

Robert Barr

1893-1939

World War I

Robert Barr served in the 327th Labor Battalion of the US Army during World War I. Born in South Carolina, Barr eventually moved to Homerville, Georgia, where he worked as a turpentine laborer prior to his military service. Afterwards, he moved to Lawtey, Florida, where he continued to work as a laborer. He died in 1939 and is buried in the Saint Augustine National Cemetery.

Form 1 **REGISTRATION CARD** No. 76

1 Name in full Robert Barr Age, in yrs. 24
(Given name) (Family name)

2 Home address Homerville Ga
(No.) (Street) (City) (State)

3 Date of birth April 21st 1892
(Month) (Day) (Year)

4 Are you (1) a natural-born citizen, (2) a naturalized citizen, (3) an alien, (4) or have you declared your intention (specify which)? Natural Born

5 Where were you born? Kingstree S.C., U.S.A.
(Town) (State) (Nation)

6 If not a citizen, of what country are you a citizen or subject?

7 What is your present trade, occupation, or office? Turpentine Laborer

8 By whom employed? H.V. Murphey & Co.
Where employed? Homerville Ga

9 Have you a father, mother, wife, child under 12, or a sister or brother under 12, solely dependent on you for support (specify which)? No

10 Married or single (which)? Single Race (specify which) Caucasian

11 What military service have you had? Rank None; branch _____; years _____; Nation or State _____

12 Do you claim exemption from draft (specify grounds)? No

I affirm that I have verified above answers and that they are true.

Robert Barr
(Signature or mark)

“Robert Barr.” WWI Draft Registration Card. (Front)
Estimated Age of 24 Years Old.
Barr worked as turpentine laborer in Homerville, GA.

10-2-14

REGISTRAR'S REPORT

1	Tall, medium, or short (specify which)? <u>Medium</u>	Slender, medium, or stout (which)? <u>Medium</u>
2	Color of eyes? <u>Black</u>	Color of hair? <u>Black</u> Bald? <u>NO</u>
3	Has person lost arm, leg, hand, foot, or both eyes, or is he otherwise disabled (specify)? <u>NO</u>	

I certify that my answers are true, that the person registered has read his own answers, that I have witnessed his signature, and that all of his answers of which I have knowledge are true, except as follows:

Robert Barr
(Signature of registrar)

Precinct 12th
City or County Clinch
State Georgia

June 5, 1917
(Date of registration)

Local Board
of Clinch County,
Hamersville, Georgia.

370-3

"Class June 1917"

"Robert Barr." WWI Draft Registration Cards, 1917-1918. (Back)
Bar registered on June 5, 1917.

Barr.	Robert	1,924,175	colored	1 1/2
(Surname)	(Christian name)	(Army serial number)	(Race: White or colored)	
Residence:	Homerville	Clinch	GEORGIA	
(Street and house number)	(Town or city)	(County)	(State)	
* Enlisted in	Inducted at Homerville Ga	Mch 29/18		
† Born in	Kings Tree SC	25 yrs		
Organizations:	44 Co 11 Tng Bn 157 Dep Brig to May 23/18; Co C 327 Labor Bn to discharge			
Grades:	Pvt			
Engagements:				
Wounds or other injuries received in action: None.				
‡ Served overseas:	July 10/18 to July 5/19			
§ Hon. disch.	July 13/19	on demobilization		
Was reported	0	per cent disabled on date of discharge, in view of occupation.		
Remarks:				

Form No. 724-11 1/2, A. G. O. March 12, 1920. 3-7688

*Insert "R. A.", "N. G.", "E. R. C.", "N. A.", as case may be, followed by place and date of enlistment. † Give place of birth and date of birth, or age at enlistment. ‡ Give dates of departure from and arrival in the United States. § Give date.

"Robert Barr." World War I Service Cards, 1917-1919.
 Military Service: March 29, 1918 through July 13, 1919.
 Barr served overseas with the 327th Labor Battalion.



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Sheet No. 6
3 Class
 HEAD QUARTERS PORT OF EMBARKATION
 NEWPORT NEWS, VIRGINIA ITEM-Q-418
 UNITED STATES ARMY TRANSPORT SERVICE
 PASSENGER LIST OF ORGANIZATIONS AND CASUALS

INSTRUCTIONS FOR FILLING OUT THIS FORM
 Separate lists of FIVE COPIES EACH will be filed out by each company or detachment commander as follows:
 1st List: Officers arranged according to rank; nurses, if any; civilian employees, if any. These names should be numbered consecutively beginning with No. 1.
 2d List: Non-commissioned officers above Grade 17. (Paragraph 9, Army Regulations), arranged according to grade.
 3d List: Enlisted men below Grade 16. (Paragraph 9, Army Regulations), arranged according to the usual formation of the Company that is, by squads. These names should be numbered consecutively beginning with No. 1.

To be filled in by Company Commander: COMPANY "C" 327TH LABOR BATTALION
 (Give full name of organization including company and regimental designations)
 To be filled in by Army Transport Service: (Name of transport or commercial steamer) POWHATAN JULY 10 1918 10 AM (Port)
 NEWPORT NEWS, VA

No.	(Family name followed by Christian name in full)	Rank	Grade	Notify in case of emergency (Give name in full)	Relationship	Address (Number, Street, City and State)
116	BAGBY CHARLIE 2654191	PVT	QMC	CORA PITTS BAGBY	MOTHER	COVINGTON GA
117	BAKER HOWARD 2652771	PVT	QMC	RACHEL CAMPBELL JACKSON	MOTHER	BURNSWICK GA
118	BAKER MARTIN 2654193	PVT	QMC	SARAH MARTIN TUGGLE	MOTHER	MONROE GA
119	BARNES HERTIE 2655574	PVT	QMC	DAISY HUTCHINS	SISTER	RFD #1 BRADLEY GA
120	BARNES LONNIE 2655523	PVT	QMC	BESSIE BARNES	SISTER	RFD #1 HERSHMAN GA
121	BARNES OLIVER 2655529	PVT	QMC	HAMP C CLARK	FATHER	SYLVANIA GA
122	BARR ROBERT 1924176	PVT	QMC	WILLIE BARR	FATHER	MONROVILLIE GA
123	BARROW ROBERT 2655455	PVT	QMC	LIZZIE BARROW	SISTER	MAKEYS GA
124	BARTON JAMES 1927582	PVT	QMC	LINDA BARTON	MOTHER	OAK STREET OCILLA GA
125	BIGGS FRANK 2655686	PVT	QMC	ELIZAH HOLLIS	BROTHER	RFD #3 Waverly Hall GA
126	BOND CLIFFORD 2655411	PVT	QMC	MARIA WILLIS BOND	MOTHER	RFD #8 MONTGOMERY GA
127	BRADLY WILLIE 2648475	PVT	QMC	ELIJAH WILLIAMS BRADLEY	MOTHER	HUNTERS GA
128	BRADY EDDIE 1924034	PVT	QMC	PERCILLA HARKNESS BRADY	MOTHER	RFD #4 BARNESVILLE GA
129	BRANHAM RAYMOND 1928773	PVT	QMC	ELIZABETH FORTUNE AMMONS	GRANDMOTHER	RFD 4 BOX 13 A SYLVESTER GA
130	BRANTLEY WILLIE 2655104	PVT	QMC	JULIA JONES GILHAM	AUNT	RFD #1 BOX 25 WARRENTON GA
131	BROOMFIELD BEN 2655486	PVT	QMC	ANDREW BROOMFIELD		RFD #3 WHITE PLAINS GA
132	BROWN CHARLIE 2655578	PVT	QMC	ANNIE HUTCHINS BANKS	MOTHER	RFD #1 MERIWETHER GA
133	BROWN CLIFFORD 1922967	PVT	QMC	WILLIE BROWN	FATHER	RFD CAMILLA GA
134	BROWN EDDIE 2655593	PVT	QMC	CLARA JOHNSON BROWN	MOTHER	TEXAS GA
135	BROWN FELIX 2655167	PVT	QMC	ROBERT CURRY STEEFATHER		RFD #1 CONYERS GA
136	BROWN WILL 1923010	PVT	QMC	RODY DONALSON BROWN	MOTHER	RFD #4 CAMILLA GA
137	BROWN WILLIAM 2655466	PVT	QMC	MATT BROWN	FATHER	RFD #1 GREENSBORO GA
138	BRYANT TOM 2653202	PVT	QMC	LULA FAHAN BRYANT	MOTHER	RFD #4 VIENNA GA

Total Officers: _____
 Total Enlisted Men: _____
 Total Nurses: _____
 Total Civilians: _____
 Total Miscellaneous: _____
 Total Passengers: _____

(Signature of Company Commander)
 G. W. Smith
 Captain, Q.M.C.N.A.
 (Rank)

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“Robert Barr.” Army Transport Lists.
 USS Powhatan- July 10, 1918.
 Barr listed father Willie as emergency contact.



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Robert Benjamin Barr

in the U.S., Social Security Applications and Claims Index, 1936-2007



No Image
Text-only collection

[Add alternate information](#)

[Report issue](#)

Name: Robert Benjamin Barr

Gender: Male

Race: Black

Birth Date: 21 Apr 1893

Birth Place: Kingstree WI, South Carolina

Father: [Willie Barr](#)

Mother: [Sarah Gordon](#)

SSN: 719097454

Notes: May 1937: Name listed as ROBERT BENJAMIN BARR

[Save & create tree](#) [Cancel](#)

Suggested Records

- [U.S., World War Cards, 1917-1918](#)
Robert Barr
- [Canadian Passport Applications, 1906-1958](#)
Robert Barr
- [UK, Incoming Passenger Lists, 1960](#)
Robert Barr
- [UK, Incoming Passenger Lists, 1960](#)
Reverend Robert Barr
- [UK, Incoming Passenger Lists, 1960](#)
Robt Barr
- [UK, Incoming Passenger Lists, 1960](#)
Robert Barr
- [U.S., Records of Immigration and Naturalization Service, 1904-1954](#)
Robert Barr
- [UK, Incoming Passenger Lists, 1960](#)
Robert Barr

Source Information

Ancestry.com. *U.S., Social Security Applications and Claims Index, 1936-2007* [database on-line]. Provo, UT, USA: Ancestry.com Operations, Inc., 2015.

Original data: Social Security Applications and Claims, 1936-2007.

Description

This database picks up where the SSDI leaves off, with details such as birth date and parents' names extracted from information filed with the Social Security Administration through the application or claims process. [Learn more...](#)

“Robert Barr.” Social Security Claims.
Lists Name of Parents: Willie Barr and Sarah Gordon.

FLORIDA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
CERTIFICATE OF DEATH

1. PLACE OF DEATH
County COLUMBIA District No. 10-01 State File No. 11813
Precinct or (Write name, not number) Precinct No. 10-513 Registered No. 456
Inc. Town Lake City, Florida. City or Town No. 10-513 St. Ward
City Lake City, Florida. No. Veterans' Administration. (If death occurred in a hospital or institution, give its NAME instead of street and number)
Length of residence in city or town where death occurred 1 yrs. 24 mos. 24 ds. How long in U. S. if of foreign birth? 1 yrs. 24 mos. 24 ds.

2. FULL NAME BARR, Robert (C-Not Assgnd.)
(a) Residence: Lawley, Florida. St. Ward (If nonresident, give city or town and State)
4-535 (Cont. place on shade)

PERSONAL AND STATISTICAL PARTICULARS				MEDICAL CERTIFICATE OF DEATH	
3. SEX <u>Male</u>	4. COLOR OR RACE <u>Colored</u>	5. Single, married, widowed or divorced (write the word) <u>Married.</u>		21. DATE OF DEATH (month, day, and year) <u>July 28, 1939</u>	
5a. If married, widowed or divorced HUSBAND of <u>Mrs. Letha Mae Barr.</u>				22. I HEREBY CERTIFY, That I attended deceased from <u>June 4, 1939</u> 19... to <u>July 28, 1939</u> 19... I last saw him alive on <u>July 28, 1939</u> 19... death is said to have occurred on the date stated above, at <u>12:45 A.M.</u>	
6. DATE OF BIRTH (month, day and year) <u>Apr. 21. 1893</u>				The principal cause of death and related causes of importance in order of onset were as follows:	
7. AGE Years <u>46</u> Months <u>1</u> Days <u>13</u> If LESS than 1 day, ... hrs. or ... min.	8. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. <u>Laborer</u>			Nephritis chronic, type undet. Date of onset <u>Unknown</u>	
9. Industry or business in which work was done, as silk mill, sawmill, bank, etc.				Valvular heart disease, chronic	
10. Date deceased last worked at this occupation (month and year)				Aortic and mitral.	
11. Total time (years) spent in this occupation				Contributory causes of importance not related to principal cause: Cardiac enlargement with myocardial damage.	
12. BIRTHPLACE (city or town) <u>S.C.</u> (State or country)				Pulmonary congestion passive, severe.	
13. NAME <u>Willie Barr.</u>				Name of operation <u>None</u> Date of <u>None</u>	
14. BIRTHPLACE (city or town) <u>S.C.</u> (State or country)				What test confirmed diagnosis <u>Phys. exam</u> What was there an autopsy? <u>NO</u>	
15. MAIDEN NAME <u>Sarah Gordon</u>				23. If death was due to external causes (violence) fill in also the following: Accident, suicide, or homicide? <u>None</u> Date of injury <u>None</u> 19...	
16. BIRTHPLACE (city or town) <u>S.C.</u> (State or country)				Where did injury occur? <u>None</u> (Specify city or town, county, and State)	
17. INFORMANT <u>HELEN VAN OSDELL,</u> (Address) <u>Act. Clinical Clerk.</u>				Specify whether injury occurred in industry, in home, or in public place.	
18. BURIAL, CREMATION, OR REMOVAL (Removal) Place <u>St. Augustine, Fla.</u> Date <u>8-2-39</u> 19...				Manner of injury <u>None</u>	
19. UNDERTAKER <u>SHERILLIS FUNERAL HOME</u> (Address) <u>Lake City, Florida</u>				Nature of injury <u>None</u>	
20. FILED <u>8-2-39</u> 19... <u>39</u> <u>18</u> <u>7</u> <u>1939</u>				24. Was disease or injury due to any occupation of deceased? If so, specify <u>None</u>	
				(Signed) <u>GARRETT V. JOHNSON</u> Clinical M.D. Director, Veterans' Administration <u>Lake City, Florida.</u>	

S. No. 4

"Robert Barr." Florida Death Certificates.
Died on June 4, 1939 at the VA Hospital in Lake City, FL.
Lived in Lawley, FL.



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Ind mch 29/1918

ORIGINAL

Interment in the St. Augustine National Cemetery

To—The Quartermaster General, Washington, D. C.

NAME	RANK	COMPANY	REGIMENT OR VESSEL			DIVISION, IF WORLD WAR SOLDIER
			Number	State	Arm	
<i>8# 1724176</i> Barr, Robert	Pvt.	C	326 <i>327 Ga</i>	<i>Ya</i>	Service Bn.	<i>None</i>

DATE OF DEATH			DATE OF INTERMENT			GRAVE MARK		REMARKS Date of discharge and number of Pension Certificate, Disinterments, etc.
Month	Day	Year	Month	Day	Year	Section	Grave No.	
July	28	1939	Aug.	2	1939	A	219	Hon. Dis. July 13, 1919. Authority - Telegram from OQMG. dated July 31, 1939 file QM 293 A-M Barr, Robert

Shipping point for headstones: St. Augustine, Florida.

E. S. ADAMS,

Major General

The Adjutant General

By: *W. A. 4-39*

8-2550

2112953

GANTT'S QUARRY, ALA.

3 OCT 1939

(See Instructions on Reverse Side)

320700019

“Robert Barr.” Cemetery Interment Control Forms.
Saint Augustine National Cemetery.



“Robert Barr.” Find a Grave Headstone.
Saint Augustine National Cemetery.

VA



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