

1

USMC NEUVILLE EN CONDRO
PLOT B, ROW 10, GRAVE 4
DATE OF BURIAL 7 Feb 1951
VERIFIED BY GRS OFFICER

DISINTERMENT DIRECTIVE

243 unk St. Avold X-6207

M. R. SWART, CAPT OMC
SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
3574 00000

DATE
15 12 47
DAY MONTH YEAR

NAME		SERIAL NUMBER		RANK	ARM	DATE OF DEATH	
UNKNOWN		X-006207			0	DAY	MONTH YEAR
CEMETERY						DISPOSITION OF REMAINS	
ST AVOLD - METZ						1202	80
PLOT						CODE	DIST. PT.
4B	ROW	GRAVE	COUNTRY	CAUSE OF DEATH			
	7	82	FRANCE	6			

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE ST AVOLD, FRANCE NEUVILLE, BELGIUM (BY ADMINISTRATIVE ORDER)	NAME AND ADDRESS OF NEXT OF KIN These remains are unidentifiable and are to be permanently interred (OPNS DIV 25 Jan 51)
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SECTION C - DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISTINTERRED
UNKNOWN X-006207		Unk		22 June 48
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION USAGF	RELIGION Unk	IDENTIFICATION VERIFIED BY Richard F Peterson Embalmer NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Uniform	CONDITION OF REMAINS Completely disarticulated Small amount of decomposed flesh - Fractured L/Ulna-Missing R/Tibia & Fibula
OTHER MEANS OF IDENTIFICATION Report of Burial found with remains	

MINOR DISCREPANCIES

None

NAT
FILE
RECORDS ANNOTATED
DATE 27 Feb 51
NAME Eugene Hunter
Report to BR. MEM. DIV.

REMAINS PREPARED AND PLACED IN CASKET

DATE 24 June 48 BY Richard F Peterson Embalmer

CASKET SEALED BY Richard F Peterson Embalmer
EMBALMER-(Signature) Richard F Peterson

CASKET BOXED AND MARKED

DATE 24 June 48 BY Richard F Peterson
SHIPPING ADDRESS VERIFIED BY All markings, plates & tags verified by:
BRUCE E PL. IR, 1st Lt MC

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

BRUCE E PL. IR, 1st Lt MC, 337 M Bn.

SIGNATURE OF GRS INSPECTOR

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

Consignee & code changed by Hq AGRC (OPNS DIV.)

Just # 6

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC St Avoird France		TO OIC Neuville Belgium	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER Cpl Vincent P Matozzo, RA-32707218	
SIGNATURE OF SHIPPER <i>Frank B Callaghan</i> Frank B Callaghan, 1st Lt FA	DATE 25 Oct 48	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 ADMINISTRATIVE ORDER)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER 2d AVOIRD FRANCE	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

7887 GRAVES DETACHMENT

APC 757

943 unk St. Avold X-6207 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 - 6207 St Avold

CHECK LIST OF UNKNOWNNS

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

Unknown X - 6207
Cemetery St. Avoild, France
Plot BBBP Row 7 Grave 82

- 1. Arrived at cemetery _____
(hour) (date)
 - 2. Place of death _____
(name of closest town) (coordinates and letter Prefex, maps)
- (Sheet, scale and serials used)

- 3. Remains recovered or disinterred by _____
(name and organization)
- 4. Evacuated to Cemetery by Central Identification Point.
(name and organization)

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

	Clothing		Indicate unusual markings
	Markings	Sizes	Color wear, tear, repairs, etc.

- Item _____
- *Headgear None
(type)
 - Raincoat None
 - Overcoat None
 - Jacket, Field remnants of, 1943
 - Jacket, Combat None
 - Mackinaw None
 - Sweater remnants of one wool OD
 - Jacket, HBT None
 - *Shirt, Wool OD remnants of
 - Undershirt, Wool remnants of;
 - Undershirt, Cotton remnants of
 - Trousers HBT remnants of one pair of combat fatigues.
 - *Trousers, Wool OD remnants of,

*MAN
file
27 Feb 51
D. McHenry
Ident. Section*

Belt, Web None

Drawers, Wool None

Drawers, Cotton None

Leggins, Wool None (Note unusual lacing)

Socks, ~~Cotton~~ wool remnants of,

*Shoes None (type)

Overshoes None

Web Equipment None (type)

(Other item) None

(Other item) None

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

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

Ground forces.

8. Description of Remains :

Age Utd Height 5'9" Weight 190 Description of wounds Utd

Bandages or dressings Utd 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, poeks, freckles)

Build Utd
(large, fat, thin, muscular)

Hair brown 2" long.
(color, length, quantity, curly, wavy, straight, whorls, or definite parting).

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

Sideburns Utd (color, setting, shape) Mustache Utd (color, size, shape) Beard or Utd (length, heavy)

Goatee Utd
(light, color, extent)

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

Nose Utd (size, shape, straight) Ears Utd (size, set close to or fur from head)

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

Teeth see tooth chart.
(white, size, unevenness, spacing, noticeable crowns, fillings, extract).

Chin Utd
(prominent, receding, pointed, dimple, double)

Jaw Utd (large, small, normal) Circumference of head in inches 21 $\frac{1}{4}$ '' (hat band)

Neck Utd (size, length, short, normal, wrinkled) Larynx Utd (prominent, normal)

Shoulders Utd (broad, straight, small, rounded) Arms Utd (length, muscular, color)

(extent and quantity of hair)

Hands Utd

Fingers Utd
(short, thick, long, slender, size of knuckles, missing fingers or joints)

(Unusual characteristics of fingernails)

Chest Utd
(size of nipples, color, quantity & extent of hair, large, small normal)

Back Utd (quantity & extent of hair) Navel Utd (size of navel, appendectomy, amount)

..... (quantity & color of hair) Circumcision Utd (yes-no) Pubic hair Utd (color)

Hernioplasty Utd
(yes-no; location)

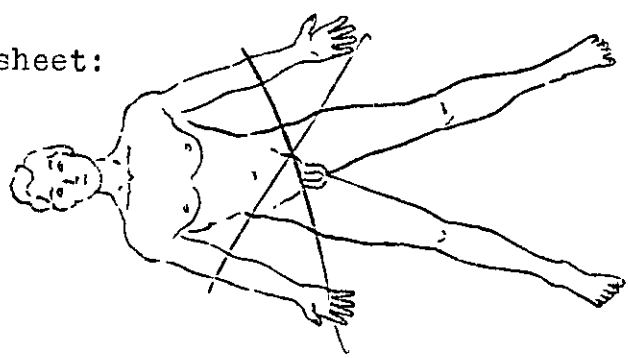
Legs Utd
(inseam, muscular, knock-kneed, bowed, normal, quantity, color & extent of hair)

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

Evidence of healed factures Utd
(nose, arms, legs, etc.)

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

see attached sheet:



10. Have fingerprints been placed on Report of Interment no
(yes-no)

If not, explain hands decomposed.

