

7887 GRAVES DETACHMENT

APD 757

24/3 amb 4.00 X-160 ME

Attached hereto are case papers for an approved unidentifiable case which are considered to be of investigative importance. Records of this headquarters indicate these case papers were not previously forwarded to OQMG for:

UNFACON X-160, FOY

(FOO) NEUVILLE

NAN
File

Identification Branch

HEADQUARTERS
1ST QUARTERMASTER GROUP
APO 513, U. S. ARMY

REPORT OF INVESTIGATION OF ISOLATED GRAVE
or
UNBURIED REMAINS

Date

* U.S. - Allied - Enemy

1. Name, Rank, ASN of deceased:
2. Organization of deceased:
3. Means of identification:
4. Cause of death: 5. Date of death:
6. If isolated Grave:
 - a. Date of burial:
 - b. By whom buried:
 - c. Inscription on marker:
7. Location of grave/unburied remains:
(Be specific, sketch on reverse)
.....
8. Names of deceased and location of other *graves/unburied remains in immediate vicinity:
.....
9. Description and location of wrecked or abandoned vehicles or equipment in immediate vicinity:
10. Disposition of personal effects: (Itemise if possible)
11. Other pertinent information:
(Use reverse side if necessary)
12. Information furnished by:
(Name, title, address) :
13. Names and addresses of other persons familiar with the case:

(Over)

CHECK LIST FOR DISINTERMENT OF UNKNOWN

All questions should be answered. If a positive answer cannot be given, estimates should be made and indicated as such. If a reasonable estimate cannot be made, a negative answer should be stated.

UNKN-WN X- 160
 CEMETERY _____
 PART I
 Physical Description PLOT J ROW 16 GRAVE 229

1. Estimated height 5' 8"
2. Estimated weight 165
3. Color of eyes _____
4. Color of hair Brown
5. Race White
6. Quantity and characteristics of hair on head (length, baldness, curly, etc.) _____
7. Amount and color of hair on body (arms, chest, pelvis region, legs) _____
8. Description of mustache and beard _____
9. Length of sideburns _____
10. Was the deceased circumcised? _____
11. Are any tattoos or scars on the body? (Give description) _____
12. Is there anything unusual about the fingernail structure? _____
13. Is there anything unusual in the construction of the toes or feet? _____
14. Was tooth chart taken? Yes Were fingerprints taken? No
15. Proximate cause of death? _____
16. Was the body burned? To what extent? _____
17. Are any parts of the body missing or severed? _____
18. Is there any evidence of first-aid or other medical treatment? _____
19. If the remains are badly mangled, a careful search should be made for identification tags or personal effects.
20. If no clothing is found, measurements should be made of the head, neck, chest, waist, foot, leg (inseam), and arm length in order that clothing sizes may be determined.

