

Cundiff,

William

1,556,583

(Surname.)

(Christian name in full.)

(Army serial number.)

Pvt. 1st Cl.

Co. D, 165th Inf.

(Rank and organization.)

State your relationship to the deceased.

Do you desire the remains brought to the United States?

(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)

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

3-6713

gc

MAY 11

DATE 12/16/21

1. NAME CUNDIFF, William SERIAL No. 1556583

RANK Pvt.1/C1. ORGANIZATION Co.D., 165th Inf.

8 DIVISION 42

GRAVE LOCATION ~~Meuse-Arg.Amer.Cty.Romagne-sous-Montfaucon (Meuse)~~ 1232, Sec. 40
CTY. NAME NUMBER

*59 author. F. 160.
68 Sec. 40*

GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 62 BAC Baulny Meuse *Cy# 876*

GRAVE COMMUNE DEPT.

COORDINATES Verdun 35SE 277.35N 302.25E

CONCENTRATED TO 5/6/19 *59* ~~68~~ Sec 40 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.

Tag on body and cross *data f-1/pfb*

DATE OF DEATH *Oct 14, 1918*

STATE FROM WHICH HE CAME *Ky*

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 12/16/21 2 25 Block D.
DATE GRAVE ROW ~~XXIX~~

Meuse-Argonne American Cemetery #1232, Romagne-sous-Montfaucon, Meuse, CEMETERY

AUDITED BY
1074-7-03

MAY 15 1928
WORLD WAR DIV.

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.



Co D, 165th Infantry.
42nd Division.

Cundiff, William-Pvt. 1st Class.
1556583.
Home. Salt Lick, Kentucky.

He was badly wounded on Oct. 14/1918, while advancing through woods near Landres by the explosion of a shell near him. He was carried away, and later died in a hospital.

Informant. Lynch, Joseph J.-Sgt. 89809.
Co D. 165th Infantry.
Home. 47 West, Post road, White plains.
N.Y.

Signed. Joseph J. Lynch. Sgt. Co D.
165th Infantry.

Emergency address.
Mrs Betty Dickison.
Salt Lick. Ky.

G.C.C.

CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	<i>Cum</i>	3	<i>3-12-04</i>
<i>William</i>	CEMETERY <i>1232</i>	1	<i>1</i>
BURIED	GRAVE <i>2</i>	2	<i>02</i>
	ROW <i>25</i>	2	<i>25</i>
	BLOCK <i>D</i>	1	<i>4</i>
STATE	<i>Ky.</i>	2	<i>20</i>
RANK	<i>Priv. 1st.</i>	1	<i>2</i>
DIVISION	<i>42</i>	2	<i>42</i>
ORGANIZATION	<i>165</i>	3	<i>165</i>
ARM	<i>Inf.</i>	1	<i>1</i>
MARTIAL	<i>no</i>	1	<i>2</i>
NAME		3	
<i>Mr. Chas. H.</i>	STATE	2	
RESIDENCE	COUNTY	2	
<i>Tiffin, Ohio</i>	CITY	3	
RELATION	<i>Neother</i>	1	<i>1</i>
OTHER		1	
ELIGIBILITY	<i>Dead</i>	1	<i>6</i>
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE		1	

John

*no loco
no SM*

Audited
APR 28 1932
omb

Mr. P. H.
29/514/PJ

20

1232

Cundiff W. Mr. - Pot 1 el. Co D 165 Day

no loco
per U.S.

Date mother's death? } no record
Father living?

Gdn. - Tiffin Ohio.

XC-126408

Loco a ~~SM~~? no record

Born - 3-13-92 - sub - 7-21-17

1st grade minor sister + has boy
at sub - they were in an airplane
MB

2 ^{ms} - Jolly A. Parrett
Q. P. Ryan - W. Va

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

July 8, 1930

Cundiff, William

1232-0

Mr. Charles H. Kernan
Tiffin, Ohio

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress of March 2, 1929, together with an amendment thereto, approved May 15, 1930.

This office has no record of any person entitled under the Act mentioned to make a pilgrimage to the cemeteries in Europe as the mother or widow of the above named deceased service man. To complete the list of eligibles and to assure that, if the above named man is survived by a mother or widow entitled to make a pilgrimage she receive an invitation to do so, it is requested you answer the following questions in the space provided on this letter and return to this office in the enclosed envelope which requires no postage.

