

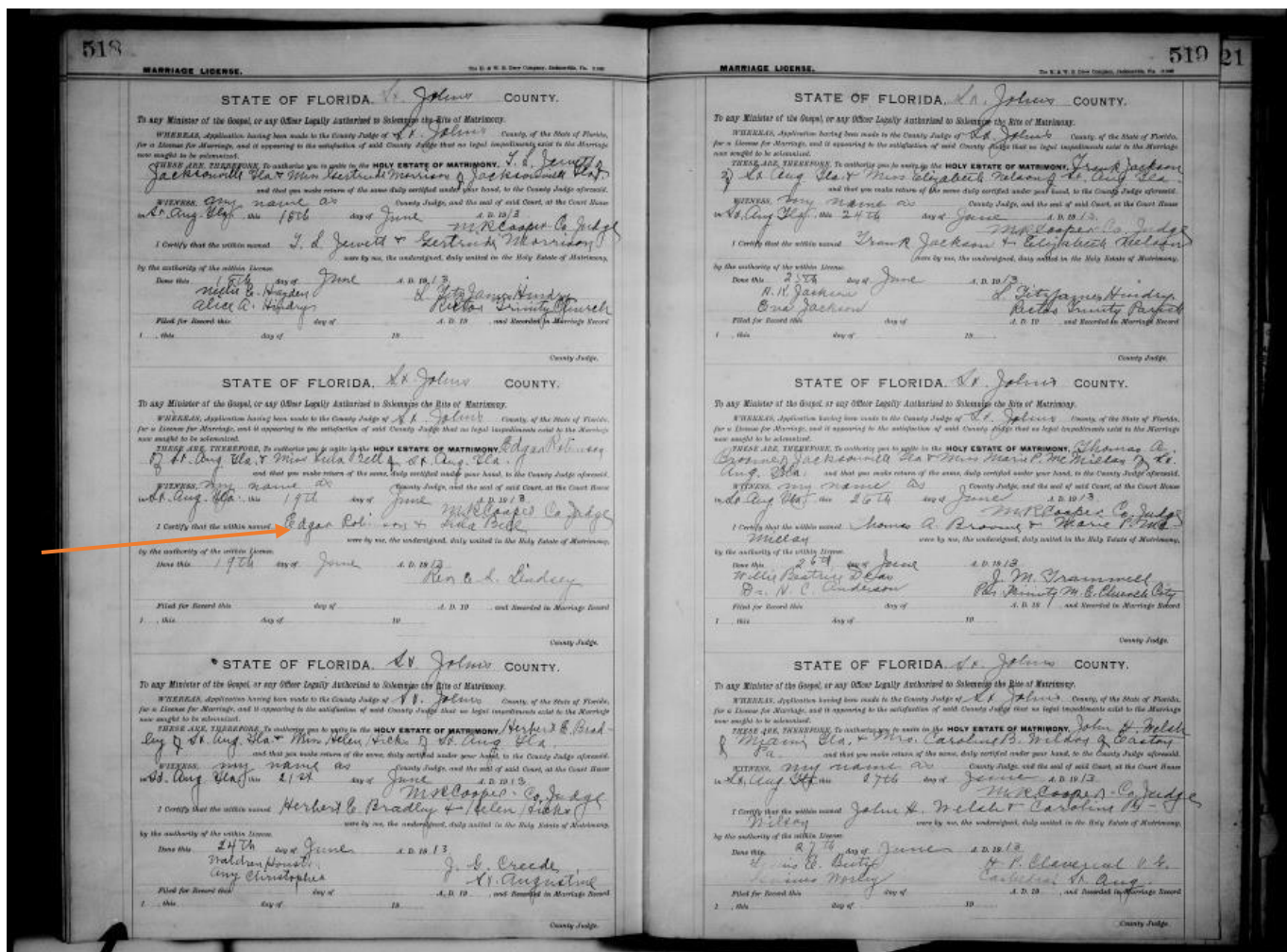
# **Edgar Robinson**

## **c.1889-1927**

### **World War I**

Edgar Robinson served as a Private First Class in Companies D and M of the 807<sup>th</sup> Pioneer Infantry during World War I. He was living in St. Johns County, Florida, prior to his military service. His post-war life is unknown. Robinson died in 1927 and is buried in the Saint Augustine National Cemetery.





“Edgar Robinson.” Florida Marriage Licenses.  
Robinson married Lula Bell on June 19, 1913.

Form 1 1063 REGISTRATION CARD No. 50

1 Name in full Edgar Robinson Age, in yrs. 28  
(Given name) (Family name)

2 Home address Tecumseh & Cordova St. St. Augustine Fla.  
(No.) (Street) (City) (State)

3 Date of birth April 27 1889  
(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? St. Augustine Florida 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? Assistant undertaker

8 By whom employed? R. A. Ponce  
 Where employed? Cec. Tecumseh & Cordova St. St. Aug. Fla.

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)? Married Race (specify which)? Negro

11 What military service have you had? Rank —; branch —;  
 years —; Nation or State —

12 Do you claim exemption from draft (specify grounds)? —

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

Edgar Robinson  
(Signature or mark)

“Edgar Robinson.” WWI Draft Registration Card. (Front)

Employed by R.A. Ponce as assistant undertaker.



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9-2-29 A REGISTRAR'S REPORT

1	Tall, medium, or short (specify which)? <u>Medium</u> Slender, medium, or stout (which)? <u>None</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~~:

Thomas A. Pacetti  
(Signature of registrar)

Precinct 13

City or County St. Johns

State Florida

June 5<sup>th</sup> 1917  
(Date of registration)

“Edgar Robinson.” WWI Draft Registration Card. (Back)

Robinson registered in St. Johns County, FL on June 5, 1917.

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Form 1029 FMGO.

ORIGINAL.

When completed to be mailed by Military Authorities to the Provost Marshal General, Washington, D. C.

Local Board,  
St. Johns County,  
St. Augustine,  
Florida.

RECEIVED  
AUG 29 1918

SHEET No. 1

Date, August 3, 1918

The selected men herein described, having been inducted into military service on August 4, 1918  
(Date.)  
have this date been entrained for Camp Devens, Ayer, Mass.  
(Camp or Station.)

This statement consists of 3 sheets.

43-5443

1 Order No.	2 Serial No.	3 NAME.	4 Call No.	5 Primary Industry.	6 Classification.					7 Failed to report to Military Authorities.
					I	II	III	IV	V	
15	596	Moris Holmes	1000	Farm Hand	A					
<del>126</del>	<del>51</del>	<del>Les Anderson</del>	"	"						
536	418	Sidney Francis	"	Laborer	A					
790	695	James Kimball	"	"	A					
847	1177	Jackson Saxon	"	Railroad man	G					
880	161	Sidney Bell	"	Laborer	A					
898	1202	Robert Stewart	"	"	G					
918	1063	Edgar Robinson	"	Undertaker	A					
934	1280	John Van	"	Porter	A					
958	1279	Eddie Van	"	Cook	A					
967	1311	Jason Waitman	"	Laborer	A					
987	835	Olie McDuffy	"	Farmer	E					
<del>1011</del>	<del>516</del>	<del>Arcey Harris</del>	<del>48</del>	<del>Farmer</del>	<del>A</del>					<i>Sick</i>
1013	491	Harry Gillespie	"	Bottling	A					
1028	1349	Elisha Weathers	"	Laborer	G					
<del>1051</del>	<del>510</del>	<del>Horace Belden</del>	<del>48</del>	<del>Laborer</del>	<del>A</del>					<i>Sick</i>
1057	1186	George Henry Sallott	"	Tailor	A					
1077	834	Harvery McDuffy	"	Laborer	A					
1105	45	Joseph Adams	"	Waiter	A					
1114	684	Douglas Kenderick	"	Farmer	A					
1132	178	William Beach	"	Teamster	A					
1155	60	Will Belle	"	Laborer	A					
1159	293	James Terry Cromartee	"	Waiter	A					
1171	266	Calvin Calhoun	"	Bbl. maker	A					
<del>1180</del>	<del>57</del>	<del>John Marshall Butler</del>	<del>48</del>	<del>Laborer</del>	<del>A</del>					<i>Sick</i>
1211	490	Walter Garrett	"	Machinest	A					

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“Edgar Robinson.” List of Men Order to Report.  
(Robinson Sent to Report at Camp Devens, MA)  
(Occupation Listed as Undertaker)



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1

Robinson, Edgar 4.186.561 \* White \* Colored.

(Surname) (Christian name) (Army serial number)

Residence: 30 Bernard St St Augustine FLORIDA

(Street and house number) (Town or city) (County) (State)

\* Enlisted \* R. A. \* N. G. \* E. R. O. \* Inducted at St Augustine Fla on Aug 4, 1918

Place of birth: St Augustine Fla Age or date of birth: Apr 28/89

Organizations served in, with dates of assignments and transfers:

MD 807 Pion Inf to disch

Grades, with date of appointment:

Pvt 1 cc Apr 25/18;

Engagements:

Wounds or other injuries received in action: None.

Served overseas from Sept 4/18 to July 3/19, from † to †

Honorably discharged on demobilization July 10/19, 19

In view of occupation he was, on date of discharge, reported 0 per cent disabled.

Remarks:

Form No. 724-1, A. G. O. \*Strike out words not applicable. †Dates of departure from and arrival in the U. S.

“Edgar Robinson.” WWI Service Card.

Served overseas from September 4, 1918 to July 3, 1919. Promoted to

Private First Class on April 25, 1918.

Discharged on July 10, 1919.



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PASSENGER LIST OF ORGANIZATIONS AND CASUALTIES

INSTRUCTIONS FOR FILLING OUT THIS FORM

Separate lists of FIVE COPIES EACH, will be filled out by each company or detachment commander as follows:

1st List: Officers arranged according to rank, Army Field Clerks, Field Clerks Q. M. C., Nurses and Civilian Employees. Names should be numbered consecutively beginning with No. 1.

2d List: Non-commissioned Officers above Grade IT, (Par. 9, A. R.), arranged according to grade.

3d List: Enlisted men below Grade IT, (Par. 9, A. R.), arranged according to the usual formation of the Company, that is, by squads. These names should be numbered consecutively beginning with No. 1.

No.	NAME (Family name followed by Christian name and middle initial, name as on service record. Army Serial Number immediately under each name.)	RANK & GRADE (Last, First, Middle)	ORGANIZATION	NOTIFY IN CASE OF EMERGENCY (Give name in full, for example: Mrs. Mary A. Smith)	RELATIONSHIP	ADDRESS (Number, Street, City and State) Do not abbreviate.
19	MILLER, WACK B. 4100452	PVT	807th PIONEER INFANTRY	MRS JENNIE MILLER WIFE		22 ACADEMY STREET EAST ORANGE N.J.
20	WATTS, ALLEN L. 4182386	PVT	"	WILLIAM H.C. WATTS FATHER		143 Dodge Street PROVIDENCE R.I.
21	STOKES, WALTER C. 4181708	PVT	"	JAMES B. STOKES FATHER		413 BROADWAY CAMBRIDGE MASS.
22	SHANNON, SAMUEL 4186961	PVT	"	MRS SUSAN, B. ROBINSON MOTHER		30 BUNARD STREET ST. AUGUSTINE FLA
23	ROBINSON, EDGAR 4186661	PVT	"	MRS SUSAN, B. ROBINSON MOTHER		30 BUNARD STREET ST. AUGUSTINE FLA
24	PUGH, HERBERT Y. 4182531	PVT	"	MRS MARTHA PUGH MOTHER		NEWHAVEN CONN.
25	RUTH, WILLIE 4183782	PVT	"	BELL, JOHNSON FRIEND		1016 JEFFERSON STREET JACKSONVILLE FLA.
26	WILSON, JAMES N. 4102094	PVT	"	MRS RUTH WILSON WIFE		1803 ARCTIC AVENUE ATLANTIC CITY N.J.
27	HUNTER, GEORGE T. 2059279	SGT.	"	GEORGE B. HUNTER FATHER		1216 BALTIC AVE., ATLANTIC CITY, N.J.

DISPOSITION:

Five copies of this list to be handed to the representative of embarkation personnel administration at embarkation.

For V. L. Brown  
(Signature of Company Commander.)

“Edgar Robinson.” Army Transport Passenger Lists.

Robinson, no. 23, listed with his unit aboard the *USS Maui* on September 4, 1918 in route to France.

Listed his mother Susan as his emergency contact.



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“Edgar Robinson.” Photograph of *U.S.S Maui*.

DECLASSIFIED  
Authority NND 785095

Listed his mother Susan as his emergency contact.





“Edgar Robinson.” Photograph of *U.S.S. Orizaba*.

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**FLORIDA STATE BOARD OF HEALTH  
BUREAU OF VITAL STATISTICS**

**CERTIFICATE OF DEATH**  
State File No. **6914**

**1 PLACE OF DEATH**  
County St. Johns District No. 4291  
Precinct (Write name, not number) Precinct No. 4257C  
or City or Town No. 42-512  
City St. Augustine (No. 30 Bayard) St. St. Ward (If death occurred in a hospital or institution, give its NAME instead of street and number)

**2 FULL NAME** Edgar Robinson  
(a) Residence No. 30 Bayard St. St. Ward (If nonresident give city or town and State)  
Length of residence in city or town where death occurred 1 yrs. 0 mos. 0 ds. How long in U. S., if of foreign birth? yrs. mos. ds.

**PERSONAL AND STATISTICAL PARTICULARS**

**3 SEX** Male **4 COLOR OR RACE** Colored **5 Single** Single  
Married, Widowed, or Divorced Single  
**6a** Is married, widowed, or divorced Single  
**HUSBAND of** OK  
**(or) WIFE of** OK

**6 DATE OF BIRTH** (Month) 4 (Day) 0 (Year) 1927  
**7 AGE** 40 yrs. 0 mos. 0 ds. **IF LESS than** 1 day 0 hrs. 0 min.

**8 OCCUPATION OF DECEASED**  
(a) Trade, profession, or particular kind of work Laborer  
(b) General nature of industry, business, or establishment in which employed (or employer)  
(c) Name of employer

**9 BIRTHPLACE** (city or town) St. Augustine (State or country) Fla.

**10 NAME OF FATHER** Robert Robinson (City) St. Augustine (State or country) Fla.

**11 BIRTHPLACE OF FATHER** (City) St. Augustine (State or country) Fla.

**12 MAIDEN NAME OF MOTHER** Susan Bryant (City) St. Augustine (State or country) Fla.

**13 BIRTHPLACE OF MOTHER** (City) St. Augustine (State or country) Fla.

**14 Informant** Susan Robinson (Address) 30 Bayard St.

**15 Filed** 4/5/27 19 27 **Form No. 1** OK **Registrar** Edgar Robinson

**MEDICAL CERTIFICATE OF DEATH**

**16 DATE OF DEATH** (Month, day, and year) April 3, 1927

**17** I HEREBY CERTIFY, That I attended deceased from March 17, 1927 to April 3, 1927 that I last saw him live on April 3, 1927 and that death occurred, on the date stated above, at 70 m. The CAUSE OF DEATH\* was as follows:  
Acute Parenchymatous nephritis  
(duration) OK yrs. 0 mos. 14 ds.

**CONTRIBUTORY** OK (Secondary) (duration) yrs. mos. ds.

**18** Where was disease contracted if not at place of death?  
Did an operation precede death? no Date of —  
Was there an autopsy? no  
What test confirmed diagnosis? Long Chemical (Signed) Long Chemical M. D. 4/3/27 19 (Address) 74 Bridge

\*State the Disease Causing Death, or in deaths from Violent Causes, state (1) Means and Nature of Injury, and (2) whether Accidental, Suicidal, or Homicidal. (See reverse side for additional space.) 185

**19 Place of Burial, Cremation, or Removal** National Cemetery **Date of Burial or Removal** 13-7 19 27

**20 UNDERTAKER** E. A. Johnson **Address** City

N.B.—Every item of information should be carefully supplied. Any should be stated positively. A statement of DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important. See instructions on back of certificate.

“Edgar Robinson.” Florida Death Certificate.

Robinson died on April 3, 1927.

Listed as single never married.



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REPORT OF INTERMENT										NAME OF CEMETERY				
TO: THE QUARTERMASTER GENERAL, WASHINGTON 25, D. C.										ST. AUGUSTINE, FLA. NATIONAL CEM.				
NAME (Last, First, Middle Initial) Robinson, Edgar										EMBLEM (Check one) <input type="checkbox"/> CHRISTIAN <input type="checkbox"/> HEBREW <input type="checkbox"/> OTHER (Specify)				
RANK Pvt. 1/cl.					SERIAL NUMBER 4186661					SERVICE DATA (Company, Regiment, Division, or other organization, and basic arm of service)  M & D Co. 817 Pion. Inf.				
STATE FLA					<input type="checkbox"/> WW I <input type="checkbox"/> OTHER (Specify) <input type="checkbox"/> WW II									
DATE OF BIRTH			DATE OF DEATH			DATE OF INTERMENT			GRAVE LOC.		DATES OF SERVICE			
MONTH	DAY	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEAR	SEC. OR PLOT	GRAVE OR LOT NO.	ENLISTMENT	DISCHARGE	DIED ON A. D.	RETIREMENT
			Apr.	3	1927				A	300				
REMARKS (Authority for interment, pension, or claim number, disinterment, etc.)  Info. taken from Old Card 7/9/1952. ehb. C.R. Apr. 1927.										HEADSTONE OR MARKER ORDERED				
NAME AND ADDRESS OF NEXT OF KIN OR OTHER RESPONSIBLE PERSON										SHIPPING POINT FOR HEADSTONE NEAREST FREIGHT STATION				
SIGNATURE OF SUPERINTENDENT OF NATIONAL CEMETERY, OR TRANSPORTATION OFFICER, OR QM OF POST CEMETERY										POST OFFICE ADDRESS				
QMC FORM 14 REV 1 JUL 50										9 0 8 / 0 2 9 0 0 1 9 PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE				
SEE INSTRUCTIONS ON REVERSE SIDE														

“Edgar Robinson.” Interment Card  
erroneous unit (817th). St.  
Augustine National Cemetery.



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“Edgar Robinson.” Headstone.  
St. Augustine National Cemetery.



DEATH INDEX						
NAME	PLACE	SEX	COL.	GUIDE VOL.	NUMBER	YEAR
Robinson, Alfred	Volusia	M	B	359	18062	1927
Robinson, Alice	Leon	F	B	359	5136	1927
Robinson, Amanda	Jax	F	B	341	9230	1927
Robinson, Annie B.	Polk	F	B	343	10037	1927
Robinson, Arthur Jr.	Bay	M	W	359	18400	1927
Robinson, Arthur Francis Jr.	Escambia	M	B	358	7733	1927
Robinson, Bessie E.	Jax	F	B	362	19986	1927
Robinson, Bettie	Holmes	F	B	349	13329	1927
Robinson, Cannie	Tampa	F	B	384	924	1927
Robinson, Carrie	Volusia	F	B	346	11863	1927
Robinson, Carrie Lee	Dade	F	B	350	13900	1927
Robinson, Cecil	Hillsboro	F	B	351	14310	1927
Robinson, Charles	Jax	M	B	384	561	1927
Robinson, Charles E.	Osceola	M	W	329	3076	1927
Robinson, Charley	Tampa	M	B	357	17380	1927
Robinson, Clarence	Duval	M	B	347	12406	1927
Robinson, Collin H.	Jackson	M	B	338	4554	1927
Robinson, Corothe	Alachua	F	B	350	13617	1927
Robinson, Deborah A.	Marion	F	W	342	9817	1927
Robinson, Duncan	Jax	M	W	351	4155	1927
Robinson, Euse	Jax	M	B	331	4055	1927
Robinson, Edgar	St. Johns	M	B	336	6914	1927
Robinson, Edwin Herbert	Lake	M	W	332	4597	1927
Robinson, Elizabeth	Miami	F	B	327	2115	1927
Robinson, Elizabeth	Jax	F	B	357	17143	1927
Robinson, Ellen	St. Johns	F	B	346	11694	1927
Robinson, Elmer	Jax	M	W	327	2322	1927
Robinson, Emanuel	Leon	M	B	342	9752	1927
Robinson, Emmitt	Dade	M	B	337	7409	1927
Robinson, Forrest M.	Jax	M	W	384	548	1927
Robinson, Frank	Polk	M	B	349	13032	1927
Robinson, George	Jax	M	B	350	13937	1927
Robinson, George	Jefferson	M	B	339	8077	1927
Robinson, G. H.	Escambia	M	W	360	18689	1927
Robinson, Harry	Gadsden	M	B	351	14108	1927
Robinson, Hattie	Jax	F	B	323	491	1927
Robinson, Henry Jr.	Nassau	M	B	355	16064	1927
Robinson, Henry	Madison	M	B	332	4659	1927
Robinson, Irene	Escambia	F	B	352	14958	1927
Robinson, Isabelle	Miami	F	B	347	12266	1927
Robinson, Jack Edward	Palm Beach	M	W	329	3095	1927
Robinson, James	Seminole	M	B	352	14765	1927
Robinson, James P.	Lee	M	W	325	1078	1927
Robinson, Janie	Jax	F	B	357	17023	1927
Robinson, Jewell	Polk	F	B	386	1536	1927
Robinson, Jim	Tampa	M	B	351	14245	1927
Robinson, John (50 yrs)	Jax	M	B	334	522	1927

“Edgar Robinson.” 1927 Florida Death Index.  
Death of Edgar Robinson in St. Johns County.