

CAMBRIDGE
 PLOT B ROW 3 GRAVE 33
 DATE OF BURIAL: 11 July 1951
 VERIFIED BY:
 Robert W. Cansel
 ROBERT W. CANSEL, 1st Lt QMC
 GRS OFFICER
 SECTION A -
 NAME AND BURIAL LOCATION OF DECEASED

DISINTERMENT DIRECTIVE

293 unk H. Avold X-1790

DIRECTIVE NUMBER: 3574 00000
 DATE: 15 01 48
DAY MONTH YEAR

NAME: UNKNOWN
 SERIAL NUMBER: X-001790
 RANK: [blank]
 ARM: J
 DATE OF DEATH: [blank]
DAY MONTH YEAR

CEMETERY: ST AVOLD - METZ
 DISPOSITION OF REMAINS: 16016
~~3503~~ 80
CODE DIST. PT.

PLOT: 000 ROW: 3 GRAVE: 28 COUNTRY: FRANCE
 CAUSE OF DEATH: 6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE: ~~ST. AVOLD, FRANCE~~
 CAMBRIDGE, ENG.
 (BY ADMINISTRATIVE ORDER)
 NAME AND ADDRESS OF NEXT OF KIN: X-1790 approved unidentifiable per authority
 ltr OQMG dated 11/5/51

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME: UNKNOWN SERIAL NUMBER: X-001790 RANK: [blank] DATE OF DEATH: [blank] DATE DISINTERRED: 12 July 1948
 IDENTIFICATION TAG ON: REMAINS MARKER ORGANIZATION: UNKNOWN RELIGION: [blank] IDENTIFICATION VERIFIED BY: MILLAR/H. Mc WHORTER
Embalmer NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: O D Uniform CONDITION OF REMAINS: All major bones fractured or missing, except left Humerus - skeletal form - no flesh.

OTHER MEANS OF IDENTIFICATION: Report of Burial with Remains

MINOR DISCREPANCIES: Extra Bones removed as per OI.55 given CIL # 3848

REMAINS PREPARED AND PLACED IN CASKET: DATE: 15 October 1948 BY: MILLAR/H. Mc WHORTER

CASKET SEALED BY: MILLAR/H. Mc WHORTER EMBALMER (Signature): Millard H. Mc Whorter
 MILLAR/H. Mc WHORTER

CASKET BOXED AND MARKED: DATE: 15 Oct 48 BY: MILLAR/H. Mc WHORTER and tags verified by: RAFAEL T. RUIZ, 1st Lt., FA, 7857 ACGIC

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: RAFAEL T. RUIZ, 1st Lt., FA, 7857 ACGIC, Zone III, HQ
 SIGNATURE OF GRS INSPECTOR

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.
 CONSIGNEE & CODE CHANGED BY 7887 GRAVES REG. DET.

RECORDS ANNOTATED
 DATE: 22 July 51
 NAME: [Signature]
 BR. MEM. DIV.

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC ST AVOLD, FRANCE		TO OIC NEUVILLE, BELGIUM	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER CPL JOHN A MOUNTFORD 39107628	
SIGNATURE OF SHIPPER <i>[Signature]</i> FRANK B CALLAGHAN 1st Lt PA	DATE 28 Oct 49	SIGNATURE OF RECEIVER	DATE

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>[Signature]</i>	DATE	SIGNATURE OF RECEIVER	DATE

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE (BY ADMINISTRATIVE ORDER)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER ST AVOLD FRANCE	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

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

7. SHIPPED

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

AIR MAIL

CLASS 314.6
1st European

3d Incl

SUBJECT: Certification of Unidentifiability
Transmittal Letter #6254

Department of the Army, GAGM, Washington 25, D. C., 22 June 1951

To: Commanding Officer, 7887 Graves Registration Detachment,
APO 757, c/o Postmaster, New York, New York

1. This Office approves the classification of Unknown L-971,
Grand Pully, listed in basic communication, as Unidentifiable.

2. Unidentifiable classification of Unknowns L-1754 and L-1750,
St. Avois, France, was approved and your headquarters notified by
letter, this Office, dated 11 May 1951, copy enclosed.

FOR THE QUARTERMASTER GENERAL:

- 1 Incl
- 1st European Incl 1
- Added 1 Incl
- 2. Copy ltr dated 11 May 51

BENJAMIN B. KING
Lt Col USA
Memorial Division

JAN

Coffey/can
Foy
cc-Administrative Section

293 264 51 2000 X-1799

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

OSM 293

OSM European

(Ident)

fe

11 May 1951

SUBJECT: Identification of World War II Deceased

TO: Commanding Officer
7887 Graves Registration Detachment
APO 757, c/o Postmaster
New York, New York

1. Reference is made to Transmittal Letter No. 6254, dated 19 April 1951, forwarding Certificates of Unidentifiability of Remains.
2. This Office approves the classification of Unknowns X-1754 and X-1790, interred in the United States Military Cemetery, St. Avold, France, as Unidentifiable.

FOR THE QUARTERMASTER GENERAL:

Cy furnished: Adm Sec
Jeffrey/rar
Foy

THOMAS H. OOK
Capt QMG
Memorial Division

293 - 7887 - 1990 (H. Oook) - *Thomas*

Handwritten marks at the bottom of the page.

