STATEHENT

I the undersigned certify hereby the following:

In the begin of April 1945 I went with my husband to our vinyard named "Fooscht" to work overthere. Then we had done our work at about four o'clock and returned home we found the parts of an american helmet. We thought that here a G. I. had been killed in action. Then we found the spot where he probably had laid. (the grass was pushed down) About 1 or 2 meters away we found a bundle of human (lo centimeters long, black and blond-stained). At once we had the idea that it could not be the hair of a colored man (not curied). In the grass we found blank lotterpaper and a letter. I could not re ad the scripture (because it was to small) but /I could state a number. Ly husband put it in his pocket and took it home. Two weeks later my husband showed the letter to Mr. KIEFFER, because Hr. KIEFFER understands english. Ur. KILFFER said that he would read the lotter. Eight days later he told my husband that the soldier received the letter from his sister. He wanted to keep the letter to send it later to the writer. We buried the hair-bundle to prevent children to play with. We also put the helmet in the ditch. During the summer, we saw that it was no more there. The searching Team (Halker) told us that hir. KIEFFER picked up the helmot to have it as a souvenir.

Witness 8/ Gillen Joan

Interpreter s/ Toussaint

For a true and complete translation:

Arie Voorwinde, Supervisor

Undersigned:

s/ Urs. J.P.Clemens %/ Hr. J.P.Clemens

2 Koiffeschgassel

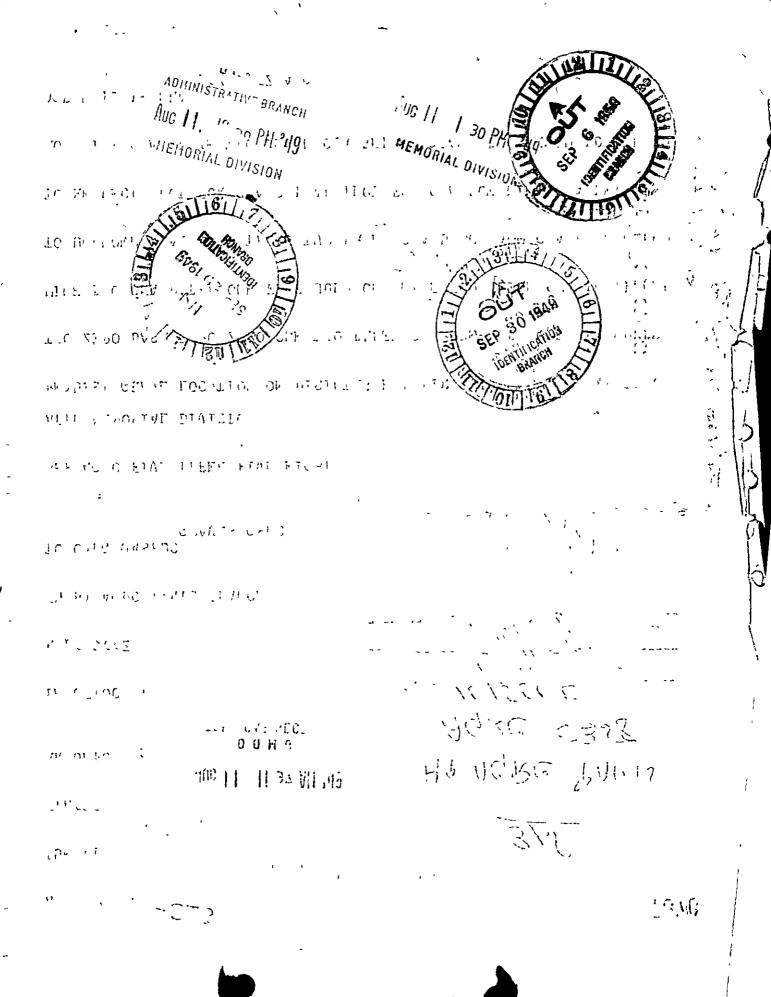
I certify this is a time copy,

CHÂRLES E. AYS

End Lt., Inf.

much stan martin 1-323

em bourg x-323 313 16 1 1949 AUG 10 16 HO AGRC PARIS Aug | | | 37 AM '49 3, 10 AGRC 5358 TEL & CAB SECTION D. T. G. - 1015002 LE UFFOC 4i R 101500Z FM HQ AGRC PARIS FRANCE TO COME WASHDC GRAVES GRINC REF AGRC FIVE THREE FIVE EIGHT AITN MEMORIAL DIVISION REQUEST GRAVE LOCATION ON DISINTERMENT DIRECTIVE NUMBER SIX ZERO TWO ZERO DASH ZERO ZERO ONE TWO THREE CMA RRE FORM ONE SIX NUMBER NINE TWO CMA DATED ONE FIVE JULY ONE NINE FOUR NINE CMA PERTINENT s 293 TO UNKNOWN XRAY DASH THREE TWO THREE CMA USMC HAMM CMA BE AME DED TO REFLECT PLOT FOX CMA REPEAT PLOT FOX CMA ROW NINE CMA REPEAT ROW NINE CMA GRAVE TWO SEVEN CMA REPEAT GRAVE TWO SEVEN PD END PE mer - Rup Rics Ca AGRRE PD PECKHAM 10/1526Z AUG BECORD ATTACHED



HEADOUARTERS AMERICAN GRAVES RLGISTRATION COMMAND EUROPEAN AREA APC 58 US ARMY

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1. The records pe taining to Unknown X - 323 , Plot	4.
1. The records pe taining to Unknown X - 323 , Plot Row 3, Grave 51, UNKC 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. 2. Report of Reprocessing of remains was forwarded to your Office by Transmittal Letter No. 2612 , dated 6-1-48 3. Remarks: Tooth chart for X-323 checked against 371 foin file for all casualties listed on following map sheets with negative sults, Germany 6 and K 50, Moselle, France; Luxembourg. Bernard E. CARROLI Case reviewed by undersigned Nembers of the Board of Review Rajor R Berger O-251736 ORD Capt. Lt. Cel. E.D. NULV/FITY, O-359598 Capt. E.F. PRICE, J. 1588236 ORD Capt. Jack C.HAYEK, O-1577297 Received Transmittal Letter #3986, 8 June O Unable to identify from information availab	3
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AGRC FORM No 11

Hewrsed 16 Sept 1948

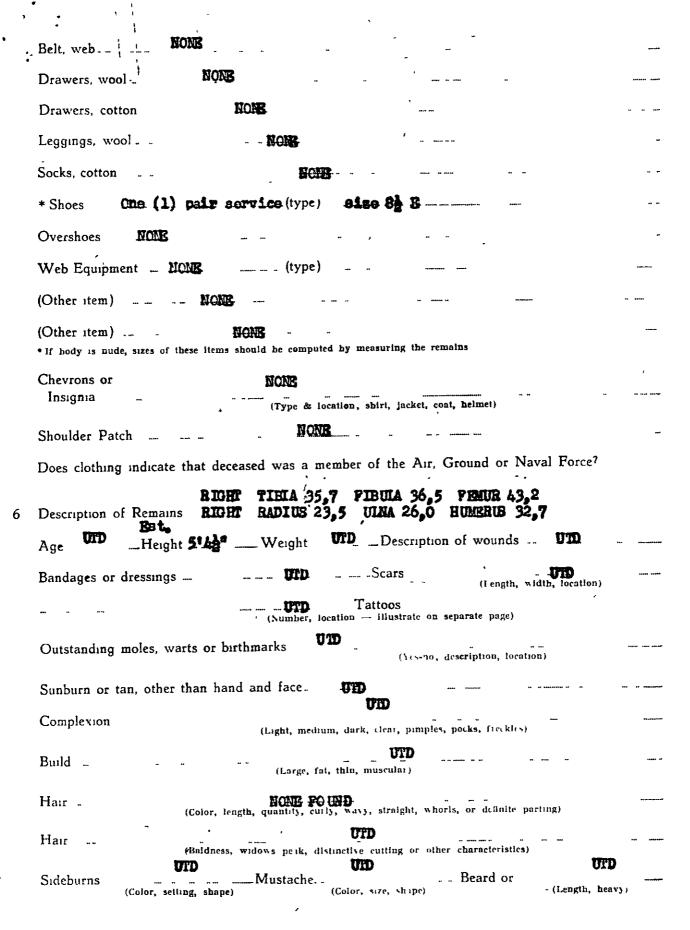
Formely "Check List 1,

of Unknowns")

IDENTIFICATION CHECK LIST

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

		,			
			Unknown X 32	3	***************************************
			Cemetery HAM. L	uxenburg	
	1		PlotRow	3 Grav	e 51
	Date reprocessed: 20 Novem	ber 1947			
I	(Hour)	(Date)			
2		closest town)	(Coordinates an	d letter Prefix, ma	1ps)
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3 4		d by MOBILE TEA	M., C.I.P. A.G.R.C. (Name and organization	ition)	
5	Description of clothing and equ	upment (if clothes	do not fit, obtain size	from body mea	isuremen ts)
,	Item · Clothing Markings	Sizes		ate unusual ma r, wear, tear, re	•
	* Headgear NONS (Type) Raincoat - NONS			*****	,
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	Jacket, Field	NONB	*** **		
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Evidence of	healed fractures	NOMB	· · · · · · · · · · · · · · · · ·			~
		(Nose, at	ıms, legs, etc j	I		

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?
- (Yes-no)

If not, explain

Firgers missing

- 8 Has tooth chart been prepared? ____ Yes ___ If not, explain
- Remarks Remains received in "UK" type burial box in skeletal form.

 Butime ted weight: 15 lbs. Clothing found in debris, no markings evidented burial report, no GHS tag, recovered with remains.

 No means of identification found.

 Nothing found to warrant Chemical Laboratory Examination.

 Case remains UNKNOWN.

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

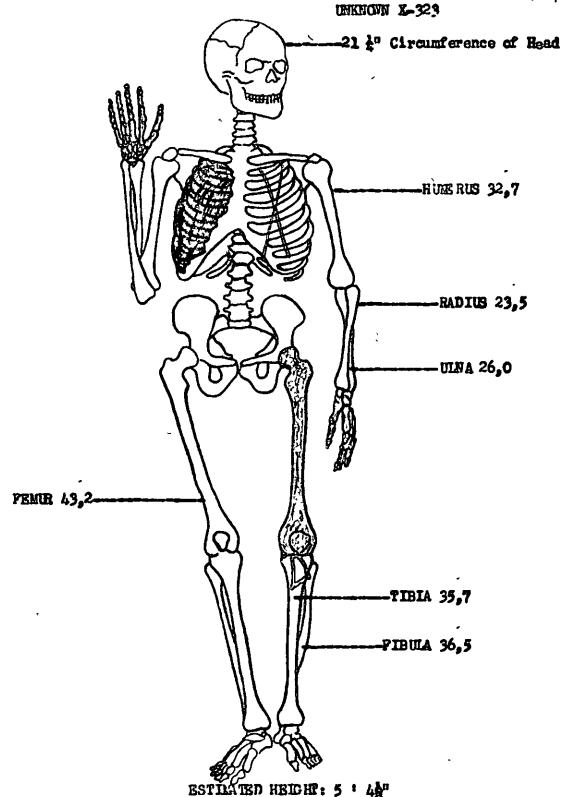
(Officer's Name)

BLISWORTH T. MAC INTERS GAPTAIN QUO C.I.P.

CENTRAL IDENTIFICATION POINT (Organization)

SKELETAL CHART HAM, Cemtery Luxenburg

Plot GG, Row 3, Grave 51 (BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



G. R. & E. DIV.

OFFICE OF THE CHIEF QUARTERMASTER

LO. COM. ZONE, ETOUSA

49

HAMM, Luxemburg

TOOTH CHART

Plot GG, Row 3; Crave 51

20 November 1947

15

16

Date UNKNOWN X-323 HAV.M Last Name First Initial Kank Serial No. Tinte Organization Place of Death Date of Death Cause of Death Right Left Side views **UPPER VIEWS** LOWER Side Views Canis

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.

10

11

COUNTRICE OF STREET OF STREET WHO BEST TO

Verfield by G. I. S. Officer

ELISWORTH T. MAC INTYRE CAPTAIN QUC C.I.P.

GRAVES REGISTRATION FORM Nº 1 - A

16

15

13

12

g d	
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:	Gold crown - Porcelaincrown Company Concelaincrown
BRIDGE WORK Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:	Gold bridge DOS
FILLINGS Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus:	Gold fillings Silver filling
CARIES (CAVITIES). Outline location and size of cavity, shade in thus:	Cavity Percayed 5 55

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

P-Posthumously missing.

Sraces: R-5-7; 6mm., I-3-5; 2mm., I-5-7; touching.,
R-10-11; ½ mm., R-11-12; 3mm.; R-13-15; touching..
I-10-11; 1mm., I-11-12; ½ mm.,
R-12 is rotated ½ turn distally
R-13 has a mesial version and is rotated slightly distally
I-5 is rotated ½ turn distally
R-16 is rotated 1/8 turn distally
R-16 has mesial version.

Size - Medium
Alignment - Good
Color - Ivery

FORM NO. 11
Revised 5 January 1946
(to be coach co

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

			Unknown X	23
			Cometery	¥
			Plot GG	-3 - Grave
Arrived at come	tery 1100, 27th E	196 e te		
Place of death	GRAVIENMACHER		(06-5-20-5)	
	(Name of closest	town)	coordinates and	
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			/ Trans or Berry	,
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		(Name and	organization)	
Description of	clothing and equi	pment: (if	clathes do not f	it. obtain
size from body	measur ments).			
	Clothing			usual marking
Item	Markings	Sizes Cole	or weer, teen	r, repairs,
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(typ	9)			
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light, color, extent	it)	
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(color, setting,	Eyebrows (color, bushiness, extent across nose)	OCE.
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(fize, shape, st	traight) (size, set close to or far from head)	
Mouth	Lips (smell, large, full)	
(large, medium	m, smell) (small, large, full)	
Teeth		
(white, size,	uneveness, spacing, noticeable crowns, fillings, ext	rect
Chin		
	(prominent, receding, pointed, dimple, double)	
Jew	Circumforence of head in inches	
(large, small, no	ormal) (het bend)	
Neck	Larynx	
(size, length, shor	rt, normal, wrinkled) (Preminent, normal)	del
Shoulders	Arms	
(broad, str	raight, small, rounded) (length, muscular, col	or)
(extent and quantity	y of heir)	
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Hands		
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	k, long, slender, size of knuckles, missing fingers o	r'
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	Foot 81/2 P	Toos
	(Size, corns, Callouses, F)	(slonder, straight, crooked, overlap)
	Evidence of hooled frectures	
		(noso, erms, legs, etc.)
9.	Black out parts of body not	
	received at cemetery:	124
	Variable Williams	The second secon
10,	Have fingerprints been placed o	n Report of Interment
		Yos-no
	If not, explain DECOMPOS	ED
11		The state of the s
110	Hes tooth chart been prepared _	Yos-no If not, explain .TETH MISSING
12.	Romerks: PODV TN SKRTA	ON FORM PONES SHATTERED.
	The state of the s	
	I cortify that I have pers and all resulting information h	onally viewed the remains of subject deceased as been recorded to the best of my knowledge.
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	plant magnitive male	Renk Service
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	triber deren besteht	531st.Q.M. GROUP, DET."A"
		Organization

NEW TRCHENSHEET UZ (06.5, 210) GRAVENMACHER LUXEMBOURG SOH = Linch. LUX CHOOLES Church. WASSER BILLIG (C) (C) 30000 Murque of CEMETA GARDEN GARDEN

RESTRICTED TW. Letter 1862

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WD QMC FORM 1042 (Rev 1 Apr 1945) (Supersedes GRS Form 1)		REPORT OF (AR 30-1810 as	, -···-	27, TEB, 1946									
Imprint Identification Tag II Possible Section 1—IDENTIFICATION													
DO NOT T	YPE	NAME (Last, first, middle initial)			SERIA	SERIAL No.							
		UNKNOWN-X-323			UNK.								
)	GRADE	ORGANIZATION		BRAN	CH OF SERV	ICE						
 (0	UNK.	UNK		-	UNK.							
		RACE	RELIGION		I IF OTHER TH	IAN U S DEA	AD GIVE						
		UNK.	UNK.		NAME OF C	OUNTRY							
PLACE OF DEATH		CAUSE OF DEATH	.' -		PATE	OF DEATH							
GRAVENMACHER, LUXEMBOURG.		UNKNOWN				ESTIMATED SEPT.1944							
EMERGENCY ADDRESSEE (N	lame, relationship, an	d address)	address)										
	*												
 	·						- 						
IDENTIFICATION TAGS FOUI (1, 2, or none) NONE	ND ON BODY	IF NO TAGS FOUND ON BODY I	DESCRIBE MEANS (OF IDENTIFICATION (f unidentified, fi	ll in section S	on reverse)						
WERE SUBSTITUTE TAGS PR	OVIDED?(Yes or no)	UNKNOWN.											
NO.		7.7.2	· · · · · · · · · · · · · · · · · · ·			!							
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2,444													
Section 2.—BURIAL. 11 of	ther than in estab	lished cemetery furnish sketc	h and map coord	inates on reverse		,	<u></u>						
	NAME NUMBER COORDINATES AND LOCATION OF CEMETERY HAMM MILITARY CEMETERY NO.1, LUXEMBOURG, SHEET 31/210-VP-883137 1:50,000												
DATE OF BURIAL HOUR		BURIED IN (Shroud blanket or n	TYPE OF GRAVE	PLOT No	ROW No	GRAVE No							
27,FEB.1946	1.700	SHROUD.	CROSS		GG	3	51						
WAS THIS A REBURIAL?		<u> </u>	DINATES OF PREVI	US CEMETERY AND L	OCATION OF G	RAVE	1						
(Yes or no) YES.	GRAVENMA	GRAVENMACHER, CEMETERY , LUXEMBOURG. ON THE PROPERTY AND LOCATION OF GRAVE OF A REBURGATION											
TYPE OF RELIGIOUS	ı	RSON CONDUCTING BURIAL RITES											
C.P.S.		SIECK, CAPT,	BURIAL BOTTLE W. BODY										
IDENTIFICATION TAG BURIE		EMBOSSED TAG ON CROSS											
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DISTRIBUTION OF REPOR	RT Signed origin.	al for U.S. and allied dead sig	ned original and	one offer let enemy									

RESTRICTED

		Section 3.—UNIDENTIFIED REMAINS.										
PARTS WISSING	LEFT LEFT	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										
	LEFT RING FINGER	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.										
		UNK.	UNK.	UNK.	EYES	UNK.		BIRTHMARKS SCAR UNKNOWN	S OR TATTOOS			
,		WEAPON AND	SERIAL, No		LAUNDRY	MARKS		WHERE BODY WAS	BURIED OR FOUND			
. 11	LEFT MIDDLE FINGER	NONE NONE				GRAVENMACHI	ER .					
		OTHER IDENTIFICATION CLUES										
	GER	NONE										
11												
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