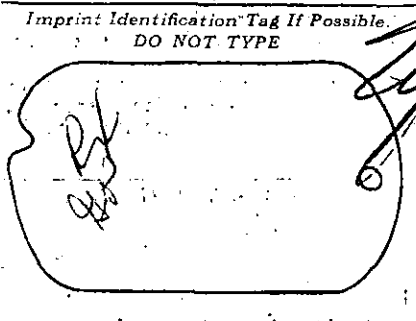


Form 1042 (Rev. 11 Apr. 1946) (Supersedes GRS Form 1, and Rev. of 1 Apr. 46, which may be used.)

REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)

DATE OF REPORT 24 October 1946



Section 1.—IDENTIFICATION.

Imprint Identification Tag If Possible. DO NOT TYPE

NAME (Last, first, middle initial) Unknown X - 7986 France (S. Arnold)

SERIAL NO. Unknown

GRADE Unknown ORGANIZATION Unknown BRANCH OF SERVICE Ground Forces

RACE Unknown RELIGION Unknown IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH Found on edge of ROER River near HOVEN, Germ.

CAUSE OF DEATH Killed by Infantry

DATE OF DEATH Est. Febr. 1945

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) none

WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) yes

COMPLETED TOOTH CHART ON QMC FORM 1045 ATTACHED HERETO YES NO

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

cancel remains found to be wild animal per letter, RFE 200,2, dated 2 Oct 46. Described an open grave

MEMORIAL RECORDS BRANCH PH 233 2

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 St. Avoird - France - Q 260584 - 28 Oct 46

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.
24 October 1946	1400	casket	temp. wooden cross	0000	1	5

WAS THIS A REBURIAL? (Yes or no) no

IF A REBURIAL INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE

Body not buried. Found on edge of ROER River near HOVEN, Germany, W F 0848

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
Joint Service	Ch.H: M. Trebaol, Capt. Ch.Chas. R. Williams, 1/Lt	One copy WD QMC Form 1042 Report of Interment - placed in burial bottle and buried with remains

IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)
No	Yes, embossed plate

BODY BURIED ON DECEASED LEFT. NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.
Unknown X-7956	Unk	Unk	AAF	4
BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.
Unknown X-7978.	Unk	Unk	AAF	6

SIGNATURE OF PERSON PREPARING REPORT ELLSWORTH T. MAC INTYRE Captain MC. C.I.P.

SIGNATURE OF GRS OFFICER VERIFYING REPORT GOTTFRIED PLETZER 2nd Lt. Inf. C.I.P. Gottfried Pletzer

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.

20 - 1 - 5

Section 3. UNIDENTIFIED REMAINS.

INSTRUCTIONS:

(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.

(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.

HEIGHT UTD	WEIGHT UTD	COLOR OF EYES UTD	COLOR OF HAIR UTD	BIRTHMARKS, SCARS, OR TATTOOS UTD
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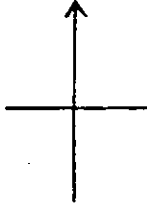
WEAPON AND SERIAL No. See below	LAUNDRY MARKS none	WHERE BODY WAS BURIED OR FOUND Roer River near Hoven, Germany.
---	------------------------------	--

OTHER IDENTIFICATION CLUES

One U.S. Rifle Springfield, Cal. 30, M.I. No 3043009

Two inverted white triangulars painted on front of helmet.

FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY



REMARKS:

Form 11 Checklist of Unknowns accomplished.
 Unable to obtain tooth chart or fingerprints because of missing portions.
 Est. weight of remains recovered 1/2-Lbs.

REPORT OF INVESTIGATION AREA SEARCH

AGRC Form 10 (Revised)

23 October 1946

1 January 1946

Date

NAME Unknown X - 7986 RANK Unknown ASN Unknown

ORGANIZATION Ground Forces

MEANS OF IDENTIFICATION none

(All statements above this line will be completed, upon final processing, by the clerical staff at the unit processing point.)