AIRMAIL

ORIENT 289 514, C

1st Ind

GNS European

SUBJECT: Certificates of Unidentifiability
Transmittal Letter #6254

Department of the Army, DAGE, Washington 25, D. C., 1 May 1951

TO: Commanding Officer, 7887 Graves Registration Detachment,
APO 757, c/o Postmaster, New York, New York

1. This Office approves the classification of the following
Unknowns listed in basic communication, as Unidentifiable:

Unknown X-38	St. Laurent, France
Unknown X-8523	Neuville-en-Condroz, Belgium
Unknown X-8527	Neuville-en-Condroz, Belgium

2. Paragraph 3 of the Anthropological Report for Unknown X-38, St. Laurent, indicates the casket and shipping case are tagged as Unknown X-38, IEMC St. Laurent, but the remains are tagged "Thomas D. Mendezhall, Tec 5, 35405344". It is requested that these remains be designated Unknown X-38. Unknown X-34, St. Laurent, has been identified as Tec 5 Thomas D. Mendezhall, 35405344.

3. This Office has no record of Unknown X-571, Grand Faily, France. It is requested that Report of Burial be forwarded as soon as possible.

4. Unknowns X-1754, and X-1790, St. Avold, will be the subject of a later communication.

FOR THE JAGT MASTER GENERAL:

6 Incls
w/d

THOMAS K. C. X
Capt JMC
Memorial Division

Cy furnished: Adm Sec
Coffey/rar
Foy

293-4444-1790-200-11200 JM

AIRMAIL

71. 6254

HEADQUARTERS
7887 GRAVES REGISTRATION DETACHMENT
OPERATIONS DIVISION
APO 57 (Liege) US ARMY

GROP 200.2

293 unk St. Avold X-1790

16 April 1951

me

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X - 1790, Plot 000, Row 3 Grave 28, USMC St. Avold, France, have been reviewed in accordance with par 159, SR 830-110-5, DA dated 3 March 1949, and it is the opinion of the Board of Review appointed by par 4, SO No 32, this headquarters, dated 10 April 1951, that sufficient evidence is not available to establish the identity of the deceased concerned, and it is recommended these remains be classified as unidentifiable.

2. Report of reprocessing of remains was forwarded to the Office of The Quartermaster General, by Transmittal Letter No. 4074, dated 30 June 1949.

3. Remarks: **See attached narrative.**

Lt Col James C. MacFARLAND, O-1576321, QMG Maj George GUNDERMAN, Jr, O-1289071, QMG

Capt Clyde W. STEINBERG, O-1040311, QMG

Alton Lawson
Capt Allan L. LAWSON, O-1286075, QMG

Robert W. Gansel
1/Lt Robert W. GANSEL, O-1599085, QMG

John A. Boutin
2/Lt John A. BOUTIN, O-947298, QMG

T/L #6254
Received *27d 19 Apr 51* OQMG
Not identifiable from
information presently
available

FILE
11 May 1951
Di Jeffrey
Identification Branch

CASE HISTORY

Unknown X-1790

USMC St Avold, QQQ-3-28

UNIDENTIFIABLE

Remains of X-1790 were originally disinterred from grave # 52, Cemetery of Mannheim, Germany. Cemetery Register listed subject deceased as "Golden - American" who was buried on 10 November 1944. S/Sgt Dale W. GOLDEN, 15 104 995, was a crew member of A/C # 43-38087 which was downed in vicinity of Mannheim on 5 November 1944. However, it is noted the remains disinterred from the adjacent grave (# 51) were identified as those of S/Sgt Golden. Remaining casualties were accounted for from subject aircraft.

A small segment of right maxilla found with X-1790 was compared with available dental records of the deceased reported interred in Mannheim cemetery and no definite association could be established. Processing revealed insufficient identifying media was found with X-1790 to aid in establishing the identity of subject Unknown.

In view of the above negative findings, it is recommended that Unknown X-1790 be classified Unidentifiable.

A. M. Swetnick
A. M. SWETNICK
5 April 1951

amb

6

DISINTERMENT DIRECTIVE

293 Unknown France X-1790 (St Avold)

SECTION A - NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER 2274 0000	DATE 12 01 90 DAY MONTH YEAR	
NAME UNKNOWN - 001790		SERIAL NUMBER	RANK	ARM
CEMETERY ST AVOLD - METZ		DATE OF DEATH DAY MONTH YEAR		DISPOSITION OF REMAINS 3503 00
PLOT 000	ROW 3	GRAVE 01	COUNTRY FRANCE	CAUSE OF DEATH

SECTION B - CONSIGNEE AND NEXT OF KIN

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

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	ORGANIZATION UNKNOWN	RELIGION	IDENTIFICATION VERIFIED BY 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.

[Handwritten signature and circular stamp]

SIGNATURE OF GRS INSPECTOR

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

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN X-1790				2. DATE OF REPORT 24 June 1949	
3. NAME OF CEMETERY USMC, ST. AVOLD	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	QQQ	3	28	DISINTERMENT ---	REINTERMENT ---

PHYSICAL DESCRIPTION

8. ESTIMATED weight age 30-35	9. ESTIMATED HEIGHT 5'10 1/8"	10. COLOR OF HAIR None found	11. RACE U.T.D.
---	---	--	---------------------------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

