

# RECLASSIFICATION SHEET

PAPERS ORIGINALLY FILED 293 Unk (misc) St. Avold

X-1588 X-6108 X-6137 X-6150 X-6297

## SYNOPSIS AND DATES

X-6387-A X-6387-B X-6387-C X-6457

*misc filed*

NEW CLASSIFICATION 293 Unk - St. Avold X-1588

# RECLASSIFICATION SHEET

IRK *yab*

14 **1**

USMC, EPINAL  
Plot: B Row: 50 Gr: 8

Date of Burial: 29 June 50 **DISINTERMENT DIRECTIVE**

Verified by GRS Officer

Allen L. LAWSON 1st LT INF.

**APP**  
**9/2/50**

SECTION A *Allen L. Lawson*  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER  
**3574 00000**

DATE  
**15 03 49**  
DAY MONTH YEAR

NAME: **UNKNOWN** SERIAL NUMBER: **X-006387** GRADE: **B** ARM: **0** RACE: **0** RELIGION: **6**

CEMETERY: **ST AVOLD FRANCE** PLOT: **XXX** ROW: **6** GRAVE: **61** DISPOSITION OF REMAINS: **3502** CODE: **3502** DIST. CTR.: **80**

**SECTION B - CONSIGNEE AND NEXT OF KIN NO FLAG SENT**

NAME AND ADDRESS OF CONSIGNEE  
~~ST AVOLD, FRANCE~~ **EPINAL, FRANCE**

NAME AND ADDRESS OF NEXT OF KIN  
~~(BY COMMANDING OFFICER)~~ **(2)**  
These remains are unidentifiable and are to be permanently interred. (Hq. AGRC-15 Dec 49).

**SECTION C - DISINTERMENT AND IDENTIFICATION**

NAME: SERIAL NUMBER: GRADE: DATE OF DEATH: DATE DISTINTERRED:  
IDENTIFICATION TAG ON: 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:

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)  
**NAT**  
**FILE**  
Plates made to read " UNK X- 006387-B"

REMAINS PREPARED AND PLACED IN CASKET  
**DATE 27 JUL 50**  
**NAME R.T. Johns**  
**R+R BR. MEM. DIV.**

DATE: BY: CASKET SEALED BY: EMBALMER (Signature):  
**Elijah H Fields, Embalmer** **Elijah H Fields**

CASKET BOXED AND MARKED: SHIPPING ADDRESS AND BY: All markings, tags and plates verified by:  
**8 Apr 49 Elijah H Fields** **Donald H. Lockett, 1st Lt QMC**

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.  
**Donald H. Lockett, 1st Lt QMC, 7857 AGRC Zone 3 Hq**  
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS  
**Consignee corrected - Reg. Div.** **ASOF**

## RECORD OF CUSTODIAL TRANSFER

### 1. SHIPPED

FROM <b>USMC St Avold, Franco</b>		TO <b>OIC Newville, Belgium</b>	
KIND OF CONVEYANCE <b>Truck</b>		NAME OF CONVOYER <b>Cpl Vincent P Mazzo, 32707218</b>	
SIGNATURE OF SHIPPER <i>[Signature]</i> <b>FRANK B. DALLAGHER 1st Lt RA</b>	DATE <b>2 Nov 49</b>	SIGNATURE OF RECEIVER <i>[Signature]</i>	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		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

# DISINTERMENT DIRECTIVE

1

**SECTION A —**  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

DAY MONTH YEAR

NAME <b>UNKNOWN X-6387 A (B) C</b>	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
---------------------------------------	---------------	-------	-----	------	----------

CEMETERY <b>St. Avold, France</b>	PLOT <b>3 X</b>	ROW <b>6</b>	GRAVE <b>61</b>	DISPOSITION OF REMAINS  CODE   DIST. CTR.
--------------------------------------	--------------------	-----------------	--------------------	---

**SECTION B — CONSIGNEE AND NEXT OF KIN**

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN <b>These remains are unidentifiable and are to be permanently interred. (Hq. AGRC-15 Dec 49)</b>
-------------------------------	---

**SECTION C — DISINTERMENT AND IDENTIFICATION**

NAME <b>UNKNOWN X- 6387 A (B) C</b>	SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISINTERRED <b>3 Aug 48</b>
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER <b>EMB</b>	ORGANIZATION		RELIGION	IDENTIFICATION VERIFIED BY <b>Millard H Mc Whorter, Embalmer</b> NAME AND TITLE

**SECTION D — PREPARATION OF REMAINS FOR SHIPMENT**

NATURE OF BURIAL <b>Mattress cover</b>	CONDITION OF REMAINS <b>All major bones fractured or missing.</b>
---	--

OTHER MEANS OF IDENTIFICATION  
**None**

MINOR DISCREPANCIES (*Prepare Discrepancy Report QMC Form 1194a for major discrepancies.*)  
**None**

REMAINS PREPARED AND PLACED IN CASKET

DATE <b>12 Oct 48</b>	BY <b>Millard H Mc Whorter, Embalmer</b>
CASKET SEALED BY <b>Anthony J Martin, Embalmer</b>	EMBALMER (Signature) <b>Anthony J Martin</b>

CASKET BOXED AND MARKED <b>10 Nov 48 Anthony J Martin,</b>	DATE BY <b>Rafael T Ruiz, 1st Lt FA</b>
---	--

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

*Rafael Ruiz*  
**Rafael T Ruiz, 1st Lt FA, 7857 AGRC Zone 3 Hq**  
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS  
**I certify that the entries on this form are true copies of the entries on Copy number 4 of this Disinterment Directive which contains the signatures of the persons whose names are typed hereon.**

*Frank B Callaghan*  
**Frank B Callaghan, 1st Lt FA**

# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

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

## 2. SHIPPED

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

## 3. SHIPPED

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

## 4. SHIPPED

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

## 5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		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

QMGMT 293

1st Ind

GRS European

SUBJECT: Certificates of Unidentifiability of Remains  
Transmittal Letter #4556

Dept. of the Army, OQMG, Washington 25, D. C., 31 January 1950

TO: Chief, Registration Division, 7887 Graves Registration  
Detachment, APO 58, c/o Postmaster, New York, New York

1. This Office approves the classification of Unknown X-6306, listed on basic communication, as Unidentifiable.

2. Unknown X-3215 was suspended to your headquarters by letter dated 19 January 1950.

3. It is recommended that all action in connection with other Unknowns listed be suspended pending further notification from this Office.

FOR THE QUARTERMASTER GENERAL:

Incls w/d

T. H. METZ  
Lt. Colonel, OMC  
Memorial Division

Rice/id  
Foy  
REB

Cy furnished: Adm Sect

*Handwritten:* 314.6 ~~ADP~~ Europe  
7/2 4556

X-293 Unknown X-6387 B - ST ANSON

REB  
NEW  
TEC

# AIRMAIL

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

RRE 293

30 Nov 1949

(Date)

293 Unit. France X-6387-B (St. Avold)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X- 6387 B , Plot XXX ,  
Row 6 , Grave 61 , USMC St. Avold, 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. XXX 3297 dated  
15-12-48 .

3. Remarks:

Case reviewed by undersigned Members of the Board of Review:

COL H P HENRY, O-12589  
LT COL E. D. MULVANY, O-359598  
CAPT EDWARD F. PRICE, JR., O-1588236

3 Feb 50 OQMG  
Not identifiable from  
information presently  
available

NAN  
file 3 Feb 50  
C. Schmitt  
891 B



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

RRE 293

30 November 1949

(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X- 6387 B, Plot XXX, Row 6, Grave 61, USMC ST. AVOLD, 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. 3297, dated 15-12-48.

3. Remarks:

See Case History attached.

Case reviewed by undersigned Members of the Board of Review:

  
Col. H. P. HENRY, O-12589

JMC

  
Lt. Col. E. D. MULVANITY, O-359598

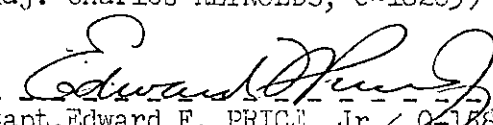
JMC

Maj. Charles REYNOLDS, C-182639

TC

Maj. Gerald SWARTHOUT, Sr., O-267451

CE

  
Capt. Edward F. PRICE, Jr., O-188236

JMC

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

CAV

Record

3 Feb 50

DDMG

not identifiable from  
CWO Frank G. information presently

USA

Capt. Jack C. HAYES, O-1577297

JMC

available

Incl #5

CASE HISTORY

X-6387 A, B & C  
UNKNOWN No. X-6297 & X-6457

U.S. MILITARY CEMETERY St. Avold, France

1. The remains of the five unknown decedents shown above were recovered from the village church-yard at HIENHEIM, Germany. These cases are associated with the two deceased crew members, 1st Lt Daniel W. BOWMAN and S/Sgt. Warren C. LAWRENCE, of A/C #42-100266 which crashed 25 February 1944. All other crew members of the subject aircraft are listed as RTD. This association was established through the presence of a flying boot bearing the marking "Lt D.W. BOWMAN" that was found amongst the mass burial of Unknowns X-6387 A, B & C. Due to a lack of identifying data it could not be determined which of the five remains are those of 1st Lt BOWMAN and S/Sgt LAWRENCE.

2. Since a statement (See attached) made by a resident of Hienheim, one Johann HAUSSNER, implies that an American four-motored bomber crashed at Hienheim on 25 April 1945, a thorough check of MACR files was made in an effort to tie in an aircraft with the area concerned, however, this action proved negative. Captured German dulag records were not of any value to the investigation of this case, since dulag records were not maintained after the month of MARCH 1945. The tooth chart contained in the case of Unknown X-6387 A was checked against all available dental data on unresolved casualties within the Germany M-49 area with negative results. An effort was made to associate another aircraft that crashed around the 25th February 1944; however, only the aircraft of which Lt BOWMAN and Sgt. LAWRENCE were crew members could be associated with the HIENHEIM area.

3. In view of the foregoing it is recommended that these cases be declared Unidentifiable.

HB

JH

# DISINTERMENT DIRECTIVE

*6*

SECTION A —  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

**3574 00000**

DATE

**15 03 49**  
DAY MONTH YEAR

NAME

**UNKNOWN - 006387**

SERIAL NUMBER

GRADE

ARM

RACE

RELIGION

**0**

**0**

**0**

CEMETERY

**ST AVOLD FRANCE**

PLOT

ROW

GRAVE

DISPOSITION OF REMAINS

**XXX**

**0**

**61**

**3503**

**80**

CODE

DIST. CTR.

## SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

**ST. AVOLD, FRANCE**

NAME AND ADDRESS OF NEXT OF KIN

**(BY ADMINISTRATIVE DECISION)**

## SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

GRADE

DATE OF DEATH

DATE DISTINTERRED

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

- REMAINS
- MARKER

**UNKNOWN**

NAME AND TITLE

## SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES (*Prepare Discrepancy Report QMC Form 1194a for major 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 AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

# IDENTIFICATION CHECK LIST

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

E. O. # 783

Unknown X X-6387 A (B) C  
 Cemetery St. Avold France  
 Plot X X X Row 6 Grave 61

**Date reprocessed**

1. ~~Arrived at cemetery~~ 30 August, 1948  
(Hour) (Date)

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

(Sheet, scale and serials used)

3. Remains ~~recovered and identified by~~ reprocessed by MOBILE TEAM # 1, C.I.P.  
(Name and organization)

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

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

Item	Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear	<u>NONE</u> <small>(Type)</small>		
Raincoat	<u>NONE</u>		
Overcoat	<u>NONE</u>		
Jacket, Field	<u>NONE</u>		
Jacket, Combat	<u>NONE</u>		
Mackinaw	<u>NONE</u>		
Sweater	<u>NONE</u>		
Jacket, HBT	<u>NONE</u>		
* Shirt, Wool OD	<u>NONE</u>		
Undershirt, Wool	<u>NONE</u>		
Undershirt, Cotton	<u>NONE</u>		
Trousers, HBT	<u>NONE</u>		
* Trousers: <del>XXXXXX</del>	<u>Officers Pink, Remnants</u>		

Belt, web Remnants

Drawers, wool NONE

Drawers, cotton NONE

Leggings, wool NONE

Socks, ~~cotton wool, white,~~ Remnants

\* ~~Skinner~~ boots, Remnants of 3 (type) Fleece lined, flying

Overshoes NONE

Web Equipment NONE (type)

(Other item) Remnants of parachute harness, insert for electrically heated flying suit, electrically heated flying glove.

(Other item) \_\_\_\_\_

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

Chevrons or Insignia NONE  
(Type & location; shirt, jacket, coat, helmet)

Shoulder Patch NONE

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

6. Description of Remains: L. Ulna 25.0 (smooth fracture)  
L. Radius 23.3

Age UTD Est. Height 5'3 3/8" Weight UTD Description of wounds UTD

Bandages or dressings NONE Scars UTD  
(Length, width, location)

UTD Tattoos  
(Number, location — illustrate on separate page).

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

Sunburn or tan, other than hand and face UTD

Complexion UTD  
(Light, medium, dark, clear, pimples, pocks, freckles)

Build UTD  
(Large, fat, thin, muscular)

Hair Dark brown, 1 1/2" long, straight  
(Color, length, quantity, curly, wavy, straight, whorls, or definite parting)

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

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

Goatee ..... **UTD**  
(Light, color, extent)

Eyes ..... **UTD** Eyebrows ..... **UTD**  
(Color, setting, shape) (Color, bushiness, extent across nose)

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

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

Teeth ..... **SEE TOOTH CHART WITH CASE "A"**  
(White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin ..... **UTD**  
(Prominent, receding, pointed, dimples, double) **Parts of fractured skull found with remains (Shown on case "A" Skeletal chart)**

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, extent and quantity of hair)

Hands ..... **MISSING**

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

.....  
(Unusual characteristics of fingernails)

Chest ..... **UTD**  
(Size of nipples, color, quantity and extent of hair, large, small, normal)

Waist ..... **UTD**  
(Size of navel, appendectomy, amount, quantity, and color of hair)

Back ..... **UTD** Circumcision ..... **UTD** Pubic Hair ..... **NONE**  
(Quantity and extent of hair) (Yes-no) (Color)

Hernioplasty ..... **UTD**  
(Yes-no; location)

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

Feet ..... **UTD** Toes ..... **UTD**  
(Size, corns, callouses, flat) (Slender, straight, crooked, overlap)

Evidence of healed fractures ..... **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? Yes If not, explain (Yes-no)

Remains reprocessed as per E.O. # 783

9. Remarks Remains received in skeletal form, small amount of decomposed flesh. Report of Burial found, No GRS Tags. Teeth found with remains. Estimated weight of reprocessed remains : 1 lb. Estimated height : 5'3 3/8". No evidence of previous fractures or amputations. Parts of three remains found. (See narrative of segregation). Remains segregated into case A, B and C


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.

/s/ George J. SCHWADERER  
(Officer's Name)

UNGRADED MOBILE TEAM #1,  
Rank Service

CIP ZONE ONE  
(Organization)

A CERTIFIED TRUE COPY

  
CLYDE V. CARLSON  
WOJG USA

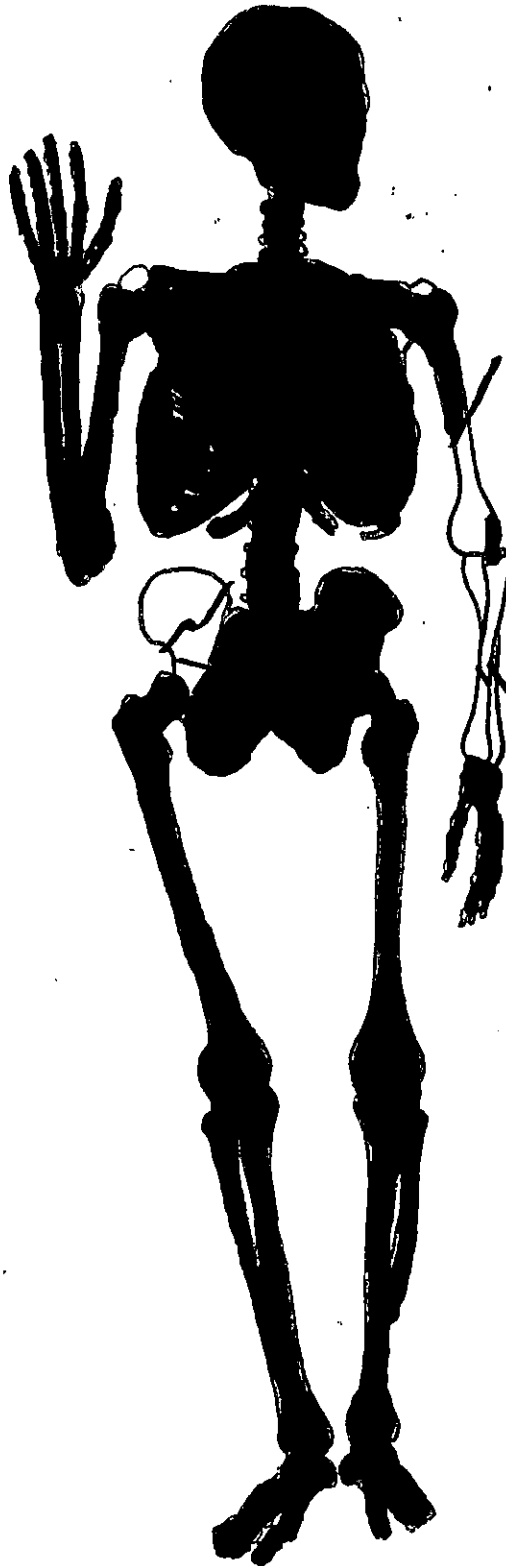
X-6387 A (B) C  
St. Avold France  
XXX - 6 - 61

# SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

RIGHT

LEFT



Ulna 25.0  
(smooth fracture)

Radius 23.3

CHART "A"

Estimated height : 5' 3 3/8"



NARRATIVE OF SEGREGATION

CONCERNING CASE X-6387 A, B and C.

---

Upon processing case X-6387 , as per E.O. # 783, parts of three remains, having bones necessary for life of a person, were found case X-6387 was changed to case X-6387 A, B and C. Segregation was possible because of difference in size and structure of the bones.

The temporary wooden cross had " X-6387" marked three times, indicating that three remains were known to be buried.

The teeth, clothing and parts of a fractured skull were found among the remains and could belong to either case; Teeth, clothing and the fractured skull were placed with case A. The fractured skull is shown on case A skeletal chart.

The remains of case "A" were wrapped separately, placed in one burial box and assigned to grave from which disinterred, that is :

Plot : EEEE, Row 8, Grave 90.

Case B : Plot XXX, Row 6, Grave 61

Case C :; Plot XXX, Row 6, Grave 62

A CERTIFIED TRUE COPY

/s/ & /t/ CLYDE V CARLSON  
WOJG USA

# REPORT OF BURIAL

30 August, 1948

X-6387 A (B) C

Unk.

Unk.

Last Name

First

Initial

Rank

Serial No.

Unk.

Unk.

Unit

A.A.F.

Heinheim, Landkreis, Kehlheim, Germany

25 February, 1944

Plane crash

1100 29 June, 1946

USMC St. Avold France

Q-260584

Time and Date of Burial

Name of Cemetery

City or Coordinates of Location

61

Row Number

Temp. Wdn. Cross

Grave Number

Row Number

Type of Marker

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

If No Identification Tags

Processing revealed parts of three remains.

How were remains identified?

Remains were segregated. Case X-6387 was changed to X-6387 A, B and C.

What means of identification were buried with the body?

One copy of GRS Form #1, placed in a burial bottle and put with remains.

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

Who is buried on:

X-6387 C

Unk.

Unk.

A.A.F.

62

Deceased's Right:

Name

Serial No.

Rank

Organization

Grave No.

Deceased's Left:

Beginning of Row

Name

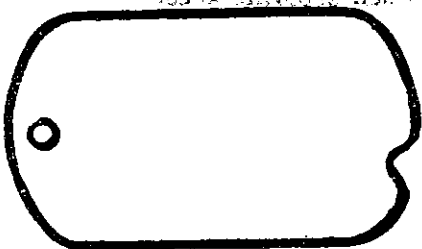
Serial No.

Rank

Organization

Grave No.

Signature of Name, Rank and if possible Organization of person reporting above Data unless other than officer reporting burial.



If print of identification tag is not affixed fill in below:

Emergency Addressee

Unk.

Name

Unk.

Address

Religion

Unk.

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

None

Remains previously buried in same cemetery, Plot E444, Row 8, Grave 90.

A CERTIFIED TRUE COPY

*G. V. Carlson*  
CLAUDE V. CARLSON  
WOJG USA

ALBERT G. RICHARDSON US DA CIV

Signature of Officer or other person reporting burial

JESSE R. WARD, CAPT.

Verified by G. R. S. Officer

# IN CASE 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: \_\_\_\_\_
- Weight: \_\_\_\_\_
- Color of Eyes: \_\_\_\_\_
- Color of Hair: \_\_\_\_\_
- Race: \_\_\_\_\_
- Laundry Marks: \_\_\_\_\_
- Number of Rifle: \_\_\_\_\_
- Wear Glasses?  Yes  No
- Is Tooth Chart Attached?  Yes  No

(If possible, have medical personnel take a tooth chart, if no medical personnel present, fill in a tooth chart below.) In space below, locate, and describe any scars, birthmarks, moles, deformities, etc.

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

Left Hand

4
3
2
1
Thumb

Right Hand

4
3
2
1
Thumb

## TOOTH CHART

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

Indicate: missing natural teeth by X; crowns by O; fillings by □; Bridges by ○ linking anchor teeth; replacements by artificial teeth X.

Characteristics:

Other Data:

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

