

7887 GRAVES DETACHMENT

APO 757

943 unk St. Avold X-6515 *me*

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-6515 St Avold

(POC) ST AVOLD

*File  
E. F. Ford  
Gen. Br  
26 Feb 51*

# IDENTIFICATION CHECK LIST

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

E.O. 786

Unknown X 6515  
 Cemetery St. Armand, France  
 Plot EEEE Row 9 Grave 107

*Re-Processed*  
 1. Arrived at cemetery 24 Aug 48  
(Hour) (Date)

2. Place of death \_\_\_\_\_  
(Name of closest town) (Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3. Remains ~~recovered or dismissed~~ *reprocessed* by Mobile Team #1, C.I.P.  
(Name and organization)

4. Evacuated to Cemetery by \_\_\_\_\_  
(Name and organization)

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

| Item                               | Clothing Markings     | Sizes | Indicate unusual markings<br>color, wear, tear, repairs, etc. |
|------------------------------------|-----------------------|-------|---|
| * Headgear _____                   | <small>(Type)</small> |       |   |
| Raincoat _____                     |                       |       |   |
| Overcoat _____                     |                       |       |   |
| Jacket, Field _____                |                       |       |   |
| Jacket, Combat _____               |                       |       |   |
| Mackinaw _____                     |                       |       |   |
| Sweater _____                      |                       |       |   |
| Jacket, HBT _____                  |                       |       |   |
| * Shirt, Wool OD _____             |                       |       |   |
| X Undershirt, Wool, <u>white</u>   |                       |       | <u>Remnants</u>   |
| X Undershirt, Cotton, <u>white</u> |                       |       | <u>Remnants</u>   |
| Trousers, HBT _____                |                       |       |   |
| * Trousers, Wool OD _____          |                       |       |   |

Belt, web \_\_\_\_\_

Drawers, wool \_\_\_\_\_

Drawers, cotton \_\_\_\_\_

Leggings, wool \_\_\_\_\_

Socks, cotton \_\_\_\_\_

\* Shoes \_\_\_\_\_ (type) \_\_\_\_\_

Overshoes \_\_\_\_\_

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? UTD

6. Description of Remains: All major bones missing

Age UTD Height <sup>Est.</sup> UTD Weight UTD Description of wounds UTD

Bandages or dressings NONE Scars \_\_\_\_\_  
(Length, width, location)

Tattoos \_\_\_\_\_  
(Number, location — illustrate on separate page)

Outstanding moles, warts or birthmarks \_\_\_\_\_  
(Yes-no; description, location)

Sunburn or tan, other than hand and face UTD

Complexion \_\_\_\_\_  
(Light, medium, dark, clear, pimples, poeks, freckles)

Build \_\_\_\_\_  
(Large, fat, thin, muscular)

Hair \_\_\_\_\_ NONE  
(Color, length, quantity, curly, wavy, straight, whorls, or definite parting)

Hair \_\_\_\_\_ UTD  
(Baldness, widows peak, distinctive cutting or other characteristics)

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

Goatee \_\_\_\_\_ (Light, color, extent)

Eyes \_\_\_\_\_ (Color, setting, shape) Eyebrows \_\_\_\_\_ (Color, bushiness, extent across nose)

Nose \_\_\_\_\_ (Size, shape, straight) Ears \_\_\_\_\_ (Size, set close to or far from head)

Mouth \_\_\_\_\_ (Large, medium, small) Lips \_\_\_\_\_ (Small, large, full)

X Teeth \_\_\_\_\_ *No teeth found.* (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin \_\_\_\_\_ (Prominent, receding, pointed, dimples, double)

Jaw \_\_\_\_\_ (Large, small, normal) Circumference of head in inches \_\_\_\_\_ *Skull missing* (Hat band)

Neck \_\_\_\_\_ (Size, length, short, normal, wrinkled) Larynx \_\_\_\_\_ (Prominence, normal)

Shoulders \_\_\_\_\_ (Broad, straight, small, rounded) Arms \_\_\_\_\_ (Length, muscular, color, extent and quantity of hair)

Hands \_\_\_\_\_ *Missing*

Fingers \_\_\_\_\_ *Missing* (Short, thick, long, slender, size of knuckles, missing fingers or joints)

\_\_\_\_\_ (Unusual characteristics of fingernails)

Chest \_\_\_\_\_ (Size of nipples, color, quantity and extent of hair, large, small, normal)

Waist \_\_\_\_\_ (Size of navel, appendectomy, amount, quantity, and color of hair)

Back \_\_\_\_\_ (Quantity and extent of hair) Circumcision *UTD* (Yes-no) Pubic Hair *NONE* (Color)

Hernioplasty \_\_\_\_\_ (Yes-no; location)

Legs \_\_\_\_\_ (Inseam, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

Feet \_\_\_\_\_ (Size, corns, callouses, flat) Toes \_\_\_\_\_ *UTD* (Slender, straight, crooked, overlap)

Evidence of healed fractures \_\_\_\_\_ *NONE* (Nose, arms, legs, etc.)

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

7. Have finger prints been placed on Report of Interment? 95 (Yes-no)

If not, explain Fingers missing

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

Remains processed as per E.O. # 786

9. Remarks Remains received in skeletal form with no amount of decomposed flesh.  
Clothing found in debris, bore no markings. Skull missing.  
Estimated weight of reprocessed remains: 120 pounds.  
Estimated height: UTD - All major bones missing.  
No evidence of old or healed fractures or amputations.  
Report of Burial found; no GRS tags.

