

7887 GRAVES DETACHMENT

APO 757

43 unk St. Avold X-7392

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-7392, ST AVOLD

(FOC) ST AVOLD

Flora
9d BN
27 Feb 51

REPORT OF INVESTIGATION

IF 2074

AREA SEARCH Attention Registration Division "Hq. AGRC" - for use in Casualty clearance.

11 Sept 1946

AGRC Form 10 (Revised)

1 January 1946

NAME Unknown X-7392

RANK Unknown

Date

Unknown

ORGANIZATION AAF

ASN

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? 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 SEE ATTACHED LIST

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

a. Date of above burials Common Graves? YES

5. Name and Type of Cemetery (Military or Civilian) DOES NOT APPL. ISOLATED GRAVE

6. Map Coordinates of the Cemetery
a. Town Wiesho Country DOES NOT APPL.

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 Coordinates D-5701 Hill 216 at edge of forest

b. Is Sketch attached? Yes
c. Is area mined? No

9. How is the grave marked? Cross

10. If grave is marked with cross, give exact markings thereon Waldfried "Ueber den Fackelwehrr"

a. From what source was this information obtained? (Identification tags, personal effects) Records with Bürgermeister

1. By whom Unknown

1. Where are the cemetery records? Burgemeister's office

- a. What information was contained thereon? **Grave location, date of burial of airmen**
- b. Where was the information obtained? **Unknown**
- c. By whom?
12. What is the date of death? **7 Oct 1944**
- a. Give basis **Burgmeister's Records, German Burial Card**
13. What is the cause of death? **Plane crash**
- b. Give basis
14. What is the date of burial? **8 Oct 1944**
- a. Give basis **Burgmeister's records**
15. What was the place of death? **Woods near Louna Sta.** Coords **D-5704**
- b. Give basis
16. Where were the remains found? **in wreckage** Coords **D-5704**
- a. By whom? **Stewart**
- b. Is sketch attached?
17. Was a casket used? **Yes** Who furnished the casket? **City of Wiche**
- Type of casket **Wood** How marked? **UNKNOWN**
18. Who made the burial **Civilian** (Civilian, American Mil. or German Mil.)
- a. What are the names and addresses? **Stewart, Roseloberstr. 214**

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? **Yes**
- a. Give location in plane from which the bodies were removed **Unknown**
- (Tail gunner, pilot, radio, turret, etc., or front, side of plane)
- b. Near wreckage? **D-17**
20. Scene of crash must be investigated. Give complete results of investigation (if removed, state when and by whom).
- a. Type of Plane **B-17**
- b. Markings and/or name on plane **UNKNOWN**
- c. Give numbers on motors, machine guns, instruments, radios or other equipment: **None**
21. How did crash occur? **Anti-aircraft**
- Enemy Planes? **Collision?**
22. Did plane explode in the air? **No** On ground? **Yes**
23. Did plane burn in the air? **Yes** On ground? **Yes**
24. What was the direction of the flight? **East to West**
25. What was the civilian opinion regarding destination of plane? **UPONA Oil Works**

26. Had bombs been released prior to the crash? Yes.
27. Does specific time and date of crash correspond with date of death of above named deceased? Yes
28. Number of planes in formation prior to crash Unknown.
29. State precise time and date of plane crash 7 Oct 1944 (Night?) (Day?)
30. Were parachutists seen? Yes How many? Unknown Escaped? Unknown
 Prisoners? Unknown

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? This section does not apply.
 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? Unknown Burn? Unknown
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? Unknown Prisoners? Unknown

SECTION D — OTHER BRANCH (To be filled out if B & C are not applicable). Does not apply

39. Did death occur from any other means? (i. e., truck, jeep, mines, drowning, or small arms fire)
 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?
40. State the specific clues and evidence that were obtained in securing the name and facts regarding the above listed deceased

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 They were turned over to German authorities
 a. Were identification tags found at the time of death? Yes
 Where? On helmet By whom? Platoon
 Present disposition Unknown

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? Yes

Where? On bodies By whom? Stewart and police

Present disposition Unknown

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? No If so, where?

By whom? Are statements from the medical people attached? No

43. Was deceased evacuated to a German civilian hospital? No

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? Yes

Body buried and disinterred
(Burned? 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

Otto WITTE Wilhelm-Heide- Strasse 142
Stammitt Bochumstr. 214
Stammgut Wilhelm-Heide- Str. 318

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? No, Soviet Zone

(If special investigation, give case number)

52. Give Brief Narrative See attached sheet.

(Use attached, sheets if necessary)

Signature of Interpreter

Signature of Investigator /s/ Harry J. STEE

Rank

ASN

Rank 2nd Lt. INF. 0-51050

ASN

Organization

Organization A. G. R. C.

