243 und A. avall 2-6018

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-6018 St Avold
(POC) ST LAURENT

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# REINTERRED U.S. MIL. CEM. ST. AVOID 00 - 9 -

· AGRC· Form w10 (Revised) 1 January 1946 --1.

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	a.	NALE		HANK		ASN
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				ion established; No. u believe the deceased		If so, state
	a.	NAME		RAUK		ASN
	b.	ORGANINAS	!ION			
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Service of Colmar  a. By whom?  Service of Colmar  b. Is sketch attached?  Yes  Who furnished the casket?  Expe of casket  For marked?  Service of Colmar, Sheriff, P.O.W.,s  (Civilian, American hill or German hill)  c. What are the names and addresses?  Colmar  b. Are certificates and statements attached?  Yes  Service of Colmar of the AAF).  Where remains found in the plane wreckage?  a. Give location in plane from which the bodies were removed  (Tail summer, pilot, radio turgue, stor, or front, side, of plane)  b. Near wreckage?		Boy of U.S.A. No 1
Where are the causiony relatively.  (Town hall, causiony, bargurantisteric office)  a. What information was obtained thereon?  b. Where was the information obtained?  c. Ey when?  What is the date of darth?  Unknown  a. Give basis  What is the cause of doeth?  What is the cause of doeth?  What is the date of burial?  April 1945  a. Give basis  She riff  Bennwihr  a. Give basis  Whet is the place of death; 500yds outside of Coords V-6,95-4,90  Bennwihr  a. Give basis  Where were the remains found; 500 yds outside of Coords V-6,95-4,90  Bennwihr  a. Fy when?  Service of Colmar  b. Is sketch attached?  Who furnished the casket?  Eyre of casket  For marked?  Who made the burial?  Service of Colmar, Sheriff, P.O.W.s  (Uivilian, American hil or German hil)  c. Whet are the measu and Adresses?  Colmar  b. Are certificates and containents attached?  Colmar  Colmar  Colmar  Colmar  b. Are certificates and intendents attached?  Colmar  colve location in plane from which the bedies were repoved  (End) gummer, pilet, radio turned, stor, or front, side, of plane)  b. Were weekese?  O. Scone of creak ward be averentianed. Give complete results of investigation (if received, store when ond by when)	·	a. From what sounce was whis information obtained? Unknown (Identification tags, pursual effects)
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a. What information was obtained thereon? None  b. Where was the information obtained? c. Ey whon? Linknown a. Give busis What is the cause of death? Unknown a. Give busis What is the date of burial? April 1945 b. Give busis What is the date of burial? April 1945 b. Give busis What is the place of death? SOOyds outside of Coords V-6.95-4.90 Bennwing a. Give busis Bod y found there  Europe Sheet Where were the remains found; 500 yds outside of Coords V-6.95-4.90 Bennwing b. Is sketch attached? Yes Who furnished the casket?  Type of casket  Whet are the names and adversaces?  Colmer  b. Are certificates and statements attached? Yes  SOTION 3 - AIR CORPS DECLISES (in the countered only if deceased is believe to be compared found in plane from which the bedies were repoved  (East gummer, pilot, radi, turner, stat, or front, side, of plane) b. Hear wreckage?  O. Scane of casks work when and by whee)		
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b. Where was the information obtained?  c. By whon?  What is the date of death?  Burden a. Give basis  What is the date of burial?  April 1945  a. Give basis  What is the date of burial?  She riff  Burope Sheet  What is the place of death? 500yds outside of Coords V-6.95-4.90  Bennwihr  a. Give basis  Bod y found there  Where were the remains found? 500 yds outside of Coords V-6.95-4.90  Bennwihr  a. By whom?  Service of Colmar  b. Is sketch attached?  Tes  What a deshet used?  Who furnished the casket?  Sype of casket  For marked?  What are the nemes and addresses?  Colmar  b. Are certificates and testenests attached?  Colmar  colmar  b. Are certificates and testenests attached?  Colmar  b. Are certificates and testenests attached?  Colmar  colmar  b. Are certificates and testenests attached?  Colmar  b. Are certificates and testenests attached?  Colmar  b. Are certificates and testenests attached?  Colmar  Colmar  b. Are certificates and testenests attached?  Colmar  Colm		a. What information was obtained thereon? None
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<ul> <li>g. Give location in plane from which the bodies were removed  (Tail gummer, pilot, radio turno, etc., or front, side, of plane)</li> <li>b. Near wreckege?</li> <li>Scene of crack with be investigated. Give complete results of investigation (if removed, state when and by whom)</li> </ul>	5 <b>.</b>	What is the place of death? 500yds outside of Coords V-6.95-4.90  Bennwihr  a. Give basis Bod y found there  Where were the remains found? 500 yds outside of Coords V-6.95-4.90  Bennwihr  a. By whom? Service of Colmar  b. Is sketch attached? Yes  Was a cashet used? No Who furnished the casket?
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gation (if removed, syste when and by whom)	7. 3.	What is the place of death? 500yds cutside of Bennwihr  a. Give besis Bod y found there  Europe Sheet  Where were the remains found? 500 yds cutside of Goords V-6.95-4.90  Bennwihr  a. By whow? Service of Colmar  b. Is sketch attached? Yes  Was a cashet used? No Who furnished the cashet?  Bype of cashet Fow maked?  Who made the burial? Service of Colmar , Sheriff, P.O.W .s  (Civilian, American hil or German hil)  a. What are the names and addresses?  Colmar  b. Are certificates and statements attached? Yes  ION B - AIR CORPS DECEASE! (For me completed only if deceased is believe with a maker of the AAT).  Were remains found in the plane wreckage?  a. Give location in plane from which the bedies were removed  (Tail gumper, pilot, radio turgue, sto., or front, side, of plane)
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í	'c. Give numbers on motors, machine guns, instruments, radios or other equipment:
21.	How did crash occur? Anti-aircraft
•	Enemy planes? Collision?
22.	Did plane explode in the air? On the Ground?
23.	Did plane burn in the air?On the ground?
24.	What was the direction of the flight?
25.	What was the civilian opinion regarding the destination of
	the plane?
26.	Had bombs been released prior to the crash?
27.	Does specific time and date of crash correspond with the date of death of above named deceased?
28.	Number of planes in formation prior to crash
29.	State precise time and date of plane crash (Night?, Day?)
30.	Were parachutists seen? How many? Escaped?
	Prisoners?
SECT	ION C - ARIORED CORPS DECEASED (To be completed only if deceased is believed to have been a member of the Armored Force).
31.	Were remains found in wreckage of a tank?
	a. Give specific position in tank from which deceased was
	removed (Radio man, driver, asst driver or. front, side, or back)
	b. Rear wreckage?
32.	Location of destroyed tank be investigated. Give complete results of investigation: (If removed, state when and by whom)
	a. Type of tank
	b. Markings and/or name of tank
	c. Numbers on motors, machine guns, ammunition, instruments,
	etc.
33.	What was the type of enemy action that resulted in the tank's disablement?
34.	Did tank explode? Burn?
35.	Number of tanks in immediate vicinity at time of disablement
36.	Does specific time and date of disablement correspond with date of death of above named deceased?
37.	Precise time and date of destruction of tank (Fight?, Day?)
38.	Did any of the crew members escape? Prisoners?

