

*jb*  
7387 GRAVES DETACHMENT

*add*  
APO 757

943 unk St. Avold X-1117 m

Attached hereto are case papers for an approved unidentifiable case which are considered to be of investigative importance. Records of this headquarters indicate these case papers were not previously forwarded to OQMG for:

UNKNOWN X-1117, St Avold

(POC) ST LAURENT

REPORT OF INVESTIGATION AREA SEARCH

*E. Auld*  
28 March 1946  
DATE

NAME X-1117. Unknown RANK Unknown ASN Unknown

ORGANIZATION Unknown

MEANS OF IDENTIFICATION

(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 Unknown ASN Unknown

b. ORGANIZATION Unknown

3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY

Unknown  
(Use reverse side for listing of crew members from MACR)

A. Date of above burials \_\_\_\_\_ Common Graves? \_\_\_\_\_

4. Deleted \_\_\_\_\_

5. Name and type of cemetery None  
(Military or Civilian)

6. Map Coordinates of the Cemetery None

a. Town \_\_\_\_\_ Country \_\_\_\_\_

7. Give exact location in cemetery of the remains.

a. Section None Row \_\_\_\_\_ Grave \_\_\_\_\_

b. Is sketch attached? YES

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

a. Town Ammerschwihr France Coordinates 1:200,000 (V-460610) Eur. Rd. Map, Sht. #87

b. Is sketch attached? Yes

c. Is area mined? Yes

9. How is the grave marked? No marks

10. If grave is marked with cross, give the exact markings thereon

No markings

a. From what source was this information obtained? \_\_\_\_\_  
(Identification tags, personal effects) *Digested*

b. By whom? *147th Inf*

11. Where are the cemetery records? Town Hall *147th Inf*  
(Town hall, cemetery, burgermeister's office) *J. M. W.*

a. What information was obtained thereon? \_\_\_\_\_

b. Where was the information obtained? \_\_\_\_\_

c. By whom? \_\_\_\_\_

12. What is the date of death? Unknown

a. Give basis Unobtainable

13. What is the cause of death? Unknown

a. Give basis Maurice Guerbois' statement

14. What is the date of burial? Unknown

a. Give basis \_\_\_\_\_ Ammerschwihr, Eur. Rd. 12, Sct. 87

15. What is the place of death? Ht.-Rhin, France *1290,000* Coords (7-46-318)  
Give basis Maurice Guerbois' statement

16. Where were the remains found? Forest of Vorhof 11 Kilometers Coords same as 15  
W. Ammerschwihr

a. By whom? Casper Joseph

b. Is sketch attached? Yes

17. Was a casket used? No Who furnished the casket? \_\_\_\_\_

Type of casket \_\_\_\_\_ How marked? \_\_\_\_\_

18. Who made the burial? (Civilian, American Mil. or German Mil.)

a. What are the names and addresses? \_\_\_\_\_

b. Are certificates and statements attached? \_\_\_\_\_

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? \_\_\_\_\_

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 of 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 the ground? \_\_\_\_\_
23. Did plane burn in the air? \_\_\_\_\_ On the ground? \_\_\_\_\_
24. What was the direction of the flight? \_\_\_\_\_
25. What was the civilian opinion regarding the destination of the plane? \_\_\_\_\_
26. Had bombs been released prior to the crash? \_\_\_\_\_
27. Does specific time and date of crash correspond with the 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? \_\_\_\_\_  
a. Give specific position in tank from which deceased was removed  
(Radio man, driver, asst. driver or... front, side, or back)  
b. Near wreckage? \_\_\_\_\_
32. Location of destroyed tank 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) \_\_\_\_\_

If so, give complete and thorough results of the investigation's interrogation.

a. Are all certificates and statements of people who possessed knowledge of the case attached? \_\_\_\_\_

40. State the specific clues and evidence that were obtained in securing the name and facts regarding the above listed deceased

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 on body

a. Were identification tags found at the time of death? No

Where? \_\_\_\_\_ By whom? \_\_\_\_\_

Present disposition \_\_\_\_\_

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 abandoned.

b. Were personal effects found at the time of death? Unknown

Where? \_\_\_\_\_ By whom? \_\_\_\_\_

Present disposition \_\_\_\_\_

c. Was deceased identified by living members of the crew at the time of death? \_\_\_\_\_

d. Did Cemetery register or cross indicate the immunization shot? \_\_\_\_\_

42. Was deceased given first aid? Unknown If so, where? \_\_\_\_\_

By whom? \_\_\_\_\_ Are statements from the medical people attached? \_\_\_\_\_

43. Was deceased evacuated to a German hospital? No

Where? \_\_\_\_\_ Names of the 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? Skeleton  
(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 \_\_\_\_\_

2

b. If so, has higher headquarters been notified? \_\_\_\_\_

47. Was case previously investigated? No By whom? \_\_\_\_\_

When? \_\_\_\_\_

48. Give full names, addresses, and information obtained from each person interviewed Casper Joseph, Maurice Guerbois

Kayserisberg(Ft.-Rhin) France

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 statements attached

(Use attached sheets, if necessary)

/S/ John Notaro  
Signature of Interpreter

Rank \_\_\_\_\_  
ASN \_\_\_\_\_  
Organization \_\_\_\_\_

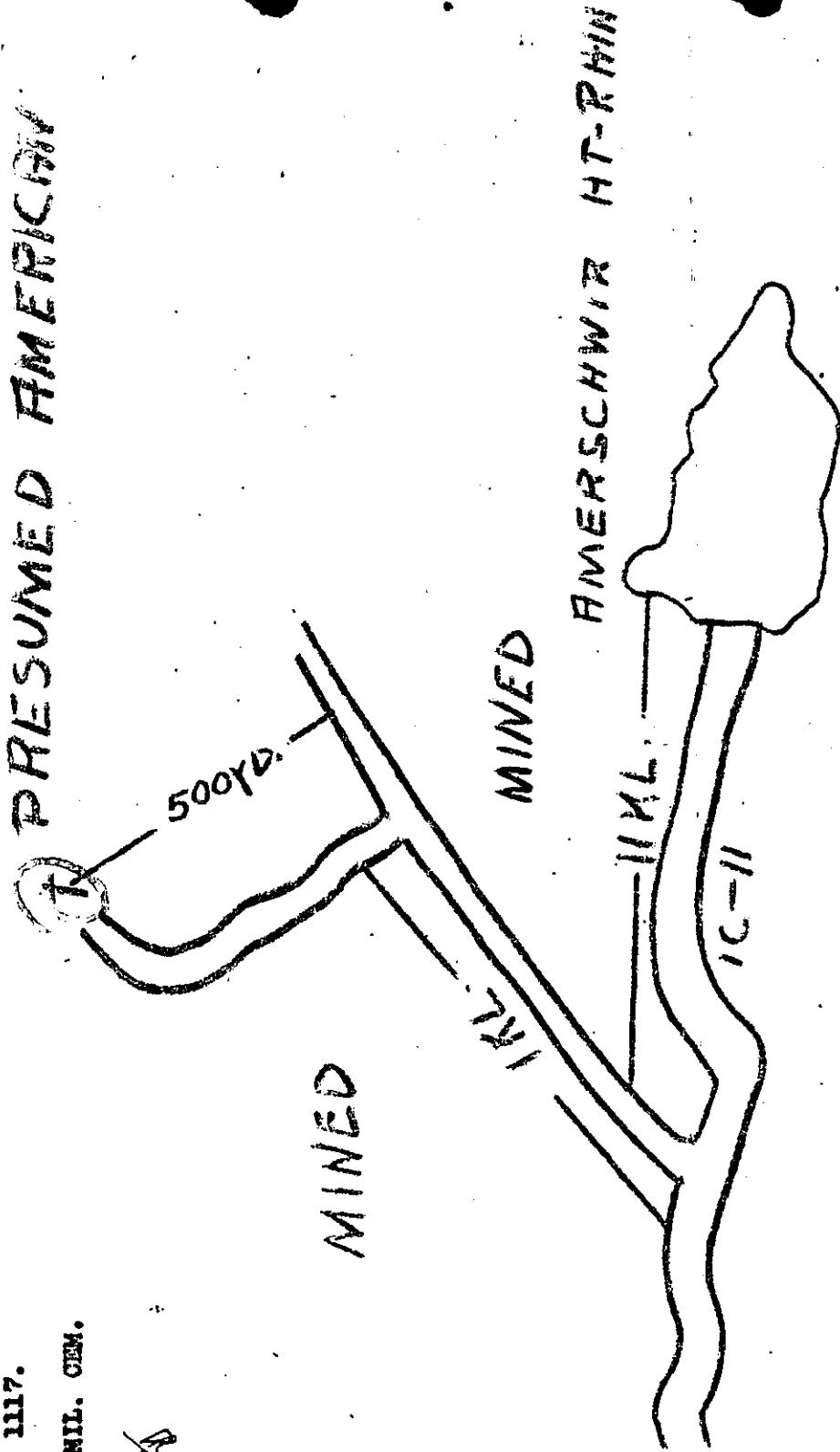
/S/ Stanley J. Wileczek  
Signature of Investigator

Pvt. \_\_\_\_\_  
Rank \_\_\_\_\_  
ASN \_\_\_\_\_  
Organization \_\_\_\_\_

A True Copy:  
William D. Lawson III  
William D. Lawson III  
2nd Lt. Inf.

SECTION 2 & III 7.

REFERRED U.S. MIL. CEM.  
ST. AVOID.  
PP - 10 - 116 ~~✓~~



1:200,000 87 V-460-010  
STRASBURG BASE

République Française

MAIRIE DE LA VILLE  
D'AMMERSCHWIHR

Arrondissement de Ribeauvillé  
HAUT-RHIN

Téléphone Kaysersberg No 84

▽

Ammerschwihr, le 25 mars 1946.

AUTORISATION DE TRANSPORT DE CORPS

-----

Le Maire de la ville  
d'AMMERSCHWIHR autorise le transport de la  
dépouille mortelle d'un soldat américain  
inconnu, trouvé sur le territoire de notre  
commune, et devant être transporté ~~en~~ à  
STRASBOURG .



Le Maire :

C. Rögg.

UNKNOWN X - 1117.

REINTERRED U.S. MIL. CEM. ST. AVOLD. PP - 10 - 115.

S T A T E M E N T

March 25, 1946.

I have investigated a body presumed to be an American in the Forest of Vorhot, about 11 kilometers west of Ammerschwihr, Ht.-Rhin, France. I found no identification or personal effects to identify the body. Casper Joseph, Maurice Guerbois and laborers working in de-mining work, made statements claiming the body is presumed to be American. The area is mined and Mr. Guerbois claims, as they de-mine the area, they will be able to find more bodies.

/S/

Pvt. Stanley Wileczek  
33985522

A True Copy:

William D. Lawson III  
William D. Lawson III,  
2nd Lt. Inf.

UNKNOWN X - 1117.

REINTERRED U.S. MIL. CEM.  
ST. AVCLD.  
PP - 10 - 115.

March 25 - 1946

Investigation Narrative.

I have investigated a body presumed to be an American in the Forest of Vorbot a 11 kilometers west of Ammerschwiir H.S.-Blin France. I found no identification or personal effects to identify the body, ~~██████████~~. The Deminers and Mr Guerbois, Controller Tech. made statements claiming the body is presumed to be American. The area is mined, and Mr Guerbois claims as they demine the area he is sure they will find more bodies.

