

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- 63, Plot 2,
Row 3, Grave 42, 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.

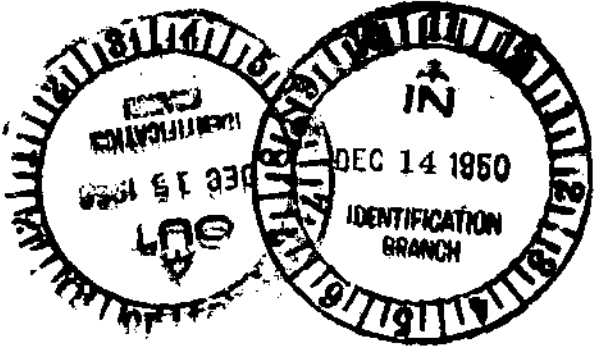
2. Report of Reprocessing was forwarded to your office by
letter of transmittal No. 2369, dated 23/7/47. No
further information is available.

FOR THE COMMANDING GENERAL:

George L. Freeman
11/5/48

Received 23 Nov. 1948 OQMG
Not identifiable from
information presently
available

FILE 23 NOV 1948
NAN
S. H. Allen
Sd. B.
J. J. [unclear]



FILE 5046

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APO 58 US ARMY

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Memorial Division
Washington 25, D.C.

1. The records pertaining to Unknown A-63, Plot G, Row 3, Grave 42, 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.
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FOR THE COMMANDING GENERAL :

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

Received 23 Nov 1948 OPMG
Not identifiable from
information presently
available

Incl #28

1

Interred 3 December 1948
8-28-USMC, St Laurent
DOUGLAS A. MAC KENZIE
Capt. Inf. Cemetery Superintendent

DISINTERMENT DIRECTIVE
Douglas MacKenzie

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
3582 00000

DATE
10 09 47
DAY MONTH YEAR

NAME
UNKNOWN

SERIAL NUMBER
X-000063

RANK
ARM
GP

DATE OF DEATH
DAY MONTH YEAR

CEMETERY
ST LAURENT BAVEUX

DISPOSITION OF REMAINS
3505 80
CODE DIST. PT.

PLOT
G 3

GRAVE
42

COUNTRY
FRANCE

CAUSE OF DEATH
6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
ST. LAURENT, FRANCE
(BY ADMINISTRATIVE ORDER)

NAME AND ADDRESS OF NEXT OF KIN

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME
Unknown X-000063

SERIAL NUMBER
Utd

RANK

DATE OF DEATH
6 June 1944

DATE DISINTERRED
2 Oct 47

IDENTIFICATION TAG ON
 REMAINS
 MARKER

ORGANIZATION
Utd

RELIGION
Utd

IDENTIFICATION VERIFIED BY
JOHN H. CLARK
2nd Lt. QMC
NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL
Utd

CONDITION OF REMAINS
Advanced decomposition

OTHER MEANS OF IDENTIFICATION
None

MINOR DISCREPANCIES / Arm of service corrected - Authority 355 (Hq, AGRC)

REMAINS PREPARED AND PLACED IN CASKET
DATE 8 Oct 47 BY G. J. Burke

CASKET SEALED BY
G. J. Burke

EMBALMER (Signature)
G J Burke

CASKET BOXED AND MARKED
DATE 8 Oct 47 BY C. J. Missigman

SHIPPING ADDRESS VERIFIED BY
D. MURRAY

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

D Murray
D. MURRAY, 2nd Lt. QMC

SIGNATURE OF GRS INSPECTOR

FILE
REC-31 170/100
13 APR 1948
R A R E S.

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

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM Casketing Point "B" AGRC		TO USMC ST LAURENT FRANCE	
KIND OF CONVEYANCE Hand		NAME OF CONVOYER JOHN W. SHARP, 1st Lt Inf	
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 (REVERSE SIDE)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER JOHN W. SHARP	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

IDENTIFICATION CHECK LIST

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

Unknown X X-63
Cemetery St. Laurent, France
Plot G Row 3 Grave 42

Date reprocessed:

1. Arrived at cemetery 25 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, Carentan,
(Name and organization) 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 None

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

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 Utd 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 No skull found
(Large, small, normal) (Hit 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 Missing

Fingers Missing
(Short, thick, long, slender, size of knuckles, missing fingers or joints)

Missing
(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 Medium brown
(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, calluses, flat) (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.


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

If not, explain fingers missing

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

9. Remarks Remains received, in skeletal form, small amount of decomposed flesh, in the remnants of a card board box, wrapped in wool OD blanket. No clothing found. Bones were fractured and charred, measurements impossible. Burial report found. No GRS tag found. Fluoroscopic Examination negative. Estimated weight of remains: 2 lbs. 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.


ERNEST C. GADDY
(Officer's Name)

CWO
Rank

USA
Service

Central Identification Point.
(Organization)

X-63

St. Laurent, France

Plot G Row 3 Grave 42

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

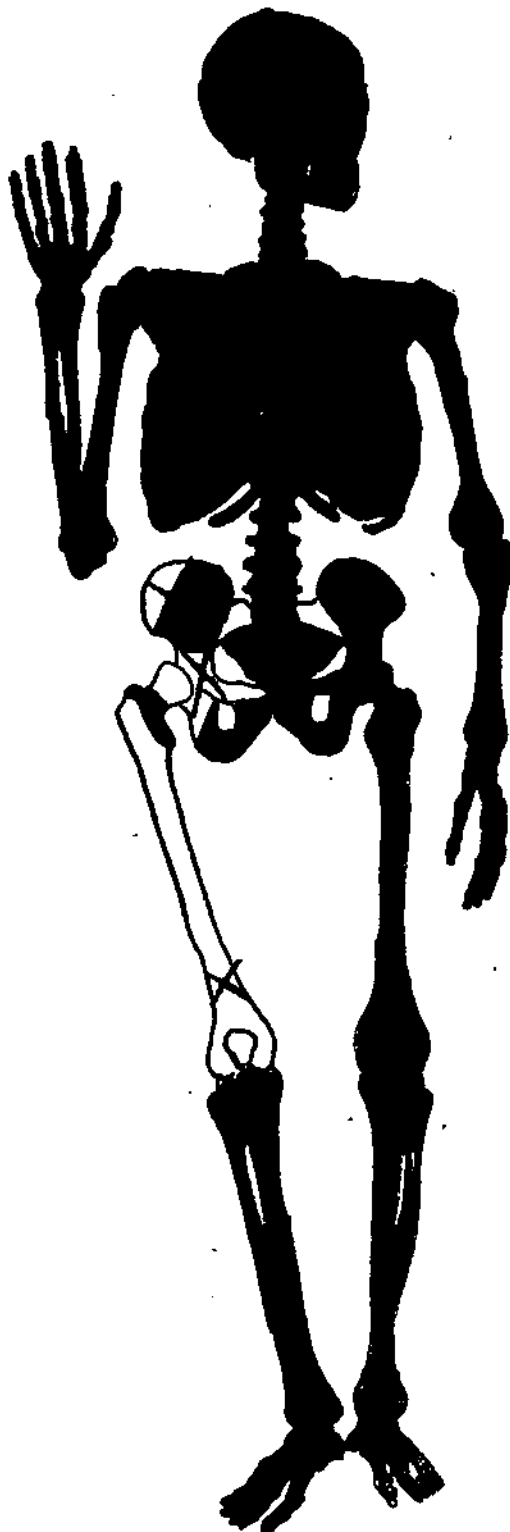


CHART "A"

63 1 2004

Reverse side of 3 for Pfc Paul Williams, 35638960, returned by field & sent to M&R 21 Jan 48, reads as follows:

The following Unknowns at St Laurent may be associated with Cpl Arthur E. Stendel:

X-27	X-66
X-32	X-70A
X-46A	X-71
X-60	X-77
X-62	X-80
✓ X-63	X-81
X-64	X-89
X-65	X-91"

RESTRICTED
REPORT OF BURIAL

22143

23 July 1944
Date

TM 10-630 AND AR 30-1815

Unknown

UNIDENTIFIED X-63 (American)

Last Name First Initial Rank Serial No.

Unit Organization

Normandy, France

6 June 1944 (Est)

KIA

Place of Death

Date of Death

Cause of Death

2100 hrs, 21 June 1944

St Laurent Sur Mer #1

675-896

Time and Date of Burial

Name of Cemetery

Name or Coordinates of Location

42

31

G

Temp

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?

Body mutilated, buried in box. --Tooth Charts and fingerprints impossible

What means of identification were buried with the body?

GRS Form #1 in 50 Cal. Shell Casing

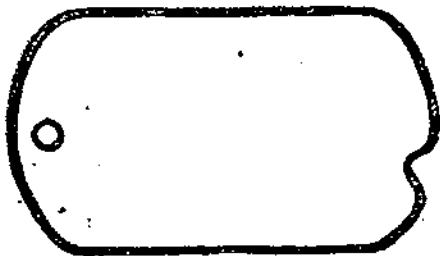
To determine Right or Left use Deceased's Right and Left.

Who is buried on:

Deceased's Right: Walker, Gordon F. 32110999 _____ 43
Name - Serial No. Rank Organization Grave No.

Deceased's Left: Unidentified X-62 (American) _____ 43
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

Graves Registration 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

4	
3	
2	
1	
Thumb	

Right Hand

4	
3	
2	
1	
Thumb	

TOOTH CHART

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