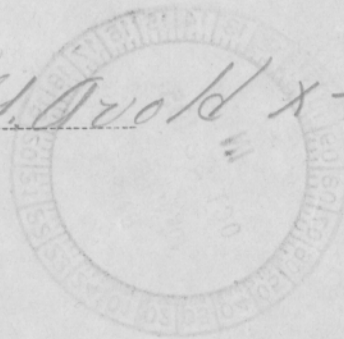


RECLASSIFICATION SHEET

PAPERS ORIGINALLY FILED 293 Uk - misc (St. Avold)
X-7031 X-7059 X-7184
SYNOPSIS AND DATES

NEW CLASSIFICATION misc filed 293 Uk - St. Avold X-7031



RECLASSIFICATION SHEET

7887 GRAVES DETACHMENT

APO 757

943 unk St. Avold X-7184 *ms*

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-7184, ST AVOLD, FRANCE.

(FOC) DRAGUIGNAN

*file 2 mar 51
Hinkland
Ident*

REPORT OF INVESTIGATION

6615

AREA SEARCH

AGRC Form # 10 (Revised)

1 January 1946.

21 August 1946.

Date

NAME Unknown X-7184 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? No . If so, state the facts as to whom you believe the deceased to be :

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-7184

5. Name and Type of Cemetery Wr Neustadt Cemetery (Civilian)
(Military or Civilian)
6. Map Coordinates of the Cemetery xX 3548; 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 Civilian

15. Where was the place of death? Vicinity Wr. Neustadt Coords _____
 Give basis Buried in Wr. 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
No information available
 a. Type of Plane _____
 b. Markings and/or name on plane _____
 c. Give numbers on motors, machine guns, instruments, radios or other equipment: _____
21. How did crash occur? 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-7184

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, Wr. Neustadt Cemetery

JOHANN SCHROENER

49. Are all positive statements regarding identification and particulars surrounding death attached?

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

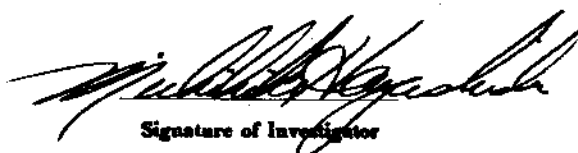
52. Give Brief Narrative Case in Russian Zone; no publicity impossible to get more detailed information under circumstances

(Use attached sheets, if necessary)

Signature of Interpreter

Rank ASN

Organization



Signature of Investigator

MICHIHIKO HAYASHIDA

2nd Lt. O-1338230

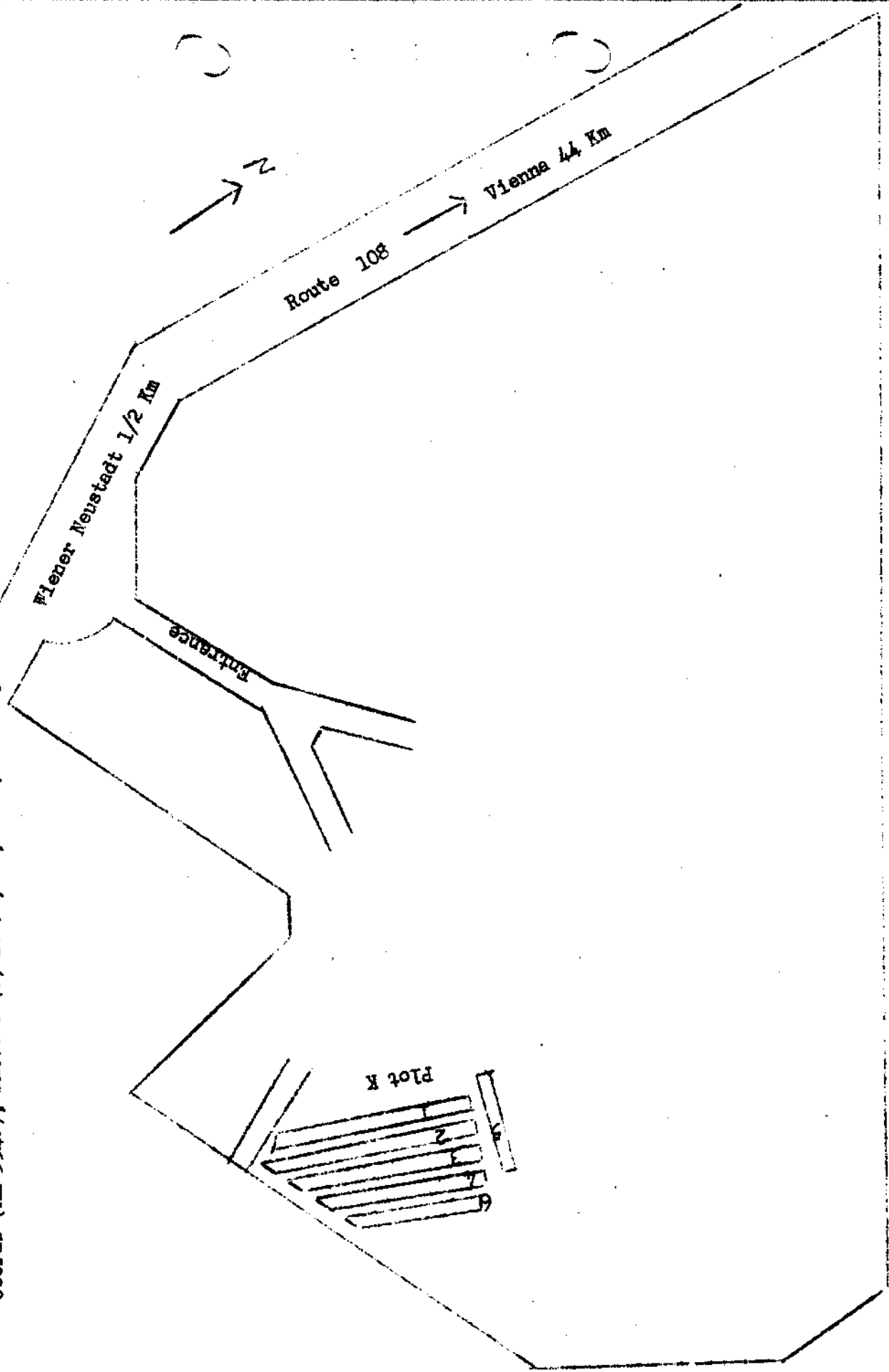
Rank ASN

347 QM Bn

Organization

X-7184

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



X-7184

List of American flyers burried in the cemetery in Wiener Neustadt

Number & 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 burried 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 burried here in a mass grave
1 Latiner	May 1944	Plane crash	Found in several places & burried 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-7184

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC St Avold France		TO OIC Neuville Belgium	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER Cpl Stephen F Wilson, RA-39587409	
SIGNATURE OF SHIPPER <i>Frank P. Callaghan, 1st Lt. EA</i>	DATE 29 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		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

AIRMAIL

293 Unknown - France (misc) St. Avold

X-7031 X-7059 X-7184

293
US European

7 February 1950

SUBJECT: Identification of World War II Deceased

**TO: Chief, Registration Division
7837 Graves Registration Detachment
APO 58, c/o Postmaster
New York, New York**

1. Reference is made to Transmittal Letter #4556, dated 6 December 1949, forwarding Certificates of Unidentifiability.
2. This Office approves the classification of Unknowns X-7031, X-7059 and X-7184, interred in USMC St. Avold, France, as Unidentifiable.

FOR THE QUARTERMASTER GENERAL:

Rice/id
Foy
REB
Cy furnished: Adm Sect

**T. H. MEYER
Lt. Colonel, GSC
Memorial Division**

093 - X-7184 - St Avold

(F. H. Meyer)
TMN
TEC

AIRMAIL

AIRMAIL

QMGMT 293

1st Ind

GAS European

SUBJECT: Certificates of Unidentifiability of Remains
Transmittal Letter #4556

Dept. of the Army, OQMG, 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-6306g 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, OMC
Memorial Division

Rice/ld

Foy

NEB

Cy furnished: Adm Sect

JA

314.6

MRS

T/L

Europe

4556

X 293 Unknowns Service X-7184 - ST APPRO

NEB
IRV
TEC

AIRMAIL

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

RRE 293

30 November 1949

(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X- 7184, Plot JJJI, Row 8, Grave 195, 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. 2649, dated 6-2-48.

3. Remarks:

See case History attached.

Case reviewed by undersigned Members of the Board of Review:

Henry
Col. H. P. HENRY, O-12589

JMC

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

JMC

Maj. Charles REYNOLDS, O-182639

TC

Maj. Gerald SWARTHOUT, Sr., O-267451

CE

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

JMC

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

CAV

CWO Frank GEER, W-2102925

Received
Not identifiable from
information presently
available

67450
USA Capt. Jack C. HAYES, O-1577297

JMC

Incl #11

T.O. # 4556, 6 Dec 49

UNKNOWN NO X-7184

U.S. MILITARY CEMETERY St-Avoid

1. Unknown X-7184 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 interred as knowns in the USMC at St-Avoid.

2. Reprocessing of the remains of X-7184 has revealed no further identifying clues or associating factors.

3. Tooth charts obtained for X-7184 (One dated 21 Aug. 46 and other dated 11 Dec. 47) have been compared with tooth charts for known casualties in Austria. (Map Sheets O-48 & O-49), insofar as possible, with negative results.

4. It is recommend that X-7184 St-Avoid be made Unidentifiable.

ARTHUR E. DAROIS

Ed

RLV

6

DISINTERMENT DIRECTIVE

243 Unknown France X-7184 (H. Knoll)

SECTION A — NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER 3574 00000	DATE 15 01 48 DAY MONTH YEAR	
NAME UNKNOWN X-007184		SERIAL NUMBER	RANK	ARM 1
CEMETERY ST AVOLD - NETZ		DATE OF DEATH		DISPOSITION OF REMAINS 0 3503 80 CODE DIST. PT.
PLOT 4J	ROW B	GRAVE 195	COUNTRY FRANCE	CAUSE OF DEATH 6

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 1	
REMAINS PREPARED AND PLACED IN CASKET	
DATE CASKET SEALED BY	BY EMBALMER (Signature)
DATE CASKET BOXED AND MARKED	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.

IDENTIFICATION CHECK LIST

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

DD # 570, dated 4 November 1947

Unknown X-7184

Cemetery St Avoild, France

Plot JJJJ Row 8 Grave 195

Date reprocessed: 11 December 1947

1. ~~Amputation~~ _____
(Hour) (Date)

2. Place of death _____
(Name of closest town) (Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3. Remains ~~excavated~~ disinterred ~~by~~ and reprocessed by I.S. First Zone
(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 None

Drawers, wool None

Drawers, cotton None

Leggings, wool None
~~wool~~

Socks, ~~cotton~~ Remnants of, large, wool OD, one (1) sock

* Shoes None (type)

Overshoes None

Web Equipment None (type)

(Other item) Remnants of parachute

(Other item) None

* 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? **AIR**

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 None found
 (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) (Hair 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 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**
 (Inseam, 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 Decomposed

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

9. Remarks Remains received in skeleton form, wrapped in mattress cover, in U.K. box.
Remnants of clothing. Burial Report. No GRS tags. Fluoroscopic examination
negative. No bone measurements. Est. wgt. of remains: 10 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.

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

CAPT **QMC**
Rank Service

OPERATIONS OFFICER
(Organization)

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

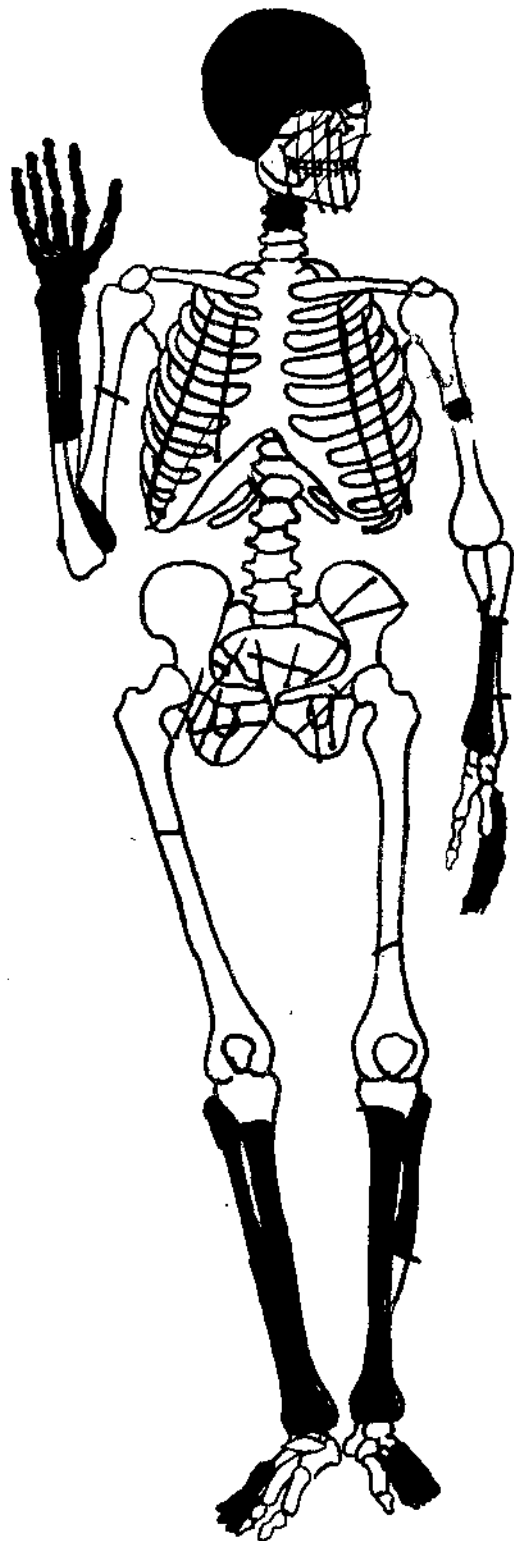


CHART "A"

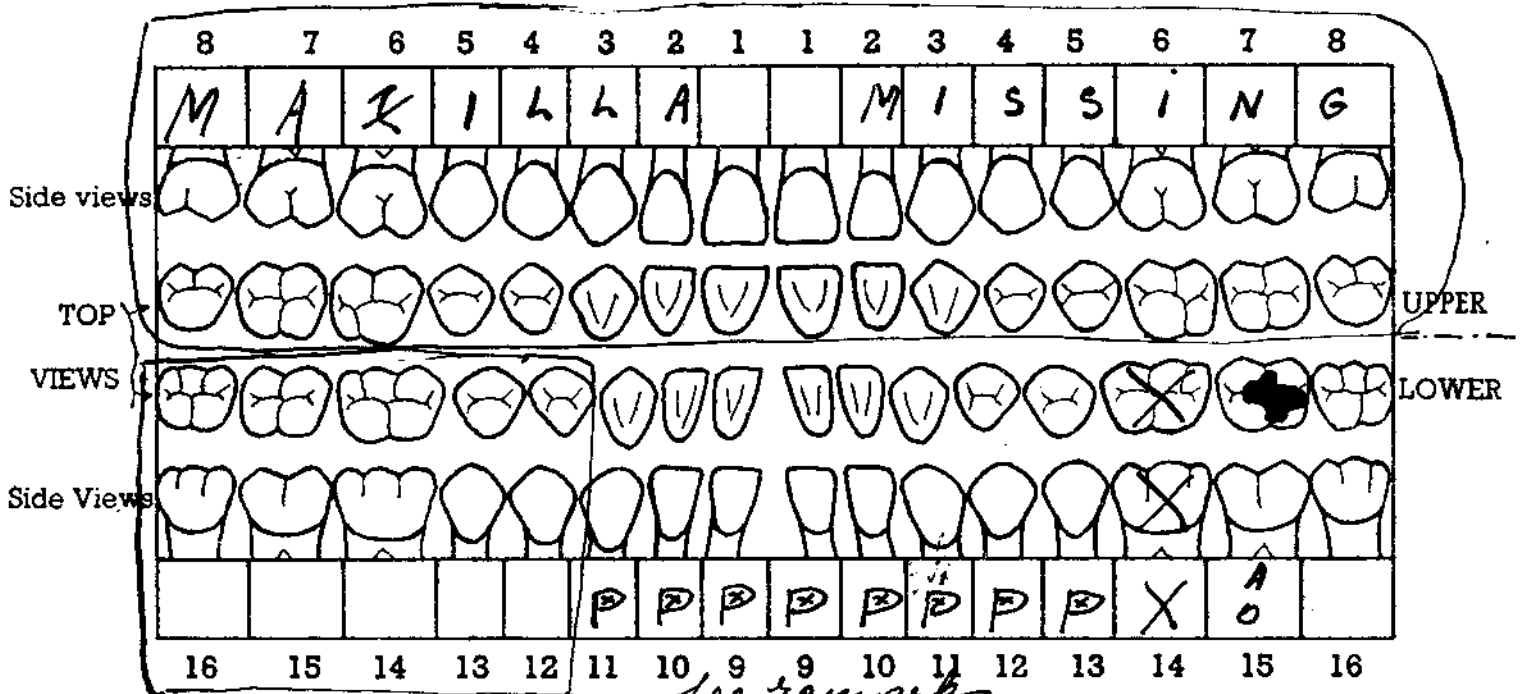
No bone measurement

TOOTH CHART

Last Name UNK X-7184			First	Initial	Rank Unk	Date 11 December 1947	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.





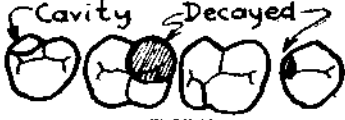
IVOR J. FOSMO
 2nd Lt., Inf.

WOODROW W. WOLF
 CAPT QMC OPER OFF

Signature of Officer or other person who prepared Tooth chart

Woodrow W. Wolf

Verified by G. R. S. Officer

<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

AD : posthumously missing

Space: Pit of L-13 to L-15: 6 mm.

The pit of L-13 suggests that it was rotated 1/8 of a turn mesially
 " " " L-12 " " " " " 1/16 " " " distally

Color : dull ivory
 Size : average
 Alignment: good

X-7184

AGRC
FORM No. 11
Revised 5 January 1946

CHECK LIST OF UNKNOWNNS

6615

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

Unknown X - 7184
Cemetery _____
Plot _____ Row _____ Grave _____

1. Arrived at cemetery _____
(hour) (date)
2. Place of death Wiener Neustadt, Austria Coord. XX-3548
(name of closest town) (coordinates and letter Prefex, maps)
Sheet 0-48, Sc. 1:250,000
(Sheet, scale and serials used)
3. Remains recovered or disinterred by 347th QM Bn, Third Field Command AGRC.
(name and organization)
4. Evacuated to Cemetery by Central Identification Point
(name and organization)

5. Description of clothing and equipment : (if clothes do not fit, obtain size from body measurements).

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

Item	Clothing Markings	Sizes	Indicate unusual markings Color wear, tear, repairs, etc.
*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	None		
Undershirt, Cotton	None		
Trousers HBT	None		
*Trousers, Wool OD	Small remnants of		

49

X-7184

Belt, Web **None**

Drawers, Wool **None**

Drawers, Cotton **None**

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

Socks, Cotton **None**

*Shoes (type) **None**

Overshoes **None**

Web Equipment (Type) **None**

(Other item) **One (1) Parachute, One (1) extra long, extra large**

(Other item) **Wool Sock.**

*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)

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).

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X-7184

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 See Tooth Chart (white, size, unevenness, spacing, noticeable crowns, fillings, extract).

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

Jaw Badly shattered (large, small, normal) Circumference of head in inches Head missing, except (that band) mandible

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

UTD

87

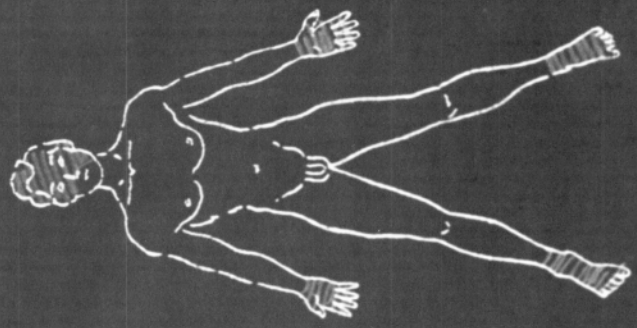
X-7184
6615

Feet UTD
(size, corns, callouses, flat)

Toes UTD
(slender, 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 Hands missing

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

12. Remarks : Multiple fracture of all/^{long} bones. Body in last stage of decomposition. Bones charred. Est. weight of remains recovered 30 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

0
1943
516

Officer's Name
ROBERT L. OWENS
2nd. Lt. INF.
Rank Service

CENTRAL IDENTIFICATION POINT.
Organization

82

X-7184

TOOTH CHART

6615

21 August 1946.

Unknown X-7184

Unknown

Unknown

Last Name

First

Initial

Rank

Serial No.

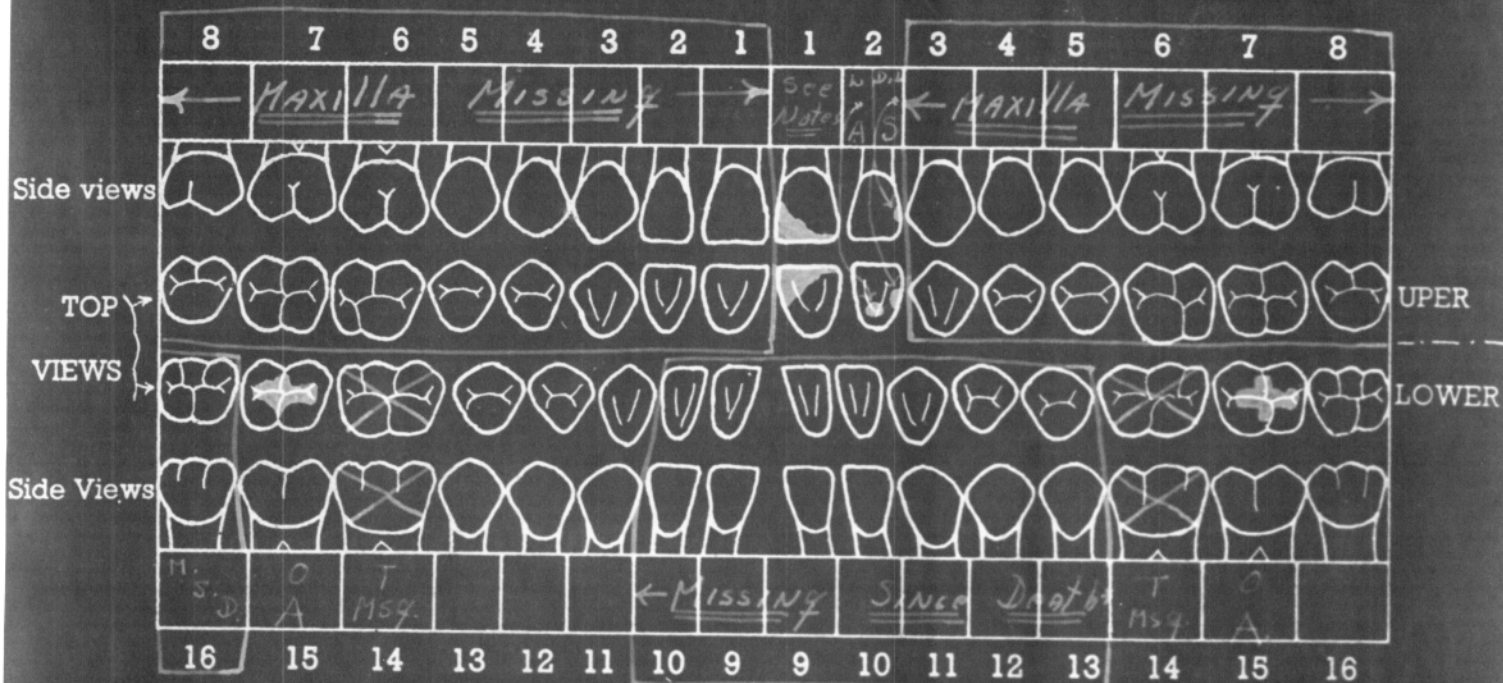
Unit
Vicinity of Wiener-Neustadt
Place of Death Austria

Est. Oct 1943
Date of Death

Organization
BTB. Airplane Crash
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), bicuspid (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.

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James J. Ventura
 Signature of Officer or other person who prepared Tooth chart

JAMES J. VENTURA

Robert L. Owens
 U.S. Officer

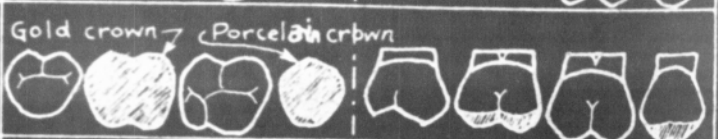
ROBERT L. OWENS
 2nd. Lt. INF. C.I.P.

X-7184

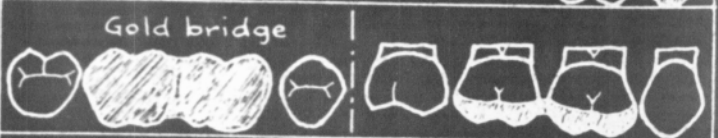
MISSING TEETH... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



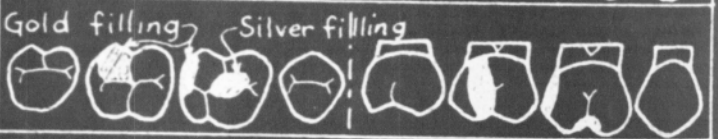
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



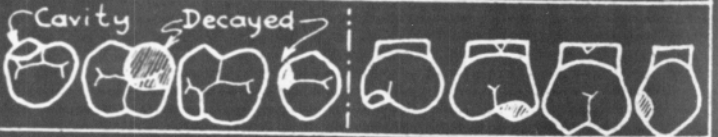
BRIDGE WORK... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



FILLINGS... Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus :



CARIES (CAVITIES)... Outline location and size of cavity, shade in thus :



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

ADDITIONAL SPACE FOR FURTHER REMARKS

Mandible: R-15 slanting towards the mesial direction, crown about 1,5 mm from R-13.

Spacing of 1,5 mm between R-11 and R-12.

Mandible broked at R-11.

Maxilla: all of maxilla is missing.

Two loose teeth were found in remains L-1 and L 2. Both charted.

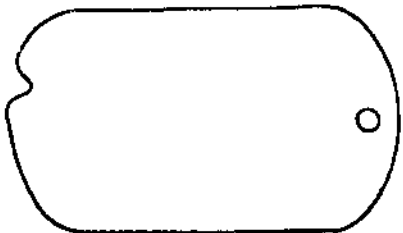
L-1 is a gold inlay , showing gold surface on the incisal, mesial lingual and facial views.

Teeth are white and show a triangular tendency.

M8

RESTRICTED


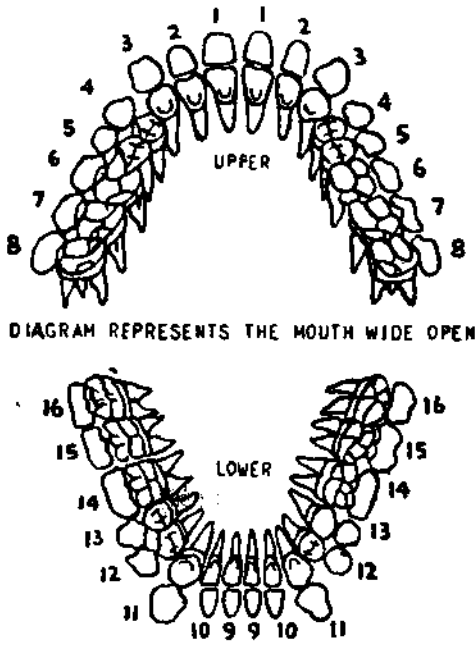




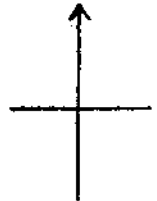
6615

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 23 August 1946	
Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.				SERIAL No.	
	NAME (Last, first, middle initial) UNKNOWN X- 7184				Unknown	
	GRADE Unknown		ORGANIZATION Unknown		BRANCH OF SERVICE A.A.F.	
	RACE Unknown		RELIGION Unknown		IF OTHER THAN U. S. DEAD. GIVE NAME OF COUNTRY	
PLACE OF DEATH Vicinity of Wiener Neustadt, Aust.		CAUSE OF DEATH B.T.B. Airplane Crash			DATE OF DEATH Est. Oct. 1943	
EMERGENCY ADDRESSEE (Name, relationship, and address) Unknown						
IDENTIFICATION TAGS FOUND ON BODY (U, R, or none) 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						
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 260584)						
DATE OF BURIAL 23 August 1946	HOUR 1100	BURIED IN (Shroud, blanket, or name of other) Casket	TYPE OF GRAVE MARKER Temp. wood. Cross	PLOT No. JJJ	ROW No. 8	GRAVE No. 195
WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE Civilian Cemetery of Wiener-Neustadt, Austria (X 3548, Sht. 0-48, Sc. 1:250,000)			PLOT No. K	ROW No. 6	GRAVE No. -
TYPE OF RELIGIOUS CEREMONY GENERAL SERVICE	PERSON CONDUCTING BURIAL RITES CH. H.A. LEE, 1st Lt.		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY One Copy WD QMC Form 1042 - Report of Interment - placed in burial bottle and buried with remains.			
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) No	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes, embossed plate					
BODY BURIED ON DECEASED LEFT. NAME (Last, first, middle initial) UNKNOWN X- 7196			RANK UNK	SERIAL No. UNK	ORGANIZATION AAF	GRAVE No. 194
BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial) UNKNOWN X- 7037			RANK UNK	SERIAL No. UNK	ORGANIZATION AAF	GRAVE No. 196
SIGNATURE OF PERSON PREPARING REPORT ROBERT L. OWENS 2nd. Lt. INF. C.I.P.			SIGNATURE OF GRS OFFICER VERIFYING REPORT SAMUEL, E. PROCTOR Jr. 2nd Lt. INF.			
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

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RESTRICTED

LEFT LITTLE FINGER	Section 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 UTD	WEIGHT UTD	COLOR OF EYES UTD	COLOR OF HAIR UTD
	WEAPON AND SERIAL No. None		LAUNDRY MARKS None	BIRTHMARKS, SCARS, OR TATTOOS UTD
LEFT MIDDLE FINGER	WHERE BODY WAS BURIED OR FOUND Wiener-Neustadt Austria		OTHER IDENTIFICATION CLUES	
	A round metallic grave marker was recovered with the remains. It is marked " 1943 - 516 "			
LEFT INDEX FINGER	FILLINGS  SILVER FILLING GOLD FILLING		 UPPER LOWER DIAGRAM REPRESENTS THE MOUTH WIDE OPEN	
LEFT THUMB	CAVITIES  CAVITY DECAYED			
	MISSING TEETH  TOOTH MISSING			
RIGHT THUMB	CROWNED TEETH  PORCELAIN CROWN GOLD CROWN			
RIGHT INDEX FINGER	BRIDGE WORK  GOLD BRIDGE			
RIGHT MIDDLE FINGER	FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY			
RIGHT RING FINGER				
RIGHT LITTLE FINGER	REMARKS: Form 11 Checklist of Unknowns and Form IA Tooth Chart accomplished. Unable to obtain fingerprints because of missing portions. Est. weight of remains recovered 30 Lbs.			

RESTRICTED