TOOTH CHART

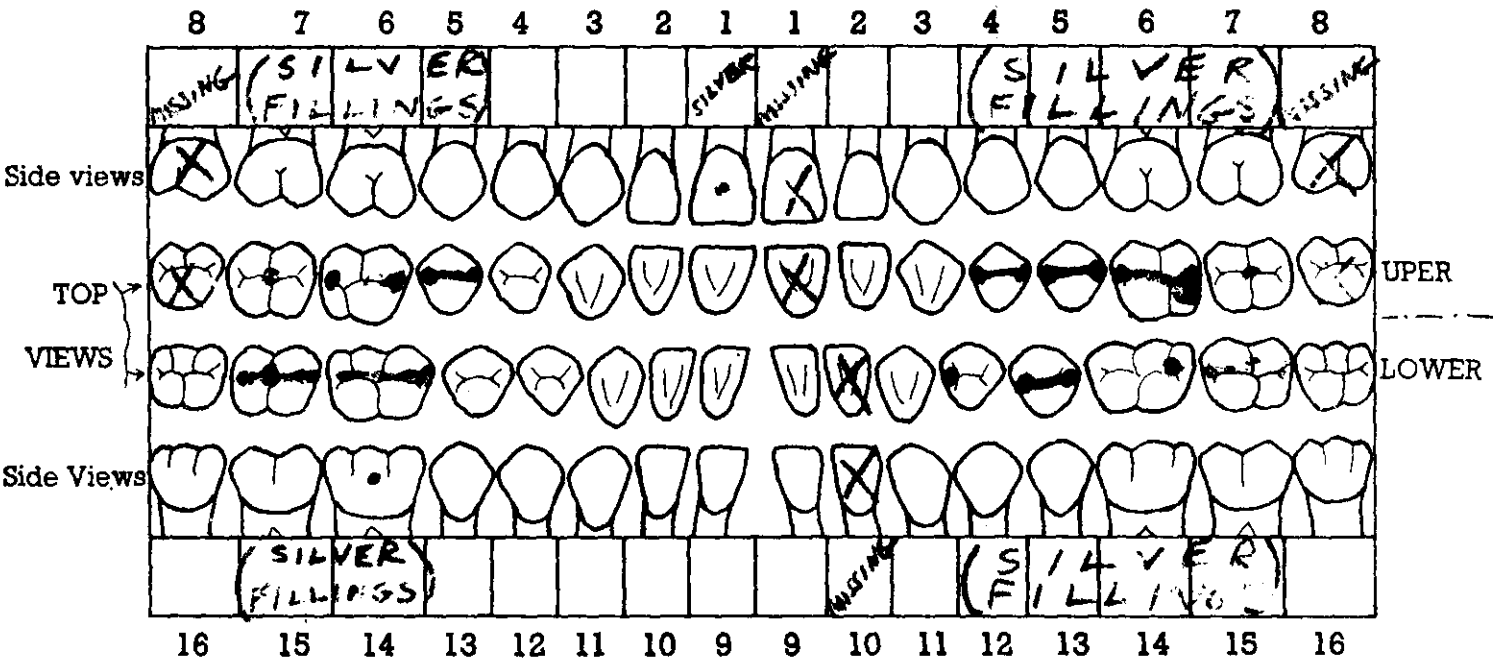
4 June 45
 Date

UNIDENTIFIED X-160
 Last Name First Initial Rank Serial No.

BOURCY, ^{USA} BELGIUM EST. JAN 45 Organisation KIA: M.W.
 Place of Death Date of Death Cause of Death

Right

Left



This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

[Handwritten Signature]
 Signature of Officer or other person, who prepared Tooth chart

Verified by G. R. S. Officer

TOOTH CHART

19 Dec 1945

Date

Unknown X-160

Last Name

First

Initial

Unk

Unk

Rank

Unk

Serial No.

Unit

Organization

Place of Death

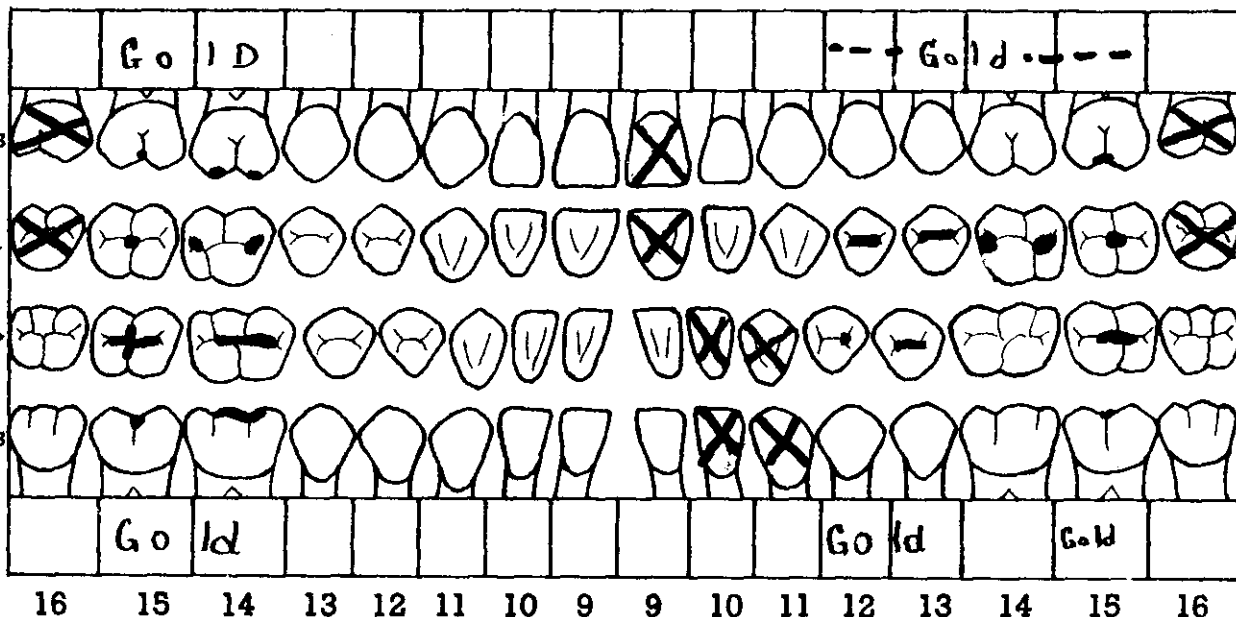
Date of Death

Cause of Death

Right

Left

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8



This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspid (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

Patrick J. Connolly
 Signature of Officer or other person who prepared Tooth chart

2d Lt. Inf.
 Verified by G. R. S. Officer

JEW

1

USMC Neuville en Condroz
Plot: D Row: 35 Gr: 16
Date of Burial: 13 May 50
Verified by GRS Officer
M.R. Swart, Capt OMC

DISINTERMENT DIRECTIVE

SECTION A NAME AND BURIAL LOCATION OF DECEASED	DIRECTIVE NUMBER 1225 02728	DATE 15 10 49 DAY MONTH YEAR
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NAME UNKNOWN X	SERIAL NUMBER 000160	GRADE	ARM 0	RACE 0	RELIGION 6
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CEMETERY FOY BELGIUM	PLOT J	ROW 10	GRAVE 229	DISPOSITION OF REMAINS 1202 80 CODE DIST. CTR.
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SECTION B - CONSIGNEE AND NEXT OF KIN NO FLAG SENT

NAME AND ADDRESS OF CONSIGNEE NEUVILLE, EN-CONDROZ, BELGIUM	NAME AND ADDRESS OF NEXT OF KIN (BY ADMINISTRATIVE DECISION) These remains are unidentifiable and are to be permanently interred. (Reg. AGRC-31 Jan 50)
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SECTION C - DISINTERMENT AND IDENTIFICATION

NAME Unknown X-160	SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISINTERRED 20 Sept. 1948
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS ROB <input checked="" type="checkbox"/> MARKER FMB	ORGANIZATION UNKNOWN	RELIGION	IDENTIFICATION VERIFIED BY V.N. HOYT, 1/LT INF NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Mattress Cover	CONDITION OF REMAINS Complete, skeletal form
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OTHER MEANS OF IDENTIFICATION
ROB found on remains reads same as above

MINOR DISCREPANCIES (Prepare Discrepancy Report OMC Form 1194a for major discrepancies.)
None

REMAINS PREPARED AND PLACED IN ~~CASKET~~ Transfer Case

DATE 28 Sept. 1948	BY Thomas F. Thatcher
CASKET SEALED BY G.R. Reed, Embalmer	EMBALMER (Signature) George R. Reed

CASKET BOXED AND MARKED DATE 24 Feb 49 by G.R. Reed	SHIPPING ADDRESS VERIFIED BY All markings, plates and tags verified by: V.N. Hoyt, 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. except casketing

V.N. HOYT, 1/LT INF
SIGNATURE OF INSPECTOR
28 Sept 49
REG. DIV.

REMARKS AND SPECIAL INSTRUCTIONS
REMAINS UNIDENTIFIABLE
Consignee verified TWX BRE 238 Dtd 23 Jan 50 (Reg. Div. 7827 Graves Reg Det Paris)
I certify that the entries on this form are true copies of the entries on Copy Number 4 of this Disinterment Directive which contain the signatures of the persons whose names are typed hereon.
Raymond T. Rodriguez, Capt OMC

File 34

X - 29

JEW

DISINTERMENT DIRECTIVE

6

**SECTION A —
NAME AND BURIAL LOCATION OF DECEASED**

DIRECTIVE NUMBER

1-10-72

DATE

10 10 72

DAY MONTH YEAR

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
UNKNOWN	000150				

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS
FLY BELGIUM	J	10	2500	10-10-72 CODE DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
NEUVILLE, EN-CONDROZ, BELGIUM	(BY ADMINISTRATIVE DECISION)

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISTINTERRED

IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY
<input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	UNKNOWN		NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)

REMAINS PREPARED AND PLACED IN CASKET

DATE	BY

CASKET SEALED BY	EMBALMER (Signature)

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY

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

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

REMAINS UNIDENTIFIABLE

10-10-72
 J. J. ...
 J. J. ...

RRE Form #43

20 Sep 48

293 New-Fog 1-10-48

Attached hereto correspondence and/or other identifying media of possible archival value, pertaining to:

UNIDENTIFIABLE X - 160

(TEMP.: FOY)

(Last Name)

(First Name)

(Initial)

(Rank)

(ASN)

Subject remains have been permanently interred overseas in the United States Military Cemetery USMC NEUVILLE-en-CONDROZ, Belgium

Incl #

CHECK LIST FOR DISINTERMENT OF UNKNOWN

All questions should be answered. If a positive answer cannot be given, estimates should be made and indicated as such. If a reasonable estimate cannot be made, a negative answer should be stated.

UNKNOWN X- 160

PART I CEMETERY Box

Physical Description PLOT J ROW 10 GRAVE 229

1. Estimated height 5: 8"
2. Estimated weight 165
3. Color of eyes _____
4. Color of hair Brown
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7. Amount and color of hair on body (arms, chest, pelvis region, etc.)

8. Description of mustache and beard _____
9. Length of sideburns _____
10. Was the deceased circumcised? _____
11. Are any tattoos or scars on the body? (Give description) _____

12. Is there anything unusual about the fingernail structure? _____
13. Is there anything unusual in the construction of the toes or feet? _____
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ARMY SERVICE FORCES

IN REPLY REFER TO SP YG 293

Unknown K-160
(Foy #1) Belgium

OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

14 May 1946

SUBJECT: Information Required for Graves Registration

TO : World War II records
Administration Center, AGO,
4300 Goodfellow Blvd.,
St. Louis 20, Missouri

1. Reference is made to letter from this office dated 3 April 1946, copy inclosed, to which no reply has been received.

2. It is requested that this office be informed of the status of the communication referred to in the preceding paragraph.

FOR THE QUARTERMASTER GENERAL:

Incl:
Cy Ltr 4/3/46

FOR *Donald Ferguson*
ARTHUR S. ROSENBERG
2nd Lt., JMC
Assistant



ARMY SERVICE FORCES

OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

IN REPLY REFER TO SPQYG 293
Unknown X-160
(Foy #1) Belgium

orig R B
at
date

3 April 1946

SUBJECT: Information Required for Graves Registration

TO : The Adjutant General's Office
World War II Records Administration Center
4300 Goodfellow Blvd.,
St. Louis 20, Missouri

1. An investigation is being conducted by this office to determine the identity of an Unknown member of our Armed Forces who was killed in the vicinity of Bourcy, Belgium on estimated date 16 January 1945. Remains were recovered with those of Pvt. John R. Cermak, ASN 33927276 of the 327th Glider Infantry Regiment.

2. It is requested that your records be examined on all personnel for the 327th Glider Infantry Regiment reported missing or killed in action in that area on approximate date 16 January 1944, and for whom no report of burial have been received. Any other information which may be of assistance in establishing the identity of this Unknown would be of the utmost value to this office and should be forwarded to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

Arthur S. Rosengard

ARTHUR S. ROSENGARD
2nd Lt., QMC
Assistant

*Thom
Waller
24 June 44*



*File
24 June 44
all records
1944*

SPQYG 293
Unknown X-160
(Foy #1) Belgium

3 April 1946

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FOR THE QUARTERMASTER GENERAL:

ARTHUR S. ROSENCAHD
2nd Lt., QMC
Assistant

SP4YG 293
Unknown X-160
(Foy #1) Belgium

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4300 Goodfellow Blvd.,
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FOR THE QUARTERMASTER GENERAL:

ARTHUR S. ROSENGARD
2nd Lt., QAC
Assistant

C O P Y

Level

at
lra
4-3-46

SPCNO 293
Unknown X-160
(Foy #1) Belgium

14 May 1946

SUBJECT: Information Required for Graves Registration

TO : World War II Records
Administration Center, AGO,
4900 Goodfellow Blvd.,
St. Louis 20, Missouri

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FOR THE QUARTERMASTER GENERAL:

ARTHUR S. ROSEHARD
2nd Lt., QMG
Assistant

Incls:
Cy Ltr 4/3/46

JG

EK
D.T.

REGISTRATION AND
RECORDS BRANCH
MAY 13 12 54 PM '46
MEMORIAL DIVISION

SP-210 293
Unknown I-240
(Foy #1) Belgium

3 April 1946

SUBJECT: Information Required for Graves Registration

**TO : The Adjutant General's Office
World War II Records Administration Center
4300 Goodfellow Blvd.,
St. Louis 20, Missouri**

1. An investigation is being conducted by this office to determine the identity of an Unknown member of our Armed Forces who was killed in the vicinity of Bourdy, Belgium on estimated date 16 January 1945. Remains were recovered with those of Pvt. John E. Cermak, ASN 33927276 of the 327th Glider Infantry Regiment.

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FOR THE QUARTERMASTER GENERAL:

ack

2001

ARTHUR S. ROBINSON
2nd Lt., QMC
Assistant

MAIL & RECORDS BRANCH
APR 4 1946

RECORDS BRANCH AND
MEMORANDUM DIVISION
APR 4 9 17 AM '46

H.S.D.

93 Cermak, John E. R. (33,927 276)

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

14 September 1948
Date

SUBJECT: Unidentifiable Remains.

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

1. The records pertaining to Unknown X- 160, Plot I,
Row 105, Grave 229, UCMC Foy 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. 2550, dated _____. No
further information is available.

FOR THE COMMANDING GENERAL:

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

Received #3067/1654 OQMG
Not identifiable from
information presently
available
1-10-48

IDENTIFICATION CHECK LIST

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

Unknown X -160
 Cemetery Foy (Belgium)
 Plot J Row 10 Grave 229

Date reprocessed: 28 October 1947

1. ~~Arrived at cemetery~~ 28 October 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 _____
(Name and organization)
4. Evacuated to Cemetery by Subordinate Identification Point #2, Neuville en Condroz,
(Name and organization) Belgium
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	None		
Raincoat	Remnants of <small>(Type)</small>		
Overcoat	None		
Jacket, Field	None		
Jacket, Combat	None		
Mackinaw	None		
Sweater	None		
Jacket, HBT	None		
* Shirt, Wool OD	Remnants of		
Undershirt, Wool	White - Remnants of		
Undershirt, Cotton	None		
Trousers, HBT	None		
* Trousers, Wool OD	Remnants of		

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 ~~XXX~~ Ground ~~Force~~ Force? A.G.F.

6. Description of Remains: **R. Humerus 33.9 Femur 47.7 Radius 23.8 Tibia 37.3 Ulna 25.1**
Fibula 36.5

Age UTD Height Estimated 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, pocks, freckles)

Build UTD
 (Large, fat, thin, muscular)

Hair Medium brown, approximately 1 1/2" long - straight
 (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 **See Tooth Chart**
 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw **UTD** Circumference of head in inches **21"**
 (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 **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 **None found**
 (Nose, arms, legs, etc.)

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

See attached anatomical chart.

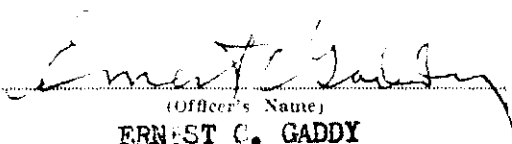
7. Have finger prints been placed on Report of Interment? No
(Yes-no)

If not, explain Too decomposed

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

9. Remarks ~~Estimated weight of processed remains: 13 lbs.~~
~~Fluoroscopic Examination: Negative.~~
~~Burial bottle found with remains.~~
~~Clothing found was in debris.~~
~~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.

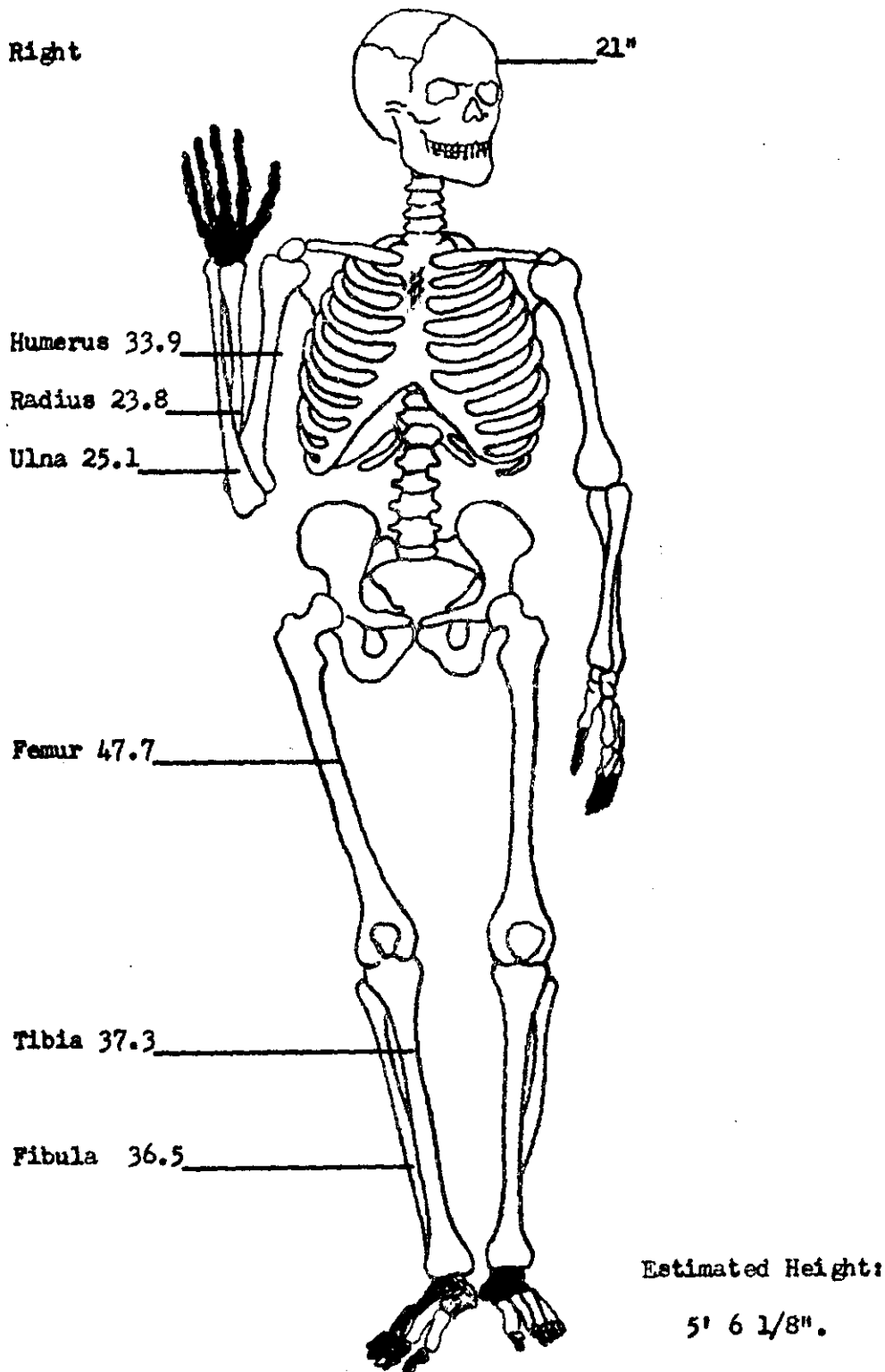

(Officer's Name)
ERNEST C. GADDY
C.M.O. U.S.A.
Rank Service

CENTRAL IDENTIFICATION POINT.
(Organization)

SKELETAL CHART

Unknown X-160
Belgium
Plot: J Row: 10 Grave: 229

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



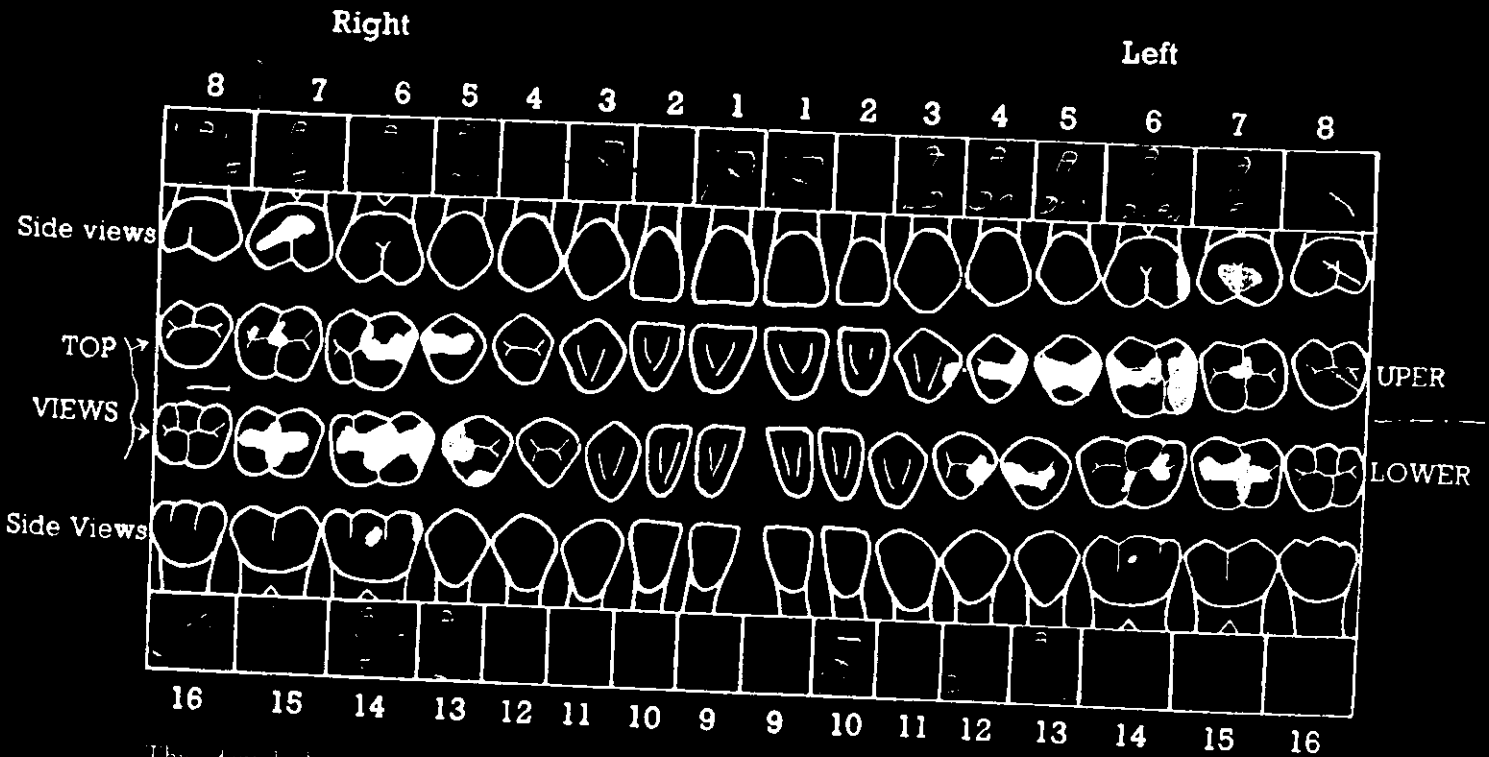
G. R. & E. DIV.
 OFFICE OF THE CHIEF QUARTERMASTER
 HQ. COM. ZONE, ETOUSA

, (Belgium)
 Plot: J Row: 10 Grave: 22

TOOTH CHART

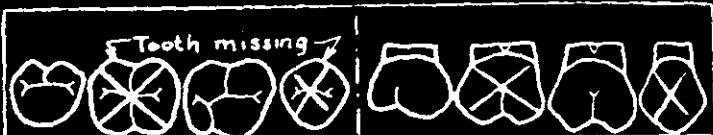
Date _____

Last Name	First	Initial	Rank	Serial No.
Unit			Organization	
Place of Death		Date of Death		Cause of Death



This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities or decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

MISSING TEETH . . . All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X"ed out and labeled, thus:



CROWNED TEETH . . . Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus:



BRIDGE WORK . . . Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:



FILLINGS . . . Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus:



CARIES (CAVITIES) . . . Outline location and size of cavity, shade in thus:



DENTURES (PLATES) . . . Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp".

ADDITIONAL SPACE FOR FURTHER REMARKS

4 - noticeably missing.

4-10 and 1-10 are unruptured before death.

4-11 has a slight lingual version.

4-12 quite a bit smaller than the rest of the teeth. It looks as though

it is a baby tooth.

TOOTH CHART

4 JUNE 45
 Date

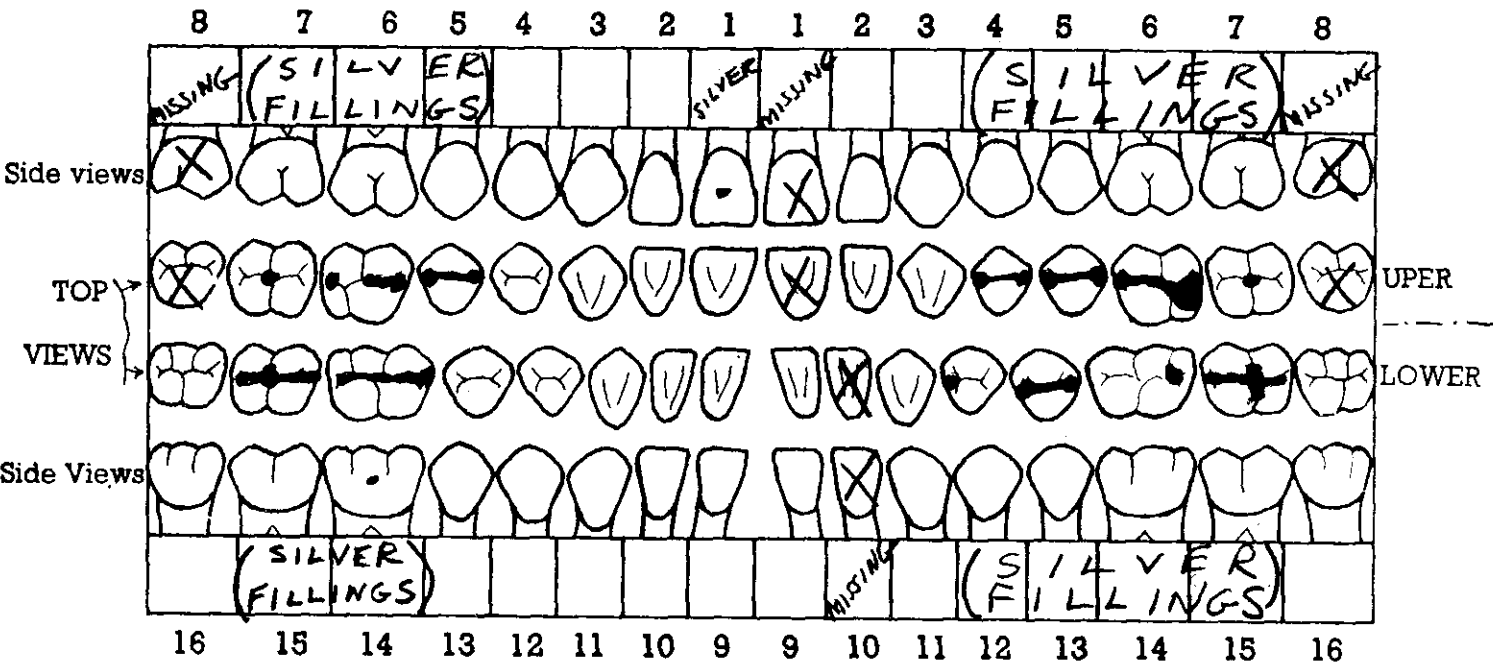
UNIDENTIFIED X-160

Last Name First Initial Rank Serial No.

BOURCY, BELGIUM EST. JAN. 45 KIA; M.W.
 Place of Death Date of Death Cause of Death

Right

Left



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[Signature]
 Signature of Officer or other person who prepared Tooth chart

Verified by G. R. S. Officer

HEADQUARTERS
1ST QUARTERMASTER GROUP
APO 513, U. S. ARMY

REPORT OF INVESTIGATION OF ISOLATED GRAVE
or
UNBURIED REMAINS

Date 4 June 45.....

* U.S. - ~~Applied to~~

1. Name, Rank, ASN of deceased: UNIDENTIFIED X-160.....
2. Organization of deceased: UNK.....
3. Means of identification: NONE.....
4. Cause of death: KIA: MULTIPLE WOUNDS 5. Date of death: EST JAN 45.....
6. If isolated Grave:
 - a. Date of burial: EST JAN 45.....
 - b. By whom buried: Bel. Civilians.....
 - c. Inscription on marker: NONE.....
7. Location of grave/unburied remains: COORDINATES 606643. Sheet. 107. Scale: 1/50,000
(Be specific, sketch on reverse)
.....
8. Names of deceased and location of other *graves/unburied remains in immediate vicinity: JOHN R. CERMAK 33987286.....
9. Description and location of wrecked or abandoned vehicles or equipment in immediate vicinity: NONE.....
10. Disposition of personal effects: (Itemise if possible)
NONE.....
11. Other pertinent information: NONE.....
(Use reverse side if necessary)
12. Information furnished by: HARDY EDMOND.....
(Name, title, address) : RUE DE D CYLISE, BOURCY.....
13. Names and addresses of other persons familiar with the case: NONE.....

(Over)

REBURIAL

AMERICAN DEAD

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

4 June 45

Date

~~UNK~~

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IDENTIFIED (X-160)

Last Name: UNK First: UNK Initial: UNK Rank: UNK Serial No.: UNK

Unit: BOURCY, BELG Organization: KIA: MULTIPLE WOUNDS

Place of Death: Y Date of Death: EST JAN 45 Cause of Death: P 574629

Time and Date of Burial: 1130 4 June 45 Name of Cemetery: U.S. Mil Cem #1, Foy, Bel

Grave Number: 229 Row Number: 10 Plot Number: I Type of Marker: Cross

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

If No Identification Tags **Body Disinterred from vicinity Bourcy, Bel Coordinates 606643**

How were remains identified? **Sheet 107, Scale: 1/50,000. Fingerprints impossible due to advanced stages of decomposition. Tooth Chart taken.**

No Tags **Wore raincoat & summer undershirt. No marking found of clothing**

John R. Cermak, 33987276 was disinterred from same area.

What means of identification were buried with the body?

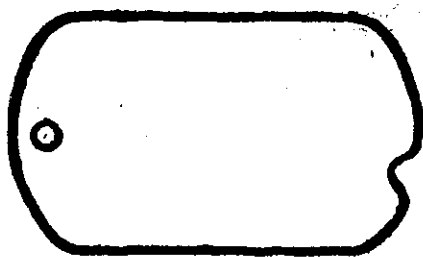
GR Form #1

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

Who is buried on:

Deceased's Right:	<u>CERMAK</u> Name	<u>33987276</u> Serial No.	<u>UNK</u> Rank	<u>UNK</u> Organization	<u>228</u> Grave No.
Deceased's Left:	<u>KITTELSON</u> Name	<u>36993174</u> Serial No.	<u>Pvt</u> Rank	<u>UNK</u> Organization	<u>230</u> Grave No.

Signature of 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 UNK Name

Address

Religion Catholic

REBURIAL

List only Personal Effects Found on Body and disposition of same:

NONE

Previously buried in isolated grave located at Bourcy, Bel.
606643, Sheet 107, 1/50,000

Signature of Officer or other person reporting burial
Leo M. Duffy
 LEO M. DUFFY, 1st Lt., 10 GR. CO.
 610TH QM GR. REG. CO.

Verified by G.R.S. Officer