

15

Att. to
gr. ltr
8/15/49

(Basic ltr Dept of the Army, OQMG, QMGMT 293 Unknown X-1139 (St.Avoid) France, dated 15 August 1949, subject: Identification of World War II Deceased)

RRE 200.2 - Unknown X-1139 1st Ind
(St.Avoid) *France*

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

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

1. Reference is made to basic communication.
2. Inclosed herewith for your information is a copy of Check List of Unknowns for Unknown X-1139, Plot W, Row 1, Grave 10, USMC St.Avoid, France.
3. Records this office do not indicate to which organization Tank Number 050878-4-3015 was assigned.

FOR THE COMMANDING GENERAL:

C.W. Stinski

C.W. STINSIEK
Capt OMC
Actg Asst Adj Gen

1 Incl:
Check List for X-1139
(St.Avoid)

293 Tank
France
X-1139 (St.Avoid)



File
in Bunker
Id 131
18 OCT 49.

AUG 24 1949

A.C.R.C.



OUT

RECEIVED
 AUG 30 1949
 O.Q.M.G.
 M & R BR.

IN
 AUG 31 1949
 IDENTIFICATION
 BRANCH

OUT
 OCT 18 1949
 IDENTIFICATION
 BRANCH

AIRMAIL

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

IN REPLY REFER TO QMGMT 293

Unknown X-1139
(St. Avold) France

15 August 1949

SUBJECT: Identification of World War II Deceased

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

1. Reference is made to Unidentifiable Certificate for Unknown X-1139, Plot WW, Row 1, Grave 10, St. Avold, France.

2. In view of the fact that there is no record in this Office of Reprocessing report for X-1139, it is requested that, if this action has been taken, a copy of same be forwarded this Office as Certificate of Unidentifiability cannot be approved without reprocessing.

3. Information as to the identity of the organization to which Tank Number 050878-4-3015 was assigned, together with a list of the crew members, is also requested.

FOR THE ACTING THE QUARTERMASTER GENERAL:


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

AIRMAIL

VIBWV

POST OFFICE
WASHINGTON, D. C.
22 AUG. 1949
IN

AUG 17 1 30 PM '49
O. D. H. G.
MAILS REC'D BRANCH

RECEIVED
THE DIRECTOR
FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D. C.

TO : SAC, NEW YORK

FROM : SAC, PHOENIX (100-100000) (P)
SUBJECT: [Illegible]

RE: [Illegible] (100-100000) (P)
[Illegible] (100-100000) (P)
[Illegible] (100-100000) (P)

PHOENIX (100-100000) (P)
[Illegible] (100-100000) (P)

RE: [Illegible]
[Illegible]
[Illegible]
[Illegible]

PHOENIX (100-100000) (P)

(100-100000) (P)
[Illegible]

[Illegible]

[Illegible]

VIBWV

AIRMAIL

QUART 293
Unknown X-1139
(St. Avoild) France

15 August 1949

SUBJECT: Identification of World War II Decanted

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

1. Reference is made to Unidentifiable Certificate for Unknown X-1139, Plot WW, Row 1, Grave 10, St. Avoild, France.

2. In view of the fact that there is no record in this Office of Reprocessing report for X-1139, it is requested that, if this action has been taken, a copy of same be forwarded this Office as Certificate of Unidentifiability cannot be approved without reprocessing.

3. Information as to the identity of the organization to which Tank Number 050678-4-3015 was assigned, together with a list of the crew members, is also requested.

FOR THE ACTING THE QUARTERMASTER GENERAL:

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

cc Admin Section

Binkerd:vat
Clements
HMB

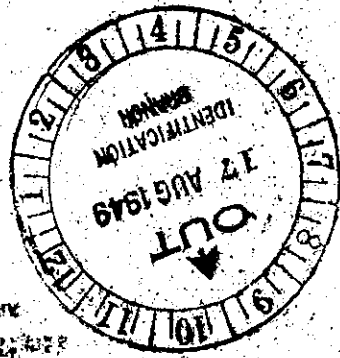


AIRMAIL

AUG 17 1 38 PM '49
MAIL ROOM
O. O. H. G.
BREGG'S BRANCH
Mac

HMB
HMB

L I A M P I A



17 AUG 1949
1 10 00 AM

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L I A M P I A

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

16 June 1949

293-UNK-France X-1139 (St. Avold) ^{Date}

SUBJECT: Unidentifiable Remains *all*

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

1. The records pertaining to Unknown X- 1139, Plot WW,
Row 1, Grave 10, USMC St Avold, France have been
reviewed and it is the opinion of this office that insufficient evidence
is available to establish the identity of this deceased, and that these
remains should be classified as unidentifiable.

2. Report of Reprocessing was forwarded to your office by
letter of transmittal No. Not of, dated record. No
further information is available.

FOR THE COMMANDING GENERAL:

/s/
/t/

Case reviewed by undersigned Members of the Board of Review:

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

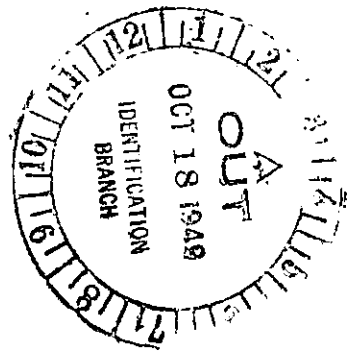
Capt. E. F. PRICE, JR., O-1588236

1/Lt. EDWARD E. STOUT, O-1594512

Received 18 Oct 49
Not identifiable from
information presently
available

OQMG

*File Binland
M
Lt Br
18 OCT 49*



HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

RRE 293

16 June 1949
(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X - 1139, Plot WW
Row 1, Grave 10, USMC S.T AVOLD, France,
have been reviewed and it is the opinion of this Office that sufficient
evidence is not available at the present time to establish the identity
of the deceased concerned. The remains concerned should be classified as
unidentifiable at the present time.

2. Report of Reprocessing of remains was forwarded to your
Office by Transmittal Letter No. Not of, dated Record.

3. Remarks:

Case reviewed by undersigned Members of the Board of Review:

Col. H.P. HENRY, O-12589

QMC

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

QMC

Major R. BERGER, O-251736

ORD

Capt. Jack C. HAYES, O-1577297

QMC

Capt. E.F. PRICE, Jr. O-1388236

QMC

1/Lt. Edward E. STOUT, O-1594512

CE

Received 18 Oct 49 **QOMG**
Not identifiable from
information presently
available

*File Buried
M. Id. 132
18 Oct 49*

Inc 1#16

CRJ

This Grave formerly occupied by: UNKNOWN 13011

USMC ST AVOLD, FRANCE DISINTERMENT DIRECTIVE
Plot D, Row 36, Grave 29 Date disinterred: 21 July 49
Date reburied: 21 Jul 49

SECTION A - DIRECTIVE NUMBER 3574 00000
NAME AND BURIAL LOCATION OF DECEASED CAPT QMC DATE 15 01 48
DAY MONTH YEAR

NAME 296 - Unk - France SERIAL NUMBER UNKNOWN X-001139 RANK (Standard) ARM Q
CEMETERY ST AVOLD - METZ DATE OF DEATH DAY MONTH YEAR
DISPOSITION OF REMAINS 3503 80
CODE DIST. PT. 6
CAUSE OF DEATH 6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE ST. AVOLD, FRANCE
(BY ADMINISTRATIVE ORDER)
NAME AND ADDRESS OF NEXT OF KIN

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME UNKNOWN X-001139 SERIAL NUMBER RANK Unk DATE OF DEATH Unk DATE DISTINTERRED 30 Apr 48
IDENTIFICATION TAG ON REMAINS ORGANIZATION UNKNOWN RELIGION Unk IDENTIFICATION VERIFIED BY Forrest L Brown, Embalmer
 MARKER GRS NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Mattress cover CONDITION OF REMAINS Pelvic girdle fractured. Right and left tibia and fibula fractured. Rest of body missing except left femur. Disarticulated.
OTHER MEANS OF IDENTIFICATION Report of Burial found with remains

MINOR DISCREPANCIES

None

REMAINS PREPARED AND PLACED IN CASKET

DATE 6 May 48 BY Forrest L Brown, Embalmer

CASKET SEALED BY Forrest L Brown, Embalmer EMBALMER (Signature) Forrest L Brown, Embalmer

CASKET BOXED AND MARKED All markings, tags and plates verified by James C Anderson, 1st Lt Inf
DATE 6 May 48 BY Forrest L Brown, Embalmer

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

James C Anderson, 1st Lt Inf, Hq & Hq Det 531 QM GP
SIGNATURE OF GRS INSPECTOR NAT

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

FILE RECORDS ANNOTATED
DATE 26 Aug 79
NAME Bell
R & R BRG

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

| | | | |
|----------------------|------|-----------------------|------|
| FROM | | TO | |
| KIND OF CONVEYANCE | | NAME OF CONVOYER | |
| SIGNATURE OF SHIPPER | DATE | SIGNATURE OF RECEIVER | DATE |

2. SHIPPED

| | | | |
|----------------------|------|-----------------------|------|
| FROM | | TO | |
| KIND OF CONVEYANCE | | NAME OF CONVOYER | |
| SIGNATURE OF SHIPPER | DATE | SIGNATURE OF RECEIVER | DATE |

3. SHIPPED

| | | | |
|----------------------|------|-----------------------|------|
| FROM | | TO | |
| KIND OF CONVEYANCE | | NAME OF CONVOYER | |
| SIGNATURE OF SHIPPER | DATE | SIGNATURE OF RECEIVER | DATE |

4. SHIPPED

| | | | |
|----------------------|------|-----------------------|------|
| FROM | | TO | |
| KIND OF CONVEYANCE | | NAME OF CONVOYER | |
| SIGNATURE OF SHIPPER | DATE | SIGNATURE OF RECEIVER | DATE |

5. SHIPPED

| | | | |
|---|------|-----------------------|------|
| FROM | | TO | |
| KIND OF CONVEYANCE (BY ADMINISTRATIVE ORDER) | | NAME OF CONVOYER | |
| SIGNATURE OF SHIPPER E. J. VAUGHN | 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 |

OMCYG 293
Unknown X-33
(Niederbronn) France

15 August 1946

White
293 France (St. Avold) X-1139

SUBJECT: Exhumation of Remains

TO: Commanding General
American Graves Registration Command
European Theater Area, Versailles, France
APO 887, c/o Postmaster, New York, New York

1. Reference is made to Report of Reburial submitted to this office for Unknown X-33, USMC, Niederbronn, France, Plot E, Row 1, Grave 586.

2. It is noted that the remains were recovered from the vicinity of Oberhoffen, France and that an Identification Tag bearing the name of "David A. Williams, 37 730 313 - T44-Q-P" was found nearby.

3. In view of the fact that a Report of Burial has been received for David A. Williams, 37 730 313, USMC, Epinal, France, Plot 2N, Row 3, Grave 5652, plus the fact that these remains were also received from the vicinity of Oberhoffen, France and the fingerprints of the left hand have been verified as those of Williams, it is requested that the remains in both graves be exhumed in the presence of a medical officer to determine if the remains found constitute one or two bodies.

4. If it is determined that there is but one body, the remains from both graves should be reinterred into a common grave, i.e. 5652 Epinal, because of the fact that the widow of Williams has been so advised.

5. Information as to the identity of the organization to which Tank No. 050878-4-3015 was assigned, together with a list of the crew members, is also requested.

6. A report of your findings should be forwarded at the earliest practicable date.

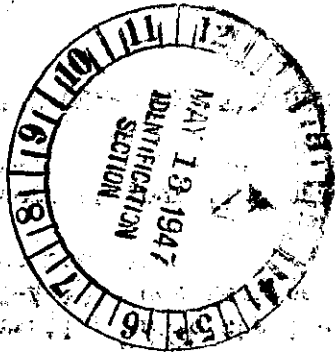
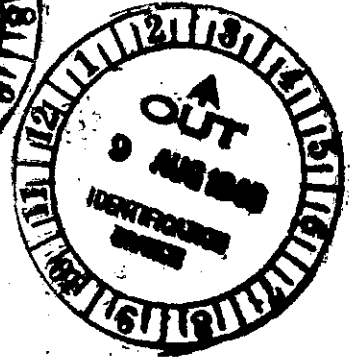
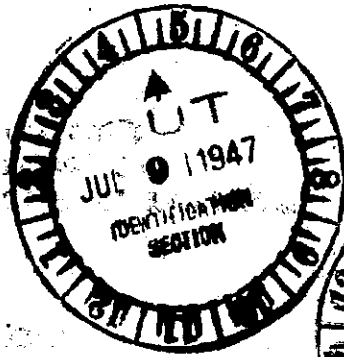
FOR THE QUARTERMASTER GENERAL:

OMCYG 293
USMC
Niederbronn
France
15 AUG 1946
Jsf
ER

SECTION
MEMBER
JAMES C. MACTAGUE
Major, USMC
Assistant
1946

RECEIVED
15 AUG 1946
AMERICAN GRAVES REGISTRATION COMMAND
VERSAILLES, FRANCE

Y-33 E-1586
St. Avold X-1139 WW
Williams, David A. (37730313)



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[Faint, mostly illegible text]

[Faint, mostly illegible text]

[Faint, mostly illegible text]

**ARMY SERVICE FORCES
MEMO ROUTING SLIP**

| TO THE FOLLOWING IN THE ORDER INDICATED | | CHECK ACTION | |
|--|----------|----------------|------------------|
| 1. World War II Records Administration Center, AGO | INITIALS | | CONCURRENCE |
| | DATE | 6/10/46 | SIGNATURE |
| 2. 4300 Goodfellow Blvd. St. Louis 20, Missouri | | | NOTE AND RETURN |
| | | | NOTE AND FORWARD |
| 3. | | | COMPLETE ACTION |
| | | | CIRCULATE |
| | | | INFORMATION |
| | | | FILE |

**SPQYG 293
Unk. X-33
(Niederbronn) France**

Request information necessary as indicated
in inclosed Form 8-WA

JUN 10 1 42 PM '46
MAIL & RECORDS BRANCH
O. Q. M. O.

**JAMES C. MACFARLAND
Major, OMC
Assistant**

1 Incl
Form 8-WA

*free
st
293 Williams David A.*
37,730,313
5th. M. A. DIVISION
JUN 10 12 30 PM '46
AND RECORDS BRANCH

FROM: (Name, organization, building)

OQMC, Memorial Division, 2429 "B"

DATE
10 June 1946
TEL. **2462**



ARMY SERVICE FORCES

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

IN REPLY REFER TO SPOYG 293
Unknown X-33
(Niederbronn, France)

*Att to
gr. lts
✓*

7 June 1946

SUBJECT: Identification of Unknown Deceased

TO : Organization Records Branch, Records Administration Center, AGO
4300 Goodfellow Boulevard
St. Louis 20, Missouri

1. An investigation is being conducted by this office to determine, if possible, the identity of an Unknown Deceased American Soldier. It is believed that he was a member of Company A, 142nd Infantry.

2. In view of the fact that Company A, 142nd Infantry was deactivated on 15 December 1945 at Camp Patrick Henry, Virginia, and the records transferred to your office, it is requested that a list of all casualties for the months of February and March 1945 be forwarded this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

James C. MacFarland
JAMES C. MACFARLAND *et*
Major, QMC
Assistant

NAT
File

FILE 21 DEC 1949

MacFarland
Identification Branch

SPQYG 293
Unknown X-33
Niederbronn, France

7 June 1946

SUBJECT: Identification of Unknown Deceased

TO : Organization Records Branch, Records Administration Center, AGO
4300 Goodfellow Boulevard
St. Louis 20, Missouri

1. An investigation is being conducted by this office to determine, if possible, the identity of an Unknown Deceased American Soldier. It is believed that he was a member of Company A, 142nd Infantry.
2. In view of the fact that Company A, 142nd Infantry was deactivated on 15 December 1945 at Camp Patrick Henry, Virginia, and the records transferred to your office, it is requested that a list of all casualties for the months of February and March 1945 be forwarded this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

JAMES C. MacFARLAND
Major, QMC
Assistant

JUN 6 1946
QMC
H.H. & RECORDS BRANCH

AGRC
FORM No. 14
Revised 5 January 1946

CHECK LIST OF UNKNOWNNS

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

Unknown X 1139
Cemetery St Avoide
Plot W W Row 1 Grave 10

1. Arrived at cemetery _____
(hour) (date)
2. Place of death _____
(name of closest town) (coordinates and letter Prefex, maps)
(Sheet, scale and serials used)

3. Remains recovered or disinterred by _____
(name and organization)

4. Evacuated to Cemetery by _____
(name and organization)

5. **Description of clothing and equipment : (if clothes do not fit, obtain size from body measurements).**

| Item | Clothing Markings | Sizes | Indicate unusual markings Color wear, tear, repairs, etc. |
|--------------------------|---------------------------|-------|--|
| _____ | None | | |
| *Headgear _____ | None | | |
| _____ | | | |
| Raincoat _____ | None | | |
| Overcoat _____ | None | | |
| Jacket, Field _____ | None | | |
| Jacket, Combat _____ | None | | |
| Mackinaw _____ | None | | |
| Sweater _____ | Wool remnants of | | |
| Jacket, HBT _____ | None | | |
| *Shirt, Wool OD _____ | None | | |
| Undershirt, Wool _____ | white, remnants of | | |
| Undershirt, Cotton _____ | None | | |
| Trousers HBT _____ | None | | |
| *Trousers, Wool OD _____ | remnants of | | |

Incl #1

Belt, Web **None**

Drawers, Wool **None**

Drawers, Cotton **None**

Socks
Leggins, Wool **heavy 2 pairs** (Note unusual lacing)

Socks, Cotton **1 pair**

Shoes **one (1) left** **combat boot Size 12 D**
(type)

Overshoes **None**

Web Equipment (Type) **None**

(Other item) **remnants of HBT coveralls**

(Other item)

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

6. Chevrons or
Insignia **None**
(type & location : shirt, jacket, coat, helmet)

Shoulder Patch **None**

7. Does clothing indicate that deceased was a member of the Air, Ground or Naval Forces.....

..... **DOES NOT INDICATE.**

8. Description of Remains :

Age **UNK** Height **5'10"** Weight **UTD** Description of wounds **Too decomposed**

Bandages or dressings **UTD** Scars **UTD**
(length, width, location)

Tattoos **UTD**
(Number, location — illustrate on sep, page)

Outstanding moles, warts or birthmarks **UTD**
(yes-no; description, location)

Sunburn or tan, other than hands & face **UTD**

Complexion **UTD**
(light, med. dark, clear, pimples, poeks, freckles)

Build **UTD**
(large, fat, thin, muscular)

Hair **UTD**
(color, length, quantity, curly, wavy, straight, whorls, or definite parting).

Hair **UTD** (baldness, widows peak, distinctive cutting or other characteristics).

Sideburns **UTD** (color, setting, shape) Mustache **UTD** (color, size, shape) Beard or **UTD** (length, heavy)

Goatee **UTD** (light, color, extent)

Eyes **UTD** (color, setting, shape) Eyebrows **UTD** (color, bushiness, extent across nose)

Nose **UTD** (size, shape, straight) Ears **UTD** (size, set close to or far from head)

Mouth **UTD** (large, medium, small) Lips **UTD** (small large, full)

Teeth **No Teeth found** (white, size, unevenness, spacing, noticeable crowns, fillings, extract).

Chin **UTD** (prominent, receding, pointed, dimple, double)

Jaw **UTD** (large, small, normal) Circumference of head in inches **UTD** (hat band)

Neck **UTD** (size, length, short, normal, wrinkled) Larynx **UTD** (prominent, normal)

Shoulders **UTD** (broad, straight, small, rounded) Arms **UTD** (length, muscular, color)

(extent and quantity of hair)

Hands **UTD**

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

(Unusual characteristics of fingernails)

Chest **UTD** (size of nipples, color, quantity & extent of hair, large, small normal)

Back **UTD** (quantity & extent of hair) aist **UTD** (size of navel, appendectomy, amount)

Circumcision **UTD** (yes-no) Pubic hair **UTD** (color)

Hernioplasty **UTD** (yes-no; location)

Legs **UTD** (inseam, muscular, knock-kneed, bowed, normal, quantity, color & extent of hair)

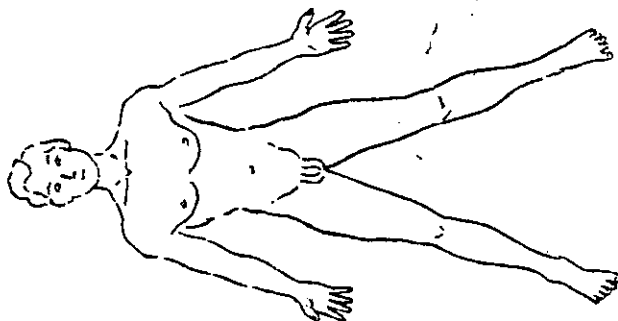
Feet UTD
(size, corns, callouses, flat)

Toes UTD
(slender, straight, crooked, overlap)

Evidence of healed fractures None
(nose, arms, legs, etc.)

9. Black out parts of body not received at cemetery :

See attached sheet



No
(yes-no)

10. Have fingerprints been placed on Report of Interment No
If not, explain No fingers

11. Has tooth chart been prepared No If not, explain No teeth
(yes-no)

12. Remarks : Remains were composed only of legs and hips. Entire upper
portion of body was not found. No flesh remains.

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.

Fluoroscopic examination:

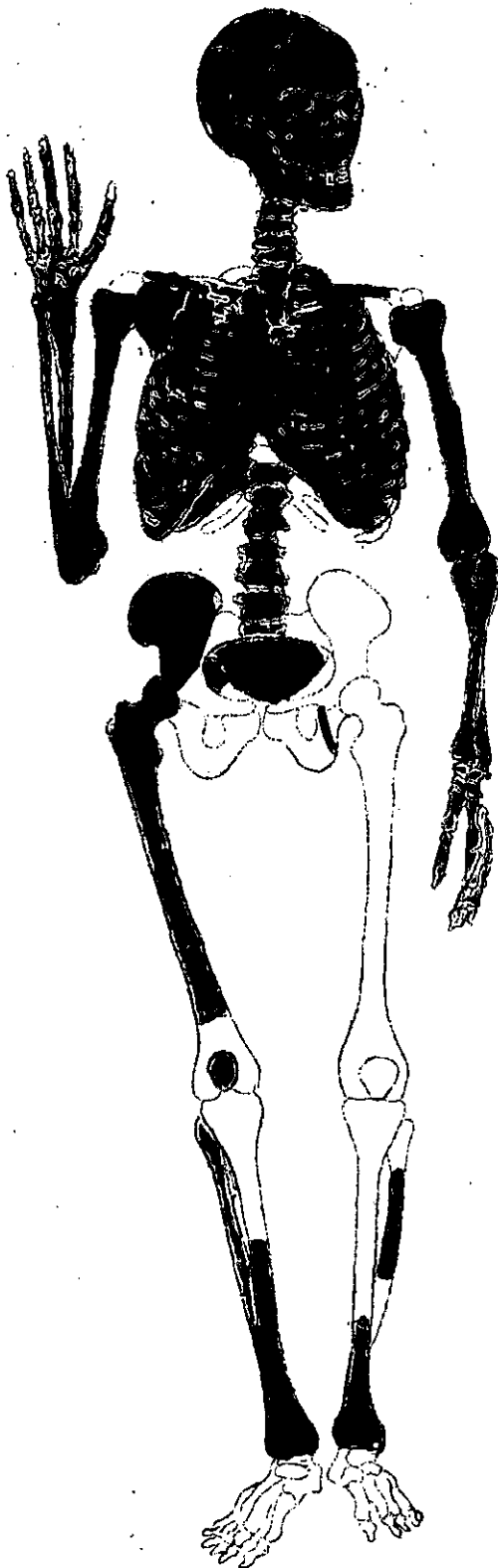
NEGATIVE

R. G. Johnson
R. G. JOHNSON
Officer's Name

2nd Lt. Inf. LAB. Officer
Rank Service

Central Identification Point
Organization

X-1139



RESTRICTED

TRANSMITTED REPORT
REPORT OF BURIAL

TM 10-630 AND AR 30-1815

TRANS LETTER 1970

2 April 1946

Date

| | | | |
|-------------------------|------------|------------------------------|---------------------------------|
| UNKNOWN X-1139 | | Unknown | Unknown |
| Last Name | First | Rank | Serial No. |
| Unknown | | Unknown | |
| Unit | | Organization | |
| Oberhoffen, France | | Unknown | KIA |
| Place of Death | | Date of Death | Cause of Death |
| 1000 hrs 1 Dec. 1945 | | US MIL CEM ST. AVOUD, FRANCE | -260-584 |
| Time and Date of Burial | | Name of Cemetery | Name or Coordinates of Location |
| 10 1 | | WW | Cross |
| Grave Number | Row Number | Plot Number | Type of Marker |

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

If No Identification Tags Previously buried as Unknown X-33
How were remains identified?

REBURIAL

Previously buried in Niederbronn Cemetery
Plot E, Row 1, Grave 586

What means of identification were buried with the body?

GRS Form #1 in burial bottle

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

| | | | | |
|-------------------|----------|------------|------|--------------|
| Who is buried on: | | | | 9 |
| Deceased's Right: | CANTORE | 3292466 | | Grave No. |
| | Name | Serial No. | Rank | Organization |
| Deceased's Left: | CHAMPINE | 36899392 | | 11 |
| | Name | Serial No. | Rank | Organization |

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



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

Emergency Addressee Unknown
Name

Address

Religion Unknown

List only Personal Effects Found on Body and disposition of same: None

Leon E. Posterrick
LEON E POSTERICK
2nd Lt. Inf.,
Commanding

S/ Adolph J Mason, 2nd Lt. CM 612th CM GR Co Disint. Off

Signature of Officer or other person reporting burial

Verified by G.R.S. Officer

S/ Robert D Heilman, 1st Lt. Inf., 610 CM GR Co Reint. Off;

RESTRICTED

CORRECTED REPORT
REPORT OF BURIAL
TM 10-630 AND AR 30-1315

TRANS LETTER 1970

2 April 1946
Date

UNKNOWN X-1139

Last Name

First

Initial

Unknown

Rank

Unknown

Serial No.

Unknown

Unknown

Organization

Unit

KIA

Oberhoffen, France

Unknown

Place of Death

Date of Death

Cause of Death

1000 hrs 1 Dec. 1945

US MID CEM ST. AVOLD, FRANCE

C-260-584

Time and Date of Burial

Name of Cemetery

Name or Coordinates of Location

10

1

WW

Cross

Grave Number

Row Number

Plot Number

Type of Marker

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

If No Identification Tags Previously buried as Unknown X-33

How were remains identified?

REBURIAL

Previously buried in Niederbronn Cemetery
Plot E, Row 1, Grave 586

What means of identification were buried with the body?

GRS Form #1 in burial bottle

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

Who is buried on:

Deceased's Right:

CANTORE

3292466

Rank

Organization

9

Grave No.

Deceased's Left:

CHAMPINE

36899392

Rank

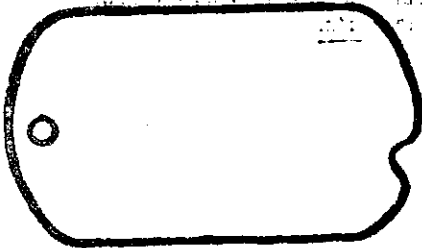
Organization

11

Grave No.

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

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



Emergency Addressee Unknown

Name

Address

Religion Unknown

List only Personal Effects Found on Body and disposition of same: None

Leon E. Postwick

LEON E POSTERICK
2nd Lt. Inf.,
Commanding

S/ Adolph J Mason, 2nd Lt. CE 612th QM GR Co Disint. Off

Signature of Officer or other person reporting burial

Verified by G.R.S. Officer

S/ Robert D Heilman, 1st Lt. Inf., 610 QM GR Co Reint. Off;

IF DECEASED UNIDENTIFIED

Take Fingerprints of Both Hands. If unable to obtain a complete set of Fingerprints, Take Those You Can, and fill in the following:

Height: _____ Laundry Marks: _____
 Weight: _____ Number of Rifle: _____
 Color of Eyes: _____ Wear Glasses? _____
 Color of Hair: _____ Is Tooth Chart Attached? _____
 Race: _____

(If possible, have medical personnel take a tooth chart, if no medical personnel present, fill in a tooth chart below.) In space below, locate and describe any scars, birthmarks, moles, deformities, etc.

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

| | | | |
|-------|-----------|--|-------|
| 4 | | | 4 |
| 3 | | | 3 |
| 2 | Left Hand | | 2 |
| 1 | | | 1 |
| Thumb | | | Thumb |
| 2 | | | 2 |
| 3 | | | 3 |
| 4 | | | 4 |

TOOTH CHART

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

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

Indicate: missing natural teeth by X; crowns by O; fillings by □; Bridges by ▢
 by O linking anchor teeth; replacements by artificial teeth X

Characteristics: _____
 Other Data: _____

AG P BR HQ SOS

122560

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

REBURIAL

28 JULY 1945

Date

UNION AMERICAN (K-33)

UNK

UNK

Last Name

First

Initial

Rank

Serial No.

UNK

UNK

02

Unit

Organization

VIC. OBERDORFEN, FR. EST. FEB. OR MARCH 1945

~~UNK~~ UNK **RMS**

Place of Death

FR.

Date of Death

Cause of Death

1400 HRS. 28 JULY 1945 U.S. MIL. CEM. NEEDERBRONN, FR. Q 944-388

Time and Date of Burial

Name of Cemetery

Name or Coordinates of Location

586

1

WOOD CROSS

WOOD CROSS

Grave Number

Row Number

Plot Number

Type of Marker

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

If No Identification Tags DISINTERRED FROM SHEET 57, RR 095-210

How were remains identified?

NO IDENTIFICATION TAGS FOUND ON BODY. (SEE REVERSE)

What means of identification were buried with the body?

G. R. FORM #1 BURIED WITH THE BODY.

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

Who is buried on:

CHAMPINE 36899392

RMS

587

Deceased's Right:

Name

Serial No.

Rank

Organization

Grave No.

ALPHONSE F. CHITORE 32292466 UNK

UNK

585

Deceased's Left:

Name

Serial No.

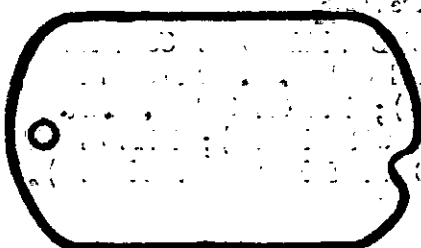
Rank

Organization

Grave No.

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

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



Emergency Address

REBURIAL

Previously buried in isolated grave

Religion

List only Personal Effects Found on Body and disposition of same

NONE

located at Bechhoffen, Fr.

S 57

Q 944-388

Signature of Officer or other person reporting burial

610 QM GR REG CO (3058)

1st Lt G W Hume

POOLE ROGERS, Captain, **1st QM CO** COMMANDING

02551

200 01 1945

IF DECEASED UNIDENTIFIED

Take Fingerprints of Both Hands. If unable to obtain a complete set of Fingerprints, Take Those You Can, and fill in the following:

Height: Unable to Determine
 Weight: " " " " " "
 Color of Eyes: " " " " " "
 Color of Hair: " " " " " "
 Race: " " " " " "
 Laundry Marks: NONE
 Number of Rifle: NONE
 Wear Glasses? NO
 Is Tooth Chart Attached? " "
 Race: " " " " " "

(If possible, have medical personnel take a tooth chart, if no medical personnel present, fill in a tooth chart below.) In space below, locate, and describe any scars, birthmarks, moles, deformities, etc.

BODY BADLY DECOMPOSED. NO HEAD FOUND WITH BODY SO HEAVY UNABLE TO TAKE TOOTH CHART.

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

PARTLY DESTROYED TANK NO. 050878 -...
 4 - 3015 (NUMBERING ON TURRET) WAS FOUND ABOUT 50 YDS. FROM THE GRAVE OF THE DECEASED.
 THE LOCAL FRENCH PRO-SPLEN FOUND AN IDENTIFICATION TAG LYING TO ONE OF THE GROUND ABOUT 20 FEET AWAY FROM THE GRAVE OF THE DECEASED. TAG BEARS THE INFORMATION: "DAVID A. WILLIAMS, 37730313 T44-O-P"

TOOTH CHART

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

Indicate: missing natural teeth by X; crowns by O; fillings by □; Bridges by ◊; linking anchor teeth; replacements by artificial teeth X

Characteristics: _____

Other Data: _____

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

DECEASED'S BODY FOUND WITH ONE COMBAT BOOT SIZE 12 D; PIECE OF O.D. TROUSERS (NO MARKINGS OR SIZES); PIECE OF I.B.T. TROUSERS (NO MARKINGS OR SIZES); PIECE OF LOOLEN UNDERSHIRT (NO MARKINGS OR SIZES).