

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 LINK ST HUBBARD *-4648

SUBJECT

QMC FORM 1121
1 Aug 45

61 12256

7887 GRAVES DETACHMENT

943 unk St. Avold ^{APO 757} *X-4648* *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-4648 St Avold

(POC) ST LAURENT

TOOTH CHART

27 Feb. 1946

Date

unk. X 4648 (M. Auld, France)

Last Name

First

Initial

unk.

Rank

unk.

Serial No.

unk.

Unit

unk.

Organization

DIEPFLIN, Germany (HQ 2906)

Place of Death

December 1944

Date of Death

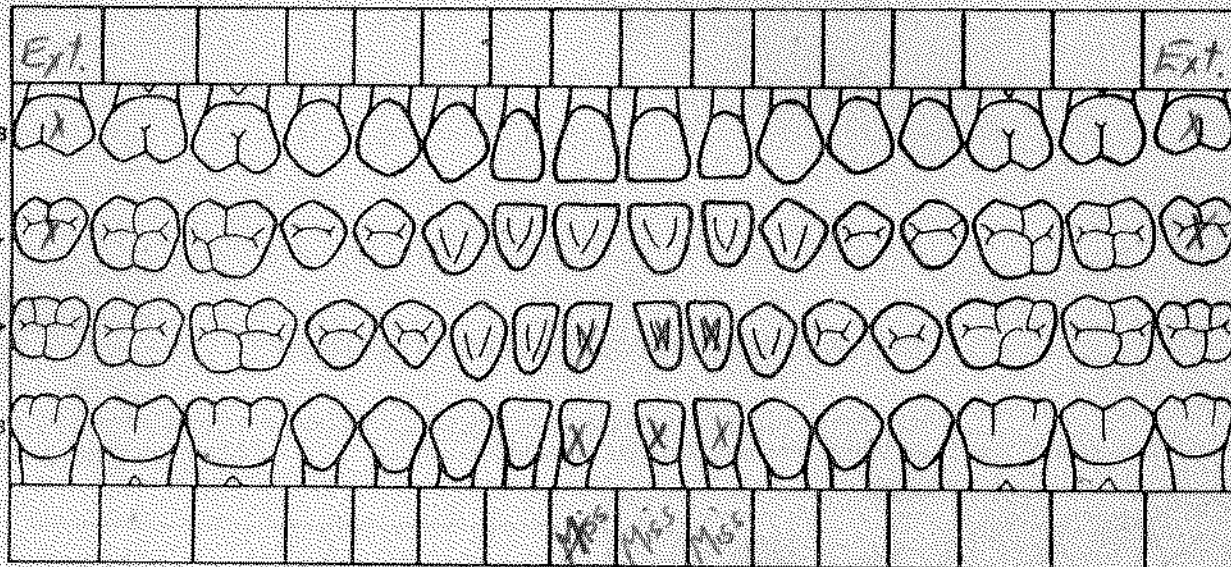
S.W. of back.

Cause of Death

Right

Left

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



16 15 14 13 12 11 10 9 9 10 11 12 13 14 15 16

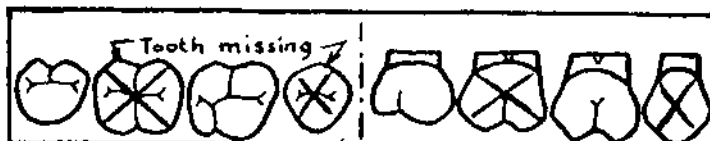
This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth),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

Sgt. Bobby Thomas
 Signature of Officer or other person who prepared Tooth chart

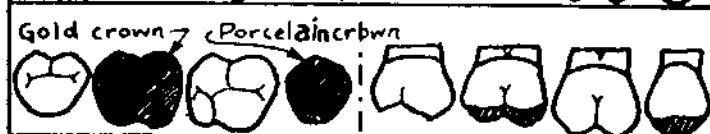
William J. Graham
 Verified by G. R. S. Officer

*File
 14 March 5
 H. Martin*

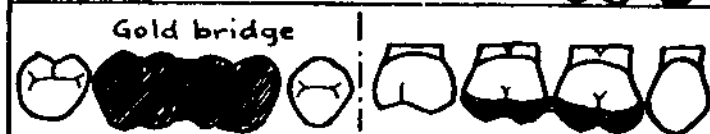
MISSING TEETH . . . All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus:



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



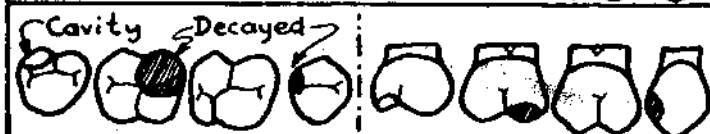
BRIDGE WORK . . . Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:



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

Graves of six more American soldiers in the Cemetery at DIEFFLEN, Germany.

DIEFFLEN, Germany

Map 1:250,000 Sheet K-50

Triang Coord: WQ 2986

Location: Cemetery in DIEFFLEN, Ger.

Sketched by: T/S Akiki

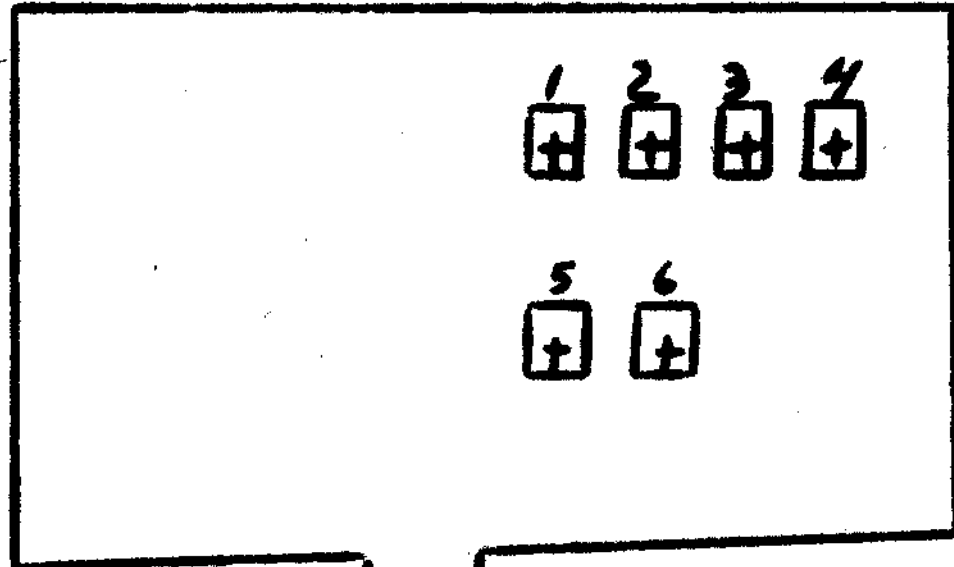
606 M.G.R.Co.

Date: 27 Feb. 1946

Not to scale

- (1) Leonard G. Hodella
- (2) Unk. X-4646
- (3) Unk. X-4647
- (4) Benito Madan
- (5) Archibald
G. Dudley
- (6) Unk. X-4648 ✓

CEMETERY IN DIEFFLEN, GERMANY



← DILLINGEN

NALBACH →

CHECK LIST FOR UNKNOWN

T/5 Burns
(name of soldier possessing remains)

St. Avold, France

1. Unknown-X- **4648** ~~XXXXXXXXXXXX~~ **Coll. Pt. Homburg, Germany**

2. If remains were disinterred, attach Check List for Disinterments.

3. Arrived at cemetery **1600, 18. Feb. 1946** **606 QM.G.R.Co. Homburg, Germany**
hour date collecting point

4. Place of death **DIEFFLEN, Germany** **Map 1:250,000 Sheet: K-50, Trier, Ger.**
name coordinates and landmarks

5. **coords: WQ 2986.**

6. Remains recovered by **Lt. Clark, 606 QM.G.R.Co.**
name and organization

7. Evacuated to cemetery by **Lt. Clark, 606 QM.G.R.Co.**
name and organization

8. Is load list attached **no**
yes-no

9. Are names of deceased found in same area as this Unknown starred **yes**
yes-no

10. Are circumstances described which may indicate organization of the deceased **no**
yes-no

11. If only part of body was received, was a careful search made for other parts of Unknown **yes**
yes-no

12. If remains come from vehicle, plane, etc: **unknown**
type of vehicle or plane, nick name, serial number, organization or symbols

13. **unknown**

14. Crew list **unknown**
names of other deceased and positions in which found

15. **unknown**

16. **unknown**

17. If a tank, which hatches were free and available for escape use **not applicable**

18. 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 known, give**
parts of markings or symbols burned pierced by shell fire - where

19. **unknown**

20. **unknown** found in town field by road, etc. **damaged by mine explosion**

21. **unknown (if any)** names of men who escaped. description of other vehicles or planes in same area

22. detailed description of personal effects **no P.E.**
Indicate exact pocket or part of body where found:

23. **unknown**

24. **unknown**

25. **unknown**

26. **unknown**

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

Item	Clothing Markings	Sizes	Color	Indicate unusual markings, wear, tear, repairs etc.
27. *Headgear				
28. Raincoat				
29. Overcoat				
30. Jacket, Field				
31. Jacket, Combat				
32. Mackinaw				
33. Sweater				
34. Jacket, HBT				
35. *Shirt Wool OD				
36. Undershirt, Wool	none est.	36	O.D.	2 pair
37. Undershirt, Cotton				
38. Trousers, HBT				
39. *Trousers, Wool OD	none	32-31	O.D.	2 pair
40. Belt, Web				
41. Drawers, Wool	none	32	O.D.	2 pair
42. Drawers, Cotton				
43. Leggings				Note unusual lacing
44. Socks Wool Cotton				
45. *Shoes				
46. Oveshoes				
47. Web Equipment				
48. other item				
49. other item				

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

50. Chevrons or **none** (type and location: shirt jacket coat helmet) **none** Shoulder Patch **none**

Insignia **none**

51. Description of Remains

52. Age **unk.** years Height **unk.** ft-in Weight **unk.** lbs Description of wounds **S.W. in back**

53.