1. Is the deceased survived by a mother?

If so, give her name and address:

2. Is the deceased survived by a widow who has not remarried?

If so, give her name and address:

3. Is the deceased survived by any woman who stood in loco parentis to him according to the terms of Section 4 (a) of the enclosed Act as amended?

If so, give her name and address:

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Cundiff, William
1232.

Sept. 4, 1929

Mr. Charles H. Kernan,
Tiffin, Ohio

Dear Sir:

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:

no

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.

no

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

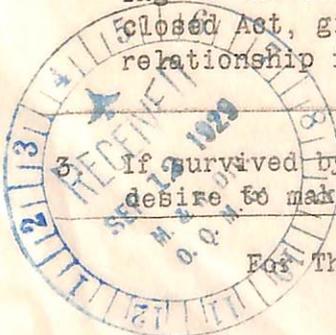
no

For The Quartermaster General,

Very truly yours,

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

2 Incls.
Act of Congress
Envelope



WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C
(Cundiff, William)

June 29 1929.

Mr. Chas. H. Kernan,
Tiffin, Ohio.

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress approved March 2, 1929, entitled an Act "To enable the mothers and widows of the deceased soldiers, sailors and marines of the American forces now interred in the cemeteries of Europe to make a pilgrimage to these cemeteries".

The records of this office show that you are the guardian of Clarence E. Cundiff, brother of the late Private William Cundiff, Co. D, 165th 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 or widow who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish the full names and addresses of the mother and widow in order that action may be taken to extend invitations to them to make the pilgrimage. Both mothers and widows are entitled to make the pilgrimage.

Your attention is particularly invited to Section 4 of the enclosed Act, which defines the terms "mother" and "widow". If the relative is a stepmother, mother through adoption, or any woman who stood in loco parentis to the decedent, a statement as to her relationship is requested. If he was survived by a widow who has since remarried it is also requested that a statement to that effect be made.

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

For The Quartermaster General,

Very truly yours,

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

July 8, 1930

Cundiff, William

1232-0

Mr. Charles H. Kernan
Tiffin, Ohio

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress of March 2, 1929, together with an amendment thereto, approved May 15, 1930.

This office has no record of any person entitled under the Act mentioned to make a pilgrimage to the Cemeteries in Europe as the mother or widow of the above named deceased service man. To complete the list of eligibles and to assure that, if the above named man is survived by a mother or widow entitled to make a pilgrimage she receive an invitation to do so, it is requested you answer the following questions in the space provided on this letter and return to this office in the enclosed envelope which requires no postage.

1. Is the deceased survived by a mother?

If so, give her name and address:

2. Is the deceased survived by a widow who has not remarried?

If so, give her name and address:

3. Is the deceased survived by any woman who stood in loco parentis to him according to the terms of Section 4 (a) of the enclosed Act as amended?

If so, give her name and address:

For The Quartermaster General,

Very truly yours,

Enclosures:
Envelope
Act
Amendment

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

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Cundiff, William
1232.

Sept. 4, 1929

Mr. Charles H. Kernan,
Tiffin, Ohio

Dear Sir:

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
(Cundiff, William)

June 29 1929.

Mr. Chas. H. Kernan,
Tiffin, Ohio.

Dear Sir:

Your attention is invited to the enclosed copy of an Act of Congress approved March 2, 1929, entitled an Act "To enable the mothers and widows of the deceased soldiers, sailors and marines of the American forces now interred in the cemeteries of Europe to make a pilgrimage to these cemeteries".

The records of this office show that you are the guardian of Clarence E. Cundiff, brother of the late Private William Cundiff, Co. D, 165th 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 or widow who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish the full names and addresses of the mother and widow in order that action may be taken to extend invitations to them to make the pilgrimage. Both mothers and widows are entitled to make the pilgrimage.

Your attention is particularly invited to Section 4 of the enclosed Act, which defines the terms "mother" and "widow". If the relative is a stepmother, mother through adoption, or any woman who stood in loco parentis to the decedent, a statement as to her relationship is requested. If he was survived by a widow who has since remarried it is also requested that a statement to that effect be made.

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

For The Quartermaster General,

Very truly yours,

2 incls.
Act of Congress.
Envelope.

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

In reply refer to:
QM - 293 C-R

July 21, 1923.

Mr. Chas. H. Kernan,
Guardian of Clarence E. Cundiff,
Tiffin, Ohio.