UNKNOWN X - 1117.

REINTERRED U.S. MIL. CEM. ST. AVOLD.

Pvt Stanley Wilcsek (33985522)  
PP - 10 - 115.

S t a t e m e n t

Ammerschwihr le 25 3 46

Je soussigne GUERBOIS Laurice Contrôleur technique au Service de déminage à Colmar Ht Rhin déclare avoir conduit ce jour deux Américains auprès d'un soldat prisonnier Américain mort pour la France dans la forêt d'Ammerschwihr au lieu dit "Le Vorhof". Étant passé dans la forêt qui est très mince, je presume que d'autres soldats américains s'y trouvent mais pour le moment il m'est encore impossible d'en fixer le nombre et d'en être sur.

M GUERBOIS  
Contrôleur Technique  
Hôtel National  
à COLMAR  
à PARIS  
31 Rue Grenze

T R A N S L A T I O N

I, the undersigned GUERBOIS Maurice Technical Controller from COLMAR Ht Rhin certify to have led this day two American Soldiers to a corpse (presumed to be American dead for France) in the forest of Ammerschwihr at the place called "Le Vorhof". Being passed in the forest which is still very mined, I suppose there more American soldiers in it. Actually it is impossible for me to fix the number.

/S/ GUERBOIS Maurice

A True Copy  
Willia D. Lawson III  
Willia D. Lawson III  
2nd Inf

UNKNOWN X-1117.

REINTERRED U.S.MIL.CEM.

ST.AVOLD. PP - 10 - 115.

Statement

Amerschwihr le 25.3.46

Je soussigne GASPAR Joseph demineur au service du deminage de Colmar declare qu'au mois d'Aout deminant une partie de la foret d'Amerschwihr ont trouve accompagnes d'autres demineurs 2 morts que nous avons presume etre americains.

Le Samedi 23.3. des americains venus d'Amerschwihr nous ayant demande d'aller voir ces corps nous leur avons dit que cette partie de foret etait minee. Ils n'ont pas voulu s'y rendre immediatement. Nous avons donc procede au deminage des lieux et avons reconnu un soldat Francais et un autre que l'on a presume Americain. Ce jour accompagne par mon controlleur technique et deux americains j'ai vu ce corps et en fait la declaration.

/S/ Gaspar Joseph  
Demineur  
Rue des Marchands 27  
COLMAR

TRANSLATION

Amerschwihr 25.3.46.

I, the undersigned GASPAR Joseph deminer from Colmar certify that in August in demining an area of the forest of Amerschwihr, I found with other deminers, 2 corpses presumed to be American. On Saturday the 23rd 3 american soldiers coming to Amerschwihr asked us to go and see the corpses. We told that this area of the forest was still mined. They refused to go. We demined the place and afterwards we found out one French Soldier and another soldier presumed to be American.

This Day accompanied by my controller and two american soldiers I saw the corpses and make the declaration of it.

/S/ Gaspar Joseph  
Deminer  
Rue des Marchands  
COLMAR

A True Copy

William D Lawson III  
2nd Lt Inf

UNKNOWN X- 1117.

REINTERRED U.S.MIL.CEM.

ST. AVOID.

PP - 10 - 115.

Ammerbuch 23/3/1946

I the undersigned Casper Joseph  
deunier from Colmar certify that in August  
in demining an area of the forest of Ammerbuch  
found, with others deminers, 2 bodies presumed to be  
Americans -

The Saturday 23/3 American soldiers came of ~~from~~  
to Ammerbuch asked us to go and see the bodies.  
We told them that this area of the forest was still mining.  
They refused to go. We demined the place afterwards  
and found out one French soldier and another soldier  
presumed <sup>to be</sup> American.

This day accompanied by my controller Schmid  
and two American soldiers I saw the corp and  
make the declaration of it -

Casper Joseph  
Deunier  
Rue des Marchands 27  
Colmar.

Ammerschwihr 25/3/1946

Tchernigov Caspar Joseph demineur  
au Service du déminage de Colmar.

Déclare qu'en mois d'Avril démineur  
une partie de la route d'Ammerschwihr  
est brûlé, accompagné d'autre démi-  
neurs. Mort que nous avons tué  
des américains.

Le Samedi 22/3 des américains venus  
à Ammerschwihr nous ayant demandé  
d'aller voir les corps nous leur avons  
dit que cette partie de la route était  
brisée. Ils n'ont pas voulu s'y  
rendre immédiatement. Nous avons  
toutefois procédé au déminage de l'aut.  
et avons recueilli un soldat <sup>Français</sup> et un  
autre soldat blessé américain.

Ce jour accompagné par mon contreben  
Tchernigov et deux américains. J'ai vu  
le corps et en fait la déclaration.

Caspar Joseph  
(Demineur)  
rue des Marchands 27  
Colmar

Ammerthal 25/3/46.

I the undersigned Gantos Neumeier  
technical Controller from Colmar H. R. Rhin  
certify how led this day two American soldiers  
to a corpse (presumed to be American dead for France)  
in the forest of Ammerthal at the place called  
"Le Vorkuf".

Being passed in the forest which is still very mixed,  
I suppose there are more American soldiers in it  
but for the time being it is impossible to me  
to say how many and to be sure about it -

Gantos Neumeier  
Hotel National  
Colmar

UNKNOWN X - 1117.  
REINTERRED U.S. MIL. CEM.  
ST. AVOID. PP - 10 - 115.

a "Pom"  
81 Rue Grenze

Ammerichsho 25/3/46

Je soumets Guerbois Maurice  
Contrôleur Technique au Service du  
Commerce à Colmar Hôtel National d'ici au  
avoir conduit ce jour deux américains  
au père d'un soldat (frère d'un améri-  
cain mort pour la France) dans la  
forêt d'Ammerichsho au lieu dit "Le  
Vorhof".

Étant tenu dans le fait qui  
ut pris mine, je prétends que  
d'autres soldats américains n'y  
avaient pas pour le moment  
il n'est en tout impossible d'en  
per le nombre et d'en être sûr.

M. Guerbois  
Contrôleur Technique  
Hôtel National  
à Colmar

UNKNOWN X-1112.  
REINTERREDU.S.MIL.CEM.  
ST.AVOLD.  
PP - 10 - 115.

a Paris  
31 Rue Grange

~~SECRET~~

Ammerschwihr le 25.3.46

Je soussigne GASPAR Joseph demineur au service du deminage de Colmar declare qu'en mois d'Avril dominant une partie de la foret d'Ammerschwihr ont trouve accompagnée d'autres demineurs 2 morts que nous avons presume etre americains.

Le Samedi 23.3. des americains venus d'Ammerschwihr nous ayant demande d'aller voir ces corps nous leur avons dit que cette partie de foret était minée. Ils n'ont pas voulu s'y rendre immédiatement. Nous n'avons donc procédé au deminage des lieux et avons reconnu un soldat Français et un autre soldat presume Americain Ce jour accompagné par mon contrôleur technique et deux americains j'ai vu ce corps et en fait la déclaration.

/S/ Gaspar Joseph  
Demineur  
Rue des Marchands 27  
COLMAR

TRANSLATION

Ammerschwihr 25.3.46.

I, the undersigned GASPAR Joseph deminer from Colmar certify that in August in demining an area of the forest of Ammerschwihr, I found with other deminers, 2 corpses presumed to be Americans. On Saturday the 23rd 3 american soldiers coming to Ammerschwihr asked us to go and see the corpses. We told that this area of the forest was still mined. They refused to go. We demined the place and afterwards we found out one French Soldier and another soldier presumed to be American.

This Day accompanied by my controller and two american soldiers I saw the corpses and make the declaration of it.

/S/ Gaspar Joseph  
Deminer  
Rue des Marchands  
COLMAR

A True Copy

William D Lawson III  
William D Lawson III  
2nd Lt Inf

UNKNOWN X- 1117.

REINTERRED U.S.MIL.CEM.

ST. AVOLD.

PP - 10 - 115.

Statement

Ammerschwihr le 25.3.46

Je soussigne GASPAR Joseph demineur au service du deminage de Colmar declare qu'au mois d'Aout deminant une partie de la foret d'Ammerschwihr ont trouve accompagnes des autres demineurs 2 morts que nous avons presume etre americains.

Le Samedi 23.3. des americains venus d'Ammerschwihr nous ayant demande d'aller voir ces corps nous leur avons dit que cette partie de foret etait minée. Ils n'ont pas veulu s'y rendre immediatement. Nous n'avons donc procede au deminage des lieux et avons reconnu un soldat Francais et un autre soldat presume Americain Ce jour accompagne par mon contrôleur technique et deux americain j'ai vu ce corps et en fait la declaration.

/S/ Gaspar Joseph  
Deminier  
Rue des Marchands 27  
COLMAR

TRANSLATION

Ammerschwihr 25.3.46.

I, the undersigned GASPAR Joseph deminer from Colmar certify that in August in demining an area of the forest of Ammerschwihr, I fou with other deminers, 2 corpses presumed to be Americans. On Saturday the 23rd 3 american soldiers coming to Ammerschwihr asked us to go and see the corpses. We told that this area of the forest was still minded. They refused to go. We demined the place and afterwards we found out one French Soldier and another soldier presumed to be American.

This Day accompanied by my contrôller and two american soldiers I saw the corpses and make the declaration of it.

/S/ Gaspar Joseph  
Deminier  
Rue des Marc hands  
COLMAR

A True Copy

*William D Lawson III*  
William D Lawson III  
2nd Lt Inf

UNKNOWN X- 1117.

REINTERRED U.S.MIL.CEM.  
ST. AVOLD.  
PP - 10 - 115.

Statement

Ammerschwihr le 25 3 46

Je soussigne GUERBOIS Maurice Controleur technique au Service de déminage à Colmar Ht Rhin déclare avoir conduit ce jour deux Américains auprès d'un soldat prisonnier Américain mort pour la France dans la forêt D'Ammerschwihr au lieu dit "Le Vorhof".  
Etant passé dans la forêt qui est très mince, je presume que d'autres soldats américains s'y trouvent mais pour le moment il n'est encore impossible d'en fixer le nombre et d'en être sur.

M GUERBOIS  
Controleur Technique  
Hôtel National  
à COLMAR  
à PARIS  
31 Rue Grenier

TRANSLATION

I, the undersigned GUERBOIS Maurice Technical Controller from COLMAR Ht Rhin certify to have led this day two American Soldiers to a corpse (presumed to be American dead for France) in the forest of Ammerschwihr at the place called "Le Vorhof".  
Being passed in the forest which is still very mined, I suppose there were american soldiers in it, Actually it is impossible for me to fix the number.

/S/ GUERBOIS Maurice

A True Copy

William D. Lawson III  
2nd Inf

UNKNOWN X-1117

REINTERRED U.S.MIL.CEM.

ST.AVOLD. PP - 10 - 115

S T A T E M E N T

Kaysersberg, le 25/3/46.

Je soussigne Herold Jean Joseph demineur au service du déminage à Colmar (Haut Rhin) France, déclare qu'au mois d'Aout 1945, en cherchant les champs de mines dans la foret Ammerschwihr au lieu dit "Le Vorhof" nous avons trouvé deux corps de soldats que nous avons presume Americains..

