

G.R.S. Form #114-B

To The A. G. O.

rme.

MAR 10 1920

DATE 2/24/22.

1. NAME DE PONI, Louis

SERIAL No. 1737620

RANK Pvt.1/c

ORGANIZATION Co.K. 312th Inf.

& DIVISION

GRAVE LOCATION Meuse Argonne American, Romagne/s/Montfaucon, Meuse. 1232, Sec.13

CTY. NAME

NUMBER

82

Sec.13

2

GRAVE

ROW

PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION

7, Grandpre, Ardennes

GRAVE

COMMUNE

DEPT.

COORDINATES Verdun 35NW 286.7N 291.9E

CONCENTRATED TO 3/31/19

82

13

2

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.

Letter on body

data f-1/pfb

DATE OF DEATH

Oct 24, 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

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

3. FINAL GRAVE LOCATION 2/24/22.

11

28

Block B.

DATE

GRAVE

ROW

XXXX

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

CEMETERY

AUDITED BY M.M.E. 3-10-22

RECEIVED A.G.O. MAR 11 1920 WORLD WAR DIV.

RECEIVED
REGISTRATION



AUG 17 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 16, Form 1-A or Form 16-A, statement to this effect will be made on Form 114-B STATING WHICH G.R.S. form data is taken from. If data concerning co-ordinates is approximate and NOT accurate, statement to this effect will be made on these forms.



Robert C. Davis,
Major General,
The Adjutant General

BY *[Signature]*
MA. 15 1926

REPORT OF DISINTERMENT AND REBURIAL.

Remains of

De Poni

Name: DEPOWIE, Louis.

Number: 1737 620

(Unknown)

Rank: Pvt. TC

Organization: Co. H. K 312th, Inf.

Disinterment and Reburial made by Group

Unit

I.T. 12/6/22

Disinterred (Date)

From: (Give complete location)

31st, March 1919

Grave#7. ISOLATED GRAVE GRANDPRE ARDENNES.

35 NW 291.9 E 286.7 N

Reburied (Date)

in: (Give complete location)

31st, March 1919.

Grave#82. Sec. 13 Plot 2. Amer.B/A. Cty#1232.

ROMAGNE MEUSE. 35 N E 308.16 E 284.87 N

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

Burial very poor. Buried in uniform. Body badly decomposed.

Was one identification tag found upon the body? Yes

What other means of identification were found on the body?

Letter on body.

CONFIRMED No. D. 11025

Note:

If upon disinterment, effects are found upon bodies, they will be promptly sent to the Effects Depot direct as is required by G.O. 170, G.H. 2, 1918., after being carefully examined for clues to identity in doubtful cases, notation whereof will be made and reported to Chief, Graves Registration Service.

Supervised by: Lt. A.E. Caswell.

R. H. ROSENTHAL

C.O. Group Unit

Date: 29th April 1919.

REPORT OF DRAINAGE AND REBURIAL

Remains of:

Name: UNKNOWN, Iowa.

(Unknown)

Rank: Pvt.

Number: IYW 820

Organization: Co. H. 312th Inf.

Unit

Drainage and Reburial made by Group

Drainage (Date)

31st March 1919

From: (Give complete location)

Grave V. ISOLATED GRAVE GRANITE MARKERS.

35 NW 201.9 E 266.7 N

Reburied (Date)

31st March 1919.

in: (Give complete location)

Graves 22. Sec. 13 Plot 2. Amer. B.A. Co. 12322.

ROMANIAN MOUND. 35 N N 208.16 E 204.87 N

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

Burial very poor. Buried in uniform. Body badly decomposed.

Was any identification tag found upon the body? Yes

What other means of identification were found on the body?

Letter on body.



Info:

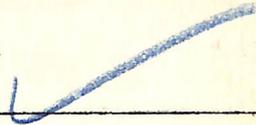
If upon drainage, either the remains or the body are found to be in a condition such that they will be promptly sent to the State Dept. for identification, the State Dept. should be notified immediately. In doubtful cases, notification should be given to the State Dept. for identification. The State Dept. will be notified by the State Registrar Service. Action whereof will be made and reported to Chief, Graves Registration Service.

Inspected by: Lt. A.E. Sawell.

Graves Registration Service
U.S. Army
Washington, D.C.

