

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 2-35B, Plot B.B.,  
Row 2, Grave 21, 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:

15/ George L. Freeman  
11/

Received 15 Nov, 1948 OQMG  
Not identifiable from  
information presently  
available

FILE 23 NOV 1948  
NAH  
S. J. Hallinan  
S. J. B.  
S. J. Sect.

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 A-35 "B", Plot BB, Row 2, Grave 21, 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            Q.C.  
Actg Asst Adj Gen

Incl #20

Received 13 NOV 1948 OQMG  
Not identifiable from  
information presently  
available

JLU *Boite*

19

Interred 22 Dec 1948

G-15-22 USMC. St Laurent

DOUGLAS A. MAC KENZIE

Capt. Inf. Cemetery Superintendent

DISINTERMENT DIRECTIVE

*Sharp 1 Lt Inf*

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER 3582 00000

DATE 15 01 48  
DAY MONTH YEAR

NAME UNKNOWN

SERIAL NUMBER B-000035

RANK

ARM J  
DATE OF DEATH

CEMETERY ST LAURENT BAVEUX

DISPOSITION OF REMAINS 3505 80  
CODE DIST. PT.

PLOT BB ROW 2 GRAVE 21

COUNTRY 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 Unk x-35 B

SERIAL NUMBER unknown

RANK unk

DATE OF DEATH est. 6 June 47

DATE DISINTERRED 13 Oct 47

IDENTIFICATION TAG ON  REMAINS  MARKER

ORGANIZATION USAGF

RELIGION unk

IDENTIFICATION VERIFIED BY William Smith 1 Lt CBR  
NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Processed

CONDITION OF REMAINS Advanced decomposition

OTHER MEANS OF IDENTIFICATION Burial report

MINOR DISCREPANCIES None

REMAINS PREPARED AND PLACED IN CASKET DATE 13 Oct 47 BY C. J. Missigman

CASKET SEALED BY C. J. Missigman

EMBALMER (Signature) *C. J. Missigman*  
C. J. Missigman

CASKET BOXED AND MARKED DATE 13 Oct 47 BY George Smith

SHIPPING ADDRESS VERIFIED BY John W. Sharp 1 Lt Inf

FILE

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 1 Lt Inf  
SIGNATURE OF GRS INSPECTOR

MEM. DV.

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

100  
 H  
 1104

## 2. SHIPPED

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

LIFE

## 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

RUM

## 5. SHIPPED

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

(CIVILIAN ORDER)  
 SYMIL FADBLM1 ERVACE

## 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

# IDENTIFICATION CHECK LIST

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

Unknown X -35 A (B)  
Cemetery St. Laurent, France  
Plot BB Row 2 Grave 21

1. ~~Interment~~ Date reprocessed: 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~~ disinterred by Subordinate Identification Point # 1,  
(Name and organization) Carentan, France.
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>		
	(Type)		
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>none</u>		
Undershirt, Wool	<u>none</u>		
Undershirt, Cotton	<u>none</u>		
Trousers, HBT	<u>none</u>		
* Trousers, Wool OD	<u>none</u>		

Belt, web none

Drawers, wool none

Drawers, cotton none

Leggings, ~~wool~~ Remnants of one (1) canvas

Socks, cotton Remnants of one (1) OD

\* Shoes Remnants of one(1) (type) Left ? G.I. Service, size 8-D

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?  
A.G.F.

6. Description of Remains: Fibula 36,7; Tibia 37,0

Age Utd Height Est. 5'6 1/8" Weight Utd Description of wounds Utd

Bandages or dressings None found 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, poeks, 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 Head missing**  
 (Large, small, normal) (Head 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)

**Utd**  
 (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 **None found**  
 (Quantity and extent of hair) (Yes-no) (Color)

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

Legs **Utd**  
 (Muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

Feet **Utd** Toes **Utd**  
 (Size, corns, callouses, bal) (Slender, straight, crooked, overlap)

Evidence of healed fractures **None found**  
 (Nose, arms, legs, etc.)