/S/ Herold Jean  
16, rue de Pres Kaysersberg (Haut Rhin)

T R A N S L A T I O N

Kaysersberg, 25th /3/46.

I the undersigned Herold Jean deminer from Colmar (Haut Rhin) Fr. certify that in August 1945 in searching mines area in the forest of Ammerschwihr at the place called " Le Vorhof " we found 2 bodies of soldiers presumed to be that of Americans.

/S/ Herold Jean  
16. rue du Pres Kayserberg (Haut Rhin)

A True Copy.

William D. Lawson III  
William D. Lawson III  
2nd Lt. Inf.

UNKNOWN. X - 1117.

REINTERRED U.S. MIL. CEM.  
ST. AVOLD.  
PP - 10 - 115.

| NOM | GRADE | NUMERO<br>MATRICULE | NATIONALITE | MISPLACEMENT | SOURCE D'INFORMATION |
|-----|-------|---------------------|-------------|--------------|----------------------|
|-----|-------|---------------------|-------------|--------------|----------------------|

Unknown

29 March 1946

AMERICAN FOREST

OF VORHUT  
15 KILOMETERS  
WEST OF  
AMMERSCHWIL

M. GUERBOIS - CONTROLEUR  
" TECH. STATEMENT

UNKNOWN X-1117  
REBURRED ST AVOID 29 March 1946  
PLOT PP ROW 10 Grave 115

I certify that the ~~ARMED FORCES~~ officials have been  
questioned and that they concerning the negative statement of the Mayor  
~~do not know anything about it~~

(Chief of Cemetery)

(Other)

*Stanley J. Goldmark*  
Investigator's Signature

*J. P. J. Verha*  
(Parish Priest)

Done

No file 13 Nov 46

MARCH 25-46

AREA SEARCH CERTIFICATE

**AMMERSCHWIHR**

VILLE

Haut-Rhin

DEPARTMENT

TERRITOIRE

En reponse a l'enquete faite ce jour par des representants de l'Armee des Etats-Unis, concernant l'existence de tombes de militaires des Etats-Unis ou de leurs Allies, je certifie qu'au mieux de mes connaissances, je crois qu'il y a 1 Corps (1) de telles tombes dans le territoire soumis a ma juridiction. De plus, j'ai fait afficher sur les tableaux d'affichage de ma commune et je m'engage, au cas ou j'aurais des renseignements concernant la localisation de tombes de militaires de l'Armee des Etats-Unis ou de leurs Allies, a les faire parvenir a l'adresse qui m'a ete indiquee:

COMMANDING OFFICER

3RD Field Headquarters,  
American Graves Registration Command,  
AFO 21 US Army

- (1) Noter le nombre de corps. S'il n'y en a pas, le mentionner. Liste de corps au verso de ce certificat.

Stanley J. Wilgech  
Investigator's  
Signature



  
Signature of the Mayor of Ammerschwihr

Signature d'une  
autorite de la Ville

Pvt 33985522

Rank ASN

30496 535 9m AGRC

Organization

(To be completed in Triplicate. One copy retained by Town Official, one copy to Mob Biv Gp Headquarters and one copy to Gp Ho. On completion of Department, copies from Mob Biv Gp and Group will be forwarded to Field Hq).

STATEMENT

March 25, 1946:

I have investigated a body presumed to be an American in the Forest of Verhot, about 11 kilometers west of Ammerschwihr, Ht.-Rhin, France. I found no identification or personal effects to identify the body. Casper Joseph, Maurice Guerbois and laborers working in de-mining work, made statements claiming the body is presumed to be American. The area is mined and Mr. Guerbeis claims, as they de-mine the area, they will be able to find more bodies.

/S/

Pvt. Stanley Wileczeck  
33985522

A True Copy:

*William D. Lawson III*  
William D. Lawson III  
2nd Lt. Inf.

UNKNOWN X - 1117.

REINTERRED U.S. MIL. CEM.  
ST. AVOID.  
EP n 10 - 115.

S T A T E M E N T

Kaysersberg, le 25/3/46.

Je soussigne Herold Jean Joseph demineur au service du deminage à Colmar (Haut Rhin) France, déclare qu'au mois d'Aout 1945, en cherchant les champs de mines dans la foret Ammerschwihr au lieu dit "Le Vorhof" nous avons trouvé deux corps de soldats que nous avons presume Americains..

/S/ Herold Jean  
16, rue de Pres Kaysersberg (Haut Rhin)

T R A N S L A T I O N

Kaysersberg, 25th /3/46.

I the undersigned Herold Jean deminer from Colmar (Haut Rhin) Fr. certify that in August 1945 in searching mines area in the forest of Ammerschwihr at the place called " Le Vorhof " we found 2 bodies of soldiers presumed to be that of Americans.

/S/ Herold Jean  
16. rue du Pres Kaysersberg (Haut Rhin)

A True Copy.

William D. Lawson III  
William D. Lawson III  
2nd Lt. Inf.

UNKNOWN. X - 1117.

REINTERRED U.S. MIL. CEM.

ST. AVOID.

PP - 10 - 115.

Kayfester of 25th Inf 1945

I the undersigned Harold Jean  
deunier from Colmar 4<sup>th</sup> Régiment  
in August 1945 in searching houses and in the  
forest of Altenstettler at the place called "Le Vorhof",  
we found 2 bodies of soldiers presumed Americans

Harold Jean  
16 Rue du Prie

(Kayfester of 14<sup>th</sup> Rég.)

UNKNOWN X- 1117

REINTERRED U.S. MIL. CEM.

ST. AVOLD.

PP - 10 - 115.

Kaysersberg le 25/3/1945

Jesoumigni Herold Jean  
Joseph demeurant au service du  
demeurage à Colmar H<sup>e</sup> Rhin  
déclaré qu'en mois d'Octobre 1945  
en checkant les champs de mines  
dans la forêt d'Armenachette au  
lieu dit "Le Vieux" non loin  
de la ferme 2 coups de soldats que nous  
avons trouvés dans un amoncellement.

Herold Jean  
16 Rue de Prés.  
Kaysersberg (Haut-Rhin)

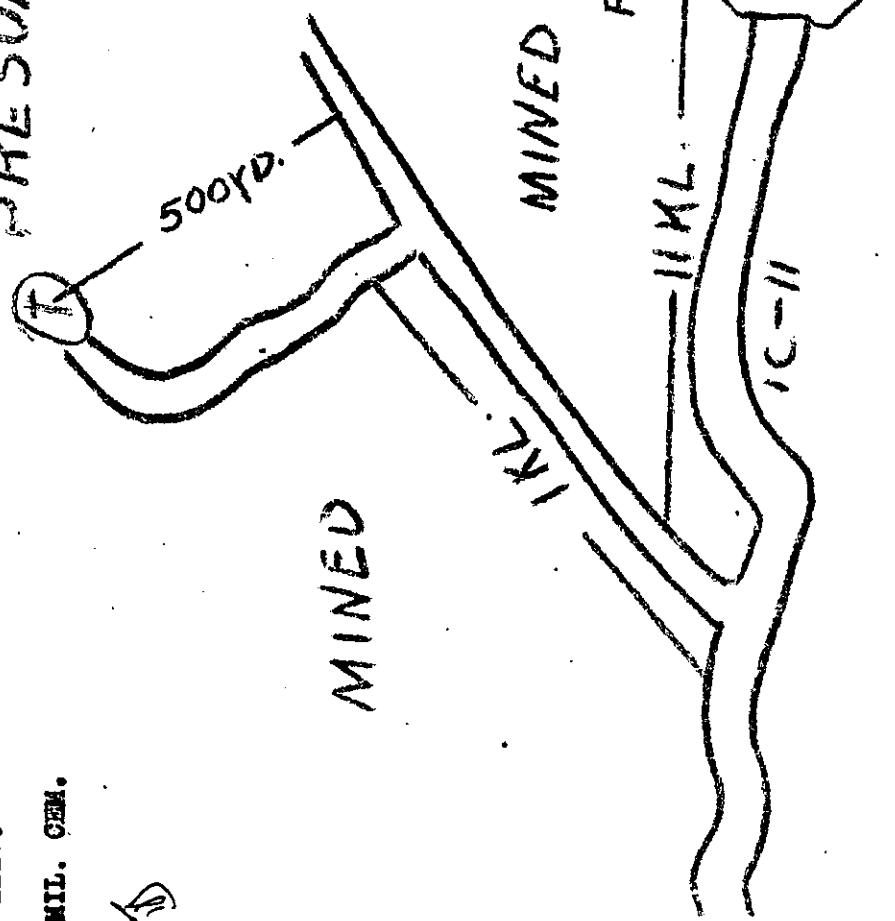
UNKNOWN X- 1117.

REINTERRED U.S. MIL. CEM.  
ST. AVOIS.  
PP - 10 - 115.

SECTION 2 & 1117.

BEDFREED U.S. MIL. CEM.  
ST. AVOID.  
PP = 10 ± 115. ↗

RESUME D' AMERICAIN



1:200 000 37 V-460-613  
STRASBURG BISSE

AGRC

FORM No. 11

Revised 5 January 1946

## CHECK LIST OF UNKNOWNS

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

Unknown X **X - 1117.**  
Cemetery **U.S. MIL. ST. AVOID.**  
Plot **PP** Row **10** Grave **115.**

1. Arrived at cemetery \_\_\_\_\_ (hour) (date) **Eur. Road Map Sht. #37**  
2. Place of death **Anverschwihr (Ht.-Rhin) France 1:200,000 (V-450610)**  
(name of closest town) (coordinates and letter Prefix, maps)  
(Sheet, scale and serials used)
3. Remains recovered or disinterred by **3rd MBU, 3049 CM GR Co.**  
(name and organization)
4. Evacuated to Cemetery by **UPP-536 CM Group**  
(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   | None | UTD   | None |
|--|------|-------|------|
| *Headgear <b>Helmet, steel, with liner.</b><br><small>(type)</small> | None | ?     | 1/3  |
| Cap, M.D. wool   | None | ?     | 1/3  |
| Raincoat <b>None</b>   | None | UTD   | None |
| Overcoat <b>Yes</b>  | None | UTD   | None |
| Jacket, Field <b>Yes</b>   | None | UTD   | None |
| Jacket, Combat <b>None</b>   | None | UTD   | None |
| Mackinaw <b>No</b>   | None | UTD   | None |
| Sweater <b>Yes, O.D.</b>   | None | UTD   | None |
| Jacket, HBT <b>Yes</b>   | None | UTD   | None |
| *Shirt, Wool OD <b>None</b>  | None | UTD   | None |
| Undershirt, Wool <b>Yes</b>  | None | UTD   | None |
| Undershirt, Cotton <b>None</b>                                       | None | UTD   | None |
| Trousers HBT <b>Yes</b>  | None | 94-31 | None |
| *Trousers, Wool OD <b>None</b>                                       | None | UTD   | None |

Belt, Web **None**  
Drawers, Wool **Xea** **UTD**  
Drawers, Cotton **None**  
Leggings, Wool **None** (Note unusual lacing)  
Socks, Cotton **Wool, 2 pr.** **UTD**  
\*Shoes **None** (type)  
Overshoes **None**  
Web Equipment **Xea** (Type) **leggings 2 pr. (no markings)**  
(Other item) **1 pr. gloves, wool O.D.**

(Other item)

\*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.

