

~~Unknown 71097 should be consolidated w/ 13.~~

TD

Destroy Case folder

293 unk. 71097 France (St Juan)

QJICOD 293, UNKN x-43 France (St. Juan)

QJICOD 352.3
Kansas City

26 July 1949

SUBJECT: Report on Certain Unknowns

TO: Commanding Officer
Quartermaster Activities
Kansas City Records Center (AGO)
Kansas City, Missouri
ATTENTION: Effects Quartermaster

1. Reference your inquiry concerning present status of the following named Unknowns, you are advised that these Unknowns have been declared unidentifiable:

X-45	St. Juan, France
X-55	Belgrade, Yugoslavia
X-117	Hamm, Luxembourg, Germany
X-99	HenriChapelle, Belgium
X-557	Margraten, Holland
X-1028	" " "
X-53	Marzanello Nuovo, Italy
X-113	" " " "

2. Correspondence from the Bureau regarding these Unknowns is returned herewith.

BY COMMAND OF MAJOR GENERAL MIDDLESTADT:

1 Incl:
Correspondence

WILLIAM P. CONLON
Major, QMC
Field Service Division

DEPARTMENT OF THE ARMY
KANSAS CITY QUARTERMASTER DEPOT
ARMY EFFECTS BUREAU
601 HARDESTY AVENUE
KANSAS CITY 1, MISSOURI

IN REPLY REFER TO QMDKG 50221

HCC/ELW/slw
21 June 1949
DATE

SUBJECT: Disposal of Personal Effects

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

1. Personal effects found on remains interred as Unknown #43

Plot A, Row 10, Grave 113, USMC St. Juan, France.

_____ have been held at this Bureau as of 6 December 1944.

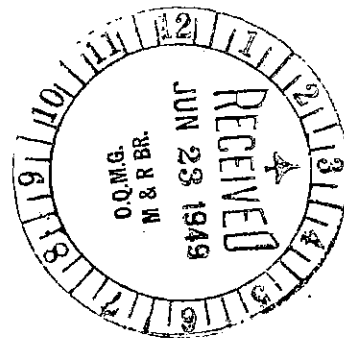
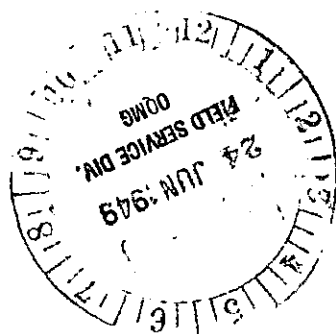
2. Bureau inspection of the effects has been made and the following description furnished for reference:

1 souvenir ring, w/initials A or H over N
1 souvenir bracelet, Naples, 1945

3. It is requested that this Bureau be informed whether or not the above listed Unknown decedent has been officially identified.

FOR THE COMMANDING OFFICER:

H. O. CALDWELL
Effects Quartermaster



293
L...
X-43
...

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

21 October 1948

Date

CMD
Op 3rd Air Force X43 (St Juan)

SUBJECT: Unidentifiable Remains

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

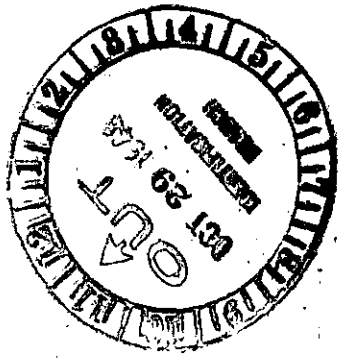
1. The records pertaining to Unknown X- 43, Plot A,
Row 10, Grave 113, USMC St. Juan, France have been
reviewed and it is the opinion of this office that insufficient evidence
is available to establish the identity of this deceased, and that these
remains should be classified as unidentifiable.

2. Report of Reprocessing was forwarded to your office by
letter of transmittal No. 2533, dated 3/11/47. No
further information is available.

FOR THE COMMANDING GENERAL:

/s/ George L. Freeman
/t/ GEORGE L. FREEMAN
1st Lt Q.C
Actg Asst Adj Gen

*File
28 Oct 48
2 AM
11/25*



QMGOD 293 Unknown X-43
(St. Juan)

France

1st Ind

Department of the Army, OQMG, Washington 25, D. C., 17 May 1948

TO: Commanding Officer, Kansas City Quartermaster Depot, 601 Hardesty Ave.,
Kansas City 1, Missouri. ATTENTION: Effects Quartermaster

Unknown X-43, St. Juan, France, has not been identified.

BY COMMAND OF MAJOR GENERAL LARKIN:

SMG

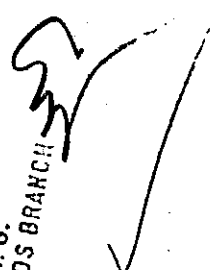
ELR

WM. T. BROWN
Lt. Colonel, OMC
Field Service Division

EMK
ELR

MAY 17 4 45 PM '48

D. Q. M. G.
FIL & RECORDS BRANCH



DEPARTMENT OF THE ARMY
KANSAS CITY QUARTERMASTER DEPOT
ARMY EFFECTS BUREAU
601 HARDESTY AVENUE
KANSAS CITY 1, MISSOURI

IN REPLY REFER TO QMDKG 50221

HCC/ELR/mjo'o

13 May 1948

DATE

SUBJECT: Disposal of Personal Effects

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

1. Personal effects found on remains interred as Unknown X-43

Plot A, Row 10, Grave 113, USMC St. Juan, France

_____ have been held at this Bureau as of _____

2. Bureau inspection of the effects has been made and the following description furnished for reference:

1 Souvenir ring, w/initials A or M over N
1 Souvenir bracelet, Naples, 1945

3. It is requested that this Bureau be informed whether or not the above listed Unknown decedent has been officially identified.

FOR THE COMMANDING OFFICER:

H. O. CALDWELL
Effects Quartermaster



101
293
Wm Brown
X43
France
(St Juan)

USMC EPINAL, FRANCE

BURIED ON DECEASED LEFT:

PLOT **B** ROW 36 GRAVE 3-7

DISINTERMENT DIRECTIVE

DATE REBURIED: 11 Sept 48

RIGHT:

SECTION A
NAME AND BURIAL LOCATION OF DECEASED
RAYMOND W ASHLEY
WOJG AUS

DIRECTIVE NUMBER

3580 00000

DATE

15 11 47
DAY MONTH YEAR

NAME

SERIAL NUMBER

RANK

ARM

DATE OF DEATH

UNKNOWN X-000043

0

DAY MONTH YEAR

CEMETERY

DISPOSITION OF REMAINS

ST JUAN BESANCON

0

3502 80
CODE DIST. PT.

PLOT ROW GRAVE COUNTRY

A 10 113 FRANCE

CAUSE OF DEATH

6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

EPINAL, FRANCE

NAME AND ADDRESS OF NEXT OF KIN

(BY ADMINISTRATIVE ORDER)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISTINTERRED

UNKNOWN X-000043

Est 12 Sept 1944

20 Jan 1948

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

REMAINS

UNKNOWN

UNK

s/ O.R. STEFFER, CAPT QMC.

MARKER GRS

544 QM SV CO. NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

UNIFORM.

CONDITION OF REMAINS

BODY COMPLETE IN SKELETON FORM. MANDIBLE MISSING.

OTHER MEANS OF IDENTIFICATION

NONE

MINOR DISCREPANCIES

NONE

REMAINS PREPARED AND PLACED IN CASKET

DATE 10 Mar 1948

BY

KARL K KASCA

CASKET SEALED BY

KARL K KASCA

EMBALMER (Signature)

s/ KARL K KASCA

CASKET BOXED AND MARKED

DATE 10 Mar 48

BY

KARL K KASKA

SHIPPING ADDRESS VERIFIED BY

KARL K KASKA

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

The typed names are the same as the original signatures on the 4th copy.

JAMES B JOHNS, 1ST LT INF.

DET A, III ZONE, AGRC

SIGNATURE OF GRS INSPECTOR (Grade & Org'n)

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

FILE

RECORDS ANNOTATED

OCT 19 1948

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

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

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 (BY ADMINISTRATION ORDER)		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

15

*Out to G...
lto. 11-21-47*

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

IN REPLY REFER TO QMGMR 293

Unknown X-43
(St. Juan) France

21 January 1947

SUBJECT: Return of Personal Effects

TO : Effects Quartermaster, Army Effects Bureau, Kansas City
Quartermaster Depot, 601 Hardesty Avenue, Kansas City 1,
Missouri

1. Returned herewith souvenir bracelet, souvenir ring, Good Conduct Ribbon, and ETO Ribbon w/three (3) battle stars, personal effects of Unknown X-43, Plot A, Row 10, Grave 113, St. Juan, France.

2. Examination of these effects has been completed. However, an identification cannot be established at this time.

3. Upon completion of investigation of these remains, your office will be advised so that proper disposition may be made to the next of kin.

4. Request acknowledgement of receipt by indorsement hereon.

FOR THE QUARTERMASTER GENERAL:

George Freeman
JAMES G. MacFARLAND
Major, QMC
Assistant

3 Incls.

- 1 - Souvenir ring
- 2 - Souvenir bracelet
- 3 - Good Conduct Ribbon and ETO Ribbon w/3 battle stars

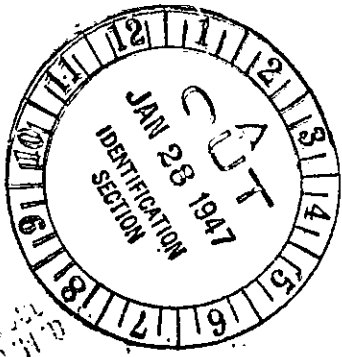
Quartermaster Depot, 601 Hardesty Avenue, Kansas City 1, Missouri

Receipt acknowledged - JAN 24 1947

P. U. Maxey
P. U. MAXEY
Lt. Col., QMC
Effects Quartermaster

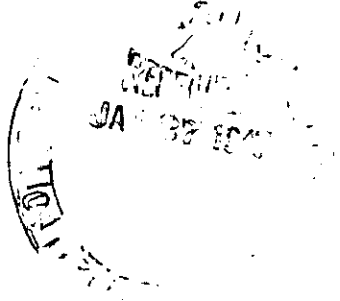
*7 Feb 47
24 Jan 47
90707
JAN*

293 Unknown X-43 & Freeman (Freeman)



JAN 21 11 45 AM '47

O R N G
RECORDS DIV



JAN 28 1947
11 45 AM '47

135

QMGMR 293
Unknown X-43
(St. Juan) France

21 January 1947

SUBJECT: Return of Personal Effects

TO : Effects Quartermaster, Army Effects Bureau, Kansas City
Quartermaster Depot, 601 Hardesty Avenue, Kansas City 1,
Missouri

1. Returned herewith souvenir bracelet, souvenir ring, Good
Conduct Ribbon, and ETO Ribbon w/three (3) battle stars, personal
effects of Unknown X-43, Plot A, Row 10, Grave 113, St. Juan, France.

2. Examination of these effects has been completed. However,
an identification cannot be established at this time.

3. Upon completion of investigation of these remains, your
office will be advised so that proper disposition may be made to the
next of kin.

4. Request acknowledgement of receipt by indorsement hereon.

FOR THE QUARTERMASTER GENERAL:

JAMES C. MacFARLAND
Major, QMC
Assistant

3 Incls.
Souvenir ring
Souvenir bracelet
Good Conduct Ribbon and
ETO Ribbon w/3 battle stars

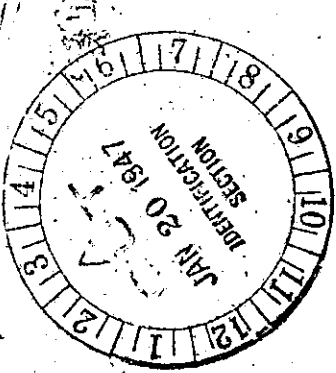
JAN 21 11 45 AM '47

000000

REGISTERED
1348655

JAN 21 8 36 AM '47
MEMORIAL DIVISION
RECORDS BRANCH

wfl
17



2288481

MOBILE AIRPORT

TPR MA 28 8 15 WIL

U.S. AIR FORCE
RECORDS SECTION

ST. 11

DUPLICATE

Invoice of Contents from
FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D. C.

Date 1/13/47

Case References Unknown Deceased

Consigned to: War Department

War Department

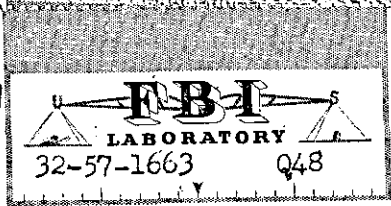
Washington, D. C.

Office of the Quartermaster General

Washington 25, D. C.

Attention: Major James C. MacFarland

are contained in this package. A detailed description of the
Laboratory Report # PC-18816 CW



~~Q49, Q47~~ and Q50 returned.

SPECIAL DELIVERY

*Evidence returned
1-16-1947
I.L.*

*File
8 June 50
T.D.*

REPORT
of the



FEDERAL BUREAU OF INVESTIGATION
WASHINGTON D. C.

January 13, 1947

To: War Department
Office of the Quartermaster General
Washington 25, D. C. Attention: Major James C. MacFarland

Following is the report of the FBI Laboratory giving the results of examinations conducted on evidence received from your office.

J. Edgar Hoover
John Edgar Hoover, Director

278 2246
X-43
7
1

Re: Unknown Deceased
War Department
Washington, D. C.

YOUR FILE NO.
FBI FILE NO.
LAB. NO.

QMGMR 293 Unknown X-43
(St. Juan) France
32-57-1663
PC-18816 CW

Examination requested by:

Addressee

Reference:

Letter 12/16/46

Examination requested:

Microscopic

Specimens:

- Q48, Souvenir ring. (Incl. #1)
- Q49, Souvenir bracelet. (Incl. #2)
- Q50, Good conduct ribbon and ETO Ribbon with 3 stars. (Incl. #3)

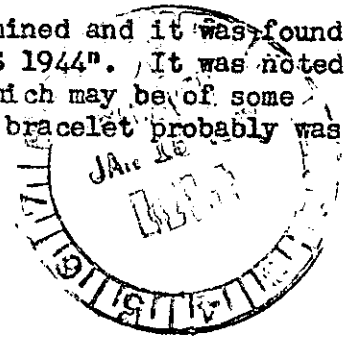
RESULTS OF EXAMINATIONS:

The three pieces of evidence which you submitted were examined for markings as well as in an effort to determine their origin.

The inexpensive appearing ring, specimen Q48, is a souvenir or a signet ring with the letter "M" inscribed in the center of a larger letter "N". The origin of this ring is unknown.