No green carbon

CODE SLIP



HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	De Poni	3	45 ⁰ 6
BURIED	CEMETERY	1	1
	GRAVE	2	11
	ROW	2	28
	BLOCK	1	2
STATE	N.J.	2	35
RANK	Plt 11cl	1	2
DIVISION	78	2	78
ORGANIZATION	312	3	312
ARM	Inf	1	1
MARITAL	Father	1	2
NAME	Di Ponio	3	
RESIDENCE	STATE	2	
	COUNTY	2	
	CITY	3	
RELATION	Mother	1	1
OTHER	Father	1	1
ELIGIBILITY	Head	1	6
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE		1	

mtt

AUDITED

APR 23 1932

RS

29/514

402 93

ACT

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

DATE 7-23-29

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
De Poni, Louis	Pvt. 1/c	1737620	Co. K, 312th Inf.	10-24-18

STATE	CTY. NO. 1232	GRAVE 11	ROW 28	BLOCK B
-------	---------------	----------	--------	---------

	<u>Check relationship</u>	<u>Living</u>	<u>-</u>	<u>Deceased</u>	
		:	:	:	<i>Father</i>
	MOTHER	:	:	:	<i>Giovanni Di Poni</i>
	STEPMOTHER (For the year prior to commencement of service)	:	:	:	<i>fu Antonio,</i>
NAME		:	:	:	<i>Sant' Angelo in</i>
AND	MOTHER THRU ADOPTION (For the year prior to commencement of service)	:	:	:	<i>Theodice,</i>
ADDRESS		:	:	:	<i>Prov. di Caserta,</i>
		:	:	:	<i>Italy</i>
	MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	:	:	:	_____
	WIDOW (Who has not remarried)	:	:	:	_____

Veterans Bureau Claim Number
29/156/

6102025

7/267

RECEIVED
FEDERAL BUREAU OF INVESTIGATION
U. S. DEPARTMENT OF JUSTICE
WASHINGTON, D. C.

NOV 14 1954
MEMORANDUM
TO : SAC, NEW YORK
FROM : SAC, NEW YORK
SUBJECT: [Illegible]

RE: [Illegible]

[Illegible typed text in the main body of the memorandum]



NOV 14 1954

File #
64486

293-DePoni, Louis

Sent 7/1/24

File # 44360

1. G. E. S. Form No. 1.

Hq. G. E. S. File

Map 2

2. Soldier's No. *DePoni, Louis*

3. ~~UNKNOWN AMERICAN SOLDIER~~
Surname (in block letters) First Name and Initials

4. *Private* *Co. K, 3122d*
Rank Company Regt. or Corps

5. *10/24/18* *Kmin A*
Date of Death Cause, if known

6. Date of Burial Cemetery

7. **GRANDPRE** **ARDENNES**
Town or Commune (in block letters) Department

8. **7**
Grave No. Plot No. or Letter

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

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

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

1270

OMMB. GRANDPRE (ARDENNES)

(C 248) SHT 35 N.W. COORD {E-291.95}

{N-286.65}

12. Verdun. 35 N.W., 286.65 N., 291.95 E.
Map Reference, if interment is outside of cemetery

13. Give name of Chaplain or Burial Officer

Signed *H. E. Tetter*

Group **3** Unit **302** G. E. S.

File with other papers
on case.
Sent 7/1/24



001101

Cosmo S. Anello

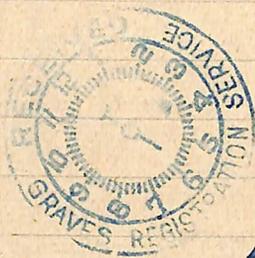
293

De Rome

from

Dear Sir

Received your
letter of thanking kindly
for the news of my dear
son's which I've lost I'd
love to see their graves
but we are so far & I'm so
old. I've always wonder
how my sons were buried
but now with the news that
I've got I thank you kindly
7/6/20



JUL - 6 1923

With my kindest regards,
ds. to you

I Remain

Giovanni Deponio

Cassino S. Angelo
h 18/6/1923



44360

In reply refer to:
293 C-R

May 29, 1925

Mr. Giovanni DePoni,
Paese Santagelo, Indoctice,
Prov. di Caserta, Italy.

Dear Sir:

The Quartermaster General desires that you be informed that the permanent grave of Private 1/c Louis DePONI, Company K, 312th Infantry, is Grave 11, Row 28, Block B, 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. The headstones will be placed at all graves in connection with the improvement work now in progress, as soon as possible and without waiting for special action or request on the part of relatives.

In effecting removal, the utmost care and reverence were exacted and more than willingly accorded by those performing this sacred duty. The grave of the deceased will be perpetually maintained by this Government in a manner befitting the last resting place of our heroes.

Very truly yours,

RD
7 D2
23/236/ARK

H. J. Conner,
Assistant.

MAY 30 1925
U.S. ARMY
QUARTERMASTER GENERAL
WASHINGTON, D.C.

COMPILATION OF DISPOSITION OF REMAINS DATA File #44360

I. LOCATION INDEX CARD:

(a) Name DE PONI, Louis Ser. No. 1737620 TYP. aew
(b) Rank Pvt. 1/c Organization Co. K, 312th Inf. CKR.
(c) Date of death 10-24-18 (d) Cause of death K/A

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

(a) Grave No. 82 Row - Plot 2 Sec. 13 TYP. aew
(b) Emerg. Address Giovanni Deponi, Father, Paese Santagelo, Indoctice Prov. (2/31/21) E.M. di Caserta, Italy.

III. Files of soldiers dying from contagious diseases / CKR. no card in file #R 3-25-21

IV. A. G. O. DISPOSITION CARD:

(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 HA Date 3-25, 1920.

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

(a) Cancellation memos referred to? yes

Examiner's Initials HA Date 3-25, 1920.

COUNTRY France CEMETERY No. 1232, Sec. 13 SHEET No. 34

Handwritten initials and date 6/28/21

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 4/2/21, 1920

Sec. 13

Par. 2. Not to be returned (E&S)

IX.

CORRECTIONS

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

X. SUSPENSION REMARKS:

*U. R. B. A. Mr. Giovanni DiPonio
Sant Angelo in Teodice Prov. of Caserta,
Italy PF-6-24-21*

Name _____
Rank _____
Serial No. _____
Org. _____

Name

Rank

Serial No.

Org.

Remarks

Raubrock

A. G. O. Card & Corr. *3-25-21*

Discrepancies

Name

Rank

Serial No.

Org.

Remarks *E. A.*

G. R. S. Corr.

Discrepancies

Name

Rank

Serial No.

Org.

Remarks

Checkers

Discrepancies

Name

Rank

Serial No. *7 SW sent*

Org. *3-25-21*

Remarks *H. P. O. A.*

checked all

S-1357/MB

3-25-21

COMPILATION OF DISPOSITION OF REMAINS DATA File #44360

I. LOCATION INDEX CARD:

(a) Name DE PONI, Louis Ser. No. 1737620
 (b) Rank Pvt. 1/c Organization Co. K, 312th Inf. } TYP. scw
 (c) Date of death 10-24-18 (d) Cause of death K/A } D/B

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

(a) Grave No. 82 Row - Plot 2 Sec. 13 TYP. scw
 (b) Emerg. Address Giovanni Deponi, Father, Paese Santagelo, Indictice Prov. di Caserta, Italy.
A. (3/31/21) E.M.

III. Files of soldiers dying from contagious diseases ////////// CKR. D/B

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

.....

V. Following advice forwarded to Europe by { cable on _____, 192
Sec. 13. letter of transmittal on 4/2/21, 192
Par. 2. Not to be returned (E&S).

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. _____

D/P 6/28/21

Concentration.

Place Romagne 1232.

REPORT OF DISINTERMENT AND REBURIAL

Date Feb 23, 1922.

