

Interred 25 February 1949  
D-12-12-USMC. St Laurent

DISINTERMENT DIRECTIVE

C. N. Hiemstra  
C. H. HIEMSTRA  
1/LT Inf, interring Officer

SECTION A - NAME AND BURIAL LOCATION OF DECEASED	DIRECTIVE NUMBER 3508 00000	DATE 15   11   47 DAY   MONTH   YEAR
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NAME UNKNOWN X	SERIAL NUMBER -000144	RANK Q	ARM Q	DATE OF DEATH DAY   MONTH   YEAR 3505   80 CODE   DIST. PT.
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CEMETERY BLOSVILLE - CARENTAN	DISPOSITION OF REMAINS 0
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LOT Y	ROW 5	GRAVE 84	COUNTRY FRANCE	CAUSE OF DEATH 6
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SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE ST. LAURENT, FRANCE (BY ADMINISTRATIVE ORDER)	NAME AND ADDRESS OF NEXT OF KIN
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SECTION C - DISINTERMENT AND IDENTIFICATION

NAME UNKNOWN X	SERIAL NUMBER -000144	RANK Utd	DATE OF DEATH Utd	DATE DISTINTERRED 29 Jan 48
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IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION UNKNOWN	RELIGION Utd	IDENTIFICATION VERIFIED BY John H. Clark, GMLT, USMC
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SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Blanket - Uniform remnants.	CONDITION OF REMAINS Advanced decomposition
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OTHER MEANS OF IDENTIFICATION None	MINOR DISCREPANCIES None
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REPAIRS  
 RECORDS BRANCH  
 MAY 17 2 27 PM '49  
 FEDERAL BUREAU OF INVESTIGATION

REMAINS PREPARED AND PLACED IN CASKET DATE 10 Feb 48 BY Robert R. Johnson	EMBALMER (Signature) Robert R. Johnson
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CASKET SEALED BY Robert R. Johnson	SHIPPING ADDRESS VERIFIED BY Charles J. Missigman
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CASKET BOXED AND MARKED DATE 10 Feb 48 BY Robert Kreil	SIGNATURE OF GRS INSPECTOR Charles J. Missigman
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I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.

FILE

Charles J. Missigman  
Charles J. Missigman  
SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report GRC Form 1194a for major discrepancies.

REGISTRATION  
BRANCH  
MEM. DIV.

*[Handwritten initials]*

# RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM <b>USMC: Blossville</b>		TO <b>Casketing Point B - St Laurent</b>	
KIND OF CONVEYANCE <b>Truck</b>		NAME OF CONVOYER <b>Pvt Robert C. Spagh</b>	
SIGNATURE OF SHIPPER <i>Capt Randall</i> <b>Jim F. Randall, Capt QMC</b>	DATE <b>10 Feb 48</b>	SIGNATURE OF RECEIVER <i>D.A. Macke</i> <b>D.A. Macke, Sgt</b>	DATE <b>10 Feb 48</b>

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

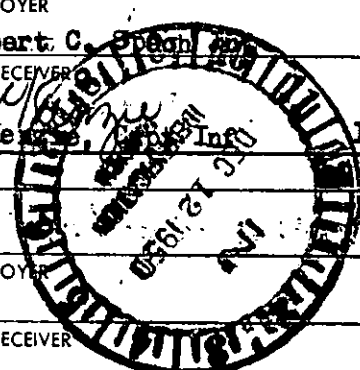
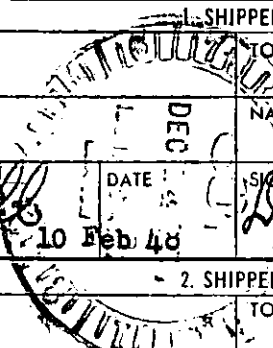
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

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



HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

13 Dec., 1948  
Date

SUBJECT: Unidentifiable Remains

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

1. The records pertaining to Unknown X- 144, Plot Y,  
Row 5, Grave 84, USMC Blosville France have been  
reviewed and it is the opinion of this office that insufficient evidence  
is available to establish the identity of this deceased, and that these  
remains should be classified as unidentifiable.

2. Report of Reprocessing was forwarded to your office by  
letter of transmittal No. 2105, dated 3 Dec., 1946. No  
further information is available.

FOR THE COMMANDING GENERAL:

/s/ George L. Freeman  
/t/ 1st Lt QMC  
Actg Asst Adj Gen

Received 31 DEC 1948 QMG  
Not identifiable from  
information presently  
available

NFT  
File 12/31/48  
M. J. Jeleni 32.

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FOR THE COMMANDING GENERAL :

*George L. Freeman*  
GEORGE L. FREEMAN  
1st Lt            Q.C.  
Actg Asst Adj Gen

Received 31 DEC 1948 OQMG  
Not identifiable from  
information presently  
available

Incl #12

IDENTIFICATION SECTION  
REPATRIATION RECORDS BRANCH  
MEMORIAL DIVISION

C  
CATEGORY III CASE  
NO CLUES  
IDENTIFICATION IMPOSSIBLE  
AT PRESENT TIME *ADJ*

RESTRICTED

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

135

2.P.7/10  
7 October 1944.  
Date

UNKNOWN X-144		Unk.	Unk.
Last Name	First	Initial	Serial No.
Unk.		Unk.	
Utah Beach, France		Unk.	KIA
Place of Death	Date of Death	Organization	Cause of Death
1015 6 October 1944.	Blosville, France		
Time and Date of Burial	Name of Cemetery	Name or Coordinates of Location	
84	Y	Cross	
Grave Number	Row Number	Plot Number	Type of Marker

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

If No Identification Tags  
How were remains identified?

