

mg

FEB 26 1926

DATE Oct. 25, 1921.

1. NAME *Sol by*
DEPOMEO, Peter

SERIAL No. **552613**

RANK **Cpl.**

ORGANIZATION **Co. M. 38th Inf.**
& DIVISION *3rd*

GRAVE LOCATION **Meuse-Argonne Amer. Romagne-sous-Montfaucon (Meuse) #1232, Sec. 66**

CTY. NAME

NUMBER

66

143

Sec. 66

3

GRAVE

ROW

PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION

Near

Froidos

Meuse

GRAVE

COMMUNE

DEPT.

COORDINATES

51 NE

255.3 N

308.3 E

CONCENTRATED TO

6-16-19

143

66

3

DATE

GRAVE

ROW

PLOT

Meuse-Argonne

1232

CEMETERY

CTY. NUMBER

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

Tag on body

DATE OF DEATH

Oct 10, 1918

STATE FROM WHICH HE CAME

N.Y.

MEDALS OR DECORATIONS AWARDED

none

SUBSEQUENT REBURIALS

DATE

GRAVE

ROW

PLOT

CEMETERY

DATE

GRAVE

ROW

PLOT

CEMETERY

SIGNATURE, AREA SUPERVISOR

M. B. Birdseye
M. B. BIRDSEYE

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

3. FINAL GRAVE LOCATION

10/25/21

14

22

Block A

DATE

GRAVE

ROW

PLOT

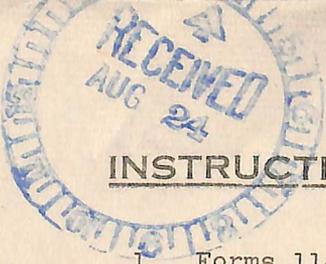
Meuse-Argonne American Cemetery #1232 Romagne-sous-Montfaucon Meuse.

CEMETERY

ckc
MAR 4 1926

SEP 23 1927

ADMITTED BY
12.6.21 4-1927



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.

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REPORT OF DISINTERMENT AND REBURIAL:

Remains of:

Name DEPONEO, Peter D.Number: 552613Rank Unkn. organization: Co M 138th Inf.

Disinterment and Reburial made by Group:

Unit:

Disinterred (Date)

From: (Give complete location)

16th, June 1919Amer. Mil. Cty. Grave #152CHATEAU SALVANGE MEUSE51 NE 308.3 E; 255.3 N.

Reburied (Date)

in: (Give complete location)

16th, June 1919Grave #143 Sec. 66 Plot 3ARGONNE AMER. CTY. # 1232ROMAGNE MEUSE

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

Burial good; buried naked and in blanket; body badly decomposed.

Was one identification tag found upon the body?

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

Note:

CONFIRMED No D

If upon disinterment, effects are found upon the bodies, they will be promptly sent to the Effects Depot direct, as is required by G. C. 170, G. H. O., 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 Lt. McCormick

cls

C.O. Group

Unit

1232

12181

Date 27th June 1919

REPORT OF DISTRICT AND RESULTS

Name of:

Name: DEBONO, Peter D. Rank: Union. Organization: Co M 138th Inf. Number: 822813

Distances and Remarks made by Group:

Distances (Date): From: (give complete location) Unit: 10th June 1919 Amer. Mil. Civ. Grave #133

CHATTAU SAUVAGE MUSEE

31th 308.3 N; 333.3 N.

Remarks (Date): In: (give complete location) 10th June 1919 Grave #133 Sec. 66 Plot 3

ARGONNE AMER. CIV. # 1333

ROMAGRE MUSEE

Report as to nature of original burial and condition of body upon disinterment: Burial good; buried naked and in blanket; body badly decomposed.

Has one identification tag found upon the body? Yes. Are other means of identification were found upon the body? None

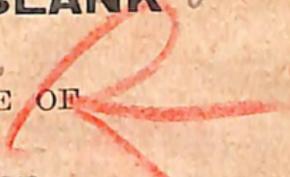


Approved by Lt. McCormick

etc

Died of W.R. 89 10/10/18
GRAVE LOCATION BLANK

Dapenco,
LOCATION OF THE GRAVE OF



Dapenco 552613 Peter
.....
(Surname.) (Number.) (First Name and Initials.)

Cpl. Co. 4. 38th. Inf.
.....
(Rank.) (Organization.)

DATE OF BURIAL... *Oct. 11 1918*

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

American Country, Chateau de Salvange,
Barrocourt, Meuse.
.....

GRAVE NUMBER. *130*

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:
John M. S. Allison,
1st Lt. Sen. Corps, USA, Adjutant.
.....
(Signature and Rank of Reporting Officer.)

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

No green carbon

CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	<i>Depones</i>	3	456
BURIED	CEMETERY	1	1
	GRAVE	2	14
	ROW	2	22
	BLOCK	1	1
STATE	<i>n.f.</i>	2	35
RANK	<i>Cpl.</i>	1	2
DIVISION	3	2	03
ORGANIZATION	38	3	038
ARM	<i>Inf.</i>	1	1
MARITAL	<i>NO</i>	1	2
NAME	<i>Mrs Giovanni De P</i>	3	456
RESIDENCE	STATE	2	
	COUNTY	2	
	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		1	
		2	

Audited

4-23-32

PS

29/514

FEB Countries Italy 2 01 PM

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

DATE 8-25-31

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
Deponeo, Peter	Cpl	552613 ✓	Co. M, 38th Inf.	10-10-18

STATE _____ CTY. NO. 1232 GRAVE 14 ROW 22 BLOCK A

NAME AND ADDRESS	<u>Check relationship</u>	<u>Living - Deceased</u>
		MOTHER
	STEPMOTHER (For the year prior to commencement of service)	: : : :
	MOTHER THRU ADOPTION (For the year prior to commencement of service)	: : : : m
	MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	: : : : Giovanni de porino fu Antonio Sant'Angelo in Thevdice Prin. di. Frosinone Italy
	<u>WIDOW</u> (Who has not remarried)	: : : :
<i>Single man</i>		: : : :
Veterans Bureau Claim Number <u>CS1129</u> ✓ #9		
29/156		

m

81129

Giovanni De Poma fu
Automo.

Sant' Angelo in Theodice,
Provincia di Frosinone,
Italy.

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Faint, illegible text in the upper right quadrant, possibly a date or reference number.

Horizontal lines of faint, illegible text across the middle of the page, possibly a list or table.



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

September 13, 1923.

Mr. Louis Deponco,
172 McWorther St.,
Newark, N.J.

Dear Sir:

The Quartermaster General desires you to be informed that the permanent grave of Corporal Peter Deponco, Company M, 38th Infantry, is Grave 14, Row 22, Block A, Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon (Meuse), France.

This is one of the permanent American military cemeteries to be maintained by this Government in Europe. Each grave will be marked by a headstone of white marble, of suitable design, with 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.

You are assured in effecting removal of the remains, the utmost care and reverence were exercised and more than willingly accorded by those who performed this sacred duty. The grave of the deceased will be perpetually maintained by this Government in a manner befitting the last resting place of our heroes.

Very truly yours,

H. H. Cheal
H. H. CHEAL
Assistant.

Foreign

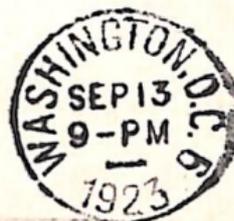
R1024

WAR DEPARTMENT.

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

WASHINGTON, D. C.

