

Thomas
FILE IDENTIFICATION TOPPER

FILE NUMBER

293 Unknown, Hamm X-209

SUBJECT

1

USMC HAMM, LUXEMBOURG
PLOT B ROW 6 GRAVE 18
Reburied 30 Dec. 1948
Verified by :

DISINTERMENT DIRECTIVE

GRS Officer

DIRECTIVE NUMBER

6020 00085

DATE

15 08 48

SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
UNKNOWN	000209		0		6

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS
HAMM LUXEMBOURG	EE	5	102	6001 80
				CODE DIST CTR

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
HAMM, LUXEMBOURG	BY ADMINISTRATIVE DECISION

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISTINTERRED
IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY	
<input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	UNKNOWN		NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)

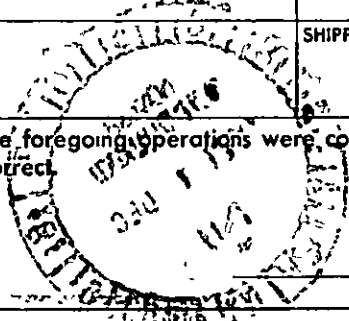
SEE ATTACHED WORK SHEET

REMAINS PREPARED AND PLACED IN CASKET

DATE	BY	EMBALMER (Signature)

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
DATE	BY

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



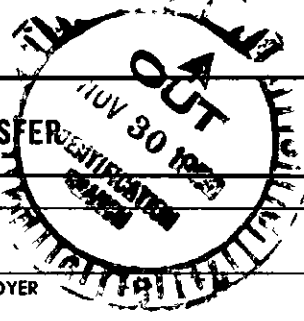
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

FILE
RECORDS MAINTAINED
DATE APR 12 1948
NAME [Signature]
R D R BR.

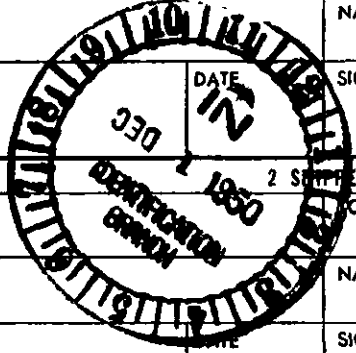
[Handwritten signature]

RECORD OF CUSTODIAL TRANSFER



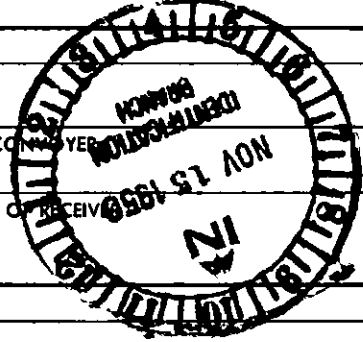
1 SHIPPED

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



2 SHIPPED

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



3 SHIPPED

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

4 SHIPPED

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

5 SHIPPED

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

6 SHIPPED

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

7 SHIPPED

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

DISINTERMENT DIRECTIVE

1

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

DAY MONTH YEAR

NAME

UNKNOWN

SERIAL NUMBER

X-000209

RANK

ARM

DATE OF DEATH

DAY MONTH YEAR

CEMETERY

DISPOSITION OF REMAINS

CODE DIST PT

CAUSE OF DEATH

LOT ROW GRAVE COUNTRY

EE 5 102 HAMM LUXEMBOURG

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

NAME AND ADDRESS OF NEXT OF KIN

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

UNKNOWN

SERIAL NUMBER

X-000209

RANK

UNK

DATE OF DEATH

DATE DISTINTERRED

30 APRIL 48

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

UNK

IDENTIFICATION VERIFIED BY

WILLARD B. OWEN

CAPT INF

NAME AND TITLE

REMAINS

MARKER GRD

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

MATRESS COVER

CONDITION OF REMAINS

BODY INTACT

OTHER MEANS OF IDENTIFICATION

ROB LISTING UNKNOWN X-209

MINOR DISCREPANCIES

NONE

REMAINS PREPARED AND PLACED IN ~~CASKET~~ TRANSFER CASE

DATE 4 MAY 48

BY

RICHARD S. HOLIVER

EMBALMER

CASKET SEALED BY

V.M. Vibbert
W/O Disinfectant

EMBALMER (Signature)

SHIPPING ADDRESS VERIFIED BY

All marking tags,

plates verified by R.E. Lewis Capt Cav.

CASKET BOXED AND MARKED

Everett Stroud
Clerk Recorder

DATE 25 June 48 BY

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

EXCEPT CASSETTING

Willard B Owen Capt INF

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

5 SHIPPED

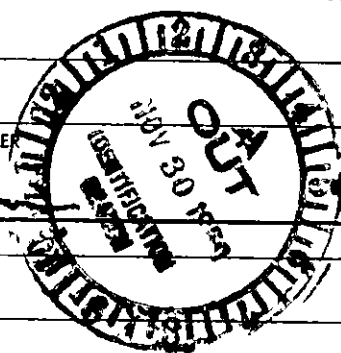
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

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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



**ARMY SERVICE FORCES
MEMO ROUTING SLIP**

TO THE FOLLOWING IN THE ORDER INDICATED		CHECK ACTION	
1 World War II Records Administration Center, AGO 4300 Goodfellow Blvd.	INITIALS	<input type="checkbox"/>	CONCURRENCE
	DATE	<input type="checkbox"/>	SIGNATURE
2 St. Louis 20, Missouri		<input type="checkbox"/>	NOTE AND RETURN
		<input type="checkbox"/>	NOTE AND FORWARD
3		<input type="checkbox"/>	COMPLETE ACTION
		<input type="checkbox"/>	CIRCULATE
		<input type="checkbox"/>	INFORMATION
		<input type="checkbox"/>	FILE

SPQYG 293
Unknown X-209
(Hamm) Luxembourg

For necessary action.

W. J. West, Russell L. 35, 467, 307

ARTHUR S. ROSENGARD
2nd Lt., QMC
Assistant

1 Incl.
Form 8-WA

RECEIVED IN HAND
 RECORDS BRANCH
 MAY 24 9 43 AM '46
 MAIL & RECORDS BRANCH

FROM (Name, organization, building)
Memorial Division OQMG

DATE
24 May 46

TEL
6817

Identification Section Room 2429 B

**ARMY SERVICE FORCES
MEMO ROUTING SLIP**

TO THE FOLLOWING IN THE ORDER INDICATED		CHECK ACTION	
TO. (Name, organization, building) 1 World War II Records Administration Center, AGO 4300 Goodfellow Blvd.	INITIALS	<input type="checkbox"/>	CONCURRENCE
	DATE	<input type="checkbox"/>	SIGNATURE
2 St. Louis 20, Missouri		<input type="checkbox"/>	NOTE AND RETURN
		<input type="checkbox"/>	NOTE AND FORWARD
3		<input type="checkbox"/>	COMPLETE ACTION
		<input type="checkbox"/>	CIRCULATE
		<input type="checkbox"/>	INFORMATION
		<input type="checkbox"/>	FILE

SPQIG 293
Unknown X-209
(Hamm) Luxembourg

For necessary action.

Stampf, George W. 32, 642, 834

ARTHUR S. ROSENGARD
2nd Lt., QMC
Assistant

1 Incl.
Form 3-WA

St

MEMORIAL DIVISION AND
RECORDS BRANCH
MAY 24 10 43 AM '46
MEMORIAL DIVISION

FROM (Name, organization, building)
Memorial Division OQMG

DATE
24 May 46
TEL
6817

Identification Section Room 2429 B

ARMY SERVICE FORCES
TRANSMITTAL SHEET

SECURITY CLASSIFICATION (if any)

FILE No. AGRS-AC 293	SUBJECT <i>293</i> Identification of Unknown X-209 (Hamm) Luxembourg <i>h2</i>		
TO— Office of the Quartermaster General. Washington 25, D.C.	FROM— Orgn Records Br Records Adm Gen, AGO 4300 Goodfellow Blvd St. Louis 20, Mo.	DATE 11 Apr 46	COMMENT No. 1 Capt Peck

1. Retained copies of Battle Casualty Reports of the 378th Inf Regt, 95th Inf Div. in the custody of this office list the following named Off and EM as KIA in Mar 45. No information is available as to whether or not reports of burial were submitted for these deceased.

Mather, Alexander	01289456	KIA	3 Mar 45
Hess, Arno M.	16146334	KIA	3 Mar 45
Roper, Clement A.	35485668	KIA	10 Mar 45
Hoschar, Richard J.	37449196	KIA	10 Mar 45

2. Retained copy of Morning Report of Co M, 378th Inf Regt for 25 Dec 44 shows Neil G. Reagan 34191994 and the following named EM MIA as of 15 Dec 44:

West, Russell L.	35467307
Young John E.	35388980
Christensen, Charles	37451002
Logue, James W.	35686327
Stumph George W.	32642834
Caswell, Kermit	35686353

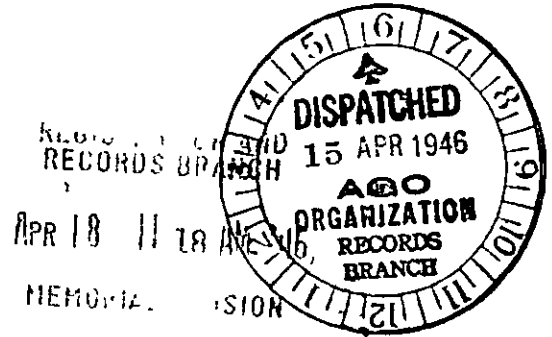
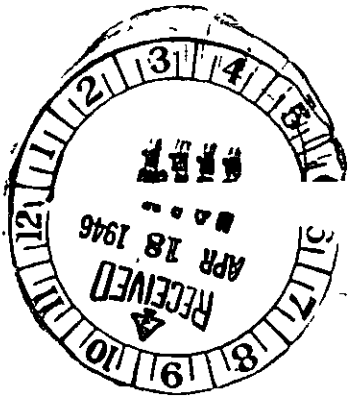
Subsequent Morning reports of above named organization show these EM as KIA as of 15 Dec 44.

3. A search of the retained Morning Reports, Battle Casualty Reports, and Battle Casualty Locator File of the 95th Inf Div in the custody of this office has resulted in failure to find any Army Serial Number ending with the Numbers "4837".

1 Incl
Ltr dtd 25 Mar 46

J. V. STARK
J. V. STARK, Lt Col, AGO
Chief of Branch

Bus. Date
5-9
File
4-23-46
re...





ARMY SERVICE FORCES

OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

IN REPLY REFER TO SPQYG 293

Unknown X-209
(Hamm) Luxembourg

25 March 1946

SUBJECT: Identification of Unknown Deceased

TO : The Adjutant General's Office
World War II Records Administration Center
4300 Goodfellow Blvd.,
St. Louis 20, Missouri

ATTENTION: Organization Records Branch

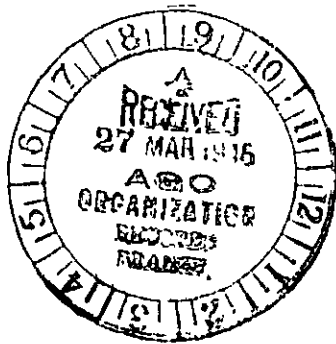
1. This office is in receipt of a burial report for an Unknown deceased of our Armed Forces, who was killed in Rehlingen, Germany approximately March 1945.

2. It is noted that the remains were disinterred from a civilian cemetery, located at Rehlingen, Germany, together with the identified body of Neil G. Reagan, ASN 34191994, 378th Inf. Reg. A laundry mark V-4837 was found on clothing of the Unknown and Sgt. stripes appeared on field jacket.

3. It is requested that the records of the 378th Inf. Reg. be searched and a list of personnel reported to have been missing or killed in action around March 1945 and for whom no reports of burial have been received, be submitted to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

ARTHUR S. ROSENGARD
2nd Lt., QMC
Assistant



MAR 25 4 15 PM '16

PHOTOGRAPHY
MAIL & RECORDS DIVISION

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[Faint, mostly illegible text]

[Faint, mostly illegible text]



SP-NO 293
Unknown X-209
(Name) Luxembourg

25 March 1946

SUBJECT: Identification of Unknown Deceased

TO : The Adjutant General's Office
World War II Records Administration Center
4300 Goodfellow Blvd.,
St. Louis 20, Missouri

ATTENTION: Organization Records Branch

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FOR THE QUARTERMASTER GENERAL:

ack

ARTHUR S. ROSENBERG
2nd Lt., QMC
Assistant

MAR 25 3 34 PM '46
MEMORIAL DIVISION
REGISTRATION AND
RECORDS BRANCH

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

11 April 1949
(Date)

RRE 293

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

The records pertaining to Unknown X- 209, Plot EE,
Row 5, Grave 102, USMC HAMM, Luxembourg,
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.

Report of Reprocessing of remains was forwarded to your Office
by Transmittal Ltr. No. 2364, dated 18-7-47.

Case reviewed by undersigned Members of the Board of Review:

Roger Berger
Maj. Roger BERGER, O-251736 OMC Capt. Jack C.H. YFS, O-1577297 OMC
Edward E. Stout
Capt. Edward F. PRICE, Jr. O-1588236 OMC 1/Lt. Edward E. STOUT, O-1594512 CE
Ernest J. Oglesby
1/Lt. Ernest J. OGLESBY, O-449004, Cav

Received TR # 3734, 11 April '49
not identifiable person info.
available at the present time
m. martin
2 May '49

Incl #3

*293
TR # 3734
m. martin
2 May '49*

IDENTIFICATION CHECK LIST

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

Disinterment Directive No 107

Unknown X 209
 Cemetery HAMM, Luxemburg
 Plot EE Row 5 Grave 102

Date reprocessed:

1 Arrived at cemetery ~~XXXXXXXXXX~~ 9 June 1947
 (Hour) (Date)

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

(Sheet, scale and serials used)

3 Remains recovered or disinterred by ~~xxxxxx~~ Subordinate Identification Point, Margraten, Holland
 (Name and organization)

4 Evacuated to Cemetery by (Name and organization)

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

Item	Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc
* Headgear	NONE (Type)		
Raincoat	NONE		
Overcoat	NONE		
Jacket, Field	NONE		
Jacket, Combat	NONE		
Mackinaw	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 **One (1) pair remnants; marked "V 4837"**

Drawers, cotton NONE

Leggings, wool NONE

Socks, ~~cotton~~ **wool One (1) pair (Remnants)**

* Shoes -- NONE

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

Chevrons or

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

Shoulder Patch NONE

Does clothing indicate that deceased was a member of the Air, Ground or Naval Force? **No**

U. T. D.

6. Description of Remains :

Age **UTD** Est. Height **5'6"** Weight **UTD** Description of wounds . . . **UTD**

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

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

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

Sunburn or tan, other than hand and face **UTD**

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

Build **UTD**
(Large, fat, thin, muscular)

Hair . . . **Light brown 2 1/2 inches, straight**
(Color, length, quantity, curly, wavy, straight, whorls, or definite parting)

