OMC FORM REV-11 FEB 48 1194 AN y Joh

1 ST LT AND

#### DISINTERMENT DIRECTIVE DIRECTIVE NUMBER DATE SECTION A -INMO DINAT 13 06 cin 2.4 NAME AND BURIAL LOCATION OF DECEASED DAY HTMOM YEAR SERIAL NUMBER GRADE ARM RACE RELIGION NAME 1.3 DOWNOON X-COCOMOU DISPOSITION OF REMAINS GRAVE . PLOT ROW CEMETERY 1.43.66 BELGIUE BELGIUE CODE DIST. CTR. SECTION B -- CONSIGNEE AND NEXT OF KIN NAME AND ADDRESS OF CONSIGNEE NAME AND ADDRESS OF NEXT OF KIN NEUVILLE-EN-CONDROZ, BELGIUM (SY ADMINISTRATIVE DECISION) SECTION C - DISINTERMENT AND IDENTIFICATION DATE DISTINTERRED GRADE DATE OF DEATH NAME SERIAL NUMBER ORGANIZATION RELIGION IDENTIFICATION VERIFIED BY IDENTIFICATION TAG ON REMAINS UNKNOWN NAME AND TITLE MARKER SECTION D - PREPARATION OF REMAINS FOR SHIPMENT CONDITION OF REMAINS NATURE OF BURIAL OTHER MEANS OF IDENTIFICATION MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.) REMAINS PREPARED AND PLACED IN CASKET EMBALMER (Signature) CASKET SEALED BY SHIPPING ADDRESS VERIFIED BY CASKET BOXED AND MARKED DATE 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

# HEADQUARTERS AMERICAN GRAVES REGISTRATION COMMAND EUROPEAN AREA APO 58 US ARMY

RRE 293

9 August 1949 (Date)

### CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X - 5450, Plot
Row 12 , Grave 294 , USMC NEWVILLE, Belgium
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. 2372 , dated 23-7-47
3. Remarks:
Case reviewed by undersigned Members of the Board of Review:
Employed >
Col. H.P. HENRY, 0-12589 QMC Lt. Col. E.D. MULVANITY, 0-359598 QMC
/ Vogesperger
Major R. BERGER, 0-251736 ORD Capt. Jack C.HAYES, 0-1577297 QMC
$\Omega$ $\Omega$
Capt. E.F. PRICE, Jr. 0-1588236 QMC 1/Lt. Edward E. STOUT. 0-1594512 CE
Capt. E.F. PRICE, Jr. 0-1588236 QMC 1/Lt. Edward E. STOUT, 0-1594512 CE
# 11 Not identifiable from all 30 a
information presently that available

## G. R. & E. DIV. SOFFICE OF THE CHIEF QUARTERMASTER HQ. COM. ZONE, ETOUSA

### TOOTH CHART

							26	MA'I Date	1947	
Unknown	X - 5450 Last Name	First Ink nown	Ini	itial		known Rank A.G		nknowi Serial N		
Hurtgen Forest, dis	Un	it	Est Nove		44	Organization B.T.	H. Artil Cause of De		fir <u>e</u>	
	Right						Left			
8	7 6	5 4 3	2 1	1 2	3	4 5	6	7	8	
A 6	A A.	BAB	KI	ORN			A	A	18	
Side views		560				OC.			$\mathcal{O}$	ž
тору						06		Œ		UPER
VIEWS >	PB				OF	30	W.	(d	XE	LOWI
Side Views				MA BBB				X 40	M	
16	15 14	13 12 11	10 9	9-10	11-	12—13	14	_15_	16	

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.

Signature of Officer or other person who prepared Tooth chart

Verfied by G. R. S. Officer

ERNEST . C. GADDI CWO USA C.I.F. 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, cernent), 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

Medium size teeth, bleached white from exposure.

Posthumously missing - K3,5,9, L, 8, 9, 10

Spaces- K 15-13, 4 mm. L. 15-13, 5 mm.

Mesial version K 15-16; L 15, 16

L 13 rotated mesially - 1/8 turn

K 1; L. 1,2, worn as shown



AGRC FORM No. 11
Revised 16 Sept. 1946
Formely "Check List
of Unknowns")

## IDENTIFICATION CHECK LIST

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

	Unknown X5450
	Cemetery neuville en Condroz, Belgiu
	PlotRowGrave
1. Anxielystycherkey. Date processes (Hour)	d ; 25 April 1947
(2.11.10 01 0103011 10	(distribution and folice from the pay
(Sheet, scale and serials used)	
3. Remains <b>reconcered</b> or disinterred by	Mq & mq , det, 164 QM . (Name and organization)
4. Evacuated to Cemetery by Subordina	to Identification Point, Margraten , Holland (Name and organization)
5. Description of clothing and equipment: (	(if clothes do not fit, obtain size from body measurements)
Item Clothing Markings	Indicate unusual markings Sizes color, wear, tear, repairs, etc.
* Headgear <b>none</b> (Type)	- -
Raincoat Kennants , one	(1)
	s of one (1)
Jacket, Field Remnant	s of one (1)
	ne
	none
•	none
· · · · · · · · · · · · · · · · · · ·	none
•	s of one (1)
	s of one (1)
	none
	pone
* Trousers, Wool OD	·

