

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.

243  
1. The records pertaining to Unknown X-71, Plot G,  
Row 5, Grave 89, 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. 2392 dated 13/8/47. No  
further information is available.

FOR THE COMMANDING GENERAL:

15/11/48  
George L. Freeman

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

FILE 23 NOV 1948  
Max  
H. H. H.  
21.82  
21.82

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EUROPEAN AREA  
APO 58 US ARMY

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Memorial Division  
Washington 25, D.C.

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Row 5, Grave 89, 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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by letter of transmittal No. 2392, dated 13/8/47. No  
further information is available.

FOR THE COMMANDING GENERAL :

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

Received 23 Nov 1948 OQMG  
Not identifiable from  
information presently  
available

Incl # 34

1

Interred 30 November 1948  
J-6-8-JSMC. St Laurent  
DOUGLAS A. MAC KENZIE *Douglas MacKenzie*  
Capt. Inf, Cemetery Superintendent

SECTION A - NAME AND BURIAL LOCATION OF DECEASED  
DIRECTIVE NUMBER 3582 00000  
DATE 10 09 47  
DAY MONTH YEAR

NAME UNKNOWN  
SERIAL NUMBER X-000071  
RANK  
ARM 48  
DATE OF DEATH  
DAY MONTH YEAR

CEMETERY ST LAURENT BAVEUX  
DISPOSITION OF REMAINS 3505 80  
CODE DIST. PT.

PLOT G ROW 5 GRAVE 89 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  
SERIAL NUMBER X#000071  
RANK Utd  
DATE OF DEATH 6 June 1944  
DATE DISINTERRED 3 Oct. 47

IDENTIFICATION TAG ON REMAINS MARKER ORGANIZATION Utd RELIGION Utd IDENTIFICATION VERIFIED BY JOHN H. CLARK 1st Lt. CE NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL O.D. blanket only  
CONDITION OF REMAINS Advanced decomposition.

OTHER MEANS OF IDENTIFICATION None

MINOR DISCREPANCIES 1 Arm of service corrected-Authority 355 (Hq,AGRC)  
None

REMAINS PREPARED AND PLACED IN CASKET  
DATE 6 Oct. 47 BY G. J. Burke

CASKET SEALED BY G. J. Burke EMBALMER (Signature) *G. J. Burke*

CASKET BOXED AND MARKED DATE 6 Oct, 47, H. B. Albert, Rec. SHIPPING ADDRESS VERIFIED BY JOHN W. SHARP

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

NAT FILE RECORDS ANNOTATED DATE APR 17 1968 NAME *John W. Sharp* R & E BR.

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

# RECORD OF CUSTODIAL TRANSFER

FORM 100-2

## 1. SHIPPED

FROM <b>Casketing point "B" AGRC</b>		TO <b>USMC-ST. LAURENT, France</b>	
KIND OF CONVEYANCE <b>Hand</b>		NAME OF CONVOYER <b>JOHN W. SHARP, 1st Lt. Inf.</b>	
SIGNATURE OF SHIPPER <b>JOHN W. SHARP, 1st Lt. Inf.</b>	DATE <b>6 Oct 47</b>	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 <b>21 DUBENI FRANCE</b>	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 - 71

Cemetery St. Laurent, France

Plot 4 Row 5 Grave 89

**Date reprocessed:**

1. ~~25 June 1947~~ 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~~ disinterred by Subordinate Identification Point, Garenton  
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>		
	(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>Remnants of white</u>		
Undershirt, Cotton	<u>NONE</u>		
Trousers, HBT	<u>Remnants of</u>		
* Trousers, Wool OD	<u>NONE</u>		

Belt, web **NONE**

Drawers, wool **NONE**

Drawers, cotton **Remnants of OD**

Leggings, wool **NONE**

Socks, cotton **NONE**

\* Shoes **NONE** (type)

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? **NO**

6. Description of Remains :

Age **UTD** Height **UTD** 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, 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 **None found**  
(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 ..... **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 ..... **None found**  
(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 ..... **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? No (Yes-no)

If not, explain Hands missing

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

9. Remarks Remains received partially cremated with a few bone fragments, wrapped in a grey non regulation blanket.  
Remnants of clothing found on remains.  
No clothing marks found.  
No Burial Report or GRS tag found.  
Fluoroscopic Examination negative.  
Estimated weight of remains 2 1/2 Lbs.  
Measurements of bones impossible.  
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.

*Ernest C. Gaddy*

(Officer's Name)  
**ERNEST C. GADDY**

**C.W.O. U.S.A.**

Rank

Service

**CENTRAL IDENTIFICATION POINT**

(Organization)



SKELETAL CHART ST. LAURENT, FRANCE

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)  
Plot G. Row 5, Grave 89



CHART "A"

X-91 St Laurent

Reversed side of 371 for Pfc Paul Williams, 35628960, returned by field & sent to MHR 21 Jan 48, reads as follows:

\*The following Unknowns at St Laurent may be associated with Col 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**  
TM 10-630 AND AR 30-1815

22151  
22 July 44.  
Date

*Unknown*  
**UNIDENT. X 71 (AMERICAN)**

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Last Name                      First                      Initial                      Rank                      Serial No.

Unit                      Organization

**Normandy, France**                      **6 June 44 EST**                      **KIA**

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Place of Death                      Date of Death                      Cause of Death

**1700- 13 June 44**                      **ST. LAURENT SUR MER # 1**                      **675-896**

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Time and Date of Burial                      Name of Cemetery                      Name or Coordinates of Location

**89**                      **5**                      **G**                      **Temp**

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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 badly burned. Fingerprints and tooth chart impossible.**

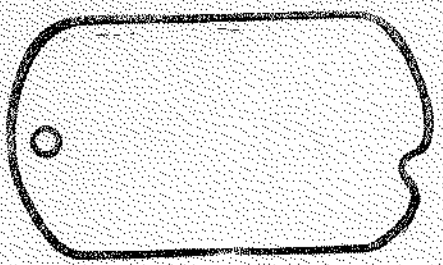
What means of identification were buried with the body?

**GR. FORM # 1 in shell case**  
To determine Right or Left use Deceased's Right and Left.

Who is buried on:

Deceased's Right:	<b>UNIDENT. X 72</b>	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	<b>Bakka, Dean M.</b>	<b>859-06-40</b>		<b>USN</b>	<b>88</b>
	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**

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Signature of Officer or other person reporting burial  
*Hubert E. Berry*  
Verified by G.R.S. Other \_\_\_\_\_  
**HUBERT E. BERRY**  
**1st Lt. QMC**  
**Graves Registration Officer**