

243 und St. anall X-6306

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-6306 St Avold

(POC:) EPINAL

Jant,

CASE HISTORY

Unknown x-6306

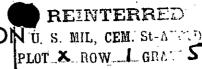
United States Military Cemetery St Avold (France)

- 1. The remains of Unknown X-6306. USMC St Avold, were recovered from the west Cemetery at Munich. Germany.
- 2. After comparing the tooth chart of the subject unknown decedent with all available dental data on unresolved casualties within the Germany M-49 Area. no reliable comparison could be made that could possibly result in the identification of the deceased.
- 3. Due to a lack of identifying data it is recommended that this case be declared unidentifiable.

hab

x-6306

REPORT OF INVESTIGATION U.S. MIL, CEM. St. A. ST. A. PLOT. X. ROW. L. GRAVES AREA SEARCH



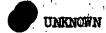
AGRC Form 10 (Revised)	· · · · · · · · · · · · · · · · · · ·	11 JUNE 19)46 ·
1 January 1946 -	* * - v	Date	
NAME Unknown X=6306	RANK Unknown	ASN :	Unknown
ORGANIZATION A.A.F.	•	•	•
MEANS OF IDENTIFICATION None	1 - 1		
(All statements above this	line will be completed, upo		
unit processing point.)			
CECTION A CENTERAL (T. U. completed by			
SECTION A — GENERAL (To be completed by 1. Was positive identity acquired for the de		vestigation? NO	If so stat
the following information:	-	· · ·	
a. NAME	RANK - :	ASN	
b. ORGANIZATION			
2. Was partial identification established?		facts as to whom you b	ومل مع المصورة والمعاد والمعاددات
a. NAME			
b. ORGANIZATION-			
3. NAMES OF OTHER DECEASED BURIED			•
3. NAMES OF OTHER DECEASED BURIED	40	,	•
(Use reverse side for listing of crew mem	bers from MACR)		
a. Date of above burials	· · · · · · · · · · · · · · · · · · ·	avec S	
5. Name and Type of Cemetery			
(Military or Civilian)	WI PITTARY CONDITO		
6. Map Coordinates of the Cemetery	WY 8159		
a. Town	CHERMANY		
7. Give exact location in cemetery of the re			•
a. Section	- 3	Grave 45	
b. Is sketch attached?		·	, ,
8. If rémains are not located in a cemetery		• .	•
a. Town Coording	•	,	•
b. Is Sketch attached?		-	
c. Is area mined?		. •	•
9. How is the grave marked?			•
10. If grave is marked with cross, give exact			
· · · · · · · · · · · · · · · · · · ·			
•			
a. From what source was this information	obtained?	* * .	
(Identification tags, personal effects)			
1. By .whom	POLITICA DE PROPERTO DE LA CONTRACTOR DE	AND CARETAKERS	OFFICE
11. Where are the cemetery records?			***************************************

•	a. What information was consided thereon?	
*****	b. Where was the information shadings	
	c. By whom?	1
12	What is the data of doub?	PGN GPTM 1011.
12.	a Give basis	EST SEPT 1944 BODIES BURIED AROUND THAT TIME
13.	What is the cause of docth?	South Broth That The
	h Give basis	UNKNOWN
14	b. Give basis What is the date of burial?	BST SEPT 1966
17,	Circles and of burial?	CAREPAKERS; RECORD
1.5	d. Give pasis	CARETAKERS; RECORD
19.	What was the place of death?	UNKROWN Coords
	b. Give basis	
16.	Where were the remains found?	UNKNOWN Coords
	a. By whom?	•
	b. 15 sketch affached?	
17.	Was a casket used?	Who furnished the casket?
	Type of casket	**
18.	Who made the burial	GERMAN SOLDIERS
	a. What are the names and addresses?	(Civilian, American Mil. or German Mil.) UNKNOWN
SE0	-IION B - AIR CORPS DECEASED ITO he compl	eted only if deceased is believed to be a member of the AAF).
•	a. Give location in plane from which the bodi	es were removed
•	(Tail gunner, pilot, ra	dio, turret, etc., or front, side of plane)
20.	a. Type of Plane	lete results of investigation (if removed, state when and by whom).
	b. Markings and/or name on plane	
-	c. Give numbers on motors, machine guns, instrui	ments, radios or other equipment:
21.	How did crash occur?	UNKNOWN
	Enemy Planes? UNKNOWN:	Collision?
22.	Did plane explode in the air?	UNKIROWN
23.	Did plane burn in the air?	UNKROWN On ground?
 24.	What was the direction of the flight?	UNKNOWN On ground?
25	What was the stilling and the	TINKANWA
	The Civilian opinion regarding destination	n of plane?

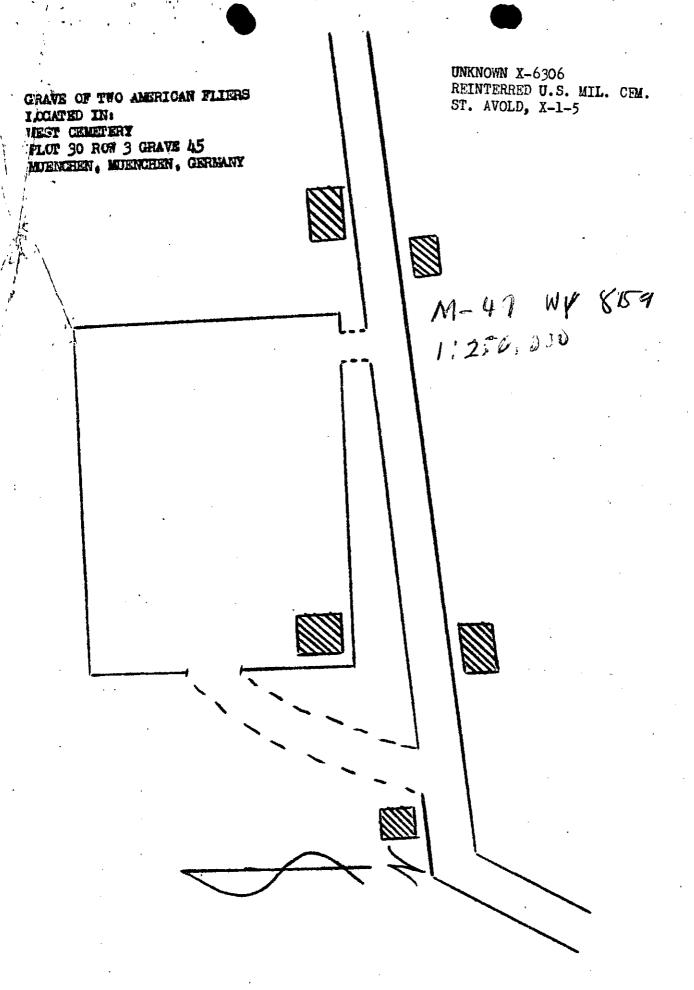
. •

26.	Had bombs been released prior e crash? UNKNOWN
•	Does specific time and date of crash correspond with date of death of above named deceased?
	Number of planes in formation prior to crash UNKNOWN
	State precise time and date of plane crash UNKNOWN (Night?) (Day?)
	(Night?) (Day?)
30.	Were parachutists seen? UNKNOWN! How many? Escaped?
	Prisoners?
SEC	CTION C — ARMORED CORPS DECEASED (To be completed only if deceased is believed to have been a member of the Armored Force).
31.	Were remains found in wreckage of a tank?
	a. Give specific position in tank from which deceased was removed
	(Radio man, driver, assistant driver or front, side, or back)
22	b. Near wreckage? Location of destroyed tank must be investigated. Give complete results of investigation. (If removed, state when
3Z.	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?
	Number of tanks in immediate vicinity at time of disablement
36.	Does specific time and date of disablement correspond with date of death of above named deceased?
37.	Precise time and date of destruction of tank (Night?) (Day?).
	Did any of the crew members escape? Prisoners?
3EC	CTION D — OTHER BRANCH (To be filled out if B & C are not applicable).
37.	Did death occur from any other means? (i. e., truck, jeep, mines, drowning, or small arms fire)
	If so, give complete and thorough results of the interrogation.
	a. Are all certificates and statements of people who possessed knowledge of the case attached?
40.	State the specific clues and evidence that were obtained in securing the name and facts regarding the above listed deceased
SEC	TION E — GENERAL (To be completed by investigation in all cases)
41.	TION E — GENERAL (To be completed by investigation in all cases) Were personal effects recovered by the investigating team? If not, state reason ALL PERSONAL EFFECTS REMOVED BY CHOMAN DEPROMET
	If not, state reason ALL PERSONAL EFFECTS REMOVED BY GERMAN PERSONNEL
	a. Were identification tags found at the time of death? Where? By whom?
	Present disposition UNKNOWN
	If deceased is not identified, personal effects will not be forwarded to PE Depot, but will remain with this form until
	final identification is made, or investigation is abandoned.

