

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 Unknown Florence (Isolated Italy)

SUBJECT

X-60789

QMC FORM 1121
1 Aug 45

293 Uncl. Italy X-60788
- Discontinued

COMM DIST OF AERY WASH DC

UNCLASSIFIED

COMMUNIA ROMA ITALY

ROUTINE

X

WCL-32195

FR 4820

DISPATCHED RR 5200 0006 AND 5200 0007 DESIGNATING TIME INTERVAL PLANNED FOR
UNIDENTIFIABLE OPERATIONS X 60788 AND X 60789 MONITOR OPERATIONS CIA WASH DISPATCHED
26 OCT 49 PD RPT COPY 1 OF DISPATCH BE FWD VIA AIR MAIL

X 293 Uncl. Italy X-60788
(with a large scribble at the bottom)

UNCLASSIFIED

ORAVB

hjr

COMMUNIA X-6006
293 X-60788

102000
JAN 60

D. A. KIMMER
CA. T. SAC, WASH DIV

Interred 18 Nov. 1949 *gwa* JEW

I 7 **DISAG ANZIO**

DISINTERMENT DIRECTIVE
WILLARD EDGERTON
Major QMC, Cemetery Superintendent

1

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
5200 00005

DATE
20 10 49
DAY MONTH YEAR

NAME
299
UNKNOWN X-60789

SERIAL NUMBER GRADE ARM RACE RELIGION
8 0 6

CEMETERY
MORQUE STORAGE LEGHORN ITALY

PLOT ROW GRAVE DISPOSITION OF REMAINS
5202 80
CODE DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
~~FLORENCE~~ ITALY (per OCMG msg WCL
NETTUNO 48670 19 Oct 49)

NAME AND ADDRESS OF NEXT OF KIN
(BY ADMINISTRATIVE DECISION)

293 unk. Italy X-60789 (Isolated Burial)

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER GRADE DATE OF DEATH DATE DISINTERRED

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

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

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

REMAINS PREPARED AND PLACED IN CASKET

DATE BY EMBALMER (Signature)

CASKET BOXED AND MARKED SHIPPING ADDRESS VERIFIED BY
[Signature] LEWIS A. MC AMIS
QMC

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 AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS
REMAINS UNIDENTIFIABLE
[Signature]

RECORD OF CUSTODIAL TRANSFER

FROM: RENTON (MILITARY) NUMBER		TO: USMC HETTINGO, ITALY	
KIND OF CONVEYANCE: TRUCK		NAME OF CONVOYER: AGRS COURIER	
SIGNATURE OF SHIPPER: <i>[Signature]</i>		SIGNATURE OF RECEIVER: <i>[Signature]</i>	
DATE: 17 NOV 49	DATE: 17 NOV 49		
1. SHIPPED			
FROM: RENTON (MILITARY) NUMBER		TO: USMC HETTINGO, ITALY	
KIND OF CONVEYANCE:		NAME OF CONVOYER:	
SIGNATURE OF SHIPPER:		SIGNATURE OF RECEIVER:	
DATE:	DATE:		
2. SHIPPED			
FROM:		TO:	
KIND OF CONVEYANCE:		NAME OF CONVOYER:	
SIGNATURE OF SHIPPER:		SIGNATURE OF RECEIVER:	
DATE:	DATE:		
3. SHIPPED			
FROM:		TO:	
KIND OF CONVEYANCE:		NAME OF CONVOYER:	
SIGNATURE OF SHIPPER:		SIGNATURE OF RECEIVER:	
DATE:	DATE:		
4. SHIPPED			
FROM:		TO:	
KIND OF CONVEYANCE:		NAME OF CONVOYER:	
SIGNATURE OF SHIPPER:		SIGNATURE OF RECEIVER:	
DATE:	DATE:		
5. SHIPPED			
FROM:		TO:	
KIND OF CONVEYANCE:		NAME OF CONVOYER:	
SIGNATURE OF SHIPPER:		SIGNATURE OF RECEIVER:	
DATE:	DATE:		
6. SHIPPED			
FROM:		TO:	
KIND OF CONVEYANCE:		NAME OF CONVOYER:	
SIGNATURE OF SHIPPER:		SIGNATURE OF RECEIVER:	
DATE:	DATE:		
7. SHIPPED			
FROM:		TO:	
KIND OF CONVEYANCE:		NAME OF CONVOYER:	
SIGNATURE OF SHIPPER:		SIGNATURE OF RECEIVER:	
DATE:	DATE:		
8. SHIPPED			
FROM:		TO:	
KIND OF CONVEYANCE:		NAME OF CONVOYER:	
SIGNATURE OF SHIPPER:		SIGNATURE OF RECEIVER:	
DATE:	DATE:		

To be used only when disinterment is made prior to receipt of OQMG Form 1194 (Disinterment Directive)

Remains Storage Point Location

AGRS - MZ WORK SHEET DISINTERMENT

Date 1 September 1949 No.

SECTION A: Information obtained from Zone Hq Record

NAME	SERIAL NO.	RANK	ARL
UNKNOWN AMERICAN X-60789	Unk.	Unk.	Unk.
CEMETERY			RACE
MORGUE STORAGE, LEGHORN, ITALY			
PLOT	ROW	GRAVE	COUNTRY
			RELIGION

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

NAME	SERIAL NO	RANK	DATE DISINTERRED
IDENTIFICATION TAG ON	QMG FORM #1042	RELIGION	IDENTIFICATION VERIFIED
	with remains		BY
Remains	Marker	(Yes or No)	
			Name & Title

SECTION D: PREPARATION OF REMAINS FOR STORAGE

NATURE OF BURIAL: Shroud

CONDITION OF REMAINS: Skeletal

OTHER MEANS OF IDENTIFICATION: None

MINOR DISCREPANCIES: None

REMAINS PREPARED AND PLACED IN CASKET

Date 14 September 1949 By LEWIS A. MC AMIS CAPT. QMG

CASKET SEALED BY LEWIS A. MC AMIS CAPT. QMG EMBALMER (Signature)

IDENTIFICATION PLATE PLACED ON CASKET

Date 14 September 1949 Name Ward B. Baker, CAC Title Recorder

REMARKS: None

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

H. L. Duncan

Signature of GRS Inspector
Grade and Organization
H. L. DUNCAN
MAJOR QMG

*Section "B" Omitted

993 Mark Italy X-60788
Sighard Mergue

993 Mark-Italy X-60788 (Sighard Mergue)

OFFICE OF THE ADJUTANT GENERAL
COAST GUARD BOAT ITALY

UNCLASSIFIED

PRIORITY

X

NOTE: GIVE TO THE COAST GUARD BOAT ITALY AND TO THE COAST GUARD BOAT ITALY
WHICH CAN BE USED FOR OTHER PURPOSES AS WELL AS FOR OTHER PURPOSES

Hackmkv
McDermott
RKB

UNCLASSIFIED

JOINT CHIEF OF STAFF
293 GNS VE

3014152
MAY 48

U.S. GOVERNMENT
1948

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

GR 293
UNKNOWN X-60789
Morgue Storage

TCA/WW/iv
14 September 1949


SUBJECT: Unidentifiable Deceased

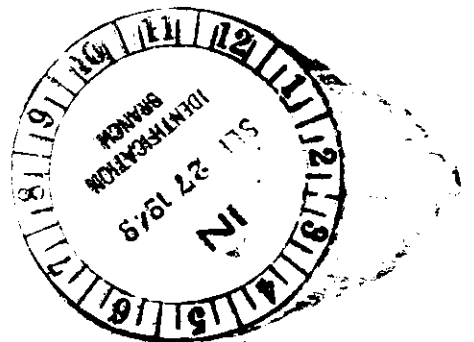
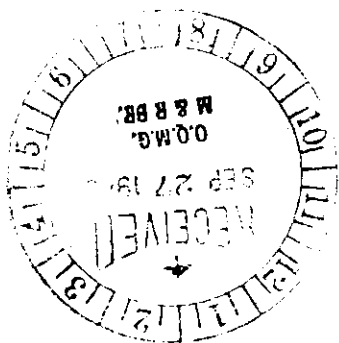
TO : The Quartermaster General
Washington 25, D. C.
Attn: Memorial Division

1. Transmitted herewith is a CIL Report with Certificate of Unidentifiability for remains of Unknown X-60789, Morgue Storage, Leghorn, Italy.
2. Subject remains were recovered during an investigation on 14 July 1949 for the remains of Pvt Walter R. Mundziak, 33146700. Copy of report is inclosed. 293
3. Based on the report of investigation it is considered that these remains are those of an American casualty. However, they are not considered as being the remains of Pvt Mundziak.
4. Report of Board Proceedings recommending remains of Pvt Mundziak be declared non-recoverable was dispatched on 12 September 1949.

FOR THE COMMANDING OFFICER:

Incls
1. CIL Report
2. Rpt. Investigation


T. C. ANDERSON
Major QMC
S-3



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

RE 293 CIL
UNKS. X-60788 and X-60789
Morgue Storage
Leghorn, Italy

JLJ/alj/rm
8 September 1949

SUBJECT: Transmittal of Reports of Interment.

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

QMC Forms 1042 and QMC Forms 1044, together with allied papers
for Unknowns X-60788 and X-60789, Morgue Storage, Leghorn, Italy, are
transmitted herewith.

FOR THE COMMANDING OFFICER:

6 Incls: T. C. ANDERSON
142 - QMC Fms 1042 Major QMC
(X-60788 & X-60789) S-3
344 - QMC Fms 1044
(X-60788 & X-60789)
5 - S/R Rpt dtd 10 Aug. 1949
6 - S/R Rpt (Pvt Mundsisk) dtd 14 July 1949

X 293 CIL
X 60788 & X 60789
Leghorn, Italy
Leghorn

18

CIL report for remains recovered 13 July 1949 near the top of the southern slope of Djebel Bergoukr; Grid Coord: 43.0-54.4, Tunisia, Map 18.

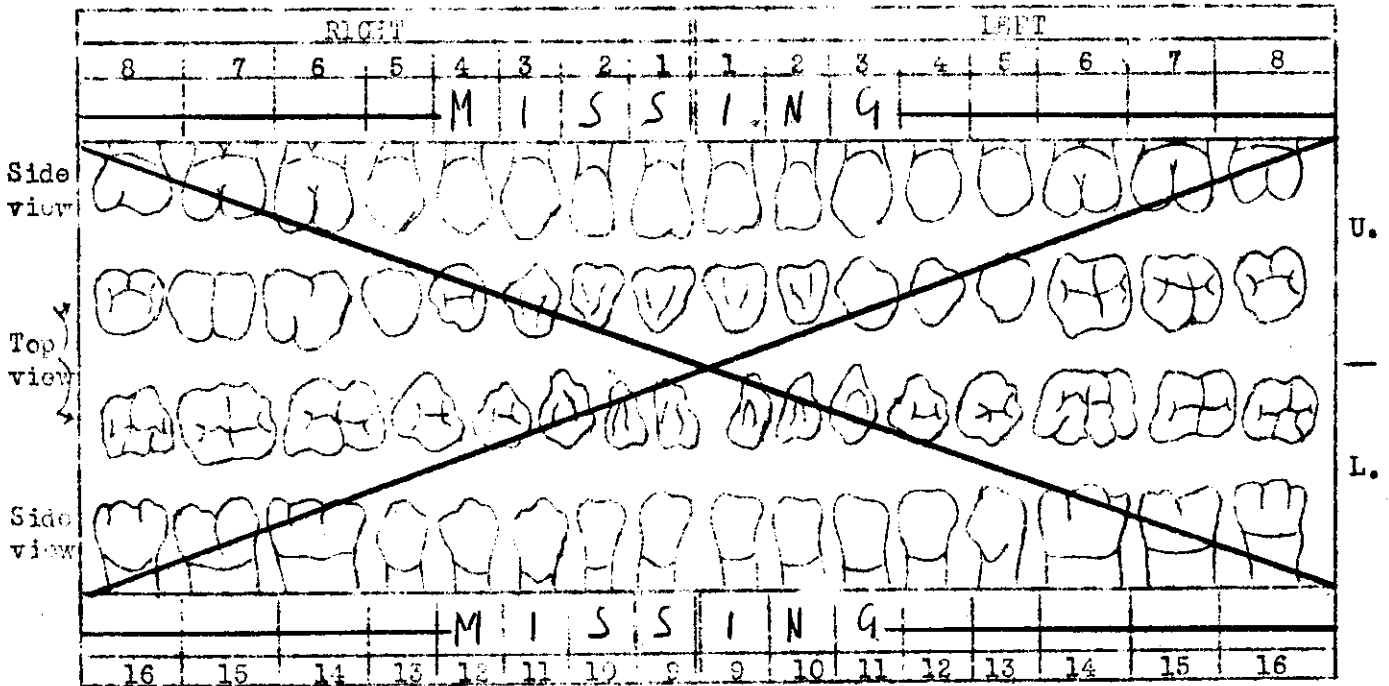
IDENTIFICATION DATA				
1. REMAINS OF UNKNOWN		2. DATE OF REPORT		
X-60789		24 August 1949		
3. NAME OF CEMETERY	4. LOCATION	5. ROW	6. GRAVE	7. DATE OF
:	:	:	:	DISIN-
:	:	:	:	TERMENT
:	:	:	:	REIN-
:	:	:	:	TERMENT
PHYSICAL DESCRIPTION				
8. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR OF HAIR	11. RACE	
Impossible	Impossible	No hair present	Determination impossible.	
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS. "Non identifiable by reason of lack of sufficient identifying data"				
None		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?		TO WHAT EXTENT?		
YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	:		
15. WAS BODY MANGLED?		TO WHAT EXTENT?		
YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	:		
16. DESCRIBE EVIDENCE OF WOUNDS, FRACTURE AND BONE LESIONS OR OTHER OPERATIONS				
None				
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING FIB 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).				
Two thin pieces of leather, probably from a shoe; a piece of leather shoe lace. (It is impossible to determine if these items are American or not)				

TH 14 Sep 49
Subj. Unit. Dissect
238 Sep 49
 Received from *QMC*
 Not identifiable information provided
Amund
 Available

INCL #1

18.

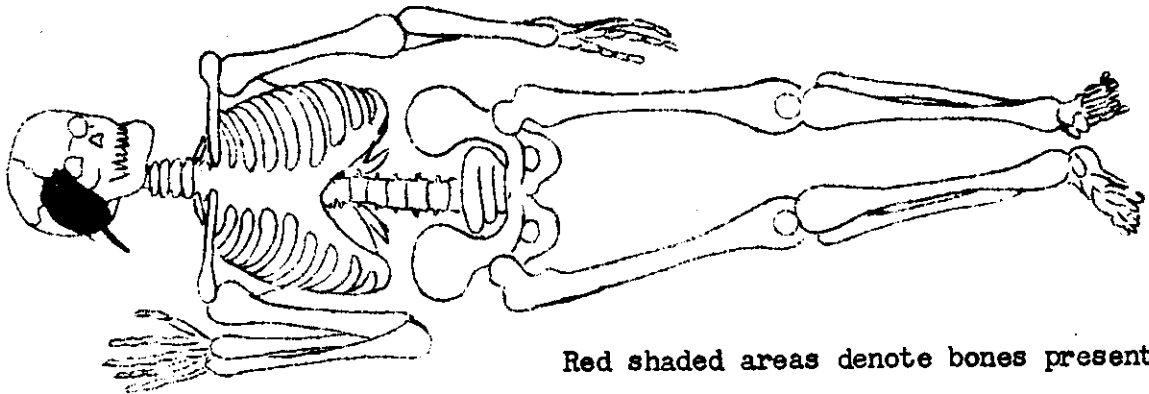
TOOTH CHART



Dentures (Plates):

Remains recovered 13 July 49 Djebel Berrboukr.

19. BLACK OUT PARTS OF BODY NOT RECOVERED



Red shaded areas denote bones present.

20. MASS BURIAL CERTIFICATION (if applicable)
(Wherein segregation in whole or parts is impossible)

I certify that the Group remains consist of parts of _____ (Number)
decedents based on the presence of one or more of the following anatomical
parts.

(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.

s/t/ Dr. ALEXANDER TARDY
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

s/t/ LEWIS A. MC AMIS, CAPT OMC, 9107 TSU-OMC, AGRS/MZ

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

GENERAL IDENTIFICATION POINT

REPORT OF INVESTIGATION

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

Search & Recovery from Djebel Berboukr

C.I.P. Case No. _____

Date of Investigation 24 Aug 49

Unknown American X-60789

Am. Mil. Cem. _____ Italy: Plot ___ Row No. ___ Grave _____

Place of Death _____ Date of Death _____

Map Reference _____ Sheet _____ Map of Italy _____

Other American Dead Found in Same Area _____

Cause of Death _____

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).

Missing

Olecranon, Carpals, Metacarpals, Phalanges

Missing

L Tibula

Missing

R Tibula

Missing

L Tibia

Missing

R Tibia

Missing

L Femur

Missing

R Femur

LOWER EXTREMITIES (also measurements of long bones).

Carpals, Metacarpals, Phalanges

Missing

Missing

L Radius

Missing

R Radius

Missing

L Ulna

Missing

R Ulna

Missing

L Humerus

Missing

R Humerus

UPPER EXTREMITIES (also measurements of long bones).

Missing

TRUNK

Impossible

POOR CHANCE

HEAD Only 7 fragments of skull present.

Skeletal Data

24. AGE ESTIMATED AT About 23 years.
BASED ON Degree of closure of skull sutures.

25. SUMMARY OF FINDINGS: Tooth chart - Impossible
Age estimate * About 23 years.
Height estimate - Impossible.
Weight estimate - Impossible.

26. RECOMMENDATIONS
////////////////////

PROCESSED BY:

s/t/ Dr. ALEXANDER TARDY
M.D., D.A. (Anthropology),
G.S.D., O.S.D.

S.T./ LEWIS A. MC AMIS

(Signature of Officer)

CAPT OMC
OIC CIL

CIT report for remains covered 13 July 1949 near the top of the southern slope of Djebel Berbouki, Grid Coord: 43.0-54.4, Tunisia, Map #18. Search & Recovery

IDENTIFICATION DATA						
1. REMAINS OF UNKNOWN	X-60789			2. DATE OF REPORT	24 August 1949	
3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISCOVERY	REMARKS	
:	:	:	:	:	INTERMENT INTERMENT	
:	:	:	:	:		
:	:	:	:	:		
:	:	:	:	:		

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR OF HAIR	11. RACE
Impossible	Impossible	No hair present	Determination impossible.

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

None

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

None

14. WAS BODY BURNED? TO WHAT EXTENT?

YES NO

15. WAS BODY FRAGMENTED? TO WHAT EXTENT?

YES NO

16. DESCRIBE EVIDENCE OF BURNED FRACTURES AND BONE CALCIFICATIONS

None

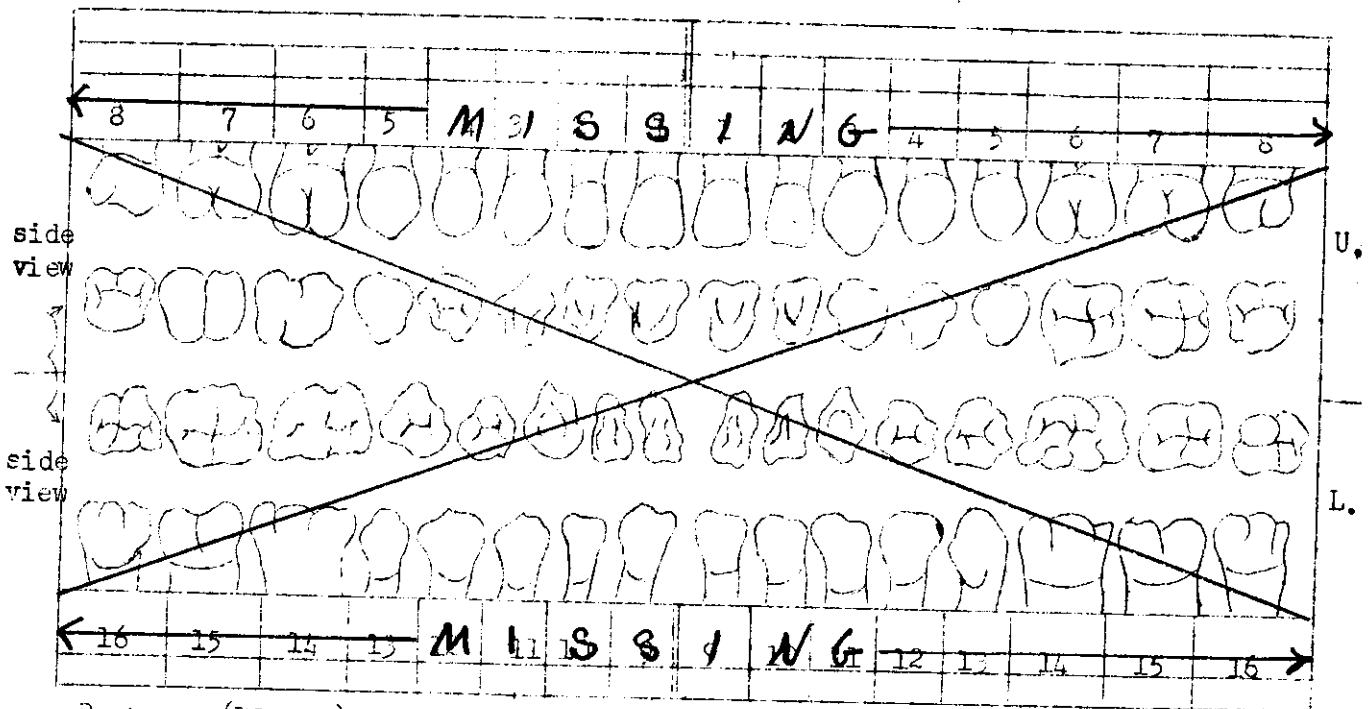
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERIAL NO., ETC. (If laundry marks are indistinct such notation should be used and specimen forwarded through channels for examination when facilities are not available in the area).

Two thin pieces of leather, probably from a shoe; a piece of leather shoe lace.
 (It is impossible to determine if these items are American or not)

DAF FORM 1044 PREVIOUS EDITIONS OF THIS REV 15 MAR 47 FORM ARE OBSOLETE

18.

TOOTH CHART

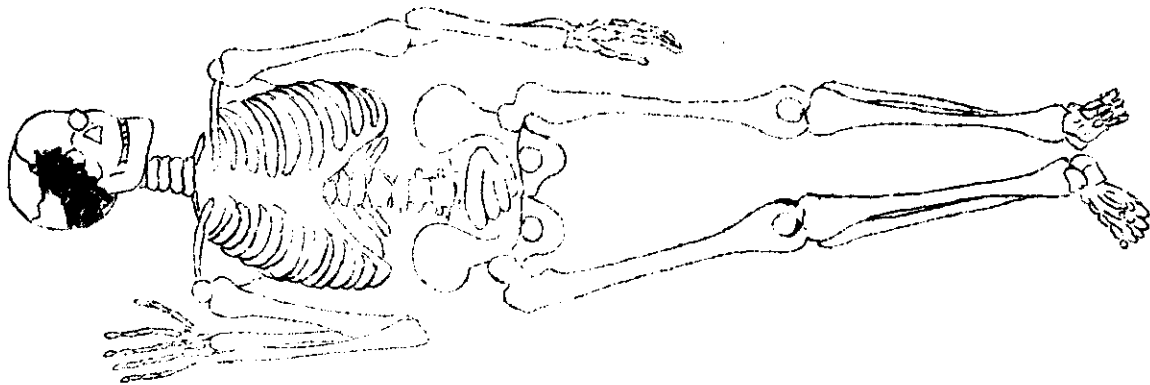


Dentures (Plates):

QMC Form 1044a
18 March 1947

Remains recovered 13 July 49 Djebel Berboukr.

19. Black out parts of body not recovered



Red shaded areas denote bones 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 _____
(Number)
decedents based on the presence of one or more of the following anatomical
parts.

(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. (Antropology), G.S.D., O.S.O.

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

Lewis A. McAllis
LEWIS A. MC ALLIS, CAPT QMC, 9107 TSU-QMC, AGRS/MZ

HEADQUARTERS
9107 TCU - CMC
AMERICAN Graves REGISTRATION SERVICE
MEDITERRANEAN ZONE
APO 794 US ARMY

CENTRAL IDENTIFICATION POINT

REPORT OF INVESTIGATION

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

Search & Recovery from Djebel Berboukr

C.I.P. Case No. _____

Unknown American X- 60789

Date of Investigation 24 Aug 49

Am. Mil. Cem. _____ Italy: Plot _____ Row No. _____ Grave _____

Place of Death _____ Date of Death _____

Map Reference _____ Sheet _____ Map of Italy _____

Other American Dead Found in Same Area _____

Cause of Death _____

22. Description of Remains

Skeletal state.

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

AGRS-17 Form 293-15 dtd 28-11-47

60789

HEAD Only 7 fragments of skull present.

TOOTH CHART Impossible.

TRUNK Missing.

UPPER EXTREMITIES (Give measurements of long bones).

R Humerus Missing

L Ulna Missing

R Radius Missing

Carpels, Metacarpels, Phalanges Missing

LOWER EXTREMITIES. (Give measurements of long bones).

R Femur Missing

R Tibia Missing

R Fibula Missing

Calcanea, Tarsals, Patellae, Metatarsals, Phalanges Missing.

24. AGE ESTIMATED AT About 23 years.

BASED ON Degree of closure of skull sutures.

25. SUMMARY OF FINDINGS:

Tooth chart - Impossible
Age estimate - About 23 years.
Height estimate - Impossible.
Weight estimate - Impossible.

26. RECOMMENDATIONS:

////////////////

PROCESSED BY :

Alexander Tarby - 3 -
Dr. ALEXANDER TARBY
M.D., D.A. (Anthropology), G.S.D., O.S.D.

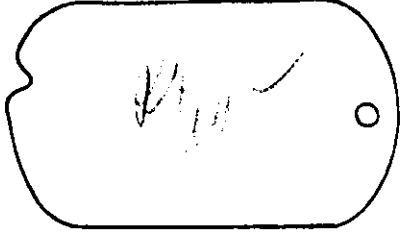
[Signature]

(Signature of Officer)

LEWIS A. MC AMIS
CAPT QMC
OIC CIL

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 1 September 1949
---	---	------------------------------------

<i>Imprint Identification Tag If Possible. DO NOT TYPE</i> 	Section 1.—IDENTIFICATION. NAME (Last, first, middle initial) UNKNOWN AMERICAN X-60789		SERIAL NO. Unk.
	GRADE Unk.	ORGANIZATION Unk.	BRANCH OF SERVICE Unk.
	RACE Unk.	RELIGION Unk.	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY USA
	PLACE OF DEATH Djebel Berboukr, Tunisia	CAUSE OF DEATH Unk.	DATE OF DEATH Unk.

EMERGENCY ADDRESSEE (Name, relationship, and address)
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)
--	--

WERE SUBSTITUTE TAGS PROVIDED?(Yes or 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

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY
MORGUE STORAGE, LEGHORN, ITALY

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
----------------	------	---	----------------------	----------	---------	-----------

WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE 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
----------------------------	--------------------------------	---

IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)
---	---

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.
--	------	------------	--------------	-----------

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

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

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

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.

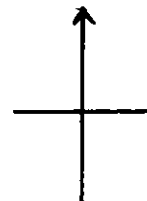
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth 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

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



REMARKS:

Remains recovered 13 July 1949 near the top of the southern slope of Djebel Berboukr, Grid Coord: 43.0-54.4, Tunisia, Map #18

LEFT
LITTLE FINGER

LEFT
RING FINGER

LEFT
MIDDLE FINGER

LEFT
INDEX FINGER

LEFT
THUMB

RIGHT
THUMB

RIGHT
INDEX FINGER

RIGHT
MIDDLE FINGER

RIGHT
RING FINGER

RIGHT
LITTLE FINGER

