

293-UNK. X-150

~~FRANCE~~ (SOLERS)

48 ff

(Basic ltr Dept of the Army, OQMG QMGMT 293 Unknown X-150, USMC, Solers, France, dtd 16 December 1948, subject: Identification of unknown Deceased)

²⁹³
RRE-200.2 - Unknown X-150 1st Ind
(Solers) ^{France}

Hq. American Graves Registration Command, European Area, APO 58, US Army
13 January 1949.

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

1. It is the opinion of this office that due to discrepancies in dental records Unknown X-150 (Solers) cannot be associated with Lt. Jack C. SHEWELL, O-749337.

2. Further attempts will be made to associate Lt. SHEWELL with other Unknowns and your office notified of the results.

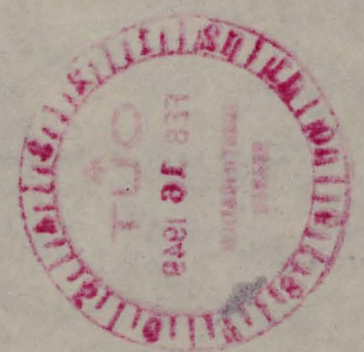
FOR THE COMMANDING GENERAL

George L. Freeman

GEORGE L. FREEMAN
1st Lieut QMC
Actg Asst Adj Gen

1 Incl:
w/d

Tel: Paris, BALzac 5400, Ext 393



RECEIVED
18 JAN 1949
IDENTIFICATION SECTION

File
NA 77-23-49
C. D. Duncan
2 d Br

*293 Unknown X 150
Solers (Solers)*

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

16 December 1948

IN REPLY REFER TO QMGMGT 293
Unknown X-150
USMC, Solers, France

SUBJECT: Identification of Unknown Deceased

TO : Commanding General
American Graves Registration Command
European Area
APO 58, c/o Postmaster
New York, New York

1. Reference is made to Report of Burial for Unknown X-150, Plot H, Row 8, Grave 155, USMC, Solers, which has been declared unidentifiable by your headquarters and approved by this office. Further reference is made to MACR 5141 (copy inclosed) for A/C 42-107691.

2. The aforementioned Unknown was disinterred from an isolated grave adjacent to the grave of an identified crew member of A/C 42-107691. All identified crew members were disinterred from Clichy Cemetery.

3. The tooth chart submitted for Unknown X-150 had some dental characteristics similar to those of Lt. Jack C. Shewell, O-749337. Dulag Record KU 2041 does not list the burial location although it does state Lts. Johnston and Shewell were brought to the hospital of air force at Clichy.

4. It is therefore requested that X-150, Solers be reinvestigated and if your findings agree with those outlined in the preceding paragraph that Field Board Findings be forwarded this office by air mail.

5. Forms 371 for Lt. Shewell and Sgt. Cave (unidentified crew members) were previously forwarded your headquarters.

FOR THE QUARTERMASTER GENERAL:

1 Incl:
MACR 5141

T. H. Metz
T. H. METZ
Lt. Colonel, QMC
Memorial Division

mm

QMGHT 293
Unknown X-150
USMC, (Solers), France

16 December 1948

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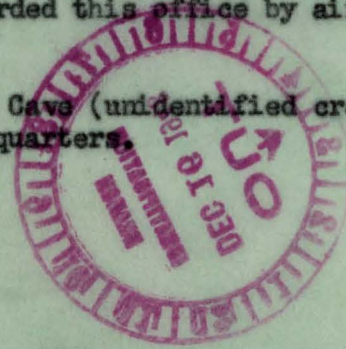
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FOR THE QUARTERMASTER GENERAL:

1 Incl:
MAGR 5141

Duncan/cam

T. H. METZ
Lt. Colonel, QMG
Memorial Division



NJS

4 293 Shewell, Jack C (0749337)

HEADQUARTERS
 AMERICAN GRAVES REGISTRATION COMMAND
 EUROPEAN AREA
 APO 58 US ARMY

293 unlc France X150 (Solers) 29 Sept 48
 Date

SUBJECT: Unidentifiable Remains

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

1. The records pertaining to Unknown X- 150, Plot H,
 Row 8, Grave 755, USMC Solers 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. 2256, dated 4/4/47. No
 further information is available.

