

7887 GRAVES DETACHMENT

APO 757

9/3 unk St. Avold X-7290 *mm*

Attached hereto are case papers for an approved unidentifiable case which are considered to be of investigative importance. Records of this headquarters indicate these case papers were not previously forwarded to OQMG for:

UNKNOWN X-7290 St Avold

(POC) ST AVOLD

*File
E. Flora
Q. d. B. B.
26 Feb 51*

AGRC
FORM No. 11
Revised 5 January 1946

CHECK LIST OF UNKNOWNNS

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

37 Auld

Unknown X - 7290
Cemetery
Plot _____ Row _____ Grave _____

1. Arrived at cemetery _____
(hour) (date)
2. Place of death STOD (Czechoslovakia) WP - 9229 - N 50
(name of closest town) (coordinates and letter Prefex, maps)

(Sheet, scale and serials used)

3. Remains recovered or disinterred by 611st. Qm.Gr.
(name and organization)
4. Evacuated to Cemetery by Central Identification Point
(name and organization)

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

Clothing Markings Sizes Indicate unusual markings
Color wear, tear, repairs, etc.

Item _____
*Headgear None
(type)

Raincoat None

Overcoat None

Jacket, Field None

Jacket, Combat None

Mackinaw None

Sweater None

Jacket, HBT None

*Shirt, ~~Wool OD~~ Sport shirt, blue, non military, does ^{not} appear to be american

Undershirt, Wool None

Undershirt, Cotton None

Trousers HBT None

*Trousers, ~~Wool OD~~ black, civilian type, does not appear to be american

Belt, Web None

Drawers, Wool None

Drawers, Cotton None

Leggins, Wool None (Note unusual lacing)

Socks, Cotton None

*Shoes None (type)

Overshoes None

Web Equipment None (Type)

(Other item) None

(Other item) None

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

6. Chevrons or
Insignia None
(type & location : shirt, jacket, coat, helmet)

Shoulder Patch None

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

8. Description of Remains :
Age Utd Height 5'7" Weight 135^{est} lbs Description of wounds Utd

Bandages or dressings None Scars Utd
(length, width, location)

Tattoos Utd
(Numb. r. location - illustrate on sep. page)

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

Sunburn or tan, other than hands & face Utd

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

Build Utd
(large, fat, thin, muscular)

Hair Utd
(color, length, quantity, curly, wavy, straight, whorls, or definite parting).

Hair Utd
(baldness, widows peak, distinctive cutting or other characteristics).

Sideburns Utd Mustache Utd Beard or Utd
(color, setting, shape) (color, size, shape) (length, heavy)

Goatee Utd
(light, color, extent)

Eyes Utd Eyebrows Utd
(color, setting, shape) (color, bushiness, extent across nose)

Nose Utd Ears Utd
(size, shape, straight) (size, set close to or far from head)

Mouth Utd Lips Utd
(large, medium, small) (small large, full)

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

Chin Utd
(prominent, receding, pointed, dimple, double)

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

Neck Utd Larynx Utd
(size, length, short, normal, wrinkled) (prominent, normal)

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

Utd
(extent and quantity of hair)

Hands Utd

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

Utd
(Unusual characteristics of fingernails)

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

Back Utd Aisl Utd
(quantity & extent of hair) (size of navel, appendectomy, amount)

Utd Circumcision Utd Pubic hair Utd
(quantity & color of hair) (yes-no) (color)

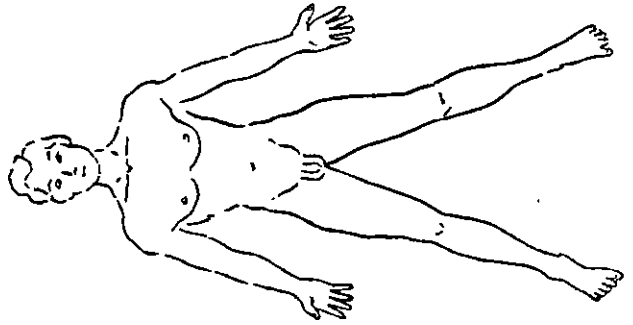
Hernioplasty Utd
(yes-no; location)

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

Feet Utd Toes Utd
(size, corns, callouses, flat) (slender, straight, crooked, overlap)

Evidence of healed factures Utd
(nose, arms, legs, etc.)

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



10. Have fingerprints been placed on Report of Interment No
(yes-no)

If not, explain too decomposed

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

12. Remarks : The two pieces of clothing on this body are not regulation and do not appear to be american. Small size of bones indicates a ver small person. Est. weight of remains 20 lbs.

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.

John S. Martin
John S. MARTIN
Officer's Name

W D Civilian
Rank Service

Labor Supervisor
Organization

REPORT OF INVESTIGATION

AREA SEARCH *ATTENTION REGISTRATION DIVISION AGRC FOREIGN IN CASUALTY CLEARANCE*

AGRC Form 10 (Revised)

10 August 1946
Date

1 January 1946

NAME Unknown - X 7290 RANK Unknown ASN Unknown
ORGANIZATION Unknown
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 _____ RANK _____ ASN _____
b. ORGANIZATION _____

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

a. NAME _____ RANK _____ ASN _____
b. ORGANIZATION _____

3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY 8 Unknown Soldiers

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

a. Date of above burials 15 April 1945 Common Graves? Yes

5. Name and Type of Cemetery Not buried in a cemetery
(Military or Civilian)

6. Map Coordinates of the Cemetery _____
a. Town _____ Country _____

7. Give exact location in cemetery of the remains.
a. Section _____ Row _____ Grave _____
b. Is sketch attached? _____

8. If remains are not located in a cemetery, give exact location.
a. Town Stod, Czechoslovakia Coordinates WP 9229, N50
b. Is Sketch attached? Yes
c. Is area mined? No

9. How is the grave marked? Monument
10. If grave is marked with cross, give exact markings thereon Not marked with a cross

a. From what source was this information obtained? _____
(Identification tags, personal effects)

1. By whom _____

11. Where are the cemetery records? No cemetery records
(Town Hall, cemetery, burgermeister's office)

- a. What information was contained thereon?
- b. Where was the information obtained?
- c. By whom?
12. What is the date of death? 15 April 1945
- a. Give basis Civilians
13. What is the cause of death? They were beaten to death
- b. Give basis Information from civilians
14. What is the date of burial? 15 April 1945
- a. Give basis Civilians
15. What was the place of death? Stod, Czechoslovakia Coords WP 9229, N-50
- b. Give basis Civilians
16. Where were the remains found? Stod, Czechoslovakia Coords WP 9229, N-50
- a. By whom? A German civilian
- 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 Germans (Civilian, American Mil. or German Mil.)
- a. What are the names and addresses? Unknown

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?
- a. Give location in plane from which the bodies were removed
- (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
- 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? On ground?
23. Did plane burn in the air? On ground?
24. What was the direction of the flight?
25. What was the civilian opinion regarding destination of plane?

- 26. Had bombs been released prior to the crash?
- 27. Does specific time and date of crash correspond with date of death of above named deceased?
- 28. Number of planes in formation prior to crash
- 29. State precise time and date of plane crash
(Night?) (Day?)
- 30. Were parachutists seen? How many? Escaped?
Prisoners?

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) Beaten to death
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? Yes
- 40. State the specific clues and evidence that were obtained in securing the name and facts regarding the above listed deceased There were 9 American P.O.W.'S beaten to death by Germans on death march near Stod, Czechoslovakia

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 None found at time of death
- a. Were identification tags found at the time of death? No
Where? By whom?
- Present disposition

If deceased is not identified, personal effects will not be forwarded to PE Depot, but will remain with this form until final identification is made, or investigation is abandoned.

- b. Were personal effects found at the time of death? No
 Where? _____ By whom? _____
 Present disposition _____
- c. Was deceased identified by living members of the crew at the time of death? No
- d. Did Cemetery Register or cross indicate the immunization shot? No
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? Yes
45. Is it possible on surface investigation to obtain from civilian sources the condition of the remains? Yes
They were badly beaten
 (Burnt? Decapitated? etc)
46. Do facts surrounding death show any evidence that it might be an atrocity case? Yes
 a. If so, give basis for positive assumption Dr. Vilem Repka, Gígal Vaclav of Stod, Czechoslovakia
 b. If so, has higher headquarters been notified? Yes
47. Was case previously investigated? No By whom? _____
 When? _____
48. Give full names, addresses, and information obtained from each person interviewed Dr. Vilem Repka, of Stod, Czechoslovakia, Stated that they were beaten to death by the Germans on a death march near Stod, Czechoslovakia, Gígal Vadav, Stod, Czechoslovakia.
49. Are all positive statements regarding identification and particulars surrounding death attached? Yes
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) _____
52. Give Brief Narrative There were 9 American Paratroopers beaten death by the Germans on a death march near Stod, Czechoslovakia.
 (Use attached, sheets if necessary)

Vrba
 Signature of Interpreter
 Vrba, W. O.

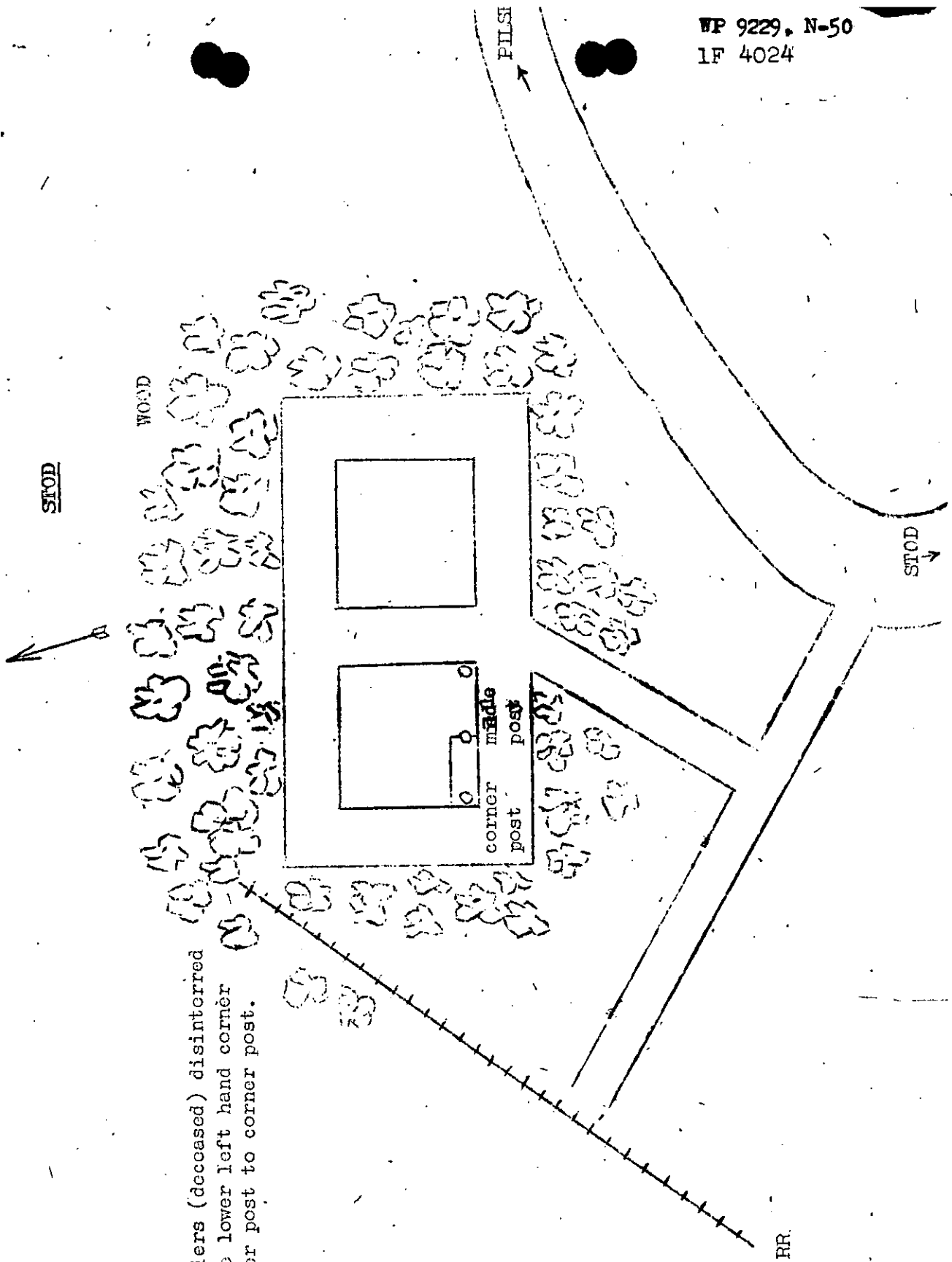
Rank ASN

Czechoslovakia Army
 Organization

Calvin H. Atwood
 Signature of Investigator
 Calvin H. Atwood

T/5 44131458
 Rank ASN

611th QM Gr. Reg. Co.
 Organization



Nine soldiers (deceased) disinterred
from grave lower left hand corner
from center post to corner post.

Translated from the original manuscript.

State Police station
STOD, county of STRIBRO

2 July 1946

On the 6th and 7th of September 1945 a mass exhumation of 201 bodies took place in the Jewish cemetery of STOD. It was found out that among these victims of the "Death March", there were nine (9) U.S. soldiers from parachute regiments, who should have been caught in the district of STOD in April 1945, killed and buried in the common grave on the 15th of April 1945.

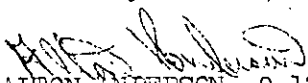
No identification was possible, no details about the circumstances of their death.

The American soldiers were buried on the 9th September 1945 into a common grave with the consent officer commanding the U.S. military unit at STOD, Captain Moor.

This grave is located in a small wooden area outside the town of STOD, on the left hand side of the road to PILSEN. The coffins with the remains of the U.S. soldiers are placed separately from the other bodies, on the left hand side of the common grave, on the northern side.

Translated by:
Ervin Lehenhart

I certify that this is a true copy.


ALTON ANDERSON O-1339028
2nd Lt., Inf.
611 QM Gr. Reg. Co.

Translated from the original manuscript.

State Police station
STOD, county of STRIBRO

2 July 1946

On the 6th and 7th of September 1945 a mass exhumation of 241 bodies took place in the Jewish cemetery of STOD. It was found out that among these victims of the "Death March", there were nine (9) U.S. Soldiers from parachute regiments, who should have been caught in the District of STOD in April 1945, killed and buried in the common grave on the 15th of April 1945.

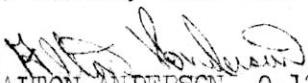
No identification was possible, no details about the circumstances of their death.

The American soldiers were buried on the 9th September 1945 into a common grave with the consent officer commanding the U.S. military unit at STOD, Captain Moor.

This grave is located in a small wooden area outside the town of STOD, on the left hand side of the road to FILSEN. The coffins with the remains of the U.S. soldiers are placed separately from the other bodies, on the left hand side of the common grave, on the northern side.

Translated by:
Ervin Lehenhart

I certify that this is a true copy.


ALTON ANDERSON 0-1339028
2nd Lt., Inf.
611 QM Gr. Reg. Co.

Translated from the original manuscript.

No. 504/10000

DEATH REPORT

According to the rules a death-corps of unknown American B.V.

who died on a German death march

on April 1945

at the age of years

in Germany

has to be transported by sea

from Germany via Denmark to Denmark

to be buried.

As the permission to the commenced transportation of the death-

corps was given on 15. VIII. 1946

in the company of American Military Mission

All the concerned authorities through whose counties the death-corps will be transported are hereby requested not to make any difficulties and delays to the transport.

Germany on 15. VIII. 1946.

Translated from the original manuscript.

No. 001/10000

D E A T H R E P O R T

According the rules a death-corps an unknown American P.W.

who died on a German death march

on April 1945

at the age of _____ years

in Germany

has to be transported by air

from Germany via Belgium to Belgium

to be buried.

As the permission to the commenced transportation of the death-

corps was given on 12. VIII. 1946

in the company of American Military Mission

All the concerned authorities through whose counties the death-corps will be transported are hereby requested not to make any difficulties and delays to the transport.

Germany on 12. VIII. 1946.

Translated from the original manuscript.

National Council in Stribro, - health dept/

No 924 / zdrav.

12. VIII 1946.

Matter: ^{Exhumation} ~~transportation~~ of death-corps, permission.

To the American Military Mission

Czechoslovakia

On your request we give you the permission that the death-corps an Unknown American P.W.
_____ years old who died on April 1946 in Stribro
 on German death march
 And transported to _____

The following prescriptions are to be regarded:

The death corps will be given to a simple wooden coffin inwardly and outwardly well sealed.

The cover will be closed and sealed hermetically.

To this procedure will be present doctor of this place _____

_____ who will give out a death-passport.

The transportation will take place on 12.VIII.1946 at _____

by car from _____ via _____ to _____

The vehicle on which the death-corps will be carried should be decent, well sealed or at least well covered and no other things but flowers can be enclosed to the coffin. The transportation will be accompanied by a special guide who will be responsible that the transportation will nowhere stop unnecessarily that it will take the prescribed road and that the coffin will be nowhere opened.

As soon as the transport will arrive to its destination the following office _____

should be notified.

AIRMAIL

QMGMT 293

1st Ind.

GRS European

SUBJECT: Certificates of Unidentifiability of Remains
Transmittal Letter #4333

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

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

1. Reference is made to basic communication.
2. Subject cases have been accepted by this Office and approved as Unidentifiable.

FOR THE QUARTERMASTER GENERAL:

Incls w/d

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

Rice/ld
Foy
REB

3146 Lewis ...
12/1/49

X 293 Luke Francis - X-7298

REB
TEU

AIRMAIL

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

RRE 293

14 September 1949
(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS.

1. The records pertaining to Unknown X - 7290, Plot KKKK,
Row 2, Grave 50, USMC ST. AVOLD, France,
have been reviewed and it is the opinion of this Office that sufficient
evidence is not available at the present time to establish the identity
of the deceased concerned. The remains concerned should be classified as
unidentifiable at the present time.

2. Report of Reprocessing of remains was forwarded to your
Office by Transmittal Letter No. 2039, dated 28-9-46.

3. Remarks:

T.P. 4333, 15 Sept 49
Case file
identifiable from 14 Dec 49
information presently available
OQMG

Case reviewed by undersigned Members of the Board of Review:

Col. H.P. HENRY, O-12589

QMC

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

QMC

Major R. BERGER, O-251736

ORD

Capt. Jack C. HAYES, O-1577297

QMC

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

QMC

1/Lt. Gaylord E. LUTZ, O-1595665

QMC

Incl #2

This Grave formerly occupied by: UNKNOWN 06448-A
USMC ST AVOLD, FRANCE
Plot F, Row 9, Grave 28
Date reburied: 11 Oct 49 Date disinterred: 11 Oct 49

DISINTERMENT DIRECTIVE

SECTION A - NAME AND BURIAL LOCATION OF DECEASED: CAPT QMC
DIRECTIVE NUMBER: 3574 00000
DATE: 15 01 48
DAY MONTH YEAR

NAME: UNKNOWN X-007290
SERIAL NUMBER: X-007290
RANK: [blank]
ARM: 1
CEMETERY: ST AVOLD - METZ
DISPOSITION OF REMAINS: 0 3503 80
CODE DIST. PT.
CAUSE OF DEATH: 6
LOT: 4K ROW: 2 GRAVE: 50 COUNTRY: FRANCE

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE: ST. AVOLD, FRANCE
(BY ADMINISTRATIVE ORDER)
NAME AND ADDRESS OF NEXT OF KIN: [blank]

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME: UNKNOWN X-007290
SERIAL NUMBER: X-007290
RANK: Unk
DATE OF DEATH: 15 Apr 45
DATE DISINTERRED: 22 Apr 48
IDENTIFICATION TAG ON: MARKER GRS
ORGANIZATION: UNKNOWN
RELIGION: Unk
IDENTIFICATION VERIFIED BY: Oliver E Modin Embalmer
NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: Mattress cover
CONDITION OF REMAINS: Body: complete but disarticulated, with small amount of decomposed flesh.

OTHER MEANS OF IDENTIFICATION: Report of burial dated 3 Sept 46 with remains reads: "Unk X-7290"

MINOR DISCREPANCIES: None

REMAINS PREPARED AND PLACED IN CASKET: DATE 29 Apr 48 BY Oliver E Modin Embalmer

CASKET SEALED BY: Oliver E Modin Embalmer
EMBALMER (Signature): Oliver E Modin

CASKET BOXED AND MARKED: DATE 29 Apr 48 BY Oliver E Modin Embalmer
All markings, tags and 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.

Signature of GRS Inspector: Bruce E Blair 1st Lt QMC
337 QM Bn
SIGNATURE OF GRS INSPECTOR

FILE
REPATRIATION BRANCH MEMO

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

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

MEMORIAL DIVISION
 NOV 2 3 33 PM '49
 FEDERAL BUREAU OF INVESTIGATION
 RECORDS BRANCH

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 (BY MAIL/REGISTERED MAIL ORDER)		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

X-7290

G. R. & E. DIV.
OFFICE OF THE CHIEF QUARTERMASTER
H.Q. COM. ZONE, ET OUSA

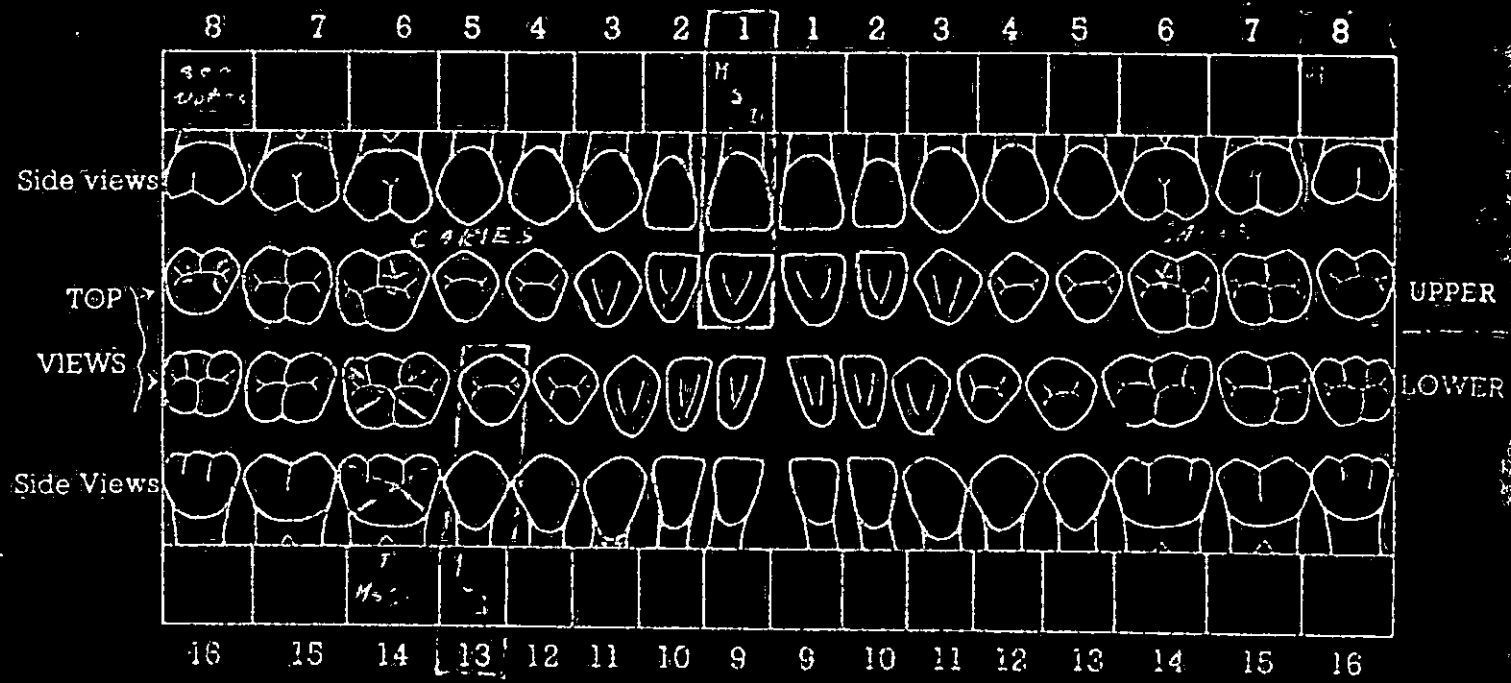
TOOTH CHART

1F - 4024

Unknown X - 7290
 Last Name: Unknown First: Initial: Rank: Unknown
 Date: Unknown
 Serial No.: Unknown
 Unit: STOD, Czechoslovakia Date of Death: 15 April 1945 Organization: Unknown
 Place of Death: Cause of Death: Beaten to death

Right

Left

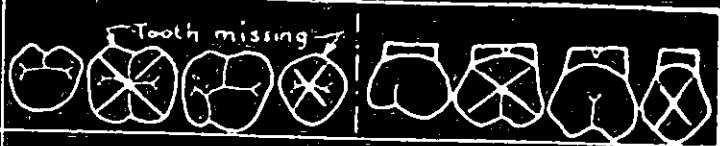


This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth),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

Ralph H. SLOAN, Major, Inf. S.I.
 Verified by G. R. & E. Office

X-7290

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



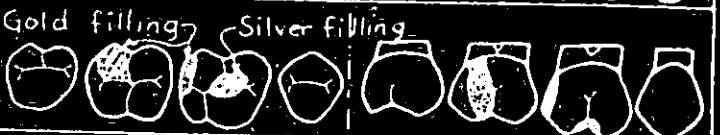
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus:



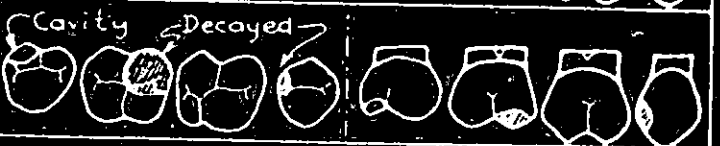
BRIDGE WORK... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:



FILLINGS... Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus:



CARIES (CAVITIES)... Outline location and size of cavity, shade in thus:



DENTURES (PLATES)... Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

ADDITIONAL SPACE FOR FURTHER REMARKS

Tooth L 8 missing AD - appears to have been unerupted and lost when section of maxilla broke away

Tooth L 6 small cavity occlusal

Tooth R 6 small cavity occlusal

Tooth R 8 cavity occlusal, large cavity ⁱⁿ from mesial face down from occlusal surface

Tooth R 14 missing BE - extracted, fossa closed

Tooth R 13 missing AD.

Tooth L 1 missing before death, extracted, fossa closed

NO FILLINGS: tooth size slightly smaller than average
teeth round and regularly aligned
spacing of average closeness

Posterior teeth stained brown in bands along gum line.
Incisal surfaces on anterior teeth well worn down.

AGRC
FORM No. 11
Revised 5 January 1946

CHECK LIST OF UNKNOWNNS

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

Unknown X7290
Cemetery _____
Plot _____ Row _____ Grave _____

1. Arrived at cemetery _____
(hour) (date)
2. Place of death STOD (Czechoslovakia) WP - 9229 - N 50
(name of closest town) (coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3. Remains recovered or disinterred by 11st. Cm.Gr.
(name and organization)
4. Evacuated to Cemetery by Central Identification Point
(name and organization)

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

Clothing Markings Sizes Indicate unusual markings
Color wear, tear, repairs, etc.

Item _____
*Headgear None
(type)

Raincoat None

Overcoat None

Jacket, Field None

Jacket, Combat None

Mackinaw None

Sweater None

Jacket, HBT None

*Shirt, ~~Wool OD~~ Sport shirt, blue, non military, does not appear to be american

Undershirt, Wool None

Undershirt, Cotton None

Trousers HBT None

*Trousers, ~~Wool OD~~ black, civilian type, does not appear to be american

Belt, Web None

Drawers, Wool None

Drawers, Cotton None

Leggins, Wool None (Note unusual lacing)

Socks, Cotton None

*Shoes None (type)

Overshoes None

Web Equipment None (Type)

(Other item) None

(Other item) None

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

6. Chevrons or Insignia None
(type & location : shirt, jacket, coat, helmet)

Shoulder Patch None

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

Utd

8. Description of Remains :

Age Utd Height 5'7" Weight 135 lbs Description of wounds Utd

Bandages or dressings None Scars Utd
(length, width, location)

Tattoos Utd
(Number, location - illustrate on sep. page)

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

Sunburn or tan, other than hands & face Utd

Complexion Utd
(light, med. dark, clear, pimples, pocks, freckles)

Build Utd
(large, fat, thin, muscular)

Hair Utd
(color, length, quantity, curly, wavy, straight, whorls, or definite parting).

Hair **Utd**
 (baldness, widows peak, distinctive cutting or other characteristics).

Sideburns **Utd** Mustache **Utd** Beard or **Utd**
 (color, setting, shape) (color, size, shape) (length, heavy)

Goatee **Utd**
 (light, color, extent)

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

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

Mouth **Utd** Lips **Utd**
 (large, medium, small) (small large, full)

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

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

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

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

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

Utd
 (extent and quantity of hair)

Hands **Utd**

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

Utd
 (Unusual characteristics of fingernails)

Chest **Utd**
 (size of nipples, color, quantity & extent of hair, largo, small normal)

Back **Utd** Navel **Utd**
 (quantity & extent of hair) (size of navel, appendectomy, amount)

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

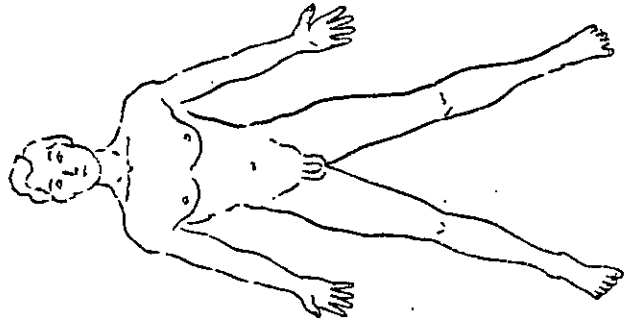
Hernioplasty **Utd**
 (yes-no ; location)

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

Feet Utd Toes Utd
(size, corns, callouses, flat) (slender, straight, crooked, overlap)

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

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



10. Have fingerprints been placed on Report of Interment No
(yes-no)

If not, explain too decomposed

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

12. Remarks : The two pieces of clothing on this body are not regulation and do not appear to be american. Small size of bones indicates a very small person. Est. weight of remains 20 lbs.

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.

John S. Martin
John S. MARTIN
Officer's Name

W D Civilian
Rank Service

Labor. Supervisor
Organization

RESTRICTED

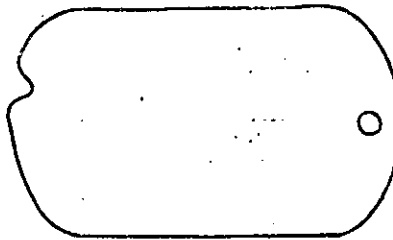
1F - 4024 #1

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
3 September 1946

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) Unknown X - 7290		SERIAL No. Unknown
GRADE Unknown	ORGANIZATION Unknown	BRANCH OF SERVICE Unknown
RACE Unknown	RELIGION Unknown	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH STOD (Czechoslovakia) WP 9229 N 50	CAUSE OF DEATH Beaten to death	DATE OF DEATH 15 April 1945
---	--	---------------------------------------

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 3 September 1946	HOUR 1600	BURIED IN (Shroud, blanket, or name of other) Casket	TYPE OF GRAVE MARKER temp wdn.cross	PLOT No. KKKK	ROW No. 2	GRAVE No. 50
---	---------------------	--	---	-------------------------	---------------------	------------------------

WAS THIS A REBURIAL? (Yes or no) yes	IF A REBURIAL INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE STOD Czechoslovakia WP 0 9229 - N 50	PLOT No. NA	ROW No. NA	GRAVE No. NA
--	---	-----------------------	----------------------	------------------------

TYPE OF RELIGIOUS CEREMONY General Service	PERSON CONDUCTING BURIAL RITES CH. H.A.LEE, 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-7283	RANK Seaman	SERIAL No. Unknown	ORGANIZATION US Merch. Marine	GRAVE No. 49
---	-----------------------	------------------------------	---	------------------------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) END OF ROW	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
--	------	------------	--------------	-----------

SIGNATURE OF PERSON PREPARING REPORT Ralph W. SLEATOR Major, Inf.C.I.P.	SIGNATURE OF GRS OFFICER VERIFYING REPORT Samuel E. PROCTOR Jr. 2nd.Lt. Inf.C.I.P.
---	--

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

RESTRICTED

39 2-50

RESTRICTED

Section **UNIDENTIFIED REMAINS.**

INSTRUCTIONS:

(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks.

(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the 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.

HEIGHT	WEIGHT est.	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
5'7"	135 lbs	Utd	Utd	Utd
WEAPON AND SERIAL No.		LAUNDRY MARKS		WHERE BODY WAS BURIED OR FOUND
None		None		STOD (Czechoslovakia)

OTHER IDENTIFICATION CLUES

None

FILLINGS	<p>SILVER FILLING GOLD FILLING</p>	<p>UPPER</p> <p>LOWER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
CAVITIES	<p>CAVITY DECAYED</p>	
MISSING TEETH	<p>TOOTH MISSING</p>	
CROWNED TEETH	<p>PORCELAIN CROWN GOLD CROWN</p>	
BRIDGE WORK	<p>GOLD BRIDGE</p>	

FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY



MEMORIAL DIVISION

REMARKS: FORM 1 A Tooth Chart and FORM 11 Check List of Unknowns have been prepared. No fingerprints, fingers too decomposed. Est. weight of remains: 20 lbs.