FILE IDENTIFICATION TOPPER

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MC FORM     . Aug 45	121		-	<u> </u>

## CENTRAL IDENTIFICATION POINT AMERICAN GRAVES REGISTRATION SERVICE MARBO ZONE, AFO 244

2934

Date 13 July 48

## CASE SUMMARY OF

NAME: UNKNOWN X - 70	RANK:S	ERIAL NO:
CEMETERYAgat #2 GUAM Plot: 4 Now		
Personal effects	ໃນເກ <b>ດ</b> :	
(1) Pair of shoe		
(2) Buckles		
		<del></del>
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	· · · · · · · · · · · · · · · · · · ·	**************************************
<b>cc:</b> 293	·	
	(S:	ignature)

Remarks:

## MEDICAL REPORT OF DISINTERMENT

#### l. X-2.

- A. Date and place of disinterment 8 March, 1946 Dublon Island, Truk Atoll.
- B. List of effects found in grave:
  - 1. One pair shoes field shoes size 9 C no other markings.
    2. One metal web-belt buckle.

  - 3. Numerous nondescript pieces of leather.
- C. Medical survey of remains:
  - 1. Skull: (a) fracture of right infraorbital ridge.
    (b) fracture of left maxilla over antrum.

    - (c) fracture left zygomatic arch.
    - (d) fracture of mandible at mental
  - symphysis. 2. Humerus: right angulated shallow cuts over lower 1/3 - multiple.
    - left- numerous circular grooves about shaft.
  - 3. Radius and ulna: absent.
  - 4. Femurs: right- intertrochanteric fracture. left - spiral fracture of mid-shaft.
  - 5. Tibia and fibulae: right- normal.
    - left tibia spiral fracture distal d

fibula fracture distal

1/3.

- Pelvis: left fracture pubis.
  - right- normal.
- 7. Scapulae: left fracture through infraspinatus fossa.
  - right (a) fracture of coronoid process.
    (b) fracture thru infraspinatus
    - fossa.
- 8. Clavicles: right- normal.
  - left fracture at distal 1/3.
- 9. Vertebrae: 23.
  - (a) fracture C3,4 dorsal spine and left transverse process - parts missing.
  - (b) 07 centrum missing.
    - dorsal spine missing.
    - (c) T5 and 6 centrums left transverse process missing - dorsal spine
    - gone on T5.
      (d) T10 and 11 absent left transverse process and tip of dorsal spine.
    - (e) L1 left transverse process absent.
- 10. Sacrum: fracture through 5th segment.
- 11. Ribs: right: 8 : 3 fractured. left : 9 : 3 fractured.
- D. Cause of death noted in Japanese report drowning.
- E. Translation of Japanese grave marker.
  American Airplane Pilot Killed in Action. Place Where Buried.

(jg), MC, USNR.

I D E N T I F I C A T I O N D E N T A L C H A R T To be used with QMC Forms Nos. 1042 and 1044 in place of chart thereon, and to be attached to and forwarded with those forms when accomplished.

MRI

CHEEK)

UNKROWN X-70 SERIAL NO. LAST NAME FIRST INITIAL RANK UNIT ORGANIZATION mtry #2. Guan PLACE OF DEATH PLACE OF BURIAL LEFT RIGHT UPPER TEETH 5 6 8 TYPE TYPE LOCATION Ŏ LOCATION INSIDE - LOOKING OUT LOWER TEETH LEFT RIGHT 13 9 10 11 12 13 14 15 14 12 11 10 TYPE TYPE LOCATION LOCATION KEY OF SYMBOLS TO BE USED IN ABOVE CHART LOCATION OF FILLING TYPE OF FILLING SYMBOLS IN IN IN LOWER HALF OF BOX UPPER HALF OF BOX WHOLE BOX MESIAL (BETWEEN AMALGAN EXTRACTED TOWARD FRONT) (SILVER) OCCLUSAL (BETWEE CAVITY, INDICATE GOLD SURFACE BACK TEE LOCATION DISTAL (BETWWEN SILICATE OF FIXED BRIDGE TOWARD BACK) PORCELA IN (INCL. ABUTENETS) LINGUAL (TOWARD TEETH REPLACED OXYPHOSPATE TONGUE) BY DENTURE I (CEMENT FACIAL (TOTARD PHOSTHOMOUSLY MISSING

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L. Ho' Capt., D.C.

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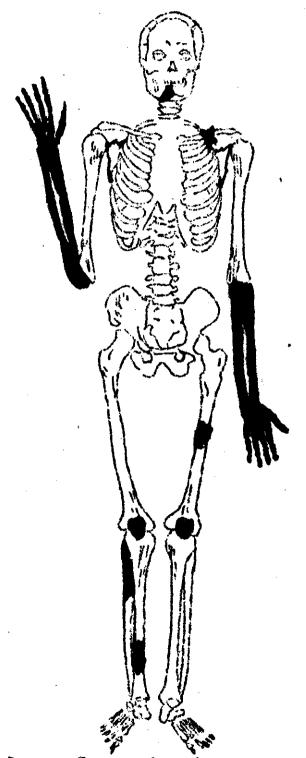
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Clarknown X-70 Gran Genter #2 Stat

(Rark) (Sor No.) (For of Sv)



Skeletal Remains Incomplete SKELETAL CEART

## MEDICAL REPORT OF DISINTERMENT

#### l. X-2.

- A. Date and place of disinterment 8 March, 1946 Dublon Island, Truk Atoll.
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      - symphysis.
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  - 3. Radius and ulna: absent.
  - 4. Femurs: right-intertrochanteric fracture. left spiral fracture of mid-shaft.
  - 5. Tibia and fibulae: right- normal.
    - left tibia spiral fracture distal a

fibula fracture distal

1/3.

- Pelvis: left fracture pubis.
  - right normal.
- 7. Scapulae: Left fracture through infraspinatus fossa.
  - right (a) fracture of coronoid process.
    - (b) fracture thru infraspinatus
- 8. Clavicles: right- normal.
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- 9. Vertebrae: 23.
  - fracture C3,4 dorsal spine and (a) left transverse process - parts missing.
  - (b) C7 centrum missing.
    - dorsal spine missing.
  - (c) T5 and 6 centrums left transverse process missing - dorsal spine
  - gone on T5.
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- (e) L1 left transverse process absent.

  10. Sacrum: fracture through 5th segment.

- D. Cause of death noted in Japanese report drowning.
- E. Translation of Japanese grave marker.
  American Airplane Pilot Killed in Action. Place Where Buried.

# RECLASSIFICATION SHEET

PAPERS ORIGINALLY FILED 295 Tent (Muse) Suam #=

X11, 121, X30, X36, X37, X70, X72, X73

X76, X81, X83

SYNOPSIS AND DATES

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NEW CLASSIFICATION 293 · Zenk Buan #2 X//

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RECLASSIFICATION SHEET

QMC Form \$57 (Revised 6-27-42)

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SUBJECT: Unidentifiable Hemains

TO:

Commanding Officer
American Graves Registration Service
Phileon Zone
APO 900, a/e Postmaster
San Francisco, California

- 1. Reference is made to letter, your Headquarters, file GRPZ 293, dated 23 January 1950, subject: Unidentifiable Remains.
- 2. This Office concurs in the classification of Unknowns X-36, X-37, X-70, X-72, X-73 and X-76, Army Navy Marine Commutery, Guam #2, as unidentifiable.
- 3. Unknown X-22 was previously recommended as unidentifiable by ACRS Headquarters, MARBO ZONE, 30 November 1948 and approved by 1st Indorsement, dated 17 December 1948, this Office.

FOR THE QUARTERMASTER GENERAL:

T. H. METZ Lt Colonel, QMC Memorial Division

CC: CINCPE

use as Green

AIR MAIL

# HEADQUARTERS PHILOGE ZOAD ACERICAN GRAVES REGISTRATION SURVIOLE

22 January 1950 Date

SUBJECT: Unidentifiable Remains

TO : The Guartermaster

Washington 25, D. C.

Attn: Memorial Division

The records pertaining to Unknown X-70, Plot 4, Row 44, Grave 5, USMC Cemetery #2, Aget, 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, QAC

Chief, Records Branch

Attch: Form 1044

1610 (10)-ajs

3rd Endorsement on ltr from BuMed ltr dtd 9July46

In reply address: The Island Commander, Navy #926, c/o F.P.O.

Serial No., 3002

San Francisco, Calif.

## HEADQUARTERS, ISLAND COMMAND GUAM

From:

IsCom (Com Marianas).

91 AUG 1946

To:

The Bureau of Medicine and Surgery.

Subject:

Reports of Burial, Submission of.

- Enclosures: (A) Report of Burial Unknown X-69.

  - (B) Report of Burial Unknown X-70. (C) Report of Burial Unknown X-71.

  - (D) Report of Burial Unknown X-72. (C) Report of Burial Unknown X-73.

In compliance with the basic letter, enclosures (A) through (E) are forwarded herewith.

B. D. WOOD, Jr

By direction.

P6/FF12 (12-cas)

# UNITED STATES PACIFIC FLEET COMMANDER MARIANAS

Serial: 9031

23 JUL 1346

FIRST ENDORSELENT on Ltr. from BuMed, ltr. dtd. 9 July 1946.

From:

Commander Harianas.

To:

Oraves Registration Officer, IsCom(Com Marianas).

Subject:

Reports of Burial, Submission of.

1.

Forwarded for compliance.

By direction

RAM/owl

2d Endorsement

HEADQUARTERS, ISL ID COLLAAD, GUAL, GRAVES HERITERERIED, SECTION.

Serial No. 49-46

3 August 1946

From:

Graves Registration Officer, IsCom(Com Marianas)

Commander Marianas.

Subject:

Reports of Barial, Submittion of.

1.

Returned

2.

The request of Report of Surial (Mavied-601) Has been

submitted this date.

k. .A LATTHE.S

lstLt., USEC.

BUREAU OF MEDICINE AND SURGERY
NAVY DEPARTMENT, WASHINGTON 25, D. C.
AND REFER TO

BULED-C-JKW QW2O/P6-4(1f)





WASHINGTON 25, D. C.

9 July 1946

A-I-R-M-A-I-L

To:

Island Commander, Guam, Navy 926

c/o Fleet Post Office, San Francisco, Calif.

Subj:

Reports of Burial, Submission of.

Ref:

(a) BUMED-C-IET, P6-4, dtd 26 Feb. 45, Serial 45-300.

1. To date this Bureau has not received Reports of Burial (NavMed-601) for the following Unknowns reinterred in Army, Navy, Marine Cemetery No. 2, Agat, Guam:

UNKNOWN X-69 UNKNOWN X-70 UNKNOWN X-71 UNKNOWN X-72	Grave 5,	Row 44, Row 44, Row 44,	Plot 4 Plot 4	12	
UNKNOWN X-72 UNKNOWN X-73		Row 44,			

- 2. These burials were reported on the Daily Burial Report for 10 April 1946 as having been disinterred from Truk Island.
- 3. It is requested that a Report of Burial (NavHed-601) be submitted to this Bureau for each of these burials.

By direction of the Chief, Bulled:

J. W. ROFIRBACK

Executive Civilian Assistant Administrative Division

Plo

hila

### 22 May 1966

To: Communiting General, Occupation Perces, Truk and Control Caroline Islands, Navy 8706.

Subj: Disinterment of Known American Dead on Truk Atelly re-

Ref: (a) Your ltr. 1610 over (010)-jeg, Ser 1627, dtd 29 March, 1966.

- 1. Reference (a) enclosed 5 Reports of Buriel (NewMod CD1), for unknown remains disinterred on the island of Prok and transferred to the island of Gunn for reburial. Reference was made to the following: Communder Marianas Speedletter, Serial 2024, dated 5 February, 1946; Communder Marianas Speedletter, Serial 2991, dated 25 February, 1946, and Communder Marianas Despatch 020705 of March, 1946.
- 2. The above references cannot be located in the Many Department. It is requested that a copy of these references be forwarded to this Bureau.

By direction of the Chief, Bulled:

W. S. DOUGLASS Civilian Assistant

QW20/16=1

In reply address: The Commanding General, Navy #3705, c/o F.P.O., San Francisco, Calif.

1610 (010) - jcg

### HEADQUARTERS. OCCUPATION FORCES. TRUK AND CENTRAL CAROLINE ISLANDS.

Serial No. 1627 29 MAR 1946

From:

The Commanding General.

To:

The Bureau of Medicine and Surgery, Washington, D.C.

Subject:

Disinterment of known American dead on Truk Atoll, report of.

References:

- (a) Com Marianas Speedletter serial 2024, dtd 5 February, 1946.
- (b) Com Marianas Speedletter serial 2991, dtd 23 February. 1946.
- (c) Com Marianas dispatch 020705, March, 1946.

Enclosures ( ) (A) NavMed form 601 (remains designated X-1) and medical report of disinterment.

70(B) NavMed form 601 (remains designated X-2) and medical

report of disinterment.

(C) NavMed form 601 (remains designated X-3) and medical report of disinterment.

 $\chi \gamma^{2}$ (D) NavMed form 601 (remains designated X-4) and medical report of disinterment.

X-13(E) NavMed form 601 (remains designated X-5) and medical report of disinterment.

In accordance with references (a), (b), and (c), enclosures (A) through (E) are submitted.

The disintered remains will be transported to Guam. 29 March. 1946, aboard the PC 1175.

Copy to: Com Marianas.

CG, MidPac, APO 958.

Army ServFor, Office of the Quartermaster

General, Washington, D.C.

Hq, Cent Pac Base Command, Office of the Quartermaster General, APO 956.

Hq, U.S. Army Forces, Office of the Quartermaster General, APO 500.

THIS IS A COMBINED REPORT OF PLANES REPORTED MISSING IN ACTION OVER THUCK 2/16-17/44 Incl. & 4/29/-30/44 Incl.

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DATE   PLANE   BUNO.   SS. & SHIP   PILOT   STATUS     2/16	·	1	Unknown		48113	TBF-1C	
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PLANE BUNO. SQ. & SHIP PILOT STATUS  2/16	•	נ	Lt.(jg) E.W.	BELLEAU WD. VT24	25474	TBM-1C	***************************************
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PIANE BUNO. SQ. & SHIP PILOT STATUS  2/16	S. A. M.	I I		ENTERPRISE VILO	47821	TBF-1C	
HATE PLANE BUNO. SQ. & SHIP PILOT STATUS  2/16  TBF-1C  2/362  ESSEX VT9  Lt.(jg) D.C.KANE  M  TBF-1C  2/362  ESSES VT9  Lt.(jg) C.C.HOOVER  D  INTREPID VT6  Lt. J.E.BRIDGES  M  S  S  S  S  S  S  S  S  S  S  S  S	B. M. Oh.	MZILIZT	Lt.(jg) N.B.BIRK\$	BUNKERHILL VI17	47812	•	2/17
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<b>Te</b> Pao			
· <b>K</b>	K	ĸ	K
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# LEGEND

S- Sawed

M- Missing

1 - Enemy Combat

5 - Operational

"-" Unknown

D or DD - Known to be dead

The above information was taken from Op 23V files which is a master recapitulation sheet of all Action Reports.

ET AYLOR

BROWELLBOYN 6. C. K. 1/2 55 55 55 McKerzu Fulich I. april 62388 or usin 57vrpp/5tank, 5 amn 2/ 62388 or usin Lt. Cd. Robers & Sucusson, USB - 17-24 Ch. Million G. Clife 637 22 69 USUR / Bellion Co. Clife 637 22 69 USUR BRUTON, Rd Elle Arile 301 4807 050 DOCTER, Wilbert in april 36 639 65 91 USLAN THRNTON, Land Chuther april 36 2 4636 USLA HAMILL, But a classe 300 at 46 csale CHALMAN, char a anit 300 4446 use

### MEDICAL REPORT OF DISINTERMENT

#### 1. X-2.

- A. Date and place of disinterment 8 March, 1946 Dublon Island, Truk Atoll.
- B. List of effects found in grave:
  - 1. One pair shoes field shoes size 9 C no other markings.
  - 2. One metal web-belt buckle.
  - 3. Numerous nondescript pieces of leather.
- C. Medical survey of remains:
  1. Skull: (a) fracture of right infraorbital ridge.
  (b) fracture of left maxilla over antrum.

  - (c) fracture left zygomatic arch. (d) fracture of mandible at mental symphysis.
  - 2. Humerus: right angulated shallow cuts over lower 1/3 multiple.

    left- numerous circular grooves about
    - shaft.
  - 3. Radius and ulhar absent.
  - 4. Famurs: right- intertrochanteric fracture. left - spiral fracture of mid-shaft.
  - 5. Tibia and fibulae: right- normal.
    - left t bia spiral fracture distal }

fibula fracture distal

1/3.

- 6. Felvis: left fracture pubis.
  - right normal.
- 7. Scapulae: Beft fracture through infraspinatus fossa.
  - right (a) fracture of coronoid process.
    - (b) fracture thru infraspinatus fossa.
- 8. Clavicles: right- normal.
  - left fracture at distal 1/3.
- 9. Vertebrae: 23.
  - fracture C3,4 dorsal spine and (a) left transverse process - parts missing.
  - (b) 07 centrum missing.
    - dorsal spine missing.
  - (c) T5 and 6 centrums left transverse process missing - dorsal spine gone on T5. (d) T10 and 11 - absent left transverse
    - process and tip of dorsal spine.
  - (e) L1 left transverse process absent.
- 10. Sacrum: fracture through 5th segment.
- 11. Ribs: right: 8: 3 fractured. left: 9: 3 fractured.
- D. Cause of death noted in Japanese report drowning.
- E. Translation of Japanese grave marker. American Airplane Pilot Killed in Action. Place Where Buried.

(jg), MC, USNR.

