

G.R.S. Form #114 B

To The A. C. C.

5131 Tab

APR 27 1926

DATE 11/30/21

1. NAME CULVER, Harrison W. SERIAL No. \_\_\_\_\_  
 RANK 1st Lt. ORGANIZATION Co.F. 16th Inf. DIVISION 105  
 GRAVE LOCATION Amer. Cty. Vittel (Vosges) # 258  
CTY. NAME NUMBER

GRAVE 224 ROW \_\_\_\_\_ PLOT \_\_\_\_\_  
GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 235 Vittel Vosges  
GRAVE COMMUNE DEPT.

COORDINATES E.367.79 N.157.35 Map Mirecourt N.E.84

CONCENTRATED TO Jan.31,1921. 224  
DATE GRAVE ROW PLOT  
Amer. Cty. Vittel 258  
CEMETERY CTY. NUMBER

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

**Nothing of record**

DATE OF DEATH Oct 20, 1919

STATE FROM WHICH HE CAME Cal.

MEDALS OR DECORATIONS AWARDED none

SUBSEQUENT REBURIALS None  
DATE GRAVE ROW PLOT CEMETERY

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE AREA SUPERVISOR Stanley J. Grogan  
STANLEY J. GROGAN, Capt. Inf. USA.

3. FINAL GRAVE LOCATION 11/30/21 11 37 C  
DATE GRAVE ROW Block PLOT

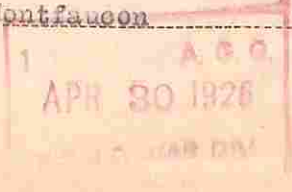


Case Argonne American Cty # 1232 Rouagne sous Montfaucon

CEMETERY

AUDITED BY M. M. E.  
 1-3-203

MAY 5 1926



## 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.



# GRAVE LOCATION BLANK B

LOCATION OF THE GRAVE OF

*Sulver* ..... *Harrison* .....  
 (Surname). (Number). (First Name and Initials).  
*1<sup>st</sup>* ..... *Lieut Co F 160<sup>th</sup>* ..... *Infantry* .....  
 (Rank). (Organization).

PLACE OF DEATH: *Vittel. Hosp. No 2*

CAUSE OF DEATH: *Bronchial pneumonia*

DATE OF BURIAL: *Oct 23<sup>rd</sup> 1918*

PLACE OF BURIAL: *Amer Cemetery 258*

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

*Vittel.*

*Vorges. France*

GRAVE NUMBER: *235*

HOW MARKED: Name Peg? *yes* Cross? *yes*

Headboard? *yes* 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:

.....

NEAREST RELATIVE: .....

ADDRESS: .....

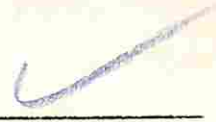
RELATIONSHIP: .....

REPORTED BY:

*Raymond J. Feeney 1<sup>st</sup> Lieut*  
 (Signature and Rank of Reporting Officer).

*Chaplain B. H. 23*

CODE SLIP



HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME <i>Culver,</i>	<i>cul</i>	3	3 1 2
<i>Harrison</i>	CETTERY <i>1232</i>	1	1
BURIED <i>W</i>	GRAVE <i>11</i>	2	11
	ROW <i>37</i>	2	37
	BLOCK <i>6</i>	1	3
STATE	<i>Calif.</i>	2	04
RANK	<i>1st Lt.</i>	1	1
DIVISION	<i>1</i>	2	01
ORGANIZATION	<i>16</i>	3	016
ARM	<i>Inf.</i>	1	1
MARITAL	<i>Remarried</i>	1	3
NAME <i>Hopkins</i>		3	
<i>Mrs Louis A.</i>	STATE	2	
RESIDENCE <i>1048 2.9 St</i>	COUNTY	2	
<i>Long Beach Calif</i>	CITY	3	
RELATION	<i>Mother</i>	1	1
OTHER <i>(no S.M. no Loco)</i>		1	
ELIGIBILITY	<i>Head (Ref. 1918)</i>	1	6
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE		1	

*Re. Wilson*

*Credited*  
 APR 22 1932  
*MB*

*29/514*

*ama*

1233

Culver, Harrison W. 1<sup>st</sup> Lt. - Co F 16 Div

date mother's death? type 1918

Father living in 1918 - Nurtan H. Culver  
Soldiers Home - Cal.

Rem. widow.

C-99334

Loco or SM? no record

no claim for comp - ins to widow

MB

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-M  
Culver, Harrison W. (MA)

June 6, 1932

Mrs. Louis A. Hopkins,  
1048 E. 3rd Street,  
Long Beach, California.

Dear Madam:

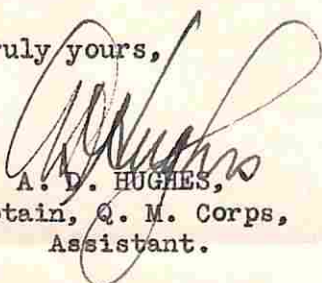
This office is making an earnest endeavor to communicate with all women who may be eligible to make a pilgrimage to the cemeteries of Europe under the provisions of the Act of March 2, 1929, as amended May 15, 1930.