MORTUARY PLATES

13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES

None

14. WAS BODY BURNED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT EXTENT? Lower extremities
---	---

15. WAS BODY MANGLED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT EXTENT? See skeletal blackout chart
--	---

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

None noted

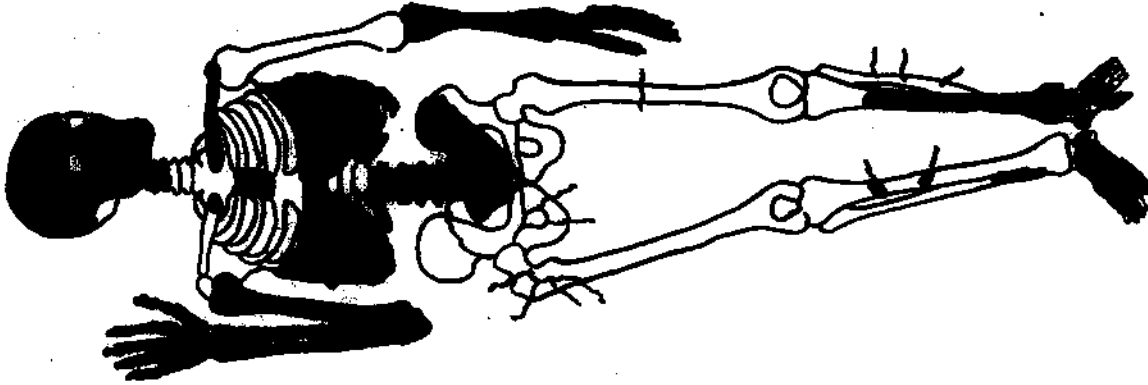
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

None

Incl #0

X-1790 (Before)

19. BLACK OUT PARTS OF BODY NOT RECORDED



SEE FINAL CHART

20.

MASS BURIAL CERTIFICATE (IF APPLICABLE)
(Wherein segregation in whole or parts is impossible)

I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF _____ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS: NUMBER

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

SEE FINAL CHART

I CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS OF DECEASED AND THAT ALL RESULTING INFORMATION HAS BEEN RECORDED TO THE BEST OF MY KNOWLEDGE

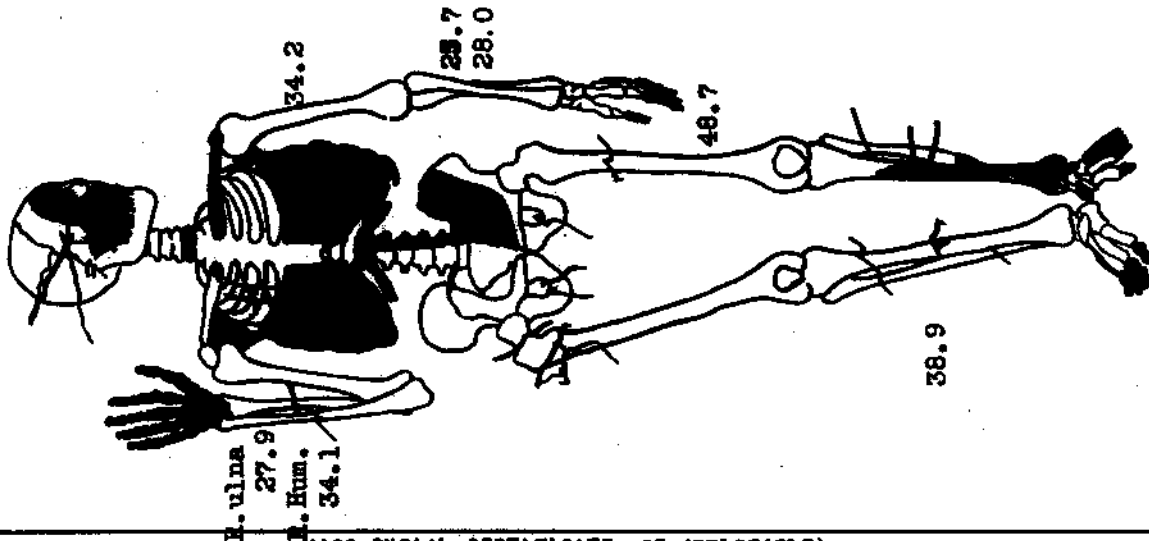
TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

SIGNATURE

19. BLACK OUT PARTS OF BODY NOT RECORDED

I-1790 (Final)

19 Vertebrae present



Est. Height 5' 10 1/8"

20.

MASS BURIAL CERTIFICATE (IF APPLICABLE)
(Wherein segregation in whole or parts is impossible)

I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF _____ DECEMENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS: NUMBER

 SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

REMAINS PREVIOUSLY PROCESSED BY F.O.S. AND RECEIVED DISARTICULATED WITH A SMALL AMOUNT OF DECOMPOSED FLESH.
 TEETH RECOVERED AND CHARTED
 NO CLOTHING
 EST WT. REPROCESSED REMAINS: 25 Lbs
 EST. HEIGHT: 5' 10 1/8"
 EST. AGE: 30-35 years
 HAIR: None found

I CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS OF DECEASED AND THAT ALL RESULTING INFORMATION HAS BEEN RECORDED TO THE BEST OF MY KNOWLEDGE

