

293 UNK. X-1230

HOLLAND (MARGRATEN) '461b

W092-70A0001

Received Date : 06/10/2009

WNR-01-09-028-1-025-05-002

Refile #:



ARF1-124277644

Box #: 10427

Case/File: UNK-X-1230

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7887 GRAVES DETACHMENT

APO 757

2/3 unk Margraten X-1230 ms

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 - 1230 Margraten

(POC) MARGRATEN

File
2/10/51
23 Feb 51

2215

American

Army Form 3314
(Pads of 75.)

BURIAL RETURN.

2 C OAU / 210

(Date) 29 June 1945 194

Name of Cemetery (if any) Nijmegen OIA Camp Hill Cem.

Place of Burial (if no Cemetery)

Map Reference 690595 Sh. 12 N.M. Greenbook 1/25,000

Holland

6908 4427

Grave No. 2-5-1 Army No. X-1230

Unit American

Name: (Surname) Palmer *T-5680* (Initials)

Rank Soldier Religion

Date of Death

Date of Burial 28-6-45

Means of Identification of Body See ORO

EFFECTS.

Have effects (if any) been forwarded to the Base? *Yes*

CROSSES. (Strike out all but one line.)

1. No cross required as an adequate cross with durable inscription is already in position.
2. Cross required: (a) Will be called for at G.R.U. Office at
- (b) To be forwarded by G.R.U. to
- (c) To be erected by G.R.U. as soon as possible.

Note 1. When a Chaplain or Burial Officer renders a Burial Return and is not in a position personally to verify the particulars shown thereon, he must invariably state on the form sent to the Officer i/c. G.H.Q., 2nd Echelon, the authority responsible for supplying the details of identity, and (if possible) how they were obtained.

Note 2. This form to be rendered as follows :-

- 1 Copy to Director-General Graves Registration and Enquiries, War Office (A.G. 13).
- 1 " " D.A.D.G.R. and E. of the Army in which the Chaplain is serving.
- 1 " " Officer i/c. G.H.Q., 2nd Echelon. (2 copies in case of burial of an enemy.)

(Signed) *John Jay Cape*
C.F., or O. i/c. Burials.

Unit *27 CAC (SER)*



Body found at MR:776557 Sh.12 N.W. Groesbeek on 28 June 45.
Beside gliders.

No Identification:

Clothing had been burnt from body.
Boots only remaining. American pattern steel helmet found
beside body. Boots were also american pattern.
Body in an advanced state of decomposition.

U.S.A. # 375 - on jump boots

Form with fields for: Army No., Date of Birth, Religion, Date of Death, Means of Identification of Body, etc. Includes instructions for cross-referencing and a note about Chaplain or burial Officer responsibilities.

Stamp: **U.S. AIR FORCE**
16 JUN 45
Circular stamp: **RECEIVED** with date and time.

HOLLAND 3A

Filed

Army Form W3514.
(Pads of 75.)

BURIAL RETURN.

2 c GRW / 210

(Date) 22 June 45 194

Name of Cemetery (if any) Nijmegen Cdn. Temp. Mil. Cem.

Place of Burial (if no Cemetery)

Map Reference (E-690595) Sh. 12 N.W. Groesbeek 1/25,000
Holland GSGS 4427

Grave No. 2-1-14 Army No.

Unit American

Name: (Surname) Unknown (Initials) T-5677

Rank Sgt. Religion

Date of Death Date of Burial 22 June 45

Means of Identification of Body Fatigue uniform with overalls over top. Sgt stripes on right sleeve of tunic. See Reverse.

EFFECTS.

Have effects (if any) been forwarded to the Base? Nil.

CROSSES. (Strike out all but one line.)

- 1. No cross required as an adequate cross with durable inscription is already in position.
- 2. Cross required: (a) Will be called for at G.R.U. Office at
(b) To be forwarded by G.R.U. to
(c) To be erected by G.R.U. as soon as possible.

Note 1. When a Chaplain or Burial Officer renders a Burial Return and is not in a position personally to verify the particulars shown thereon, he must invariably state on the form sent to the Officer i/c. G.H.Q., 2nd Echelon, the authority responsible for supplying the details of identity, and (if possible) how they were obtained.

Note 2. This form to be rendered as follows:—

- 1 Copy to Director-General Graves Registration and Enquiries, War Office (A.G. 13).
- 1 " " D.A.D.G.R. and E. of the Army in which the Chaplain is serving.
- 1 " " Officer i/c. G.H.Q., 2nd Echelon. (2 copies in case of burial of an enemy.)

(Signed) [Signature] C.F., or O. i/c. Burials.

Unit No. 2 Cdn. Graves Registration

SEE OVER

27 C.A.R. (SFR) X

Body badly decomposed. Found in field at MR 773557
Sh. 12 N.W. Grosbeak 1/25,000. Both hands and
head missing.

Name of Country
Last of Name
Map Reference
Date

Unit
Name
Date of Birth
Date of Death

Place of Interment
Remarks
Have effects (if any) been forwarded to the next of kin?

CROSSER. (If the one in the line)
No. has found again when it was with double underlines
to be reported to the next of kin by the next of kin
to be reported to the next of kin by the next of kin

Note 1. When a person is listed as a Casualty, it is not
in a post on personnel to verify the particulars shown thereon, the most trustworthy
on the form sent to the next of kin, the M.I.C. and Editor, the authority responsible for
supplying the information, and in possible how they were obtained.
Note 2. This form is to be filled out as follows:
1. Under General, list the name of the person and his service number, War Office (A.C. 13)
1. Under R.A.C. and Editor, list the name of the person and his service number, War Office (A.C. 13)
1. Under M.I.C. and Editor, list the name of the person and his service number, War Office (A.C. 13)

Unit
Name
Date of Birth
Date of Death
Place of Interment
Remarks

CASUALTY
16
M.I.C. and Editor

American *HOLLAND SA*
Army Form 3314.
(Pads of 75.)

BURIAL RETURN.

2 C Bar / 210

(Date) 29 June 1945 194

Name of Cemetery (if any) Nijmegen Cdn. Temp. Mil. Cem.

