

Deluca

(Surname.)

Lawrence

(Christian name in full.)

51,242,

(Army serial number.)

Private, Company H, 23rd Infantry.

(Rank and organization.)

State your relationship to the deceased:

I am the father of the deceased

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)

De Luca Surge

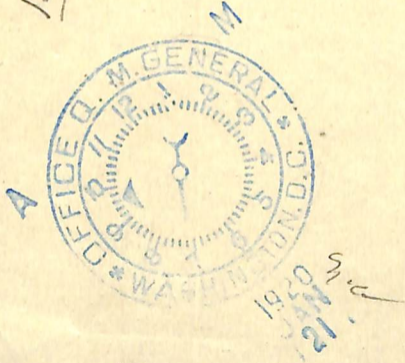
(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

1203



Dup

De Luca,

Lawrence

51,242

(Surname.)

(Christian name in full.)

(Army serial number.)

Pvt

Co H 23rd Inf

(Rank and organization.)

State your relationship to the deceased

Father

Do you desire the remains brought to the United States?

no

(Yes or no.)

If remains are brought to the United States, do you
desire them interred in a national cemetery?

no

(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)

De Luca Luigi

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

3-6713

(over)

Signor De Luca Luigi
Perdifumo,

Salerno
Italy



Post Office Registration
A

1203

DEC 9 1899
by J.E.
9/28/20
- 189

To The A. G. O.

263

Father spells name as De Luca

11662

SEP 1 - 1926

G.R.S. Form #114-B

FULL NAME DeLUCA, Lawrence ✓

RANK Pvt. ✓ SERIAL 51242 ✓

DIVISION & ORGANIZATION Co.H, 23rd Inf. ✓ 2nd Div ✓

DATE OF DEATH Mar 3, 1918 ✓

STATE FROM WHICH HE CAME N.Y.

MEDALS OR DECORATIONS AWARDED. None found

FINAL GRAVE LOCATION 37 24 G

Date Grave Row Block

Meuse-Argonne, #1232 Cemetery

Robert O. Davis, Major General, The Adjutant General.

By CXC SEP 3 1926

SEP 1 1926 A.G.O. WORLD WAR DIV. A.G.O.

23/306/ARK

10-10-26

CHICAGO

MONDAY - SEPTEMBER 27 1926

TO: ... FROM: ...

RECEIVED

Received
SEP 4 26
M. & K. BRANCH
B. Q. M. G.

...

...

GRAVES LOCATION.

NAME	NUMBER	FIRST NAME.
<u>DELUCA</u>	<u>UNKNOWN</u>	<u>LAWRENCE</u>
RANK PRIVATE.		ORGANIZATION Co. H. 23 rd INF.

KILLED IN ACTION.

GRAVE NUMBER - 16.

DATE OF BURIAL - NOV. 5, 1918.

PLACE OF BURIAL - NEAR TULLIERE FERME

Map Location - MAP. STENAY 1/20000

305.7 305.4. On left side of
road leading into Beaumont
at La Tulliere Ferme.

GRAVE MARKED BY CROSS.

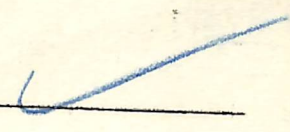
TAG PLACED ON BODY.

TAG ~~BURIED~~ ^{PLACED} ON CROSS.

Jos. G. McCaffrey
Chaplain, 9th Inf.

