

7887 GRAVES DETACHMENT

APO 757

943 unk St. Avold X-6002 *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 - 6002 St Avold

(POC) ST AVOLD

ms
St Avold
26 Oct 51
Jd BW

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

Unknown X _____
 Cemetery K-2002 _____
 Plot Row 3, 49019 _____
 00 3 25

1. Arrived at cemetery 1800/3 April 1946.
2. Place of death Catharin Colmar (Name and location) (Coordinates and letter Prefix, map) (Y-740520)
 Sheet, scale and edition used: Europe WD QMC Sheet 87 1:200,000
3. Remains recovered or disinterred by Francis D. Cissy 2049 OR Co (Name and organization)
4. Evacuated to Cemetery by U.F.P. 535 OR Co (Name and organization)

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

Item	Clothing Markings	Sizes	Color	Indicate unusual markings wear, tear, repairs, etc.
Headgear (Type)	None	UTD	UTD	UTD
Raincoat	None	UTD	UTD	UTD
Overcoat	"	"	"	"
Jacket, Field	"	"	"	"
Jacket, Combat	"	"	"	"
Mackinaw	"	"	"	"
Sweater	"	"	"	"
Jacket, HBT	"	"	"	"
Shirt, Wool, OD	"	"	"	"
Undershirt, Wool	"	"	"	"
Undershirt, Cotton	"	"	"	"
Trousers, HBT	"	"	"	"
Trousers, Wool OD	"	"	"	"

St. Avold *18-60007*

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 be computed by measuring the remains.

6. Chevrons or Insignia _____
(Type & location; shirt, jacket, coat, helmet)

Shoulder Patch _____

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

8. Description of Remains:
Age _____ Height _____ Weight _____ Description of wounds _____

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

Tattoos _____
(Number, location-illustrate on sep. page)

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

Sunburn or tan, other than hands & face _____

Complexion _____
(Light, med. dark, clear, pimples, poeks, freckels)

Build _____
(Large, fat, thin, muscular)

Hair _____
(color, lenght, quantity, curly, wavy, straight, whorls, or definite parting).

Hair UTD
 (baldness, widows peak, distinctive cutting or other characteristics)

Sidburns UTD Mustache UTD Beard or Goatee UTD
 (color, setting, shape) (color, size, (length, heavy,
UTD shape) Ears UTD
 light, color, extent) (size, shape, straight) (size, set close to
 or far from head)

Eyes UTD Eyebrows UTD
 (color, setting, shape) (color, bushiness, extent across nose)

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

Teeth UTD
 (white, size, unevenness, spacing, noticeable crowns, fillings, extrac

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

Jaw UTD Circumference of head in inches UTD
 (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
UTD
 (extent and quantity of hair)

Hands UTD

Fingers UTD
 (short, thick, long, slender, size of knuckles, missing fingers or
UTD
 joints). (unusual characteristics of fingernails)

Chest UTD
 (size of nipples, color, quantity & extent of hair, large, small, norm

Back UTD Waist UTD
 (quantity & extent of hair) (size of navel, appendectomy, amount
UTD Circumcision Pubic hair UTD
 quantity & color of hair yes-no (color)

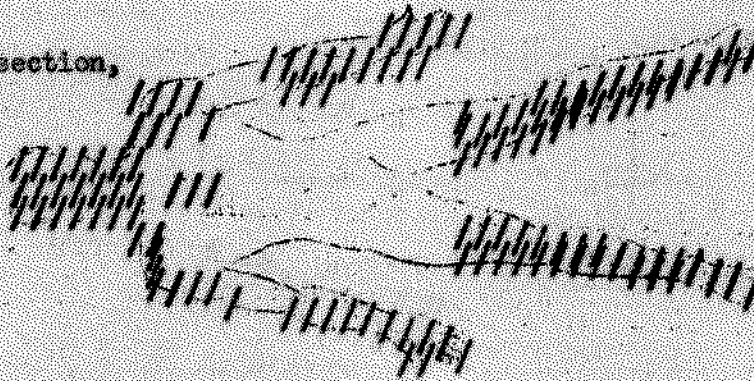
Hernioplasty UTD
 (Yes - no; location)

Legs UTD
 (inseam, muscular, knock-kneed, bowed, normal, quantity, color & extent
 of hair).

Feet _____ Toes _____
(size, corns, callouses, flat) (slender, straight, crooked, overlap)
Evidence of healed fractures 1 UTD
(nose, arms, legs, etc..)

