

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

*430*  
Unk. France (St. Avold) X-7780  
RRE 293

22 August 1949  
(Date)

CERTIFICATE OF UNIDENTIFIABILITY OF REMAINS.

1. The records pertaining to Unknown X - 7780, Plot NNNN  
Row 7, Grave 151, USMC ST. AVOLD, France,  
have been reviewed and it is the opinion of this Office that sufficient  
evidence is not available at the present time to establish the identity  
of the deceased concerned. The remains concerned should be classified as  
unidentifiable at the present time.

2. Report of Reprocessing of remains was forwarded to your  
Office by Transmittal Letter No. 2088, dated 18-11-46.

3. Remarks:

Case reviewed by undersigned Members of the Board of Review:

*Henry* Col. H.F. HENRY, O-12589 QMC *E.D. Mulvanity* Lt. Col. E.D. MULVANITY, O-359598 QMC

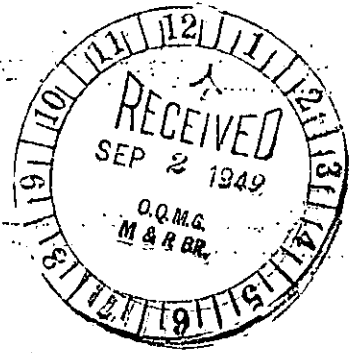
Major R. BERGER, O-251736 ORD *Jack C. Hayes* Capt. JACK C. HAYES, O-1577297 QMC

Capt. E.F. PRICE, Jr. O-1588236 QMC *Gaylord E. Lutz* 1/Lt. Gaylord E. LUTZ, O-1595665 QMC

Received 15 Aug 49  
not identifiable from presently  
OQMG

Incl #10

T.O. # 4261, 24 Aug 49



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(W/X-7779)  
X-7780 St Annes.

Q7-11 (37-9016-B)

May 46 - outside Cir. Cem.

All major bones fractured  
a/o msg. except R+L.  
Clavicle - R+L. tibia  
& fibula



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This Grave formerly occupied by: ( UNKNC X-003314-D  
USMC ST AVOLD, FRANCE  
Plot D, Row 22, Grave 27 **DISINTERMENT DIRECTIVE**  
Date reburied: 11 Oct 49 Date disinterred: 11 Oct 49

SECTION A - NAME AND BURIAL LOCATION OF DECEASED **M. R. SWART**  
**CAPT QMC** DIRECTIVE NUMBER **3574 00000** DATE **15 | 01 | 48**  
DAY MONTH YEAR

NAME **UNKNOWN X-007780** SERIAL NUMBER **UNKNOWN X-007780** RANK **J** ARM **J** DATE OF DEATH  
DAY MONTH YEAR

CEMETERY **ST AVOLD - METZ** DISPOSITION OF REMAINS **0 3503 80**  
CODE DIST. PT.

PLOT **4N** ROW **7** GRAVE **151** 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 **UNKNOWN X- 007780** SERIAL NUMBER **UNKNOWN X- 007780** RANK **Unk** DATE OF DEATH **Unk** DATE DISTINTERRED **9 Jun 48**

IDENTIFICATION TAG ON  REMAINS ORGANIZATION **USAAF** RELIGION **Unk** IDENTIFICATION VERIFIED BY **Richard F Peterson, Embalmer** NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL **Mattress cover** CONDITION OF REMAINS **Totally disarticulated. No flesh. All major bones fractured and/or missing except Right and left clavicle, right and left tibia and fibula.**

OTHER MEANS OF IDENTIFICATION **Report of Burial found on remains**

MINOR DISCREPANCIES **None**

REMAINS PREPARED AND PLACED IN CASKET  
DATE **15 Jun 48** BY **Richard F Peterson, Embalmer**

CASKET SEALED BY **Richard F Peterson, Embalmer** EMBALMER (Signature) **Richard F Peterson**

CASKET BOXED AND MARKED **15 Jun 48** DATE BY **Richard F Peterson, Embalmer** SHIPPING ADDRESS VERIFIED BY **Frank B Callaghan, 1st Lt FA**

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

**Frank B Callaghan, 1st Lt FA, 337 QM Bn**  
SIGNATURE OF GRS INSPECTOR

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies. 2 2 DEC 1949

# 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 ELVAOED ENANCE	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

REPAIRS  
 RECORDS BRANCH  
 NOV 23 3 33 PM '48  
 FEDERAL BUREAU OF INVESTIGATION

# REPORT OF INVESTIGATION

## AREA SEARCH

AGRC Form # 10 (Revised)

1 January 1946.

31 May 1946  
Date

NAME UNKNOWN X-7780 RANK Unknown ASN Unknown

ORGANIZATION A.A.F.

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:

a. NAME Unknown RANK Unknown ASN Unknown

b. ORGANIZATION Unknown

2. Was partial identification established? . If so, state the facts as to whom you believe the deceased to be:

a. NAME Unknown RANK Unknown ASN Unknown

b. ORGANIZATION Unknown

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

Names of other Unknowns

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

a. Date of above burials 1943 to April 1945 Common Graves? \_\_\_\_\_

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5. Name and Type of Cemetery Outside civilian cemetery  
(Military or Civilian)
6. Map Coordinates of the Cemetery WY 8567
- a. Town Hochmutting Country Germany
7. Give exact location in cemetery of the remains.
- a. Section Isolated Row \_\_\_\_\_ Grave \_\_\_\_\_
- b. Is Sketch attached? Yes
8. If remains are not located in a cemetery, give exact location.
- a. Town \_\_\_\_\_ Coordinates \_\_\_\_\_
- b. Is sketch attached? \_\_\_\_\_
- c. Is area mined? No
9. How is the grave marked? With wooden cross
10. If grave is marked with cross, give exact markings thereon \_\_\_\_\_  
" Hier ruhen 15 Soldaten der Amerikanischen Armeee "
- a. From what source was this information obtained? Unknown  
(Identification tags, personal effects)
- b. By Whom \_\_\_\_\_
11. Where are the cemetery records? No records all indification  
(Town Hall, cemetery, burgermeister's office)  
taken by German Air Force Personal
- a. What information was contained thereon? Unknown
- b. Where was the information obtained? \_\_\_\_\_
- c. By Whom? \_\_\_\_\_
12. What is the date of death? Unknown
- a. Give basis \_\_\_\_\_
13. What is the cause of death? Plane Crash
- b. Give basis From Cemetery Caretaker's statement
14. What is the date of burial? Unknown
- a. Give basis \_\_\_\_\_

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15. Where was the place of death? Unknown Coords  
 Give basis \_\_\_\_\_
16. Where were the remains founds? Unknown Coords  
 a. By Whom? Unknown  
 b. Is sketch attached? No
17. Was a casket used? No Who furnished the casket? \_\_\_\_\_  
 Type of casket \_\_\_\_\_ How marked? \_\_\_\_\_
18. Who made the burial German Civilian and Military Personal  
 (Civilian, American Mil. or German Mil.)  
 a. What are the names and addresses? \_\_\_\_\_  
 \_\_\_\_\_  
Unknown  
 b. Are certificates and statements attached? No

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? Unknown  
 a. Give location in plane from which the bodies were removed \_\_\_\_\_  
 \_\_\_\_\_  
Unknown  
 (Tail gunner, pilot, radio, turret, etc., or front, side, of plane)  
 b. Near wreckage? Unknown
20. Scene of crash must be investigated. Give complete results of Investigation (if removed, state when an by whom).  
 a. Type of Plane Unknown  
 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? \_\_\_\_\_

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22. Did plane explode in the air? Unknown On ground? Unknown
23. Did plane burn in the air? Unknown On ground? Unknown
24. What was the direction of the flight? Unknown
25. What was the civilian opinion regarding destination of plane?  
None
26. Had bombs been released prior to the crash? Unknown
27. Does specific time and date of crash correspond with date of death of above named deceased?  
no date available
28. Number of planes in formation prior to crash Unknown
29. State precise time and date of plane crash Unknown  
(Night? Day?)
30. Were parachutists seen? Unknown How many? \_\_\_\_\_ Escaped? \_\_\_\_\_  
Prisoners? Unknown

**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? \_\_\_\_\_

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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) \_\_\_\_\_

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 ?

