

RECLASSIFICATION SHEET

PAPERS ORIGINALLY FILED 293 Misc (misc.) St. Avold

X-1588 X-6108 X-6137 X-6150 X-6297

SYNOPSIS AND DATES

X-6387-A X-6387-B X-6387-C X-6457

misc filed.

NEW CLASSIFICATION 293 Misc - St. Avold X-1588

RECLASSIFICATION SHEET

7887 GRAVES DETACHMENT

APO 757

CAF3 camp St. Avold X-6457 MB

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

UNKNOWN X-6457 St Avold

(POC) EPINAL

*file 2 mar 51
Kirkblom
Ident.*

REPORT OF INVESTIGATION
AREA SEARCH

REINTERRED
U.S. MIL. CEM. ST-AVOLD
PLOT ~~EEEE~~ ROW 11 GRAVE 129

AGRC Form 10 (Revised) 11 June 1946
1 January 1946 Date

NAME Unknown X-6457 RANK Unknown ASN Unknown
ORGANIZATION A.A.F.
MEANS OF IDENTIFICATION None

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

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

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

a. NAME RANK ASN
b. ORGANIZATION

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

a. NAME Unk. RANK Unk. ASN Unk.
b. ORGANIZATION A.A.F.

3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY Two Unknown crew members buried in a Mass Grave with this man.

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

a. Date of above burials 3 March 1944 Common Graves? Mass grave

5. Name and Type of Cemetery Heinheim, municipal Friedhof (civilian)
(Military or Civilian)

6. Map Coordinates of the Cemetery WT 9537

a. Town HEINHEIM Country Germany Landkreis Kehlheim, map 1:250,000 sheet M-49 Munich, Germany

7. Give exact location in cemetery of the remains.
Mass grave in front right hand corner of the cemetery.

d. Section Row Grave

b. Is sketch attached? Yes

8. If remains are not located in a cemetery, give exact location. Not applicable

a. Town Coordinates

b. Is Sketch attached?
c. Is area mined?

9. How is the grave marked? Three plain wooden crosses

10. If grave is marked with cross, give exact markings thereon No inscription.

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

1. By whom

11. Where are the cemetery records? None
(Town Hall, cemetery, burgermeister's office)

- a. What information was contained thereon? _____
- b. Where was the information obtained? _____
- c. By whom? _____
12. What is the date of death? **25 February 1944**
 a. Give basis **Statement of priest Housner Johann**
13. What is the cause of death? **Plane crash**
 b. Give basis **Information from priest**
14. What is the date of burial? **3 March 1944**
 a. Give basis **Information from priest**
15. What was the place of death? **HEINHEIM, Germany** Coords **WT 9537**
 b. Give basis **Location of plane crash**
16. Where were the remains found? **HEINHEIM, Germany** Coords **WT 9537**
 a. By whom? **German Civilians, names unknown**
 b. Is sketch attached? **No**
17. Was a casket used? **Yes** Who furnished the casket? **priest**
 Type of casket **wooden** How marked? **unk.**
18. Who made the burial **civilian**
 (Civilian, American Mil. or German Mil.)
- a. What are the names and addresses? **priest Johann Housner House No. 112**
HEINHEIM, Germany

SECTION B — AIR CORPS DECEASED (To be completed only if deceased is believed to be a member of the AAF).

19. Were remains found in the plane wreckage? **No**
 a. Give location in plane from which the bodies were removed _____
 (Tail gunner, pilot, radio, turret, etc., or front, side of plane)
- b. Near wreckage? **Yes**
20. Scene of crash must be investigated. Give complete results of investigation (if removed, state when and by whom).
 a. Type of Plane **Four motored bomber**
 b. Markings and/or name on plane **Plane removed**
 c. Give numbers on motors, machine guns, instruments, radios or other equipment: _____
21. How did crash occur? **Enemy planes** Anti-aircraft _____
 Enemy Planes? **Yes** Collision? _____
22. Did plane explode in the air? **No** On ground? **Yes**
23. Did plane burn in the air? **Yes** On ground? **Yes**
24. What was the direction of the flight? **From Regensburg west**
25. What was the civilian opinion regarding destination of plane? **Unk.**

26. Had bombs been released prior to crash? **Yes**
27. Does specific time and date of crash correspond with date of death of above named deceased? **Yes**
28. Number of planes in formation prior to crash **Over fifty planes**
29. State precise time and date of plane crash **at 14.00 o'clock 25 February 1944**
(Night?) (Day?)
30. Were parachutists seen? **Yes** How many? **7 or 8** Escaped? _____
Prisoners? **Yes**

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

31. Were remains found in wreckage of a tank? _____
a. Give specific position in tank from which deceased was removed _____
(Radio man, driver, assistant driver or . . . front, side, or back)
b. Near wreckage? _____
32. Location of destroyed tank must be investigated. Give complete results of investigation. (If removed, state when and by whom) _____
a. Type of tank _____
b. Markings and/or name of tank _____
c. Numbers on motors, machine guns, ammunition, instruments, etc _____
33. What was the type of enemy action that resulted in the tank's disablement? _____
34. Did tank explode? _____ **Burn?** _____
35. Number of tanks in immediate vicinity at time of disablement _____
36. Does specific time and date of disablement correspond with date of death of above named deceased? _____
37. Precise time and date of destruction of tank _____
(Night?) (Day?)
38. Did any of the crew members escape? _____ Prisoners? _____

