

Interred 12 Apr. 49

FBI

1

E 9 52 USMC ANZIO

WILLARD EDGERTON
Major QMC, Cemetery Superintendent

DISINTERMENT DIRECTIVE

SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
99 70 00256

DATE
15 03 49
DAY MONTH YEAR

NAME: UNKNOWN X SERIAL NUMBER: 000053 GRADE: ARM: 0 RACE: 0 RELIGION: 6

CEMETERY: BELGRADE YUGOSLAVIA PLOT: D ROW: 18 GRAVE: 504 DISPOSITION OF REMAINS: 5202 80
CODE DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
NETTUNO, ITALY

NAME AND ADDRESS OF NEXT OF KIN
(BY ADMINISTRATIVE DECISION)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER GRADE DATE OF DEATH DATE DISTINTERRED

IDENTIFICATION TAG ON 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 (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)

CHANGE FILE
10 MAY 1949
REGISTRATION
BRANCH
MEM. DIV.

REMAINS PREPARED AND PLACED IN CASKET

DATE BY CASKET SEALED BY

EMBALMER (Signature)

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY
Wm P Spurlin

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 AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

WEL

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM NAPLES PORT MORGUE		TO USMC ANZIO	
KIND OF CONVEYANCE TRAIN		NAME OF CONVOYER M SGT GERALD J RYAN	
SIGNATURE OF SHIPPER WILLIAM H. SPURLIN, 1ST LT QMC	DATE 11Apr49	SIGNATURE OF RECEIVER <i>Willard Edgerton</i> WILLARD EDGERTON, MAJ QMC	DATE APR 2 1949

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	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

51

USMC ANZIO

DISINTERMENT DIRECTIVE

1
WILLARD EDGERTON
Major QMC, Cemetery Superintendent

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

9970 00256

DATE

15 08 48
DAY MONTH YEAR

NAME

UNKNOWN X-000053

SERIAL NUMBER

GRADE

ARM

RACE

RELIGION

Q

0

6

CEMETERY

BELGRADE YUGOSLAVIA

PLOT

D 18

GRAVE

504

DISPOSITION OF REMAINS

5201 80

CODE

DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

FLORENCE, ITALY

NAME AND ADDRESS OF NEXT OF KIN

(BY ADMINISTRATIVE DECISION)

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

UNKNOWN

SERIAL NUMBER

X-53

GRADE

DATE OF DEATH

DATE DISTINTERRED

14 January 1948

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

T.C. ANDERSON, QMC

 REMAINS MARKER

UNKNOWN

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)

REMAINS PREPARED AND PLACED IN CASKET

DATE BY

CASKET SEALED BY

EMBALMER (Signature)

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY

WILLIAM H. SPURLIN
1st. LT. QMC

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 AGRS INSPECTOR

MARKS AND SPECIAL INSTRUCTIONS

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC BELGRADE, YUGOSLAVIA		TO CCP, NAPLES	
KIND OF CONVEYANCE TRAIN		NAME OF CONVOYER JOSEPH F. NAHAN CAPT.	
SIGNATURE OF SHIPPER <i>T.C. Anderson</i> T.C. ANDERSON MAJ QMC	DATE 21 Jan 1948	SIGNATURE OF RECEIVER <i>A.F. Hubbard</i> A.F. HUBBARD LT COL AF	DATE 24 Jan 1948

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	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

To be used only when disinterment is made prior to receipt of OQMG Form 1174 (Disinterment Directive) Remains Storage Point Location

AGRS-MZ WORK SHEET DISINTERMENT

Date **JAN 61948**

No. **625**

SECTION A: Information obtained from Zone Ho Records

NAME	SERIAL NO.	RANK	AFM
UNKNOWN AMERICAN X-53	Unk.	Unk.	USAAF
CEMETERY	U.S. MILITARY CEMETERY, BELGRADE		RACE
			White
PLGP	ROW	GRAVE	COUNTRY
D	18	504	YUGOSLAVIA
			RELIGION
			Unk.

SECTION C: DISINTERMENT AND IDENT. (Info obtained from Remains and/or Grave Marker)

NAME	SERIAL NO.	RANK	DATE DISINTERRED
UNKNOWN AMERICAN, X-53	Unknown	Unknown	5 Jan 48
IDENTIFICATION TAG ON	CLOG FORM #1042 with Remains	RELIGION	IDENTIFICATION VERIFIED BY
Remains	Marker	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Unknown
<u>0</u>	<u>0</u>		JOSEPH F. NAHAN Capt., AC Name & Title

SECTION D: PREPARATION OF REMAINS FOR STORAGE

NATURE OF BURIAL	CONDITION OF REMAINS	
Shroud	Skeletal	
OTHER MEANS OF IDENTIFICATION	None	
MINOR DISCREPANCIES	None	
REMAINS PREPARED AND PLACED IN CASSET		
Date 25 Mar 48	By GEORGE P. LOTTER	
CASSET SEALED BY	EMBALLER (Signature)	
GEORGE P. LOTTER	<i>George P. Lotter</i>	
IDENTIFICATION PLATE PLACED ON CASSET		
Date 25 Mar 48	Name Bill L. Lack	Title Checker
REMARKS	Died 18 Aug 44	

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

Joseph F. Nahan
JOSEPH F. NAHAN
 Capt., AC
 Signature of GCS Inspector
 Grade and Organization

*Section "B" Omitted

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

From: USMC, NAPLES

To: CCP, NAPLES

Kind of Conveyance: Truck

Name of Convoyer: FRANCIS M. GRIGSBY, Capt., QMC

Signature of Shipper:

Signature of Receiver

C.R. IVEY, 2d Lt., QMC 24Mar48

JOSEPH T. ZIELINSKI, 1st Lt., Ord 24Mar48

2. SHIPPED

From: UCP, NAPLES

To: PORT MORGUE

Kind of Conveyance: Truck

Name of Convoyer:

Signature of Shipper:

Signature of Receiver:

JOSEPH T. ZIELINSKI, 1st Lt., Ord 25Mar48

WALTER E. THOMAS, 1st Lt., Ord 25Mar48

To be used only when disinterment is made prior to receipt of OQMG Form 1194 (Disinterment Directive)

Remains Storage Point Location

AGRS-MZ WORK SHEET DISINTERMENT

Date JAN 6 1948

No. 625

SECTION A: Information obtained from Zone Hq Record

NAME	SERIAL NO.	RANK	ARM
UNKNOWN AMERICAN X-53	Unk.	Unk.	USAAF
CEMETERY	U.S. MILITARY CEMETERY, BELGRADE		RACE
			White
PLOT	ROW	GRAVE	COUNTRY
D	18	504	YUGOSLAVIA
			RELIGION
			Unk.

*SECTION C: DISINTERMENT AND IDENT. (Info obtained from Remains and/or Grave Marker)

NAME	SERIAL NO.	RANK	DATE DISINTERRED
UNKNOWN AMERICAN X-53	Unknwon	Unk.	5 Jan 48
IDENTIFICATION TAG ON	QMC FORM #1042	RELIGION	IDENTIFICATION VERIFIED BY
Remains	with Remains	Unknown	JOSEPH F. NAHAN
Marker			Capt., AC
<u>0</u>	<u>0</u>	<u>X</u> Yes <u> </u> No	Name & Title

SECTION D: PREPARATION OF REMAINS FOR STORAGE

NATURE OF BURIAL	CONDITION OF REMAINS
Shroud	Skeletal

OTHER MEANS OF IDENTIFICATION
None

MINOR DISCREPANCIES
None

REMAINS PREPARED AND PLACED IN CASKET
Date 25 Mar 48 By GEORGE P. LOTTER

CASKET SEALED BY
GEORGE P. LOTTER EMBALMER (Signature)
S/ GEORGE P. LOTTER

IDENTIFICATION PLATE PLACED ON CASKET
Date 25 Mar 48 Name Bill L. Lack Title Checker

REMARKS
Died 18 Aug 44

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

S/ J F NAHAN
JOSEPH F. NAHAN, Capt.AC
Signature of GRS Inspector
Grade and Organization

*Section "B" Omitted

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

From: USMC, NAPLES

To: CCP, NAPLES

Kind of Conveyance: Truck

Name of Convoyer: FRANCIS M. GRIGSBY, Capt QMC

Signature of Shipper:

Signature of Receiver:

W.R. IVEY, 2d Lt. QMC 24Mar48 JOSEPH T. ZIELINSKI, 1st Lt. Ord 24Mar48

2. SHIPPED

From: CCP, NAPLES

To: PORT MORGUE

Kind of Conveyance: Truck

Name of Convoyer:

Signature of Shipper:

Signature of Receiver:

JOSEPH T. ZIELINSKI, 1st Lt. Ord 25Mar48 WALTER E. THOMAS, 1st Lt. Ord 25Mar48

AMERICAN GRAVES REGISTRATION DETACHMENT
AMERICAN GRAVES REGISTRATION SERVICE
MEDITERRANEAN THEATER SEPARATE ZONE COMMAND-MTOUSA
BELGRADE, YUGOSLAVIA APO 777, U.S.ARMY

NS/am

30 September 1947

SUBJECT: Report of Investigation on Unknown American X-53

TO : Commanding Officer
American Graves Registration Service
Mediterranean Theater Separate Zone Command-MTOUSA
APO 794, U.S.ArmY

1. Submitted herewith is the Report of Investigation by this office on Unknown American X-53, KIA on 18 August 1944, rank and organization unknown.

2. Following exhibits are attached:

a. Exhibit "A" Statement of two local civilians

3. FACTS:

MACR concerning this case is not available on file in this office.

4. FINDINGS:

a. That on 18 August 1944 between 13 and 1500 hrs three American single engine planes were flying, from SW to NE over Veliko Trgoviste, Yugo. Co-ords: 46 00'N - 15 51'E. (See Ex: "A")

b. That one of them burst into flames, exploded and crashed at the place Bomahovo. (See Ex: "A")

c. That an airman left the plane before it exploded. His chute did not open and he was found dead about 2 km from the scene of crash. (See Ex: "A")

d. That the Germans plundered the body and took his papers.

e. That the remains of the deceased airman were buried in the local cemetery at Vel. Trgoviste after 5 or 6 days. The grave was marked with a cross and inscription "American Plt 24 August 1944."

f. That upon exhumation the remains of an American airman were found in the coffin. Complete skeleton, broken hands and legs. No clothing except underwear.

g. That individual identification was impossible.

1945 West. Memorandum (Belgrade) X-53

- h. That a tooth-chart was taken.
- i. That the check list of unknowns was filled out.
- j. That it was impossible to identify the plane as all debris had been removed after the crash.

5. COMMENTS:

- a. We are not able to associate this case with any MACR on file in this office.

6. RECOMMENDATIONS:

- a. That the disinterred remains be accepted as those of an unknown American airman.
- b. That the tooth-chart taken be compared against the dental records of the airmen lost over Yugoslavia on 18 August 1944.

7. CONCLUSIONS:

- a. That we have buried the above remains in U. S. Military Cemetery Belgrade as follows:
Unknown American X-53 in Plot D Row 18 Grave 504
- b. That Report of Interment has been prepared and is attached herewith.

Incl's: a/s



T. C. ANDERSON
Major CMC
Commanding

S-T-A-T-E-M-E-N-T

Herewith we declare that on the 18 August 1944, between 13:00 and 15:00 hrs., three planes were flying from South-West to North-East. They were single engine fighters, One of them burst into flames over our village and exploded. At the same time I saw something fell down and established that it was an airman whose parachute didn't open. He was found dead at the village Domahovo.

The German Gestapo men rushed to the place of crash and took the dead airman to the cemetery at Veliko Trgoviste. They took all his goods and ordered for the body to be buried. The remains were buried after 5 to 6 days.

All parts of the plane have been removed. We remember that the day of crash was on a Friday and the day was nice, clear and sunny.

Subscribed before me on
this 1 July 1947

M. Jovanovic
Voj. Jovanovic
Civ. Investigator

Informants: 1.(s) Capar Josip
2.(s) Koncic Rudolf

A TRUE COPY:

EXHIBIT "A"

T. C. ANDERSON
Major QMC

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN
Unknown X - 53

2. DATE OF REPORT
20 July 1948

2. NAME OF CEMETERY USMC. Belgrade, Yugoslavia	4. PLOT D	5. ROW 18	6. GRAVE 504	7. DATE OF DISIN- TERMENT	RELIN- TERMENT
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PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT 5' 11 5/8"	10. COLOR OF HAIR	11. RACE
---------------------	------------------------------------------	-------------------	----------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS
"Non-Identifiable by reason of lack of sufficient identifying data".

