

PLOT D, ROW 4, GRAVE 33

Buried 11/12/51

Verified by:

DISINTERMENT DIRECTIVE

ROBERT W. GANSEL

293, Unk St. Avold X224

1

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

3574

5 12 51
DAY MONTH YEAR

NAME SERIAL NUMBER GRADE ARM RACE RELIGION
UNK. X*224

CEMETERY PLOT ROW GRAVE DISPOSITION OF REMAINS
ST. AVOLD, FRANCE CC 8 193 3503 CODE 80 DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE NAME AND ADDRESS OF NEXT OF KIN
ST. AVOLD, FRANCE BY ADMINISTRATIVE DECISION

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER GRADE DATE OF DEATH DATE DISTINTERRED
IDENTIFICATION TAG ON ORGANIZATION RELIGION IDENTIFICATION VERIFIED BY
 REMAINS
 MARKER NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL CONDITION OF REMAINS
OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major 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 AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS
REMAINS WERE DISINTERREE IN ORDER TO PERMIT SIDE BY SIDE BURIAL OF BROTHERS CASES.

QAC FILE RECORDS ANNOTATED DATE 2 Jan 52 NAME Edgewood Shuter Rep'd BR. REG. DIV.

Incl #1

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

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

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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

7887 GRAVES DETACHMENT

AFPO 757

913 unknown St. Avold X224 *mm*

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 - 224 St Avold

(POC) ST AVOLD

cm

*file
E J 10/22
J 10/22
217*

R E S T R I C T E D

Federstein

/deb

201-Unknown X43 2nd Ind
Hq, 259th Infantry, APO 200, U. S. Army, 6 July 1945

To: Commanding General, 65th Infantry Division
ATTN: AG Casualty Section

1. In compliance with basic communication, the following information is submitted.

2. After investigation no information can be obtained to further identify unknown X-43. Information from Burial Report and from the Check List For Unknown is not clear enough to give this headquarters a basis for identification.

3. None of the EMI has been reported deceased for which this headquarters has not received a report of burial. The following is a list of the names of the EMI still carried as Missing In Action as a result of the river crossing, and copy of Missing Report is enclosed for each man:

- 371 Pfc William A. Rongholt, 39926455 ✓ KIA ✓
- 371 Pfc Lawrence J. Culver, 38550823 - ✓ US-C-6-145 (K-32)
- 371 Pfc Salvatore Alderucci, 6150605 ✓ KIA ✓
- no 371 Pfc ~~Kenneth B. Britton~~, 42081056 - ✓ US-FF-12-140 AUTC01
- no 371 Pfc Rayburn M. Walder, 34819120 × NC

4. Reference is made to Unknown X42 which was believed to be Pfc Lawrence J. Culver. Information was sent forward to further identify Unknown X42 but to date no further information has been received at this headquarters as to whether Unknown X42 was identified as Pfc Lawrence J. Culver.

5. Request that this Headquarters be notified as to whether Unknown X42 has been identified as Pfc Lawrence J. Culver, as basic communication makes reference to him as being found at the same time as Unknown X43.

For the Commanding Officer:

* Reburied 20-6-145 AUTC01

William A. O'Quinn
WILLIAM A O'QUINN
1st Lt, 259th Inf
Personnel Officer

- 6 Incl
- 1 Incl n/c
- 5 Missing Reports

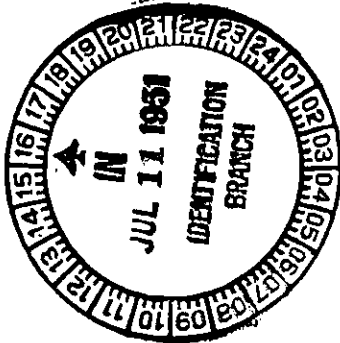
R E S T R I C T E D

P. A. ...

X

X-224

Britton - Tags ~~from~~ River, Innstadt, Ger - NR
Culver - 5 clothing marks - NR
Oberottensheim, Aus
65 gzf D
259 gzf
Lost crossing. Inn River
which flows into Danube



CHECK LIST FOR UNKNOWN

1. Unknown X **43** U. S. Military Cemetery No. **1 Nurnberg, Germany**

2. If remains were disinterred, attach Check List for Disinterments.

3. Arrived at cemetery **1600 4 June 1945** **65th QM Co**
(hour) (date) (collecting-point)

4. Place of death **Danube River, near Oberottensheim, Austria**
(name) (name) (coordinates and landmarks)

5. **7990 middle Danube sheet Linz W-8 1:1000,000**

6. Remains recovered by **65th QM Co**
(name and organization)

7. Evacuated to cemetery by **5045th QMGR Co**
(name and organization)

8. Is load JIC attached **Yes** 9. Are names of deceased found in same area as this Unknown starred **Yes** 10. Are circumstances described which may indicate organization of the deceased **NO** 11. If only part of body was received, was a careful search made for other parts of Unknown **No** **Body intact when found**
(yes-no) (yes-no) (yes-no)

12. If remains come from vehicle, plane, etc: **Not applicable. Body taken from river**
(type of vehicle or plane, nick name, serial number, organization or symbols)

13. **Not applicable**

14. Crew list: **Not applicable**
(names of other deceased and positions in which found)

15.

16.

17. If a tank, which hatches were free and available for escape use **Not applicable**

18. If organization to which vehicle or plane was assigned or if names of all other deceased are not known, give detailed information concerning vehicle or plane **Does not pertain to this case, body removed from river.**
(parts of markings or symbols) (burned) (pierced by shell fire - where)

19. **from river.**

20. **Not applicable**
(found in town field by road etc.) (damaged by mine explosion)

21. **Not applicable, no information acquired so far as to cause of death.**
(names of men who escaped) (description of other vehicles or planes in same area)

22. Detailed description of personal effects **There were no personal effects when received at cemetery**
(Indicate exact pocket or part of body where found)

23.

24.

25. **CICMIR** **21002** **COPL** **WEST 1ST 1ST 2ND ETC**
(INDICATE NUMBER OF MARKINGS)

RESTRICTED

X

CHECK LIST FOR UNKNOWN

(name of soldier processing remains)

1. Unknown X **43** U. S. Military Cemetery No. **1 Nurnberg, Germany**
2. If remains were disinterred, attach Check List for Disinterments.
3. Arrived at cemetery **1000 4 June 1945** **65th QM Co**
(hour) (date) (collecting point)
4. Place of death **Danube River, near Oberottensheim, Austria**
(name) (coordinates and landmarks)
5. **7690 middle Danube sheet Linz W-8 1:100,000**
6. Remains recovered by **65th QM Co**
(name and organization)
7. Evacuated to cemetery by **3043rd QMGR Co**
(name and organization)
8. Is load list attached **Yes** 9. Are names of deceased found in same area as this Unknown starred **Yes** 10. Are
(yes-no) (yes-no) (yes-no)
- circumstances described which may indicate organization of the deceased **NO** 11. If only part of a body was received, was
(yes-no)
- a careful search made for other parts of Unknown **no body intact when found**
(yes-no)
12. If remains come from vehicle, plane, etc: **Not applicable. Body taken from river**
(type of vehicle or plane, nick name, serial number, organization or symbols)
13.
14. Crew list **Not Applicable**
(names of other deceased and positions in which found)
15.
16.
17. If a tank, which hatches were free and available for escape use **Not applicable**
18. If organization to which vehicle or plane was assigned or if names of all other deceased are not known, give detailed information
concerning vehicle or plane **Does not pertain to this case, body removed**
(parts of markings or symbols) (burned) (pierced by shell fire - where)
19. **from river.**
20. **Not applicable**
(found in town field by road etc.) (damaged by mine explosion)
21. **Not applicable, no information acquired so far as to cause**
of death. (names of men who escaped) (description of other vehicles or planes in same area)
22. Detailed description of personal effects **There were no personal effects when received**
(Indicate exact pocket or part of body where found)
23. **at cemetery**
24.
25.
26.

RESTRICTED

X

SECRET

Description of clothing and equipment: (If clothes do not fit, give measurements from body measurements)

Item	Clothing Markings	Sizes	Color	Indicate unusual markings, wear, tear, repairs etc.
27. * Headgear (type)	No headgear, measurements taken of skull and found to be 21"			
28. Raincoat	None			
29. Overcoat	None			
30. Jacket, Field	None			
31. Jacket, Combat	None			
32. Mackinaw	None			
33. Sweater	None			
34. Jacket, HBT	None			
35. * Shirt, Wool OD	Measurements of chest at nipples were 36"			
36. Undershirt, Wool	The arms were 31" neck 15"			
37. Undershirt, Cotton	None			
38. Trousers, HBT	None			
39. * Trousers, Wool OD	Est. 32 x 35 Measurements taken of waist and inseam.			
40. Belt, Web	None			
41. Drawers, Wool	None			
42. Drawers, Cotton	None			
43. Leggings	None			(Note unusual lacing)
44. Socks Wool Cotton	None			
45. * Shoes (type)	No shoes--est. size 10 Measurement of foot taken.			
46. Overshoes	None			
47. Web Equipment (type)	None			
48. (other Item)	None			
49. (other Item)	None			

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

50. Chevrons or Insignia **None** (type and location; shirt jacket coat helmet) Shoulder Patch **None**
51. Description of Remains
52. Age **Est 27** (years) Height **5'8"** (ft-in) Weight **Est 120** (lbs) Description of wounds **Crushed frontal. Both parietals, temporals and occipitals cracked.**

- 54. Bandages or dressings **None** Scars **None visible**
(length, width, location)
- 55.
- 56. Tattoos **None**
(number, location — illustrate on sep. page)
- 57. Outstanding moles, warts or birthmarks **None visible**
(yes-no) (description, location)
- 58. **Body in an advanced state**
- 59. Sunburn of tan, other than hands and face **Undeterminable of decomposition.**
- 60. Tobacco stain on fingers or teeth **No tobacco stains noticeable on teeth.**
(designate where extent)
- 61. Complexion **Unknown** Build **Thin**
(light, med, dark, clear, pimples, pocks, freckles) (large, fat, thin, muscular)
- 62.
- 63. Hair **No hair could be found with the remains.**
(color, length, quantity, curly, wavy, straight, whorls, or definite parting, baldness, widows' peak)
- 64.
(distinctive cutting or other characteristics)
- 65. Sideburns **None** Mustache **None** Beard or goatee **None**
(color, setting, shape) (color, size, shape) Length
- 66.
(heavy, light, color, extent)
- 67. Eyes **No eyes present** Eyebrows **No eyebrows present**
(color, setting, shape) (color, bushiness, extend across nose)
- 68. Nose **No nose present** Ears **No ears present**
(size, shape, straight) (size set, close to or far from head)
bones present.
- 69. Forehead **Frontal crushed** Mouth **No mouth, just/** Lips **None present**
(high, wide, wrinkled) (large, medium, small) (small, large, full)
- 70. Teeth **White, even and in fairly good condition (See tooth chart)**
(white, size, unevenness, spacing, noticeable crowns, fillings, extractions)
- 71. Chin **NO chin, mangle present only** Cheekbones **Normal**
(prominent, receding, pointed, dimple, double) (high, normal)
- 72. Jaw **Normal** Circumference of head in inches **Estimated to be 21"**
(large, small, normal) (hat band)
- 73. Neck **Normal** Larynx **Normal** Shoulders **Broad**
(size, long, short, normal, wrinkled) (prominent, normal) (broad)
- 74. Arms **33" long, muscular and no hair visible,**
(length) (muscular, color, extent and quantity of hair)
- 75. **no vaccination, 6" wrist** Hands **Normal**
(vaccination scar, size of wrists) (large, small, normal, calloused noticeably)
- 76. **Undeterminable, epidermis missing.**
(marks on fingers indicating that rings were worn)