Dear Sir:

The Quartermaster General desires that you be informed that the permanent grave of

Private 1/c William Cundiff, Company D,
165th Infantry, is Grave 2, Row 25, Block D, 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 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,

H. J. Conner,
Assistant.



JUL 21 1923
C. E. M.

RD

L

COMPILATION OF DISPOSITION OF REMAINS DATA

File # 85654

I. LOCATION INDEX CARD:

(a) Name CUNDIFF, William Ser. No. 1556583,
(b) Rank Pvt. 1/C Organization Co. D. 165th Inf.
(c) Date of death 10-14-18 (d) Cause of death WRIA

TYP. hmp
CKR. B. J.

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

(a) Grave No. 59 author F. 16 a. Row --- Plot 2 Sec. 40 TYP. hmp
(b) Emerg. Address Mrs. Betty Dixon, (Aunt) Salt Lick, Ky. (Que)

III. Files of soldiers dying from contagious diseases 290 (4-10-21) CKR. B. J.

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 4-9-21, 1920.

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

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

No Comms.

Examiner's Initials Date 4-9-21, 1920.

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

No Request for disposition

(a) Cancellation memos referred to? Yes

Examiner's Initials Date 4-9-21, 1920.

COUNTRY FRANCE

CEMETERY No. 1232 Sec. 40

SHEET No. 81

49 7/1/21 Checked by M 6-25-21

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 4/19, 1920

See 40
Par 2 not to be returned LPA

IX.

CORRECTIONS

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

X. SUSPENSION REMARKS:

B/A. W.R.
Chas. H. Kernan
Edn. of Clarence E. Cundiff (Brother)
Tiffin, Ohio
(6-25-21) H

Place Romagne Sous-Montfaucon

REPORT OF DISINTERMENT AND REBURIAL

Date Dec. 16, 1921.

1. REMAINS OF CUNDIFF WILLIAM SERIAL NUMBER 1556583

RANK Pvt. 1/c ORGANIZATION Co., D. 165th Inf.

2. Disinterred (date): Dec. 16, 1921. From (give complete location):

Gr. 59 sec 40 pt 2 Cem., #1232.

By: Group 1 Unit Sec. 1

3. Reburied (date): In (give complete location):

Dec. 16th, 1921, Grave 2, Row 25, Block D, Cemetery 1232.

By: Group Reburial S Unit _____ Nature of reburial Unlined Casket

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

decomposed unrecognizable. uniform, burlap and box.

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

body tag reads: "William Cundiff 1556583, body found in gr. 59 sec 40 pt 2 #1232.

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

Original reburial record on body reads: "William Cundiff 1556583 Pvt. 1/c Co., D. 165th Inf. reburied June 7-21. in Gr. 59 sec 40 worked by Group 4 sec 1.

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

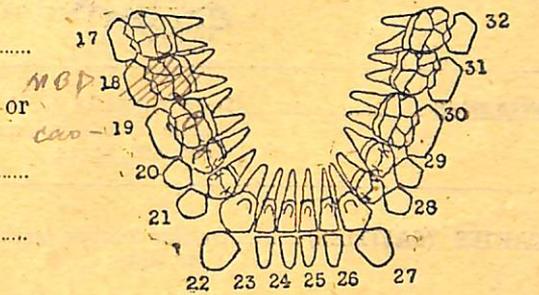
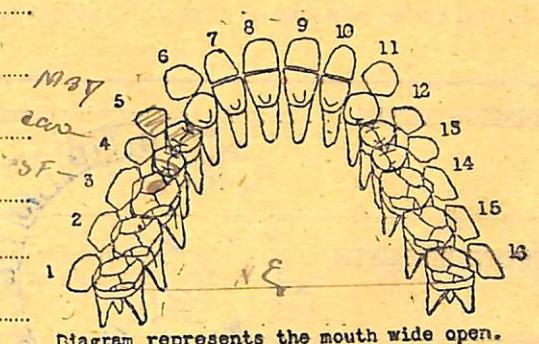
(d) Hair on face—Color do

Location do

Quantity do

(e) Permanent marks on body (old scars, peculiarities, or missing parts) None visible

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



D-31149

7. Disinterment supervised by H. H. Foster
H? H. Foster

Approved: F. B. Daniel
F. B. Daniel Capt. MC
(Title)

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

Approved: James W. Younger
James W. Younger,
(Title) Captain U.S.A.