Complete decomposition of body. Partial skeleton only.

What means of identification were buried with the body?

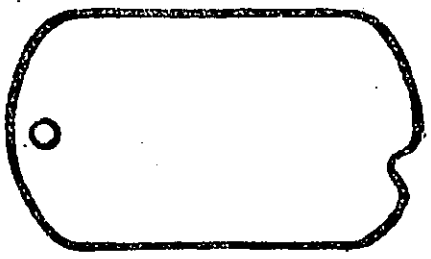
G.R. Form No. 1.

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

Who is buried on:

Deceased's Right:	Anglin, L.	38432037			85
	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	Unknown X-143				83
	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

87

Signature of Officer or other person reporting burial  
*Harshel B. Pugh*  
 HARSHEL B. PUGH Verified by G.R.S. Officer *650*  
 2nd Lt., WMC

# IF DECEASED UNIDENTIFIED

Take Fingerprints of Both Hands. If unable to obtain a complete set of Fingerprints, Take Those You Can, and fill in the following:

Height:	Laundry Marks:
Weight:	Number of Rifle:
Color of Eyes:	Wear Glasses?
Color of Hair:	Is Tooth Chart Attached?
Race:	

(If possible, have medical personnel take a tooth chart, if no medical personnel present, fill in a tooth chart below.) In space below, locate, and describe any scars, birthmarks, moles, deformities, etc.

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

Left Hand

4  
3  
2  
1

Thumb

Right Hand

4  
3  
2  
Thumb

## TOOTH CHART

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

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

Characteristics:

Other Data:

If this is an Isolated Burial, make a Sketch of the Location, oriented with Permanent Landmarks. If more space needed attach separate sheet. Indicate North.

# CHECK LIST OF UNKNOWNNS

X-144

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

Unknown X-144  
Cemetery **Blosville, France**  
Plot **Y** Row **5** Grave **84**

**Reprocessed**

1. ~~At~~ ~~recovered~~ ~~at~~ ~~cemetery~~ **30 Oct. 1946**  
(hour) (date)

2. Place of death \_\_\_\_\_  
(name of closest town) (coordinates and letter Prefex, maps)

(Sheet, scale and serials used)

3. Remains ~~recovered~~ ~~and~~ ~~disinterred~~ by **Subordinate Identification Point**  
(name and organization)

4. Evacuated to Cemetery by **Carentan, France**  
(name and organization)

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

Clothing . . . . . Indicate unusual markings  
Markings . . . . . Sizes . . . . . Color wear, tear, repairs, etc.

Item \_\_\_\_\_

\*Headgear . . . . . **none**  
(type)

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**

Leggins, Wool **none** (Note unusual lacing)

Socks, Cotton **none**

\*Shoes **none** (type)

Overshoes **none**

Web Equipment **none** (Type)

(Other item) **none**

(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  
**UTD**

8. Description of Remains :  
Age **UTD** Est Height **5'9"** 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 **head missing**

Complexion **UTD**  
(light, med. dark, clear, pimples, poeks, freckles)

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

Hair **UTD**  
(color, length, quantity, curly, wavy, straight, whorls, or definite parting).

**HEAD MISSING**

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

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

Goatee **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 **UTD** (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 **UTD** (hat band)

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

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

(extent and quantity of hair)

Hands **UTD**

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

(Unusual characteristics of fingernails)

Chest **UTD** (size of nipples, color, quantity & extent of hair, large, small normal)

Back **UTD** (quantity & extent of hair) Aist **UTD** (size of navel, appendectomy, amount)

(quantity & color of hair)

Circumcision **UTD** (yes-no) Pubic hair **UTD** (color)

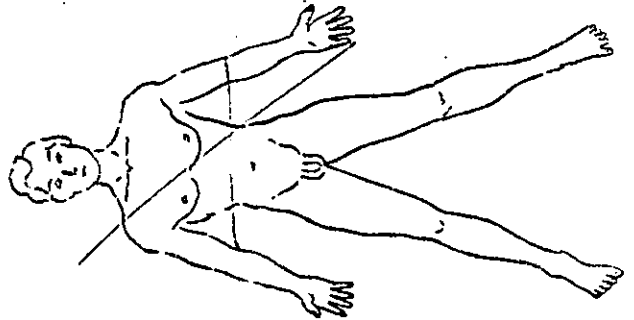
Hernioplasty **UTD** (yes-no; location)

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 Interment no (yes-no)

If not, explain hands missing

11. Has tooth chart been prepared no (yes-no) If not, explain head missing

12. Remarks : **Remains recovered in mattress cover; burial bottle, found states. "Killed - UTAH BEACH, France, KIA 1015-6 Oct. 1944 complete decomposition of body. Partial skeleton only" Est. weight of remains now 35 lbs. Nothing found to warrant Chemical Lab. Examination.**

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.

*Robert A. Salvador*

ROBERT A. SALVADOR *k.h.*  
Officer's Name

**Capt. Inf.**  
Rank Service

**Central Identification Point.**  
Organization

Blosville, France  
Plot Y, Row 5, Grave 84