RESTRICTED

X

Fingers Long, slender & none missing (short, thick, long, slender; size of knuckles) (missing fingers or joints)

Fingernails normal (Unusual characteristics of fingernails)

80. Chest 34" at nipples, no hair, normal. (size at nipples; color, quantity and extent of hair; large, small, normal)

81. Back No hair on back (quantity and extent of hair) Waist 31", no appendectomy and no hair (size at naval; appendectomy, amount and color of hair)

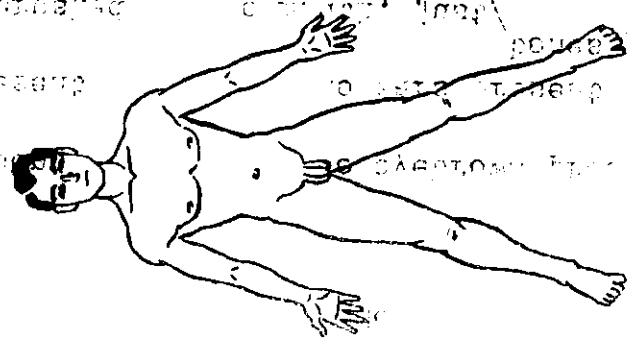
82. Circumcized yes. Pubic hair no pubic/ (yes-no) (color) (yes-no) (location)

83. Legs 33" long, normal with no hair visible. Width 3 1/2 inch (muscular; knock-kneed, bowed, normal) (quantity, color and extent of hair)

84. Feet 9 1/2" long. No callouses visable Straight with outside skin missing. (size; corns; callouses; flat) (slender, straight, crooked, overlap)

85. Evidence of healed fractures Fractured skull, represented by small particals of bones at base of skull. (nose, arms, legs, etc.)

86. Block out parts of body not received at cemetery



87. Have photographs been made and attached No If not, explain Body in advance state of decomposition.

88. Have fingerprints been placed on GRS No If not, explain No finger skin on fingers. Body in advance state of decomposition.

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

90. Remarks: Examination of the body reveals a crushed Frontal, both parietals and temporals cracked as was occipital. Must have received a terrific blow in head. Body was in an advanced stage of decomposition, extremity thin and epidermis missing on most parts of body making it impossible to take fingerprints. No bullet holes visable and lower extremities are in a cramped position.

REMARKS:

This body was found in Danube River near Oberottensheim, Germany, Coordinates 7696, Map Reference Linz, W-8, scale 1:100,000. Examination of the body reveals the following information: Crushed Frontal, both parietals, temporals and occipital cracked. (Must have received a terrific blow in head). Body was in an advance state of decomposition, impossible to take finger prints. It is extremely thin and it's approximate weight is 120 lb. His height is 5' 8". No bullet holes could be found on body. The lower extremities are in a cramped position and the hands are moulded into the abdominal cavity. This body is buried as Unknown X-43.


R. F. ALBERA
1st Lt., QMC
GR Officer

RESTRICTED



Name of Collecting Point Exact Location
 Date Delivered to Cemetery 28 May 1945

NAME (Last Name First)	ASN	ORGANIZATIONS (If unknown, give all possible organizations) (Use more than one line if necessary)	PLACE OF DEATH (Give coordinates, land marks, name of closest town, country)	DATE AND HOUR of delivery to point
Unknown X-43	Unknown	Unknown	Found in Danube River near Oberottensheim, Germany (7690) Middle Danube, Linz W-8 1:100,000	27 May 1945 1850
Unknown X-32	Unknown	Unknown	Found in Danube River near Oberottensheim, Germany (7690) Middle Danube, Linz W-8 1:100,000	27 May 1945 1850
SPANGOLI Umberto	81-I-202138	1190th Labor Super- Viston Company	Linz, Austria (8588) Upper Danube, Linz W-8 1:100,000	28 May 1945 1200

X

NAME, RANK, ASN, ORGANIZATION AND TRUCK NO. OF DRIVER DELIVERING BODIES TO COLLECTING POINT

NAME **Thomas A. Hydo** L. LAUNDRANT ASN

ORGANIZATION **1190th Labor Supervision Co**

NAME, RANK, ASN, ORGANIZATION AND TRUCK NUMBER OF DRIVER EVACUATING BODIES FROM COLLECTING POINT TO THE CEMETERY

NAME **BROWN** RANK **/S** **398803760**

ORGANIZATION **UM CO** TR. **253507-3**

- NOTE :** Whenever Unknown is processed, personnel operating the collecting point must furnish additional information to the cemetery covering the following points:
1. If evacuated from vehicle or plane, obtain the serial number of the plane or vehicle, organization if possible, type of plane or vehicle, position occupied by the deceased, and description of how vehicle or plane was destroyed.
 2. Name of other deceased found in the same vicinity as the Unknown.
 3. All possible organizations to which the deceased may have been assigned.
 4. All other clues obtainable which may aid in establishing identity, including the exact location and position in which the remains were found.

TOOTH CHART

4 June 1949
 Date

UNKNOWN E-43

Unknown

Unknown

Unknown

Last Name

First

Initial

Rank

Serial No.

Unknown

Unknown

Organization

Donoho River near Oberettenshofen, Austria

Struck

Place of Death

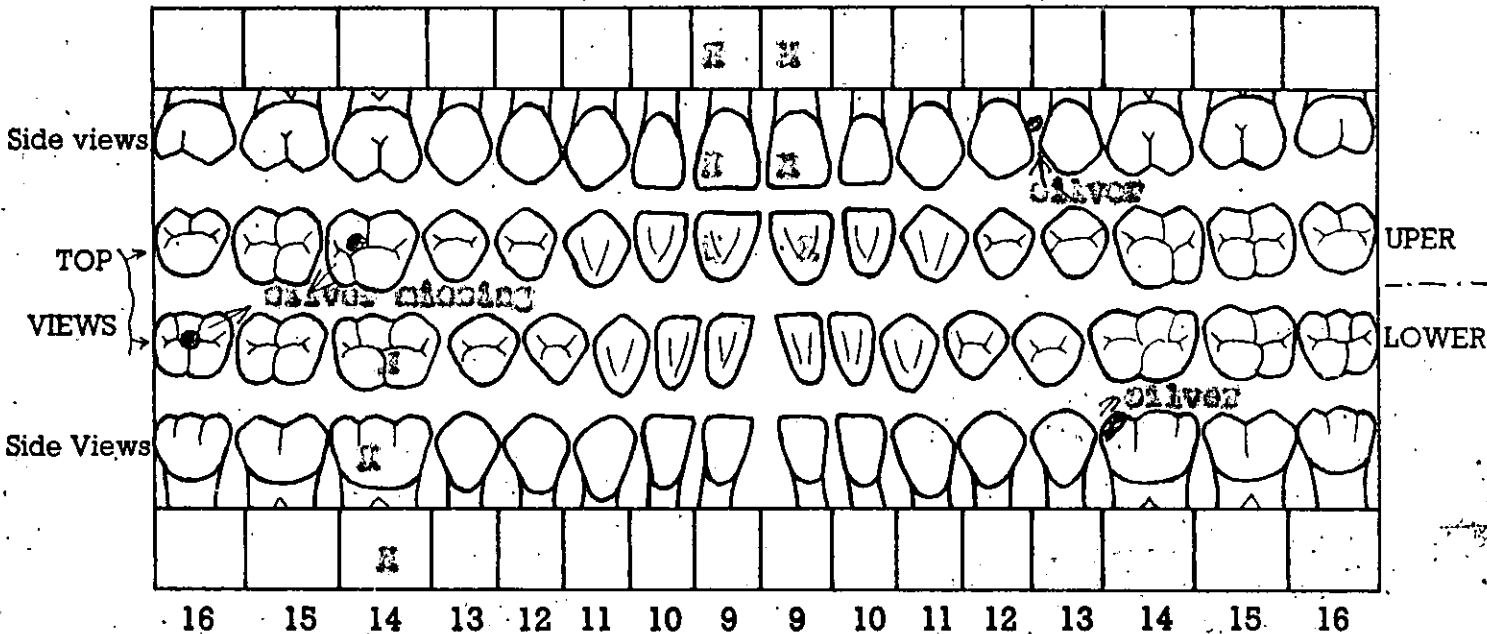
Date of Death

Cause of Death

Right

Left

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



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), bicuspid (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.

Signature of Officer or other person who prepared Tooth chart

R. F. ALBERA

Verified by G. R. S. Officer

1st Lt. GMC

3048th Gr Reg Co

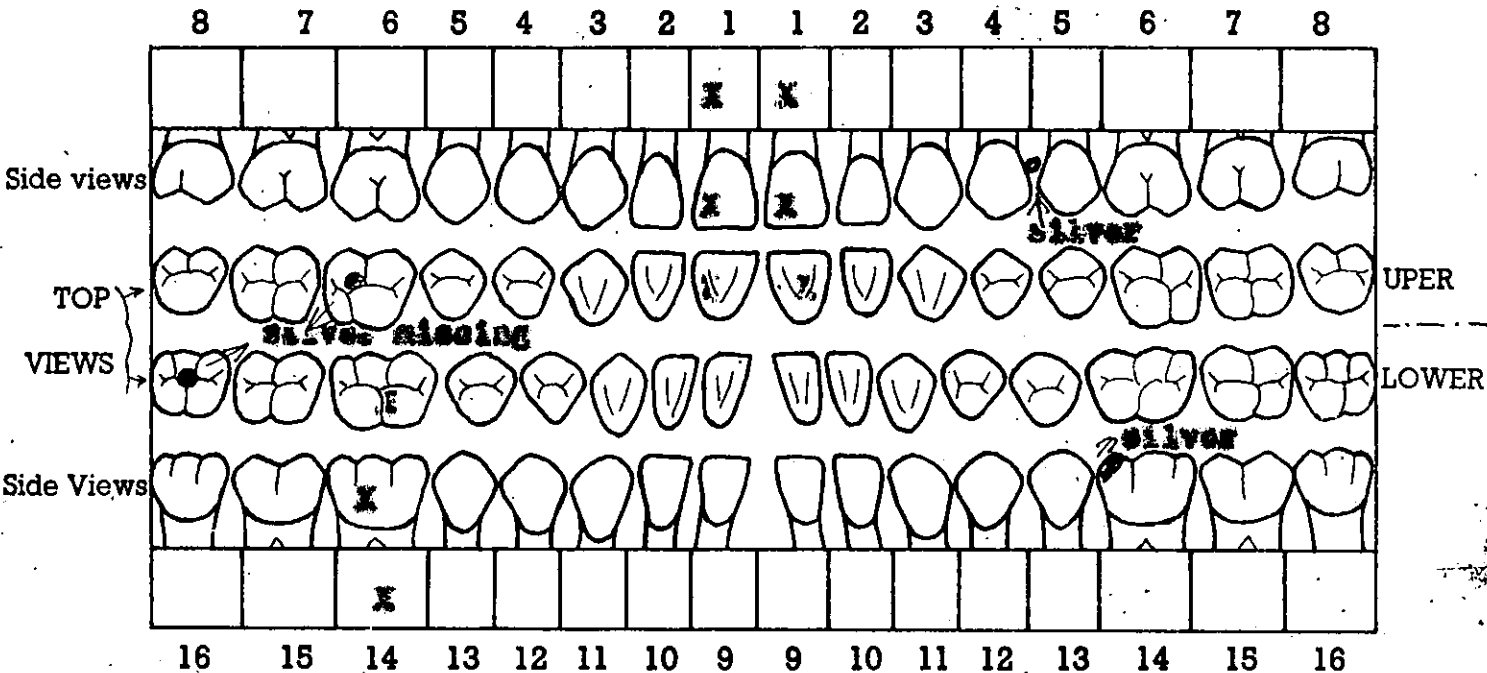
TOOTH CHART

4 June 1945
 Date

UNKNOWN X-43 Unknown Unknown Unknown
 Last Name First Initial Rank Serial No.
Unknown Unknown
 Unit Organization
Demube River near Oberattensheim, Austria Drowned
 Place of Death 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), bicuspid (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.

