

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

*mk  
copy*

3 DEC. 48  
Date

293  
Wak (France) X-74 (W. James)

SUBJECT: Unidentifiable Remains

TO: The Quartermaster General  
Memorial Division  
Washington 25, D. C.

1. The records pertaining to Unknown X- 74, Plot N, Row 12, Grave 296, USMC ST. JAMES have been reviewed and it is the opinion of this office that insufficient evidence is available to establish the identity of this deceased, and that these remains should be classified as unidentifiable.

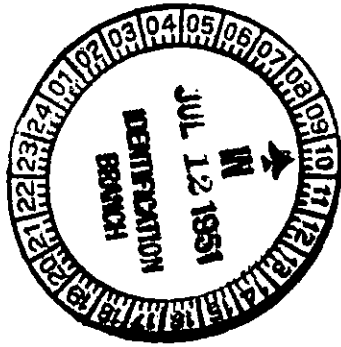
2. Report of Reprocessing was forwarded to your office by letter of transmittal No. 2123, dated 26 DEC. 46. No further information is available.

FOR THE COMMANDING GENERAL:

Received  
Not identifiable from  
information presently  
available  
4 JAN 1949  
OQMG

/s/ GEORGE L. FREEMAN  
/t/

*NAT  
file  
4 Jan. 49  
C. Dewhaker  
Lieut. Dr.*



*[Faint, illegible text, likely bleed-through from the reverse side of the page]*



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FOR THE COMMANDING GENERAL :

*George L. Freeman*  
GEORGE L. FREEMAN  
1st Lt      QAC  
Actg Asst Adj Gen

Received  
Not identifiable from  
information presently  
available  
4 JAN 1949  
OQMG

Incl #48

ARMY DEPT OF ARMY WASH DC CAMPBELL X 5641

UNCLASSIFIED

CG AGRC PARIS FRANCE

PRIORITY

*WCL*  
*48443*

WCL 37087

XXXXXXXXXXXX

CHARGE GRAVES W/ IT

FROM GURAD WILLIAM CHARLIE LOVE THREE SEVEN ZERO EIGHT SEVEN

REFERENCE FIRST INDORSEMENT YOUR HEADQUARTERS FILE ROGER ROGER EASY TWO NINE THREE POINT NINE DATED ONE TWO NOVEMBER ONE NINE FOUR SEVEN TO BASIC LETTER THIS OFFICE FILE QUEEN MIKE GEORGE MIKE ROGER TWO NINE THREE DATED SIX OCTOBER ONE NINE FOUR SEVEN PERTAINING TO CONGRESSIONAL INQUIRY CPL RHEA HOW MILLER ONE EIGHT ONE ZERO EIGHT SEVEN THREE THREE PD CHECK THIS OFFICE HAS BEEN MADE IN ATTEMPT TO ASSOCIATE SUBJECT DECEDENT WITH UNKNOWNX XRAY SEVEN THREE AND XRAY SEVEN FOUR SAINT JAMES FRANCE WITH NEGATIVE RESULTS PD REQUEST ACTION BY BOARD AS STATED IN GURAD WILLIAM CHARLIE LOVE THREE FIVE FOUR ONE NINE DATED FOUR NOVEMBER ONE NINE FOUR SEVEN PD RADIO REPLY

WCL 37087

(13 DEC 46)

UNCLASSIFIED

ARMY 293  
GRAVES REGISTRATION EA

*Elmer*  
*23 2000Z*  
*APR 48*

G. J. MURRAY  
MAJOR, GRC, MEM DIV

*293 Unit X-74 d.v. Gen. G.S. (EA)*

QMGY DEPT OF ARMY WASH DC CAMPBELL X 5641

UNCLASSIFIED

CG AGRC PARIS FRANCE

PRIORITY

WCL  
48443

WCL 37087

XXXXXXXXXXXX

CHARGE GRAVES W/ II

273 WASH X-70 and V. G. P.S. (S.A.)

FROM QMGY REOURAD WILLIAM CHARLIE LOVE THREE SEVEN ZERO EIGHT SEVEN

REFERENCE FIRST INDORSEMENT YOUR HEADQUARTERS FILE ROGER ROGER EASY TWO NINE THREE POINT NINE DATED ONE TWO NOVEMBER ONE NINE FOUR SEVEN TO BASIC LETTER THIS OFFICE FILE GREEN MIKE GEORGE MIKE ROGER TWO NINE THREE DATED SIX OCTOBER ONE NINE FOUR SEVEN PERTAINING TO CONGRESSIONAL INQUIRY CPL RHEA HOW MILLEN ONE EIGHT ONE ZERO EIGHT SEVEN THREE THREE PD CHECK THIS OFFICE HAS BEEN MADE IN ATTEMPT TO ASSOCIATE SUBJECT DECEDENT WITH UNKNOWNX XRAY SEVEN THREE AND XRAY SEVEN FOUR SAINT JAMES FRANCE WITH NEGATIVE RESULTS PD REQUEST ACTION BY BOARD AS STATED IN CURAD WILLIAM CHARLIE LOVE THREE FIVE FOUR ONE NINE DATED FOUR NOVEMBER ONE NINE FOUR SEVEN PD RADIO REPLY

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QMGY 293  
GRAVES REGISTRATION SA

23 2000Z  
APR 48

O.J. MURRAY  
MAJOR, GNC, NEM DIV

Jones

P. B. Dickson

FBI  
M.K.

Interred December 1948

J-13-16 ST JAMES

### DISINTERMENT DIRECTIVE

*W.F. Hill*  
H.F. HILL CAPT QMC  
CEM. SUPT.

1 ✓

SECTION A - NAME AND BURIAL LOCATION OF DECEASED	DIRECTIVE NUMBER <b>3578 00057</b>	DATE <b>15 01 48</b> DAY MONTH YEAR
---	---------------------------------------	---

NAME	SERIAL NUMBER <b>UNKNOWNX-000074</b>	RANK	ARM <b>0</b>	DATE OF DEATH DAY MONTH YEAR
CEMETERY <b>ST JAMES - AVRANCHES</b>				DISPOSITION OF REMAINS DAY MONTH YEAR <b>0 3504 80</b> CODE DIST. PT.
PLOT <b>N 12</b>	ROW <b>296</b>	COUNTRY <b>FRANCE</b>	CAUSE OF DEATH	

#### SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE <b>ST. JAMES, FRANCE</b>  (BY ADMINISTRATIVE ORDER)	NAME AND ADDRESS OF NEXT OF KIN
--	---------------------------------

#### SECTION C - DISINTERMENT AND IDENTIFICATION

NAME <b>Unknown</b>	SERIAL NUMBER <b>X-000074</b>	RANK <b>Unk</b>	DATE OF DEATH	DATE DISTINTERRED <b>19 May 1948</b>
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER GRS	ORGANIZATION <b>UNKNOWN</b>	RELIGION <b>Unk</b>	IDENTIFICATION VERIFIED BY <b>Garrett J. Burke, Emb</b> NAME AND TITLE	

#### SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL <b>Mattress Cover</b>	CONDITION OF REMAINS <b>Multiple Fract</b> <b>Skel Form " Parts Missing</b>
---	---

OTHER MEANS OF IDENTIFICATION  
**GR form No 1 with corresponding name with remains**

MINOR DISCREPANCIES  
**None**

REMAINS PREPARED AND PLACED IN ~~CASKET~~ **Transfer Case**

DATE **21 May 1948** BY **Garrett J. Burke, Emb**

CASKET SEALED BY **Thomas E. Jones, Emb** EMBALMER (Signature)

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY **All Markings, Tags and Plates Verified By:**

DATE **23-6-48** BY **M. H. Noyes, Clk Rec** **Wm J. Smith, 1st Lt CE**

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct. **Except Casketing**  
I certify that the entries on this form are true

copies of the entries on Copy No. 4 of this Disinterment Directive which contains the signature of **Wm J. Smith, 1st Lt CE**

SIGNATURE OF GRS INSPECTOR  
*John W. Brown*

RECEIVED AND DATED  
**MAR 22 1949**  
**R & R BR.**

# RECORD OF CUSTODIAL TRANSFER

8 7 8 1 8 4

## 1. SHIPPED

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

## 2. SHIPPED

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

## 3. SHIPPED

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

## 4. SHIPPED

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

## 5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE (21 ADMINISTRATION CELL)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER 21 ADMIN SERVICE	DATE	SIGNATURE OF RECEIVER	DATE

