7887 GRAVES DETACHMENT

243 unk St, austral 1-3276

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 OQMO for:

UNKNOWN X - 3276 A St Avold

(POC) ST AVOLD

A Short

4.4s	A 7 3 3 4 3	14 X - 3	26 A	
This should	IDENTIFICA	TION DATA		12 m 2 m 2
1. REMAINS OF UNKNOWN	A The second	181006	2. DATE (_
3. NAME OF CEMETERY	g-corrected to			Jan 49 DATE OF
1). WAME OF CEMETER?	•	7. FEOT 19. ROW		ENT REINTERMENT
		99 6	- //	_
8. ESTIMATED WEIGHT age		DESCRIPTION	11. RACE	
	5'10"	None for		
	OFFICIAL IDENTIFICATION FOUND	WITH REMAINS	<u>-</u>	·
	7	_		
One	10 27			
	. 0 ,	•		
13.GIVE DESCRIPTION OF TATTO	DOS OR SCARS ON BODY AND/OR SU	CH INFORMATION OBTAI	NED FROM OTHER SOL	RCES
		•		
·	TO WHAT EXIENT?			
YES NO	TO WHAT EXTENT?			
YES NO	There cun	hed		
	LED FRACTURES AND BONE MALFOR			
İ	•			
				•
	home found			
	0			
17 FIST EVERY ITEM OF CLOTH	TING FOULDMENT AND BERSONAL C	EFERTS ENING SHOWIN	C THE TYPE COLOR	CITE MADVINCE
SERVICE, ETC. (If launds	TING, EQUIPMENT AND PERSONAL E ry marks are indistinct such n	otation should be ma	de and specimen fo	rwarded through
Cumuneis for examination	n when facilities are not avai	Table in the area)		,
	•			
	•			
·				
	,			
•				
			•	
,		•	•	
				•
·				
	ı	•		
	,			
_		. 1		. /
Fred /		PIN.	a a	22/2
		CAHI	VT CV	1-544.6-19
	OUS EDITIONS OF THIS		G PO - O - 47 - 7548	PAGE 1 OF 3

TOOTH CHART

	This		lewed C+D	Le le	, x	3	276	A G	-/ -	·9-	-				Date		-
		Last Nan	16		First		I	nitial		-/	Gra	de	-		Serial No		 -
· . —		·-	Unit									Org	anization	n	_ 		•
		Place of l	Death			*	Date	of Dea	at h					Cause of I	Death		 .
		Ri	ight											Left			
	8	7	6	5	4	3	2	ıΣ	` 1	2	3	4	5	6	7	8	
	B	_	A mo				Ø	B	P	Ø	P	B		no	,	B	
Side views		Ů	Ť	\bigcirc	\bigcirc	\bigcirc	0			7	\bigcirc	\bigcirc	\bigcirc				,
ТОР	(C)	De					V						8)Œ		UPPER
VIEWS	WC	D	H		36	>(1)		W		W(3		Œ	W.	LOWER
Side Views	Carns		AF		P		M P	A P	A B	D' B		M B	Ω	AR F		A A	
,	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16	,

This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

Signature of Officer or other person who prepared Tooth chart

Verfield by G. R.C. Officer

Fie & / ET FORM 1-22 (29 AUG. 46)

AGL (3) 10-46-80M-6912 -1207

MISSING TEETH All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X"'d out and labeled, thus:	
CROWNED TEETH Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus:	Gold crown 7 Porcelaincrown
BRIDGE WORK Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:	Gold bridge
FILLINGS Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus:	Gold filling, Silver filling
CARIES (CAVITIES). Outline location and size of cavity, shade in thus:	Cavity Decayed To

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

Radia to This	Should be 2000
19. BLACK OUT PARTS OF BODY NOT	
28 27	68 6
m 31 64	, n
I modelle formation)
A TONOR OF THE PARTY OF THE PAR	O. V.
	7
	No.
20. MASS BURIAL CERTIFI (Wherein segregation in who	CATE (IF APPLICABLE) le or parts la impossible)
I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF OF THE FOLLOWING ANATOMICAL PARTS:	DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE
OF THE FULLOWING ANATOMICAL PARTS:	·
·	
21. REMARKS AND ADDITIONAL INFORMATION	SIGNATURE OF MEDICAL OFFICER
•	
	•
·	
	·
	·
! CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS (RECORDED TO THE BEST OF MY KNOWLEDGE	OF DECEASED AND THAT ALL RESULTING INFORMATION HAS BEEN
TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION	SIGNATURE
	\times 1
Frel 1	

G. R.& E. DIV.

--OFFICE OF THE CHIEF QUARTERMASTER
HO. COM. ZONE, ETOUSA

TOOTH CHART st Avoid Gen 147-6-20

10 January 1946

• .	Unid	entifi	ed X-7	276	26)	Avol	i) 🕶				U	nk		U	nk		
•	-	Last l	iame	,	Fire 9	oth I	nv.	lni	tial		F	lank		• •	Serial No.		
	Borg,	Gerraeri Place	Unit y (1111 of Death		•	£	igb. Ippro		larch	194	5	O	rganizat		- bound Death	la	-
•		F	light	. ,	٠.			•			:			Left	•	•	
•	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
•		Silver			<	M	15	S /	ng	A	7+7	e	+	Dec	·+/	7	
Side view	s	0	Ŏ	O			A			8			C				
TOP	, (3)				Θ	\bigcirc	W	\ <u>\</u>) (J	0) (Œ	M	UPER
VIEWS ()	D)E)(-	?(v		W		W(-)(9		Œ		LOWER
Side View				\bigcirc			Y	$ \sqrt{1 - 1} $	A	D	Ω	Ω	Ω				
			Silver						M.A	7. D				Silver			
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16	

This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

Signature of Officer or other person who prepared Tooth chart

let it. ON

Ozenandiag. s. Officer

CHANDS J. DAVIS 264 Jan. Sed. COSMA CM 49-Co.

GRAVES REGISTRATION FORM Nº 1-A

MISSING TEETH... All teeth missing through Tooth missing previous extraction (not those fractured or displaced by recent wounds) should be "X"'d out and labeled, thus: CROWNED TEETH... Block in solid the crown of Gold crown ; tooth (label gold, porcelain, Silver or gold and porcelain), thus : BRIDGE WORK... Block in solid the crown of Gold bridge tooth (label gold bridge, gold and porcelain bridge), thus: FILLINGS. Draw filling on tooth as accurately Gold filling Silver filling as possible (block in and label gold, silver, cement); thus: Outline location and size Cavity Decayed CARIES (CAVITIES) of cavity, shade in thus:

Paris Comment

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

Only Part I should be completed in identification tegs are available

BOTH Part I & II should be completely filled out if identification tags are

are not available.

If information is unavailable, so indicate.

PART I (Positive Identification)

		(Si Aveld)) *	Unita	90th Divi
) (Rank)	(ASN)	(Organization)
			ached to remai	ns, how many, and wher
attached	He identifi	lostica Tago		
Give exact	`location fr	om which disint	erred, furnish	ing coordinates and ma
series use	d Berg, Ger	manal (AP Comm);	seers N. MONO	9 Shoot 6-1 Normalyoha
	Mord de Giu		OC LOTON OF TOO	LATED GRAVE TYING LOCA
			JUANTON OF 180	THIED GUMAN LITTER FORS
	TH PERMANENT	LANDMARKS. (if buried in a	n ongoniand on	matamt)
	Unburied i	Remains		
Approximat Unbu	e or establi	shed_date_of_bu	rial (give bas	is for date establishe
Approximat	e or establi	shed date of de	ath (state, whi	ch & give basis for de
selected)_	Approximate	tobe to Hareh	1999	
		i from Surgemeli		
	which graves	were marked an	d all informat	ion chat was on the
marker	A MILESTO	body wasfound	ATME OF PURE E	LANGUA /
7 4 -4 \		Oarra de la companya	·	and an included and and
TIBE DOTEO	nal elicots_	iouna in posses	sion of civili	ans or unauthorized mi vidual concerned
tary person	mier, Turnis	ning name-and_a	dress of indi	Arman Coucerned
7777				
· · · · · · · · · · · · · · · · · · ·		 	<u> </u>	
and inform caretaker.	ation each for those responding	urnished (conta	ct local Mayor al and any oth	rning death or burial, priest, cometery er possessing importar
				
				•
				•
	/	PART		
	(Doubtf)	ul or Undetermi	nod Identifi c a	tion)
				_
M433 :		m arailahi	andina same	anla ASM as assessed
	y information			ank, ASN, or organiza-
	y information	n available reg ecords and offic		ank, ASN, or organiza-
	y information	ecords and offi	ce) (mano	
	y information	ecords and offi		
tion (Check	y information k cemetery re (E)	ecords and office st. Weight)	itesing (desca	(Color of Hair)
(Est. 1	y information k cometery relation (E. Hei'ght) (E. iption of fac	ecords and office the st. Weight)	(Color of Eyes) (Color of Hair)
(Est. 1) Give doscr	y information k cometery relation (E)	st. Weight) cial features as	(Color of Eyes	(Color of Hair)
(Est.)	y information k cometery relation (E)	ecords and office st. Weight)	(Color of Eyes	(Color of Hair)
(Est. 1) Give doscr	y information k cometery relation (E)	st. Weight) cial features as	(Color of Eyes	(Color of Hair)

	Body Descriposed, Farts of shall missing, and feet alcoing.
·	
Give that	probable cause of death, type & location of wounds (is there evidence body was burned?)
descr etc. value brand	minute description of all offects, clothing & shoes, indicating clothings & sizes, as well as shoe size. List each item of clothing, with iption of any unusual cuts, design markings, peckets, colors, patched also list, with detailed descriptions, all effects without intrinsic, such as gum, food, soap, papers, letters, tobacco, etc., giving a when applicable: 2:0.0) This
	teld Jacket
W.C	COLOR STANDOR
	ogginge Loves: - Loather Falm
94	B Bols
84	Bir. dagket:
Give	description of our vobials formation the
with	description of any vehicle found in the area that could be connected the death of the deceased None
	Rone Rone Rone
• - •	(Typo) (WD Serial No.) (Organization) (Serial No. & Type
Citro	of each gun)
Give	exact location of remains in vehicle before removal
Give	exact location of remains in vehicle hafore removal
Give	exact location of remains in vehicle before removal
If bu	ried in a coffin; give description and markings
If bu	ried in a coffin; give description and markings names of all other deceased persons buried in the vicinity. Also give able information concerning the cause & place of death of each that assist in identification of these remains.
If bu	ried in a coffin; give description and markings names of all other deceased persons buried in the vicinity. Also give able information concerning the cause & place of death of each that asist in identification of those remains The sort deceased identification of those remains
If bu	ried in a coffin; give description and markings names of all other deceased persons buried in the vicinity. Also give able information concerning the cause & place of death of each that assist in identification of these remains.
If bu	ried in a coffin; give description and markings names of all other deceased persons buried in the vicinity. Also give able information concerning the cause & place of death of each that asist in identification of those remains The sort deceased identification of those remains
If bu	ried in a coffin; give description and markings names of all other deceased persons buried in the vicinity. Also give able information concerning the cause & place of death of each that asist in identification of those remains The sort deceased identification of those remains
If bu	ried in a coffin; give description and markings names of all other deceased persons buried in the vicinity. Also give able information concerning the cause & place of death of each that asist in identification of those remains The sort deceased identification of those remains
If bu	ried in a coffin; give description and markings names of all other deceased persons buried in the vicinity. Also give able information concerning the cause & place of death of each that asist in identification of those remains The sort deceased identification of those remains
If bu List avail may a	names of all other deceased persons buried in the vicinity. Also giable information concerning the cause & place of death of each that saist in identification of those remains on sore deceased identification. ST. Nolp. Q -6-(4b - 315 Galle Bar - 24Nou.44-
If bu List avail may a	ried in a coffin; give description and markings mames of all other deceased persons buried in the vicinity. Also grable information concerning the cause & piece of death of each that spice in identification of those remains the mass vicinity. STAVOLD RE-6-146-315 Entale Har 24Nov.44- pertinent information which would aid in establishing identity addividual in Charge of Disinterment) (Rank) (ASN) (Organization)
If bu	ried in a coffin; give description and markings mames of all other deceased persons buried in the vicinity. Also giable information concerning the cause & place of death of each that assist in identification of those remains the cause deceased identification. Stand in the wave vicinity. ST. No.Co. 22 -6-(46 - 315 Enc. 2 c. 18 - 24Nov.44

GRSC USFET Form No. 11. 9-7-45

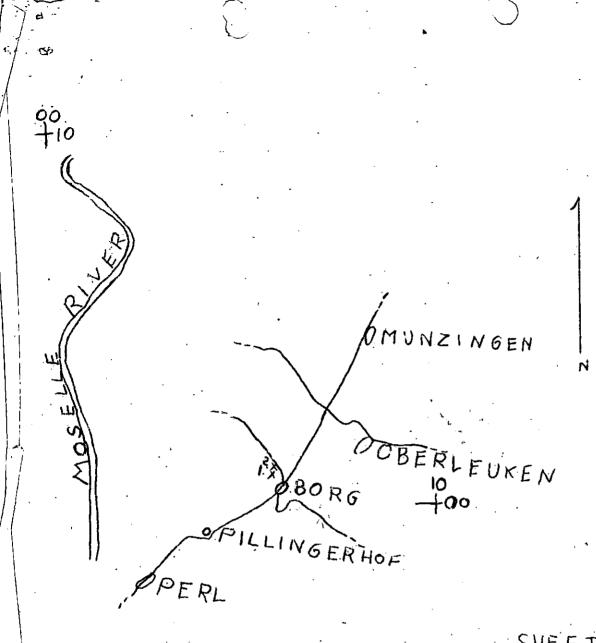
	•	:			
	•				
TUMKNONH X-	3276 10.	A-m	. 1.	10-	.2
CELETERY		-	- Cale		

Arrived at cemetery_		From	Strombers A	ALTONIA WY	•
		(date)	(c511	ecting point)	
Place of death Rors	Gormany,	(NI OFFI)			
•	(name)	- • .	(coordinates	and landmarks)	
, , , , , , , , , , , , , , , , , , , ,					
Remains recovered by	Joe Konie	10 50 58 TH.	B . Oo.		
			rganization)	•	
Evacuated to cemeter	y by	SOM OR . Co.			
	· **		rganization)		
Is load list attached		Are names of d	eceased found	in same area at	this
	(yes-no)			* *	•
Unknown starred 50		rcumstances de	scribed which	may indicate or	gan≃
(yes-r				. • "	•
ization of the dece x		_If only part	of a body was	received, was a	3
	(yes-no)				
careful search, made i	îor other p	parts of Tak nor		• Warner	as as a second
		•	(yes-no.)		
If remains come from	vehicle, r	olane, etc: 🍱	es Not Apply	. ,	
		_(t;	ype of vehicle	or plane, nickr	name,
	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·		
serial number	, organiza	ation or symbol	ls)		
	,				,
Crew list					
(na	unes of otr	ier deceased ar	nd positions i	n which found).	
-,-			, e , , , me		
		A particular of the second of		a section	
				· · · · · · · · · · · · · · · · · · ·	
If a tank, which hato	hes were f	ree and availa	able for escap	e use	
٠ د .			, ,		
If organization 如此	lich vehicl	.e or .plane was	s assigned or :	if names of all	other
deceased are not know	m, give de	stailed informa	tion concerni	ng vehicle or pl	ane
	<u> </u>				
parte of markings or	symbols)	(b no ned)	(pierced to a	shell fire - whe	ere)
***			e		
found in town, field	l, by road,	etc.)	(damaged h	mine explosion).	
<u> </u>	•				
names of men who esc	aped) (de	scription of c	ther vehicles	or planes in sa	me are
				•	
Detailed description	of parsona				
•	• 1-	(Indi	cate exact poo	cket or part of	body.
		3 . 200		·	
where found	DEL BITTOR	•			- -
	·		,•	•	
• • • • • • • • • • • • • • • • • • • •	,	* 1			
	· · · · · · · · · · · · · · · · · · ·	100 to			
			N. Comments		
			•		

Description of clothing body measurements)	g and equipme	nt:(If clo	thes do n	ot fit, obt	ain sizes from
	Clothing			·	unusual markings
Item .	Markings	Sizes	Color	wear, te	ar, repairs, etc.
Headgear (type)				.•	
Raincoat					
Overcoat			,	•	
Jacket, Field	None	Dek		Esne	
Jacket Domoat	•	e e e	4		
Mackinaw					
Sweatens :	None _	galle.	3 .	Maria	
Jacket, HBT	Mona	Mane	HAR	L.	
Shirt, Wool OD	· ····None	39-14	ኝ <u>ኛ</u> ው O D.	Ko me	
Undershirt, Wool		L a	77		
Undershirt, Cotton		A	, ,		
Trousers, HB			,		1. N. Z. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
Trousers, Wool OD	None	Unit	00.	Sens	A STATE OF THE STA
Belt, Web	None	36		Heno	
Drawers, Wool			1		
Drawers, Cotton dere					
Leggings	None None	Nette		Kers	July College
Wool Socks Cotton	,			(note	unisual lacking)
Shoes	(. · ·)	E CONTRACTOR OF THE			70.00
Overshoes				,	
Web 🚶 : Equipment (type) : 😘 :		•	r*n		
(other item)	*****	,	Syr on the		· v
(other item)		·	· ·		al en <u>gament an</u> la la casa a constancia
*If body is nude, sizes Chevrons or	•			Thorddor E	Luling the monates
Description of Remains:					
Age Height (ft-i	Weight	Descri	ntion of	Wounds	- 34
Seed. Mineral	/	±100 j		•	

Banadages or dressir		Scars tak		
	<u>) </u>	(length	th,1 (tion)	£-1. *.
Tatto	The There to	engraped -	,	
- 1		ion - illustrate	ca geparage)	
Outstanding moles, warts				
The second second		(yes-no) (desci	ription locati	ion)
Sumburn for tan, other th	nan hands and fac	Mach Decomposes		
lobacco stain on fingers	or teeth	Decomposed.		*1,
Complexion Florin Direct	desi (desi	ghate where, xte	Build Miseum	
(light, med, dar	rk, clear, pimples,	pocks,freckles)	(large,fat	t,thin)
See		and he will be	الله الله الله الله الله الله الله الله	。,可以是各种位
Hair Brown 2 Costs				
(color, length, quanti		raight, whorle; or	definite part	ng.)
		<i></i>		and the grade of the second
baldness, widows peak, dis	stinctive cutting	or other charact	teristics)	
Sideburns Long.	Mustacho	insing	3eard or goatos	Hissing
(color, setting)	shape (c	olor, sizo, shape		(longth)
heavy, light, color, extent				
Eyos Page Post	Eyobrows	entrie.		:
(color, setting, sh	inpe (co	lor bushiness ox	tend across nos	se)
Carlot Manual Lab	Ears ***	the state of the s		•
Nosc (size, shape, straight	Ears Form	sot close to or !	2 4 Past Massa (*)	· · · · · · · · · · · · · · · · · · ·
				Eruchd
Forchead Ford Orushi			Lips	3,00
(high, wide, wrink		go, modium, small)	(small,ia	rge,full)
Feeth_	there exist can	17		
(white, size, unever	cas, spacing, no	ticoable crowns,	fillings, extr	actions)
chin Reed Grueké Legesth	11 to determin	Charleho	nos Taposibil t	o dotermi
(prominent, recoding	, pointed, dimpl	o, doublo)	(high, nor	mal)
Jaw Beed crushe	7 , 5		The Control of the Co	•
largo; small, normal	Circumforence o	r hoad in inclos	hat bar	nd)
Nock Becomposed		rynx Decompose	21100.	
(size, long, short,	normal, wrinkled	· · · · · · · · · · · · · · · · · · ·	normal)	(broad)
Astraight, small, rounded)	11.1110	**	and I amount it w	r of
or arknowner, Lonnaga)		cular, color, exto		OI.
Hair, vaccination scar, s		ilub		used')
	100 01 W11000/	frameo, omerra	, Morning Ottomo	wow y
Motiona National Area		,		· · · · · · · · · · · · · · · · · · ·
Noticeable, marks on fin	gors indicating	that rings word w	orn)	\
•				Y

fingers Meah. Decembered	
(short, thick, lon	ig, slender; size of knuckles)(missing fingers or joints)
φ	(unusual characteristics of fingernails),
Dhes t	Flesh Decomposed
	plor, quanity & extent of hair, large, small, normal)
	V 2076
FCIZ-Passes	Weist Decomposed X-3276-
(quantity and extent!	of hair) (size at navel, appendenting, amount a con
Circumsized D	scomp Pubic hair Missingerniaplasty Flesh Decomposed
	os-no) (color) (yes-no) (location)
Logs Flesh Decomposed	
(inscam)(muscular + kn	nock-knood, bowed, normal)(quantity, color, & extent of
Foot Masing	callousos, flat), (slender, straight, crooked overlap)
lair, (Sizo, Ourne,	Collings of Caronder, Surviging, Oroccu Overlapy
Evidence of healod fractu	(noso, arms, legs, otc)
	(noso, hrms, legs, oto)
Black out parts of body n	not
coccived in compatory	
(Just Mary Mary)	
With the state of	
Lea parta Mira	
The street was	The state of the s
	The second secon
Invo photographs boon and	lo and attached Ho If not, explain To Equipment.
inen etaanamakaka kanduni	(yes-no)
lave fingerprints been pl	(VOE-DO)
las tooth chart boon prop	pared? If not, explain
	(yos-no)
Romarks	The state of the s
	Tomas Va. Parsons
	2nd LT. Inf. 0-151916
	5046-5058 QN. GR Co.



ROBERT W BOLLIST

SHEET U-1 NEUNKIRCHEN SCALE Y100,000 6565 4416 NORD DE GUERRE GRID

-3276A (States) 293 und the

JULY LIFE OF ALLY MESS PO

UMCLICATIO

CO 7387 CPRIM DET LIDER DELOTED

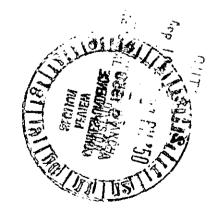
DITTLE

wer 48401

PROMI CHEM PAPA I UTION 23 PMB 50 PMIN THE 314.6 DESIGN DELICAL LIED. BLOW MED ETPLICORSING WITH MEAN 3276A ST AVOLD

Lee: cam Clements

APT. 50



CAVS

CAPT, CIO, DIN DIV

CALT CAPP DIES INT 72947 293 X-3276A (ST AVOLD)





293 unk France X-3276A (Stievalo

OQIO DEPI OF AMON WASH DO

UNCLASSIFIED

CO 7387 CHRIST DES LIEGE DELGINE

wei 48401

EROM GRAND PARA I VELEN 23 PRB 50 FILE REE 314.6 SUMJECT DURAL INFO. REST IND EEPROCESSING REPTS KRAY 3216A ST AVOLD

Lee:cam

CERT CAPT BEHEN EXT 72947 293 X-3276A (ST AVOLD)

APR 50



D. A. CHILDE CAPT, OMC, LIM DIV GENAVES

werdsyck

~ Z & D () D ()

2000 T 2000

Teercan 7 Tlunents

17:17:38 840 E.T.

• · "Var · ·

, · . •

293 Work France + - 3276-A- (St. Corol

HEADQUARTERS 7887 GRAVES REGISTRATION DETACHMENT REGISTRATION DIVISION APO 757 (Liege) US ARMY

GRRE 200.2

18 April 1950

SUBJECT:

Identification Check List

Transmittal Letter # 4842

TO:

The Quartermaster General

Washington 25, D. C.

ATTENTION: Memorial Division

Forwarded herewith for your files is one (1) copy of identification check list, QMC Form 1044, for the following deceased:

Unknown No.	Cemetery	Plot	Row	Grave
X-3276-A	St Avold	QQ	6	147

FOR THE COMMANDING OFFICER:

1 Incl

QMC Form 1044

CATLORD E. LUTZ

1st Lt, QMC

Registration Division



to the second of
v

HEADQUARTERS AMERICAN GRAVES REGISTRATION COMMAND

EUROPEAN AREA

1 St. Azo APO 58 US ARMY 293-Und-France X-3276A

Unidentifiable Remains SUBJECT:

TO:

The Quartermaster General

Memorial Division Washington 25, D. C.

1. The records pertaining to Unknown X-3276 A , Plo	ot QQ ,
Row 6 , Grave 147 , USMC St. Avold, France	_have been
reviewed and it is the opinion of this office that insufficien	nt evidence
is available to establish the identity of this deceased, and	that these
remains should be classified as unidentifiable.	

2. Report of Reprocessing was forwarded to your office by letter of transmittal No. 2703 , dated___ further information is available.

FOR THE COLMANDING GENERAL:

Remarks: Tooth charts of remains have been compared with available dental records for all casualties in the same map sheet with negative results. Efforts to associate subject remains with unresolved casualty or casualties by all other means have proven negative.

Case reviewed by undersigned Members of the Board of Review:

(s)Col. H.F. Henry, 0-12589 QMC

(s)Lt. Col. E.D. Mulvanity, 0-359598 QMC

(s)1/Lt. Gaylord E. Lutz, 0-1595665 QMC

Received 17 OCT 1949 Not identifiable from information presently available

presently

IDENTIFICATION BRANCH

HEADOUARTERS AMERICAN GRAVES REGISTRATION COMMAND EUROPEAN AREA APO 58 US ARMY

RRE 293

24 August 1949 (Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS.

		1. The rec	cords pent	aining	g to Unknov	m X - 3276	SA, Plot	<u> </u>
	Row6	, Grave 1/	7_, UE MC	ST.	AVOLD, Fran	nce		
	have been re	eviewed and i	it is the	opinio	on of this	Office tha	t sufficie	nt
	evidence is	not availabl	le at the	presei	nt time to	establish	the identi	ty ·
	of the dece	ased concerne	ed. The re	mains	concerned	should be	classified	as
	unidentifia	ble at the pr	resent tim	ie.				
		2. Report	of Reproc	essin	g of remain	us was forw	erded to y	our '
	Office by Tr	ransmittal I	Letter No.	27	03 , da	ted <u>18-3</u> -	-48	
	negative res	ults. Effor	for all o	ociate	subject r	emains wit	h unresolve	ad '
Not identif	negative res casualty or 17 OCT 1949 liable from	ults. Effor casualties b	ts to asso	ociate	subject r	emains with oven negat:	h unresolve	ad '
-	negative res casualty or 17 OCT 1949 liable from	ults. Effor casualties b	ets to asso by all other	o ciate er mea lersign	subject rans have promed Members	emains with over negat: J. LAC	h unresclve ive. ORTIGLIA	iew:
Not identifinformation	negative rescasualty or 17 OCT 1949 fiable from presently	casualties b	rts to asso by all other	o ciate er mea lersign	ns have prometed Members	emains with oven negation of the Bold of t	n unrescived ive. ORTIGLIA Deard of Rev Lua TY, 0-3595	iew:

Inc) #26

Parker

	CRU
USMC ST. AVOLD FRANCE BU	ried at deceased Left
Plot D, Row 9, 'Grave 9	· · · · · · · · · · · · · · · · · · ·
Date reburied: 21 Dec 48 Dis	INTERMENT DIRECTIVE
Monale 1	Achell P.B. Luneton
SECTION A - V DONALD K TA	OK ITT DIRECTIVE NUMBER DATE QMC 3574 00000 11.5 08 48
NAME AND BURIAL LOCATION OF DECEASED	QMO 3574 00000 15 08 48.
	SERIAL NUMBER GRADE ARM RACE RELIGION
UNKNOWN	A-003276 0 6
CEMETERY	PLOT ROW GRAVE DISPOSITION OF REMAINS
ST AVOLD FRANCE	00 6 147 3503 80
V SECTION B — CON	CODE DIST. CTR.
NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
ST. AVOLD, FRANCE	(BY ADMINISTRATIVE DECISION)
ST. AVOLD, TRANCE	(B) ADMINIONALIZE BESTOTONY
SECTION C — DISINTE NAME SERIAL NUMBER	RMENT AND IDENTIFICATION GRADE DATE OF DEATH DATE DISTINTERRED
SERIAL NUMBER	DATE OF DEATH
IDENTIFICATION TAG ON ORGANIZATION	RELIGION IDENTIFICATION VERIFIED BY
☐ REMAINS UNKNOWN ☐ MARKER	NAME AND TITLE
	ON OF REMAINS FOR SHIPMENT
NATURE OF BURIAL	CONDITION OF REMAINS
OTHER MEANS OF IDENTIFICATION	
	TING KON GILL
Scalar Upul	
MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form	1194a for major discrepancies.)
Plates and Stencil made to read "U	NKNOWN X - 003276 A. "
REMAINS PREPARED AND PLACED IN CASKET	
DATE BY	
CASKET SEÁLED BY	EMBALMER (Signature) M= Whoster
Millard H. Mc Whorter, Embalmer	Millard H. Mc Whorter, Embalmer
CASKET BOXED AND MARKED	SHERMON ADDRESS WIRRIED AV All markings, tags &
13 Oct 48 Millard H. Mc Whorter	Plates verified by: Tafaclory
Zalicki Ditti	re conducted and accomplished under my immediate supervision
and that the report above is correct.	hel Then
	of T. Ruiz 1st Lt FA, 7857 AGRC Zone 3 Hq.
REMARKS AND SPECIAL INSTRUCTIONS	SIGNATURE OF AGRS INSPECTOR COLLEGE SECTION OF AGREE STATE OF AGRE
THE VIEW OF EATHER MOTING HOUSE	FILE
PREVIOUSLY DISPATCHED - UNK	NOUNL V 2076 RECORDS ANNOTATED
	DATE DATE
•	NAME - Photos
· · · · · · · · · · · · · · · · · · ·	R & R BR.

RECORD OF CUSTODIAL TRANSFER

<u> </u>		HIPPED	Man of the court	
ROM		10	TOTAL TOTAL	
		<u> </u>	n entre	
ND OF CONVEYANCE		NAME OF CONVOYER	9 9 P	
SNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER		DATE
	,		nie Worth with	
	2. SI	HIPPED		1
OM		ТО	** ** **	,
ND OF CONVEYANCE		NAME OF CONVOYER		
GNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER		DATE
SNATURE OF SHIPPER	1.	SOMMON OF RECEIVER	en all or gran	
	3. SH	IIPPED		
OM		10		
ND OF CONVEYANCE		NAME OF CONVOYER	·	
्री केटव ्यार् एवं यावर्त्य या प्रवास	· · · · · · · · · · · · · · · · · · ·	J.J+	** ti	- ,
GNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER		DATE
	4. SH	 IPPED		
OM		10	· · · · · · · · · · · · · · · · · · ·	
ND OF CONVEYANCE		NAME OF CONVOYER		
SNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER		DATE
•		-		
	5. SH	IPPED		<u>_i</u> _
DM		10		
ID OF CONVEYANCE		NAME OF CONVOYER		
SNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER		DATE
I * MAR R * LINER	6. SH	IPPED' - CONTRACTOR	1 1127 TOOL 13W	
DM .		TO .		
D OF CONVEYANCE		NAME OF CONVOYER		
NATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	A Company	DATE (
	7. SHI	IPPED		<u> </u>
OM .		10		
D OF CONVEYANCE		NAME OF CONVOYER		
•		1 •		
NATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER		DATE

$1. M_{\odot}$				
	, r .		•	
i.	DICIMITA	MENT DIRECTIVE	,	
Section A	i i i i i i i i i i i i i i i i i i i	Directive		Date
Namo d. durial modation	3574	221000210	, it compos	Baro
of deceased	J) 14	Day	Month	Year
NAJU	SECLES NA BER			Date of death
		!		1
UNKNOWN	X-3276-A	· ·	•	Day Month
JAMMIAM .	Market and the second of the second s	 Di en	osition o	
T. AVOLD			oll-Doubt	
1. AVCID	, 			
PLOT ROT. GRAVE	Country		st. Pt.	
2Q 6 147	France	Cause o	f Death	
2Q 6 147	1 2 00100			
	Section B - Co	onsignee and N	ext of Ki	n ,
Name and adaress of Con				of Next of Kin.
•	т			,
			717 1. 0.	
WALL	. seution C - Di. . Serial Musber		of Death	Date Disinter
	+ DOT TWIT PHOTOGRA	Hair. Dane	of Death	
unkhom x -3276 - A	i			28 July 48
Identification Tag on demains	Organizati	n deligi	Charl	ification verifi les W. Fredricks
Identification Tag on	Organizati	on Religi		ification verifi les W. Fredricks mer
Identification Tag on demains	Organizati	n religi	Charl	ification verifi les W. Fredricks
Identification Tag on demains x Larker GRS	Section D - Prepa	ration of dema	Charl Embal	ification verifi les W. Fredricks mer Name & Title hipment
Identification Tag on Memains x Larker GRS Nature of Burial	Section D - Prepa	ration of dema nes fractured	Charl Embal ins for S Jondit	ification verifi les W. Fredricks mer Name & Title
Identification Tag on demains x Larker GRS	Section D - Prepa	ration of dema	Charl Embal ins for S Jondit	ification verifi les W. Fredricks mer Name & Title hipment
Identification Tag on clemains x larker GRS Nature of Burial Mattress/cover	Section D - Prepa All Major bo and/or missi	ration of dema nes fractured	Charl Embal ins for S Jondit	ification verifi les W. Fredricks mer Name & Title hipment
Identification Tag on Memains x Larker GRS Nature of Burial	Section D - Prepa All Major bo and/or missi	ration of dema nes fractured	Charl Embal ins for S Jondit	ification verifi les W. Fredricks mer Name & Title hipment
Identification Tag on demains x larker GTS Nature of Burial Lattress/cover Other Means of Identification Discrepancies	Section D - Prepa All Major bo and/or missi ication	ration of dema nes fractured ng. Skeleton i	Charl Embal ins for S Jondit	ification verifi les W. Fredricks mer Name & Title hipment
Identification Tag on demains x larker GRS Nature of Burial Mattress/cover Other Means of Identification NOPE Minor Discrepancies Fo Report of Purial	Section D - Prepa All Major bo and/or missi icution found with remai	ration of dema nes fractured .ng. Skeleton i	Charl Embal ins for S Jondit	ification verifi les W. Fredricks mer Name & Title hipment
Identification Tag on demains x larker GTS Nature of Burial Lattress/cover Other Means of Identification Discrepancies	Section D - Prepa All Major bo and/or missi icution found with remai	ration of dema nes fractured .ng. Skeleton i	Charl Embal ins for S Jondit	ification verifi les W. Fredricks mer Name & Title hipment
Identification Tag on demains x Larker GRS Nature of Burial Mattress/cover Other Means of Identification Discrepancies Wo Report of Purial Remains prepared and place.	Section D - Prepa All Major bo and/or missi icution found with remai	ration of demanders fractured one. Skeleton in the skeleton in	Cherl Embel ins for S Jondit form.	ification verifi les W. Fredricks mer Name & Title hipment ion of Remains
Identification Tag on demains x larker GRS Nature of Burial Mattress/cover Other Means of Identification NOPE Minor Discrepancies Fo Report of Purial	Section D - Prepa All Major bo and/or missi icution found with remai	ration of demanders fractured one. Skeleton in the skeleton in	Cherl Embel ins for S Condit form.	ification verifi les W. Fredricks mer Name & Title hipment ion of Remains
Identification Tag on themains x Larker GRS Nature of Burial Mattress/cover Other Means of Identification Discrepancies Fo Report of Purial Remains prepared and plate 4 Aug 48	Section D - Prepa All Major bo and/or missi icution found with remai	nes fractured ng. Skeleton i	Cherl Embel ins for S Condit form.	ification verifi les W. Fredricks mer Name & Title hipment ion of Remains
Identification Tag on demains x larker GRS Nature of Burial Mattress/cover Other Means of Identification NONE Minor Discrepancies Vo Report of Purial demains prepared and plate 4 Aug 48 Jasket Sealed by	Section D - Prepa All Major bo and/or missi Leathion found with remai	nation of demanes fractured ones fractured ones fractured ones for the second of the second ones for the s	Cherl Embel ins for S Jondit form.	ification verifices W. Fredricks Mer Name & Title hipment ion of Remains
Identification Tag on demains x larker GRS Nature of Burial Mattress/cover Other Means of Identification NONE Minor Discrepancies Vo Report of Purial demains prepared and plate 4 Aug 48 Jasket Sealed by	Section D - Prepa All Major bo and/or missi icution found with remai	nation of demanes fractured ones fractured ones fractured ones for the second of the second ones for the s	Cherl Embel ins for S Jondit form.	ification verifi les W. Fredricks mer Name & Title hipment ion of Remains
Identification Tag on demains x Larker GRS Nature of Burial Mattress/cover Other Means of Identification Properties of Purial Memains prepared and plate 4 Aug 48 Casket Sealed by	All Major bo and/or missi ication found with remainded in transfer	nation of demanes fractured ones fractured ones fractured ones for the second of the second ones for the s	Cherl Embel ins for S Jondit form.	ification verifices W. Fredricks Mer Name & Title hipment ion of Remains
Identification Tag on demains x Larker GRS Nature of Burial Mattress/cover Other Means of Identification Properties of Purial Memains prepared and purial Memains prepared and purial Date 4 Aug 48 Casket Sealed by Casket Bate By	All Major bo and/or missi ication found with remainded in transfer	nes fractured nes fractured ng. Skeleton i Box By Char Rabalmer (Cherl Embel ins for S Jondit form. les V. Fre oignature s, tags a	ification verifi les W. Fredricks mer Name & Title hipment ion of Remains edricks, Embalmen
Identification Tag on demains x Larker GRS Nature of Burial Mattress/cover Other Means of Identification Properties of Purial Memains prepared and purial Memains prepared and purial Date 4 Aug 48 Casket Sealed by Casket Bate By	All Major bo and/or missi icution found with remainscool in transfer arked	nes fractured ng. Skeleton i ns Box By Char Embalmer (All marking By foregoing ope	Cherl Embel ins for S Condit form. les T. Fre oignature ss, tags a	ification verifices The Fredricks Mer Name & Title hipment ion of Remains edricks, Embalment md plates verifices
Identification Tag on themains x larker GTS Nature of Burial lattress/cover Other Means of Identification NOTE Minor Discrepancies Vo Report of Purial demains prepared and plate 4 Aug 48 Casket Sealed by Casket Market Bate By I hereby cert	All Major bo and/or missi icution found with remainscool in transfer arked	nes fractured ng. Skeleton i ns Box By Char Embalmer (All marking By foregoing ope	Cherl Embel ins for S Condit form. les T. Fre oignature ss, tags a	ification verifices The Fredricks Mer Name & Title hipment ion of Remains edricks, Embalment md plates verifices
Identification Tag on demains X Larker GRS Nature of Burial Fattress/cover Other Means of Identification NONE Minor Discrepancies To Report of Purial Remains prepared and place A Aug 48 Casket Sealed by Casket Mag 48 Lasket Sealed by I hereby cert conducted and accomplish	All Major bo and/or missi icution found with remainscool in transfer arked	nes fractured nes fractured ng. Skeleton i Box By Char Embalmer (All marking By foregoing ope ediate supagyi	Cherl Embel ins for S Jondit form. les 7. Fre Dignature ss, tags a erations, sion and Mac	ification verifices. Fredricks mer Name & Title hipment ion of Remains edricks, Embalment md plates verifices except casketing that the report
Identification Tag on themains x Larker GRS Nature of Burial tattress/cover Other Means of Identification NOPE Minor Discrepancies to Report of Purial demains prepared and published by Date 4 Aug 48 Casket Sealed by Casket Maximum Date Britished and accomplished above is correct.	All Major bo and/or missi ication found with remainded in transfer arked with the all the shed under my i.m.	nes fractured nes fractured ng. Skeleton i ns Box By Char Fabalmer (All marking By foregoing ope ediate superyi	Cherl Embel ins for S Jondit form. Les 7. Fre oignature ss, tags a crations, sion and Much Capt. C.S	ification verifices The Fredricks Mer Name & Title hipment ion of Remains edricks, Embalment md plates verifices

OFFICE OF THE CHIEF QUARTERMASTER HO COM. ZONE, ETOUSA

TOOTH CHART

St. Avold Cem.

•							147–	6-Q Q					10	Januar	y 1946	ត៍
										,			,	Date	<u></u>	<u>-</u>
	Unide	entific	ed X-3	276) (8	St Avold	<u>1)) 🤻 </u>				U	nk			Unk		_
		Last N	lame	90th	Firet Disr	-	îni	tial		R	ank '			Serial No.		
•	Borg.	German	unit ay (WL		. A	ppro eb.			1945	 5	0	rganizati H e	on ead Wo	unde:		_
-			of Death		-		of Dea						Cause of			_
		R	light										Left			
•	8	7	6	5	4 3	2	1	1	2	3	4	5	6	7	8	_
		Silver		k	19/</td <td>55</td> <td>Ing</td> <td>,</td> <td>74</td> <td>ter</td> <td>Z</td> <td>Dea</td> <td>++</td> <td></td> <td></td> <td></td>	55	Ing	,	74	ter	Z	Dea	++			
Side views			Ď	0		A								Œ		
TOP /	100		D		90	W	\forall	U		(T))Œ) (3	UPER
VIEWS	B	H	Œ	00			W		(H)	(V)(3) (Œ	CAYITY	LOWER
Side Views	\square			X		M	M	A	R	Q	Ω'	Ω'			M	-
			Silver					M.A	D.				Silver	,		

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.

9

10

11 12

13

14

15

16

10 9

 Wendell clapp	
Signature of Officer or other person who prepared Tooth chart WENDELL CLAPP	
 lst_Lt. QMC:	
Commercial daby G. R. S. Officer	•

16

15

14

13

12 11

MISSING TEETH All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus:	M
CROWNED TEETH Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus:	
BRIDGE WORK Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:	Gold bridge
FILLINGS. Draw filling on tooth as accurately as possible (blockin and label gold, silver, cement), thus:	Gold filling Silver filling
CARIES (CAVITIES). Outline location and size of cavity, shade in thus:	Cavity Decayed 5

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

ADDITIONAL SPACE FOR FURTHER REMARKS

Only Part I should be completed if identification tags are available
BOTH Part I & II should be completely filled cut if identification tags are
are not available.

If information is unavailable, so indicate.

PART I (Positive Identification)

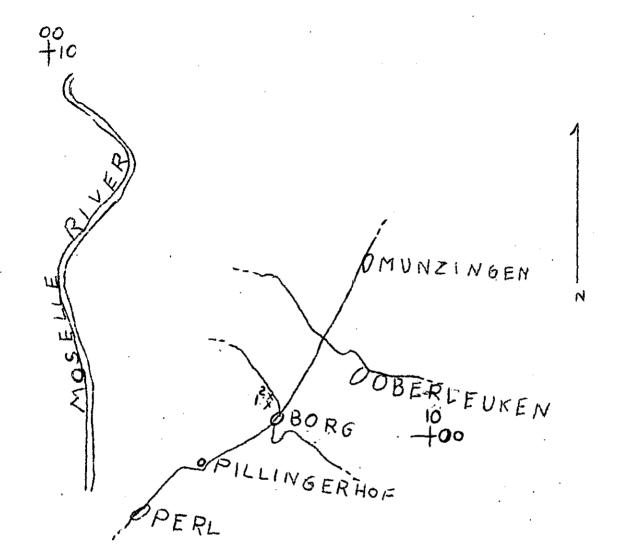
	•
1.	Unidentified X=3276 (St Avold)) ** Unk. 90th Div.
٠	(Full name of deceased), (Rank) (ASN) (Organization)
2.	State if identification tags were attached to remains, how many, and where
	attached No identification Tags
3.	Give exact location from which disinterred, furnishing coordinates and map
-	series used Borg, Germany (W.L 0601) Scale 1/100,000 Sheet U-1 Neunkirchen
	GEGS 4416 Nord de Guerre Grid
	NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED AVE TYING LOCA-
	TION IN WITH PERMANENT LANDMARKS.
4.	Full name of cometery (if buried in an organized cemetery)
	Unburied Remains
5.	Approximate or established date of burial (give basis for date established)
	Unburied Remains:
6.	Approximate or established date of death (state which & give basis for date
	selected) Approximate Feb. to March 1945.
	Information from Burgemeister
7.	Manner in which graves were marked and all information that was on the
	marker No Markers - body wasfound lying on the ground.
_	
8.	List personal effects found in possession of civilians or unauthorized mili-
	tary personnel, furnishing name and address of individuals concerned
	None
^	
9.	Names and addresses of all persons questioned concerning death or burial
	and information each furnished (contact local Mayor, priest, cemetery
	caretaker, those responsible for burial and any other possessing important information) French Military Gov.
	Johann Blav - Burgemeister:
	O Other Diag Dui generouer.
	PART II
	(Doubtful or Undetermined Identification)
10.	Fill in any information available regarding name, rank, ASN, or organiza-
	tion (Check cemetery records and office). Unknown
	, , , , , , , , , , , , , , , , , , ,
11.	5' 9" 150 Missing (decomposed)) Brown 23"
	(Est. Height) (Est. Weight) (Color of Eyes) (Color of Hair)
12.	Give description of facial features and body characteristics if possible,
	including the presence of scars, moles, circumsisions, tattoos, length of hair, presence of mustache or beard, etc. Body decomposed.
	nair, presence of mustache or beard, etc. Body decomposed.
L	Hair 2 1/2. long

	Body Decomposed, Parts of skull missing, and feet missing.
	Give probable cause of death, type & location of wounds is there evidence that body was burned?) Head Wounds
	Give minute description of all effects, clothing & shoes, indicating clothings & sizes, as well as shoe size. List each item of clothing, with description of any unusual cuts, design markings, pockets, colors, patche etc. Also list, with detailed descriptions, all effects without intrinst value, such as gum, feed, seep, papers, letters, tobacco, etc., giving brands when applicable: 200.D. Shirts.
	O.D. Trousers
	Field Jacket
	"COTEL PRESCET
	leggings Gloves - Leather Palm
_	Web-Belt
	H.B.T. Jacket
	Give description of any vehicle found in the area that could be connected with the death of the deceased None
	None None None
	(Typo) (WD Serial No.) (Organization) (Serial No. & Type
	of each gun)
•	Give exact location of remains in vehicle before removal
	Does not apply
	If buried in a coffin; give description and markings
	List names of all other deceased persons buried in the vicinity. Also gi available information concerning the cause & place of death of each the may assist in identification of those remains One more deceased Identification of ROBERT W. BOLLISH: 39148588 was found in the same vicinity.
	was round in the same vicinity.
•	
	Other pertinent information which was a second of the seco
	Other pertinent information which would aid in establishing identity
	Other pertinent information which would aid in establishing identity
	Other pertinent information which would aid in establishing identity
	TV5 44034145 3058 OM CP
	(Individual in Charge of Disinterment) (Rank) (ASN) (Organization)
	TV5 44034145 3058 QM GR. (Individual in Charge of Disinterment) (Rank) (ASN) (Organization) JOE J. KONICEK Tomas W. Parsons
	(Individual in Charge of Disinterment) (Rank) (ASN) (Organization)

REPORT OF INVESTIGATION - AREA SEARCHING To be completely filled out and attached to each copy of GR Form 1, "Report of Burial" when disinterment is accomplished.

1.	Unidentified X-3276 (St Avold)) * Unk. 90th Div.
	(Full name of deceased) (Rank) (ASN) (Organization)
2.	State if identification tags were attached to remains, how many, and where
	attached. (To be filled out at disinterment No Identification Tags:
3.	Give exact location of isolated grave, furnishing coordinates and letter prefix
	map sheet, scale and series used Borg, Germany (WL 0601) Scale 1/100,000
	Sheet U-1 Neunkirchen GSGS 4416 Nord de Guerre Grid
	NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION
	IN WITH PERMANENT LANDMARKS.
4.	Full name of cemetery (include plot, row and grave if organized cemetery)
# •	Unburied Remains:
c	
5.	Approximate or established date of death (state which & give basis for date
	selected Approximate Feb. to March 1945 - Information from Burgemeister
_	
6.	Approximate or established date of burial (give basis for date established)
Ż.	Manner in which grave was marked and all information contained on the marker
	No Marker - Body was found lying on the ground.
8.	List personal effects found in possession of civilian or unauthorized military
	personnel, furnishing name and address of individuals concerned
	None
9.	Names and addresses of all persons questioned concerning death or burial and
	information each furnished (contact local Mayor, priest, cemetery caretaker,
•	those responsible for burial and any other possessing important information)
	French Military Gov.
	Johann Blav - Burgemeister
10.	If buried in a coffin, give description and markings (To be filled out at disi
	terment) Unburied Remains
11.	Action taken Evacuated and placed in U.S. Mil Cem St. Avold, France
114	Tomas W. Fersons
	District approved of Other I du I duality
	Old the Digital of the Control of th
	bate of -our ary Recent are: 19 Jan 1946
	Place of *burial/reburial U.S.Military Cemetery: St. Avold. France
	Plot QQ Row 6; Grave 147
NOT	E: Additional particulars regarding
	investigation will be placed on reverse side
,	
	Signature of Investigating Officer
± ∩ •	ose out word notabblished

Rank



1. ROBERT W BOLLISH

SHEET U-1 NEUNKIRCHEN SCALE Y100,000 6 S 6 S 4 4 16 NORD DE GUERRE 6 R 1 D

CHECK LIST FOR UNKNOWED

	UNKLOWN X- 3276 St. Avoid Com.
t et	St. Avo. ld Fr.
	FLOT 00 FOW 6: GRAVE 1477
Arrived at cemetery.	From Stromberg Germany
(nour) (date)	and the state of t
Place of death Borg. Cormany (MI 0601)	
(name)	(coordinates and landmarks) .
Remains recovered by Joe Monicek 5058	in an
(1)	Rame and organization;
Evacuated to cometary by 3046 of Gr. GR.	Co.
$\frac{1}{\sqrt{r}}$	Throng or of or our instance
is read first attached No Are name	es of decaysed found in same area as this
(Yea-ne)	nces described which may indicate organiza
tion of the deceased YES If only	part of a body was received, was a carefu
F V 2 2 2 2 2 2 1 1 1 1	
search made for otack parts of Unknow: Y	38
If remains come from which plans sto	yed-no)
If remains come from vehicle, plane, etc.	Does Not Apply
-	(bype of venicus or plane, nickname,
. : serial number, organization or	sambols).
•	
Grew list None	
[] (nameu of other do sa	sed and positions is which found)
	The state of the s
if a tank, which hatches were free and av	ailable for escaro 124
•	and the second s
Does Not Apply	
organization to which vehicle or plane ocased are not known, give detailed infor	was assigned or if names of all other de- mation concerning vehicle or plane
(Parts of markings or symbols) (burn	
110 (DDIA	190) (plerced by shell fire - where)
(Cound in those, field, by road, etc.)	No.
· · · · · · · · · · · · · · · · · · ·	
(numes of man who escende) (description	of other vehicles or planes in tal com-
otailed asscription of personal effects	The second secon
	(Indicate exact pocket or part of bloy
NO Personal Effects	franceses sympt books for barr of the
where found)	The state of the control of the state of the
	The state of the s
	The state of the s

Description of clothing and equipment: (If clothes do not fit, obtain sizes from body measurements)

| Clothing | Markings Sizes | Color | Wear, tear, regains, etc.

DOLLA medattaments)	7 77 700 774 7			I spill again
Item	Clowling Markings	Sizes	Color	wear, tear, regains, sto.
readget r				
(type)		<u> </u>		
Raincoat Mone				
/				
Overcoat None			ļ 	
Jacket, Field	NOne	Unk	нвт.	None
				, one
Jacket, Comhat Mone -			ļ	
Mackinaw None				
		1		
Sweater '	None	inne	CD	
Jacket, FRT.	None	None	אַפוּנוּ	-> Fone
hirt, wool_OD *	None	16- 145	33 OD.	No ne '
Indershirt, Wool None		}		
				,
Indershirt, cotton N cne			1	·
Fronsers, HBT Mone			1	
Frousers, wool OD *	None	Unk	ΩD	None
Weit, Web	None	36		Tone
Trawers, wool . Mone				
Drivers, cotton None				
e, Tins Wool	None		ļ	(Note unusual lecing)
Serks, Cotton Mone				
Shoos, (type) None .				
Shros, (type) None .				
Overshoed Hone		r .		
de.V				
TOTAL COVER TOTAL	i	Ī		
			,	
(other item)				
(other item)	these item		ne ecmuni	id by measuring the morain
Chavrons or None	these items		o IS	ad by measuring the remain . blight Fatch None
(other item) (other item) (IT body is nude, sides of the vices or None Ineignia, (type & location	these items		o IS	ud by measuring the remain . ulder Fatch None
other item) Other item) Fir body is nude, sizes of the vices or None	these items (shirt, tee!	t,cost,	Elo helmoo)	ulder Fatch · None

Pago 5 (check list of Unknowns)

Fingora Flesh decomposed
(short, thick, long, slender; size of knuckles) (missing fingers or joints
. *
(unusual characteristics of fingernails)
Chost Fleth decomposed
(size at nipples, color, quanity & extent of hair, large, small, normal)
• • •
Back decomposed Waist decomposed
(quantity and extent of hair) (size at navel, append tomy, amount & co
Ginemate adecomp. But the height gring them to all oak documered
of hair) Gircumsizedecomp. Pubic hairmissing Herniaplasty Flesh decomposed (yos-no) (color) (yos-no) (location)
Loga Flesh decomposed
(inseam)(mus pular, knock-kneed, bowed, normal)(quantity, color, & extent of
Foot missing Toos missing
hair) (size, corns, callousos, flat) (slender, straight, crocked overlap)
Evidence of heal d fractures none
(nose, arms, legs, etc)
(11000) 11110, 1081, 0007
Black out parts of body not
received in complety
NOW THE RESERVE OF THE PARTY OF
$\gamma_{d,\lambda}$
en e
Have photographs been made and attached no If not, explain No equipment
(vos-no)
Have fingerprints been placed on GRS #1 no If not, explain Flesh decomposed
(yes-no) Has tooth chart been prepared? yes If not, explain
Has tooth chart been prepared? yes If not, explain (yes-no)
Romarks
Thomas W. Bonson
Thomas W. Parsons,
2nd. Lt. 1nf. 0-131916
3046-3058 QM GR Co.

Signature of GRO and Organization 2nd. Lt. Inf.0-131916
Page 4

)			_			
E.O. #2785 (Top Pr	dority IDENTIF	ICATION D	ATA			
1. REMAINS OF UNKNOWN		,			2. DATE OF RE	PORT
X-3276 A					26 Janua	rv 1950
3. NAME OF CEMETERY		4. PLOT	5. ROW	6. GRAVE		TE OF
			7		DISINTERMENT	REINTERMENT
S. Arrold The	**	00	6	147	XXXX	XXXX
St. Avold, Fra	uce	୍ୟୁ	"	147	AAAA	AAAA
· · · · · · · · · · · · · · · · · · ·	PHYS 1/	CAL DESCRIPTION	N	<u>.</u>	1	
8. ESTEMATED MEXINE AGE:		10. 0010		R	11. RACE	
		No h	nim f	and	UTD	
21-25 12.GIVE DESCRIPTION OF ANY	OFFICIAL IDENTIFICATION FO	OUND WITH REMA	INS	Junu	; 010	
		•				
	2 72 1					•
Emb	ossed Plate			•		
13.GIVE DESCRIPTION OF TATT	OUS UD SCADE ON BODA THOSE	OD SHCH INEVON	ATION A	TAINED EON	A ATHED COURCE	<u> </u>
J. GIVE DESCRIPTION OF IMIT	OUS OR SCARS ON BOUT AND/	UR SUCH INFURM	MITON U	STAINED PKUN	WINER SOURCES	•
						•
Non	e available					
	•					
14. WAS BODY BURNED?	TO WHAT EXTENT?					· -
XXX YES NO						
15. WAS BODY MANGLED?	TO WHAT EXTENT?				,	
XXX YES NO						
16. DESCRIBE EVIDENCE OF HE	ALED FRACTURES AND BONE MA	ALFORMATIONS		```		
				-		
N	one evident					
14	oue evident					*
		•				
17. LIST EVERY ITEM OF CLOT	HING CONTRACT AND DERECT	NAL CEECTS EC	UINO SH	OW INC. THE TY	ABE COLOB CIT	E HARVINGS
SERVICE, ETC. (If laund	fry marks are indistinct so	uch notation s	hould b	e made and s	rpecimen forwar	ded through
	on when facilities are not					_
	÷					
				•		
	None found					
	•					
	i					
·						
A TRUE COPY:						
4	. 02					
Hayland &	dus					
CAVIODO E TUMO						,
GAYLORD E. LUTZ						
lst. Lt. QM	ن					

QMC FORM REV 18 MAR 47 1044

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE

. *		E.O. 2785 X-3276A
19. BLACK OUT PARTS OF BOD	Y NOT RECEDED .	
,		•
	_	
•	Strong.	
Car		2
K K I have	All IIII	(d)
()- ()- ()- ()- ()- ()- ()- ()-	mann allering	
. •	TRUINING C	
, ,		
	D. C.	•
	•	
20 •	MASS BURIAL C	ERTIFICATE (IF APPLICABLE) in whole or parts is impossible)
i CERTIFY THAT THE GROUP		
OF THE FOLLOWING ANATOMIC		MUMBER
•		·
		SIGNATURE OF MEDICAL OFFICER
21. REMARKS AND ADDITIONAL	INFORMATION	
Pomoine wore was	aimed in skeletal	state, and are almost complete; no flesh
	th were recovered	
• ,		
	•	
•		
•	•	, · · · · ·
	•	
T3_4 T7_2_3_4	5130.5/00	
Est. He ight Est. Age	5/10 5/8" 21-25	
Techs	Shpak & Shaw	
Clerk Rec	Hodge	
		,
i		
CEPTIEN THAT I HAVE	PEDSONALLY VIEWED THE OF	MALINE OF DECEACED AND THAT ALL DECIMENTS
KECORDED TO THE BEST OF	F MY KNOWLEDGE	MAINS OF DECEASED AND THAT ALL RESULTING INFORMATION HAS BEEN
I CERTIFY THAT I HAVE RECORDED TO THE BEST OF TYPED NAME, GRADE, ARM OR S	F MY KNOWLEDGE	

FERLETAL CHART

(BLACK OUT PARTS OF BODY HOT RECEIVED AT CEMETERY)

RIGHT	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		LEFT
E.O. 2785		4000	SKULL inc
Remains of Unknown			SKULL inc
X-3276A	m/S	MICE	
STERNUM			•
(,	(2)(2) / 三)	in March	· · · · · · · · · · · · · · · · · · ·
HUMERUS 34.0 cm	11 1		HUMERUSem
			<u> </u> - -
•			; \
,			
· •			.
ULNA 27.5 cm			ULNA cm
RADIUS 25.7 cm	1 2000	37 (2	
RADIUS 25.7 cm	11 1000	ا ﴿ (١٥٥) لم	RADIUS om
. //			1 (1)
1			
7.7(1)			0000 0
3 [1]			
FRMUR 48.6	Ű.		11 g
r mun40.0	cm	;! <u>F</u> E	MURcm
	ک کریرٹ	-m-	•
TIBIA	_ cm 🌓 🐧	TII	BIAcm
Left FIBULA39.6	_ cm	I FT	BULA cm
			14
Est. Age 21-25		-	- Missing
·			- Burned
Est. Height			H- Fractured
Color Hair <u>None found</u>	1 (1	124	
Healed		120	- Shattered
Fractures	. 75	33	i ,
·		FEE SIG	NATURE
		MANA	
		មក្សព្វ មួ	•

HEADQUARTERS AMERICAN GRAVES REGISTRATION COMMAND EUROPEAN THEATER AREA A.P.O. 887 U. S. ARMY

TOOTH CHART

DER. Richard L 18162670

St. Avold E.O. 2785

QQ-6-149

25 Jan 1950

	X-3276	ó−A									_		_		_		
		Lest Na	me		First		Í	nitial			Gra	ade			Serial No),	
	· : -	· · · · · · · · · · · · · · · · · · ·	Un	it								Org	janizatio	n			
. —	,	Place of	Death				Date of Death							Cause of	Death		·
		R	ight	•		1											
	. 8	7	6	- 5	4_	3	, 2	1	{ 1	2	3	4	5	6	7	8	
			A 10				Ø	Ø	X	Ø	[X]	M		A Ho		M	
Side view			Ä				7		D								
TOPY	(B)	H)	T	0			V	\bigcirc	V	(()			0)Œ	90	UPPER
VIEWS	P (D	H)()(3		W		W(D()(S	Œ	Œ	X	LOWER
Side View							M	9	H	D	Ω	Ω	Ω				
			A F	N N	XI.			Ø		Ø							}
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16	
						•		See	Reme	rks							

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.

s/	Herold D. Wheeler	
	Signature of Officer or other person who prepared Tooth chart	
<u> </u>		

Verfield by G. R.C. Officer

MISSING TEETH All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus:	MAMARA
CROWNED TEETH Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus:	
BRIDGE WORK Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:	Gold bridge
FILLINGS. Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus:	Gold filling, Silver filling
CARIES (CAVITIES). Outline location and size of cavity, shade in thus;	Cavity Decayed 5

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

ADDITIONAL SPACE FOR FURTHER REMARKS

Size Large Color Ivory

Posthumously missing R2, 1, 9, 12, 13; L1, 2, 3, 4, 8, 10.

R8 end L8 small
Alignment Good
Claculus Slight

- 1) The remains of Unknown X-3276, (A), St.Avold QQ-6-147 and S/Sgt. Richard L. GRIDER, St.Avold QQ-6-149 were reprocessed this day as directed in subject E.O.
- 2) New Check Lists, Tooth Charts & Skeletal Charts are submitted herewith.
- 3) Upon processing the findings were that the remains were transposed as you indicate in this E.O., therefore, the tags were changed accordingly.
- 4) Remains that are now designated as GRIDER are in comparison with Form #371 of GRIDER. Age, height and color of public hair are in agreement. Due to the absence of the first cervical vertebrae it was impossible to articulate the spine with the gragment of the base of the skull which is present.
- 5) The remains of Unknown X-3276 (A) have no comparison whatsoever with the remains of GRIDER. The teeth articulate favorably with the remains of X-3276 (A).
- 6) For further information and guidance, refer to attached Forms #1044, skeletal charts and tooth chart.

MICHAEL SHPAK

Ά,

IDENTIFICATION CHECK LIST

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

D.D.# 660, dated 15 Dec 47

			Unknown X = 3276 (A)B
			Cemetery St. Avold, France
			Plot QQ Row 6 Grave 147
1.	Date reprocessed	20 Jan 48 (Hour) (Date)	,
2.	Place of death	rg. Cornary	(VI. 0601) (Coordinates and letter Prefix, maps)
		(Name of closest town)	(Coordinates and letter Prefix, maps)
	(Sheet, scale a	nd serials used)	····
3.	Remains recovered your	disinterred by and repro	cessed by Mobile Team \$1, 1st.Zone (Name and organization)
4.	Evacuated to Cemeter	y by	(Name and organization)
5.	Description of clothin	g and equipment: (if clothe	s do not fit, obtain size from body measurements)
		thing kings Size	Indicate unusual markings color, wear, tear, repairs, etc.
	* Headgear	(Type)	•
	Raincoat	None	
	Overcoat	None	
	Jacket, Field	Earnants of	
	Jacket, Combat	Fone	,
	Mackinaw	None	
	Sweater	Remants of, wool	· D.
	Jacket, HBT	Remnants of	
		· ·	
		•	
			·
	•		

•	Belt, web	Remnants c	<u> </u>		,,,,,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Drawers, wool	.Hone			***************************************	······································
	'Drawers, cotton	None				THERE IS NO THE PERSON OF THE
	Leggings, week	Remants (L, canvas	one (1)	·······	·······
	Socks, sottone wool	Remantsd	f, wool Q	. D.		
	* Shoes	None	(type)	- -	***************************************	
	Overshoes	None			+	4
	Web Equipment		(type)			allanii) (Santaman ann ann ann ann ann ann ann ann ann
	(Other item)	Remants	of leather	faced glov	es.	
	(Other item)	Remants	of pocket	comb.		
	• If body is nude, sizes of th					
İ	Chevrons or Insignia	None	(Type & location	on; shirt, jacket,	coat, helmet)	
•	Shoulder Patch	Hone	***************************************			
	Does clothing indicate t					l Force? UTD
6.	Description of Remains	B Roding	33.8 25.5 39.6	R. Femur	48.2	
	Age UTD Height					UTO.
	Bandages or dressings	EF8	***************************************	Scars	(Length, widt	h, location)
		UTD	(Number logotic	Tattoos	n separate page)	
	Outstanding moles, was					
				(10,5-110	, description, weather,	•
	Sunburn or tan, other t				•	
	Complexion	(I	Light, medium,	D dark, clear, pimp	les, pocks, freckles)	
	Build	,,	UT	D	······································	
•						
	Hair	(Color, length, q	uantity, curly,	e-Yound- wavy, straight, w	horls, or definite parti	ng)
	Hair	(Baldness, widov	vs peak, distinc	Dtive cutting or o	ther characteristics)	IIII III III III III III III III III I
	Sideburns(Color, setti	urd M	ustache U T			1
	(duioi, setti	C' L.A.	(6.	,,,		

Gnatee	UTD		
Coatee	(Light, color, extent)		
Even	VPD	Fyebrows	UTD
Lycs	(Color, setting, shape)	manus Lycolows	(Color, bushiness, extent across nose)
Nose	UTD	Eears	UTD
2 10 JC	(Size, shape, straight)	,	'(Size, set close to or far from head)
Mouth	UTD	Lips	UTD
	(Large, medium, small)	,	(Small, large, full)
Teeth	See Pooti	Chart.	
	(White, size, unevenes	s, spacing, noticeable cro	owns, fillings, extracts)
Chin	VFD		
31111		, receding, pointed, dimp	
law	UTD Circu	unference of head i	n inches Frectured .
) a w	(Large, small, normal)	imiterence of nead i	(Hat band)
Neck	TTD 1	Larvny	TTD.
IVELN	(Sizc, length, short, normal, wrink	led)	(Prominent, normal)
Shoulders	TEP	Àrme `	UPD
Shoulders .	(Broad, straight, small, rounde	d) (Length,	muscular, color, extent and quantity of ha
		g,,	•
Hands		•	
Fingers	UTD	•	
r mgcrs	' (Short, thick, long,	slender, size of knuckles	, missing fingers or joints)
	•		
111111111111111111111111111111111111111	(Unusual cl	aracteristics of fingernail	s)
Chest	गका		222111111111110-2-111111111111111111111
G17666 4.11,1111111	(Size of nipples, color, qu		
Waist	UTD		•
, G13t		ndectomy, amount, quanti	
Back	तका	Circumcision	UTD Pubic Hair Lissing
Dack	(Quantity and extent of hair)	(Yes-no) (Color)
Hernianlast	w ved		
c. mapiast		(Yes-no; location	on)
Legs	UFD		
J = ,	(Inseam, muscular, knock-knee	ed, bowed, normal, quan	tity, color and extent of hair)
Feet	UTD	Toes	CED
A 6-61 mmmmmm	(Size, corns, callouses, flat)		(Slender, štrnight, crooked, overlap)
Evidence o	f healed fractures		
LVIGGICE O.	I ILCUICE LLUCULLOS	(Nose arms	lare ate)

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

7. Have finger prints been praced on Report of In	terment? No	
		es-no)
If not, explainSkelete	Lform	
8. Has tooth chart been prepared? Yes-no)	If not, explain	
9. Remarks Remains received in skeletal s	•	
Burial Peport present. Clothing remn	ants, found in debrie,	bore no markings.
Estimated weight of processed remains	: 20 Lbs. See narrat	ive below.
I certify that I have personally viewed the remains been recorded to the best of my knowledge. Case received as a mass burial of two persons. Remains were segregating into cases "A" and "B". Case "A" comprising nearly a complete skeleton.	ited Woods	W WOLF
Case "Ex consists of portion of maxilla fracture between "R 1 and		Namej
R 2" and extends to L-3, right	CAPT	Q MC
portion of maxilla missing.	Rank	Service
Case "A" reburied in :	OPERATION	2 APPTATO
Plot QQ, Row 6, Grave 147 Case "B" buried in separate		zation)
grave i		
Plot PPPP, Row 6, Grave 70.		-

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

RIGHT

LEFT

HUMERUS 33.8 cm

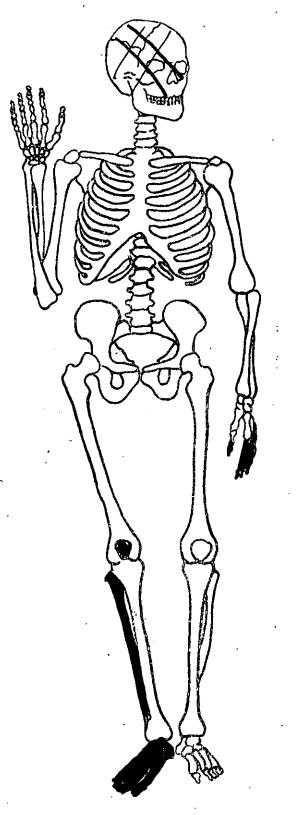
RADIUS 25.5 cm

ULNA 27.3 cm

FEMUR 48.2 cm

TIBIA 40.0 cm

FIBULA 39.6 cm



TOOTH CHART

• •											,			_20_	Jen 19	948	-
_	Unkno	m X _ :	3276 (A)B			_			<u> </u>	Un	k		Unk			
	•	Last Na	me Unk	•	First		1	initial			Gra	de	Unl	t	Serial No	.	
_	Dam	German	Uni	411	W.s		Pa h -	-Marc	ъ 10	AR	~	Org	anization		nds.		
_	DOLE.	Place of				1 11 to AL		e of Des		-EO				Cause of I			
		R	tight											Left			
	8	7	6	5	4	3	, 2	1 8	1	2	3	4	5	6	7	8	
	P		AM				B	B	}	ļ. 	,	B		PAF	1	NOTE	
Side viev	vs		Ø	O	\bigcirc	0	7				O	\bigcirc	\bigcirc		a		·
TOP		(H)	T				V) [Θ)Œ)(E)	UPPER
VIEWS	严		Œ)()E	3(1)		W		W(-) (Œ	XII	roméi
Side Viev	vs M	M		\bigcirc	Ω		M	9	H	D	Ω	Ω'	M		T	M	
		·	A			Ø		P						FROTER			
	16	15	14	13	12	11	10	8	9	10	_ 11	12	13	14	15	16	
								1,		EE		RE	M	ARK	ک	•	

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.

WALTER J JABLONSKI	s/s/ Walter J Jablonski
US DA CIV IS	Signature of Officer or other person who prepared Tooth chart
WOODROW W WOLF	Twoodwas To Wolf
CAPT QMC OPER OFF	Verfield by G. R.C. Officer
	5/10/
FORM 1-22 (29 AUG.46)	Br. J. J.

MISSING TEETH . All teeth missing through Tooth missing previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus: CROWNED TEETH... Block in solid the crown of Gold crown- Porcelaincrown tooth (label gold, porcelain, Silver or gold and porcelain), thus : BRIDGE WORK... Block in solid the crown of Gold bridge tooth (label gold bridge, gold and porcelain bridge), thus: FILLINGS.. Draw filling on tooth as accurately Gold fillings Silver filling as possible (block in and label gold, silver, cement), thus: Cavity SDecayed 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



Teeth posthumously missing : R-1-2-8-9-11, L-4.

Teeth chapped or broken: L-14

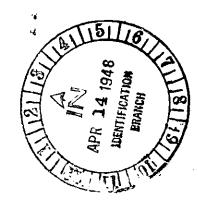
L-8 is a very small, round, tooth.

Color : dull ivory

Size: teath are larger than average

Alignment : good

Teeth were found among the remains of one body. Teeth and Chart will remain with case (A).