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.

Processed by: S. Rice  
R. De Pass

Clerk: A. Richardson

George T. Schwadener  
(Officer's Name)

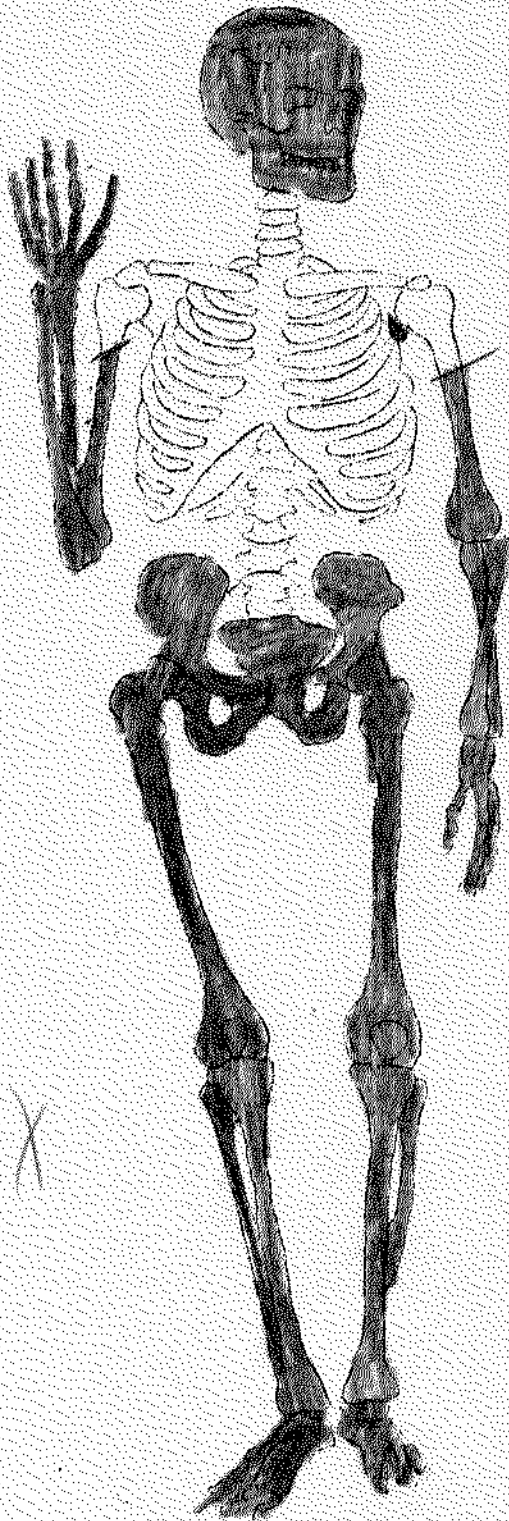
Rank Service

(Organization)

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

X-6515  
4E-9-107  
USMC ST. AYOLD  
24 AUG -48



ANNEX 7

EST. HEIGHT = UTD

95.

ALL MAJOR BONES MISSING

REPORT OF INVESTIGATION  
AREA SEARCH

REENTERED  
U. S. MIL. CEM. ST-AYOLD  
PLOT ~~116~~ ROW 9 GRAVE 107

AGRC Form # 10 (Revised)

1 January 1946.

June, 18, 1946

Date

NAME Unknown X-6515 RANK Unk. ASN Unknown

ORGANIZATION Ex A.A.F.

MEANS OF IDENTIFICATION None

(All statements above this line will be completed, upon final processing, by the clerical staff at the unit processing point.)

SECTION A - GENERAL (To be completed by investigators in all cases)

1. Was positive identity acquired for the deceased through the surface investigation? **NO**  
If so, state the following information:

a. NAME unknown RANK unknown ASN unknown

b. ORGANIZATION unknown

2. Was partial identification established? **NO** If so, state the facts as to whom you believe the deceased to be:

a. NAME unknown RANK unknown ASN unknown

b. ORGANIZATION unknown

3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY unknown

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

a. Date of above burials 1943 TO APR 1945 Common Graves?

5. Name and Type of Cemetery ~~US ARMY~~ CIVILIAN CEMETERY  
(Military or Civilian)
6. Map Coordinates of the Cemetery WY 857 8159 C7M
- a. Town HOCHMUTTING Country GERMANY
7. Give exact location in cemetery of the remains.
- a. Section ISOALTED Row Grave
- b. Is Sketch attached? YES
8. If remains are not located in a cemetery, give exact location.
- a. Town Coordinates
- b. Is sketch attached?
- c. Is area mined?
9. How is the grave marked? WITH WOODEN CROSS
10. If grave is marked with cross, give exact markings thereon  
 \*HIER RUHEN 23 SOLDATEN DER AMERIKANISCHEN ARMEE\*
- a. From what source was this information obtained? UNKNOWN  
 (Identification tags, personal effects)
- b. By Whom
11. Where are the cemetery records? (Town Hall, cemetery, burgemeister's office)  
 TAKEN BY GERMAN AIR FORCE PERSONNEL
- a. What information was contained thereon? UNKNOWN
- b. Where was the information obtained?
- c. By Whom? UNKNOWN
12. What is the date of death?
- a. Give basis PLANE CRASHES
13. What is the cause of death? CEMETERY CARETAKERS STATEMENT
- a. Give basis UNKNOWN
14. What is the date of burial?
- a. Give basis



15. Where was the place of death? UNKNOWN Coords \_\_\_\_\_  
Give basis \_\_\_\_\_

16. Where were the remains found? UNKNOWN Coords \_\_\_\_\_

a. By Whom? UNKNOWN

b. Is sketch attached? NO

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

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

18. Who made the burial GERMAN CIVILIAN AND MILITARY PERSONNEL  
(Civilian, American Mil. or German Mil.)

a. What are the names and addresses? UNKNOWN

b. Are certificates and statements attached? NO

**SECTION B - AIR CORPS DECEASED (To be Completed only if Deceased is believed to be a member of the AAF).**

19. Were remains found in the plane wreckage? UNKNOWN

a. Give location in plane from which the bodies were removed \_\_\_\_\_

UNKNOWN

(Tail gunner, pilot, radio, turret, etc., or front, side, of plane)

b. Near wreckage? \_\_\_\_\_

20. Scene of crash must be investigated. Give complete results of investigation (if removed, state when and by whom).

a. Type of Plane UNKNOWN

b. Markings and/or name on plane \_\_\_\_\_

c. Give numbers on motors, machine guns, instruments, radios or other equipment: \_\_\_\_\_

21. How did crash occur? \_\_\_\_\_ Anti-aircraft \_\_\_\_\_

Enemy Planes? \_\_\_\_\_ Collision? \_\_\_\_\_

22. Did plane explode in the air? UNKNOWN On ground? UNKNOWN
23. Did plane burn in the air? UNKNOWN On ground? UNKNOWN
24. What was the direction of the flight? UNKNOWN
25. What was the civilian opinion regarding destination of plane? NO
26. Had bombs been released prior to the crash? UNKNOWN
27. Does specific time and date of crash correspond with date of death of above named deceased?  
NO DATE AVAILABLE
28. Number of planes in formation prior to crash UNKNOWN
29. State precise time and date of plane crash UNKNOWN  
(Night? Day?)
30. Were parachutists seen? UNKNOWN How many? \_\_\_\_\_ Escaped? \_\_\_\_\_  
UNKNOWN  
Prisoners? \_\_\_\_\_

**SECTION C - ARMORED CORPS DECEASED (To be completed only if deceased is believed to have been a member of the Armored Force).**

31. Were remains found in wreckage of a tank? \_\_\_\_\_
- a. Give specific position in tank from which deceased was removed. \_\_\_\_\_  
\_\_\_\_\_  
(Radio man, driver, assistant driver or ... front, side, or back)
- b. Near wreckage? \_\_\_\_\_
32. Location of destroyed tank must be investigated. Give complete results of investigation. (If removed, state when and by whom)
- a. Type of tank \_\_\_\_\_
- b. Markings and/or name of tank \_\_\_\_\_
- c. Numbers on motors, machine guns, ammunition, instruments, etc \_\_\_\_\_
33. What was the type of enemy action that resulted in the tank's disablement? \_\_\_\_\_
34. Did tank explode? \_\_\_\_\_ Burn? \_\_\_\_\_

35. Number of tanks in immediate vicinity at time of disablement \_\_\_\_\_

36. Does specific time and date of disablement correspond with date of death of above named deceased ?

37. Precise time and date of destruction of tank \_\_\_\_\_  
(Night ? Day ?)

38. Did any of the crew members escape ? \_\_\_\_\_ Prisoners ? \_\_\_\_\_

**SECTION D - OTHER BRANCH (To be filled out if B & C are not applicable)**

39. Did death occur from any other means ? (i. e., truck, jeep, mines, drowning, or small arms fire) \_\_\_\_\_

If so, give, complete and thorough results of the 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. \_\_\_\_\_ NONE \_\_\_\_\_

**SECTION E - GENERAL (To be completed by investigation in all cases)**

41. Were personal effects recovered by the investigating team \_\_\_\_\_ NO \_\_\_\_\_

If not, state reason \_\_\_\_\_ ALL PERSONAL EFFECTS REMOVED BY GERMAN PERSONNEL \_\_\_\_\_

a. Were identification tags found at the time of death ? \_\_\_\_\_ UNKNOWN \_\_\_\_\_

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.

b. Were personal effects found at the time of death ? \_\_\_\_\_ UNKNOWN \_\_\_\_\_

Where ? \_\_\_\_\_ By Whom ? \_\_\_\_\_

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

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

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

42. Was Deceased given first aid? UNKNOWN If so, where? \_\_\_\_\_

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

43. Was deceased evacuated to a German civilian hospital? UNKNOWN

WHERE? \_\_\_\_\_ Names of people concerned \_\_\_\_\_

44. Is it possible on surface investigation to obtain from civilian sources a physical description of the deceased? NO

45. Is it possible on surface investigation to obtain from civilian sources the condition of the remains?

(Burnt? Decapitated? etc)

46. Do facts surrounding death show any evidence that it might be an atrocity case? \_\_\_\_\_

NO

a. If so, give basis for positive assumption \_\_\_\_\_

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

47. Was case previously investigated? NO By Whom? \_\_\_\_\_

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

48. Give full names, addresses, and information obtained from each person interviewed \_\_\_\_\_

49. Are all positive statements regarding identification and particulars surrounding death attached? \_\_\_\_\_

50. Has any information been given concerning isolated burials in the area outside the immediate vicinity?

NO

51. Was investigation preceded by advanced publicity? YES

(If special investigation, give case number) CASE NO 6216

52. Give Brief Narrative

(Use attached sheets, if necessary)

*W. Wittenberg*  
Signature of Interpreter  
WITTENBERG

Rank ASN  
INTERPRETER

Organization  
606 QM GR CO.

*Laurence L Girsch*  
Signature of Investigator  
LAURENCE L GIRSCH

Rank ASN  
SGT. 37748702

Organization  
606 QM GR CO.

NO INFORMATION COULD BE FOUND PERTAINING TO THIS CASE. ALL BODIES WERE COLLECTED FROM AROUND MUNICH AND BURIED IN ONE MASS GRAVE. ALL IDENTIFICATION AND INFORMATION WAS SENT TO FRANKFURT BY GERMAN MILITARY PERSONNEL AND COULD NOT BE LOCATED.

K  
(Basic: Ltr WD COMG, QMGM 293, Bair, Albert M. 17 089 059,  
dated 14 April 1947)

RUE 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 Cemetery  
St Avold, may be associated with Sergeant Albert M. Bair,  
17 089 059.

2. Continued effort will be made to identify one of the  
Unknowns as the subject deceased

FOR THE COMMANDING OFFICER:

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

Incls  
w/A  
Added  
List of Unknowns

293 Unknown X-6515- Lt Colney from col  
105

File  
Bair  
17 089 059  
105

(Class: IIR 31 0-36, IIR 793, Allentown, John, 15 151 700  
dated 26 August 1947)

REF 31.9 (13) 1st Ind

Re: American Graves Registration Command, European Area/PO 38  
U.S. Army 20 January 1948

To: The War Relocation Authority, Washington 25, D. C.

1. One of the numerous skeletons, recovered from British  
and vicinity (list attached), interred in U.S. Military Cemetery  
at Allentown, Pa. was associated with Staff Sergeant John Allentown,  
151 700.

2. Continued effort will be made to identify one of the  
skeletons as the subject concerned.

Very truly yours,  
[Signature]

J. H. [Signature]  
1st Colonel, AGC  
Army Area (AG) Com

W/1  
[Signature]  
1st of [Signature]

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

RR 293.9 (IR)

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 Linnich and vicinity (list attached), interred in US Military Cemetery St Avold, may be associated with Second Lieutenant Kenneth R. Bassler, O2 056 335.

2. Continued effort will be made to identify one of the Unknowns as the subject deceased.

FOR THE COMMANDING GENERAL:

Incls  
w/d  
Added  
1 Incl  
List of Unknowns

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



(Basic: Ltr WD OCMG, QMCMC 293, Brennan, John A. Jr., ASN  
O 736 967, dated 25 June 1947)

RHE 293.9 (IB)

1st Incl

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), injured in US Military Cemetery  
St Avoird, may be associated with First Lieutenant John A. Brennan,  
Jr., O 736 967.

2. Continued effort will be made to identify one of the  
Unknowns as the subject deceased.

FOR THE COMMANDING GENERAL:

Incls  
w/d  
Added  
1 Incl  
List of Unknowns

E. D. KUIWANITY  
Lt Colonel QMC  
Actg Asst Adg Gen

(Basic: Ltr Dpt of the Army, OCMG, OMGIM 293, Brewer, Talmadge,  
SN 34 872 373, dated 30 September 1947)

RRE 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 Unknowns recovered from Munich and vicinity (List attached,) interred in US Military Cemetery St Avoild, may be associated with Sergeant Talmadge Brewer, SN 34 872 373.

2. Continued effort will be made to identify one of the Unknowns as the subject deceased.

FOR THE COMMANDING OFFICER:

Incl  
2/a  
Added 1 Incl  
List of Unknowns

E. D. MULVANY  
Lt Colonel OMC  
Actg Asst Adj Gen

(Basic: Ltr WD COMG, QUICOM 293, Curran, James P., 31 132 702,  
dated 16 June 1947)

RFE 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 Cemetery St Avold, may be associated with Sergeant 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 GENERAL:

Incl  
w/d  
Added 1 Incl  
List of Unknowns

L. D. MULVANEY  
Lt Colonel QUIC  
Actg Asst Adj Gen

(Basic: Ltr WD OQMG QMOM 293, Hayman, George W., O 722 485,  
dated 8 August 1947)

RFE 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 Cemetery  
St Aved, may be associated with Second Lieutenant George W.  
Hayman, O 722 485.

2. Continued effort will be made to identify one of the  
Unknowns as the subject deceased.

FOR THE COMMANDING GENERAL:

Incl  
w/a  
Added 1 Incl  
List of Unknowns

E. D. MULVANY  
Lt Colonel QMG  
Actg Asst Adj Gen

(Basic: Ltr WD OSG-GRIMM 293, Jaeger, George F., SN 971 781,  
dated 8 August 1947)

FHE 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 Hurdish  
and vicinity (list attached), interred in US Military Cemetery  
St Avold, may be associated with Sergeant George F. Jaeger, SN  
32 971 781.

2. Continued effort will be made to identify one of the  
Unknowns as the subject deceased.

FOR THE COMMANDING GENERAL:

Incls  
w/d  
Added  
1 Incl  
List of Unknowns

F. D. MULVANEY  
Lt Colonel QMC  
Actg Asst Adj Gen

(Basic: Ltr WD O-3MG, QMGM 293, Mooney, Thomas J. Jr., ASN 11 108 388, dated 8 August 1947)

RRM 293.9 (1B)

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 Cemetery St Avold, may be associated with Sergeant Thomas J. Mooney, Jr., SN 11 108 388.

2. Continued effort will be made to identify one of the Unknowns as the subject deceased.

FOR THE COMMANDING GENERAL:

Incl  
w/d  
Added 1 Incl  
List of Unknowns

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

*293 unk France X-6515 (St Avold)*

QUART 293  
Unknown X-6515, X-6220  
USMC, (St. Avold) France

23 June 1949

SUBJECT: Unidentifiable Remains

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

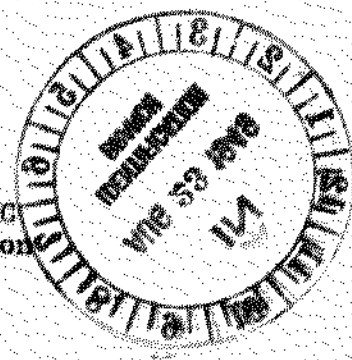
1. Reference is made to Transmittal Letters No. 3377 and 3820, dated 14 January 1949 and 4 May 1949, respectively, forwarding Certificates of Unidentifiability of Remains.

2. Burial Reports and case papers pertaining to the following Unknowns interred in USMC, St. Avold, France have been reviewed, and in the absence of sufficient information upon which to base an identification, this Office concurs in the classifications of these remains as Unidentifiable:

| <u>Unknown</u> | <u>Plot</u> | <u>Row</u> | <u>Grave</u> |
|----------------|-------------|------------|--------------|
| X-6515         | EEEE        | 9          | 107          |
| X-6220         | BBBB        | 8          | 88           |

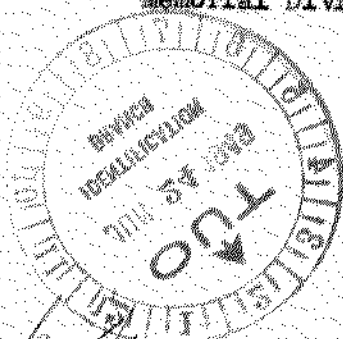
FOR THE QUARTERMASTER GENERAL:

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



REB

MS



Holden:cam  
Clements  
REB

*X-293 unk France X-6220 (St Avold)*

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

14 Jan 1949  
Date

SUBJECT: Unidentifiable Remains

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

*293 unk France X-6515 St. Aved*

1. The records pertaining to Unknown X- 6515, Plot EEEE,  
Row 9, Grave 107, USMC St. Aved, 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. 3157, dated 21/10/48. No  
further information is available.

FOR THE COMMANDING GENERAL:

/s/ George L. Freeman  
/t/ GEORGE L. FREEMAN  
1st Lt QMC  
Actg Asst Adj Gen

25 MAY 1949 OQMG

Received  
Not identifiable from  
information presently  
available

*File NAT  
26 May 49  
Heldew  
Edwert Ave.*



HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

RRE 293

14 JAN 1949  
(Date)

SUBJECT: Unidentifiable Remains.

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

1. The records pertaining to Unknown X - 6515, Plot EEEE  
Row 9, Grave 107, USMC Staveland, 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. 3157, dated 21/10/48.  
No further information is available.

FOR THE COMMANDING GENERAL:

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

25 MAY 1949  
OQMG  
Received  
Not Identifiable from  
information presently  
available

Incl # 19

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 53 US ARMY

RRE 200.2

Date 21 OCT 1948

SUBJECT: Reprocessing of Remains

TO: The Quartermaster General  
2nd & T Sts, S.W.  
Washington 25, D.C.

The remains of X - 6515  
interred in Plot EEEE, Row 9, Grave 107, USMC St. Avold  
France, have been reprocessed and the information  
not previously forwarded to your Headquarters is herewith submitted.

|                    |                           |
|--------------------|---------------------------|
| UNDERSHIRT, Wool   | : White Remnants          |
| UNDERSHIRT, Cotton | : White Remnants          |
| TEETH              | : Not Recovered           |
| HEIGHT             | : Est. U.T.D.             |
| BONES              | : All Major Bones Missing |

No evidence of old or healed fractures or amputations.

FOR THE COMMANDING GENERAL :

*George L. Freelan*  
GEORGE L. FREELAN  
1st Lt            QMC  
Actg Asst Adj Gen

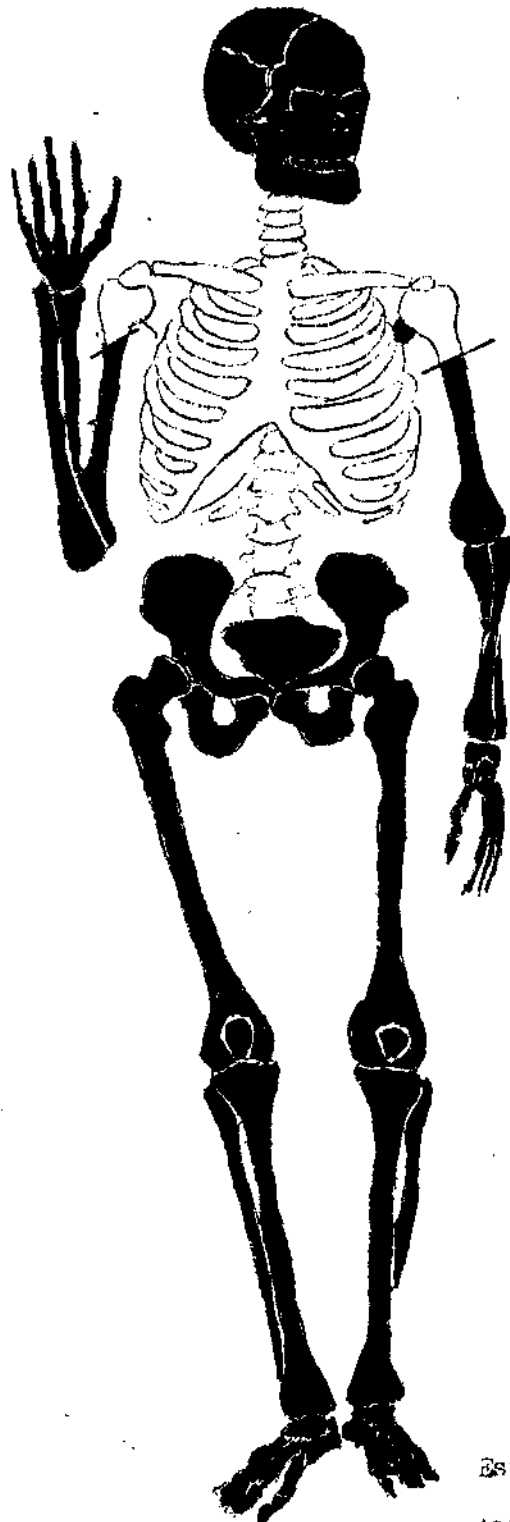
1 Incl.  
Skeletal Chart

SKELETAL CHART

24 August, 1948

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

X-6515  
USMC St. Avold  
EEEE : 9 : 107



Est. HEIGHT: U.T.D.

All Major Bones Missing.

1

USMC, ST. AVOLD, FRANCE Buried at deceased. Left: CLEVELAND WILBERT E  
 Plot F, Row 14, Grave 16 37771525 PVT  
 Date reburied: 22 Jan 49 **DISINTERMENT DIRECTIVE** Right: STRINGHAM WALTER R  
 01302098 2 Lt

SECTION A - DEWEY R. BELL DIRECTIVE NUMBER DATE  
 NAME AND BURIAL LOCATION OF DECEASED 1st Lt. CAV 3574 00000 15 12 47  
 DAY MONTH YEAR

NAME UNKNOWN SERIAL NUMBER X-006515 RANK ARM 1 DATE OF DEATH  
 DAY MONTH YEAR

CEMETERY ST AVOLD - METZ DISPOSITION OF REMAINS  
 CODE DIST. PT. 0 3503 80

PLOT ROW GRAVE COUNTRY CAUSE OF DEATH  
 4E 9 107 FRANCE 6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE NAME AND ADDRESS OF NEXT OF KIN  
 SAINT AVOLD, FRANCE (BY ADMINISTRATIVE ORDER)  
 293 - 1st Lt. France X-6515 (St Avold)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME Unknown SERIAL NUMBER X-006515 RANK DATE OF DEATH 4 August 1948  
 DATE DISINTERRED

IDENTIFICATION TAG ON ORGANIZATION RELIGION IDENTIFICATION VERIFIED BY  
 REMAINS USAAF Charles W. Fredricks  
 MARKER GRS Embalmer NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL MATTRESS COVER CONDITION OF REMAINS All major bones fractured  
 or missing except R and L clavicle  
 Small amount of flesh

OTHER MEANS OF IDENTIFICATION Report of burial with remains

MINOR DISCREPANCIES / None

REMAINS PREPARED AND PLACED IN CASKET  
 DATE 26 August 1948 BY Charles W. Fredricks, Embalmer

CASKET SEALED BY Charles W. Fredricks, Embalmer EMBALMER (Signature) Charles W. Fredricks, Embalmer

CASKET BOXED AND MARKED DATE 26 Aug 48 BY Charles W. Fredricks All markings, tags & plates verified by Bruce E. Blair, 1st Lt QMC

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

Final Casketing By: Bruce E. Blair, 1st Lt QMC Bruce E. Blair, 1st Lt QMC 7857 AGRC Zone

SIGNATURE OF GRS INSPECTOR 3. Hgt

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

FILE

18 MAY 1949

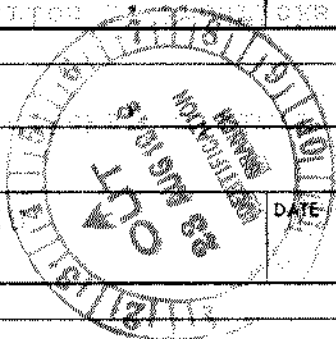
# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

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

## 2. SHIPPED

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



## 3. SHIPPED

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

## 4. SHIPPED

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

## 5. SHIPPED

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

## 6. SHIPPED

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

## 7. SHIPPED

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

51-  
DENC

RP

6515

ADJ  
1300  
1000  
1000

# CHECK LIST OF UNKNOWNNS

(To be completely filled out and attached to each copy of Report of Interment  
WD OMC Form 104)

