

1

USMC NEUVILLE EN CONDROZ  
PLOT A, ROW 17 GRAVE 13  
DATE OF BURIAL. 7 JULY 1949  
VERIFIED BY GRS OFFICER, DISINTERMENT DIRECTIVE  
CLYDE B. SPINKS, CAPT., FA

SECTION A - *Clyde B Spinks*  
NAME AND BURIAL LOCATION OF DECEASED  
DIRECTIVE NUMBER 1260 02104  
DATE 15 08 48  
DAY MONTH YEAR

NAME UNKNOWN  
SERIAL NUMBER X-005602  
GRADE UNK  
ARM 0  
RACE 0  
RELIGION 6

CEMETERY NEUVILLE BELGIUM  
PLOT Y ROW 3 GRAVE 64  
DISPOSITION OF REMAINS 1202 80  
CODE DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE NEUVILLE-EN-CONDROZ, BELGIUM  
NAME AND ADDRESS OF NEXT OF KIN (BY ADMINISTRATIVE DECISION)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME UNKNOWN  
SERIAL NUMBER X-5602  
GRADE UNK  
DATE OF DEATH  
DATE DISTINTERRED 29 NOV 48

IDENTIFICATION TAG ON  
 REMAINS ROB  
 MARKER EMB  
ORGANIZATION UNKNOWN  
RELIGION UNK  
IDENTIFICATION VERIFIED BY STANLEY C TYRRELL  
CAPT INF NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL MATTRESS COVER  
CONDITION OF REMAINS ADVANCED DECOMPOSITION. REMAINS COMPLETE

OTHER MEANS OF IDENTIFICATION ONE (1) EMBOSSED PLATE WITH REMAINS GIVES EVACUATION NUMBER 9152.

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)  
NONE

REMAINS PREPARED AND PLACED IN ~~CASKET~~ TRANSFER BOX

DATE 9 DEC 1948 BY MELVIN W BLACKBURN, EMBALMER  
CASKET SEALED BY CALVIN WATSON EMBALMER (Signature) CALVIN WATSON, EMBALMER

CASKET BOXED AND MARKED 14 DEC 48 WILLIAM MOROSOFF  
DATE BY CLERK RECORDER  
ALL TAGS, PLATES AND MARKINGS VERIFIED BY: FRANKLIN J ST CLAIR 1/LT INF

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct. EXCEPT CASKEPING

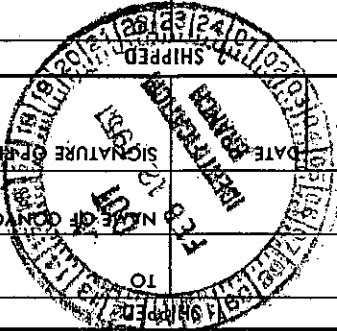
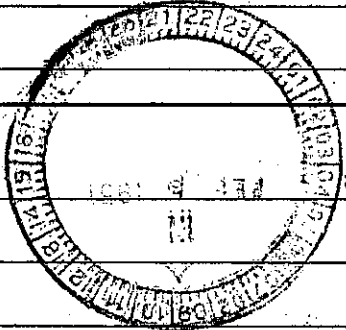
JAMES M FORESTER 1/LT OMC  
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS  
I CERTIFY that the typed names appearing above are the same as the original signatures on the No. 4 copy of F - 1194 concerned  
*Raymond G. Johnson, 1st Lt. Inf*  
AUG 1949  
REGISTRATION BRANCH  
MED. DIV.

CT

**RECORD OF CUSTODIAL TRANSFER**

ROW	IND OF CONVEYANCE	SIGNATURE OF SHIPPER	DATE	TO	NAME OF CONVOYER	SIGNATURE OF RECEIVER	DATE
3. SHIPPED							
ROW	IND OF CONVEYANCE	SIGNATURE OF SHIPPER	DATE	TO	NAME OF CONVOYER	SIGNATURE OF RECEIVER	DATE
4. SHIPPED							
ROW	IND OF CONVEYANCE	SIGNATURE OF SHIPPER	DATE	TO	NAME OF CONVOYER	SIGNATURE OF RECEIVER	DATE
5. SHIPPED							
ROW	IND OF CONVEYANCE	SIGNATURE OF SHIPPER	DATE	TO	NAME OF CONVOYER	SIGNATURE OF RECEIVER	DATE
6. SHIPPED							
ROW	IND OF CONVEYANCE	SIGNATURE OF SHIPPER	DATE	TO	NAME OF CONVOYER	SIGNATURE OF RECEIVER	DATE
7. SHIPPED							
ROW	IND OF CONVEYANCE	SIGNATURE OF SHIPPER	DATE	TO	NAME OF CONVOYER	SIGNATURE OF RECEIVER	DATE



HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

RRE 293

4 May 1949  
(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

The records pertaining to Unknown X- 5602, Plot Y,  
Row 3, Grave 64, USMC NEUVILLE, Belgium,  
have been reviewed and it is the opinion of this Office that sufficient  
evidence is not available at the present time to establish the identity  
of the deceased concerned. The remains concerned should be classified  
as unidentifiable at the present time.

Report of Reprocessing of remains was forwarded to your Office  
by Transmittal Ltr. No. 2372, dated 23-7-47.

Case reviewed by undersigned Members of the Board of Review:

Roger Berger  
-----  
MAJ. Roger BERGER, O-251736      CRD      Capt Jack C. HAYES, O-1577297      QMC

-----  
Capt. Edward F. PRICE, Jr. O-1588236      QMC      1/Lt Edward E. STOUT, O-1594512      CE

-----  
1/Lt. Ernest J. OGLESBY, O-449004,      Cav

*[Handwritten Signature]*  
Received 3837-6 May 49  
Not identifiable from  
information presently  
available      *[Handwritten Signature]*

Incl #7

(Cont'd)

ATTACHED SHEET TO FORM #1042

REMARKS: (Cont'd)

This is a reburial box containing the remains of an Unknown which were transferred by 3rd Field Command to the Central Identification Point on the latter's activation, in August 1946.

An intensive search was conducted for any case records on this particular case but to no avail. This search included checking the records of the former 3rd Field Command which were later transferred to 1st Field Command.

The only papers available to form a case record for Evacuation Number 9152 are those originating at the C.I.P.: i.e., Form #11, Check List, Form 1A, Tooth Chart, and Fluoroscopic Report.

Processing at Central Identification Point revealed no positive identifying clues, therefore, this case is classified

"UNKNOWN".

It is very possible that these remains are not of an American because of the teeth. (See Tooth Chart).

### IDENTIFICATION CHECK LIST

(To be completely filled out and attached to each copy  
of Report of Interment WD QMC Form 1042)

Unknown X -5602  
Cemetery Neuville en Condroz (Belgium)  
Plot \_\_\_\_\_ Row \_\_\_\_\_ Grave \_\_\_\_\_

- Date processed:**  
1. ~~XXXXXXXXXX~~ 7 May 1947  
(Hour) (Date)
2. Place of death unknown  
(Name of closest town) (Coordinates and letter Prefix, maps)  
  
(Sheet, scale and serials used)
3. Remains recovered or disinterred by Unknown  
(Name and organization)
4. Evacuated to Cemetery by CENTRAL IDENTIFICATION POINT : Strasbourg, (France)  
(Name and organization)
5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

Item	Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear	<u>NONE</u> (Type)		
Raincoat	<u>None</u>	<u>No clothing</u>	
Overcoat	<u>None</u>		
Jacket, Field	<u>None</u>		
Jacket, Combat	<u>None</u>		
Mackinaw	<u>None</u>		
Sweater	<u>None</u>		
Jacket, HBT	<u>None</u>		
* Shirt, Wool OD	<u>None</u>		
Undershirt, Wool	<u>None</u>		
Undershirt, Cotton	<u>None</u>		
Trousers, HBT	<u>None</u>		
* Trousers, Wool OD	<u>None</u>		

Belt, web ..... **None**

Drawers, wool ..... **None**

Drawers, cotton ..... **None**

Leggings, wool ..... **None**

Socks, cotton ..... **None**

\* Shoes ..... **None** (type)

Overshoes ..... **None**

Web Equipment ..... **None** (type)

(Other item) ..... **None**

(Other item) ..... **None**

\* If body is nude, sizes of these items should be computed by measuring the remains

Chevrons or Insignia ..... **None**  
 (Type & location; shirt, jacket, coat, helmet)

Shoulder Patch ..... **None**

Does clothing indicate that deceased was a member of the Air, Ground or Naval Force? **NO**

6. Description of Remains: **Bones measurements: FIBULA 35,2 TIBIA:35,3 HUMERUS: 31,9**  
**RADIUS:23,9 ULNA: 25,9 FEMUR: 44,7**