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

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

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

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

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

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

Teeth ~~See Tooth Chart~~
(White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin **UTD**
(Prominent, receding, pointed, dimples, double)

Jaw **Normal** Circumference of head in inches **20 3/4**
(Large, small, normal) (Hat band)

Neck **UTD** Larynx **UTD**
(Size, length, short, normal, wrinkled) (Prominent, normal)

Shoulders **UTD** Arms **UTD**
(Broad, straight, small, rounded) (Length, muscular, color, extent and quantity of hair)

Hands **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 and extent of hair, large, small, normal)

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

Back **UTD** Circumcision **UTD** Pubic Hair **Light brown**
(Quantity and extent of hair) (Yes-no) (Color)

Hernioplasty **UTD**
(Yes-no, location)

Legs **UTD**
(Inset no, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

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

Evidence of healed fractures **UTD**
(Nose, arms, legs, etc)

NOTE Use attached charts "A" and "B" to indicate parts not received

SEE ATTACHED CHART

7 Have finger prints been placed on Report of Interment? NO (Yes-no)

If not, explain -- Fingers missing

8 Has tooth chart been prepared? Yes (Yes-no) If not, explain

9 Remarks Small amount of flesh in final stage of decomposition.
All joints disarticulated.
Clothing badly rotted.
Estimated weight of remains processed 35 pounds.
Fluoroscopic examination negative.
Nothing found to warrant Chemical Laboratory Examination.

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

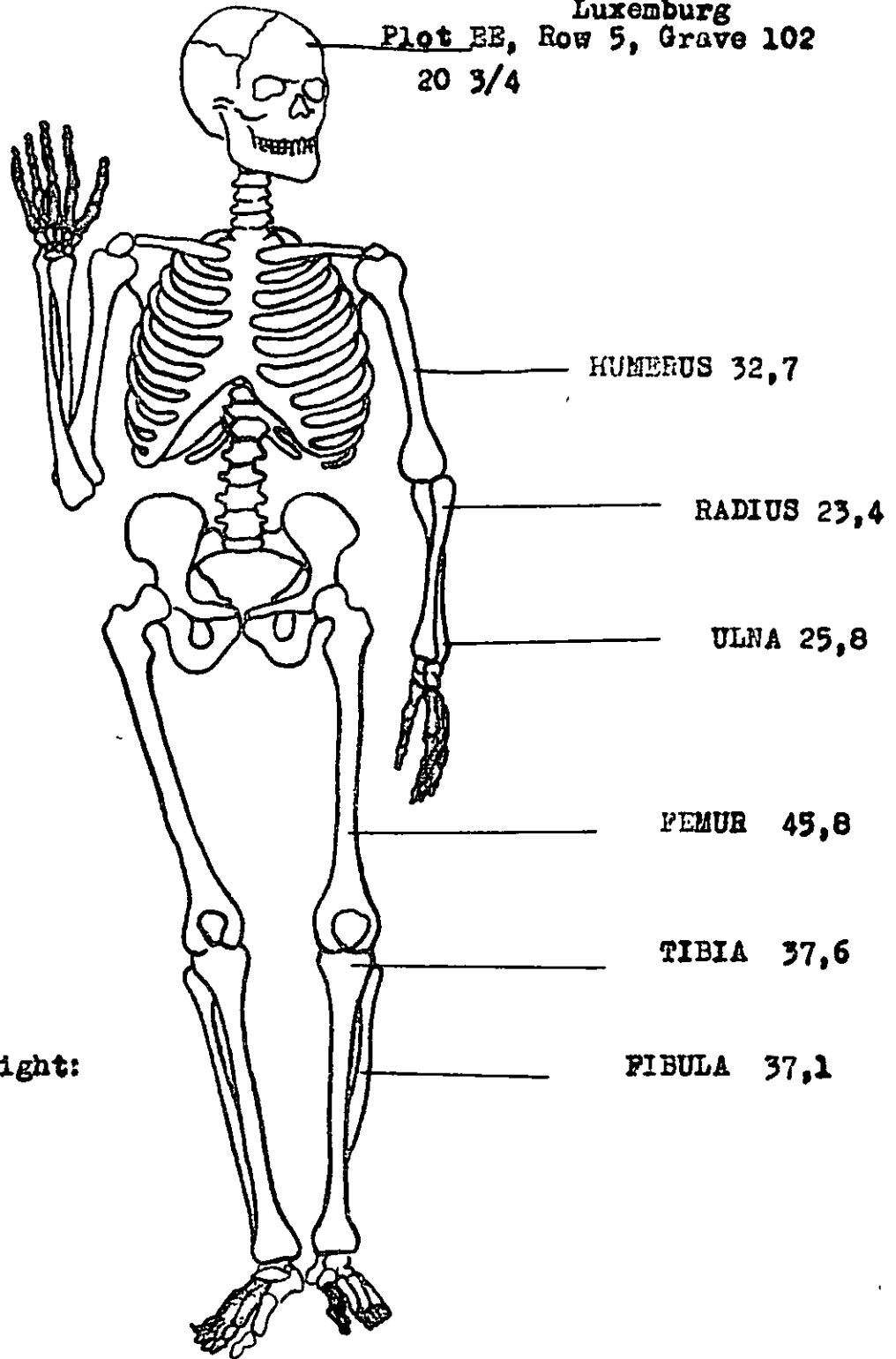
Ernest Gaddy
(Officer's Name)
ERNEST C. GADDY
C.W.O. U.S.A.
Rank Service

CENTRAL IDENTIFICATION POINT
(Organization)

SKELETAL CHART

Hamm Military Cemetery
(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

Luxemburg
Plot EE, Row 5, Grave 102
20 3/4



Estimated Height:

5' 6"

O. R. & E. DIV.
OFFICE OF THE CHIEF QUARTERMASTER
HQ. COM. ZONE, ETOUSA

TOOTH CHART

June 1947
Date

UNIDENTIFIED X-203 buried at Military Cemetery Manila, Philippines

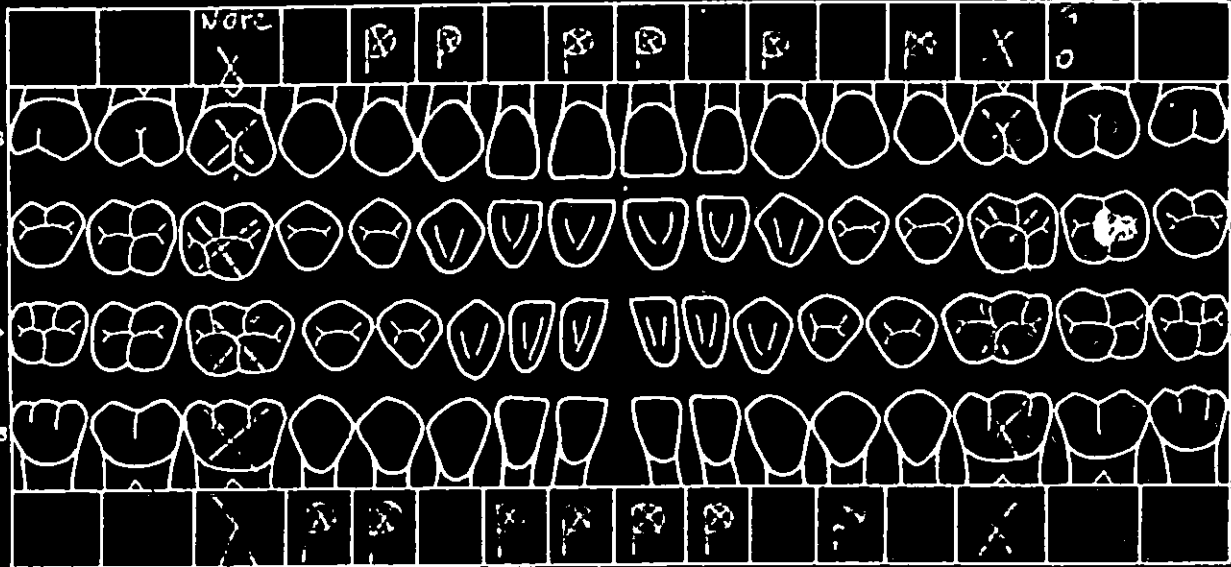
Last Name: Plot EE, Row 5, Grave 101
First Initial Rank Organization

Place of Death Date of Death Cause of Death

Right

Left

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8



16 15 14 13 12 11 10 9 9 10 11 12 13 14 15 16

This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

Ernest G. S. Officer
Signature of Officer or other person who prepared Teeth chart
Ernest G. S. Officer
Verified by G. R. S. Officer

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



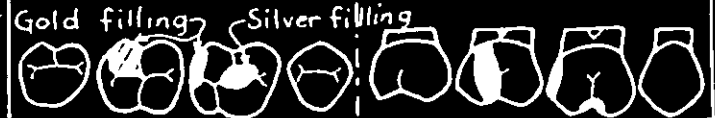
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



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



FILLINGS... Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus :



CARIES (CAVITIES)... Outline location and size of cavity, shade in thus :



DENTURES (PLATES)... Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

ADDITIONAL SPACE FOR FURTHER REMARKS

Medium sized teeth, slightly tinted pink.

Posthumously missing: R 1, 3, 4, 9, 10, 12, 13;
L 1, 3, 5, 9, 10, 12.

Spaces R 5 to 7 (estimated) 8mm; R 13 (socket) to R 15 (estimated) 8mm; L 5(socket) to 7(estimated) none; L 13 to L 15(estimated) 5mm.

R 6 cavity not completely closed at time of death.

Posterior teeth in mandible section slightly abraded.

Light brown lingual stain.

75

TOOTH CHART

UNKNOWN X-209

209

KIMM

8 Sept. 45

Date

SGT

UNKNOWN

UNKNOWN

Last Name

First

Initial

Rank

UNKNOWN

Serial No

REHLINGEN, GERMANY

Unit

EST MAR 45

Organization

KIA: WOUNDS ABDOMEN & RT SIDE.

Place of Death

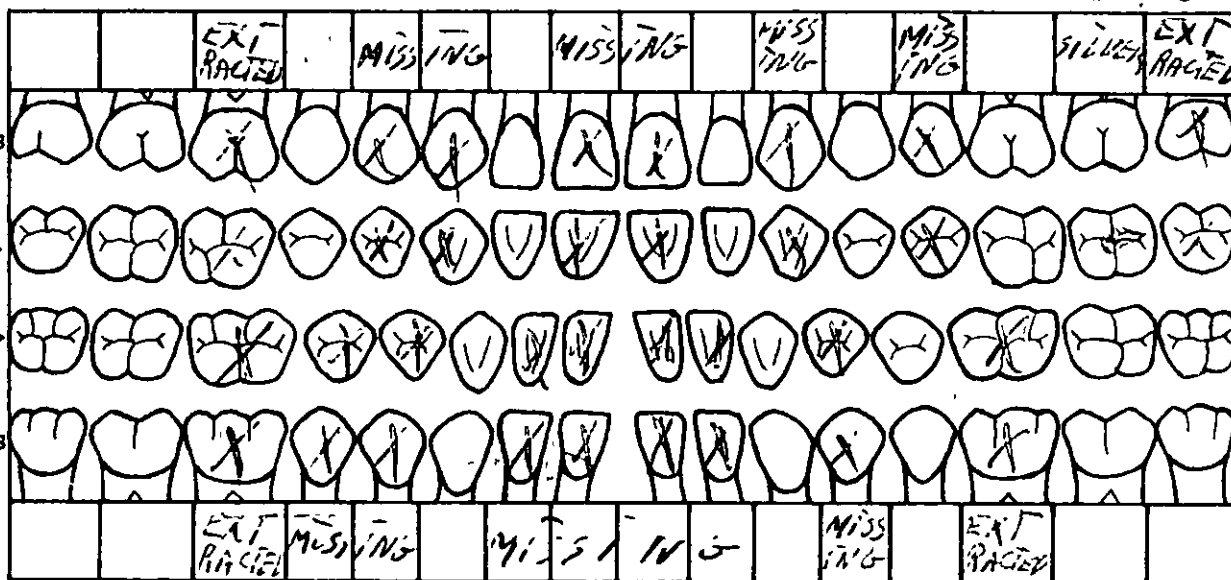
Date of Death

Cause of Death

Right

Left

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8



16 15 14 13 12 11 10 9 9 10 11 12 13 14 15 16

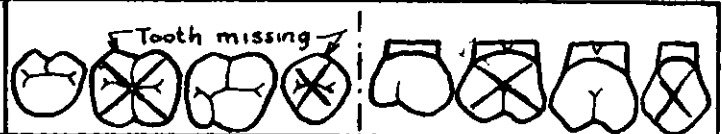
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Cpl Carl B. Mancini
 Signature of Officer or other person who prepared Tooth chart

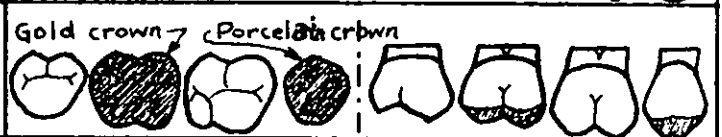
Harold B. [Signature]

Verified by G R & E Officer

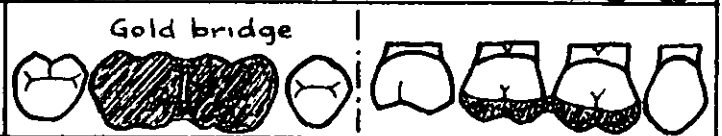
MISSING TEETH. All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



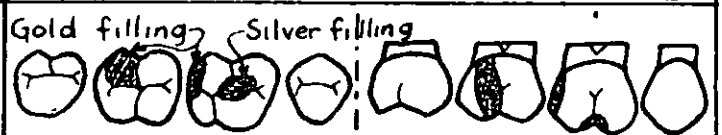
CROWNED TEETH. Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus .



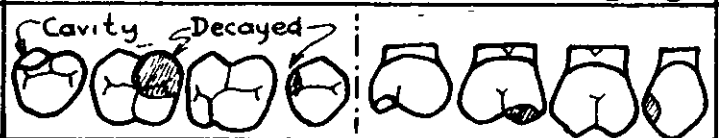
BRIDGE WORK Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus



FILLINGS. Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus



CARIES (CAVITIES) Outline location and size of cavity, shade in thus :



DENTURES (PLATES). Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

ADDITIONAL SPACE FOR FURTHER REMARKS

13. Give as detailed description as possible of condition and amount of remains
Badly decomposed
14. Give probable cause of death, type & location of wounds (is there evidence that body was burned) Wounds in abdomen and rt side.
15. Give minute description of all effects, clothing & shoes, including clothes markings & sizes, as well as shoe size. List each item of clothing, with a description of any unusual cuts, design markings, pockets, colors, patches, etc. Also list, with detailed descriptions, all effects without intrinsic value, such as gum, food, soap, papers, letters, tobacco, etc., giving brands when applicable: NONE
16. Give description of any vehicle found in the area that could be connected with the death of the deceased NONE
- | (Type) | (WD Serial No.) | (Organization) | (Serial No. & Type of each Gun) |
|--------|-----------------|----------------|---------------------------------|
| | | | |
17. Give exact location of remains in vehicle before removal
18. If buried in a coffin, give description and markings
NONE
19. List names of all other deceased persons buried in the vicinity. Also give available information concerning the cause & place of death of each that may assist in identification of those remains.
Body of REAGAN, NEIL G. 34191994 was found in same grave with subject deceased.
20. Other pertinent information which would aid in establishing identity
Tooth chart attached. "V-4837" stencilled on wool under drawers size 30. Wore overshoes size 11, field jacket 36L, 14 1/2-32 wool OD shirt, trousers wool OD 32-29, SGT stripes on field jacket. Purple heart ribbon.
Pvt. Francis Vickner, 610TH QM GRAVES REG. CO.
 (Individual in Charge of Disinterment) (Rank) (ASN) (Organization)

7 SEPTEMBER 1945

(Date)

CED - (cannot be determined)

Bandages or dressings None Scars cannot be determined
(length, width, location)

Tattoos CBD
(number, location - illustrate on sep. page)

Outstanding moles, warts or birthmarks CBD
(yes-no) (description, location)

Sunburn or tan, other than hands and face CBD

Tobacco stain on fingers or teeth CBD
(designate where, extent)

Complexion CBD Build THIN
(light, med, dark, clear, pimples, pocks, freckles) (large, fat, thin, muscular)

Hair BROWN, SLIGHTLY CURLY
(color, length, quantity, curly, wavy, straight, whorls, or definite parting, baldness, widows peak, distinctive cutting or other characteristics)

Sideburns CBD Mustache CBD Beard or goatee CBD
(color, setting, shape) (color, size, shape) (length, heavy, light, color, extent)

Eyes CBD Eyebrows CBD
(color, setting, shape) (color, bushiness, extend across nose)

Nose CBD Ears CBD
(size, shape, straight) (Size, set close to or far from head)

Forehead NORMAL Mouth CBD Lips CBD
(high, wide, wrinkled) (large, medium, small) (small, large, full)

Teeth TOOTH CHART ATTACHED
(white, size, unevenness, spacing, noticeable crowns, fillings, extractions)

Chin CBD Cheekbones NORMAL
(prominent, receding, pointed, dimple, double) (high, normal)

Jaw NORMAL Circumference of head in inches CBD
(large, small, normal) (hat band)

Neck CBD Larynx CBD Shoulders SMALL
(size, long, short, normal, wrinkled) (prominent, normal) (broad, straight, small, rounded)

Arms CBD
(length) (muscular, color, extent & quantity of hair)

Hands CBD
(vaccination scar, size of wrists) (large, small, normal, calloused noticeably)

(marks on fingers indicating that rings were worn)

Fingers: CBD
(short, thick, long, slender; size of knuckles) (missing fingers or joints)
(unusual characteristics of fingernails)

Chest CBD
(size at nipples; color, quantity & extent of hair; large, small, normal)

Back CBD Waist CBD
(quantity and extent of hair) (size at navel, appendectomy, amount & color o

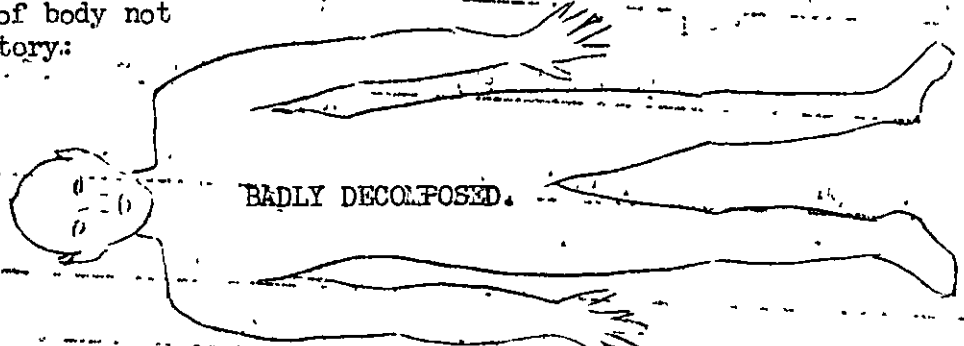
hair) Circumcized CBD Pubic hair BROWN Hernioplasty
(yes-no) (color) (yes-no) (location)

Legs CBD
(inscan) (muscular; knock-kneed, bowed, normal) (quantity, color & extent of hair)

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

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

Black out parts of body not received at cemetery:



Have photographs been made and attached no If not, explain decomposed
(yes-no)

Have fingerprints been placed on GRS # 1 no If not, explain decomposed
(yes-no)

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

Remarks: Disinterred from common grave with REAGAN, NEEL G. 34191994, from
civilian cemetery at REHLINGEN, GERMANY. CHECK LIST FOR DISINTERMENTS SUBMITTED ALSO.

Haskell B. Pugh
Signature of GRO and Organization
HASKELL B. PUGH - 1st Lt., OMC
610TH OMC GRAVES G. CO.

CHECK LIST FOR UNKNOWNNS

UNKNOWN X- 209

CEMETERY US MIL CEM. HALL, LUX.PLOT EE ROW 5 GRAVE 102Arrived at cemetery 7 SEPTEMBER 1945 From REHLINGEN, GERMANY
(hour) (date) (collecting point)Place of death REHLINGEN, GERMANY, coordinates 240874, sheet T-1, scale 1/100,000.
(name) (coordinates and landmarks)Remains recovered by PVT. FRANCIS VICKNER, 610TH CM GRAVES REC. CO.
(name and organization)Evacuated to cemetery by PVT. VICKNER.
(name and organization)Is load list attached - Are names of deceased found in same area as this Un-
(yes-no)known starred yes Are circumstances described which may indicate organization of
(yes-no)the deceased no If only part of a body was received, was a careful search made
(yes-no)for other parts of Unknown -.
(yes-no)If remains come from vehicle, plane, etc: -
(type of vehicle or plane, nickname,

serial number, organization or symbols)

Crew list -
(names of other deceased and positions in which found)If a tank, which hatches were free and available for escape use -If organization to which vehicle or plane was assigned or if names of all other de-
ceased are not known, give detailed information concerning vehicle or plane -

(parts of markings or symbols) (burned) (pierced by shell fire - where)

(found in town, field, by road, etc.) (damaged by mine explosion)

(names of men who escaped) (description of other vehicles or planes in same area)

Detailed description of personal effects NONE
(Indicate exact pocket or part of body

where found)

Description of clothing and equipment: (If clothes do not fit, obtain sizes from body measurements)

Item	Clothing Markings	Sizes	Color	Indicate unusual markings, wear, tear, repairs, etc.
Headgear (type)				
Raincoat				
Overcoat				
Jacket, Field		36 L		Sgt. stripes.
Jacket, Combat				
Mackinaw				
Sweater				
Jacket, HBT				
*Shirt, Wool OD		14 $\frac{1}{2}$ -32		
Undershirt, Wool				
Undershirt, Cotton				
Trousers, HBT				
*Trousers, Wool OD		32-29		
Belt, Web				
Drawers, Wool	V-4837	30		Stencilled
Drawers, Cotton				
Leggings				(note unusual lacing)
Wool				
Socks Cotton				
*Shoes (type)				
Overshoes		11		
Web				
Equipment (type)				
(other item)				
(other item)				

*If body is nude, sizes of these items should be computed by measuring the remains.
 Chevrons or Sgt stripes on field jacket. Shoulder Patch -

Insignia (type & location; shirt, jacket, coat, helmet)

Description of Remains:

Age - Height 58 6 $\frac{1}{2}$ " Weight 120 Description of wounds abdomen & rt side.
 (years) (ft-in) (lbs)

AMERICAN

RESTRICTED
REPORT OF BURIAL
TM 10-630 AND AR 30-1815

8 SEPTEMBER 1945

Date

UNKNOWN X-209

SCT

UNKNOWN

Last Name	First	Initial	Rank	Serial No.
UNKNOWN			UNKNOWN	

GC	Unit	Scale	EST	Organization
240874	T-1	1/100,000	MAR 45	KIA: WOUNDS ABDOMEN & RT SIDE.
REHLINGEN, GERMANY				

Place of Death	Date of Death	Cause of Death
1000 8 SEPTEMBER 1945	US MIL. CEM., HALM, LUX.	VP 8713

Time and Date of Burial	Name of Cemetery	Name or Coordinates of Location
102 5	EE	CROSS
Grave Number	Row Number	Plot Number
		Type of Marker

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

If No Identification Tags How were remains identified?
 NO TAGS REBURIAL-Body disinterred from civilian cemetery located at REHLINGEN, GERMANY, coordinates 240874, sheet T-1, scale 1/100,000. Brought in with the body of REAGAN, NEIL G., 34191994, who was buried in the same cemetery.

REBURIAL

What means of identification were buried with the body?

FORM GR-1

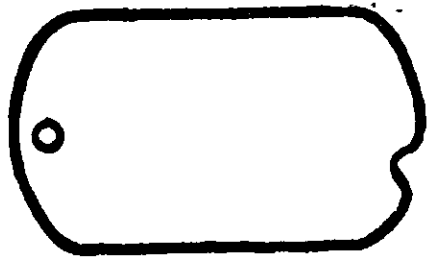
Previously buried in isolated grave

To determine Right or Left use Deceased's Right and Left located at Rehligen, Form GC240874 T-1.

Who is buried on:	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Right:	REAGAN	34191994	UNKNOWN	UNKNOWN	101
Deceased's Left:	KALUZA	38428714	UNKNOWN	UNKNOWN	103

Body brought in by Pvt Francis Vickner, 610TH QM GRAVES REG. CO.

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



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

Emergency Addressee UNKNOWN Name

Address

Religion UNKNOWN

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

NONE

Haskell B. Pugh

Signature of Officer or other person reporting burial
 HASKELL B. PUGH 1st Lt., QMC G.R. O.
 610TH QM GRAVES REG. CO.

Verified by G.R.O. Officer

#3