54. Bandages or dressings **none** Scars **flesh and skin decayed**
length, width, location

55. **Scars** **flesh and skin decayed**
number, location - illustrate on sep. page

56. Tattoos **flesh and skin decayed**
number, location - illustrate on sep. page

57. Outstanding moles, warts or birthmarks **flesh and skin decayed**
yes-no description, location

58. **flesh and skin decayed**

59. Sunburn or tan, other than hands and face **flesh and skin decayed**

60. Tobacco stain on fingers or teeth **fingers missing** - **teeth white**
designate where extent

61. Complexion **flesh and skin decayed** Build **est. misc.**
light, med, dark, clear, pimples, pocks, freckles large, tall, thin, muscular

62. **flesh and skin decayed**

63. Hair **brown, sm all piece band**
color, length, quantity, curly, wavy, straight, definite parting, baldness, widows peek

64. **flesh and skin decayed**
distinctive cutting or other characteristics

65. Sideburns **flesh decayed** Mustache **flesh decayed** Beard or goatee **flesh decayed**
color, setting, shape color, size, shape Length

66. **flesh decayed**
heavy, light, color, extent

67. Eyes **missing** Eyebrows **flesh decayed**
color, setting, shape color, bushiness, extent across nose

68. Nose **flesh decayed** Ears **flesh decayed**
size, shape, straight size set, close to or far from head

69. Forehead **flesh decayed** Mouth **flesh decayed** Lips **flesh decayed**
high, wide, wrinkled large, medium, small small, large, full

70. Teeth **white, see teeth chart**
white, size, unevenness, spacing, noticeable crowns, fillings, extractions

71. Chin **flesh decayed** Cheekbones **flesh decayed**
prominent, receding, pointed, dimple high, normal

72. Jaw **flesh decayed** Circumference of head in inches **est. 21 in.**
large, small, normal hat band

73. Neck **flesh decayed** Larynx **decayed** Shoulders **est. broad**
size, long, short, normal, wrinkled prominent, normal broad

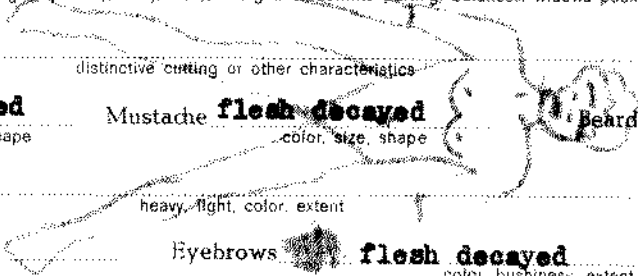
74. **flesh decayed** Arms **est. 26 in, flesh decayed**
straight, small, rounded length muscular, color, extent and quantity of hair

75. **flesh decayed** Hands **missing**
vaccination scar, size of wrists large, small, normal, calloused, noticeably

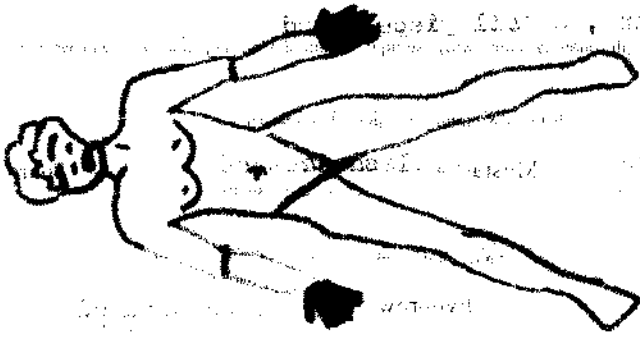
76. **flesh decayed**

76. **fingers missing**
marks on fingers indicating that rings were worn

77. **fingers missing**



78. Fingers **missing** short, thick, long, slender, size of knuckles missing fingers or joints
79. **fingers missing** Unusual characteristics of fingernails
80. Chest **est. 37 in. flesh decayed** size at nipples, color, quantity and extent of hair **large** small, normal
81. Back **flesh decayed** quantity and extent of hair Waist **est. 31 flesh decayed** size at navel, appearance, contour and color
82. Circumcized **dec.** yes-no Pubic hair **brown** color hernioplasty **flesh and skin decayed** yes-no location
83. Legs **est. 31 in. flesh and skin decayed** inseam muscular, knock knee, bowed, normal quantity, color, and extent of hair
84. Feet **flesh and skin decayed** size, corns, callouses, flat Toes **flesh and skin decayed** slender, straight, crooked, overlap
85. Evidence of healed fractures **no** nose, arms, legs, etc.
86. Block out parts of body not received at cemetery.



87. Have photographs been made and attached **no** yes-no If not, explain **see question # 90**
88. Have fingerprints been placed on GRS No 1 **no** yes-no If not, explain **fingers missing**
89. Has tooth chart been prepared? **yes** yes-no If not, explain
90. Remarks: **Body reburied in U.S. Military Cemetery, St. Aved, France.**
91. **Body in advance stage of decomposition. Both hands missing.**
92. **Remains weigh approx. 120 pounds.**
- 93.
- 94.
- 95.
- 96.

William H. Zerhan
Signature of GRC and Organization

WILLIAM H. ZERHAN
2nd Lt. Inf.
606 Q.M.G.R.Co.

IDENTIFICATION CHECK LIST

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

Proc. by: *R. J. Miller*
C. O. Price
L. R. Ferndt

Clerk: *S. F. Richardson*

E.O. # 707

Unknown X 4645
 Cemetery St. Volde, France
 Plot PP Row 7 Grave 73

1. None reprocessed
~~Arrived at cemetery~~ 14 - Apr. '48
(Hour) (Date)
2. Place of death _____
(Name of closest town) (Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)
3. Remains reprocessed
~~recovered~~ by Yipabite Team #1, I.S.
(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 _____		<u>One</u>	
Undershirt, Cotton _____		<u>None</u>	
Trousers, HBT _____			
* Trousers, Wool OD _____		<u>Two</u>	

Belt, web Rem. of
 Drawers, wool Two
 Drawers, cotton One
 Leggings, wool None
 Socks, ~~cotton~~ ^{wool} One

* Shoes _____ (type) _____

Overshoes _____

Web Equipment _____ (type) _____

(Other item) _____ Rem. of comb, rem. of pencil,

(Other item) Rem. of nail file _____ rem. of religious medal, pocket knife

* 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 _____

Does clothing indicate that deceased was a member of the Air, Ground or Naval Force? UTD

6. Description of Remains: L. Humerus 34.5 L. Femur 47.1
L. Radius 25.1 L. Fibula 38.7
L. Ulna 27.0 L. Tibia 38.5

Age UTD Height Est. 5'9 1/4 Weight UTD Description of wounds UTD

Bandages or dressings _____ None Scars _____ UTD
 (Length, width, location)

Tattoos _____
 (Number, location — illustrate on separate page)

Outstanding moles, warts or birthmarks _____
 (Yes-no; description, location)

Sunburn or tan, other than hand and face _____

Complexion _____
 (Light, medium, dark, clear, pimples, poeks, freckles)

Build _____ UTD
 (Large, fat, thin, muscular)

Hair _____
 (Color, length, quantity, curly, wavy, straight, whorls, or definite parting)

Hair _____
 (Baldness, widows peak, distinctive cutting or other characteristics)

Sideburns _____ UTD Mustache _____ Beard or _____ UTD
 (Color, setting, shape) (Color, size, shape) (Length, heavy)

Goatee _____
 (Light, color, extent)

Eyes _____ Eyebrows _____
 (Color, setting, shape) (Color, bushiness, extent across nose)

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

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

Teeth _____
 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)
See Tooth Chart

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

Jaw _____ Circumference of head in inches _____
 (Large, small, normal) (Hat band) *FRACTURED AND MISSING*

Neck _____ Larynx _____
 (Size, length, short, normal, wrinkled) (Prominent, normal)

Shoulders _____ Arms _____
 (Broad, straight, small, rounded) (Length, muscular, color, extent and quantity of hair)

Hands _____

Fingers _____
 (Short, thick, long, slender, size of knuckles, missing fingers or joints)

_____ (Unusual characteristics of fingernails)

Chest _____
 (Size of nipples, color, quantity and extent of hair, large, small, normal)

Waist _____
 (Size of navel, appendectomy, amount, quantity, and color of hair)

Back _____ Circumcision *UTD* Pubic Hair _____
 (Quantity and extent of hair) (Yes-no) (Color)

Hernioplasty _____
 (Yes-no; location)

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

Feet _____ Toes _____
 (Size, corns, callouses, flat) (Slender, straight, crooked, overlap)

Evidence of healed fractures _____
 (Nose, arms, legs, etc.) *(See "Remarks" Page # 4.)*

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 Fingers missing

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

9. Remarks: Remains received with large amt. of flesh in last stage
of decomposition, clothing, unmarked, found on remains,
teeth intact in disarticulated skull, Burial Report found no of KS tags,
est. wt. of reprocessed remains: 50 lbs. Est. ht ^{5'9 1/4"} [redacted]
[redacted]
[redacted]

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.

Evidence of a healed fracture on the posterior surface of proximal third of left femur.

ROBERT J. MILLER
(Officer's Name)

SP6
Rank

AGRC
Service

MOBILE TEAM #1, I.S.
(Organization)

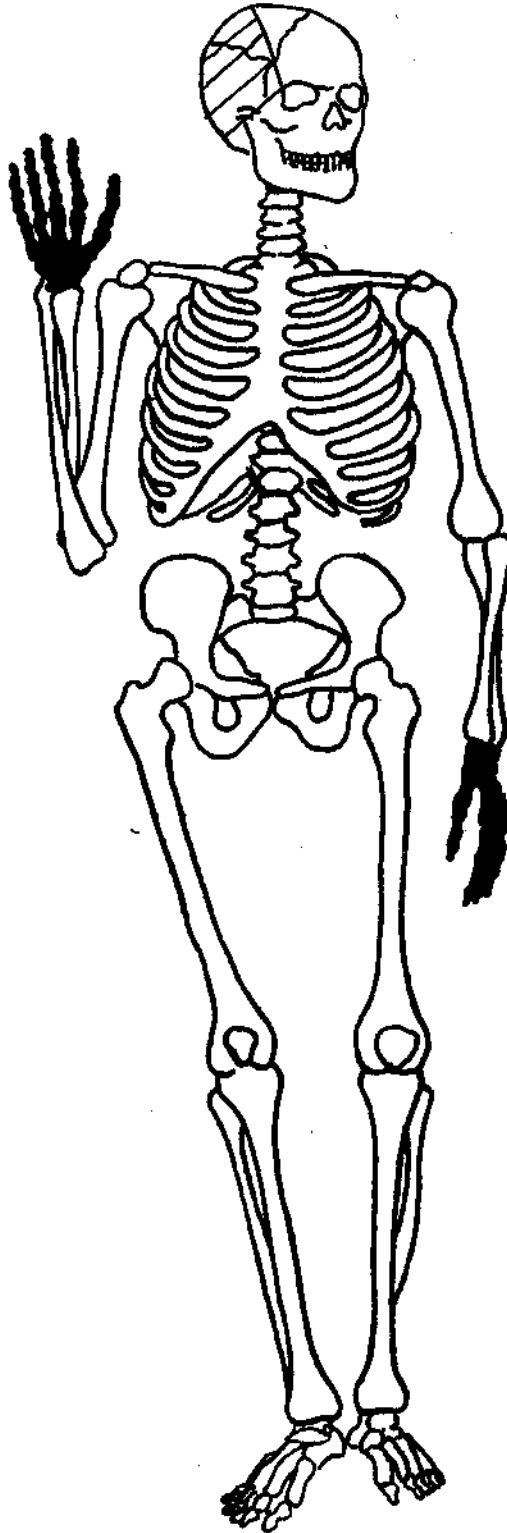
Albert N. Richardson

SKELETAL CHART

X-4648
USMC ST. AVOLD
Plot PP Row 7 GRAVE 73

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

14 April '48



HUMERUS 34.5

RADIUS 25.1

ULNA 27.0

FEMUR 47.1

FIBULA 38.7

TIBIA 38.5

CHART "A"

Est. HEIGHT: 5'9 1/4"

114

TOOTH CHART

PP
Row: 7
GRAVE: 73

E.O.# 707

USMC - ST. AVOLD

14-APRIL-48

X-4648

UNK

Date
UNK
Serial No.