[Signature]
F.C. ANDERSON
 Major QMG

13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES

14. WAS BODY BURNED? TO WHAT EXTENT?
 YES NO

15. WAS BODY MUTILATED? TO WHAT EXTENT?
 YES NO

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE DEFORMATIONS
 The man has six lumbar vertebrae. This is not a duplication but an abnormality. (the first sacral segment has separated and become the sixth lumbar vertebra).

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

Trans Rec dtd 8 Nov 48

Received 24 Nov 48 **QMG**
 Not identifiable from
 information presently
 available *RFB*

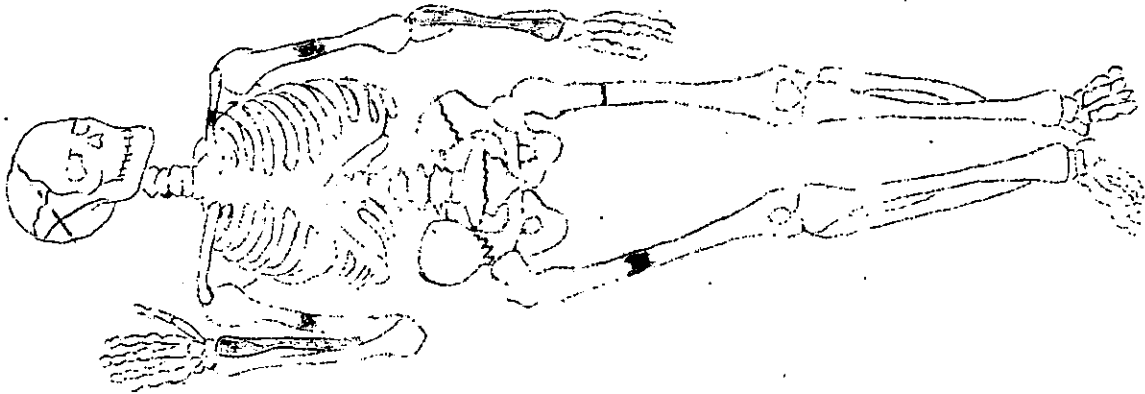
18. TOOTH CHART		TOP VIEW	SIDE VIEW
<p>MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" 'D OUT AND LABELED THUS:</p>			
<p>CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:</p>		<p>Gold Crown, Porcelain Crown</p>	
<p>BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:</p>		<p>Gold Bridge</p>	
<p>FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:</p>		<p>Gold Filling, Silver Filling</p>	
<p>CARIES (Cavities): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:</p>		<p>Cavity, Decayed</p>	

		RIGHT								LEFT								
		8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
			A O	A O	A O				P								A O	A O
Side Views																		Side Views
Top Views	UPPER																	
	LOWER																	
Side Views																		
			A O	A F O					P	P	P	P	P		A O	A F O	A O	
		16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16	

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."

Teeth 8-R, 16-R and 16-L have not fully developed.
 Tooth 5-R has a distal cavity.

19. BLACK OUT PARTS OF BODY NOT RECOVERED.



20. MASS BURIAL CERTIFICATE (If applicable)
(Wherein segregation in whole or parts is impossible)

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

Signature of Medical Officer

21. REMARKS AND ADDITIONAL INFORMATION.

The representative parts of a human remains graphically represented in paragraph 19 are those of one and the same individual.

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

TYPED NAME, Grade, Arm or Service;
and Organization. DOMINIC A. NETT, 2nd Lt. OMC
Det #3, 9107 TSU-OMC, AGRS/MZ
APO 794, US Army

Signature

Dominic A. Nett

HEADQUARTERS
U. S. ARMY
MEDICAL DEPARTMENT
MEDICAL CENTER
APO 704
US ARMY

CENTRAL IDENTIFICATION POINT

U. S. ARMY

Paragraphs 1-17 and 19-21, Identification Data QMC 1044 and 1044b
Paragraph 18 - Identification Dental Chart

C.I.P. Case No. _____

Date of Investigation 20 July 1948

Unknown American X- 53

Am. Mil. Cem. Belgrade, Yugoslavia ~~XXXXXX~~ Plot D Row No. 18 Grave 504

Place of Death Veliko Tigoviste, Yugoslavia Date of Death 18 August 1944

Map Reference _____ Sheet _____ Map of Italy _____

Other American Dead Found in Same Area _____

Cause of Death _____

22. Description of Remains

Skeletal state

(If the remains have not been decomposed, attach to this form QMC Form 1042,
completely filled out to physical characteristics.)

23. Skeletal Data

HEAD Broken - 13 pieces.

TOOTH CHART Accomplished

TRUNK Complete. Left clavicle is broken in shaft.

UPPER EXTREMITIES (Give measurements of long bones).

R Humerus Piece of shaft missing Humerus 35.3 cm (shaft broken)

R Ulna 28.7 cm L Ulna 28.2 cm

R Radius Missing L Radius Missing

Carpels, Metacarpals, Phalanges Bones of both hands are almost complete

LOWER EXTREMITIES. (Give measurements of long bones).

R Femur Piece of shaft missing L Femur Piece of shaft missing

R Tibia 40.2 cm L Tibia 40.2 cm

R Fibula 40.0 cm L Fibula 40.0 cm

Calcaneus, Tarsals, Patellae, Metatarsals, Phalanges Bones of both feet are almost complete. Both patellae are present.

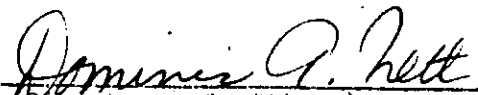
24. AGE ESTIMATE DATE 18 - 19

BASED ON Epiphyseal lines of all bones are still open.

25. SUMMARY OF FINDINGS: Tooth chart - accomplished
Age estimate - 18-19
Height estimate - 5' 11 5/8"
The partial remains of only one (1) man is present.

26. RECOMMENDATIONS
None

Processed by:
Dr. Alexander Tardy, MD
Chief Anthropologist


(Signature of Officer)

DOMINIC A. NEITT
2nd Lt. QMC
CIP Officer

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
MEDITERRANEAN THEATER SEPARATE ZONE COMMAND MTOUSA
APO 794 US ARMY

CENTRAL IDENTIFICATION POINT

REPORT OF INVESTIGATION

C.I.P. Case No. _____

Date of Investigation 30 Sept. 47

Unknown American X- 53

Am. Mil. Cem. Belgrade, Yugo ~~XXXX~~; Plot D, Row No. 18, Grave 501

Place of Death Vel. Trgoviste Date of Death 18 August 1944

Co-ords:

~~XXXX~~ Reference 46° 00' N - 13° 57' E Sheet Zgreb Map of Yugo ~~XXXX~~ 1:500,000

Other American Dead Found in Same Area _____

I. Personal Effects

List below all personal effects recovered with body:

None

Disposition _____

81160

7
II. Clothing

List below all clothing, sizes and markings.

Few fragments

III. Description of Remains

Skeletal state

(If the remains have not been decomposed, attach to this form QMC
form 1042, completely filled out as to physical characteristics.)

IV. Skeletal Data

HEAD Broken

TOOTH CHART taken ^{on} attached Form 1045

TRUNK Incomplete

UPPER EXTREMITIES. (Give measurements of long bones.)

R. Humerus Broken L Humerus Broken
R Ulna 11 1/2 L Ulna 11 1/2
R Radius Broken L Radius Broken
Carpels, Metacarples, Phalanges Missing

LOWER EXTREMITIES. (Give measurements of long bones.)


R Femur Broken L Femur Broken
R Tibia 16 1/8 L Tibia 16 1/8
R Fibula 15 5/8 L Fibula 15 5/8
Calcanea, Tarsals, Patellae, Metatarsals, Phalanges Missing

V. AGE ESTIMATED AT Impossible to indicate
BASED ON _____

VI. HEIGHT ESTIMATED AT _____

VII. SUMMARY OF FINDINGS

VIII. RECOMMENDATIONS: See Report of Investigation



T. C. ANDERSON
Major QMC

IDENTIFICATION DENTAL CHART

TO BE USED WITH QMC FORMS NOS. 1042 & 1044 IN PLACE OF CHART THEREON,
AND TO BE ATTACHED TO AND FORWARDED WITH THESE FORMS WHEN ACCOMPLISHED.

30 September 1947
DATE

American Unknown X-53
LAST NAME FIRST INITIAL RANK SERIAL NO.

UNIT ORGANIZATION

Veliko Trgoviste, Yugo., U. S. Mil. Cem. Belgrade
PLACE OF DEATH PLACE OF BURIAL PLOT ROW GRAVE NO.

	RIGHT												UPPER TEETH												LEFT												
	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8																					
TYPE		A	AA		X										AA																						
LOCATION		o	oo												oo																						

INSIDE — LOOKING OUT

	RIGHT												LOWER TEETH												LEFT												
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16																					
TYPE		A	AA				X		X		X		A	AA	A																						
LOCATION		o	of										od	of	o																						

KEY OF SYMBOLS TO BE USED ON ABOVE CHART

<p>SYMBOLS IN WHOLE BOX</p> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">X</div> <p>EXTRACTED</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">O</div> <p>CAVITY. INDICATE LOCATION</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 60px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">C X C</div> <p>FIXED BRIDGE (INCL. ABUTMENTS)</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 60px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">X X X</div> <p>TEETH REPLACED BY DENTURE</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">P</div> <p>POSTHUMOUSLY MISSING (LOST AFTER DEATH)</p> </div>	<p>TYPE OF FILLING IN UPPER HALF OF BOX</p> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">A</div> <p>AMALGAM (SILVER)</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">G</div> <p>GOLD</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">S</div> <p>SILICATE OR PORCELAIN</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">O</div> <p>OXYPHOSPHATE (CEMENT)</p> </div>	<p>LOCATION OF FILLING IN LOWER HALF OF BOX</p> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">m</div> <p>MESIAL (BETWEEN-TOWARD FRONT)</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">o</div> <p>OCCUSAL (BITING SURFACE BACK TEETH)</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">d</div> <p>DISTAL (BETWEEN-TOWARD BACK)</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">l</div> <p>LINGUAL (TOWARD TONGUE)</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">f</div> <p>FACIAL (TOWARD CHEEK)</p> </div>
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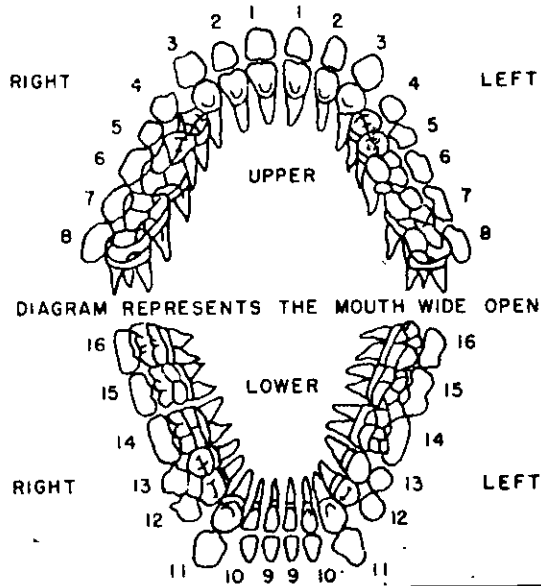
INSTRUCTIONS:

ACCURACY AND ATTENTION TO DETAIL IN THE PREPARATION OF THIS CHART ARE OF PARAMOUNT IMPORTANCE, IF SAME IS TO BE OF MAXIMUM VALUE.

2. **NOTE CAREFULLY** THAT: SYMBOLS INDICATING MISSING TEETH, CAVITIES AND BRIDGE-WORK ARE TO BE INSERTED IN **WHOLE BOX**; SYMBOLS INDICATING **TYPE OF FILLING** ARE TO BE INSERTED IN **UPPER HALF** OF BOX; AND SYMBOLS INDICATING **LOCATION OF FILLING** ARE TO BE INSERTED IN **LOWER HALF** OF BOX.

3. ANY ABNORMALITIES SUCH AS MALPOSED, MALFORMED OR DISCOLORED TEETH, ETC. SHOULD BE NOTED. DENTAL WORK NOT COVERED ABOVE WILL BE INDICATED, e.g., PORCELAIN CROWNS, GOLD CROWNS (FULL OR 3/4), 3/4 GOLD CROWN WITH SILICATE WINDOW.

4. FOR INFORMATION OF STANDARD NUMBERING OF TEETH, SEE DIAGRAM BELOW.



REMARKS:

Nik. Skrbich
SIGNATURE OF PERSON WHO PREPARED CHART

Nik. Skrbich, Civ. Investigator
NAME AND RANK TYPED OR PRINTED

AGR Det., AGRS/MTZ Belgrade
PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

T.C. Anderson
VERIFIED BY GRS OFFICER

T.C. ANDERSON Major OMC
NAME AND RANK TYPED OR PRINTED

30 September 1947
DATE

RESTRICTED

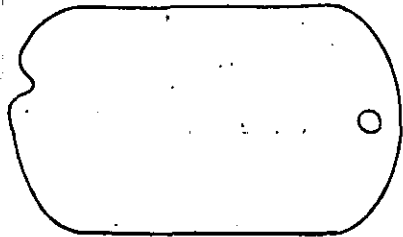
WD OMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

30 September 1947

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)

Unknown American X-53

SERIAL No.

BRANCH OF SERVICE

Air Corps

GRADE

ORGANIZATION

RACE

White

RELIGION

Unknown

IF OTHER THAN U. S. DEAD, GIVE
NAME OF COUNTRY

U.S.A.

PLACE OF DEATH

Veliko Trgoviste, Yugo.,
46°00'N - 15°51'E

CAUSE OF DEATH

Plane Crash

DATE OF DEATH

18 August 1944

EMERGENCY ADDRESSEE (Name, relationship, and address)

None

IDENTIFICATION TAGS FOUND ON BODY
(1, 2, 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)

No

See Report of Investigation

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 Belgrade, Yugo., 44°47'N - 20°25'E
Air Map, Europe 1:500,000 Belgrade Sheet

DATE OF BURIAL

26 September 47

HOUR

1400

BURIED IN (Shroud, blanket, or name of other)

Shroud

TYPE OF GRAVE
MARKER

Wooden Cross

PLOT No.

D

ROW No.

18

GRAVE No.

504

WAS THIS A REBURIAL?
(Yes or no)

Yes

IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE

Cemetery Veliko Trgoviste, Yugo.,
46°00'N - 15°51'E

PLOT No.

ROW No.

GRAVE No.

TYPE OF RELIGIOUS
CEREMONY

General

PERSON CONDUCTING BURIAL RITES

IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND
CONTAINERS BURIED WITH BODY.

GRS Form in burial bottle buried in
grave with remains
GRS Form in burial bottle buried in
grave 1 ft below cross

IDENTIFICATION TAG BURIED WITH
BODY (Yes or no)

No

IDENTIFICATION TAG ATTACHED TO
MARKER (Yes or no)

No

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)

Unknown American X-52

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

503

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

SIGNATURE OF PERSON PREPARING REPORT

Nik. Skrbich, Civ. Investigator

SIGNATURE OF GRS OFFICER VERIFYING REPORT

T.C. ANDERSON, Major OMC

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.

81160

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.


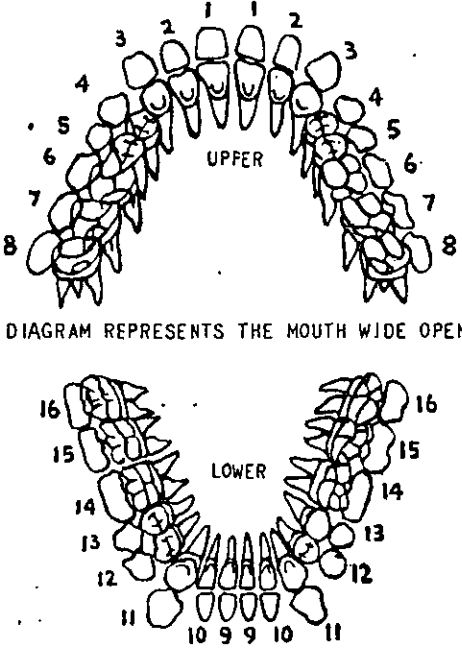




(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
WEAPON AND SERIAL No.		LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND	
			See Report of Investigation	

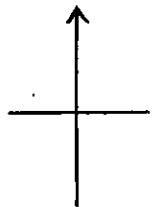
OTHER IDENTIFICATION CLUES

Complete skeleton. Tooth-chart taken.

Impossible to take fingerprints. Body disintegrated.

FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p> <p>LOWER</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>	

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



REMARKS: