

Interred 26 February 1949  
 D-22-35- USMC. St Laurent  
**C.H. Hiemstra**  
 C.H. HIEMSTRA  
 1/LT Inf, interring Officer

**DISINTERMENT DIRECTIVE**

SECTION A -  
 NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER  
 3508 00000

DATE  
 15 11 47  
 DAY MONTH YEAR

NAME		SERIAL NUMBER	RANK	ARM	DATE OF DEATH
UNKNOWN		X-000160		0	
CEMETERY					DISPOSITION OF REMAINS
BLOSVILLE - CARENTAN					0 3505 80
DAY	MONTH	YEAR	CAUSE OF DEATH		
			6		

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
ST. LAURENT, FRANCE  (BY ADMINISTRATIVE ORDER)	

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED
UNKNOWN	X-000160	Utd	Utd	29 Jan 48
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION UNKNOWN	RELIGION Utd	IDENTIFICATION VERIFIED BY John H. Clark, 2 Lt QMC	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Mattress cover	CONDITION OF REMAINS Advanced decomposition
OTHER MEANS OF IDENTIFICATION Gr: form #1 with remains.	
MINOR DISCREPANCIES / None	

REPATRIATION RECORDS BRANCH  
 MAY 17 2 20 PM '49  
 MORIAL DIVISION

REMAINS PREPARED AND PLACED IN CASKET	
DATE 10 Feb 48	BY Robert R. Johnson
CASKET SEALED BY Robert R. Johnson	EMBALMER (Signature) <i>Robert R. Johnson</i>
CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
DATE 10 Feb 48 BY Robert Kreil	Charles J. Missigman

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

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

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

10 JUN 1949  
 REPATRIATION  
 BRANCH  
 MEM. DIV.

*VWV*

## RECORD OF CUSTODIAL TRANSFER

### 1. SHIPPED

FROM <b>USMC: Blosville</b>		TO <b>Casketing Point B - St. Laurent</b>	
KIND OF CONVEYANCE <b>Truck</b>		NAME OF CONVOYER <b>Pvt Robert C. Spach Jr.</b>	
SIGNATURE OF SHIPPER <i>Jim F. Randall</i> <b>Jim F. Randall, Capt QMC</b>	DATE <b>10 Feb 48</b>	SIGNATURE OF RECEIVER <i>D.A. Mackenzie</i> <b>D.A. Mackenzie, Capt. Inf.</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 <b>(OR ADMINISTRATIVE OFFICE)</b>		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <b>CLYDE</b>	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- <sup>43</sup> 160, Plot Y,  
Row 8, Grave 148, 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. 2116, dated 16 Dec., 1946. No  
further information is available.

FOR THE COMMANDING GENERAL:

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

3 JAN 1949  
Received  
Not identifiable from  
information presently  
available  
QMG

NAT  
File 1/3/49  
M. Blaine  
Ident. Br.

DISINTERMENT DIRECTIVE

6

293 Unk. France X-160 (Blosville)

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER 3508 00000

DATE 13 11 47 DAY MONTH YEAR

NAME UNKNOWN - 000160

SERIAL NUMBER RANK ARM DATE OF DEATH DAY MONTH YEAR

CEMETERY BLOSVILLE - CARENTAN

DISPOSITION OF REMAINS 3505 00 CODE DIST. PT.

PLOT ROW GRAVE COUNTRY Y 146 FRANCE

CAUSE OF DEATH 6

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

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER RANK DATE OF DEATH DATE DISTINTERRED

IDENTIFICATION TAG ON ORGANIZATION RELIGION IDENTIFICATION VERIFIED BY UNKNOWN NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

FOR DISCREPANCIES 1

REMAINS PREPARED AND PLACED IN CASKET

SEALED BY BY EMBALMER (Signature)

INDEXED AND MARKED BY SHIPPING ADDRESS VERIFIED 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 GRS INSPECTOR

Discrepancy Report QMC Form 1194a for major discrepancies.

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

RRE 293

13 Dec., 1948

(Date)

SUBJECT: Unidentifiable Remains.

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

1. The records pertaining to Unknown X - 160, Plot Y  
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reviewed and it is the opinion of this office that insufficient  
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and that these remains should be classified as unidentifiable.

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by letter of transmittal No. 2116, dated 16 Dec., 1946.  
No further information is available.

FOR THE COMMANDING GENERAL:

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

Received 3 JAN 1949  
Not identifiable from  
information presently  
available QQMG

Incl # 20

RESTRICTED  
REPORT OF BURIAL  
TM 10-630 AND AR 30-1815

23028

10 OCT. 1944  
Date

Unknown X - 160					
Last Name	First	Initial	Rank	Serial No.	
Utah Beach, France			Unknown	KIA	
Place of Death		Date of Death	Cause of Death		
9 Oct. 1944		Blosville cemetery	Blosville, France		
Time and Date of Burial		Name of Cemetery	Name or Coordinates of Location		
148	8	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?

What means of identification were buried with the body?

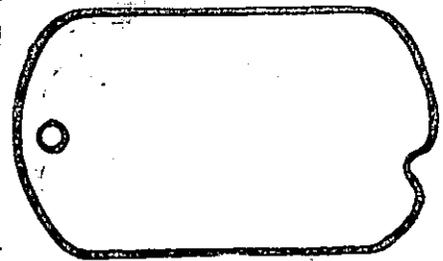
Embossed plate.

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

Who is buried on:

Deceased's Right:	Unknown X - 161				149
	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	Unknown X - 159				147
	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:

87

*J. L. Dupont*  
Signature of Officer or other person reporting burial

Verified by G.R.S. Officer

# 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

3

2

1

Thumb

4

3

2

1

Thumb

Right Hand

## TOOTH CHART

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

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.





Belt, Web **none**

Drawers, Wool **none**

Drawers, Cotton **none**

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

Socks, Cotton **none**

\*Shoes (type) **none**

Overshoes **none**

Web Equipment (Type) **none**

(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** Height <sup>Est.</sup> **5'4 1/2"** 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 **utd**  
(color, length, quantity, curly, wavy, straight, whorls, or definite parting).

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

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

Goatee utd (light, color, extent)

Eyes utd (color, 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 (proninent, receding, pointed, dimple, double)

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

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

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

utd (extent and quantity of hair)

Hands utd

Fingers utd (short, 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, largo, small normal)

Back utd (quantity & extent of hair) aist utd (size of navel, appendectomy, amount)

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

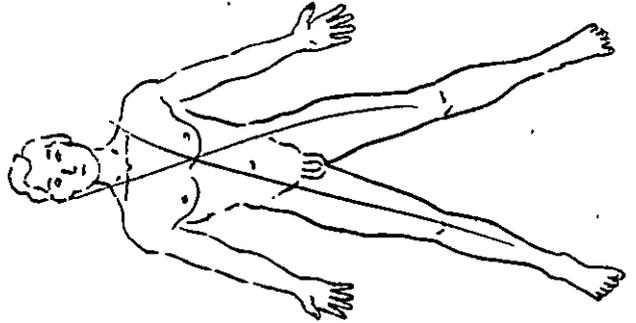
Hernioplasty utd (yes-no; location)

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

Feet utd Toes utd  
(size, corns, callouses, flat) (slender, straight, crooked, overlap)

Evidence of healed factures none  
(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 If not, explain  
(yes-no)

head missing

12. Remarks : Remains recovered wrapped in mattress cover. No burial bottle found.

Estimated weight of remains recovered 85 lbs. Body in last stage of decomposition.

Nothing found to warrant chemical laboratory 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 RNB.

Officer's Name

**Captain Inf.**

Rank Service

**Central Identification Point**  
Organization

X-160.

Blossville Cemetery  
Plot Y Row 8 Grave 148