1,



٠. ٠	b. Were personal effects found at the time of death?
	Where? By whom?
	Present- disposition
	c. Was deceased identified by living members of the crew at the time of death? UNIX.
	d. Did Cemetery Register or cross indicate the immunization shot?
42.	Was Deceased given first aid? UNKNOWN If so, where?
	By whom?Are statements from the medical people attached?
43.	Was deceased evacuated to a German civilian hospital?
	Where?
44.	Is it possible on surface investigation to obtain from civilian sources a physical description of the deceased?
43.	ls it possible on surface investigation to obtain from civilian sources the condition of the remains?
· -	(Burnt? Decapitated? etc)
46.	Do facts surrounding death show any evidence that it might be an atrocity case?
	a. If so, give basis for positive assumption
•	b. If so, has higher headquarters been notified?
47.	Was case previously investigated?
	`When?`
	Give full names, addresses, and information obtained from each person interviewed
40,	
40	
	Are all positive statements regarding identification and particulars surrounding death attached?
	Has any information been given concerning isolated burials in the area outside the immediate vicinity?
	Was investigation preceded by anvanced publicity?
	(If special investigation, give case number) Civic Prior Navetive THESE
52:	Give Brief Narrative BODIES CAME FROM CR: WHERE THEY DIED
	(Use attached, sheets if necessary)
	$\mathcal{L}_{\mathcal{L}}$
	Host Wegener Wasself Burnish
•••••	HORSE WEGERES .
	Signature of Interpreter Signature of Investigator
	INTERPRETER SCT 3870525
	Rank ASN Rank ASN
	606 QM GR CO . 606 QM GR CO
•	- Organization Organization



STATEMENT

I. The undersigned certify that I have given all information on my records of deceased. I do not know of any one who would know of any other information.

Der Oberbuergermeister

I.A. gez. Wachter (Wachter) staedt. Verw. Insp.

Kath. Bestattungsdienst Muenchen

This is, a true copy

WALTER I MARTINE

2nd LT. INF.

606 QM. GR. CO.

UNKNOWN X-6306
REINTERRED U.S. MIL. CFM.
ST. AVOLD, X-1-5

REPORT OF INVESTIGATIO

REINTERREI

U. S. MIL, CEM. St-AVI

PLOT. X. ROW. 1 GRAVI

AGRC Form 10 (Revised)				11 JUNI	1946.	
1 January 1946 NAME Unknown X=6306	RANK	Unknown		Date ASN	Unkno	стус.
ORGANIZATIÓN & A.F.						
MEANS OF IDENTIFICATION NOT	10.	-				
	4 - , -	4		, -		
			-			
, (All statements above this li unit processing point.)						
SECTION A — GENERAL (To be completed by i	nvestigators in	all cases)				· · · · · · · · · · · · · · · · · · ·
Was positive identity acquired for the dece- the following information:			estigation •	ş NO		If so, state
a. NAME		RANK		ASN		
	• • •	•				
b. ORGANIZATION 2. Was partial identification established?						
•						
a. NAME				ASN		***************************************
b. ORGANIZATION				•		
3. NAMES OF OTHER DECEASED BURIED IN	-	•			, ,	
(Use reverse side for listing of crew member	s from MACR)	***************************************	*			.,
a. Date of above burials		Common Grav	/es?			4
5. Name and Type of Cemetery	MILTIA	Y CEMETERY				**************************************
(Military or Civilian)			-		•	
6. Map Coordinates of the Cemetery	WY 8159) [-		•	
a. Town MUENCHINDuntry						
7. Give exact location in cemetery of the remo	ains.					
a. Section	. 3	7	Grave	45.		
b. Is sketch attached?	······································					
8. If remains are not located in a cemetery, g	حمد ive exact loca	tion.				
a. Town Coordinates						
b. Is Sketch attached?		•			_	
c. Is area mined?		. .			```	
9. How is the grave marked?	-			-		• ,
10. If grave is marked with cross, give exact mo						
and the state of t				•		
a. From what source was this information ob	tained?	***************************************			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·····
(Identification tags, personal effects) 1. By whom					•	. •
11. Where are the cemetery records?	BURGERI	MEISTERS AN	D CARE	AKERS OF	FICE	***************************************
11. Where are the cemetery records?		(Town	Hall, cer	netery, burg	ermeister's	office)

	a. What information was contemed thereon?	
*****	b. Where was the information obtained?	
	c. By whom?	
12.	What is the date of death?	
	a. Give basis.	EST SEPT 1944
13.	What is the cause of death?	BODIES BURIED AROUND THAT TIME
	b. Give basis	UNKNOWN .
14.	What is the date of burial?	EST SEPT 1944
	a. Give basis	531 561 1944
15.	What was the place of death?	CARITAKERS RECORD Coords
	b. Give basis	UNKNOWN Coords
16.	Where were the remains found?	UNKWOWN
•	g Rv whom2	UNKNOWN Coords
	b. Is sketch attached?	
17	Was a sasket week?	
• • •	Town of and a	Who furnished the casket?
10	Type of casker	How marked?
۱۵.	Who made the burial	GERMAN SOLD LINES Can Mil. or German Mil.)
	a. What are the names and addresses?	(Civilan, Americal Mil. or German Mil.)
•	. ,	UNRINOFIN
 SEC	TION B. AIR CORRESPONDE	
) 9	Were remains found in the I	eted only if deceased is believed to be a member of the AAF).
•	Were remains found in the plane wreckage?	UNKNOW
	a. Give location in plane from which the bodie	es were removed
	/T_1	T.
	(I all gunner, pilot, rad	no, turret, etc., or front, side of plane)
	b. Nedr wreckage?	
U.	ocene of crash must be investigated. Give comple	ete results of investigation (if removed state when and t
	//	THE PROPERTY OF THE PROPERTY O
	c. Give numbers on motors, machine guns, instrum	ments, radios or other equipment:
 1	Handle and	
1.	Fromy Dianes	UNKNOWN nti-aircraft
	THE PROPERTY	CHISON Y
2.	Did plane explode in the air?	On ground?
	The state of the s	TINKTOWN On ground?
• • •	was me anection of me nights	
	What was the civilian opinion regarding destination	UNKNURN
5.	what was me civilian opinion regarding destination	of plane?

26.	Had bombs been released prior e crash?
- 27.	Does specific time and date of crash correspond with date of death of above named deceased?
- 1	Number of planes in formation prior to crash UNKNOWN
- 1	State precise time and date of plane crash (Night?) (Day?)
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SEC	CTION C — ARMORED CORPS DECEASED (To be completed only if deceased is believed to have been a member of the Armored Force).
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0 0.	boes specific films and date of disablement correspond with date of death of death of
37,	Precise time and date of destruction of tank
;	(Night?) (Day?)
	Did any of the crew members escape? Prisoners?
٠.	CTION 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, drowning, or small arms fire)
٠,	If so, give complete and thorough results of the interrogation.
	a!\Are all certificates and statements of people who possessed knowledge of the case attached?
	State the specific clues and evidence that were obtained in securing the name and facts regarding the above listed
•	deceased
	deceused
SEC	CTION E — GENERAL (To be completed by investigation in all cases)
41.	Were personal effects recovered by the investigating team?
	If not, state reason
	a. Were identification tags found at the time of death?
	If not, state reason ALL PERSONAL EFFECTS REMOVED BY CERMAN PERSONNEL a. Were identification tags found at the time of death? Where? By whom? Present disposition
	Present disposition 3
٠.	Present disposition
	final identification is made, or investigation is abandoned.

b. Were personal effects found at the time of death?	UNRIVOWN
Where? By whom?	
Present disposition	INKNOPN
c. Was deceased identified by living members of the crew at the time of death?	
d. Did Cemetery Register or cross indicate the immunization shot?	
•	
42. Was Deceased given first aid? UNKNOWN If so, where?	
By whom? Are statements from the medical people atta	ached?
43. Was deceased evacuated to a German civilian hospital?	
Where?	
	•
44. Is it possible on surface investigation to obtain from civilian sources a physical desc	ription of the deceased?
45. Is it possible on surface investigation to obtain from civilian sources the cond	lition of the remains?
	`
(Burnt? Decapitated? etc) '	
46: Do facts surrounding death show any evidence that it might be an atrocity cas	se?
a. If so, give basis for positive assumption	
b. If so, has higher headquarters been notified?	
47. Was case previously investigated?	whom?
When?	
48. Give full names, addresses, and information obtained from each person intervi	iewed
•	
49. Are all positive statements regarding identification and particulars surrounding d	leath attached?
50. Has any information been given concerning isolated burials in the area outside	
	NO /
51. Was investigation preceded by anvanced publicity?	
(If special investigation, give case number)	. // .
52. Give Brief Narrative. NO INFORMATIONS COULD BE FOUND AS	
BODIES CAME FROM OR WHERE THEY DIT	SO
11	
Horst Wecause	O Donath A
HORST WECKNER	Wid A family
Signature of Interpreter Signat	ture of Investigator
INPERPRETER	SCT 3870525
	Rank ASN
Rank ASN	INMIN MOIN
Rank ASN	
606 ом сп со	606 QM GR/ CO Organization
606 ом сп со	606 QM GR/CO
606 ом сп со	606 QM GR/CO

STATEMENT

I. The undersigned certify that I have given all information on my records of deceased. I do not know of any one who would know of any other information.