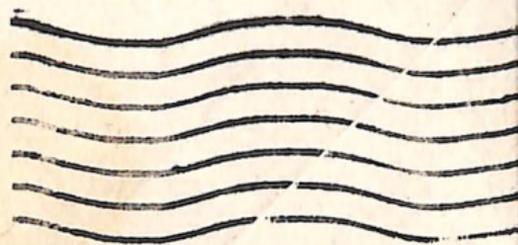
OFFICIAL BUSINESS



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

Mr. Louis Deponco,
172 McWorther St.,
Newark,
N.J.

NEWARK
SEP 19
4 11 AM
1923
N. J.



SEP 20 1923

QM 293 C-R

September 13, 1923.

Mr. Louis Deponco,
172 McWorther St.,
Newark, N.J.

Dear Sir:

The Quartermaster General desires you to be informed that the permanent grave of 22, Block A, Meuse-Argonne American Cemetery, Romagnesous-Montfaucou (Meuse), France.

This is one of the permanent American military cemeteries to be maintained by this Government in Europe. Each grave will be marked by a headstone of white marble, of suitable design, with name, rank, division, organization, date of soldier's death and State from which he came. 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.

You are assured in effecting removal of the remains, the utmost care and reverence were exercised and more than willingly accorded by those who performed this sacred duty. The grave of the deceased will be perpetually maintained by this Government in a manner befitting the last resting place of our heroes.

Very truly yours,

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

H. H. CHEAL

Assistant.



SEP 13 1923

23/592/ARK

2

COMPILATION OF DISPOSITION OF REMAINS DATA

file #39290



I. LOCATION INDEX CARD:

(a) Name DEPONEO, Peter Ser. No. 552613
(b) Rank Cpl. Organization Co.M, 38th Inf.
(c) Date of death 10-10-18 (d) Cause of death DWRIA.

TYP. als
CKR. [initials]

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

(a) Grave No. 143 Row -- Plot 3 Sec. 66 TYP. als
(b) Emerg. Address Louis Deponeo, (Brother) 172 McWorther St., Newark, N.J.

III. Files of soldiers dying from contagious diseases

CKR. [initials]

no entry in file MH 5/14/21

IV. A. G. O. DISPOSITION CARD:

Date of receipt

(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, 192

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

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

Examiner's Initials Date, 192

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

No request for disposition

(a) Cancellation memos referred to?

Examiner's Initials MH Date 5/14, 1921

COUNTRY FRANCE CEMETERY No. 1232-Sec. 66. SHEET No. 48

Checked MH 5/14/21

VII. G. R. S. Form No. 114 made _____, 192

Typed by _____, Checked by _____, 192

VIII. FINAL ACTION:

Following advice forwarded to Europe by { cable on _____, 192
letter on **JUN 3 1921**, 192

See 66

Par. 2 Not to be returned. L.P.W.

IX.

REMARKS

Location Index
Discrepancies
Name
Rank

Location Index

Discrepancies

Name

Rank

Serial No.

Org.

Remarks

A.G.O. Card & Corr.

Discrepancies

Name

Rank

Serial NO.

Org.

Remarks

G. R. S. Corr.

Discrepancies

Name

Rank

Serial No.

Org.

Remarks

Checkers

Discrepancies

Name

Rank

Serial no.

Org.

Remarks

S-1783/MB

*Checked
5/16/04
CH*

To be prepared in triplicate.

DATE Oct. 24, 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 DEPONEO, Peter
 2. No. 552613
 3. Rank Cpl.
 4. Org. Co.M. 38th Inf.
 5. D.D. Oct. 10th. 1915
 6. C.D. DOW.

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

Discrepancy found upon disinterment

7. Grave No. 143 Sec. 66
 8. Plot 3 Row _____
 9. _____

15. Grave No. _____ Sec. _____
 16. Plot _____ Row _____
 17. No discp

18. Cemetery Meuse-Argonne Amer.
 20. Dept. or County Meuse
 22. G.R.S. Hdqrs. Code No. 1232-Sec. 66
 23. Disinterred (Date) 10-21-21

19. Commune or town Romagne-sous-Montfaucon
 21. Country France
 By Ed. Lavelle

24. Inscription on grave marker:

Name Peter Deponeo
 Rank Cpl.

