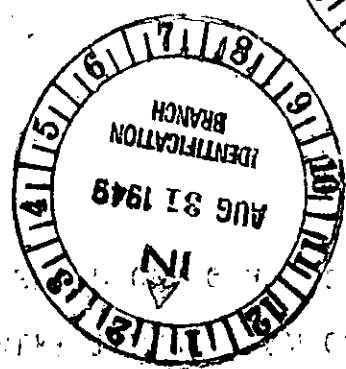
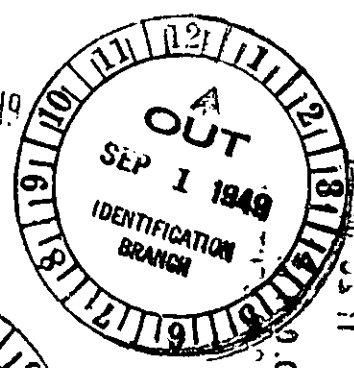


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Aug 31 12 51 PM '49
MEMORIAL DIVISION



Aug 31 11 50 AM '49

RECEIVED

Faint, mostly illegible typed text in the middle section of the page.

TO THE DIRECTOR

FROM THE MEMORIAL DIVISION

RE: [illegible]

DATE: [illegible]

BY: [illegible]

FOR: [illegible]

FILE NO: [illegible]

Handwritten notes and signatures in the lower right quadrant.

323

12121

0800

CGMC DEPT OF ARMY WASH DC

UNCLASSIFIED

CG AORC PARIS FRANCE

PRIORITY

X

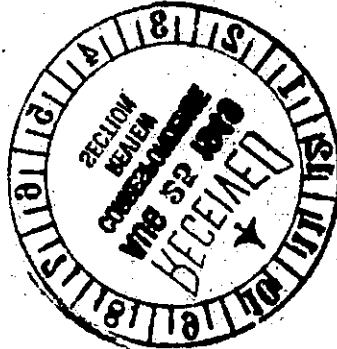
WCL 37449

FROM QMGT

UNIDENTIFIABLE CEMT FOR XRAY 114 ST LAURENT SHOWS PLAT ROGER ROW 6 REPEAT
ROW 6 GRAVE 133 PD REQUEST CLANIFICATION

ADMINSTR
Aug 25 11:59 AM '49
MEMORTEL & CAB SECTION
0.9. M.A.B.
1931

REB
THM



NEWBAKER
Lee: cam
Clements
REB UNCLASSIFIED

GRAVES

251300Z

QMGT CAPT BERRY EXT 72947
293 X-114 (ST LAURENT)

AUG 49

M. R. HOMER
1ST LT, QMC, MEM DIV

James R

me

CCMG DEPT OF ARMY WASH DC

UNCLASSIFIED

CG AQRC PARIS FRANCE

PRIORITY

X

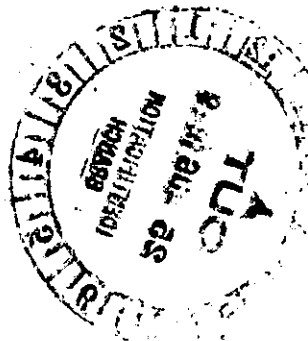
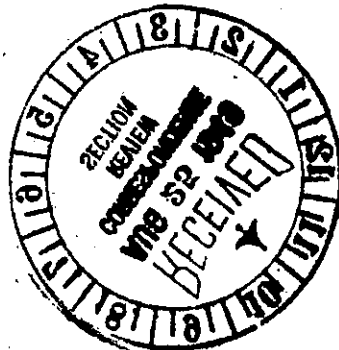
WCL 37449

FROM QMINT

UNIDENTIFIABLE CRT FOR XRAY 114 ST LAURENT SHOWS PLOT ROOER ROW 6 REPEAT
ROW 6 GRAVE 133 PD REQUEST CLARIFICATION

ADMINSR
SEARCH
Aug 25 - 11:59 AM '49
O. G. M. D.
HEADQUARTER & CAB SECTION
431

B
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G
THM



NEWBAKER
lee:cam
Clements
REB UNCLASSIFIED

GRAVES

251300Z
QMINT CAPT BERRY EXT 72947 AUG 49
293 X-114 (ST LAURENT)

