



FILE IDENTIFICATION TOPPER

FILE NUMBER

293 Wick Flamingo (Margue Staud)

SUBJECT

X-60835

Interred 4 August 1950

IRRO

F-6-22

USMC ANZIO

1

*Horace J. Mc Garity*  
HORACE J. MC GARTY  
Cemetery Superintendent

DISINTERMENT DIRECTIVE

*43 York Florence X 60835*

SECTION A - NAME AND BURIAL LOCATION OF DECEASED	DIRECTIVE NUMBER 5200 00012	DATE 10 04 50 DAY MONTH YEAR
---	--------------------------------	------------------------------------

NAME UNKNOWN	SERIAL NUMBER X-60835	GRADE	ARM 8	RACE 0	RELIGION 6
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CEMETERY FLORENCE - ITALY	PLOT	ROW	GRAVE STORAGE	DISPOSITION OF REMAINS 5201 80 CODE DIST. CTR.
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SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE <del>XXXXXXXXXXXX</del> ANZIO, ITALY Per verbal authority of Lt Col. L.W. Allen Memorial Division	NAME AND ADDRESS OF NEXT OF KIN (BY ADMINISTRATIVE DECISION)
--	---

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISINTERRED
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER		ORGANIZATION UNKNOWN	RELIGION	IDENTIFICATION VERIFIED BY NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
OTHER MEANS OF IDENTIFICATION	

MINOR DISCREPANCIES (Prepare Discrepancy Report OMC Form 1194a for major discrepancies.)

REMAINS PREPARED AND PLACED IN CASKET

DATE	BY	EMBALMER (Signature)
CASKET SEALED BY		

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY <i>[Signature]</i>
DATE	BY

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 AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS  
REMAINS UNIDENTIFIABLE

NAT. FILE RECORDS ANNOTATED  
 DATE *5-10-50*  
 NAME *Tork*  
 BR. MEM. DIV.

*Inel 2*

**RECORD OF CUSTODIAL TRANSFER**

FROM		AUG/12		KIND OF CONVEYANCE		Truck		SIGNATURE OF SHIPPER			
TO		Superintendent, USMC Ansto		NAME OF CONVOYER		JOHN I. JACIS, JR., Capt. GUC		SIGNATURE OF RECEIVER		<i>John I. Jacis, Jr.</i>	
DATE		3 Aug. 1950		DATE		3 Aug. 1950		SIGNATURE OF SHIPPER		HORACE J. MC GARTHY, SUPERINTENDENT	
1. SHIPPED											
FROM				KIND OF CONVEYANCE				SIGNATURE OF SHIPPER			
TO				NAME OF CONVOYER				SIGNATURE OF RECEIVER			
DATE				DATE				SIGNATURE OF SHIPPER			
2. SHIPPED											
FROM				KIND OF CONVEYANCE				SIGNATURE OF SHIPPER			
TO				NAME OF CONVOYER				SIGNATURE OF RECEIVER			
DATE				DATE				SIGNATURE OF SHIPPER			
3. SHIPPED											
FROM				KIND OF CONVEYANCE				SIGNATURE OF SHIPPER			
TO				NAME OF CONVOYER				SIGNATURE OF RECEIVER			
DATE				DATE				SIGNATURE OF SHIPPER			
4. SHIPPED											
FROM				KIND OF CONVEYANCE				SIGNATURE OF SHIPPER			
TO				NAME OF CONVOYER				SIGNATURE OF RECEIVER			
DATE				DATE				SIGNATURE OF SHIPPER			
5. SHIPPED											
FROM				KIND OF CONVEYANCE				SIGNATURE OF SHIPPER			
TO				NAME OF CONVOYER				SIGNATURE OF RECEIVER			
DATE				DATE				SIGNATURE OF SHIPPER			
6. SHIPPED											
FROM				KIND OF CONVEYANCE				SIGNATURE OF SHIPPER			
TO				NAME OF CONVOYER				SIGNATURE OF RECEIVER			
DATE				DATE				SIGNATURE OF SHIPPER			
7. SHIPPED											
FROM				KIND OF CONVEYANCE				SIGNATURE OF SHIPPER			
TO				NAME OF CONVOYER				SIGNATURE OF RECEIVER			
DATE				DATE				SIGNATURE OF SHIPPER			

X-60835, Florence Italy  
(Married stored)

Get DD on this case.