### Ground Forces

8. Description of Remains :

Age **UTD** Height **5'6"** Weight **166** Description of wounds **UTD**

\*Bandages or dressings **None** Scars **UTD**

(length, width, location)

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

Outstanding miles, warts or birthmarks **UTD**  
(yes-no; description, location)

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

Complexion **UTD**  
(light, med, dark, clear, pimples, pocks, freckles)

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

Hair **Black, 2", straight**  
(color, length, quantity, curly, wavy, straight, whorls, or definite parting).

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

Sideburns **UTD** (color, setting, shape) Mustache **UTD** (color, size, shape) Board or **UTD** (length, heavy)

Goatee **UTD** (light, color, extent)

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

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

Mouth **UTD** (large, medium, small) Lips **UTD** (small, large, full)

Teeth **Dull, medium, fair occlusion(only upper teeth recovered)** (white, size, unevenness, spacing, noticeable crowns, fillings, extract)

Chin **missing (UTD)** (prominent, receding, pointed, dimple, double)

Jaw **missing** (large, small, normal) Circumference of head in inches **Cap size: 7-1/8** (hat band)

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

Shoulders **UTD** (broad, straight, small, rounded) Arms **UTD** (length, muscular, color)

(extent and quantity of hair)

Hands **Small, small bones**

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

**Long** (Unusual characteristics of fingernails)

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

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

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

Herniplasty **UTD** (yes-no; location)

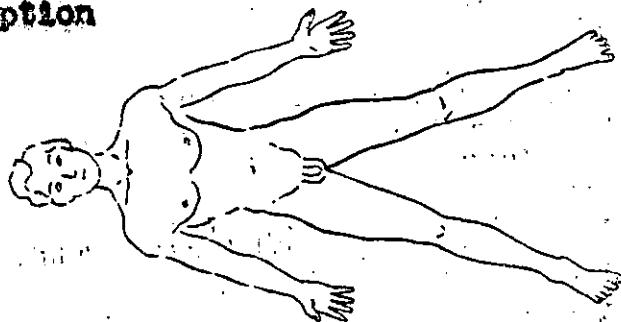
Legs **UTD** (inseam, muscular, knock-kneed, bowed, normal, quantity, color & extent of hair)

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

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

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

**Complete skeleton, with exception  
of mandible.**



10. Have fingerprints been placed on Report of Internment **No, UPD**  
(yes-no)

If not, explain **Unobtainable.**

11. Has tooth chart been prepared **Yes** If not, explain **Upper teeth only.**  
(yes-no)

12. Remarks **Remains (bones-no flesh) fully clothed. In advanced  
decomposed state. Ring, silver color, found on right ring  
finger--no marking. Ring(silver-looking)with initial "V" on  
right-hand 5th finger.**

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.

*William D. Lawson III*  
**William D. Lawson III**  
Officer's Name

**2nd Lt. Inf.**  
Rank Service

**539 Quartermaster Group**  
Organization

G. R. & E. DIV.  
OFFICE OF THE CHIEF QUARTERMASTER  
H.Q. COM. ZONE, ETOUSA

## TOOTH CHART

28 March 1946  
Date

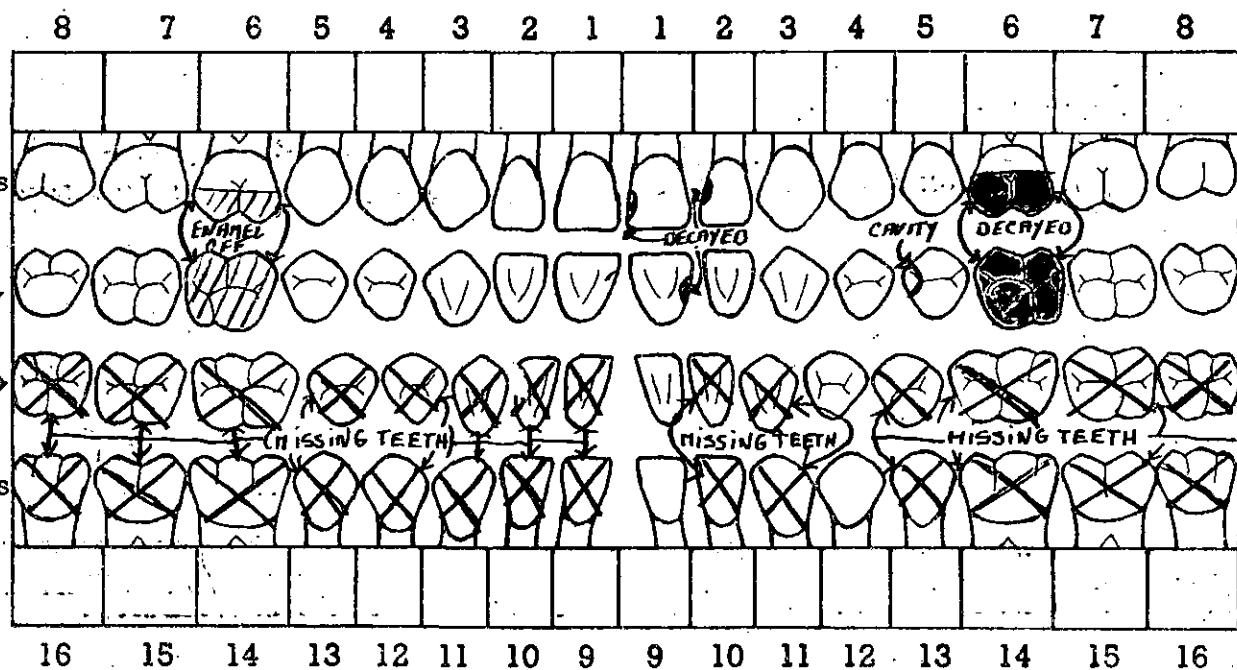
|           |            |         |      |            |
|-----------|------------|---------|------|------------|
| Unknown   | Z-1117.Unk | Unk     | Unk  | Unk        |
| Last Name | First      | Initial | Rank | Serial No. |

|         |      |              |
|---------|------|--------------|
| Unknown | Unit | Organization |
|---------|------|--------------|

|                               |               |                |
|-------------------------------|---------------|----------------|
| Ammerschwihr(Ht.-Rhin) France | Unknown       | Unknown        |
| (11 kilometers west of town)  | Date of Death | Cause of Death |

Right

Left



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.

Source: (1941-44) MEDICAL DEPARTMENT

2837 TOMB 82

Mr. John A. Tamm  
Signature of Officer or other person who prepared Tooth chart

William D. Lawson III  
2nd Lt. Inf.  
Verified by G. R. S. Officer

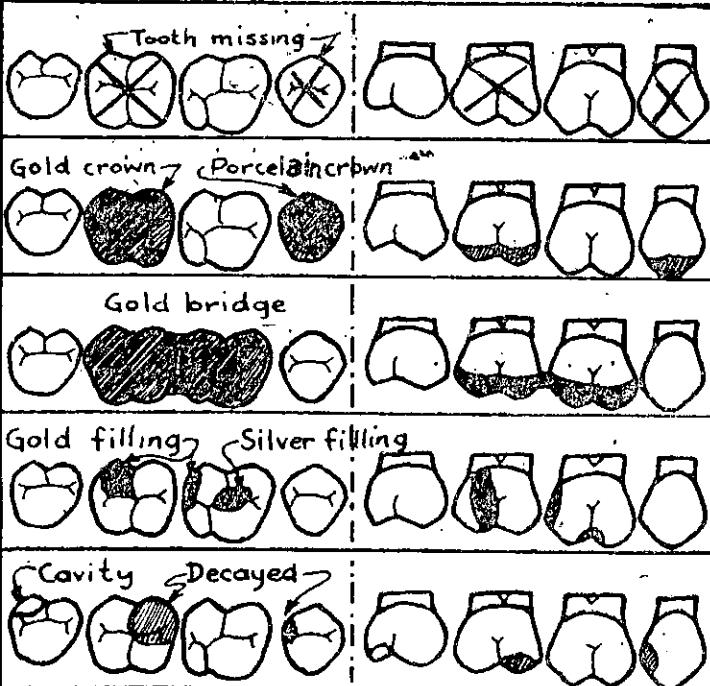
**MISSING TEETH...** All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :

**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

Teeth even and dull in color. RS out of occlusion towards the buccal. Mandible missing. Mouth shows no sign of ever receiving dental treatment.

USMC St Laurent

Plot: I, Row: 18, Gr: 13

## Date of Burial: 24/6/1950 DISINTERMENT DIRECTIVE

Verified by GRS Officer:

R. J. Rodriguez

R. J. Rodriguez, GRS USA

## SECTION A —

NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

3574 00000

DATE

15 01 48  
DAY MONTH YEAR

NAME

SERIAL NUMBER

RANK

ARM

DATE OF DEATH

UNKNOWN X-001117

Q

DAY MONTH YEAR

CEMETERY

DISPOSITION OF REMAINS

ST AVOLD - METZ

0 350 25 80  
CODE DIST. PT.

|      |     |       |         |  |                |
|------|-----|-------|---------|--|----------------|
| PLOT | ROW | GRAVE | COUNTRY |  | CAUSE OF DEATH |
| PP   | 10  | 115   | FRANCE  |  | 6              |

## SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

ST AVOLD, FRANCE ST LAURENT, FRANCE

NAME AND ADDRESS OF NEXT OF KIN

(BY ADMINISTRATIVE ORDER)

These remains are unidentifiable and are to be permanently interred. (Hq. AGRC-9 Jan 50)

## SECTION C — DISINTERMENT AND IDENTIFICATION

|                  |               |      |               |                  |
|------------------|---------------|------|---------------|------------------|
| NAME             | SERIAL NUMBER | RANK | DATE OF DEATH | DATE DISTINERRED |
| UNKNOWN X-001117 |               |      |               | 7 July 48        |

|   |              |         |          |   |
|---|--------------|---------|----------|---|
| IDENTIFICATION TAG ON<br><input type="checkbox"/> REMAINS<br><input checked="" type="checkbox"/> MARKER GRS | ORGANIZATION | UNKNOWN | RELIGION | IDENTIFICATION VERIFIED BY<br>ELIJAH H FIELDS, EMBALMER<br>NAME AND TITLE |
|---|--------------|---------|----------|---|

## SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

|                  |                                  |
|------------------|----------------------------------|
| NATURE OF BURIAL | CONDITION OF REMAINS             |
| MATTRESS COVER   | BODY COMPLETE.<br>SKELETAL FORM. |

OTHER MEANS OF IDENTIFICATION

## REPORT OF BURIAL FOUND WITH REMAINS

NAT  
FILE

RECORDS ANNOTATED

DATE 27 JUL 50

NAME R. T. Johns

BR. MEM. DIV.