- i -

Belt, web	none		
Drawers, wool	none		
Drawers, cotton	none		
Leggings, wool	none		
	•		
•			
Web Equipment	laves one (Insir) mod	O.D. Leather Po	alm
	•		
*If body is nude, si	zes of these items should be compu	ted by measuring the ren	pains
			· · · · · · · · · · · · · · · · · · ·
	· -		
Shoulder Patch	попе		
Does clothing in	dicate that deceased was a r	nember of the Air,	Ground or Naval Force?
	Ground I		•
Description of R	lemains:		uto
Age UTD	Height 6'3/8 Weight	UTU Description	n of wounds UTD
Bandages or dre	ssings Utd	Scars	(Length, width, location)
***************************************	114-8		•
	les, warts or birthmarks		
Sunburn or tan,	other than hand and face	Utd	
Complexion	Utd (Light med	ium, dark, clear, pimples	, pocks, freekies)
D 41			
Build	(Large, 1	ut, thin, moscorary	
Hair	(Color, length, quantity, cu	urly, wavy, straight, who	ris, or definite parting)
Hair		•	er characteristics)
	(Baldness, widows peak, d	listing or other	pand on Utd
Sideburns	Utd Mustache	(Color, size, shape)	Beard or (Length, heavy)

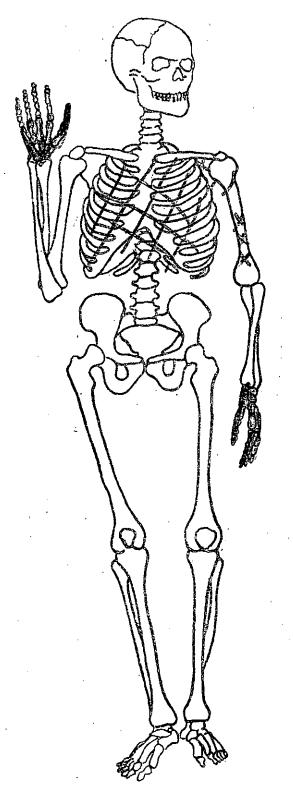
<b>Ut</b> d				***************************************	· ••••••••••
(Light, color, extent)				,	
Utd		Evebrow	'S	Utd	
(Color, setting, shape)		,	(Col	lor, bushiness, exter	it across nose)
Uta		Eears		Utd	
(Size, shape, straight)	,		(Size,	set close to or far	from head)
Utd	*	Line		<u> </u>	Jta
(Large, medium, small)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	(Small, large, full)	
•	Seë toat	h chart			
(White, size, une	veness, spacing	g, noticeable c	owns, filli	ngs, extracts) ,	***************************************
•	Utd				
(Prom	inent, receding	g, pointed, din	ples, doul	ole)	
	•				
rge. small. normal)	Circumferen	ce of head	in inches	(Ha	it band)
				114.3	•
Utd	wrinklad)	Larynx		Utd (Prominent, norm	1911
3		`			•
Utd		Ārms			Ütd
(Broad, straight, small, re	ounded)	(Length	, muscuiar	, color, extent and	quantity of har
		•			
		Utd			
11		Vta	g gagyahaaddawa Q T ghaybaan aan ba		
υ	td	Vtd			
2016-0011 hidderd hel corress pij specental Lori, bijserepre aansete oa berbiiddiddid   164-46 tai	td	-	( g = p = 1 to 1		
	td Utd		s, missing	fingers or joints)	
	td Utd long, slender,	size of knuckle	s, missing	ingers or joints)	
(Short, thick,	td Utd long, slender,	size of knuckle	s, missing	ingers or joints)	
(Short, thick,	td Utd long, slender, s	size of knuckle	s, missing	ingers or joints)	
(Short, thick,	td  Utd long, slender, sal characteristi	size of knuckle	is, missing	ingers or joints)	
(Short, thick, (Unusual) (Unusual) (Size of nipples, colo	Utd long, slender, sal characteristi Utd or, quantity an	size of knuckle	ils)	small, normal)	· · · · · · · · · · · · · · · · · · ·
(Short, thick, (Unusua) (Unusua) (Size of nipples, colo	Utd long, slender, s al characteristi Utd or, quantity an	size of knuckled ics of Angerna and extent of h	is, missing	small, normal)	· · · · · · · · · · · · · · · · · · ·
(Short, thick, (Unusual) (Size of nipples, colo	Utd long, slender, al characteristi Utd or, quantity an	size of knuckled ics of Angerna ics of Angerna ics of Angerna ics of his amount, quan	ils) air, large,	small, normal)	
(Short, thick, (Unusual) (Size of nipples, color) (Size of navel,	Utd long, slender, sal characteristi Utd or, quantity an uppendectomy,	size of knuckled ics of Angerna ics of Angerna ics of Angerna ics of his amount, quan	ils) air, large, tity, and c	small, normal)	Üŧd
(Short, thick, (Unusual) (Size of nipples, colo	Utd long, slender, sal characteristi Utd or, quantity an uppendectomy,	size of knuckled ics of Angerna ics of Angerna ics of Angerna ics of his amount, quan	ils) air, large,	small, normal)	
(Short, thick, (Unusual) (Size of nipples, color) (Size of navel, Utd (Quantity and extent of hair)	Utd long, slender, s al characteristi  Utd or, quantity an  u appendectomy,	size of knuckled ics of Angerna and extent of he amount, quant amount, quant amount in the contract of the con	air, large, tity, and c	small, normal)  olor of hair)  Pubic Hair	Utd (Color)
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(Short, thick, (Unusus) (Size of nipples, color) (Size of navel, Utd (Quantity and extent of hair)	Utd long, slender, sal characteristi  Utd or, quantity an  appendectomy,  Circu	size of knuckled ics of fingerna ics of fingerna ics of fingerna ics of his amount, quantimosion imcision ics of financision ic	ils) air, large, tity, and c Utd (Yes-no)	small, normal)  olor of hair)  Pubic Hair	Utd (Color)