Signature of Officer or other person who prepared Tooth chart

R. F. ALBERA

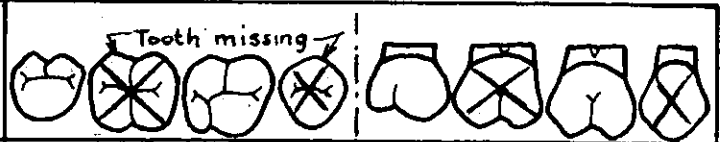
R. F. ALBERA
 1st Lt., CMC
 3048th QM Gr Reg Co

Verified by G. R. S. Officer

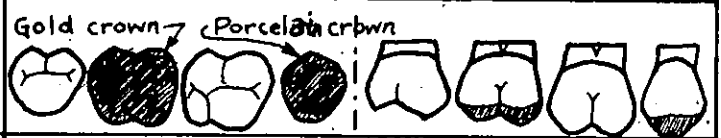


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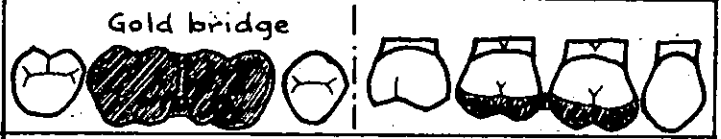
MISSING TEETH... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



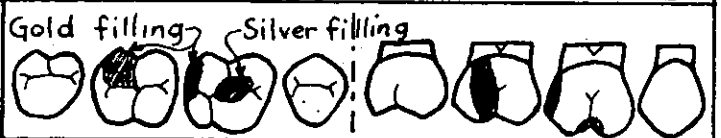
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



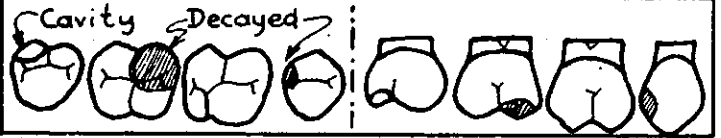
BRIDGE WORK... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



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

R E S T R I C T E D

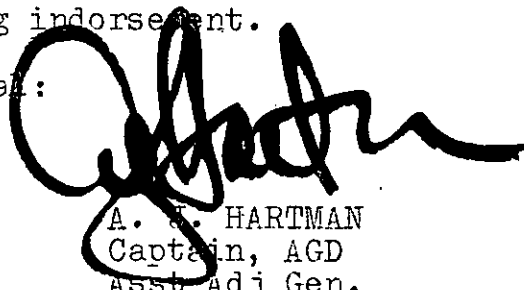
BASIC: Ltr Hq Third US Army, APO 403, US Army, file AG 293.10 -
GNMCQ-2, sub: Unidentified Deceased Pers (X-43 Nurnberg),
dated 29 June 45.

AG 293-Unknown X-43 3d Ind
(29 Jun 45)
HQ 65TH INF DIV, APO 200, US Army, 6 July 45.

To: Commanding General, Third US Army, APO 403, US Army,
(Attn: AG Casualty Division)

Attention is invited to preceding indorsement.

For the Commanding General:



A. F. HARTMAN
Captain, AGD
Asst Adj Gen.

Recd
AG Cas Div.
9. JUL 1945

~~6732~~
6 Incls: n/c



R E S T R I C T E D

HEADQUARTERS
THIRD UNITED STATES ARMY
APO 403

rgi/vas

AG 293.10-GNMCQ-2

29 June 1945


SUBJECT: Unidentified Deceased Personnel(X-43 Nurnberg)

TO : Commanding General, 65th Infantry Division, APO 200,
U.S. Army.

1. It is desired that action be taken to determine if Unknown X-43 can be identified as a former member of your command. The bodies of Unknown X-43 and Pfc Lawrence J. Culver were found at the same place.

2. It is further desired that this headquarters be furnished a list of the names of all men who are still carried as missing as a result of the river crossing at the time Pfc Culver was lost and a copy of the MIA Report for each man. The names of those reported deceased as a result of the same action for whom a report of burial has not been received should also be forwarded.

By Command of Major General CRAIG:


H. A. ENGLER,
Major, A. G. D.
Asst Adjutant General

1 Incl:
R/B

AG 293-UNKNOWN X-43
(29 Jun 45)

1st Ind

(S: 10 July 45)


HQ 65TH INF DIV, APO 200, US Army, 2 July 45.

To: CO, 259th Inf Regt.

1. For your information and strict compliance with basic communication.


2. Request correspondence with report of action taken be returned to this headquarters on or before suspense date indicated.

By command of Major General REINHART


A. J. HARTMAN
Captain, AGD
Asst Adj Gen.

1 Incl: n/C

R E S T R I C T E D



R E S T R I C T E D

HEADQUARTERS THIRD UNITED STATES ARMY
Office of the Quartermaster
APO 403

ar/ask

AG 293.10 - GMMCQ-2

10 June 1945

SUBJECT: Additional Information on Unknown Personnel.

TO : Commanding Officer, 3048th QM Graves Registration Company,
APO 403, U. S. Army.

1. The Report of Burial for Unknown X-43 U. S. Military Cemetery No. 1, Nurnberg, Germany, is returned for additional information and correction as follows:

a. Unknowns on load list should be listed with Unknown X number and all bodies picked up from same area should be so designated by placing an asterisk in front of the name.

b. What is the exact location from which body was picked up? Attach sketch.

c. Answer item #9 on Check List.

d. On answering item #84, length and width of deceased's feet is desired. What is the width of Unknown X-32's feet?

e. Item #88 requires a more precise explanation. Make an appropriate statement concerning the fingers, such as "No skin on fingers; Skin on fingers decomposed beyond fingerprinting; "No fingers", etc.

f. Why do you think the deceased was an American? If he was very thin, could he have been one of the displaced persons or a civilian PW from some concentration camp?

g. Were the two #1 upper teeth knocked out or extracted? Do the silver fillings appear to be those of an American dentist's or are they of a type used by foreign dentists? Describe carefully any decayed spots on teeth.

By order of the Quartermaster:

Charles E. Hoy
Major QMC
FRANK KEMMERER
Major QMC

Army Graves Registration Officer

- 1 -

R E S T R I C T E D

R E S T R I C T E D

293.10

1st Ind.

RFA/twd

(10 Jun 45)

HEADQUARTERS, 3048th QM Graves Registration Co., APO 403, U. S. Army,
15 June 1945.

TO: CG, Third United States Army, Office of the QM, APO 403, US Army.

1. In compliance with basic communication the following additional information pertaining to Unknown X-43 is submitted:

a. Subparagraphs a,c,e, basic communication complied with.


b. The exact location from which body was picked up is: On a small sand bar, in the Danube, River, South of Oberottenshein at (755902); Map: Middle Danube 1:100,000, Sheet W-8, Linz.

c. The width of Unknown X-32's feet is estimated to be $3\frac{1}{2}$ inches. Positive measurement could not be taken due to the fact that the flesh deteriorated from bones.

d. Unknown X-43 was buried temporarily as an American. However, no evidence could be traced to establish the nationality of these remains.

e. The Dentist of the 537th QM Bn. was contacted to determine whether or not the silver fillings are those used by American Dentist, but, he stated that he cannot determine this fact. The two #1 upper teeth were, possibly, knocked out after death. They could have been knocked out during the removal from the river or while in transit to the cemetery.

For the Commanding Officer:


R. F. ALBERA
1st Lt, QMC
3048th QMGR Co

2 Incls:

Incl #1 Report of Burial.

Incl #2 Ltr. 3043rd GR Co with 5th Ind.

R E S T R I C T E D

3043^d QM GRAVES REGISTRATION COMPANY
APO 403 U.S. Army

31 May 1945

SUBJECT: Unidentified deceased personnel.

THRU: : Commanding General, Hq, Third U.S. Army, APO 403, US Army

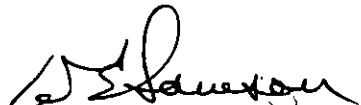
TO : 65th QM Co,
ATTN: Major Gross

1. At 28 May 1945 three (3) bodies were brought to U.S. Military Cemetery No. 1, Nurnberg, Germany by T/5 Brown, 39693760 of the 65th QM Co. Two of these bodies were listed as unknown and one of them was nude and from the physical condition of the body it could very easily be a malnutrition case or a misplaced person or a released PW and any nationality.

2. In order for us to bury him properly as an American, Allied or Enemy military dead will you kindly inform us as to his nationality and as to his status as a military or civilian person.

3. This information is needed as quickly as possible since the body is being held above ground.

For the Commanding Officer:


WILLIAM E. SAMSON
1st Lt., QMC

AG 293.10-GNMCQ-2
(31 May 45)

1st Ind


FK/pfh

HEADQUARTERS THIRD U. S. ARMY, APO 403, U. S. Army, 1 June 1945.

TO: CG, 65th Infantry Division, APO 200, U. S. Army.

Attention is directed to basic communication. An investigation will be conducted immediately to determine the facts in the case and report submitted to this headquarters without delay.

By command of General PATTON:


H. A. ENGLER,
Captain, A. G. D.,
Asst. Adjutant General

R E S T R I C T E D

R E S T R I C T E D

AG 293

2d Ind

(S: 8 June 45)

(31 May 45)

HQ 65TH INF DIV, APO 200, U. S. Army, 4 June 45.

To: Office of Div QM, 65th Inf Div (Attn: Maj Gross)

For compliance with basic communication and return to this headquarters not later than suspense date indicated.

By command of Major General REINHART:


A. J. HARTMAN
1st Lt, AGD
Asst Adj Gen

3d Ind.

HHG/acl

AG 293

(31 May 45)


OFFICE OF THE DIVISION QUARTERMASTER, APO 200, 5 June 1945

TO: Hq 65th Inf Div, APO 200, U.S. Army.

1. Further investigation disclosed no information which permits identity of the body to be established as to nationality or status.

2. The body was nude and discovered on a small sand bar in the Danube River, at the following location: South of Ober Ottensheim at (755902) Map: Middle Danube 1:100,000 Sheet W-8, Linz.

3. The other unknown, also delivered to U. S. Military Cemetery No. 1, Nurnberg, Germany, was found less than 50 feet away, on the same sand bar. Both were recovered and brought to the Quartermaster Company at the same time.


HARRY H. GROSS,
Major, QMC.,
Executive Officer.

R E S T R I C T E D

R E S T R I C T E D

BASIC: Ltr, CO 3043d QM GR Co, APO 403, U.S. Army, subj: Uniden-
tified deceased personnel.

AG 293

4th Ind

(31 May 45)

HQ 65TH INF DIV, APO 200, U.S. Army, 6 June 1945.

To: Commanding General, Third U.S. Army, APO 403, U.S. Army.
(Attn: AG Casualty Division)

Attention is invited to preceding indorsement.