## RESTRICTED

WD GMC FORM 1042		DEDONT OF	· 'NTENACE		DAT	E OF REPORT	r
(Super GRS Form 1)	. <b></b>	REPORT OF (AR 30-1810 ar			•	1/	
Imprint Identification		Section 1.—IDENTIFICATION.		013)	<u> </u>	2/4/4	7
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112	]						
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PLACE OF DEATH		CAUSE OF DEATH	1		DATE	E OF DEATH	
GUAM		UNK					
EMERGENCY ADDRESSEE (No	ame, relationskip, a						
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- obine		Clean somes	The same	the manage	e see it	146 B	<b>\</b>
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LIST PERSONAL EFFECTS FOR	UND ON BODY ANI	D DISPOSITION OF SAME 726	and it				
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		blished cemetery, furnish sketch					
NAME, NUMBER, COORDINATI	ES, AND LOCKTO.	A OF CEMETERY	<b>N</b>	i <b>ppro</b> ved un	HEN!!	FIARE	į.
		AGAT, CMTRY #2,		***		, <del>, , , , , , , , , , , , , , , , , , </del>	_
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or no		TYPE OF GRAVE	PLOP NO.	ROW No.	GRAVE No.
				DOCTOR SEED		44	_
WAS THIS A REBURIAL?	I IF A REBURIAL,	INDICATE NAME, NUMBER, COORD	NATES OF PREV	LOUIS CEMETERY, AND L	OCATION OF G	<del></del>	<u>  )</u>
(Yes or no)		Harbert w rown -	113/21-4	1000 022.	PLOT No.	ROW No.	GRAVE No.
						<u> </u>	
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUC	CTING BURIAL RITES	IF IDENTIFICATE CONTAINERS	TION TAGS NOT USED, BURIED WITH BODY	DESCRIBE IDE	NTIFICATION	DATA AND
		Į.	1		811	ation 34	ia e
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BOD (1 to br		(NER (Ies or no)					
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Unknow		7/				6	<u> </u>
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Alse is		. 7 1	1	!		1 1/2	/
TIGH THE C LERSON PREP	ARING REPORT	10.16	SIGNATURE OF	GRS OFFICER VERIFYING	G REPORT	<u>l</u>	
TEO DO	rico .	Copyay	O THE T	Lis A ZASTOC		· τ	
·-·	I Signed on the	<del></del>	10h11.u1	IC S. ZAPICO		$L_{t_{\bullet}}$ , $I_{1}$	<del></del>
MOTEST OF BUILDING STORY	i. Signea origin	al for U.S. and allied dead, sig.	ned original au	id one copy for enemy	dead, to the	Juartermas.	ter General

Copies for reconting in theater as prescribed by theater commander.

Merill White.

RESTRICTED

## RESTRICTED

	Section 3. NIDENTIFIED	REMAINS.			
CEFT LITTLE FINGER	mains. Fill in anatomi social security number; planes, vehicles, and tar	cal characteristics be position of body foun iks.	low, and any other c d in airplanes, vehicle t valuable of all clues	or the future identity of un lues under "Other," such is, and tanks; and serial nu Imprint all fingers and t in be secured, the condition	as shoe size, mbers of ait- humbs in the
LEFT RING FINGER	every tooth will be indic accomplished if one or a HEIGHT WEIGHT		rt in accordance with secured.	n be secured, the condition diagram below. Tooth cha	
e e	WEAPON AND SERIAL NO.	LAUNDRY A	MARKS	WHERE BODY WAS BURIED OF	FOUND
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LEFT INDEX FINGER				·	
NG ER	FILLINGS	SILVER FILLING	1G 5	*08889°	
THUMB	CAVITIES	CAVITY	5 C	UPPER	5
THUR RIGHT	MISSING TEETH	TOCTIM MISSING		REPRESENTS THE MOUTH W	IDE OPEN
RIGHT INDEX FINGER	CROWNED TEETH	PORCELAIN CR GOLD CROWN		LOWER	) 15 14
	BRIDGE WORK	GOLD BR	SIDGE 13		
RIGHT MIDDLE FINGER	FURNISH SKETCH AND MAP	REFERENCE AND COOR	DINATES FOR BURIAL IN	OTHER THAN ESTABLISHED CE	METERY
RIGHT RING FINGER					
E	REMARKS:				
RIGHT LITTLE PINGER		• Table €		· · · · · · · · · · · · · · · · · · ·	

## REPORT OF BURIAL

OPY TO:

### Commanding General, Middle Pacific, APO 958 ine and Surgery; - Bureau of Led

Commander arianas;

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@he 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.

COPY OF IDENTIFICATION TAG	NAME (Last)		(Last)	(First) Received from Truk marke		
		HERE O	ñi X-70	i i	_	rom Truk marke
	FILE OR SERV		RANK OR RATE	···	(-2)   BRANCH O	F SERVICE
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	CORPS OR RE	SERVE CLASSIFICAT			RACE	
	f	Unknown				Unlessann
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CAUSE OF DEATH			PLACE OF BEATH			
Unknown			,, ,			
			Unknown	Tion. Tradic.		
NAME OF NEXT OF KIN (If known)			ADDRESS OF NEXT OF	KIN (15 km)	wn;	
			<u> </u>			
DATE OF DEATH			DATE OF BURIAL			
Unknown			Reinter	red Guan	1. 10 Ap	ril 1946
NAME OF CEMETERY			LOCATION OF CEMETE	RY	-	
Army, Havy, Harine Cen	netery #2		Agat Gu	am.		
GRAVE MARKER TYPE	PLOT No.		ROW NO.		GRAVE NO.	
Cross	4	i	44			5
BURIED AT SEA (Date)	· · · · · · · · · · · · · · · · · · ·		AREA			
•						
TYPE OF RELIGIOUS CEREMONY			RELIGION OF DECEASE	ED		
Full Military Honors			Unknown			
IDENTIFICATION TAGS FOUND ON BODY			IF NO IDENTIFICATION	TAGS, OTHER	R MEANS USE	D TO IDENTIFY BODY
_ 1	2	NONE	(Identification cards, l			
COMPLETE DENTAL CHART ON REVERSE			-	urn II	MINEMI	IFIABLE
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COMPLETE FINGERPRINT CHART OF BOTH	HANDS ON REV	ERSE	- We see			
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LIST OF PERSONAL EFFECTS FOUND ON I	BODT AND BISHO	STITION OF SAME				
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IDENTIFICATION TAG BURIED WITH BODY	☐ Yes	BE No	IDENTIFICATION TAG	ATTACHED TO	Yes	<b>⅓</b> №
	L			لـــا م <del>ا كارون الما</del>		
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			<u>.</u>			
IF BURIAL OTHER TH	AN ESTABLISH	ED CEMETERY, F	URNISH SKETCH AND	MAP REFE	RENCES ON	REVERSE
		Bodies Buried	on Either Side			
BODY ON LEFT. NAME (Last, first, middle)	<u> </u>	· · ·	RANK OR RATE	FILE OR	SERVICE NO.	GRAVE No.
U.M. O.A.: X-69						4
BODY ON RIGHT. NAME (Last, first, middle	:)		RANK OR BATE	FILE OR	SERVICE No.	GRAVE NO.
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			1			
			W. F. VAATO	11	CAPT	USVR
			(Name)		(Rank)	(Title)

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	MB Ob	ESTIMATED HEIGHT	ESTIMATED WEIGHT	COLOR OF EYES	COLOR OF HAIR
**			I rroos	WEAPON AND SERIAL N	ю.
	p, clear o	ed  (If	actual weight and height	t are used, delete estimat	ted)
	L. INDEX L. MIDDLE	Wrap and tie body secuto five feet or in hasty burienly one body in grave. tag and attach to grave me to BuPers, Marine Corps, pencil of identifying data	ials, to sufficient depth to Securely fasten one ide arker (when body is die , or Coast Guard, as ind on form in duplicate, pla ade watertight, bury one	prevent destruction of bo ntification tag to body. sinterred or properly rec licated). If no tag is pro ace in bottle, canteen, so with remains and the oth	itable substance. Dig grave ody or loss of identity. Place Remove other identification corded, remove and forward esent, make a notation with pent shell or other available per, one (1) foot below grave to are not available, use othe
	and intervening space. Do	suitable means to identify  2. LOCATION OF GRA For all other burials, prepi ences, or by reference to complete. Stand at foot of	y grave as a military gra AVE: Report burials in es are sketch in space provi o prominent, permanent	ve. stablished cemeteries by a ded below; and give loca landmarks. Information	plot, row, and grave number tion by means of map refer must be specific, accurate
	ITTLE	dental conditions in conformity para, 2318 (b) (1) & (2))(1945)  CHARTING EXAMPLE: (C) Tooth No. 1, missing; No. 2, gol	Ed. para. 2234.1 & .2). This r hart Cavities in BLACK; othe ld inlay and two silver fillings	1942, 1938-43 Ed. must be accurate. erwise use RED) ; No.3, full gold	
	BWUHT	crown; No. 4, cavity; No. 5, two fixed bridge supplying missing to Missing teeth Nos.  Occlusion (Type of)			
	<b>1</b>	Maiposed teeth (Describe)	(A)	PARA TONGUE SIL	~08BBB
	DEX .	Removable appliances			
	E.	Remarks	———- i m	ON WITH DECEASED NAVMED TIVE IDENTITY SOME RESE	-H-4 (DENTAL RECORD) REVEALS
		nked surface	(Signate	ure of dental examiner)	(Rank or tale)
		e. Record impression of		N 	
-	70 1	on of same motion		· · ·	• •
REPORT OF BURIAL (Back)	NA.	VMED-601 (3-45)	·	16-43683-1	À U. S. GOVERNMENT PRINTING OFFICE

## REPORT OF BURIAL

OPY TO:

# Commanding General, Middle Pacific, APO 958 Bureau of Medicine and Surgery;

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—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.