Age **UTD** Height **Estimated: 5:4 1/8** Weight **UTD** Description of wounds **UTD**

Bandages or dressings **NONE FOUND** Scars **UTD**  
 (Length, width, location)

**UTD** Tattoos  
 (Number, location — illustrate on separate page)

Outstanding moles, warts or birthmarks **UTD**  
 (Yes-no; description, location)

Sunburn or tan, other than hand and face **UTD**

Complexion **UTD**  
 (Light, medium, dark, clear, pimples, pocks, freckles)

Build **UTD**  
 (Large, fat, thin, muscular)

Hair **NONE FOUND**  
 (Color, length, quantity, curly, wavy, straight, whorls, or definite parting)

Hair **UTD**  
 (Baldness, widows peak, distinctive cutting or other characteristics)

Sideburns **UTD** Mustache **UTD** Beard or **UTD**  
 (Color, setting, shape) (Color, size, shape) (Length, heavy)

Goatee ..... **UTD**  
(Light, color, extent)

Eyes ..... **UTD** ..... Eyebrows ..... **UTD**  
(Color, setting, shape) (Color, bushiness, extent across nose)

Nose ..... **UTD** ..... Ears ..... **UTD**  
(Size, shape, straight) (Size, set close to or far from head)

Mouth ..... **UTD** ..... Lips ..... **UTD**  
(Large, medium, small) (Small, large, full)

Teeth ..... **see tooth chart**  
(White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin ..... **UTD**  
(Prominent, receding, pointed, dimples, double)

Jaw ..... **UTD** ..... Circumference of head in inches ..... **20 1/2"**  
(Large, small, normal) (Hat band)

Neck ..... **UTD** ..... Larynx ..... **UTD**  
(Size, length, short, normal, wrinkled) (Prominent, normal)

Shoulders ..... **UTD** ..... Arms ..... **UTD**  
(Broad, straight, small, rounded) (Length, muscular, color, extent and quantity of hair)

Hands ..... **UTD**

Fingers ..... **UTD**  
(Short, thick, long, slender, size of knuckles, missing fingers or joints)

..... **UTD**  
(Unusual characteristics of fingernails)

Chest ..... **UTD**  
(Size of nipples, color, quantity and extent of hair, large, small, normal)

Waist ..... **UTD**  
(Size of navel, appendectomy, amount, quantity, and color of hair)

Back ..... **UTD** ..... Circumcision ..... **UTD** ..... Pubic Hair ..... **None found**  
(Quantity and extent of hair) (Yes-no) (Color)

Hernioplasty ..... **UTD**  
(Yes-no; location)

Legs ..... **UTD**  
(Inseam, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

Feet ..... **UTD** ..... Toes ..... **UTD**  
(Size, corns, callouses, flat) (Slender, straight, crooked, overlap)

Evidence of healed fractures ..... **None found**  
(Nose, arms, legs, etc.)

NOTE: Use attached charts "A" and "B" to indicate parts not received.

7. Have finger prints been placed on Report of Interment? NO

(Yes-no)

If not, explain Too decomposed

8. Has tooth chart been prepared? Yes If not, explain  
(Yes-no)

9. Remarks Estimated weight of remains; 25 Lbs.  
A small amount of dry decomposed flesh covered most of body.  
Fluoroscopic Examination revealed one tooth.  
No clothing found on remains.  
Black out Chart not necessary.  
All remains present. NO broken or fractured bones found.  
It is very possible that these remains are not that of an  
American because of the teeth. (See Tooth Chart remarks  
for further information.)  
Nothing found to warrant Chemical Laboratory Examination.  
Fluoroscopic Examination revealed one tooth L-11.

I certify that I have personally viewed the remains of subject deceased and all resulting information has been recorded to the best of my knowledge.

This is a reburial box contain-  
ing the remains of an Unknown  
which were transferred by 3rd  
Field Command to the Central  
Identification Point on the  
latter's activation in  
August 1946.

An intensive search was  
conducted for any case  
records on this particul-  
ar case, but to no avail.  
This search included:  
checking the records of  
the former 3rd Field  
Command which were later  
transferred to 1st Field  
Command.

The only papers available  
to form a case record for  
Evacuation Number 9152 are  
those originating at the  
C.I.P.: i.e., Form #11,  
Check List, Form IA, Tooth Chart, and  
Fluoroscopic Report.  
Processing revealed no positive  
identifying clues, therefore, this case  
is classified; UNKNOWN.