Serial No. 552613
 Organization Co. M. 38th Inf.

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

Ray M. Moody
 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).

144
Grave identified by tag on body.

27. Condition of body Badly decomposed features unrecognizable

28. Nature of burial wooden box and blanket.

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

30. Body prepared and placed in casket: Date 10-2-21 By Ed. Lavelle

31. Casket sealed by Ed. Lavelle

Signature of Embalmer, (Supervisor)

Ed Lavelle

ADMITTED BY

SHIPMENT. (Show actual marking of box.) Box No. C-13100

32. Designation of body:

Name DEPONEO, Peter Serial No. 552613

Rank Cpl. Organization Co.M. 38th Inf.

33. Consigned to:

Name of Permanent Cemetery Meuse-Argonne Amer. Cty. #1232,
Romagne-sous-Montfaucon (Meuse)

34. Casket boxed and marked (Date) 10-24-21 By Ed. Lavelle

35. I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.

Signature of G.R.S. Inspector F. B. Daniel
F. B. Daniel, Capt. QMC

36. Remarks

37. Shipped from point of Operation: (Date) 10-24-21

To point of Concentration Meuse Argonne Cem. #1232
(Name)

Convoyer A. J. Boyd Signature Shipping Officer G. F. Spann
G. F. Spann, Capt. QMC

38. Received at Railhead or Point of Concentration: Date 10-24-21

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: Oct. 25, 1921. Meuse Argonne Cem. #1232.
(Date)

42. Grave No. 14. Section

43. Block A. Row 22.

G.R.S. Representative James W. Younger
JAMES W. YOUNGER.
Capt. QMC. USA.



fg.

Place Romagne sous Montfaucon

REPORT OF DISINTERMENT AND REBURIAL

Date Oct. 24, 1921.

1. REMAINS OF DEPONE PETER SERIAL NUMBER 552613
RANK Cpl. ORGANIZATION Co., M. 38th Inf.

2. Disinterred (date): Oct. 24, 1921. From (give complete location):
Gr. 145 sec 66 pt 3, Cem., #1232.

By: Group five Unit Sec. 1

3. Reburied (date): Oct. 25, 1921. In (give complete location):
Meuse Arg. Cem. #1232.e Gr. 14. Bl. A. Row 22.

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

4. Report as to nature of original burial and condition of body upon disinterment:
wooden box, blanket, body badly decomposed features unrecognizable.

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

(b) Other means of identification found upon disinterment, and general remarks:
Grave ¹⁴⁴ identified by tag on body.

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

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

(b) Weight (estimated) do

(c) Hair—Color do

Quantity do

Characteristics do

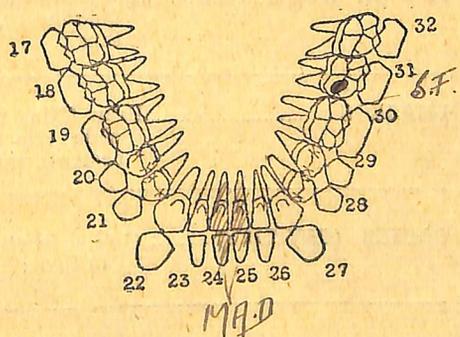
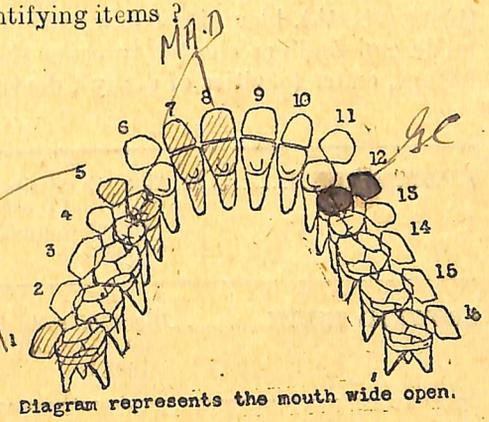
(d) Hair on face—Color do