REMAINS PREPARED AND PLACED IN CASKET

|                  |   |    |                           |
|------------------|---|----|---------------------------|
| DATE             | 12 July 48  | BY | ELIJAH H FIELDS, EMBALMER |
| CASKET SEALED BY | <i>Elijah H Fields</i><br>ELIJAH H FIELDS, EMBALMER |    |                           |

|  |   |  |
|--|---|--|
| CASKET BOXED AND MARKED                    | SHIPPING ADDRESS VERIFIED BY                      | All markings plates & tags verified by |
| DATE 12 July 48, ELIJAH H FIELDS, EMBALMER | <i>Bruce E Blair</i><br>BRUCE E BLAIR, 1st Lt QMC |  |

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

FINAL CASKETING BY

*Bruce E Blair*  
BRUCE E BLAIR, 1st Lt QMC*Bruce E Blair*  
BRUCE E BLAIR, 1 st Lt QMC, 7857 AGRC ZONE 3 HQ

SIGNATURE OF GRS INSPECTOR

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

**AIRMAIL**

QMGMT 314.6

GRS European

(St. Avoid) France

1st Ind

SUBJECT: Certificates of Unidentifiability of Remains  
Transmittal Letter #4671

Dept. of the Army, OQMG, Washington 25, D. C., 7 February 1950

TO: Chief, Registration Division, 7887 Graves Registration Detachment,  
APO 58, c/o Postmaster, New York, New York

This Office approves the classification of the Unknowns listed on  
basic communication as Unidentifiable with the exception of Unknown  
X-6010, which was suspended to your headquarters by radio 2 February 1950.

FOR THE QUARTERMASTER GENERAL:

T. H. METZ  
Lt. Colonel, QMC  
Memorial Division

Holden:cam  
Clements  
REB

JMN

TEC

X-111-  
6111-X  
JMN  
TEC

**AIRMAIL**

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 U S ARMY

RRE 200.2 - Unknowns X-1115 & X-1117 (St Avold)

23 January 1950

SUBJECT: Area Investigation Search Reports

293 unk France X-1115 (St Avold)

TO: 12 The Quartermaster General  
Washington 25, D. C.

ATTENTION: Memorial Division

1. Reference is made to radio, your office, WCL 33437 dated 18 January 1950.

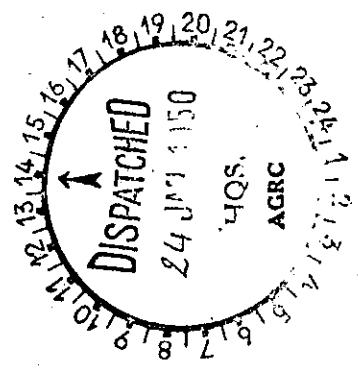
2. Inclosed herewith for your information are copies of Area Investigation Search Reports for Unknowns X-1115 and X-1117, USMC St. Avold, France.

FOR THE COMMANDING OFFICER:

2 Incls

1. AGRC Form #10 for X-1115  
2. " " " " X-1117

GAYLORD E. LUTZ  
1st Lt., QMC  
Assistant Adjutant



get back France X-1115 St. Amand

COMM. DEPT OF ARMY WA 5 50 m/s

UNCLASSIFIED

GRID REGISTRATION DIV  
7387 CECIC DIV  
PARIS FRANCE

DEFERRED

x

WCL : 33437

FROM LIMA

BOST AREA INVESTIGATION SEARCH REPTS FOR XRAY 1115 AND 1117 OF AVOID

Binkerd: cdt  
Clements  
REB

UNCLASSIFIED 181400Z

GRAYED

CHIEF CAPT BDRK DIV 73947 JAN 50  
293 GRS EUROPEAN

D A RIBBER  
CAPT CEC DIV 737

*get back France X-1115 St. Amand*

~~CMD DEPT OF ARMY WA H 30 m/s~~

**UNCLASSIFIED**

CHIEF REGISTRATION DIV  
7887 CHIEF DIV  
PARIS FRANCE

DEFERRED

*W CL 33437*  
**FROM CHIEF**

**HOST AREA INVESTIGATION SEARCH REPTS FOR XRAY 2115 AND 1117 ST AVOID**

Binkerd: cdt  
Clements  
REB

*X-1117 (St. Amand)*

**UNCLASSIFIED** 181400Z

**GRAVES**

CHIEF CAPT BERRY EXT 72947 JAN 50  
293 GRS EUROPEAN

D A RUMMER  
CAPT ENG HUB DIV

HEADQUARTERS  
 AMERICAN GRAVES REGISTRATION COMMAND  
 EUROPEAN AREA  
 APO 58 US ARMY

30 December 1949

Date

293  
Unk France X-1117 (St. Avold)  
 SUBJECT: Unidentifiable Remains

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

1. The records pertaining to Unknown X-1117, Plot PP,  
 Row 10; Grave 115, USMC St Avold, 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. 2648, dated 6-2-48. No  
 further information is available.

FOR THE COMMANDING GENERAL:

/s/  
 /t/

CASE reviewed by undersigned Members of the Board of Review:

Capt Edward F. PRICE, JR., O-1588236 QMC

Lt. Col. E. D. MULVANITY, O-359598 QMC

CWO Leodore GOUDREAU, W-2113434, USA

31 Jan 50 QMG  
 Unidentifiable from  
 information presently  
 available

J. B. Binkley  
 1st Bn 50  
 7th Dec 50  
 31 Jan 50

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 U S ARMY

RRE 293

30 December 1949

(Date)

## CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X- 1117, Plot PP,  
Row 10, Grave 115, USMC ST.AVOLD, France  
have been reviewed and it is the opinion of the Board of Review, this  
headquarters, that sufficient evidence is not available to establish  
the identity of the deceased concerned, therefore, these remains should  
be classified as unidentifiable.
2. Report of Reprocessing of remains was forwarded to the Office  
of The Quartermaster General by Transmittal Letter No. 2648, dated  
6-2-48.

## 3. Remarks:

See Case History attached.

1-31 Jan 50 QM MG  
Unidentifiable from  
information presently  
available

Case reviewed by undersigned Members of the Board of Review:

Col. H. P. HENRY, O-12589 QMC Lt. Col. E. D. MULVANITY, O-359596 QMC

Maj. Charles REYNOLDS, O-182639 TC Maj. Gerald SWARTHOUT, Sr., O-267451 CE

Capt. Edward F. PRICE, Jr., O-1588236 QMC 1st Lt. Frederick S. DAVID, O-1826041 CAV

CWO Frank GEER, W-2102925 USA Capt. Jack C. HAYES, O-1577297 QMC

Leodore Goudreau  
File  
Burkard  
31 Jan 51

Incl #3  
CWO Leodore GOUDREAU, W-21125

CASE HISTORY

UNKNOWN NO. X-1117

U.S. MILITARY CEMETERY

St Avold, France

(Location)

Unknown X-1117 was recovered from a heavily mined area in the vicinity of Ammerschwihr, (Haut-Rhin) France, by a French demining team. Date of death is Undetermined. Cause of death does not appear to be from a mine explosion as the remains is almost intact with the exception of the proximal end of the left humerus which appears to be the place of entry of a shell or other fragment.

The teeth in the maxilla which are the only teeth present, show no fillings which would make identification by teeth very difficult. Clothing found on the remains indicate Ground Forces.

An attempt to associate this unknown with the casualties in this area was made with negative results.

The association with Pfc Stanley D. WILMORE, 17147079 is negative as MD form 79 for Pfc WILMORE is negative by comparison with tooth chart for X-1117.

UNIDENTIFIABLE.

M.H.KAMONS.

*[Handwritten signature]*

## DISINTERMENT DIRECTIVE

41  
6

243 Emb X-1117 France (St Avoold)

|  |     |       |         |                        |                |
|--|-----|-------|---------|------------------------|----------------|
| SECTION A—<br>NAME AND BURIAL LOCATION OF DECEASED |     |       |         | DIRECTIVE NUMBER       | DATE           |
|  |     |       |         | 3574 00000             | 15 01 46       |
| NAME   |     |       |         | SERIAL NUMBER          | DAY MONTH YEAR |
|  |     |       |         | UNKNOWN X-001117       | 0 0 0          |
| CEMETERY   |     |       |         | DISPOSITION OF REMAINS |                |
| ST. AVOOLD - METZ                                  |     |       |         | 0 3502 00              |                |
| PLOT   | ROW | GRAVE | COUNTRY | CAUSE OF DEATH         |                |
| PP   | 10  | 115   | FRANCE  | 6                      |                |

## SECTION B—CONSIGNEE AND NEXT OF KIN

|   |                                 |
|---|---------------------------------|
| NAME AND ADDRESS OF CONSIGNEE                   | NAME AND ADDRESS OF NEXT OF KIN |
| ST. AVOOLD, FRANCE<br>(BY ADMINISTRATIVE ORDER) |                                 |

## SECTION C—DISINTERMENT AND IDENTIFICATION

|  |                         |  |               |                  |
|--|-------------------------|--|---------------|------------------|
| NAME                                       | SERIAL NUMBER           | RANK   | DATE OF DEATH | DATE DISTINERRED |
| REMAINS<br>MARKER                          | ORGANIZATION<br>UNKNOWN |  |               |                  |
| IDENTIFICATION TAG ON<br>REMAINS<br>MARKER | RELIGION                | IDENTIFICATION VERIFIED BY<br>NAME AND TITLE |               |                  |

## SECTION D—PREPARATION OF REMAINS FOR SHIPMENT

|                  |                      |
|------------------|----------------------|
| NATURE OF BURIAL | CONDITION OF REMAINS |
|------------------|----------------------|

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES

REMAINS PREPARED AND PLACED IN CASKET

|                         |    |                              |
|-------------------------|----|------------------------------|
| DATE                    | BY |                              |
| CASKET SEALED BY        |    | EMBALMER (Signature)         |
| CASKET BOXED AND MARKED |    | SHIPPING ADDRESS VERIFIED BY |
| DATE                    | BY |                              |

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

SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

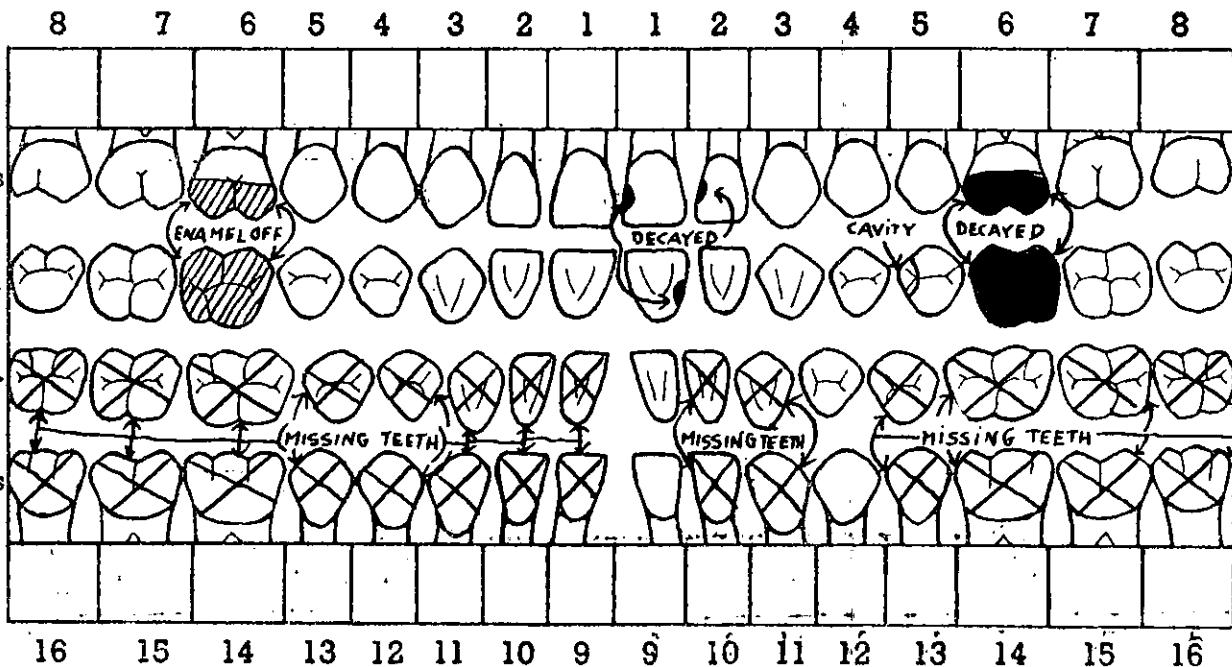
G. R. & E. DIV.  
OFFICE OF THE CHIEF QUARtermaster  
H.Q. COM. ZONE, ETOUSA

## TOOTH CHART

28 March 1946

Date

|                               |         |         |               |      |                |            |
|-------------------------------|---------|---------|---------------|------|----------------|------------|
| Unknown                       | X-1117. | Unk     | Unk           | Unk  | Unk            | Unk        |
| Last Name                     | First   | Initial |               | Rank |                | Serial No. |
| Unknown                       |         |         |               | Unit | Organization   |            |
| Ammerschwihr(Ht.-Rhin) France |         |         | Unknown       |      | Unknown        |            |
| (11 kilometers west of town)  |         |         | Date of Death |      | Cause of Death |            |
| Right                         |         |         |               | Left |                |            |

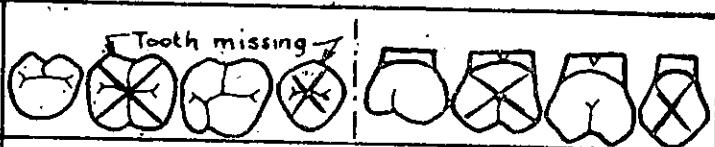


This "dental" chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), canines or fangs (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.

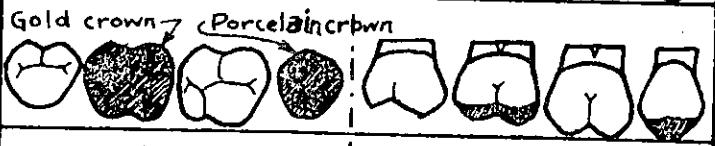
*John A. Trent*  
John A. Trent  
Signature of Officer or other person who prepared Tooth chart

*William D. Lawson III*  
William D. Lawson III  
2nd Lt., Inf..  
Verified by G. R. S. Officer

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



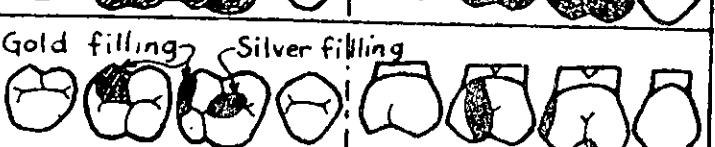
**CROWNED TEETH...** Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



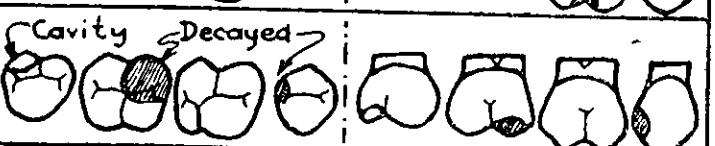
**BRIDGE WORK...** Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



**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

Teeth even and dull in color. R5 out of occlusion towards the buccal. Mandible missing. Mouth shows no sign of ever receiving dental treatment.

UNKNOWN X # 1117.

REINTERRED U.S. MIL. CEM.

ST. AVOID.

PP - 10 - 115.

MINED

UNKNOWN X # 1117.

RETIRED U.S. MIL. CEM.  
ST. AVOID.  
PP - 10 - 115. ~~6~~

PRESUMED AMERICAN



500RD.

MINED

MINED

W

AMERICAN HT-RHIN

11 RL.

1C-11

1:200,000 97 N. 460 E. 10  
STRONG BUCK BASE

ATT: REC'D DV

FOR  
CAS, CLEAR

28 March 1946

DATE

NAME Unknown Z-1117 RANK Unknown ASN UnknownORGANIZATION Unknown

MEANS OF IDENTIFICATION

(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 Unknown ASN Unknownb. ORGANIZATION Unknown

3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY

Unknown

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

A. Date of above burials \_\_\_\_\_ Common Graves? \_\_\_\_\_

4. Deleted \_\_\_\_\_

5. Name and type of cemetery None  
(Military or Civilian)

6. Map Coordinates of the Cemetery None

a. Town \_\_\_\_\_ Country \_\_\_\_\_

7. Give exact location in cemetery of the remains.

a. Section None Row \_\_\_\_\_ Grave \_\_\_\_\_b. Is sketch attached? Yes

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

a. Town Ammerschwihr (Ht.-Rhin) France Coordinates Eur. Rd. Map, Sht. #87 1:200,000 (V-460610)b. Is sketch attached? Yesc. Is area mined? Yes

9. How is the grave marked? No marks

Recd 1st Br. 30 Jan 1950

10. If grave is marked with cross, give the exact markings thereon

No markings

- a. From what source was this information obtained?  
(Identification tags, personal effects)
- b. By whom?

11. Where are the cemetery records? Town Hall  
(Town hall, cemetery, burgermeister's office)

- a. What information was obtained thereon?

- b. Where was the information obtained?
- c. By whom?

12. What is the date of death? Unknown

- a. Give basis Unobtainable

13. What is the cause of death? Unknown

- a. Give basis Maurice Guerbois' statement

14. What is the date of burial? Unknown

- a. Give basis

Ammerschwihr, Mur. Rd. Np., Alt. 87

15. What is the place of death? Ht.-Rhin, France Coords: E-200,000  
N-480816

- Give basis Maurice Guerbois' statement

Forest of Vorhof

16. Where were the remains found? 11 Kilometers Coords same as 15  
W.Ammerschwihr

- a. By whom? Casper Joseph

- b. Is sketch attached? Yes

17. Was a casket used? No Who furnished the casket?

Type of casket \_\_\_\_\_ How marked?

18. Who made the burial?

(Civilian, American Mil. or German Mil.)

- a. What are the names and addresses?

- b. Are certificates and statements attached?

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?

- 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. Warnings and/or name of plane

10. If grave is marked with cross, give the exact markings thereon

No markings

- a. From what source was this information obtained? \_\_\_\_\_  
(Identification tags, personal effects)  
b. By whom? \_\_\_\_\_

11. Where are the cemetery records? Town Hall  
(Town hall, cemetery, burgermeister's office)

- a. What information was obtained thereon? \_\_\_\_\_  
  
b. Where was the information obtained? \_\_\_\_\_  
c. By whom? \_\_\_\_\_

12. What is the date of death? Unknown

- a. Give basis Unobtainable

13. What is the cause of death? Unknown

- a. Give basis Maurice Guerbois' statement

14. What is the date of burial? Unknown

- a. Give basis \_\_\_\_\_ Anmerschwihr, Sur. Rd. 100, Hgt. 87

15. What is the place of death? Ht.-Rhin, France Coords. 1200,000 W-480810

- Give basis Maurice Guerbois' statement Forest of Vorhof

16. Where were the remains found? 11 Kilometers Coords. same as 15 W-Anmerschwihr

- a. By whom? Casper Joseph

- b. Is sketch attached? Yes

17. Was a casket used? No Who furnished the casket? \_\_\_\_\_

Type of casket \_\_\_\_\_ How marked? \_\_\_\_\_

18. Who made the burial? \_\_\_\_\_ (Civilian, American Mil. or German Mil.)

- a. What are the names and addresses? \_\_\_\_\_

- b. Are certificates and statements attached? \_\_\_\_\_

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? \_\_\_\_\_

- 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 \_\_\_\_\_ C  
b. Wreckage and/or name of plane \_\_\_\_\_

o. 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 the ground? \_\_\_\_\_
23. Did plane burn in the air? \_\_\_\_\_ On the ground? \_\_\_\_\_
24. What was the direction of the flight? \_\_\_\_\_
25. What was the civilian opinion regarding the destination of the plane? \_\_\_\_\_
26. Had bombs been released prior to the crash? \_\_\_\_\_
27. Does specific time and date of crash correspond with the 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? \_\_\_\_\_  
a. Give specific position in tank from which deceased was removed  
(Radio man, driver, asst driver or...front, side, or back)  
b. Near wreckage? \_\_\_\_\_
32. Location of destroyed tank 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) \_\_\_\_\_

If so, give complete and thorough results of the investigation's interrogation.

a. Are all certificates and statements of people who possessed knowledge of the case attached? \_\_\_\_\_

40. State the specific clues and evidence that were obtained in securing the name and facts regarding the above listed deceased \_\_\_\_\_

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 on body

a. Were identification tags found at the time of death? No

Where? \_\_\_\_\_ By whom? \_\_\_\_\_

Present disposition \_\_\_\_\_

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 abandoned.

b. Were personal effects found at the time of death? Unknown

Where? \_\_\_\_\_ By whom? \_\_\_\_\_

Present disposition \_\_\_\_\_

c. Was deceased identified by living members of the crew at the time of death? \_\_\_\_\_

d. Did Cemetery register or cross indicate the immunization shot? \_\_\_\_\_

42. Was deceased given first aid? Unknown If so, where? \_\_\_\_\_

By whom? \_\_\_\_\_ Are statements from the medical people attached? \_\_\_\_\_

43. Was deceased evacuated to a German hospital? No

Where? \_\_\_\_\_ Names of the 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? Skeleton (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? No By whom? \_\_\_\_\_

When? \_\_\_\_\_

48. Give full names, addresses, and information obtained from each person interviewed Georges Joseph, Maurice Guevrolle

Kaydronberg (Lt. - RIC) France

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 memorandum attached

(Use attached sheets, if necessary)

101 John Notaro

Signature of Interpreter

Rank

ASN

Organization

101 Stanley J. Mileozzi

Signature of Investigator

Pvt.

6666666

Rank

ASN

3049 CJ CH CO-AGRD

Organization

A True Copy:

William D. Dawson III  
William D. Dawson III  
2nd Lt. Engr.

48. Give full names, addresses, and information obtained from each person interviewed Geoper Joseph, Maurice Oberholz

Kaysersberg(Ht.-Thin) France

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 statements attached

(Use attached sheets, if necessary)

/O/ John Notaro

Signature of Interpreter

Rank

ASN

Organization

/I/ Stanley J. Wileczek

Signature of Investigator

Pvt.

33985622

Rank

ASN

3049 QM GR Co-AGRC

Organization

A True Copy:

William D. Lawson III  
William D. Lawson III  
2nd Lt. Inf.

## IDENTIFICATION CHECK LIST

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

N.R. # 217, dated 10 March 17

Unknown X-1117

Cemetery St. Avold, France

Plot PP Row 10 Grave 115

Date reprocessed:

1. Arrived at cemetery 5 Dec 17  
(Hour) (Date)
2. Place of death .....  
(Name of closest town) .....  
.....  
(Sheet, scale and serials used)
3. Remains recovered or disinterred by \_\_\_\_\_ and processed by: Mobile Team #1, 1st Zone  
(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<br>Markings       | Sizes | Indicate unusual markings<br>color, wear, tear, repairs, etc. |
|---------------------|----------------------------|-------|---|
| * Headgear          | Helmet and Liner<br>(Type) |       |   |
| Raincoat            | None                       |       |   |
| Overcoat            | Remnants of, wool          |       |   |
| Jacket, Field       | Remnants of                |       |   |
| Jacket, Combat      | None                       |       |   |
| Mackinaw            | None                       |       |   |
| Sweater             | Remnants of, wool CP       |       |   |
| Jacket, HBT         | None                       |       | o   |
| * Shirt, Wool OD    | Remnants of                |       |   |
| Undershirt, Wool    | None                       |       |   |
| Undershirt, Cotton  | None                       |       |   |
| Trousers, HBT       | Remnants of pants P.P.T.   |       |   |
| * Trousers, Wool OD | None                       |       |   |

FEB 20 1948  
Y

## IDENTIFICATION CHECK LIST

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

N.R. # 217, dated 19 March 47

Unknown X-1117

Cemetery St. Avold, France

Plot PP Row 10 Grave 115

Date reprocessed:

1. Arrived at cemetery 5 Dec 47  
(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 \_\_\_\_\_ and unprocessed by: Mobile Team #1, 1st Zone  
(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<br>Markings       | Sizes | Indicate unusual markings<br>color, wear, tear, repairs, etc. |
|---------------------|----------------------------|-------|---|
| * Headgear          | Helmet and Liner<br>(Type) |       |   |
| Raincoat            | None                       |       |   |
| Overcoat            | Remnants of, wool          |       |   |
| Jacket, Field       | Remnants of                |       |   |
| Jacket, Combat      | None                       |       |   |
| Mackinaw            | None                       |       |   |
| Sweater             | Remnants of, wool OD       |       |   |
| Jacket, HBT         | None                       |       |   |
| * Shirt, Wool OD    | Remnants of                |       |   |
| Undershirt, Wool    | None                       |       |   |
| Undershirt, Cotton  | None                       |       |   |
| Trousers, HBT       | Remnants of pants U.P.T.   |       |   |
| * Trousers, Wool OD | None                       |       |   |

FEB 20 1948  
Z

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

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

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

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

Teeth ..... **Teeth charted**  
 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw ..... **UTD** Circumference of head in inches ..... **21 3/4**  
 (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)  
 (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 ..... **Brown**  
 (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 **UTD**  
 (Nose, arms, legs, etc.)

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

Belt, web ..... None  
Drawers, wool ..... None  
Drawers, cotton ..... None  
Leggings, wool ..... Remnants of  
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? AGF

6. Description of Remains:

Est.  
Age ..... UTD Height ..... 5'12" 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 ..... Brown  
(Color, length, quantity, curly, wavy, straight, whorls, or definite parting)

Hair ..... UTD  
(Baldness, widow's peak, distinctive cutting or other characteristics)

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

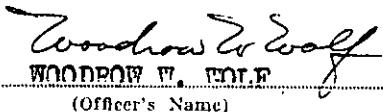
7. Have finger prints been placed on Report of Interment? No  
(Yes-no)

If not, explain Skeleton Form

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

9. Remarks Remains received in mattress cover, in skeletal form. No GFS tags.  
Burial bottle found. Clothing found in debris. Remains in burial box. Est.  
weight of remains: 20 Pounds. Fluoroscopic Report negative. No clothing  
marks found.

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.

  
WOODROW W. WOLF

(Officer's Name)

CAPT \_\_\_\_\_ CMC \_\_\_\_\_  
Rank Service

OPERATIONS OFFICER, 1ST FIRST ZONE  
(Organization)

## SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

R I G H T

HUMERUS.....34.0.....cm

RADIUS.....24.4.....cm

ULNA.....26.5.....cm

FEMUR.....46.0.....cm

TIBIA.....36.7.....cm

FIBULA.....36.5.....cm

L E F T

SKULL.....21 3/4.....

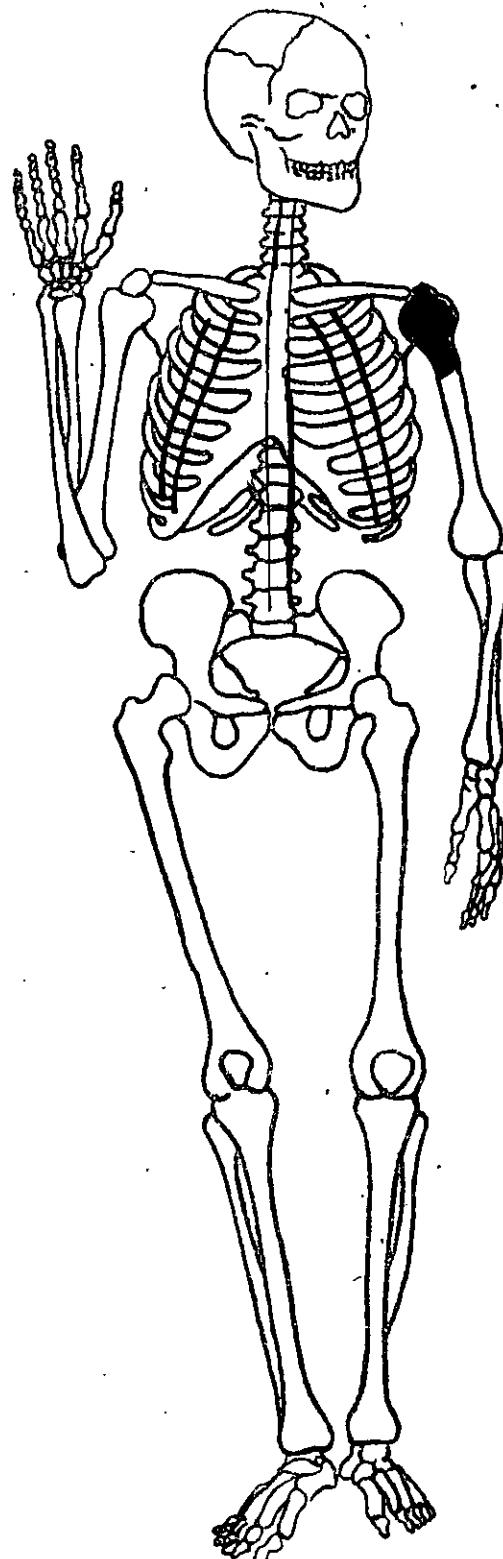


CHART "A"

Est. HEIGHT.....5'8 1/2.....

# TOOTH CHART

5 Dec 47  
Date

Unk X-1117

Unk

Unk

Last Name

First

Initial

Rank

Serial No.

Unit

Organization

Place of Death

Date of Death

Cause of Death

Right

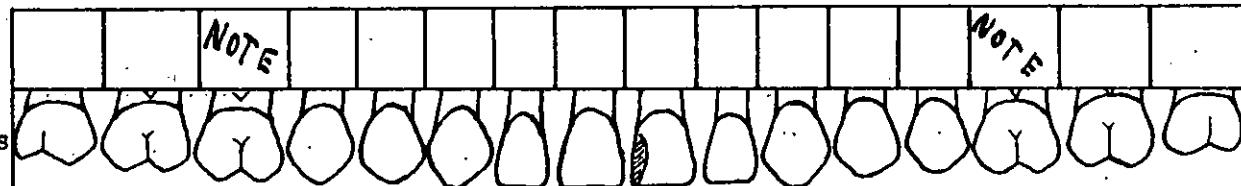
Left

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8

NOTE

NOTE

Side views



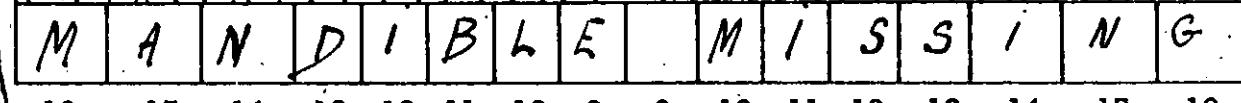
TOP

UPPER

VIEWS

LOWER

Side Views



M A N D I B L E M I S S I N G

16 15 14 13 12 11 10 9 9 10 11 12 13 14 15 16

*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.

IVOR J. FOSMO  
2/LT., INF.

/s/ Ivor J. Fosmo

Signature of Officer or other person who prepared Tooth chart

WOODROW W. WOLF  
CAPT GMC OPER.OFF.

*Woodrow Wolf*

Verified by G. R. S. Officer

|   |  |
|---|--|
| 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

P-6 has the entire facial, lingual, distal, and mesial surfaces clean of the enamel. No enamel present.

L-6 has rotted away to the roots.

Color : White

Size : Average

Alignment: Good

R-5 is malposed facially (Not too noticeable)

R-4 is malposed lingually(Noticeable)

R-2 is rotated 1/16 of a turn mesially.

AGRC

FORM No. 11

Revised 5 January 1946

## CHECK LIST OF UNKNOWNS

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

Unknown X X - 1117.  
Cemetery U.S., MIL., ST., AVOLD.  
Plot PP Row 10 Grave 115.

1. Arrived at cemetery \_\_\_\_\_ (hour) (date) Eur. Road Map, Sht. #87  
2. Place of death Ammerschwihr(Ht.-Rhin) France 1:200,000 (V-460610)  
(name of closest town) (coordinates and letter Prefix, maps)  
  
(Sheet, scale and serials used)
3. Remains recovered or disinterred by 3rd MBU, 3049 QM GR Co.  
(name and organization)
4. Evacuated to Cemetery by UPP-535 QM Group  
(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               |                            |      |       |      |
|--------------------|----------------------------|------|-------|------|
| *Headgear          | Helmet, steel, with liner. |      |       |      |
|                    | (type)                     |      |       |      |
| Cap,               | O. d. wool                 | None | 7 1/8 | None |
| Raincoat           | None                       |      |       |      |
| Overcoat           | Yes                        | None | UTD   | None |
| Jacket, Field      | Yes                        | None | UTD   | None |
| Jacket, Combat     | None                       |      |       |      |
| Mackinaw           | No                         |      |       |      |
| Sweater            | Yes, O.D.                  | None | UTD   | None |
| Jacket, HBT        | Yes                        | None | UTD   | None |
| *Shirt, Wool OD    | None                       |      |       |      |
| Undershirt, Wool   | Yes                        | None | UTD   | None |
| Undershirt, Cotton | None                       |      |       |      |
| Trousers HBT       | Yes                        | None | 34-31 | None |
| *Trousers, Wool OD | None                       |      |       |      |

Belt, Web None

Drawers, Wool Yes UTD

Drawers, Cotton None

Leggins, Wool None (Note unusual lacing)

Socks, Cotton Wool, 2 prs. UTD

\*Shoes None (type)

Overshoes None

Web Equipment Yes (Type) leggings 1 pr. (no markings)

(Other item) 1 pr. gloves, wool O.D.

