

**INDIVIDUAL DECEASED**

**PERSONNEL FILE**

RECEIPT OF REMAINS

HEADQUARTERS

DISTRIBUTION CENTER DISTRIBUTION CENTER #1, AGRS ROUTINE

58th ST & 1st AVE, BROOKLYN, NEW YORK

REMAINS CONSIGNED TO:

SUPERINTENDENT

WOODLAWN NATIONAL CEMETERY

ELMIRA, NEW YORK

REMAINS OF THE LATE <sup>343</sup> PVT HARRY KLOSIN ACCOMPANIED BY AN

ESCORT ARE SCHEDULED TO LEAVE JERSEY CITY ON TRAIN

NUMBER 7 ERIE RAILROAD AT ELEVEN FORTY PM

ON MONDAY 10 JULY AND DUE TO ARRIVE AT ELMIRA,

AT SEVEN TEN AM STANDARD TIME ON TUESDAY 11 JULY

~~NEW YORK NUMBER~~

~~RAILROAD~~

~~PLEASE ARRANGE TO ACCEPT REMAINS AT RAILROAD STATION UPON ARRIVAL AND~~

~~RELEASE NOT DELIVER THEM TO THE OFFICE OF THE STATE AND TO THE RAILROAD~~

J. A. ST LOUIS

~~XXXXXXXXXX~~

COLONEL, QMC

Escort: M/Sgt William R. Burgess  
RA 11 076 307  
Det 5, 1300 ASU

RECORDS ANNOTATED

DATE 7-19-50

NAME Jms

~~Signature~~ DR. MEM. DIV.

I, the undersigned, do hereby acknowledge receipt of the remains of the above-named deceased

this 11 day of July, 19 50  
(Day) (Month)

William R. Burgess  
(Witness (Escort))  
M Lt. RA-11076307

James M. Griffin - Supt  
(Consignee)  
Woodlawn N/C  
Elmira NY

1

# DISINTERMENT DIRECTIVE

SECTION A -  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER  
3574 18328

DATE  
15 03 50  
DAY MONTH YEAR

NAME  
KLOSIN HARRY

SERIAL NUMBER  
12024013

GRADE  
PVT

ARM  
1

RACE RELIGION  
1 2

CEMETERY  
ST AVOLD FRANCE

PLOT ROW GRAVE  
00 11 124

DISPOSITION OF REMAINS  
2322 01  
CODE DIST. CTR.

## SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE  
WOODLAWN NATIONAL CEMETERY  
ELMIRA, NEW YORK

NAME AND ADDRESS OF NEXT OF KIN  
JOSEPH KLOS IN (FATHER)  
109 RUHLAND AVENUE  
BUFFALO, NEW YORK

## SECTION C - DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER GRADE DATE OF DEATH DATE DISTINTERRED

IDENTIFICATION TAG ON ORGANIZATION  
 REMAINS  
 MARKER  
USAGF

RELIGION IDENTIFICATION VERIFIED BY

## SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL CONDITION OF REMAINS NAME AND TITLE

OTHER MEANS OF IDENTIFICATION

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

REMAINS PREPARED AND PLACED IN CASKET

DATE BY

EMBALMER (Signature)

CASKET BOXED AND MARKED

DATE BY

SHIPPING ADDRESS VERIFIED BY

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

REMARKS AND SPECIAL INSTRUCTIONS

SIGNATURE OF AGRS INSPECTOR

PREV. UNKNOWN X-6020

80

## RECORD OF CUSTODIAL TRANSFER

1. SHIPPED			
FROM USMC, Neuville, Belgium	TO Lido Remains Storage Area		
KIND OF CONVEYANCE Truck	NAME OF CONVOYER		
SIGNATURE OF SHIPPER <i>M. R. Swart</i> M. R. Swart, Capt., QMC	DATE 17 APR 1950	SIGNATURE OF RECEIVER E. N. Heisey, 1/Lt., QMC	DATE
2. SHIPPED			
FROM Lido Remains Storage Area	TO ACRC (Water Division) Premerhaven Port of Embarkation		
KIND OF CONVEYANCE Rail	NAME OF CONVOYER <i>James Stuber</i> 16-5-50		
SIGNATURE OF SHIPPER <i>E. N. Heisey</i> E. N. Heisey, 1/Lt., QMC	DATE	SIGNATURE OF RECEIVER JOHN CRAZEN, Capt., Q. M. C.	DATE 19 May 1950
3. SHIPPED			
FROM ACRC (Water Division) Premerhaven Port of Embarkation	TO LTJG James F. Robinson		
KIND OF CONVEYANCE	NAME OF CONVOYER		
SIGNATURE OF SHIPPER <i>John Crazen</i> JOHN CRAZEN, Capt., Q. M. C.	DATE 17 JUN 1950	SIGNATURE OF RECEIVER <i>Earl Stupard</i> 17 JUN 1950	DATE
4. SHIPPED			
FROM	TO		
KIND OF CONVEYANCE	NAME OF CONVOYER		
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Earl Stupard</i> LIEUT. COL. STUPARD JUN 20 1950	DATE
5. SHIPPED - PORT TRANSPORTATION OFFICER			
FROM NYPE	TO		
KIND OF CONVEYANCE TRAILER	NAME OF CONVOYER <i>H. D. Young</i>		
SIGNATURE OF SHIPPER <i>H. D. Young</i> LIEUT. COL. YOUNG	DATE JUN	SIGNATURE OF RECEIVER <i>H. D. Young</i> LIEUT. COL. YOUNG	DATE JUN 20 1950
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

1

DISINTERMENT DIRECTIVE

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

NAME

KLOSIN, Harry

SERIAL NUMBER

12024013

RANK

Pvt

ARM

DATE OF DEATH

DAY MONTH YEAR

DAY MONTH YEAR

CEMETERY

ST AVOLD

DISPOSITION OF REMAINS

CODE DIST. PT.

PLOT

20

ROW

11

GRAVE

124

COUNTRY

FRANCE

CAUSE OF DEATH

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

NAME AND ADDRESS OF NEXT OF KIN

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME

Klosin, Harry

SERIAL NUMBER

12024013

RANK

DATE OF DEATH

DATE DISINTERRED

6 July 48

IDENTIFICATION TAG ON

REMAINS

GRS MARKER

ORGANIZATION

RELIGION

C

IDENTIFICATION VERIFIED BY

Ltr-Hq AGRC RRE 200.2 dtd  
5 Oct 49

NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

Mattress cover

CONDITION OF REMAINS

Fractured mandible. Body in skeleton form.  
Body complete.

OTHER MEANS OF IDENTIFICATION

Report of Burial found with remains

MINOR DISCREPANCIES

None

REMAINS PREPARED AND PLACED IN CASKET

DATE 12 July 1948

BY

Geo W Lowry, Embalmer

CASKET SEALED BY

Elijah H Fields, Embalmer

EMBALMER (Signature)

Elijah H Fields

CASKET BOXED AND MARKED

DATE 18 Oct 49 BY Elijah H Fields

ALL MARKINGS, TAGS AND PLATES VERIFIED BY

M R Swart, Capt QMC

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

Jesse C Harrell, 1st Lt CAC, 7857 AGRC Zone 3 Hq

SIGNATURE OF GRS INSPECTOR

I Prepare Discrepancy Report QMC Form 1194a for major discrepancies. I certify that the entries on this form are true copies of the entries on Copy number 4 of this Disinterment Directive which contains the signatures of the persons whose names are typed hereon.

Frank B Callaghan, 1st Lt FA

## RECORD OF CUSTODIAL TRANSFER

### 1. SHIPPED

FROM USMC St Avoird, France		TO OIC Neuville, Belgium	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER Pfc Vito M Biondo, RA 12305611	
SIGNATURE OF SHIPPER Frank B. Callaghan 1st Lt FA	DATE 25 Oct 49	SIGNATURE OF RECEIVER	DATE

### 2. SHIPPED

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

### 3. SHIPPED

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

### 4. SHIPPED

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

### 5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		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

*RL*

1

### DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER 3574 00000		DATE 15 01 48 DAY MONTH YEAR	
NAME UNKNOWN				SERIAL NUMBER X-006020		RANK	ARM 8
CEMETERY ST AVOLD - METZ						DATE OF DEATH	DISPOSITION OF REMAINS 3503 80 DAY MONTH YEAR
PLOT 00	ROW 11	GRAVE 124	COUNTRY FRANCE			CODE	DIST. PT. 6
						CAUSE OF DEATH	

**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	
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**SECTION C — DISINTERMENT AND IDENTIFICATION**

NAME UNKNOWN X-006020		SERIAL NUMBER	RANK	DATE OF DEATH		DATE DISINTERRED 6 July 48	
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION GRS	UNKNOWN		RELIGION	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 Fractured Mandible - Body in skeleton form - Body complete -					
OTHER MEANS OF IDENTIFICATION Report of Burial found with remains							

MINOR DISCREPANCIES 1  
None

REMAINS PREPARED AND PLACED IN CASKET

DATE 12 July 48		BY Geo W Lowry, Embalmer	
CASKET SEALED BY Geo W Lowry, Embalmer		EMBALMER (Signature) <i>Geo W Lowry</i> Geo W Lowry	
CASKET BOXED AND MARKED		SHIPPING ADDRESS VERIFIED BY all markings, plates & tags verified by: JESSE C HARRELL, 1st Lt CAC	
DATE 12 July 48 BY Geo W Lowry Embalmer			

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

Final casketing by:  
*Jesse C Harrell*  
JESSE C HARRELL  
1st Lt CAC

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

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

NY 051 R

CASE NO.		<b>INSPECTION CHECK LIST</b>					SPACE NO.
NAME OF DECEASED ( <i>Last, First, Middle Initial</i> )		BRANCH OF SERVICE	RACE	RELIGION	SEX	DATE	
KLOSIN, HARRY ✓		USAGF ✓	W		M		
RANK OR GRADE	SERIAL NUMBER	CONSIGNEE					
PVT ✓	12024013 ✓	WOODLAWN NATIONAL CEMETERY ✓ ELMIRA, NEW YORK					
SHIPPING CASE—GENERAL APPEARANCE ( <i>Check ONLY Discrepancies</i> )			CONDITION OF SHIPPING CASE ( <i>Check One</i> )				
			<input checked="" type="checkbox"/> SATISFACTORY <span style="float: right;"><input type="checkbox"/> UNSATISFACTORY</span>				
FINISH ( <i>Exterior</i> )			REMARKS				
FINISH ( <i>Interior</i> )							
HANDLES							
HANDLE BOLTS							
STENCILING—NAME PLATE							
HEALTH PERMIT MARKER							
HEALTH PERMIT NUMBER							
CASKET—GENERAL APPEARANCE ( <i>Check ONLY Discrepancies</i> )			CONDITION OF CASKET ( <i>Check One</i> )				
			<input checked="" type="checkbox"/> SATISFACTORY <span style="float: right;"><input type="checkbox"/> UNSATISFACTORY</span>				
FINISH ( <i>Exterior</i> )			OK Casket Returned Packed				
HANDLES AND FASTENINGS							
STENCILING—NAME PLATE							
CAM LOCKS ( <i>Sealing</i> )							
ODOR OR MOISTURE							
<b>ROUTED THROUGH</b>							
<input type="checkbox"/> MORTUARY OPERATING ROOM			<input type="checkbox"/> REPAIR SHOP				
CONDITION OF REMAINS			CASKET REPAIRED				
<input type="checkbox"/> SATISFACTORY <span style="float: right;"><input type="checkbox"/> UNSATISFACTORY</span>			<input type="checkbox"/> YES <span style="float: right;"><input type="checkbox"/> NO</span>				
NECESSARY DISINFECTION ( <i>Explain</i> )			CASKET EXCHANGED				
			<input type="checkbox"/> YES <span style="float: right;"><input type="checkbox"/> NO</span>				
			SHIPPING CASE REPAIRED				
			<input type="checkbox"/> YES <span style="float: right;"><input type="checkbox"/> NO</span>				
			SHIPPING CASE EXCHANGED				
			<input type="checkbox"/> YES <span style="float: right;"><input type="checkbox"/> NO</span>				
			REMARKS				
TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTOR		
				11/6/50	[Signature]		
REMARKS							

WU 008 GOVT PD

ELMIRA NY 5 815A

GR DIVISION

NEW YORK PORT OF EMBARKATION

FUNERAL SERVICES FOR THE FOLLOWING WW II DECEASED SCHEDULED

LL JULY : GROUP BURIAL 3574 GB-575 FIRST NAME DONALD M

EGGLESTON S. SGT PVT HARRY KLOSIN 12024013 REQUEST DELIVERY

BEFORE 8 AM ON THAT DATE AND ADVICE OF EXPECTED TIME AND

MEANS OF ARRIVAL

JAMES M GRIFFIN SUPERINTENDENT

WW II 11 3574 GB-575 12024013 8 AM

955A.

RECEIVED  
1970 JUN 24 7 13

WU108 NL PD BUFFALO NY JUN 23

DISTBG CENTRE 1

NYPOE NYK

RECEIVED WIRE REGARDS THE LATE PVT HARRY Y KLOSIN FOLLOW  
INSTRUCTIONS AS SUBMITTED BEFORE

JOSEPH KLOSIN.

106A

GRAND CENTRAL STATION  
NEW YORK, N.Y.

DISTRIBUTION CENTER #1  
NEW YORK PORT OF EMBARKATION  
BROOKLYN, NEW YORK

RECEIVED

1950 JUN 20

"I certify that this message is on official business and that its transmission with a lower precedence, or by air mail, regular mail, or scheduled messenger would be prejudicial to the public interest."

JOSEPH KLOSIN

109 RUHLAND AVENUE

BUFFALO, NEW YORK

*James McCarthy*  
JAMES McCARTHY  
Major, TC  
Admin. O, AGR Div.

ROBT

PLEASE BE ADVISED REMAINS OF THE LATE

PVT HARRY KLOSIN

ARE ENROUTE TO THE UNITED STATES, OUR RECORDS INDICATE YOU WISH REMAINS BURIED IN  
WOODLAWN NATIONAL CEMETERY, ELMIRA, NEW YORK

WE CANNOT GIVE A DEFINITE DELIVERY DATE, BUT SUPERINTENDENT OF NATIONAL CEMETERY WILL NOTIFY YOU BY TELEGRAM GIVING DATE AND HOUR FUNERAL SERVICES WILL BE HELD IN SUFFICIENT TIME TO PERMIT YOUR ATTENDANCE AT YOUR OWN EXPENSE. IT IS EXPECTED THAT AN INTERVAL OF SEVERAL WEEKS WILL ELAPSE BEFORE FUNERAL CAN TAKE PLACE. MILITARY ESCORT WILL ACCOMPANY REMAINS TO NATIONAL CEMETERY. PAYMENT OF SEVENTY FIVE DOLLARS INTERMENT EXPENSE ALLOWANCE IS NOT REPEAT NOT AUTHORIZED IN CASES WHERE BURIAL IS IN A NATIONAL CEMETERY. APPROPRIATE JOINT MILITARY HONORS AND RELIGIOUS SERVICES WILL BE PROVIDED AT GRAVESIDE BY VETERANS' ORGANIZATION OR BY MILITARY OR NAVAL PERSONNEL. PLEASE CONFIRM ABOVE DELIVERY INSTRUCTIONS WITHIN FORTY EIGHT HOURS OF RECEIPT OF THIS MESSAGE OR SUBMIT NEW DELIVERY INSTRUCTIONS BY TELEGRAM COLLECT TO DISTRIBUTION CENTER ONE, NEW YORK PORT OF EMBARKATION. WE REGRET IT WILL BE IMPOSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER EXPIRATION OF THE FORTY EIGHT HOURS PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.

RELEASED TO W U

ITEM(REV)

20 JUNE 50

G. H. BARE, COL. QMC

89

*att*

Attached hereto correspondence and/or other identifying media of possible archival value, pertaining to:

*35*

KLOSIN	Harry		Pvt.	12024013
(Last Name)	(First Name)	(Initial) <del>///</del>	(Rank)	(ASN)

16 June 1950

Repatriated to the United States: \_\_\_\_\_

**SEARCHED**  
INDEXED  
SERIALIZED  
FILED  
JUN 18 1950  
FBI - [illegible]

Unmarked

- a. From what source was this information obtained? \_\_\_\_\_  
(Identification tags, personal effects)
- b. By whom? \_\_\_\_\_
11. Where are the cemetery records? No  
(Town hall, cemetery, burgermeister's office)
- a. What information was obtained thereon? \_\_\_\_\_
- b. Where was the information obtained? \_\_\_\_\_
- c. By whom? \_\_\_\_\_
12. What is the date of death? Est. Oct. 1944
- a. Give basis Date of fighting in Area
13. What is the cause of death? Unk.
- a. Give basis \_\_\_\_\_
14. What is the date of burial? Est. Oct. 1944
- a. Give basis Date of fighting in Area
15. What is the place of death? Sillegny Coords U-852445  
Give basis Found here in Shallow Grave
16. Where were the remains found? Sillegny Coords U-852445
- a. By whom? Pfc. Glenn Glenner 3049th Qn. C.R.Co.
- b. Is sketch attached? Yes
17. Was a casket used? No Who furnished the casket? \_\_\_\_\_  
Type of casket \_\_\_\_\_ How marked? \_\_\_\_\_
18. Who made the burial? Unk.  
(Civilian, American Mil. or German Mil.)
- 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 \_\_\_\_\_

REPORT OF INVESTIGATION AREA SEARCH

8 APRIL 1946  
DATE

NAME UNKNOWN X-6020 RANK UNK ASN UNK

ORGANIZATION UNK

MEANS OF IDENTIFICATION SEE REPORTS ON THREE (3) OTHER BODIES FOUND  
IN SAME FIELD AS PER MAP ATTACHED: BODY #5,

KEITH KELLER? BODY #6 UNKNOWN X-6021, BODY #  
FIDEL FLORES.

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

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

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

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

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

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

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

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

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

Louis E. Kay Elias A. Santillanas Wm. F. Hennessey  
(Use reverse side for listing of crew members from MACR)

A. Date of above burials Est. Oct. 44 Common Graves? \_\_\_\_\_

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

5. Name and type of cemetery Not in Cemetery  
(Military or Civilian)

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

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

7. Give exact location in cemetery of the remains.

a. Section \_\_\_\_\_ Row \_\_\_\_\_ Grave \_\_\_\_\_

b. Is sketch attached? \_\_\_\_\_

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

a. Town Sillegy Coordinates Map of Europe 1:200,000  
Sheet 57 U-852445

b. Is sketch attached? Yes

c. Is area mined? No

9. How is the grave marked? Unmarked

(to be filled out if B & C are not applicable)

9. 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 investigation's interrogation.  
a. Are all certificates and statements of people who possessed knowledge of the case attached? \_\_\_\_\_
10. State the specific clues and evidence that were obtained in securing the name and facts regarding the above listed deceased  
\_\_\_\_\_

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

1. Were personal effects recovered by the investigating team No  
If not, state reason None Available
- a. Were identification tags found at the time of death? Unk.  
Where? \_\_\_\_\_ By whom? \_\_\_\_\_  
Present disposition \_\_\_\_\_
- If deceased is not identified, personal effects will not be forwarded to FE Depot, but will remain with this form until final identification is made, or investigation abandoned.
- b. Were personal effects found at the time of death? Unk.  
Where? \_\_\_\_\_ By whom? \_\_\_\_\_  
Present disposition \_\_\_\_\_
- 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? No
2. Was deceased given first aid? Unk. If so, where? \_\_\_\_\_  
By whom? \_\_\_\_\_ Are statements from the medical people attached? \_\_\_\_\_
3. Was deceased evacuated to a German hospital? Unk.  
Where? \_\_\_\_\_ Names of the people concerned \_\_\_\_\_
4. Is it possible on surface investigation to obtain from civilian sources a physical description of the deceased? No.
5. Is it possible on surface investigation to obtain from civilian sources the condition of the remains? No.  
(Burnt? Decapitated? etc.)
6. 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? \_\_\_\_\_
7. Was case previously investigated? No. By whom? \_\_\_\_\_

o. Give numbers of motors, machine guns, instruments, radios or other equipment: \_\_\_\_\_

21. How did crash occur? \_\_\_\_\_ Anti-aircraft \_\_\_\_\_

Enemy planes? \_\_\_\_\_ Collision? \_\_\_\_\_

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

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

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

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

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

27. Does specific time and date of crash correspond with the 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, asst driver or...front, side, or back)

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

32. Location of destroyed tank be investigated. Give complete results of investigation. (If removed, state when and by whom)

a. Type of tank \_\_\_\_\_

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

c. Numbers on motors, machine guns, ammunition, instruments, etc.. \_\_\_\_\_

33. What was the type of enemy action that resulted in the tank's disablement? \_\_\_\_\_

34. Did tank explode? \_\_\_\_\_ Burn? \_\_\_\_\_

35. Number of tanks in immediate vicinity at time of disablement \_\_\_\_\_

36. Does specific time and date of disablement correspond with date of death of above named deceased? \_\_\_\_\_

37. Precise time and date of destruction of tank \_\_\_\_\_  
(Night?, Day?)

Prisoners \_\_\_\_\_

43. Give full names, addresses, and information obtained from each person interviewed Mayor Charles Perrin

Sillegny (Moselle) France

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

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

51. Was investigation proceeded by advanced publicity? Yes

(If special investigation, give case number) \_\_\_\_\_

52. Give brief narrative See Attached While Searching In This Area  
Some Children Showed Us Some G.I.

(Use attached sheets, if necessary)

**Equipment Protruding from ground. I investigated and saw it was the remains of an American Soldier in a shallow Grave.**

D. Militch

Signature of interpreter

D. Militch

Rank ASN

Organization \_\_\_\_\_

Glenn Clemmer

Signature of Investigator

Pfc. Glenn Clemmer

Rank ASN

3049th QM. G.R.Co.  
Organization

Marieulles, le 7 Mai 1946

Je soussigne Louis Lemaire, maire de Marieulles certifie ne rien savoir de la mort du soldat Americain Klosin Harry ni de l'endroit ou il a ete tue.