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 align="center">TOOTH MISSING TOOTH MISSING</p>
<p>CROWNED TEETH.....Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus:</p>	 <p align="center">GOLD CROWN PORCELAIN CROWN</p>
<p>BRIDGE WORK.....Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:</p>	 <p align="center">GOLD AND PORCELAIN BRIDGE GOLD BRIDGE</p>
<p>FILLINGS.....Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus:</p>	 <p align="center">SILVER FILLING GOLD FILLING GOLD FILLING GOLD FILLING</p>
<p>CARIES (CAVITIES).....Outline location and size of cavity, shade in thus:</p>	 <p align="center">CAVITY DECAYED DECAYED DECAYED</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.

To be prepared in triplicate.

DATE Dec 16 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 CUNDIFF, William

2. No. 1556583

3. Rank Pvt.1/Cl.

4. Org. Co.D., 165th Inf.

5. D.D. 10-14-18

6. C.D. WRIA

10. Name _____

11. No. _____

12. Rank _____

13. Org. _____

14. (a) D.D. _____

(b) D.B. None

Discrepancy found upon disinterment

7. Grave No. 68 Sec. 40

8. Plot 2 Row _____

9. _____

15. Grave No. 59 Sec. 40

16. Plot 2 Row _____

17. Gen 1232

18. Cemetery Meuse-Argonne American

20. Dept. or County Meuse

22. G.R.S. Hdqrs. Code No. 1232.Sec.40

19. Commune or town Romagne-sous-Montfaucon

21. Country France

23. Disinterred (Date) Dec 16 1921

By H H Foster.

24. Inscription on grave marker:

Name William Cundiff

Rank PFC

Serial No. 1556583

Organization Co D 165 Inf

25. Was identification disc found on grave marker? Yes On body? Yes

John H. Crawford
Signature Junior Technical Assistant
John H Crawford

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).

Original reburial record on body reads: William Cundiff 1556583 PFC Co D 165 Inf reburied June 7 1921 in Gr 59 Sec 40. worked by Gr 4 Sec 1

27. Condition of body Badly decomposed, features unrecognizable

28. Nature of burial Uniform, burlap and box.

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? xNone x See Items 15 to 17

30. Body prepared and placed in casket: Date Dec 16 1921 By H H Foster.

31. Casket sealed by H H Foster

Signature of Embalmer, (Supervisor H H Foster
H H Foster.

SHIPMENT. (Show actual marking of box.) Box No. C-18414

32. Designation of body:

Name William CONDITT Serial No. 1556583

Rank Pvt. 1/Cl. Organization Co. D., 166th Inf.

33. Consigned to:

Name of Permanent Cemetery Meuse-Arg. Amr. Cty. #1232. Romagne -sous-Montfaucon. Meuse.

34. Casket boxed and marked (Date) Dec 16 1921 By H H Foster.

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

36. Remarks F B Daniel Capt QMC



37. Shipped from point of Operation: (Date) Dec 16 1921 cc

To point of Concentration Morgue Romagne

Convoyer W J Royed Signature Shipping Officer J. Gerald Cole
(Name J. Gerald Cole
Captain, C. A. G.

38. Received at Railhead or Point of Concentration: Date

By G.R.S. Representative

39. Shipped from Railhead or Point of Concentration: Date

To Permanent Cemetery

Convoyer (Name Signature Shipping Officer

40. Received: Date

G.R.S. Representative

41. Reinterred Meuse Argonne Cemetery 1232. Dec. 16th, 1921.

(Date

42. Grave No. 2 Section

43. Plot Block. D Row 25

G.R.S. Representative

James W. Younger

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

JEL

REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name: CUNDIFF William

Number: 1556583

Rank: Pvt. *100*

Organization: Co D 165th Inf.

Disinterment and Reburial made by Group

Unit

Disinterred (Date)

From: (Give complete location)

6th May 1919

Grave # 62 B:A: CEMETARY

BAULNEB MEUSE 35SE 302.25E 277.35N

220 11-12-21

Reburied (Date)

in: (Give complete location)

6th May 1919

Grave # 68 Sec 40 Plot 2

ARGONNE AMERICAN CEMETARY # 1232

ROMAGNE MEUSE

1232

59 author 7/16/20. Transposition of grave. 220 4-7-23

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

Burial good, buried in Blanket. Body badly decomposed.

Was one identification tag found upon the body?

Yes

What other means of identification were found on the body?

None

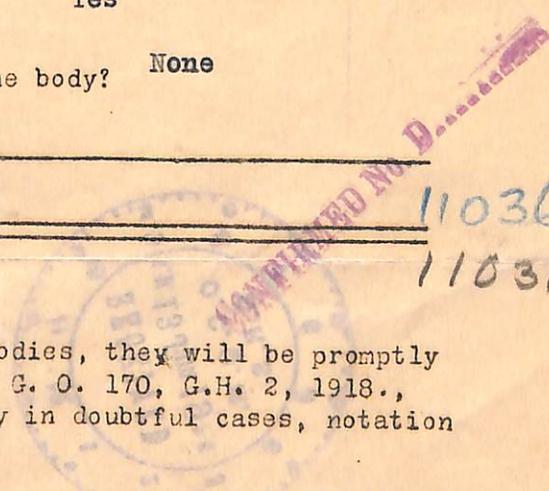
Note:

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, G.R.S.

Supervised by: Lt. Armitage . r/s

R. H. ROSENTHAL
C.O. Group 2nd Lieut. Unit C.U.S.A

11036
11036



Date: 7th June 1919

REPORT OF DISINTERMENT AND REBURIAL

Remains of:

Name: GUNDIRP William
Rank: Pvt. 1st
Organization: Co D 188th Inf.
Number: 155883

Disinterment and Reburial made by Group Unit

Disinterred (Date) From: (Give complete location)

6th May 1919 Grave # 68 B: A: Cemetery

PAULINEY MR USE 358E 302. 25E 277. 35E

Reburied (Date)

6th May 1919

in: (Give complete location) Grave # 68 Sec 40 Plot 2

ARGONNE AMERICAN CEMETERY # 1232

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

Was one identification tag found upon the body? Yes

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



Note: If upon disinterment, effects are found upon body, report to the Effects Depot direct, as required by instructions after being carefully examined for clues to identity, whereof will be made and reported to Chief, G.R.S.

Supervised by: Lt. Amstutz

Place Romagne Sous Montfaucon.

REPORT OF DISINTERMENT AND REBURIAL

Date June 7th-21 Meuse.

1. REMAINS OF CUNDIFF, William SERIAL NUMBER 1556583
RANK Pvt 1st, cl. ORGANIZATION Co. D. 165 Inf.

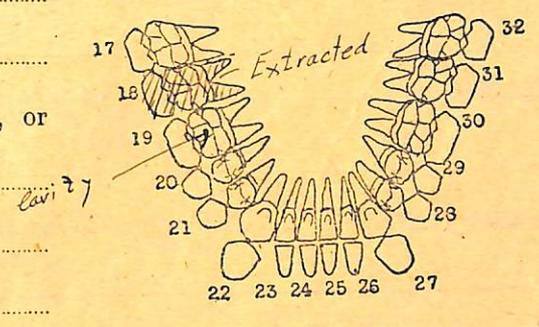
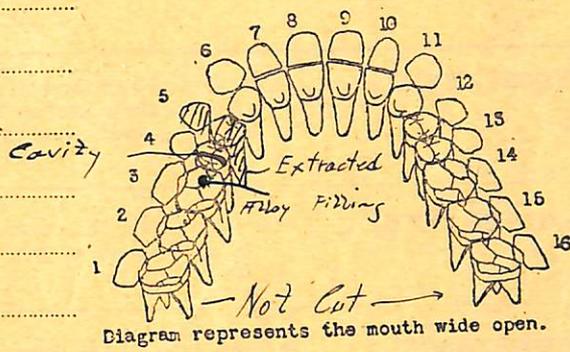
2. Disinterred (date): June 7th-21 From (give complete location): Gr No. 59
Section 40 Plot 2 Argonne American Cem. 1232
By: Group 4. Unit Section. 1.

3. Reburied (date): June 7th-21 In (give complete location): Gr 59
Section. 40 Plot 2 Argonne Ame. Cine
By: Group 4 Unit Sec 1. Nature of reburial In Burlap in pine box

4. Report as to nature of original burial and condition of body upon disinterment:
Uniform in Burlap in Pine box body desintegrated Buried under grave marked of
BAYLOR DEAMS Pvt, Co.C. 117th Engers Deems matalic plates found in box.

