

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

**INTRAOFFICE REFERENCE SHEET**

*293 (U.S. & France) (misc.) St. Laurent (X-91, 93, 160, 161)*

DUE, HOUR AND DATE

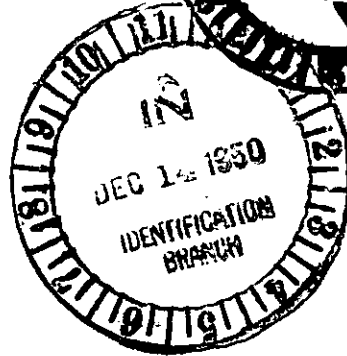
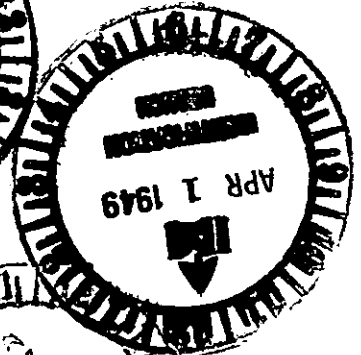
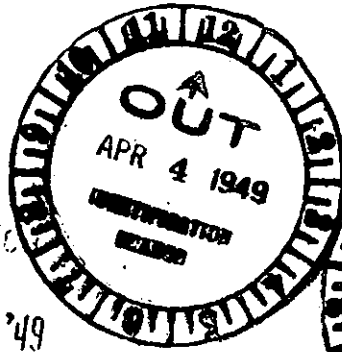
1 NO.	2 FROM-	3 TO-	4 DATE	5 MESSAGE
1.	Chief, Navy Sect MemDiv	Chief, ID Sect ID Br MemDiv	30 March 1949	<p><i>293 Unknown - St. Laurent X-90</i></p> <p>1. The following unknown cases have been declared "UNIDENTIFIABLE" by the Field and have been approved by this office as unidentifiable:</p> <p>USMC St Laurent, France</p> <p>X-91 Plot M, Row 4, Grave 66  X-93 " M, " 4, " 70  X-160 " F, " 4, " 80  X-161 " F, " 8 " 156</p> <p><i>WELL MARSDEN 73880</i></p>
X 293	<i>Unknown</i>	<i>St. Laurent</i>	<i>X-93</i>	
X 293	<i>"</i>	<i>"</i>	<i>"</i>	<i>X-160</i>
X 293	<i>"</i>	<i>"</i>	<i>"</i>	<i>X-161</i>

*WAF  
11 April 1949  
C. C. Decker  
Sect. Br*

REPATRIATION  
RECORDS BRANCH

APR 1 11 02 AM '49

MEMORIAL DIVISION



HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

RRE 293

293 unk. France (St. Laurent) X-91

~~3 March 1949~~  
(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

*Navy*

The records pertaining to Unknown X-91, Plot M,  
Row 4, Grave 66, USLC ST. LAURENT, FRANCE,  
have been reviewed and it is the opinion of this Office that sufficient  
evidence is not available at the present time to establish the identity  
of the deceased concerned. The remains concerned should be classified  
as unidentifiable at the present time.

Report of Reprocessing of remains was forwarded to your Office  
by Transmittal Ltr. No. 2369, dated 23 July 1947

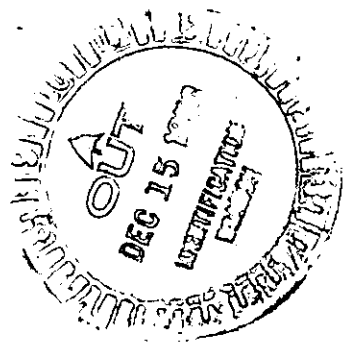
Case reviewed by undersigned Members of the Board of Review:

*Stanley C. Tyrell*  
-----  
Capt. Jack C. HAYES, O-1577297 OMC Capt Stanley C. TYRELL, O-1304296 Inf

*Edward E. Stout*  
-----  
Capt. Edward F. PRICE, Jr., O-1588236 OMC 1/Lt. Edward E. STOUT, O-1594512 CE

*Ernest J. Oglesby*  
-----  
1/Lt Ernest J. OGLESBY, O-449004 Cav

Incl # 1



BMB GWA

Interred 21 December 1948

H-11-14 USMC. St Laurent  
DOUGLAS A. MAC KENZIE  
Capt. Inf. Cemetery Superintendent

DISINTERMENT DIRECTIVE

1

SECTION A - NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER 3582 00000	DATE 10 09 47 DAY MONTH YEAR	
NAME UNKNOWN		SERIAL NUMBER X-000091	RANK	ARM 8
CEMETERY ST LAURENT BAVEUX		DATE OF DEATH		DISPOSITION OF REMAINS 3505 80 CODE DIST. PT.
PLOT M	ROW 4	GRAVE 66	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
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SECTION C - DISINTERMENT AND IDENTIFICATION

NAME UNKNOWN	SERIAL NUMBER X-000091	RANK Utd	DATE OF DEATH Utd	DATE DISTINTERRED 18 Oct 47
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	ORGANIZATION	RELIGION Utd	IDENTIFICATION VERIFIED BY JOHN H CLARK, 2 Lt QMC NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Fatigues	CONDITION OF REMAINS Advanced decomposition
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OTHER MEANS OF IDENTIFICATION  
None

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

FILE  
12 MAY 1949

REMAINS PREPARED AND PLACED IN CASKET DATE 27 Jan 48 BY Robert Johnson	EMBALMER (Signature) ER N H MEM. DIV. <i>Robert Johnson</i>
CASKET BOXED AND MARKED DATE 27 Jan 48 BY E. Davis	SHIPPING ADDRESS VERIFIED BY JOHN W. SHARP, 1 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, 1 Lt Inf

SIGNATURE OF GRS INSPECTOR

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

*mba*

# 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 (BY ADMINISTRATIVE ORDER)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER ST. LAURENT SERVICE	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-91

Cemetery St. Laurent, France.

Plot M Row 4 Grave 66

### Date reprocessed :

1. ~~XXXXXXXXXX~~ 7 July 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, 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>		
	(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 **None** (type)

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?

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, 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 None found.  
(White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw UTD Circumference of head in inches Missing  
(Large, small, normal) (Hair 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  
(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.

See attached skeletal Chart.

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

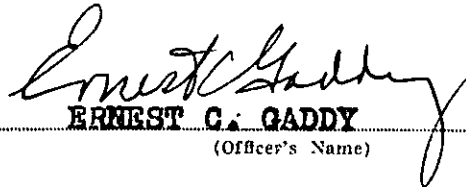
8. If not, explain Hands missing.

8. Has tooth chart been prepared? No If not, explain None found!  
(Yes-no)

9. Remarks Partial remains received, wrapped in a wool OD blanket.  
No clothing found. Fluoroscopic Examination negative. Estimated  
weight of remains : 18 lbs. All major bones missing. Bone  
measurements impossible. Original Burial Report found. No G.R.S.  
Tag found.

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)

C.W.O.  
Rank

U.S.A.  
Service

Central Identification Point.  
(Organization)

# SKELETAL CHART

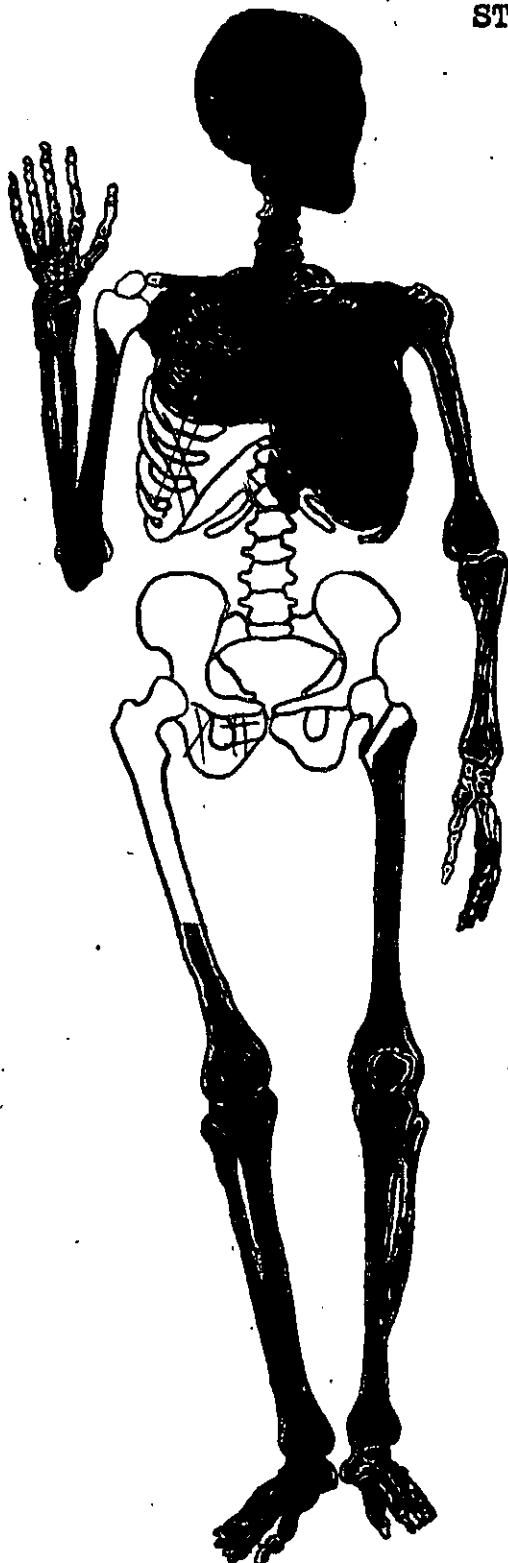
(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

ST. LAURENT CEMETERY, FRANCE.

PLOT : M

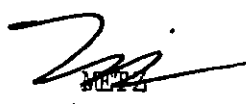

ROW : 4

GRAVE:66



**INTRAOFFICE REFERENCE SHEET**

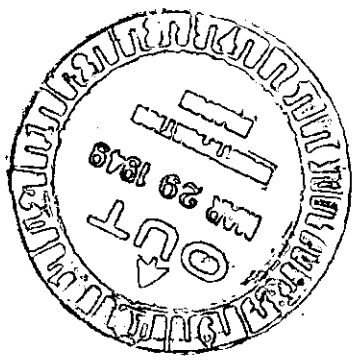
DUE, HOUR AND DATE \_\_\_\_\_

1 NO.	2 FROM—	3 TO—	4 DATE	5 MESSAGE																
1	Chief Ident Branch Mem Div	Chief R & R Br ATTN: Navy Liaison Section	28 Mar 1949	<p>1. Attached herewith are certificates of Unidentifiability for the following Unknowns from USMC St. Laurent, France:</p> <table border="0"> <tr> <td>X-91</td> <td>Plot M</td> <td>Row 4</td> <td>Grave 66</td> </tr> <tr> <td>X-93</td> <td>" M</td> <td>" 4</td> <td>" 70</td> </tr> <tr> <td>X-160</td> <td>" F</td> <td>" 4</td> <td>" 80</td> </tr> <tr> <td>X-161</td> <td>" F</td> <td>" 8</td> <td>" 156</td> </tr> </table> <p>2. In view of the transfer of the above Unknowns to your Section request the cases be reviewed and this Office notified upon acceptance of the above certificates.</p> <div style="text-align: right; margin-right: 100px;">   <small>74059</small> </div> <div style="text-align: right;">   <small>B. BARRY</small>  <small>2462</small> </div> <p>4 Incls:                      1 - Certificate of Unidentifiability for (X-91)                      2 - Certificate of Unidentifiability for (X-93)                      3 - " " " " (X-160)                      4 - " " " " (X-161)</p>	X-91	Plot M	Row 4	Grave 66	X-93	" M	" 4	" 70	X-160	" F	" 4	" 80	X-161	" F	" 8	" 156
X-91	Plot M	Row 4	Grave 66																	
X-93	" M	" 4	" 70																	
X-160	" F	" 4	" 80																	
X-161	" F	" 8	" 156																	

cen

REPAIRATION  
RECORDS BRANCH

MAR 29 10 33 AM '49  
MEMORIAL DIVISION



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REPAIRATION RECORDS BRANCH

X-91 St Laurent

Reverse side of 371 for Pfc Paul Williams, 35638960, returned by field & sent to  
MAR 21 Jan 48, reads as follows:

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

X-27

X-32

X-46A

X-60

X-62

X-63

X-64

X-65

X-66

X-70A

X-72

X-77

X-80

X-81

X-89

✓ X-91"

# RESTRICTED REPORT OF BURIAL

TM 10-630 AND AR 30-1815

22-1801  
28 July 1944  
Date

*Unknown*  
UNIDENTIFIED X-91

(American)

Last Name First Initial Rank Serial No.

Unit Organization

Normandy, France  
Place of Death

6 June 1944 (Est)  
Date of Death

KIA  
Cause of Death

1100 hrs, 1 July 1944  
Time and Date of Burial

St Laurent Sur Mer #1  
Name of Cemetery

675-896  
Name or Coordinates of Location

66  
Grave Number

4  
Row Number

M  
Plot Number

Temp  
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 found on ICT #30 in Boiler Room. Body Unidentifiable

Only part of body recovered.

Fingerprints and tooth charts impossible

What means of identification were buried with the body?

GRS Form #1 in 50 Cal Shell Casing

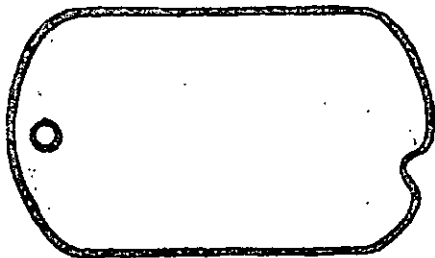
To determine Right or Left use Deceased's Right and Left.

Who is buried on:

Deceased's Right: Vagienski, Frank F. 35154701 67  
Name Serial No. Rank Organization Grave No.

Deceased's Left: Alphin, Floyd E. 35012781 65  
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

Signature of Officer or other person reporting burial

*Robert E. Berry*

Verified by G.R.S. Officer

**ROBERT E. BERRY**  
1st Lt. QMC

# 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

2

1

Thumb

4

3

2

1

Thumb

Right Hand

## 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.