fig. (a) (b) (b)

SECTION D - OTHER BRANCH (To be filled out if B & C are not applicable) Did death occur from any other means? (i.e., truck, jeep, mines, drowing, or small arms fire) Unknown 39. If so, give complete and thorough results of the interrogation. Are all certificates and statements of people who possessed knowledge of the case attached? State the specific clues and evidence that were obtained in 40. securing the name and facts regarding the above listed deceased --- None----SECTION E - GENERAL (To be completed by investigation in all cases) Were personal effects recovered by investigating team 41. If not, state reason Nonez available a. Were identification tags found at the time of death? Unknown Where?\_\_\_\_\_By whom?\_\_\_\_\_ Present disposition\_\_\_\_\_ If deceased is not identified, personal effects will not be forwarded to PE Depot, but will remain with this form until final identification is made, or investigation abandoned. Were personal effects found at the time of death? Unknow n Where? By whom? Present disposition Was deceased identified by living members of the crew at CA the time of death? No Did Cemetery register or cross indicate the immunization d. shot? Was deceased given first aid? Unknown If so, where? 42. By whom? Are statements from the medical people Was deceased evacuated to a German hospital?\_\_\_\_\_ 43. Where? \_\_\_\_\_ Names of the people concerned\_\_\_\_\_ Is it possible on surface investigation to obtain from civi-44. lian sources a physical description of the deceased? Is it possible on surface investigation to obtain from civi-45. lian sources the condition of the remains? (Burnt? Decapitated?etc) 46. Do facts surrounding deat, show any evidence that it might be an atrocity case? If so, give basis for positive assumption\_\_\_\_\_ If so, has high r headquarters been notified? Was case previous! investigated? No By whom? When?

	See Stateme	ents						
49.	Are all positive statements resurrounding death attached?	egarding ident <b>í</b> fi <b>Yes</b>	cation and particulars					
50.	Has any information been given outside the insediate vicinity	concerning isol						
51.	Was investigation proceded by	edvanced publici	ty?Ye <b>s</b>					
	(If special investigation, give	e case number)						
52.	Give brief narrative							
	Se	e Statements						
	(Use attached	sheets, if neces	sary)					
		Jeron	n Sauger					
6ign	ature of Interpreter	Signature	of Investigator					
	`	Pfc.	<b>4218845</b> 6					
Rank	ASN	Ronk	ASN					
		3049 OM (	ir Reg.Co.					
	Organization		Organization					

UNKNOWN X 8 ELINTERRED 3. MIL. CHES. ST. AVOLD 00 - 9 - 97

# Salar Sa

The population of Branchin has been evacuated during the backer. The city one continued to the back of this whiteen appropriate one country of the continue appropriate and the continue to the continue of the continue and the continue of t

THE STANDARD OF THE STANDARD O

### ATTROTATION.

Je soussigne Secretaire de Malifo certifie que c'est bien un solgat americain inconnu qui 4 etc : enterre au lieu dit Walcole d as une tombe non immatriculee.

Note no possedons aucun autre renseign ment a son suj at.

FINK.

### STATEMENT.

I the uncorsigned Secretary of the Mairie-certify that it is well as unknown American soldier he has up been buried at a lace called Waldele in a grave that has not been registered.

We have no other information on hi subject.

FINK.

John F. H. Marie 1 d. L. J. J. al.

UNKNOWN X 6018
REINTEARSO . MIL. CEM.
ST. AVOLD 0 - 9 - 97

### ATTESTATION

Je soussigne BECKER Maire de BERNNIHF certifie que c'est bien un soldat americain qui e ete ente re un ieu dit Waldele dans une tombe non immatriculee.

Nous ne possedons sucun autre cenceignement a son suje t.

Le Maire BECKER.

STATABLAT

I the undersigned Ch. BECKED Mayor of BENNEIH certify that it is well an unknown ascrican soldier ho has been uried at a place called Waldele in a grave that has not been registered.

We have no other information on his subject.

The Mayor: BECKER.

TRUE COPY.

John P. Gelashis 1 st. L.d. July. 3 vol. My R. 96. G. R. & E. DIV.
OFFICE OF THE CHIEF QUARTERMASTER
H.O. COM. ZONE, ETOUSA

A+ 11

REINTERRED U.S. TU. CEM. ST . AVOLD CO 2 97

## TOOTH CHART

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тор	<b>XX</b> (			(C)	$\Theta$	$(\!$	$\bigvee$	$\bigvee$	$\mathbb{W}$	W		<b>(C)</b>					UPPER
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<i>†</i>	16	15	14	13	12	11	10	9	9	10	11	12	13	14	. 15	16	

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.