For the Commanding General:

mlc

[Handwritten signature]

10 JUN 1945

A. J. HARTMAN,
1st Lt, AGD,
Asst Adj Gen.

AG293.10-GNMCQ-2

5th Ind

CEH/pfh

(31 May 45)

HEADQUARTERS THIRD U. S. ARMY, OGM, APO 403, U. S. Army, 11 June 1945.

TO: CO, 3048th QM Graves Registration Company, APO 403, U. S. Army.

F.K.

F.K.

R E S T R I C T E D

X

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN 224				2. DATE OF REPORT 5 MAY 1949		
3. NAME OF CEMETERY USMC SAINT AVOLD		4. PLOT CC	5. ROW 8	6. GRAVE 193	7. DATE OF DISINTERMENT ✓	REINTERMENT ✓

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT U. T. D.	9. ESTIMATED HEIGHT 5 FEET 7 3/4 INCHES	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? YES NO TO WHAT EXTENT?

15. WAS BODY MANGLED? YES NO TO WHAT EXTENT?
"SEE SKELETAL BLACKOUT CHART"

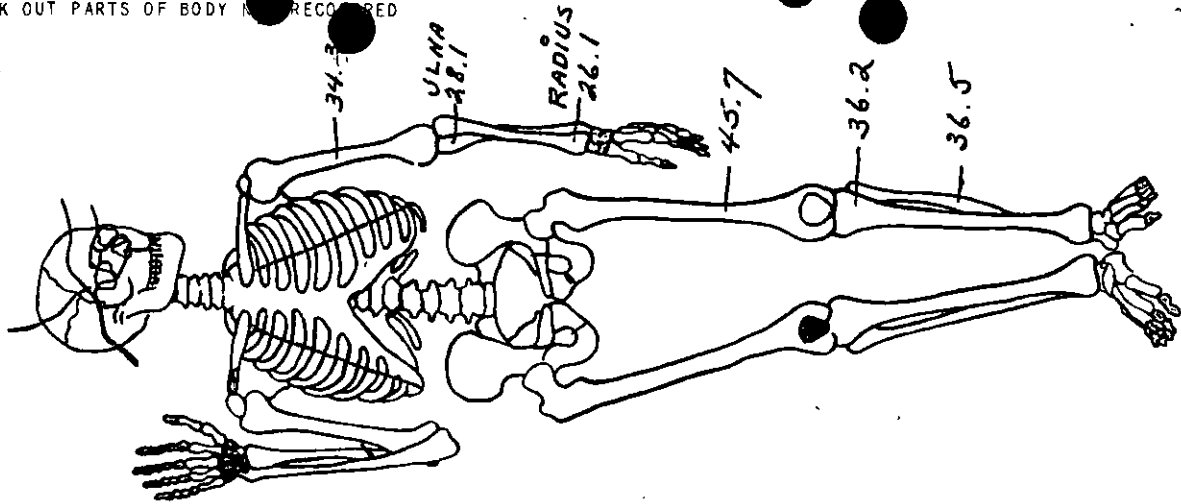
16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS
UNUSUAL CURVATURE OF TIBIAS (SHAFT)

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 FOUND"



19. BLACK OUT PARTS OF BODY NOT RECORDED



23 VERTEBRA PRESENT

ESTIMATED HEIGHT: 5'7 3/4"

20. MASS BURIAL CERTIFICATE (IF APPLICABLE)

(Wherein segregation in whole or parts is impossible)

I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF "NONE" DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS: NUMBER

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

REMAINS RECEIVED IN CASKET WAS PREVIOUSLY REPATRIATION PROCESSED. SEE ATTACHED COMPLETED DENTAL CHART FOR TEETH FOUND WITH REMAINS. THOROUGH SEARCH OF REMAINS FAILED TO REVEAL HAIR. ESTIMATED WEIGHT OF PROCESSED REMAINS: NINE (9) POUNDS. GREATEST CURVATURE ON TIBIAS NOTED IN AREA OF DISTAL 1/3. EVIDENT CAUSE OF DEATH: "FRAGMENTED SKULL."

ESTIMATED AGE: OVER 35

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

C. J. Missigny X

Unknown X-224

E.O. #1711

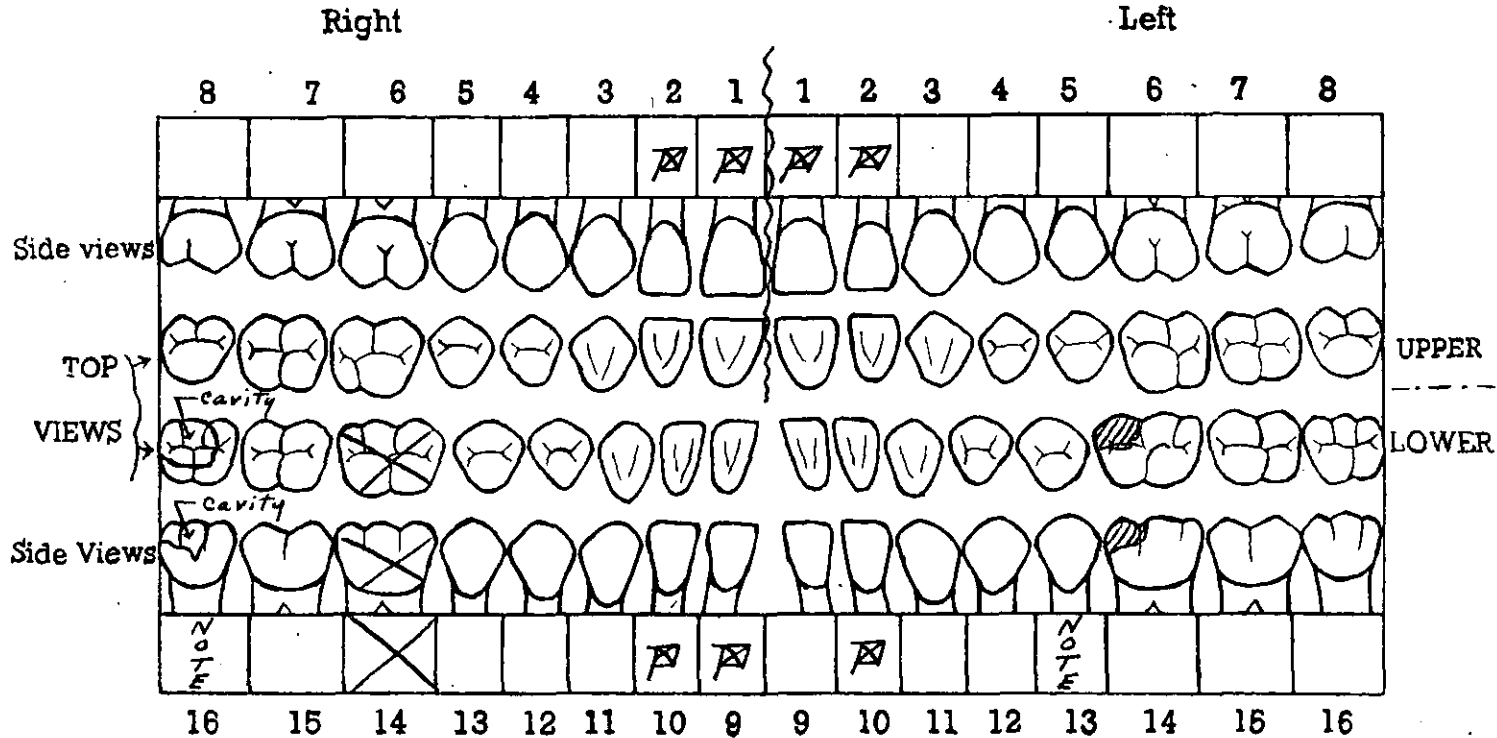
USMC St. AVOID
X-224
CC-8-193

TOOTH CHART

5 May 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), bicuspid (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.

Size - Average
 Color - Dull Ivory
 Posthumously
 Missing - R1, 2, 9 and 10
 L1, 2 and 10

Space - R13 to R15 7mm.
 Note: No fillings in teeth
Present however R16
may possibly have been
filled at one time.
 L13 is heavily inclined lingually.

Signature of Officer or other person who prepared Tooth chart
Wesley A. Neep

Verified by G.R.C. Officer

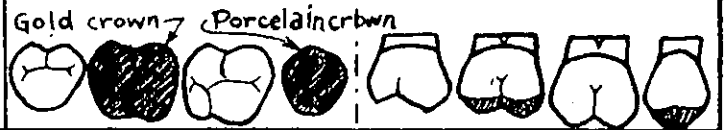
Alignment - Good except for L13

Calculus - Heavy
 Wear - Very heavy on all teeth.

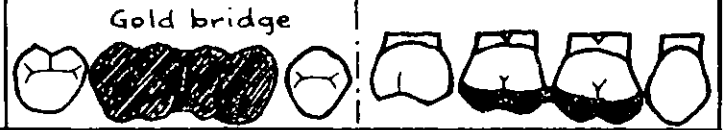
MISSING TEETH... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



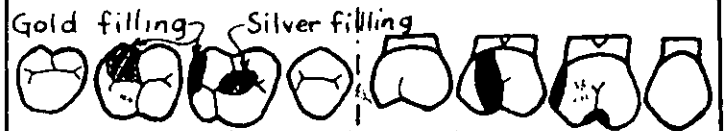
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



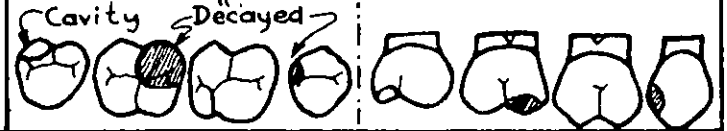
BRIDGE WORK... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



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

AIRMAIL

1st Ind.

~~QCMT-299~~

GRS European

SUBJECT: ~~Unidentifiable Remains~~
Transmittal Letter #4171

Department of the Army, OQMG, Washington 25, D. C., 13 October 1949

TO: Commanding General, American Graves Registration Command
European Area, APO 58, c/o Postmaster, New York, New York

1. Reference is made to basic communication.

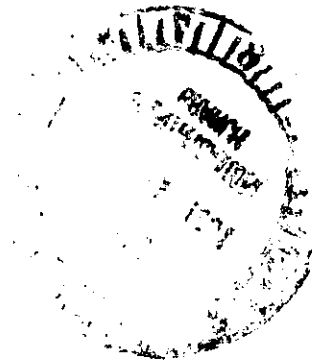
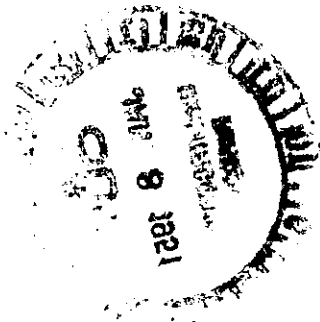
2. Subject cases have been accepted by this Office and approved as Unidentifiable, with the exception of X-6991, USMC St. Avold, which was suspended to your Headquarters by letter, this Office, dated 16 September 1949, File 293, GRS European, Subject: Identification of World War II Deceased.

