Dup

Dean Shirl E #443 2,077,938

(Surname.) (Christian name in full.) (Army serial number.)

Pvt Co K 131st Inf

(Rank and organization.)

State your relationship to the deceased Mother.

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. Lois Dean.

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

Read carefully the letter accompanying this card. 3—6713

Drawn by PM
443-57
11-13
Mrs. Lois Dean.
Durand, Ill.

Release
Final Notice
[illegible]
1/26/24

409

G.R.S. Form #114-B 1439

Dean, Shirley

FULL NAME Dean, Shirley

RANK Pvt SERIAL 2077935

DIVISION & ORGANIZATION 15-131st Inf. 33rd Div

DATE OF DEATH 8-12-18

STATE FROM WHICH HE CAME Ill

MEDALS OR DECORATIONS AWARDED

FINAL GRAVE LOCATION

Date	Grave	Row	Block
	~~14~~ 13	21	C

Somme American Cemetery# 636
Cemetery

US 3/28/28

Second World War Div.
5 MAR 24 1928

GRAVE LOCATION B

LOCATION OF THE GRA

Dean 2077938 Shi
(Surname.) (Number.) (First N

Private, Company K,
(Rank.)

DATE OF BURIAL August 12th

PLACE OF BURIAL Chipilly,
(Give Cemetery, Town and Department. specify clearly what map is used.

Map Co-ordinate
62 D.N.E. K 34 d.o. 4

GRAVE NUMBER

HOW MARKED: Name Peg?

Headboard?

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, d should be given here:

REPORTED BY:

George R. Mc
(Signature and Rank of Reporti

This portion to be forwarded to Adj. G

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Dean 2077938 Shirley
(Surname.) (Number.) (First Name and Initials.)

Pvt 121st Inf
(Rank.) (Organization.)

DATE OF BURIAL 8-16-18

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

Map 62 d
Q 34 d o 4

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:

REPORTED BY:

Chaplain J.R. Egerton
(Signature and Rank of Reporting Officer.)

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

Co 38
3

Ch at
th from
bu c and
se ave
al . It

2152200.

Em
Mr

SJ

GRAVE LOCATION F

LOCATION OF THE GRAVE OF

Dean 2077938 Shirl E.
(Surname.) (Number.) (First Name and Initials.)

Private, Company K, 131st Infantr
(Rank.) (Organization.)

DATE OF BURIAL August 12th, 1918.

PLACE OF BURIAL Chipilly, France.

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

Map Co-ordinates

62 D.N.E. K 34 d.o. 4.

GRAVE NUMBER

HOW MARKED : Name Peg? 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 :

REPORTED BY :

George R. Mullen
Capt. 131st Infantry Comdg. Co. K
(Signature and Rank of Reporting Officer.)

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

Co
3

, Shirl E. - Pvt. 2077938
Home: Durand, Ill.

Ch
th
bu
se
al

.M., August 12th; 1918, at
His body was removed from
t 700 yards, to the rear and
by shell fragment. I have
oss with his name on it. It
ides.

Wagner, Oscar W.- Cpl. 2152200.
Co. K., 131st. Inf.
Grafton, Iowa.

Not signed.

Em
Mr

SJ

Received
A.G.O.
10 SEP 1918
G.H.Q. A.E.F.

Stat

Co. K., I3Ist. Inf.
33rd. Div.

DEAN, Shirl E. - Pvt. 2077938
Home: Durand, Ill.

Private Dean was killed about 6:00 A.M., August I2th; I9I8, at Chipilly Ridge, by a fragment of shell. His body was removed from the trench to Company Headquarters, about 700 yards, to the rear and buried there. He was killed instantly by shell fragment. I have seen his grave which is marked with a cross with his name on it. It also has a border of stones around the sides.

Informant: Wagner, Oscar W.- Cpl. 2I52200.
Co. K., I3Ist. Inf.
Home: Grafton, Iowa.

Not signed.

Emergency address:
Mrs. Lois Dean (mother)

SJ

G.R.S. FORM NO. 16

Place Amiens, France.