It is therefore requested that you advise whether or not the late First Lieutenant Harrison W. Culver is survived by a stepmother, and if so, her name and address and the date of her marriage to his father.

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

For The Quartermaster General.

Very truly yours,

  
A. D. HUGHES,  
Captain, Q. M. Corps,  
Assistant.

Enclosure:  
Envelope.

*no.*



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON



IN REPLY REFER TO QM-293-AM

Culver, Harrison W. 1st. Lt. (M-A) W

June 12, 1931.

*Remarried Shaw  
J. Culver*

Mrs. Mary E. Culver,  
1048 E. 3rd St.,  
Long Beach, Calif.

Dear Madam:

Arrangements are now being made for conducting pilgrimages during the year 1932 to the cemeteries in Europe under the provisions of the Act of Congress of March 2, 1929, as amended.

To assure proper and satisfactory accommodations, reservations for steamship transportation required during the summer of 1932 must be made by this office not later than August 1st of this year. It is therefore desired that you answer the question below by writing either of the words "Yes", "No", or "Undecided" in the blank space following the question.

As soon as you have answered the question, please sign your name and return this sheet in the enclosed addressed envelope which requires no postage. Do not delay, as a prompt reply is essential.

This letter is being sent to all eligible mothers and widows who did not make a pilgrimage at the expense of the Government during 1930 and are not making the journey in 1931.

For The Quartermaster General,

Very truly yours,  
*A. D. Hughes*

A. D. HUGHES,  
Captain, Q. M. Corps,  
Assistant.



DO YOU DESIRE TO MAKE A PILGRIMAGE DURING THE YEAR 1932? no.  
Write answer here

*Mrs. Louis A Hopkins (formerly  
Mrs. Mary E. Culver)*  
Sign here

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

June 2, 1930.

IN REPLY REFER TO QM 293 A-C  
Culver, Harrison W. -1232 W

Mrs. Mary E. Culver,  
1048 E. 3rd Street,  
Long Beach, California.

Dear Madam:

Arrangements are now being made for conducting pilgrimages during the year 1931, to the cemeteries in Europe under the provisions of the Act of Congress of March 2, 1929.

To assure proper and satisfactory accommodations, reservations for steamship transportation required during the summer of 1931 must be made by this office not later than August 1st of this year. It is therefore desired that you answer the question below by writing the word "Yes" or "No" in the blank space following the question.

As soon as you have answered the question, please sign your name and return this sheet in the enclosed addressed envelope, which requires no postage. Do not delay, as a prompt reply is essential.

This letter is being sent to all mothers and widows who are not making the pilgrimage in 1930, regardless of whether or not they have expressed a desire to make the pilgrimage.

For The Quartermaster General,

Very truly yours

*A. D. Hughes*  
A. D. HUGHES,  
Captain, Q. M. Corps,  
Assistant.

DO YOU DESIRE TO MAKE THE PILGRIMAGE DURING THE YEAR 1931?

no.  
(Write answer here)

*Mrs. Mary E. Culver*  
(Sign here)

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

January 20, 1931

IN REPLY REFER TO QM 293 A-M  
Culver, Harrison W. 1232 W

Mrs. Mary E. Culver,  
1048 E Third Street,  
Long Beach, California.

Dear Madam:

In order that the records of this office may be complete and correct, it is requested that you advise whether or not the late First Lieutenant Harrison W. Culver is survived by a mother, and if so, her name and address.

For your convenience in replying, there is enclosed, herewith, a self-addressed envelope which requires no postage.

For The Quartermaster General.

Very truly yours,



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

Enclosure  
Envelope

*First Lt. H. W. Culver's mother  
is not living.*



WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C  
Culver, Harrison, W.

June 29, 1929.

Mrs. Mary E. Culver,  
1048 E. 3rd St.,  
Long Beach, Calif.

Dear Madam:

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 widow of the late 1st Lieutenant Harrison W. Culver, Co. F, 16th Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, France.

Will you please advise this office whether or not he is survived by a mother who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish her full name and address in order that action may be taken to extend an invitation to her 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 relationship is that of a stepmother, mother through adoption or a woman who stood in loco parentis to the decedent, a statement as to her relationship is requested. In case you have remarried it is also requested that a statement to that effect be made.

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

For The Quartermaster General,

Very truly yours,

2 incls.  
Act of Congress.  
Envelope.

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

QM 293 A-M  
Culver, Harrison W. (MA)

June 6, 1932

Mrs. Louis A. Hopkins,  
1048 E. 3rd Street,  
Long Beach, California.

Dear Madam:

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

It is therefore requested that you advise whether or not the late First Lieutenant Harrison W. Culver is survived by a stepmother, and if so, her name and address and the date of her marriage to his father.

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

For The Quartermaster General.

Very truly yours,

A. D. HUGHES,  
Captain, Q. M. Corps,  
Assistant.

Enclosure:  
Envelope.

