

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 UNK. ST. LAURENT, X-55

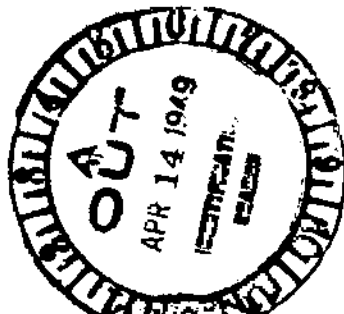
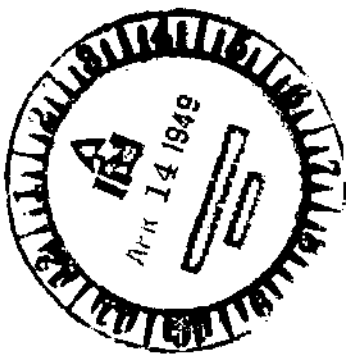
SUBJECT

INTRAOFFICE REFERENCE SHEET

298 Unknown France X-55 (St. Laurent)

DUE HOUR AND DATE

1 NO.	2 FROM—	3 TO—	4 DATE	5 MESSAGE
1	Ident. Branch Mem Div	Repat Br Navy Liaison Section	11 Apr 49	<p>1. Attached herewith is Certificate of Unidentifiability for Unknown X-55 United States Military Cemetery St. Laurent, France, Plot D, Row 10, Grave 192 for necessary action.</p> <p>2. Request this Office be advised of results of your investigation.</p> <p>1 Incl: Certif of Unident. for (X-55)</p> <p><i>M</i> METZ 74059</p> <p><i>B</i> BERRY 24627</p>
2	Chief, Navy Liaison Section, R R Br, Mem Div	Ident Branch Mem Div	14 Apr 49	<p>1. This Office concurs with the above mentioned Certificate of Unidentifiability for Unknown X-55, USMC St. Laurent, France, Plot D, Row 10, Grave 192.</p> <p>1 Incl: w/d</p> <p><i>M</i> MARSDEN 73880 76304</p>



REPAIRATION
RECORDS BRANCH
APR 14 11 53 AM
MEMORIAL DIVISION

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

RRE 293

10 Mar 1949

(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

The records pertaining to Unknown X- 55, Plot D,
Row 10, Grave 192, USIC St Laurent

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. 2381, dated 5 Aug 1947.

Case reviewed by undersigned Members of the Board of Review:

Stanley Tyrrell

Capt. Jack C. HAYES, O-1577297 OLC Capt Stanley C. TYRRELL, O-1304296 Inf

Edward E. Stout

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

Ernest J. Oglesby

1/Lt Ernest J. OGLESBY, O-449004 Cav

Incl # 1

Interred 30 November 1948

J-13-2-USMC. St Laurent **DISINTERMENT DIRECTIVE**

DOUGLAS A. MAC KENZIE *Douglas Mac Kenzie*
Capt. Inf. Cemetery Superintendent

SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
3582 00000

DATE
10 09 47
DAY MONTH YEAR

NAME
UNKNOWN X-000055

SERIAL NUMBER
X-000055

RANK
8

DATE OF DEATH
DAY MONTH YEAR

CEMETERY
ST LAURENT BAVEUX

DISPOSITION OF REMAINS
3505 80
CODE DIST. PT.

PLOT ROW GRAVE COUNTRY
D 10 192 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
Unknown- 000055

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISINTERRED
7 October 1947

IDENTIFICATION TAG ON
 REMAINS
 MARKER

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY
WILLIAM J. SMITH
1st Lt. C.E. NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL
remnants of clothing, wrapped in sheet

CONDITION OF REMAINS
Disarticulate skeleton

OTHER MEANS OF IDENTIFICATION
None

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

REMAINS PREPARED AND PLACED IN CASKET
DATE **7 October 1947**

BY **J. A. Brickley**

CASKET SEALED BY
J. A. Brickley

EMBALMER (Signature)
J. A. Brickley

CASKET BOXED AND MARKED
DATE **7 Oct 47** BY **R. J. Hodge**

SHIPPING ADDRESS VERIFIED BY
JOHN W SHARP

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

John W Sharp
JOHN W. SHARP 1st Lt. Inf.
SIGNATURE OF GRS INSPECTOR

NAT FILE
RECORDS ANNOTATED
DATE **APR 12 1949**
NAME *gg*
R & R ER.

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

RECORD OF CUSTODIAL TRANSFER

b 5
 6723
 0725
 4220 DJ 1203177

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 (S. VOL. 11218-11A-11078)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER 21. 77000011 11740	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

INTEROFFICE REFERENCE SHEET

See reverse side for instructions in the use of this form

DUE, HOUR AND DATE

1 No.	2 FROM-	3 TO-	4 DATE	5 MESSAGE
1	Chief, Navy Liaison Section 2448-B	Identi- fication Section	12 Feb 1947	<p>Unable to identify this case as Navy personnel. The LCI-488 reported no casualties during the war.</p> <p style="text-align: right;"><i>Waite</i> WAITE Ext 73880</p>

INSTRUCTIONS

1. This is the only transmittal form authorized for use among the several elements of the Office of The Quartermaster General. As of 1 September 1946 all similar forms, i. e., slips of various sizes, colors, and shapes, were discontinued; remaining supplies of old forms will be turned in to the Chief, General Administrative Services Division, for disposal.
2. Copies will NOT accompany original.
3. Messages addressed to The Quartermaster General will be signed by the DIVISION Chief IN PERSON unless he is absent, in which case the signature of his executive assistant will be accepted.
4. Due hours and dates as entered by the Chief, General Administrative Services Division, covering action on incoming correspondence, or as used by TQMG or Division Chiefs for dead line purposes, will be met in all cases.
5. Use of columns of form: Column 1, "No.," originator enters the number "1" as his entry; subsequent messages are numbered serially in column 1. Column 2, "From," enter Division identification (abbreviated) or, within Division enter Division identification PLUS branch or section. Column 3, "To," same instruction as for column 2—name of officer or civilian may be added where desirable. Column 4, "Date," spell out month, e. g. 6 Sept. 46. Column 5, "Message," present succinctly and accurately whatever you wish to say. Use full width of sheet when message goes far enough down sheet to clear entries in columns 1, 2, 3, and 4. Use one side of sheet only. Sign surname at end of "message," enter phone extensions under name, then, immediately below, draw line completely across sheet.
6. Use of typewriter is NOT required.
7. Division chief forwarding lengthy papers to TQMG will brief background action in concise manner in his "message" so that TQMG will not be forced to waste time reading nonessential information.
8. Questions as to use of this form and related matters will be directed to the Executive Officer, Office of TQMG.

TOOTH CHART

3 JULY 1947

Date

UNKNOWN X-55

Last Name

First

Initial

Rank

Serial No.

Unit

Organization

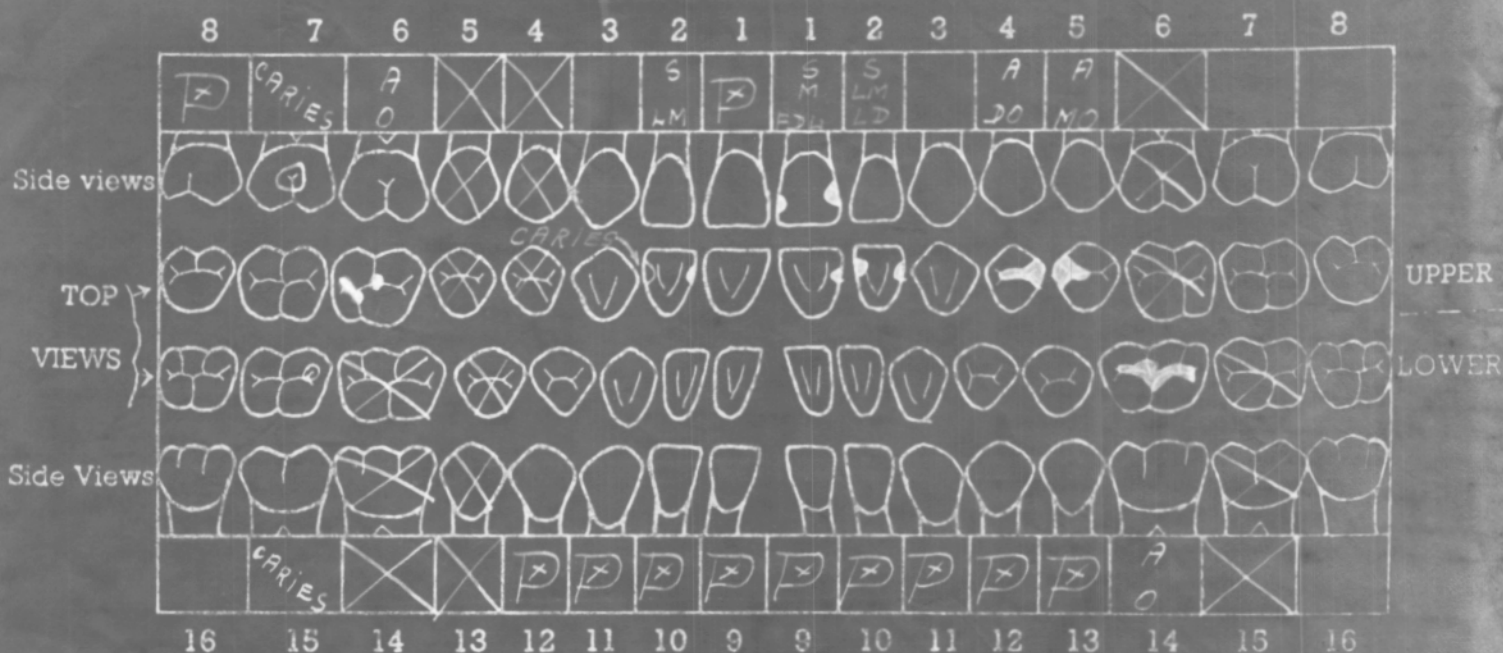
Place of Death

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.

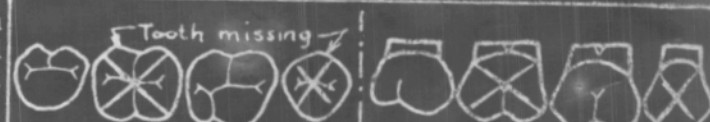
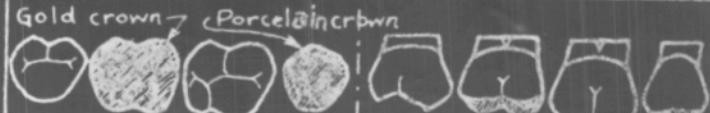

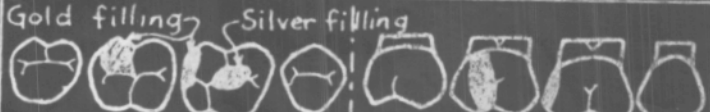

Edward Sebastian

Signature of Officer or other person who prepared Tooth chart

Ernest C. Gaddy

Verified by G. R. S. Officer

ERNEST C. GADDY
 CWO USA C.I.P.

<p>MISSING TEETH . . All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :</p>	
<p>CROWNED TEETH . . Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :</p>	
<p>BRIDGE WORK . . Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :</p>	
<p>FILLINGS . . Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus :</p>	
<p>CARIES (CAVITIES) . . Outline location and size of cavity, shade in thus :</p>	

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 1,8,9,10,11,12 and L 9,10,11,12,13.
 Spaces ; R 3-6, 13mm; R 12-15,14 mm. ; L 5-7,8mm. L 14-16,8mm.
 Mesial version, R 15,16 and L 7, 16/
 Medium sized ivory colored teeth are in good alignment.

75

IDENTIFICATION CHECK LIST

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

Unknown X 65
Cemetery St. Laurent
Plot D Row 10 Grave 192

Date Reprocessed

1. ~~Arrived at cemetery~~ 3 JULY 1947
(Hour) (Date)

2. Place of death _____
(Name of closest town) (Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3. Remains ~~recovered or~~ disinterred by Subordinate Identification Point, Carentan, 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)

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>Charred remnants of stone</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>Remnant of blue denims</u>		
* Trousers, Wool OD	<u>NONE</u>		

Belt, web NONE

Drawers, wool NONE

Drawers, cotton Remnants, white, non-regulation

Leggings, wool NONE

Socks, cotton NONE

* Shoes 1 pr. different sizes (type) BR USN Service R Shoe "7 1/2 ES" No mark"
L S hoo "8 1/2 F" Marking
A ? Sitnitsky

Overshoes NONE

Web Equipment NONE (type) NONE

(Other item) One USN dress blue

(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

Does clothing indicate that deceased was a member of the ~~Air Force~~ or Naval Force? YES U.S.N.

Fibula - 40.7 Ulna 28.0 Humerus 34.2
Tibia 41.2 Radius 26.4 Femur 48.8

6. Description of Remains:

Age UTD Est. Height 5'11 1/4" Weight UTD Description of wounds UTD

Bandages or dressings None found 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, poeks, 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 21 5/8"
(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 Reddish brown
(Quantity and extent of hair) (Yes-no) (Color)

Hernioplasty UTD
(Yes-no; location)

Legs UTD
(Insect, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

Feet UTD Toes UTD
(Size, corns, callouses, flat) (Slender, straight, crooked, overlap)

Evidence of healed fractures None found
(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? NO
(Yes-no)

If not, explain Missing and Decomposed

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

9. Remarks Remains received in advanced stage of decomposition in a wool blanket. Clothing found on remains. Burial report found. No G.R.S. tag found. Clothing indicated U.S.N. Estimated weight of remains 85 lbs. Fluoroscopic examination Negative. Shoes found on remains. Different sizes Right shoe 7 1/2 EE Left shoe 8 1/2 F and the marking "A Sitnitsky".

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.

Chemical Laboratory Examination made on remnants of shoe positive.

Note :

Right foot bones had been separated from the Tibia and Fibula bones. Shoe containing these bones found in debris.

Ernest C. Gaddy
(Officer's Name)
ERNEST C. GADDY

GWO

Rank

USA

Service

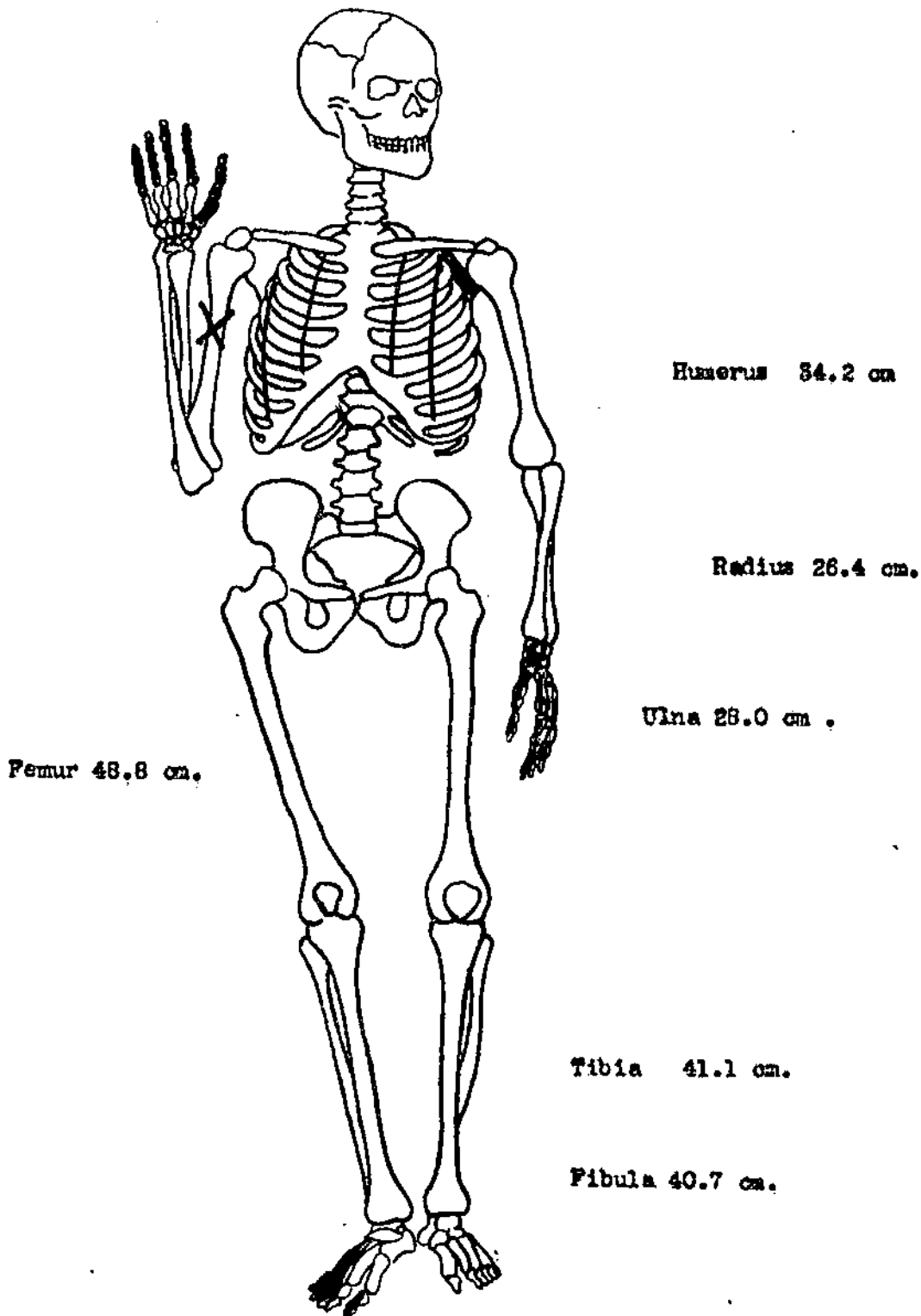
Central Identification Point
(Organization)

X - 55
St. Laurent

SKELETAL CHART

Plot: D Row: 10 Grave:

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



Estimated Height 5' 11 $\frac{1}{2}$ "

IDENTIFICATION SECTION
REPATRIATION RECORDS BRANCH
MEMORIAL DIVISION

CATEGORY III CASE
NO CLUES

IDENTIFICATION IMPOSSIBLE
AT PRESENT TIME

ADP

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

Date of Disinterment
24 Jan 45

H-2-587
2504
Date 2-22

Unidentified case X-55

Last Name	First	Initial	Rank	Serial No.
Unk			Unk	Unk
FRANCE	Unk	APP	18 Jun 1944	Organization
Unk		Unk		Unk (K.A)
Place of Death	Date of Death	Cause of Death		
Unk 12 Jun 1944	St Laurent sur Mer	68.7-39.0	Name or Coordinates of Location	
Time and Date of Burial	Name of Cemetery			
192	10	D	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?

One GRS Tag marked X-55 buried with body.
One " " " " attached to cross.

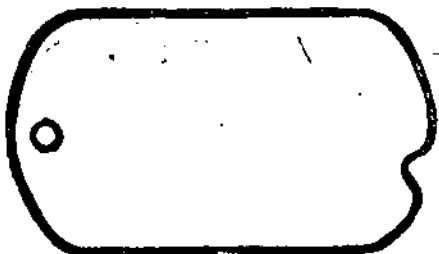
What means of identification were buried with the body?

same as above

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

Who is buried on:	Thompson, Edward L.	39277829	Pvt	Unk	193
Deceased's Right:	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	Burton, Everett E.	33121518	Pfc	Unk	191
	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 Unk Name

Unk Address

Religion Unk

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

None

73

Signature of Officer or other person reporting burial

PHILIP J. SHAFER, 2nd Lt., QMC

Verified by G.R.S. 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? Yes _____
 Race: White

(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.

Man was wearing a blue jacket with label Navy Dept size 42. On the back of jacket was a picture of a small boat resembling a Landing Craft Infantry under which was LCI 488

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

See above.

Left Hand

Thumb	1	2	3
Impossible to obtain			

Right Hand

Thumb	1	2	3
Impossible to obtain			

TOOTH CHART

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

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

Characteristics: teeth good

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.

Ref: Disinterment made by S/Sgt Riley E. Rose
 24 Jan 45.