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

See remarks section, below.



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

If not, explain Too Badly Decomposed

11. Has tooth chart been prepared No If not, explain No Head.
Yes - no

12. Remarks XXXXXXXXXX Tooth Chart unavailable; no head.

Amount of remains recovered: (1) 2/3 of rt. & left femurs, proximal ends;
(2) rt. & left pelvis, left pelvis fractured; (3) Sacrum; (4) 2/3 of vertebrae, cervical missing; (5) remnants of ribs; (6) segments, fractured, of humerus. Approximate wght. remains: 15 pounds. Badly decomposed.

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

William D. Lawson III
WILLIAM D. LAWSON III
Officer name

2nd Lt. Inf
Rank Service

535th Co. (U.P.P.)
Organization

IDENTIFICATION CHECK LIST

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

~~Processed by: R. J. Miller
C. O. Rice~~

~~Clerk: Richardson~~

E.O. # 707

Unknown X 6002
Cemetery St. Auld, France
Plot 00 Row 3 Grave 25

1. Date reprocessed 12 April '48
~~_____~~ (Hour) (Date)

2. Place of death _____
(Name of closest town) (Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3. Remains reprocessed by Mobile 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			
Undershirt, Cotton			
Trousers, HBT			
* Trousers, Wool OD			

NONE

X

Belt, web _____
Drawers, wool _____
Drawers, cotton _____
Leggings, wool _____

~~NONE~~

Socks, cotton _____

~~Boot~~ *One right* (type) *Service, combat, size 11-B*

Overshoes _____

Web Equipment _____ (type)

(Other item) _____

(Other item) _____

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

Chevrons or Insignia _____
(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: *All major bones fractured and/or missing*

Age *UTD* Height *UTD* Weight *UTD* Description of wounds *UTD*

Bandages or dressings _____ Name _____ 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, pecks, 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 _____ (Color, setting, shape) Eyebrows _____ (Color, bushiness, extent across nose)

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

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

Teeth _____ *No teeth found* (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

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

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

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

Hands _____ *MISSING*

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

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

Hernioplasty _____ (Yes-no; location)

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

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

Evidence of healed fractures _____ *None* (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 Fingers missing

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

9. Remarks: Remains received in skeletal form with small amount ^{unmarked} of flesh in last stage of decomposition, boot found in debris, no teeth, No skull; No Report of Burial or GPS tags, est. wt. of reprocessed remains: 7 lbs, unable to estimate ^{weight} because all major bones are fractured and/or missing; No evidence found of old, healed fractures or amputations.

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.

~~Boot, was the only clothing found~~

ROBERT J. MILLER
(Officer's Name)

