

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

17 Nov, 1948
Date

SUBJECT: Unidentifiable Remains

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

1. The records pertaining to Unknown X 35A, Plot C,
Row 2, Grave 33, USMC St. Laurent, France 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. 1399, dated 14/8/47. No
further information is available.

FOR THE COMMANDING GENERAL:

/s/ George I. Freeman
/t/

Received 23 Nov. 1948 OOMG
Unidentifiable from
information presently
available

FILE 23 NOV 1948
H A n
R. N. Nutter
J. B. B.
J. S. S.

Beall MS

1

Interred 23 Dec 1948

J-2-5 USMC, St Laurent
DOUGLAS A. MAC KENZIE *Douglas a MacKenzie*
Capt. Inf. Cemetery Superintendent

DISINTERMENT DIRECTIVE

SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
3582 00000

DATE
15 01 48
DAY MONTH YEAR

NAME
UNKNOWN

SERIAL NUMBER
A-000035

RANK

ARM
J
DATE OF DEATH

CEMETERY
ST LAURENT BAVEUX

DISPOSITION OF REMAINS
3505 80
CODE DIST. PT.

PLOT ROW GRAVE COUNTRY
C 2 33 FRANCE

CAUSE OF DEATH
6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
*SAINT LAURENT, FRANCE
(BY ADMINISTRATIVE ORDER)*

NAME AND ADDRESS OF NEXT OF KIN

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME
Unknown

SERIAL NUMBER
X-35 - A

RANK
UTD

DATE OF DEATH
6 June 1944

DATE DISINTERRED
30 September 1947

IDENTIFICATION TAG ON
 REMAINS
 MARKER

ORGANIZATION
USAGF

RELIGION
UTD

IDENTIFICATION VERIFIED BY
*WILLIAM J. SMITH
1st Lt, CE*
NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL
Blanket and mattress cover.

CONDITION OF REMAINS
Skeletal form.

OTHER MEANS OF IDENTIFICATION
None.

MINOR DISCREPANCIES
None.

MY FILE RECORDS ANNOTATED
DATE *4/25/99*
W A MATTHEWS

REMAINS PREPARED AND PLACED IN CASKET
DATE *14 October 1947*

BY *C. R. Tompkins*

CASKET SEALED BY
C. R. Tompkins

EMBALMER (Signature)
C. R. Tompkins

CASKET BOXED AND MARKED
DATE *14 Oct 47* BY *H. B. Albert*

SHIPPING ADDRESS VERIFIED BY
JOHN W. SHARP, 1st Lt, Inf.

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

John W Sharp
JOHN W. SHARP, 1st Lt, Inf.
SIGNATURE OF GRS INSPECTOR

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

RECORD OF CUSTODIAL TRANSFER

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		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

FROM		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

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AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

17 NOV 1948
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SUBJECT : Unidentifiable Remains

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

1. The records pertaining to Unknown A-35 "A", Plot C.
Row 2, Grave 33, USMC St. Laurent, France. 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. 2399, dated 14/8/47. No further information is available.

FOR THE COMMANDING GENERAL :

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

Incl #19

Received 23 Nov 1948 OQMG
Not identifiable from
information presently
available

Em

3146 JRS Lugo
Disint. Div.

X 293

Unknown
X-354 (Furner) Lt. Davis

OSCO REG DIV HQ HQ D/L SAFT CAPT ROBERT VEREE

UNCLASSIFIED

CO AGED PAPER FLAME

PRIORITY

42261

XXXXXXXXXX CHANGE GRAVES IN 11

FROM OSO

REQUEST FOLLOWING DISINTERMENT IDENTIFIED OR CANCELLED AS IDENTIFICATION
HAS BEEN ESTABLISHED AND UNKNOWN THAT EIGHT THREE ONE ONE ONE TWO ONE
ONE ONE ONE TWO ONE ONE ONE TWO ONE ONE THREE FIVE ONE ONE FOUR ONE
ONE SEVEN ONE ONE ONE SEVEN EIGHT ONE ONE NINE FOUR AND ONE ONE FIVE ONE

FOR THE QUARTERMASTER GENERAL

UNCLASSIFIED

OSCO 200
Graves Registration, SA

5 DEC 47
OSCO

W J MURPHY, MAJOR,
SAC, MEMPHIS DIVISION

IDENTIFICATION CHECK LIST

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

Unknown X X-35 (A) B
Cemetery St. Laurent, France
Plot 0 Row 2 Grave 33

Date reprocessed:

1. ~~Arrived at cemetery~~ 24 June 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 #1, 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 Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear	<u>None</u>		
Raincoat	<u>None</u>		
Overcoat	<u>None</u>		
Jacket, Field	<u>None</u>		
Jacket, Combat	<u>None</u>		
Mackinaw		<u>None</u>	
Sweater		<u>None</u>	
Jacket, HBT		<u>None</u>	
* Shirt, Wool OD	<u>Remnants of</u>		
Undershirt, Wool			<u>None</u>
Undershirt, Cotton	<u>Remnants of, white</u>		
Trousers, HBT			<u>None</u>
* Trousers, Wool OD	<u>Remnants of.</u>		

Belt, web **None**

Drawers, wool **None**

Drawers, cotton **None**

Leggings, wool **None**

Socks, cotton **Remnants of one (1)**

* Shoes **One (1) left** (type) **G.I. Service, size 9½B**

Overshoes **None**

Web Equipment **None** (type)

(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: **Radius 26.1 Ulna 27.7 Fibula 37.6 Tibia 37.2.**
(fract.) (fract.)

Age **Utd** Est. Height **5'9½"** 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 **None found**
(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 No Teeth found.
 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin Utd
 (Prominent, receding, pointed, dimples, double)

Jaw Utd Circumference of head in inches Utd skull missing
 (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 Right only, decomposed

Fingers Decomposed
 (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 Utd
 (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 Too decomposed

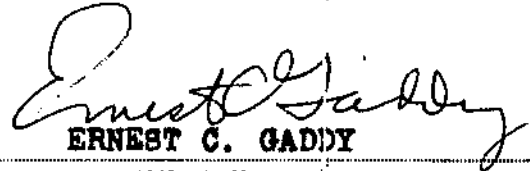
8. Has tooth chart been prepared? No If not, explain No teeth found.
(Yes-no)

9. Remarks One of a mass burial of two. See narrative below. Clothes found on remains. No clothing marks. Estimated weight of remains: 8lbs.

Narrative.

Remains received wrapped in a wool OD. blanket. Processing revealed the remains of two men. Separation was made and each case given numbers X-35 A and X-35 B, respectively. Each remains was placed in a separate casket. Separation was possible because of bone structure. The bones of case A being slightly larger (See skeletal charts).
(cont'd)

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.


ERNEST C. GADDY
(Officer's Name)

GWO USA
Rank Service

Central Identification Point.
(Organization)

(cont'd)

Remnants of clothing was found for each case, listed and placed in its respective casket. All debris placed with case A of this series. No clothing marks found. No teeth recovered in either case. Fluoroscope Examination: negative. No Burial Report, No GRS tag found. Nothing found to warrant Chemical Laboratory Examination.

MASS BURIAL

BONE LIST

<u>RIGHT</u>		<u>LEFT</u>
Skull-----Missing-----	:	Missing-----
Mandible--Missing-----	:	Missing-----
Cervical Vertebrae (7)---None---	:	Missing-----
Clavicle--Missing-----	:	Clavicle--Missing-----
Scapula --Missing-----	:	Scapula--Missing-----
Ribs -----Missing-----	:	-----
Sternum --Missing-----	:	-----
Humerus section of shaft, dis- tal end-----	:	Humerus--Missing-----
Radius fract. middle of shaft-----	:	Radius --Missing-----
Ulna fract. middle of shaft-----	:	Ulna -----Missing-----
Hand bones--Phalanges missing-----	:	Hand Bones Missing-----
-----	:	Right only, decomposed
Dorsal vertebrae (12)---None---	:	-----
Lumbar vertebrae (5)---None---	:	-----
Sacrum-----Missing-----	:	-----
Pelvic Bone --Missing-----	:	Pelvic Bone --Missing-----
Femur -----Missing-----	:	Femur Distal condyles of femur-----
Patella -----Missing-----	:	Patella-----Intact-----
Tibia-----Missing-----	:	Tibia -----Intact-----
Fibula -----Missing-----	:	Fibula -----Intact-----
Foot Bones --Missing-----	:	Foot Bones-----Intact-----

