

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 un~~id~~ Starnold X1046

SUBJECT

QMC FORM 1121
1 Aug 45

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
INTRAOFFICE REFERENCE SHEET

DUE, HOUR AND DATE _____

1 NO.	2 FROM—	3 TO—	4 DATE	5 MESSAGE
1	Liaison Office	Ident Br Mem Div Attn: Mr. Fisher	18 Nov 1952	<p>QMOML 293 Unk St. Avoild - X-1046</p> <hr/> <p>Inviting your attention to German burial record in file for McNally, Paul W., 31 459 620, as per conversation with Mr. Fisher of your Branch.</p> <p>1 Incl 293 file (X-1046)</p> <p><i>Hinnan</i> Hinnan 52321</p>

THIS FORM WILL REMAIN PART OF THE OFFICIAL FILE

MAT
File
16 Nov 52
10/28/52
210710

7887 GRAVES DETACHMENT

APO 757

293unk St. Avold X-1046 *ms*

Attached hereto are case papers for an approved unidentifiable case which are considered to be of investigative importance. Records of this headquarters indicate these case papers were not previously forwarded to OQMG for:

UNKNOWN X - 1046 St Avold

(FOC) ST AVOLD

*Chay
M...
11-20-50*

*File - non
18 Oct 51
M. Martin
Ed (m)*

Mc NALLY, Paul
Familien- u. Vorname: Mc Nally Paul W. [unclear]

geboren am 2.2.19 in: [unclear] Kreis: [unclear]

Truppenteil:

Inf. Regt. No. Unknown 8195
Dienstgrad: Soldat

Erkennungsmarke: 315 091 I B 8595

315091 IV B

Tag des Todes	Ort des Todes (over)	Beerdigt am
31.1.45	Frontort bei Merville	31.1.45
31.1.45 - 5.2.45	bei Merville	31.1.45

Lage und Nr. des Grabes: (over) Frontort bei Merville Grab Nr. 27

Gemeldet durch: P.L. Ref. I. W.G.O. Waff. Trupp.-L. 31.
E. F. [unclear]

PLACE OF DEATH: ZIPSENDORF near Malschwitz, POW hosp.

PLACE OF BURIAL: Cem. Zipsendorf near Malschwitz, Grave 58

~~Remains as another~~

Another Remains recovered from the cemetery of
Zipsendorf have been identified as MARSHALL,

Paul W.

no correspondence on subject file containing the
possible name of information

a. b. h.
4/2/53

CHECK LIST FOR UNKNOWN

UNKNOWN X- 1046
 CEMETERY ST AVOLD, FRANCE
 PLOT H ROW 14 GRAVE 1890

Arrived at cemetery 8 July 1945 From Unknown
 (hour) (date) (collecting point)

Place of death Unknown
 (name) (coordinates & landmarks)

Remains recovered by 3046th QM GR Co
 (name and organization)

Evacuated to cemetery by 3046th QM GR Co
 (name and organization)

Is load list attached No Are names of deceased found in same
 (yes-no) area as this Unknown started No Are circumstances described

(yes-no) which may indicate organization of the deceased No If only
 (yes-no) part of a body was received, was a careful search made for other

parts of Unknown Not applicable
 (yes-no)

If remains come from vehicle, plane, etc: Unknown
 (type of vehicle or plane,

nickname serial number, organization or symbols)

Crew list Not applicable
 (names of other deceased and positions in which found)

If a tank, which hatches were free and available for escape use Not applicable

If organization to which vehicle or plane was assigned or if names
 of all other deceased are not known, give detailed information con-
 cerning vehicle or plane Not applicable
 (parts of markings or symbols) (burned)

(pierced by shell fire - where) (found in town, field, by road) Not applicable

(damaged by mine explosion) (names of men who escaped) Not applicable

(description of other vehicles or planes in area)

Detailed description of personal effects None
 (Indicate exact pocket

or part of body where found)

20046

Description of clothing and equipment: (If clothes do not fit, obtain sizes from body measurements)

Item	Clothing Markings	Sizes	Color	Indicate unusual marks, wear, tears
Headgear (type)				
Raincoat				
Overcoat				
Jacket, Field				
Jacket, Combat	Deceased was naked. No clothes found			
Mackinaw				
Sweater				
Jacket, HBT				
*Shirt, Wool OD				
Undershirt, Wool				
Undershirt, Cotton				
Trousers, HBT				
*Trousers, Wool OD				
Belt, Web				
Drawers, Wool				
Drawers, Cotton				
Leggins Wool				(unusual lacing)
Socks Cotton				
*Shoes (type)				
Overshoes				
Web Equipment (type)				
Other item				

*If body is nude, sizes of these items should be computed by measuring the remains. Cheverons or
Shoulder Patch _____ (type & location; shirt, jacket, coat, helmet)

Description of Remains:

Age _____ Height _____ Weight _____ Description of wounds _____
(yrs) (ft-in) (lbs)

Above information impossible to ascertain due to condition of body

Bandages or dressings _____ Scars _____
(length, width, location)

Tattoos **Impossible to determine**
(number, location - illustrate on sep. page)

Outstanding moles, warts or birthmarks **Unable to determine due to condition of body**
(yes-no) (description, location)

Sunburn or tan, other than hands and face **Body consists of only bones**

Tobacco stain on fingers or teeth **Teeth are clean, no flesh on fingers**
(designate where, extent)

Complexion **No flesh on face** Build **Unable to determine**
(light, med, dark, clear, pimples, pocks, freckles) (large, fat, thin, muscular)

Hair **No hair found**
(color, length, quantity, curly, wavy, straight, whorls, or definite parting, baldness, widows peak, distinctive cutting or other characteristics)

Sideburns **None** Mustache **None** Beard or goatee **None**
(color, setting, shape) (color, size, shape) (length, heavy, light, color, extent)

Eyes **Missing** Eyebrows **None found**
(color, setting, shape) (color, bushiness, extend across nose)

Nose **None found** Ears **None found**
(size, shape, straight) (Size, set close to or far from head)

Forehead **Unable to determine** Mouth **None** Lips **None**
(high, wide, wrinkled) (large, medium, small) (small, large, full)

Teeth **Upper false... Partial plate on botton, see attached teeth chart**
(white, size, unevenness, spacing, noticeable crowns, fillings, extractions)

Chin **None** Cheekbones **None**
(prominent, receding, pointed, dimple, double) (high, normal)

Jaw **None** Circumference of head in inches **21 inches**
(large, small, normal) (hat band)

Neck **None** Larynx **None** Shoulders **None**
(size, long, short, normal, wrinkled) (prominent, normal) (broad, straight, small, rounded)

Arms **Unable to determine**
(length) (muscular, color, extent & quantity of hair)

Hands **Unable to determine, no flesh on body**
(vaccination scar, size of wrists) (large, small, normal, calloused-noticeably)

Unable to determine
(marks on fingers indicating that rings were worn)

Fingers Unable to determine
(short, thick, long, slender; size of knuckles) (missing fingers or joints)

Unable to determine

(Unusual characteristics of fingernails)

Chest Unable to determine . few bones and skull is all that remains consist of
(size at nipples, color, quantity & extent of hair, large, small, normal)

Back Unable to determine (quantity and extent of hair) Waist Unable to determine
(size at naval, appendectomy, amount & color of

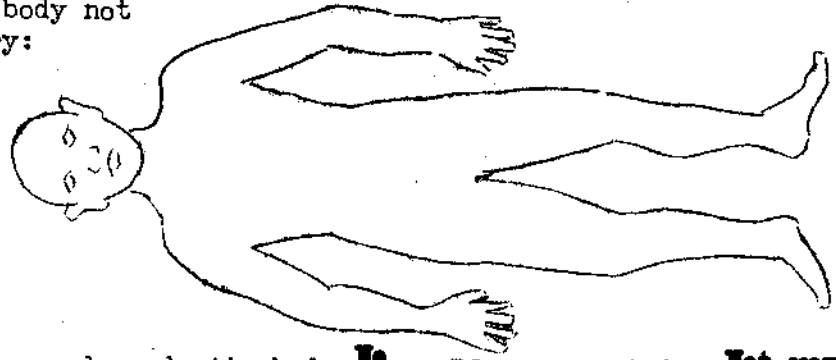
hair) Circumcised Unknown Pubic hair None Hernioplasty Unable to determine
(yes-no) (color) (yes-no) (location)

Legs Unable to determine
(inseam) (muscular, knock-kneed, bowed, normal) (quantity, color & extent of hair)

Feet Unable to determine (size, corns, callouses, flat) Toes Unable to determine
(slender, straight, crooked, overlap)

Evidence of healed fractures Unable to determine
(nose, arms, legs, etc.)

Black out parts of body not received at cemetery:



Have photographs been made and attached No If not, explain Not warranted
(yes-no)

Have fingerprints been placed on GRS #1 No If not, explain No flesh on fingers
(yes-no)

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

Remarks: _____

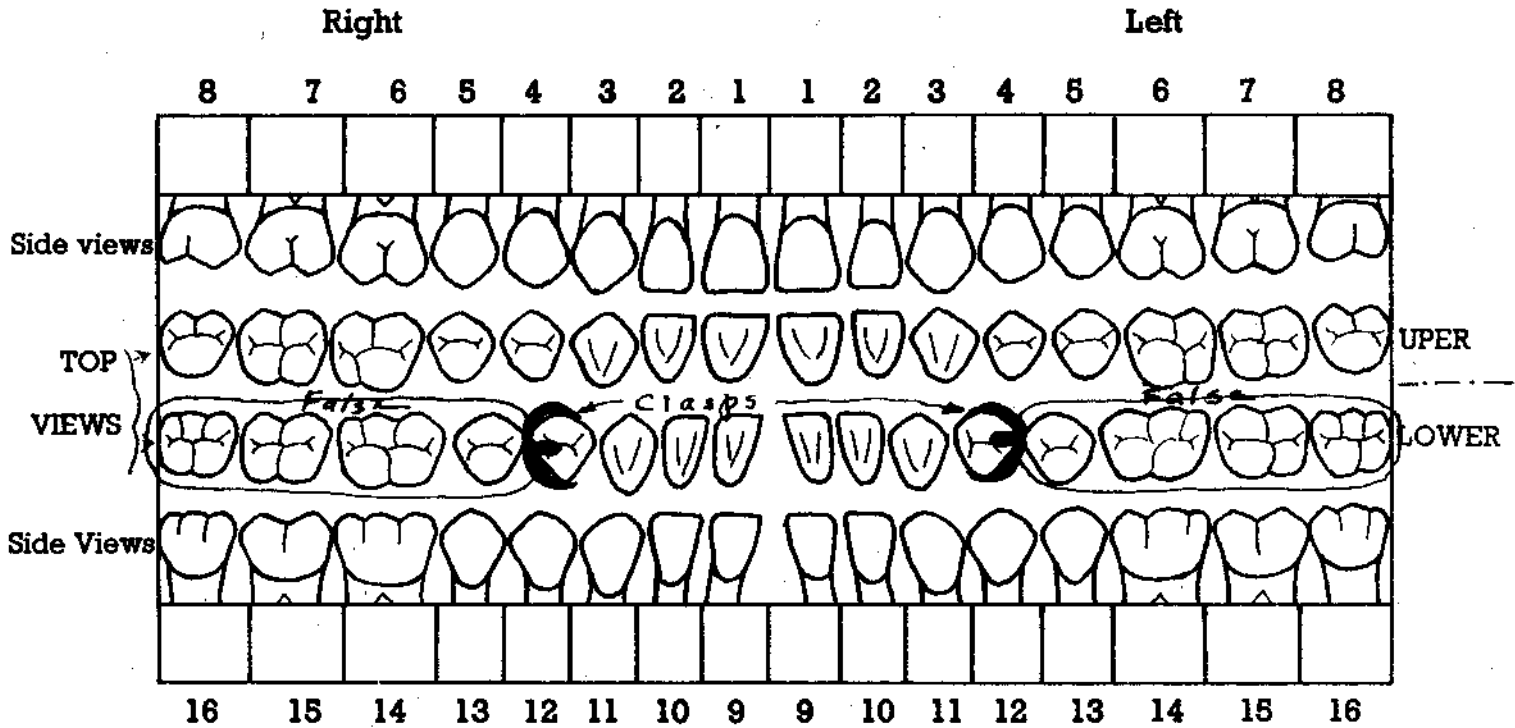
Robert D. Heilman

Signature of GRO and Organization
ROBERT D. HEILMAN, 1st Lt., Inf., 610th ON GR Co

TOOTH CHART

14 Nov. 1945

UNKNOWN L-1048			UNKNOWN		Date
UNKNOWN	First	Initial	Rank	UNKNOWN	Serial No.
UNKNOWN	Unit	UNKNOWN	Organization	UNKNOWN	
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), 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.

Upper teeth are false. Lower teeth consist of eight natural teeth and the rest are false.. See above

S/ Gordon Erickson, Sgt., 610th QM SQ Co

Signature of Officer or other person who prepared Tooth chart

Gordon Erickson
GORDON S. ERIKSON, 1st Lt., Inf., 610th QM SQ Co



MISSING TEETH... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



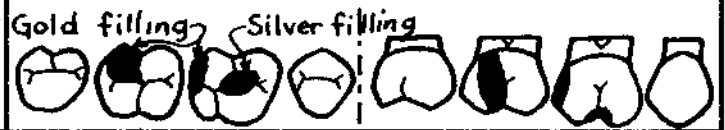
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



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 :

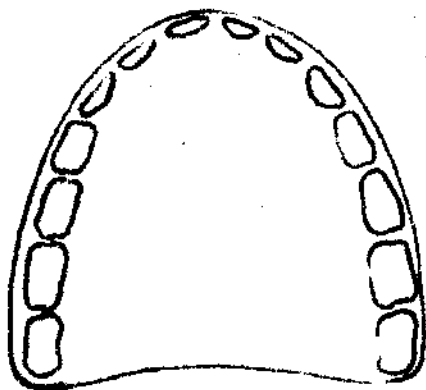


CARIES (CAVITIES)... Outline location and size of cavity, shade in thus :

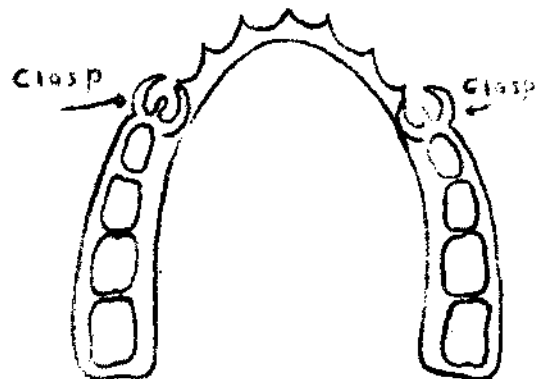


DENTURES (PLATES)... Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

ADDITIONAL SPACE FOR FURTHER REMARKS



Upper



Lower

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
INTRAOFFICE REFERENCE SHEET

243 tank St. Avold X-1046



DUE, HOUR AND DATE _____

1 NO.	2 FROM—	3 TO	4 DATE	5 MESSAGE
2	Acting Chief Ident Sec Ident Br Mem Div	Chief Final Det Section Ident Br. Mem Div	21 Mar 51	<p><i>112</i></p> <p>1. Investigation in this Section proved conclusively that Unknown X-1046 (St. Avold) cannot be associated with T/5 Banville for the reasons outlined below:</p> <p>a. Subject decedent was driver of a tank which received a direct hit, killing him and setting the tank on fire, on 10 August 1944, in the vicinity of Dangeul, France (48° 14'N - 0° 16'E).</p> <p>b. The remains of Unknown X-1046 are those of a POW who died in Stalag IVB at Zipsendorf, Germany (51° 27'N - 12° 17'E) and were buried in Grave 58, Cemetery Zipsendorf.</p> <p>2. An effort to locate the burial location of subject decedent will be made.</p> <p style="text-align: right;"> <i>Fedor</i> <small>NEFF</small> 74059 <i>Foy</i> <small>FOI</small> 72993 </p> <p>4 Incls Incls 1-3 n/c Added 1 Incl Incl 4 - 293 file McNally, Paul W., 31459520</p>
M. Martin				

*File
22 Mar 51
Sullivan
L Mark*

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
INTRAOFFICE REFERENCE SHEET

DUE, HOUR AND DATE _____

1 NO.	2 FROM—	3 TO—	4 DATE	5 MESSAGE
1.	Chief Final Det Section Ident Br Mem Div	Chief Ident Sec Mem Div ATTN: Mr Foy	11 Jan 1951	<p>SUBJECT: Recommended Association.</p> <p>1. The "Re-examination of Records of Nonrecoverables" indicates that Unknown X-1046, St Avold, may be the remains of BANVILLE, Joseph A., T/5, 11 049 470, based on the following identifying data:</p> <p>a. Tooth Chart, dated 14 Nov 1945, for X-1046 and sketch of denture on reverse side of tooth chart, compares favorably with BANVILLE's dental record. (Complete upper dentures and eight (8) natural teeth in lower jaw).</p> <p>b. Height compares favorably.</p> <p>c. Favorable color of hair.</p> <p>2. It is recommended that the Field be instructed to reexamine teeth and denture for verification of the 8 natural teeth as indicated on original tooth chart. It is further recommended that the Field be requested to make a thorough search of their files for any information as to place of death of X-1046, or any information as to where the remains were recovered, which may further substantiate the identification of X-1046 as BANVILLE.</p> <p>3. Attached files are forwarded for necessary action.</p> <p>4. It is requested that this section be advised of result.</p> <div style="text-align: right;">  WASSON 73472 </div> <div style="text-align: right;">  NEWBAKER 75926 </div>
<p>3 Incls</p> <ol style="list-style-type: none"> 1. 293 file for Unk. X 1046, St Avold 2. 293 file for BANVILLE, Joseph A. 11049470 3. Dental Chart 				
<p>Marks</p>				

DENTAL CHART

Unknown X- 1046 St Avold
T/C Nov 14 12 Sept
1945. 1950

NAME Banville, Joseph A
T/5 11049470
KIA 10 Aug 1944 in Tank 3039633
vic Dangeul, France (48.14N-0.16E)

R-8	FULL	X
R-7		X
R-6		X
R-5		X
R-4	UPPER	X
R-3		X
R-2		X
R-1		X

R-8	
R-7	F
R-6	U
R-5	L
R-4	L
R-3	
R-2	
R-1	U

DEN-	
L-1	X
L-2	X
L-3	X
L-4	X
L-5	X
L-6	X
L-7	TURE
L-8	X

P	
E	
L-1	R
L-2	
L-3	D
L-4	E
L-5	N
L-6	T
L-7	U
L-8	R
E	

R-16	X	X
R-15	X	X
R-14	X	X
R-13	X	X
R-12	Clasp	X
R-11		lda
R-10		X Posth
R-9		X posth

R-16	oA fA
R-15	X
R-14	X
R-13	X
R-12	fA moA
R-11	mS
R-10	mS dS
R-9	mS dS

L-9		X posth
L-10		X posth
L-11		X posth
L-12	Clasp	X
L-13	X	X
L-14	X	X
L-15	X	X
L-16	X	X

L-9	mS dS
L-10	mS dS
L-11	
L-12	fA moS
L-13	X
L-14	X
L-15	X
L-16	

Upper Teeth false.
Lower teeth consist
of 8 Natural teeth.
Rest of teeth false.
(See Sketch on re-
verse of T/C)
Est 5'9".
Hair:Dk Brown

Est 5'10"
Hr:Brown
Est Age:
27-30
FULL UPPER DENTURE.
Partial lower replacing
R15,14,13,12 & L-12,13,14
& 15.

DENTAL: 31 Aug 1943 (1 yr prior death)
5'6" 132. Hair: Brown
Age: 25

HEADQUARTERS
7887 GRAVES REGISTRATION DETACHMENT
OPERATIONS DIVISION
APO 757 (Liege) US ARMY

GROP 200.2 - (R-997-F)

1 March 1951

SUBJECT: Identification of World War II Deceased

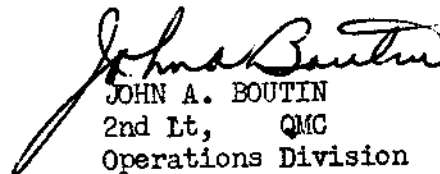
TO: The Quartermaster General
Washington 25, D. C.
ATTENTION: Memorial Division

1. Reference is made to radio, your Office, DA 49706, dated 22 February 1951.


2. Forwarded herewith for your information is all information available to this office, concerning place of death, for Unknown X-1046, USMC St Avold, France.

FOR THE COMMANDING OFFICER:

Incls a/s


JOHN A. BOUTIN
2nd Lt, QMC
Operations Division

293 Unknown X-1046 (St. Avold)
me


File
21 March 51
M. Marten
2d Sec

OJMO DEPT OF ARMY WASH DC

RELATE

FEB 51

UNCLASSIFIED

CO 7887 ORDNANCE DET
LYONS BELGIUM

DEFENSE

DA 49706

FROM OJMO

REPT REPT INVESTIGATION ARMA BRANCH FOR MAY 1946 BY AVOLD ON INFO
CONCERNING PLACE OF DEATH

Handwritten signature

FEB 21 4 13 PM '51
O.D.M.S.
TEL & CAP SECTION

M. Martin:can
Foy
cc—Administrative Section

UNCLASSIFIED

CAPT JOHN M. WITT

GRAVES

WARR 273 1-1046 (BY AVOLD)

52462

Handwritten signature

J. C. WHICHEY LT COL
MEMORIAL DIVISION

Handwritten initials

CGSC DEPT OF ARMY WASH DC

UNCLASSIFIED

CG 7087 COMBAT DIST
LIEGE BELGIUM

UNCLASSIFIED

DA 40774

MEMO 3290
WOL 47985

FROM QUART USMC MEMO 3290 AND MEMO WOL 47985 PD MEMO WOL 47985 ADVISED
TRAY 1046 ST AVOLD DISASSOCIATED

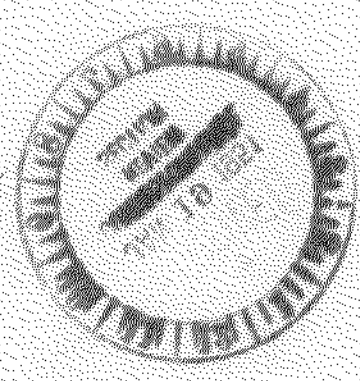
37
6
ON 14 4 14 PM '51
D. G. W.'S
TELECOM SECTION

MEMO 3290 IS DA 1010 77773 (15 Jun 51)
WOL 47985 IS MC OCT NO 47985 (9 Oct 50)

Cy furnished: Adm Sec
M. Martin/rar 7/51
Foy *MF*

UNCLASSIFIED

191700Z
JAN 51



EAT
E.F.
TE

CRAYES

QUART R. J. FISHER EXT 52462
293 - Unk. I-1046

JAN 51

J. C. WHICHER
LT COL, GSC, USM DIV

St. Avold, France

TH

OMC 064

77773

1951 JAN 17 01 23

64

0157

DUE 13
 RR 15
 DE 156
 R 151530Z
 1951 JAN 17 2 17
 DEPARTMENT OF THE ARMY
 STATE COMMUNICATIONS OFFICE
 GGT (Z) TIME

7887 GR REG DET
 AGRC 3290
 151530Z
 OMC
 77773

293 hnt SA Arnold X-1046

FM 7887 GRREG DET LIEGE BELGIUM

TO OQMG DEPTAR WASH DC
GRAVES GRNC

Reply due ~~18~~ 19 Jan
 2:00 PM

REF NR AGRC THREE TWO NINE ZERO PD

FOR MEMORIAL DIVISION PD RQST STATUS MYLTR TWENTY ONE SEPTEMBER SUBJ

REINVESTIGATION FINDINGS RE XRAY ONE ZERO FOUR SIX ST AVOLD CHA TO

WHICH NO REPLY HAS BEEN RECEIVED PD END SCB ANLONG

16/1200Z

absd Screening
 11/20/50

mem (dd)



file
 18 Jan 51
 m. master
 dd sec.

fo
OQMG DEPT OF ARMY WASH DC

CO 7887 GREGG DET
LIEGE BELGIUM

UNCLASSIFIED

DEFERRED

X

FROM QMGNT

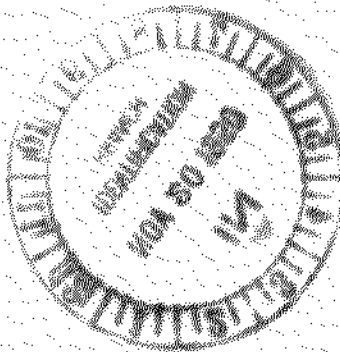
WCL 47985

RQST REPT FINAL RESOLUTION CARL J NAGLE 35406257 PD KRAY 1046

ST AVOLD DISASSOCIATED

293 - X-1046 St Avold

EWARWEE
BLANDES



UNCLASSIFIED

QMGNT

GRAY

QMGNT CAPT WEFF EXT 52462

OCT 50

D. A. REINER
CAPT QMG MEM DIV

293 NAGLE, Carl J. 35406257

QMC 202

43744 St Avold X1046
202

RECEIVED
173

75102

22 15 09

17118

2887 Graves Reg Det

MSG NO AGRC 2565

D.T.G. 211630Z

ACTION QMC

RC 28 5102

4405

RR UEPC

DE UFPC 89R

R 211630Z

FM 7887 GRREG DET LIEGE BELGIUM

TO OQMG DEPTAR WASH DC
GRAVES GRNC

SEP 25 2 05 PM '50
O.Q.M.G.
TELEGRAPH SECTION

REF NR AGRC TEO FIVE SIX FIVE RPT TWO FIVE SIX FIVE PD

FOR MEMORIAL DIVISION PD RE MYMSG AGRC ONE FIVE ONE SEVEN CONCERNING

XRAY ONE ZERO FOUR SIX ST AVOLD PD REPROCESSING FINDINGS WILL BE FWD

VIA AIRMAIL TWENTY TWO SEPTEMBER PD END SGD MULVANNIT

ST AVOLD - X1046

BASE - 2822

22/1000Z

202

RECORD AT

Memo (10)2

043. UNIC. FRANCE (ST. AVOLD)

A I R M A I L

HEADQUARTERS
7887 GRAVES REGISTRATION DETACHMENT
OPERATIONS DIVISION
APO 757 (Liege) US ARMY

GROP 200.2

21 September 1950

SUBJECT: Reinvestigation Findings

43unk St Avold X1046

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

per 43779, Carl J

1. Reference is made to radio, your Office, WCL 46424, dated 6 April 1950, concerning reinvestigation of Unknown X-1046, USMC St Avold, France, associated with unresolved casualty Pvt Carl J. NAGLE, 35 406 257.

2. Investigation results indicate Unknown X-1046 could not be identified as Pvt Nagle per latest processing findings. Reprocessing of X-1046 in the presence of an accredited anthropologist was effected. Subject processing findings determined the teeth, estimated age, height, weight of the completely articulated and homogeneous remains of X-1046, disagree with like physical characteristics of Pvt Nagle, as indicated on OCMG Form 371 and available dental information for the deceased. Forwarded for your information is OMC Form 1044 with narrative covering latest processing of Unknown X-1046.

3. In view of the latest anthropological findings, it is recommended that Unknown X-1046 be disassociated with subject casualty.

4. Remains concerned will held in suspense status by this headquarters pending reply from your Office.

FOR THE COMMANDING OFFICER:

C. W. Steinsiek
C. W. STEINSIEK
Capt, OMC
Operations Division

1 Incl
OMC Form 1044
(X-1046)

*200-11-11
12/9/50*

A I R M A I L

E.O. 3336 PRIORITY

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN
UNKNOWN-X-1046

2. DATE OF REPORT
12 SEPT. 1950

3. NAME OF CEMETERY
USMC ST-AVOLD

4. PLOT	5. ROW	6. GRAVE
D	12	21

7. DATE OF	
DIS INTERMENT	REINTERMENT
//////	//////

PHYSICAL DESCRIPTION

8. ESTIMATED ~~WEIGHT~~ **27-30**

9. ESTIMATED HEIGHT
5'10"

10. COLOR OF HAIR
BROWN

11. RACE
UTD

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

EMBOSSSED PLATE RECEIVED PINNED TO BLANKET CONTAINING REMAINS.

13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES

NONE FOUND

14. WAS BODY BURNED?
 YES NO

TO WHAT EXTENT?

15. WAS BODY MANGLED?
 YES NO

TO WHAT EXTENT?

SEE SKELETAL CHART

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

NONE EVIDENT

17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

NONE FOUND

Handwritten signature and date: 12/29/50

20. MASS BURIAL CERTIFICATE (IF APPLICABLE)
(wherein segregation in whole or parts is impossible)

I certify that the Group Remains consist of _____ decedents based on the presence of one or more of the following _____ Number anatomical parts:

SIGNATURE OF MEDICAL OFFICER

21. Remarks and additional information

REMAINS ARE IN SKELETAL FORM, NO FLESH, TEETH RECEIVED WITH REMAINS.
(SEE TOOTH CHART)

EST. AGE---27-50

EST. HT.---5'10"

TECH. H. WOMACK

~~CLERK~~
~~GREEN~~
~~GREEN~~

CLERK:
GREEN

I certify that I have personally viewed the Remains of deceased and that all resulting information has been recorded to the best of my knowledge

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION | SIGNATURE

H. Womack

MAN
WOMACK

CHART "A-1"

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

X-1046
ST. AVOLD
D-12-21

RIGHT

LEFT

STERNUM



HUMERUS 35.7 cm

ULNA 27.7 cm

RADIUS 26.5 cm

FEMUR 46.8 cm

TIBIA 38.7 cm

FIBULA 38.6 cm

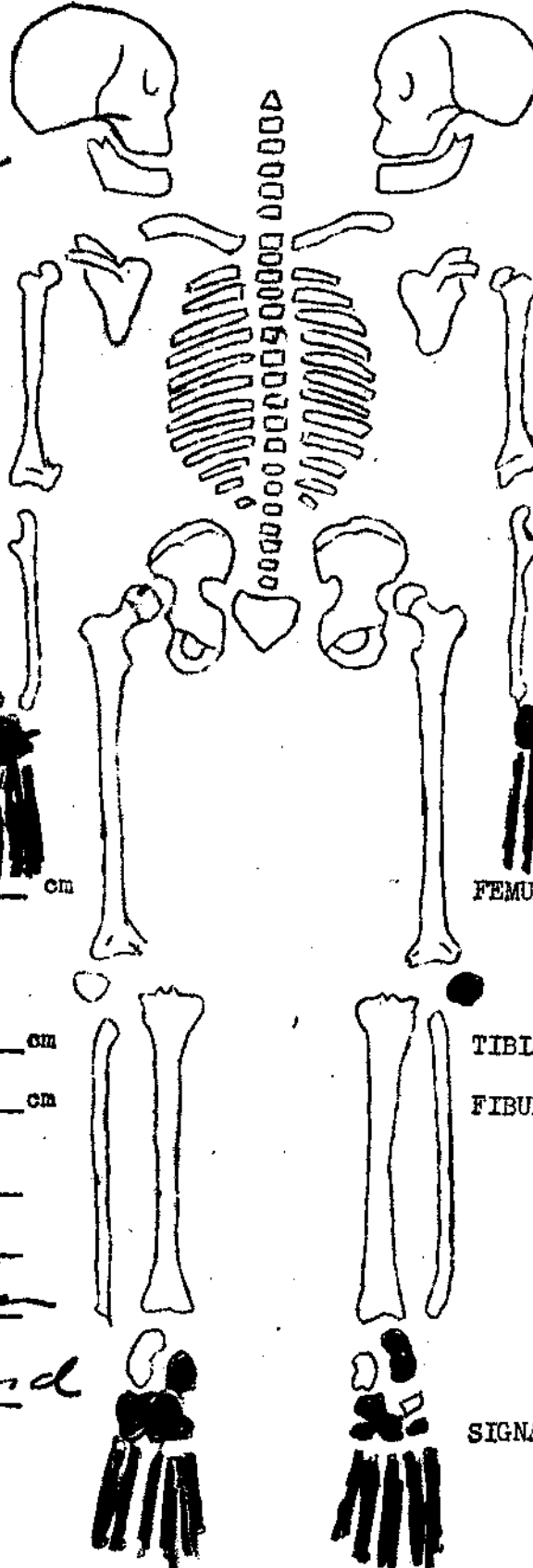
Est. Age 27-30

Est. Height 5'10"

Color Hair Brown

Healed none
Fractures found

Flesh? none
BURNISS none
Mortuary plate
Teeth - YES



SKULL _____ Inc

HUMERUS _____ cm

ULNA _____ cm

RADIUS _____ cm

FEMUR _____ cm

TIBIA _____ cm

FIBULA _____ cm

- Missing
- Burned
- Fractured
- Shattered

SIGNATURE Scules

DR THARDY

TOOTH CHART

X-1046
St. O'old D-12-21
E.O.-3335

Not comparable to form 371 for

12 Sept 50
Date

Nagle, Carl J.

Pvt.

35 406 257

Last Name

First

Initial

Grade

Serial No.

Remain w/ X-1046

Unit

Organization

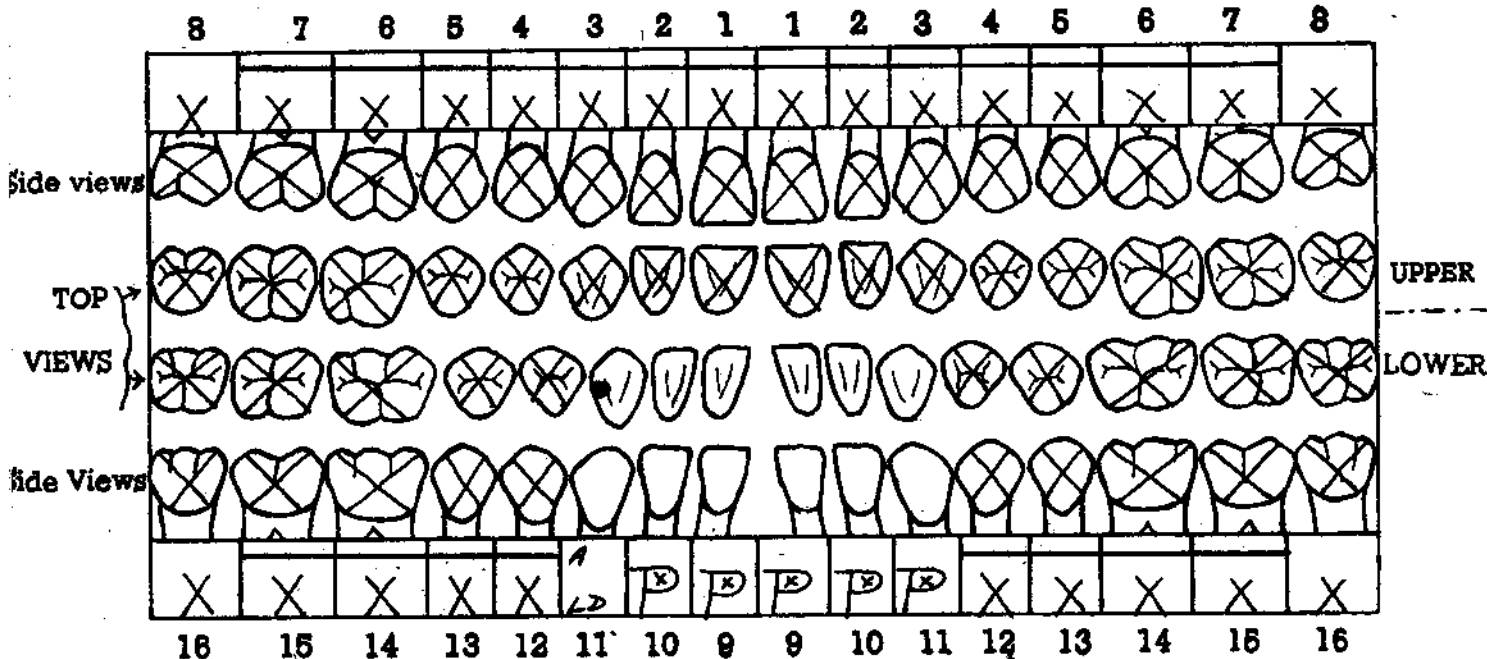
Place of Death

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), 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.

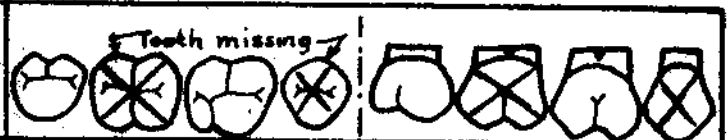
Harold S. Wheeler

Signature of Officer or other person who prepared Teeth chart

Verified by G. R. C. Officer

*date 12/21/50
H. S. Wheeler*

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

Lower anterior teeth, only teeth present
Full pink acrylic upper denture replaces the upper teeth.
Pink acrylic partial lower denture replaces R15, 14, 13, 12 and L12, 13, 14, 15. Clasps on R11 and L11. Lingual rests on R11 and L11. Lingual bar encased in pink acrylic connects the right and left saddles making the lingual acrylic continuous.
Posthumously missing R10, 9; L9, 10, 11

NARRATIVE

Exhumation Order # 3335

The following remains ^{was} ~~was~~ reprocessed and result, shown below:

	<u>Age</u>	<u>Height</u>	<u>Weight</u>	<u>Color of hair</u>
X-1046 (Remains)	27-30	5'10"	Not Favorable	Brown
NAGLE (371)	35	5'6"	143	Brown

There is complete articulation throughout the remains. The remains are homogeneous. Teeth, age, height and weight do not agree with Form 371 for Nagle.

H. Womack
HOUBTON WOMACK
Embalmer - Lab. Tech.

Alexander Tardy
Dr. ALEXANDER TARDY
M.D., D.A. (Anthropology), B.S.D., O.S.D.

HEADQUARTERS
7867 GRAVES REGISTRATION DISTRICT
APO 757 (Liege) US ARMY

ANTHROPOLOGICAL REPORT (continued)

Annex to GAO Form 1044 for

K1046
See Narrative

2. CONCLUSIONS

- a. The remains of the following deceased should be individually identified as indicated:
- | | |
|--------------------------|------|
| (1) X-1046 | (6) |
| (2) <i>See Narrative</i> | (7) |
| (3) | (8) |
| (4) | (9) |
| (5) | (10) |
- b. The remains of the following deceased should be considered a Group Burial:
- | | |
|-----|------|
| (1) | (6) |
| (2) | (7) |
| (3) | (8) |
| (4) | (9) |
| (5) | (10) |

3. ADDITIONAL REMARKS

62

66229

DEPT ARMY COMCENTER
GREENWICH CAMP WING (Z)

1950 AUG 21 10 50

62

3000

AAAAAFKA55

RR UEPC

DE UFKAE 04

R 181430Z

Aug 21 3 10 PM '50
O.C.M.C.
TEL & CAB SECTION

293 unk Stavold X1046

FROM 7887 GRAVES

NO AGRC 226

D.T.G. 181430Z

QMC

66229

FM CO 7887 GRAVES REG DET LIEGE BELGIUM

TO OQMG WASHINGTON 25 DC

GRAVES GRNC

REF AGRC TWO TWO SIX SIX PD FOR MEMORIAL DIVISION PD RE MYMSG AGRC ONE

case # 2822

FIVE ONE SEVEN CONCERNING REPROCESSING ZXRAY ONE ZERO FOUR SIX ST AVOLD

NOT YET COMPLETED CMA RESULTS WILL BE FWD APRX TWENTY SEPTEMBER PD END

SIGNED BALLARD

20/0740Z

AGRC 1517

QMC
7560

14 JUN 1950



mer

8/23/50

293-unk. Stavold (X1046)

A

att

75609

FUN 82

212
293 Unk France (St Avold) X-1046

1950 JUN 15 14 19

2122

212

DEPARTMENT OF THE ARMY
STAFF COMMUNICATIONS OFFICE
GCT (Z) TIME
JUN 15 14 46
R 141100

JUN 16 8 52 AM '50

S. O. M. G. FROM
TEL & GND SECTION

CO 2887 GRREG
AGRC 1517
141100 Z

QMC

75609

FM 7887 GRAVES REG DET LIEGE

TO OQMG DEPTAR WASH DC

GRAVES GRNC

Reply due 9am
23 June 50

REF MR AGRC ONE FIVE ONE SEVEN PD FOR MEMORIAL DIVISION PD RE URMSC

4650

WCL FOUR SIX FOUR TWO FOUR INVEST OF XRAY ONE ZERO FOUR SIX ST AVOLD

293

NAGLE

RECORD ATTACHED

ASSOC WITH PVT CARL J NAGLE THREE FIVE FOUR ZERO SIX TWO FIVE SEVEN

CONTINUES CMA REPROCESSING FINDINGS WILL BE FWD APRX EIGHTEENTH

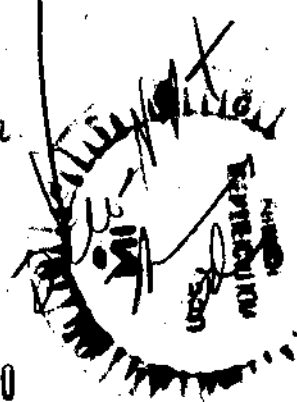
AUGUST PD RQST DATE OF BIRTH OF SUBJ BCD PD END SGD BALLARD

115/13202

Mem (H)

Unk. 293 file in screening mem

Reply made by [Signature]



X293 Unk - France (St Avold) (X1046)

AIRMAIL

FORMS 295
Hagle, Carl J.
SN-35406257

26 October 1949

SUBJECT: Additional Information

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

1. Reference is made to your radio AGRC 6449 dated 11 October 1949.

2. Dental chart at induction dated 9 June 1942 for Pvt Carl J. Hagle shows teeth missing R-1, 2, 3, 4, 5, 6, 7, 8, 14, 14, 15, 16, I-1, 2, 3, 4, 5, 6, 7, 8, 12, 14, 15, 16. Prosthetic dental appliances full upper denture serviceable Sr rank Admin shows a denture was supplied/lower partial - Lingual bar/replacing R-13, 14, 15 and I-12, 14, 15. No Form 79 found.

FOR THE QUARTERMASTER GENERAL:

T. N. MEYER
Lt Colonel, GSC
Memorial Division

AIRMAIL

Handwritten note:
1949
AGRC
New York, New York
AGRC
New York, New York

CMC 298

10540

293. U.K. - France X 17/49 46 (St. Avold) 296

FUN89 PA052

RR UEPC

DE UFPOC 13

R 111523 Z

FM HQ AGRC PARISNGDF

BS

UFHTO OQMG WASHDC

GRAVES GRNC

HQ AGRC PARIS
AGRC 6449
111523 Z
QMC
63897

D.I.G. _____
ATTN _____
EC IN NO. _____

OCT 11 1949

63897

AGRC REF SIX FOUR FOUR NINE

PASS TO MEMORIAL DIV

REQUEST ALL AVAILABLE DENTAL RECORDS FOR PVT CARL J NAGLE THREE

~~RECORD ATTACHED~~

293

FIVE FOUR ZERO SIX TWO FIVE SEVEN CMA TO AID IDENTIFICATION XRAY

~~RECORD ATTACHED~~

ONE ZERO FOUR SIX ST AVOLD PD AGRE SGD PECKHAM

CFN NAGLE 35 406 157

11/1603 Z OCT

UCT 12 8 20 AM '49
O.Q.M.G.
TEL & CAB SECTION

File
26 Oct 49
G. W. ROBERTS
Capt., AMO
Identification Branch

Mem (2) (2)
MEMORIAL DIVISION
OCT 15 1949
D. W. H. JR.

X 293 U.K. France X 17/49 St. Avold

X 293 Nagle, Carl J. (35,406,257)

JLU

USMC, ST. AVOLD, FRANCE
Plot Row 12, Grave 21
Date reburied: 20 Jan 49

Buried at deceased: ECKARD ROBERT A
0-691969 2 LT
Right: HOLLINGSWORTH A. J.
34946301 PVT

DISINTERMENT DIRECTIVE

SECTION A - DEWEY R. BELL
1st Lt CAV
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
3574 00000

DATE
15 01 48
DAY MONTH YEAR

NAME		SERIAL NUMBER	RANK	ARM	DATE OF DEATH
UNKNOWNX-001046				0	
CEMETERY					DISPOSITION OF REMAINS
ST AVOLD - METZ					0 3503 80
PLOT	ROW	GRAVE	COUNTRY	CODE	DIST. PT.
N	14	1890	FRANCE		
CAUSE OF DEATH					6

SECTION B - CONSIGNEE AND NEXT OF KIN

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

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED
UNKNOWN X-001046				9 Aug 48
IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY	
<input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER GRS	UNKNOWN		Melvin W Blackburn Embalmer NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
Mattress cover	Partial lower and full upper denture - Body complete - Ske- leton form - Disarticulated
OTHER MEANS OF IDENTIFICATION	
Report of Burial found with remains FILE	

MINOR DISCREPANCIES

None	18 MAY 1949 REPATRIATION BRANCH METZ DIV.
------	---

REMAINS PREPARED AND PLACED IN CASKET

DATE 12 Aug 48 BY Melvin W Blackburn, Embalmer

CASKET SEALED BY	EMBALMER (Signature)
Melvin W Blackburn, Embalmer	<i>Melvin W Blackburn</i> Melvin W Blackburn

CASKET BOXED AND MARKED	INSPECTED AND VERIFIED BY: All markings, plates and tags verified by:
DATE <u>12 Aug 48</u> BY <u>Melvin W Blackburn</u>	<u>JESSE C HARRELL 1st Lt CAC</u>

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

Final casketing by:
Jesse C Harrell
JESSE C HARRELL
1st Lt CAC

Jesse C Harrell
JESSE C HARRELL 1st Lt CAC, 7857 AGRC,
Zone 3 Hq. SIGNATURE OF GRS INSPECTOR

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

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

23 February 1949
Date

293 Unknown France X-1046 (St. Avoild)

SUBJECT: Unidentifiable Remains

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

1. The records pertaining to Unknown X- 1046 , Plot N ,
Row 14 , Grave 1890 , USMC St. Avoild, 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. 2607 , dated 5/1/48 . No
further information is available.

FOR THE COMMANDING GENERAL:

/s/ GEORGE L. FREEMAN
/t/ 1st Lt CMC
Actg Asst Adj Gen

Received 23 FEB 1949 0000
Not identifiable from
information presently
available

File in [unclear] 3-2-49

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

RRE 293

22 DEC 1948

(Date)

SUBJECT: Unidentifiable Remains.

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

1. The records pertaining to Unknown X 1046, Plot H
Row 14, Grave 1890, USMC St-Avoid, 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. 2607, dated 5/2/48.
No further information is available.

o.k.

FOR THE COMMANDING GENERAL:

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

24 FEB 1949

M. B. Holden

not identifiable from
information presently
available

QOMG

Incl # 21

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

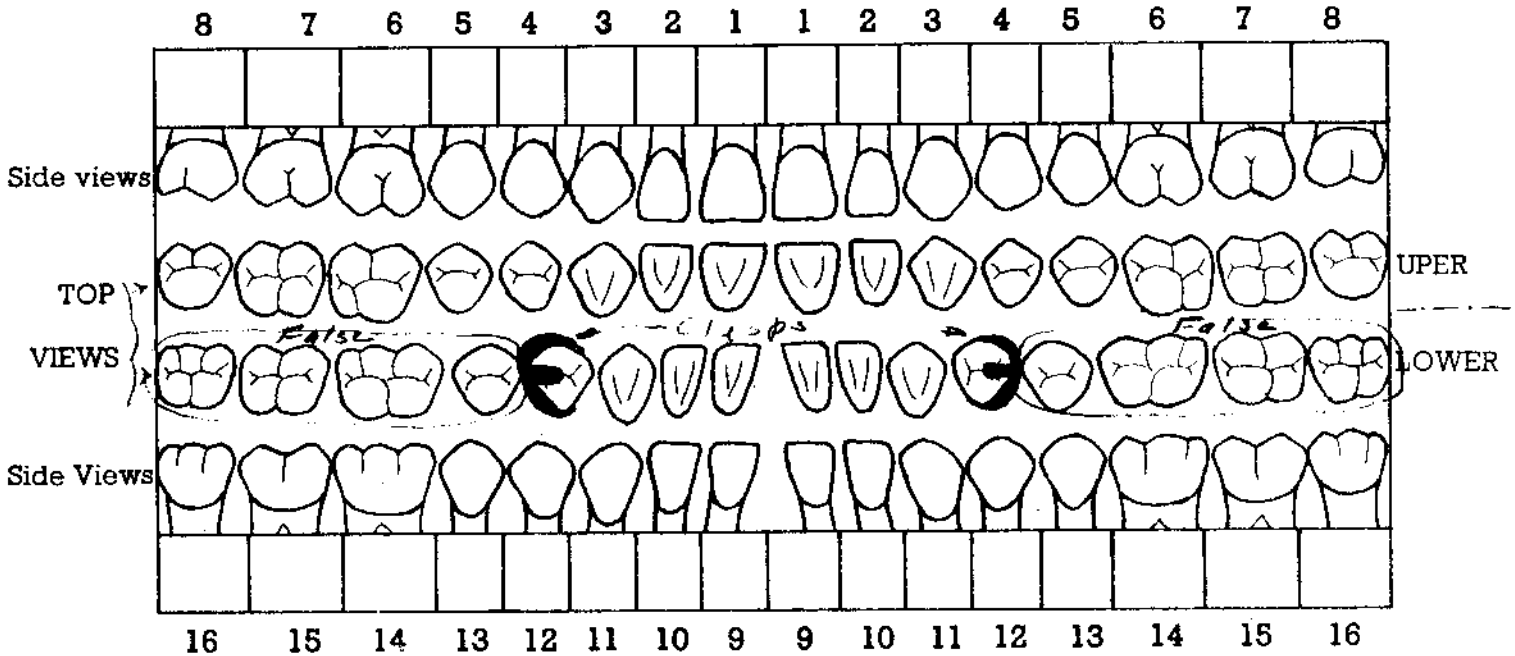
TOOTH CHART

14 Nov. 1945

UNKNOWN X-1046
UNKNOWN Name First Initial Rank UNKNOWN Serial No.
UNKNOWN Unit UNKNOWN Organization UNKNOWN
UNKNOWN Place of Death UNKNOWN Date of Death UNKNOWN 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), 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.

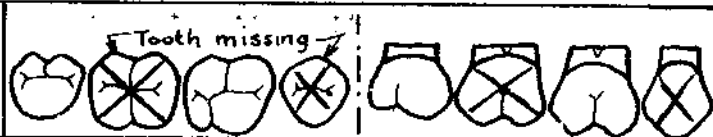
Upper teeth are false. Lower teeth consist of eight natural teeth and the rest are false.. See above

S/ Gordon Erickson, Sgt., 610th QM GR Co

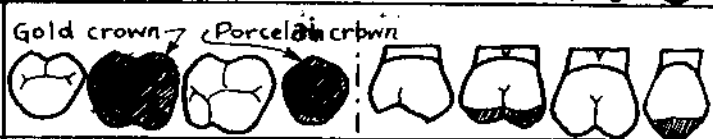
Signature of Officer or other person who prepared Tooth chart

ROBERT D. HEILMAN, 1st Lt., Inf., 610th QM GR Co

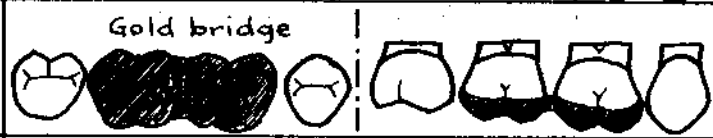
MISSING TEETH... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



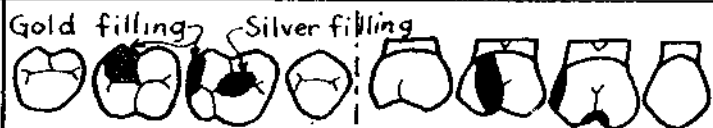
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



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 :

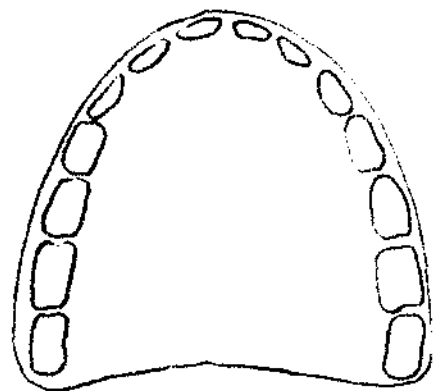


CARIES (CAVITIES). Outline location and size of cavity, shade in thus :

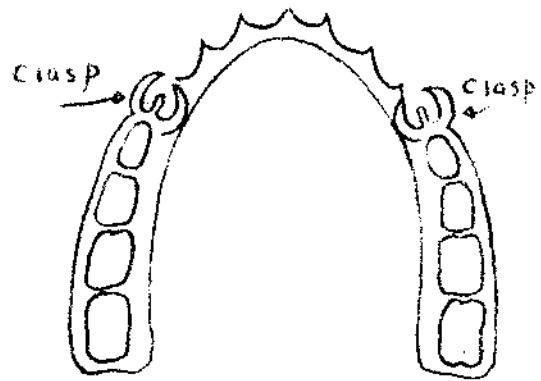


DENTURES (PLATES)... Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

ADDITIONAL SPACE FOR FURTHER REMARKS



Upper



Lower

UNKNOWN X- 1046
 CEMETERY ST AVOLD, FRANCE
 PLOT X ROW 14 GRAVE 1890

Arrived at cemetery 8 July 1945 From Unknown
 (hour) (date) (collecting point)
 Place of death Unknown
 (name) (coordinates & landmarks)

Remains recovered by 3046th QM SQ Co
 (name and organization)

Evacuated to cemetery by 3046th QM SQ Co
 (name and organization)

Is load list attached No Are names of deceased found in same
 (yes-no) area as this Unknown started No Are circumstances described
 (yes-no)

which may indicate organization of the deceased No If only
 (yes-no) part of a body was received, was a careful search made for other

parts of Unknown Not applicable
 (yes-no)

If remains come from vehicle, plane, etc: Unknown
 (type of vehicle or plane,
Not applicable)

nickname serial number, organization or symbols)

Crew list Not applicable
 (names of other deceased and positions in which found)

If a tank, which hatches were free and available for escape use Not applicable

If organization to which vehicle or plane was assigned or if names of all other deceased are not known, give detailed information concerning vehicle or plane Not applicable

(parts of markings or symbols) (burned) Not applicable

(pierced by shell fire - where) (found in town, field, by road) Not applicable

(damaged by mine explosion) (names of men who escaped) Not applicable

(description of other vehicles or planes in area)

Detailed description of personal effects None found
 (Indicate exact pocket

Not applicable

or part of body where found)

Description of clothing and equipment: (If clothes do not fit, obtain sizes from body measurements)

Item	Clothing Markings	Sizes	Color	Indicate unusual marks, wear, tears
Headgear (type)				
Raincoat				
Overcoat				
Jacket, Field	Deceased was naked. No clothing found			
Jacket, Combat				
Mackinaw				
Sweater				
Jacket, HBT				
*Shirt, Wool OD				
Undershirt, Wool				
Undershirt, Cotton				
Trousers, HBT				
*Trousers, Wool OD				
Belt, Web				
Drawers, Wool				
Drawers, Cotton				
Leggins Wool				(unusual lacing)
Socks Cotton				
*Shoes (type)				
Overshoes				
Web Equipment (type)				
Other item				

*If body is nude, sizes of these items should be computed by measuring the remains. Cheverons or
Shoulder Patch _____ (type & location; shirt, jacket, coat, helmet)

Description of Remains:
Age _____ Height _____ Weight _____ Description of wounds _____
(yrs) (ft-in) (lbs)

Above information impossible to ascertain due to condition of body

Bandages or dressings no Scars None
(length, width, location)

Tattoos Impossible to determine
(number, location - illustrate on sep. page)

Outstanding moles, warts or birthmarks Unable to determine, due to condition of body
(yes-no) (description, location)

Sunburn or tan, other than hands and face Body consists of only bones

Tobacco stain on fingers or teeth teeth are clean, no flesh on fingers
(designate where, extent)

Complexion No flesh on face Build _____
(light, med, dark, clear, pimples, pocks, freckles) (large, fat, thin, muscular)

Hair None found
(color, length, quantity, curly, wavy, straight, whorls, or definite parting, baldness, widows peak, distinctive cutting or other characteristics)

Sideburns None Mustache None Beard or goatee None
(color, setting, shape) (color, size, shape) (length, heavy, light, color, extent)

Eyes Missing Eyebrows None found
(color, setting, shape) (color, bushiness, extend across nose)

Nose None found Ears None found
(size, shape, straight) (Size, set close to or far from head)

Forehead Unable to determine Mouth None Lips None
(high, wide, wrinkled) (large, medium, small) (small, large, full)

Teeth Upper false... partial plate on bottom, see attached tooth chart
(white, size, unevenness, spacing, noticeable crowns, fillings, extractions)

Chin None Cheekbones None
(prominent, receding, pointed, dimple, double) (high, normal)

Jaw None Circumference of head in inches 21 inches
(large, small, normal) (hat band)

Neck None found Larynx None Shoulders None
(size, long, short, normal, wrinkled) (prominent, normal) (broad, straight, small, rounded)

Arms Unable to determine
(length) (muscular, color, extent & quantity of hair)

Hands Unable to determine, no flesh on body
(vaccination scar, size of wrists) (large, small, normal, calloused noticeably)

Unable to determine
(marks on fingers indicating that rings were worn)

Fingers Unable to determine
(short, thick, long, slender; size of knuckles) (missing fingers or joints)

Unable to determine
(unusual characteristics of fingernails)

Chest Unable to determine few bones and skull is all that remains of deceased
(size at nipples; color, quantity & extent of hair; large, small, normal)

Back Unable to determine Waist Unable to determine
(quantity and extent of hair) (size at navel, appendectomy, amount & color o

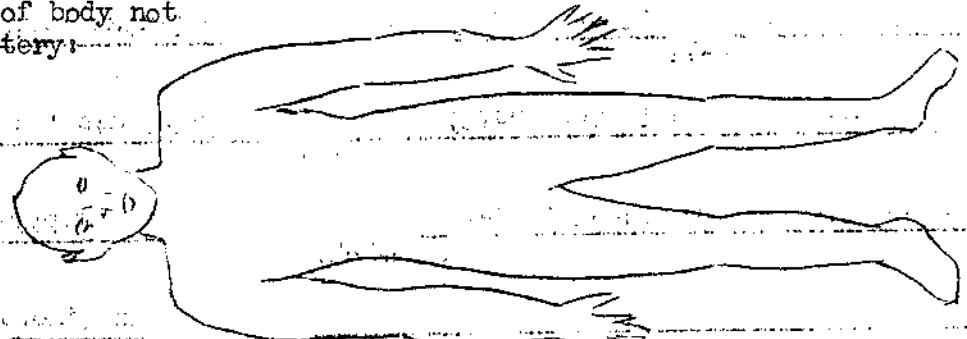
Circumcized Unknown Pubic hair None Hernioplasty Unable to determine
hair) (yes-no) (color) (yes-no) (location)

Legs Unable to determine
(inseam) (muscular; knock-kneed, bowed, normal) (quantity, color & extent of hair)

Feet Unable to determine Toes Unable to determine
(size; corns; callouses; flat) (slender, straight, crooked, overlap)

Evidence of healed fractures Unable to determine
(nose, arms, legs, etc.)

Black out parts of body not received at cemetery:



Have photographs been made and attached No If not, explain Not warranted
(yes-no)

Have fingerprints been placed on GRS # 1 No If not, explain No flesh on fingers
(yes-no)

Has tooth chart been prepared? Yes if not, explain
(yes-no)

Remarks:

[Signature]
ROBERT D. SPITMAN, Sr. Lt., INC., SIOUX CITY, IA
SIOUX CITY, IA

TOOTH CHART

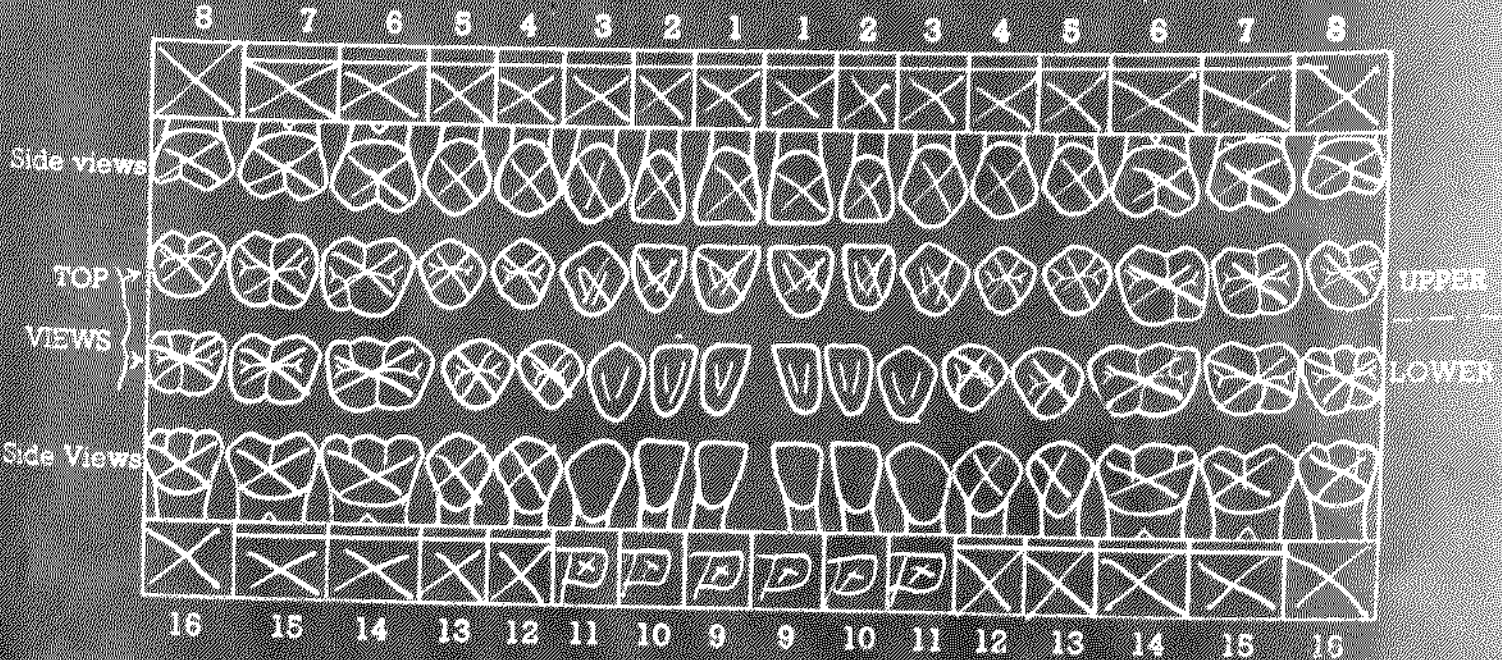
21 November 1947
Date

Unknown X-1046

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.

Tom J. Farms M.D.

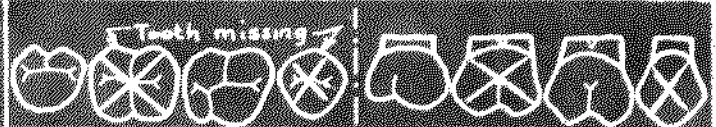
Signature of Officer or other person who prepared Teeth chart

Ralph W. Sletor

Verified by G. R. S. Officer

RALPH W. SLETOR
MAJOR INF. C. I. C.

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

F- posthumously missing

Upper denture is pink acrylic and R-6 and L-8 are not replaced by the teeth in the denture. The entire maxilla has been extracted. This denture is a full denture
 Lower partial denture is pink acrylic and there is no metal lingual bar. The lingual bar is pink acrylic
 The teeth that this denture replaces are: R-12,13,14 and 15; also L-12, L-13,L-14, and L-15.
 R-16 and L-16 are not present in the denture
 Two (2) clasps are present which clasps R-11 and L-11
 Both clasps have two lingual rest bars resting on the lingual surface of R-11 and L-11.

IDENTIFICATION CHECK LIST

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

Unknown X-1048

Cemetery St. Avoird, France

Plot N Row 14 Grave 1890

Date reprocessed: 21 November 1947

1. ~~XXXXXXXXXX~~ _____
(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 Central Identification Point, Mobile Team
(Name and organization) AGRO, EA

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 None (type) _____
 Overshoes None
 Web Equipment None (type) _____
 (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

L. Femur - 46,5 L. Radius - 35,5 L. Tibia - 38,5
 L. Ulna - 35,7 L. Humerus - 34,7 L. Fibula - 37,7

6. Description of Remains:

Age UTD Height 5' 9" 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, pecks, freckles)

Build UTD
 (Large, fat, thin, muscular)

Hair dark brown 2 inches long straight
 (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 (Color, setting, shape) Eyebrows UTD (Color, bushiness, extent across nose)

Nose UTD (Size, shape, straight) Ears UTD (Size, set close to or far from head)

Mouth UTD (Large, medium, small) Lips UTD (Small, large, full)

Teeth See tooth chart (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw UTD (Large, small, normal) Circumference of head in inches Est. 20 1/2" (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)

(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)

Hernioplasty 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 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 Body received in skeleton form, no clothes.
Fluoroscopic Examination: unnecessary
Estimated weight: 50 lbs.
Teeth found and charted.
No burial report found or GRS tag.
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.

Ralph W. Sleator

RALPH W. SLEATOR

(Officer's Name)

MAJOR

Rank

INF.

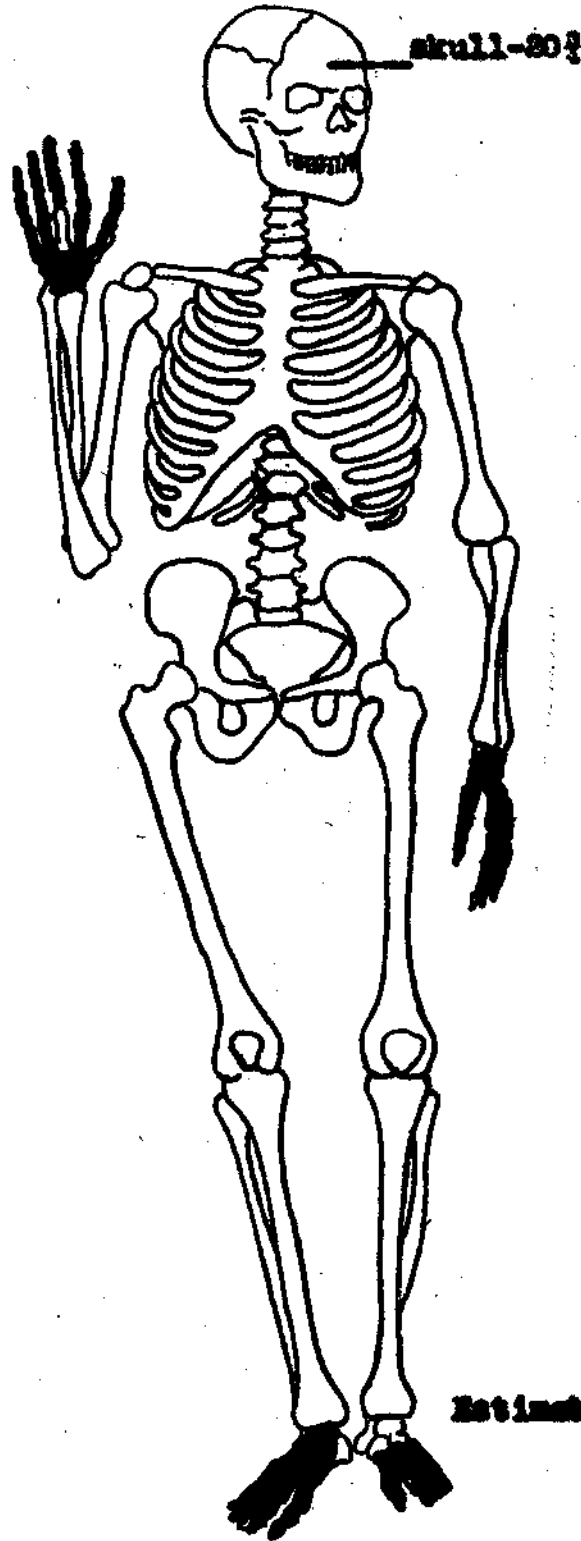
Service

CENTRAL IDENTIFICATION POINT

(Organization)

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



skull-804

L. Femur-46, 5

L. Ulna-26, 7

L. Radius-25, 5

L. Humerus-54, 7

L. Tibia-38, 5

L. Fibula-37, 7

Estimated height 5' 9"

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

14 Nov. 1945

UNKNOWN X- 1046		UNKNOWN	UNKNOWN
UNKNOWN	UNKNOWN	UNKNOWN	UNKNOWN
UNKNOWN	UNKNOWN	UNKNOWN	UNKNOWN
Place of Death	Date of Death	Cause of Death	
1000 hrs. 8 July 1945	US MIL CEM ST AVOLD, FRANCE	Q-260-584	
Time and Date of Burial	Name of Cemetery	Name or Coordinates of Location	
1890 14	N	Cross	
Grave Number	Row Number	Plot Number	Type of Marker

Disposition of Identification Tags buried with body - Yes No Attached to Marker Yes No

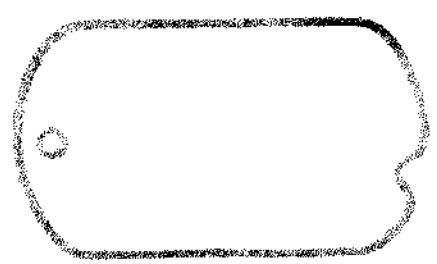
If No Identification Tags (See Reverse) Disinterred by the 3046th QM GR Co.

GRS Form #1 in burial bottle

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

Who is buried on:	STAUDINGER	16080684	1892x 1889
Deceased's Right:	UNKNOWN X-411		1891
Deceased's Left:	3046th QM GR Co		

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:

Name: **Unknown**

Address: _____

Religion: **Unknown**

List only Personal Effects Found on Body and disposition of same: **None**

Signature of Officer or other person reporting burial

Verified by G.R.S. Officer
ROBERT D. HEILMAN, 1st. Lt., Inf., 610th QM GR Co

IF DECEASED UNIDENTIFIED

Take Photographs of Both Hands. If impossible, obtain a complete set of fingerprints. Take Those You Can, and fill in the following:

Height _____ Laundry Marked? _____
Weight _____ Number of Ruler _____
Color of Hair _____ Worn Glasses? _____
Color of Eyes _____ Is Tooth Chart Attached? _____
Race _____

Indicate the presence or absence of a tooth chart, if no medical attention was given, on a chart below. In space below, locate, with arrows, scars, birthmarks, moles, deformities, etc.

Remains consist of a few bones and a skull.
Fingerprints impossible to obtain. Tooth chart taken and attached.

No clothing was found on the body
See attached check list for unknowns for additional information.

Indicate the presence or absence of any items found, such as letters, photographs, etc., in space below.

If this is an Isolated Burial, make a Sketch of the Location, indicated with Permanent Landmarks. If more space needed attach separate sheet. Indicate North.

	1	2	3	4	5	6	7	8	9	10
Deceased's Right										
Deceased's Left										

Indicate the presence or absence of any items found, such as letters, photographs, etc., in space below.

Left Hand

Right Hand

Left Thumb

Right Thumb

1

2

3

4

1000

REPORT ON BURIAL

Take fingerprints of the following: (If possible, have medical personnel take a tooth chart, if no medical personnel present, fill in a tooth chart below.)

Complete set of fingerprints: Take fingerprints of the following:

Height: _____ Weight: _____

Color of Eyes: _____ Color of Hair: _____

Race: _____ Cause of Death: _____

Place of Death: _____

Time and Date of Burial: _____

Grave Number: _____

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

IF No Identification Tags
How were remains identified? _____

What means of identification were used with the body? _____

Note below any identifying clues found, such as letters, photographs, etc. _____

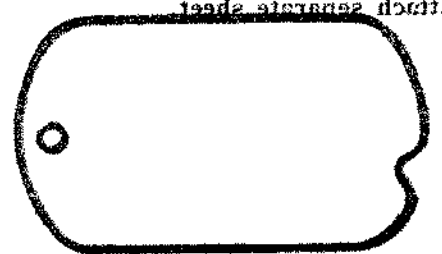
To determine Right or Left use Deceased's Right and Left.

Who is buried on: _____

Deceased's Right: _____

Deceased's Left: _____

If this is an isolated burial, make a sketch of the location, oriented with permanent landmarks. If more space needed attach separate sheet.



Emergency Address: _____

Address: _____

Religion: _____

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

Signature of Officer: _____

Signature of Other Person: _____

Signature of Officer: **R. H. CASDEN, CPT**

Signature of Other Person: _____

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
	2
	1
Thumb	

Right Hand	4
	3
	2
	1
Thumb	

TOOTH CHART

Deceased's Right	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
	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 O; fillings by □; Bridges by C; linkings 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.

RDH/bca

2nd Ind

TO: THE THIRD PLATOON, 6107th GRAVES REG. CO., APO 513, US ARMY, 26 Nov. 1945
TO: Commanding Officer, 551st Composite Service Group, APO 513, US Army

1. Basic communication noted
2. This office is in agreement with Par 3 of basic communication, since it is known considerable haste attended disinterment of subject and other remains prior to deposit at St. Avold for reburial
3. Paragraph 1 of basic communication complied with. In light of the almost certain probability of entanglement of evidence, the information previously reported for Paulig McNally has been incorporated into corrected Report of Burial for Paul McNally.
4. Number Unknown X-1046 has been assigned remains previously identified as Paulig McNally (N-14-1890), pending findings of investigating authority.
5. Reference Pgr 5: suggest investigation requested therein be referred to a Graves Registration Company operating in the vicinity of Zipsendorf, as this organization is not staffed at present to conduct investigation in the field in a proper manner.

For the Commanding Officer:

ROBERT D. HEILMAN
1st Lt., Inf.,
GR Officer

Incls: n/s
2 incls added
incl. 1, Corrected Report of Burial, McNally
incl. 2, Corrected Report of Burial, Unknown X-1046

133 48 C
1157
1157
1157

1. Copy to the General, 1157th Graves Registration Co., APO 513, APO 513.

2. Your attention is invited to preceding letter 1157.
3. Correspondence is assigned letter of registration 1157.

Incls: n/c

1157
1157
Major

X-1046

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
THEATER SERVICE FORCES
EUROPEAN THEATER

PJW/DHF/mep

(Rear) APO 887
(S: 11 November 1945)
12 October 1945

AGHC

SUBJECT: Identification of Deceased.
Paul Mc Nally ASN-31459520
Paulig Mc Nally ASN- Unknown

TO : Graves Registration Officer, 551st Composite Service Group, APO 513,
U.S. Army.

1. Enclosed are two (2) true copies of Report of Burial forms covering one Paul McNally ASN-31459520 (St Avold N-13-1876) and one Paulig McNally ASN-unknown (St Avold N-14-1890). Included also is a true copy of a captured German record card pertaining to a Paul W. McNally buried in a cemetery at Zipsendorf, Germany.

2. It is to be noted that the information on either Report of Burial coincides and that the information on the German record is applicable to both. First, the next of kin's address (Massachusetts) of Paulig McNally and the ASN-31459520 of Paul McNally indicates that both men are from the same service command; second, Paulig McNally's original place of burial, as given on the burial report, is Zipsendorf, Germany; the Paul W. McNally referred to on the German record is listed as buried at Zipsendorf and the burial record for Paul McNally, 31459520 shows his previous place of burial as unknown, (leaving the possibility that it may have been Zipsendorf); third, the religion given for both men is Catholic.

3. The co-incidence and similarity of facts leads this office to believe that by some means the evidence in the referenced case has been entangled.

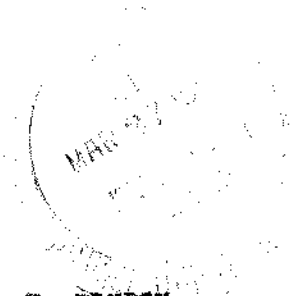
4. It is directed that the subject men be disinterred and that Check Lists and Tooth Charts be prepared. Fingerprints will be taken if possible.

5. In addition, an investigation should be initiated in the vicinity of the former graves to determine if any further evidence or clues to identity exist. This investigation should include a search of cemetery records and interrogation of local inhabitants.

(Continued)

6. Technical Operations Bulletin number 5 and 6 will be used as a guide in both operations.

BY COMMAND OF MAJOR GENERAL LITTELSCHN;



Incl e/s

DISTRIBUTION

- Orig & Dup-Addressee
- 1 copy-AGRC File
- 1 copy-S:File

J. B. FIERCE,
Captain, AGD,
Adjutant.

J
DHF
FW
JBP

COPY

DEUTSCHLAND

AMERIKA

Familien u. Vorname: MC NALLY, Paul W.

geboren am: 2.2.13 in: Mass. Kreis

Truppenteil: Inf Regt No. Unknown 8595

Dienstgrad: Soldier

Erkennungsmarke: 315091 IV B.

Tag des Todes: 31.1.45 Ort des Todes: ZIPSENDORF near Meuselwitz, POW hosp.

Beerdigt am: 29.2.45 - 1530 h.

Lage und Nr. des Grabes: Cem. Zipsendorf near Meuselwitz, Grab Nr 58.

Gemeldet durch: V.L....Ref VIII... W.G.O.....West. Trupp.L...../.....Bl....
v. Stalag IV F Hartmannsdorf v. 17345 POW

On reverse:

PLACE OF DEATH: ZIPSENDORF near Meuselwitz, POW hosp
PLACE OF BURIAL: Cem. Zipsendorf near Meuselwitz, Grave 58.
Germ./ M 52 (K18)

A TRUE COPY

Donald M. Eitz
CWO, USA

See green Burial card in front of file
see.

X-1046