Case No. 6515  
Location Q-280684 St Avold  
Reg 1000 Box 3 Grave 107

1. Arrived at cemetery 1000 5 July 1946
2. Place of death: *St. Avold, Ireland*
3. Name of person who furnished information: *James J. O'Connell, 1000 St. Avold, Ireland*
4. Date and place of burial: *July 5, 1946, St. Avold, Ireland*

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

Obtaining Markings Sizes Indicate unusual markings Color wear, tear, repairs, etc

| Item                | Material | Color | Obtaining Markings | Sizes | Indicate unusual markings Color wear, tear, repairs, etc |
|---------------------|----------|-------|--------------------|-------|--|
| Headgear            | None     |       |                    |       |  |
| Blouse              | None     |       |                    |       |  |
| Coat                | None     |       |                    |       |  |
| Overcoat            | None     |       |                    |       |  |
| Jacket, Field       | None     |       |                    |       |  |
| Jacket, Combat      | None     |       |                    |       |  |
| Stocking            | None     |       |                    |       |  |
| Sweater             | None     |       |                    |       |  |
| Undershirt, Cotton  | None     |       |                    |       |  |
| Undershirt, Wool OD | None     |       |                    |       |  |
| Undershirt, Wool    | None     |       |                    |       |  |
| Undershirt, Cotton  | None     |       |                    |       |  |
| Undershirt, Cotton  | None     |       |                    |       |  |
| Trousers, Cotton    | None     |       |                    |       |  |
| Trousers, Wool OD   | None     |       |                    |       |  |



X-6315

|               |      |                           |
|---------------|------|---------------------------|
| Ball, Wood    | Type | 1900                      |
| Blowers, Wood | Type | 1900                      |
| Brass, Gun    | Type | 1900                      |
| Leggins, Wood | Type | 1900 (Note unusual being) |
| Knives, Metal | Type | 1900                      |
| Shells, Metal | Type | 1900                      |
| Ordnance      | Type | 1900                      |
| Wire, Iron    | Type | 1900                      |
| Discs, Metal  | Type | 1900                      |
| Other Iron    | Type | 1900                      |

Each of the above items should be supplied by one or more of the remaining

|                |      |
|----------------|------|
| 1. Cannonballs | 1850 |
| 2. Cannonballs | 1850 |
| 3. Cannonballs | 1850 |
| 4. Cannonballs | 1850 |

Each of these items should be supplied by one or more of the following

| Item           | Weight | Description of Item |
|----------------|--------|---------------------|
| 1. Cannonballs | 1850   |                     |
| 2. Cannonballs | 1850   |                     |
| 3. Cannonballs | 1850   |                     |
| 4. Cannonballs | 1850   |                     |
| 5. Cannonballs | 1850   |                     |

|                 |      |
|-----------------|------|
| 1. Cannonballs  | 1850 |
| 2. Cannonballs  | 1850 |
| 3. Cannonballs  | 1850 |
| 4. Cannonballs  | 1850 |
| 5. Cannonballs  | 1850 |
| 6. Cannonballs  | 1850 |
| 7. Cannonballs  | 1850 |
| 8. Cannonballs  | 1850 |
| 9. Cannonballs  | 1850 |
| 10. Cannonballs | 1850 |







7-6575

First Name: \_\_\_\_\_ Date: \_\_\_\_\_

Distance of travel: \_\_\_\_\_

8. Have any parts of body been exposed to sun?



10. Have fingerprints been placed on breast or abdomen?

If not, explain: \_\_\_\_\_

11. Has tooth chart been prepared? \_\_\_\_\_ If not, explain: \_\_\_\_\_

12. Remarks: \_\_\_\_\_

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

*John J. [Signature]*  
FBI - [City]

*[Signature]*  
[Title]

Approved: \_\_\_\_\_  
Special Agent in Charge

7-57

**RESTRICTED**

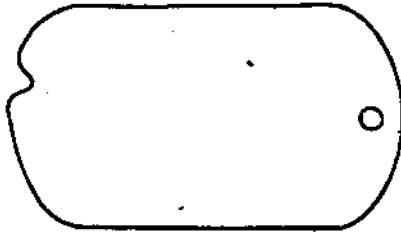
WD QMC FORM 1042  
(Rev. 1 Apr. 1945)  
(Supersedes GRS Form 1)

**REPORT OF INTERMENT**  
(AR 30-1810 and AR 30-1815)

DATE OF REPORT

5 July 1946

Imprint Identification Tag If Possible.  
DO NOT TYPE



**Section 1.—IDENTIFICATION.**

NAME (Last, first, middle initial)

Unknown **X-6515**

SERIAL NO.

Unknown

GRADE

Unknown

ORGANIZATION

Unknown

BRANCH OF SERVICE

A.A.F.

RACE

Unknown

RELIGION

Unknown

IF OTHER THAN U. S. DEAD, GIVE  
NAME OF COUNTRY

PLACE OF DEATH

Hochmutting, Germany.

CAUSE OF DEATH

Plane Crash

DATE OF DEATH

Est.  
July 1944

EMERGENCY ADDRESSEE (Name, relationship, and address)

Unknown

IDENTIFICATION TAGS FOUND ON BODY  
(1, 2, or none)

None

IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)

None

WERE SUBSTITUTE TAGS PROVIDED?(Yes or no)

Yes

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

None

**Section 2.—BURIAL.** If other than in established cemetery, furnish sketch and map coordinates on reverse.

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

U.S.Military Cemetery St. Avoird, France. ( Q - 260.584 )

DATE OF BURIAL

5 July 1946

HOUR

1030

BURIED IN (Shroud, blanket, or name of other)

Casket

TYPE OF GRAVE  
MARKER

Temp.wood.  
CROSS

PLOT No.