1. REMAINS OF DEPONI, Louis. SERIAL NUMBER 1757620.
RANK Pvt. 1/c ORGANIZATION Co. K. 321th Inf.

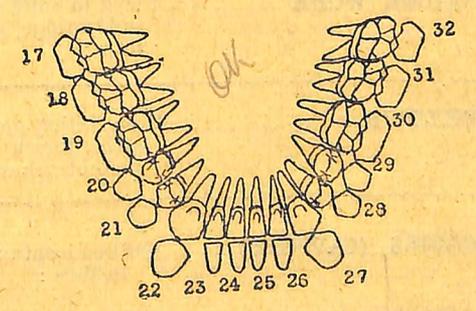
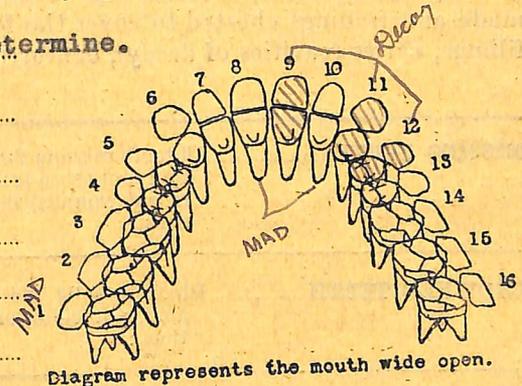
2. Disinterred (date): Feb 23, 1922 From (give complete location): gr 82, sec 13, plot 2. Cty. 1232.
By: Group 3 Unit sec 1

3. Reburied (date): Feb. 24, 1922, Meuse Argonne Cty 1232, gr 11, bl B, row 28 In (give complete location):
By: Group Reburial 3 Unit Nature of reburial unlined casket

4. Report as to nature of original burial and condition of body upon disinterment:
wooden box and burlap and U.S. uniform. body decomposed, unrecognizable.

5. (a) Identification tags: Buried with body? no On grave marker? yes.
(b) Other means of identification found upon disinterment, and general remarks:
back of form 114-a reads: Co. K. 321th Inf.

6. What does examination of body show as regards the following identifying items?
(a) Height (actual measurement) impossible to determine.
(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) left foot missing, both fibula, both tibia and left femur fractured, skull shattered upper jaw fractured.

7. Disinterment supervised by H.E. Strong Approved: F. Overhiser, Capt. G.H.C.
(Title)

8. Reburial supervised by W.B. Sheild Approved: A.E. Dewey, 1st Lt, QMC.
(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 TEETHAll teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus :	
CROWNED TEETHBlock in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus :	
BRIDGE WORKBlock in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :	
FILLINGSDraw 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.

AUG 17 1952



To be prepared in triplicate.

DATE Feb 25 1922

REPORT OF DISINTERMENT, PREPARATION, SHIPMENT AND REBURIAL OF BODY

DISINTERMENT none. COMPARATIVE REPORT

Records of G.R.S. Headquarters. Discrepancy found upon exhumation of body

- 1. Name DE PONI, Louis 10. Name _____
- 2. No. 1737620 11. No. _____
- 3. Rank Pvt. 1/c 12. Rank _____
- 4. Org. Co. K. 312 Inf. 13. Org. _____
- 5. D.D. 10-24-18 14. (a) D.D. _____
- 6. C.D. KIA (b) D.B. none

Discrepancy found upon disinterment

- 7. Grave No. 82 Sec. 13 15. Grave No. _____ Sec. _____
- 8. Plot 2 Row _____ 16. Plot _____ Row _____
- 9. _____ 17. none

18. Cemetery Meuse Argonne American. 19. Commune or town Romagne/s/Montfaucon.

20. Dept. or County Meuse. 21. Country France.

22. G.R.S. Hdqrs. Code No. 1232, Sec. 13

23. Disinterred (Date) Feb 23 1922 By H E Strong

24. Inscription on grave marker:

Name Louis Deponi Serial No. 1737620

Rank PFC Organization Co K 321 Inf

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

John H Crawford
Signature Junior Technical Assistant

PREPARATION

John H Crawford

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).

~~Back of form 114-A, record Co K 312 Inf~~

27. Condition of body Badly decomposed, features unrecognizable

28. Nature of burial US Uniform burlap and box

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 Feb 25 1922 By H E Strong

31. Casket sealed by H E Strong

Signature of Embalmer, (Supervisor) H.E. Strong

H E Strong

AUDITED

SHIPMENT. (Show actual marking of box.) Box No. **C-21643.**

32. Designation of body:

Name **Louis DE POHL**

Serial No. **1737620**

Rank **Pvt. 1/c**

Organization **Co.K. 32Kk Inf.**

33. Consigned to:

Name of Permanent Cemetery **Meuse Argonne American, 1232, Romagne/s/Montfaucon, Meuse.**

34. Casket boxed and marked (Date) **Feb 23 1922** By **H E Strong**

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 Overhiser
F Overhiser, Capt. QMC

36. Remarks

37. Shipped from point of Operation: (Date) **Feb 23 1922** **c**

To point of Concentration **Morgue Romagne** (Name)

Convoyer **T T Wynn** Signature Shipping Officer

G F Spann
G F Spann, Capt QMC

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 **Meuse Argonne Cty 1232, Feb, 24, 1922** (Date)

42. Grave No. **11** Section

43. **BLOCK** Plot **B** Row **28**

G.R.S. Representative *A E Dewey*
A. E. Dewey, 1st Lt, QMC.