11. Has tooth chart been prepared yes If not, explain
(yes-no)

12. Remarks : Remains recovered in the final stage of decomposition.

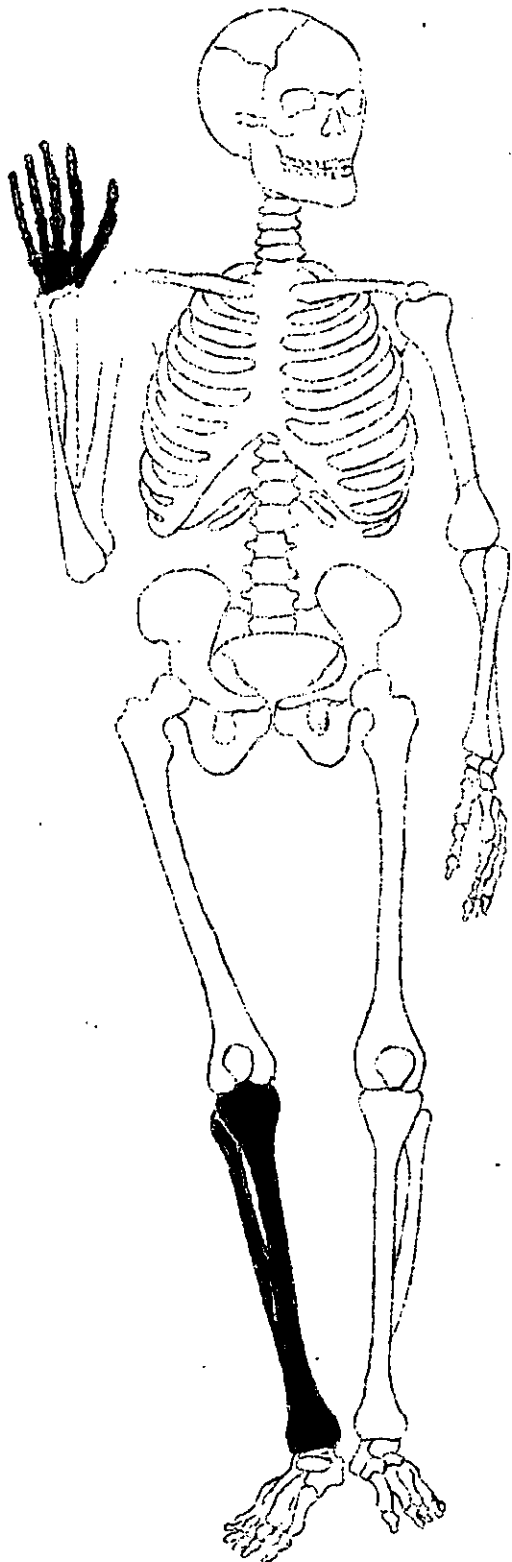
Est. weight of remains recovered 25 Lbs.

Fluoroscopic examination report: Skeleton hadly broken,
no flesh. ~~nothing more~~.

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.

R.C. JOHNSON
Officer's Name
2nd. Lt. Inf.
Rank Service
Lab. Off.

Central Identification point.
Organization



TOOTH CHART

6. Oct 1946

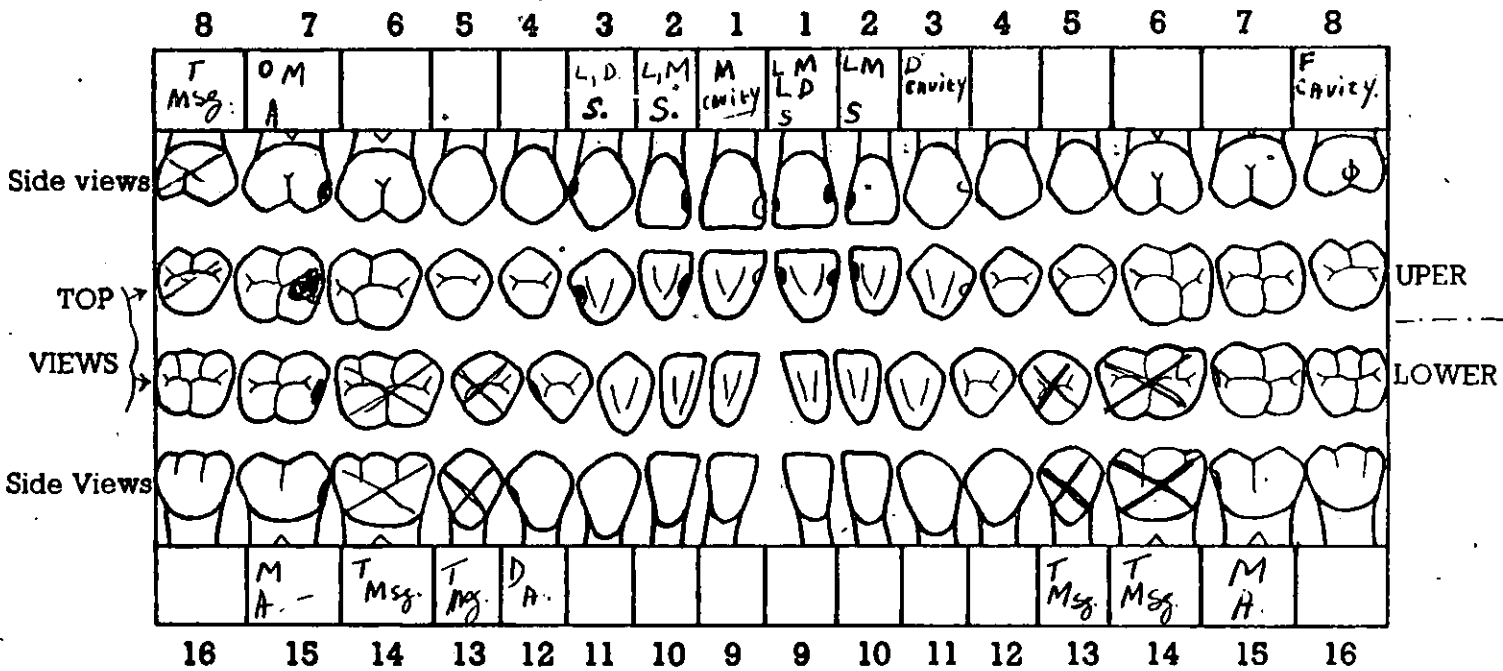
Date

Unknown X- 6207

Last Name	First	Initial	Rank	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), 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.

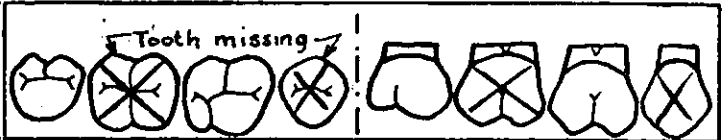
Signature of Officer or other person who prepared Tooth chart

E. J. M.

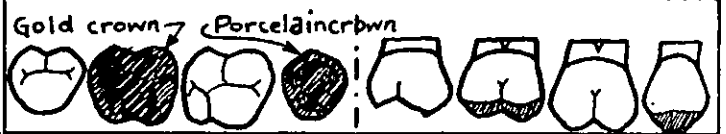
Verified by G. R. S. Officer

Ellsworth T. Mac Intyre
 Captain QMC. C.I.P.

