

1

Plot N Row 9 Grave 24  
Date of Burial 20 June 1950  
Verified by GRS Officer:

DISINTERMENT DIRECTIVE

APP  
6/12/49

R. J. Rodriguez  
R. T. RODRIGUEZ, CWO, USA

SECTION A -  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

3574 00000

DATE

15 01 48  
DAY MONTH YEAR

NAME

SERIAL NUMBER

RANK

ARM

DATE OF DEATH

Bank St Avold X 32-48  
UNKNOWN X-003248

Q

DAY MONTH YEAR

CEMETERY

ST AVOLD - METZ

0

DISPOSITION OF REMAINS

3503 80  
CODE DIST. PT.

LOT

ROW

GRAVE

COUNTRY

RRR 7 78 FRANCE

CAUSE OF DEATH

6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

NAME AND ADDRESS OF NEXT OF KIN

SAINTEAVOLD, FRANCE  
(BY ADMINISTRATIVE ORDER)  
ST JAMES, FRANCE.

These remains are unidentifiable and are to be permanently interred. (Hq. AGRC-26 Jan 50)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISINTERRED

UNKNOWN X-003248

13 Jul 48

IDENTIFICATION TAG ON  
 REMAINS  
 MARKER EMB

ORGANIZATION

UNKNOWN

RELIGION

IDENTIFICATION VERIFIED BY

Anthony J Martin Embalmer  
NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

Mattress cover

CONDITION OF REMAINS Fractured skull and mandible, L/Humerus, L/Scapula. Maxilla missing. Small amount of decomposed flesh. Disarticulated.

OTHER MEANS OF IDENTIFICATION

Report of burial found with remains

MINOR DISCREPANCIES

None

NAT  
FILE  
RECORDS ANNOTATED  
DATE 8-4-50  
NAME [Signature]  
BR. MEM. DIV.

REMAINS PREPARED AND PLACED IN CASKET

DATE 19 Jul 48

BY Anthony J Martin Embalmer

CASKET SEALED BY

Anthony J Martin Embalmer

EMBALMER (Signature)

[Signature] Anthony J Martin

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY X All markings, plates & tags verified by Bruce E Blair 1st Lt QMC

DATE 19 Jul 48 BY Anthony J Martin

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

[Signature] Bruce E Blair 1st Lt QMC

[Signature] Bruce E Blair 1st Lt QMC 7857 AGRC Zone 3Hq

SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

Consignee changed by Reg Div. [Signature]

[Handwritten signature]

# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

FROM <b>USMC St. Avold France</b>		TO <b>OIC Neuville Belgium</b>	
KIND OF CONVEYANCE <b>Truck</b>		NAME OF CONVOYER <b>Cpl Stephen Wilson RA-39587409</b>	
SIGNATURE OF SHIPPER <i>Frank B. Callaghan</i>	DATE <b>29 Oct 49</b>	SIGNATURE OF RECEIVER	DATE

## 2. SHIPPED

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

## 3. SHIPPED

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

## 4. SHIPPED

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

## 5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <b>EVMI VAOLD EBYICE</b>	DATE	SIGNATURE OF RECEIVER	DATE

## 6. SHIPPED

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

## 7. SHIPPED

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

# AIRMAIL

QJWNT 293

1st Inf.

GRS European

SUBJECT: Certificates of Unidentifiability of Remains  
Transmittal Letter #4503

Dept. of the Army, GAGD, Washington 25, D. C. 6 December 1949

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

1. This Office approves the classification of Unknown X-3248, USMC  
St. Amand, France as Unidentifiable.

2. The remaining Unknowns listed on basic communication will be the  
subject of a later communication.

FOR THE QUARTERMASTER GENERAL:

3 Incls w/d

T. H. KOTE  
Lt Colonel, GAGD  
Memorial Division

Holden:cdt  
Clements  
REB

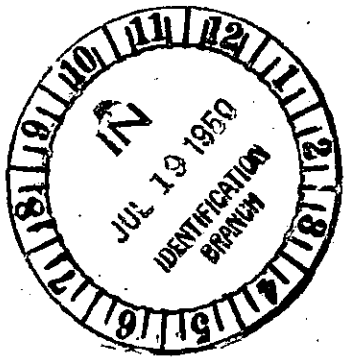
314.6 GRS Europe  
(T/L # 4503)



X-3248  
France  
REB  
TEC  
X-3248  
St. Amand

# AIRMAIL

1000



VIEWER

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

*copy*

293-Unknown-France X-3248 (St. Avold) 14 NOVEMBER 1949  
Date

SUBJECT: Unidentifiable Remains

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

1. The records pertaining to Unknown X-3248, Plot RRR,  
Row 7, Grave 78, 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. 2649, dated 6 FEBRUARY 1948. No  
further information is available.

FOR THE COMMANDING GENERAL:

/s/ H. P. HENRY  
/t/ EDWARD F. PRICE, JR.  
E. D. MULVANY

Received 2 DEC 1949  
Not identifiable from  
information presently  
available **QQMR**

DIAT  
1115  
2 DEC 49  
E. D. Mulvanity  
of War



6076 7.000000  
----- 011111

T.L.# 4503

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

RRE 293

14 November 1949

(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X- 3248, Plot RRR, Row 7, Grave 78, USMC St Avold, France, have been reviewed and it is the opinion of the Board of Review, this headquarters, that sufficient evidence is not available to establish the identity of the deceased concerned, therefore, these remains should be classified as unidentifiable.

2. Report of Reprocessing of remains was forwarded to the Office of The Quartermaster General by Transmittal Letter No. 2649, dated 6 February 1948.

3. Remarks: SEE CASE HISTORY ATTACHED

Received : 2 DEC 1949  
Not identifiable from information presently available  
OQMG

Case reviewed by undersigned Members of the Board of Review:

*H. P. Henry*  
Col. H. P. HENRY, O-12589 JMC

*E. D. Mulvanity*  
Lt. Col. E. D. MULVANITY, O-359598 JMC

Maj. Charles REYNOLDS, O-182639 TC

Maj. Gerald SWARTHOUT, Sr., O-267451 CE

*Edward F. Price, Jr.*  
Capt. Edward F. PRICE, Jr., O-1588236 JMC

1st Lt. Frederick S. DAVID, O-1826041 CAV

CWO Frank GEER, W-2102925 USA

Capt. Jack C. HAYES, O-1577297 JMC

Incl #1

UNKNOWN NO. 3248

U.S. MILITARY CEMETERY


Saint Avold

(Location)

The remains of Unknown X-3248 (USMC Saint Avold) was redcovered from civilian cemetery located at Castel, Germany with sixteen other remains the majority of which have been identified as members of the 301st and 358th Infantry Regiments. An attempt was made to associate these remains with one of the unresolved casualties of the aforementioned organizations but with out results. Laundry marking "R-8738" was checked and the only casualty listed in the World Casualty Listing was Martin A. RIVERA, 30408738 who was not a casualty in this theater. Form 371's for all unresolved casualties on Map Sheet K-50 and Germany 6 were also checked to see if any of them listed a marking similar to the tattoo found on X-3248 too no avail therefore these remains are being declared UNIDENTIFIABLE.

L. PIERPOINT

10 November 1949





JLS ll

6

DISINTERMENT DIRECTIVE

293  
Muk-Francesx - 3248 St. Avold

SECTION A - NAME AND BURIAL LOCATION OF DECEASED  
DIREKTIVE NUMBER: 3574 00000  
DATE: 15 01 48  
DAY MONTH YEAR

NAME: UNKNOWN X-003248  
SERIAL NUMBER: UNKNOWN X-003248  
RANK:   
ARM: 0  
DATE OF DEATH:   
DAY MONTH YEAR  
CEMETERY: ST AVOLD - METE  
DISPOSITION OF REMAINS: 0 3503 00  
CODE DIST. PT.  
PLOT: RRR ROW: 7 GRAVE: 78 COUNTRY: FRANCE  
CAUSE OF DEATH: 0

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE: SAINT AVOLD, FRANCE (BY ADMINISTRATIVE ORDER)  
NAME AND ADDRESS OF NEXT OF KIN:

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME: SERIAL NUMBER: RANK: DATE OF DEATH: DATE DISTINTERRED:  
IDENTIFICATION TAG ON:  REMAINS  MARKER  
ORGANIZATION: UNKNOWN  
RELIGION: IDENTIFICATION VERIFIED BY:  
NAME AND TITLE:

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

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

REMAINS PREPARED AND PLACED IN CASKET  
DATE: BY:  
CASKET SEALED BY: EMBALMER (Signature):  
CASKET BOXED AND MARKED: SHIPPING ADDRESS VERIFIED BY:  
DATE: BY:

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

SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

# CHECK LIST FOR UNKNOWN

Sgt. Thomas

(name of soldier processing remains)

St. Avoild, France

1. Unknown X- 3248 ~~US Army Cemetery~~ Coll. Pt. Homburg, Germany

2. If remains were disinterred, attach Check List for Disinterments.

3. Arrived at cemetery 1500, 19. Feb. 1946 From 606 QM.G.R.Co. Homburg, Germany  
hour date collecting point

4. Place of death Castel, Germany Map: 1,250,000 Sheet: K-50, Trier, Ger.  
name coordinates and landmarks

5. Coords: WL 1508.

6. Remains recovered by T/5 Blevins 606 QM.G.R.Co.  
name and organization

7. Evacuated to cemetery by T/5 Blevins 606 QM.G.R.Co.  
name and organization

8. Is load list attached no  
yes-no

9. Are names of deceased found in same area as this Unknown starred yes  
yes-no

10. Are circumstances described which may indicate organization of the deceased no  
yes-no

11. If only part of body was received, was a careful search made for other parts of Unknown yes  
yes-no

12. If remains come from vehicle, plane, etc: unknown  
type of vehicle or plane, nick name, serial number, organization or symbols

13.

14. Crew list unknown  
names of other deceased and positions in which found

15.

16.

17. If a tank, which hatches were free and available for escape use

not applicable

18. If organization to which vehicle or plane was assigned or if names of all other deceased are not known, give detailed information concerning vehicle or plane

parts of markings or symbols burned pierced by shell fire - where

19.

20. unknown  
found in town field by road etc. damaged by mine explosion

21. unknown (if any)  
names of men who escaped description of other vehicles or planes in same area

22. Detailed description of personal effects NO P.E.  
Indicate exact pocket or part of body where found

23.

24.

25.

26.

Description of clothing and equipment: (If clothes do not fit, obtain sizes from body measurements)

Item	Clothing Markings	Sizes	Color	Indicate unusual markings, wear, tear, repairs etc.
27. *Headgear..... type				
28. Raincoat	none est.	med.	green	none
29. Overcoat				
30. Jacket, Field				
31. Jacket, Combat				
32. Mackinaw				
33. Sweater				
34. Jacket, HBT				
35. *Shirt Wool OD	none		O.D.	none
36. Undershirt, Wool				
37. Undershirt, Cotton				
38. Trousers, HBT	none	32-31	green	none
39. *Trousers, Wool OD	none	30-31	O.D.	none
40. Belt, Web				
41. Drawers, Wool	R 108738	30	O.D.	none
42. Drawers, Cotton				
43. Leggings	none		O.D.	Note unusual lacing
44. Socks Wool Cotton V	none est.	10	white	none
45. *Shoes..... type				
46. Oveshoes				
47. Web Equipment type				
48. other item				
49. other item				

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

50. Chevrons or..... none ..... Shoulder Patch..... none .....  
type and location; shirt jacket coat helmet

Insignia none

51. Description of Remains

52. Age..... unk. ..... Height..... unk. ..... Weight..... unk. ..... Description of wounds..... head crushed .....  
years ft.-in lbs

53. ....

54. Bandages or dressings **none** Scars **flesh and skin decayed**  
length, width, location

55. ....

56. Tattoos **right arm 2 in. above wrists.**  
number, location — illustrate on sep. page

57. Outstanding moles, warts or birthmarks **flesh and skin decayed**  
yes-no description, location

58. ....

59. Sunburn or tan, other than hands and face **flesh and skin decayed**

60. Tobacco stain on fingers or teeth **fingers missing - teeth missing**  
designate where extent

61. Complexion **flesh decayed** Build **"est" muscular**  
light, med, dark, clear, pimples, pocks, freckles large, fat, thin, muscular

62. **flesh and skin decayed**

63. Hair **black, small patch found.**  
color, length, quantity, curly, wavy, straight, or definite parting, baldness, widows peek

64. ....  
distinctive cutting or other characteristics

65. Sideburns **head crushed** Mustache **head crushed** Beard or goatee **head crushed**  
color, setting, shape color, size, shape Length

66. ....  
heavy, light, color, extent

67. Eyes **head crushed** Eyebrows **head crushed**  
color, setting, shape color, bushiness, extent across nose

68. Nose **head crushed** Ears **head crushed**  
size, shape, straight size set, close to or far from head

69. Forehead **head crushed** Mouth **head crushed** Lips **head crushed**  
high, wide, wrinkled large, medium, small small, large, full

70. Teeth **missing**  
white, size, unevenness, spacing, noticeable crowns, fillings, extractions

71. Chin **head crushed** Cheekbones **head crushed**  
prominent, receding, pointed, dimple double high, normal

72. Jaw **head crushed** Circumference of head in inches **head crushed**  
large, small, normal hat, band

73. Neck **flesh 14 1/2 flesh decayed** Larynx **decayed** Shoulders **"est" broad**  
size, long, short, normal wrinkled prominent, normal broad

74. **flesh decayed** Arms **"est" 25 in. flesh decayed**  
straight, small, rounded length muscular, color, extent and quantity of hair

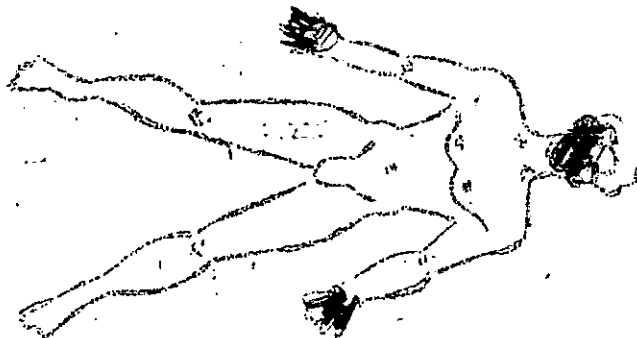
75. **decayed** Hands **flesh decayed**  
vaccination scar, size of wrists large, small, normal, calloused noticeably

76. ....

76. **flesh and skin decayed**  
marks on fingers indicating that rings worn

77. ....

78. Fingers flesh and skin decayed  
short, thick, long, slender; size of knuckles missing fingers or joints
79. flesh and skin decayed  
Unusual characteristics of fingernails
80. Chest est. 36, flesh and skin decayed  
size at nipples; color, quantity and extent of hair; large, small, normal
81. Back flesh decayed Waist flesh 30 flesh decayed  
quantity and extent of hair size, at naval, appendectomy, amount and color of hair
82. Circumcized decayed pubic hair black Hernioplasty flesh and skin decayed  
yes-no color yes-no location
83. Legs est. 31 flesh decayed  
Inseam muscular; knock kneed, bowed, normal quantity, color and extent of hair
84. Feet est. 9 flesh decayed Toes flesh decayed  
size; corns; callouses; flat slender, straight, crooked, overlap
85. Evidence of healed fractures? no  
nose, arms, legs, etc.
86. Block out parts of body not received at cemetery.



87. Have photographs been made and attached no If not, explain see question 90  
yes-no
88. Have fingerprints been placed on GRS No 1 no If not, explain flesh decayed  
yes-no
89. Has tooth, chart been prepared? no If not, explain no teeth  
yes-no
90. Remarks: Body reburied in advance stage of decomposition. Head crushed. Both
91. hands missing.
92. Remains weigh approx. 110 pounds.
93. \_\_\_\_\_
94. Body reburied in U.S. Military Cemetery, St. Avoild, France.
95. \_\_\_\_\_
96. \_\_\_\_\_

*William H. Zerhan*  
 Signature of GRO and Organization

WILLIAM H. ZERHAN  
 2nd Lt. Inf.  
 606 QM.G.R.Co.

Illustration of tattoo found on UNK. X 3248 (St. Avoird, France)  
located 2 in. above right wrists.



# REPORT OF INVESTIGATION - AREA SEARCHING

To be completely filled out and attached to each copy of GR Form I,  
„Report of Burial” when disinterment is accomplished.

1. Was investigation preceded by Advance Publicity: Yes  
(if Special Investigation, so indicate).....
2. UNK. X-3248 (St. Avold, France) UNK. UNK. UNK.  
(Full name of deceased) (Rank) (ASN) Organization)
3. State: Means of identification, i. e. identification tags attached to marker, inscription on grave marker, cemetery records, townhall records, etc. and Source of Information, i. e., identification tags, identification cards, identification bracelet, leather name plate on flying jacket, clothing marks etc.  
Clothing marks found on winter underwear R-108738
4. Give exact location of isolated grave, furnishing coordinates and letter prefix, map sheet, scale and series used; also name of nearest town: CASTEL, Germany Map: 1:250,000 Sheet K-50  
Trier Coord: W4 1508  
NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION IN WITH PERMANENT LANDMARKS.
5. Full name of cemetery (include plot, row and grave if organized cemetery):  
German military cemetery Castel, Germany Grave no. 16
6. Approximate or established date of death (state which and give basis for date selected):  
Unknown
7. Approximate or established date of burial (give basis for date established):  
19 January 1945
8. Manner in which grave was marked, show information contained on the marker:  
Wooden board with grave number.
9. List personal effects found in possession of civilian and custodial personnel now retaining, furnishing name and address of individuals concerned:  
All personal effects taken by German Officers when the body was buried.
10. Furnish information obtained concerning place, and particulars surrounding death and burial; give the names and addresses of all persons furnishing such information (contact local Mayor, priest, police, hospitals, cemetery sextons or caretakers, those responsible for burial and others possessing important information): The body of this man was picked up near by German soldiers and taken to a German cemetery where it was buried by the caretaker & German chaplain was at the burial but his name is unknown. Name of caretaker: Alois Leuk Castel, Germany No. 18
11. Give name and address of person who can guide disinterment team to burial location:  
Caretaker Alois Leuk Castel

# REPORT OF INVESTIGATION - AREA SEARCHING

To be completely filled out and attached to each copy of GR Form I,  
„Report of Burial” when disinterment is accomplished.

1. Was investigation preceded by Advance Publicity: Yes  
(if Special Investigation, so indicate)

2. UNK. X-3248 (St. Avold, France) UNK. UNK. UNK.  
(Full name of deceased) (Rank) (ASN) Organization

3. State: Means of identification, i. e. identification tags attached to marker, inscription on grave marker, cemetery records, townhall records, etc. and Source of Information, i. e., identification tags, identification cards, identification bracelet, leather name plate on flying jacket, clothing marks etc.  
Clothing marks found on winter underwear R-108738

4. Give exact location of isolated grave, furnishing coordinates and letter prefix, map sheet, scale and series used; also name of nearest town: CASTEL, Germany Map: 1:250,000 Sheet K-50  
Trier Coord: W 1508

NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION IN WITH PERMANENT LANDMARKS.

5. Full name of cemetery (include plot, row and grave if organized cemetery):  
German military cemetery Castel, Germany Grave no. 16

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Unknown

7. Approximate or established date of burial (give basis for date established):  
19 January 1945

8. Manner in which grave was marked, show information contained on the marker:  
Wooden board with grave number.

9. List personal effects found in possession of civilian and custodial personnel now retaining, furnishing name and address of individuals concerned:  
All personal effects taken by German Officers when the body was buried.

10. Furnish information obtained concerning place, and particulars surrounding death and burial; give the names and addresses of all persons furnishing such information (contact local Mayor, priest, police, hospitals, cemetery sextons or caretakers, those responsible for burial and others possessing important information): The body of this man was picked up near by German soldiers and taken to a German cemetery where it was buried by the caretaker A German chaplain was at the burial but his name is unknown. Name of caretaker: Alois Leuk Castel, Germany No. 18

11. Give name and address of person who can guide disinterment team to burial location:



# REPORT OF INVESTIGATION - AREA SEARCHING

To be completely filled out and attached to each copy of GR Form I,  
„Report of Burial” when disinterment is accomplished.

1. Was investigation preceded by Advance Publicity: Yes  
(if Special Investigation, so indicate).....
2. UNK. X-3248(St. Avold, France) UNK. UNK. UNK.  
(Full name of deceased) (Rank) (ASN) Organization)
3. State: Means of identification, i. e. identification tags attached to marker, inscription on grave marker, cemetery records, townhall records, etc. and Source of Information, i. e., identification tags, identification cards, identification bracelet, leather name plate on flying jacket, clothing marks etc.  
Clothing marks found on winter underwear R-108738
4. Give exact location of isolated grave, furnishing coordinates and letter prefix, map sheet, scale and series used; also name of nearest town: CASTEL, Germany Map: 1:250,000 Sheet K-50  
Trier Coord: W4 1508  
NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION IN WITH PERMANENT LANDMARKS.
5. Full name of cemetery (include plot, row and grave if organized cemetery):  
German military cemetery Castel, Germany Grave no. 16
6. Approximate or established date of death (state which and give basis for date selected):  
Unknown
7. Approximate or established date of burial (give basis for date established):  
19 January 1945
8. Manner in which grave was marked, show information contained on the marker:  
Wooden board with grave number.
9. List personal effects found in possession of civilian and custodial personnel now retaining, furnishing name and address of individuals concerned:  
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10. Furnish information obtained concerning place, and particulars surrounding death and burial; give the names and addresses of all persons furnishing such information (contact local Mayor, priest, police, hospitals, cemetery sextons or caretakers, those responsible for burial and others possessing important information): The body of this man was picked up near by German soldiers and taken to a German cemetery where it was buried by the caretaker A German chaplain was at the burial but his name is unknown. Name of caretaker: Alois Leuk Castel, Germany No. 18
11. Give name and address of person who can guide disintering team to burial location:  
Caretaker Alois Leuk Castel No. 18

12. Is this atrocity case **No**..... Is there evidence that it be: **No**  
If answer is yes, has responsible War Crimes representative been notified: .....

13. Names and addresses of persons committing the atrocity or the military unit of which these persons were members: .....

**Not Applicable**

14. If unidentified and a crew member of a plane or vehicle, indicate names of any other known crew members and state whether buried at this location or a survivor: .....

**Not Applicable**

15. If unidentified, supply any of the following information determinable:

a. Crew position in plane or vehicle: .....

b. Plane or vehicle serial number: ..... Type: .....

c. Installed weapons:

Serial Number	Calibre & Mfgr.	Serial Number	Calibre & Mfgr.
.....	.....	.....	.....
<b>Not Applicable</b>			
.....	.....	.....	.....
.....	.....	.....	.....

d. Engine serial number: ..... Type: .....

*William H. Zerhan*

Signature of Investigating Officer

**WILLIAM H. ZERHAN**

2nd Lt., Inf. 0-1336585

606 QM.G.R.Co.

Rank

ASN

Disinterment approved by, (HQ Authorizing Exhumation) **O.O. 606QM.G.R.Co.**

Disinterment and \*reburial/burial made by: .....

Date of \*burial/reburial: .....

Place of \*burial/reburial U. S. Military Cemetery: .....

Plot..... Row..... Grave.....

NOTE: Additional particulars regarding investigation: ..  
will be placed on additional sheet.

# IDENTIFICATION CHECK LIST

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

D.D. 569, dated 3 Nov 47

Unknown X - 3248  
Cemetery St. Avoild, France  
Plot KKK Row 7 Grave 78

**Date reprocessed :**

1. ~~ARRIVED AT CEMETERY~~ 3 Dec 47  
(Hour) (Date)

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

(Sheet, scale and serials used)

3. Remains ~~recovered~~ disinterred by and reprocessed by Mobile Team #1, 1st. Zone  
(Name and organization)

4. Evacuated to Cemetery by \_\_\_\_\_  
(Name and organization)

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

Item	Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear	<u>None</u> (Type)		
Raincoat	<u>None</u>		
Overcoat	<u>None</u>		
Jacket, Field	<u>None</u>		
Jacket, Combat	<u>None</u>		
Mackinaw	<u>None</u>		
Sweater	<u>None</u>		
Jacket, HBT	<u>None</u>		
* Shirt, Wool OD	<u>None</u>		
Undershirt, Wool	<u>None</u>		
Undershirt, Cotton	<u>None</u>		
Trousers, HBT	<u>None</u>		
* Trousers, Wool OD	<u>None</u>		

FEB 20 1948

Belt, web ..... **None**

Drawers, wool ..... **None**

Drawers, cotton ..... **None**

Leggings, wool ..... **None**

Socks, cotton ..... **None**

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

Overshoes ..... **None**

Web Equipment ..... **None** (type) .....

(Other item) ..... **Fork and spoon (German army)**

(Other item) ..... **Pocket knife (all metal)**

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

Chevrons or Insignia ..... **None**  
(Type & location; shirt, jacket, coat, helmet)

Shoulder Patch ..... **None**

Does clothing indicate that deceased was a member of the Air, Ground or Naval Force? **UTD**

6. Description of Remains : **R.Humerus - 32.2    R.Femur - 47.3**  
**R.Ulna - 27.8    R.Tibia - 38.8**  
**R.Radius - 25.0    R.Fibula - 37.3**

Age **UTD** Height **Est 5'8 1/2"** Weight **UTD** Description of wounds **UTD**

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

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

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

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

Complexion **UTD**  
(Light, medium, dark, clear, pimples, poeks, freckles)

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

Hair **None**  
(Color, length, quantity, curly, wavy, straight, whorls, or definite parting)

Hair **UTD**  
(Baldness, widows penk, distinctive cutting or other characteristics)

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

Goatee ..... **UTD**  
 (Light, color, extent)

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

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

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

Teeth ..... **None found**  
 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin ..... **UTD**  
 (Prominent, receding, pointed, dimples, double)

Jaw ..... **UTD** ..... Circumference of head in inches ..... **Ret. 20 1/2"**  
 (Large, small, normal) ..... (Hat band)

Neck ..... **UTD** ..... Larynx ..... **UTD**  
 (Size, length, short, normal, wrinkled) ..... (Prominent, normal)

Shoulders ..... **UTD** ..... Arms ..... **UTD**  
 (Broad, straight, small, rounded) ..... (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 and extent of hair, large, small, normal)

Waist ..... **UTD**  
 (Size of navel, appendectomy, amount, quantity, and color of hair)

Back ..... **UTD** ..... Circumcision ..... **UTD** ..... Pubic Hair ..... **Missing**  
 (Quantity and extent of hair) ..... (Yes-no) ..... (Color)

Hernioplasty ..... **UTD**  
 (Yes-no; location)

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

Feet ..... **UTD** ..... Toes ..... **UTD**  
 (Size, corns, callouses, flat) ..... (Slender, straight, crooked, overlap)

Evidence of healed fractures ..... **UTD**  
 (Nose, arms, legs, etc.)

NOTE: Use attached charts "A" and "B" to indicate parts not received.

7. Have finger prints been placed on Report of Interment? No (Yes-no)

If not, explain Too decomposed

8. Has tooth chart been prepared? No If not, explain None found  
(Yes-no)

9. Remarks Remains found in skeletal form, wrapped in gray remnants of oil cloth, no clothing, Burial Report found. Estimated weight : 18 lbs. Fluoroscopic examination negative. German type eating utensils found in debris.

I certify that I have personally viewed the remains of subject deceased and all resulting information has been recorded to the best of my knowledge.

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

CAPT Rank QMC Service

OPERATIONS OFFICER  
(Organization)

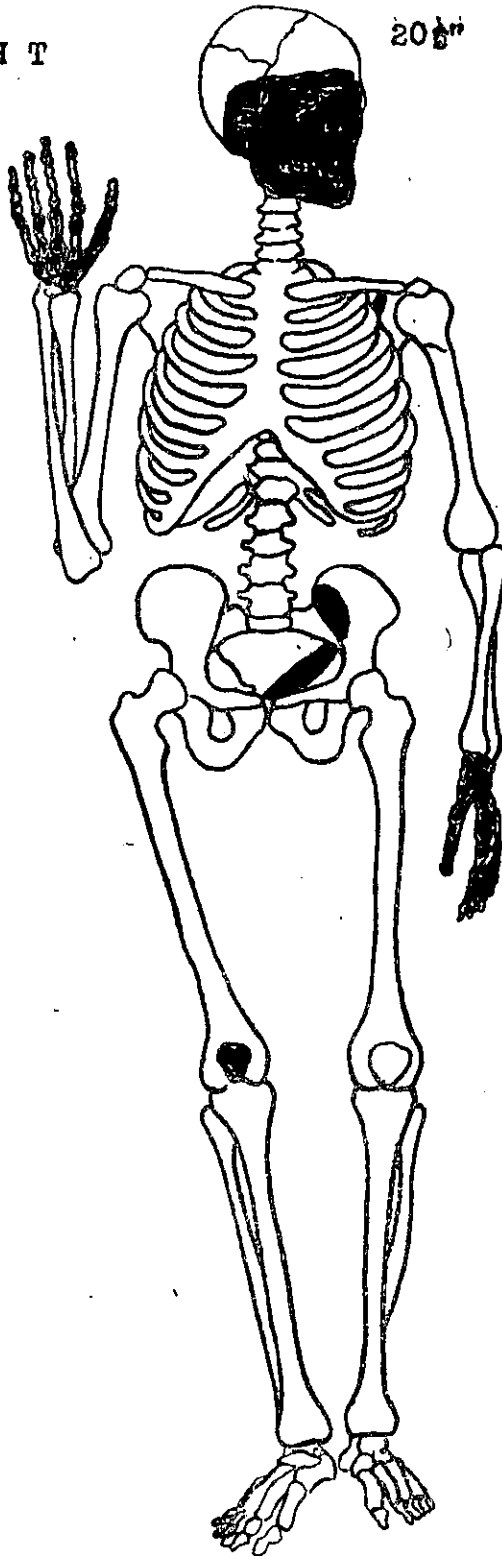
# SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

R I G H T

20 1/2"

L E F T



HUMERUS 32.2 cm

RADIUS 25.0 cm

ULNA 27.8 cm

FEMUR 47.3 cm

FIBULA 37.3 cm

TIBIA 38.8 cm

Est Height 5' 8 1/2"

REBURIAL

GRAVES REGISTRATION  
FORM No. 1  
(Revised 1 Sept. 1943)

Restricted **REPORT OF BURIAL**

21 February 1946

TM 10-630 AND AR 30-1815

Date

**Unk. X-3248 (St. Avoild, France)**

**unk.**

**unk.**

Last Name

First

Initial

Rank

Serial No.

**unk.**

**unk.**

Unit

Organization

**CASTEL, Ger., WL 1508**

**unknown**

**head crushed**

Place of Death

Date of Death

Cause of Death

**1430 22 February 1946**

**U.S. Mil. Cem. St. Avoild, France**

**Q 260 584**

Time and Date of Burial

Name of Cemetery

Name or Coordinates of Location

**78**

**7**

**RRR**

**CROSS**

Grave Number

Row Number

Plot Number

Type of Marker

Disposition of Identification Tags: Buried with body Yes  No

Attached to Marker Yes  No

If no Identification Tags

How were remains identified?

**"See reverse"**

**REBURIAL**

What means of identification were buried with the body?

**GPS # 1 in bottle.**

**Previously buried in isolated grave**

**located at**

**CASTEL, Germany**

**Map: 1:250,000, sheet K-50, Tri**

**Ger., coord. WL 1508.**

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

Who is buried on:

Deceased's Right: **UNKNOWN X-3249**

Name

Serial No.

Rank

Organization

**79**

Grave No.

Deceased's Left: **UNKNOWN X-3247**

Name

Serial No.

Rank

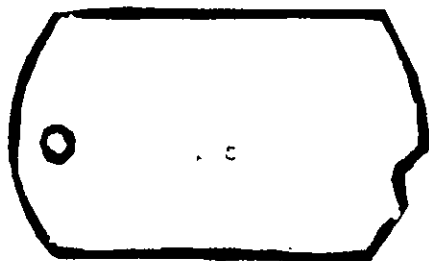
Organization

**77**

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

**unknown**  
Address

Religion **unknown**

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

**None.**

Disintering Officer

*William H. Zerhan*  
Signature of Officer or other person reporting burial

WILLIAM H. ZERHAN

2nd Lt. Inf.

606 QM. G.R. Co

Reintering Officer

*Charles F. Barney*  
Verified by G.R.S. Officer  
CHARLES F. BARNEY, 2nd Lt, Inf, 6800 QM GR Det



## 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: **unk.**  
 Weight: **unk.**  
 Color of Eyes: **unk.**  
 Color of Hair: **black**  
 Race: **unk.**

Laundry Marks: **yes**  
 Number of Rifle: **unk.**  
 Wear Glasses? **unk.**  
 Is Tooth Chart Attached? **no.**

(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.

**No tooth chart taken, no fingerprints taken.**



**Red heart  
 Tattu on right arm**

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

**Clothing marks found on winter underwear  
 # 108738**

4									
3									
2									
1									
Thumb									

Left Hand

Impossible to take, missing.

3									
2									
1									
Thumb									

Right Hand

Impossible to take, missing.

### TOOTH CHART

Deceased's Right								Deceased's Left							
<b>Impossible to take, head crushed</b>															
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 and/or teeth; replacements by artificial teeth X

Characteristics: .....

Other Date: .....

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.

Remarks:  
**1. See attached sketch.**

Graves of seventeen American Soldiers in the Cemetery at CASTEL, Germany

CASTEL, Germany

Map: 1:250,000 Sheet K-50

Trier, Coord: QG 1508

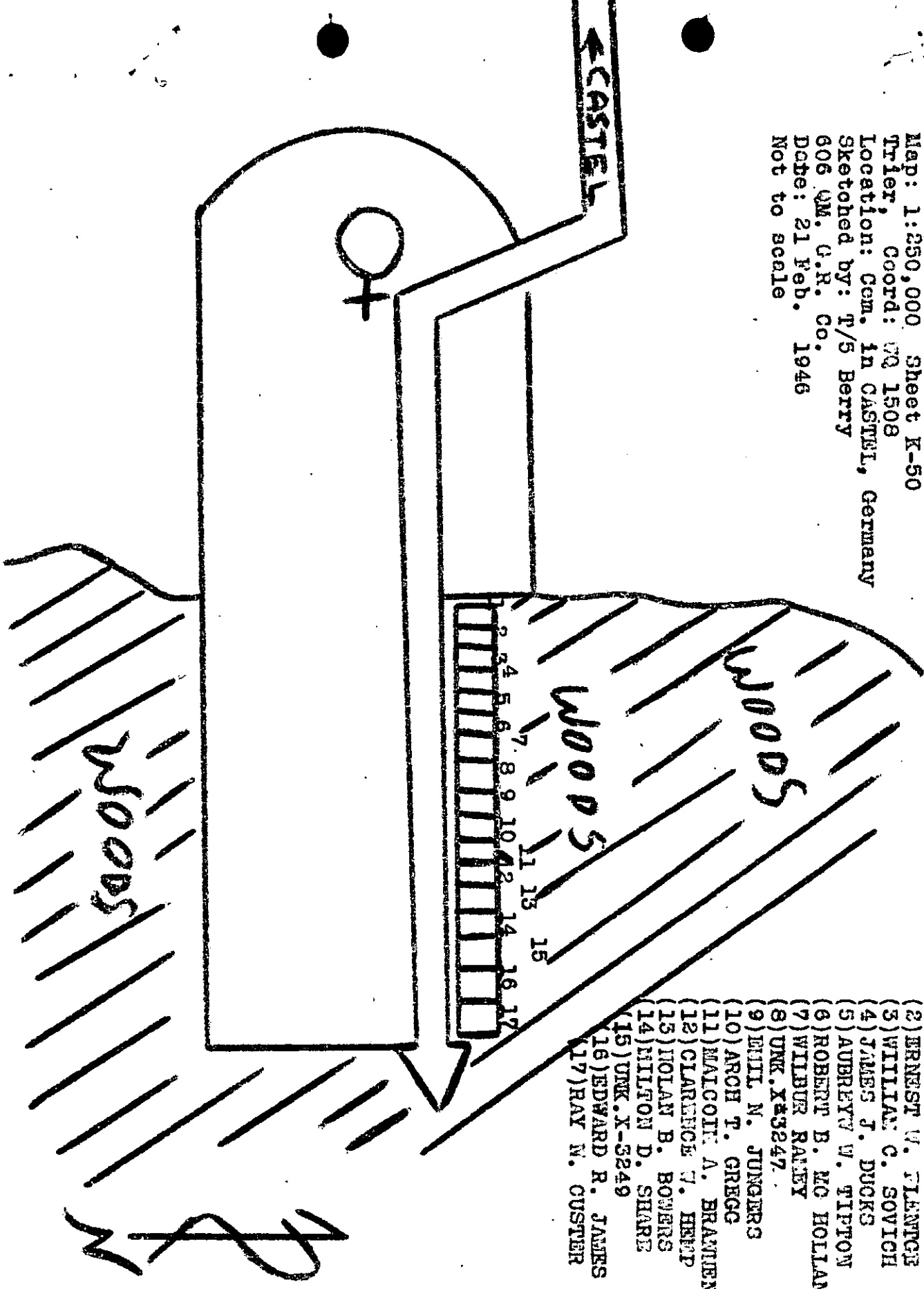
Location: Cem. in CASTEL, Germany

Sketched by: P/S Berry

606 QM. G.R. Co.

Date: 21 Feb. 1946

Not to scale



- (1) UNK. X-3248
- (2) ERNEST W. TLANCIG
- (3) WILLIAM C. SOVICH
- (4) JAMES J. DUCKS
- (5) AUBREY W. PIPFON
- (6) ROBERT B. MC HOLLAND
- (7) WILBUR RALEY
- (8) UNK. X3247.
- (9) ELLI N. JUNGERS
- (10) ARCH T. GREGG
- (11) MALCOLM A. BRAHMAN
- (12) CLARENCE T. HEMP
- (13) HOLLAN B. BOWERS
- (14) MILTON D. SHARP
- (15) UNK. X-3249
- (16) EDWARD R. JAMES
- (17) RAY N. CUSTER