40. State the specific clues and evidence that were obtained in securing the name and facts regarding the above listed deceased \_\_\_\_\_ None \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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 \_\_\_\_\_ All personal effects removed by German Personal \_\_\_\_\_

a. Were identification tags found at the time of death ? \_\_\_\_\_ Unknown \_\_\_\_\_

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

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

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 ? \_\_\_\_\_ Unknown \_\_\_\_\_

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

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

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- c. Was deceased identified by living members of the crew at the time of death? \_\_\_\_\_  
\_\_\_\_\_
- d. Did Cemetery register or cross indicate the immunization shot? \_\_\_\_\_
42. Was Deceased given first aid? Unknown If so, where? \_\_\_\_\_  
By whom? \_\_\_\_\_ Are statements from the medical people attached? \_\_\_\_\_  
\_\_\_\_\_
43. Was deceased evacuated to a German civilian hospital? Unknown  
WHERE? \_\_\_\_\_ Names of 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 investigation to obtain from civilian sources the condition of the remains?  
\_\_\_\_\_  
(Burnt? Decapitated? etc)
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? \_\_\_\_\_ By Whom? \_\_\_\_\_  
\_\_\_\_\_ When? \_\_\_\_\_
48. Give full names, addresses, and information obtained from each person interviewed \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
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?

No

51. Was investigation preceded by advanced publicity? Yes

(If special investigation, give case number)

52. Give Brief Narrative

(Use attached sheets, if necessary)

signed: Wittenberg

Signature of Interpreter

Interpreter

Rank

ASN

606th QM. Gp. Co.

Organization

s/ Laurence L. Girsch

Signature of Investigator

Sgt. 37748702

Rank

ASN

606th QM Gp. Co.

Organization

No information could be found pertaining to this case. All bodies were collected from around Munich and buried in one Mass Grave. All identification and information was sent to Frankfurt by German Military Personal and could not be located.

(217)

STATEMENT

Land Police Post Schleissheim  
Landkreis Muenchen, Distr. Obb.

Schleissheim, 23 March 1946

Subject: Registration of Graves of American Soldiers in the Area of this Post etc.

- 1) 4 Graves of American soldiers are in our Area of Responsibility.
- 2) In total 104 men are buried in these 4 graves. They are crew of shot down planes.
- 3) 3 graves, containing in total 89 men are in the cemetery of the community Oberschleissheim and 1 grave, containing 15 men, is located a few meters from the cemetery.
- 4) Only the following names, obtained from 2 graves marks, are listed:

1. grave:

Sgt. Betts Id.Tag.Nr. J 1811721  
F./S Fall (in compliance with  
dates, given by the crew)  
1 km western of Allach-Munich

I. Location of crash

Beazligha, J. Offr. C.E. 144644  
Scharoliffe, A.F. G. 121 01 77  
Anderschng.A. Ugr. 178 435  
Cameron (no other dates)

II. Location of crash: Solln near Munich, 7 Sep 1943

2. Graves:

F/S Pilot E/ Jenwicks-Glennell  
Sgt. Clarkson  
F/S Warren  
P/O Moffat  
Sgt. Baker  
Sgt. Edwards

(Plane crew)  
shot down 21 Dec. 1942 near Dachau

The names of all other deceases are unknown

- 5) Date of burial is not to be stated, because they were recorded only by the Fliegerhorst-Kommandantur (Airport Command)
- 6) In conliance with statements of the woman cartaker of this community it is possible that the former Stabsfeldwebel der Luftwaffe (M/Sgt. of Airforce) with name Demmel from Mainburg (particulars of Adress unknown) is able to give more informations. Demmel has been in the Fliegerhorst Schl. for a long time and he often conducted bodies for burial.
- 7) it is possible, too, that Demmel can give information about the location of records and Identification Tags.

