

1

Inferred 17 July 1951
A-1-15 USMC, Carthage Tunisia
GEORGE FUNDERLUT Jr.
Major, QMC

DISINTERMENT DIRECTIVE

943 *St. Avold* x-6167

SECTION A --
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
3574 00000

DATE
15 12 49
DAY MONTH YEAR

NAME SERIAL NUMBER RANK ARM DATE OF DEATH
UNKNOWN X-006167 J

CEMETERY ST-AVOLD - METZ
DISPOSITION OF REMAINS
0 3505 80
9001 CODE DIST. PT.

PLOT ROW GRAVE COUNTRY CAUSE OF DEATH
4A 3 26 FRANCE 6

SECTION B -- CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
~~ST-AVOLD, FRANCE~~
CARTHAGE, TUNISIA
(BY ADMINISTRATIVE ORDER)

NAME AND ADDRESS OF NEXT OF KIN
X-6167 approved unidentifiable per authority
3d Ind OCMG, dated 28 March 1951

SECTION C -- DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER RANK DATE OF DEATH DATE DISINTERRED
UNKNOWN X-006167 2 Aug 48

IDENTIFICATION TAG ON ORGANIZATION RELIGION IDENTIFICATION VERIFIED BY
 REMAINS UNKNOWN Geo W Lowry
 MARKER GRS Embalmer NAME AND TITLE

SECTION D -- PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL CONDITION OF REMAINS
Mattress cover & Remnants of Skull, Mandible fractured
Ground Forces Uniform Body in skeleton form - Large amount
of decomposed flesh - Disarticulated

OTHER MEANS OF IDENTIFICATION
Report of Burial found with remains

MINOR DISCREPANCIES /
None

REMAINS PREPARED AND PLACED IN CASKET
DATE 10 Aug 48 BY Geo W Lowry, Embalmer

CASKET SEALED BY
Geo W Lowry, Embalmer
EMBALMER (Signature)
Geo W Lowry

CASKET BOXED AND MARKED
DATE 10 Aug 48 BY Geo W Lowry Embalmer
All markings plates & tags
verified by *Jesse C Harrell*
JESSE C HARRELL, 1st Lt CAC

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:
Jesse C Harrell
JESSE C HARRELL
1st Lt CAC
Jesse C Harrell
JESSE C HARRELL, 1st Lt CAC, 7857 AGRC,
Zone 3 Hq. SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

NAT
FILE
RECORDS ANNOTATED
DATE *Aug 51*
NAME *Walter*
BR. MEM. DIV.

Incl #7

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC St. Amand, France		TO OIC, Neuville, Belgium	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER Cpl Vincent P. Matozzo, RA-32707218	
SIGNATURE OF SHIPPER <i>1st Lt. Frank D. Callaghan</i>	DATE 2 Nov 49	SIGNATURE OF RECEIVER	DATE

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE (BY ADMINISTRATIVE ORDER)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER 21. AVOED EBANCE	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

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

7. SHIPPED

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

AIRMAIL

~~3146~~ 3146 TL 5064 3rd Ind

GRS European

SUBJECT: Certificates of Unidentifiability of Remains
Transmittal Letter #5064

Department of the Army, OQMG, Washington 25, D. C., 28 March 1951

TO: Commanding Officer, 7887 Graves Registration Detachment,
APO 757, c/o Postmaster, New York, New York

1. Reference is made to paragraphs 2 and 4, 2nd Indorsement, and Narrative of Investigation and Disinterment at Heppenheim, 5 September 1950.
2. Unknown X-6167 USMC St. Avold, France, has been accepted as Unidentifiable.
3. Request this Office be advised results of investigation regarding recovery of remains of S/Sgt. Earl W. Watson, 33317700 and whether Unknown X-843 and associated Unknowns have been reinterred in Civilian Cemetery at Heppenheim, Germany.

FOR THE QUARTERMASTER GENERAL:

1 Incl
w/d

THOMAS E. COX
Capt QMC
Memorial Division

Cy furnished: Adm Sec
C.Duncan/rar
Foy

File

7-6167 (Cox)

QMG DEPT OF ARMY WASH DC
CO 7887 GRUCC DET LIEGE BELGIUM

MAR 51 UNCLASSIFIED
DEFERRED

DA 22324

AGRC 3420

FROM QMGMT URMSG AGRC 3420

REF XRAY 11 ST MERE EGLISE AND ASSOC CASES PD INFO WILL BE FWD APRX 20 MAR 51

293 - Wank. 2. 6161 (L.H. G...)

AGRC 3420 IS DA IN NO 54619 (6 Feb 51)

Cy furnished: Adm Sec
Foy/rar

BJP

JMN

UNCLASSIFIED

(GRAVES)

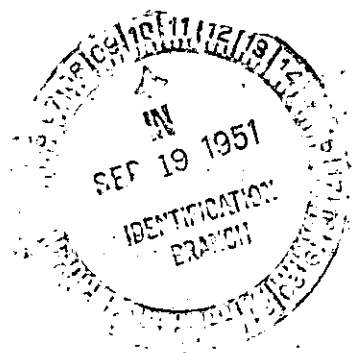
CAPT MEFF

QMGMT 293 - GRS European

EXT 52462

J. C. THICHER
LT COL, GRC, MEM DIV

Bank



HEADQUARTERS
7887 GRAVES REGISTRATION DETACHMENT
REGISTRATION DIVISION
APO 757 (liege) US ARMY

243unk St. Avold X-6167
GREF 293

7 August 1950

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS

1. The records pertaining to Unknown X - 6167, Plot AAAA, Row 3, Grave 26, USMC, St. Avold, France have been reviewed in accordance with par 159, SR 830-110-5, DA, dated 3 March 1949, and it is the opinion of the Board of Review, appointed by par 2, SO No. 66, this headquarters, dated 14 June 1950, that sufficient evidence is not available to establish the identity of the deceased concerned, and it is recommended these remains be classified as unidentifiable..

2. Report of Reprocessing of remains was forwarded to the Office of the Quartermaster General, by Transmittal Letter No. 1927, dated 16 May 1946.

3. Remarks:

See copy of Case History attached.

E. D. Mulvanity
Lt Col E. D. MULVANY, O-359598, OMC
George Gunderman, Jr.
1st Lt George GUNDERMAN, Jr., O-1289071, OMC

James C. MacFarland
Maj James C. MacFARLAND, O-1576321, OMC
Gaylord E. Lutz
1st Lt Gaylord E. LUTZ, O-1595665, OMC

1st Lt Robert W. GANSEL, O-1599085, OMC

CWO Raymond T. RODRIGUEZ, W-2107098, USA

Accepted - 28 March 1951

Not identifiable from information presently available

*File 7887-28 March 51
Duncan
99 Br.*

Arch #2

CASE HISTORY

Unknown X-6167

USMC St. Avold
Plot AAAA, Row 3, Grave 26

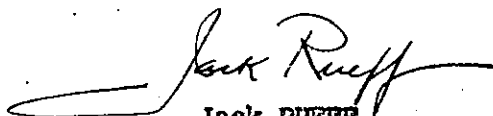
The remains of Unknown X-6167 were disinterred in May 1946 from an isolated grave, 1.5 kilometers South of the village of Neufmaisons (Meurthe-et Moselle) France.

The cross over the grave had no markings and the HBT coveralls found on the remains bore no markings or identifying clues.

An investigation conducted in the area of Neufmaisons has proven negative for any association with an American casualty. Presumably these remains were buried in November 1944, when the population of Neufmaisons had been evacuated, and no one could give any clues as to the identity of the deceased.

Tooth chart for Unknown X-6167 has been checked with all available dental records and 371 forms of casualties in Meurthe-et-Moselle area with negative results.

In view of the above, it is recommended that Unknown X-6167 be declared UNIDENTIFIABLE.


Jack RUEFF
Investigator

4 August 1950.

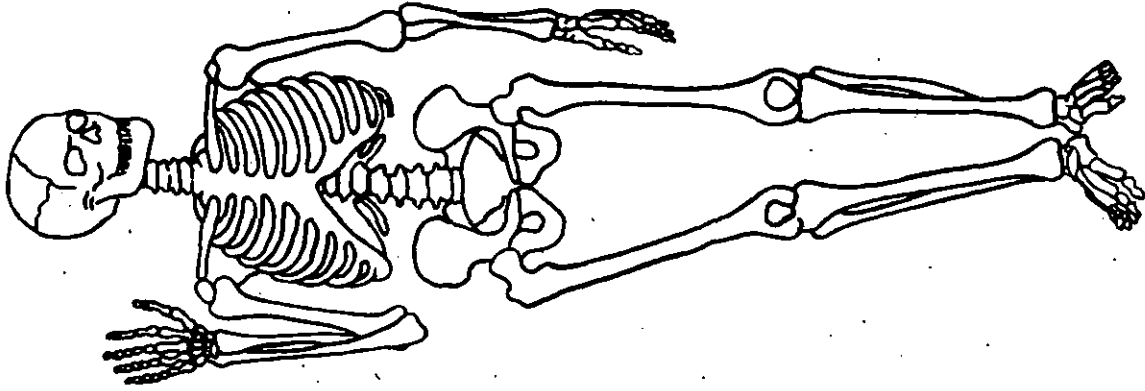
Incl # 22

IDENTIFICATION DATA						Eo # 312 Top Priority	
1. REMAINS OF UNKNOWN X-6167 243unk Howell X-6167				2. DATE OF REPORT 27 July 1950			
3. NAME OF CEMETERY ST AVOLD				4. PLOT 4-A	5. ROW 3	6. GRAVE 26	7. DATE OF DIS. INTERMENT REINTERMENT
PHYSICAL DESCRIPTION							
8. ESTIMATED WEIGHT 181.22 A9E		9. ESTIMATED HEIGHT 5-11 5/8		10. COLOR OF HAIR BROWN		11. RACE U.T.O.	
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS MORTUARY PLATE							
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES NONE							
14. WAS BODY BURNED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		TO WHAT EXTENT?					
15. WAS BODY MANGLED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		TO WHAT EXTENT? SEE SKELETAL CHART					
16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS NONE NOTED							
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area) NONE							

File
795-2-5-51
Dunnigan
Sd. Bi.

X 6167

19. BLACK OUT PARTS OF BODY NOT RECORDED



20. MASS BURIAL CERTIFICATE (IF APPLICABLE)
(Wherein segregation in whole or parts is impossible)

I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF _____ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS: _____ NUMBER

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

REMAINS IS PARTIALLY IN FACT
WITH LARGE AMOUNT OF FLESH.
TEETH WITH REMAINS.

(SEE TOOTH CHART)

EST Hgt 5-11 5/8
EST AGE 18/22
PROCESSED BY
LAWRENCE
JOMPINS

CLERK SPRINGER

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

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

SIGNATURE

CHART "A-1"

SKELETAL CHART

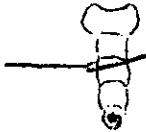
UNKNOWN X 6167
AAAA 3-26
ST. AVOLD.

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

RIGHT

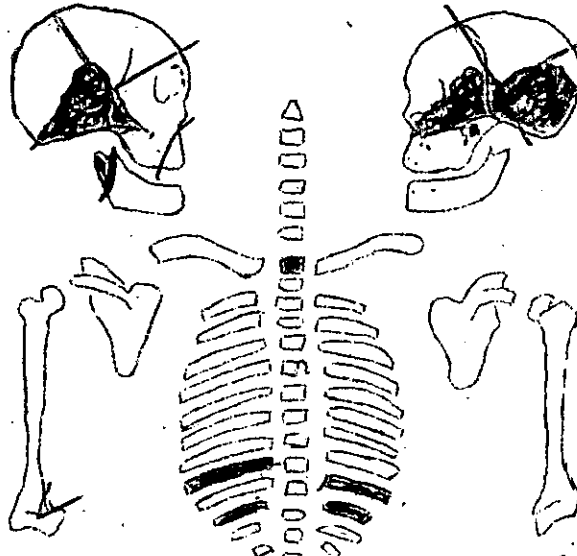
LEFT

STERNUM



SKULL _____ Inc

HUMERUS 35.7 cm



HUMERUS _____ cm

ULNA 27.6 cm

RADIUS 26.1 cm

ULNA _____ cm

RADIUS _____ cm

FEMUR 47.6 cm

FEMUR _____ cm

TIBIA _____ cm

FIBULA _____ cm

TIBIA 40.9 cm

FIBULA 40.8 cm

Est. Age 18-22

Est. Height 5-11 5/8

Color Hair Brown

Healed Fractures None

~~X~~ - Missing

~~||||~~ - Burned

~~+~~ - Fractured

~~***~~ - Shattered

SIGNATURE Lombkins

X-6167
 St. Fuold 4A-3-26
 E. O. 3312

TOOTH CHART

27 July 1950
 Date

Remain w/ X-6167

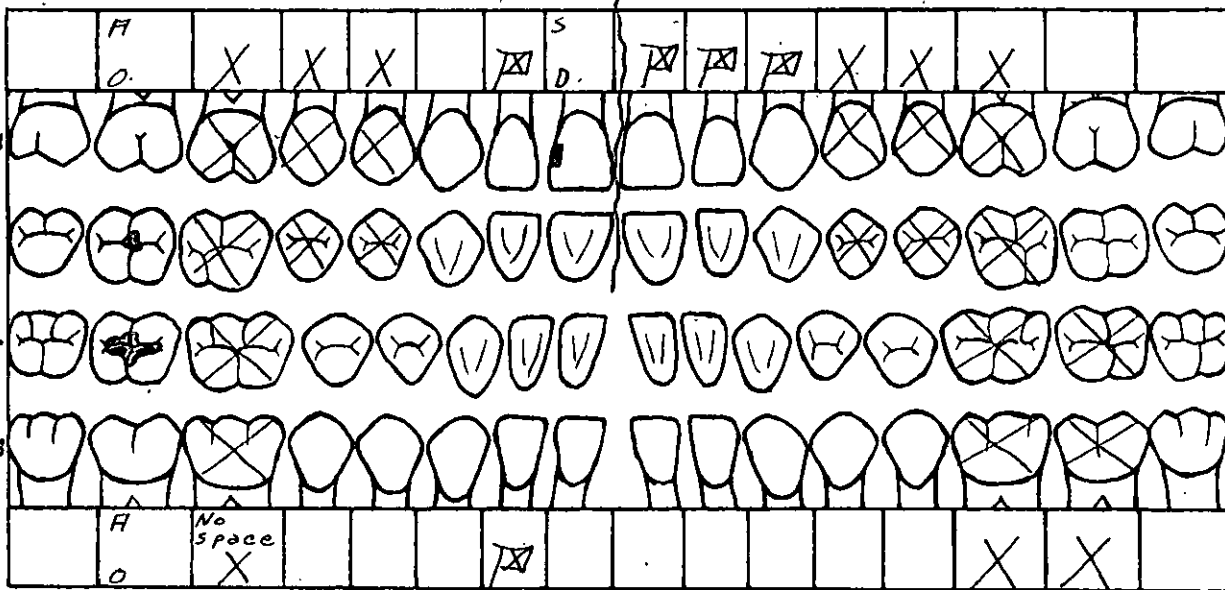
Last Name	First	Initial	Grade	Serial No.
Unit			Organization	

Place of Death Date of Death Cause of Death

Right

Left

8 7 6 5 4 3 2 1 | 1 2 3 4 5 6 7 8



16 15 14 13 12 11 10 9 | 9 10 11 12 13 14 15 16

see Remarks

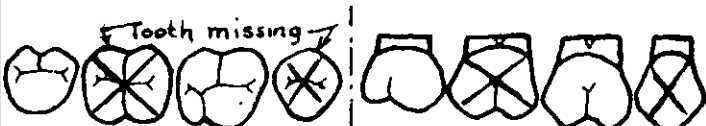
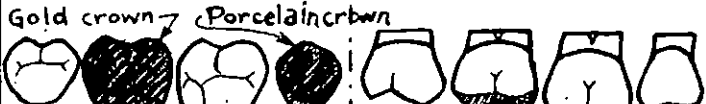

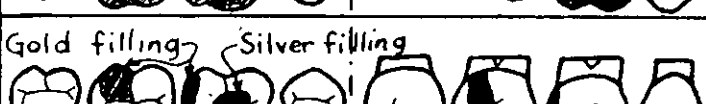
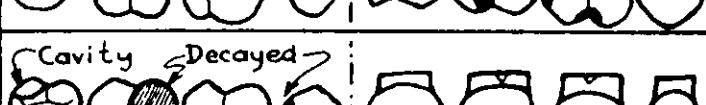
This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), 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.

18/22
 5/11/50

Harold S. Wheeler

Signature of Officer or other person who prepared Tooth chart

Verified by G. R. C. Officer

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

Size: Average

Color: Ivory

Post humously Mesq.: R 2, 10: L 1, 2, 3

*Spaces: R 7-3: 11 mm; L 3-7 (cat) 11 mm; L 7-8 - 1 mm
R 14 - none; L 13-16 - 13 mm.*

L 12-13 slightly rotated mesially; drifted distally from L 11. 1 mm.

L 16 inclined mesially.

DENTAL NARRATIVE

Unknown X-6167 , AAA-3-26
USMC St. Avold, France
Exhumation Order # 3312

27 July 1950

The fillings in the teeth of Unknown X-6167 are not unlike that of American dentistry. The amalgam is quite hard and neatly trimmed. The silicate in the right central incisor is well blended and also neatly trimmed. While this dentistry is similar to that of the American system, it cannot be definitely stated that it is a fact, the small quantity of correction does not warrant such action.

In the buccal aspect of the right maxilla, in R-4 position, is a cavity in the alveolar process where an abscess has sluffed the bone. This cavity measures 7mm x 11mm in area and about 6mm in depth.

Harold D. Wheeler
HAROLD D. WHEELER
Dental Technician

Jiban K. Gan
JIBAN K. GAN, D. Sc. (Univ. Paris),
Membre, Societe d'Anthropologie, Paris

HEADQUARTERS
7887 GRAVES REGISTRATION DETACHMENT
APO 757 (Liege) US ARMY

Annex to QMC Form JO44 for

ANTHROPOLOGICAL REPORT (continued)

2. CONCLUSIONS

a. The remains of the following deceased should be individually identified as indicated:

- (1)
- (2)
- (3)
- (4)
- (5)
- (6)
- (7)
- (8)
- (9)
- (10)

b. The remains of the following deceased should be considered a Group Burial:

- (1)
- (2)
- (3)
- (4)
- (5)
- (6)
- (7)
- (8)
- (9)
- (10)

3. ADDITIONAL REMARKS

Unknown X-6167 was reprocessed as directed in E.O. # 3312. Regarding the Dental work see attached Dental Narrative.

	AGE	HEIGHT	WEIGHT	HAIR
Unknown X-6167 (remains)	A 18-22	5' 11 5/8"	----	Brown, attached to skull

A hole has been noted on the right side of the Frontal bone of the skull. Whether it was caused by a bullet or by a pickaxe is difficult to determine. The presence of a Metopic suture in the skull, an anatomical feature not rare in the skull of American soldiers that I have examined so far, has also been noted; however, there is no positive anatomical characteristic observed in this remains which permit me to assume that the remains of X-6167 belonged to an American.

Arthur Lawrence
 ARTHUR LAWRENCE
 Lab. Ident. Tech.

Haban K. Gan
 HIBAN K. GAN, D.Sc. (Univ Paris)
 Membre Societe d'Anthropologie, Paris

DR (M)

6

DISINTERMENT DIRECTIVE

293 Wm. France, 7-6167 (St Avoild)

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

3374 00000

DATE

19 12 47
DAY MONTH YEAR

NAME

UNKNOWNX-006157

SERIAL NUMBER

RANK

ARM

DATE OF DEATH

DAY MONTH YEAR

CEMETERY

ST AVOLD + METZ

DISPOSITION OF REMAINS

3503 80

CODE DIST. PT.

PLOT

4A

ROW

3

GRAVE

20

COUNTRY

FRANCE

CAUSE OF DEATH

6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

ST. AVOLD, FRANCE

(BY ADMINISTRATIVE ORDER)

NAME AND ADDRESS OF NEXT OF KIN

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISTINTERRED

IDENTIFICATION TAG ON

REMAINS
 MARKER

ORGANIZATION

UNKNOWN

RELIGION

IDENTIFICATION VERIFIED BY

NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES /

REMAINS PREPARED AND PLACED IN CASKET

DATE BY CASKET SEALED BY

EMBALMER (Signature)

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY

DATE BY

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

SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

DISINTEGRATION DIRECTIVE

8

SECTION 1 - NAME AND BIRTH LOCATION OF DECEASED

DATE

NAME

DATE OF BIRTH

DISPOSITION OF REMAINS

CAUSE OF DEATH

ROW

COUNTRY

SECTION 2 - CONSISTENT AND NOT OF FIN

NAME AND ADDRESS OF NEXT OF KIN

ST. AUGUSTE, FRANCE

(BY ADMINISTRATIVE PROC)

SECTION 3 - BIRTH INFORMATION AND IDENTIFICATION

DATE DISTIN

SECTION 4 - IDENTIFICATION OF REMAINS FOR BURIAL

IDENTIFICATION NUMBER

OTHER AGENCIES OF IDENTIFICATION

DATE OF BIRTH

BY

DATE

BY

DATE

BY

DATE

BY

DATE

BY

DATE

BY

DATE

BY

DATE

BY

DATE

BY

DATE

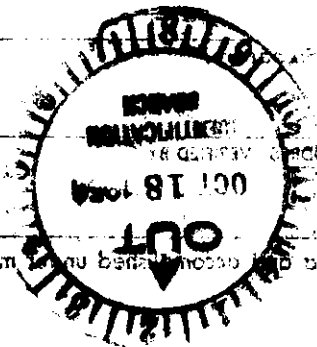
BY

DATE

BY

DATE

BY



IDENTIFICATION CHECK LIST

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

Unknown X - 6167
Cemetery St. Avold, France
Plot AAAA Row 3 Grave 26

- ~~Arrived at cemetery~~ Date reprocessed: 25 March 1947
(Hour) (Date)
- Place of death _____
(Name of closest town) (Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)
- Remains ~~recovered~~ or disinterred by Central Identification Point Strasbourg, France
(Name and organization)
- Evacuated to Cemetery by _____
(Name and organization)
- Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

Item	Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear	None (Type)		
Raincoat	None		
Overcoat	None		
Jacket, Field	None		
Jacket, Combat	None		
Mackinaw	None		
Sweater	None		
Jacket, HBT	None		
* Shirt, Wool OD	Remnants of (size 15$\frac{1}{2}$-33)		
Undershirt, Wool	None		
Undershirt, Cotton	Remnants of		
Trousers, HBT	None		
* Trousers, Wool OD	None		

Belt, web **None**

Drawers, wool **None**

Drawers, cotton **Remnants of, Non-regulation**

Leggings, wool **None**

Socks, cotton **Remnants of**

* Shoes **None** (type)

Overshoes **None**

Web Equipment **None** (type)

(Other item) **Remnants of HBT. Coveralls**

(Other item) **None**

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

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

Shoulder Patch **None**

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

UTD

6. Description of Remains:

Age **UTD** ^{Est.} Height **6'3/8"** Weight **UTD** Description of wounds **UTD**

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

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

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

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

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

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

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

Hair **None found**
(Baldness, widows peak, distinctive cutting or other characteristics)

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

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

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

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

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

Teeth **See tooth chart**
(White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw **UTD** Circumference of head in inches **UTD "crushed"**
(Large, small, normal) (Hat band)

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

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

Hands **UTD**

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

(Unusual characteristics of fingernails)

Chest **UTD**
(Size of nipples, color, quantity and extent of hair, large, small, normal)

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

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

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

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

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

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

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

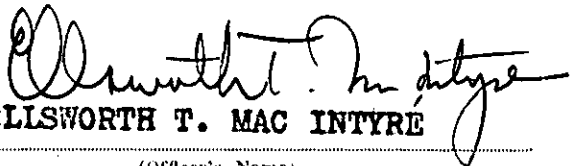
7. Have finger prints been placed on Report of Interment? **No** (Yes-no)

If not, explain **Hands missing**

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

9. Remarks **Remains received in mattress cover completely intact with considerable amount of decomposed flesh. Clothing found on remains. Estimated weight of remains: 125 Lbs. Fluoroscopic Examination: Negative. Nothing found to warrant Chemical Laboratory Examination.**

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.


ELLSWORTH T. MAC INTYRE
(Officer's Name)

Captain **QMC.**
Rank Service

Central Identification Point
(Organization)

SKELETAL CHART

X-6167
St. Avoild, France
Plot AAAA, Row 3, Grave 26

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

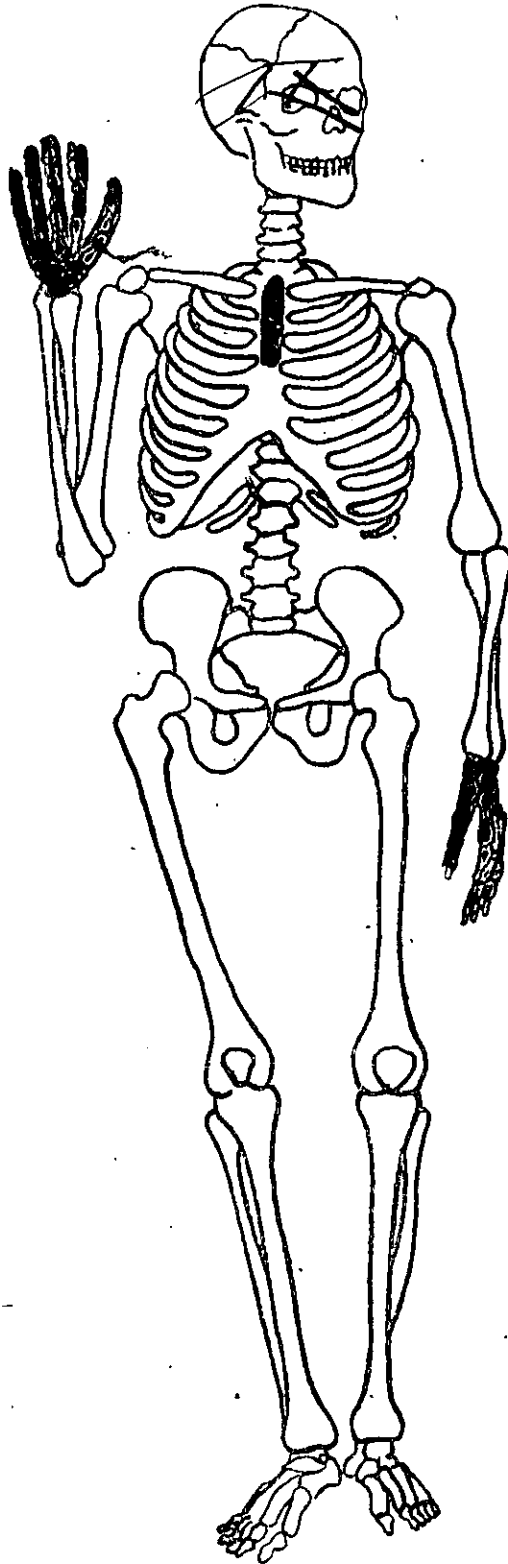


CHART "A"

TOOTH CHART

Unknown X-6107

Date

Last Name

First

Initial

Rank

Serial No.

Unit

Organization

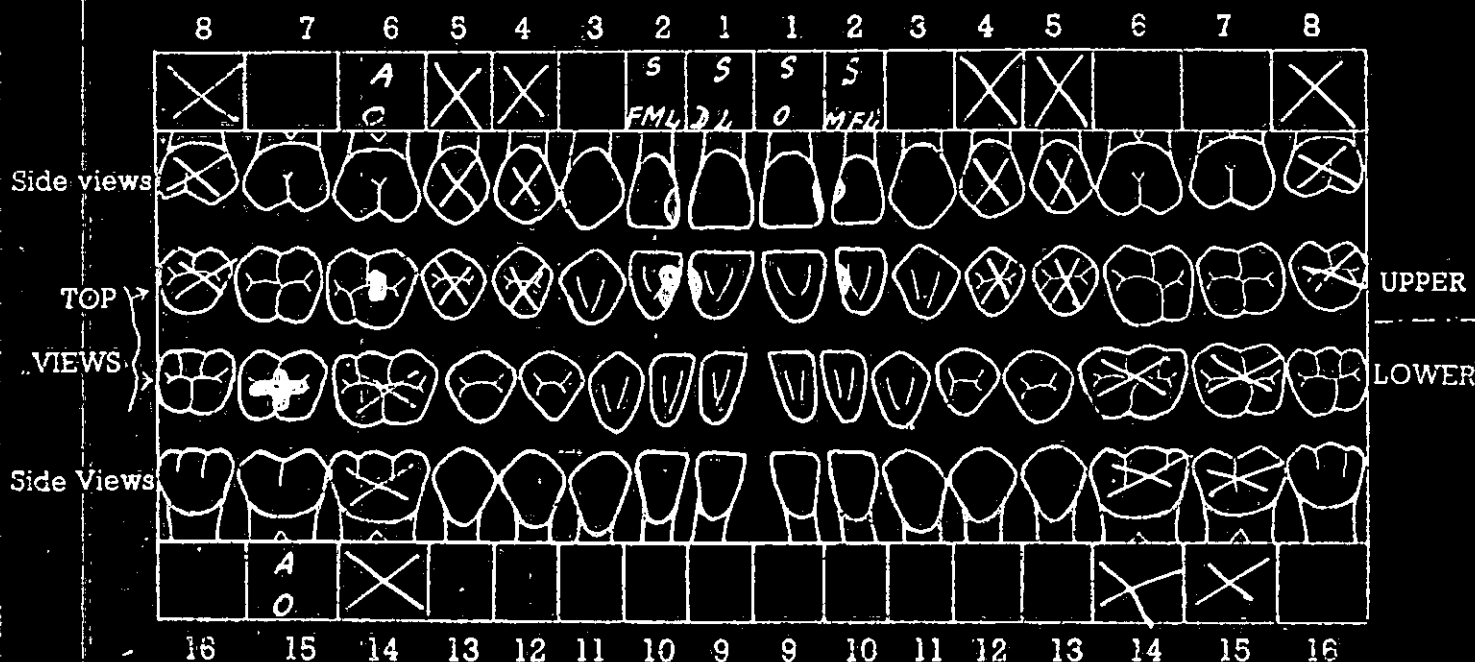
Place of Death

Date of Death

Cause of Death

Right

Left



See remarks

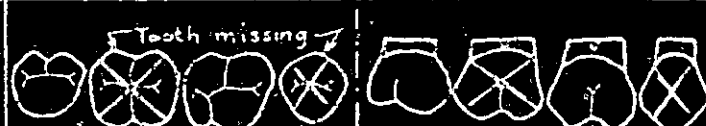
This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), 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.

James F. Ventura 169
 Signature of Officer or other person who prepared Tooth chart

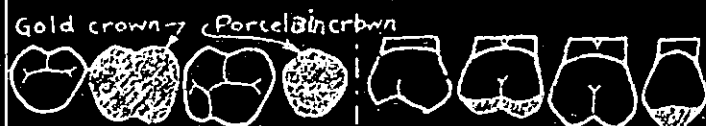
ELLSWORTH T. MAC INTYRE, Captain USO. C.I.P.

Verified by G. R. S. Officer
Ellsworth T. McIntyre

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



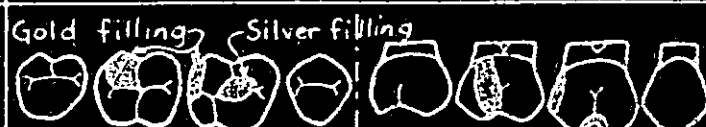
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus:



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. Spacing R13 - 15 None
 L12 - 15 - 15 mm.
 L11 - 12 - 1 mm.
 R 5 - 6 - 12 mm.
 L 5 - 6 - 11 mm.
 L 1 - 2 - 1 mm.
 R 1 - 2 - 1 mm.
2. Teeth are large, ivory, good alignment.
3. Much calculus on lingual portion of lower anteriors.

95

UNKNOWN X- 6157
CEMETERY (Q-260584) St Avoild France
PLOT AAAA ROW 9 GRAVE 26

ARRIVED AT CEMETERY 1900 16 May 1946 FROM JPP THIRD FIELD COMMAND
(HOUR) (DATE) (COLLECTING POINT)

PLACE OF DEATH Neufmaisons, Meurthe-et-Moselle, France, Carte Michelin Sh 62, 1/200,000
(NAME) (COORDINATES & LANDMARKS)

EVACUATED TO CEMETERY BY GPP 535th QI Group
(NAME AND ORGANIZATION)

REMAINS RECOVERED BY 3049th CM CR Co
(NAME AND ORGANIZATION)

IS LOAD LIST ATTACHED _____ ARE NAMES OF DECEASED FOUND IN SAME AREA AS THIS
(YES-NO)

UNKNOWN STARRED _____ ARE CIRCUMSTANCES DESCRIBED WHICH MAY INDICATE ORGANIZATION
OF THE DECEASED _____ IF ONLY PART OF A BODY WAS RECEIVED, WAS
A CAREFUL

SEARCH MADE FOR OTHER PARTS OF UNKNOWN _____
(YES-NO)

IF REMAINS COME FROM VEHICLE, PLANE, ETC: _____
(TYPE OF VEHICLE OR PLANE)

NICKNAME SERIAL NUMBER ORGANIZATION OR SYMBOLS

CREW LIST _____
(NAMES OF OTHER DECEASED AND POSITIONS IN WHICH FOUND)

IF A TANK, WHICH HATCHES WERE FREE AND AVAILABLE FOR ESCAPE USE

IF ORGANIZATION TO WHICH VEHICLE OR PLANE WAS ASSIGNED OR IF NAMES OF ALL OTHER
DECEASED ARE NOT KNOWN, GIVE DETAILED INFORMATION CONCERNING VEHICLE OR PLANE

(PARTS OF MARKINGS OR SYMBOLS) (BURNED) (PIERCED BY SHELL FIRE - WHERE) (FOUND

IN TOWN, FIELD, BY ROAD) (DAMAGED BY MINE EXPLOSION) (NAMES OF MEN WHO ESCAPED)

(DESCRIPTION OF OTHER VEHICLES OR PLANES IN AREA)

DETAILED DESCRIPTION OF PERSONAL EFFECTS _____
(INDICATE EXACT POCKET OR PART OF BODY

WHERE FOUND)

Belt, Web None
Drawers, Wool None
Drawers, Cotton (1) One
~~Underwear~~ Shirt, wool OB (1) One (Size 16 1/2 - 32 inch)
Socks, ~~Wool~~ (1) One
*Shoes (Type) None
Overshoes None
Web Equipment (Type) None
(Other item) KIT One piece suits Size 36 R

(Other item) Undershirt Cotton
*If the body is nude, sizes of these items be computed by measuring the remains.

6. Chevrons or UTD
Insignia UTD
(Type & location; shirt, jacket, coat, helmet)
Shoulder Patch UTD

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 5'9" Weight 110 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 UTD
(Light, med, dark, clear, pimples, pecks, freckles)

Build UTD
(Large, fat, thin, muscular)

Hair UTD
(Color, length, quantity, wavy, straight, whorls, or definite parting).

ANNEX #4

Bandages or dressings _____ Scars _____
length, width

(location) Tattoos _____
(number, location-illustrate on separate page)

Outstanding moles, warts or birthmarks _____
(yes-no) (description)

location _____

Sunburn or tan, other than hands and face _____

Tobacco stain on fingers or teeth _____
(designate where, extent)

Complexion _____
(light, med, dark, clear, pimples, pocks, freckles)

Build _____
(large, fat, thin, muscular)

Hair _____
(color, length, quantity, curly, wavy, straight, whorles, or
definite parting, baldness, widow's peak, other characteristics)

Sideburns _____ Eyebrows _____
(color, setting, shape) (color, bushiness,

Mustache _____ Beard or goatee _____
across nose (color, size, shape) (length, heavy, light,

Eyes _____
color, extent) (color, setting, shape)

Nose _____ Ears _____
(size, shape, straight) (size, set close or far from

Forehead _____ Mouth _____ Lips _____
head) (high, wide, wrinkled) (large, med, small) sm, lge

Teeth _____
(white, size, unevenness, spacing, noticeable crown, fillings, miss'g)

Chin _____ Cheekbones _____
(prominent, receding, pointed, temple, double) (high, normal)

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

Neck _____ Larynx _____
(size, long, short, normal, wrinkled) (prominent, normal)

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

Extent & quantity of hair (vaccination scar, size of wrists)

Hands _____
(large, small, normal, calloused noticeably) (marks on fingers
indicating that rings were worn)

Fingers U7D (short, thick, long, slender; size of knuckles) (missing U7D fingers or joints) (unusual characteristics of fingernails)

Chest U7D (size at nipples; color, quantity & extent of hair; large, small, U7D Back U7D Waist U7D normal) (quantity & extent of hair) (size at naval, appendectomy U7D Circumcized U7D Pubic hair U7D amount & color of hair) (yes-no) (color)

Hernioplasty U7D (yes-no) (location) Legs U7D (insecm) (muscular; knock- U7D kneed, bowed, normal) (quantity, color & extent of hair)

Feet U7D (size; corns; callouses; flat) (Slender, straight, crooked, etc.) U7D Toes U7D

Evidence of healed fractures U7D (nose, arms, legs, etc.)

Black out parts of body not receives at cemetery

See Remarks



Have photographs been made and attached No If not, explain U7D (yes-no)

Have fingerprints been placed on GRS #1 No If not, explain U7D (yes-no)

Has tooth chart been prepared Yes If not, explain U7D (yes-no)

Remarks: Entire Remains Recovered. Advanced stage decomposition, complete fracture of bones of head.

Ralph W. Slector
 Ralph W. Slector Maj Ing.
 Third Field Con and AGRO
 Signature of GRO and Organization

REINTERRED
 U. S. MIL. CEM. ST-AVOLD
 PLOT AAAA ROW 3 GRAVE 26

TOOTH CHART

11 May 1943

Date

Unknown X-6167

Last Name

First

Initial

Unknown

Rank

Unknown

Serial No.

Unknown

Unit

Unknown

Organization

Neufmaison, Courthe-et-Moselle, France 11st Jan 1946

Place of Death

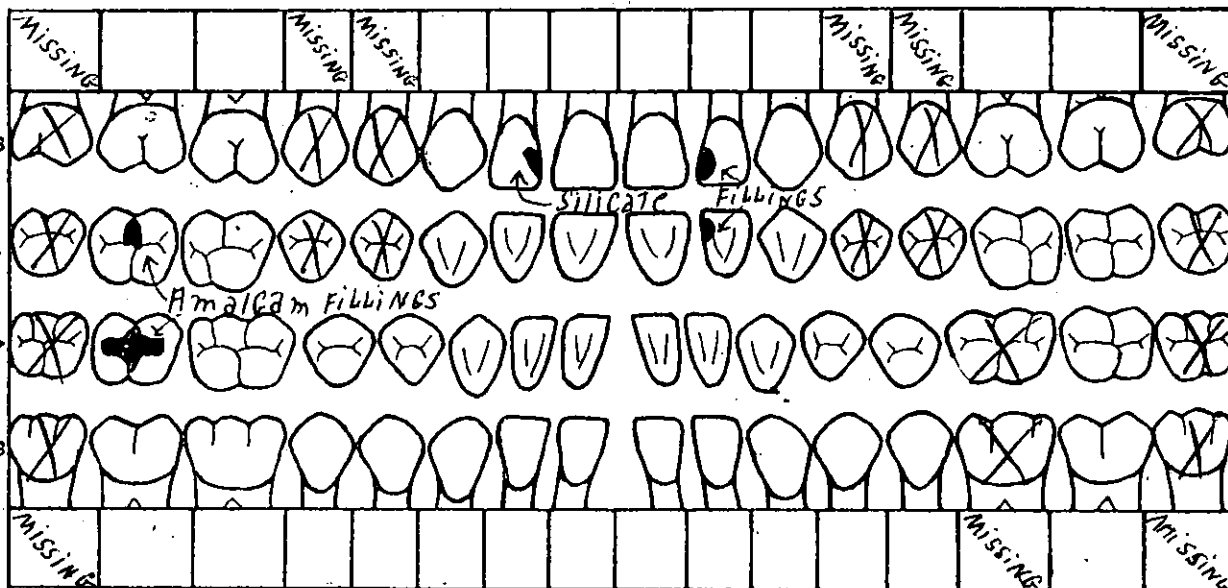
Date of Death

Cause of Death

Right

Left

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8



16 15 14 13 12 11 10 9 9 10 11 12 13 14 15 16

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.

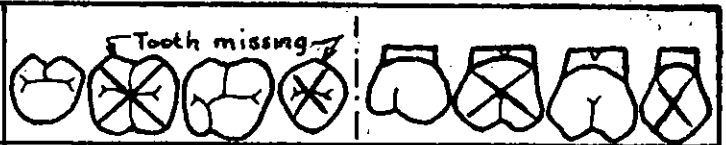
John A. Trent S.M.
 John A. Trent C.M.

Ralph W. Elcator

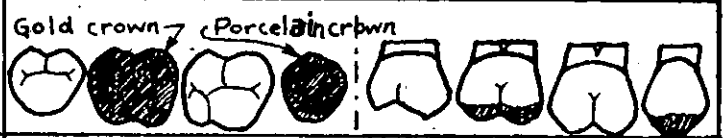
Signature of Officer or other person who prepared Tooth chart
 Ralph W. Elcator Maj. Inf.
 Third Field Command AGSO

Verified by C. 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 :



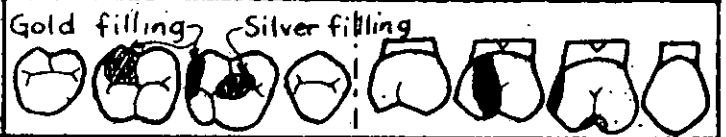
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



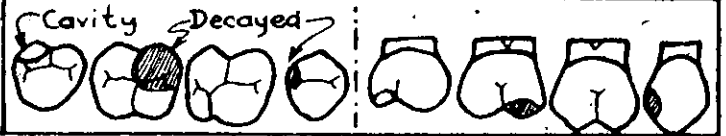
BRIDGE WORK... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



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 :

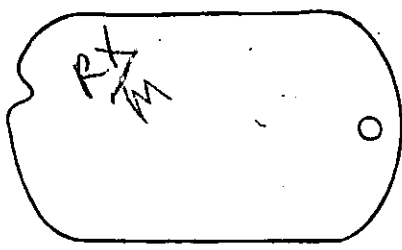
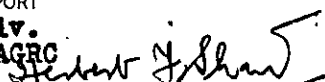


DENTURES (PLATES)... Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

ADDITIONAL SPACE FOR FURTHER REMARKS

1. L4, L5, R4 and R5 were previously extracted and are granulated in.
2. L8 and R8 are granulated in.
3. L14 was previously extracted and granulated in.
4. L16 and R16 are granulated in.
5. The incisal edges of the upper and lower anterior teeth are slightly grounded.
6. Teeth even and white.

RESTRICTED

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)				DATE OF REPORT 16 May 1946	
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.					
		NAME (Last, first, middle initial) Unknown X-6167			SERIAL No. Unknown		
		GRADE Unknown		ORGANIZATION Unknown		BRANCH OF SERVICE Ground Forces	
		RACE Unknown		RELIGION Unknown		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	
PLACE OF DEATH Neufmaisons, Meurthe-et-Moselle France		CAUSE OF DEATH Unknown			DATE OF DEATH Est. Jan. 1945		
EMERGENCY ADDRESSEE (Name, relationship, and address) <p align="center">Unknown</p>							
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) <p align="center">None</p>		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)					
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) <p align="center">Yes</p>							
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME <p align="center">None</p>							
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.							
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY <p align="center">U.S. Military Cemetery (Q-260584) St Avold France</p>							
DATE OF BURIAL 16 May 1946	HOUR 1330	BURIED IN (Shroud, blanket, or name of other) Casket		TYPE OF GRAVE MARKER Temp. Wooden Cross	PLOT No. AAAA	ROW No. 3	GRAVE No. 26
WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE Isolated grave near Neufmaisons, Meurthe & Moselle, France Carte Michelin Sh No 62, 1/200,000 (5015384)						
TYPE OF RELIGIOUS CEREMONY General Service	PERSON CONDUCTING BURIAL RITES Captain, Z. S. KISH, O-574785		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY One copy of WD QMC Form 1042 placed in burial bottle and buried with remains.				
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) No	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes, Embossed Plate						
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) UNKNOWN, X-6178			RANK UNK	SERIAL No. UNK	ORGANIZATION UNK	GRAVE No. 25	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) Best, Robert W.			RANK Pfc	SERIAL No. 16175098	ORGANIZATION 346th Inf. Regt	GRAVE No. 27	
SIGNATURE OF PERSON PREPARING REPORT Herbert F. Shaw WD Civ. Third Field Command AGRC 			SIGNATURE OF GRS OFFICER VERIFYING REPORT RALPH W. SLEATOR, MAJOR, INF. THIRD FIELD COMMAND				
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.							

RESTRICTED

Section 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.

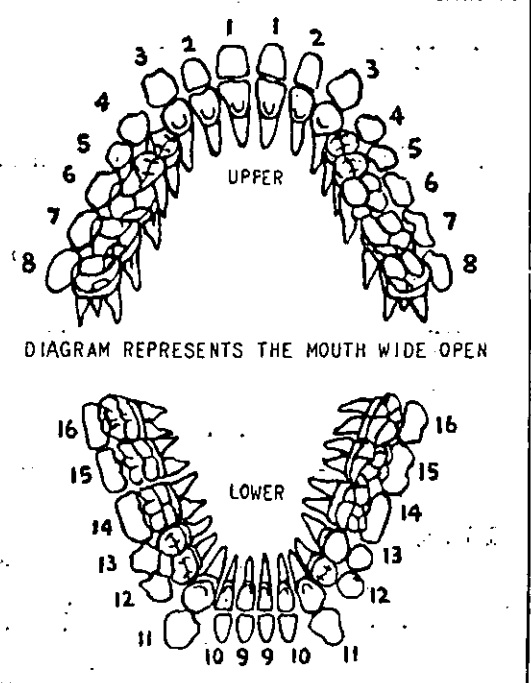
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.

HEIGHT Est. 5'9"	WEIGHT UTD	COLOR OF EYES UTD	COLOR OF HAIR UTD	BIRTHMARKS, SCARS, OR TATTOOS UTD
--------------------------------	----------------------	-----------------------------	-----------------------------	---

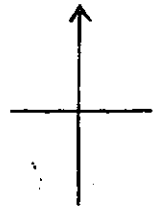
WEAPON AND SERIAL No. None	LAUNDRY MARKS None	WHERE BODY WAS BURIED OR FOUND Neuf maisons, Meurthe-et-Moselle. France
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OTHER IDENTIFICATION CLUES

FILLINGS	
CAVITIES	
MISSING TEETH	
CROWNED TEETH	
BRIDGE WORK	



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



REMARKS:

**Attached; Form 11 "Checklist for Unknowns" and Form 1A Tooth Chart. Too badly decomposed for fingerprints.
Est. Wt. of remains: 110 Lbs.**