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C FORM 1121				

CERTIFICATE OF DEATH

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			•	•
				State which finger(Right index preferred
3. Relation, name	and address of next of ki	n or friend	90	State which finger
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3. Relation, name 7. Original admiss 8. Died: Place	and address of next of ki	n or friend	Date	State which finger (Right index preferred) Unknown Hour Unknown Key Letter Unknown

12. Summary of facts relative to the death:

Body washed ashore 14 May 1945, Fassarai Island, Ulithi. Body badly decomposed. No clothing nor identifying marks. Face badly multilated by fish as were arms and legs. Body bloated with extrusion of viscera through lower abdomen and posterior chest edge. Skin demuded from body. Attempt made to inject right thumb and index finger with water and finger prints obtained enclosed to Bureau with original Form N. No fillings in teeth, and numbers 10-11-28, and 29 were missing, apparently having fallen out as sever other teeth were loose.

Summary of facts-Continued

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NMS-Form N

CERTIFICATE OF DEATH

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(Medical officer) Lt. (Hank) N. C., U. S. Navy. M.

Approved: Court of inquiry or board of investigation will not to held.

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HEADQUARTERS FHILCON ZONE ALERICAN GRAVES REGISTRATION SERVICE

22 January 1950 Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X-30, Plot 4, Row 56, Grave 13, USMC Cemetery #2, Agat, Guam, 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:

Captain. QMC

Chief, Records Branch

Attch: Form 1044

att.

293 WAR ASON Island

AGPC-S 704 (14 Jan 46)

1st Ind

DPR/JHA/ieg/4602

WD, AGO, Washington 25, D.C., 21 February 1946

TO: The Quartermaster General, Washington 25, D.C., Attention: Chief, Identification Section, Repatriation Records Branch, Room 2426, Temporary Building B.

Fingerprints on attached Report of Burial NMS Form N, Navy #3011, have been searched in the files of the Federal Bureau of Investigation and could not be found.

FOR THE ADJUTANT GENERAL:

JOHN T. BURNS OF CLt. Col., AGD

Officer in Charge Status Review and Determination Section

3 Incls. n/c

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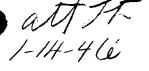




INREPLY REPER TO SPQYG 293 Unknown Asor Island

ARMY SERVICE FÖRCES

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





14 January 1946

SUBJECT: Fingerprints of Unknown Deceased

TO: The Adjutant General, ASF, Washington, D. C.
ATTENTION: Status Review & Determination, Casualty Branch,
4602 Munitions Building, Washington, D. C.

- 1. The inclosed NMS-Form N and sheets bearing fingerprints are forwarded to your office with a request that comparison be made of the fingerprints thereon with those on file, with view to establishing the identity of an Unknown Deceased.
- 2. If found to be identical, it is requested that the name, rank, serial number, emergency addressee and religious preference, of the deceased, be forwarded to this office, together with return of the forms.

FOR THE QUARTERMASTER GENERAL:

3 Incls

1. NMS Form N

2 & 3. Fingerprint Forms

ARTHUR S. ROSENGARD

2nd Lt., QMC

Assistant

Warran Brons

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14 January 1946

SUBJECT: Fingerprints of Unknown Doceased

TO: The Adjutant General, ASF, Washington, D. C.
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FOR THE QUARTERHASTER GERLAL.

3 Incls
1. HMS Form N
2 & 5. Fingerprint Forms

ARTHUR S. ROSEBGARD 2nd Lt., QMC Assistant

Ante Paris de la companya del companya del companya de la companya

AN 15 12 54 PM *46

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Address your reply to Bureau of Medicine and Surgery Navy Department, Washington 25, D. C. And Refer to

BUMED-ECC-EK QW20/r6-1 21 Dec 1945





WASHINGTON 25, D. C.

To:

Office of the Guartermaster General, Army Service Forces,

(Memorial Division), War Department, Washington, D. C.

Subj:

Identification from fingerprints attached to NavMed Form N of unknown interred U. S. Naval Cemetery, Asor

Island, Ulithi, Plot 2, Row 6, Grave 8.

Encl: (HW) Form N with accompanying fingerprints.

1. Inclosures have been submitted to the Identification Section, Bulers, and to the F.B.I. for a check of the fingerprints, but no identity has been established.

2. It is requested that a check be made with your files in an endeavor to identify this unknown and a report be made to BuMed as to whether or not identification has been established.

By direction of the Chief, Bulled:

J. F. POHRBACK

Executive Civilian Assistant
Administration Division

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SRAVES REGIETATION SECTION SEC

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REVERSE SIDE FOR INSTRUCTIONS

INSTRUCTIONS:

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3. ANY ABNORMALITIES SUCH AS MALPOSED, MALFORMED OR DISCOLORED TEETH, ETC. SHOULD

BE NOTED. DENTAL WORK NOT COVERED ABOVE WILL BE INDICATED, & G., PORCELAIN CROWNS, GOLD

CROWNS (FULL OR 34), 34 GOLD CROWN WITH SILICATE WINDOW.

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

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SEMARKS:

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PLACE OR HO. WHERE THIS FORM ACCOMPLISHED

THEY IS NOT THE TOTAL NAME AND RANK TYPED OR PRINTED

Emilia * (56) ** 27 ** (75) ** 11 **

SIGNATURE OF PERSON WHO PREPARED CHART

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NAME AND RANK TYPED OR PRINTED ENDOSE T LONGIST OF LANDING

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REVERSE SIDE FOR INSTRUCTIONS

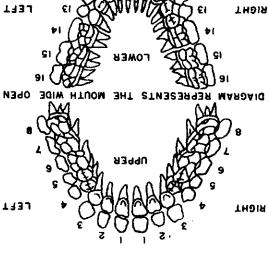
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4. FOR INFORMATION OF STANDARD NUMBERING OF TEETH, SEE DIAGRAM BELOW.



REMARKS:

01 6 6 01 0000

GRS OFFICER VERIFIED BY

NAME AND RANK TYPED OR PRINTED

SIGNATURE OF PERSON WHO PREPARED CHART whatered

NAME AND RANK TYPED OR PRINTED

THE SEVEN WHEN THE

PLACE OR HO WHERE THIS FORM ACCOMPLISHED

Shal Kow Al Texassed in hedly decomposed condition mon to report tobut the tundent I'ndex Junger at Hund.

MMS-Form N (1940)

CERTIFICATE OF DEATH

BUR M/851

o: Bureau of Medicine an	d Surgery, Navy Depart reular Letter R-6, Appendix D, Mar		C. r instructions)	OR DEFARIMENT
1. Name Unknown		BONT BONT	Rank or rat	e Unknown
2. Born: Place Unknown			Date	Unknown
3. Nationality Unkr	Nhite—U.S., Colored, Samoan, etc	Religion	Unknown	(Denomination)
4. Eyes Unknown H	air Unknown Com	plexion Unknown	HeightAbo	ut 66"Weight About 15
5. Marks, scars, etc. (note	ed in health record)I	Inknown		
			ERPRINT	See accompanying
			MINGE	enclosure
				tate which finger (Right index preferred)
•	ace Unknown		Date	
7. Original admission: Pla	ace Unknown (Ship or station to which attac	hed when first admitted to sick li	Date	Unknown
7. Original admission: Pla	aceUnknown	hed when first admitted to sick li	Date	Unknown Hour - Unknown
7. Original admission: Place	ace Unknown (Ship or station to which attac	hed when first admitted to sick li	Date	Unknown Hour Unknown Key Letter Unknown
7. Original admission: Place 8. Died: Place 9. Cause of death Contri	ace Unknown (Ship or station to which attacknown pal Unknown	hed when first admitted to sick li	Date	Unknown Hour Unknown Key Letter Unknown
7. Original admission: Place 8. Died: Place 9. Cause of death Contri	ceUnknown	hed when first admitted to sick II Date Date onduct and Unknown (Is or is no	Date	Unknown Hour Unknown Key Letter Unknown line of duty.

12. Summary of facts relative to the death:

Body washed ashore lk May 1945, Fassarai Island, Ulithi. Body badly decomposed. No clothing nor identifying marks. Face badly mutilated by fish as were arms and legs. Body bloated with extrusion of viscera through lower ablomen and posterior chest edge. Skin demided from body. Attempt made to inject right thumb and index finger with water and finger prints obtained enclosed to Bureau with original Form N. No fillings in teeth, and numbers 10-11-28, and 29 were missing, apparently having fallen out as meveral other teeth were loose.

	Br. Clien	I.t, M. C., U. S. Naby	R.
Approved: Court of inquiry or h	oard of investigation will not (will or will not	(Rank)	
Approved	W BUX TON (Commonding Officer) By Direction.	, Comdr , U. S. Navy	R.

16-15586 0. S. GOVERNMENT PRINTING OFFICE

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18/201 YOU PI , 1646220A to took 120 \$ 100 Jound in bedly decomposed condition how to repurt tobul + st tungent Index finger at Hand.

MMS-Form N

CERTIFICATE OF DEATH

BUR M/851

(See Circular Letter R-6, Appendix D, Manual o	nancy and
. NameUnknown	Rank or rate Unknown
Born: Place Unknown	Date Unknown
. NationalityUnknown	Religion Unknown (Denomination)
	exion Unknown HeightAbout 66"Weight About
Marks, scars, etc. (noted in health record)link	nown
	See .
	accompanying enclosure
Relation, name and address of next of kin or frier	
	State which finger (Right index prefer
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Original admission: Place Unknown (Ship or station to which attached	Date Unknown
Original admission: Place Unknown (Ship or station to which attached) Unknown	when first admitted to sick list) Date Unknown Date Unknown Hour Unknown
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Original admission: Place Unknown (Ship or station to which attached Unknown Principal Unknown	when first admitted to sick list) Date Unknown Date Unknown Hour Unknown
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7. Original admission: Place	Date Unknown When first admitted to sick list) Date Unknown Key Letter Unknown duct and Unknown in the line of duty.

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Summary of facts-Continued

Br. Clien		7		
B. V. CHERN	Lt.	, M.	C., U. S. Navy	R
dical officer)	(Rank)			
finvestigation will not	be held.	9月19月1日		

Approved: Court of inquiry or board of investigation will not be held.

(Will of Will not)

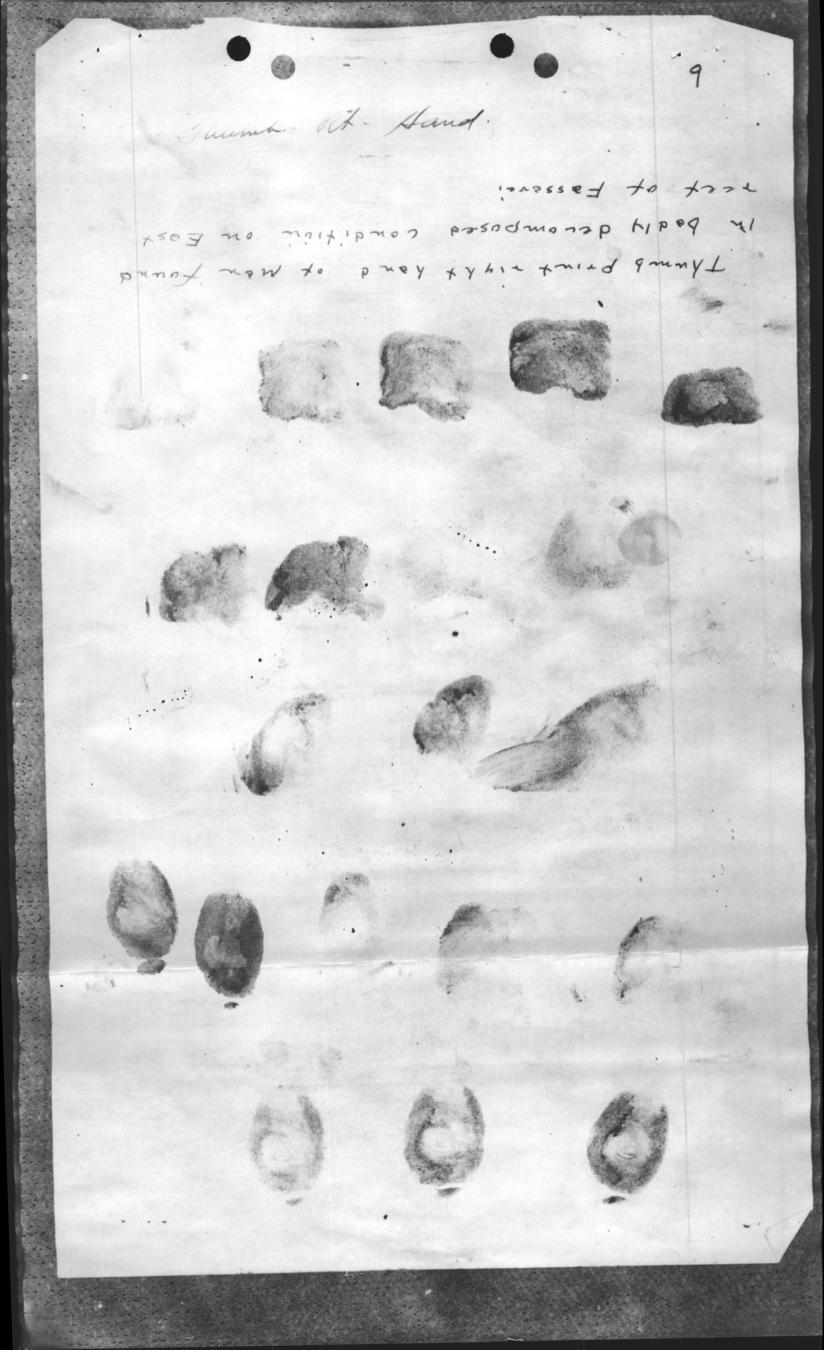
W. BILLYTON

Commanding officer)

By Direction.

(Rank)

16-15586 0. S. SOVERNMENT PRINTING OFFICE



Jound in bedly decomposed conditions

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Index finger at Hand.



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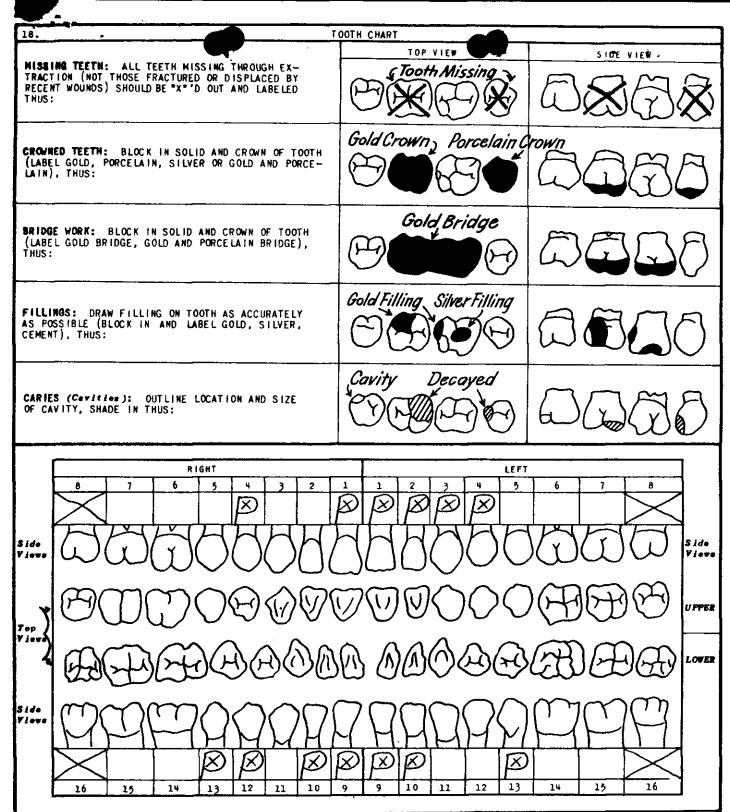
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ARMY, NAV	MARIN Hour 0846	E CEMETERY #2, ACA Buried in (Shroud, Blanker of other) Casket and buria	GUAM, M., or name 1 bag	oI. Type of Grave Marker Cross with zinc plate	Plot No.	Row No.	1 3
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ARMY, NAV Date of Buria! 9-11-46 Was This a Re-Buria (Yes or No) YOS: Type of Religion Ceremony MEMORIAL Identification Takenied With Body (Yes of No) Body Buried on Deceased L BOWLES, Lloyd I Body Buried on Deceased for JOHNSON; Edwin Signature of Person Repar	MARIN Hour 0846 Re-Buria LIHI CE Persal Condu- RVICE O	E CEMETERY #2, AGA Buried in (Shroud, Blanker of other) Casket and buria I, Indicate Name, Number, Con METERY, ASOR ISLAN Interpretation Tag Attached Marker (Yes or No) Last, First, Middle Initial)	If Identification and Control of the Low grants of Prevention of the Low grants of Prevention of the Low grants of the L	Type of Grave Marker Cross with zinc plate ious Cemetery, and on Tags Not Used, Itainers Buried with orm 1042 bur ave marker. Serial Number 983-57-91 Serial Number	Plot No. 4 Location of G Plot No. 2 Describe Identification Body Crganizat USS Bunker F Organizat USS Hazelwo	Row No. 56 Row No. 6 tification ottle O	Grave No.
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RESTRICTED

		SECTION	3 NIDEN	ITIFIED	REMAIN	s				•
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	Left Little Finger	"Other"	' such as sh	oe size, s	social secu	rity num	aracteristics ber; position hicles and ta	of body found i	y otner clues i n airplanes, vel	inder icles
	<u> </u>	(b)	A fingerpr	int, or p	rints, are	the mos	t valuable o	f all clues. Imp	orint all fingers	s and
	Ric	the con-	dition of ea	ch and e	every toot!	n will be	indicated on	ngerprints or p the tooth chart	in accordance	with
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	Left Ring Finger	Height	Weight	Color o	f Eyes	Color of	Hair	Birthmarks, Sca	ers or Tattoos	
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0211



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

Taul K. Huhale

PAUL R. NICHOLS Chief, Identification Section

3

21. REMARKS AND ADDITIONAL INFORMATION

No ID tags, burial bottle, personal effects, or other means of identification found with remains.

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

Soul at

SIGNATURE

Vaul R. Mikels

SIBHATURE OF MEDICAL OFFICER

DISINTERMENT DIRECTIVE

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Unknown - Ashr Taland

20 August 1946

Relea Value 19 3 Subject: Fingerprints of Unknown December 42, X-30

TO: Commanding General
U. S. Army Forces
Western Pacific (Manila)
APO 707, c/o Postmaster
San Francisco, California

- 1. The fingerprints submitted for the Unknown interred in the US Naval Cemetery, Asor Island, Ulithi, Plot 2, Row 6, Grave 8, have been compared, insofar as possible, but were not found to be identical.
- 2. In the event additional information becomes available to your headquarters, which may be of assistance in the identification of subject Unknown, it should be forwarded to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

JAMES C. MacFARLAND Major, QMC Assistant DI