FOR THE COMMANDING GENERAL:

/s/ Geol L. Freeman
/t/

Received - 28 OCT 1948 OQMG
 Not identifiable from
 information presently
 available

FILE 28 OCT 1948

C.P. uncan
 2d T2v

RTB

USMC, EPINAL, FRANCE Buried at deceased's left
Plot A Row 13 Grave 11
Date reburied 21 Aug 48

DISINTERMENT DIRECTIVE

Right: LUCE EDWIN M
31376379 Pfc

RAYMOND W. ASHLEY

SECTION A - WOJG AUS
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
3568 00065

DATE
15 05 48
DAY MONTH YEAR

NAME SERIAL NUMBER RANK ARM DATE OF DEATH
UNKNOWN X-000150 Q

METERY SOLERS MELUN 0 3502 80
DISPOSITION OF REMAINS
CODE DIST. PT.

LOT ROW GRAVE COUNTRY CAUSE OF DEATH
H 8 155 FRANCE 6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE NAME AND ADDRESS OF NEXT OF KIN
EPINAL, FRANCE
(BY ADMINISTRATIVE ORDER)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER RANK DATE OF DEATH DATE DISTINTERRED
UNKNOWN X-000150 Utd 26 Jul 48

IDENTIFICATION TAG ON ORGANIZATION RELIGION IDENTIFICATION VERIFIED BY
REMAINS MARKER UNKNOWN Utd C. R. Tompkins, Emb

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL CONDITION OF REMAINS
Parachute adv decomp. Multiple fractures & parts missing

OTHER MEANS OF IDENTIFICATION
GRS tags with remains & marker

MINOR DISCREPANCIES
None

REMAINS PREPARED AND PLACED IN ~~CSM~~ trf case
DATE 3 Aug 48 BY C. R. Tompkins

CASKET SEALED BY EMBALMER (Signature)
J. R. SPRINKLE J. R. SPRINKLE

CASKET BOXED AND MARKED SHIPPING ADDRESS VERIFIED BY
18 Aug 1948 BY J. R. SPRINKLE All markings, tags and plates verified by J. B. JOHNS, 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. except casketing

FILE RECORDS MAINTAINED
R. B. McDaniel, Capt FA
SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report GMC Form 1194a for major discrepancies.
R & R BR.

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC Solers		TO USMC Epinal	
KIND OF CONVEYANCE Train		NAME OF CONVOYER <i>J. F. Freeman</i>	
SIGNATURE OF SHIPPER <i>Joseph A. Peacock</i>	DATE <i>1/18/48</i>	SIGNATURE OF RECEIVER	DATE
Joseph A. Peacock, Capt Inf			

2. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

3. SHIPPED

FROM YONG		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	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

FROM H 8 122 SERVICE		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

293 unk, France (Solers) X-150

29 September 1948

Date

SUBJECT: Unidentifiable Remains.

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

1. The records pertaining to Unknown X- 150, Plot H,
 Row 8, Grave 155, USMC Solers 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. 2256, dated 4/4/47. No
 further information is available.

FOR THE COMMANDING GENERAL:

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

Received 28 OCT 1948 OQMG
 Not identifiable from
 information presently
 available

Incl #30

CHECK LIST FOR DISINTERMENTS

(To accompany Report of the Medical)

- Only Part I should be completed, if identification tags are available.
Both Part I & Part II should be completely filled out if identification tags are not available.
If information is unavailable, so indicate.

PART I

(Positive Identification)

1. Unknown x-150
(Full name of deceased) (Rank) (ASN) (Organization)
2. State if identification tags were attached to remains, how many, and where attached. No tags found.
3. Give exact location from which disinterred, furnishing coordinates and map-series used. Clichy cemetery, SO-33476, Sheet 10G, Paris-Fontainebleau, 1:100,000.
NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION WITH PERMANENT LANDMARKS.
4. Full name of cemetery (if buried in an organized cemetery). Clichy Cemetery Paris, France.
5. Approximate or established date of death (state which & give basis for date selected). 29 May 1944 inscription on cross.
6. Approximate or established date of burial (give basis for date established). 31 May 1944 Burial List.
7. Manner in which grave was marked and all information contained on the marker. Wooden cross lettered; "Flieger TUKE U.S.A. 29, 5, 44"
8. List personal effects found in possession of civilian or unauthorized military personnel, furnishing name and address of individuals concerned. None
9. Names and addresses of all persons questioned concerning death or burial and information each furnished (contact local Mayor, priest, cemetery caretaker, those responsible for burial and any other possessing important information).
Investigation made by WALTER BROOKS BRADLEY, Capt., OMC, GRO Hq., Seine Section.

PART II

(Doubtful or Undetermined Identification)

10. Fill in any information available regarding name, rank, ASN, or organization (Check cemetery records and office).
11. Unobt. Unobt. Brown Unobt.
(Est Height) (Est Height) (Color of Hair) (Color of Eyes)
12. Give description of facial features and body characteristics if possible, including the presence of scars, moles, circumcision, tattoos, length of hair, presence of mustache or beard, etc.
Hair on head 3" long.

13. Give as detailed description as possible of condition and amount of remains.
 App. 15 lbs of remains in advanced state of decomposition.
 A small portion of the burned and decayed torso is all that was found.
14. Give probable cause of death, type & location of wounds (is there evidence that body was burned) Plane crash Unobt.
 Remains severely burned.
15. Give minute description of all effects, clothing & shoes, including clothes markings & sizes, as well as shoe size. List each item of clothing, with a description of any unusual cuts, design markings, pockets, colors, patches, etc. Also list, with detailed descriptions, all effects without intrinsic value, such as gum, food, soap, papers, letters, tobacco, etc., giving brands when applicable: Remnants of Brown cloth flyers jacket, no size.
 GHEE coveralls, no size.
 OD shirt, no size.
 OD trousers, no size.
 White cotton undershirt, no size.
 Parachute.
16. Give description of any vehicle found in the area that could be connected with the death of the deceased None involved
 (Type) (M Serial No.) (Organization) (Serial No. & Type) of each gun)
17. Give exact location of remains in vehicle before removal
 None involved
18. If buried in a coffin, give description and markings
 French V-Type, no markings.
19. List names of all other deceased persons buried in the vicinity. Also give available information concerning the cause & place of each that may assist in identification of these remains
 Men listed on correspondence taken from Clichy cemetery.
20. Other pertinent information which would aid in establishing identity.
 Fingerprints and Teeth chart impossible.

ROBERT L. STEINER 1st Lt. 0-1593864 3049 QM Graves Reg. Co.
 (Individual in Charge of Disinterment) (Rank) (ASN) (Organization)

14 July 1945
 (Date)

AGRC FORM No. 11
Revised 16 Sept. 1946
Formerly "Check List
of Unknowns")

X-150

IDENTIFICATION CHECK LIST

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

Unknown X -150

Cemetery Solers, FrancePlot H Row 8 Grave 147
155 SK

Date reprocessed

1. ~~Arrival at cemetery~~ 26 February 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 Mobile Laboratory Central Identification
(Name and organization)Point, Strasbourg, France4. 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>Remnants of</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) Remnants of a parachute

(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?

AIR FORCE

6. Description of Remains :

Age Utd Height Utd 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 light brown - straight - approx. 5" long
(Color, length, quantity, curly, wavy, straight, whorls, or definite parting)

Hair None
(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 **skull missing**
(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 **dark brown**
(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 **Utd**
(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 hands missing

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

9. Remarks Remains received in skeleton form, with all bones badly fractured. Remnants of clothing badly decomposed no markings evident. Clothing and debris fluoroscope results negative. Estimated weight of remains 4 Lbs. As no means of identification was found the deceased remains to be unknown. 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.

Ellsworth T. MacIntyre

ELLSWORTH T. MAC INTYRE

(Officer's Name)

Captain

Rank

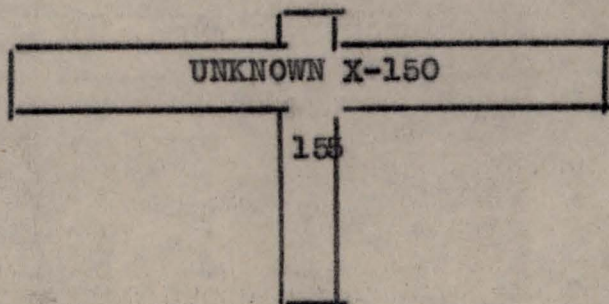
QMC

Service

Central Identification Point.

(Organization)

GRAVE MARKER



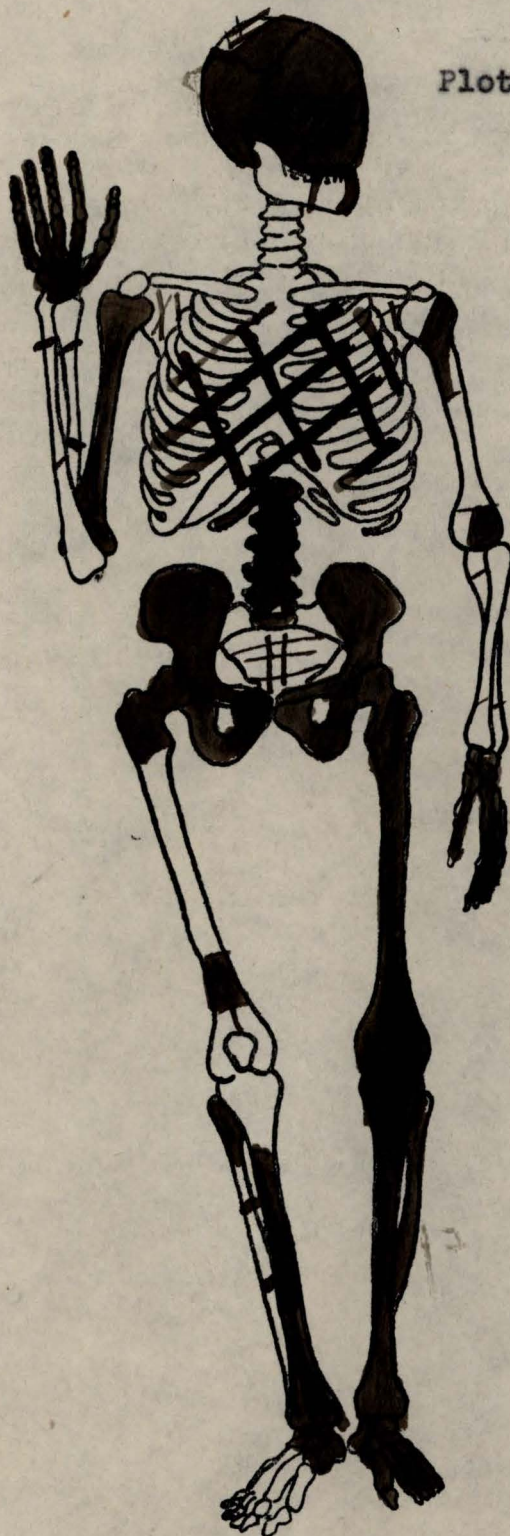
X-

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

SOLERS, Cemetery.

Plot H, Row 6, Grave 147



31

X-150 Solers, France
Plot B, Row X, Grave 147
155 &

C. R. & E. DIV.
OFFICE OF THE CHIEF QUARTERMASTER
H.Q. COM. ZONE, ETOUSA

TOOTH CHART

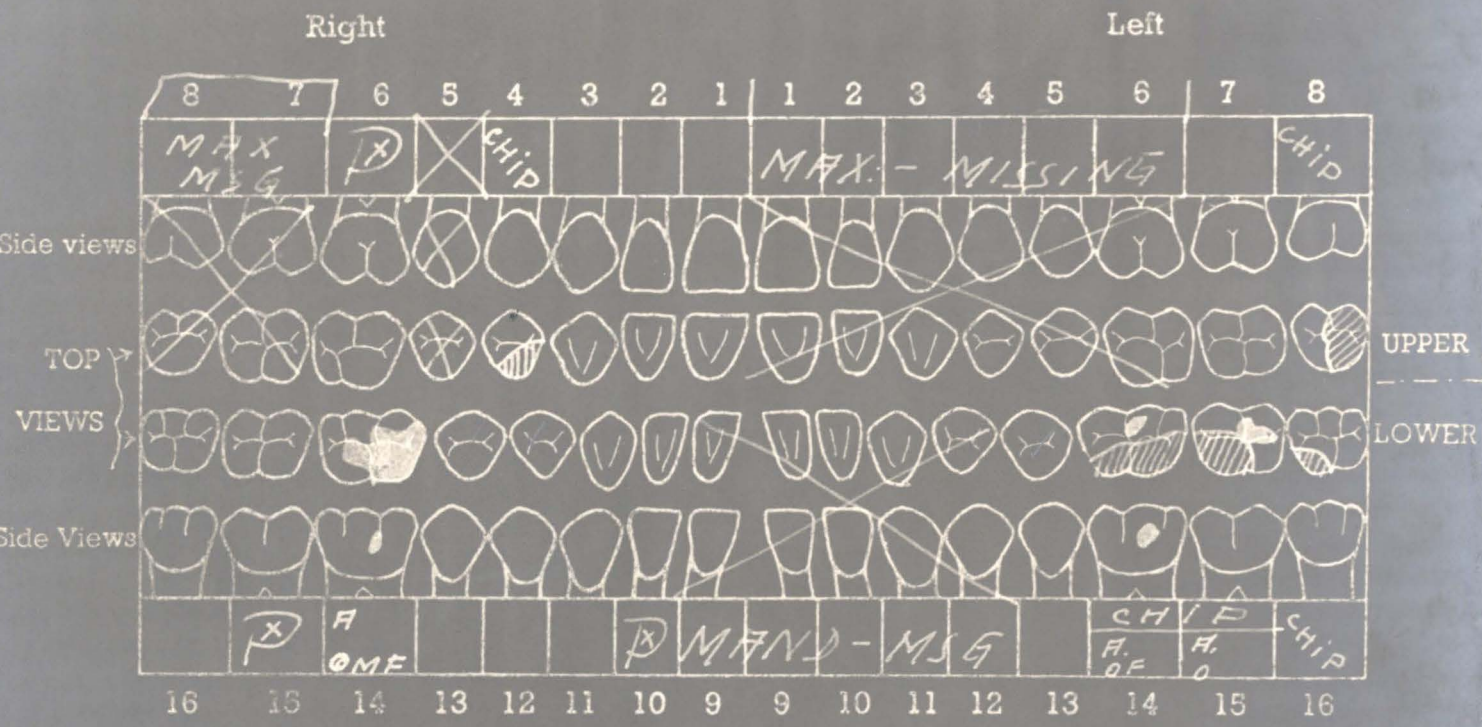
25 February 1947
Date

UNKNOWN X-150

Last Name	First	Initial	Rank	Serial No.
-----------	-------	---------	------	------------

Unit	Organization
------	--------------

Place of Death	Date of Death	Cause of Death
----------------	---------------	----------------



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.

Laurence G. Shaw 162
Signature of Officer or other person who prepared Tooth chart

Elsworth T. MacIntyre
Verified by G. R. S. Officer
ELSWORTH T. MACINTYRE
Captain QMC 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

Maxilla from R7 to R8, and L1 to L6 is posthumously missing. Note: The two teeth shown as L7 and L8 may possibly be L6 and L7 instead. There was only a fragment of maxilla attached to the two teeth; making it impossible to determine accurately which two left molars were actually present. R5 was missing before death, and R6 posthumously.

Mandible from R9 to L12 is posthumously missing. R10 and R15 are posthumously missing. Teeth are average size. Alignment is good.

88

RESTRICTED

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

REPORT OF BURIAL

19 July 1945

Unknown X-150
Last Name

AMERICAN

TM 10-680 AND AR 30-1815

Unk
Serial No.

Vicinity of
Paris, France

Time and Date of Burial
130 hrs 13 July 1945

Grave Number
155

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

If No Identification Tags No identification tags were found on the remains.

How were remains identified? Approx 15 lbs of remains in advance state of decomposition. A small portion of the burned torso was all that was found. Fingerprints & tooth chart impossible. See reverse side of form.

What means of identification were buried with the body?

GRS Emergency Tag

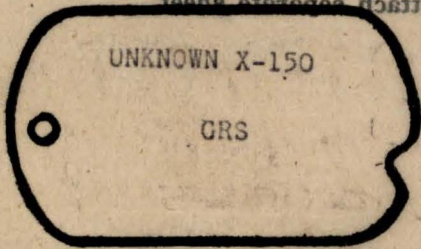
To determine Right or Left use Deceased's Right and Left.

Who is buried on:

Deceased's Right:	Thomas E Joyner	31665168	s/sgt	31st Bomb Grp	156
	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	Armand J La Belle	31123399	T/5	162 Labor Sup Cen	154
	Name	Serial No.	Rank	Organization	Grave No.

If this is an isolated burial, make a sketch of the TOOTH CHART

Signature, 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

Religion: Unknown

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

REBURIAL

NONE

Grave marked with wooden cross lettered "FLIEGER TUKE - U.S.A. 29-5-44". Markings were nearly obliterated from weather conditions.

Previously buried in Clichy Cemetery

Plot 14 Row 10 Grave 26

Paris, France

Signature of Officer or other person reporting burial
Robert L. Steiner
Verified by G. R. S. Officer

ROBERT L. STEINER, 1st Lt.
3049 QM Graves Reg Co

RESTRICTED

8	1	0
1	0	1
0	0	0
2	2	2
3	3	3
5	5	5
1	1	1
3	3	3
2	2	2
0	0	0
1	1	1
0	0	0

Deceased's Right
Deceased's Left

RESTRICTED

RECORD ON BURIAL

Take Fingerprints of Both Hands. If unable to obtain a complete set of Fingerprints, Take Those You Can, and fill in the following :

Height: UNOBT Laundry Marks: None
Weight: UNOBT Number of Rifle: None
Color of Eyes: UNOBT Wear Glasses? Unk
Color of Hair: Brown Tooth Chart Attached? No
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.

Remnants of the following clothes were found on the remains:

- Brown cloth Lier's jacket - no size
Green HBT coveralls - no size
OD shirt - no size
OD trousers - no size
White cotton undershirt - no size.

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

Parachute

Form with fields for Date, Cause of Death, Name of Deceased, and other identification details.

Form with fields for Last Name, Row Number, Time and Date of Burial, and other details.

TOOTH CHART

If this is an Isolated Burial, make a Sketch of the location, oriented with Permanent Landmarks.

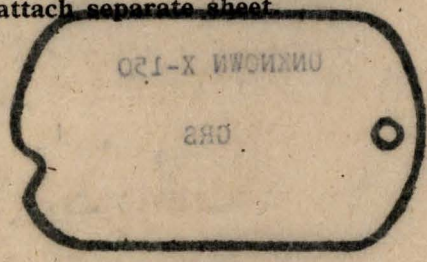
If more space needed attach separate sheet.

Indicate North

Table for tooth chart with columns for Deceased's Left and Deceased's Right, and rows for teeth 1-8.

Indicate: missing natural teeth by X; crowns by O; fillings by square; Bridges by triangle; missing artificial teeth by circle; linkings anchor teeth; replacements by artificial teeth by X.

Form with fields for Emergency Address, Address, Religion, and other information.



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

REBURIAL

Previously buried in Cemetery
Plot in Row 10 Grave 20
Paris, France

RESTRICTED