Date 4/22/19

REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name: Dean, Shirly

Number: 2077938

Rank: Pvt.

Organization: 131st Inf.

Disinterment and Reburial made by Group Hq. Unit 302

Disinterred (Date) 4/22/19

From: (Give complete location)

Isolated G.M.R. 12SE E135.3 N358.3

Reburied (Date) 4/22/19

in: (Give complete location)

443

British Military Cemetery Grave 21 Row B. Plot 1 Map reference 12 SE E128.6 N359.6

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

Badly decomposed.

Was one identification tag found upon the body? No

What other means of identification were found on the body? None other than information obtained from cross.

11194

CONFIRMED No D

Note:

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

Supervised by: [signature]

Sgt. Sr.Gr.

[signature]

C.O. Group Hq. Unit 302

G.R.S. FORM NO. 14

Date 4\22\19

REPORT OF DISINTERMENT AND REBURIAL

Remains of:

Number: 50177628

Name: Dean, Sarah

Organization: Inter Int.

Rank: Pvt.

Disinterment and Reburial made by Comp No. Unit 202

Disinterred (Date) 4\22\19 From: (Give complete location)

Isolated G.R.R. USE ONLY 2 REGS.2

Reburied (Date) 4\22\19 In: (Give complete location) Map reference

Grave No. Plot I

British Military Cemetery

IS AN ENCLOSED REGS.2

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

Badly decomposed.

Name other than one of identification were found on the body: None other than information obtained from cross.

Was one identification tag found upon the body? No

Note:

It upon disinterment, effects are found upon bodies they will be sent to the Effects Depot direct as is required by G.O. 370, G.H.Q. Other effects being carefully examined for clues to identity in compliance with paragraph 1(a) of G.H.Q. Circular Memorandum 1, will be made and reported to G.H.Q. Graves Registration Unit.

Superviased by: Sgt. R.C.T.

C.O. Comp No. Date 20X

RECEIVED
9 A.M. 13 Juin 19 P.M.
O.C.Q.M.
G.R.S.

CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME Dean Shirley	DEA	3	451
BURIED	CEMETERY 636	1	5
	GRAVE 13	2	13
	ROW 21	2	21
	BLOCK C	1	3
STATE	Ill	2	13
RANK	Pvt	1	2
DIVISION	33	2	33
ORGANIZATION	131	3	131
ARM	Inf	1	1
MARITAL	No	1	2
Sister NAME Hanford, Mrs Alick		3	
RESIDENCE	STATE Ill	2	1
	COUNTY	2	01
Durand, Ill	CITY	3	xxx
RELATION	Mother	1	1
OTHER		1	2
ELIGIBILITY (no loco no SN)	Dead 5-3-23	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	

29/514

AUDITED SEP 19 1932 MB

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

July 9, 1930.

Dean, Shirl E. 636 S

Mrs. Aleck Hanford,
Durand, Ill.

Dear Madam:

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?	Mother passed
If so, give her name and address:	on May 3-1923
2. Is the deceased survived by a widow who has not remarried?	
If so, give her name and address:	Was unmarried
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?	No.
If so, give her name and address:	

For The Quartermaster General,

Very truly yours,

A. D. Hughes

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

Enclosures:
Envelope
Act
Amendment

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Dean, Shirl E.
636

August 28, 1929.

Mrs. Lois Dean,
R.F.D. #2,
Durand, Ill.

Dear Madam:

The records of this office do not indicate that a reply has been received to our communication dated May 16, 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:	was unmarried
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.	Mrs Lois Dean mother of Shirl E. Dean died May 3 - 1923 - answered by her daughter - Mrs Aleck Stanford Durand, Illinois
3. If survived by a widow or mother does she desire to make the pilgrimage?	

For The Quartermaster General,

Very truly yours,

John T. 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
Dean, Shirl E.

May 16, 1929.

Mrs. Lois Dean,
R.F.D. #2,
Durand, Ill.

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 mother of the late Private Shirl E. Dean, Co. K, 131st Inf., whose remains are now interred in the Somme American Cemetery, Bony, Aisne, France.