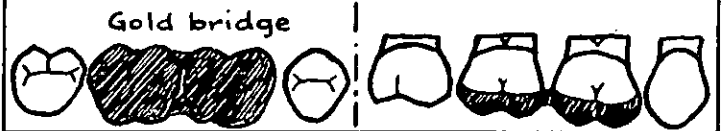
MISSING TEETH . . . All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus:



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



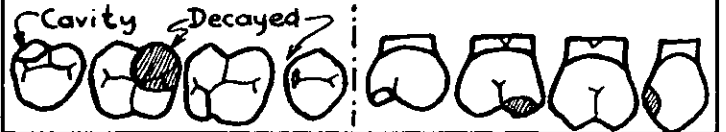
BRIDGE WORK . . . Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:



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

Small, square, white teeth.
 R8, 13, 14 and L13, 14 missing before death.
 Upper alignment good.
 L12 rotated facial nearly 1/8 turn
 R12 rotated distally nearly 1/4 turn.
 Spaces between R12, R11, 2,5 mm R11, R10, 3 mm; L10, L11 3mm.
 L11, L12 1,5 mm.
 Light brown lingual stains.
 Cavity in R1, probable silicate filling.
 Cavity in L8 decay.

Att: H26 D12.
100 200 200 200
c. l. 3. 3.

REINTERRED
U. S. MIL. CEM. ST-ANGLD
PLOT 600BROW 7 GRANT 22

REPORT OF INVESTIGATION AREA SEARCH

24 May 1946.
Date

NAME Unknown X-6207 RANK unknown ASN unknown
ORGANIZATION unknown
MEANS OF IDENTIFICATION None

(All statements above this line will be completed, upon final processing, by the clerical staff at the unit processing point)

SECTION A GENERAL (To be completed by investigators in all cases)

1. Was positive identity acquired for the deceased through the surface investigation?
If so, state the following information: no

a. NAME _____ RANK _____ ASN _____
b. ORGANIZATION _____

2. Was partial identification established? no If so, state the facts as to whom you believe the deceased to be:

a. NAME _____ RANK _____ ASN _____
b. ORGANIZATION _____

3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY R.O. PHILIPPS, John MUSSER
Charles CRITES, Robert COYLER, James J. TIBBALL, Manceau ROMEO, 1 unk.
(Use reverse side for listing of crew members from IACR)

a. Date of above burials: Est. Jan to March 1945 graves? no

Name and type of cemetery not in cemetery
(Military or Civilian)

Map coordinates of the cemetery

a. Town _____ Country _____

Give exact location in cemetery of the remains.

a. Section _____ Row _____ Grave _____

b. Is sketch attached? _____

If remains are not located in a cemetery, give exact location.

a. Town MOUTERHOUSE Coordinates Map of Europe 1 : 200,000 sheet 57 Q - 792428

b. Is sketch attached? yes

c. Is area mined? yes

How is the grave marked? wooden cross

If grave is marked with cross, give exact markings thereon

a. From what source was this information obtained?
(Identification tags, personal eff)

b. BY whom?

where are the cemetery records?

none

(Town Hall, cemetery, burgermeister's office)

a. What information was contained thereon?

b. Where was the information obtained?

c. BY whom?

12. What is the date of death?

Est Jan to, March 1945

a. Give basis

Date of fighting in area

13. What is the cause of death?

unk

a. Give basis

14. What is the date of burial?

Sept 15, 1945

a. Give basis

Mr. KIRCH'S statement

15. Where was the place of death?

MOUTERHOUSE (Moselle)

Coords Q - 792428

Give basis

remains found there

16. Where were the remains found?

Mouterhouse

Coords

Q - 792428

a. By whom?

Mr. Nicolas KIRCH

b. Is sketch attached?

yes

17. Was a casket used?

no

Who furnished the casket?

Type of casket

How marked?

18. Who made the burial?

French civilian

(Civilian, American Mil. or German Mil.)

a. What are the names and addresses?

b. Are certificates and statements attached? yes

SECTION B - AIR CORPS DECEASED (To be completed only if Deceased is believed to be a member of the AAF)

19. Were remains found in the plane wreckage?

a. Give location in plane from which the bodies were removed

(Tail gunner, pilot, radio, turret, etc., or front, side, of plane)

b. Near wreckage?

20. Scene of crash must be investigated. Give complete results of investigation (if removed, state when and by whom)

a. Type of plane

b. Markings and/or name on plane

c. Give numbers on motors, machine guns, instruments, radios or other equipment:

21. How did crash occur?

Anti-aircraft

Enemy planes? _____

Collision? _____

22. Did plane explode in the air? _____ On ground? _____
23. Did plane burn in the air? _____ On ground? _____
24. What was the direction of the flight? _____
25. What was the civilian opinion regarding destination of plane? _____
26. Had bombs released prior to the crash? _____
27. Does specific time and date of crash correspond with date of death of above named deceased? _____
28. Number of planes in formation prior to crash? _____
29. State precise time and date of plane crash _____
(Night? Day?)
30. Were parachutists seen? _____ How many? _____ Escaped? _____
Prisoners? _____

SECTION C - ARMORED CORPS DECEASED (To be completed only if deceased is believed to have been a member of the Armored Force)

31. Were remains found in wreckage of a tank? _____
- a. Give specific position in tank from which deceased was removed _____
(Radio man, driver, assistant driver or... front, side, or back)
- b. Near wreckage? _____
32. Location of destroyed tank must be investigated. Give complete results of investigation. (If removed, state when and by whom)
- a. Type of tank _____
- b. Markings and/or name of tank _____
- c. Numbers on motors, machine guns, ammunition, instruments, etc _____
33. What was the type of enemy action that resulted in the tank's disablement? _____
34. Did tank explode? _____ Burn? _____
35. Number of tanks in immediate vicinity at time of disablement _____
36. Does specific time and date of disablement with date of death of above named deceased? _____
37. Precise time and date of destruction of tank? _____
(Night? Day?)
38. Did any of the crew members escape? _____ Prisoners? _____

SECTION D - OTHER BRANCH (To be filled out if B or C are not applicable)

39. Did death occur from any other means? (i.e., truck, jeep, mines, drowning, or small arms fire) UNK

If so, give, complete and thorough results of the interrogation.

- a. Are all certificates and statements of people who possessed knowledge of the case attached? YES

40. state the specific clues and evidence that were obtained in securing the name and facts regarding the above listed deceased

see statement attached

SECTION E - GENERAL (To be completed by investigation in all cases)

41. were personal effects recovered by the investigating team? No

If not, state reason none available

a. were identification tags found at the time of death? unk

Where? _____ By whom? _____

Present disposition _____

If deceased is not identified, personal effects will not be forwarded to PE Depot, but will remain with this form until final identification is made, or investigation is abandoned.

b. were personal effects found at the time of death? unk

Where? _____ By whom? _____

Present disposition _____

c. was deceased identified by living members of the crew at the time of death? _____

unk

d. Did Cemetery register or cross indicate the immunization shot? no

42. was deceased given first aid? unk If so, where? _____

By whom? _____ Are statements from the medical people attached? _____

43. was deceased evacuated to a German civilian hospital? unk

Where? _____ Names of people concerned _____

44. Is it possible on surface investigation to obtain from civilian sources a physical description of the deceased? no

45. Is it possible on surface investigation to obtain from civilian sources the condition of the remains? no
(Burnt? Decapitated? etc)

46. Do facts surrounding death show any evidence that it might be an atrocity case? _____

no

a. If so, give basis for positive assumption _____

b. If so, has higher headquarters been notified? _____

47. was case previously investigated? no By whom? _____

When? _____

48. Give full names, addresses, and information obtained from each person interviewed

Mr. Nicola KIRCH of Goetzenbruck

49. Are all positive statements regarding identification and particulars surrounding death attached? yes
50. Has any information been given concerning isolated burials in the area outside the immediate vicinity? no
51. Was investigation preceded by advanced publicity? yes
(If special investigation, give case number) _____
52. Give Brief Narrative see below

(Use attached sheets, if necessary)

F. Froger
Signature of Interpreter

F. FROGER
Rank ASN

3049 GR. Co
Organization

W.A. Kohute
Signature of Investigator

T/5 W.A. COHUTE 33877018
Rank ASN

3049 Gr. Co
Organization

In Sept 15.1945 Mr.Nicolas KIRCH found the half-buried remains of two unknown American in the woods of Goetzenbruck. He buried the remains and placed crosses on the graves. No identification was found on the bodies.

UNKNOWN X-6207
REINTERRED U.S. MIL. CEM.
ST. AVOLD, BBBB-7-82

T R U E C O P Y

Monterhouse le 20 Mai 1946

Je soussigne, Nicolas KIRSCH declare avoir trouve 3 corps de soldats Americains au mois de Septembre 1945. Tués pendant la bataille du 6 Decembre 1944 au 15 Mars 1945 probablement par le feu d'Artilerie.

Avec deux camarades je les ai enterres vers le 15 Septembre 1945 au meme endroit ou je les ai trouves. Deux en territoire de Lemberg un en territoire de Goetzenbruck. Un des deux enterres sur la commune de Lemberg au nom de James TIBBALL a sa plaque d'identite pendue apres la croix de bois sur sa tombe.

Les deux autres sont inconnus.

Mai 20 1946

Signe : KIRSCH Nicolas

S T A T E M E N T

I the undersigned, KIRSCH Nicolas asserts to have found 3 bodies of American soldiers in September 1945.

Killed during the battle which lasted from December 1944 till March 1945 presumed killed by Artillery fire.

With two comrades I buried them about 15th Sept, 1945 on the same spot where I found them.

Two bodies are buried in the territory of Lemberg and one is buried in Goetzenbruck. One of the two who was buried in the territory of Lemberg whose name is James TIBBALL has his dog-tag hanging on the wooden cross on his grave. The two others are unknown.

May 20th 1946

Signed : Nicolas KIRSCH

CERTIFIED A TRUE COPY

Howard E. Metzbow
Howard E. METZBOWER
2nd . Lt. INF.

1, 2, 3

J. soussigné Nicolas Kirsch déclare
avoir trouvé 3 corps de soldats
américains en mois de Septembre
1945. Trois pendant la bataille
du 6 Décembre 1944 au 15 Mars 1945
Probablement tués par le feu
d'artillerie.
Avec deux camarades je les ai
enterrés vers le 15 Septembre 1945
en même endroit où je les ai trouvés
deux en territoire de Lamberg
un en territoire de Gollmsbrück.
Un des deux enterrés sur la commune
de Lamberg un nom de ^{nom} ~~nom~~ ^{nom} ~~nom~~ a
sa place une plaque d'identité perdue
après la mort de Kirsch sur sa tombe.
Les deux autres sont inconnus.

Mai 22. 1946
Kirsch Nicolas

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

*TRANS Ltr. #5115
 dtd. 7 Sept. 50
 Rec'd in Sub. Unit
 26 Sept. 50.
 accepted 6 Dec 50.*

GROP 293

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X-6207, Plot BBBB,
 Row 7, Grave 82, USMC, St. Avold, France

have been reviewed in accordance with par 159, SR 830-110-5, DA, dated 3 March 1949, and it is the opinion of the Board of Review, appointed by par 2, SO No. 108, this headquarters, dated 29 August 1950, that sufficient evidence is not available to establish the identity of the deceased concerned, and it is recommended these remains be classified as unidentifiable.

2. Report of Reprocessing of remains was forwarded to the Office of The Quartermaster General, by Transmittal Letter No. 1935, dated 19 June 1946.

3. Remarks:

See copy of Case History attached.

Received *in Ltr #5115* OQMG
 that identifiable from
 information presently
 available m. martin - Id Sec.
 6 Dec 50.

Lt Col Robert D. MILLER, O-41448 TC

James C. MacFarland
 Maj James C. MacFARLAND, O-1576321, MC

George Gunderman
 Maj George GUNDERMAN, Jr., O-1289071 OMC

Clyde W. Steinsiek
 Capt Clyde W. STEINSIEK, O-1040311 MC

CWO Henry F. MYERS, A-2104778 USA

*NAT
 2.00-50
 18 Dec 50
 M. Martin
 Id. Sec*

Incl #1



[Faint, illegible text and markings, possibly a document or form, with two punch holes at the bottom.]

C A S E H I S T O R Y

UNKNOWN X-6207

USMC ST AVOLD, FRANCE
Plot BBBB, Row 7, Grave 82

UNIDENTIFIABLE

Remains of X-6207 were previously recovered from an isolated grave near Mouterhouse, France. Report of Investigation Area Search Form indicates date of death was estimated January to March 1945.

Case papers for the subject Unknown indicates the following seven (7) deceased were disinterred from the immediate vicinity of X-6207:

CRITES, Charles A., S/Sgt, 35776042, 179 Inf Regt, KIA 14 Jan 45, reburied
St Avold 4B-8-89 (US)
MANSEAU, Romeo J., Pvt, 31219615, 242 Inf Regt, KIA 25 Feb 45, reburied
St Avold A-34-29 (POC)
MIKOLA, Elmer F., Pfc, 35243409, (Prev.X-6216), 398 Inf Regt, KIA, 9 Feb 45,
reburied St Avold 4B-5-60
MUSSER, John L., Pfc, 36504776, 314 Inf Regt, KIA 10 Jan 45, reburied
St Avold 4B-10-109 (US)
PHILLIPS, Raymond O., Jr, Pvt, 34913789, 141 Inf Regt, KIA 4 Jan 45,
reburied St Avold 4B-7-81 (US)
TIBBALL, James J., Pfc, 42057572, 142 Inf Regt, KIA 9 Jan 45, reburied
St Avold 4B-2-22 (US)
COLYER, Robert L., Pvt, 35814846, 398 Inf Regt, KIA 5 Feb 45, reburied
Neuille (Prev.X-4501) T-10-238 (US)

In view of the fact that a tooth chart was submitted with X-6207, an attempt was made to associate the subject Unknown by comparison with available dental records of unaccounted for decedents in vicinity of Mouterhouse.

The only similarity noted was with the dental information of Pfc Arthur O. GOPPERT, 31468492, 143 Inf Regt, KIA 14 January 1945.

However, as no additional dental data is forthcoming from OQMG to substantiate the above association, this case is being classified as UNIDENTIFIABLE.

A. M. Swetnick

A. M. SWETNICK
5 September 1950

IDENTIFICATION DATA

E.O. 2479

1. REMAINS OF UNKNOWN X-6207				2. DATE OF REPORT 22 Sept 49	
3. NAME OF CEMETERY St A vold		4. PLOT 4 B	5. ROW 7	6. GRAVE 32	7. DATE OF DISINTERMENT REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT OF re- proc. remains 20lbs	9. ESTIMATED HEIGHT 5' 10"	10. COLOR OF HAIR med brown	11. RACE
--	--------------------------------------	---------------------------------------	----------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

**Two embossed plates marked :
unknowns X-6207**

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 type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT? -----
--	--------------------------

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

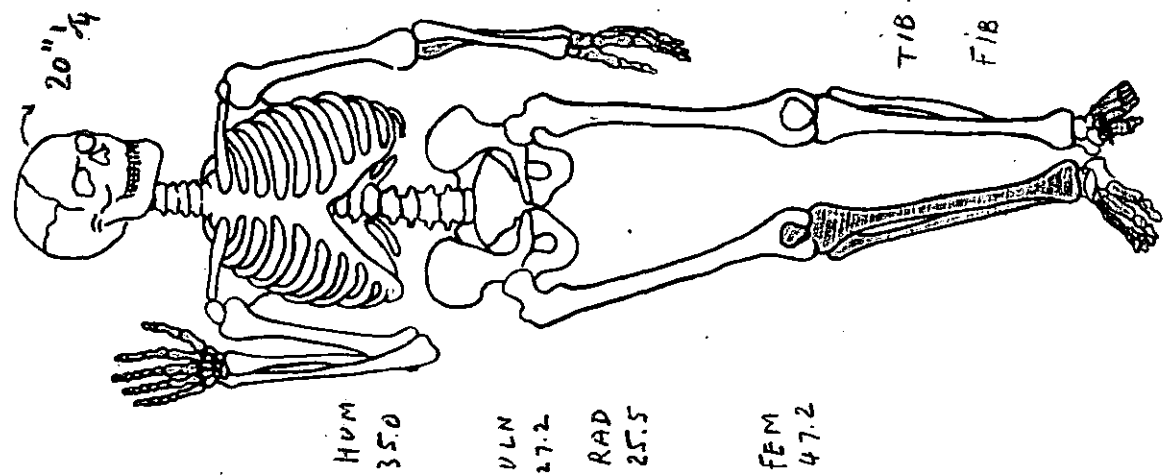
None found

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 casket.
Teeth found with remains. No clothing. Remains previously
processed by repatriation. No evidence of any amputations.
No I.D. tags found.**

Amel #1 /s/ Thomas W. Turner - DAC

19. BLACK OUT PARTS OF BODY NOT RECORDED



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

I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF 1 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 - DAC

TOOTH CHART

Date 22 Sept. 49

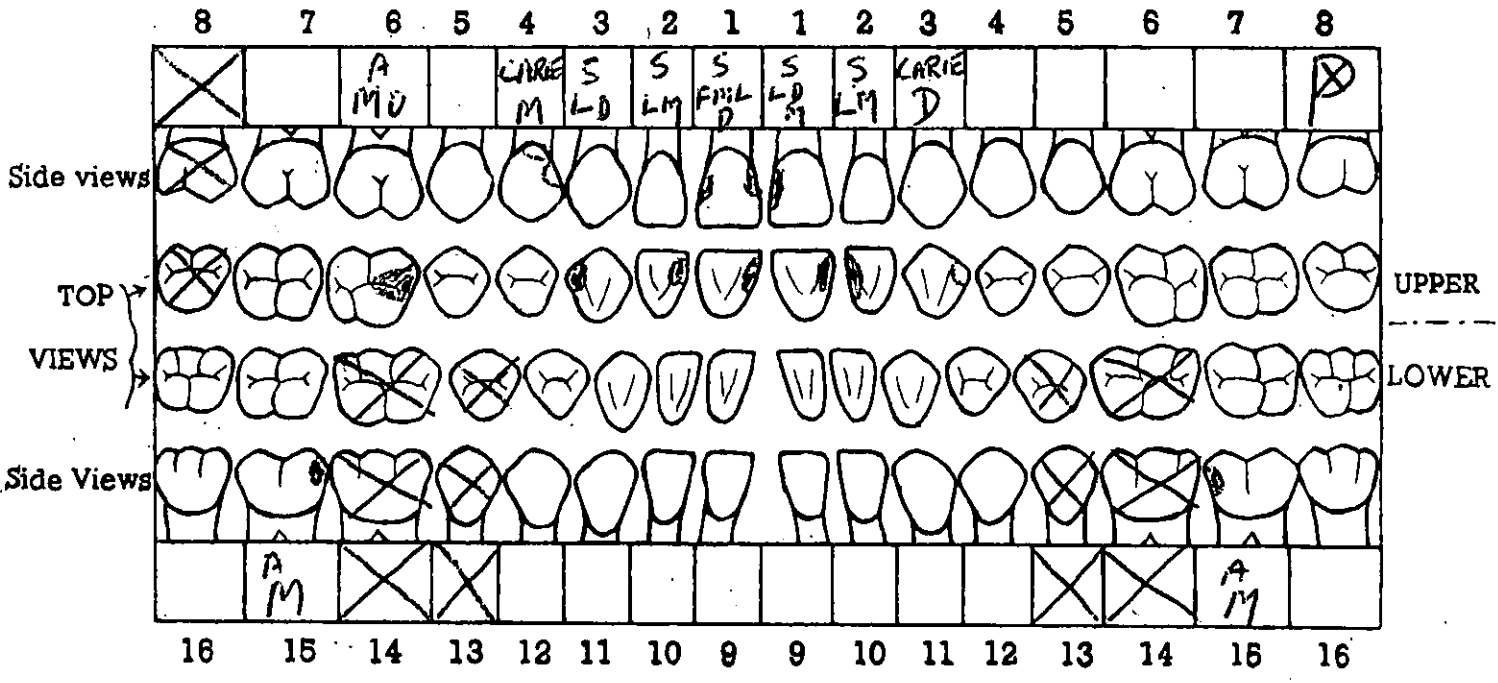
X-6207

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), 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. REMARKS

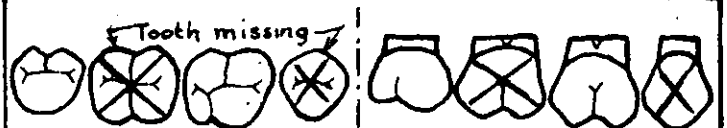
SPACES: R-10, 11 - 2 mm; R-11, 12 - 2 mm; R-12, 15 - 4 mm; L-10, 11 - 2 mm; L-11, 12 - 1 mm, L-12, 15 - 4 mm
ROTATIONS: R-12, 1/4 turn distally
 Size: Medium, Alignment: Good, Color: Dull ivory

/s/ Larry De Shaw - DAC

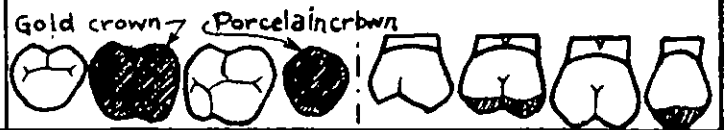
Signature of Officer or other person who prepared Tooth chart

Verified by G. R. C. Officer

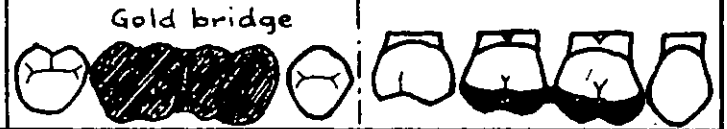
MISSING TEETH... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



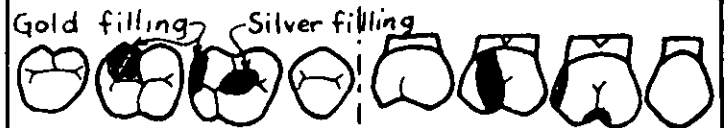
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



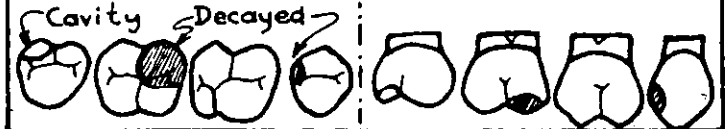
BRIDGE WORK... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



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

AIRMAIL

att 1st ind
10/30/50

293 unk St Avold X-6207

QMGMT 293
Unknown X-6207, St. Avold, France

3d Ind

Dept. of the Army, OCMG, Washington 25, D. C., 8 December 1950

TO: CO, 7887 Graves Registration Det., APO 757, c/o PM, New York, N. Y.

1. Reference is made to basic communication.
2. Unknown X-6207, USMC St. Avold, France, has been approved as Unidentifiable.

FOR THE QUARTEMASTER GENERAL:

Incl w/d

Martin/id m m
Foy off

THOMAS E. COX
Capt OMC
Memorial Division

Cy furnished: Adm Sec



EJF

1st ind 3 Oct 50

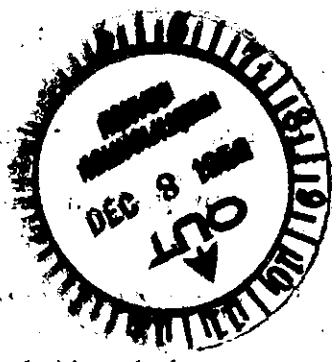
AIRMAIL

CA 10/11/1964: 1000 200

1000
1000/1000

1000

FILE
74



MEMORIAL

Basic ltr, Hq, 7887 Graves Reg Det, GROF 200.2, Subject: Certificate of Unidentifiability of Remains, Transmittal Letter # 5115, dated 7 September 1950

GROF 200.2 2d Ind

Hq, 7887 Graves Registration Detachment, Operations Division, APO 757, (Liege), U S Army, 16 October 1950

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

Reference preceding indorsement, forwarded herewith is copy of reprocessing report, dated 22 September 1949, accomplished for Unknown X-6207, USMC St Avold; which apparently was not previously furnished your Office.

FOR THE COMMANDING OFFICER:

1 Incl
QMC Form 1044
(X-6207)

C. W. STEINSIEK
Capt, QMC
Operations Division

QMGMT 293 3d Ind
Unknown X-6207, St. Avold, France

Dept. of the Army, OQMG, Washington 25, D. C., 8 December 1950

TO: CO, 7887 Graves Registration Det., APO 757, c/o PM, New York, N. Y.

1. Reference is made to basic communication.
2. Unknown X-6207, USMC St. Avold, France, has been approved as Unidentifiable.

FOR THE QUARTERMASTER GENERAL:

Incl w/d



THOMAS E. COX
Capt QMC
Memorial Division

314.6 288 E. ...

OCT 22 1950

RECEIVED ...



7

AIRMAIL

FORM 314.6

1st Ind

US European

SUBJECT: Certificate of Unidentifiability of Remains
Transmittal Letter #5115

Dept. of the Army, GAGD, Washington 25, D. C., 3 October 1950

TO: Commanding Officer, 7087 Graves Registration Detachment,
APO 757, c/o Postmaster, New York, New York

Approval of Certificate of Unidentifiability for X-5207 Sb. Avoid
is suspended pending receipt of reports of reprocessing in accordance
with paragraph 153b, AR 630-110-5.

FOR THE QUARTERMASTER GENERAL:

1 Incl - w/d

THOMAS H. COX
Capt GMD
Memorial Division

Clements:cam

My 3rd Incl. At 6207
JMN



FILE 3 OCT 1950
JMA Clements
Adj. (12947)

Copy

AIRMAIL

AIRMAIL

QMMT 314.6
GRS European

1st Ind

SUBJECT: Certificate of Unidentifiability of Remains
Transmittal Letter #5115

Dept. of the Army, OQMG, Washington 25, D. C., 3 October 1950

TO: Commanding Officer, 7887 Graves Registration Detachment,
APO 757, c/o Postmaster, New York, New York

Approval of Certificate of Unidentifiability for X-6207 St. Avold
is suspended pending receipt of reports of reprocessing in accordance
with paragraph 153b, SR 830-110-5.

FOR THE QUARTERMASTER GENERAL:

1 Incl - w/d

THOMAS W. COX
Capt GRS
Memorial Division

Clements:cam

By 3rd Ind. St Avold X 6207

JMN



FILE 3 OCT 1950
Maclements
Adj. (12947)

Cox

AIRMAIL

UFE



NOV 9 1950

IDENTIFICATION BRANCH

NOV 9 1950

IDENTIFICATION BRANCH

NOV 9 1950

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

GROP 200.2

7 September 1950

SUBJECT: Certificate of Unidentifiability of Remains
Transmittal Letter #5115

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

In compliance with letter, your Office, QMGMT 293, GRS European, Subject: Final Resolution of Unknown Deceased, dated 29 July 1948, forwarded herewith is one (1) certificate pertaining to the following remains:

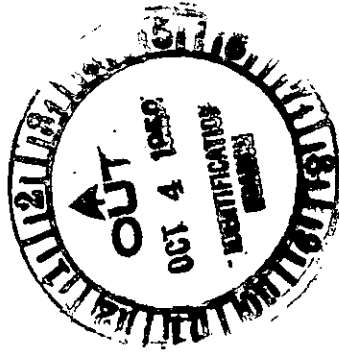
		<u>Plot</u>	<u>Row</u>	<u>Grave</u>
Unknown X-6207	USMC St Avold	BBBB	7	82

FOR THE COMMANDING OFFICER:

1 Incl
Certificate of
Unidentifiability

LEWIS A. McAMIS
Capt, QMC
Operations Division





DISINTERMENT DIRECTIVE

6

83 Smk-France X-6207 (St Avold)

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

3574 00000

DATE

15 12 47 DAY MONTH YEAR

NAME

UNKNOWN X-035207

SERIAL NUMBER

RANK

ARM

DATE OF DEATH

DAY MONTH YEAR

CEMETERY

ST AVOLD - METZ

DISPOSITION OF REMAINS

3503 80 CODE DIST. PT.

PLOT ROW GRAVE COUNTRY

44 7 BA FRANCE

CAUSE OF DEATH

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 DISINTERRED

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

REMAINS MARKER

USAGF

NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES

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

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

REINTERRED
 U. S. MIL. CEM. ST-AVOLD
 PLOT 8888 ROW 7 GRAVE 82

TOOTH CHART

24 May 1946.
 Date

Unknown X-6207

Last Name First Initial

Unknown

Rank

Unknown

Serial No.

Unit

Monterhouse Roselle France

Organization

028 March 1945

Unknown

Eu' Rd Map Sat 57 Place of Death

Date of Death

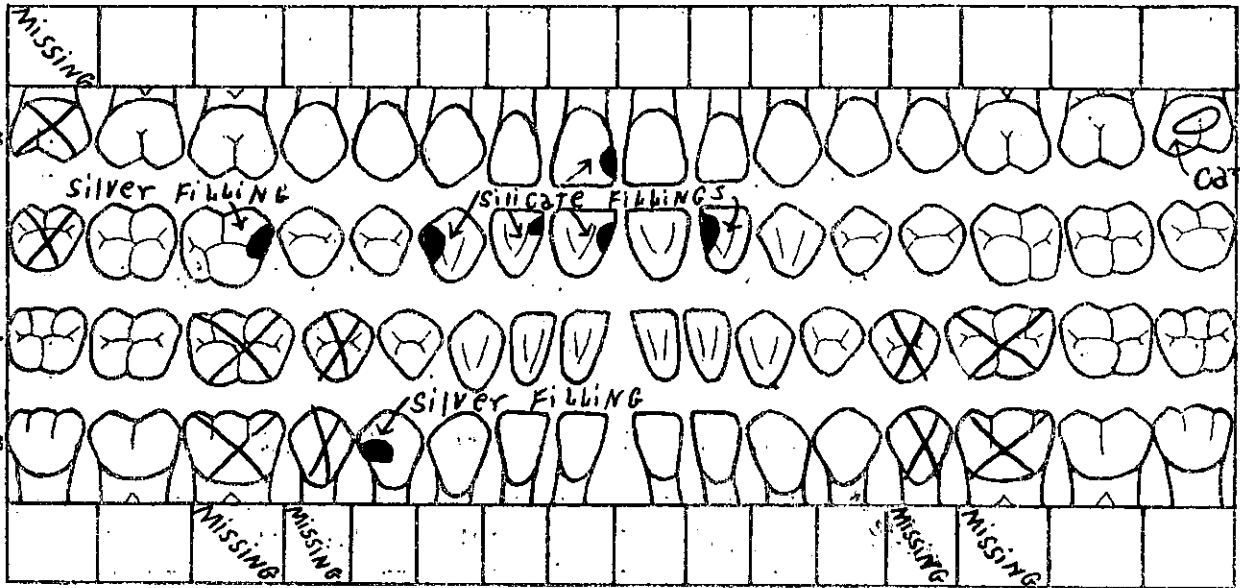
Cause of Death

1:200.000(Q-792428)

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), 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.


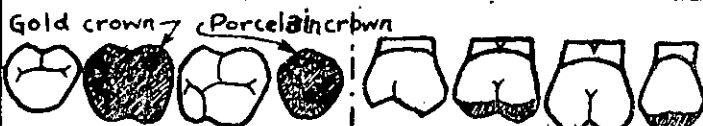

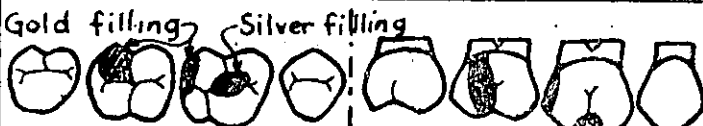
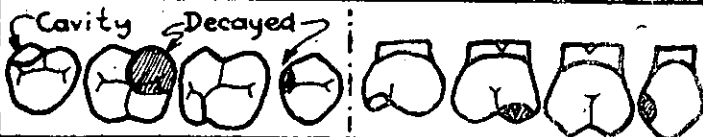
John A. Trent S.M.

John A Trent S.M.

Signature of Officer or other person who prepared Tooth chart

Ralph V. Sleanor Maj Inf Third Field Command AGRG.

Verified by G. R. S. 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

- 1-R8 is granulated in.
- 2-L1 has a silicate filling on its mesial and distal surfaces.
- 3-L3 has a carrie on its distal surface.
- 4-L13, L14, R13, R14, were previously extracted, and were not recovered with the remains.
- 5-R14 has a silver filling on its mesial surface.
- 6-L12 is facing towards the distal surface.
- 7-Teeth are white.

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

Unknown X _____
Cemetery 4207
Flot BBB Row 7 Grave 82

1. Arrived at cemetery 1530 25 May 1946
(hour) (date)
2. Place of death Neufchateau Moselle France En Re Map 5407, 1-20000
(Name of closest town) (Coordinates and letter
Prefex, maps)
(G-702423)
Sheet, scale and serials used.

3. Remains recovered or disinterred by 3040th GI Co
(name and organization)
4. Evacuated to Cemetery by AGRC 3rd Field Command AGRC
(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)				
Raincoat	none			
Overcoat	none			
Jacket, Field	M-1943 with hood			
Jacket, Combat	none			
Mackinaw	none			
Sweater	one			
Jacket, HBT	none			
Shirt, Wool, OD	one illegible markings			
Undershirt, Wool	one			
Undershirt, Cotton	none			
Trousers, HBT	none			
Trousers, Wool OD	one			

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 Strawfield
Flot DEED Row 7 Grave 82

1. Arrived at cemetery 1500 25 May 1946
(hour) (date)
2. Place of death Moutherhouse Moselle Franco En Rd EAP 2457, 1-00000
(Name of closest town) (Coordinates and letter
Prefix, maps)

(Q-792423)

Sheet, scale and serials used.

3. Remains recovered or disinterred by 3049th GI Co G
(name and organization)
4. Evacuated to Cemetery by OPF 3rd Field Command AGRC
(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)				
Raincoat	none			
Overcoat	none			
Jacket, Field	n-1943 with hood			
Jacket, Combat	none			
Mackinaw	none			
Sweater	one			
Jacket, HBT	none			
Shirt, Wool, OD	one illegible markings			
Undershirt, Wool	one			
Undershirt, Cotton	none			
Trousers, HBT	none			
Trousers, Wool OD	one			

Belt, Web None

Drawers, Wool none

Drawers, Cotton none

Leggings, Wool None (Note unusual lacing)

Socks, Cotton none

*Shoes (Type) none

Overshoes none

Web Equipment (Type) none

(Other item) none

(Other item) none

*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? Ground Forces

8. Description of Remains:
Age UTD Height 5'10" Weight 40 lbs Description of wounds UTD
est est

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

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

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

UTD

Sunburn or tan, other than hands & face UTD

Complexion UTD
(Light, med. dark, clear, pimples, pocks, freckels)

Build UTD
(Large, fat, thin, muscular)

Hair light brown 3" UTD
(color, length, 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 Nose 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, extract
~~SEE TOOTH CHART~~)

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

Jaw UTD Circumference of head in inches 21 1/2
 (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 UTD
 joints). (unusual characteristics of fingernails)

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

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). UTD

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

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

9. Black outparts of body not received at cemetery.



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

If not, explain UTD

11. Has tooth chart been prepared yes If not, explain _____
Yes - no

12. Remarks Entire remains recovered - except right tibia and fibula.

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.

Ralph W. Sleator
Ralph W. Sleator
Officer name

Maj Inf
Rank Service

Third Field Command AGRG
Organization..

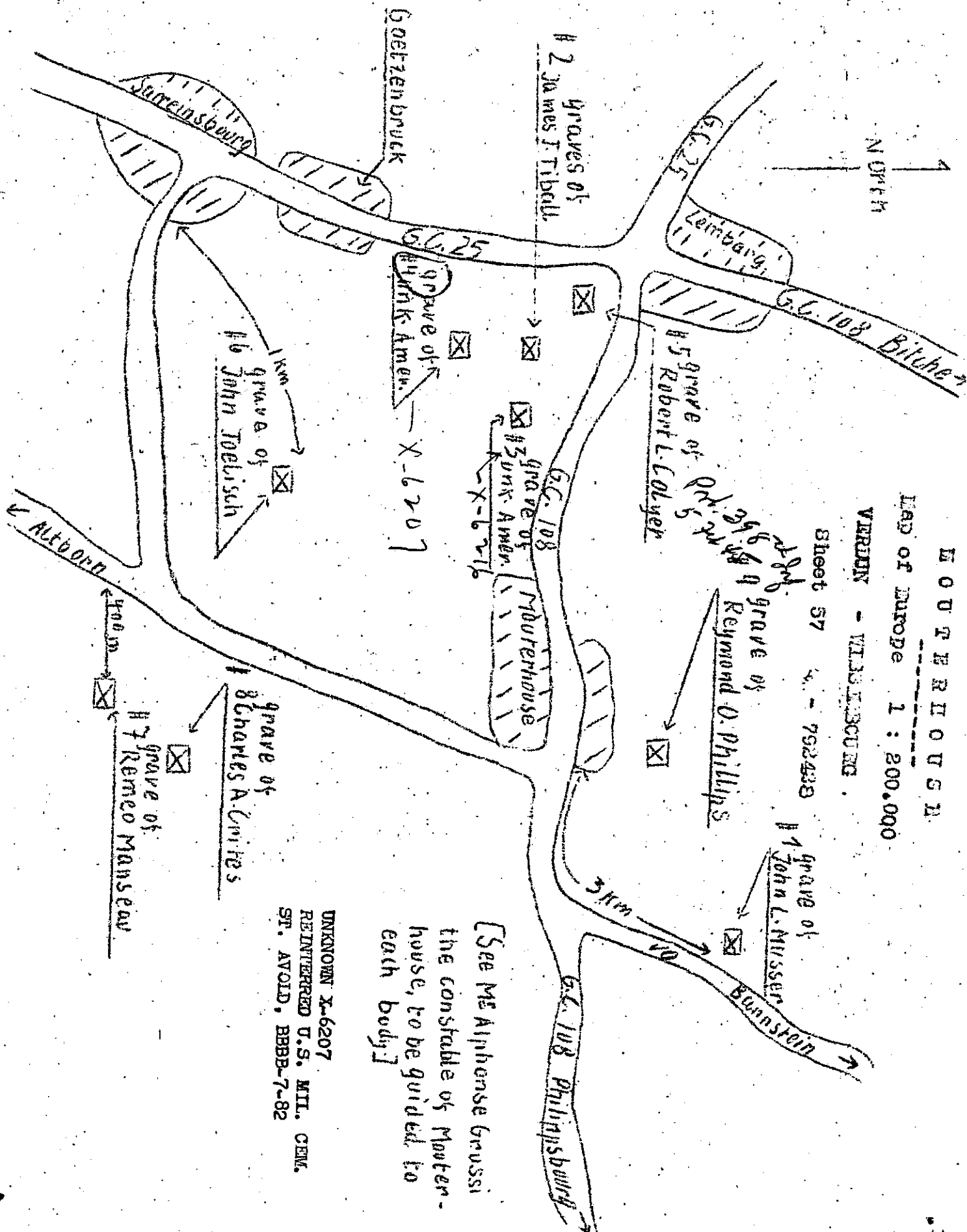
FOURTH U.S.A.

MAP OF EUROPE 1:200,000

VERDUN - WISSEMBOURG

Sheet 57 - 752433

North



2 Graves of James I. Tibell

grave of Frank Amer. - X-6207

grave of John Joelisch

5 grave of Robert L. Colyer

grave of Frank Amer. - X-6216

Moutenhouse

grave of Raymond O. Phillips

grave of John L. Musser

grave of Charles A. Smith

grave of Reneo Mansseau

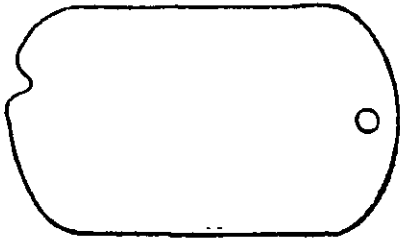
[See ME Alphonse Grossi the constable of Moutenhouse, to be guided to each body]

UNKNOWN X-6207 REINTERRED U.S. MIL. CEM. ST. AVOID, BBBB-7-82

RESTRICTED

#1

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 25 May 1946
---	---	-------------------------------

Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.		
	NAME (Last, first, middle initial) Unknown X-6207		SERIAL NO. Unknown
	GRADE Unknown	ORGANIZATION Unknown	BRANCH OF SERVICE Ground Forces
	RACE Unknown	RELIGION Unknown	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH Mouterhouse Moselle, France	CAUSE OF DEATH Unknown	DATE OF DEATH Est March 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
US Military Cemetery (Q-260584) St. Avold France.

DATE OF BURIAL 25 May 1946	HOUR 1600	BURIED IN (Shroud, blanket, or name of other) Casket	TYPE OF GRAVE Temp wooden Cross	PLOT No. BBBB	ROW No. 7	GRAVE No. 82
-------------------------------	--------------	---	---------------------------------------	------------------	--------------	-----------------

WAS THIS A REBURIAL? (Yes or no) yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE Isolated Grave near Mouterhouse Moselle, France Eu Rd Map Sht 57, 1.200.000) Q-792428)	ROW No. GRAVE No. Isolated Grave
--	--	--

TYPE OF RELIGIOUS CEREMONY General Service	PERSON CONDUCTING BURIAL RITES Ch. J.B. JOHNSON, 1ST Lt	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) PHILLIPS, R.O. JR.	RANK Pvt	SERIAL No. 34913789	ORGANIZATION 141st Inf. Regt.	GRAVE No. 81
--	-------------	------------------------	----------------------------------	-----------------

BODY BURIED ON-DECEASED RIGHT, NAME (Last, first, middle initial) OPEN AT TIME OF BURIAL	RANK	SERIAL No.	ORGANIZATION	GRAVE No. 83
---	------	------------	--------------	-----------------

SIGNATURE OF PERSON PREPARING REPORT Herbert F. Shaw WD Civ. Third Field Command AGRC.	SIGNATURE OF GRS OFFICER VERIFYING REPORT RALPH W. SLEATOR Major, Inf. 3rd Field Command
--	--

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 3--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.

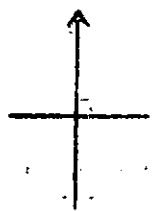
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
5'8"	UTD	UTD	LIGHT BROWN	---UTD---

WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
None	None	Mouterhouse Moselle France.

OTHER IDENTIFICATION CLUES
 One shirt wool OD with illegible markings, is enclosed for further identification.

FILLINGS	<p>SILVER FILLING GOLD FILLING</p>	<p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
CAVITIES	<p>CAVITY DECAYED</p>	
MISSING TEETH	<p>TEETH 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 11 Check, List of Unknowns and Form 1A Tooth Chart.--Too badly decomposed for fingerprints. Est weight of remains: 40 lbs.