SP 6 AGRC
Rank Service

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



Albert A. Richardson

13 Apr. '48

SKELETAL CHART

X-6002
USMC, St. Avoild

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

Plot 00
Row 3
Grave 25

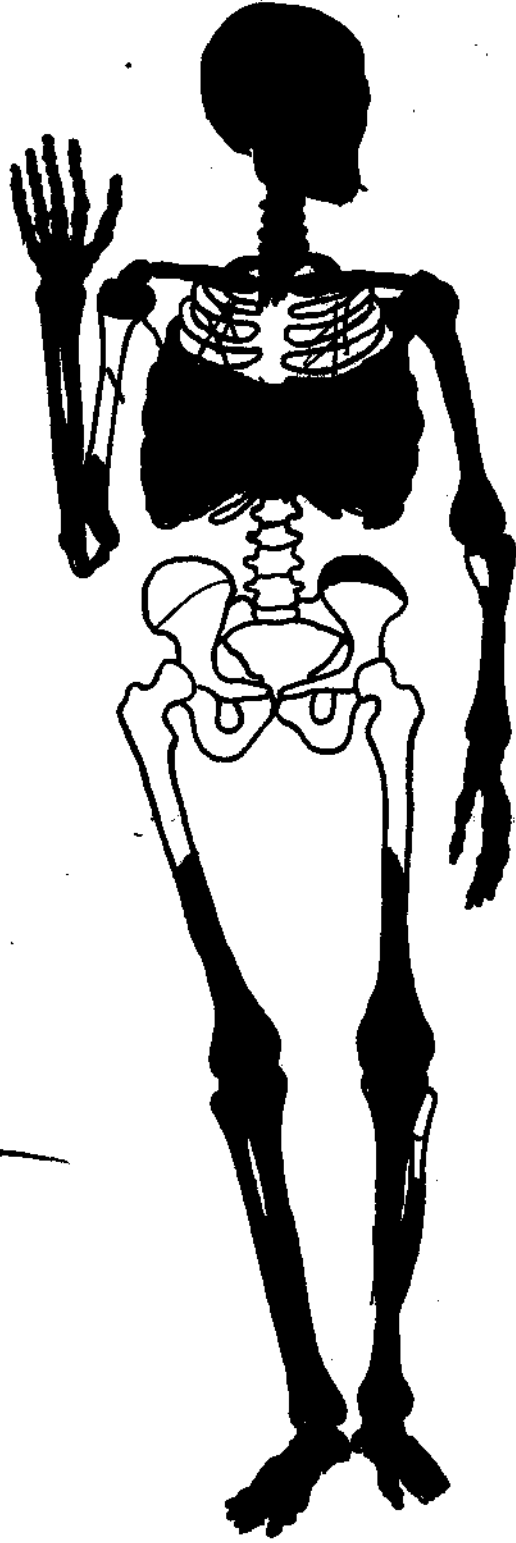


CHART "A"

Est. Ht. UTD

C.O.R.

1 ✓ USMC, ST. AVOLD, FRANCE Buried at deceased ~~WROBLEWSKI~~ ~~36626164~~ PFC
 Plot F, Row 7, Grave 12 **DISINTERMENT DIRECTIVE** Night: SPJALEK BERT D
 Date reburied: 22 Jan 49 36712189 T SG

SECTION A - NAME AND BURIAL LOCATION OF DECEASED: DEWEY R. BELL 1st Lt. CAV
 DIRECTIVE NUMBER: 3574 00000
 DATE: 15 01 48
 DAY MONTH YEAR

NAME: UNKNOWN SERIAL NUMBER: X-006002 RANK: R ARM: 8
 DATE OF DEATH: DAY MONTH YEAR

CEMETERY: ~~293-2nd France X-6002 (St Avold)~~ ST AVOLD - METZ
 DISPOSITION OF REMAINS: 3503 80
 CODE DIST. PT.

PLOT: 00 ROW: 3 GRAVE: 25 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 SERIAL NUMBER RANK DATE OF DEATH DATE DISTINTERRED
 IDENTIFICATION TAG ON: REMAINS MARKER
 ORGANIZATION: UNKNOWN RELIGION IDENTIFICATION VERIFIED BY: NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT
 NATURE OF BURIAL CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION: SEE ATCHD WORK SHIT

MINOR DISCREPANCIES 1

REMAINS PREPARED AND PLACED IN CASKET



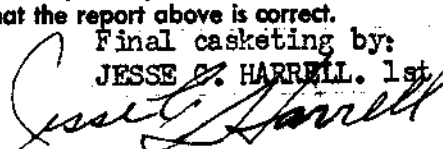
DATE BY: RICHARD F. PETERSON, EMBALMER
 EMBALMER (Signature): Richard F. Peterson

CASKET BOXED AND MARKED: All markings, tags & labels verified by Richard F. Peterson, 1st Lt Inf

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.
 Signature: [Signature]
 RICHARD F. PETERSON, 1st Lt Inf 7857 AGRC Zone 3 Ft.
 SIGNATURE OF GCS INSPECTOR

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.
 18 MAY 1949
 BRANCH
 MEM. DIV.

DISINTERMENT DIRECTIVE

1	DISINTERMENT DIRECTIVE									
SECTION A — NAME AND BURIAL LOCATION OF DECEASED					DIRECTIVE NUMBER			DATE		
NAME					SERIAL NUMBER			RANK	ARM	DATE OF DEATH
UNKNOWN					X-006002				S	
CEMETERY										DISPOSITION OF REMAINS
										CODE DIST. PT.
										CAUSE OF DEATH
LOT	ROW	GRAVE	COUNTRY							
00	3	25	ST AVOLD	FRANCE						
SECTION B — CONSIGNEE AND NEXT OF KIN										
NAME AND ADDRESS OF CONSIGNEE					NAME AND ADDRESS OF NEXT OF KIN					
SECTION C — DISINTERMENT AND IDENTIFICATION										
NAME			SERIAL NUMBER		RANK	DATE OF DEATH		DATE DISINTERRED		
UNKNOWN X-006002								6 July 48		
IDENTIFICATION TAG ON		ORGANIZATION			RELIGION		IDENTIFICATION VERIFIED BY			
<input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKERGRS					Unk		Melvin W. Blackburn Embalmer NAME AND TITLE			
SECTION D — PREPARATION OF REMAINS FOR SHIPMENT										
NATURE OF BURIAL					CONDITION OF REMAINS					
Uniform & Mattress/cover					Body consists of fragments of L/Scapula, spine, ribs, R/Humerus, L/Ulna, Pelvic, sacrum, Rt/Lt Femur, & R/Fibula.					
OTHER MEANS OF IDENTIFICATION					Body disarticulated. Final stage of decom- position.					
NONE										
MINOR DISCREPANCIES /										
No Report of Burial with remains										
REMAINS PREPARED AND PLACED IN CASKET										
DATE			BY			Melvin W. Blackburn, Embalmer				
12 July 48										
CASKET SEALED BY					EMBALMER (Signature)					
Melvin W. Blackburn, Embalmer					 Melvin W. Blackburn					
CASKET BOXED AND MARKED					Embalmer all markings, tags & plates verified by  JESSE C. HARRELL, 1st Lt. CAC					
DATE					BY					
12 July 48					Melvin W. Blackburn					
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 JESSE C. HARRELL, 1st Lt. CAC. 7857 AGRC Zone 3 Hq SIGNATURE OF GRS INSPECTOR										
Prepare Discrepancy Report OMC Form 1194a for major discrepancies.										

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

23 February 1949

Date

29
1
3unk France X-6002 (St Anval)

SUBJECT: Unidentifiable Remains

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

1. The records pertaining to Unknown X- 6002, Plot 00,
Row 3, Grave 25, USMC St. Anval, 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. , dated . No
further information is available.

FOR THE COMMANDING GENERAL:

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

23 FEB 1949

00MG

Unidentifiable from
information presently
available

File NAT
Nelson
Shaw

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 - 6002, Plot 00
Row 3, Grave 25, 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. No record this HQ, dated _____.

No further information is available.

FOR THE COMMANDING GENERAL:

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

24 FEB 1949

Received _____ OQMG
Not identifiable from
information presently
available

M B Hallow

INC1#48

NR

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

RRE 200.2

Date _____

SUBJECT: Reprocessing of Remains


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

The remains of X6002
interred in Plot 00, Row 3, Grave 25, USMC St-Avoid
France, have been reprocessed and the information
not previously forwarded to your Headquarters is herewith submitted.

Boot : One right (type) Service, combat, size 11-B

FOR THE COMMANDING GENERAL :

1 Incl : Skeletal Chart


BERNARD E. CARROLL
WOJG AUS
Actg Asst Adj Gen.