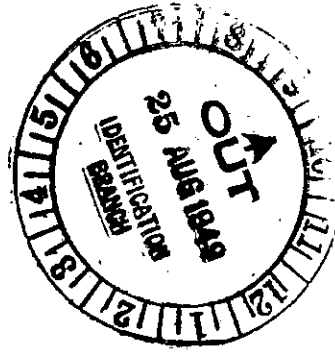
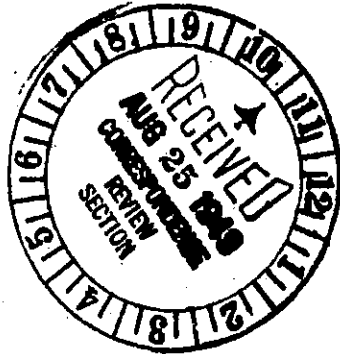
M. R. HOANER
1ST LT, QMC, MEM DIV

James R

me

POSTED

REC
CLEMENTE
1948:08



ep. MA 42 11 25 1948
 U.S. MAR. 1948
 IDENTIFICATION SECTION

1948

1948

Interred 8 December 1948

J-14-23-USMC St Laurent

DOUGLAS A. MAC KENZIE
Capt. Inf. Cemetery Superintendent

DISINTERMENT DIRECTIVE

Douglas MacKenzie

SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

3582 00000

DATE

10 09 47
DAY MONTH YEAR

NAME

UNKNOWN X-000114

SERIAL NUMBER

RANK

ARM

DATE OF DEATH

dg

DAY MONTH YEAR

CEMETERY

ST LAURENT BAVEUX

DISPOSITION OF REMAINS

3505 80
CODE DIST. PT.

PLOT ROW GRAVE COUNTRY

R 7 133 FRANCE

CAUSE OF DEATH

6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

ST. LAURENT, FRANCE

NAME AND ADDRESS OF NEXT OF KIN

(BY ADMINISTRATIVE ORDER)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME

Unident. X-1114

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISTINTERRED

29 September 1947

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

REMAINS
 MARKER

WALTER H. MAC GUIRE
CWO

NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

Fatigues

CONDITION OF REMAINS

Advanced decomposition

OTHER MEANS OF IDENTIFICATION

None.

MINOR DISCREPANCIES / Arm of service corrected-Authority 355 (Hq, AGRC)

None.

REMAINS PREPARED AND PLACED IN CASKET

DATE 15 October 1947

BY C. R. Tompkins

CASKET SEALED BY

C. R. Tompkins

EMBALMER (Signature)

C. R. Tompkins

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY

DATE 15 Oct 47 BY Henry B. Albert

JOHN W. SHARP, 1st Lt, Inf.

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

RECORDS
APR 1948
R O R E

John W. Sharp
JOHN W. SHARP, 1st Lt, Inf.

SIGNATURE OF GRS INSPECTOR

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

(NLN)

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 (BY ADMINISTRATIVE ORDER)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER ST. LAURENT, ERVANCE	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

17 Nov. 1948
Date

SUBJECT: Unidentifiable Remains

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

1. The records pertaining to ⁹³Unknown X-114, Plot R,
Row 6, Grave 133, USMC St. Laurent, 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. 2384, dated 6/8/47. No
further information is available.

FOR THE COMMANDING GENERAL:

/s/
/t/ George L. Freeman

Received 23 Nov. 1948 OOMG
Not identifiable from
information

FILE 23 NOV 1948
H An
M. Kallman
2d Br.
2d Sect.

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

17 NOV 1948

Date

SUBJECT : Unidentifiable Remains

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

- * ⁷
Row ~~X~~, Grave 133, USMC St. Laurent, France, Plot R 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. 2384, dated 6/8/47. No further information is available.

FOR THE COMMANDING GENERAL :

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

* PER RADIO AGRC 5734
DATED 30 AUG. 49

Incl. # 45

Received 23 NOV. 1948
Not identifiable from
information presently
available

293 Unk, 22925 France (St. Laurent)

AGRRE (St. Laurent R-7-133)

1st Ind.

FJG/CHS/mc

HEADQUARTERS, AMERICAN GRAVES REGISTRATION COMMAND, EUROPEAN THEATER AREA,
APO 887, U.S. ARMY. 1 March 1946.

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

1. Attention is invited to basic communication your headquarters dated 28 January 1946.

2. The cemetery map shows Unknown X-114 (St. Laurent) as being buried in Plot R, Row 7, Grave 133.

FOR THE COMMANDING GENERAL:

Paul L. McCullin
Major Gen.

Incl: n/c

for

F.J. GERACE
Lt. Col. QMC
Actg. Asst. Adjutant General.

21	22	23	24	1	2	3
20	- O U T -					
19						
18	- 4 MAR 1946					
17	930					
16	A C R					
15						

File
4-13-46
Sub Date
4-15-46

REGISTRATION AND
RECORDS BRANCH
MAR 25 2 23 PM '46
MEMORIAL DIVISION

RECEIVED
MAR 25 1946
U. S. A.
D. O. B. A.



ARMY SERVICE FORCES

OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.



IN REPLY REFER TO

SPQYG 293

Unknown 22925

(St. Laurent) France

28 January 1946

SUBJECT: Report of Burial

TO : Commanding General, American Graves Registration Service
European Theater Area, Versailles, France
APO 757, c/o Postmaster
New York, New York

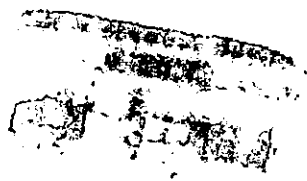


1. Reference is made to report of burial for Unknown X-114, St. Laurent #1, France, Plot R, Row ¹6, Grave 133.

2. In view of the fact that plot map indicates Row 6 ends with Grave 120, clarification of row numbers recorded on burial report is requested. Should this be in error, a corrected report of burial should be forwarded to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

ARTHUR S. ROSENGARD
2nd Lt., QMC
Assistant



JAN 20 3 38 PM '63

O. G. H. G.
MAIL & RECORDS BRANCH

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[Faint, illegible text]

[Faint, illegible text]

SFQYG 293
Unknown 22925
(St. Laurent) France

28 January 1946

SUBJECT: Report of Burial

TO : Commanding General, American Graves Registration Service
European Theater Area, Versailles, France
APO 757, c/o Postmaster
New York, New York

1. Reference is made to report of burial for Unknown X-114, St. Laurent #1, France, Plot R, Row 6, Grave 133.

2. In view of the fact that plot map indicates Row 6 ends with Grave 120, clarification of row numbers recorded on burial report is requested. Should this be in error, a corrected report of burial should be forwarded to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

mb

ARTHUR S. ROSLINGARD
2nd Lt., QMC
Assistant

6201
JH
JAN 20 3 33 PM '46
O. O. HAGI
MAIL & RECORDS DIVISION

GRAVES REGISTRATION SECTION
JAN 28 2 41 PM '46
MEMORIAL DIVISION

IDENTIFICATION CHECK LIST

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

Unknown X - 114
 Cemetery St. Laurent - France -
 Plot R Row 6 Grave 133

Date reprocessed: 1 July 1947.

1. ~~Unknown Cemetery~~ _____
 (Hour) (Date)
2. Place of death _____
 (Name of closest town) (Coordinates and letter Prefix, maps)

 (Sheet, scale and serials used)
3. Remains ~~interred~~ disinterred by Subordinate Identification Point Carentan,
 (Name and organization) France.
4. Evacuated to Cemetery by _____
 (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	<u>none</u>		
	(Type)		
Raincoat	<u>none</u>		
Overcoat	<u>none</u>		
Jacket, Field	<u>none</u>		
Jacket, Combat	<u>none</u>		
Mackinaw	<u>none</u>		
Sweater	<u>none</u>		
Jacket, HBT	<u>none</u>		
* Shirt, Wool OD	<u>none</u>		
Undershirt, Wool	<u>none</u>		
Undershirt, Cotton	<u>none</u>		
Trousers, HBT	<u>none</u>		
* Trousers, Wool OD	<u>none</u>		

Belt, web none

Drawers, wool none

Drawers, cotton none

Leggings, wool 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

Chevrons or Insignia none
(Type & location; shirt, jacket, coat, helmet)

Shoulder Patch none

Does clothing indicate that deceased was a member of the Air, Ground or Naval Force?
UTD

6. Description of Remains: **Ulna 28, 5**

Age Utd Est. Height 5'11 5/8" Weight Utd Description of wounds Utd

Bandages or dressings Utd Scars Utd
(Length, width, location)

Utd Tattoos
(Number, location — illustrate on separate page)

Outstanding moles, warts or birthmarks Utd
(Yes-no; description, location)

Sunburn or tan, other than hand and face Utd

Complexion Utd
(Light, medium, dark, clear, pimples, pocks, 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 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, extracts)

Chin **Utd**
 (Prominent, receding, pointed, dimples, double)

Jaw **Utd** Circumference of head in inches **fractured**
 (Large, small, normal) (Hat 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)

Utd
 (Unusual characteristics of fingernails)

Chest **Utd**
 (Size of nipples, color, quantity and extent of hair, large, small, normal)

Waist **Utd**
 (Size of navel, appendectomy, amount, quantity, and color of hair)

Back **Utd** Circumcision **Utd** Pubic Hair **None found**
 (Quantity and extent of hair) (Yes-no) (Color)

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

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

Feet **Utd** Toes **Utd**
 (Size, corns, callouses, Bal) (Slender, straight, crooked, overlap)

Evidence of healed fractures **Utd**
 (Nose, arms, legs, etc.)

NOTE: Use attached charts "A" and "B" to indicate parts not received.

See attached chart.

7. Have finger prints been placed on Report of Interment? (Yes-no)

If not, explain too decomposed

8. Has tooth chart been prepared? Yes If not, explain (Yes-no)

9. Remarks Remains received, wrapped in wool OD blanket, with large amount of flesh in advanced stage of decomposition. No clothing found. Most major bones fractured. Right ulna bone measured for estimated height. Original Burial Report found. No CRS Tag found. Fluoroscopic Examination: Negative. Estimated weight of remains recovered: 50 Lbs. Nothing found to warrant Chemical Laboratory Examination. Case remains "Unknown".

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.