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

William D. Lawsen III 2nd Lt. Inf

Veried by G. R. S. Officer

MISSING TEETH All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus:	
CROWNED TEETH Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus:	Gold crown or Porcelain crown  Porcelain crown  Gold Crown or Porcelain crown
BRIDGE WORK Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:	Gold bridge
FILLINGS Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus:	Gold filling, Silver filling
CARIES (CAVITIES). Outline location and size of cavity, shade in thus:	Cavity Decayed O D D D D D

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

- 1. 19 a displaced teeth which has not been recevered with the remains.
- 2. L 14 and L 15 previously extracted and granulated in, L 15 roughly.
- 3. R 16 just beginning to erupt where h and wan previously extracted and roughly granulated in. R 16 just beginning to erupt where R 15 was previously lecated,
- R 2 breke eff at the gingival line.
- R 4 Twisted out of occlusion having its mesial surface facing toward the buccal.
- Theth even.

TED : 200 000 (V-625, 186) UNKNOWN X6018
KEINTERNED U.S. WIL. CEW.
ST. AVOLD OO -- 9 -- 97 アプスのはったが、のど

of Unknowns') IDENTIFICAT	ON CHECK LIST
(To be completely filled sor: R. of Report of Inter	i out and attached to each copy ment WD QMC Form 1042)
-	0. * 707
6 . A. & Relando	·
ler K: ft. J. Bichardson	Unknown X
, .	Cemetery St. Avald France
	Plot OC Row Grave
Date seprocessed: 13 Apr.	145
1. (Hour) (Date)	initia de la companya
2. Place of death (Name of closest town)	(Coordinates and letter Prefix, maps)
(Name of Ecocot 1942)	
(Sheet, scale and serials used)	
3. Remains Approcessed by	to bile Team J. S.
,	(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 measurement
Lee Clothing	Indicate unusual markings
Item Clothing Markings	Indicate unusual markings color, wear, tear, repairs, et
Markings	Sizes color, wear, tear, repairs, et
* Markings  * Meadgear One Helme t	Sizes color, wear, tear, repairs, et
	Sizes color, wear, tear, repairs, et
* Markings  * Meadgear One Helmet Livery (Type)  Overcoat	Sizes color, wear, tear, repairs, et
* Markings  * Meadgear One Helme to (Type)  Como flauge act  Overcoat  Jacket, Field	Sizes color, wear, tear, repairs, et
* Markings  * Meadgear One Helmet Livery (Type)  Overcoat	Sizes color, wear, tear, repairs, et
* Markings  * Meadgear One Leme T  (Type)  Overcoat  Jacket, Field  Jacket, Combat  Mackinaw	Sizes color, wear, tear, repairs, et
* Markings  * Meadgear One Leme T  (Type)  Overcoat  Jacket, Field  Jacket, Combat  Mackinaw	Sizes color, wear, tear, repairs, et
* Markings  * Meadgear One Leme T  (Type)  Overcoat  Jacket, Field  Jacket, Combat  Mackinaw	Sizes color, wear, tear, repairs, et

- 1 -

Trousers, HBT

\* Trousers, Wool OD

•	Belt, web
	Drawers, wool
	Drawers, cotton
	Leggings, wool
	Socks, cotton
	* Boot Bemnants of (type) Combat
	Overshoes
	Web Equipment (type)
	(Other item)
	(Other item)  • If body is nude, sizes of these items should be computed by measuring the remains
ı	Insignia  (Type & location; shirt, jacket, coat, helmet)
	Shoulder Patch
	Does clothing indicate that deceased was a member of the Air, Ground or Naval Force?  4. Homeros 35.1  4. Femor 46.2  4. Tibia 39.4  Description of Remains: 4. Ulna 27.5  L. Fibula 39.3
6.	Age UTO Height 5/0 1/4 Weight CTO Description of wounds CTO
	Bandages or dressings Scars (Length, width, location)
	(Length, width, location)
	(Number, location — illustrate on separate page)
	Outstanding moles, warts or birthmarks. (Yes-no; description, location)
	Sunburn or tan, other than hand and face
	Complexion (Light, medium, dark, clear, pimples, pecks, freekles)
	Build
•	Build (Large, fat, thin, muscular)
	Hair
	Hair(Baldness, widows peak, distinctive curting or other characteristics)
	Sideburns (Color, setting, shape) Mustache (Color, size, shape) Beard or (Length, heavy)

X-608

•	$\Theta$				•
oatee	(Light, color extent)				
			E 1	\	
/es	(Color, setting, shape)		Eyebrows	(Color bushines	s, extent across nose)
	•				
ose		<u> </u>	Eears	\_	ofar from head)
	(Size, shape, straight)				
(a			Ĭine	\	ge, full)
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	Page 7		hart		
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	(Uni		ristics of fingernails)	•	\
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	(Size of nipples, o	oler, quantity	and extent of hair	, iarge, smail, nori	""\ (s).
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• 413t	(Size of nav	el, appendecto	my, amount, quantit;	y, and color of hair	
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ack	Quantity and extent of he	alr)		es-no)	air '(Color)
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		<b>\</b>			1
egs	(Inseem, muscular, kn	ock-kneed) bo	wed, normal, quant	ity, color and exten	at of bair)
		1			<i>\</i>
eet	(Size, corns, callouses,		Toes		
•	(Size, corns, callouses,	flat)	/	(Slender, straight, o	crooked, overlap)
	led fractures	11/	o RP		
vidence of hea	ied iractures		(Your pros	leg etr.)	