Cachet de la Mairie

/s/ Le Maire: Lemaire

/s/ Temoin: Ferry Charles

T R A N S L A T I O N

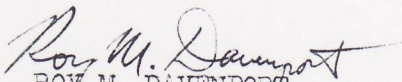
I, the undersigned Louis Lemaire, Mayor of Marieulles, certify not to know anything about the death of the American soldier Klosin Harry, nor do I know the place where he has been killed.

Seal of the Mairie

/s/ The Mayor: Lemaire

/s/ Witness: Ferry Charles

A CERTIFIED TRUE COPY:

  
ROY M. DAVENPORT  
1st Lt. Inf



**INSCRIPTION DATA FOR HEADSTONE**  
(READ INSTRUCTIONS CAREFULLY)

TO <b>Mr Joseph Klosin</b> 109 Ruhland Ave Buffalo, N.Y.	DATE 11 July 1950
---	----------------------

As the next of kin of the decedent listed below, this form is sent to you for necessary information concerning the inscription to be shown on the headstone.

Please fill out part II and return to the address indicated in part I within fifteen (15) days from the date shown above. Otherwise the headstone will be ordered with data as to State, religious emblem, and date of birth inscribed as shown in official records. **NO CHANGE WILL BE MADE AT A LATER DATE AT GOVERNMENT EXPENSE.**

The authorized inscription for a general type government headstone includes:

- (1) Name, rank, and organization of decedent.
- (2) The dates of birth and death.
- (3) The State or United States possession or territory. This may be the State of birth, residence, or from which enlisted. Names of foreign countries are not permitted.
- (4) Religious emblem.

**THE ABOVE INSCRIPTION DOES NOT APPLY TO THOSE DECEDENTS WHO SERVED ONLY DURING THE CIVIL AND SPANISH-AMERICAN WARS**

**PART I—TO BE FILLED IN BY SUPERINTENDENT OR COMMANDING OFFICER**

NAME OF DECEDENT ( <i>Last, first, middle initial</i> ) <b>KLOSIN, Harry</b>		RANK <b>Pvt</b>
ORGANIZATION <b>US ARMY</b>		
DATE OF DEATH ( <i>Month, day, year</i> ) <b>September 19, 1944</b>	GRAVE OR LOT NO. <b>4462 Section G</b>	DATE INTERRED ( <i>Month, day, year</i> ) <b>July 11, 1950</b>

Return this form to:

Superintendent, Woodlawn National Cemetery, Elmira, N.Y.

**PART II—TO BE FILLED IN BY NEXT OF KIN**

NAME OF STATE, UNITED STATES POSSESSION OR TERRITORY, TO BE INSCRIBED ( <i>Foreign countries not applicable</i> ) <b>New York</b>	DATE OF DECEDENT'S BIRTH ( <i>Month, day, year</i> ) <b>May 4, 1921</b>
RELIGIOUS EMBLEM ( <i>Check type desired</i> ) <input checked="" type="checkbox"/> LATIN CROSS FOR CHRISTIAN FAITH <input type="checkbox"/> STAR OF DAVID FOR HEBREW FAITH <input type="checkbox"/> NONE	

ADDRESS OF NEXT OF KIN  
**109 Ruhland Avenue, Buffalo, 11, N. Y.**

SIGNATURE <i>Joseph Klosin</i>	DATE <b>July 13, 1950</b>
-----------------------------------	------------------------------

REMARKS

~~293 UNK - France X-6020 St. Avold~~

QMG, DEPARTMENT OF THE ARMY

CO  
QM ACTIVITIES  
KC RECORDS CENTER (AGC), MO  
ATTENTION: EFFECTS QUARTERMASTER

P

UNCLASSIFIED

- 6020

FORWARD PE FOR UNKNOWN X DASH SIX ZERO TWO ZERO CMA SAINT AVOLD PLOT ZERO ZERO  
ROW ONE ONE GRAVE ONE TWO FOUR END QOD 265 CONLON

FEIDMAN  
QMG

R

ALL USE  
SECTION

NOV 1 10 20 PM '49

UNCLASSIFIED

QMGOD 293, UNKN X-6020

1315  
1 NOV 49

St. Avold

C. ROMAIN

COLONEL, QMC  
FIELD SERVICE DIVISION

1 1

## 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 Br (Ident Sec) Mem Div	Field Service Division ATTN Exec. Off.	31 Oct 1949	<p>Request the following be incorporated into TWX to Personal Effects Bureau, Kansas City;</p> <p>"Request personal effects for Unknown X-6020, US: St Avold, France, Plot 00, Row 11, Grave 124, be forwarded to this Office as an aid to identification of the Unknown."</p> <p style="text-align: center;"><i>[Signature]</i> METZ 74059</p> <p style="text-align: right;"><i>[Signature]</i> BARRI 2462</p>

THIS FORM WILL REMAIN PART OF THE OFFICIAL FILE

OQMG DEPT OF ARMY WASH DC

UNCLASSIFIED

CHIEF REGISTRATION DIV  
7887 GRREG DET  
PARIS FRANCE

DEFERRED

WCL 24958

*WCL 32637*

FROM QMGMT MYMSG WCL 24958 PD ADOFF APRX DATE INFO WILL BE FWD

WC. 24958 is MC OUT 24958 (22 Nov 49)

Cy furnished: Adm Sec  
rar/Binkerd  
M.A. Clements  
REB

UNCLASSIFIED

LR1915Z

GRAVES

QMGMT CAPT BERRY EXT 72993  
293 - KLOSIN, Harry  
ASN 12024013

JAN 50

D. A. RENNER  
CAPT, QMC, MEM DIV

R  
T

REPATRIATION BRANCH  
RECORDS SECTION

293 Klosin, Harry  
Pvt -- 12 024 103

DATE 23 May 1950

SUBJECT: Correct Name, Rank and Serial Number of Decedents.

1. The official spelling of name, the rank, and the serial number of Army World War II Decedents is determined by the Adjutant General's Office.
2. The name, rank and serial number of subject decedent has been verified with the Adjutant General's Office this date to be correct as shown below:

*293*  
NAME: Klosin, Harry  
RANK: Pvt  
ASN: 12 024 013

3. Paragraph #6, Memorial Division, Information Bulletin #11, dated 20 May 1949, Subject: "Minor Changes in Name, World War II Decedents", is quoted below for information.

"Memorial Division records pertaining to a decedent for whom a minor change in name is made as herein provided will be maintained under the official name of the decedent, as shown on AGO or similar records. However, in all subsequent correspondence with the next of kin, including final grave location letter, the spelling desired by the next of kin will be used."

*C. M. Odenwalder*  
C.M. ODENWALDER  
CAPT, QMC  
Chief, Record Section

PER: Corr. Finding of Death

FROM: AGO

DATED: 25 Jan. 1950

NAME: H. J. Bond

NAT  
FILE  
RECORDS AN  
DATE 23 May 19  
NAME H. J. B.  
REPAT BR ME

# REQUEST FOR DISPOSITION OF REMAINS

2-3-14-50

ARMY SERIAL NUMBER AND REPORTED PLACE OF BURIAL

DATE:

Pvt Harry Klosin, 12 024 013  
Plot 00, Row 11, Grave 124  
United States Military Cemetery  
St. Avold, France

*John W.R.*  
2 March 1950

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

NOTE.—The next of kin should familiarize himself with the contents of the pamphlet, "Disposition of World War II Armed Forces Dead," before filling out this form. When the proper part of this form is filled out and properly signed by the next of kin, it should be returned to the OFFICE OF THE QUARTERMASTER GENERAL, MEMORIAL DIVISION, WAR DEPARTMENT, WASHINGTON 25, D. C., in the self-addressed postage-free envelope provided for this purpose.

If you are the next of kin or authorized representative of next of kin and desire to direct the disposition of the remains, please fill in PART I of this form.

## PART I

I, JOSEPH KLOSIN

(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

(Please indicate relationship to the deceased by placing a "X" in the proper box.)

- WIDOW
- WIDOWER
- SON OVER 21 YEARS OLD
- DAUGHTER OVER 21 YEARS OLD
- FATHER
- MOTHER
- BROTHER OVER 21 YEARS OLD
- SISTER OVER 21 YEARS OLD
- RELATIONSHIP OTHER THAN ABOVE (Specify) \_\_\_\_\_

HAVING FAMILIARIZED MYSELF WITH THE OPTIONS WHICH HAVE BEEN MADE AVAILABLE TO ME WITH RESPECT TO THE FINAL RESTING PLACE OF THE DECEASED DESIGNATED ABOVE, NOW DO DECLARE THAT IT IS MY DESIRE THAT THE REMAINS: (Please place an "X" in the box opposite the option you have selected)

- 1. BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS.
- 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY

(NAME AND LOCATION OF CEMETERY)

- 3. BE RETURNED TO \_\_\_\_\_ (FOREIGN COUNTRY) THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN PRIVATE CEMETERY LOCATED AT \_\_\_\_\_ (LOCATION OF CEMETERY SELECTED)

- 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT ELMIRA, NEW YORK (LOCATION OF NATIONAL CEMETERY SELECTED)

(Please indicate if your own religious services at a location other than the selected national cemetery are desired by placing an "X" in the proper box)

- YES
- NO

THE NAME OF THE DECEASED, THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (If no corrections are necessary, indicate this fact by inserting the word "NONE" in the space below.)

NONE

Coded 3-15-50

L. Scott

**PART I (Continued)**

On Page 1 of this form you have selected Option Number 2 or 3, or Option Number 4 with your own funeral ceremonies desired other than the selected national cemetery, complete one of these sections.  
 AS THE NEXT OF KIN, DO FURTHER DECLARE THAT I DESIRE THE REMAINS TO BE SENT TO THE FOLLOWING PERSON WHO HAS AGREED TO RECEIVE THEM: -tion

LAST NAME	FIRST NAME	MIDDLE INITIAL
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE
EXPRESS OFFICE ( <i>Nearest railroad passenger station</i> )	TELEGRAPH ADDRESS	STATE OR TERRITORY OF U. S. A., OR COUNTRY
		TELEPHONE NO.

I, AS THE NEXT OF KIN, DO FURTHER DECLARE THAT I DESIRE THE REMAINS TO BE SENT TO THE FOLLOWING FUNERAL DIRECTOR WHO HAS AGREED TO RECEIVE THEM:

FULL NAME OF FUNERAL DIRECTOR			
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
EXPRESS OFFICE ( <i>Nearest railroad passenger station</i> )	TELEGRAPH ADDRESS		TELEPHONE NO.

IN CASE OF EMERGENCY THE NAME AND ADDRESS OF THE PERSON NEXT IN LINE OF KINSHIP AFTER ME, AS SET FORTH IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," IS:

LAST NAME	FIRST NAME	MIDDLE INITIAL	RELATIONSHIP TO DECEASED
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY

MARKS OR ADDITIONAL INSTRUCTIONS (*For additional space use page 4.*)

EXPLAINED IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," I AM THE NEXT OF KIN AND THE INDIVIDUAL AUTHORIZED TO DIRECT THE DISPOSITION OF THE SAID REMAINS.

I, the undersigned, DO SOLEMNLY SWEAR (OR AFFIRM) that the statements made by me in the foregoing document are full and true to the best of my knowledge and belief.

Joseph Klosin  
(SIGNATURE OF NEXT OF KIN)  
JOSEPH KLOSIN  
(NAME PRINTED OR TYPED)

109 ROHLAND AVE.  
(STREET AND NUMBER)  
BUFFALO 11, N.Y.  
(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 10th day of March, 50, at city (~~or town~~) of Buffalo, county of Erie, and State (~~or Territory or District~~) of New York

Stanley H. Wier - 1605  
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)  
Notary Public 3-30-1951  
(OFFICIAL TITLE)

NOTE.—Page 4 is part of the notarial attestation.

## PART II — RELINQUISHMENT OF DISPOSITION AUTHORITY

If you are the next of kin and you desire to relinquish your disposition authority, please fill in PART II of this form.

I, THE \_\_\_\_\_, AS THE NEXT OF KIN OF THE DECEASED  
(PLEASE INSERT RELATIONSHIP)  
 NAMED IN PART I OF THIS FORM, DO HEREBY RELINQUISH MY RIGHTS TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED.  
 THE NEXT EXISTING PERSON IN THE ORDER OF ELIGIBILITY OF DECEDENT'S SURVIVORS IS:

LAST NAME	FIRST NAME	MIDDLE INITIAL
RELATIONSHIP TO THE DECEASED		
NUMBER AND STREET	CITY OR TOWN	STATE OR COUNTRY

WHOM I UNDERSTAND SHALL HAVE THE RIGHT TO DIRECT FINAL DISPOSITION OF THE REMAINS OF THE DECEASED.

	(DATE)
(SIGNATURE OF NEXT OF KIN)	(STREET AND NUMBER)
(NAME PRINTED OR TYPED)	(CITY AND STATE)

## PART III

If you are NOT the next of kin authorized to direct the disposition of remains, please fill in PART III of this form.

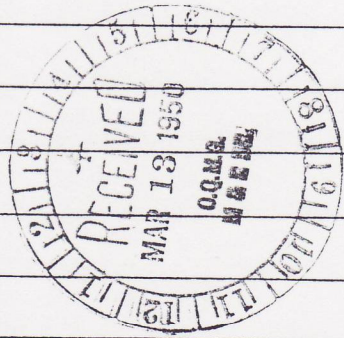
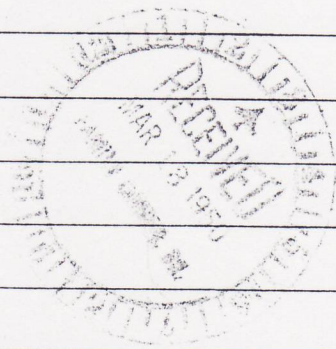
THIS IS TO NOTIFY YOU THAT I AM NOT THE NEXT OF KIN AUTHORIZED TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED NAMED ON PAGE 1 OF THIS FORM. THE FOLLOWING PERSON, TO THE BEST OF MY KNOWLEDGE, IS THE NEXT OF KIN TO WHOM THIS FORM SHOULD BE DIRECTED.

LAST NAME	FIRST NAME	MIDDLE INITIAL
RELATIONSHIP TO THE DECEASED		
NUMBER AND STREET	CITY OR TOWN	STATE OR COUNTRY

	(DATE)
(SIGNATURE)	(STREET AND NUMBER)
(NAME PRINTED OR TYPED)	(CITY AND STATE)

**ADDITIONAL REMARKS AND INSTRUCTIONS**

*All remarks and information entered here will be considered as part of the Notarial Attestation.*



QMGMF 293  
Klosin, Harry  
SN 12 024 013

2 March 1950

Mr. Joseph Klosin  
109 Ruhland Avenue  
Buffalo, New York

Dear Mr. Klosin:

We are desirous that you be furnished information concerning the resting place of the remains of your son, the late Private Harry Klosin.

The official report of burial has been received and discloses that the remains of your son were originally buried in an isolated grave located at Sillegny, Moselle, France, but were later disinterred by our American Graves Registration Personnel, and reinterred in Plot 00, Row 11, Grave 124, in the United States Military Cemetery St. Avold, located twenty-three miles east of Metz, France.

The remains have been properly identified, casketed and are being held in above ground storage pending disposition instructions from the next of kin, either for return to the United States or for permanent burial in an overseas cemetery.

Our records indicate that the identification of these remains was established by excellent comparison of the tooth chart made for the deceased with information maintained in Army dental records for your son. Comparison was also made of the physical characteristics, with favorable results. In addition, the date and place of death, as given on the official report of burial, are in agreement with the date and place of the casualty, as shown on the records of the Adjutant General's Office.

There are inclosed informational pamphlets regarding the Return of World War II Dead Program, including a Disposition Form on which you may indicate your desires in this matter. Upon receipt of the properly completed form, you may be assured that the Department of the Army will attempt to comply with your instructions as indicated thereon.

QMGMF 293  
Klosin, Harry  
SN 12 024 013

2 March 1950

In order that this office may take immediate action toward the final disposition of the remains of your son, it is urged that you complete the inclosed form, "Request for Disposition of Remains" and mail it to this office, without delay, in the inclosed self-addressed envelope which requires no postage.

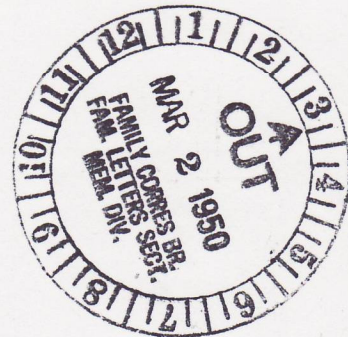
May I extend my sincere sympathy in your great loss.

Sincerely yours,

J. F. VOGL  
Captain, QMC  
Memorial Division

Incls.

MAR 2 4 03 PM '50  
QCMC M&R BR8



## CORRESPONDENCE ACTION SHEET

PREVIOUS BURIAL LOCATION ( <i>Cemetery and Country</i> )	PLOT	ROW	GRAVE
PRESENT BURIAL LOCATION ( <i>Cemetery and Country</i> ) USMC, St. Avold, France	PLOT OO	ROW 11	GRAVE 124
ADDRESSEE MR. MISS Mr. Joseph Klosin MRS.	ADDRESS ( <i>Street, City, State</i> ) 109 Ruhland Avenue		
RELATIONSHIP Father	Buffalo, New York		
PARAGRAPHS (Sequence)	ADDITIONAL DATA — MODIFICATIONS		
Para. 1 - -	<u>FORM LTR "A"</u> <span style="float: right;"><u>INITIAL LOI</u></span>		
Para. 2 -	line 2 - an isolated grave located 3 - at Sillegny, Moselle, France 4 - Plot OO, Row 11, Grave 124 5 - USMC, St. Avold, _____.		
Para. 3 - -	Our records indicate that the identification of these remains was established by excellent comparison of the tooth chart made for the deceased with information maintained in Army dental records for your son. Comparison was also made of the physical characteristics, with favorable results. In addition, the date and place of death, as given on the official report of burial, are in agreement with the date and place of the casualty, as shown on the records of the Adjutant General's Office.		
Paras. 5, 6, and 7	Incls:  Note action sheet for letter to Effects QM		
ANALYST INITIALS AND DATE <i>bell</i> <i>28 Feb 70</i>	TYPIST INITIALS	REVIEWER INITIALS AND DATE	

12 024 013

48 119

12 024 013

OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON 25, D. C.

