

M.K.

17-34 A

1

I certify that the remains of Unknown X-562 were interred permanently under direct supervision of the undersigned on 16 March 50 in Plot B, Row 1, Grave 2.

SECTION A - NAME AND BURIAL LOCATION OF DECEASED <i>R. WARREN DAVIS, Supt HAMM</i>	DIRECTIVE NUMBER 6020 00005	DATE 15 07 48 DAY MONTH YEAR
---	--------------------------------	------------------------------------

NAME <i>Indo</i>	SERIAL NUMBER UNKNOWNX-000562	RANK	ARM 0	DATE OF DEATH DAY MONTH YEAR
CEMETERY HAMM - LUXEMBOURG				DISPOSITION OF REMAINS 6001 80 CODE DIST PT
PLOT 0	ROW 9	GRAVE 214	COUNTRY LUXEMBOURG	CAUSE OF DEATH 6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE HAMM, LUXEMBOURG	NAME AND ADDRESS OF NEXT OF KIN <del>(SECTION B IS STRAIGHT THROUGH)</del> These remains are unidentifiable and are to be permanently interred. (Hq. AGRC-19 Jan 50)
---	--

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISTINTERRED
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	ORGANIZATION UNKNOWN	RELIGION	IDENTIFICATION VERIFIED BY NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
OTHER MEANS OF IDENTIFICATION	
MINOR DISCREPANCIES 1	

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	NAT

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

FILE  
RECORDS ANNOTATED  
DATE *5/26/50*  
NAME *[Signature]*  
RR. MEM. DIV.

SIGNATURE OF GRS INSPECTOR

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

*incl 2*

*(1 of 2)*

# RECORD OF CUSTODIAL TRANSFER

## 1 SHIPPED

FROM <b>LIDO REMAINS STORAGE AREA, LIDO, BRISTOL</b>		TO <b>US 111 Cem HAM/Luxembourg</b>	
KIND OF CONVEYANCE <b>TRUCK</b>		NAME OF CONVOYER <b>Donald J. Wiles</b>	
SIGNATURE OF SHIPPER <b>E.N. HEISEY</b> <b>1st Lt CIC</b>	DATE <b>16/3/50</b>	SIGNATURE OF RECEIVER <b>R. WARREN DAVIS, Superintendent.</b>	DATE <b>15</b> <b>50</b>

## 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

1

DISINTERMENT DIRECTIVE

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

DAY MONTH YEAR

NAME UNKNOWN

SERIAL NUMBER X-000562

RANK

ARM 0

DATE OF DEATH

DAY MONTH YEAR

CEMETERY

DISPOSITION OF REMAINS

CODE DIST PT

CAUSE OF DEATH

LOT ROW GRAVE COUNTRY

0 9 214 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 UNKNOWN SERIAL NUMBER X-000562 RANK DATE OF DEATH DATE DISTINTERRED 26 MAY 1948

IDENTIFICATION TAG ON REMAINS ORGANIZATION RELIGION UNK. IDENTIFICATION VERIFIED BY DON O. TOHILL, 1/LT, FA. NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL MATTRESS COVER, & UNIFORM. CONDITION OF REMAINS PROXIMAL 1/3 L ULNA & RADIUS MISSING. ADVANCE DECOMPOSITION.

OTHER MEANS OF IDENTIFICATION NONE.

MINOR DISCREPANCIES NONE.

REMAINS PREPARED AND PLACED IN CASKET BY ROY T. PATTERSON EMBALMER. DATE 1 JUNE 1948

CASKET SEALED BY ELAM E POORBAUGH no work sheet without disinfectant EMBALMER (Signature) ELAM E POORBAUGH

CASKET BOXED AND MARKED 8 JULY 48 JAMES L DMM CLERK SHIPPING ADDRESS VERIFIED BY ALL MARKINGS TAGS & PLATES VERIFIED BY R E LEWIS CAPT CAV

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

DON O. TOHILL, 1/LT, FA.

SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

Handwritten notes and signatures at the bottom of the page.

## 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

# AIRMAIL

SECRET 293

1st Ind

GFS European

SUBJECT: Certificates of Unidentifiability of Remains  
Transmittal Letter #4712

Dept. of the Army, USMC, Washington 25, D. C., 31 January 1950

TO: Chief, Registration Division, 7887 Graves Registration  
Detachment, APO 58, c/o Postmaster, New York, New York

1. This Office approves the classification of Unknown X-562, USMC Name, Luxembourg, listed on basic communication as Unidentifiable.

2. The two other Unknowns listed are under investigation and will be the subject of a later communication.

FOR THE QUARTERMASTER GENERAL:

Incls w/d

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

Martin/id

Foy  
REB

Cy furnished: Adm Sect

REB

TEC

314.6 MRS Curry  
T/L 4712

# AIRMAIL

*Handwritten notes on right margin:*  
X 93  
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1  
1  
3  
3

A I R M A I L

293 Unit Luxembourg X-562

Att 4 gr. lts.  
12/22/49  
(Hamm)

QMGM 293, 22 Dec 49

Subject: Identification of World War II Deceased

RRE 314.6

1st Ind

Hq, AGRC - EA, APO 58, US Army, 30 Dec 49

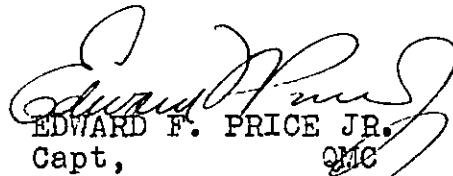
TO: The Quartermaster General, Washington 25, D C  
ATTENTION: Memorial Division

293

1. In compliance with basic communication and in the absence of any further evidence, the remains of Pvt John P. COOPER, 39581362, previously interred in Plot Q, Row 9, Grave 214, U.S. Military Cemetery, Hamm, have been redesignated Unknown X-562. Forwarded herewith is corrected Report of Burial reflecting this redesignation.

2. Action has been initiated this day to have the remains involved declared unidentifiable. Relevant Certificate of Unidentifiability will be furnished your office under separate cover.

FOR THE COMMANDING GENERAL:

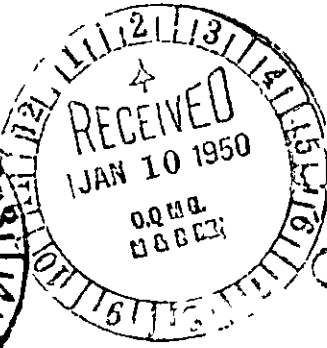
  
EDWARD F. PRICE JR.  
Capt, <sup>QMC</sup>  
Actg Asst Adj Gen

1 Incl  
w/d  
1 Incl added  
R/B for X-562

2.