Last Name

First

Initial

Grade

Serial No.

Unit

Organization

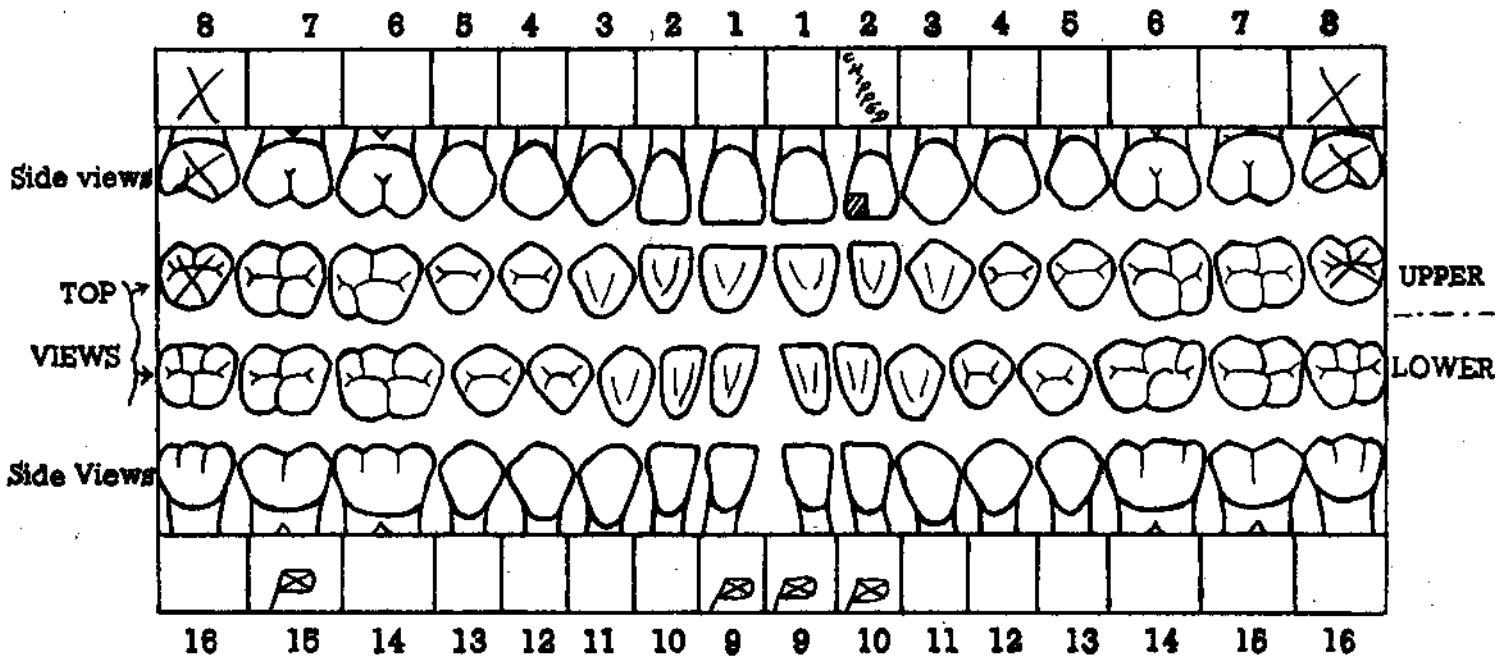
Place of Death

Date of Death

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), 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.

INSUFFICIENT SPACE
FOR REMARKS

SEE REMARKS ON
REVERSE

Quar J. Foman
SP#7 DAC

Signature of Officer or other person who prepared Teeth chart

Verified by G. R. C. Officer

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



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



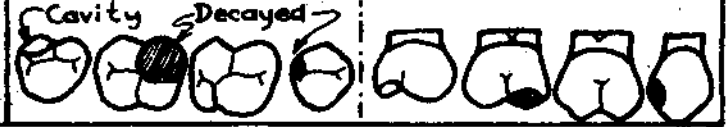
BRIDGE WORK... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



FILLINGS... Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus :



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



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

ADDITIONAL SPACE FOR FURTHER REMARKS

⊗ = POSTHUMOUSLY MISSING
 ⊙ = BROKEN OR CHIPPED

COLOR = DULL IVORY WITH A PINK TINGE
 SIZE = AVERAGE
 ALIGNMENT = Good

MAXILLA

R-5 = MALPOSED LINGUALLY AND ROTATED SLIGHTLY MESIALLY.
 R-4 = SLIGHT DISTAL ROTATION
 L-1 = SLIGHT DISTAL ROTATION.

INCISORS HAVE A FACIAL VERSION

MANDIBLE

R-16 = LINGUAL VERSION.
 R-11 = ROTATED 1/8 OF A TURN DISTALLY, ALSO OVERLAPS R-10.
 R-10 = LINGUAL VERSION.
 L-12 = ROTATED 1/16 OF A TURN DISTALLY.

USMC St. Laurent

Plot Row 19 Grave 35

Date of Burial: 22 June 1950

Verified by GRS

DISINTERMENT DIRECTIVE

R. J. Rodriguez

R.T. RODRIGUEZ, CWO, USA

App 7/2/50

RL

1

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER 3574 00000

DATE 15 01 48 DAY MONTH YEAR

NAME UNKNOWN SERIAL NUMBER UNKNOWNX-004648 RANK ARM 8 DATE OF DEATH

CEMETERY ST AVOLD - METZ DISPOSITION OF REMAINS 0 350 15 80 CODE DIST. PT.

PLOT PP ROW 7 GRAVE 73 COUNTRY FRANCE CAUSE OF DEATH 6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE ST LAURENT, FRANCE THESE REMAINS ARE UNIDENTIFIABLE AND ARE TO BE PERMANENTLY INTERRED. (HQ. AGRC-19 Dec 49)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME UNKNOWN X-004648 SERIAL NUMBER RANK DATE OF DEATH 7 July 48 DATE DISTINTERRED

IDENTIFICATION TAG ON ORGANIZATION UNKNOWN RELIGION IDENTIFICATION VERIFIED BY Richard F Peterson, Embalmer NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL UNIFORM CONDITION OF REMAINS TOTALLY DISARTICULATED. SMALL AMOUNT OF FLESH. FRACTURES OF SKULL.

OTHER MEANS OF IDENTIFICATION REPORT OF BURIAL FOUND WITH REMAINS NAT FILE

MINOR DISCREPANCIES 1 NONE RECORDS ANNOTATED DATE 27 JUL 50 NAME R. T. Johns R-T REG. MEM. DIV.

REMAINS PREPARED AND PLACED IN CASKET DATE 9 July 48 BY RICHARD F PETERSON, EMBALMER

CASKET SEALED BY RICHARD F PETERSON, EMBALMER EMBALMER (Signature) RICHARD F PETERSON

CASKET BOXED AND MARKED SHIPPED TO ALL markings, plates & tags verified by HENRY F ALZMANN, 1st Lt INF DATE 9 July 48 BY RICHARD F PETERSON, EMBALMER

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct. HENRY F ALZMANN, 1st Lt INF HENRY F ALZMANN, 1st Lt INF, 757 AGRC ZONE 9 HQ SIGNATURE OF GRS INSPECTOR

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies. Consignee changed by Reg Div.

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC ST AVOLD, FRANCE		TO OIC NEUVILLE, BELGIUM	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER CPT VINCENT P MATOZZO RA 5870783	
SIGNATURE OF SHIPPER <i>F. B. Callaghan</i>	DATE	SIGNATURE OF RECEIVER	DATE

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE (BY AIR MAIL)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

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

7. SHIPPED

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

AIRMAIL

FORM 114.6

1st Incl

GND European

(St. Louis) France

~~SUBJECT: Certificates of Unidentifiability of Remains
Transmittal Letter #4581~~

Dept. of the Army, GPO, Washington 25, D. C., 7 February 1950

TO: Chief, Registration Division, 7837 Graves Registration Detachment,
APO 54, c/o Postmaster, New York, New York

This Office approves the classification of the Unknowns listed on
basis communication as Unidentifiable.

FOR THE QUARTERMASTER GENERAL:

4 Incls
w/d

T. E. MEYER
Lt. Colonel, GPO
Memorial Division

Holden:cm
Clements
RBB

JMB

TEC

1878
JAN 1 - 4648
S. M. ...

AIRMAIL

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

6/Dec 1949

Date

293 Unknown-France X-4648 (St. Avold) dl

SUBJECT: Unidentifiable Remains

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

1. The records pertaining to Unknown X- 4648, Plot PP,
Row 7, Grave 73, 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. 4564, dated 6-12-49. No
further information is available.

FOR THE COMMANDING GENERAL:

Case reviewed by undersigned members of the Board of Review:

H. P. HENRY
Col. QMC.

/s/ E. D. MULVANY
/t/ Lt. Col. QMC

EDWARD F. PRICE, JR.
Capt. QMC

Received 4 Jan '50 QMG
Not identifiable from
information presently
available

MAN
file 4 Jan 50
Schmitt
Jd Bi.

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 U S ARMY

RRE 293

6 December 1949
(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X- 4648, Plot FP, Row 7, Grave 73, USMC ST. AYOLD, France, have been reviewed and it is the opinion of the Board of Review, this headquarters, that sufficient evidence is not available to establish the identity of the deceased concerned, therefore, these remains should be classified as unidentifiable.

2. Report of Reprocessing of remains was forwarded to the Office of The Quartermaster General by Transmittal Letter No. 4564, dated 6-12-49.

3. Remarks:

See Case History attached.

Case reviewed by undersigned Members of the Board of Review:

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

JMC

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

JMC

Maj. Charles REYNOLDS, O-182639

TC

Maj. Gerald SWARTHOUT, Sr., O-267451

CE

[Signature]
Capt. Edward F. PRICE, Jr., O-1588236

JMC

1st Lt. Frederick S. DAVID, O-1826041

CAV

CWO Frank GEER, W-2108925

Received 4 Jan '51 USA

[Signature]
Capt. Jack C. HAYES, O-1577297

JMC

Not identifiable from
information presently
available

Incl #3

UNKNOWN NO.