In Reply Refer To QMGIF 293

**Klosin, Harry**  
**SN 12 024 013**

2 March 1950

SUBJECT: Identification of former UNKNOWN deceased

TO: Commanding Officer  
Quartermaster Activity  
Kansas City Records Center  
Kansas City 1, Missouri  
Attn: Effects Quartermaster

1. The remains which were previously interred as UNKNOWN X - 6020  
Flot 00, Row 11, Grave 124, USMC St. Amand, France  
have been identified by a GRS Field Board of Review as those of  
Pvt. Harry Klosin, 12 024 013  
whose next of kin, according to the records of this Office, is  
Mr. Joseph Klosin - father - 109 Ruhland Ave., Buffalo, New York

2. The identification has been approved by this Office.

BY COMMAND OF MAJOR GENERAL FELDMAN:

*J. F. Vogl*  
J. F. VOGL  
Captain, QMC  
Memorial Division

ep  
MAR 2 4 03 PM '50  
OCHG M&R BR

*Green Copy*

UAC 297

*att [unclear]*  
255  
1-12-50

150 JAN 17 16 06

FUN46

793. Klosin, Harry - 12024013

HEADQUARTERS OF THE ARMY  
COMMUNICATIONS OFFICE  
38  
381 (C) THE  
RR UEPC

1000 JAN 17 16 13

FROM Reg Div Paris France  
MSG NO 45  
D.T.G. 171317Z  
ACTION QMG  
MSG NO. 62370

DE UFPOC 15

R 171317Z

FM REG DIV PARIS FRANCE

UEPC/OQMG WASHN DC  
GRAVES GRNC

AGRC REF NINE FIVE

PASS TO MEMORIAL DIV

*1/12/50*

RE URMSG WCL THREE TWO SIX THREE SEVEN EXAMINATION TEETH OF PVT HARRY

KLOSIN ONE TWO ZERO TWO FOUR ZERO ONE THREE ACCOMPLISHED PD FINDINGS

FWD YOUR OFFICE BY MYLTR RRE THREE ONE FOUR PD SIX DATED SIX JAN CMA

SUBJ BURIAL INFORMATION PD SGD HENRY CITE AGRRE

CFN KLOSIN

17/1448Z

*CAPT BERRY  
BIN + [unclear]  
mem (Klosin)*

*no TP  
NAN  
File  
M. [unclear]  
13  
[unclear]*

JAN 18 8 33 AM '50  
O. N. H. S.  
COMM. SEC. DIV.

JAN 17 17 13

HEADQUARTERS OF THE ARMY  
COMMUNICATIONS OFFICE  
38

62370

*293 - Klossin Harry - 12024013*

ORIG DEPT OF ARMY WASH DC

UNCLASSIFIED

CHIEF REGISTRATION DIV  
7887 CHERG DET  
PARIS FRANCE

DEFERRED

WCL 24958

*WCL 32637*

FROM QMGT MYMSG WCL 24958 PD ADCFF APRX DATE INFO WILL BE FWD

*293 unob: France x6000 (Havre)*

JAN 12 4 22 PM '50  
D. O. M. C.  
TFL & CAR SECT ON  
MEMORIAL DIVISION  
ADMINISTRATIVE BRANCH  
RECEIVED

WCL 24958 is MC OUT 24958 (22 Nov 49)

Cy furnished: Adm Sec  
rar/Binkerd m2B  
M. A. Clements  
REB

121915Z

UNCLASSIFIED

QMGT CAPT BERRY EXT 72993  
293 - KLOSSIN, Harry  
ASN 12024013

JAN 50

*D. A. Runner*  
D. A. RUNNER  
CAPT, MC, IIRM DIV

GRAVES

*R  
J  
T*

*91*

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 Sec Ident Br	QM Liaison Office ATTN: Major Sekowski	9 Jan 1950	<p><i>9 Jan KLOSIN Harry 12024013</i></p> <p>Request corrected Finding of Death or Report of for <u>KLOSIN, Harry</u>, Co. C, 38th Armored Infantry Bat 293 file contains only Finding of Death with ASN sh as 12024103 while SR&amp;D and other papers show ASN as 12024013.</p> <p style="text-align: right;">BARRY 2462</p> <p style="text-align: right;"><i>Binkerd</i> Binkerd 72947</p>
2	QM-Pent. Liaison, Adm. Br., Mem. Div.	Chief, Ident Sec Ident Br	26 Jan 50	<p>Corrected Finding of Death inclosed herewith.</p> <p style="text-align: center;"><i>Sekowski</i> SEKOWSKI (msa) X-6679</p> <p style="text-align: center;"><u>12024013</u></p> <p style="text-align: right;"><i>Dyer (msa)</i> DYER X-73090</p>
<p>NOTE: This 293 file contains no AG/Report of Death. Follow action taken: Burial Report sent for Photostat: 27 1950, Photostat sent to AGO: 6 Feb 50. Case releas from AGO: 27 Feb 50.</p>				
<p style="text-align: center;">ODENWALDER 73836</p>				

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

5501

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

1 NO.	2 FROM—	3 TO—	4 DATE	5 MESSAGE
2	Rec Sec Repat Br Mem Div	Chief Repat Br Corr Sec  IN TURN  Resol Sec	27 Feb 50	<p>For necessary action.</p> <p><i>293 Klosin Harry 12074</i></p> <p>For annotation of 333. Send to M &amp; R upon completion of case.</p> <p>1 Incl 293 file for KLOSIN, Harry</p> <p><i>ODENWALDER</i> 73836</p> <p>Thomas 71672</p>
3	Chief Repat Br Corr Sec Mem Div	Chief Repat Br Resol Sec Mem Div	2 Mar 1950	<p>1. Forwarded herewith is 293 file for KLOSIN, Harry.</p> <p>2. Combination grave location - LOI and letter to Effects QM have been dispatched.</p> <p>Incl n/c</p> <p><i>ZIEG</i> 4428</p> <p>Spel</p>

*Sloughed  
NAT  
14 Mar*

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 Br Mem Div	Repat Br Resol Sec Records Unit  IN TURN  Corres Section  REPAIRS RECORDS BRANCH  FEB 1 1 49 PM '50 HEAD DIVISION	31 Jan 50	<p>1. Attached case file forwarded for necessary correction of records and deflagging.</p> <p>2. All records in Ident. Section have been amended and the Field notified by radio.</p> <p>3. It will be noted that Pvt. Harry Klosin, 12024013 was MIA, <u>19</u> September 1944.</p> <p>1. For necessary Grave Location Letter to NO</p> <p>2. For dispatch of notification to Effects Q</p> <p>1 Incl 293 file for Klosin, Harry Pvt. 12024013</p> <p>METZ 74059</p> <p><i>Barry</i> BARRY 2462</p>

AGRS-DC-S 201 Klosin, Harry

23 February 1950

Mr. and Mrs. Joseph Klosin  
109 Ruhland Avenue  
Buffalo, New York

Dear Mr. and Mrs. Klosin:

Reference is made to the previous letter from The Adjutant General's Office, Washington, D. C., in which you were regretfully informed that a Finding of Death had been made in the case of your son, Private Harry Klosin, service number 12 024 013, Infantry, and that the presumptive date of his death had been established as 20 September 1945.

Since the cessation of hostilities, extensive investigations have been made by our military authorities overseas in an effort to obtain definite information regarding our personnel whose death occurred in enemy-occupied territory. The investigations include the identification of heretofore unidentified remains which have been recovered. In view of the investigation which has now been completed in the case of your son the records of the Department of the Army are being amended to show that he was killed in action 19 September 1944, near Sillegny, France, the same date he was previously reported missing in action. Your son's remains were originally recovered as an Unknown from an isolated grave near Sillegny, France, and reburied in the United States Military Cemetery, St. Avold, France, where subsequent positive identification was made. The records of the Department of the Army will show that he was carried in a missing in action status from 20 September 1944 to 20 September 1945. You will receive a letter from the Quartermaster General regarding the disposition of your son's remains.

Pursuant to the provisions of Public Law 490, 77th Congress, 7 March 1942, as amended, official reports will now be issued by the Department of the Army which will indicate the actual date of his death as that shown above. The issuance of this official Report of Death will not effect any payment or settlement of accounts which has been made on the basis of the Finding of Death.

Permit me to extend my sympathy.

Sincerely yours,

COPY FOR:

Miss Thomas, Spec Clearance Sub-Unit  
Memorial Division, OQMG, Rm 2617  
Tempo Bldg B, Washington 25, D. C.

JOHN J. DONOVAN  
Colonel, AGD  
Commanding

IDENTIFICATION CHECK LIST			DATE			
UNKNOWN X- NO. OR OTHER DESIGNATION X-6020			CEMETERY USMC, St Avold, France	PLOT 00	ROW 11	GRAVE 124
IDENTIFIED AS <i>AS</i> KLOSIN, HARRY			Private	12024013	38th Armored Inf. Bn, 7th Divi	
ITEM	FAVORABLE	UNFAVORABLE	UNKNOWN			
DATE AND PLACE OF DEATH	X					
CAUSE OF DEATH	X					
DENTAL CHART	X (See Tab 3)					
COLOR HAIR	X					
ESTIMATED HEIGHT	X					
ESTIMATED WEIGHT						
SCARS, FRACTURES, ETC.						
LAUNDRY MARKS			X			
SHOE SIZE	X					
TYPE CLOTHING	X					
IDENTIFICATION TAG						
PERSONAL EFFECTS (Religious medal)	X (Statement made by the Field)					
STATEMENT OF CIVILIANS						
ENEMY RECORDS						
EMERGENCY MEDICAL TAG						
PAY BOOK (EM/OFF.)						
SIGNED STATEMENT OF IDENTITY						
Recovery of organization members	X					
REMARKS						
<p>The estimated date and place of death of Unknown X-6020 are in agreement with that of Pvt. Klosin who was listed MIA 19 September 1944 near Sillegny, France. Place of death of the Unknown is <u>Sillegny, Moselle, France</u>; the estimated date of death is <u>September 1944</u>.</p> <p>Other deceased members of the 38th Armored Infantry Bn. were recovered from the immediate vicinity at the same time.</p> <p>A religious medal found on the remains of X-6020 is in agreement with the religion of Pvt. Klosin. Teeth charted for the Unknown are favorable with Army Dental Records for Pvt. Klosin. Color of hair and estimated height are favorable.</p> <p>Laundry marks found on clothing cannot be associated with any deceased listed as a casualty in the European Area.</p> <p>There are no other Unknowns with place of death shown as Sillegny.</p>						
<p><i>Approved 30 Jan. 1950</i></p> <p><i>File</i> <i>M. Binkerd</i> <i>2d Bn</i> <i>30 Jan 50</i></p>						

Extract from Battle Log, 7th Armored Division

"The division debarked in France early in August 1944 and 16 August was attacking Chartres. The city fell 18 August. The 7th then went on to take Dreux, Melun and Chateau-Thierry. It was the first Allied unit to cross the Seine in this War, the crossing being made 24 August. The 7th swept across the Marne, Aisne, and Meuse Rivers, taking the city of Verdun by the end of August.

In September, the division drove toward Germany, by-passed the city of Metz and established a bridge-head over the Moselle River."

Coordinates:

Place of death of X-6020: Sillegny, France (vicinity)	48° 59' N - 6° 10' E
Place of death of Pvt. Klosin: vicinity of Sillegny	48° 59' N - 6° 10' E
Point of departure of mission: near Marieulles	49° N - 6° 06' E
Metz, France	49° 06' N - 6° 11' E
Verdun	49° 10' N - 5° 23' E

*circumstances surrounding death of  
if agent. Part of tooth dent  
is very favorable to that of  
Klosin. Ht. approx. shoe  
size as int. favorable. Remains  
recovered from same unit that  
Klosin was reported MIA.  
No NOA can produce.*

Kloster - St

In inquiries

The teeth recovered are excellent  
Comparison - Shoe size - eyes

Physical Comparison favorable

Circumstances appear to be

Conclusion -

Skeleton complete except for W

APPROVED

3049th GRAVES REGISTRATION COMPANY  
FIRST MOBILE BIVOUAC UNIT  
METZ FRANCE

4 April 1946

SUBJECT: Narrative Report of Area Search

On 2 and 3 April 1946 while searching the Commune of Sillegny we were able to locate the graves and/or remains of nine (9) Americans.

When the mine clearing teams swept the area on 2 March 1946 they put the remains of two Americans in one box and two more Americans in another box in preparation for burial. However these had not been buried as yet. There were still two more sets of American remains above ground in a plowed field. In a garden we found that 37 Germans and one American had been buried.

On 2 April a child showed me an American pistol belt half protruding from the ground and when we pulled it up, we found it was a shallow grave of still another soldier. About 200 yds below that a civilian showed me still another isolated American Grave.

The fighting in this area took place in October 1944 and most of the Germans were SS.

The bodies on the sketch are listed as follows:

1. Louis E. Kay, Pfc, 37099594, Co C, 38th Armd Inf Bn.
2. William F. Hennessey, 32227622, Rank unk, buried with unk.#4, a Lt.
3. Elias A. Santillanes, Pvt. 38352208, Med Det 38th Armd Inf Bn.
4. Unk # 4, a Lt. buried with Hennessey.
- 5 2 Unknowns, buried together.
- 6
7. Unknown
8. Unknown
9. William E. Harrison, 34937992, Rank Unk.

The Mayor had the dog tags taken from Pfc Louis E. Kay, Wm F. Hennessey and Elias A. Santillanes, Wm E. Harrison's name and serial number were taken from the cross.

PFC Glen Clemmer  
3049th QM Gr Reg Co.

Copy made from statement in 293 file - Louis E. Kay, 37099594.

See  
Tab 2

Status of cases recovered with X-6020 St Avold

Body # Identified as:

1. KAY, Louis E., 37099594 - reburied 00-9-106 St Avold. Identified by Identification tags. Perm. burial St Avold.
2. HENNESSEY, William F. 32227622 - reburied 00-9-107 St Avold. Identified by ASN on trousers, Ident. tags. Repatriated.
3. SANTILLANES, Elias A. 38352208 - reburied 00-9-108 St Avold. Identified by Ident. tags, laundry marks. Repatriated.
4. CARPENTER, Robert E. 0-1210065 - reburied 00-11-121 St Avold. Identified by Ident. tags. Permanent burial St Avold.
5. KELLER, Keith K. -37701757- reburied 00-11-122 - St Avold. Identified by Ident. tags.
6. HANSEN, Frederick W. 36883490 - reburied 00-11-123 St Avold. Identified by Laundry mark. To be permanently buried St Avold by Adm. Decision.
7. X-6020 - this case - 00-11-124, St Avold
8. MICHES, Fidel 38153148 - reburied 00-11-125 St Avold. Identified by Ident. tags. Permanently buried St Avold.
9. HARRISON, William E. 34931992 - reburied 00-11-126 St Avold. Identified by name, ASN and dates of tetanus shots on grave marker (taken from tags). Permanent burial St Avold.

All of the above were from the 38th Armored Infantry Bn, 7th Division  
with the exception of Harrison, who was with the 10th Inf. Regt,  
5th Division.

Above numbers, 1 thru 9, correspond with numbers on Tab 1.

STATEMENTS

3 April 1946

I, the undersigned Muller Jules, Chief deminer, certify that I arrived in Sillegny in December 1945. I found in working, 6 American bodies at the place called Rupt de Grand Chal. Afterwards I gave them numbers 1, 2, and 3 (these numbers are in the sketch.) As for the bodies 4, 5, 6, I found no dog tags. In March, I put in a casket the body number 4, and on top the body number 2. I can also tell you that the body number 3, still on the place, is an attendant. I could make out he was an attendant because he still had his helmet with a red cross on it. On leaving my work in Sillegny, I handed over to the Mayor of the Village, the identity papers and dog tags of the 3 dead, that is to say 5 pieces.

signed: Muller Jules

Copy of statement in 293 file - Louis E. Kay, 37 099 594

- - - - -  
I the undersigned Peltzer Edouard, Supervisor at the Establishment Schwertzler, 26 Rue du Pont des Morts, Metz, certify that I saw while working with my men in Sillegny during February 1946, two bodies of American soldiers. No dog tag was found. One address-book in a very bad state was found near the body and handed over to the Mayor of the Commune. In order to complete our work, I had to have a casket made for the burial of the bodies.

The Supervisor  
signed: illegible

DENTAL CHART

Unknown X- 6020 St Avold  
00-11-124

NAME WELLS, THOMAS H.  
Major, O-392480

R-8 X Extracted  
R-7 oA chipped  
R-6 oA moA  
R-5 MSD  
R-4  
R-3 MSD  
R-2 MSD  
R-1 MSD

~~3-8~~ X  
R-7 fA  
R-6  
R-5  
R-4  
R-3  
R-2  
R-1

L-1 MSD  
L-2 fAS  
L-3  
L-4 doA  
L-5 moA  
L-6 X Extracted  
L-7 moA oA oA  
L-8 X Extracted

L-1  
L-2 mS  
L-3  
L-4  
L-5 doA  
L-6 oA mA  
L-7 oA  
L-8 X

R-16 X Extracted  
R-15 oA oA fA  
R-14 X Extracted  
R-13 MSD  
R-12 MSD  
R-11 MSD  
R-10 MSD  
R-9 MSD

R-16 X  
R-15 oA oA  
R-14  
R-13  
R-12  
R-11  
R-10  
R-9

~~L-9 Mandible  
L-10  
L-11  
L-12  
L-13  
L-14  
L-15  
L-16 Missing~~

L-9  
L-10  
L-11  
L-12  
L-13 doA  
L-14 doA  
L-15 doA oA  
L-16

Reprocessing 16 April 1948; 13 Dec 49  
Est. height: 5' 11 3/8"  
Hair: Medium brown  
One service shoe size 9 1/2 ✓  
Chain with religious medals in  
agreement with religion of Klosin.  
Remnants of pistol belt, leggings,  
OD shirt & trousers, raincoat with  
mark "M-2707". First Aid pk with  
"P-7042". Canteen cup marked "ADELL"

Forms 79 dtd 5/2/41; 5/25/42; 10/28/42  
Height: 5' 11"  
Weight: 195 Religion: Catholic  
Organization: 38th Armored Inf Bn  
7th Armored Division  
Date of MIA: 19 Sept 44-PDD 20 Sept 45  
Place of MIA: Sillegny, France

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	FIELD SERVICE DIV EXEC OFF	IDEM BR MEMORIAL DIV	2 NOV	<p>Forwarded as a matter which pertains to your Branch. FOR THE CHIEF, FIELD SERVICE DIVISION:</p> <p style="text-align: right;"><i>Agnew</i> MUNSTER 5473</p> <p>1 Attachment: TWX re Unk X-6020, St. Avold, France</p> <p style="text-align: right;"><i>WCC</i> Conlon 3821</p>

THIS FORM WILL REMAIN PART OF THE OFFICIAL FILE

EU 1807Z

EUA056

ECA143

CEK 46

RR UEPOG

NOV 2 1 19 PM '49

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

DE UECKC 04

RO21100Z

FM ARMY EFFECTS BUREAU KANSAS CITY RECORDS CENTER 601 HARDESTY AVENUE

KANSAS CITY MO

TO THE QUARTERMASTER GENERAL WASH DC

WD GRNC

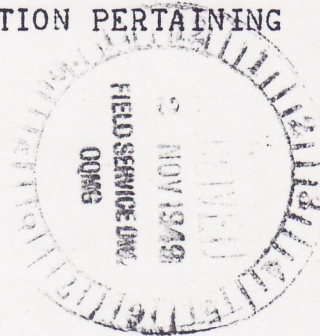
11-1-49

REURMSG QOD 265 CONLON NO PERSONAL EFFECTS OR INFORMATION PERTAINING

THERETO RECEIVED FOR UNKNOWN X-6020 ST AVOLD

02/1706Z

*Depot Oper*



*293 - Mr. Francis R. Arnold  
X-6020*

1 Chief Field 31 Oct  
Ident Br Service 1949  
(Ident Sec) Division  
Mem Div AETH  
Exec. Off.

Request the following be incorporated into TWX  
to Personal Effects Bureau, Kansas City;

"Request personal effects for Unknown X-6020, USMC  
St Avold, France, Plot 00, Row 11, Grave 124, be  
forwarded to this Office as an aid to identification  
of the Unknown."

Binkerd  
Clements  
REB

METZ  
74059

BARRY  
2462

*Reply rec'd 3 Nov. - No Personal Effect in R.C.*

From AGRC PARIS  
Msg # AGRC 6928  
Date 141440Z  
action QMC  
MC IN NO 74018

11981

FM HQ AGRC BARIS FRANCE

TO OQMG WASHDC

GRAVES GRNC

REF AGRC SIX NINE TWO EIGHT  
ATTN MEMORIAL DIVISION

*with 22966*

RE URMSG WCL TWO TWO NINE SIX SIX CMA RECOVERIES FROM SILLEGNY MOSELLE FRANCE IS AS  
FOLLOWS CLN KAY LOUIS PFC THREE SEVEN ZERO NINE NINE FIVE NINE FOUR REBURIED ST AVOLD  
PLOT OO ROW NINE GRAVE ONE ZERO SIX CMA HENNESSEY WILLIAM F PFC THREE TWO TWO TWO  
SEVEN SIX TWO TWO REBURIED ST AVOLD PLOT OO ROW NINE GRAVE ONE ZERO SEVEN CMA SANTILLAN  
ELIAS A PVT THREE EIGHT THREE FIVE TWO TWO ZERO EIGHT REBURIED ST AVOLD PLOT OO ROW NIN  
GRAVE ONE ZERO EIGHT CMA CARPENTER ROBERT E FIRST LT ZERO ONE THREE ONE ZERO ZERO SIX EV  
REBURIED ST AVOLD PLOT OO ROW ONE ONE GRAVE ONE TWO ONE CMA KELLER KEITH K PFC THREE SEV  
SEVEN ZERO ONE ONE FIVE SEVEN REBURIED ST AVOLD PLOT OO ROW ONE ONE GRAVE ONE TWO TWO CL  
HANSEN FREDERICK W PVT THREE SIX EIGHT EIGHT THREE FOUR NINE ZERO REBURIED ST AVOLD  
PLOT OO ROW ONE ONE GRAVE ONE TWO THREE PREVIOUSLY XRAY SIX ZERO TWO ONE CMA KLOSIN  
HARRY PVT ONE TWO ZERO TWO FOUR ZERO ONE THREE REBURIED ST AVOLD PLOT OO ROW ONE ONE  
GRAVE ONE TWO FOUR PREVIOUSLY XRAY SIX ZERO TWO ZERO CMA FLORES FIDEL PFC THREE EIGHT  
ONE FIVE SIX ONE FOUR EIGHT REBURIED ST AVOLD PLOT OO ROW ONE ONE GRAVE ONE TWO FIVE  
CMA HARRISON WILLIAM E PVT THREE FOUR NINE THREE SEVEN NINE NINE TWO REBURIED ST AVOLD  
PLOT OO ROW ONE ONE GRAVE ONE TWO SIX PD CONFIRMATION LIST FOLLOWS BY MAIL PD AGRRE SGD  
PECKHAM

*In Id Br - 16 Nov 49*

*Assoc. with Klosin, Harry. X-6020 St Avold.*

A I R M A I L

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

RRE 314.6

6 January 1950

SUBJECT: Burial Information

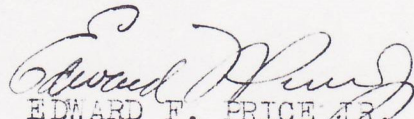
TO: The Quartermaster General  
Washington 25, D C  
ATTENTION: Memorial Division

<sup>2931.</sup> In compliance with your cable WCL 24958, the teeth of Pvt Harry KLOSIN, 12024013, were re-examined as requested. Forwarded herewith are photostatic copies of relevant findings.

2. The remains referred to herein will be held in suspense status by this headquarters, pending receipt of further instructions from your office.

FOR THE COMMANDING OFFICER:

- 3 Incls  
1. Exhum. Order #2847  
2. Tooth chart  
3. Narrative

  
EDWARD F. PRICE JR.  
Capt, QMC  
Assistant Adjutant

A I R M A I L

A I R M A I L

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

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Assistant Adjutant

A I R M A I L

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

Date 29 November 1949

EXHUMATION ORDER

NUMBER 2847

CLASSIFICATION: Priority

ACTION FOR: Commanding Officer  
Neuville Cemetery Detachment

INSTRUCTIONS:

1. The Commanding Officer, Neuville Cemetery Detachment (Central Identification Point) will prepare a new tooth chart for Pvt Harry KLOSIN, 12024013, previously interred in Plot 00, Row 11, Grave 124, U. S. Military Cemetery, St. Avold and now in storage at Neuville. Particular attention will be given to the present condition of I-2, inasmuch as army records for Pvt KLOSIN indicate distal silicate filling in this tooth.

2. QMG Form 371 and medical Forms 79 for Pvt KLOSIN are forwarded herewith for information.

3. Action called for above has been requested by OQMG.

BY COMMAND OF BRIGADIER GENERAL PECKHAM:

2 Incls

- 1. QMG Form 371
- 2. Forms 79

E. D. MULVANITY  
Lt Col, QMG  
Actg Asst Adj Gen

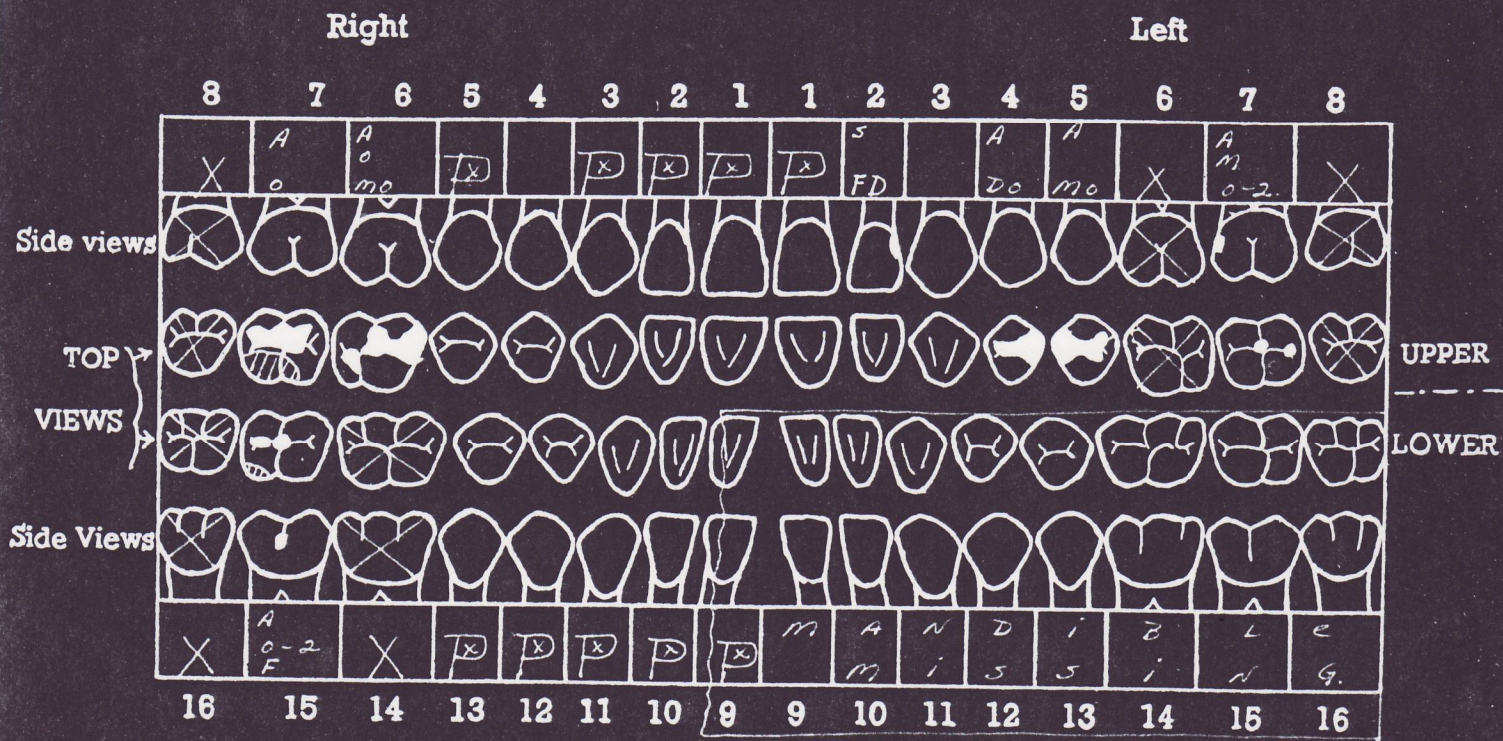
Tel: Balzac 5400, Ext. 205

# TOOTH CHART

Kinsin, Harry  
12024013  
St. Avoild 00-11-124  
E.O.-2847

13 Dec 49  
Date

Last Name	First	Initial	Grade	Serial No.
Unit			Organization	
Place of Death		Date of Death		Cause of Death



*See Remarks*

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

*Harold S. Wheeler*

Signature of Officer or other person who prepared Tooth chart

Verified by G. R.C. Officer

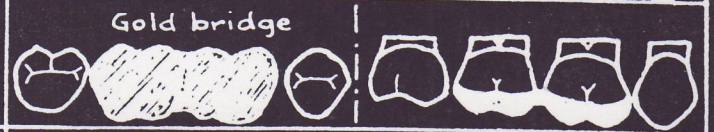
**MISSING TEETH** .. All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



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



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



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



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



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

**ADDITIONAL SPACE FOR FURTHER REMARKS**

Size large average  
 Color dull ivory  
 Posthumously missing R1,2,3,5,7,10,11,12,13,14,15,17  
 Spaces: R14, est. 4mm; L6, 7mm.  
 Alignment good.

(Note: L2 fixed distally situate.)

Dec 13, 1949

E.O. 2847

a new tooth has been prepared for  
Pvt HARRY KLOSIN 12024013 as directed in E.O. 2847.

Particular attention was given to the tooth  
2-2 which was found to have a distal silicate  
filling

Sculco

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 89 U.S. ARMY

RRM 295.3 (1B)

15 November 1949

SUBJECT: Isolated Burials

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

The attached list of recoveries from Sillegny,  
Moselle, France is submitted in compliance with radio  
your office WCL-22208 and radio AGRC #6028 in reply.

*22266*

FOR THE COLLECTING GENERAL:

*E. D. Sulvanity*  
E. D. SULVANITY  
Lt Colonel, USG  
Actg Asst Adj Gen

1 Incl:  
List of recoveries

*493 WCL European (Revised Recoveries from Sillegny Moselle) France*

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

RRE 293.9 (IB)

15 November 1949

SUBJECT: Isolated Burials

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

The attached list of recoveries from Sillegny, Moselle, France is submitted in compliance with radio your office WCL-22906 and radio AGRC #6928 in reply.

FOR THE COMMANDING GENERAL:

1 Incl:  
List of recoveries

E. D. MULVANNITY  
Lt Colonel, QMC  
Actg Asst Adj Gen

*110  
The Quartermaster General  
(Ann's Sillegny France)*

LIST OF DECEASED RECOVERED FROM SILLEGNY  
MOSELLE, FRANCE

\*\*\*\*\*

KAY, Louis	Pfc	37 099 594	St Avold	00-9-106
HENNESSY, William F.	Pfc	52 227 622	St Avold	00-9-107
SANTILLANES, Elias A.	Pvt.	58 352 208	St Avold	00-9-108
CARPENTER, Robert E.	1/Lt	01 310 065	St Avold	00-11-121
KELLER, Keith K.	Pfc	37 701 157	St Avold	00-11-122
HANSEN, Frederick W.	Pvt	33 885 490	St Avold	00-11-123 (Previously K-5081)
KLOSIN, Harry	Pvt	12 084 013	St Avold	00-11-124 (Previously K-5080)
FLORES, Fidel	Pfc	33 156 142	St Avold,	00-11-125
HARRISON, William E.	Pvt	34 037 992	St Avold	00-11-126

UNKNOWN NO. X-6020

U.S. MILITARY CEMETERY St Avold, France  
(Location)

Pvt Harry KLOSIN, 12024013 was a member of Co C, 38th Armored Inf Bn, 7th Armored Division. He was reported as killed in action on 20 Sept 1944 near Sillegny, (Moselle) France. X-6020 was disinterred from an isolated grave near Sillegny. Numerous other casualties from the immediate area were recovered at the same time as X-6020 who were all members of the same organization as Pvt KLOSIN.

The tooth chart for X-6020 is in agreement with the tooth chart for Pvt KLOSIN. Estimated height of X-6020 is in agreement with the Height of Pvt KLOSIN. Estimated place and date of death of X-6020 is in agreement with the KIA casualty listing for Pvt KLOSIN. A Religious medal found on the remains of X-6020 is in agreement with the religion of Pvt KLOSIN.

Pvt Frederick W. HANSEN, 36883490, Pfc Louis E. KAY, 37099594, and Pvt Elias A. SANTILLANES, 38352208 all of the 38th Armored Inf. Bn. were recovered with X-6020.

*M. H. Kamons*  
M. H. KAMONS.

TRUE COPY

Sillegny le 3 Avril 1946

Je ,soussigne , CERCELLIER Pierre, Demineur Chef, certifie avoir vu les corps ou les restes de deux soldats Americains dans un terrain mis e en culture ces jours derniers, pendant que des soldats Americains etaient en train de prendre des renseignements pour d'autres corps de soldats Americain Auparavant, je ne me suis jamais apercu si ces cadavres avaient des papiers ou plaques d'identite, C'est tous les renseignements que je puis fournir a ce sujet.

Fait a Sillegny le 3 Avril 1946

Signe ; CERCELLIER

CERCELLIER Pierre, Demineur-Chef a Vandieres (M & M)

Sillegny 3d of April 1946

I, the undersigned, CERCELLIER Pierre, Chief miner-sweeper, certify that I saw the bodies of the remains of 2 American bodies.

I never noticed before, whether these bodies had identity papers or dog-tag.

I can give no other information about it.

signed : CERCELLIER Peter

CERTIFIED A TRUE COPY

*Howard E. Metzbow*  
Howard E. METZBOWER  
2nd Lt. INF.

UNKNOWN. X - 6020.

REINTERRED U.S. MIL. CEM.  
ST. AVOLD. CO - 11 - 124.

TRUE COPY

Sillegny le 3 Avril 1946

Je ,soussigne , CERCELLIER Pierre, Demineur Chef, certifie avoir vu les corps ou les restes de deux soldats Americains dans un terrain mis en culture ces jours derniers, pendant que des soldats Americains etaient en train de prendre des renseignements pour d'autres corps de soldats Americain. Auparavant, je ne me suis jamais apercu si ces cadavres avaient des papiers ou plaques d'identite, C'est tous les renseignements que je puis fournir a ce sujet.

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---

Sillegny 3d of April 1946

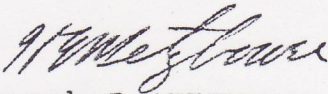
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CERTIFIED A TRUE COPY

  
Howard E. METZBOWEN  
2nd Lt. INF.

UNKNOWN. K - 6020.

REINTERRED U.S. MIL. CEM.  
ST. AVOLD. 00 - 11 - 124.



Unmarked

- a. From what source was this information obtained? \_\_\_\_\_  
(Identification tags, personal effects)
- b. By whom? \_\_\_\_\_
11. Where are the cemetery records? No  
(Town hall, cemetery, burgermeister's office)
- a. What information was obtained thereon? \_\_\_\_\_
- b. Where was the information obtained? \_\_\_\_\_
- c. By whom? \_\_\_\_\_
12. What is the date of death? Est. Oct. 1944
- a. Give basis Date of fighting in Area
13. What is the cause of death? Unk.
- a. Give basis \_\_\_\_\_
14. What is the date of burial? Est. Oct. 1944
- a. Give basis Date of fighting in Area
15. What is the place of death? Sillagny Coords U-852445  
Give basis Found here in Shallow Grave
16. Where were the remains found? Sillagny Coords U-852445
- a. By whom? Pfc. Glenn Clemmer 3049th Cn. G.P. Co.
- b. Is sketch attached? Yes
17. Was a casket used? No Who furnished the casket? \_\_\_\_\_  
Type of casket \_\_\_\_\_ How marked? \_\_\_\_\_
18. Who made the burial? Unk.  
(Civilian, American Mil. or German Mil.)
- 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)

January 1946

REPORT OF INVESTIGATION AREA SEARCH

ATTN: REG DIV FOR USE OF  
CIVILIAN CLEARANCE SECTION

8 APRIL 1946  
DATE

NAME UNKNOWN X-6020 RANK UNK ASN UNK

ORGANIZATION UNK

MEANS OF IDENTIFICATION SEE REPORTS ON THREE (3) OTHER BODIES FOUND  
IN SAME FIELD AS PER MAP ATTACHED: BODY #5,  
KEITH KELLER? BODY #6 UNKNOWN X-6021, BODY #8  
FIDEL FLORES.

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

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

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

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

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

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

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

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

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

~~Louis P. Kay Elise A. Santillanes Wm. F. Hannarey~~  
(Use reverse side for listing of crew members from MACR)

A. Date of above burials Set. Oct. 44 Common Graves? \_\_\_\_\_

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

5. Name and type of cemetery Not in Cemetery  
(Military or Civilian)

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

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

7. Give exact location in cemetery of the remains.

a. Section \_\_\_\_\_ Row \_\_\_\_\_ Grave \_\_\_\_\_

b. Is sketch attached? \_\_\_\_\_

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

a. Town Silleary Coordinates Map of Europe 1:200,000  
Sheet 57 U-852445

b. Is sketch attached? Yes

c. Is area mined? No

9. How is the grave marked? Unmarked

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 investigation's 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 \_\_\_\_\_

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

41. Were personal effects recovered by the investigating team No

If not, state reason None Available

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

Where? \_\_\_\_\_ By whom? \_\_\_\_\_

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

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

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

Where? \_\_\_\_\_ By whom? \_\_\_\_\_

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

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? No

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

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

43. Was deceased evacuated to a German hospital? Unk.

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

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

45. Is it possible on surface investigation to obtain from civilian sources the condition of the remains? No.  
(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? \_\_\_\_\_

or other equipment: \_\_\_\_\_

21. How did crash occur? \_\_\_\_\_ Anti-aircraft \_\_\_\_\_  
Enemy planes? \_\_\_\_\_ Collision? \_\_\_\_\_
22. Did plane explode in the air? \_\_\_\_\_ On the ground? \_\_\_\_\_
23. Did plane burn in the air? \_\_\_\_\_ On the ground? \_\_\_\_\_
24. What was the direction of the flight? \_\_\_\_\_
25. What was the civilian opinion regarding the destination of the plane? \_\_\_\_\_
26. Had bombs been released prior to the crash? \_\_\_\_\_
27. Does specific time and date of crash correspond with the 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, asst driver or... front, side, or back)
- b. Near wreckage? \_\_\_\_\_
32. Location of destroyed tank be investigated. Give complete results of investigation. (If removed, state when and by whom)
- a. Type of tank \_\_\_\_\_
- b. Markings and/or name of tank \_\_\_\_\_
- c. Numbers on motors, machine guns, ammunition, instruments, etc.. \_\_\_\_\_
33. What was the type of enemy action that resulted in the tank's disablement? \_\_\_\_\_
34. Did tank explode? \_\_\_\_\_ Burn? \_\_\_\_\_
35. Number of tanks in immediate vicinity at time of disablement \_\_\_\_\_
36. Does specific time and date of disablement correspond with date of death of above named deceased? \_\_\_\_\_
37. Precise time and date of destruction of tank \_\_\_\_\_  
(Night?, Day?)

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

Sillegny (Moselle) France

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

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

51. Was investigation preceded by advanced publicity? Yes

(If special investigation, give case number) \_\_\_\_\_

52. Give brief narrative See Attached While Searching In This Area  
Some Children Showed Us Some G.I.

(Use attached sheets, if necessary)

**Equipment Protruding from ground. I investigated and saw it was the remains of an American Soldier in a shallow Grave.**

D. Militch

Signature of interpreter

D. Militch

Rank

ASN

Organization \_\_\_\_\_

Glenn Clemmer

Signature of Investigator

Pfc. Glenn Clemmer

Rank

ASN

3049th M. G.R.Co.  
Organization

# CHECK LIST OF UNKNOWNNS

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

Unknown X 6020  
Cemetery ST. AVOLD  
Plot 00 Row 11 Grave 124.

1. Arrived at cemetery 1030 hours 8 APRIL 1946.  
(hour) (date)
2. Place of death SILLECONY (MOSELLE) FRANCE U-852445  
(name of closest town) (coordinates and letter Prefex, maps)  
MAP OF EUROPE 1:200,000; SHEET 57; VERDUN WISSEMBOURG  
(Sheet, scale and serials used)
3. Remains recovered or disinterred by PVT. D. E. MOSHER, 3049 QM G. R. C.  
(name and organization)
4. Evacuated to Cemetery by PVT D. E. MOSHER, 3049 QM G. R. C.  
(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	<u>N</u>		
	<small>(type)</small>		
Raincoat		<u>M3707</u>	<u>REMNANTS ONLY</u>
Overcoat	<u>N</u>		
Jacket, Field	<u>N</u>		
Jacket, Combat	<u>N</u>		
Mackinaw	<u>N</u>		
Sweater	<u>N</u>		
Jacket, HBT	<u>N</u>		
*Shirt, Wool OD		<u>UTD</u>	<u>REMNANTS ONLY</u>
Undershirt, Wool		<u>UTD</u>	<u>REMNANTS ONLY</u>
Undershirt, Cotton	<u>N</u>		
Trousers HBT	<u>N</u>		
*Trousers, Wool OD		<u>UTD</u>	<u>REMNANTS ONLY</u>

Belt, Web **UTD**

Drawers, Wool **UTD** **REMAINS ONLY**

Drawers, Cotton **N**

Leggins, Wool **UTD** **REMAINS ONLY**  
(Note unusual lacing)

Socks, Cotton **UTD** **REMAINS ONLY**

\*Shoes (type) **SERVICE (RIGHT ONLY) 9 1/2 EE**

Overshoes **N**

Web Equipment (Type) **PISTOL BELT** **UTD**

(Other item) **FIRST AID PACKET MARKED "P7048"**

(Other item) **CHAIN WITH RELIGIOUS MEDALS IN ENVELOPE ATTACHED.**

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

6. Chevrons or Insignia **N**  
(type & location : shirt, jacket, coat, helmet)

Shoulder Patch **N**

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

8. Description of Remains :

Age **UTD** Height **UTD** 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**  
**UTD** (light, med. dark, clear, pimples, poeks, freckles)

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

Hair **BROWN, SHORT (SMALL PORTION OF SCALP ONLY; BADLY DECOMPOSED)**  
(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 **WHITE, LARGE, CLOSE.**  
 (white, size, unevenness, spacing, noticeable crowns, fillings, extract).

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

Jaw **UTD** Circumference of head in inches **20 INCHES**  
 (large, small, normal) (hat band)

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

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

**UTD**  
 (extent and quantity of hair)

Hands **UTD**

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

**UTD**  
 (Unusual characteristics of fingernails)

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

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

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

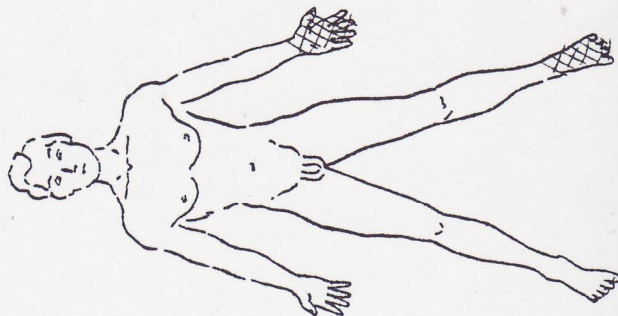
Hernioplasty **UTD**  
 (yes-no; location)

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 :



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

If not, explain BODY DECOMPOSED

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

12. Remarks : SEE REPORTS ON THREE OTHER BODIES FOUND IN SAME FIELD OF MINES: UNKNOWN # X-8021; KEITH KELLER; and FIDEL FLORES.

BELIEVE ALL THREE ABOVE SOLDIERS TO BE FROM 38th ARMD INF BN.

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.

*Howard E. Metzbowler*  
Officer's Name Howard E. Metzbowler

2nd Lt. Rank INF Service

3049 68 G. R. C.  
Organization

# TOOTH CHART

8 APRIL 1946

UNKNOWN X-6020

UNK

Date  
UNK

Last Name UNK

First

Initial

Rank UNK

Serial No.

SILLEGNY (MOSELLE) FRANCE

EST. SEPT. 1944

Organization WOUNDS

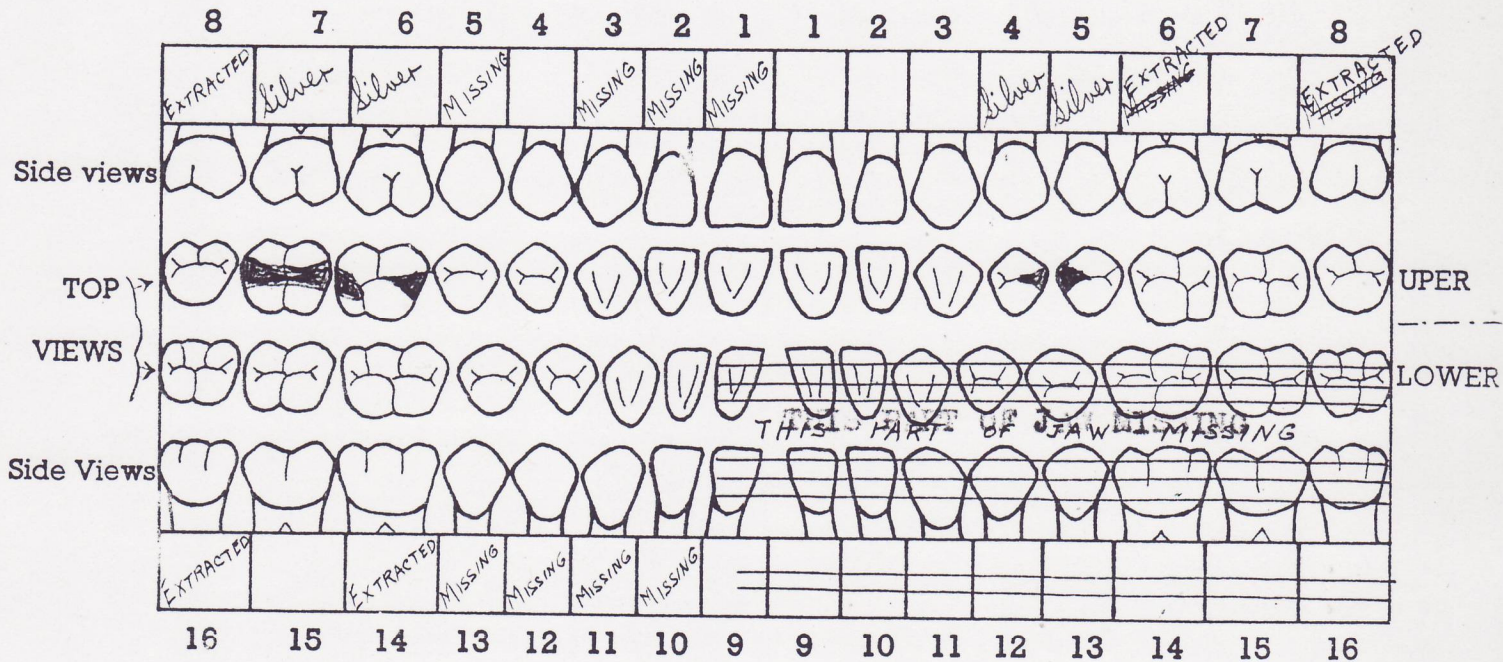
Place of Death

Date of Death

Cause of Death

Right

Left



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

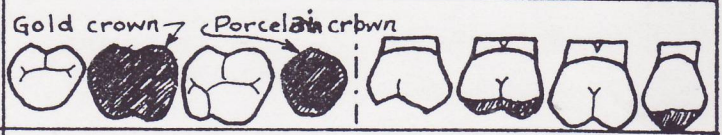
*J. H. Hauck, Col., 3049 QM HRC*  
 Signature of Officer or other person who prepared Tooth chart

*Howard E. McLawer 2nd Lt*  
 Verified by G. R. S. Officer

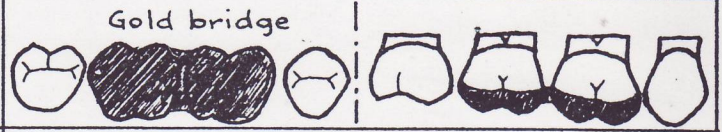
**MISSING TEETH...** All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



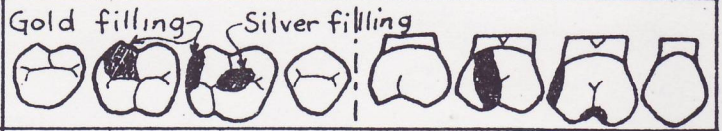
**CROWNED TEETH...** Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



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



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



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



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

**ADDITIONAL SPACE FOR FURTHER REMARKS**

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

RRE 200.2

Date 25 MAY 1948

SUBJECT: Reprocessing of Remains

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

The remains of X-6020  
interred in Plot 00, Row 11, Grave 124, USMC St- Avold  
France, have been reprocessed and the information  
not previously forwarded to your Headquarters is herewith submitted.

Raincoat : Remnants of (size medium)

Shirt, wool OD : Remnants of

Undershirt, wool : Remnants of

Trousers, Wool OD : Remnants of

Drawers, wool : Remnants of

Shoes : one (type) Service (size 9 1/2 E)

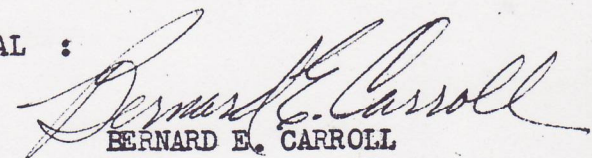
Scabbard for French knife, Canteen cup marked : "ADELL"

Est. height : 5' 11 5/8"

Hair : Medium brown, 1 1/2" long

FOR THE COMMANDING GENERAL :

2 Incls : 1. Skeletal Chart  
1. Tooth chart

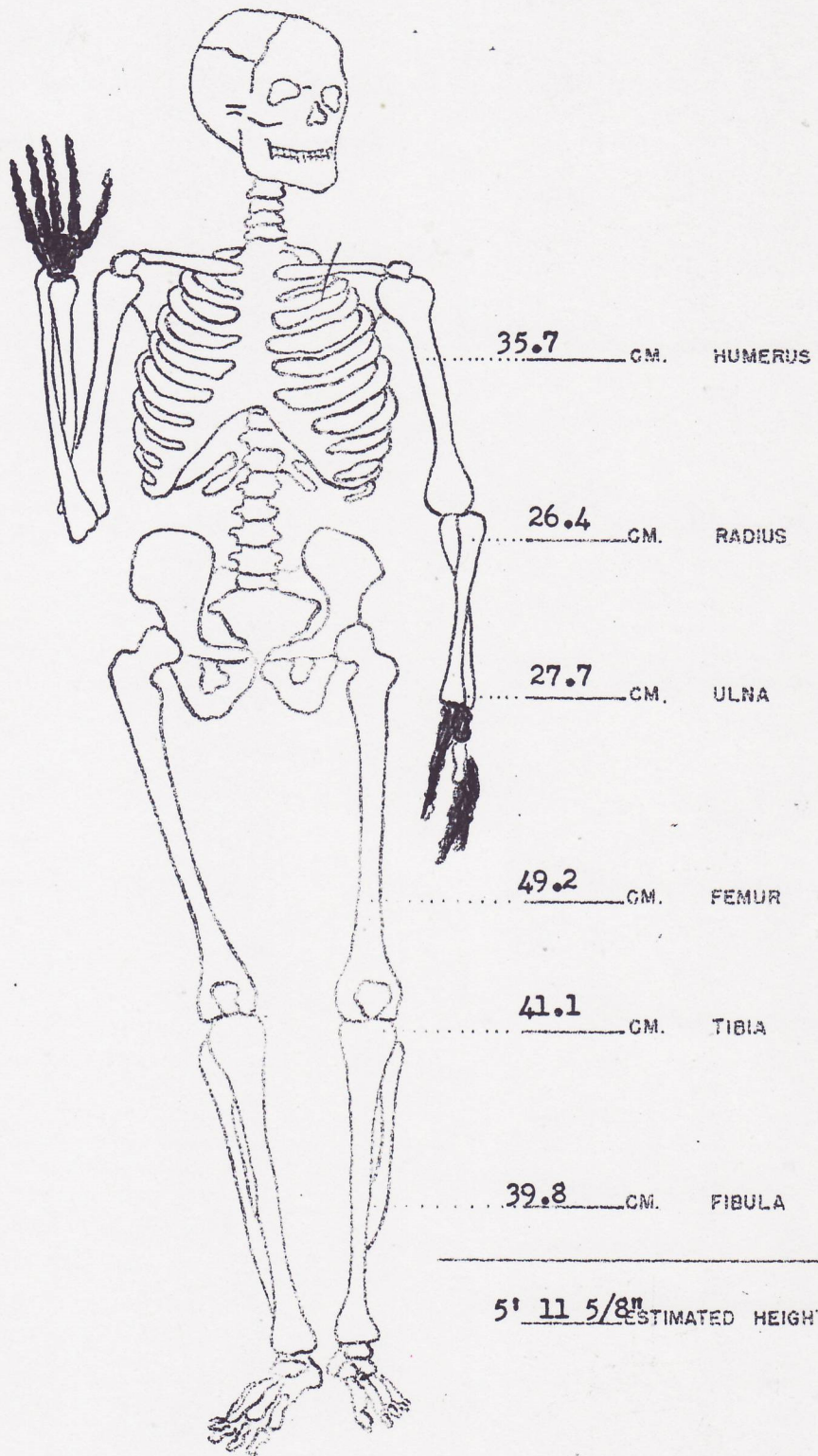
  
BERNARD E. CARROLL  
WOJG AUS  
Actg Asst Adj Gen.

Plot 00 X-6020  
Row 11  
Grave 124  
St-Avold Cem. Franc

# SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED)

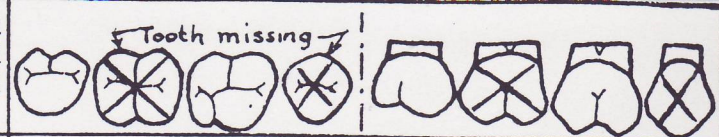
13 April 1948



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



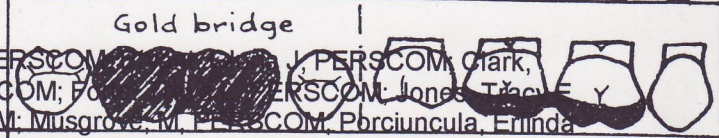
MISSING TEETH... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



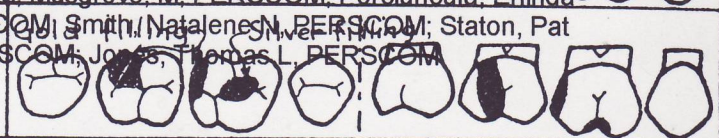
CROWNED TEETH... Block in solid the crown of **Morehead, Jeannette, PERSCOM** (porcelain), thus :



From: Brown, Denise, PERSCOM  
 Sent: **BRIDGE WORK** Tuesday, November 03, 1998 10:26 AM of  
 To: Angela Cummings, Brown, Denise, PERSCOM; Bostick, Donna L, PERSCOM; Clark, Lytrecce L, PERSCOM; Clifton, Alice L, PERSCOM; Ellis, Grimsly, PERSCOM; Jones, Tracy E, PERSCOM; Morehead, Jeannette, PERSCOM; Musgrove, M, PERSCOM; Porciuncula, Erinda, PERSCOM; Shaw-Farmer, Joaquin, PERSCOM; Smith, Natalene N, PERSCOM; Staton, Pat as possible (M, PERSCOM); Washington, Treva, PERSCOM; Jones, Thomas L, PERSCOM  
 Subject: FW: I hope I get this back, too



FILLINGS... Outline location and size of cavity, shade in thus :



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

From: Bostick, Donna L, PERSCOM  
 Sent: Tuesday, November 03, 1998 9:59 AM.  
 To: **DENTURES (PLATES)** Angela Cummings, Brown, Denise, PERSCOM; Ellis, Grimsly, PERSCOM; Morehead, Jeannette, PERSCOM; Staton, Pat attached, and stimulate retaining response Musgrove, M, PERSCOM  
 Subject: FW: I hope I get this back, too

**ADDITIONAL SPACE FOR FURTHER REMARKS**

From: PERSCOM  
 Subject: **Posthumously missing** Color Dull Ivory  
 Space: L-5-7-7mm Size Average  
 R-13-15 5mm Alignment Good

- > Friends are like a perfect ROSE very hard to come by.
- > Happy Care Week..... Maxilla
- >
- > I believe that without R-4 lingual version rotation
- > on a lot!!! Don't be confused by friends and how many
- > difference! Because I care about you. Different
- > L-4 lingual version
- > It's national care week, and you
- > get to send messages to all your friends telling them that you care
- > about them and make 'em feel good about themselves and if they write
- > back ... (just once) than that means that they care about you to ... BUT,
- > you have to send it right now!! Send it to everyone you care and if they
- > send it back ... R-15 mesial version
- > that means they care too....but ... dont just send it back, send it on
- > to everyone ... have a nice day, and I'm glad we are friends!!!
- >
- > THIS IS A ROSE OF FRIENDSHIP YOU MUST PASS IT TO AT LEAST 4
- > FRIENDS!!! GO!
- >
- >

UNKNOWN X - 6020.

REINTERRED U.S. MIL. CEM.  
ST. AVOLD. 00 - 11 - 124.

Remains of FENCE  
2 TANKS

Field Named

"The Six Jours"

50m

STREAM

PARK

30m

60m

50m

Graves of 2 Germans

N. G. 49

1, 2, 3, 4, 5, 6, 7, 8, 9 are graves of Amer. bodies

Bodies 2 & 4 in box near house A

Bodies 5 & 6 in box near point B

File in  
m. Bunker  
24 Box  
30 Jan  
1950.

SILLAGNY

Map of Europe 1: 200,000  
VERDUN - WISSEMBOURG  
Sheet 57 U, 852445

BODY # 7

Graves of 2 Germans

N. D. 49

Sillegny

N

Graves of 37 Germans

Graves of 2 Germans

Grave of Wm. E. Harrison

N. 47

# CHECK LIST OF UNKNOWNNS

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

Unknown X 6020  
Cemetery ST. AVOLD  
Plot 00 Row 11 Grave 124.

1. Arrived at cemetery 1030 hours 8 APRIL 1946.  
(hour) (date)
2. Place of death SILLEGNY (MOSELLE) FRANCE U-852445  
(name of closest town) (coordinates and letter Prefex, maps)  
MAP OF EUROPE 1:200,000; SHEET 57; VERDUN WISSEMBOURG  
(Sheet, scale and serials used)
3. Remains recovered or disinterred by PVT. D. E. MOSHER, 3049 QM G. R. C.  
(name and organization)
4. Evacuated to Cemetery by PVT D. E. MOSHER, 3049 QM G. R. C.  
(name and organization)
5. **Description of clothing and equipment : (if clothes do not fit, obtain size from body measurements).**

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

Item			
*Headgear	<u>N</u>		
	<small>(type)</small>		
Raincoat	<u>M3707</u>	<u>REMNANTS ONLY</u>	
Overcoat	<u>N</u>		
Jacket, Field	<u>N</u>		
Jacket, Combat	<u>N</u>		
Mackinaw	<u>N</u>		
Sweater	<u>N</u>		
Jacket, HBT	<u>N</u>		
*Shirt, Wool OD	<u>UTD</u>	<u>REMNANTS ONLY</u>	
Undershirt, Wool	<u>UTD</u>	<u>REMNANTS ONLY</u>	
Undershirt, Cotton	<u>N</u>		
Trousers HBT	<u>N</u>		
*Trousers, Wool OD	<u>UTD</u>	<u>REMNANTS ONLY</u>	

Belt, Web UTD

Drawers, Wool UTD REMNANTS ONLY

Drawers, Cotton N

Leggins, Wool UTD REMNANTS ONLY  
(Note unusual lacing)

Socks, Cotton UTD REMNANTS ONLY

\*Shoes (type) SERVICE (RIGHT ONLY) 9 1/2 EE

Overshoes N

Web Equipment (Type) PISTOL BELT UTD

(Other item) FIRST AID PACKET MARKED "P7942"

(Other item) CHAIN WITH RELIGIOUS MEDALS IN ENVELOPE ATTACHED.

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

6. Chevrons or Insignia N  
(type & location : shirt, jacket, coat, helmet)

Shoulder Patch N

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

GROUND FORCE

8. Description of Remains :

Age UTD Height UTD 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, pocks, freckles)

Build UTD  
(large, fat, thin, muscular)

Hair BROWN, SHORT (SMALL PORTION OF SCALP ONLY; BADLY DECOMPOSED)  
(color, length, quantity, curly, wavy, straight, whorls, or definite parting).

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

Sideburns ..... UTD ..... Mustache ..... UTD ..... Board 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 **WHITE, LARGE, CLOSE.**  
 (white, size, unevenness, spacing, noticeable crowns, fillings, extract).

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

Jaw ..... UTD ..... Circumference of head in inches ..... **20 INCHES**  
 (large, small, normal) (hat band)

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

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

..... UTD  
 (extent and quantity of hair)

Hands ..... UTD

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

..... UTD  
 (Unusual characteristics of fingernails)

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

Back ..... UTD ..... aist ..... UTD  
 (quantity & extent of hair) (size of navel, appendectomy, amount)

..... UTD ..... Circumcision ..... UTD Pubic hair ..... UTD  
 (quantity & color of hair) (yes-no) (color)

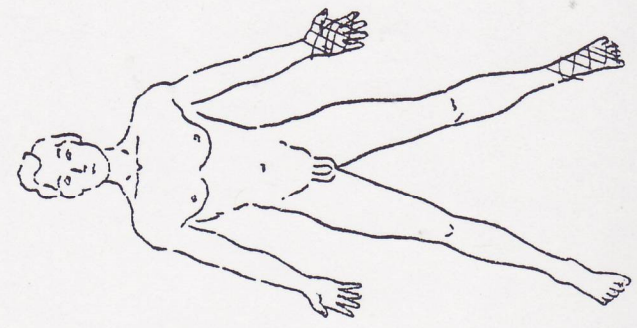
Hernioplasty ..... UTD  
 (yes-no ; location)

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 :



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

If not, explain BODY DECOMPOSED

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

12. Remarks : SEE REPORTS ON THREE OTHER BODIES FOUND IN SAME FIELD OF MINES: UNKNOWN # X-6021; KEITH KELLER; and FIDEL FLORES.

BELIEVE ALL THREE ABOVE SOLDIERS TO BE FROM 38th ARMD INF BN.

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.

*Howard E. Metzbower*  
Officer's Name  
HOWARD E. METZBOWER

2nd Lt. Rank Service INF

3049 QM G. R. C.  
Organization

# TOOTH CHART

8 APRIL 1946

UNKNOWN X-6020 Date  
UNK

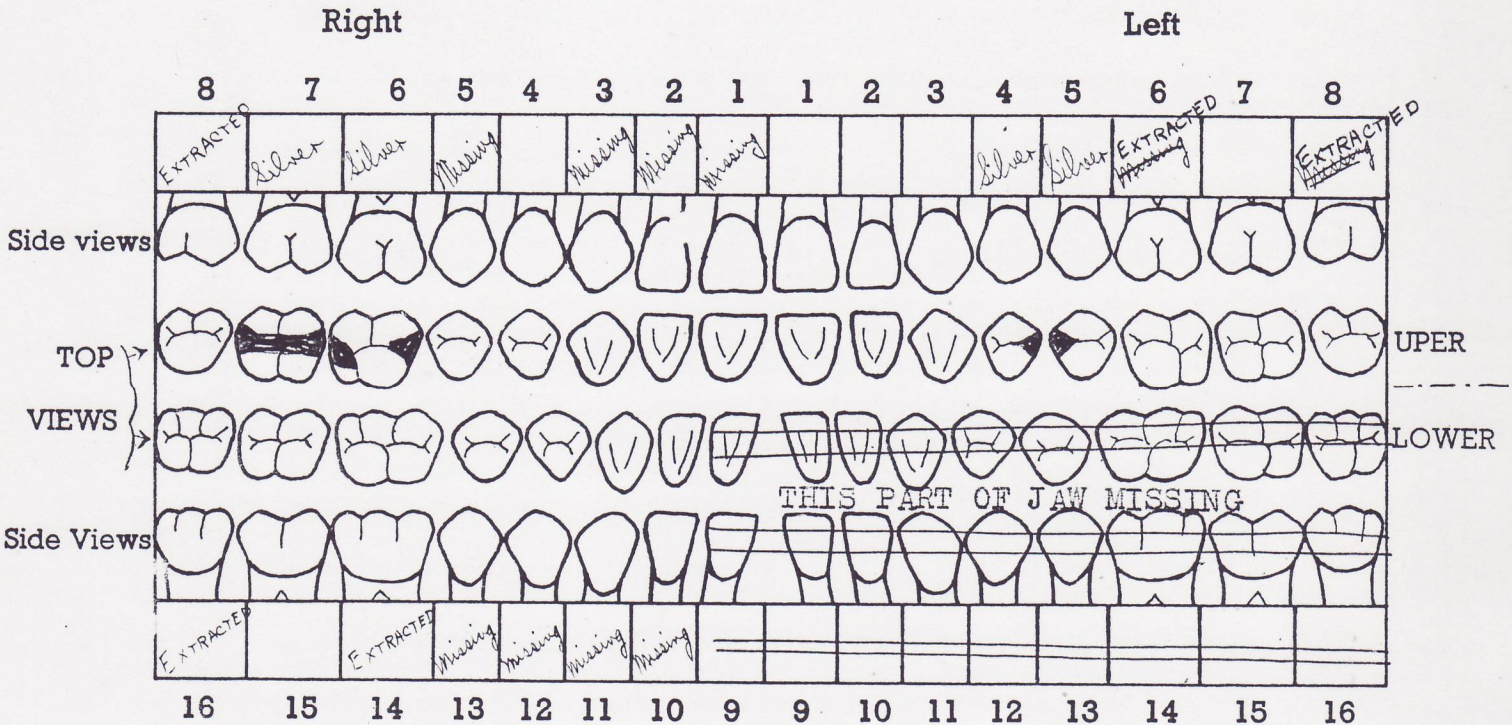
---

Last Name UNK First UNK Initial UNK Rank UNK Serial No. UNK

---

SILLEGNY (MOSELLE) FRANCE Unit EST. SEPT. 1944 Organization MULTIPLE WOUNDS

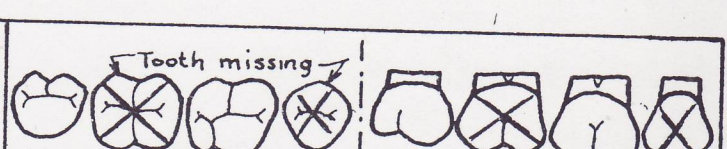
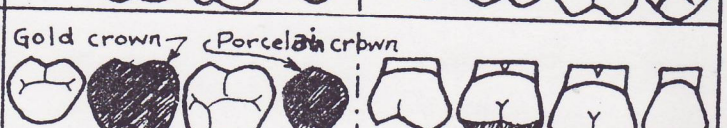


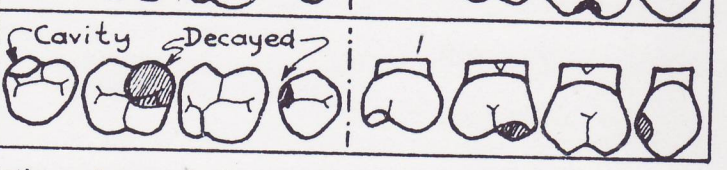
Place of Death Date of Death Cause of Death



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

*St. H. Hauck, Col. 3049 AM SRC*  
 Signature of Officer or other person who prepared Tooth chart

*Howard E. McPherson 2nd Lt Inf*  
 Verified by G. R. S. Officer

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

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

**ADDITIONAL SPACE FOR FURTHER REMARKS**

REGISTER OF DENTAL PATIENTS

*TMC*

(1) SURNAME: **Klosin, Harry (NMI)** (2) CHRISTIAN NAME: **12024013** *4*  
 (3) RANK: **Pvt** (4) COMPANY: **Hq Co.** (5) REGIMENT OR STAFF CORPS: **JBA**  
 (6) AGE YEARS: **22** (7) RACE: **W** (8) NATIVITY: **N. Y.** (9) SERVICE YEAR: **2 6/12**

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, RESULTS, ETC.	(11) DATES AND NATURE OF OPERATIONS	(12) RESULTS AND COMMENTS
11 R1 m	8-5-43 <i>E. Brown</i>	<i>HR.</i>
11 R1 m	8-7-43 <i>O. Brown</i>	<i>MT</i>
11 R2 m	8-7-43 <i>O. Brown</i>	<i>MT</i>
11 R1 m	8-10-43 OS	<i>HR</i>
11 R1 m	8-10-43 OS	<i>HR</i>
11 R1 m	8-10-43 OS	<i>HR</i>
11 R15 o	8-14-43 A	<i>MT</i>
11 R15 f	8-14-43 A	<i>MT</i>
11 R1 d	8-19-43 OS	<i>MT</i>

\*REPORT OF DENTAL SURVEY

UPPER TEETH

Right													Left				
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8		
X	O	O	O								O	O	O	X	O	X	

LOWER TEETH

Right																Left					
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16						
X		X	O										O	X	O	O					

CLASS Ic

Occlusion good Calculus: Slight, Medium, Heavy  
 Periodontoclasia No  
 Dental foci suspected: Yes No  
 Other conditions \_\_\_\_\_

Dep. fil R. 6

Date 3/3/44, 19\_\_

H. L. Bunnis D.C.  
 Dental Corps U. S. A.

\*Restorable carious teeth by O  
 Nonrestorable carious teeth by /  
 Missing natural teeth by X

Teeth replaced by denture  
 (horizontal line) 

X	X	X
---	---	---

Teeth replaced by fixed bridge  
 (oval to include abutments) 

O	X	O
---	---	---

29 45

1202/41

REGISTER OF DENTAL PATIENTS

Div. Dental Clinic

*TAG*

(1) SURNAME (2) CHRISTIAN NAME

Blosin, Harry (M)

*3*

(3) RANK (4) COMPANY (5) REGIMENT OR STAFF CORPS

Pvt H., 399 Inf.

(6) AGE YEARS (7) RACE (8) NATIVITY (9) SERVICE YEARS

22 " N.Y. 3

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.	(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS	(12) RESULTS AND REMARKS
Routine	Exam	FTN Ic H.L. Burton
Car. L-4-D0	OA	
Car. R-12-D0	OA	
Car. K-7-0	OK	
Car. L-2-B	S	
Car. R-6-M0	OA	
Car. R-5-U0	OA	
Car. L-13-U0	OA	
Car. L-15-0	OA	
Car. L-16-0	A	
Car. L-7-M	A	
Car. L-5-M0	OK	10/4 J.B. Bolton

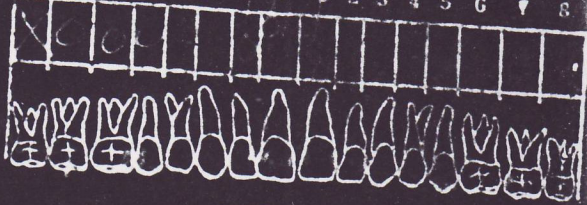
*Exam Done*

*H. Blosin*

REPORT OF DENTAL SURVEY

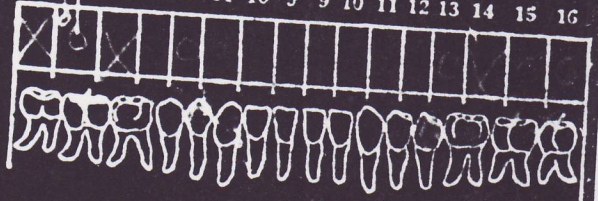
UPPER TEETH

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



LOWER TEETH

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



CLASS I

Occlusion I: Calculus: Slight, Medium, Heavy

Periodontoclasia I

Dental foci suspected: Yes No

Other conditions None

Date Aug 8, 1943

H. P. Reed  
Dental Corps, U. S. A.

\*Restorable carious teeth by O  
Nonrestorable carious teeth by /  
Missing natural teeth by X

Teeth replaced by denture  
(horizontal line)



Teeth replaced by fixed bridge  
(oval to include abutments)



HH

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

RFE 200.2

Date \_\_\_\_\_

SUBJECT: Reprocessing of Remains.

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

The remains of I-6020  
interred in Plot 00, Row II, Grave 124, USMC St-Avoid  
France, have been reprocessed and the information  
not previously forwarded to your Headquarters is herewith submitted.

Raincoat : Remnants of (size medium)

Shirt, wool OD : Remnants of

Undershirt, wool : Remnants of

Trousers, Wool OD : Remnants of

Drawers, wool : Remnants of

Shoes : one (type) Service (size 9 ½ E)

Scabbard for French knife, Canteen cup marked : "ADELL"

Est. height : 5' 11 5/8"

Hair : Medium brown, 1 ½" long

FOR THE COMMANDING GENERAL :

2 Incls : 1. Skeletal Chart  
1. Tooth chart

BERNARD E. CARROLL  
WOJG AUS  
Actg Asst Adj Gen.

20 m

## IDENTIFICATION CHECK LIST

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

Proc. by: *L. R. Feindt*  
*C. O. Rice*  
*R. J. Miller*

                      
 E.O. # 707

Clerk: *A. J. Richardson*

Unknown X 6020  
 Cemetery St. Avold France  
 Plot 00 Row 11 Grave 24

1. Date reprocessed  
 Arrived at cemetery 13 Apr. '48  
(Hour) (Date)
2. Place of death \_\_\_\_\_  
(Name of closest town) (Coordinates and letter Prefix, maps)  
(Sheet, scale and serials used)
3. Remains reprocessed  
~~recovered or identified~~ by Mobile Team 1, I.S.  
(Name and organization)
4. Evacuated to Cemetery by \_\_\_\_\_  
(Name and organization)
5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

Item	Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear	<u>UTD</u>		
	<small>(Type)</small>		
Raincoat	<u>Remnants of</u>	<u>(Size medium)</u>	
Overcoat			
Jacket, Field			
Jacket, Combat	<u>UTD</u>		
Mackinaw			
Sweater			
Jacket, HBT			
* Shirt, Wool OD	<u>Remnants of</u>		
* Undershirt, Wool	<u>Remnants of</u>		
Undershirt, Cotton			
Trousers, HBT	<u>UTD</u>		
* Trousers, Wool OD	<u>Remnants of</u>		

*21 m*

*Pistol*  
 Belt, ~~new~~ *Remnants of*

Drawers, wool *Remnants of*

Drawers, cotton

Leggings, wool *UTD*

Socks, cotton

\* Shoes *One* (type) *Service (size 9 1/2 E)*

Overshoes *UTD*

Web Equipment (type)

(Other item) *Scabbard for trench knife, Canteen cup*

(Other item) *marked: "ADELL"*

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

Chevrons or Insignia *UTD* (Type & location; shirt, jacket, coat, helmet)

Shoulder Patch

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

6. Description of Remains:

<i>L. Humerus</i>	<i>35.7</i>	<i>L. Femur</i>	<i>49.2</i>
<i>L. Radius</i>	<i>26.4</i>	<i>L. Tibia</i>	<i>41.1</i>
<i>L. Ulna</i>	<i>27.7</i>	<i>L. Fibula</i>	<i>39.8</i>

Age *UTD* Height *Est 5'11-5/8"* Weight *UTD* Description of wounds *UTD*

Bandages or dressings *none* Scars *UTD*  
 (Length, width, location)

Tattoos  
 (Number, location — illustrate on separate page)

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

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

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

Build (Large, fat, thin, muscular)

Hair *Medium brown, 1 1/2" long*  
 (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)

32 M

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

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

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

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

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

Chin \_\_\_\_\_  
(Prominent, receding, pointed, dimples, double)

Jaw \_\_\_\_\_ Circumference of head in *cm.* \_\_\_\_\_  
(Large, small, normal) (Hat band) *(No inch tape measure available) 52 cm.*

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

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

Hands \_\_\_\_\_

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

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

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

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

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

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

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

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

Evidence of healed fractures \_\_\_\_\_ *None* \_\_\_\_\_  
(Nose, arms, legs, etc.)

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

33 M

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

If not, explain Fingers missing

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

9. Remarks: Remains received in skeletal form with small amt. of  
viscous flesh in last stage of decomposition; clothing unmarked,  
found partly on body, partly in debris. teeth found in debris;  
skull disarticulated. Report of Burial found; no IRS tag; Est.  
wt. of reprocessed remains: 20 lbs. Est. ht. - 5'11-5/8"  
No evidence of old healed fractures or amputations.

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.

CARL O. RICE  
(Officer's Name)

SP6 AGRC  
Rank Service

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

34<sup>m</sup>

Albert S. Richardson

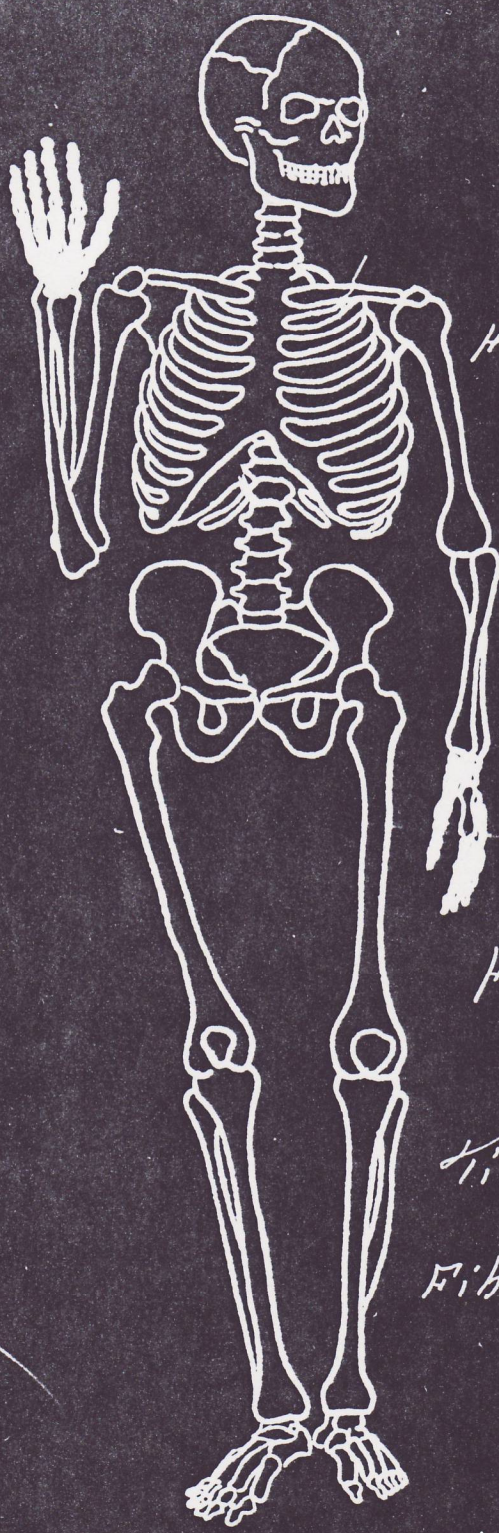
Plot 00 X-6020

# SKELETAL CHART

Row 11  
Grave 124  
St. Avoild Cem.

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

13 April 1948



Humerus 35.7

Radius 26.4

Ulna 27.7

Femur 49.2

Tibia 41.1

Fibula 39.8

CHART "A"

35<sup>m</sup>

Est. Height 5' 11 5/8"

C.O.R.

# TOOTH CHART

PLOT: 00  
ROW: 11  
GRAVE: 124

E.O. # 707

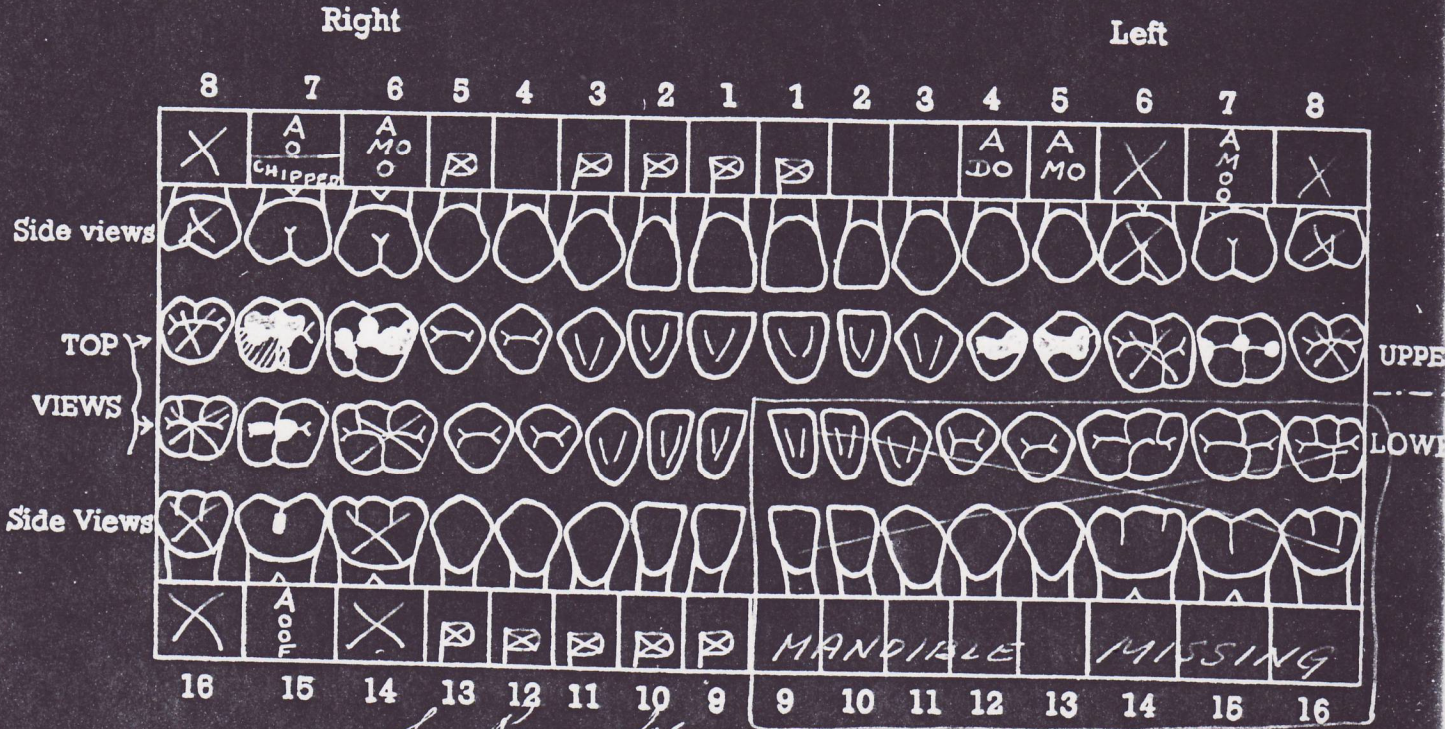
USMC - ST. AVILA

13-APRIL-48

Date

X-6020

Last Name	First	Initial	Grade	Serial No.
Unit			Organisation	
Place of Death		Date of Death		Cause of Death



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

*Insufficient space for remarks*

*Quar. J. Formo*

*SP # 7 DAC*  
Signature of Officer or other person who prepared Tooth chart

*See Remarks*

Verified by G. R. C. Officer

ET FORM 1-22 (29 AUG. 46)  
(OLD GRAVE REGISTRATION FORM I-A)

*26 M*

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



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



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



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



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



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

**ADDITIONAL SPACE FOR FURTHER REMARKS**

*P* - POSTHUMOUSLY MISSING  
 SPACE: L-5-7-7MM.  
 R-12-15-5MM.

