

QMGOD 332.3  
Kansas City

12 December 1949

SUBJECT: Report on Certain Unknowns

TO: Commanding Officer  
Quartermaster Activities  
Kansas City Records Center (AGO)  
Kansas City, Missouri

1. Reference your inquiry concerning present status of the following named Unknowns, you are advised that these Unknowns have been declared unidentifiable:

X-44	Montelimer, France
X-98	Hamm, Luxembourg
X-470	Shanghai, China
X-104	St. Laurent, France
X-56	" " "

2. Correspondence from the Bureau regarding these Unknowns is returned herewith.

BY COMMAND OF MAJOR GENERAL FELDMAN:

1 Incl:  
Correspondence

WILLIAM F. CONLON  
Major, QMC  
Field Service Division

X QMGOD 293, UNKNOWN X-56 FRANCE (ST. LAURENT)

DEPARTMENT OF THE ARMY  
KANSAS CITY QUARTERMASTER DEPOT  
ARMY EFFECTS BUREAU  
601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

IN REPLY REFER TO QMDKG 686096

HOC/LL/vlm  
~~7 November 1949~~  
DATE

SUBJECT: Disposal of Personal Effects

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

1. Personal effects found on remains interred as Unknown X 56  
Plot F, Row 3, Grave 47, USMC St. Laurent, France  
\_\_\_\_\_ have been held at this Bureau as of 6 May 1946

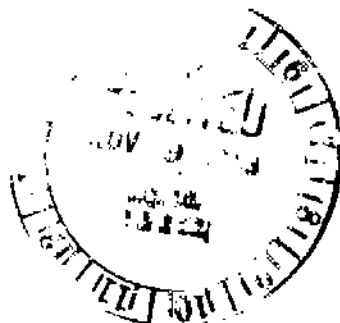
2. Bureau inspection of the effects has been made and the following description furnished for reference:

2 Keys  
4 Souvenir Coins  
5 U.S. 1/4 coins

3. It is requested that this Bureau be informed whether or not the above listed Unknown decedent has been officially identified.

FOR THE COMMANDING OFFICER:

H. O. CALDWELL  
Effects Quartermaster



293 Unit X 56 France (St. Laurent)



3452  
FORM 332.3  
Kansas City

25 March 1949

SUBJECT: Identification Status of Unknown Decedents

TO: Commanding Officer  
Quartermaster Activities  
Kansas City Records Center (AGC)  
Kansas City 1, Missouri  
ATTENTION: Effects Quartermaster

1. Reference is made to recent correspondence, your Bureau, regarding identification status of unknown decedents.
2. Records this office reveal the following listed unknowns have not been identified:

X-2701	St. Avel, France
X-3219	St. Avel, France
X-6189	St. Avel, France
X-7394	St. Avel, France
X-153	St. James, France
X-66	St. Laurent, France
X-104	St. Laurent, France
X-2062	Margraten, Holland
X-184	Ham, Luxembourg.

BY COMMAND OF MAJOR GENERAL FELDMAN:

1 Encl:  
Corres re 9 Unknowns

WILLIAM F. CONLON  
Major, QMC  
Field Service Division

293 Unk X-56 St Laurent, France  
X-293-2062 - France X-56 (St Laurent)



HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 56 US ARMY

RRE 293

3 March 1949  
(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

The records pertaining to Unknown X-56, Plot F,  
Row 3, Grave 47, USIC ST. LAURENT, 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. 2369, dated 23 July 1947

Case reviewed by undersigned Members of the Board of Review:

*Stanley C. Tyrell*  
-----  
Capt. Jack C. HAYES, O-1577297 OMC Capt Stanley C. TYRELL, O-1304296 Inf

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

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

Incl #10

*copy*

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

15 DECEMBER 1948  
Date

SUBJECT: Unidentifiable Remains

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

1. The records pertaining to Unknown <sup>43</sup>K-56, Plot F,  
Row 3, Grave 47, 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. 2369, dated 23 JULY 1947. No  
further information is available.

FOR THE COMMANDING GENERAL:

\_\_\_\_\_  
/s/  
t/

Received 28 DEC 1948  
Not Identifiable from  
information presently  
available  
DOWNS

NAT  
29 Dec 48  
C. J. DeWalt  
2nd Lt. Col.





Interred 11 December 1948

G-28-13-USMC St Laurent

DOUGLAS A. MAC KENZIE  
Capt. Inf. Cemetery Superintendent

**DISINTERMENT DIRECTIVE**

*Douglas A MacKenzie*

SECTION A -  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER  
3582 00000

DATE  
10 09 47  
DAY MONTH YEAR

NAME <b>UNKNOWN</b>		SERIAL NUMBER <b>X-000056</b>	RANK	ARM <b>8</b>	DATE OF DEATH DAY MONTH YEAR
CEMETERY <b>ST LAURENT BAVEUX</b>					DISPOSITION OF REMAINS <b>3505 80</b>
PLOT <b>F</b>	ROW <b>3</b>	GRAVE <b>47</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 (BY ADMINISTRATIVE ORDER)</b>	NAME AND ADDRESS OF NEXT OF KIN
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SECTION C - DISINTERMENT AND IDENTIFICATION

NAME <b>Unidentified X-56</b>	SERIAL NUMBER <b>Utd</b>	RANK <b>Utd</b>	DATE OF DEATH <b>6-6-44</b>	DATE DISINTERRED <b>19-9-47</b>
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION	RELIGION <b>Utd</b>	IDENTIFICATION VERIFIED BY <b>WALTER H. MACGUIRE, CWO</b> NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL <b>Remains wrapped in 2 mattress covers in box</b>	CONDITION OF REMAINS <b>Advanced Decomposition</b>
--	---

OTHER MEANS OF IDENTIFICATION  
**O-9919 Clothing Mark**

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

REMAINS PREPARED AND PLACED IN CASKET  
DATE **19-9-47** BY **C.R. Tompkins**

**NOT FILE**  
**RECORDS ANNOTATED**  
DATE **APR 19 1948**  
NAME **D A MATTHEWS**  
MEM. DIV.

CASKET SEALED BY **C.R. Tompkins**  
EMBALMER (Signature) *C.R. Tompkins*

CASKET BOXED AND MARKED  
DATE **19-9-47** BY **M.H. Noyes**  
SHIPPING ADDRESS VERIFIED BY **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.

*John W Sharp*  
**JOHN W. SHARP**  
**1st LT. INF**

SIGNATURE OF GRS INSPECTOR

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

# 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

B. M. DIA  
 CIVIL  
 RECORDS SECTION

## 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

# TOOTH CHART

1 July 1947

Date

Unknown X-56

Last Name First Initial Rank Serial No.