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

SIGNATURE

/s/ WESLEY A. HEEP

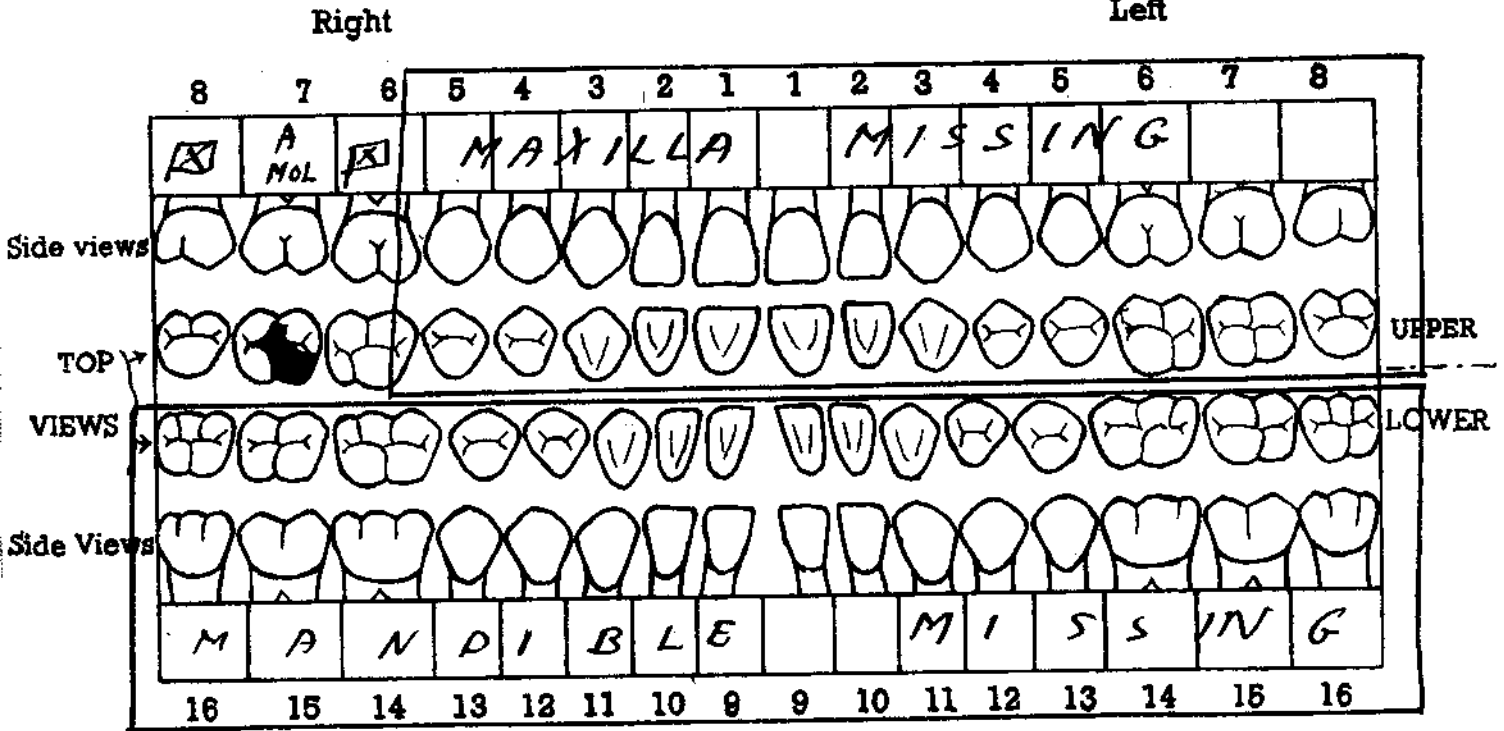
E.O.# 2098 (T.P.)

USMC ST. AVOLD
X - 1790
QQQ - 3 - 28

TOOTH CHART

24 June 1949
Date

Last Name	First	Initial	Grade	Serial No.
Unit			Organization	
Place of Death		Date of Death	Cause of Death	



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.

A CERTIFIED TRUE COPY

SEE REVERSE

George L. Freeman
 GEORGE L. FREEMAN
 1ST.LT. CMC

/s/ WESLEY A. NEEP
 Signature of Officer or other person who prepared Teeth chart

Verified by G. R.C. Officer

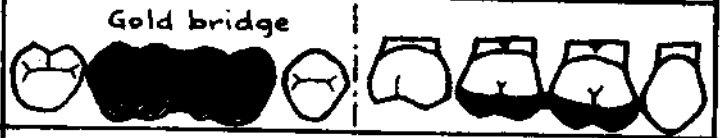
MISSING TEETH... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



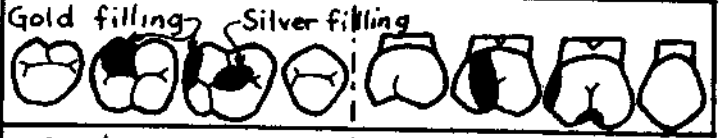
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



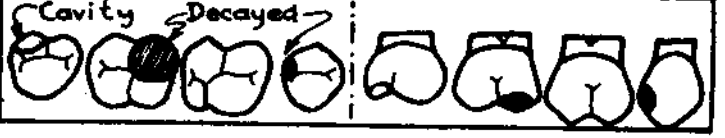
BRIDGE WORK... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



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

ONE TOOTH ONLY WITH PARTIAL alveoli of adjoining teeth
SIZE - Average
COLOR - Ivory
WEAR - Slight
POSTHUMOUSLY missing -R6 and 8

RADIO

AGRC BALL

MC IN NO. 52613

REURAD WCL 26981 REMAINS OF SECOND LT JOSEPH P BAHNKEN , O#769243 and T/Sgt HARRY PINES, 12153292 WERE INTERRED IN PLOT D, ROW 42, GRAVE 7 AND PLOT G, ROW 17, GRAVE 89 PERMANENT USMC ST AVOLD 28 DECEMBER 1948 and 22 FEBRUARY 1949 RESPECTIVELY. REMAINS OF S/SGT EDWARD P. CLEMENTS , 31291089 WERE SHIPPED USA ABOARD USAT BARNEY KIRSCHBAUM WHICH DEPARTED 11 DECEMBER 1948. REQUEST FURTHER INSTRUCTIONS IF ANY.