No green carbon

CODE SLIP



HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME <i>De Luca</i>	<i>De L</i>	3	<i>452</i>
<i>Lawrence</i>			
BURIED	CEMETERY <i>1232</i>	1	<i>1</i>
	GRAVE <i>37</i>	2	<i>37</i>
	ROW <i>24</i>	2	<i>24</i>
	BLOCK <i>g</i>	1	<i>7</i>
STATE	<i>N.Y.</i>	2	<i>37</i>
RANK	<i>Priv.</i>	1	<i>2</i>
DIVISION	<i>2</i>	2	<i>02</i>
ORGANIZATION	<i>23</i>	3	<i>023</i>
ARM	<i>Inf</i>	1	<i>1</i>
MARITAL	<i>No</i>	1	<i>2</i>
NAME <i>Mrs. Moddalena</i>	<i>De L</i>	3	<i>452</i>
<i>Marrone vedova De Luca</i>			
RESIDENCE	STATE	2	
	COUNTY	2	
<i>all rel. foreign</i>	CITY	3	
RELATION	<i>Mother</i>	1	<i>1</i>
OTHER		1	
ELIGIBILITY	<i>Foreign</i>	1	<i>4</i>
NATIVITY		1	
RACE		1	
ENGLISH		1	
ATTENDANT		1	
HEALTH		1	
NO. OF SONS		1	
DATE OF	MO.	1	
TRIP	YR.	1	
ACCEPTANCE		1	
<i>29/514</i>	<i>Country Italy</i>	2	<i>01</i>

AUDITED
MAR 17 1932

em

WAR DEPARTMENT
 OFFICE OF THE QUARTERMASTER GENERAL
 WASHINGTON

DATE 8-25-31

NAME	RANK	SERIAL	ORGANIZATION	DATE OF DEATH
De Luca, Lawrence	Pvt.	51242	Co. H, 23rd Inf.	11-1-18

STATE	CTY. NO. 1232	GRAVE 37	ROW 24	BLOCK G
-------	---------------	----------	--------	---------

NAME AND ADDRESS	Check relationship	Living - Deceased	<u>m</u>	<u>De Luca</u>
		MOTHER <u>Cousin</u>	: <input checked="" type="checkbox"/> :	: <u>m</u> :
	STEPMOTHER (For the year prior to commencement of service)	: : :	: <u>via Dante 26</u> :	: <u>Perdifumo</u> :
	MOTHER THROUGH ADOPTION (For the year prior to commencement of service)	: : :	: <u>Prov. di Salerno</u> :	: <u>Italy</u> :
	MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)	: : :	: <u>all rel. foreign</u> :	: <u>13-11-31</u> :
	WIDOW (Who has not remarried)	: : :	: _____ :	: _____ :

Single man

Veterans Bureau Claim Number XC 135404
 29/156

9/27

In reply refer to:
293.8 C-R

#64636

January 6, 1923.

Italy

Mr. Louis De Luca,
30 Strada Dante
Pordifumo, Salerno, Italy.

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

Private Lawrence De Luca, Co. H, 23rd Infantry
is, Grave 37, Row 24, Block G, Meuse-Argonne American Cemetery at
Romagny-sur-Meuse, Department of Meuse, France.
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
exact and more than willingly accorded by those performing this
sacred duty. The grave of the deceased will be perpetually main-
tained by this Government in a manner befitting the last resting
place of our heroes.

Very truly yours,

Mailed Jan 6

H. J. CONNER,
Assistant.

in

22/1281/ARK

DATE 11/3/21

1. NAME DeLuca, Lawrence SERIAL No. 51242

RANK Pvt. ORGANIZATION Co. H 23rd Inf.

GRAVE LOCATION Sedan Amer. Cem. Letanne - Ardennes 1203
CTY. NAME NUMBER

56 - Sec. 1 2
GRAVE ROW PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION 16 Cem., SK 23 Edwards Near Beaumont Ardennes
GRAVE COMMUNE DEPT.

COORDINATES Mezieres 24 SE E 305.33 N 305.85

CONCENTRATED TO 3/7/19 56 Sec 1 2
DATE GRAVE ROW PLOT

A. E. F. #1 Beaumont Ardennes / Sedan American Cty #1203 Letanne, Ard
CEMETERY CTY. NUMBER

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

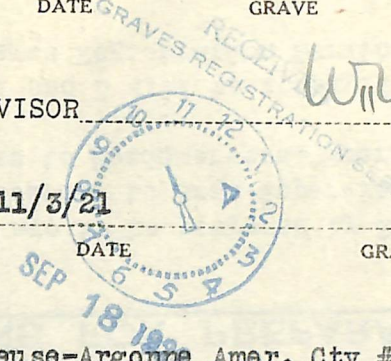
Mezieres 24 SE E 307.5 N 308.5

SUBSEQUENT REBURIALS 1/31/21. 56 Sec 1 2 1203
DATE GRAVE ROW PLOT CEMETERY

data taken from form 16-A.
DATE GRAVE ROW PLOT CEMETERY

SIGNATURE, AREA SUPERVISOR Wm M. Cline Wm M. CLINE
Captain Q.M.C.