FOR THE QUARTERMASTER GENERAL:

Incls w/s

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

Rice/id
Fey
REB

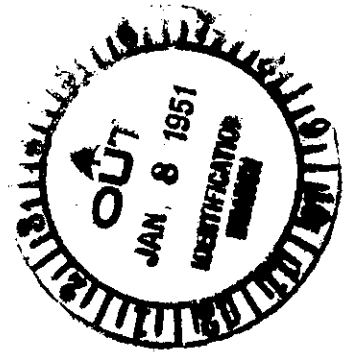


X 3991, Lt. St. Avold
Filing X-6991
ST. AVOLD

REB

TEC

AB
LoA
BTce/79



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HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

COPY

28 July 1949

Date

293. 7th Air Force - 1949 (Stamps)
SUBJECT: Unidentifiable Remains

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

1. The records pertaining to Unknown X- 224, Plot CC, Row 8, Grave 193, 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. 2235, dated 17-3-47. No further information is available.

FOR THE COMMANDING GENERAL:

/s/ H. P. HENRY
/t/ R. BERGER
E. E. STOUT

24 JUL 1949
Unidentifiable from
information presently
available

00MG

*WHT
24 July 49
CE New York
et al.*

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

RRE 293

28 July 1949
(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X - 224, Plot CC
Row 8, Grave 193, USMC ST. AVOLD, FRANCE,
have been reviewed and it is the opinion of this Office that sufficient
evidence is not available at the present time to establish the identity
of the deceased concerned. The remains concerned should be classified as
unidentifiable at the present time.

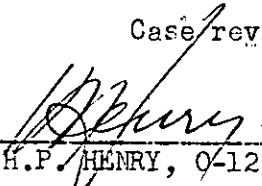
2. Report of Reprocessing of remains was forwarded to your
Office by Transmittal Letter No. 2235, dated 17-3-47.

Remarks:

Received 24 AUG 1949
Not identifiable from
information presently
available

QQMG

Case reviewed by undersigned Members of the Board of Review:


Col. H.P. HENRY, O-12589

QMC

Lt. Col. E.D. MULVANY, O-359598

QMC


Major R. BERGER, O-251736

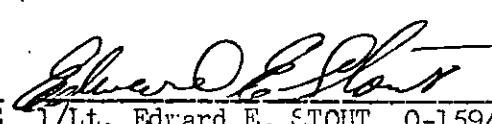
ORD

Capt. Jack C. HAYES, O-1577297

QMC

Capt. E.F. PRICE, Jr. O-1588236

QMC


1/Lt. Edward E. STOUT, O-1594512

CE

Incl #9

YMI MMM

1

This Grave form occupied by: BURK, Darrell O-2058978 2 LT
USMC ST AVOLD, FRANCE

Plot D, Row 15, Grave 25 **DISINTERMENT DIRECTIVE**
Date reburied: 15 Sept. 49 Date Disinterred: 15 Sept. 49

SECTION A — NAME AND BURIAL LOCATION OF DECEASED	M. R. SWART CAPT OMC	DIRECTIVE NUMBER 3574 00000	DATE 15 02 49		
			DAY	MONTH	YEAR

NAME <u>UNKNOWN</u>	SERIAL NUMBER <u>X-000224</u>	GRADE	ARM 0	RACE 0	RELIGION 6
------------------------	----------------------------------	-------	----------	-----------	---------------

CEMETERY <u>ST AVOLD FRANCE</u>	PLOT CC	ROW 8	GRAVE 193	DISPOSITION OF REMAINS 3503 80	
				CODE	DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE <u>ST. AVOLD, FRANCE</u>	NAME AND ADDRESS OF NEXT OF KIN (BY ADMINISTRATIVE DECISION)
---	--

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISTINTERRED
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER		ORGANIZATION <u>UNKNOWN</u>	RELIGION	IDENTIFICATION VERIFIED BY NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

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

OTHER MEANS OF IDENTIFICATION
SEE ATTACHED WORK SHEET

MINOR DISCREPANCIES (Prepare Discrepancy Report OMC Form 1194a for major discrepancies.)

REMAINS PREPARED AND PLACED IN CASKET

DATE BY	CASKET SEALED BY Karl K Kasca, Embalmer	EMBALMER (Signature) Karl K Kasca
DATE BY	CASKET BOXED AND MARKED 14 Mar 49 Karl K Kasca	ALL markings, tags and plates verified by Rafael T Ruiz, 1st Lt FA

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

Rafael T Ruiz
Rafael T Ruiz, 1st Lt FA, 7857 AGRC Zone 3 Hq
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

FILE
24 OCT 1949
REPATRIATION
BRANCH
MEM. DIV.

7716

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

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

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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

DISINTERMENT DIRECTIVE

Section A		Directive Number		Date	
Name & Burial Location of deceased		3574			
		Day Month		Year	
NAME	SERIAL NUMBER	RANK	ARMY	DATE OF DEATH	
UNKNOWN	X-224			Day	Month Year
CEMETERY			Disposition of Remains		
ST. AVOLD			Poll-Doubtful		
PLOT	ROW	GRAVE	COUNTRY	Code Dist. Pt.	
CC	8	193	FRANCE	Cause of Death	

Section B - Consignee and Next of Kin

Name and address of Consignee	Name and Address of Next of Kin.

Section C - Disinterment and Identification

NAME	Serial Number	Rank	Date of Death	Date Disinterred
UNKNOWN	X-224			20 Aug 48
Identification Tag on Remains	Organization	Religion	Identification verified by	
X Marker GRS			MATTHEW GRAY, EMBALLER Name & Title	

Section D - Preparation of Remains for Shipment

Nature of Burial	Condition of Remains
MATRESS COVER	FRACTURED SKULL, IN R/CLAVI CLE, R/RADIUS, R/L PELVIC. COMPLETELY DISARTICULATED.

Other Means of Identification

NONE

Minor Discrepancies

REP CRT OF BURIAL IMPOSSIBLE TO READ

Remains prepared and placed in ~~wooden box~~ ~~transfer box~~ *transfer box*

Date	24 Aug 48	By	<i>Matthew Gray</i> MATTHEW GRAY, EMBALLER
Casket Sealed by		Embalmer (Signature)	

Casket	marked	All markings, tags, plates verified
--------	--------	-------------------------------------

Date	By	By
------	----	----

I Hereby certify that all the foregoing operations ~~except casketing~~ were conducted and accomplished under my immediate supervision, and that the report above is correct.

H. Mead
H. LEAD, CAPT, GCS, 7857 AGRC ZONE 3 HQ
Signature of GRS Inspector (Grade & Orgn).

1. Prepare Discrepancy Report QMC Form 1194a for major discrepancies.
QMC Form 1194-Tis Form modified by Hq Third Zone, AGRC EA, APO 58 US Army, dtd 4/3/48

TOOTH CHART

UNKNOWN X - 224

Last Name

First

Initial

Serial No.

Unit

Organization

Place of Death

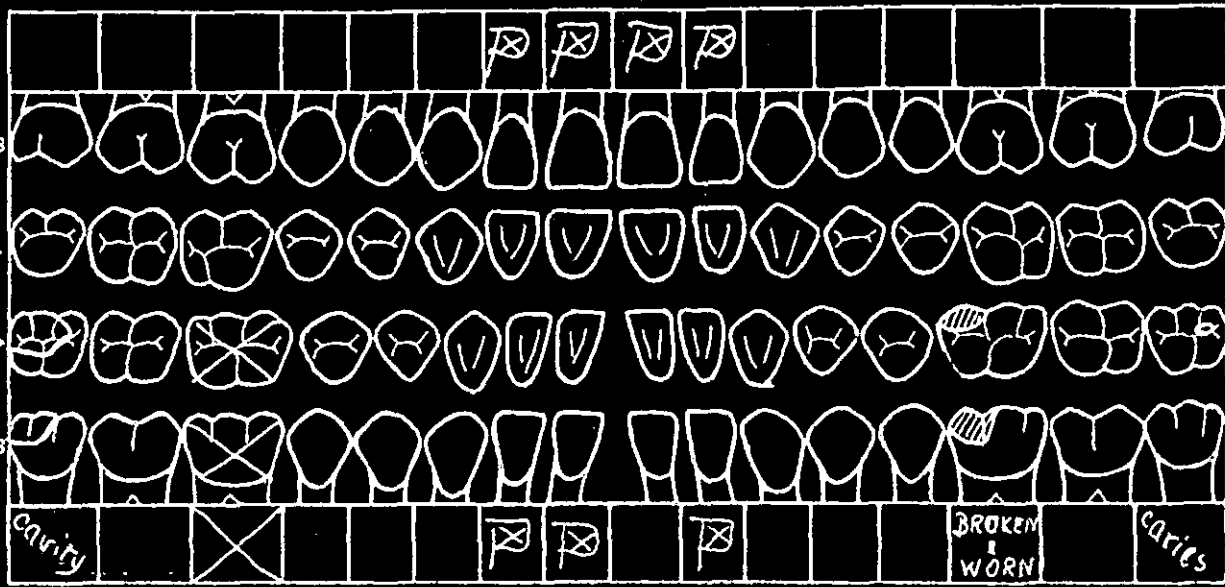
Date of Death

Cause of Death

Right

Left

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



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.

Edward Sebastian

Signature of Officer or other person who prepared Tooth chart

Ellsworth T. Mac Intyre

Verified by C. R. S. Officer

Ellsworth T. Mac Intyre, Captain QMC - C.I.P.

TOOTH CHART

21 February 1947

Date

UNKNOWN X - 224

Last Name

First

Initial

Rank

Serial No.

Unit

Organization

Place of Death

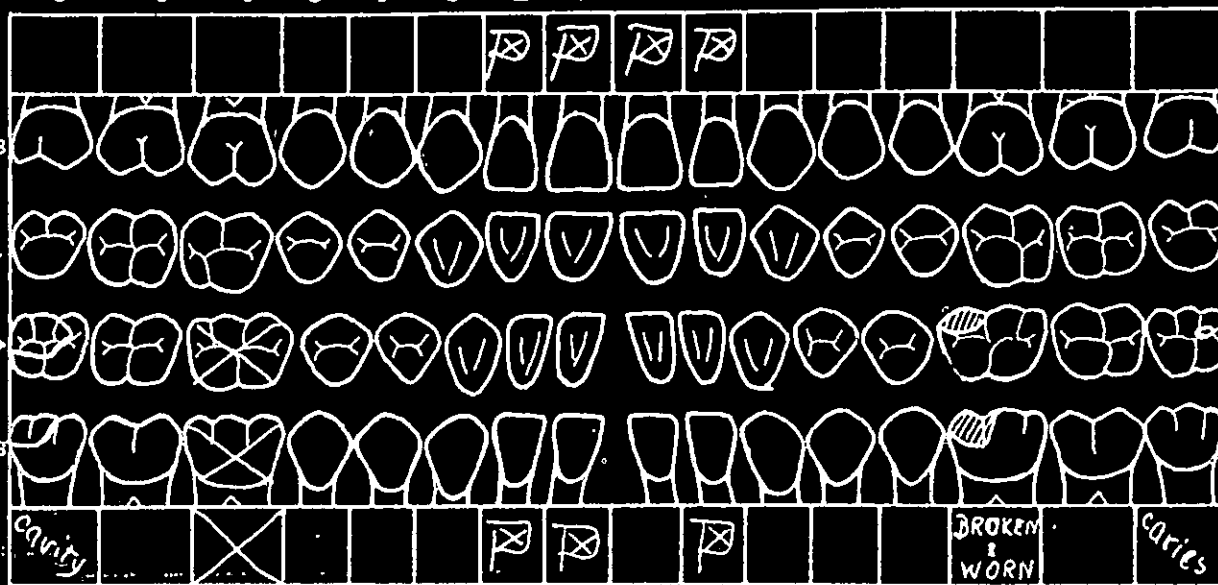
Date of Death

Cause of Death

Right

Left

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



16

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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.

