

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

RRE 314.6

15 November 1949

SUBJECT: Case Papers

293 Unk-France X-6211 (St. Avold)

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

1. Reference is made to letter, your office, QMCMT 293, Unknown X-6211 (St Avold) France, Subject: Identification of World War II Deceased, dated 20 October 1949, and attached copy of previous letter, file reference as above, Subject: Unidentifiable Remains, dated 10 May 1949.

2. Inclosed copy of Report of Interment for the remains designated as Unknown X-6211, U S Military Cemetery St Avold, Plot BBBB, Row 2, Grave 17, together with check list and related case papers, are forwarded in compliance with subject correspondence.

FOR THE COMMANDING GENERAL:

Gaylord E. Lutz

GAYLORD E. LUTZ
1st Lt, QMC
Actg Asst Adj Gen

Incl
Cv Rpt of Interment
(Unk X-6211), w/atchd
case papers

*w/d - held in unk
folder in 2d sec*

NAT
File

Duncan
FILE 21 DEC 1949
Identification Branch

293 Unk France X-6211 (St. Avold)

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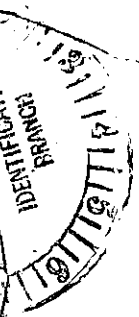
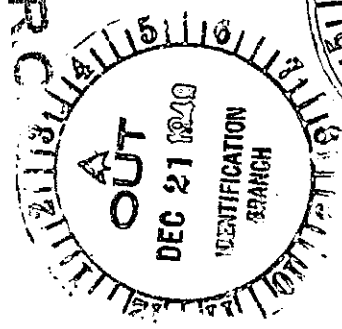
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NOV 15 1949

FILE



HO - A - G - R - C

AIRMAIL

att

QMCNT 293
Unknown X-6211
(St. Avold) France

20 October 1949

SUBJECT: Identification of World War II Deceased

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

1. Reference is made to letter this Office dated 10 May 1949, copy inclosed, to which no reply has been received.
2. It is requested that the status of the above communication be forwarded to this Office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

1 Incl:
Copy ltr dtd 10 May 49

T. H. MEZE
Lt. Colonel, QMC
Memorial Division

ces
mac
Schroth:vmt
Clements
REB

mm
REB

TEC

SEP 21 11 25 AM '49
Q. Q. M. G.
MAIL & RECORDS BRANCH



AIRMAIL

10/21/48
HONOLULU



MIAMI

QMGMT 293
Unknown X-6211
(St Avoild) France

18 May 1948

SUBJECT: Unidentifiable Remains

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

1. Reference is made to your Transmittal Letter Number 2133, dated 23 December 1946, Subject: Unidentifiable Remains, and inclosed Certificate of Unidentifiability for Unknown X-6211, United States Military Cemetery St Avoild, Plot 2028, Row 2, Grave 17.

2. Reprocess check list and case papers for X-6211 are set on file in this Office.

3. Sketch map attached to case X-6215 indicates twenty (20) unknown deceased recovered from Dachenthal.

4. It is therefore requested that the reprocess check list and case papers for X-6211, together with a complete list of disinterments from Dachenthal, be forwarded this Office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

F. H. MEYER
Lt. Colonel, QMG
Division

Schroth/vmt
Clements
REB

cc Admin Section



REB

NJS

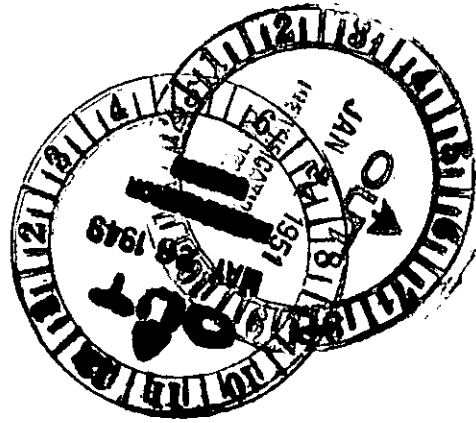
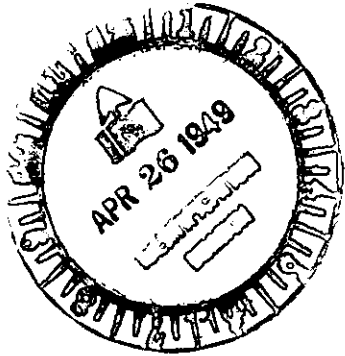
#293 unk France X-6211 (St Avoild)

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

INTRAOFFICE REFERENCE SHEET

993 Unk X-6211 St Avold
DUE, HOUR AND DATE *4/26*

1 No.	2 FROM	3 TO	4 DATE	5 MESSAGE
1	FIELD SERVICE EXEC OFF	IDEN BR MEMORIAL DIV <i>Lee</i> <i>Schmitt</i>	26 APR	<p>Forwarded as a matter which pertains to your office. FOR THE CHIEF, FIELD SERVICE DIVISION:</p> <p>1 Attachment: Corres re Unkn X-6211 St. Avold, Fr</p> <p><i>Conlon</i> MUNSTER 5473</p> <p>Conlon 3821</p> <p><i>NAN</i> <i>file 26 May 49</i> <i>Schmitt</i> <i>Ident Be</i></p>



EU 2134Z

EUA252

WX93

RR UEPOG

FM UWXC 12/CO KCQMD KANSAS CITY MO 251620Z

TO THE QUARTERMASTER GENERAL EFFECTS SECTION FIELD SERVICE DIVISION
WASHINGTON DC

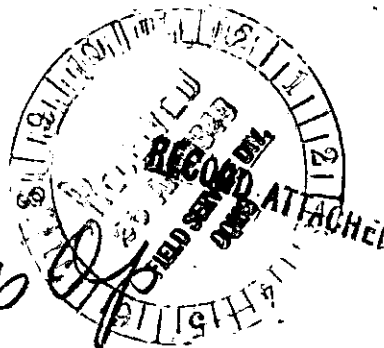
WD GRNC

FROM QMDKG 332.3 REURTT QOD 409 CMA PERSONAL EFFECTS UNKNOWN X-6211
PLOT BBBB ROW 2 GRAVE 17 USMC ST AVOLD FRANCE NOT REPEAT NOT RECEIVED
AEB PD IF RECEIVED WILL NOTIFY

CFN 332.3 409 X-6211 BBBB 2 17

25/2108Z

Dep



*293 Warburton France
X6211 St Arnold*

*9 27 82
9 27 AM '82
ELECTRONIC
MAIL CENTER*

AT

293 Unk France X-6211 (St Avold)

QMG; FIELD SERVICE; DEP OPR; EFFECTS SECTION

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

P

UNCLASSIFIED

FORWARD PE UNKNOWN X DASH SIX TWO ONE ONE CMA PLOT BBBB CMA ROW TWO CMA GRAVE
ONE SEVEN USMC ST AVOLD CMA FRANCE END QCD 409 CONLOH

FREEDMAN
QMG

U.S. MARINE CORPS
RECORDS SECTION

APR 22 7 36 PM '49

271

UNCLASSIFIED

QMGCD 293, Unkn X-6211
St. Avold, Fr

0930
22 APR 49

WM. F. COLBERT, QMG
FIELD SERVICE DIVISION

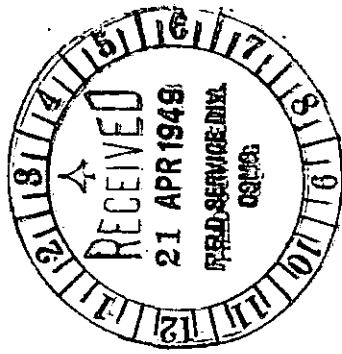
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OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
INTRAOFFICE REFERENCE SHEET

DUE, HOUR AND DATE _____

1 NO.	2 FROM—	3 TO—	4 DATE	5 MESSAGE
1	Mem Div Ident. Branch	Field Service Division ATTN: Exec Off	21- Apr 49	<p>Request TWX be sent to Effects Bureau requesting the personal effects of the following Unknown interred in USMC, St Avold, France, be forwarded this Office for examination as an aid to establishing identification</p> <p><u>Unknown X-6211, Plot BBBB, Row 2, Grave 17</u></p> <p><i>[Signature]</i> METZ 74059</p> <p><i>[Handwritten mark]</i> BARRY 2462</p>

crs



EU 2134Z

~~EVA252~~

WX93

RR UEPOG

FM UWXG 12/CO KCQMD KANSAS CITY MO 251620Z

TO THE QUARTERMASTER GENERAL EFFECTS SECTION FIELD SERVICE DIVISION
WASHINGTON DC

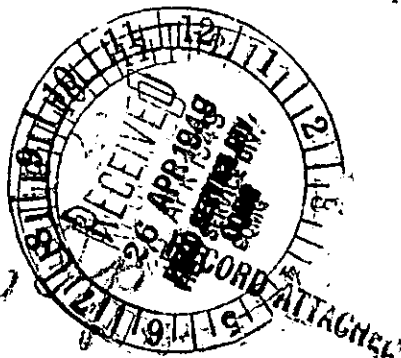
WD GRNC

FROM QMDKG 332.3 REURTT QOD 409 CMA PERSONAL EFFECTS UNKNOWN X-6211
PLOT BBBB ROW 2 GRAVE 17 USMC ST AVOLD FRANCE NOT REPEAT NOT RECEIVED
AED PD IF RECEIVED WILL NOTIFY

CFN 332.3 409 X-6211 BBBB 2 17

25/2108Z

De p



*293 Warborn France
X6211 St. Avold*

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

INTRAOFFICE REFERENCE SHEET

DUE, HOUR AND DATE _____

1 NO.	2 FROM—	3 TO—	4 DATE	5 MESSAGE
1	Chief Ident. Branch Memorial Div.	Field Service Division Attn: Exec. Off.	15 Apr 1949	<p>Request TWX be sent to Effects Bureau requesting the personal effects of the following Unknown interred in USMC, St Avoild, France, be forwarded this office for examination as an aid to establishing identification:</p> <p>Unknown X-6211, Plot BBEB, Row 2, Grave 17</p> <p style="text-align: center;"> METZ BARRY 74059 2462 </p>

CRS

Schroth

HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

293-226k-France X-6211 (St. A. old) *ed*

23 Dec 48
Date

SUBJECT: Unidentifiable Remains

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

293

1. The records pertaining to Unknown X- 6211, Plot BBBB,
Row 2, Grave 17, USMC (St A. old) 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.

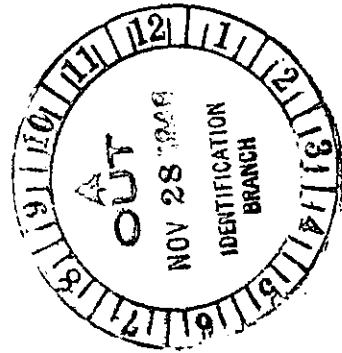
2. Report of Reprocessing was forwarded to your office by
letter of transmittal No. _____, dated 27 May 46. No
further information is available. (underlining supplied)

FOR THE COMMANDING GENERAL:

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

Received 23 Nov 49 OQMG
Not identifiable from
information presently
available

NAT
file 28 Nov 49
Schmitt
ident Br



HEADQUARTERS
AMERICAN GRAVES REGISTRATION COMMAND
EUROPEAN AREA
APO 58 US ARMY

RRE 293

23 DEC 1948
(Date)

SUBJECT: Unidentifiable Remains.

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

1. The records pertaining to Unknown X - 6211, Plot BBBB
Row 2, Grave 17, 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 OMC
Actg Asst Adj Gen

Received 23 Nov 49 OQMG
Not identifiable from
information presently
available

27 May 46

Incl # 23

JP
293 Graves, Howard C. 446 1129

293 Grav. X - 6211 (d.p. Howard) Francis

QMGMY DEPT. OF ARMY WASH. DC VOGL X 4652

UNCLASSIFIED

CG AGRC PARIS FRANCE

PRIORITY

23659^x

XXXXXXXXXXXX

CHARGE GRAVES WW II

FROM QMGMY

RELATIVE PVT FIRST CLASS HOWARD CHARLIE HOLMES FOUR FOUR ZERO
THREE ONE SIX EIGHT NINE PD REQUEST THAT UNKNOWN XRAY FIVE THREE FOUR
XRAY SIX TWO ZERO TWO XRAY SIX TWO ONE ZERO XRAY SIX TWO ONE ONE XRAY
SIX TWO ONE TWO XRAY SIX TWO ONE THREE AND XRAY SIX TWO ONE SIX CMA
SAINT AVOLD CMA BE REPROCESSED PD FURTHER REQUEST YOUR HEADQUARTERS
CONDUCT AN INVESTIGATION AND RESULTS PRESENTED TO ABLE BOARD OF OFFICERS
SMCLN FINDINGS BE FORWARDED THIS OFFICE BY AIR MAIL DUE TO CONGRESSIONAL
INQUIRY PD FORM THREE SEVEN ONE FOR SUBJECT DECEDENT TO FOLLOW



UNCLASSIFIED

QMGMY 293
GRAVES REGISTRATION EA

19 2015Z
NOV 48

O. J. MURRAY
MAJOR, GMC, MEM DIV

1 ✓

USMC ST. AVOLD FRANCE Buried at deceased IRR: RISHEL, HARRY F.
-Plot A, Row 30, Grave 3
Date reburied: 22 Jan 49 **DISINTERMENT DIRECTIVE** 34630971 SGT

SECTION A - NAME AND BURIAL LOCATION OF DECEASED: *DEWEE*
DEWEY R. BELL
1st Lt., CAV
DIRECTIVE NUMBER: 3574 00000
DATE: 15 12 47
DAY MONTH YEAR

NAME: *203 9th France* UNKNOWNX-006211 RANK: J. ARM: J.
CEMETERY: *ST AVOLD - METZ* DISPOSITION OF REMAINS: 3503 80
CODE DIST. PT.
PLOT: 4B ROW: 2 GRAVE: 17 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: UNKNOWNX-006211 SERIAL NUMBER: RANK: Unk DATE OF DEATH: DATE DISTINTERRED: 21 June 48
IDENTIFICATION TAG ON: REMAINS MARKER *EMB* ORGANIZATION: USAGF RELIGION: Unk IDENTIFICATION VERIFIED BY: Geo W Lowry Embalmer
NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: Mattress cover CONDITION OF REMAINS: Body consist of Fractured L/Humerus, L/Radius, L/Femur, R/Tibia, Tibula, also L/Fibula & Tibia - De-composition complete - Disarticulated
OTHER MEANS OF IDENTIFICATION: Report of Burial found with remains

MINOR DISCREPANCIES: None

REMAINS PREPARED AND PLACED IN CASKET BY: Geo W Lowry Embalmer

DATE: 23 June 48 CASKET SEALED BY: Geo W Lowry Embalmer EMBALMER (Signature): *Geo W Lowry*
Geo W Lowry

CASKET BOXED AND MARKED BY: Geo W Lowry Embalmer SHIPPING ADDRESS VERIFIED BY: All markings plates & tags verified by: *Henry F. Mann*
HENRY F. MANN 1st Lt Inf

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

Henry F. Mann
HENRY F. MANN 1st Lt Inf, 337 M Bn.
SIGNATURE OF GRS INSPECTOR.

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

FILE
18 MAY 1949
BRANCH
MEM. DIV.

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

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

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE (BY ADMINISTRATIVE ORDER)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	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

CHECK LIST OF UNKNOWNNS

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

Unknown X - 6211
Cemetery St. Avold, France (Q-260584)
Plot BABB Row 2 Grave 17

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

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

4. Evacuated to Cemetery by Central Identification Point
(name and organization)

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

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

Belt, Web none

Drawers, Wool remnants

Drawers, Cotton none

Leggins, Wool none (Note unusual lacing)

Socks, ~~Cotton~~ wool, remnants

*Shoes remnants (type) of left shoe pack

Overshoes none

Web Equipment none (Type)

(Other item) remnants of HBT material, belt buckle

(Other item)

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

6. Chevrons or none
 Insignia (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.....
UTD

8. Description of Remains :

Age utd Height 6'1" ^{ets.} Weight 192 Lbs ^{Est.} Description of wounds utd

Bandages or dressings utd Scars utd
 (length, width, location)

utd Tattoos utd
 (Number, location — illustrate on sep. page)

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

Sunburn or tan, other than hands & face utd

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

Build utd
 (large, fat, thin, muscular)

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

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

Sideburns **utd** 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 **utd**
(white, size, unevenness, spacing, noticeable crowns, fillings, extract).

Chin **utd**
(prominent, receding, pointed, dimple, cleft)

Jaw **utd** Circumference of head in inches **utd**
(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)

(Unusual characteristics of fingernails)

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

Back **utd** Navel **utd**
(quantity & extent of hair) (size of navel, appendectomy, amount)

utd Circumcision **utd** Pubic hair **utd**
(quantity & color of hair) (yes-no) (color)

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

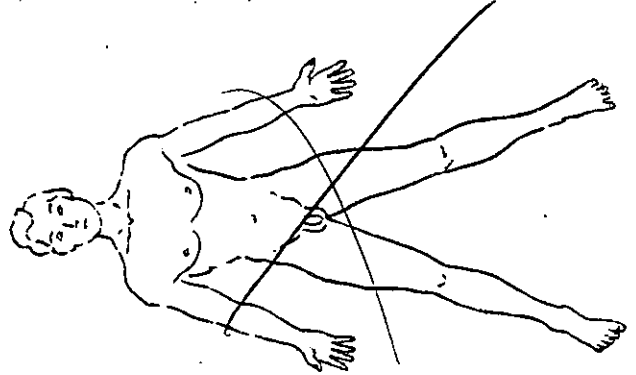
Legs **utd**
(inseam, muscular, knock-kneed, bowed, normal, quantity, color & extent of hair)

Feet utd
(size, corns, callouses, flat)

Toes utd
(slender, straight, crooked, overlap)

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

9. Black out parts of body not received at cemetery : **see attached sheet**



10. Have fingerprints been placed on Report of Interment no
(yes-no)

If not, explain hands missing

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

12. Remarks : Only bones shown on chart recovered, clothing and bones burned, only
remnants of clothing found, carefully checked for sizes and markings,
but none were found. Est. weight of remains 15 Lbs.

Fluoroscopic examination: negative.

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.

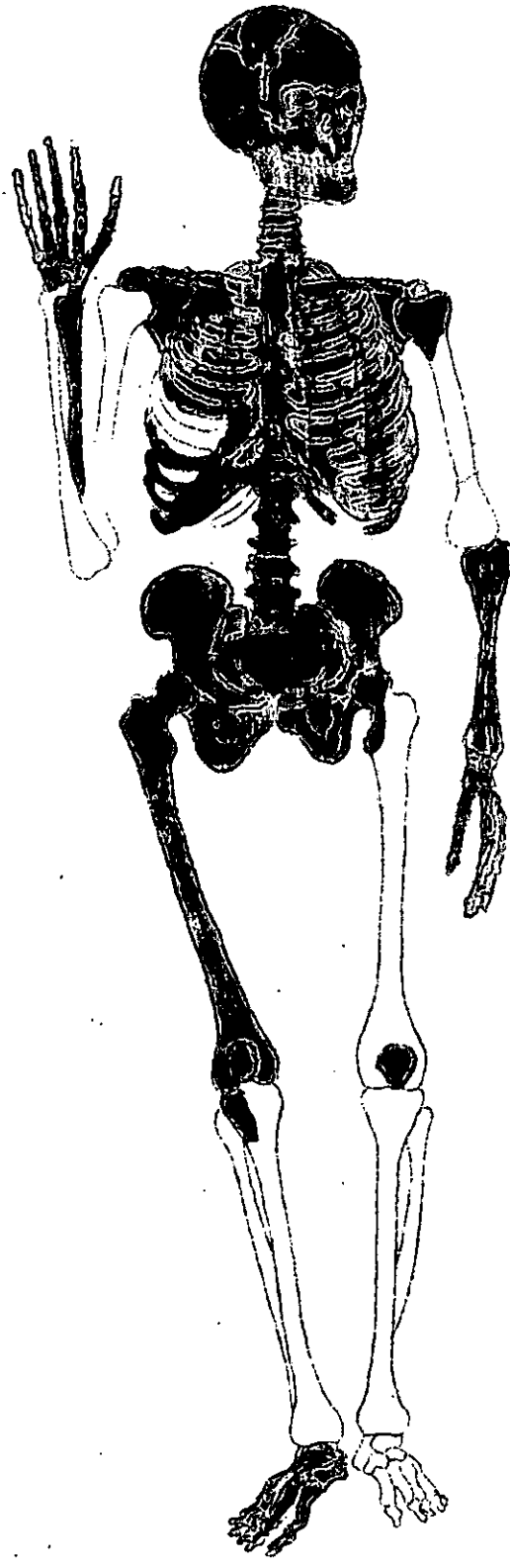
Raymond H. Johnson
Officer's Name
R.G. Johnson

2nd Lt. Inf. - **Lab-Officer**
Rank Service

Central Identification Point

Organization

X- 6211
St. Ansel.



ATT. REC'D CIV. SEC.
USE IN CIV. CL. SEC.

REINTERRED
U. S. MIL. CEM. ST-AUGED
PLOT BBB ROW 2 GRAVE 17

REPORT OF INVESTIGATION AREA SEARCH

25 April 1946

Date

NAME Unknown E-6211 RANK Unknown ASN Unknown

ORGANIZATION Unknown

MEANS OF IDENTIFICATION None

(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? If so, state the following information: NO

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 James C. STEINSON, Theodore G. STANLEY, Donald R. STUBB, James C. STOOD, William H. CROUCH, Phillip D. HOFFMAN, 13 unknown

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

a. Date of above burials June 1945 Common Graves? NO

4. Name and Type of Cemetery Unburied
(Military or Civilian)

5. Map Coordinates of the Cemetery

a. Town _____ Country _____

Give exact location in cemetery of the remains.

a. section _____ Row _____ Grave _____

b. Is sketch attached? YES

If remains are not located in a cemetery, give exact location.

a. Town SECRETIAL Coordinates Map of Europe 1 : 200,000 Chart 57 (J) 839436

b. Is sketch attached? YES

c. Is area mined? YES (see narrative statement)

How is the grave marked?

If grave is marked with cross, give exact markings thereon

a. From what source was this information obtained?
(Identification tags, personal eff)

b. BY whom?

11. Where are the cemetery records?

(Town Hall, cemetery, burgermeister's office)

a. What information was contained thereon?

b. Where was the information obtained?

c. By whom?

Between 7 am and June 1943

12. What is the date of death?

Date of fighting in area

a. Give basis

13. What is the cause of death?

a. Give basis

unburied

14. What is the date of burial?

a. Give basis

15. Where was the place of death?

Remains found

Coords

Give basis

16. Where were the remains found?

Remains found

Coords

a. By whom?

b. Is sketch attached?

unburied

17. Was a casket used?

Who furnished the casket?

Type of casket

How marked?

18. Who made the burial?

(Civilian, American Mil. or German Mil.)

Dr. Schmidt of Boerenthal

a. What are the names and addresses?

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 on plane

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

21. How did crash occur?

Anti-aircraft

b. By whom? _____
11. Where are the cemetery records? **IN VIEW**
(Town Hall, cemetery, burgermeister's office)

a. What information was contained thereon? _____
b. Where was the information obtained? _____
c. By whom? _____

12. What is the date of death? **Between Jan and June 1945**
a. Give basis **Date of fighting in area**

13. What is the cause of death? _____
a. Give basis **unk**

14. What is the date of burial? _____
a. Give basis **unburied**

15. Where was the place of death? _____ Coords _____
Give basis **Remains found** **830424**

16. Where were the remains found? _____ Coords _____
a. By whom? **Unburied** **830424**
b. Is sketch attached? **Yes**

17. Was a casket used? _____ Who furnished the casket? _____
Type of casket _____ How marked? _____

18. Who made the burial? _____
(Civilian, American Pil. or German Pil.) **Mr. BURKE of Saarenthal**
a. What are the names and addresses? _____

b. Are certificates and statements attached? **Yes**

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 on 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 ground? _____
23. Did plane burn in the air? _____ On ground? _____
24. What was the direction of the flight? _____
25. What was the civilian opinion regarding destination of plane? _____
- _____
26. Had bombs 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 must 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 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) _____ **UNK**
- 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**

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

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

51. Was investigation preceded by advanced publicity? _____

(If special investigation, give case number) _____

52. Give Brief Narrative: _____

(Use attached sheets, if necessary)

[Handwritten Signature]

Signature of Interpreter

Rank

ASN

Organization

[Handwritten Signature]

Signature of Investigator

Rank

ASN

Organization

49. Are all positive statements regarding identification and particulars surrounding death attached? -----
50. Has any information been given concerning isolated burials in the area outside the immediate vicinity? ----- **NO**
51. Was investigation preceded by advanced publicity? ----- **YES**
 (If special investigation, give case number) -----
52. Give Brief Narrative ----- **see below**

(Use attached sheets, if necessary)

Don

Signature of Interpreter

F. DON

Rank

ASN

3049 SR. Co

Organization

Alvin

Signature of Investigator

Alvin B. COBBIN

Rank

ASN

3049 SR. Co

Organization

There are 13 unknown Americans in the forest of Sacrenthal and one at the edge of the forest. The 13 were not investigated since the surrounding area is mined according to Mr. BURTON, but he has been to each body and states that each is safely approachable if guided by him. Some of the bodies are placed in lapses by Mr. BURTON and German forest workers.

TRUE COPY

BAERENTHAL le 16 Mai 1946

BESCHEINIGUNG

Ich bescheinige hiermit, dass Ich in den Bezirken MUHLTHAL,
SCHWARZENBE G, etwa 20 Amerik. Soldaten gefunden habe, 7 davon wurden von
mir beerdigt :

- 1 - Donald STEED R. 35076789
- 2 - PETERSON James G. 20625170 T 41.43
- 3 - 7 unknown

Garde des Eaux et Forests
Signe BURGUN

Cachet de la Mairie

Vu pour la legalisation de la signature de Mr. BURGUN Pierre :
Baerenthal le 16 Mai 1946
Le Maire : Signe : LIEBER

STATEMENT

I certify hereby to have found the bodies of 20 American
soldiers and seven of them were buried by myself. 4 of the seven are
unknown. Here are the names of two they are known :

- 1 - Donald R. STEED - 35076789
- 2 - James G. PETERSON 20625170 T 41.43
- 3 - 7 unknown

The Forester :
Signed : BURGUN

Seal of the Mairie
Seen for the authentication of the signature of Mr. BURGUN Peter :
Baerenthal 16 th May 1946
The Mayor : Signed : LIEBER

CERTIFIED A TRUE COPY

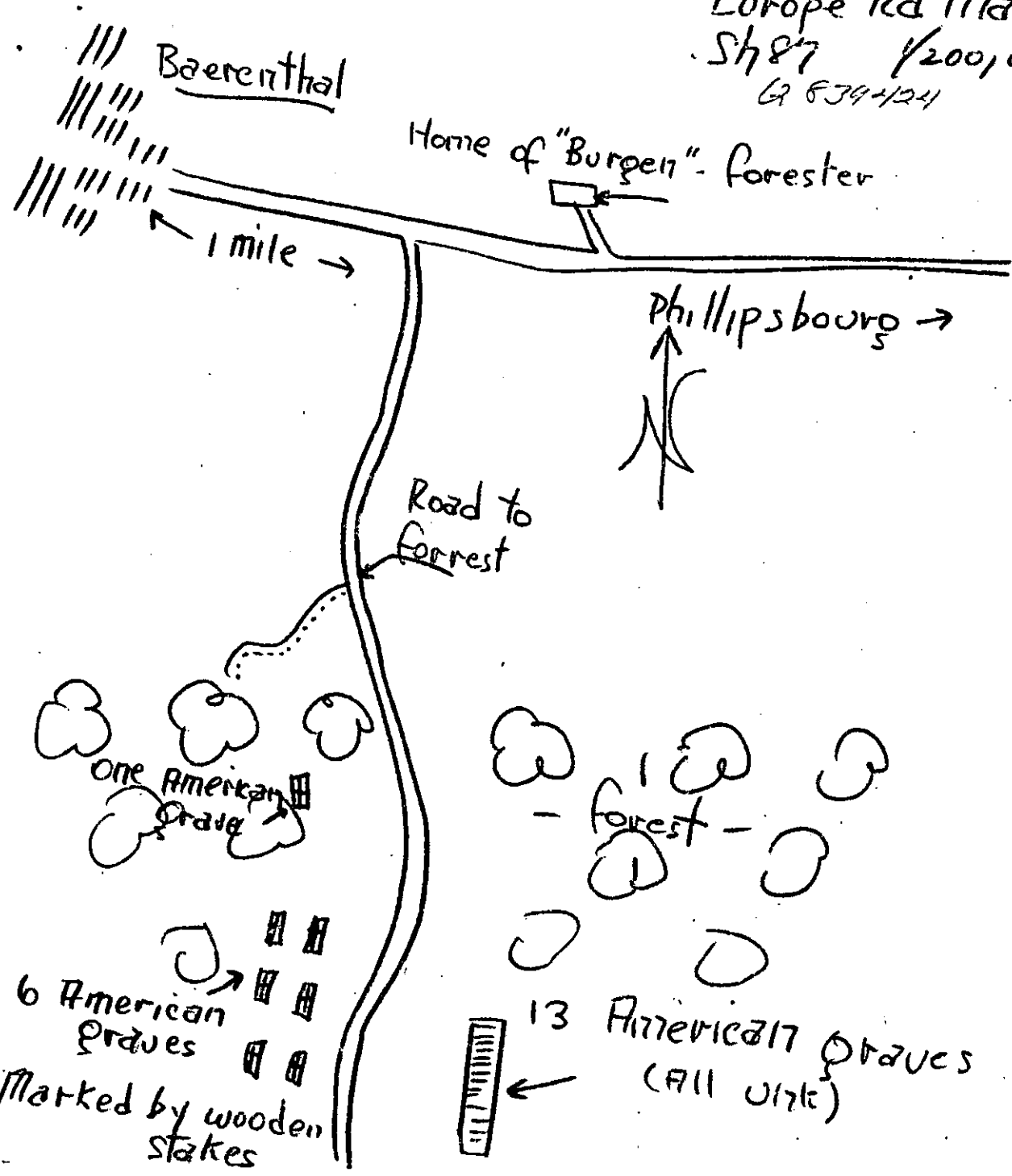
Howard E. Liebow
Howard E. LIEBOWER
2nd Lt. INF.

UNKNOWN-6211
REINTERRED U.S. MIL. CEM.
ST. AVOLD, BBBB-217

C. E. 22 X-6211

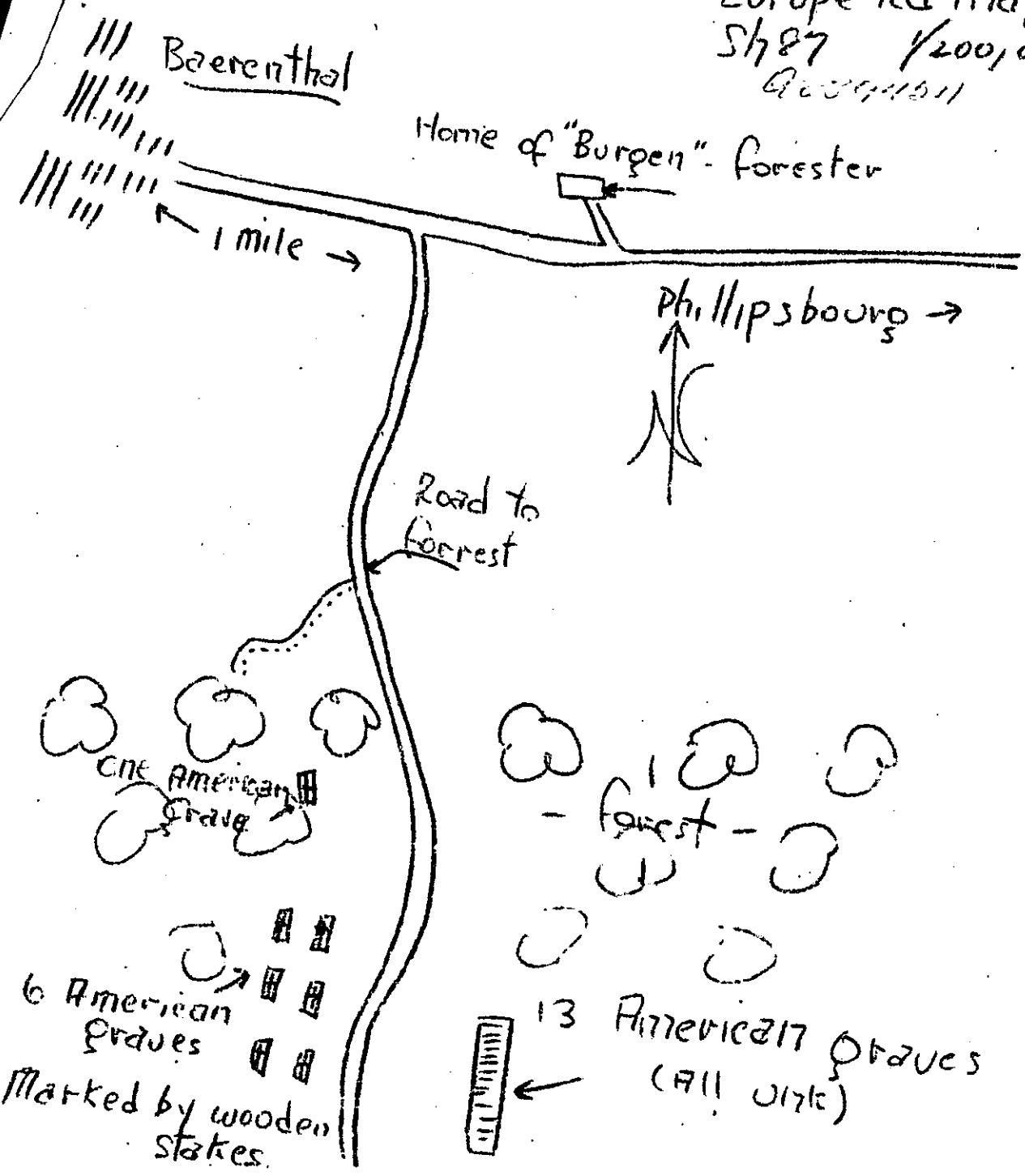
Baerenthal

Europe Rd Map
Sh 87 1/200,000
G 839424



UNKNOWN-6211
REINTERRED U.S. MIL. CEM.
ST. AVOLD, BBBB-2-17

Baerenthal
Europe Rd Map
Sh 87 1/200,000
020041511



UNKNOWN-6211
REINTERRED U.S. MIL. CEM.
ST. AVOLD, BBBB-2-17

low sun, one < 200

CHECK LIST OF UNKNOWN

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

Unknown X _____
Cemetery - 6211
Plot (Q-260224) St. Avola
DDDB 2 17

1533-27 May 46

1. Arrived at cemetery _____
(Hour) (date)

2. Place of death Barenthal, Moselle, France (Q-839424)
(Name of closest town) (Coordinates and letter
Prefex, maps)

Map of Europe Sheet 57, 1/200,000

Sheet, scale and serials used.

3049th GI BR Co

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

GFP 3rd Field Command ASRC

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	Color	Indicate unusual markings wear, tear, repairs, etc.
Headgear				
(Type)	<u>None</u>			
Raincoat	<u>None</u>			
Overcoat	<u>None</u>			
Jacket, Field	<u>None</u>			
Jacket, Combat	<u>None</u>			
Mackinaw	<u>None</u>			
Sweater	<u>One</u>			
Jacket, HBT	<u>None</u>			
Shirt, Wool, OD	<u>(1) One, See par 4</u>			
Undershirt, Wool	<u>None</u>			
Undershirt, Cotton	<u>(1) One</u>			
Trousers, HBT	<u>(1) One</u>			
Trousers, Wool OD	<u>(1) One</u>			

Belt, Web _____

Drawers, Wool _____

Drawers, Cotton **None** _____

Leggings, Wool **None** (Note unusual lacing) _____

Socks, Cotton **None** _____

*Shoes. (Type) **Shoe pack (1) One** _____

Overshoes **None** _____

Web Equipment (Type) **None** _____

(Other item) **None** _____

(Other item) **None** _____

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

Back Sergeant stripes on wool OD shirt.

6. Chevrons or Insignia **None** _____

(Type & location; shirt, jacket, coat, helmet)

Shoulder Patch _____

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

8. Description of Remains: **UTD** **Est 6'** **Est 7'** **UTD** _____

Age _____ Height _____ Weight **UTD** Description of wounds **UTD** _____

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

Tattoos (Number, location-illustrate on sep. page) **UTD** _____

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

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

Complexion _____ (Light, med. **UTD**, dark, clear, pimples, poeks, freckels)

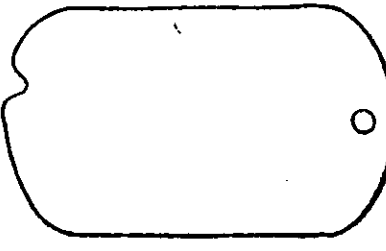
Build **UTD** (Age, fat, thin, muscular) _____

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

Baldness, widows peak, distinctive cutting or other characteristics) **UTD**
 Deburns **UTD** Mustache **UTD** Beard or Goatee **UTD**
 (color, setting, shape) (color, size, shape) Length, heavy,
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 **UTD**
 (white, size, unevenness, spacing, noticeable crowns, fillings, extract)
 Chin **UTD**
 (Prominent, receding, pointed, dimple, double)
 Jaw **UTD** Circumference of head in inches **UTD**
 (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
 (joints) (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, an endectomy, amount
 Circumcision **UTD** Pubic hair **UTD**
UTD (yes-no) (color)
 quantity & color of hair
 Hernioplasty **UTD**
 (yes-no, location)
 Legs **UTD**
 (inseam, muscular, knock-kneed, bowed, normal, quantity, color & extent of hair)

RESTRICTED

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)	DATE OF REPORT 27 May 1946
---	-------------------------------

Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.		
	NAME (Last, first, middle initial)		SERIAL No.
	Unknown X-6211		Unknown
	GRADE	ORGANIZATION	BRANCH OF SERVICE
Unknown	Unknown	Ground Forces	
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	
Unknown	Unknown		

PLACE OF DEATH Baerenthal, Moselle France	CAUSE OF DEATH Unknown	DATE OF DEATH 1st. March 1945
---	---------------------------	----------------------------------

EMERGENCY ADDRESSEE (Name, relationship, and address)

Unknown

IDENTIFICATION TAGS FOUND ON BODY (Y, N, or none) None	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) Yes	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

None

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

U.S. Military Cemetery (Q-260584) St Avold France

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
27 May 1946	1530	Casket	Temp. Wooden Cross	BBBB	2	17

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 Baerenthal, Moselle, France Map of Europe Sh No 57, 1/200,000 (Q-839424)	PLOT No. ROW No. GRAVE No. Isolated grave
---	--	--

TYPE OF RELIGIOUS CEREMONY General Service	PERSON CONDUCTING BURIAL RITES Ch. J.B. JOHNSON, 1ST LT.	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) JONCAS, JOSEPH W.	RANK Pfc	SERIAL No. 31455355	ORGANIZATION 346th Inf. Regt.	GRAVE No. 16
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) EPOLITO, JOHN	RANK UNK	SERIAL No. 39550353	ORGANIZATION Ground Forces	GRAVE No. 18

SIGNATURE OF PERSON PREPARING REPORT Herbert F. Shaw WD Civ. Third Field Command AGRC <i>Herbert F. Shaw</i>	SIGNATURE OF GRS OFFICER VERIFYING REPORT RALPH W. SLEATOR Major, Inf. 3rd Field Command <i>Ralph W. Sleator</i>
---	---

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 3 UNIDENTIFIED REMAINS.

INSTRUCTIONS:


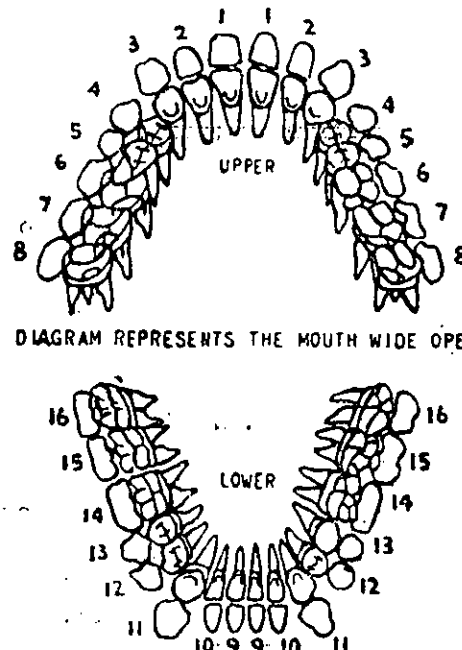





(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as, shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks.

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

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
Est 6'	UTD	UTD	UTD	UTD
WEAPON AND SERIAL No.		LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND	
None		None	Baerenthal, Moselle France	

OTHER IDENTIFICATION CLUES

**Government issued eyeglasses and case recovered with remains and attached to this case for further identification.
Sergeant's chevrons found on shirt, wool OD**

FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
CAVITIES	 <p>CAVITY DECAYED</p>	
MISSING TEETH	 <p>TOOTH MISSING</p>	
CROWNED TEETH	 <p>PORCELAIN CROWN GOLD CROWN</p>	
BRIDGE WORK	 <p>GOLD BRIDGE</p>	
FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	

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



REMARKS:

**Attached: Form 11 "checklist of Unknowns". Unable to obtain form 1A "Tooth Chart" and fingerprints because of missing portions of the remains.
Est. Wt. of remains: 7lbs.**

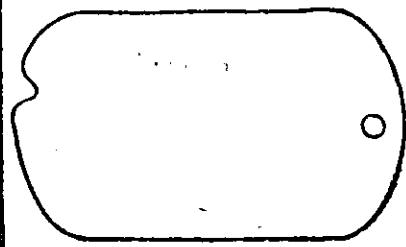
RESTRICTED

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
27 May 1946

Imprint Identification Tag if Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.		
NAME (Last, first, middle initial) Unknown X-6211		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 Basrenthal, Moselle France	CAUSE OF DEATH Unknown	DATE OF DEATH Est. March 1945
---	----------------------------------	---

EMERGENCY ADDRESSEE (Name, relationship, and address)
Unknown

IDENTIFICATION TAGS FOUND ON BODY (Y, N, or none) None	IF NO TAGS FOUND ON BODY. DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) Yes	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME
None

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY
U.S. Military Cemetery (Q-280584) St Avold France

DATE OF BURIAL 27 May 1946	HOUR 1530	BURIED IN (Shroud, blanket, or name of other) Casket	TYPE OF GRAVE MARKER Wooden Cross	PLOT No. B4BB	ROW No. 2	GRAVE No. 17
--------------------------------------	---------------------	--	---	-------------------------	---------------------	------------------------

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 Basrenthal, Moselle, France Map of Europe Sh No 57, 1/200,000 (Q-639424)
	PLOT No. ROW No. GRAVE No. Isolated grave

TYPE OF RELIGIOUS CEREMONY General Service	PERSON CONDUCTING BURIAL RITES Ch. J.B. JOHNSON, 1ST LT.	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) TONGAS, JOSEPH W.	RANK Pfc	SERIAL No. 31455355	ORGANIZATION 346th Inf. Regt.	GRAVE No. 16
--	--------------------	-------------------------------	---	------------------------


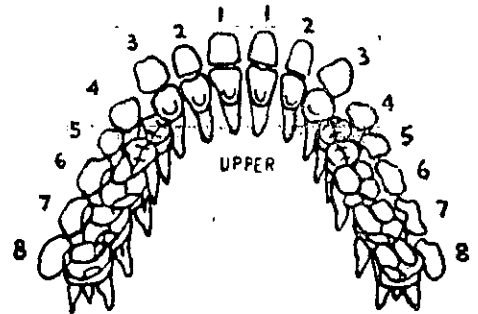

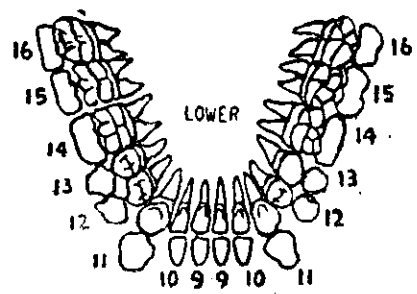



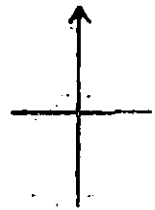
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) POLITO, JOHN	RANK UNK	SERIAL No. 39550359	ORGANIZATION GI 6umf Forces	GRAVE No. 18
--	--------------------	-------------------------------	---------------------------------------	------------------------

SIGNATURE OF PERSON PREPARING REPORT Harbert J. Shaw Third Field Command AGEC	SIGNATURE OF GRS OFFICER VERIFYING REPORT RALPH W. SLEATOR Major, Inf. 3rd 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

Incl. #1

	Section UNIDENTIFIED REMAINS.			
LEFT LITTLE FINGER	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.			
LEFT RING FINGER	HEIGHT 5'6"	WEIGHT UTD	COLOR OF EYES UTD	COLOR OF HAIR UTD
LEFT MIDDLE FINGER	WEAPON AND SERIAL NO. None		LAUNDRY MARKS None	BIRTHMARKS, SCARS, OR TATTOOS UTD
LEFT INDEX FINGER	OTHER IDENTIFICATION CLUES Government issued eyeglasses and case recovered with remains and attached to this case for further identification. Sergeant's chevrons found on shirt, wool OD			
LEFT THUMB	FILLINGS 			
RIGHT THUMB	CAVITIES 	DIAGRAM REPRESENTS THE MOUTH WIDE OPEN 		
RIGHT INDEX FINGER	MISSING TEETH 			
RIGHT MIDDLE FINGER	CROWNED TEETH 			
RIGHT RING FINGER	BRIDGE WORK 			
RIGHT LITTLE FINGER	FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY <div style="text-align: center; margin-top: 20px;">  </div>			
	REMARKS: Attached: Form 11 "checklist of Unknowns". Unable to obtain Form 12 "Tooth Chart" and fingerprints because of missing portions of the remains. Est. Wt. of remains: 7lbs.			