Der Oberbuergemmeister

I.A. ges. Wachter (Wachter) staadt. Verw.Insp.

Kath. Bestattungsdienst Muenchen

This is a true copy

WALTER I MARTINE 2nd LT. INF.

606 QM. GR. CO.

Commanding

UNKNOWN X-6306 REINTERRED U.S. MIL. CFM. ST. AVOLD, X-1-5 GRAVE: OF TWO AMERICAN: FLIERS UNKNOWN X-6306 LOCATED: IN: REINTERRED U.S. MIL. CEM. VEST CEMETERY ST. AVOLD, X-1-5 PLOT: 30. ROW: 3 GRAVE: 45 MUENCHENE MUENCHEN GERMANY M-49 WY 8159 X-6304

AGRC FORM No. 11 Revised 16 Sept. 1946 Formely 'Check List of Unknowns')

CASE PROCESSED BY REPATRIATION MORELE



IDENTIFICATION CHECK LIST

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

	E.O	#78 <i>0</i>
; -·		Unknown X-6306 Cemetery SAINT-AVOLD, FRANCE
1.	DATE REPROCESSED: Actived at cometery 17 SEPT 48	Plot X Row Grave 5
	(Hour) (Date)	
2.	Place of death (Name of closest town)	(Coordinates and letter Prefix, maps)
	(Sheet, scale and serials used)	·
	Reprocessed Remains recovered or disinterred by : MOBILE T	(Name and organization)
4.	Evacuated to Cemetery by	(Name and organization)
	Item Clothing Markings Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
1	* Headgear(Type)	
	Raincoat	
	Overcoat	
	Jacket, Field	
	Jacket, Combat	
	Mackinaw	
	Sweater	
	Jacket, HBT	
	* Shirt, Wool OD	
	Undershirt, Wool	
	Undershirt, Cotton	
	Trousers, HBT	•
	* Trousers, Wool OD	

.,▼	Belt, web
	Drawers, wool
	Drawers, cotton
•	Leggings, wool
•	Socks, cotton
	* Shoes (type)
•	Overshoes
٠	Web Equipment (type)
	(Other item)
	(Other item)
	• If body is nude, sizes of these items should be computed by measuring the remains
	Chevrons or Insignia
	(Type & location; shirt, jacket, coat, helmet)
	Shoulder Patch
	Does clothing indicate that deceased was a member of the Air, Ground or Naval Force? <u>UTD</u> R. RADIUS - 25.7 (Smooth fract)
6.	Description of Remains: R. FEMER - 47.7 (Smooth Stact)
	UTD Height 58% Weight UTD Description of wounds
Ú	Bandages or dressings None Scars
	(Length, width, location)
1	(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, pocks, freckles)
ı	Build (Large, fat, thin, muscular)
	Hair Nove
	(Color, length, quantily, curly, wavy, straight, whorls, or definite parting)
	(Balances, widows peak, distinctive cutting or other characteristics)
	Sideburns Mustache (Color, size, shape) Beard or (Length, heavy)

Goatee		
• • • • • • • • • • • • • • • • • • • •	(Light, color, extent)	
•	\	
Eyes	(0.1	Eyebrows (Color, bushiness, extent across nose)
	(Color, setting snape)	(Color, musimpss, extent across nose)
Nose	. \3	
14056	(Size, shape, straight)	(Size, set close to on far from head)
	\	\
Mouth		Lips
	(Large, medium, small)	(Small, large, full)
	/1c	1
Teeth	(White size upover	ness, spacing, noticeable crowns, fillings, extracts)
	(white, size, theres	iess, spacing, nonceante crowns, mings, extracts)
Chin	>>>>anaaaaaaaaa	
CIIII		ent, receding, pointed, dimples, double)
•	\	
Taw	Cii	cumference of head in inches SKUIL FRACTURED
(La	arge, small, normal)	(Hat band)
	\c.	
Neck		nkled) (Prominent normat)
	\	(3
C111	` \	Arms
Snoulders	(Broad, straight, small, your	ded) (Length, muscular, color, extent and quantity of hair)
	(21,22,7,22,2,3,7,2,2,7,7,7,7,7,7,7,7,7,7,7	, and the second
•		
Hands DEC	OMPOSED	
1101105	A Company of the Comp	
Di Dec	a Marca	•
ringers ALASA		ng, slender, size of knuckles, missing flugers or joints)
		or any and any and any areas,
	(Unusual	characteristics of fingernalls)
•	. \	
Chest		1
	(Size of nipples, color,	quantity and extent of hair, large, small, normal)
557	\	
Waist	(Size of navel, as	pendectomy, amount, quantity, and color of hair)
		position of the state of the st
Back	15	Circumcision UTD . Pubic Hair NINE
	(Quantity and extent of heir)	(Yes-no) (Color)
	\	•
Herniaplasty		
	\	(Yes-no; location)
Lanc		\
Legs	(Inseam, muscular, knock-k	need bowed, normal, quantity, color and extent of hair)
	,,,	The same of many
Feet		Toes
	(Size, corns, callouses, flat) -	(Stender, straight, crooked, overlap)
		•
Evidence of h	icaled fractures NONE	,
	•	(Nose, arms, legs, etc.)
	•	• • • • • • • • • • • • • • • • • • •

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

FINARA		No (Yes-no)	************************************
If not, explain	ONPOSED.		•
	Tomas As Faire State and the State and the State and the State and	/	Peri i pi pahhahanda, i ri paha binayesere
Has tooth chart been prena	ared? KS If not avalo	,	
property of the second	ered? If not, explai	,	***************************************
CASE PROCED	TED AS DER EO # 1780		

Remarks Revalue Picel	NEP IN SKELFING FORM, WITH SAME	I AMBUNT OF DECAME	מוצרים בנים
CIDIANVE with the	he Pemains	ate de consestant investigation de la discolaración de la constitución de la constitución de la constitución d	Carlo de Carrera Carlo de Car
IEZTH POUNDIHN DESKY	S. REPORT OF BRIDIAL FOLINA.	NO GREZAGE	***************************************
ESTIMATED HEIGHT:	REPROCESSED REVINES: 20 POUNE	²⁵ .	
NA EVIDENCE OF POR	LIOUS FRACTURES OR AMPUTAT	70NS	·
TOU EDIDENCE OF THE			
SKULL FRACTURED	AND DISARTICULATED	F. 71	
SKULL FRACTURED	ally viewed the remains of subject de	F. 71	
I certify that I have personal has been recorded to the bear PROCESSED BY:	ally viewed the remains of subject de est of my knowledge.	ceased and all resulting	
I certify that I have personal has been recorded to the bear PROCESSED BY:	ally viewed the remains of subject de est of my knowledge. ICE EPASS GEORGE	ceased and all resulting SCHWADERER	
I certify that I have personal has been recorded to the bear PROCESSED BY:	ally viewed the remains of subject de est of my knowledge. ICE EPASS GEORGE	ceased and all resulting	
I certify that I have personal has been recorded to the bear PROCESSED BY:	ally viewed the remains of subject de est of my knowledge. ICE EPASS GEORGE	ceased and all resulting SCHWADERER	
I certify that I have personal has been recorded to the bear PROCESSED BY:	ally viewed the remains of subject de est of my knowledge. ISE EPASS GEORGE	ceased and all resulting SCHWADERER	
I certify that I have personal has been recorded to the bear PROCESSED BY:	ally viewed the remains of subject de est of my knowledge. ICE EPASS PAFF OSE USDA	ceased and all resulting SCHWADERER	information

•

SKELETAL CHART

X6306. ST AVOLD.

BLACKED-OUT PARTS MISSING P-X- R-1- G-5.

17 Sept 1948

· RIGHT

LEFT.

RADIUS (SMOOTH FRACT)

25, 7,

HUMERUS - 33,7

FEMUR (SMOOTH FRACT.) 47.7

EST. 41.5187

E.O. #780 ST. AVOLD

Initial

Grade

Serial No.

	Unit					Organization											
		Place of	Death			Date of Death				Cause of Death							
	-	/ ^E	light		1			•	X -	FR	ACTU	RED		Left			
	8	7	6	. 5	4	3	, 2	1 '	1	2	3	4	5	6	7	8)
<i>3</i> *	A	A	DOFL	MO	A DÖF	B _{RO}	Ø	B Roke	B	Rox	Roxe		B	HO	BROKE	MAXILLA	
Side view				O										C		W	
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VIEWS	3	D)(X	20		NV	W	W(<u> </u>	9		Œ	肥	Low
Side View							M	M	H	A	Q	Ω	M		XX.	A	
	N	OT	0	40	P.	<u>ئے</u> ۔	O	_	TO	2-1	BAL	24	7	CAC.	URE	0	
/	16	15	14	13	12	11	10	8	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.