KK

0527

1932 JUN - 6 - PM 4 : 35

OQMG M&R BR

✓

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM-293-AM  
Culver, Harrison W. 1st. Lt. (M-A) W

June 12, 1931.

Mrs. Mary E. Culver,  
1048 E. 3rd St.,  
Long Beach, Calif.

Dear Madam:

Arrangements are now being made for conducting pilgrimages during the year 1932 to the cemeteries in Europe under the provisions of the Act of Congress of March 2, 1929, as amended.

To assure proper and satisfactory accommodations, reservations for steamship transportation required during the summer of 1932 must be made by this office not later than August 1st of this year. It is therefore desired that you answer the question below by writing either of the words "Yes", "No", or "Undecided" in the blank space following the question.

As soon as you have answered the question, please sign your name and return this sheet in the enclosed addressed envelope which requires no postage. Do not delay, as a prompt reply is essential.

This letter is being sent to all eligible mothers and widows who did not make a pilgrimage at the expense of the Government during 1930 and are not making the journey in 1931.

For The Quartermaster General,

Very truly yours,

A. D. HUGHES,  
Captain, Q. M. Corps,  
Assistant.

DO YOU DESIRE TO MAKE A PILGRIMAGE DURING THE YEAR 1932? \_\_\_\_\_  
Write answer here

Sign here

0631

JUN 15 58

JUN 12 1931

QMG:MR

QM 295 A-M  
Culver, Harrison W. 1232 W

January 20, 1931

Mrs. Mary E. Culver,  
1048 E Third Street,  
Long Beach, California.

Dear Madam:

In order that the records of this office may be complete and correct, it is requested that you advise whether or not the late First Lieutenant Harrison W. Culver is survived by a mother, and if so, her name and address.

For your convenience in replying, there is enclosed, herewith, a self-addressed envelope which requires no postage.

For The Quartermaster General.

Very truly yours,

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

Enclosure  
Envelope  
IM

D. O. M. G. M. S. R. DIV.  
1931 JAN 20 AM 9 53  
DISPATCHED  
W

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

June 2, 1930.

IN REPLY REFER TO QM 293 A-C  
Culver, Harrison W. -1232 W

Mrs. Mary E. Culver,  
1048 E. 3rd Street,  
Long Beach, California.

Dear Madam:

Arrangements are now being made for conducting pilgrimages during the year 1931, to the cemeteries in Europe under the provisions of the Act of Congress of March 2, 1929.

To assure proper and satisfactory accommodations, reservations for steamship transportation required during the summer of 1931 must be made by this office not later than August 1st of this year. It is therefore desired that you answer the question below by writing the word "Yes" or "No" in the blank space following the question.

As soon as you have answered the question, please sign your name and return this sheet in the enclosed addressed envelope, which requires no postage. Do not delay, as a prompt reply is essential.

This letter is being sent to all mothers and widows who are not making the pilgrimage in 1930, regardless of whether or not they have expressed a desire to make the pilgrimage.

For The Quartermaster General,

Very truly yours,

A. D. HUGHES,  
Captain, Q. M. Corps,  
Assistant.

DO YOU DESIRE TO MAKE THE PILGRIMAGE DURING THE YEAR 1931? \_\_\_\_\_  
(Write answer here)

\_\_\_\_\_  
(Sign here)

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Culver, Harrison W.  
1232.

Sept. 4, 1929

Mrs. Mary E. Culver,  
1048 E. 3rd St.,  
Long Beach, Calif.

Dear Madam:

The records of this office do not indicate that a reply has been received to our communication dated June 29, 1929 making inquiry concerning the name and address of the mother and widow of the deceased service man above named. These addresses are desired with a view to ascertaining the number of mothers and widows who desire to make a pilgrimage to the cemeteries of Europe in which the remains of their sons and husbands are interred.

Will you please fill in the answers to the following questions in the space provided on this letter, and return the letter to this office in the enclosed envelope which requires no postage?

Write answers in space below

1. Is the deceased survived by a widow who has not since remarried? If so, give her complete address:

2. If he is survived by a mother, stepmother, mother thru adoption, or any other woman who stood in loco parentis to him, according to the terms of Section 4 of the enclosed Act, give her name, address, and relationship in the space opposite.

3. If survived by a widow or mother does she desire to make the pilgrimage?

For The Quartermaster General,

Very truly yours,

2 Incls.  
Act of Congress  
Envelope

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

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C  
Culver, Harrison, W.

June 29, 1929.

Mrs. Mary E. Culver,  
1048 E. 3rd St.,  
Long Beach, Calif.

Dear Madam:

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 widow of the late 1st Lieutenant Harrison W. Culver, Co. F, 16th Inf., whose remains are now interred in the Meuse-Argonne American Cemetery, Romagne-sous-Montfaucon, Meuse, France.

Will you please advise this office whether or not he is survived by a mother who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish her full name and address in order that action may be taken to extend an invitation to her 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 relationship is that of a stepmother, mother through adoption or a woman who stood in loco parentis to the decedent, a statement as to her relationship is requested. In case you have remarried it is also requested that a statement to that effect be made.