SECTION A — GENERAL (To be completed by investigators in all cases)

1. Was positive identity acquired for the deceased through the surface investigation? No If so, state the following information:

a. NAME _____ RANK _____ ASN _____

b. ORGANIZATION _____

2. Was partial identification established? No If so, state the facts as to whom you believe the deceased to be:

a. NAME Unknown RANK Unk ASN Unk

b. ORGANIZATION _____

3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY None

(Use reverse side for listing of crew members from MARC)

a. Date of above burials Not Buried Common Graves? _____

5. Name and Type of Cemetery _____
(Military or Civilian)

6. Map Coordinates of the Cemetery _____

a. Town _____ Country _____

7. Give exact location in cemetery of the remains.

a. Section _____ Row _____ Grave _____

b. Is Sketch attached? _____

8. If remains are not located in a cemetery, give exact location.

a. Town Hoven Coordinates (WF-0848)

b. Is Sketch attached? yes

c. Is area mined? No

9. How is the grave marked? Not Buried

10. If grave is marked with cross, give exact markings thereon Remains not Buried

a. From what source was this information obtained? Burgermeister's records

(Identification tags, personal effects)

1. By whom Burgermeister

11. Where are the cemetery records? Burgermeister's Office

(Town Hall, cemetery, burgermeister's office)

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- a. What information was contained thereon? Date of death
- b. Where was the information obtained? Burgermeister's records
- c. By whom? Burgermeister
12. What is the date of death? Est. February 1945
- a. Give basis Burgermeister's records
13. What is the cause of death? Killed by Infantry
- b. Give basis Burgermeister's records
14. What is the date of burial? Remains not Buried
- a. Give basis Burgermeister's records
15. What was the place of death? ROER, River near Hoven Coords WF-0848
- b. Give basis Burgermeister's records
16. Where were the remains found? ROER, River near Hoven Coords WF-0848
- a. By whom? German Civilians
- b. Is sketch attached? yes
17. Was a casket used? Remains not buried Who furnished the casket? _____
 Type of casket _____ How marked? _____
18. Who made the burial Remains not buried
 (Civilian, American Mil. or German Mil.)
- a. What are the names and addresses? Wienand Franken, Merken, Echtzersstr. # 10; Josef Nepomuck, Merken, Aldenhovenerstr. # 47; Hubert Nepomuck, Merken, Aldenhovenerstr. # 47; Peter Nepomuck, Merken, Durenerstr. # 12; Wilhelm Weingartz, Merken, Aldenhov, str. 40
- SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be a member of the AAF).
19. Were remains found in the plane wreckage? DOES NOT APPLY
- a. Give location in plane from which the bodies were removed _____
 (Tail gunner, pilot, radio, turret, etc., or front, side of plane)
- b. Near wreckage? _____
20. Scene of crash must be investigated. Give complete results of investigation (if removed, state when and by whom).
- a. Type of Plane _____
- b. Markings and/or name on plane _____
- c. Give numbers on motors, machine guns, instruments, radios or other equipment: _____
21. How did crash occur? Anti-aircraft
 Enemy Planes? _____ Collision? _____
22. Did plane explode in the air? _____ On ground? _____
23. Did plane burn in the air? _____ On ground? _____
24. What was the direction of the flight? _____
25. What was the civilian opinion regarding destination of plane? _____

65

26. How bombs been released prior to the crash?
27. Does specific time and date of crash correspond with date of death of above named deceased?
28. Number of planes in formation prior to crash
29. State precise time and date of plane crash (Night?) (Day?)
30. Were parachutists seen? How many? Escaped?
- Prisoners?

SECTION C — ARMORED CORPS DECEASED (To be completed only if deceased is believed to have been a member of the Armored Force).