i i i						
Graves Registration	D.E.	PORT OF	RILRIA	1		
Form No. 1 (Revised 1 Sept. 1943)	-	O'QNA 068-01,MIf una		-	6 Feb l	948
	nanda an etas	anu irakwanana admarin	ermore mitigiso;	eselvaen e	1	atc -
Unknown X - 327	6 (A)B	prints, Uclia Tha		aiardinoa z	Unk	
Last Name	First	Initi	if the volume of R	ank This Dall	Serial	No.
V	Unk : E.M.	Laundry Mar	: J	anu Heigh		·
		Number of Rieseses	u: of Frac:	Organization		
Borg, Germany (WL 0601)	del Ted Char	-March 45	w bash color	ounds of Death	<u>.</u>
i i					l	
1400 19 U	[an 46	opolemaN; a tooth char	Avold Fr	BIICB \ W	+260584	
147	se below, locatea	Oshart below.) In apace of moise, actomailer	cut, fill in a toop	officer ounce pres	mo Wdn	Cross—
	low Number .5'3 .	ofd, moise, deforming	Number (TES.) Vit	and describe	Type of I	Marker
Disposition of Identification	on Tags : Buried wi	ith body Yes 🗖 No 🛱	Attached to	Marker Yes 🗆	No 🋣	
.,			•	_	i -	•
If No Identification Ta		This deceased	was segrega	ted from f	ormer	•
, Itow wele remain		Unknown X - 32		• • • • • • •		
	`		. • •	`		
	1					
	ers, photographs,	es found, such as lette	y identifying cla	Note below a	1	
What means of ic	dentification were bi	uried with the body, ?ba	úration of docese	وحراهاهاه مري		-
One (1) con-	of GES Form	#1 placed in	a hurial bo	ttle and h	w hatr	ith rem
OTE (T) CODA	OT GWO TOUM	AT PAGGE III	w norther of	ANTO CONTUR D		
n 1 / D. 1 /	1 . C	and's District I	C4		1	
To determine Right of	Left use Decea	seq 8 Kight and Le	It,			
Who is buried on :	D=174-1-	701 40500	77 Jan	Tim le	1	146
Deceased's Right	Bollish Name	39148588 Serial No.	Unk Rank	Unk Organization		Grave No.
1				2	1	
ļ ,	lind downers a	transport to he			1	7 48
Deceased's Left :	Unidentilio	ed at present Serial No.	Rank	Organization	<u>.</u>	148 Grave No.
	Name	Serial No.				Grave No.
! - የሚያስፈመው የሚያ	Name	Serial No.	If chia in	· 74.	I AHD HTC	Grave No.
Signatüre or-Name, R	Name or 12 or 1 or 1 or 1 or 1 or 1 or 1 or 1	Serial No. niyu H bahalani na Anizatisa di gerson furnis	ci cir's H aing above Data who	en other than officer	AHO HTC reporting bu	Grave No.
Signatüre or-Name, R	Name or 12 or 1 or 1 or 1 or 1 or 1 or 1 or 1	Serial No. niyu H bahalani na Anizatisa di gerson furnis	ci cir's H aing above Data who	en other than officer	AHO HTC reporting bu	Grave No.
Signatüre or-Name, R	Name or 12 or 1 or 1 or 1 or 1 or 1 or 1 or 1	Serial No.	ci cir's H aing above Data who	en other than officer	AHO HTC reporting bu	Grave No.
Signatüre or-Name, R	Name or 12 or 1 or 1 or 1 or 1 or 1 or 1 or 1	Serial No. niyu H bahalani na Anizatisa di gerson furnis	ei cir's II ding above Data who ou oversi ation taght not aff	en other than officer	AHO HTC reporting bu	Grave No.
Signatüre or-Name, R	Name or 12 or 1 or 1 or 1 or 1 or 1 or 1 or 1	Serial No. niver <u>A bodolog as</u> squigation afgerson funic abodes hadeasti opa If print of identific	ei cir's II ding above Data who ou oversi ation taght not aff	en other than officer	AHO HTC reporting bu	Grave No.
Signatüre or-Name, R	Name or 12 or 1 or 1 or 1 or 1 or 1 or 1 or 1	Serial No. niver <u>A bodolog as</u> squigation afgerson funic abodes hadeasti opa If print of identific	ei cir's II ding above Data who ou oversi ation taght not aff	cn other than officer fixed fill in bellow Unk Name	Allo HTC reporting bu	Grave No.
Signatüre or-Name, R	Name or 12 or 1 or 1 or 1 or 1 or 1 or 1 or 1	Serial No. niver <u>A bodolog as</u> squigation afgerson funic abodes hadeasti opa If print of identific	ci cir's H ci cir's H ci orchi ation taghi not aff	on other than officer fixed fill in bellow Unk Name Unk	Allo HTC reporting but the body and the body	Grave No.
Signatüre or-Name, R	Name or 12 or 1 or 1 or 1 or 1 or 1 or 1 or 1	Serial No. niver <u>A bodolog as</u> squigation afgerson funic abodes hadeasti opa If print of identific	ci cir's H ci cir's H ci orchi ation taghi not aff	cn other than officer fixed fill in bellow Unk Name	Allo HTC reporting but the body and the body	Grave No.
Signatüre or-Name, R	Name or 12 or 1 or 1 or 1 or 1 or 1 or 1 or 1	Serial No. niver A boolool as springly of general funition of general 0000 If print of identific Emergency Addres	ci cir's H ci cir's H ci orchi ation taghi not aff	unk Unk Unk Address	Allo HTC reporting but the body and the body	Grave No. DOT TIAL C C C C C C C C C C C C C
Signatūrė or-Name, R	Name c. 13 c. c. c. c. c. c. c. c. c. c. c. c. c.	Serial No. Serial	ei cin'i H aing above Data wh Gi Overni ation tagin not aff	unk Unk Address	AIIO HTC reporting bu This List List List List List List List Li	Grave No. OOT rial.
Signatūrė or-Name, R	Name c. 13 c. c. c. c. c. c. c. c. c. c. c. c. c.	Serial No. Serial	ei cin'i H aing above Data wh Gi Overni ation tagin not aff	unk Unk Unk Vale Unk Vale Unk	AllO HTC reporting bu hbbR; D yd canilli t O yd can	Grave No. DOT TIAL C C C C C C C C C C C C C
Signatūrė or-Name, R	Name c. 13 c. c. c. c. c. c. c. c. c. c. c. c. c.	Serial No. Serial	ei cin'i H aing above Data wh Gi Oreni ation tagin not aff	unk Unk Address	AIIO HTC reporting bu This List List List List List List List Li	Grave No. DOT TIAL C C C C C C C C C C C C C
Signatūrė or-Name, R	Name c. 13 c. c. c. c. c. c. c. c. c. c. c. c. c.	Serial No. Serial	ei cir's H	unk Unk Vnk Vnk Name Unk Nddress	AllO reporting h5h8 D yd Caillì O yd cawoto ;	Grave No. OOT rial.
Signatūrė or-Name, R	Name c. 13 c. c. c. c. c. c. c. c. c. c. c. c. c.	Serial No. Siring bondool no. Siring to depend furily Control to be a series of the	ei cir's H aigh shore Data who	unk Unk Volk Name Unk None Report of	AIIO HTC reporting but phile (C yd guilli ; O yd cawou; But A diest Limilita yd cawou; But	Grave No. OOT rial.
Signature or Name, R	Name c. 13 c. c. c. c. c. c. c. c. c. c. c. c. c.	Serial No. Sirve B boolool no. Sirve B boolool no. Sirve B boolool no. Sirve B boolool no. If print of identific Emergency Address Religion Religion This correct prepared at	ei cir's H sing above Data who on oversia attorning in not aff see n of same: ted copy of I.S., 1st.	unk Unk Volk Name Unk None Report of	AIIO HTC reporting but phile (C yd guilli ; O yd cawou; But A diest Limilita yd cawou; But	Grave No. OOT rial.
Signatūrė or-Name, R	Name c. 13 c. c. c. c. c. c. c. c. c. c. c. c. c.	Serial No. Siring bondool no. Siring to depend furily Control to be a series of the	ei cir's H sing above Data who on oversia attorning in not aff see n of same: ted copy of I.S., 1st.	unk Unk Volk Name Unk None Report of	AIIO HTC reporting but phile (C yd guilli ; O yd cawou; But A diest Limilita yd cawou; But	Grave No. OOT rial.
Signatūrė or-Name, R	Name c. 13 c. c. c. c. c. c. c. c. c. c. c. c. c.	Serial No. Sirve B boolool no. Sirve B boolool no. Sirve B boolool no. Sirve B boolool no. If print of identific Emergency Address Religion Religion This correct prepared at	ei cir's H sing above Data who on oversia attorning in not aff see n of same: ted copy of I.S., 1st.	unk Unk Volk Name Unk None Report of	AIIO HTC reporting but phile (C yd guilli ; O yd cawou; But A diest Limilita yd cawou; But	Grave No. OOT rial.
Signatūrė or-Name, R	Name c. 13 c. c. c. c. c. c. c. c. c. c. c. c. c.	Serial No. Sirve B boolool no. Sirve B boolool no. Sirve B boolool no. Sirve B boolool no. If print of identific Emergency Address Religion Religion This correct prepared at	ei cir's H sing above Data who on oversia attorning in not aff see n of same: ted copy of I.S., 1st.	unk Unk Volk Name Unk None Report of	AIIO HTC reporting but phile (C yd guilli ; O yd cawou; But A diest Limilita yd cawou; But	Grave No. OOT rial. co co co co co co co co co c
Signature or Name, R	Name or 2 or or or or or or or or or or or or or	Serial No. Sirve B boolool no. Sirve B boolool no. Sirve B boolool no. Sirve B boolool no. If print of identific Emergency Address Religion Religion This correct prepared at	ei cir's H sing above Data who on oversia attorning in not aff see n of same: ted copy of I.S., 1st.	unk Unk Volk Name Unk None Report of	AIIO HTC reporting but phile (C yd guilli ; O yd cawou; But A diest Limilita yd cawou; But	Grave No. OOT Fial. C. C. C. Fig. F
Signature or Name, R Signature or Name, R List only Personal Effe	Name or 2 or 2 or 3 or 3 or 3 or 3 or 3 or 3	Religion Religion This correct prepared at APO 58, US	ei cir's H sing above Data who on oversia attorning in not aff see n of same: ted copy of I.S., 1st.	Unk Unk Name Unk None Report of Zone, AGRC	High High High High High High High High	Grave No. OOT rial. co co co co co co co co co c
Signature or Name, R	Name or 2 or 2 or 3 or 3 or 3 or 3 or 3 or 3	Religion Religion This correct prepared at APO 58, US	n of same: ted copy of I.S., 1st.: Army, by:	Unk Name Unk None Report of	High High High High High High High High	Grave No. OOT Fial. C. C. C. C. Fig. 12 Fi
List only Personal Effective US DAE CLYB 3	Name or 2 a color or 1 copy of the color of the copy	Religion Religion This correct prepared at APO 58, US	n of same: ted copy of I.S., 1st.: Army, by:	Unk Name Unk None Report of	High High High High High High High High	Grave No. OOT rial. co co co co co co co co co c
List only Personal Effective DAE CLUB DAE CLUB STATE WOODROW W	Name or 2 a color or 1 lank and if possible. Or copy or 1 ects Found on 1 S. copy or 2 LF	Religion Religion This correct prepared at APO 58, US	ri cir's H and above Data who co orect ation tagys not aff ation tagys not aff rich and ation tagys not aff rich and ation tagys not aff ation tagys	Unk Name Unk None Report of	High High High High High High High High	Grave No. OOT Fial. C. C. C. C. Fig. 12 Fi
List only Personal Effective US DAE CLYB 243	name corto no form for the possible of the po	Religion Religion This correct prepared at APO 58, US	ri cir's H and above Data who co orect ation tagys not aff ation tagys not aff rich and ation tagys not aff rich and ation tagys not aff ation tagys	Unk None Report of Report of Cone, AGRC	High High High High High High High High	Grave No. OOT rial. © C C C T T T T T T T

			***	-		1
Graves Registration Form No. 1	REP	ORT OF	BURIA	L	6 Feb 19	148
(Revised Sept. 1943)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	TM 10-630 AND AR	30-1815	ale Care S	Da	
· ·				significant of the second		:
Unknown ^ - 327	76 (A)B		<u>, , , , , , , , , , , , , , , , , , , </u>	nk ili i	Unk Serial N	
Last Name	First	Initia	: K	ank		· —
	Unk Unit			Unk Organization	+	
D		70 t 10 a b	Month A.	See Tond w	rhanda	'
Borg, Germany (CMT ODOTA	Est. Feb-	Narch 45	Cause	of Death	
					<u>-260584</u>)) i
Time and Date of B	Jan 46	· Name of C	emetery	Name or Co		
147	A S	1 - Of	ger fan dê berût de		mo.Wdn.(
	Row Number	Plot	Number		Type of M	
Disposition of Identificati	on Tags : Buried with	body Yesm No 🗗	Attached to	Marker Yes □	No 🋣	•
		· – –				
If No Identification T How were remain	is identified? The	is deceased v known X - 327		ted from f	ormer	1.
	On		J.			
	i Tanana aya aya aya aya aya aya aya aya ay	ten formal ner	'n maiore de la			
What means of	dentification were burie	d with the body? .	io		1	أي
i		-				-
					: .k.	. 1
One (1) copy	of GRS Form #	l placed in a	a burial bo	ttle and I	maried W:	ith remai
	. !				. —	
o determine Right or	Left use Decease	d's Right and Lei	t.			,
						÷.
	Bollish	39148588	Unk	Unk		146
Deceased's Right:	Name	Serial No.	Rank	Organization	ı '	Grave No.
	Unidentified	at present			•	148
Deceased's Left:	Name	Serial No.	Rank	Organization	3 !	Grave No.
		o do Porto (e n 11 por 1	, 1 €		J	C
Signature or Name, I	Rank and if possible Organi	zation of person furnish	ing above Data who	en other than office	reporting bur	ial.
			Sporting			1
		If print of identifica	tion tag is not all	ixed fill in bellov	v :	
/	1					- '
1	1	Emergency Address	see			
				Name	•	
				77-1-		
\				Unk Address		
1	•			TT GIT COS	£***	
\		TD 11: *		Unk		
		Religion		опа		
List only Personal Eff	fects Found on Bo	dy and disposition	of same:	None		
				v.6110	-	
		This correct	ted copy of	Report of	Eurial	
		prepared at				
		APO 58. US		TATE POINT		
		MEU 00, US .	erima, oa i	1	± ;	:
				1	7	
		\sim	100	1	ė .	
	_	The same	40 65	1 Rin	1.	
LEO H LAMPRECH	T	Med 0	r viele	ass were	<i>E7</i> !	
US DA CIV I	S. One	Sig	nature of Officer of	other person repo	rting burial	•
			, , –			
WOODROW W WO		ω	roodings of	E COUL	7.54	and the superior
CAPT	MC		y eraned i	G.R.S. Officer	7.4!	3
OPERATIONS OFF				\mathcal{O}		•
OF WITH TEATH ATE		CORRECTED	COPY			

	Take Fingerprints of Both Hands. If unable to obtain a complete set of Fingerprints, Take Those You Can, and fill in the following:	The second secon
60	Height: Laundry Marks: Weight: Number of Rifle: Color of Eyes: Wear Glasses? Color of Hair: Is Tooth Chart Attached? Race: (If pessible, have medical personnel take a tooth chart, if no medical	97
	personnel present, fill in a tooth chart below.) In space below, locate, and describe any scars, birthmarks, moles, deformities, etc.	
Left Hand	en en en en en en en en en en en en en e	2 Right Hand
,	Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc.;	
	For the Antonia Contract of the Contract of th	war (1) sa
	and the second of the second o	in digita
Thumb	in the second of	Thumb
P .T	ing die gegen der State (1955 in der 1955	
Deceased's Left 4 5 6 7 8 4 5 6 7 8 H100gs by□; Bridges	Location, oriented with Permanent Lan more space needed attach separate shee North.	dmarks. If
g		
2 2 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1		positività di serio della serio di seri
Deceased's Right Deceased's		
Deceased's		
Dece	Characteristics Other Data:	
7 7	Characteristics of the Data Sterics of the C. 20	5992 - 887 M - 3-45 ∴હ-
1.9	s σισ	
w w w wer were		este de la companya d

