

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 Unknown, Newville, X-5208

SUBJECT

157 JEW

1

USMC HENRI CHAPPELLE
PLOT: G ROW: 10: 72
DATE OF BURIAL: 2 AUG 50
VERIFIED BY GRS OFFICER
R.W. GANSEL, 1st LT QMC

DISINTERMENT DIRECTIVE

43 with Neville X 52 08

SECTION A - NAME AND BURIAL LOCATION OF DECEASED
DIRECTIVE NUMBER: 1260 01495
DATE: 15 08 48
DAY MONTH YEAR

NAME: UNKNOWN
SERIAL NUMBER: X-005208
GRADE: UNK
ARM: 0
RACE: 0
RELIGION: 6

CEMETERY: NEUVILLE BELGIUM
PLOT: U ROW: 8 GRAVE: 184
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
HENRI CHAPPELLE (BELGIUM)

NAME AND ADDRESS OF NEXT OF KIN
~~REG. DIV. 12 JUNE 50~~
These remains are unidentifiable and are to be permanently interred (Reg. Div. 12 June 50)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME: UNKNOWN SERIAL NUMBER: X-005208 GRADE: UNK DATE OF DEATH: DATE DISTINTERRED: 23. NOV 48

IDENTIFICATION TAG ON: REMAINS MARKER ORGANIZATION: EMB GRS UNKNOWN RELIGION: UNK IDENTIFICATION VERIFIED BY: ROBERT W GANSEL, 1/LT QMC

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: MATTRESS COVER CONDITION OF REMAINS: SKELETAL STAGE, ALL MAJOR BONES FRACTURED AND/OR MISSING EXCEPT SKULL, R/HUMERUS, L/SCAPULA.

OTHER MEANS OF IDENTIFICATION: REPORT OF BURIAL

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)
ADDITIONAL PORTION OF REMAINS REMOVED & STORED AS IN PER OPERATIONAL INSTRUCTIONS # 55 PAR 5 ASSIGNED C.I.L. # 4181. CASE CONSISTS OF FRACTURED R/RADIUS

REMAINS PREPARED AND PLACED IN ~~LOCK~~ TRANSFER BOX: 3. FEB 49 BY CALVIN C COWDEN, LIC EMBALMER

CASKET SEALED BY: HENRY F PERGANDE EMBALMER (Signature): HENRY F PERGANDE, EMBALMER

CASKET BOXED AND MARKED: 4. FEB 49 BY DENNIS E WEBB JR PVT, CLERK RECORDER SHIPPING ADDRESS VERIFIED BY: ROGER E LEWIS, CAPT CAV TAGS, MARKINGS, PLATES VERIFIED BY: ROGER E LEWIS, CAPT CAV

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct. /EXCEPT CASKETING
ROBERT W GANSEL, 1/LT QMC
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS: CONSIGNEE CORRECTED (REG. DIV.)
I CERTIFY that the typed names appearing above are the same as the original signatures on the No. 4 copy of F - 1194 concerned
RECORDS ANNOTATED DATE: 1-24-50 NAME: [Signature] BR. MEM. DIV.
Raymond G Johnson 1st Lt INF

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		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

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

7. SHIPPED

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

99
RRE Form #43

20 Sep 48

293 Unk-Neuville X-5208

Attached hereto correspondence and/or other identifying media of possible archival value, pertaining to:

UNK X - 5208

UNIDENTIFIABLE

(Temp.: NEUVILLE)

(Last Name)

(First Name)

(Initial)

(Rank)

(ASN)

Subject remains have been permanently interred overseas in the United States Military Cemetery USMC HENRI-CHAPELLE, Belgium

Incl #

STATEN FILE

REPORT OF INVESTIGATION

AREA SEARCH

AGRC Form 10 (Revised)

1 January 1946.

18 February 1947

~~17 January 1947~~

Date

NAME Unknown X-5208 RANK Unknown ASN UnknownORGANIZATION Unknown A.A.F.MEANS OF IDENTIFICATION None

(All statements above this line will be completed, upon final processing, by the clerical staff at the unit processing point.)

SECTION A - GENERAL (To be completed by investigators in all cases)

1. Was positive identity acquired for the deceased through the surface investigation? No
If so, state the following information:
 - a. NAME _____ RANK _____ ASN _____
 - b. ORGANIZATION _____
2. Was partial identification established? Yes If so, state the facts as to whom you believe the deceased to be: Common grave of :
 - a. NAME X-89 and X-90 RANK _____ ASN _____
 - b. ORGANIZATION Uncertain
3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY Right side :
X - 91 ; Left side : X - 88

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

- a. Date of above burials 3 August 1943 Common Graves? No

(65)

5. Name and Type of Cemetery Mil. and Civ. Cemetery Bolovan
(Military or Civilian)
6. Map Coordinates of the Cemetery XC2649 Bucarest 1/250,000
- a. Town Ploesti Country Roumania
7. Give exact location in cemetery of the remains.
- a. Section Hero Row 2 Grave See sketch
- b. Is Sketch attached? Yes
8. If remains are not located in a cemetery, give exact location.
- a. Town _____ Coordinates _____
- b. Is sketch attached? _____
- c. Is area mined? _____
9. How is the grave marked? Concrete cross OSTASI AMERICANI
NECUHOSUTI
10. If grave is marked with cross, give exact markings thereon _____
- a. From what source was this information obtained? Roumanian records
(Identification tags, personal effects)
- b. By Whom _____
11. Where are the cemetery records Ploesti
(Town Hall, cemetery, burgermeister)
- a. What information was contained thereon? Date of death and burial
- b. Where was the information obtained? from bodies
- c. By Whom? Roumanians
12. What is the date of death? 1 August 1943
- a. Give basis Roum. records
13. What is the cause of death? Plane crash
- b. Give basis Roum. records
14. What is the date of burial? 3 August 1943
- a. Give basis Roum. records

(46)

15. Where was the place of death? near Ploesti Coords xC2649 Bucarest
1/250,000
 Give basis Roum. information
16. Where were the remains found? near crash Coords -
 a. By Whom? Roumanians
 b. Is sketch attached? No
17. Was a casket used? Yes Who furnished the casket? Roumanians
 Type of casket Wooden How marked? Not marked
18. Who made the burial Roumanians
 (Civilian, American Mil, or German Mil)
 a. What are the names and addresses? Local Roum. authorities

 b. Are certificates and statements attached? Yes

SECTION B - AIR CORPS DECEASED (To be Completed only if Deceased is believed to be a member of the AAF).