Fun is that a working

team, as it is a permanent

Get DD number

---

15

703

293 unk ~~Italy~~ X-60835 (Florence)   
 Morgue storage

OSMO DEPT OF ARMY WASH D C  
COAGRS M2 ROME ITALY

UNCLASSIFIED

DEFERRED

X

FROM WASH

Wcl 46258

219

APR 6 11 10 AM '50

~~UNKNOWN~~ IRAY 60835 OMA MORGUE STORAGE FLORENCE ITALY OMA CLAS

UNIDENTIFIABLE



APR 5 11 00 AM '50  
MEMORIAL BRANCH  
DIVISION



Handwritten initials and signature.

Beckman: gsg  
McDermott MB

furnished: Admin Section

CLASSIFIED

0614902

GRIVES

RAY 72947

APR 50

*D. I. Sumner*

D. I. SUMNER  
CAPT, SMC, M M DIV

27

AIR MAIL

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
MEDITERRANEAN ZONE  
9107 TSU - QMC  
APO 794 US ARMY

RB 293

JLJ/ld/rm  
27 March 1950

SUBJECT: Non-Identifiable Deceased.

TO : The Quartermaster General  
Department of the Army  
Washington 25, D. C.  
Attention: Memorial Division

Transmitted herewith is a CIL Report with a Certificate of Unidentifiability for remains of Unknown American X-60835, Morgue Storage, Florence, Italy.

FOR THE COMMANDING OFFICER:

1 Incl: CIL Report

*-w/d  
by ID Section*

*[Signature]*  
JOHN L. JACKS, JR.  
Captain QMC  
Graves Records Officer

*993 Unknown Italy X-60835 (Florence)*

*File  
to Division  
about subject  
NPN*

AIR MAIL



OUT  
APR 5 1950  
IDENTIFICATION  
BRANCH

RECEIVED  
APR 4 1950  
M. S. S. S. S.  
M. S. S. S. S.

APR 4 1950  
MONTANA DIVISION  
APR 4 03 PM '50  
ADMINISTRATIVE BRANCH

AIR MAIL

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
MEDITERRANEAN ZONE  
9107 TSU - QMC  
APO 794 US ARMY

JLJ/rm  
2 March 1950

RB 293  
UNKNOWN X-60835  
Morgue Storage  
(Florence), Italy

SUBJECT: Transmittal of Report of Interment

TO : The Quartermaster General  
Department of the Army  
Washington 25, D.C.  
Attention: Memorial Division

QMC Form 1042 and QMC Form 1044 for Unknown X-60835, Morgue  
Storage, Florence, Italy are transmitted herewith.

FOR THE COMMANDING OFFICER:

2 Incls:

- 1. QMC Fm 1042 (X-60835) *7/10/50*
- 2. QMC Fm 1044 (X-60835) *11/10/50*

*[Signature]*

JOHN L. JACKS, JR.  
Captain QMC

Graves Records Officer

*Section*

*993 Unknown Italy X-60835 (Florence)*

*File  
4 Apr 50  
P. H. ...  
...  
MM*

AIR MAIL

RECEIVED  
MAR 20 1968  
O.C.M.G.  
MARRS

**IDENTIFICATION DATA**

1. REMAINS OF UNKNOWN <b>X-60835</b>				2. DATE OF REPORT <b>27 February 1950</b>	
3. NAME OF CEMETERY  <b>MORGUE STORAGE, FLORENCE, ITALY</b>	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
				DISINTERMENT	REINTERMENT

**PHYSICAL DESCRIPTION**

8. ESTIMATED WEIGHT <b>Heavy build</b>	9. ESTIMATED HEIGHT <b>Estimation impossible</b>	10. COLOR OF HAIR <b>No hair present</b>	11. RACE <b>Determination impossible</b>
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

**None**

13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES

**None**

14. WAS BODY BURNED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT EXTENT?  <b>Partially</b>
---	---

15. WAS BODY MANGLED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT?  <b>None</b>
--	------------------------------------

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

**None**

17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

**Scraps of OD shirt and trousers**

**Five pieces of metal scraps, two with rubber tubes (probably from aeroplane), with following embossed letter:**

One: 

TO.	MAN-	AUTO.		WUL
N	UAL	RICH		RICH

One: 

WITTEK MFG CO.	F. B. - 14
CHICAGO	
USA	
PAT 22763	

One: 

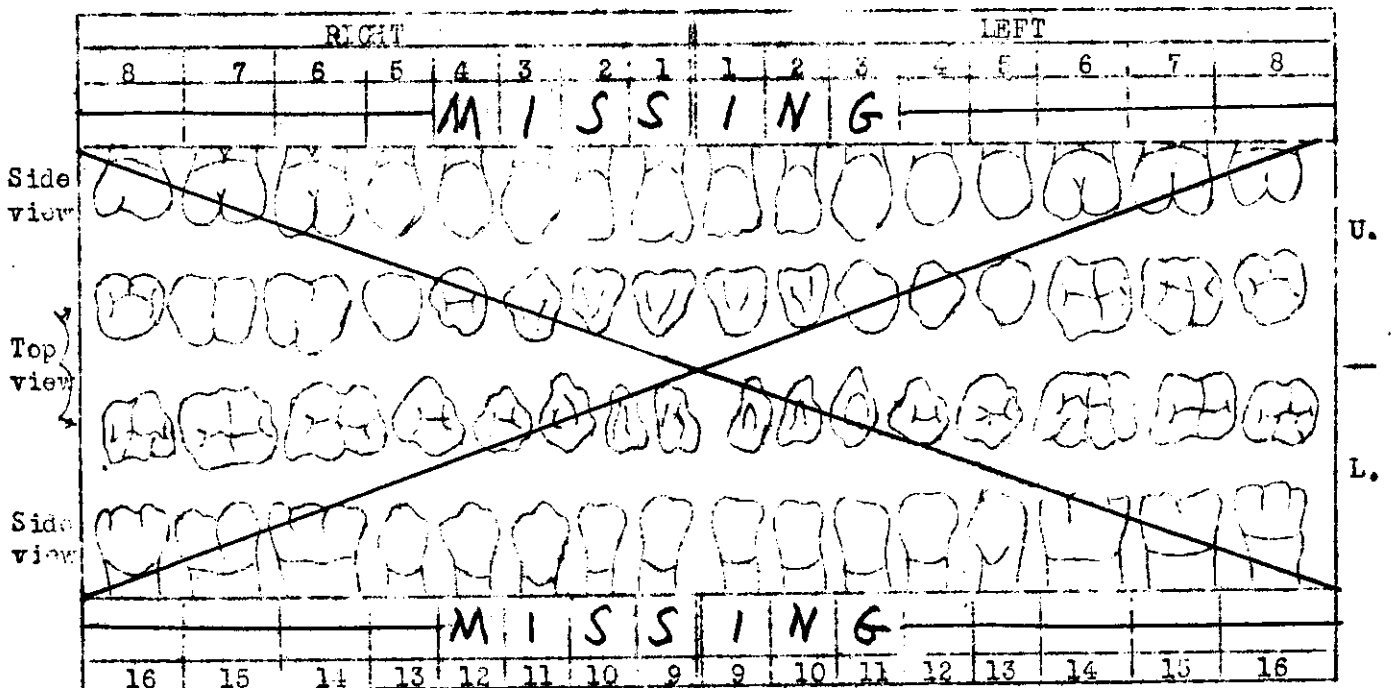
WITTEK MFG CO.	F.B.A. 14
CHICAGO	
USA	

**Pieces of plexiglass**

Body received from Tunis, Tunisia

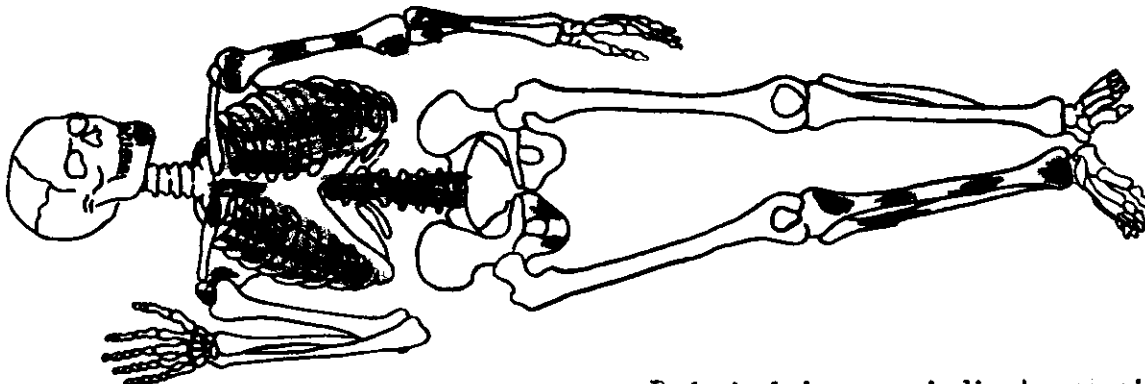
18.

TOOTH CHART



Dentures (Plates):

19. BLACK OUT PARTS OF BODY NOT COVERED



Red shaded areas indicate remains present.

20. **MASS BURIAL CERTIFICATE (IF APPLICABLE)**  
(Wherein segregation in whole or parts is impossible)

I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF \_\_\_\_\_ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS: \_\_\_\_\_ NUMBER

\_\_\_\_\_  
SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

Heavy build.

In the opinion of the undersigned, the representative parts of a human remains graphically represented in par 19 are those of one and the same individual.

Dr. ALEXANDER TARDY  
M.D., D.A. (Anthropology), G.S.D., O.S.D.

I CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS OF DECEASED AND THAT ALL RESULTING INFORMATION HAS BEEN RECORDED TO THE BEST OF MY KNOWLEDGE

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

~~XXXXXXXXXX~~  
BERNARDIA. MCAMIS, Capt. OMC, 9107 TSU-OMC  
AGRS/MZ, APO 794, US Army

SIGNATURE

HEADQUARTERS  
9107 T U - 210  
AMERICAN GRAVE REGISTRATION SERVICE  
MEDITERRANEAN ZONE  
APO 791 US ARMY

CENTRAL IDENTIFICATION POINT

REPORT OF INVESTIGATION

Paragraphs 1-17 and 19-21, Identification Data GIC 1044 and 1044b  
Paragraph 18 - Identification Dental Chart

C.I.P. Case No. \_\_\_\_\_

Date of Investigation 27 Feb. 1950

Unknown American X- 60835

Am. Mil. Cem. Morgue Storage, Florence Italy: Plot \_\_\_\_\_ Row No. \_\_\_\_\_ Grave \_\_\_\_\_

Place of Death \_\_\_\_\_ Date of Death \_\_\_\_\_

Map Reference \_\_\_\_\_ Sheet \_\_\_\_\_ Map of Italy \_\_\_\_\_

Other American Dead Found in Same Area \_\_\_\_\_

Cause of Death \_\_\_\_\_

22. Description of Remains

Skeletal state, badly shattered and charred.

(If the remains have not been decomposed, attach to this form GIC Form 1042,  
completely filled out to physical characteristics.)

HEAD Missing, only one little piece of mandible present

TOOTH CHART Impossible

TRUNK Present area: 2 pieces of R scapula, 3 pieces of sternum, sternal portion

of R clavicle, 2 pieces of pubic bone, fragments of 5 dorsal and 5 lumbar vertebrae,

fragments of ribs.

UPPER EXTREMITIES. (Give measurements of long bones).

R Humerus Missing

L Humerus 4 fragments present

R Radius Missing

L Radius Broken upper third present

R Ulna Missing

L Ulna Piece of olecranon present

Carpals, Metacarpals, Phalanges Missing

LOWER EXTREMITIES. (Give measurements of long bones).

R Femur Missing

L Femur Missing

R Tibia 4 fragments present

L Tibia Missing

R Fibula Piece of shaft present

L Fibula Missing

Calcaneus, Tarsals, Patellae, Metatarsals, Phalanges

Missing

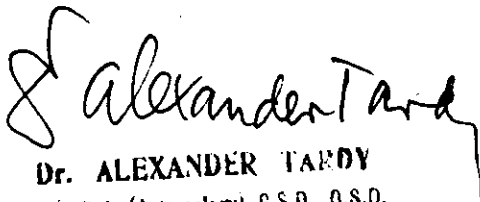


24. AGE ESTIMATED AT Approximately 20 years  
BASED ON Degree of closure of epiphysial lines of R clavicle (sternal portion)  
and the R tibia (lower part).

25. SUMMARY OF FINDINGS:      Tooth chart - Impossible  
                                    Age estimated at - Approximately 20 years  
                                    Height estimation impossible due to the fact,  
                                    that remains are badly shattered and no one ex-  
                                    tremity is measurable.  
                                    Weight estimation impossible however the characte-  
                                    ristics of bones indicate body was heavy build.  
26. RECOMMENDATIONS:         Race estimation - Impossible due to badly shat-  
                                    tered condition of remains.

CAUSE OF DEATH:             The badly shattered and charred condition of this  
                                    remains indicates, that he was killed by plane crash.

PROCESSED BY:

  
Dr. ALEXANDER TARDY  
M.D., D.A. (Antropology), G.S.D., O.S.D.



(Signature of Officer)

LEWIS A MCAMIS  
Captain   QMC  
CIP   Officer

**IDENTIFICATION DATA**

1. REMAINS OF UNKNOWN <b>X-60835</b>				2. DATE OF REPORT <b>27 February 1950</b>	
3. NAME OF CEMETERY  <b>MORQUE STORAGE, FLORENCE, ITALY</b>	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
				DISINTERMENT	REINTERMENT

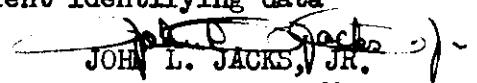
PHYSICAL DESCRIPTION					
8. ESTIMATED WEIGHT <b>Heavy build</b>	9. ESTIMATED HEIGHT <b>Estimation impossible</b>	10. COLOR OF HAIR <b>No hair present</b>		11. RACE <b>Determination impossible</b>	

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

**None**

13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES

**"Non-Identifiable by reason of lack of sufficient identifying data"**

  
**JOHN L. JACKS, JR.**  
 Capt. QMC  
 Graves Records Officer

**None**

14. WAS BODY BURNED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT EXTENT? <b>Partially</b>
---	-------------------------------------

15. WAS BODY MANGLED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT?
--	-----------------

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

**None**

17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

**Scraps of OD shirt and trousers**  
**Five pieces of metal scraps, two with rubber tubes (probably from aeroplanes), with following embossed letter:**

One: 

TO.	MAN-	AUTO.	U.S.A.
N	UAL	RICH	RICH

One: 

WITTEK	MFG	CO.
CHICAGO		
USA		
PAT 22783		

**F. B. - 14**

One: 

WITTEK	MFG	CO.
CHICAGO		
USA		

**F.B.A. 14**

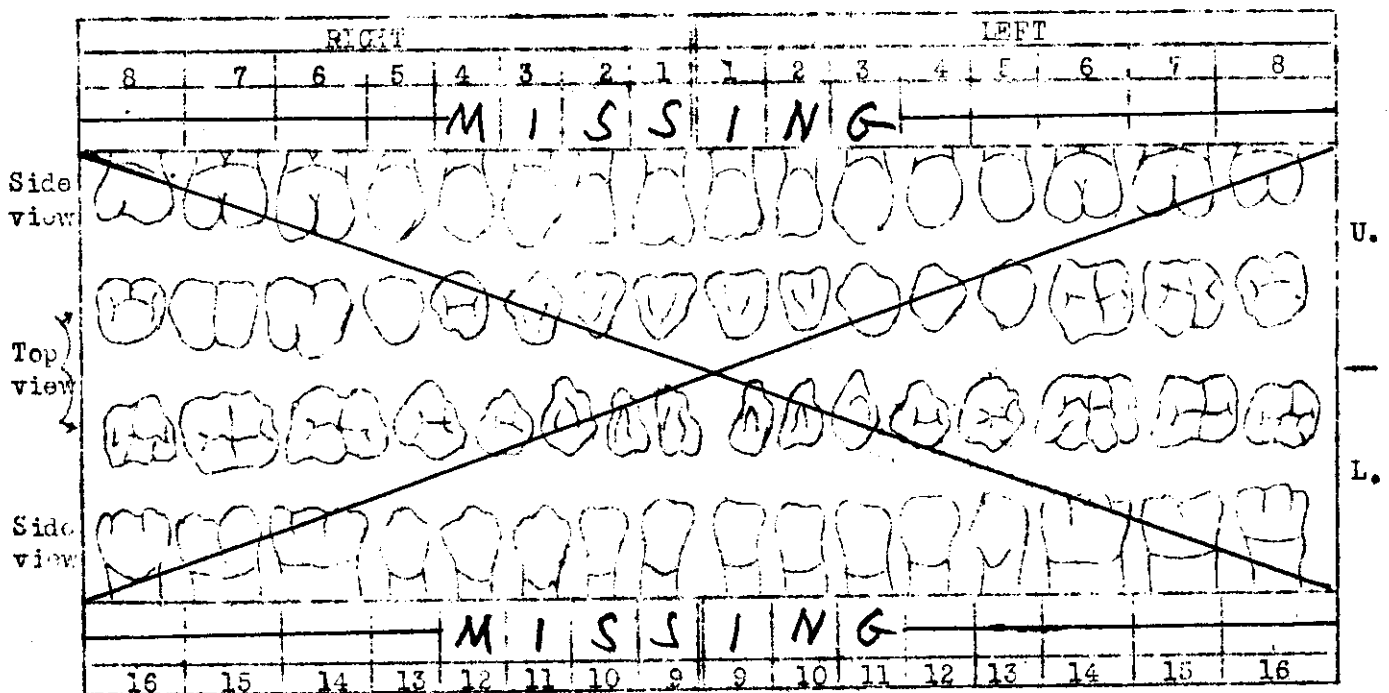
**Pieces of plexiglass**

*rem of dtd 27 march 50*  
*Subj: Non-identifiable because*  
**Received 4 April 50** **QMG**  
**Not identifiable from information presently available** *PLB*

Body received from Tunis, Tunisia

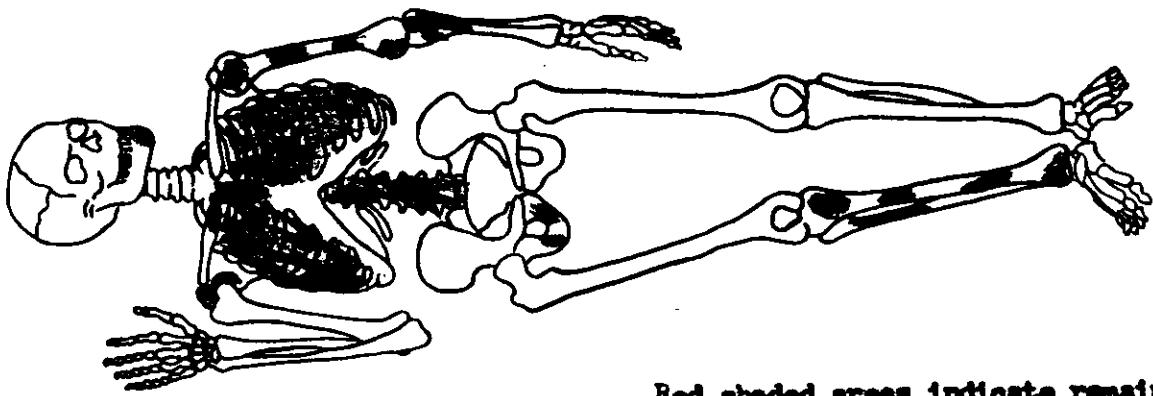
13.

TOOTH CHART



Dentures (Plates):

19. BLACK OUT PARTS OF BODY NOT RECOVERED



Red shaded areas indicate remains present.

20. MASS BURIAL CERTIFICATE (IF APPLICABLE)  
(Wherein segregation in whole or parts is impossible)

I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF \_\_\_\_\_ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS: \_\_\_\_\_ NUMBER

\_\_\_\_\_  
SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

Heavy build.

In the opinion of the undersigned, the representative parts of a human remains graphically represented in par 19 are those of one and the same individual.

*Alexander Tardy*

Dr. ALEXANDER TARDY  
M.D., D.A. (Anatomy), S.L.D., O.S.D.

I CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS OF DECEASED AND THAT ALL RESULTING INFORMATION HAS BEEN RECORDED TO THE BEST OF MY KNOWLEDGE

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION  
~~XXXXXXXXXX~~ MCANIS, Capt. OMC, 9107 TSU-OMC  
ACRS/ME, APO 794, US Army

SIGNATURE

HEADQUARTERS  
9107 TSN - GIC  
AMERICAN GRAVES REGISTRATION SERVICE  
MEDITERRANEAN ZONE  
APO 794 US ARMY

CENTRAL IDENTIFICATION POINT

REPORT OF INVESTIGATION

Paragraphs 1-17 and 19-21, Identification Data GIC 1044 and 1044b  
Paragraph 18 - Identification Dental Chart

C.I.P. Case No. \_\_\_\_\_

Date of Investigation 27 Feb. 1950

Unknown American X- 601K

Am. Mil. Cem. Morgan Storage, Florence, Italy: Plot \_\_\_\_\_ Row No. \_\_\_\_\_ Grave \_\_\_\_\_

Place of Death \_\_\_\_\_ Date of Death \_\_\_\_\_

Map Reference \_\_\_\_\_ Sheet \_\_\_\_\_ Map of Italy \_\_\_\_\_

Other American Dead Found in Same Area \_\_\_\_\_

Cause of Death \_\_\_\_\_

22. Description of Remains

Skeletal state, badly shattered and charred.

(If the remains have not been decomposed, attach to this form GIC Form 1042,  
completely filled out to physical characteristics.)

HEAD

~~Measuring only one little piece of mandible present~~

TOOTH CHART

~~Impressible~~

TRUNK

~~Present are: 2 pieces of 2 scapulae, 3 pieces of sternum, several portions~~

~~of 1 vertebrae, 2 pieces of ribs, fragments of 5 dorsal and 5 lumbar vertebrae,~~

~~fragments of ribs.~~

UPPER EXTREMITIES. (Give measurements of long bones).

R Humerus ~~Measuring~~ 4 fragments present

R Ulna ~~Measuring~~ 1 Ulna Piece of olecranon present

R Radius ~~Measuring~~ R Radius Broken upon third present

Carpels, Metacarpels, Phalanges ~~Measuring~~

LOWER EXTREMITIES. (Give measurements of long bones).