Location do

Quantity do

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

(f) Wounds or missing parts (received at time of casualty) None visible



7. Disinterment supervised by Ed. Lavelle
Ed. Lavelle S. E.

Approved: F. B. Daniel
F. B. Daniel Capt. MC

8. Reburial supervised by A. U. Dufault
A. U. Dufault

Approved: James W. Younger
James W. Younger
(Title) Capt. MC USA.

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

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

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.
2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.
3. Give date and accurate information as to location of reburial and the group and unit which made reburial, and how reburial was made—in casket, wooden box, etc.
4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried—in a casket, box, burlap, etc. This statement should be as complete as possible.
5. (a) State whether identification tags were found buried with body and on grave marker by reporting "Yes" or "No".
 (b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying the body, other than that tabulated under Item No. 6.
6. Give all information as to body description and dental chart as nearly correctly as the condition of the body will allow. Items (e) and (f) under the body description are very important and should be very complete. The dental chart is also very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspid (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

<p>MISSING TEETH.....All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus :</p>	
<p>CROWNED TEETH.....Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus :</p>	
<p>BRIDGE WORK.....Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :</p>	
<p>FILLINGS.....Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus :</p>	
<p>CARIES (CAVITIES).....Outline location and size of cavity, shade in thus :</p>	
<p>DENTURES (PLATES).....Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."</p>	

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

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



COMPILATION OF DISPOSITION OF REMAINS DATA

File #39290

I. LOCATION INDEX CARD:

(a) Name DEPONEO, Peter Ser. No. 552613
 (b) Rank Cpl. Organization Co. M, 38th Inf. } TYBls
 (c) Date of death 10-10-18 (d) Cause of death DWRIA. } *Go*

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

(a) Grave No. 143 Row -- Plot 3 Sec. 66 TYP als
 (b) Emerg. Address Louis Deponeo, (Brother) 172 McWorther St., Newark,
N.J.

III. Files of soldiers dying from contagious diseases CKR. *Go*

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

.....

V. Following advice forwarded to Europe by { cable on , 192
Sub 66 { letter of transmittal on JUN 3 1921 , 192
Par. 2 Not to be returned. LPU

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.

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

2290
M

Depenco 552613 Peter
(Surname.) (Number.) (First Name and Initials.)

Cpl. Co M. 38th. Inf.
(Rank.) (Organization.)

DATE OF BURIAL... Oct. II th. 1918

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

American Cemetery, Chateau de Salvange,
Rarecourt, Meuse.

GRAVE NUMBER... 160

HOW MARKED: Name Peg? yes Cross?

Headboard? Bottle?

158

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:

25 OCT 1918

REPORTED BY:
John M. S. Quinn,
1st. Lt. San. Corps, USA. Adjutant.
(Signature and Rank of Reporting Officer.)

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

1. G. R. S. Form No. 1.

Hq. G. R. S. File

2. Soldier's No. 55261

3. Deponeo Peter
Surname (in block letters) First Name and Initials

4. Cpl M 38th. Inf.
Rank Company Regt. or Corps

5. 10/11/18
Date of Death Cause, if known

6. 10/12/18 A.E.F.
Date of Burial Cemetery

7. Chateau-de-Salvange Meuse
Town or Commune (in block letters) Department

8. 160
Grave No. Plot No. or Letter

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

10. Buried with Body? 1 ... Attached to Grave Marker? 1
Identification Tags

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

.....
.....

12. Map Reference, if interment is outside of cemetery

13. William Wood, ARC
Give name of Chaplain or Burial Officer

Joseph Baker, Sgt. 1cl.
Signed

Group. 3 ... Unit. A. G. R. S.

55261

558

127 OCT 1918