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

	1-6018
7. Have finger prints been placed on Report of Intermed	(Yes-no)
If not, explain Fingers decomp	esed and/or missing
8. Has tooth chart been prepared?	not, explain
9. Remarks: Remains seccired in sa	belotal form; small ant of
man flesh in last stage of de	composition. clothing unmarked
Jound in debis, teethy Sound disarticulated, skull; Report	intact in mandible and in
disarticulated, skull . Report	of Burial found, yo GRS tag.
est with of senacessed semain	si 16 165 Et 6+ 51/0 1/1"

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.

No evidence of old healed fractures or amputations Tound.

LAWRENCE R. FEINOT

SPG AGRC

MOBILE TEAM #1, I.S.

Albert & Richardson

SKELETAL CHART plot-00 ROW-9 Crave-97

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

17 PM 1 1948

RIGHT

Humenus 36.1 Radius 25.6 FEMUN 46.2 Hibula 39.3

CHART "

Est. Height 5'101/4"

# TOOTH CHART

F: 00 E.O. 707

GRAVE: 97

USMC- ST. AVOLD

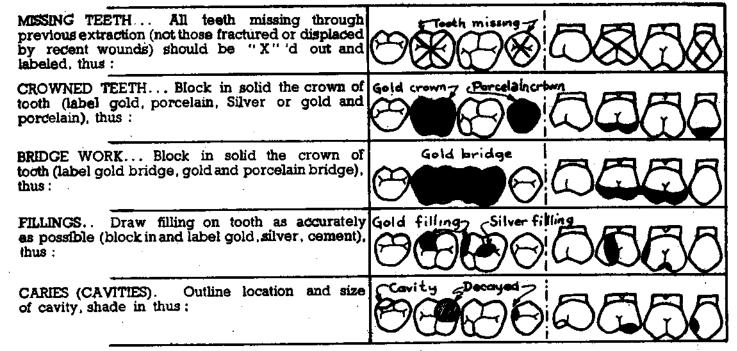
<u> 13- April - 48</u> X-6018 Organization Place of Death Date of Death Cause of Death Right Left MOF Side views Side Views DOP 16 15 12 11 10 13 10 11 12 16 FRACTURED This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the 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, carries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

Versicht by G. R.C. Officer

ET FORM 1-22 (29 AUG.46)

Ansufficient space for remarks

TOLD GRAVE REGISTRATION FORM 1-A)



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

= POSTHUHOUSLY MISSING

D . BROKEN OR CHIPPED

SPACES: L-1-3 = NO SPACE (ESTIMATED)

P. 13-15 = NO SPACE (TOUCHING)

L-13-16 . /3 MM

Color. Duce IVORY

SIZE = AVERAGE

Alignment - Good

MAXILLA

R- 5 = LINGUAL VERSION } NOT TOO NOTICEABLE

Prof L-3 = ROTATED & OF A TURN DISTALLY

L- 4 = ROTATED NEARLY /4 . F A TURN DISTALLY

MANDIBLE

R. 16 = UNERUPTED BEFORE DEATH.

L-12 = ROTATED /g of A TURN MESIALLY.

	TIS HO	S+ Inv	mant.		1	• •		V	IRR
1-	Plot Date Verif	J Row 2 of Buri Tied by	A 0110	ne 1950 er: DIS	TC A			ipt 121	150
	SECTION A	-	ATION OF DECE	ASED		3574	0 0 0 0 0	)	DATE 15 01 48 DAY MONTH YEAR
NAME			UNK	NOWN	SERIAL NUM		RANK	ARM 8-	DAY MONTH YEAR
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PLOT ROW	GRAVE \$	OUN F	RANCE		pio across souther Charactering			<u>, l                                     </u>	CAUSE OF DEATH  6
NAME AND ADDRESS STAX AVOLD	XXXXX	NCEXX	ST LAURE		NCE TA	se remain	FREXTOFKIN is are unic tly interr	dent	ifiable and are to (Hq.AGRC-26 Jan 50
				C — DISINTE	ERMENT AND	IDENTIFICATIO	)N		227
UNKNOWN ]	x <del></del> 00601	8	SERIAL NUMI	BER	RANK	DATE OF DEATH	1	DAT	fe distinterred 6 July 48
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MINOR DISCREPANCE	NONE					DATE 2	ANNOTATED  Z. Jul. 50 T. Johns	) - To William Jap	
REMAINS PREPARED	AND PLACE	O IN CASKET			······	_194	L.BR. MEM	. DI	v.
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i hereby and that the FINAL CAS	certify the report above TANG	at all the	foregoing ope			ted and acc	omplished und	ermi)	t QMC / immediate supervision  RC ZONE 3 HT
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QMC FORM REV 15 MAR 46	1494	95	·		; .	``.			

# RECORD OF CUSTODIAL TRANSFER

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USMC St Avold, France		Old Neuville, Belgium	* *
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STRUCTE: Cortification of Latinoville Advisor of Association (AV)

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

TO: Grief, Augistration Division, 7887 Graves Registration Detachment, APO 58, c/o Postmester, New York, New York

This Office approves the classification of the Unicomes listed on basic communication as Unidentifiable.

PORTUR CLASSICATION GROWALS

io III**cla:** 70/4 T.E. MAZ Lt. Colonel, QA Memorial Division

Holdenscan Clemente 1883

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

23 January 1950

293 When France X-6018 St. azold

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

l. The records pertaining to Unknown X- 6018, Plot 00

Row 9, Grave 97, USMC St. Avold France
have been reviewed and it is the opinion of the Board of Review, this headquarters, that sufficient evidence is not available to establish the identity of the deceased concerned, therefore, these remains should be classified as unidentifiable.

2. Report of Reprocessing of remains was forwarded to the Office of The Quartermaster General by Transmittal Letter No. 1883, dated

3. Remarks:

See Case History attached.