4648

U.S. MILITARY CEMETERY

Saint Avold

(Location)

The remains of Unknown L-4648 was recovered from civilian cemetery located at Diefflen, Germany. Five other remains were recovered from the cemetery at Diefflen at the same time as L-4648. All of the finds have been identified. The cross over the grave from which these remains were disinterred was marked "Pfc Ralph D. GUNDERSON, 36739195". Unknown L-4647 which was recovered from same civilian cemetery with L-4648 has been definitely identified as Pfc Gunderson. Therefore information on cross is incorrect. An attempt was made to associate L-4648 with an unresolved casualty of the 357th Infantry Regiment of which Pfc Gunderson was a member. No definite association could be made. All Form 371's for unresolved casualties on Map Sheet K-50 have been compared against tooth chart and physical characteristics of L-4648 with negative results. Therefore these remains are being declared **U N I D E N T I F I A B L E**.

L. Pierpoint
1 December 1949

X-4648 may not be favorably assoc. w/any unresolved casualty of the 357th, 358th, 359th Inf Regts KIA or MIA in Dec '44, or with any unresolved casualty of organizations attached to 90th Inf Div during Dec 1944.

C Schroth
4 Jan 50

CPH

U.S. MILITARY CEMETERY
SAINT AVOLD
SAINT AVOLD, FRANCE

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

100-1177
Ralph D.
36739195
St. Avoide France
X-4647 (St Avoide)
MA

17 September 1948

copy for 193 Snake-France X-4648 (St Avoide)

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 Reports of Burial for Unknowns X-4647 and X-4648, St. Avoide, France.
2. An identification tag found imbedded in the leg of Unknown X-4647 and the grave marker for X-4648 bore the name of Pfc Ralph D. GUNDERSON, 36739195; however, due to the lack of adequate dental information, positive identification cannot be established in this office.
3. In view of the foregoing, it is requested that this case be reinvestigated by your Headquarters and if the identification of X-4647, St. Avoide, or any other Unknown deceased disinterred from the Diefflen area, can be established as the remains of Pfc Ralph D. GUNDERSON, 36739195, that the evidence be presented to a Board of Officers in accordance with Department Letter, Dist-S 293.9 (27 March 47) D-6, dated 9 April 1947, Subject: Establishment of Boards of Review for Identification of Unknown Dead Overseas. A report thereof to be forwarded by air mail.
4. O-28 Form 371, which contains dental information as provided by a civilian dentist, and a photo of Pfc Gunderson, showing the arrangement and occlusion of his teeth are inclosed as an aid to identification.
5. A Congressional Inquiry has been received on Pfc Ralph GUNDERSON, 36739195.

FOR THE QUARTERMASTER GENERAL

2 Incls:
 1 - O-28 Form 371 (in dupl)
 (Gunderson)
 2 - Photo (Gunderson)
 cc: IG Br, IG Data Sect
 cc: Adm Sect
 ted:Landis

T. H. MOSE
 Lt. Colonel, USA
 Memorial Division

NJS
 JCM

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

RRE 200.2

Date 2 JUN. 1948

SUBJECT: Reprocessing of Remains

TO: The Quartermaster General
2nd & T Sts. S.W.
Washington 25, D.C.

The remains of X-4648
interred in Plot PP, Row 7, Grave 73, USMC St-Avoid
France, have been reprocessed and the information
not previously forwarded to your Headquarters is herewith submitted.

Belt, web : Remnants of

Remnants of comb, rem. of pencil, remnants of nail file, rem. of religious
medal, pocket knife.

Est. height : 5' 9 $\frac{1}{2}$ "

Evidence of a healed fracture on the posterior surface of proximal third
of left femur.

FOR THE COMMANDING GENERAL :

2 Incls : 1. Skeletal Chart
1. Tooth chart


BERNARD E. CARROLL
WOJG AUS
Actg Asst Adj Gen.

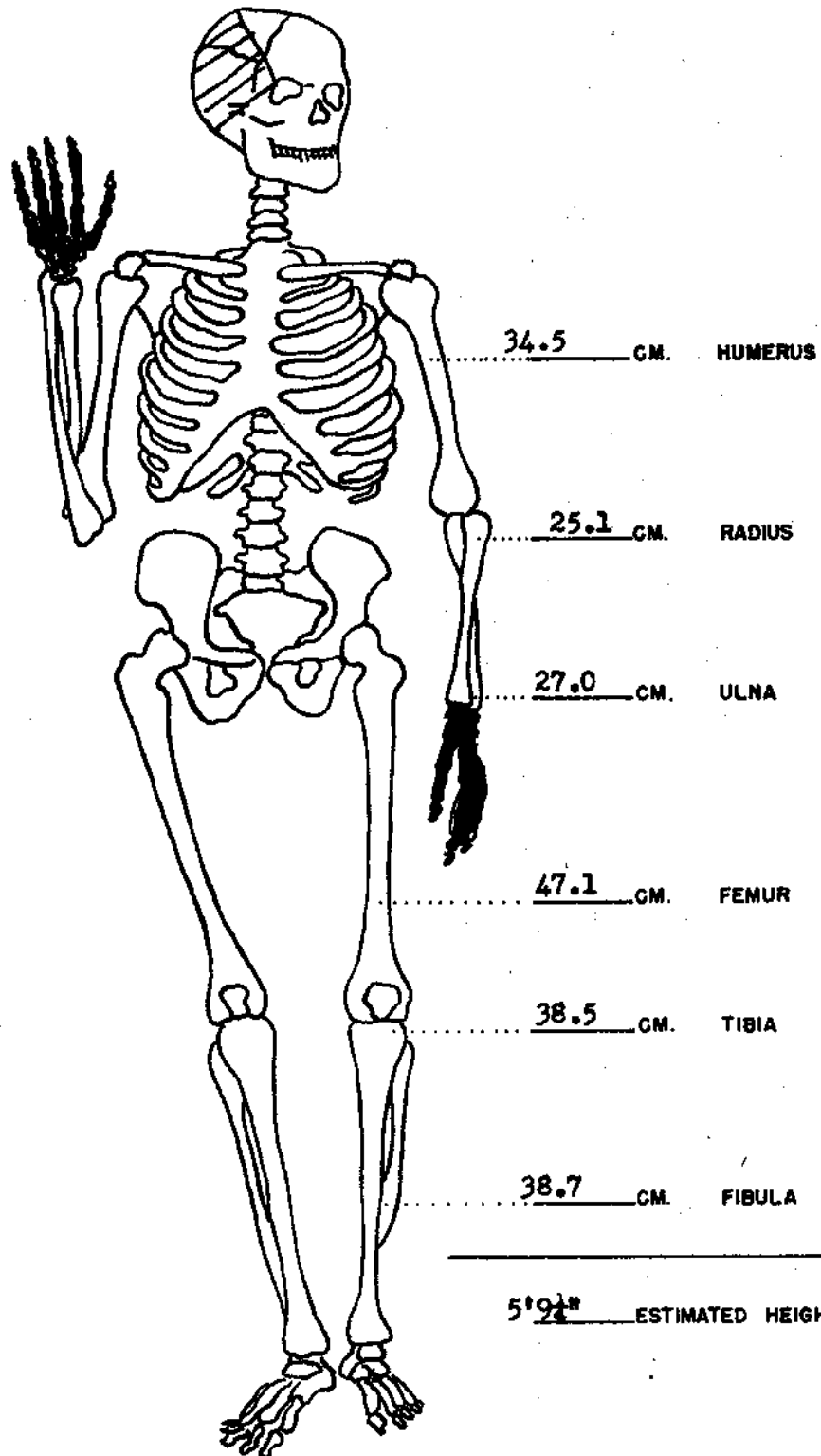
X-4648

USMC St-Avold
Plot FP, Row 7, Grave 73

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED)

14 April 1948



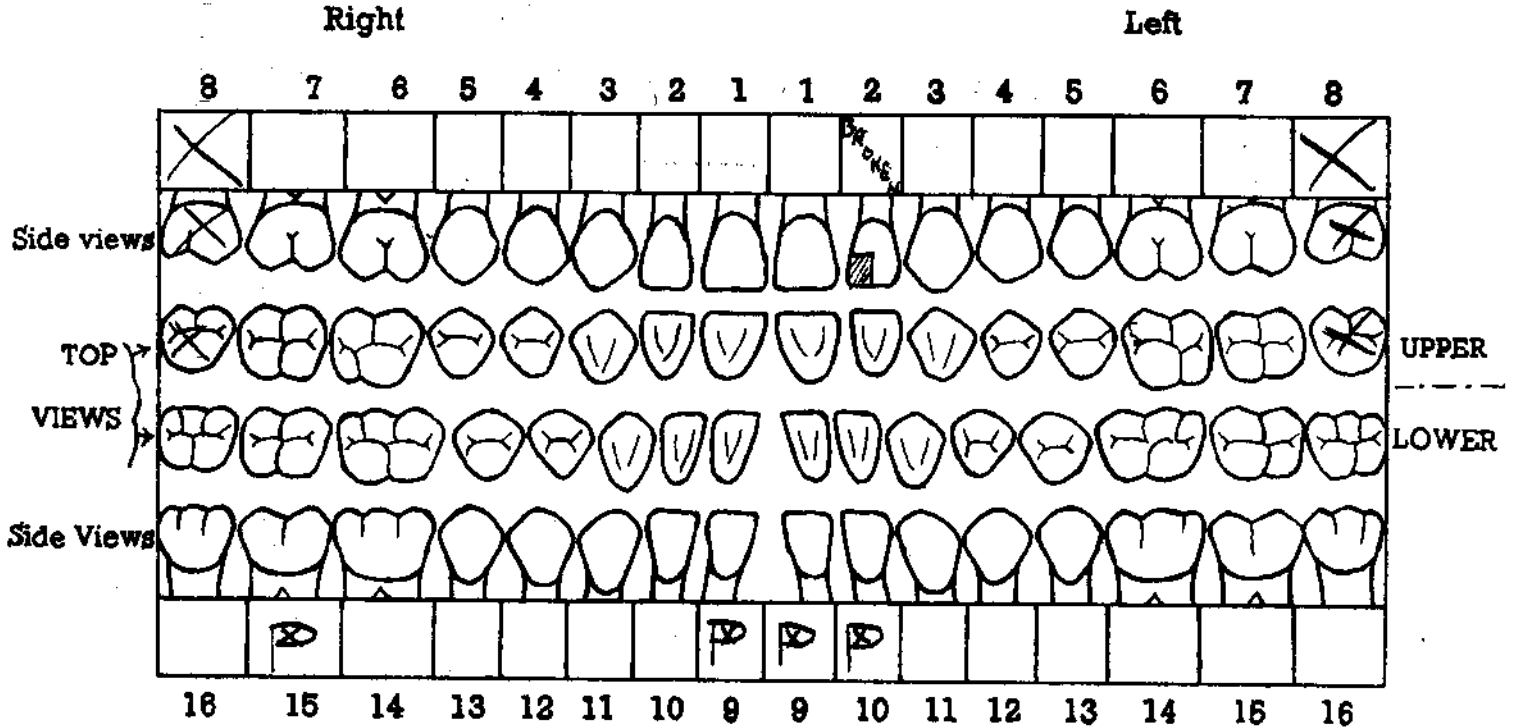
PROCESSED BY: _____

TOOTH CHART

14 April 1948

X-4648			Unk	Date Unk
Last Name	First	Initial	Grade	Serial No.
Unit			Organisation	

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.




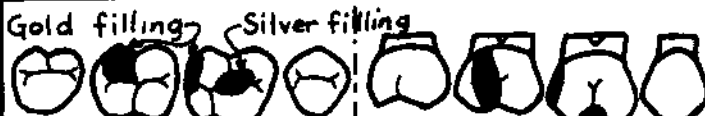

Certified True Copy:

Bernard E. Carroll
 BERNARD E. CARROLL
 WOJG AUS

/s/ Ivor J. Fosmo

Signature of Officer or other person who prepared Tooth chart

Verified by G. R. C. Officer

<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

Posthumously missing
Broken or chipped

Color Dull Ivory with a pink tinge
Size Average
Alignment Good

Maxilla

R-5 malposed lingually and rotated slightly mesially
R-4 slight distal rotation
L-1 slight distal rotation

Incisors have a facial version

Mandible

R-16 lingual version
R-11 rotated 1/8 of a turn distally, also overlaps R-10
R-10 lingual version
L-12 rotated 1/16 of a turn distally

243 Gunderson, Ralph D
3473 9195

ENEMY DEPT OF ARMY WASH DC VOGL X 1652

UNCLASSIFIED

CG AGRC PARIS FRANCE

PRIORITY

X

XXXXXXXXXXXX

CHARGE GRAVES W II

FROM ENEMY

REFERENCE PVT FIRST CLASS RALPH DOG GUNDERSON THREE SIX SEVEN
THREE NINE ONE NINE FIVE PD REQUEST THAT UNKNOWN XRAY FOUR SIX FOUR
SEVEN AND XRAY FOUR SIX FOUR EIGHT SAINT AVOLD BE REPROCESSED
SIMULTANEOUSLY AND CHECKED FOR THE FOLLOWING CLN ITEM ONE CLN BOTH
UNKNOWN FOR EVIDENCE OF ABLE ROOT CANAL FILLING AT RIGHT TWO PD ITEM
TWO CLN VERIFY THAT NO FILLINGS ARE PRESENT IN RIGHT ONE FOUR CMA LEFT
ONE FOUR AND ONE FIVE AND NO FILLINGS IN UPPER ANTERIOR TEETH OF
UNKNOWN XRAY FOUR SIX FOUR EIGHT PD ITEM THREE CLN CHECK POSITION OF
FILLINGS IN RIGHT ONE FOUR AND ONE FOUR PAREN LEFT PAREN OF UNKNOWN
XRAY FOUR SIX FOUR SEVEN CMA INASMUCH AS GUNDERSONS ARMY DENTAL RECORDS
SHOW DISTAL OCCLUSAL AMALGAM IN RIGHT ONE FOUR AND MESIAL OCCLUSAL
AMALGAM IN LEFT ONE FOUR PD ITEM FOUR CLN CHECK BOTH UNKNOWN FOR

X 243 3 mde France X-4648 (Strawberry)

UNCLAS
ARMY DEPT OF ARMY WASH DC VOGL X 4652

UNCLASSIFIED

PAGE TWO

PRIORITY

X

240 59

XXXXXXXXXXXX

EVIDENCE OF AN OSTEOMA PAREN INTERIOR AND EXTERIOR OF SKULLS PAREN ON
RIGHT SIDE OF FOREHEAD OR FOR POSSIBLE PRESENCE OF FRACTURE LINES PD
FIELD IDENTIFICATION OF GUNDERSON WITHHELD PENDING REPLY FROM YOUR
HEADQUARTERS PD CONGRESSIONAL INQUIRY INVOLVED

293 Gundersen, Ralph D. 36739194 GRS (CA)

UNCLASSIFIED

ARMY 293
GRAVES REGISTRATION EA

13 1615Z
DEC 48

O.J. MURRAY
MAJOR, GNC, MEM DIV

2 2

DISINTERMENT DIRECTIVE

6

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
3274 00000

DATE
12 01 48
DAY MONTH YEAR

NAME		SERIAL NUMBER	RANK	ARM	DATE OF DEATH
ST. AVOLD - METZ		UNKNOWN - 034542			
CEMETERY					DISPOSITION OF REMAINS
ST. AVOLD - METZ					3203 00
PLOT	ROW	GRAVE	COUNTRY	CAUSE OF DEATH	
PP	7	73	FRANCE		

SECTION B — CONSIGNEE AND NEXT OF KIN

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

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISTINTERRED
IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY	
<input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	UNKNOWN		NAME AND TITLE	

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
OTHER MEANS OF IDENTIFICATION	
MINOR DISCREPANCIES 1	
REMAINS PREPARED AND PLACED IN CASKET	
DATE	BY
CASKET SEALED BY	EMBALMER (Signature)
CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
DATE	BY

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

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

RHM 314.6

17 January 1949

SUBJECT: Identification Check List
Transmittal Letter #3378

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

Inclosed herewith for your files is a copy of Identification
Check List (AMRG Form #11) of Unknown X-4648, Plot PP, Row 7, Grave 73,
after disinterment in the US Military Cemetery, St Aved, France.

FOR THE COMMANDING GENERAL:

1 Incl:
Identification Check List

GEORGE L. FREEMAN
1/LF CMC
Actg Asst Adj Gen

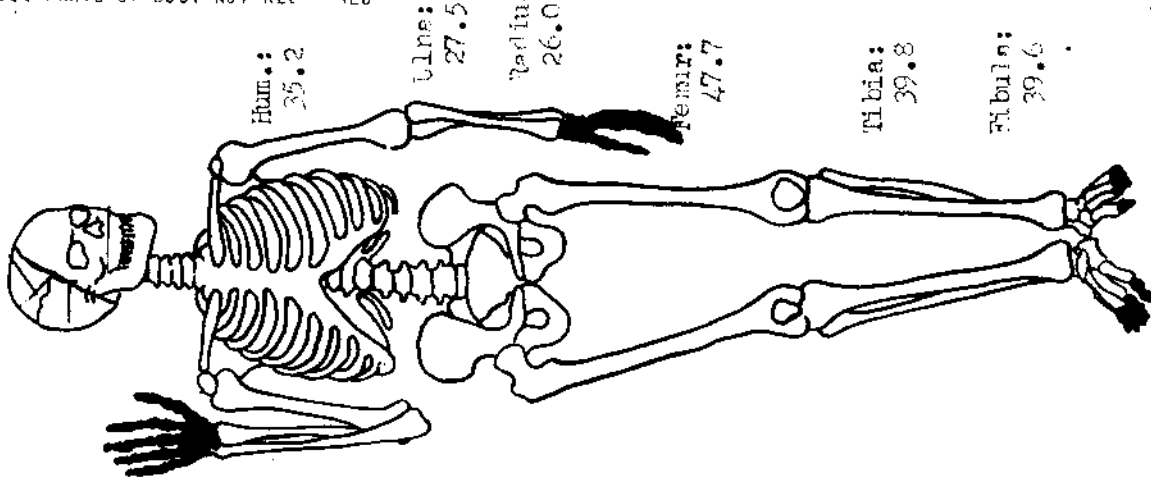
Tel: Paris, BALgac 5400, Ext 393

Handwritten note:
The 1st copy of this report is in the file of the 1st Lt. Freeman.

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN X-4648				2. DATE OF REPORT 29 Dec. 48	
3. NAME OF CEMETERY ST. AVOLD		4. PLOT PP	5. ROW 7	6. GRAVE 73	7. DATE OF DISINTERMENT REINTERMENT
PHYSICAL DESCRIPTION					
8. ESTIMATED WEIGHT of re-processed remains: 17lbs		9. ESTIMATED HEIGHT 5'10 3/4"		10. COLOR OF HAIR Med. brown	
11. RACE					
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS Two embossed plates marked: Unknown X-004648					
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES U.T.D.					
14. WAS BODY BURNED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		TO WHAT EXTENT?			
15. WAS BODY MANGLED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Skull crushed			
16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS None found					
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) Remains received in skeletal form in a repatriation type casket. Teeth found with remains. No clothing. Remains previously processed by repatriation. No evidence of any healed fractures or amputations. No I.D. Tags found. In reference to E.O. # 1502: A) UTD as to whether R-2 had a root canal filling because R-2 was posthumously missing. B) The following teeth had no fillings: R-14, L-14-15 and upper anteriors that are present. D) There was no evidence of any osteoma or any fracture lines on right forehead.					
/s/ Thomas W. TURNER					

19. BLACK OUT PARTS OF BODY NOT REC RED



Est. Ht is 5'10 3/4"

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

I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF _____ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE
 OF THE FOLLOWING ANATOMICAL PARTS: NUMBER

 SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

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
 /s/ **Thomas W. TURNER**

TOOTH CHART

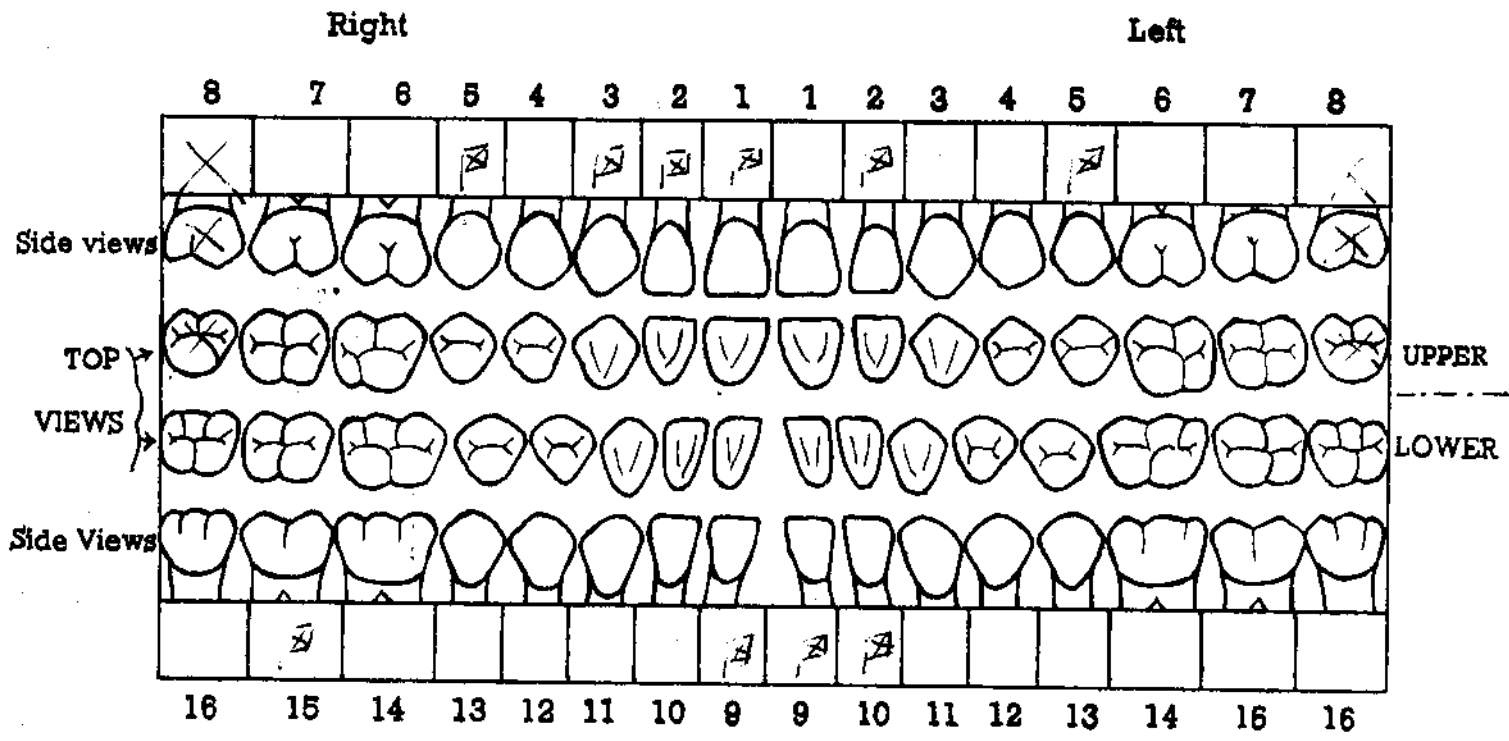
29 Dec. 1948

Date

Unknown X-4648

Last Name	First	Initial	Grade	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.

A CERTIFIED TRUE COPY

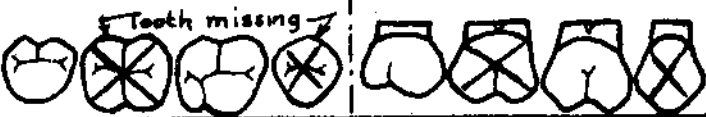


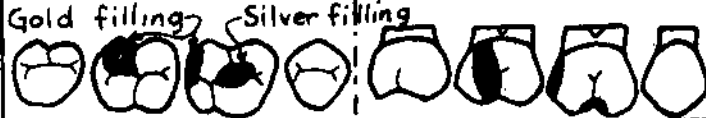

George J. Freeman
GEORGE J. FREEMAN
 1st Lt QMC

/s/ **Larry De Shaw**
 Signature of Officer or other person who prepared Tooth chart
DAO

Verified by G. R. C. Officer

ET FORM 1-22 (29 AUG. 46)

(OLD GRAVE REGISTRATION FORM 1-A)

<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>Teeth missing</p>
<p>CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :</p>	 <p>Gold crown Porcelain crown</p>
<p>BRIDGE WORK... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :</p>	 <p>Gold bridge</p>
<p>FILLINGS... Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus :</p>	 <p>Gold filling Silver filling</p>
<p>CARIES (CAVITIES). Outline location and size of cavity, shade in thus :</p>	 <p>Cavity Decayed</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

Size : Medium
 Alignment : Good
 Color : Clean dull ivory

Note : It is impossible to determine if R-2 had a root canal filling because R-2 is posthumously missing.

There are definitely no fillings in R-14 and L-14-15, or upper anteriors that are present.

As a matter of fact, no teeth present have any fillings what so ever.

LOT 1044

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN		2. DATE OF REPORT			
AT 4678		10/15/52			
3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT / REINTERMENT	
OF AVON	PP	7	73	- / -	

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT OF REMAINS	9. ESTIMATED HEIGHT	10. COLOR OF HAIR	11. RACE
17 LBS.	5' 10"	RED BROWN	-

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

TWO EMBOSSED PLATES MARKED:
UNKNOWN - X-004678

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

UTD

14. WAS BODY BURNED? YES NO TO WHAT EXTENT? _____

15. WAS BODY MANGLED? YES NO TO WHAT EXTENT? SKULL CRUSHED

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

NONE FOUND. TL # 3311
AD # 11119

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 specimens forwarded through channels for examination when facilities are not available in the area)

REMAINS RECEIVED IN SKELETAL FORM IN A REPATRIATION TYPE CASSET. TEETH FOUND WITH REMAINS. NO CLOTHING. REMAINS PREVIOUSLY PROCESSED BY REPATRIATION. NO EVIDENCE OF ANY HEALED FRACTURES OR AMPUTATIONS. NO I.D. TAGS FOUND.

IN REFERENCE TO E.O. # 10702:

A) UTD AS TO WHETHER R-2 HAD A ROOT CANAL FILLING BECAUSE R-2 WAS POSTHUMOUSLY MISSING.

B) THE FOLLOWING TEETH HAD NO FILLINGS:
R-14, R-14-15 and UPPER ANTERIORS THAT ARE PRESENT.

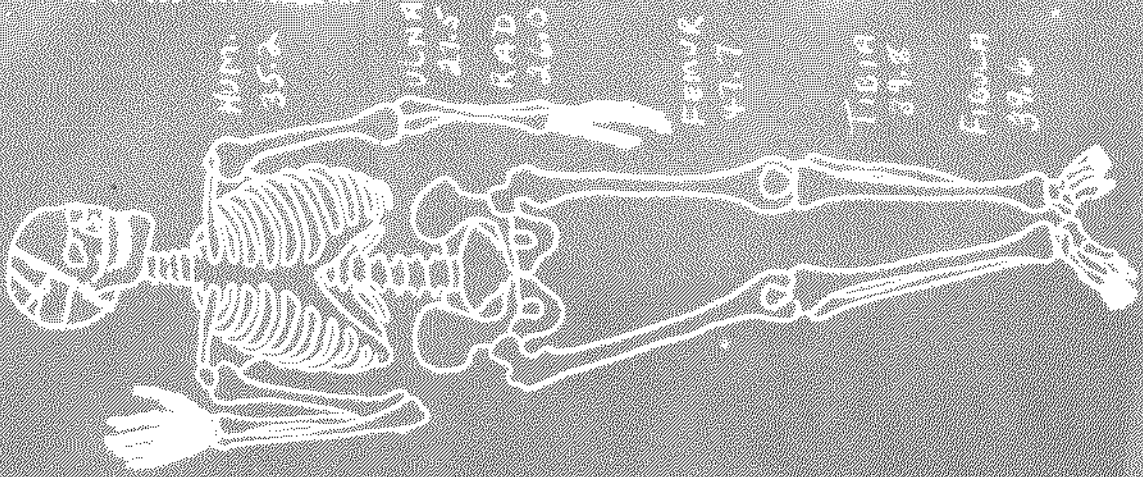
D) THERE WAS NO EVIDENCE OF ANY OSTEOMA OR ANY FRACTURE LINES ON RIGHT FOREHEAD.

Thomas M. Turner

UNKNOWN X-4675

S.O.# 150-4

19. READ OUT PARTS OF BODY NOT IDENTIFIED



Cost. 104. 10-5-104

20. **MASS BURIAL CERTIFICATE (IF APPLICABLE)**
 (Wherein segregation in whole or part is impossible)

I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF _____ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS:

NUMBER

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

77

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

Thomas M. Thomas

TOOTH CHART

29 Dec. 48

UNKNOWN X-4645

Last Name First Initial Grade Social No.

Unit

Organization

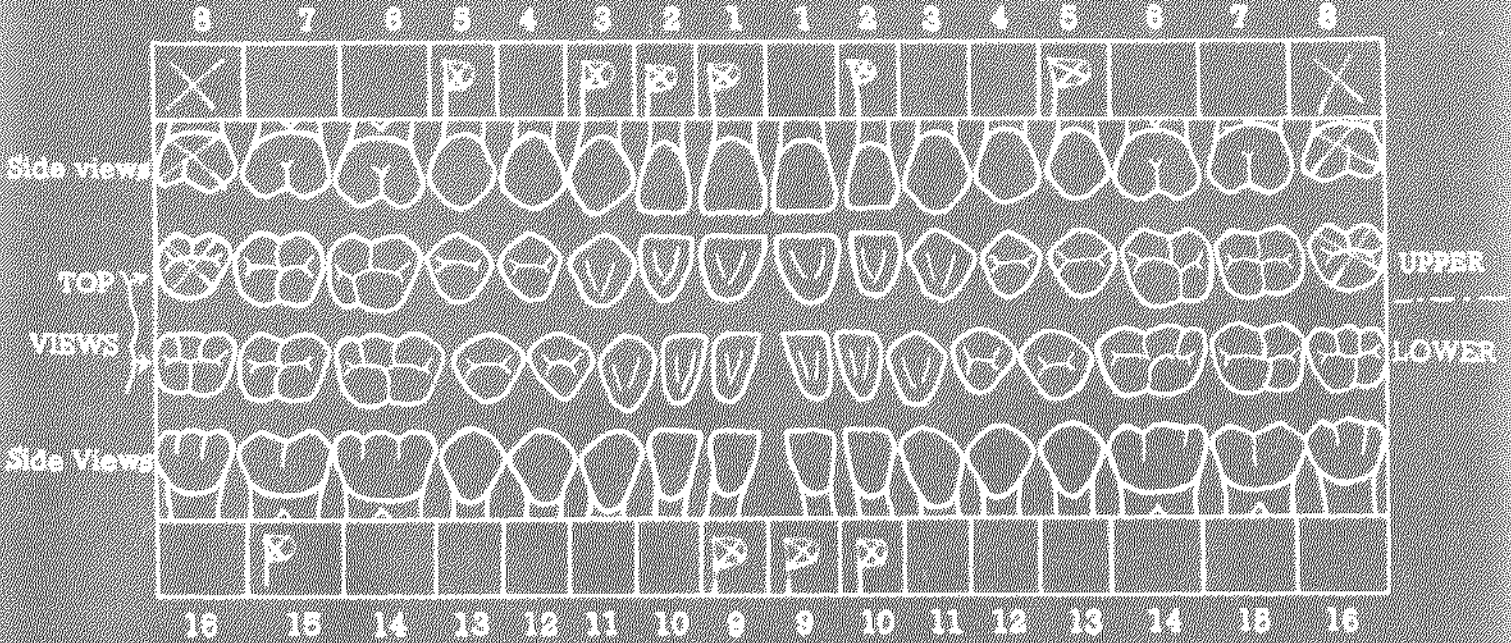
Place of Death

Date of Death

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), 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.

Handwritten notes:
 18
 5/10/48
 2/10/48

Signature of Officer or other person who prepared Tooth Chart

Signature of Officer or other person who prepared Tooth Chart

Verified by S. R. C. Officer

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

Size - Medium
 alignment - Good
 color - clean dull ivory

note: it is impossible to determine if R-2 had a root canal filling because R-2 is pathologically missing.

There are definitely no fillings in R-14, and R-14-15, or upper anterior that are present.

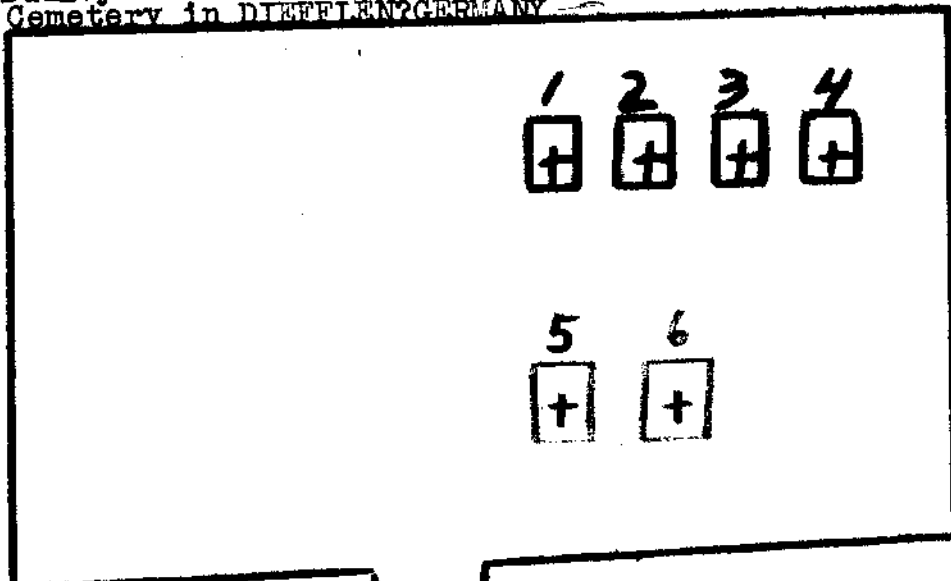
As a matter of fact no teeth present have any fillings what so ever.

79

Graves of ~~more~~ more American soldiers in the Cemetery at DIEFFLEN, Ger.

DIEFFLEN, Germany
Map 1:250,000 Sheet K-50
Trier Coord: WQ 2986
Location: Cemetery in Diefflen, Germany
Sketched by: T/5 Akiki
606 QM.G.R.Co.
Date: 26 Feb. 1946
Not to scale

- (1) Leonard C. Nedella *357 Inf. 11202nd Regt*
 - (2) Unk. X-4646 - *at 7000 ft. elevation*
 - (3) Unk. X-4647 - *Anderson*
 - (4) Benito Bedan
 - (5) Archibald G. Dudley *357 Inf. 11202nd Regt*
 - (6) Unk. X-4648
- Foucher, Andre (3141556) K6 12/20/44*
- Archibald Dudley*



← DILLINGEN

NALBACH →

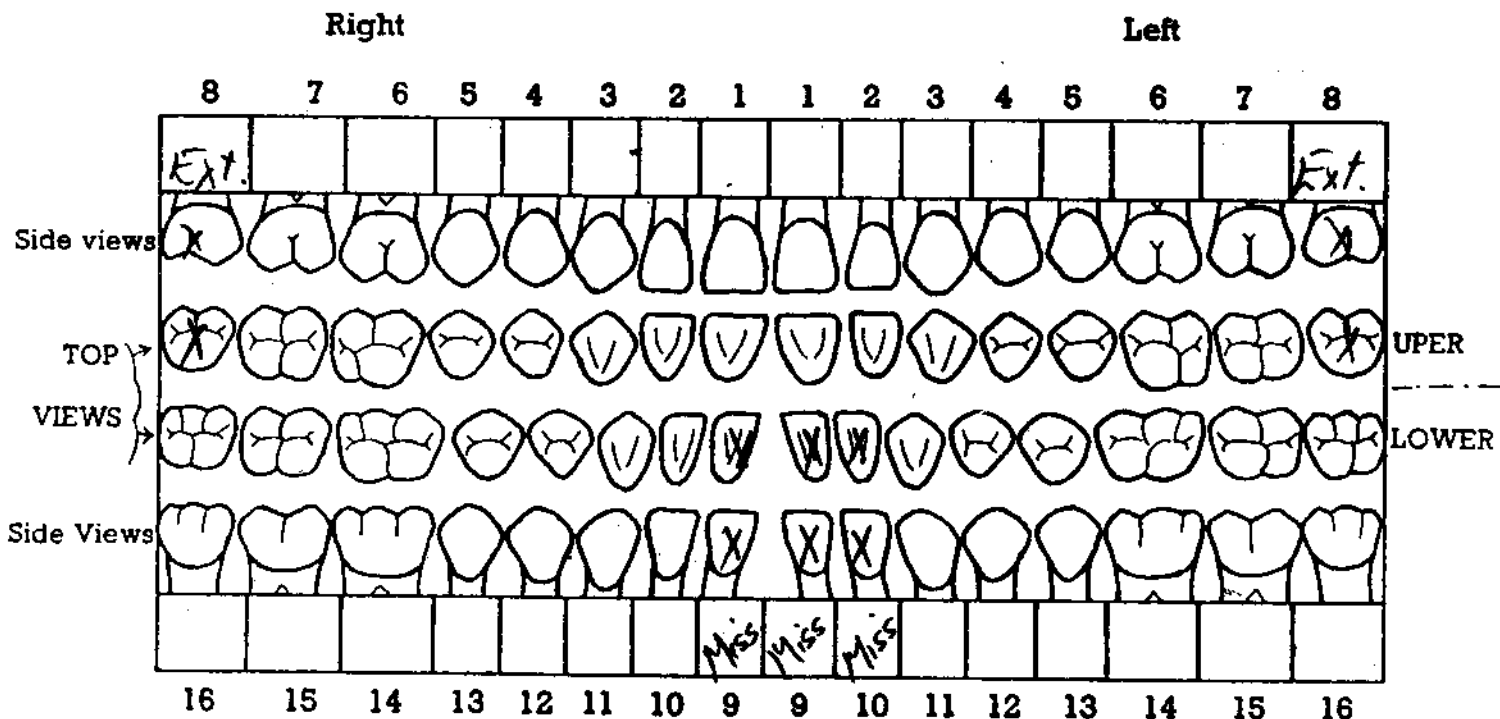
TOOTH CHART

X-4648

27 Feb. 1946
 Date

UNK. X 4648 (St. Avoird, France)
 Last Name First Initial Rank Serial No.
 unk. unk.
 unk. unk.
 Unit Organization

DIEFFLEN, Germany (WQ 2986) December 1944 S.W. of back
 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), bacuspids (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.

Sgt. Bobby Thomas
 Signature of Officer or other person who prepared Tooth chart

William H. Zerkhan
 Verified by C. R. / S. Officer

WILLIAM H. ZERKHAN
 2nd Lt. Inf.
 606 M.G.R.Co.

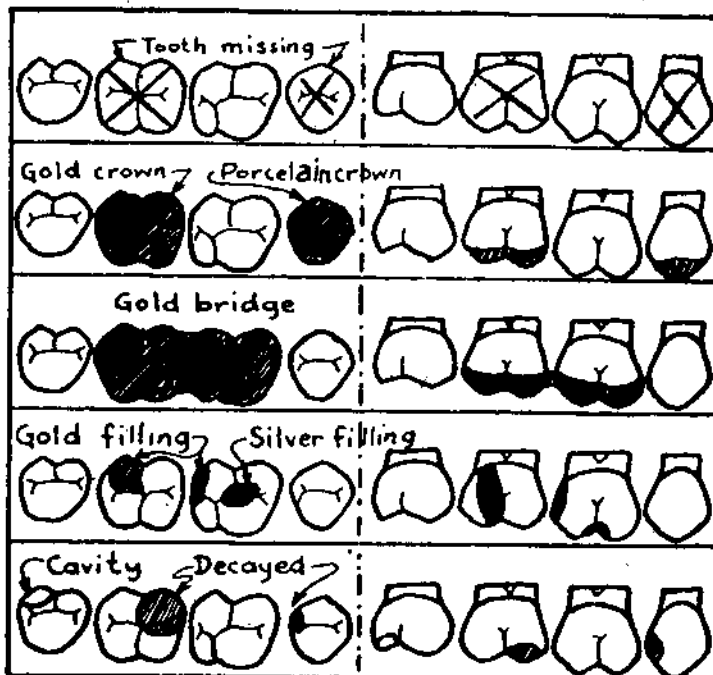
MISSING TEETH . . . All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus:

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

CHECK LIST FOR UNKNOWN

Item	Color	Size	Initials	Markings
1. Unknown, X - 1648	St. Avold, France	US Military Cemetery No.	Coll. Pt. Homburg, Germany	4/5 Burns
2. If remains were disinterred, attach Check List for Disinterments.				
3. Arrived at cemetery 1600, 15. Feb. 1946		606 Q.I.G.R. Co.	Homburg, Germany	
4. Place of death DIEFFLEN, Germany	Map 1:250,000 sheet; X-50, Triang. Grid.			
5.		coords: Wg 2986.		
6. Remains recovered by	Lt. Clark, 606 Q.I.G.R. Co.			
7. Evacuated to cemetery by	Lt. Clark, 606 Q.I.G.R. Co.			
8. Is load list attached	NO			
9. Are names of deceased found in same area as this Unknown starred	NO			
10. Are circumstances described which may indicate organization of the deceased	NO			
11. If only part of body was received, was a careful search made for other parts of Unknown	NO			
12. If remains come from vehicle, plane, etc:	unknown			
13.				
14. Crew list	unknown			
15.				
16.				
17. If a tank, which hatches were free and available for escape use	not applicable			
18. 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				
19.				
20.	unknown			
21.	found in town field by road etc			
22. detailed description of personal effects	damaged by mine explosion			
23.	unknown (if any)			
24.	names of men who escaped			
25.				
26.				

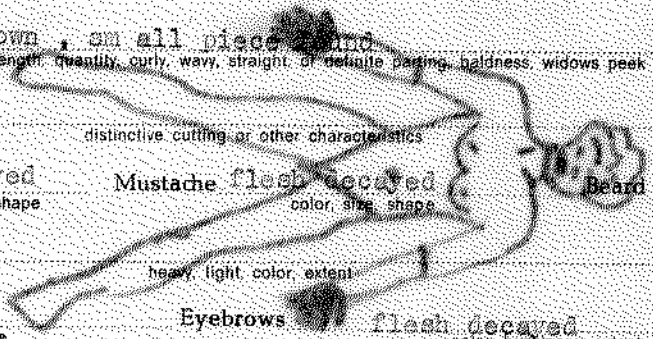
Description of clothing and equipment. (If clothes do not fit, obtain sizes from body measurements)

Item	Clothing Markings	Sizes	Color	Indicate unusual markings, wear, tear, repairs etc.
27. *Headgear type				
28. Raincoat				
29. Overcoat				
30. Jacket, Field				
31. Jacket, Combat				
32. Mackinaw				
33. Sweater				
34. Jacket, HBT				
35. *Shirt Wool OD				
36. Undershirt, Wool	none est.	36	O.D.	2 pair
37. Undershirt, Cotton				
38. Trousers, HBT				
39. *Trousers, Wool OD	none	32-34	O.D.	2 pair
40. Belt, Web				
41. Drawers, Wool	none	32	O.D.	2 pair
42. Drawers, Cotton				
43. Leggings				Note unusual lacing
44. Socks Wool Cotton				
45. *Shoes type				
46. Oveshoes				
47. Web Equipment				
48. other item				
49. other item				

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

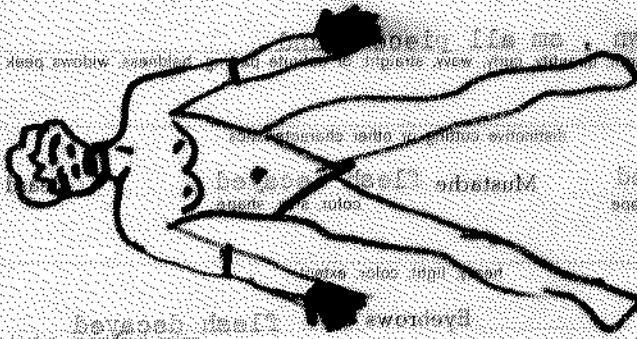
50. Chevrons or type and location	none		Shoulder Patch	none			
Insignia	none						
51. Description of Remains							
52. Age	unk. years	Height	unk. ft.-in	Weight	unk. lbs	Description of wounds	B.W. in back
53.							

54. Bandages or dressings none Scars on flesh and skin decayed
 55. Tattoos flesh and skin decayed
 56. Outstanding moles, warts or birthmarks flesh and skin decayed
 57. Sunburn or tan, other than hands and face flesh and skin decayed
 58. Tobacco stain on fingers or teeth fingers missing - teeth white
 59. Complexion flesh and skin decayed Build
 60. Hair brown, on all piece and
 61. Sideburns flesh decayed Mustache flesh decayed Beard or goatee flesh decayed
 62. Eyes missing Eyebrows flesh decayed
 63. Nose flesh decayed Ears flesh decayed
 64. Forehead flesh decayed Mouth flesh decayed Lips flesh decayed
 65. Teeth white, see tooth chart
 66. Chin flesh decayed Cheekbones flesh decayed
 67. Jaw flesh decayed Circumference of head in inches est. 21 in.
 68. Neck flesh decayed Larynx decayed Shoulders est. broad
 69. Arms est. 26 in. flesh decayed
 70. Hands missing
 71. Fingers missing



77. ...

78. Fingers missing missing fingers or joints
79. fingers missing Unusual characteristics of fingernails
80. Chest est. 37 in. flesh decayed size at nipples, color, quantity and extent of hair, large, normal
81. Back flesh decayed Waist est. 31 flesh decayed
82. Circumcized yes Pubic hair brown Hernioplasty no
83. Legs est. 31 in. flesh and skin decayed Inseam, muscular, knock kneed, bowed, normal
84. Feet flesh and skin decayed Toes flesh and skin decayed
85. Evidence of healed fractures no nose, arms, legs, etc.
86. Block out parts of body not received at cemetery. Completion
87. Have photographs been made and attached no If not, explain see question 90
88. Have fingerprints been placed on GRS No. 1 If not, explain fingers missing
89. Has tooth chart been prepared? yes If not, explain
90. Remarks: Body buried in U.S. Military Cemetery, St. Avold, France.
91. Body in advance stage of decomposition. Both hands missing.
92. Remains weigh approx. 120 pounds.
93. hands
- 94.
- 95.
- 96.



WILLIAM H. VERHAN
2nd Lt. Inf.
606 M.G.H.Co.

William H. Verhan
Signature of GRC and Organization

REPORT OF INVESTIGATION - AREA SEARCHING

To be completely filled out and attached to each copy of GR Form I,
„Report of Burial“ when disinterment is accomplished.

1. Was investigation preceded by Advance Publicity: **Yes**
(if Special Investigation, so indicate)
2. **UNK. X 4648 (St. Avold, France)** **unk.** **unk.** **unk.**
(Full name of deceased) (Rank) (ASN) (Organization)
3. State: Means of identification, i. e. identification, tags attached to marker, inscription on grave marker, cemetery records, townhall records, etc. and Source of Information, i. e. identification tags, identification cards, identification bracelet, leather name plate on flying jacket, clothing marks etc.
No I.D. tags found, tooth chart taken, no fingerprints, no clothing marks found.

4. Give exact location of isolated grave, furnishing coordinates and letter prefix, map sheet, scale and series used; also name of nearest town: **DIEFFLEN, Germany**
Map 1:250,000 sheet K-50 Trier, Ger., coord WQ 2986

NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION IN WITH PERMANENT LANDMARKS.

5. Full name of cemetery (include plot, row and grave if organized cemetery):
Heldenfriedhof Diefflen, Germany, row 2, grave 6.
6. Approximate or established date of death (state which and give basis for date selected):
December 1944 from Burgermeisters report.
7. Approximate or established date of burial (give basis for date established):
January 1945 from Burgermeisters report.
8. Manner in which grave was marked, show information contained on the marker:
Grave marked with cross, inscription: "Palph D - Gundersohn E.M. 56739195 T. 43, 44".
9. List personal effects found in possession of civilian and custodial personnel now retaining, furnishing name and address of individuals concerned:
All personal effects were taken by the German soldiers.
10. Furnish information obtained concerning place, and particulars surrounding death and burial; give the names and addresses of all persons furnishing such information (contact local Mayor, priest, police, hospitals, cemetery sextons or caretakers, those responsible for burial and others possessing important information):
UNK. X 4648 was killed in combat in December 1944 in a wooded area between Dillingen and Merzig, Germany. The body was buried in January 1945 in the Diefflen cemetery by German soldiers. All personal effects were taken by the Germans. Information from Nikolaus Nalbach, Nalbacherstr. 146.
11. Give name and address of person who can guide disintering team to burial location:
Nikolaus Nalbach, Diefflen, Germany, Nalbacherstr. 146.

12. Is this atrocity case: **No** Is there **No** may be: **No**
If answer is yes, has responsible **No** representative been notified.

13. Names and addresses of persons committing the atrocity or the military unit of which these persons were members:
Not applicable.

14. If unidentified and a crew member of a plane or vehicle, indicate names of any other known crew members and state whether buried at this location or a survivor
Not applicable.

15. If unidentified, supply any of the following information determinable:

a. Crew position in plane or vehicle:

b. Plane or vehicle serial number: Type:

c. Installed weapons:

Serial Number	Calibre & Mfgr.	Serial Number	Calibre & Mfgr.
---------------	-----------------	---------------	-----------------

Not applicable.

d. Engine serial number: Type:

William H. Zerhan
Signature of Investigating Officer
WILLIAM H. ZERHAN
2nd Lt. Inf. O-1336585
606 QM. Graves Registration Co
Rank ASN
G.O. 606 QM. G.R.Co.

Disinterment approved by, (HQ Authorizing Exhumation)

Disinterment and *reburial/burial made by:

Date of *burial/reburial:

Place of *burial/reburial U.S. Military Cemetery:

Plot Row Grave

NOTE: Additional particulars regarding investigation:
will be placed on additional sheet.

* Cross out word not applicable

REBURIAL

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

27 February 1945

Trans. Letter 862

UNK.X-4648 (St. Avold, France)

Last Name

First

Initial

Rank

Serial No.

UNK

UNK

UNK

DIEFFLEN, Germany WQ 2986

Place of Death

Dec. 1944

Organization

S.W. of back

1400-2 Mar/46

Time and Date of Burial

U.S. Mil. Cem. St. Avold, France

Date of Death

Cause of Death

Q 260 584

Grave Number

Row Number

Name of Cemetery

Name or Coordinates of Location

Cross

Disposition of Identification Tags: Buried with body Yes No

Plot Number

Attached to Marker Yes No

Type of Marker

If no Identification Tags

How were remains identified?

See reverse

REBURIAL

What means of identification were buried with the body?

Previously buried in isolated grave

GRS No.1 in bottle

DIEFFLEN, Germany

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

Map 1:250,000 Sheet K-50

Who is buried on:

Trier, Ger. Coord. WQ 2986

Deceased's Right:

Unk

X-4649

Name

Serial No.

Rank

Organization

Grave No. 74

Deceased's Left:

Start of row

Name

Serial No.

Rank

Organization

Grave No.

Signature or Name, Rank and 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 Adresse Unknown

Name

Unknown

Address

Religion Unknown



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

None

Disinterring Officer

William H. Zerhan

Signature of Officer or other person reporting burial

WILLIAM H. ZERHAN
2nd Lt. Inf.
606 QM, G.R. C.

Reinterring Officer

Charles F. Barney

Verified by G.R.S. Officer

CHARLES F. BARNEY, 2nd Lt, Inf, 6800 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: UNK Laundry Marks: None
 Weight: UNK Number of Rifle: UNK
 Color of Eyes: UNK Wear Glasses? UNK
 Color of Hair: brown Is Tooth Chart Attached? Yes
 Race: UNK

(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.)

Impossible to determine body badly decomposed.

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

Inscription on grave marker
 "Palph D. Gundersohn E.M.
 36739195 T-43-44"

Left Hand
 Impossible to take missing

Thumb
 Impossible to take missing

Right Hand
 Impossible to take missing

Right Hand

Thumb

TOOTH CHART

	Deceased's Right								Deceased's Left							
	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 linking anchor teeth; replacements by artificial teeth X

Characteristics:

Other Date:

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.

Remarks:

1. See attached sketch.