*Ernest C. Gaddy*  
(Officer's Name)

ERNEST C. GADDY

CWO.  
Rank

USA.  
Service

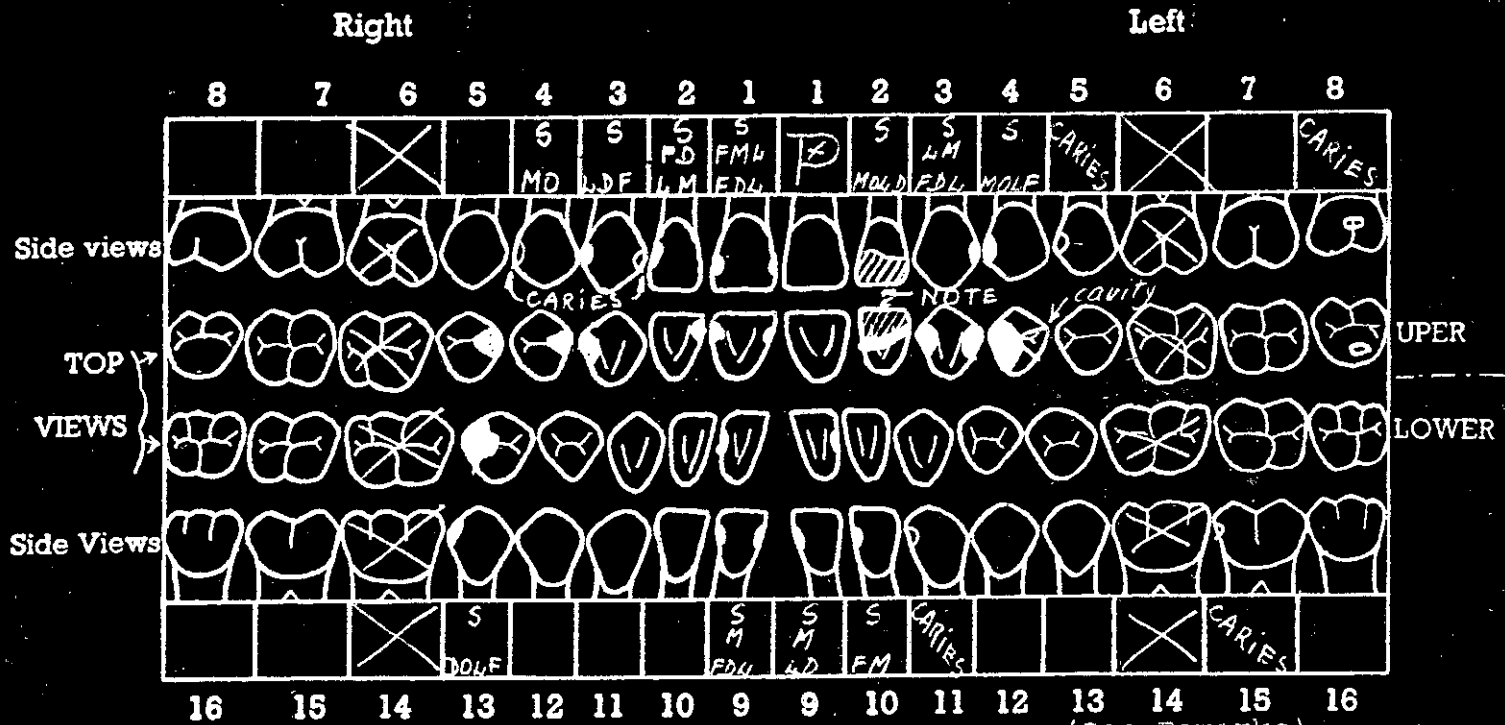
CENTRAL IDENTIFICATION POINT.  
(Organization)



# TOOTH CHART

7 May 1947

UNKNOWN X-5602  
 Last Name: UNKNOWN First: UNKNOWN Initial: UNKNOWN Rank: UNKNOWN Serial No.: UNKNOWN  
 Unit: UNKNOWN Organization: UNKNOWN  
 Place of Death: UNKNOWN Date of Death: UNKNOWN Cause of Death: UNKNOWN



(See Remarks)  
 This dental chart is 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. See reverse side for illustrations.

48

Edward Sebastian 162  
 Signature of Officer or other person who prepared Tooth chart  
Ernest C. Gaddy  
 Verified by G. R. S. Officer  
 ERNEST C. GADDY CWO. USA. C.I.P.

