→ FILE IDENTIFICATION TOPPER

FILE NUMBER	2 VETII. /min	,)
Unk. 29	2 port	<u>/</u>
SUBJECT	Henri) hopelle Belgin	N
Cavelled	Cil # Open grave. assigned	,
	Letter dated 11/2/48	· ·
OMC FORM 1191	25-637	27-3,760

91

1. FILE UNDER NO.

293 - Unk. Belgium X- 554

(Henri Chopelle)

SYNOPSIS

2. TYPÉ OF DOCUMENT:

TELETYPE

3. DATE:

24 DEC 48

4. FROM:

OWO

5. TO:

CG AGRC PARIS FRANCE

6. SUBJECT:

W C L - 32074

AUTH GRANTED TO CANCEL X-553, X-554 & X-555 HENRI

CHAPELLE

AGRC 7850 IS MC IN NO 65348 (14 DEC 48)

7. DOCUMENT FILED UNDER NO.

293 - Unk. Belgium (Misc)

(HenriChapelle) (X-55

(X-553 - 5

rtb

INSTRUCTIONS.—Enter after the above headings information as follows:

- 1. File classification under which this cross-index sheet is to be filed.
- 2. Appropriate term, such as: "ltr," "memo," "1st ind," etc.
- 3. Date of Document.
- 4 and 5. Enter either or both, as applicable.
- 6. Brief and comprehensive synopsis of the content or subject matter.
- 7. File classification under which the document is filed.

QMC FORM 351

CROSS-INDEX SHEET

-63774-1 U S GOVERNMENT PRINTING

B	DISINTERMENT DIRECTIVE									
$\{(j)\}$	CECTION A		DIRECTIVE NU	MBER		DATE				
•	SECTION A — NAME AND BU	RIAL LOCATION OF DECEASED	1240	0000	00	15 07 46				
AME			SERIAL NUMBER	RANK	ARM					
		UNKNOW	NX-000 554		0	DAY MONTH YEAR				
METERY		244			9 190	DISPOSITION OF REMAIN				
HENR!	CHA	PELLE + EU	PEN		0	1201 80 CODE DIST. PT.				
OT ROW	GRAVE	COUNTRY				CAUSE OF DEATH				
4M E	38	BELGIUM	2-			6				
AME AND ADDRESS			ONSIGNEE AND NEXT OF KIN		And the state					
HENRI-CH	APELLE,		(BY ADMINIS		E DEC	ISION)				
AME		SECTION C — DISIN	RANK DATE OF DEAT	And the second s	DAT	E DISTINTERRED				
DENTIFICATION TA	G ON ORGA	NIZATION UNKNOWN	RELIGION	IDENTIFIC	ATION VEF	RIFIED BY				
and the second		SECTION D — PREPAR	ATION OF REMAINS FOR SHIP	MENT	1, 13					
ATURE OF BURIAL		M	ONDITION OF REMAINS	F-1 -	Ą	FM				
THER MEANS OF IDI	ENTIFICATION	U	HILL		- 4					
NOR DISCREPANCII	ES 1		0,16	1000	2					
MAINS PREPARED A	ND PLACED IN C	ASKET			1					
ATE		BY								
ASKET SEALED BY			EMBALMER (Signature)							
SKET BOXED AND	MARKED		SHIPPING ADDRESS VERIF	IED BY						
(TE	ВУ			F-15 1						
I hereby and that the re		Il the foregoing operations vis correct.	were conducted and acc	omplished u	nder my	immediate supervision				
The section			SIGNATURE	OF GRS INSP	FCTOP	<u> </u>				
			SIGNATURE	OF ORD INSP						

FORM 15 MAR 46

1194

iraves Registration orm No 1 Rejised 1 Sept. 1943)	R=p∩R1	F OF BUR	, , , , , , , , , , , , , , , , , , ,	st plate	ted
Action 1 Sept. 1943)		630 AND AR 30-1815	2 3~~ 5~	1 December 1911	7
()} 	Belevin	17/0000	Ladink !	Unk	,
Unknown X-554.	First' -	Jan C	TO CEES CO	Serial No (
- Un	k		' Unk		
		st 17 Jan 45	Organization	M W Body	
Vic. Krinkelt, B	ELETON TO	Date of Death	1	Cause of Death	,
		CHAPELLE, Belg	ium N	or Coordinates of Location	
Time and Date of Burial	9	Name of Cemetery	.	ross ' >	J
Grave Number Row Nu	mber	Plot Number		Type of Marker	
sposition of Identification Tag	s. Buried with body ,Yes	□ No □ Attache	d to Marker Yes	No 🗆 🦰	,
No Identification Tags				D. Diet	· 313131
How were remains ident	fied? Unknown	X-554 consists	of extra rea	mains Irom flot	e Mining
•	ном 1, 0 33428209	Grave 4, Henri	habette (pu	DEOMINENCE ESC ES	
í		7	. /	· · · · · · · · · · · · · · · · · · ·	\mathcal{Y}_{n} .
	Auth.: `	Letter, Har ls	t Zone, AGRC	, 314,6(0) dtgl	#11 Dec 1
What means of identific	cation were buried with the	e body?		, !	
•	,				
	• •			· 950	
			general .		•
determine Right or Left	use Deceased's Righ	it and Leit.	, /	-	
ho is buried on:	. X-553 Unk	Unk	Unk	37/	ye ^F 5
eceased's Right:		al No Rank	Organizati	on Grave No.	
eceased's Left: Unl	x-555B / Unk	,	Unk \	/ 39	
eccased s Leit.	Narre / Scrip	al No Rank	Organizatio	on Grave No.	•
Signature or Name, Rank and if p	orsible Organization of person	filmushing above Data when o	ther than officer reports	ng burial.	
Signature or Ivanie, Kana and it		- Lander College	•	/	
8	If print	t'of identification tag is n	ot affixed fill in belo	w / .	
y	,				
i i	Emerge	ency Addressee	7	agric	,
0	. .	•			
•	.		Address	1	
	· J			· AU	7
	Religio	n		- NAT	
ist only Personal Effects	ound on Body and d	isposition of same:	V		1.00/
	•	•	•	11/23/	NY
•		This correct	ted Report of	Burial prepar	ed '
	•	at Hq. 1st 2	Zone, AGRC, b	ον: G, ,	7.1
	•	,	0	À	met.
	•	W 11	11/1	A XI	- [
		Steller	SCOTT, 1st	t. Inf.	
•	,		r or other person report		 •
•	, ,		•		
•	MAR 3 - 1948	Asst Opera	tions Office:	r.	· · ·
	שרשו בוואות	Vons	ed by G.R.S. Officer		•

