

7887 GRAVES DETACHMENT

APO 757

243 unk St. Avold X-7101 A

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-7101 A, ST AVOLD, FRANCE.

(FOC) DRAGUIGNAN

*file 2 mar 51
Kirkland
Sant.*

REPORT OF INVESTIGATION

6591

AREA SEARCH

AGRC Form # 10 (Revised)

1 January 1946.

12 August 1946.

Date

NAME Unknown X 7101 RANK Unk. 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? . If so, state the facts as to whom you believe the deceased to be :
No

a. NAME _____ RANK _____ ASN _____

b. ORGANIZATION _____

3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY _____

See attached sketch

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

a. Date of above burials See sketch Common Graves? _____

X-7101

5. Name and Type of Cemetery Wiener Neustadt Cemetery (Civilian)
(Military or Civilian)
6. Map Coordinates of the Cemetery XX3548; 0-48; 1:250,000
a. Town Wr. Neustadt Country Austria
7. Give exact location in cemetery of the remains.
a. Section K Row 6 Grave ---
b. Is Sketch attached? Yes
8. If remains are not located in a cemetery, give exact location.
a. Town _____ Coordinates _____
b. Is sketch attached? _____
c. Is area mined? _____
9. How is the grave marked? Wooden Cross
10. If grave is marked with cross, give exact markings thereon None
a. From what source was this information obtained? _____
(Identification tags, personal effects)
b. By Whom _____
11. Where are the cemetery records? Cemetery
(Town Hall, cemetery, burgermeister's office)
a. What information was contained thereon? None
b. Where was the information obtained? _____
c. By Whom? _____
12. What is the date of death? Est. Oct. 1943
a. Give basis Statement of Civilian.
13. What is the cause of death? Unknown
b. Give basis _____
14. What is the date of burial? Oct. 1943
a. Give basis Statement of Civilian.

15. Where was the place of death? Vicinity Wiener Neustadt Coords _____
 Give basis Burial in Wiener Neustadt
16. Where were the remains found? Unknown Coords _____
 a. By Whom? Unknown
 b. Is sketch attached? No
17. Was a casket used? Yes Who furnished the casket? Town
 Type of casket Wooden How marked? None
18. Who made the burial Unknown
 (Civilian, American Mil. or German Mil.)
 a. What are the names and addresses? Unknown
 b. Are certificates and statements attached? No

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? Unknown
 a. Give location in plane from which the bodies were removed _____

 (Tail gunner, pilot, radio, turret, etc., or front, side, of plane)
 b. Near wreckage? _____
20. Scene of crash must be investigated. Give complete results of investigation (if removed, state when and by whom). Wreckage removed by German Military
 a. Type of Plane No information available
 b. Markings and/or name on plane _____
 c. Give numbers on motors, machine guns, instruments, radios or other equipment: _____
21. How did crash occur? Unknown Anti-aircraft
Enemy Planes? Collision?

22. Did plane explode in the air? Unknown On ground? Unknown
23. Did plane burn in the air? Unknown On ground? Unknown
24. What was the direction of the flight? Unknown
25. What was the civilian opinion regarding destination of plane? Unknown
26. Had bombs been released prior to the crash? Unknown
27. Does specific time and date of crash correspond with date of death of above named deceased?
Unknown
28. Number of planes in formation prior to crash Unknown
29. State precise time and date of plane crash Unknown
(Night? Day?)
30. Were parachutists seen Unknown How many? _____ Escaped? _____
Prisoners? _____

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

31. Were remains found in wreckage of a tank? _____
- a. Give specific position in tank from which deceased was removed. _____

(Radio man, driver, assistant driver or... front, side, or back)
- b. Near wreckage? _____
32. Location of destroyed tank must be investigated. Give complete results of investigation. (If removed,
state when and by whom)
- a. Type of tank _____
- b. Markings and/or name of tank _____
- c. Numbers on motors, machine guns, ammunition, instruments, etc _____
33. What was the type of enemy action that resulted in the tank's disablement? _____

34. Did tank explode? _____ Burn? _____

35. Number of tanks in immediate vicinity at time of disablement _____

36. Does specific time and date of disablement correspond with date of death of above named deceased? _____

37. Precise time and date of destruction of tank _____
(Night? Day?)

38. Did any of the crew members escape? _____ Prisoners? _____

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

39. Did death occur from any other means? (i. e., truck, jeep, mines, drowning, or small arms fire) _____

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 Removed by German Military

a. Were identification tags found at the time of death? Unknown

Where? _____ By Whom? _____

Present disposition Unknown

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? Unknown

Where? _____ By Whom? _____

Present disposition Unknown

X-7101

- c. Was deceased identified by living members of the crew at the time of death? _____

 Unknown
- d. Did Cemetery register or cross indicate the immunization shot? _____ No
42. Was Deceased given first aid? _____ Unknown _____ If so, where? _____
 By whom? _____ Are statements from the medical people attached? _____

43. Was deceased evacuated to a German civilian hospital? _____ Unknown
 WHERE? _____ Names of people concerned _____

44. Is it possible on surface investigation to obtain from civilian sources a physical description of the deceased? _____ No
45. Is it possible on surface investigation to obtain from civilian sources the condition of the remains?

 No
 (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? _____ Yes _____ By Whom? _____ GRO-USFA

 When? _____ Approx Feb. 1946
48. Give full names, addresses, and information obtained from each person interviewed _____
 JOSEPH STROBL , Wiener neustadt Cemetery

 JOHANN SCHROENER
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?

Yes

51. Was investigation preceded by advanced publicity? No

(If special investigation, give case number) Unknown

52. Give Brief Narrative Case in Russian Zone; no publicity

Impossible to get more detailed information under circumstances

(Use attached sheets, if necessary)

Signature of Interpreter

Rank ASN

Organization

Signature of Investigator

MICHIHIRO HAYASHIDA
2nd Lt. 0-1338230

Rank ASN

347 QM Bn
Organization

X-7101

List of American flyers buried in the cemetery in Wiener

Neustadt

Number of Names of the flyers	Correct or .presumable date of death	Cause of death	Remarks
28 flyers of several grades	1 - 10 - 43	Plane crash	Found in several places and buried here in a mass grave
2	2 - 11 - 43		
1 flyer	1 - 10 - 43		Found after 1/10/43 in neighborhood Rax works
1 flyer	1 - 10 - 43	Came down by parachute and found dead hanging in a tree	Was found in Burgenland and buried here in a mass grave
1 Latiner	May 1944	Plane crash	Found in several places & buried here in a mass grave
1	May 1944	" "	"
1	May 1944	" "	"
1	May 1944	" "	"

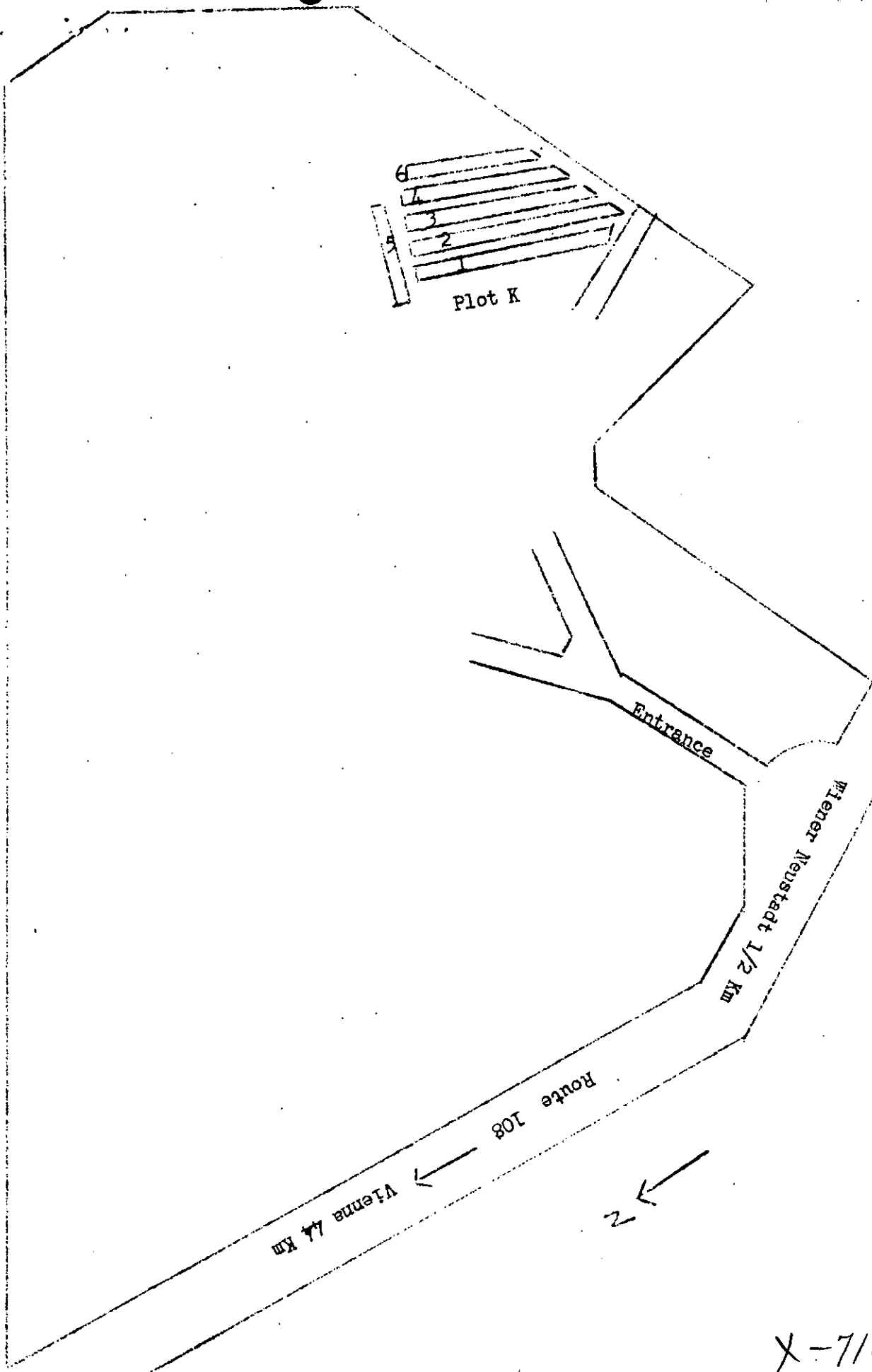
This information is correct to the best of my knowledge but I cannot say that it is complete

Translation

S/Schoerner, Johann

X-7101

Cemetery plan of Wiener Neustadt, Cemetery, Wiener Neustadt, Austria
Coords (xx 3548), Sheet 0-48; 1:250,000, Graz; Showing ~~Location~~ Location of American Graves



X-7101

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN <i>X-7101 (A)</i>			2. DATE OF REPORT <i>19 August 1949</i>		
3. NAME OF CEMETERY <i>USMC St. Auld</i>	4. PLOT <i>4J</i>	5. ROW <i>2</i>	6. GRAVE <i>32</i>	7. DATE OF	
				DISINTERMENT —	REINTERMENT —

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT <i>24-27</i>	9. ESTIMATED HEIGHT <i>U.T.D.</i>	10. COLOR OF HAIR (Pubic) <i>Reddish Brown</i>	11. RACE <i>U.T.D.</i>
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS
Mortuary Plates

13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES
None

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

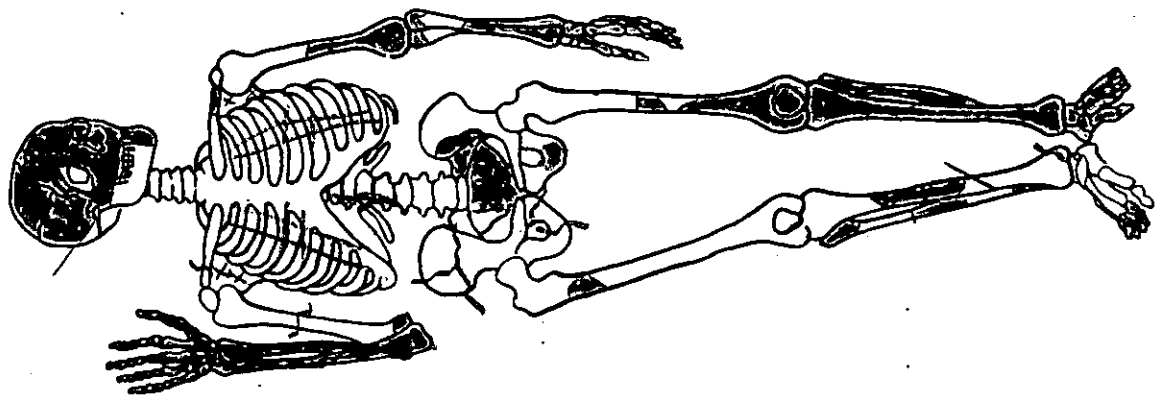
15. WAS BODY MANGLED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT EXTENT? <i>See item 19</i>
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16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS
None noted

17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)
None

X *X-7101*

19. BLACK OUT PARTS OF BODY NOT RECORDED



X-7101 (A)
17 Vertebrae Present

Est. Height: U.T.D.

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

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

25 strands
Red-brown
Pubic hair
Excess Post
L. Scapula
Heavier bones
than (B)

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

Remains previously processed by
F.O.S. and received in skeletal form
Teeth present as charted.
No clothing.
Est. Wt. reprocessed remains: 10 Lbs.
Est. Height: U.T.D.
Est. Age: 24-27 years.
Pubic Hair: Reddish Brown.

24-27 No Flesh burn throat

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

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

SIGNATURE

Wesley A. Neep

E.O. #2422
TOOTH CHART

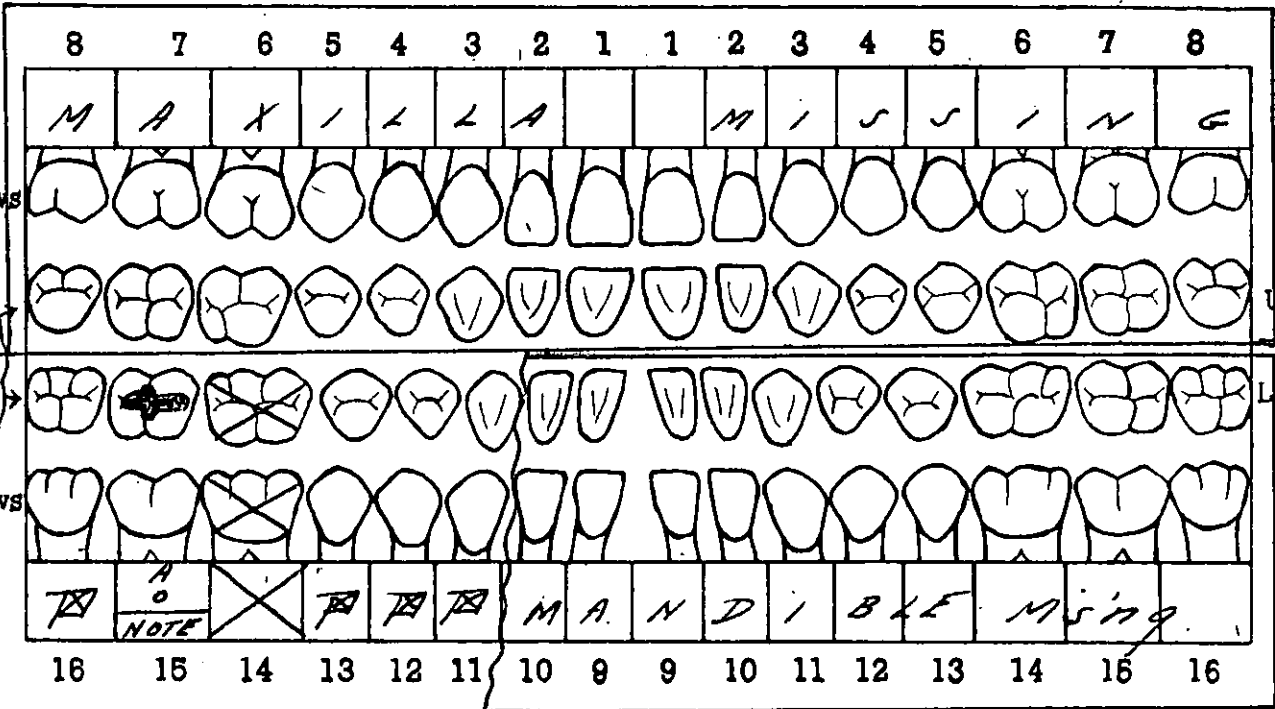
UNK X-7101 (A)
 USMC St. Avold
 4J-2-32

19 August 1949
 Date

Last Name	First	Initial	Grade	Serial No.
Unit			Organization	
Place of Death		Date of Death	Cause of Death	

Right

Left



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

Size - Average
 Color - Ivory
 Posthumously
 Missing - R16, 13, 12, 11.

R15 Inclined mesially to a marked degree and leaving a space between R15 and R13 of an estimated 2MM
 Signature of Officer or other person who prepared Tooth chart
 Wesley A. Neep
 DAC SP-8
 Verified by G. R.C. Officer

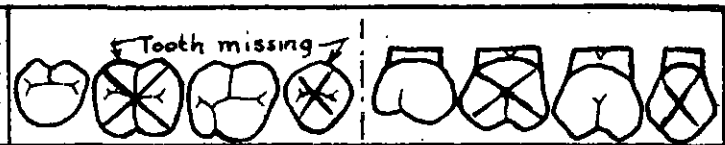

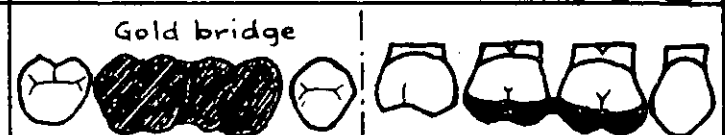
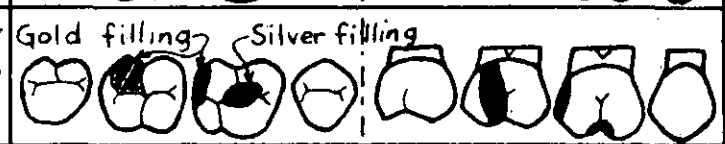
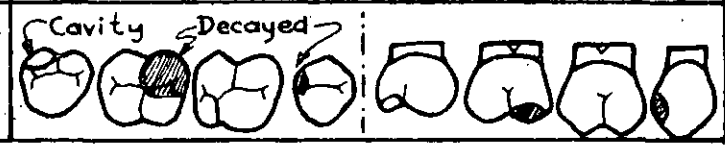
Wear - Average on R15 indicating the presence of

ET FORM 1-22 (29 AUG. 46)

(OLD GRAVE REGISTRATION FORM 1-A)
 R7 in the maxilla.

AGL (3) 10-46-50M-6912-1207

X-7101

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

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

Strasbourg, 20 August 1949

EXHUMATION ORDER #2422

I, the undersigned, Doctor Simonin, Professor at the Faculty of Medicine of Strasbourg, medical expert of the Tribunals, certify that on the 18th of August 1949, I examined the remains of:

X-7101 "A", Plot YYYY, Row 2, Grave 32, USMC St. Avold
X-7107 "B", Plot PPPP, Row 4, Grave 45, USMC St. Avold

in order to place the teeth (Chart "A") with the remains of either X-7101 "A" or X-7101 "B", and identify Charles Erickson, if possible.

INVENTORY OF THE REMAINS OF X-7101 "A"

One half of the right mandible, and one portion (anterior) of the left mandible are present.

The other bones which were present are indicated on the attached skeletal chart.

MEASUREMENTS

The measurement of the long bones was impossible, because none of them were intact.

INVENTORY OF THE REMAINS OF X-7101 "B"

No head, nor maxilla or mandible were present (See attached chart).

MEASUREMENTS

Left ulna (fractured): 29.4; corresponding height: 188 (?)
Right radius (fractured): 28.2; corresponding height: 191 (?)

DISCUSSION

The comparison of the Form 371 for Erickson and the tooth chart leads to the following observations:

1) The fragment of the right mandible does not belong to Erickson, because Erickson's 16 was not erupted, 14 was extracted and 15 had a different filling.

X-7101

2) The anterior fragment of the left mandible belongs to Erickson, because the fillings of L-12 and L-13 correspond exactly and L-14 was extracted.

Which are the remains of Erickson?

X-7101 "A" must be eliminated because Erickson was 21 years old. If we consider the articulation surface of the pubic symphysis of X-7101 "A", we observe that the conformation and the structure of the surface are those of an older individual; the crests and the four blades disappeared almost completely.

The height of X-7101 "B" could not be determined with precision, because there were only one radius and one ulna present, and both were fractured. The average height of 189 cm was obtained, but this does not correspond to the real height of the individual. It indicates, however, that the individual was tall. We know that Erickson was only 71" (181 cm) tall.

At this point of the discussion, it should be noted that the Rollet's tables used in the determination of height by measurement of the long bones, are only valid for the heights under 180cm. For individuals taller than 180 cm, the heights indicated by the Rollet tables were established by proportional calculation, purely theoretically.

CONCLUSIONS

The remains of X-7101 "B", Plot PPPP, Row 2, Grave 32 belong to Erickson, Charles R., 2/Lt., O-742572, by elimination of X-7101 "A".

The fragment of mandible which was previously interred with the remains of X-7101 "A" belongs to Erickson and was placed with Erickson's remains.

/s/ DR. C. SIMONIN

/t/ DR. C. SIMONIN

Professor at the Faculty
of Medicine of Strasbourg
Director of the Institute
of Legal and Social Medicine

TRANSLATED BY:

MARY NEGLER
Adm. Asst.

X-7101

SUMMARY

E.O. #2422

1. Reprocessing of these two (2) associated cases revealed with the aid of Dr. Simoni (anthropologist) that case X-7101 A was from three (3) to six (6) years older than "Erickson" thus making case X-7101 B as "Erickson".

2. The teeth identifiable as those belonging to "Erickson" were placed with case X-7101 B.

3. Teeth for the second deceased were then placed with case X-7101 A by the process of elimination.

4. An extra portion of left scapula was segregated as excess anatomically to either of these two (2) associated cases and has been designated as CIL #3920.

5. A detailed report by Dr. Simoni will follow separately.

USMC St Avold
19 August 1949

WESLEY A. NEEP
DAC SP-8

X-7101

USMC DRAGUIGNAN

P.H.S.

Plot: C R 10 Gr: 16
Date of Burial: 18 Jul '50
Verified by GRS Off **DISINTERMENT DIRECTIVE**
R. W. GANSEL, 1/Lt., OMC
Revised

1/2/50

SECTION A - NAME AND BURIAL LOCATION OF DECEASED
DIRECTIVE NUMBER: 3574 00000
DATE: 15 05 48
DAY MONTH YEAR

NAME: UNKNOWNNA - 007101
SERIAL NUMBER: 007101
RANK: [blank]
ARM: J
DATE OF DEATH: [blank]
DAY MONTH YEAR
CEMETERY: *St. Avold Metz*
ST. AVOLD - METZ
DISPOSITION OF REMAINS: ~~15801~~ 80
CODE 3501 DIST. PT.
PLOT: 4J ROW: 2 GRAVE: 32 COUNTRY: FRANCE
CAUSE OF DEATH: 6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE: ~~ST. AVOLD, FRANCE~~ DRAGUIGNAN FRANCE
~~(BY ADMINISTRATIVE ORDER)~~
NAME AND ADDRESS OF NEXT OF KIN: These remains are unidentifiable and are to be permanently interred. (Hq. AGRC-15 Dec 49)
(27)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME: [blank] SERIAL NUMBER: [blank] RANK: [blank] DATE OF DEATH: [blank] DATE DISTINTERRED: [blank]
IDENTIFICATION TAG ON: REMAINS MARKER
ORGANIZATION: USAAF
RELIGION: [blank] IDENTIFICATION VERIFIED BY: [blank]
NAME AND TITLE: [blank]

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: [blank] CONDITION OF REMAINS: [blank]

OTHER MEANS OF IDENTIFICATION: SEE ATCHD WORK SHI
FILE
REMAINS ASSOCIATED
DATE 3 Aug 50
NAME [Signature]
GR. MEM. DIV.

MINOR DISCREPANCIES: [blank]

REMAINS PREPARED AND PLACED IN CASKET
DATE: [blank] BY: [blank]
CASCKET SEALED BY: Millard H McWhorter Embalmer
EMBALMER (Signature): *Millard H. McWhorter*
Millard H McWhorter Embalmer

CASCKET BOXED AND MARKED: [blank]
DATE: 15 Sept 48 BY: Millard H Mc Whorter Embalmer
All markings tags & plates verified by: *Donald T O'Brien*
Donald T O'Brien 1st Lt Inf

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

Donald T O'Brien
Donald T O'Brien 1st Lt Inf
SIGNATURE OF GRS INSPECTOR

1 Prepare Discrepancy Report OMC Form 1194a for major discrepancies.

PREVIOUSLY DISPATCHED AS UNKNOWN X-7101 Consignee corrected - Reg. Div.

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC ST AVOLD FRANCE		TO CAMP ... BELGIUM	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER Cpl Adolph J. Civello 36737686	
SIGNATURE OF SHIPPER FRANK B. O'CONNOR	DATE 18 Oct 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 (BY ADMINISTRATIVE ORDER) ST. AVOLD FRANCE		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

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

7. SHIPPED

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

DISBURSEMENT DIRECTIVE

Section 1		Directive Number Date		
Name & Burial Location of deceased		3574	Day	Month Year
NAME		SERIAL NUMBER	Date of death	
UNKNOWN		X-007101-A	Day	Month Year
Cemetery		Disposition of Remains		
St. Avold		Poll-Doubtful.		
Plot	Row	Grave	Country	Code Dist. rt.
4J	2	32	France.	Cause of death

Section 2 - Consignee and Next of kin

Name and Address of Consignee	Name and Address of Next of kin
	These remains are unidentifiable and are to be permanently interred. (Hq. AGRC-15 Dec 49).

Section 3 - Disinterment and Identification

Name	Serial Number	Rank	Date of Death	Date Disinterred
UNKNOWN	X-007101-A	Unk	Est Oct 43	12 May 48

Identification Tag on Remains	Organization	Religion	Identification Verified by
X Marker GRS		Unk	Geo W Lowry Embalmer
			Name & Title

Section 4 - Preparation of remains for shipment

Nature of Burial	Condition of remains
Mattress cover	Skull mandible & All main bones fractured Decomposition complete - Body disarticulated

Other Means of Identification

Report of Burial found with remains

Minor Discrepancies

None

Remains prepared and placed in transfer box

Date 18 May 48 By Geo W Lowry Embalmer

Casket sealed by Geo W Lowry Embalmer

Casket boxed and marked

Date 18 May 48 By Geo W Loery

All markings, tags and plates verified by JAMES C ANDERSON, 1st Lt Inf

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

JAMES C ANDERSON, 1st Lt Inf Hq/Hq Det

531 OMGP. Signature of GRS Inspector (Grade & Orgn)

1. Prepare Discrepancy report JC Form 1194a for major discrepancies.

2. JC Form 1194 - This form modified by: Hq Third Zone, AGRC, EA, AFU 58 US Army dated 4 March 1948

incl 132

AIRMAIL

all

unk France X-7101A (St. Avold)

QMCNT 293

Unknown X-7101 A
USMC St. Avold, France

1 February 1950

SUBJECT: Identification of World War II Deceased

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

1. Reference is made to Transmittal Letter #4522, dated 29 November 1949, forwarding Certificate of Unidentifiability of Remains.

2. This Office approves the classification of Unknown X-7101A, interred in USMC St. Avold, France, as Unidentifiable.

FOR THE QUARTERMASTER GENERAL:

OR
ofb

Ruditz/id
Foy
REB
Cy **Furnished:** Adm Sect

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

mm
REB
TEC

✓
2
14
50
24
21
22

AIRMAIL

JAMBIA

OUT
FEB 2 1960
REGISTRATION
BANGKOK

10

10

10

JAMBIA

RHS JEW

6

DISINTERMENT DIRECTIVE

293 Unk. France X-7101 (A) (St. Avold)

SECTION A - NAME AND BURIAL LOCATION OF DECEASED	DIRECTIVE NUMBER 3574 00000	DATE 13 05 48 DAY MONTH YEAR
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NAME	SERIAL NUMBER UNKNOWNNA-007101	RANK	ARM J	DATE OF DEATH DAY MONTH YEAR
CEMETERY ST AVOLD - METZ				DISPOSITION OF REMAINS 3303 80 CODE DIST. PT.
PLOT 4J	ROW 2	GRAVE 32	COUNTRY FRANCE	CAUSE OF DEATH 5

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE ST. AVOLD, FRANCE (BY ADMINISTRATIVE ORDER)	NAME AND ADDRESS OF NEXT OF KIN
---	---------------------------------

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISTINTERRED
IDENTIFICATION TAG ON <input 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
OTHER MEANS OF IDENTIFICATION	
MINOR DISCREPANCIES	

REMAINS PREPARED AND PLACED IN CASKET

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

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

PREVIOUSLY DISPATCHED AS UNKNOWN X-7101

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

RRE 293

25 November 1949
(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X- 7101 A, Plot YYYY, Row 2, Grave 32, 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. 2703, dated 18-3-48.

3. Remarks:

See Case History attached

Case reviewed by undersigned Members of the Board of Review:

Col. H. P. HENRY, O-12589

JMC

E. D. Mulvanity
Lt. Col. E. D. MULVANITY, O-359898

JMC

Maj. Charles REYNOLDS, O-182639

TC

Maj. Gerald SWARTHOUT, Sr., O-267451

CE

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

JMC

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

CAV

CWO Frank GIER, W-2102925

USA

Capt. Jack C. HAYES, O-1577297

JMC

Received

Identifiable from

30 Nov 50

Incl #6

T R #4522, 29 Nov 49

1. Unknown X-7101-A was disinterred from a common grave in the civilian cemetery of Wiener-Neustadt, Austria, with the remains of thirty-three (33) other American casualties. A total of twenty-three (23) of subject casualties have been identified and interred as Knowns in USMC at St Avoild.

2. Unknown X-7101-A and X-7101-B were reprocessed 19 Aug. 49 at which time an extra portion of left scapula was segregated and designated as CIL # 3920. After reprocessing X-7101-B was identified as 2/Lt Charles ERICKSON, O-742572 and an attempt was made to associate X-7101-A with the unresolved casualties of Lt. Erickson's plane with negative results.

3. As the tooth chart for X-7101-A consist of the right portion of the Mandible and shows R-11, 12, 13, 16 Posthumously missing, R-14 missing before death and R-15 with an Ao filling, it has been impossible to make a direct association for this case with any of the other casualties in Austria.

4. It is recommended that X-7101-A St Avoild be made unidentifiable.

ARTHUR E. DAROIS

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

RRE 200,2 - Unknown X-7101 (A)
(St Avold)

23 November 1949

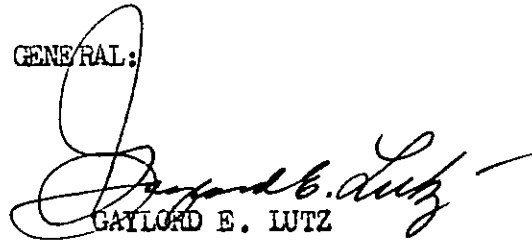
SUBJECT: Reprocessed Reports

TO: The Quartermaster General
Washington 25, D. C.
ATTENTION: Memorial Division

1. Reference is made to your radio WCL 23998 dated 16 November 1949.

2. Inclosed herewith for your information is a photostatic copy of reprocessed reports for Unknown X-7101 (A), Plot JJJJ, Row 2, Grave 32, USMC St Avold, France.

FOR THE COMMANDING GENERAL:

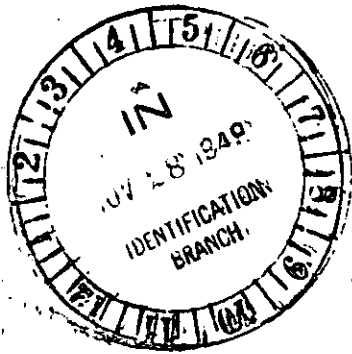


1 Incl
Reprocessed Reports
for Unknown X-7101 (A)

GAYLORD E. LUTZ
1st Lt, QMC
Actg Asst Adj Gen



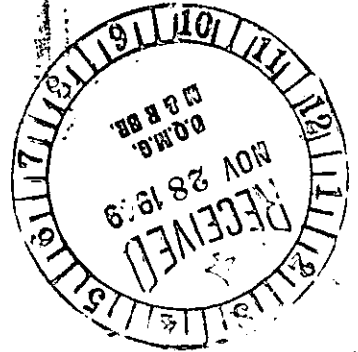
893 Vols France X-7101 (St Avold)



NOV 25 49



OUT



FOR DIVISION - 1949
RECORDED - 1949
INDEX

NOV 28 1949
RECORDED - 1949
INDEX

TO : SAC, NEW YORK
FROM : SAC, NEW YORK
SUBJECT: [Illegible]

RE: [Illegible]

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE [Illegible] BY [Illegible]

OFFICE OF THE DIRECTOR
FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D. C. 20535

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN <i>X-7101 (A)</i>				2. DATE OF REPORT <i>19 August 1949</i>	
3. NAME OF CEMETERY <i>USMC St. Avoird</i>	4. PLOT <i>4J</i>	5. ROW <i>2</i>	6. GRAVE <i>32</i>	7. DATE OF	
				DISINTERMENT —	REINTERMENT —

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT <i>24-27</i>	9. ESTIMATED HEIGHT <i>U.T.D.</i>	10. COLOR OF HAIR (Pubic) <i>Reddish Brown</i>	11. RACE <i>U.T.D.</i>
-------------------------------------	--------------------------------------	---	---------------------------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS
Mortuary Plates

13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES
None

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

15. WAS BODY MANGLED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT EXTENT? <i>See item 19</i>
--	---------------------------------------

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS
None noted

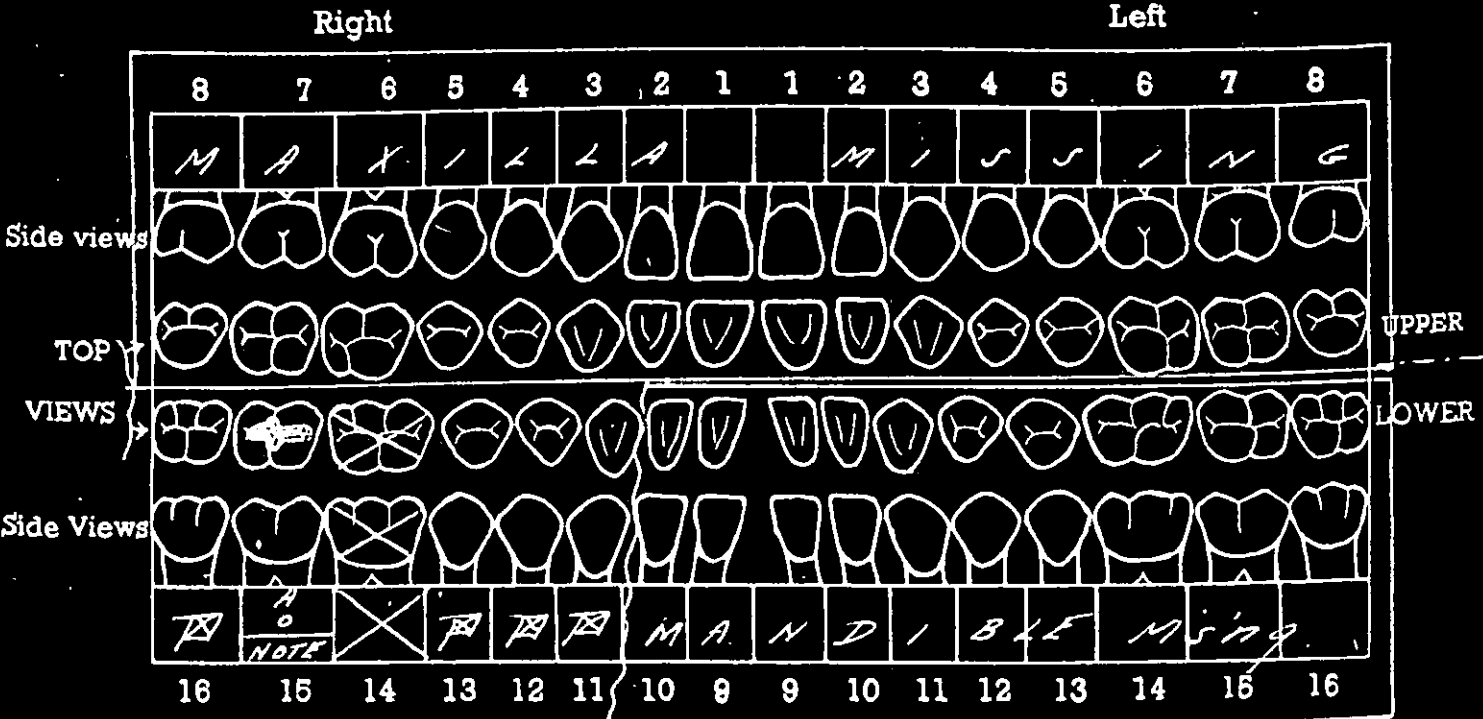
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)
None

F.O. #2422
TOOTH CHART

UNK X-7101 (A)
 USMC St. Avold
 4J-2-32

19 August 1949
 Date

Last Name	First	Initial	Grade	Serial No.
Unit			Organization	
Place of Death		Date of Death	Cause of Death	



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.

Size - Average
 Color - Ivory
 Posthumously

Missing - R16, 13, 12, 11.
 R15 Inclined mesially to a marked degree and leaving a space between R15 and R13 of an estimated 2mm

Wesley A. Neep
 Signature of Officer or other person who prepared Tooth chart
 DAC SP-8

Wear - Average on R15 indicating the presence of

ET FORM 1-22 (29 AUG.46)

(OLD GRAVE REGISTRATION FORM 1-A)

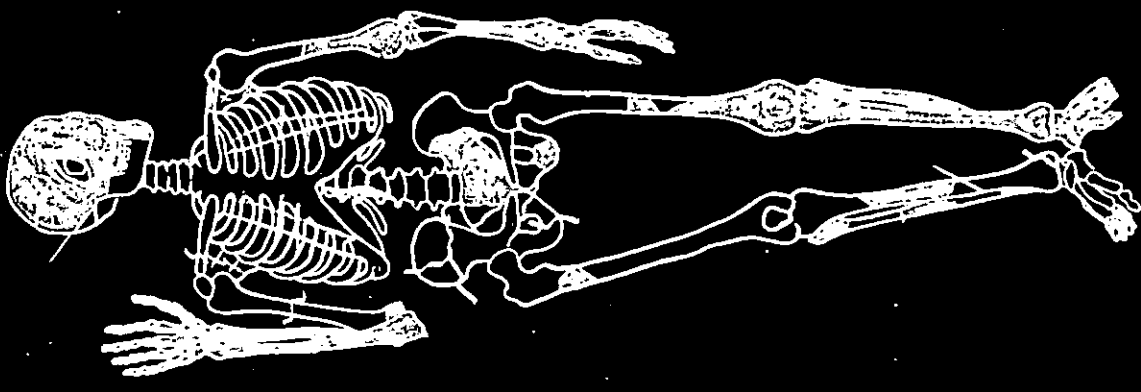
R7 in the maxilla.

AGL (3) 10-46-50M-6912-1207

19. BLACK OUT PARTS OF BODY NOT REQUIRED

X-7101 (A)

17 Vertebrae Present



Est. Height: U.T.D.

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

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

- 25 strands Red-brown pubic hair
- Excess Port L. Scapula
- Heavier bones than (B)

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

Remains previously processed by F.O.S. and received in skeletal form
 Teeth present as charted.
 No clothing.
 Est. Wt. reprocessed remains: 10 Lbs.
 Est. Height: U.T.D.
 Est. Age: 24-27 years.
 Pubic Hair: Reddish Brown.

24-27 No flesh burn throat

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

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

SIGNATURE

Wesley A. Hoop

SUMMARY

E.O. #2422

1. Reprocessing of these two (2) associated cases revealed with the aid of Dr. Simoni (anthropologist) that case X-7101 A was from three (3) to six (6) years older than "Erickson" thus making case X-7101 B as "Erickson".

2. The teeth identifiable as those belonging to "Erickson" were placed with case X-7101 B.

3. Teeth for the second deceased were then placed with case X-7101 A by the process of elimination.

4. An extra portion of left scapula was segregated as excess anatomically to either of these two (2) associated cases and has been designated as CIL #3920.

5. A detailed report by Dr. Simoni will follow separately.

USMC St Avold
19 August 1949

WESLEY A. NEEP
DAC SP-8

Strasbourg, 20 August 1949

EXHUMATION ORDER # 2422

I, the undersigned, Doctor Simonin, professor at the Faculty of Medicine of Stasbourg, medical expert of the Tribunals, certify that on the 18th of August 1949, I examined the remains of:

X-7101 "A", Plot YYYY, Row 2, Grave 32, USMC St. Avold
X-7101 "B", Plot PPPP, Row 4, Grave 45, USMC St. Avold

in order to place the teeth (Chart "A") with the remains of either X-7101 "A" or X-701 "B", and identify Charles Erickson, if possible.

INVENTORY OF THE REMAINS OF X-7101 "A"

One half of the right mandible, and one portion (anterior) of the left mandible are present.

The other bones which were present are indicated on the attached skeletal chart.

MEASUREMENTS

The measurement of the long bones was impossible, because none of them were intact.

INVENTORY OF THE REMAINS OF X-7101 "B"

No head, nor maxilla or mandible were present (See attached chart).

MEASUREMENTS

Left ulna (fractured): 29.4; corresponding height: 188 (?)
Right radius (fractured): 28.2; corresponding height: 191 (?)

7
6
6
3

DISCUSSION

The comparison of the Form 371 for Erickson and the tooth chart leads to the following observations:

- 1) The fragment of the right mandible does not belong to Erickson, because Erickson's 16 was not erupted, 14 was extracted and 15 had a different filling.

2) The anterior fragment of the left mandible belongs to Erickson, because the fillings of L12 and L13 correspond exactly and L 14 was extracted.

Which are the remains of Erickson?

X-7101 "A" must be eliminated because Erickson was 21 years old. If we consider the articulation surface of the pubic symphysis of X-7101 "A", we observe that the conformation and the structure of the surface are those of an older individual; the crests and the four blades disappeared almost completely.

The height of X-7101 "B" could not be determined with precision, because there were only one radius and one ulna present, and both were fractured. The average height of 189 cm was obtained, but this does not correspond to the real height of the individual. It indicates however, that the individual was tall. We know that Erickson was only 71 " (181 cm) tall.

At this point of the discussion, it should be noted that the Rollet's tables used in the determination of height by measurement of the long bones, are only valid for the heights under 180 cm. For individuals taller than 180 cm, the heights indicated by the Rollet tables were established by proportional calculation, purely theoretically.

CONCLUSIONS

The remains of X-7101 "B", Plot PPPP, Row 2, Grave 32 belong to Erickson, Charles R., 2/Lt., O-742572, by elimination of X-7101 "A".

The fragment of mandible which was previously interred with the remains of X-7101 "A" belongs to Erickson and was placed with Erickson's remains.

/s/ DR. C. SIMONIN

/t/ DR. C. SIMONIN

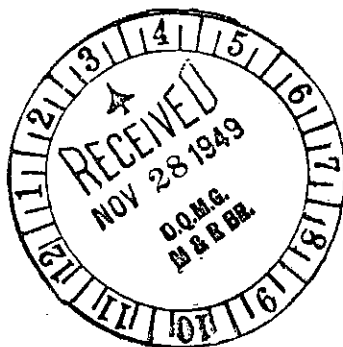
Professor at the Faculty
of Medicine of Strasbourg
Director of the Institute
of Legal and Social Medicine.

TRANSLATED BY

Mary Necker

MARY NECKER
Adm. Asst.

6699



IDENTIFICATION CHECK LIST

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

D.D.# 570, dated 4 Nov 47

Unknown X - 7101 (A)B

Cemetery St. Avold, France

Plot JJJJ Row 2 Grave 32

Date reprocessed :

1. Arrived at cemetery 10 Dec 47
(Hour) (Date)

2. Place of death Vicinity of Wiener Neustadt, Austria
(Name of closest town) (Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3. Remains ~~recovered~~ disinterred by and reprocessed by I.S.1st. Zone (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	<u>None</u> (Type)		
Raincoat	<u>None</u>		
Overcoat	<u>None</u>		
Jacket, Field	<u>None</u>		
Jacket, Combat	<u>None</u>		
Mackinaw	<u>None</u>		
Sweater	<u>None</u>		
Jacket, HBT	<u>None</u>		
* Shirt, Wool OD	<u>None</u>		
Undershirt, Wool	<u>None</u>		
Undershirt, Cotton	<u>None</u>		
Trousers, HBT	<u>None</u>		
* Trousers, Wool OD	<u>None</u>		

Belt, web Remnants of, with officer's type buckle

Drawers, wool None

Drawers, cotton None

Leggings, wool None

Socks, cotton None

* Shoes Remnants of (type) Service shoe

Overshoes None

Web Equipment None (type)

(Other item) Remnants of electrically heated flying boots.

(Other item) Remnants of electrically heated flying suit.

* 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, Ground or Naval Force? **AAF**

6. Description of Remains :

Age UTD Height UTD Weight UTD Description of wounds UTD

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

UTD Tattoos
(Number, location -- illustrate on separate page)

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

Sunburn or tan, other than hand and face UTD

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

Build UTD
(Large, fat, thin, muscular)

Hair Missing
(Color, length, quantity, curly, wavy, straight, whorls, or definite parting)

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

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

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

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

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

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

Teeth **See Tooth Chart**
(White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin **UTD**
(Prominent, receding, pointed, dimples, double)

Jaw **UTD** Circumference of head in inches **Fractured**
(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** **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 and extent of hair, large, small, normal)

Waist **UTD**
(Size of navel, appendectomy, amount, quantity, and color of hair)

Back **UTD** Circumcision **UTD** Pubic Hair **Missing**
(Quantity and extent of hair) (Yes-no) (Color)

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

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

Feet **UTD** Toes **UTD**
(Size, corns, callouses, flat) (Slender, straight, crooked, overlap)

Evidence of healed fractures **UTD**
(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 None found

8. Has tooth chart been prepared? Yes (Yes-no) If not, explain
Partial tooth chart (left mandible w/ two teeth present) was filed with case papers of X-7101-A, identified as Erickson, Charles R, O-742 572.

9. Remarks Est. weight of remains 1.8 lbs.

Remains received wrapped in a mattress cover. Processing revealed a mass burial of two men in skeletal form found common in a mass of debris. Separation was made and each buried as follows:

X - 7101 (A)B in Plot JJJJ, Row 2, Grave 32.

X - 7101A(B) in Plot PPPP, Row 4, Grave 45.

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.

Separation was possible by comparison and differences in bone structures and sizes. The bones of X - 7101 A(B) are slightly larger. Measurements impossible, major bones of both cases are badly fractured. Teeth found in debris and charted and reburied with case X - 7101 (A)B. Clothing found in debris. No clothing marks found. Burial Report found. No CRSTAG found. Fluoroscopic Report negative. All clothing reburied with case X - 7101 (A)B.

Woodrow W Wolf
 WOODROW W WOLF
 (Officer's Name)

CAPT

Rank

ONC

Service

OPERATIONS OFFICER

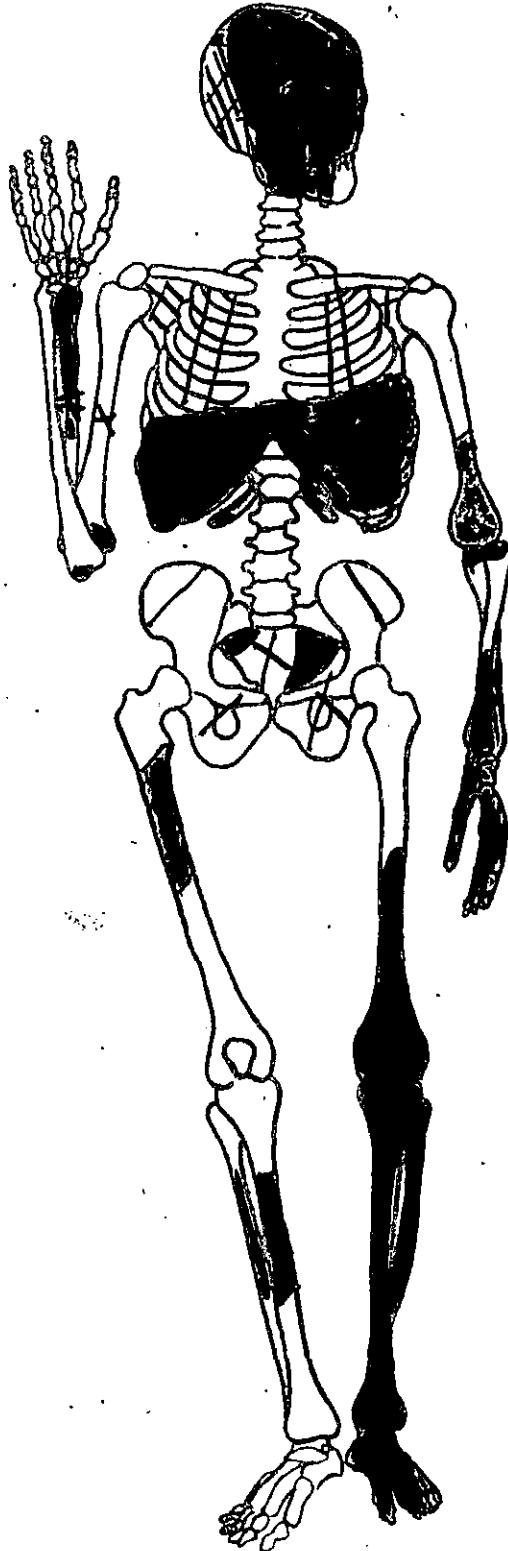
(Organization)

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

R I G H T

L E F T



Est. Height : UTD

CHECK LIST OF UNKNOWNNS

X-7107
6591

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

Unknown X -7101
Cemetery ST. AVOLD, FRANCE Q-260-584
Plot JJJJ Row 2 Grave 32

1. Arrived at cemetery 1500 (hour) 16 August 1946 (date)
2. Place of death Vicinity of Wiener Neustadt, Austria, Coord.: xX 3548
(name of closest town) (coordinates and letter Prefex, maps)
Sheet O-48, Scale 1:250,000
3. Remains recovered or disinterred by 347 QM Bn, 538 Gp. (name and organization)
4. Evacuated to Cemetery by C. I. P. (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	None		
Raincoat	None		
Overcoat	None		
Jacket, Field	None		
Jacket, Combat	None		
Mackinaw	None		
Sweater	None		
XXXXXX	Remnants of one (1) Coverall		
*Shirt, Wool OD	Remnants of khaki		
Undershirt, Wool	Remnants of		
Undershirt, Cotton	Remnants of		
Trousers HBT	None		
*Trousers, Wool ODxx	Remnants of , khaki.		

240

X-7107
6591

Belt, Web — Remnants of

Drawers, Wool Remnants of

Drawers, Cotton Remnants of

Leggins, Wool... None (Note unusual lacing)

Socks, Cotton ... None

*Shoes One (1) (type) Type Service

Overshoes One (1) Overshoe and one (1) Flying shoe electrical

Web Equipment (Type) None

(Other item) ... None

(Other item) None

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

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

Shoulder Patch. None

7. Does clothing indicate that deceased was a member of the Air, Ground or Naval Forces
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)
		UTD				Tattoos.	UTD (Number, location — illustrate on sep. page)
Outstanding moles, warts or birthmarks							UTD (yes-no; description, location)
							UTS
Sunburn or tan, other than hands & face							UTD
Complexion						(light, med. dark, clear, pimples, rashes, freckles)	UTD
Build						(large, fat, thin, muscular)	UTD
Hair						(color, length, quantity, curly, wavy, straight, whorls, or definite parting).	UTD

247

X-7107
6591

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

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

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

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

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

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

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

Jaw UTD (large, small, normal) Circumference of head in inches UTD skull shattered (but band)

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

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

UTD (extent and quantity of hair)

Hands UTD

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

UTD (Unusual characteristics of fingernails)

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

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

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

Hernioplasty UTD (yes-no; location)

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

UTD

242

X-7107

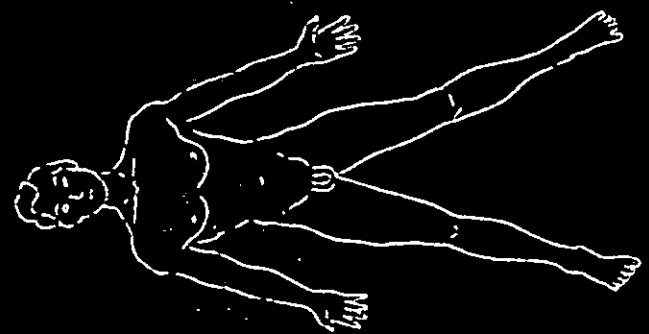
6591

Feet UTD
(size, corns, callouses, flat)

Toes UTD
(spread, straight, crooked, overlap)

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

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



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

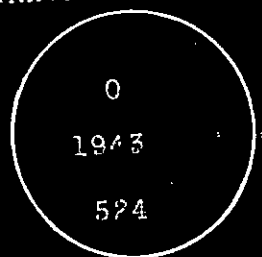
If not, explain Too badly decomposed.

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

12. Remarks : Portions of entire remains recovered in skeleton form from head through feet. Badly burned and broken. All teeth missing. Est. weight of remains recovered 5 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.

GRAVE MARKER



Robert L. Owens
Officer's Name

ROBERT L. OWENS
2nd Lt. INF.
Rank Service

C.I.P.
Organization

9473

JUN 9 1947

X - 7101 (A)B

CORRECTED COPY

Graves Registration Form No. 1 (Revised 1 Sept. 1945)

REPORT OF BURIAL

16 Jan 1947

TM 10-630 AND AR 30-1815

Date

Unknown X - 7101 (A)B

Unk

Unk

Last Name

First

Initial

Rank

Serial No.

Unk
Unit

AAF
Organization

Vicinity of Wiener Neustadt, Austria

Est. Oct. 43

BTB: Plane crash

Place of Death

Date of Death

Cause of Death

1530 16 Aug 46

USMC, St. Avold, France (Q - 260584)

Time and Date of Burial

Name of Cemetery

Name or Coordinates of Location

32

2

JJJJ

Temp. Wdn. Cross.

Grave Number

Row Number

Plot Number

Type of Marker

Disposition of Identification Tags : Buried with body Yes No Attached to Marker Yes No

If No Identification Tags

How were remains identified?

This deceased was segregated from former Unknown X - 7101.

What means of identification were buried with the body?

One (1) copy of GRS Form #1 placed in a burial bottle and buried with the remains.

To determine Right or Left use Deceased's Right and Left.

Who is buried on :

451 Bb. Gp. (H)

Deceased's Right :

Phelps, G.C.Jr. 0-776682

2nd.Lt.

725 Bb. Sq

33

Name

Serial No.

Rank

Organization

Grave No.

Deceased's Left :

X - 7120

Unk

Unk

AAF

31

Name

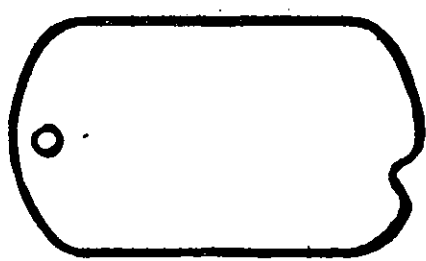
Serial No.

Rank

Organization

Grave No.

Signature or Name, Rank and if possible Organization of person furnishing above Data when other than officer reporting burial.



If print of identification tag is not affixed fill in below :

Emergency Addressee.....

Unk
Name

Unk
Address

Religion.....

Unk

List only Personal Effects Found on Body and disposition of same :

None

This corrected copy of Report of Burial prepared at I.S., 1st. Zone, AGRC, APO 58, US Army, by:

LEO H LAMPRECHT
US DA CIV IS

Leo H. Lamprecht
Signature of Officer or other person reporting burial

WOODROW W WOLF
CAPT OMC
OPERATIONS OFFICER

Woodrow W Wolf
Verified by G.R.S. Officer

APR 22 1947

CORRECTED COPY

IF DECEASED UNIDENTIFIED

Take Fingerprints of Both Hands. If unable to obtain a complete set of Fingerprints, **Take Those You Can,** and fill in the following :

Height ; Laundry Marks :
 Weight ; Number of Rifle :
 Color of Eyes ; Wear Glasses ?
 Color of Hair ; Is Tooth Chart Attached ?
 Race :

(If possible, have medical personnel take a tooth chart, if no medical personnel present, fill in a tooth chart below.) In space below, locate; and describe any scars, birthmarks, moles, deformities, etc.

Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc. :

Left Hand

Thumb	1	2	3
-------	---	---	---

Right Hand

Thumb	1	2	3
-------	---	---	---

TOOTH CHART

		Deceased's Right								Deceased's Left							
8	8																
7	7																
6	6																
5	5																
4	4																
3	3																
2	2																
1	1																
8	8																
7	7																
6	6																
5	5																
4	4																
3	3																
2	2																
1	1																
8	8																
7	7																
6	6																
5	5																
4	4																
3	3																
2	2																
1	1																
8	8																
7	7																
6	6																
5	5																
4	4																
3	3																
2	2																
1	1																
8	8																
7	7																
6	6																
5	5																
4	4																
3	3																
2	2																
1	1																

Indicate : missing natural teeth by X ; crowns by O ; fillings by □ ; Bridges by ⊙ linking anchor teeth ; replacements by artificial teeth X

Characteristics : _____

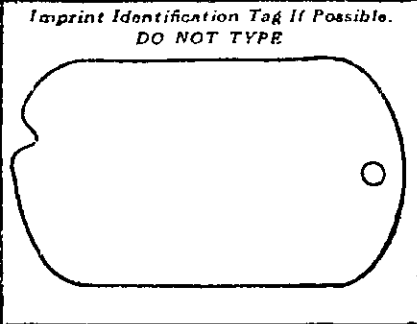
Other Data : _____

If this is an Isolated Burial, make a Sketch of the Location, oriented with Permanent Landmarks. If more space needed attach separate sheet. Indicate North.

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
16 August 1946



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)		SERIAL NO.
Unknown - X - 7101		Unknown
GRADE	ORGANIZATION	BRANCH OF SERVICE
Unknown	Unknown	AAF
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
Unknown	Unknown	

PLACE OF DEATH Vicinity of Wiener Neustadt, Austria.	CAUSE OF DEATH BTB Plane Crash	DATE OF DEATH 16 Aug 1946
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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, this is section 2, on reverse)
None	
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)	None
Yes	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

None

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

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

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.
16 August 1946	1530	Casket	Temp. wood. cross	JJJJ	2	32

WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE
Yes	Civilian Cemetery Wiener Neustadt, Austria Map: 1:250,000 Sht: 0-48 Coord: xX3548

PLOT NO.	ROW NO.	GRAVE NO.
K	6	-

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
GEN. SERVICE	CH. H.A. LEE, 1st Lt.	
IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)	One copy WD QMC Form 1042 Report of Interment placed in burial bottle and buried with remains.
No	Yes - Embossed plate	


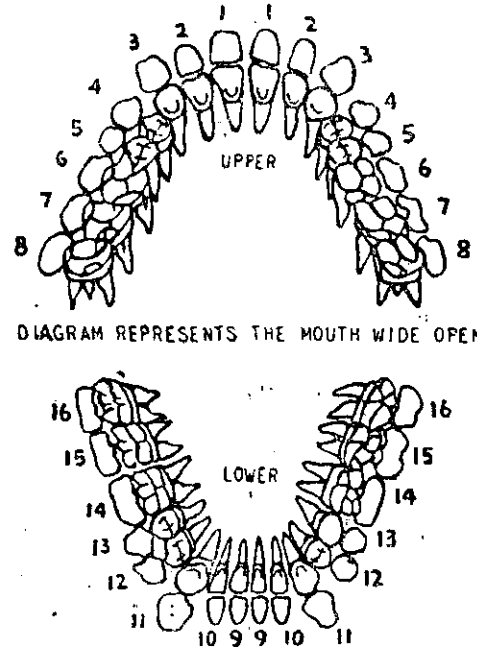





BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.
UNKNOWN X- 7120	UNK	UNK	AAF	31

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.
PHELPS, G.C. Jr	2nd Lt.	0-776682	451 Bb GP(H) 725 Bb SQ	33

SIGNATURE OF PERSON PREPARING REPORT Robert L. Owens 2nd Lt Inf. C.I.F.	SIGNATURE OF OFFICER VERIFYING REPORT RALPH W. SLEATOR, 3rd Field Command.
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DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.

RESTRICTED

	Section UNIDENTIFIED REMAINS.	<p>INSTRUCTIONS:</p> <p>(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.</p> <p>(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.</p>			
LEFT LITTLE FINGER	HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
	UTD	UTD	UTD	UTD	UTD
LEFT RING FINGER	WEAPON AND SERIAL No.		LAUNDRY MARKS		WHERE BODY WAS BURIED OR FOUND
	None		None		Wiener Neustadt, Austria.
LEFT MIDDLE FINGER	OTHER IDENTIFICATION CLUES				
	Marking on cross: " 1943 " 524				
LEFT INDEX FINGER	<p>FILLINGS</p>  <p>SILVER FILLING GOLD FILLING</p>		 <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>		
LEFT THUMB	<p>CAVITIES</p>  <p>CAVITY DECAYED</p>				
RIGHT THUMB	<p>MISSING TEETH</p>  <p>TOOTH MISSING</p>				
RIGHT INDEX FINGER	<p>CROWNED TEETH</p>  <p>PORCELAIN CROWN GOLD CROWN</p>				
RIGHT RING FINGER	<p>BRIDGE WORK</p>  <p>GOLD BRIDGE</p>				
RIGHT MIDDLE FINGER	<p>FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY</p> <div style="text-align:center; margin-top: 20px;">  </div>				
RIGHT RING FINGER	<p>REMARKS:</p>				
RIGHT LITTLE FINGER	<p>Attached: Form 11 Check List of Unknowns. Impossible to obtain Form 1A Tooth Chart; too badly decomposed. Impossible to obtain Fingerprints because of missing portions. Est. weight of remains recovered: 5 Lbs.</p>				

RESTRICTED