

7887 GRAVES DETACHMENT

APR 75

93 Unk, St. Avold X 8153

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 - 13074 St Avold

(POC) NEUVILLE

~~NAI
File~~

~~14 Nov. 51~~

~~m. martin~~
Identification Branch

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN <i>X-13074 X-8153</i>			2. DATE OF REPORT <i>14 June 1949</i>		
3. NAME OF CEMETERY <i>USMC St. Auld</i>	4. PLOT <i>XXX</i>	5. ROW <i>7</i>	6. GRAVE <i>82</i>	7. DATE OF	
				DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT <i>25-30</i>	AGE <i>AGE</i>	9. ESTIMATED HEIGHT <i>5'-10"</i>	10. COLOR OF HAIR <i>Med. 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>
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15. WAS BODY MANGLED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT EXTENT? <i>see skeletal Blackout chart</i>
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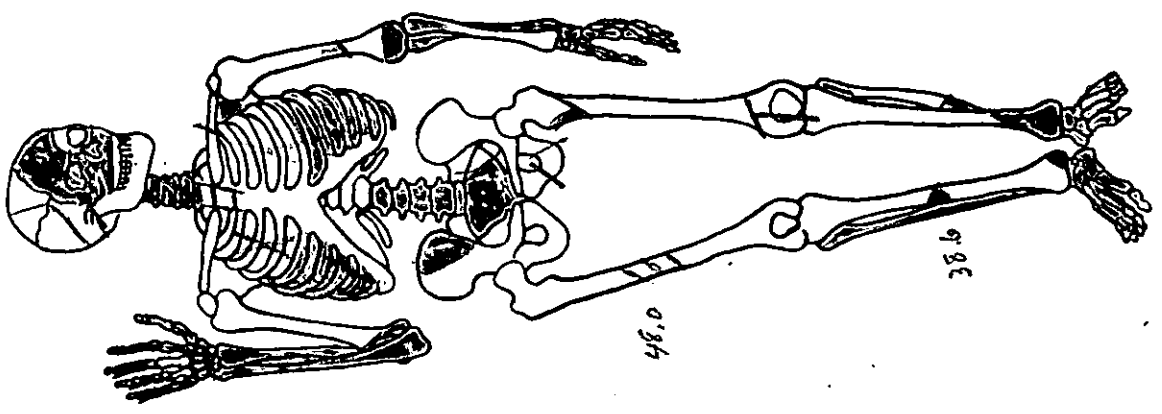
16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS
None

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

None

19. BLACK OUT PARTS OF BODY NOT RECORDED

X-13074
7 vertebrae Present



Est. Height: 5'-10"

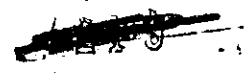
20. MASS BURIAL CERTIFICATE (IF APPLICABLE)
(Wherein segregation in whole or parts is impossible)

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

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

Remains previously processed by F.O.S. and received disarticulated with a small amount of decomposed flesh.
Teeth recovered and charted.
No clothing.
Est. wt. of reprocessed remains: 10 Lbs.
Est. Height: 5'-10"
Est. Age: 25-30 years.
Head Hair: Medium Brown.



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. #1974

~~Unit #13074~~
USMC ST. HOLID
XXX-7-82

TWO TOOTH CHARTS

#1

13 June 1949

Date

Last Name	First	Initial	Grade	Serial No.
Unit		Organization		

Place of Death	Date of Death	Cause of Death
----------------	---------------	----------------

Right

Left

	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8		
	M	A	X	I	L	L	A	<input checked="" type="checkbox"/>	S	S	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	caric		A	A	A	<input checked="" type="checkbox"/>
	M	I	S	S	I	N	G	<input checked="" type="checkbox"/>	FML	FDL	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		MO	DO	0-2	DOF	<input checked="" type="checkbox"/>
Side views																		
TOP																		
VIEWS																		
Side Views																		
	M	A	N	D	I	B	L	E		M	I	S	S	I	N	G		
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16		

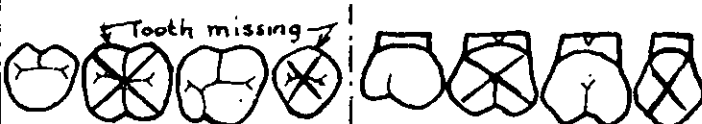
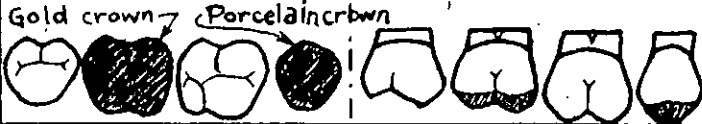
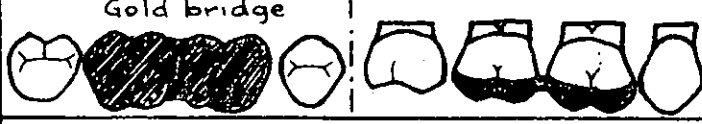
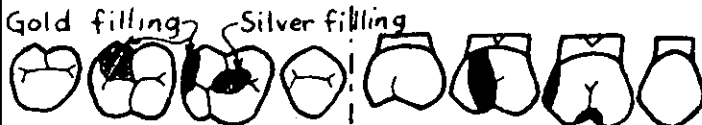
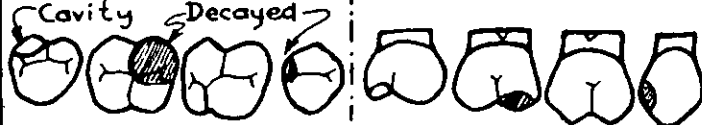
UPPER
LOWER

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.

Size - Large
 color - white Ivory
 Posthumously
 Missing - R3^{and}
 L1^{and}2
 wear - slight
 Alignment - Good
 calculus - Moderate

~~UNIT #13074~~

 Signature of Officer or other person who prepared Tooth chart
 Verified by G. R.C. 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

E.O. #1974

Unit X-13079

TWO

TOOTH CHART 5

USMC St. Avold

XXX-7-82

#2

12 June 1949

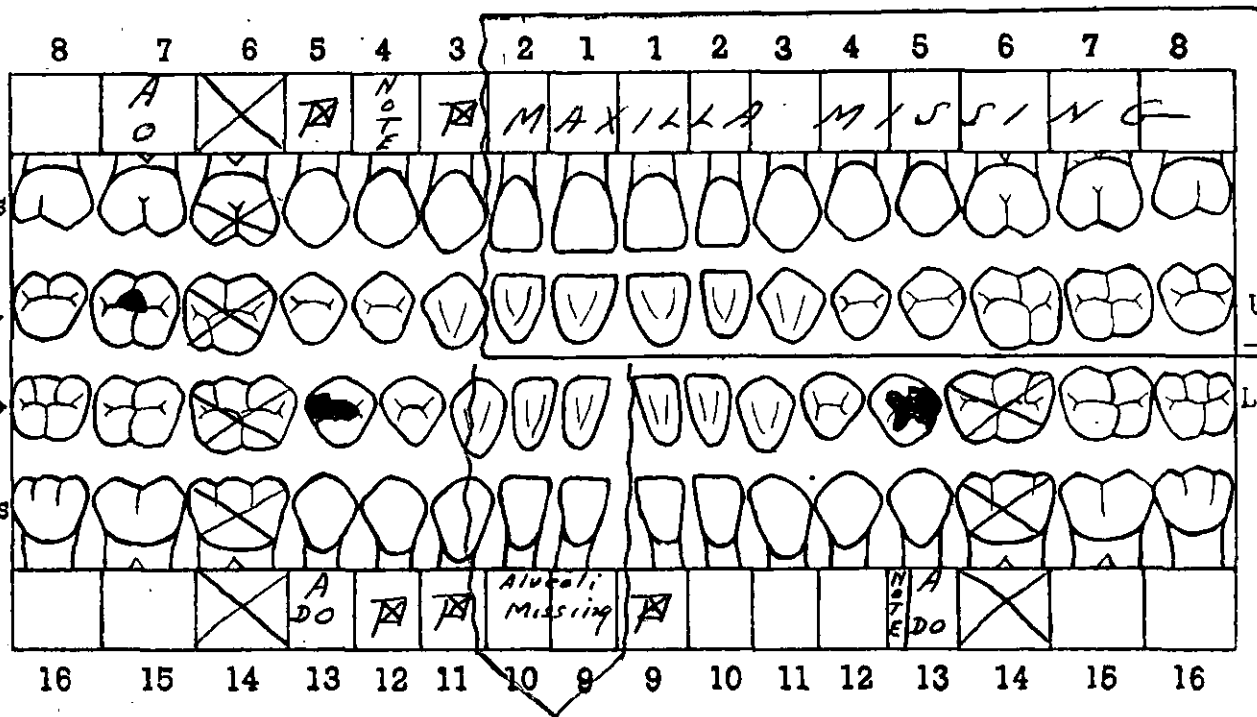
Date

Last Name	First	Initial	Grade	Serial No.
Unit		Organization		

Place of Death	Date of Death	Cause of Death
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Right

Left



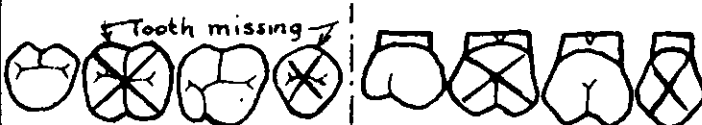
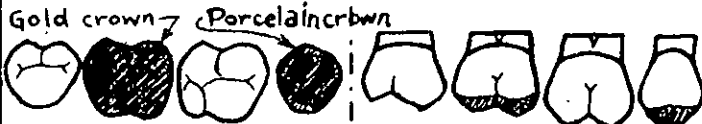
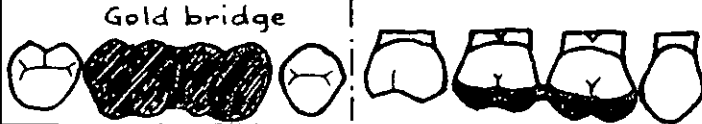
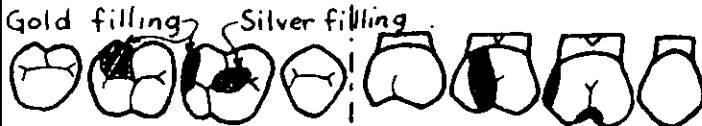
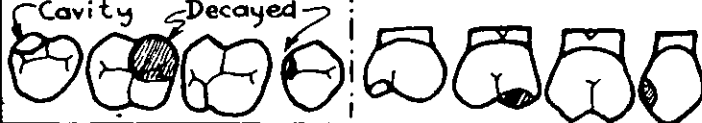
This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), 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.

Size - Average
 color - Ivory
 Posthumously
 Missing - R 3 and 5, 11 and 12
 Spaces - L 14 IMM. L 9
 R 14 HMM
 L 13 rotated 35° Mesially
 R 12 " 15° Distally (Alveolus)
 R 4 " 25° Distally

Wesley A. Jeepe
 Signature of Officer or other person who prepared Tooth chart

Verified by G. R. C. Officer

wear - Very Heavy
 calculus - moderate

<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"

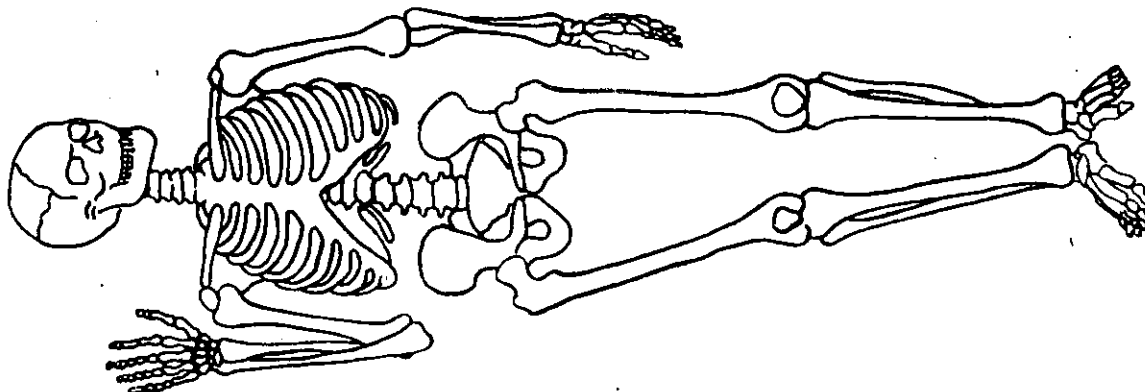
ADDITIONAL SPACE FOR FURTHER REMARKS

IDENTIFICATION DATA *E#*

1. Remains of Unknown <i>X-8153</i>		2. Date of Report <i>3 JAN 1950</i>	
3. Name of Cemetery <i>STAVOLD</i>	4. Plot <i>XXX</i>	5. Row <i>12</i>	6. Grave <i>133</i>
7. Date of: Disinterment <input checked="" type="checkbox"/> Reinterment <input checked="" type="checkbox"/>			
8. Estimated Weight <i>28/33</i>	9. Estimated Height <i>5-10</i>	10. Color of Hair <i>BROWN</i>	11. Race <i>U.T.O.</i>
12. Give Description of any Official Identification found with Remains <i>MORTUARY PLATE</i>			
13. Give Description of Tattoos or Scars on Body and/or such information obtained from other sources. <i>NONE NOTED</i>			
14. Was Body Burned? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>		To what Extent?	
15. Was Body Mangled? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>		To what Extent? <i>SEE ITEM 12</i>	
16. Describe evidence of healed Fractures and Bone Malformations <i>NONE NOTED</i>			
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) <i>NONE</i>			

X. 8153

19. BLACK OUT PARTS OF BODY NOT RECOVERED



20.

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

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

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

REMAINS RECEIVED IN SKELETAL FORM.
TEETH FOUND AMONGST REMAINS
(SEE TOOTH CHART)

EST AGE 28/33

EST WEIGHT 5-10

REPROCESSED BY
FIELDS
DE PASS
SCULLO

CHIEF SPRINGER

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

SKELETAL CHART. *NK X-8153*
3X-12-133

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

RIGHT

LEFT

HUMERUS

ULNA

RADIUS





4 FEMUR

48.

TIBIA

FIBULA

AGE 28-33
Hair Brown

-  - FRACTURED
-  - SHATTERED
-  - MISSING
-  - BURNED

ESTIMATED HEIGHT *5* FT. *10* IN.

1

USMC Neuville en Condroz
Plot; D Row; 36 Gr; 11
Date of Burial: 15 May 50
Verified by GRS Officer
M.R. Swart, Capt QMC

DISINTERMENT DIRECTIVE

SECTION A
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
3574 16020

DATE
02 03 50
DAY MONTH YEAR

NAME UNKNOWN SERIAL NUMBER X-8153 GRADE ARM 8 RACE 0 RELIGION 6

CEMETERY ST AVOLD FRANCE PLOT XXX ROW 12 GRAVE 133 DISPOSITION OF REMAINS 1202 80 CODE DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN NO FLAG SENT

NAME AND ADDRESS OF CONSIGNEE
NEUVILLE-EN-CONDROZ, BELGIUM

NAME AND ADDRESS OF NEXT OF KIN
(NO ADMINISTRATIVE DECISION)
These remains are unidentifiable and are to be permanently interred. (Reg. Div. - 16 Mar 50)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME UNKNOWN SERIAL NUMBER X-8153 GRADE DATE OF DEATH DATE DISTINTERRED ABOVE GROUND REPOSITORY

IDENTIFICATION TAG ON REMAINS EMB. ORGANIZATION UNKNOWN RELIGION IDENTIFICATION VERIFIED BY M. R. SWART, CAPT., QMC

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL ABOVE GROUND REPOSITORY CONDITION OF REMAINS TWO SETS OF TEETH. ALL MAJOR BONES PRESENT AND FRACTURED. EXTREME DISTAL PORTIONS BOTH R/L HUMERUS MISSING. DISTAL PORTION L/TIBIA MISSING. FOOT BONES MISSING.