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

For The Quartermaster General,

Very truly yours,

2 incls.  
Act of Congress.  
Envelope.

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

258-48

Culver, Harrison W

(Surname.)

(Christian name in full.)

(Army serial number)

1st Lt

Co F 16 Inf.

(Rank and organization.)

State your relationship to the deceased. *wife*

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)

*(Mrs.) M. E. Culver*

*10419 E. Third St., Long Beach, California.*

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

APR 7 1919

Fence.

Amer. City #258

checked  
10-22-22

10/13

258-48

drawn by ~~HT~~

In reply refer to:  
293.8 C-R

43000

February 23, 1923.

Mrs. Mary E. Culver,  
1048 E. 3d Street,  
Long Beach, Calif.

Dear Madam:

The Quartermaster General desires that you be informed that the permanent grave of  
1st Lt. Harrison W. Culver, Co. F, 16th  
Infantry, is No. 11, Row 37, Block C, 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, 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,

H. J. Conner,  
Assistant.

MAILED

FEB 23 1923

G.R.S.

22/1423/ARK

*Original*

Place Vittel - Vosges

REPORT OF DISINTERMENT AND REBURIAL

Date Jan. 31 - 1921

1. REMAINS OF Harrison W. Culver SERIAL NUMBER                     

RANK 1st. Lieut ORGANIZATION Co. F. 16th Inf.

2. Disinterred (date) : Jan 31 - 1921 From (give complete location) :

Grave 235 Amer Cem 258 Vittel - Vosges

By : Group one Unit see one

3. Reburied (date) : Jan 31 - 1921 In (give complete location) :

Grave 224 Amer Cem 258 Vittel - Vosges

By : Group one Unit see one Nature of reburial in pine box

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

Body decomposed - unrecognizable - bones at feet  
In uniform and in pine box.

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

Hospital Plate found on cross reads Harrison W. Culver

(b) Other means of identification found upon disinterment, and general remarks : 1st Lt. Co. F. 16th Inf.

Died Oct. 20, 1918

Tag on bone reads H. W. Culver 1st Lt. 160th Inf. U.S.A.

apparently hospital case.

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

(a) Height (actual measurement) 69 inches

(b) Weight (estimated) 145 lbs.

(c) Hair—Color no hair on skull

Quantity none

Characteristics none

(d) Hair on face—Color none on face

Location none

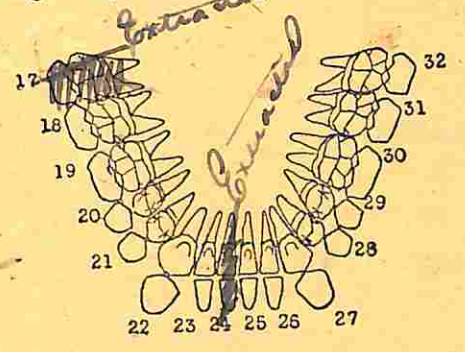
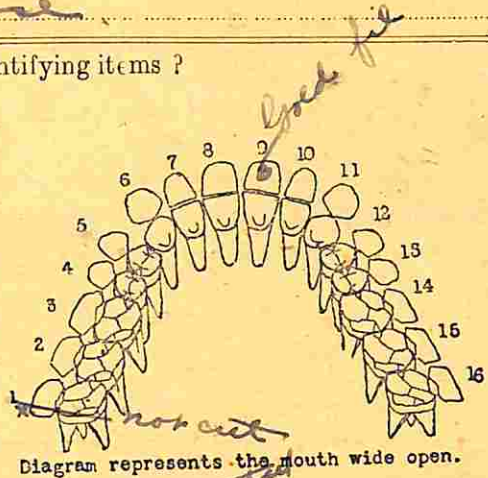
Quantity none

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

Impossible to determine.

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

none.



7. Disinterment supervised by A. B. Proctor  
(A. B. Proctor)  
1st Lt. QMC. Inspector

Approved: Val E. Miltenberger  
(Val E. Miltenberger)  
(Title) Major, M. C. Mas. of Sec. #1

8. Reburial supervised by A. B. Proctor  
(A. B. Proctor)  
1st Lt. QMC. Inspector

Approved: Val E. Miltenberger  
(Val E. Miltenberger)  
Major, M. C. Mas. of Sec. #1

*D 30220*




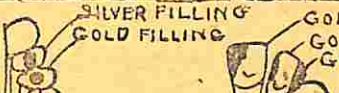

**INSTRUCTIONS FOR THE PROPER COMPLETION OF G. R. S. FORM NO. 16-A**

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



0.7.6

# REPORT OF DISINTERMENT AND REBURIAL

Date October 15th 1921.

1. REMAINS OF CULVER, HARRISON W. SERIAL NUMBER ---  
RANK 1st Lt. ORGANIZATION Co. F 16th Inf.

2. Disinterred (date): October 15th 1921. From (give complete location): Grave 224. American Cemetery, ~~EXXXXX~~ G.R.S. Code # 258, Vittel, (Vosges) France.

By: Group 1 Unit Section 4.

3. Reburied (date): Nov. 30, 1921. In (give complete location): Meuse Argonne Cemetery #1232, Grave 11, Row 37, Block C

By: Group Re-burial 3 Unit \_\_\_\_\_ Nature of reburial Lined Casket

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

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

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

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

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

(b) Weigh, (estimated) --

(c) Hair—Color --

Quantity --

Characteristics --

(d) Hair on face—Color --

Location --

Quantity --

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

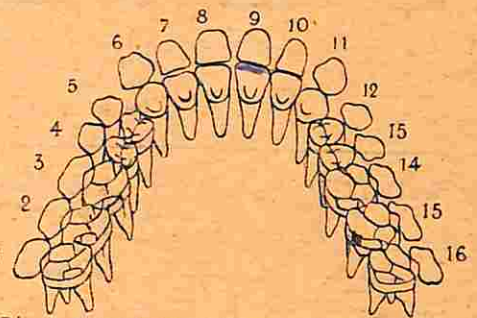
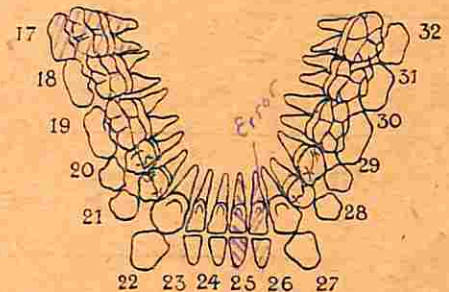


Diagram represents the mouth wide open



(f) Wounds or missing parts (received at time of casualty) Nos. 17, Missing before death. Nos. 25 Missing after death. No. 1 Not cut. No. 9 Gold filling. 60465

Teeth # 22, 23, 25, 26, 27,  
Are crowded and irregular.

Teeth No. 7, 8, 9, 10 are corroded and irregular.

7. Disinterment supervised by A.R. CHENEY, tap.

Approved: C. J. BLAKE, hem  
(Title) Capt. Q.M.C.

8. Reburial supervised by A. U. Dufault

Approved: James W. Younger  
(Title) Captain, QMC



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






Enter information, as noted below, on reverse side of sheet in the *corresponding numbered space*. This form is supplemental to and is to be forwarded with G. R. S. Form 1-a, reporting reburial locations. To be used in answer to Questions 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 :	 <p style="text-align: center;">TOOTH MISSING      TOOTH MISSING</p>
CROWNED TEETH	Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus :	 <p style="text-align: center;">GOLD CROWN      PORCELAIN CROWN GOLD CROWN</p>
BRIDGE WORK	Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge) thus :	 <p style="text-align: center;">GOLD AND PORCELAIN BRIDGE      GOLD BRIDGE</p>
FILLINGS	Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus :	 <p style="text-align: center;">SILVER FILLING      GOLD FILLING GOLD FILLING      GOLD FILLING</p>
CARIES (CAVITIES)	Outline location and size of cavity, shade in thus :	 <p style="text-align: center;">CAVITY DECAYED      DECAYED DECAYED</p>
DENTURES (PLATES)	Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp"	

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

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

To be prepared in triplicate.

DATE October 15th 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 CULVER, Harrison W.

10. Name

2. No.

11. No.

3. Rank 1st Lt.

12. Rank

4. Org. Co. F. 16th Inf.

13. Org.

5. D.D. Oct. 20th. 1918

14. (a) D.D.

6. C.D. Broncho Pneumonia(b) D.B. No Discrepancies.

Discrepancy found upon disinterment

7. Grave No. 224 Sec.

15. Grave No.

Sec.

8. Plot Row

16. Plot Row

9.

17.

No discrepancies.18. Cemetery Amer. Cty.

19. Commune or town

Vittel20. Dept. or County Vosges

21. Country

France22. G.R.S. Hdqrs. Code No. 25823. Disinterred (Date) October 15th 1921.By A.R. CHENEY.

24. Inscription on grave marker:

Name HARRISON W. CULVER.Serial No. ---Rank 1st Lt.Organization Co. F 16th Inf. Grave 224.25. Was identification disc found on grave marker? Yes. On body? No.Signature Thomas A. Pace  
Junior Technical AssistantTHOS. A. PACE.

## PREPARATION

26. What other means of identification were on body? (If no disc or other means of identification on body, give description of body in detail).

No effects found. Reburial record on body established identity. Metal name plate on body. Apparently original grave marker. Form 16a accomplished.27. Condition of body Badly decomposed, recognition impossible.28. Nature of burial In wooden box and blanket.29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? No.30. Body prepared and placed in casket: Date Oct. 15th 1921. By A.R. CHENEY.31. Casket sealed by A.R. CHENEY.

Signature of Embalmer, (Supervisor)

A.R. CHENEY.

SHIPMENT. (Show actual marking of box.) Box No. C-11160

32. Designation of body:

Name CULVER, Harrison W. Serial No. \_\_\_\_\_

Rank 1st Lt. Organization Co.F.16th Inf.