The souvenir bracelet, specimen Q49, was examined and it was found to contain only a stamped design under which was "NAPLES 1944". It was noted that the letter "N" had its diagonal made incorrectly which may be of some assistance in tracing its origin. It appears that this bracelet probably was purchased in Italy.

(Cont'd next page)



The origin of the ribbons, specimen Q50, could not be determined.

The evidence is being returned to your office under separate cover by special messenger.

cc- Director of Intelligence
War Department General Staff
The Pentagon
Washington 25, D. C.
Attention: Reading Panel Branch

ffl

76

REPORT
of the



FEDERAL BUREAU OF INVESTIGATION
WASHINGTON D. C.

January 13, 1947

293 unk. France X-43 (St. Juan)

War Department
Office of the Quartermaster General
Washington 25, D. C. Attention: Major James C. MacFarland

Following is the report of the FBI Laboratory giving the results of examinations conducted on evidence received from your office.

J. Edgar Hoover
John Edgar Hoover, Director

Re: Unknown Deceased
War Department
Washington, D. C.

QMGMR 293 Unknown X-43
YOUR FILE NO. (St. Juan) France
FBI FILE NO. 32-57-1663
LAB. NO. PC-18816 CW

Examination requested by: Addressee

Reference: Letter 12/16/46

Examination requested: Microscopic

Specimens: Q48, Souvenir ring. (Incl. #1)
Q49, Souvenir bracelet. (Incl. #2)
Q50, Good conduct ribbon and ETO Ribbon with 3 stars. (Incl. #3)

RESULTS OF EXAMINATIONS:

The three pieces of evidence which you submitted were examined for markings as well as in an effort to determine their origin.

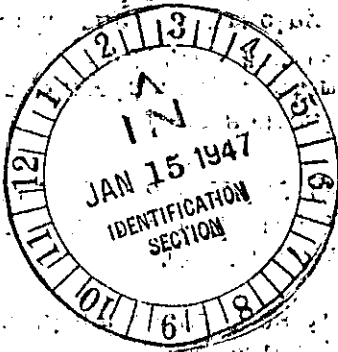
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The souvenir bracelet, specimen Q49, was examined and it was found to contain only a stamped design under which was "NAPLES 1944". It was noted that the letter "N" had its diagonal made incorrectly which may be of some assistance in tracing its origin. It appears that this bracelet probably was purchased in Italy.

(Cont'd next page)

293 unk. France X-43

SEARCHED
SERIALIZED
INDEXED
FILED
JAN 15 1947
FBI - WASH DC



RECEIVED
GENERAL DIVISION
JAN 15 1 25 PM '47

TO: SAC, NEW YORK (100-100000)

FROM: SAC, NEW YORK (100-100000)

SUBJECT: [Illegible]

RE: [Illegible]

100-100000-1000

100-100000-1000

RE: [Illegible]

RE: [Illegible]

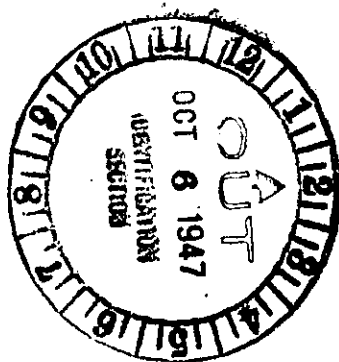
100-100000-1000

The origin of the ribbons, specimen Q50, could not be determined.

The evidence is being returned to your office under separate cover by special messenger.

cc- Director of Intelligence
War Department General Staff
The Pentagon
Washington 25, D. C.
Attention: Reading Panel Branch





QMCER 293
Unknown X-43
(St. Juan) France

16 December 1946

SUBJECT: Examination of Personal Effects.

TO : Federal Bureau of Investigation
Department of Justice
Washington, D. C.

ATTENTION: Mr. J. Edgar Hoover

1. The inclosed personal effects are forwarded for the purpose of examination of markings and identification or origin of same.
2. It is requested that upon completion of your examination, these effects be returned to this office with a report of your findings.

FOR THE QUARTERMASTER GENERAL:

aem

ack
(16)

3 Incls:

- Incl. #1 Souvenir Ring
- Incl. #2 Souvenir Bracelet
- Incl. #3 Good Conduct Ribbon
and ETO Ribbon w/ 3 stars.

JAMES C. MacFARLAND
Major, QMC
Assistant

[Handwritten initials]
WJS

DEC 16 10 17 AM '46
O.D.M.C. RECORDS

[Vertical stamp: RECEIVED]
[Vertical stamp: DEC 16 1946]
[Vertical stamp: QMCER 293]

QUICER 293
Unknown X-43
(St. Juan) France

16 December 1946

SUBJECT: Examination of Personal Effects.

TO : Federal Bureau of Investigation
Department of Justice
Washington, D. C.

ATTENTION: Mr. J. Edgar Hoover

1. The inclosed personal effects are forwarded for the purpose of examination of markings and identification or origin of same.
2. It is requested that upon completion of your examination, these effects be returned to this office with a report of your findings.

FOR THE QUARTERMASTER GENERAL:

3 Incls:
Incl.#1 Souvenir Ring
Incl.#2 Souvenir Bracelet
Incl.#3 Good Conduct Ribbon
and ETO Ribbon w/3 stars.

JAMES C. MacFARLAND
Major, QMC
Assistant

Received from Identification Section, to be forwarded to Federal Bureau of Investigation, Department of Justice, Washington, D. C.,
1 Souvenir Ring, 1 Souvenir Bracelet, 1 Good Conduct Ribbon & ETO Ribbon
W/3 Stars.

MAIL AND RECORDS BRANCH.

QMDKG 50221 (27 Nov 46)

1st Ind

CLR/ELR/bj

ARMY EFFECTS BUREAU, Kansas City Quartermaster Depot, 601 Hardesty Avenue,
Kansas City 1, Missouri, 6 December 1946

TO: The Quartermaster General, Effects Section, Depot Operations Branch,
Field Service Division, Washington 25, D. C.

1. The one souvenir bracelet and one ring found on remains of Unknown
decedent X-43, Plot A, Row 10, Grave 113, St. Juan, France, have been for-
warded to your office this date by registered mail.

2. The following description of these items is furnished for your ref-
erence:

1 ea. bracelet; silver metal name plate with
metal link chain. "NAPLES 1944" engraved
on name plate.

1 ea. ring; white metal signet ring with fol-
lowing initials: W on top of A or M over
N (initials are illegible). Ring has been
cut.

3. Upon completion of investigation by your office, it is requested
that the bracelet and ring be returned to this Bureau.

FOR THE COMMANDING OFFICER:

C. L. RUMFIELD
1st Lt, QMC
Asst Effects Quartermaster

293
V. Brown, Jr. - 43. France (St Juan)

File
11 Dec 46
GP 907
J. L. Smith
NAT - Effects Sec
FBI - [unclear]

REGISTRATION AND
RECORDS BRANCH
DEC 9 3 49 PM '46
MEMORIAL DIVISION



WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON 25, D. C.

IN REPLY REFER TO

QMGR 293

Unk.X-43

(St.Juan)France.

27 November 1946

SUBJECT: Identification of Unknown Deceased

TO : Effects Quartermaster, Army Effects Bureau
Kansas City Quartermaster Depot
601 Hardesty Avenue
Kansas City 1, Missouri

Request the souvenir bracelet and the souvenir ring, which are part of the Personal Effects of X-43, Plot A, Row 10, Grave 113, St. Juan, France, be forwarded to this office as an aid in establishing the identity of Unknown deceased.

FOR THE QUARTERMASTER GENERAL:

James C. MacFarland 1st Lt QMC
JAMES C. MacFARLAND
Major, QMC
Assistant

RECEIVED
NOV 28 1946
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

U.S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION
KANSAS CITY, MO.
DEC-27-1945

NOV 27 3 26 PM '45
MAIL & RECORDS BRANCH

TO: SAC, KANSAS CITY
FROM: SAC, ST. LOUIS
SUBJECT: [Illegible]

RE: [Illegible]

DATE: [Illegible]

[Illegible]

QMGR 293
Unk.X-43
(St.Juan)France

ml

27 November 1946

SUBJECT: Identification of Unknown Deceased

TO : Effects Quartermaster, Army Effects Bureau
Kansas City Quartermaster Depot
601 Hardesty Avenue
Kansas City 1, Missouri

Request the souvenir bracelet and the souvenir ring, which are part of the Personal Effects of X-43, Plot A, Row 10, Grave 113, St. Juan, France, be forwarded to this office as an aid in establishing the identity of Unknown deceased.

FOR THE QUARTERMASTER GENERAL:

aem

ced
(26)

JAMES C. MacFARLAND
Major, QMC
Assistant

NJS

NOV 27 3 25 PM '46
D. O. M. G.
& RECORDS BRANCH

RECORDS SECTION AND
RECORDS BRANCH
NOV 27 2 33 PM '46
MEMORIAL SECTION

X 332.3 Kansas City

FILE UNDER NO. 293 - Unk. X-43, (St. Juan) *France*

I N D E X S H E E T

1st. Ind.

SYNOPSIS 11/15/46

FROM: OQMG.
TO: CO., KANSAS CITY QM DEPOT, MISSOURI.
ATT: EFFECTS QM.

Reference paragraph 2 of basic communication, the following is submitted:

X-43; (St. Juan) case under investigation.

DOCUMENT FILED UNDER NO. 333.3 - Kansas City (Personal effects)

ead.

SPQYG 293
Unknown 71097
France (St. Juan)

293 unk France (St. Juan) X-43 1 February 1946

SUBJECT: Fingerprints of Unknown Deceased

TO : Commanding General, American Graves Registration Service
European Theater Area, Versailles, France
APO 757, c/o Postmaster
New York, New York

1. The fingerprints submitted for Unknown X-43, US Military Cemetery, St. Juan, Plot A, Row 10, Grave 113, have been compared, insofar as possible, but were not identified. They were also compared with those of personnel missing in action from 1 September 1944 through 17 September 1944, without result.

2. Should additional information become available to your headquarters, which may be of assistance in the identification of subject Unknown, it should be forwarded to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

ARTHUR S. ROSENGARD
2nd Lt., GMC
Assistant

aem

600

FEB 1 9 50 AM '46

U. S. ARMY
MAIL & RECORDS BRANCH

[Handwritten signature]

GRAVES REGISTRATION SECTION
MEMORIAL DIVISION
JAN 31 5 14 PM '46

*Swartz
5-13*

*File
4-2-46*



S. K. and D.



ARMY SERVICE FORCES

IN REPLY REFER TO SPQYG 293

OFFICE OF THE QUARTERMASTER GENERAL

Unknown 71097, France

WASHINGTON 25, D. C.

27 June 1945

SUBJECT: Fingerprints of Unknown Deceased

TO : The Federal Bureau of Investigation, Department of Justice,
 Washington, D. C.
 ATTENTION: Mr. J. Edgar Hoover.

THRU : Status Review & Determination, Casualty Branch,
 4602 Munitions Building, Washington, D. C.

1. The inclosed Burial Report is forwarded to your office with a request that comparison be made of the fingerprints thereon with those on file, with view to the identification of an Unknown Deceased.

2. If found to be identical, it is requested that the name, rank, serial number, emergency addressee and religious preference, of the deceased, be forwarded, together with return of the form.

FOR THE QUARTERMASTER GENERAL:

✓

1 Incl
Burial Form

C. C. PIERCE
 C. C. PIERCE
 Captain, QMC
 Assistant

AGFC-S 704 (27 Jun 45) 1st Ind.
WD, AGO, Washington 25, D. C., 23 August 1945.

TJH/JHA/frl/4602

TO: The Quartermaster General, Washington 25, D. C., Attention: Chief, Registration and Planning Branch, Room 1100, Temporary Building C.

Fingerprints on attached Report of Burial No. 71097 have been searched in the Federal Bureau of Investigation and could not be found. They have also been compared with those of men missing in action since the dates of 1 September 1944 through 17 September 1944 and were not identical with any.

FOR THE ADJUTANT GENERAL:

RECEIVED
1945 JUN 28 10 31 AM '45
 OFFICE OF THE ADJUTANT GENERAL

John T. Burns
 JOHN T. BURNS
 Lt Col, AGD,
 Officer in Charge,
 Status Review and
 Determination Section.
John T. Burns

1 Incl. n/c

2393 Unknown 71097

File
23 June 1945

11-2-45

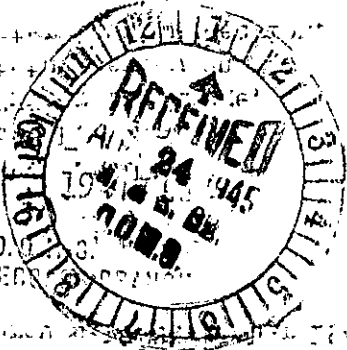
GRAVES REGISTRATION SECTION

AUG 25 3 08 PM '45

4 08 PM '45

MEMORIAL DIVISION

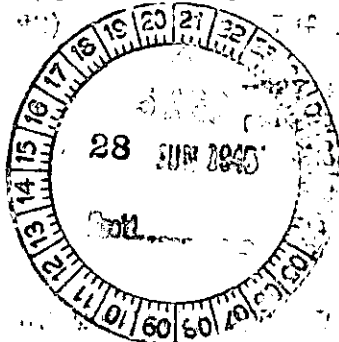
MEMORIAL DIVISION



THE FOLLOWING INFORMATION WAS RECEIVED FROM THE GRAVES REGISTRATION SECTION ON AUGUST 25, 1945:

NAME: [Illegible] GRAVE NO: [Illegible] SECTION: [Illegible]

ADDRESS: [Illegible]



REPORT MADE BY: [Illegible]

A

REMARKS: [Illegible]

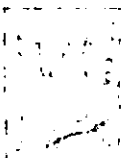
ADDITIONAL INFORMATION: [Illegible]

APPROVED BY: [Illegible]

DATE: [Illegible]

LA 5-2-50 2

UNITED STATES DEPARTMENT OF THE INTERIOR



SPQY 295
Unknown 71997, / France

27 June 1946

295 Unknown (St. Jean) 7-48

SUBJECT: Fingerprints of Unknown Deceased

TO : The Federal Bureau of Investigation, Department of Justice,
Washington, D. C.
ATTENTION: Mr. J. Edgar Hoover.

THRU : Status Review & Determination, Casualty Branch,
4602 Munitions Building, Washington, D. C.

1. The inclosed Burial Report is forwarded to your office with a request that comparison be made of the fingerprints thereon with those on file, with view to the identification of an Unknown Deceased.

2. If found to be identical, it is requested that the name, rank, serial number, emergency addressee and religious preference, of the deceased, be forwarded, together with return of the form.

FOR THE QUARTERMASTER GENERAL:

see
20

1 Incl
Burial Form

C. C. PIERCE
Captain, QMC
Assistant

3

JUN 23 3 15 PM '46
D. O. M. G.
MAIL & RECORDS BRANCH

JUN 2 3 15 PM '46
RECORDS DIVISION

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

21 OCT 1948

Date

SUBJECT : Unidentifiable Remains

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

1. The records pertaining to Unknown A- 43, Flot A,
Row 10, Grave 113, USMC St. Juan, 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. 2533, dated 3/11/47. No
further information is available.

FOR THE COMMANDING GENERAL :

George L. Freeman
GEORGE L. FREEMAN
1st Lt Q.C.
Actg Asst Adj Gen

Received **FILE 29 OCT 1948**
Not identifiable from
information presently
available **OQMG**

Incl # 26

IDENTIFICATION CHECK LIST

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

Unknown ⁻⁴³ _____
 St. Juan (France) _____
 Cemetery _____
 Plot ^A _____ Row ¹⁰ _____ Grave ¹¹³ _____

Date reprocessed:

1. ~~Reprocessed at cemetery~~ **22 October 1947**

 (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 **Mobile Team, AGRC. EA.**

 (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)

Item	Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear _____	(Type) None		
Raincoat _____	None		
Overcoat _____	None		
Jacket, Field _____	None		
Jacket, Combat _____	None		
Mackinaw _____	None		
Sweater _____	None		
Jacket, HBT _____	None		
* Shirt, Wool OD _____	Remnants of		
Undershirt, Wool _____	None		
Undershirt, Cotton _____	None		
Trousers, HBT _____	None		
* Trousers, Wool OD _____	Remnants of		

Belt, web Remnants of - size 40

Drawers, wool None

Drawers, cotton None

Leggings, wool None

Socks, ~~cotton~~ wool One (1) pair - Remnants of

* Shoes One (1) pair (type) Combat boot size 9 1/2

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? A.G.F.

R. Humerus 32.2 R. Femur 42.6 R. Radius 23.8 R. Tibia 35.2
R. Ulna 26.1 R. Fibula 35.6

6. Description of Remains :

Age UTD Height Estimated 5'3 3/4" Weight UTD Description of wounds UTD

Bandages or dressings UTD 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 Auburn 2 1/2" long, straight
(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 **UTD**
(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**
(Nose, arms, legs, etc.)

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

See attached anatomical chart.

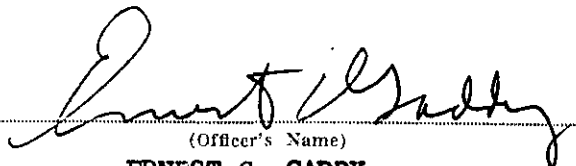
7. Have finger prints been placed on Report of Interment? No
(Yes-no)

If not, explain Fingers too decomposed

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

9. Remarks Remains received with small amount of decomposed flesh.
Estimated weight of remains processed: 20 Lbs.
Few remnants of clothing removed from remains. No markings evident.
Fluoroscopic Examination not necessary.
Burial report containing fingerprints found and reburied with remains.
Nothing found to warrant Chemical Laboratory Examination.
Case remains: UNKNOWN.

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.


(Officer's Name)
ERNEST C. GADDY

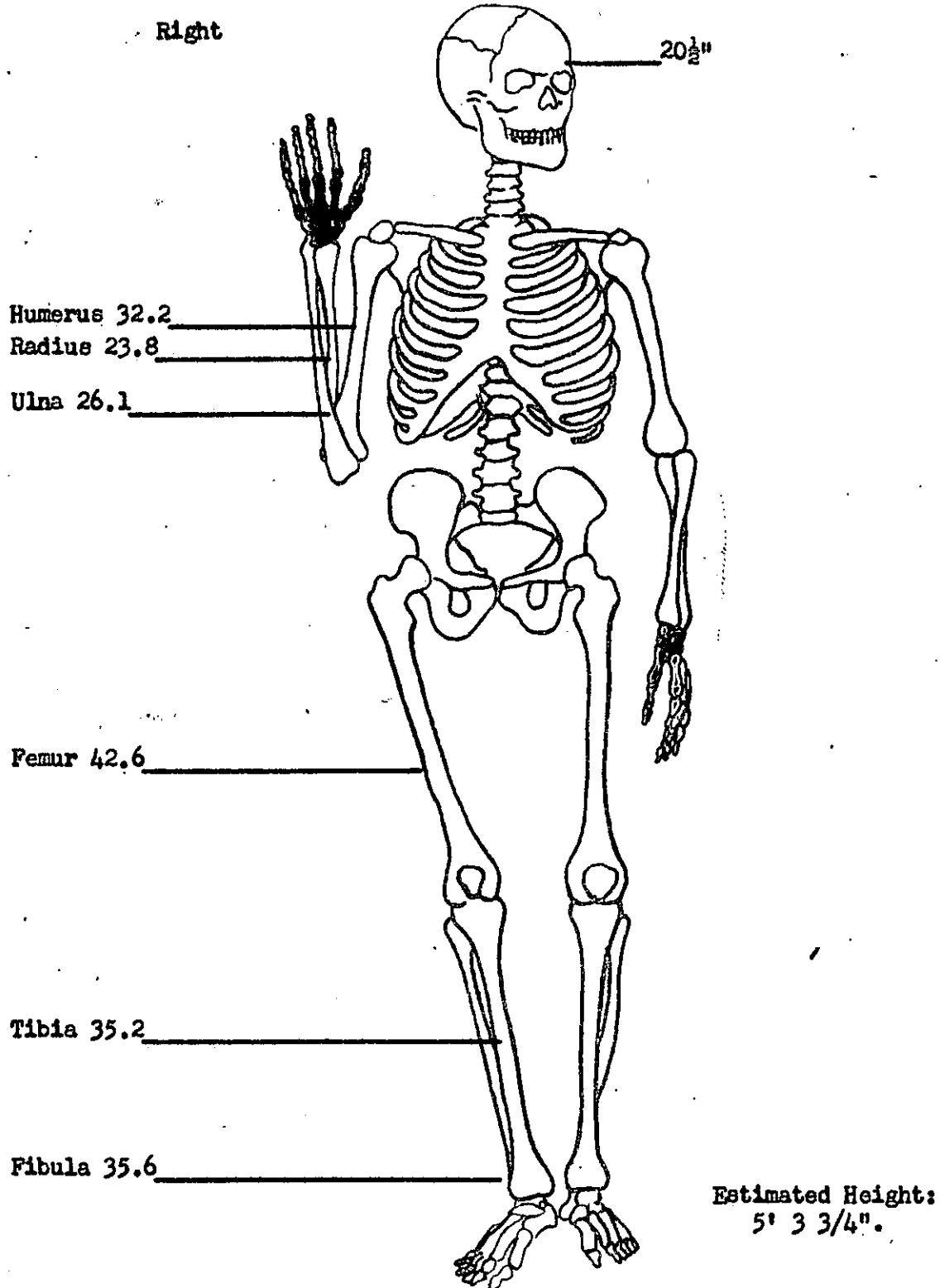
C.W.O. U.S.A.
Rank Service

CENTRAL IDENTIFICATION POINT.
(Organization)

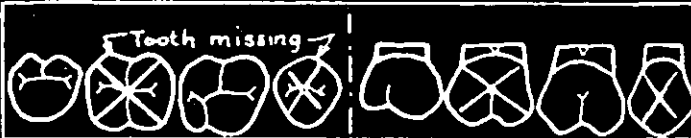
Unknown X-43
St. Juan (France)
Plot: A, Row: 10 Grave: 113

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



MISSING TEETH . . . All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd 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

L 13 Extracted before death.

Teeth average size, white.

M

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50 221 D

Letter
24 Jan 45
Effects Burial

REPORT OF BURIAL
AR 30-1815 & TM 10-630

20 September 1944
Date Report Filled Out

Unknown American X-43 (P098859)	Unknown	White
(Last Name)	(Serial No.)	(Race)
Unknown	Unknown	Army
(Rank)	(Organization)	(Branch)
Vic Abbenaus, France	Est. 12 Sep 1944	MFW - Back
(Place of Death)	(Date of Death)	(Cause of Death)
(P098859)		Unknown
		(Religion: E, C, H, etc.)

MEANS OF IDENTIFICATION

Identification Tags found on body: Yes () ; No (O).
If no identification tags, other means used to identify body (identification card, letters, etc.): None

Complete fingerprint chart of both hands on reverse side if body cannot be identified. See reverse.
Complete tooth-chart on reverse side and list anatomical characteristics and other data if fingerprints cannot be taken.

If unidentified, give circumstances: Over
List of Personal Effects found on Body and disposition of Same: Souv. bracelet, souv. ring, 1 EAME ribbon,
1 Good Conduct Ribbon to Effects QM, Kansas City, Mo.
Unknown (Name of Emergency Addressee) Unknown (Address of Emergency Addressee)

E. A. Zimmerman, 1st Lt., 157th Inf. Regt.
(Signature (or Name) of Person furnishing above data when other than the Officer reporting burial.)

Shroud 11h5 hrs. 17 Sep 1944 U.S. Mil. Cem., St. Juan, France (P038622)
(Time and Date of Burial) (Location, Name, & No. of Cemetery)

IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCE REVERSE SIDE THIS FORM

A	10	113	Temp wooden	General Service
(Plot No.)	(Row No.)	(Grave No.)	(King Grave Markers)	(Type of Religious Ceremony)

Identification Tag buried with body (O); Identification Tag attached to marker (O).
If Identification Tags not present, with other identification data were buried with the body and in what kind of container? Copy QMC Form 1 - GRS in sealed container buried with body and one 1 ft. below marker.

Bodies buried on either side (See paragraph 4 on reverse side this form.)

Right side:	Evans, George (NMI) Pvt., 32995076,	Co C, 180th Inf.,	112
	(Name) (Rank) (ASN)	(Organization)	(Grave No.)

Left side:	Anderson, Jacob (NMI), Unk., 37272161	157th. Inf.	114
	(Name) (Rank) (ASN)	(Organization)	(Grave No.)

(Signature of Officer Reporting Burial) *Joseph Reek*
(Verified by unit G.R.S. Officer)
JOSEPH REEK, 2d Lt., QMC, 3d Plat., 46th QM GR Co.

INSTRUCTIONS FOR FILLING OUT BURIAL REPORT: Make out QMC Form 1 - GRS in quadruplicate for U.S. dead, one additional copy for allied and enemy dead. Sign all copies. Submit report to nearest member of Graves Registration Service. Graves Registration Service will forward the original and two copies through at least one higher administrative headquarters (to be checked against Casualty Reports and allied papers and all copies verified by the Graves Registration Officer of that headquarters) to Base Section Graves Registration Service Officer. OVER FOR BURIAL INSTRUCTIONS.

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Little
24 Jan 45
Effects Bureau

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~~CONFIDENTIAL~~

50 221 D

REPORT OF BURIAL
AR 30-1815 & TM 10-630

20 September 1944
Date Report Filled Out

Unknown American X-43 (P098859)	Unknown	White
(Last Name)	(Serial No.)	(Race)
Unknown	Army	U.S.A.
(Rank)	(Branch)	(Country)
Vic Abbenaus, France	Est. 12 Sep 1944	MFW - Back
(Place of Death)	(Date of Death)	(Cause of Death)
(P098859)		Unknown
		(Religion: E, C, H, etc.)

MEANS OF IDENTIFICATION

Identification Tags found on body: Yes () ; No (O).
If no identification tags, other means used to identify body (identification card, letters, etc.) : None

Complete fingerprint chart of both hands on reverse side if body cannot be identified. See reverse
Complete tooth-chart on reverse side and list anatomical characteristics and other data if fingerprints cannot be taken.

If unidentified, give circumstances : Over
List of Personal Effects found on Body and disposition of Same: Souv. bracelet, souv. ring, 1 EAME ribbon,
1 Good Conduct Ribbon to Effects QM, Kansas City, Mo.
Unknown (Name of Emergency Addressee) Unknown (Address of Emergency Addressee)

E. A. Zimmerman, 1st Lt., 157th Inf. Regt.
(Signature (or Name) of Person furnishing above data when other than the Officer reporting burial.)

Shroud 1445 hrs. 17 Sep 1944 U.S. Mil. Cem., St. Juan, France (P038622)
(Time and Date of Burial) (Location, Name, & No. of Cemetery)

IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCE REVERSE SIDE THIS FORM

A	10	113	Temp. wooden	General Service
(Plot No.)	(Row No.)	(Grave No.)	(King Grave Markers)	(Type of Religious Ceremony)

Identification Tag buried with body (O); Identification Tag attached to marker (O).
If Identification Tags not present, with other identification data were buried with the body and in what kind of container ? Copy QMC Form 1 - GRS in sealed container buried with body and one 1 ft. below marker.

Bodies buried on either side (See paragraph 4 on reverse side this form.)

Right side:	Evans, George (NMI) Pvt., 32995076,	Co C., 180th Inf.	112
	(Name) (Rank) (ASN)	(Organization)	(Grave No.)
Left side :	Anderson, Jacob (NMI), Unk., 37272161	157th Inf.	114
	(Name) (Rank) (ASN)	(Organization)	(Grave No.)

(Signature of Officer Reporting Burial)

Joseph Rreek
(Verified by unit G.R.S. Officer)
JOSEPH RREEK, 2d Lt., QMC, 3d Plat., 46th QM GR Co.

INSTRUCTIONS FOR FILLING OUT BURIAL REPORT: Make out QMC Form 1 - GRS in quadruplicate for U.S. dead, one additional copy for allied and enemy dead. Sign all copies. Submit report to nearest member of Graves Registration Service. Graves Registration Service will forward the original and two copies through at least one higher administrative headquarters (to be checked against Casualty Reports and allied papers and all copies verified by the Graves Registration Officer of that headquarters) to Base Section Graves Registration Service Officer. OVER FOR BURIAL INSTRUCTIONS.

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INSTRUCTIONS FOR BURIAL

1. **PREPARATION OF BODY** : Have body examined by member of Medical Department whenever possible (to attach E.M.T. Form 52b.) Remove all personal property, remove one identification tag, leave other on body in protected position (in case enemy dead, leave 1/2 tag on body, forward 1/2 with personal effects). If no tag present, make notation of identifying data on form, protect in sealed bottle, canteen, spent shell or best available container, and bury with remains. If unidentified, take fingerprints of both hands; if this is not possible fill out tooth-chart and note height, weight, color of eyes and hair, tattoo marks, birthmarks, etc., and other data as serial no. of wear, laundry marks, where body found, etc. Wrap body in shelter half, mattress cover, or blanket when available.

2. **BURIAL** : Dig grave to a depth of five feet (hasty battlefield burials, to sufficient depth to prevent elements from exposing the body). Place only one body in a grave. Bury graves side by side, row behind row.

3. **MARKING OF GRAVE** : Fasten identification tag to temporary name peg and place at head of grave. For enemy dead, write data on peg. When pegs are not available, copy data on a piece of paper, place in bottle, spent shell, or other receptacle, seal tightly and place so as to mark and identify grave. If identification tag cannot be fastened to peg or placed in container, do not leave at grave but forward with report of burial. If only one tag is found on body, it should be buried with body. The information thereon should be written on marker or placed in container at head of grave. Do not use weapons or helmets to mark graves.

4. **LOCATION OF GRAVE** : Report burials in established cemeteries by plot, row, and grave number (or show on cemetery map). For all other burials prepare sketch in space provided below; and give location by means of map references, or by reference to prominent permanent landmarks. Information must be specific, accurate, complete. Stand at foot of grave facing head to determine bodies buried to the left and right.

5. **PERSONAL EFFECTS** : List only personal effects taken from body on the Burial Report form. Place these with information as to identity of owner, organization, emergency addressee, in personal effects bag, or wrap in handkerchief, towel, or other available material, and turn over to Grave Registration Service Personnel with report of burial. Government property is not to be included in personal effects but is to be turned in to Salvage Collecting Point.

SKETCH AND MAP REFERENCE:

Dressed in O.D. Pants and Shirt
 36R Field Jacket
 9 1/2 E Shoes
 32-32 Pants
 15-33 Shirt
 Brown Hair
 Approx Ht - 5'8 1/2"
 Approx Wt - 150 lbs
 No markings on clothing
 Vaccination Left Arm 4" below shoulder

Fingerprints taken by: S/Sgt S.
 des Garennes - 46th QM GR Co.

(Prints taken on original forms)

TOOTH-CHART

8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
16	15	14	13	12	11	10	9	8	7	6	5	4	3	2	1

(Right) (Examinee's) (Left)

Indicate : missing natural teeth by X; crowns by O;
 fillings by □ ; bridges by ○ linkings anchor teeth;
 replacements by denture X X X (horizontal line.)

Characteristics: _____
 Other Data: _____

When unidentified, take thumb and fingerprints of both hands.

If this is not possible, fill in tooth chart.

	4
	3
	2
	1
	Thumb
	Left
	Right
	Thumb
	1
	2
	3
	4

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REPORT OF BURIAL
AR 30-1815 & TM 10-630

19 Sept. 1944

Date Report Filled Out

Unknown American X-43 (P098859)	Unknown	Unknown	Unknown
(Last Name)	(First Name)	(Middle Initial)	(Serial No.)
Unknown	Unknown	Unknown	Army
(Rank)	(Organization)	(Branch)	(Country)
Vic Abbenus, France	(Est) 12 Sept. 1944	MFM back	Unknown
(Place of Death)	(Date of Death)	(Cause of Death)	(Religion : P, C, H, etc.)
(P098859)			

MEANS OF IDENTIFICATION

Identification Tags found on body : Yes () ; No (O).

If no identification tags, other means used to identify body (identification card, letters, etc.) : None

Complete fingerprint chart of both hands on reverse side if body cannot be identified. See Reverse

Complete tooth-chart on reverse side and list anatomical characteristics and other data if fingerprints cannot be taken.

If unidentified, give circumstances : Over 1 souv. bracelet, 1 souv. ring, 1 EAME ribbon,

List of Personal Effects found on Body and disposition of Same : 1 Good Conduct ribbon, TO Effects QM, Kansas City, Mo.

Unknown

Unknown

(Name of Emergency Addressee)

(Address of Emergency Addressee)

E. A. ZIMMERMAN, 1st Lt. 157 Inf.

(Signature (or Name) of Person furnishing above data when other than the Officer reporting burial.)

(SPROUD) 1445 hrs. 17 Sept. 1944 US Mil. Cem. St. Juen, France (P038622)

(Time and Date of Burial)

(Location, Name, & No. of Cemetery)

IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCE REVERSE SIDE THIS FORM

<u>A</u>	<u>10</u>	<u>113</u>	<u>Temp. wooden</u>	<u>Gen. Serv.</u>
(Plot No.)	(Row No.)	(Grave No.)	(Kind Grave Markers)	(Type of Religious Ceremony)

Identification Tag buried with body (O) ; Identification Tag attached to marker (O).

If Identification Tags not present, what other identification data were buried with the body and in what kind of container? 1 copy QMC Form 1-GRS in sealed bottle buried with body and one 1 ft below marker.

Bodies buried on either side (See paragraph 4 on reverse side this form.)

Right side :	<u>EVANS, George (NMI) Pvt. 32995076</u>	<u>Co C, 180 Inf.</u>	<u>112</u>
	(Name)	(Rank) (ASN)	(Organization) (Grave No.)

Left side :	<u>ANDERSON, Jacob (NMI) Unk. 37272161</u>	<u>157 Inf.</u>	<u>114</u>
	(Name)	(Rank) (ASN)	(Organization) (Grave No.)

(Signature of Officer Reporting Burial)

(Verified by unit G.R.S. Officer)

JOSEPH REEK, 2d Lt. QMC, 3rd Pltn. 46th QM GP Co.

INSTRUCTIONS FOR FILLING OUT BURIAL REPORT : Make out QMC Form 1 - GRS in quadruplicate for U. S. dead, one additional copy for allied and enemy dead. Sign all copies. Submit report to nearest member of Graves Registration Service. Graves Registration Service will forward the original and two copies through at least one higher administrative headquarters (to be checked against Casualty Reports and allied papers and all copies verified by the Graves Registration Officer of that headquarters) to Base Section Graves Registration Service Officer. OVER FOR BURIAL INSTRUCTIONS.

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REPORT OF BURIAL
AR 30-1815 & TM 10-630

19 Sept. 1944

Date Report Filled Out

Unknown	American X-43	(P098859)	Unknown	W
(Last Name)	(First Name)	(Middle Initial)	(Serial No.)	(Race)
Unknown	Unknown		Army	USA
(Rank)	(Organization)		(Branch)	(Country)
Vic Abbenaus, France	(Est) 12 Sept. 1944	MFW back		Unknown
(Place of Death)	(Date of Death)	(Cause of Death)		(Religion : P, C, H, etc.)
(P098859)				

MEANS OF IDENTIFICATION

Identification Tags found on body : Yes () ; No (O).

If no identification tags, other means used to identify body (identification card, letters, etc.): **None**

Complete fingerprint chart of both hands on reverse side if body cannot be identified. **See Reverse**
Complete tooth-chart on reverse side and list anatomical characteristics and other data if fingerprints cannot be taken.

If unidentified, give circumstances: **Over/ 1 souv. bracelet, 1 souv. ring, 1 EAME ribbon, 1 Good Conduct ribbon.**
List of Personal Effects found on Body and disposition of Same: **TO Effects QM, Kansas City, Mo.**

Unknown	Unknown
(Name of Emergency Addressee)	(Address of Emergency Addressee)

E. A. ZIMMERMAN, 1st Lt. 157 Inf.

(Signature (or Name) of Person furnishing above data when other than the Officer reporting burial.)

