>Bony</u> |
| 20. Dept. or County <u>Aisne</u> | 21. Country <u>France</u> |
| 22. G.R.S. Hdqrs. Code No. <u>#636</u> | |
| 23. Disinterred (Date) <u>March 15, 1928</u> By <u>L. GORDON</u> | |
| 24. Inscription on grave marker: | |
| Name <u>DEMETRION, Plate H.</u> | Serial No. <u>2671085</u> |
| Rank <u>Pvt.</u> | Organization <u>Co. I, 107th Inf.</u> |
| 25. Was identification disc found on grave marker? _____ On body? <u>yes</u> | |

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).
one collar ornament 107 crossed rifles.

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 March 15, 1928 By L. GORDON

31. Casket sealed by L. GORDON

Signature of Embalmer, (Supervisor)

L. GORDON

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

32. Designation of body: _____

Name DEMETRION, Plate H. Serial No. 2671085

Rank Pvt. Organization Co. I, 107th Inf.

33. Consigned to: _____

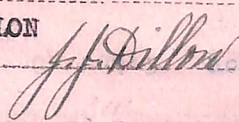
Name of Permanent Cemetery Somme, Bony, Aisne

34. Casket boxed and marked (Date) March 15, 1928 By J.J. DILLON

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 _____

J.J. DILLON



36. Remarks _____

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

To point of Concentration _____

Convoyer _____ Signature Shipping Officer _____ (Name)

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 _____ Signature Shipping Officer _____ (Name)

40. Received: Date _____

G.R.S. Representative _____

41. Reinterred March 15, 1928 Somme American Cty.

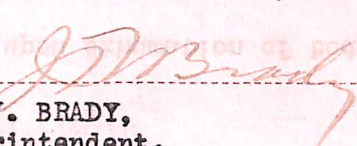
(Date)

42. Grave No. 15 Section _____

43. Plot Block D Row 12

G.R.S. Representative _____

**J.F.V. BRADY,
Superintendent.**



REPORT OF DISINTERMENT AND REBURIAL

1. REMAINS OF DEMETRION, Plato H. SERIAL NUMBER 2,671,085

RANK Pvt. ORGANIZATION Co. I. 107th Inf.

2. Disinterred (date) : March 15, 1928 From (give complete location) :
Grave 24, Block A, Row 36

By : Group Cty. Unit _____

3. Reburied (date) : March 15, 1928 In (give complete location) :
Grave 15, Block D, Row 12

By : Group Cty. Unit _____ Nature of reburial Metalic casket

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

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

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

One collar ornament ¹⁰⁷₁ crossed rifles.

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

(a) Height (actual measurement) _____

(b) Weight (estimated) _____

(c) Hair—Color _____

Quantity _____

1 to 4 missing

Characteristics _____

(d) Hair on face—Color _____

Location _____

Quantity _____

17 PE

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

missing parts) _____

19 to 22 CAV

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

Upper jaw detached, right side missing. Left ulna and radius missing.

7. Disinterment supervised by _____

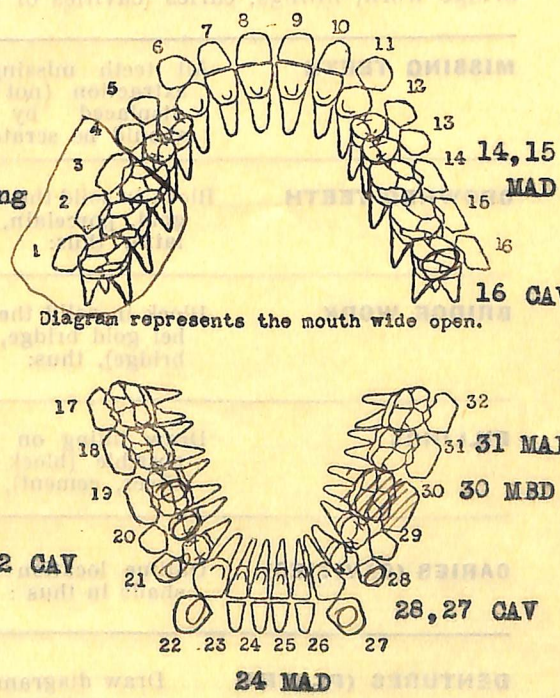
Approved : _____

(Title) _____

8. Reburial supervised by _____

Approved : _____

(Title) _____








L. Gordon
J. J. Miller

[Signature]
[Signature]

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.

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 _____, 192

6/1/21. Adv. advice not to be returned. 6/6/21 M.G.

IX.

REMARKS

WRITE NOTHING BELOW THIS LINE.