19. Were remains found in the plane wreckage? Unkn
 a. Give location in plane from which the bodies were removed _____

 (Tail gunner, pilot, radio, turret, etc., or front, side, of plane)
 b. Near wreckage? _____
20. Scene of crash must be investigated. Give complete results of Investigation (if removed, state when and by whom).
 a. Type of Plane Unkn
 b. Markings and/or name on plane _____
 c. Give numbers on motors, machine guns, instruments, radios or other equipment: _____

21. How did crash occur? Unkn Anti-aircraft _____
 Enemy Planes? _____ Collision? _____

(67)

22. Did plane explode in the air? Unkn On ground? _____
23. Did plane burn in the air? _____ On ground? _____
24. What was the direction of the flight? Unkn _____
25. What was the civilian opinion regarding destination of plane? _____
Unkn
26. Had bombs been released prior to the crash? Unkn _____
27. Does specific time and date of crash correspond with date of death of above named deceased? _____
Yes
28. Number of planes in formation prior to crash _____ Unkn
29. State precise time and date of plane crash _____ Day, 1 August 1943
(Night? Day)
30. Were parachutists seen? Unkn How many? _____ Escaped? _____
Prisoners? _____

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

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

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

34. Did tank explode? _____ Burn? _____

NOT AVAILABLE

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35. Number of tanks in immediate vicinity at time of disablement _____
36. Does specific time and date of disablement correspond with date of death of above named deceased? _____
37. Precise time and date of destruction of tank _____
(Night? Day?)
38. Did any of the crew members escape? _____ Prisoners? _____

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

39. Did death occur from any other means? (i. e., truck, jeep, mines, drowning, or small arms fire) _____
It so, give complete and thorough results of the interrogation.
- a. Are all certificates and statements of people who possessed knowledge of the case attached? _____
40. State the specific clues and evidence that were obtained in securing the name and facts regarding the above listed deceased _____

SECTION E - GENERAL (To be completed by investigation in all cases)

41. Were personal effects recovered by the investigating team _____ No _____
If not, state reason _____
- a. Were identification tags found at the time of death? _____ Unkn _____
Where? _____ By Whom? _____
Present disposition _____
- If deceased is not identified, personal effects will not be forwarded to PE Depot, but will remain with this form until final identification is made, or investigation is abandoned.
- b. Were personal effects found at the time of death? _____ Unkn _____
Where? _____ By Whom? _____
Present disposition _____

(69)

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

No

d. Did Cemetery register or cross indicate the immunization shot? _____ No

42. Was Deceased given first aid? _____ No If so, where? _____

By whom? _____ Are statements from the medical people attached? _____

43. Was deceased evacuated to a ~~Cemeter~~ civilian hospital? _____ No

WHERE? _____ Names of people concerned _____

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

45. Is it possible on surface investigation to obtain from civilian sources the condition of the remains? _____

No

(Buried? Decapitated? etc)

46. Do facts surrounding death show any evidence that it might be an atrocity case? _____

No

a. If so, give basis for positive assumption _____

b. If so, has higher headquarters been notified? _____

47. Was case previously investigated? _____ No By Whom? _____

When? _____

48. Give full names, addresses, and information obtained from each person interviewed _____

Unkn

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

Yes

(70)

50. Has any information been given concerning isolated burials in the area outside the immediate vicinity?

No

51. Was investigation preceded by advanced publicity? Yes

(If special investigation, give case number)

52. Give Brief Narrative

(Use attached sheets, if necessary)

Signature of Interpreter

Rank ASN

Organization

Charles J. Jorgensen
CHARLES J. JORGENSEN

Signature of Investigator

MAJOR FA 0-284501

Rank ASN

Rum. Det. 347 QM Bn (K)

Organization

(7)

FINDINGS IN GRAVE

§ 4 January 1947

1. Box 37, Row 2, Plot C, Section Hero, contained the following upon disinterment:

- a. One skull with both upper and lower jaws and a number of teeth.
- b. Charred skeleton remains.
- c. Rest of a second crushed skull with parts of lower jaw and some teeth.
- d. Remnants of an electrically heated flying suit.

2. The above findings show these remains to be two American airmen who crashed on August 1st, 1943.

J. Siladie
Civ. Investigator

James S. Siladie

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AIRMAIL

QUEST 314.6 T/L 4869 1st Ind
GRS European
(Hawville) Belgium

Subject: Certificate of Unidentifiability of Remains
Transmittal Letter #4869

Department of the Army, GAG, Washington 25, D. C. 25 May 1950

PO: Commanding Officer, 7837 Graves Registration Detachment,
APO 757, c/o Postmaster, New York, New York

This Office approves the classification of the Unknowns listed in
basic communication as Unidentifiable.

FOR THE QUARTERMASTER GENERAL:

THOMAS E. COX
Capt G3
Memorial Division

Cy furnished: Adm Sec
rar/Rowinski
N. Farmer

293 Under Program - reviewed - 7-12-68

REE
JUN

AIRMAIL

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

GRRE 200.2

2 May 1950

SUBJECT: Identification Check List
Transmittal Letter # 4865

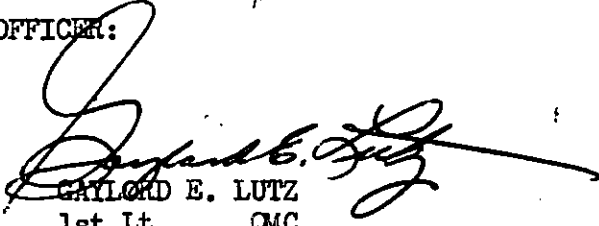
TO: The Quartermaster General
Washington 25, D. C.
ATTENTION: Memorial Division

Forwarded herewith for your files is one (1) copy of identification check list, QMC Form 1044, for the following deceased:

<u>Unknown No.</u>	<u>Cemetery</u>	<u>Plot</u>	<u>Row</u>	<u>Grave</u>
X-5208	Neuville	U	8	184

FOR THE COMMANDING OFFICER:

1 Incl
QMC Form 1044


GAYLORD E. LUTZ
1st Lt, QMC
Registration Division

993 Units Belgium X-5208 (Neuville)





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

Date: 1 May 1950

GRRE 293

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X- 5208, Plot U, Row 8, Grave 184, USMC Neuville-en-Condroz have been reviewed in accordance with par 159, SR 830-110-5, DA, dated 3 March 1949, and it is the opinion of the Board of Review, appointed by par 3, SO No. 31, this headquarters, dated 28 March 1950, that sufficient evidence is not available to establish the identity of the deceased concerned, and it is recommended these remains be classified as unidentifiable.

2. Report of Reprocessing of remains was forwarded to the Office of The Quartermaster General, by Transmittal Letter No. 4865, dated 1 May 1950.

3. Remarks:

See copy of Case History attached.

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

Maj James C. MacFARLAND, O-1576321, MC

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

1st Lt Gaylord E. LUTZ, O-1595665, MC

Leodore Goudreau
CWO Leodore GOUDREAU, E-2113434

Received #4869 3 May 50
Not identifiable from
information presently
available
JPR
24 May 50
OQMG

Incl #2

UNKNOWN NO. X-5208

U.S. MILITARY CEMETERY

Neuville-en-Condros U-8-184
(Location)

UNIDENTIFIABLE

Subject remains were originally disinterred from Bolovan cemetery, Ploesti, Rumania, Section Hero, Row 2, Grave 37.

Processing at CIP revealed a mass burial of two (2) remains which were designated Unknowns X-5208 and X-5209. Bodies were interred in USMC Neuville-en-Condros, Belgium on 17 March 1947.

It is noted that the teeth, charts #1, 2 and 3, which were found common to both remains, were placed with Unknown X-5208.

However, subsequent reprocessing of Unknowns X-5208 and X-5209 by the anthropologist resulted in placing the teeth (chart #1 and 2 only) and a skull with the remains of X-5209. (Unknown X-5209 is tentatively identified as the remains of T/Sgt. Frederick E. FAGAN 33235530)

The additional teeth, chart #3, were replaced with remains of Unknown X-5208. Extra remains segregated from X-5208 were assigned CIL number 4181.