Sa Revise

Signature of Officer or other person who prepared Tooth chart

Verfield by G. R.C. Officer

MISSING TEETH ... All feeth 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 Gold crown - Porcelaincrown 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), FILLINGS.. Draw filling on tooth as accurately Gold filling? as possible (block in and label gold, silver, cement), thus: -Cavity _Decayed-Outline location and size CARIES (CAVITIES). 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

B = POSTHUMOUSLY MISSING

(1) = BROKEN OR CHIPPED

COLOR = DULLIVORY SIZE = AVERAGE ALIGNMENT = GOOD

R-4 = SLIGHT DISTAL ROTATION

*	-					, ,	
						SLG/44	
USMC EPINAL Plot: B Row:	19 Gr. 9				36	▼ .	
A 1) Pate of Buria	1:29 June 50 DIS	SINTERM	IENT DIREC	TIVE 4	7.1	·	
Verified by G	RS Officer			3//	// /-		
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SECTION A COURT	. T. Lawson	•	DIRECTIVE NUM		^	DATE .	
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	UNKNOWN	VX - 0	06306		1		
CEMETERY					4	DAY MONTH YEAR	
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					0	305X0X3; 80 CODE DIST. PT.	
PLOT ROW GRAVE COUNT	₹Y			•		CAUSE OF DEATH	
X = 1 5 FF	RANCE					6	
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	SECTION C - DISINTI	ERMENT AN	D IDENTIFICATION	1			
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REMAINS	UNKNOWN					Embalmer Martin	
X MARKER GRS					.y 0	NAME AND TITLE	
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Mattress Cover	•	Majo:	r bones 1	racture	d ex	ccept L/Pelvic	
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OTHER MEANS OF IDENTIFICATION		of a	ecomposed	l llesn.			
Report o	f Burial 18 J	Tune L	8 found v	vith rem	ains	5	
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MINOR DISCREPANCIES 1			FILE	· · · · · · · · · · · · · · · · · · ·			
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MO119			DATE 27			•	
REMAINS PREPARED AND PLACED IN CASKET			NAME B.T.	IR. MEM. D			
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DATE 9 Aug 48 CASKET SEALED BY	BY Antho			SMD8 - ST	, 		
			(Signature)	nthon	4 4	Martin	
Anthony J Martin Embal	mer	Anthony J Martin Embalime				ner	
CASKET BOXED AND MARKED	Embalmer	MENTAL MERITAGE All markings tags &					
DATE 9 Aug 48y Anthony J	Martin		s verific			- 101 M	
I hereby certify that all the for	<u></u>	re conduc	ted and accon				
and that the report above is correct		re conduc	//	ipiisiied onde	er my	immediate supervision	
Final Casketing B	lad		n. 1				
H. Mead Capt. CWS			Miad		C>	- 7 37	
	H. Mead,	, capt		57 AGRC		∋ 3 Hq.	
Prepare Discrepancy Report QMC	Form 1194a for major	discrepar		ONO INSPECTO	<u> </u>		
Consignee corrected - Re					1	0 1/9	
					ŀ	ie Ving	
IMC FORM TEV 15 MAR 46 (1194	=				_	<u> </u>	
Fred 13	<i>F</i>					• 1	
· · ·						· ~	

RECORD OF CUSTODIAL TRANSFER

	1. SH	IPPED	·
FROM USMC St Avold France .		10	<u> </u>
KIND OF CONVEYANCE Truck		NAME OF CONVOYER Cpl Stephen F Wilson, RA-39587409	
Frank B Callagran, 1 1 11 29	Date Oct 49	SIGNATURE OF RECEIVER	DATE
1/1000000000000000000000000000000000000	2 SHI	IPPED	
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	•	. (***	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER 1	DATE
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I NOM		10	
CIND OF CONVEYANCE	•	NAME OF CONVOYER (1) (1) (1) (1)	र के
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
			DATE
	<u> </u>	<u> </u>	

(Pasic: Ltr WD CQMG, 47GHI 293, dated 14 April 1947)

Bair, Albert M. 17 089 059,

RRE 293.9 (LB)

1st Ind

Ng American Graves Pegistration Command, Europe an Area Art 58 U.S. / rmy 20 January 1948

TO: The Quartornaster General, Washington 25, D. C.

- 1. One of the numerous Unknowns recovered from Munich and vicinity (list attached), interred in 10 Military Cametery St Avold, mry be associated with Surgeant Albert H. sair, 17 08) 059 o
- 2. Sonthund offert will be made to identify one of the Unknowns no the subject deceased

FOR THE COT'MIDING OFFICER:

Incls 77/d Addad

List of Unknowns

E. D. MULVANITY
Lt Colonel QMC
Actg Asst Adj Gen

293 luknown K-6306 St ac

Jones Sand

(Rasic: Ltr WD OCMG, GMGMF 293, Ballantyne, John, 16 151 730 dated 26 August 1947)

HRE 293,9 (IB)

1st Ind

Ha American Graves Aggistration Command, European AreaAPO 58 U S Army 20 January 1948

TO: The Quartermester General, Mashington 25, D. C.

- 1. One of the numerous thimowns, recovered from funich and vicinity (list attached), interred in US Military Cometery be Avold, my 'no associ tod with Staff Sergeant John Bellantyne, 13151 730.
- 2. Complement offert will be made to identify one of the Walmonns au Pho subject deceased. .

ID. THE COMMANDING OFFICER:

II. D. MULVARITY Lt Colonel WHC Actg Asst Adj Gen

Incl v/d ACCOM 1 Incl

Met of Camorns

(Basic: Ltr WD OQEG, QEDEM 293, Bassler, Kenneth R., ASN 02 056 335, dated 26 August 1947)

RE 293.9 (IB)

1st Ind

My Armyrican Graves Registration Command, Muropean Area AFO 58 U S Army 20 January 1948

TO: The Quartermaster Ceneral, Washington 25, D. C.

- 1. One of the numerous Unknowns recovered from Linich and vicinity (list attached), interred in US Military Comstery St Avold, may be associated with Second Lieuterant Kenneth R. Russler, 02 056 335.
- 2. Continued effort will be made to identify one of the Unimowns as the subject deceased.

FOR THE: COMPANDING GENERAL:

Incls
W/d
Added
I Incl

List of Unknowns

E. D. MULVANITY
Lt Colonel QMC
Actg Asst Adj Gen

(Basic: Ltr WD OCHE, QMGKE 293, Brennan, John A. J., ASN 0 736 967, dated 25 June 1947)

EME 293.9 (IB)

1st Ind

Hq American Graves Registration Command, European Area APO 58 U S Army 20 January 1948

To: The Quartermaster General, Washington 25, D. C.

- 1. One of the numerous Unknowns recovered from Munich and vicinity (list attached), interred in US Military Cometery St Avold, may be associated with First Lieutenant John A. Bronnan, Jr., 0 736 967.
- 2. Continued effort will be made to identify one of the Unknowns as the subject deceased.

FOR THE COMMANDING GENERAL:

Incle
w/d
Added
Incl
Ist of Unknowns

E. D. MUIVANITY Lt Colonel QMC Actg Asst Adg Gen (Basic: Ltr Dpt of the Army, Ould, Width 293, Brewer, Talmadge, SN 34 872 373, dated 30 September 1947)

NE 293.9 (13)

1st Ind

Hq American Graves Registration Command, European Area APO 58 U S Army 20 January 1948

To: The Quartormaster General, Washington 25, D. C.

- 1. One of the Unknowns recovered from Manich and vicinity (list attached,) interred in US Hilitary Cemetery St Avold, may be associated with Sergeant Talmadge Brewer, St 26 872 373.
- 2. Continued effort will be made to identify one of the Unknowns as the subject deceased.

FO. THE COMMANDERS OFFICER:

Incl 2/d Added 1 Incl List of Unknowns E. D. HULVAHITY
Lt Colonel QHC
Actg Asst Adj Gen

(Basic: Ltr WD 00MG, 0MGCM 293, Curran, James P., 31 132 702, dated 16 June 1947)

.RE 293.9 (IB)

1st Ind

HQ American Graves Registration Command, European Area APO 58 U S Army 20 January 1948

TO: The Quartermaster General, Washington 25, D. c.

- 1. One of the numerous Unknowns recovered from Munich and vicinity (list attached), interred in US Military Commotery St Avold, mry be associated with Sorgeant James P. Curran, SN 31 132 702.
- 2. Continued effort will be made to identify one of the Unknowns as the subject deceased.

FOR THE COMMANDING CEILINAL:

Incl
v/d
Added l Incl
List of Unknowns

11. D. HULWHITY Lt Colonel QMC Actg Asst Adj Gen (Basic: Litr WD CQMG Wighlm 203, Hayman, George W., U 722 485, dated 8 August 1947)

ine 293.9 (IB)

1st Ind

Eq American Gardes Registration Command, European Area AFO 58 U S Array 23 January 1948

To: The Guardan oter Ocnoral, Mashington 25, D. C.

