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RECORD OF CUSTODIAL TRANSFER

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HEADQUARTERS MERICAL GRAVES REGISTRATION CO 1.14D EUROPEMI AREA APO 58 US AR Y

KRE 293

8 March 1949 (Date)

CERTIFIC.TE OF UNIDENTIFI BILITY OF RELINS

The records pertaining to Unknown $X-\frac{217}{}$, Plot Z
Row 5, Grave 101, US.C HAMM, LUXEMBOURG
have been reviewed and it as 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 Transmittel Ltr. 10.2715 , dates 25 March 1948
Case reviewed by undersigned jumbers of the Beard of Review:
Janley C. Tynell
Capt. Jack C. H.YES, 0-1577297 GC Capt Stanley C. TYRELL, 0-1304296 Inf
Elward Stour
Capt.Edward F.PRICH, Jr. 9-1588236 OMC 1/Lt. Edward E. STOUT, 0-1594512 CE
Cau De buly h
1/Lt Ernest J. OGLESBY, C-449004 Cov

Received 11/3.562 14/march/49 00MG
Not identifiable from
information presently
available

m. Diartin

m martin

Incl # 12

IDENTIFICATION CHECK LIST

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

Exh. 0. #641, dtd 5 Dec. 1947.

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	•		Plot	Row		ve 101
,	Date reproce		. 194 8			_
1	Amount of remeter	(Hour)	(Date)		•	
2	Place of death	(Name of closes	t town)	(Coordinates an	d letter Prefix, m	iope)
	(Shert, see	le and serials used)	***************************************			•
3	Remains seconded	ser disinterredser	and re-process	d by I.S.	lst-Zone	/)
4	Evacuated to Cem	etery by	(Name	. and organization	"	
5	Description of clot	hing and equipmen	at: (if clothes do not f	it, obtain size	from body me	:asurements)
l		Clothing Markings	Sizes		ate unusual m r, wear, tear, r	•
	* Headgear 🖫	NONE	•		i	
	Raincoat	NONE	- ··· ························		***************************************	
	Overcoat	NONE				
	Jacket, Field	none	77 V4V001110011111111111111111111111111111	•••		
	Jacket, Combat	NONE	********* payrights Address ***		* *******	
	Mackinaw	none .	to companies to common outsides		D 01H M	
	Sweater	none	purp de Mirit de Abbandos so			
	Jacket, HBT	NONE	es so operate for		1419	***
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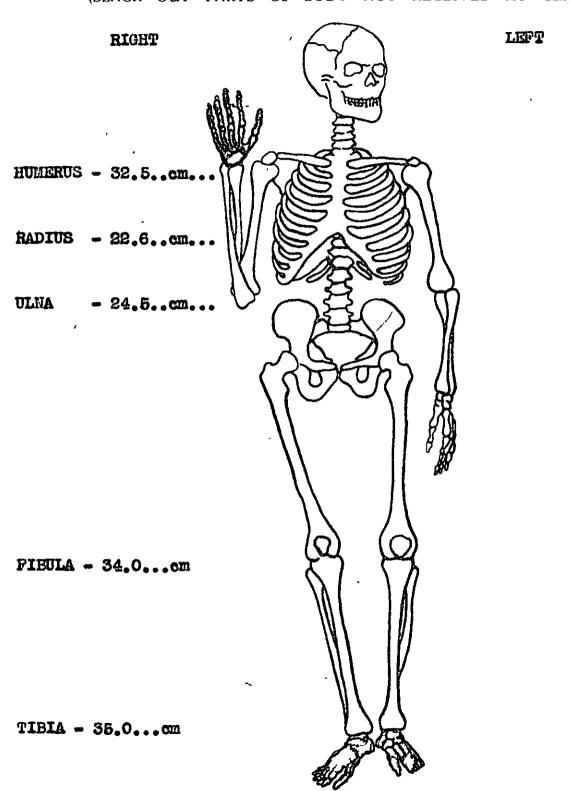
	Belt, web.	สเบเนี	-		H H ***		
	Drawers, wool.	HOLE					
	Drawers, cotton	None		-			**********
	Leggings, wool	Hous	,, ,, Heren		***		seas waspin
	Socks, cotton	none		** **	dada Tua		*******
	* Shoes	NOME	(type)			,
	Overshoes	- HOME					as 440
	Web Equipment	HONE	(type)	****** *******************************	*** -	pr 1447 ==
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	(Other item)	NOTIR of these items	should be compu	 ited by measuri	ng the remains		
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	Does clothing indic		eased was a r	member of th	ne Air, Groun	d or Naval E	orce? UPD
6	Description of Ren	name · R=	Rumerus Radius	- 32.5 - 22.6	Tib R• Fib	do = 35.0))
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6	Age UTD _H	nains · R- eight 5 2 2	Rumerus Radius Ulna Su Weight E found UTD	- 32.5 - 22.6 - 24.5 DTDDe	R- F1b	vounds UTI UTD (I ength, width, 1	
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6	Age UTD H	nains · R- eight 5 2 2 ings Eon	Rumerus Radius Vina Vina Vina Vina Vina Vina Vina Vina	- 32.5 - 22.6 - 24.5 UTDDe Scale Tattoo	R- Fib	vounds UTI (I ength, width, 1	
6	Age UTD Ho	nains · R- eight 5 2 2 ings Eon	Rumerus Radius Vina 3º Weight e found UTD (Number, rthmarks	- 32.5 - 22.6 - 24.5 UTODe Scale Tattoolocation illu UTO UTO	R- Fib	vounds UTI (f ength, width, 1 e page)	
6	Age UTD Horizon Bandages or dressi Outstanding moles Sunburn or tan, of Complexion Build	nams R- eight 5 2 2 eight 5 2	Rumerus Radius Ulna Su Weight E found UTD (Number, rthmarks ed and face (Light, med	- 32.5 - 22.6 - 24.5 UTDDe	Re Fib	vounds UTI (f ength, width, 1 e page)	
6	Age UTD Horizon Bandages or dressi Outstanding moles Sunburn or tan, of Complexion Build	nams · R- eight 5 2 2 ings Fond warts or bither than har	Rumerus Radius Vina 3º Weight e found UTD (Number, rthmarks ed and face (Light, med	- 32.5 - 22.6 - 24.5 UTODe	R- F1b escription of vers S strate on separate (Ves-no, descrip	vounds UTI (I ength, width, le page) tion, location)	
6	Age UTD Ho Bandages or dress Outstanding moles Sunburn or tan, ot Complexion Build	nains · R- eight 5 2 2 ings Fond , warts or bither than har brown 5 8 (Color, let	Rumerus Radius Vina Si Weight Si Cound UTD (Number, rthmarks ad and face (Laght, med (Large, f	- 32.5 - 22.6 - 24.5 UTODe Scan Tattoo location illu UTO UTO ium, dark, clear UTO at, thin, muscu y urly, wavy, stra UTO	R- F1b escription of v escription of v s strate on separate (Yes-no, descrip , pimples, pocks.	ola - 35.0 vounds UTI (fength, width, le page) tion, location) definite parting)	