31. Were remains found in wreckage of a tank? DOES NOT APPLY
- a. Give specific position in tank from which deceased was removed
- (Radio man, driver, assistant driver or . . . front, side, or back)
- b. Near wreckage?
32. Location of destroyed tank must be investigated. Give complete results of investigation. (If removed, state when and by whom)
- a. Type of tank
- b. Markings and/or name of tank
- c. Numbers on motors, machine guns, ammunition, instruments, etc

33. What was the type of enemy action that resulted in the tank's disablement?

34. Did tank explode? Burn?
35. Number of tanks in immediate vicinity at time of disablement
36. Does specific time and date of disablement correspond with date of death of above named deceased?
37. Precise time and date of destruction of tank (Night?) (Day?)

38. Did any of the crew members escape? Prisoners?

SECTION D — OTHER BRANCH (To be filled out if B & C are not applicable).

39. Did death occur from any other means? (i. e., truck, jeep, mines, drowning, or small arms fire) No
- If so, give complete and thorough results of the interrogation.
- a. Are all certificates and statements of people who possessed knowledge of the case attached? yes
40. State the specific clues and evidence that were obtained in securing the name and facts regarding the above listed deceased Franken Wienand, Merken, Echtzersstr. # 10; Josef Nepomuck, Merken, Aldenhovenerstr. # 17; Hubert Nepomuck, Merken, Aldenhovenerstr. # 17; Peter Nepomuck, Merken, Durenerstr. # 12; Wilhelm Weingartz, Merken, Aldenhovenerstr. # 10

SECTION E — GENERAL (To be completed by investigation in all cases)

41. Were personal effects recovered by the investigating team? No
- If not, state reason None could be found
- a. Were identification tags found at the time of death? No
- Where? By whom?
- Present disposition Unknown

If deceased is not identified, personal effects will not be forwarded to PE Depot, but will remain with this form until final identification is made, or investigation is abandoned.

b. Were personal effects found at the time of death? No

Where? _____ By whom? _____

Present disposition Unknown

c. Was deceased identified by living members of the crew at the time of death? No

d. Did Cemetery Register or cross indicate the immunization shot? Not buried

42. Was Deceased given first aid? No If so, where? _____

By whom? _____ Are statements from the medical people attached? _____

43. Was deceased evacuated to a German civilian hospital? No

Where? _____ Names of people concerned _____

44. Is it possible on surface investigation to obtain from civilian sources a physical description of the deceased? No

45. Is it possible on surface investigation to obtain from civilian sources the condition of the remains? No

(Burnt? Decapitated? etc)

46. Do facts surrounding death show any evidence that it might be an atrocity case? No

a. If so, give basis for positive assumption _____

b. If so; has higher headquarters been notified? _____

47. Was case previously investigated? _____ By whom? _____

When? _____

48. Give full names, addresses, and information obtained from each person interviewed Wienand Franken, Merken, Echtzersstr. 10; Josef Nepomuck, Merken, Aldenhovenerstr. 17; Hubert Nepomuck, Merken, Aldenhovenerstr. 17; Peter Nepomuck, Merken, Durenerstr. 12; Wilhelm Weingartz, Merken, Aldenhov, str. 10

49. Are all positive statements regarding identification and particulars surrounding death attached? yes

50. Has any information been given concerning isolated burials in the area outside the immediate vicinity? No

51. Was investigation preceded by advanced publicity? yes

(If special investigation, give case number) _____

52. Give Brief Narrative (SEE ATTACHED NARRATIVE)

(Use attached, sheets if necessary)

Ivor J. Fosmo

Signature of Interpreter

Signature of Investigator

IVOR J. FOSMO
2nd Lt. Inf O-2020412

Rank ASN

Rank ASN

(61)

610 Th QM GR Company, Cochem/Mosel

Organization

Organization

NARRATIVE.

The deceased was found lying on the edge of the ROER River near HOVEN (WF-0848) Germany by our disinterring team, 610 QM GR Co. and no clues to identification were found.

The only clue which may help to identify to deceased is a M-1 rifle which was found besides the remains.

A case from First Field Headquarters mentions about a Roger B. STANCLIFF, 3913504, Co C, 415 Infantry of 104th Division missing in that area.

Since no other remains were located in that area, it is assumed that this unknown may be Pvt. Roger B. STANCLIFF.

Civilians state that the Americans crossed the ROER River in February 1945. No further information could be obtained.

(68)

Ivor J. Fosmo

IVOR J. FOSMO
2nd Lt. Inf
G. R. Officer

AGRC
FORM No. 11
Revised 5 January 1946

CHECK LIST OF UNKNOWNNS

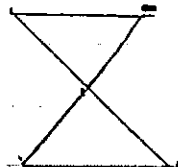
(to be completely filled out and attached to each copy of Report of Interment
WD QMC Form 1042)

Unknown X- 7986
Cemetery St. Avold - France
Plot _____ Row _____ Grave _____

1. Arrived at cemetery _____
(hour) (date)
2. Place of death Edge of Roer River near Hoven, Germany
(name of closest town) (coordinates and letter Prefex, maps)
W F 0848
(Sheet, scale and serials used)
3. Remains recovered or disinterred by 610th QM GR Co.
(name and organization)
4. Evacuated to Cemetery by Central Identification Point
(name and organization)
5. **Description of clothing and equipment : (if clothes do not fit, obtain size from body measurements).**

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

Item	Clothing	Markings	Sizes	Indicate unusual markings Color wear, tear, repairs, etc.
*Headgear	<u>Metal helmet and helmet liner with camouflage markings on helmet, white rectangular, net N.C.O. Patch painted on rear of helmet, two inverted white triangles painted on front of helmet.</u>			
	<u>Note diagram</u>			
Raincoat	<u>none</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>			



NO CLOTHING FOUND ON BODY

Belt, Web
Drawers, Wool
Drawers, Cotton
Leggins, Wool (Note unusual lacing)
Socks, Cotton
*Shoes (type)
Overshoes
Web Equipment..(Type)

(Other item) **U.S. rifle Springfield, Cal. 30 M.I. No 3043009**

(Other item) **none**

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

6. Chevrons or Insignia **Utd**
(type & location : shirt, jacket, coat, helmet)

Shoulder Patch **Utd**

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

8. Description of Remains :

Age **Utd** Height **Utd** Weight **Utd** 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** 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 **missing**
(white, size, unevenness, spacing, noticeable crowns, fillings, extract).

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

Jaw **Utd** Circumference of head in inches **Utd**
(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)

Utd
(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 & extent of hair, large, small normal)

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

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

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

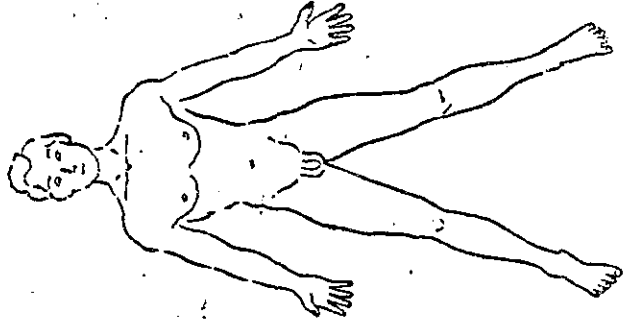
Legs **Utd**
(inscam, muscular, knock-kneed, bowed, normal, quantity, color & extent of hair)

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

Evidence of healed factures 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 fingers missing

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

12. Remarks : Body consists only of the following. Three fractured fragments of vertebra. One fractured fragment of sacrum. Seven rib fragments. No teeth. No clothing. Not necessary to fluoroscope.

Nothing found to warrant Chem. Lab. examination.

Est. weight of remains recovered 1/2 Lbs.

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.

R. G. Johnson

Officer's Name

R. G. JOHNSON

2nd Lt. Inf. Lab. Off.
Rank Service

Central Identification Point
Organization

IF-1115