R Femur ~~Measuring~~ 1 Femur ~~Measuring~~

R Tibia & Fragments present ~~Measuring~~ 1 Tibia ~~Measuring~~

R Fibula ~~Measuring~~ 1 Fibula ~~Measuring~~ Pieces of shaft present

Calcanea, Tarsals, Metatarsals, Phalanges ~~Measuring~~

~~Measuring~~

24. AGE ESTIMATED AT Approximately 20 years  
BASED ON Degree of closure of epiphyseal lines of R clavicle (sternal portion)  
and the R tibia (lower part).


25. SUMMARY OF FINDINGS: **Teeth chart - Impossible**  
**Age estimated at - Approximately 20 years**  
**Height estimation impossible due to the fact,**  
**that remains are badly shattered and no one ex-**  
**trmity is measurable.**  
**Weight estimation impossible however the characte-**  
**ristics of bones indicate body was heavy build.**  
26. RECOMMENDATIONS: **Race estimation - Impossible due to badly shat-**  
**tered condition of remains.**

CAUSE OF DEATH:

The badly shattered and charred condition of this remains indicates, that he was killed by plane crash.

PROCESSED BY:

  
Dr. ALEXANDER TARB  
M.D., D.A. (Anthropology), U.S.D., O.S.D.

  
(Signature of Officer)

LEWIS A MEAMS  
Captain OSG  
CIP Officer

RESTRICTED

QMC Form 1042 (Rev. 1 Apr. 1946) (Supersedes GRS Form 1, and Rev. of 1 Apr. 46, which may be used.) REPORT OF INTERMENT (AR 30-1810 and AR 30-1815) DATE OF REPORT 28 February 1950

Imprint Identification Tag If Possible. DO NOT TYPE



Section 1.—IDENTIFICATION. NAME (Last, first, middle initial) UNKNOWN AMERICAN X-60835 SERIAL NO. Unk. GRADE Unk. ORGANIZATION Unk. BRANCH OF SERVICE Unk. RACE Unk. RELIGION Unk. IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY USA PLACE OF DEATH Tunis, Tunisia CAUSE OF DEATH Unk. DATE OF DEATH Unk.

EMERGENCY ADDRESSEE (Name, relationship, and address) None

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)

WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) No COMPLETED TOOTH CHART ON QMC FORM 1045 ATTACHED HERETO [ ] YES [ ] NO

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

MORGUE STORAGE, FLORENCE, ITALY

DATE OF BURIAL HOUR BURIED IN (Shroud, blanket, or name of other) TYPE OF GRAVE MARKER PLOT No. ROW No. GRAVE No.

WAS THIS A REBURIAL? (Yes or no) IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE PLOT No. ROW No. GRAVE No.

TYPE OF RELIGIOUS CEREMONY PERSON CONDUCTING BURIAL RITES IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY

IDENTIFICATION TAG BURIED WITH BODY (Yes or no) IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) RANK SERIAL No. ORGANIZATION GRAVE No.

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

SIGNATURE OF PERSON PREPARING REPORT SIGNATURE OF GRS OFFICER VERIFYING REPORT JOHN L. JACKS, JR., CAPT. QMC., GRO

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



Section 3. 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.

LEFT  
LITTLE FINGER

LEFT  
RING FINGER

LEFT  
MIDDLE FINGER

LEFT  
INDEX FINGER

LEFT  
THUMB

RIGHT  
THUMB

RIGHT  
INDEX FINGER

RIGHT  
MIDDLE FINGER

RIGHT  
RING FINGER

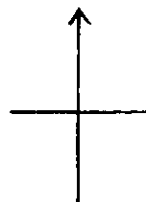
RIGHT  
LITTLE FINGER

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
--------	--------	---------------	---------------	-------------------------------

WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
-----------------------	---------------	--------------------------------

OTHER IDENTIFICATION CLUES

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



REMARKS: Remains recovered from an isolated grave in Tunis, Tunisia

~~IDENTIFICATION SECTION~~