COMPILATION OF DISPOSITION OF REMAINS DATA

File 59586

I. LOCATION INDEX CARD:

(a) Name DEMESTRION, Plato H. Ser. No. 2671085
 (b) Rank Pvt. Organization Co. I, 107th Inf.
 (c) Date of death 10-13-18 (d) Cause of death K/A

} B
TYP. AB

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

(a) Grave No. 107 Row -5- Plot 1 Sec. - TYP. B
 (b) Emerg. Address Mrs. Arthur Zeppos (aunt) 231 First Ave., New York, N.Y.

III. Files of soldiers dying from contagious diseases ||||| CKR. AB

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

Made No case pending investigation as to m/K. Uncle, Antonios M. Zeppos, 231-First Ave. N.Y.C., requests body not returned.

-act 6-8-21

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

6/1/21 Adv. advice - not to be returned. 6/6/21 1119

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

VII. SUPPLEMENTARY REQUESTS.

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

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

COUNTRY _____ CEMETERY No. _____ SHEET No. 1787

59386

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Demetrios, 2671085 Plato H.

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

Pvt. Co. I 107th Inf.

(Rank) (Organization).

PLACE OF DEATH

CAUSE OF DEATH:

DATE OF BURIAL:

PLACE OF BURIAL:

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

GRAVE NUMBER:

HOW MARKED: Name Peg? Cross?

Headboard? Bottle?

IDENTIFICATION TAGS:

Was one buried with body?

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

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

NEAREST RELATIVE:

ADDRESS:

RELATIONSHIP:

REPORTED BY:

(Signature and Rank of Reporting Officer)

FILE

Mar St. Annapolis
Oct 13, 18

FILE





File Number 59386

TO: REGISTRATION BRANCH, G. R. S.

Date March 31, 1921.

FROM: INQUIRY BRANCH.

Please furnish information as checked (✓) below regarding the following soldier:

NAME: DEMETRION, Plato

Serial Number

RANK:

ORGANIZATION: Co I 107th Inf.

| No. | QUESTION | REPLY |
|-----|--|---|
| 1. | Do particulars of soldiers given above agree with records? | 1. No Plato H S# 267108b Private |
| 2. | Date of death. | 2. 10-13-18 |
| 3. | Cause and place of death. | 3. K/A |
| 4. | Number of casualty cablegram. | 4. 330 |
| 5. | Date buried. | 5. None given |
| 6. | Grave location. (a) Complete record required. (b) Name of cemetery or commune only required. (c) Note reinterments. | 6. British Map 57 B W13.d 9.5 <u>DISINTERRED & REBURIED 11-18-20</u> Grave #107, Row #5, Plot L, "Flanders Field," American Military Cty., #636, Bony, Aisne. ✓ |
| 7. | Who reported burial? | |
| 8. | Confirmed by G. R. S.? | |
| 9. | Report as to grave marker. | 9. Cross |
| 10. | Identification tags: (a) Buried with body? (b) Attached to grave marker? | 10. Yes No |
| 11. | Complete emergency address? | 11. Mrs. Arthur Zeppos, (Aunt) 231 First Ave., New York, N.Y. |
| 12. | Has been notified? (Give date.) | 12. Yes 1-3-21 |
| 13. | Report the exact position of your inquiry on this case. (Reply in all cases if no information on record.) | |
| 14. | What is the photograph number? | 14. None given |
| 15. | Inquiry made by. | |

N. B.—All proper names to be typewritten, or printed in PLAIN BLOCK LETTERS.

RELEASED BY INFORMATION CONTROL DEPARTMENT.

.......... Confirmed.

..... Unconfirmed.

Evy

M.M.E.

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE, Q.M.C. IN EUROPE
8, Avenue d'Iena,
PARIS.

Recorded, Cemeterial Div., O. O. M. G.
File # 293.8 #59386

shu

File No. *293.8 Cem #636*

December 3rd. 1920.
FILE

FROM: Chief.
TO: Quartermaster General, Munitions Building, WASHINGTON, D.C.
SUBJECT: G.R.S. Forms #16-A. and #1-A.

1. There is attached herewith G.R.S. Forms #16-A and #1-A covering disinterment and reburial from Isolated Grave into Cemetery #636, BONY, (Aisne) of the following soldier :

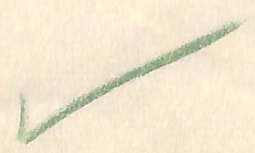
DEMETRION, #2671085, Plato H. Pvt. Co.I. 107th. Inf.
Grave #107, Row #5, Plot I.

Demetron, Plato H.

H. F. Rethiers
H. F. RETHIERS,
Colonel, Q.M.C.

HW/mm.

2 Incls.



RECEIVED
U.S. DEPARTMENT OF JUSTICE
WASHINGTON, D.C.

Box 100, 1930

Chief :
Director General :
S. J. ... :
S. J. ... :
S. J. ... :

There is attached herewith ...
covering disbursement and ...
of the following ...

Mr. ...
...

SEP 21 1930
G. H. S.



Handwritten signature

Colonel, U.S.A.

...

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
GRAVES REGISTRATION SERVICE
WASHINGTON

November 26, 1919.

Antonios M. Zeppoe,

231 1st Avenue,
New York City, N. Y.

has not yet been registered in this office, but investigations
are being made, the result of which will be communicated to
you as soon as possible.

2.- Please do not be discouraged by the failure, thus far,
to secure the information you desire. Each day witnesses the per-
fecting of records in cases not heretofore reported, and we have
hope of sending you comforting assurances in due time.

By authority of the Quartermaster General:

CHARLES C. PIERCE,
Colonel, Q.M. Corps,
Chief, Graves Registration Service.

CCP/jad

/vnc

NS-3405-mr.

TO: - REGISTRATION BRANCH, G.R.S.

Date 10-8-19

FROM: - INQUIRY BRANCH.

Please furnish information as checked (✓) below regarding the following soldier:

NAME Demetrio Plato

Serial Number 2671085

RANK

ORGANIZATION

Co I, 107th Inf.

| NO. | QUESTION | REPLY |
|-----|--|---|
| 1. | Do particulars of soldier: given above agree with Records? | No record in directory or in files Under /Demetrio or Plato |
| 2. | Date of Death. | |
| 3. | Cause and place of death. | |
| 4. | Number of Casualty Cablegram. | |
| 5. | Date buried. | |
| 6. | Grave Location. | |
| | (a) Complete record required. | |
| | (b) Name of Cemetery or Com- | |
| | mune only required. | |
| | (c) Note reinterments. | |
| 7. | Who reported burial? | |
| 8. | Confirmed by G.R.S.? | |
| 9. | Report as to Grave Marker. | |
| 10. | Identification Tags: | |
| | (a) Buried with body? | |
| | (b) Attached to grave marker? | |
| 11. | Complete Emergency Address? | |
| 12. | Has above been notified? | |
| | (Give date) | |
| 13. | Report the exact position of | |
| | your inquiry on this case. | |
| | (Reply in all cases if no | |
| | information on record) | |
| 14. | What is the Photograph No.? | |
| 15. | Inquiry made by? | |

Released by Information Control
 Dept.
 Directory
 Cards 5 x 8
 Cards 4 x 6

N.B. All Proper names to be
 typewritten, or printed in
 PLAIN BLOCK LETTERS.

No record in files 107th Inf -
 B.E.C.



201 (Demetrian, Plato) Drd.

1st Ind.

mic 1-215, 6th & B.

War Department, A. G. O., September 20, 1919.-----To the Quartermaster General's Office, Grave Registration Service, Washington, D. C.

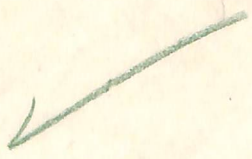
For the location of the grave of Private Plato Demetrian, Company I, 1e7th Infantry, Serial Number 2,671,085, and with the request that the fore-going letter be answered direct concerning this matter.

By order of the Secretary of War:

J. Erwin

Adjutant General

Synopsis made.



201 (Demetrios, Plate) Drd.

1st Ind.

mic 1-215, 6th & B.

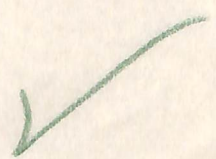
War Department, A. G. O., September 20, 1919.-----To the Quartermaster General's Office, Grave Registration Service, Washington, D. C.

For the location of the grave of Private Plate Demetrios, Company I, 107th Infantry, Serial Number 2,671,065, and with the request that the foregoing letter be answered direct concerning this matter.

By order of the Secretary of War:

Adjutant General

Synopsis made.



G.R.S. FORM NO. 12

GENERAL HEADQUARTERS
AMERICAN EXPEDITIONARY FORCES
ADJUTANT GENERAL'S OFFICE

FROM : ADJUTANT GENERAL.
TO : C. O. Co. I, 107th. 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: _____

✓



1117

1000
11
1000

100



RE:

Plato Demetrion, Private,
Co. I. 107th Infantry
Serial No. 2,671,085.

"But please advise me the name of cemetery, town and place
in France, so I or his family can visit it."

Card signed by uncle

Antonios M Zeppoe,
231 1st Ave., New York City, N.Y.

A.S.O. 201 (Demetrion, Plato).

Rec'd Cas

SEP 12