- 1. One of the numerous Unknowns recovered from Limich and vicinity (Most attached), interred in US Military Constant St Avold, my to accommed with Second Lieutenant George U. Norma, 0 722 455.
- 2. Collinal allow vill to made to identify one of the . Tightne as the subject descreed,

FOR THE COMMANDUIG GENERAL:

Incl w/d Added 1 Incl Mot of Valorous E. D. MULVANITY

It Colonel WMC

Actg Asst Adj Cen

(Basic: Ltr VD 00mG GREEN 293, Jaeger, George F., 20 971 781, dated 8 August 1947)

REE 293.9 (IB)

1st Ind

Eq American Craves Registration Command, European Area APO 58 U S Army 20 January 1948

TO: The Quartermester General, Washington 25 D. C.

- 1. One of the numbrous Unknowns recovered from Munich and vicinity (list attached), interred in US Military Comstery St Avold, my he associated with Sorgeant George F. Jacger, SN 22 971 761.
- 20 forthird offert will be made to identify one of the Sametas as the subject decreases.

THE RITE CONTINUE OF BALLS

Incle T/d Added Lincl

Lie of Uninonis

E. D. HULVANITY
Lt Colonel GIIC
Actg Asst Adj Gan

(Basic: Ltr WD OUNG, QNOWM 293, Mooney, Thomas J. Jr., ASN 11 108 383, dated 8 August 1947)

ERE 293.9 (IB)

1st Ind

Hq American Graves Registration Command, European Area APO 58 U S Army 20 January 1948

TO: The Guartermaster General, Washington 25, D. C.

- 1. One of the numerous Unknowns recovered from Munich and vicinity (list attached), interred in US Military Community St Avold, may be associated with Sergeant Thomas J. Mooney, Jr., St. 12 108 288.
- 2. Continued effort will be made to identify one of the Unimowns as the subject deceased.

FOR THE COMMANDING GENERAL:

Incl
tr/d
Added 1 Incl
List of Unknowns

E. D. MULYANITY
Lt Colonel QMC
Actg Asst Adj Gcn

GECAT 29

lat Ind

GE European

SUBJECT: Certificates of Unidentificbility of Reseins Transmittal Letter \$4556

Dept. of the Army, O(30, Reshington 25, D. C., 31 January 1950

Chief, Registration Division, 7357 Graves Registration TÜ Betachsent, APO 50, c/o Postmester, New York, New York

- This Office approves the classification of Unknown X-6306, listed on basic communication, se Unidentifiable.
- Unknown R-3215 was suspended to your headquarters by letter dated 19 January 1950.
- It is recommended that all action in connection with other Unknowns listed be suspended pending further notification from this Office.

FOR THE COMPANIENCE CENTRAL:

Incle w/d

T. II. ETTS

Lt. Colonel, GEC

Memorial Division-

Rice/id

Poy

REB

Cy furnished: Adm Sect

314.6 M/S Emplo

REB

TEC

AIRMAIL

9

HEADQUARTERS AMERICAN GRAVES REGISTRATION COMMAND EUROPEAN AREA

	APO	58 US ARMY		
293 Unck.	France. X	-6306/11.4	Juold 2 Decem	aber 1949
SUBJECT:	Unidentifiable Rema	ins		

TO:

The Quartermaster General

Memorial Division Washington 25, D. C.

1. The records pertaining to Unknown X-6306, Plot X,
Row 1 , Grave 5 , 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. 3253 , dated 1-12-48 . No
further information is available.
FOR THE COMMANDING GENERAL:

Signed:

Col. H. P. Henry 0-12589

Lt. Col. E. D. Mulvanity 0-359598

Capt. Edward F. Price, Jr. 0-1588236

Not identifiable from. information presently available

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

RRE 293

Inc/#3

2 December 1949 (Date)

Parker

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

	Row 1 have been headquart the ident	, Grave reviewed and ters, that suf	5, USMO l it is the of ficient evidences	ST.AVOLD, I pinion of the lence is not a erned, therefore	France Board of Revial Revial Board of Revial	view, this	.,
•	2. of The a 1-12-48	uartermaster C	processing of General by Tr	of remains was cansmittal Let	forwarded to ter No. 32	o the Office 53, date	d
	3.	Remarks:					
	·	See Case Hist	ory attached	• Net identi	26 JAN 195 fiable from a precently	<u>oqu</u> g	محامية
coī. H.	/m/	•	•	Members of the	_		> MC
Maj. Ch	arles REYN	OLDS, 0-18263	Tc	Maj. Gerald S	WARTHOUT, Sr	., 0-267451	<u>-</u> CE
- <i>OAA</i> Capt .Ed	Ward F. PR	fue files, Jr., 8-1	7 588236	lst Lt. Frede	erick S. DAVI	D, 0-182604	ī C AV
 CWO Fra	nk GLER, W	-2102925	USA	Capt. Jack C.	HAYES, 0-15	77297	JMC

CASE HISTORY

Unknown <u>x-6306</u>

United States Military Cemetery St Avold (France)

- 1. The remains of Unknown x-6306, USMC St Avold, were recovered from the west Cemetery at Munich, Germany.
- 2. After comparing the tooth chart of the subject unknown decedent with all available dental data on unresolved casualties within the Germany M-49 Area, no reliable comparison could be made that could possibly result in the identification of the deceased.
- 3. Due to a lack of identifying data it is recommended that this case be declared unidentifiable.

hcb

AD)

HEADQUARTERS AMERICAN GRAVES REGISTRATION COMMAND EUROPEAN AREA APO 58 US ARMY

RRE 200.2

Date **1** DEC 1948

SUBJECT: Reprocessing of Remains

TO :

The Quartermaster General

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

The remains of X - 6306

interred in Plot X , Row 1 , Grave 5 , USing St. Avold

France , have been reprocessed and the information not previously forwarded to your Headquarters is herewith submitted.

HEIGHT :

: Est. 5' 8 7/8"

TEETH

: Found with the Remains

SKULL

: Fractured and Disarticulated

No evidence of healed Fractures or Amputations.

FOR THE COMMANDING GENERAL:

GEORGE L. FREEMAN 1st Lt GMC Actg Asst Adj Gen

2 Incls.:

1. Dental Chart

2. Skeletal Chart

Inc/#23

TOOTH CHART

E.O. 780

USMC St. Avold
X:1:5

17 September, 1948

X = 6306Last Name First Initial Grade Serial No. Organization Place of Death Date of Death Cause of Death Right FRACTURED 8 2 3 Mo Side views UPPER VIEWS LOWER Side Views 16 15 13 11 10 13 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.

CERTIFIED (GEORGE L. 1	0		
	FREEMAN	11	
lst Lt	QMC	/s/ Ivor J. Fosmo	
		Signature of Officer or other person who prepared Too	th chart
		Verfield by G. R.C. Officer	s.r.

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:	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 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

Ø

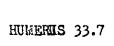
- Posthumously Missing

- Broken or Chipped

COLOR : Dull Ivory
SIZE : Average
ALIGNMENT : Good

R 4 - Slight Distal Rotation L 4 - Slight Distal Rotation (BLACK OUT PARTS OF BODY FOT RECLIVED AT CENETERY)

X-6306 USMC St. Avold X:1:5



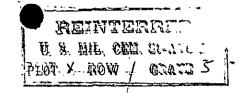
RADIUS 25. ? Smooth Fract.

FEMUR 47.7 Smooth Fract.

Est. HEIGHT: 5' 8 7/8"

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

TOOTH CHART



1247050 M94846 X-6306 Unknown Unknown Unknown Last Name Initial Rank Serial No. Unknown AAF Organization **Germany** Muenchen. Est. September 1944 Plane orech Place of Death Date of Death Cause of Death Right Left 8 7 6 5 3 2 3 6 1 1 2 5 7 8 ZISSINS 7/155/145 Side views UPPER TOP VIEWS LOWER Side Views 16 15 10 14 13 12 11 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.

Signature of Officer or other person who prepared Tooth chart

Jornato by Ja.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 y Porcelain crown Cold Crown y 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 O O O

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

The maxillary jaw bono from 4 right end 2-5 left were bodly decayed and was fractured between 1 to 5 right.

The lower mandible is fractured between 13 right 15 left.