- 8) Nothing is known this post about escaped American soldiers.
- 9) Foreigners in American uniform are to be seen sometimes. It is not to be stated whether they are licensed to wear the uniform.

Schleissheim, 21 May 1946

a certified true copy:

/s/ Assm  
Kommissar of Landpolice

TRANSLATION

Abchrift

Landpolizei-Posten Schleissheim:  
Landkr. Muenchen, Reg. Bez. Obb.

Schleissheim, den 23.3.1946

Betrifft: Feststellung der Gräber von amerikanischen Soldaten im hiesigen Postenbereich u.a.

- 1.) In unserem Dienstbezirk befinden sich 4 Gräber von amerikanischen Soldaten.
- 2.) Insgesamt sind in diesen 4 Gräbern 104 Mann begraben und sind abgeschossene Flugzeugbesatzungen.
- 3.) 3 Gräber mit insgesamt 89 Mann befinden sich im Friedhof der Gds. Oberschleissheim und 1 Grab mit 15 Mann liegt wenige Meter neben dem Friedhof.
- 4.) An Namen sind nur nachstende aufgeführt, die von 2 Grabtafeln zu entnehmen sind

1. Grab:

Sgt. Betts Erk.M.Nr. J 1811721  
F./S Fall (lt. Angaben der  
Besatzung)

I. Abschussort: 1 km westlich Allach-Muenchen

Beazlight, J. Offr. C.E. 144644  
Scharcliffe, A.F. G. 121 01 77  
Andersohng, A. Uer. 178435  
Cameron (sonst keine Angaben)

II. Abschussort: Solln bei Muenchen 7.9.1943:

2. Grab:

F/S Pilot E. Jennicke-Olennell  
Sgt. Clarkson  
F/S Warren  
P/O Moffat  
Sgt. Baker  
Sgt. Edwards

(Flugzeugbesatzung)  
abgeschossen am 21.12.1942 bei Dachau

Von anderen Toten sind keine Namen bekannt.

- 5.) Tag der Beerdigung ist nicht festzustellen, da die Aufzeichnungen darüber nur von der Fliegerhorst-Kommandantur gemacht wurden.
- 6.) Nach Angaben der hiesigen Leichenfrau dürfte ein ehemaliger Stabsfeldwebel der Luftwaffe mit Namen Demmel aus Mainburg (genauere Anschrift unbekannt) nähere Auskunft geben können. Demmel war längere Zeit im Fliegerhorst Schleissheim und hat öfters Leichen zur Bestattung überführt.
- 7.) Wo die Papiere und Erkennungsmarken verwahrt wurden, dürfte ebenfalls Demmel Aufschluss geben können.
- 8.) Über unerlaubte Entfernung amerik. Soldaten ist auf hies. Posten nichts bekannt.
- 9.) Ausländer in amerik. Uniform tauchen wiederholt auf, ob dieselben eine Berechtigung zum Tragen der Uniform haben, konnte nicht festgestellt werden.

Für die Richtigkeit der Abschrift:

Schleissheim, den 21. Mai 1946

gez. Assn  
Kommissar der Landpolizei

A certified true copy

/s/ WALTER I MARTINE  
/t/ WALTER I MARTINE  
2nd Lt. Inf.  
MEU. # 4



STATEMENT

The Burgermeister  
of the Community Oberschleissheim

Oberschleissheim, 21 May 1946

The Burgermeister, signed below, hereby certifies, that there are no records in this community, relating to the soldiers of the Allied Forces, buried in Hochmutting cemetery, community Oberschleissheim. These soldiers were collected and buried by the Fliegerhorst (Airport) Schleissheim, which gave no informations here about to the community. As here know, all basis records etc., relating to deceases soldiers of the Allies were sent to Oberursel near Frankfurt (Main).

It may be possible, that the grave-digger of Hochmutting, Josef Kronawitter, can give some informations.

(Official Seal  
Community Oberschleissheim)

/s/ Der Buergermeister  
Wollschlager

TRANSLATION

Der Buergermeister  
der Gemeinde Oberschleissheim

Oberschleissheim, 21. Mai 1946

Der unterfertigte Buergermeister bestaetigt hiermit, dass ueber die im Friedhof Hochmutting, Gemeinde Oberschleissheim, bestatteten Soldaten der alliierten Streitkraefte bei der Gemeinde keinerlei Unterlagen vorhanden sind. Die Sammlung und Beerdigung dieser Soldaten erfolgte durch den Fleigerhorst Schleissheim, der der Gemeinde auch hierueber keinerlei Mitteilungen zugehen liess. Soviel hier bekannt ist, wurden saemtliche Unterlagen etc. ueber gefallene Soldaten der Allirten nach Oberursel bei Frankfurt (Main) geschickt.

Es waere moeglich, dass der Totengraeber Josef Kronawitter von Hochmutting einige Angaben machen kan.

(Dienstsiegel :  
Gemeinde Oberschleissheim)

gez. Der Burgermeister :  
Wollschlager

A certified true copy.

Signed: WALTER I MARTINE  
2nd Lt. Inf  
MBU # 4

STATEMENT

Catholic Priest's Office  
Oberschleissheim  
Post Schleissheim  
21 May 1946

It is hereby certified, that no informations relating to the burial of Allied soldiers in Hochmutting Cometary, parish Oberschleissheim can be given, because no Catholic clergymen were called to the burial and they did not receive any information.

(Seal: SIGILL.PAROCH.CATH.  
PATRONAE BAVARIAE OBERSCHLEISSHEIM)

/s/ Josef Kranz  
Cath.Priest

TRANSLATION

Kath.Pfarramt  
Oberschleissheim  
Post Schleissheim  
21.Mai 1946

Es wird hiermit bestaetigt, dass betreff: Bestattung alliierter Soldaten auf dem Friedhof zu Hochmutting - Pfarrei Oberschleissheim keine Angaben gemacht werden koennen, da die katholischen Geistlichen bei der Beerdigung nicht zugezogen wurden und auch keine Benachrichtigung an sie gelangte.

(Siegel: SIGILL.PAROCH.CATH.  
PATRONAE BAVARIAE OBERSCHLEISSHEIM)

(gez.) Josef Kranz  
Kath.Pfarrer

A certified true copy.

Signed: WALTER I MARTINE  
2nd Lt. Inf.  
MBU # 4

STATEMENT

Josef Kronawitter  
Hochmutting / Post Schleisheim

I hereby certify, that neither the names nor any other particulars of the members of the Allied Forces, buried in Hochmutting Cemetery, are known to me. I was only ordered to bury the bodies by the Fliegerhorstkommandantur (Airport Command) Schleisheim. Effects, perhaps found, were saved by the Fliegerhorstkommandantur.

/s/ Josef Kronawitter

The deceased were brought for burial by the Fliegerhorstkommandantur.

TRANSLATION

Josef Kronawitter  
Hochmutting / Post Schleisheim

Ich bestaetige hiermit, dass mir von den im Friedhof Hochmutting beerdigten alliierten Aremmeangehoerigen keinerlei Namen oder sonstige Angaben bekannt sind. Ich hatte nur den Auftrag von der deutschen Fliegerhorstkommandatur Schleisheim, die Toten zu beerdigen. Evtl. aufgefundene Gegenstaende wurden von der Fliegerhorstkommandantur aufbewahrt.

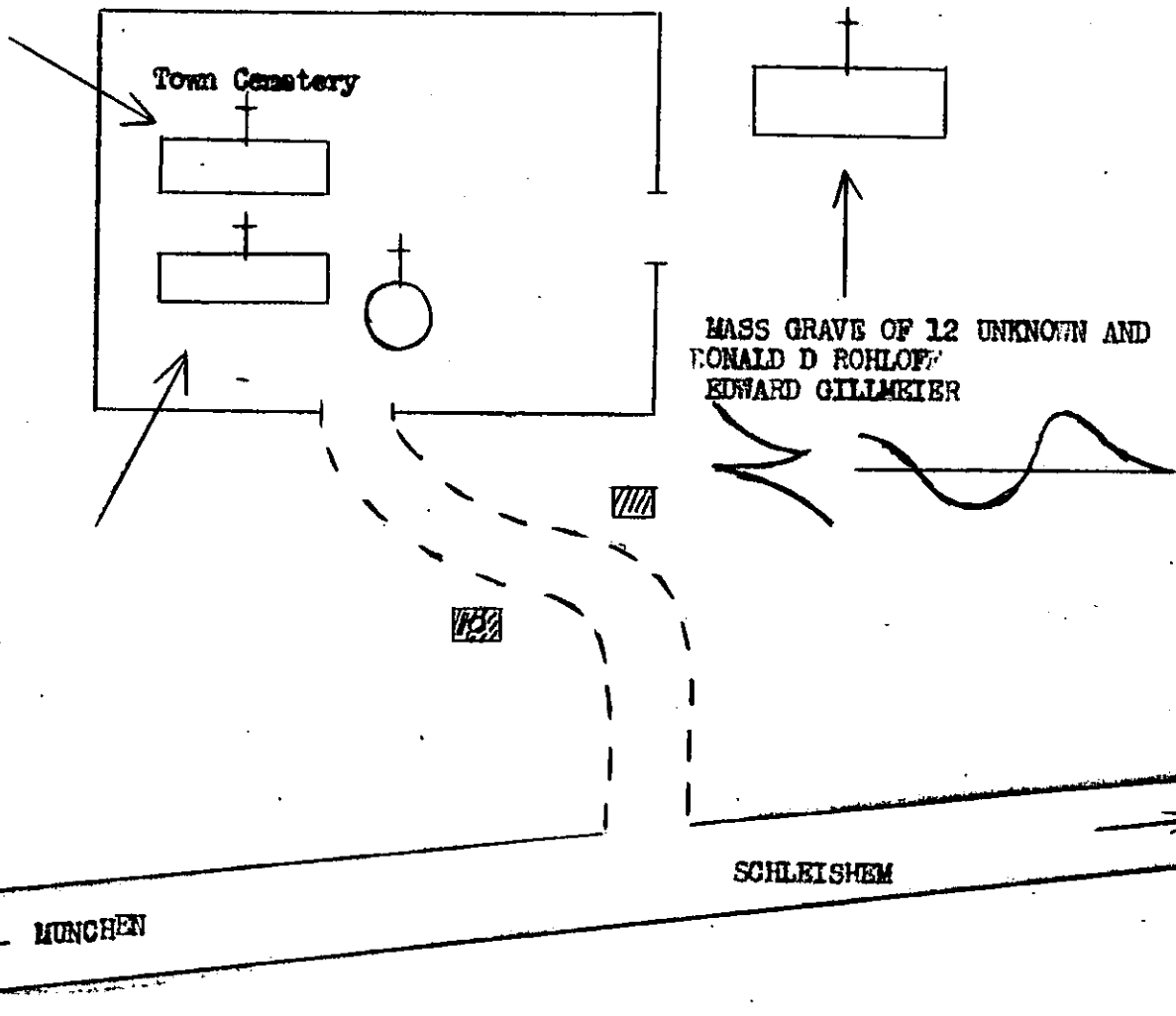
(gez.) Josef Kronawitter

Die Toten wurden von der Fl.Kdr. zur Beerdigung gebracht.

A certified true copy.

Signed: WALTER I MARTINE  
2nd Lt. Inf.  
MBU # 4

Grave of 15 American Fliers located in:  
HOCHMUT ING, Germany  
Landkreis, München  
Coord WY 8567  
Map 1:250,000 Sheet M 49 München



AGRC  
FORM No. 11  
Revised 5 January 1946

## CHECK LIST OF UNKNOWNNS

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

Unknown X 7780  
Cemetery St. Avold, France (Q-260584)  
Plot \_\_\_\_\_ Row \_\_\_\_\_ Grave \_\_\_\_\_

1. Arrived at cemetery \_\_\_\_\_  
(hour) (date)
2. Place of death Unknown  
(name of closest town) (coordinates and letter Prefex, maps)  
(Sheet, scale and serials used)
3. Remains recovered or disinterred by 606th M. G.P. Co.  
(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).**

Clothing Markings      Sizes      Indicate unusual markings  
Color wear, tear, repairs, etc.

Item \_\_\_\_\_

\*Headgear None  
(type)

Raincoat None

Overcoat None

Jacket, Field None

Jacket, Combat None

Mackinaw None

Sweater None

Jacket, HBT None

\*Shirt, Wool OD None

Undershirt, Wool Remnants

Undershirt, Cotton None

Trousers HBT None

\*Trousers, Wool OD None

Belt, Web **None**  
Drawers, Wool **None**  
Drawers, Cotton **None**  
Leggins, Wool **None** (Note unusual lacing)  
Socks, Cotton **None**  
\*Shoes (type) **None**

Overshoes **None**

Web Equipment (Type) **None**

(Other item) **None**

(Other item) **None**

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

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

Shoulder Patch **None**

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

8. Description of Remains :

Age **UTD** Est. Height **5'5"** 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 **UTD**  
(light, med. dark, clear, pimples, poeks, freckles)

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

Hair **No hair found**  
(color, length, quantity, curly, wavy, straight, whorls, or definite parting).

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

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

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

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

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

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

Teeth **UTD** (white, size, unevenness, spacing, noticeable crowns, fillings, extract).

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

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

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

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

(extent and quantity of hair)

Hands **UTD**

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

(Unusual characteristics of fingernails)

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

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

Circumcision **UTD** (yes-no) Pubic hair **None found** (color)

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

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

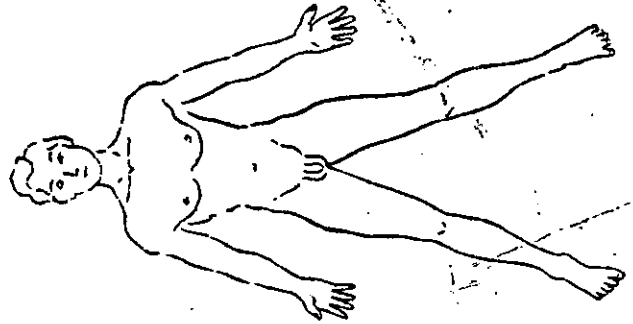
Feet UTD  
(size, corns, callouses, flat)

Toes UTD  
(slender, straight, crooked, overlap)

Evidence of healed factures 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 No hands

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

12. Remarks : Only small portion of skeleton recovered. Flesh completely decomposed

Head missing/ Not necessary to fluoroscope. Estimated weight of remains recovered 5 lbs.

Mass Burial 9016 was seperated into individual cases as follows:  
~~all cases were separated with~~ # 1F-3 (3F-9016 A) and # 1f-11 (3F-9016 B).

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.

*R.G. Johnson*  
\_\_\_\_\_  
Officer's Name

**R.G. JOHNSON**

**2nd Lt. INF Lab.Off.**

Rank Service

**Central Identification Point**

Organization

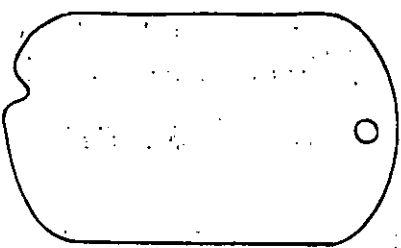


#1F-11 (9F-9016B)



X-7780

<p><b>QMC Form 1042</b> (Rev. 1 Apr. 1946) (Supersedes GRS Form 1, and Rev. of 1 Apr. 45, which may be used.)</p>	<p>DATE OF REPORT <b>9 October 1946</b></p>
<p><b>REPORT OF INTERMENT</b> (AR 30-1810 and AR 30-1815)</p>	

<p><i>Imprint Identification Tag If Possible.</i> <b>DO NOT TYPE</b></p> 	<p><b>Section 1.—IDENTIFICATION.</b></p>		
<p>NAME (Last, first, middle initial) <b>UNKNOWN X-7780</b></p>	<p>SERIAL NO. <b>Unknown</b></p>		
<p>GRADE <b>Unknown</b></p>	<p>ORGANIZATION <b>Unknown</b></p>	<p>BRANCH OF SERVICE <b>AAF</b></p>	
<p>RACE <b>Unknown</b></p>	<p>RELIGION <b>Unknown</b></p>	<p>IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY</p>	

<p>PLACE OF DEATH <b>Unknown</b></p>	<p>CAUSE OF DEATH <b>Plane Crash</b></p>	<p>DATE OF DEATH <b>Unknown</b></p>
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EMERGENCY ADDRESSEE (Name, relationship, and address)  
**Unknown**

<p>IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) <b>None</b></p>	<p>IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) <b>None</b></p>
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<p>WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) <b>Yes</b></p>	<p>COMPLETED TOOTH CHART ON QMC FORM 1045 ATTACHED HERETO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p>
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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 St. Avoird, France, (Q-260584)**

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	ROW No.	ROW NO.	GRAVE No.
<b>9 October 1946</b>	<b>1500</b>	<b>wood, casket</b>	<b>temp wood, cross</b>	<b>NNNN</b>	<b>7</b>	<b>151</b>

WAS THIS A REBURIAL? (Yes or no) <b>Yes</b>	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE <b>Outside Civilian Cemetery Hochmuttingen, Germany WY-8567 1/250,000</b>	PLOT No.	ROW No.	GRAVE No.

TYPE OF RELIGIOUS CEREMONY <b>Joint Service</b>	PERSON CONDUCTING BURIAL RITES <b>Ch. H. M. Trebaol, Capt. Ch. Chas.R. Williams, 1/Lt</b>	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY <b>One copy WD QMC Form 1042 - placed in burial bottle - and buried with remains (Report of Interment)</b>
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) <b>No</b>	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) <b>Yes, embossed plate</b>	

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) <b>Beginning of Row</b>	RANK	SERIAL No.	ORGANIZATION	GRAVE No.

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) <b>Unknown X-7779</b>	RANK <b>Unk</b>	SERIAL No. <b>Unk</b>	ORGANIZATION <b>AAF</b>	GRAVE No. <b>152</b>
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SIGNATURE OF PERSON PREPARING REPORT <b>ELLSWORTH T. MAC INTYRE Capt. QMC</b>	SIGNATURE OF GRS OFFICER VERIFYING REPORT <b>VERNE C. EDMUNDS 2nd Lt. C.I.P.</b>
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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.

MEMORIAL  
 NOV 25 2 22 PM '46  
 REBURIAL BRANCH  
 RECORDS BRANCH

18 4-151

**RESTRICTED**

	<b>Section 1. UNIDENTIFIED REMAINS.</b>			
LEFT LITTLE FINGER	<b>INSTRUCTIONS:</b> (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 <b>Est.</b> 5'5"	WEIGHT UTD	COLOR OF EYES UTD	COLOR OF HAIR UTD
	BIRTHMARKS, SCARS, OR TATTOOS UTD			
LEFT MIDDLE FINGER	WEAPON AND SERIAL No. None		LAUNDRY MARKS None	WHERE BODY WAS BURIED OR FOUND Hochmuttingen, Germany
LEFT INDEX FINGER	<b>OTHER IDENTIFICATION CLUES</b>  These remains were segregated from a mass burial of two. Y These remains were given the case # 1F-11(3F-9016-B), the other remains have # 1F-3(3F-9016-A)  It is impossible to state where and when this man died. From 1943 to April 1945 the German Airforce buried at Hochmuttingen, all Allied soldiers who died in the Munich Area.  All were buried in a common grave.			
LEFT THUMB				
RIGHT THUMB				
RIGHT INDEX FINGER				
RIGHT MIDDLE FINGER	<b>FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY</b>  <div style="text-align: right; margin-right: 50px;">  </div>			
RIGHT RING FINGER	<b>REMARKS:</b>  Form 11 Checklist accomplished Fingerprints missing, no hands Toothchart missing, no teeth. Estimated weight of remains recovered 5 lbs			
RIGHT LITTLE FINGER				