*Reply to by radio
13 Apr 49
Informal c/o Mr. Pinna
would follow*

CHECK LIST OF UNKNOWN

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

Unknown X 1790
 Cemetery Wannheim
 Plot _____ Row _____ Grave 52

1. Arrived at cemetery 14⁰⁰ 13, Febr. 1946
 (Hour) (date)
2. Place of death unk.
 (Name of closest town) (coordinates and letter Prefix, maps)

Sheet, scale and serials used.

3. Remains recovered or disinterred by Prs. Jack New of G. J. R. Co.
 (name and organization)
4. Evacuated to Cemetery by 1/sgt. Kniefel 6865 CM, BN, Mobile
 (name and organization)

5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements).
 Indicate unusual markings

Item	Clothing Markings	Sizes	Color	wear,	tear,	repairs,	etc.
*Headgear	<u>none</u>						
Raincoat	<u>none</u>						
Overcoat	<u>none</u>						
Jacket, Field	<u>none</u>						Jacket, Combat
Mackinaw	<u>none</u>						
Sweater	<u>none</u>						
Jacket, HBT	<u>none</u>						
*Shirt, Wool, OD	<u>none</u>						
Undershirt, Wool	<u>none</u>						
Undershirt, Cotton	<u>none</u>						
Trousers HBT	<u>none</u>						
*Trousers, Wool OD	<u>none</u>						

Belt, Web **none**

Drawers, Wool **none**

Drawers, Cotton **none**

Leggings, Wool **none** (Note unusual lacing)

Socks, Cotton **none**

*Shoes (type) **none**

Overshoes **none**

Web Equipment (type) **none**

(Other item) **none**

(Other item) **none**

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

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

Shoulder Patch **none**

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

8. Description of Remains: **badly decomposed**

Age **unk.** Height **unk.** Weight **unk.** Description of wounds **unk.**

Bandages or dressings **unk.** Scars **unk.**
(Length, width, location)

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

Outstanding moles, warts or birthmarks **unk.**
(yes-no; description, location)

Sunburn or tan, other than hands & face **unk.**

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

Build **Head missing**
(large, fat, thin, muscular)

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

Hair **Head missing**
(baldness, widows peak, distinctive cutting or other characteristics)

Sideburns **head missing** (color, setting, shape) Mustache **head missing** (color, size, shape) Beard or Goatee **head missing** (length, heavy,

light, color, extent)

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

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

Mouth **unk.** (large, medium, small) Lips **unk.** (small, large, full)

Teeth **head missing** (white, size, unevenness, spacing, noticeable crowns, fillings, extract.)

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

Jaw **missing** (large, small, normal) Circumference of head in inches **head missing** (hat band)

Neck **unk.** (size, length, short, normal, wrinkled) Larynx **unk.** (Prominent, normal)

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

(extent and quantity of hair)

Hands **unk.**

Fingers **unk.** (short, thick, long, slender, size of knuckles, missing fingers

or joints.)

(Unusual characteristics of fingernails)

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

Back **unk.** (quantity & extent of hair) Waist **unk.** (size of navel, appendectomy, amount

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

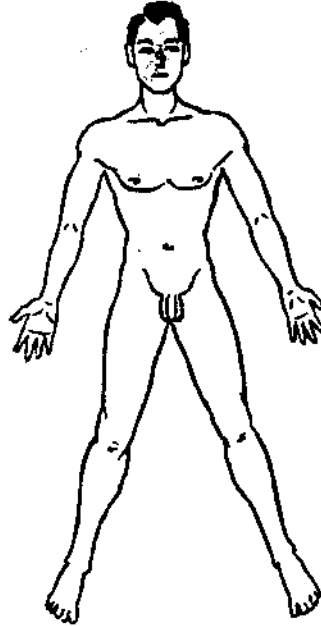
Hernioplasty (yes-no; location)

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

Feet **unk.** (Size, corns, callouses, flat) Toes **unk.** (slender, straight, crooked, overlap)

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

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



10. Have fingerprints been placed on Report of Interment no Yes-no

If not, explain too badly decomposed

11. Has tooth chart been prepared no If not, explain head missing Yes-no

12. Remarks: head missing - body badly decomposed

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.

Jack New

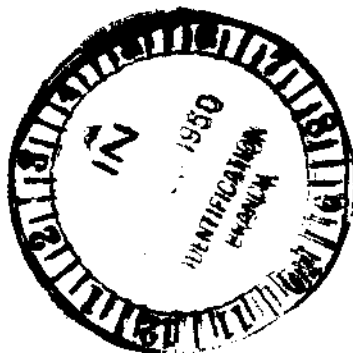
Jack New
Officers Name

Pfc.

Rank

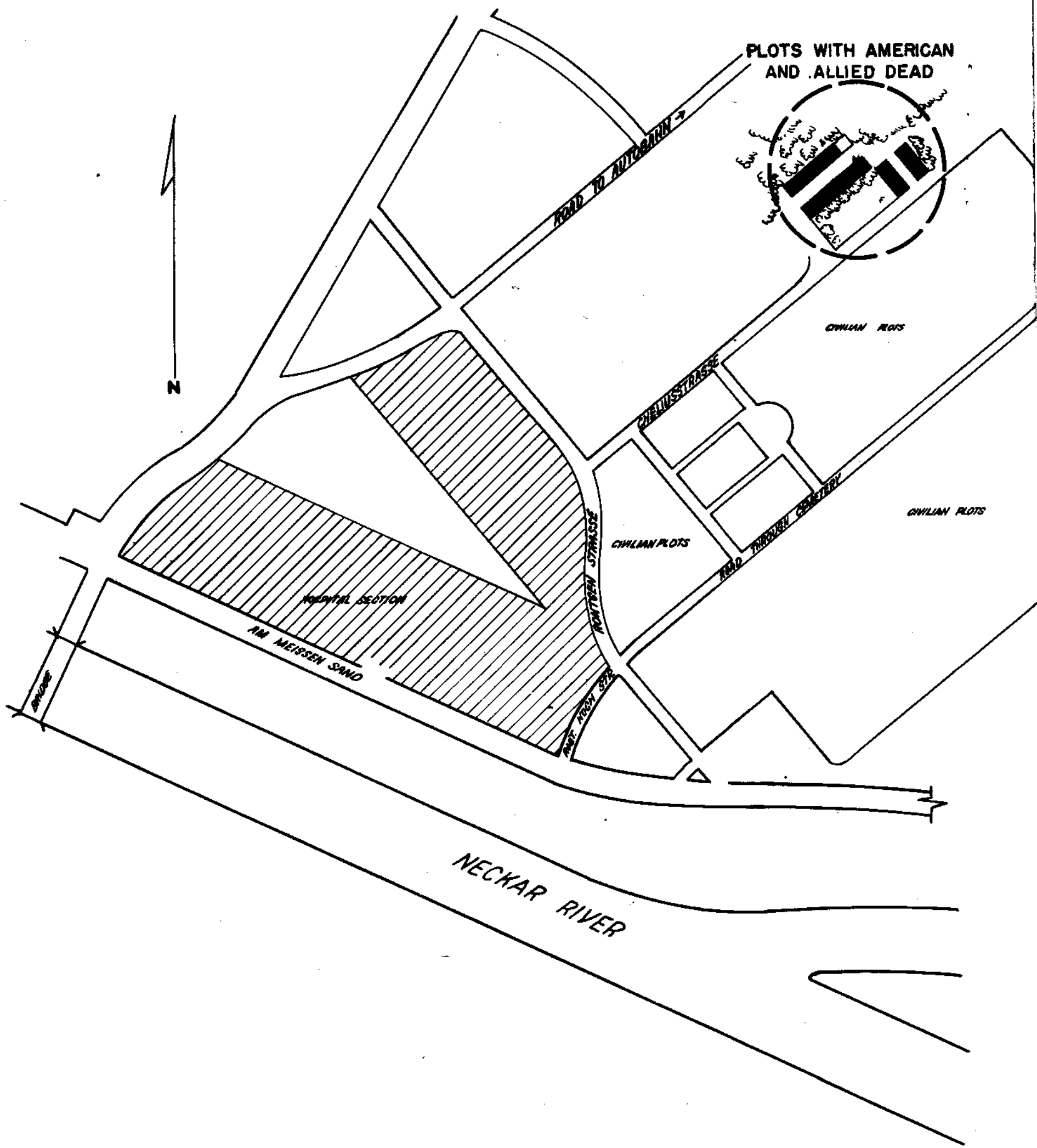
Service

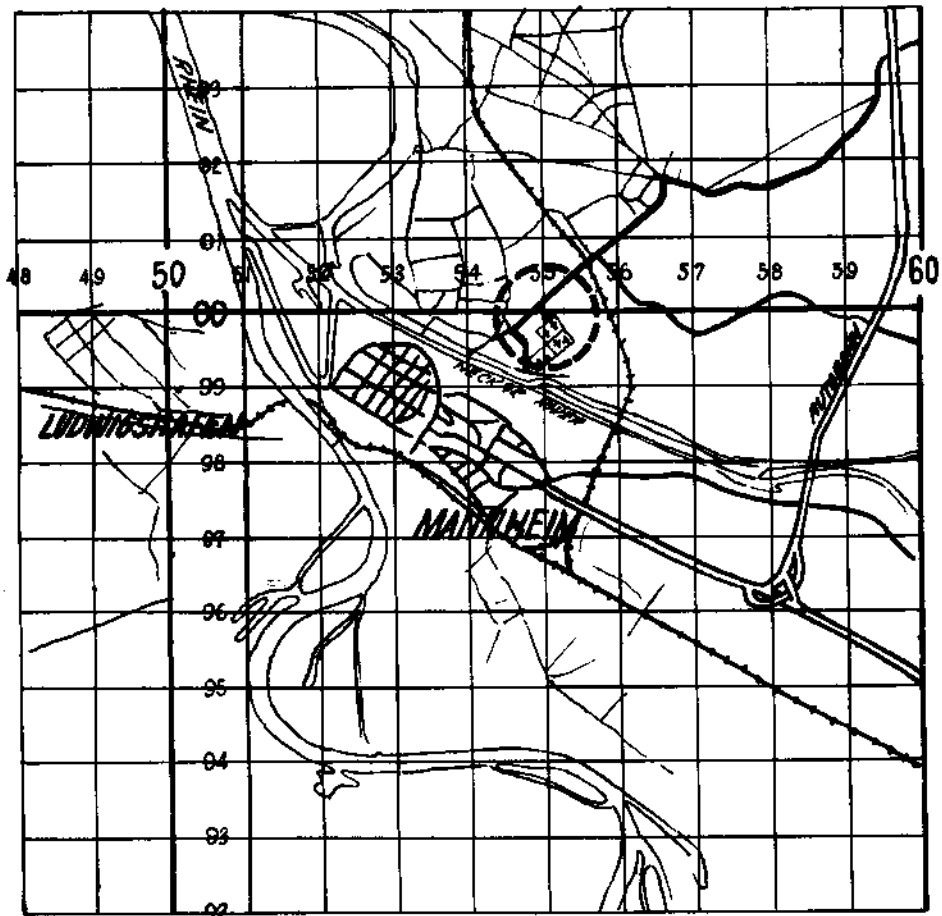
46 Cm. G.S. Co.
Organization



46TH Q.M. GRAVES REGISTRATION CO.
JAMES E. HAWKINS, 1ST LT, OMC, CMDG.
SGT. F.H. TERRY, DRAFTSMAN
INVESTIGATION MADE 13 AUGUST 1945

CIVILIAN CEMETERY AT





COORDINATES: R-551997
 MAP REFERENCE: GERMANY
 MANNHEIM, SHEET U-3

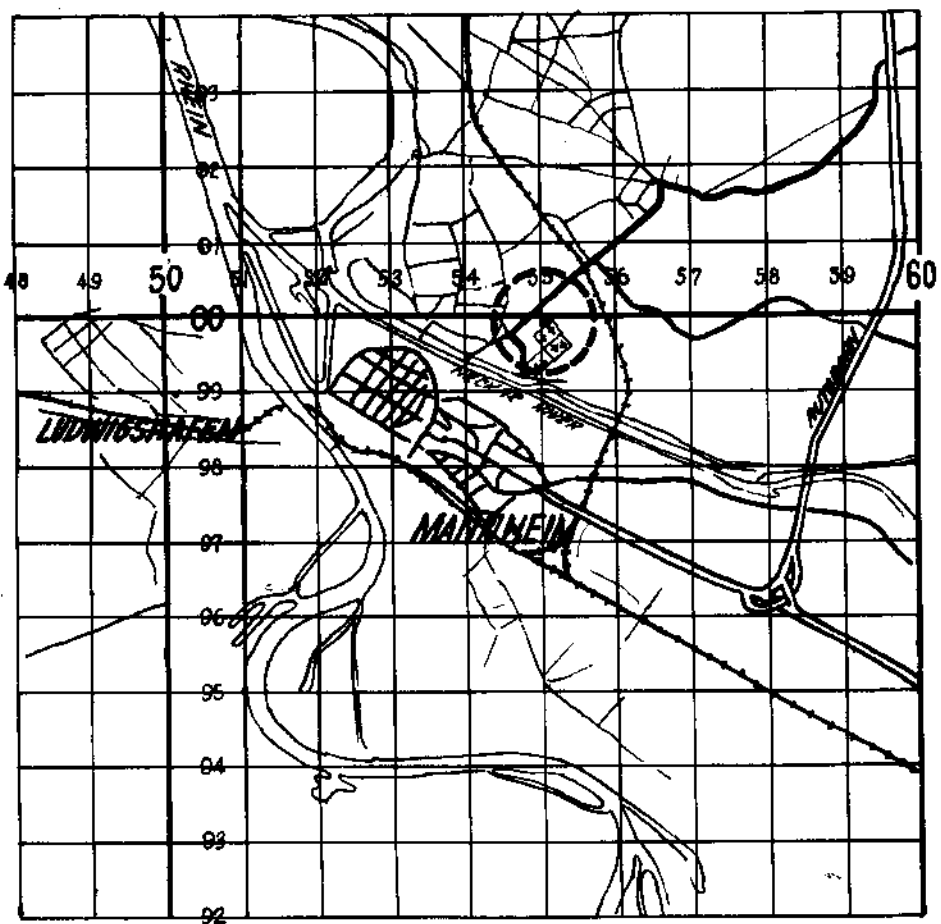
SECTION SHOWING GRAVES AS LISTED IN CEMETERY REGISTER

	UNK. AMER.	UNK. AMER.	UNK. AMER.	CRIN - AMER.	SWANSON - AMER.	THOMAS - AMER.	WRIGHT - AMER.	SWETLOW - AMER.	BECKER - AMER.	HUPPER - AMER.
	UNK. AMER.	FRIZZURA - AMER.	SALVOY, JR AMER	PHINE - AMER.	BELL - AMER.	LEDDY - AMER.	ITALIAN	GLADY, JR AMER.	LEWINE - AMER.	COLONA - AMER.
	GOTTARDO - ITALIAN									
	DRALE - AMER									
	RENZO - ITALIAN									
	FERRARIO - ITALIAN									
	ITALIAN									
	UNK. AMER.									
	UNK. AMER.									
	PINES - AMER.									
	UNK. AMER.									
	GOLDEN - AMER.									
	UNK. AMER.									
	UNK. AMER.									
UNK. SERB.	UNK. AMER.									
UNK. SERB.	UNK. AMER.									
CLOHESSY - AMER	UNK. AMER.									
UNK. ENG.	UNK. AMER.									
UNK. ENG.	UNK. AMER.									
PHELPS, ENG.	UNK. AMER.									
JOHANSON, ENG.	UNK. AMER.									
ITALIAN	UNK. AMER.									
UNK. AMER.	JACKSON - AMER									
UNK. AMER.	UNK. AMER.									
UNK. AMER.	JOYCE - AMER.									
ITALIAN	UNK. AMER.									
ITALIAN	COLLET - AMER.									
ITALIAN	UNK. ENG.									

← X-1790

● 2 MEN IN ONE GRAVE

MANNHEIM, GERMANY



COORDINATES: R-551997
 MAP REFERENCE: GERMANY
 MANNHEIM, SHEET U-3

SECTION SHOWING GRAVES AS LISTED IN CEMETERY REGISTER

	UNK. AMER.
	UNK. AMER.
	UNK. AMER.
	GRIN - AMER.
	SWANSON - AMER.
	THOMAS - AMER.
	WRIGHT - AMER.
	SWETSON - AMER.
	REISER - AMER.
	HAPPER - AMER.
	UNK. AMER.
	BRIZZOLINA - AMER.
	GALLOTTI - AMER.
	PIVITE - AMER.
	BELL - AMER.
	LEROY - AMER.
	ITALIAN
	UNK. AMER.
	LEHNE - AMER.
	GILOVA - AMER.
GIARDINO - ITALIAN	
DRALE - AMER.	
RENZO - ITALIAN	
FERRARIO - ITALIAN	
ITALIAN	
UNK. AMER.	
UNK. AMER.	
PINES - AMER.	
UNK. AMER.	
GOLDEN - AMER.	← X-1790
UNK. AMER.	
UNK. SERB.	UNK. AMER.
UNK. SERB.	UNK. AMER.
CLOHESY - AMER.	UNK. AMER.
UNK. ENG.	UNK. AMER.
UNK. ENG.	UNK. AMER.
PHELPS, ENG.	UNK. AMER.
JOHNSON, ENG.	UNK. AMER.
ITALIAN	UNK. AMER.
UNK. AMER.	JACKSON - AMER.
UNK. AMER.	UNK. AMER.
UNK. AMER.	JOYCE - AMER.

● 2 MEN IN ONE GRAVE

BURIAL

REPORT OF BURIAL

12. Nov. 1946
Date

1790 St. Avoird
Last Name

Unk.
First Name

Unk.
Initial

Unk.
Rank

Unk.
Serial No.

Unk.
Unit

Unk.
Organization

1030-26 Feb/46
Place of Death

US 111. Gen.
Date of Death

Steph void
Cause of Death

28
Time and Date of Burial

Grave No. 29

Row Number

Graves

Type of Marker

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

If No Identification Tags
How were remains identified?
Unidentified - see attached form 10 and check list for unknowns for further clues
What means of identification were buried with the body?
one (1) GR form 1 in burial bottle

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

Who is buried on:
Deceased's Right:
Name: _____ Serial No.: _____ Rank: _____ Organization: _____ Grave No.: 29

Deceased's Left:
Name: Unk. Serial No.: X-1805 Rank: _____ Organization: _____ Grave No.: 27

Signature of Name, Rank and if possible Organization of person handling these tags other than officer reporting burial.



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

Emergency Addressee: Unk.
Name: _____
Address: _____

Religion: Unk.

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

Morris P. Misarendino
Morris P. Misarendino 2nd Lt. Inf.
Signature of Officer or other person reporting burial

16 O.M.C.R. Co. Disentering of 1000

Verified by G.R.S. Officer
Charles F. Barney
CHARLES F. BARNEY, 2nd Lt, Inf, 6800 QM GR Det,
Reintering Officer

RECEIVED
NOV 21 1946
66

IF DECEASED UNIDENTIFIED

Take Fingerprints of Both Hands. If unable to obtain a complete set of Fingerprints, Take Those You Can, and fill in the following:

Height: unk. Laundry Marks: none
 Weight: unk. Number of Rifle: none
 Color of Eyes: unk. Wear Glasses? unk.
 Color of Hair: unk. Is Tooth Chart Attached? unk.
 Race: white

(If possible, have medical personnel take a tooth chart, if no medical personnel present, fill in a tooth chart below.) In space below, locate, and describe any scars, birthmarks, moles, deformities, etc.

Attached to Body No Yes
 no tooth chart
 hand missing

Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc.

none

Left Hand

4

3

2

1

Thumb

Right Hand

4

3

2

1

Thumb

TOOTH CHART

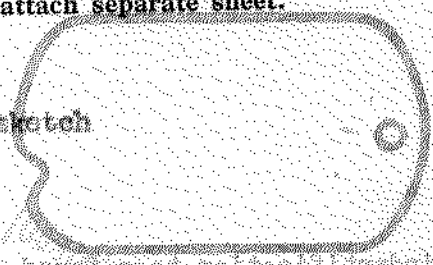
If this is an Isolated Burial, make a Sketch of the Location, oriented with Permanent Landmarks. If more space needed attach separate sheet. Indicate North.

Decreased's Right		Decreased's Left													
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Upper	Lower														

Indicate: missing natural teeth by X; crowns by O; fillings by □; Bridges by ◊; linking anchor teeth; replacements by artificial teeth.

Characteristics: no tooth chart - hand missing

Other Data



see attached sketch