3. FINAL GRAVE LOCATION 11/3/21 37 24 G
DATE GRAVE ROW PLOT
Block



Meuse-Argonne Amer. Cty #1232, Romagne-sous-Montfaucou, Meuse.
CEMETERY

AUDITED BY
M.M.G.
12-20-22

pr

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.

Place LIEPANNE ARDENNES

REPORT OF DISINTERMENT AND REBURIAL

Date Sept. 7th 1921.

1. REMAINS OF DeLUCA, Lawrence. SERIAL NUMBER 51242

RANK Pvt. ORGANIZATION Co.H, 25rd Inf.

2. Disinterred (date) : Sept. 7th 1921. From (give complete location) : grave 56, Sec.1, Pl.2, Cem.1203.

By : Group -FOUR Unit F.S.#3.

3. Reburied (date) : Nov. 3, 1921. In (give complete location) : Meuse-Argonne Cem.1232, Gr 37, Row 24, Block G

By : Group Re-burial S Unit Nature of reburial unlined casket

4. Report as to nature of original burial and condition of body upon disinterment : Uniform, blanket and pine box, see par. 6.

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

(b) Other means of identification found upon disinterment, and general remarks : Reburial bottle record dated 1-31-21, signed James W. Younger 2nd Lt OMC replaced with body.

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

(a) Height (actual measurement) Package intact, not disturbed per auth. letter dated 8-29-21,

(b) Weight (estimated) Operations Division AGRS MC in E.

(c) Hair—Color

Quantity

Characteristics

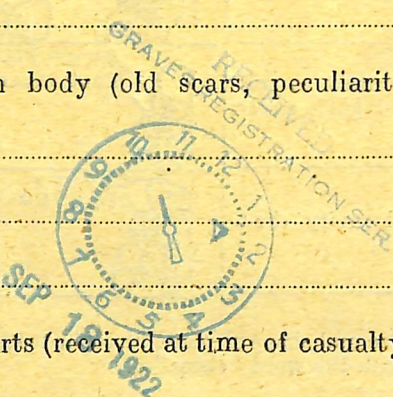
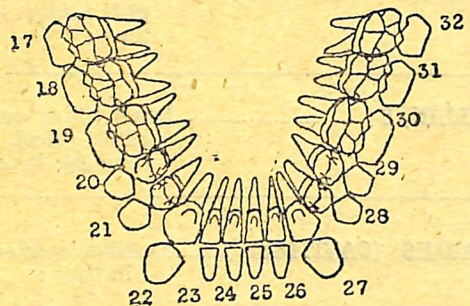
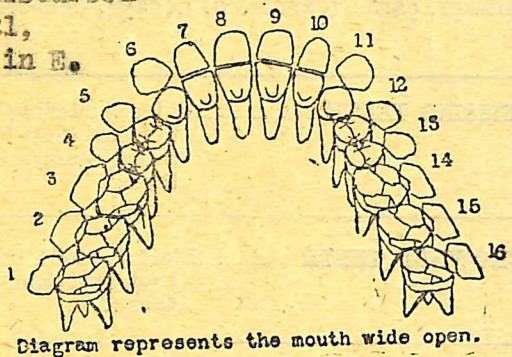
(d) Hair on face—Color

Location

Quantity

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

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



60743

7. Disinterment supervised by A.S. Cheney

Approved : J.S. Robinson
(Title) 1st Lt. C.A.C.