33. Consigned to:

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

34. Casket boxed and marked (Date) October 15th 1921. By A.R. GENEY.

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

Signature of G.R.S. Inspector C.J. BLAKE, Capt. Q.M.C.

36. Remarks \_\_\_\_\_



37. Shipped from point of Operation: (Date) October 18th 1921.

To point of Concentration Neufchateau, (Vosges) France.  
(Name)

Convoyer \_\_\_\_\_ Signature Shipping Officer Capt. Q.M.C.

38. Received at Railhead or Point of Concentration: Date \_\_\_\_\_

By G.R.S. Representative \_\_\_\_\_

39. Shipped from Railhead or Point of Concentration: Date 3 0 OCT 1921

To Permanent Cemetery Romagne-sous-Montfaucon, (Meuse) France.  
(Name)

Convoyer G. L. RIELEX Signature Shipping Officer W.R. Buckley, Capt. Q.M.C.

40. Received: Date \_\_\_\_\_

G.R.S. Representative \_\_\_\_\_

41. Reinterred, Meuse Argonne Cemetery #1232, Nov. 30, 1921  
(Date)

42. Grave No. 11 Section \_\_\_\_\_

43. Plot Block C Row 37

G.R.S. Representative James W. Younger

James W. Younger  
Captain, Q.M.C.

obr

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY  
GRAVES REGISTRATION SERVICE  
WASHINGTON Hoboken, N.J.

DEC 8 - 1920

FROM: Chief, Graves Registration Service, Q. M. G.  
To: Mrs. M. E. Culver, 1048 E. 3rd St., Long Beach, Calif. *W change*  
SUBJECT: Remains of 1st Lieut. Harrison W. Culver, Co. F, 16th Inf.

The records of this office show that you have requested that his body remain in Europe.

If these are not the correct instructions, please correct them. Make corrections on reverse side of this sheet.  
The nearest relative may choose between, (1) return of the body to any address in the United States; (2) interment in Arlington, Va., or any other National Cemetery; or (3) remain in Europe.  
By authority of the Quartermaster General.

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

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

NAME OF—	NO. AND STREET.	TOWN.	STATE.
Soldier's widow	Mrs. M. E. Culver	1048 E. 3rd St.	Long Beach, Calif.
Soldier's children. (Name oldest first.)	1		
	2		
	3		
Father			
Mother			
Brothers. (Name oldest first.)	1	Walbert E. Culver	Flat Shaw, Montana
	2		
	3		
Sisters. (Name oldest first.)	1		
	2	Mrs. W. A. Buxton	Box 266, Soldiers Home, Calif.
	3		

Date Dec. 13, 1920 Signature Mrs. M. E. Culver

Address 1048 E. 3rd St. Relationship wife

GENERAL DIVISION



Dec 13, 1920

I, the undersigned, am the wife and nearest living relative of the within-named soldier, and desire the following disposition of his remains, viz: (Strike out all except the one showing the disposition desired.)

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

Signature Mrs. M. E. Culver.

INSTRUCTIONS FOR FILLING OUT.

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

OFFICE OF THE GOVERNMENTAL SERVICE OF THE ARMY

1985

# COMPILATION OF DISPOSITION OF REMAINS DATA

## I. LOCATION INDEX CARD:

File # 43000

(a) Name CULVER, Harrison W. Ser. No. ---  
 (b) Rank 1st. Lieut Organization Co. F. 16th Inf.  
 (c) Date of death 10/20/18 (d) Cause of death Broncho Pneumonia

TYPE EK  
CKR. 413

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

(a) Grave No. 235 Row --- Plot --- Sec. --- TYP. EK  
 (b) Emerg. Address Mrs. Mary E. Culver (wife) 1048 E. 3rd St.,  
Long Beach, Calif.

## III. Files of soldiers dying from contagious diseases

NO CARD

CKR. ---

EXHUMED FOR  
CONCENTRATION

11-15-21

## IV. A. G. O. DISPOSITION CARD:

Date of receipt None

(a) Name Mrs. M. E. Culver (b) Relationship Wife  
 (c) Address 1048 E. 3rd St. Long Beach, Calif.  
 (d) Remains to be brought to U. S.? No  
 (e) To be interred in National Cemetery in U. S. at ---  
 (f) Shipping instructions upon arrival of body in U. S. ---  
 (g) Disposition instructions if not brought to U. S. ---

Examiner's Initials att Date 9-23-, 1920.

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

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

Examiner's Initials WOTR Date 9-24-, 1920.

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

No request for disposition

(a) Cancellation memos referred to? Yes - none

Examiner's Initials WOTR Date 9-24-, 1920.

COUNTRY France CEMETERY No. 258 SHEET No. 48

11-10-20

Rechecked  
Meth 10-22-20

Renewed 4/11/21

GVO



VII. G. R. S. Form No. 114 made \_\_\_\_\_, 1920.

Typed by \_\_\_\_\_, Checked by \_\_\_\_\_, 1920.

RECEIVED.

