

1  
1/drs

Interred 30 March 1950  
L 17 67 Kinley

DISINTERMENT DIRECTIVE

PREPARED BY PHILCOM

*Care R. H. Mark*  
CARL R. H. MARK  
Cemetery Superintendent  
SECTION A -  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER  
5531 81320

DATE  
29 03 50  
DAY MONTH YEAR

NAME UNKNOWN X - 79 SERIAL NUMBER GRADE ARM RACE RELIGION

CEMETERY 4TH MARINE DIVISION CEMETERY, IWO JIMA PLOT 1 ROW 45 GRAVE 2223 DISPOSITION OF REMAINS 7701 80 CODE DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE  
UNITED STATES MILITARY CEMETERY  
FT. WM. MCKINLEY, P. I.

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

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME UNKNOWN X-79 SERIAL NUMBER GRADE DATE OF DEATH 30 March 50 DATE DISTINTERRED

IDENTIFICATION TAG ON ORGANIZATION RELIGION IDENTIFICATION VERIFIED BY PAUL R NICHOLS Embalmer NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Shelter Half CONDITION OF REMAINS Skeletal

OTHER MEANS OF IDENTIFICATION

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

REMAINS PREPARED AND PLACED IN CASKET

DATE 30 March 50 BY PAUL R NICHOLS CASKET SEALED BY PAUL R NICHOLS EMBALMER (Signature) PAUL R NICHOLS

CASKET BOXED AND MARKED DATE 30 Mar 50 BY RAYMOND H TANGUAY, Sgt., RA SHIPPING ADDRESS VERIFIED BY L. W. RICHARDSON, M/Sgt., RA

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

*L. W. Richardson*  
L. W. RICHARDSON, M/Sgt., RA

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS  
30 MAR 1950  
RE-EXAMINATION  
BRANCH  
*Janis*

## RECORD OF CUSTODIAL TRANSFER

### 1. SHIPPED

FROM <b>AGRS MAUSOLEUM</b>		TO <b>US MILITARY CEMETERY</b>	
KIND OF CONVEYANCE <b>TRUCK</b>		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Carroll Mark</i>	DATE <b>MAR 30 1950</b>

### 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

3

DISINTERMENT DIRECTIVE  
PREPARED BY PHILCOM

SECTION A —  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

5531 81320

29 03 50  
DAY MONTH YEAR

NAME: UNKNOWN I - 79  
SERIAL NUMBER: [ ] GRADE: [ ] ARM: [ ] RACE: [ ] RELIGION: [ ]

CEMETERY: 4TH MARINE DIVISION CEMETERY, IWO JIMA  
PLOT: 1 ROW: 45 GRAVE: 2223  
DISPOSITION OF REMAINS: 7701 80  
CODE DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE: UNITED STATES MILITARY CEMETERY FT. WM. MCKINLEY, P. I.  
NAME AND ADDRESS OF NEXT OF KIN: (BY ADMINISTRATIVE DECISION)

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME: [ ] SERIAL NUMBER: [ ] GRADE: [ ] DATE OF DEATH: [ ] DATE DISTINTERRED: [ ]  
IDENTIFICATION TAG ON: [ ] REMAINS [ ] MARKER [ ] ORGANIZATION: [ ] RELIGION: [ ] IDENTIFICATION VERIFIED BY: [ ] NAME AND TITLE: [ ]

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: [ ] CONDITION OF REMAINS: [ ]  
OTHER MEANS OF IDENTIFICATION: [ ]

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

REMAINS PREPARED AND PLACED IN CASKET

DATE: [ ] BY: [ ] EMBALMER (Signature): [ ]

CASKET BOXED AND MARKED: [ ] SHIPPING ADDRESS VERIFIED BY: [ ]

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

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS: file 5-25-50  
initials  
report

## RECORD OF CUSTODIAL TRANSFER

### 1. SHIPPED

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

### 2. SHIPPED

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

### 3. SHIPPED

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

### 4. SHIPPED

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

### 5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		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

**AIR MAIL**

MAR 7 1950

QMGMN 293  
Unknown X-79  
4th Mar Div Iwo Jima

*dt*

**SUBJECT: Unidentifiable Remains**

**TO: Commanding Officer  
American Graves Registration Service  
Philcom Zone  
APO 900, c/o Postmaster  
San Francisco, California**

1. Reference is made to letter, your Headquarters, file GRPZ 293, dated 9 February 1950, subject: Unidentifiable Remains.
2. This Office concurs in the classification of Unknown X-79, 4th Marine Division, Iwo Jima, as unidentifiable.
3. Unknown X-79 is listed on FEA Unit 4, page 14.

**FOR THE QUARTERMASTER GENERAL:**

T. H. METZ  
Lt Colonel, QMG  
Memorial Division

*WEM*

**CC: CINCPAC**

vlb



*Mar 8 3 53 PM '50*  
*RECEIVED*

**AIR MAIL**

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
PHILCOM ZONE

GRPZ 293

APO 900

SUBJECT: Unidentifiable Remains

TO : The Quartermaster General  
Department of the Army  
Washington 25, D.C.  
ATTN: Memorial Division

1. In accordance with the provisions of your letter, file QMGRU 293, GRS (Far East), dated 17 September 1948, subject; Resolution of Cases of Unidentified Deceased, the following Unknown remains, presently stored at AGRS Mausoleum, Manila, P.I., have been processed by the Central Identification Laboratory and considered "Unidentifiable" by reason of lack of sufficient identifying data:

UNKNOWN X-5 77th Div Cemetery Okinawa  
" X-47 Island Command Okinawa  
" X-79 4th Mtr. Iwo Jima  
" X-2269 AGRS Mausoleum  
" X-2280 " " "

2. Forwarded herewith, for your consideration, are new QMC Forms 1044 for the above-mentioned Unknowns.

FOR THE COMMANDING OFFICER:

5 Incls  
QMC Forms 1044 w/Certificates  
of Unidentifiability

JOHN SHYPULA  
1st Lt., Infantry  
Adjutant

*Neary*

HEADQUARTERS  
FILCOLO ZONE  
AMERICAN GRAVES REGISTRATION SERVICE

9 Feb 1950

Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 79, Plot 1,  
Row 45, Grave 2223, USMC 4th Mar. Iwo Jima, have  
been reviewed and it is the opinion of this office that insuf-  
ficient evidence is available to establish the identity of this  
deceased, and that these remains should be classified as un-  
identifiable.

**APPROVED UNIDENTIFIABLE**

FOR THE COMMANDING OFFICER:

MAR 1 1950

*[Signature]*  
H. B. McENERAR  
Captain, QMC  
Chief, Records Branch

Atch: Form 1044

*Imp 3'*

## IDENTIFICATION DATA

1. REMAINS OF UNKNOWN <b>UNK X-79 (4th Mar. Iwo Jima)</b>				2. DATE OF REPORT <b>29 Nov 1950</b>		
3. NAME OF CEMETERY <b>AGRS Mausoleum, Manila, P. I.</b>		4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT    REINTERMENT	
PHYSICAL DESCRIPTION    AGE: <b>20-25 (see item #21)</b>						
8. ESTIMATED WEIGHT <b>130-155 lbs.</b>	9. ESTIMATED HEIGHT <b>5'9½"</b>	10. COLOR OF HAIR <b>UTD</b>		11. RACE <b>White (probably)</b>		
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS  <p style="text-align: center;">NONE</p>						
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES  <p style="text-align: center;">NONE</p>						
14. WAS BODY BURNED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		TO WHAT EXTENT?				
15. WAS BODY MANGLED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		TO WHAT EXTENT?				
16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS  <p style="text-align: center;">NONE</p>						
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)  <p style="text-align: center;">NONE</p>						



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

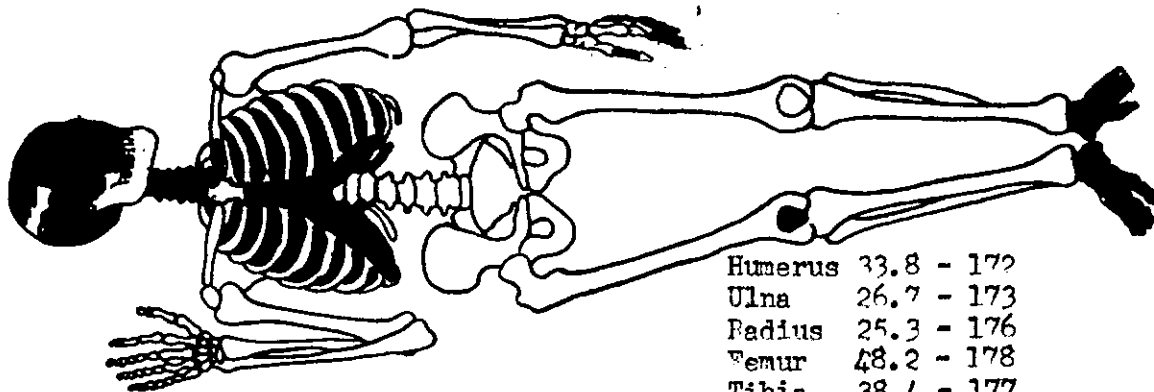
RIGHT								LEFT															
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8								
3/4 Silver crwn ← gold crwn 3/2 crwn								M A X I L L A								M I S S I N G →							
Side Views								Side Views															
UPPER								UPPER															
LOWER								LOWER															
Side Views								Side Views															
partially impacted								partially impacted															
15	13	12	11	10	9	9	10	11	12	13	14	15	16										

**DENTURES (Plates):** DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAINING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

No loose maxillary teeth present with remains.

*Robert B. Fox*  
 ROBERT B. FOX  
 Anthropologist

19. BLACK OUT PARTS OF BODY NOT RECOVERED



Humerus	33.8	-	172
Ulna	26.7	-	173
Radius	25.3	-	176
Femur	48.2	-	178
Tibia	38.4	-	177
Fibula	38.4	-	178
			<u>6/1054</u> - 175 2/3

Bi-iliac: 24.8

Estimated height: 5'9 1/4"

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

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

\_\_\_\_\_  
SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

This is the remains of a male individual, probably of white ancestry, approximately 5'9 1/4" tall, and in the age grouping 20 to 25 years at time of death (as determined by vulvic symphysis only).

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

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

ROBERT B. FOX  
Anthropologist

SIGNATURE

AIR MAIL

293 Unk. Iwo Jima X-79 (4th Mar. Div. Clear)

CINCPAC 293

SIMON, Warren Besthoff  
225 13 76, USN

JAN 20 1950

SUBJECT: Identification of Unknown Deceased

TO: Commanding Officer  
American Graves Registration Service  
Philcom Zone  
APO 900, c/o Postmaster  
San Francisco, California

1. Reference is made to Case History dated 22 September 1949, recommending that the remains of Unknown X-79, Fourth Marine Division Cemetery, Iwo Jima, Plot 1, Row 45, Grave 2223, presently stored at AGRS Mausoleum, Manila, P. I., be designated as those of Warren Besthoff SIMON, AB22c, 225 13 76, USN.

2. The recommendation of the Field is disapproved.

3. It is not considered that favorable dental comparison exists. Numerous discrepancies are noted in the comparison of the dental chart of X-79 with that of SIMON.

4. It is recommended that this case be processed in accordance with A. G. letter File AGAO-S 293.9 (27 March 1947) D-4, dated 9 April 1947.

5. Case History for SIMON, Warren B. is returned herewith.

FOR THE QUARTERMASTER GENERAL:

2 Incls

- 1. Case History dtd 22 Sept 49 for SIMON
- 2. OCMG Form 371 for SIMON

T. H. METZ  
Lt Colonel, OMC  
Memorial Division

CC: CINCPAC

vlb

AIR MAIL

JAN 23 10 42 AM '50  
MAIL & RECORDS BRANCH  
C.O.M.C.

WEM

AIR MAIL

293 Unit - Iwo Jima X-79

ATTN: gr. ltr.  
11/4/49  
4th Marine Div

GRPZ 293

1st Ind.

SIMON, Warren Besthoff

2251376, USN (4 Nov 49)

SUBJECT: Identification of Unknown Deceased

HEADQUARTERS, AMERICAN GRAVES REGISTRATION SERVICE, PHILCOM ZONE,  
APO 900, 7 December 1949

TO: The Quartermaster General, Department of the Army, Washington  
25, D.C. ATTN: Memorial Division

In compliance with request made in basic communication, submitted  
herewith is the reprocessing report accomplished by the Anthropologist  
for Unknown X-79, Fourth Marine Division, Iwo Jima.

FOR THE COMMANDING OFFICER:

*John Shypula*  
JOHN SHYPULA  
1st Lt., Infantry  
Adjutant

2 Incls:

1 - n/c

Added:

2 - QMC Form 1044

*W/D*

CC: CINCFC

*Incl # 1  
Sent to  
Form H-4 for Simon  
293 file  
Simon  
T.D.  
20 July 50  
Secretary unit*

FILE

LT (JG) W. E. MARSDEN, MSC, USN

JAN 16 1950  
145416

AIR MAIL

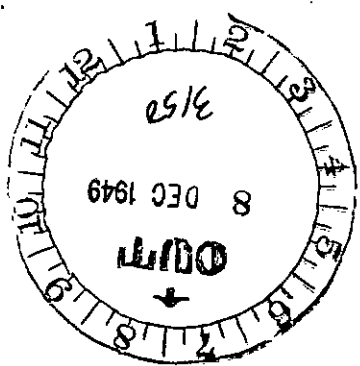
Faint, mostly illegible text at the top of the page, possibly a header or introductory paragraph.

Handwritten notes or signatures in the middle-left section of the page.

Vertical text on the right side, possibly a list or a set of instructions.



Handwritten text below the first stamp, possibly a name or title.



AIR MAIL

GRPZ 293

1st Ind.

SIMON, Warren Easthoff

2251376, USN (4 Nov 49)

SUBJECT: Identification of Unknown Deceased

HEADQUARTERS, AMERICAN GRAVES REGISTRATION SERVICE, PHILCOM ZONE,  
APO 900, 7 December 1949

TO: The Quartermaster General, Department of the Army, Washington  
25, D.C. ATTN: Memorial Division

In compliance with request made in basic communication, submitted  
herewith is the reprocessing report accomplished by the Anthropologist  
for Unknown X-79, Fourth Marine Division, Iwo Jima.

FOR THE COMMANDING OFFICER:

2 Incls:

1 - n/c

Added:

2 - QMG Form 1044

CC: QINCFE

JOHN SHYPULA

1st Lt., Infantry

Adjutant



FILE  
LT (JG) W. E. MARSDEN, MSC, USN  
JAN 16 1950

AIR MAIL

**AIR MAIL**

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

NOV 4 1949

IN REPLY REFER TO QMGMN 293

SIMON, Warren Besthoff  
225 13 76, USN

SUBJECT: Identification of Unknown Deceased

TO: Commanding General  
Philippine Air Command  
APO 74, c/o Postmaster  
San Francisco, California  
ATTENTION: AGRS, Philcom Zone

1. Reference is made to Case History dated 22 September 1949, PHILCOM ZONE, recommending that the remains of Unknown X-79, Fourth Marine Division Cemetery, Iwo Jima, Plot 1, Row 45, Grave 2223, presently stored at AGRS Mausoleum, Manila, P. I., be designated as those of Warren Besthoff SIMON, AMM2c, 225 13 76, USN.


2. It is requested the remains of Unknown X-79 be reprocessed by an anthropologist and that particular attention be given to the recharting of the dental condition.

3. NAVMED Form H-4 showing dental condition of SIMON is attached.

4. It is requested that upon completion of action, this Office be advised by Indorsement.

FOR THE QUARTERMASTER GENERAL:

1 Incl  
NAVMED Form H-4 for  
SIMON

  
T. H. METZ  
Lt Colonel, QMC  
Memorial Division

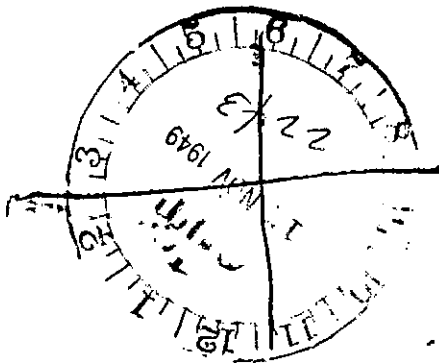
CC: CINCFE

225 13 76  
NOV 4 2 23 PM '49

FILE  
LT (JG) W. E. MARSDEN, MSC, USN  
JAN 1 1950

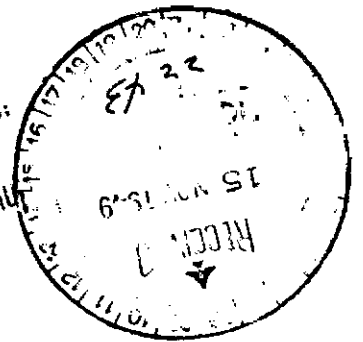
**AIR MAIL**

PAGE 1 10/1



D. O. M. G.  
MAIL & RECEIVING OFFICE

MAY 4 5 33 PM '49





293-Und- Iwo Jima X-79  
(4th Marine Div)

OMGMN 293

NOV 4 1949

SIMON, Warren Besthoff

225 13 76 USN

SUBJECT: Identification of Unknown Deceased

TO: Commanding General  
Philippine Air Command  
APO 74, c/o Postmaster  
San Francisco, California  
ATTENTION: AGRS, Philcom Zone

1. Reference is made to Case History dated 22 September 1949, PHILCOM ZONE, recommending that the remains of Unknown X-79, Fourth Marine Division Cemetery, Iwo Jima, Plot 1, Row 45, Grave 2223, presently stored at AGRS Mausoleum, Manila, P. I., be designated as those of Warren Besthoff SIMON, AMB2c, 225 13 76, USN.

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3. NAVMED Form H-4 showing dental condition of SIMON is attached.

4. It is requested that upon completion of action, this Office be advised by Indorsement.

FOR THE QUARTERMASTER GENERAL:

T. H. METZ  
Lt Colonel, QMC  
Memorial Division

1 Incl  
NAVMED Form H-4 for  
SIMON

CC: CINCPAC

Nov 4 5 33 PM '49  
RECEIVED  
AGRS

WEM

293 Stein, Warren Besthoff  
Ishored and SIMON

3 F 30

RMS

IRR

1

DISINTERMENT DIRECTIVE

803-27A-48

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

5531 00000

DATE

15 | 11 | 47  
DAY | MONTH | YEAR

NAME UNKNOWN X-000079

SERIAL NUMBER X-000079

RANK

ARM 8

DATE OF DEATH

CEMETERY IWO JIMA 4TH MARINE DIV CEM

DISPOSITION OF REMAINS 0 0391 63  
CODE | DIST. PT.

PLOT 1 ROW 45 GRAVE 2223

COUNTRY KAZAN RETTO

CAUSE OF DEATH 6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE  
GUAM NATIONAL CEMETERY  
MARIANAS ISLANDS  
(BY ADMINISTRATIVE ORDER)

NAME AND ADDRESS OF NEXT OF KIN

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME UNKNOWN

SERIAL NUMBER X-000079

RANK Unk

DATE OF DEATH 4 Aug 44

DATE DISINTERRED Unk

IDENTIFICATION TAG ON  
 REMAINS  
 MARKER

ORGANIZATION UNKNOWN

RELIGION Unk

IDENTIFICATION VERIFIED BY  
U E CONNELLY, Capt TC  
NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL  
Nature of shroud undetermined.

CONDITION OF REMAINS  
Skeletal remains, incomplete

OTHER MEANS OF IDENTIFICATION  
Mortuary Plate

MINOR DISCREPANCIES 1  
None

REMAINS PREPARED AND PLACED IN CASKET

DATE 13 Aug '48 BY H E CONNELL, Emb

EMBALMER (Signature) B G MELTON

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY F W COLEMAN, Clerk

DATE 13 Aug '48 BY E KELLY

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

HERSCHELL G GUY, 1LT INF  
SEP 1949  
FILE

SIGNATURE OF GRS INSPECTOR

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

## RECORD OF CUSTODIAL TRANSFER

### 1. SHIPPED

FROM US MAUSOLEUM (SAIPAN MI)		TO PORT STORAGE OFFICER (SAIPAN MI)	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>John H. Lott</i> JOHN H. LOTT, Maj CMP	DATE 13 Aug 48	SIGNATURE OF RECEIVER <i>Robert G. Snowden</i> ROBERT G. SNOWDEN, 1st Lt Inf	DATE 13 Aug 48

### 2. SHIPPED

FROM AGRS PORT (SAIPAN, MI)		TO MASTER FS-278	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>Harold E. Fike</i> HAROLD E. FIKE, CAPTAIN INF	DATE 12 Jan 49	SIGNATURE OF RECEIVER <i>Pedro C. Jimenez</i>	DATE 12 Jan 49

### 3. SHIPPED

FROM MASTER FS-278		TO AGRS Mausoleum	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>Pedro C. Jimenez</i>	DATE 24 Jan 49	SIGNATURE OF RECEIVER <i>E. H. Newman Jr.</i> E. H. NEWMAN JR., Capt, FA.	DATE 24 Jan 49

### 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

QICMR 293

Unknowns X-79,  
X-80 and X-81  
(4th MarDiv, Iwo Jima)

3 January 1947

293 Unk. (mic.) Iwo Jima X-79, X-81, X-80, (4th MarDiv, Iwo Jima)

SUBJECT: Identification of Unknown-Deceased.

TO : Commanding General  
U. S. Army Forces, Middle Pacific  
APO 958, c/o Postmaster  
San Francisco, California

ATTENTION: MIDPAC Sector Graves Registration Officer

1. The remains now buried as Unknown X-81, Plot 1, Row 45, Grave 2225, Fourth Marine Division Cemetery, Iwo Jima, have been identified from comparison of dental records as those of Ensign Warren Arthur HINDENLANG, 306200, USNR. Date of death was 5 August 1944. Next of kin is his mother, Florence Elisabeth Hindenlang, 50 Westminster Street, Hyde Park, Mass. His expressed religious preference is Protestant.

2. The Dental Professional Division, Navy Department, states that the dental record of the remains now buried as Unknown X-79, Grave 2223, is similar to the dental record of Warren Besthoff SIMON, 225 13 76, ANM12c, USN, but positive identification cannot be made due to a number of discrepancies.

3. The dental record of Unknown X-80, Grave 2224, was not similar to the dental records of any other members of the plane crew.

4. It is requested that the remains now buried as Unknown X-79, Grave 2223, and Unknown X-80, Grave 2224, be disinterred, the inclosed dental records checked for identification, and this office advised of the findings.

5. It is further requested that the records and grave markers of Unknown X-81, Grave 2225, be corrected accordingly and corrected Report of Interment be forwarded to this office.

FOR THE QUARTERMASTER GENERAL:

JAMES C. MacFARLAND  
Major, QMC  
Assistant

10 Incls:

- (1) Dental record - Keith E. HILL
- (2) Dental record - Bobby W. FICKLING
- (3) Dental record - Richard D. FRYE

RECORDS AND  
BRANCH  
JAN 3 9 16 AM '47  
SIGN

293 Unk. X-79 Iwo Jima (4th Marine Div. Com.)  
" " X-81 " " " "  
" " X-80 Iwo " " "  
Hindenlang, Warren 306200  
Simon, Warren 225 13 76

Serial 293  
Unknowns X-79,  
X-80 and X-81  
(4th MarDiv, Iwo Jima)

3 January 1947

SUBJECT: Identification of Unknown Deceased.

-----

10 Incls: (Continued)

- (4) Dental Record - Victor B. JONES
- (5) Dental Record - Elmer H. KASPERSON
- (6) Dental Record - Hugo L. KLUGE
- (7) Dental Record - Joseph W. KOMOROWSKI
- (8) Dental Record - William F. SCHNEIDER
- (9) Dental Record - Warren B. SIMON
- (10) Dental Record - Allen K. STINGER

187  
QMGMR 293

Unknowns X-79,

X-80 and X-81

(4th Mar Div, Iwo Jima)

3 January 1947.

*(293 Unknowns) Iwo Jima 4-79, 80, 81 (4th Mar. Div)*  
SUBJECT: Identification of Unknown Deceased.

TO: Commanding General  
U. S. Army Forces, Middle Pacific  
APO 958, c/o Postmaster  
San Francisco, California.

ATTENTION: MIDPAC Sector Graves Registration Officer

1. The remains now buried as Unknown X-81, Plot 1, row 45, Grave 2225, Fourth Marine Division Cemetery, Iwo Jima, have been identified from comparison of dental records as those of Ensign Warren Arthur HINDENLANG, 306200, USNR. Date of death was 5 August 1944. Next of kin is his mother, Florence Elizabeth Hindenlang, 50 Westminister Street, Hyde Park, Mass. His expressed religious preference is Protestant.
2. The Dental Professional Division, Navy Department, states that the dental record of the remains now buried as Unknown X-70, Grave 2223, is similar to the dental record of Warren Besthoff SIMON, 225 13 76, AMM2c, USN, but positive identification cannot be made due to a number of discrepancies.
3. The dental record of Unknown X-80, Grave 2224, was not similar to the dental records of any other members of the plane crew.
4. It is requested that the remains now buried as Unknown X-79, Grave 2223, and Unknown X-80, Grave 2224, be disinterred, the inclosed dental records checked for identification, and this office advised of the findings.
5. It is further requested that the records and grave marker of Unknown X-81, Grave 2225, be corrected accordingly and corrected Report of Interment be forwarded to this office.

FOR THE QUARTERMASTER GENERAL:

JAMES C MacFARLAND  
Major, QMC  
Assistant.

10 Incls:

- (1) Dental record- Keith E. ELLIS
  - (2) Dental Record- Bobby W. FICKLING
  - (3) Dental record - Richard D. ERYE.
- etc, as on original.

copy.

*Copy sent 293 Unknowns 4-79 Iwo Jima (4th Mar. Div)*

HEADQUARTERS  
8245 SEARCH & RECOVERY TEAM  
AGRS-MARBO

APO 86  
23 Mar. 48

SUBJECT: Report of Investigation for Team Case #7

TO : Commanding Officer, AGRS-MARBO Sector, APO 244  
ATTN: Dir S & R

1. Case under investigation
  - (a) Case No.: Team Case #7
  - (b) Names: Unknown
  - (c) Place: Target Square 263 Y, Special Map 1:10,000,  
Chi Chi Jima
  - (d) Source of info: Mr. Jeffrey Gilley, Omura, Chi Chi  
Jima
  
2. Plane
  - (a) Type: Believed B-24
  - (b) Ser. No.: Unknown
  - (c) No. of engines: Four (4) Radial Type
  - (d) Ser. No. of engines: Only one engine found and it  
as so heavily encrusted with  
barnacles that party could not  
locate number. Party attempted  
to remove barnacles but it was  
necessary to chip the metal to  
remove them.
  - (e) No. of props: Believed four (4)
  - (f) Ser. No. of props: No propellers found
  - (g) Identifying info:
    - (1) One (1) U.S. Royal airplane tire with the  
following inscriptions:  
Smooth Contour  
US-A-11  
VR-168217
    - (2) Port wing painted tan or OD with white star  
against blue background. This wing had been  
constructed for two (2) engines and looked like  
a B-24 wing.
  
3. Circumstances leading to crash
  - (a) No. of planes in flight: One (1)
  - (b) Dir. of flight: App. Course 160 degrees
  - (c) Date: On or about 4 August 1944
  - (d) Time of day: 0430 to 0530 hours
  - (e) Cause of crash: Ground anti-aircraft fire
  
4. Damage to plane and personnel
  - (a) To Plane: Plane crashed right at shore line and broke  
into pieces. Parts of the plane remained on  
shore and the rest scattered in the water.  
The fuselage was later towed out to

Incl #5

- sea by the Japanese ship Miyo Jin Maru.
- (b). To personnel: Eight (8) men were killed in the crash and their bodies towed out to sea in the fuselage of the plane for burial. Two (2) men were captured by Japanese Sailors and were reportedly killed by Japanese Soldiers.

5. Personnel and remains

- (a) No. of personnel: Believed ten (10)
- (b) Names: Unknown
- (c) Identifying Info:
- (1) Two (2) men who were captured had reddish long hair
  - (2) One (1) man was rather short and wore a wristwatch
  - (3) Both men were dressed in fatigue clothing or something of a similiar style and color but without hats.

6. Investigation testimony:

- (a) Search party consisted of:
- 1st Lt. Milton E. Ballard
  - Pfc. John B. Figg
  - Pfc. Joseph Wells
  - Pfc. Noel J. Norman (Official Photographer)
  - Mr. Jerry J. Savory
  - Mr. Jeffrey Gilley
- (b) Party searched a large area surrounding the crash site, both in the water and on shore. A rubber life raft with glass bottom buckets was used to search the water and while a number of small pieces of the aircraft were found nothing of any value in identifying the craft was found.
- (c) Mr. Gilley's father was used as an interpreter between the two (2) flyers and the Japanese but he his now dead.
- (d) Mr. Gilley stated he had seen two (2) men alive and tied to a tree but he only had a short glance at them before the Japanese drove him away.
- (e) About 800 yards from the crash site party located a grave which had been excavated by U. S. Marines under Lt. McGinnis (Phonetic pronunciation). A cross had been erected over this grave and the Japanese characters said three (3) Unknown American flyers. If remains were recovered is unknown by present search party and it is recommended that a check be made with the U.S. Marine Corp.
- (f) With further questioning among the natives it was determined that most of them felt that the body Mr. Washington stated he saw at Sakia Inlet came from the plane which crashed there later in the same day. The natives based this opinion on their knowledge of the sea currents flowing in the Inlet. For further details refer to Team Case #6.



/s/t/ MILTON E. BALLARD  
1st Lt., Sig C.  
OIC

- Incl: 1. Statement of Mr. Jeffrey Gilley  
2. Statement of Mr. Frank Washington  
3. Overlay of area searched  
4. Photographs of crashsite.

TRUE COPY:

  
GOLDEN J. FRAME  
1st Lt., QMC

23 March 1948

Statement of Mr. Jeffrey Gilley, Omura, Chi Chi Jima.

On 4 August 1944, I was living at Miyano Hamo and about 4:30 (0430) hours a single B-24, American Bomber, came from Hitomura Jima firing it's machine guns. The plane was flying at approximately 200 meters altitude and as it passed over the ridge between Hitomura Jima and Futomi Harbor it was hit by Japanese Anti-Aircraft fire from the ridge. The plane crashed near the Japanese Navy barracks and was partially in the water. Three (3) days after the plane crashed I passed the area and saw two (2) of the flyers alive but blindfolded and tied to a tree about fifty (50) meters from where the plane crashed. One man was rather short and wore a wristwatch. Both men had reddish long hair and were dressed in Army fatigue clothing without hats. I only had a short glance at the men before the Japanese chased me away.

When the plane crashed my father, who is dead now, acted as interpreter for the Japanese with the American flyers. He told me that eight (8) men had been killed in the crash and that the Japanese ship Miyo Jin Maru towed the wreckage with the eight (8) bodies out to sea and let it sink. He also said there had been bombs in the plane but they did not explode.


Sometime after the crash a Japanese soldier told me that the two (2) flyers who had been alive were turned over to the Japanese Army by the Navy and that they had been killed. I do not know the names of the soldiers and I do not know for certain what became of these two (2) men.

I certify the foregoing to be true and correct to the best of my knowledge.

/s/t/ Jeffery Gilley

Inclosure #1 to Team Case #7

TRUE COPY:

  
GOLDEN J. FRAME  
1st Lt. QMC

Incl # 6

23 Mar. 48

Statement of Mr. Frank Washington, Omura, Chi Chi Jima.

About 4 to 4:30 AM (0400-0430) on 4 August 1944 I was awakened and saw flames where a plane had crashed near the Japanese Navy barracks. One or two days after the crash I saw eight (8) American bodies laying face down on the shore near the wrecked airplane. The bodies were all burned and bloated and I can remember nothing that would identify them. I did not see any Americans alive.

On the same day another plane crashed at Sakai Inlet. That afternoon I passed by there in a boat and saw one (1) American body tied to a log and floating in the water. At first I thought the body was a turtle so I went very close and I am certain it was an American body. I am not certain from which plane the body came but think it came from the plane which crashed in the afternoon.

About four (4) days after the planes had crashed I saw the Japanese Ship Miyo Jin Maru tow the bodies (9) out to sea where they were buried.

/s/t/ Frank Washington

Inclosure #2 to Team Case #7

TRUE COPY:

  
GOLDEN J. FRAME  
1st Lt. QMC

Incl # 7

## IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-79				2. DATE OF REPORT 19 Nov. 47	
3. NAME OF CEMETERY 4th Mar Div Cem Iwo Jima	4. PLOT 1	5. ROW 45	6. GRAVE 2223	7. DATE OF	
				DISINTERMENT 19 Aug 47	REINTERMENT

### PHYSICAL DESCRIPTION

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

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

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

None

14. WAS BODY BURNED? TO WHAT EXTENT?

YES  NO

15. WAS BODY MANGLED? TO WHAT EXTENT?

YES  NO


16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS


None

17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

No clothing  
Form 1042 found on body.

TRUE COPY:

  
 GOLDEN S. FRAME  
 1st Lt. QMC



18.

TOOTH CHART

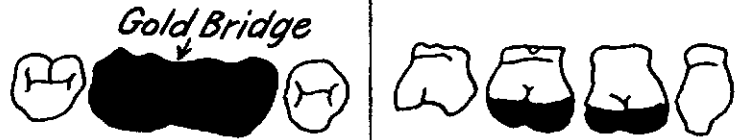
**MISSING TEETH:** ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" 'D OUT AND LABELED THUS:



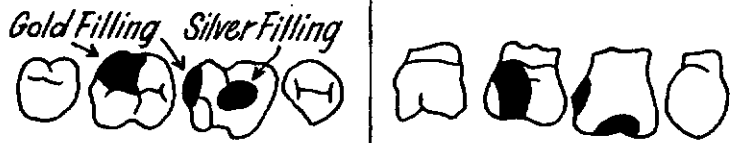
**CROWNED TEETH:** BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:



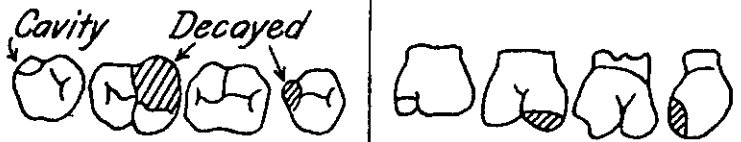
**BRIDGE WORK:** BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



**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:



RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Silver Crown	Gold Crown														
← MAXILLA								MISSING →							
Side Views															Side Views
Top Views															UPPER
															LOWER
Side Views															
	A 7	A 6	A 5				A 1		P				A mg ad	A 7	
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15

partially impacted

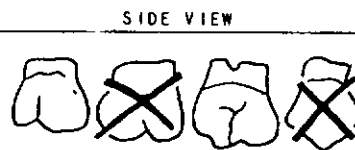
unerrupted

**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."

Maxilla and maxillary teeth from R6 - L8 are missing. Gold crown on R7 and silver on R8. R16 is partially impacted and L16 is unerrupted. Occlusion of the mandible with the two crowned maxillary teeth present, appears to be good.

J. J. McDermott  
J. J. McDERMOTT  
Laboratory Officer, CIP

MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" 'D OUT AND LABELED THUS:



CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:



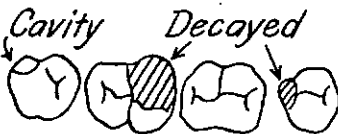
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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:



RIGHT								LEFT									
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8		
5	6	<i>Missing</i>															
Side Views								Side Views									
UPPER								UPPER									
LOWER								LOWER									
Side Views								Side Views									
<i>Rotated</i>	A	A											A	A			
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16		

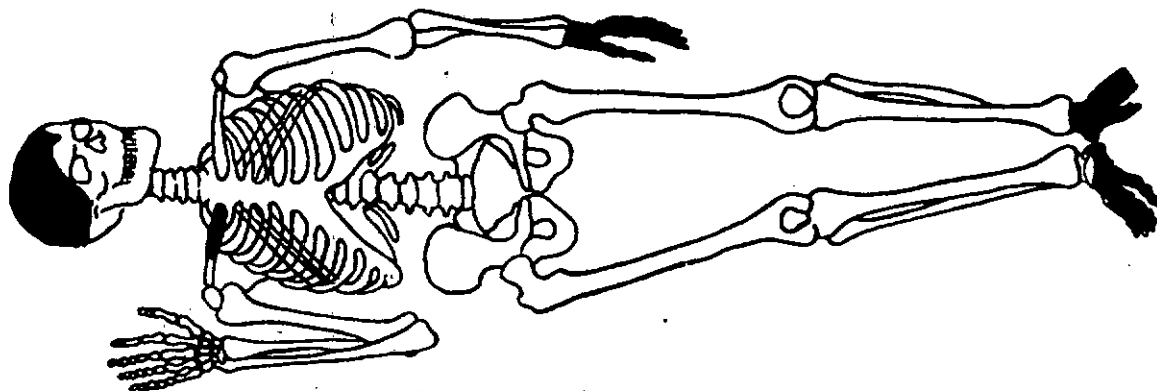
DENTURES (Plates): DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAINING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

16 Slightly rotated and impacted  
From 6 to 8 are missing in Maxilla  
Gold cap on 7 right and silver cap on 8 right

s/ Marion C. Teague

s/t/ ULDRIC E. CONERLY, Capt., T.C.

19. BLACK OUT-PARTS OF BODY NOT RECOVERED



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

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

\_\_\_\_\_  
 SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

Form 1042 found with body. Plane crashed. Plane was B-24 or Navy PBAY-2 engine. No. 68753. No personal effects found with body. Estimated weight - dry bones - 10th

A TRUE COPY:

*[Handwritten Signature]*  
 GOLDEN J. FRANK  
 1st Lt., QMC

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

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION  t/ ULDRIC E. CONEPLY, Captain CAC	SIGNATURE  s/ ULDRIC E. CONEPLY, Capt..CAC
--	--

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

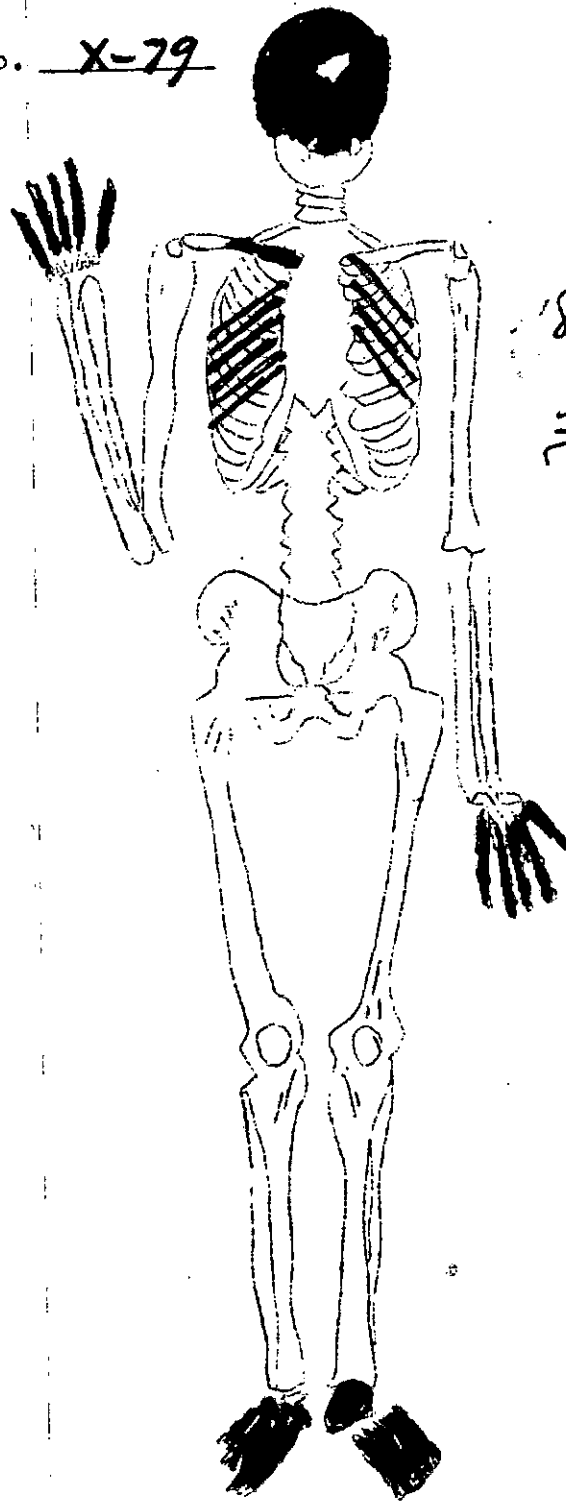
		RIGHT								LEFT																																																																																																													
		6	5	4	3	2	1	2	3	4	5	6	7	8																																																																																																									
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Side Views	<table border="1"> <tr> <td>1/2 CROWN, SILVER</td> <td>1/2 CROWN, GOLD</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>	1/2 CROWN, SILVER	1/2 CROWN, GOLD																																																																																																																				
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**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."

B. Melton, Emb.



Unknown "X" No. X-79



*Vertebrae missing*  
*Fractured ribs*

*Skeletal Remains*  
*Incomplete*

SKELETAL CHART

175 Mar Air Two June

WD AGO FORM 10-2  
(Rev. 1 Apr 1945)  
(Supersedes CGS Form 1)

REPORT OF INTERMENT  
(AR 30-1410 and AR 30-1315)

DATE OF REPORT  
19 August 1947

Imprint Identification Tag If Possible: DO NOT TYPE  REPORT OF DESINTERMENT	Section 1. - IDENTIFICATION		
	NAME (Last, first, middle initial)	SERIAL NO.	
	UNKNOWN X - 79	Box #70	
	GRADE	ORGANIZATION	BRANCH ST.
	RELIGION	IF OTHER THAN US. GIVE RANK OR TOUR	
PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH	
INDONESIA	UNKNOWN		

EMERGENCY ADDRESSEE (Name, relationship, and address)

IDENTIFICATION TAGS FOUND ON BODY IF NONE FOUND ON BODY. DESCRIBE MEANS OF IDENTIFICATION (if unidentified, fill in section 3 or reverse.)

WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)

**APPROVED UNIDENTIFIABLE**  
MAR 1 1950

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME.

Section 2. - BURIAL. If other than in established cemetery, furnish sketch and map coordinates of site.

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY.

DATE OF BURIAL	WHERE BURIED IN (PLANT, TYPE OF CEM., or name of cemetery)	LOT NO.	ROW NO.	GRAVE NO.
		1	45	2223

WAS THIS A REBURIAL? IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE.

TYPE OF RELIGIOUS CEREMONY PERSON CONDUCTING CEREMONY IF THIS IS OTHER THAN US. GIVE CORRECT IDENTIFICATION DATA AND COMMENTS RE BURIED WITH BODY

IDENTIFICATION TAG ATTACHED WITH BODY (Yes or No) IDENTIFICATION ATTACHED TO MARKER (Yes or No)

BODY BURIED ON DEFLATED BLKT. NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORG.	GRAVE NO.
Unknown X-80				2224

BODY BURIED ON DEFLATED BLKT. NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORG.	GRAVE NO.
Notary, Joseph E.	AOM3C	7110607	USN	2222

SIGNATURE OF PERSON PREPARING REPORT: Teodorico Espital  
SIGNATURE OF GCS OFFICER VERIFYING REPORT: R. Blacksher

DISTRIBUTION OF REPORT: Signed original for D.S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through the zone officer. Copies for retention in theater as prescribed by theater commander.

Section 2 - UNIDENTIFIED REMAINS

(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. This includes anatomical characteristics, hair, and any other clues, 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. Impair: 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 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	BRUISHMARKS, SCARS OR TATTOOS.
--------	--------	---------------	---------------	--------------------------------

WEAPON AND SERIAL NO. LAUNDRY MARKS WHERE BODY WAS BURIED OR FOUND

OTHER IDENTIFICATION CLUES

FILLINGS	SILVER FILLING GOLD FILLING
CAVITIES	CAVITY DECAYED
MISSING TEETH	TOOTH MISSING
CROWNED TEETH	PORCELAIN CROWN GOLD CROWN
BRIDGE WORK	GOLD BRIDGE

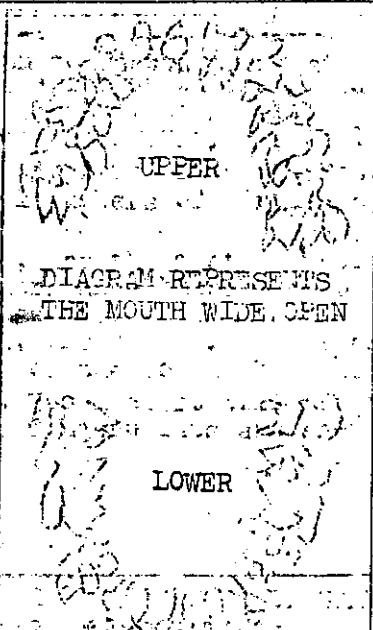


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN

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

REMARKS:

NEW YORK STATE DEPARTMENT OF HEALTH

LEFT INDEX FINGER  
 LEFT MIDDLE FINGER  
 LEFT RING FINGER  
 LEFT PINKY FINGER  
 LEFT THUMB  
 RIGHT INDEX FINGER  
 RIGHT MIDDLE FINGER  
 RIGHT RING FINGER  
 RIGHT PINKY FINGER  
 RIGHT THUMB

**REPORT OF BURIAL**

NAVMED-801 (3-45)

265

**INSTRUCTIONS.**—Forward original and two copies for U. S. dead (additional copy for allied and enemy dead) to BuMed on all burials or reburials beyond the continental United States, including Alaska, or at sea. In the field, armed guard crews, etc., forward through headquarters or activity carrying records, for checking with casualty reports. If any of the required facts are unknown, so state. List only personal effects found on the body. In burial at sea, give areas as—Hawaiian, Alaskan, etc. Assign consecutive numbers with a prefix "X" to all unidentified remains. This "X" number shall be used in all correspondence regarding burial.

SHIP OR STATION ATTACHED AT TIME OF DEATH unknown DATE REPORT FILLED OUT 20 April 1946

COPY OF IDENTIFICATION TAG  <b>none</b>	NAME (Last) (First) (Middle)		
	<b>UNKNOWN X-79</b>		
	FILE OR SERVICE NO. <b>unknown</b>	RANK OR RATE <b>unknown</b>	BRANCH OF SERVICE <b>Navy or Marine</b>
	CORPS OR RESERVE CLASSIFICATION <b>unknown</b>		RACE <b>White</b>

CAUSE OF DEATH <b>Plane crash - Shot down</b>	PLACE OF DEATH <b>Chichi Jima - Bonin Islands</b>
--	--

NAME OF NEXT OF KIN (If known) <b>unknown</b>	ADDRESS OF NEXT OF KIN (If known) <b>unknown</b>
--	---

DATE OF DEATH <b>Approx. 4 Aug 1944</b>	DATE OF BURIAL <b>15 April 1946</b>
--	--

NAME OF CEMETERY <b>4th MARINE DIVISION CEMETERY</b>	LOCATION OF CEMETERY <b>Iwo Jima</b>
---	---

GRAVE MARKER TYPE <b>Headboard</b>	PLOT NO. <b>1</b>	ROW NO. <b>45</b>	GRAVE NO. <b>2223</b>
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BURIED AT SEA (Date) <b>No</b>	AREA
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TYPE OF RELIGIOUS CEREMONY <b>none</b>	RELIGION OF DECEASED <b>unknown</b>
---	--

IDENTIFICATION TAGS FOUND ON BODY <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> NONE	IF NO IDENTIFICATION TAGS, OTHER MEANS USED TO IDENTIFY BODY (Identification cards, letters, etc.)  <b>Shoe Size 8E Plane was a B-24 or Navy PB4Y-2, engine Number 68753</b>
COMPLETE DENTAL CHART ON REVERSE <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
COMPLETE FINGERPRINT CHART OF BOTH HANDS ON REVERSE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

LIST OF PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME <b>none</b>	<b>APPROVED UNIDENTIFIABLE MAR 1 1950</b>
---	---

IDENTIFICATION TAG BURIED WITH BODY <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	IDENTIFICATION TAG ATTACHED TO MARKER <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	--

IF IDENTIFICATION TAGS NOT PRESENT, WHAT OTHER IDENTIFICATION DATA BURIED WITH BODY AND IN WHAT KIND OF CONTAINER  
**WD QMC Form 1042 buried in burial bottle**

**IF BURIAL OTHER THAN ESTABLISHED CEMETERY, FURNISH SKETCH AND MAP REFERENCES ON REVERSE**

**Bodies Buried on Either Side**

BODY ON LEFT, NAME (Last, first, middle) <b>UNKNOWN X-80</b>	RANK OR RATE <b>unknown</b>	FILE OR SERVICE NO. <b>unknown</b>	GRAVE NO. <b>2224</b>
BODY ON RIGHT, NAME (Last, first, middle) <b>UNKNOWN X-78</b>	RANK OR RATE <b>unknown</b>	FILE OR SERVICE NO. <b>unknown</b>	GRAVE NO. <b>2222</b>

PERSON REPORTING BURIAL (Name) <i>George S. Shipman</i>	(Rank or rate) <b>S/Sgt</b>	PERSON CONDUCTING BURIAL RITES
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IN REBURIAL, GIVE LOCATION OF PREVIOUS BURIAL <b>Chibhi Jima, Bonin Islands</b>	VERIFIED AND FORWARDED <i>Robert R. Fair</i>
--	---

ROBERT R. FAIR 1st Lt., QMC 16-43883-1

INSTRUCTIONS FOR BURIAL

1. IDENTIFICATION, PREPARATION OF BODY, BURIAL AND MARKINGS OF GRAVES OF ISOLATED BURIALS. Have body examined to establish IDENTITY. If body is unidentified, take four (4) sets of fingerprints of all available fingers. Complete the following:

ESTIMATED HEIGHT	ESTIMATED WEIGHT	COLOR OF EYES	COLOR OF HAIR
------------------	------------------	---------------	---------------

BIRTHMARKS, SCARS, OR TATTOOS \_\_\_\_\_

LAUNDRY MARKS	WEAPON AND SERIAL NO.
---------------	-----------------------

(If actual weight and height are used, delete estimated)

Wrap and tie body securely in a blanket, pad covering, canvas or other suitable substance. Dig grave to five feet or in hasty burials, to sufficient depth to prevent destruction of body or loss of identity. Place only one body in grave. Securely fasten one identification tag to body. Remove other identification tag and attach to grave marker (when body is disinterred or properly recorded, remove and forward to BuPers, Marine Corps, or Coast Guard, as indicated). If no tag is present, make a notation with pencil of identifying data on form in duplicate, place in bottle, canteen, spent shell, or other available container which can be made watertight, bury one with remains and the other, one (1) foot below grave marker. If no tag is available, write identifying data on marker. When pegs are not available, use other suitable means to identify grave as a military grave.

2. LOCATION OF GRAVE: Report burials in established cemeteries by plot, row, and grave number. For all other burials, prepare sketch in space provided below; and give location by means of map references, or by reference to prominent, permanent landmarks. Information must be specific, accurate, complete. Stand at foot of grave facing head to determine bodies buried to the left and right.

If the body is otherwise unidentified or fingerprints unobtainable, chart the dental conditions in conformity with Instructions In MMD (1942, 1938-43 Ed. para. 2318 (b) (1) & (2)) (1945 Ed. para. 2234.1 & 2). This must be accurate.

**CHARTING EXAMPLE:** (Chart Cavities in BLACK; otherwise use RED)  
 Tooth No. 1, missing; No. 2, gold inlay and two silver fillings; No. 3, full gold crown; No. 4, cavity; No. 5, two porcelain or temporary fillings; Nos. 6, 7, 8, gold fixed bridge supplying missing tooth No. 7; No. 9, porcelain crown (outlined).



Missing teeth Nos. \_\_\_\_\_

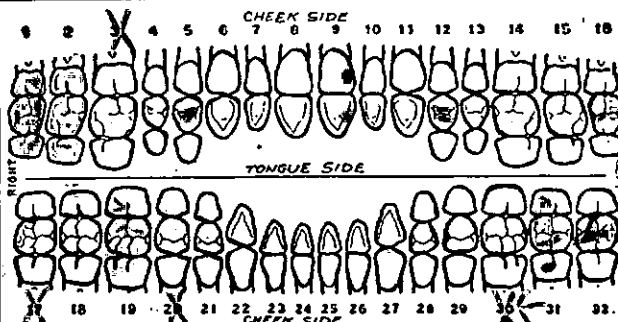
Occlusion (Type of) \_\_\_\_\_

Malposed teeth (Describe) \_\_\_\_\_

Removable appliances \_\_\_\_\_

Other defects \_\_\_\_\_

Remarks \_\_\_\_\_



COMPARISON WITH DECEASED NAVMED-H-4 (DENTAL RECORD) REVEALS:

POSITIVE IDENTITY    SOME RESEMBLANCE    NO RESEMBLANCE

(Signature of dental examiner)

(Rank or rate)

When unidentified, take rolled impression of fingerprints. Obtain sharp, clear contrast of inked ridges and intervening space. Cleanse fingers of all foreign matter. Roll finger to include crease of first joint through 180° on inked surface. Record impression of same motion without smudging.

L. THUMB	L. INDEX	L. MIDDLE	L. RING	L. LITTLE	R. THUMB	R. INDEX	R. MIDDLE	R. RING	R. LITTLE
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WD QMC FORM 1042  
(Rev. 1 Apr. 1946)  
(Supersedes GRS Form 1)

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

DATE OF REPORT  
15 April 1946

<p>Imprint Identification Tag If Possible. DO NOT TYPE</p> <p><i>Plotted</i> <b>REINTERMENT</b></p>	Section 1.—IDENTIFICATION.		
	NAME (Last, first, middle initial) <b>UNKNOWN X-79</b>		SERIAL No. <b>unknown</b>
	GRADE <b>unknown</b>	ORGANIZATION <b>unknown</b>	BRANCH OF SERVICE <b>Navy or Marine</b>
	RACE <b>White</b>	RELIGION <b>unknown</b>	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH <b>Chichi Jima Bonin Islands</b>	CAUSE OF DEATH <b>Plane Crash, Shot Down</b>	DATE OF DEATH <b>App 4 Aug 1944</b>
--	---	--

EMERGENCY ADDRESSEE (Name, relationship, and address)  
**UNKNOWN**

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>Shoe Size 8E Plane was a B-24 or Naby PB4Y-2 engine Number 68753</b>
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) <b>No</b>	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  
**None**

**APPROVED UNIDENTIFIABLE**  
**MAR 1 1950**

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  
**4th MARINE DIVISION CEMETERY  
N. 24deg 46' 3" L., E 141deg 18' 41" Long.**

DATE OF BURIAL <b>15 April 1946</b>	HOUR <b>1300</b>	BURIED IN (Shroud, blanket, or name of other) <b>Plane Wooden Box</b>	TYPE OF GRAVE MARKER <b>Headboard</b>	PLOT No. <b>1</b>	ROW No. <b>45</b>	GRAVE No. <b>2223</b>
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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>Chichi Jima, Bonin Islands</b>	PLOT No.	ROW No.	GRAVE No.
---	--	----------	---------	-----------

TYPE OF RELIGIOUS CEREMONY <b>None</b>	PERSON CONDUCTING BURIAL RITES <b>---</b>	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY <b>WD QMC Form 1042 buried in burial Bottle.</b>
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) <b>No</b>	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) <b>No</b>	

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) <b>UNKNOWN X-80</b>	RANK <b>unknown</b>	SERIAL No. <b>unknown</b>	ORGANIZATION <b>unknown</b>	GRAVE No. <b>2224</b>
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) <b>UNKNOWN X-78</b>	RANK <b>unknown</b>	SERIAL No. <b>unknown</b>	ORGANIZATION <b>unknown</b>	GRAVE No. <b>2222</b>

SIGNATURE OF PERSON PREPARING REPORT <i>S/Sgt George H. Shyden</i>	SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>Robert R. Fair</i>
---	--

DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.

**Section 2. UNIDENTIFIED REMAINS.**

**INSTRUCTIONS:**

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

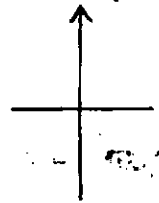
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

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

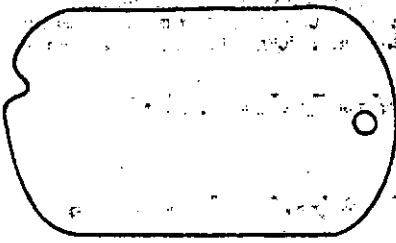
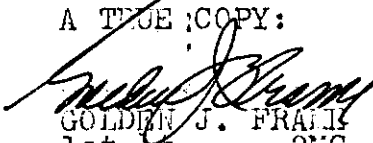
**OTHER IDENTIFICATION CLUES**

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

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



**REMARKS:**

WD SMC 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 15 April 46			
Imprint Identification Tag If Possible. DO NOT TYPE 	<b>Section 1.—IDENTIFICATION.</b>						
	NAME (Last, first, middle initial) UNKNOWN X-79			SERIAL No. Unknown			
	GRADE Unknown		ORGANIZATION Unknown		BRANCH OF SERVICE Navy or Marine		
	RACE Unknown		RELIGION Unknown		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY		
PLACE OF DEATH Chichi Jima Bonin Islands		CAUSE OF DEATH Plane Crash, Shot Down			DATE OF DEATH Apr 4 Aug 1944		
EMERGENCY ADDRESSEE (Name, relationship, and address) Unknown							
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) Shoe Size 8E Plane was a B-24 of Navy PB4Y-2 Engine Number 68753					
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) No							
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME: None							
<b>APPROVED UNIDENTIFIABLE</b> MAR 1 1950			A TRUE COPY:  GOLDEN J. FRANK 1st Lt., SMC				
<b>Section 2.—BURIAL.</b> If other than in established cemetery, furnish sketch and map coordinates on reverse.							
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY: 4th MARINE DIVISION CEMETERY N.24 deg 46' 3" L., E 141 deg 18' 41" Long.							
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)		TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
15 April 46	1300	Plane-Wooden Box		Headboard	1	45	2223
WAS THIS A REBURIAL? (Yes or no) Yes		IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE Chichi Jima, Bonin Islands					
		PLOT No.	ROW No.	GRAVE No.			
TYPE OF RELIGIOUS CEREMONY None		PERSON CONDUCTING BURIAL RITES		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY			
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) No		IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) No					
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) UNKNOWN X-80		RANK	SERIAL NO.	ORGANIZATION	GRAVE No.		
		Unknown	Unknown	Unknown	2224		
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-78		RANK	SERIAL NO.	ORGANIZATION	GRAVE No.		
		Unknown	Unknown	Unknown	2222		
SIGNATURE OF PERSON PREPARING REPORT s/ S/Sgt, GEORGE L. SHIPMAN			SIGNATURE OF GRS OFFICER VERIFYING REPORT s/ ROBERT R. FAIR				
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.							

3/14 3



**Section 3. UNIDENTIFIED REMAINS.**

**INSTRUCTIONS:**


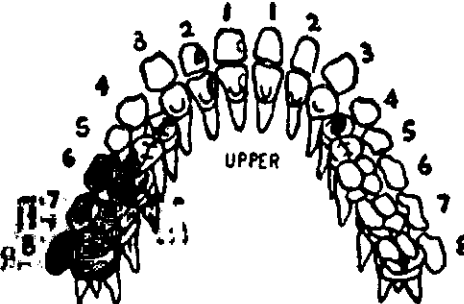



(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

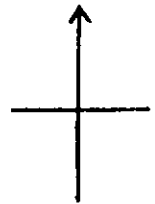
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
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WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
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OTHER IDENTIFICATION CLUES

LEFT LITTLE FINGER	FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p> <p>LOWER</p>
	LEFT RING FINGER	CAVITIES	
LEFT MIDDLE FINGER	MISSING TEETH	 <p>TOOTH MISSING</p>	
LEFT INDEX FINGER	CROWNED TEETH	 <p>PORCELAIN CROWN GOLD CROWN</p>	
LEFT THUMB	BRIDGE WORK	 <p>GOLD BRIDGE</p>	
RIGHT THUMB			
RIGHT INDEX FINGER			
RIGHT MIDDLE FINGER			
RIGHT RING FINGER			
RIGHT LITTLE FINGER			

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



REMARKS: