7887 GRAVES DETACHMENT

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 OQMC for:

(FOC) ST AVOLD

HNKNOWN X-7291, ST AVOLD

root or atom

Aire Effore 21 Ferris AGRC FORM No. 11 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 N	-7291
		Cemetery	St.Avold, France.(Q-26 Row Grave
		Plot	Row Grave
1. Arrived at cemeter			
	(hour) (date)		
		4 19	ates and letter Prefex, maps)
Map: 1: 250.0	00 Sheet: N-50 Coc	ord: WP-9229	
3. Remains recovered	l or disinterred by 6		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
4. Evacuated to Ceme	etery by 8011 02 02 2 2 0	(name and organizat	n t
			obtain size from body mea-
surements).	rining and odorphion i	(11 (1011105 40 1101 111)	
		Clothing	Indicate unusual markings
		Markings Sizes	Color wear, tear, repairs, etc.
ftem	and the second of the second o		· man · · · · · · · · · · · · · · · · · · ·
•Headgear	None		
(type			,
Managara (asimirana asisa) milina di salamana sasanica	ogen, oposing nagrapis supprise specimentary, and states through near	ne research returns equipment to the contract of the contract	
Raincoat	None		THE REPORT OF A SECOND COMMON STATE OF STREET
			•
			es es es estate transcer estates transcer estates estates estates estates estates estates estates estates esta
			S C Ma Tole Historica Control of San Haramanian Laboratoric Folk with
Jacket, Combat	None		
Madrinan	None		- materillan — i menghiri menghirinan seminangganang menanang ma
			,4
Sweater		- Alternation - And Arrival Mill Printers from New York - And It	e i i i i i i i i i i i i i i i i i i i
Jacket, HBT	None	manested from the willest condition to whether when the state of the s	
*Shirt.5Wool:ODx	Sport type, tan wi	th red collar a	nd cuffs, civilian.
			,
Undershirt, Wool			ge effici. 15. Terms transformation and an annual a
Undershirt, Cotton	None -	·	, t
Trousers HBT	None		gallani manimana na manana manimana na kao kao a kao kao a kao kao a kao kao
	None		
Trousers, wool OD	21 041 0	**************************************	



	Belt, Web	+ - >			and the second second second second	
	Drawers, Wool					
	Drawers, Cotton None	e		t ter de table		
	Leggins, Wool.	None	(Note	unusual lacir	g)	,
	Socks, CottonNone				o y ) da daddalaer fry	
	*Shoes (type)None					- man refe
	Overshoes None	with another appropriate true	pe a contractive	a para pas ma a citatina	. mandillar it i provincia par e se	
	Web Equipment(Type)	ne		g m gwys g galai	_ ···-	
	(0.)	None				
	(Other item)	~ ··•				
	(Other item)					
	*If body is nude, sizes of these items should be	computed	by measurir	ng the remains	5.	
<b>5</b> .	. Chevrons or					
	Insignia None	C Innatura : chief	, jacket, coat, he	almet)		
	Shoulder Patch None					annada/larve : 111
7.	. Does clothing indicate that deceased was a n	nember of	the Air, Gr	ound or Nava	l Forces	
	UTD					
3.	Description of Remains :		•			
	Age_UTD_Height_UTD_Weight_UTD_De	escription o	of wounds	UTD		
	Bandages or dressings UTD	e		Ţ	JTD	
	Dandages or dressings			tleagth, w	idth, location)	
	(Numb. r, location	n — illustrate or	sep, page)	erege - selve koloninskompassion		
	Outstanding miles, warts or birthmarks	UTD	(yes-no; d	escription, location)	***************************************	
			· · · · · · · · · · · · · · · · · · ·		\$ 11 P B B B B B B B B B B B B B B B B B	O
	Sunburn or tan, other than hands & face		TD	ar Martin (Martin exp. ) - a	energy of the state of the stat	. 1440, 04
	מיינו					
	Complexion UTD (light, r	med. dark, cloai	, pimples, pocks	s, freekles)	take deen. Aker is ne will	d 183100
	Build	(large, fot, thin		AMAMA (BANK) IN MINING MINING LA 134-4 (\$4-1-4)		
		` •	·			
	Hair UTD (color, length, quantity,	curly, wavy, str			THE PERSON NAMED IN COLUMN NAM	

Hair		UTD		
11air			etive cutting or other characteris	
	UTD		UTD	תיינו -
Sideburns	(color, setting, sluape)	Mustache	(color, size, shape)	Board or (length, heavy)
Goatee	UTD (light, color, extent)			
Eyes	UTD (color, setting, shape)	Eyeb	rows (color, 1	Oushiness, extent across pose)
Nose	UTD (size, shape, straight)	Ears	(size, set ch	UTD ose to or far from head)
Mouth	UTD (large, medium, small)	Lips	(51	UTD
Teeth	See Toot	***************************************	g, noticeable crowns, fillings, extr	uct),
Chin	UTD		g, pointed, dimple, double)	,
Jaw	UTD (large, small, normal)	Circumference	of head in inches	UTD (hat band)
Neck	UTD (size, length, short, normal, v	vrinkled)	Larynx	UTD (prominent, normal)
Shoulders	UTD . (broad, straight, small, 1		Arms	UTD (length, muscular, color)
	· · · · · · · · · · · · · · · · · · ·			(tengon, muscular, color)
	(extent and quantity of hair)	)	, <del>,,,,,,,,</del>	
Hands	UTD	omagnical of the state of the s	(Classification of Allerton or	,
Fingers	UT (short	q	ze of knuckles, missing fingers or	joints)
		UTD (Unusual characteri	stics of fingernails)	
Chest	(size of	UTD	& extent of hair, largo, small no	rnai)
	UTD (quantity & extent of hair)			
11: A1311014-11111111111111111111111111111111	UTD (quantity & color of hāir)	·	Circumcision UTD (yes-no)	Pubic hair UTD (color)
Herniaplast	y UTD (yes-no; location)	-		
Legs	UT (iaseam, musc		ed, normal, quantity, color & ex	
TIRESTER STATE STA		UTD	and the properties of the particular and the second state of the second state of the second state of the second	

Feet	UTD	Toos	UTD
	(size, corns, callouses, flat)	1063	(slender, stroight, crooked, overlap)
Evidence o	of healed factures		UTD
		(nose,	arms, legs, etc.)
Black out p	parts of body not received at co	emetery :	
_			SE
		,	
	-	$\int_{\Gamma}$	
			( , )∋<
		Y	2
			TAR .
Have finge	rprints been placed on Report	of Interment No	
			(yes-no)
If not, exp	lainToo de	composed	
	Va	•	
Has tooth	chart been prepared	If (yes-no)	not, explain
		•	
	•	***************************************	
Dannula .	R <sub>emains</sub> were in la	ast stages of	f decomposition.
nemarks :	Est. weight of rem	mains recover	red: 62 Lbs.
	,		
	and the second s		
	ti OP-umusuljanunjaksa (1840) selvenna ampjahaan, appelitungs		
			·
	property (designation of the control		
I certify th	at I have personally viewed the recorded to the best of my kn	e remains of subjec	et deceased and all resulting informat
nas neen	recorded to the best of my kil	owicage.	
		,	1111 9:
			Sms Maris AND
	•	Joh	Officer's Name n HARTIN
		M.D.	Civilian Lab. Supervisor
			Itank Service
		Cen	tral Identification Poir
	•	***************************************	Organization

### MOTICE OF DISINTERMENT (AUSGRABUNGSURKUNDE)

Form No 8 GRS-GZ

30 Aug 1946 Date

(Datum)

Die unten angefuehrten amerikanischen Toten sind am heutigen Tage von dem hier angegebenen Ort ausgegraben und nach einem amerikanischen Militaerfriedhof zur Bestattung ueberfuehrt worden.

The below listed U.S. deceased personnel have this date been disinterred from the Location as shown and have been evacuated to a U.S. Military Cemetery.

St. Avold, France: (Q-260.584)

for reburial

1:250.000 N-50 WP-9229

Unknown X-7291 Unknown Unknown

STOD, Czechoslovskia.

(MAME) (NAME)

(RAMK) (DIENSTGRAD) (ÈREEMUNGS-

(ASM) (PLACE OF DISINTERMENT)

MARKENNUMMER)

(AUSGRABUNGSORT)

Falls Gemeindefriedhof, Grabplatz, Reihe, und Grabnummer angeben soweit moe-

glich Isolated grave in Jewish cem. If communal cemetery show Plot, Row and Grave No., if avaible

sigend: Mathies HURMEL, Capt.

Officer or NCO in charge of Disinterment

611 QM Gr Reg. Co.

Orranization

# AREA SEARCHDIVISON AGRE FOR USE IN CASUALTY CLEATANCE

GRC Form 10 (Revised)	PERFE	- LU: 2	ugust 1946	
January 1946			Date	
IAME Unknown X-7291	RANK TI	nk.	ASN' Unk	nown
DRGANIZATION	AAF	•		•
SEANS OF IDENTIFICATION	None	,		_
		.0		,
<del></del>		•		
•	ve this line will be com			4
ECTION A — GENERAL (To be com	pleted by investigators in	all cases)		
<ol> <li>Was positive identity acquired for the following information:</li> </ol>	the deceased through the	e surface investigati	on? ∏O	lf so, stat
a. NAME	RAN	4K	ASN	
h ORGANIZATION		-		
b. ORGANIZATION  2. Was partial identification established	ada Na He	A stata tha facta ás	ta whom you ball	ove the decorred to be
•				
a. NAME		ил	, ,	
b. ORGANIZATION  3. NAMES OF OTHER DECEASED BY	•	0 == 1		
(Use reverse side for listing of crew a. Date of above burials $1^{r}$ .	•	ommon Graves?	Yes	,
a. Date of above burials 15. 15. 15. 15. Name and Type of Cemetery (Military or Civilian)	Not buried in a ce			
<ul> <li>a. Date of above burials 15. 1</li> <li>5. Name and Type of Cemetery (Military or Civilian)</li> <li>6. Map Coordinates of the Cemetery</li> </ul>	Not buried in a ce			
a. Date of above burials 15. 15. 15. 15. 15. Name and Type of Cemetery (Military or Civilian)  6. Map Coordinates of the Cemetery a. Town Co	Not buried in a ce			
a. Date of above burials 15. 15. 15. 15. 15. Name and Type of Cemetery (Military or Civilian) 6. Map Coordinates of the Cemetery a. Town Co. 7. Give exact location in cemetery o	Not buried in a ce	metery		
a. Date of above burials 15. 15. 15. 15. Name and Type of Cemetery (Military or Civilian)  6. Map Coordinates of the Cemetery a. Town Co.  7. Give exact location in cemetery of a. Section	Not buried in a ce	metery		
a. Date of above burials 15. A  5. Name and Type of Cemetery (Military or Civilian)  6. Map Coordinates of the Cemetery a. Town Co  7. Give exact location in cemetery o a. Section b. Is Sketch attached?	Not buried in a ce	metery · · Grave		
a. Date of above burials 15. 15. 15. 15. Name and Type of Cemetery (Military or Civilian)  6. Map Coordinates of the Cemetery a. Town Co.  7. Give exact location in cemetery of a. Section b. Is Sketch attached?	Not buried in a ce	metery Grave		
a. Date of above burials 15. A  5. Name and Type of Cemetery (Military or Civilian)  6. Map Coordinates of the Cemetery a. Town Coo  7. Give exact location in cemetery of a. Section b. Is Sketch attached?  8. If remains are not located in a cool a. Town STOD, Czoch. Coo	Not buried in a ce  untry f the remains.  Row emetery, give exact location ordinates 32 9229	metery Grave		
a. Date of above burials 15. A  5. Name and Type of Cemetery (Military or Civilian)  6. Map Coordinates of the Cemetery a. Town Coo  7. Give exact location in cemetery of a. Section b. Is Sketch attached?  8. If remains are not located in a cooperation of the	Not buried in a ce  untry f the remains.  Row emetery, give exact location	Grave On. N-50		
a. Date of above burials 15. A  5. Name and Type of Cemetery (Military or Civilian)  6. Map Coordinates of the Cemetery a. Town Coo  7. Give exact location in cemetery of a. Section b. Is Sketch attached?  8. If remains are not located in a cool a. Town STOD, Czoch. Coo b. Is Sketch attached? Yos c. Is area mined?	Not buried in a ce  untry f the remains.  Row emetery, give exact location ordinates 32 9229	Grave  On. N-50		
a. Date of above burials 15. A  5. Name and Type of Cemetery (Military or Civilian)  6. Map Coordinates of the Cemetery a. Town Co  7. Give exact location in cemetery of a. Section b. Is Sketch attached?  8. If remains are not located in a color of the	Not buried in a centry f the remains.  Row emetery, give exact location ordinates TP 9229	metery Grave on. N-50		
a. Date of above burials 15. 15.  5. Name and Type of Cemetery (Military or Civilian)  6. Map Coordinates of the Cemetery a. Town Coordinates of the Cemetery or a. Section b. Is Sketch attached?  8. If remains are not located in a coordinate attached?  8. If remains are not located in a coordinate attached?  9. Is Sketch attached? You coordinate attached? You coordinates attached attached? You coordinates attached?	Not buried in a ce  untry f the remains.  Row emetery, give exact locati bordinates TP 9229	Grave  On. N-50  Not marked wi	th a cross	
a. Date of above burials 15. A  5. Name and Type of Cemetery (Military or Civilian)  6. Map Coordinates of the Cemetery a. Town Co  7. Give exact location in cemetery of a. Section b. Is Sketch attached?  8. If remains are not located in a color of the	Not buried in a ce untry f the remains. Row emetery, give exact location ordinates 79 9229	Grave on. N-50 Not marked wi	th a cross	
a. Date of above burials 15. 15.  5. Name and Type of Cemetery (Military or Civilian)  6. Map Coordinates of the Cemetery a. Town Co.  7. Give exact location in cemetery of a. Section b. Is Sketch attached?  8. If remains are not located in a co. a. Town STOD, Czoch. Co. b. Is Sketch attached? You co. Is area mined? You co. Is area mined? You co. If grave is marked with cross, give a co. From what source was this info	Not buried in a ce  untry f the remains.  Row emetery, give exact location ordinates IP 9229  ment exact markings thereon  ormation obtained?	Grave on. N-50 Not marked wi	th a cross	
a. Date of above burials 15. 15.  5. Name and Type of Cemetery (Military or Civilian)  6. Map Coordinates of the Cemetery a. Town Co.  7. Give exact location in cemetery on a. Section b. Is Sketch attached?  8. If remains are not located in a condition at a condition of the coordinates of the Coor	Not buried in a ce  untry f the remains.  Row emetery, give exact location ordinates TP 9229  ment exact markings thereon  primation obtained? ects)	Grave on. N-50	th a cross	

	a. What information was contained thereon?						
	b. Where was the information obtained?		•		-,,,,		
	c. By whom?		***************************************	•	······		
12.	12. What is the date of death? 15. April 1945			*************	•		
	a. Give basis <u>Civilians</u>	•			*************************		
13.	13. What is the cause of death? They were beaten to death			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************		
	b. Give basis Informations from civilians						
14.	14. What is the date of burial? 15. April 1945						
	a. Give basis <u>Civilians</u>						
15.	15. What was the place of death? S T O D , Czechoslovakia (						
	b. Give basis <u>Civilians</u>			T given met A.	۲		
16.	16. Where were the reamains found? Stod , ©zechoslovakia (				<b>-</b> 50		
	a. By whom? A German Civilians			***************************************			
	b. Is sketch attached? <u>No</u>			***			
17.	17. Was a casket used? No Who furnished the casket?						
	Type of casket How marked?						
	(Civilian, American Mil. or German N	Who made the burial <u>Germans</u>					
	a. What are the names and addresses? <u>Unknown</u>			************************			
	a. What are the names and addresses? <u>Unknown</u> SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be	e a men	nber of the	e AAF).	······································		
	a. What are the names and addresses? <u>Unknown</u> SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be 19. Were remains found in the plane wreckage?	e a men	nber of the	AAF).			
	a. What are the names and addresses? <u>Unknown</u> SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be 19. Were remains found in the plane wreckage?  a. Give location in plane from which the bodies were removed	e a men	nber of the	AAF).			
	a. What are the names and addresses? <u>Unknown</u> SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be 19. Were remains found in the plane wreckage?	a men	nber of the	AAF).			
19.	a. What are the names and addresses? <u>Unknown</u> SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be 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	- a men	nber of the	AAF).			
19.	a. What are the names and addresses? <u>Unknown</u> SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be 19. Were remains found in the plane wreckage?  a. Give location in plane from which the bodies were removed	e a men	nber of the	AAF).			
1 <b>9.</b> 20.	a. What are the names and addresses? <u>Unknown</u> SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be 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)	e a men	nber of the	e AAF).	whom).		
1 <b>9.</b> 20.	a. What are the names and addresses? <u>Unknown</u> SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be 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 remains a Type of Plane	e a men	nber of the	e AAF).	whom).		
1 <b>9.</b> 20.	a. What are the names and addresses? <u>Unknown</u> SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be 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)	e a men	nber of the	e AAF).	whom).		
1 <b>9.</b> 20.	a. What are the names and addresses? Unknown  SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be 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 remains a Type of Plane b. Markings and/or name on plane c) Give numbers on motors, machine guns, instruments, radios or other equipment:	e a men	nber of the	e AAF).	whom).		
1 <b>9.</b> 20.	a. What are the names and addresses? <u>Unknown</u> SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be 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 remains and the complete results of investigation) (if remains and the complete results and the complete results and the complete results and the comple	e a men	nber of the	e AAF).	whom).		
19. 20.	a. What are the names and addresses? <u>Unknown</u> SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be 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 remains a. Type of Plane  b. Markings and/or name on plane c) Give numbers on motors, machine guns, instruments, radios or other equipment:  Anti-aircraft	e a men	nber of the	e AAF).	whom).		
20. 21.	a. What are the names and addresses? <u>Unknown</u> SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be 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 remains 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?	e a men	nber of the	and by	whom).		
19. 20. 21.	a. What are the names and addresses? Unknown  SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be 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 remains 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?  On gro	e a men	ate when c	e AAF).	whom).		
19. 20. 21. 22.	a. What are the names and addresses? Unknown  SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be 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 remains 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?  On grave 22. Did plane explode in the air?  On grave 23. Did plane burn in the air?  On grave 24.	e a men	nber of the	and by	whom).		
20 21 22 23 24.	a. What are the names and addresses? Unknown  SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be 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 remains 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?  On gro	e a men	nber of the	and by	whom).		

26. Had bombs been released ploto the crash?	•	(1F-4029)	Ý
27. Does specific time and date of crash correspond with date of dea	th of above named a	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?			
Prisoners?	الله الله الله الله الله الله الله الله		
SECTION C — ARMORED CORPS DECEASED (To be completed only if the Armored Force).	deceased is believed	d to have been a m	ember of
31. Were remains found in wreckage of a tank?			
a. Give specific position in tank from which deceased was remove	d		
(Radio man, driver, assistant driver or front, side, or back) b. Near wreckage?		•	
32. Location of destroyed tank must be investigated. Give complete re		on. (If removed, sto	ate when
and by whom)		e di	
a. Type of tank	<u></u>	······································	
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 disal			
24 Pid Jank synlodo2	,	•	
35. Number of tanks in immediate vicinity at time of disablement	-		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
36. Does spezific time and date of disablement correspond with date of	f death of above no	amed deceased?	.,
37. Precise time and date of destruction of tank	3		
	(Night?) (Day	?)	
38. Did any of the crew members escape?	Prisoners?		
SECTION D $-$ OTHER BRANCH (To be filled out if B & C are not a	applicable).	maakuu ta	3 - 11
39. Did death occur from any other means? (i. e., truck, jeep, mines, dro	wning, or small arms	s fire) beaten to	death
If so, give complete and thorough results of the interrogation.			,
a. Are all certificates and statements of people who possessed knowle			
40. State the specific clues and evidence that were obtained in securing			
deceased There were 9 American P.O.W.'s beater			
death march near STOD, Czechoslova	kia.	,	
		· ·	
SECTION E — GENERAL (To be completed by investigation in all cases	)		e ·
41. Were personal effects recovered by the investigating team? No.			
If not, state reason Wone found at time of death		<del></del>	
a Were identification tags found at the time of death?	*		
Where?By whom?		·	····
Present disposition			
If deceased is not identified, personal effects will not be forwarded final identification is made, or investigation is abandoned.	to PE Depot, but, w	ill remain with this i	form until

	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?
	d. Did Cemetery Register or cross indicate the immunization shot? No
	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 bely 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. Vilan REPKA, GIGAL Vaclav.
	b If a back back back by a second of the sec
	b. If so, has higher headquarters been notified? Yes
	National Company of Association of the Company of t
47.	Was case previously investigated? No By whom?
	When?
	When?  Give full names, addresses, and information obtained from each person interviewed $D_{r}$ . Vilam $R \to P K$ .
	When?  Give full names, addresses, and information obtained from each person interviewed Dr. Vilam REPK.  STOD stated that they were beaten to death, GIGAL Vaclav,
48.	When?  Give full names, addresses, and information obtained from each person interviewed Dr. Vilam REPK.  STOD stated that they were beaten to death, GIGAL Vaclav,  STOD, Czechoslovakia.
48. 49.	When?  Give full names, addresses, and information obtained from each person interviewed Dr. Vilam REPK.  STOD stated that they were beaten to death, GIGAL Vaclav,  STOD, Czechoslovakia.  Are all positive statements regarding identification and particulars surrounding death attached?  Yes
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wing office, should be notified.

Translated from the original manuskript.	
National Council in Striber - health dept.	
No.	
930/2dgav.	12 VIII. 1946.
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Translated from the original manuscript.

National Council in Stribro, health dept.

No. 930/zdrav.

To the American Eilitary Fission Czechoslovakia.

### DEATOHA APTANS PPRRT

According the rules a death-co	rps an American P.W.
who died on a German death n	narch .
on <u>April</u> 1945.	, ,
at the age ofyears	
in Stribro	
has to betransported by car	r
from Stribro via Pil:	sen to Eohnice
to be burioda.	
As the permission to the comme	nced transportation of the death-
corps was given onl	2. VIII. 1946 at 12 a.m.
in the company of American	n Hilitary Mission
	through whose counties the death-
corps will be transported are	herely requested not to make any
difficulties and delays to the	transport.
Stribro	on 12.VIII.

Translated from the original manuscript.

State Police station STOD, county of STRIBRO

2 July 1946

On the 6th and 7th of September 1975 a mass exhumation of 201 bodies took place in the Jewish perspect of SECD. It was found out that amoung these victims of the "Doubh March", those were name (9) U.E.A. in diers from parachute regiments, was absolid have been caught in the instrict of STOD in April 1945, killed and burnied in the common grave on the 19th, 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.

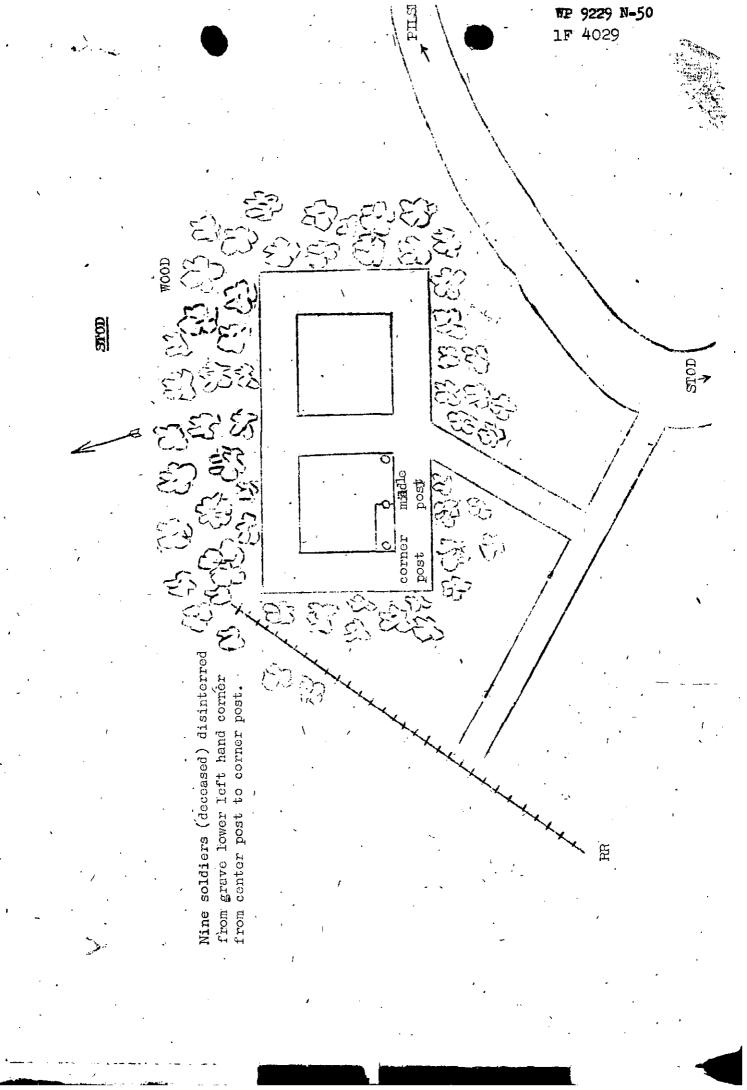
Translated by: Erwin Lebenhart

I certify that this is a true copy.

ALTON ANDERSON 0-1339028

2nd Lt., Inf.

611 QM Gr. Reg. Co.



#### RESTRICTED

DATE OF REPORT WD QMC FORM 1042. REPORT OF INTERMENT (Rev. 1 Apr. 1945) (Supersedes GRS Form 1) 3 September 1946 (AR 30-1810 and AR 30-1815) Section 1.-IDENTIFICATION. Imprint Identification Tag If, Possible. DO NOT TYPE SERIAL NO. NAME (Last, first, middle initial) Unknown X-7291 Unknown ORGANIZATION BRANCH OF SERVICE GRADE Unknown AAF Unknown RACE RELIGION IF OTHER THAN U.S. DEAD, GIVE NAME OF COUNTRY Unknown Unknown PLACE OF DEATH CAUSE OF DEATH DATE OF DEATH Stod, Czechoslovakia. Beaten to death-.15 Apr.1945 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 5 on reserve) (1. 2. or mone) None WERE SUBSTITUTE TAGS PROVIDED! (Yes or no) None Yes LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME None Section 2.—BURIAL. If other than in established cometery, furnish sketch and map coordinates on reverse. NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY US Military Ometery St. Avold, France. ( Q +260. 584 ) TYPE OF GRAVE MARKER DATE OF BURIAL PLOT No. BOW NO GRAVE No. HOUR BURIED IN (Shroud, blanket, or name of other) Temp. wood. KKKK 2 46 3 September 1946 1600 Casket cross IF A REBURIAL INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE WAS THIS A REBURIAL? Stod, Czechoslovakia. Map: 1: 250.000 Sht: N-50 Coord: WB-9229 PLOT NO. ROW NO. GRAVE NO. I SQLATE DE STAVE 1 Yes IF IDENTIFICATION TAGS NOT USED, DESCRIBE TOENTIFICATION DATA AND CONTAINERS BURIED WITH BODY TYPE OF RELIGIOUS CEREMONY PERSON CONDUCTING BURIAL RITES One copy WD QMC Form 1042 CH. H.A.LEB. let Lt. General Service Report of Interment placed in IDENTIFICATION TAG BURIED WITH BODY (Yes or no) IDENTIFICATION TAG ATTACHED TO burial bottle and buried with Yes-Embossed plate remains. BODY BURIED ON DECEASED LEFT; NAME (Last, first, middle initial) ORGANIZATION RANK SERIAL NO. GRAVE NO. US Merch Unknown-X-7284 Unknewn Unk 45 Marine PANK SERIAL NO. ORGANIZATION GRAVE No. BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) **US** Merch Unk Unknown 47 Unknown-X-7272 Marine SIGNATURE OF GRE OFFICER VERTYING REPORT SIGNATURE OF PERSON PREPARING REPORT Ralph W. Sleator Pacpung Sanuel E. Proctor Ir.

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.

Major Inf. C.I.P.

2nd

Inf. C.I.P.

# RESTRICTED

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, (	Section 3.—UNIDENTIFIED ? RE	MAINS.			
LEFT UTTLE FINGER	INSTRUCTIONS:  (a) Great care will be mains. Fill in anatomical social security number; pos planes, vehicles, and tanks.  (b) A fingerprint, or prichart at left, or as many as every tooth will be indicated.	characteristics belition of body found ints, are the most possible. If no fi	ow, and any other I in airplanes, vehic valuable of all clue ngerprint or prints of t in accordance with	clues under "Othe les, and tanks; and s. Imprint all fing can be secured, the	er," such as shoe size, serial numbers of air- ers and thumbs in the condition of each and
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# AREA SEARCH COMMISION

AGRC Form 10 (Revised)		10. August 1946	
1 January 1946	•	Date	
NAME Unknown X-7291	RANK Unit	ASN Unkno	<b>7</b> /D
ORGANIZATION. AAP			
MEANS OF IDENTIFICATION NOT	ie '		
(All statements above this line	will. be completed, upo	n final) processing, by the	clerical staff at the
unit processing point.)		,	•
	•		
SECTION A — GENERAL (To be completed by in	= -		
<ol> <li>Was positive identity acquired for the decease the following information:</li> </ol>	ed through the surface inv	vestigation?No	lf 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 IM	MEDIATE VICINITY	8 Unknown Soldiers	<b>3</b>
		***************************************	
(Use reverse side for listing of crew members fro	·		•
a. Date of above burials 15. April 194			
5. Name and Type of Cemetery Not burn	ed in a cenetary		
(Military or Civilian)		•	•
6. Map Coordinates of the Cemetery	***************************************	-	· · · · · · · · · · · · · · · · · · ·
a. Town Country			c ·
7. Give exact location in cemetery of the remain			,
a. Section Row		Grave	
b. Is Sketch attached?			
8. If remains are not located in a cemetery, give			
a. Town STOD, Caeth, Coordinates	,		
b. Is Sketch 'attached?	*		,
c. Is area mined?			
9. How is the grave marked?			
10. If grave is marked with cross, give exact marking	gs thereon	ed ad th a cross	
a. From what source was this information obto	ained?		
(Identification tags, personal effects)	, ,		
1. By whom			
11. Where are the cemetery records?			

	a. What information was contained thereon?		•	•	•
	d. What anothering was commence increasing				
	b. Where was the information obtained?	***************************************			
	c. By whom?				
12.	. What is the date of death?15. April 1				
	a. Give basis Civilians	7			
13.	. What is the cause of death?	•			
	b. Give basisInformations from	•			
ì4.	. What is the date of burial?15. April 1				
	a. Give basisCi viliers	·	•		
15.	. What was the place of death? group.	Czechoslowałcie	Coords	<b>MD</b> 9229	<b>77</b> -50
	b. Give basis Civilians				:
16.	Where were the reamains found? Sted				N-50
	a. By whom?A German Civilians	,			
	b. Is sketch attached?				
17.	Was a casket used?	Who furnished the ca	sket?	? .	
	Type of casket	How marked?	4		***************************************
18.	Who made the burial		t		************************
		(Civilian, American Mil. or Germa	an Mil.)		
•	a. What are the names and addresses?	known		rl. = 28   d 28 to t ready   1   1   1   1   1   1   1   1   1	·····γ······
	• • •				
	,		•	•	
· ·			* *		7e \$
	CTION B — AIR CORPS DECEASED (To be comple	eted only if deceased is believed t	o be a men	hber of the A	AAF).
	CTION B — AIR CORPS DECEASED (To be completed where remains found in the plane wreckage?	eted only if deceased is believed t	o be a men	hber of the A	AAF).
	CTION B — AIR CORPS DECEASED (To be completed with the plane wreckage?  a. Give location in plane from which the bodi	eted only if deceased is believed t	o be a men	nber of the A	AAF).
	CTION B — AIR CORPS DECEASED (To be completely were remains found in the plane wreckage?  a. Give location in plane from which the bodi	eted only if deceased is believed t	o be a men	nber of the A	AAF).
	CTION B — AIR CORPS DECEASED (To be completely were remains found in the plane wreckage?  a. Give location in plane from which the bodi	eted only if deceased is believed to the second ses were removed radio, turret, etc., or front, side of p	o be a men	hber of the A	AAF).
ì9.	CTION B — AIR CORPS DECEASED (To be completely were remains found in the plane wreckage?  a. Give location in plane from which the bodi	eted only if deceased is believed to the ses were removed to the radio, turret, etc., or front, side of p	o be a men	nber of the A	AAF).
ì9.	CTION B — AIR CORPS DECEASED (To be completed with the plane wreckage?  a. Give location in plane from which the bodi  (Tail gunner, pilot, b. Near wreckage?  Scene of crash must be investigated. Give completed with the plane wreckage?	eted only if deceased is believed to the ses were removed to the radio, turret, etc., or front, side of promplete results of investigation (if	o be a men	nber of the A	AAF).
i <b>9.</b>	CTION B — AIR CORPS DECEASED (To be completed with the plane wreckage?  a. Give location in plane from which the bodi  (Tail gunner, pilot, b. Near wreckage?  Scene of crash must be investigated. Give completed with the plane wreckage?	eted only if deceased is believed to the ses were removed to the radio, turret, etc., or front, side of promplete results of investigation (if	o be a men	nber of the A	AAF).
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i 9. 20.	CTION B — AIR CORPS DECEASED (To be completed with the plane wreckage?  a. Give location in plane from which the bodi  (Tail gunner, pilot, b. Near wreckage?  Scene of crash must be investigated. Give can a. Type of Plane  b. Markings and/or name on plane c) Give numbers on motors, machine guns, instructions.	eted only if deceased is believed to the ses were removed to radio, turret, etc., or front, side of promplete results of investigation (if the second	o be a men	ate when and	AAF).
i 9. 20.	CTION B — AIR CORPS DECEASED (To be completed with the plane wreckage?  a. Give location in plane from which the bodi  (Tail gunner, pilot, b. Near wreckage?  Scene of crash must be investigated. Give can an a	eted only if deceased is believed to the ses were removed to radio, turret, etc., or front, side of promplete results of investigation (if the second	o be a men	ate when and	AAF).
i 9. 20.	CTION B — AIR CORPS DECEASED (To be completed with the plane wreckage?  a. Give location in plane from which the bodi  (Tail gunner, pilot, b. Near wreckage?  Scene of crash must be investigated. Give completed with the plane of plane of plane of plane of plane of plane of Give numbers on motors, machine guns, institution of the plane of plane of give numbers on motors, machine guns, institution of the plane of pl	eted only if deceased is believed to the ses were removed to the radio, turret, etc., or front, side of promplete results of investigation (if the ruments, radios or other equipments).	o be a men	ate when and	AAF).
i9. 20.	CTION B — AIR CORPS DECEASED (To be completed where remains found in the plane wreckage?  a. Give location in plane from which the bodi  (Tail gunner, pilot, b. Near wreckage?  Scene of crash must be investigated. Give completed with the bodi  (Tail gunner, pilot, b. Markings and/or name on plane c) Give numbers on motors, machine guns, instruction.	eted only if deceased is believed to the ses were removed to radio, turret, etc., or front, side of promplete results of investigation (if the second	o be a men	ate when and	AAF).
i9. 20.	CTION B — AIR CORPS DECEASED (To be completed with the plane wreckage?  a. Give location in plane from which the bodic (Tail gunner, pilot, b. Near wreckage?  Scene of crash must be investigated. Give can a. Type of Plane  b. Markings and/or name on plane c) Give numbers on motors, machine guns, instruction.  How did crash occur?  Enemy Planes?	eted only if deceased is believed to the ses were removed  radio, turret, etc., or front, side of promplete results of investigation (if the second of the s	o be a men	ate when and	AAF).
i9. 20. 21.	CTION B — AIR CORPS DECEASED (To be completed with the plane wreckage?  a. Give location in plane from which the bodic of the complete with the plane from which the bodic of the complete with the plane from which the bodic of the complete with the plane wit	eted only if deceased is believed to the ses were removed  radio, turret, etc., or front, side of promplete results of investigation (if the second of the s	o be a men	ate when and	AAF).
i9. 20. 21. 22. 23.	CTION B — AIR CORPS DECEASED (To be completed with the plane wreckage?  a. Give location in plane from which the bodic of the complete with the plane from which the bodic of the complete with the plane from which the bodic of the plane of	eted only if deceased is believed to the ses were removed  radio, turret, etc., or front, side of promplete results of investigation (if the second of the s	o be a men	ate when and	AAF).

	b. Were personal effects found the time of death?
	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? <u>Unknown</u> 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?
45.	Is it possible on surface investigation to obtain from civilian sources the condition of the remains?
	They were belly beaten
	(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 Dr. VII an REPKA GIGAL Vacley.
	b. If so, has higher headquarters been notified?
47.	Was case previously investigated?  By whom?
	When?
48.	Give full names, addresses, and information obtained from each person interviewed
	S.T.O.D. stated that they were beaten to death . G I C A L Vecley.
	STOD Czechoslovekie
49./	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?
<i>i</i> -	Was investigation preceded by anvanced publicity?
	(If special investigation, give case number)
	·
	Give Brief Narrative There were 9 American Peratroopers beaten to death by the Com
	On a death merch near STOD Czechoelowskie (Use attached, sheets if necessary)
	1 CO WAX
	Victor  Calvin W. Alway  Signature of Interpreter  Signature of Investigator
	Signature of Interpreter  Signature of Investigator  The Property Addition of Investigator
	V.R.B.A. W.O. Calven H. A.T.W.O.O.D.
	V.R.B.A. W.O.  Calven R. A.T.W.O.O.D.  Rank ASN  Rank ASN
	V.R.B.A. W.O.  Calven R. A.T.W.O.O.D.  Rank ASN  Rank ASN
	V.R.B.A. W.O.  Calven R. A.T.W.O.O.D.  T/5 ************************************
	Rank ASN Calven H. A T W-O O D .  Rank ASN Rank ASN

Translated from the oxiginal manuskript. Landeral Council in Strikes. - health dayt. 10. vant. 1946. No contageav. Matter: transportation of death- corps, permission. mesteen I illimite Pisation Linashan Agairta On your request we give you the permission that the deathcomps \_\_ mericalem\_ years old who died on ing 1945, in critico on the Course death threb And transported to The following presudibutions are to be regarded: The death samps will be given to a simple wooden coffin invardly and outwordly wall seeled. The cover will be closed and sected beforeviously. To this procedure will be present doubter of this place who will give out a conth-passport, The transportation will take place on 10.777 et by com from committee via diam to Johnson The vehicle on which the deathwarmph will be carried should be us cent, well sealed or an least real o peverodined no ambor throse but flowers can be enclosed to the configurathe transportation will be accompanied by a special guide the will be responsible that the tr

transportation will nowhere aton managesevily that it will take the

As soon as in inansport will arrive to its desimpation the relio ..

prescriberated and that the centur will be enwhere off moue

wing office

should be nowified.

Translated from the oxiginal manuskript,

Rational Council in Stribro .- health dept.

No confeder.

<u> 12.VIII. 1946.</u>

Matter: transportation of death- curps, permisseum.

the the tenerican trill heavy kine inn

On your request we give you the permission that the death-
comps em_archicen_P. **.
years old who died on Amil 1945, in amile
on the Course death mench
And transported to
The following prescribitions are to be regarded:
The Beath cours will be given to a simple wooden cofrin inwardly
and outwardly wall seeled.
The cover which on closed and settled bermevically,
To this procedure will be present doctor of this place
who will gays out a dasth-passport.
The transportation will take place on To with st
by com from man viu this no pohatoo
The vehicle on which the double-corps will be capited should be us -
cent, well sealed or av least would covered and no other throat but
flowers can be enclosed to the configuration The transportation will be
accompanied by a special guide the will be responsible that the to
transportation will nowhere stop uncoessavily that it will take the
presorthecoded and they the outlin will be outland orpensue
As soon as the bransport will arrive to its desimpation the folio.
wing office
should be notified.

Translated from the original manuscript.

No. Gan/adray.

# DEATHE APPAIS DOR.T

According the rule	es a death-corps	an unichem Ank	ariesn P.W.
1			
who died	Assman Anoth more	1	
on Avetl	194 <b>5.</b>	· · · · · · · · · · · · · · · · · · ·	**************************************
at the age of	years		·
in Shribea		,	
	or to d by car		·
•	via <u>Pilaen</u>		
to be burious.			
As the permission	to the commenced to	ransportation	of the death
corps was given on	12. VIII. 25	46 at 12 a.m.	
in the company of	American Mil	itary Mission	
All the concerned	authoryties through	a whose counti	es the death.
corps will be tran	sported are herely	requested not	to make any
difficulties and d	ielays to the trans	port.	•
Stribro	on	12. VIII.	19/1 <b>6</b> -

QMCHT 293

lst Ind.

GRS European

1.8

Certificates of Unidentifiability of Remains SUBJECT: Transmittal Letter #4333

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

TO:

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

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

3146 JERS Europe 172# 4333

POR THE QUARTERWASTER GENERAL:

Incls w/d

T. H. METZ Lt. Colonel, QMC Memorial Bivision

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AIRMAIL

QMONT 293

1st Ind.

GRS European

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Incls w/d

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

3146 LAS Europe.

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J.

TEU

AIRMAIL

# HEADQUIRTERS AMERICAN GRAVES REGISTRATION COMMAND EUROPEAN AREA APC 58 US ARMY

RRE 293

14 September 1949 (Date)

### CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS.

$\cdot$
1. The records pertaining to Unknown X - 7291, Plot KKKK
Row 2 , Grave 46 , USNC ST. AVOID. 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:
Case reviewed by undersigned Members of the Board of Review:
Col. H.P. HENRY, 0-12589 OMC Lt. Col. E.D. MULVANITY, 0-359598 OMC
Major R. BERGER, 0-251736 ORD Capt. Jack, C. HAYES, 0-1577297 OMC
Capt. E.F. PRICE, Jr 20-1588236 QMC TYDEXX Forest Exx 9 7007; X 0:1595665 QMC 1/Lt. Gaylord E. LUTZ, 0-1595665 QMC

Inc/#3

is a la				, - <b>7</b>			JC /
Z USMC Plot	ST AVOLD, F, Row 14	, Grave 23 DIS	INTERM	•	TIVE	-	48-B t 49
. ,	CTION A — Ime and Burial Loca	M V M	T QMC	DIBET OVE NUMB	ER 00000	)	DATE 15 01 48
NAME	2	JUNKNOWN	SERIAL NUI		RANK	ARM 1	DAY MONTH YEAR DATE OF DEATH  DAY MONTH YEAR
CEMETERY A VOL	D - MET	Z	-	<u>.</u>		0	DISPOSITION OF REMAINS
PLOT ROW GR	AVE COUNTR	RANCE	12 <u>-</u>	· · · · · · · · · · · · · · · · · · ·		1	CODE DIST. PT. CAUSE OF DEATH
		SECTION B — CON	SIGNEE AND	NEXT OF KIN			
NAME AND ADDRESS OF			NAME .	AND ADDRESS OF	NEXT OF KIN		
ST. AVOLD	, FRANCE ISTRATIVE (	ORDER)					
		SECTION C DISINTE	RMENT AND	DIDENTIFICATION			:
NAME		SERIAL NUMBER	RANK '	DATE OF DEATH		DAT	E DISTINTERRED
UNKNOWN X→	007291		Unk 1	15 Apr	45	2:	2 Apr 48
IDENTIFICATION TAG O REMAINS MARKER GR	USAA		· · · · · · · · · · · · · · · · · · ·	religion Unk	IDENTIFICATIO Olive		Modin Embalmer
CAL MINISTER CITY	<u>,</u>	SECTION D PREPARAT	ION OF REM	L AINS FOR SHIPME	NT		NAME AND TITLE
Mattress cov	er		CONDITIO			ete	but disarticul-
OTHER MEANS OF IDENTI	FICATION		l			,,	** 199**
Report of bu	rial dated 3	Sept 46 with re	mains r	eads: "Unk	X <b>-72</b> 91"		
MINOR DISCREPANCIES 1	·····				· · · · · · · · · · · · · · · ·	- •	
None					•	•	
REMAINS PREPARED AND	PLACED IN CASKET					<del></del>	<u>!</u>
20 App Li	ø	ΓO	ima P	Madin Embe	.T mans		
DATE 29 Apr 45 CASKET SEALED BY	<u> </u>	BY OT		Modin Embe	THEL		·
•	Aliver F	Modin Embalmer		1.	Oliver E	گئے Mod	Mocho
CASKET BOXED AND MAR	RKED	<u></u>	plates	communication of the communica			ings, tags and
DATE 29 Apr 48 BY		· · · · · · · · · · · · · · · · · · ·					st Lt QMC
	tify that all the fo ort above is correc		re conduc	ted and accor	nplished unde	r my	immediate supervision
				ir 1st Lt	Quc		Figh
1 Prepare Discrep	ancy Report QMC	Form 1194a for major	QM Bn discrepai		F GRS INSPECTO	)K	FOART VUVIS &
	<u>-</u> • • • • • • • • • • • • • • • • • • •		,	•	•		BRANCI MEN

QMC FORM REV 15 MAR 46 1194

### RECORD OF CUSTODIAL TRANSFER

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	1. SH	IPPED '	
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AGRC FORM No. 11 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)

		Unknow	, <b>~7291</b>	angenggaann gónn i i in i i i i i i i i i i i i i i i
	•	Cemeter	y St.Avold,	Grave
. Arrived at cemetery.	(hour) (date)			
. Place of death	i Osechoslovakia (name of closest town) Sheet: N=50 Coord	(coo	rdinates and letter Prelex,	, maps)
	(Sheet, scale disinterred by 61.	and serials used:		**************************************
. Evacuated to Cemeter	y by <b>Gentral Iden</b>	tidication P	oint	
. Description of clothi surements).	ng and equipment : (if	Clothing	Indicate	unusual markings tear, repairs, etc.
Item				
Headgear No.				
Raincoat	None	in the second a second manager of	and the section of constant constants.	
	None	4		
	None			
acket, Combat				
Jackinaw	None		Allunners likes, account and one will be	no placedana como como no
Sweater	None			
acket, HBT	None	Marson over extende filet o file at a	and the second s	a new assume and since a mergen.
Shirt <b>ixkasixhkSp</b> (	ort type, tan wit	h red collar	and cuffs,	civilián
Indershirt, Wool No.				
Judershirt, Cotton	None	pomore a pro-constitution of the state of th		·
Frousers HBT	None		и потпатите в потпатителнителнителнителнителнителнителнител	or otherwise the constitution of
Trousers, Wool OD	None	communicated sections with the section galaxies in the section of		an andrew (1990) and a first control of the control

	Belt, Web	and the same of the same and the same of t
	Drawers, Wool	
	Drawers, Cotton	
	Leggins, Wool	None (Note unusual lacing)
	•	
	*Shoes (type) None	And the second s
	Overshoes None	
	Web Equipment (Type) Non	
	(Other item)	None
	(	
	*If body is nude, sizes of these items should be	computed by measuring the remains.
Б.	Chevrons or Insignia	& location : shirt, jacket, coat, helmet)
	Shoulder Patch None	The state of the s
7.	Does clothing indicate that deceased was a n	nember of the Air, Ground or Naval Forces
ω	Described as a Described	
8.		escription of wounds. UTD
	**	
	Bandages or dressings UTD	Scars (length, width, location)  Tattoos UTD
	(Number, location	n — illustrate on sep, page)
	Outstanding miles, warts or birthmarks	(yes-no: description, location)
,	Sunburn or tan, other than hands & face	UTD
	Complexion	and the state of t
	Build UTD	ned. dark. cloar, pimples, pocks, freckles)
		(large, fat, thin, muscular)
	Hair Color, length, quantity.	carly, wavy, straight, whorls, or definite parting).

Hair	- 4	UTD			
440)1		ness, widows peak, dis	tinctive cutting or other charac	teristics),	
٠.	ጠዋከ	• ;	מייוו		UTD
Sideburns	(color, setting, slupe)	Mustache	(color, size, shape)	Board or.	(length, heavy)
•	·		, , , , , ,		
Goatee	UTD				•
	(light, color, extent)		,		
Eves	(color, setting, shape)	Eve	brows	กรอ	,
13,00	(color, setting, <sub>(</sub> shape)		(ro	lor, bushiness, extent aeross nos	se)
N	nep	Б.	S	UTD	
Nose	(size, shape, straight)	Ear	S (size, s	et close to or far from head)	
				<b></b> :	
Mouth	(large, medium, small)	Lip	S	(small large, full)	interporting to the corper particular and according to
	targe, medium, smarr			(small large, mit)	
Teeth	See Too	th Chart			·
	(white	e, size, uneveness, spac	ing, noticeable crowns, fillings	, extract),	
Chin	UTD .			;	
*CIIII		(prominent, reced	ing, pointed, dimple, double)	· · · · · · · · · · · · · · · · · · ·	
	กรา			C C C C C C C C C C C C C C C C C C C	
Jaw	(large, small, normal)	Circumferenc	ee of head in inches	(hat band)	-
				• • • •	
Neck	UTD		Larynx	UTD	davi
	(size, length, short, normal,		,	(prominent, normal)	
Shoulders	UTD .	,	Arms	TTD `	
	(broad, straight, small,			. (length, muscular, color)	
	UTD				
***************************************	(extent and quantity of hair	)			•
	m m				
Hands	UTD	1	Allen Green Charles and Charles Control of the Cont	e and security and the second designation of	
	U	מיז			
Fingers					
	(sho	rt, thick, long, slender,	size of knuckles, missing finge	ers or joints)	
1444	.punqui.uuminga,singi eerang,danggaga,sanaa	UTD			
		(Unusual characte	eristics of fingernails)		
Chost		UTD		• ,	
Chest	(size o	f nipples, color, quanti	ly & extent of hair, largo, sma	ll normal)	( <del>                                      </del>
	ard			urd .	
Back	(quantity, & extent of hai	r)	(size	of navel, appendectomy, amou	nt)
			**	•	
		data starramenta starramenta starramenta starramenta starramenta starramenta starramenta starramenta starramen	Circumcision	Pubic hair	UPD
	(quantity & color of hair)	_	(yes	-no)	, (color)
Hernianlast	ty			•	-
mapinot	(yes-no; location)	•	·		
Τ	UI	מי			
Legs	. (inseam, mus	scular, knock-kneed, bo	owed, normal, quantity, color	& extent of hair)	
٠.					
·		UTD			

Evidence of heal Black out parts of	(size, corns, collouses, f	flat)	(nose, arms,	(slender, stra	ight, crooked, c	overlap)
			(nose, arms,		. ,	···· diliberative //www.tab.co.co.co.g/122ad
			(nose, arms,	, legs, etc.)		
Black out parts a	of body not recei	ved at cemetery	v :		•	
						· •
				•		.,
					3	. /
					·	,
			_ / \			
			5			
				<i>ک</i> ے۔۔۔۔	_ \	<u>;</u>
	•					
•						
Have fingerprints	: heen blood on	Roport of Inter	rmont -			· · ·
mave imgerprints	neen praced on	report of inter	inent Mo	4	(yes-no)	*
If not, explain	in the	oodaaamaa	sed			1. 1
, <b></b>		annamha				,,,
Has tooth chart !	been prepared	Yes	If not.	explain	•	· · · · · · · · · · · · · · · · · · ·
	• • •	(yes-no)		1		. 1
				a them ( a ch) - d o box dynamich a nagoticit sign		,
Remarks :	emains were	in last s	tages of d	ecompo	eition.	tioned actions are on the sector of the
· <b>E</b>	st. weight	of remains	recovered	: 62 L	pa+	•
						***************************************
		t		an a behavious of the control of		
I certify that I ha	ave personally vi	lewed the remai	ins of subject de	rengad an	d all month	ting infam
has been record	ded to the best o	of my knowledge	e.	ccascu all	u an resul	mg morms
		·		•		4
•				,		
			- Ches	Officer	S Name	
			John 1			•
•			WD CL	vilian	Lab. S	rber 41 ac
			***************************************	Rank	Service	mandan printing properties
			Centra	al Iden	tilica	tion Poi
			News ( remaining parties )	Organ	nization	

OFFICE OF THE CHIEF OUARTERMASTER-

### TOOTH CHART

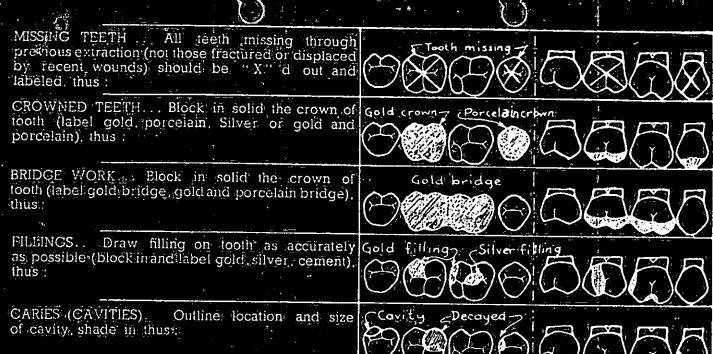
Taknoza Unknorn Uniknosm Inknown X-7291 Unkno n Serial No.  $\mathbf{I}$ First East Name Unknown Organization Czechos wokla. 15 Apr 1945 Stod, Cause of Death Date of Death Place of Death Left Right Side views UPPER VIEWS Side Views 15 16 12 13 1,4 -11 9; 10 10. 14 15 16!

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 (chewing teeth), and molars (principal chewing teeth). Lost teeth, crowned teeth, bridge 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 Olificar of other person who propered Tooth Chart

Verfield by G. R. S. Officer

GRAVES REGISTRATION: FORMING 1-A-



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

### ADDITIONAL SPACE FOR FURTHER REMARKS

R-16: large devity P.O. L-5 unusual formation-tooth nerrow. Raiss, Raile, Laif, Laife mismiss, That or religion, our continuity Wisding AD R-1, 1f. J-1, :. L-64, spoket rest stallor, and born a considerition. b-7, 35. 7-8,L-8 caries 0. P-4,5 crowns gone- either broken or decryod out, surfices are quoot: and coheave. L-16 caries occlusel. R-10 chip ed Lesis 1. F-11 rotated. Teeth tinged alightly yellow - in poor dental condition opraction irregular. 1

### RESTRICTED

REPORT OF INTERMENT (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)

3 September 1946

•	(1111 00 1010 0			
Imprint Identification Tag II Possible.	Section 1.—IDENTIFICATION.			
DO NOT TYPE	NAME (Last, first, middle initial) Unknown X-7291			
)	GRADE			
	Unknown			
\	RACE			
	Unknown			

(AR 30-1810 and AR 30-1815) Section 1.—IDENTIFICATION.

GRADE ORGANIZATION Unknown

SERIAL NO.

DATE OF REPORT

Unknown

Unknown∴

BRANCH OF SERVICE

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

RACE RELIGION AAF

PLACE OF DEATH Stod, Czechoslovakia.

CAUSE OF DEATH

Beaten to death --

DATE OF DEATH 15 Apr.1945

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)

None

WERE SUBSTITUTE TAGS PROVIDEDT(Yes or no)

None

Yes

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

None

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

US Military Conetery St. Avold, France. ( Q -260. 584)

DATE OF BURIAL .	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE	PLOT No.	ROW No.	GRAVE No.
3 September 1946	1600	Casket	Temp.wood.	KKKK	2	46
WAS THIS A REBURIAL?  IF A REBURIAL INDICATE NAME NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE  (Yes or no)  Grade Crechoslovskia						

Yes

Stod, Czechoslovakia.

Map: 1: 250.000 Sht: N-50 Coord: Kp-9229

PLOT NO. ROW NO. GRAVE NO. I SO Lated grave in Jewish cometery

TYPE OF RELIGIOUS

PERSON CONDUCTING BURIAL RITES

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

CH. H.A.LEE, 1st Lt. General Service IDENTIFICATION TAG BURIED WITH BODY (Yes or no)

IDENTIFICATION TAG ATTACHED TO MARKER (Ym # 10)

One copy VD QMC Form 1042 Report of Interment placed in burial bottle and buried with

No Yes-Embossed plate remains.

BODY BURIED ON DECEASED LEFT; NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE NO.	
Unknown-X-7284	Unk	Unknown	US Merch	45	
UIRIOWIT-A-1201	UIIK.	GIRRIOWIL	Marine	1 30	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.	
	Unk	Unknown	US Merch	427	
Unknown-X-7272			Marine	47	

SIGNATURE OF PERSON PREPARING REPORT

Ralph W. Sleat Facehow Major Inf. C.I.P.

SIGNATURE OF GRS OFFICER VERLEXING REPORT

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.

•	Section UNIDENTIFIED REMAINS		
LEFT LITTLE FINGEN RI	mains. Fill in anatomical charac social security number; position o planes, vehicles, and tanks. (b) A fingerprint, or prints, a chart at left. or as many as possib	teristics below, and any other f body found in airplanes, vehi- re the most valuable of all clu- le. If no fingerprint or prints	s for the future identity of unidentified re- clues under "Other," such as shoe size, cles, and tanks; and serial numbers of air- es. Imprint all fingers and thumbs in the can be secured, the condition of each and th diagram below. Tooth chart will not be
LEFT RING FING	HEIGHT WEIGHT : : COLOR OF		BIRTHMARKS, SCARS, OR TATTOOS
, ' ' RGER	יט סדט טייט עדט טיי	rd urd .	UTD.
	WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
ЖІООГ	None	None	Stod, Chechoslovak
LEFT MIDDLE FINGER	OTHER IDENTIFICATION CLURS	-	
DE INCE	None	The section	
HEFT INDEX FINGER	FILLINGS SII	YER FILLING	3000003
THUM#	CAVITIES	CAVITY 6	
RICHT THUMB	CROWNED TEETH	CITAL BASINESSAM	REPRESENTS THE MOUTH WIDE OPEN
RIGHT INDEX FINGER	BRIDGE WORK	GOLD BRIDGE	15 LOWER 13 14 15 12 12 12 12 12 12 12 12 12 12 12 12 12
MIDDLE RECEIPT	FURNISH SKETCH AND MAP REFERENCE	AND COORDINATES FOR BURIAL II	N OTHER THAN ESTABLISHED CENETERY
RIGHT RING FINGER	NOTSIAIS TAIL	<del></del>	
Finds Finds	Form 11 clider Ris accomplished. Fingers HONVESON Est. Weight of re	1933 pp. Fingerprise mains recovered:	nd Form 1A Tooth Chart nts. 250 100 100 100 100 100 100 100 100 100 1