(Other item)

\*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

Ground Forces

8. Description of Remains:

Age UTD Height 55in Est. Weight 166# Est. Description of wounds UTD

Bandages or dressings None Sears UTD (length, width, location)

Tattoos UTD  
(Number, location -- illustrate on sep, page)

Outstanding miles, warts or birthmarks UTD  
(yes-no ; description, location)

Sunburn or tan, other than hands & face UTD

Complexion UTD  
(light, med., dark, clear, pimply, pock, freckles)

Build UTD  
(large, fat, thin, muscular)

Hair Black, 2", straight  
(color, length, quantity, curly, wavy, straight, whorls, or definite parting).

Hair UTD  
 (baldness, widow's peak, distinctive cutting or other characteristics).

Sideburns UTD  
 (color, setting, shape)

Mustache UTD  
 (color, size, shape)

Board or  
 (length, heavy)

Goatee UTD  
 (light, color, extent)

Eyes UTD  
 (color, setting, shape)

Eyebrows UTD  
 (color, bushiness, extent across nose)

Nose UTD  
 (size, shape, straight)

Ears UTD  
 (size, set close to or far from head)

Mouth UTD  
 (large, medium, small)

Lips UTD  
 (small, large, full)

Teeth Dull, medium, fair occlusion (only upper teeth recovered)  
 (white, size, unevenness, spacing, noticeable crowns, fillings, extract).

Chin missing (UTD)  
 (prominent, receding, pointed, dimple, double)

Jaw missing  
 (large, small, normal)

Circumference of head in inches Cap size: 7-1/8  
 (hat band)

Neck UTD  
 (size, length, short, normal, wrinkled)

Larynx UTD  
 (prominent, normal)

Shoulders UTD  
 (broad, straight, small, rounded)

Arms UTD  
 (length, muscular, color)

(extent and quantity of hair)

Hands Small, small bones

Fingers Short, short bones  
 (short, thick, long, slender, size of knuckles, missing fingers or joints)

Long  
 (Unusual characteristics of fingernails)

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

Back UTD  
 (quantity & extent of hair)

Waist UTD  
 (size of navel, appendectomy, amount)

UTD  
 (quantity & color of hair)

Circumcision UTD  
 (yes-no)

Pubic hair UTD  
 (color)

Hernioplasty UTD  
 (yes-no; location)

Legs UTD  
 (inseam, muscular, knock-kneed, bowed, normal, quantity, color & extent of hair)

Feet UTD ..... Toes UTD .....

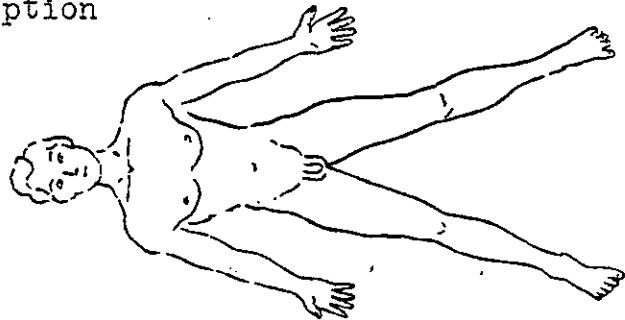
(size, corns, callouses, flat)

(slender, straight, crooked, overlap)

Evidence of healed fractures None  
(nose, arms, legs, etc.)

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

Complete skeleton, with exception  
of mandible.



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

If not, explain Unobtainable.

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

12. Remarks : Remains (bones-no flesh) fully clothed. In advanced  
decomposed state. Ring, silver color, found on right ring  
finger--no marking. Ring(silver-looking)with initial "V" on  
right-hand 5th finger.

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.

*William D. Lawson III*  
William D. Lawson III  
Officer's Name

2nd Lt. Inf.  
Rank Service

535 Quartermaster Group  
Organization

RESTRICTED

Trans Letter 1857

WD QMC FORM 1042  
(Rev. 1 Apr. 1945)  
(Supersedes GRS Form 1)REPORT OF INTERMENT  
(AR 30-1810 and AR 30-1815)DATE OF REPORT  
29 March 1946

|  |  |  |   |  |                  |                  |
|--|--|--|---|--|------------------|------------------|
| Imprint Identification Tag If Possible.<br>DO NOT TYPE   |  | Section 1.—IDENTIFICATION.   |   |  |                  |                  |
|  |  | NAME (Last, first, middle initial)   |   | SERIAL NO.                                     |                  |                  |
|  |  | UNKNOWN-X-1117   |   | Unknown  |                  |                  |
| GRADE  |  | ORGANIZATION   |   | BRANCH OF SERVICE                              |                  |                  |
| Unknown  |  | Unknown  |   | Ground Forces                                  |                  |                  |
| RACE   |  | RELIGION   |   | IF OTHER THAN U. S. DEAD. GIVE NAME OF COUNTRY |                  |                  |
| White  |  | Unknown  |   |  |                  |                  |
| PLACE OF DEATH<br>Ammerschwihr (Ht.-Rhin)<br>France (11 kilometers<br>West of town)  |  | CAUSE OF DEATH<br>Unknown  |   | DATE OF DEATH<br>Unknown                       |                  |                  |
| EMERGENCY ADDRESSEE (Name, relationship, and address)<br>Unknown   |  |  |   |  |                  |                  |
| IDENTIFICATION TAGS FOUND ON BODY<br>(U. S. or none)<br>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)<br>Yes  |  |  |   |  |                  |                  |
| LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME<br>None  |  |  |   |  |                  |                  |
| Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.   |  |  |   |  |                  |                  |
| NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY<br>U. S. Military Cemetery (Q-260584) - St. Avold, France  |  |  |   |  |                  |                  |
| DATE OF BURIAL<br>29 March 1946  | HOUR<br>1530   | BURIED IN (Shroud, blanket, or name of other)<br>Casket  | TYPE OF GRAVE MARKER<br>Temp. Wooden Cross  | PLOT NO.<br>PP                                 | ROW NO.<br>10    | GRAVE NO.<br>115 |
| WAS THIS A REBURIAL?<br>(Yes or no)<br>Yes   | IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE<br>Ammerschwihr (Ht.-Rhin) France<br>Eur. Rd. Mp., Sht. #87 1:200,000 (V-460610)<br>Isolated |  |   | PLOT NO.<br>—                                  | ROW NO.<br>—     | GRAVE NO.<br>—   |
| TYPE OF RELIGIOUS CEREMONY<br>General Ceremony   | PERSON CONDUCTING BURIAL RITES<br>Ch. Lynn Wendland, Capt.   |  | IF IDENTIFICATION TAGS NOT USED; DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY<br>One (1) copy WD Q MC Form 1042 in burial bottle buried with remains. |  |                  |                  |
| IDENTIFICATION TAG BURIED WITH BODY (Yes or no)<br>No  | IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)<br>No  |  |   |  |                  |                  |
| BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)<br>REESE, Luther C.   |  | RANK<br>F/O  | SERIAL NO.<br>T-61366   | ORGANIZATION<br>Air Force                      | GRAVE NO.<br>114 |                  |
| BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)<br>UNKNOWN-X-1118  |  | RANK   | SERIAL NO.  | ORGANIZATION                                   | GRAVE NO.<br>116 |                  |
| SIGNATURE OF PERSON PREPARING REPORT<br>William D. Lawson III, 2nd Lt.-Inf.<br>535 Quartermaster Group   |  | SIGNATURE OF OFFICER VERIFYING REPORT<br>Ralph M. Staetzer, Major-Inf.<br>Third Field Command (AGRC)       |   |  |                  |                  |
| 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

## RESTRICTED

## Section 3. UNIDENTIFIED REMAINS.

LEFT  
LITTLE FINGERLEFT  
RING FINGERLEFT  
MIDDLE FINGERLEFT  
INDEX FINGERLEFT  
THUMBRIGHT  
THUMBRIGHT  
INDEX FINGERRIGHT  
MIDDLE FINGERRIGHT  
RING FINGERRIGHT  
LITTLE FINGER

## 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.

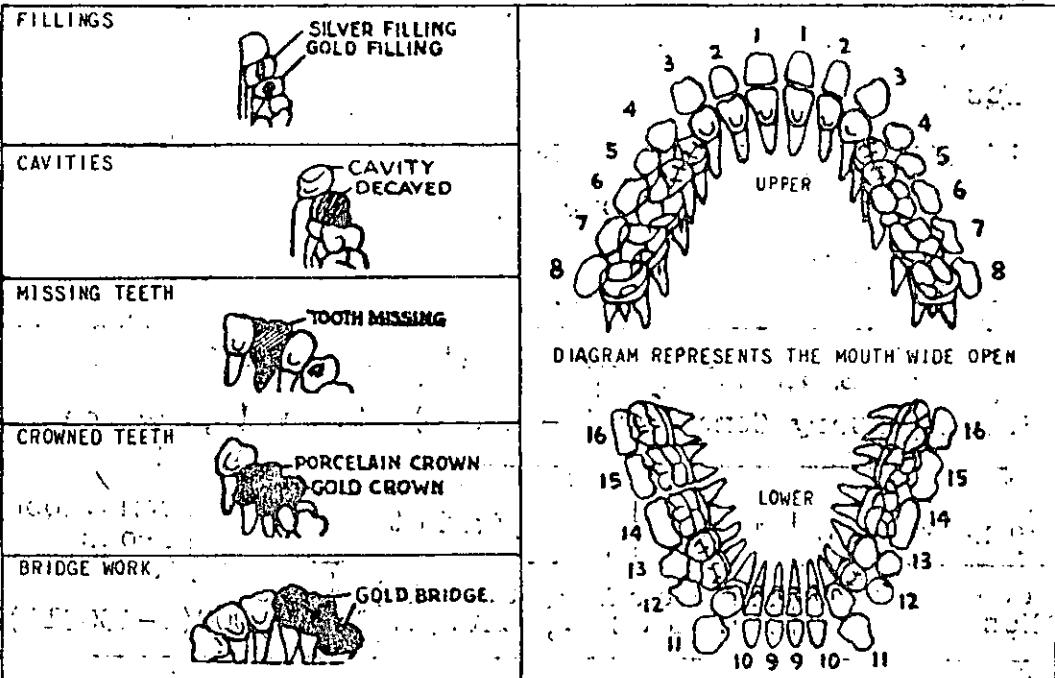
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.

|                |                |               |               |                               |
|----------------|----------------|---------------|---------------|-------------------------------|
| HEIGHT<br>Est: | WEIGHT<br>Est: | COLOR OF EYES | COLOR OF HAIR | BIRTHMARKS, SCARS, OR TATTOOS |
| 5'9"           | 166#           | UTD           | Black         | UTD                           |

|                       |               |   |
|-----------------------|---------------|---|
| WEAPON-AND SERIAL-NO. | LAUNDRY MARKS | WHERE BODY WAS BURIED OR FOUND                                    |
| None                  | None          | Ammerschwihr (Ht. Rhin)<br>France (11 Kilometers<br>West of town) |

## OTHER IDENTIFICATION CLUES

See attached statements



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

## REMARKS:

Attached:

Form #11 "Check List of Unknowns"

Form #1-A "Tooth Chart"

Too badly decomposed for fingerprints.  
(Entire remains recovered with exception of mandible)

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