## 6. SHIPPED

FROM W 15 520 WYVACN		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

## 7. SHIPPED

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

*293 Miller, Rhea H. 18 108 73 3*

02857

WAR V DAPA NR 40/10 WD  
FROM: AGRC APO 58 10/16012  
TO: THE QUARTERMASTER GENERAL,  
WASHINGTON 25, D. C.  
GRMC

FROM HQ AGRC PARIS  
NO AGRC 4575  
D. T. G. 1016012  
ACTION QMG  
M C IN NO 53797

REF IR AGRC FOUR FIVE SEVEN FIVE

REFERENCE WOL-25419, 4 NOVEMBER 47, CPL RHEA H. MILLER 18108733. RECORDS THIS HEADQUARTERS ON SPECIAL INVESTIGATION JUST COMPLETED, SHOW UNKNOWN X-73 AND X-74 ST JAMES WERE RECOVERED FROM A TANK WHICH MAY POSSIBLY BE THE ONE IN WHICH MILLER AND SYVERSON BECAME CASUALTIES. BOARD ACTION BEING DELAYED PENDING FURTHER INVESTIGATION FOR IDENTIFICATION. END AGREE PROGRAM

*18058*  
*12-16-47*  
*Memo (RM - Capt. Pyles (Comp))*  
*File copy*

*X 293 Miller, Rhea H. 18 108 73 3*

*St. James*

*James*

*New*  
*11/3/47*  
*Boyer*



293 Miller, Rhea H. 18, 108, 733

02857

WAR V DAPA NR 40/10 WD

FROM: AGRC APO 50 10/18012

TO: THE QUARTERMASTER GENERAL,  
WASHINGTON 25, D. C.  
ORMC

FROM HQ AGRC PARIS

NO AGRC 4875

D. T. G. 1018012

ACTION QMC

M O IN NO 68797

REF NR AGRC FOUR FIVE SEVEN FIVE

REFERENCE WGL-25419, 4 NOVEMBER 47, CPL RHEA H. MILLER 18108733. RECORDS THIS HEADQUARTERS ON SPECIAL INVESTIGATION JUST COMPLETED. SHOW UNKNOWN X-73 AND X-74 ST JAMES WERE RECOVERED FROM A TANK WHICH MAY POSSIBLY BE THE ONE IN WHICH MILLER AND SYVERSON BECAME CASUALTIES. BOARD ACTION BEING DELAYED PENDING FURTHER INVESTIGATION FOR IDENTIFICATION. END AGRC PROGRAM

18052

*Mem (A. N. G. H. H. H.)  
File copy Pylor (copy) 11-11-47*

X 293 Miller, Rhea H. 18-108-733

*St. James*

*Mem  
11/18/47  
B...*

# CHECK LIST OF UNKNOWN

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

Unknown X -74  
Cemetery St. James, France  
Plot N Row 12 Grave 296

Reprocessed: 19 November 1946

1. ~~REMOVED FOR RESEARCH~~ (Hour) (date)
2. Place of death (Name of closest town) (ordinates and letter Prefex, maps)

Sheet, scale and serials used.

3. Remains ~~REMOVED FOR~~ disinterred by Subordinate Identification Point, Carentan, France  
(Name and organization)
4. Evacuated to Cemetery by (Name and organization)
5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements).

Item	Clothing		Indicate unusual markings	
	Markings	Sizes	Color	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				

— N O N E F O U N D —

Belt. Web None

Drawers. Wool None

Drawers. Cotton None

Leggings. Wool None (Note unusual lacing)

Socks. Cotton None

\*Shoes (type) None

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.

6. Chevrons or Insignia None  
(type & location; shirt, jacket, coat, helmet)

Shoulder Patch None

7. Does clothing indicate that deceased was a member of the Air, Ground or Naval Forces

UTD

8. Description of Remains:

Age UTD Height UTD Weight UTD Description of wounds UTD

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

Tattoos UTD  
(Number, location — illustrate on sep. page)

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

Sunburn or tan, other than hands & face UTD

Complexion UTD  
(light, med, 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** (color, setting, shape) Mustache **UTD** (color, size, shape) Beard or Goatee **UTD** (length, heavy,

light, color, extent)

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

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

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

Teeth **UTD** (white, size, unevenness, spacing, noticeable crowns, fillings, extract.)

Chin **UTD** (prominent, receding, pointed, dimple, double)

Jaw **UTD** (large, small, normal) Circumference of head in inches **UTD** (hat band)

Neck **UTD** (size, length, short, normal, wrinkled) Larynx **UTD** (prominent, normal)

Shoulders **UTD** (broad, straight, small, rounded) Arms **UTD** (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 & extent of hair, large, small, normal).

Back **UTD** (quantity & extent of hair) Waist **UTD** (size of navel, appendectomy, amount

quantity & color of hair) Circumcision **UTD** (yes-no) Pubic hair **UTD** (color)

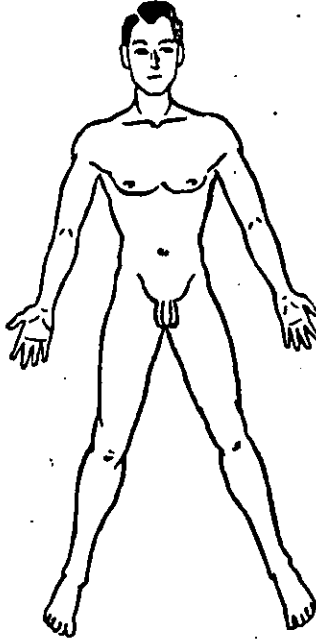
Hernioplasty **UTD** (yes-no; location)

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

Feet **UTD** (size, corns, callouses, flat) Toes **UTD** (slender, straight, crooked, overlap)

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

9. Black out parts of body not received at cemetery:



Bones burned beyond recognition, no black-out possible

10. Have fingerprints been placed on Report of Interment No  
Yes-no

If not, explain hands missing

11. Has tooth chart been prepared No If not, explain  
Yes-no

head missing

12. Remarks: Body consists of pieces of charred bones; burned beyond recognition, no clothing. Burial bottle found in grave. stating: Original grave #289-12-G. Corrected burial report, 10 October 1944. Fluoroscope negative. Unable to make black-out chart because bones are unrecognizable. Nothing found to warrant Chemical Laboratory Examination

I certify that I have personally viewed the remains of subject deceased and all resulting information has been recorded to the best of my knowledge.

*Robert A. Salvador*  
ROBERT A. SALVADOR, *JK*  
Officers Name

Captain, Infantry  
Rank Service

Central Identification Point  
Organization

# REPORT OF BURIAL

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

22102  
10 October 1944  
Date

UNKNOWN SOLDIER X-74					
Last Name		First	Initial	Rank	Serial No.
Unknown					
Unit		Organization			
Unknown		20 Aug. 1944			KIA
Place of Death		Date of Death		Cause of Death	
2100/ 10 October		St James		308-975	
Time and Date of Burial		Name of Cemetery		Name or Coordinates of Location	
296		M		CROSS	
Grave Number	Row Number	Plot Number		Type of Marker	

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

If No Identification Tags  
How were remains identified?

REBURIAL FROM ST JAMES CEMETERY, THIS MAN WAS ORIGINALLY BURIED WITH ANOTHER SOLDIER IN GRAVE 289, PLOT G.

What means of identification were buried with the body?

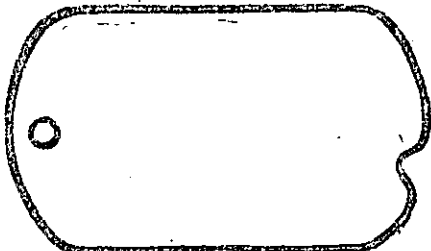
GR# 1

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

Who is buried on:

Deceased's Right:	UNKNOWN SOLDIER X-73				295
	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	UNKNOWN SOLDIER X-142				297
	Name	Serial No.	Rank	Organization	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

*George L. Morrison*  
Signature of Officer or other person reporting burial  
Graves Registration Officer

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.:

Left Hand


Thumb

Right Hand


Thumb

## TOOTH CHART

		Deceased's Right								Deceased's Left																							
Upper	8	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Lower	8	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	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 ◊; 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.