

IDENTIFICATION DATA

E.O. #1957

1. REMAINS OF UNKNOWN				2. DATE OF REPORT			
X-435				31-5-49			
3. NAME OF CEMETERY		4. PLOT	5. ROW	6. GRAVE	7. DATE OF		
Hammond		GG	3	59	DATE OF		
HAMM					DISINTERMENT	REINTERMENT	
					—	—	

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT OF REMAINS	9. ESTIMATED HEIGHT	10. COLOR OF HAIR	11. RACE
12 LBS.	5'3"	NONE FOUND	

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

Two embossed plates marked:  
Unknown X-435

13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES

UTD

14. WAS BODY BURNED? TO WHAT EXTENT?

YES  NO

15. WAS BODY MANGLED? TO WHAT EXTENT?

YES  NO

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

None found!

17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

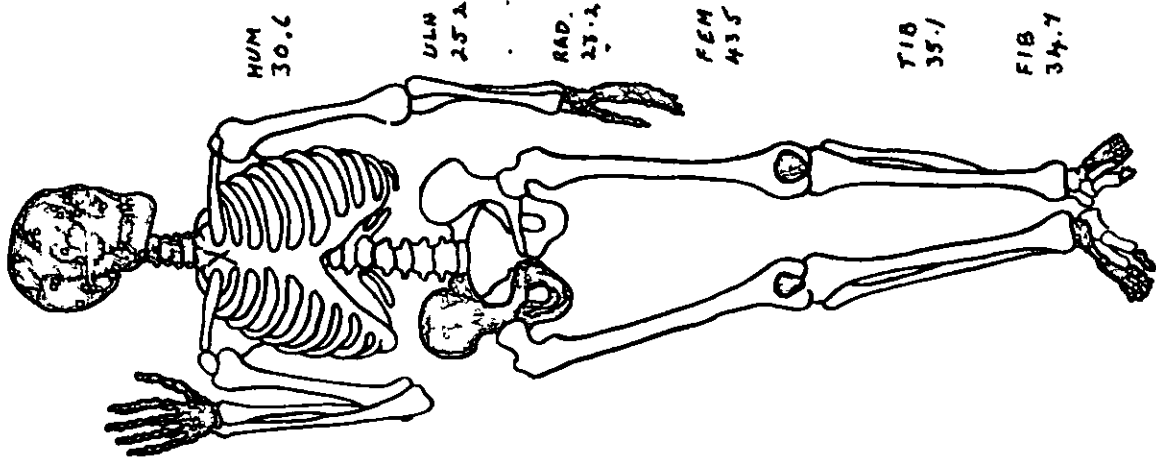
Remains received in skeletal form in a repatriation type casket. no teeth found. no clothing. Remains previously processed by repatriation. no evidence of any healed fractures or amputations. No I. D. tags found.

Note: It was impossible to determine race because no head was present with remains. X-435

X-435

CO. 1957

19. BLACK OUT PARTS OF BODY NC RED



Est. Ht. is 159 CM.

20. **MASS BURIAL CERTIFICATE (IF APPLICABLE)**  
*(Wherein segregation in whole or parts is impossible)*

I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF \_\_\_\_\_ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS:

NUMBER

\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

\_\_\_\_\_

I CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS OF DECEASED AND THAT ALL RESULTING INFORMATION HAS BEEN RECORDED TO THE BEST OF MY KNOWLEDGE

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

SIGNATURE

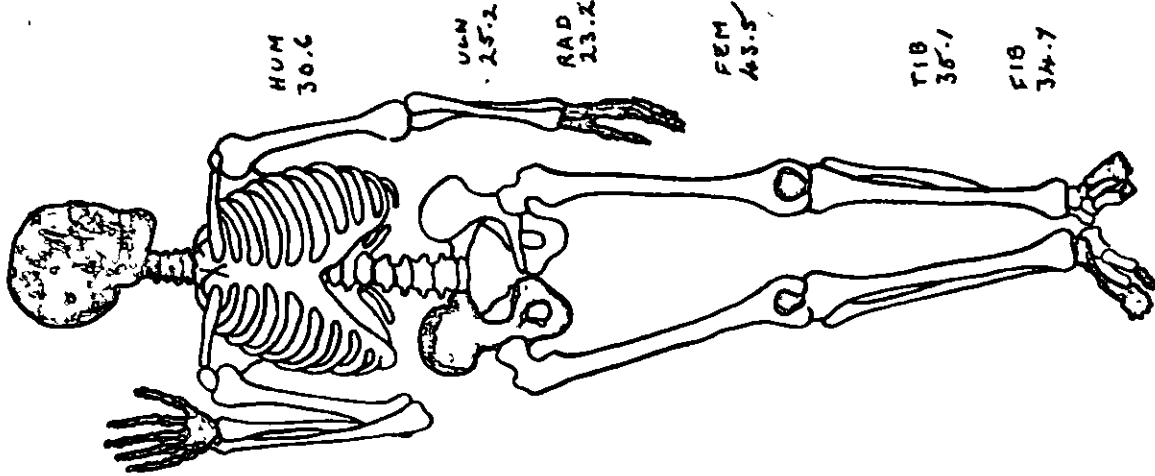
\_\_\_\_\_

X-435

X-435

E.O. 1957

19. BLACK OUT PARTS OF BODY NOT COLLECTED



Est. Ht. is "159cm. 5'3"

20. MASS BURIAL CERTIFICATE (IF APPLICABLE)  
(Wherein segregation in whole or parts is impossible)

I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF \_\_\_\_\_ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS

NUMBER

\_\_\_\_\_

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

\_\_\_\_\_

I CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS OF DECEASED AND THAT ALL RESULTING INFORMATION HAS BEEN RECORDED TO THE BEST OF MY KNOWLEDGE

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

SIGNATURE

\_\_\_\_\_

X-435  
Thomas W. Turner

Strasbourg, le 7 mai 1949

~~Simonin~~  
Carroll

RAPPORT D'EXPERTISE  
=====

Je soussigné, Dr. SIMONIN, professeur de Médecine légale à l'Université de Strasbourg, médecin expert près les tribunaux certifie avoir procédé le 31 mai 1949, au Cimetière militaire de l'Armée américaine de Hamm (Luxembourg) à la mission précisée par l'ordre No. 1957 concernant les restes de l'inconnu X 435 et avoir fait les constatations suivantes:

La mission consiste à rechercher si les restes de l'inconnu X 435 appartiennent à un sujet de race orientale.

Mis en présence de ces restes, j'ai constaté avec regret que la tête n'y figurait pas.

Or, seuls les éléments anthropométriques du crâne et de la face permettent de calculer les différents indices anthropologiques qui interviennent dans la détermination d'une race. Une douzaine de données anthropométriques provenant du squelette de la tête auraient pu être recherchées pour caractériser une race orientale.

Ces recherches s'avèrent impossibles, puisque les restes de X - 435 ne contiennent pas de squelette de la tête.

Je me suis donc contenté de déterminer la taille en utilisant les mensurations des os longs, qui ont donné les résultats suivants:

X - 435

<u>Os:</u>	<u>Longueur de l'os:</u>	<u>Taille correspon-</u> <u>dante:</u>
Humérus gauche:	30,7	156
Cubitus gauche:	25,2	162
Radius gauche :	23,2	159
Fémur gauche:	43,5	159
Tibia gauche:	35,1	160
Péroné gauche:	34,7	159

Taille moyenne: 159 cm.

Chez les individus de race orientale dite sud mongole ou paléo-mongole, la taille moyenne est de 158 à 160 cm. Les individus de la race dite centro-mongole ou race sinienne, la taille moyenne est de 167 à 169 cm. Les individus de la race dite nord-mongole ont une taille moyenne de 162 cm.

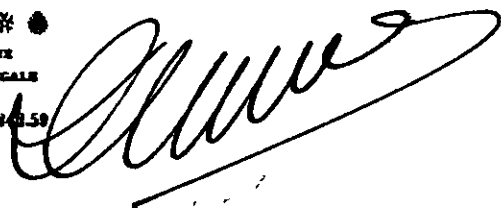
Les restes X - 435 sont celles d'un individu dont la taille est de 159 cm. ; ce qui correspond à la race dite sud mongole. Cela ne veut pas dire que ces restes appartenaient sûrement à cette race, puisque dans la race blanche on trouve des individus ayant la même taille.

#### CONCLUSIONS.

Par suite de l'absence de la tête parmi les restes de l'inconnu X - 435, il a été impossible de rechercher les éléments anthropométriques qui auraient permis de savoir s'ils correspondaient à ceux de la race orientale.

La taille de 1m.59 que présentait le sujet X - 435 correspond à celle de la race dite sud mongole (~~race~~ Chinois.)

**DOCTEUR C. SIMONIN \* ●**  
PROFESSEUR A LA FACULTÉ DE MÉDECINE  
DIRECTEUR DE L'INSTITUT DE MÉDECINE LÉGALE  
ET DE MÉDECINE SOCIALE  
STRASBOURG, 1, Place de l'Hôpital Tél. 241 59



X-435

Hamm GG-3-59  
20 2-47 1130

CASUALTY CLEARANCE PLAN

GERMANY 6

318th Infantry Regiment  
(Organization)

31 August 1945  
(Date)

Name Walend Bernardo  
(Last) (First) (Initial)

Rank: Pvt. ASN: 35313171 Organization: Co "L", 318th Inf Regt

Casualty Status: M.I.A. AWC Date: 15 Feb 45 BCR: 19 Feb 45

PHYSICAL DESCRIPTION:

Height: Unknown Weight: Unknown Age: Unknown

Complexion: Unknown Hair: Unknown Eyes: Unknown

Shoe Size: Unknown Pants Size: Unknown Shirt Size: Unknown

Scars, Tattoos, Birthmarks, Etc.: Unknown

P-94  
Pvt Walend reported to his squad leader on the night of 14 Feb 1945. He was then assigned to a foxhole located about 1/2 mile northeast of Biesdorf, Germany. The enemy was about four hundred (400) yards away but not in strength. The terrain was wooded. The morning of 15 Feb 1945 said squad leader went to where he assigned Pvt Walend but his efforts were fruitless in finding him. Pvt Walend was not in his assigned foxhole and a diligent search of the entire company area failed to disclose his whereabouts. During the night there was no firing and to the knowledge of men available for questioning there were no Germans in the area. Aforementioned squad leader states that Pvt. Walend left the area to which he was assigned.

X-435  
G-59  
R-3  
P-66

Incl. 2.

(Over)

[Incl #5]

ORIGINAL



**CONCLUSION:** (Include presumption of death or of survival)

In view of the above information it can be concluded only that Pvt. Walend left the area to which he was assigned. His future actions and/or the fate that befell him are not disclosed by the evidence.

**RECOMMENDATION:**

It is the recommendation of the undersigned that no change be made in the casualty status of Pvt. Walend.

*Kenneth W. Beesting*  
KENNETH W. BEESTING

(Signature) (Name Typed)

2nd Lt, 318th Infantry

(Grade and Branch)

**Inclosures:**

WALEND BERNARDO



N. B  
11130

HEADQUARTERS.  
3046 QM GRAVE REGISTRATION COMPANY  
APO 757, U.S. ARMY

AGRXC

13 March 1946

SUBJECT: Transmittal of Case No. 55

TO : CO, 536th QM GP, APO 757, U.S. Army

1. Transmitted herewith is case No. 55 your headquarters pertaining to BLESDFORF, Germany (P 94)

2. The deceased has been evacuated to the U.S. Military at Hamm, Luxembourg and reinterred in:

Plot GG, Row 3, Grave 59, possibly X-435.

FOR THE COMMANDING OFFICER:

*Thomas W. Thompson*  
THOMAS W. THOMPSON  
2nd Lt., Inf.  
GR Officer.

- 1. Incl.  
Incl. 1 - case No. 55 pertaining to:  
WALEND, Bernardo, Pvt., 35 313 171.

AGRXC

1st Ind.

FJC/GHW/hb.

HEADQUARTERS, 536 QM GROUP, APO 757, U.S. ARMY,

20 March 1946.

TO: Commanding Officer, First Field Command, AGRC, APO 65, US. ARMY.

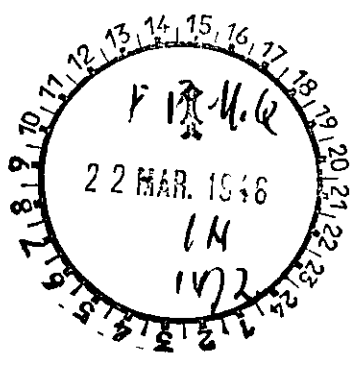
- 1. Forwarded for your information and file.

*File # 46*

FOR THE COMMANDING OFFICER:

*Robert J. Cullen*  
ROBERT J. CULLEN  
1st Lt. CWS  
Adjutant.

1 Incl. n/c.



ORIGINAL

Incl # 46



M  
(Basic ltr Dept of the Army, OQMG OMCMT 293 Unknown X-435 (Hamm)Luxemburg, dtd 12 January 1949, subject: Identification of Unknown Deceased)

RRE 200.2 - Unknown X-435 1st Ind  
(Hamm) Luxemburg

Hq, American Graves Registration Command, European Area, APO 58, US Army,  
24 January 1949

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

Reference Unknown X-435, Plot GG, Row 3, Grave 59, USMC, Hamm, Luxemburg, investigation this headquarters reveals that evidence is inadequate to support positive identification of this case as Pfc. Joseph M.SLEBICS, 33024170.

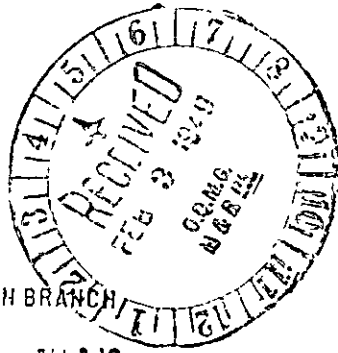
FOR THE COMMANDING GENERAL:

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

Tel: Paris, BALzac 5400, Ext 393

293 Unknown X-435 Luxembourg (Hamm)

3 file  
9 Feb 49  
Lund  
977



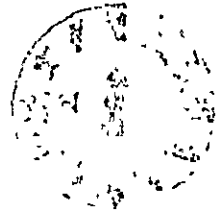
IDENTIFICATION BRANCH

FEB 4 10 30 AM '49

MEMORIAL DIVISION

A.G.R.C.I.

JUN 25 / 4



OUT

A I R M A I L

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

IN REPLY REFER TO QMGM 293  
Unknown X-435  
(Hamm) Luxemburg

12 January 1949

SUBJECT: Identification of Unknown Deceased

TO : Commanding General  
American Graves Registration Command  
European Area  
APO 58, c/o Postmaster  
New York, New York


1. Reference is made to Report of Burial for Unknown X-435, USMC, Hamm, Luxemburg, interred in Plot GG, Row 3, Grave 59.

2. With reference to AGRC Radio #6114, this office concurs in the association of Pfc. Joseph M. Slebics, 33024170, with X-435.

3. It is requested that an investigation be conducted by your headquarters and if identification can be established that the evidence be presented to a Board of Review, and findings forwarded this office by Air Mail.

4. A Congressional inquiry has been received for Pfc. Slebics.

FOR THE QUARTERMASTER GENERAL:

  
T. H. METZ  
Lt. Colonel, QMC  
Memorial Division

A I R M A I L

FRS  
10 JAN 1949

JAN 12 1 18 PM '49  
O. O. H. G.  
MAIL & RECORDS BRANCH

AIR MAIL

*att*

QIGMT 293  
Unknown X-435  
(Hamm) Luxemburg

12 January 1949

SUBJECT: Identification of Unknown Deceased

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FOR THE QUARTERMASTER GENERAL:

F. H. METZ  
Lt. Colonel, QMC  
Memorial Division

JAN 12 1 18 PM '49  
MAIL & RECORDS DIVISION

*T 293 Slebics, Joseph M.  
33024170*

*dl*  
*90*  
Lederman:lrc

AIR MAIL

NJS  
*JCM*

*Wm*  
CFT

**1** ✓  
USMC HAMM, LUXEMBOURG Buried on: Right: SHEMETA  
PLOT H ROW 4 GRAVE 7 240325  
Reburied 21 Dec. 1948 **DISINTERMENT DIRECTIVE**  
Verified by: *W. K. Linton* Left: V.C. DAVIS -  
35295688

SECTION A — GRS Officer DIRECTIVE NUMBER DATE  
NAME AND BURIAL LOCATION OF DECEASED 6020 00128 15 08 48  
DAY MONTH YEAR

NAME SERIAL NUMBER GRADE ARM RACE RELIGION  
*293*  
UNKNOWN X-000435 0 6

CEMETERY PLOT ROW GRAVE DISPOSITION OF REMAINS  
**HAMM LUXEMBOURG** GG 3 59 6001 80  
CODE DIST CTR

**SECTION B — CONSIGNEE AND NEXT OF KIN**

NAME AND ADDRESS OF CONSIGNEE: HAMM, LUXEMBOURG  
NAME AND ADDRESS OF NEXT OF KIN: 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  
 REMAINS UNKNOWN  
 MARKER 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)  
**SEE ATTACHED WORK SHEET**

REMAINS PREPARED AND PLACED IN CASKET

DATE BY CASKET SEALED BY EMBALMER (Signature)

CASKET BOXED AND MARKED SHIPPING ADDRESS VERIFIED BY  
DATE BY

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

REMARKS AND SPECIAL INSTRUCTIONS  
**MAP FILE RECORDS APPROVED**  
**FILED**  
**NOV 19 1948**  
**BOARD**  
SIGNATURE OF AGRS INSPECTOR

*N.L.N.*

# 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		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	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

## DISINTERMENT DIRECTIVE

1

SECTION A — NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER		DATE	
NAME				SERIAL NUMBER		DATE OF DEATH	
UNKNOWN				X-000435		Q	
CEMETERY				RANK		DISPOSITION OF REMAINS	
LOT				ROW		CODE	
GG				3		DIST PT	
GRAVE				COUNTRY		CAUSE OF DEATH	
59				HAMM LUXEMBOURG			

## SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE		NAME AND ADDRESS OF NEXT OF KIN	

## SECTION C — DISINTERMENT AND IDENTIFICATION

NAME		SERIAL NUMBER		RANK		DATE OF DEATH		DATE DISINTERRED	
UNKNOWN X-000435								6 MAY 1948	
IDENTIFICATION TAG ON		ORGANIZATION			RELIGION		IDENTIFICATION VERIFIED BY		
<input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> EMB							WILLARD B OWEN		
<input checked="" type="checkbox"/> MARKER <input type="checkbox"/> GRS							CAPT, FA NAME AND TITLE		

## SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL		CONDITION OF REMAINS	
MATTRESS COVER		ADVANCED DECOMPOSITION. SKULL AND MANDIBLE MISSING. DISARTICULATED, RIGHT PELVIS MISSING, LEFT PELVIS FRACTURED.	
OTHER MEANS OF IDENTIFICATION			

REPORT OF BURIAL FOR X-435 FOUND WITH REMAINS

## MINOR DISCREPANCIES /

NONE

REMAINS PREPARED AND PLACED IN <del>CASKET</del> <sup>XXXX</sup> TRANSFER BOX		Veschel M. Vibbert	
DATE 11 MAY 1948		BY VESCHEL L. VIBBERT, IDENT TECH	
CASKET SEALED BY		EMBALMER (Signature)	
V.M. Vibbert W/O Disinfectant		Veschel M. Vibbert	
CASKET BOXED AND MARKED		SHIPPING ADDRESS VERIFIED BY	
Everett Stroud Clerk Recorder		All marking tags, plates verified by R.E. Lewis Capt Cav.	
DATE 28 June 48 BY			

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

WILLARD B OWEN  
CAPT INF  
SIGNATURE OF GRS INSPECTOR

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

## 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	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

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMISSION  
EUROPEAN AREA  
APO 58 US ARY

RFE 293

9 March 1949  
(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

The records pertaining to Unknown X- 435, Plot CG,  
Row 3, Grave 59, U.S.C. HAMM, LUXEMBOURG,  
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. 2612, dated 6 January 1948.

Case reviewed by undersigned members of the Board of Review:

*Stanley C. Tyndall*  
-----  
Capt. Jack C. HAYES, O-1577297 OIC Capt. Stanley C. TYNDALL, O-1504296 Inf

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

*Ernest J. Ogleby*  
-----  
1/Lt Ernest J. OGLESBY, O-449004 Civ

Received TR # 3577, 14 March '49  
Not identifiable from information  
available at the present time.  
on Martin  
5-2-49

Incl #8

## IDENTIFICATION CHECK LIST

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

Unknown X X-435  
 Cemetery HALL, Luxemburg  
 Plot CG Row 3 Grave 59

**Date reprocessed:** 22 November 1947

- 1 ~~Actual date of recovery~~ \_\_\_\_\_  
 (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 MOBILE TEAM C.I.P. A.G.R.C. EA  
 (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	NONE (Type)		
Raincoat	NONE		
Overcoat	Remnants of NONE		
Jacket, Field			
Jacket, Combat	NONE NONE		
Mackinaw			
Sweater	NONE		
Jacket, HBT	NONE		
* Shirt, Wool OD		NONE	
Undershirt, Wool		NONE	
Undershirt, Cotton		NONE	
Trousers, HBT		NONE	
* Trousers, Wool OD		NONE	

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?

**GROUND FORCE**

6 Description of Remains: **(RIGHT) TIBIA 34,9 FIBULA 34,7 FEMUR 43,7  
HUMERUS 30,5 ULNA 25,0 RADIUS 23,2**

Age **UTD** Height <sup>Est.</sup> **5'2 1/8"** 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**  
(Targe, 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	<b>UTD</b> (Light, color, extent)		
Eyes	<b>UTD</b> (Color, setting, shape)	Eyebrows	<b>UTD</b> (Color, bushiness, extent across nose)
Nose	<b>UTD</b> (Size, shape, straight)	Ears	<b>UTD</b> (Size, set close to or far from head)
Mouth	<b>UTD</b> (Large, medium, small)	Lips	<b>UTD</b> (Small, large, full)
Teeth	<b>NONE FOUND</b> (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)		
Chin	<b>UTD</b> (Prominent, receding, pointed, dimples, double)		
Jaw	<b>UTD</b> (Large, small, normal)	Circumference of head in inches	<b>MISSING</b> (Hat band)
Neck	<b>UTD</b> (Size, length, short, normal, wrinkled)	Larynx	<b>UTD</b> (Prominent, normal)
Shoulders	<b>UTD</b> (Broad, straight, small, rounded)	Arms	<b>UTD</b> (Length, muscular, color, extent and quantity of hair)
Hands	<b>UTD</b>		
Fingers	<b>UTD</b> (Short, thick, long, slender, size of knuckles, missing fingers or joints)		
	<b>UTD</b> (Unusual characteristics of fingernails)		
Chest	<b>UTD</b> (Size of nipples, color, quantity and extent of hair, large, small, normal)		
Waist	<b>UTD</b> (Size of navel, appendectomy, amount, quantity, and color of hair)		
Back	<b>UTD</b> (Quantity and extent of hair)	Circumcision	<b>UTD</b> (Yes-no)
		Pubic Hair	<b>NONE FOUND</b> (Color)
Hernioplasty	<b>UTD</b> (Yes-no, location)		
Legs	<b>UTD</b> (Musculi, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)		
Feet	<b>UTD</b> (Size, corns, callouses, etc.)	Toes	<b>UTD</b> (Slender, straight, crooked, overlap)
Evidence of healed fractures	<b>NONE</b> (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 **Fingers missing**

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

**None found**

9 Remarks **Remains received in skeletal form. Estimated weight 10 lbs.  
Clothing found in debris. No markings evident.  
Fluoroscopic Examination negative.  
Burial report., no GRS tag, recovered with remains.  
No means of identification found.  
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

*Ralph W. Sleator*  
(Officer's Name)

**RALPH W. SLEATOR**  
Rank **MAJCE** **INF** Service

**CENTRAL IDENTIFICATION POINT**  
(Organization)

X-435

# SKELETAL CHART

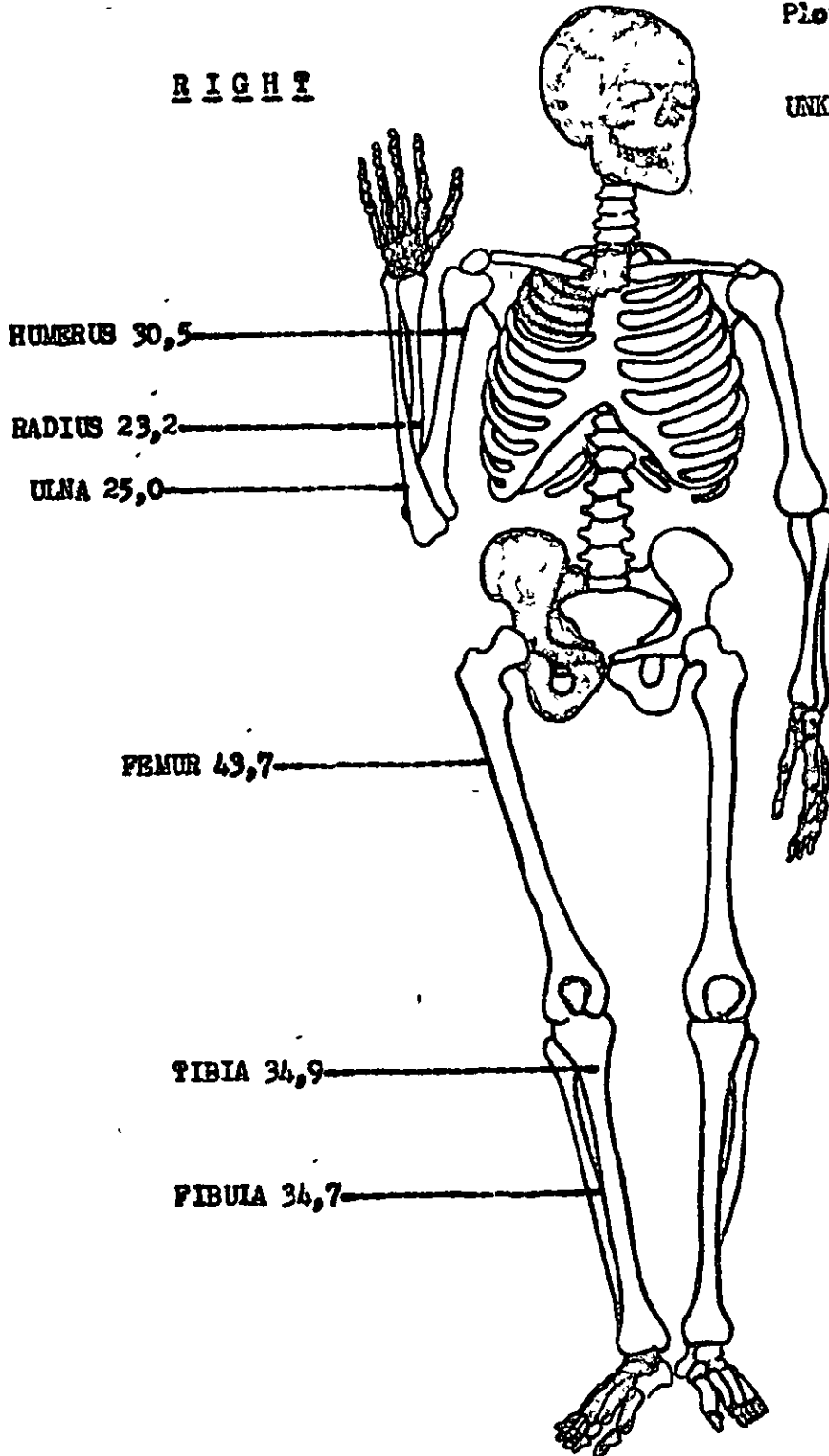
HAMM, Cemetery Luxemburg

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

Plot 00, Row 3, Grave 59

**RIGHT**

UNKNOW X-435



ESTIMATED HEIGHT: 5' 2 1/8"

# REPORT OF INVESTIGATION-AREA SEARCHING

To be completely filled out and attached to each copy of GR Form I,  
„Report of Burial“ when disinterment is accomplished.

- 1 Was investigation preceded by Advance Publicity            yes  
(if Special Investigation, so indicate)
  
- 2 Unidentified X-435 Hamm Cem.      Unk.                      Unk.                      Unk.  
(Full name of deceased)            (Rank)                      (ASN)                      (Organization)
  
- 3 State Means of identification, i e identification, tags attached to marker, inscription on grave marker, cemetery records, townhall records, etc and Source of Information, i e, identification tags, identification cards, identification bracelet, leather name plate on flying jacket, clothing marks etc  
None
  
- 4 Give exact location of isolated grave, furnishing coordinates and letter prefix, map sheet, scale and series used, also name of nearest town      Biesdorf, Germany (V. 97-43) Sheet 6  
1/250000 Namur, Luxembourg GSGS 4346  
  
NOTE ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION IN WITH PERMANENT LANDMARKS.
  
- 5 Full name of cemetery (include plot, row and grave if organized cemetery)  
Isolated Burial in the woods
  
- 6 Approximate or established date of death (state which and give basis for date selected)  
Unknown
  
- 7 Approximate or established date of burial (give basis for date established)  
Unknown
  
- 8 Manner in which grave was marked, show information contained on the marker  
Marked with shovel and helmet liner
  
- 9 List personal effects found in possession of civilian and custodial personnel now retaining, furnishing name and address of individuals concerned.  
None
  
- 10 Furnish information obtained concerning place, and particulars surrounding death and burial, give the names and addresses of all persons furnishing such information (contact local Mayor, priest, police, hospitals, cemetery sextons or caretakers, those responsible for burial and others possessing important information)  
MICHEL KOEHLER -21 Hauptstrasse, Biesdorf Germany (Bürgermeister)  
HERMANN ROBITER -11 Hauptstrasse, Biesdorf Germany (witness)
  
- 11 Give name and address of person who can guide disintering team to burial location  
MICHEL KOEHLER -21, Hauptstrasse, Biesdorf Germany  
Bürgermeister



12 Is this atrocity case  Is there evidence that it may be   
 If answer is yes, hat responsible War Crimes representative been notified

13 Names and addresses of persons committing the atrocity or the military unit of which these persons were members  
 None

14 If unidentified and a crew member of a plane or vehicle, indicate names of any other known crew members and state whether buried at this location or a survivor  
 Does not apply

15 If unidentified, supply any of following information determinable

a Crew position in plane or vehicle

b Plane or vehicle serial number

Unk.

Type

c. Installed weapons

Unk.

Unit.

Serial Number

Calibre & Mfgr

Serial Number

Calibre & Mfgr

Unk.

Unk.

Unk.

Unk.

d Engine serial number

Unk.

Type

Unk.

*Edward C. Dunham*

U. S. ARMY

ENGINEER

Signature of Investigating Officer

Rank . Lt. Inf.

ASN - 1538322

Disinterment approved by, (HQ Authorizing Exhumation)

Disinterment ~~was~~ made by

C. J. 45 G. W. O.

Date of ~~was~~/reburial

28 Feb 46

Pvt

notran

Place of ~~was~~/reburial U. S. Military Cemetery

Plot

GG

Row

3

Grave

ux59bourg

NOTE Additional particulars regarding investigation will be placed on additional sheet

1 Cross out word no applicable

# CHECK LIST FOR UNKNOWNNS

Sgt. Stephen Lorelock  
(name of soldier processing remains)

- 1 Unknown × 435 U S Military Cemetry No ~~dam~~, Luxembourg
- 2 If remains were disinterred, attach Check List for Disinterments
- 3 Arrived at cemetery (hour) (date) From 3046 QM.GR.CO. Boehren, Germany (L 30-40)  
(collecting point)
- 4 Place of death Biesdorf, Germany (V 97-43)  
(name) (coordinates and landmarks)
- 5
- 6 Remains recovered by vt Dnistran 3046 QM.GR.CO.  
(name and organization)
- 7 Evacuated to cemetery by 3046 QM.GR.CO.  
(name and organization)
- 8 Is load list attached yes  
(yes-no)
- 9 Are names of deceased found in same area as this Unknown starred yes  
(yes-no)
- 10 Are circumstances described which may indicate organization of the deceased no  
(yes no)
- 11 If only part of body was received, was a careful search made for other parts of Unknown yes  
(yes-no)
- 12 If remains come from vehicle, plane, etc Isolated Burial in woods  
(type of vehicle or plane, nick name, serial number, organization or symbols)
- 13
- 14 Crew list Does not apply  
(names of other deceased and positions in which found)
- 15
- 16
- 17 If a tank, which hatches were free and available for escape use  
Does not apply
- 18 If organization to which vehicle or plane was assigned or if names of all other deceased are not known, give  
detailed information concerning vehicle or plane Does not apply  
(parts of markings or symbols) (burned) (pierced by shell fire - where)
- 19
- 20 (found in town field by road etc.) (damaged by mine explosion)
- 21 (names of men who escaped) (description of other vehicles or plants in same area)
- 22 Detailed description of personal effects  
(Indicate exact pocket or part of body where found)
- 23 none
- 24
- 25
- 26

Description of clothing and equipment : (If clothes do not fit, obtain sizes from body measurements)

Item	Clothing Markings	Sizes	Color	Indicate unusual markings, wear, tear, repairs etc.
27 * Headgear (type)	none			
28 Raincoat	none			
29 Overcoat	none			
30 Jacket, Field	none			
31 Jacket, Combat	none			
32 Mackinaw	none			
33. Sweater	none		od	
34 Jacket, HBT	none			
35 * Shirt, Wool OD	none			
36 Undershirt, Wool	none		with	
37 Undershirt, Cotton	none			
38. Trousers, HBT	none			
39 * Trousers, Wool OD	none			
40 Belt, Web 1	none		od	
41 Drawers, Wool	none			
42 Drawers, Cotton	none			
43 Leggings	none			(Note unusual lacing)
44 Socks Wool Cotton 1	none		green	
45 * Shoes (type)	none			
46 Overshoes	none			
47. Web Equipment (type)	none			
48 (other item)	none			
49 (other item)	none			

\* If body is nude, sizes these items should be computed by measuring the remains

50 Chevrons or none  
 (type and location shirt jacket coat helmet) Shoulder Patch none  
 Insignia none

51 Description of Remains

52 Age unk. (years) Height 3' (ft-in) Weight 50 (lbs) Description of wounds F. Decomposed

54 Bandages or dressings none Scars F. Decomposed  
(length, width, location)

55

56 Tattoos F. Decomposed  
(number, location - illustrate on sep page)

57 Outstanding moles, warts or birthmarks F. Decomposed  
(yes-no) (description location)

58

59 Sunburn or tan, other than hands and face F. Decomposed

60 Tobacco stain on fingers or teeth Fingers and head missing  
(designate where extent)

61 Complexion F. Decomposed Build F. Decomposed  
(light mid dark, clear pimples, pock, freckles) (large fat thin, muscular)

62

63 Hair head missing  
(color length, quantity curly, wavy straight, whorls or definite parting, baldness, widows peak)

64 (distinctive cutting or other characteristics)

65 Sideburns missing Mustache missing Beard or goatee missing  
(color setting shape) (color size shape) (length)

66 (heavy, light color extent)

67 Eyes Decomposed Eyebrows missing  
(color setting, shape) (color, bushiness extent across nose)

68 Nose Decomposed Ears missing  
(size shape straight) (size set, close to or far from head)

69 Forehead Decomposed Mouth missing Lips Decomposed  
(high, wide wrinkled) (large, medium small) (small large, full)

70 Teeth none found  
(white size unevenness, spacing, noticeable crowns, fillings extractions)

71 Chin missing Cheekbones missing  
(prominent receding, pointed dimple, double) (high normal)

72 Jaw missing Circumference of head in inches missing  
(large, small normal) (hat band)

73 Neck F. Decomposed Larynx Decomposed Shoulders  
(size, long short, normal, wrinkled) (prominent, normal) (broad)

74 Decomposed Arms disjointed  
(straight, small rounded) (length) (muscular color, extent and quantity of hair)

75 Hands missing  
(vaccination scar, size of wrists) (large, small, normal calloused noticeably)

76

76 (marks on fingers indicating that rings were worn)

77

78 Fingers **missing**  
(short, thick, long, slender, size of knuckles) (missing fingers or joints)

79 **missing**  
(Unusual characteristics of fingernails)

80 Chest **F.Decomposed**  
(size at nipples color, quantity and extent of hair, large, small normal)

81 Back **none** Waist **F.Decomposed**  
(quantity and extent of hair) (size at naval, appendectomy amount, and color of hair)

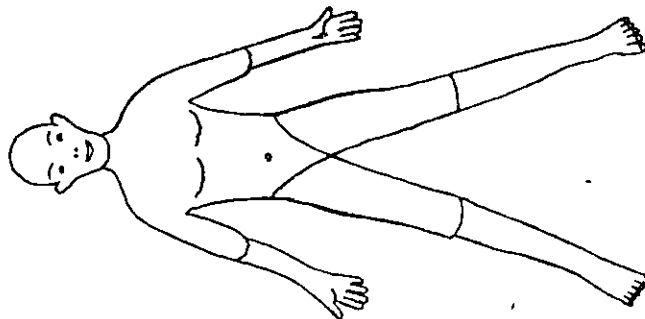
82 **Circumcized F.Decomposed** **Public hair none** **Hernioplasty F.Decomposed**  
(yes-no) (color) (yes no) (location)

83 Legs **Disjointed**  
(Inseam) (muscular knock kneed bowed, normal) (quantity, color and extent of hair)

84 Feet **Disjointed** Toes **Disjointed**  
(size, corns callouses flat) (slender straight, crooked, overlap)

85 Evidence of healed fractures **F.Decomposed**  
(nose, arms, legs, etc.)

86 Block out parts of body not received at cemetery



87 Have photographs been made and attached **no** If not, explain **no equipment**  
(yes no)

88 Have fingerprints been placed on GRS No 1 **no** If not, explain **no fingers**  
(yes no)

89 Has tooth, chart been prepared? **no** If not, explain **head missing**  
(yes no)

90 Remarks **body disjointed**

91

92

93

94

95

96

*Edward C. Dunham*  
 Signature of GRO and Organization

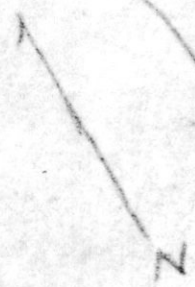
Niedersgeigen

NOT TO SCALE

AM GRAVE  
⊗ 1.

GRID COOR.  
V.P. 97-43

BIESDORF



□ PILLBOX

AM GRAVE  
⊗ 2.

WALLEN DORF

1. EDWARD R. FULTON 31455778  
2. X-435

SHEET T1  
TRIER SHEET  
SCALE: 1:100,000  
G.S.G.S. 4416  
NORD DE GUERRE  
GRID

RESTRICTED REBURIAL  
**REPORT OF BURIAL**

TM 10-630 AND AR 30-1315

Tr Letter 1845

27 Feb. 1946

Date

Unidentified X-436 Unk. Unk.

Last Name Unk. First Unk. Initial Unk. Rank Unk. Serial No. Unk.

Unit Unk. Organization Unk.

Biesdorf, Germany (VF 97-43) Unk. Unk.

Place of Death Unk. Date of Death Unk. Cause of Death Unk.

1400 28 Feb 46 U.S. MIL. Hamm, Luxembourg VF 8713

Time and Date of Burial 59 3 GG GG

Grave Number 59 Row Number 3 Plot Number GG Type of Marker Cross

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

If No Identification Tags  
How were remains identified?

See Reverse

**REBURIAL**

What means of identification were buried with the body?

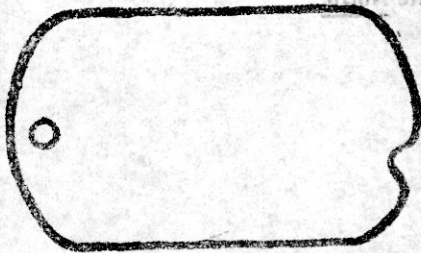
G.R.S. No. 1 in bottle

located at Biesdorf, Germany (VF 97-43)

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

Who is buried on:	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Right:	X434	unk	unk	unk	58
Deceased's Left:	Bemis	unk	T/5	unk	60

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 Unk. Name Unk.

Unk. Address Unk.

Religion Unk.

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

NO Personal Effects

EDWARD C. DUNHAM  
2nd. Lt. Inf. G-1338322  
3046 QM. GR. C.

Disinterring Officer

*Edward C. Dunham*

Signature of Officer or other person reporting burial

Reinterring Officer

*[Signature]*

Verified by G.R.S. 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: 3' Laundry Marks: - None  
 Weight: 130 lbs. Number of Rifle: - None  
 Color of Eyes: Brown Wear Glasses? - None  
 Color of Hair: Missing Is Tooth Chart Attached? - None  
 Race: White

(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.

None

Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc.

None

Left Hand	4	
	3	
	2	
	1	index missing
Right Hand	4	
	3	
	2	
	1	index missing
Thumb		

Left Hand	4	
	3	
	2	
	1	index missing
Right Hand	4	
	3	
	2	
	1	index missing
Thumb		

#### TOOTH CHART

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

Indicate: missing natural teeth by X, crowns by O, fillings by □, Bridges by C linking anchor teeth, replacements by artificial teeth by A

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.

See Attached sketch