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

39. Did death occur from any other means? (i. e., truck, jeep, mines, drowning, or small arms fire) _____
If so, give complete and thorough results of the interrogation.
- a. Are all certificates and statements of people who possessed knowledge of the case attached? _____
40. State the specific clues and evidence that were obtained in securing the name and facts regarding the above listed deceased _____

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

41. Were personal effects recovered by the investigating team? **No**
- If not, state reason **all taken by German Police.**
- a. Were identification tags found at the time of death? **No**
- Where? _____ By whom? _____
- Present disposition **Unk.**

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

- b. Were personal effects found at the time of death? **Yes**
 Where? **on body** By whom? **A man named Meyer in Neustadt and a girl named Forschhammer in**
 Present disposition: **turned over to German Military Police. ((Heinheim**
- c. Was deceased identified by living members of the crew at the time of death? **NO**
- d. Did Cemetery Register or cross indicate the immunization shot? **NO**
42. Was Deceased given first aid? **No** If so, where? _____
 By whom? _____ Are statements from the medical people attached? _____
43. Was deceased evacuated to a German civilian hospital? **NO**
 Where? _____ Names of people concerned _____
44. Is it possible on surface investigation to obtain from civilian sources a physical description of the deceased? **NO**
45. Is it possible on surface investigation to obtain from civilian sources the condition of the remains? _____
Body was dismembered and mangled
 (Burnt? Decapitated? etc) _____
46. Do facts surrounding death show any evidence that it might be an atrocity case? **NO**
 a. If so, give basis for positive assumption _____
 b. If so, has higher headquarters been notified? _____
47. Was case previously investigated? **NO** By whom? _____
 When? _____
48. Give full names, addresses, and information obtained from each person interviewed
Priest Johann Housner, house No. 112 HEINHEIM, Germany-
Michael Stober, House No. 48 HEINHEIM, Germany
49. Are all positive statements regarding identification and particulars surrounding death attached? **Yes**
50. Has any information been given concerning isolated burials in the area outside the immediate vicinity? _____
51. Was investigation preceded by advanced publicity? **Yes**
 (If special investigation, give case number) _____
52. Give Brief Narrative _____
See attached sheet.
 (Use attached, sheets if necessary)

Franz Myks
 Signature of Interpreter
FRANZ MYKS
German Civilian
 Rank ASN

Organization

William A. Morton
 Signature of Investigator
WILLIAM A. MORTON
Cpl. 44011133
 Rank ASN
606 QM.G.R. Co.
M.B.U. # 8
 Organization

UNK X- 6457
REINHEIM U.S. MIL. CEM.
ST. AVOLD -EEEE- 11- 129

Question 52. Give Brief Narrative:

BOWMAN, David Walter

This man died in a plane crash 25 February 1944 at HEINHEIM, Germany. One crew member presumed to be W. BOWMAN and one other Unknown died in the crash. The rest of the crew parachuted to the ground and were taken prisoner. The three men who died were taken to HEINHEIM cemetery and buried 3 March 1944.

William A. Morton
WILLIAM A. MORTON
Cpl. 44011133
606 QM. G.R. Co.
M.B.U. # 5

Heinheim - X - ~~6297~~ 6297

MACR Comm. 1-38

Gen. M-49 - 12.077 ATA

Bowman, David W 4- 0-0772

*1st Lt
M-3 1-436
M.A. 1- 514-44*

X 6457

MASS GRAVE OF THREE AMERICAN SOLDIERS IN THE CEMETERY AT HEINHEIM GERMANY.

HEINHEIM, Germany

Map 1:250,000 sheet M-49 Munich, Germany

coord. WT 9537

Location: in the cemetery at Heenheim, Germany

Sketched by: Cpl. William A. Morton

606 QM.G.R. Co.

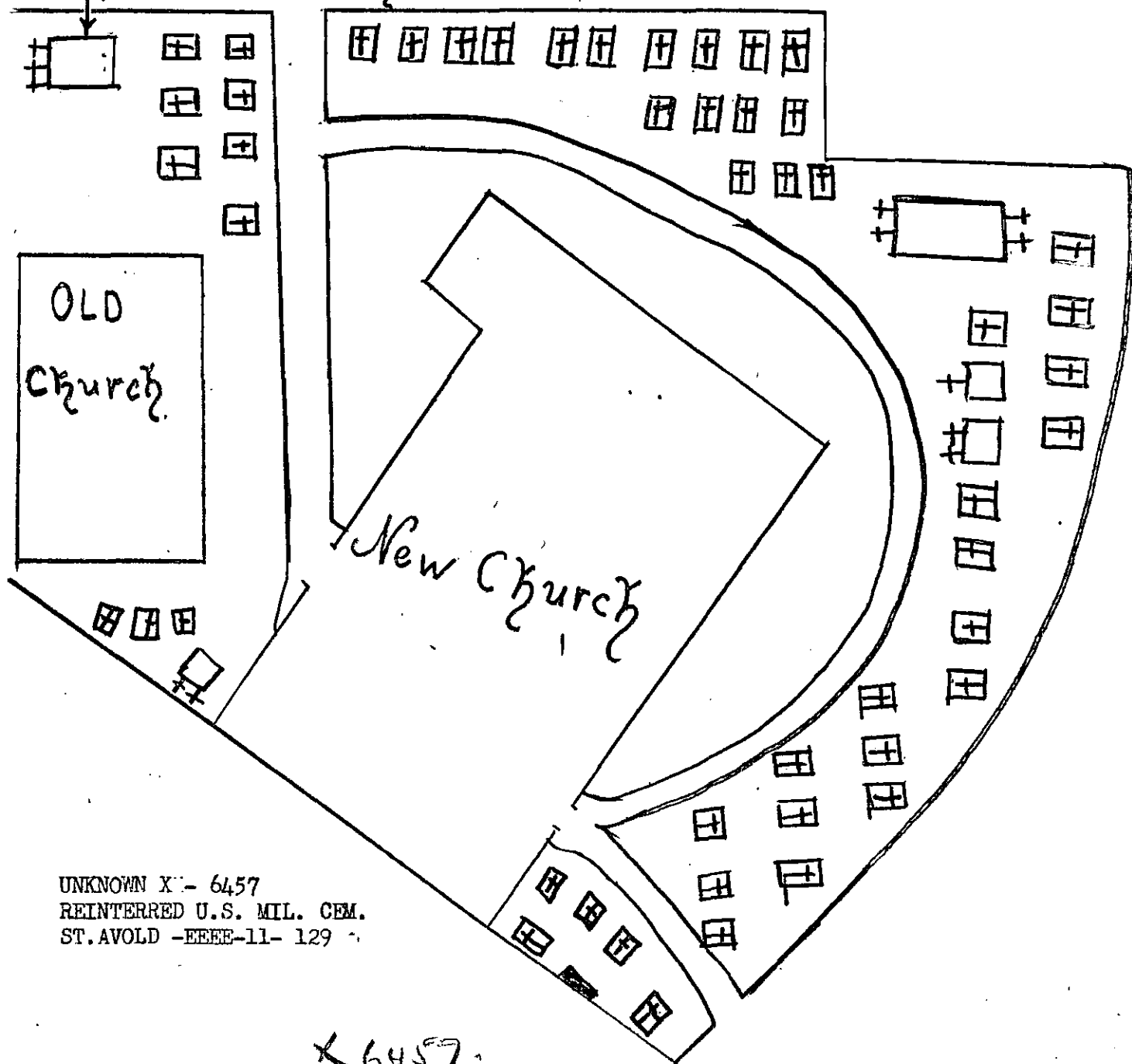
M.B.U. # 5

Date: 31 May 1946

Not to scale.

CHURCH AND CEMETERY
AT HEINHEIM GERMANY

Mass Graves of Three American Soldiers



UNKNOWN X- 6457
REINTERRED U.S. MIL. CEM.
ST. AVOLD -EEEE-11- 129

X 6457

X-6457
 ST. AVOLD

IDENTIFICATION CHECK LIST

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

E.O. 785



Unknown X 6457
 Cemetery ST. AVOLD
 Plot EEEE Row 11 Grave 129

1. REPROCESSED
 Arrived at cemetery 11 Aug 48
(Hour) (Date)
2. Place of death _____
(Name of closest town) (Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)
3. Remains recovered or disinterred by REPROCESSED BY MOBILE TEAM #1
(Name and organization)
4. Evacuated to Cemetery by _____
(Name and organization)
5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

Item	Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
------	-------------------	-------	--

* Headgear _____
(Type)

Raincoat _____

X Overcoat GLOVE, WOOL, OD,

X Jacket, Field LEATHER, REMNANTS OF

Jacket, Combat _____

Mackinaw _____

Sweater _____

Jacket, HBT _____

* Shirt, Wool OD _____

X Undershirt, Wool REMNANTS OF

Undershirt, Cotton _____

Trousers, HBT _____

* Trousers, Wool OD _____



Belt, web NONE

X Drawers, wool REMNANTS OF

Drawers, cotton NONE

Leggings, wool NONE

X Socks, cotton REMNANTS OF

* Shoes (type) NONE

Overshoes NONE

X Web Equipment HARNES (type) PARACHUTE, REMNANTS OF

X (Other item) SUIT, FLYING, ELECTRICALLY HEATED, REMNANTS OF

X (Other item) COVERALLS, SUMMER FLYING, REMNANTS OF

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

Chevrons or Insignia NONE
(Type & location; shirt, jacket, coat, helmet)

Shoulder Patch NONE

Does clothing indicate that deceased was a member of the AIR FORCE Ground or Naval Force?

6. Description of Remains :

Age UTO Height UTO Weight UTO Description of wounds UTO

Bandages or dressings UTO Scars UTO
(Length, width, location)

Tattoos UTO
(Number, location — illustrate on separate page)

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

Sunburn or tan, other than hand and face UTO

Complexion UTO
(Light, medium, dark, clear, pimples, pocks, freckles)

Build UTO
(Large, fat, thin, muscular)

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

Hair UTO
(Baldness, widows peak, distinctive cutting or other characteristics)

Sideburns UTO Mustache UTO Beard or UTO
(Color, setting, shape) (Color, size, shape) (Length, heavy)

Goatee (Light, color, extent) *U/D*

Eyes (Color, setting, shape) *U/D* Eyebrows (Color, bushiness, extent across nose) *U/D*

Nose (Size, shape, straight) *U/D* Ears (Size, set close to or far from head) *U/D*

Mouth (Large, medium, small) *U/D* Lips (Small, large, full) *U/D*

Teeth *NO TEETH REMOVED* (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin (Prominent, receding, pointed, dimples, double) *U/D*

Jaw (Large, small, normal) *U/D* Circumference of head in inches *MISSING* (Hat band)

Neck (Size, length, short, normal, wrinkled) *U/D* Larynx (Prominent, normal) *U/D*

Shoulders (Broad, straight, small, rounded) *U/D* Arms (Length, muscular, color, extent and quantity of hair) *U/D*

Hands *U/D*

Fingers (Short, thick, long, slender, size of knuckles, missing fingers or joints) *U/D*

..... (Unusual characteristics of fingernails)

Chest (Size of nipples, color, quantity and extent of hair, large, small, normal) *U/D*

Waist (Size of navel, appendectomy, amount, quantity, and color of hair) *U/D*

Back (Quantity and extent of hair) *U/D* Circumcision *U/D* (Yes-no) Pubic Hair *NONE FOUND* (Color)

Hernioplasty (Yes-no; location) *U/D*

Legs (Inseam, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair) *U/D*

Feet (Size, corns, callouses, flat) *U/D* Toes (Slender, straight, crooked, overlap) *U/D*

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

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

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

If not, explain TOO DECOMPOSED AND/OR MISSING

8. Has tooth chart been prepared? NO If not, explain NO ONE FOUND
(Yes-no)

CASE PROCESSED AS PER F. O. 985

9. Remarks REMAINS RECEIVED IN SKELETAL FORM. CLOTHING FOUND IN DEBRIS. BONE NO MARKINGS. NO TEETH RECOVERED. NO EVIDENCE OF HEALED FRACTURES OR AMPUTATIONS. BURIAL REPORT RECEIVED WITH CREMATION RECORDS. ESTIMATED WEIGHT OF RECOVERED REMAINS 10 LB.

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

- Mr. HARPER
- Mr. DEPASS
- Mr. RILE

Thomas J. [Signature]
(Officer's Name)

Rank _____ Service _____

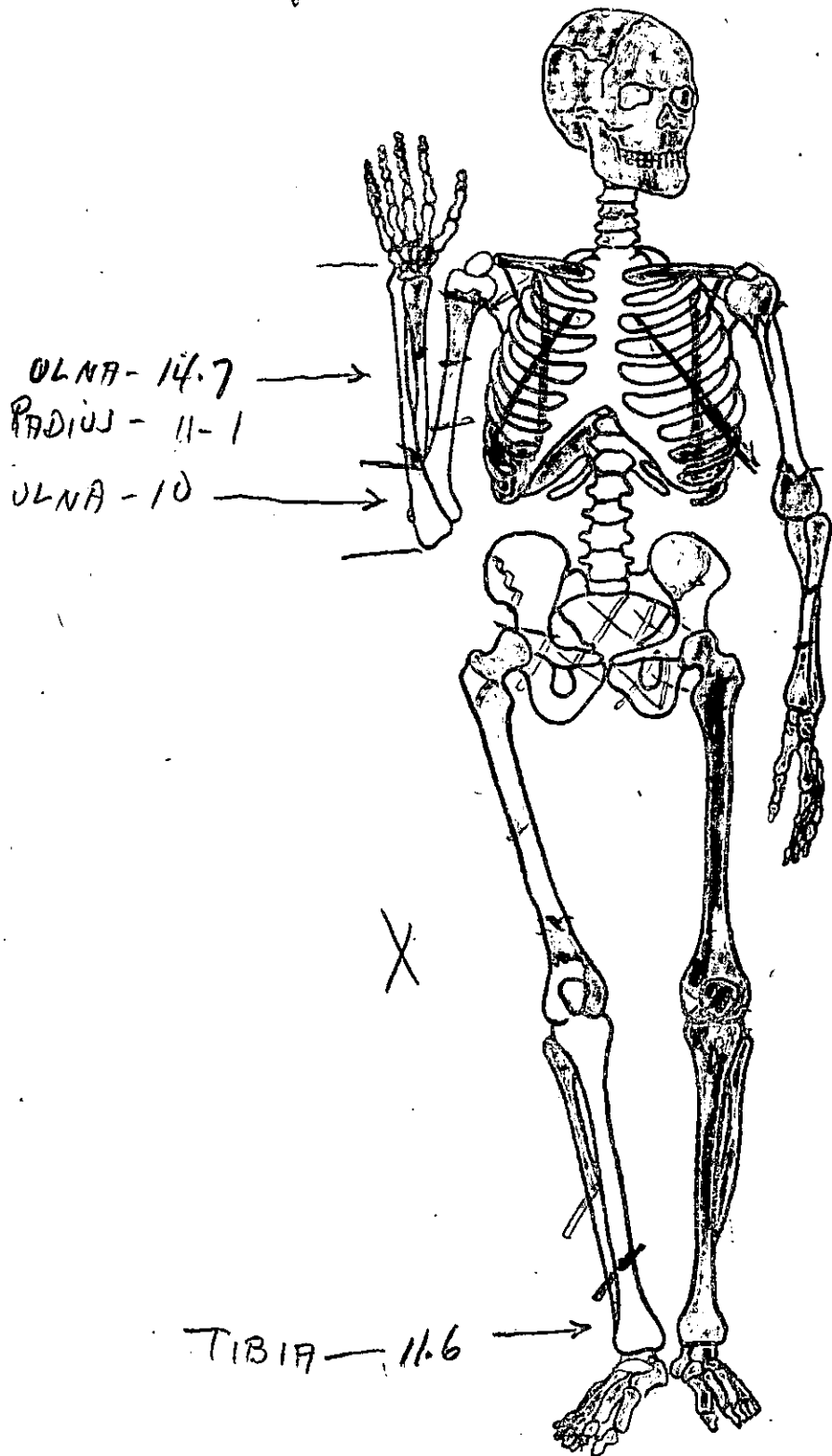
(Organization)

X-6457

SKELETAL CHART STAVOLD - 11 AUG 48

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

EEEE-11-129



[Handwritten signature]

MEM

1

USMC EPINAL
Plot: B Row: 50 Gr: 10
Date of Burial: 30 June 50 DISINTERMENT DIRECTIVE
Verified by GRS Officer
Allen L. LAWSON 1st LT INE.

Opp
9/2/50

SECTION A - *Allen L. Lawson*
NAME AND BURIAL LOCATION OF DECEASED, DIRECTIVE NUMBER 3574 00000 DATE 15 01 48
DAY MONTH YEAR

NAME SERIAL NUMBER RANK ARM DATE OF DEATH
UNKNOWN X - 006457 1

CEMETERY ST AVOLD - METZ DISPOSITION OF REMAINS
0 ~~3502~~ 80
CODE DIST. PT.

PLOT ROW GRAVE COUNTRY CAUSE OF DEATH
4E 11 129 FRANCE 6

SECTION B - CONSIGNEE AND NEXT OF KIN NO FLAG SENT

NAME AND ADDRESS OF CONSIGNEE: ~~SAINTE-AVOUD, FRANCE EPINAL, FRANCE~~
(EX ADMINISTRATIVE COORDINATOR)
NAME AND ADDRESS OF NEXT OF KIN: These remains are unidentifiable and are to be permanently interred. (Hq. AGRC-15 Dec 48)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER RANK DATE OF DEATH DATE DISINTERRED
UNKNOWN X - 006457 4 Aug 48

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

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: Remnants of flying suit - Mattress cover
CONDITION OF REMAINS: Skull missing and all major bones fractured and/or missing.

OTHER MEANS OF IDENTIFICATION: Report of Burial found with remains
NAT

MINOR DISCREPANCIES: None
FILE
RECORDS ANNOTATED
DATE 27 Jul 50
NAME R. T. Johns

REMAINS PREPARED AND PLACED IN CASKET: *R.T.J.* BR. MEM. DIV.
DATE 12 Aug 48 BY Charles W Fredricks, Embalmer

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

CASKET BOXED AND MARKED: All markings, tags & plates verified by William J Smith
DATE 12 Aug 48 BY Charles W Fredricks, Embalmer William J Smith, 1st Lt CE

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.
Final casketing by William J Smith, 1st Lt CE, 7857 AGRC Zone 3 Hq
William J Smith, 1st Lt Ce SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

Consignee corrected - Reg. Div.

10

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC St Avold France		TO OIC Neuville Belgium	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER Cpl William H Bryant, 33720418	
SIGNATURE OF SHIPPER <i>Frank B Callaghan</i> Frank B Callaghan, 1st Lt PA	DATE 2 Nov 49	SIGNATURE OF RECEIVER	DATE

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>SAVILL VAOLD</i>	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

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

ONWARD SHIPPED

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

IRMAI

1923
 GENT 233
 and European
 (St. Avoird, France)

X-5528 X-5100 X-6137
 X-6127 X-1717 X-1718
 7-11-57

9 February 1960

SUBJECT: Certificates of Unidentifiability of Remains

TO: Chief, Registration Division
 7887 Graves Registration Detachment
 APO 58, o/o Postmaster
 New York, New York

1. Reference is made to your Transmittal Letters, Numbers 4625, 4630, 4674 and 4556, dated December 1949 and January 1950, forwarding Certificates of unidentifiability.

2. This Office approves the classification of the following Unknowns in USMC St. Avoird, France as Unidentifiable:

<u>Unknown</u>	<u>Plot</u>	<u>Row</u>	<u>Grave</u>
X-1688	SSB	2	24
X-8106	Y	5	51
X-8137	Y	12	38
X-8150	AAAA	4	43
X-8297	DEDE	9	102
X-8307 A	EEEE	8	90
X-8337 B	XXX	6	61
X-8387 C	XXX	6	62
X-8457	EEEE	11	129

FOR THE QUARTERMASTER GENERAL:

S. H. MATE
 Lt Colonel, GMC
 Memorial Division

Sehrothsedt
 Clements
 RSE

IRMAI

307 - ...

AIRMAIL

QMGMT 293

1st Ind

GRS European

SUBJECT: Certificates of Unidentifiability of Remains
Transmittal Letter #4556

Dept. of the Army, OCMG, Washington 25, D. C., 31 January 1950

TO: Chief, Registration Division, 7887 Graves Registration
Detachment, APO 58, c/o Postmaster, New York, New York

1. This Office approves the classification of Unknown X-6306, listed on basic communication, as Unidentifiable.
2. Unknown X-3215 was suspended to your headquarters by letter dated 19 January 1950.
3. It is recommended that all action in connection with other Unknowns listed be suspended pending further notification from this Office.

FOR THE QUARTERMASTER GENERAL:

Incls w/d

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

Rice/ld

Foy

REB

Cy furnished: Adm Sect

314.6 DMS Emerged
 T/L 45-56
 HA

X 293
 X-6457
 ST ANOVA

REB
 TEC

AIRMAIL

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 U S ARMY

RRE 293

293 Unit - France X-6457 (St. Avold) 30 Nov 1949
(Date) *dlv*

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X- 6457, Plot 4 E,
Row 11, Grave 129, USMC St. Avold, France,
have been reviewed and it is the opinion of the Board of Review, this
headquarters, that sufficient evidence is not available to establish
the identity of the deceased concerned, therefore, these remains should
be classified as unidentifiable.

2. Report of Reprocessing of remains was forwarded to the Office
of The Quartermaster General by Transmittal Letter No. 3106, dated
27-9-48.

3. Remarks:

Case reviewed by undersigned Members of the Board of Review:

COL H P HENRY, O-12589
LT COL E. D. MULVANY, O-359598
CAPT EDWARD F. PRICE, JR. O-1588236

Received 3 Feb 50
Not identifiable from DDMG
information presently
available

*NAN
file 3 Feb 50
Schmitt
Sgt Br*

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 U S ARMY

RRE 293

30 November 1949

(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

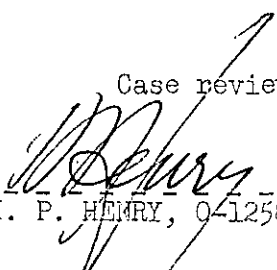
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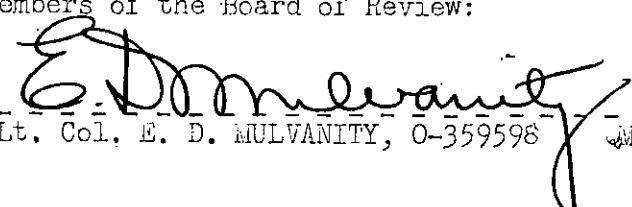
3. Remarks:

See Case History attached.

Case reviewed by undersigned Members of the Board of Review:


Col. H. P. HENRY, O-12589

QMC


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

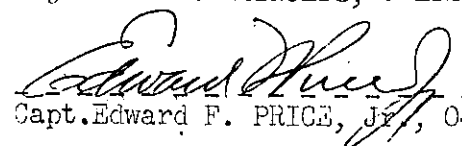
QMC

Maj. Charles REYNOLDS, O-182639

TC

Maj. Gerald SWARTHOUT, Sr., O-267451

CE


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

QMC

1st Lt. Frederick S. DAVID, O-1826041

CAV

CWO Frank GEE

USA

Capt. Jack C. HAYES, O-1577297

QMC

3 Feb 50
Not identifiable from
information presently
available

DDMG

Inc #7

CASE HISTORY

UNKNOWN X-6387 A, B & C,
X-6297 & X-6457

U.S. MILITARY CEMETERY St. Avold, France

1. The remains of the five unknown decedents shown above were recovered from the village church-yard at HIENHEIM, Germany. These cases are associated with the two deceased crew members, 1st Lt Daniel W. BOWMAN and S/Sgt. Warren C. LAWRENCE, of A/C #42-100266 which crashed 25 February 1944. All other crew members of the subject aircraft are listed as RFD. This association was established through the presence of a flying boot bearing the marking "Lt D. W. BOWMAN" that was found amongst the mass burial of Unknowns X-6387 A, B & C. Due to a lack of identifying data it could not be determined which of the five remains are those of 1st Lt BOWMAN and S/Sgt. LAWRENCE.

2. Since a statement (See attached) made by a resident of Hienheim, one Johann HAUSSNER, implies that an American four-motored bomber crashed at Hienheim on 25 April 1945, a thorough check of MACR files was made in an effort to tie in an aircraft with the area concerned, however, this action proved negative. Captured German dulag records were not of any value to the investigation of this case, since dulag records were not maintained after the month of MARCH 1945. The tooth chart contained in the case of Unknown X-6387 A was checked against all available dental data on unresolved casualties within the Germany M-49 area with negative results. An effort was made to associate another aircraft that crashed around the 25th February 1944; however, only the aircraft of which Lt BOWMAN and Sgt. LAWRENCE were crew members could be associated with the HIENHEIM area.

3. In view of the foregoing it is recommended that these cases be declared Unidentifiable.

7/13

[Handwritten signature]

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

27 SEP. 1948

RRE 200.2

Date _____

SUBJECT: Reprocessing of Remains


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

The remains of X - 6457
interred in Plot EEEE, Row 11, Grave 129, USMC St. Avold
France, have been reprocessed and the information
not previously forwarded to your Headquarters is herewith submitted.

GLOVE, Wool O.D.	:	
JACKET, Leather	:	Remnants
UNDERSHIRT, Wool	:	Remnants
DRAWERS, Wool	:	Remnants
SOCKS, Cotton	:	Remnants
PARACHUTE HARNESS	:	Remnants
FLYING SUIT	:	Electrically Heated Remnants
COVERALLS, Summer Flying	:	Remnants
TEETH	:	Not recovered

No evidence of healed fractures or amputations.

FOR THE COMMANDING GENERAL :


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

1 Incl. :
Skeletal Chart

SKELTAL CHART

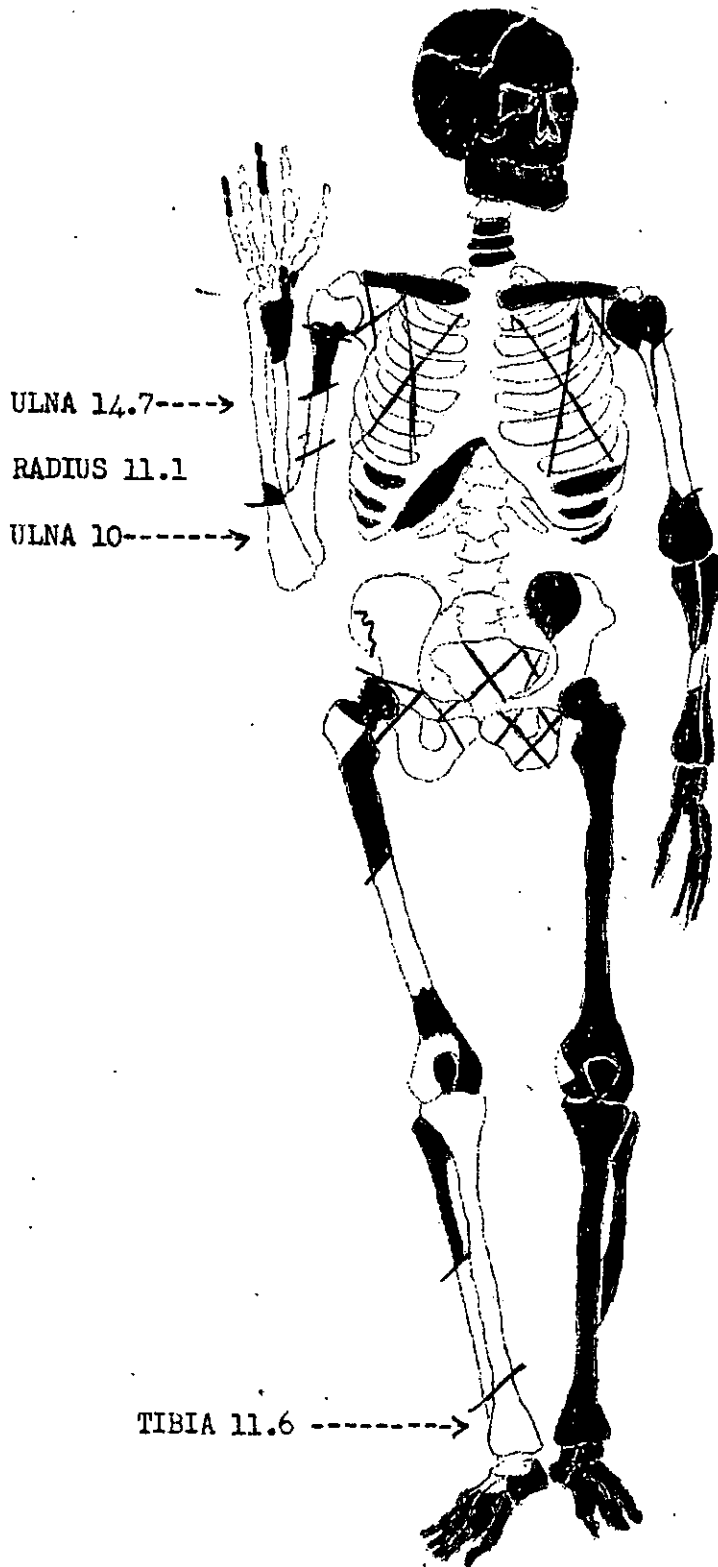
11 August, 1948

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

X-6457

St. Avold

EEEE : 11 : 129



6

DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED	DIRECTIVE NUMBER 3574 00000	DATE 15 01 48
		DAY MONTH YEAR

NAME	SERIAL NUMBER UNKNOWNA-001457	RANK	ARM 1	DATE OF DEATH
				DAY MONTH YEAR
CEMETERY 293 unk France 46457 (St. Avold)	DISPOSITION OF REMAINS			
ST AVOLD - METZ	3503 80			
				CODE DIST. PT.
PLOT 4E 11	ROW 12A	GRAVE FRANCE	COUNTRY	CAUSE OF DEATH

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE SAINT AVOLD, FRANCE (BY ADMINISTRATIVE ORDER)	NAME AND ADDRESS OF NEXT OF KIN
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SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISTINTERRED
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	ORGANIZATION USAAF	RELIGION	IDENTIFICATION VERIFIED BY NAME AND TITLE	

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
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OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES

REMAINS PREPARED AND PLACED IN CASKET

DATE	BY	EMBALMER (Signature)
CASKET SEALED BY		
CASKET BOXED AND MARKED		SHIPPING ADDRESS VERIFIED BY
DATE	BY	

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

SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report GMC Form 1194a for major discrepancies.

RESTRICTED

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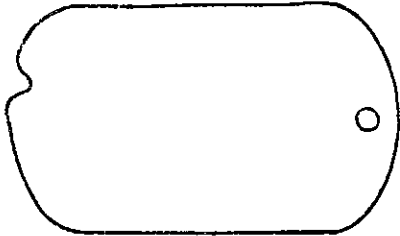
WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

1 July 1946

Impression Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)		SERIAL No.
Unknown X-6457		Unknown
GRADE	ORGANIZATION	BRANCH OF SERVICE
Unknown	Unknown	A.A.F.
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
Unknown	Unknown	

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
Heinheim, Germany	Plane Crash	Est. Febr. 1944

EMERGENCY ADDRESSEE (Name, relationship, and address)

Unknown

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none)	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)
None	
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no)	
Yes	None

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

None

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

U.S. Military Cemetery (Q-260584) St. Avold, France

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
1 July 1946	1030	Casket	Temp Wooden Cross	EEEE	11	129

WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE	PLOT No.	ROW No.	GRAVE No.
Yes	Civilian Cemetery Heinheim, Kelheim Germany M-49 (WT 9537) 1/250,000			

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
General Service	CH. J.B. JOHNSON, 1st Lt.	One Copy W.D. Q.M.C. Form 1042 - Report of Interment - Placed in burial bottle and buried with remains
IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)	
No	Yes-Embossed Plate	

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
UNKNOWN X- 6458	UNK	UNK	AAF	128


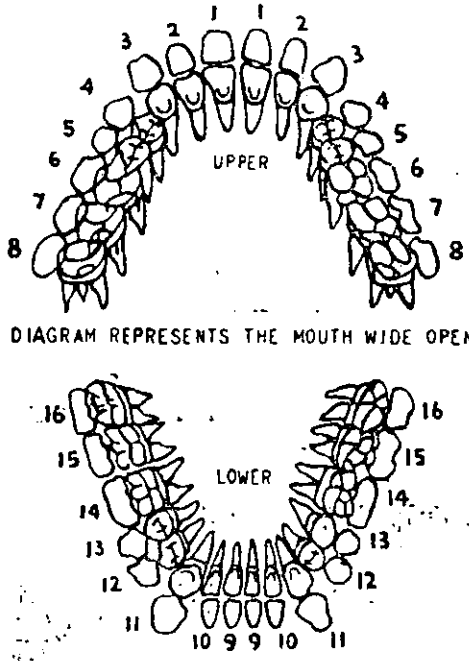




BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
UNKNOWN X- 6475	UNK	UNK	AAF	130

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
Max M. Schiff HQ, Third Field Command A.G.R.C.	RALPH W. SLEATOR, Major Inf. 2nd Field Command

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

RESTRICTED

RESTRICTED

LEFT LITTLE FINGER	Section 3. UNIDENTIFIED REMAINS.			
	INSTRUCTIONS: (a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks. (b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.			
LEFT RING FINGER	HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR
	UTD	UTD	UTD	UTD
	BIRTHMARKS, SCARS, OR TATTOOS		UTD	
LEFT MIDDLE FINGER	WEAPON AND SERIAL No.		LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
	None		None	Heinheim, Germany
	OTHER IDENTIFICATION CLUES			
	None			
LEFT INDEX FINGER	FILLINGS  SILVER FILLING GOLD FILLING		 UPPER LOWER DIAGRAM REPRESENTS THE MOUTH WIDE OPEN	
LEFT THUMB	CAVITIES  CAVITY DECAYED			
RIGHT THUMB	MISSING TEETH  TOOTH MISSING			
RIGHT INDEX FINGER	CROWNED TEETH  PORCELAIN CROWN GOLD CROWN			
RIGHT MIDDLE FINGER	BRIDGE WORK  GOLD BRIDGE			
RIGHT RING FINGER				
RIGHT LITTLE FINGER	FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY			
	None			
	AUG 20 3 15 PM '46 RECORDS BRANCH			
	REMARKS:			
	Attached: Form 11 Check List of Unknowns. Unable to obtain Form 1A Tooth Chart or finger prints due to missing portions. Est. weight of remains received 6 Lbs.			

CHECK LIST OF UNKNOWNNS

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

Unknown X 6457
Cemetery Q-260584 St Avold
Plot ~~XXXX~~ Row 11 Grave 129

1. Arrived at cemetery 10 00 1 July 1946
(hour) (date)
2. Place of death Hoinheim, Germany (WT 9537) M-49 1/250,000
(name of closest town) (coordinates and letter Prefex, maps)
(Sheet, scale and serials used)
3. Remains recovered or disinterred by 535th QM. Group
(name and organization)
4. Evacuated to Cemetery by Major Wm. J. Pelton HQ. Third Field Command A.C.R.C.
(name and organization)
5. Description of clothing and equipment : (if clothes do not fit, obtain size from body measurements).

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

Item

*Headgear None
(type)

Raincoat None

Overcoat None

Jacket, Field None

Jacket, Combat None

Mackinaw None

Sweater None

Jacket, HBT None

*Shirt, Wool OD None

Undershirt, Wool remnants

Undershirt, Cotton None

Trousers HBT remnants, badly burned

*Trousers, Wool OD None

Belt, Web None

Drawers, Wool None

Drawers, Cotton remnants

Leggins, Wool None (Note unusual lacing)

Socks, Cotton None

*Shoes None (type)

Overshoes None

Web Equipment None (Type)

(Other item) remnants of leather flight jacket, remnants of parachute harness,

(Other item) remnants of woolen glove

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

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

Shoulder Patch None

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

8. Description of Remains :

Age UTD Height UTD Weight UTD Description of wounds UTD

Bandages or dressings UTD Scars UTD
(length, width, location)

Tattoos UTD
(Number, location — illustrate on sep. page)

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

Sunburn or tan, other than hands & face UTD

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

Build UTD
(large, fat, thin, muscular)

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

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

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

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

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

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

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

Teeth **UTD**
(white, size, unevenness, spacing, noticeable crowns, fillings, extract).

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

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

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

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

(extent and quantity of hair)

Hands **UTD**

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

(Unusual characteristics of fingernails)

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

Back **UTD** Aist **UTD**
(quantity & extent of hair) (size of navel, appendectomy, amount)

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

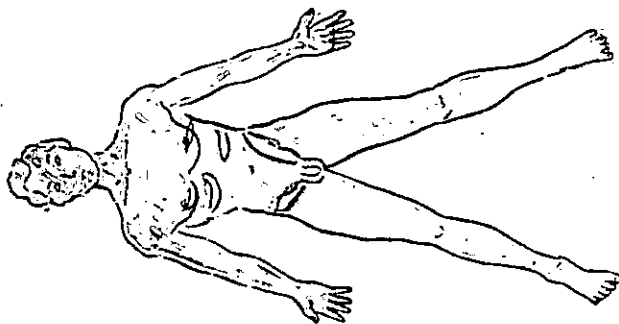
Hernioplasty **UTD**
(yes-no; location)

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

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

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

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



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

If not, explain No hands

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

12. Remarks : Body badly burned. Est. weight of remains received 6 lbs.

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

Wm. J. Pelton (ms)

Wm. J. Pelton

Officer's Name

Major

Rank

Q.M.C.

Service

Hq. Third Field Command A.G.R.C.

Organization