Edward Sebastian

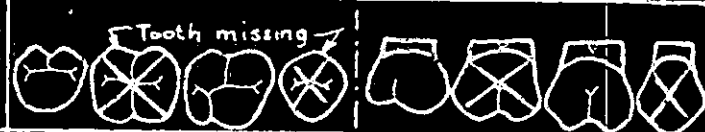
Signature of Officer or other person who prepared Tooth chart

Ellsworth T. Mac Intyre

Verified by G. R. S. Officer

Ellsworth T. Mac Intyre, Captain QMC / C.I.P.

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



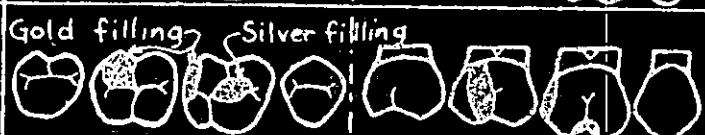
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus:



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

Posthumously missing R 1, 2, 9, 10 and L 1, 2, 10.

Spaces R 13-15, 8 mm.

Malposed and versed lingually L 13.

No fillings.

Broken off and worn smooth before death as indicated by shading L 14.

Extreme wear on occlusal and incisal surfaces.

Calculus heavy.

Very large cavity in R 16 which does not appear to have been filled.

Medium sized brown stained ivory colored teeth in good alignment with the one exception noted.

Lack of dental care may indicate non-American.

hb

CHECK LIST OF UNKNOWN

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

Unknown X - 224
Cemetery St-Avoid Cemetery, France
Plot CC Row 8 Grave 193

1. ~~Amended report~~ Date reprocessed 21 February 1947
(Hour) (date)

2. Place of death _____
(Name of closest town) (coordinates and letter Prefex, maps)

Sheet, scale and-serials used.

3. Remains ~~recovered~~ or disinterred by Central Identification Point, Strasbourg, France
(Name and organization)

4. Evacuated to Cemetery by _____
(Name and organization)

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

Item	Clothing Markings	Sizes	Color	Indicate unusual markings wear, tear, repairs, etc.
*Headgear _____ (type)				
Raincoat _____				
Overcoat _____				
Jacket, Field _____				
Jacket, Combat _____				
Mackinaw _____				
Sweater _____				
Jacket, HBT _____				
*Shirt, Wool, OD _____				
Undershirt, Wool _____				
Undershirt, Cotton _____				
Trousers HBT _____				
*Trousers, Wool OD _____				

none

Belt, Web none

Drawers, Wool none

Drawers, Cotton none

Leggings, Wool none (Note unusual lacing) none

Socks, Cotton none

*Shoes (type) none

Overshoes none

Web Equipment (type) none

(Other item) remnants of mattress-cover

(Other item) none

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

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

Shoulder Patch none

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

8. Description of Remains:

Age	<u>utd</u>	Height	<u>5'8"</u>	Weight	<u>145 Lbs</u>	Description of wounds	<u>utd</u>
Bandages or dressings	<u>utd</u>	Scars	<u>utd</u>	(Length, width, location)			
Tattoos	<u>utd</u>	(Number, location — illustrate on sep. page)					

Outstanding moles, warts or birthmarks utd
(yes-no; description, location)

Sunburn or tan, other than hands & face utd

Complexion utd
(light, med, dark, clear, pimples, pocks, freckles)

Build utd
(large, fat, thin, muscular)

Hair none found
(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) Beard or Goatee **utd** (length, heavy,

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 **see tooth chart**
 (white, size, unevenness, spacing, noticeable crowns, fillings, extract)

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

Jaw **utd** (large, small, normal) Circumference of head in inches **skull crushed**
 (hat band)

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

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

utd
 (extent and quantity of hair)

Hands **utd**

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

utd
 (unusual characteristics of fingernails)

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

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

utd Circumcision **utd** (yes-no) Pubic hair **utd** (color)

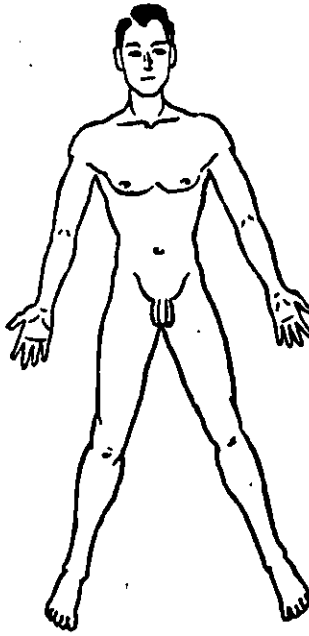
Hernioplasty **utd**
 (yes-no; location)

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

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

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

9. Black out parts of body not received at cemetery: **see attached chart**



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

If not, explain too decomposed

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

12. Remarks: Body consists of complete skeleton, skull crushed. No clothing. All teeth recovered and charted. Fluoroscopic Examination Negative. Est. weight of remains recovered 45 lbs. Nothing found to warrant Chemical Laboratory Examination.

I certify that I have personally viewed the remains of subject deceased and all resulting information has been recorded to the best of my knowledge.

On cross:

UNKNOWN X - 224
Plot CC Row 8 Grave 193

Ellsworth T. Mac Intyre
Ellsworth T. Mac Intyre
Officers Name

Captain QMC

Rank

Service

Central Identification Point

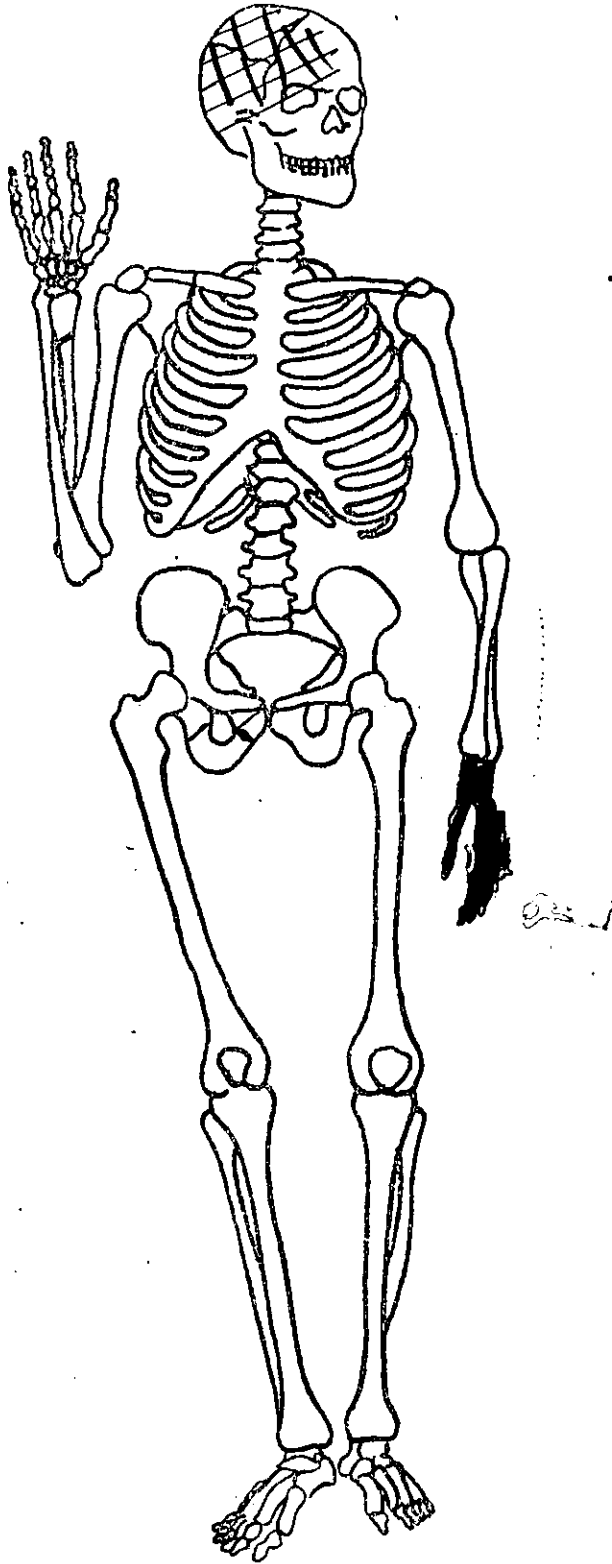
Organization

X - 224

St-Ayold Cemetery, France.
Plot C Row 8 Grave 193

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY).



CHEM LISE FOR UNKNOWN

1. Unknown X **43** U. S. Military Cemetery No. **1** Nurnberg, Germany

2. If remains were disinterred, attach Check List for Disinterments.

3. Arrived at cemetery **1000 4 June 1945** **65th QM Co**
(hour) (date) (collecting point)

4. Place of death **Danube River, near Oberottensheim, Austria**
(name) (coordinates and landmarks)

5. **7690 middle Danube sheet Linz W-8 1:1000,000**

6. Remains recovered by **65th QM Co**
(name and organization)

7. Evacuated to cemetery by **3043rd QM Co**
(name and organization)

8. Is load list attached **Yes** Are names of deceased found in same area as this Unknown starred **Yes** 10. Are
(yes-no) (yes-no)

circumstances described which may indicate organization of the deceased **NO** 11. If only part of a body was received, was
(yes-no) a careful search made for other parts of Unknown **NO** body intact when found
(yes-no)

12. If remains come from vehicle, plane, etc: **Not applicable. Body taken from river**
(type of vehicle or plane, nick name, serial number, organization or symbols)

13. **Not applicable**

14. Crew list **Not applicable**
(names of other deceased and positions in which found)

15. **None**

16. **None**

17. If a tank, which hatches were free and available for escape use **Not applicable**
wasn't there of crew of planes were seen

18. If organization to which vehicle or plane was assigned or if names of all other deceased are not known, give detailed information concerning vehicle or plane **Does not pertain to this case, body removed**
(parts of markings or symbols) (burned) (pierced by shell fire - where)

19. **from river.**

20. **Not applicable**
(found in town field by road etc.) (damaged by mine explosion)

21. **Not applicable, no information acquired so far as to cause of death.**
(names of men who escaped) (description of other vehicles or planes in same area)

22. Detailed description of personal effects **There were no personal effects when received**
(Indicate exact pocket or part of body where found)

23. **at cemetery**

24. **None**

25. **None**

26. **None**

RESTRICTED

CHECK LIST FOR UNKNOWN

(name of soldier processing remains)

- 1. Unknown X **43** U. S. Military Cemetery No. **1** **Nurnberg, Germany**
- 2. If remains were disinterred, attach Check List for Disinterments.
- 3. Arrived at cemetery **1000 4 June 1945** **65th QM Co**
(hour) (date) (collecting point)
- 4. Place of death **Danube River, near Oberottensheim, Austria**
(name) (coordinates and landmarks)
- 5. **7690 middle Danube sheet Linz W-8 1:1000,000**
- 6. Remains recovered by **65th QM Co**
(name and organization)
- 7. Evacuated to cemetery by **3043rd CMGR Co**
(name and organization)
- 8. Is load list attached **Yes** Are names of deceased found in same area as this Unknown starred **Yes** 10. Are
(yes-no) (yes-no)
- 9. Are names of deceased found in same area as this Unknown starred **Yes** 10. Are
(yes-no) (yes-no)
- 11. If only part of a body was received, was
 a careful search made for other parts of Unknown **NO** **body intact when found**
(yes-no) (yes-no)
- 12. If remains come from vehicle, plane, etc.: **Not applicable. Body taken from river**
(type of vehicle or plane, nick name, serial number, organization or symbols)
- 13. **Not applicable**
- 14. Crew list **Not applicable**
(names of other deceased and positions in which found)
- 15. **Not applicable**
- 16. **Not applicable**
- 17. If a tank, which hatches were free and available for escape use **Not applicable**
- 18. If organization to which vehicle or plane was assigned or if names of all other deceased are not known, give detailed information
 concerning vehicle or plane **Does not pertain to this case, body removed**
(parts of markings or symbols) (burned) (pierced by shell fire - where)
- 19. **from river.**
- 20. **Not applicable**
(found in town field by road etc.) (damaged by mine explosion)
- 21. **Not applicable, no information acquired so far as to cause**
of death.
(names of men who escaped) (description of other vehicles or planes in same area)
- 22. Detailed description of personal effects **There were no personal effects when received**
(Indicate exact pocket or part of body where found)
- 23. **at cemetery**
- 24.
- 25.
- 26.