Place of Burial (if no Cemetery)

Map Reference (E. 690595) Sh. 12 N.W. Groesbeek 1/25,000

Grave No. 2-4-10 Army No.

Unit American Airborne

Name: (Surname) Unknown (Initials) T-5679

Rank Cpl. Religion

Date of Death

Date of Burial 28-6-45

Means of Identification of Body See Over

EFFECTS.

Have effects (if any) been forwarded to the Base? Nil

CROSSES. (Strike out all but one line.)

1. No cross required as an adequate cross with durable inscription is already in position.
2. Cross required: (a) Will be called for at G.R.U. Office at
- (b) To be forwarded by G.R.U. to
- (c) To be erected by G.R.U. as soon as possible.

Note 1. When a Chaplain or Burial Officer renders a Burial Return and is not in a position personally to verify the particulars shown thereon, he must invariably state on the form sent to the Officer i/c. G.H.Q., 2nd Echelon, the authority responsible for supplying the details of identity, and (if possible) how they were obtained.

Note 2. This form to be rendered as follows:—

- 1 Copy to Director-General Graves Registration and Enquiries, War Office (A.G. 13).
- 1 " " D.A.D.G.R. and E. of the Army in which the Chaplain is serving.
- 1 " " Officer i/c. G.H.Q., 2nd Echelon. (2 copies in case of burial of an enemy.)

(Signed) [Signature]
C.F., or O. i/c. Burials.

Unit 27 CAR (SQR)



Body found at MR: 785552 Sh.12 N.W. Groesbeck ca.
June 28- 45.

No. Identification:

Rank from Chevrons on left sleeve
of shirt. Airborne flash on right sleeve of tunic.
Nationality from American Pattern clothing. Body in
an advanced state of decomposition. Pockets in
uniform had been previously emptied.

Army No. _____
Unit _____
Name: (Surname) (Initials) _____
Rank _____
Date of Birth _____
Date of Burial _____
Means of Identification of Body _____

FACTS: _____
Have reports (if any) been returned to the _____
GROSS: _____
1. No cross referred as an adequate cross with duplicate inscription already in position.
2. Cross referred (a) - Will be called for by G.R.D. Officer.
(b) - To be forwarded by G.R.D. to _____
(c) - To be reported by G.R.D. as soon as possible.

Note 1. When a Chaplain or burial Officer receives a burial Return and is not
in a position personally to verify the particulars shown thereon, he must invariably refer
on the form sent to the Officer in Charge, G.H.O. and Chaplain, the authority responsible for
supplying the details of identification, and (if possible) how they were obtained.

Note 2. This form to be regarded as follows -
1 Copy for the Central Graves Registration and Liaison, War Office (A.G. 131)
1 Copy for the G.H.O. and Chaplain in which the Chaplain is serving.
1 Copy for the G.H.O. and Chaplain. (2 copies in case of burial of an enemy).

(Signed) _____
G.H.O. or G.L.C. Burial _____
(Overseas War Office Form 112, H. & S. 1141 (Rev. 1944))


CASUALTY
16
M.W.

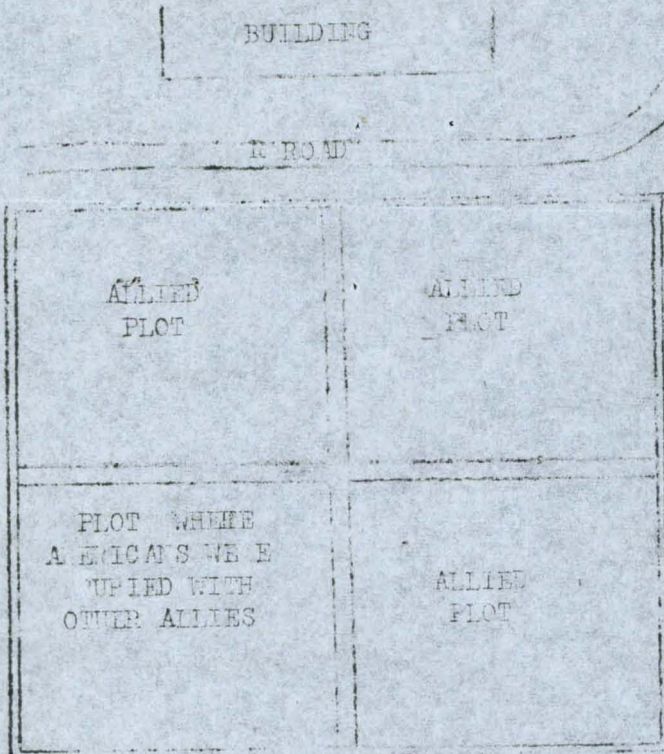
(1) 2A & 3A)
2215

NARRATIVE

1. Attached is a list of American remains evacuated from the 1st Canadian Temporary Military Cemetery at Nijmegen and removed to US Military Cemetery at Molenhoek.
2. These remains at a later date were moved to US Military Cemetery at Margraten.
3. Information on attached list was taken from the records of US Military Cemetery at Molenhoek.
4. All remains that were buried at the above mentioned cemetery in paragraph 1 have been disinterred and operations have ceased to exist.
5. Correspondence in the attached list indicates that the five unknowns mentioned in attached list of basic communication are now buried at Margraten.