wised 1 Sept. 1943)	KL	YORT OF	BURI	AL	. 1 m. 40
:	÷	TM 10-630 AND	AR 30-1815	10 mg/m	Date
The day this way wa	-50 76 Bas	void a		-باز <i>ن</i> ور ۱	* ₄ .1.
Last Name	First	Initi	al .	Rank	Serial No.
<u> </u>	Unit	<u> </u>		90th niv.	
Torg, Terlem	/	Asorex. Web.	นอ กรชอง	Organization	·nu (n
Place of Deat		Date of D		<u>Vija i Jaku</u>	Cause of Death
<u>400 19 Janua</u>		i.a. Nil. On :			
Time and Date of Buri	ial Ú	Name of Cer	nctery :	Nazne	or Coordinates of Location
	ow Number	Pl	ot Number		Type of Merker
No Identification Ta How were remains ไดนดอกซ่	identified?				
What means of ide	entification were buri	ied with the body?	and the second	* *	
41 4	form /1 In	Gran gran	Pottle		
determine reight of			₩		
o is buried on:		Serial No.	<u> </u>	Openization	145
o is buried on: ceased's Right: -	Comment No.	1.8h 391455.08 Serial No.	Unit Rank	Organizatio	a Grave No.
o is buried on: eased's Right: -	Comment No.	lah 59145508	Unit Rank	Organizatio	a Grave No.
eased's Right: -	Name Unidont Name	Serial No. Serial No. Serial No.	Rank On't Rank	Organizatio	n Grave No.
eased's Right: - eased's Left: -	Name Unidont Name	Serial No. Serial No. Serial No.	Rank On't Rank	Organizatio	n Grave No.
o is buried on: ceased's Right: - ceased's Left: -	Name Unidont Name	Serial No. Serial No. Serial No.	Rank On't Rank Ve Data when oth	Organizatio	n Grave No.
o is buried on: ceased's Right: - ceased's Left: -	Name Unidont Name	Serial No. 1:100 90 009 Serial No. on of person furnishing about	Rank On't Rank Ve Data when oth	Organizatio	n Grave No.
o is buried on: ceased's Right: - ceased's Left: -	Name Unidont Name	Serial No. 1:100 90 009 Serial No. on of person furnishing about	Rank Cn't Rank Rank Ve Data when other ation tag is not	Organization officer reporting affixed fill in below	n Grave No.
o is buried on: ceased's Right: - ceased's Left: -	Name Unidont Name	Serial No. 1 100 90 000 900 9 Serial No. on of person furnishing about 1 f print of identific	Rank Cn't Rank Rank Ve Data when other ation tag is not	Organization officer reporting affixed fill in below	n Grave No.
eased's Right: -	Name Unidont Name	Serial No. 1 100 90 000 900 9 Serial No. on of person furnishing about 1 f print of identific	Rank Cn't Rank Rank Ve Data when other ation tag is not	Organization officer reporting affixed fill in below	n Grave No.
o is buried on: ceased's Right: - ceased's Left: -	Name Unidont Name	Serial No. 1 100 90 000 900 9 Serial No. on of person furnishing about 1 f print of identific	Rank Cn't Rank Rank Ve Data when other ation tag is not	Organization officer reporting affixed fill in below	n Grave No.
o is buried on: ceased's Right: - ceased's Left: -	Name Unidont Name	Serial No. 1:100 96 0109 Serial No. on of person furnishing about the print of identific Emergency Address	Rank Cn't Rank Rank Ve Data when other ation tag is not	Organization of the organi	n Grave No.
o is buried on: ceased's Right: - ceased's Left: - Signature or Name, Rank an	Name Unidont: Name d if possible Organization	Serial No. 1 1 1 0 0 9 0 0 10 9 Serial No. on of person furnishing about 1 of identific Emergency Address	Rank Cnt Rank Rank we Data when oth ation tag is not see	Organization of the organi	n Grave No.
o is buried on: ceased's Right: ceased's Left: Signature or Name, Rank an only Personal Effec	Name Unidont: Name d if possible Organization	Serial No. 1 1 1 0 0 9 0 0 10 9 Serial No. on of person furnishing about 1 of identific Emergency Address	Rank Cnt Rank Rank we Data when oth ation tag is not see	Organization of the organi	n Grave No.
o is buried on: ceased's Right: ceased's Left: ceased's Left:	Name Unidont: Name d if possible Organization	Serial No. 1 1 1 0 0 9 0 0 10 9 Serial No. on of person furnishing about 1 of identific Emergency Address	Rank Cnt Rank Rank we Data when oth ation tag is not see	Organization of the organi	n Grave No.
determine Right or no is buried on: ceased's Right: ceased's Left: Signature or Name, Rank and t only Personal Effect O . or sona	Name Unidont: Name d if possible Organization	Serial No. 1 1 1 0 0 9 0 0 10 9 Serial No. on of person furnishing about 1 of identific Emergency Address	Rank Cn't Rank Tank Organization officer reporting affixed fill in below Unic Na Unic Na Address	n Grave No.	

Signature of Officer or other person reporting burial

Verified by CARS. Officer
CLAUDE J. DAVIS, 2nd Lt., Inf., 608th 2M CR Co.

Description

a TT	at anadasta	Idams II about It is	IF DECEM	. J. m		Date	
Unidentified		DOUB Flands. IN OFFICE OF	Fingerprints of		Unk		
2101139	Unk	o no a secural on initial or many	Cowell		Se	rial No.	
		Laundry Mark	: in Organ	ization			
Borg, German	y (WLUOUI) of	approved mileb. to Ma			-		
		1:52:38 TOate of Death	Color of Eyes:		se of De	ath	
Time and Date of Bu		Name of Cemetery	Race.	Name or C		es of Loca	tion
147 6	t, if no medicalò	personne gake a tooth char	sible, have medical	eog Ma	1 -	ross)	
	Row Number		nel pr esent, fill in s scribe any scars, di	and de	Туре о	f Marker	
position of Identification	on Tags: Buried with	body Yes 🗆 No 🗹 A	ttached to Marker	Yes 🔲	No 🗆	1.0	
No Identification T	ags						
How were remains						1 8	
						THE COTTED	
						3	
No. 14						3	
What means of i	dentification were burie	ed with the body?	elc: any identifyin	Note L			
			le expanization of c	probah			
GRS	f orm #1 In	Glass KNNN Bottl	.0				
	r Left use Decease	d's Right and Left.					
o is buried on:	Robert Bodli	sh 39148588 U	nk	Dole		317	,
ceased's Right:	Name	Serial No. Ra		Unk	-	140	
						Grav	e No.
	Unidenti			Mariasaraogi			o.
eased's Left:	Unidenti Name	Tied at present Serial No. Ran		ganization	-		8 No.
	Name	Tied at present Seria! No. Ran	ik Or	ganization			
	Name and if possible Organization	Serial No. Rar	ik Or	ganization	ial, HI		
Signature or Name, Rank :	Name and if possible Organization	Serial No. Rar	then other than officer	ganization.	T	Grave	e No.
Signature or Name, Rank :	Name and if possible Organization	Serial No. Rar	then other than officer	ganization.	T	Grave	e No.
Signature or Name, Rank :	Name and if possible Organization	Seria! No. Rar of person furnishing above Data to	then other than officer	ganization. reporting bu	Bridges CH	Grave	e No.
Signature or Name, Rank :	Name and if possible Organization	Serial No. Rar	then other than officer	ganization. reporting bu	T	Grave	e No.
Signature or Name, Rank :	Name and if possible Organization	Seria! No. Rar of person furnishing above Data to	then other than officer g is not affixed fill i	reporting but to below:	by Didges	Grave	© 1
Signature or Name, Rank :	Name and if possible Organization	Seria! No. Rar of person furnishing above Data to	then other than officer	reporting but to below:	Bridges	Craw	© No.
Signature or Name, Rank :	Name and if possible Organization	Serial No. Rar of person furnishing above Data If print of identification ta Emergency Addressee	then other than officer is not affixed fill i	reporting but to below:	by Didges	Craw	© 1
ignature or Name, Rank a	Name In differential of the second of the s	Seria! No. Rar Property of person furnishing above Data Religion The print of identification ta	then other than officer (is not affixed fill i Unk Address	reporting but to below:	o: filings by D Bridges	Craw	© 1
Signature or Name, Rank and and and and and and and and and and	Name In differential of the second of the s	Seria! No. Ran of person furnishing above Data If print of identification ta	then other than officer (is not affixed fill i Unk Address	reporting but to below:	incia teeta ×	Craw	© 1
Signature or Name, Rank s	Name and if possible Organization to delete 8 9/18 m all strambn about 9/180	Seria! No. Rar Property of person furnishing above Data Religion The print of identification ta	then other than officer (is not affixed fill i Unk Address	reporting but to below:	o: filings by D Bridges	144 Grave	© 1
Signature or Name, Rank s	Name In differential of the second of the s	Seria! No. Rar Property of person furnishing above Data Religion The print of identification ta	then other than officer (is not affixed fill i Unk Address	reporting but to below:	o: filings by D Bridges	144 Grave	© 1
Signature or Name, Rank s. 2011820 1 offi	Name and if possible Organization to delete 8 9/18 m all strambn about 9/180	Seria! No. Rar Property of person furnishing above Data Religion The print of identification ta	then other than officer is not affixed fill i Unk Address	reporting but a below:	X crowns by C fillings by D Bridges X crowns by C fillings by D Bridges	Grave	© No.
Signature or Name, Rank s	Name and if possible Organization to delete 8 9/18 m all strambn about 9/180	Seria! No. Rar Property of person furnishing above Data Religion The print of identification ta	then other than officer is not affixed fill i Unk Address	reporting but to below: Name	by X: crowns by O: fillings by D: Bridges	Grave	© No.
only Personal Effe	Name and if possible Organization to delete 8 9/18 m all strambn about 9/180	Seria! No. Rar Property of person furnishing above Data Religion The print of identification ta	then other than officer is not affixed fill i Unk Address	reporting but a below:	Applacaments by arthoin freed X Applacaments by C. fillings by D. Bridges Applacaments by C. fillings by D. Bridges	Grave	© No.
Signature or Name, Rank s. 2011820 1 offi	Name and if possible Organization to delete 8 9/18 m all strambn about 9/180	Seria! No. Rar Property of person furnishing above Data Religion The print of identification ta	then other than officer is not affixed fill i Unk Address	reporting but n below: Name	The the two controls by a thinks by Bridges by the Bridges	Grave	© No.
Signature or Name, Rank s. aoils of office of only Personal Effe	Name and if possible Organization to dotable Regular shamble	Seria! No. Rar Property of person furnishing above Data Religion The print of identification ta	then other than officer is not affixed fill i Unk Address	reporting but a below: Name Name	The the two controls by a thinks by Bridges by the Bridges	Grave	© No.
Signature or Name, Rank a signature or Name,	Name and if possible Organization to delete 8 9/18 m all strambn about 9/180	Serial No. Rar Per person furnishing above Data If print of identification ta Emergency Addressee Religion y and disposition of sam	then other than officer is not affixed fill i Unk Address	reporting but a below: Name Name	Bridges by Stillings by Bridges Response by Stillings by Bridges Response by Stillings by Bridges Response by Stillings by Bridges	Grave	© No.
t only Personal Effe	Name and if possible Organization to date the system to date the syst	Serial No. Rar Of person furnishing above Data of Person furnishing above Data of the Print of identification tage. Emergency Addressee	then other than officer g is not affixed fill i Unk Address	reporting but a below: Name Name	Bridges by Stillings by Bridges Response by Stillings by Bridges Response by Stillings by Bridges Response by Stillings by Bridges	Grave	© No.
Signature of Name, Rank and and Roll Roll Personal Effection Personal Disinter	Name and if possible Organization to dotable Regular shamble	Serial No. Rar Per person furnishing above Data If print of identification ta Emergency Addressee Religion y and disposition of sam	then other than officer g is not affixed fill i Unk Address	reporting but a below: Name Name	Bridges by Stillings by Bridges Response by Stillings by Bridges Response by Stillings by Bridges Response by Stillings by Bridges	Grave	© No.
Signature or Name, Rank son Book and son son son son son son son son son son	Name and if possible Organization to date the system to date the syst	Serial No. Rar Pof person furnishing above Data If print of identification ta Emergency Addressee Religion y and disposition of sam Signature of C Tomas W. Parso	of then other than officer is not affixed fill in the Unk. Address Officer or other person in S 0 - 1 1 1 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	reporting but no below: Name Name Tomas Pod LT O+O - Disinte	cate missing natural cettly x crowns by c ifilings by Dridges	Grave Coort	© No.

		and the second of the second o	•
1		A TANK DATE OF BUILDING	
- 1	idelu	IF DECEASED UNIDENTIFIED .	
- [.	<u>.</u>	Take Fingerprints of Both Hands. If unable to obtain a	
- 1	.∆: 1 '= 3	complete set of Fingerprints; Take Those You Can, and fill in	
	•	the following:	
-		Height: Laundry Marks:	
- 1	; 1	Weight:	
	of D. th	Color of Eyes: Amount Mear Glasses? Color of Hair: Is Tooth Chart Attached?	
- 1	<u></u>	Dramel Race: Number of Recording to the country of	
	diarter of Localica	(If possible, have medical personnel take a tooth chart, if no medical	
-		personnel present, fill in a tooth chart below.) In space below, locate, was and describe any scars, birthmarks, moles, deformities, etc.	
ŀ	32	l li li li li li li li li li li li li li	
		1 Pos non of the first Barica with body Ves II No [1] Attrobard to Marker Ves II I	,
Ē	DEC Tot	Tio Identification Tags	
Hand	Lole E- Decompos		
희		Right	
1	SG.		
ļ	<u> </u>		
- [•	Note below any identifying clues found, such as letters, photographs,	
		probable organization of deceased, etc.:	
	-	ofeton made book of a think of	
ļ			
		Do determina Right on Last uso Decement's Right and Left.	
		I was the same of	
		the constitution of the co	
	<u> </u>	Rant Organizates	
	Ē.	क्रिया कर का का का का का का का का का का का का का	
	्री: - (देश प्रकार)	N.mu Seriel No. Reads Organization	•
	TOOTH	PART moor pollo com and this is an Isolated Burial, make a Sketch of the Location,	
		:woled i lie bazilia ma criented with Permanenty Landmarks. If more space needed a attach separate sheet. Indicate North.	
	8 8 8 8	attach separate sheet. Indicate North.	
	7 8 7 8 Bridges		
•		SSEEDIN VALUE OF THE PROPERTY OF THE PR	
Left	9 9		
I S.T	5 5 5	j× nj	
SSS	4 4	ESTABA STATE OF THE STATE OF TH	
Deceased's		Petinion Little	
Ω	, , , , , , , , , , , , , , , , , , ,	Religion 5	
	6 2 5 5	Religion : its only Personal Effects Found on Body and disposition of same:	
		d Stranger Transport	
	- 50 F X		
			1
•			
, t	ه د ا		•
Rigi	4.		•
v.		#	
Deceased's		Signature of Officer or other verson recalling hurs.	
Jec	ဗ ဗ	The state of the s	
	- C.4	722560	i 40
		CLUDE J. DAVIS, 2nd IG., IDE., 2	
	20 - n 12 map		
•	Upper Lower	1	3

IDENTIFICATION SECTION REPATRIATION RECORDS ANCH HEMORIAL DIVISION

CATEGORY III CASE
NO CLUES
IDENTIFICATION IMPOSSIBLE
AT PRESENT TIME