

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 UNK. CASTELFIORENTINO, X-286

SUBJECT

not Platte

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
MEDITERRANEAN ZONE
9107 TSU - QMC

293 unk Italy - Castelfiorentino X 286

RB 293 CIL
UNKNOWN X-286
2K-86-4914
(Castelfiorentino), Italy

JLJ/alj/ec
18 January 1949

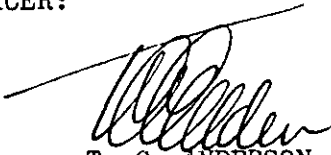
SUBJECT: Report of Reinterment

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

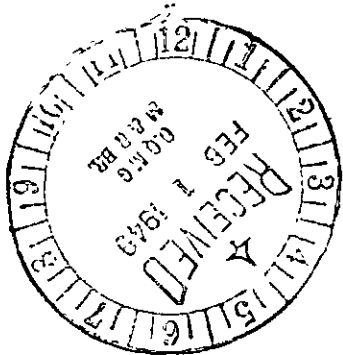
In accordance with paragraph 7 of letter, Office of The Quartermaster General, File QMGMP 293, subject Disinterment Discrepancies, dated 2 April 1948, Report of Reinterment for Unknown X-286, Plot 2K, Row 86, Grave 4914, U.S. Military Cemetery, Castelfiorentino, Italy, is submitted herewith.

FOR THE COMMANDING OFFICER:

1 Incl
QMC Fm 1042 (Unk. X-286)


T. C. ANDERSON
Major QMC
S-3

File
5-11-50
1220



1. FILE UNDER NO. 293 - Unk. Italy X-286 (Castelfiorentino)

SYNOPSIS

2. TYPE OF DOCUMENT: TELETYPE 3. DATE: 18 Jan 49
4. FROM: HQ AGRS ROME
5. TO: OQIG
6. SUBJECT: MC IN NO. - 78739

CAT# 5732 . REF DISINT OFFERS RECORD (QMC FORM 1253) FOR P 2 J ROW 94 GRAVES 4861 AND 4862 RECORDED AS COMMON GRAVE 35, AND 40, QUOTE 2 IN 1 UNQUOTE, RESPECTIVELY, USMC CASTELFIORENTINO.REPORTS OF INTERMENT FOLLOW. WATSON.

7. DOCUMENT FILED 293 - Unk. Italy X-284 (Castelfiorentino)
UNDER NO.

mfs

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.

Interred 16 MAY 1949

JEW 711

G 9 10 USMC FLORENCE

DISINTERMENT DIRECTIVE

Walter E. Thomas
Gen. UMP. Cemetery Superintendent

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

5217 04786

DATE

15 04 49
DAY MONTH YEAR

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
UNKNOWN	X-000286		0	0	6

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS
CASTELFIORENTINO ITALY	2K	86	4914	5201 80 CODE DIST CTR

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
FLORENCE, ITALY	(BY ADMINISTRATIVE DECISION)

SECTION C - DISINTERMENT AND IDENTIFICATION

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

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

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

REMAINS PREPARED AND PLACED IN CASKET

DATE	BY	EMBALMER (Signature)

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
	THOMAS P. PULLIAM, CAPT QMC

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

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

FILE
28 JUN 1949
IDENTIFICATION

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM LEGHORN PORT MORGUE		TO USMC FLORENCE	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER THOMAS P. PULLIAM, CAPT QMC	
SIGNATURE OF SHIPPER THOMAS P. PULLIAM, CAPT QMC	DATE 24 May 49	SIGNATURE OF RECEIVER <i>Jess H. Carnal</i> JESS H. CARNAL, 1ST LT QMC	DATE 24 May 49

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

To be used only when disinterment is made prior to receipt of OAG Form 1194 (Disinterment Directive) Remains Storage Point Location

AGRS - MZ BULK SHIT DISINTERMENT

Date 17 January 1949

No.

SECTION A: Information obtained from Zone Hq Record

NAME	SERIAL NO.	RANK	ARMY
UNKNOWN X-286	-	-	USAGF
CEMETERY			RACE
USMC, Castelfiorentino			
PLOT	IC	GRAVE	COUNTRY
2K	86	4914	Italy
			RELIGION
			Unk.

*SECTION C: DISINTERMENT AND IDENT. (Info obtained from Remains 2/er Grave marker)

NAME	SERIAL NO	RANK	DATE DISINTERRED
UNKNOWN X-286		GRAVE	16 Sept 48
IDENTIFICATION TAG ON	QMC FORM #1042	RELIGION	IDENTIFICATION VERIFIED BY
	with Remains		
Remains	Marker	(Yes or No)	
<input type="checkbox"/>	<input type="checkbox"/>		
		UNK	/s/ M G Borres /t/ M G BORRES 2 LT QMC Name & Title

SECTION D: PREPARATION OF REMAINS FOR STORAGE

NATURE OF BURIAL	CONDITION OF REMAINS
Shroud	Skeletal
OTHER MEANS OF IDENTIFICATION	
Burial Report from CG	
MINOR DISCREPANCIES	
None	
REMAINS PREPARED AND PLACED IN CASKET	
Date 27-Oct 48	By Homer J. Leslie (Embalmer)
CASKET SEALED BY	EMBALMER (Signature)
Homer J. Leslie (Embalmer)	/s/ Homer J Leslie
IDENTIFICATION PLATE PLACED ON CASKET	
Date 27 Oct 48	Name Robert L. Rooney
	Title Clerk Recorder

REMARKS Information transcribed from DOR X-285, Plot 2J, Row 94, Grave 4862, (formerly CG 40 2 in 1). (Auth: 2d Ind, AGRS/MZ, dtd 18 Jan 49, to Ltr, AGRS/MZ, Subj: Identification of Unknown Deceased, dtd 3 Sept 48).

[Signature]
LEWIS A. MOGAMIS, 1st Lt, QMC

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

FORGONE

/s/ Mack C Holt
/t/ MACK C. HOLT, 1st Lt, QMC
Signature of GRS Inspector
Grade and Organization

*Section "B" Omitted

CUSTODIAL TRANSFER

FROM
USMC CASTELFIORENTINO ITALY
CONVEYANCE^S
TRUCK
SHIPPER

/s/ N R HALEY
~~FE~~ N R HALEY 1 LT FA

TO
LEGHORN PORT MORGUE
CONVOYER
R L CROCKER 2 LT QMC

DATE

22 Sept 48

RECEIVER: /s/ Thomas P. Pulliam
/t/ THOMAS P. PULLIAM CAPT QMC

IDENTIFICATION DATA

BJ

1. REMAINS OF UNKNOWN X-286	2. DATE OF REPORT 18 October 1948
---------------------------------------	---

3. NAME OF CEMETERY U S Military Cemetery Castelfiorentino, Italy	4. PLOT 2K	5. ROW 86	6. GRAVE 4914	7. DATE OF	
				DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION			
8. ESTIMATED WEIGHT Impossible	9. ESTIMATED HEIGHT Impossible	10. COLOR OF HAIR Unk.	11. RACE Unk.

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

Non-Identifiable by reason of lack of sufficient identifying data.

T.C. ANDERSON, Major QMC

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

None

14. WAS BODY BURNED? <input type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT EXTENT? /
--	-----------------------------

15. WAS BODY MANGLED? <input type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT EXTENT?
---	-----------------

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

None

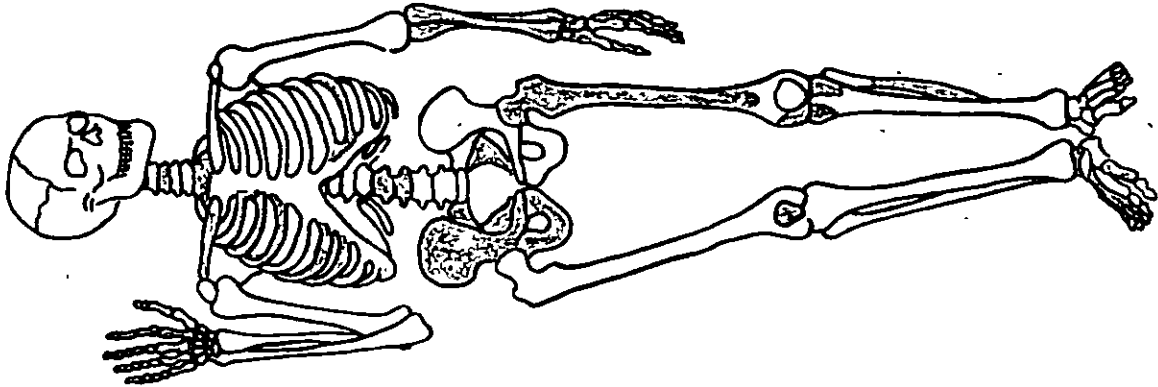
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

None

New

60138

19. BLACK-OUT PARTS OF BODY NOT RECORDED



Red shaded areas denote parts present.

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

In the opinion of the undersigned, the representative parts of a human remains graphically represented in par 19 are those of one and the same individual.

Alexander Tardy
Dr. ALEXANDER TARDY

M.D., D.A. (Anthropology), G.S.D., O.S.D.

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

MACK C. HOLT, 1st Lt. OMC
6013 9107 TSU-OMC, AGRS/MZ

SIGNATURE

Mack C Holt

HEADQUARTERS
9107 TSU - QMC
AMERICAN GRAVES REGISTRATION SERVICE
MEDITERRANEAN ZONE
APO 704 US ARMY

CENTRAL IDENTIFICATION POINT

REPORT OF INVESTIGATION

Paragraphs 1-17 and 19-21, Identification Data QMC 1044 and 1044b
Paragraph 18 - Identification Dental Chart

C.I.P. Case No. L-480

Date of Investigation 18 Oct 48

Unknown American X-286

Am. Mil. Cem. Castelfiorentino Italy: Plot 2K Row 86 Grave 4911

Place of Death Vic. M. Canala, Italy Date of Death Est. November 1944

Map Reference 966-967 Sheet 104 1 N.W. Map of Italy 1/25,000

Other American Dead Found in Same Area X-283; X-284; X-285.

Cause of Death Unk.

22. Description of Remains

Skeletal state.

(If the remains have not been decomposed, attach to this form

QMC Form 1042 completely filled out to physical characteristics).

23. Skeletal Data

HEAD Missing.

TOOTH CHART Impossible.

TRUNK Present are : R clavicle; 8 ribs; 2 cervical, 7 dorsal and 2 lumbar vertebrae; a small piece of the sacrum; and the R pelvis.

UPPER EXTREMITIES (Give measurements of long bones).

R Humerus	<u>Missing</u>	L Humerus	<u>Missing</u>
R Ulna	<u>Missing</u>	L Ulna	<u>30.8</u>
R Radius	<u>Missing</u>	L Radius	<u>28.5</u>
Carpels, Metacarpels, Phalanges <u>Partly present.</u>			

LOWER EXTREMITIES (Give measurements of long bones).

R Femur	<u>Missing</u>	L Femur	<u>Pieces of condyles missing.</u>
R Tibia	<u>Missing</u>	L Tibia	<u>Piece of head present</u>
R Fibula	<u>Missing</u>	L Fibula	<u>Head missing</u>
Calcanea, Tarsals, Patallae, Metatarsals, Phalanges <u>Partly present. L patella missing.</u>			

24. AGE ESTIMATED AT Between 20 and 28 years.
BASED ON Degree of closure of the epiphyses of the long bones
and clavicle.

25. SUMMARY OF FINDINGS:

Age estimation - Between 20 and 28 years.
Tooth chart - impossible.
Height estimation - impossible.

26. RECOMMENDATIONS:

PROCESSED BY :

Evert A. Johnson

EVERT A. JOHNSON
Pfc. 17173881
CIP Technician

Mack C. Holt
(Signature of Officer)

MACK C. HOLT
1st Lt QMC
CIP Officer

Alexander Tardy
Dr. ALEXANDER TARDY
M.D., D.A. (Anthropology), G.S.C., G.S.D.

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN : 2. DATE OF REPORT
 X-286 : 18 October 1948

3. NAME OF CEMETERY : 4. PLOT : 5. ROW : 6. GRAVE : 7. DATE OF
 US Military Cemetery : : : : DISIN- REIN-
 Castelfiorentino, Italy : 2K : 86 : 4913 : TERCENT TERCENT

PHYSICAL DESCRIPTION

8. ESTIMATED : 9. ESTIMATED : 10. COLOR OF HAIR : 11. RACE
 WEIGHT : HEIGHT : : :
 Impossible : Impossible : Unknown : Unknown

12. GIVE DESCRIPTION OF ANY OTHER IDENTIFICATION FOUND WITH REMAINS
 Non-Identifiable by reason of lack of sufficient identifying data.

T.C. Anderson
 T.C. ANDERSON
 Major OMC

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

None

14. WAS BODY BURIED? : TO WHAT EXTENT?

YES NO

15. WAS BODY BURIED? : TO WHAT EXTENT?

YES NO

16. DESCRIBE EVIDENCE OF WEILD FIRE OR OTHER WEAPON PENETRATIONS

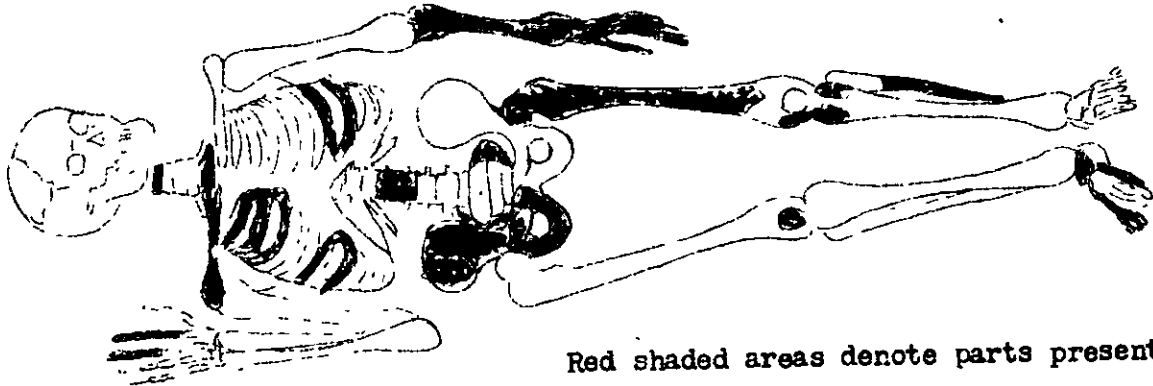
None

17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SEWING, 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).

None

SL 1 Feb 49
Subj: Remains, P.S.
Released Unidentifiable
 OOMG

19. BLACK OUT PARTS OF BODY NOT RECOVERED



20. I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF _____ (Number)
 DECEASED BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS.

(Signature of Medical Officer)

21. RESEARCHER'S OPINION

In the opinion of the undersigned,
 the representative parts of a human remains graphically
 represented in par 19 are those of one and the same
 individual.

Dr. Alexander Tardy /s/
 M.D., D.A. (Anthropology) G.S.D., O.S.D.

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

Typed Name, Grade, Arm or Service and Organization

SIGNATURE

MACK C. HOLT, 1st Lt. QMC, 9107 TSU-QMC, AGRS/MZ

s/ Mack C. HOLT

HEADQUARTERS
9107 TSU - QMC
AMERICAN GRAVES REGISTRATION SERVICE
MEDITERRANEAN ZONE
APO 794 US ARMY

CENTRAL IDENTIFICATION POINT

REPORT OF INVESTIGATION

Paragraphs 1-17 and 19-21, Identification Data QMC Form 1044 & 1044b
Paragraph 18 - Identification Dental Chart

C.I.P. Case No. L-480

Date of Investigation 18 Oct 48

Unknown American X- 286

Am. Mil. Cem. Castelfiorentino Italy: Plot 2J Row No. 94 Grave 4918

Place of Death Vic. M.Canala, Italy Date of Death Est. November 1944

Map Reference 966-967 Sheet 104 1 N.W. Map of Italy 1/25,000

Other American Dead Found in Same Area X-283; X-284; X-285.

Cause of Death Unknown

22. Description of Remains

Skeletal state

(If the remains have not decomposed, attach to this form QMC
Form 1042 completely filled out to physical characteristics.)

23. Skeletal Data

HEAD Missing

TOOTH CHEW Impossible

TRUNK Present are: R clavicle; 8 ribs; 2 cervical, 7 dorsal and 2 lumbar vertebrae; a small piece of the sacrum; and the R pelvis.

UPPER EXTREMITIES (Give measurements of long bones).

R Humerus Missing L Humerus Missing

R Ulna Missing L Ulna 30.8

R Radius Missing L Radius 28.5

Carpals, Metacarpals, Phalanges

Partly present

LOWER EXTREMITIES (Give measurements of long bones).

R Femur Missing L Femur Pieces of condyles missing

R Tibia Missing L Tibia Piece of head present

R Fibula Missing L Fibula Head missing

Calcanea, Tarsals, Patallac, Metatarsals, Phalanges

Partly present. L patella missing.

24. AGE ESTIMATED AT Between 20 and 28 years
BASED ON Degree of closure of the epiphyses of the long bones and clavicle.

25. SUMMARY OF FINDINGS:

Age estimation - Between 20 and 28 years
Tooth chart - Impossible
Height estimation - Impossible

26. RECOMMENDATIONS

PROCESSED BY:

s/ Evert A. Johnson
Pfc 17173881
CIP Technician

s/ Mack C. HOLT

(Signature of Officer)
t/ MACK C. HOLT
1st Lt QMC
CIP Officer

s/ Dr. Alexander Tardy
M.D., D.A. (Anthropology), G.S.D., O.S.D.

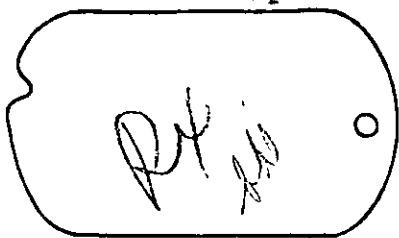
RESTRICTED

QMC Form 1042
(Rev 1 Apr 1940)
(Supersedes GRS Form 1, and
Rev. of 1 Apr 45, which may be used)

REPORT OF INTERMENT
(AR 30-1810 and AR 30-1815)

DATE OF REPORT
14 January 1949

Imprint Identification Tag If Possible
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN AMERICAN X-286		SERIAL No. Unk
GRADE Unk.	ORGANIZATION Unk	BRANCH OF SERVICE Unk.
RACE Colored	RELIGION Unk	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY U.S.A.

PLACE OF DEATH Vic Mt Canala, Italy	CAUSE OF DEATH Unk	DATE OF DEATH 1st Nov 44
--	-----------------------	-----------------------------

EMERGENCY ADDRESSEE (Name, relationship, and address)
Unk.

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)
--	--

WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) No	COMPLETED TOOTH CHART ON QMC FORM 1045 ATTACHED HERETO <input type="checkbox"/> YES <input type="checkbox"/> NO
---	--

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME
None

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY
U.S. Military Cemetery Castelfiorentino, Italy

DATE OF BURIAL 4 Oct. 46	HOUR 1500	BURIED IN (Shroud, blanket, or name of other) Wooden Casket	TYPE OF GRAVE MARKER Wooden cross	PLOT No 2-K	ROW No 86	GRAVE No 4914
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WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE Duplication of remains U.S. Military Cemetery Castelfiorentino, Italy	PLOT No 2J	ROW No 94	GRAVE No. 4862
--	---	---------------	--------------	-------------------

TYPE OF RELIGIOUS CEREMONY General	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY Copy of this report interred with remains
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) No	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) No	

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) Unknown X-284	RANK Unk	SERIAL No. Unk	ORGANIZATION Unk.	GRAVE No 4912
---	-------------	-------------------	----------------------	------------------

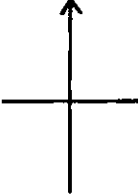
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) Vacant Grave	RANK --	SERIAL No --	ORGANIZATION --	GRAVE No. --
---	------------	-----------------	--------------------	-----------------

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT JOHN L. JACKS JR., QMC.- CAPT. GRC
--------------------------------------	---

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 theater as prescribed by theater commander.

RESTRICTED

60139

LEFT LITTLE FINGER	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.							
LEFT RING FINGER	HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR				
				BIRTHMARKS, SCARS, OR TATTOOS				
LEFT MIDDLE FINGER	WEAPON AND SERIAL No		LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND				
	OTHER IDENTIFICATION CLUES							
LEFT INDEX FINGER	<p align="center">FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY</p> <div style="text-align: right; margin-right: 50px;">  </div>							
LEFT THUMB								
RIGHT THUMB								
RIGHT INDEX FINGER								
RIGHT MIDDLE FINGER								
RIGHT RING FINGER								
RIGHT LITTLE FINGER								
REMARKS:								
					Remains segregated from Common Grave ⁴⁰ (2 in 1), U.S. Military Cemetery, Castelfiorentino, Italy			