

File Number **79707**

TO: REGISTRATION BRANCH, G. R. S.

Date **August 30, 1921.**

FROM: INQUIRY BRANCH.

Please furnish information as checked (✓) below regarding the following soldier:

NAME: **Spring, Ira**

Serial Number **2941392**

RANK: **Private**

ORGANIZATION: **Co. F 147th Inf.**

No.	QUESTION	REPLY
1.	Do particulars of soldiers given above agree with records?	✓ 1. Yes
2.	Date of death.	✓ 2. 8/9/18
3.	Cause and place of death.	✓ 3. K/A
4.	Number of casualty cablegram.	✓ 4. 349SP 28
5.	Date buried.	✓ 5. No record
6.	Grave location. (a) Complete record required. (b) Name of cemetery or commune only required. (c) Note reinterments.	✓ 6. Grave 17, French Military Cemetery, Montigny, Meurthe-et-Moselle.
7.	Who reported burial?	
8.	Confirmed by G. R. S.?	
9.	Report as to grave marker.	✓ 9. Cross
10.	Identification tags: (a) Buried with body? (b) Attached to grave marker?	✓ 10. No record " " No
11.	Complete emergency address?	✓ 11. Miss Eleanor Spring, 1344 Lake Ave., Rochester N.Y.
12.	Has been notified? (Give date.)	✓ 12. 107-A 8/30/21
13.	Report the exact position of your inquiry on this case. (Reply in all cases if no information on record.)	
14.	What is the photograph number?	✓ 14. D39803
15.	Inquiry made by.	

N. B.—All proper names to be typewritten, or printed in PLAIN BLOCK LETTERS.

RELEASED BY INFORMATION CONTROL DEPARTMENT.

..... Confirmed.
..... Unconfirmed.