NOTE: Use attached charts "A" and "B" to indicate parts not received.  
**See attached chart.**

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

If not, explain hands missing

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

9. Remarks One of a mass burial of two. Clothes found on remains.  
No clothing marks.  
Estimated weight of remains recovered: 6 lbs.

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)  
**ERNEST C. GADDY**  
CFO USA  
Rank Service

Central Identification Point  
(Organization)

**NARRATIVE :**

Remains received wrapped in a wool OD blanket. Processing revealed the remains of two men. Separation was made and each case given the 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). 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. Fluoroscopic Examination: Negative. No burial report, no GRS Tag found. Nothing found to warrant Chemical Laboratory Examination.



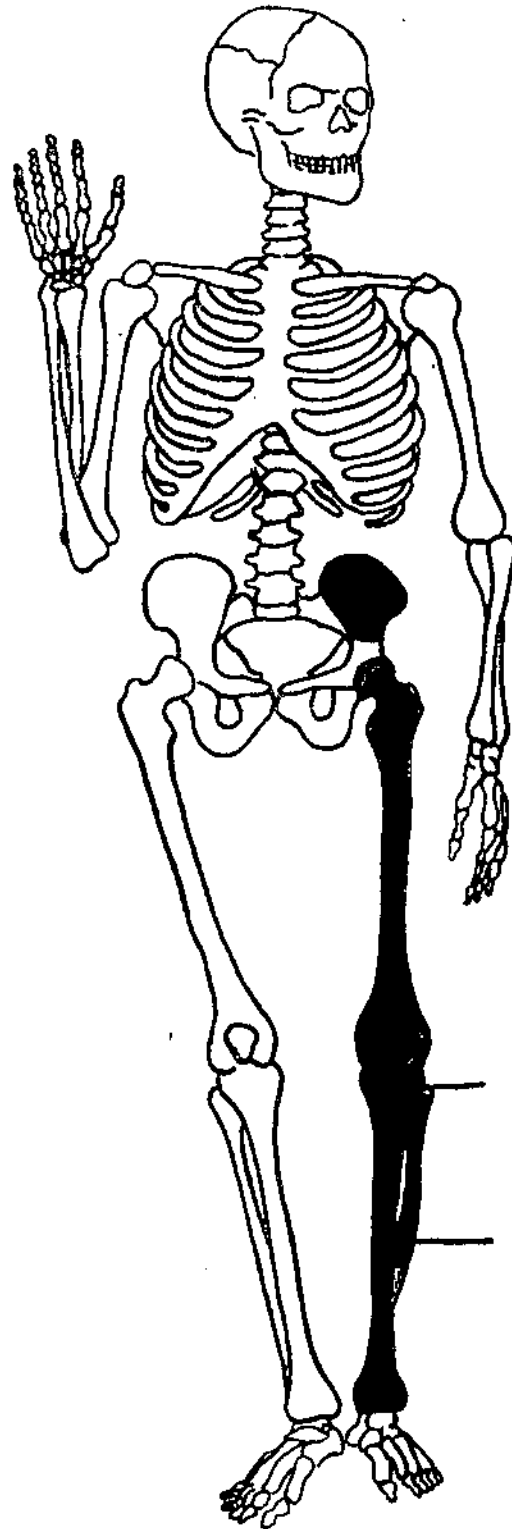
Y-35 A (B)

. Laurent, France

Plot BB Row 2 Grave 21

# SKELETAL CHART

(BLACK OUT PARTS OF BODY ~~NOT~~ RECEIVED AT CEMETERY)



Tibia 37


Fibula 36.7

MASS BURIAL  
BONE LIST

<u>RIGHT</u>	<u>LEFT</u>
Skull ----- Missing -----	Skull ----- Missing -----
Mandible ----- Missing -----	Mandible ----- -----
Cervical vertebrae (7) ----- 0 -----	Cervical vertebrae (7) ----- -----
Clavicle ----- Missing -----	Clavicle ----- Missing -----
Scapula ----- Missing -----	Scapula ----- Missing -----
Ribs ----- Missing -----	Ribs ----- -----
Sternum ----- Missing -----	Sternum ----- -----
Humerus ----- Missing -----	Humerus ----- Missing -----
Radius ----- Missing -----	Radius ----- Missing -----
Ulna ----- Missing -----	Ulna ----- Missing -----
Hand Bones ----- Missing -----	Hand Bones ----- Missing -----
-----	-----
Dorsal vertebrae (12) ----- None -----	Dorsal vertebrae (12) ----- -----
Lumbar vertebrae (5) ----- None -----	Lumbar vertebrae (5) ----- -----
Sacrum ----- Missing -----	Sacrum ----- -----
Pelvic Bone ----- Missing -----	Pelvic Bone ----- Ilium -----
Femur ----- Missing -----	Femur ----- Fract. 2/3 Distally (shaft) -----
Patella ----- Missing -----	Patella ----- Intact -----
Tibia ----- Missing -----	Tibia ----- Intact -----
Fibula ----- Missing -----	Fibula ----- Intact -----
Foot Bones ----- Missing -----	Foot Bones ----- Intact -----

Remarks:

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) <b>Unknown X-35 B</b>			Serial number <b>Unknown</b>	
		Grade <b>Unknown</b>	Organization <b>Unknown</b>		Branch of service <b>PTB.: A.G.F.</b>	
		Race <b>Unknown</b>	Religion <b>Unknown</b>		If other than U. S. dead, Give name of country.	
Place of death <b>Normandy, France.</b>		Cause of death <b>Killed in Action.</b>			Date of death <b>Estimated                  6 June 1947</b>	
Emergency addressee (Name, Relationship and Address.) <b>Unknown</b>						
Identification tags found on body (1, 2, or None) <b>None</b>		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) <b>Yes</b>						
List personal effects found on body and disposition of same <p style="text-align: center;"><b>None</b></p>						
SECTION 2. BURIAL If other than in established cemetery furnish sketch and map coordinates on reverse.						
Name, Number, Coordinates and location of cemetery <b>U.S. Military Cemetery St. Laurent s/Mer - France (675-896)</b>						
Date of burial	Hour	Buried in (Shroud, Blanket, or name of other) <b>Casket</b>	Type of grave marker <b>Wooden cross</b>	Plot no. <b>20</b>	Row no. <b>2</b>	Grave no. <b>21</b>
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 <b>One copy of WD QMC Form # 1042 placed in burial bottle and buried with remains.</b>			
Identification tag buried with body (Yes or No) <b>NO</b>	Identification tag attached to marker (Yes or No) <b>Yes                  Embossed plate</b>					
Body buried on deceased left, Name (Last, First, Middle Initial) <b>KING, James M.</b>		Rank <b>1/1E</b>	Serial number <b>0-1580539</b>	Organization <b>5th Inf</b>	Grave No. <b>20</b>	
Body buried on deceased right, Name (Last, First, Middle Initial) <b>UNKNOWN X-70-B</b>		Rank	Serial number	Organization	Grave No. <b>23</b>	
Signature of person preparing report <b>CWO USA C.I.P. Ernest G. Guder</b>			Signature of GRS officer verifying report <b>Captain MC C.I.P.</b>			
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. 5'6 1/8"	Weight Utd	Color of eyes Utd	Color of hair Utd	Birthmarks, scars or tattoos Utd
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Weapon and serial number None	Laundry marks None	Where body was buried or found Normandy - France -
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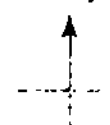
For tooth chart see attached Form I-A.

## 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 Check List accomplished. Unable to obtain fingerprints or Form IA Tooth Chart because of missing and decomposed portions. Estimated weight of remains recovered: 6 Lbs.