		Yes.	_ ~							_	_
	•				Fingerpr	rints of Bot	h Hands. I	DENTI"S	obtain a		*
					ollowing: Height:	f Fingerprin	Laun	ose You Can, a	and fill in		
flett Hand	: 23				Weight. Color of Color of Race	Eyes: Hair:	Wear	ber of Rifle: Glasses? oth Chart Att	tached?		
				perso	nnel presen	t, fill m a too	oth chart below	tooth chart, if i w) In space bel deformities, etc.	no medical iow, locate,		
	N										2 Right Hand
							•	•			Rig
				Note proba	below any ible organiza	identifying cl ation of decta	nes found, sue sed, etc.:	ch en letters, pl	botographs,		-
	Thumb								- -		Thumb
						Ye a.t.		170-11			
	os:	∞ 1001	H CHAI			orient	ed with Perm	ed Buriai, mas innent Landm eet. Indicate	arks. If more	f the Location, space needed	
	7		, Bridges			ausci	separate su	eer muicate	Norta.		
Ę	80	9									
Deceased's Left	ř.	2	ž ix								
cease	*	4	fillin								
ă	۳.	ω ,	oy o	 				-4	11/11/2		
	~ ~~~	2	wns by ar					MILIE.	11/13/		
		-	c, cro	1				SV	F GO X		
	<u>-</u>	7	by X						A ONO		
		- 	teeth 1, rep			•		2. Coj	E REFLECT	12113	
Right		ξ.	itural r teetl					13	State	>	
Deceased's Right		20.	ng ng nochou	ا ق				VI	91110	7	
)eceas	9	9	missi sing g	tristic)ata:	•			~		
Н	7	7	Indicate: missing natural teeth by \times , crowns by \circ , fillings by by \circ inking anchor teeth, replacements by artificial teeth $\overline{\times}$	Characteristics	Other Data:				•		
		∞	Ind by	Ö	ő			,			

7

Upper

Lower

<u>STATEMENT</u>

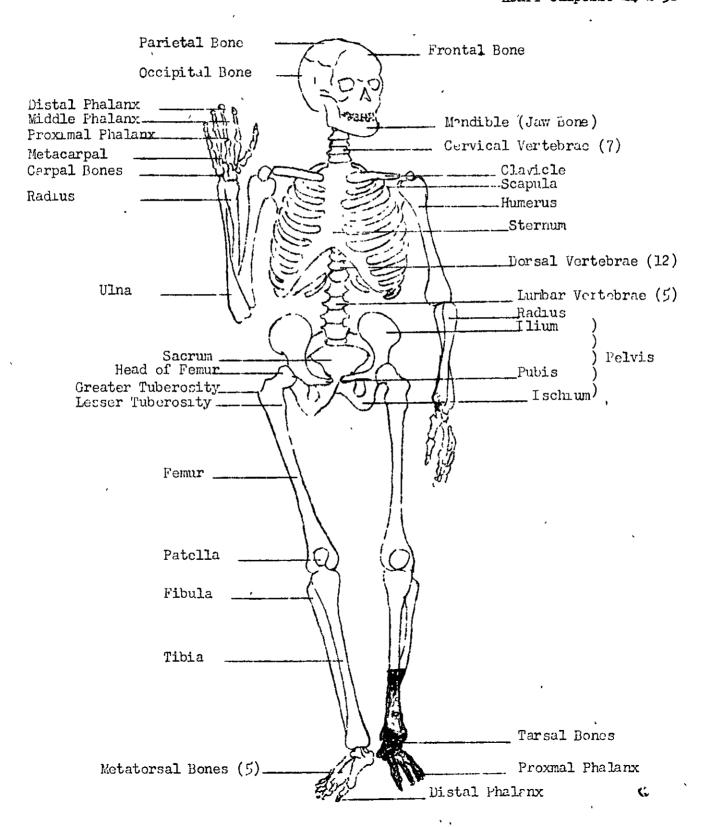
One additional left foot, and part of the left leg, ina and infantry boot, , was found with the remains of Brueckner, Leo F. The body of Leo F. Breuckner was wrapped in two blankets, and the feet of the body, both left and right, were still attached to the legs but without shoes. It is not possible that this additional foot could belong to the remains of Leo F. Breuckner.

R. N. CONRAD

Embalmer Supervisor.

BLACK OUT PARTS RECEIVED AT CEMETERY

SKELETAL CHART for X-554, Henri Chapelle M4-2-38



WP.

1. FILE UNDER NO.

293 - Unk. Belgium X-553

(Henri Chopelle)

SYNOPSIS

2. TYPE OF DOCUMENT:

TELETYPE

3. DATE:

24 DEC 48

4. FROM:

CQMG

5. TO:

CG AGRC PARIS FRANCE

6. SUBJECT:

W C L - 32074

AUTH GRANTED TO CANCEL X-553, X-554 & X-555 HENRI

CHAPELLE

AGRC 7850 IS MC IN NO 65348 (14 DEC 48)

7. DOCUMENT FILED UNDER NO.

293 - Unk. Belgium (Nisc) (HenriChapelle) (X-553 - 555)

rtb

tigh.