RESTRICTED

Description of clothing and equipment: (If clothes do not fit, obtain sizes from body measurements)

Item	Clothing Markings	Sizes	Color	Indicate unusual markings, wear, tear, repairs etc.
27. * Headgear (type)	No headgear, measurements taken of skull and found to be 21"			
28. Raincoat				
29. Overcoat	None			
30. Jacket, Field	None			
31. Jacket, Combat	None			
32. Mackinaw	None			
33. Sweater	None			
34. Jacket, HBT	None			
35. * Shirt, Wool OD	Measurements of chest at nipples were 36"			
36. Undershirt, Wool	The arms were 31" neck 15"			
37. Undershirt, Cotton	None			
38. Trousers, HBT	None			
39. * Trousers, Wool OD	Est. 32 x 35 Measurements taken of waist and			
40. Belt, Web	None			inseam.
41. Drawers, Wool	None			
42. Drawers, Cotton	None			
43. Leggings	None			(Note unusual lacing)
44. Socks Wool Cotton	None			
45. * Shoes (type)	No shoes--est. size 10 Measurement of foot taken.			
46. Overshoes	None			
47. Web Equipment (type)	None			
48. (other item)	None			
49. (other item)	None			

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

50. Chevrons or Insignia **None** (type and location; shirt jacket coat helmet) Shoulder Patch **None**

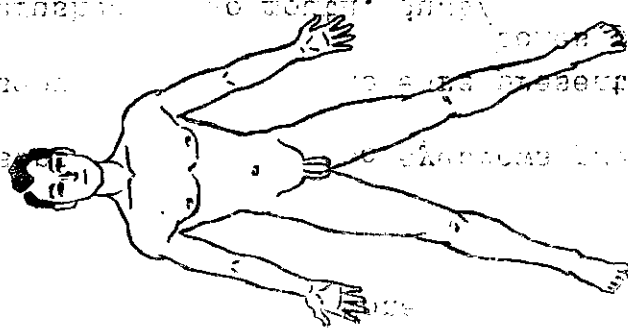
51. Description of Remains

52. Age **Est 27** (years) Height **5'8"** (ft-in) Weight **Est 120** (lbs) Description of wounds **Crushed frontal. Both**
 53. **parietals, temporals and occipitals cracked.**

- 54. Bandages or dressings **None** Scars **None visible**
(length, width, location)
- 55.
- 56. Tattoos **None**
(number, location — illustrate on sep. page)
- 57. Outstanding moles, warts or birthmarks **None visible**
(yes-no) (description, location)
- 58. **Body in an advanced state**
- 59. Sunburn of tan, other than hands and face **Undeterminable, of decomposition.**
- 60. Tobacco stain on fingers or teeth **No tobacco stains noticeable on teeth.**
(designate where extent)
- 61. Complexion **Unknown** Build **Thin**
(light, med, dark, clear, pimples, pocks, freckles) (large, fat, thin, muscular)
- 62.
- 63. Hair **No hair could be found with the remains.**
(color, length, quantity, curly, wavy, straight, whorls, or definite parting, baldness, widows peak)
- 64.
distinctive cutting or other characteristics)
- 65. Sideburns **None** Mustache **None** Beard or goatee **None**
(color, setting, shape) (color, size, shape) Length,
- 66.
heavy, light, color, extent)
- 67. Eyes **No eyes present** Eyebrows **No eyebrows present**
(color, setting, shape) (color, bushiness, extend across nose)
- 68. Nose **No nose present** Ears **No ears present**
(size, shape, straight) (size set, close to or far from head)
- 69. Forehead **Frontal, crushed** Mouth **No mouth, just/** Lips **None present**
(high, wide, wrinkled) (large, medium, small) (small, large, full)
- 70. Teeth **White, even and in fairly good condition (See tooth Chart)**
(white, size, unevenness, spacing, noticeable crowns, fillings, extractions)
- 71. Chin **No chin, manible present only** Cheekbones **Normal**
(prominent, receding, pointed, dimple, double) (high, normal)
- 72. Jaw **Normal** Circumference of head in inches **Estimated to be 21"**
(large, small, normal) (hat band)
- 73. Neck **Normal** Larynx **Normal** Shoulders **Broad**
(size, long, short, normal, wrinkled) (prominent, normal) (broad,
- 74. Arms **33" long, muscular and no hair visible.,**
straight, small, rounded) (length), (muscular, color, extent and quantity of hair)
- 75. **no vaccination, 6" wrist** Hands **Normal.**
(vaccination scar, size of wrists) (large, small, normal, calloused noticeably)
- 76. **Undeterminable, epidermis missing.**
(marks on fingers indicating that rings were worn)
- 77.

RESTRICTED

78. Fingers **Long, slender & none missing**
(short, thick, long, slender; missing knuckles; missing fingers or joints)
79. **Fingernails normal**
(Unusual characteristics of fingernails)
80. Chest **34" at nipples, no hair, normal.**
(size at nipples; color, quantity and extent of hair; large, small, normal)
81. Back **No hair on back** Waist **31", no appendectomy and no hair**
(quantity and extent of hair) (at naval, appendectomy, amount and color of hair)
82. Circumcised **Yes** Pubic hair **no pubic/ hair, No**
(yes-no) (color) (yes-no) (location)
83. Legs **33" long, normal with no hair visible**
(Inseam), (muscular; knock-kneed, bowed, normal) (quantity, color and extent of hair)
84. Feet **9 1/2" long. No callouses visible. Straight with outside skin missing.**
(size; corns; callouses; flat) (slender, straight, crooked, overlap)
85. Evidence of **Fractured skull, represented by small particals of**
(chest) (nose, arms, legs, etc.)
bones at base of skull.
86. Block out parts of body not received at cemetery



87. Have photographs been made and attached **No** If not, explain **Body in advance state of de-**
(yes-no) **composition**
88. Have fingerprints been placed on GRS No 1 **No** If not, explain **No skin on fingers. Body in advance state of de-**
(yes-no) **composition**
89. Has tooth chart been prepared? **Yes** If not, explain
(yes-no)
90. Remarks: **Examination of the body reveals a crushed Frontal, both**
91. **parietals and temporals cracked as was occipital. Must have re-**
92. **ceived a terrific blow in head. Body was in an advanced stage of**
93. **decomposition, extremity thin and epidermis missing on most parts**
94. **of body making it impossible to take fingerprints. No bullet holes**
95. **visible and lower extremities are in a cramped position.**
- 96.

Name of Collecting Point

28 May 1945

Exact Location

Date Delivered to Cemetery

NAME (Last Name First)	ASN	ORGANIZATIONS (If unknown, give all possible organizations) (Use more than one line if necessary)	PLACE OF DEATH (Give coordinates, land marks, name of closest town, country)	DATE AND HOUR of delivery to point
** Unknown X-43	Unknown	Unknown	Found in Danube River near Oberottensheim, Germany (7690) Middle Danube, Linz W-8 1:100,000	27 May 1945 1850
** Unknown X-32	Unknown	Unknown	Found in Danube River near Oberottensheim, Germany (7690) Middle Danube, Linz W-8 1:100,000	27 May 1945 1850
SPANGNOLI Umberto	81-I-202138	1190th Labor Super- vision Company	Linz, Austria (8588) Upper Danube, Linz W-8 1:100,000	28 May 1945 1200

NAME, RANK, ASN, ORGANIZATION AND TRUCK NO. OF DRIVER DELIVERING BODIES TO COLLECTING POINT

Thomas A. Hyde Lieutenant
NAME RANK ASN

1190th Labor Supervision Co
ORGANIZATION

NAME, RANK, ASN, ORGANIZATION AND TRUCK NUMBER OF DRIVER EVACUATING BODIES FROM COLLECTING POINT TO THE CEMETERY

BROWN T/5 59693760
NAME RANK ASN

65 JMI Co Tr. 253507-3
ORGANIZATION

- NOTE :** Whenever Unknowns are processed, personnel operating the collecting point must furnish additional information to the cemetery covering the following points:
1. If evacuated from vehicle or plane, obtain the serial number of the plane or vehicle, organization if possible, type of plane or vehicle, position occupied by the deceased, and description of how vehicle or plane was destroyed.
 2. Name of other deceased found in the same vicinity as the Unknown.
 3. All possible organizations to which the deceased may have been assigned.
 4. All other clues obtainable which may aid in establishing identity, including the exact location and position in which the remains were found.

TOOTH CHART

4 June 1945
 Date

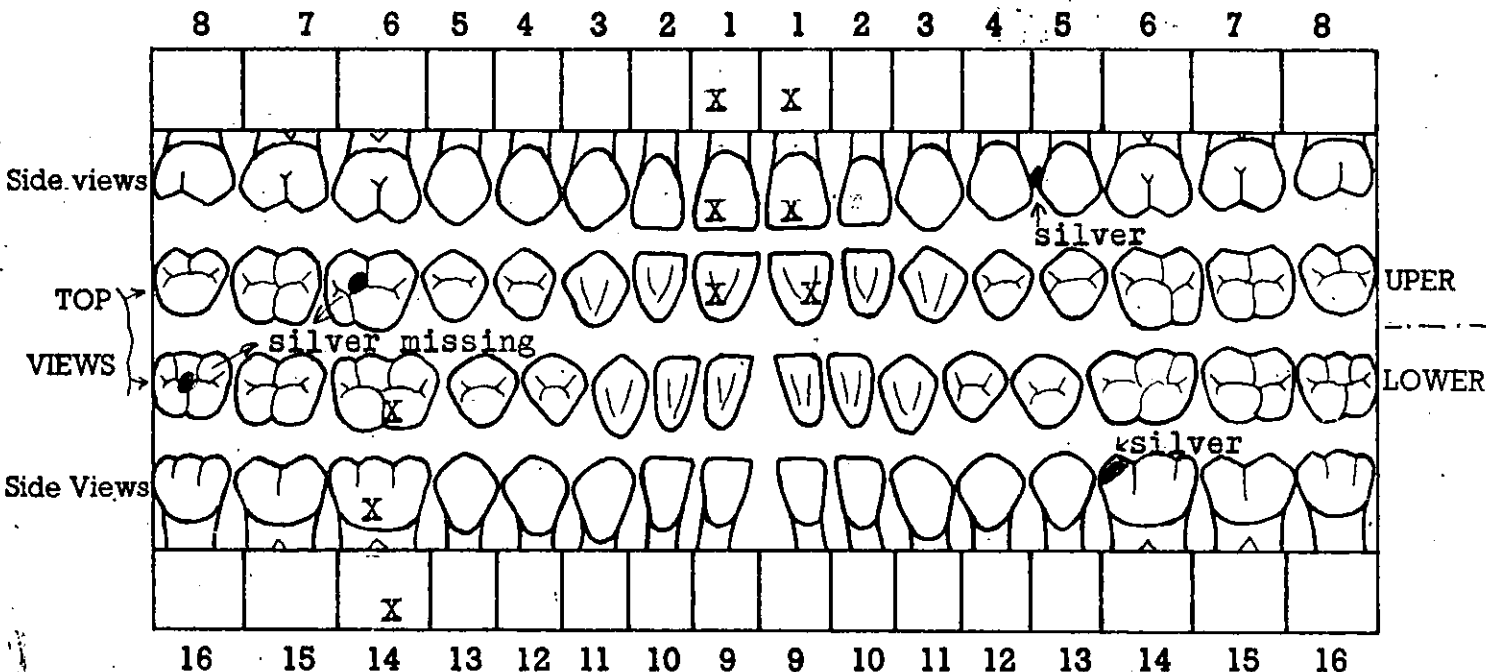
UNKNOWN X-43 Unknown Unknown Unknown
 Last Name First Initial Rank Serial No.

