

7897 GRAVES DETACHMENT

APR 75

*W/S w/b* Blossville X-49

*ms*

Attached hereto are case papers for an approved unidentifiable case which are considered to be of investigative importance. Records of this headquarters indicate these case papers were not previously forwarded to OQ for:

UNKNOWN X-49 Blossville

(POC) ST LAURENT

WILLIAMS Clifford & J. 38019249

12.7

Blountville M-5-96

Blountville, Tenn.

BRITTON, Robert W. 1144. 6. 6. 211

507 SPANISH + N.Y.

Blountville M-5-94.

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

21-6-44  
17 July 1944  
Date

<u>UNKNOWN X - 49</u> <small>Last Name</small>	<u>                    </u> <small>First</small>	<u>                    </u> <small>Initial</small>	<u>Unknown</u> <small>Rank</small>	<u>Unknown</u> <small>Serial No</small>
<u>Unknown</u> <small>Unit</small>	<u>                    </u> <small>Organization</small>		<u>                    </u> <small>Organization</small>	
<u>France</u> <small>Place of Death</small>	<u>Unknown</u> <small>Place of Death</small>	<u>KIA</u> <small>Cause of Death</small>		
<u>13 July 1944</u> <small>Time and Date of Burial</small>	<u>Biosville</u> <small>Name of Cemetery</small>	<u>France</u> <small>Name or Coordinates of Location</small>		
<u>95</u> <small>Grave Number</small>	<u>5</u> <small>Row Number</small>	<u>11</u> <small>Plot Number</small>	<u>Cross</u> <small>Type of Marker</small>	

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

If No Identification Tags  
How were remains identified?

**BURNED BEYOND RECOGNITION**

What means of identification were buried with the body?

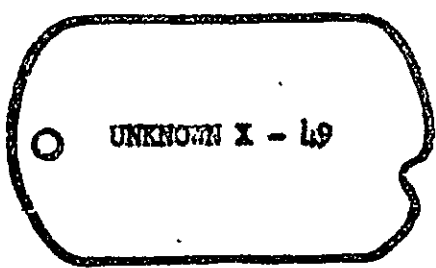
**GRS FORM # 1**

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

Who is buried on:

Deceased's Right:	<u>William Clifford</u> <small>Name</small>	<u>38019249</u> <small>Serial No</small>	<u>Unknown</u> <small>Rank</small>	<u>Unknown</u> <small>Organization</small>	<u>96</u> <small>Grave No.</small>
Deceased's Left:	<u>Britton, R. W.</u> <small>Name</small>	<u>                    </u> <small>Serial No</small>	<u>Unknown</u> <small>Rank</small>	<u>Unknown</u> <small>Organization</small>	<u>94</u> <small>Grave No.</small>

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 Unknown Name

Address

Religion Unknown

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

NONE

9AK1-5-152  
12 AUG 1944  
HQ. SOL. 22/9/43 380M/8/15219

Signature of Officer or other person reporting burial  
F. A. GRSULICH  
Capt., GIC

Verified by GRS Officer

1183  
9-1-44  
16/11/44  
H. Winter

**D U P L I C A T E   C O P Y**

15  
12  
11  
10  
9  
8  
7  
6  
5  
4  
3  
2  
1

Interred 5 April 48  
A-17-17-UAMC 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 <b>3508 00000</b>	DATE <b>15 11 47</b> DAY MONTH YEAR	
CEMETERY <b>BLOSVILLE - CARENTAN</b>		SERIAL NUMBER <b>UNKNOWN X-000049</b>	RANK	ARM <b>0</b>
		DATE OF DEATH DAY MONTH YEAR <b>3505 80</b> CODE DIST PT		
PLOT <b>M</b>	ROW <b>5</b>	GRAVE <b>95</b>	COUNTRY <b>FRANCE</b>	
CAUSE OF DEATH <b>6</b>				

**SECTION B - CONSIGNEE AND NEXT OF KIN**

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

NAME <b>UNKNOWN</b>	SERIAL NUMBER <b>X-000049</b>	RANK <b>UNK</b>	DATE OF DEATH <b>UNK</b>	DATE DISTINTERRED <b>13 FEB 48</b>
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION <b>USAGF</b>	RELIGION <b>UNK</b>	IDENTIFICATION VERIFIED BY <b>T.C.MURRAY, CAPT, QMC.</b> NAME AND TITLE	

**SECTION D - PREPARATION OF REMAINS FOR SHIPMENT**

NATURE OF BURIAL <b>Mattress cover, uniform</b>	CONDITION OF REMAINS <b>Advanced decomposition</b>
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OTHER MEANS OF IDENTIFICATION  
**Form 1042 found on remains gives name as UNK X-49**

**FILE**

MINOR DISCREPANCIES *1*  
**None**

**30 JUN 1948**

REMAINS PREPARED AND PLACED IN CASKET  
DATE **12 MAR 48** BY **Robert R. Johnson**

CASKET SEALED BY <b>Robert R. Johnson</b>	EMBALMER (Signature) <i>Robert R. Johnson</i>
--	--

CASKET BOXED AND MARKED DATE <b>19 MAR 48</b> BY <b>Michael Yaroslowski</b>	SHIPPING ADDRESS VERIFIED BY <i>Michael Yaroslowski</i> <b>Michael Yaroslowski</b>
--	--

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

*[Signature]*

*[Signature]*  
**D.A. MACKENZIE, CAPT., INF.**  
SIGNATURE OF GRS INSPECTOR

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

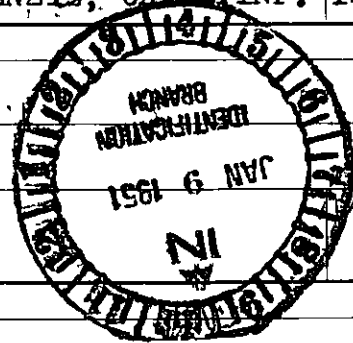
## RECORD OF CUSTODIAL TRANSFER

### 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. Spach</b>	
SIGNATURE OF SHIPPER <i>W. T. Dailey</i> <b>W.T. DAILEY, CAPT., QMC.</b>	DATE <b>1MSR48</b>	SIGNATURE OF RECEIVER <i>D. A. Mackenzie</i> <b>D.A. MACKENZIE, CAPT. INF.</b>	DATE <b>1MAR48</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

28 February 1949  
 Date

SUBJECT: Unidentifiable Remains

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

*293*

1. The records pertaining to Unknown X- 49, Plot M, Row 5, Grave 95, 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 December, 1946. No further information is available.

~~XXXXXXXXXXXXXXXXXXXXXXXXXXXX~~  
 FOR THE COMMANDING GENERAL:

Case reviewed by the undersigned Members of the Board of Review:

/s/  
t/

/s/ Capt Stanley C. Tyrrell, O-1304296 Inf  
 /s/ 1st Lt Edward E. Stout, O-1594512 CE  
 /s/ 1st Lt Ernest J. Oglesby, O-449004 Cav.

Received 22 MAR 1949  
 Unidentifiable from OQMG  
 Information presently available

*M.H. 2/23/49  
 G. Reuber  
 General B-1*

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMISSION  
EUROPEAN AREA  
APO 58 US ARMY

ARE 293

28. February 1949  
(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

The records pertaining to Unknown X- 49, Plot M,  
Row 5, Grave 95, US C Blosville, France,  
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.

Report of reprocessing of remains was forwarded to your Office  
by Transmittal Ltr. No. 2105, dated 3 December 1946

Case reviewed by undersigned members of the Board of Review:

*Stanley C. Terrell*  
-----  
Capt. Jack C. H. YES, O-1577297 OIC Capt. Stanley C. TERRELL, O-1304296 Inf

*Edward E. Stout*  
-----  
Capt. Edward F. PRICH, Jr. O-1588236 OIC 1/Lt. Edward E. STOUT, O-1594512 CE

*Ernest J. Glesby*  
-----  
1/Lt Ernest J. GLESBY, O-449004 COV

Received 21 MAR 1949 OQMG

of file from  
on presently  
available

Incl #1

# REPORT OF BURIAL

TM 10-630 AND AR 30-1815

218  
17 July 1944  
Date

UNKNOWN X - 49  
Last Name                      First                      Initial                      Rank                      Organization

Unknown                      Unknown                      Unknown                      Unknown                      82nd A/B Div

France  
Place of Death                      Unknown  
Date of Death                      13 July 1944 1130  
Time and Date of Burial                      Blosville  
Name of Cemetery                      II  
Plot Number

95                      5  
Grave Number                      Row Number

France  
Cause of Death                      KIA  
Name of Coordinates of Location                      France  
Cross  
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?

BURIED BEYOND RECOGNITION

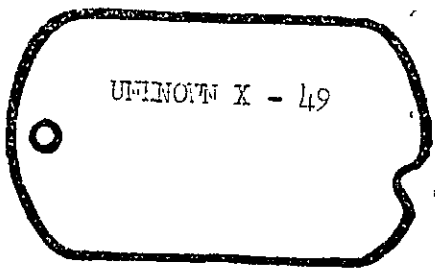
What means of identification were buried with the body?

GRS FORM # 1

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

Who is buried on.	Name	Serial No	Rank	Organization	Grave No.
Deceased's Right:	William, Clifford	38019249	Unknown	Unknown	96
Deceased's Left:	Britton, R. W.	Unknown	Unknown	Unknown	94

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 Unknown  
Name

Address

Religion Unknown

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

NONE

87

1183

Signature of Officer or other person reporting burial

F. A. GREULICH  
Capt., QIC  
Verified by GRS Officer

91K 105-154



AGRC  
FORM No 11  
Revised 5 January 1946

# CHECK LIST OF UNKNOWNNS

(to be completely filled out and attached to each copy of Report of Interment  
WD QMC Form 1012)

Unknown X -49  
Cemetery BLOSVILLE (FRANCE)  
Plot M Row 5 Grave 95

- 1 ~~Reinterred at cemetery~~ **Reprocessed October 29, 1946**  
(hour) (date)
- 2 Place of death \_\_\_\_\_  
(name of closest town) (coordinates and letter Prefix maps)
- 3 Remains ~~recovered at~~ disinterred by SUB-Identification Point, CAVENTAN, France  
(name and organization)
- 4 Evacuated to Cemetery by \_\_\_\_\_  
(name and organization)
- 5 **Description of clothing and equipment : (if clothes do not fit, obtain size from body measurements).**

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

- |                    |                      |
|--------------------|----------------------|
| Item               |                      |
| *Headgear          | none found<br>(type) |
| Raincoat           | none found           |
| Overcoat           | none found           |
| Jacket, Field      | none found           |
| Jacket, Combat     | none found           |
| Mackinaw           | none found           |
| Sweater            | none found           |
| Jacket, HBT        | none found           |
| *Shirt, Wool OD    | none found           |
| Undershirt, Wool   | none found           |
| Undershirt, Cotton | none found           |
| Trousers HBT       | none found           |
| *Trousers, Wool OD | none found           |

Belt, Web none found

Drawers, Wool none found

Drawers, Cotton none found

Leggins, Wool none found (Note unusual lacing)

Socks, ~~Cotton~~ wool, One Pair, Remnants of

\*Shoes (type) one pair, Service

Overshoes none found

Web Equipment (Type) none found

(Other item) none found

(Other item) none found

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

6 Chevrons or Insignia none found  
 (type & location - shirt, jacket, coat, helmet)

Shoulder Patch none found

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> 5'10 3/4" Weight UTD Description of wounds UTD

Bandages or dressings UTD Scars UTD  
 (length, width, location)

Tattoos UTD  
 (Number, location - illustrate on sep. pages)

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, jocks, freckles)

Build UTD  
 (large, fit, thin, muscular)

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

Hair **UTD**  
(baldness widow's peak distinctive cutting or other characteristics)

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

Goatee **UTD**  
(light color, extent)

Eyes **UTD** Eyebrows **UTD**  
(color setting shape) (color bushiness extent across nose)

Nose **UTD** Ears **UTD**  
(size, shape straight) (size set close to or far from head)

Mouth **UTD** Lips **UTD**  
(large medium small) (small large full)

Teeth **see Tooth Chart**  
(white size unevenness spacing noticeable crowns fillings, extract)

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

Jaw **UTD** Circumference of head in inches **19<sup>1</sup> inches**  
(large, small normal) (that band)

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

Shoulders **UTD** Arms **UTD**  
(broad, straight small rounded) (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 finger nails)

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

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

(quantity & color of hair) Circumcision **UTD** Pubic hair **UTD**  
(Yes no) (color)

Hernioplasty **UTD**  
(Yes-no location)

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

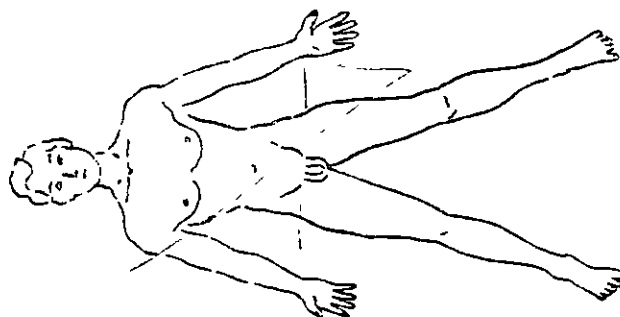
Feet **UTD**  
(size, corns, callous, flat)

Toes **UTD**  
(slender, straight, crooked, overlap)

Evidence of healed fractures **None found**  
(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 **too decomposed**

11 Has tooth chart been prepared **yes** If not explain **-**  
(yes-no)

12 Remarks **Estimated weight of remains recovered: 55 lbs.  
Body buried nude. Body wrapped in mattress-cover. Burial bottle  
with case - Case not fluoroscoped.  
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*

Officer's Name  
**ROBERT A. SALVADOR** *hch*

**Capt. Inf.**

Rank Service  
**Central Identification Point**

Organization

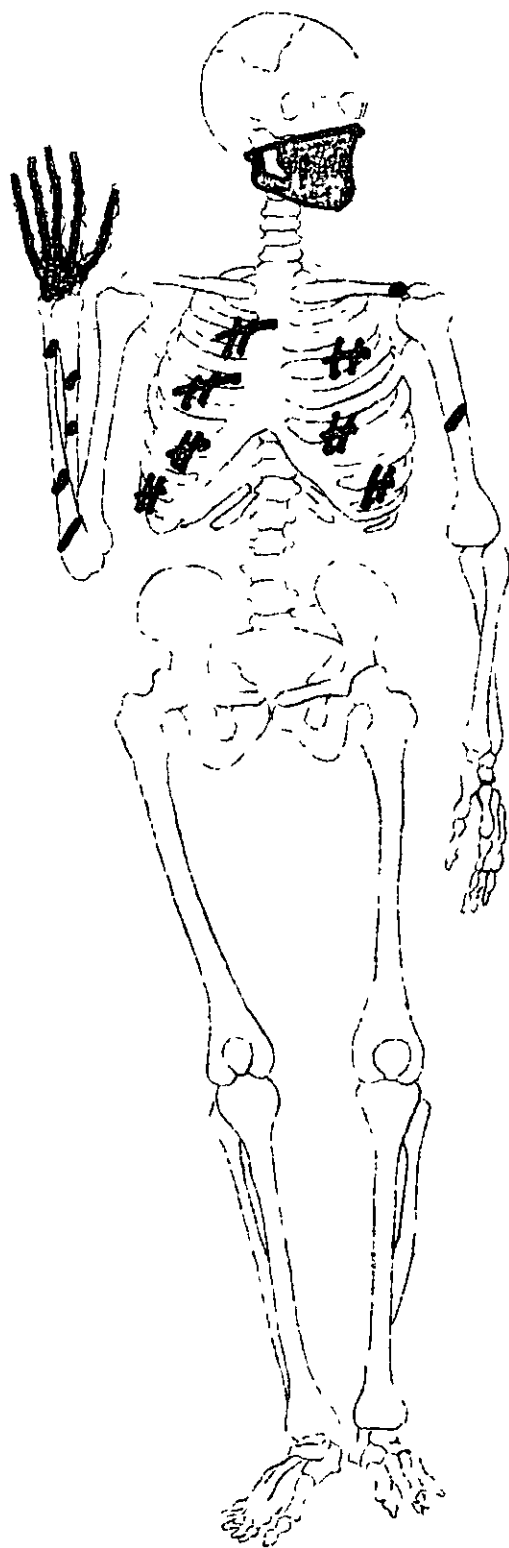
X 49

PLOT. 17

ROW. 5

Grave 95

BLOSVILLE



# TOOTH CHART

13 November 1946

Date

UNKNOWN X-49

BLOSVILLE (France)

Last Name PLOT No. : *M.*

Row No. : 5

GRAVE No. 95

Serial No.

Unit

Organization

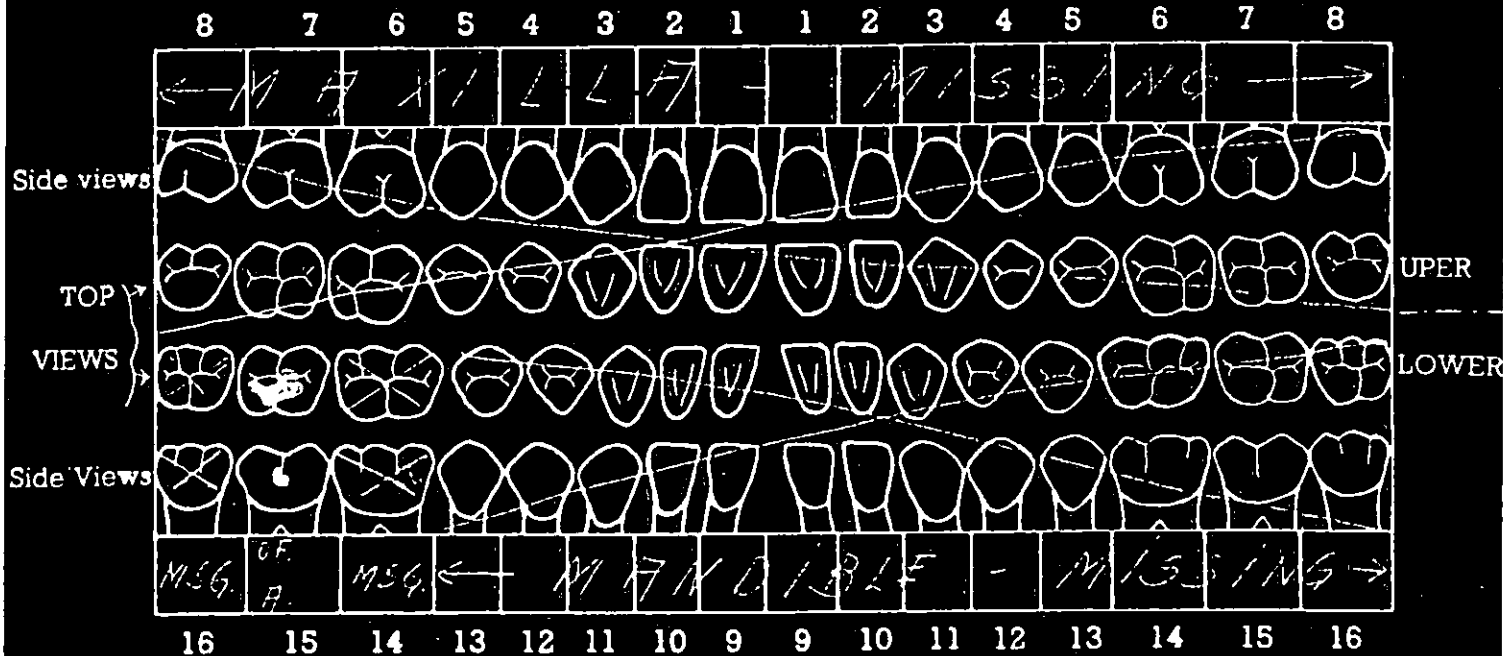
Place of Death

Date of Death

Cause of Death

Right

Left



SEE REMARKS

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.

*Lawrence M. Shaw, Jr.*  
 Signature of Officer or other person who prepared Tooth chart  
 ROBERT A. SALVADOR  
 Capt. Inf. C.I.P.  
 Verified by G. R. S. Officer

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



GROWNED 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

The whole maxilla is missing. The mandible is missing from R 12 thru to L 16. There is only one tooth present. This is rather small and a clean white color.