Certified true copy

Jack E. Cauley
JACK E. CAULEY
2nd Lt. Inf

NARRATIVE OF DISINTERMENT

28 August 1946
 Wiehe, Germany
 M-52 D-50 1/250,000

On reaching the town of Wiehe, Germany M-52 D-50 1/250,000 the Soviet Kommandantur led Team # 3 to hill 2/6. In a small clearing on the edge of the woods we located the mass grave of 9 Americans. Upon disinterment we found that 7 bodies had been placed in 6 boxes with one box containing 2 bodies. 2 other bodies were buried in rubber life rafts.

Of the 9 deceased 7 were identified:

1 F 2067	POZGAY, LOUIS F.	32173379
1 F 2068	LANDEN, ROBERT H.	37683922
1 F 2069	DEAN, ROBERT L.	T-125370
1 F 2070	SNODGRASS, BL.	0-776818

The two bodies in one box could not be separated. One evacuation number has been assigned the two bodies: 1 F 2072

After closing the grave, team 3 proceeded into the town of Wiehe to the civilian Cemetery. One single grave was disinterred and the body of one American was removed.

The cemetery records stated the flyer's name as THOMAS LUELL, 0-712295. (See attached extract cemetery records.) This man is identified inasmuch as his was the sole foreign grave in the cemetery and cemetery register contained his name and number.

A man named STEWARDT, Roslebenerstrasse 214, previously testified (see form 10) that he found dog-tags on deceased resolved the burgermeister's records from these dog-tags.

Jack E. Cauley
 JACK E. CAULEY
 2nd Lt. Inf.
 Disinterring Officer

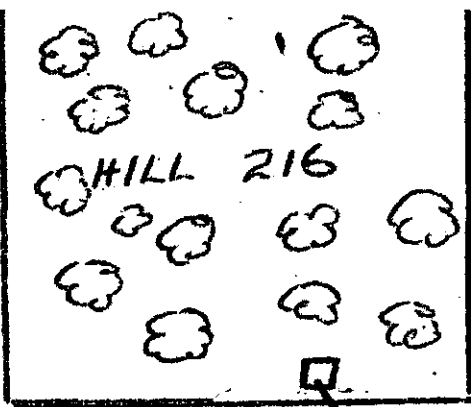
NARRATIVE OF INVESTIGATION

	1. List of crew members from MACR	No K-387
1* Pilot	Williams, George, B. 2nd Lt.	0-827108
2.*Co-Pilot	Dean, Robert L. F/O	T-125370
3. Navigator	Weickel, Andrew H. 2nd Lt.	0-2061088
4. Bombardier	Snodgrass, Raymond L. 2nd Lt.	0-776808
5. Radio Oper.	Perrin, George P. S/Sgt.	13047699
6. B.T.Gunner	Gimer, Melvin E. Sgt.	19202112
7. T.T.Gunner	McKay, Hubert H. Sgt.	34686437
8* Tail Gunner	Landen, Robert H. Sgt.	37683922
9. R/W. Gunner	Posgay, Louis F. Sgt.	35173376

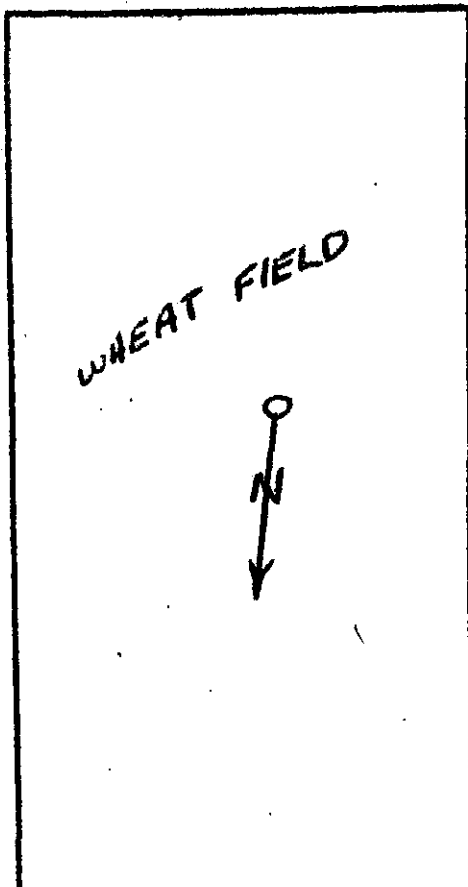
* Identified by the German Civil authorities.