Tooth chart of Unknown X-5208 has been compared with remaining unresolved Air Corps deceased reported killed in the Ploesti area, and no conclusive association could be established.

In view of the fact that reprocessing of Unknown X-5208 revealed no positive identifying media, it is recommended the subject Unknown be classified as Unidentifiable.

A. Swetnick
28 April 1950

Incl #2²

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DISINTERMENT DIRECTIVE

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

1050 01005

DATE

13 00 40
DAY MONTH YEAR

NAME

UNKNOWN - 005000

SERIAL NUMBER

GRADE

ARM

RACE

RELIGION

CEMETERY

NEUVILLE BELGIUM

PLOT

ROW

GRAVE

104

DISPOSITION OF REMAINS

1000 00
CODE DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

NEUVILLE-EN-CONDROZ, BELGIUM

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

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN <p align="center">X-5208</p>	2. DATE OF REPORT <p align="center">15 February 1950.</p>
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3. NAME OF CEMETERY <p align="center">Neuville</p>	4. PLOT <p align="center">U</p>	5. ROW <p align="center">8</p>	6. GRAVE <p align="center">184</p>	7. DATE OF	
	DISINTERMENT <p align="center">/////</p>		REINTERMENT <p align="center">/////</p>		

PHYSICAL DESCRIPTION

8. ESTIMATED AGE Age: <p align="center">25/29</p>	9. ESTIMATED HEIGHT <p align="center">5'5 3/8"</p>	10. COLOR OF HAIR <p align="center">None</p>	11. RACE <p align="center">UTD</p>
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

Mortuary Plate

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 type="checkbox"/> NO	TO WHAT EXTENT?
--	-----------------

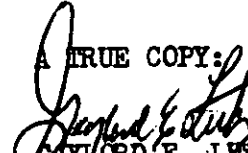

15. WAS BODY MANGLED? <input type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT EXTENT? <p align="center">See skeletal chart.</p>
---	--

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

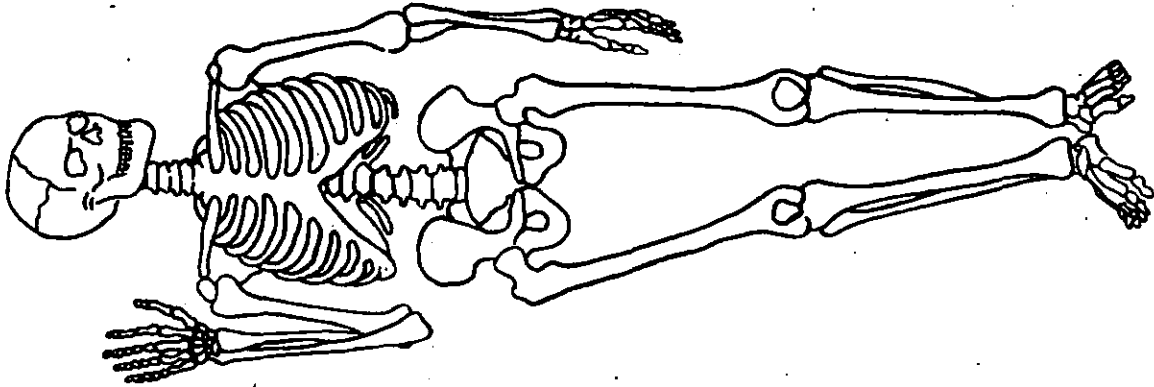
None noted.

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

A TRUE COPY:

 GAYLORD E. LETZ
 1st. Lt. OMC


19. BLACK OUT PARTS OF BODY NOT IDENTIFIED



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 is in skeletal form. Teeth with remains (See tooth chart).

Est. Ht: 5'5 3/8"

Est. Age: 25/29

Reprocessed by

Conrad

Clerk: 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

SKELTAL CHART

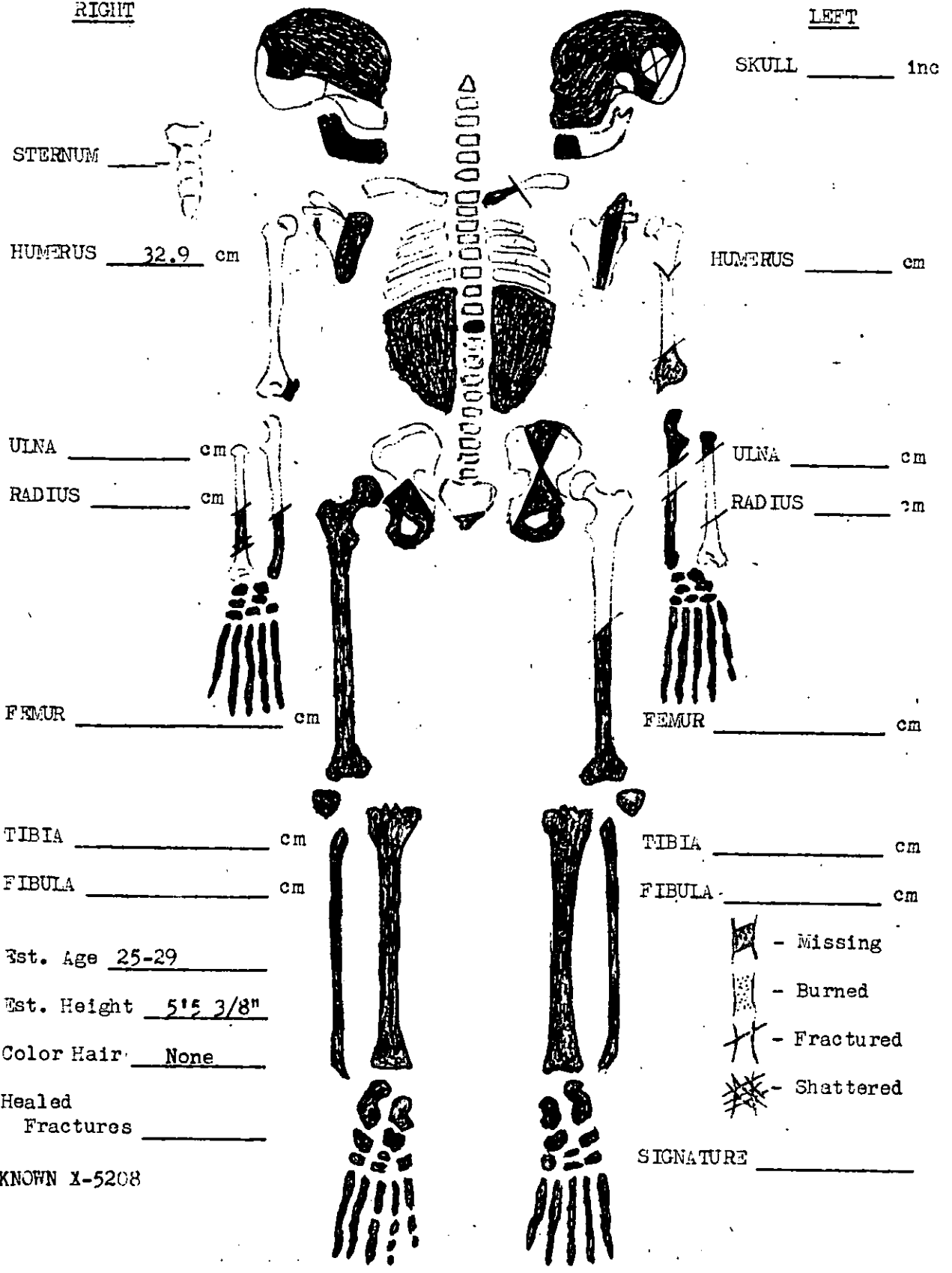
aville U-8-184.

CHART "A-1"

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

RIGHT

LEFT



SKULL _____ inc

STERNUM _____ cm

HUMERUS 32.9 cm

HUMERUS _____ cm

ULNA _____ cm

ULNA _____ cm

RADIUS _____ cm

RADIUS _____ cm

FEMUR _____ cm

FEMUR _____ cm

TIBIA _____ cm

TIBIA _____ cm

FIBULA _____ cm





FIBULA _____ cm

Est. Age 25-29

Est. Height 5' 3/8"

Color Hair None

Healed Fractures _____

-  - Missing
-  - Burned
-  - Fractured
-  - Shattered

SIGNATURE _____

UNKNOWN X-5208

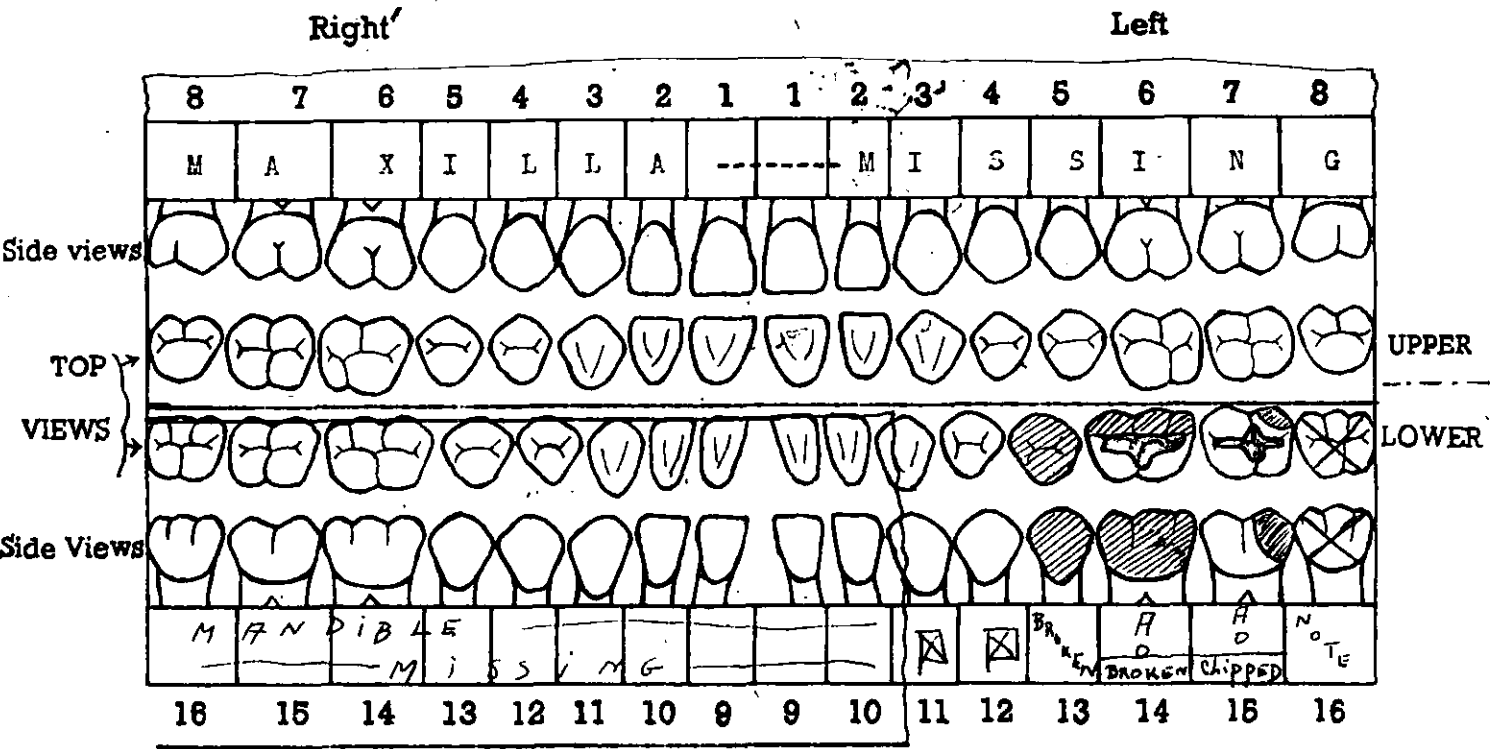
TOOTH CHART

X-5208
Neuville
U - 8 -184

15 February 1950
Date

Last Name	First	Initial	Grade	Serial No.
Unit			Organization	

Place of Death	Date of Death	Cause of Death
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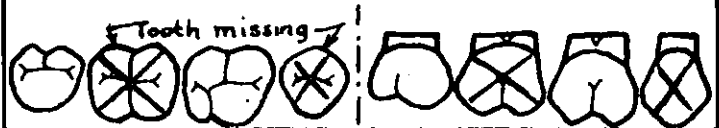
This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), 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 - clear ivory.
Posthumously missing - L11, 12.
L16 unerupted prior to death
and impacted dista-lingually.

S/ W. A. Neep
Signature of Officer or other person who prepared Tooth chart

DAC Gs-7
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 :



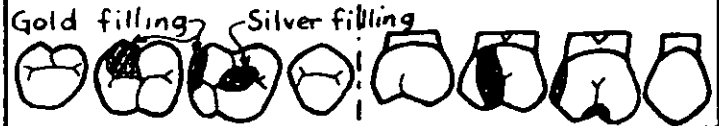
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



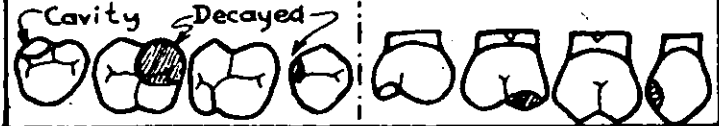
BRIDGE WORK... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



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

C. R. A. E. DIV.
OFFICE OF THE CHIEF QUARTERMASTER
HO. COM. ZONE, ETOUSA

TOOTH CHART

11 Febr. 1947

Unknown X-5208

Date

Unknown X-5209

Unknown

Unknown

Last Name Unknown First Initial Rank Serial No.

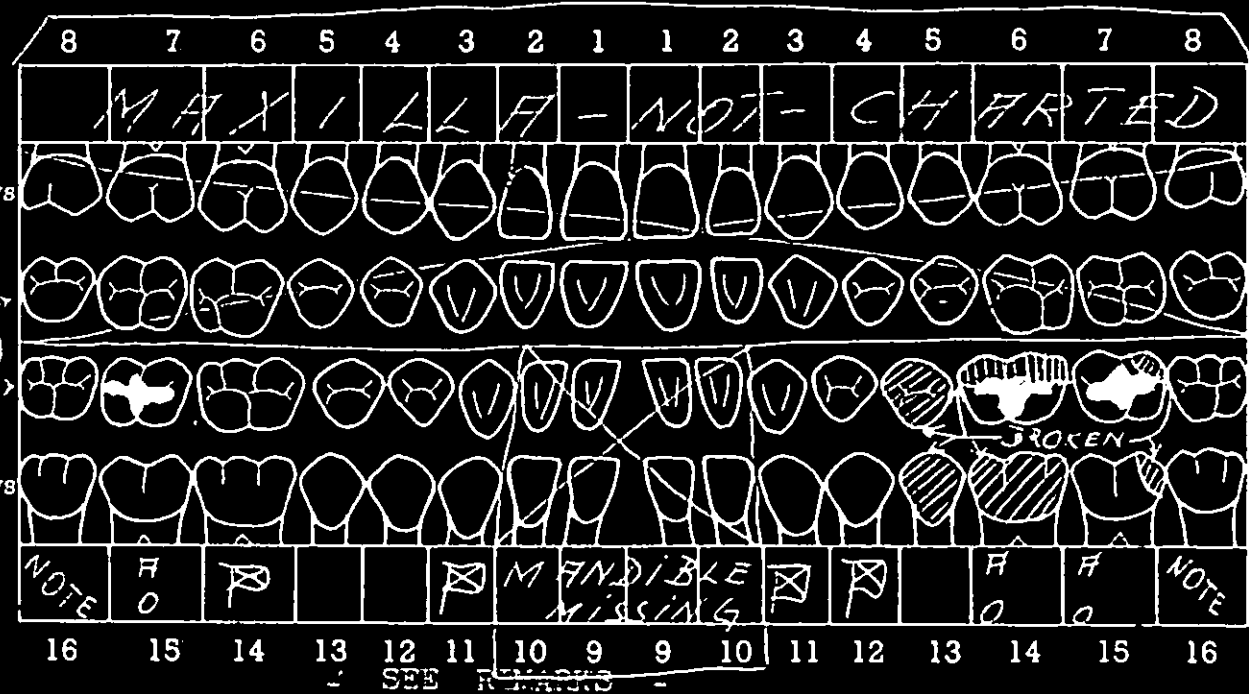
A.A.F.

Unit Near Ploesti, Rumania. Est. 1 August 1943. Organization Plane crash.

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.

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Donald R. Steck A. D.
Signature of Officer or other person who prepared Tooth chart

Ellsworth T. MacIntyre
Verified by G. R. S. Officer

ELLSWORTH T. MACINTYRE
Captain U.S. Army

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



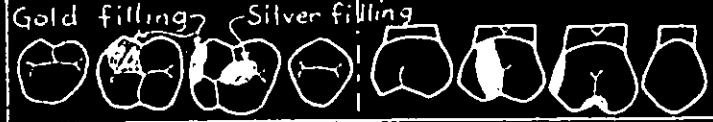
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



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

R-16, L-16: unerupted before death
 Posthumously missing: R-14, R-11
 L-11, L-10

Broken as indicated by shading: L-13, L-14, L-15
 Large teeth in good alignment
 Ivory color; relatively unstained.

Teeth here charted are from a mass burial.
 All remains have been segregated.
 Teeth and charts are with case 17-8495 A.

Ury

CHECK LIST OF UNKNOWN

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

Unknown X - 5208
Cemetery Neuville en Condroz, Belgium
Plot Row Grave

1. ~~Arrived at cemetery~~ **Date processed: 30 January 1947**
(Hour) (date)
2. Place of death **Near Floesti, Rumania**
(Name of closest town) (ordinates and letter Prefex, maps)
XC-2649 Bucarest 1/250.000
3. Remains recovered or disinterred by **Rum. Det. 347 QM Bn. (M)**
(Name and organization)
4. Evacuated to Cemetery by **Central Identification Point**
(Name and organization)

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

Item	Clothing	Markings	Sizes	Indicate unusual markings
				Color wear, tear, repairs, etc.
*Headgear	none			
Raincoat	none			
Overcoat	none			
Jacket, Field	none			
Jacket, Combat	none			
Mackinaw	none			
Sweater	none			
Jacket, HBT	none			
*Shirt, Wool, OD	none			
Undershirt, Wool	none			
Undershirt, Cotton	none			
Trousers HBT	none			
*Trousers, Wool OD	none			

Belt, Web **none**
Drawers, Wool **none**
Drawers, Cotton **none**
Leggings, Wool **none** (Note unusual lacing)
Socks, Cotton **none**
*Shoes (type) **none**

Overshoes **none**
Web Equipment (type) **none**
(Other item) **Remnants of electrically heated flying suit.**
(Other item) **none**

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

6. Chevrons or Insignia **none**
(type & location; shirt, jacket, coat, helmet)

Shoulder Patch **none**

7. Does clothing indicate that deceased was a member of the Air, Ground or Naval Forces
A.A.F.

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, poeks, 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** (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 **See Tooth Charts (See remarks)**
 (white, size, unevenness, spacing, policeable crowns, fillings, extract)

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

Jaw **Utd** (large, small, normal) Circumference of head in inches **skull crushed, est. 22"**
 (hat band)

Neck **Utd** (size, length, short, normal, wrinkled) Larvnx **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 Circumcision **Utd** (yes-no) Pubic hair **Utd** (color)

Hernioplasty **Utd** (yes-no; location)

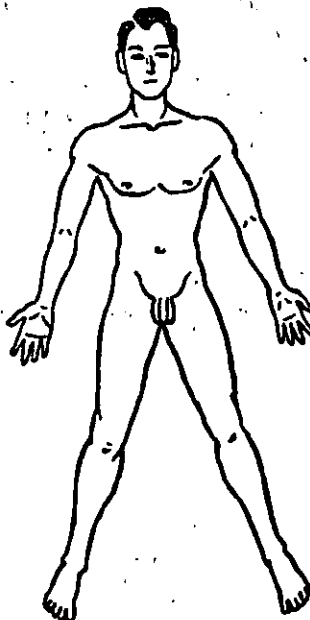
Legs **Utd** (inseam, muscular, knock-kneed, bowed, normal, quantity, color & extent of hair)

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 Chart.



10. Have fingerprints been placed on Report of Internment No
Yes-no

If not, explain Too decomposed

11. Has tooth chart been prepared Yes If not, explain See remarks
Yes-no

12. Remarks: " SEE ATTACHED SHEET "

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. MacIntyre

Officers Name
ELLSWORTH T. MAC INTYRE
Captain O.M.C.

Rank

Service

Central Identification Point

Organization

(Attached sheet to Checklist).

Estimated weight of remains recovered: 12 Lbs.
Fluoroscopic Examination unnecessary.
Nothing found to warrant Chemical Laboratory Examination.

Body badly fractured and crushed.

Case 1F-8423 was received at Central Identification Point as a mass burial of two (2) men. Segregation was possible because of difference of size and structure in the bones. Case 1F-8423 has been changed to case 1F-8423 A and B.

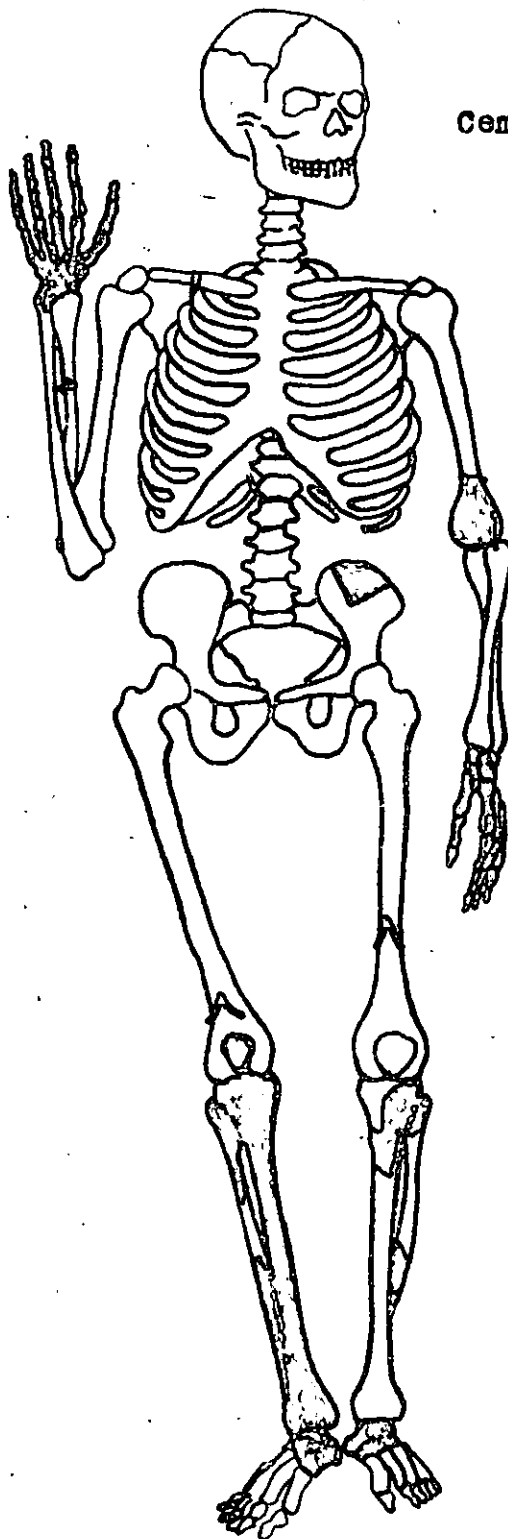
The teeth found and charted were a mass common among the remains. The clothing found was a mass common among the remains. It is possible that the teeth and clothing may belong to either case 1F-8423 A or B.

The teeth and clothing were put with remains in case 1F-8423 A. The Tooth Charts are inclosed with case papers in case 1F-8423 A.

As processing at Central Identification Point revealed no positive identifying clues, this case remains "Unknown" as previously classified by another Graves Registration Unit.

SKELETAL CHART 1F-8423 (A),B.

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



Unknown X-5208

**Cemetery Neuville en Condroz,
Belgium (VK-390187)**

REPORT OF INVESTIGATION

AREA SEARCH

AGRC Form 10 (Revised)

1 January 1946.

18 February 1947
~~17 January 1947~~

 Date

NAME Unknown X-5208 RANK Unknown ASN Unknown

ORGANIZATION Unknown A.A.F.

MEANS OF IDENTIFICATION None.

(All statements above this line will be completed, upon final processing, by the clerical staff at the unit processing point.)

SECTION A - GENERAL (To be completed by investigators in all cases)

1. Was positive identity acquired for the deceased through the surface investigation? **No**
 If so, state the following information :
 - a. NAME _____ RANK _____ ASN _____
 - b. ORGANIZATION _____

2. Was partial identification established? **Yes** If so, state the facts as to whom you believe the deceased to be: **Common grave of :**
 - a. NAME **X-89 and X-90** RANK _____ ASN _____
 - b. ORGANIZATION **Uncertain**

3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY **Right side :**
X - 91 ; Left side : X - 88

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

a. Date of above burials **3 August 1943** Common Graves? **No**

65

5. Name and Type of Cemetery Mil. and Civ. Cemetery Bolovan
(Military or Civilian)
6. Map Coordinates of the Cemetery xC2649 Bucarest 1/250,000
a. Town Ploesti Country Roumania
7. Give exact location in cemetery of the remains.
a. Section Hero. Row 2 Grave See sketch
b. Is Sketch attached? Yes
8. If remains are not located in a cemetery, give exact location.
a. Town _____ Coordinates _____
b. Is sketch attached? _____
c. Is area mined? _____
9. How is the grave marked? Concrete cross
10. If grave is marked with cross, give exact markings thereon OSTASI AMERICANI
NECUNOSUTI
- a. From what source was this information obtained? Roumanian records
(Identification tags, personal effects)
b. By Whom _____
11. Where are the cemetery records Ploesti
(Town Hall, cemetery, burgermeister)
- a. What information was contained thereon? Date of death and burial
- b. Where was the information obtained? from bodies
- c. By Whom? Roumanians
12. What is the date of death? 1 August 1943
a. Give basis Roum. records
13. What is the cause of death? Plane crash
b. Give basis Roum. records
14. What is the date of burial? 3 August 1943
a. Give basis Roum. records

(66)

15. Where was the place of death? near Ploesti Coords xC2649 Bucarest
1/250,000
 Give basis Roum. information
16. Where were the remains found? near crash Coords -
 a. By Whom? Roumanians
 b. Is sketch attached? No
17. Was a casket used? Yes Who furnished the casket? Roumanians
 Type of casket Wooden How marked? Not marked
18. Who made the burial Roumanians
 (Civilian, American MI, or German MI)
 a. What are the names and addresses? Local Roum. authorities
 b. Are certificates and statements attached? Yes

SECTION B - AIR CORPS DECEASED (To be Completed only if Deceased is believed to be a member of the AAF).

19. Were remains found in the plane wreckage? Unkn
 a. Give location in plane from which the bodies were removed _____

 (Tail gunner, pilot, radio, turret, etc., or front, side, of plane)
 b. Near wreckage? _____
20. Scene of crash must be investigated. Give complete results of Investigation (if removed, state when and by whom).
 a. Type of Plane Unkn
 b. Markings and/or name on plane _____
 c. Give numbers on motors, machine guns, instruments, radios or other equipment: _____

21. How did crash occur? Unkn Anti-aircraft _____
 Enemy Planes? _____ Collision? _____

(62)

22. Did plane explode in the air? Unkn On ground? _____
23. Did plane burn in the air? _____ On ground? _____
24. What was the direction of the flight? Unkn _____
25. What was the civilian opinion regarding destination of plane? _____
Unkn
26. Had bombs been released prior to the crash? Unkn _____
27. Does specific time and date of crash correspond with date of death of above named deceased? _____
Yes
28. Number of planes in formation prior to crash Unkn _____
29. State precise time and date of plane crash Day, 1 August 1943 _____
(Night? Day)
30. Were parachutists seen? Unkn How many? _____ Escaped? _____
Prisoners? _____

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

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

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

34. Did tank explode? _____ Burn? _____

NOT APPLICABLE

68

- 35. Number of tanks in immediate vicinity at time of disablement _____
- 36. Does specific time and date of disablement correspond with date of death of above named deceased ? _____
- 37. Precise time and date of destruction of tank _____
(Night ? Day ?)
- 38. Did any of the crew members escape ? _____ Prisoners ? _____

NOT APPLICABLE

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

- 39. Did death occur from any other means ? (i. e., truck, jeep, mines, drowning, or small arms fire) _____
It so, give, complete and thorough results of the interrogation.
- a. Are all certificates and statements of people who possessed knowledge of the case attached ? _____
- 40. State the specific clues and evidence that were obtained in securing the name and facts regarding the above listed deceased _____

NOT APPLICABLE

SECTION E - GENERAL (To be completed by investigation in all cases)

- 41. Were personal effects recovered by the investigating team No
- If not, state reason _____
- a. Were identification tags found at the time of death ? Unkn
- Where ? _____ By Whom ? _____
- Present disposition _____
- If deceased is not identified, personal effects will not be forwarded to PE Depot, but will remain with this form until final identification is made, or investigation is abandoned.
- b. Were personal effects found at the time of death ? Unkn
- Where ? _____ By Whom ? _____
- Present disposition _____

69

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

No

d. Did Cemetery register or cross indicate the immunization shot? _____

No

42. Was Deceased given first aid? _____

No

If so, where? _____

By whom? _____ Are statements from the medical people attached? _____

43. Was deceased evacuated to a ~~Cemeter~~ civilian hospital? _____

No

WHERE? _____ Names of people concerned _____

44. Is it possible on surface investigation to obtain from civilian sources a physical description of the deceased? _____

No

45. Is it possible on surface investigation to obtain from civilian sources the condition of the remains? _____

No

(Burnt? Decapitated? etc)

46. Do facts surrounding death show any evidence that it might be an atrocity case? _____

No

a. If so, give basis for positive assumption _____

b. If so, has higher headquarters been notified? _____

47. Was case previously investigated? _____

No

By Whom? _____

When? _____

48. Give full names, addresses, and information obtained from each person interviewed _____

Unkn

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

Yes

70

50. Has any information been given concerning isolated burials in the area outside the immediate vicinity?

No

51. Was investigation preceded by advanced publicity? Yes

(If special investigation, give case number)

52. Give Brief Narrative

(Use attached sheets, if necessary)

Signature of Interpreter

Rank ASN

Organization

Charles J. Jorgensen
CHARLES J. JORGENSEN
Signature of Investigator

MAJOR FA O-284501
Rank ASN

Rum: Det. 347 QM Bn (M)
Organization

20

FINDINGS IN GRAVE

§ 4 January 1947

1. Box 37, Row 2, Plot C, Section Hero, contained the following upon disinterment:

- a. One skull with both upper and lower jaws and a number of teeth.
- b. Charred skeleton remains.
- c. Rest of a second crushed skull with parts of lower jaw and some teeth.
- d. Remnants of an electrically heated flying suit.

2. The above findings show these remains to be two American airmen who crashed on August 1st, 1943.

J. Siladie
Civ. Investigator

J. Siladie

72

16	2 OSTASI AMERICANI NECUNOSCUTI
15	3 OSTASI AMERICANI NECUNOSCUTI
14	2 OSTASI AMERICANI NECUNOSCUTI
13	2 OSTASI AMERICANI NECUNOSCUTI
12	2 OSTASI AMERICANI NECUNOSCUTI
11	2 OSTASI AMERICANI NECUNOSCUTI
10	2 OSTASI AMERICANI NECUNOSCUTI
9	3 OSTASI AMERICANI NECUNOSCUTI
8	4 OSTASI AMERICANI NECUNOSCUTI
7	4 OSTASI AMERICANI NECUNOSCUTI

Cross
No. Plot C, Row 2, as it
reads from the crosses

North 10 crosses of 16 in this group.

32	X - 67 X - 68
33	X - 69 X - 70
34	X - 71
35	X - 72
36	X - 73 X - 74
37	X - 75
38	X - 76
39	X - 77 X - 78
40	X - 79 X - 80
41	T.Sgt. Carlton, Clyde W. X - 81
42	Capt. Houston, Rowland B.
43	X - 82 X - 83
44	S/Sgt. Doka Michael X - 84 X - 85
45	S/Sgt. Frast, Earl L. X - 86 X - 87
46	X - 88
47	X - 89 X - 90

Row.
No. Plot C, Row 2, as it was
found on disinterment.

S C H I T A

Formintelor Ostașilor americani inhumati in Cimitirul Eroilor din Ploiești

Aleea principală

Portal

CIMITIRUL EROILOR

T.
68
69
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83

E.
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98
99

LEGENDA :

68 - Frideric H. Polmer
72 - Philip E. Nelson
73 - Sterling
85 - Marion J. Szaros

Grupele de Forminte

A - 6 cosciuge cu 10 cart. 100
B - 15 " " 25" 101
C - 33 " " 42" 102
D - 13 " " 32" 103
E - 33 " " 40" 104

D.

105 55
106 56
107 57
108 58
109 59
110 60
111 61
112 62
113 63
114 64
115 65
116 66
117 67

C.

22
23
24
25
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35
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A.

1
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4
5
6

B.

7
8
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10
11
12
13
14
15
16
17
18
19
20
21

Roumanian	25
(I)	24
2 unkn Am	23
(L)	22
(K)	21
4 unkn Am	20
1 unkn Am	19
2 unkn Am	18
2 unkn Am	17
2 unkn Am	16
3 unkn Am	15
2 unkn Am	14
4 unkn Am	13
(J)	12
4 unkn Am	12
3 unkn Am	11
2 unkn Am	10
2 unkn Am	9
2 unkn Am	8
4 unkn Am	7
2 unkn Am	6
2 unkn Am	5
2 unkn Am	4
2 unkn Am	3
5 unkn Am	2
3 unkn Am	1

Row 4

Russian	13
(I)	14
Russian	13
(H)	12
Russian	11
(G)	10
(F)	9
(E)	8
6 unkn Am	7
4 unkn Am	6
4 unkn Am	5
4 unkn Am	4
5 unkn Am	3
5 unkn Am	2
3 unkn Am	1

Row 3

Roumanian	37
(D)	26
(C)	25
(B)	24
Russian	23
3 unkn Am	22
3 unkn Am	21
x	
1 unkn Am	20
2 unkn Am	19
(A)	18
2 unkn Am	17
2 unkn Am	16
2 unkn Am	15
2 unkn Am	14
2 unkn Am	13
2 unkn Am	12
2 unkn Am	11
2 unkn Am	10
3 unkn Am	9
4 unkn Am	8
4 unkn Am	7
2 unkn Am	6
3 unkn Am	5
4 unkn Am	4
3 unkn Am	3
2 unkn Am	2
3 unkn Am	1

Row 2

Roumanian	42
4 unkn Am	41
3 unkn Am	40
5 unkn Am	39
Roumanian	38
Roumanian	9
6 unkn Am	8
5 unkn Am	7
4 unkn Am	6
3 unkn Am	5
2 unkn Am	4
2 unkn Am	3
2 unkn Am	2
1 unkn Am	1

Row 1

Hero Section
 BOLOVAN CELETERY
 PLOESTI, PRAHOVA, ROUMANIA
 zc2549 BUCURESTI 1/250,000

unkn Am - unknown American
 (A) (B) etc. See reverse for
 list of names
 x - See reverse

Crosses marked other than unknowns read as follows :

(A) Row 2, No. 18 ROBERT WILTBANK

(B) Row 2, No. 24 PEANNE CHARLES H. 2nd Lt. O-701282
 BRADFORD WAYNE H. Sgt. 39281463
 SOUKOP JOHN Sgt. 33678256
 RAPSON CALVIN H. Sgt. 36585133
 MORTI 31 V 1944

(C) Row 2, No. 25 KOZLOWSKI STANLEY A. 2nd Lt. O-761003
 BOWER KENNETH G. Sgt. 33505166
 LATURNIAN BELOND Sgt. 39910069
 MORTI 31 III 1944

(D) Row 3, No. 26 KENNETH A. HANSON

(E) Row 3, No. 8 EMMETT BEARES
 AMERICAN

(F) Row 3, No. 9 A. ROBE
 AMERICAN

(G) Row 3, No. 10 CLAUDE WOBLE
 AMERICAN

(H) Row 3, No. 12 FERRY JAMES L. 1st Lt. O-817297
 HEAP GORDON H. 1st Lt. O-756229
 LAUBE WARREN 2nd Lt. O-710280
 BAKER EDWARD W. S/Sgt. 34787319
 MORTI 19 VIII 1944

(I) Row 3, No. 14 SPENCER CARLO 1st Lt. O-813433
 SIMON WILLIAM F. Jr. 2nd Lt. O-712923
 YOUNG JOHN P. T/Sgt. 32761795
 YAW JOHN H. S/Sgt. 36580133

(J) Row 4, No. 12 4 OSTASI AMERICANI
 NEMO ECHIP AVION
 111386

(K) Row 4, No. 21 STERLING, AMERICAN

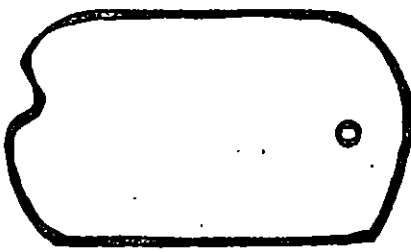
(L) Row 4, No. 22 PHILIP NELSON

(M) Row 4, No. 24 FREDERICK H. POLMER

x) Disinterred 27 December 1945 by 3621 GR Unit Det.
 Grave contained S/Sgt. Bill Garcia and
 2nd Lt. Roland Jackson.

WD OMC FORM 1042 Rev 1 Apr. 1945 (Supersedes GRS Form I)	REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)	Date of report 17 March 1947
--	---	--

P. J. ...
 M. J. ...

Imprint Identification Tag if Possible DO NOT TYPE 	SECTION I. IDENTIFICATION		
NAME (Last, First, Middle Initial) UNKNOWN X-5208	Serial number Unknown		
Grade Unknown	Organization Unknown	Branch of service A.A.F.	
Race Unknown	Religion Unknown	If other than U. S. dead, Give name of country.	

Place of death Near Ploesti, Rumania.	Cause of death Plane crash	Date of death Estimated 1 August 1943
--	-------------------------------	---

Emergency addressee (Name, Relationship and Address.)
 Unknown.

Identification tags found on body (1, 2, or None) None	If no tags found on body, describe means of identification. If unidentified fill in section 3 on reverse.
Were substitute tags provided (Yes or No) Yes	

REGISTRATION AND
 RECORDS BRANCH
 MAY 26 8 52 AM '47
 HEADQUARTERS DIVISION

List personal effects found on body and disposition of same
 None

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

Name, Number, Coordinates and location of cemetery
 U.S. Military Cemetery Neuville en Condroz, Belgium (VK-390187)

Date of burial	Hour	Buried in (Shroud, Blanket, or name of other)	Type of grave marker	Temp.	Plot no.	Row no.	Grave no.
17 March 1947	1500	Casket	wooden cross		U	8	184

Was this a re-burial (Yes or No) Yes	If a re-burial, indicate Name, Number, coordinates of previous cemetery, and location of grave Civilian and Military Cemetery of Bolovan, Ploesti, Prahova, Rumania XC-2649 Bucarest 1/250,000 Common Grave	Plot no. Hero	Row no. 2	Grave no. 37
--	---	------------------	--------------	-----------------

Type of religious ceremony Joint P, C & H	Person conducting burial rites Chaplains Rusher Saatman & Lepchivcher	If identification tags not used, describe identification data and containers buried with body Report of Burial
--	---	---

Identification tag buried with body (Yes or No) No	Identification tag attached to marker (Yes or No) GRS	
---	--	--

Body buried on deceased left, Name (Last, First, Middle Initial) Unknown X-5219	Rank Unk	Serial number Unk	Organization Unk	Grave No. 185
--	-------------	----------------------	---------------------	------------------

Body buried on deceased right, Name (Last, First, Middle Initial) Unknown X-5222	Rank Unk	Serial number Unk	Organization Unk	Grave No. 183
---	-------------	----------------------	---------------------	------------------

Signature of person preparing report ELLSWORTH T. MAC INTYRE Captain D.M.C. C.I.P.	Signature of GRS officer verifying report RAYMOND C. JOHNSON 2nd Lt. Inf. C.I.P.
--	--

DISTRIBUTION OF REPORT: Signed original for US and allied dead; signed original and one copy for enemy dead, to the Quartermaster General through Hdq. GRS Officer. Copies for retention in theater as prescribed by theater commander.

SECTION 3. UNIDENTIFIED REMAINS

INSTRUCTIONS

(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other" such as shoe size, social security number; position of body, found in airplanes, vehicles and tanks; and serial numbers of airplanes, vehicles and tanks.

(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprints or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.

Height	Weight	Color of eyes	Color of hair	Birthmarks, scars or tattoos
Utd	Utd	Utd	None found	Utd

Weapon and serial number	Laundry marks	Where body was buried or found
None	None	Ploesti, Rumania

For tooth chart see attached Form I-A.

REMARKS

Case 1F-8423 was received at Central Identification Point as a mass burial of two (2) men. Segregation was possible because of difference of size and structure in the bones. Case 1F-8423 has been changed to case 1F-8423 A and B.

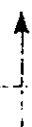
The teeth found and charted were a mass common among the remains. The clothing found was a mass common among the remains. It is possible that the teeth and clothing may belong to either case 1F-8423 A or B.

The teeth and clothing were put with remains in case 1F-8423 A. The Tooth Charts are inclosed with case papers in case 1F-8423 A.

It is possible that this deceased is an air man who was killed in a plane crash during an air raid in the vicinity of Ploesti, Rumania.

As processing at Central Identification Point revealed no positive identifying clues, this case remains "Unknown" as previously classified by another Graves Registration Unit.

Furnish sketch and map reference and coordinates for burial in other than established cemetery



Remarks

Form 11 Checklist of Unknowns, Form 1A Tooth Chart accomplished. Unable to obtain fingerprints because of decomposition. Estimated weight of remains recovered: 12 Lbs.