OTHER MEANS OF IDENTIFICATION NONE

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

NONE

REMAINS PREPARED AND PLACED IN CASKET

DATE 28 April 1950 BY ELIJAH H. FIELDS, MTC. EMBALMER

CASKET SEALED BY ELIJAH H. FIELDS EMBALMER (Signature) ELIJAH H. FIELDS

CASKET BOXED AND MARKED SHIPPING ADDRESS VERIFIED BY ALL TAGS, PLATES, AND MARKINGS VERIFIED BY: M. R. SWART, CAPT., QMC

DATE 28 April 50 BY SGT DANO C. MILLER

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

M. R. SWART, CAPT., QMC
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS
REMAINS ARE UNIDENTIFIABLE. PREVIOUSLY DESIGNATED X-13074-B IN PLOT XXX, ROW 7, GRAVE 82, ST. AVOLD, FRANCE.

FILE RECORDS
DATE
NAME
M. R. SWART, CAPT., QMC

Raymond T. Rodriguez

REG. DIV. 83

6-11-63 113-244

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM: [Faint text]		TO: [Faint text]	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	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: [Faint text]		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

Changed to
X-8153

CMC 231

DEPT. ARMY COMCENTER
GREENWICH CIVIL TIME (Z)

293 unk France X-8153 (St Avold)

1950 FEB 06 19 34

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307

FUF 43/06

231

OFFICE OF THE ARMY
OFFICE
FPA 43/06
RR UERC
17 AD
17 FEB 6

FROM *Reg Div PARIS*
MSG NO *AG RC 219*
D.T.G. *061334Z*
ACTION *QMC*
MOEN NO. *68077*

DE UFPOC 15

R 061334Z

M REG DIV PARIS FRANCE

TO OQMG WASHDC
GRAVES GRNC

REF AGRC TWO ONE NINE

PASS TO MEMORIAL DIVISION

FEB 7 10 32 AM '50
O.D.M.S.
TEL & CAB SECTION

293 unk France X-8153 (St Avold)

COMPLETE CASE PAPERS ON FILE FOR XRAY EIGHT ONE FIVE THREE ST AVOLD
PREVIOUSLY FWDD YOUR OFFICE BY TRANSMITTAL LTR NR FOUR FIVE SEVEN ZERO
DTD EIGHT DECEMBER PD NO INFO RELATIVE TO DATE/CMA PLACE OF DEATH AND
DISINTERMENT OF XRAY EIGHT ONE FIVE THREE IS AVAL PD RE IS MADE TO
CASE HISTORY ATTACHED TO CERT OF UNIDENTIFIABILITY FOR XRAY EIGHT ONE FIVE
THREE SUBMITTED BY TRANSMITTAL LTR NR FOUR SEVEN FOUR FOUR DTD THIRTY

RECORDED
INDEXED
FEB 8 1950

JANUARY FIFTH PD SGD HENRY CITE AGRE

RECORD ATTACHED

Reclass sheet - made 11/23/57

for X13079

06/1456Z

1-1-50
1-1-50
1-1-50

THREE SHEETS BY TRANSMITTAL FOR MR LOGS SEVEN FOUR FOUR DED JHINKA

CASE HISTORICAL ATTACHED TO CASE OF [unclear] [unclear] ONE FILE

DISSEMINATION OF XRAY [unclear] ONE FILE [unclear]

OLD EIGHT DECEMBER [unclear] [unclear] [unclear] [unclear] [unclear]

MEMORANDUM FOR [unclear] [unclear] [unclear] [unclear] [unclear]

COMPLETE CASE PAPERS FOR XRAY EIGHT ONE FILE THREE 21 PACED

PASS TO MEMORIAL DIVISION

FOR INFO TWO ONE NINE

[unclear]

CHANGES SINCE

TO COME WASHDC

W REC DIA PARIS FRANCE

W [unclear]

DE OFFICE ID

DE OFFICE

FBA [unclear]

FOR [unclear]

ADMINISTRATIVE BRANCH
FEB 7 1950 31 PM '50
MEMORIAL DIVISION

IDENTIFICATION BRANCH
FEB 7 1950

OUT
FEB 8 1950
IDENTIFICATION BRANCH

[Faint, illegible text and markings]

[Handwritten signature]

Now X-8153

QUART DEPT OF ARMY WASH DC

UNCLASSIFIED

CHIEF REGISTRATION DIV
7887 GRING DET
PARIS FRANCE

DEFERRED

*

293 unkr France X-13074 (St. Avold)

FROM QUART

WCL-35247

REQST FWD COMPLETE CASE PAPERS FOR XRAY 8153 ST AVOLD FORMERLY
XRAY 13074 WITH PARTICULAR REF TO DATE AND PLACE OF DEATH AND
DISINTERMENT

ADMINISTRATIVE BRANCH JAN 30 12 24 PM '50
JAN 30 11 50 AM '50 O. O. M. S.
MEMORIAL DIVISION RE & CAB SECTION

✓ 293 unkr. France X-8153 / (St. Avold)

✓ 293 GRS - European

[Handwritten initials]
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V Lee scdt
LEMENTS
REB

304002

UNCLASSIFIED

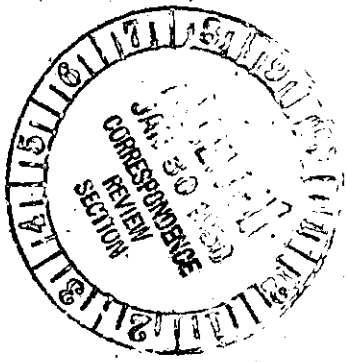
GRAVES

QUART CAPT BERRY EXT 72947 JAN 50
293 GRS EUROPEAN (ST AVOLD)

CAPT QMG REB DIV

26

3
HEB
C. L. ...
ALICE ...



100-22-1000

RECORDS DIVISION
JAN 30 1950
U.S. DEPARTMENT OF JUSTICE

100-22-1000

293-X-12
(STAYOLD)

DEPT/ARMY CENTER
GREENWICH

CRC 315

1949 AUG 16 15 10 7

7208

FUK 56

AUG 17 3 00 PM '49

FPA 032

O. O. M. G.
TEL & CAB SECTION

RR UEPC

DE UFPOC 12

R 161404Z

FM HQ AGRC PARIS FRANCE

TO OOMG WASHDC
GRAVES GRNC

REF AGRC FIVE FOUR FIVE SEVEN

ATTN MEMORIAL DIVISION

REURADL WCL THREE THREE EIGHT FIVE EIGHT PD REPROCESSED CHECK LIST

AND TOOTH CHART FOR UNKNOWN XRAY ONE THREE ZERO SEVEN FOUR SAINT

AVOLD (BEING FORWARDED YOUR OFFICE THIS DATE ON TRANSMITTAL LETTER)

NUMBER FOUR TWO ONE NINE PD END AGRRE RAGUSE

16/1411Z AUG

Memo (10) 2

1949 AUG 16 PM 3:49

315

AGRC PARIS
AGRC-5757
161404Z
O.M.G.
74413

74413

393 DNIC. FRANCE X-1307A

(ST. AVOLD)

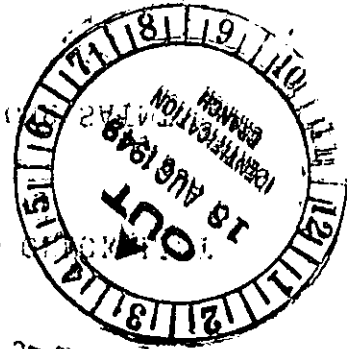
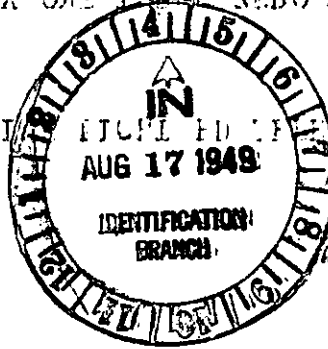
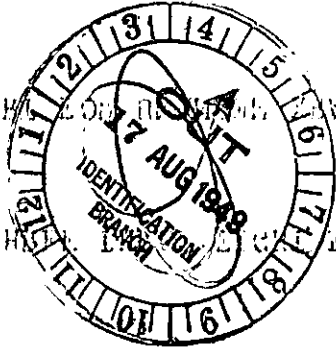
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S. Per
J. Down
18 Aug 49

IDENTIFICATION BRANCH

RECEIVED BY THE IDENTIFICATION BRANCH

AUG 17 4 11 PM '49

MEMORIAL DIVISION OF THE IDENTIFICATION BRANCH



AUG 17 4 27 PM '49
MEMORIAL DIVISION

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ALL MEMORIAL DIVISION

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COM3 DEPT OF ARMY WASH DC

UNCLASSIFIED

CG AGRC PARIS FRANCE

PRIORITY

X

FROM COM3

WCL 33858

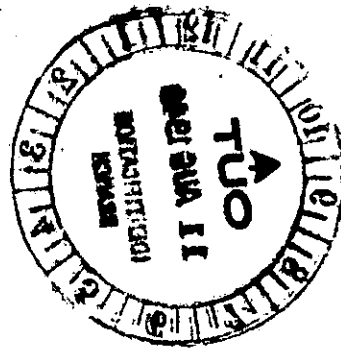
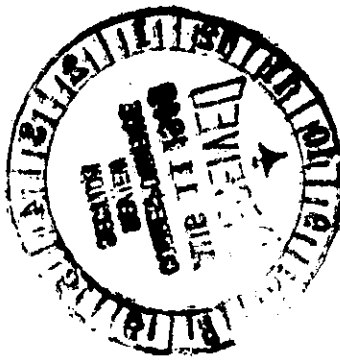
REQUEST AIR MAIL REPROCESSED CHECK LIST AND TOOTH CHART FOR XRAY 13074

ST AVOLD

ADMINISTRATIVE BRANCH
Aug 11 12 12 PM '49
MEMORIAL DIVISION

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REB
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TEH

Aug 11 12 12 PM '49
O.O.M.G.
TEL & CAB SECTION
Jan



Lee: cam
Clements
REB UNCLASSIFIED

111330Z

GRAVES

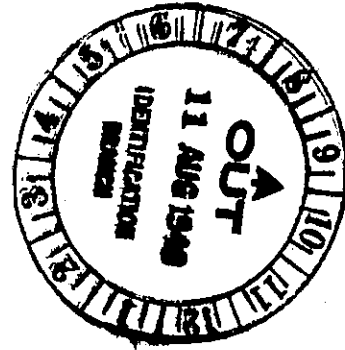
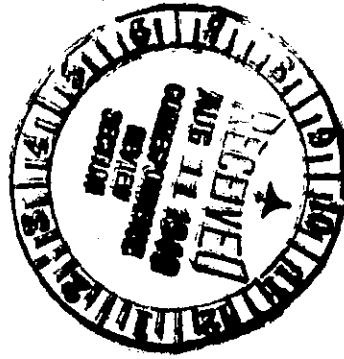
COM3 CAPT BERRY EXT 72947 AUG 49
293 X-13074 (ST AVOLD)

M. R. HORNER
1ST LT, GRC, MEM DIV

From

HRP
Crawstips
196: 697

JJJ2301



LET & CAB SECTION
O.D.M.'s
AUG 11 15 15 PM '48

[Handwritten signature]

132

293 Unk France X-13074 (St. Avold)

US ARMY DEPT OF ARMY WASH DC

UNCLASSIFIED

CHIEF INVESTIGATION DIV
780V GERSO BMT
PARIS FRANCE

DEFERRED

FROM USMT

WCL-35247

QUEST FOR GERM LETS CASE PAPERS IN ARMY FILE ST AVOLD POSSIBLY
RELY 12074 WITH PARTICULAR REF TO DATE AND PLACE OF BIRTH AND
DISINTERMENT

X 293 Unk France X-8153 (St. Avold)

RE
TH

VLee:cdt

301400Z

CLEMENTS
REB

UNCLASSIFIED

GRAVES

QUEST CAPT HARRY EAT 78047 JAN 80
288 GRS EUROPEAN (ST AVOLD)

CAPT JAC H.G. BAKER
CHIEF INVESTIGATION DIV

293 Unk France X-13074 (St. Avold)

Q380 DEPT OF ARMY WASH DC

UNCLASSIFIED

CHIEF REGISTRATION DIV
7867 GERS BMT
PARIS FRANCE

DEFERRED

FROM QUART

WCL-35247

REQUEST FOR COMPLETE CASE PAPERS FOR XRAY 8166 ST AVOLD FORMERLY
XRAY 13074 WITH PARTICULAR REF TO DATE AND PLACE OF DEATH AND
DISINTERMENT

X 293 Unk France X-8153 (St. Avold)

V Lee :cdt

301400Z

CLEMENTS
REB

UNCLASSIFIED

GRAVES

QUART CAPT HENRY BMT 72947 JAN 50
293 GRS EUROPEAN (ST AVOLD)

CAPT Q380 REG DIV

DCR DHS



DISINTERMENT DIRECTIVE

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
3574 15020

DATE
15 03 49
DAY MONTH YEAR

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
UNKNOWN	01 3074		0	0	0

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS
ST AVOLD FRANCE	XXX	7	102	3503 80 CODE DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
ST. AVOLD, FRANCE

NAME AND ADDRESS OF NEXT OF KIN
(BY ADMINISTRATIVE DECISION)

SECTION C — DISINTERMENT AND IDENTIFICATION

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

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

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

REMAINS PREPARED AND PLACED IN CASKET

DATE	BY	EMBALMER (Signature)

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
DATE	BY

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

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

ABD 1949

100

045

16

DISINTERMENT DIRECTIVE

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

3574 15020

DATE

15 03 49
DAY MONTH YEAR

NAME

UNKNOWN - 01 3074

SERIAL NUMBER

GRADE

ARM

RACE

RELIGION

CEMETERY

ST AVOLD FRANCE

PLOT

XXX

ROW

7

GRAVE

88

DISPOSITION OF REMAINS

3503 RQ
CODE DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

ST. AVOLD, FRANCE

NAME AND ADDRESS OF NEXT OF KIN

(BY ADMINISTRATIVE DECISION)

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

GRADE

DATE OF DEATH

DATE DISTINTERRED

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

- REMAINS
- MARKER

UNKNOWN

NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

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

REMAINS PREPARED AND PLACED IN CASKET

DATE BY

CASKET SEALED BY

EMBALMER (Signature)

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY

DATE BY

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

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

6

DISINTERMENT DIRECTIVE

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

3574 16020

DATE

02 03 50
DAY MONTH YEAR

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
UNKNOWN X-8153			8	0	6

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS
(ST AVOLD FRANCE)	XXX	12	133	1202 CODE 80 DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
NEUVILLE-EM-CONDROZ, BELGIUM	(BY ADMINISTRATIVE DECISION)

SECTION C — DISINTERMENT AND IDENTIFICATION

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

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

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

REMAINS PREPARED AND PLACED IN CASKET

DATE	BY	EMBALMER (Signature)

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY

DATE	BY

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

NAT

FILE

8 MAR 1950
NAME H. R. SEPT

SIGNATURE OF AGRS INSPECTOR R & R BR.

REMARKS AND SPECIAL INSTRUCTIONS

REMAINS ARE UNIDENTIFIABLE. PREVIOUSLY DESIGNATED X-13074-B IN PLOT XXX, ROW 7, GRAVE 82, ST. AVOLD, FRANCE.

AIRMAIL

X-8153 - ST Avolo

3146

~~SECRET~~
GDS European

1st Ind

SUBJECT: Certification of Unidentifiability of Remains
Transmittal Letter #4711

Dept. of the Army, CGMS, Washington 25, D. C., 10 February 1950

TO: Chief, Registration Division, 7887 Graves Registration
Detachment, APO 98, c/o Postmaster, New York, New York

1. This Office approves the classification of Unknowns X-6088,
X-7739 and X-8153, listed on basic communication as Unidentifiable.

2. Unknown X-6987 was suspended to your headquarters under
separate communication, letter dated 10 February 1950.

3. It is recommended that all action in connection with Un-
knowns X-4652 and X-6839 be suspended pending further notification
from this Office.

FOR THE QUARTERMASTER GENERAL:

Incls w/c

T. H. HUNT
Lt. Colonel, GSC
Memorial Division

Rice/id

Foy

REB

Cy furnished: Adm Sect

JMN

TEC

AIRMAIL

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 757 US ARMY

RFE 293

27 January 1950
(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X - 8153, Plot XXX, Row 12, Grave 133, 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 4570, dated 8-12-49.

3. Remarks :

See Case History attached.

Case reviewed by undersigned Members of the Board of Review :

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

E. D. Mulvanity
Lt Col. E. D. MULVANY, O-359598 QMC

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

1st Lt. Gaylord E. LUNZ, O-1595665 QMC

Leodore Goudreau
CWO Leodore GOUDREAU, W-2113434 USA

Received *Opal Rice* 0075
Not identified from 8 Feb 50

Incl #6 I.R. # 4744, 30 Jan 50

CASE HISTORY

UNKNOWN NO X-8153

USMC ST.AVOLD, FRANCE

UNIDENTIFIABLE

Investigation conducted at USMC St.Avold, France, on 10 October 1949, revealed that there were two (2) caskets labelled Unknown X-13074, both of which reflect previous burial location as Plot 3X, Row 7, Grave 82, USMC St.Avold. (Subject caskets were above ground prior to shipment to USMC Neuville for storage.)

Narrative of the investigation further indicates the subject two (2), remains were referred to as X-13074 (subsequently identified as F/) Kenneth H. Loehwing, T-061763) and X-13074 "B". In view of the fact that the body (identified as F/O Loehwing) is the proper remains which were originally interred Plot 3X, Row 7, Grave 82, in compliance with Exhumation Order #1118, dated 18 November 1948, the second body (X-13074 "B") has been assigned Unknown number X-8153 and allotted new grave location, USMC St.Avold, Plot 3X, Row 12, Grave 133.

From the facts presented above, it is concluded that there is no valid evidence to indicate the remains of Unknown X-8153 could be associated, by date and place of death, with Unknown X-13074 which was recovered from Rehmsdorf, Germany. (M-52/K-18). (Records of this Headquarters disclose no further unresolved casualties to be accounted for, Rehmsdorf.)

No information relative to the date and place of death of Unknown X-8153 is available and therefore these pertinent facts were not recorded on the Report of Burial prepared for the subject remains.

Inasmuch as the date and place of death for Unknown X-8153 could not be determined, the teeth found with subject remains could not be compared with dental data of unresolved casualties in any specific map sheet location in the ETA; consequently dental chart comparison was not feasible in the subject case.

As reprocessing of X-8153 revealed no positive identifying media and in view of the foregoing negative results to establish identity of this case, it is recommended that the subject Unknown be classified as UNIDENTIFIABLE at the present time.

A. SWETNICK
26 January 1950

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

RRE 314.6

9 January 1950

SUBJECT: Identification Check Lists (Extractions)
Transmittal Letter # 4677

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

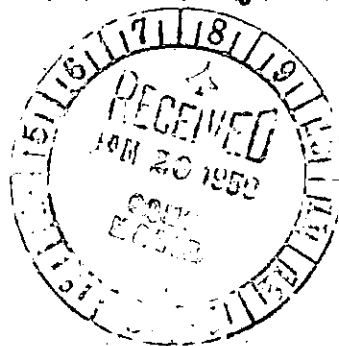
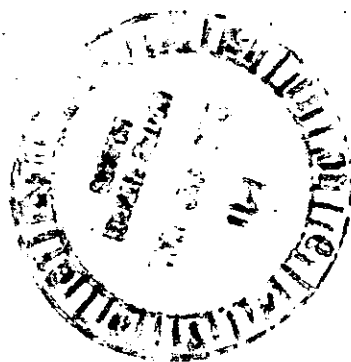
Forwarded herewith for your files are four (4) extractions
of Identification Check Lists, pertaining to the Unknown deceased
listed below:

<u>Unknown No.</u>	<u>Cametery</u>	<u>Plot</u>	<u>Row</u>	<u>Grave</u>
X-7982	Margraten	GGG	8	180
X-3417	Neuville	G	11	261
X-6674	Neuville	CC	10	250
X-13021 B	St Avold	XXX	8	94

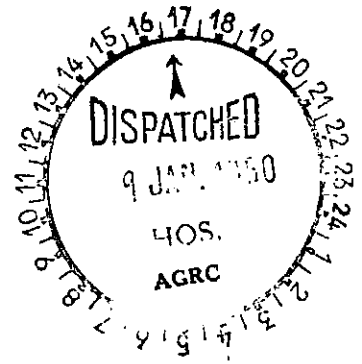
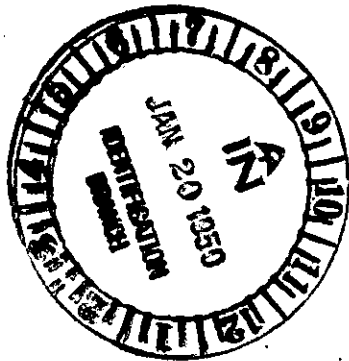
FOR THE COMMANDING OFFICER:

4 Incls
Ident Check Lists
(Extractions)

GAYLORD E. LUTZ
1st Lt, QMC
Assistant Adjutant



314.6
GRS.
E. Lutz



E.O. #1974

LINK X-13074

TWO

TOOTH CHART

USMC St. Arnold

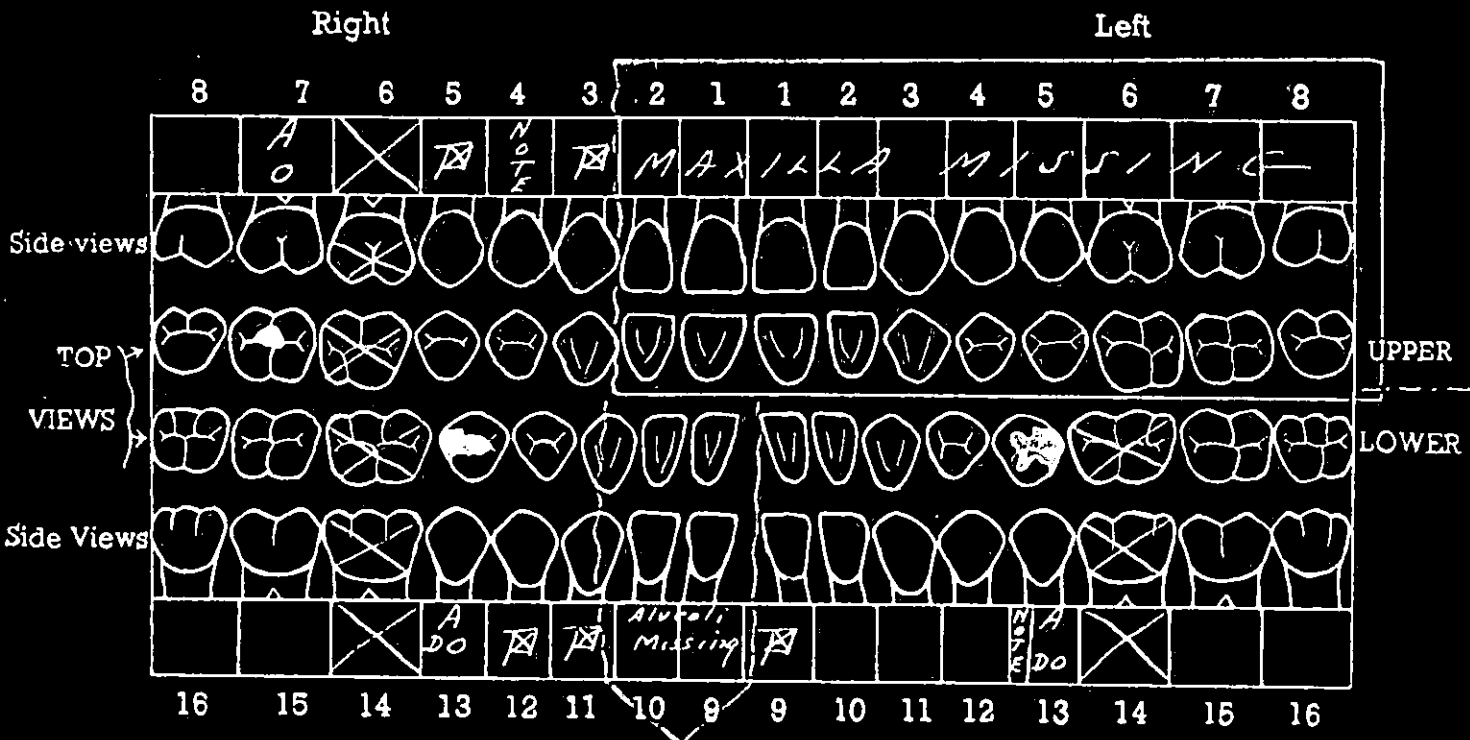
XXX-7-82

#2

13 June 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), 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.

Size - Average
 color - Ivory
 Posthumously
 Missing - R 3 and 5, 11 and 12
 Spaces - L 14 - L 9
 R 14 - R 11
 L 13 rotated 35° Mesially
 R 12 " 15° Distally (Alveolus)
 R 4 " 25° Distally

Wesley A. J. [Signature]
 Signature of Officer or other person who prepared Tooth chart

Verified by G. R. C. Officer

ET FORM 1-22 (29 AUG. 46)

(OLD GRAVE REGISTRATION FORM I-A)
 wear - Very Heavy
 calculus - moderate

E.O. #1974

X-13074
USMC ST. AVONIA
XXX-7-8E

TWO TOOTH CHARTS

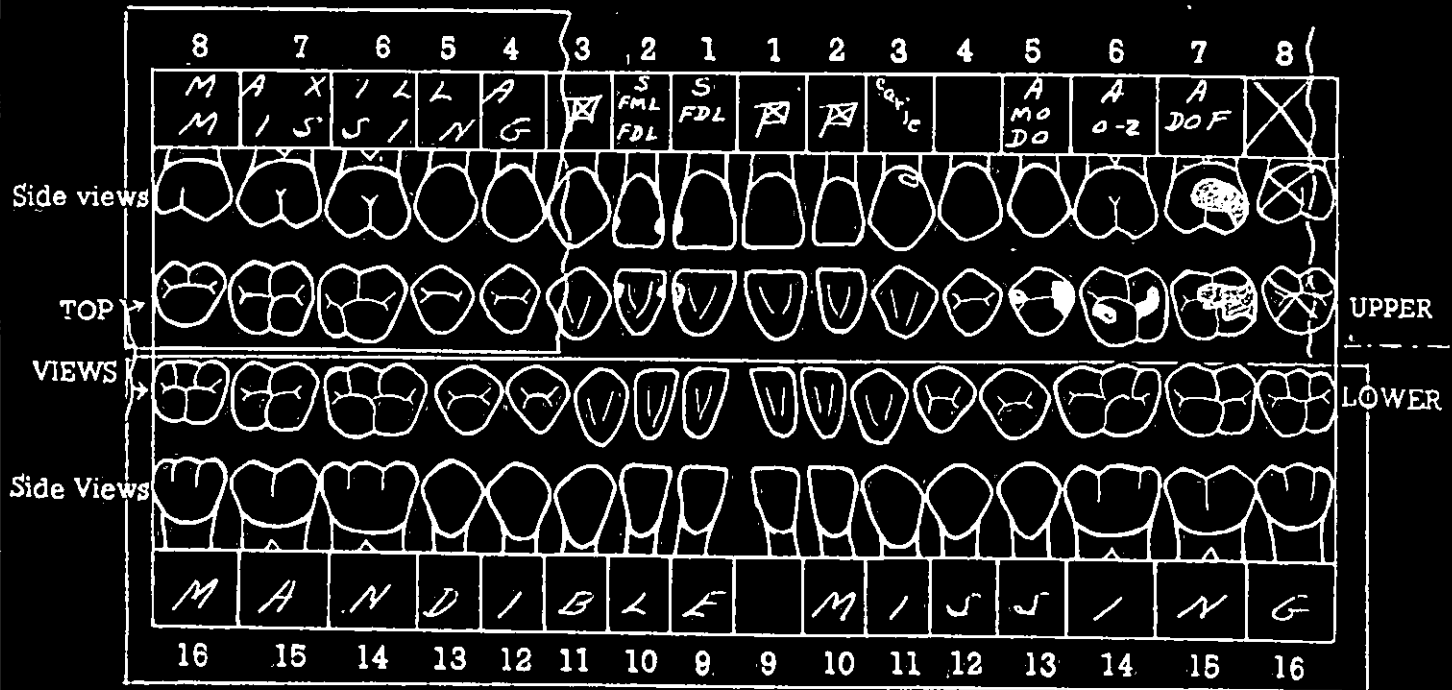
#1.

13 June 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 - Large
 color - white Ivory
 Posthumously
 Missing - R3 and
 wear - slight - L1 and 2
 Alignment - Good
 calculus - Moderate

Signature of Officer or other person who prepared Tooth chart
Wesley A. Hoop

E.O. #1974

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN <i>X-13074</i>				2. DATE OF REPORT <i>14 June 1949</i>	
3. NAME OF CEMETERY <i>USMC. St. Auld</i>	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	<i>XXX</i>	<i>7</i>	<i>82</i>	DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT <i>AGE</i> <i>25-30</i>	9. ESTIMATED HEIGHT <i>5'-10"</i>	10. COLOR OF HAIR <i>Med. 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

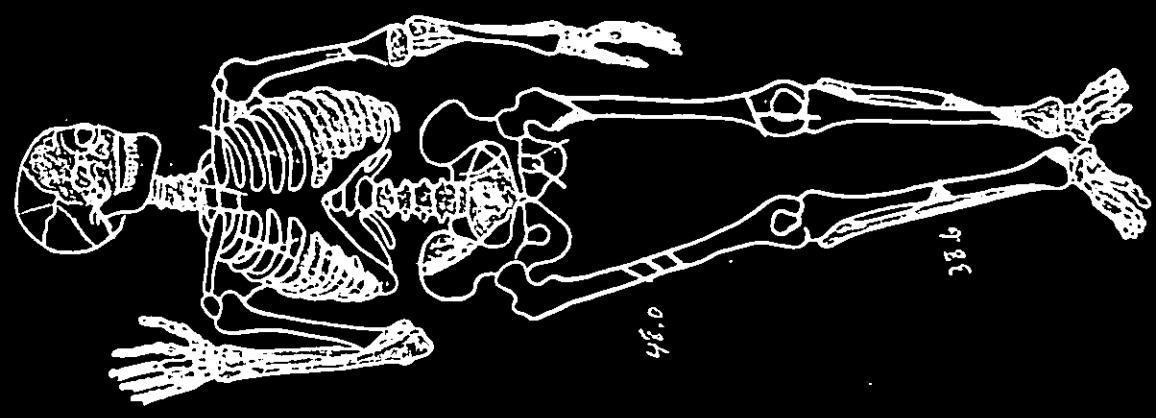
14. WAS BODY BURNED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT EXTENT? <i>Throughout</i>
15. WAS BODY WANGLED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT EXTENT? <i>See skeletal Blackout chart</i>

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS
None

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

19. BLACK OUT PARTS OF BODY NOT COVERED

X-13074
7 vertebrae Present



Est. Height: 5'-10"

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

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

NUMBER

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

Remains previously processed by F.O.S.
and received disarticulated with a small
amount of decomposed flesh.
Teeth recovered and charted.
No clothing.
Est. wt. of reprocessed remains: 10 lbs.
Est. Height: 5'-10"
Est. Age: 25-30 years.
Head Hair: Medium Brown.

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

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN Unknown X-13074 "B" Now designated as X-8153				2. DATE OF REPORT 10 Oct. 1949		
3. NAME OF CEMETERY ST. AVOLD		4. PLOT XXX	5. ROW 7	6. GRAVE 82	7. DATE OF DISINTERMENT REINTERMENT --- ---	

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT age 28-33	9. ESTIMATED HEIGHT 5'10"	10. COLOR OF HAIR Brown	11. RACE UTD
---	-------------------------------------	-----------------------------------	------------------------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

None found

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

None found

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

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

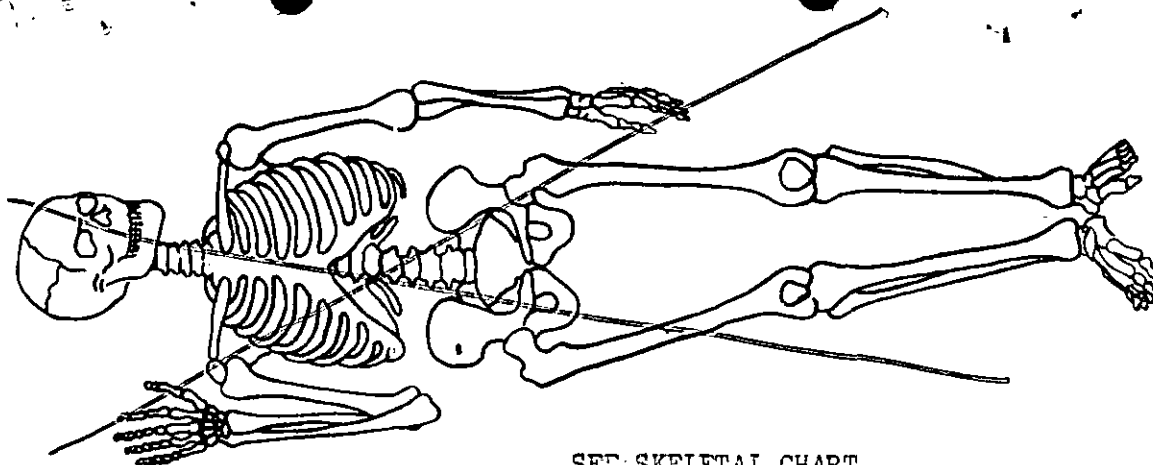
16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

None found

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 found

19. BLACK OUT PARTS OF BODY NOT COVERED



SET SKELETAL CHART

20.

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

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

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

Remains received in disarticulated skeletal form embossed plate marked Unk. X-13074 received with remains. Disposition repinned to blanket containing remains.

Hair - Brown
Teeth- See Tooth chart
Est. age: 28-33
Est. Height: 5'10"

Tech
Byrd
Peterson
Clerk-Green

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

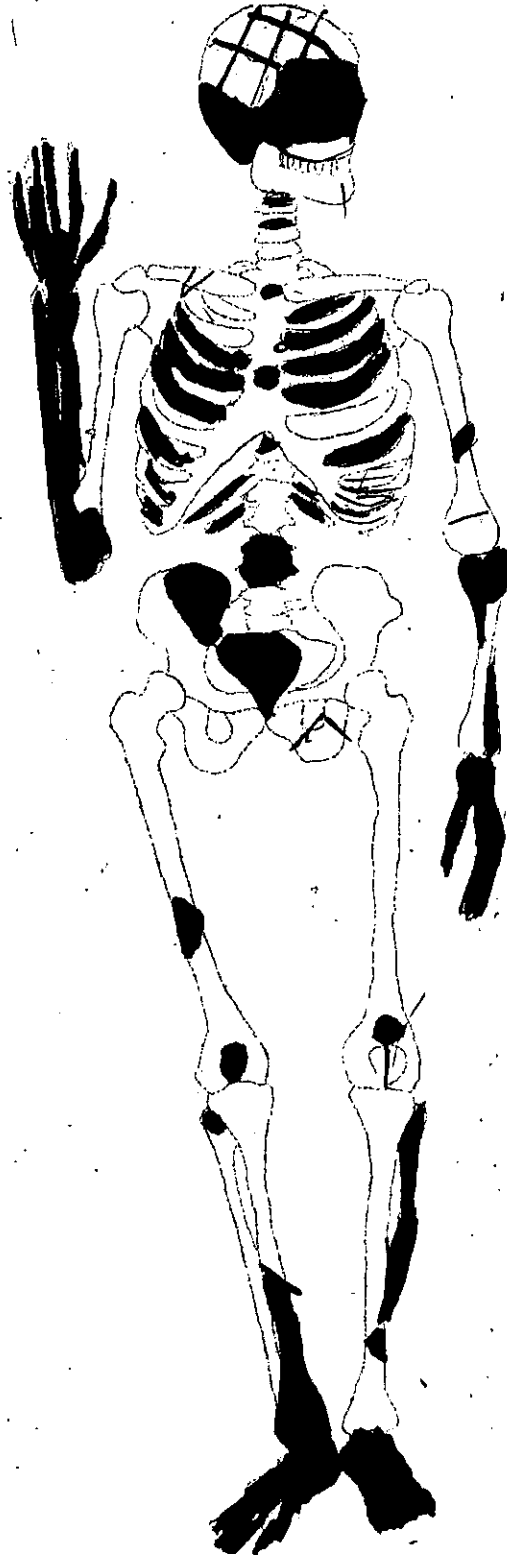
SIGNATURE

s/t JOHN E. BYRD
DAC Tech

SKELETAL CHART

X-13074

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



FEMUR 48.00

Now designated as X-8153

TOOTH CHART

CHART #1

10 October 1949

Date

Last Name	First	Initial	Grade	Serial No.
Unit		Organization		

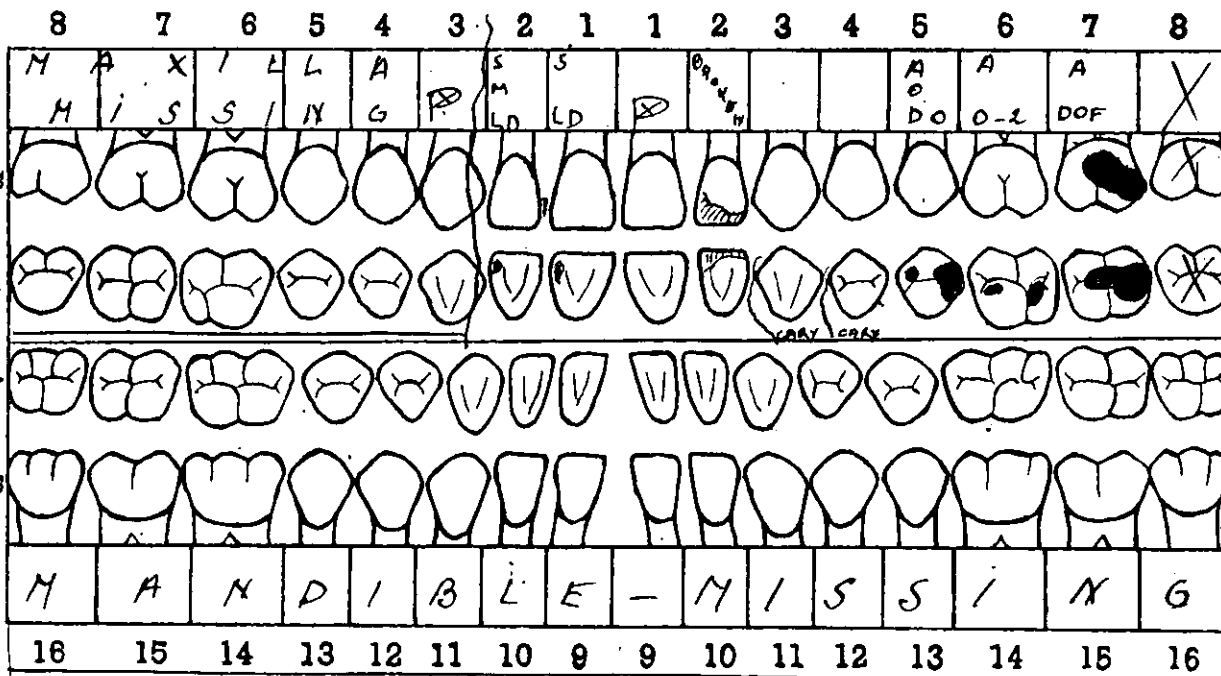
Place of Death

Date of Death

Cause of Death

Right

Left



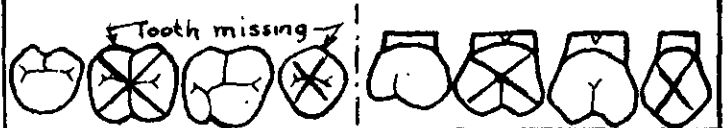
This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), 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.

s/t ODIN ROLSETH

Signature of Officer or other person who prepared Tooth chart

Verified by G. R. C. Officer

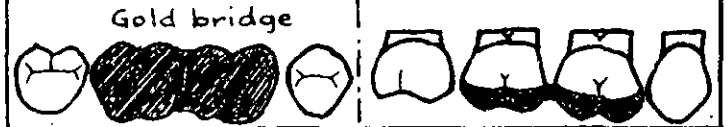
MISSING TEETH... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



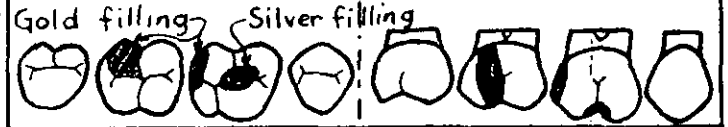
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



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

Size: Average
 Color - Ivory
 Skin: Light
 Calculus - Lig.Ht
 Alignment - Good

Now designated as X-8153

TOOTH CHART

chart #2

10 October 1949

Date

Last Name	First	Initial	Grade	Serial No.
Unit		Organisation		

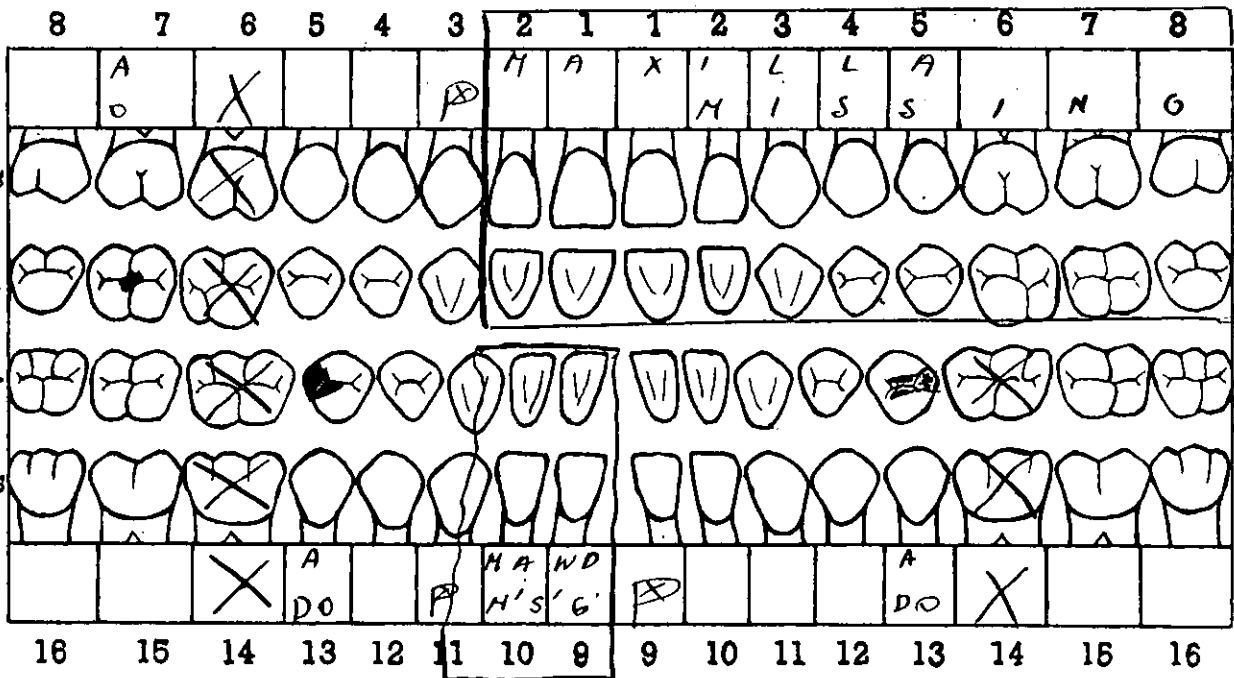
Place of Death

Date of Death

Cause of Death

Right

Left



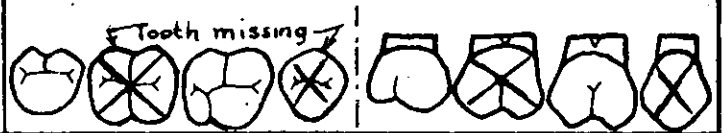
This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), 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.

s/t ODIN ROISETH

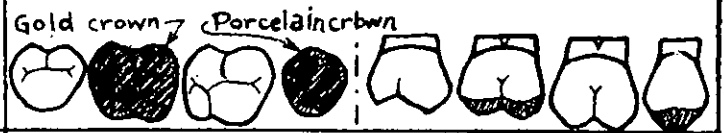
Signature of Officer or other person who prepared Tooth chart

Verified by G. R.C. Officer

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



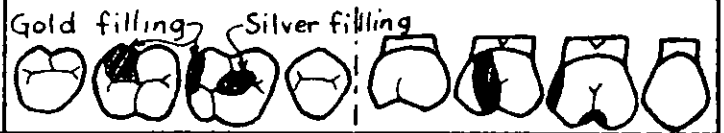
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



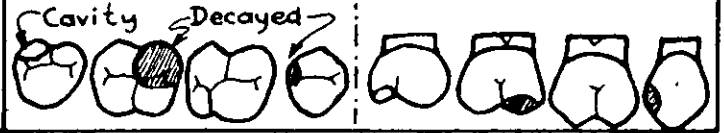
BRIDGE WORK... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



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

- Size: Medium
- Color: Dull ivory
- Skin: Medium
- Calculus: Medium
- Spaces R5 to R7 - 8 mm
- R13 to R15 - 3½ mm, L13 to L15 - 1mm Alignment

Subject: Investigation
KARPE - N-13-1878
X-13074 - 3X-7-82
Y-13074 - 3X-7-82

10 October 1949

N A R R A T I V E

Investigation revealed that there were two remains with unknown numbers X-13074, 3X-7-82. Further investigation revealed that one of these remains compared with check list of Leland E. Karpe N-13-1878 processed on E.O. #1029, 6 August 1948. These remains also compare with FPDIF for Kenneth H. Lehwing.

The other remains with unknown No. X-13074, 3X-7-82 compare with check list for same remains on E.O.#1974 - 14 June 1949. The tag of these remains have had the letter "B" added as means of identification, and which of the remains is which.

A check list for the remains identified as KARPE has been accomplished.

All check list, tooth charts and skeletal charts are forwarded herewith.

At present the stock locations of all subject remains concerned are as follows:

KARPE, Leland E. 21-25 known area
X-13074 (BTB Lehwing) 2-46 unknown area
X-13074 "B" (Unknown) 22-13

s/t: JOHN E. BYRD

REPORT OF BURIAL

FM 10-630 AND AR 30-1815

16 November 1949
Date

UNKNOWN X-8153

Last Name	First	Initial	Rank	Serial No.
Unit		Organization		
Place of Death		Date of Death	Cause of Death	
Time and Date of Burial		Name of Cemetery	Name or Coordinates of Location	
Grave Number	Row Number	Plot Number	Type of Marker	

U.S. Military Cemetery, ST. AVOLD

133 12 XXX Cross

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

If No Identification Tags Previously designated Unknown X-13074-B in Plot XXX,
How were remains identified? Row 7, Grave 82, U. S. Military Cemetery, St. Avold.
Redesignated Unknown X-8153 and allotted new grave location, authy:
Hq, AGRC-EA.

What means of identification were buried with the body? :

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

Who is buried on :

Deceased's Right :	OPEN GRAVE	Serial No.	Rank	Organization	Grave No.
Deceased's Left :	BEGINNING OF ROW	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 bellow :

Emergency Addressee: Unknown
Name

Address

Religion: Unknown

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

This copy of Report of Burial,
prepared at Hq, AGRC-EA.

Edward F. Price Jr.
Signature of Officer or other person reporting burial
EDWARD F. PRICE JR.
Capt. OMC

Verified by G.R.S. Officer

Jan 1950

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

4	
3	
2	
1	
Thumb	

Right Hand

4	
3	
2	
1	
Thumb	

TOOTH CHART

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

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.