COLOR - FULL IVORY  
 SIZE - AVERAGE  
 ALIGNMENT - GOOD

MAXILLA

- R* - 47 SLIGHT DISTAL ROTATION
- R* - 27 SLIGHT FACIAL VERSION
- R* - 6 = FACIAL VERSION
- R* - 47 - LINGUAL VERSION
- R* - 12 = MESIAL VERSION.

MANDIBLE

*R* - 12 - MESIAL VERSION

37<sup>m</sup>

293  
AG 201 Klosin, Harry  
12024013 (29 Dec 49)

WLN/hgb/10676/11109

29 December 1949

MEMORANDUM FOR RECORD:

SUBJECT: Review of Circumstances Surrounding the Disappearance of  
Private Harry Klosin, 12024013, Infantry.

1. Private Harry Klosin, 12024013, Infantry, a member of Company C, 38th Armored Infantry Battalion was reported missing in action, not in flying or jump pay status, in France on 19 September 1944 by ETO Shipment Number 214 and presumed dead as of 20 September 1945 under the provisions of Section 5 Missing Persons Act (SR & D Case No. 4102).

2. A Missing Report filed in AG files of Private Harry Klosin, 12024013, shows that he departed with his company on 19 September 1944 from a point one and one quarter miles east of Marieulles, France on a mission to support tanks in an attack on a fortified position. The intended destination was Sillegny, France. The report contains the following resume of circumstances surrounding the disappearance of this soldier:

"Leading element crossed L.D. at 0200. This man as part of the supporting platoon of Infantry was last seen at the L.D. Because of heavy enemy fire and small arms fire and also because of darkness proper control was impossible. This platoon was supporting the right flank of the attack. When the Company was withdrawn, and a roll call made, this man was not present."

The report concludes with the remark:

"The tactical situation would not permit a search to be made".

3. The captured German records nor the files of Memorial Division, Office of the Quartermaster General do not contain any information relative to Private Klosin.

4. The subject person was a member of Company C, 38th Armored Infantry Battalion which was on a mission to support tanks in an attack on fortified positions near Sillegny, France on 19 September 1944. He was seen after leaving the line of departure about 0200 hours. Because of the heavy enemy fire and darkness Private Klosin was not missed until his Company was withdrawn and mustered. Search of the area was not made because of the tactical situation. The German records contain no information of him. Nothing has been seen or heard of him since.

JAN - 3 1950

*Jones*

AG 201 Klosin, Harry  
12024013 (29 Dec 49)

5. It is, therefore, concluded that the information of record in the Department of the Army, at this time, does not conclusively establish the place, date and fact of death pursuant to the provisions of Section 9, of the Missing Persons Act and the issuance of an official report of death is not warranted.

Walter L. Nalls  
Investigator

CONCUR:

N. B. STARR  
Captain, AGD  
Asst. OIC, Det and Review Unit  
Casualty Section  
Personnel Actions Branch, AGO

Copy For:  
OQMG, Memorial Division



293 Klosin, Harry 12024013

354

1949 AUG 25 16 39 A

FUK 21

FPA046

RR UEPC

DE UEPC 17

R 251225Z

FM HQ AGRC PARIS FRANCE

TO OQMG WASHDC

GRAVES GRNC

AGRC REF FIVE SIX FOUR ZERO

ATTN MEMORIAL DIVISION

REQ ALL AVAIL DENTAL INFO FOR PVT HARRY KLOSIN CMA ONE TWO ZERO TWO

FOUR ZERO ONE THREE PD END AGRRE PECKHAM

CFN HARRY KLOSIN

25/1 338Z AUG

*H9 Agre*

MSG NO *5640*

D.F.G. *251225Z*

AGRC HQ *QMC*

MSG NO. *78096*

8479

LEGATION OF THE ARMY  
STAFF COMMUNICATIONS OFFICE  
CCT TIME  
17 10  
30 AUG 25

78096

1949 AUG 25 19 03

DEPARTMENT OF THE ARMY  
STAFF COMMUNICATIONS OFFICE  
01 03 TIME

293

RECEIVED  
AGRC  
25/1 338Z AUG

RECEIVED  
AGRC  
AUG 26 1949  
8:54 AM  
TEL & CAB SECTION  
O.D.M.S.

File

G. W. ROGERS  
Capt., QMC  
Identification Branch

E

RECORD ATTACHED

AIRMAIL

QMOMS 293  
Klosin, Harry  
SN 12 024 013

19 September 1949

SUBJECT: Additional Information

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

1. Reference is made to your radio AGRC 5640 dated 25 August 1949.
2. WD AGO Form 21 dated 21 March 1941 for Pvt. Harry Klosin, 12024013 shows teeth missing R-8, 14, 16, L-6, 8, 14, 16. Two (2) Forms 79 attached.

FOR THE QUARTERMASTER GENERAL:

2 Incls  
Incls 1-2 Photo cys Forms 79

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

*SMR*  
GWR

TEC  
*[Signature]*

SEP 19 12 33 PM '49  
NO. 1  
MAIL & RECORDS BRANCH

BRANCH  
MEMORIAL DIVISION  
SEP 19 1949  
700

AIRMAIL

**\*REPORT OF DENTAL SURVEY**

**UPPER TEETH**

Right							Left							
8	7	6	5	4	3	2	1	2	3	4	5	6	7	8
X	O	O											O	X

**LOWER TEETH**

Right							Left							
16	15	14	13	12	11	10	9	10	11	12	13	14	15	16
X	X												O	O

CLASS II

Occlusion .....: Calculus: Slight, Medium, Heavy

Periodontoclasia None

Dental foci suspected: Yes No

Other conditions .....

Date ....., 1943

Dental Corps, U. S. A.

\*Restorable carious teeth by O  
 Nonrestorable carious teeth by /  
 Missing natural teeth by X

Teeth replaced by denture  
 (horizontal line)

X	X	X
---	---	---

Teeth replaced by fixed bridge  
 (oval to include abutments)

O	X	O
---	---	---

HH

REGISTER OF DENTAL PATIENTS AT

*TNS*

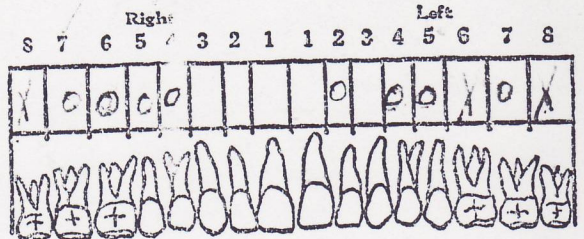
(1) SURNAME		(2) CHRISTIAN NAME	
Klosin, Harry (NMI)		12024013 <i>4</i>	
(3) RANK	(4) COMPANY	(5) REGIMENT OR STAFF CORPS	
Pvt	Hq Co.	JBA	
(6) AGE YEARS	(7) RACE	(8) NATIVITY	(9) SERVICE, YEARS
22	W	N. Y.	2 6/12

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.	(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS	(12) RESULTS AND REMARKS
11 L1 m	8-5-43 <i>E</i> <i>clean</i>	<i>H.R.</i>
11 L1 m	8-7-43 O:TT	MT
11 R1 m	8-7-43 O:TT	MT
11 R2 m	8-10-43 OS	HR
11 R1 m	8-10-43 OS	HR
11 L1 m	8-10-43 OS	HR
11 R15 o	8-11-43 A	MT
11 R15 f	8-11-43 A	MT
11 R1 d	8-19-43 OS	MT

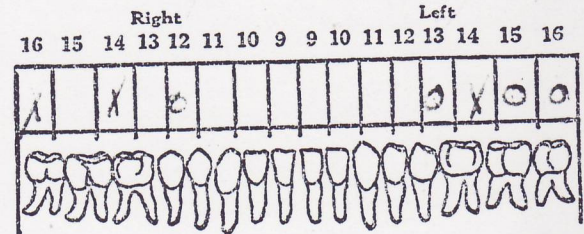
Dental Corps, U. S. A.

**\*REPORT OF DENTAL SURVEY**

**UPPER TEETH**



**LOWER TEETH**



CLASS I.C

Occlusion normal Calculus: Slight, Medium, Heavy

Periodontoclasia 20

Dental foci suspected: Yes No

Other conditions \_\_\_\_\_

*See pic. R. 6*

Date 3/3/44, 19\_\_\_\_

H. L. Burris  
Dental Corps, U. S. A.

\*Restorable carious teeth by O  
Nonrestorable carious teeth by /  
Missing natural teeth by X

Teeth replaced by denture (horizontal line) 

X	X	X
---	---	---

Teeth replaced by fixed bridge (oval to include abutments) 

○	X	○
---	---	---

*H.S.* 16-20822

12024013

REGISTER OF DENTAL PATIENTS AT

Div. Dental Clinic

*100*

(1) SURNAME	(2) CHRISTIAN NAME		
Klosin, Harry (NMI)	3		
(3) RANK	(4) COMPANY	(5) REGIMENT OR STAFF CORPS	
Pvt	H.,	399 Inf.	
(6) AGE, YEARS	(7) RACE	(8) NATIVITY	(9) SERVICE, YEARS
22	"	N. Y.	3

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.	(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS	(12) RESULTS AND REMARKS
Routine	Exam	PTN I c H. L. Dennis
Car. L-4-JO	OA	
Car. R-12-JO	OA	
Car. R-7-O	OA	
Car. L-2-D	S	
Car. R-6-MO	OA	
Car. R-5-MO	OA	
Car. L-13-MO	OA	
Car. L-15-O	OA	
Car. L-16-O	A	
Car. L-7-M	A	
Car. L-5-MO	OA	3 - 1e/4 U.S. Golden

*H. L. Dennis, M.D.*  
Dental Corps, U. S. A.

3

293 Klosin, Harry 12024103

HARRY KLOSIN 12024013

WD AGO FORM 21 DTD 21 MAR 41 SHOWS TEETH MISSING R 8 14 16 L 6 8 14 16  
TWO FORM 79 BEING SENT TODAY

8477

FILE

SEP 15 1949

U. S. DEPARTMENT OF THE ARMY  
Capt. Harry W. Klosin  
1st Lt. Harry W. Klosin

10780

# IDENTIFICATION SECTION MEMORIAL DIVISION

## IDENTIFICATION DATA

LAST NAME - FIRST NAME - MIDDLE INITIAL

4115 SW Harvey

ARMY SERIAL NUMBER

12-54103

GRADE

Pvt

HEIGHT

5'6"

WEIGHT

171

COLOR - EYES

Bl.

COLOR - HAIR

Br

SHOE SIZE

10E

DATE OF DEATH

Jan 44

LAST ORGANIZATION TO WHICH ATTACHED OR ASSIGNED (Give complete designation)

Co C 324th Armd Inf Bn

PLACE OF DEATH OR PLACE LAST SEEN IF MIA

St. Helier, France

LIST ALL CAMPS IN WHICH STATIONED IN U.S. PRIOR TO SERVICE OVERSEAS, WITH INCLUSIVE DATES AT EACH.

STATION

DATES

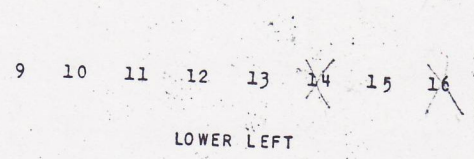
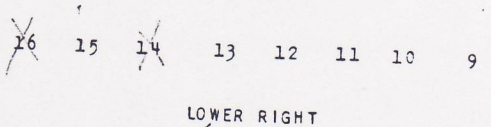
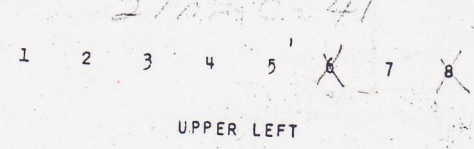
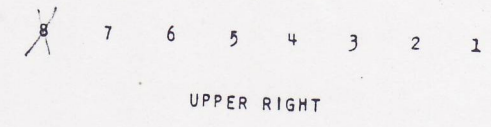
Ft. Stoen, N.Y.  
Ft. Bragg, Tenn.  
Ft. Campbell, Mo.

March 41 to May 41  
Nov 43 to June 44  
June 44 to July 44

FRACTURES AND/OR BREAKS

TATTOOS AND/OR BIRTH MARKS

### DENTAL CHART



X - EXTRACTED

0 - CARIOUS

1 - CARIOUS NON-RESTORABLE

293 FILE

DATA ON REMAINS NOT YET RECD... RED OR IDENTIFIED

NAME (Last, First, Middle Initial)

GRADE

PRESENT SERIAL NUMBER

*KLOSIN, HARRY*

*POVT.*

*12024013*

ORGANIZATION

RACE

CREED

FORMER SERIAL NUMBER (If applicable)

*101st ARMD. INF. DIV.  
38th ARMD. DIV.*

*WHITE CATHOLIC*

DATE OF DEATH/MIA

CAUSE OF DEATH

PLACE OF DEATH OR PLACE LAST SEEN IF MIA

DATE OF FOD

*KILLED IN ACTION*

*SILLEGNY, FRANCE*

HEIGHT

WEIGHT

COLOR EYES

COLOR HAIR

SHOE SIZE

*6'*

*171*

*BLUE*

*BROWN*

*10E*

DENTAL CHART

*31 MAR 41*

UPPER RIGHT

UPPER LEFT

*X*  
8 7 6 5 4 3 2 1

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

LOWER RIGHT

LOWER LEFT

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

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

X = Extracted

O = Carious

1 = Carious Non-Restorable

FRACTURES AND/OR BREAKS

TATTOOS AND/OR BIRTHMARK

ADDITIONAL INFORMATION

**FILE**

JUN 9 1948

E. J. Sullivan, Col. M., CW  
IDENTIFICATION DIVISION



92  
19 OCT 1948

HEADQUARTERS  
AMERICAN REGISTRATION COMMAND  
EUROPEAN AREA  
APO 58 US ARMY

IDENTIFICATION  
RECOMMENDED

KLOSI, Harry (Name) Pvt. (Rank) 12024013 (S.S.N.)

previously buried as Unknown X - 6920, UEMC ST. AVOLD, France  
Identification accepted in accordance with Letter, File G.O-S 293.9 (27 Mar 47)  
D-M, War Dept., T.O. 9 April 47, subject: Establishment of Boards of Review for  
Identification of Unknown Dead Overseas, by the following members of the Board  
of Review, established by Par. 5, SO # 16, Hq, G.R.C., dated 3 Feb 49,  
amendment, Par 2, SO # 32, dated 18 Mar 1949, Hq, G.R.C., and SO # 43, dated  
19 April 1949, Hq, G.R.C.

*[Signature]*  
Col. H.P. HARRY, O-12589 CMC

*[Signature]*  
Lt. Col. E.D. FRUWANNITY, O-359598 CMC

Major Roger BERGER, O-251736 ORD Captain Jack C. HAYES, O-1577297 CMC

Captain E.F. PRICE Jr., O-1588236 CMC APPROVED 30 Jan 50  
*[Signature]*  
1/Lt. Edward E. FOUT, O-1594512 CE

T. M. METZ, Lt. Col. OMC  
Chief, Identification Br  
Memorial Division, OOMAF

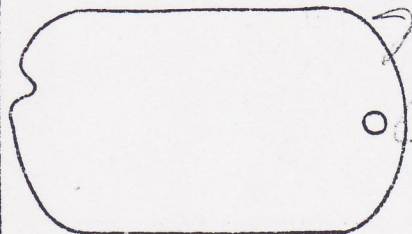
RESTRICTED

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  
9 April 1946

Imprint Identification Tag If Possible.  
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) <del>UNKNOWN X-6020</del> KLOSIN, Harry		SERIAL No. UNK 12024013
GRADE UNK Pfc.	ORGANIZATION UNK	BRANCH OF SERVICE GROUND FORCE
RACE WHITE	RELIGION UNK	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH SILLEGNY (MOSELLE) FRANCE	CAUSE OF DEATH MULTIPLE WOUNDS	DATE OF DEATH EST. SEPTEMBER 1944
--	-----------------------------------	---

EMERGENCY ADDRESSEE (Name, relationship, and address)  
UNK

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) SEE REMARKS ON REVERSE
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) YES	Ident. by Field, accepted by Col. Metz 30 January 1950

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  
NONE

*See B/R dtd 23 Aug 49*

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 (Q260584) ST. AVOLD (MOSELLE) FRANCE

DATE OF BURIAL 9 April 1946	HOUR 1530	BURIED IN (Shroud, blanket, or name of other) CASKET	TYPE OF GRAVE MARKER TEMP WOODEN CROSS	PLOT No. 00	ROW No. 11	GRAVE No. 124
--------------------------------	--------------	---	--	----------------	---------------	------------------

WAS THIS A REBURIAL? (Yes or no) YES	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE SILLEGNY (MOSELLE) FRANCE: MAP OF EUROPE 1:200,000; SHEET 57; VERDUN WISSEMBOURG COORDS: U-852445	PLOT No. ISOLATED GRAVE	ROW No.	GRAVE No.
--	--	----------------------------	---------	-----------

TYPE OF RELIGIOUS CEREMONY GENERAL SERVICE	PERSON CONDUCTING BURIAL RITES Ch. Lynn Wendland, Capt.	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY ONE WD QMC FORM 1042 BURIED IN BOTTLE WITH BODY
---	--	--

IDENTIFICATION TAG BURIED WITH BODY (Yes or no) No	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes, embossed plate	ONE WD QMC FORM 1042 BURIED IN BOTTLE ONE FOOT BELOW MARKER.
--	---	---

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) Unknown X-6021	RANK Unknown	SERIAL No. Unknown	ORGANIZATION Ground Force	GRAVE No. 123
--	-----------------	-----------------------	------------------------------	------------------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) Flores, Fidel	RANK Pfc.	SERIAL No. 38156148	ORGANIZATION 38th Arnd. Inf. Bn.	GRAVE No. 125
--	--------------	------------------------	--	------------------

SIGNATURE OF PERSON PREPARING REPORT <i>W. H. Hauck</i> W. H. HAUCK, Cpl, 37588082	SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>Ralph W. Sleator</i> Ralph W. Sleator Major Inf.
--	--

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

**RESTRICTED**

**Section 5. - 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.


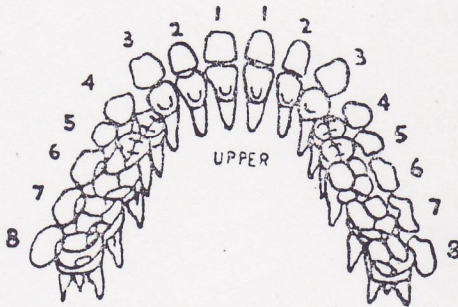
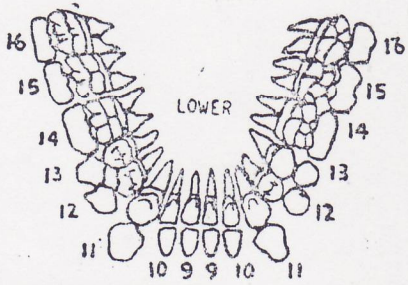




(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
UTD	UTD	UTD	BROWN	UTD

WEAPON AND SERIAL No. <b>NONE</b>	LAUNDRY MARKS M 3707 P 7942	WHERE BODY WAS BURIED OR FOUND <b>SILLEGNY (MOSELLE) REMAINS ABOVE GROUND IN a MINE FIELD</b>
--------------------------------------	-----------------------------------	--

OTHER IDENTIFICATION CLUES

**CHAIN WITH RELIGIOUS MEDALS**

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


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



**REMARKS:**

SEE REPORTS ON THREE (3) OTHER BODIES FOUND IN SAME FIELD AS PER MAP ATTACHED: BODY #5, KEITH KELLER, BODY #6 UNKNOWN X-6201, BODY #8 FIDEL FLORES.