Will you please advise this office whether or not he is survived by a widow 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.

In the event your son was survived by a widow who has since remarried it is 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.

B

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON

IN REPLY REFER TO QM 293 A-C

Dean, Shirl E. 636 S

July 9, 1930.

Mrs. Aleck Hanford,
Durand, Ill.

Dear Madam:

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

Dean, Shirl E.
636

August 28, 1929.

Mrs. Lois Dean,
R.F.D. #2,
Durand, Ill.

Dear Madam:

The records of this office do not indicate that a reply has been received to our communication dated May 16, 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,

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

Dean, Shirl E.

May 16, 1929.

Mrs. Lois Dean,
R.F.D. #2,
Durand, Ill.

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".

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Will you please advise this office whether or not he is survived by a widow 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.

In the event your son was survived by a widow who has since remarried it is 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

QM 293 A-C

Dean, Shirl R.

September 20, 1928.

Mrs. Lois Dean,
R. F. D. #2,
Durand, Ill.

Dear Madam:

The Quartermaster General desires to invite your attention to the inclosed card which gives the permanent cemetery location of the soldier's grave in which you are interested.

This American overseas military cemetery is to be maintained by the United States for all time. The graves will be permanently marked by white headstones inscribed with the name, rank, division, organization, date of soldier's death and State from which he came. Headstones will be placed at all graves, as soon as possible, and without necessity for special action or request on the part of relatives.

Please be assured that in effecting removal of the dead, the utmost reverential care was exercised by those who performed this sacred duty. For the future, these graves will be perpetually maintained by the Government in a manner befitting the last resting place of our heroes.

Very truly yours,

1 Incl.
Record card.

J. McCLINTOCK,
Major, Q. M. Corps,
Assistant.

LEB

25/560/EYS

Form 8 W-A

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON

Date 2/10/26

SUBJECT: Information required for Cemeterial Division.

TO: The Adjutant General of the Army, World War Division, Washington, D.C.

1. It is requested that the items checked below be completed:

a. Surname Dean
b. Christian name Shirley E.
c. Serial number 2077938
d. Organization K 131 Inf
e. Rank
f. Emergency Address

g. Date of death
h. Authority
i. Cause of death
j. Place of death
k. Place of burial

l. Date of discharge

BODY DESCRIPTION

a. Date of enlistment Sept 21, 1917
b. Age at enlistment 25 1/2 yrs
c. Color of hair Brown
d. Height 5 ft 9 in
e. Weight*
f. Fractures or breaks none

DENTAL CHARTS

At Camp

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

By Local Board

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

Robert C. Davis,
Major General,
The Adjutant General.
By

For The Quartermaster General:

24/552/EYS

4
A. G. O.
FEB 11 1926
WORLD WAR DIV.

FEB 15 1926

January 26, 1927

No investigation made by me. Records adjusted according to chart made by Mrs. Scott which is now in Cem. Cerres.

S.W.Sechrest

See Report 1-26-27

ef

G.R.S. Form #114 B

DATE

1. NAME DEAN, Shirl E. (Shirl E. ~~ShirlE.~~) SERIAL No. 2077938

RANK Pvt. ORGANIZATION Co. K, 131st Inf.

GRAVE LOCATION Amer. Mil. Vaux/s/Somme, Somme 443
CTY. NAME NUMBER

23 B 1
GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION Isolated Somme
GRAVE COMMUNE DEPT.

COORDINATES Map Ref. Amiens 12 SE. East 135.3. North 358.3.

CONCENTRATED TO 4/22/19. ~~21~~ 20 B 1
DATE GRAVE ROW PLOT

British Mil.Cty. Vaux/s/Somme, 443
CEMETERY CTY. NUMBER

Form 1, 4/22/19.
Data concerning any identification found on remains when concentrated, such as collar insignias, letters, broken bones, missing parts, etc.

Cross only means of identification. Per Form 1, 4/22/19.

