

Knowledge

7887 GRAVES DETACHMENT

APO 757

913 unk St. avold X-7292 MB

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-7292, ST AVOLD, FRANCE.

(FCC) DRAGUIGNAN

file 2 mar 57
Kirkland
Sewer

UNKNOWN X-7292

Believed to be middle aged adult. His teeth are well worn, slight built about 5'8" est. Body in bad state of decomposition. Dressed in civilian clothes, trousers black brown collar, foreign style. Between hip and knee left leg patch of grey blue cloth, 6 by 3 inches. Blue shirt with grey stripes, collar detached. Brown-grey rib sweater of jersey type. Piece of blanket (fibre) GI brown about 14" long 8" wide. Pair of socks. Socks are well worn one is brown one olive drab. Another pair of socks wine color, well worn. One of them has a patch of green cloth sewed on heel. There is a tag on socks and in red leather appears to be the number 431. On the back of this tag, and on the inside of this sock is another tag with old english lettering initial H.S. or H.L.. Both socks have this marking. Pair of wool drawers, patched several places, is of foreign design. Wool undershirt. There is also another rib shirt. On the front of this shirt is a number stenciled on button part of front of shirt. Number being 22. All clothes are of foreign make, style and design.

s/ John Aievoli
t/ JOHN AIEVOLI

X-7292

AGRC
FORM NO 11
REVISED 5 JANUARY 1946

CHECK LIST OF UNIFORM

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

Unknown X 7292

Cemetery _____

Plot _____ Row _____ Grave _____

1. Arrived at cemetery _____
(hour) (date)

2. Place of death Stod, Czechoslovakia WP 9229
(name of closest town) (coordinates and letter prefix, maps)

N-50 1/250,000
(sheet, scale and serials used)

3. Remains recovered or disinterred by 611 QM Co
(name and organization)

4. Evacuated to cemetery by CIP
(name and organization)

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

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

Item	ONLY CIVILIAN CLOTHING FOUND ON REMAINS, NO ARMY MARKINGS FOUND (type)
Headgear	FOUND
Raincoat	none
Overcoat	none
Jacket, Field	none
Jacket, Combat	none
Jackinaw	none
Sweater	one civilian
Jacket, HBT	none
Shirt, wool OP cotton	cotton, civilian blue with white stripes
Undershirt, wool	one civilian
Undershirt, cotton	none
Trousers, wool OP khaki	colored civilian
Trousers, wool OP	none
Belt, web	none
Drawers, wool	one (1) pair civilian
Drawers, cotton	none
Leggins, wool	none (Note unusual lacing)
Socks, cotton wool	two (2) pairs, civilian

shoes none (Type) _____
overshoes none _____
web Equipment none (Type) _____
Other Item none _____ *X-7292*

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
UTD _____

8. Description of Remains:
Age UTD EST _____ Height 5.6 EST _____ Weight 110 Est _____ Description of wounds _____

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, pocks, freckles)

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

Hair UTD _____
(color, length, quantity, curly, wavy, straight, whorls, or definitive 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 _____
(white, size, unevenness, spacing, noticeable crowns, fillings, extract)

Chin UTD _____
(prominent, receding, pointed, dimple, double)

Jaw UTD _____ Circumference of head in inches Est 19"
(large, small, *1*) (hat band)

Neck UTD Larynx UTD
 (size, length, short, normal, wrinkled) (present, normal)

Shoulders UTD 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 Waist UTD
 (quantity & extent of hair) (size of navel, appendectomy, amount)

Circumcision UTD Public hair UTD
 (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 UTD
 (nose, arms, legs, etc.)

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



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

If not, explain too decomposed

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

12. Remarks: No Army clothing found on remains. Processed weight approx. 75 lbs

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

John S. Martin
 JOHN S. MARTIN
 Officer's Name

WD. CIV.
 Rank Service

CIP (Labor Supervisor)
 Organization

GRS-GZ FORM No. 8

NOTICE OF DISINTERMENT

Date 13 August, 1946

The below listed U. S. deceased personnel have this date been disinterred from the location as
Strasbourg, France Processing Laboratory
 show and have been evacuated to U.S. Military Cemetery, St AvoId, France (Q 260584)
 for reburial.