JAN 12 1921

VIII. FINAL ACTION:

NOV 26 20

Following advice forwarded to Europe by

cable on \_\_\_\_\_, 1920

letter on **NOV 12 1920**, 1920

CEMETRIAL DIVISION  
OVERSEAS DEPT. AND SEC.

**PARAGRAPH 2 - NOT TO BE RETURNED**

*ged*

IX.

**CORRECTIONS**

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

X. SUSPENSION REMARKS:

*Form # 120 12/13/20 Mrs M E Palmer  
1048 E. 3rd St, Long Beach, Calif, wife  
request body remain in Europe 1/1/21*

**FORM 115 RETURNED BY HOBOKEN - BODY  
TO REMAIN IN EUROPE.**

JAN 10 1921  
JAN 12 1921

COMBINATION OF DISPOSITION OF REMAINS DATA

*See 115  
11-15-21*

I. LOCATION INDEX CARD:

File # 43000

(a) Name.....**GULVER, Harrison W.**..... Ser. No. .... } TYP  
 (b) Rank.....**1st. Lieut.**..... Organization.....**Co. F. 16th Inf.**..... } **BK**  
 Cause of }  
 (c) Date of death **10/20/18**..... death ..... **Breche Pneumonia**

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

(a) Grave No.....**235w**..... Plot ..... Sect. .... } TYP  
 (b) Emerg. Address.....**Mrs. Mary E. Culver(wife) 1048 E. 3rd St.,**..... } **BK**  
**Long Beach, Calif.** CKR *OK*

III. Files of soldiers dying from contagious diseases

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

*a. g. d. card. Mrs. M. E. Culver (wife) 1048  
 E - 3rd St. Long Beach, Cal. requests that  
 body be not returned. ges 11/15/20*

V. Following advice forwarded to Europe by (cable on..... 192  
 (letter of transmittal on..... 192  
*NOV 12 1920*

**PARAGRAPH 2 - NOT TO BE RETURNED** *ges*

VI. Form 115 forwarded to G.R.S. Hoboken, N.J. .... *NOV 23 1920* ..... 192

VII. SUPPLEMENTARY REQUESTS

Date of and Source	Relationship and name	Desires	Action taken

VIII. Form 115 received from G.R.S. Hoboken, N.J. .... *JAN 12 1921* ..... 192

COUNTRY  
 G.R.S. FORM 115-A  
 August , 1920  
 S-666/MB **France**

CEMETERY NO.

SHEET NO.

*24-11-16-20*

293, 8 Reg. Sec. Cem. Div.  
( CULVER, Harrison W.)

April 4, 1921.

The Quartermaster General, U. S. Army ( Cemeterial Division)

Mrs. M. E. Culver, 1048 E. 3rd St., Long Beach, Calif.

Disposition of Remains - Late 1st Lt. Harrison W. Culver, Co. F.  
16th Inf.

1. Replying to your recent communication relative to the above subject you are advised that your wishes will be complied with and the body of your late husband left in France for burial in a permanent American Cemetery.

2. The Department wishes to convey to you its assurance of sympathy in your bereavement.

By authority of the Quartermaster General:

THOS. G. HANSON, Jr.,  
Captain, Q. M. Corps.

OSP:SS  
C. & C. DEPT.

MAILED  
*AG*

APR - 5 1921

Overseas Proj. Sec.  
Cemeterial Division.

Noted on Form No. 115  
Date 4/4/21 J.

JUN 5 1919

NAME Culver, Harrison W.

FILE NUMBER 43000

RANK Lieut.

ORGANIZATION Co.F. 16th Inf.

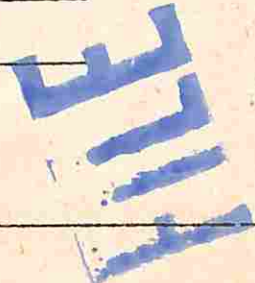
SERIAL NUMBER

NO.	QUESTION	REPLY
1.	Do particulars of soldier given above agree with records?	1) 1st Lieut
2.	Date of death?	2) 10/20/15
3.	Cause and place of death?	3) Broncho Pneumonia
4.	Has this been reported on Casualty Cablegram, if so, give reference.	4) 299
5.	Date of burial?	5) 10/23/15
6.	Grave Location:	6) bty 208, Grave 235, Amer. bty: Vittel, (Vosges)
7.	Who reported burial?	7) _____
8.	Confirmed by G.R.S.?	8) yes CONFIRMED No D _____
9.	How is grave marked?	9) Cross
10.	Identification Tags: (a) Buried with body? (b) Attached to grave marker?	10) One tag on grave marker
11.	Emergency address:	11) Mrs Mary E. Culver, Wife 1048, E. 3rd St, Long Beach, Calif.
12.	Has above been notified? (Give date)	12) 12/28/15

ANALYSIS OF INQUIRY

Flowers, flags, etc. (Par. #5, Bul. 10-B)	Effects (G.R.S. Form No. 7&7-A)
Monuments (Par. #6, Bul. 10-B)	Accrued Pay (G.R.S. Forms Nos. 19 & 22)
Disinterments (Par. #8, Bul. 10-B)	Liberty Bonds (G.R.S. Forms Nos. 21 & 22)
Circumstances of death (G.R.S. Form No. 6)	War Risk Insurance (G.R.S. Forms Nos. 20 & 22)
Photographs requested (File 004.5)	Disposition of Remains (a) Return to U.S. (Form 25)
Grave Location	(b) Remain in France (Form 24)
	(c) Miscellaneous (Letter)

Remarks:



V

ef. No. 34540

AMERICAN RED CROSS

Paris, . . . . . May 21st . . . . . 1919 . . . . .

