

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 UNK. CASTELFIORENTINO, X-214

SUBJECT

Interred 2 APR 1949

USMC RENCE

DISINTERMENT DIRECTIVE

Walter E. Thomas  
Capt. CMP. Cemetery Superintendent

SECTION A - NAME AND BURIAL LOCATION OF DECEASED	DIRECTIVE NUMBER 5217 00064	DATE 15 06 48 DAY MONTH YEAR
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NAME UNKNOWNX-000214	SERIAL NUMBER 0	RANK 0	ARM 0	DATE OF DEATH DAY MONTH YEAR
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CEMETERY CASTELFIORENTINO	DISPOSITION OF REMAINS 0 5201 80 CODE DIST. PT
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PLOT 20 94	ROW 4573	GRAVE ITALY	COUNTRY	CAUSE OF DEATH 6
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SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE FLORENCE, ITALY	NAME AND ADDRESS OF NEXT OF KIN (BY ADMINISTRATIVE DECISION)
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SECTION C - DISINTERMENT AND IDENTIFICATION

NAME UNKNOWN	SERIAL NUMBER X-214	RANK UNK	DATE OF DEATH	DATE DISINTERRED 14 SEPT 48
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	ORGANIZATION UNKNOWN	RELIGION UNK	IDENTIFICATION VERIFIED BY K W FISHER NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL SHROUD	CONDITION OF REMAINS SKELETAL
OTHER MEANS OF IDENTIFICATION BURIAL REPORT	RECEIVED BRANCH
MINOR DISCREPANCIES NONE	

REMAINS PREPARED AND PLACED IN CASKET DATE 29 SEPTEMBER 1948	BY HOMER J. LESLIE (EMBALMER)
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CASKET SEALED BY HOMER J. LESLIE (EMBALMER)	EMBALMER (Signature) <i>Homer J. Leslie</i>
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CASKET BOXED AND MARKED 29 SEPT. 1948 DATE BY MAURICE J. VALENTINO (CLERK RECORDER)	SHIPPING ADDRESS VERIFIED BY FRED H. BOERNER W/O USA
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I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.

FRED H. BOERNER W/O USA  
SIGNATURE OF GRS INSPECTOR

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

# RECORD OF CUSTODIAL TRANSFER

## 1 SHIPPED

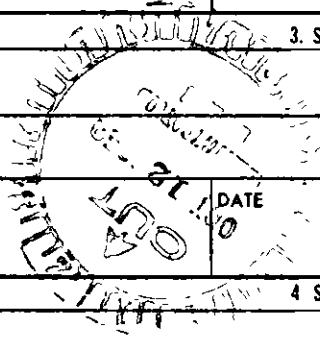
FROM USMC CASTELFIORENTINO ITALY		TO LEGHORN PORT MORGUE	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER L CROCKER 2 LT QMC	
SIGNATURE OF SHIPPER N R HALEY <i>[Signature]</i>	DATE 16 Sept 48	SIGNATURE OF RECEIVER <i>[Signature]</i> KENNETH D. MC FEELY 1ST LT TC	DATE 16 SEPT 1948

## 2. SHIPPED

FROM LEGHORN PORT MORGUE		TO USMC FLORENCE ITALY	
KIND OF CONVEYANCE RAIL		NAME OF CONVOYER CPL. ROBERT S. HUFF	
SIGNATURE OF SHIPPER KENNETH D. MC FEELY, 1ST LT. T.C.	DATE 11 MARCH 1949	SIGNATURE OF RECEIVER <i>[Signature]</i> JESS H. CARNAL, 1ST LT	DATE 11 MAR 49

## 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

DEPARTMENT OF THE ARMY

~~XXXXXXXXXXXXXXXXXXXX~~

QMGOD 332.3

Kansas City

21 June 1948

SUBJECT: Unidentified Decedents

TO: Commanding Officer  
Kansas City Quartermaster Depot  
601 Hardesty Avenue  
Kansas City 1, Missouri  
ATTENTION: Effects Quartermaster

1. Reference is made to recent correspondence from your Bureau regarding personal effects of the following Unknown decedents:

Unknown X-200  
Unknown X-214-216  
Unknown X-217  
Unknown X-229

2. The identity of the above listed unknowns, interred in USMC Castelfiorentino, Italy, has not been established. When identification has been established, your Bureau will be advised.

BY COMMAND OF MAJOR GENERAL LANXIN:

1 Incl:  
KC correspondence a/s

GUY B. KEGLEY  
Major, QMC  
Field Service Division

DEPARTMENT OF THE ARMY  
KANSAS CITY QUARTERMASTER DEPOT  
ARMY EFFECTS BUREAU  
601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

IN REPLY REFER TO QMDKG 600957

HOC/ELR/mjo'o

24 May 1948

DATE

SUBJECT: Disposal of Personal Effects

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

1. Personal effects found on remains interred as Unknown X -214-216

Plot Unk, Row Unk, Grave Unk, USMC Castel Fiorentino, Italy have been held at this Bureau as of 18 September 1948

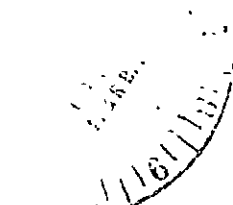
2. Bureau inspection of the effects has been made and the following description furnished for reference:

**1 Combat Infantry badge**

3. It is requested that this Bureau be informed whether or not the above listed Unknown decedent has been officially identified.

FOR THE COMMANDING OFFICER:

H. O. CALDWELL  
Effects Quartermaster



X  
Italy  
X 2/16  
Italy  
(Castel Fiorentino)

FILE UNDER NO. 293 - Unknown Italy X- 214 (Castelfinrentino)

I N D E X S H E E T

S Y N O P S I S

~~1/1/47~~ 1st Ed.

23 May 1947

FROM: O L G  
TO: CO, Kansas City QMD, Mo.  
ATTN: Effects QM  
  
SUBJ: Identification of Unknown Deceased

DOCUMENT FILED UNDER NO. 293 - Unknown Italy Misc (Castelfinrentino) (X-214 thru 216)

rtb

## IDENTIFICATION DATA

1. REMAINS OF UNKNOWN <b>X-214</b>				2. DATE OF REPORT <b>27 September 48</b>	
3. NAME OF CEMETERY <b>US Military Cemetery Castelfiorentino, Italy</b>		4. PLOT <b>2G</b>	5. ROW <b>94</b>	6. GRAVE <b>4573</b>	7. DATE OF DISINTERMENT REINTERMENT

### PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT <b>Impossible</b>	9. ESTIMATED HEIGHT <b>5' 3 5/8"</b>	10. COLOR OF HAIR <b>Unk.</b>	11. RACE <b>White</b>
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

**NONE**

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

**NONE**

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

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

**Exostosis, without fracture of the R and L Femurs (lesser trochanters),  
R tibia (articular process for fibula), and the L talus.**

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)

**NONE**

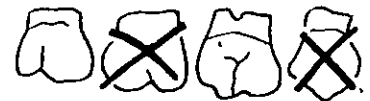
18.

TOOTH CHART

**MISSING TEETH:** ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED THUS:

TOP VIEW

SIDE VIEW



**CROWNED TEETH:** BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:

Gold Crown, Porcelain Crown



**BRIDGE WORK:** BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:

Gold Bridge



**FILLINGS:** DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:

Gold Filling, Silver Filling



**CARIES (Cavities):** OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:

Cavity, Decayed



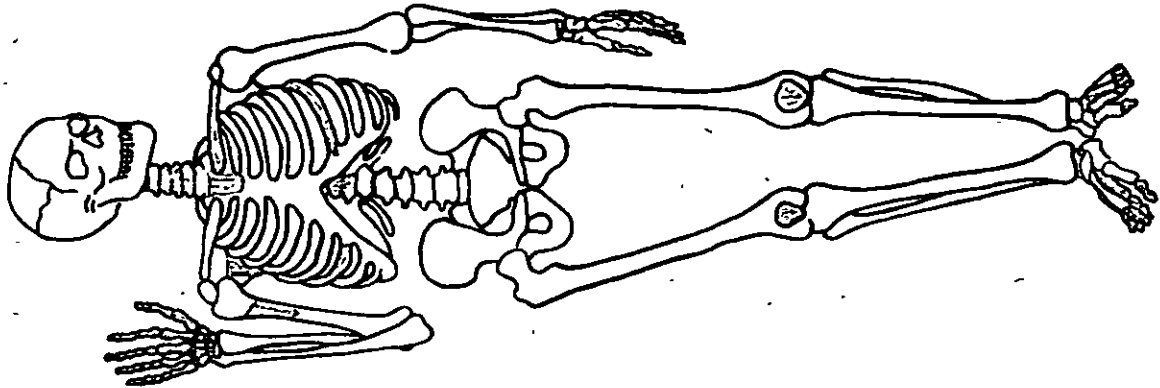
RIGHT								LEFT										
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8			
	R F	R O	R O	R om	X	X	X	X	X	X	X	X	R od	X	R O	R ofa		
Side Views	[Side view drawings of teeth 8-R to 8-L]																Side Views	
Top Views	[Top view drawings of teeth 8-R to 8-L]																UPPER	
Side Views	[Side view drawings of teeth 8-R to 8-L]																LOWER	
	X	R O	R F	X	X	X	X	X	X	X	X	X		R F	R omf	R O	R F	
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16		

**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."

**Tooth 8-L is not quite fully developed.  
The fillings (except for tooth 7-L) are smooth and even.**



19. BLACK OUT PARTS OF BODY NOT RE RED



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

In the opinion of the undersigned, the representative parts of a human remains graphically represented on par 19 are those of one and the same individual.

/s/ Dr. Alexander Tardy  
/t/ DR ALEXANDER TARDY  
M.D., D.A. (Antropology)  
G.S.D., O.S.D.

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

JOHN L. JACKS Jr. Capt QMC  
9107 TSU-QMC, AGRS/MZ

SIGNATURE

/s/ John L. Jacks.

HEADQUARTERS  
9107 TSU - QMC  
AMERICAN GRAVES REGISTRATION SERVICE  
MEDICAL ZONE  
APO 794 US ARMY

CENTRAL IDENTIFICATION POINT

REPORT OF INVESTIGATION

Paragraphs 1-17 and 19-21, Identification Data QMC 1044 and 1044b  
Paragraph 18 - Identification Dental Chart

C.I.P. Case No. L-295  
Date of Investigation 27 Sept 1948  
Unknown American X- 214  
Am. Mil. Com. Castelfiofentino Italy: Plot 2G Row 94 Grave 4573  
Place of Death Near Grossano, Italy Date of Death Unk/  
Map Reference Q-916967 Sheet 98 Map of Italy 1/100,000  
Other American Dead Found in Same Area Unknown X-215 and X-216  
Cause of Death Unknown

22. Description of Remains

Skeletal state.

(If the remains have not been decomposed, attach to this form  
QMC Form 1042 completely filled out to physical characteristics).

3. Skeletal Data

HEAD Skull complete

TOOTH CHART Accomplished.

TRUNK Complete except for: piece of sternum, L clavicle; portion of R scapula; 2 ribs; 5 cervical, 4 dorsal and 1 lumbar vertebrae.

UPPER EXTREMITIES. (Give measurements of long bones).

R Humerus	<u>Shattered</u>	L Humerus	<u>32.2</u>
R Ulna	<u>26.2</u>	L Ulna	<u>25.5</u>
R Radius	<u>23.6</u>	L Radius	<u>Styloid process missing</u>
Carpels, Metacarpels, Phalanges	<u>Partly present.</u>		

UPPER EXTREMITIES. (Give measurements of long bones).