Unknown Unknown
 Unit Organization

Danube River near Oberattenshein, Austria Drowned
 Place of Death Date of Death Cause of Death

Right

Left



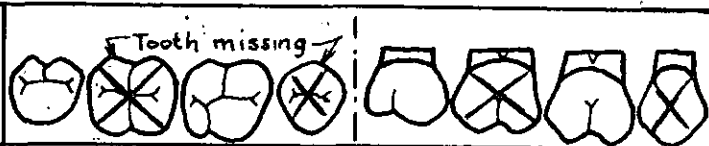
This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth),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

Signature of Officer or other person who prepared Tooth chart

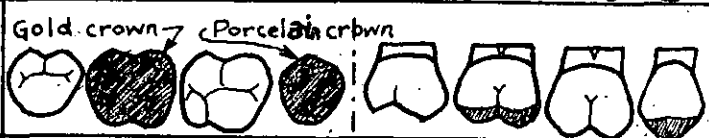
R. F. Albera

R. F. ALBERA, Verified by G. R. S. Officer
 1st Lt., QMC
 3048th QM Gr Reg Co

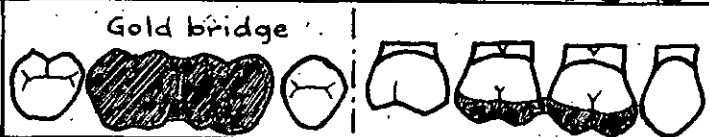
MISSING TEETH... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



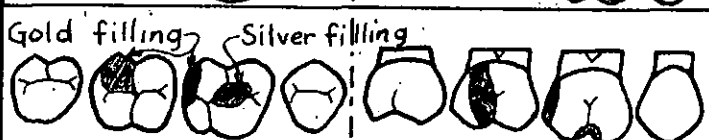
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



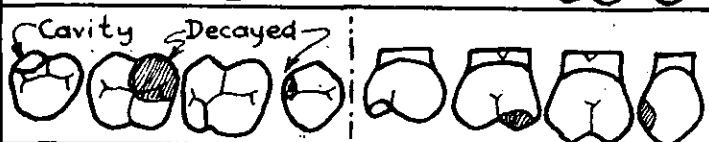
BRIDGE WORK... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



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

REMARKS:

This body was found in Danube River near Oberottenshein, Germany, Coordinates 7696, Map Reference Linz, W-8, scale 1:100,000. Examination of the body reveals the following information: Crushed Frontal, both parietals, temporals and occipital cracked. (Must have received a terrific blow in head). Body was in an advance state of decomposition, impossible to take finger prints. It is extremely thin and it's approximate weight is 120 lb. His height is 5' 8". No bullet holes could be found on body. The lower extremities are in a cramped position and the hands are moulded into the abdominal cavity. This body is buried as Unknown X-43.



R. F. ALBERA
1st Lt., QMC
GR Officer

RESTRICTED

REPORT OF BURIAL

TM 10-630 AND AR 20-15

11 AUG 45

Date

UNKNOWN X-224 Last Name First Initial UNK Rank UNK Serial No.

Unknown Unit Unknown Organization (Fractured Skull)

Near Oberettensheim, Austria Place of Death Est 20 May 1945 Date of Death Drowned Cause of Death

0900 - 9 Aug 45 Time and Date of Burial U.S. MIL. COM Name of Cemetery St. Aved, France Name or Coordinates of Location

193 Grave Number 8 Row Number 00 Plot Number Cross Type of Marker

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

If No Identification Tags Body was brought to cemetery guide. See attached sheets
How were remains identified? for additional information.

What means of identification were buried with the body?

GRS #1 in bottle and embossed plate.

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

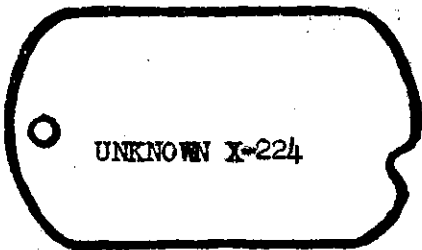
Who is buried on:

Deceased's Right: MASTON Name 16073118 Serial No. W/Sgt. Rank 300 Eng. Bn. Organization 192 Grave No.

Deceased's Left: HOTHMAN Name 33201603 Serial No. Cpl Rank UNK Organization 194 Grave No.

Signature or Name, Rank and if possible Organization of person furnishing above Date when other than officer reporting burial.

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



Emergency Addressee UNK Name

UNK Address

Religion UNK

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

REBURIAL

No personal effects

Previously buried in U.S. MIL. Cemetery #1
Nurnberg, Germany

Plot c Row 8 Grave 193

E.H. De Weese
E.H. DE WEESE
1st Lt. OMC
3048th OMCGR CO.
Disintering Officer

* As Unknown X-43

Signature of Officer or other person reporting burial

Reintering Officer: GERALD L. HORNER 1st Lt. OMC 0-205224
610th QM GR. REG. CO.

REPORT OF BURIAL

TM 10-630 AND AR 15

11 AUG 45

Date

UNKNOWN X-224 Last Name First UNK Rank UNK Serial No.

Unknown Unit Unknown Organization (Fractured Skull)

Near Oberattensheim, Austria Place of Death Est 20 May 1945 Date of Death Drowned Cause of Death

0900 - 9 Aug 45 Time and Date of Burial U.S. MIL. Cem Name of Cemetery St. Avold, France Name or Coordinates of Location

193 Grave Number 8 Row Number CC Plot Number Cross Type of Marker

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

If No Identification Tags Body was brought to cemetery nude. See attached sheets
How were remains identified? for additional information.

What means of identification were buried with the body?

GRS #1 in bottle and embossed plate.

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

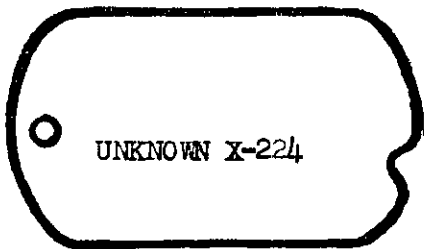
Who is buried on:

Deceased's Right: MASTON Name 16073118 Serial No. M/Sgt. Rank 300 Eng. Bn. Organization 192 Grave No.

Deceased's Left: BOTHMAN Name 33201603 Serial No. Cpl Rank Unk Organization 194 Grave No.

Signature or Name, Rank and if possible Organization of person furnishing above Date when other than officer reporting burial.

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



Emergency Addressee UNK Name

UNK Address

Religion UNK

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

No personal effects

U.S. MIL 1947 #1
Nurnberg, Germany

E.R. De Weese
E.R. DE WEESE
1st Lt. QMC
3048th QMGR CO.
Disinterring Officer

Plot C 193 Row 8

* As Unknown X-43

Signature of Officer or other person reporting burial

Reinterring Officer: GERALD L. HORNBER Lt. QMC 0-205224
610th QM GR. REG. CO.

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: | Laundry Marks: |
| Weight: | Number of Rifle: |
| Color of Eyes: | Wear Glasses? |
| Color of Hair: | Is Tooth Chart Attached? |
| Race: | |

(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.

Not below any identifying clues found, such as letters, photographs, probable organization of deceased, etc.:

Left Hand

4
3
2
1
Thumb

Right Hand

4
3
2
1
Thumb

TOOTH CHART

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

Indicate: missing natural teeth by X; crowns by C; fillings by F; artificial eyes by O; linking anchor teeth; replacements by artificial teeth by Y

Characteristics of _____

Other Data:

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.

RESTRICTED
REPORT OF BURIAL 12

TM 10-630 AND AR 30-1815

7 June 1945
Date

<u>UNKNOWN X-43</u>		<u>Unknown</u>	<u>Unknown</u>
<small>Last Name</small>	<small>First</small>	<small>Rank</small>	<small>Serial No.</small>
<u>Unknown</u>		<u>Unknown</u>	
<small>Unit</small>		<small>Organization</small>	
<u>Near Oberottenshein, Austria</u>		<u>Est. 20 May 1945</u>	<u>(Fractured Skull)</u>
<small>Place of Death</small>		<small>Date of Death</small>	<small>Cause of Death</small>
<u>1030 4 June 1945</u>		<u>U. S. Mil. Cem #1, Nuremberg, Germany</u>	
<small>Time and Date of Burial</small>		<small>Name of Cemetery</small>	
<u>193</u>		<u>B</u>	<u>C</u>
<small>Grave Number</small>	<small>Row Number</small>	<small>Plot Number</small>	<small>Type of Marker</small>
		<u>Cross</u>	

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

If No Identification Tags
How were remains identified? Body was brought to cemetery nude. See attached sheets for additional information.

What means of identification were buried with the body?

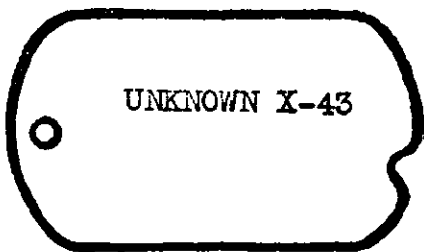
Graves Registration Sheet No. 1 in bottle and embossed plate

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

Who is buried on:

Deceased's Right:	<u>MASTON</u>	<u>16073118</u>	<u>M/Sgt</u>	<u>300 Eng Bn</u>	<u>192</u>
	<small>Name</small>	<small>Serial No.</small>	<small>Rank</small>	<small>Organization</small>	<small>Grave No.</small>
Deceased's Left:	<u>UNKNOWN X-44</u>	<u>Unknown</u>	<u>Unknown</u>	<u>Unknown</u>	<u>194</u>
	<small>Name</small>	<small>Serial No.</small>	<small>Rank</small>	<small>Organization</small>	<small>Grave No.</small>

Signature or Name, Rank and if possible Organization of person furnishing above Data when other than officer reporting burial.



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

Emergency Addressee Unknown

Name

Unknown

Address

Religion Unknown

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

No Personal Effects

R. F. Albera
R. F. ALBERA
1st Lt, QMC,
3048th QMGR Co

Signature of Officer or other person reporting burial

Verified by G.R.S. Officer

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: _____ Laundry Marks: _____
 Weight: _____ Number of Rifle: _____
 Color of Eyes: _____ Wear Glasses? _____
 Color of Hair: _____ Is Tooth Chart Attached? _____
 Race: _____

(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.

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

Left Hand

Right Hand

Thumb

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.

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

Indicate: missing natural teeth by X; crowns by C; fillings by F; bridges by B; missing anchor teeth; replacements by artificial teeth by A.

Cameras:

Other Data: