

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

22 August 1949

Date

COPY

*293 mch. France - 1090 (St Avold)*  
SUBJECT: Unidentifiable Remains

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

1. The records pertaining to Unknown X-1090, Plot TTT, Row 8, Grave 85, USMC St. Avold, 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. 2648, dated 6-2-48. No further information is available.

FOR THE COMMANDING GENERAL:

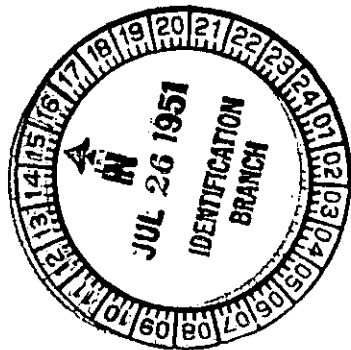
/s/ H. B. Henry  
/t/ E. D. Mulvanity  
G. E. Lutz

Received  
Not identifiable from  
information presently  
available

14 SEP 1949

CGMR

*WAG*  
*13 11 1949*  
*1000*  
*1000*  
*1000*  
*1000*  
*1000*



COMMUNICATIONS SECTION  
JUL 26 1951  
FBI - NEW YORK

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

RRE 293

22 August 1949  
(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X - 1090, Plot TTT  
Row 8, Grave 85, USMC ST. AVOLD, France,  
have been reviewed and it is the opinion of this Office that sufficient  
evidence is not available at the present time to establish the identity  
of the deceased concerned. The remains concerned should be classified as  
unidentifiable at the present time.

2. Report of Reprocessing of remains was forwarded to your  
Office by Transmittal Letter No. 2648, dated 6-2-48.

Remarks:

Received  
Not identifiable from  
information presently  
available

14<sup>3</sup> SEP 1949

OQMG

Case reviewed by undersigned Members of the Board of Review:

[Signature]  
Col. H.P. HENRY, O-12589

QMC

[Signature]  
Lt. Col. E.D. MULVANEY, O-359598

QMC

Major R. BERGER, O-251736

ORD

Capt. Jack C. HAYES, O-1577297

QMC

Capt. E.F. PRICE, Jr. O-1588236

QMC

[Signature]  
1/Lt. Gaylord E. LUTZ, O-1595665

QMC

Incl #5

This Grave formerly occupied by: UNKNOWN -003314-F  
USMC ST AVOLD, FRANCE  
Plot D, Row 21, Grave 37  
Date reburied: 11 Oct 49 Date disinterred: 11 Oct 49

1

SECTION A - NAME AND BURIAL LOCATION OF DECEASED: M. R. SWART CAPT QMC  
DIRECTIVE NUMBER: 3574 00000  
DATE: 15 01 48  
DAY MONTH YEAR

NAME: UNKNOWN X-001090 SERIAL NUMBER: RANK: ARM: Q DATE OF DEATH: DAY MONTH YEAR

CEMETERY: ST AVOLD - METZ DISPOSITION OF REMAINS: 0 3503 80  
CODE DIST. PT.

PLOT: TTT ROW: 8 GRAVE: 85 COUNTRY: FRANCE CAUSE OF DEATH: 6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE: ST. AVOLD, FRANCE (BY ADMINISTRATIVE ORDER)  
NAME AND ADDRESS OF NEXT OF KIN:

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME: UNKNOWN X-001090 SERIAL NUMBER: RANK: DATE OF DEATH: DATE DISTINTERRED: 23 July 48

IDENTIFICATION TAG ON:  REMAINS  MARKER HMB ORGANIZATION: UNKNOWN RELIGION: IDENTIFICATION VERIFIED BY: Geo W Lowry Embalmer  
NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: Mattress cover CONDITION OF REMAINS: Body consists of 5 vertebrae, R/L/Femur, R/Tibia & Fibula Fractured R/L/Pelvic girdle, L/Tibia & a few foot bones - Decomposition complete -

OTHER MEANS OF IDENTIFICATION: Report of Burial found with remains

MINOR DISCREPANCIES 1

None

REMAINS PREPARED AND PLACED IN CASKET

DATE: 27 July 48 BY: Geo W Lowry, Embalmer

CASKET SEALED BY: Geo W Lowry, Embalmer EMBALMER (Signature): Geo W Lowry

CASKET BOXED AND MARKED: SHIPPING ADDRESS VERIFIED BY: All markings, plates & tags verified by JESSE C HARRELL, 1st Lt CAC

DATE: 27 July 48 BY: Geo W Lowry Embalmer

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

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

22 DEC 1949

REPAIRATION BRANCH MEM. DIV. C. Swart

# 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

REPATRIATION  
 RECORDS BRANCH  
 NOV 2 3 33 PM '49  
 MEMORIAL DIVISION

## 5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE (BY ADMINISTRATIVE ORDER)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER ST. VAUGHN SERVICE	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

# IDENTIFICATION CHECK LIST

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

D.D. # 247, dated 19 March 47

Unknown X -1090

Cemetery St. AVOLD, FRANCE

Plot TTT Row 8 Grave 85

**Date reprocessed:**

1. ~~At~~ Medical Cemetery 1 Dec 47  
(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 ~~and reprocessed~~ by IS Mobile Team # 1, 1st Zone.  
(Name and organization)

4. Evacuated to Cemetery by \_\_\_\_\_  
(Name and organization)

5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

Item	Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear	<u>None</u> (Type)		
Raincoat	<u>None</u>		
Overcoat	<u>None</u>		
Jacket, Field	<u>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>		

FEB 20 1948

L

Belt, web None  
 Drawers, wool None  
 Drawers, cotton None  
 Leggings, wool None  
 Socks, ~~cotton~~ Remnants of, wool OD. Remnants of cotton socks. Remnants  
 \* Shoes Remnants of (type) pack  
 Overshoes None  
 Web Equipment None (type)   
 (Other item) Remnants of burlap bag. Wire for heating unit.  
 (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? AAF

6. Description of Remains: R - Femur - 50.4 R - Fibula - 41.6  
 R - Tibia - 42.0

Age UTD Est. Height 41.2" 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 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 Missing  
 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw UTD Circumference of head in inches 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 Missing  
 (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.



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

If not, explain Hands missing

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

9. Remarks Remains found in skeleton form, wrapped in burlap bag. Remains badly charred and found in UK box. Burial bottle, no GRS tag. Clothes found in debris. Fluoroscopic examination negative. No clothing marks. Est. weight: 11 Lbs.

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.

*Woodrow W. Wolf*  
**WOODROW W. WOLF**

(Officer's Name)

**CAPT**

Rank

**CMC**

Service

**OPERATIONS OFFICER, IS FIRST ZONE**

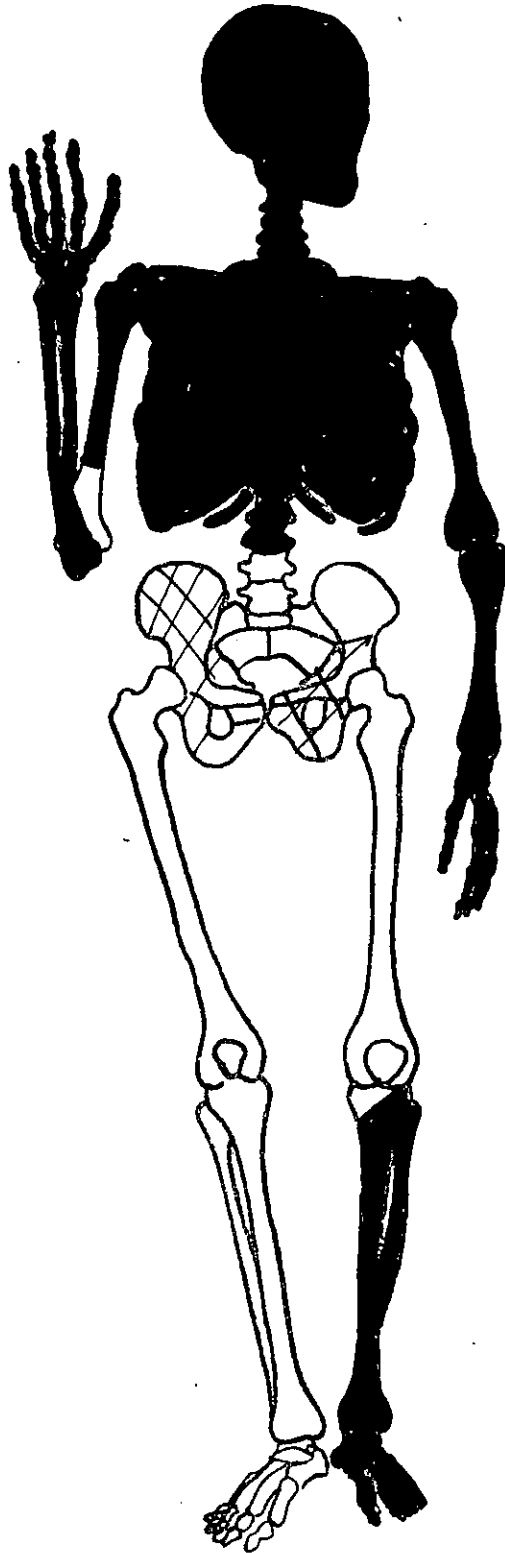
(Organization)

# SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

RIGHT

LEFT



FEMUR.....50.4.....cm

TIBIA.....42.0.....cm

FIBULA.....41.6.....cm

CHART "A"

Est. HEIGHT.....6'2".....

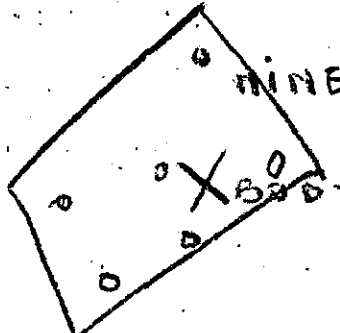
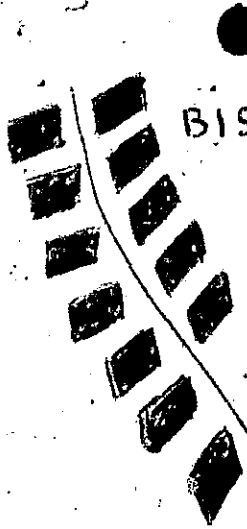
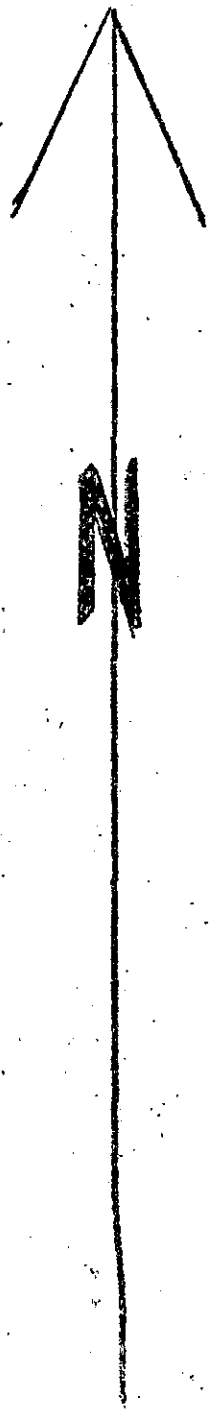
X-1090 was picked  
up Southeast of Bischoltz  
Gridcooza. 8.65-2.20  
Sheet 57 scale 1:20000

BISCHOLTZ

BADMUHL FARM

MINE FIELD

MULHUSEN



CHECK LIST OF UNKNOWN

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

Unknown X UNKNOWN X-1090  
Cemetery ST. AVOLD, FRANCE  
Plot TTP Row 8 Grave 85

1. Arrived at cemetery 6 Febr. 1946  
(Hour) (date)
2. Place of death Vic. Bischoltz, France, 86-220, 1:100,000 Map Verdun-Wissembourg  
(Name of closest town) (coordinates and letter  
Prefix, maps)

Sheet, scale and serials used.

3. Remains recovered or disinterred by \_\_\_\_\_  
(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)		
Raincoat			
Overcoat			
Jacket, Field			
Jacket, combat			
Mackinaw			
Sweater			
Jacket, HBT			
*Shirt, Wool, OD			
Undershirt, Wool			
Undershirt, Cotton			
Trousers HBT			
*Trousers, Wool, OD			

belt, Web

Drawers, Wool

Drawers, Cotton

Leggings, Wool Note unusual lacing

Socks, Cotton

\*Shoes (type)

Overshoes

Web Equipment (type)

(Other item

(Other item

\*If the body is nude, sizes of these items should be computed by measuring the remains.

6. Chevrons or  
Insignia 103rd Div. patch

(type & location; shirt, jacket, coat, helmet)

Shoulder Patch

7. Does clothing indicate that deceased was a member of the Air, Ground or Naval Forces Ground Forces

8. Description of Remains:  
Age U. to d. Height U. to d. Weight U. to d. Description of wounds U. to d.

Bandages or dressings Unable to determine Scars Unable to determine  
(Length, width, location)

Tattoos Unable to determine  
(Number, location - illustrate on sep. page)

Outstanding moles, warts or birthmarks Unable to determine  
(yes-no; description, location)

Sunburn or tan, other than hands & face Unable to determine

Complexion Unable to determine  
(Light, med, dark, clear, pimples, pocks, freckles)

Build Unable to determine  
(large, fat, thin, muscular)

Hair Unable to determine  
(color, length, quantity, curly, wavy, straight, whorls, or definite parting).

Hair Unable to determine  
(baldness, widows peak, distinctive cutting or other characteristics)

Sideburns Unable to det. Mustache Unable to det. Beard or Goatee Unable to dete.  
(color, setting, shape) (color, size, shape) (length, heavy,  
light, color, extent)

Eyes Unable to determine Eyebrows Unable to determine  
(color, setting, shape) (color, bushiness, extent across nose)

Nose Unable to determine Ears Unable to determine  
(size, shape, straight) (size, set close to or far from head)

Mouth Unable to determine Lips Unable to determine  
(large, medium, small) (small, large, full)

Teeth Unable to determine  
(white, size, unevenness, spacing, noticeable, crowns, fillings, extract.)

Chin Unable to determine  
(prominent, receding, pointed, dimple, double)

Jaw Unable to determine Circumference of head in inches Unable to determine  
(large, small, normal) (hat, band)

Neck Unable to determine Larynx Unable to determine  
(size, length, short, normal, wrinkled) (Prominent, normal)

Shoulders Unable to determine Arms Unable to determine  
(broad, straight, small, rounded) (length, muscular, color)

(extent and quantity of hair)

Hands Unable to determine

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

(Unusual characteristics of fingernails)

Chest Unable to determine  
(size of nipples, color, quantity & extent of hair, large, small, normal)

Back Unable to determine Waist Unable to determine  
(quantity & extent of hair) (size of navel, appendectomy, amount  
Circumcision U. to d. Pubic hair U. to d.  
quantity & color of hair (Yes-no) (color)

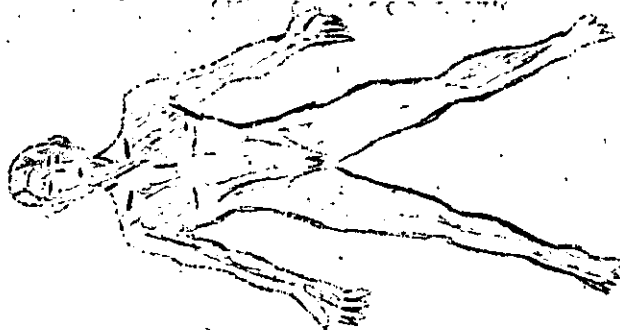
Hernioplasty Unable to determine  
(Yes - no; location)

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.)

9. Black out parts of body not received at cemetery:



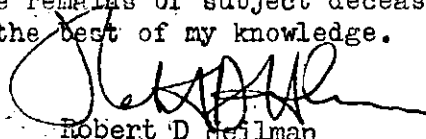
10. Have fingerprints been placed on Report of Interment No  
Yes - no

If not, explain Fingers missing

11. Has tooth chart been prepared No If not, explain No teeth  
yes - no

12. Remarks: Remains badly decomposed

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.



Robert D Heilman  
Officers Name

1st Lt. Inf.,

Rank Service

6828 QM CR Det.

Organization

RESTRICTED  
**REPORT OF BURIAL**  
TM 10-630 AND AR 30-1815

22 February 1946  
Date

UNKNOWN X-1090 (St. Avoild)		2nd Lt.	Unknown
Last Name	First	Rank	Serial No.
103 Inf.			
Unit		Organization	
Vic. Bischoltz, France		Est. Jan. 1945	
Place of Death		Date of Death	
1400 hrs. 16 Febr. 1946		US MIL CEM ST. AVOILD, FRANCE	
Time and Date of Burial		Cause of Death	
55		Mine Explosion	
8		-260-584	
Grave Number		Name of Cemetery	
Row Number		Name or Coordinates of Location	
Plot Number		Type of Marker	
TTT		Cross	

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

If No Identification Tags  
How were remains identified? Unburied remains removed from Bischoltz, France  
Cords: 8.6 -2.20, 1:100,000 (Verdun-Wissembourg)

(See reverse)

What means of identification were buried with the body?

GRS Form # 1 in burial bottle

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

Who is buried on:

Deceased's Right:	UNKNOWN X-1091				86
	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	BEGINNING OF ROW				
	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 Unknown  
Name

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., 6828 QM GR Det.



## 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: <b>NO</b>
Weight:	Number of Rifle:
Color of Eyes:	Wear Glasses?
Color of Hair:	Is Tooth Chart Attached? <b>NO</b>
Race: <b>White</b>	

(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.

Body too badly decomposed. Only bones and bit of cloth remained.

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

103rd Div. patch on left sleeve of jacket.  
Gold bar painted on helmet.

Thumb				
1				
2				
3				
4				

Left Hand

Thumb				
1				
2				
3				
4				

Right Hand

### TOOTH CHART

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

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