

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMBLND
EUROPEAN AREA
APO 58 US ARMY

124 28 February 1949
Date

SUBJECT: Unidentifiable Remains

TO: The Quartermaster General
Memorial Division
Washington 25, D. C.

293

1. The records pertaining to Unknown X- 124, Plot X,
Row 8, Grave 154, USMC (Blosville) France have been
reviewed and it is the opinion of this office that insufficient evidence
is available to establish the identity of this deceased, and that these
remains should be classified as unidentifiable.

2. Report of Reprocessing was forwarded to your office by
letter of transmittal No. 2105, dated 3 December 1946. No
further information is available.

~~FOR THE COMMANDING GENERAL:~~

Case reviewed by undersigned Members of the Board of Review:

/s/
/t/

/s/ Capt Stanley C. Tyrrell, O-1304296 Inf

/s/ 1st Lt Edward E. Stout, O-1594512 CE

/s/ 1st Lt Ernest J. Oglesby, O-449004 Cav

Received 22 MAR 1949
Not identifiable from
information presently
available

OQMG

✓

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

RRE 293

28 February 1949
(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

The records pertaining to Unknown ⁷⁰X-124 Plot X
Row 8, Grave 154, USIC Blosville, France

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. 2105, dated 3 December 1946.

Case reviewed by undersigned Members of the Board of Review:

Stanley C. Tyrrell

Capt. Jack C. HAYES, O-1577297 OMC Capt Stanley C. TYRRELL, O-1304296 Inf

Edward E. Stout

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

Ernest J. Oglesby

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

Received 22 MAR 1949 OQMG
Not identifiable from
information presently
available

inc # 8

cmds GWA

1 Interred 4 Apr 1949
 A-19-9-USMC St Laurent
 C.H. HIEMSTRA
 1/Lt Inf Interring Officer.

DISINTERMENT DIRECTIVE

SECTION A - NAME AND BURIAL LOCATION OF DECEASED	DIRECTIVE NUMBER 3508 00000	DATE 15 11 47 DAY MONTH YEAR
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NAME UNKNOWN	SERIAL NUMBER X-000124	RANK	ARM 0	DATE OF DEATH DAY MONTH YEAR
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CEMETERY BLOSVILLE - CARENTAN	DISPOSITION OF REMAINS 0	DATE 3505 80 CODE DIST. PT.
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PLOT X	ROW 8	GRAVE 154	COUNTRY FRANCE	CAUSE OF DEATH 6
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SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE ST. LAURENT, FRANCE (BY ADMINISTRATIVE ORDER)	NAME AND ADDRESS OF NEXT OF KIN
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SECTION C - DISINTERMENT AND IDENTIFICATION

NAME Unknown	SERIAL NUMBER X-124	RANK UTD	DATE OF DEATH UTD	DATE DISTINTERRED 4 February 1948
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION UNKNOWN	RELIGION UTD	IDENTIFICATION VERIFIED BY T. C. MURRAY Capt, QMC NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Blanket	CONDITION OF REMAINS Advanced decomposition
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OTHER MEANS OF IDENTIFICATION
GRS Form #1

MINOR DISCREPANCIES
None.

REMAINS PREPARED AND PLACED IN CASKET
DATE **9 February 1948** BY **Robert R. Johnson**

CASKET SEALED BY Robert R. Johnson	EMBALMER (Signature) <i>Robert R. Johnson</i>
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CASKET BOXED AND MARKED DATE 9 Feb 48 BY Robert Kreil	SHIPPING ADDRESS VERIFIED BY Charles J. Missigman
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I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.

Charles J. Missigman
 Charles J. Missigman
 SIGNATURE OF GRS INSPECTOR

FILE

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

10 JUN 1949
 REGISTRATION
 BRANCH
 MEM. DIV.

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC Blosville, France		TO Casketing Point B, St. Laurent, France	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER Pvt Robert C. Spach	
SIGNATURE OF SHIPPER <i>Capt. Randall</i> J. F. RANDALL, Capt, QMC	DATE 7 Feb 48	SIGNATURE OF RECEIVER <i>D. A. Mackenzie</i> D. A. MACKENZIE, Capt, Inf.	DATE 7 Feb 48

2. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

3. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

4. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

7. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

CHECK LIST OF UNKNOWNNS

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

Unknown X - 124
 Cemetery **Elesville, France**
 Plot **X** Row **8** Grave **154**

1. ~~Reprocessed~~ **Reprocessed** **28 October 1946**
~~Arrived at cemetery~~
(hour) (date)
2. Place of death
(name of closest town) (coordinates and letter Prefix, maps)
(Sheet, scale and serials used)
3. Remains ~~recovered or~~ disinterred by **Subordinate Identification Point, Carentan, France**
(name and organization)
4. Evacuated to Cemetery by
(name and organization)
5. **Description of clothing and equipment : (if clothes do not fit, obtain size from body measurements).**

Clothing Markings Sizes Indicate unusual markings
 Color wear, tear, repairs, etc.