Form 16-A, 10/12/20. signed S.D.Campbell, Capt.Inf. shows ident. tag found on body. ~~Body exhumed from Grave #20. Found under grave marker of Frank D.Bublis 1396868 Co.~~ C.131st.Inf. 1 grave to left of proper marker. Inscription on grave marker : ~~Shirl E.Dean. No other means of identification.~~

SUBSEQUENT REBURIALS 10/12/20. 23 B 1 443
DATE GRAVE ROW PLOT CEMETERY

Form 16-A, 10/12/20.

DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR W.R.BUCKLEY,Capt.QMC. W R Buckley

3. FINAL GRAVE LOCATION Oct.20,1922 14 21 Block C.
DATE GRAVE ROW PLOT

Somme American Cemetery #636,Rony (Aisne)
CEMETERY

1

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.

G.R.S. FORM #114-A. STATION Vaux-sur-Somme (Somme)

To be prepared in triplicate. DATE Nov.3,1921

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 DEAN, Shirl E. 13	10. Name No discrepancy
2. No. 2077938	11. No.
3. Rank Pvt.	12. Rank
4. Org. Co. K, 131st Inf. 17	13. Org.
5. D.D. Aug. 12th 1918	14. (a) D.D.
6. C.D. KIA	(b) D.B.

	Discrepancy found upon disinterment
7. Grave No. 23 Sec.	15. Grave No. Sec.
8. Plot 1 Row B	16. Plot Row
9.	17. No discrepancy

18. Cemetery Amer. Mil. 19. Commune or town Vaux/s/Somme

20. Dept. or County Somme 21. Country France

22. G.R.S. Hdqrs. Code No. 443

23. Disinterred (Date) Nov.3,1921 By E.L.Reid,Sup.Emb.

24. Inscription on grave marker:

Name DEAN, Shirl E. Serial No. ---

Rank Pvt. Organization Co.K, 131st Inf.

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

W.D. Mace Jr.

Signature Junior Technical Assistant

PREPARATION

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

G.R.S. tinfoil plaque read "2077938, Dean Shirley ----, 131st Inf."/ Body previously reburied by field section. Stol strips agree with form 114-A. Bottle record gave first name as "Shirley"

27. Condition of body Badly decomposed. Features unrecognizable.

28. Nature of burial Wrapped in blanket and in wooden box.

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

30. Body prepared and placed in casket: Date Nov.3,1921 By E.L.Reid

31. Casket sealed by E.L.Reid

E.L.Reid

Signature of Embalmer, (Supervisor) E.L.Reid Sup.Emb.

C-13585

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

32. Designation of body:

Name DEAN, Shirl E. Serial No. 2077938

Rank Pvt. Organization Co. K, 131st Inf.

33. Consigned to:

Name of Permanent Cemetery Somme Amer. Cty. Bony, Aisne 636

34. Casket boxed and marked (Date) Nov.3,1921 By R.L.Reid.

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 R.S.Williams
R.S.Williams, 1st Lt., QMC

36. Remarks ~~GRS:tinfoil plaque read "2077938, Dean Shirley --, 131st Inf."~~

37. Shipped from point of Operation: (Date) Nov.3,1921

To point of Concentration Amiens (Somme)

Convoyer E.C.Helms Signature Shipping Officer (Name) R.S.Williams
R.S.Williams, 1st Lt. QMC

38. Received at Railhead or Point of Concentration: Date Nov.3,1921

By G.R.S. Representative Hubert W. Boyette, Capt. QMC

39. Shipped from Railhead or Point of Concentration: Date 21 NOV 1921

To Permanent Cemetery No.636, Bony (Aisne)

Convoyer Chas. Hornback Signature Shipping Officer (Name) H.W. Boyette
~~R.S.Williams, 1st Lt. QMC~~ Capt. QMC

40. Received: Date 26 NOV 1921

G.R.S. Representative Oct. 10, 1922

41. Reinterred 14

42. Grave No. Block C 14 (Date) 21 Section

43. Plot C Row 21

G.R.S. Representative D.E.LOWRY, 1st.Lt.QMC.

ef

AUDITED BY
1026-25-28

EST

G. R. S. Form. No. 16-A

REPORT OF DISINTERMENT AND REBURIAL

Place Vaux-sur-Somme (Somme)

Date Nov. 3, 1921.