R Femur	<u>44.2</u>	L Femur	<u>44.2</u>
R Tibia	<u>35.5</u>	L Tibia	<u>35.5</u>
R Fibula	<u>35.0</u>	L Fibula	<u>35.0</u>

Calcanea, Tarsals, Patellae, Metatarsals, Phalanges

Partly present, Both patellae missing

24. AGE ESTIMATED AT Over 20 years

BASED ON A better estimation could not be made because of abnormal closure of the epiphyses of the long bones and of sutures of the skull.

25. SUMMARY OF FINDINGS

Age estimation - Over 20 years  
Tooth chart - Accomplished.  
Height estimation - 5' 3 5/8"

26. RECOMMENDATIONS

PROCESSED BY:

EVERT A. JOHNSON  
Pfc. 17173881  
CIP Technician

/s/ Dr. Alexander Tardy  
/t/ DR. ALEXANDER TARDY  
M.D., D.A. (Antropology)  
G.S.D., O.S.D.

/s/ John L. Jacks  
(Signature of Officer)

/t/ JOHN L. JACKS  
Capt QMC  
CIP Officer

C E R T I F I C A T E

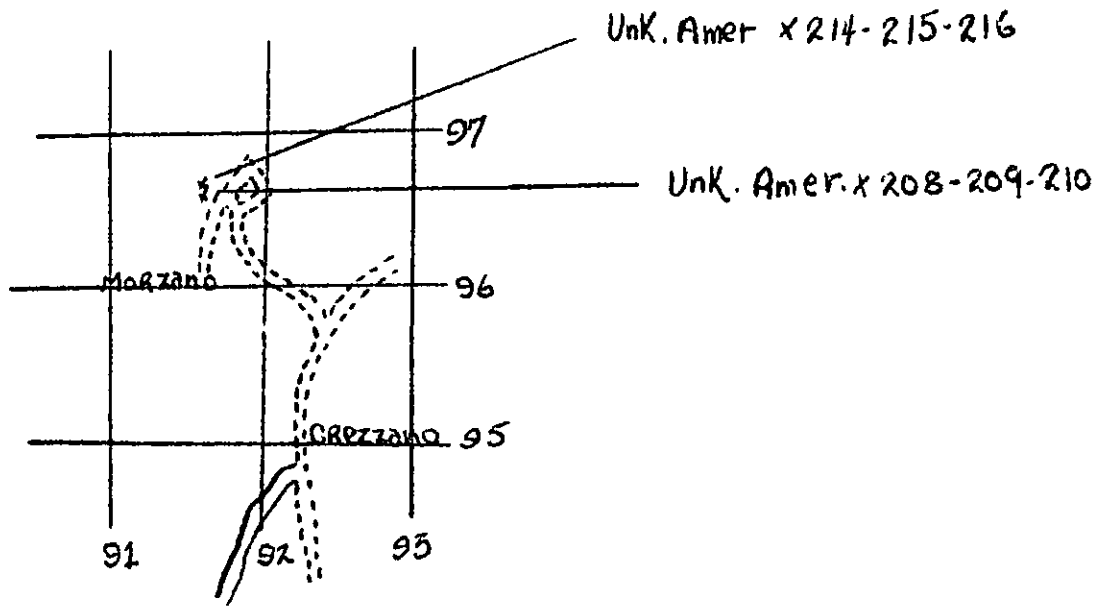
22 August 1945

This is to certify that I have this date examined the collection of human bones found in a fox-hole at coordinates Q916967, Map of Italy, 1/100,000, Sheet 98, by the 1st Platoon, 602 QM (GR) Co. The collection comprises the skeletal frame of three (3) bodies and no more.

A TRUE COPY:

/s/ Roy E. Boedecker  
Lt. Col. MC  
70th Gen. Hosp. (US)

  
GEORGE C. HOLLAND  
2nd Lt. Inf.



Map ref. Sheet 98 II 1:50,000  
 Coords Q 916967

S T A T E M E N T

1. On basis of information made part of report of reinterment, the following Unknown deceased were recovered from two (2) common graves at coord: Q-916-967, near Grezzano, Italy, and are now interred in U.S. Military Cemetery, Castelfiorentino, Italy:

Unknown American X-208	Plot 2G, Row 91, Grave 4542
Unknown American X-209	Plot 2G, Row 91, Grave 4540
Unknown American X-210	Plot 2G, Row 91, Grave 4541
Unknown American X-214	Plot 2G, Row 94, Grave 4573
Unknown American X-215	Plot 2G, Row 94, Grave 4574
Unknown American X-216	Plot 2G, Row 94, Grave 4575

*Saylor*

Reports of reinterment for Unknown Americans X-208 and X-209 were previously transmitted by letter, MTOUSA, dated 25 September 1948 and 26 September 1948, respectively.

2. It will be noted report of reinterment for Unknown American X-210 was amended by this headquarters to indicate "Believed to be" Braden W. Saylor, 33275509, KIA 14 September 1944, Italy, on basis of laundry mark "S-5509" found on remains.

3. In that Braden W. Saylor, 33275509 is a member of the 339th Infantry Regiment, 85th Infantry Division; information made part of reports for above Unknowns indicates personnel of the 85th Infantry Division, the following is submitted, listing members of the 338th and 339th Infantry Regiments, KIA 13 thru 15 September 1944 for whom notification of burial has not been received:

<i>✓ 216</i> Hendry, Robert M.	Pfc.	32756424	<i>- dent</i>
Smith, Charles C.	Pvt.	42025831	
Leonard, William C.	Pfc.	31406037	
<i>✓ 208</i> Coghlan, Frederick M.	Pfc.	32998666	
Suchy, Frank A. J.	Pvt.	35914963	
<i>✓ 215</i> Roberts, Enos B.	S/Sgt.	34303724	<i>- dent</i>

It is requested tooth-charts accomplished for the above Unknowns, with the exception of Unknown X-210, be compared against those on file the War Department for the above listed personnel and this headquarters advised if positive identification can be determined.

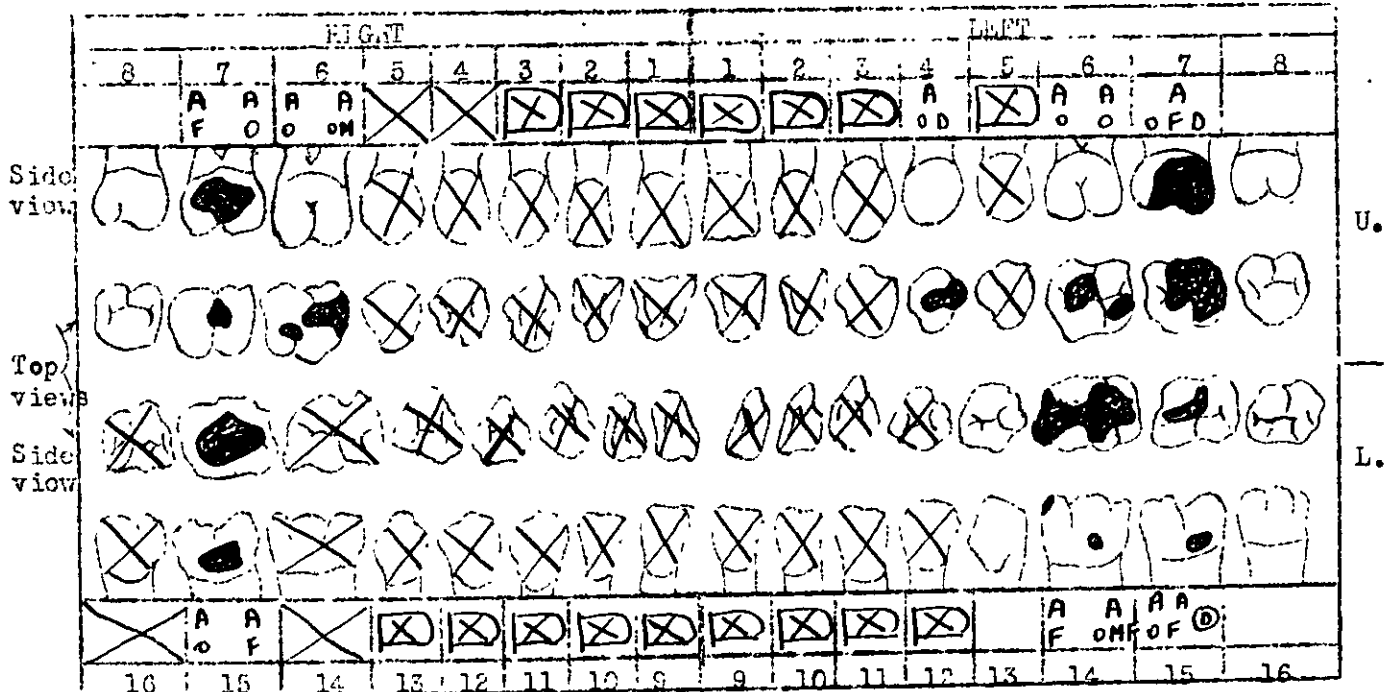
SPENCER M. RECORDS,  
Captain, Inf.

IDENTIFICATION DATA			
1. REMAINS OF UNKNOWN : X-214		2. DATE OF REPORT : 27 September 1948	
3. NAME OF CEMETERY : US Military Cemetery Castelfiorentino, Italy		4. BLOCK : 2G	5. ROW : 94
		6. GRAVE : 4573	7. DATE OF DISIN-TERMENT : REIN-TERMENT
PHYSICAL DESCRIPTION			
8. ESTIMATED WEIGHT : Impossible	9. ESTIMATED HEIGHT : 5' 3 5/8"	10. COLOR OF HAIR : Unknown	11. RACE : White
12. GIVE DESCRIPTION OF ANY OBLIQUE IDENTIFICATION FOUND WITH REMAINS Declared non-identifiable by reason of lack of sufficient identifying data. <i>T. C. Anderson</i> T. C. ANDERSON, Major OMC			
13. GIVE DESCRIPTION OF LINES OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES.  None			
14. WAS BODY BURIED?		TO WHAT EXTENT?	
YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>		
15. WAS BODY BURIED?		TO WHAT EXTENT?	
YES <input type="checkbox"/>	NO <input type="checkbox"/>		
16. DESCRIBE EVIDENCE OF HEALED FRACTURE AND BONE INFORMATION  Exostosis, without fracture of the R and L Femurs (lesser trochanters), R tibia (articular process for fibula), and the L talus.			
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKS, 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).			

*11 Feb 49*

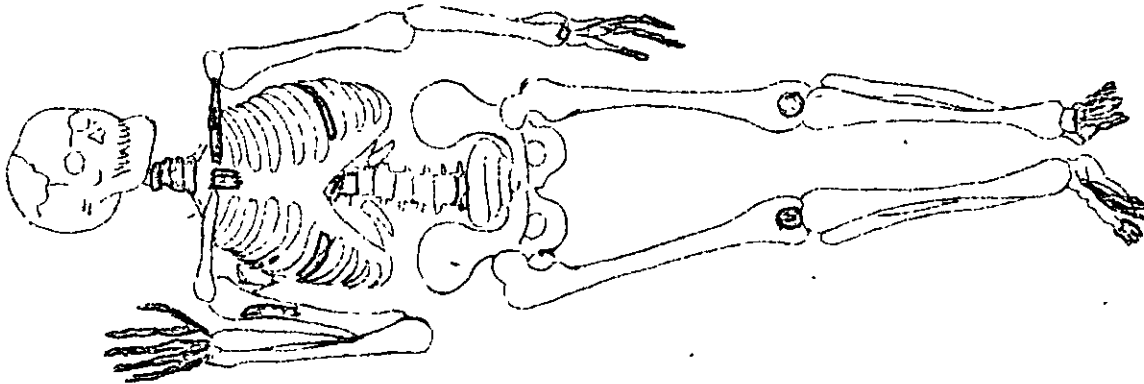
Received *Sub US Maclelland*  
Not identifiable from information presently available  
OMMG  
*E. F. ...*





Dentures (Plates): Tooth 8-L is not quite fully developed.  
 The fillings (except for tooth 7-L) are smooth and even.

19. BLACK OUT PARTS OF BODY NOT RECOVERED



20.        (if applicable)  
(Wherein segregation in whole or parts is impossible)

I certify that the Group remains consist of parts of \_\_\_\_\_ (Number)  
decedents based on the presence of one or more of the following anatomical  
parts.

\_\_\_\_\_  
(Signature of Medical Officer)

21. REMAINS AND IDENTIFICATION INFORMATION

In the opinion of the undersigned, the  
representative parts of a human remains graphic-  
ally represented in par. 19 are those of one  
and the same individual.

/s/t/ Dr. ALEXANDER TARDY  
M.D., D.A. (Anthropology)  
G.S.D., O.S.D.

I CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS OF THE DECEASED AND THAT  
ALL RESULTING INFORMATION HAS BEEN RECORDED TO THE BEST OF MY KNOWLEDGE.

Typed Name, Grade, Arm or Service and Organization

SIGNATURE

JOHN L. JACKS Jr., Capt QMC  
9107 TSU-QMC, AGRS/MZ

/s/ JOHN L. JACKS JR.

HEADQUARTERS  
9107 TSU - QMC  
AMERICAN GRAVES REGISTRATION SERVICE  
MEDITERRANEAN ZONE  
APO 794 US ARMY

CENTRAL IDENTIFICATION POINT

REPORT OF INVESTIGATION

Paragraphs 1-17 and 19-21, Identification Data QMC Form 1044 & 1044b  
Paragraph 18 - Identification Dental Chart

C.I.P. Case No. L-295

Date of Investigation 27 Sept 48

Unknown American X- 214

Am. Mil. Com. CASTELFIORENTINO Italy: Plot 2G Row No. 94 Grave 4573

Place of Death Near Grezzano, Italy Date of Death Unknown

Map Reference Q 916967 Sheet 98 Map of Italy 1/100,000

Other American Dead Found in Same Area Unknown X-215 and X-216

Cause of Death Unknown

22. Description of Remains

Skeletal state

(If the remains have not decomposed, attach to this form QMC  
Form 1042 completely filled out to physical characteristics.)

23. Skeletal Data

HEAD - Skull complete.

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TOOTH COUNT Accomplished

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---

TRUNK Complete except for: pieces of sternum; L clavicle; portion of R scapula; 2 ribs; 5 cervical; 4 dorsal and 1 lumbar vertebrae.

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UPPER EXTREMITIES (Give measurements of long bones).

R Humerus	<u>Shattered</u>	L Humerus	<u>32.2</u>
R Ulna	<u>26.2</u>	L Ulna	<u>25.5</u>
R Radius	<u>23.6</u>	L Radius	<u>Styloid process missing</u>
Carpals, Metacarpals, Phalanges		<u>Partly present</u>	

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LOWER EXTREMITIES (Give measurements of long bones).

R Femur	<u>44.2</u>	L Femur	<u>44.2</u>
R Tibia	<u>35.5</u>	L Tibia	<u>35.5</u>
R Fibula	<u>35.0</u>	L Fibula	<u>35.0</u>
Calcanea, Tarsals, Patellae, Metatarsals, Phalanges		<u>Partly present. Both patellae missing.</u>	

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24. AGE ESTIMATED AT Over 20 years.

BASED ON A better estimation could not be made because of abnormal closure of the epiphyses of the long bones and of sutures of the skull.

25. SUMMARY OF FINDINGS:

Age estimation - Over 20 years  
Tooth chart - Accomplished  
Height estimation - 5' 3 5/8"

26. RECOMMENDATIONS:

PROCESSED BY:

/s/t/ EVERT A. JOHNSON  
Pfc 17L7388L  
CIP Technician

/s/ JOHN L. JACKS Jr.

(Signature of Officer)

/s/t/ Dr. ALEXANDER TARDY  
M.D., D.A. (Anthropology)  
G.S.D., O.S.D.

/t/ JOHN L. JACKS Jr.  
Capt. QMC  
CIP Officer

RESTRICTED

QMC FORM 1 - GRS  
SOS NATOUSA  
- July 1943

REPORT OF ~~UNKNOWN~~  
AR 30-1815 & TM 10-630

~~RESTRICTED~~

28 August 1945

Date Report Filled Out

UNKNOWN AMERICAN X-214 (Q916-987) Unknown White  
 (Last Name) (First Name) (Middle Initial) (Serial No.) (Race)

Unknown Unknown Army USA  
 (Rank) (Organization) (Branch) (Country)

Coord: (Q916-987)  
 near Grezzano, Italy Unknown KIA Unknown  
 (Place of Death) (Date of Death) (Cause of Death) (Region, P. C. H., etc.)

MEANS OF IDENTIFICATION

Identification tags found on body Yes ( ) No (O)

If no identification tags, other means used to identify body (identification card, letters, etc.)

Tooth chart on reverse side.

Complete fingerprint chart of both hands on reverse side if body cannot be identified

Complete tooth-chart on reverse side and list anatomical characteristics and other data if fingerprints cannot be taken

If unidentified give circumstances:

List of Personal Effects found on Body and disposition of Same.

1 - Combat Infantry Badge, 1 - Campaign Ribbon w/1 star forwarded to Effects QM, Army Effects Bureau, Kansas City, Mo., by registered mail, as belonging to one of the following: Unknown American X-214, Unknown American X-215 or Unknown American X-216. Identity as to individual ownership undetermined.

Unknown  
(Name of Emergency Addressee)

Unknown  
(Address of Emergency Addressee)

John L. Matt, S/Sgt., 602 QM (GR) Co.  
(Signature or Name of Person furnishing above data when other than the Officer reporting burial)

Shroud 0930 hrs. 24 August 1945. U. S. Mil. Cem. at Castelfiorentino, Italy (Q549507)  
(Time and Date of Burial) (Location, Name, & No. of Cemetery)

IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCE REVERSE SIDE THIS FORM

2 G -94 4573 Wooden cross General Service  
 (Plot No.) (Row No.) (Grave No.) (King Grave Markers) (Type of Religious Ceremony)

Identification tag buried with body (O) ; Identification Tag attached to marker (O)

If identification tags not present, what other identification data were buried with the body and in what kind of container?

QMC Form-1-GRS sealed in bottle and buried with body.

QMC Form-1-GRS sealed in bottle and buried one foot below grave marker.

Bodies buried on either side. (See paragraph 1 on reverse side this form)

Right side (Name) (Rank) (ASN) BEGINNING OF ROW (Organization) (Grave No.)

Left side UNKNOWN AMERICAN X-215 Unknown (Q916-987) 4574  
 (Name) (Rank) (ASN) (Organization) (Grave No.)

(Signature of Person Reporting Burial)

*George C. Holland*  
(Verified by G. R. S. Officer)

GEORGE C. HOLLAND, 2nd Lt. Inf.

INSTRUCTIONS FOR FILLING OUT BURIAL REPORT: Make out QMC Form 1-GRS in quadruplicate for U.S. dead, one additional copy for allied and enemy dead. Sign all copies. Submit report to nearest member of Graves Registration Service. Graves Registration Service will forward the original and two copies through at least one higher administrative headquarters (to be checked against Casualty Reports and allied papers and all copies verified by the Graves Registration Officer of that headquarters) to Base Section Graves Registration Service Officer OVER FOR BURIAL INSTRUCTIONS

RESTRICTED

Hq PBS 3-44 - 200,000

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