

FILE IDENTIFICATION TOPPER

FILE NUMBER

SUBJECT

Frank Howard Island #3

RECEIPT OF REMAINS

HEADQUARTERS
NEW YORK PORT OF EMBARKATION
DISTRIBUTION CENTER #1, AGPS

DISTRIBUTION CENTER

1st AVENUE & 18th STREET
BROOKLYN, NEW YORK

ROUTINE

REMAINS CONSIGNED TO:

Superintendent,

LONG ISLAND

National Cemetery

FARMINGDALE, NEW YORK

THERE ARE BEING TRANSPORTED THE REMAINS OF THE LATE UNKNOWN X-3

FOR INTERMENT IN YOUR CEMETERY.

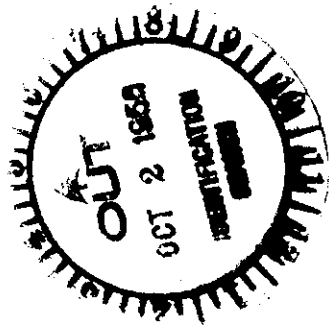
ESCORT IS SGT JOHN W. THOMISON 298 466 USMC

I, THE UNDERSIGNED, DO HEREBY ACKNOWLEDGE RECEIPT OF THE REMAINS OF THE ABOVE-NAMED DECEASED

THIS 12th DAY OF December, 1947

WITNESS (Escort)

CONSIGNEE



1

DISINTERMENT DIRECTIVE

POST

293 W. Second - X-3 (Fossvogur)

SECTION

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

4820 X-3

DATE 17 7 47 DAY MONTH YEAR

NAME UNKNOWN

SERIAL NUMBER

RANK

ARM 5

DATE OF DEATH

CEMETERY FOSSVOGUR

DISPOSITION OF REMAINS

2321 01 CODE DIST. PT.

PLOT 31 SEC C ROW 1 GRAVE 11 COUNTRY ICELAND

CAUSE OF DEATH

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE LONG ISLAND NATIONAL CEMETERY FARMINGDALE, NEW YORK

NAME AND ADDRESS OF NEXT OF KIN

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME Unknown, X-3

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISTINTERRED 21 May 47

IDENTIFICATION TAG ON REMAINS MARKER

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY T.C. LEAR, Embalmer

NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Casket, in blanket

CONDITION OF REMAINS Badly decomposed.

OTHER MEANS OF IDENTIFICATION Burial bottle

MINOR DISCREPANCIES

REMAINS PREPARED AND PLACED IN CASKET

DATE 21 May 47

BY RALPH S. CRUM, Embalmer

CASKET SEALED BY RALPH S. CRUM, Embalmer

EMBALMER (Signature) Thomas C Lear

CASKET BOXED AND MARKED

DATE 13 Sep 47 BY S.S. ROFF, WD. CIV.

SHIPPING ADDRESS VERIFIED BY T.C. MEAGHER, CWO, USA

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

JAMES R. PARKER, CAPT., QMC.

SIGNATURE OF GRS INSPECTOR

Handwritten notes and signatures including '333' and 'R-10-2-48'.

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

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED		FROM		KIND OF CONVEYANCE		SIGNATURE OF SHIPPER		DATE	
USAT JOSEPH V. CONNOLLY		ARGENTIA, NEWFOUNDLAND		TRUCK		JAMES B. PARKER CAPT OCT 16 1947		OCT 16 1947	
TO		TO		NAME OF CONVOYER		SIGNATURE OF RECEIVER		DATE	
				USAT JOSEPH V. CONNOLLY		<i>[Signature]</i>		OCT 16 1947	
2. SHIPPED		FROM		KIND OF CONVEYANCE		SIGNATURE OF SHIPPER		DATE	
JOSEPH V. CONNOLLY		ZBC				<i>[Signature]</i>		OCT 27 1947	
TO		TO		NAME OF CONVOYER		SIGNATURE OF RECEIVER		DATE	
				NYPE		<i>[Signature]</i>		OCT 27 1947	
3. SHIPPED		FROM		KIND OF CONVEYANCE		SIGNATURE OF SHIPPER		DATE	
I.C. #1		NYPE				<i>[Signature]</i>		OCT 27 1947	
TO		TO		NAME OF CONVOYER		SIGNATURE OF RECEIVER		DATE	
						<i>[Signature]</i>		OCT 27 1947	
4. SHIPPED		FROM		KIND OF CONVEYANCE		SIGNATURE OF SHIPPER		DATE	
10-20-47 J.W. Bennett		NYPE				<i>[Signature]</i>		OCT 29 1947	
TO		TO		NAME OF CONVOYER		SIGNATURE OF RECEIVER		DATE	
						<i>[Signature]</i>		OCT 29 1947	
5. SHIPPED		FROM		KIND OF CONVEYANCE		SIGNATURE OF SHIPPER		DATE	
TO		TO		NAME OF CONVOYER		SIGNATURE OF RECEIVER		DATE	
6. SHIPPED		FROM		KIND OF CONVEYANCE		SIGNATURE OF SHIPPER		DATE	
TO		TO		NAME OF CONVOYER		SIGNATURE OF RECEIVER		DATE	
7. SHIPPED		FROM		KIND OF CONVEYANCE		SIGNATURE OF SHIPPER		DATE	
TO		TO		NAME OF CONVOYER		SIGNATURE OF RECEIVER		DATE	
8. SHIPPED		FROM		KIND OF CONVEYANCE		SIGNATURE OF SHIPPER		DATE	
TO		TO		NAME OF CONVOYER		SIGNATURE OF RECEIVER		DATE	
9. SHIPPED		FROM		KIND OF CONVEYANCE		SIGNATURE OF SHIPPER		DATE	
TO		TO		NAME OF CONVOYER		SIGNATURE OF RECEIVER		DATE	

RECEIVED
OF WHICH IN AM TIME (Z)
Nov 19 21 45 1947

SIGNAL CENTER
BROOKLYN, BKLYN, NY

R

NY 2-794 GA PLS

NY 2-794 V WA 285 NR 24/19 2132Z

FROM LARKIN QMG WASH DC

TO CG NYSE BROOKLYN NY

ATTN COLONEL G H BARE

DISREGARD TXK DATED 24 OCTOBER AND TXK DATED 28 OCTOBER PD REFERENCE
UNKNOWN REMAINS AMERICAN HOME CIA ALL UNKNOWN EXCEPT THE FOLLOWING
ARE TO BE INTERRED IN LONG ISLAND NATIONAL CEMETERY

FOSSVOGUR	FORT PEPPERRELL	FORT MC ANDREW
X-1	X-5	X-6
X-3	X-1 OF 18	X-12
X-5	X-5 OF 18	X-16
	X-8 OF 18	X-21
	X-9 OF 18	X-26
	X-10 OF 18	X-38
	X-15 OF 18	X-40
	X-17 OF 18	X-46
	X-18 OF 18	X-58
		X-61

REFERENCE TELEPHONE CONVERSATION THIS DATE LT COL HICK Y MIT COL
BARE CIA DISINTERMENT DIRECTIVES DISPATCHED THIS DATE ON UNKNOWN
X-10 OF 18 FORT PEPPERRELL IDENTIFIED AS S 1/C GERALD FRANCIS FERGUSON,
UNKNOWN X-46 FORT MC ANDREW IDENTIFIED AS A/S ANDRE JOSEPH LANDRY, UNKNOWN
X-17 OF 18 FORT PEPPERRELL IDENTIFIED AS S1/C GEAR RAY HARRILL END 24/19 HICKEY
2137Z

McCee

AGR DIVISION

SUPERINTENDENT

LONG ISLAND NATIONAL CEMETERY

FARMINGDALE, NEW YORK

REQUEST YOU SCHEDULE FOLLOWING INTERMENTS AS SOON AS POSSIBLE. UNKNOWN X-5
FOSSVOGUR AND UNKNOWN X-5 FOSSVOGUR.

COMMANDING OFFICER DISTRIBUTION CENTER NUMBER ONE NEW YORK PORT OF EMBARKATION

061545(Z)Dec

IDENTIFICATION DATA

REMAINS OF UNKNOWN X-3				2. DATE OF REPORT 14 July 1947	
3. NAME OF CEMETERY Fossvogur, Iceland		4. PLOT 31-C	5. ROW 1	6. GRAVE 11	7. DATE OF DISINTERMENT REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT 165 lbs.	9. ESTIMATED HEIGHT 71"	10. COLOR OF HAIR Light brown pubic hair.	11. RACE
--	-----------------------------------	---	----------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

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

Tattoo of a sailing ship on the back of the right hand.

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

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)

Fragments of white sheeting.

Handwritten notes:
 11/14/47
 1/16/48
 I DON

OQMG MEMORIAL DIVISION

REPATRIATION RECORDS

HICKEY

5198

CG NYPE BROOKLYN NY ATTN COLONEL G H BARE

DISREGARD TWX DATED 24 OCTOBER AND TWX DATED 28 OCTOBER PERIOD REFERENCE UNKNOWN REMAINS AMERICAN ZONE CMA ALL UNKNOWN'S EXCEPT THE FOLLOWING ARE TO BE INTERRED IN LONG ISLAND NATIONAL CEMETERY

FOSSVOGUR	FORT PEPPERRELL	FOR MCANDREW
X-1	X-5	X-6
X-3	X-1 OF 18	X-12
X-5	X-5 OF 18	X-16
	X-8 OF 18	X-21
	X-9 OF 18	X-26
	X-10 OF 18	X-38
	X-15 OF 18	X-40
	X-17 OF 18	X-46
	X-18 OF 18	X-58
		X-61

REFERENCE TELEPHONE CONVERSATION THIS DATE LT COL HICKEY WITH COL BARE CMA
 DISINTERMENT DIRECTIVES DISPATCHED THIS DATE ON UNKNOWN X-10 OF 18 FORT
 PEPPERRELL IDENTIFIED AS S 1/C GERALD FRANCIS FERGUSON CMA UNKNOWN X-46 FORT
 MCANDREW IDENTIFIED AS A/S ANDRE JOSEPH LANDRY CMA UNKNOWN X-17 OF 18 FORT
 PEPPERRELL IDENTIFIED AS S1/C OMAR RAY HARRILL
 END Q. GIM HICKEY

19 NOVEMBER 1947 - 1530 HOURS

OQMG 293 - NYPE

R. M. BAUKNIGHT, LT. COL. QIC

Memorial Division

1293
 7400
 X-3 - (from company)
 [Signature]

Fill
 21 Nov 47
 S. Chick

CG NYPE BROOKLYN NY ATTN AGR DIVISION

THE FOLLOWING LIST OF UNKNOWN BY DISINTERMENT DIRECTIVE NBR DUE TO
ARRIVE NEW YORK PORT 26 OCTOBER FROM ARGENTIA NEWFOUNDLAND HAVE EITHER BEEN
IDENTIFIED OR ARE NOW UNDER INVESTIGATION PERIOD THESE REMAINS WILL NOT
REPEAT WILL NOT BE INTERRED IN LONG ISLAND NATIONAL CEMETRY PERIOD CORRECTED
DISINTERMENT DIRECTIVES OR ADDITIONAL INSTRUCTIONS WILL BE FURNISHED AT A
LATER DATE

FORT MCANDREW	FOSSVOGUR	ISOLATED FURUFJODUR	FORT PEPPERRELL
7215 X-1	4820 X-1	ISOLATED FURUFJODUR X-1	7217 X-4
7215 X-2	4820 X-2	ISOLATED FURUFJODUR X-2	7217 X-5
7215 X-12	4820 X-3	ISOLATED FURUFJODUR X-3	7217 X-1 OF 18
7215 X-16	4820 X-4	ISOLATED FURUFJODUR X-4	7217 X-5 OF 18
7215 X-27	4820 X-5	ISOLATED FURUFJODUR X-5	7217 X-8 OF 18
7215 X-28	4820 X-6	ISOLATED ISAFJORDUR X-1	7217 X-15 OF 18
7215 X-40	4820 X-7	ISOLATED ISAFJORDUR X-2	7217 X-17 OF 18
7215 X-46		ISOLATED GRAND MANAN X-1	7217 X-18 OF 18
7215 X-55			
7215 X-57			
7215 X-58			
7215 X-61			

REQUEST AMERICAN ZONE HEADQUARTERS BE NOTIFIED OF ABOVE INFORMATION

END QMGMM HICKEY

LARKIN

24 OCTOBER 1947 1600 Hours

QMGMM 293 NYPE

R. M. BAUKNIGHT, LT. COL., QMG
Memorial Division

X 2-2-3

Handwritten notes and scribbles on the right margin, including "X-3" and "From...".

Handwritten signature and date "24 Oct 47".

1. FILE UNDER NO. 293 - Unk Iceland Fossvogur X-3

SYNOPSIS

2. TYPE OF DOCUMENT: 1st Ind 3. DATE: 13 Nov 47
4. FROM: AGO
5. TO: OQM
6. SUBJECT: Fingerprint Comparison

7. DOCUMENT FILED UNDER NO. 293 - Unk Iceland, Fossvogur X-1

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.

REF ID: A66700 Unk. Iceland X-3 (Fossvogur)

LINK SHEET

SEVEN

10/15/47

18 Oct. 1947

TO:

INFO:

The Adjutant Gen. Wash., D. C.
ATTN: Status Review & Determination Sub-Section, Casualty
Section, Personnel Actions Branch, AGO, 5E 777, The Pentagon

RE:

Identification of Unknown Deceased

REF ID: A66700 Unk. Iceland (Misc.) (Fossvogur) (X-1, X-5, X-6)

mfs

(Basic: ltr fr OQMG, Wash, D. C., file 314.6, dtd 12 Feb 1947
Subj: Reports of Interment)

293 Unknown, Fossvogur
Cemetery, Iceland

5th Ind.

Hq American Zone, American Graves Registration Service, Brooklyn Army Base,
1st Avenue and 58th Street, Brooklyn 20, N. Y. 2 April 1947

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

Reports of Interment requested in basic communication attached as
inclosures 6 and 7.

FOR THE COMMANDING OFFICER:

7 Incls: n/c

James E. Hickey
JAMES E. HICKEY
Lt. Col., QMC
Deputy

STATION FILE

Rec'd [unclear] 7/27/47 (H...)

293 Unknown USA X-36 (Fossvogur) [unclear] [unclear]

293 Unknown USA X-36 (Fossvogur) [unclear] [unclear]

Basic ltr fr D OQMG, 12 Feb 47; subj: Report of Interment
3rd Ind.

HEADQUARTERS, ICELAND BASE COMMAND, APO 610 c/o Postmaster New York City,
New York.
18 March 1947

TO: Commanding General, Atlantic Division, ATC, Fort Totten, Long Island,
New York.

Forwarded for your information are true copies of Report of Interment
of two (2) unidentified seamen, United States Merchant Marine, buried at
this station August 24, 1942. The remains were interred in grave Nos. 11
and 12 in Plot 31, Section C, Row 1 in Fossvogur Cemetery, Iceland.

FOR THE COMMANDING OFFICER:

August Kupsar
AUGUST KUPSAR
Capt. AC
Base Adjutant

7 Incls.

5 Incls - n/c

Added 2 Incls.

Incl 6 - Report of Interment, Unidentified, Grave #11 Plot 31, Section C,
Row 1.

Incl 7 - Report of Interment, Unidentified, Grave #12 Plot 31, Section C,
Row 1.

4th Ind.
HQ ATLANTIC DIVISION, ATC, Fort Totten, L. I. New York

31 MAR 1947

TO: Commanding Officer, American Zone, AGRS, Brooklyn Army Base,
1st Avenue & 58th Street, Brooklyn 20, New York

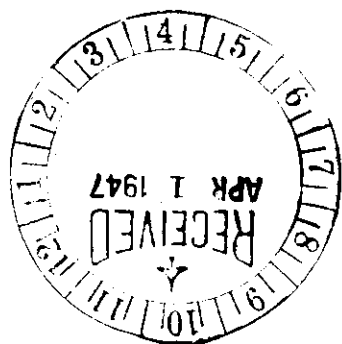
Attention is invited to preceding 3rd indorsement and inclos-
ures 6 and 7 thereto.

FOR THE COMMANDING GENERAL:

7 Incls: n/c

Chadwick
G. A. ADDINGTON
Lt. Colonel, GSC
AC S-Supply

293-
Kupsar
Chadwick
686



293 Unknown, Fossvogur
Cemetery, Iceland

1st Ind.


Hq American Zone, American Graves Registration Service, Brooklyn Army
Base, 1st Avenue and 58th Street, Brooklyn 20, N. Y. 17 February 1947.

THRU: Commanding General, Atlantic Division, ATC, Fort Totten, Long
Island, New York.

TO: Commanding Officer, Iceland Base Command, 1386th AAF Base Unit,
APO 610, c/o Postmaster, New York, N. Y.

1. Request information called for in basic communication.
2. This headquarters has no record of burial reports for the
remains interred in graves located in Plot 31, Section C, Row 1, other
than Consolidated Reports, copies inclosed.

5 Incls.
n/c


C. F. AVERA
Colonel, GMC
Commanding

293 2nd Ind
Hq, AMIL-MC HHSIB, MC, Fort Totten, L. I., N. Y.

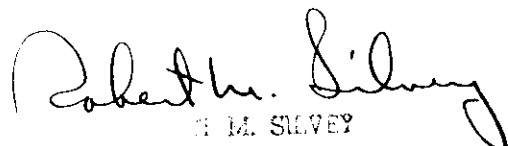
28 FEB 1947

TO: Commanding Officer, Iceland Base Command, AMIL-MC, APO 610, c/o
Postmaster, New York, N. Y.

Request compliance with basic communication and 1st Indorsement.

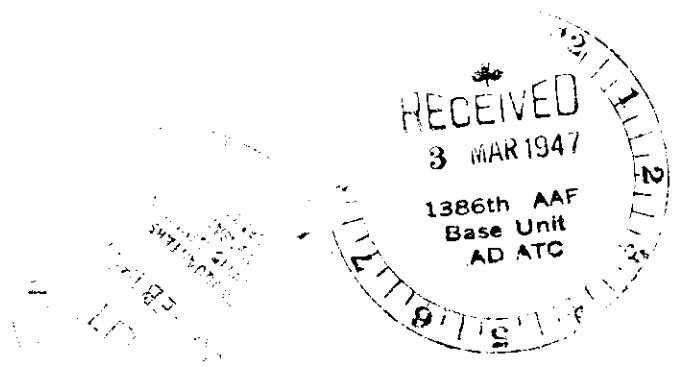
BY COL. R. M. SILVEY, G-1, AMIL-MC:

5 Incls:
n/c


R. M. SILVEY
Colonel, G-1
Executive
Asst. Chief of Staff
Supply

RECEIVED
3 MAR 1947

1386th AAF
Base Unit
AD ATC



WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON 25, D. C.

IN REPLY REFER TO QMGMR 314.6

Graves Registration
(American, U.S. Misc)

12 FEB 1947

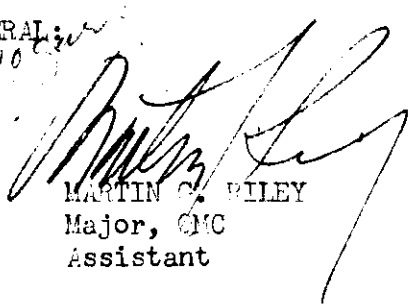
SUBJECT: Reports of Interment

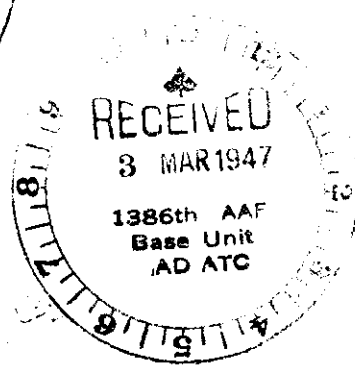
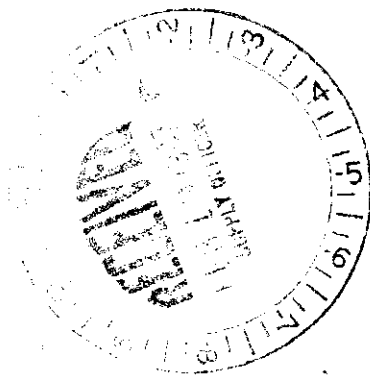
TO: Commanding Officer
Headquarters American Zone
American Graves Registration Service
Brooklyn Army Base
1st Avenue and 58th Street
Brooklyn 20, New York

It is requested that Reports of Interment be furnished this office for the Unidentified Deceased interred in Plot 31, Section C, Row 1, Graves 11 and 12, shown on the attached listing of Fossvogur Cemetery, Iceland.

Unidentified (American)
Unidentified Fossvogur
FOR THE QUARTERMASTER GENERAL:

5 Incls
Listing


MARTIN C. RILEY
Major, QMG
Assistant



OFFICE OF THE QUARTMASTER
 Force Detachment Registration Section
 Iceland Base Command
 Consolidated Report, Plot - 21 Section C, Row #1
 FOREIGN COUNTRY, Iceland

Draw No.	Name	Rank	Serial No.	Organization	Date of Entry	Date of Serial	Disposition of Service	Extracts If Any	Geography Address of Next of Kin
1.	George E. Pollman	Seaman	None	U. S. N. M.	6 July, 1942	11 July, 1942	American	None	1775 Ellis Street, San Francisco, Calif.
2.	Earl Sjolola	Seaman	None	U. S. N. M.	11 July, 1942	18 July, 1942	American	None	San Francisco, Calif.
3.	Mary V. Bjorvelund	Seaman	None	U. S. N. M.	11 July, 1942	18 July, 1942	American	None	San Francisco, Calif.
4.	Herbert Hinds	Postman	None	U. S. N. M.	28 July, 1942	29 July, 1942	American	None	1400 1/2 Julia Street, San Francisco, Calif.
5.	Robert H. McCombs	Chief Mate	None	U. S. N. M.	5 July, 1942	22 Aug. 1942	American	None	1251 Hollywood St., Los Angeles, Calif.
6.	Easton F. Perry	Deft Engineer	None	U. S. N. M.	5 July, 1942	22 Aug. 1942	American	None	1101 1/2 14th St., Philadelphia, Pa.
7.	James A. Curran	Seaman	None	U. S. N. M.	5 July, 1942	22 Aug. 1942	American	None	60 Washington St., Jacksonville, Fla.
8.	Charles E. Macanelli	Seaman	None	U. S. N. M.	5 July, 1942	22 Aug. 1942	American	None	141 Jackson, Newark, N. J.
9.	William F. Brady	Seaman	None	U. S. N. M.	5 July, 1942	22 Aug. 1942	American	None	35 Derby Street, Somerville, Mass.
10.	Harper E. Peterson	Ship Master	None	U. S. N. M.	5 July, 1942	21 Aug. 1942	American	None	4539 Saxon Street, Philadelphia, Pa.
11.	Unidentified	Unknown	None	U. S. N. M.	5 July, 1942	21 Aug. 1942	American	None	See QUC Form No. 1, Unknown
12.	Unidentified	Unknown	None	U. S. N. M.	5 July, 1942	21 Aug. 1942	American	None	See QUC Form No. 1, Unknown
13.	James B. Moore	Chief Purser	None	U. S. N. M.	5 July, 1942	7 Aug. 1942	American	None	1701 North St., Baltimore, Md.

CONFIDENTIAL

OFFICE OF THE QUARTERMASTER
Base Overseas Registration Service
Island Base Command
Consolidated Report 1 Plot - 31 - Section - C - Row # 1 Passenger Cemetery Iceland

Queue No.	Name	Rank	Serial No.	Organization	Date of Death	Date of Burial	Disposition of Effects	Effects at ANZ	Emergency Address or Next of Kin
14.	Howard S. Hirst	Older	None	U. S. N. N.	4 May 1943	4 May 1943	American Legation	See buried 1121 Carroll Street to US VICE Consul, Baltimore, Maryland 30 APRIL 1943 JAW.	
15.	Unidentified	Unknown	None	U. S. N. N.	Unknown	4 May 1943	American Legation	See same as above May, 1943.	Unknown
16.	Unidentified	Unknown	None	U. S. N. N.	Unknown	11 May 1943	American Legation		Unknown
17.	Unidentified	Unknown	None	U. S. N. N.	Unknown	11 May 1943	American Legation		Unknown

THE FOLLOWING STAFF REPORTED IN FOREIGN COUNTRY, OTHER THAN NAME. RI HAVE NOTHING ON OUR FILE AT THIS STATION. THIS STATION REQUEST A CROSS STATION THE FOLLOWING INFORMATION
 ABERN HAMEL SALER ADMN , ALLIED WRECKAGE STAFFMAN , DIED 1 JUNE, 1943.

Arabi Hamed Saleh Aden Older None Allied W. Seaman 1/6/43 Unknown American Legation None Known Not known at this station this station.

OFFICE OF THE INSPECTOR
 General Investigation Section
 Ireland State Command

Consolidated Report: Plot - 31 Section C, Row #1

Serial No.	Name	Rank	Serial No.	Organization	Date of Birth	Date of Arrival	Disposition of Efforts	Effects	Emergency Address
1.	George E. Fellman	Seaman	None	U. S. N. W.	6 July, 1942	14 July, 1942	American Legation	None	1375 Ellis Street, San Francisco, Calif.
2.	Edix Waldola	Seaman	None	U. S. N. W.	11 July, 1942	15 July, 1942	American Legation	None	See Serial 107, Dublin
3.	Harry V. Bierswald	Seaman	None	U. S. N. W.	11 July, 1942	15 July, 1942	American Legation	None	See Serial 107, Dublin
4.	Harbert Hinkle	Porter's Mate	None	U. S. N. W.	28 July, 1942	29 July, 1942	American Legation	None	See Serial 107, Dublin
5.	Robert H. De Connor	Chief Mate	None	U. S. N. W.	5 July, 1942	22 Aug. 1942	American Legation	None	See Serial 107, Dublin
6.	Edson F. Perry	Deaf Engineer	None	U. S. N. W.	5 July, 1942	22 Aug. 1942	American Legation	None	See Serial 107, Dublin
7.	James A. Curran	Seaman	None	U. S. N. W.	5 July, 1942	22 Aug. 1942	American Legation	None	See Serial 107, Dublin
8.	Charles W. McCannell	Seaman	None	U. S. N. W.	5 July, 1942	22 Aug. 1942	American Legation	None	See Serial 107, Dublin
9.	William F. Judy	Seaman	None	U. S. N. W.	5 July, 1942	22 Aug. 1942	American Legation	None	See Serial 107, Dublin
10.	Isaac E. Hyslop	Ship Master	None	U. S. N. W.	5 July, 1942	22 Aug. 1942	American Legation	None	See Serial 107, Dublin
11.	Unidentified	Unknown	None	U. S. N. W.	5 July, 1942	22 Aug. 1942	American Legation	None	See Serial 107, Dublin
12.	Unidentified	Unknown	None	U. S. N. W.	5 July, 1942	22 Aug. 1942	American Legation	None	See Serial 107, Dublin
13.	James D. Moore	Chief Engineer	None	U. S. N. W.	5 July, 1942	22 Aug. 1942	American Legation	None	See Serial 107, Dublin

A TRUE COPY:

Roy E. Abbey, Jr.
ROY E. ABBEY, JR
1st Lt. AC
Base Grs Officer

(Improvised)
QMC Form No. 1-GRS

REPORT OF INTERMENT

(To be submitted through channels to the Quartermaster General, Washington, D.C.)
(Par. 21d-TM 10-630)

Unidentified	None	Unknown	U. S. M. M.
(Last Name)	(First)	(Initial)	(Serial No.)
(Rank)	(Organization)		

At Sea, North Atlantic	Approx. July 5, 1942	Drowning
(Place of Death)	(Date of Death)	(Cause of Death)

1400 Hours, August 24, 1942	Fossvogur 23.25-05.5	Reykjavik-Hafnarfjordur 1/25000 sheet
(Time & Date of Burial)	(Place of Burial-Name & No. of cemetery, If in a cemetery)	

Buried with body in bottle

11	1	31 Section C	Cross	Attached to Marker	X
(Grave No.)	(Row No.)	(Plot No.)	(Kind of Grave Marker)	(Identification Tags)	

MARKING: Middle aged, tattoo on back of right hand (sailing ship), tattoo on left hand (indiscernable) Height 72 inches, 4 lower front teeth, no uppers, bald headed.

Other pertinent data to enable grave to be located.
(Where necessary sketch to locate grave should be furnished)

(Unknown)	(Unknown)
(Name and address of Emergency Addressee)	(Name and address of legal next of kin)

Fingerprints (right hand) If right hand missing furnish prints of left hand
(Required when Positive identity cannot otherwise be established) (Par: 25E (2)
TM 10-630

Place X Mark					
Below when prints are of left hand					
	Not Obtainable				
	Thumb	1	2	3	4

List of personal effects and disposition of same

Forwarded to American Consulate for disposition.

(Name, rank, serial no., organization, grave numbers of bodies buried on either side.)

On Right Ragnor H. Nystrom, Master, Merchant Marine, Grave No. 10

On Left Unidentified, Merchant Marine, Grave No. 12

Signature of Officer or other person reporting Verified by Army G.R.S. Officer
Burial. /to the QMG.

Prepare in triplicate - 1 copy to Army GRS Officer - 1 copy to Chief, GRS - Original

Final 6

OMC 314.6
Graves Registration
(American, U.S. Misc)

*293 Unit U.S.A X3 (Fossvogur) long Island
Hall Bar*

18 FEB 1947

SUBJECT: Reports of Interment

TO: Commanding Officer
Headquarters American Zone
American Graves Registration Service
Brooklyn Army Base
1st Avenue and 58th Street
Brooklyn 20, New York

It is requested that Reports of Interment be furnished this office for the Unidentified Deceased interred in Plot 31, Section C, Row 1, Graves 11 and 12, shown on the attached listing of Fossvogur Cemetery, Iceland.

FOR THE QUARTERMASTER GENERAL:

5 Incl
Listing

b/w

MARTIN G. RILEY
Major, OMC
Assistant

*VI
Hiss*

REGISTRATION AND
RECORDS BRANCH
FEB 12 4 31 PM '47
MEMORIAL DIVISION

*✓ 314.6 HQRS American
✓ 293 Unit U.S.A X-4 (Fossvogur) long Island
Hall Bar*

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

INTEROFFICE REFERENCE SHEET

See reverse side for instructions in the use of this form

DUE, HOUR AND DATE _____

1 No.	2 FROM-	3 TO-	4 DATE	5 MESSAGE
1.	Maj. Mac- Farland, Ident. Sec. Mem. Div. R & R	Maj. Riley, Rec. Sec. Mem. Div. R & R	3 Feb. 1947	<ol style="list-style-type: none">1. Burial Reports for the Unidentified Deceased interred in Graves 11 and 12, shown on the attached listing of Fossvogur Cemetery, Iceland, are not of record in Identification Sec.2. Recommend that Burial Reports be requested from the Field. <p style="text-align: right;"><i>gmm</i></p> <p style="text-align: center;"><i>Doc</i></p> <p style="text-align: center;"><i>Shoy</i></p>

INSTRUCTIONS

1. This is the only transmittal form authorized for use among the several elements of the Office of The Quartermaster General. As of 1 September 1946 all similar forms, i. e., slips of various sizes, colors, and shapes, were discontinued; remaining supplies of old forms will be turned in to the Chief, General Administrative Services Division, for disposal.
2. Copies will NOT accompany original.
3. Messages addressed to The Quartermaster General will be signed by the DIVISION Chief IN PERSON unless he is absent, in which case the signature of his executive assistant will be accepted.
4. Due hours and dates as entered by the Chief, General Administrative Services Division, covering action on incoming correspondence, or as used by TQMG or Division Chiefs for dead line purposes, will be met in all cases.
5. Use of columns of form: Column 1, "No.," originator enters the number "1" as his entry; subsequent messages are numbered serially in column 1. Column 2, "From," enter Division identification (abbreviated) or, within Division enter Division identification PLUS branch or section. Column 3, "To," same instruction as for column 2—name of officer or civilian may be added where desirable. Column 4, "Date," spell out month, e. g. 6 Sept. 46. Column 5, "Message," present succinctly and accurately whatever you wish to say. Use full width of sheet when message goes far enough down sheet to clear entries in columns 1, 2, 3, and 4. Use one side of sheet only. Sign surname at end of "message," enter phone extensions under name, then, immediately below, draw line completely across sheet.
6. Use of typewriter is NOT required.
7. Division chief forwarding lengthy papers to TQMG will brief background action in concise manner in his "message" so that TQMG will not be forced to waste time reading nonessential information.
8. Questions as to use of this form and related matters will be directed to the Executive Officer, Office of TQMG.

293 Unit USA X-3 (Foreigner) King Island Natl Con.

"Non-identifiable by reason of lack of sufficient identifying data."

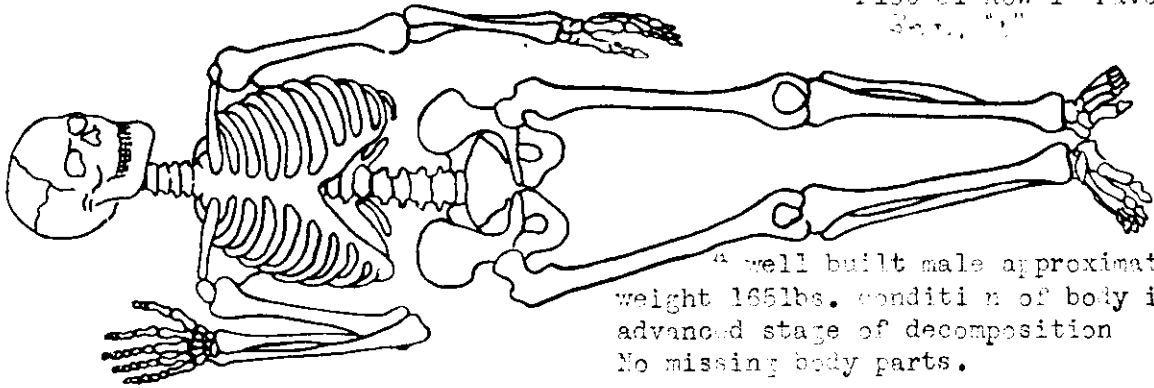
N. J. SLOANE
Capt QMC

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN X-3				2. DATE OF REPORT 14 July 1947			
3. NAME OF CEMETERY Possvogur, Iceland		4. PLOT 31-C	5. ROW 1	6. GRAVE 11	7. DATE OF DISINTERMENT REINTERMENT		
PHYSICAL DESCRIPTION							
8. ESTIMATED WEIGHT 165 lbs.		9. ESTIMATED HEIGHT 71"		10. COLOR OF HAIR Light brown pubic hair.		11. RACE	
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS							
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES Tattoo of a sailing ship on the back of the right hand.							
14. WAS BODY BURNED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		TO WHAT EXTENT?					
15. WAS BODY MANGLED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		TO WHAT EXTENT?					
16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS							
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) Fragments of white sheeting.							

19. BLACK OUT PARTS OF BODY NOT RECORDED

Case No. Mfld-069
Unknown X-3
Cemetery Fossvogur, Iceland
Plot 21 Row 1 Grave 11
Sex, "M"



A well built male approximately weight 165lbs. condition of body in advanced stage of decomposition. No missing body parts.

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

TOOTH CHART

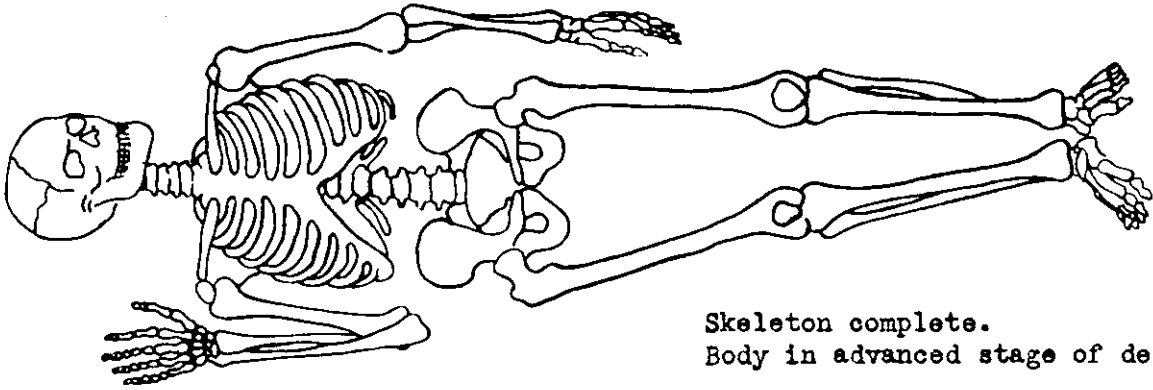
	TOP VIEW	SIDE VIEW
<p>MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X"ED OUT AND LABELED THUS:</p>	<p>↓ <i>Tooth Missing</i> ↓</p>	
<p>CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:</p>	<p><i>Gold Crown</i> <i>Porcelain Crown</i></p>	
<p>BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:</p>	<p><i>Gold Bridge</i></p>	
<p>FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:</p>	<p><i>Gold Filling</i> <i>Silver Filling</i></p>	
<p>CARIES (Cavities): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:</p>	<p><i>Cavity</i> <i>Decayed</i></p>	

	RIGHT								LEFT								
	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
Side Views																	Side Views
Top Views																	UPPER
																	LOWER
Side Views																	
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16	

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."

All teeth have been extracted. No denture found with body. Lower and upper incisors and canines extracted fairly recently - bone ridges still present. Other teeth extracted some time ago, as bone margins smooth.

19. BLACK OUT PARTS OF BODY NOT RECORDED



Skeleton complete.
Body in advanced stage of decomposition.

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

Characteristics of remains: **WELL-BUILT MALE.**

Complexion	Undetermined - White.	Inseam	32".
Build	Tall, Fairly muscular.	Foot	10" long, 3 3/4" wide.
Jaw	Large.	Toes	Straight.
Head	23 1/2" Circumference.		
Arms	Long.		
Hair	Pubic hair abundant, light brown, 3" long.		
Hands	Long.		
Fingers	Long, fairly thick.		
Waist	31 1/2".		

A good rubber mold was obtained from a piece of epidermis that was found and proven to be a finger. What finger it was is impossible to say.

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

JOHN G. FOULKES JR., Capt, QMC.

SIGNATURE

DATE 14 July 1947

IDENTIFICATION CHECK LIST

CASE NO Nf1d-069

UNKNOWN X -3

CEMETERY Fossvogur

PLOT 31 ROW 1 GRAVE 11
Sec. C.

PLACE OF DEATH _____
name of nearest town _____ coordinates and maps _____

DESCRIPTION OF CLOTHING AND EQUIPMENT: (If clothes do not fit obtain size from measurements)

Clothing markings _____ Sizes _____ Indicate unusual markings, color, wear, tear.

ITEM _____
Fragments of white sheeting /

CHEVRONS OR INSIGNIA _____
(type & location: shirt, jacket, coat, helmet)

Shoulder Patch _____

Does clothing indicate that deceased was a member of the Air, Ground, Naval Forces or Merchant Marine? _____

DESCRIPTION OF REMAINS:

AGE ? HEIGHT 71" ✓ WEIGHT 165 lbs DESCRIPTION OF WOUNDS _____

_____ BANDAGES OR DRESSINGS None

SCARS None TATTOOS a sailing ship ✓
(number, location - illustrate on sep. page.)

Outstanding warts or birth marks None
Yes; no: description, location

DATE 14 July 19 47IDENTIFICATION CHECK LIST

SUNBURN OR TAN, OTHER THAN HANDS & FACE _____

COMPLEXION undetermined --White.
(light, med., dark, clear, pimples, pocks, freckles)BUILD Tall fairly muscular
(large, fat, thin, muscular)HAIR None
(color, length, quantity, curly, wavy, straight, whorls or def. part)HAIR Undetermined.
(baldness, widows peak, distinctive cutting or other characteristics)SIDEBURNS _____ MUSTACHE 0----- BEARD OR _____
COLOR-SETTING-SHAPE COLOR-SIZE-SHAPE LENGTH - HEAVYGOATEE -----
LIGHT COLOR-EXTENTEYES _____ EYEBROWS _____
(color-setting-shape) (color-bushiness, extent ac/nose)NOSE _____ EARS _____
(size-shape-straight) (size-set close to or far from head)MOUTH _____ LIPS _____
(large-medium-small) (small-large-full)TEETH All teeth extracted No dentures found.
(white, size, unevenness, spacing, noticeable crowns, fillings, extract.)CHIN ----- part of flesh gone
(prominent, receding, pointed, dimple, double)JAW Large CIRCUMFERENCE OF HEAD IN INCHES 23 1/2"
(large-small-normal) (hat band)NECK ----- LARYNX -----
(size, length, short, normal, wrinkled) (prominent, normal)SHOULDERS ----- ARMS Long
(broad, straight, small, rounded) (length, muscular, color)Pubic hair abundant
(extent and quantity of hair)HANDS LongFINGERS long fairly thick
(short, thick, long, slender, size of knuckles, missing fingers)None
(missing joints) (unusual characteristics of fingernails)CHEST -----
(size of nipples, color, quantity and extent of hair, large, small, normal)BACK ----- Navel 31 1/2"
(quantity and extent of hair) (size of navel, appendectomy,Abundant CIRCUMCISION _____ PUBIC HAIR Lt. Brown
amount, quantity and color of hair (yes-no) (color)

CASE NO. Nf1d-069

MOBILE IDENTIFICATION UNIT
HEADQUARTERS AMERICAN ZONE
AMERICAN GRAVES REGISTRATION SERVICE

PAGE 3

DATE 14 July 19 47

IDENTIFICATION CHECK LIST

HERNIA PLASTY -----
(yes - no: location)

LEGS 32 inseam Hair slight on legs
(inseam, muscular, knock-kneed, bowed, normal, quan, color & extent of hair)

FEET 10" X 3 3/4" TOES Straight
(size, corns, callouses, flat) (slender-straight-crooked-overlap)

EVIDENCE OF HEALED FRACTURES -----
(nose, arms, legs, etc.)

HAS TOOTH CHART BEEN PREPARED No IF NOT EXPLAIN all teeth have been
(yes - no)

extracted no denture found with body Lower and upper incisors and
canines extracted fairly recently Bone ridges still present other teeth
extracted some time ago as bone margins smooth

REMARKS _____

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.

John G. Foulkes Jr. (P.als)
John G. Foulkes Jr.

Officer's name

Capt. QMC

Rank Service

American Zone A GRS

Organization

MOBILE IDENTIFICATION UNIT
HEADQUARTERS AMERICAN ZONE
AMERICAN GRAVES REGISTRATION SERVICE

PROCESSING REPORT

Date _____ 19__

CASE NO. Nfld-069

UNKNOWN X - 3

CEMETERY: Fossvogur, Iceland

PLOT: 31 Sec. C

ROW: 1

GRAVE: 11

1. PHYSICAL PROCESSING See attached check list.

Findings _____

Remarks: _____

Sgd _____



2. FINGERPRINTING.

Findings a good rubber mold was obtained from a piece of epidermis that was found and proven to be a finger what finger it was is impossible to say.

Remarks: _____

Sgd _____



3. FLUOROSCOPING.

Findings Negative.

Remarks: _____

Sgd _____



4. GENERAL REMARKS: _____

Sgd _____

CHECK LIST OF MEASUREMENTS

ANNEX # 1

SKELETAL REPORT

Unknown X-3
Fossvogur Cemetery Iceland
Case No. Nfld-069

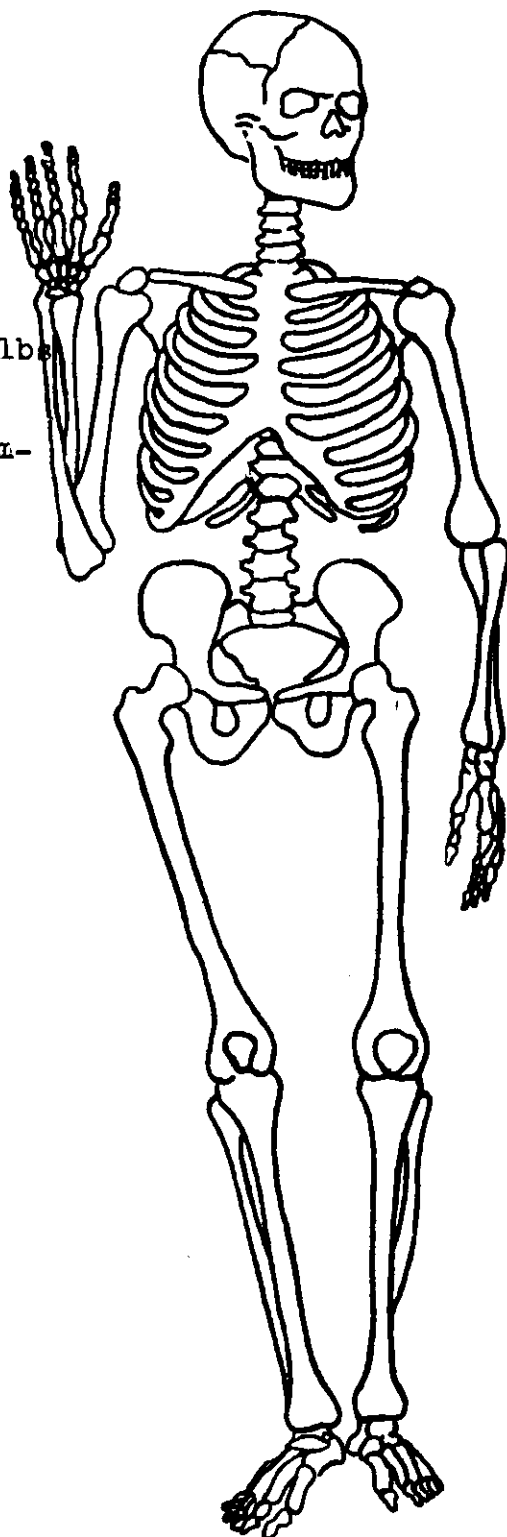
CRANIAL LENGTH			
CRANIAL BREADTH			
CRANIAL HEIGHT			
1. Basio-Bregmatic			
2. Auricular			
CRANIAL SUTURES			
SUTURE CONTOURS			
FACE HEIGHT (UPPER)			
FACE TOTAL			
FACE BREADTH			
NASAL HEIGHT			NO FINDINGS
NASAL BREADTH			
NASAL MARGIN (LOWER)	No findings		NO FINDINGS
ORBITAL HEIGHT			
ORBITAL BREADTH			
ORBITAL OPENING			NO FINDINGS
HUMERUS LENGTH			
FEMORAL LENGTH			

REMARKS

Case No. Nfld-069
Unknown X-3
Fossvogur cemetery
Plot 31 Sec. C.
Row 1 Grave 11

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



A well built male
approximate weight 165lbs

condition of body, 'in'
advanced stage of decom-
position

No missing body parts.

MOBILE IDENTIFICATION UNIT
HEADQUARTERS AMERICAN ZONE
AMERICAN GRAVES REGISTRATION SERVICE

PAGE 1

DATE 14 July 19 47

IDENTIFICATION CHECK LIST

CASE NO M. 6. 1
UNKNOWN X 3
CEMETERY 7
PLOT _____ ROW _____ GRAVE _____

PLACE OF DEATH _____
name of nearest town _____ coordinates and maps _____

DESCRIPTION OF CLOTHING AND EQUIPMENT: (If clothes do not fit obtain size from measurements)

Clothing markings _____ Indicate unusual markings, color, wear, tear.
Sizes _____

ITEM _____

CHEVRONS OR INSIGNIA _____
(type & location: shirt, jacket, coat, helmet)

Shoulder Patch _____

Does clothing indicate that deceased was a member of the Air, Ground, Naval Forces or Merchant Marine? _____

DESCRIPTION OF REMAINS:

AGE 9 HEIGHT 71 WEIGHT 1 DESCRIPTION OF WOUNDS _____

BANDAGES OR DRESSINGS _____

SCARS _____ TATTOOS _____
(number, location - illustrate on sep. page)

Outstanding warts or birth marks _____
Yes; no: description, location

DATE 14 July 19 47

IDENTIFICATION CHECK LIST

SUNBURN OR TAN, OTHER THAN HANDS & FACE - Tattoos on R hand of
writing shop - some
COMPLEXION Undetermined - White
(light, med., dark, clear, pimples, pocks, freckles)

BUILD Tall - Fairly muscular
(large, fat, thin, muscular)

HAIR none
(color, length, quantity, curly, wavy, straight, whorls or def. part)

HAIR Undetermined
(baldness, widows peak, distinctive cutting or other characteristics)

SIDEBURNS _____ MUSTACHE _____ BEARD OR _____
COLOR-SETTING-SHAPE COLOR-SIZE-SHAPE LENGTH - HEAVY

GOATEE _____
LIGHT COLOR-EXTENT

EYES _____ EYEBROWS _____
(color-setting-shape) (color-bushiness, extent ac/nose)

NOSE _____ EARS _____
(size-shape-straight) (size-set close to or far from head)

MOUTH _____ LIPS _____
(large-medium-small) (small-large-full)

TEETH all teeth extracted - No dentures
(white, size, unevenness, spacing, noticeable crowns, fillings, extract.)

CHIN _____
(prominent, receding, pointed, dimple, double) Part of flesh gone

JAW large CIRCUMFERENCE OF HEAD IN INCHES - 23 1/2
(large-small-normal) (hat band)

NECK _____ LARYNX _____
(size, length, short, normal, wrinkled) (prominent, normal)

SHOULDERS _____ ARMS long
(broad, straight, small, rounded) (length, muscular, color)

Pubic Hair - abundant
(extent and quantity of hair)

HANDS _____
FINGERS long - fairly thick
(short, thick, long, slender, size of knuckles, missing fingers)

_____ (missing joints) _____ (unusual characteristics of fingernails)

CHEST _____
(size of nipples, color, quantity and extent of hair, large, small, normal)

BACK _____ WAIST 31 1/2
(quantity and extent of hair) (size of navel, appendectomy)

abundant CIRCUMCISION _____ PUBIC HAIR light brown
amount, quantity and color of hair (yes-no) (color)

CASE NO. _____

MOBILE IDENTIFICATION UNIT
HEADQUARTERS AMERICAN ZONE
AMERICAN GRAVES REGISTRATION SERVICE

PAGE 3

DATE _____ 19__

IDENTIFICATION CHECK LIST

HERNIA PLASTY _____
(yes - no: location)

LEGS 32 inches, hair - slight on legs
(inseam, muscular, ~~lock~~ ~~speed~~, bowed, normal, quantity, color & extent of hair)

FEET 10" by 3 3/4" TOES straight
(size, corns, callouses, flat) (~~slender~~-straight-crooked-overlap)

EVIDENCE OF HEALED FRACTURES _____
(nose, arms, legs, etc.)

HAS TOOTH CHART BEEN PREPARED no IF NOT EXPLAIN all
(yes - no)

teeth have fused into shell, no dentures found with body

REMARKS _____

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

Rank Service

Organization

MOBILE IDENTIFICATION UNIT
HEADQUARTERS AMERICAN ZONE
AMERICAN GRAVES REGISTRATION SERVICE

PROCESSING REPORT

Date _____ 19__

CASE NO. 7-211

UNKNOWN X 1-3

CEMETERY: _____

PLOT:

ROW:

GRAVE:

1. PHYSICAL PROCESSING _____

Findings _____

Remarks: _____

Sgd _____

2. FINGERPRINTING.

Findings _____

Remarks: _____

Sgd _____

3. FLUOROSCOPING.

Findings _____

Remarks: _____

Sgd _____

4. GENERAL REMARKS: _____

Sgd _____

TOOTH CHART

Date

 Last Name First Initial Rank Social No.

 Unit Organization

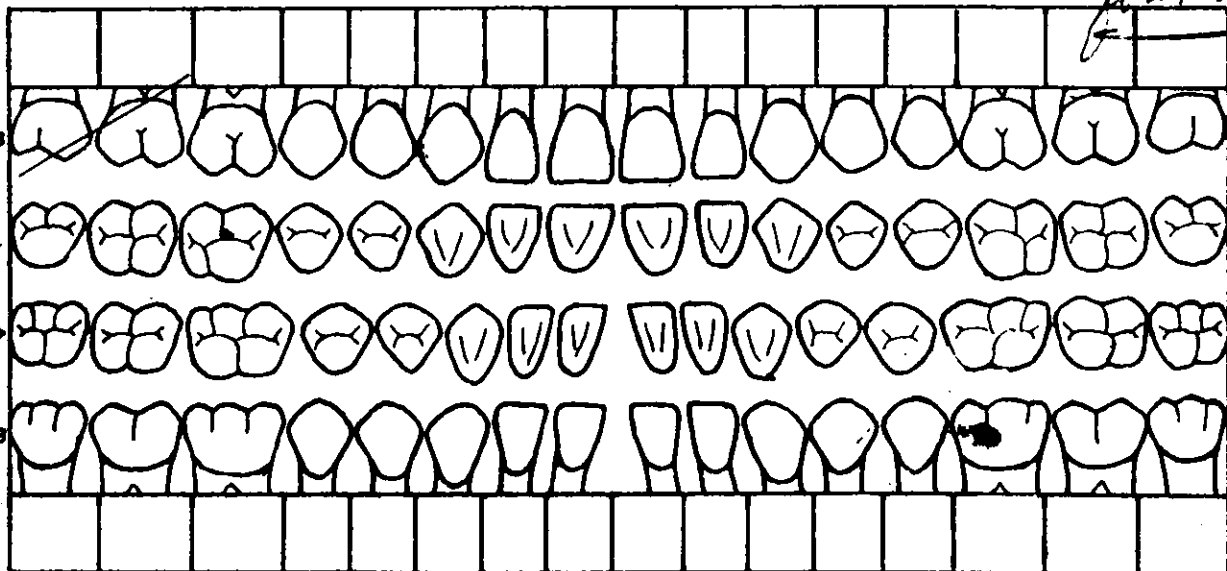
Place of Death Date of Death Cause of Death

Right

Left

all teeth rest of dentures - dentures

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

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.

*Lower & upper incisors & canines extracted
 Fairly Recently - BONE Ridges still present -
 Other teeth extracted some time ago as BONE
 MARGINS smooth*

Signature of Officer or other person who prepared Tooth chart

Verified by G. R. S. Officer

ANNEX #2

ADDITIONAL SPACE FOR FURTHER REMARKS

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"

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

CHECK LIST OF UNKNOWN

ANNEX # 1

SKELETAL REPORT

IV-087

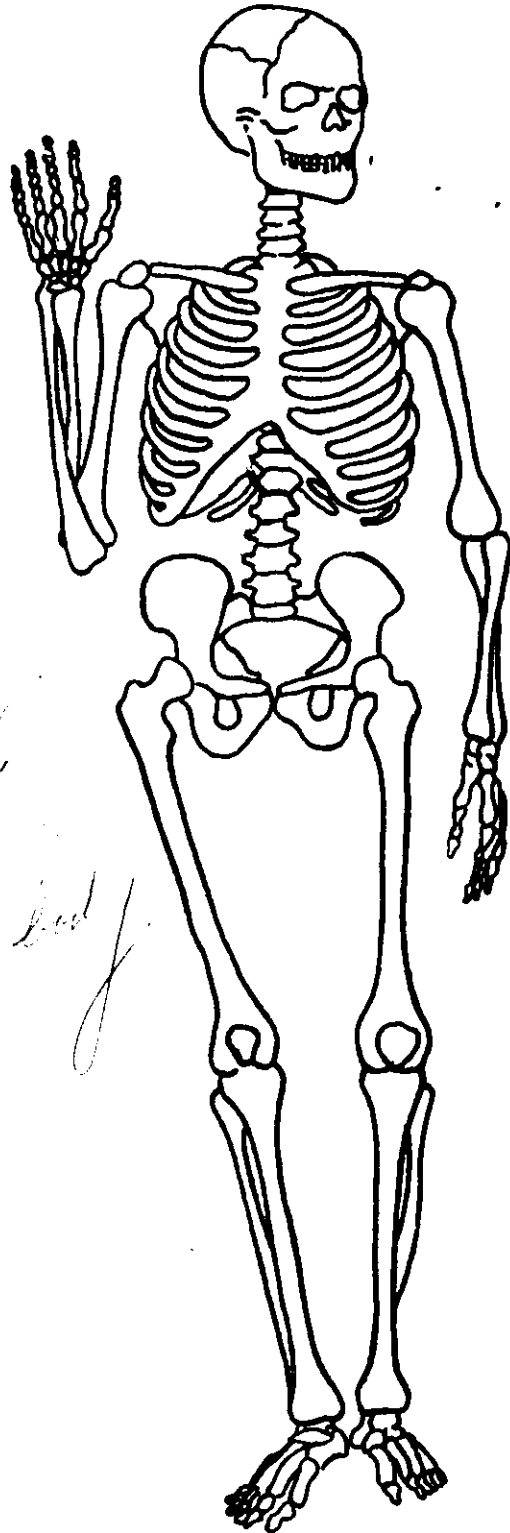
CRANIAL LENGTH			
CRANIAL BREADTH			
CRANIAL HEIGHT			
1. Basio-Bregmatic			
2. Auricular			
CRANIAL SUTURES			
SUTURE CONTOURS			
FACE HEIGHT (UPPER)			
FACE TOTAL			
FACE BREADTH			
NASAL HEIGHT			
NASAL BREADTH			
NASAL MARGIN (LOWER)			
ORBITAL HEIGHT			
ORBITAL BREADTH			
ORBITAL OPENING			
HUMERUS LENGTH			
FEMORAL LENGTH			

REMARKS

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

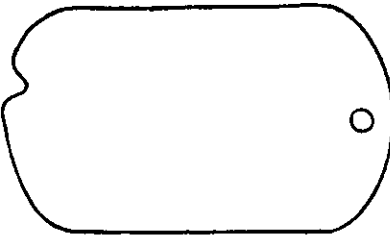
V-0-9



Handwritten notes on the left side of the chart:
- skull
- rib cage
- spine
- pelvis
- legs
- feet
- hands
- arms

CHART "A"

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)	REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)	DATE OF REPORT
---	---	----------------

Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.		
NAME (Last, first, middle initial) Unidentified	SERIAL NO. None		
	GRADE Unknown	ORGANIZATION U.S.M.M.	BRANCH OF SERVICE
	RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH At Sea, North Atlantic	CAUSE OF DEATH Drowning	DATE OF DEATH Approx, July 5, 1942
---	---------------------------------------	--

EMERGENCY ADDRESSEE (Name, relationship, and address)
On 293 2nd St. S.H. X-3 (Frederick) Long Island Rail Road
 (Unknown)

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none)	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) MARKING: Middle aged, tattoo on back of right hand (sailing ship), tattoo on left hand (indiscernable) Height 72 inches, 4 lower front teeth, no uppers, bald headed.
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

Forwarded to American Consulate for disposition.

Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

Possvogur 23.25-05.5 Reykjavik-Hafnarfjordur 1/25000

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
August 24, 1942	1400		Cross	31	1	11

WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>PLOT No.</th> <th>ROW No.</th> <th>GRAVE No.</th> </tr> </table>	PLOT No.	ROW No.	GRAVE No.
PLOT No.	ROW No.	GRAVE No.		

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY in bottle
IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) X	

BODY BURIED ON RECEIVED LEFT, NAME (Last, first, middle initial) Unidentified, Merchant Marine	RANK	SERIAL NO.	ORGANIZATION	GRAVE No. 12
BODY BURIED ON RECEIVED RIGHT, NAME (Last, first, middle initial) Ragnor H. Nystrom,	RANK Master	SERIAL NO.	ORGANIZATION Merchant Marine	GRAVE No. 10

SIGNATURE OF PERSON PREPARING REPORT
A TRUE COPY: ROY E. ABBEY JR.

SIGNATURE OF GRS OFFICER VERIFYING REPORT
ROY E. ABBEY, JR.

DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in the records prescribed by the War Department.

Section 3 UNIDENTIFIED REMAINS.

INSTRUCTIONS:

(a) Great care will be taken to record the most minute clues for the future identity of *unidentified remains*. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks.

(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.

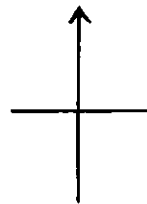
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
WEAPON AND SERIAL No.		LAUNDRY MARKS		WHERE BODY WAS BURIED OR FOUND

OTHER IDENTIFICATION CLUES

NOT OBTAINABLE

FILLINGS	<p>SILVER FILLING GOLD FILLING</p>	<p>UPPER</p> <p>LOWER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
CAVITIES	<p>CAVITY DECAYED</p>	
MISSING TEETH	<p>TOOTH MISSING</p>	
CROWNED TEETH	<p>PORCELAIN CROWN GOLD CROWN</p>	
BRIDGE WORK	<p>GOLD BRIDGE</p>	
FILLINGS	<p>SILVER FILLING GOLD FILLING</p>	

FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY



REMARKS:

OFFICE OF THE QUARTERMASTER
 Force Graves Registration Service
 Iceland Base Command

Consolidated Report: Plot - 31 Section C, Row #1 Fossvogur Cemetery, Iceland

Grave No.	Name	Rank	Serial Organization No.	Date of Death	U.S.A.R. No.	Age	Disposition	Effects	Effects if any	Emergency Address
1.	George E. Fellman	Seaman	None	6 July, 1942	U.S.A.R.	14 July, 1942	American Legation	None	1375 Ellis	San Francisco, Calif.
2.	Erik Meldole	Seaman	None	11 July, 1942	U.S.A.R.	16 July, 1942	American Legation	None	See Death	Unknown
3.	Harry V. Bjorkelund	Seaman	None	11 July, 1942	U.S.A.R.	16 July, 1942	American Legation	None	See Death	Unknown
4.	Herbert Hindle	Boatswain	None	28 July, 1942	U.S.V.V.	29 July, 1942	American Legation	None	For Discript. of Tatto	Unknown
5.	Robert H. McCommons	Chief Mate	None	5 July, 1942	U.S.A.R.	22 Aug. 1942	American Legation	Yes	Turned over to US Consul./mer.	Philadelphia, Pa.
6.	Aaston P. Perry	Deck Engineer	None	5 July, 1942	U.S.V.V.	22 Aug. 1942	American Legation	Yes	Turned Over to US Vice Consul	14 East 3rd Street Jacksonville, Florida
7.	James A. Curran	Seaman	None	5 July, 1942	U.S.V.V.	22 Aug. 1942	American Legation	Yes	Same as above	30 Washington St. Wilmington, Delaware
8.	Charles W. McCaskill	Seaman	None	5 July, 1942	U.S.V.V.	22 Aug. 1942	American Legation	Yes	Same as above	Charles McCaskill 35 Lerby Street Somerville, Mass.
9.	William F. Tacy	Seaman	None	5 July, 1942	U.S.A.R.	22 Aug. 1942	American Legation	Yes	Same as above	Mrs. Freda Tacy 4539 Samson Str Philadelphia, Pa.
10.	Ragnar E. Nystrom	Ship's Master	None	6 July, 1942	U.S.V.A.	24 Aug. 1942	American Legation	Turned over to US Vice Consul.	None	Mrs. Nellie E. Nystr- 1701 Knobhill, Seattle, Washington.
11.	Unidentified	Unknown	None	5 July, 1942	U.S.V.V.	24 Aug. 1942	American Legation	See Q/C Form No. 1	None	Unknown
12.	Unidentified	Unknown	None	5 July, 1942	U.S.A.V.	24 Aug. 1942	American Legation	See Q/C Form No. 1	None	Unknown
13.	James B. Moore	Chief Engineer	None	5 July, 1942	U.S.V.V.	4 Sept. 1942	American Legation	4 keys & drivers Lic.	None	Lagsboro, Delaware.

* See original photostat filed in 293 - Fellman, George E.

Form 100 (Rev. 1-21-42)

Standard Form

No. 1 CRS

~~CONFIDENTIAL~~
~~CLASSIFICATION REMOVED~~

(To be submitted through channels to the Adjutant General, Washington, D. C.)

Unidentified _____ None _____ Unknown _____ U. S. M. M. _____
Last Name) (First) (Initial) (Serial No.) (Rank) (Organization)

At Sea, North Atlantic _____ Approx. July 5, 1942 _____ Drowning _____
Place of Death (Date of Death) (Cause of Death)

1400 Hours, August 24, 1942 Fossvogur 23.25-05.5 Reykjavik-Hafnarfjordur 1/25000 sheet
Time & Date of Burial (Place of Burial - Name & No. of Cemetery, if any)

3/3 1000 Hours X-37 Fossvogur Iceland
Buried with body in bottle
11 1 31 Section C Cross Attached to marker X
Grave No.) (Row No.) (Plot No.) (Kind of Grave Marker) (Identification Tags)

GA true copy.

MARKING: Middle aged, tattoo on back of right hand (sailing ship), tattoo on left hand (indiscernable) Height 72 inches, 4 lower front teeth, no uppers, bald headed.

Other pertinent data to enable grave to be located. _____
(Where necessary sketch to locate grave should be furnished)

(Unknown) _____ (Unknown) _____
(Name and address of Emergency Addressee) (Name and address of legal next of kin)

Fingerprints (right hand) & right hand dressing furnish prints of left hand
 (Required when positive identity cannot otherwise be established) (Par. 25e (2))
 TMO-630

Place X mark below when prints are of left hand	<input type="checkbox"/>	List of personal effects and disposition of same			
		Thumb	1	2	3
		Not obtainable			

forwarded to American Consulate for disposition.

same, rank, serial number, organization, grave numbers of bodies buried on either
 side:
 Ragnor H. Nystrom, Master, Merchant Marine, Grave No. 10

In Left - Unidentified, Merchant Marine, Grave No. 12

ROBERT L. HOUGHALIN, 1st Lieut., G.O.
 Signature of Officer or person reporting. Verify Army G.R.S. Officer
 Prepare in triplicate - 1 copy to Army GRS Officer - 1 copy to Chief, GRS-Original to/
 burial.

CERTIFICATE OF DEATH

FROM: 138th Station Hospital, APO #860.

TO : To Whom it may Concern.

1. NAME: Unidentified Body. RANK &/OR RATE: Unknown
2. BORN: Unknown. DATE: Unknown
3. NATIONALITY: Unknown. RELIGION: Unknown

4. DESCRIPTION:
EYES, HAIR, COMPLEXION, HEIGHT, WEIGHT, MARKS, SCARS, ETC.
Tattoo on back of left and right hands. left hand had image of sailing ship on back of it.

Fingerprint (State which finger)
Not Obtainable.

5. RELATION, NAME AND ADDRESS OF NEXT OF KIN OR FRIEND: Unknown

6. NAME OF HOSPITAL: 138th Station Hospital. LENGTH OF STAY: August 19, 1942

7. DATE OF ADMISSION: Deadd on Arrival. ADMITTED FROM: August 19, 1942

8. DIED: At Sea. DATE: HOUR: (Place)

9. CAUSE OF DEATH:
PRINCIPAL: Drowning.
CONTRIBUTORY:

10. DEATH: THE RESULT OF GUN MISCONDUCT AND IN THE LINE OF DUTY

11. DISPOSITION OF REMAINS: Interred in Fossvogur Cemetery. August 24, 1942. Grave number 11, plot number 31.

12. SUMMARY OF FACTS RELATIVE TO THE DEATH:
Body washed ashore on August 19, 1942, and it was in a bad state of decomposition. Body had appearances of once being a middle aged man.

(Use reverse side for additional data)

DATE SIGNED: September 18, 1942.
PLACE SIGNED: 138th Station Hospital, APO # 860, New York, N.Y. c/o the postmaster.

SIGNED: Larry A. Smith.
LARRY A. SMITH (Name typed)
Major, Medical Corps, 138th Sta Hosp (Rank) (Organization)
REGISTRAR (Official Capacity)

70-FILE

Body No. 4.

One unidentified body received at 168th Sta. Hosp.
U. S. A. F.

Markings:

Middle aged

Tattoo on back of right hand - sailing ship

Tattoo on left hand - indiscernible

Height 72 inches

4 lower front teeth - no uppers. Indication
that plates were worn

Bald headed - no indication of hair.

FILE