Ernest C. Gaddy

(Officer's Name)
ERNEST C. GADDY
CWO USA

Rank Service

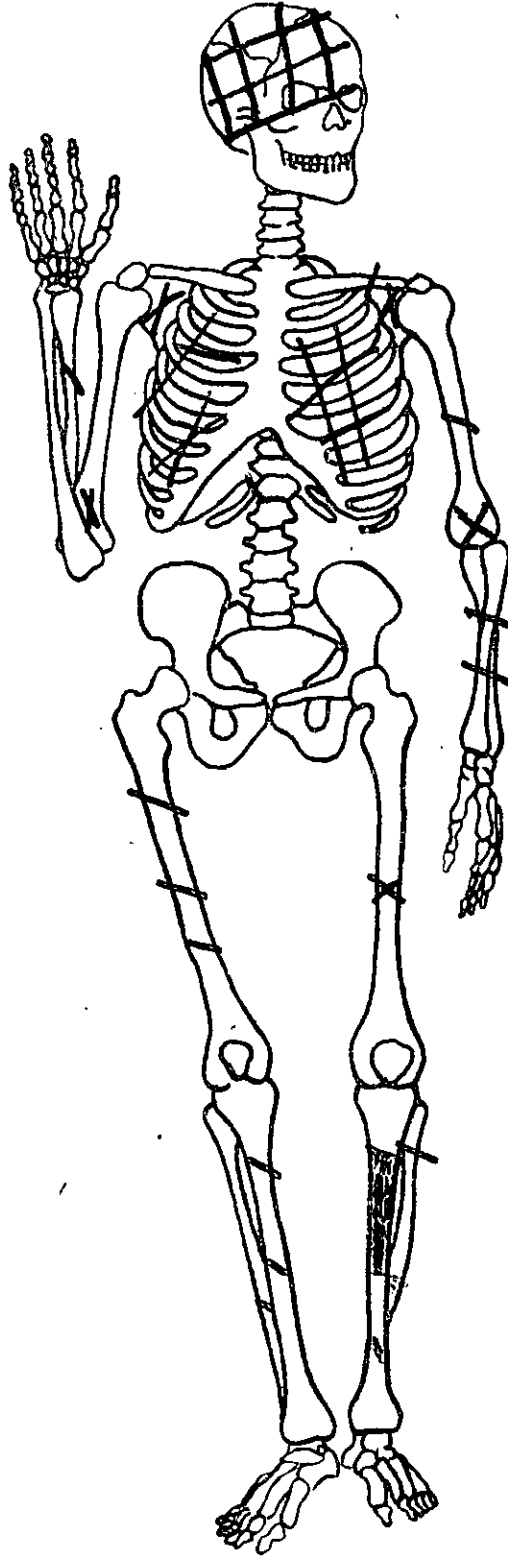
Central Identification Point

(Organization)

Unknown X-114
Cemetery St. Laurent, France
Plot R, Row 6, Grave 133

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



Ulna 28,5

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

Y-114 Cemetery St. Laurent,
France
Plot 2, Row 6, Grave 135

TOOTH CHART

1st July 1947

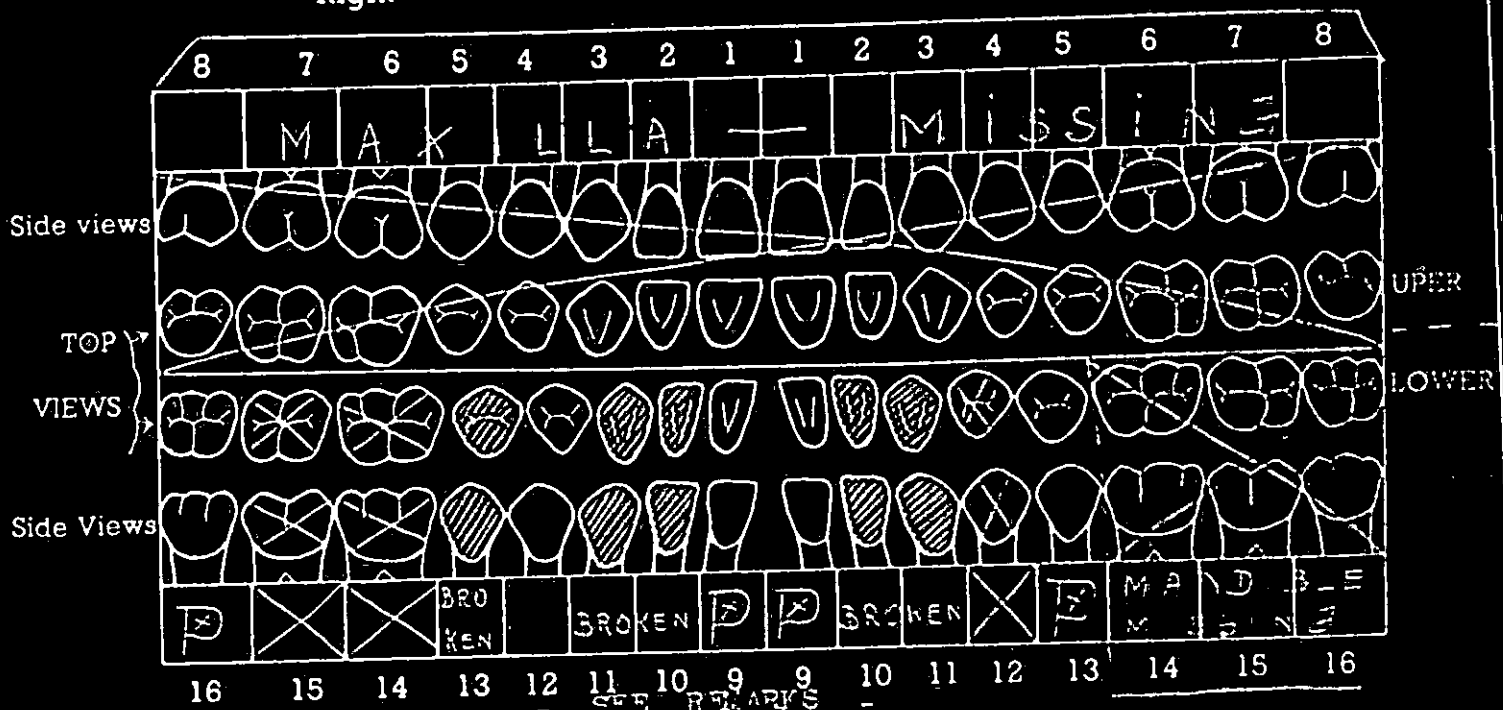
Date

Unknown Y-114

_____ Last Name	_____ First	_____ Initial	_____ Rank	_____ Serial No.
_____ Unit		_____ Organization		
_____ 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.

Edward ...
Signature of Officer or other person who prepared tooth chart

...
Verified by ... 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:



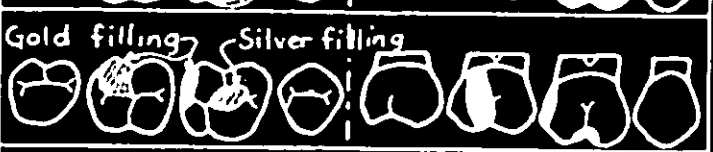
CROWNED TEETH . . . Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus:



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

Posthumously missing R-9, 16 and L-9, 13
Spaces: R-11-12, 1mm (est.) R-12-13, 1mm (est.)
R-12-16, 11mm (est.) L-11-13, 5mm (est.)
Teeth broken off as indicated by shading.
From the appearance of the socket R-16 versed mesially.
Right ramus missing
Rotated mesially 1/4 turn, R-13
Medium sized ivory colored tooth.

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

22925
21 July 1944
Date

Unknown

UNIDENTIFIED X--114 (American ~~RA~~)

Last Name: _____ First: _____ Initial: _____ Rank: _____ Serial No.: _____

Unit: _____ Organization: _____

(Unknown at sea) Place of Death: _____ Unknown Date of Death: _____ KIA Cause of Death: _____

1500 hrs, 21 July 1944 Time and Date of Burial: _____ St Laurent Sur Mer #1 Name of Cemetery: _____ 675-896 Name or Coordinates of Location: _____

133 Grave Number: _____ 67 Row Number: _____ *with 1st Ind 1 mar. 46 1st* R Plot Number: _____ Temp 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?
Body delivered to cemetery by McKetelsen, Plm 2/c of Omaha Beach, advance sector and he claims body was washed ashore at Easy white beach. Body had no clothes, and was impossible to take fingerprints and tooth charts.

What means of identification were buried with the body?

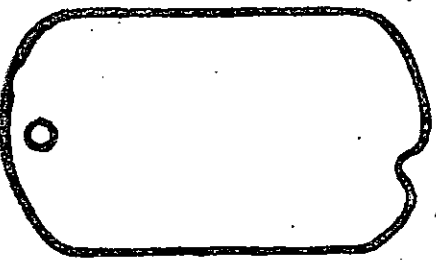
GRS Form #1 in 50 Cal Shell casing

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

Who is buried on:
Deceased's Right: Leslie, Arthur R. Jr. 32955813 131
Name Serial No. Rank Organization Grave No.

Deceased's Left: Azzopardi, Vincent L. 32826882 132
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

73

Signature of Officer or other person reporting burial
Ernest J. Terry
Verified by G.R.S. Office
ERNEST J. TERRY
1st Lt. OMC
Graves Registration Officer

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.

4	
3	
2	
1	
Thumb	

Left Hand

4	
3	
2	
1	
Thumb	

Right Hand

TOOTH CHART

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