<u>1 Unknown X-7292</u>	<u>UNK</u>	<u>UNK</u>	<u>WP 9229, N-50</u>
(Name)	(Rank)	(ASN)	<u>Stod, Czechoslovakia</u>
			(Place of Disinterment)
			If communal cemetery show Plot, Row and Grave No, if available.

William Hummel, Capt.
 (Officer or NCO in charge of Disinterment)

611 Qm. Gr. Reg. Co.
 (Organization)

Headquarters American Graves Registration Command

X-7292

REPORT OF INVESTIGATION AREA SEARCH

ATTENTION WAR CRIME
COMMISSION

AGRC Form 10 (Revised)

10. August 1946.
Date

1. January 1946

NAME _____ RANK _____ ASN _____

ORGANIZATION **UNKNOWN X- 7292** **unk** **unk**

MEANS OF IDENTIFICATION **UNK** **AAF**

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? **No** If so, state the following information:

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 **8 Unknown Soldiers**

(Use reverse side for listing of crew members from MARC)

a. Date of above burials **15. April 1945** Common Graves? **Yes**

5. Name and Type of Cemetery **Not buried in a cemetery**
(Military or Civilian)

6. Map Coordinates of the Cemetery _____

a. Town _____ Country _____

7. Give exact location in cemetery of the remains.

a. Section _____ Row _____ Grave _____

b. Is Sketch attached? _____

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

a. Town **STOD. Czech.** Coordinates **WP 9229, N-50**

b. Is Sketch attached? **Yes**

c. Is area mined? **No**

9. How is the grave marked? **Monument**

10. If grave is marked with cross, give exact markings thereon **Not marked, with a cross**

a. From what source was this information obtained? _____

(Identification tags, personal effects)

1. By whom _____

11. Where are the cemetery records? **No cemetery records**
(Town Hall, cemetery, burgermeister's office)

X-7292

- a. What information was contained thereon? _____
- b. Where was the information obtained? _____
- c. By whom? _____
12. What is the date of death? **15 April 1945.**
- a. Give basis **Civilians**
13. What is the cause of death? **They were beaten to death**
- b. Give basis **Information from civilians**
14. What is the date of burial? **15 April 1945.**
- a. Give basis **Civilians**
15. What was the place of death? **S T O D, Czechoslovakia** Coords **WP 9229 N-50**
- b. Give basis **A German civilian**
16. Where were the remains found? **S T O D, Czechoslovakia** Coords **WP 9229 N-50**
- a. By whom? **A German civilian**
- b. Is sketch attached? **No**
17. Was a casket used? **No** Who furnished the casket? _____
- Type of casket _____ How marked? _____
18. Who made the burial **Germans**
(Civilian, American Mil. or German Mil.)
- a. What are the names and addresses? **Unknown**

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 been 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 correspond 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 & C are not applicable).

- 39. Did death occur from any other means? (i. e., truck, jeep, mines, drowning, or small arms fire) **Beaten to death**
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. **There were 9 Americans P.O.W.'s beaten to death by the Germans on a death march near S T O D, Czechoslovakia.**

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 found at time of death**
- a. Were identification tags found at the time of death? **No**
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.

X-729c

b. Were personal effects found at the time of death? No

Where? _____ By whom? _____

Present disposition _____

c. Was deceased identified by living members of the crew at the time of death? No

d. Did Cemetery Register or cross indicate the immunization shot? No

42. Was Deceased given first aid? Unknown If so, where? _____

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

43. Was deceased evacuated to a German civilian hospital? Unknown

Where? _____ Names of people concerned _____

44. Is it possible on surface investigation to obtain from civilian sources a physical description of the deceased? Yes

45. Is it possible on surface investigation to obtain from civilian sources the condition of the remains? Yes

They were badly beaten

(Burnt? Decapitated? etc)

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

a. If so, give basis for positive assumption Dr. Vilém ŘEPKA, GIGAL Vaclav

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

47. Was case previously investigated? No By whom? _____

When? _____

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

S T O D stated that they were beaten to death, G I G A L Vaclav,

STOD, Czechoslovakia

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) There were 9 American Paratroopers beaten to death

52. Give Brief Narrative by the Germans on a death march near S T O D Czechoslovakia

(Use attached, sheets if necessary)

VRBA

Signature of Interpreter

Calvin H. Atwood

Signature of Investigator

VRBA W.O.

Calvin H. ATWOOD,

Rank

ASN

T/5

4031158

Rank

ASN

Czech. Army.

Organization

611 Q.M. G. Reg. Co.

Organization

Translated from the original manuscript.

Official Journal of the Ministry of Health.

No. 12/1917.

12.12.1917.

Matter: transportation of death-corps, permission.

To the American Consulate, London.

General Order.

On your request we give you the permission that the death-corps of American citizens

years old who died on April 1918 in the on a certain death-trace

And transported to

The following prescriptions are to be regarded: The death-corps will be given to a simple wooden coffin inwardly and outwardly well sealed,

The cover will be closed and sealed hermetically.

To this procedure will be present doctor of this place who will give out a death-passport.

The transportation will take place on 12.12.17 at 12.12.17 by air from Stal via London to London

The vehicle on which the death-corps will be carried should be decent, well sealed or at least well covered and no other things but flowers can be enclosed to the coffin. The transportation will be accompanied by a special guide who will be responsible that the transportation will nowhere stop unnecessarily that it will take the prescribed and that the coffin will be unopened.

As soon as the transport will arrive to its destination the following office should be notified.

Translated from the original manuscript.

National Council in Ljubljana, - health dept.

No 532/odrv.

12.VIII.1946.

Exhumation
Matter: transportation of death-corps, permission.

To the American Military Mission

Czechoslovakia.

On your request we give you the permission that the death-
corps an American unknown P. 7.

..... years old who died on April 1945 in Stod
on a German death march

And transportation

The following prescriptions are to be regarded:
The death corps will be given to a simple wooden coffin inwardly
and outwardly well sealed,

The cover will be closed and sealed hermetically.

To this procedure will be present doctor of this place

..... who will give out a death-passport.

The transportation will take place on 12.VIII.46. at

by auto car from Stod via Pilsen to Lebanice

The vehicle on which the death-corps will be carried should be dis-
cent, well sealed on at least well covered and no other things but
flowers can be enclosed to the coffin. The transportation will be
accompanied by a special guide who will be responsible that the tr
transportation will nowhere stop unnecessarily that it will take the
prescribed and that the coffin will be nowhere opened.

As soon as the transport will arrive to its destination the radio-
wing office

should be notified.

Translated from the original manuscript.

No. 000/0000

D E A T H R E P O R T

According the rules a death-corps one unknown American D. W.

who died on an German death march

on April 194 5.

at the age of years

in Stod

has to be transported by car

from Stod via Bilzen to Pratna

to be buried.

As the permission to the commenced transportation of the death-

corps was given on 12.VIII. 1946 at 12 a.m.

in the company of American Military Mission

All the concerned authorities through whose counties the death-

corps will be transported-are hereby requested not to make any

difficulties and delays to the transport.

Stidiro on 12.VIII 194 6.

X-7292

Translated from the original manuscript.

State Police station
STOD, county of STRIBRO

2 July 1946

On the 6th and 7th of September 1945 a mass exhumation of 2111 bodies took place in the Jewish cemetery of STOD. It was found out that among these victims of the "Death March", there were nine (9) U.S. Soldiers from parachute regiments, who should have been caught in the district of STOD in April 1945, killed and buried in the common grave on the 15th of April 1945.

No identification was possible, no details about the circumstances of their death.

The American soldiers were buried on the 9th September 1945 into a common grave with the consent officer commanding the U.S. military unit at STOD, Captain Moor.

This grave is located in a small wooden area outside the town of STOD, on the left hand side of the road to PILSEN. The coffins with the remains of the U.S. soldiers are placed separately from the other bodies, on the left hand side of the common grave, on the northern side.

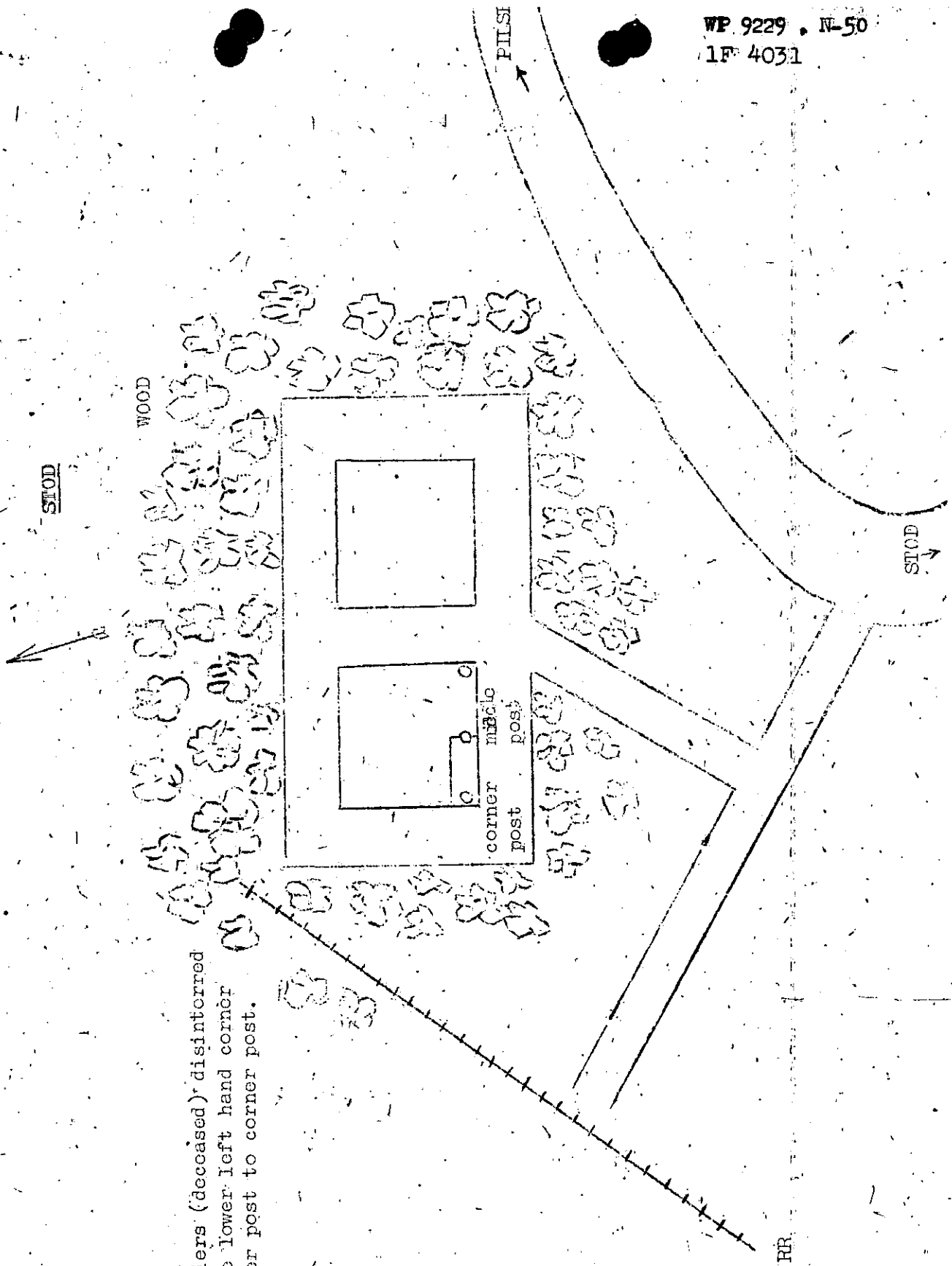
Translated by:
Ervin Lebenhart

I certify that this is a true copy.

Alton Anderson
ALTON ANDERSON 0-1339028

2nd Lt., Inf.
611 QM Gr. Reg. Co.

X-7292



Nine soldiers (deceased) disintegrated from grave lower left hand corner from center post to corner post.

X-7292

AIRMAIL

QMGMT 293

1st Ind.

GRS European

SUBJECT: Certificates of Unidentifiability of Remains
Transmittal Letter #4333

Department of the Army, OQMG, Washington 25, D. C., 13 October 1949

TO: Commanding General, American Graves Registration Command,
European Area, APO 58, c/o Postmaster, New York, New York

1. Reference is made to basic communication.
2. Subject cases have been accepted by this Office and approved as Unidentifiable.

FOR THE QUARTERMASTER GENERAL:

Incls w/d

T. H. MITK
Lt. Colonel, OQMG
Memorial Division

3146 G. S. Ewing
771 # 4333

Rice/ld
Foy
RHB

X 593 Unit - France
K-7048-
BT
AVO 20

RHB

TBU

AIRMAIL

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

RRE 293

14 September 1949
(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X - 7292, Plot KKKK
Row 8, Grave 183, USMC ST. AVOLD, France

have been reviewed and it is the opinion of this Office that sufficient evidence is not available at the present time to establish the identity of the deceased concerned. The remains concerned should be classified as unidentifiable at the present time.

2. Report of Reprocessing of remains was forwarded to your Office by Transmittal Letter No. 2041, dated 1-10-46.

3. Remarks:

T.L. 4333, 15 Sept 49
Received Plat Rice
Not identifiable from 10 Oct 49
information presently

Case reviewed by undersigned Members of the Board of Review:

Col. H.P. HENRY, O-12589

QMC

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

QMC

Major R. BERGLER, O-251736

ORD

Capt. Jack C. HAYES, O-1577297

QMC

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

QMC

1/Lt. Gaylord E. LUTZ, O-1595665

QMC

Incl #4

CMH

Interred 14 November 1949.
D-3-26 Draguignan.
HADLEY H. KEATHLEY.
Cemetery Superintendent.

Right: Open

DISINTERMENT DIRECTIVE

Left: Open

1

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
3574 00000

DATE
15 01 48
DAY MONTH YEAR

NAME		SERIAL NUMBER		RANK	ARM	DATE OF DEATH	
		UNKNOWN X-007292			1		
CEMETERY (ST AVOLD) - METZ <i>at</i>						DISPOSITION OF REMAINS	
						3585 80	
						CODE DIST. PT.	
CAUSE OF DEATH	6						
PLOT	ROW	GRAVE	COUNTRY				
4K	8	183	FRANCE				

SECTION B - CONSIGNEE AND NEXT OF KIN

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

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED
UNKNOWN X-007292		Unk	15 Apr 45	26 Apr 48
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY	
GRS	USAAF	Unk	Geo W Lowry, Embalmer NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
Air Forces Uniform	Body complete - In skeleton form - Decomposition complete

OTHER MEANS OF IDENTIFICATION

Report of Burial found with remains

MINOR DISCREPANCIES

None

REMAINS PREPARED AND PLACED IN CASKET

DATE 30 Apr 48 BY Geo W Lowry, Embalmer

CASKET SEALED BY	EMBALMER (Signature)
Geo W Lowry, Embalmer	<i>Geo W Lowry</i> Geo W Lowry, Embalmer

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
DATE 30 Apr 48 Geo W Lowry Embalmer	All markings, tags and plates verified by <i>Marshall C Dickinson</i> MARSHALL C DICKINSON, 1st Lt FA MEM. DIV.

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

Marshall C Dickinson
MARSHALL C DICKINSON, 1st Lt FA, 337 QM Bn
SIGNATURE OF GRS INSPECTOR

1 Prepare Discrepancy Report GMC Form 1194a for major discrepancies.
Consignee change per authority Hq. AGRC
Remains interred in US Military Cemetery
Draguignan, France in order to complete symmetrical layout..

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC St Avold France		TO Superintendent, Draguignan, France	
KIND OF CONVEYANCE		NAME OF CONVOYER <i>1st Lt Inf</i>	
SIGNATURE OF SHIPPER <i>[Signature]</i>	DATE 8 Nov 49	SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE 10 Nov 49

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 <i>(PAVED HIGHWAY)</i>		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>[Signature]</i>	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

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



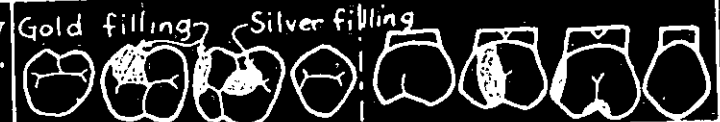
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



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

L7 was completely decayed leaving only three roots
P16 was almost completely decayed
The occlusal surfaces are worn almost flat. The incisal edges of the uppers are very much worn down
Tooth rotated almost 1/4 turn mesially. L 11 and R 12
EXIIIV and XVIII
Partial socket remaining on P 15, not completely formulated in
Medium sized, irregular, brown stained teeth.
No fillings
Teeth missing before death R 4,6,13,14,15, and L 5,6,13,14
Teeth missing after death, sockets present R 5,9,10,11 and L 1,9,10.

CHECK LIST OF UNKNOWN

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

Unknown X **7292**

Cemetery

Plot Row Grave

1. Arrived at cemetery
(hour) (date)

2. Place of death **Stod, Czechoslovakia** **WP 9229**
(name of closest town) (coordinates and letter prefix, maps)

N-50 **1/250.000**
(sheet, scale and serials used)

3. Remains recovered or disinterred by **611 GH Co**
(name and organization)

4. Evacuated to cemetery by **CIP**
(name and organization)

5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)
Clothing Markings Sizes Color Indicate unusual markings, wear, tear repairs, etc.

Item	ONLY CIVILIAN CLOTHING FOUND ON REMAINS, NO ARMY MARKINGS FOUND
Headgear	FOUND (type)
Raincoat	none
Overcoat	none
Jacket, Field	none
Jacket, Combat	none
Jackknaw	none
Sweater	one civilian
Jacket, MST	none
Shirt, khaki cotton	civilian blue with white stripes
Undershirt, wool	one civilian
Undershirt, cotton	none
Trousers, wool khaki	colored civilian
Trousers, wool	none
Belt, web	none
Drawers, wool	one (1) pair civilian
Drawers, cotton	none
Leggins, wool	none (Note unusual lacing)
Socks, cotton wool	two (2) pairs, civilian

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.

3. 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
UTD

4. Description of Remains:
 Age **UTD** Height **Est 5.6** Weight **Est 110** Description of wounds
 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 **UTD**
 (color; length, quantity, curly, wavy, straight, whorls, or definitive 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**
 (white, size, unevenness, spacing, noticeable crowns, fillings, extract)

Chin **UTD**
 (prominent, receding, pointed, dimple, double)

Circumference of head in inches **Est 19"**
 (large, small, normal) (hat band)

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

Shoulders UTD 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 Waist UTD
(quantity & extent of hair) (size of navel, appendectomy, amount)

Circumcision UTD Public hair UTD
(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 UTD
(nose, arms, legs, etc.)

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



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

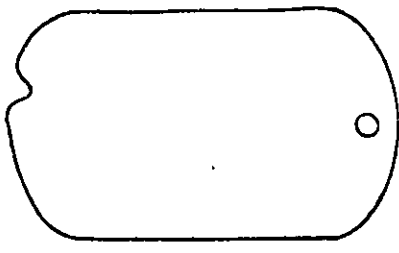
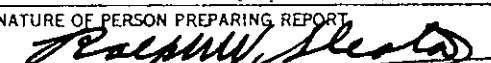

If not, explain too decomposed

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


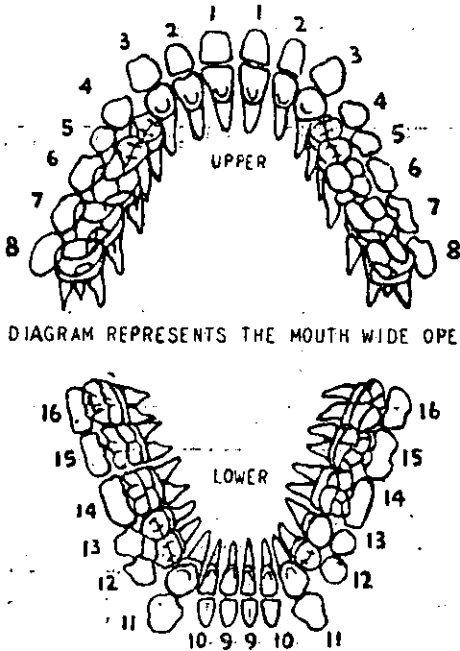

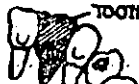



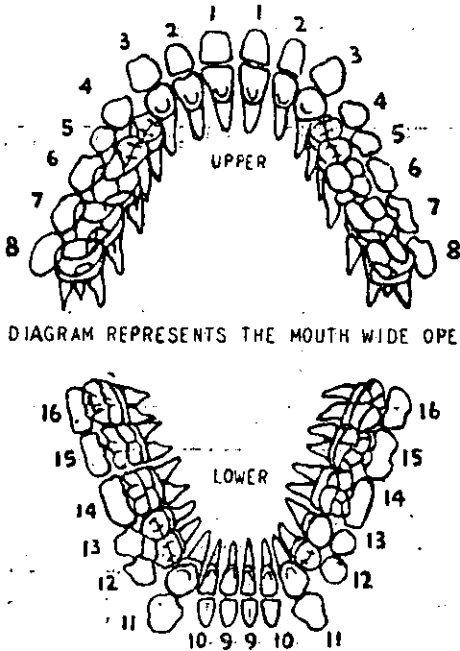

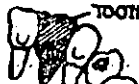



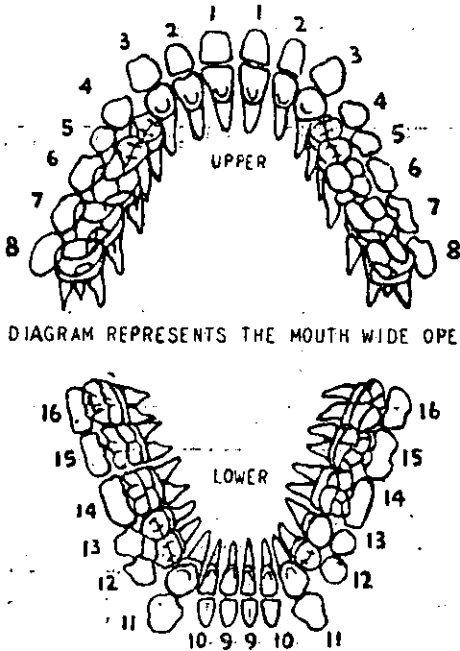

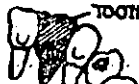


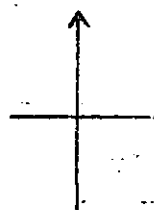
Remarks: No Army clothing found on remains. Processed weight approx. 75 lbs

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

John S. Martin
JOHN S. MARTIN
Officer's Name
WD CIV.
Rank Service
CIP (Labor Supervisor)
Organization

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 6 September 1946		
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION. NAME (Last, first, middle initial) UNKNOWN X-7292					
		GRADE UNKNOWN		ORGANIZATION UNKNOWN		SERIAL No. UNKNOWN	
		RACE unknown		RELIGION UNKNOWN		BRANCH OF SERVICE AAF	
						IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	
PLACE OF DEATH STOD, CZECHOSLOVAKIA		CAUSE OF DEATH BEATEN TO DEATH			DATE OF DEATH 15 APRIL 1945		
EMERGENCY ADDRESSEE (Name, relationship, and address) UNKNOWN							
IDENTIFICATION TAGS FOUND ON BODY (U. S. or none) NONE		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) NONE					
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 ST. AVOLD, FRANCE (Q 260584)							
DATE OF BURIAL 6 Sep. 1946	HOUR 1500	BURIED IN (Shroud, blanket, or name of other) WD CASKET		TYPE OF GRAVE MARKER WD CROSS	PLOT No. KKKK	ROW No. 8	GRAVE No. 183
WAS THIS A REBURIAL? (Yes or no) YES	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE IN WOODEN AREA OUTSIDE THE TOWN OF STOD, CZECHOSLOVAKIA WP 9229, N-50 1/250,000						
TYPE OF RELIGIOUS CEREMONY General Service	PERSON CONDUCTING BURIAL RITES Ch. Herve M. Trebaol, 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) Unknown X-7133			RANK Unk	SERIAL No. Unk	ORGANIZATION AAF	GRAVE No. 182	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) Williams, Larry K.			RANK Cpl	SERIAL No. 39857319	ORGANIZATION AAF	GRAVE No. 184	
SIGNATURE OF PERSON PREPARING REPORT  RALPH W SLEATOR, MAJOR INF, CIP			SIGNATURE OF GRS OFFICER VERIFYING REPORT  SAMUEL E PROCTOR, 2ND LT INF., CIP				
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

LEFT LITTLE FINGER	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.																
LEFT RING FINGER	HEIGHT Est 5.8	WEIGHT Est 110	COLOR OF EYES UTD														
			COLOR OF HAIR UTD														
	BIRTHMARKS, SCARS, OR TATTOOS UTD																
LEFT MIDDLE FINGER	WEAPON AND SERIAL No. NO	LAUNDRY MARKS NONE	WHERE BODY WAS BURIED OR FOUND STOD, CZECHOSLOVAKIA														
	OTHER IDENTIFICATION CLUES <p align="center">SEE ATTACHED STATEMENT</p>																
LEFT INDEX FINGER	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">FILLINGS</td> <td style="width:30%;">  SILVER FILLING GOLD FILLING </td> <td rowspan="6" style="width:40%; text-align:center; vertical-align: middle;">  UPPER LOWER DIAGRAM REPRESENTS THE MOUTH WIDE OPEN </td> </tr> <tr> <td>CAVITIES</td> <td>  CAVITY DECAYED </td> </tr> <tr> <td>MISSING TEETH</td> <td>  TOOTH MISSING </td> </tr> <tr> <td>CROWNED TEETH</td> <td>  PORCELAIN CROWN GOLD CROWN </td> </tr> <tr> <td>BRIDGE WORK</td> <td>  GOLD BRIDGE </td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>			FILLINGS	 SILVER FILLING GOLD FILLING	 UPPER LOWER DIAGRAM REPRESENTS THE MOUTH WIDE OPEN	CAVITIES	 CAVITY DECAYED	MISSING TEETH	 TOOTH MISSING	CROWNED TEETH	 PORCELAIN CROWN GOLD CROWN	BRIDGE WORK	 GOLD BRIDGE			
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CROWNED TEETH	 PORCELAIN CROWN GOLD CROWN																
BRIDGE WORK	 GOLD BRIDGE																
LEFT THUMB	FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY																
RIGHT THUMB																	
RIGHT INDEX FINGER	REMARKS: Form 11 Checklist and Form IA Tooth Chart accomplished Fingers too badly decomposed for fingerprints Est weight of remains 75 lbs																
RIGHT RING FINGER																	
RIGHT MIDDLE FINGER																	
RIGHT LITTLE FINGER																	

UNKNOWN X-7292

Believed to be middle aged adult. His teeth are well worn, slim built about 5'8 " est. Body in bad state of decomposition. Dressed in civilian clothes, trousers black brown collar, foreign style. Between hip and knee left leg patch of grey blue cloth, 6 by 3 inches. Blue shirt with grey stripes, collar detached. Brown-grey rib sweater of jersey type. Piece of blanket (fibre) GI brown about 14" long 8" wide. Pair of socks. Socks are well worn one is brown one olive drab. Another pair of socks wine color, well worn. One of them has a patch of green cloth sewed on heel. There is a tag on socks and in red leather appears to be the number 431. On the back of this tag, and on the inside of this sock is another tag with old english lettering initial H.S. or H.L.. Both socks have this marking. Pair of wool drawers, patched several places, is of foreign design. Wool under-shirt. There is also another rib shirt. On the front of this shirt is a number stenciled on button part of front of shirt. Number being 22. All clothes are of foreign make, style and design.

s/ John Aievoli
t/ JOHN AIEVOLI