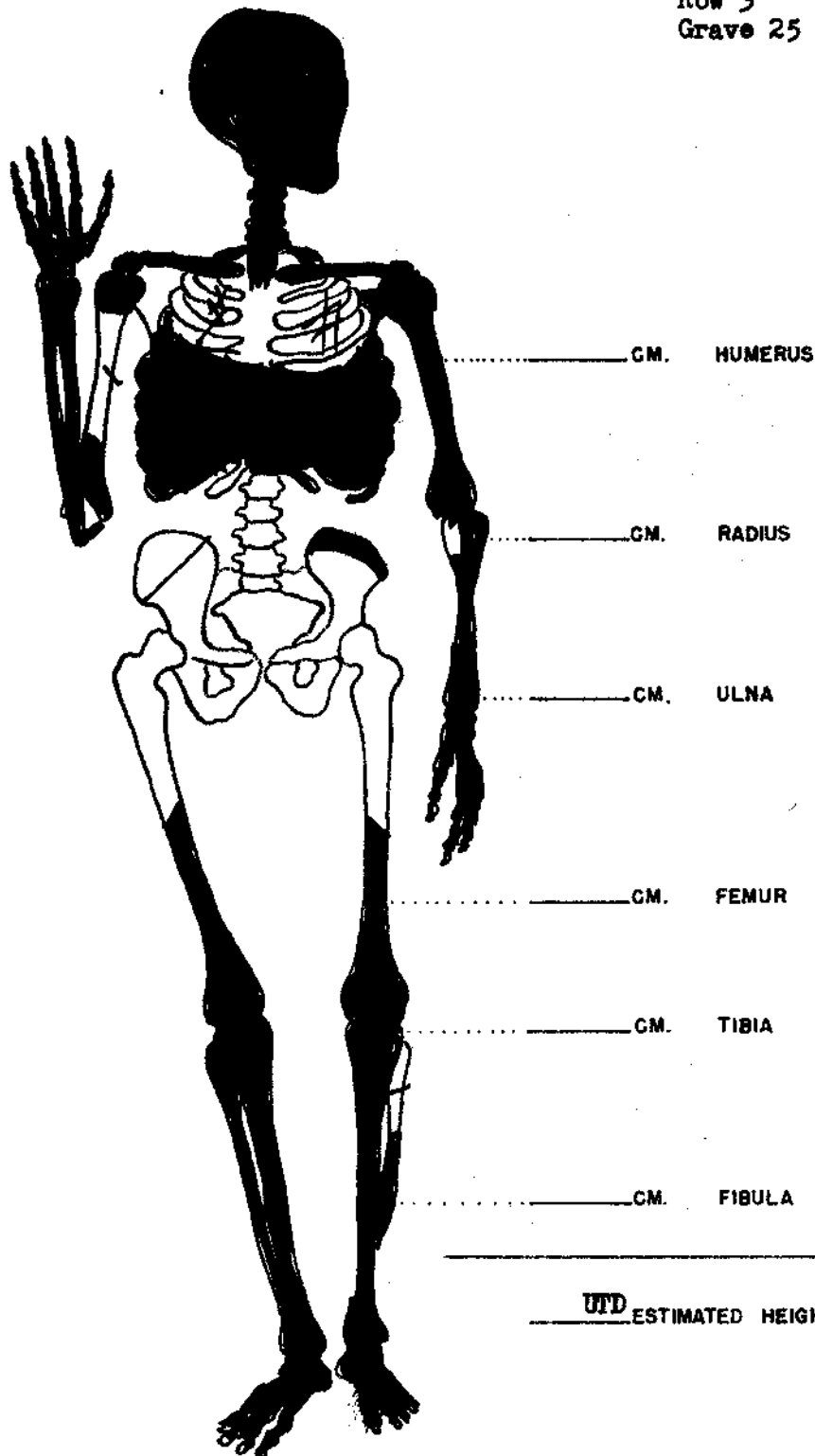
13 Apr. 48

X-6002
USMC St-Avoid

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED)

Plot 00
Row 3
Grave 25



PROCESSED BY: _____

ISOLATED GRAVE. OSTHEIM, COLMAR. FRANCE.
EU.RD. MAP. SHT. 87. 1:200,000. V-740520.

UNKNOWN X-6002.
REINTERRED U.S. MIL. CEM.
ST. AVOLD. 00 - 3 - 25.

OSTHEIM

700 Yds
D3

EUR.RD.MP 87.
1:200,000 V-740,520

600 YD.

ISOLATED GRAVE
OF
UNK. SOLDIER
USA

300 YD.
T

Revised 5 January 1946

CHECK LIST OF UNKNOWN

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

Unknown X X-8002.
Cemetery ST. AVOLD.
Plot 00 Row 3 Grave 25.

1. Arrived at cemetery 1500 3 April 1946.
(Hour) (date)
2. Place of death Ostheim, Colmar (V-740520)
(Name of closest town) (Coordinates and letter
Prefix, maps)
Europe Rd Map Sheet 87 1:200,000
Sheet, scale and serials used.
3. Remains recovered or disinterred by Francis D. Cirsky 3049 GR Co
(name and organization)
4. Evacuated to Cemetery by U.P.P. 535 QM Gp.
(name and organization)

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

Item	Clothing Markings	Sizes	Color	Indicate unusual markings wear, tear, repairs, etc.
Headgear (Type)	None	UTD	UTD	UTD
Raincoat	None	UTD	UTD	UTD
Overcoat	"	"	"	"
Jacket, Field	"	"	"	"
Jacket, Combat	"	"	"	"
Mackinaw	"	"	"	"
Sweater	"	"	"	"
Jacket, HBT	"	"	"	"
Shirt, Wool, OD	"	"	"	"
Undershirt, Wool	"	"	"	"
Undershirt, Cotton	"	"	"	"
Trousers, HBT	"	"	"	"
Trousers, Wool OD	"	"	"	"

Belt, Web	NONE	UTD	UTD	UTD
Drawers, Wool	"	"	"	"
Drawers, Cotton	"	"	"	"
Leggings, Wool	"	(Note unusual lacing)		"
Socks, Cotton	"	"	"	"
*Shoes (Type)	1 Right, Combat Size 11-B			
Overshoes	NONE	UTD	UTD	UTD
Web Equipment (Type)	"	"	"	"
(Other item)	"			
(Other item)	"			