**MISSING TEETH**... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X"ed out and labeled, thus:



**CROWNED TEETH**... Block in solid the crown of tooth (label gold, porcelain, Silver 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 as accurately as possible (block in and label gold, silver, cement), thus:



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

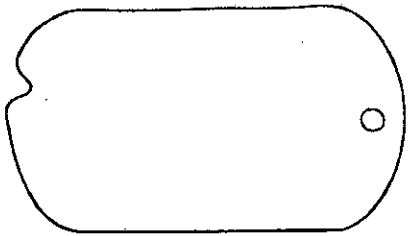


**DENTURES (PLATES)**... Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp".


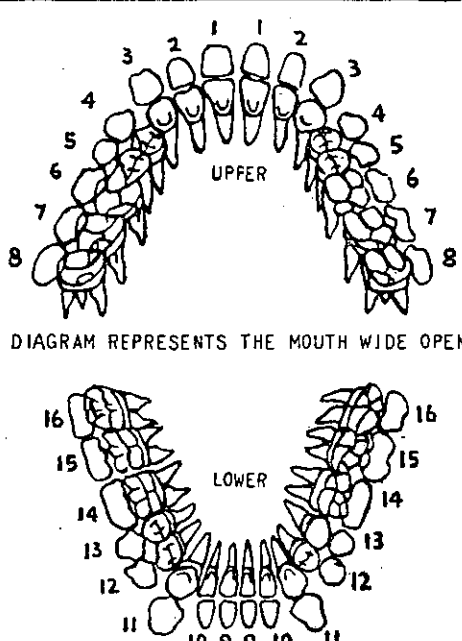





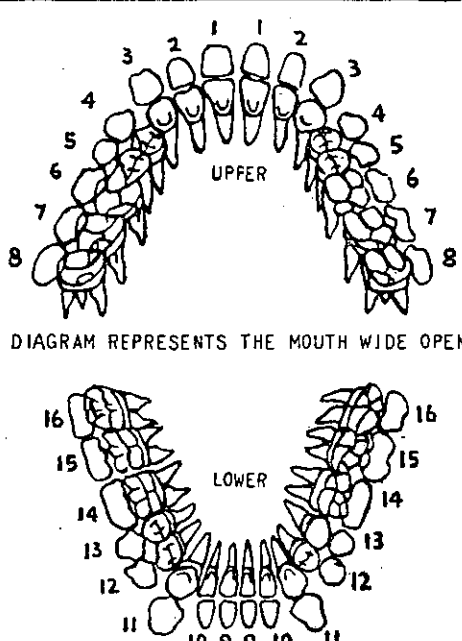





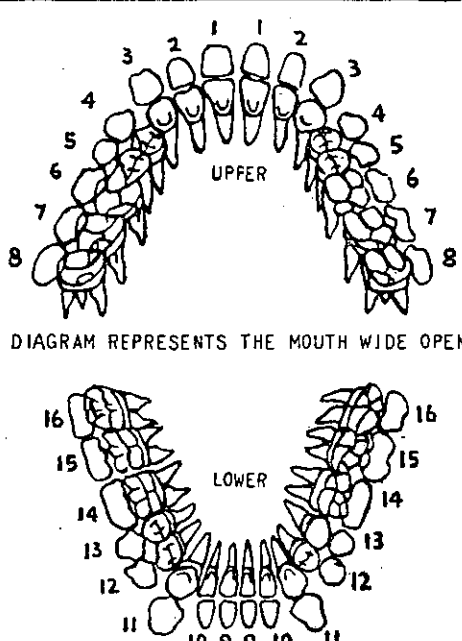




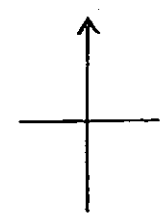
**ADDITIONAL SPACE FOR FURTHER REMARKS**

Posthumously missing, I 1.  
 Spaces: R 5-7, NONE; R 13-15, NONE; L 5-7, NONE; L 13-15, NONE.  
 Rotated mesially 1/8 turn, R 7 and L 7, 13.  
 Rotated distally 1/8 turn, R 4 and L 12.  
 Medium sized ivory colored teeth in fair alignment.  
 L 2 broken off as indicated by shading, impossible to determine whether before or after death.  
 It is possible that this man is not an American, as it is unusual to have silicate fillings in posterior teeth; also L 2 and L 4 would, ordinarily have been extracted in America, (the restorations are very large).  
 Several small caries present, also indicate that this man was not in the American Army.

49

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		<b>REPORT OF INTERMENT</b> (AR 30-1810 and AR 30-1815)				DATE OF REPORT 18 June 1947	
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.					
		NAME (Last, first, middle initial) UNKNOWN X-5602				SERIAL No. Unknown	
		GRADE UNKNOWN		ORGANIZATION UNKNOWN		BRANCH OF SERVICE Unknown	
		RACE UNKNOWN		RELIGION UNKNOWN		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	
PLACE OF DEATH UNKNOWN		CAUSE OF DEATH UNKNOWN			DATE OF DEATH UNKNOWN		
EMERGENCY ADDRESSEE (Name, relationship, and address) UNKNOWN							
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)					
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes							
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME NONE							
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.							
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY U.S. Military Cemetery, Neuville en Condroz, Belgium (VK-390187)							
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.	
18 June 1947	1500	Casket	wooden cross	Y	3	64	
WAS THIS A REBURIAL? (Yes or no) Unknown	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE Unknown			PLOT No.	ROW No.	GRAVE No.	
TYPE OF RELIGIOUS CEREMONY Joint P, C & H		PERSON CONDUCTING BURIAL RITES Chaplains Rusher Saatman & Lepchivcher		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY Report of Burial			
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) No		IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) GRS					
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) Unknown X-5605			RANK	SERIAL No.	ORGANIZATION	GRAVE No.	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) Unknown X-5543			Unk	Unk	Unk	65	
			RANK	SERIAL No.	ORGANIZATION	GRAVE No.	
			Unk	Unk	Unk	63	
SIGNATURE OF PERSON PREPARING REPORT ERNEST C. GADY CWO. USA. C.I.P.			SIGNATURE OF GRS OFFICER VERIFYING REPORT RAYMOND G. JOHNSON 1st Lt. Inf. C.I.P.				
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.							

**RESTRICTED**

	Section UNIDENTIFIED REMAINS.	<p><b>INSTRUCTIONS:</b></p> <p>(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks.</p> <p>(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.</p>												
LEFT LITTLE FINGER	LEFT RING FINGER	HEIGHT 5'4 1/8"	WEIGHT 175 UTD	COLOR OF EYES UTD	COLOR OF HAIR UTD	BIRTHMARKS, SCARS, OR TATTOOS UTD								
LEFT MIDDLE FINGER	WEAPON AND SERIAL No. None		LAUNDRY MARKS None		WHERE BODY WAS BURIED OR FOUND Unknown									
LEFT INDEX FINGER	OTHER IDENTIFICATION CLUES													
LEFT THUMB	RIGHT THUMB	RIGHT INDEX FINGER	RIGHT MIDDLE FINGER	RIGHT RING FINGER	RIGHT LITTLE FINGER	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">                 FILLINGS                   SILVER FILLING GOLD FILLING             </td> <td rowspan="6" style="width:30%; text-align:center; vertical-align: middle;">                  UPPER LOWER DIAGRAM REPRESENTS THE MOUTH WIDE OPEN             </td> </tr> <tr> <td>                 CAVITIES                   CAVITY DECAYED             </td> </tr> <tr> <td>                 MISSING TEETH                   TOOTH MISSING             </td> </tr> <tr> <td>                 CROWNED TEETH                   PORCELAIN CROWN GOLD CROWN             </td> </tr> <tr> <td>                 BRIDGE WORK                   GOLD BRIDGE             </td> </tr> <tr> <td colspan="2">                 FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY             </td> </tr> </table>	FILLINGS  SILVER FILLING GOLD FILLING	 UPPER LOWER DIAGRAM REPRESENTS THE MOUTH WIDE OPEN	CAVITIES  CAVITY DECAYED	MISSING TEETH  TOOTH MISSING	CROWNED TEETH  PORCELAIN CROWN GOLD CROWN	BRIDGE WORK  GOLD BRIDGE	FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY	
FILLINGS  SILVER FILLING GOLD FILLING	 UPPER LOWER DIAGRAM REPRESENTS THE MOUTH WIDE OPEN													
CAVITIES  CAVITY DECAYED														
MISSING TEETH  TOOTH MISSING														
CROWNED TEETH  PORCELAIN CROWN GOLD CROWN														
BRIDGE WORK  GOLD BRIDGE														
FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY														
														
REMARKS: Form II, Identification Check List, Form IA Tooth Chart, accomplished. Unable to obtain fingerprints because of decomposition. Estimated weight of remains recovered: 25 lbs.														

**RESTRICTED**