Case reviewed by undersigned Members of the Board of Review;

Col. H.P. Henry, 0-12589 Lt. Col E.D. Mulvanity 0-359598 Leodore Goudresu W-2113434

Not Identifiable from information prosection available

July 24.50

# HEADQUARTERS AFERICAN GRAVIS REGISTRATION CONTAIND EUROPEAN AREA APO 757 US AREY

RRE 293

be classified as unidentifiable.

23 Jamary 1950 (Date)

#### CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X - 6018 Plot 00

Row 9, Grave 97, USEC ST. AVOID France
have been reviewed and it is the opinion of the Board of Review, this
headquarters, that sufficient evidence is not available to establish
the identity of the deceased concerned, therefore, these remains should

2. Report of Reprocessing of remain of the Quartermaster General by Transmi	
3-5-46 3. Remarks :	
See Case Bistory attached.	
Case reviewed by undersigned	Nembers of the Board of Review :
Col. H. P. HENRY, 0-12589 WIC LA	Col. E.D. MULVANITY, 0-359597 UNC
Col. R. F. HERMI, U-12309 WIRC IN	Col. B.D. MUNVAMILL, 0-359579 QEC
Capt. Edward F. PRICE, Jr., 0-1589236 Que la	t Lt. Caylord E. LUTZ, O-1595665 QMC
CWO Leodore GOUELSAU, W-2113434 USA	" FILE "3 FEB 1950"
	toward accepted

Inc/#6

NKNOUN	NO.	<b>x</b> -6018

U.S., MILITARY CEMETERY

St Avold

(Location)

X-6018 was recovered from the vicinity of Bennwihr, Haut-Rhin, France, from is an isolated grave.

No Identification Tags were found with the deceased. Reprocessing revealed a tooth chart and height estimation. A helmet liner with the insignia believed to be that of the 3rd Infantry Division was recovered with the remains. Tooth chart for X-6018 has been compared with tooth charts available for all unresolved casualties from the 3rd Infantry Division with negative results.

Tooth chart for X-6018 has also been compared with tooth charts for casualties from Haut-Rhin and Bas-Rhin, France with negative results.

In view of the lack of any association between X-6018 and the casualties recovered from the above mentioned areas, X-6018 is being declared unidentifiable.

The name "Sergt, Herbert R. Bayer" listed on the Report of Investigation Area Search as a deceased buried in immediate vicinity is not listed may as a casualty on records of this headquarters.

143rd Inf Regt. "Sgt. Herbert R. Bayer" should be Sgt. Herbert R. Baker, 34890640, Previously X-6015

St Avold, recovered from Hill 351, Bennwihr, identified by T/C, marker over grave

Binkerd, Identification Branch 22 May 1950

#### HEADQUARTERS AMERICAN GRAVES REGISTRATION COMMAND EUROPEAN AREA APO 58 US AREAY

RRE 200.2

Date 25 MAY 1948

SUBJECT: Reprocessing of Remains

TÚ:

The Quartermaster General

2nd & T Sts. S.W. Washington 25, D.C.

The remain	s of <b>I-601</b>	3		
interred in Plot_00	Row 9	Grave <b>97</b>	, USMC <u>S</u> ⁴	-Avold
France	,have been	n reprocessed a	and the ini	Cormaticn
not previously forwar	rded to your	Headquarters i	Ls herewith	submitted.
Handson & One balma	+ 14mm <del>-</del> 44h	ingiania		,

Camoflage net for liner

Est. height : 5: 10 1m

FOR THE COMMANDING GENERAL :

2 Incls: 1. Tooth chart
1. Skeletal Chart

WOJG

Actg Asst Adj Gen.

→ Plot : 00
Row : 9

E.0#707

Grave: 97

St-Avold, France April 13, 1948

# TOOTH CHART

Date Unk Unk **X-6018** Serial No. Grade Initial Piret Last Name Organization Unit Cause of Death Date of Death Place of Death Left Right 8 3 6 5 3 Side views UPPER TOP LOWER VIEWS Side Views 14 15 16 12 13 9 10 11 9 14 13 12 11 10 FRACTURED

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.

Verfield by G. R.C. Officer

MISSING TEETH ... All teeth missing through previous extraction (not those fractured or displaced Tooth missing by recent wounds) should be "X" d out and labeled, thus: CROWNED TEETH... Block in solid the crown of Gold crown relaincrown tooth (label gold, porcelain, Silver or gold and porcelain), thus : BRIDGE WORK... Block in solid the crown of Gold bridge tooth (label gold bridge, gold and porcelain bridge), thus: FILLINGS.. Draw filling on tooth as accurately Gold filling? Silver fill as possible (block in and label gold, silver, cement), thus: CARIES (CAVITIES). Outline location and size Cavity SDecayed 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 Broken or chipped

Color Dull Ivory Size Average Alignment Good

Spaces: L-1-3 no space (estimated)
R-13-15 no space (touching)
L-13-16: 13 mm

# Maxilla

R-5 lingual version ) not too noticeable R-4 lingual version )

Pit of L-3 rotated 1/8 of a turn distally L-4 rotated nearly 2 of a turn distally

#### Mandible

R-16 unerupted before de ath L-12 rotated 1/8 of a turn mesially

# SKELETAL CHART

X=6018
Plot 00 Row 9 Grave 97
St-Avold Cem. France

(BLACK OUT PARTS OF BODY NOT RECEIVED)

Right

10-00 barrier	Left	April 13	, 1948
		<u>35-1</u> см.	HUMERUS
		25.6 cm.	RADIUS
( PO O		27 <sub>•</sub> 5cм.	ULNA
		<u>46.2</u> <sub>CM</sub> .	FEMUR
	<b>)</b> /}	<u>39•4</u> см.	TIBIA
		39•3_ <sub>CM.</sub>	FIBULA
		5 10 1 ESTIM	ATED HEIGHT