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

6. Chevrons or Insignia None
 (Type & location; shirt, jacket, coat, helmet)
 Shoulder Patch None
7. Does clothing indicate that deceased was a member of the Air, Ground or Naval Forces. None
8. Description of Remains:
 Age UTD Height UTD Weight UTD Description of wounds UTD
 Bandages or dressings None Scars UTD
 (Length, width, location)
 Tattoos UTD
 (Number, location-illustrate on sep. page)
 Outstanding moles, warts or birthmarks UTD
 (Yes-no; description, location)
 Sunburn or tan, other than hands & face UTD
 Complexion UTD
 (Light, med. dark, clear, pimples, pocks, freckels)
 Build UTD
 (Large, fat, thin, muscular)
 Hair UTD
 (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 Goatee UTD
 (color, setting, shape) (color, size, shape) (length, heavy,
 light, color, extent) (size, shape, straight) (size, set close to
 or far from head)

Eyes UTD Eyebrows UTD
 (color, setting, shape) (color, bushiness, extent across nose)

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

Teeth UTD
 (white, size, unevenness, spacing, noticeable crowns, fillings, extrac)

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

Jaw UTD Circumference of head in inches UTD
 (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
UTD
 (extent and quantity of hair)

Hands UTD

Fingers UTD
 (short, thick, long, slender, size of knuckles, missing fingers or
UTD
 joints). (unusual characteristics of fingernails)

Chest UTD
 (size of nipples, color, quantity & extent of hair, large, small, norm)

Back UTD Waist UTD
 (quantity & extent of hair) (size of navel, appendectomy, amount
UTD Circumcision UTD Pubic hair UTD
 quantity & color of hair yes-no (color)

Hernioplasty UTD
 (Yes - no; location)

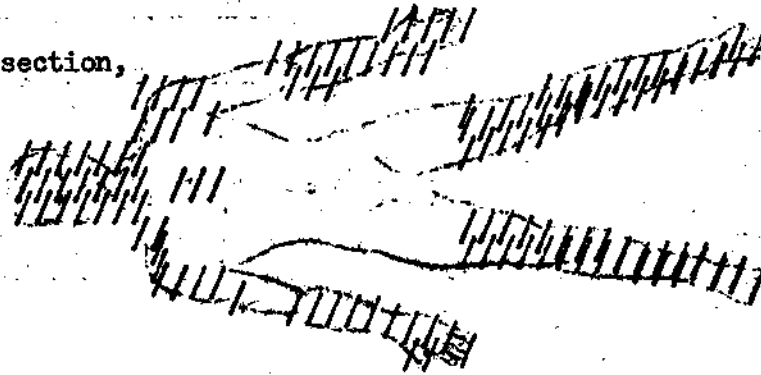
Legs UTD
 (inseam, muscular, knock-kneed, bowed, normal, quantity, color & extent
 of hair),

Feet UTD Toes UTD
(size, corns, callouses, flat) (slender, straight, crooked, overlap)

Evidence of healed fractures: T UTD
(nose, arms, legs, etc..)

9. Black outparts of body not received at cemetery.

See remarks section, below.



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

If not, explain Too Badly Decomposed

11. Has tooth chart been prepared No If not, explain No Head,
Yes - no

12. Remarks ~~XXXXXXXXXX~~ Tooth Chart unavailable: no head.

Amount of remains recovered: (1) 2/3 of rt. & lft. femurs, proximal ends;
(2) rt. & lft. pelvis, left pelvis fractured; (3) Sacrum; (4) 2/3 of vertebrae, cervical missing; (5) remnants of ribs; (6) segments, fractured, of humerus. Approximate wght. remains: 15 pounds. Badly decomposed.

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

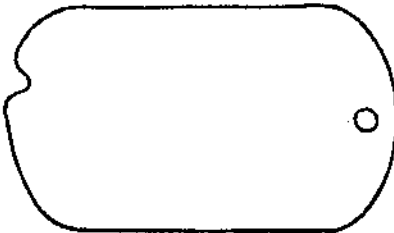
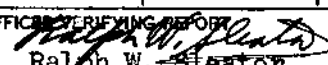
William D. Lawson III
WILLIAM D. LAWSON III
Officer name

2nd Lt., Inf
Rank Service

535 QM Gp. (U.P.P.)
Organization

RESTRICTED

Trans letter 1882

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)				DATE OF REPORT 4 April 1946		
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.						
		NAME (Last, first, middle initial) Unknown X-6002				SERIAL No. Unknown		
		GRADE Unknown		ORGANIZATION Unknown		BRANCH OF SERVICE Unknown		
		RACE Unknown		RELIGION Unknown		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY		
PLACE OF DEATH Ostheim, Colmar(Ht.-Rhin) France		CAUSE OF DEATH Unknown			DATE OF DEATH Est: Jan. 1945			
EMERGENCY ADDRESSEE (Name, relationship, and address) Unknown								
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)						
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes								
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME None								
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.								
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY U. S. Military Cemetery (Q-260584) St. Avold, France								
DATE OF BURIAL 4 April 1946	HOUR 1400	BURIED IN (Shroud, blanket, or name of other) Casket		TYPE OF GRAVE MARKER Temp. Wdn. Cross	PLOT No. 00	ROW No. 3	GRAVE No. 25	
WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE Isolated Grave, Ostheim, Colmar, France Eur. Rd. Mp., Sht. 87, 1:200,000 (V-740520)					PLOT No. Isolated	ROW No. grave	GRAVE No.
TYPE OF RELIGIOUS CEREMONY General Service	PERSON CONDUCTING BURIAL RITES Ch. Z. S. Kish, Capt.		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY One copy of WD QMC Form 1042 placed in burial bottle and buried with remains.					
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) No		IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes, embossed plate						
BODY BURIED ON DECEASED LEFT. NAME (Last, first, middle initial) Beginning of Row			RANK	SERIAL NO.	ORGANIZATION	GRAVE No.		
BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial) Gnecco, Robert J.			Unk	20109950	3rd Inf.Div.	26		
SIGNATURE OF PERSON PREPARING REPORT William D. Lawson III, 2nd Lt. - Inf. 535 Quartermaster Group			SIGNATURE OF GRS OFFICER VERIFYING REPORT  Ralph W. Sreater Major Inf.					
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.								

RESTRICTED

RESTRICTED

Section UNIDENTIFIED REMAINS.

INSTRUCTIONS:


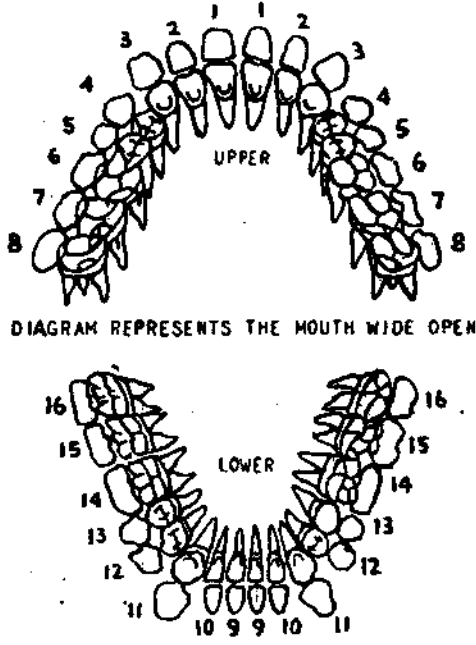




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks.

(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.

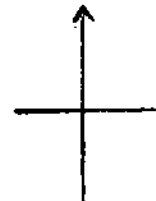
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
UTD	UTD	UTD	UTD	UTD

WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
None	None	Isolated Grave, Ostheim, Colmar, France

OTHER IDENTIFICATION CLUES

FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
CAVITIES	 <p>CAVITY DECAYED</p>	
MISSING TEETH	 <p>TOOTH MISSING</p>	
CROWNED TEETH	 <p>PORCELAIN CROWN GOLD CROWN</p>	
BRIDGE WORK	 <p>GOLD BRIDGE</p>	

FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY



REMARKS: Attached Form II, "Check List for Unknowns".
 Tooth Chart unavailable: no head.
 Amount of remains recovered: (1) 2/3 of rt. & lft. femurs, proximal ends; (2) rt. & lft. pelvis, left pelvis fractured; (3) Sacrum; (4) 2/3 of vertebrae, cervical missing; (5) remnants of ribs; (6) segments, fractured, of humerus.
 Approximate weight of remains: 15 pounds.
 Advance stage of decomposition.