OFFICE OF THE QUARTERMASTER GENERAL
CEMETERIAL DIVISION
OVERSEAS PROJECT SUB-SECTION.

COPY

Harlow C.W.

NAME OF DECEASED SOLDIER	CEMETERY NO.	DATE
De Poni, Louis, Pvt. 1/c.	1232-Sec.13 - 34	3/26/21.
SERIAL NUMBER	ORGANIZATION	DATE OF DEATH
1737620	Co. K, 312th Inf.	10/24/18.

Original Attached to
Form 115

WAR RISK INSURANCE INFORMATION

Date 6-24-21 PK

DATE _____

<u>Mr. Giovanni Di Ponio</u>	<u>Father</u>
PERSON NAMED BY SOLDIER TO BE BENEFICIARY OF INSURANCE	RELATIONSHIP

Stant Angelo in Theodice Prov. of Caserta.
ADDRESS

Italy.

Adjustment Made

<u>17 1922</u>	
PERSON RECEIVING DEATH COMPENSATION	RELATIONSHIP

File No. 44360

ADDRESS _____



FROM: O. Q. M. G.
CEMETERIAL DIVISION
Munitions Building
Room 1128

PLEASE
EXPEDITE

WAR DEPARTMENT
Office of the Quartermaster General of the Army
Washington

Date 3/26/21.

G.R.S. Form 8-W-A-H
Information requested of A.G.O.

File No. Requisition

From: The Quartermaster General, U. S. Army, (Cemeterial Division) **(SPECIAL)**

To: The Adjutant General of the Army, 6th & B Sts., N.W., Washington, D.C.

Subject: Information required for G.R.S.

1. It is requested that the items checked below be completed, Request confirmation of all information shown.

a. Surname De Poni.

f. Date of death 10/24/18.

b. Christian name Louis

g. Cause of death K/A.

c. Serial Number 1737620

h. Authority (C.O.#) 303

d. Organization Co. K, 312th Inf.

~~i. Emergency address~~

e. Rank Pvt. 1/c.

~~j. Relationship~~

DENTAL CHARTS (See Physical report of examination prior to enlistment)

PHYSICAL DESCRIPTION
(See page #2 of the Service Record)

a. Age of enlistment

a. Strike out teeth missing

b. Color of eyes

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8
upper right upper left

c. Color of hair

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8
lower right lower left

d. Height

Adjustment Made

e. Weight

APR 8 1921

f. Permanent marks and physical defects at enlistment (Old fractures or breaks)

Rec'd World War Div.
Date MAR 20 1921

H. L. ROGERS,
Quartermaster General, U.S.A.

CEMETERY NO: G.W. 1232-Sec.13.

BY: *H. J. Conner*
H. J. CONNER,
1st. Lieut. Q.M.C.

SHEET NO: 34
TYPED BY: I.W.

S/713/LML

Donnelly
MAR 28 1921
Enl. Per. Sec. 7009 3/28/21

NOTED FORM 115
DATE 3/31/21 E.M.

T

44360

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

De Poni 1737620 Louis

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

Pvt. 1st. Cl. Co. K, 512th. Inf.

(Rank). (Organization).

PLACE OF DEATH: Grand Pre, France.

CAUSE OF DEATH: Sniper's bullet

DATE OF BURIAL:

PLACE OF BURIAL: Rugancy 170000

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

291.8 - 287.7

See correspondence - CARROLL, Arthur F

1752380

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

248

357. E

Ardenne (Argennes) 291.8 287.7

NEAREST RELATIVE: Giovanni DePoni

ADDRESS: Paese, Santogelo, Indectice, Prov. d. Caserta, Italy.

RELATIONSHIP: Father

REPORTED BY:

(Signature and Rank of Reporting Officer).

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



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Communal List No. 218-2702
Daily Report No. _____