<u> </u>								RKS SIG
			nı.	CINTED	MENT DIREC	TIVE	Ω ·	
	20	13 Sh	64-6	300	Fran	mel	1/	(well)
	SECTION NAME		TION OF DECEASED		DIRECTIVE NUM	0000	Ç.	DAY MONTH YEAR
NAME		•	UNKNOW	SERIAL N		RANK	ARM	DAY MONTH YEAR
CEMETERY	E, si	- NET					9	DISPOSITION OF REMAINS CODE DISTURT.
PLOT ROW	GRAVE	•	ANCE			• • •		CAUSE OF DEATH
			SECTION B — CO)NSIGNEE A	ND NEXT OF KIN			
NAME AND ADDRESS	OF CON	NSIGNEE		· -	E AND ADDRESS OF	F NEXT OF KIN	 -	
ST, AVOLE), F	rance						/
(BY ADMIN	1127	RATIVE CA					<u> </u>	
NAME			SECTION C — DISINT				-1	
NAME			SERIAL NUMBER	RANK	DATE OF DEATH		DAT	E DISTINTERRED
IDENTIFICATION TAG REMAINS MARKER	ON	ORGANIZATION	MAKINGHIN	-l	RELIGION	IDENTIFICATI	ON VER	•
		<u>.</u>	SECTION D — PREPARA	TION DE RE	MAINS FOR SHIPM	FNT	,	NAME AND TITLE
NATURE OF BURIAL					ON OF REMAINS	LIVI		
OTHER MEANS OF IDE	NTIFICA	TION					· · · · · · · · · · · · · · · · · · ·	
			<u> </u>	· .			· ·	
MINOR DISCREPANCIES	5 <i>1</i>		. •			•		
REMAINS PREPARED AN	ND PLAC	CED IN CASKET		<u>, </u>				
DATE	-		ve		•			
CASKET SEALED BY		•	ВУ	EMBALM	ER (Signature)			·
CASKET BOXED AND M	APKED	·		CHOOPIN	The second second			
LASKET BOXED AIND, IN	AKKLU			SHIPPING	G ADDRESS VERIFIED) BY		
DATE	ВУ		<u> </u>					
I hereby co and that the re	ertify (port a	that all the fore bove is correct.	egoing operations w	ere condu	octed and accon	nplished und	er my	immediate supervision

SIGNATURE OF GRS INSPECTOR

)RM MAR 46 1194

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

AGRC FORM No. 41 Revised 5 January 1946

CHECK LIST OF UNKNOWNS

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

	,	Unknown X <u>6306</u> Cemetery Q-260584 St Avold Plot X Row 1 Grave 5
1. Arrived at cometery		1946
2. Place of death	(bour) (date) HUENCHEN GOFFRANY (name of closest town)	(EY 8159) (coordinates and letter Prefex, maps)
with material to the state of t		/250,000, and semils used)
3. Remains recovered or		QM GROUP (name and organization)
		TON, TC. DET. THIRD FIFT, D. COMMAND A.G. I
		clothes do not fit, obtain size from body mea-
'		Clothing Indicate unusual markings Markings Sizes Color wear, tear, repairs, etc.
	· general	
·Headgear None	- <u>-</u>	•
Raincoat None	No. of the contract of the con	
•	of electric flying su	, • · ·
	199 100 134001100	
Mackinaw None	e en	** ** *** **** *** **** *** *** *** **
Sweater None		· · · · · · · · · · · · · · · · · · ·
Jacket, HBTNone	e de la compania del compania del compania de la compania del la compania de la compania della c	
Shirt X WOO XXX cotton	remants of.	политичний при
Undershirt, Wool		
Undershirt, Cotton None		
Trousers, Wool OD Mar		

	Belt, Web None	herbebberkherbnischler willigklere in normanie en en ein		
	Drawers, Wool Remnants of	gage	and to the organization manner in the time	P a
	Drawers, Cotton None		The American of the American was a superior of the state	
	Leggins, Wool. None	(Note	unusual lacing)	
	Socks, XXXXXX One (1) wool	produce and anomaly remarks		
	'Shod right (type)		on a programma constraint and a constrai	
	Overshoes None			•
	Web Equipment None (Type).		specific at the sufficient section of the supplier of	
	(Other item)Remnants of parachute Harr		·	
		• • • • • • • • • • • • • • • • • • • •	•	
	*If body is nude, sizes of these items should be con			
6.	Chevrons or None Insignia			
	Shoulder Patch None	tion : shirt, jacket, coat, h	elmet)	
_				
	0	ber of the Air, Gr	ound or Naval Forces	
	Air Force	ration — i replacement des description of	The second secon	
8.	Description of Remains :	•	•	
• •	Age UTD Height UTD Weight Descr	iption of wounds	UTD	
	Bandages or dressingsUTD	Scars	UID	
			(length, width, location)	
	Tatte (Number, location - il	OOSllustrate on sep, page) .	UTD	
	Outstanding miles, warts or birthmarks		UID	
		-	lescription, location)	
*****	A STATE OF THE STA	Period to the second se	ME CONSTRUCTION OF THE STATE OF	
	Sunburn or tan, other than hands & face		VID	
	ComplexionUTD		• •	
	Ruild (light, med. o	dark, cloar, pimples, pocks	•	
		e, fat, thin, muscular)	XXXX	
	(color, length, quantity, curly,	wave straight whoels or	definite parting).	.,,

(short, thick, long, slender, size of knuckles, missing fingers or joints) UTD (Unusual characteristics of fingernails)		•	ı			
(believes, withous peak, distinctive outling or other characteristics). Sideburns WID (color, string, theye) (light, color, string) (color, string, theye) (color, strin	1.0	•,	٠			
(bldaes, widows peak, distinctive cutting or other characteristics). WID (color; catting, shape) (dight, color, starth) (d	Hair	י פניט				
Colore setting, theys Colore, setting, they Colored Col		11 W	(baldness, widows peak, distinct	ive cutting or other charact	eristics).	
Color, setting, shape Eyebrows UTD (color, bashinese, estent across nose)	Sideburns		Mustache	UTD (color, size, shape)	Board or	
Eyes UTD Eyebrows UTD (color, stuting, shape) (tite, shape, straight) (tite, shape, straight, stra	α .					
Nose UID (dist, thise, straight) Ears UID Mouth UID (large, medium, small) (small large, full) Feeth See tooth chart (white, size, unevenes, spacing, noticeable crowns, fillings, extract). Chin UID (prominent, receding, pointed, dimple, double) Maw UID (large, small, normal) (large, small, normal) Feek UID (large, small, normal) (large, small, normal) Fock UID (axise, length, short, normal, wrinkled) (prominent, normal) Shoulders UID Arms UID (extent and quantity of hair) Hands UID (catent and quantity of hair) Chest UID (catent and quantity of hair) UID (catent and quantity of hair) UID (catent and quantity of hair) Chest UID (catent and quantity of hair) Chest UID (catent quantity & extent of heir, large, small normal) UID (catent quantity & catent of hair) (catent quanti	joatee	(light, color, extent)	was subsected trig			
Nose UTD (size, stronglate) (size, stronglate) (size, stronglate) (size, stronglate) (size, stronglate) (size, stronglate) (size) (size, stronglate) (size)	Eves	UIL	Evebro	UID		
(size, strape, straight) (size, strape, straight) (size, medium, small) (canall large, full) (canall large	-J ·	(color, setting, shape))	(colo	or, bushiness, extent neross nos	se)
Mouth UTD Lips UTD (targe, medium, small) (targe, medium, small) (targe, medium, small) (thin UTD (white, size, uneveness, spacing, noticeable crowns, fillings, extrect). Chin UTD (forominent, receding, pointed, dimple, double) faw UTD (farge, small, normal) (that band) Circumference of head in inches UTD (farge, small, normal) (that band) UTD (that band) UTD (the glib, short, normal, wrinkled) (the glib, muscular, color) UTD (extent and quantity of lair) UTD (extent and quantity of lair) UTD (the color, thick, long, slander, size of knuckles, missing fingers or joints) UTD (Unusual characteristics of fingernalls) Chest UTD (the of nipples, color, quantity & extent of heir, large, small normal) Back UTD (quantity & extent of hair) (quantity & extent of hair) (gree, no: location) (yee, no: location) (yee, no: location)	Vose	UTD	Fare	ŒŪ		
Feeth See tooth chart (white, size, uneveness, spacing, noticeable crowns, fillings, extract). Chin UTD (prominent, receding, pointed, dimple, double) Jaw UTD (large, small, normal) Neck UTD (size, length, short, pormal, wrinkled) Circumference of head in inches (bat band) Neck UTD (size, length, short, pormal, wrinkled) Choulders Chronicest, straight, small, rounded) UTD (extent and quantity of hair) UTD (catent and quantity of hair) UTD (catent and quantity of hair) UTD (Causani characteristics of fingernalls) Chest UTD (size of nipples, color, quantity & extent of hair, large, small normal) UTD (quantity & estent of hair) (quantity & estent of hair) (quantity & color of hair) (ges-no) (ges-no) (ges-no) Circumcision UTD (ges-no) (ges-no) (color)	1030)		et close to or far from head)	
Feeth See tooth chart (white, size, uneveness, spacing, noticeable crowns, fillings, extract). Chin UTD (prominent, receding, pointed, dimple, double) Jaw UTD (large, small, normal) Neck UTD (size, length, short, pormal, wrinkled) Circumference of head in inches (bat band) Neck UTD (size, length, short, pormal, wrinkled) Choulders Chronicest, straight, small, rounded) UTD (extent and quantity of hair) UTD (catent and quantity of hair) UTD (catent and quantity of hair) UTD (Causani characteristics of fingernalls) Chest UTD (size of nipples, color, quantity & extent of hair, large, small normal) UTD (quantity & estent of hair) (quantity & estent of hair) (quantity & color of hair) (ges-no) (ges-no) (ges-no) Circumcision UTD (ges-no) (ges-no) (color)	Mauth	UTD	Ĩ:na	UTD	•	
(white, size, uneveness, spacing, noticeable crowns, fillings, extract). Chin UTD (prominent, receding, pointed, dimple, double) Inw UTD (large, small, normal) Circumference of head in inches (but band) UTD (size, length, short, normal, wrinkled) UFD (size, length, short, normal, wrinkled) (length, muscular, color) UFD (extent and quantity of hair) UHD (extent and quantity of hair) UHD (bhort, thick, long, slender, size of knuckles, missing fingers or joints) UTD (boot, thick, long, slender, size of knuckles, missing fingers or joints) UTD (base of nipples, color, quantity & extent of hair, large, small normal) UTD (size of nipples, color, quantity & extent of hair, large, small normal) UTD (quantity & extent of hair) (quantity & color of hair) (quantity & color of hair) (pres-no) (contion) (pres-no) (contion) (pres-no) (contion)	MOUTH	{large, medium, sma	ll)	*	(small large, full)	***************************************
Committeent	Γeeth	See tooth	1 chart (white, size, uneveness, spacing,	noticeable crowns, fillings,	extract),	Albandanin Elav d'approb
Inw UTD Circumference of head in inches UTD (large, small, normal) Neck UTD Larynx UTD (size, length, short, normal, wrinkled) Choulders UTD Arms UTD (length, muscular, color) UTD (extent and quantity of hair) Cingers UID (size of nipples, color, quantity & extent of hair, large, small normal) Chest UTD (size of nipples, color, quantity & extent of hair, large, small normal) Circumcision UTD (quantity & extent of hair) Circumcision UTD (quantity & color of hair) (yes-no; location) Cyes-no; location) Cyes-no; location]	^hin	UTD				
Neck UTD (size, length, short, normal, wrinkled) Shoulders UTD Arms UTD (extent and quantity of hair) Hands UTD (short, thick, long, slender, size of knuckles, missing fingers or joints) UTD (unusual characteristics of fingernalls) Chest UTD (size of nipples, color, quantity & extent of hair, largo, amall normal) Arms UTD (unusual characteristics of fingernalls) Chest UTD (size of nipples, color, quantity & extent of hair, largo, amall normal) UTD (quantity & extent of hair) (size of navel, appendectomy, amount) Herniaplasty UTD (yes-no) Pubic hair UTD (yes-no) (yes-no) (color)	>111111		(prominent, receding,		Metilika elikua erranen amenganya <u>mappa apapea pape</u> a _d a papea papea	MANASTRANSSILLANORS AND
Neck UTD (size, length, short, normal, wrinkled) Shoulders UTD Arms UTD (extent and quantity of hair) Hands UTD (short, thick, long, slender, size of knuckles, missing fingers or joints) UTD (unusual characteristics of fingernalls) Chest UTD (size of nipples, color, quantity & extent of hair, largo, amall normal) Arms UTD (unusual characteristics of fingernalls) Chest UTD (size of nipples, color, quantity & extent of hair, largo, amall normal) UTD (quantity & extent of hair) (size of navel, appendectomy, amount) Herniaplasty UTD (yes-no) Pubic hair UTD (yes-no) (yes-no) (color)	T	עייט	C:		UTD	
(size, length, short, normal, wrinkled) (shoulders UTD Arms UTD (broad, straight, small, rounded) (extent and quantity of hair) UID (extent and quantity of hair) UID (short, thick, long, slender, size of knuckles, missing fingers or joints) UID (unusual characteristics of fingernalls) (unusual characteristics of fingernalls) Chest (size of nipples, color, quantity & extent of hair, large, small normal) 3ack (quantity & extent of hair) (quantity & extent of hair) (quantity & color of hair) (quantity & color of hair) (yes-no; location) (yes-no; location) (yes-no; location) (yes-no; location)	Jaw	(large, small, normal)		of head in inches	· · (but band)	*******
(size, length, short, normal, wrinkled) (shoulders UTD Arms UTD (broad, straight, small, rounded) (extent and quantity of hair) UID (extent and quantity of hair) UID (short, thick, long, slender, size of knuckles, missing fingers or joints) UID (unusual characteristics of fingernalls) (unusual characteristics of fingernalls) Chest (size of nipples, color, quantity & extent of hair, large, small normal) 3ack (quantity & extent of hair) (quantity & extent of hair) (quantity & color of hair) (quantity & color of hair) (yes-no; location) (yes-no; location) (yes-no; location) (yes-no; location)		UTD			UTD	
Shoulders UTD (length, muscular, color) UTD (extent and quantity of hair) UID (short, thick, long, slender, size of knuckles, missing fingers or joints) UID (lausual characteristics of fingernalls) (Unusual characteristics of fingernalls) Chest UID (aize of nipples, color, quantity & extent of hair, large, small normal) Sack UID (quantity & extent of hair) (quantity & extent of hair) Circumcision UID (quantity & color of hair) (quantity & color of hair) (yes-no) (yes-no) (yes-no) (yes-no) (yes-no) (yes-no) (yes-no) (yes-no) (yes-no)	Neck		rmal, wrinkled)	Larynx		
Libroad, straight, small, rounded) UID (extent and quantity of bair) UID (short, thick, long, slender, size of knuckles, missing fingers or joints) UID (Unusual characteristics of fingernalls) Chest UID (size of nipples, color, quantity & extent of hair, large, small normal) Back UID (quantity & estent of hair) (quantity & estent of hair) Circumcision UID (quantity & color of hair) (yes-no; location) UID (yes-no; location) UID (yes-no; location) UID		(मम्			רמיוז	
(extent and quantity of hair) Hands UID (short, thick, long, slender, size of knuckles, missing fingers or joints) UID (Unusual characteristics of fingernails) Chest (size of nipples, color, quantity & extent of hair, large, small normal) Back UID (quantity & extent of hair) (quantity & extent of hair) (quantity & color of hair) (quantity & color of hair) (yes-no; location) UID (yes-no; location)	Shoulders	***************************************		Arms		······································
Hands UID (short, thick, long, slender, size of knuckles, missing lingers or joints) UID (unusual characteristics of lingernails) (size of nipples, color, quantity & extent of heir, largo, small normal) Back (quantity & extent of heir) (quantity & extent of heir) (quantity & color of hair) (quantity & color of hair) (yes-no) (color, location) (yes-no) (color, location)		-			, , , , , , , , , , , , , , , , , , , ,	
Hands UID (short, thick, long, slender, size of knuckles, missing fingers or joints) UID (Unusual characteristics of fingernalls) Chest UID (size of nipples, color, quantity & extent of heir, largo, small normal) Back UID (quantity & extent of heir) (quantity & extent of heir) Circumcision UID (quantity & color of heir) (yes-no) Pubic heir UID (quantity & color of heir) (yes-no) (yes-no) UID (quantity & color)			f hair]	****		
(short, thick, long, slender, size of knuckles, missing fingers or joints) UTD (Unusual characteristics of fingernalls) Chest UTD (size of nipples, color, quantity & extent of hair, large, small normal) Back (quantity & extent of hair) (quantity & extent of hair) Circumcision UTD (quantity & color of hair) (quantity & color of hair) (yes-no; location) UTD (yes-no; location)			·			
(short, thick, long, slender, size of knuckles, missing fingers or joints) UTD (Unusual characteristics of fingernalls) Chest UTD (size of nipples, color, quantity & extent of heir, largo, small normal) Back (quantity & extent of heir) (quantity & extent of heir) Circumcision UTD (quantity & color of hair) (quantity & color of hair) Herniaplasty UTD (yes-no; location) UTD (yes-no; location)	Hands	OTD.	ti		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·/
(short, thick, long, slender, size of knuckles, missing fingers or joints) UTD (Unusual characteristics of fingernalls) Chest UTD (size of nipples, color, quantity & extent of heir, largo, small normal) Back (quantity & extent of heir) (quantity & extent of heir) Circumcision UTD (quantity & color of hair) (quantity & color of hair) Herniaplasty UTD (yes-no; location) UTD (yes-no; location)						
(Unusual characteristics of fingernails) Chest UTD (size of nipples, color, quantity & extent of hair, largo, small normal) Back UTD (quantity & extent of hair) (quantity & extent of hair) (quantity & color of hair) (yes-no) (yes-no) (yes-no) (yes-no) (yes-no) (yes-no) (yes-no)	Fingers	עניט				**************************************
(Unusual characteristics of fingernails) Chest (size of nipples, color, quantity & extent of hair, largo, small normal) Back (quantity & extent of hair) (quantity & extent of hair) (quantity & color of hair) (yes-no) (yes-no) (yes-no) (yes-no) (yes-no) (yes-no) (yes-no)		•	(short, times, long, siender, size	or knuckies, missing tinger	s er loints)	
Chest UTD (size of nipples, color, quantity & extent of heir, large, small normal) Back UTD (quantity & extent of heir) (quantity & extent of heir) (quantity & color of hair) (quantity & color of hair) (quantity & color of hair) (yes-no) (yes-no) (yes-no) (yes-no) (yes-no) (yes-no) (yes-no)		UID			**************************************	
(size of nipples, color, quantity & extent of heir, large, small normal) Back UTD (quantity & extent of heir) (quantity & extent of heir) (quantity & color of heir)		• •	(Unusual characteristi	es of fingernails)		
Back UTD (quantity & extent of hair) UTD (quantity & color of hair) Gircumcision UTD Pubic hair UTD (yes-no) Herniaplasty UTD (yes-no; location) UTD (yes-no; location)	Chest					
(quantity & extent of hair) Circumcision UTD Pubic hair UTD (quantity & color of hair) (quantity & color of hair) (yes-no) (yes-no) (yes-no) (yes-no) (yes-no)		. (s	ize of nipples, color, quantity &	extent of heir, largo, small	l normal)	
(quantity & extent of hair) Circumcision UTD Pubic hair UTD (quantity & color of hair) (quantity & color of hair) (yes-no) (yes-no) (yes-no) (yes-no) (yes-no)	Back	UTD	a	131		
(quantity & color of hair) (yes-no) (color) Herniaplasty UTD Legs		. (quantity & extent of	of hair)	. (size	of navel, appendectomy. smou	at)
(quantity & color of hair) (yes-no) (color) Herniaplasty UTD Legs		מיויז		Graumaisian IPD	Dubia bain	רויוווז
(yes-no; location) Legs			r)			
(yes-no; location) Legs	Herniaplasty	UTD		•		
1CS		(yes-no; locatio	n]			
· (inseam, muscular, knock-kneed, howed, normal, quantity, color & extent of hair)	Legs					erafaty Merchinical best and control of the last
	•	· (insenm,	, muscular, knock-kneed, bowed,	normal, quantity, color &	extent of hair)	

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	ıs, caliouses, flat)	Toes UTD (slender, straight, crooked, overlap)	•
1 125 G		talenter, stringer, crobkru, overap)	
Evidence of healed factu	iresUID	(nose, arms, legs, etc.)	
		•	
Black out parts of body	not received at cemetery	;	
·			
•			>>
• .	•		
• .			
	ar a de la companya d		~
Hora Garage at the La	landa Darie ette		
mave ungerprints been p	laced on Report of Intern	nent (yes-no)	
If not avalate ====================================			
		o missing portions.	
••	Yes		
Has tooth about book	norad	If make and late	
Has tooth chart been pre	epared (yes-no)	If not, explain	**********
Has tooth chart been pre	pared (yes-no)	If not, explain	
Remarks : Entire b	ody received exept a	s noted in diagram Badly decom	
Remarks : Entire b		s noted in diagram Badly decom	
Remarks : Entire b	ody received exept a	s noted in diagram Badly decom	
Remarks : Entire b	ody received exept a	s noted in diagram Badly decom	
Remarks : Entire b	ody received exept a	s noted in diagram Badly decom	· ************************************
Remarks : Fntire by	ody received exept a Ment a Menuaius received	s noted in diegram Badly decom	200
Remarks: Entire by Weight of	ody received exept a Ment a Menuaius received	s noted in dierram Badly decomes 100 lbs. s of subject deceased and all resulting info	200
Remarks: Entire by Weight of	only received exept a free free free free free free free fr	s noted in diagram Badly decomes 100 lbs.	pos
Remarks: Entire by Weight of	only received exept a free free free free free free free fr	s noted in diagram Badly decomes 100 lbs.	pos
Remarks: Entire by Weight of	only received exept a free free free free free free free fr	s noted in dierram Badly decomes 100 lbs. s of subject deceased and all resulting info	pos
Remarks: Entire by Weight of	only received exept a free free free free free free free fr	s noted in diagram Badly decomes 100 lbs. s of subject deceased and all resulting info wm. J. Petton (2) Vm. J. PPLTON Officer's Name	pos
Remarks: Entire by Weight of	only received exept a free free free free free free free fr	s noted in diagram Badly decomes 100 lbs. s of subject deceased and all resulting info wm. J. Pelton (7	pos

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Organization

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DATE OF REPORT NO OMC: FORM 1042 REPORT OF INTERMENT (Rev. 1 Apr. 1945) (Supersedes GRS Form 1) (AR 30-1810 and AR 30-1815) 18 June 1946 Imprint Identification Tag If Possible. Section 1.- IDENTIFICATION. DO NOT TYPE NAME (Last, first, middle initial) SERIAL NO. Unknown X-6306 Unknown ORGANIZATION BRANCH OF SERVICE GRADE Unknown Unknown A.A.F. RELIGION . IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY RACE Iinknown Unknown PLACE OF DEATH . CAUSE OF DEATH DATE OF DEATH Muenchen, Germany Plane Crash Est.Sept.1944. EMERGENCY ADDRESSEE (Name, relationship, and address) Unknown IDENTIFICATION TAGS FOUND ON BODY IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reserve) (1. 2. or none) None WERE SUBSTITUTE TAGS PROVIDED (Yes or BO) None LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME I None Section 2.—BURIAL. If other than in established cometery, furnish sketch and map coordinates on reverse. NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY U.S. Military Cemetery (260584) ST.AVOLD, FRANCE. BURIED IN (Shroud, blanket, or name of other) DATE OF BURIAL HOUR TYPE OF GRAVE MARKER PLQT No. ROW No. GRAVE NO. Casket 1400 18 June 1946 Temp.wooden Cross WAS THIS A REBURIAL? IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF FREVIOUS CEMETERY, AND LOCATION OF GRAVE Muenchen, West Cemetery, Germany PLOT No. ROW No. GRAVE No. Yes 30 45 WY 8159, 1:250,000 IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY TYPE OF RELIGIOUS PERSON CONDUCTING BURIAL RITES General Service CH. J.B. JOHNSON, 1st Lt. One copy WD QMC Form 1042 - Report of Interment - placed in burial bottle and IDENTIFICATION TAG ATTACHED TO IDENTIFICATION TAG BURIED WITH BODY (Yes or no) buried with remains. No Yes, embossed plate BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) RANK ORGANIZATION SERIAL NO. GRAVE No. WILLOUGHBY JACK D. SGT. 15335918 AAF4 BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) SERIAL NO. ORGANIZATION GRAVE No. X-6310 UNK. . UNK. AAF 6 SIGNATURE OF PERSON PREPARING REPORT MAX M. SCHIFF . DET. THIRD FIELD COMMAND, A.G.R.C. SLEATOR MAJOR Inf.

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through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.

DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed dright and one only dead, to the Quartermaster General

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	Section	UNIDENTIFIED	REMAINS.					
LEFT LITTLE FINGER	(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks. (b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be							
RING	every tooth accomplish	t, or as many will be indic ed if one or r	r as possib ated on the more finge	le. It no e tooth cl rprints ar	nart in accore secured.	ordance with	an be secured, the diagram below.	e condition of each and Tooth chart will not be
LEFT RING FINGER	HEIGHT	WEIGHT	COLOR OF	EYES	COLOR OF		BIRTHMARKS, SCA	RS, OR TATTOOS
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м	weapon and	SERIAL NO.		LAUNDRY				BURIED OR FOUND
(pote	None				one -		Muenc	hen, Germany.
LEFT MIDDLE FINGER	OTHER IDENT	TIFICATION CLI	ues .	•	٠.			
				, , , , No	one			
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LEFT INDEX FINGER								
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THUMB	CAVITIE	CAVITIES CAVITY 6			UPPER	1850 s.		
죑						7 Sl		May 1
						8		1000
	MISSING	TEETH	70	oih missi	HG)	
RIGHT THUMB			Y Q) .		DIAGRAM	REPRESENTS THE	MOUTH WIDE OPEN
益士			NINC.	.	٠. •			54An
	CROWNED	TEETH	POR	CELAIN C	ROWN	16/.0		
(2	,	Ţ	MARIA	STD CHOA	√H	15 \	LOWER	2777
RIG DEX F	BRIDGE	WORK				14	Yellow	
RIGHT (DEX FINGEN	DRIVGE	WURK		GOLD	BRIDGE		2004	1012
							`"\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	Elibnich ch	TCH AND MAD	DECEDENCE	AND COO	RDINATES E	OR BURIAL IN	OTHER THAN ESTA	BLISHED CENETERY
RIGHT MIDDLE FINGER	, ·	I CH AND MAP	REFERENCE	,		on bonnae in	·	DEIDHED GENETICKT (
MGER			144					1
			~ N	one	* 1 *** 17			
R	1			÷		-		
RIGHT RING FINGER	- 1	٠						
GER .								
	REMARKS:	Attached:						Form IA, -
57	Tooth Chart. Unable to obtain fingerproduce to missing portions.							rprints
PIGHT LITTLE FINGER	in the state of th							
G.	Est. weight of remains received: 100 lbs.							