1. REMAINS OF DEAN, Shirl E. SERIAL NUMBER 2077938

RANK Pvt. ORGANIZATION Co.K, 131st Inf.

2. Disinterred (date): From (give complete location):

Nov.3,1921, Gr.23, Pl.1,Row B, Amer.Mil.Cem.443, Vaux-sur-Somme (Somme)

By: Group 4 Unit F.S.8

3. Reburied (date): Oct.20,1922 In (give complete location):

Grave 14, Row 21, Block C, Somme.Am.Cty.636,Bony(Aisne)

By: Group Reburial Unit Nature of reburial Reg.Casket & shipping case

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

Badly decomposed. Features unrecognizable. Wrapped in blanket and in wooden box.

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

G.R.S. tinfoil plaque read "2077938, Dean,Shirley,131st Inf"

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

Body previously reburied by Field Section. Bottle record & metal strips agree with form 114-A, with exception of first name "Shirley" which was given on bottle record.

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

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

(b) Weight (estimated) Impossible to estimate

(c) Hair—Color None visible

Quantity

Characteristics

(d) Hair on face—Color None visible

Location

Quantity

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

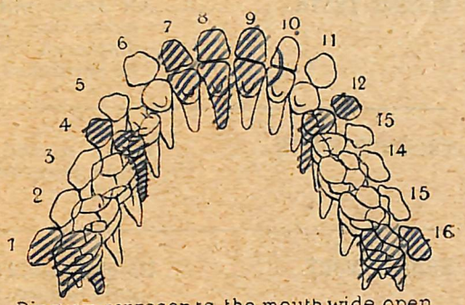
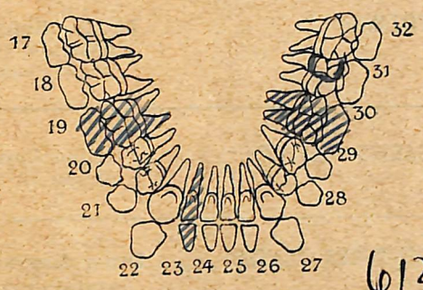


Diagram represents the mouth wide open



61266

(f) Wounds or missing parts (received at time of casualty) (1&16 not erupted; 4,6,23 MAD (7&9 root, 8 MAD; 10 Cav., 12,19&30 (MBD, 12 MBD, 19&30 MBD

None visible.

W.D.Wall, Jr., Checker.

7. Disinterment supervised by E. L. Reid Approved: R.S.Williams, 1st Lt. QMC

E.L.Reid, Sup. Emb. (Title)

8. Reburial supervised by Ben A. Bradford Approved: D.E.Lowry

Ben.A. BRADFORD (Title) 1st.Lt.QMC.

Sup.Embalmer

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 wohm 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 shoudl 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 jwas found.

MISSING TEETH ..... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus :

CROWNED TEETH ..... Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus :

BRIDGE WORK ..... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge) thus :

FILLINGS ..... Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus :

CARIES (CAVITIES) ..... Outline location and size of cavity, shade in thus :

DENTURES (PLATES) ..... Draw diagram of relative size and shape of plate block in teeth attached and indicate retaining clasps on natural teeth with the word " clasp "

---

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

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

G. R. S. Form No. 16-A

Place Vaux-sur-Somme

REPORT OF DISINTERMENT AND REBURIAL

Date Oct 12/20

1. Remains of Shirley Dean Serial Number 2077938

Rank Pvt Organization Co K 131st Inf

2. Disinterred (date): 10/12/20 From (give complete location):

Gr 20 Row B Plot 1 Cem 443 Vaux-sur-Somme. Found under Grave marker of Frank D Bublis 1396868 Co C 131st Inf 1 grave to left of proper marker

By: Group 3 Unit 1 SEC. 1.