5. (a) Identification tags: Buried with body? Yes On grave marker? No
(b) Other means of identification found upon disinterment, and general remarks: NO indication
of having been hospital case. Cundiff identification disc found on remains Same read s
William Cundiff U.S.A.)Cundiff Grave marker found of grave 68

6. What does examination of body show as regards the following identifying items?
(a) Height (actual measurement) Impossible to determine
(b) Weight (estimated) Impossible to estimate
(c) Hair—Color No hair on Skull
Quantity None
Characteristics None
(d) Hair on face—Color None
Location None
Quantity None
(e) Permanent marks on body (old scars, peculiarities, or missing parts) Impossible to report.
(f) Wounds or missing parts (received at time of casualty) None visible



7. Disinterment supervised by E.T.A.
E.T. Anderson
Sup. Embalmer

Approved: [Signature]
(Title) G.D. Gamble
1st Lt U.S.

8. Reburial supervised by E.T.A.

Approved: [Signature]
(Title) Inspector.

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

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

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

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

I. LOCATION INDEX CARD:

File # 85654

(a) Name CUNDIFF, William Ser. No. 1556583,
 (b) Rank Pvt. 1/0 Organization Co. D. 165th Inf. } TYP. hmp
 (c) Date of death 10-14-18 (d) Cause of death WRIA } B. J.

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

(a) Grave No. 59 author F. 16 a Row --- Plot 2 Sec. 40 TYP. hmp
 (b) Emerg. Address Mrs. Betty Dixon, (Aunt) Salt Lick, Ky.

III. Files of soldiers dying from contagious diseases / / RR 9-90 (1-18-21) C CKR. B. J.

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

V. Following advice forwarded to Europe by { cable on _____, 192
 letter of transmittal on 4/19, 192 /
Sec 40
Par 2 Not to be returned SPW

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. _____

OSP-SS
Form No. 1009

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

COPY

Harlow C.W.

NAME OF DECEASED SOLDIER	CEMETERY NO.	DATE
Cundiff, William, Pvt. 1/c.	1232-Sec.40 - 81	4/11/21.
SERIAL NUMBER	ORGANIZATION	DATE OF DEATH
1556583	Co. D, 165th Inf.	10/14/18.

Original Attached to
Form 115

WAR RISK INSURANCE INFORMATION

Date 6-25-21-H

DATE _____

Chas. H. Kernan

PERSON NAMED BY SOLDIER TO BE BENEFICIARY OF INSURANCE	RELATIONSHIP
<i>Son of Clarence E. Cundiff</i>	<i>(Brother)</i>
<i>Tiffin, Ohio</i>	
ADDRESS	

PERSON RECEIVING DEATH COMPENSATION	RELATIONSHIP
-------------------------------------	--------------

Adjustment Made

85 1922

57933

File No.

RECEIVED
APR 13 1921

WAR DEPARTMENT
Office of the Quartermaster General of the Army
Washington

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

Date 4/11/21.

File No. Requisition

Adjustment made
MIN. 29-1921
57933
2

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.

Noted on Form No. 15
Date 4-18-21

- a. Surname Cundiff ✓
- b. Christian name William ✓
- c. Serial Number 1556583 ✓
- d. Organization Co. D, 165th Inf. ✓
- e. Rank Pvt. 1/c. ✓
- f. Date of death 10/14/18. ✓
- g. Cause of death WRIA. ✓
- h. Authority (C.O.#)
- i. Emergency address
- j. Relationship Betty Dixon
Salt Lick
Aunt ✓

BODY DESCRIPTION

(See page #2 of the Service Record)

- a. Age of enlistment
- b. Color of eyes
- c. Color of hair
- d. Height
- e. Weight
- f. Permanent marks and physical defects at enlistment (Old fractures or breaks)

DENTAL CHARTS

(See Physical report of examination prior to enlistment)

- a. Strike out teeth missing
- | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 8 | 7 | 6 | 5 | 4 | 3 | 2 | 1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
- upper right upper left
- | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 8 | 7 | 6 | 5 | 4 | 3 | 2 | 1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
- lower right lower left

Donnelly EPS 7-4/12/21

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

CEMETERY NO: C.W. 1232-Sec.40.

BY: *[Signature]*
H. J. CONNER,
1st. Lieut. Q.M.C.

SHEET NO: 81
TYPED BY: I.W.

Rec'd World War Div.
Date APR 12 1921

RECEIVED

APR 13 1921

WAR DEPARTMENT
Office of the Quartermaster General of the Army
Washington

Date 4/11/21

U.S. Form 8-W-1
Information reported to A.S.G.
File No. 1181
Registration

From: The Quartermaster General, U.S. Army, (Cometrol Division)
To: The Adjutant General of the Army, 6th & E Sts., N.W., Washington, D.C.
Subject: Information reported for G.R.S.

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

- a. Surname *Condill*
- b. Christian Name *William*
- c. Serial Number *138888*
- d. Organization *Co. D, 138th Inf.*
- e. Rank *Pvt. 1/c.*
- f. Date of birth *10/14/18*
- g. Cause of death *WIA.*
- h. Authority (C.O.W.)
- i. Emergency address
- j. Relationship

PHYSICAL DESCRIPTION
(See page 2 of the Service Record)

- a. Age at enlistment
- b. Color of eyes
- c. Color of hair
- d. Height
- e. Weight
- f. Permanent marks and physical defects of equipment (old fractures or breaks)
- g. Strike out teeth missing
- h. Upper right *1 2 3 4 5 6 7 8*
- h. Upper left *1 2 3 4 5 6 7 8*
- i. Lower right *1 2 3 4 5 6 7 8*
- i. Lower left *1 2 3 4 5 6 7 8*

M. J. ROSS
Quartermaster General, U.S.A.

M. J. ROSS
1st Lieut. & Maj.

CENTURY NO. 1388-888-40
SERIAL NO. 81
FILE NO. 1181

PHYSICAL

85654

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
WASHINGTON

Cty 1232

Date 12/27/20

File No. 85654 Registration.

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

To: The Adjutant General of the Army, Sixth and B Streets NW., 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. **CUNDIFF** ✓
- b. Christian name. **William** ✓
- c. Serial number. **1556588** *1556,583* ✓
- d. Organization. **Co. D, 165th Inf.** ✓
- e. Rank. **Pvt. 1st** ✓
- f. Date of death. *Oct. 17, 1918* ✓
- g. Cause of death. *wounded rec. in action* ✓
- h. Authority (C. C. No.) *326* ✓
- i. Emergency address. *Betty Dixon Salt Lake, Ky.* ✓
- j. Relationship. *Aunt.* ✓

BODY DESCRIPTION.

(See page 2 of the Service Record.)

- a. Age at enlistment.
- b. Color of eyes.
- c. Color of hair.
- d. Height.
- e. Weight.
- f. Permanent marks and physical defects at enlistment. (Old fractures or breaks.)

DENTAL CHARTS.

(See physical report of examination prior to enlistment.)

a. Strike out teeth missing:

8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Upper right.								Upper left.							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Lower right.								Lower left.							

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

By

[Signature]
H. J. CONNER,
Captain, Q. M. C.

World War Div.

DEC 28 1920

Donnelly/AMJ

eps w97

14/29 20

27

57933

From

85654

REMI

12A9A383

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

Hq. G. R. S. File

2. Soldier's No. 1556583

3. GUNDIFF WILLIAM

Surname (in block letters) First Name and Initials

4. Rank Company D Regt. or Corps 165 INF

5. Date of Death Oct. 15, 1918 Cause, if known

6. Date of Burial A.E.F. Cemetery NOT

7. BAULNY MEUSE
Town or Commune (in block letters) Department

8. Grave No. 62 Plot No. 3 or Letter

9. Name Peg? Cross? 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.

100 M. N. BAULNY, CHARPENTRY ROAD.

1/4 KILON. W. CHARPENTRY.

12. 200 M. E. VARENNES, FLEVILLE ROAD
Map reference, if interment is outside of cemetery

MAP 35 SE. 277.3 N. + 302.1 E.

13. RBK 159
Give name of Chaplain or Burial Officer

SKETCH # 42 Signed George Dickhoff

Group 4. Unit 306. G. R. S.



75654

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Cundiff 1556588 William
(Surname.) (Number.) (First Name and Initials.)

Pvt Co. D, 165th U.S. Inf
(Rank.) (Organization.)

DATE OF BURIAL... October 14, 1918

PLACE OF BURIAL... BAUM

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

GRAVE NUMBER...

HOW MARKED: Name Peg? Yes Cross? Yes

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:

~~CMME Baum (P.E. 15 E)
(C-114) SHT 355 E COORD~~

E 302
N 277.2

REPORTED BY: Eugene Kennedy Chaplain 150th U.S.
(Signature and Rank of Reporting Officer.)

Eugene Kennedy Chaplain 150th U.S. Inf
This portion to be sent to Chief of Graves Registration Service.

NOV 1918

Communal List No. 216-481
Daily Report No. _____

G.R.S. Form No. 8; Central Records Liaison.
 Memo For: G.R.S. representative, C.R.O.
 SUBJECT: Information required for G.R.S.

1. Items checked are to be completed:

() Surname: Gundiff
 () Number: 1556583
 () First name: William
 () Rank: Pvt 1st Cl
 () Company: D
 () Organization: 165th Inf.
 () Date of death:
 () Cause:
 () Place: *WIA Sec 10/14/18*

Location of hospital: *405*

Number " "
 Class " "
 () Relative:
 () Relationship:
 () Address:

() Authority:
 Cablegram No:
 Telegram from:

dated:

() Reported to Washington:
 C.C. Nos:
 (Underscore the "official" C.C.)
 () Remarks:
 () Show present status on reverse side.

CHARLES C. PIERCE,
 Lieut.-Colonel, Q.M.C., U.S.A.

Initials of Reporter:



Cundiff, William - Deceased

WAR DEPARTMENT,
THE ADJUTANT GENERAL'S OFFICE,
WASHINGTON.

57933
MCT/MT
F-7

June 19, 1919

Mrs. Betty Dixon,
Morehead,
Ky.

Dear Madam:

The War Department desires to ascertain the wishes of the families of officers, enlisted men, and civilian employees regarding the permanent disposition of the bodies of those who have died overseas.

The original plan of the Department was to deliver the body in every case at the home address of the deceased to the person legally entitled to dispose of the remains. A desire has been expressed, however, in numerous instances to have the body remain abroad, and General Pershing is likely soon to enter into negotiations with the French and Allied Governments with the view of establishing permanent cemeteries for members of the American Expeditionary Forces. Marshal Petain in a most courteous letter has informed General Pershing that "France would be happy and proud to retain the bodies of the American victims who have fallen upon her soil."

A bill is now before Congress for the establishment of "Fields of Honor" abroad, which will insure future care by the United States Government as national cemeteries are now cared for. Burials have been made heretofore in cemeteries of the Allied nations or at or near the battle field in land set apart for this purpose as a cemetery, and religious services in accordance with the rites of the Protestant, Catholic, or Hebrew faith have been held at the grave.

In case the remains of a deceased soldier are returned to the United States they will be interred either at the former home of the deceased or at a national cemetery, according to the wishes of the one authorized to direct the disposition of the remains, and all expenses, including transportation, casket, shipping case, flag, and the preparation of the remains for shipment, will be paid by the United States. Hire of a hearse and other burial expenses incurred at the home of the deceased may be paid, on application by the relatives, by the Bureau of War Risk Insurance, Treasury Department.

In order that the proper disposition of the remains may be made, and that such disposition be directed by the person entitled to do so, the War Department will recognize the right to direct the disposition of remains in the following order:

In the case of an unmarried man—

- (1) Father; (2) mother, if father is dead; (3) brother, if both parents are dead; (4) sister, if both parents are dead and there are no brothers.

In the case of a married man—

- (1) Wife; (2) parents or children and other relatives in order set forth above.

It is desired that the information indicated on the inclosed card be furnished concerning the person named thereon at the earliest practicable date. If the card is received by some one not authorized to direct the disposition to be made of the remains, please deliver this circular and the card to the person who is entitled to do so.

The Department is unable to state when it will be possible to begin the removal of the remains of the soldiers, but the information requested is being collected at this time in order that there may be no delay when the time comes for such removal.

In returning the card please use the inclosed addressed penalty envelope, which requires no postage.

Very respectfully,

P. C. HARRIS,
The Adjutant General.

WAR DEPARTMENT.

THE ADJUTANT GENERAL'S OFFICE,

OFFICIAL BUSINESS

PENALTY FOR PRIVATE USE, \$300.

WASHINGTON
JUN 21
12 M
B16
D.C.

*Can not
locate*

THRIVE by THRIFT
Buy War Savings Stamps

118
Received A G O. AUG 27 1919

REC'D RECORDS BR. A. G. O. AUG 28 1919