**Name of Soldier:** Harrison W. Culver

**Rank:** Lieutenant

**Company:** F

**Regiment:** 16th Inf.

Forward Burial Report to  
"Bureau of Communication" for

Burial report required for Paris.

*Handwritten initials: BMC*

43000

# GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

*Culver* ..... *Harrison* .....  
(Surname). (Number). (First Name and Initials).  
*1<sup>st</sup> Lieut Co F 16<sup>th</sup> Infantry* .....  
(Rank). (Organization).

PLACE OF DEATH: *Vittel Hosp no 2* .....

CAUSE OF DEATH: *Bronchial pneumonia* .....

DATE OF BURIAL: *Oct 23. 1918* .....

PLACE OF BURIAL: *armed cemetery 258* .....

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

*Vittel* .....

*Hospes France* .....

GRAVE NUMBER: *235* .....

HOW MARKED: Name Peg? *yes* ..... Cross? *yes* .....

Headboard? *yes* ..... 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:

*258*

NEAREST RELATIVE: .....

ADDRESS: .....

RELATIONSHIP: .....

REPORTED BY: .....

*Wesley Fenney 1<sup>st</sup> Lieut* .....  
(Signature and Rank of Reporting Officer).

*Chaplain B H 23* .....

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

30001 1004

30 OCT 1918

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

Hq. G. R. S. File

43000

2. Soldier's No. . . . .

3. *Culver* . . . . . *Harrison W*  
Surname (in block letters) First Name and Initials

4. *1st Lt.* . . . . . *H* . . . . . *16 Inf*  
Rank Company Regt. or Corps

5. *Oct 20, 1918* . . . . . *Broncho Pneumonia*  
Date of Death Cause, if known

6. *Oct 23, 1918* . . . . . *258*  
Date of Burial Cemetery

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

8. *235*  
Grave No. Plot No. or Letter

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

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

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

258

12. . . . .  
Map Reference, if interment is outside of cemetery

13. . . . .  
Give name of Chaplain or Burial Officer

Signed. *Private Harry A Jones*

Group . . . . . Unit. *6* . . . . . G. R. S.



HEADQUARTERS USA BASE HOSPITAL #23.  
OFFICE OF THE QUARTERMASTER.

Dec. 9, 1918.

From : Quartermaster USA Base Hospital #23, A.P.O. 732.  
To : Chief Quartermaster, AEF, A.P.O. 717.  
Subject : Report of cost of interment.

1. Report of death and interment and cost of interment is made as follows :

Name : Culver, Harrison W., 1st Lt.,

Organization : Co. F, 16 Infantry.

Place of death : USA Base Hospital # 23.

Date : Oct. 20, 1918.

Disposition of remains : Buried at this station.

Place of interment : American plot, AEF cemetery # 258,  
Vittel, Vosges, France.

Method of marking grave : Two foot cross, one and one half  
foot cross arm. The following  
information was painted on the  
cross in addition to an identi-  
- fication tag tacked on :

Name, rank, organization, place of  
birth, place of death.

Itemized statement of expenses :

Preparation of grave	6.00
Cost of coffin ( est )	17.10
	<hr/>
	23.10 Francs.

*Warren W. Sloss*  
Warren W. Sloss,  
2nd Lt. QMC, USA,  
Quartermaster.

B.



HELIQUARTERS USA BASE HOSPITAL # 28.  
OFFICE OF THE CHIEF QUARTERSMASTER.

Dec. 9, 1918.

From : Quartermaster USA Base Hospital # 28, A.P.O. 732.  
To : Chief Quartermaster, AMB, A.P.O. 714.  
Subject : Report of cost of interment.

I. Report of death and interment and cost of interment is made as follows :

Name : Driver, Harrison W. 1st Lt.

Organization : Co. F, 16th Infantry.

Place of death : USA Base Hospital # 28.

Date : Oct. 20, 1918.

Disposition of remains : Buried at this station.

Place of interment : American Cemetery # 288, Vittel, France.

Method of marking grave : Two foot crosses, one and one half foot across and the following information painted on the crosses in addition to an identification tag tacked on :

Name, rank, organization, place of birth, place of death.

Itemized statement of expenses :

Preparation of grave	2.00
Cost of coffin (est)	17.10
	<hr/>
	23.10 Francs.

Warren W. Glass,  
2nd Lt. QMC, USA,  
Quartermaster.



43000

Culbert, Harrison W., 1st Lt.

B.