**RESTRICTED**

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		<b>REPORT OF INTERMENT</b> (AR 30-1810 and AR 30-1815)			DATE OF REPORT <b>9 April 1946</b>	
Imprint Identification Tag If Possible. DO NOT TYPE  	Section 1.—IDENTIFICATION.					
	NAME (Last, first, middle initial) <del>UNKNOWN X-6020</del> <b>KLOSIN, Harry</b>			SERIAL No. <del>UNK</del> <b>12024013</b>		
	GRADE <b>UNK Pvtg.</b>	ORGANIZATION <b>UNK</b>		BRANCH OF SERVICE <b>GROUND FORCE</b>		
	RACE <b>WHITE</b>	RELIGION <b>UNK</b>	IF OTHER THAN U. S. DEAD. GIVE NAME OF COUNTRY			
PLACE OF DEATH <b>SILLEGNY (MOSELLE) FRANCE</b>	CAUSE OF DEATH <b>MULTIPLE WOUNDS</b>			DATE OF DEATH <b>EST. SEPTEMBER 1944</b>		
EMERGENCY ADDRESSEE (Name, relationship, and address)  <b>UNK</b>						
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) <b>NONE</b>		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)  <b>SEE REMARKS ON REVERSE</b>				
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) <b>YES</b>		Ident. by Field, accepted by Col. Metz 30 January 1950				
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  <b>NONE</b>						
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.						
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY <b>U.S. MILITARY CEMETERY (260384) ST. AVOLD (MOSELLE) FRANCE</b>						
DATE OF BURIAL <b>9 April 1946</b>	HOUR <b>1530</b>	BURIED IN (Shroud, blanket, or name of other) <b>CASKET</b>	TYPE OF GRAVE MARKER <b>WOODEN CROSS</b>	PLOT No. <b>00</b>	ROW No. <b>11</b>	GRAVE No. <b>124</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>SILLEGNY (MOSELLE) FRANCE; MAP OF EUROPE 1:200,000; SHEET 57; VERLON WISSEMBOURG COORDS: U-852443</b>				ISOLATED GRAVE	GRAVE No.
TYPE OF RELIGIOUS CEREMONY <b>PERMANENT SERVICE</b>	PERSON CONDUCTING BURIAL RITES <b>Ch. Lynn Wendland, Capt.</b>	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY <b>ONE WD QMC FORM 1042 BURIED IN BOTTLE WITH BODY</b>				
IDENTIFICATION TAG BURIED WITH <b>No</b>	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) <b>Yes, embossed plate</b>	<b>ONE WD QMC FORM 1042 BURIED IN BOTTLE ONE FOOT BELOW MARKER.</b>				
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) <b>Unknown X-6021</b>		RANK <b>Unknown</b>	SERIAL No. <b>Unknown</b>	ORGANIZATION <b>Ground Force</b>	GRAVE No. <b>123</b>	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) <b>Flores, Fidel</b>		RANK <b>Pfc.</b>	SERIAL No. <b>38156148</b>	ORGANIZATION <b>39th. Assn. Inf. Bn.</b>	GRAVE No. <b>125</b>	
SIGNATURE OF PERSON PREPARING REPORT <b>W. H. BAUCK, Cpl, 37588082</b>			SIGNATURE OF THEATRE VERIFICATION REPORT <b>Ralph W. Sietor Major Inf.</b>			
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**

**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.


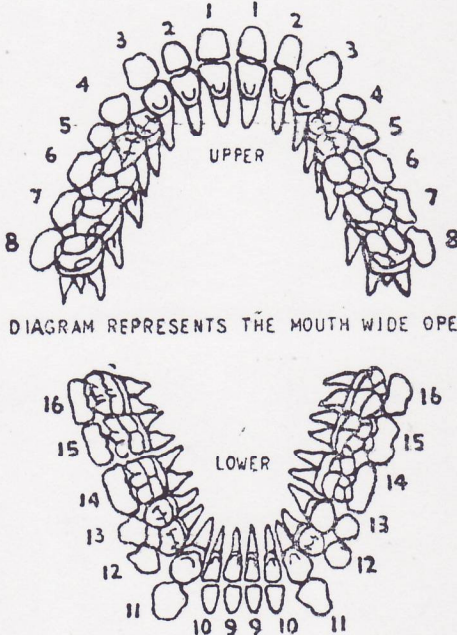




(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
UTD	UTD	UTD	BROWN	UTD

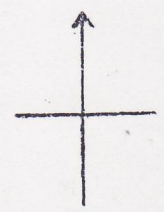
WEAPON AND SERIAL No. <b>NONE</b>	LAUNDRY MARKS <b>M 3707 P 7942</b>	WHERE BODY WAS BURIED OR FOUND <b>SILLEGWY (ROSELLE) REMAINS ABOVE GROUND IN A WINE FIELD</b>
--------------------------------------	---	--

**OTHER IDENTIFICATION CLUES**

**CHAIN WITH RELIGIOUS MEDALS**

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

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



**REMARKS:**  
SEE REPORTS ON THREE (3) OTHER BODIES FOUND IN SAME FIELD AS PER MAP ATTACHED: BODY #5, KEITH KELLER, BODY #6 UNKNOWN K-6801, BODY #8 FIDEL FLORES.

QREG DEPT OF ARMY WASH DC

CHIEF REGISTRATION DIV  
7887 GRREG DET  
PARIS FRANCE

UNCLASSIFIED

DEFERRED

X

FRM QLCLE

FOL INDIV IDENT APPROVED CLN HARRY KLOSIN 12024013 ROBERT I ROBINSON  
33608918 ALBERT J ALEKSYN 15110333 GEORGE W COX T-60862 EDWARD L GARNER  
0690947 WILLIAM V STACY JR 11139080 PARA FOL GROUP IDENT APPROVED CLN  
FARRYLE B NATINS 0819025 AND 2

cc: Admin Sec  
Foy/noj  
RFB

RFB

TIE

UNCLASSIFIED

GRAVIS

Q CRT CAPT BARRY DET 73650  
293 - GRS European

JAN 50

D A REEMER  
CAPT QRC LEL DIV

WAR DEPARTMENT  
THE ADJUTANT GENERAL'S OFFICE  
WASHINGTON 25, D. C.

SILVIO L. BOUSQUIN  
Lt. Colonel, AGD  
OIC, Casualty Section  
PA Branch, AGO

CORRECTED FINDING OF DEATH OF MISSING PERSON

Pursuant to the provisions of Section 5 of the Act of 7 March 1942 (Public Law 490 777 Cong.) as amended, upon direction and delegation by the Secretary of War, The Adjutant General's Office, finds ~~that~~ <sup>the Army,</sup> Private Harry Klosin, Army Serial Number 12024013, Infantry, to be dead. He was officially reported as missing in action as of the 19th day of September 1944. For the purposes stated in said Act, death is presumed to have occurred on the 20th day of September, 1945.

BY ORDER OF THE SECRETARY OF WAR

*Silvio L. Bousquin*  
SILVIO L. BOUSQUIN  
Lt. Colonel, AGD  
~~ADJUTANT GENERAL~~  
OIC, CASUALTY BRANCH  
Section, PA Branch, AGO

Date Issued: 25 January 1950

SUMMARY OF INFORMATION

AREA European		FLYING STATUS No	JUMP STATUS No	LINE OF DUTY Yes	OWN MIS-CONDUCT No	ON DUTY STATUS Yes	ABSENCE AUTH'D
PREVIOUS REVIEWS None							
DATE OF BIRTH 4 May 1921	HOME ADDRESS Buffalo, New York	DATE OF ENTRY ON CURRENT ACTIVE SERVICE 21 Mar 1941		LENGTH OF SERVICE (AS OF PRESUMED DATE OF DEATH)			
		YEARS Over	MONTHS three	DAYS years			

EMERGENCY ADDRESSEE

NAME	RELATIONSHIP	ADDRESS
Mr. Joseph Klosin	Father	109 Ruhland Avenue Buffalo, New York

BENEFICIARIES

NAME	RELATIONSHIP	ADDRESS
Mrs. Louise Klosin	Mother	109 Ruhland Avenue Buffalo, New York
Mr. Joseph Klosin	Father	109 Ruhland Avenue Buffalo, New York

REMARKS

Distribution 36

Circumstances of disappearance: He disappeared following a mission to support tanks in an attack of a fortified position in the vicinity of Sillegny, France.

\*\*Corrected to show serial number as above.

**FINDING OF DEATH OF MISSING PERSON**

Pursuant to the provisions of Section 5 of the Act of 7 March 1942 (Public Law 490 77th Cong.) as amended, upon direction and delegation by The Secretary of War, The Chief, Casualty Branch, The Adjutant General's Office, finds Private Harry Klosin,

Army Serial Number 12,024,103, Infantry, *7 12 22 413*  
to be dead. He was officially reported as missing in action as of the 19th day of September 1944. For the purposes stated in said Act, death is presumed to have occurred on the 20th day of September, 1945.

BY ORDER OF THE SECRETARY OF WAR

*George F. Herbert*  
ADJUTANT GENERAL  
CHIEF, CASUALTY BRANCH

SUMMARY OF INFORMATION

AREA	FLYING STATUS	JUMP STATUS	LINE OF DUTY	OWN MIS-CONDUCT	ON DUTY STATUS	ABSENCE AUTH'D
European	No	No	Yes	No	Yes	
PREVIOUS REVIEWS						
None						
DATE OF BIRTH	HOME ADDRESS	DATE OF ENTRY ON CURRENT ACTIVE SERVICE	LENGTH OF SERVICE (AS OF PRESUMED DATE OF DEATH)			
4 May 1921	Buffalo, New York	21 Mar 1941	YEARS	MONTH	DAYS	
			Over	three		

EMERGENCY ADDRESSEE

NAME	RELATIONSHIP	ADDRESS
Mr. Joseph Klosin	Father	109 Ruhland Avenue Buffalo, New York

BENEFICIARIES

NAME	RELATIONSHIP	ADDRESS
Mrs. Louise Klosin	Mother	109 Ruhland Avenue Buffalo, New York
NAME	RELATIONSHIP	ADDRESS
Mr. Joseph Klosin	Father	109 Ruhland Avenue Buffalo, New York

REMARKS

Distribution 50

Circumstances of disappearance: He disappeared following a mission to support tanks in an attack of a fortified position in the vicinity of Sillegny, France.

*FILE*  
SEP 28 1945  
*Acc*

WAR DEPARTMENT  
THE ADJUTANT GENERAL'S OFFICE  
WASHINGTON 25, D. C.

\*SYLVIO L. BOUSQUIN  
Lt. Colonel, AGD  
OIC, Casualty Section  
PA Branch, AGO

CORRECTED FINDING OF DEATH OF MISSING PERSON

Pursuant to the provisions of Section 5 of the Act of 7 March 1942 (Public Law 490 77th Cong.) as amended, upon direction and delegation by the Secretary of War, the Chief, Casualty Branch, The Adjutant General's Office, finds ~~that the Chief~~ the Army, Private Harry Klosin, Army Serial Number 12024013, Infantry, to be dead. He was officially reported as missing in action as of the 19th day of September 1944. For the purposes stated in said Act, death is presumed to have occurred on the 20th day of September, 1945.

BY ORDER OF THE SECRETARY OF THE ARMY  
*Sylvio L. Bousquin*  
SYLVIO L. BOUSQUIN  
Lt. Colonel, AGD  
ADJUTANT GENERAL'S OFFICE  
CASUALTY SECTION  
OIC, Section, PA Branch, AGO

Date Issued: 25 January 1950

SUMMARY OF INFORMATION

AREA European		FLYING STATUS No	JUMP STATUS No	LINE OF DUTY Yes	OWN MIS-CONDUCT No	ON DUTY STATUS Yes	ABSENCE AUTH'D
PREVIOUS REVIEWS None							
DATE OF BIRTH 4 May 1931	HOME ADDRESS Buffalo, New York	DATE OF ENTRY ON CURRENT ACTIVE SERVICE 21 Mar 1941		LENGTH OF SERVICE (AS OF PRESUMED DATE OF DEATH)			
		YEARS Over	MONTHS three	DAYS years			

EMERGENCY ADDRESSEE

NAME Mr. Joseph Klosin	RELATIONSHIP Father	ADDRESS 109 Ruhland Avenue Buffalo, New York
---------------------------	------------------------	--

BENEFICIARIES

NAME Mrs. Louise Klosin	RELATIONSHIP Mother	ADDRESS 109 Ruhland Avenue Buffalo, New York
NAME Mr. Joseph Klosin	RELATIONSHIP Father	ADDRESS 109 Ruhland Avenue Buffalo, New York

REMARKS

Distribution 36

Circumstances of disappearance: He disappeared following a mission to support tanks in an attack of a fortified position in the vicinity of Sillegny, France.

Corrected to show serial number as above.

NAT  
 FILE  
 RECORDS ANNOTATED  
 DATE *22 May '50*  
 NAME *J. J. Bond*  
 R & R BR.

**WAR DEPARTMENT**  
**THE ADJUTANT GENERAL'S OFFICE**  
 WASHINGTON 25, D. C.

**REPORT OF DEATH**

DATE 15 February 1950

FULL NAME Klosin, Harry		ARMY SERIAL NUMBER 12 024 013	GRADE Private 10
HOME ADDRESS Buffalo, New York		ARM OR SERVICE Infantry	DATE OF BIRTH 4 May 1921
PLACE OF DEATH Lille, France	CAUSE OF DEATH Killed in action		DATE OF DEATH 19 Sep 1944
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 21 March 1941	LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS Over 3 years

EMERGENCY ADDRESSEE (Name, relationship, and address)

Joseph Klosin, father, 109 Hudson Avenue, Buffalo, New York

BENEFICIARY (Name, relationship, and address)

Louise Klosin, mother, same as above  
 Joseph Klosin, father, same as above

INVESTIGATION MADE		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (Specify below)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO

ADDITIONAL DATA AND/OR STATEMENT

BATTLE  NON-BATTLE

Findings of death has been issued previously under Section 9, Public Law 476, 7 March 1942, as amended, showing prescribed date of death as 20 September 1943. This report of death, based on information received since that date, is issued in accordance with Section 9 of said act, and its effect on prior payments and settlements is as prescribed in Section 9.

File  
 3 March 50  
 Jm Bowen

BY ORDER OF THE SECRETARY OF WAR

*Allen B. Major*

ADJUTANT GENERAL

FINDING OF DEATH OF MISSING PERSON

Pursuant to the provisions of Section 5 of the Act of 7 March 1942 (Public Law 490 77th Cong.) as amended, upon direction and delegation by The Secretary of War, The Chief, Casualty Branch, The Adjutant General's Office, finds Private Harry Klosin,

Army Serial Number 12,024,103, Infantry,

to be dead. He was officially reported as missing in action as of the 19th day of September 1944. For the purposes stated in said Act, death is presumed to have occurred on the 20th day of September, 1945.

BY ORDER OF THE SECRETARY OF WAR

*George F. Herbert*  
ADJUTANT GENERAL  
CHIEF, CASUALTY BRANCH

SUMMARY OF INFORMATION

AREA European		FLYING STATUS No	JUMP STATUS No	LINE OF DUTY Yes	OWN MIS-CONDUCT No	ON DUTY STATUS Yes	ABSENCE AUTH'D No
PREVIOUS REVIEWS None							
DATE OF BIRTH 4 May 1921	HOME ADDRESS Buffalo, New York	DATE OF ENTRY ON CURRENT ACTIVE SERVICE 21 Mar 1941		LENGTH OF SERVICE (AS OF PRESUMED DATE OF DEATH)			
		YEARS Over	MONTH three	DAYS 21			

EMERGENCY ADDRESSEE

NAME Mr. Joseph Klosin	RELATIONSHIP Father	ADDRESS 109 Ruhland Avenue Buffalo, New York
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BENEFICIARIES

NAME Mrs. Louise Klosin	RELATIONSHIP Mother	ADDRESS 109 Ruhland Avenue Buffalo, New York
NAME Mr. Joseph Klosin	RELATIONSHIP Father	ADDRESS 109 Ruhland Avenue Buffalo, New York

REMARKS

Distribution 50

Circumstances of disappearance: He disappeared following a mission to support tanks in an attack of a fortified position in the vicinity of Sillegny, France.

FRA ILE - HANDLE WITH CARE

WAR DEPARTMENT  
THE ADJUTANT GENERAL'S OFFICE  
WASHINGTON 25, D. C.

-BATTLE CASUALTY REPORT

NAME				SERIAL NUMBER			GRADE		ARM OR SERVICE	
KLOSIN HARRY				12024013			PVT		INF	
PLACE OF CASUALTY				DATE OF CASUALTY			FLYING OR JUMPING STAT	TYPE OF CASUALTY		SHIPME
FRANCE 9				DAY	MONTH	YEAR		MIA		2
19				SEP	44					

NAME AND ADDRESS OF EMERGENCY ADDRESSEE

THE INDIVIDUAL NAMED ABOVE DESIGNATED THE FOLLOWING PERSON AS THE ONE TO BE NOTIFIED IN CASE OF EMERGENCY, AND THE OF GRAPHIC AND LETTER NOTIFICATIONS WILL BE SENT TO THIS PERSON. THE RELATIONSHIP, IF ANY, IS SHOWN BELOW. IT SHOULD BE NOTE. PERSON IS NOT NECESSARILY THE NEXT-OF-KIN OR RELATIVE DESIGNATED TO BE PAID SIX MONTHS' PAY GRATUITY IN CASE OF DEATH

MR.-MRS.-MISS—FIRST NAME—MIDDLE INITIAL—LAST NAME			RELATIONSHIP		DATE NOTIFIED
MR JOSEPH KLOSIN			FATHER		13 OCTOBER
NO. AND NAME OF STREET—CITY—STATE					
39 ASHLAND AVENUE BUFFALO NEW YORK					

REMARKS:

CORRECTED COPY

rvh



ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED  FORM 43  AG 201 REQ

CASUALTY BRANCH FILE ATTACHED  OR CHARGED TO  DATE

PREVIOUSLY REPORTED NO  YES  (AS INDICATED BELOW):

FILE NO.	MESSAGE NO.	TYPE	DATE AND AREA	E. A. NOTIFIED

FORWARDED TO  SPEC. IDEN.  TELEGRAM  WOUNDED  LETTER  CORRES.  S. R. & D.  CERTIF.  M. & M.  NON-DEL.

REPORT NOT VERIFIED  NO FORM 43  NO CAS. BR. FILE  CHECKED BY Robinson 30 Oct 44 REVIEWED BY

THIS SPACE FOR USE OF MACHINE RECORDS BRANCH, A.G.O.

ACCT. AREA	CASUALTY STATUS	ORIGINAL CAS. DATE			MESSAGE NO.	LATEST CAS. DATE			REFERENCE AREA	CREW POS.	RESIDENCE		COMP	RACE											
		DAY	MO.	YR.		DAY	MO.	YR.			STATE	COUNTY													
34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59

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COPIES FURNISHED: SEE CASUALTY BRANCH MEMORANDUM NO. 48, 1944.

DEPARTMENT OF THE ARMY  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON 25, D. C.

In Reply Refer To QMGIF 293

2,242  
Klosin, Harry  
SN 12 024 013

2 March 1950

SUBJECT: Identification of former UNKNOWN deceased

TO: Commanding Officer  
Quartermaster Activity  
Kansas City Records Center  
Kansas City 1, Missouri  
Attn: Effects Quartermaster

1. The remains which were previously interred as UNKNOWN X - 6020  
Plot 00, Row '11, Grave 124, USMC St. Avoild, France

have been identified by a GRS Field Board of Review as those of

Pvt. Harry Klosin, 12 024 013

whose next of kin, according to the records of this Office, is

Mr. Joseph Klosin - father - 109 Ruhland Ave., Buffalo, New York

2. The identification has been approved by this Office.

BY COMMAND OF MAJOR GENERAL FELDMAN:

*J. F. Vogl*  
J. F. VOGL  
Captain, QMC  
Memorial Division

Unknown X-6020 St Avoold

FORM 1112  
JUL 45

OUT-CHARGE FORM	
FILE No. 332.3	DATE 2 Nov 1949
SUBJECT Unknown X 6020 Saint Avoold Plot 00 row 11 Grave 124	
TYPE OF CORRESPONDENCE <input type="checkbox"/> LETTER <input type="checkbox"/> MEMORANDUM <input type="checkbox"/> INDORSEMENT <input checked="" type="checkbox"/> TELEGRAM	LAST DATE 3 Nov 1949
CHARGED TO Ava Dooly	SEARCHER zrs

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

16-45010-1 U. S. GOVERNMENT PRINTING OFFICE

UNCLASSIFIED

QMDKG 959 DOOLY/ns Sta 130

021100Z

H. O. CALDWELL  
Effects Quartermaster

1 1

*stop to 332.7*

CEK 12

ECA161

EUB141

PP UECKC

DE UEPOG 65A

P 012220Z

FM OMS WASHINGTON DC

TO CC QM ACTIVITIES KC RECORDS CTR /AGG/ MO ATTN EFECTS QM  
KSC MO

UD GRNC

FORWARD PE FTR UNKNOWN X DASH SIX ZERO TWO ZERO CMA ASINEEE  
SAINT AVOLD PLOT ZERO ZERO ROW ONE ONE GRAVE ONE TWO FOUR END QSD  
265 CONLON

CFM SIX ZERO TWO ZERO ZERO ZERO ONE ONE ONE TWO FOUR 265

01/2222Z