Goatee	(Light, color, extent)		- '	
Eyes	(Color, setting, shape)	Eyebrows -	UTD (Color, bushiness, extent :	uttoss nose)
Nose /	UPD (Size, Shape, Straight)	Eears	(Size, set close to or 1 is 1 re	om hcad)
Mouth!	(Large, medium, small)	Lips	(Small, large, full)	
Teeth/	See tooth ch (White, size, unever	ness, spacing, noticeable crown	s, fillings, extracts;	
Chih	UND (Promine	ent, receding, pointed, dimples,	, double)	
Jaw	urp Cı	rcumference of head in i	nches 50.5 cm	 band)
Neck	(Size, length, short, normal, wr	Larynx	(Prominent, normal	-
Shoulders	(Broad, straight, small, roun	Arms (Length, mu	scular, color, extent and qu	antity of hair)
******* ** ** ** ** ** ** ** ** ** ** *		M SHAME SHEET STATE STAT	handlestanderstanding of the state of the st	-
Hands	Hissing and	or too decomposed	1	
Fingers	(Short, thick, los	or too decomposed	lesing Angers or joints)	
T	(Unusual	characteristics of fingernails)		-
Chest	(Size of nipples, color,	quantity and extent of hair,	large, small, normal)	-
Waist	(Size of navel, ap		and color of hair)	-
Back	Quantity and extent of hair)	Circumcision (1es	Pubic Hair Non	e found_
Hermaplasty	QTU	(Yes-no, location)	***************************************	
Legs .	UID (Inseam, musculur, knock-k	 .ncc d, bowed, normal, quantity.	, color and extent of hair	
Feet	(Size, coins, callouses, flat)	Toes	pup dender, straight, crooked, or	erlap)
Evidence of h	nealed fractures None	found (Nose, arms, le	gs, etc,	-
NOTE: Use	attached charts "A" and '	"B" to indicate parts not	received	

* 7	Have finger prints been placed on Report of Interment? (Yes-no)
	If not, explain Missing and/or too decomposed
8	Has tooth chart been prepared? If not, explain (Yes-no)
9	Remarks Estimated weight of re-processed remains # 60 Pounds.
	Remains consist of disarticulated bones and a large amount of
	decomposed flesh. One burial report recovered, No GRS tag.
`	No clothing found.
	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
	COODROW W. COLP
	GAPPATH ON Service
	OPERATIONS OFFICER (Organization)

SKELETAL CHART V.S.M.C. - Hamm

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



Est. Height : 5'2 2/3"

CHART 'A

TOOTH CHART

U.S.M.C. Harms

18 Feb. 1948

_		UJK X-	217	UNK WA					- ' - 1									
		Lest Nam	UN	K	Pirst	latiel					Grade				Serial No	erial No.		
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	None	X	X	P	c arie D		B	P	P			M F	P	X	×	X	`	
	16	`15	14	13	12	11	10	9_	9 €	10 L	11 2e	12 U	13 A	k_o^{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 cannes (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, carries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

IVOR J. FOSMO US DA CIV I.S.

/6/ IVOP J. FOSMO
Signature of Officer or other purson who prepared Tooth char

WOODROW W. WOLF CAPT QUO OPER OFF

Verfield by G R.C Officer

ET FORM 1-22 (29 AUG.46)

IOLD GRAVE REGISTRATION FORM 1-A)

AGL (3) 10-46-50M-6912 -1207

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:	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 To

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

- Posthumously missing
SPACES: R-13-16: 14mm to the occlusial surface of R-16

NOTE: R-16 is growing parallel to the jaw bone.
L-15 must of been a recent extraction before death.
R-2 has rotated 1/8 of a turn distally and overlaps R-1

Tooth decayed.

L-3 has rotated 1/16 of a turn distally.

NOTE: R-4 and R-8: The large pit left there suggests that they were abcessed very badly.

L-5 and L-6: The large pit left there suggests that they were abcessed very badly.

Teeth have many large caries.

Color : dull ivory Size : Large Alignment : Poor

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

TOOTH CHART

														23 No	vember	1945	_
									- -						Date		•
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	16	15	.14	13	12	11	10	9	9	10	11	12	13	14	15	16	

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Signature of Officer or other parson who prepared Tooth chart

WARREN J FLOURNOY, Vertical by G R. 8 Officer

1st Lt., QMC, G.R.O.

MISSING TEETH. All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus:	Tooth missing S
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	Gold bridge
FILLINGS. Draw filling on tooth as accurately as possible (blockin and label gold, silver, cement), thus	Gold filling, Silver filling
CARIES (CAVITIES) Outline location and size of cavity, shade in thus.	Cavity Decayed 5

DENTURES (PLATES) . Draw diagram of relative size and shape of plate, block $\dot{\mathbf{m}}$ teeth attached and indicate retaining clasps on natural teeth with the word "clasp"

ADDITIONAL SPACE FOR FURTHER REMARKS

TGRS TSFET Form No. 12 10- 9- 45

CHECH LIST FOR DISINTERMENT OF UNKNOWNS

All questions should be answered. If a positive answer cannot be given, estimates should be made and indicated as such. If a reasonable estimate cannot be made, a negative answer should be stated.

Physical Description

	Estimated height 5° 7° `
	Estimated weight 160 lbs.
	Color of eyes & Carnot be determined.
	Color of heir Cannot be determined
	Race White
	Quantity and characteristics of hair on head (length, baldness, curly, etc.)
•	
	mount and color of nair on body (arms, chest, pelvic region, legs)
	Description of mustache and beard
	Cannot be determined
	Length of sideburns Cannot be determined
	Was the deceased circumsized? Cannot be determined:
	Are any tatoos or scars on the body? (Give description) Dannot be determined.
•	Is there anything unusual about the fingernail structure?
	Cannot be determined
	Is there anything unusual in the construction of the toes or feet?
	Were fingerprints taken? No, badly de- Approximate cause of death? Cannot be determined , composed
	Was the body burned? No. To what extent?
	Are any parts of the body missing or severed? Cannot be determined. Body badly decomposed.
	Is there any evidence of first-aid or other medical treatment?
•	Probably hospital or Battalion Aid Station case. SEE "REMARKS"
	If the remains are badly mangled, a careful search should be made for adentification tags or personal effects.
	If no clothing is found, measurements should be made of the head, neck, chest
	waist, foot, leg (inseam), and arm length in order that chothing sizes may be
4	determined Length of leg (inseam) - Est. 34 "
	Arm measurement- Est. 32"
	Oircumference of Skull-22" ,
	,

عروب کرود کرود

Description and sizes of Clothing

	•							
21.	The second secon							
23.	المرام المنام المناب							
24.		ics of clothing such as ings, unusual buttons,						
		MARKS						
		er tube found on leg about						
	· i 4º £:	rom crotch. Evidently for						
		mage of hip or buttock wound.						
		of mesh wire worn on right and complete right leg.						
		part of body from shoulders						
		ps completely bandaged.						
	1	the company senses						
	1							
	1							
	l							
	<u> </u>							
(To 15		stics of skeleton eton or part of a skeleton						
26. 27. 28.	Width of foot Length of leg (inseam)							
29. 30.	. Circumference of skull							
31.								
32.		7						
33•		tures						
34.	·							
35•	Unusual characteristics in bone structure							
36.	. Are any parts missing or detached?							
	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.							
		Warrant Thourson						
	•	Colored Tourney [Officer's Signature] [ARREN J. FLOURNOY] let Lt., QIO						
	Ţ	ARREN J. FLOURNOY, 1st Lt., QMD						
•	•	DIOTH UM GRAVES HEG. CO.						
. •	, •	(r) (service) (Orgn)						

Copied from 293 of CAMPERLL, Alfred L. 35 291 808

In January 1945 there was located in Neuerberg a German Field Hospital. In this hospital an American Sergeant Prisoner of War worked as an aid man to wounded American soldiers. He also took care of the dead American soldiers.

He also gave the names of the dead American soldiers to the German soldiers who buried them in the cemetery of this town.

When the American captured the town the hospital was evacuated deeper into Germany. No personal effects of the American soldier are here in Neuerberg.

The inhabitants of Neuerburg at the time of the burials were gone from the town. Only a few lived in the cellars and tunnels but they would not have any information concerning the dead American

/s/ Der Burgermeister Neuerburg

The above statement was secured by:

Sgt Hillar Britt, 32821716 610th QM Graves Reg Co.

CORRECTED AMERICAN

PORT OF BURIAL

TM 10-630 AND AR 30-1815

23 NOVEMBER 1945

UNKNOWN	X - 217			UNK.	UNKNOWN
Les Name	. Fin	Inite	r)	Rank	Senal No.
		UNKNOWN	audite 34		
Opords. 265584,	Sheet T-1,-1/	/100,000	, h= 19 13	Organization	
NEUERBURG, GEI		EST. 10 JAI		KIA: O	Ruse Unknewn
Place of De		Date of D		Manus Tar	Cause of Death
1330 16 JUNE Time and Date of B		U. S. Military Name of Cor			rembourg VP-8715 or Coordinates of Location
101		Name of Cer	7.		Cross
Grave Number	Row Number	P)	ot Number		Type of Marker
Disposition of Identificat	on Toler Brandwr	h hoder Yes (T a Ma t	An in Armokadon	. Masker West F	t No E
If No Identification T	Tags Tall	14 Oat 2 orâ d	.01 -m.it. L erronéeu i	เลย _{ะไม} ่เลือว ร ไม่เกิดเลีย ์ พีย	ူပ Allerce, Alexande
NO TAGS					identification.
What means of	identification were bi	ined with the body?			
FORM GR-1	•			_	
		१ द्वारा स्थाप्त का			
	iten.	AO CAT HANG	aun "(I st	ว่ารักษา เกะ	I '
To determine Right d	ir ten tise Dear	ed's Right and Lel	tica or ng	a fa eval	
		10 / 10 1	DOTTER STATE	مداعدة بالإيالية	I.
Who is buried on:	ROW TRUE RE	ginhing bar for	eare princ	urd or tho	,4
Doceased's Right:	Name	Serial No • 10	03 Run 1	II Viendini	Grave No.
	KAMPHEL	unknown	UNK.	UNKNOW N	102
Deceased's Left	Name	Serial No	Rank	Organizatio	Grave No.
Rody brought t	n hy Set. Km	dsen, 3047th	RS Co.		
		tion of person furnishing abo		than officer reportin	e bunal,
4,1,4	4	If print of identific			
		• • • • • • • • • • • • • • • • • • • •			
<i>[</i>	1	Emergency Addres	UNKNOW	N.	
l	1	Emergency Acures	see	N:	une
[0	J				
•					
\)			Address	
		Religion UNKNO	MN		
1 (-) D 7/	r r				·
List only Personal Ef	iects round on B	oay and disposition	or same:		

NONE

This corrected Report of Burial prepared in the office of the U.S. Military Cometery, Hamm, Lux.

Structure of Officer or other ferson reporting burial WARREN J. FLOURNOY, 1st Lt., QMC G.R.O. 610TH QM GRAVES REG. CO.

Venfied by G.R.S. Officur



Copu

IF DECEASED CUNIDENTIFIE Take Fingerprints of Both Hands. If unable to obtain a complete set of Fingerprints, Take Those You Can, u iorrier j : 0.77 7 and fill in the following ESTIMATED (A large Last Name Height: 5' 7" Laundry Marks Number of Rifle - - . . . ww.Weight: 160 lbs Color of Eyes ... Wear Glasses? Color of Hair Brown Is Tooth Chart Attached Medi to stally 7_-3713 L'uo ne i . Race : White to m till! .c. U 1350 - 10 0010 1 to 12 to 14 to 14 to 15 to 1 (If possible, have medical personnel" take a tooth chart, if no medical and to sold bun - i personnel present, fill in a tooth chart below) In space below, locate, and describe any sears, buthmarks, moles, deformaties, etc. The wall stage of decomposition. TOOTHOCHART and and no reliable neares and affects ۷ه رخ .∙.૦ગક્રે allorce, CHECK LIST FUR DISINTENDENT OF UNKNOWNS P No Identification aga ding Luditions How vers remains identified submitted herewith gol be reduce to information this by lead to partity accutaing our €5..T V Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc., and the bound are rollabilities Wire mesh splint for broken leg with rubber drain on right leg about "4" from crotch. 1-, 0 ... Investigation of cemetery records reveal that Alfred Kamphel, buried on left of deceased the Right of the Right was found at the same grid coords. Both bodie were evidently hospital cases on Lead-eventh of The is buried on O genization Rank Pacensod's Right IL U DOU 10° , Hill **Military in** $\mathbb{J}(H)$ C - c - 0 O^{\perp} , statistic all large Occensed's Left . 60 flf this is an Isolated Burial, make a Sketch of the TOOTH, CHART Docation, oriented with Permanent Landmarks. If 00 more space needed attach separate sheet. Indicate Bridges North. • 9 ū migna. U Energency Addresse Deceased's al× LQ. fillings b by O, fill A;deres. $Re\Gamma_{aion}$ N crowns b List 1, Pr. and Effects Found on Sady and dispusition of same The tending his 4 is the training of the train Lu 10 å ពុ teeth, rep Y 100 (Th 1 L U.D. Blacor, Ç, 03 Datura Deceased's missing natu king anchor (n m Indicate. by C link S et C" 76992 - 887 M 3-45 J <u>~</u> 20 Upper

Lower

GRAVES REGISTRATION FORM No. 1 (Revised 1 Sept. 1943)

REPORT OF BURIAL

16 June 45

Date lake I-margains of Buth Hands, Unknown Serial No. Initial Rank Unit Organization Appello Jan 45 KLA unk Place of Death Date of Death Cause of Death 6 June Hamn Time and Date of Burial Name or Coordinates of Location Name of Cemetery Grave Number Type of Marker Plot Number Disposition of Identification Tags: Buried with body Yes \(\Pi\) No \(\Disposition\) No D Attached to Marker Yes Embossed plate If No Identification Tags How were remains identified? Name on cross of temporary grave. What means of identification were buried with the body? Embossed plate To determine Right or Left use Deceased's Right and Left. Who is buried on: Deceased's Right: Organization Grave No. Name Serial No. 102 Unk amphel Unknown Deceased's Left: Grave No. Rank Organization Name Serial No. in Knudsen. 047th GRS Co Signature or Name, Rank and if possible Organization of person furnishing above Data when other than officer reporting burial. rmanent Landmarks. If more space needed If print of identification tag is not affixed fill in below: Unknown Emergency Addressee Name Address Unknown Religion List only Personal Effects Found on Body and disposition of same: None 23 JUN 1945 Signature of Officer or other person reporting burial erified by G.R.S. Officer

3045th

RESTRICTED

M Gr Reg Co

IF DECEASED UNIDENTIFIED Take Fingerprints of Both Hands. If unable to obtain a complete set of Fingerprints, Take Those You Can, and-fill in the following: Height! Laundry Marks Weight. Number of Rifle Color of Eyes: ·Wear Glasses? Color of Hair. Is Tooth Chart Attached? Race. (If possible, have medical personnel take a tooth chart, if no medical personnel present, fill in a tooth chart below.) In space below, locate, and describe any scars, birthmarks, moles, deformities, etc. Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc... If this is an Isolated Burial, make a Sketch of the Location, TOOTH CHART oriented with Permanent Landmarks. If more space needed X 30 attach separate sheet. Indicate North. 🗖 , Bridges o Indicate missing natural teeth by X , crowns by O, fillings by O inking anchor teeth, replacements by artificial teeth $\overline{\lambda}$ ď, • ~ ~ Deceased's Right S S Characteristics 9 9 22860 -۲

IF DECEASED UNIDENTIFIED Take Fingerprints of Both Hands. If unable to obtain a complete set of Fingerprints, Take Those You-Can, and fill in the following Height: Laundry Marks: Weight Number of Rifle - Color of Eyes. - Wear Glasses? Is Tooth Chart Attached? Color of Hair: Race _ · · (If possible, have medical personnel take a tooth chart, if no medical personnel present, fill in a tooth chart below? In space below, locate, and describe any scars, birthmarks, moles, deformities, etc. Note below any identifying clues found, such as letters, photographs; probable organization of deceased, etc. If this is an Isolated Burial, make a Sketch of the Location. TOOTH CHART oriented with Permanent Landmarks. If more space needed × attach separate sheet. Indicate North. Indicate missing natural teeth by \times , crowns by \odot , filings by \square , Bridges by \odot inking anchor teeth, replacements by artificial teeth $\overline{\times}$ -မ ය Deceased's Luft N ~7 Deceased's Right Charageristics ' တ • 20 o;