INSTRUCTIONS.—Enter after the above headings information as follows:

- 1. File classification under which this cross-index sheet is to be filed.
- 2. Appropriate term, such as: "itr," "memo," "1st ind," etc.
- 3. Date of Document.
- 4 and 5. Enter either or both, as applicable.
- 6. Brief and comprehensive synopsis of the content or subject matter.
- 7. File classification under which the document is filed.

FILE IDENTIFICATION TOPPER

FILE NUMBER	- < -
	3
SUBJECT (Gren grave assig	ned) C1 L # Dh 11/2/49
	Tolons! Olya 18
-	fem sure selle.
CMC coon 1.10.1	

OMC FORM 1121

|--|

DISINTERMENT DIRECTIVE

[]	U)					<u> </u>		,						
, \	ン ,	SECTI	DN A-					DIRECTIVE N				DATE	_	
		NAME	AND BUF	IIAL LOCA	TION OF DEC	EASED		1240	O	0000		15 O		48 YEAR
NAME		·					SERIAL NU	MBER		RANK	ARM	DATE OF DEA	TH	
		NKKV	IOWN			7	X-O	00553			Q	DAY MO	NTH .	YEAR
CEMETERY						· · · · · · · · · · · · · · · · · · ·						DISPOSITIO		
HEN	RI	CHAP	ELLE	-	EUPE	N					0	1201 CODE	Bisid	O ·
PLOT	ROW	GRAVE		COUNTR	Y			1				CAUSE OF DE		
414	2	37	,	BELO	21 LIM						,	6		•
						ION B — CO		D NEXT OF KIN						
NAME AND							NAME	AND ADDRESS	OF	NEXT OF KIN				
HEN	RI-CH	IAPEL	LE,	BELG	UM				•	i				
							(8)	Y ADMIN	181	TRATIVE	DEC	(MOIRE		
<u></u>	·							 						
NAME					SECTION SERIAL NUM		RANK	DIDENTIFICAT			DAT	E DISTINTERRED		
				,					.,		J.	L DIGITIVIERRED		
			,	·			<u> </u>				<u> </u>			
	ATION TA EMAINS	G ON	ORGAN	IIZATION				RELIGION		IDENTIFICATIO	ON VER	IFIED BY		
	ARKER				UNKN	OWN						MAA4E A	NID TITLE	-
					SECTION D	PAEPAR	ON DETREM	AINS FOR SHI	PME	<u> </u>		NAME A	ND THE	<u> </u>
NATURE OI	F BURIAL				5		CONDITIO	N OF REMAIN	S					
OTHER MEA	ANS OF ID	ENTIFICA	TION	•	ij		, j		5					
MINOR DIS	CREPANCI	ES 1			 							•		
						0	Ι.	,						
7								7	C)					
REMAINS P	REPARED A	ND PLAC	ED IN CA	SKET				<u> </u>		Carried Street		 .		
DATE CASKET SEA	ALFD BY			 	B\	<u>Y </u>	FMRAIME	R (Signature	-)					
							Limbaline	v (Diguatore	<i>3)</i>					
CASKET BO	VED AND						- CIUDALIA	,		<u> </u>				
CASKEI BU	XED AND	MAKKED					SHIPPING	ADDRESS VERI	IFIED	вт		•		
DATE		ВҮ					<u> </u>				· · · · · · · · · · · · · · · · · · ·	<u> </u>		•
and th	hereby nat the r	certify eport o	that all bove is	the for correct	egoing ope	erations we	ere conduc	cted and ac	com	plished unde ,	er my	immediate s	upervi	sian
					•				-					
								SIGNATIO	FOF	GRS INSPECT	7 8			
I Prep	are Disc	repano	y Repor	t QMC	Form 1194a	for major	r discrepai		ie Of	OKO INOPECIO	<u></u>			
						•	-			~				
							ì			•				

OFFICE . THE QUARTERMASTER GENERAL OF THE ARMY

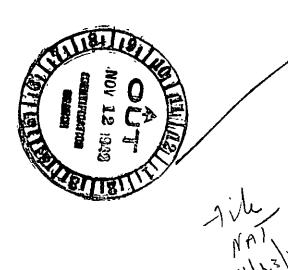
INTRAOFFICE REFERENCE SHEET

DUETHOUR AND DATE

DUETHOUR AND DATE

				DUE-HOUR-AND DATE
NO	PROM—	TO	DATE	MESSAGE
1	Chief Id Br Id Sec	Chief R/R Br Attn Mr Shan		Attached forwarded for cancellation and send to file.
e bm				METZ

Incl: R/B's for X-553, X-554, X-555, X-556 Henri Chapelle





-



_ , _ , _ .

I

1. ·

•

ł

Graves Registration Form No 1 Revised 1 Sept. 1943)	PORT OF BURIAL	11 December 1947
43 126	TM 10-630 A.N.D. AR 30-1815	(l) Date
Unknown X 553 Last Name	First Parket Coop Uni	k Unk Senal No
Unk		Unk
Vic. Germont, Belgium Place of Death	Est 17 Jan 145	Shrap, Head Camp of Death
1700 – 19 Jan 45	HE RI CHAPELLE, Belgium	
Time and Date of Burial	Name of Cemetery	Name or Coordinates of Location Cross
Grave Number Row Number	Plot Number	Type of Marker
Disposition of Identification Tags. Buriet	d with body Yes 🔲 No 🗀 Attached to Mai	rker Yes 🗆 No 🗀 📈
If No Identification Tags How were remains identified?	Unknown X-553 consists of ext Plot EEE, Row 10, Grave 189, E., 35369416).	ra remains segregated from Henri Ohapelle (ADA'S, William
What means of identification we	Auth.: Letter (Eq 1st Zone, re buried with the body)	AGRC, 314.6(0), dtd 11 Dec 47
•		
To determine Right or Lest use De	ceased's Right and Left.	
Who is buried on: Deceased's Right: Unk X-55	Unk Unk Serial No Rank	Unk 36 Organization Grave No. Unk 38
Deceased & Leit.	Scral No Charles	Organization Grave No.
Signature or Name, Rank and if possible Or	ganization of person furnishing above Data when other than If print of identification tag is not affixed	
6	Emergency Addressee	Name
	Addre	\$5
	Religion	
List only Personal Effects Found of	-	
	This corrected at Ho 1st Zone,	Report of Burial prepared AGRC by: TT, 1st Lt., Inf.
	Signature of Officer or other Asst Operations	
HQ. SOS 22/9/43 380M/8/15219	AR 3 10 A 9 Venfied by G R	S Officer 7

