

Rawls

1	USMC HENRI CHAPEL	B ED ON
	PLOT: B ROW: 6, GRAVE: 50	RIGHT SAM-BUFFORD
DATE OF BURIAL 28 Jun/48	DISINTERMENT DIRECTIVE	34087801
VERIFIED BY <i>J. Hoffman</i>	LEFT	ROBERT A. WEIGL
		42126383

SECTION A -	GRS OFFICER	DIRECTIVE NUMBER	DATE
NAME AND BURIAL LOCATION OF DECEASED		1240 00000	10 09 47 DAY MONTH YEAR

NAME	SERIAL NUMBER	RANK	ARM	DATE OF DEATH
<i>2932 number Belgrave</i>	UNKNOWN X-000095		8	
CEMETERY	HENRI CHAPELLE EUPEN			DISPOSITION OF REMAINS
				1201 80 CODE DIST PT
PLOT	ROW	GRAVE	COUNTRY	CAUSE OF DEATH
W	10	198	BELGIUM	6

SECTION B - CONSIGNEE AND NEXT OF KIN	
NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
HENRI CHAPELLE, BELGIUM (BY ADMINISTRATIVE ORDER)	

SECTION C - DISINTERMENT AND IDENTIFICATION					
NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED	
UNKNOWN	X-000095	UNK	UNK	30 OCT 47	
IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY		
<input checked="" type="checkbox"/> REMAINS GRS		UNK	ELIJAH H FIELDS IDENT TECH		
<input checked="" type="checkbox"/> MARKER GRS			FOS PROV		

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT	
NATURE OF BURIAL	CONDITION OF REMAINS
MATTRESS COVER	RIGHT LOWER LEG AND BOTH FEET MISSING. COMPLETE DISARTICULATION AND MULTIPLE FRACTURES.

OTHER MEANS OF IDENTIFICATION

GRS TAG X-95 FOUND PINED TO MATTRESS COVER.

MINOR DISCREPANCIES: Arm of service changed - Auth. 355 (Hq. AGRC)

REMAINS PREPARED AND PLACED IN CASKET

DATE 6 NOV 47 BY ELIJAH H FIELDS IDENT TECH

CASKET SEALED BY

ELIJAH H FIELDS IDENT TECH

EMBALMER (Signature)
ELIJAH H FIELDS IDENT TECH
FOS PROV *Elijah H Fields*

CASKET BOXED AND MARKED

6 NOV 47 CARL J BLEVINS T/SGT
DATE BY CLERK RECORDER

SHIPPING ADDRESS VERIFIED BY
ELIJAH H FIELDS IDENT TECH

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

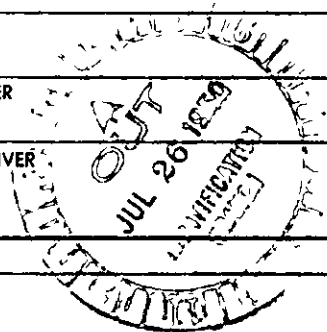
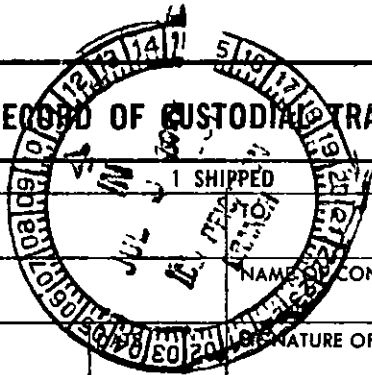
Raymond G Johnson
RAYMOND G JOHNSON 1/LT INF
SIGNATURE OF GRS INSPECTOR FILE

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

RECORDS ANNOTATED
DATE 9-17-48
NAME *Dutch*

no letter necessary

RECORD OF CUSTODIAL TRANSFER



1 SHIPPED			
FROM	TO		
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 () PUBLICLY OWNED	NAME OF CONVOYER		
SIGNATURE OF SHIPPER PUBLIC OR PRIVATE	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

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

Aug 1948

20 August 1948
Date

SUBJECT: Unidentifiable Remains.

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

1. The records pertaining to Unknown X- 95, Plot W,
Row 10, Grave 198, USMC Henri Chapelle 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. 2221, dated 5 March 1947. No
further information is available.

FOR THE COMMANDING GENERAL:

George L. Freeman

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

Received LT# 2995-20 Aug 48 OQMG
Not identifiable from
information presently
available

G. James
27 Sept 48

Incl #9

AGRC
FORM NO 11
Revised 5 January 1946

CHECK LIST OF UNKNOWN

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

Unknown X **- 95**
Cemetery **Henri Chapelle,**
Plot **W** Row **10** Grave **198**

1 ~~Interment~~ **Reprocessed 7 January 1947**
(Hour) (date)

2 Place of death (Name of closest town) (coordinates and letter Prefex, maps)

Sheet, scale and serials used

3 Remains ~~recovered~~ disinterred ~~by~~ **and reprocessed by Subordinate Identification Point**
(name and organization) **Margraten, Holland**

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		Color	wear,	Indicate unusual markings		
	Markings	Sizes			tear,	repairs,	etc
*Headgear	(type)						
Raincoat							
Overcoat							
Jacket, Field			Jacket, Combat				
Mackinaw							
Sweater							
Jacket, HBT							
*Shirt, Wool, OD							
Undershirt, Wool							
Undershirt, Cotton							
Trousers HBT							
*Trousers, Wool OD							

Belt, Web

Drawers, Wool

Drawers, Cotton

Leggings, Wool

(Note unusual lacing)

Socks, Cotton

*Shoes (type)

none

Overshoes

Web Equipment (type)

(Other item)

(Other item)

*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

utd

8 Description of Remains

Age **utd** Height **utd** Weight **utd** Description of wounds **utd**

Bandages or dressings **utd** Scars **utd**
(Length, width location)

Tattoos **utd**
(Number, location — illustrate on sep page)

Outstanding moles, warts or birthmarks **utd**
(yes-no description, location)

Sunburn or tan, other than hands & face **utd**

Complexion **utd**
(light, med dark clear, pimples pocks freckles)

Build **utd**
(large, fat, thin, muscular)

Hair **utd**
(color length quantity curly wavy straight whorls or definite parting)

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

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

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 **head crushed** (white size unevenness, spacing noticeable crowns fillings extract)

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

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

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

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

utd (extent and quantity of hair)

Hands **utd**

Fingers **utd** (sort 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) **Waist** **utd** (size of navel, appendectomy amount)

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

Hernioplasty **utd** (yes-no, location)

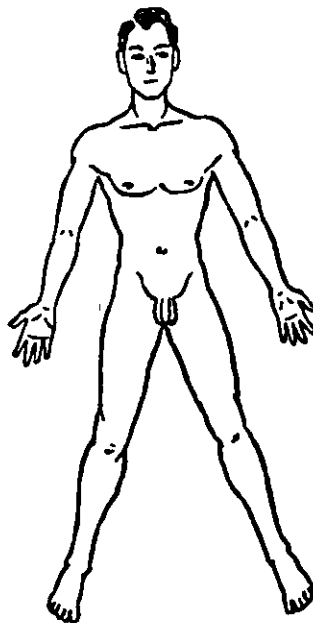
Legs **utd** (inseam, muscular knock-kneed bowed, normal, quantity, color & extent of hair)

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

see attached chart



10 Have fingerprints been placed on Report of Internet **no**
Yes no

If not, explain **hands missing**

11 Has tooth chart been prepared **no** If not, explain
Yes no

head crushed, teeth missing

12 Remarks **Remains recovered in last stage of decomposition and badly fractured. Estimated weight 7 lbs. Fluoroscopic Examination Negative. No clothing found on body. All large bones fractured. Burial report found in 50 cal shell. Nothing found to warrant Chemical Laboratory Examination. Remains as Unknown.**

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

Ellsworth T. Mac Intyre
Ellsworth T. Mac Intyre
Officers Name

Captain QMC

Rank

Service

Central Identification Point

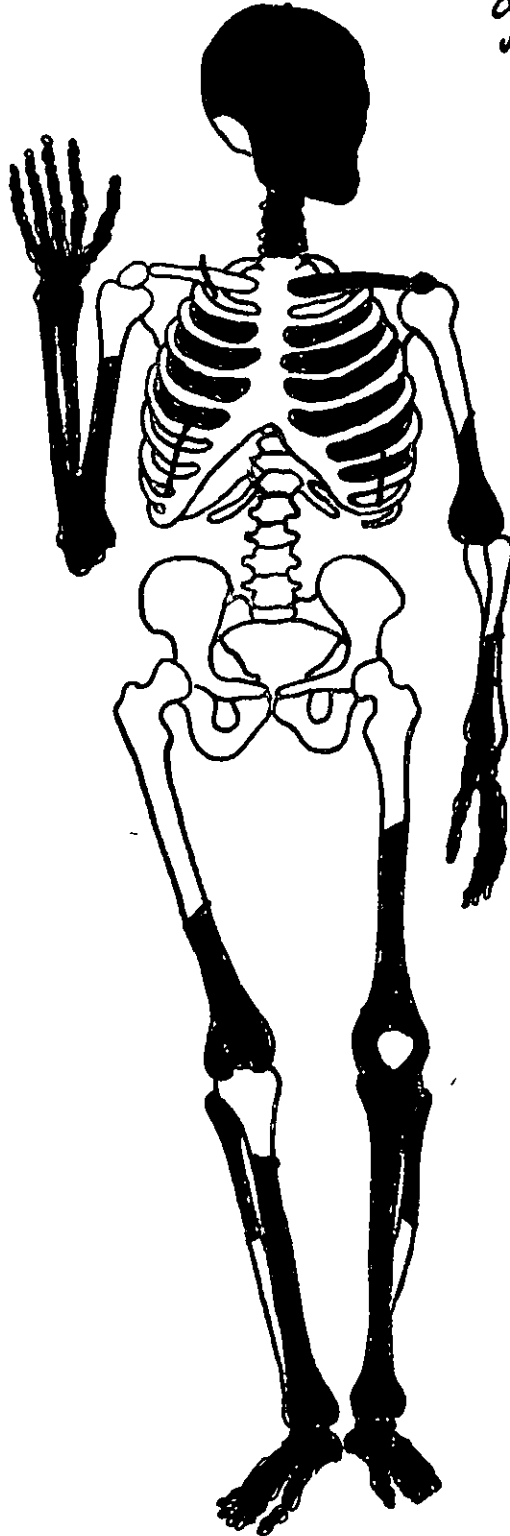
Organization

X - 95
Henri Chapelle, Holland
Plot W Row 10 Grave 198

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

96-95



REBURIAL
REPORT OF BURIAL 140
FM 10-630 AND AR 30-1815

2411
8 November 44

Date

Unidentified X-95

S/Sgt

Last Name	First	Initial	Rank	Serial No
Germany		20XX Oct. 1944 est.		KIA
Place of Death		Date of Death		Cause of Death
1500 8 Nov. 44		Henri Chapelle #1		721-348
Time and Date of Burial		Name of Cemetery		Name or Coordinates of Location
198 10		W		Temp
Grave Number	Row Number	Plot Number		Type of Marker

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

If No Identification Tags

How were remains identified?

Body decomposed. Impossible to fingerprint.
Place of disint. unknown

What means of identification were buried with the body?

Embossed tag.

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

Who is buried on:

Deceased's Right:

Duval, Conrad J. 31064150

199

Name

Serial No.

Rank

Organization

Grave No.

Deceased's Left

Unidentified X-94

197

Name

Serial No.

Rank

Organization

Grave No.

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



If print of identification tag is not affixed fill in below

Emergency Addressee

Name

Address

Religion

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

None.

RESTRICTED

Signature of Officer or other person reporting burial

Nicholas J. Slcane
NICHOLAS J. SLCANE

U. S. G. M. C.

Verified by G. R. S. Officer

Graves Registration Officer

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

2

1

Thumb

Right Hand

2

1

Thumb

TOOTH CHART

		Deceased's Left														
Upper	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
		Deceased's Right														
Lower	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

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 no space needed attach separate sheet. Indicate North