PROCESSAGE	BY:	
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留	243 20	US=60	SINTERM	ENT DIREC	TIVE		[well]
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ME		UNKNOK	SERIAL NU	STATE OF STA	RANK	ARM	DAY MONTH YEAR
AETERY JJ AV (	)1,1) • NI						DISPOSITION OF REMAIN
ot ROW		INTRY F JP JA 14 CT LS					CAUSE OF DEATH
		SECTION B — C	ONSIGNEE AN	D NEXT OF KIN			
ST. AVOL	S OF CONSIGNEE  D. FRANCE  NISTRATIVE		NAME OF TAXABLE PARTY.	in incurificati	111		
ME		SECTION G — DISI SERIAL NUMBER	RANK	DATE OF DEAT		DA*	TE DISTINTERRED
DENTIFICATION T	AG ON ORGANIZA			RELIGION	IDENTIFICA	TION VE	RIFIED BY
ATURE OF BURIAL		SECTION D — PREPA		MAINS FOR SHIP ON OF REMAINS	MENT		
						· · · · · · · · · · · · · · · · · · ·	
THER MEANS OF	IDENTIFICATION						
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ATE ASKET SEALED BY		₿Y	EMBALA	AER (Signature	).		
ASKET BOXED AN	ND MARKED		SHIPPIN	G ADDRESS VERI	FIED BY		
) ATE I herek	BY  by certify that all the report above is a	he foregoing operation	s were cond	lucted and ac	complished u	nder m	y immediate supervisia
and that m	e report above is c	oriect.					
				regiones diversity		ECTOR	

OMC FORM REV 15 MAR 46 1194 FOUL NO. 11

Revised 5 January 1946 CHECK LIST OF UNITO N

(to be completely filled out and attached to each copy of Rep rt of Interment UD QMC.

Form 1042)

Unknown x 6018 Cemetery ST. AV OLD Plot OO Row 9 Grave 97

		-	***	are in the second of the secon
٦.	Arrived at cemetery 153 0	Aroz	ril 1946	The state of the s
	(Hour) (d			and the same of th
2.	Place of death Benneihr Haut-R	him	Tunna (T	- FOETION)
	(Name of alosest	toim	(Cocr	dinates and letter
	and the second of the second o		4	efex, maps)
	Cheet, scale and sex	e8 rials	7, 1:200,000 used.	<u> </u>
3.	Remains recovered or disinterred	by		Qa. Gp. Ca.
	•		- (name and	organization)
4.	Evacuated to Cemetery by TIPP.	5351	th On Group	
			(name and	organization)
5.	Description of clothing and equi-	ment	: (If clothe	s do not fit, obtain size
	from body measurements).			
	Clothing Item. Farkings S	linee		Indicate unusual markings wear, tear, repairs, etc.
	Meadgear Helmet and lines	11200	001.01	west, cear, repart of ecc.
	(Type) (Ne markin	gs)_	<del>.</del>	
	Raincoat None	Rat_	Med.	
	Overcoat News	Ret.	7.K	the state of the s
	Jacket, Field None	Est.	38	11-
	Jacket, Combat Remnants	Est.	36 Uta	
	Mackinaw None	Est :	3 <b>8</b>	$N_{ij}(S, \Phi_{ij}) = \sum_{i \in \mathcal{A}_{ij} \in \mathcal{A}_{ij}} (i, i, j) = \sum_{i \in \mathcal{A}_{ij}} (i, j) = \sum_{i \in \mathcal{A}$
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	Sweater Rememts	Rat.		Same and the second
	Jacket, EBT Nene	Est.	38	
	Shirt, Vool, OD One	Eat.	15-32	The State of the S
	Undershirt, Wool Remments	Re+	36 <b>Dtd</b>	Walter Bridge Br
			The state of the s	A Control of the Manager of the Section of the Sect
	Undershirt Cotton Uta	Est.	_36	
	Trousers, HBT None	Est.	33-32	
	Trousers, Vool OD Remarks	Bat	32 <sub>2</sub> 31	Π±A
	The state of the s	بي طيالند.		· · · · · · · · · · · · · · · · · · ·

4	
	Belt, Teb None Fet. 7
	Drawers, Gool None Bet. 32
	Drawers, Cotton None Bet. 32
	Leggings, Uool Nove (Note unusual lacing)
	Socks, Cotton One Pr. Bat. 10
	*Shoes (Type) Neme
	Overshoes None
	Web Equipment (Type) None
	(Other item) Neme
	(Other item) *If the body is nude, sizes of these items be computed by measuring the
	remains.
6.	Inejenja III.
	(Type & location; shirt, jacket, coat, helmet) Shoulder Patch Utd
7.	Does clothing indicate that deceased was a member of the Air, Ground or Naval Forces. Ground Torces
8.	Description Remains: Agg <b>ta</b> Heights on Weight Uta Description of wounds Uta
	Bandages or dressings Utd Scars Utd (Length, width, location
,	Tattoos III ta
	(Number, location-illustrate on sep. page)
	Outstanding moles, warts or birthmarks : Utd (Yes-no; description, location)
	Vtd.
	Sunburn or tan, other than hands & face Utd
	Complexion Utd (Light, med. dark, clear, pimples, pocks, freckels)
	Build Utd (Large, fat, thin, muscular)
	Hair Light Brown 2 in Med. Straight Utd
	(color, lenght, quantity, curly, wavy, straight, whorls, or definite parting).

	Hair Utd (baldness,				•
,	Of the same TITA		Mustache <u> </u>	i <b>td</b> Be	ard or Coatee
	Sideburns Utd	setting, shape	) (00	olor, size, (	length, heavy,
	Utd	NOSE		ape) Pars.	Utd.
	light, color, ex			raignt) (si or	ze, set close to far from head)
	Eyes Utd (color, sett	Eyebro Ling,shape)	ws <u>Utd</u> (color, bush	ness, extent	across nose)
	Mouth		s Utd		
	(large, med	lium, small)	( S	mall, large,	(ATT)
	Teeth See At	tached Teeth Ch	ert scacing, noti	cable crowns,	fillings, extrac
	Pei	nted Est.			
	Chin	(Prominent,	oceding, point	ed, dimple, d	ouble)
-	Jaw Normal		Circumference	of head in in	ches (hat band)
	(large, smal	ll, normal)	· .		(hat band)
	Neck Utd			Larynx Utd	
	(size, lengt	th, sport, norm	el, wrinkled)		nent, normal).
•	Shoulders <b>Utd</b>			Arms 32# U	td Vtd
	(broad	d, streight, am	all, rounded)	(length,	muscular, color
	Utd	•			• '
				'	
		antity of hear)			
	(extent and qua	antity of help)			
	(extent and quality Hands Utd				
	(extent and quality Hands Utd	A		knuckles, mi	ssing fingers or
	(extent and quality Hands Utd Fingers Utd (short,	A		knuckles, mi	ssing fingers or
	(extent and quality thands Utd Fingers Utd Chart,	d thick, long, sl	ender, size of		
,	(extent and quality thands Utd Short, Utd Joints).	d thick, long, sl			
	(extent and quality and qualit	thick, long, sl	ender, size of	of fingernai	ls)
	(extent and quality and qualit	thick, long, sl	ender, size of	of fingernai	ls)
	Hands Utd  Fingers Utd  (short,  Utd  joints).  Chest Utd  (size of n	thick, long, sl  (unusual c	ender, size of haracteristics quantity & ext	of fingernai	ls) large, small, nor
	Hands Utd  Fingers Utd  (short,  Utd  joints).  Chest Utd  (size of n	thick, long, sl  (unusual conipples, color,	ender, size of haracteristics quantity & ext Waist Uto	of fingernai ent of hair, navel, appen	ls) large, small, nor dectomy, amount
	Hands Utd  Fingers Utd  (short,  Utd  joints).  Chest Utd  (size of n	d thick, long, sl  (unusual conipples, color,  & extent of hair	ender, size of haracteristics quantity & ext	of fingernai ent of hair, navel, appen	ls) large, small, nor dectomy, amount
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	Hands Utd  Fingers Utd  (short,  Utd  joints).  Chest Utd  (size of n  Back Utd  (quantity & colo	d thick, long, sl  (unusual of nipples, color,  % extent of hair Circ or of hair  Utd Yes - no; locat: Utd Ut	ender, size of haracteristics quantity & ext Waist Uto Size of cumcision yes-no	of fingernai ent of hair, navel, appen Pubic hair	ls) large, small, nor dectomy, amount

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

#### TOOTH CHART

5 April 1946 x 6018 Date Unknown Unknown Unknown. Unknown Unknown Initial Rank Serial No. Last Name First Unknown Unknown Est. Dec. 1944 () HK HO WA Bennwhhr, Haut-Rhin, France Date of Death Cause of Death Left Right 5 6 7 8 8 3 3 Side views TOP **VIEWS** LOWER Side Views 16 15 14 13 12 11 10 9 9 10 11 12 13 14 15 16

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.

John A Treat

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

Half Halfson III End II In III

Verfield by G. R. S. Officer

MISSING TEETH All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus:	
CROWNED TEETH Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus:	Gold crown - Porcelain crown  Porcelain crown
BRIDGE WORK Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:	Gold bridge
FILLINGS Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus:	Gold filling, Silver filling
CARIES (CAVITIES). Outline location and size of cavity, shade in thus:	Cavity Percayed 5

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

- 1. 19 a displaced teeth which has not been recovered with the remains.
- 2. L 14 sad L 15 previously extracted and granulated in, L 15 roughly.
- 3. R 16 just beginning to erupt where R 15 was previously located.
  4. R 5 previously extracted and roughly granulated in.
- R 2 broke off at the gingival line.
- RA Printed out of occlusion having its motial surface facing toward the buccal.
- 7. Theth even.

BENNWITE

COLMAR EUR. RD. MP. 87.

PMERICAN UNK.

FIELD

ROAD

HILL

1:200.000 (v-695, 4.99)

# STATEMENT.

The population of BENNWIHE has been evacuated during the battle. The city was completely destroyed. After this hill 35I was demined the body of this unknown American was found. He was buried in a field jacket and sweater. Possibly identity still bee on body. He was buried by the service of Column.

Jerome SZANGER
Pfc 42188416
3049 Q.M.Grave Reg.

UNKNOWN X 6018
reinterre .s. mil. cem.
ST. AV(1.5 0 - 9 - 97

#### LTTEOTETICE

Je samigne Glacili passe charpatre constitue que etent bien un actual american anconst qui e-sie entente cu liva sit Caisale que son una tenha non insti**laction.**Here per passezzas mosta removirament a sen sejot.

I the University Colling 18 is well as position soldier univer & six has been buried at a large collect which is a prove of the Collect and the Large Collect and the Collect

Galla AM Carlo

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3 med & 17 4

UNKNOW Y COLE
REINISHMED V WILL OWN.
ST. AVOLD 6 - 2 - 27

# - ATTESTATION

Je soussigne BECKER Maire de BEFNWIHR certifie que c'est bien un soldat americain qui e ete enterre au lieu dit Waldele dans une tonbe non immatricules.

Hous ne possedons aucum autre renssignement a son suje t.

Le Maire BECREEL.

# STATEMENT.

I the undersigned Ch. BECKER Mayor of BENNWIHE certify that it is well an unknown american soldier who has been suried at a place called Naldele in a grave that has not been registered.

We have no other information on his subject.

The ExyonaBECAPA,

John P. Gillipis 14 f. Suf. 3 cd. h. f. U.

# ATTESTATION.

Je soussigne Secretaire de Mairie certifie que c'est bien un soldat americain inconnu qui e etc enterre au lieu dit Waldele dans une tombe non immatriculee. Nous ne possedons aucun autre renseignement a son suj et.

FINK.

# STATEMENT.

I the undersigned Secretary of the Mairie certify that it is well an unknown American soldier he has we been buried at a place called Waldele in a grave that has not been registered.

We have no other information on hi subject.

FINK.

John P. Hillepie John P. Hillepie J. L. J. Say. 3 and J. H. El.

#### RESTRICTED

WD QMC FORM 1042		DEPORT OF	INTERMENT	· ·	DATE	OF REPORT		
(Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)  6 April 1946						
		· · · · · · · · · · · · · · · · · · ·				- ,		
Imprint Identification T DO NOT TY		Section 1 DENTIFICATION.  NAME (Lost, first, middle initial)			SERIA	L No.		
			/		1			
	. /	Unknown X-	601.8		Unk	MOMI		
	1	GRADE	ORGANIZATION		BRAN	CH OF SERVI	CE	
	0 }	Unknown	Unknew	D.	liek	now n		
\	- J				1			
		RACE	RELIGION		IF OTHER TH	AN U.S. DEA	LD, GIVE	
		Unknown	Unknew	n.				
Bennvihr, Haut-	Rhim.	CAUSE OF DEATH	<u> </u>		DATE	OF DEATH		
F rence		Unknown			Es	t. Dec.	1944	
EMERGENCY ADDRESSEE (Na		<u> </u>						
EMERGENCT ADDRESSEE (NA	•	•						
	Unknewn	•					- 1	
IDENTIFICATION TAGS FOUN	D ON BODY	IF NO TAGS FOUND ON BODY, I	DESCRIBE MEANS O	F IDENTIFICATION (I)	unidentified, fi	ll in section 2	on reserse)	
(J. 2, or none) None							i	
		_						
WERE SUBSTITUTE TAGS PRO	VIDED?(Yes or no)						Ì	
Yes							•	
LIST PERSONAL EFFECTS FOL	IND ON BODY AND	DISPOSITION OF SAME		· · · · · · · · · · · · · · · · · · ·				
None							ì	
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		lished cemetery, furnish sketc	h and map coordi	instea on reverse.				
NAME. NUMBER, COORDINAT U.S. Military		Q=260584) St. Av	eld, Fran	ce			Í	
	1	·	<del></del>	,		1	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or m	gens of other)	TYPE OF GRAVE MARKER TEMP. WOODS	PLOT No.	ROW No.	GRAVE No.	
6 April 1946	1530	CALBRE		Cross	00	9	97	
WAS THIS A REBURIAL?	I IF A REBURIAL	INDICATE NAME, NUMBER, COORI	DINATES OF PREVIO		OCATION OF G	RAVE	<u> </u>	
(Yes or us)	1	Outside of Bennwi			PLOT No.	ROW No.	GRAVE No.	
		. Mp. Sh. 87 1:20			1	d Grav	,	
TYPE OF RELIGIOUS	<del></del>	TING BURIAL RITES	IF IDENTIFICATE	ON TAGS NOT USED	DESCRIBE IDE	NTIFICATION	DATA AND	
General Service	Ch. Ison	Wandland, Capt.	One cep	URIED WITH BOOY COME	Form 10	42 plac	ed	
	011. 101111	manaratio, cape.	burial be	ettle and bu	ried wit	h remai	ns.	
IDENTIFICATION TAG BURIE( BODY (Yes or to)	MAI HTIW C	TIFICATION TAG ATTACHED TO RKER (Yes or se)						
No	Yes	s, embossed plate						
BODY BURIED ON DECEASED	LEFT, NAME (Last	l, first, middle initial)	RANK	SERIAL No.	ORGANIZATE	ON GRAV	E No.	
Decinains of	Dan							
Beginning of			1	Localdia		]	<u> </u>	
BODY BURIED ON DECEASED	RIGHT, NAME (La	st, first, middle initial)	RANK	SERIAL No.	Co F. 22	h	/E No.	
Brecht, Henry	•		Pfc.	33501425	Inf. Re	gt.	98	
SIGNATURE OF PERSON PRE	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1	SIGNATURE OF	BUTY BUTY	E CERCETA DE	)		
William	and the	away u	F	lalah W. Slee	tor	•	1	
EZEAN Omntana							,	
- 333 et Americani	ester Gren		<u> </u>	iajor ]	nf.	······································		
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_	Section	SectionUNIDENTIFIED REMAINS.								
LEFT LITTLE FINGER	INSTRUCTIONS:  (a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks.  (b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the									
RING	every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.									
LEFT RING FINGER	ны <b>с</b> нт 51 9#	WEIGHT Utd.	COLOR OF		Light	F HAIR Brown		SCARS, OR TATTOOS	į.	
LEFT MIDDLE FINGER	WEAPON AND NOTHER IDENT	) SERIAL No.	UES	LAUNDR	Y MARKS Utd.			was buried or four, Haut-Rhi		
Ğ		•								
LEFT INDEX FINGER	FILLING	<del>s</del>		LVER FILE	LING N <b>G</b>		. 2 /			
LEFT THUMS	CAVITIES	S	图图	CAVIT	Y red				7	
RIGHT	MISSING	{	The	COTH MISSE	-	B DIAGRAM	REPRESENTS 1	THE MOUTH WIDE	) 8 OPEN 16	
RIGHT INDEX FINGER	BRIDGE V	NORK S		GOLD I		15 ( 14 13		15 15 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15		
RIGHT MIDCLE FINGER	FURNISH SKE	TCH AND MAP	REFERENCE	E AND COO	ROINATES F	OR BURIAL IN	OTHER THAN ES	7 10 11	) ?Y	
RIGHT RING FINGER	REMARKS:	<u>.</u>		<del></del>			· 			
RIGHT LITTLE FINGER	*To •	ached; I oth Chart imated wa	t. <sup>#</sup> T⊕	e bad	ly deco	apesed :	newne" and fer finger	l form lA		