3. Reburied (date): 10/12/20 In (give complete location):

Gr 23 Row B Plot 1 Cem 443 Vaux-sur-Somme

By: Group 3 Unit 1 SEC. 1. Nature of reburial In blanket in pine box

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

In uniform - in pine box - in burlap. Badly decomposed.

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

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

Inscription on grave marker Shirl E Dean

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 ----

Characteristics ----

(d) Hair on face—Color ----

Location ----

Quantity ----

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

Impossible to report

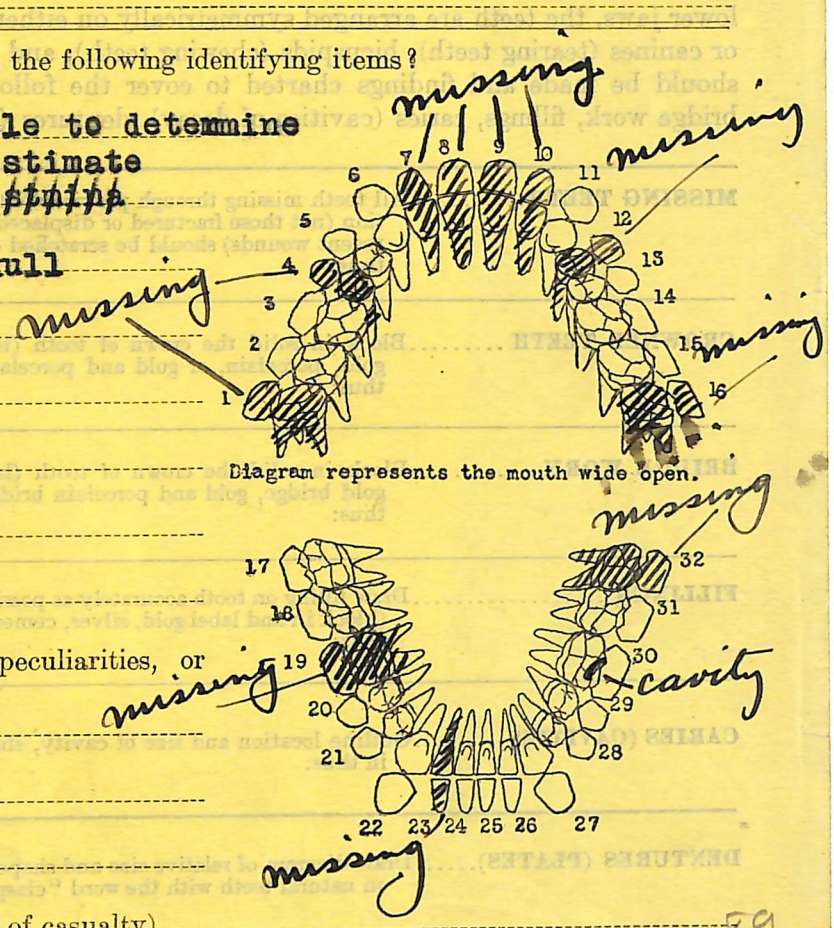


Diagram represents the mouth wide open.

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

Impossible to report

D-30289

7. Disinterment supervised by Clarence W Dodge Capt M.C. Approved: S D Campbell, Capt Inf, (Title) Master of Sec. 1.

8. Reburial supervised by Clarence W Dodge Capt M.C. Approved: S D Campbell, Capt Inf, (Title) Master of Sec. 1.

3—7832

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

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

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.

2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.

3. Give date and accurate information as to location of reburial and the group and unit which made reburial, and how reburial was made—in casket, wooden box, etc.

4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried—in a casket, box, burlap, etc. This statement should be as complete as possible.

5. (*a*) State whether identification tags were found buried with body and on grave marker by reporting "Yes" or "No."

(*b*) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying the body, other than that tabulated under Item No. 6.

6. Give all information as to body description and dental chart as nearly correctly as the condition of the body will allow. Items (*e*) and (*f*) under the body description are very important and should be very complete. The dental chart is also very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

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

DENTURES (PLATES).....Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

3—7832

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.