ſ			(*	4	•					1	1	
					IF D	ECEASE	ED UNII	DENTI	?D			Ĺ
	•			com		of Fingerpra		If unable to ose You Can,		_	4	
					Height: Weight		Laun	dry Marks: ber of Rifle:				ı
	•				Color of	Eyes:	Wear	Glasses?	441 90	İ		į
j	ಬ				Race	Hair:	15 1 0	oth Chart A	ttached?	•	65	
				perso	onnel prese	nt, fill un a to	oth chart belo	tooth chatt, if w.) In space b deformities, etc.	elow, locate,			
1,6												-
Left Hand	ы										62	Right Hand
7.											ŀ	ıght
-					•		•					×
- 1											Ì	
		•		prob	able organi	zation of dece	ased, etc.:	ch as letters, p	photographs,		_	
ļ												
											Ì	
		•										
	<u>۔</u>											
	Thumb								_		Thumb	
	5								•	İ	F	
											į	
ľ		TOOT	H CHA	RT ,	(1	If thi	s is an Isolate	ed Burial, ma	ke a Sketch o	of the Location, e space accded	•	
		œ	5			attac	b separate sh	ect. Indicate	North.	e space meeded		
	7	7	, Bridges									
မ	9	9										
Deceased's L	ĸ	20	<u>ي</u> اخ		1					_		
ease	4	4	fillin							(L).		
č	63	m	fictal					, ,		1		
	C3	74	arti					[-	,			
1		-	crowi ts by					زدر	\$ হয়	` <u></u>		
İ			×					يتيا.	١	1 / /		
		2	h by					/				
_		m	h; re			•			VET 15	11,		
Deceased's Right		4	Indicate missing natural teeth by X, crowns by O, fillings by by O junking anchor teeth; replacements by artificial teeth X		١ ،		,			•		
s.po		 	ng ng nchoi	1			-					
ceas		10.	ากรรม เกฐ ัณ	Characteristics	l, ig	•						
ă		9	를 다 다	acter	Other Data:							
			ndica vy C	Char) de							
1	Upper	Lower										
	- Phr											

STATEMENT

13 October 1947

I, the undersigned, state that on processing on 13 October 1947, the remains disinterred as Adams, William E. Pfc, 35569416, from Plot EEE, Row 10, Grave 189, the following items were found in addition to the complete remains, and could not possibly be a part thereof:

1 - Combat Boot, right, size 9½B
1 - Wool Sock
Right Foot, less toes
2 inches of right tibia
1 inch of right fibula

s/ESHOWD C. LYONS
ESHOWD C. LYONS
Embalmer Supervisor

CERTIFIED TRUE COPY

WILLIAM L. SCOTT

1st Lt. INF Asst. Operations

Officer 1st Zone

X-553

SKELETAL CHART

THE ADAMS

,	Parietal Bon	<i></i>	Frontal Bo	ne	
Distal Phalan Middle Phalan Proximal Phala Metacarpal			Cervical	(Jaw bone) Vertebrac (7)
Carpal Bones Radius			S	lavicle capula umerus	
				Sternum Dorsal Vertel	orae (12)
Ulna \				_Lumbar Vert _Radius _Tlium)	ebrae (5)
Greater	Sacrum id of Femur Tuberosity 'uberosity)	?elvīs
_	Femur				
	Patella		o Z	CERTIFIED TRU	01 -
	Fibula _		´ 1.	MILLIAV L. SC st Lt. Asst. Operati	OTT Inf ons
	Tibıa		C	Officer 1st Z	one
			· · · · · · · · · · · · · · · · · · ·	Tarsal Bone:	S
Metai	torsal Bones	(5)	_Distal Pha	Proxmal Phai	lanx Č

WITH B. ADA 18

AGRC LORM No. 11 Revised 5 January 1946

CHECK LIST OF UNKNOWNS

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

			(e	nknown X 50 emetery HEFRI ot HEFRI	で3 CHAPELLE Partie	ر 189 ع
1 Arrived at ceme	tery -			10 OCT 194	7	
2 Place of death		our) (date)				
rice of death	- (unuse	of closest town)		(coordinates and letter	Prefex, maps)	_
	-	- (Sheet	scile and serials used)			
Remains recover	ed or disinte	ried by		(name and organ zation)		
4. Exacuated to Ce	metery by	-	- (name	and organization)		
Description of a surements).	dothing and	equipment :		not fit, obtain s	ize from bo	dy mea-
			Clothing Markings		cate unusual rear, tear, re	-
Item .	-			-		
rreaugear -	one					
	7.5		-	-		
Raincoat	l'one	=		_		•••
Overcoat	lion	.e _			-	
Jacket, Field	-	None_	÷ =		-	-
Ja c ket, Combat	-	None	-	-	-	
Mackinaw = -		No	ne			
Sweater			lione	-		-
lacket, HBT		-	None	-		
Shirt, Wool OD			Non	re	_	
Indershut Wool			<u> </u>	None		
Indershirt, Cotton	-			llone	_	
Crousers HBT			-	_E_ne	-	
Frousers, Wool OD					one _	

None Belt, Web Hone Drawers, Wool Hone Drawers, Cotton Lone Leggins, Wool (Note unusual lacing) wool One Socks, Collon Combat Boot, size 9 1/2-B One *Shoes (type) None Overshoes Web Equipment Fone (Type) Hone (Other atom) (Other item) *If body is nude, sizes of these items should be computed by measuring the remains Chevrons or Lone Insignia (type & location shirt jacket coat, belinet) lone Shoulder Patch Does clothing indicate that deceased was a member of the AFF Ground or Naval-Forces Description of Remains UTD Age UCD Height UTD Weight UTD Description of wounds UTD UTD Bandages or dressings Scirs cleagth width lombions UTD Tattoos (Number location - illustrate on sep, pages UTD Outstanding miles, warts or birthmarks (ves-no description location) UTD Sunburn or tan, other than hands & face עיייט Complexion hight med dark cloar pumples pocks, freekies) UTD Build (large 1st thin muscular) UID Han (color, length quantity curly wave straight, whorls, or definite parting)

UD Hair (baldness, widows peak, distinctive cutting or other characteristics) UTD UID Sideburns Mustache Board or (color, setting, shape) (color *ize shape) UID Goatee (light, color, extent) UID UTD Eyes Eyebrows (color, setting shape) (color bushiness extent across nose) שביט עביט Nose Ears (size, shape straight) (size set close to or far from head) UID Mouth Lips (large, medium, small) (small large, full) UID Teeth (white, size, uneveness, spacing, noticeable crowns, fillings, extract) UD Chin (prominent, receding, pointed dimple double) UID מבייט Jaw . Circumference of head in inches (large, small, normal) (hat band) UTD UTD Neck Larynx (size, length short, normal wrinkled) (prominent, normal) UTD Shoulders Arms (broad, straight, small, rounded) (length, muscular, color) (extent and quantity of hair) עדש Hands UD Fingers (short thick, long, slender, size of knuckles, missing fingers or joints) (Unusual characteristics of fingernails) UID Chest (size of nipples, color, quantity & extent of huir, largo, small normal) aist ____ UTD (size of navel, appendectomy amount) Back (quantity & extent of hair) Circumcision UTD Pubic hair (quantity & color of hair) (color) UD Herniaplasty (yes-no , location) (inseam, muscular, knock kneed, bowed, normal, quantity, color & extent of hair)

- 3 -

Feet

UID
(size, corns, callouses, flat)

Toes

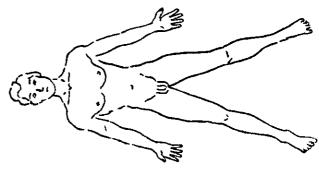
UTD (stender strught, crooked, overlap)

Evidence of healed factures

ביי יי

(nose arms, legs, etc.)

9 Black out parts of body not received at cemetery .



10 Have fingerprints been placed on Report of Interment

No

(5 es-not

If not, explain. _ . . Hands missing

11 Has tooth chart been prepared ...

No (Yesono

It not, explain

Head missing

On processing remains of William E. ADAMS, ASN 35369416 an extra foot with snoe and sock was found. As William E. ADAMS was complete the foot was segregated and made into Case "B".

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

CERTIFIED TRUE COPY

ESMOND C. LYONS

Officer's Name

WILLIAM L. SCOTT

lst Lt. Inf

Asst. Operations Officer 1st Zone

Rank

Service

Organization

FILE IDENTIFICATION TOPPER

			· · · · · · · · · · · · · · · · · · ·
FILE NUMBER UNK 293 X 556	7	, , ,	
		1 1 1 1 A	· · · · · · · · · · · · · · · · · · ·
SUBJECT / Jp ,	XVIII . DOW	0- 11KW	man (and)
Menre \	a second		grim)
	1/04 . 0		11/
1 (A al colle	al Clish t	1	- 11/0/4
- muun		- delle	11/2/10
May as	. , ' '	7	
1 () per y com	. assigned	·)	/ /
ONC AND LAND			
OMC FORM 1121	V	/	

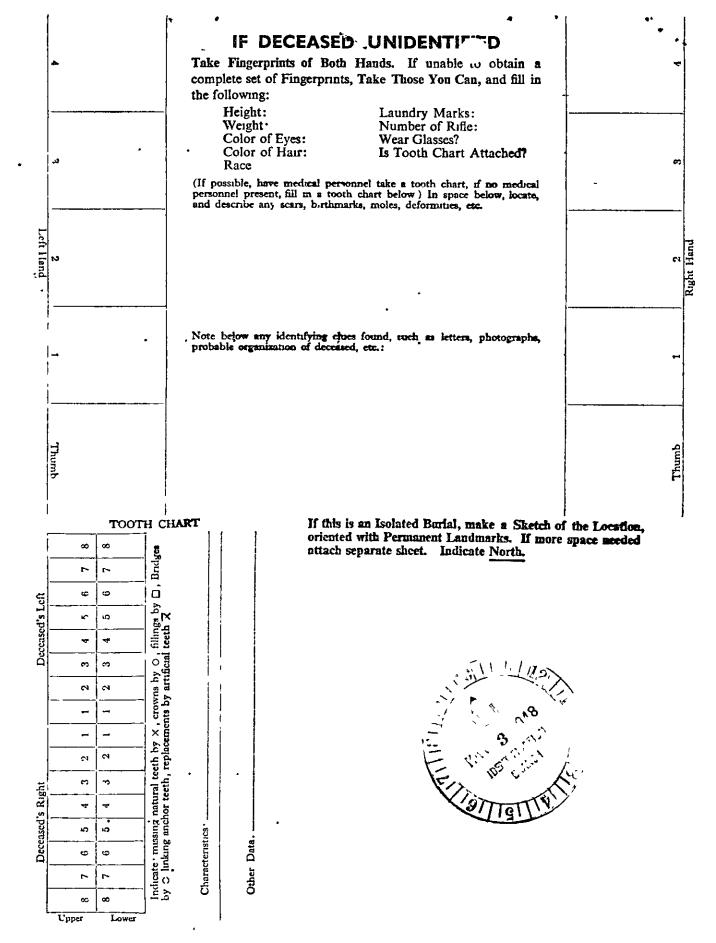
x-556 Cancelled. See x-553



R				DISI		NT DIREC		3	DA		
0	SECTION A	BURIAL LOCA	ATION OF DECEASE	0		1 24 0		000	1	Y HTMOM YAC	EAR
ME	The state of the s		UNKN	A LONG CONTRACTOR	SERIAL NUM		RANK	Â	, ,	DAY MONTH YEDISPOSITION OF REM	EAR
METERY	CH	APEL	LIE +	CUP	EN		(Max.)) 1	CODE DIST.	10
OT ROW	GRAVE	COUNT	RY GLGIUM	-h-						AUSE OF DEATH	
			SECTION	B-CON	SIGNEE AND	NEXT OF KIN		22 KIN		100	
MENRI - CH						ADMIN		TIVE I	DECI	SION)	1
						DATE OF DE	TH		DATE I	DISTINTERRED	1
IAME			SERIAL NUMBER		RANK	DATE OF DEA					
								NIFICATION		and the second of the	
IDENTIFICATION TA REMAINS MARKER	G ON	ORGANIZATIO	SECTION D —		TION OF RE	MAINS FOR SHOW OF REMAIN	IPMENT			NAME AND TITLE	E
NATURE OF BURIAL			11				P.				
OTHER MEANS OF ID	DENTIFICATI	ON	A		المنا	De	lei	EQ.			
MINOR DISCREPANC	CIES 1									628	
REMAINS PREPARED	AND PLAC	ED IN CASKET								E RED	
DATE			BY		EMBAL	MER (Signatu	ıre)			1.	
CASKET SEALED BY											
CASKET BOXED AN						IG ADDRESS \					
I hereb	y certify report o	that all the	e foregoing operrect.	erations	were con	ducted and	accompl	ished und	er my	immediate super	rvisio
	P							GRS INSPEC	TOR	- 7	

CRAVE, REGISTRATION FORM NO 1 Purised 1 Sept. 1943)	PFPORT	r of Bu	JRIAL `	الرسه ۱۹	mber 1947
761	= =	630 AND AR 30-1		11	Date
Vinlenorm V-556	relgium	V Alkori	Cherry	(le) Ur	ık
Last Name	First	Initial	Rank	Serie	l No
Unit			=	nization	
lerschied, Ger. Place of Death	22	Feb 45 Date of Death	Trumatio	Cause of Deat	
1400 - 25 Feb 45		IRI CHAPELLI Name of Cemetery	E, Belgium	Name or Coordinates	
Time and Date of Burial	. 🛭 🖢 _	19.		Cross	
Grave Number Row Number		Plot Numb		Type of	
Disposition of Identification Tags · B	uried with body Yes	B No A	ttached to Marker	Yes, I No I	· =
If No Identification Tags How were remains identified	Unknown Row 9, 3381467	Grave 175,	ists of extr Henri Chape	ra remains fi lle (DOROSH,	rom Plot 900, Theodore J.
What means of identification	Auth.: n were buried with the	Letter, He body?	q 1st Zone,	AGRC, 314.6	(0) dtd 11 dec
		1	•		
To determine Right or Left use	· Deceased's Righ	nt and-Left.	<u></u>	\	1
Who'is buried on:	, 2000000000000000000000000000000000000) }			
Deceased's Right: Unk X	_555C Unk		nk Uni	Organization	Grave No.
Deceased's Left:	me Sen	al No.	ink	Organization	Grave No.
Signature or Name, Rank and if possib	le organization of person	formushing above Data	when other than office	er reporting burial.	
	•	t of identification t			
	3	* **			
	Emerge	ency Addressee		Name	
[0	<i>)</i>				
1)		Address		
	ا المناس				
List only Personal Effects Four	Religio		me:		Y. S. 1 1
List only 1 croonar Lineas 1 odi	ie on body and d			- 1	
		. This	Actor 11	eport of Bur	Tall prepared
			lst Zone,		Jr a far
		, 7	60.	His	- " "
		WILLI	AL L. SCOTT	, ist it., I	nf.
	<u>-</u>	C	of Officer or other pers	on reporting bired	
		Asst C	perations C		,
HO. SOS 22/0/43 380M/8/15219	MAR 3 = 194	<u> </u>	Verified by G R.S C	Officer	

HQ. SOS 22/9/43 380M/8/15219



Unknown X-556 (HEURI CHAPELLE)

This case consists of the right tibia and right fibula. These bones were disinterred along with those of Theodore J. Dorosh, but it has been determined that they could not possibly be a part of the remains of Theodore J. Dorosh.

RICHARD N. CONRAD.

US DA Civilian, Embalmer Supervisor.

These remains were processed under my personal supervision and the undersigned agrees with the statement made by Mr. Conrad.

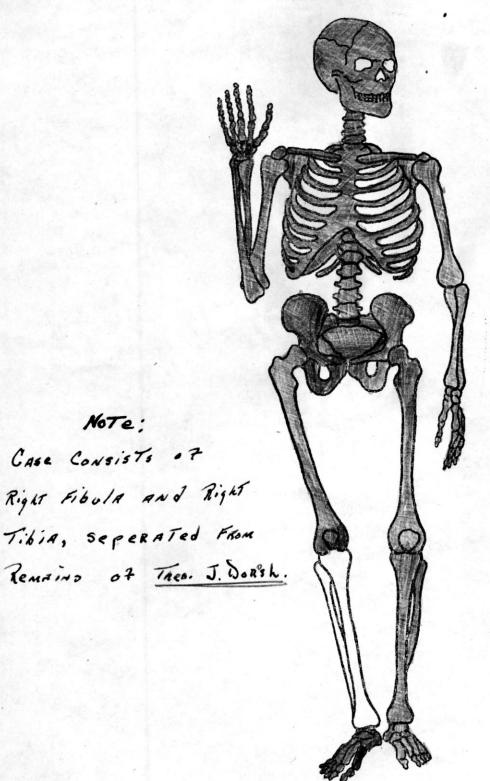
RAYMOND C. JOHNSON,

1st Lt., Inf., Liorgue Director.

SKELETAL CHART

X - 556 Henri Chapelle

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



NoTe:

FILE IDENTIFICATION TOPPER

FILE NUMBER	
Und. 293 V. 555	
SUBJECT Henri Yliapelle (Belgum)	
Cancelled Wil # Letter 11/2/48	
(Open grove assigned.)	I
ONC FORM 1/21	25-53727-3,750

KH!

1. FILE UNDER NO.

293 - Unk. Belgium X- 555

(Henri Chopelle)

SYNOPSIS

2. TYPE OF DOCUMENT:

TELETYPE

3. DATE:

24 DEC 48

4. FROM:

OOTIO

5. TO:

CO ACRC PARIS FRANCE

6. SUBJECT:

W C L - 32074

AUTH GRANTED TO CANCEL X-553, X-554 & X-555 HENRI

CHAPELLE

AGRC 7850 IS HC IN NO 65348 (14 DEC 48)

7. DOCUMENT FILED UNDER NO.

293 - Unk. Bolgium (Misc) (HenriChapelle) (X-553 - 555)

rtb

INSTRUCTIONS.—Enter after the above headings information as follows:

- 1. Fife classification under which this cross-index sheet is to be filed.
- 2. Appropriate term, such as:,"Itr," "memo," "1st ind," etc.
- 3. Date of Document.
- 4 and 5. Enter either or both, as applicable.
- 6. Brief and comprehensive synopsis of the content or subject matter.
- 7. File classification under which the document is filed.

QMC FORM 351

CROSS-INDEX SHEET

16_27774-1 H & GONTONNENT OPINTING CONTING

CRAYES REQUESTRATION		17 201 H	etter \
CRIVES RECEIPTRATION FORM NO 1 (Reveald 1 Sept. 1948) 27 1948	EPORT OF BU	RIAL	for Tolia
TO MAY DE	TM 10-630 AND AR 30-181		Date
JUNENOTH X-555 BULG	un ferre	Unk	Unk
Lesi Name	First Initial	Unk	a Schal No.
Unit .	B + 12 O + 11	Organization . *	
Place of Death	Est 13 Oct lili Date of Death		ompletely mutilate of Death
Time and Date of Burnal	HENRI CHAPKILE, Belgi		dinates of Location
	Man of Cametary	Cre	
Grave Number Row Number	Plot Number		pe of Marker
Disposition of Identification Tags Buried	with body Yes 🔲 No 🗹 Atta	ched to Marker Yes No	
If No Identification Tags How were remains identified?	These remains consisti	ng of eight (8) our	ces of elbow were
segregated from those of	Roy J. CHAPMAN, ASN 1	7086768, USMC Henri	Chapelle, Plot
G, Row 10, G ave 199, and Plot Mi, Row 2, Grave 39	per Auth. board of G	fficers, Hq. 1st 20	one, AGRC, Liege,
Belgium, and Hq, AGRC, P. What means of identification were	aris, France, 16 Feb 4	8	
What means of identification were	buried with the body?		7
	· ·		
	is all		1-1
Fo determine Right or Left use Dec	eased's Right and Left.	.\ `-	Sign
Who is buried on: LEHMAN. Jo	hn W. Jr 33429536	Pre Co C 15 Em	Bn 39
Deceased's Right: LEHMAN, do.	Serial No Rank	Orbinization	Grave No.
Deceased's Left: Unk X-556	Unk Un Rank	k Unk Organization	Grave No
A Same		O I garde a min	- ·
Elemeture or Name, Rank and If possible Organ	ization of person furnishing above Data whi	en other than officer reporting burial	
	If firmt of identification tag i	s not affixed fill in below.	
. .		*	
	Emergency Addressee	Name	
O	ij		
(CALLELL)		Address	
	Religion		/ . 0
List only Personal Effects Found on	<u>م</u> ا	,	· Va. 1
E Safe			THIT IN
	3	,	(1) Marie W
	\nearrow	?	Offerent of
Winter Comments	Was Il	* · · ·	\mathcal{V}'
	Hilleam Sie		. "
W	TILIAN L. SCOTT, lst L		perations Officer.
,	Signature of Off	ficer or other person reporting burial	<u>.</u>
	-		,

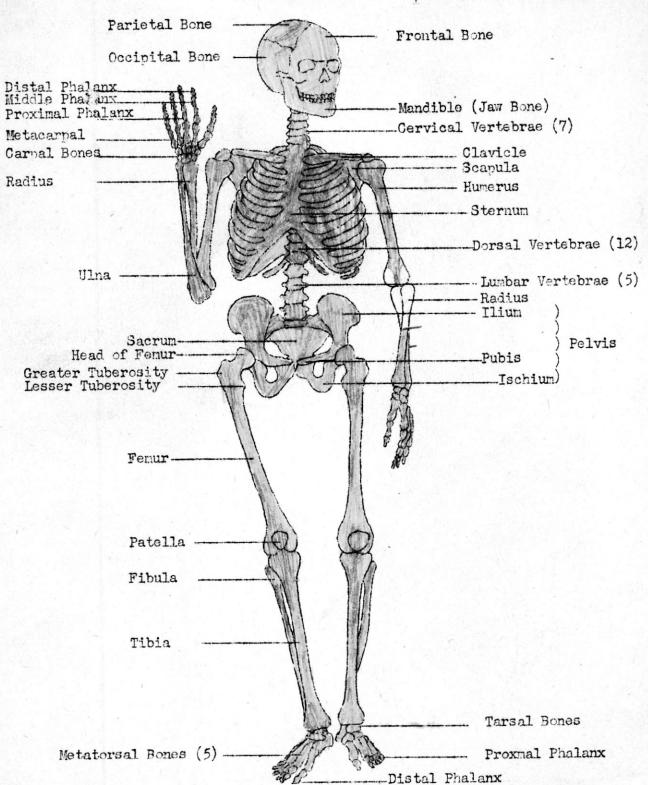
150. 108. 22/9/43 380M/8/15219

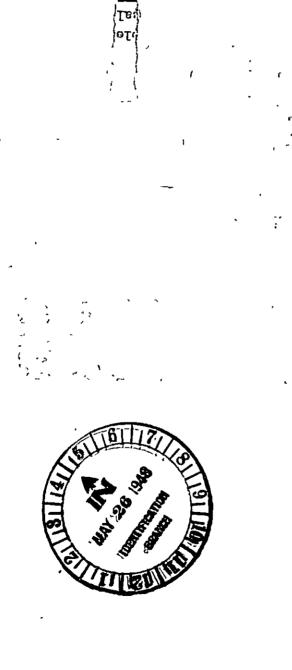
Verified by G R.S Officer

	!	- 1		•
	؍ ا		F IF DECEASED UNIDENTIFY	'']
		'		A
	-4-		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?	l l
	ł	\	Color of Hair Is Tooth Chart Attached?	8
	အ	,	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.	
	<u> </u> -		and describe any scars, buttimaries, motes, detormines, etc.	
,_		,		
Lett Hand		•		2
1		_		2 Right Hand
200			* **	甚
_	1			M
		ξ ;		
	ł		Note below any identifying clues found, such as letters, photographs,	
		ľ	probable organization of deceased, etc.:	· ·
			***************************************	₹
			•	
	-			
	1			
			,	
	17			
				, , dumpd
	Thumb	ľ	•	ļ F
	1	-	·	1
		•		1
	ł	TOOTH CHA	RT If this is an Isolated Burial, make a Sketch o	f the Location
;		TOOTH CIM	oriented with Permanent Landmarks. If more	snace needed
		∞ ∞ mg	attach separate sheet. Indicate North.	Space Inches
	<u> </u>	7 8 7 8 Bridges	•	
		Bri		
		φ θ		
3	_ ك	>>		
-	2	ಸ ಪ್ರಾಸ್ತ ಸ್ವಸ್ಥ ಸ		
,	វ្ន			
Daniel Land	۲ — آوا	4 4 term		
Č	<u>آ</u> ا	န္ကြ ၂၀ဦး		
	-	 \$		
	ļ	2 2 2 sig		
	-	I I I I I I I I I I I I I I I I I I I		
	-			
	Í	- - × ii		
		pla b		
	_	rep 2 2		
	ی	in the second		
•		<u> </u>		
6	Deceased a Right	4 4 A A A A A A A A A A A A A A A A A A	•	
. :	<u>ي</u>	5 5 5 mg	g • • • • • • • • • • • • • • • • •	
	ន្ត		in the state of th	
,	<u>ĕ</u>	6 6 km		
•	-		Jac Lag	
	_	8 7 6 5 4 3 2 1 1 2 3 4 5 8 7 6 5 4 3 2 1 1 2 3 4 5 Indicate: missing natural teeth by X, crowns by O, fillings by D inking anchor teeth, replacements by artificial teeth X	Characteristics Other Data	
		8 8 r. r. v. v. v. v. v. v. v. v. v. v. v. v. v.		,
	L	Upper Lower	1	*

UNKNC X-555

USMC HENRI CHAPELLE , Belgium Pot Mi, Row 2, Grave 40





				1		11-	uls	Laborated in the labora		
	1									
B		DISINTERMENT DIRECTIVE								
(U)	CECTION A				DIRECTIVE NUM	BER		DATE		
	SECTION A — NAME AND BU	RIAL LOCATIO	N OF DECEASED		1240	1723	3	25 07 48 DAY MONTH YEAR		
NAME				SERIAL N		RANK	ARM	DATE OF DEATH		
			UNKNO	MNX-0	00555	1	Q	DAY MONTH YEAR		
HENR1	CHA	PELL	6 + B	UPEN			0	DISPOSITION OF REMAINS		
PLOT ROW	GRAVE	COUNTRY						CAUSE OF DEATH		
4 H è	9 40	BEL	GIUN	n				6		
	A Color		SECTION B -	- CONSIGNEE AI	ND NEXT OF KIN		146			
HENRI-CI	HAPELLE,	BELGIU	M	(8)	ADMINIS	TRATIVE	E DEC	ISION)		
					ND IDENTIFICATIO		100			
IAME		SE	RIAL NUMBER	RANK	DATE OF DEATH		DAT	E DISTINTERRED		
IDENTIFICATION TA	AG ON ORGAN	NIZATION	NKNOWN		RELIGION	IDENTIFICA	ATION VER	RIFIED BY		
NATURE OF BURIAL		SI	ECTION D — PREP		MAINS FOR SHIPM		34.00	NAME AND THE		
								8		
OTHER MEANS OF I	DENTIFICATION		UL		ا ـــا ب	من ن	4_	U		
AINOR DISCREPANC	CIES 1			Ø,	G. A.	Q				
EMAINS PREPARED	AND PLACED IN C	ASKET	46,5			J				
ASKET SEALED BY			BY	EMBALL	ED (Sidnatura)	1				
AUNEI SEALED BY				EMBALM	ER (Signature)					
ASKET BOXED AND	MARKED	SHIPPING	SHIPPING ADDRESS VERIFIED BY							
ATE	BY	1.26	S 34					597.7%		
	certify that al report above is		oing operation	s were condu	ucted and acco	mplished ur	nder my	immediate supervision		

SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.