

243 unit St. Avold X-870

011430Z

NOV 1951

UNCLASSIFIED

QCMC DEPT OF THE ARMY WASH DC

DEFERRED

OO 7887 GREG DET
LIERGE BELGIUM

X

DA 39522

FROM QMGT

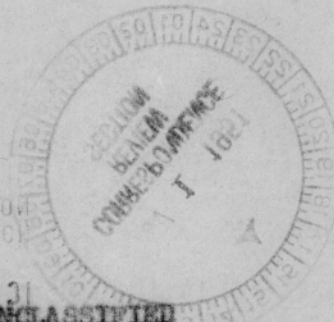
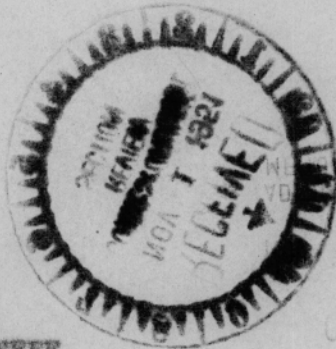
RGST GRAVE SIDE PROCESSING XRAY 870 ST AVOLD TO VERIFY DENTAL CHART AND
AGE EST

NOV 1 12 28 PM '51
O. O. M. G. 970
TEL & CAB SECTION

apb Foy/dfg

cc--Administrative Section

Jmm
JMN
BBK



UNCLASSIFIED

(GRAVES)

CAPT JOHN M NEFF

QMGT 293
X-870 ST AVOLD

52462

J C BRICHER LT COL QMC
MEMORIAL DIVISION

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

GROP 200.2

27 November 1951

SUBJECT: Reprocessing of Remains

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

1. Reference is made to radio, your Office, DA 39522 dated 1 November 1951.
2. Forwarded herewith for your information is QMC Form 1044, together with Narrative of Reprocessing, pertaining to Unknown X-870 St Avold.

FOR THE COMMANDING OFFICER:

Clyde W. Steinsiek
CLYDE W. STEINSIEK
Major, QMC
Operations Branch

- 2 Incls
1. Narrative of Reprocessing dtd 17 Nov 51
 2. QMC Form 1044 w/allied papers

AM
File

V. A. Thomas
12 Dec 51
Identification Branch

293 unk - X-870 St. Avold

HEADQUARTERS
7887 GRAVES REGISTRATION DETACHMENT
OPERATIONS BRANCH
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1. Narrative of Reprocessing dtd 17 Nov 51
2. QMC Form 1044 w/allied papers

CLYDE W. STEINSIEK
Major, QMC
Operations Branch



293 unk-X-870 St. Avold

17 November 1951

NARRATIVE OF REPROCESSING

1. Unknown Remains X-870^(STAVO-D) USMC Draguignan, France was reprocessed at graveside per cable instructions from OCMG Washington for the purpose of verification of estimated height, weight, age, head hair and dental chart.
2. The remains was found to be complete except for the fifth, sixth and seventh cervical vertebrae, a few fragments of skull and phlanges of hands and feet.
3. Teeth are intact in the skull which articulates with the first four cervical vertebrae.
4. CAUSE OF DEATH: The only evidence of injury is the severely shattered skull.

Wesley A. Neep
WESLEY A. NEEP
US DAC GS-7
Lab. Ident. Techn.

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN I-870 ST AVOLD				2. DATE OF REPORT 17 November 1951	
3. NAME OF CEMETERY Draguinan, France (POC)		4. PLOT C	5. ROW 12	6. GRAVE 5	7. DATE OF DISINTERMENT REINTERMENT
PHYSICAL DESCRIPTION					
8. ESTIMATED WEIGHT AGE 20-23		9. ESTIMATED HEIGHT 5-11 3/4		10. COLOR OF HAIR Brown	
11. RACE W					
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS Mostuary plate pinned to blanket containing remains.					
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES None					
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? Skull only			
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-870 (STAVOLD)
Draguinan

19. Black out parts of body not recovered

C-12-5 (POC)

(SEE 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:

Signature of medical officer

21. Remarks and additional information

Remains are in skeletal form with a small amount of flesh.

Technician: W. A. Neep

Clerk: W. A. Neep

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

CHART "A-1"

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

X-8705T And
Draguinan
0212-5

RIGHT

LEFT

STERNUM _____

HUMERUS _____ cm

ULNA _____ cm

RADIUS _____ cm

FEMUR _____ cm

TIBIA _____ cm

FIBULA _____ cm

Est. Age 20-23

Est. Height 5-11 3/4

Color Hair Brown

Healed Fractures None Noted

Small Am. of Flesh
Not burned
Est. Wt. 145-165

SKULL _____ Inc

HUMERUS 35.4 cm

ULNA 27.7 cm

RADIUS 26.3 cm

FEMUR 48.5 cm

TIBIA 40.3 cm

FIBULA 39.8 cm

~~X~~ - Missing

~~X~~ - Burned

~~X~~ - Fractured

~~X~~ - Shattered

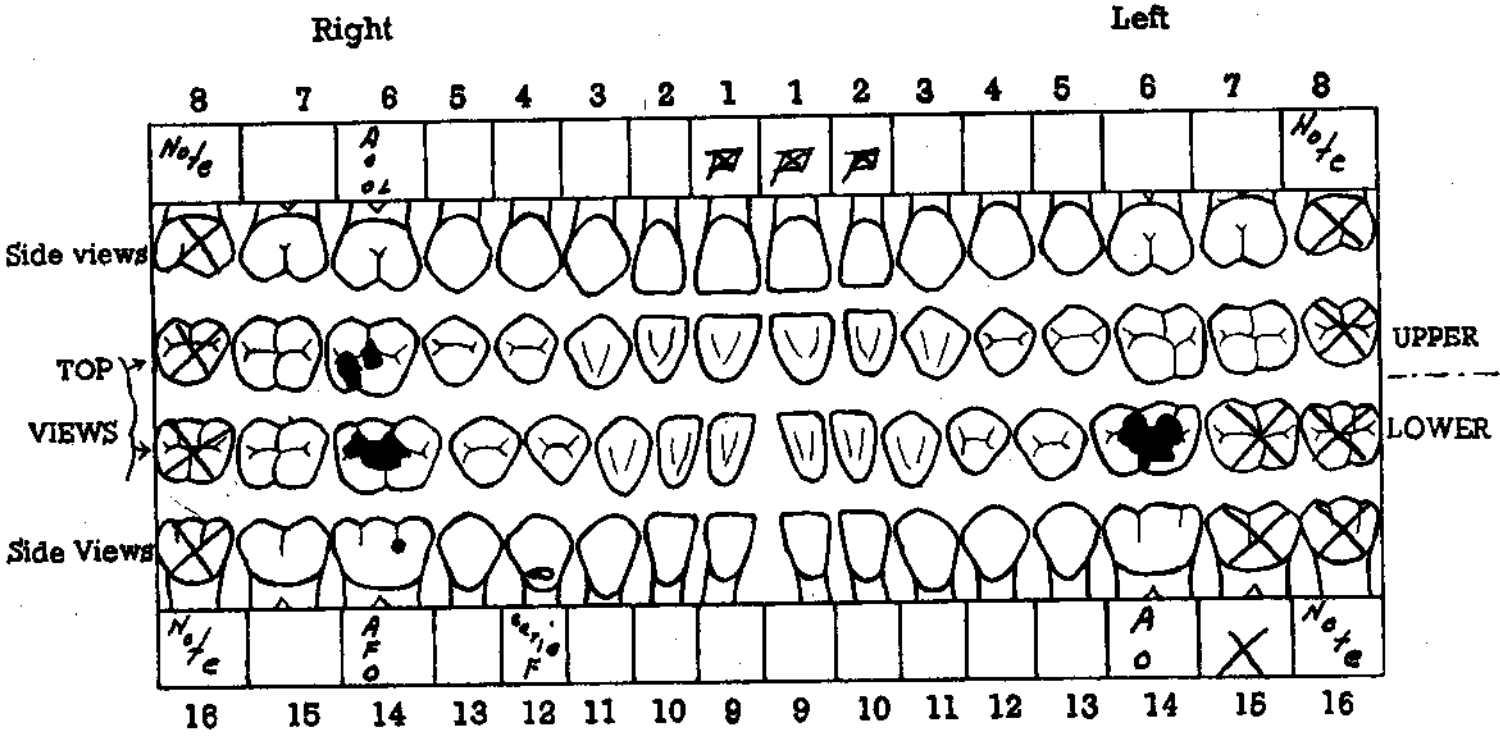
SIGNATURE

Ma Deep

TOOTH CHART

X-870 (STAN 40)
 Dragunan
 C-72-5 (POC)
 17 Nov. 1951
 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 - Dull Ivory
 Post. Missing - R1; L1, 2.
 R8, 16; L8, 16 Unerupted
 Spaces - L2-4 1mm
 L15 4mm (Est)
 Lower anteriors crowded
 calculus - Moderate

[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 1-A)

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

7887 GRAVES DETACHMENT

APO 757

943 unk St. Avold X-870

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: *MB*

UNKNOWN X-870, ST AVOLD, FRANCE.
(FOC) DRAGUIGNAN

*files 2 mar 51
Kirkland
Ident.*

HEADQUARTERS
1st PLATOON
3049th QM GRAVES REGISTRATION COMPANY
APO 667 U.S. ARMY

1 June 1945

These two bodies were floating down the Rhine River and were picked up and buried by German Soldiers, the grid coordinates for the point of burial are (55.1 76.9). Sheet U-3 1/100,000.

Believed to have been ⁱⁿ the river two or three days, before they were picked up and buried on 24 or 25 March 1945.

One had a cracked skull could have been shot in the head, the other was supposedly wounded in the leg. The one that was wounded in the leg, the information on this body was given to me by Maj. Ogden, of the British Army, as told to him by German Civilians. Major Ogden's address is; 30 Karlsruhe Hockenheim.

One body has two Identification tags: **WILLIAM, E. GAFFNEY**

ASN. 4212 0197 - T44-44- A

C.

Alvin C. Arthur
Sgt. QMC
3049 QM Gr Reg Co.

(Map on reverse side)

37702688

Antkman American X-202



X-870

Sheet 243. MANNHEIM
GRID. CORD. (R55-1-76-9)

→ NORTH

RHINE

GRAVE MARKED
ZWIE AMERIKANICH
COMMON GRAVE

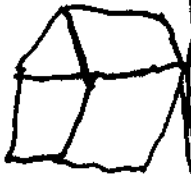
← FOOT BRIDGE

77

CANAL

AITLUSHEIM

FARM HOUSE



ELECT HOUSE

RHINENHUSEN ROAD



HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

9 August 1949
Date

SUBJECT: Unidentifiable Remains

293 Unk. France X-870 (St. Avoild)

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

1. The records pertaining to Unknown X- 870 , Plot 000 ,
Row 6 , Grave 70 , USMC St. Avoild, France have been
reviewed and it is the opinion of this office that insufficient evidence
is available to establish the identity of this deceased, and that these
remains should be classified as unidentifiable.

2. Report of Reprocessing was forwarded to your office by
letter of transmittal No. 2674 , dated 24-2-48 . No
further information is available.

FOR THE COMMANDING GENERAL:

/s/ Lt. Col. E.D. MULVANY, O-359598

/s/ Major R. BERGER, O-251736

/s/ 1/Lt Edward E. STOUT, O-1594512

Received 17 OCT 1949 ----- OQMG
Not identifiable from
information presently
available

NAT
File 17 Oct 49
M. Blund
Ident. Div.

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

9 August 1949
(Date)

RRE 293

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X - 870, Plot 000
Row 6, Grave 70, USMC ST. AVOLD, France
have been reviewed and it is the opinion of this Office that sufficient
evidence is not available at the present time to establish the identity
of the deceased concerned. The remains concerned should be classified as
unidentifiable at the present time.

2. Report of Reprocessing of remains was forwarded to your
Office by Transmittal Letter No. 2674, dated 24-2-48.

3. Remarks:

Received 17 OCT 1949 QMG
Not identifiable from
information presently
available

Case reviewed by undersigned Members of the Board of Review:

Col. H.P. HENRY, O-12589

QMC

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

QMC

Major R. BERGER, O-251736

ORD

Capt. Jack C. HAYES, O-1577297

QMC

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

QMC

1/Lt. Edward E. STOUT, O-1594512

CE

Incl #4

1

USMC DRAGUIGNAN
PLOT: C ROW: 12 GR: 5
DATE OF BURIAL: 13 Feb. 1950
VERIFIED BY GRS OFFICER:
A. Rhodes Sept

DISINTERMENT DIRECTIVE

ent

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

NAME: *2/3 UNKNOWN* SERIAL NUMBER: X-000870 RANK: ARM: 0
DATE OF DEATH: DAY MONTH YEAR

CEMETERY: ST AVOLD - METZ DEPOSIT OF REMAINS: 0
CODE: 3503 DIST. PT.: 80

PLOT: 000 ROW: 6 GRAVE: 70 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)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME: UNKNOWN X-000870 SERIAL NUMBER: RANK: Unk DATE OF DEATH: Est 20 Mar 45 DATE DISTINTERRED: 20 May 48
IDENTIFICATION TAG ON: REMAINS MARKER EMB ORGANIZATION: UNKNOWN RELIGION: Unk IDENTIFICATION VERIFIED BY: Geo W Lowry, Embalmer
NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: Mattress cover CONDITION OF REMAINS: Fractured skull - Body in skeleton form - Decomposition complete - disarticulated -

OTHER MEANS OF IDENTIFICATION: None
MINOR DISCREPANCIES: Report of Burial found with remains (Illegible)

REMAINS PREPARED AND PLACED IN CASKET
DATE: 26 May 48 BY: Geo W Lowry, Embalmer

CASKET SEALED BY: Geo W Lowry, Embalmer EMBALMER (Signature): *Geo W Lowry*
Geo W Lowry

CASKET BOXED AND MARKED: All markings plates & tags verified by: *J. Anderson*
DATE: 26 May 48 BY: Geo W Lowry, Embalmer James C Anderson, 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.
Grave C-12-5 USMC Draguignan was formerly occupied by: Pvt Joe A. SANCHEZ, 39557399 Disinterred: 13 February 1950.
SIGNATURE OF GRS INSPECTOR: *J. Anderson*
JAMES C ANDERSON, 1st Lt INF, Hq/Hqs Det 531 QM Gp

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.
CONSIGNEE CHANGED TO COMPLETE INTERMENTS AND SYMMETRICAL REPORT OF CEMETERY.
UNIDENTIFIABILITY APPROVED BY OCM 1st INF. DTD 29 OCT 49.
DATE: 24 Apr 1950
NAME: *J. Pyles*

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC St. Avold, France		TO OTC, Neuville, Belgium	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER Cpl Vincent P. Matzema, RA-32707218	
SIGNATURE OF SHIPPER <i>[Signature]</i>	DATE 2 Nov 49	SIGNATURE OF RECEIVER	DATE

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE (7A VEHICLE MAINT DIVISION)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER U.S. VAULT SERVICE	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

Med 293 Payne, Robert B. (Enl) 3rd Ind. AWC:rg
ASF, Regional Hospital, Fort McClellan, Alabama, 12 February 1946

TO: ASF, Office of The Quartermaster General, Washington, D. C.

In compliance with second indorsement, the following is submitted:

a. Remark listed under other conditions: Patient had a defective gold shell crown on R-1. It was removed and the gold given to patient. An acrylic jacket crown was made and placed on R-1 from which defective gold crown was removed.

b. Officer making original examination had marked L-14 absent. It was later discovered that L-14 was present and was so marked. R-15 and R-16 are absent. L-15 + 16

FOR THE COMMANDING OFFICER:



A. W. CHADWICK
Captain, MAC
Adjutant

1 Incl
n/c



RECEIVED
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON, D. C.

293 Wade X-202 Germany (Bonnheim) 2/1/46

*Col
Wentholm*

SPQYG-293 BAYNE, Robert B. (Enl)
(29 Dec 45)

1st Ind

EWP/mk

ASF, REGIONAL HOSPITAL, Fort McClellan, Alabama, 4 January 1946.

TO: Army Service Forces Office Of The Quartermaster General
Washington 25, D. C.

Basic communication complied with.

FOR THE COMMANDING OFFICER:



E. W. PATTERSON
Captain, MAC
Registrar

1 Incl
Cpy MD Form 79

SPQYG 293
Unknown X-202
(Bensheim) Germany

2nd Ind

ASF, OQMG, Washington, D.C.

6 February 1946

TO : ASF, Regional Hospital, Fort McClellan, Alabama

Remarks listed under "other conditions" are not understood by this office. It is therefore requested that an explanation be made relative to teeth E-1, L-14,15 and 16.

FOR THE ACTING THE QUARTERMASTER GENERAL:



ARTHUR S. ROSEGARD
2nd Lt., QMC
Assistant

Incl a/c



*file
2/20/46
mk*



ARMY SERVICE FORCES

OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

IN REPLY REFER TO SPQYG 293

Unknown X-202
Germany (Bensheim)

29 December 1945

SUBJECT: Identification of Unknown Deceased

TO : Commanding Officer, Fort Mc Clellan, Alabama

ATTENTION: Post Surgeon.

1. An investigation is being conducted by this office to determine, if possible, the identity of an Unknown American Soldier.

2. From information received, it has been tentatively determined that the unknown is Robert B. Bayne, 33 890 369.

3. It is requested that this office be advised if available records show whether or not dental work was performed for this soldier while on duty at your station, and if so, a copy of Form 79, Medical Department be furnished with a view to definitely establishing the identity of the Unknown.

4. Information is also requested if any dentures were made for this soldier while on duty at your station.

FOR THE QUARTERMASTER GENERAL:

ARTHUR S. ROSENGARD
2nd Lt., QMC
Assistant

RECEIVED
11 DEC 1945

29 DEC 1945

ALW
9/20/45

SPQIG 293
Unknown X-202
(Bensheim) Germany

2nd Ind

6 February 1946

ASF, OJMG, Washington, D.C.

TO : ASF, Regional Hospital, Fort McClellan, Alabama

Remarks listed under "other conditions" are not understood by this office. It is therefore requested that an explanation be made relative to teeth R-1, L-14,15 and 16.

FOR THE ACTING THE QUARTERMASTER GENERAL:

mft

292

Incl n/c

ARTHUR S. ROSENGARD
2nd Lt., QMG
Assistant

GRAVES REGISTER
FEB 7 2 09 PM '46

SPQYG-293 BAYNE, Robert B. (Enl)
(29 Dec 45)

1st Ind

EWP/mk

ASF, REGIONAL HOSPITAL, Fort McClellan, Alabama, 4 January 1946.

TO: Army Service Forces Office Of The Quartermaster General
Washington 25, D. C.

Basic communication complied with.

FOR THE COMMANDING OFFICER:

1 Incl
Cpy MD Form 79

E. W. PATTERSON
Captain, MAC
Registrar



293 - WWP. 4-20-46

4-20-46

SPQYG 293
Unknown X-202
Germany (Bensheim)

29 December 1945

SUBJECT: Identification of Unknown Deceased

TO : Commanding Officer, Fort Mc Clellan, Alabama
ATTENTION: Post Surgeon.

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4. Information is also requested if any dentures were made for this soldier while on duty at your station.

FOR THE QUARTERMASTER GENERAL:

dld

ARTHUR S. ROSENGARD
2nd Lt., QMC
Assistant

GRAVES REGISTRY DISTRICT
DEC 27 10 31 AM '45
MEMORIAL DIVISION
QMC
MEMORIAL RECORDS BRANCH

DEC 27 10 31 AM '45
MEMORIAL DIVISION

X 293 Bayne, Robert B. (33,890.369)

**ARMY SERVICE FORCES
MEMO ROUTING SLIP**

TO THE FOLLOWING IN THE ORDER INDICATED		CHECK ACTION	
TO: (Name, organization, building) 1 The Adjutant General's Office World War II Records Admin- istration Center	INITIALS	<input type="checkbox"/>	CONCURRENCE
	DATE	<input type="checkbox"/>	SIGNATURE
2 4300 Goodfellow Blvd., St. Louis 20, Missouri	<input type="checkbox"/>	<input type="checkbox"/>	NOTE AND RETURN
	<input type="checkbox"/>	<input type="checkbox"/>	NOTE AND FORWARD
3.	<input type="checkbox"/>	<input type="checkbox"/>	COMPLETE ACTION
	<input type="checkbox"/>	<input type="checkbox"/>	CIRCULATE
	<input type="checkbox"/>	<input type="checkbox"/>	INFORMATION
	<input type="checkbox"/>	<input type="checkbox"/>	FILE
		<input type="checkbox"/>	

293 Unknown X-202
(Bensheim) Germany

1. For necessary action.

MAIL & RECORDS BRANCH
OCT 4 5 11 PM '46
OCT 4 3 56 PM '46

ARTHUR S. ROSENGARD
2nd Lt., QMC
Assistant

Incl Form 8 W-A *4-293 Payne, Robert B.*
ack *33, 890, 369*

FROM: (Name, organization, building) Memorial Biv., Ident. Sect., Room 2442 B	DATE <i>1-46</i>
	TEL. 72993

TOOTH CHART

4 June 1945

Date

UNKNOWN AMERICAN X-202

Last Name

First

Initial

Unknown

Rank

Unknown

Serial No.

Unknown

Unit

Unknown

Organization

Vic. Altlusheim, Germany

Place of Death

Est. 20 March 1945

Date of Death

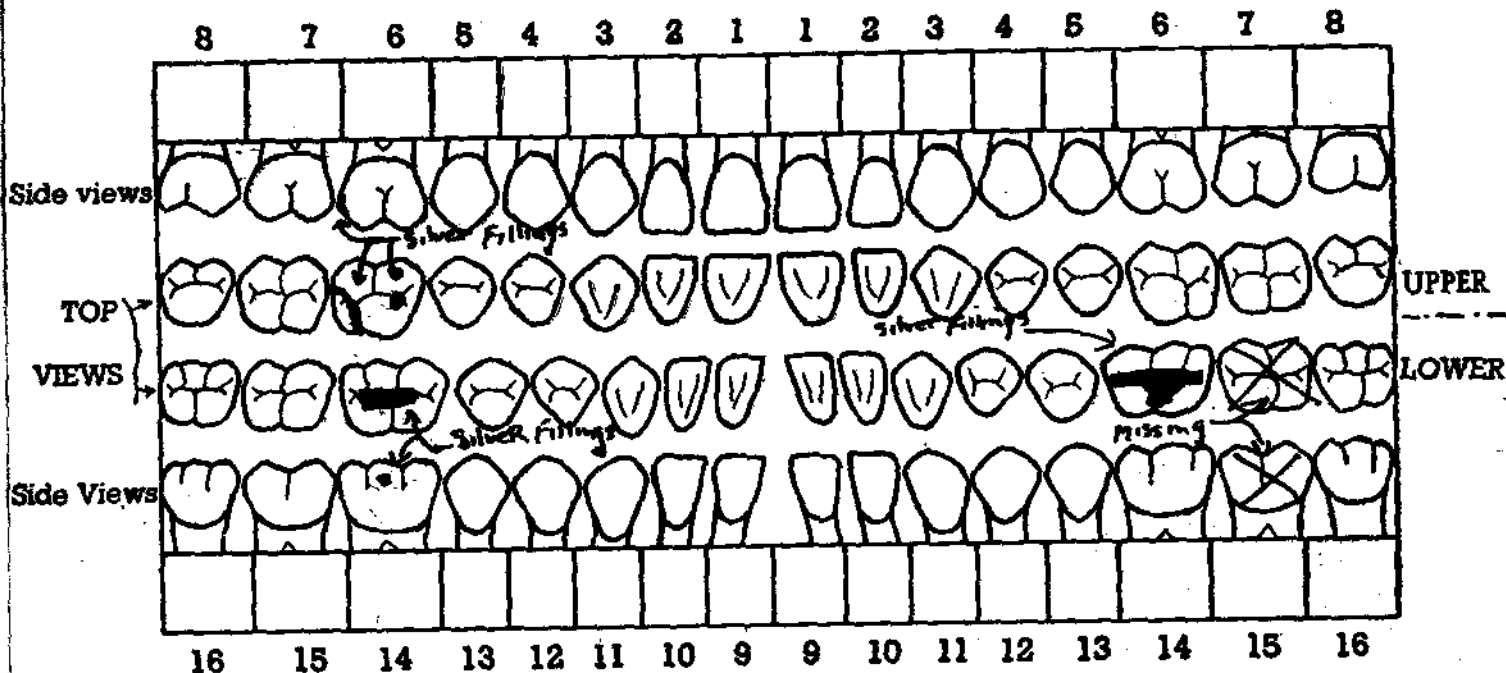
P.O.C. Skull

Cause of Death

(R-551769) Sht. U-3 1/100,000

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.

See later chart.

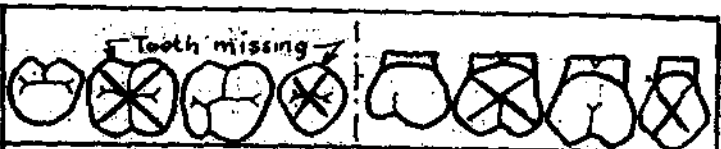
James W. Jones

Signature of Officer or other person who prepared Tooth chart

JAMES W. JONES, S/Sgt., 36066532, 48th QM GR Co.

Verified by G. R. S. 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 :



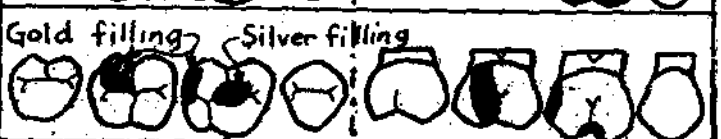
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



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

CHECK LIST FOR DISINTERMENTS

(To accompany Report of Reburial)

Only PART I should be completed, if identification tags are available.
Both PART I & PART II should be completely filled out if identification tags are not available.
 If information is unavailable, so indicate.

PART I
 (Positive Identification)

1. UNKNOWN AMERICAN X-202
 (Full name of deceased) (Rank) (ASN) (Organization)
 2. State if identification tags were attached to remains, how many, and where attached No identification tags were found on body.
 3. Give exact location from which disinterred, furnishing coordinates and map series used (R551769) Sheet U-3, Mannheim, 1/100,000
- NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION IN WITH PERMANENT LANDMARKS.
4. Full name of cemetery (if buried in an organized cemetery) Isolated burial.
 5. Approximate or established date of death (state which & give basis for date selected) Est. 20 March 1945 Information obtained by Major Ogden, of the British Army, from German civilians.
 6. Approximate or established date of burial (give basis for date established) 24th or 25th March 1945 Information obtained by Major Ogden.
 7. Manner in which grave was marked and all information contained on the marker With cross with inscription Zwei Amerikanich.
 8. List personal effects found in possession of civilian or unauthorized military personnel, furnishing name and address of individuals concerned None.
 9. Names and addresses of all persons questioned concerning death or burial and information each furnished (contact local Mayor, priest, cemetery caretaker, those responsible for burial and any other possessing important information) Major Ogden, of the British Army, 30 Karlsruhe, Hockenheim, Germany

PART II
 (Doubtful or Undetermined Identification)

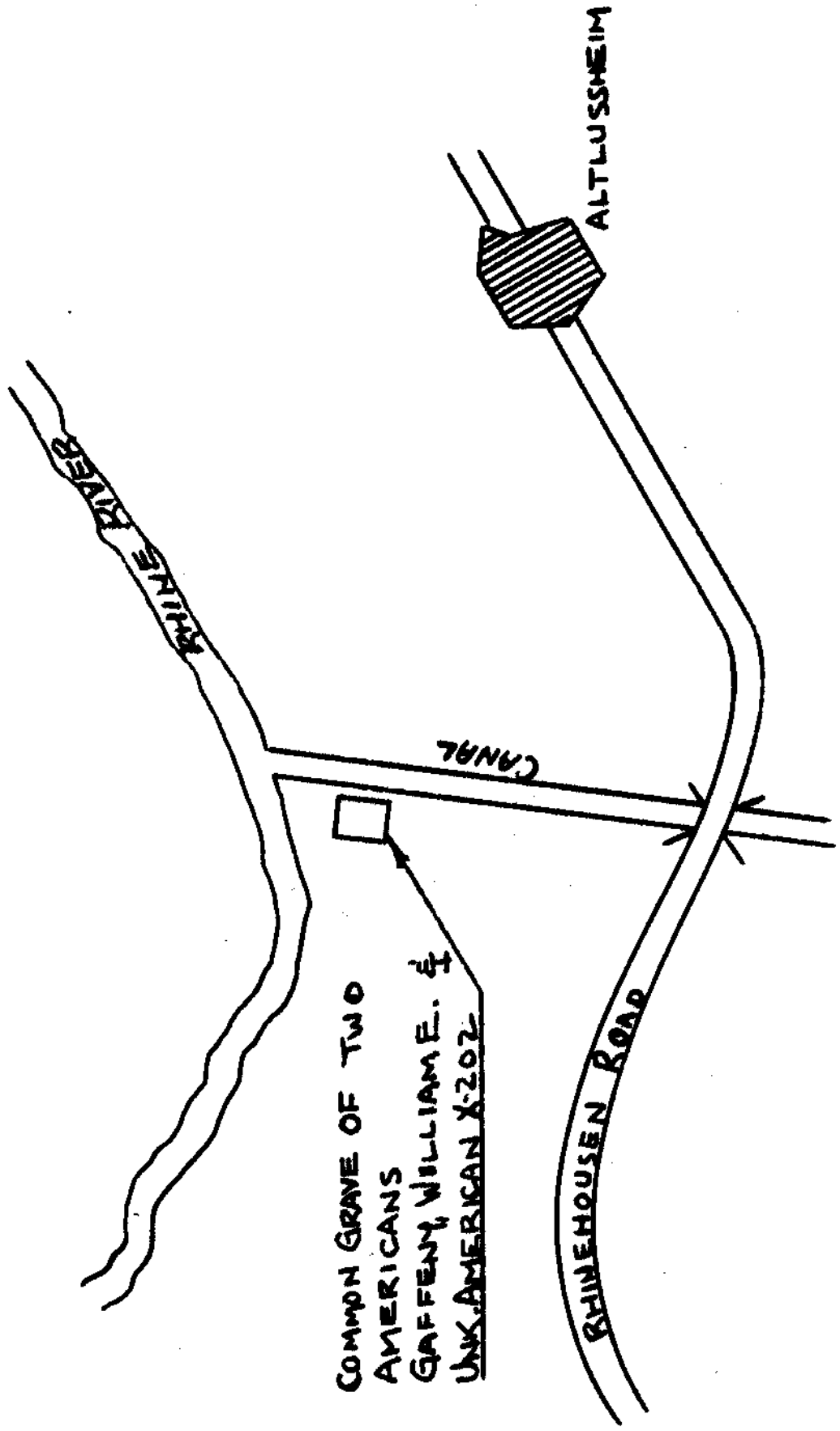
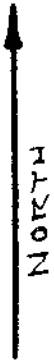
10. Fill in any information available regarding name, rank, ASN, or organization (Check cemetery records and office) None.
11. 5' 10" 170 lbs. Black Unknown
 (Est Height) (Est Weight) (Color of Hair) (Color of Eyes)
12. Give description of facial features and body characteristics if possible, including the presence of scars, moles, circumcision, tattoos, length of hair, presence of mustache or beard, etc. Body too badly decomposed to obtain the above information
length of hair about 1 1/2 inches.

13. Give as detailed description as possible of condition and amount of remains Body intact, in advanced state of decomposition.
14. Give probable cause of death, type & location of wounds (is there evidence that body was burned) FCC of skull, no evidence
15. Give minute description of all effects, clothing & shoes, including clothes markings & sizes, as well as shoe size. List each item of clothing, with a description of any unusual cuts, design markings, pockets, colors, patches, etc. Also list, with detailed descriptions, all effects without intrinsic value, such as gum, food, soap, papers, letters, tobacco, etc., giving brands when applicable: O.D. Trousers size 32x30L (By measurement) O.D. Shirt size 15x32: wool O.D. undershirt: Wool O.D. Drawers, size 28: Wool knit O.D. sweater: O.D. socks, No shoes, Foot length 10"
16. Give description of any vehicle found in the area that could be connected with the death of the deceased
 (Type) None. (WD Serial No) None. (Organization) (Serial No. & Type of each gun) None.
17. Give exact location of remains in vehicle before removal No vehicle
18. If buried in a coffin, give description and markings Body not buried in coffin.
19. List names of all other deceased persons buried in the vicinity. Also give available information concerning the cause & place of death of each that may assist in identification of those remains Body was buried in same grave alongside of William E. Gaffney 42120197: Body was taken from river near the place of burial by German soldiers.
20. Other pertinent information which would aid in establishing identity None.

Alvin C. Arthur, Sgt. 37702688 3049th GM GR Co.
 (Individual in Charge of Disinterment) (Rank) (ASN) (Organization)

2 June 1950
 (Date)

GRID CO-ORD. (R 551769) SH. U-3
MANNHEIM 1:109,000



IDENTIFICATION CHECK LIST

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

DD # 228, dtd 28 Feb 47

Unknown X 870
Cemetery St. Avold, Franco
Plot 000 Row 6 Grave 70

Date reprocessed:

1. ~~XXXXXXXXXX~~ 12 Dec 47
(Hour) (Date)

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

(Sheet, scale and serials used)

3. Remains ~~XXXXXXXXXX~~ disinterred here and reprocessed by Mobile Team # 1, 1st 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>Remnants of wool OD</u>		
Jacket, HBT	<u>NONE</u>		
* Shirt, Wool OD	<u>Remnants of</u>		
Undershirt, Wool	<u>NONE</u>		
Undershirt, Cotton	<u>NONE</u>		
Trousers, HBT	<u>NONE</u>		
* Trousers, Wool OD	<u>Remnants of</u>		

Belt, web NONE

Drawers, wool Remnants of

Drawers, cotton NONE

Leggings, wool NONE

Socks, cotton NONE

* Shoes NONE (type)

Overshoes NONE

Web Equipment NONE (type)

(Other item) Remnants of rifle belt

(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? UTD

6. Description of Remains: Est

R humerus	34.7	R femur	47.6
R radius	25.9	R tibia	39.9
R ulna	27.4	R fibula	39.3

Age UTD Height 5' 10" 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) (Hat band)

Neck **UTD** Larynx **UTD**
 (Size, length, short, normal, wrinkled) (Prominent, normal)

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

Hands **UTD**

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

.....
 (Unusual characteristics of fingernails)

Chest **UTD**
 (Size of nipples, color, quantity 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 too decomposed

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

9. Remarks Remains received in skeletal form, wrapped in remnants of rubberous cover, not in UK box, clothing found in debris, no GRS tags, fluoroscopic examination negative. Est weight of remains 15 lbs. No markings found on clothing.

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

OPERATION'S OFFICER
(Organization)

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

RIGHT

LEFT

Humerus 34.7 cm

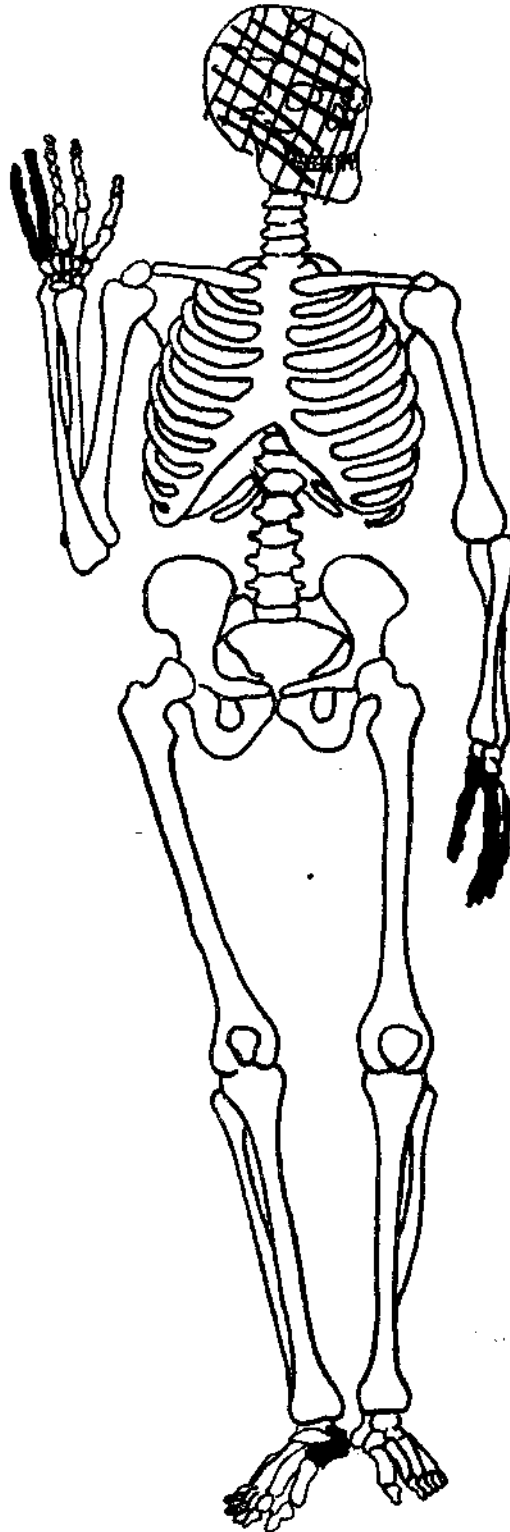
Radius 25.9 cm

Ulna 27.4 cm

Femur 47.6 cm

Tibia 39.9 cm

Fibula 39.3 cm



Est height 5' 10"

TOOTH CHART

12 Dec 47
 Date

Unk I- 870
 Last Name

First

Initial

Unk
 Rank

Unk
 Serial No.

Unk
 Unit

Unk
 Organization

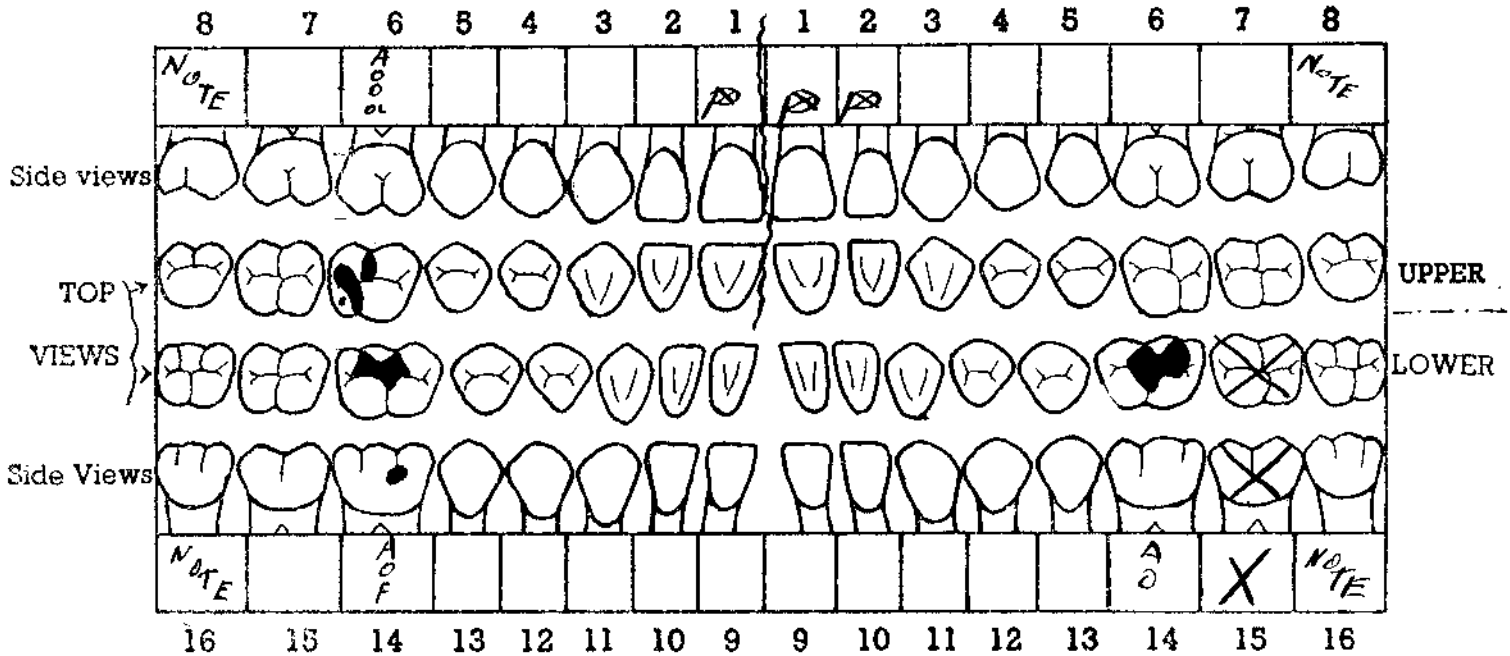
Place of Death

Date of Death

Cause of Death

Right

Left



SEE REMARKS






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
 2/12 INF IS

WOODROW W. WOLF
 CAPT QMC OPER OFF

/s/ Ivor J. Fosmo
 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

Posthumously missing.

Spaces: L-14-16, 6mm R-2-3, 1mm L-3-4, 1mm

R-16-L-16-R-8-and L-8 unerupted before death.

R-9 has a facial version.

L-12 and 13 have rotated 1/16 of a turn mesially.

L-4 has rotated 1/16 of a turn distally.

Color: dull ivory.

Size: average.

Alignment: good.

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

0 13 1945

Unknown American **X 870** Date
 Last Name **Unknown** Unk. Rank Unk. Serial No.
 (R551769) Sh. U. # 1/100,000 Unk. Organization
 Vic. Altlusheim, Germ. Est. 20 March FCC Skull
 Place of Death Date of Death Cause of Death
 0830 10 00 05 US Mil. Cem. Bensheim St. Auld France Q260584
 Time and Date of Burial Name of Cemetery Name or Coordinates of Location
 70 6 000 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 No means of identification found on body

How were remains identified? **(OVER)**

QMC Form #1, GRS.

What means of identification were buried with the body?

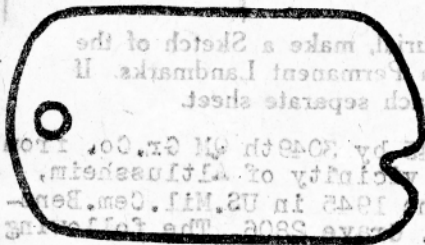
Previously buried in Bensheim Cemetery

Plot 2 Row 30 Grave 2806

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

Who is buried on:
 Deceased's Right: **Gaffney** **42120197** **Unk.** **Co. B. 143 Inf.** **69**
 Name Serial No. Rank Organization Grave No.
 Deceased's Left: **Hall** **XXXXXXX** **Cpl. 530 HM. Ord. Co. Tank** **71**
 Name Serial No. Rank Organization Grave No.
33529439

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 Address: **Unknown**

Religion: **Unknown**

List only Personal Effects Found on Body and disposition of same: **None**

Signature of Officer or other person reporting burial

W. D. DANIEL
 Verified by G. R. S. Officer

1	0	1	0	1	0	1	0	1	0
2	0	1	0	1	0	1	0	1	0
3	0	1	0	1	0	1	0	1	0
4	0	1	0	1	0	1	0	1	0
5	0	1	0	1	0	1	0	1	0
6	0	1	0	1	0	1	0	1	0
7	0	1	0	1	0	1	0	1	0
8	0	1	0	1	0	1	0	1	0
9	0	1	0	1	0	1	0	1	0
10	0	1	0	1	0	1	0	1	0

REPORTING OFFICER
WASKELL B. PUGH
 1ST. LT. OMC.,
 0-399930

REPORT OF BURIAL

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:

Est. Height: 5'10" Laundry Marks: None
 Est. Weight: 170 lbs. Number of Rifle: Unk.
 Color of Eyes: Unk. Wear Glasses? Unk.
 Color of Hair: Black Is Tooth Chart Attached? Yes
 Race: White

(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.

~~Tooth chart and check list for disinterments attached hereto.~~

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

Tooth chart and check list for disinterments attached hereto.

Opl. 330 H. Ord. Co. Tank

HALI XXXXXXX
 33333333

Left Hand

Fingers too badly decomposed for prints.

Thumb

Right Hand

Fingers too badly decomposed for prints.

Thumb

TOOTH CHART

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

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

Body disinterred 1 June 1945 by 3049th QM Gr. Co. from (R551769) Sh. U-3, 1,100,000 vicinity of Altusheim, Germ. and reinterred 2 June 1945 in US Mil. Cem. Bensheim, Germ., Plot T, Row 30, Grave 2806. The following information was obtained from Major Odgen of the British Army, at 30 Karlsruhe-Hockenheim, Germany; as told to him by German civilians. This body was recovered by German soldiers from the Rhine river. Body believed to have been in the river two or three days before it was recovered and buried by the German soldiers on the 24th or 25th March 1945 in a common grave with another American soldier, "William E. Gaffney, Pvt., 42120197, Co. B, 143 Infantry also recovered from the Rhine River by German soldiers. Original burial was marked with a crude cross with inscription, "Zwei Amerikaner". Sketch of original burial attached hereto.

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:

Est. Height: 5'10" Laundry Marks: None
 Est. Weight: 170 lbs. Number of Rifle: UNK.
 Color of Eyes: Unk. Wear Glasses? Unk.
 Color of Hair: Black Tooth Chart Attached? Yes
 Race: White
 (If possible, have medical personnel take a tooth chart, if no medical personnel present, fill in a tooth chart 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.:

Tooth chart and check list for disinterments attached hereto.

TOOTH CHART

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.

Body disinterred 1 June 1945 by 3049th AM GRC from (R551769) Sh.U-3, 1/100,000 vicinity of Altlussheim, Germany and reinterred 2 June 1945 in U.S. Mil. Cem. Bensheim, Germany, Plot T, Row 30, Grave 2806. The following information was obtained from Major Odgen, of the British Army, at 30 Karlsruhe-Hockenheim, Germany, as told to him by German civilians. This body was recovered by German soldiers from the Rhine river. Body believed to have been in the river two or three days before it was recovered and buried by the German soldiers on the 24th or 25th March 1945, in a common grave with another American soldier, "William E. Gaffney, Pvt., 42120197, Co. B, 143 Infantry also recovered from the Rhine River by German soldiers.

Original burial was marked with a crude cross with inscription, "Zwie Amerikanich"
 Sketch of original burial attached hereto.

Left Hand

Fingers too badly decomposed for prints,

1

2

3

4

Thumb

Right Hand

Fingers too badly decomposed for prints.

1

2

3

4

Thumb

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