Item	
*Headgear	None <small>(type)</small>
Raincoat	None
Overcoat	None
Jacket, Field	None
Jacket, Combat	None
Mackinaw	None
Sweater	None
Jacket, HBT	None
*Shirt, Wool OD	None
Undershirt, Wool	None
Undershirt, Cotton	One (1)
Coveralls	Unable to determine kind or Branch of Service
Trousers, HBT	
*Trousers, Wool OD	None

Belt, Web **None**

Drawers, Wool **None**

Drawers, Cotton **One (1) O.D. marked "B-4567"** ✓

Leggins, Wool **None** (Note unusual lacing)

Wool
Socks, ~~Cotton~~ **One (1)**

*Shoes (type) **One (1) left shoe - none Service**

Overshoes **None**

Web Equipment (Type) **None**

(Other item) **None**

(Other item) **None**

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

6. Chevrons or Insignia **None**
(type & location : shirt, jacket, coat, helmet)

Shoulder Patch **None**

7. Does clothing indicate that deceased was a member of the Air, Ground or Naval Forces
Utd

8. Description of Remains :
Age **Utd** Height **Est. 5'9 1/2"** Weight **Est. 155 lbs** Description of wounds **Utd**

Bandages or dressings **Utd** Scars **Utd**
(length, width, location)

Tattoos **Utd**
(Number, location — illustrate on sep, page)

Outstanding moles, warts or birthmarks **Utd**
(yes-no : description, location)

Sunburn or tan, other than hands & face **Utd**

Complexion **Utd**
(light, med. dark, clear, pimples, poeks, freckles)

Build **Utd**
(large, fat, thin, muscular)

Hair **Utd**
(color, length, quantity, curly, wavy, straight, whorls, or definite parting).

Hair **Utd**
 (baldness, widows peak, distinctive cutting or other characteristics).

Sideburns **Utd** **Mustache** **Utd** **Board 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 **Missing**
 (white, size, unevenness, spacing, noticeable crowns, fillings, extract).

Chin **Utd**
 (prominent, receding, pointed, dimple, double)

Jaw **Utd** **Circumference of head in inches** **Missing**
 (large, small, normal) (flat band)

Neck **Utd** **Larynx** **Utd**
 (size, length, short, normal, wrinkled) (prominent, normal)

Shoulders **Utd** **Arms** **29½ inches**
 (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)

.....
 (Unusual characteristics of fingernails)

Chest **Utd**
 (size of nipples, color, quantity & extent of hair, large, small normal)

Back **Utd** **navel** **Utd**
 (quantity & extent of hair) (size of navel, appendectomy, amount)

.....
 (quantity & color of hair) **Circumcision** **Utd** **Pubic hair** **Utd**
 (yes-no) (color)

Hernioplasty **Utd**
 (yes-no; location)

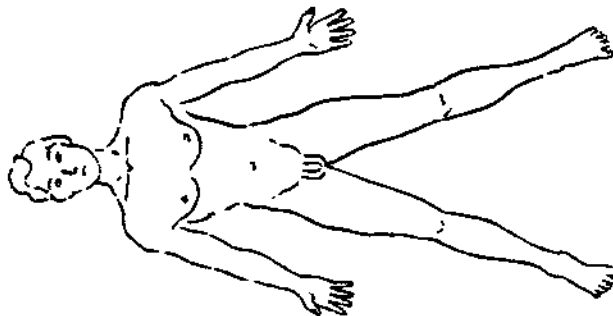
Legs **Inseam measure 31½ inches**
 (inseam, muscular, knock-kneed, bowed, normal, quantity, color & extent of hair)

Feet Utd (size, corns, callouses, flat) Toes Utd (slender, straight, crooked, overlap)

Evidence of healed fractures Utd (nose, arms, legs, etc.)

9. Black out parts of body not received at cemetery :

See attached Chart



10. Have fingerprints been placed on Report of Interment No (yes-no)

If not, explain Too decomposed

11. Has tooth chart been prepared No (yes-no) If not, explain

Head missing

12. Remarks : Burial Report was buried in a wine bottle.

Body wrapped in O.D. blanket.
All bones recovered, except the head. Bones and flesh intact.
Burial bottle enclosed in burial case.
Fluoroscopic Report: "Negative".
Est. weight of remains: 105 pounds.
Cotton O.D. drawers marked "B-4567".
Nothing found to warrant Chemical Laboratory Examination.

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.

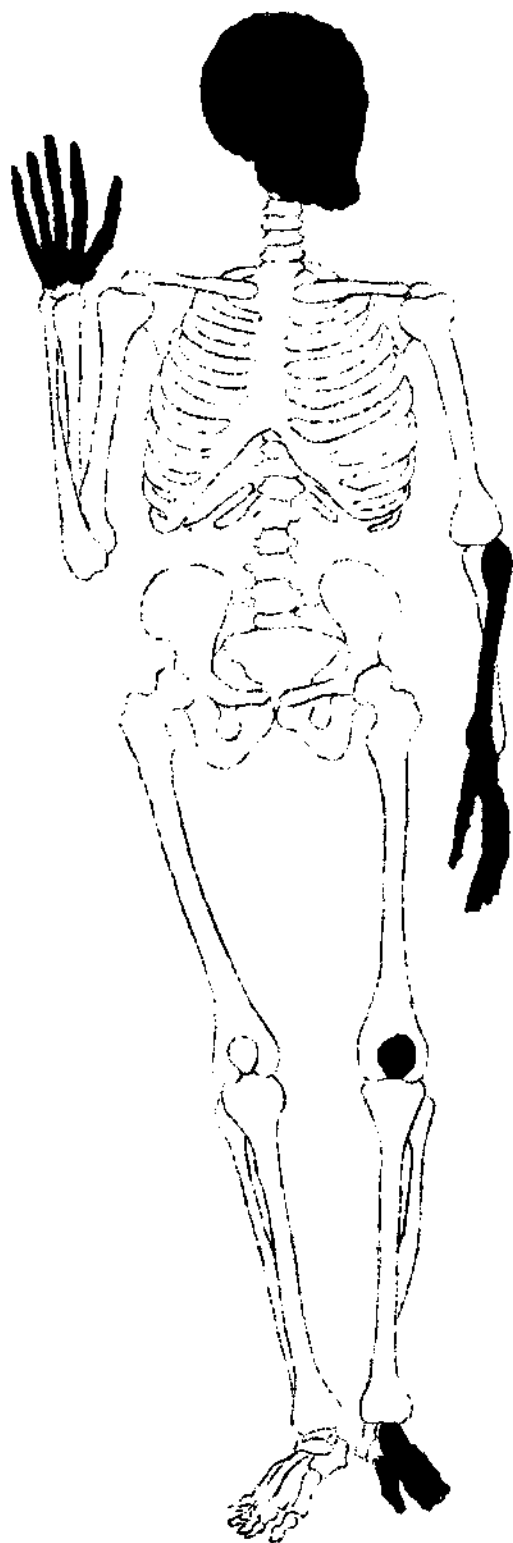
Robert A. Salvador
ROBERT A. SALVADOR
 Officer's Name

Capt. Inf.
 Rank Service

Central Identification Point
 Organization

X-124

Blosville, France
Plot X, Row 8, Grave 154



* COPY *
REPORT OF BURIAL
TM 10-630 AND AR 30-1815

56321

21 August 1944
Date

Unknown X - 124

Last Name	First	Initial	Rank	Serial No.
Unit			Organization	
Place of Death			Cause of Death	
Time and Date of Burial		Name of Cemetery	Name or Coordinates of Location	
Grave Number	Row Number	Plot Number	Type of Marker	

Last Name: Unknown X - 124
 First: Frame
 Initial: Frame
 Rank: Frame
 Serial No.: Frame
 Unit: Frame
 Organization: KIA
 Place of Death: 1530 2 August 1944
 Cause of Death: Biosville, France
 Time and Date of Burial: 154 8
 Name of Cemetery: X
 Name or Coordinates of Location: Temporary
 Grave Number: 154
 Row Number: 8
 Plot Number: X
 Type of Marker: Temporary

Disposition of Identification Tags: Buried with body Yes No Attached to Marker Yes No

If No Identification Tags
How were remains identified?

Frame work of body only. Impossible to take finger-
prints or tooth chart.

What means of identification were buried with the body?

G.R. Form No. 1

To determine Right or Left use Deceased's Right and Left.

Who is buried on:

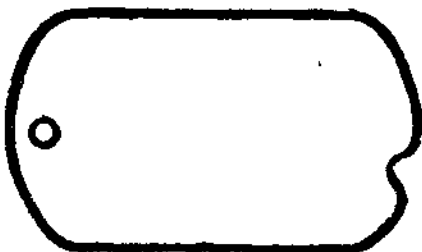
Deceased's Right: Unknown X - 125 155

Name	Serial No.	Rank	Organization	Grave No.
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Deceased's Left: Davis, J.W. 32167412 253

Name	Serial No.	Rank	Organization	Grave No.
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Signature or Name, Rank and if possible Organization of person furnishing above Data when other than officer reporting burial.



If print of identification tag is not affixed fill in below:

Emergency Addressee _____
Name

_____ Address

Religion _____

List only Personal Effects Found on Body and disposition of same:

NONE

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Signature of Officer or other person reporting burial

HASKELL B. PUGH

Verified by G.R.S. Officer

2nd Lt., QMC