107

ROW No.

9

GRAVE No.

107

WAS THIS A REBURIAL?  
(Yes or no)

Yes

IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE

Civ.cem.Hochmutting,Muenchen, Germany.  
Map:1:250.000 Sht: M-49 Coord:WY-8159

PLOT No.

Isolated grave.

ROW No.

GRAVE No.

TYPE OF RELIGIOUS  
CEREMONY

General service

PERSON CONDUCTING BURIAL RITES

Ch. J.B.JOHNSON, 1st Lt

IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY

One copy WD QMC Form 1042  
Report of Interment placed in  
burial bottle and buried with  
remains.

IDENTIFICATION TAG BURIED WITH  
BODY (Yes or no)

No

IDENTIFICATION TAG ATTACHED TO  
MARKER (Yes or no)

Yes-Embossed  
plate

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)

UNKNOWN X-6513

RANK

UNK

SERIAL NO.

UNK

ORGANIZATION

AAF

GRAVE No.

106

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)

UNKNOWN X-6517

RANK

UNK

SERIAL No.

UNK

ORGANIZATION

AAF

GRAVE No.

105

SIGNATURE OF PERSON PREPARING REPORT

Max. M. Schiff *Max M. Schiff*  
HQ Third Field Command AGRC


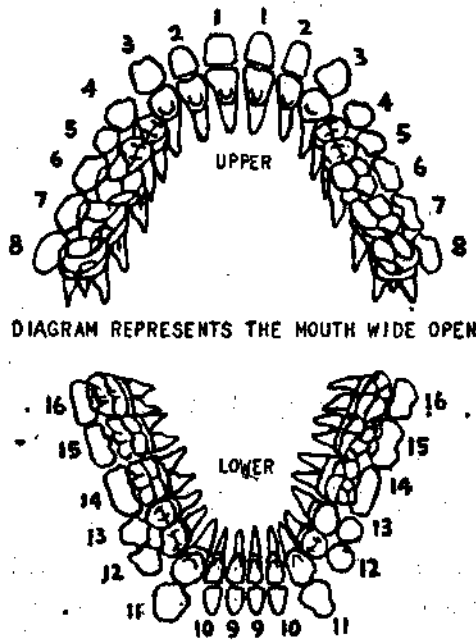




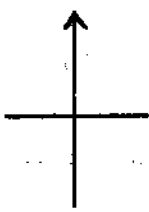
SIGNATURE OF GRS OFFICER VERIFYING REPORT

*Ralph W. Sлятор*  
RALPH W. Sлятор Major, Inf.

DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original for U.S. and allied dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.

**RESTRICTED**

**RESTRICTED**

|                        |  |                      |  |  |
|------------------------|--|----------------------|--|--|
| LEFT<br>LITTLE FINGER  | <b>Section UNIDENTIFIED REMAINS.</b>   |                      |  |  |
|                        | <b>INSTRUCTIONS:</b><br>(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.<br>(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured. |                      |  |  |
| LEFT<br>RING FINGER    | HEIGHT<br><b>UTD</b>   | WEIGHT<br><b>UTD</b> | COLOR OF EYES<br><b>UTD</b>  | COLOR OF HAIR<br><b>UTD</b>                                    |
|                        |  |                      |  | BIRTHMARKS, SCARS, OR TATTOOS<br><b>UTD</b>                    |
| LEFT<br>MIDDLE FINGER  | WEAPON AND SERIAL NO.<br><b>None</b>   |                      | LAUNDRY MARKS<br><b>None</b>   | WHERE BODY WAS BURIED OR FOUND<br><b>Hochmutting, Germany.</b> |
|                        | OTHER IDENTIFICATION CLUES<br><br><b>None</b>  |                      |  |  |
| LEFT<br>INDEX FINGER   | FILLINGS<br> SILVER FILLING<br>GOLD FILLING   |                      |  DIAGRAM REPRESENTS THE MOUTH WIDE OPEN |  |
| LEFT<br>THUMB          | CAVITIES<br> CAVITY<br>DECAYED  |                      |  |  |
| RIGHT<br>THUMB         | MISSING TEETH<br> TOOTH MISSING   |                      |  |  |
| RIGHT<br>INDEX FINGER  | CROWNED TEETH<br> PORCELAIN CROWN<br>GOLD CROWN   |                      |  |  |
| RIGHT<br>MIDDLE FINGER | BRIDGE WORK<br> GOLD BRIDGE   |                      |  |  |
| RIGHT<br>RING FINGER   |  |                      |  |  |
| RIGHT<br>LITTLE FINGER | FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY   |                      |  |  |
|                        | MEMORIAL DIVISION<br>AUG 26 3 15 PM '46<br>REGISTRATION AND RECORDS BRANCH   |                      |  |  |
|                        |   |                      |  |  |
|                        | REMARKS:<br><b>Attached: Form 11 Check List of Unknowns. Impossible to obtain Finger prints and tooth chart because of missing portions. Est. weight of remains recovered: 40 Lbs.</b>   |                      |  |  |

**RESTRICTED**