X

COMPILATION OF DISPOSITION OF REMAINS DATA

1. LOCATION INDEX CARD: 8-12 File # 16329

(a) Name Dean, Shirle E Ser. No. 2077938) TYP. LS

(b) Rank Pvt. Organization Co.K. 131st Inf.) CKR. J.C.C.

(c) Date of death 8-12-18 (d) Cause of death Killed in Action.)

11. Registration Card:- (Check Reg. Card Inf. against Loc. Ind. Inf.)

(a) Grave No. ~~21~~ 20 Row B Plot 1 Sect. -) TYP. EN

(b) Emerg. Address Mrs. Lois Dean, (Mother), Durand, Ill.

111. Files of soldiers dying from contagious diseases; NO CARD) CKR. L.S.

IV. A.G.O. DISPOSITION CARD: Date of receipt None

(a) Name Mrs Lois Dean (b) Relationship Mother

(c) Address Durand, Ill

(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 A.E.S. Date 8-11 1920

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

, dated

confirmed request in Par. IV. item , above, or requesting that

No Correspondence

Examiner's Initials PM Date 8-11 1920

VI. G.R.S. Files - Correspondence - shows as follows:

no request for disposition

(a) Cancellation memos referred to? Yes SP

Examiner's Initials SP Date 8-12 1920

COUNTRY France CEMETERY NO. 443 SHEET NO. 57

G.R.S. Form #115
Amended April 6, 1920.

Make Form #114

Checked by 11-16-20

Signed Consultation 3/25/22 Somme 636 Att 4/14/22

VII. G. R. S. FORM No. 114 made 8-13-, 1920

Typed by Meb Checked by _____ _____ 1920

VIII. FINAL ACTION:

Following advice forwarded to Europe by- (cable on _____ 1920 (letter on 8/19 1920

Par. #2 not to be returned (RJR)

IX. CORRECTIONS

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

X. SUSPENSION REMARKS: 8-6-20. Form 120. Mother, Mrs. Lois Denny Durand, Ill., nearest of kin requests body remain in France. 9-30-20 9-30-20. R.C.

G.R.S. Form #120
Shipping Inquiry.
(Revised)

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
GRAVES REGISTRATION SERVICE
WASHINGTON

443-57
Meb

AUG 27 1920
SEP 15 1920

Rush Answer

CEMETERIAL DIVISION
OVERSEAS PROJECT SECTION

FROM: Chief, Graves Registration Service, Q.M.C.

TO: Mrs. Lois Dean, Durand, Ill.

no change
ctrs

SUBJECT: Remains of Pvt. Shirl E. Dean, Ser. No. 2077938, Co. K, 131st Inf.

The records of this office show that you have requested that his body be not returned to the United States.

SEP 23 1920
RECEIVED

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.

Was soldier married?

NAME OF	NO. & STREET	TOWN	STATE
Soldier's Widow	Never married		
Soldier's Children (Name oldest first)	1. 2. 3. No children		
Father	S. T. Dean (Deceased)		
Mother	Lois Dean	Durand	Illinois
Brothers (Name oldest first)	1. Lell Dean	Durand	Illinois
	2. Artie Dean	Ralls	Texas
	3. Ade Dean	Durand	Illinois
Sisters (Name oldest first)	1. Olive Rainford	Durand	Illinois
	2. Jessie Sealon	"	"
	3. Lydia Corwin	"	"

CEMETERIAL DIVISION
OVERSEAS PROJECT SECTION

SEP 10 1920
RECEIVED

Date Aug 6 - 1920 Signature Mrs Lois Dean

Address Durand Ill. Relationship mother

IMPORTANT:- CAREFULLY read instructions before filling out this paper. (OVER)

Aug 6 1920.

I, the undersigned, am the ..... and nearest living relative of the within
(Relationship)
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 Lr[illegible]

INSTRUCTIONS FOR FILLING OUT

1. If definite instructions as to the disposition of a body are not received from the nearest relative within 2 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 enclosed envelope - pay no postage.