(SPROUD) 1445 hrs. 17 Sept. 1944	US Mil. Cem. St. Juan, France (P038622)
(Time and Date of Burial)	(Location, Name, & No. of Cemetery)

IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCE REVERSE SIDE THIS FORM

A	10	113	Temp. wooden	Gen. Serv.
(Plot No.)	(Row No.)	(Grave No.)	(King Grave Markers)	(Type of Religious Ceremony)

Identification Tag buried with body (O) ; Identification Tag attached to marker (O) .

If Identification Tags not present, what other identification data were buried with the body and in what kind of container? **1 copy QMC Form 1-GRS in sealed bottle buried with body and one 1 ft below marker.**

Bodies buried on either side (See paragraph 4 on reverse side this form.)

Right side :	EVANS, George (NMI) Pvt. 32995076	Co C, 180 Inf.	112
	(Name) (Rank) (ASN)	(Organization)	(Grave No.)
Left side :	ANDERSON, Jacob (NMI) Unk. 37272161	157 Inf.	114
	(Name) (Rank) (ASN)	(Organization)	(Grave No.)

(Signature of Officer Reporting Burial)

(Verified by unit G.R.S. Officer)

JOSEPH REEK, 2d Lt. QMC, 3rd Pltn. 46th QM GP. Co.

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REPORT OF BURIAL
AR 30-1815 & TM 10-630

10 Sept. 1944

Date Report Filled Out

Unknown American X-43 (P098859)			Unknown	W
(Last Name)	(First Name)	(Middle Initial)	(Serial No.)	(Race)
Unknown	Unknown		Army	USA
(Rank)	(Organization)		(Branch)	(Country)
Vic Abbeville, France	(Est) 12 Sept. 1944	ATV back		Unknown
(Place of Death)	(Date of Death)	(Cause of Death)		(Religion : P, C, H, etc.)
(POB)				

MEANS OF IDENTIFICATION

Identification Tags found on body : Yes () ; No () .

If no identification tags, other means used to identify body (identification card, letters, etc.) : **None**

Complete fingerprint chart of both hands on reverse side if body cannot be identified. See Reverse
Complete tooth-chart on reverse side and list anatomical characteristics and other data if fingerprints cannot be taken.

If unidentified, give circumstances : **Over/ 1 copy, bracelet, 1 copy, ring, 1 POB ribbon, 1 copy conduct ribbon.**
List of Personal Effects found on Body and disposition of Same : **TO Effects QIC, Kansas City, Mo.**

Unknown
(Name of Emergency Addressee) (Address of Emergency Addressee)

E. A. ZIMMERMAN, 1st Lt. 157 Inf.
(Signature (or Name) of Person furnishing above data when other than the Officer reporting burial.)

(SHROUD) 1445 hrs. 17 Sept. 1944 US 111. Cem. St. Juan, France (P038622)
(Time and Date of Burial) (Location, Name, & No. of Cemetery)

IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCE REVERSE SIDE THIS FORM

4	10	113	Tom. wooden	Gen. Serv.
(Plot No.)	(Row No.)	(Grave No.)	(King Grave Markers)	(Type of Religious Ceremony)

Identification Tag buried with body () ; Identification Tag attached to marker () .

If Identification Tags not present, what other identification data were buried with the body and in what kind of container? **1 copy QIC Form 1-GRS in sealed bottle buried with body and one 1 ft below marker.**

Bodies buried on either side (See paragraph 4 on reverse side this form.)

Right side : **EVANS, George (M1) Pvt. 3295076** Co C, 180 Inf. 112
(Name) (Rank) (ASN) (Organization) (Grave No.)

Left side : **ANDERSON, Jacob (M1) Pmk. 37272161** 157 Inf. 11A
(Name) (Rank) (ASN) (Organization) (Grave No.)

(Signature of Officer Reporting Burial) **Joseph Beck**
(Verified by unit G.R.S. Officer)

JOSEPH BECK, 2d Lt. QMC, 3rd Pltn. 46th QM Co.
INSTRUCTIONS FOR FILLING OUT BURIAL REPORT : Make out QMC Form 1 - GRS in quadruplicate for U. S. dead, one additional copy for allied and enemy dead. Sign all copies. Submit report to nearest member of Graves Registration Service. Graves Registration Service will forward the original and two copies through at least one higher administrative headquarters (to be checked against Casualty Reports and allied papers and all copies verified by the Graves Registration Officer of that headquarters) to Base Section Graves Registration Service Officer. OVER FOR BURIAL INSTRUCTIONS.

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REPORT OF BURIAL
AR 30-1815 & TM 10-630

19 Sept. 1944

Date Report Filled Out

Unknown American X-43 (P098859)	Unknown	Unknown	Unknown	W
(Last Name)	(First Name)	(Middle Initial)	(Serial No.)	(Race)
Unknown	Unknown		Army	USA
(Rank)	(Organization)		(Branch)	(Country)
Vic Abbenaus, France	(Est) 12 Sept. 1944	MFW back		Unknown
(Place of Death)	(Date of Death)	(Cause of Death)		(Religion : P, C, H, etc.)
(P098859)				

MEANS OF IDENTIFICATION

Identification Tags found on body : Yes () ; No (0).

If no identification tags, other means used to identify body (identification card, letters, etc.): **None**

Complete fingerprint chart of both hands on reverse side if body cannot be identified. See Reverse
Complete tooth-chart on reverse side and list anatomical characteristics and other data if fingerprints cannot be taken.

If unidentified, give circumstances : **Over/ 1 souv. bracelet, 1 souv. ring, 1 EAME ribbon,**

List of Personal Effects found on Body and disposition of Same : **TO Effects QM, Kansas City, Mo.**

Unknown

Unknown

(Name of Emergency Addressee)

(Address of Emergency Addressee)

E. A. ZIMMERMAN, 1st Lt. 157 Inf.

(Signature (or Name) of Person furnishing above data when other than the Officer reporting burial.)

(SPROUD) 1445 hrs. 17 Sept. 1944 US Mil. Cem. St. Juan, France (P038622)

(Time and Date of Burial) (Location, Name, & No. of Cemetery)

IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCE REVERSE SIDE THIS FORM

A	10	113	Temp. wooden	Gen. Serv.
(Plot No.)	(Row No.)	(Grave No.)	(Kind Grave Markers)	(Type of Religious Ceremony)

Identification Tag buried with body (0); Identification Tag attached to marker. (0)

If Identification Tags not present, what other identification data were buried with the body and in what kind of container? **1 copy QMC Form 1-GRS in sealed bottle buried with body and one 1 ft below**

Bodies buried on either side (See paragraph 4 on reverse side this form.)

Right side :	EVANS, George (MM1) Pvt. 32995076	Co C, 180 Inf.	112
	(Name) (Rank) (ASN)	(Organization)	(Grave No.)

Left side :	ANDERSON, Jacob (MM1) Unk. 37272161	157 Inf.	114
	(Name) (Rank) (ASN)	(Organization)	(Grave No.)

(Signature of Officer Reporting Burial)

(Verified by unit G.R.S. Officer)

JOSEPH REEK, 2d Lt. QMC, 3rd Pltn. 46th QM GR Co.

INSTRUCTIONS FOR FILLING OUT BURIAL REPORT : Make out QMC Form 1 - GRS in quadruplicate for U.S. dead, one additional copy for allied and enemy dead. Sign all copies. Submit report to nearest member of Graves Registration Service. Graves Registration Service will forward the original and two copies through at least one higher administrative headquarters (to be checked against Casualty Reports and allied papers and all copies verified by the Graves Registration Officer of that headquarters) to Base Section Graves Registration Service Officer. OVER FOR BURIAL INSTRUCTIONS.

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