Grank 21 Suam #2

UNKNOWN X-21 Rlet 4, Rew 55, Grave 25 AGAT, GUAN 17- BLACK OUT PARTS OF BODY NOT SKELETAL REMAINS INCOMPLETE MASS BURIAL CERTIFICATE (IF APPLICABLE) 20. (Wherein segregation in whole or parts is impossible) CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF ... DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS: SIGNATURE OF MEDICAL OFFICER 21. REMARKS AND ADDITIONAL INFORMATION L. MORTUARY PLATE ON MARKER: UNKNOWN X-21 P-4, R-55, G-25 29 April 45 2. FORM 1042-REPORT OF INTERMENT: UNIDENTIFIED (X-21) GEO. A. WHEELER

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

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OHC FORM 1648 5 FEB 46

REVERSE SIDE FOR INSTRUCTIONS

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MAN AND RANK TYPED OR PRINTED

NAME AND RANK TYPED OR PRINTED

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VERIFIED BY GRS OFFICER

SIGNATURE OF PERSON WHO PREPARED CHART CY37 7/11/11.

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BEWARKS:

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MIDE OBEN

T137

IMPORTANCE, IF SAME IS TO BE OF MAXIMUM VALUE.

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

CROWNS (FULL OR 34), 34 GOLD CROWN WITH SILICATE WINDOW. BE NOTED, DENTAL WORK NOT COVERED ABOVE WILL BE INDICATED, &Q., PORCELAIN CROWNS, GOLD

3. ANY ABNORMALITIES SUCH AS MALPOSED, MALFORMED OR DISCOLORED TEETH, ETC. SHOULD IN FOMEE HAFE OF BOX. UPPER HALE OF BOX; AND SYMBOLS INDICATING LOCATION OF FILLING ARE TO BE INSERTED

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

IN THE PREPARION OF THE OFFICE IN THE PREPARENTION OF THRIS CHART SET OF PARAMOUNT **INSTRUCTIONS:**

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35-76080-18Q¥

INSTRUCTIONS:

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

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BEMPEKS:

dental identification available

PLACE OR HO WHERE THIS FORM ACCOMPLISHED

Unknown X-210 (Suon	H2 lesm lege	ره
	TOP VIEW	SIDE VIEW
MISSING TEETH: ALL TEETH MISSING THROUGH EX- TRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" 'D OUT AND LABELED THUS:	(Tooth Missing	
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:	Gold Crown, Porcelain	Crown DDDDD
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORGELAIN BRIDGE), THUS:	Gold Bridge	
FILLINGS: CRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVEP, CEMENT), THUS:	Gold Filling Silver Filling	
CARTES (Cavities): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:	Cavity Decayed	0000
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RECLASSIFICATION SHEET

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121, X22, X24

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NEW CLASSIFICATION 293. Pent Burn # 2 X 18

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RECLASSIFICATION SHEET

QMC Form 857 (Revised 6-27-42)

10-29400-1 W. S. GOVERNMENT PRINTING OFFICE



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WD QMC Fd m 1042 Rev. 1 Apr. 1345 (Supersedes CAS Form	1)	REPORT OF (AR 30–1810 a	INTERMI and AR 30-1815)	-	Dat	te of Report	- took		
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		拉斯·里拉斯	UNI		dive Nam	Give Name of Country			
Place of Death		Cause of Death			Da	te of Death			
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Emergency Addressee (Name, Relations		TOTAL TO THE	1 CMB					
		L. E. S.							
Identification Tags Four	nd on Body	If No Tags Found on Body, Fill in Section 3 on Reverse	Describe Means	of identification, 1	f Unidentified	· · · · · · · · · · · · · · · · · · ·			
(1, 2, or None)	•			in an annual and an a					
Were Substitute Tags P		PLOT FLAB	ARU GRATA						
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	A Sty	avy. serine Cometer	y 32. arat	- Gusta Mai	• . <u>-</u>				
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9-10-46	1530	Control and		Cross with		55	25		
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(Yes or No)		eastery, Ascr Islan		_	Plot No.	Row No.	Grave No.		
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Signature of Person Pro	tiffed ()	(-23)	UNKROWN Signature of	GRS Officer Verify	ing Report	d	24		
(S.J.,)	mus	, }	1. / /	121	Bri-				
ROBERT J	MCFFOR	CATT	Hopels	J. /SCBLOCE	CAPT				
DISTRIBUTION OF R General through Hdq. (EPORT: Signed JRS Officer. Co	d original for US and allied de pries for retention in theater a	ead, signed origins s prescribed by t	ial and one copy fo heater commander	r enemy dead	r, to the Qu	artermaster		

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Hight Little Finger	Remarks							

(Rev. 1 Apr. 1945) (Supersedes GRS Form 1)			OF INTERME		DATE	OF REPORT	r ,
		(AR 30, 1810	and AR 30-1	(815)	(9 July	48
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PLACE OF DEATH		CAUSE OF DEATH	<u> </u>		DATE	OF DEATH	
EMERGENCY ADDRESSEE	(Name, relationship, a	and address)					
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NON WERE SUBSTITUTE TAGS I	_	Unknewn Xepl P-4, R-55, G-3	25 29 Ap	ril 45			
WERE SUBSTITUTE INGS	LUCAIDEDI(188 01 HG	Ferm 1042					
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	Section 3.—	DENTIFIED	REMAINS	s				
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	WEAPON AND	SERIAL No.		LAUNDRY	MARKS		WHERE BODY WAS	BURIED OR FOUND
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HEADQUARTERS

ALERICAN GRAVES REGISTRATION STRVICE

273 WILL Guain

23 January 1950

SUFJECT: Unidentifiable Remains

TO

: The Guartermaster
Washington 25, D. C.
Attn: Memorial Division

The records pertaining to Unknown X-21, Plot, Row, Grave, USMC Guam #2, Agat Cemetery, have been reviewed and it is the opinion of this office that insufficient evidence is available to establish the identity of this deceased, and that these remains should be classified as unidentifiable.

FOR THE COMMANDING OFFICER:

JANANA W. M. M. Chariar Captain, QuiC

Chiof, Records Branch

Attch: Form 1044

NAT

JUL 2 5 196

--- Branch

1. FILE UNDER NO.

293 UNK GUAM (AGAT #2) X-21

SYNOPSIS

2. TYPE OF DOCUMENT:

LETT H

3. DATE:

June, 27, 50

4. FROM:

ULG

5. TO:

CO ACRS, PHILLOW ZONE, SAN PRANCISCO, CALIF.

6. SUBJECT:

Unidentifiable Remains.

7. DOCUMENT FILED UNDER NO.

UNK GUAM (AGAT) (MEGC) X-

X-18, X-21, X-24, X-19, X-22

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INSTRUCTIONS.—Enter after the above headings information as follows:

- 1. File classification under which this cross-index sheet is to be filed.
- 2. Appropriate term, such as: "ltr," "memo," "1st ind," etc.
- 3. Date of Document.
- 4 and 5. Enter either or both, as applicable.
- 6. Brief and comprehensive synopsis of the content or subject matter.
- 7. File classification under which the document is filed.



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اً لِ	CARL R. H	MAKK		Dis	RECTIVE NU	IMREP			DATE		
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	NAME AND BURIAL LOCA	TION OF DECEASED		ļ	6321	. 810	656		DAY	MONTH	YEAR
NAME			SERIA	LNUMBE	R	GRAD	E	ARM	RACE	RELIGION	·
UNK	NOWN X - 21	ma entre	ŀ						ļ		
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				DISINTERMENT	REINTERMENT
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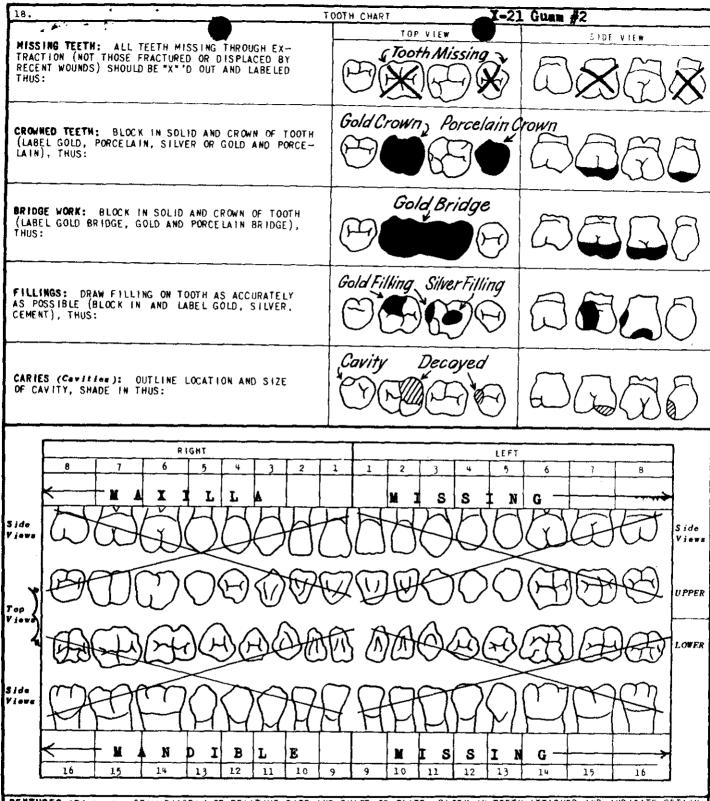
"UNIDERTIFIABLE"

"BY REASON OF LACK OF SUFTICIENT IDENTIFYING DATA"

approved white marks you

REV 18 MAR 47 1044

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE



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

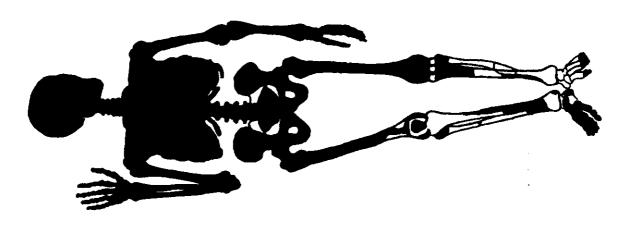
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Gaul R. Nechals

THEASON OF LACK OF LINE DECIMA IDENTIFIED DAME, Identification Section

OMC FORM 1044 а

19. BLACK OUT PARTS OF BODY NOT REMENTERED



Estimated height: U T D

20 •

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

1 CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF ______ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE
OF THE FOLLOWING ANATOMICAL PARTS:

SIGNATURE OF MEDICAL OFFICER

21- REMARKS AND ADDITIONAL INFORMATION

No identification tags, personal effects or any other means of identification found with remains.

Estimated weight of remains - 12 lbs.

"UNIDENTIFIABLE"

"BY REASON OF LACK OF SUPERCIENT IDENTIFYING DATA"

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

PAUL R NICHOLS

Chief, Identification Section

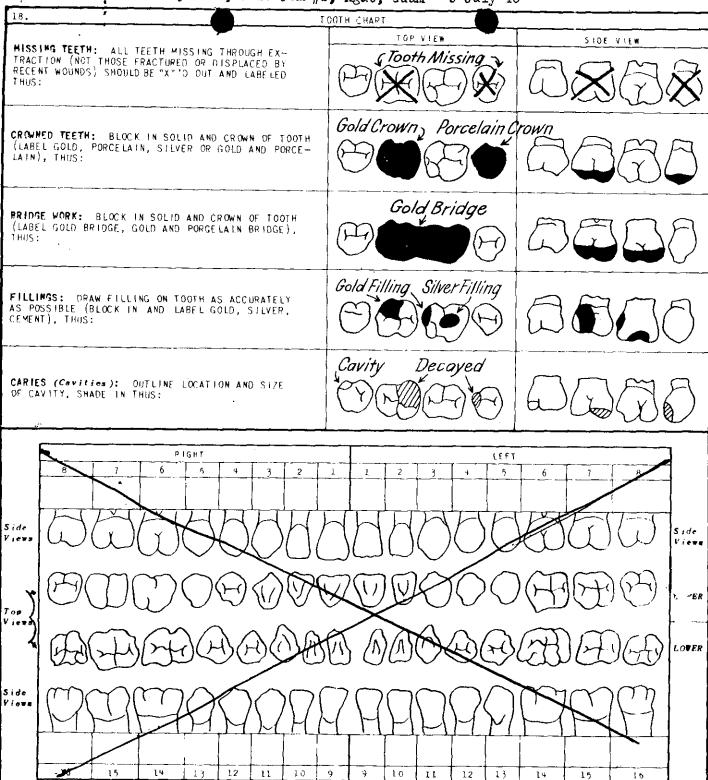
SIGNATURE

Paul R. Nichols

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15. WAS BODY	MANGLEO?	TO WHAT EXT	TENT? FRO	M FORM 1042	2:			
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UNIDENTIFIABLE BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA.

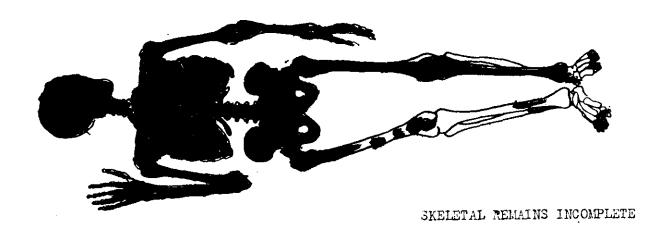
H. W. HARRIMAN
Captain, QMC
Operations Officer
AGRS, Marbo Zone



DENTURES (Plates): BPAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAIN-

Mandible and maxilla missing

C.E. WILKERSON



20. MASS BURIAL CERTIFICATE (IF APPLICABLE)
(Wherein megregation 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 NUMBER

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

1. MORTUARY PLATE ON MARKER: UNKNOWN X-21 P-4, R-55, G-25

29 April 45

2. Form 1042-REPORT OF INTERMENT: UNIDENTIFIED (X-21)

GEO. A. WHEELER

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

G.W. RELLY CAPT., C.A.C.

	TOENTI	IFICATION DATA			
REMAINS OF UNKNOWN			<u> </u>	2. DATE OF RE	PORT
	1-21			9 July 4	
NAME OF CEMETERY		4. PLOT 5. ROW	6. GRAVE		TE OF
				DISINTERMENT	REINTERMENT
motory it, April	, Gentli	4 55	25		ļ
	<u> </u>				
		YSICAL DESCRIPTION		T	
STIMATED WEIGHT	9. ESTIMATED HEIGHT	19. COLOR OF HAIR		II. RACE	
UID	VID	VID	<u> </u>	UID	
	NY OFFICIAL IDENTIFICATION	FOUND WITH REMAINS			
	plata on Mariner	70		64>	
· · · · · · · · · · · · · · · · · · ·	X-63	VIII.		ad (X-82)	
	55, 0-65 29 April	•			
				•	
IVE DESCRIPTION OF TH	ATTOOS OR SCARS ON BODY AN	ND/OR SUCH INFORMATION OBT	AINED FROM	OTHER SOURCES	
****				;	
NO.					
				•	
WAS BODY BURNED?	TO WHAT EXTENT?				
YES NO	ļ				
WAS BODY MANGLED?	TO WHAT EXTENT?	OK POSE 1042:			
YES NO	1	Libratus Miletpie but	X-1		
DESCRIBE EVIDENCE OF	HEALED FRACTURES AND BONE	MALFORMATIONS			
				:	
TO SEE					
LIST EVERY LIEM OF C	LOTHING, FOULPHENT AND PER	RSONAL EFFECTS FOUND, SHOW	ING THE TY	PE. COLOR. SIZ	E. MARKINGS
SERVICE, ETC. (If In	undry marks are indistinct	t nuch notation should be	made and s		
channels for exemina	tion when facilities are i	not available in the area;	1	•	
	•				
الكمنال					
	5				
				:	

UNIDENTIFIABLE BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA.

N W Hausman H. W. HARRIMAN Captain, QMC Operations Officer AGRS, Marbo Zone

- WELSONS J-63 P-4, R-55, 0-25 Con /2		7 48
18.	COTH CHART	
MISSING TEETH : ALL TEETH MISSING THROUGH EX-	GTooth Missing	SIDE VIEW
TRACTION (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 PORCE-LAIN), THUS:	Gold Crown, Porcela	in Crown OGG
PRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORGELAIN BRIDGE), THUS:	Gold Bridge	
FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:	Gold Filling Silver Filling	
CARIES (Covition): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:	Cavity Decayed	9 0000
Side Views	1 1 2 3 4 DDDDD DDDDD DDDDD DDD DDDD	5 6 7 8 Side View View LOWER 13 146 15 16
DENTURES (Pietes): DRAW DIAGRAM OF RELATIVE SIZE AN ING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."	ND SHAPE OF PLATE, BLOCK IN	TEETH ATTACHED AND INDICATE RETAIN-
C. E. Mekut		

FLUOROSCOPIC REPORT

		Date:	9 July	48	-
ON: X - 21 (N a	ame)	Place of Deat	h:		
P 4 R 5	5G25	Agat #2 Cemetery		G UAM Country	HALLON TO PRINCE
Healed Fracture:				nadar salam disember da salam disember disember disember disember disember disember disember disember disember	
Malformation:	NO	VE			
Personal Items:	NO			andre stage of the	
Misc. Items:		agments	•	and the state of t	Agenda vide vide geneglede magenda vide alle vide glede magenda vide alle vide glede
Remarks:	No other mean				

under fluoroscopic examination of remains.

MELVIN S. MITTENTHAL

Fluoroscopic Technician

C. I. P. Laboratory, Saipan, H. I.

(9 July 48

IDENTIFICATION CHECKLIST

Unknown	X- 21	
Cemetery	2 Arat Guam	
Plot 4	Row 55 Grave 25	_

All questions should be answered. If a positive answer cannot be given, estimates should be made and indicated as such. If a reasonable estimate cannot be made, a negative answer should be given.

PART I Physical Description

	Physical Description
1.	Estimated weight UTD 2. Estimated height
3.	Color of hair UTD 4. Race UTD
5.	Tattoos or scars on the body (give description) NONE
	(Information obtained from other
	sources)
6.	Was tooth chart taken? NO If not, explain MANDIBLE
	AND MAXILLAE MISSING
7.	Were fingerprints taken? NO
8.	Cause of death From form 1042: (Injuries, multiple extreme)
9.	Was body burned? NO To what
	extent?
10.	Are any parts of the body mis. ng or severed? See blackeut chart
11.	Is there any evidence of first-aid or other medical treatment? UTD
12.	If the remains are badly mangled, a careful search should be made for
	identification tags or personal effects. nothing found
13.	Type of clothing found on remains (Air Corps, Paratroop, Armored, Navy, UCMC, etc.)

n Checklist (Contid)	Identification
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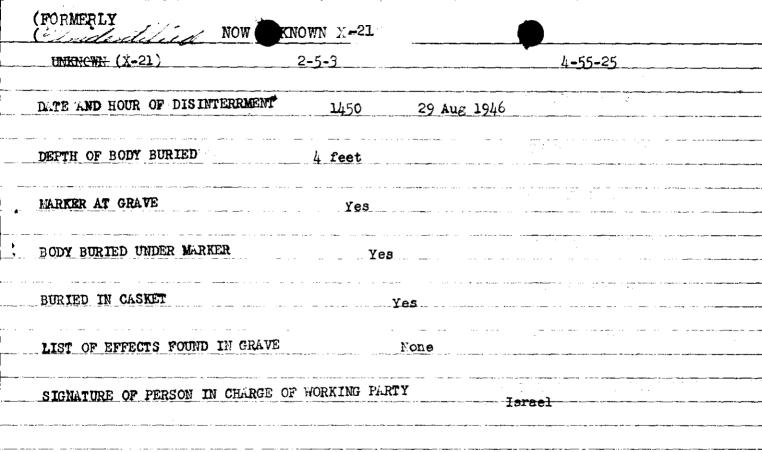
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na knowledge. ect decessed and	e remains or subject of	I certify that I have personality lithia I to been the forthwer file for
#	in the state of th	distribution of T. And A. Share T.
	<u> </u>	
		ים ותשתיותים (
•		8. REMARKS:
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The state of the s		
and the second	and the same of th	
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	metery.	γ_* Black out parts of body not received at ca
•		-
	<u></u>	6. Evidence of healed fractures
<u> </u>		
		forwarded through channels for examination
de and specimen	tion should be med	5. If Laundry marks are indistinct, such moto
designations of some or resource designation of the source designation	e an gran and a salar and a	
	. And the state of	
h		also size and markings:
	-	The section Of the se
color of each,	Baiwoda thnuol ta	List every item of clothing and/or equipmen

Organization

CENTRAL IDENTIFICATION POINT AMERICAN GRAVES REGISTRATION SERVICE MARBO ZONE, APO 244

293.	·	Date					
	CASE S	CASE SUMMARY OF					
NAME:		RANK:	SERIAL	NO:			
	Agat See #2 GUAN						
	Remains distinters	d from F-3, 1	-				
	NEGOT I-21 were proc						
	dentity-were-founds						
				·			
				•			
			•				
cc: 293			aro				
•			ROY H. C	ure)			

Remarks:



FEMARKS: Sheet out of identification manual. Ticture of "Jap" Battleship DSE, Hguga-BB78. Date October 1942. Small piece of breakfast plate. Piece of aluminum, sock, Bottom of tin-can. Bones chared beyond

recognition, Blanket with #1. Saliff Ba it.

to the second se

Figure 12 Constants

A Property of the Control of the Con

Company of the second

REPORT OF BURIAL

NAVMED-601 (3-45)



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 head-quarters 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—Hawalian, 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	U.S.S. HAZELWOOD D	D-531	DATE REPORTSO June	1945
COPY OF IDENTIFICATION TAG	NAME	(Last)	(First)	Middle)
	FILE OR SERVICE NO.	RANK OR RATE	BRANCH OF S	SERVICE
	CORPS OR RESERVE CLASSIFICAT	TION	PACE	
CAUSE OF DEATH		PLACE OF DEATH	1.2	· · · · · · · · · · · · · · · · · · ·
Injuries, multiple e	xtreme		kinawa area	
NAME OF NEXT OF KIN (If known)		ADDRESS OF NEXT OF	Kin (If known)	
DATE OF DEATH		DATE OF BURIAL	·	· · · · · · · · · · · · · · · · · · ·
29 April 1945		<u> </u>		
NAME OF CEMETERY		LOCATION OF CEMETE	RY	
Ulithi at	oll	Ulithi Atoll	Caroline Islands	
GRAVE MARKER TYPE	PLOT No.	ROW No.	GRAVE NO.	
	2	5	3_	
BURIED AT SEA (Date)		AREA		
TYPE OF RELIGIOUS CEREMONY		RELIGION OF DECEASE	ED .	
General service of fa		unknown		
IDENTIFICATION TAGS FOUND ON BODY	2 NONE	IF NO IDENTIFICATION (Identification cards, h	TAGS OTHER MEANS USED T ellers, elc.)	O IDENTIFY BODY
COMPLETE DENTAL CHART ON REVERSE	Yes X No	Remain	s charred byyond	recognition
COMPLETE FINGERPRINT CHART OF BOT	TH HANDS ON REVERSE			
LIST OF PERSONAL EFFECTS FOUND ON	BODY AND DISPOSITION OF SAME	· <u>·</u>		
IDENTIFICATION TAG BURIED WITH BOD	OY	IDENTIFICATION TAG	ATTACHED TO MARKER	<u></u>
	Yes A No	<u> </u>	Yes	□ No
IF IDENTIFICATION TAGS NOT PRESENT.				
IF BURIAL OTHER II	HAN ESTABLISHED CEMETERY, F	ORNISH SKEICH AND	MAP REFERENCES ON RI	FAEK2E
		on Either Side		£
BODY ON LEFT. NAME (Last, first, middle	ı	RANK OR RATE	FILE OR SERVICE NO.	SECTION.
BODY ON RIGHT. NAME (Last, first, midd	lle)	RANK OR RATE	FILE OR SERVICE	GM No.
PERSON REPORTING BURIAL (Name)	(Rank or rate)	PERSON CONDUCTING	BURIAL RITES	-
IN REBURIAL, GIVE LOCATION OF PREV	IOUS BURIAL	VERIFIED AND FORWA	RDED	100
				- *
		(Name)	(Rank)	(Title)

] ≰					
r	Who without:	1. IDENTIFICATION, PRE	PARATION OF	F BODY, BURIAL	AND MARKI	NGS OF GRAVES OF
7.	1 10 10 1	ISOLATED BURIALS. H	lave body exam	ined to establish ID	ENTITY, If b	ody is unidentified, take
HUUHE	37	four (4) sets of fingerprint				
ū	unidentified, udging. Obt	ESTIMATED HEIGHT	STIMATED WEIGH	T COLOR OF	EYES	COLOR OF HAIR
	offied,	BIRTHMARKS, SCARS, OR TATTO	xos			
٢	tain k			, <u> </u>		
INDEX	take rolled	LAUNDRY MARKS		WEAPON A	ND SERIAL No.	
×	p, cl					
	impression clear contras	(If ac	tual weight and	height are used, de	elete estimated)	
_	ssign	Wrap and tie body securel	y in a blanket, p	ad covering, canvas	or other suitab	le substance. Dig grave
	≃ ⊆	to five feet or in hasty burials	s, to sufficient de	epth to prevent dest	ruction of body	or loss of identity. Place
WIDDLE	f fingerpri	only one body in grave. Set tag and attach to grave mar	ecurely fasten o	ne identification tag	g to body. Rei	move other identification
D LE	6.0	to BuPers, Marine Corps, o	r Coast Guard.	as indicated). If r	no tag is preser	nt, make a notation with
	rints. Cl	pencil of identifying data on	form in duplication	ate, place in bottle,	canteen, spent	t shell or other available
	S C	container which can be made marker. If no tag is availab				
ŗ	leans	suitable means to identify g			Wileli pegs at	c not available, use other
	anse fingers o				natarias by plat	row and armya number
RING	enir enir	2. LOCATION OF GRAV				
	S of	ences, or by reference to p	rominent, perma	anent landmarks.	Information me	ust be specific, accurate,
	of all fore	complete. Stand at foot of	grave facing hea	ad to determine boo	dies buried to t	he left and right.
ŗ	Do					
<u> </u>		If the body is otherwise unident dental conditions in conformity with	lfied or fingerprint: th instructions in f	s unobtainable, chart th MMD (1942, 1938-43 Ec	d. 🗶 * 3	5 X
LITTLE	atte t ove	para. 2318 (b) (1) & (2))(1945 Ed	. para. 223 4.1 & .2)	. This must be accurate		SHAUMUU
M	matter. Roll not overlnk.	CHARTING EXAMPLE: (Char	t Cavities in BLAC	K; otherwise use RED		
	° =	Tooth No. 1, missing; No. 2, gold i crown; No. 4, cavity; No. 5, two por	nlay and two silver	fillings; No. 3, full got	奥民文 P	3000
Ę,	finger	fixed bridge supplying missing tool	h No. 7; No. 9, par	celain crown (outlined).		a ~
	1 8		 		CHEEK SIDE	
ТНСМВ	Include	Missing teeth Nos		2 3 4 5 6 	CHEEK SIDE 10	9 13 12 13 14 15 18
<u>m</u>			ř.	JUNDAUC	אכאנאנאני	
	crease	Occlusion (Type of)	——— (?	9/P/CP0/C		1000AW
	,		عإ	100 F3 CD	, - 0 0 -	COO CHAPS
'n	of first	Malposed teeth (Describe)		2000	TONGUE SIDE	-0000°
Ž D	0	Removable appliances	<u> </u>	HHHHH	MARRA	WHHHHY
DEX	# #					
	nt through	Other defects		ユーディアス	MANNA	NHHHHH
	h 180°			7 16 19 ZO 21	CHEEN SIDE	21 28 29 30 31 32
,Д —		Remarks	co	٦ .		4 (DENTAL RECORD) REVEALS:
MIDDLE	On In		<u>_</u> _	POSITIVE IDENTITY	SOME RESEMBLA	NO RESEMBLANCE
בר	n ked			(Signature of dental example)	miner)	(Rank or rate)
.,	surface					
	6.		<u> </u>	<u> </u>		
α̈́	₽					
	8 a			N I		
RING	Record impression			}		
	ress					ļ
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LITTLE	of same motion			-		
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EPORT OF BURIAL (Back)	NAVM	ED-601 (3-45)			16-43642-1	. B. GOVERNMENT PRINTING OFFICE
•					A A	

16-43033-) 🛱 D. B. GOVERNMENT PRINTING OFFICE

REPORT OF BURIAL (Buck)

INSTRUCTIONS FOR BUILD

ACCULATION									
Rev. 1 Apr. (Supers 1) REPORT OF INTERMENT									
(AR 30–1810 and AR 30–1815)							29 August 1946		
Imprint Identification Tag If SECTION 1. IDENTIFICATION Possible, DO NOT TYPE									
Fossible, DU NOT I		Ser	ial Number						
()		UCIDENT	TIFTED (X	-21)		UiVKG	IO.71		
	\	Grade	Organization		Bra	anch of Serv	rice		
	0)	ווייסובווויי	USS Haz	USS Hazelwood		UHMOW.			
\	/	Race	Religion		if Other ti	nan U. S. Di	ead,		
	/	involouin	ums	IONII	Give Nam	e of Countr	У		
Place of Death		Cause of Death			Da	te of Death			
UNICLOUM		Tajvadies, ak	diinle Ex	trane		1,-29-1	14		
Emergency Addressee (Nar	ne, Relationsh	<u> </u>				-, -, -	·		
		MOIDMIU	IJ						
Identification Tags Found o	n Body	If No Tags Found on Body, Fill in Section 3 on Reverse	Describe Means	of Identification. If	Unidentified				
1 6 E		PLOT PLAIT A	ID GRAVE I	unier					
Were Substitute Tags Prov	ided								
ио									
List Personal Effects Found	d on Body and	Disposition of Same							
1		TOLE							
SECTION 2. BURIAL I	f other than	in established cemetery fu	rnish sketch a	nd map coordinate	s on rever	se.			
Name, Number, Coordinate	s and Locatio	n of Cemetery							
Å terate	: Saleror	Larding Counter, 70,	. <i>ኤን</i> ቀቴ (20	en. U.T.					
	Hour [Buried in (Shroud, Blanket,		Type of Grave	Plot No.	Raw No.	Grave No.		
0.70.76	7.000	of other) Casket and	Marker Onoso With						
9-10-46	ن الارك	Burial lag		Zine Plate	4	55	25		
Was This a Re-Buria (Yes or No)	f are-Burial	, Indicate Name, Number, Cookers tery . Asor Isla:	rdinates of Prev ឆ្លឺ	ious Cemetery, and I	Plot No.	Row No.	Grave No.		
Yes 20	3				2	# (10.	2		
Type of Religio	erson Sondu	cting Burial Rites	If Identificati	on Tags Not Used, D	escribe Iden	tification	L		
Ceremony	4 3	** **	Data and Con	tainers Buried with	Body		B		
LELIOR SET	V LOE TALL	<u>, , , , , , , , , , , , , , , , , , , </u>	KELEK	PLAN, JEHINEM	XIATINEX	Africa	,		
Identification Tage 10 ad With Body (Yes of 10)	With Body (Yes of Morris 10/2 burnied in bottle								
Zi. c Plate one foot below grave marker.									
Body Buried on Deceased Left, Name (Last, First, Middle Initial) Rank Serial Number Organization Grave No.							Grave No.		
Unidentifi	VII 1.0.II	1 1 1 2 2 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1	os Azelwa:	ã	26				
Body Buried on Deceased	Rank	Serial Number	Organizat		irave No.				
Unidentifi	ied (X-2	3)	Una Mian	[l	SS Ezclwoc	a	24		
Signature of Person Pripar	pg Repert			Rs Officer Verifyir					
principle of the	PN4Dite	MET. SIT	82.4	TANA NOBEOG	プラバアー M. CAPT	· GMC			
DISTRIBUTION OF REP	ROBERT J. MOBROCKI, CAFT., ALC ROBERT J. MOBIOCK, CAFT., ALC DISTRIBUTION OF REPORT: Signed original for US and allied dead, signed original and one copy for enemy dead, to the Quartermaster								
General through Hdq. GRS (officer. Copies for retention in theater as prescribed by theater commander.									

RESTRICTED

											
	Left Little Finger	SECTIO	UNIDE	TIFIED	REMAIN	(S)	4.		
		Instructions									
	Left le Fii	(a) Great care will be taken to record the most minute clues for the future identity of									
	in t	unidentified remains. Fill in anatomical characteristics below, and any other cites under "Other" such as shoe size, social security number; position of body found in airplanes, vehicles									
	ger	and tanks; and serial numbers of airplanes, vehicles and tanks.									
·		ł							print all fingers		
		thumbs	in the char	rt at left	or as ma	nv as pos	i valuable o sible. If no fi	i an cides. Im ingerprints or t	print an ingers : prints can be secu	anu red.	
	Ri	the con	dition of ea	ich and e	every toot	h will be	indicated on	the tooth char	t in accordance w	vith	
•	Left Ring Finger	diagran	i below. To	oth chai	rt will not	be accom	plished if on	e or more finge	erprints are secure	èd.	
	Left g Fin	Height	Weight	Color o	of Eves	Hair Birthmarks, Scars or Tattoos					
	100	_	} _				,				
	•		ļ	ţ				-			
		Weapon and	Serial Num)	Laundry	Mank		Mana Badu M	You Brief of Francis		
	Left Middle Finger	Wempon and	OCHER HOM	DOI	Ladildry	Ha K		where body w	as Buried or Found		
	Id I							i			
	Left He Fi	<u> </u>						 			
	in _s	Other Ident	ification Clu	ės	,						
	er										
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	Left Index Finger										
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	Left Thumb	Cavities					. (JUHHH	MOZO .		
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				Harris !	Decayed		6 7	Upper	6 G		
		1		(83)			7 /7		TRANS 7		
				1164	١		1	2 N	V COL		
		Missing Teeth					· · · · · · · · · · · · · · · · · · ·				
	Right Thumb	····			Tooth Miss	na	700		7 **()		
	ght am		(40) _	··•	Diagram	Represents the	Mouth Wide Open		
	σ		,	17 14)						
				V 1.C	.,		16		FRO 16		
		Crowned Te	eth .	~ ·	Porcelain C	rawn	", / J	(\}	- 440		
	Right Index Finger		K		Bold Crown		15 \	EDD,	5 (3) 15		
			į	TIME S	LOIG CIOWII		14 (Lower Lower	3 FM		
				NOW)		/		14		
			_				13	STEMBLE	1 3		
	4 1	Bridge Worl	k				12		12		
		i			Gold Bridge	T. (700000)					
	₹ •							11 10 9 9	10 11		
	 Right Middle Finger 			W				•	-		
	Right dle Fir	Francish Ska					n Busint in O	than Than Eata	blished Comptent		
	ing	Furnish Ske	iten and mar	Reseren	ice and Coo	ruinates ro	or Buriai in O	ther Inan Estat	blished Cemetery		
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	SECTIO	ON A —			,	*			62	05	•		
	NAME	AND BURIAL LOCA	TION OF DECEASED			6323	CASS		DAY	MONTH	YEAR		
NAME	<u> </u>			SE	ERIAL NUMB	ER	GRADE	ARM	RACE	RELIGION			
Man:	ė.	I - 21								1			
							<u> </u>	<u> </u>					
CEMETERY					PLOT	ROW	GRAVE		DISPOSIT	ON OF RE	MAINS		
POLY CHIE!	EXT.	agat no. 2	, CHAM		4	95	25	3		1			
	- A		SECTION B	CUNCI	GNEE AND	NEXT UE KI	N		COD	E ! D	IST. CTR.		
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NAME			SECTION C — DI			IDENTIFICA		. ———	NATE DICTIA	TENNEN			
NAME			SERIAL NUMBER	,	GRADE L	AIE OF DEA	41FT	1	DATE DISTIN	HERRED			
								ļ					
IDENTIFICATION TAG	ON	ORGANIZATION	ļ <u>.</u>		R	ELIGION	IDENTI	FICATION V	ERIFIED BY				
REMAINS					1		;						
MARKER	,	·							N	AME AND	TITLE		
			SECTION D PREP										
NATURE OF BURIAL					CONDITION	OF REMAIN	15						
OTHER MEANS OF IDI	FNTIFICA	TION				· · · · · · · · · · · · · · · · · · ·		- 					
			·				_						
MINOR DISCREPANCIE	S (Pre	pare Discrepar	ncy Report QMC F	orm 1	194a for r	najor disc	repancies.))					
						-							
REMAINS PREPARED A	ND PLAC	ED IN CASKET											
					•								
DATE			BY		_								
CASKET SEALED BY				ا	EMBALMER	(Signatur	e)						
							/	, i					
													
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AIR MAIL

MCMN 293 CRS Far East

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Dept. of the Army, OCMG, Washington 25, D. C., 17 December 1948

- TO: Commanding General, Marianas-Bonins Command, APO 346, c/o Postmaster, San Francisco, California ATTENTION: ACRS, Marbo Zone
 - 1. Reference is made to basic communication and inclosures withdrawn.
- 2. Subject cases have been reviewed and this office concurs in the classification of these unknowns as unidentifiable.
- 3. The original Burial Reports for the following unknowns are not of record in this office:
 - a. X-5, Plot P5-14, Isolated Burial
- b. X-27, Plot E, Row 11, Grave 5, 2nd Marine Division Cemetery, Saipan.

FOR THE QUARTERMASTER GENERAL:

16 Incls.: w/d

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

CC: CINCPE

AMERICAN GRAVES REGISTRATION SERVICE MARBO ZONE

APO 244

293 MPCRS

30 November 1948

SUBJECT: Transmittal of New QMC Forms 1044 (Resolution of Cases of Unidentified Deceased)

TO:

The Quartermaster General Department of the Army Washington 25, D. C. (Attn: Memorial Division)

1. In accordance with paragraphs 3b and 6, letter, DA, file QMCMU 293, Subject: Resolution of Cases of Unidentified Deceased, dated 17 September 1948, CMC Forms 1044 on unknown remains considered unidentifiable by reason of lack of sufficient identifying data for the following unknowns by cemetery are herewith submitted for acknowledgment and decision:

Cemetery No. 2, Agat, Guam

Unknowns	Plot	Row 52	Grave 24
x-6	4		
X-10	4	53	15
X-17	4	57	24, 26
X-18	4	55	
X-19	4	57	16
X-21	4	55	25
X-22	4	56	6
X-24	4	57	1
X-31	4	58	2
X-34	C	34	9
X-68	4	40	17
X-71	4	44	6

2nd Marine Division Cemetery, Saipan

Unknowns X-27	Plot E	Row 11	Grave 5
	Isolated		
Unknowns X-5	<u>Plot</u> P5-14	Row	Crave
x-16	P5-9	-	
X-17	P5-11	-	-

Ltr, ACRS, MARBO ZONE, APO 244, file 293 MBCRS, Dtd 15 Oct 1948, Subj: Transmittal of New QMC Forms 1044 (Resolution of Cases unidentified Deceased)

2. The unknown remains indicated above are presently stored in AGRS Mausoleum, Saipan, with the exception of Unknown X-34, Plot C, Row 34, Grave 9 and Unknown X-71, Flot 4, Row 44, Grave 6, Cemetery No. 2, Agat, Guam, which were shipped to Manila on the USAT Dalton Victory, 6 October 1948.

FOR THE COMMANDING OFFICER:

16 Incls 1-16. MC Form 1044 (3) D. A. BROWN Major AGD Adjutant