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 Unknown X-2360, Plot 7, Row 9, Grave 175, 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. 2399, dated 14/8/47. No further information is available.

FOR THE COMMANDING GENERAL:

/s/ George L. Freeman
/t/

Received 23 Nov. 1948 OQMG
Not identifiable from information presently available

FILE 23 NOV 1948

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FOR THE COMMANDING GENERAL :

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

Received 23 Nov. 1948 QQMG
Not identifiable from information presently available

INCL #26

JS

Interred 15 December 1948
H-22-18-USMC. St Laurent
DOUGLAS A. MAC KENZIE
Capt. Inf. Cemetery Superintendent

DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER	DATE (DAY / MONTH / YEAR)
3582 00000	10 / 09 / 47

NAME	SERIAL NUMBER	RANK	ARM	DATE OF DEATH (DAY / MONTH / YEAR)
UNKNOWN	X-000060		Ø	

CEMETERY	DISPOSITION OF REMAINS (CODE / DIST. PT.)
ST LAURENT BAVEUX	3505 80

PLOT	ROW	GRAVE	COUNTRY	CAUSE OF DEATH
F	9	175	FRANCE	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
Unidentified X-60 American	Unk	Unk	6 June 1944	18 September 1947

IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY (NAME AND TITLE)
☐ REMAINS ☐ MARKER		Unk	WALTER H. MAC GUIRE CWO

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
UTD	Last Stage of Decomposition

OTHER MEANS OF IDENTIFICATION
None.

MINOR DISCREPANCIES [1] Arm of service corrected-Authority 355 (Hq,AGRC)
None

MAT
FILE
RECORDS [illegible]
DATE MAY - 3 1949

REMAINS PREPARED AND PLACED IN CASKET
DATE 18 September 1947 BY Henry A. Gentzel

CASKET SEALED BY
Henry A. Gentzel

EMBALMER (*Signature*) Henry A Gentzel

CASKET BOXED AND MARKED
DATE 18 Sep 47 BY Henry B. Ryder

SHIPPING ADDRESS VERIFIED BY:
JOSEPH A. PEACOCK, Capt., Inf.

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

Joseph A. Peacock
JOSEPH A. PEACOCK, Capt, Inf.
SIGNATURE OF GRS INSPECTOR

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

QMC FORM REV 15 MAR 46 1194

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		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

AGRC FORM No. 11
Revised 1st Sept. 1946
Formerly "Check List of Unknowns"

X - 60

IDENTIFICATION CHECK LIST

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

Unknown X 60

Cemetery St. Laurent, FRANCE

Plot F Row 9 Grave 175

Date Reprocessed : 27 JUNE 1947

1. ~~Marked at cemetery~~ _____ (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, Crasntan, 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 (Type)	NONE		
Raincoat	NONE		
Overcoat	NONE		
Jacket, Field	NONE		
Jacket, Combat	NONE		
Mackinaw	NONE		
Sweater	NONE		
Jacket, HBT	NONE		
* Shirt, Wool OD	NONE		
Undershirt, Wool	NONE		
Undershirt, Cotton	NONE		
Trousers, HBT	NONE		
* Trousers, Wool OD	Remnants of One (1) pair.		

Belt, web Remnants of One - Size 36

Drawers, wool Remnants of One (1)

Drawers, cotton NONE

Leggings, wool NONE

Socks, ~~cotton~~ wool, Remnants of one (1) pair (wool)

* Shoes One (1) pair Size 9½D (type) Service

Overshoes NONE

Web Equipment NONE (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: Femur 46.9
Tibia 38.8
Fibula 38.7

Age UTD Height Est. 6'10" 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 (Color, setting, shape) Mustache UTD (Color, size, shape) Beard or UTD (Length, heavy)

Goatee UTD
(Light, color, extent)

Eyes UTD
(Color, setting, shape)

Eyebrows UTD
(Color, bushiness, extent across nose)

Nose UTD
(Size, shape, straight)

Eears UTD
(Size, set close to or far from head)

Mouth UTD
(Large, medium, small)

Lips UTD
(Small, large, full)

Teeth None found
(White, size, uneveness, spacing, noticeable crowns, fillings, extracts)

Chin UTD
(Prominent, receding, pointed, dimples, double)

Jaw UTD
(Large, small, normal)

Circumference of head in inches 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, 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
(Quantity and extent of hair)

Circumcision UTD
(Yes-no)

Pubic Hair None found
(Color)

Herniaplasty UTD
(Yes-no; location)

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

Feet UTD
(Size, corns, callouses, flat)

Toes UTD
(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? UTD (Yes-no)

If not, explain Hands missing

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

9. Remarks Case received in wool O.D. blanket, with only lower half of remains present. Estimated weight of remains 40 lbs. Fluoroscopic examination Negative. Report of burial found. No G.R.S. Tag found. Clothing found on remains.

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)

Chemical Laboratory Examination was made on remnants of wool O.D. trousers with negative results.

Photo Laboratory Examination made on

a) portion of trousers, wool, O.D.

b) Remnants of drawers , wool

revealed the following findings:

a) L - ? ? ? ?

b) Negative

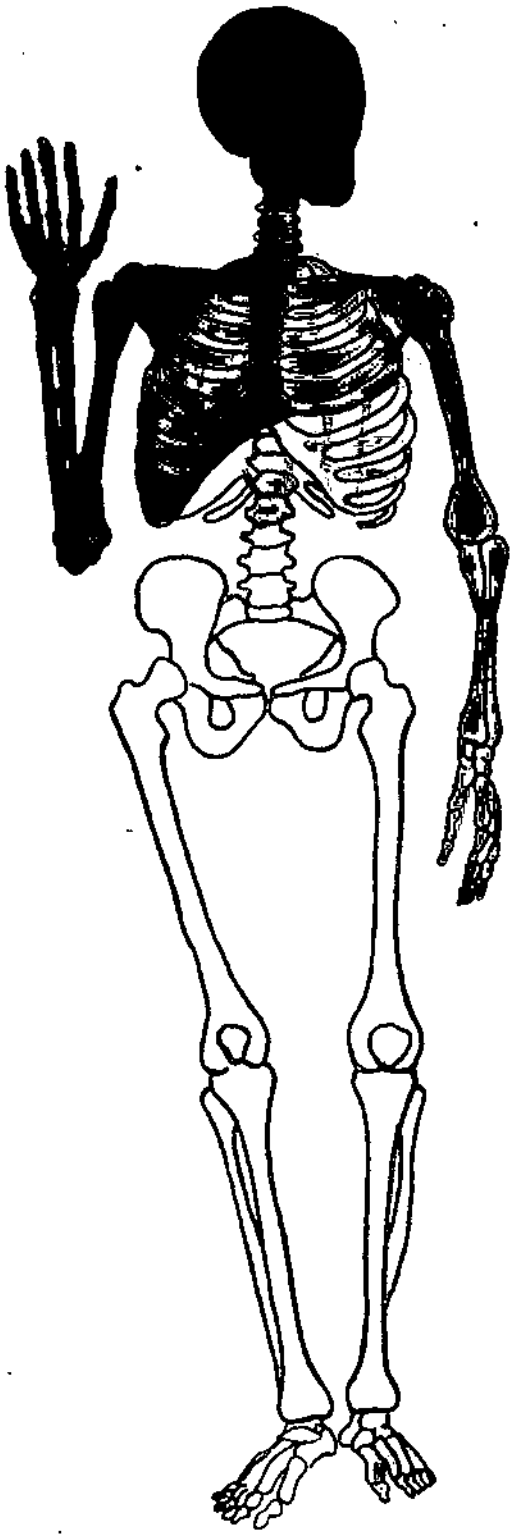
Photos are inclosed with case papers.

X - 60
St, Laurent, FRANCE

SKELETAL CHART

Plot: Row: Grave:
F 9 175

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



Femur 46.9 cm.

Tibia 38.8 cm.

Fibula 38.7 cm.

CHART "A"

X-60 St Laurent

Reverse side of 371 for Pfc Paul Williams, 35638960, returned by field & sent to MkR 21 Jan 48, reads as follows:

"The following Unknowns at St Laurent may be associated with Cpl Arthur E. Stendel:

X-27	X-66
X-32	X-70A
X-46A	X-71
✓ X-60	X-77
X-62	X-80
X-63	X-81
X-64	X-89
X-65	X-91"

GRAVES REGISTRATION FORM No. 1 (Revised 1 Sept. 1943)

Unknown

REGISTERED

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

22141

23 July 1944
Date

UNIDENTIFIED X-60 (American) | | | | |
Last Name | First | Initial | Rank | Serial No.

Unit | Organization

Normandy, France | 6 June 1944 (Est) | KIA
Place of Death | Date of Death | Cause of Death

1550 hrs, 18 June 1944 | St Laurent Sur Mer #1 | 675-896
Time and Date of Burial | Name of Cemetery | Name or Coordinates of Location

175 | 9 | F | KIA
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?

Fingerprints and tooth chart impossible. Waist Belt Size 36, Shoe Size 9½ D

What means of identification were buried with the body?

GRS Form #1 in 50 Cal Shell Casing

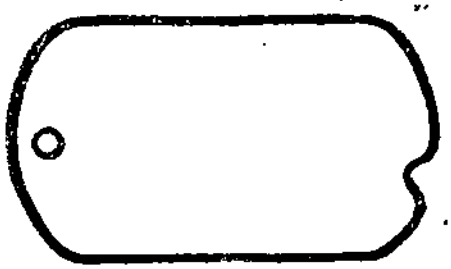
To determine Right or Left use **Deceased's** Right and Left.

Who is buried on:

Deceased's Right: J.W. Monteith 0-1285793 | | | 176
Name | Serial No. | Rank | Organization | Grave No.

Deceased's Left: E.L. Keister 35917516 | | | 174
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

Verified by G.R.S. Officer

ROBERT E. BERRY
1st Lt. QMC
Graves Registration Officer

HQ. 908. 22/9/43. 380M/8/15219

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:
Weight:
Color of Eyes:
Color of Hair:
Race:

Laundry Marks:
Number of Rifle:
Wear Glasses?
Is Tooth Chart Attached?

(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, 2, 1, Thumb

Right Hand: 4, 3, 2, 1, Thumb

TOOTH CHART

Deceased's Left / Deceased's Right

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

Indicate: missing natural teeth by X; crowns by ○; 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.