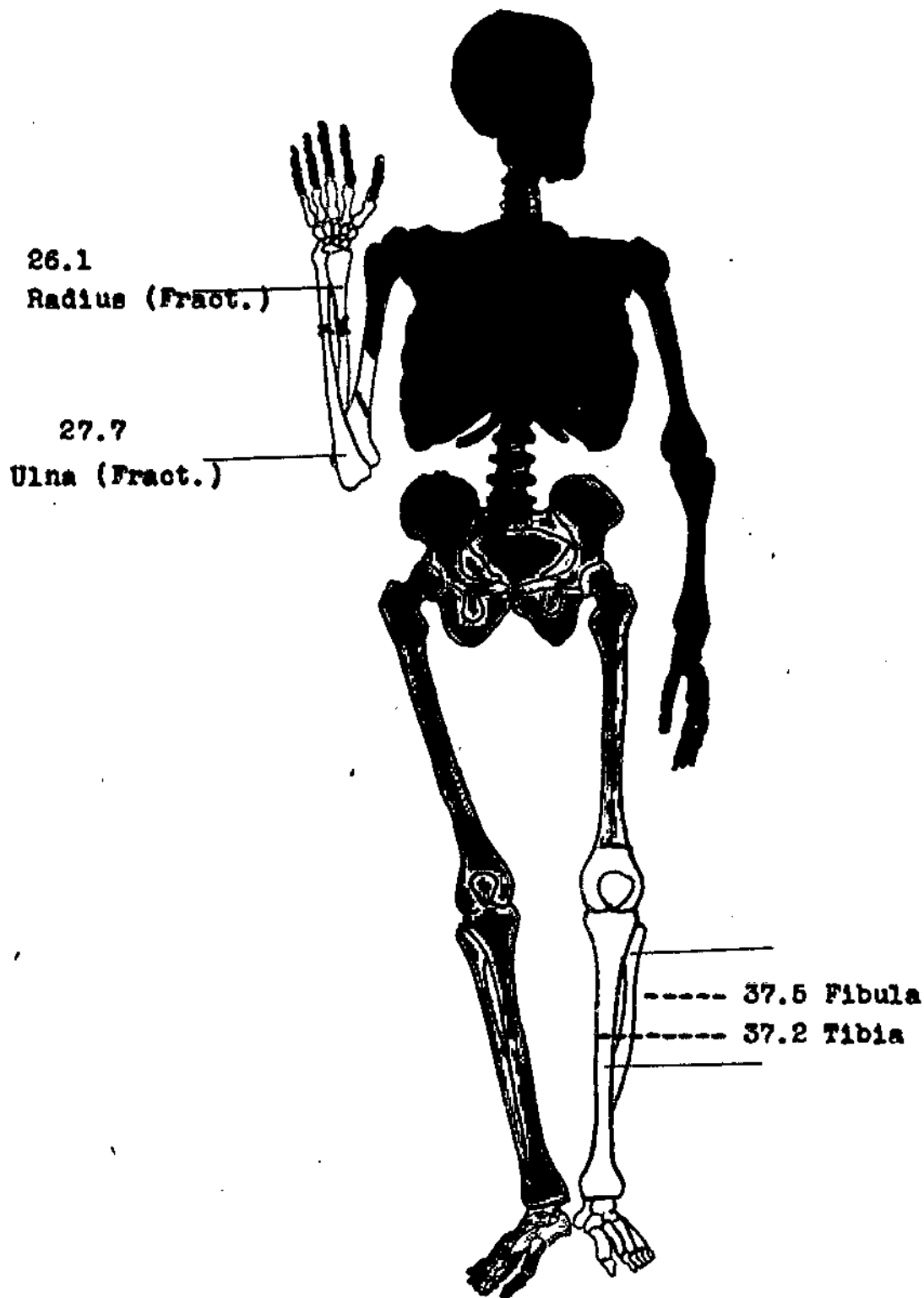
Remarks: Measurements of R. radius and R. ulna were possible by re-constructing the fractured parts.

X-35 (A) B

St. Laurent, France

SKELETAL CHART Plot C Row 2 Grave 33

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



RESTRICTED REPORT OF BURIAL

72158

TM 10-630 AND AR 30-1815

23 July 1944
Date

Unknown

UNIDENTIFIED X-35 (American)
Last Name First Initial Rank Serial No.

Unit: Normandy, France
Date of Death: 6 June 1944 (Est)
Cause of Death: KIA
Place of Death: Normandy, France
Time and Date of Burial: 1300 hrs, 13 June 1944
Name of Cemetery: St Laurent Sur Mer #1
Name or Coordinates of Location: 675-896
Grave Number: 33 Row Number: 2 Plot Number: C Type of Marker: Temp

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

If No Identification Tags
How were remains identified?

Impossible to make fingerprints, Body mutilated

What means of identification were buried with the body?

GRS Form #1 in 50 Cal Shell Casing

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

Who is buried on:

Deceased's Right: Soucie, Edward 11011111 34
Name Serial No. Rank Organization Grave No.

Deceased's Left: Gordon, Stephen 32839361 32
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

73

Signature of Officer or other person reporting burial

Robert E. Berry

Verified by G.R.S. Officer

ROBERT E. BERRY
1st Lt. OMC

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

3	
2	
1	
Thumb	

Right Hand

3	
2	
1	
Thumb	

TOOTH CHART

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

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.

Corrected copy.

WD QMC FORM 1042
Rev 1 Apr. 1945
(Supersedes GRS Form 1)

REPORT OF INTERMENT
(AR 30-1810 and AR 30-1815)

Date of report

Imprint Identification Tag If Possible
DO NOT TYPE



SECTION I. IDENTIFICATION

NAME (Last, First, Middle Initial) UNKNOWN X-35 A		Serial number Unknown
Grade Unknown	Organization Unknown	Branch of service STB: A.G.F.
Race Unknown	Religion Unknown	If other than U. S. dead, Give name of country.

Place of death NORMANDY, FRANCE	Cause of death Killed in Action	Date of death 6 June 1944
---	---	-------------------------------------

Emergency addressee (Name, Relationship and Address.)
Unknown

Identification tags found on body (1, 2, or None) **None** If no tags found on body, describe means of identification. If unidentified fill in section 3 on reverse.

Were substitute tags provided (Yes or No) **Yes**

List personal effects found on body and disposition of same

N o n e

SECTION 2. BURIAL If other than in established cemetery furnish sketch and map coordinates on reverse.

Name, Number, Coordinates and location of cemetery
U.S. Military Cemetery, St. Laurent s/Mer, France (E75-896)

Date of burial	Hour	Buried in (Shroud, Blanket, or name of other) Casket	Type of grave marker WOOD CROSS	Plot no. C	Row no. E	Grave no. 33
----------------	------	--	---	----------------------	---------------------	------------------------

Was this a re-burial (Yes or No)	If a re-burial, indicate Name, Number, coordinates of previous cemetery, and location of grave	Plot no.	Row no.	Grave no.
----------------------------------	--	----------	---------	-----------

Type of religious ceremony Person conducting burial rites If identification tags not used, describe identification data and containers buried with body
One copy of WD QMC Form # 1042 placed in Burial Bottle and buried with remains.

Identification tag buried with body (Yes or No) **No** Identification tag attached to marker (Yes or No) **Yes, embossed plate**

Body buried on deceased left, Name (Last, First, Middle Initial) SOUCIE, Edward	Rank T/4	Serial number 1101411	Organization MC	Grave No. 34
---	--------------------	---------------------------------	---------------------------	------------------------

Body buried on deceased right, Name (Last, First, Middle Initial) ORDAN, Stephen	Rank Pfc	Serial number 3E33961	Organization -	Grave No. 32
--	--------------------	---------------------------------	--------------------------	------------------------

Signature of person preparing report
Ernest G. Green CWO USA C.I.P.
Signature of GRS officer verifying report
William T. MacArthur CAPTAIN QMC C.I.P.

DISTRIBUTION OF REPORT: Signed original for US and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Hdq. GRS Officer. Copies for retention in theater as prescribed by theater commander.

SECTION 3. UNIDENTIFIED REMAINS

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 chart at left, or as many as possible. If no fingerprints 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.

Height Est.	Weight Utd	Color of eyes Utd	Color of hair Utd	Birthmarks, scars or tattoos Utd
5'9½"				

Weapon and serial number	Laundry marks	Where body was buried or found
None	None	Normandy, France.

For tooth chart see attached Form I-A.

REMARKS

Upon reprocessing by Subordinate Identification Point # 1, Carentan, France, case Unknown X-35 was found to be a mass burial of two men. Separation was made into Unknown X-35 A and Unknown X-35 B. Segregation was possible because of the difference in size and structure in the bones. The bones of case A being slightly larger. Remnants of clothing was found for each case, listed and placed in its respective casket. No markings were found on the clothing. No teeth were recovered.

As no positive identifying clues were found, case remains classified "UNKNOWN".

Furnish sketch and map reference and coordinates for burial in other than established cemetery



Remarks
Form II Identification checklist accomplished.
Unable to obtain fingerprints or Form IA Tooth Chart because of missing and decomposed portions.
Estimated weight of remains processed: 8 Lbs.