See Form 115 Att 4/14/22

COMPILATION OF DISPOSITION OF REMAINS DATA

File--16329

I. LOCATION INDEX CARD:

(a) Name DEAN, Shirle Ser. No. 2077938 TYP LS

(b) Rank Pvt. Organization Co. K, 131st Inf. JCW

(c) Date of death 8-12-18 Cause of death Killed in Action

LM

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

(a) Grave No. 21 Row B Plot 1 Sect. --

(b) Emerg. Address Mrs. Lois Dean (Mother) Durand, Ill.

III. Files of soldiers dying from contagious diseases no card CKR LS

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

A.G.O. Card - Mrs. Lois Dean (mother) Durand, Ill. requests body not to be returned.

MB 11-24-20

V. Following advice forwarded to Europe by (cable on 192
(Letter of transmittal on 8-19-1920

Par. #2. Not to be returned PJR

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

CEMETERY NO. 443 SHEET NO. 57

COUNTRY France

G.R.S. FORM 115-A
August , 1920

S-666/MB

16329 16329

GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Deane 2077938 Shirley
(Surname.) (Number.) (First Name and Initials.)

Pte 131st Infty
(Rank.) (Organization.)

DATE OF BURIAL 8-16-18

PLACE OF BURIAL near front line

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

Map 62 d

Q 34 d a 4

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. Chipilly (Somme)

(C~~70~~ 88)SIT. 12SE COORD. E135.0 N358.3

REVIEWED OSP SS.

REPORTED BY:

Chaplain J. R. Egerton
(Signature and Rank of Reporting Officer.)

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

28 AOU 1920

16629

GRAVE LOCATION BLANK.

LOCATION OF THE GRAVE OF

Dean 2077938 Shirl E.
(Surname.) (Number.) (First Name and Initials.)

Private, Company K, 131st Infantr
(Rank.) (Organization.)

DATE OF BURIAL August 12th, 1918.

PLACE OF BURIAL Chipilly, France.

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

Map Co-ordinates

62 D.N.E. K 34 d.o. 4.

GRAVE NUMBER

HOW MARKED: Name Peg? Cross? Yes

Headboard? Bottle?

IDENTIFICATION TAGS:

Was one buried with body? Yes

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

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

CMME. Chipilly (Somme)
(C-88) SHT. 125E COORD SE 135.2 N 358.3

REPORTED BY:

Captain, 131st Infantry, Comdg. Co. K
(Signature and Rank of Reporting Officer.)

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

RECEIVED 1 OCT 1918

10 SEP 1918

689

Communal List No. 88-689

Monthly Report No. _____

GRS Form 121a

File No. 16329

FILE

CEMETERIAL DIVISION
REGISTRATION SECTION

January 4 192 2.

MEMO FOR:

Cards Department.

1.

CASE OF:

Co. K. 131st Inf.
ORGANIZATION (Old)

BEAN 2077938 Shirly Pvt.,,
(Name)

Correction or additional data changes as shown below have been made on the Registration Card of the above-mentioned soldier and a corresponding change will be necessary on the Organization Card:

ORGANIZATION (New)

FILE NO.

SURNAME

SERIAL NUMBER

FIRST NAME AND INITIALS

RANK

DATE OF DEATH

CAUSE OF DEATH

	Date	Place	F-1A No.
Orig.			D-
1st. Reb.	10/12/20	443	D- 30289
2nd Reb.			D-
3rd Reb.			D-

FILE

(Note: In the above spaces below double line fill in ONLY the new date and data correcting previous information)

BY: Miss a Lannon

Card.,
(Department)

5 x 8 card was sent to file.

Corrections made
on Organization
File Card:

By K.B.
S/3324/LML

ADDRESS REPLY TO

----------Division
DIRECTOR OF STORAGE
MUNITIONS BUILDING

WAR DEPARTMENT
PURCHASE, STORAGE, AND TRAFFIC DIVISION
OFFICE OF THE DIRECTOR OF PURCHASE AND STORAGE
WASHINGTON

No:

From:

To:

Subject: