

7887 GRAVES DETACHMENT

AFO 757

943 unk St. Avold X-6004

Attached hereto are case papers for an approved unidentifiable case which are considered to be of investigative importance. Records of this headquarters indicate these case papers were not previously forwarded to OQMG for:

UNKNOWN X - 6004 St Avold

(POC) ST AVOLD

*File*  
*2/1/51*  
*26 Feb 51*

REPORT OF INVESTIGATION AREA SEARCH

3 April 1946  
DATE

Name Unknown X-6004. RANK Unknown ASN Unknown

ORGANIZATION Unknown

MEANS OF IDENTIFICATION \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(All statements above this line will be completed, upon final processing, by the clerical staff at the unit processing point)

SECTION A - GENERAL (To be completed by investigators in all cases)

1. Was positive identity acquired for the deceased through the surface investigation? No if so, state the following information:

a. NAME \_\_\_\_\_ RANK \_\_\_\_\_ ASN \_\_\_\_\_

b. ORGANIZATION \_\_\_\_\_

2. Was partial identification established? No. If so, state the facts as to whom you believe the deceased to be:

a. NAME \_\_\_\_\_ RANK \_\_\_\_\_ ASN \_\_\_\_\_

b. ORGANIZATION \_\_\_\_\_

3. NAMES OF OTHER DECEASED BURIED IN IMMEDIATE VICINITY \_\_\_\_\_

Unknown American

(Use reverse side for listing of crew members from MACR)

A. Date of above burials March 45 Common Graves? No

4. Deleted \_\_\_\_\_

5. Name and type of cemetery \_\_\_\_\_  
(Military or Civilian)

6. Map Coordinates of the Cemetery \_\_\_\_\_

a. Town \_\_\_\_\_ Country \_\_\_\_\_

1- St Avold

X-6004

7. Give exact location in cemetery of the remains.
- a. Section \_\_\_\_\_ Row \_\_\_\_\_ Grave \_\_\_\_\_
- B. In sketch attached? \_\_\_\_\_
8. If remains are not located in a cemetery, give exact location.
- a. Town Benwahr Coordinates Europe sheet V6, 95-490  
1/200000
- b. Is sketch attached? Yes
- c. Is area mined? No
9. How is the grave marked? Cross
10. If grave is marked with cross, give the exact marking thereon \_\_\_\_\_
- 1945 1 Boy of USA.
- a. From what source was this information obtained? unkn.  
(Identification tags, personal effects)
- b. By Whom? \_\_\_\_\_
11. Where are the cemetery records? Mayors office  
(Town Hall, cemetery, burgomaster's office)
- a. What information was contained thereon? None
- b. Where was the information obtained? \_\_\_\_\_
- c. By whom? \_\_\_\_\_
12. What is the date of death? unkn.
- a. Give basis \_\_\_\_\_
13. What is the cause of death? Shot in back
- b. Give basis \_\_\_\_\_
14. What is the date of burial? May 1945
- a. Give basis Sheriff
15. What was the place of death? unkn. Coords \_\_\_\_\_
- Give basis \_\_\_\_\_
16. Where were the remains found? In lings, 5 yards from 1/200.000  
grave. 5.49-18.
- a. By Whom? vice of Colmar

6. Is sketch attached? Yes

17. Was a casket used? No Who furnished the casket? \_\_\_\_\_

Type of casket \_\_\_\_\_ How marked? \_\_\_\_\_

18. Who made the burial? Service of Colmar  
(Civilian, American Mil. or German Mil.)

a. What are the names and addresses? Colmar

b. Are certificates and statements attached? \_\_\_\_\_

SECTION B - AIR CORPS DECEASED (To be completed only if deceased is believed to be a member of the AAF).

19. Were remains found in the plane wreckage? \_\_\_\_\_

a. Give location in plane from which the bodies were removed \_\_\_\_\_

(Tail gunner, pilot, radio turret, etc., or front, side, of plane).

b. Near wreckage? \_\_\_\_\_

20. Scene of crash must be investigated. Give complete results of investigation (if removed, state when and by whom)

a. Type of plane \_\_\_\_\_

b. Markings and/ or name of plane \_\_\_\_\_

c. Give numbers on motors, machine guns, instruments, radios or other equipment: \_\_\_\_\_

21. How did crash occur? Anti-aircraft

Enemy Planes? \_\_\_\_\_

Collision? \_\_\_\_\_

22. Did plane explode in the air? \_\_\_\_\_ On the ground? \_\_\_\_\_

23. Did plane burn in the air? \_\_\_\_\_ On the ground? \_\_\_\_\_

24. What was the direction of the flight? \_\_\_\_\_

25. What was the civilian opinion regarding the destination of the plane? \_\_\_\_\_

26. Had bombs been released prior to the crash? \_\_\_\_\_

27. Does specific time and date of crash correspond with date of death of above-named deceased? \_\_\_\_\_

- 28. Number of planes in formation prior to crash \_\_\_\_\_
- 29. State precise time and date of plane crash \_\_\_\_\_  
(Night? Day?)
- 30. Were parachutists seen? \_\_\_\_\_ How many? \_\_\_\_\_ Escaped? \_\_\_\_\_  
Prisoners? \_\_\_\_\_

SECTION C - ARMORED CORPS DECEASED (To be completed only if deceased is believed to have been a member of the Armored Force).

- 31. Were remains found in wreckage of a tank? \_\_\_\_\_
  - a. Give specific position in tank from which deceased was removed. \_\_\_\_\_  
 (Radio man, driver, assistant driver or... front, side, or back)
  - b. Near wreckage? \_\_\_\_\_
- 32. Location of destroyed tank be investigated. Give complete results of investigation. (If removed, state when and by whom)
  - a. Type of tank \_\_\_\_\_
  - b. Markings and/or name of tank \_\_\_\_\_
  - c. Numbers on motors, machine guns, ammunition, instruments, etc.. \_\_\_\_\_
- 33. What was the type of enemy action that resulted in the tank's disablement? \_\_\_\_\_
- 34. Did tank explode? \_\_\_\_\_ Burn? \_\_\_\_\_
- 35. Number of tanks in immediate vicinity at time of disablement \_\_\_\_\_
- 36. Does specific time and date of disablement correspond with date of death of above named deceased? \_\_\_\_\_
- 37. Precise time and date of destruction of tank \_\_\_\_\_  
(Night? Day?)
- 38. Did any of the crew members escape? \_\_\_\_\_ Prisoners \_\_\_\_\_

SECTION D - OTHER BRANCH (To be filled out if B & C are not applicable)

- 39. Did death occur from any other means? (i.e., truck, jeep, mines, drowning, or small arms fire) Small arms fire
  - If so, give complete and thorough results of the interrogation.
  - a. Are all certificates and statements of people who possessed knowledge of the case attached? Yes
- 40. State the specific clues and evidence that were obtained in securing the name and facts regarding the above listed deceased \_\_\_\_\_

SECTION E - GENERAL (To be completed by investigation in all cases)

41. Were personal effects recovered by the investigating team No

If not, state reason None available

a. Were identification tags found at the time of death? Unkn.

Where? \_\_\_\_\_ By Whom? \_\_\_\_\_

Present disposition \_\_\_\_\_

If deceased is not identified, personal effects will not be forwarded to PE Depot, but will remain with this form until final identification is made, or investigation is abandoned.

b. Were personal effects found at the time of death? \_\_\_\_\_

Where? \_\_\_\_\_ By Whom? \_\_\_\_\_

Present disposition \_\_\_\_\_

c. Was deceased identified by living members of the crew at the time of death? \_\_\_\_\_

No

d. Did Cemetery register or cross indicate the immunization shot? No

42. Was deceased given first aid? Unkn. If so, where? \_\_\_\_\_

By Whom? \_\_\_\_\_ Are statements from the medical people attached? \_\_\_\_\_

43. Was deceased evacuated to a German hospital? No

Where? \_\_\_\_\_ Names of the people concerned \_\_\_\_\_

44. Is it possible on surface investigation to obtain from civilian sources a physical description of the deceased? No

45. Is it possible on surface of investigation to obtain from civilian sources the condition of the remains? Good hole in the back  
(Burnt? Decapitated? et c.): \_\_\_\_\_

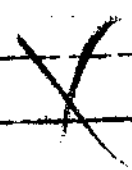
46. Do facts surrounding death show any evidence that it might be an atrocity case? No

a. If so, give basis for positive assumption \_\_\_\_\_

b. If so, has higher headquarters been notified? \_\_\_\_\_

47. Was case previously investigated? No By Whom? \_\_\_\_\_

When? \_\_\_\_\_



48. Give full names, addresses, and information obtained from each person interviewed.

See statements

49. Are all positive statements regarding identification and particulars surrounding death attached? Yes

50. Has any information been given concerning isolated burials in the area outside the immediate vicinity? Yes

51. Was investigation proceeded by advanced publicity? Yes  
(If special investigation, give case number) \_\_\_\_\_

52. Give brief narrative \_\_\_\_\_  
See statement

(Use attached, sheets, if necessary)

*[Handwritten Signature]*

Signature of interpreter

Rank \_\_\_\_\_ ASN \_\_\_\_\_

Organization \_\_\_\_\_

*[Handwritten Signature]*

Signature of investigator

Pfc. 42188156  
Rank \_\_\_\_\_ ASN \_\_\_\_\_

3049 QM Graves Reg Co.  
Organization

Revised 5 January 1946

CHECK LIST OF UNKNOWN  
(to be completely filled out and attached to  
each copy of Report of Interment, MD OMC  
Form 1042)

Unknown X X-6004  
Cemetery U.S. St. Avold.  
Plot 00 Row 3 Grave 36

1. Arrived at cemetery 1500 3 April 1946  
(Hour) (date)
2. Place of death Bennwihr (Ht.-Rhin)  
France (Name of closest town) (V-695490) Eur. Rd. Map  
(Coordinates and letter Prefex, maps)  
Sheet 87, 1:200,000  
Sheet, scale and serials used.
3. Remains recovered or disinterred by 3049 QM GR Co.  
(name and organization)
4. Evacuated to Cemetery by U.P.P.-535 Quartermaster Group  
(name and organization)
5. Description of clothing and equipment: (If clothes do not fit, obtain size from body measurements).

| Item                           | Clothing Markings | Sizes                   | Color                  | Indicate unusual markings wear, tear, repairs, etc. |
|--------------------------------|-------------------|-------------------------|------------------------|---|
| Headgear <u>None</u><br>(Type) |                   |                         |                        |   |
| Raincoat <u>None</u>           | <u>None</u>       | <u>UTD</u>              | <u>UTD</u>             | <u>UTD</u>  |
| Overcoat <u>"</u>              | <u>"</u>          | <u>"</u>                | <u>"</u>               | <u>"</u>  |
| Remnants of Jacket, Field      | <u>"</u>          | <u>Est: 32</u>          | <u>Fur-lined Green</u> | <u>"</u>  |
| Jacket, Combat <u>None</u>     | <u>"</u>          | <u>UTD</u>              | <u>UTD</u>             | <u>"</u>  |
| Mackinaw <u>None</u>           | <u>"</u>          | <u>"</u>                | <u>"</u>               | <u>"</u>  |
| Remnants of Sweater            | <u>UTD</u>        | <u>Est: Med</u>         | <u>Brown</u>           | <u>"</u>  |
| Jacket, HBT <u>None</u>        | <u>None</u>       | <u>UTD</u>              | <u>UTD</u>             | <u>"</u>  |
| Remnants of Shirt, Wool, OD    | <u>UTD</u>        | <u>Est: 14 1/2 x 32</u> | <u>O.D.</u>            | <u>"</u>  |
| Remnants of Undershirt, Wool   | <u>None</u>       | <u>Est: 32</u>          | <u>O.D.</u>            | <u>"</u>  |
| Undershirt, Cotton <u>No</u>   | <u>"</u>          | <u>UTD</u>              | <u>UTD</u>             | <u>"</u>  |
| Trousers, HBT <u>Non</u>       | <u>"</u>          | <u>"</u>                | <u>"</u>               | <u>"</u>  |
| Remnants of Trousers, Wool OD  | <u>UTD</u>        | <u>Est: 32x31</u>       | <u>Green</u>           | <u>"</u>  |

(Officer)



|                               | Markings               | Sizes   | Color | Other details         |
|-------------------------------|------------------------|---------|-------|-----------------------|
| Belt, Web (1)                 | UTD                    | 36      | O.D.  | UTD                   |
| Remnants of                   |                        | Est:    |       |                       |
| Drawers, Wool                 | UTD                    | 32      | O.D.  | "                     |
| None                          |                        |         |       |                       |
| Drawers, Cotton               | "                      | UTD     | UTD   | "                     |
| None                          |                        |         |       |                       |
| Leggings, Wool                | "                      |         |       | (Note unusual lacing) |
| Remnants of                   |                        |         |       |                       |
| Socks, <del>Cotton</del> Wool | UTD                    | UTD     | UTD   | UTD                   |
| None                          |                        |         |       |                       |
| *Shoes (Type)                 | None                   | "       | UTD   | UTD                   |
| None                          |                        |         |       |                       |
| Overshoes                     | None                   | "       | "     | "                     |
| None                          |                        |         |       |                       |
| Web Equipment (Type)          |                        | "       | "     | "                     |
|                               |                        | Est: 34 |       |                       |
| (Other item)                  | One jacket, fur-lined, |         | Green | "                     |

(Other item)

\*If the body is nude, sizes of these items 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. Ground Forces
8. Description of Remains:  
 Age UTD Height 5'7" <sup>Est:</sup> Weight UTD Description of wounds UTD  
 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 Estimated: light  
 (Light, med. dark, clear, pimples, pocks, freckles)  
 Build Estimated: medium  
 (Large, fat, thin, muscular)  
 Hair Blonde, 3 inches, full, straight.  
 (color, length, quantity, curly, wavy, straight, whorls, or definite parting).

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

Sideburns UTD Mustache UTD Beard or Goatee UTD  
 (color, setting, shape) (color, size, shape) (length, heavy, light, color, extent) (size, shape, straight) (size, set close to or far from head)

Nose UTD Ears UTD

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

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

Teeth UTD See attached Tooth Chart  
 (white, size, unevenness, spacing, noticeable crowns, fillings, extractions)

Chin UTD  
 (Prominent, receding, pointed, dimple, double)

Jaw UTD Circumference of head in inches Est. 22 1/2 inches  
 (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)

UTD  
 (extent and quantity of hair)

Hands UTD

Fingers UTD  
 (short, thick, long, slender, size of knuckles, missing fingers or joints). UTD (unusual characteristics of fingernails)

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

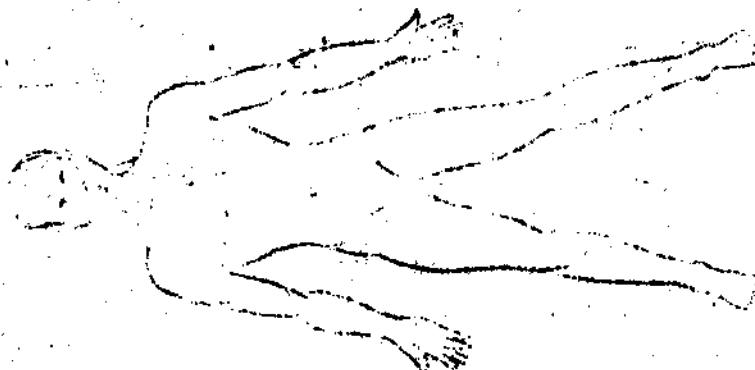
Back UTD Waist UTD  
 (quantity & extent of hair) (size of navel, appendectomy, amount quantity & color of hair Circumcision yes-no Pubic hair (color)

Hernioplasty UTD  
 (Yes - no; location)

Legs 31 inches UTD  
 (inseam, muscular, knock-kneed, bowed, normal, quantity, color & extent of hair).

Feet UTD Toes UTD  
 (size, corns, callouses, flat) (slender, straight, crooked, overlap)  
 Evidence of healed fractures T None  
 (nose, arms, legs, etc..)

9. Black outparts of body not received at cemetery.



10. Have fingerprints been placed on Report of Interment No  
 Yes - no

If not, explain Flesh decomposed

11. Has tooth chart been prepared Yes If not, explain Yes - no  
 (Upper only)

12. Remarks Est. 23 lbs. of bones. All flesh completely decomposed.  
Mandible not recovered with remains.

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

*William D. Lawson III*  
 WILLIAM D. LAWSON III

Officer name

2nd Lt. Inf.

Rank Service

535 Quartermaster Group

Organization

ATTESTATION.

Je soussigné, GREGG, Garde Champetre, certifie que c'est bien un soldat américain qui est mort en combat et est enterré dans la tombe immatriculée No 10 au lieu dit "Champs Bahl".

Nous ne possédons aucun autre renseignement sur ce soldat.

GREGG AUGUST.

INTERPRETER:

JEROME D. SZANCER

COPIER:

~~XXXXX~~  
42100156

STATEMENT.

I undersigned, GREGG, Garde Champetre, certify that it is well an american soldier who died in fighting and is buried in a grave registered #10, at a place called "Champs Bahl". We have no other information about this soldier.

GREGG L. AUGUST.

TRUE COPY.

*John P. Gallagher*  
*1st Lt. Inf.*  
*1st. M. A. Lt.*

UNRECORDED. X - 6004.

REENTERED U.S. MIL. SER.  
BY AVIATION. 00 - 3 - 36.

*[Handwritten mark]*

*[Large handwritten X]*

Je soussigné Groell garde champêtres certifie que c'est bien un soldat américain qui est mort en combattant et est enterré dans la tombe immatriculée n° 10 au lieu dit "Champs Buhl".  
Nous ne possédons aucun autre renseignement sur ce soldat.



Groell August

\*Interprete\*

Tanzard

Jerome Szanger

JEROME D. SZANGER

42188456

8049 Q. M. GRAVES REG Co.  
3 MBV.

I the undersigned Groell garde champêtre certify that it is well an American soldier who died in fighting and is buried in a grave registered n° 10 at a place called "Champs Buhl".  
We have no other information on this soldier.

UNKNOWN X-6004.  
REINTERRED U.S. MIL. CEM.  
ST. AVOLD. 00-3-36.

ORIGINAL.

Groell August

X

Je soussigné secrétaire de mairie certifie que c'est bien un soldat Américain, mort en combattant et inconnu qui a été enterré au lieu dit "Champs Buhls". Sa tombe est numérotée N° 10. Nous ne savons rien en sujet de ce soldat.

*J. Junk*



\*Interprete\*

*[Handwritten signature]*

JEROME D. SZANK  
42188456

8649 Q. M. GRAVES REG. Co.  
3 MBV.

I the undersigned Secretary of Mairie certify that it is well an <sup>unknown</sup> American soldier, killed in fighting it was buried at a place called "Champs Buhls". The grave is registered N° 10. We have no other information on subject of this soldier.

*J. Junk*

*[Large handwritten X mark]*

UNKNOWN X - 6004.  
REINTERRED U.S. MIL. CEM.  
ST. AVOLD. CO - 3 - 36.

ORIGINAL.

S T A T E M E N T.

<sup>UNK.</sup>  
The body of the ~~second~~ American was found in the lines near grave  
He was buried in May, by Service of Colmar, after the area was de-  
lined. The body was in good condition. He is said to have been shot  
in the back.



Jerome D. SZANGER  
Pfc. 42188456  
30490.M. Gr. Reg.

UNKNOWN. X. - 6004.

REINTERRED U.S. MIL. CEM.  
ST. AVOLD. 00 - 3 - 36.



A T T E S T I O N .

Je soussigne, Secrétaire de Mairie, certifie que c'est bien un soldat américain, mort en combattant, et inconnu, qui a été enterré au lieu dit Champs Buhl. Sa tombe est immatriculée N°10. Nous n'avons pas d'autre information au sujet de ce soldat.

G.Fink

Interpreter:

Correard

Jerome D.Szanger.  
42188456.

S T A T E M E N T .

I undersigned, Secretary of Mayor, certify that it is well an unknown american soldier, killed in action, who was buried at a place called "Champs Buhl". The grave is registered # 10. We have no other information about this soldier.

G.Fink.

TRUE COPY

*John P. Gillespie*  
*1st Lt. Inf.*  
*3rd. G. B. U.*

UNKNOWN X - 6004.

REINTERRED U.S. MIL. CEM.  
ST. AVOLD. OO - 3 - 36.

*SBS*

*X*



J' soussigné Becker Maire de Benwiller certifie que c'est bien un soldat Américain qui est mort en combattant et est enterré dans la tombe immatriculée N° 10 au lieu dit "Champ Bahl".  
Nous ne possédons aucun autre renseignement sur ce soldat.



Le Maire:

Becker

\*Interprete\*

J. Carmany

JEROME D. SZANGER  
42188456  
3049 Q. M. GRAVES REG Co.  
3 MBV.

I the undersigned Becker Mayor of Benwiller certify that it is ~~well~~ an American soldier who died in fighting and is buried in a grave registered N° 10 at a place called "Champ Bahl".  
We have no other information on this soldier.

UNKNOWN. X - 6004.  
REINTERRED U.S. MIL. CEM.  
ST. AVOLD. 00 - 3 - 36.

ORIGINAL.

Mayor  
Becker

X

A T T E S T A T I O N .

Je soussigne, BECKER, Maire de Benrwuhr, certifie que c'est bien un soldat americain qui est mort en combattant et est enterre dans la tombe immatriculee No 10 au lieu dit "Champs de Buhl".  
Nous ne possedons aucun autre renseignement sur ce soldat.

Le maire:

B E C K E R,

Interpreter:

Jerome D. SZANGER

Correard.

42188456

S T A T E M E N T .

I undersigned, BECKER, Mayor of Benrwuhr, certify that it is well an americain soldier who died in fighting and is buried in a grave registrated #10, at a place called "Champs-Buhl".  
We have no further information about this soldier.

The Mayor:

B E C K E R.

TRUE COPY.

UNKNOWN. X-6004.

REINTERRED U.S. MIL. CEM.  
ST. AVOLD. CO - 3 - 36.

*John P. Gillespie  
1st Lt.  
3rd. M. G. Co.*

X

ATTESTATION.

Je soussigné, BECKER, Maire de Besswiller, certifie que c'est bien un soldat américain qui est mort en combattant et est enterré dans la tombe immatriculée No 10 au lieu dit "Champs de Buhl".  
Nous ne possédons aucun autre renseignement sur ce soldat.

Le maire:

BECKER,

Interpreteur:

Jarome D. SZANGER

Correspond.

42188456

STATEMENT.

I undersigned, BECKER, Mayor of Besswiller, certify that it is well an american soldier who died in fighting and is buried in a grave registered #10, at a place called "Champs-Buhl".  
We have no further information about this soldier.

The Mayor:

BECKER.

TRUE COPY.

UNKNOWN. I-600A.

RECORDED U.S. MIL. GEN.  
ST. AVULD. 00 - 3 - 36

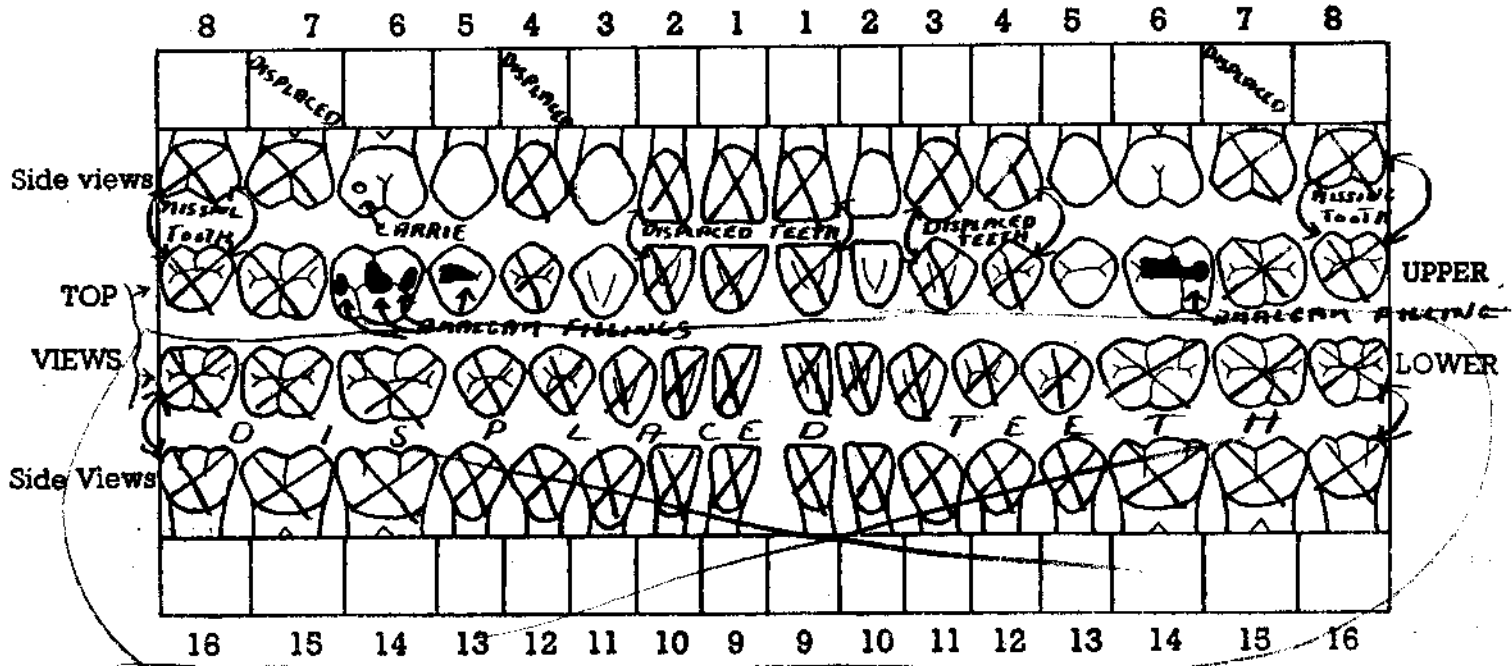
*John P. Lilliepis*  
*1st Lt. Surg.*  
*3rd. M.F. Lt.*

# TOOTH CHART

**UNKNOWN I - 6084** 3rd April, 1946  
 Date  
 Unknown Unknown Unknown Unknown Unknown  
 Last Name First Initial Rank Serial No.  
 Unknown  
 Unit Organization  
**Recon (M-24th), France (out) Feb. 1945** **Small arms fire**  
 Place of Death Date of Death Cause of Death

Right

Left

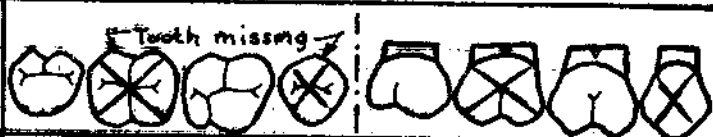


This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

*John A. Trent*

John A. Trent  
 Signature of Officer or other person who prepared Tooth Chart  
 William D. Lawson 1st Lt Inf  
 Verified by G. R. S. Officer

**MISSING TEETH...** All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



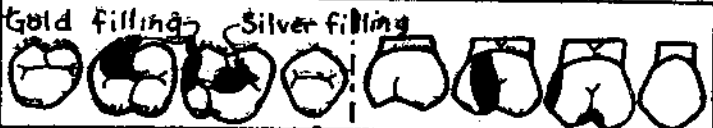
**CROWNED TEETH...** Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



**BRIDGE WORK...** Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



**FILLINGS...** Draw filling on tooth as accurately as possible (Block in and label gold, silver, cement), thus :



**CARIES (CAVITIES).** Outline location and size of cavity, shade in thus :



**DENTURES (PLATES)...** Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

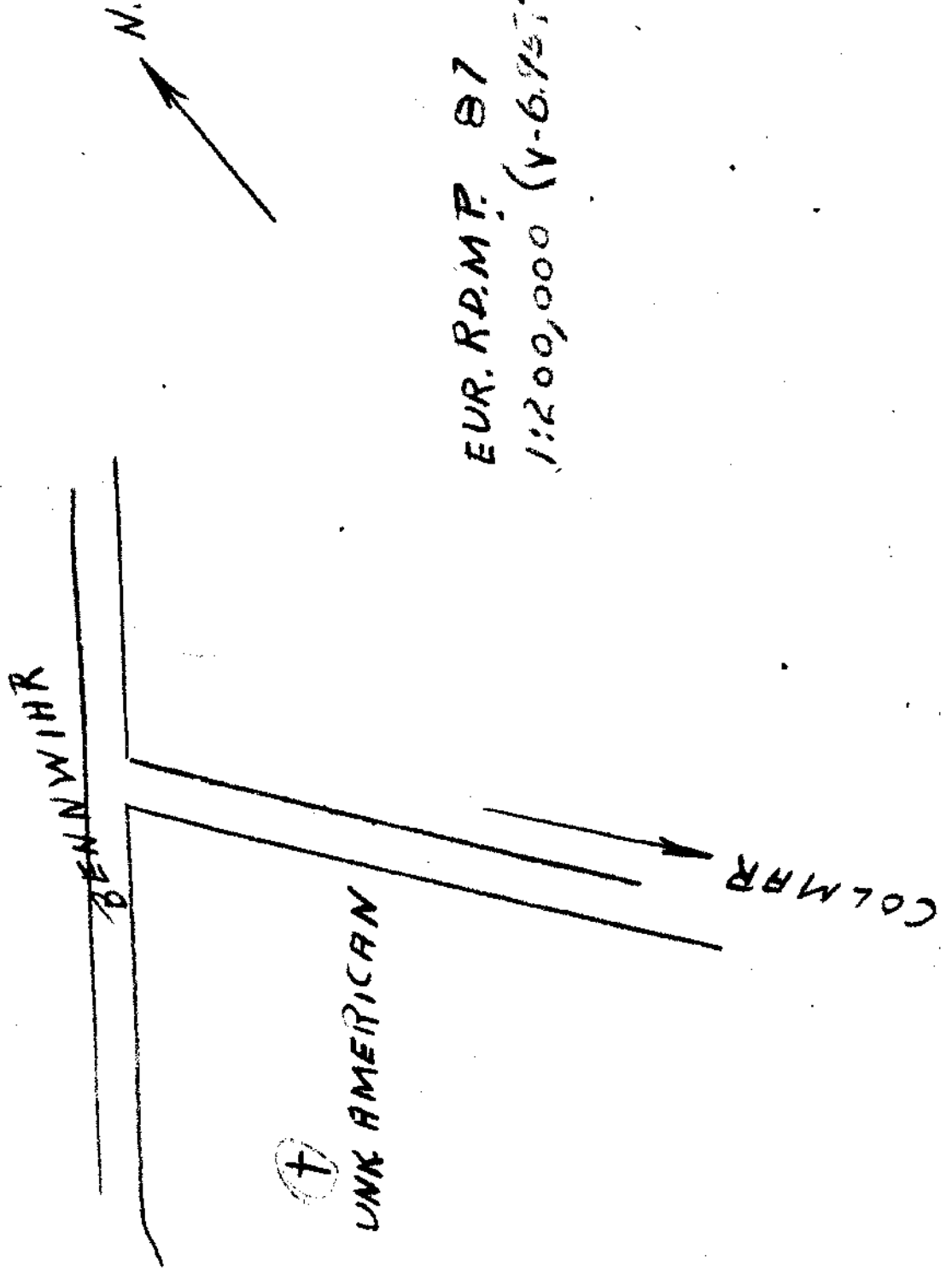
**ADDITIONAL SPACE FOR FURTHER REMARKS**

1. Mandible not recovered with remains.
2. M1, L3, L4, L7, M1, M2, M4, and M7 are displaced teeth.
3. L8 and M2 are granulated over.

ISOLATED GRAVE. BENNWIHR. HAUT RHIN FRANCE.  
M. ED. MAP. SET. 87. 1:200,000. V-695190.

REGISTERED U.S. MIL. GEN.  
ST. AVCLD. 00 - 3 - 36.

As UNKNOWN I - 6004



AGRZ 293.9

3rd Ind.

RIS/bw

THIRD FIELD COMMAND, A.G.R.C., APO 164, U.S. Army. 7 May 1946.

TO: Commanding Officer, American Graves Registration Command, APO 887,  
U.S. Army.

1. Forwarded for your information and records.
2. Paragraph 3. of 2nd Indorsement refers to three (3) unknown Americans. Only two (2) unknown X numbers are given. Reference is also suggested to unknown X-6016, Plot 00, Row 7, Grave 80, St. Avoild Cemetery. This unknown was one of the three men disinterred from that location. Any one of these three unknowns may possible be S/Sgt Vernon L. Bensley.

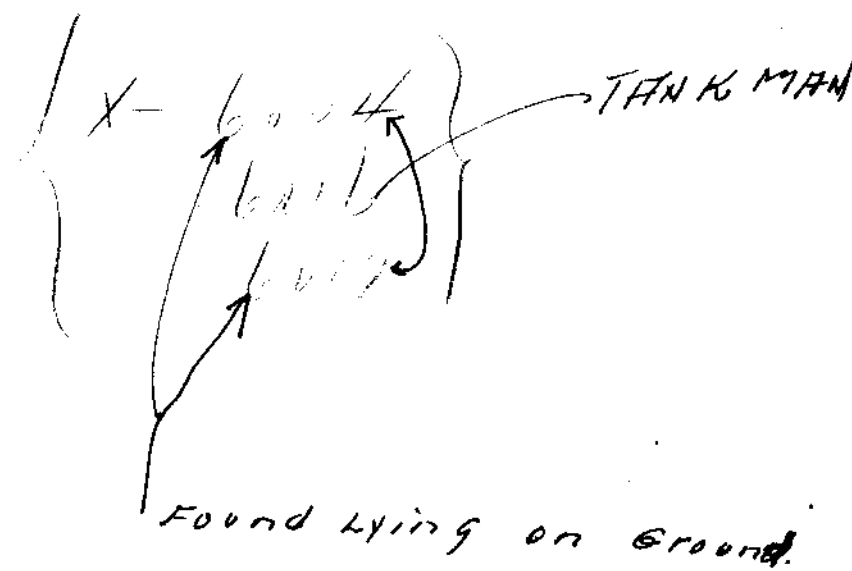
FOR THE COMMANDING OFFICER:

*Ch. well...*

*Robert L. Steiner*  
ROBERT L. STEINER,  
1st Lt., QMC,  
Operations.

Incls: n/c

PHONE:  
Strasbourg 41577  
Ext 18



X

293.9

1st Ind

Third Field Headquarters, AGHC, APO 772, U.S. Army

30 January 1946

To : Commanding Officer, 535th QM Group, APO 772, U.S. Army

For compliance with basic communication.

FOR THE COMMANDING OFFICER:



*Robert L. Steiner*  
 ROBERT L. STEINER  
 1st Lt., QMC  
 Operations

293.9

2d Ind

Headquarters 535th Quartermaster Group, Third Field Command, American Graves Registration Command, European Theater Area, APO 21, US Army, 30 April 1946

TO: Commanding Officer, Third Field Command, American Graves Registration Command, European Theater Area, APO 21, US Army

1. Returned herewith CCP sheet on Subject deceased.
2. A thorough investigation was conducted in the vicinity of Bentwihir to locate the remains of S/Sgt Vernon L. Bensley. The local mayor and other civilians who might have possessed knowledge of isolated graves were contacted, but no one could furnish this information. (See attached statement).
3. In the course of investigation, however, three American graves were discovered. Upon disinterment, the three remains were unidentified. One of the bodies had been removed from a burned-out tank, but the other two were found lying on top of the ground. These two were buried as follows:
 

|                |         |       |           |                     |
|----------------|---------|-------|-----------|---------------------|
| Unknown X-6004 | Plot 00 | Row 3 | Grave 36  | St. Avoild Cemetary |
| Unknown X-6019 | Plot 00 | Row 9 | Grave 102 | St. Avoild Cemetary |
4. There is a possibility that one of the unknowns listed in paragraph 3, above, is the body of S/Sgt Vernon L. Bensley.
5. It is believed that all sources of information on this case have been exhausted, and that further investigation would be futile.

FOR THE COMMANDING OFFICER:

*Roy M. Davenport*  
 ROY M. DAVENPORT  
 1st Lt Inf  
 Asst Operations Officer

TELEPHONE NUMBER:  
Nancy 8575

X



(Non Burial File)  
Haut-Rhin

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
THEATER SERVICE FORCES  
EUROPEAN THEATER

EVB/RED/rs

APO 887

AGRE (IB) 293.9

11 January 1946.

SUBJECT: Isolated Burials.

TO : Commanding Officer, 3rd Field Headquarters, American Graves Registration Command, APO 772, U.S. Army.

1. The following report, received at this Headquarters, is forwarded for your information and necessary action:

S/Sgt Vernon L. Bensley, 37555759, was severely wounded 8 Jan 45, 1000 yards south of Benwiar (Haut-Rhin) France.

2. It is directed that when field investigations are conducted in this area a special effort be made to locate the isolated grave of this soldier.

BY COMMAND OF MAJOR GENERAL LITTLEJOHN:

*Robert E. Doyle*  
ROBERT E. DOYLE

Capt., QMC

ACTG Ass't Adj. Gen.

Telephone:  
ARC 3900, EXT 486



OUT

G.R.S.  
APO 887  
3225-

## IDENTIFICATION CHECK LIST

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

~~Processed by: R. J. Miller~~

~~C. O. Rice~~

~~Clerk: A. G. Richardson~~

E.O. # 707, dtd 14 Jan 48

Unknown X. 6004  
 Cemetery St. Avelde, France  
 Plot 00 Row 3 Grave 36

1. Date reprocessed 12 April 48  
 (Hour) (Date)

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

(Sheet, scale and serials used)

3. Remains reprocessed by MOBILE TEAM #1, I.S.  
 (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<br>color, wear, tear, repairs, etc. |
|------|-------------------|-------|---|
|------|-------------------|-------|---|

X \* Headgear Remnants of steel helmet  
 (Type)

Raincoat \_\_\_\_\_

Overcoat \_\_\_\_\_

Jacket, Field \_\_\_\_\_

Jacket, Combat \_\_\_\_\_

Mackinaw \_\_\_\_\_

X Sweater, Wool OD Remnants of

Jacket, HBT \_\_\_\_\_

\* Shirt, Wool OD \_\_\_\_\_

Undershirt, Wool \_\_\_\_\_

X Shirt, Sun tan Remnants of

X Trousers, HBT \_\_\_\_\_

X \* Trousers, Wool OD \_\_\_\_\_

Remnants of

Belt, web \_\_\_\_\_

Drawers, wool OD \_\_\_\_\_ *Remnants of*

Drawers, cotton \_\_\_\_\_ *Remnants of*

Leggings, wool \_\_\_\_\_

Socks, cotton \_\_\_\_\_

\* Shoes \_\_\_\_\_ (type) \_\_\_\_\_

Overshoes \_\_\_\_\_

Web Equipment \_\_\_\_\_ (type) \_\_\_\_\_

(Other item) \_\_\_\_\_

(Other item) \_\_\_\_\_ *None*

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

Chevrons or \_\_\_\_\_

Insignia \_\_\_\_\_ (Type & location; shirt, jacket, coat, helmet)

Shoulder Patch \_\_\_\_\_

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

6. Description of Remains: *L. Humerus 33.3 L. Femur 47.2*  
*L. Radius 25.1 L. Tibia 38.7*  
*L. Ulna 27.4 L. Fibula 38.1*

Age UTO Height Est. 5'9 1/4" Weight UTO Description of wounds UTO

Bandages or dressings None Scars UTO (Length, width, location)

Tattoos (Number, location - illustrate on separate page)

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

Sunburn or tan, other than hand and face \_\_\_\_\_

Complexion \_\_\_\_\_ (Light, medium, dark, clear, pimples, pocks, freckles)

Build \_\_\_\_\_ (Large, fat, thin, muscular)

Hair Light brown, straight, 1" long (Color, length, quantity, curly, wavy, straight, whorled or definite parting)

Hair UTO (Baldness, widows peak, distinctive cutting or other characteristics)

Sideburns UTO Mustache UTO Beard or UTO (Length, heavy)

Goatee \_\_\_\_\_ (Light, color, extent)

Eyes \_\_\_\_\_ (Color, setting, shape)      Eyebrows \_\_\_\_\_ (Color, bushiness, extent across nose)

Nose \_\_\_\_\_ (Size, shape, straight)      Ears \_\_\_\_\_ (Size, set close to or far from head)

Mouth \_\_\_\_\_ (Large, medium, small)      Lips \_\_\_\_\_ (Small, large, full)

Teeth \_\_\_\_\_ *See Teeth Chart* (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin \_\_\_\_\_ (Prominent, receding, pointed, dimples, double) *(No inch tape measure Available)*

Jaw \_\_\_\_\_ (Large, small, normal)      Circumference of head in *CM. 51cm.* (Hat band)

Neck \_\_\_\_\_ (Size, length, short, normal, wrinkled)      Larynx \_\_\_\_\_ (Prominent, normal)

Shoulders \_\_\_\_\_ (Broad, straight, small, rounded)      Arms \_\_\_\_\_ (Length, muscular, color, extent and quantity of hair)

Hands \_\_\_\_\_

Fingers \_\_\_\_\_ (Short, thick, long, slender, size of knuckles, missing fingers or joints)

\_\_\_\_\_ (Unusual characteristics of fingernails)

Chest \_\_\_\_\_ (Size of nipples, color, quantity and extent of hair, large, small, normal)

Waist \_\_\_\_\_ (Size of navel, appendectomy, amount, quantity, and color of hair)

Back \_\_\_\_\_ (Quantity and extent of hair)      Circumcision *UTA* (Yes-no)      Pubic Hair *Red* (Color)

Hernioplasty \_\_\_\_\_ (Yes-no; location)

Legs \_\_\_\_\_ (Inseam, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

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

Evidence of healed fractures \_\_\_\_\_ *None* (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? Yes (Yes-no)

If not, explain: Fingers missing

8. Has tooth chart been prepared? Yes (Yes-no) If not, explain

9. Remarks Remains received with large amount of flesh in last stage of decomposition. Unmarked clothing was partly on remains, partly in debris, teeth intact in skull, Report of Burial found, no IRS tags found, skull disarticulated, est. wt. of reprocessed remains: 10 lbs. Est. Ht. - 5'9 1/4"

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.

No evidence of old, healed fractures or amputations.

CARL O. RICE  
(Officer's Name)

SP6 AGRC  
Rank Service

MOBILE TEAM #1, I.S.  
(Organization)

Albert G. Richardson



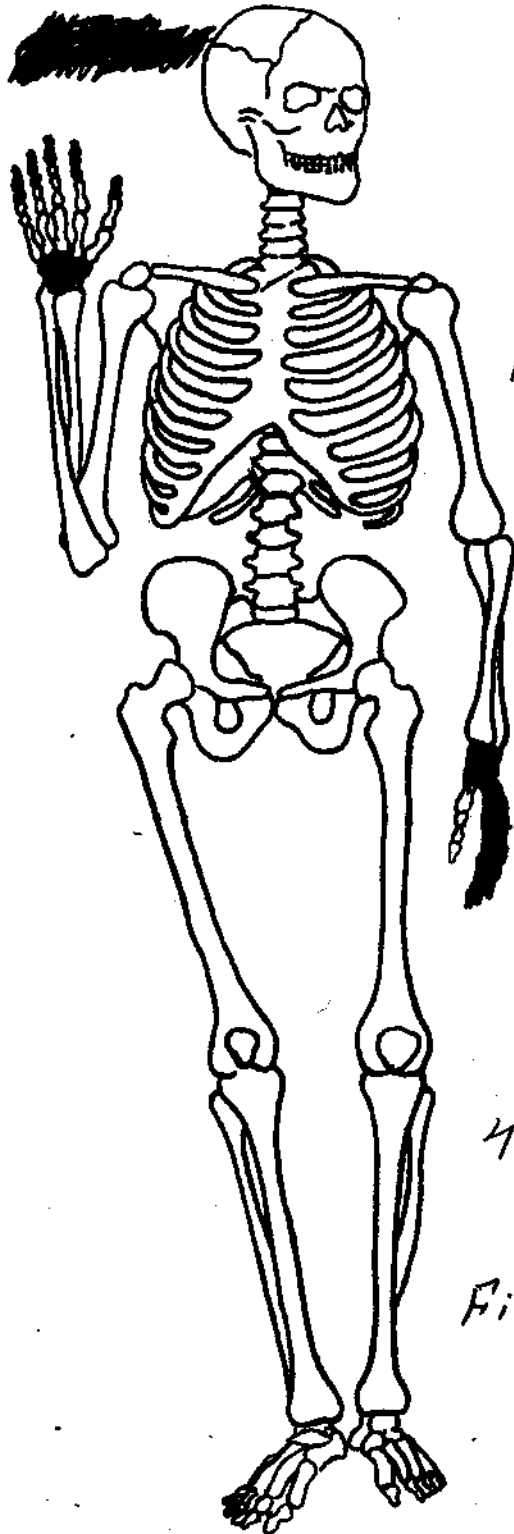
X-6004  
154mc, St. Avoild  
Plot 00, Row 3, Grave 36

# SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

RIGHT

LEFT



Humerus 33.3

Radius 25.1

Ulna 27.4

Femur 47.2

Tibia 38.7

Fibula 38.1

CHART "A"

Est. Ht. 5'9 1/4"

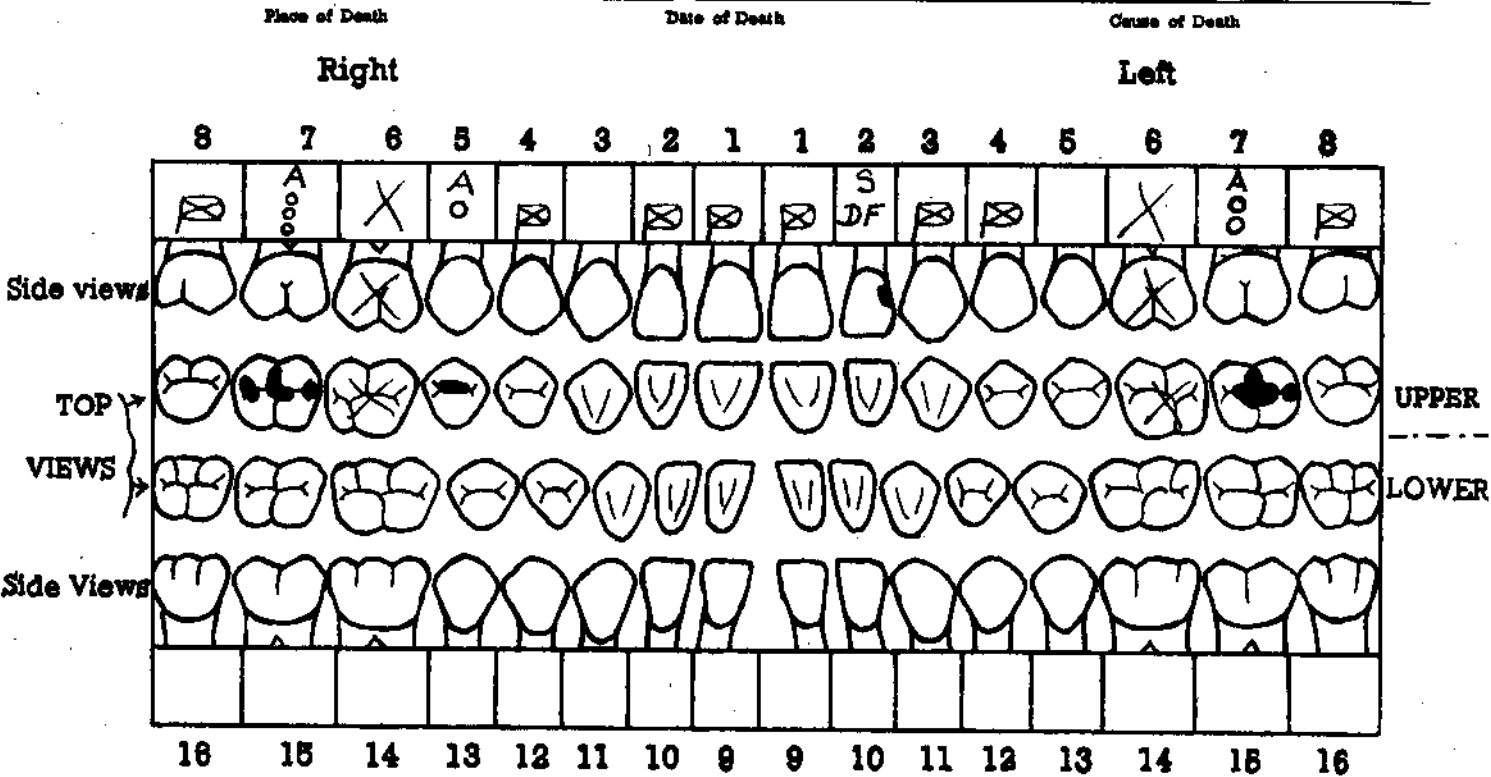
~~E.O.R.~~

# TOOTH CHART

Plot-00  
 Row- 3 E.G.#707.  
 GRAVE- 36  
 USMC - ST. AVOLD

12-APRIL-48

|           |              |         |       |
|-----------|--------------|---------|-------|
| X-6004    |              |         |       |
| Last Name | First        | Initial | Grade |
| Unit      | Organization |         |       |



This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

*See Remarks*

X

*Quart J. Farnham*

SP #7      Dab

Signature of Officer or other person who prepared Teeth chart

Verified by G. R. C. Officer

X

**MISSING TEETH...** All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



**CROWNED TEETH...** Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



**BRIDGE WORK...** Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



**FILLINGS...** Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus :



**CARIES (CAVITIES).** Outline location and size of cavity, shade in thus :



**DENTURES (PLATES)...** Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp"

**ADDITIONAL SPACE FOR FURTHER REMARKS**

= POSTHUMOUSLY MISSING

= BROKEN OR CHIPPED

SPACES: = R-5-7 = NO SPACE (TOUCHING)  
 R-5-7 = NO SPACE (TOUCHING)

COLOR = DULL IVORY

SIZE = AVERAGE

ALIGNMENT = Good

MAXILLA

R-7 = ROTATED  $\frac{1}{8}$  of a TURN MESIALLY.

L-2 = ROTATED  $\frac{1}{16}$  of a TURN DISTALLY.

L-7 = ROTATED  $\frac{1}{8}$  of a TURN MESIALLY.



QMGOD 293, Unknown X-6004, France 1st Ind  
(St. Avoird)

Department of the Army, OQMS, Washington 25, D. C., 23 November 1949

TO: Commanding Officer, Quartermaster Activities, Kansas City Records  
Center (AGO), Missouri ATTENTION: Effects Quartermaster

Unknown X-6004, St. Avoird, France, has been declared unidentifiable.

BY COMMAND OF MAJOR GENERAL FELDMAN:

M. J. INGEMAN  
Major, QMC  
Field Service Division

*P*  
fer

Info from Comment 2, IRS dtd 20 Oct 49, Resol Sec, Mem Div.  
IRS filed in K. C. file

NOV 23 1 34 PM '49  
D. O. M. C.  
MAIL & REG. DIV. BRANCH

*Q*

DEPARTMENT OF THE ARMY  
KANSAS CITY QUARTERMASTER DEPOT  
ARMY EFFECTS BUREAU  
601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

5-26 November 1949

HOC/LL/vlm

28 September 1949

DATE

IN REPLY REFER TO QMDKG 886385

SUBJECT: Disposal of Personal Effects

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

1. Personal effects found on remains interred as Unknown X-8004

Plot 00, Row 5, Grave 36, USMC St. Avoird ✓

France have been held at this Bureau as of 19 May 1949

2. Bureau inspection of the effects has been made and the following description furnished for reference:

**One fork, 1 pocket watch, engraved inside "Zenith Grand  
Prix-Paris 1900 No. 2673950," on face "F. Hetterich  
Brunn," 1 religious medal, 3 souvenir German coins**

3. It is requested that this Bureau be informed whether or not the above listed Unknown decedent has been officially identified.

FOR THE COMMANDING OFFICER:

H. O. CALDWELL  
Effects Quartermaster

93 100/6 x 6000 1000/1000/1000

DEPARTMENT OF THE ARMY  
XXXXXXXXXXXXXXXXXXXX

*att*

AIR MAIL  
QMGOB 295, Unkn X-6004, (USMC, St. Avold) France

21 March 1949

3821

~~QMGOB~~ FIELD SERVICE DEP OPR  
2nd and T. Sts., S. W., Washington 25, D. C.

EFFECTS

QMGOB

1635 - B. Bldg.

Commanding Officer  
Quartermaster Activities  
Kansas City Records Center (AGO), Mo.  
ATT: Effects Quartermaster

XXXX

The personal effects which belonged to Unknown X-6004, St. Avold, France, are being returned to the Bureau under separate cover. The remains of this Unknown are still unidentified.

BY COMMAND OF MAJOR GENERAL FELDMAN:

1 Inc.  
PS Under Sep/Cover

WILLIAM F. CONLON  
Major, GMC  
Field Service Division

R

*[Handwritten signature]*  
MAR 21 3 50 PM '49  
MAIL ROOM  
MAR 21 1949

*X.332.3 Kansas City (Pers. Effects)*

AIR MAIL

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY  
**INTRAOFFICE REFERENCE SHEET**

|          |                                 |  |             | DUE, HOUR AND DATE   |
|----------|---------------------------------|--|-------------|--|
| 1<br>NO. | 2<br>FROM-                      | 3<br>TO-                                     | 4<br>DATE   | 5<br>MESSAGE   |
| 1        | FIELD SERVICE DIV EXEC OFF      | IDENTIFICATION BR MEMORIAL DIV               | 11 MAR      | <p>Forwarded as a matter pertaining to your office.</p> <p>FOR THE CHIEF, FIELD SERVICE DIVISION:</p> <p>1 Attachment:<br/>AEB File &amp;<br/>Tel re PE<br/>Unkn interred<br/>in USMC, St. Avold,<br/>France</p> <p style="text-align: right;"><i>M</i><br/>MUNSTER<br/>5473</p> <p style="text-align: right;"><i>R</i><br/>Romain<br/>3821</p>  |
| **       |                                 |  |             |  |
| 2        | Ident Branch Mem Div<br><br>mbh | Field Service Division<br>ATTN:<br>Exec. Off | 18 Mar 1949 | <p>1. Returned herewith are personal effects of Unknown X-6004, St. Avold, France, forwarded to this Office by Personal Effects Bureau, Kansas City, Missouri.</p> <p>2. Remains are still unidentified.</p> <p style="text-align: right;"><i>B</i><br/>METZ<br/>74059</p> <p style="text-align: right;">BARRY<br/>2462</p> <p>2 Incls:<br/>w/d 1 Incl.<br/>Incl 2. AEB File<br/>Incl 3. PE Unknown X-6004</p> |

THIS FORM WILL REMAIN PART OF THE OFFICIAL FILE

2 Ident Field 18 Mar  
Branch Service 1949  
Mem Div Division  
ATTN:  
Exec. Off

1. Returned herewith are personal effects of  
Unknown X-6004, St. Avoild, France, forwarded to this  
Office by Personal Effects Bureau, Kansas City, Missouri.

2. Remains are still unidentified.

MSTZ  
74059

BARRY  
2462

2 Incls:  
w/d 1 Incl.  
Incl 2. AEB File  
Incl 3. PE Unknown X-6004

mbh

OFFICE THE QUARTERMASTER GENERAL THE ARMY  
**INTRAOFFICE REFERENCE SHEET**

|                  |                            |                                |                   | DUE, HOUR AND DATE _____   |
|------------------|----------------------------|--------------------------------|-------------------|--|
| <sup>1</sup> NO. | <sup>2</sup> FROM-         | <sup>3</sup> TO-               | <sup>4</sup> DATE | <sup>5</sup> MESSAGE   |
| 1                | FIELD SERVICE DIV EXEC OFF | IDENTIFICATION BR MEMORIAL DIV | 14 MAR            | <p>Forwarded as a matter which pertains to your office.</p> <p>FOR THE CHIEF, FIELD SERVICE DIVISION:</p> <p>1 Attachment: <i>for Conlon</i><br/>PE For UNKN X-6004, MUNSTER 5473<br/>USMC, St. Avold, France</p> <p>Conlon 3821</p> |

**THIS FORM WILL REMAIN PART OF THE OFFICIAL FILE**

EU 2345Z

Mar 11 10 16 AM '49

O. Q. M. G.  
TEL. & CAB.  
SECTION

*332. 3 Kansas City*

EUA022 X257

RR UEPOG

FM UWXC 28/CO KCQMA KANS CITY MO 101430Z

TO QMG EFFECTS SECTION FIELD SERVICE DIVISION WASHINGTON D C

WD GRNC

*3-8-49*

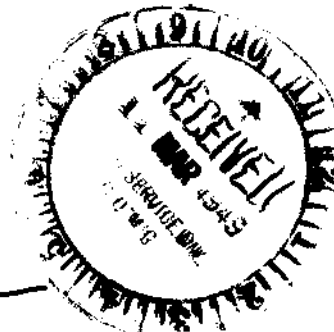
REURTT QOD 314 PERSONAL EFFECTS LABORATORY REPORT CMA INVENTORY CMA  
AND GRAVES LABEL FORWARDED YOUR OFFICE REGISTERED MAIL PACKAGE NO  
867-776 DATED 10 MARCH 1949 LABELED UNKNOWN X-6004 USMC ST AVOLD FRANCE  
CMA PLOT OO ROW 3 GRAVE 36

CFN 314 867-776 10 1949 X-6004 3 36

10/2220Z

**RECORD ATTACHED**

*dep open*



1 Mem Div      Field Ser 1 Mar  
Ident        Division 1949  
Branch      Attn:  
             Exec Off

Request TWX be sent to Effects Bureau requesting the personal effects and any laboratory findings of such effects of the following Unknown interred in USMC, St. Avold, France, be forwarded this Office as an aid to establish identification; Unknown X-6004, Plot 00, Row 3, Grave 36.

mbh

METZ  
74059

BARKY  
2462



332.3 *Memphis City*  
*Per [unclear]*

**COMG, FIELD SERV; DEP OPR; EFFECTS SECTION**

**CO  
QM ACTIVITIES  
KC RECORDS CENTER (AGO), MO  
ATT: EFFECTS QUARTERMASTER**

**P**

**UNCLASSIFIED**

*X 093 Williamson X 2004  
France, x film*

**REQUEST FE AND LABORATORY FINDINGS UNKNOWN INTERRED IN USMC ST PD AVOID CMA  
FRANCE CMA BE FORWARDED THIS OFFICE IN IDENTIFYING UNKNOWN X DASH SIX ZERO ZERO  
FOUR PLOT ZERO ZERO ROW THREE GRAVE THREE SIX END QGD 314 CONLON**

**LARKIN  
CMB**

**UNCLASSIFIED**

**QMFOB 332.3, Kansas City**

**1050  
8 MAR 49**

**WM. T. BROWN  
LT. COLONEL, QMC  
FIELD SERVICE DIVISION**

**1 1**

FORM 332.2  
Kansas City

7 January 1949

SUBJECT: Report on Certain Unknown Decedents

TO : Commanding Officer, Quartermaster Activities  
Kansas City Records Center (ASO), Mr.  
ATT: Effects Quartermaster

1. You are advised that identification has not been established in the cases of the following named (Unknown) decedents:

Unknown X-6992 & 6993, Neuville-en-Coadres, Belgium  
" X-2070, "  
" X-6000, "  
" X-7180, "  
" X-7176, "  
" X-6104, "  
" X-474, Bassa, Luxembourg  
" X-7181-7183, Neuville-en-Coadres  
" X-1881-A, Margraten, Holland  
" X-6430, Neuville-en-Coadres, Belgium  
" X-266, St. Avold, France  
" X-7190 & 7191, Neuville-en-Coadres  
" X-7194 & 7195 "  
" X-7200, 7217 & 7218 "  
" X-7687 "  
" X-1468 "  
" X-6458 thru 6644, ind "  
" X-7170 Neuville-en-Coadres  
" X-108, Fallonia, Italy  
" X-6500, St. Avold, Fr  
" X-6147, "  
" X-6116 "  
" X-6075, "  
" X-6004, "  
" X-1000 "  
" X-3225, "  
" X-3206 "  
" X-3168 "

2. Correspondence from the Bureau making inquiry concerning these Unknowns is returned herewith.

BY COMMAND OF MAJOR GENERAL LARKIN:

GUY D. KESLEY  
Major, MC  
Field Service Division

Q: GOD 293, UNKN X-6004, ST. AVOLD, FRANCE



OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY  
**INTRAOFFICE REFERENCE SHEET**

DUE, HOUR AND DATE \_\_\_\_\_

| 1<br>NO.     | 2<br>FROM-                                       | 3<br>TO-   | 4<br>DATE        | 5<br>MESSAGE  |
|--------------|--|--|------------------|---|
| 1            | Fld Serv<br>Div<br>Exec Off                      | Iden Br<br>Mem Div<br><i>Lee</i>   | 21 Dec<br>48     | <p>For information upon which to base a reply.</p> <p>FOR THE CHIEF, FIELD SERVICE DIVISION:</p> <p>2 Incls:<br/>KC ltr dtd 16 Dec 48<br/>293 Unk X-6004, St Avold</p> <p style="text-align: right;"><i>MUNSTER</i><br/>5473</p> <p style="text-align: right;"><i>Kegley</i><br/>3821</p>   |
| 2<br><br>ejf | Chief<br>Ident<br>Br                             | Chief<br>RR Br<br>ATTN:<br>Captain<br>Snedigar   | 25 Dec<br>1948   | <p>Forwarded as a matter pertaining to your office.</p> <p>2 Incls; n/e</p> <p style="text-align: right;"><i>MacLanau</i><br/>METZ<br/>74059</p> <p style="text-align: right;"><i>SLOANE</i><br/>2462</p>   |
| 3            | Chief<br>Records<br>Section<br>R/R Br<br>Mem Div | Field<br>Service<br>Division<br>Exec Off<br><del>_____</del><br><del>_____</del><br><del>_____</del> | 4<br>Jan<br>1949 | <p>Records this office show that Unk. X - 6004 has not been identified.</p> <p>2 Incls:<br/>KC ltr dtd 16 Dec 48<br/>293 Unk X-6004, St. Avold</p> <p style="text-align: right;"><i>SNEDIGAR</i><br/>5192</p> <p style="text-align: right;"><i>Carrick</i><br/>CARRICK<br/>74397</p> <p style="text-align: center;">IDENTIFICATION DIVISION</p> |

SLG/ML

1  
 U.S.G, ST. AVOLD FRANCE Buried at deceased L : WAMBA HENRY L JR  
 Plot F, 10, Grave 20 19121086 PFC  
 Date reburied: 22 Jan 49 **DISINTERMENT DIRECTIVE**  
 Right: LASSITER HASKELL R  
 38319639 SGT

SECTION A - NAME AND BURIAL LOCATION OF DECEASED  
 DEWEY R. BELL 1st Lt. CAV  
 DIRECTIVE NUMBER 3574 00000  
 DATE 15 01 48  
 DAY MONTH YEAR

NAME UNKNOWNX-006004 SERIAL NUMBER RANK ARM DATE OF DEATH  
 8  
 CEMETERY ST AVOLD - METZ 3 0 DISPOSITION OF REMAINS  
 3503 80  
 CODE DIST. PT.

PLOT ROW GRAVE COUNTRY CAUSE OF DEATH  
 00 3 36 FRANCE 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- 006004 SERIAL NUMBER RANK DATE OF DEATH DATE DISTINTERRED  
 6 Jul 48  
 IDENTIFICATION TAG ON ORGANIZATION RELIGION IDENTIFICATION VERIFIED BY  
 REMAINS EMB UNKNOWN Forrest L Brown, Embalmer  
 MARKER GRS NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT  
 NATURE OF BURIAL MATTRESS cover  
 CONDITION OF REMAINS Missing mandible. Disarticulated. Fracture of right radius. Small amount of decomposed flesh.

OTHER MEANS OF IDENTIFICATION  
 Report of Burial found with remains, dated 5 Apr 46.

MINOR DISCREPANCIES  
 None

REMAINS PREPARED AND PLACED IN CASKET  
 DATE 12 Jul 48 BY Forrest L Brown, Embalmer

CASKET SEALED BY FORREST L BROWN, EMBALMER  
 EMBALMER (Signature) Forrest L Brown

CASKET BOXED AND MARKED 12 Jul 48 Forrest L Brown, Embalmer  
 SHIPPING ADDRESS VERIFIED BY all markings, tags & plates verified by: Donald H Tackett, 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.  
 Final casketing by Donald H Tackett, 1st Lt QMC, 7857 AGRC Zone 3 Hq  
 Donald H Tackett, 1st Lt QMC SIGNATURE OF GRS INSPECTOR

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies. FILE  
 15 APR 1948

Units 2948

8392

19

8392

REC

Valhalla # 2948  
 886,385  
 142  
 19 May 48  
 JAN 16 1950  
 8392

Valhalla # 2948  
 886,385  
 142  
 19 May 1948  
 APR 25 1949  
 8392

Bennwihr, le 17 Mars 1946

**M A I R I E**  
D E



**B E N N W I H R**

ARRONDISSEMENT

de

R I B E A U V I L L É ( H A U T - R H I N )

Je soussigné le maire de Bennwihr autorise  
les services Américains qualifiés à cet  
effet et exclues le corps du soldat  
Américain inconnu enterré dans le  
lieu dit champs de Bulh tombe  
immatriculée N° 40



Le Maire:

*Becker*

UNKNOWN X # 6004.

REINTERRED U.S. MIL CEM.  
ST. AVOLD. 00 - 3 - 36.

X

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

22 Dec 1948

Date

*293 Unknown France X-6004 (St. Avoird)*

SUBJECT: Unidentifiable Remains

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

1. The records pertaining to Unknown X- 6004, Plot 00, Row 3, Grave 36, USMC St. Avoird, 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. \_\_\_\_\_, dated \_\_\_\_\_, No further information is available.

FOR THE COMMANDING GENERAL:

/s/ George L. Freeman  
/t/ GEORGE L. FREEMAN  
1st Lt QMC  
Actg Asst Adj Gen

15 MAR 1949

QOMG

Unidentifiable from  
information presently  
available

*file 15 Mar 49  
Holden  
Sellers Bow*



HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

REF 200.2

Date 2 JUN. 1948

SUBJECT: Reprocessing of Remains

TO: The Quartermaster General  
2nd & T Sts. S.W.  
Washington 25, D.C.

The remains of X-6004  
interred in Plot 00, Row 3, Grave 36, USMC St-Avoid  
France, have been reprocessed and the information  
not previously forwarded to your Headquarters is herewith submitted.

Headgear : Remnants of steel helmet

Sweater, wool OD : Remnants of

Shirt, wool OD : Remnants of

Undershirt, wool : Remnants of

Shirt, suntan : Remnants of

Trousers, wool OD : Remnants of

Belt, web : Remnants of

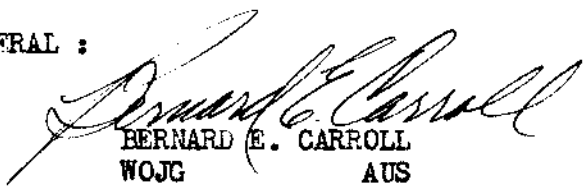
Drawers, wool OD : Remnants of

Est. height : 5' 9 $\frac{1}{4}$ "

Hair : Light Brown, straight, 1" long

FOR THE COMMANDING GENERAL :

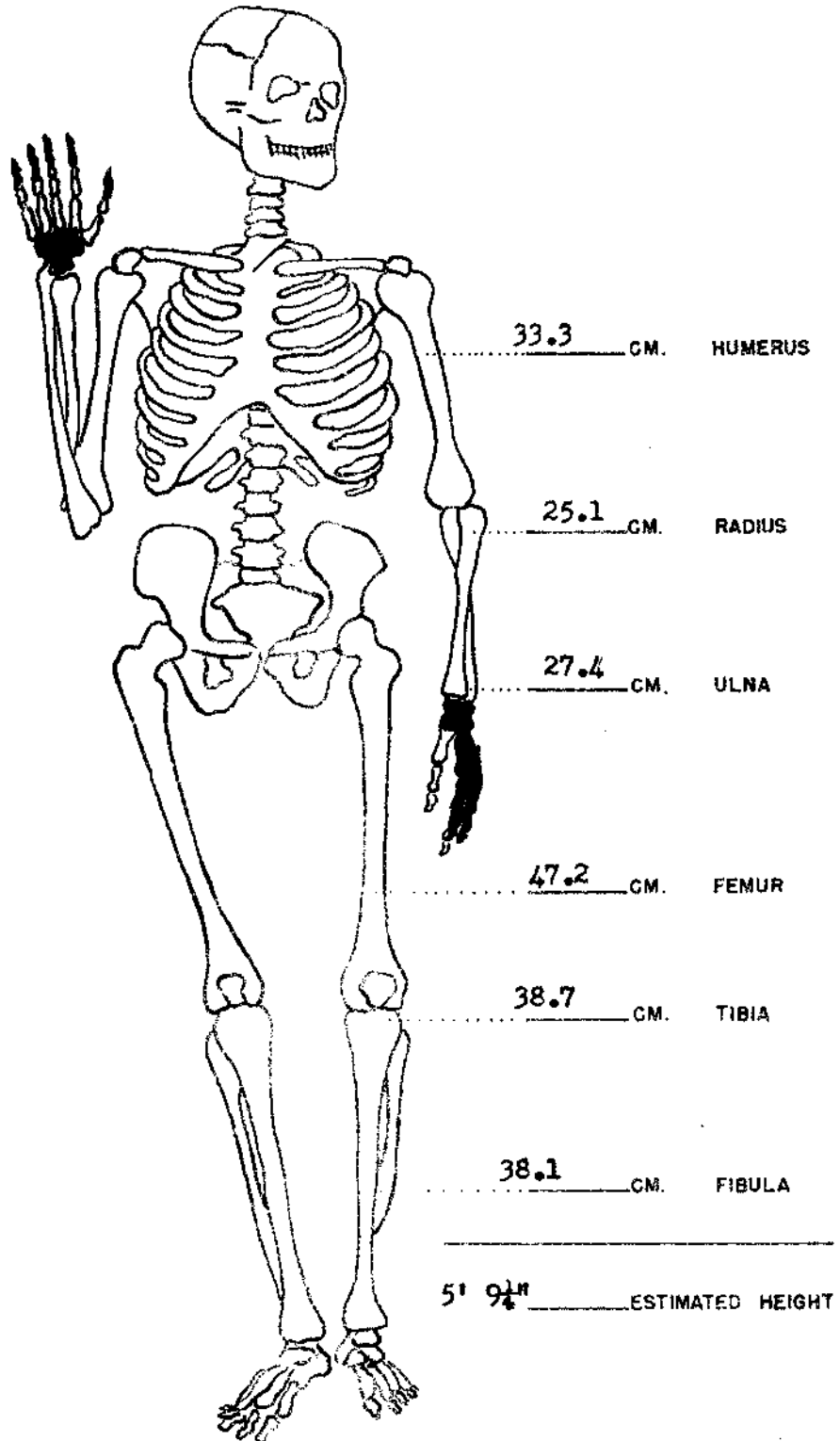
2 Incls : 1. Skeletal Chart  
1. Tooth chart

  
BERNARD E. CARROLL  
WOJG AUS  
Actg Asst Adj Gen.

X-6004  
USMC St-Avoid  
Plot 00, Row 3, Grave 36

# SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED)



PROCESSED BY: \_\_\_\_\_

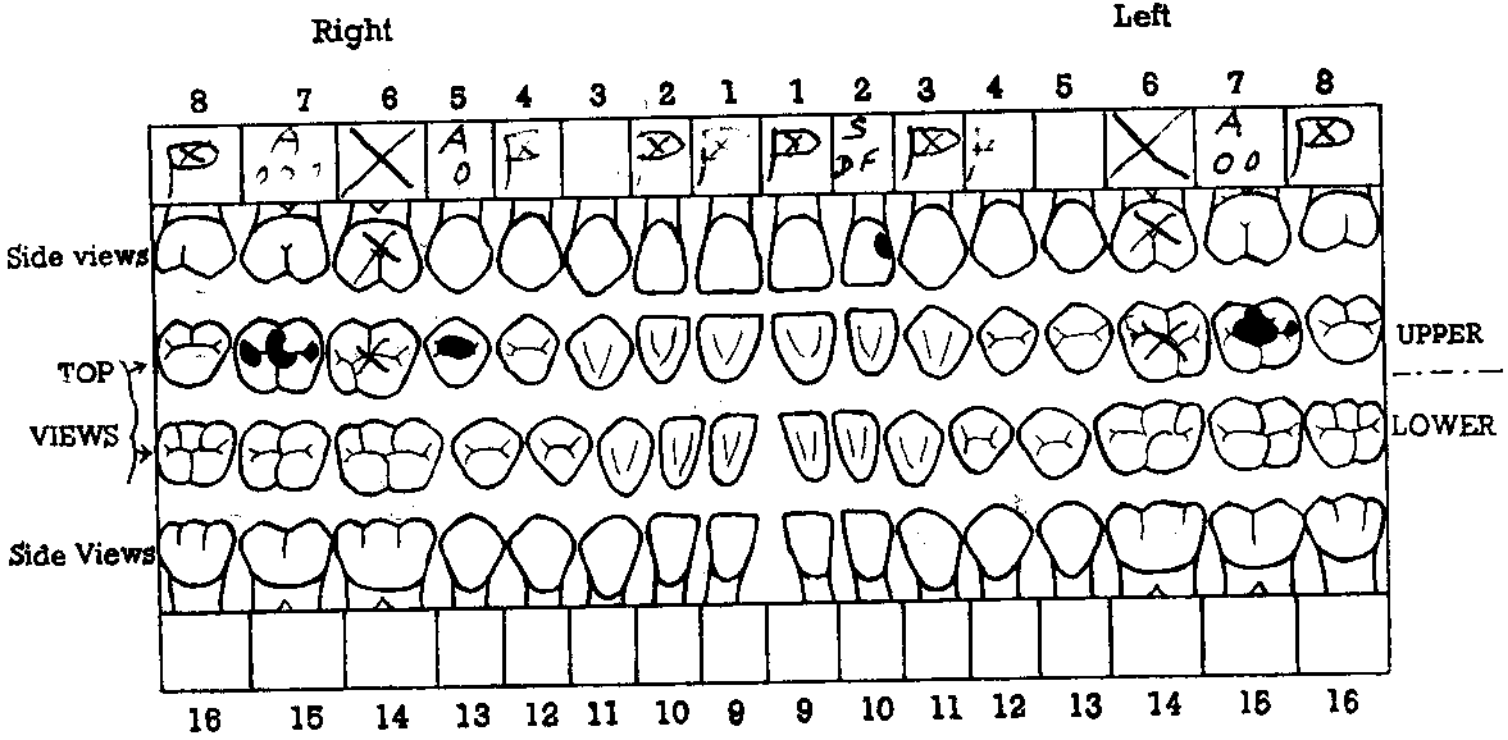
Plot 00  
 Row 3 E.O. #707  
 Grave 36

# TOOTH CHART

ST AVOLD

12 April 48

|                |       |               |              |                |      |
|----------------|-------|---------------|--------------|----------------|------|
| X-6004         |       |               | Unk          |                | Date |
| Last Name      | First | Initial       | Grade        | Unk            |      |
| Unit           |       |               | Organization |                |      |
| Place of Death |       | Date of Death |              | Cause of Death |      |



This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspid (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

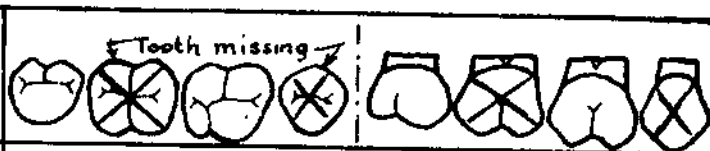
Certified True Copy:  
*Bernard E. Carroll*  
 BERNARD E. CARROLL  
 USJG US

/s/ Ivor J. Fosmo

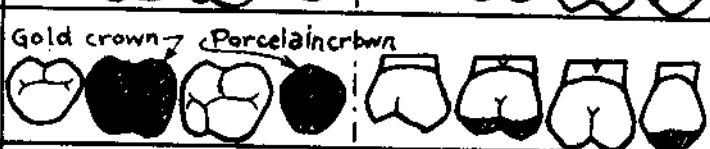
Signature of Officer or other person who prepared Tooth chart

Verified by G. R. C. Officer

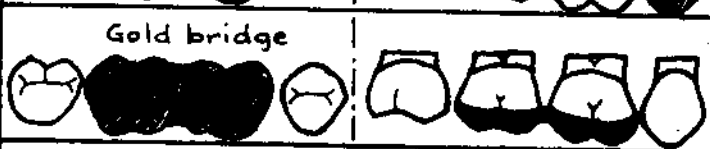
**MISSING TEETH**... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



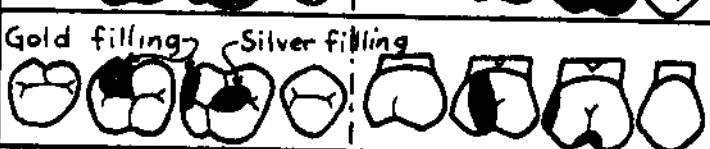
**CROWNED TEETH**... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



**BRIDGE WORK**... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



**FILLINGS**... Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus :



**CARIES (CAVITIES)**. Outline location and size of cavity, shade in thus :



**DENTURES (PLATES)**... Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp"

**ADDITIONAL SPACE FOR FURTHER REMARKS**

Posthumously missing

Broken or chipped

Spaces : R-5-7 no space (touching)

L-5-7 no space (touching)

Color Dull Ivory

Size Average

Alignment Good

Maxilla

R-7 rotated 1/8 of a turn mesially

L-2 rotated 1/16 of a turn distally

L-7 rotated 1/8 of a turn mesially

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

RRE 293

22 DEC 1948  
(Date)

SUBJECT: Unidentifiable Remains.

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

1. The records pertaining to Unknown X - 6004, Plot 00  
Row 3, Grave 36, USMC St-Avoid, 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. No record this HQ, dated \_\_\_\_\_.

No further information is available.

FOR THE COMMANDING GENERAL:

*George L. Freeman*  
GEORGE L. FREEMAN  
1st Lt QMC  
Actg Asst Adj Gen

received 15 MAR 1949 OQMG  
Unidentifiable from  
Information presently  
available


*OK  
2 grave 48*

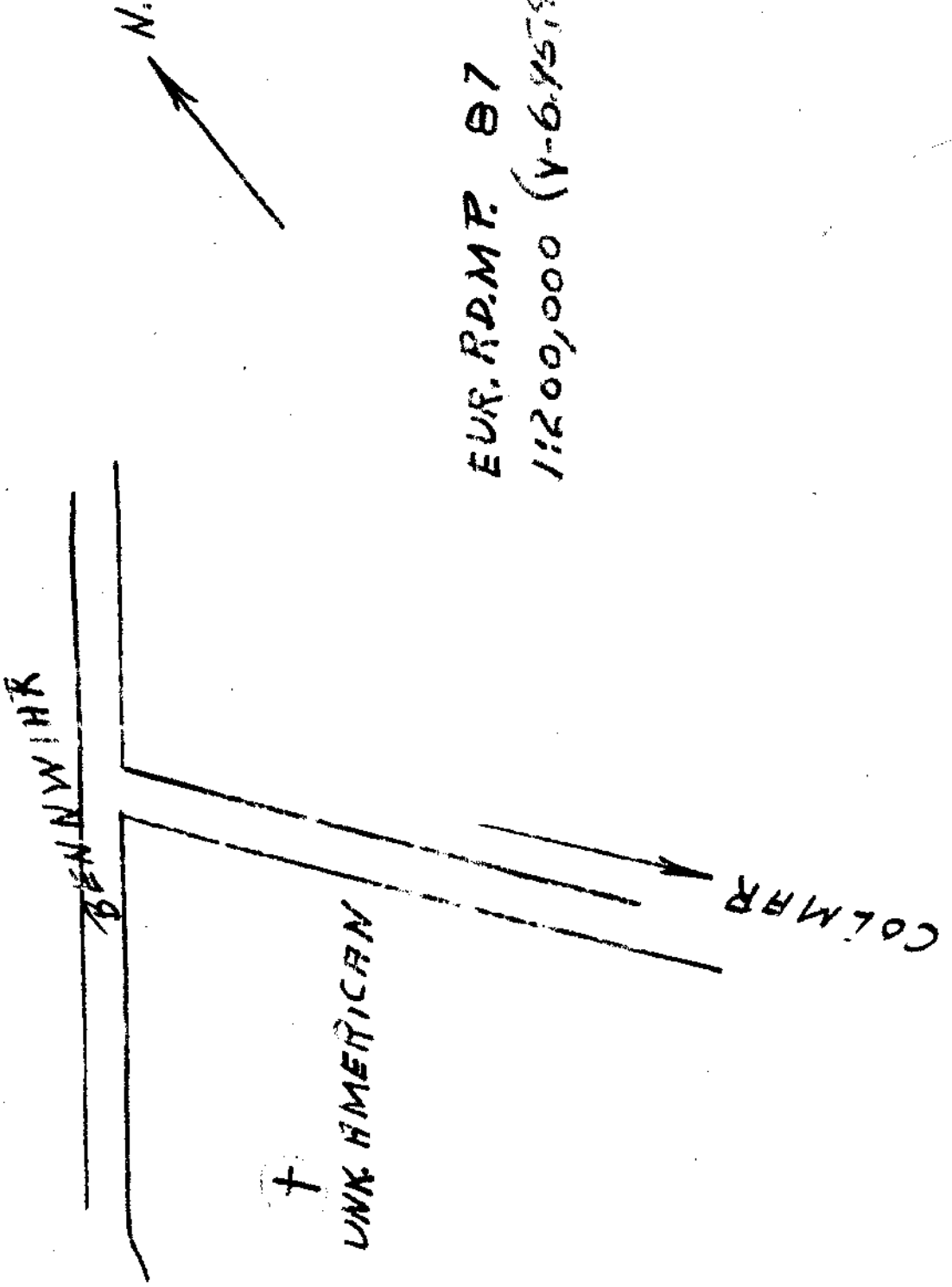
*ms Holden*

*I 1101 # 49*

ISOLATED GRAVE. BENNWHR. HAUT RHIN FRANCE.  
EU. P.O. MAP. SHT. 87. 1:200,000. V-695490.

REGISTERED U.S. MIL. C.M.  
ST. AVOLD. CO - 3 - 36.

As UNKNOWN X - 6004. 



C  
O  
P  
Y

CENTRAL IDENTIFICATION LABORATORY  
AMERICAN GRAVES REGISTRATION COMMAND 349 QM BN  
APO 58 (Fontainebleau) US ARMY

28 July 1947

Reprocessed Paris Case

Chemical Lab Case # 1188

Other designations:

Unknown # X-6004      St. Avold

Inventory of Effects:

- (a) One silver watch, pocket-style, of Zenith make with a white dial and arabic numerals.
- (b) One coin purse
- (c) One red plastic cigarette case
- (d) One sewing ket
- (e) One razor blade
- (f) Three German souvenir coins
- (g) One religious medal
- (h) One fork (silver) one "cock" engraved on handle

Laboratory Findings:

- (a) "Grand Prix Paris 1900" on back  
Number 267395 appears twice as watch no.
- (b) Negative for identifying marks.
- (c) Negative for identifying data.
- (d,e,f,g,h,) Negative for identifying data.

Tel:Fontainebleau 5711  
Ext. 143

/s/ Liviol. Vagnina  
LIVIOI. VAGNINA  
Identification Tech

C  
O  
P  
Y

C  
O  
P  
Y.

RESTRICTED  
INVENTORY FORM

US MIL CEM ST. AVOLD, FRANCE  
PLOT: 00 ROW: 3 Grave: 36

4 April 1946

SUBJECT: Inventory of Personal Effects of:

| <u>Unknown X, 6004</u>                                   | <u>Unk</u>   | <u>Unk</u>     |
|--|--------------|----------------|
| (Last name)  | (First name) | (Mi)           |
|  | (Rank)       | (ASN)          |
| TO: Effects Quartermaster, Communications Zone, APO      |              | U.S. Ar        |
| The above named individual of _____                      |              |                |
|  | (Unit)       | (Organization) |
| was reported _____ about _____                           |              | 19             |
| Status (kia, mia, hosp., etc)                            |              | (Date)         |
| Designated Beneficiary if information readily accessible |              |                |

INVENTORY OF EFFECTS

- One (1) watch silver pocket style and of Zenith make with a white dial and arabic numerals "Grand Prix Paris 1900" on back
- One (1) coin purse
- One (1) cigarette case red
- One (1) sewing kit
- One (1) packet razor blades
- Three (3) German coins: One (1) Pfennig coin One (5) Pfennig coin One (10) Pfennig coin
- One (1) religious medal One (1) fork silver

Money in the amount of \_\_\_\_\_ has been turned into \_\_\_\_\_  
(Name of Finance Office)

\_\_\_\_\_ Form WDFD 38 enclosed.  
(and Symbol Number)

Names and addresses of any Banks in which accounts may be carried  
I certify that the above items constitute all of the effects, secured  
by me, of the above named individual and that they were forwarded to  
the Effects Depot by \_\_\_\_\_ on 21 August 1946  
(rail, truck, etc.) through AGRC

NAME RALPH W. SLEATOR  
Rank & ASN Major, Inf. 0240335  
Organization 3rd Field Command

Any additional pertinent information:

AG ETO Form No26

RESTRICTED

COPY



Revised 5 January 1946

CHECK LIST OF UNKNOWN

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

Unknown X 6004  
 Cemetery St. Vol.  
 Plot 62 Row 3 Grave 36

1. Arrived at cemetery 1500 3 April 1946  
 (Hour) (date)
2. Place of death Bennwihr (Ht.-Rhin)  
France (V-695490) EUR. Bd. Map  
 (Name of closest town) (Coordinates and letter  
 Prefex, maps)  
Sheet 87, 1:200,000  
 Sheet, scale and serials used.
3. Remains recovered or disinterred by 3049 M GR Co.  
 (name and organization)
4. Evacuated to Cemetery by U.P.P.-535 Quartermaster Group  
 (name and organization)
5. Description of clothing and equipment: (If clothes do not fit, obtain size  
 from body measurements).

| Item                             | Clothing<br>Markings | Sizes                       | Color                      | Indicate unusual markings<br>wear, tear, repairs, etc. |
|----------------------------------|----------------------|-----------------------------|----------------------------|--|
| Headgear <u>None</u><br>(Type)   |                      |                             |                            |  |
| Raincoat <u>None</u>             | <u>None</u>          | <u>UTD</u>                  | <u>UTD</u>                 | <u>UTD</u>   |
| Overcoat "                       | "                    | "                           | "                          | "  |
| Remnants of<br>Jacket, Field     | "                    | <u>Est:<br/>32</u>          | <u>Fur-lined<br/>Green</u> | "  |
| Jacket, Combat <u>None</u>       | "                    | <u>UTD</u>                  | <u>UTD</u>                 | "  |
| Mackinaw <u>None</u>             | "                    | "                           | "                          | "  |
| Remnants of<br>Sweater           | <u>UTD</u>           | <u>Est:<br/>Med</u>         | <u>Brown</u>               | "  |
| Jacket, HBT <u>None</u>          | <u>None</u>          | <u>UTD</u>                  | <u>UTD</u>                 | "  |
| Remnants of<br>Shirt, Wool, OD   | <u>UTD</u>           | <u>Est:<br/>14 1/2 x 32</u> | <u>O.D.</u>                | "  |
| Remnants of<br>Undershirt, Wool  | <u>None</u>          | <u>Est:<br/>32</u>          | <u>O.D.</u>                | "  |
| <u>No</u><br>Undershirt, Cotton  | "                    | <u>UTD</u>                  | <u>UTD</u>                 | "  |
| Trousers, HBT <u>Non</u>         | "                    | "                           | "                          | "  |
| Remnants of<br>Trousers, Wool OD | <u>UTD</u>           | <u>Est:<br/>32 x 31</u>     | <u>Green</u>               | "  |

(Officer)

|   | Markings | Sizes   | Color | Other details         |
|---|----------|---------|-------|-----------------------|
| Belt, Web (1)                           | UTD      | 36      | O.D.  | UTD                   |
| Remnants of Drawers, Wool               | UTD      | Est: 32 | O.D.  | "                     |
| Drawers, Cotton                         | "        | UTD     | UTD   | "                     |
| Leggings, Wool                          | "        |         |       | (Note unusual lacing) |
| Remnants of Socks, <del>Synthetic</del> | UTD      | UTD     | UTD   | UTD                   |
| *Shoes (Type)                           | None     | "       | UTD   | UTD                   |
| Overshoes                               | None     | "       | "     | "                     |
| Web Equipment (Type)                    | "        | "       | "     | "                     |
| (Other item)                            | Est: 34  |         |       |                       |
| One jacket, fur-lined,                  |          |         | Green | "                     |

(Other item)

\*If the body is nude, sizes of these items 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. Ground Forces
8. Description of Remains:  
Age UTD Height 5'11" Weight UTD Description of wounds UTD
- 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 Estimated: light  
(Light, med. dark, clear, pimples, poeks, freckels)
- Build Estimated: medium  
(Large, fat, thin, muscular)
- Hair Blonde, 3 inches, full, straight.  
(color, length, quantity, curly, wavy, straight, whorls, or definite parting).

# TOOTH CHART

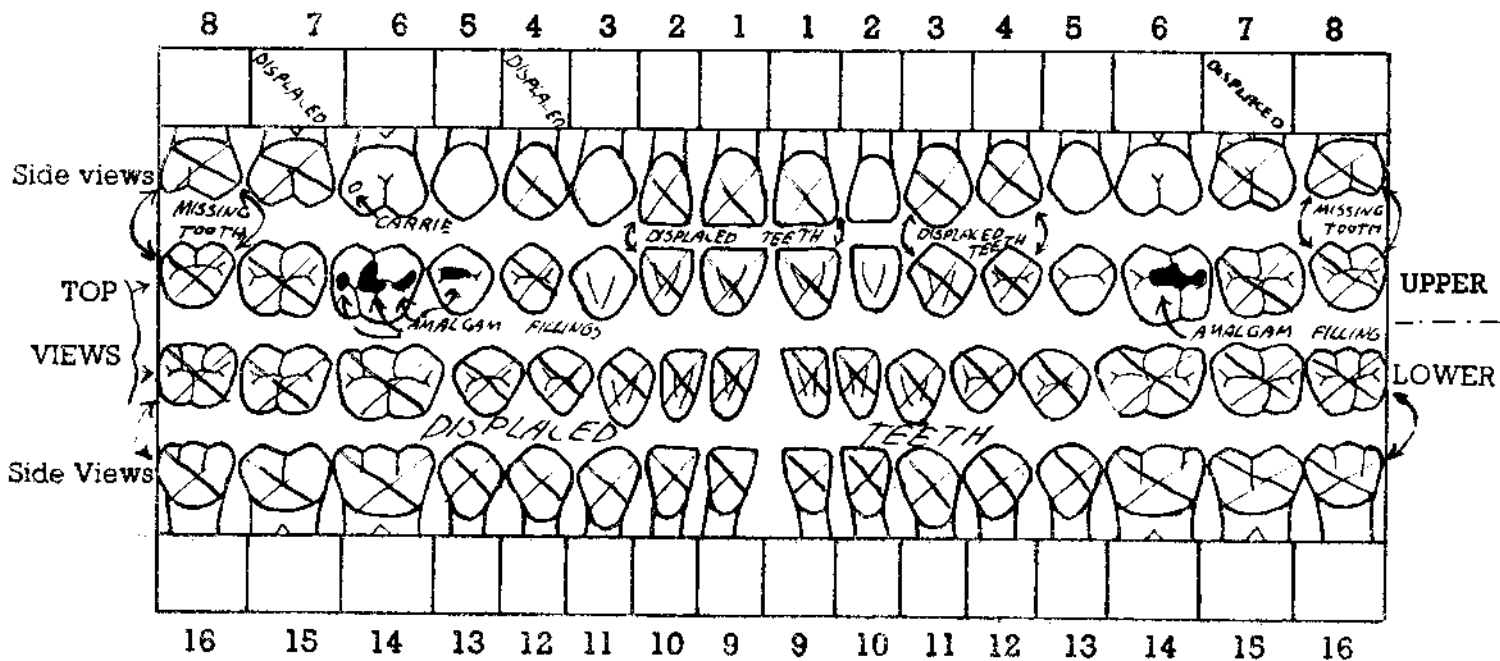
UNKNOWN X - 6004.

3rd April 1946  
 Date

Unknown Last Name      Unknown First      Unknown Initial      Unknown Rank      Unknown Serial No.  
 Unknown Unit      Unknown Organization  
 Bennyahr (MC-Rhin) France      (est) Feb. 1945      small arms fire  
 Place of Death      Date of Death      Cause of Death

Right

Left

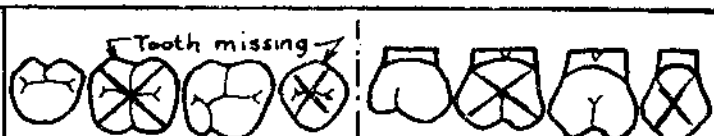

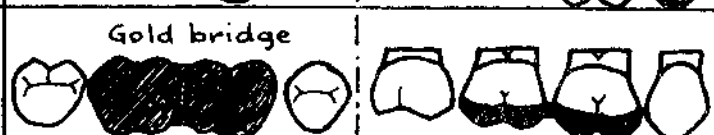
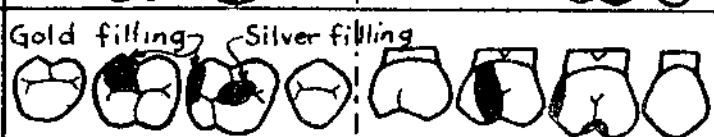



This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

John A. Trent

Signature of Officer or other person who prepared Tooth chart

*William D. Lawson III*  
 William D. Lawson III 2nd Lt. Inf.  
 Verified by G. R. S. Officer

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

**DENTURES (PLATES)...** Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

**ADDITIONAL SPACE FOR FURTHER REMARKS**

1. Mandible not recovered with remains.
2. L1, L3, L4, L7, R1, R4, and R7 are displaced teeth.
3. L8 and R8 are granulated over.

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

Sideburns UTD Mustache UTD Beard or Goatee UTD  
 (color, setting, shape) (color, size, shape) (length, heavy,  
 light, color, extent) (size, shape, straight) (size, set close to  
 or far from head)

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

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

Teeth ~~UTD~~ **See attached Tooth Chart**  
 (white, size, unevenness, spacing, noticeable crowns, fillings, extrac)

Chin UTD  
 (Prominent, receding, pointed, dimple, double)

Jaw UTD Circumference of head in inches Est. 22 1/2 inches  
 (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  
UTD  
 (extent and quantity of hair)

Hands UTD

Fingers UTD  
 (short, thick, long, slender, size of knuckles, missing fingers or  
UTD UTD  
 joints). (unusual characteristics of fingernails)

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

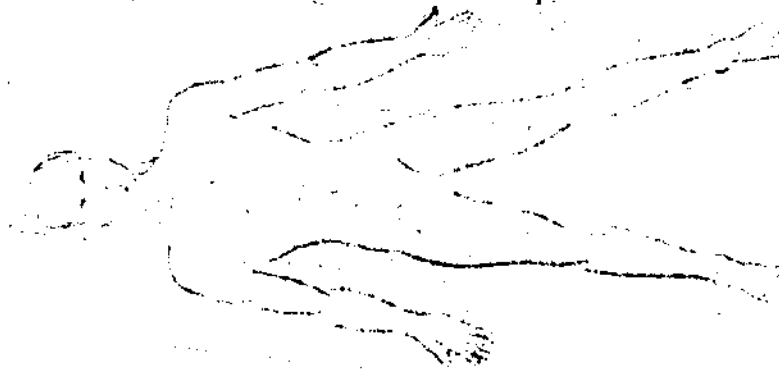
Back UTD UTD Waist UTD  
 (quantity & extent of hair) (size of navel, appendectomy, amount  
 quantity & color of hair Circumcision UTD Pubic hair UTD  
 yes-no (color)

Herniaplasty UTD  
 (Yes - no; location)

Legs **31 inches** UTD  
 (inseam, muscular, knock-kneed, bow-d, normal, quantity, color & extent  
 of hair).

Feet UTD Toes UTD  
(size, corns, callouses, flat) (slender, straight, crooked, overlap)  
Evidence of healed fractures None  
(nose, arms, legs, etc..)

9. Black outparts of body not received at cemetery.



10. Have fingerprints been placed on Report of Interment No  
Yes - no

If not, explain Flesh decomposed

11. Has tooth chart been prepared Yes If not, explain \_\_\_\_\_  
(Upper only) Yes - no

12. Remarks Est. 23 lbs. of bones. All flesh completely decomposed.  
Mandible not recovered with remains.

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

William D. Lawson III  
WILLIAM D. LAWSON III

Officer name

2nd Lt.

Inf.

Rank

Service

535 Quartermaster Group

Organization

RESTRICTED

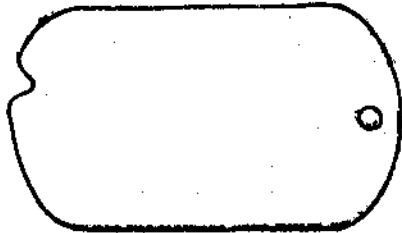
*Inno letter 1882*

WD OMC FORM 1042  
(Rev. 1 Apr. 1945)  
(Supersedes GRS Form 1)

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

DATE OF REPORT  
4 April 1946

Imprint Identification Tag if Possible.  
DO NOT TYPE



Section 1 - IDENTIFICATION

|  |                         |  |
|--|-------------------------|--|
| NAME (Last, first, middle initial)<br><br>Unknown X-6004 |                         | SERIAL NO.<br>Unknown                          |
| GRADE<br>Unknown   | ORGANIZATION<br>Unknown | BRANCH OF SERVICE<br>Unknown                   |
| RACE<br>Unknown  | RELIGION<br>Unknown     | IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY |

|   |   |                               |
|---|---|-------------------------------|
| PLACE OF DEATH<br>Bennwihr(Ht-Rhin)<br>France | CAUSE OF DEATH<br>GSW (Small Arms Fire) | DATE OF DEATH<br>EST Feb 1945 |
|---|---|-------------------------------|

EMERGENCY ADDRESSEE (Name, relationship, and address)  
Unknown

|  |  |
|--|--|
| IDENTIFICATION TAGS FOUND ON BODY<br>(1, 2, or none)<br>None | IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If identified, fill in section 2 on reverse) |
| WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)<br>Yes            |  |

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  
1-Watch silver, pocket style, and of zenith make with a white dial and arabic Numerals "Grand Prix Paris 1900" on back. 3 German Coins  
1 Coin Purse, 1 religious medal, 1 Fork silver  
1 cigarette case, red (Forwarded to Effects Depot)  
1 sewing-kit, 1 packet razor blades.

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  
US Military Cemetery (Q-260584) - St. Avold France

|                                |              |   |  |                |              |                 |
|--------------------------------|--------------|---|--|----------------|--------------|-----------------|
| DATE OF BURIAL<br>4 April 1946 | HOUR<br>1400 | BURIED IN (Shroud, blanket, or name of other)<br>Casket | TYPE OF GRAVE MARKER<br>Temp<br>Wooden Cross | PLOT NO.<br>00 | ROW NO.<br>3 | GRAVE No.<br>36 |
|--------------------------------|--------------|---|--|----------------|--------------|-----------------|

|  |  |                            |         |           |
|--|--|----------------------------|---------|-----------|
| WAS THIS A REBURIAL?<br>(Yes or no)<br>Yes | IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE<br>Isolated burial, Bennwihr, Ht Rhin France<br>Eu. Ed. Map. Sht. 87 1.200.000 (V. 625490) | PLOT NO.<br>Isolated grave | ROW NO. | GRAVE No. |
|--|--|----------------------------|---------|-----------|

|   |   |
|---|---|
| TYPE OF RELIGIOUS PERSON CONDUCTING BURIAL RITES<br>General service Ch. Z. S. Kish, Capt. | IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURNED WITH BODY |
|---|---|

|   |  |
|---|--|
| IDENTIFICATION TAG BURIED WITH BODY (Yes or no)<br>No | IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)<br>Yes, embossed plate |
|---|--|

|  |             |                   |                               |                 |
|--|-------------|-------------------|-------------------------------|-----------------|
| BODY BURIED ON DECEASED LEFT. NAME (Last, first, middle initial)<br>Unknown X-6006 | RANK<br>Unk | SERIAL No.<br>Unk | ORGANIZATION<br>Ground Forces | GRAVE No.<br>35 |
|--|-------------|-------------------|-------------------------------|-----------------|

|   |      |            |              |           |
|---|------|------------|--------------|-----------|
| BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)<br>Beginning of Row | RANK | SERIAL No. | ORGANIZATION | GRAVE No. |
|---|------|------------|--------------|-----------|

SIGNATURE OF PERSON PREPARING REPORT  
William D. Lawson III 2nd Lt Inf  
535 Quartermaster Group

SIGNATURE OF GRS OFFICER VERIFYING REPORT  
*Ralph W. Steator*  
Ralph W. Steator  
Major

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 Office. Copies for retention in theater as prescribed by theater commander.

RESTRICTED

**Section UNIDENTIFIED REMAINS**


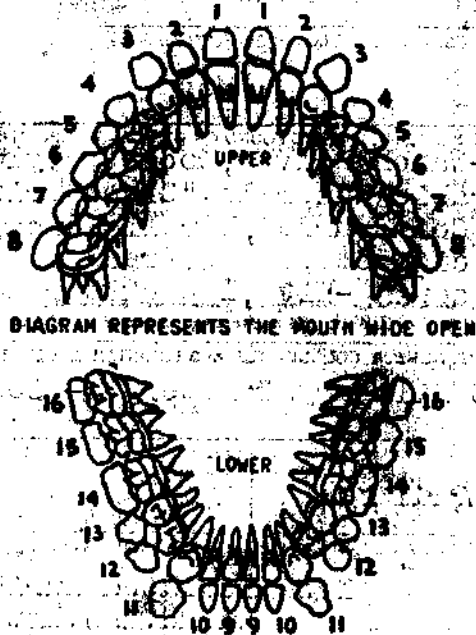




**INSTRUCTIONS:**

(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  |
| 5'7"                  | UTD    | UTD           | Blond         | UTD                            |
| WEAPON AND SERIAL NO. |        | LAUNDRY MARKS |               | WHERE BODY WAS BURIED OR FOUND |
| None                  |        | None          |               | Bennwihr Haut-Rhin<br>France   |

**OTHER IDENTIFICATION CLUES**

|   |   |   |
|---|---|---|
| <b>FILLINGS</b>   |    |  |
| <b>CAVITIES</b>   |   |   |
| <b>MISSING TEETH</b>  |  |   |
| <b>CROWNED TEETH</b>  |  |   |
| <b>BRIDGE WORK</b>  |  |   |
| <p align="center"><b>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</b></p> |   |   |

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



**REMARKS:**

▲ Attached Form 11 "Check List of Unknowns" and Tooth Chart 1A. Fingerprints have not been made because of decomposition. Estimated 23 lbs of bones with remains. The mandible was not recovered.



X-6004

In Reply Refer to  
QMGOD 332.3  
Kansas City

DEPARTMENT OF THE ARMY  
Office of the Quartermaster General  
Washington 25, D. C.

5 September 1951

SUBJECT: World War II Unknowns

TO: Chief, Army Effects Bureau

1. As a result of a survey recently conducted at the Army Effects Bureau by a representative of the Memorial Division, it was found that there are approximately 200 cases of World War II Unknowns for whom personal effects are stored at the Bureau. All information pertinent to identification has been extracted from these effects and a complete inventory has been furnished the Identification Branch of all such effects.

2. Since the World War II Unknown personal effects will be of no further value to the Memorial Division for identification purposes, authority is hereby delegated to the Chief, Army Effects Bureau, to render administrative determinations on disposition of personal effects for World War II Unknowns.

3. A certificate signed by the Chief, indicating reasons for disposal of the property will be placed in the case folder and the case closed.

BY COMMAND OF MAJOR GENERAL FELDMAN:

/s/ C. J. Harrold  
/t/ C. J. HARROLD  
Colonel, QMC  
Chief, Field Service Division

Date 17 November 1951

This is to certify that an administrative decision has been made to salvage the property in this case for the following reasons:

Previously held for identification purposes; owner declared unidentifiable.

H. V. HAWES  
Major, QMC  
Effects Quartermaster

QMGOD 293, Unknown X-6004, France 1st Ind  
(St. Avold)

Department of the Army, OQMG, Washington 25, D. C., 23 November 1949

TO: Commanding Officer, Quartermaster Activities, Kansas City Records  
Center (AGO), Missouri ATTENTION: Effects Quartermaster

Unknown X-6004, St. Avold, France, has been declared unidentifiable.

BY COMMAND OF MAJOR GENERAL FELDMAN:

*M. J. Ingeman*

M. J. INGEMAN  
Major, QMC  
Field Service Division

DEPARTMENT OF THE ARMY  
KANSAS CITY QUARTERMASTER DEPOT  
ARMY EFFECTS BUREAU  
601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

S-28 November 1949

HOC/LL/vlm

28 September 1949

DATE

IN REPLY REFER TO QMDKG 886385

SUBJECT: Disposal of Personal Effects

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

1. Personal effects found on remains interred as Unknown X-6004

Plot 00, Row 3, Grave 36, USMC St. Avoird ✓

France have been held at this Bureau as of 19 May 1948

2. Bureau inspection of the effects has been made and the following description furnished for reference:

One fork, 1 pocket watch, engraved inside "Zenith Grand  
Prix-Paris 1900 No. 2673950," on face "F. Hetterich  
Brunn," 1 religious medal, 3 souvenir German coins

3. It is requested that this Bureau be informed whether or not  
the above listed Unknown decedent has been officially identified.

FOR THE COMMANDING OFFICER:

*H. O. Caldwell*  
H. O. CALDWELL  
Effects Quartermaster

*W. J. ...  
reported ...*

*893 Wm X 6004 from oc/89 Nov 49*

**DEPARTMENT OF THE ARMY**  
**SERVICES OF SUPPLY**  
**OFFICE OF THE QUARTERMASTER GENERAL**  
**WASHINGTON**

Date 21 March 1949

AIR MAIL  
**MESSAGE FORM**

Telephone No. 3821

File No. QMGOB 293, Unkn X-6004, USMC, St. Avold, France

Office of origin QOMG FIELD SERVICE DEP. OPR EFFECTS QMGOB  
(Division) (Branch) (Section) (Symbol)

Address 2nd and T. Sts., S. W., Washington 25, D. C. Room No. 1633 B. Bldg.

To:

Commanding Officer  
 Quartermaster Activities  
 Kansas City Records Center (AGO), Mo.  
 ATT: Effects Quartermaster

**PRECEDENCE**

| WIRE OR RADIO   |  | ESSENTIAL MILITARY MAIL |         |
|---|--|-------------------------|---------|
| Urgent.....   |  | Air mail.....           | XXX     |
| Priority.....   |  | Special delivery.....   |         |
| Routine.....  |  | Ordinary.....           |         |
| Deferred.....   |  | Registered.....         |         |
| Week end.....   |  |                         |         |
| Any message not X'd for precedence will be sent "Deferred." |  |                         | Initial |

**MESSAGE:**

The personal effects which belonged to Unknown X-6004, St. Avold, France, are being returned to the Bureau under separate cover. The remains of this Unknown are still unidentified.

BY COMMAND OF MAJOR GENERAL FELDMAN:

1 Incl:  
 PE Under Sep/Cover

*William F. Conlon*  
 WILLIAM F. CONLON  
 Major, QMC  
 Field Service Division

*File*  
 FILED  
 MAR 21 1949  
 U.S. ARMY  
 QUARTERMASTER GENERAL  
 WASHINGTON, D. C.

MAR 21 3 28 PM '49

AIR MAIL

OO KCQMA KANS CITY MO

UNCLASSIFIED

QMG EFFECTS SECTION FIELD SERVICE  
DIVISION WASHINGTON 25, D. C.

ROUTINE

REURTT QOD 314; PERSONAL EFFECTS, LABORATORY REPORT CMA INVENTORY CMA  
AND GRAVES LABEL FORWARDED YOUR OFFICE REGISTERED MAIL PACKAGE NO.  
867-776 DATED 10 MARCH 1949 LABELED UNKNOWN X-6004 USMC ST. AVOLD  
FRANCE CMA PLOT OO ROW 3 GRAVE 36

UNCLASSIFIED

H. O. CALDWELL

QMDKG 907 MRS. WINSKY

101430Z

*File  
Caldwell*

OUT-CHARGE FORM

|   |                           |
|---|---------------------------|
| FILE No.<br>886,385   | DATE<br>8 March 1949      |
| SUBJECT<br>Unkn. X-6004 France St. Avoild Grave 36, Plot 00, Row 3  |                           |
| TYPE OF CORRESPONDENCE<br><input type="checkbox"/> LETTER <input type="checkbox"/> MEMORANDUM <input type="checkbox"/> INDORSEMENT <input checked="" type="checkbox"/> TELEGRAM | LAST DATE<br>9 March 1949 |
| CHARGED TO<br>Elizabeth Winsky  | SEARCHER<br>ZRX           |

NOTE.—This form must not be detached from file herewith until returned to—

886 385

EX-18

58

Effects 2  
3-2-48

104203

104203

PF 0510

SE WFO DC 144/410 WASHINGTON DC 8817203

TO OO OF ACTIVITIES RE RECORDS CTR /ASO/ HQ WITH EFFECTS OF

AGAINST ALL LABORATORY FINDINGS UNKNOWN INTEREST IN CASE

ST TO AVOID OPA VIOLATION BE FORWARDED THIS OFFICE IN IDENTIFYING

UNKNOWN Y DASH SIX ZERO ZERO FOUR FIVE ZERO ZERO FOUR THREE SEVEN THREE

6 004

201

END 000 114 00100

88/17217

*file*  
*John*

|   |   |   |   |
|---|---|---|---|
| AMOUNT OF CHECK   | <input checked="" type="checkbox"/> DISCREPANCY IN  | <input checked="" type="checkbox"/> INCLOSE VALUABLES | RECIPIENT FROM  |
| ACCOUNT NUMBER  | NAME  | SHIP VALUABLES  | CASUALTY REPORT                                       |
|   | SERIAL NUMBER   | VALUABLES SHIPPED BY (Clerk)                          | INVENTORY   |
|   | RANK  | 10 Mar 49   | FORM 20   |
| <p>The Quartermaster General<br/>Effects Section<br/>Field Service Division<br/>Washington 25, D. C.</p> <p>Unk. X-6004, USMC, St.<br/>Avold, France, Grave<br/>36, Plot 00, Row 3<br/>886385 D</p> |   |   | <input checked="" type="checkbox"/> LETTER            |
|   |   |   | NO. & TYPE OF CONTAINER                               |
|   |   |   | ENVELOPE  |
|   |   |   | CARTONS   |
|   |   |   | <input checked="" type="checkbox"/> PACKAGE           |
|   |   |   | FOOT LOCKER   |
|   |   |   | SPECIAL INSTRUCTIONS                                  |
|   |   |   | REMOVE GI   |
|   |   |   | SHIP BLOODSTAINED                                     |
|   |   |   | <input checked="" type="checkbox"/> SHIP DAMAGED      |
| REMOVE BLOODSTAINED   |   |   |   |
| REMOVE DAMAGED  |   |   |   |
| FILMS REMOVED   |   |   |   |
| DIARY REMOVED   |   |   |   |
| ELW/hls   | SUMMARY COURT DATA  |   | DATE ACTION TAKEN                                     |
| DATE OF FINDING   | APPLICANT   |   | MAIL REVIEWER (Initials)                              |
| REMARKS   | <p>SHIP BY REGISTERED MAIL</p> <p><i>Enclosed Chemical Lab Report, summary inventory of General Lab in file</i></p> <p><i>[Signature]</i></p> |   | <input type="checkbox"/> SHIPPED                      |
|   |   |   | <input type="checkbox"/> FRANKED                      |
|   |   |   | <input type="checkbox"/> EXPRESS                      |
|   |   |   | <input type="checkbox"/> FREIGHT                      |
|   |   |   | DATE SHIPPED  |
|   | SHIPPING CLERK  |   | ROUTING   |
|   |   |   | <input checked="" type="checkbox"/> ACCOUNTING BRANCH |
|   |   |   | <input checked="" type="checkbox"/> WAREHOUSE         |
|   |   |   | <input type="checkbox"/> FILE                         |

ORDER FOR ACTION



**RUSH**

|   |                                  |     |                            |     |  |                |  |  |  |
|---|----------------------------------|-----|----------------------------|-----|--|----------------|--|--|--|
| EFF. ON FORM<br>28 JUNE 45 37   |                                  |     |                            |     | EXPEDITE MEMO -- TO WAREHOUSE DIVISION |                |  |  |  |
| DATE<br><b>9 March 1949</b>   |                                  |     | PRIORITY                   |     | CASE NO.<br><b>886385</b>              |                |  |  |  |
| NAME (on tally)<br><b>Unknown #2948</b>   |                                  |     |                            |     |  |                |  |  |  |
| A.S.N.  |                                  |     | MARK                       |     | STATUS<br><b>Deceased</b>              |                |  |  |  |
| TALLY NO.   |                                  | BAY | PALLET                     | BOX |  | TYPE CONTAINER |  |  |  |
| WHSE. LOCATION (POST-INVENTORY)<br><b>142</b>   |                                  |     | REQUESTED BY<br><b>EIN</b> |     |  | APPROVED BY    |  |  |  |
| <input type="checkbox"/>  | COMPLETE INVENTORY               |     |                            |     |  |                |  |  |  |
| <input type="checkbox"/>  | TRANSMITTAL INVENTORY            |     |                            |     |  |                |  |  |  |
| <input type="checkbox"/>  | CLEAN BLOOD STAINED ITEMS        |     |                            |     |  |                |  |  |  |
| <input type="checkbox"/>  | ATTACH ALL PAPERS                |     |                            |     |  |                |  |  |  |
| <input type="checkbox"/>  | CHECK FOR ADDITIONAL INFORMATION |     |                            |     |  |                |  |  |  |
| <input type="checkbox"/>  | DO NOT LAUNDRY OR CLEAN          |     |                            |     |  |                |  |  |  |
| <input type="checkbox"/>  | LAUNDRY AND CLEAN IF NECESSARY   |     |                            |     |  |                |  |  |  |
| <input type="checkbox"/>  | DETERMINE IF OWNER IS            |     |                            |     |  |                |  |  |  |
| <input type="checkbox"/>  | FLAG TALLY IN                    |     |                            |     |  |                |  |  |  |
| SHIP  | NAME                             |     |                            |     |  |                |  |  |  |
| TO  | ADDRESS                          |     |                            |     |  |                |  |  |  |
| REMARKS: ADM. DIV <b>Request items be sent to Locked Storage for transmittal to OSG by registered mail.</b> |                                  |     |                            |     |  |                |  |  |  |
| REMARKS: WHSE. DIV.   |                                  |     |                            |     |  |                |  |  |  |

RUSH

|   |                                  |                                       |                    |                    |
|---|----------------------------------|---------------------------------------|--------------------|--------------------|
| EFF ON FORM<br>28 JUNE 45 37  |                                  | EXPEDITE MEMO - TO WAREHOUSE DIVISION |                    |                    |
| DATE  | 9 March 1949                     | PRIORITY                              | CASE NO.<br>886385 |                    |
| NAME (on tally)   |                                  | Unknown #2948                         |                    |                    |
| A.S.N.  | RANK                             |                                       | STATUS<br>Deceased |                    |
| TALLY NO.   | BAY                              | PALLET                                | BOX                | TYPE CONTAINER     |
| WHSE. LOCATION (POST-INVENTORY)   |                                  | REQUESTED BY                          |                    | APPROVED BY        |
| 142   |                                  | EIV                                   |                    | <i>[Signature]</i> |
| <input type="checkbox"/>  | COMPLETE INVENTORY               |                                       |                    |                    |
| <input type="checkbox"/>  | TRANSMITTAL INVENTORY            |                                       |                    |                    |
| <input type="checkbox"/>  | CLEAN BLOOD STAINED ITEMS        |                                       |                    |                    |
| <input type="checkbox"/>  | ATTACH ALL PAPERS                |                                       |                    |                    |
| <input type="checkbox"/>  | CHECK FOR ADDITIONAL INFORMATION |                                       |                    |                    |
| <input type="checkbox"/>  | DO NOT LAUNDER OR CLEAN          |                                       |                    |                    |
| <input type="checkbox"/>  | LAUNDER AND CLEAN IF NECESSARY   |                                       |                    |                    |
| <input type="checkbox"/>  | DETERMINE IF OWNER IS            |                                       |                    |                    |
| <input type="checkbox"/>  | FLAG TALLY IN                    |                                       |                    |                    |
| SHIP TO   | NAME                             |                                       |                    |                    |
|   | ADDRESS                          |                                       |                    |                    |
| REMARKS: ADM. DIV Request items be sent to Locked Storage for transmittal to OQMG by registered mail. <i>(over)</i> |                                  |                                       |                    |                    |
| REMARKS: WHSE. DIV <i>[Handwritten notes]</i>   |                                  |                                       |                    |                    |

*Request items to H/S  
37  
Rec 9 Mar 49 3/11/49*

| ATTACHMENTS                         |                       | EFFECTS INVENTORY<br>ARMY EFFECTS BUREAU | STATUS                   |           |
|-------------------------------------|-----------------------|--|--------------------------|-----------|
| <input checked="" type="checkbox"/> | INBOUND INVENTORY     |  | <input type="checkbox"/> | DECEASED  |
| <input checked="" type="checkbox"/> | G. R. OR SUB GR LABEL |  | <input type="checkbox"/> | MISSING   |
| <input type="checkbox"/>            | WILL OR POWER OF ATTY |  | <input type="checkbox"/> | P. O. W.  |
| <input type="checkbox"/>            | TALLY IN FORM 43      |  | <input type="checkbox"/> | ABANDONED |
| <input type="checkbox"/>            | Attachment            |  | <input type="checkbox"/> | UNKNOWN   |

|                          |                        |                          |                  |                          |                    |                          |                        |
|--------------------------|------------------------|--------------------------|------------------|--------------------------|--------------------|--------------------------|------------------------|
| <input type="checkbox"/> | BAGS, CLOTH OR TRAVEL  | <input type="checkbox"/> | BELT             | <input type="checkbox"/> | OVERCOATS          | <input type="checkbox"/> | 1 Fork ✓               |
| <input type="checkbox"/> | BELT, MONEY (NO MONEY) | <input type="checkbox"/> | BOOKS, ADDRESS   | <input type="checkbox"/> | PAPERS, PERSONAL   | <input type="checkbox"/> | 1 pocket watch ✓       |
| <input type="checkbox"/> | BILLFOLD (NO MONEY)    | <input type="checkbox"/> | BOOKS, PILOT LOG | <input type="checkbox"/> | PENCIL, MECHANICAL | <input type="checkbox"/> | Engraved inside        |
| <input type="checkbox"/> | BOOKS                  | <input type="checkbox"/> | BRUSHES          | <input type="checkbox"/> | PEN, FOUNTAIN      | <input type="checkbox"/> | Case "ZENITH"          |
| <input type="checkbox"/> | BRACELET, IDENT.       | <input type="checkbox"/> | CASE             | <input type="checkbox"/> | PHOTOS             | <input type="checkbox"/> | GRAND PRIX-PARIS       |
| <input type="checkbox"/> | CAMERAS                | <input type="checkbox"/> | CLOTH, WASH      | <input type="checkbox"/> | PIPES              | <input type="checkbox"/> | 1900-NO: 2673950.      |
| <input type="checkbox"/> | CLOTHING               | <input type="checkbox"/> | COATS            | <input type="checkbox"/> | RINGS              | <input type="checkbox"/> | on face - J. HETTERICH |
| <input type="checkbox"/> | MISC. ARTICLES         | <input type="checkbox"/> | FOOTLOCKER       | <input type="checkbox"/> | SCARFS             | <input type="checkbox"/> | BRUNN.                 |
| <input type="checkbox"/> | RELIGIOUS ARTICLES     | <input type="checkbox"/> | FOOTWEAR, PR.    | <input type="checkbox"/> | SHIRTS             | <input type="checkbox"/> | 1 Religious medal ✓    |
| <input type="checkbox"/> | RIBBONS, DECORATION    | <input type="checkbox"/> | GLASSES          | <input type="checkbox"/> | SOCKS, PR.         | <input type="checkbox"/> | 3 Louis Herman coins   |
| <input type="checkbox"/> | SHORT SNORTER          | <input type="checkbox"/> | GLOVES, PR.      | <input type="checkbox"/> | STATIONERY         | <input type="checkbox"/> |                        |
| <input type="checkbox"/> | SOUVENIR MONEY         | <input type="checkbox"/> | HANDKERCHIEFS    | <input type="checkbox"/> | TIES               | <input type="checkbox"/> |                        |
| <input type="checkbox"/> | SOUVENIRS              | <input type="checkbox"/> | HEADWEAR         | <input type="checkbox"/> | TOBACCO            | <input type="checkbox"/> |                        |
| <input type="checkbox"/> | TESTAMENTS             | <input type="checkbox"/> | JACKETS          | <input type="checkbox"/> | TOILET ARTICLES    | <input type="checkbox"/> |                        |
| <input type="checkbox"/> | TOWELS & WASHCLOTHS    | <input type="checkbox"/> | KITS             | <input type="checkbox"/> | TOWELS             | <input type="checkbox"/> |                        |
| <input type="checkbox"/> | U. S. MONEY (AMOUNT)   | <input type="checkbox"/> | KNIVES           | <input type="checkbox"/> | TROUSERS, PR.      | <input type="checkbox"/> |                        |
| <input type="checkbox"/> | WATCH                  | <input type="checkbox"/> | LETTERS          | <input type="checkbox"/> | TRUNKS, PR.        | <input type="checkbox"/> |                        |
| <input type="checkbox"/> | WINGS                  | <input type="checkbox"/> | LIGHTERS         | <input type="checkbox"/> | UNDERWEAR          | <input type="checkbox"/> |                        |

|                         |             |
|-------------------------|-------------|
| CONTAINERS ADDRESSED TO | INFORMATION |
| None                    | None        |

|   |                 |
|---|-----------------|
| NAME AND STATUS VARIATIONS  | CROSS REFERENCE |
| #43 - shows, UNID #718 X-6004.<br>INV + GR Label shows, UNKNOWN, X-6004<br>1 attachment |                 |

|                  |          |                   |                   |
|------------------|----------|-------------------|-------------------|
| CHECK            | REC'D BY | NUMBER            | BUREAU CHECK      |
| MONEY ORDER      |          | VALUABLES SHIPPED | TRANSMIT ORIGINAL |
| BOND             |          | DATE 10/23/49     | ORIG. REG. MAIL   |
| TRAV. CHECK      |          | AMOUNT            | TO G. A. O.       |
| FOREIGN CURRENCY |          | BY DATE           | MUTILATED         |
| U. S. CURRENCY   |          | DATE              | ISSUING AGENCY    |

**DAMAGED**

all items to  
HS Per team  
3/11/49  
red 9/11/49

**ALSO FILED**

Phy. note from OIRM  
3-23-49  
Repacked + checked  
UNK. #44 W. H. J. C. #10  
Cap file

|                |                    |                |         |           |
|----------------|--------------------|----------------|---------|-----------|
| TALLY NO.      | ORIG. NO. OF PKGS. | EXAMINING DATE | BOX NO. | SHEET     |
| 8392           |                    | 19-May-48      |         | OF SHEETS |
| NAME           | ORGANIZATION       |                | RANK    | CASE NO.  |
| UNKNOWN # 2948 |                    |                |         | 886335    |

|                     |                   |                            |
|---------------------|-------------------|----------------------------|
| WAREHOUSE SPACE     | EXAMINED BY       | DIARY REMOVED              |
| 142                 | Risser + Bartlett | PHOTO FILM REMOVED         |
| PACKAGE DESCRIPTION | PACKED BY         | MOYON PICTURE FILM REMOVED |
| 1-11-1              |                   | SHIPPED                    |
| WEIGHT              | INSPECTED BY      | DATE                       |
|                     |                   | BY WHOM                    |
|                     | STORED BY         |                            |
|                     |                   |                            |



UNIT #718 X-6004

|     |        |     |       |  |           |
|-----|--------|-----|-------|--|-----------|
| BAY | PALLET | BOX | TALLY |  | TYPE PKG. |
|     |        |     | 8392  |  | GRB       |

8/9/48  
NYPE

EFF QM FORM 48  
7 JULY 1948

INVENTORY FORM

4 April 1946  
Date

SUBJECT: Inventory of Personal Effects of:

~~James J. [unclear]~~  
(Last name) (First name) (MI) (Rank) (ASN)

TO : Effects Quartermaster, Communications Zone, APO U.S.Ar

The above named individual of (Unit) (Organization)

was reported about 194 Status (kia, dia, hosp., etc) (Date)

Designated Beneficiary if information readily accessible

INVENTORY OF EFFECTS

- One (1) watch silver pocket style and of Zenith make with a white dial and arabic numerals "Grand Prix Paris 1900" on back ✓ 8B-1RB
- One (1) coin purse ✓ 8B-1RB
- One (1) cigarette case red ✓
- One (1) sewing kit ✓
- One (1) pocket razor blades. ① ✓
- Three (3) German coins: one (1) Pfennig coin ✓ 8B-1RB, one (5) Pfennig coin ✓ 8B-1RB, one (10) Pfennig coin ✓ 8B-1RB
- One (1) religious medal ✓
- One (1) fork silver? ✓ 8B-1RB

Money in the amount of \_\_\_\_\_ has been turned into \_\_\_\_\_ (Name of Finance Office)

Form WDFD 30 enclosed, and Symbol Number)

Names and addresses of any Banks in which accounts may be carried by me, of the above named individual and that they were forwarded to the Effects Depot by \_\_\_\_\_ on 21 August 1946 (rail, truck, etc)

Major, Inf. 0215735  
3rd Field Com and

Any additional pertinent information:

CHECKED 8B-1RB

41/1/48  
LH:clw

HEADQUARTERS  
Office of The Quartermaster General  
Washington 25, D.C.

In Reply Refer to QUAG 55H.3  
Kansas City

7 January 1949

SUBJECT: Report on Certain Unknown Decedents

TO : Commanding Officer, Quartermaster Activities  
Kansas City Records Center (AGC), Mo.  
ATT: Effects Quartermaster

1. You are advised that identification has not been established in the cause of the following named Unknown Decedents:

Unknown X-6992 & 6995, Neuville-en-Candroy, Belgium  
\* X-2670, Neuville-en-Candroy, Belgium  
\* X-6390, "  
\* X-7126, "  
\* X-7176, "  
\* X-3154, "  
\* X-474, Hamm, Luxembourg  
\* X-7161-7163, Neuville-en-Candroy, Belgium  
\* X-1251-1, Margraten, Holland  
\* X-6430, Neuville-en-Candroy, Belgium  
\* X-255, St. Avold, France  
\* X-7120 & 7151, Neuville-en-Candroy, Belgium  
\* X-7124 & 7125, "  
\* X-7200, 7217 & 7218, "  
\* X-7037, "  
\* X-1423, "  
\* X-6423 thru 6444, incl., "  
\* X-7176, Neuville-en-Candroy, Belgium  
\* X-105, Follonica, Italy  
\* X-5205, St. Avold, France  
\* X-3147, "  
\* X-6118, "  
\* X-8075, "  
\* X-9004, "  
\* X-1000, "  
\* X-3228, "  
\* X-3206, "  
\* X-3188, "

2. Correspondence from the Bureau making inquiry concerning these Unknowns is returned herewith.

BY COMMAND OF MAJOR GENERAL LARKIN:

/s/ Major, QUAG

Field Service Division

1 Incl:  
Corres

UNK-X-6004

Serial No. UNK Name UNK  
Grade UNK Rank UNK  
Organization UNK  
Address  
Nearest Relative UNK  
Address UNK  
Killed in Action  Died of Disease  
Date Hospital  
Battle Area UNK Information  
Place of Burial US MIL CEMETERY (R 260504) ST. AVOLD, FRANCE  
Point of Coordination  
Description of Body  
Members Missing

Signed



CENTRAL IDENTIFICATION LABORATORY  
AMERICAN GRAVES REGISTRATION COMMAND 319 QM BN  
APO 5g (Fontainebleau) US ARMY

28 July 1947

Reprocessed Paris Case

Chemical Lab Case # 1188

Other designations:

Unknown # X-6004 St, Avid

Inventory of Effects:

- (a) One silver watch, pocket-style, of Zenith make with a white dial and arabic numerals.
- (b) One coin purse
- (c) One red plastic cigarette case
- (d) One sewing kit
- (e) One razor blade
- (f) Three German souvenir coins
- (g) One roll (silver) one "cock" engraved on handle
- (h) One fork

Laboratory Findings:

- (a) "Grand Prix Paris 1900" on back  
Number 267395 - appears twice as watch no.
- (b) Negative for identifying marks.
- (c) Negative for identifying date.
- (d, e, f, g, h,) Negative for identifying date.

Tel: Fontainebleau 5711  
Ext. 142

*Frank J. Vagnini*  
LIVIA V. VIGNINI  
Identification Tech

DEPARTMENT OF THE ARMY  
KANSAS CITY QUARTERMASTER DEPOT  
ARMY EFFECTS BUREAU  
601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

IN REPLY REFER TO QMDKG 886385

HOC/ELW/ns  
16 December 1948

DATE

SUBJECT: Disposal of Personal Effects

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

1. Personal effects found on remains interred as Unknown X -6004  
Plot 00, Row 3, Grave 36, USMC St. Avold,  
France have been held at this Bureau as of 19 May 1948

2. Bureau inspection of the effects has been made and the following description furnished for reference:

One fork, 1 pocket watch, engraved inside "Zenith Grand  
Prix-Paris 1900 No. 2673950," on face "F. Hetterich  
Brunn," 1 religious medal, 3 souvenir German coins

3. It is requested that this Bureau be informed whether or not  
the above listed Unknown decedent has been officially identified.

FOR THE COMMANDING OFFICER:

*H. O. Caldwell*  
H. O. CALDWELL  
Effects Quartermaster

293  
Unknown  
X-6004  
France, St. Avold

13 August 1948

Case 886385

MEMO FOR FILE:

X-6004, USMC, St. Avoild, France

Included on Report No. 21 processed by Identification Section,  
Office of the Quartermaster General on 7 July 1948.

Paragraph checked as follows indicates data received from OQMG:

( ) It was reported by the Office of the Quartermaster General  
that X \_\_\_\_\_  
was identified as \_\_\_\_\_

(x) It was reported by the Office of the Quartermaster General  
that X -6004, St. Avoild, France .  
was NOT IDENTIFIED.

ACTION TAKEN BY ARMY EFFECTS BUREAU CHECKED BELOW:

- ( ) Case \_\_\_\_\_ cancelled and combined with case \_\_\_\_\_.
- ( ) No effects in Warehouse storage--case completed.
- (x) Effects in Warehouse storage will be held pending report of  
identification from OQMG. Case suspended six months.
- ( ) Action to be taken regarding effects in Warehouse Storage.

*elw*  
E. Richter Winsky