8. Reburial supervised by A. U. Dufault

Approved : James W. Younger
(Title) Captain, OMC
mr

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 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 GOLD BRIDGE</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.

To be prepared in triplicate.

DATE Sept 7th 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 DeLuca, Lawrence
 2. No. 51242
 3. Rank Pvt.
 4. Org. Co. H 23rd Inf.
 5. D.D. 11-7-18
 6. C.D. KIA

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

Discrepancy found upon disinterment

7. Grave No. 56 Sec. 1
 8. Plot 2 Row _____
 9. _____

15. Grave No. _____ Sec. _____
 16. Plot _____ Row _____
 17. None.

18. Cemetery Sedan Amer.
 20. Dept. or County Ardennes
 22. G.R.S. Hdqrs. Code No. 1203
 23. Disinterred (Date) Sept 7th 1921

19. Commune or town Letanne
 21. Country France
 By A.R. Cheney

24. Inscription on grave marker:

Name Lawrence De Luca
 Rank Pvt.

Serial No. _____
 Organization Co. H, 23rd Inf.

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

E. E. Ahn
 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).

Original record buried with body dated 1-31-21 signed James W. Younger 2nd Lt. M.C., reburied with body.

27. Condition of body Badly decomposed recognition impossible

28. Nature of burial uniform blanket and pine 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 Sept 7th 1921 By A.R. Cheney

31. Casket sealed by A.R. Cheney

Signature of Embalmer, (Supervisor) A.R. Cheney

Suspend for foreign advice. Body to be placed in Morgue pending further disposition.

SHIPMENT. (Show actual marking of box.) Box No. C-4441

32. Designation of body:

Name DeLuca, Lawrence Serial No. 51242

Rank Pvt. Organization Co. H 23rd Inf.

33. Consigned to: Officer in Charge Operations,

Name of Permanent Cemetery Argonne Amer. Cem. #1232 - Romagne-sous-Montfaucon

34. Casket boxed and marked (Date) Sept 7th 1921 By A.R. Cheney

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 J.S. Robinson, 1st Lt. CAC.

36. Remarks Package intact body not disturbed, letter Operations Div. dated August 29th 1921.

37. Shipped from point of Operation: (Date) Sept 7th 1921.

To point of Concentration Romagne sous Montfaucon, Meuse.
(Name)

Convoyer R.H. Cronin Signature Shipping Officer J.P. Glendon, 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 _____

To Permanent Cemetery _____

Convoyer _____ (Name)
Signature Shipping Officer _____

40. Received: Date Sept 8, 1921

G.R.S. Representative Asst. Supt. Morgan

41. Reinterred Meuse-Argonne Cemetery #1232 Nov. 3, 1921
(Date)

42. Grave No. 37 Section _____

43. ~~Plot~~ Block G Row 24

G.R.S. Representative James W. Younger
James W. Younger
Captain, QMC
mr

REPORT OF DISINTERMENT AND REBURIAL.

Remains of:

Name: DELUCA Lawrence

Number: 5E242

Rank: Pvt.

Organization:

Co. H 23 Inf.

Disinterment and Reburial made by Group

Unit

Disinterred (Date)

From: (Give complete location)

7th March, 1919

B/A Cemetery Grave No. 16 BEAUMONT ARDENNES

24 SE E 305.33 N 305.85

Reburied (Date)

in: (Give complete location)

7th March, 1919

Grave No. 56 Sect. 1 Plot 2

American B/A Cemetery # 1203

LETANNAE ARDENNES, 24 SE. E.307.5 N. 308.5

1203

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

Body badly decomposed, Buried very poor.

Was one identification tag found upon the body? No.

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

1121

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 cardfully examined for clues to identity in doubtful cases, notation whereof will be made and reported to Chief, Graves Registration Service.

CONFIRMED No D 1121

R. H. ROSENTHAL

Supervised by: Gove S. Wright.

2nd Lieut. O.M.C.U.S.A.

Approved by: _____

Approved by: _____
Approved by: _____
Approved by: _____

Note:



What other means of identification were found on the body? None.
Was one identification tag found upon the body? No.

Body fully decomposed. Burial held.

Notes as to nature of clothing, nature and condition of body upon disinterment:

IDENTIFICATION TAGS: 27 28 29 30 31 32 33

IDENTIFICATION TAGS: 34 35 36 37 38 39 40

DATE: _____

NO. OF TAGS: _____

Number (Date)

IN: (Date complete recovery)



IDENTIFICATION TAGS: 41 42 43 44 45 46 47

DATE: _____

NO. OF TAGS: _____

Number (Date)

IN: (Date complete recovery)

Disinterment and burial made by _____

Date:

Name: _____

Organization: _____

No. of tag: _____

Name: _____

Number: _____

Remarks of:

RECORD OF DISINTERMENT AND BURIAL

Date:

C.O. 2000 1914

REPORT OF DISINTERMENT AND REBURIAL

Place Letanne, Ardennes

Date Jan. 31, 1921

1. REMAINS OF DELUCA, LAWRENCE SERIAL NUMBER 51242

RANK Pvt. ORGANIZATION Co. H., 23rd Inf.

2. Disinterred (date): Jan. 31, 1921 From (give complete location):
Sedan Amer. Cty. Letanne, Ardennes, #1203, Gr. 56, Sec. 1, Pl. 2

By: Group Jones Unit _____

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

By: Group Jones Unit _____ Nature of reburial Box + blanket

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

5ft. earthen grave, Box, Burial U.S. Uniform
Body badly disintegrated, features unrecognizable

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

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

Collar ornaments "U.S. 7."

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

(a) Height (actual measurement) estimated 5ft. 9 1/2 in.

(b) Weight (estimated) Impossible to determine

(c) Hair—Color do missing

Quantity do

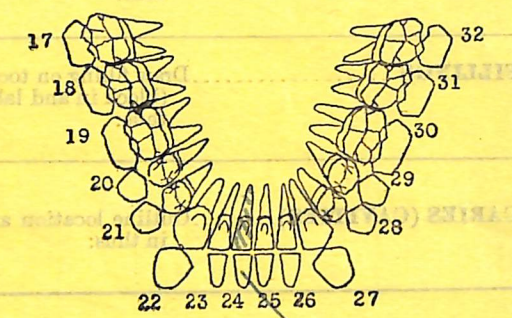
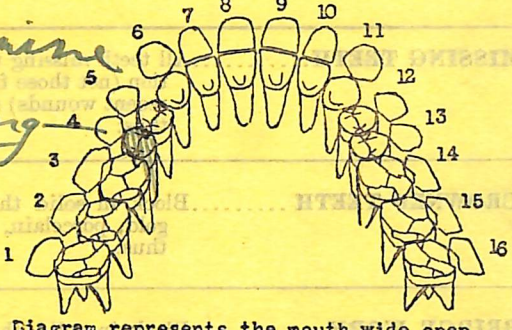
Characteristics do

(d) Hair on face—Color do

Location do

Quantity do

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



(f) Wounds or missing parts (received at time of casualty) 50421 missing

Impossible to determine.

7. Disinterment supervised by James W. Gamminger
8. Reburial supervised by 2nd Lt. Gamminger






Approved: _____ (Title)
Approved: M. Stoussy (Title)
MAJOR, C.A.C.

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.

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

COMPILATION OF DISPOSITION OF REMAINS DATA

I. LOCATION INDEX CARD:

File # 64636

(a) Name DE LUCA, Lawrence Ser. No. 51242
(b) Rank Pvt. Organization Co.H. 23rd Inf.
(c) Date of death 11/1/18 (d) Cause of death DWRIA

TYP. EK
CKR.

10/18/21 - in transit to
Munich Germany 12/31
P.W. - 10/25/21

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

(a) Grave No. 56 Row -- Plot 2 Sec. 1 TYP. EK
(b) Emerg. Address Louis DeLuca (father) Pordi Fumo Sicuto Salerno, Italy.

III. Files of soldiers dying from contagious diseases

CKR.

IV. A. G. O. DISPOSITION CARD:

Date of receipt

Jan 21/20

(a) Name Signor DeLuca Luigi (b) Relationship Father
(c) Address Cas di Furio, Salerno, Italy
(d) Remains to be brought to U. S.? no
(e) To be interred in National Cemetery in U. S. at no

(Reverse of envelope)

(f) Shipping instructions upon arrival of body in U. S.

(g) Disposition instructions if not brought to U. S.

Examiner's Initials

JKS

Date

9/25

, 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

JKS

Date

9/25

, 1920.

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

No request for disposition

(a) Cancellation memos referred to?

Yes

Examiner's Initials

RS

Date

9-25

, 1920.

COUNTRY France

CEMETERY No.

1203

SHEET No.

189

OK
8-24-20
9-29-20

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 11-4- _____, 1920

Par 2 not to be returned PHE

IX.

CORRECTIONS

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

X. SUSPENSION REMARKS:

B. N. R. Beneficiaries: Luigi de Luca (father) 30 Strada Dante, Partifumo Province of Salerno, Italy 11-19-20 Bmk.

11/30/20 Overseas advised to communicate with father of Lawrence de Luca in Italy and comply with desires so obtained 11/30/20 H.G.

11/29/21 Europe advised letters written father in Italy have rec'd no replies - therefore, body to be susp. in P.A.C. France - 12/20/21 - m.m.m.

COMPILATION OF DISPOSITION OF REMAINS DATA

File # 64636

I. LOCATION INDEX CARD:

DE LUCA, Lawrence 51242
 (a) Name Pvt. Ser. No. Co.H. 23rd Inf. } EK
 (b) Rank 11/1/18 Organization DWRIA } TYP
 (c) Date of death Cause of death } EK

*ex 115
 1 PW-1027/21*

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

56 2 1 EK
 (a) Grave No. Row Plot Sect Louis DeLuca (father) Fordi Pano Siento Salerno, Italy.
 (b) Emerg. Address Italy.

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

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

*P.O. card Signal DeLuca Luigi (Father)
 Perدفورو Salerno, Italy, requests body not
 returned. P.O. 11-4-20*

V. Following advice forwarded to Europe by (cable on 192 / letter of transmittal on 11-4-1920)

Part not to be returned.

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
11/29/21	Europe advise father in Italy have sick	Letters written to communicate with father of advice	11-30-20 Oversee and direct to supply and copy with deuces so obtained 11-30-20 H.T.
P.A.C. France 12/20/21	therefore, body to be sent in		

VIII. Form 115 received from G.R.S. Hoboken, N.J. 192

November 30 th, 1920.

1203 Reg. Sec., Cem. Div.

From: The Quartermaster General, U. S. Army (Cemeterial Division).
To: Chief, American Graves Registration Service, Q.M.C., in Europe.
Subject: Supplementary advice on Sedan American Cemetery #1203, Letanne, Ardennes, France.

Reference paragraph 2, office letter of November 4th, 1920, (File No. 1203 Reg. Sec., Cem. Div.), concerning the deceased soldier named below:

Cable
Ref. No.

189 DE LUCA, Lawrence, Private, 51242, Co. H. 23rd Infantry.

It is requested that you communicate with the following relative, comply with desires so obtained and initiate Form #114 in case the same is necessary:

Mr. Luigi De Luca, (Father), 30 Strada Dante, Perdifumo, Province of Salerno, Italy.

By authority of the Quartermaster General:

CHARLES C. PIERCE,
Major, U. S. Army,
Chief, Cemeterial Division.

By:

Thos. G. Hanson, Jr.,
1st Lieut., Q.M. Corps.

OSP:SS
C. & C. Dept.

Critchett

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

Please Push

NAME OF DECEASED SOLDIER

CEMETERY NO.

DATE

De Luca, Lawrence, Pvt.

1203 - 189

Nov. 10, 1920

SERIAL NUMBER

ORGANIZATION

C-135404

51242

Co. H. 23rd Inf.