(Short, thick, (Unusual) (Size of nipples, color) (Size of navel, Utd (Quantity and extent of hair)	Utd long, slender, sal characteristi  Utd or, quantity an  appendectomy,  Circu	size of knuckled ics of fingerna ics of fingerna ics of fingerna ics of his amount, quantimosion imcision ics of financision ic	ils) air, large, tity, and c Utd (Yes-no)	small, normal)  olor of hair)  Pubic Hair	Utd (Color)
(Short, thick, (Unusual)  (Size of nipples, color)  (Size of navel,  Utd  (Quantity and extent of hair)	Utd long, slender, sal characteristi  Utd or, quantity an  appendectomy,  Circu  Utd  Utd	size of knuckled ics of Angerna indextent of he talk amount, quant incision (Yes-no; located), normal, quant quant, quant	air, large, tity, and c  Utd (Yes-no)  on)	small, normal)  olor of hair)  Pubic Hair	Utd (Color)
(Short, thick, (Unusual)  (Size of nipples, color)  (Size of navel,  Utd  (Quantity and extent of hair)	Utd long, slender, sai characteristi Utd or, quantity an appendectomy, Circu Utd Ut	size of knuckled ics of Angerna indextent of he talk amount, quant incision (Yes-no; located), normal, quant quant, quant	ils) air, large, tity, and c Utd (Yes-no) on)	small, normal)  olor of hair)  Pubic Hair	Utd (Color)
(Short, thick, (Unusual (Unusual (Size of nipples, color (Size of navel, Utd (Quantity and extent of hair) (Inseam, muscular, knock Utd	Utd long, slender, sal characteristi  Utd or, quantity and appendectomy, Circu Utd  Utd	size of knuckled ics of fingerna ics of fingerna ics of fingerna ics of his amount, quantimosion ics of the control ics of the	air, large, tity, and c  Utd (Yes-no)  on)  (Slender	small, normal)  olor of hair)  Pubic Hair  r and extent of h  Utd  r, straight, crooked	Utd (Color)
	(Color, setting, shape)  Utd  (Size, shape, straight)  Utd  (Large, medium, small)  (White, size, une  Utd  rge, small, normal)  Utd  (Size, length, short, normal, vertical straight)	(Light, color, extent)  Utd  (Color, setting, shape)  Utd  (Size, shape, straight)  Utd  (Large, medium, small)  See toot  (White, size, uneveness, spacing  Utd  (Prominent, receding  Utd  Circumferen  rge, small, normal)  Utd  (Size, length, short, normal, wrinkled)	(Light, color, extent)  Utd Eyebrow  (Color, setting, shape)  Utd Eears  (Size, shape, straight)  Utd Lips  (Large, medium, small)  See tooth chart  (White, size, uneveness, spacing, noticeable color of the decomposition of the decompositio	(Light, color, extent)  Utd  (Color, setting, shape)  (Size, shape, straight)  (Size, shape, straight)  (Large, medium, small)  See tooth chart  (White, size, uneveness, spacing, noticeable crowns, filli  Utd  (Prominent, receding, pointed, dimples, doul  Utd  Circumference of head in inchese rege, small, normal)  Utd  Larynx  (Size, length, short, normal, wrinkled)  Utd  Arms	(Light, color, extent)  Utd  (Color, setting, shape)  Utd  (Size, shape, straight)  (Size, shape, straight)  (Color, bushiness, extent of the straight)  (Size, set close to or far of the straight)  (Color, bushiness, extent of the straight)  (Size, set close to or far of the straight)  (Size, set close to or far of the straight)  (Carge, medium, small)  (Size, medium, small)  (White, size, uneveness, spacing, noticeable crowns, fillings, extracts)  (White, size, uneveness, spacing, noticeable crowns, fillings, extracts)  (Prominent, receding, pointed, dimples, double)  Utd  (Prominent, receding, pointed, dimples, double)  Utd  (Circumference of head in inches 21.2  (Circum

7.	Have finger prints been placed on Report of Interment? No. (Yes-no)
	If not, explainToo decomposed
8.	Has tooth chart been prepared?If not, explain
9.	Remarks Case consists of dry bones and clothing remnants all clothing with but
	not on body . Height estimated by measuring the following bones : Fibula. 40,1
	Tibia. 40.7 - Femur. 49.5 - Humerus 36.4 - Radius 27.4 - and Ulna 29.1
	Fluoroscopie Examination: not necessary
	Estimated weight of remains recovered : 25 lbs
	I certify that I have personally viewed the remains of subject deceased and all resulting information has been recorded to the best of my knowledge.
,	In Adadh
	(Officer's Name)  Ernest C. GADDY
	Rank C W O U.S.A. Service
	Central Identification Foint (Organization)
;	"Remnants of EM " Means of Identification Card " found with remains, were examined by chemical Laboratory with negative results. Photo Laboratory Examination revealed (1) Identification Card No. N 073??  (2) In upper right-hand corner:  ? 7368 in reverse believed to be transposition of last figures in (1) above.
	Prints are inclosed with case papers .

As processing at Subordinate Identification Point, Margraten, Holland revealed no positive identifying clues, this case is classified "Unknown"

### SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



NEGUVILLE - en - CUMDRUZ

Belgium

Unknown X - 5450

D'ANTATTO NAME OF -1287

# AREA SEARCH ATTN: REG.DIV

ATTM: REG. DIV. AG.R.C.
FOR USE IN
CASUALTY CLEARANCE

1 January 1946  NAME Unknown X - 54,50 RANK Unknown ASN Unknown  ORCANIZATION  MEANS OF IDENTIFICATION  MEANS OF IDENTIFICATION  MEANS OF IDENTIFICATION  SECTION A — GENERAL (To be completed by investigators in all cases)  1. Was positive identify acquired for the deceased through the surface investigation?  a. NAME RANK ASN  b. ORGANIZATION  2. Was partial identification established?  NO If so, state the facts as to whom you believe the deceased to be a. NAME NAME NAME RANK UNKNOWN ASN UNKNOWN  ASN UNKNOWN  3. NAME OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY FOUR (4) UNKNOWN U.S. SOLDIERS  (Use reverse side for listing of crew members from MARC)  a. Date of above burials  NOT BURIED  Common Graves?  5. Name and Type of Cemetery NOT BURIED  (Millitary or Civilian)  6. Map Coordinates of the Cemetery a. Town Country  7. Give exact location in cemetery of the remains.  a. Section Row Grave  b. Is Sketch attached?  8. If remains are not located in a cemetery, give exact location.  a. Town Country  Coordinates WF-0336  c. Is area mined?  NOT BURIED  (If grave is marked with cross, give exact markings thereon  a. From what source was this information obtained? (Identification togs, personal effects)  1. By whom  1. Where are the cemetery records?				26 MAY 1947						
ORGANIZATION  MEANS OF IDENTIFICATION  (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? If so, state the following information:  a. NAME — RANK — ASN — SN — SN — SN — SN — SN — SN — S	•			_	<del>-</del>					
MEANS OF IDENTIFICATION  (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? If so, state the following information:  a. NAME  b. ORGANIZATION  2. Was partial identification established?  WAS DURKNOWN  a. NAME  b. ORGANIZATION  UNKNOWN  B. ORGANIZATION  UNKNOWN  C. NAME  C. NAME  D. ORGANIZATION  UNKNOWN  C. NAME  D. ORGANIZATION  UNKNOWN  C. NAME  D. ORGANIZATION  UNKNOWN  C. NAME  (Use reverse side for listing of crew members from MARC)  a. Date of above burials  MOT BURIED  (Use reverse side for listing of crew members from MARC)  a. Date of above burials  MOT BURIED  (Military or Civilian)  6. Map Coordinates of the Cemetery  a. Town  Country  7. Give exact location in cemetery of the remains.  a. Section  BURTOEN  b. Is Sketch attached?  8. If remains are not located in a cemetery, give exact location.  Coordinates  WES  NO  HORTED  (If grave is marked with cross, give exact markings thereon  a. From what source was this information obtained?  (Identification tags, personal effects)  1. By whom		• •								
(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?  a. NAME  RANK  ASN  b. ORGANIZATION  2. Was partial identification established?  NO  If so, state the facts as to whom you believe the deceased to be: a. NAME  B. ORGANIZATION  3. NAME  UNKNOWN  3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY  (Use reverse side for listing of crew members from MARC)  a. Date of above burials  NOT BURIED  (Military or Civilian)  6. Map Coordinates of the Cemetery  a. Town  Country  7. Give exact location in cemetery of the remains.  a. Section  Row  Country  7. Give exact located in a cemetery, give exact location.  UNTERIED  b. Is Sketch attached?  8. If remains are not located in a cemetery, give exact location.  Coordinates NO  9. How is the grave marked?  NOT BURIED  (I grave is marked with cross, give exact markings thereon  a. From what source was this information obtained?  (Identification tags, personal effects)  1. By whom										
(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?  a. NAME RANK ASN  b. ORGANIZATION  2. Was partial identification established?  b. ORGANIZATION  INKNOWN  RANK UNKNOWN  3. NAME OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY  FOUR (4) UNKNOWN U.S. SOLDIERS  (Use reverse side for listing of crew members from MARC)  a. Date of above buriols  NOT BURIED  (Millitary or Civilian)  6. Map Coordinates of the Cemetery  a. Town  Country  7. Give exact location in cemetery of the remains.  a. Section  Row  Grave  b. Is Sketch attached?  8. If remains are not located in a cemetery, give exact location.  RUNTGEN  Coordinates  NOT BURIED  (Is grave is marked with cross, give exact markings thereon  a. From what source was this information obtained?  (Identification tags, personal effects)  1. By whom										
(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?  a. NAME  B. RANK  ASN  b. ORGANIZATION  2. Was partial identification established?  NO  If so, state the facts as to whom you believe the deceased to be: a. NAME  DINKNOWN  B. ORGANIZATION  3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY  FOUR (4) UNKNOWN  C. SOLDTERS  (Use reverse side for listing of crew members from MARC) a. Date of above burials  NOT BURIED  Common Graves?  5. Name and Type of Cemetery  MOT BURIED  MOT BURIED	*****									
SECTION A — GENERAL (To be completed by investigators in all cases)  1. Was positive identity acquired for the deceased through the surface investigation?  a. NAME RANK ASN  b. ORGANIZATION  2. Was partial identification established?  a. NAME RANK UNKNOWN ASN UNKNOWN  b. ORGANIZATION  1. If so, state the facts as to whom you believe the deceased to be:  a. NAME UNKNOWN ASN UNKNOWN  3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY  (Use reverse side for listing of crew members from MARC)  a. Date of above burials NOT BURIED  (Use reverse side for listing of crew members from MARC)  a. Date of above burials NOT BURIED  (Military or Civilian)  6. Map Coordinates of the Cemetery  a. Town  Country  7. Give exact location in cemetery of the remains.  a. Section Row Grave  b. Is Sketch attached?  8. If remains are not located in a cemetery, give exact location.  a. Town  Coordinates WF-0336  b. Is Sketch attached?  NOT BURIED  9. How is the grave marked?  10. If grave is marked with cross, give exact markings thereon  a. From what source was this information obtained?  (Identification tags, personal effects)  1. By whom										
1. Was positive identity acquired for the deceased through the surface investigation?  a. NAME  b. ORGANIZATION  2. Was partial identification established?  b. ORGANIZATION  1. So, state the facts as to whom you believe the deceased to be: a. NAME  b. ORGANIZATION  1. So, state the facts as to whom you believe the deceased to be: a. NAME  b. ORGANIZATION  1. SOLDIERS  (Use reverse side for listing of crew members from MARC) a. Date of above burials  NOT BURIED  Common Graves?  5. Name and Type of Cemetery  (Military or Civilian)  6. Map Coordinates of the Cemetery a. Town  Country  7. Give exact location in cemetery of the remains. a. Section  Row  Grave  b. Is Sketch attached? 8. If remains are not located in a cemetery, give exact location. a. Town  Coordinates  Coordinates  NOT BURIED  (If grave is marked with cross, give exact markings thereon  a. From what source was this information obtained? (Identification tags, personal effects)  1. By whom	· .		e completed,	upon final) -	processing, b	, the clerical	staff at the			
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1. By whom	a. From wh						•			
1. By whom			•							
NOT BURIED	1. By who	m								
	11 Where are	the cemetery records?	IED		, <del></del>					

	EVACUAT NUMBER IT-1287
	a. What information was contained thereon?
	b. Where was the information obtained?
	c. By whom?
12.	. What is the date of death? NOV. 1944 ASSUMED
	a. Give basis
13.	. What is the cause of death? ARTILLERY ASSUMED
	b. Give basis PLACE OF DEATH (DISTRICT # 88) DESTROYED BY ARTILLERY:
14,	. What is the date of burial? NOT BURIED
	a. Give basis <b>REMAINS HERE FOUND ON TOP OF THE GROUND.</b>
	. What was the place of death? HURTGEN-FOREST, DISTRICT # 88 Coords WF-0336
	b. Give basis REMAINS HERE FOUND THERE
16.	. Where were the reamains found? <b>HURTGEN-FCREST, DISTRICT #88</b> Coords <b>WF-0336</b>
	a. By whom? FORESTER LUDWIG PFAFFE, GERMETER, HOUSE # 9
	b. Is sketch attached? <b>YES</b>
17.	. Was a casket used? <b>NOT BURIED</b> Who furnished the casket?
	Type of casket How marked?
18.	Who made the burial ROT RIPLED
	(Civilian, American Mil. or German Mil.)
.•	a. What are the names and addresses?
SEC	CTION 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? DCES NOT APPLY
	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
	b. Markings and/or name on plane
	c. Give numbers on motors, machine guns, instruments, radios or other equipment:
21.	How did crash occur?  Anti-aircraft
	Enemy Planes? Collision?
22.	Did plane explode in the air?  On ground?
23.	Did plane burn in the air?  On ground?
	What was the direction of the flight?
	What was the civilian opinion regarding destination of plane?
	The most regarding destination of plants.

26.	Had bombs been released prior to the crash?
27.	Does specific time and date of crash correspond with date of death of above named deceased?
28.	Number of planes in formation prior to crash
29.	State precise time and date of plane crash
	(Night?) (Day?)
30.	Were parachutists seen? How many? Escaped?
	Prisoners?
SEC	CTION C — ARMORED CORPS DECEASED (To be completed only if deceased is believed to have been a member of
•	the Armored Force).  Were remains found in wreckage of a tank?  DGES NOT APPLY
31.	
	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 whe
	and by whom)
	a. Type of fank
•	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?
	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?)
રક્ર	Did any of the crew members escape?  Prisoners?
SEC	TION D _ OTHER RRANCH (To be filled out if B & C are not applicable).
39.	Did death occur from any other means? (i. e., truck, jeep, mines, drowning, or small arms fire)
	If so, give complete and thorough results of the interrogation.
	a. Are all certificates and statements of people who possessed knowledge of the case attached?
4C.	State the specific clues and evidence that were obtained in securing the name and facts regarding the above listed
	DECEASED COULD NOT BE INDENTIFIED BECAUSE OF MISSING MEANS OF
	INDENTIFICATION.
SEC	TION E — GENERAL (To be completed by investigation in all cases)
41.	Were personal effects recovered by the investigating team?
	If not, state reason  a. Were identification tags found at the time of death?
	a. Were identification tags found at the time of death?
	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 unti-

	b. Were personal effects found at the time of death?	*-*,
	Where?By whom?	
	Present disposition	
	was despended identified by living members of the crow at the time of death?	
	d. Did Cemetery Register or cross indicate the immunization shot?	
	UNKNOWN	
42.	. Was Deceased given first aid? UNKNOWN If so, where?	
	By whom? Are statements from the medical people attached?	
	NO.	
43.	Was deceased evacuated to a German civilian hospital?	
-	Where? Names of people concerned	
		,
44.	Is it possible on surface investigation to obtain from civilian sources a physical description of the deceased?	)
45.	Is it possible on surface investigation to obtain from civilian sources the condition of the remains?	S
	REMAINS CONSIST OF DRY BONES	
	(Burnt? Decapitated? etc)	
46.	Do facts surrounding death show any evidence that it might be an atrocity case?	٠
	a. If so, give basis for positive assumption	
	b. If so, has higher headquarters been notified? YES	-
4/.	Was case previously investigated?  By whom?	
	When?	
48.	Give full names, addresses, and information obtained from each person interviewed  LUDWIG FFAFFE, FORESTER, GERNETER, HUSE # 9	
	Don't Traffe, Pulleding, Amended, 10001 4	<b>.</b>
•		
49.	Are all positive statements regarding identification and particulars surrounding death attached?	·
50.	Has any information been given concerning isolated burials in the area outside the immediate vicinity?	5
	Was investigation preceded by anvanced publicity?	
	(If special investigation, give case number)	
52	CPP APPACUED NADDATTIP	
JZ.	Give Brief Narrative Step ATTACHED RARRETTYS	
	(Use attached, sheets if necessary)	
	· William Basian	A.
	William B Adams	
	Signature of Interpreter Signature of Investigator	
	T/5 RA-6382982	
	Rank ASN Rank ASN	
	Hq. & Hq. Det. 164 QM. Bn	_
·••••		<del>-</del> 
	Organization Organization	

### NARRATIVE ON HURTGEN. GERMANY CASE.

On 9 April 1947 we proceeded to the Hurtgen-Forest, District # 88, to disinter the remains of an American deceased found by forester LUDWIG PFAFFE, Germeter # 9.

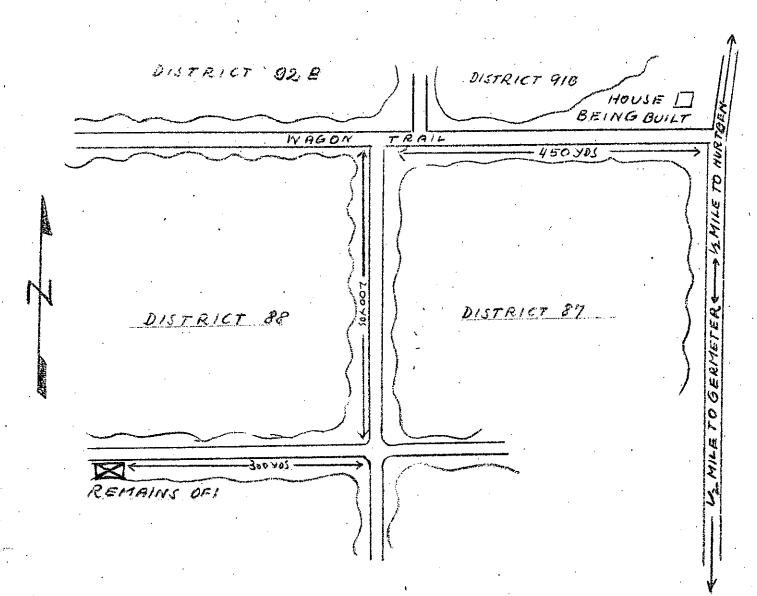
LUDWIG PRAFFE found the remains on his regular course as a forester in this district.

The remains consist of dry bones remaining G.I. equipment. The deceased was recovered near a German Mine-Belt, leading through this area. Wild animals had access to the remains.

No I.D.-tags or other means of identification could be found on the remains.

William B Adams T/5 RA-6382982

William & Marinis



## WAR DEPARTMENT OFFICE OF THE QUARTEHMASTER GENERAL WASHINGTON 25, D. C.

TO

14 November 1946

20 NOV 1946

47/2

SUBJECT: Additional Information That May Lead to the Recovery

Identification of Remains Not Yet Accounted F21 22 23 24 1

21 22 23 24 1 2 3 20 - N - 4 19 5 18 2 1 NOV 1946 6 17 W 9 377 8 15 14 13 12 11 10 9

commanding Officer
American Graves Registration Command
European Theater Area
APO 887, c/o Postmaster
New York, New York

Reference is made to letter this office, QMGYG 314.6, Subject:
Additional Methods of Locating and Identifying Unknowns and Resolving
Cases of Remains Not Yet Recovered, dated 4 October 1946,

2. Attached hereto, in duplicate, is OQMO Form 371 for the following deceased individual whose remains have not yet been recovered or identified:

NAME

GRADE

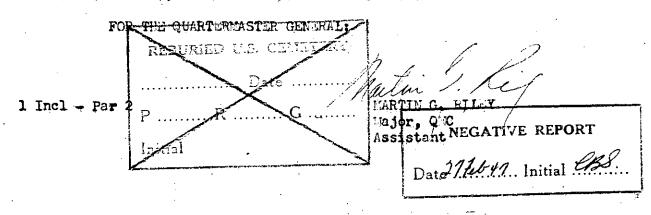
SERTAL NO.

Burkholder, Marion L.

Private

35 089 448

- 3. The attached 0000 Form 371 contains all information available from the Office of The Quartermaster General, the Adjutant General, the AG Demobilized Personnel Records Branch and Clinical Records Branch, St. Louis, "issouri, Headquarters, Army Air Forces, and captured enemy documents, and is in addition to any previous information forwarded by this office to your headquarters.
- 4. It is requested that every attempt be made by your command to locate or identify remains of this individual and the results of your investigation, whether positive or negative, be returned to this office by indorsement hereon, within 60 days of receipt of this communication.



(Basic: Ltr WD OQMG, QNGMR 293, Burkholder, Marion L., 35 089 448, dated 14 November 1948)

RRE 293.9 (IB)

1st Ind

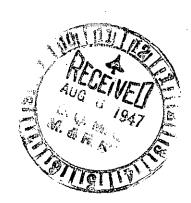
Hq American Graves Registration Command, European Area, APO 58 US Army 24 July 1947

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

- 1. To date, the remains of Private Marion L. Burkholder, 35089448, have not been recovered.
- 2. Attention is invited to attached copies of letter and first Indorsement, Hq 164th QM Battalion, dated 21 and 30 June 1947, respectively.
  - 3. For your information.

FOR THE COMMANDING GENERAL:

Incls a/s WALTER B. MORROW Major, Infantry Actg Asst Adj Gen



# HEADQUARTERS 164TH QUARTERMASTER BATTALION AMERICAN GRAVES REGISTRATION COMMAND APO 403 US ARMY

21 June 1947

SUBJECT: Isolated buriel.

TO : Commanding Officer 164 QM. En. APO 403, US Army

- 1. A search team was sent to the town of Hurtgen, Germany in search of American deceased and returned with negative results.
- 2. The whole Hurtgen section which consists of 25 square kilometers has been heavely mined and to date it is only about 3 to 4 g cleared of mines. As this area is demined remains of deceased are being found every day.
- 3. A number of deceased have been evacuated from Hurtgen. None of the Knowns correspond with the listed deceased.
- 4. Listed below are the evacuation numbers given the Unknowns that have been disinterred from the Hurtgen Area.
  - 5. Suggest listed deceased be checked with these unknowns.

#### For THE COMMANDING OFFICER:

h1

WALTER P. BLANTON 1st Lt. Inf Det. Commander

 IF-1261
 IF-1266
 IF-1299

 IF-1262
 IF-1267
 IF-1300

 IF-1263
 IF-1268
 IF-1332

 IF-1264
 IF-1269
 IF-1374

 IF-1265
 -IF-1287

W 170

### (Germany 3) 5676

1st Ind.

RWS/hb.

HO, 164TH QH. BN, AFO 403, US. ARMY,

30 June 1947

TO: Commanding Officer, FFC, APO LO3, US.ARMY

- 1. Forwarded herewith is case (Germany 3, 5676 ) which is located in an area reported mined.
  - 2. Demining operations are scheduled to be almost completed about 1955.
- 3. Demining activities are not progressing as fast as is desired, however, it must be remembered that demining operations must necessarily be a slow and tedious process in as much as there is the everpresent risk of life to be considered.

FOR THE COMMANDING OFFICER:

Incl: s/s

TEL: Karleruhe 776

RICHARD W. SECOR

Capt Inf

Operations Officer

WD QMC FORM 1042 (Rev. 1 Apr. 1945)		REPORT OF	INTERMEN	т ;	DATE	OF REPORT	<del></del>
(Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		(AR 30-1810 aı			12	June 1	.947
Imprint Identification		Section 1.—IDENTIFICATION.					
DO NOT TY	(PE	NAME (Last, first, middle initial)			SERIA	L No.	· · · · · · · · · · · · · · · · · · ·
		Unknown X - 54	.50			Unknown	·
<del> </del>	1	GRADE	ORGANIZATION		BRAN	CH OF SERVI	CE
	0)	Unknown	U	nknown		A.G.F	•
		RACE	RELIGION	:	IF OTHER TH	IAN U.S. DEA	D, GIVE
		Unknown	l į	nkown			•
PLACE OF DEATH Hurtg	en Forest	CAUSE OF DEATH	<u>-</u>	· LALO III.	DATE	OF DEATH	Est
district #88, G		B,T,B, Art	illerv fi	.Te		Novembe	
EMERGENCY ADDRESSEE (No		1	777613	, 16	1	HO V SIMO	,
		· · · · · · · · · · · · · · · · · · ·			•		•
		Unk <b>n</b> o	· · · · · · · · · · · · · · · · · · ·	4			
IDENTIFICATION TAGS FOUN (1, 2, or none)	ID ON BODY	IF NO TAGS FOUND ON BODY, I	DESCRIBE MEANS (	OF IDENTIFICATION (1)	f unidentified, fi	ll in section S	on reverse)
	one						
WERE SUBSTITUTE TAGS PRO			•				
•	41					- ,	•
THE PERCONAL EFFECTS FOL	Yes	DISPOSITION OF SAME	· · · · · · · · · · · · · · · · · · ·				·
LIST PERSONAL EFFECTS FOR	AND ON BODT WHO	DISPOSITION OF SAME					
1							
		none					• •
				* . •		•	٠.
Section 2.—BURIAL. If off	her than in establ	lished cemetery, furnish sketch	h and map coord	inates on reverse.			
NAME, NUMBER, COORDINAT	ES, AND LOCATION	OF CEMETERY					
u S Milit	owr Cemeter	ry Neuville en Con	droz Bel	oium (VK -	390.187	j	
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or no		TYPE OF GRAVE	PLOT No.	ROW No.	GRAVE No.
				Temp.wooden			
12 June 1947	1500	Casket		cross	W	12	294
WAS THIS A REBURIAL? (Yes of no)		NDICATE NAME, NUMBER, COORD		_			CONTENO
no	# 88, Gen		<u></u>		PLOT No.	ROW No.	GRAVE No.
TYPE OF RELIGIOUS CEREMONY	1	ting burial rites s Rusher	IF IDENTIFICATI CONTAINERS B	ON TAGS NOT USED. URIED WITH BODY	DESCRIBE IDE	NTIFICATION	DATA AND
Joint P,C & H	_	k Lepchivcher		•			
IDENTIFICATION TAG BURIED BODY (Yes or no)	WITH   IDENT	IFICATION TAG ATTACHED TO KER (Yes or no)	*	Panart of	P		
No		GRS .	·	Report of	Puriar	<u> </u>	-
BODY BURIED ON DECEASED	LEFT, NAME (Last,	first, middle initial)	RANK	SERIAL No.	ORGANIZATIO	N GRAVI	E No.
Unknown 2	X-5547		Unk	Unk	: Unk	29	95
BODY BURIED ON DECEASED	RIGHT, NAME (Las	t, first, middle initial)	RANK	SERIAL No.	ORGANIZATIO	N GRAV	E No.
Unknown A	K-5500		Unk	Unk	Unk	29	93
SIGNATURE OF PERSON PREP	ARING REPORT	. 2	SIGNATURE OF G	RS OFFICER VERIFYIN	G REPORT		
ERNEST C. GADI	//	4410		G, JUHNSON	Radia	14/	Duran.
CWO USA C.1.		w/stave	lst. Lt.		Kayma	AN.KO	TUNE GOLDEN
DIZIKIRALIAN OF KELAKI	: Signed origina	al for U.S. and allied dead, sig	ned original and	one copy for enemy	dead, to the A	/uartermasi	er General

### RESTRICTED

	Section 3.—	IDENTIFIED	REMAINS			<u>:</u>				
LEFT LITTLE FINGER	INSTRUCTIONS:  (a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks.  (b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be									
RR	accomplishe	ed if one or r	nore finge	rprints ar	i.	s with diagram below. I looth chart will not be				
LEFT RING FINGER	HEIGHT Est	WEIGHT	COLOR OF	EYES	COLOR O	PF HAIR	BIRTHMARKS, SCA	RS, OR TATTOOS		
,	613/8 WEAPON AND	Utd SERIAL NO.	Ute	LAUNDRY	MARKS	nfq		Utd BURIED OR FOUND		
<u>*</u>						i		orest, distri	i ct.	
ODLE L		one			none		# 88 , G	ermany		
LEFT LEFT FINGER	OTHER IDENT	IFICATION CLU	ies <b>Ren</b>	nants	of E.I	W. ".Mean	s of Ident	ification car	rd#	
			ins, we	re exa	mined	by chemi	cal Labora	tory with neg	ga-	
	tive res	ults, Pi	noto La	borato	ry Ex	amination	revealed. and corner	(1) Identifi	ica-	
rex I	oron car	? 7368	in re	verse	belie	ved to be	transposi	tion of last		
LEFT	FILLINGS		○	VER FILLI	NG		11			
	İ			LO FILLIN			3,000	$\hat{O}_{\sim}^3$	1	
				٠		4	-YOUN'	JA 04		
THUMB	CAVITIES		0	-CAVITY		5 5	HOBEED	/RSQ 5,		
88 H			i i i	DECAYE	.U	7	SAN STIER	ABB.		
			1/2	<u> </u>		8	AN .	100 S		
	MISSING	TEETH	700	TH MISSIN	G		V		:	
RIGHT ТНИМВ		الم				DIAGRAM F	REPRESENTS THE	MOUTH WIDE OPEN		
MB		<i>U</i>	אליא וש	` <u> </u>		(67)	<i>T</i> >	5000.		
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<del>z</del> ,		-7	GO CO	LD CROW	•	15	LOWER	SAN 14		
DEX F	BRIDGE W	nev ·	VUX.		<u>·</u> _	14 \	200 Janes			
RIGHT INDEX FINGER	BRIDGE W	۸۳۸ مر		GOLD BE	IDGE	· 13	CO STATE	<b>1012</b>		
		· (3)		<b>•</b>		• 1.		$\mathcal{O}$	·	
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RIGH DDLE F							with case	LISHED CEMETERY	<b>.</b>	
RIGHT RIGHT MIDDLE FINGER	Remains	were for	und on	groun	d in b	urtgen F	orest, Germ		i	
							on Point,			
	margrate case is			Unkno		MOTITAG :	racurriatue	g clues, this		
RIGHT RING FINGER					*					
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			check l	list o	Unkn	owns and	form 1A, To	oth chart		
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RIGHT LITTLE FINGER							ed: 25 pou			
T TINGER		•		<i></i>	-	· ·		•	- 1	