2. Personal effects and available papers were forwarded through German civilian channels.

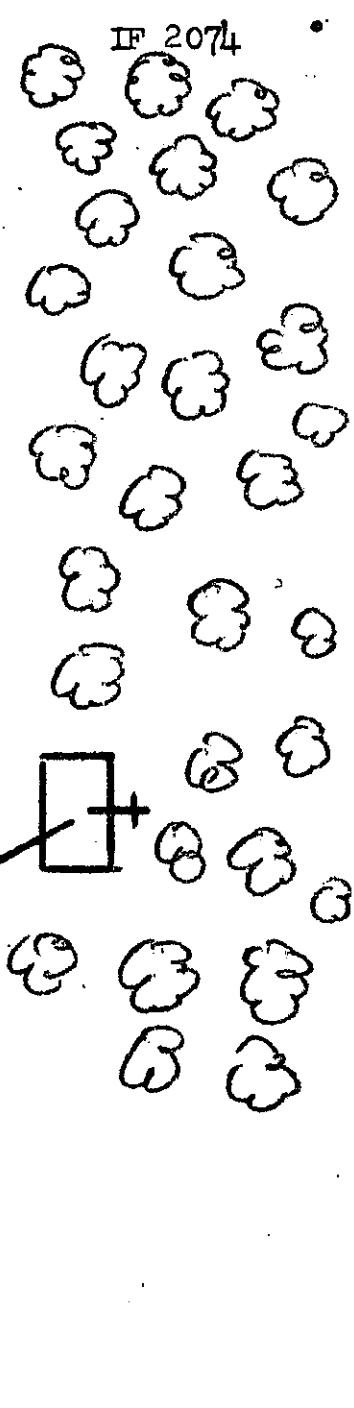
3. A German listing of personal effects that were forwarded is attached. No other information is available at the grave sight from surface observation. The plane crashed and the bodies were badly damaged. The civilians identified Landen and Dean and placed four other bodies in caskets. The three remaining parts of bodies were placed portionately in the six caskets. There are it is believed, nine bodies in six caskets.



OBSERVATION POST



TO WIEHE



GRAVE OF 9 AMERICAN BODIES

HILL 216
 WIEHE, GERMANY
 MSZ. 050 1/250,000

HEADQUARTERS
 AMERICAN GRAVES REGISTRATION COMMAND
 EUROPEAN AREA
 APO 58 US ARMY

RRE 293 273 unk France St Avold 11 August 1949
 (Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X - 7392, Plot KKKK
 Row 12, Grave 300, 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. 4202, dated 10-8-49.

3. Remarks:

Case reviewed by undersigned Members of the Board of Review:

[Signature]
 Col. H.P. HENRY, O-12589 QMC Lt. Col. E.D. MULVANY, O-359598 QMC

[Signature]
 Major R. BERGER, O-251736 ORD Capt. Jack C. HAYES, O-157297 QMC

Capt. E.F. PRICE, Jr. O-1588236 QMC 1/Lt. Edward E. STOUT, O-1594512 CE

Received
 Not identifiable from
 [Signature]
 T.R. # 4231, 16 Aug 49

Incl #11

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

RRE 314.6

10 August 1949

SUBJECT: Identification Check Lists
Transmittal Letter #4202

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

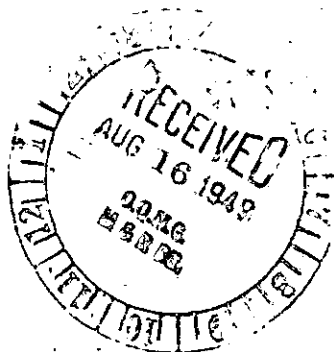
Inclosed herewith for your files are two (2) copies of
Identification Check Lists after disinterment in the US Military
Cemetery of St. Avold, France

Unknown X- 665	St.Avold	Plot	EE	Row 3	Grave 65
Unknown X-7392	St.Avold	Plot	KKKK	Row 12	Grave 300

FOR THE COMMANDING GENERAL:

2 Incls:
a/s

GEORGE L. FREEMAN
1/Lt QMC
Actg Asst Adj Gen



X 293 -
" X-665
" X-7392
" ()

AIRMAIL

AIR MAIL

DEPT OF THE ARMY, GWMG, 2nd & T Sts, SW WASH DC

COMMANDING GENERAL
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58, C/O POSTMASTER.
NEW YORK, NEW YORK

AIR MAIL
IMMEDIATE

IDENTIFICATION OF WORLD WAR II DECEASED

4. IN VIEW OF THE ABOVE IT IS FURTHER REQUESTED THAT THESE CASES BE REINVESTIGATED, AND IF INDIVIDUAL IDENTIFICATION OF LT. WILLIAMS AND SGT. MCKAY CAN BE ESTABLISHED, FIELD BOARD FINDINGS BE FORWARDED THIS OFFICE BY AIR MAIL.

FOR THE ACTING THE QUARTERMASTER GENERAL:

cc: Adm Sect
GARDNER/pej
Foy
REB

REB

NJS

2.

QMGMT 293-UNK FRANCE (MISC)
ST AVOLD X-7516 A&B

21 JULY 49 LT COL QMC MEM DIV

AIRMAIL

1993 War B. Hornum X-7516 (MISC) (REB)

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AIRMAIL

AIR MAIL

DEPT OF THE ARMY, OWMG, 2nd & T Sts, SW WASH DC

COMMANDING GENERAL
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58, C/O POSTMASTER
NEW YORK, NEW YORK

AIR MAIL
IMMEDIATE

IDENTIFICATION OF WORLD WAR II DECEASED

1. RETURNED HERewith ARE CORRECTED REPORTS OF BURIAL FOR UNKNOWNNS X-7516 A&B, ST. AVOLD, FRANCE, IDENTIFIED BY: YOUR HEADQUARTERS AS A GROUP OF 2/LT. GEORGE B. WILLIAMS. O-827108 AND SGT. HUBERT H. McKAY, 34686437.

2. THIS GROUP IDENTIFICATION IS NOT ACCEPTABLE TO THIS OFFICE FOR REASONS OUTLINED BELOW:

a. REPROCESSED REPORTS FOR X-7516 INDICATES THAT SEGREGATION WAS ACCOMPLISHED AND THE UNKNOWNNS REDESIGNATED X-7516 A&B. TEETH FOUND IN THE MASS BURIAL WERE ALSO SEGREGATED INTO TOOTH CHARTS ONE AND TWO.

b. ESTIMATED HEIGHT OF X-7516 A (5'11 5/8") COMPARES FAVORABLY WITH THE HEIGHT OF 2/LT. WILLIAMS, (5'10"), AND IS NEGATIVE WITH THE HEIGHT OF SGT. McKAY. TOOTH CHART #1 IS IN EXCELLENT AGREEMENT WITH DENTAL RECORDS FOR LT. WILLIAMS.

c. ESTIMATED HEIGHT OF X-7516 B (5'8 1/2") COMPARES FAVORABLY WITH THE HEIGHT OF SGT. McKAY, (5'6") AND IS NEGATIVE WITH THE HEIGHT OF LT. WILLIAMS. TOOTH CHART #2 COMPARES FAVORABLY WITH DENTAL RECORDS FOR SGT. McKAY.

3. CIL REPROCESSED REPORT FOR X-7392, REFERRED TO IN NARRATIVE OF E.O. 1713, DATED 5 MAY 1949, HAS NOT ~~BEEN~~ RECEIVED BY THIS OFFICE. REQUEST SAME BE FORWARDED BY AIR MAIL.

QMGMT 293-UNK FRANCE (MISC)
ST AVOLD X-7516 A&B

T. H. METZ
21 JULY 49 LT COL QMC MEM DIV

AIR MAIL

AIRMAIL

DEPARTMENT OF THE ARMY
////////////////////

OSKNT 298
McKay, Hubert H.
34585437

~~XXXXXXXXXXXXXXXXXXXX~~
O-227108

4 February 1949

SUBJECT: Identification of Unknown Deceased

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

1. Reference is made to letters, your Headquarters, dated 17 December 1948, in reply to OCMG Form 571 for 2nd Lt. George E. Williams, O-227108 and Sgt. Hubert H. McKay, 34585437 with reference to associations with Unknowns X-7393 and X-7515, St. Avold, France.

2. It is requested that the remains of X-7393 and X-7515 be reprocessed simultaneously for the purpose of segregation into two remains. These remains were apparently segregated as to represent three bodies, whereas there are only two unaccounted for crew members of A/C 44-10886. It is noted that of the two tooth charts submitted for X-7515 (mass burial of George E. Williams and X-7515), Chart #1 compares very favorably with dental records for Lt. Williams and Chart #2 with those for Sgt. McKay; X-7393 indicates no teeth were recovered, however, reprocessed report has not been received.

3. In view of numerous MOK inquiries regarding these deceased, it is further requested that these cases be reinvestigated and if identification can be established, Field Board Findings submitted to this Office by Air Mail.

FOR THE QUARTERMASTER GENERAL:

E. N. KENZ
Lt. Colonel, GAC
Memorial Division

Rice:dal

X-293 Work 7 March 7 March X-7392 Lt. Arnold

REB

NJS

DEPARTMENT OF THE ARMY



MCNT 297
McKay, Hubert H.
34586437

~~George B. Williams~~
O-327198

4 February 1949

SUBJECT: Identification of Unknown Deceased

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

1. Reference is made to letters, your Headquarters, dated 17 December 1948, in reply to OCMG Form 371 for 2nd Lt. George B. Williams, O-327198 and Sgt. Hubert H. McKay, 34586437 with reference to associations with Unknowns X-7392 and X-7516, St. Avold, France.

2. It is requested that the remains of X-7392 and X-7516 be reprocessed simultaneously for the purpose of segregation into two remains. These remains were apparently segregated as to represent three bodies, whereas there are only two unaccounted for crew members of A/C #42-39886. It is noted that of the two teeth charts submitted for X-7516 (mass burial of George B. Williams and X-7516), Chart #1 compares very favorably with dental records for Lt. Williams and Chart #2 with those for Sgt. McKay; X-7392 indicates no teeth were recovered, however, reprocessed report has not been received.

3. In view of numerous MOK inquiries regarding these deceased, it is further requested that these cases be reinvestigated and if identification can be established, Field Board Findings submitted to this Office by Air Mail.

FOR THE QUARTERMASTER GENERAL:

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

Rice:del

X-7392 Mark 7
X-7516
X-7392
H. Green

REB

NJS

1

This Grave ~~previously~~ occupied by: UNKNOWN X-003435
USMC ST AVOLD, FRANCE
Plot A, Row 24 Grave 28
Date reburied: 5 Oct 48 Date disinterred: 5 October 49

DISINTERMENT DIRECTIVE

SECTION A - NAME AND BURIAL LOCATION OF DECEASED: W. R. SWART
CAPT QMC DIRECTIVE NUMBER: 3574 00000 DATE: 15 01 48
DAY MONTH YEAR

NAME: UNKNOWN X-007392 SERIAL NUMBER: UNKNOWN X-007392 RANK: 1 ARM: 1 DATE OF DEATH: 7 Oct 44
CEMETERY: ST AVOLD - METZ DISPOSITION OF REMAINS: 0 3503 80
PLOT: 4K 12 ROW: 300 GRAVE: FRANCE CAUSE OF DEATH: 6
CODE DIST. PT.

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: UNKNOWN X- 007392 SERIAL NUMBER: Unk RANK: Unk DATE OF DEATH: 7 Oct 44 DATE DISTINTERRED: 27 Apr 48
IDENTIFICATION TAG ON: REMAINS MARKER GRS ORGANIZATION: USAAF RELIGION: Unk IDENTIFICATION VERIFIED BY: George W Lowry, Embalmer
NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: Mattress cover CONDITION OF REMAINS: Skull and mandible missing. Right and left humerus, left ulna and radius missing. Right and left scapula, right ulna and right femur fractured. Final stage of decomposition. Disarticulated.
OTHER MEANS OF IDENTIFICATION: Report of Burial found with remains

MINOR DISCREPANCIES: None

REMAINS PREPARED AND PLACED IN CASKET: DATE: 3 May 48 BY: George W Lowry, Embalmer

CASKET SEALED BY: George W Lowry, Embalmer EMBALMER (Signature): George W Lowry, Embalmer

CASKET BOXED AND MARKED: DATE: 3 May 48 BY: George W Lowry, Embalmer SIGNATURE ADDRESS VERIFIED BY: All markings, tags and plates verified by Marshall C Dickinson, 1st Lt FA

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

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

FEDERAL BUREAU OF INVESTIGATION
 FEDERAL DIVISION
 MAY 2 3 32 PM '79
 REPAIR/RECORDS BRANCH

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE (BY ADMINISTRATIVE ORDER)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER ST. VAUGHN EVANCE	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

FROM K 15 300 EVANCE		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

AGRC
FORM NO. LL
REVISED 5 JANUARY 1946

CHECK LIST OF UNIFORMS

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

Unknown X - 7392

Cemetery St. Avoird, France. (Q-260. 584)

Plot _____ Row _____ Grave _____

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

2. Place of death Woods near Lossa Str. D-5701
(name of closest town) (coordinates and letter prefix, maps)

(sheet, scale and serials used)

3. Remains recovered or disinterred by 95 QM Bn (M)
(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 Markings Sizes Color wear, tear repairs, etc. Indicate unusual markings

Item	Clothing Markings	Sizes	Color wear, tear repairs, etc.	Indicate unusual markings
Headgear	None			
	(type)			
Raincoat	None			
Overcoat	None			
Jacket, Field	None			
Jacket, Combat	None			
Wackinaw	None			
Sweater	None			
Jacket, HBT	None			
Shirt, wool OD	None			
Undershirt, wool	None			
Undershirt, Cotton	None			
Trousers, HBT	None			
Trousers, wool OD	None			
Belt, web	None			
Drawers, wool	Remnants of.			
Drawers, Cotton	None			
Leggins, wool	None			(Note unusual lacing)
Socks, wool wool	Remnant of 1 sock.			

Shoes (Type) None
Overshoes None
Web Equipment (Type) None
Other Item None

Other item None
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 watch None

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

UTD

Description of Remains:

Age UTD Est. Height 5'8" Est. Weight 155 Lbs. 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, pecks, 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 UTD
(white, size, unevenness, spacing, noticeable crowns, fillings, extract)

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

Jaw UTD Circumference of head in inches UTD
(large, small, small) (hat band)

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

Shoulders UTD Arms UTD
(length, muscular, color)

UTD
(extent and quantity of hair)

Hands UTD

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

UTD
(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 Public hair UTD
(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 out parts of body not received at cemetery:



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

If not, explain Fingers decomposed.

11. Has tooth chart been prepared No No teeth.
(yes-no) (yes-no)

12. Remarks: Est. weight of remains recovered: 22 lbs.

Body badly decomposed; only 2 remnants of clothing; head and most of upper torso not recovered.

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 Civilian Lab. Supervisor
Rank

IDENTIFICATION DATA

E.O. 1713

1. REMAINS OF UNKNOWN X-7392			2. DATE OF REPORT 5 MAY 49		
3. NAME OF CEMETERY ST. AVOLD	4. PLOT 4K	5. ROW 12	6. GRAVE 300	7. DATE OF	
				DISINTERMENT —	REINTERMENT —

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT OF REMAINS ROCESSED REMAINS 13 LBS.	9. ESTIMATED HEIGHT 6'2"	10. COLOR OF HAIR MED. BROWN	11. RACE —
--	-----------------------------	---------------------------------	---------------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS
TWO EMBOSSED PLATES MARKED:
UNKNOWN X-7392

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

14. WAS BODY BURNED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT? —
---	----------------------

15. WAS BODY MANGLED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT EXTENT? VERY BADLY
--	-------------------------------

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS
NONE FOUND!

17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND. SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

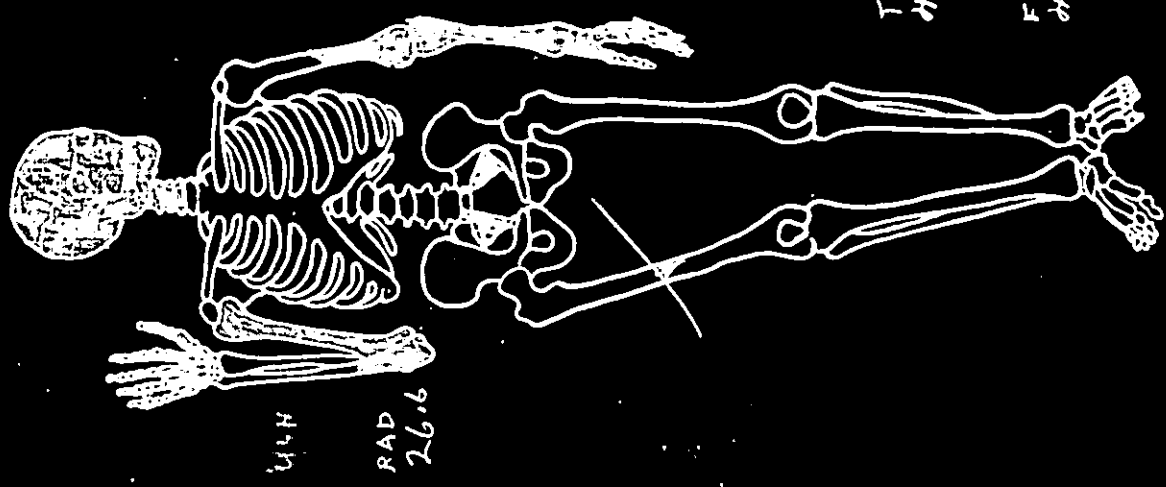
REMAINS RECEIVED IN SKELETAL FORM IN A REPATRIATION TYPE CASKET. NO TEETH FOUND. NO CLOTHING. REMAINS PREVIOUSLY PROCESSED BY REPATRIATION. NO EVIDENCE OF ANY HEALED FRACTURES OR AMPUTATIONS. NO I.D. TAGS FOUND.

Thomas

X-7392

E.O. 1713

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 _____ 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

Thomas W. Turner

IDENTIFICATION DATA

F.O. 1713

1. REMAINS OF UNKNOWN X-7392			2. DATE OF REPORT 5 MAY 49		
3. NAME OF CEMETERY ST. AVOLD	4. PLOT 4K	5. ROW 12	6. GRAVE 300	7. DATE OF	
				DISINTERMENT —	REINTERMENT —

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT OF REMAINS 13 LBS.	9. ESTIMATED HEIGHT 6'2"	10. COLOR OF HAIR MED. BROWN	11. RACE —
---	-----------------------------	---------------------------------	---------------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS
TWO EMBOSSED PLATES MARKED:
UNKNOWN X-7392

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

14. WAS BODY BURNED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT? —
---	----------------------

15. WAS BODY MANGLED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT EXTENT? VERY BADLY
--	-------------------------------

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATION
NONE FOUND!

17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)
REMAINS RECEIVED IN SKELETAL FORM IN A REPATRIATION TYPE CASKET. NO TEETH FOUND. NO CLOTHING. REMAINS PREVIOUSLY PROCESSED BY REPATRIATION. NO EVIDENCE OF ANY HEALED FRACTURES OR AMPUTATIONS. NO I.D. TAGS FOUND.

4202

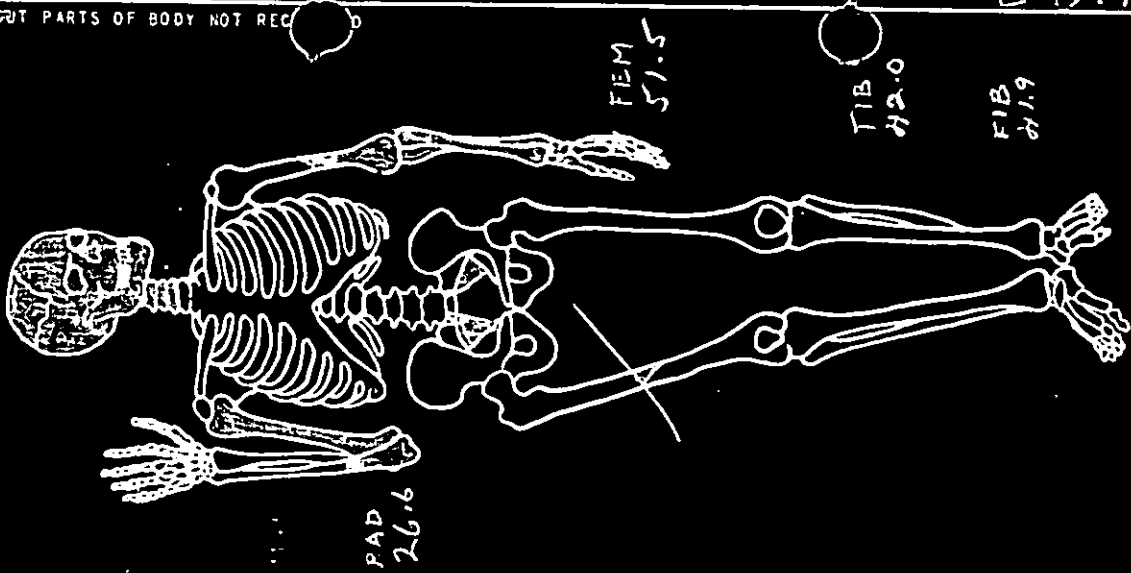
4202

Thomas W. Turner

X-7392

E.O. 1713

19. BLACK-OUT PARTS OF BODY NOT REC



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

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

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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

12.

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

SIGNATURE

Thomas W. Turner

[Signature]

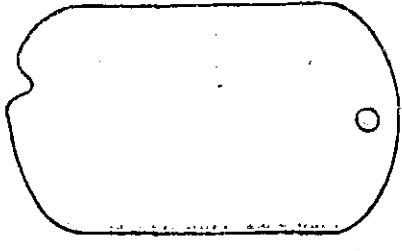
R7
map

RESTRICTED

IF-2074

#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 12 September 1946
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Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.		
	NAME (Last, first, middle initial)	SERIAL No.	
	Unknown X-7392	Unknown	
	GRADE	ORGANIZATION	BRANCH OF SERVICE
	Unknown	Unknown	AAF
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	
White	Unknown		

PLACE OF DEATH Woods near Lossa Str. D-5701	CAUSE OF DEATH Plane Crash	DATE OF DEATH 7 October 1944
---	-------------------------------	---------------------------------

EMERGENCY ADDRESSEE (Name, relationship, and address)

Unknown

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or 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)	None
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 - 260. 584)

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
12 September 1946	1500	Casket	Temp. wood. cross	KKKK	12	300

WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE	PLOT No.	ROW No.	GRAVE No.
Yes	Hill 216 at edge of forest, Wiede, Germany M 52 050 1/250.000	Isolated burial		

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
General Service	CH. Ch.R. Williams, 1st Lt	
IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)	One copy WD QMC Form 1042 Report of Interment placed in burial bottle and buried with remains.
No	Yes-Embossed plate	


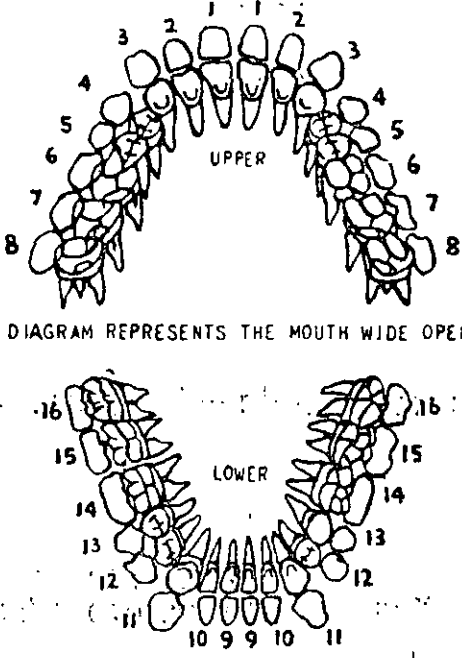




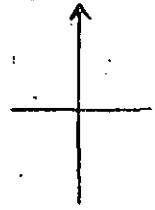
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
Huastes, Leonard M.	Unk	39167448	A.A.F.	299
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
END OF ROW				

SIGNATURE OF PERSON PREPARING REPORT Ralph W. Sleater Major Inf. C.I.P.	SIGNATURE OF GRS OFFICER VERIFYING REPORT Samuel E. Proctor Jr. 2nd Lt. Inf. C.I.P.
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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.

36 12-300

RESTRICTED

	Section UNIDENTIFIED REMAINS.		
LEFT LITTLE FINGER	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. 155 Lbs.	COLOR OF EYES UTD
LEFT MIDDLE FINGER			COLOR OF HAIR UTD
LEFT INDEX FINGER	WEAPON AND SERIAL No. None		BIRTHMARKS, SCARS, OR TATTOOS UTD
LEFT THUMB	LAUNDRY MARKS None		WHERE BODY WAS BURIED OR FOUND Hill 216 at edge of forest, Wiehe, Germany.
OTHER IDENTIFICATION CLUES None			
LEFT THUMB	FILLINGS  SILVER FILLING GOLD FILLING		 <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
RIGHT THUMB	CAVITIES  CAVITY DECAYED		
RIGHT INDEX FINGER	MISSING TEETH  TOOTH MISSING		
RIGHT MIDDLE FINGER	CROWNED TEETH  PORCELAIN CROWN GOLD CROWN		
RIGHT RING FINGER	BRIDGE WORK  GOLD BRIDGE		
RIGHT LITTLE FINGER			
FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY <div style="text-align: right; margin-right: 50px;">  </div>			
REMARKS: Form 11 Check List of Unknowns accomplished. No Tooth Chart because of missing portions. Fingers too decomposed for Fingerprints. Est. weight of remains recovered: 90 Lbs.			