Date of death - 11-1-18

WAR RISK INSURANCE INFORMATION

DATE

11/3/20

NAME OF BENEFICIARY

RELATIONSHIP

Mrs. Luigi de Luca

Father

Address

*30 Strada Dante, Perdifumo, Province of Salerno
Italy*

S-709/MB

13

64636

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

2. Soldier's No. 51242

3. De Luca Lawrence
Surname (in block letters) First Name and Initials

4. Pvt H 23rd Inf
Rank Company Regt. or Corps

5. Date of Death Cause, if known
K.I.A.

6. Date of Burial Sketch Edwards #3 Cemetery

7. La Tulierie Terme, near Beaumont, Ardennes
Town or Commune (in block letters) Department

8. 16 Grave No. Plot No. or Letter

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

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

11. If name unknown and tags missing, give marks and description.
862

12. Mezieres S E #24 N305.90 E 305.35
Map reference, if interment is outside of cemetery

R. B. ...
1537

13. Give name of Chaplain or Burial Officer

Signed ... Edwards Capt

Group ... Unit E G. R. S.

RECEIVED
JAN 19 1870
O. G. S. M.
O. G. S. M.

GRAVES LOCATION.

NAME DELUCA
 RANK PRIVATE
 NUMBER UNKNOWN.
 FIRST NAME LAWRENCE.
 ORGANIZATION Co. H 23rd INF.

KILLED IN ACTION.

GRAVE NUMBER - 16.

DATE OF BURIAL - NOV. 5, 1918.

PLACE OF BURIAL - LA TULLIERES

MAP LOCATION - MAP-STEADY

1/20000 ON 305.7 - 305.4. (left

side of road leading to

Beaumont at La Tullieres

Fernand Beaumont (Ardenne)

521) SHT 24 SE COORD GRAVE MARKED WITH CROSS

TAG PLACED ON BODY

TAG PLACED ON CROSS.

J. McCaffrey
 Chaplain, 4th Inf.

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE Q.M.C., IN EUROPE
8, AVENUE D'IENA.

✓ File No. 293.9 Disp. Cem. #1203. - 189

PARIS November 29, 1921.

From: Chief.

To: Quartermaster General, Munitions Building, Washington, D.C.

Subject: Disposition of remains of Pvt. Lawrence De Luca, #51242, Co. H,
23rd Inf., Cem. #1203, Letanne, Ardennes, France.

1. Reference letter Cem. Div., Washington, dated November 30, 1920, File No. 1203, to this office, wherein it was directed that we communicate with the next of kin of the above deceased soldier, you are advised that a letter was written, as instructed to Mr. Luigi De Luca, 30 Strada Dante, Perdifumo, Prov. of Salerno, Italy, on December 20, 1920. Another letter, inclosing our official form certificate for execution, was written February 15, 1921. A reply was received on March 18, 1921, expressing the wish that remains rest where now buried, and on March 22, 1921, another letter was sent saying it was not the policy of this Service to leave an isolated grave. The first follow-up letter to this statement of policy was sent June 8, and the second-follow up letter September 15, 1921, both inclosing official form certificate for execution.

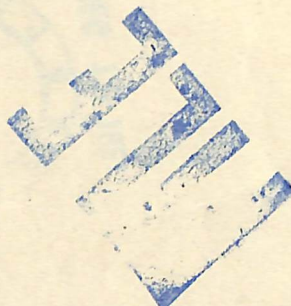
2. No replies having been received to said correspondence, the remains of the above-deceased soldier will be left in France for final burial in a permanent American cemetery.

pure rear
De Luca, Lawrence
H. F. RETHERS,
Colonel, Q.M.Corps.

K
JLK/GMS.

Noted by Statistical Clerk.
Date 12-17-21
ALL

Noted on Form No. 1154 "A"
Date 12/20/21
m.m.m.
Copy in B. 1. 1. 1.



File # 293.8
64636
O. O. M. G.