Unit

Organization

Place of Death

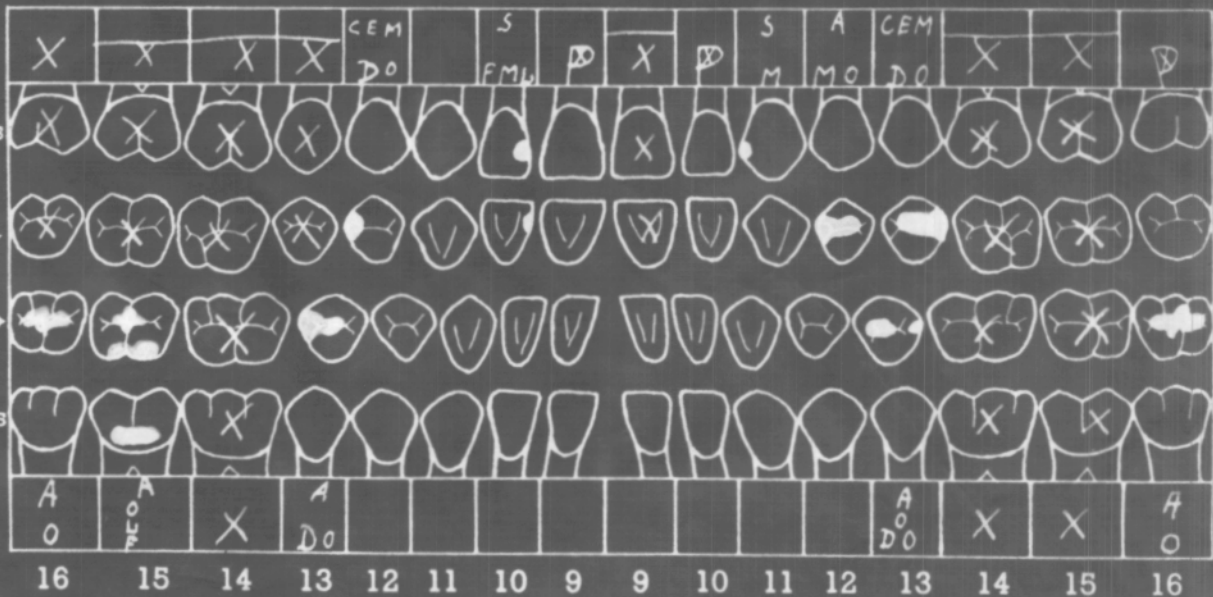
Date of Death

Cause of Death

Right

Left

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8



See remarks

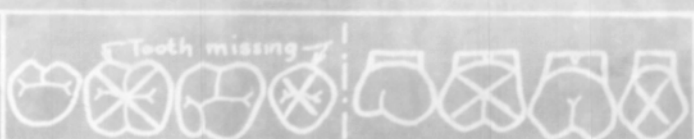
This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspid (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* A.K.  
 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.

**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, R1 and L2,8  
 Spaces: R13-15, none, R1-L2, 7mm (est) L5-8, 14mm(est)  
 L13-16, 15mm  
 Extreme mesial version, L16  
 Mesial version, R15, 16  
 Upper partial, pink acrylic denture replacing R5,6,7  
 and L1,6,7, teeth clasped, R4 and L5  
 Medium sized brown stained teeth are in good alignment.

# IDENTIFICATION CHECK LIST

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

Unknown X-56

Cemetery St Laurent, France

Plot F Row 3 Grave 47

Date reprocessed: 1 July 1947

1. ~~Autopsy~~ \_\_\_\_\_  
(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,  
(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>Remnants of white</u>		
<del>Trousers</del> , HBT	<u>Remnants of coveralls</u>		
* Trousers, Wool OD	<u>None</u>		

Belt, web None

Drawers, wool None

Drawers, cotton Remnants of white with markings: "6166"

Leggings, wool None

Socks, ~~cotton~~ <sup>wool</sup> One pair, grey

\* Shoes One pair (type) G.I service size 7 1/2 D

Overshoes None

Web Equipment None (type)

(Other item) 9 english coins. Total value 3/11 (in U.S. Currency value approx. 78¢)

(Other item) 2 yale type keys "Nos D 2800 and D 2800"

\* 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?

Radius 24.8 Humerus 32.7 Tibia 37.3  
Ulna 26.8 Femur 45.1

6. Description of Remains:

Age UTD Height Est. 5' 6 7/8" 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, pocks, freckles)

Build UTD  
(Large, fat, thin, muscular)

Hair Dark brown (found in debris UTD length)  
(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"  
 (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)

(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 Brown dark  
 (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, 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 chart

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

If not, explain Too decomposed

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

9. Remarks Remains received in an advanced stage of decomposition wrapped in a wool OD blanket. Clothing found on remains. Small amount of British money found in pocket of coveralls (accompanies papers) No burial report or GRS tag found. Estimated weight of remains: 60 Lbs. Fluoroscopic Examination: negative. Chemical Laboratory Examination: positive.

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*  
ERNEST C. GADDY  
(Officer's Name)

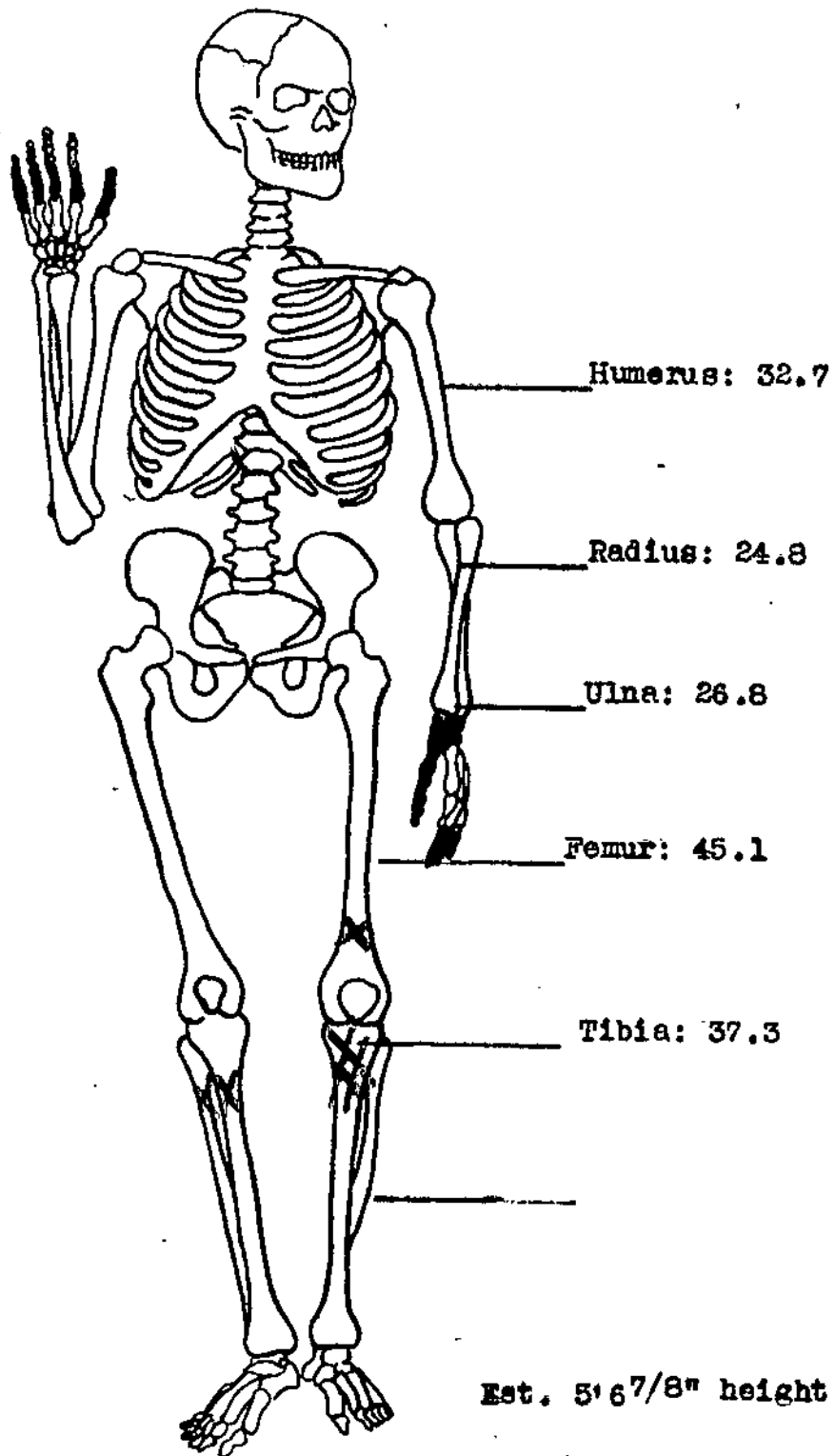
CWO USA  
Rank Service

CENTRAL IDENTIFICATION POINT.  
(Organization)



Unknown X-56  
St Laurent, France  
**SKELETAL CHART** Plot F Row 3 Grave 47

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



# RESTRICTED REPORT OF BURIAL

TM 10-630 AND AR 30-1815

22137  
22 July 44  
Date

*Yr known*  
UNIDENTIFIED X

56

(AMERICAN)

Last Name

First

Initial

Rank

Serial No.

Unit

Organization

Normandy, France

6 June 44

KIA

Place of Death

Date of Death

Cause of Death

1900- 20 June 44.

ST. LAURENT SUR MER # 1

675 -896

Time and Date of Burial

Name of Cemetery

Name or Coordinates of Location

47

3

F

Temp

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?

Tooth chart and fingerprints impossible.

Clothing Marks O-9919

What means of identification were buried with the body?

GR. FORM # 1 in shell case.

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

Who is buried on:

Deceased's Right:

G. W. Baumgartner 36243811

48

Name

Serial No.

Rank

Organization

Grave No.

Deceased's Left:

Aljets, R. O. 37284952

46

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

*Robert E. Berry*

Verified by G.R.S. Office

ROBERT E. BERRY

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.:

Left Hand

4	3
8	3
2	2
1	1
Thumb	Thumb

Right Hand

4	3
8	3
2	2
1	1
Thumb	Thumb

### TOOTH CHART

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

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.