File - General  
11 Jan. 50  
m Martin  
dd. dec  
NAT

A I R M A I L



JAN 3 50



OUT

**AIRMAIL**

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

IN REPLY REFER TO QMGMT 293  
GRS European

22 December 1949

SUBJECT: Identification of World War II Deceased

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

1. Returned herewith is corrected Report of Burial for Unknown X-562, USMC Hamm, Luxembourg, identified by your Headquarters as Private John P. Cooper, 39581362.

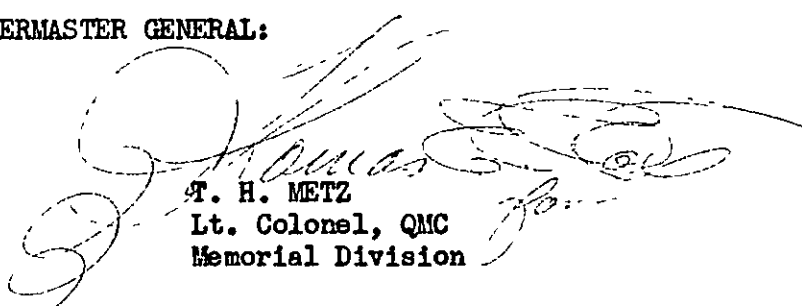
2. It is the opinion of this Office that the identifying data presented with the case is insufficient to conclusively establish the identification of subject remains as Private Cooper.

3. Tooth chart submitted with the Report of Burial shows gold fillings in R-14 and L-14, and amalgam in L-6, whereas available Army dental information for Private Cooper does not indicate any fillings, and the next of kin cannot furnish information relative dental work having been performed.

4. In the event that further evidence is unavailable, it is recommended that the remains be redesignated as an Unknown and Certificate of Unidentifiability forwarded this Office as soon as practicable.

FOR THE QUARTERMASTER GENERAL:

1 Incl  
Cor B/R for  
Cooper, John P.  
Pvt. 39581362

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

DET ST  
S 57 64 413

**AIRMAIL**



**AIRMAIL**

293 Unk - Luxembourg X-562 (Hamm)

UNIT 293  
GRS European

22 December 1949

**SUBJECT: Identification of World War II Deceased**

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

1. Returned herewith is corrected Report of Burial for Unknown X-562, USMC Hamm, Luxembourg, identified by your Headquarters as Private John P. Cooper, 39581362.

2. It is the opinion of this Office that the identifying data presented with the case is insufficient to conclusively establish the identification of subject remains as Private Cooper.

3. Tooth chart submitted with the Report of Burial shows gold fillings in E-14 and L-14, and amalgam in L-6, whereas available Army dental information for Private Cooper does not indicate any fillings, and the next of kin cannot furnish information relative dental work having been performed.

4. In the event that further evidence is unavailable, it is recommended that the remains be redesignated as an Unknown and Certificate of Unidentifiability forwarded this Office as soon as practicable.

FOR THE QUARTERMASTER GENERAL:

1 Incl  
Cor B/E for  
Cooper, John P.  
Pvt. 39581362

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

REB  
TEC

Martin/id mm  
Foy *app*  
REB

Cy furnished: Adm Sect

**AIRMAIL**

X293 Cooper, John P. (39-581-362)

A I R M A I L

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 U S ARMY

*act*  
*WCL 40458*

RRE 314.6

16 September 1949

SUBJECT: Burial Information

*293 unk Luxembourg X-562*

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

*(Hamm)*

1. Reference is made to cable from your office WCL 40458, requesting present disposition of ID tags found on remains of Unknown X-562, U. S. Military Cemetery, Hamm.

2. Whereas records this headquarters do not indicate present disposition of the ID tags concerned, the attached photostatic copy of letter dated 15 March 1945 from the GR Officer of the 94th Infantry Division confirms the fact that at the time of original burial, ID tags for Pvt John P. COOPER, 39581362, were found with the remains that were subsequently designated Unknown X-562 (Hamm) and now identified as Pvt COOPER.

FOR THE COMMANDING GENERAL:

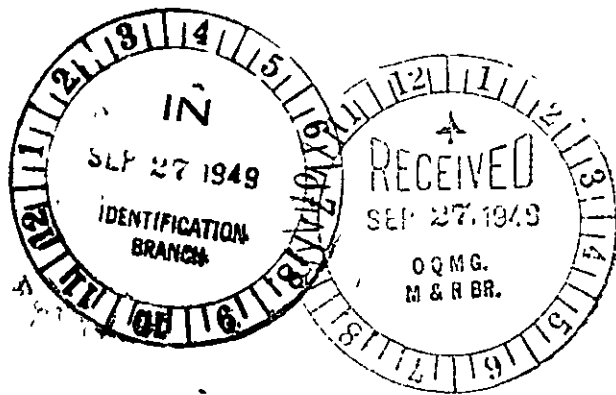
EDWARD F. PRICE JR.  
Capt, QMC  
Actg Asst Adj Gen

1 Incl  
Ltr dtd 15 Mar 45

*293 Unknown 562 Luxembourg Hamm*

*7-12-49*  
*39581362*  
*31 Jan 50*  
*m. mortu*  
*ad. sec*

A I R M A I L



HO - A.G.R.C. SEP 19 49  
FNO

27 1949

Received From	Dated	Date Received	Date Due	Case number
AGRC Paris	19 Sept 49	27 Sep 49	27 Sep 49	9994

TYPE OF CORRESPONDENCE      Telegram  
REQUISITION NO.              AGRC 6089  
FILE NO.                      Mc In No. 56423

SUBJECT: WCL 40458 No record this headquarters of present disposition of identification tags found of remains of Unk X-562 Hamm. Copy of relevant document substantiating item one on corrected report of burial dtd 13 Apr for John P Cooper being airmailed

CGHQ DEPT OF ARMY WASH DC  
CG AGHC PARIS FRANCE

UNCLASSIFIED

PRIORITY

X

FROM HQHQ

REQUEST PRESENT DISPOSITION OF IDENTIFICATION TAGS FOUND ON REMAINS  
OF X-562 NAME

M. Martin/ejh  
Foy  
REB

UNCLASSIFIED

GRAVES

HQHQ CAPT BERRY HSI 73650

7 SEPT 49

M R HOSNER  
1ST LT CAC WIK DIV

293 - X-562 (Hamm)

CAC 103

SEPT 19 11 12  
GREENWICH CT. 06602

0594

1949 SEP 19 13 11

131

FUB 40  
SPA 029  
RR UEPC  
100 SEP 19 13 11  
100 SEP 19 13 11

HQ AGRC PARIS  
AGRC 6089  
190947Z  
QMC  
56423

9994

DE UFPOC 05

R 190947Z

FM HW AGRC PARIS FRANCE

TO OQMG WASHDC  
GRAVES GRNC

REF AGRC SIX ZERO EIGHT NINE

PASS TO MEMORIAL DIVISION

URMSG WCL FOUR ZERO FOUR FIVE EIGHT NO RECORD THIS HEADQUARTERS OF  
PRESENT DISPOSITION OF IDENTIFICATION TAGS FOUND ON REMAINS OF  
UNKNOWN XRAY FIVE SIX TWO HAMM PD COPY OF RELEVANT DOCUMENT  
SUBSTANTIATING ITEM ONE ON CORRECTED REPORT OF BURIAL DATED ONE

56423

1949 SEP 19 14 01

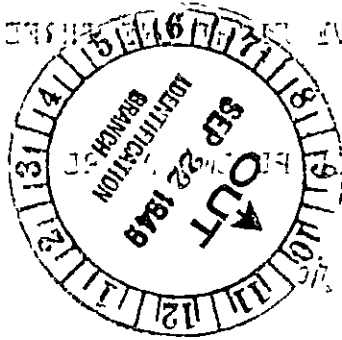
DEPARTMENT OF THE ARMY  
STAFF OFFICE  
OFFICE

SEP 19 2 27 PM '49  
O.D.M.S.  
TEL & CAB SECTION 4

293 Wade  
L. J. Anderson



THREE AM FOR FBI LOUISIANA COOPER THREE NINE FIVE



SIX TWO BEING AIR FIELD MOBILE OFFICE ONE SIX  
MEMORIAL DIVISION



FECKM

COOPER  
SEP 22 1948

RECORDED



A I R M A I L

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 U S ARMY

RRE 314.6

16 September 1949

SUBJECT: Burial Information

*293 - Unk - Luxembourg X-562 (Hamm)*

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

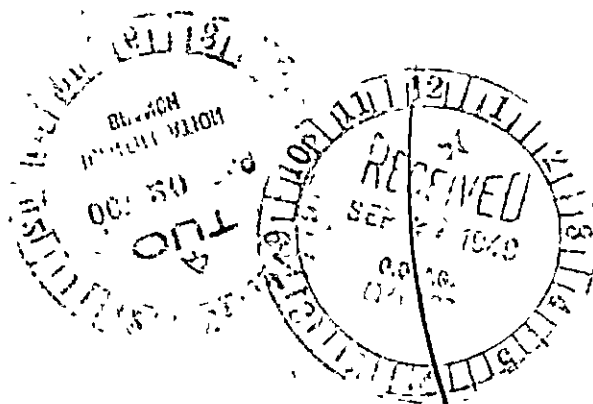
1. Reference is made to cable from your office WCL 40458, requesting present disposition of ID tags found on remains of Unknown X-562, U. S. Military Cemetery, Hamm.

2. Whereas records this headquarters do not indicate present disposition of the ID tags concerned, the attached photostatic copy of letter dated 15 March 1945 from the GR Officer of the 94th Infantry Division confirms the fact that at the time of original burial, ID tags for Pvt John P. COOPER, 39581362, were found with the remains that were subsequently designated Unknown X-562 (Hamm) and now identified as Pvt COOPER.

FOR THE COMMANDING GENERAL:

1 Incl  
Ltr dtd 15 Mar 45

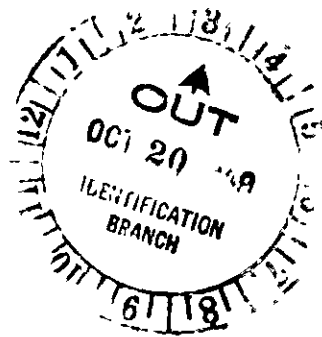
EDWARD F. PRICE JR.  
Capt, QMC  
Actg Asst Adj Gen



*File  
20 Oct 49  
M. Martin  
Adj Gen*

*293 Unk X-562 Luxembourg Hamm*

A I R M A I L



C O P Y

A I R M A I L

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 U S ARMY

RRE 314.6

16 September 1949

SUBJECT: Burial Information

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

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2. Whereas records this headquarters do not indicate present disposition of the ID tags concerned, the attached photostatic copy of letter dated 15 March 1945 from the GR Officer of the 94th Infantry Division confirms the fact that at the time of original burial, ID tags for Pvt John P. COOPER, 39581362, were found with the remains that were subsequently designated Unknown X-562 (Hamm) and now identified as Pvt COOPER.

FOR THE COMMANDING GENERAL:

1 Incl  
Ltr dtd 15 Mar 45

/s/ Edward F. Price Jr.  
EDWARD F. PRICE JR  
Capt, QMC  
Actg Asst Adj Gen

C  
O  
P  
Y

AIR MAIL

C O P Y O F P H O T O S T A T

HEADQUARTERS, 94th INFANTRY DIVISION  
Office of the Division Quartermaster  
Graves Registration Section  
APO 94 US Army

15 March, 1945

Subject: Sgt Bobby E. Fulk, #37237644 - Hq Co, 778 Tank Bn. KIA - 10 Mar 45.  
John P. Cooper, #39581362

TO : A C of S, G-1, AG, Army QM, Corps QM.

Report of correction in the identification of one (1) enlisted man,  
Sgt Bobby E. Fulk, report of 14 March 45.

Originally we identified Sgt Fulk as Cooper on account of Cooper's  
Dog Tags being in Fulks possession; however Sgt Fulks, CO, possitively  
identified Cooper as Fulk and signed a Sworn statement.

EDWIN B ROSENZWEIG  
1st Lt QMX  
94th Inf Div GRO

Distr:

1 - G-1  
1 - AG  
1 - File

1 - Army QM  
1 - Corps QM

C  
O  
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Y

243 unk Luxembourg X-562 Hamm  
M13

Q223 DEPT OF ARMY WASH DC  
CO AGRG PARIS FRANCE

UNCLASSIFIED  
SEP 8 3 53 PM '49  
O.D.M.S.  
TEL & CAB SECTION

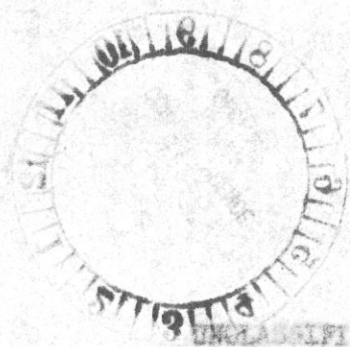
FROM UNIT

WEL 40458

REQUEST PRESENT DISPOSITION OF IDENTIFICATION TAGS FOUND ON REMAINS  
OF X-562 HAMM

M.Martin/ejh mmm  
Foy OR  
REB  
A

3  
REB  
THM



UNCLASSIFIED

081600Z

SEPT 49

1st Lt R. R. Hordman  
1st Lt QMG  
1st Lt QMG  
1st Lt QMG

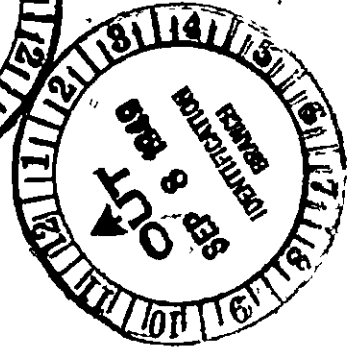
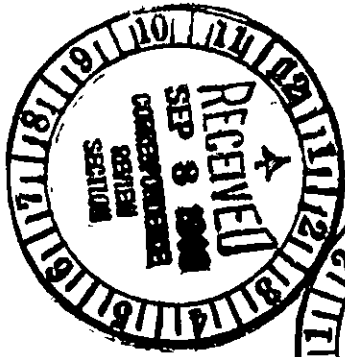
GRAVIS

QUART CAPT BERRY EXT 73650

293 - X-562 (Hamm)

037E003

*[Handwritten signature]*



144-101-10000  
702  
R. M.

*day*

TELETYPE SECTION  
O.D.M.  
171

SEP 8 3 23 PM '89

M.K.

6

DISINTERMENT DIRECTIVE

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER 6020 00005

DATE 15 07 48 DAY MONTH YEAR

NAME UNKNOWN NX-000562 SERIAL NUMBER RANK ARM DATE OF DEATH DAY MONTH YEAR

CEMETERY HAMM - LUXEMBOURG DISPOSITION OF REMAINS 5001 80 CODE DIST. PT.

PLOT ROW GRAVE COUNTRY CAUSE OF DEATH 214 LUXEMBOURG 6

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 RANK DATE OF DEATH DATE DISTINTERRED

IDENTIFICATION TAG ON ORGANIZATION RELIGION IDENTIFICATION VERIFIED BY UNKNOWN NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES 1

REMAINS PREPARED AND PLACED IN CASKET DATE BY

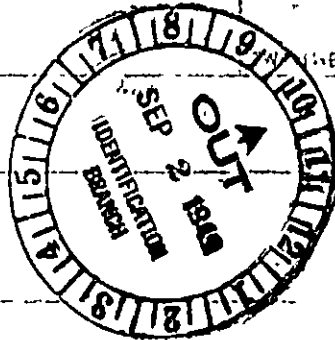
CASKET SEALED BY EMBALMER (Signature)

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.

SIGNATURE OF GRS INSPECTOR

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



Form with multiple sections and fields, including a table with columns for 'NAME', 'ADDRESS', and 'PHONE'. The text is mostly illegible due to the quality of the scan.



names:

1 GG - 2 - 41

2 Q - 9 - 214

3 E - 3 - 63

---

1 B, E. Fulk 37237644

2 X-562

3. Boyer, E.S. 33622214

Investigator: E. L. Gilmore  
Date: 26 May 1949  
Section: EA #2

Request Civilian Dental Info. for:

Cooper, John P. 39581362

NOK: Mr. Marvin C. Cooper (brother)  
1024 Norumbega Drive  
Monrovia, California

1. FILE UNDER NO. 293 - Unk Luxembourg X-562 (Hamm)

### SYNOPSIS

2. TYPE OF DOCUMENT: Letter 3. DATE: 15 Mar 1945

4. FROM: Hdqs 94th Infantry Div. Office of the Division QM Graves Reg-  
istration Section APO 94 US Army.

5. TO: A C of S, G-1 AG, Army QM, Corps QM.

6. SUBJECT: Sgt Bobby E. Fulk, # 37237644 - Hq Co, 778 Tank Bn, KIA -10 Mar  
45 John P. Cooper, # 39581362

7. DOCUMENT FILED  
UNDER NO. 293 - Fulk, Bobby E. 37237644

eb

**INSTRUCTIONS.—**Enter after the above headings information as follows:

1. File classification under which this cross-index sheet is to be filed.
2. Appropriate term, such as: "ltr," "memo," "1st ind," etc.
3. Date of Document.
- 4 and 5. Enter either or both, as applicable.
6. Brief and comprehensive synopsis of the content or subject matter.
7. File classification under which the document is filed.

HEADQUARTERS  
AMERICAN Graves REGISTRATION COMMAND  
EUROPEAN AREA  
APO 757 US ARMY

RFE 293

16 January 1950  
(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X - 562, Plot Q, Row 9, Grave 214, USMC HAMM, Luxembourg, have been reviewed and it is the opinion of the Board of Review, this headquarters, that sufficient evidence is not available to establish the identity of the deceased concerned, therefore, these remains should be classified as unidentifiable.

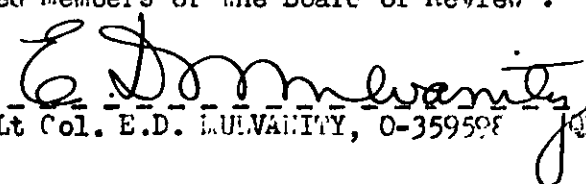
2. Report of Reprocessing of remains was forwarded to the Office of the Quartermaster General by Transmittal Letter No 2715, dated 25-3-48.

3. Remarks :

See Case History attached.

Case reviewed by undersigned members of the Board of Review :

  
Col. H. P. HENRY, O-12589 QMC

  
Lt Col. E. D. MULVANY, O-359598 QMC

  
Capt. Edward F. PRICE, Jr., O-1588236 QMC

1st Lt. Gaylord E. LUTZ, O-1595665 QMC

CWO Leodore GOULBEAU, W-2113434 USA

Transmittal Letter #4712 dated  
18 Jan. 1950.

M. Martin  
30 Jan 50

Incl #2

UNKNOWN NO. X-562

U.S. MILITARY CEMETERY Hamm, Luxembourg  
(Location)

U N I D E N T I F I A B L E

Unknown X-562 was recovered from the area of Steinbach, Germany. Date of death is given as 7 March, 1945. Unknown X-562 has been previously identified as Pvt. John P. Cooper 39581362, but is now being declared Unidentifiable by authority of OCMG.

Tooth Chart of Unknown X-562 represent L-14 and R-14 as having gold fillings, whereas next-of-kin can give no information as to these two teeth being filled in civilian life, and it is unlikely that the Army would have made gold fillings, thus to lack of conclusive identifying factors, this case is being declared Unidentifiable.

Thomas C. Allfield

gpe

## IDENTIFICATION CHECK LIST

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

**E.O. # 641, dated 5 Dec 47**

Unknown X ~~562~~ \_\_\_\_\_  
 Cemetery Hamm, Luxembourg. \_\_\_\_\_  
 Plot 9 Row 9 Grave 214 \_\_\_\_\_

**Date reprocessed:**

1 ~~\_\_\_\_\_~~ **17 Feb 48**  
 (Hour) (Date)

2 Place of death \_\_\_\_\_  
 (Name of closest town) (Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3 Remains ~~\_\_\_\_\_~~ disinterred ~~\_\_\_\_\_~~ and reprocessed by **I.S. 1st Zone.**  
 (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	<b>None</b> (Type)		
Raincoat	<b>None</b>		
Overcoat	<b>None</b>		
Jacket Field	<b>Remnants of</b>		
Jacket, Combat	<b>None</b>		
Mackinaw	<b>None</b>		
Sweater	<b>Remnants of: wool O.D.</b>		
Jacket, HBT	<b>None</b>		
* Shirt, Wool OD	<b>Remnants of.</b>		
Undershirt, Wool	<b>None</b>		
Undershirt Cotton	<b>None</b>		
Trousers, HBT	<b>None</b>		
* Trousers, Wool OD	<b>Remnants of.</b>		

APR 2 - 1948

Belt, web. **Remnants of.**

Drawers, wool. **Remnants of.**

Drawers, cotton. **None**

Leggings, wool. **None**

Socks, cotton. **None**

\* Shoes. **None** (type)

Overshoes. **None**

Web Equipment. **None** (type)

(Other item) **Remnants of tanker's type jacket**

(Other item)

\* 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? **AOF**

**R. HUMERUS - 33.0 R. FIBIA - 37.0**  
**R. ULNA - 26.5 R. FIBULA - 37.0**  
**R. RADIUS - 25.0**

6 Description of Remains.

Age **UFD** Est. Height **5'7 1/2"** Weight **UFD** Description of wounds **UFD**

Bandages or dressings **None found** Scars **UFD**  
(Length, width, location)

**UFD** Tattoos  
(Number, location - illustrate on separate page)

Outstanding moles, warts or birthmarks **UFD**  
(Yes-no, description, location)

Sunburn or tan, other than hand and face **UFD**

Complexion **UFD**  
(Light, medium, dark, clear, pimples, pocks, freckles)

Build **UFD**  
(Large, fat, thin, muscular)

Hair **Black 3/4 long, slightly wavy**  
(Color, length, quantity, curly, wavy, straight, whorls, or definite parting)

Hair **UFD**  
(Baldness, widows peak, distinctive cutting or other characteristics)

Sideburns **UFD** Mustache **UFD** Beard or **UFD**  
(Color, setting, shape) (Color, size, shape) (Length, heavy)

Goatee ---- **UPD**  
 (Light, color, extent)

Eyes -- **UPD** ----- Eyebrows **UPD**  
 (Color, setting, shape) (Color, bushiness, extent across nose)

Nose ---- **UPD** ----- Ears **UPD**  
 (Size, shape, straight) (Size, set close to or 1 in from head)

Mouth... **UPD** ----- Lips **UPD**  
 (Large, medium, small) (Small, large, full)

Teeth ----- **See tooth chart**  
 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin ----- **UPD**  
 (Prominent, receding, pointed, dimples, double)

Jaw ---- **UPD** ----- Circumference of head in inches **51.0 cm**  
 (Large, small, normal) (Hat band)

Neck ----- **UPD** ----- Larynx **UPD**  
 (Size, length, short, normal, wrinkled) (Prominent, normal)

Shoulders **UPD** ----- Arms **UPD**  
 (Broad, straight, small, rounded) (Length, muscular, color, extent and quantity of hair)

-----

Hands ----- **Missing and/or too decomposed**

Fingers ----- **Missing and/or too decomposed**  
 (Short, thick, long, slender, size of knuckles, missing fingers or joints)

-----  
 (Unusual characteristics of fingernails)

Chest ----- **UPD**  
 (Size of nipples, color, quantity and extent of hair, large, small, normal)

Waist -- **UPD**  
 (Size of navel, appendectomy, amount, quantity, and color of hair)

Back -- **UPD** ----- Circumcision **UPD** ----- Pubic Hair **BROWN**  
 (Quantity and extent of hair) (Yes-no) (Color)

Hernioplasty -- **UPD** -----  
 (Yes-no, location)

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

Feet ----- **UPD** ----- Toes **UPD**  
 (Size, corns, callouses, fit) (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 **Missing and/or too decomposed**

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

9 Remarks **Estimated weight of reprocessed remains: 18 pounds. Clothing, found in debris, bore no markings. No Burial Report or GRS tag recovered. Remains fairly articulated with a considerable amount of decomposed flesh.**

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

*Woodrow W. Wolf*  
**WOODROW W. WOLF**  
(Officer's Name)

**CAPT**

Rank

**QMS**

Service

**OPERATIONS OFFICER, IS FIRST ZONE**

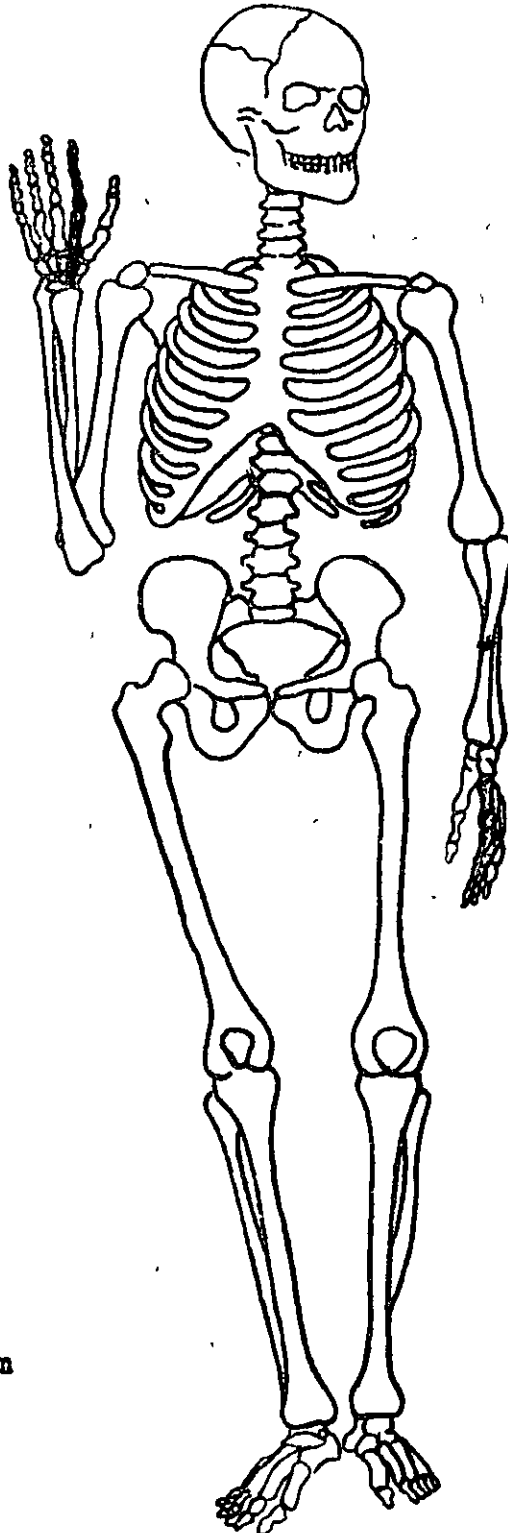
(Organization)

# SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

**RIGHT**

**LEFT**



HUMERUS.....33.0.....cm

RADIUS.....25.0.....cm

ULNA.....26.5.....cm

TIBIA.....37.0.....cm

FIBULA.....37.0.....cm

Est. HEIGHT...5'7 1/2"....

# TOOTH CHART

X-562

17 Feb 48

Date

Unk X-562

Unk

Unk

Last Name

First

Initial

Grade

Serial No

Unk

AOF

Unit

Organisation

Place of Death

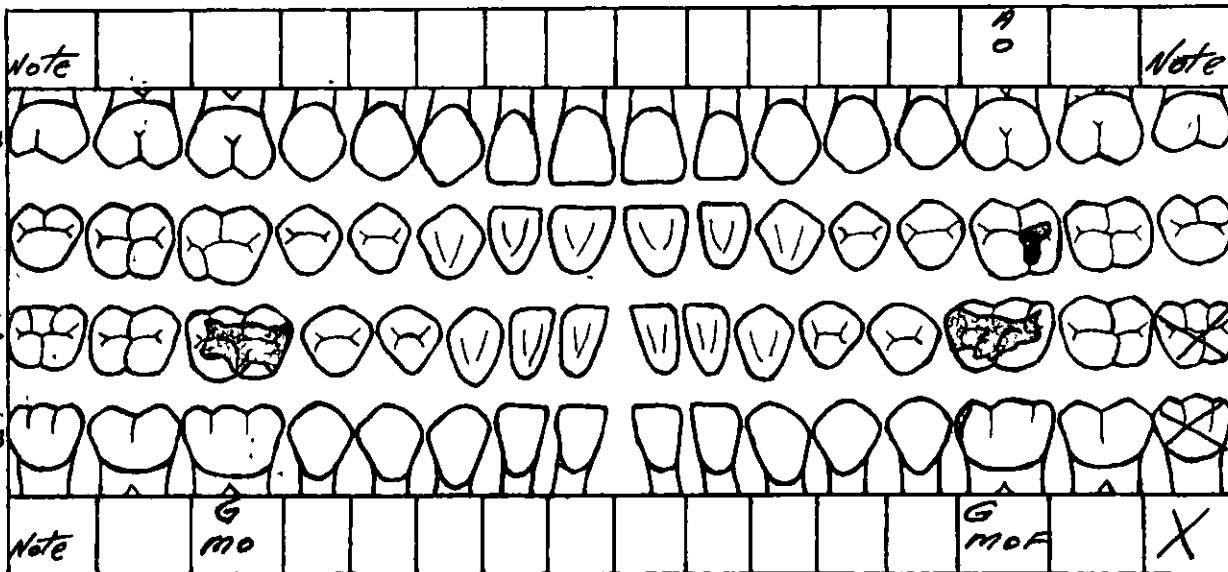
Date of Death

Cause of Death

Right

Left

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



16 15 14 13 12 11 10 9 9 10 11 12 13 14 15 16

*See Remarks*

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.

**IVOR J. FOARD**  
US DA CIV IS

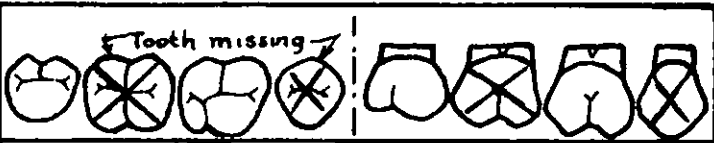

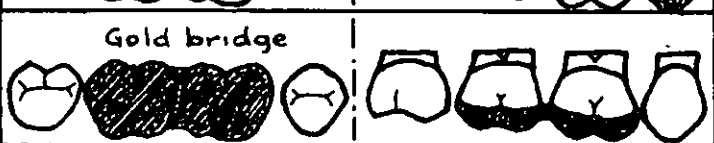


*/s/ Ivor J. Foard*

Signature of Officer or other person who prepared Tooth chart

**WOODROW W. WOLF**  
CAPT QM OPER. OFF.

*Woodrow W. Wolf*

Verified by G R C Officer

<p><b>MISSING TEETH</b> All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :</p>	 <p style="text-align: center;">Tooth missing</p>
<p><b>CROWNED TEETH</b> . Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus</p>	 <p style="text-align: center;">Gold crown      Porcelain crown</p>
<p><b>BRIDGE WORK.</b> . Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :</p>	 <p style="text-align: center;">Gold bridge</p>
<p><b>FILLINGS.</b> Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus :</p>	 <p style="text-align: center;">Gold filling      Silver filling</p>
<p><b>CARIES (CAVITIES)</b> Outline location and size of cavity, shade in thus :</p>	 <p style="text-align: center;">Cavity      Decayed</p>

**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**

- R-16 unerupted before death.
- R-13 has rotated 1/16 of a turn distally
- R-12 has rotated 1/16 of a turn distally
- R-11 has rotated 1/16 of a turn distally
- L-10 has a slight facial version
- R-8 unerupted before death.
- R-9 has rotated 1/8 of a turn distally.
- L-3 has rotated 1/8 of a turn distally
- L-8 unerupted before death.

Color : Dull Ivory  
 Size : Average  
 Alignment : Very good.

CORRECTED COPY

Graves Registration  
Form No 1  
(Revised 1 Sept 1943)

# REPORT OF BURIAL

TM 10 630 AND AR 30-1815

30 December 1949  
Date

UNKNOWN X-562  
Last Name First Initial Rank Serial No

Unknown  
Unit Organization

Steinbach, Germany 7 March 1945 Gun Shot Wounds  
Place of Death Date of Death Cause of Death

1700 - 15 March 1945 U. S. Military Cemetery, HAMM, Luxembourg  
Time and Date of Burial Name of Cemetery Name or Coordinates of Location

214 9 Cross  
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 Previously identified as Pvt John F. COOPER,  
How were remains identified? 39581362, in Plot Q, Row 9, Grave 214, U. S.  
Military Cemetery, Hamm. Redesignated Unknown X-562 in original grave  
location. Auth: QMGMT 293 dtd 22 Dec 49.

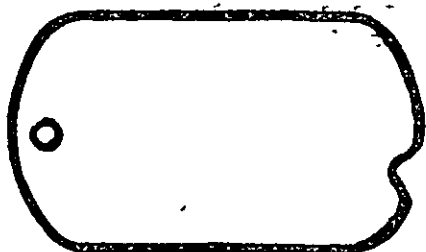
What means of identification were buried with the body?

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

Who is buried on

Deceased's Right	ALLEN Name	33403564 Serial No.	PFC Rank	376 Inf Rgt Organization	213 Grave No.
Deceased's Left	MARZS Name	36905542 Serial No.	PFC Rank	301 Inf Rgt Organization	215 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 Unknown  
Name

Address

Religion Unknown

List only Personal Effects Found on Body and disposition of same

This corrected copy of Report of  
Burial, prepared at HQS, AGRG-EA.

Signature of Officer or other person reporting burial

EDWARD F. PRICE JR

CAPT

Verified by G.R.S. Officer

nd

### 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

Thumb

1 2 3 4 5

Right Hand

Thumb

1 2 3 4 5

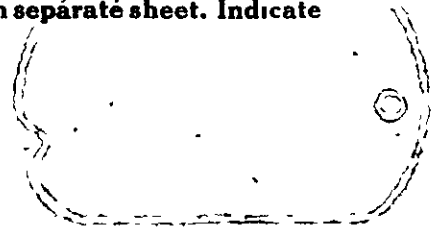
### TOOTH CHART

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.

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

Indicate missing natural teeth by X, crowns by O, fillings by □, Bridges by ◊, missing anchor teeth, replacements by artificial teeth X

Characteristics:



Graves Registration  
Form No 1  
(Revised 1 Sept. 1943)

# REPORT OF BURIAL

3 February 47

TM 10 630 AND AR 30-1815

**X - 562** (HAMM, Luxembourg) **unk** **unk**  
 Last Name First Initial Rank Serial No

Unit **unk** Organization

Steinbach, Germ Coord. WL-2216 **est. 13 Mar/45** **SF abdomen**  
 Place of Death Date of Death Cause of Death

**1700, 15 Mar 45** **US Mil. Cem. HAMM, Luxembourg**  
 Time and Date of Burial Name of Cemetery Name, or Coordinates of Location

**214** **9** **Q** **CROSS**  
 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 a) previously identified as FULK, Bobby E., 37237614, by certificate signed by: Charles A. Summers, Capt. 01011620 - 788 TK BN

b) Designated as Unk.X-559, authority HQs AGRC, letter dtd 22 July 46, AGRR.

c) Designated as Unk.X-562 per letter Hq AGRC, dtd 28 Jan 47, RRE 2002(Hamm, Q-9-214)

What means of identification were buried with the body?

GRS #1 in sealed GRS bottle

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

Who is buried on	<b>ALLEN</b>	<b>33403564</b>		<b>213</b>
<b>Deceased's Right</b>	Name	Serial No	Rank	Grave No.
<b>Deceased's Left</b>	<b>MARZS</b>	<b>36905542</b>		<b>215</b>
	Name	Serial No.	Rank	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 **unk** Name

Address

Religion **unk**

List only Personal Effects Found on Body and disposition of same **NONE**

MEMORIAL RECORDS BRANCH  
 JUN 1 4 28 PM '47

CORRECTED COPY PREPARED AT FIRST ZONE HQs:

*William L. Scott*  
**WILLIAM L. SCOTT**  
 2nd Lt Inf  
 Asst. Chief of Operations

Signature of Officer or other person reporting burial

Verified by GRS 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. :

4			
3			
2			
1			
Thumb			

Left Hand

Thumb			

Right Hand

### TOOTH CHART

		Deceased's Left															
8	7	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
		Deceased's Right															
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8		
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.**



Graves Registration  
Form No 1  
(Revised 1 Sept 1943)

CORRECTED COPY  
**REPORT OF BURIAL**

6 August 1946  
Date

*X-559* *should* *214*

Unknown *X-559* *Hamm cemetery* *unk* *unk*  
 Last Name First Initial Rank Serial No

*UNK*  
 Unit Organization

Steinbach, Germ. Coord VII 2216 *unk* (est. to be 13 Mar/45) *SF abdomen*  
 Place of Death Date of Death Cause of Death

1700, 15 Mar/45 *US Mil Cem. Hamm, Luxembourg*  
 Time and Date of Burial Name of Cemetery Name or Coordinates of Location

*214* *9* *Q* *Cross*  
 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?

- a) Previously identified as FULK, Bobby E., 37237644, by certificate signed by: Charles A. Summers - Capt -O-1011620 - 778 TK BN
- b) Designated as Unk. X-559, authority Versailles AGRC HQs, letter dated 22 July/46, What means of identification were buried with the body? *AGRRE, ( Hamm, Q-9-214)*

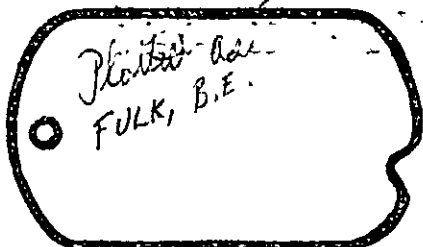
GRS #1 in sealed GRS bottle

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

Who is buried on

<b>Deceased's Right</b>	<i>ALLEN</i> Name	<i>33403564</i> Serial No	<i>unk</i> Rank	<i>94 Inf Div</i> Organization	<i>21B</i> Grave No.
<b>Deceased's Left</b>	<i>MARXS</i> Name	<i>36905542</i> Serial No.	<i>Pvt</i> Rank	<i>94 Inf Div</i> Organization	<i>215</i> 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 *unk* Name

Address

Religion *unk*

List only Personal Effects Found on Body and disposition of same

NONE

CORRECTED COPY:

*ant E. Zelinka*  
 Lt Inf  
 Adjutant  
 7th QM BN

For the commanding Officer /t/ Wm T. KELLY - 1st Lt - QMC-609 QM GR  
Signature of Officer or other person reporting-burial Reg-Co

/s/ W.T. Kelly  
Verified by G.R.S. Officer

RECORDS BRANCH

4 05 PM '46

REPORT OF OFFICIAL  
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, call 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

Thumb

Finger 2

Finger 3

Finger 4

Finger 5

Right Hand

Thumb

Finger 2

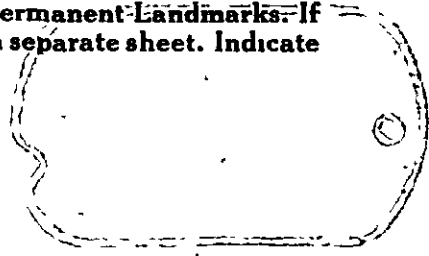
Finger 3

Finger 4

Finger 5

TOOTH CHART

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.



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

# REPORT OF BURIAL

TM 10-630 AND AR 30-1815

332 *W*

15 March 1945

Date

*293*  
FULK

Bobby

E

Sgt

37237644

Last Name

Initial

Rank

Serial No

Hq Co 778 Tk. Bn

Coord WL 2216 Unit Nord de Guerre Zone

Steinbach, Germany

~~US (estimated to be 13 March 1945)~~ *(PR)*

Place of Death

Date of Death

Cause of Death abdomen

1700 15 March 1945

US Military Cemetery Hamm, Luxembourg

Time and Date of Burial

Name of Cemetery

Name or Coordinates of Location

214

9

Plot Number

Type of Marker

Grave Number - Row Number

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

If No Identification Tags

How were remains identified?

Certificate signed by:

Charles A. Summers  
Capt, 01011620  
778 Tk Bn.

What means of identification were buried with the body?

GRS form # 1 in sealed GRS bottle

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

Who is buried on:

Deceased's Right:

ALLEN  
Name

33403564  
Serial No

Unknown 376 Inf 94 Div  
Rank Organization Grave No.

213\*

Deceased's Left

MARZS  
Name

36905542  
Serial No

Pvt 301 Inf 94 Div  
Rank Organization Grave No.

215

Signature of Name, Rank and if possible Organization of person furnishing above Data when other than officer reporting burial.

No identification tags

If print of identification tag is not affixed fill in below:

Bobby E Fulk

37237644

Emergency Addressee

UNKNOWN

Name

Address

Religion

UNKNOWN PROTESTANT PR

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

No personal effects

FILE

JUN 28 1945

For the Commanding Officer

Wm T Kelly

1st Lt QMC

609 QM Gr Reg Co.

Signature of Officer or other person reporting burial

Verified by GRS 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: \_\_\_\_\_  
 Weight: \_\_\_\_\_  
 Color of Eyes: \_\_\_\_\_  
 Color of Hair: \_\_\_\_\_  
 Race: \_\_\_\_\_  
 Laundry Marks: \_\_\_\_\_  
 Number of Rifle: \_\_\_\_\_  
 Wear Glasses? \_\_\_\_\_  
 Is Tooth Chart Attached? \_\_\_\_\_

(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

Right Hand

Thumb

Thumb

## TOOTH CHART

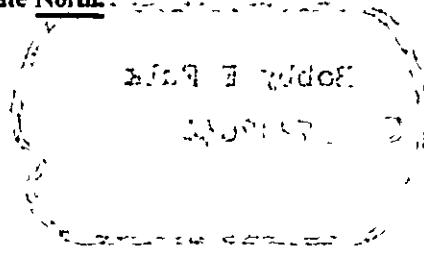
If this is an Isolated Burial, make a Sketch of the Location, oriented with Permanent Landmarks. If more space needed attach separate sheet. Indicate North.

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
Upper				Lower											

Indicate missing natural teeth by X, crowns by O, fillings by □, Bridges by ⊕ linking anchor teeth, replacements by artificial teeth by ⊗

Characteristics

Other



AG P BR HQ SOS

22560

C E R T I F I C A T E

293 Fulk, Bobby E. (37,237,664)

15 March 1945

*100*

I, the undersigned, certify that these remains which I have personally viewed are those of:

*2B*

~~FULK, Bobby E. Sgt. 37237644~~  
Hq Co 778 Tank Battalion APO 403 NY, N.Y.

I base my identification on acquaintance of the deceased, covering a period of 7 months

/s/ Charles A Summers  
Capt  
01011620  
778 Tank Bn

A true Copy  
*W. T. Kelly*  
Wm T Kelly  
1st Lt QMC  
609 QM Gr Reg Co.

REGISTERED

*Handwritten signature and date 11/13/45*