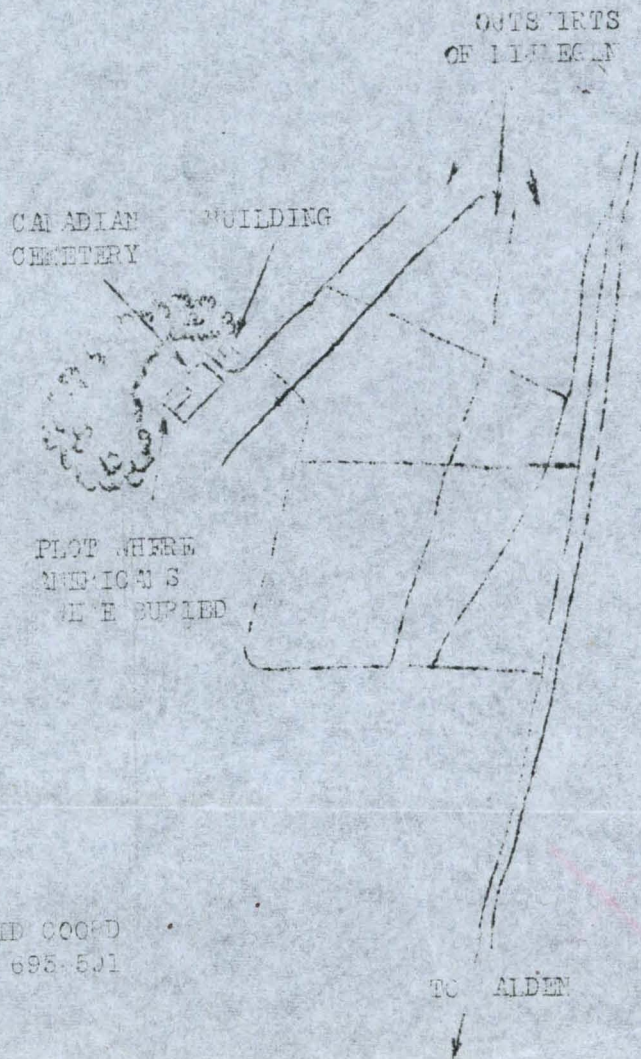
Mr. Ferdinand V. Vitale
Mr. Ferdinand V. Vitale
WD US Civilian





- 1 UNK X-1228
- 2 UNK X-1230
- 3 UNK X-1231
- 4 UNK X-1232
- 5 UNK X-1233
- 6 UNK X-1234
- 7 COLE, J.L.
- 8 EILMAN, R.H.
- 9 BUMPUS, J.
- 10 ALTMAN, F.I.
- 11 GOODINGTON, R.E.
- 12 REED, R.
- 13 BRACK, W.

PLOT DRAWN TO LARGE SCALE



GRID COORD
695 501

MAP REFERENCE
GRASSY FIELD 2:25, 000
SHEET-12 1.0.
SEC DART ROAD

TO ALDEN

File GWA

1	USMC MARGRATEN Plot: 0 Row: 22 Gr: 12 Date of Burial: 16 June 50 DISINTERMENT DIRECTIVE Verified by GRS Officer ROBERT W. GANSEL 1st LT QMC		
	SECTION A — NAME AND BURIAL LOCATION OF DECEASED <i>Robert W. Gansel</i>	DIRECTIVE NUMBER 4650 00301	DATE 15 04 48 DAY MONTH YEAR
NAME <i>293</i>	SERIAL NUMBER UNKNOWNX-001230	RANK	ARM Q
CEMETERY MARGRATEN - AACHEN			DATE OF DEATH DAY MONTH YEAR 0 4601 80 CODE DIST. PT.
LOT LL 11	ROW 11	GRAVE 274	COUNTRY HOLLAND
			CAUSE OF DEATH 6

SECTION B — CONSIGNEE AND NEXT OF KIN NO FLAG SENT

NAME AND ADDRESS OF CONSIGNEE MARGRATEN, HOLLAND (BY ADMINISTRATIVE ORDER)	NAME AND ADDRESS OF NEXT OF KIN These remains are unidentifiable and are to be permanently interred. (Hq.AGRC-13 Dec 49)
--	---

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME UNKNOWN	SERIAL NUMBER X-001230	RANK UNK	DATE OF DEATH	DATE DISINTERRED 24 AUG. 48
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	ORGANIZATION UNKNOWN	RELIGION UNK	IDENTIFICATION VERIFIED BY EDWARD E. STOUT 1/LT CE NAME AND TITLE	

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL UNIFORM	CONDITION OF REMAINS FRACTURED CRANIUM - SKELETAL FORM - COMPLETE.
OTHER MEANS OF IDENTIFICATION REPORT OF BURIAL	
MINOR DISCREPANCIES <i>I</i> NONE	

REMAINS PREPARED AND PLACED IN CASKET

DATE 6 OCT. 48	BY CLARENCE R. TOMPKINS EMBALMER
CASKET SEALED BY CLARENCE R. TOMPKINS	EMBALMER (Signature) CLARENCE R. TOMPKINS
CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY ALL PLATES TAGS MARKINGS VERIFIED BY: BERNARD P. STANTON CAPT FA

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

FILE RECORDS ANNOTATED
 DATE *2 July 50*
 NAME *B. P. Stanton*
 BERNARD P. STANTON CAPT FA BR. MEM. DIV.
 SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.
 I CERTIFY that the typed names appearing above are the same as the original signatures on the No. 4 copy of F-1194 concerned

Raymond G. Johnson

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED			
FROM USMC MARGRATEN, HOLLAND	TO LIDO AREA (BRESSOUX, BELGIUM)		
KIND OF CONVEYANCE TRUCK	NAME OF CONVOYER CPL THOMAS F. MC KEOWN - 31448722		
SIGNATURE OF SHIPPER <i>James E. Golley</i> JAMES E. GOLLEY 31448722	DATE 20 Sep 49	SIGNATURE OF RECEIVER <i>[Signature]</i> [Signature]	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 (BY ADMINISTRATIVE ORDER)	NAME OF CONVOYER		
SIGNATURE OF SHIPPER MARGRATEN, HOLLAND	DATE	SIGNATURE OF RECEIVER	DATE
6. SHIPPED			
FROM USMC MARGRATEN, HOLLAND	TO		
KIND OF CONVEYANCE	NAME OF CONVOYER		
SIGNATURE OF SHIPPER [Signature]	DATE	SIGNATURE OF RECEIVER	DATE
7. SHIPPED			
FROM	TO		
KIND OF CONVEYANCE	NAME OF CONVOYER		
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE



HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

RRE 293

15 April 1949
(Date)

293 unk. Holland (Margraten) X-1230

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

The records pertaining to Unknown X- 1230 , Plot LL ,
Row 11 , Grave 274 , USMC MARGRATEN, Holland ,
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. 2292 , dated 2-5-47 .

Case reviewed by undersigned Members of the Board of Review:

Maj. Roger BERGER, O-251736 ORD Capt Jack C. HAYES, O-1577297 OMC

Edward F. Price, Jr.
Capt. Edward F. PRICE, Jr. O-1588236 OMC *Edward E. Stout*
1/Lt Edward E. STOUT, O-1594512 CE

Ernest J. Oglesby
1/Lt. Ernest J. OGLESBY, O-449004 , Cav

TL# 3760, dtd 20/4/99
Received
Not identifiable from
information presently
available
Darius, PL
31 May 99
OQMG

Incl # 22

GRS GMA

6

993 Ynk. Holland X-123 of Margraten

DISINTERMENT DIRECTIVE

SECTION A NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER 4650 00301		DATE 15 04 48 DAY MONTH YEAR		
NAME UNKNOWN				SERIAL NUMBER 001230		RANK		ARM
CEMETERY MARGRATEN - AACHEN				DATE OF DEATH		DISPOSITION OF REMAINS 4601 80 CODE DIST. PT.		
LOT LL	ROW 11	GRAVE 274	COUNTRY HOLLAND			CAUSE OF DEATH 6		

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE MARGRATEN, HOLLAND (BY ADMINISTRATIVE ORDER)	NAME AND ADDRESS OF NEXT OF KIN
--	---------------------------------

SECTION C — DISINTERMENT AND IDENTIFICATION

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

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
OTHER MEANS OF IDENTIFICATION	
MINOR DISCREPANCIES	
REMAINS PREPARED AND PLACED IN CASKET	
DATE CASNET SEALED BY	BY EMBALMER (Signature)
DATE CASNET BOXED AND MARKED	BY SHIPPING ADDRESS VERIFIED 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 GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

FILE UNDER NO. 293 - Unk. X-1230, Holland (Margraten)

INDEX SHEET

SYNOPSIS

DATE:

7/18/46

FROM:
TO:
ATTN:

COMM.
AMERICAN CONSUL'S OFFICE, WORLD WAR II RECORDS ADMINISTRATION CENTER,
ST. LOUIS, MO.
OFFICIAL RECORDS DIV.

SUB:

Identification of Unknown Decased.

DOCUMENT FILED UNDER NO.

293 - Unk. (Misc) Holland (Margraten)

col.

FILE UNDER NO: 293 - Unk. K-1230 Holland (Margraten)

INDEX SHEET
SYNOPSIS

Letter

11 April 1946

FROM: C MCO
TO: CG, , Ft. Bragg, N. C.

SUBJ: Identification of Unknown Deceased.

DOCUMENT FILED UNDER NO: 293 - Unknown (Misc) Holland (Margraten)

bm

FILE UNDER NO. 293 - Unknown X-1230 Holland (Margraten)

INDEX SHEET

SYNOPSIS

Memo

14 March 1946

FROM: QMGO, Memorial Div.
TO: World War II Records AGO, St. Louis, Mo.

RE: For necessary action.

DOCUMENT FILED UNDER NO.

293 - Unknown (Misc) Holland (Margraten)

bm

FILE UNDER NO., 293 - Unk. X-1230, Holland (Margraten)

I N D E X S H E E T

S Y N O P S I S

DATE:

3/11/46

FROM: OPMG,
TO: ADMINISTRATION CENTER, RECORDS ADMINISTRATION CENTER, AGCO,
ST. LOUIS, MO

SUBJ: Identification of Unknown Deceased.

DOCUMENT FILED UNDER NO. 293 - Unk. (Misc.) Holland (Margraten)

oad.

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

TOOTH CHART

26 July 1945

Date

UNKNOWN (6) X-1230

Unknown

Unknown

Last Name

First

Initial

Rank

Serial No.

Unknown

Unknown

Unit

Organization

Vic Nijmegen, Holl.

Est 20 Sept 1944

KIA Unknown

Place of Death

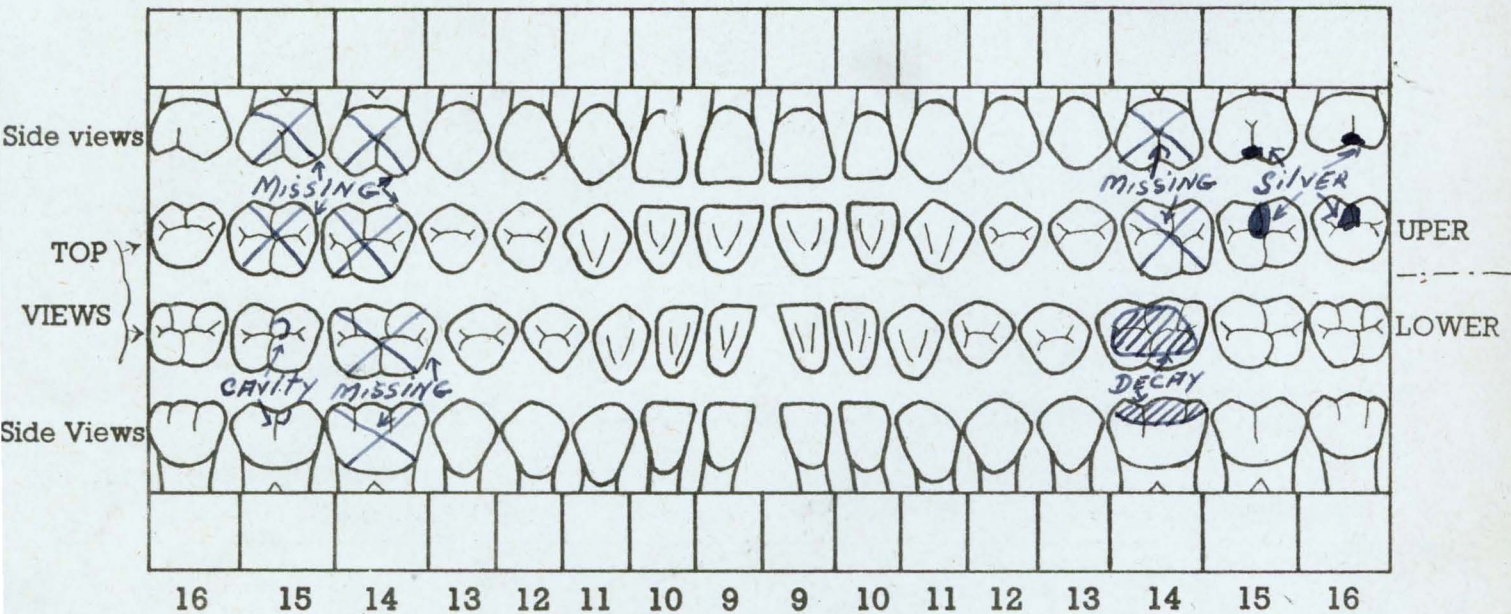
Date of Death

Cause of Death

Right

Left

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



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.

J. H. K. Greason 3060 GRC Co.

Signature of Officer or other person who prepared Tooth chart

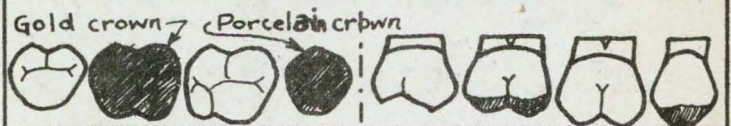
DE Kett 1st Lt

Verified by G. R. S. Officer

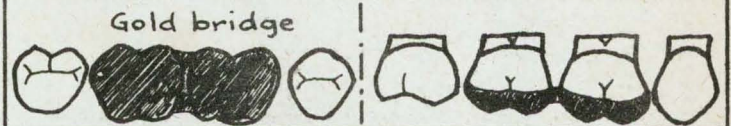
MISSING TEETH... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



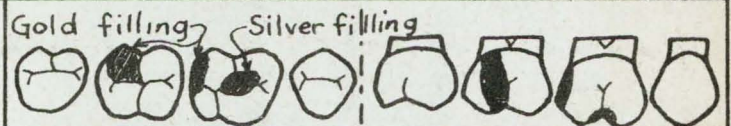
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



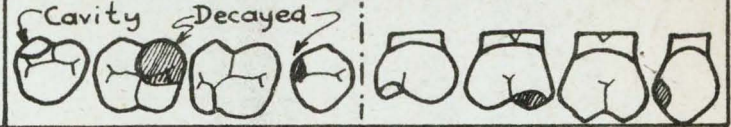
BRIDGE WORK... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



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

OCQM-GR&E Div.

CHECK LIST FOR UNKNOWNNS

UNKNOWN (6)

UNKNOWN X- 1850
CEMETERY Warrenton, Holl. VHS45482
PLOT 11 ROW 11 GRAVE 274

Arrived at cemetery _____ From _____
(hour) (date) (collecting point)
Place of death 776557 N.W. of Groesbeek, Holland
(name) (coordinates and landmarks)
Sheet 12 1:25,000

Remains recovered by 3060 QM Graves Registration Co.
(name and organization)

Evacuated to cemetery by 3060 QM Graves Registration Co.
(name and organization)

Is load list attached Yes 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 Yes If only part of a body was received, was a careful search made
(yes-no)

for other parts of Unknown Yes
(yes-no)

If remains come from vehicle, plane, etc: Unknown
(type of vehicle or plane, nickname,
serial number, organization or symbols)

Crew list Unknown
(names of other deceased and positions in which found)

If a tank, which hatches were free and available for escape use Unknown

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 _____

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

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

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

Detailed description of personal effects No personal effects
(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				
Jacket, Combat				
Mackinaw				
Sweater				
Jacket, HBT				
*Shirt, Wool OD				
Undershirt, Wool				
Undershirt, Cotton				
Trousers, HBT				
*Trousers, Wool OD				
Belt, Web				
Drawers, Wool			WHITE	
Drawers, Cotton				
Leggings Wool				(note unusual lacing)
Socks Cotton		10 U.K.		
*Shoes <u>Paratroop</u> (type)	U.S.A. No. 375	8 1/2 D		
Overshoes				
Web Equipment (type)				
(other item)				
(other item)				

*If body is nude, sizes of these items should be computed by measuring the remains.

Chevrons or Unknown Shoulder Patch Unknown
Insignia (type & location; shirt, jacket, coat, helmet)

Description of Remains:

Age Unknown Height Unknown Weight Unknown Description of wounds: KIA Unk
(years) (ft-in) (lbs)

UNKNOWN (6)

11230

Bandages or dressings Unknown Scars Unknown
(length, width, location)

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

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

Sunburn or tan, other than hands and face unknown

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

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

Hair Blond 1 inch X
(color, length, quantity, curly, wavy, straight, whorls, or definite parting, baldness, widows peak, distinctive cutting or other characteristics) unable

Sideburns Blond, to determine Mustache Yes Beard or goatee Unknown
(color, setting, shape) (color, size, shape) (length, heavy, light, color, extent)

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

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

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

Teeth X Even
(white, size, unevenness, spacing, noticeable crowns, fillings, extractions)

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

Jaw Unknown Circumference of head in inches _____
(large, small, normal) (hat band)

Neck Unknown Larynx Unknown Shoulders Unknown
(size, long, short, normal, wrinkled) (prominent, normal) (broad, straight, small, rounded) (length) (muscular, color, extent & quantity of hair)

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

Unknown
(marks on fingers indicating that rings were worn)

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

(unusual characteristics of fingernails)

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

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

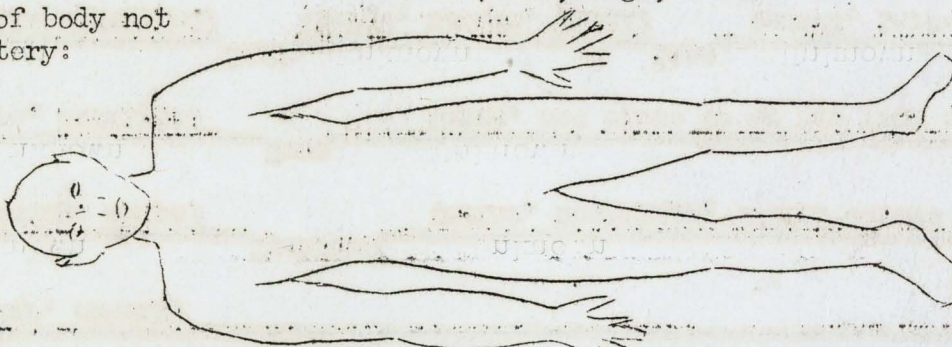
Circumcized Unknown Pubic hair Unknown Hernioplasty Unknown
hair) (yes-no) (color) (yes-no) (location)

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

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

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

Black out parts of body not received at cemetery:



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

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

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

Remarks: Body decomposed

[Signature]
Signature of GRO and Organization

AGRC FORM No. 11
Revised 16 Sept. 1946
Formerly "Check List
of Unknowns")

X-1230

IDENTIFICATION CHECK LIST

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

Unknown X-1230

Cemetery Margraten, Holland

Plot II Row 11 Grave 274

Date reprocessed

1. Arrived at cemetery 1 April 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 Subordinate Identification Point, Margraten,
(Name and organization) Holland.

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 Charred remnants of one (1)

Undershirt, Cotton None

Trousers, HBT None

* Trousers, Wool OD None

Belt, web None
Drawers, wool Charred remnants of one (1) pair
Drawers, cotton None
Leggings, wool None
Socks, cotton None
* Shoes (type) high top field shoes, one (1) pair
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 Patch None

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

Utd

6. Description of Remains :

Age Utd Height Est. 5'02" Weight Utd Description of wounds Utd

Bandages or dressings Utd Scars Utd
(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 Utd
(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 **Head crushed**
(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 **Blond**
(Quantity and extent of hair) (Yes-no) (Color)

Hernioplasty **Utd**
(Yes-no; location)

Legs **Utd**
(Inseam, 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.

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

If not, explain fingers too decomposed

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

9. Remarks Remains consist of skeleton - disarticulated.
Estimated weight of processed remains; 20 Lbs.
No clothing marks.
Burial report and embossed tag found.
Fluoroscopic report negative.
Remains were wrapped in British shelter half.
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.

Ellsworth T. MacIntyre
ELLSWORTH T. MACINTYRE
(Officer's Name)

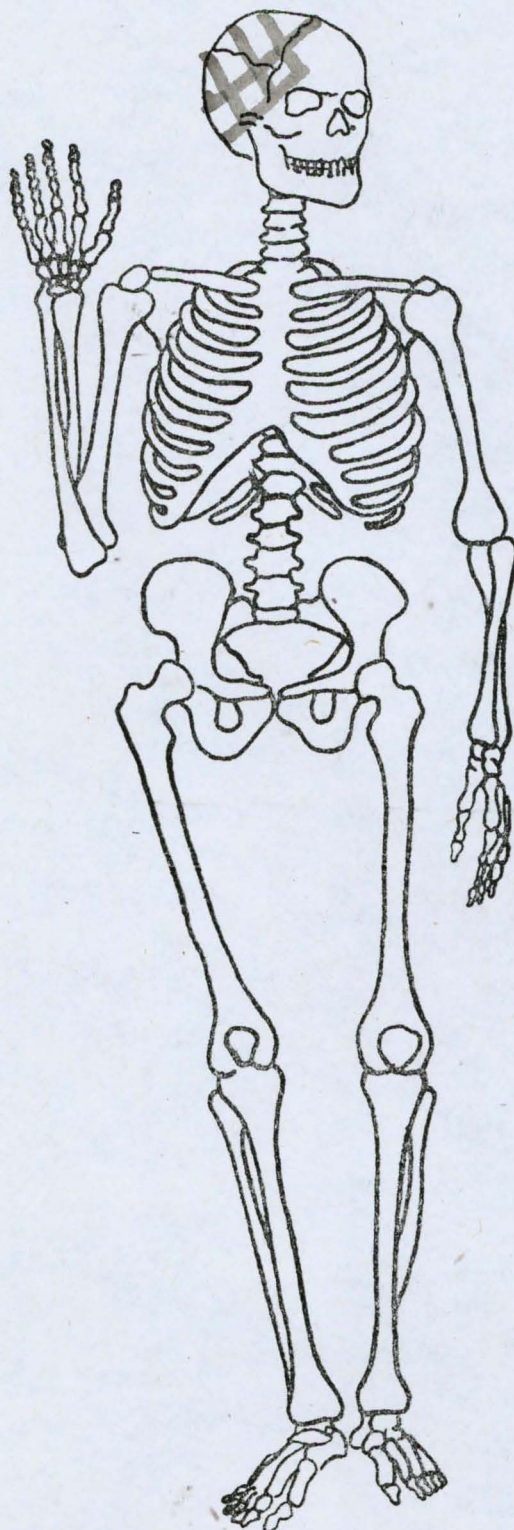
Captain QMC
Rank Service

Central Identification Point.
(Organization)

X-1230
Margen, Holland
Plot LL Row 11 Grave 274.

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



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

55

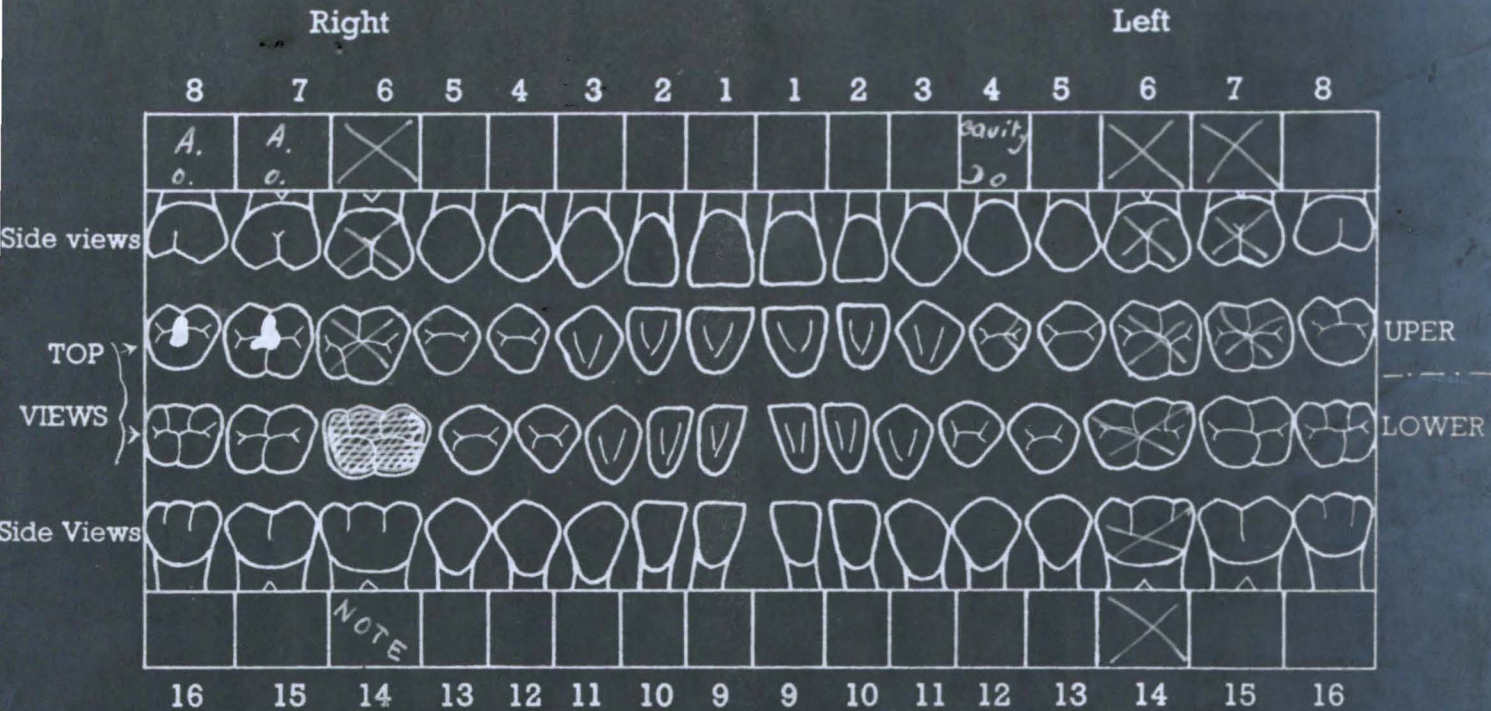
X-1230
Maastricht, Holland
Plot LL Row 11 Grave 274

TOOTH CHART

1 April 1947
Date

UNKNOWN X-1230

Last Name	First	Initial	Rank	Serial No.
Unit		Organization		
Place of Death		Date of Death	Cause of Death	



SEE REMARKS

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), bicuspid (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.

Harold S. Wheeler

Signature of Officer or other person who prepared Tooth chart

Ellsworth T. MacIntyre

Verified by G. R. S. Officer

ELLSWORTH T. MAC INTYRE
Captain QMC C.I.P.

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



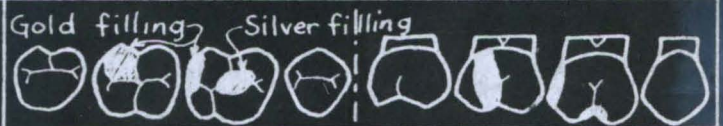
CROWNED TEETH . . Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



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

Large size, white teeth.
 Spaces: R7-5, 5mm; L5-8, 15mm; L4-3, 1mm; R4-3, 1mm; L15-13, 9mm.
 L4 DO cavity.
 R14 arrested decay shown by cross-shading.
 Dark brown lingual stain.
 Lower incisors, incisal edges worn.

95

CB

Graves Registration Form No. 1 (Revised 1 Sept. 1945)

REPORT OF BURIAL

28 July 1945 Date

UNKNOWN X-1230

Unknown Unknown

Last Name First Initial Rank Serial No.

Unknown

Unit
A/B
Organization

Vic Nijmegen, Holland

Est 20 Sept. 1944

KIA Cause of Death

1500 28 July 1945

U.S. Military Cem. Margraten

Holl VK645482

Time and Date of Burial Name of Cemetery Name or Coordinates of Location

274

11

Plot Number

Cross

Grave Number Row Number Type of Marker

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

If No Identification Tags How were remains identified?

REBURIAL

What means of identification were buried with the body? Previously buried in Canadian Military Nijmegen, Holland
 Grs Tag Form #1 Plot 2 Row 5 Grave 1

To determine Right or Left use **Deceased's** Right and Left.

Who is buried on :

Deceased's Right : Unknown X-1232 Name Serial No. Rank Organization 273 Grave No.

Deceased's Left : Eilman Name 36835653 Serial No. Rank Organization 275 Grave No.

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 Name

Address

Religion

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

None

Evacuated by 3060 QM Gr. Reg. Co.

Edwin H. Miller
 Signature of Officer or other person reporting burial
 EDWIN H MILLER 1st Lt. QMC
 603rd QM Gr. Reg. Co.
 Verified by G.R.S. Officer

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. :

4		4
3		3
2		2
1		1
Thumb		Thumb
Left Hand		Right Hand

TOOTH CHART

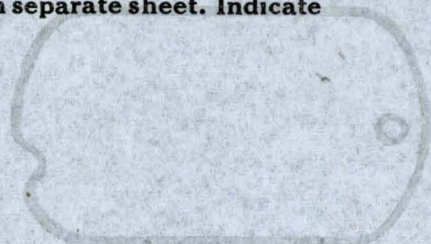
	Deceased's Left															
	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Upper	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Lower	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8

Indicate: missing natural teeth by X ; crowns by O ; fillings by □ ; Bridges by C linking anchor teeth ; replacements by artificial teeth X

Characteristics :

Other Data :

If this is an Isolated Burial, make a Sketch of the Location, oriented with Permanent Landmarks. If more space needed attach separate sheet. Indicate North.



GASG DATED
Form No 10

9-7-45

REPORT OF INVESTIGATION AREA SEARCHING

To be completely filled out and attached to each copy of GR Form 1, "Report of Burial" when disinterment is accomplished.

1. UNKNOWN (6) X-123030
(Full name of deceased) (Rank) (ASN) (Organization)
2. State if identification tags were attached to remains, how many, and where attached No identification tags.
3. Give exact location from which disinterred, furnishing coordinates and map series used Canadian Military Cemetery, Nijmegen, Holland
Grid Coord. 691595 Sheet 12 1:25,000
- NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION IN WITH PERMANENT LANDMARKS.
4. Full name of cemetery (include plot, row and grave if organized cemetery) Canadian Mil. Cem. Nijmegen, Holland Plot 2, Row 5, Grave 1
5. Approximate or established date of death (state which and give basis for date selected) (est) 20 Sept 1944 Condition of body.
6. Approximate or established date of burial (give basis for date established) 26 June 1945 Reburial by (2nd Canadian Gr. Reg. Unit)
7. Manner in which grave was marked and all information contained on the marker Wooden cross - Unknown American Soldier.
8. List personal effects found in possession of civilian or unauthorized military personnel, furnishing name and address of individual concerned
None
9. Names and addresses of all persons questioned concerning death or burial and information each furnished (contact local Mayor, priest, cemetery caretaker, those responsible for burial and any other possessing important information)
Unable to obtain actual date of burial due to Canadian Graves Reg. Unit being behind in cemetery administrative work.
10. If buried in a coffin, give description and markings
11. Action taken Disinterred and evacuated to Margraten Cemetery.

Disinterment approved by Deputy Director of Graves 1st Canadian Army.
Disinterment and *reburial/burial made by 3060 QM Gr. Reg. Co.
Date of *burial/reburial 28 July 1945
Place of *burial/reburial US Military Cemetery, Margraten, Holl. VK6454f
Plot LL Row 11 Grave 274

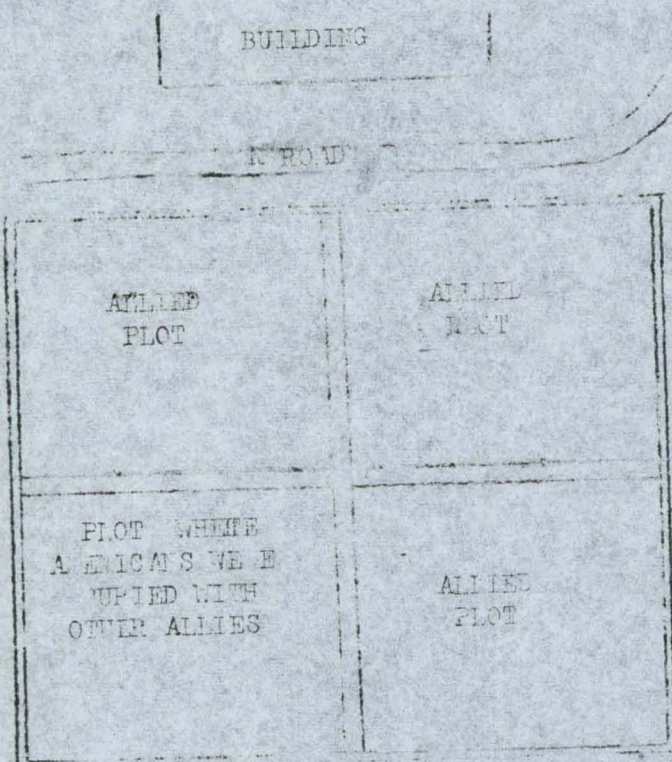
NOTE: Additional particulars regarding investigation will be placed on reverse side.

David Gulmer
Signature of Investigating Officer

*Cross out word not applicable

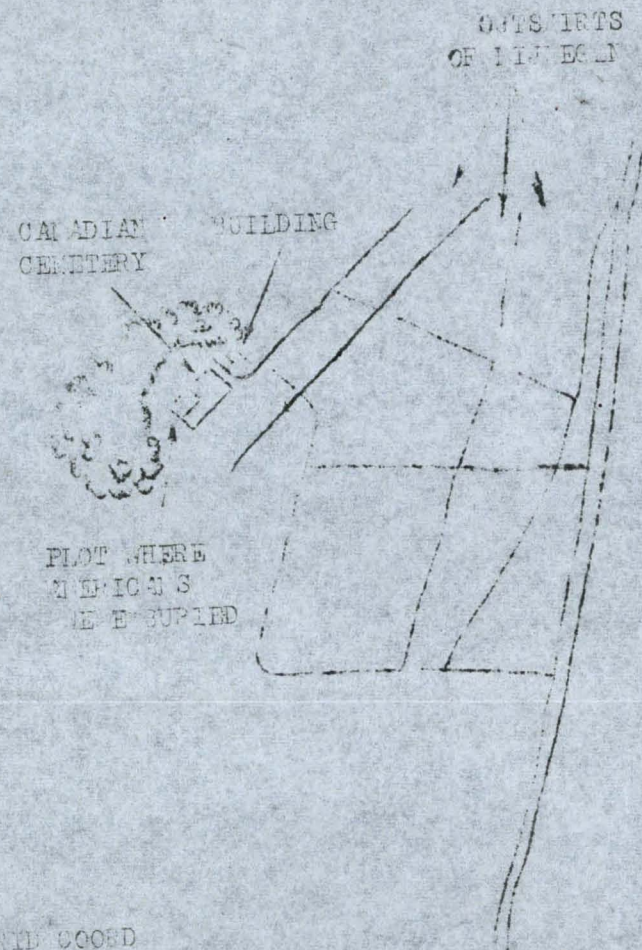
Sgt.
Rank

32587378
ASN



- 1 UNK X-1228
- 2 UNK X-1230
- 3 UNK X-1231
- 4 UNK X-1232
- 5 UNK X-1233
- 6 UNK X-1234
- 7 COLE, J.L.
- 8 EILMAN, R.H.
- 9 BURPUS, J.
- 10 ALTMAN, F.I.
- 11 GOODINGTON, R.E.
- 12 REED, R.
- 13 BRADF, W.

PLOT DRAWN TO LARGE SCALE



GRID COORD
695-531

MAP REFERENCE
GENSHEET 1:25,000
SHEET-12
SEC 10 DATA

TO AIDEN
↓