COPY OF IDENTIFICATION TAG	NAME	(Last)	(Firel)	(Middle) Received from Truk marke	
	1901	ENOUGE 1-70	( A ) / ( MACG1440 I	LOS TLAK BELKS	
	FILE OR SERVICE NO.	RANK OR RATE	BRANCH OF	SERVICE	
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CAUSE OF DEATH		PLACE OF DEATH			
Unknown		Unknown			
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		DATE OF BURIAL			
DATE OF DEATH		DATE OF BURIAL			
Unknown		I LOCATION OF CEME	rred Guer. 10 Apr	ril 1944	
NAME OF CEMETERY		LOCATION OF GEME			
Anne Home Montes Co		Acat G	hom.		
Army, Mary, Marine Co	PLOT No.	ROW NO.	GRAVE NO.		
Cana		1.1		<b>E</b>	
BURIED AT SEA (Date)	<del></del>	AREA	<u> </u>	<del></del>	
TYPE OF RELIGIOUS CEREMONY		RELIGION OF DECE	SED		
Full Military Honors		Uningowa			
IDENTIFICATION TAGS FOUND ON BODY		IF NO IDENTIFICATION (Identification card	ON TAGS. OTHER MEANS USE	TO IDENTIFY BODY	
_ 1	2 NONE	/I de majacura de la caraci	, , , , , , , , , , , , , , , , , , , ,		
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COMPLETE FINGERPRINT CHART OF BO		Arrnu	AFD OMBERRY	1050	
	Yes No		VED UNIDENTIA		
LIST OF PERSONAL EFFECTS FOUND ON	BODY AND DISPOSITION OF SA	ME	4 Er		
		( Institution of the Institution	ATTACKED TO MARKED		
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IF IDENTIFICATION TAGS NOT PRESENT	, WHAT OTHER IDENTIFICATION	DATA BORIED WITH BODY A	IN WINE KIND OF TORK		
IF BURIAL OTHER T	HAN ESTABLISHED CEMETE	RY, FURNISH SKETCH AF	D MAP REFERENCES ON	REVERSE	
	Onding I	Buried on Either Side			
BODY ON LEFT. NAME (Last, first, middle		RANK OR RATE	FILE OR SERVICE No.	GRAVE NO.	
·					
BODY ON RIGHT. NAME (Last, first, mid.	dle)	RANK OR RATE	FILE OR SERVICE No.	GRAVE NO.	
INCHES X-71				4	
PERSON REPORTING BURIAL (Name)	(Rank o	r rate) PERSON CONDUCTI	NG BURIAL RITES		
D & MARRIETTING 9 -AT	A MOREON	STRATEGICAL A	10TTT 250	HADI ATM	
IN REBURIAL, CIVE LOCATION OF THE	ACLE BURNEY!	TERMENTAN FOR	WANDER		
			Met and	11:cht #7	

	<u>₹</u>							<u> </u>
ŗ	1 th ≤	1. IDENTIFICATION,	PREPARATION	OF BODY	, BURIAL AI	ND MARK	INGS OF GR	AVES OF
ТНОМВ	ω ō	ISOLATED BURIALS	. Have body e	xamined to e	stablish IDEN	TITY. If b	ody is unident	ified, take
Ç	32	four (4) sets of finger						
<b>0</b>	niden ging	ESTIMATED HEIGHT	ESTIMATED WE	EIGHT	COLOR OF EY	ES	COLOR OF HA	iR
	08	BIRTHMARKS, SCARS, OR 1	TATTOOS		<u> </u>	<del></del>		
ŗ	SCLATED BURIALS. Have body examined to establish IDENTITY. If body is unidentification (4) sets of fingerprints of all available fingers. Complete the following:  STIMATED HEIGHT  BIRTHMARKS, SCARS, OR TATTOOS    WEAPON AND SERIAL No.							
ZOEX	5 G	LAUNDRY MARKS	·		WEAPON AND	SERIAL No.		
ĕ ×	5 ed		_ <del></del> _		<u> </u>			
	mpres ear co	1	If actual weight	and height a	re used, delet	e estimated)		
ר אוסטרפ	¥ o	to five feet or in hasty buenly one body in grave.	urials, to sufficie Securely faste	nt depth to pr en <mark>o</mark> ne identi	event destruct fication tag to	tion of body body. Re	or loss of ident move other ide	ity. Place Intification
Ē.	nts, ridges	to BuPers, Marine Corp pencil of identifying dat container which can be i	os, or Coast Gua a on form in du made watertight,	ard, as indica uplicate, place , bury one wi	ated). If no t e in bottle, ca th remains an	tag is prese nteen, spen d the other,	nt, make a not t shell or other one (1) foot b	ation with r available elow grave
٢	int					Then pegs at	c not available	, esc other
RING	Ingers o	For all other burials, pre ences, or by reference	epare sketch in s to prominent, p	pace provide ermanent lar	d belo <mark>w; and</mark> idmarks. Infe	give location ormation m	by means of i ust be specific	map refer- accurate,
	en unidentified, take rolled impression of fingerprints. Cleanse fingers of all foreign matter. Roll finger to include crease of first joint through 180° on inked surface. smudging. Obtain sharp, clear contrast of inked ridges and intervening space. Do not overlink.	complete. Stand at foo	t of grave facing	head to det	ermine bodies	buried to t	he left and rig	nt. 
ר. נודדנב	8	dental conditions in conformi para. 2318 (b) (1) & (2))(194	ty with instructions 5 Ed. para. 2234.1	In MMD (194 & .2). This mus	2, 1938-43 Ed. st be accurate.	X	PARADE.	jġġ
	n Roll 1	Tooth No. 1, missing; No. 2, g	gold inlay and two s	ilver fillings: N	lo.3, full gold		3886	
E,	inger	fixed bridge supplying missin	g tooth No. 7; No. 9	, porcelain crow	rn (outlined).			
THUMB	include	Missing teeth Nos.		٢٠	YHHHY	HEEN SIDE "	YNHH <del>.</del>	15 16 F4/F4/
		Occlusion (Type of)			16890		DABLE	
π 2	f filest	Malposed teeth (Describe)			$\frac{1}{1}$	ONGUE SIDE	- 000	
XDEX	joint thr	Removable appliances				8888		南田
	ough 1	Other defects		11 19	HMMU 10 20 21 22	UMMM 23 24 25 26 (EEM S/DE	27 28 29 30	31 32
, Q 2		Remarks		1			· [7	,
MIDDLE	3 5			POSITIVE	IDENTITY L	SOME RESEMBLE	INCE NO RE	SEMBLANCE
ž Ž	ed su		_	(Signature	of dental examine	er)	(Rank or rate)	
	TACE.							
מק	Re							
RING	cord			Ņ				
ଦ	la de							bstance. Dig grave ss of identity. Place other identification remove and forward take a notation with a notati
	esior							
	0 8	four (4) sets of fingerprints of all available fingers. Complete the following:    STIMATED HEIGHT						
,7J T	ema				,			or HAIR  Ince. Dig grave identity. Place er identification ove and forward a notation with other available foot below grave illable, use other digrave number, as of map referencific, accurate, and right.
17	mot			1				}
Į.	l g			'				

MISTRUCTIONS FOR MANAL

## REPORT OF BURIAL

OPY TO:

# Commanding General, Middle Pacific, APG 958 Bureau of Meditine and Surgery; Bonnander Marianass

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—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.

	NAME		(Last)	(First)		(Middle)
		UMICNO	VH 12-70	( MBC	elved fr -21	'on truk marke
	FILE OR SERV		RANK OR RATE		BRANCH OF	SERVICE
	Unicac	WD	Unimown		Union	
	CORPS OR RES	SERVE CLASSIFICAT	ION	· · · · · · · · · · · · · · · · · · ·	RACE	
	•	Unitatura			(	lekaren.
CAUSE OF DEATH			PLACE OF DEATH			
Unknown			Unimown			
NAME OF NEXT OF KIN (If known)			ADDRESS OF NEXT O	F KIN (If know	vn)	
DATE OF DEATH			DATE OF BURIAL			
Unknown		······································	Beinter		. 10 Apr	11 1944
NAME OF CEMETERY			LOCATION OF CEMET	ERY	•	
American Manager National Confession of the						
GRAVE MARKER TYPE	PLOT No.		ROW No.		GRAVE NO.	
<b>A</b>	PLOT No.		ROW No.		GRAVE NO.	_
BURIED AT SEA (Date)			AREA		· · · ·	5
BORIED AT SER (Dute)			AREA			
TYPE OF RELIGIOUS CEREMONY			RELIGION OF DECEAS	SED.		_ <del>_</del>
<b>*</b> • • • • • • • • • • • • • • • • • • •			Unitrocum			
IDENTIFICATION TAGS FOUND ON BODY	·	<del></del>	IF NO IDENTIFICATION	N TAGS OTHER	MEANS USED	TO IDENTIFY BODY
1	z	NONE	(Identification cards,			
COMPLETE DENTAL CHART ON REVERSE			-			
	Yes	No No	<b>APPROVEI</b>	) IININF	NTIFIA	n F
COMPLETE FINGERPRINT CHART OF BO	TH HANDS ON REVE	RSE	- WITHOLF	) Olling	**	
	Ves	🖷 No	<b>S</b>	EB 1 3 19	t n	
LIST OF PERSONAL EFFECTS FOUND ON	BODY AND DISPOS	ITION OF SAME	<u>,                                     </u>	<u> </u>	<b>W</b>	
IDENTIFICATION TAG BURIED WITH BOD	Y		IDENTIFICATION TAG	ATTACHED TO	MARKER	
	Yes	Mo No			Yes	■ N•
IF IDENTIFICATION TAGS NOT PRESENT.	WHAT OTHER IDE	TIFICATION DATA	BURIED WITH BODY AN	D IN WHAT KI	ND OF CONTA	NER
IF BURIAL OTHER TO	HAN ESTABLISHE	D CEMETERY, F	URNISH SKETCH ANI	MAP REFER	ENCES ON F	EVERSE
IF BURIAL OTHER TO	HAN ESTABLISHE	D CEMETERY, F	URNISH SKETCH ANI	MAP REFER	ENCES ON F	REVERSE
		Bodies Buried	on Either Side	MAP REFER	ENCES ON F	
IF BURIAL OTHER TO					ERVICE NO.	GRAVE NO.
BODY ON LEFT. NAME (Last, first, middle	2)		on Either Side	FILE OR S	ERVICE No.	GRAVE No.
BODY ON LEFT. NAME (Last, first, middle	2)		on Either Side	FILE OR S		
BODY ON LEFT. NAME (Last, first, middle BODY ON RIGHT. NAME (Last, first, midd	2)	Bodies Buried	ON Either Side RANK OR RATE RANK OR RATE	FILE OR S	ERVICE No.	GRAVE NO.
BODY ON LEFT. NAME (Last, first, middle	2)		on Either Side	FILE OR S	ERVICE No.	GRAVE No.
BÖDY ON LEFT. NAME (Last, first, middle BODY ON RIGHT. NAME (Last, first, midd	ille)	Bodies Buried	OR Either Side RANK OR RATE RANK OR RATE PERSON CONDUCTING	FILE OR S	ERVICE NO.	GRAVE No.
BODY ON LEFT. NAME (Last, first, middle BODY ON RIGHT. NAME (Last, first, middle PERSON REPORTING BURIAL (Name)	ille)	Bodies Buried	ON Either Side RANK OR RATE RANK OR RATE	FILE OR S	ERVICE NO.	GRAVE NO.
BODY ON LEFT. NAME (Last, first, middle BODY ON RIGHT. NAME (Last, first, middle PERSON REPORTING BURIAL (Name)	ille)	Bodies Buried	OR Either Side RANK OR RATE RANK OR RATE PERSON CONDUCTING	FILE OR S	ERVICE NO.	GRAVE NO.

_	₹				
	100 €	1. IDENTIFICATION, PREF	ARATION OF BODY	Y, BURIAL AND M <i>i</i> establish IDENTITY.	ARKINGS OF GRAVES O If body is unidentified, tak
Ĭ,	S C C	four (4) sets of fingerprints	of all available fingers	s. Complete the follow	wing:
0	niden dging	ESTIMATED HEIGHT ES	TIMATED WEIGHT	COLOR OF EYES	COLOR OF HAIR
	SOLATED BURIALS. Have body examined to establish IDENTITY. If body is unidentiff for unit (s) sets of ingerprints of all available fingers. Complete the following:  STIMATED HEIGHT  SITTIMATED HEIGHT  SOLUTION OF GRAVE; Report burials in established cemeteries by plot, row, and grave marker. If no tag is available, write identifying data on marker. When pegs are not available, marker. If no tag is available, write identifying data on marker. When pegs are not available, marker. If no tag is available, write identifying data on marker. When pegs are not available, marker. If no tag is available, write identifying data on marker. When pegs are not available, marker. If no tag is available, write identifying data on marker. When pegs are not available, marker. If no tag is available, write identifying data on marker. When pegs are not available, write identifying data on marker. When pegs are not available, marker. If no tag is available, write identifying data on marker. When pegs are not available, marker. If no tag is available, write identifying data on marker. When pegs are not available, write identifying data on marker. When pegs are not available, write identifying data on marker. When pegs are not available, write identifying data on marker. When pegs are not available, write identifying data on marker. When pegs are not available, write identifying data on marker. When pegs are not availab				
		! 		<del>.</del>	<u> </u>
2 0 0	sharp,	LAUNDRY MARKS	•	WEAPON AND SERIAL	<b>No.</b>
	clear c	(If act	ual weight and height	are used, delete estim	ated)
L WIDDE	ontrast of inked ridges	to five feet or in hasty burials, •nly one body in grave. See tag and attach to grave marks to BuPers, Marine Corps, or pencil of identifying data on	to sufficient depth to purely fasten one iden er (when body is disi Coast Guard, as indic form in duplicate, plac	prevent destruction of I tification tag to body. Interred or properly re tated). If no tag is p te in bottle, canteen,	pody or loss of identity. Plac Remove other identification ecorded, remove and forwal present, make a notation with spent shell or other availab
F	Cleans	marker. If no tag is available	, write identifying data	on marker. When pe	
	e fingers of all f tervening space	ESTIMATED HEIGHT  ESTIMATED HEIGHT  ESTIMATED HEIGHT  ESTIMATED HEIGHT  ESTIMATED WEIGHT  COLOR OF EYES  COLOR OF HAIR  BIRTHMARKS, SCARS. OR TATTOOS   (If actual weight and height are used, delete estimated)  Wrap and tie body securely in a blanket, pad covering, canvas or other suitable substance. D to five feet or in hasty burials, to sufficient depth to prevent destruction of body or loss of identity enly one body in grave. Securely fasten one identification tag to body. Remove other identity one body in grave marker (when body) is disinterred or properly recorded, remove and to BuPers, Marine Corps, or Coast Guard, as indicated). If no tag is present, make a notation of identifying data on form in duplicate, place in bottle, canteen, spent shell or other a container which can be made watertight, bury one with remains and the other, one (1) foot belo marker. If no tag is available, write identifying data on marker. When pegs are not available, using the marker of the substance of the substa	ation by means of map refe n must be specific, accurat		
	oreign matter. Roll Do not overlnk.	dental conditions in conformity with para. 2318 (b) (1) & (2))(1945 Ed.  CHARTING EXAMPLE: (Chart Tooth No. 1, missing: No. 2, gold in	Instructions in MMO (19 para, 2234.1 & .2). This m  Cavities in BLACK; other ay and two silver fillings;	42, 1938-43 Ed. ust be accurate. wise use RED) No. 3, full gold	
ִּבָּ	finger	crown; No. 4, cavity; No. 5, two porc	elain or temporary fillings;	Nos. 6, 7, 8, gold	
THOM S	to Include	Missing teeth Nos.		HHHHHHH!	3, 11, 12, 12, 14, 15, 16, 16, 16, 16, 16, 16, 16, 16, 16, 16
		Occlusion (Type of)		76600000	
	of firs	Malposed teeth (Describe)		TOO TONGUE S	
		Removable appliances			
	hrough	Other defects		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
		Remarks	——— I —		<u>د</u>
p	n inke				
jn	surfa		(Signatus	e of dental examiner)	(Rank or rate)
77				<u></u>	
	ecord Impressi		1	ı	
·	on of same m				
HITTLE	motion		ſ		

MISTRUCTIONS FOR DATEL

# 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—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 DEAT	H		DATE REPORT - FILLED OUT _,	the American tra
OPY OF IDENTIFICATION TAG	NAME	(Last)	(First)	(Middle)
	- Andrews	I - 2	(-	(
	FILE OR SERVICE NO.	RANK OR RATE	RB4	NCH OF SERVICE
	undertram.			
	CORPS OR RESERVE CLASSIFICA	ATION	   RAC	
	The state of the s		rac	Tellmoute
AUSE OF DEATH		PLACE OF DEATH		
migraents.		THE WOOLL	, Comtral Co	rolline Missie
AME OF NEXT OF KIN (If known)		ADDRESS OF NEXT	OF KIN (If known)	
ATE OF DEATH		DATE OF BURIAL	· · · · · · · · · · · · · · · · · · ·	
AME OF CEMETERY	H2, 1944	LOCATION OF CEME	ly 26 April,	2944
		157,95 - 34 Dublien Isl	6,6 Defense and, Truk At	and Terrois May all
RAVE MARKER TYPE	PLOT No.	ROW No.	GRA	VE No.
Jepanose				
URIED AT SEA (Date)		AREA	******	
		RELIGION OF DECEA	ASED	
YPE OF RELIGIOUS CEREMONY				
YPE OF RELIGIOUS CEREMONY				
with the same of t	ODY , ,	JF NO, IDENTIFICATIO	ON TAGS, OTHER MEA	NS USED TO IDENTIFY BODY
with the same of t	ODY { }	JF NO, IDENTIFICATIO	ON TAGS. OTHER MEA.	NS USED TO IDENTIFY BODY
DENTIFICATION TAGS FOUND ON BO	2 NONE	JF NO, IDENTIFICATIO	ON TAGS, OTHER MEA	NS USED TO IDENTIFY BODY
DENTIFICATION TAGS FOUND ON BO	2 NONE	JF NO, IDENTIFICATIO	ON TAGS. OTHER MEAN, letters, etc.)	
DENTIFICATION TAGS FOUND ON BO	ZASE Yes No	JF NO, IDENTIFICATIO	ON TAGS. OTHER MEAN, letters, etc.)	UNIDENTIFIABL
DENTIFICATION TAGS FOUND ON BO	2 NONE  RSE  Yes No  BOTH HANDS ON REVERSE  Yes No	JF NO, IDENTIFICATIO	ON TAGS. OTHER MEAN, letters, etc.)	
DENTIFICATION TAGS FOUND ON BO  1  OMPLETE DENTAL CHART ON REVE  OMPLETE FINGERPRINT CHART OF	2 NONE  RSE  Vos No  BOTH HANDS ON REVERSE	JF NO IDENTIFICATION (Identification cards	ON TAGS. OTHER MEAN, letters, etc.)	UNIDENTIFIABL
DENTIFICATION TAGS FOUND ON BO 1  OMPLETE DENTAL CHART ON REVE  OMPLETE FINGERPRINT CHART OF	POR BODY AND DISPOSITION OF SAME	JF NO IDENTIFICATION Cards	PPROVED  FEB 1:  S ATTACHED TO MAR	UNIDENTIFIABL 3 1950
DENTIFICATION TAGS FOUND ON BO	POLY OF SAME	JF NO IDENTIFICATION Cards  (Identification cards)	PPROVED  FEB 1:  G ATTACHED TO MAR	UNIDENTIFIABL 3 1950 Ker 4 no
ENTIFICATION TAGS FOUND ON BO	POT OF SAME  BODY  NO  BODY  NO  NO  NO  NO  NO  NO  NO  NO  NO  N	JF NO IDENTIFICATION Cards  (Identification cards)	PPROVED  FEB 1:  G ATTACHED TO MAR	UNIDENTIFIABL 3 1950 Ker 4 no
ENTIFICATION TAGS FOUND ON BO	BOTH HANDS ON REVERSE  Yes  No  BODY AND DISPOSITION OF SAME  BODY  Yes  No  No  TOTAL STATES  NO  TOT	JF NO IDENTIFICATION Cards (Identification cards)  IDENTIFICATION TACK  TOTAL CARD CARD CARD CARD CARD CARD CARD CARD	PPROVED  FEB 1.  G ATTACHED TO MAR  TO IN WHAT KIND OF	UNIDENTIFIABLE 1950  KER Ano
DMPLETE DENTAL CHART ON REVE  DMPLETE FINGERPRINT CHART OF  ST OF PERSONAL EFFECTS FOUND  DENTIFICATION TAG BURIED WITH I	POT OF SAME  BODY  NO  BODY  NO  NO  NO  NO  NO  NO  NO  NO  NO  N	JF NO IDENTIFICATION Cards (Identification cards)  IDENTIFICATION TACK  TOTAL CARD CARD CARD CARD CARD CARD CARD CARD	PPROVED  FEB 1.  G ATTACHED TO MAR  TO IN WHAT KIND OF	UNIDENTIFIABLE 1950  KER Ano
DENTIFICATION TAGS FOUND ON BO	BOTH HANDS ON REVERSE  ON BODY AND DISPOSITION OF SAME  BODY  Yes  No  No  No  No  No  No  No  No  No  N	IF NO IDENTIFICATION CARDS (Identification cards)  IDENTIFICATION TACK  IDENTIFICATION TACK  A BURIED WITH BODY A	PPROVED  FEB 1.  G ATTACHED TO MAR  TO IN WHAT KIND OF	UNIDENTIFIABLE 1950  KER Ano
DENTIFICATION TAGS FOUND ON BO	BODY  Yes  BODY  No  BODY AND DISPOSITION OF SAME  BODY  Yes  No  THAN ESTABLISHED CEMETERY,  Bodies Buries	IF NO IDENTIFICATION (Identification cards)  IDENTIFICATION TACK  IDENTIFICATION TACK  A BURIED WITH BODY AND	PPROVED  FEB 1.  G ATTACHED TO MAR  TO IN WHAT KIND OF	UNIDENTIFIABLE 1950  KER Ano CONTAINER  ES ON REVERSE
DENTIFICATION TAGS FOUND ON BO	BODY  Yes  BODY  No  BODY AND DISPOSITION OF SAME  BODY  Yes  No  THAN ESTABLISHED CEMETERY,  Bodies Buries	IF NO IDENTIFICATION CARDS (Identification cards)  IDENTIFICATION TACK  IDENTIFICATION TACK  A BURIED WITH BODY A	PPROVED  FEB 1:  ATTACHED TO MAR  TO IN WHAT KIND OF	UNIDENTIFIABLE 1950  KER Ano CONTAINER  ES ON REVERSE
DENTIFICATION TAGS FOUND ON BO  1  DOMPLETE DENTAL CHART ON REVE  OMPLETE FINGERPRINT CHART OF  IST OF PERSONAL EFFECTS FOUND  DENTIFICATION TAGS BURIED WITH I	BODY  Yes  BODY  Yes  No  BODY  Yes  No  BODY  Yes  No  BODY  AND  BODY  Yes  No  BODY  AND  BODY  BOD	IF NO IDENTIFICATION (Identification cards)  IDENTIFICATION TACK  IDENTIFICATION TACK  A BURIED WITH BODY AND	PPROVED  FEB 1:  ATTACHED TO MAR  TO IN WHAT KIND OF	INDENTIFIABLE 1950  SER AND NO.  CONTAINER  ES ON REVERSE  E NO. GRAVE NO.
DENTIFICATION TAGS FOUND ON BO  1  OMPLETE DENTAL CHART ON REVE  OMPLETE FINGERPRINT CHART OF  IST OF PERSONAL EFFECTS FOUND  DENTIFICATION TAGS BURIED WITH I	BOTH HANDS ON REVERSE  Yes  No  BOTH HANDS ON REVERSE  Yes  No  ON BODY AND DISPOSITION OF SAME  BODY  Yes  ENT. WHAT OTHER IDENTIFICATION DATA  BODIES Buries  iddle)	IJF NO, IDENTIFICATION (Identification cards)  IDENTIFICATION TAG  LA BURIED WITH BODY A  FURNISH SKETCH AN  d on Either Side  RANK OR RATE  RANK OR RATE	PPROVED  PPROVED  FEB 1:  S ATTACHED TO MAR  IND IN WHAT KIND OF	INDENTIFIABLE 1950  SER AND NO.  CONTAINER  ES ON REVERSE  E NO. GRAVE NO.
DENTIFICATION TAGS FOUND ON BO  1 COMPLETE DENTAL CHART ON REVE COMPLETE FINGERPRINT CHART OF  UST OF PERSONAL EFFECTS FOUND  DENTIFICATION TAGS BURIED WITH I	BOTH HANDS ON REVERSE  Yes No  BOTH HANDS ON REVERSE  Yes No  BODY AND DISPOSITION OF SAME  BODY  Yes No  ENT. WHAT OTHER IDENTIFICATION DATA  R THAN ESTABLISHED CEMETERY,  Bodies Buries  iddle)  (Rank or rate	IDENTIFICATION CARDS  IDENTIFICATION CARDS  IDENTIFICATION TACK  IDENTIFICATION TACK  A BURIED WITH BODY A  ON Either Side  RANK OR RATE  RANK OR RATE  PERSON CONDUCTION  PERSON CONDUCTION	PPROVED  FEB 1.  ATTACHED TO MAR  TO IN WHAT KIND OF  FILE OR SERVICE  FILE OR SERVICE  G BURIAL RITES	INDENTIFIABLE 1950  SER AND NO.  CONTAINER  ES ON REVERSE  E NO. GRAVE NO.
DENTIFICATION TAGS FOUND ON BO  1  OMPLETE DENTAL CHART ON REVE  OMPLETE FINGERPRINT CHART OF  IST OF PERSONAL EFFECTS FOUND  DENTIFICATION TAG BURIED WITH I  F IDENTIFICATION TAGS NOT PRESE  A  IF BURIAL OTHER  ODY ON LEFT. NAME (Last, first, mid	BOTH HANDS ON REVERSE  Yes No  BOTH HANDS ON REVERSE  Yes No  BODY AND DISPOSITION OF SAME  BODY  Yes No  ENT. WHAT OTHER IDENTIFICATION DATA  R THAN ESTABLISHED CEMETERY,  Bodies Buries  iddle)  (Rank or rate	IDENTIFICATION CARDS  IDENTIFICATION CARDS  IDENTIFICATION TACK  IDENTIFICATION TACK  A BURIED WITH BODY A  ON Either Side  RANK OR RATE  RANK OR RATE  PERSON CONDUCTION  PERSON CONDUCTION	PPROVED  PPROVED  FEB 1:  S ATTACHED TO MAR  IND IN WHAT KIND OF	INDENTIFIABLE 1950  SER AND NO.  CONTAINER  ES ON REVERSE  E NO. GRAVE NO.
DENTIFICATION TAGS FOUND ON BO  1  COMPLETE DENTAL CHART ON REVE  COMPLETE FINGERPRINT CHART OF  IST OF PERSONAL EFFECTS FOUND  DENTIFICATION TAG BURIED WITH I	BOTH HANDS ON REVERSE  Yes No  BOTH HANDS ON REVERSE  Yes No  BODY AND DISPOSITION OF SAME  BODY  Yes No  ENT. WHAT OTHER IDENTIFICATION DATA  R THAN ESTABLISHED CEMETERY,  Bodies Buries  iddle)  (Rank or rate	IDENTIFICATION CARDS  IDENTIFICATION CARDS  IDENTIFICATION TACK  IDENTIFICATION TACK  A BURIED WITH BODY A  ON Either Side  RANK OR RATE  RANK OR RATE  PERSON CONDUCTION  PERSON CONDUCTION	PPROVED  PPROVED  ATTACHED TO MAR  AND IN WHAT KIND OF  FILE OR SERVICE  FILE OR SERVICE  G BURIAL RITES  WARDED	INDENTIFIABLE 1950  SER AND NO.  CONTAINER  ES ON REVERSE  E NO. GRAVE NO.

	Without smudging. Ob	1. IDENTIFICATION, I ISOLATED BURIALS		establish IDENTITY.	RKINGS OF GRAVES OF
	M G	ESTIMATED HEIGHT	ESTIMATED WEIGHT	COLOR OF EYES	COLOR OF HAIR
			ranken com	<b>ZHOLOŽNU</b>	THE STATE OF THE S
		BIRTHMARKS, SCARS, OR TA	ATTOOS		
ì	_ lahn	A CO			<u> </u>
	L. INDEX	LAUNDRY MARKS		WEAPON AND SERIAL N	D
	X	- <b>200</b>			
	L. MIDDLE	mpre (I	f actual weight and height	t are used, delete estimat	ed)
	onto	© Wrap and tie body sec	urely in a blanket, pad cov	ering, canvas or other su	table substance. Dig grave
	r ast	to five feet or in hasty bu			dy or loss of identity. Place
	of inked	•nly one body in grave.			Remove other identification
		tag and attach to grave i			orded, remove and forward esent, make a notation with
•	ride	pencil of identifying data			ent shell or other available
<del>- 1</del>	g	container which can be n			er, one (1) foot below grav
	nd in	marker. If no tag is avai	lable, write identifying dat fy grave as a military gra		s are not available, use othe
		Suitable means to identify			
	RING	2. LOCATION OF GR			olot, row, and grave number tion by means of map refer
	18 B	ences, or by reference t			must be specific, accurate
Ł	space. Do	complete. Ştand at_foot	of grave facing head to d	letermine bodies buried t	o the left and right.
	ا وُرْ				<del></del>
			dentified or fingerprints unobta y with Instructions in MMD (1		3 4 5 6 X 6 5
Mark and the	not over	para. 2318 (b) (1) & (2))(1949	Ed. para. 2234.1 & .2). This r	must be accurate. 🔑 📇	原を全てること
	not overlnk.	CHARTING EXAMPLE: (	Chart Cavities in BLACK; othe	erwise use REO)	
	^ <u>{</u>	Tooth No. 1, missing; No. 2, go	old inlay and two silver fillings o porcelain or temporary fillings		<b>图888</b> 88
	R. Ref	fixed bridge supplying missing	tooth No. 7; No. 9, porcelain cr		
	<b>⊒</b>   8	6.	9 30 33 34	CHEENCIES	X X 1/15 10 11 12 13 14 15 18
	THUMB	Missing teeth Nos	9,10,11,23,		16 15 12 13 14 15 16
	.				
	g	Occlusion (Type of)			
	i 6	9		408000	SALLOQUE.
	70	Malposed teeth (Describe)		TONGUE SIE	0000
	8 8	Removable appliances	There are a second		
	X	t l			
	EX Carouga	Other defects	Jan Present har har	<b>HHHNNNH</b>	MUMHHHH
	7. 2		17 18	10 20 21 22 23 24 25 CHEEK SIDE	26 27 28 29 36 31 32 X X X
			COMPARIS	ON WITH DECEASED NAVMED	-H4 (DENTAL RECORD)REVEALS □
	MIDDLE	MAN AND MAN AND	POSIT	TIVE IDENTITY SOME RESEN	ABLANCE NO RESEMBLANCE
	IDDCE	å	Tion	al examiner)	(Dank or rate)
	SUTTACE				
	G.	3	<u> </u>		
	,7 G		•		
	R. RING			<b>N</b> 	
	ล์				
	NG				
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	or same	<u> </u>			
	e motion			1	
	"   "	`	4		
REPORT OF BURIAL (Back)	NAV	VMED-601 (3-45)		10-43683-1	U. S. GOVERNMENT PRINTING OFFICE

#### [Resert of ] dinterment. NAVMED-401 (3-48)

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.

HIP OR STATION ATTACHED AT TIME OF DEATH	unknewn	***************************************	PATE REPORT 24	March, 1946
PY OF IDENTIFICATION TAG	NAME -	(Last)	(Firat)	(Middle)
	unknewn	X 2		
anknewn	FILE OR SERVICE No.	RANK OR RATE	BRANCH OF	
	TINKTHEWE	wnknews		OAI
	CORPS OR RESERVE CLASSIFICA	ATION	RACE	A4.00
AUSE OF DEATH	unknown	PLACE OF DEATH	MIJCH	e All
			Central Carelin	• Islands
unicnowa				
AME OF NEXT OF KIN (If known)		ADDRESS OF NEXT O	F KIN (If known)	
unknown		naknewn		
ATE OF DEATH	The second second	DATE OF BURIAL		" wang
sepresimately 28 Apri	1, 1944	LOCATION OF CEMET	tely 28 April,	1944
IAME OF CEMETERY			6 Defense and	Terreta Non
unkn <b>e</b> wn			d. Truk Atell.	-ALTERTO WEE
RAVE MARKER TYPE	PLOT No.	ROW No.	GRAVE NO.	
Japanes e			• •	44 400
URIED AT SEA (Date)		AREA		
No.				
YPE OF RELIGIOUS CEREMONY		RELIGION OF DECEAS	SED	
unknown		unknewn		
DENTIFICATION TAGS FOUND ON BODY			N TAGS, OTHER MEANS USED	TO IDENTIFY BODY
1	2 NONE	(Identification cards,	sesser 8, esc.)	
OMPLETE DENTAL CHART ON REVERSE			!	ant F
	Yes No	" . matical	ED UNITERTIF	ABLE
OMPLETE FINGERPRINT CHART OF BOT	H HANDS ON REVERSE	_ YLLKU1	EN AUINFLLA	<del></del>
	U Yes ☑ Ne	-	FEB 13 1950	
IST OF PERSONAL EFFECTS FOUND ON	BODY AND DISPOSITION OF SAME			
One pair of fi	eld shees, size 9 C	•		
DENTIFICATION TAG BURIED WITH BOD	iY	IDENTIFICATION TAG	ATTACHED TO MARKER	
	Yes 🔀 Ne		* Yes	No.
FIDENTIFICATION TAGS NOT PRESENT.	WHAT OTHER IDENTIFICATION DAT	A BURIED WITH BODY AN	D IN WHAT KIND OF CONTA	LINER
	None.	*	· •	
F RUPLAL DITHER TO	HAN ESTABLISHED CEMETERY,	FURNISH SKETCH AND	MAP DEFEDENCES ON	DEVERSE
	,			
	Bodies Burie	d on Either Side		
BODY ON LEFT. NAME (Last, first, middle		RANK OR RATE	FILE OR SERVICE NO.	GRAVE No.
1.				
ODY ON RIGHT, NAME (Last, first, midd	le)	RANK OR RATE	FILE OR SERVICE NO.	GRAVE NO.
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
PERSON REPORTING BURIAL (Name)	(Rank or rate	PERSON CONDUCTING	BURIAL RITES	
	lous Burglet			
IN REBURIAL, GIVE LOCATION OF PREV	IOUS BURIAL	VERHEIED AND FORW	ARDED _	
		1 /v land	, L	
		L. H. MARITY	i. Lt. 1	ie) KC
		(Name)	(Rank)	(Title)

7	When without smu	1. IDENTIFICATION, ISOLATED BURIAL					
THUMB	en unidentific smudging.	four (4) sets of finge		ilable fingers.	COLOR OF EYES	coLOR C	F HAIR
	- 7	unknowa	บทไทอน	<u> </u>	unknewn	1000	KDOAD
	ed, take rolled Obtain sharp, o	BIRTHMARKS, SCARS, OR	TATTOOS				
INDEX	rolled i	LAUNDRY MARKS			WEAPON AND SERIAL	Na.	
<del>_</del>	impres		(If actual weight	and height a	re used, delete estim	ated)	<u> </u>
ר אוסטרש	impression of fingerprints. ( lear contrast of inked ridges	Wrap and tie body se to five feet or in hasty to enly one body in grave tag and attach to grave to BuPers, Marine Cor pencil of identifying da container which can be	ourials, to sufficie  E. Securely faste  marker (when  ps, or Coast Gui  ta on form in du	nt depth to pro en one identi body is disin ard, as indica uplicate, place	event destruction of fication tag to body, terred or properly n ted). If no tag is p in bottle, canteen,	body or loss of it Remove other ecorded, remove present, make a spent shell or c	dentity. Place r identification e and forward notation with other available
L. RING	Cleanse fingers and intervening	marker. If no tag is av suitable means to iden 2. LOCATION OF G	ailable, write ide tify grave as a m	ntifying data o nilitary grave.	n marker. When pe	egs are not avail	able, use othe
م	ers of all foreign ning space. Do	For all other burials, pr ences, or by reference complete. Stand at for	epare sketch in s to prominent, p	space provided ermanent lan	l below; and give loo dmarks. Informatio	cation by means on must be spe	of map refer
	matter. Roll finger not overink.	If the body is otherwise u dental conditions in conform para. 2318 (b) (1) & (2)1(19)  CHARTING EXAMPLE: Tooth No. 1, missing; No. 2, crown; No. 4, cavity; No. 5, t fixed bridge supplying missing	ity with instructions 45 Ed. para. 2234.1 (Chart Cavities in igold inlay and two s wo porcelain or temp	In MMD (1942 & .2). This must be a standard of the standard of	1, 1938-43 Ed. t be accurate. Ise use RED) o. 3, full gold os. 6, 7, 8, gold		
ТНОМВ	to include crease	Missing teeth Nos. 8, 9 24, 25, 27, 28, 29 Occlusion (Type of)	<u> </u>	ÄÄÄ			
R. 140	e of first jo	Malposed teeth (Describe			DROM.	ADQ(	
JE X	Int through 180°	Other defects Lever	Nenc.	<b>BB</b>			当古巴
R. MIDDLE	180° on inked surface	Remarks #8, 9, 10, 1 28, 29, were knee	1,25,23,24 ked ext.	POSITIVE	WITH DECEASED NAVME  IDENTITY SOME RE  Selental examiner) Lt	SEMBLANCE .	ecord) reveals no resemblance  USNR
R. RING	Record			<b>Z</b>			_
R. LITTLE	impression of same motion	-			<del></del>		
	g	,	. *	ı			

## 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—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.

				والمستعدد والمستعدد
SHIP OR STATION ATTACHED AT TIME OF DEATH	unknown		DATE REPORT FILLED OUT	24 March, 1946
COPY OF IDENTIFICATION TAG	NAME	(Last)	(First)	(Middle)
		X = 2		
	FILE OR SERVICE NO.	RANK OR RATE		H OF SERVICE
unknown	unknown	ımknown	,,	nknown
	CORPS OR RESERVE CLAS		RACE	H11110 1944
	unknown		11	nknown
CAUSE OF DEATH		PLACE OF DEATH		
unknown		Truk Atoll	, Central Caro	line Blands
NAME OF NEXT OF KIN (If known)		ADDRESS OF NEXT	OF KIN (If known)	
unknown		unk	nown	
DATE OF DEATH		DATE OF BURIAL		
approximately 28 Apri	1. 1944	approximate	ly 28 April, 1	.944
NAME OF CEMETERY		LOCATION OF CEME	TERY	
unknom			8.6 Defense a and, Truk Atol	nd Terrain Map,
GRAVE MARKER TYPE	PLOT No.	ROW NO.	GRAVE	
Jap <b>anese</b>	***********			
BURIED AT SEA (Date)	<u></u>	AREA	<del></del>	
No				
TYPE OF RELIGIOUS CEREMONY		RELIGION OF DECE	ASED	
unknown		un	known	
IDENTIFICATION TAGS FOUND ON BOD	;	IF NO IDENTIFICATI	ON TAGS, OTHER MEANS	USED TO IDENTIFY BODY
1	2 NONE		.,	
COMPLETE DENTAL CHART ON REVERS		1		_ a. <b></b>
	Yes No		MININE	NTICIARIF
COMPLETE FINGERPRINT CHART OF B	OTH HANDS ON REVERSE  Yes No	APP	OVED UNIDE	MIN WAR
LIST OF PERSONAL EFFECTS FOUND &	N BODY AND DISPOSITION OF S		cep 1	3 1950 ·
One	pair of field sho	es, size 9 C.	, to	
IDENTIFICATION TAG BURIED WITH BO	DDY	IDENTIFICATION TA	G ATTACHED TO MARKE	₹
	Yes 🛣 No		Y++	<b>X</b> No
IF IDENTIFICATION TAGS NOT PRESENT	T. WHAT OTHER IDENTIFICATION			ONTAINER
	None -	•		
10 - N / F -			· · · · · · · · · · · · · · · · · · ·	·
IF BURIAL OTHER	THAN ESTABLISHED CEMETE	BY FURNISH SKETCH AL	IR MAS DEFEDENCES	AN DEVERSE
			TO MAD RELEGIOUS	
	Bodies I	Buried on Either Side		
BODY ON LEFT. NAME (Last, first, midd	le)	RANK OR RATE	FILE OR SERVICE	O. GRAVE NO.
BODY ON RIGHT. NAME (Last, first, mic	ddle)	RANK OR RATE	FILE OR SERVICE	NO. GRAVE NO.
PERSON REPORTING BURIAL (Name)	(Rank c	PERSON CONDUCTIF	NG BURIAL RITES	
IN REBURIAL, GIVE LOCATION OF PRE	VIOUS BURIAL	VERIFIED AND FOR	WARDED	<del></del>
		WM re	ilis	
		L. R. MART	IN Lt.(	g) MC USNR
		(Nam	e) (Ra	nk) (Title)

REPORT OF BURIAL (Back)

NAVMED-601 (3-45)

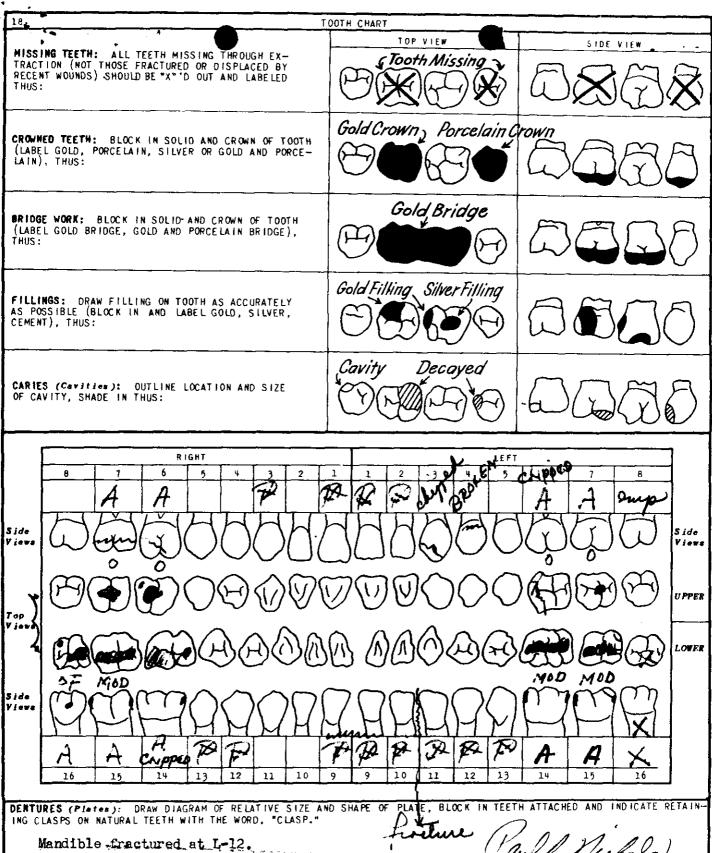
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18-43683-1 💢 U. S. GOVERNMENT PRINTING OFFICE

	IDENTIF	FICATION D	ATA			ì
REMAINS OF UNKNOWN X-70					2. DATE OF RE 22 James	ery 1950
. NAME OF CEMETERY		4. PLOT	5 ROW	6. GRAVE	7. DA	ATE OF
				T	DISINTERMENT	REINTERMENT
Cemetery #2, A	gat, Guam	4	44	5		
		ICAL DESCRIPTIO			·	
. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	l l	R OF HAIR		L1. RACE	
170	51941 OFFICIAL IDENTIFICATION F		JTD		UT	<u>.D</u>
GIVE DESCRIPTION OF THE	TOOS OR SCARS ON BODY AND/	/OR SUCH INFORM	ATION OBT	AINED FROM	OTHER SOURCES	
	7	NONE	•			
. WAS BODY BURNED?	TO WHAT EXTENT?					
YES A NO						
. WAS BODY MANGLED?	TO WHAT EXTENT?			···		
YES A NO	EALED FRACTURES AND BONE M					
		ONE			,	
SERVICE, ETC. (If laun	THING, EQUIPMENT AND PERSO dry marke are indistinct a on when facilities are not	such notation w	hould be	made and a	PE, COLOR, \$12 pecimen forwar	E, MARKINGS, ded through
	, у	ONE				

QNC FORM PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE



The second secon

PAUL R. NICHOLS Chief, Identification Section

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

Chief, Identification Section

PAUL R. NICHOLS

SIGNATURE

Paul R. Wikelo

REV 15 MAR 46 1194

Transport Commander	(*I*)
01	
	JIHS 'Z
ROBERT G. SHOWDEN, 1st. Lt. Ind od //ky	87
SIGNATURE OF RECEIVER	Int OS
NAME OF CONVOYER	
PORT STORAGE OFFICER (SAIPAN MI)	(II.
DED	I. SHIF
DDIAL TRANSFER	RECORD OF CUST

**3**TAd

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FROM 10	
6 Sulpace	
SIGNATURE OF RECEIVER	SIGNIATURE OF SHIPPERING TO THE SIGNIATURE OF SHIPPERING TO THE SIGNIAL STATE OF THE SIGNIAL
	(# NACH YEAR TORINGA YE)
NAME OF CONVOYER	KIND OF CONVEYANCE
OT PROM	
S, SHIPPED 5. SHIPPED	
SIGNATURE OF RECEIVER	SIGNATURE OF SHIPPER
NAME OF CONVOYER	KIND OF CONVEYANCE
01	- LROM
4° SHIBBED	
SCHOOLE OF THE CAPT AND ALE AN	SIGNATURE OF SHIPPER
all discounting of the contract of the contrac	
NAME OF CONVOYER	LENCK KIND OF CONVEYENCE
ACRS MAUSTEUM	MOTULY MUSTAL TAGE
FROM 3. SHIPPED	
· 120 8 horamen 6 088.	ROBERT C. SUOWDEN, 1st. Lt. Inf. 648ct.
SIGNATURE OF RECEIVER	SIGNATURE OF SHIPPER
USAT DALTON VICTORY	TRUCK
Trens port Commender	
O1	AGRS PORT (SAIPAN, M.I.)
**************************************	FROM 2. SHIPP
WILL THE TOTAL OF THE CHOICE TO THE CONT	84 qmo tam TTGI H VAHCU
POBLER C SNOWDEN 10+ 1+ 100 30/4V	In or And
SICHARIBE OF DECENTED	TRUCK OF SHIPPER DATE
NAME OF CONVOYER	
TORT STORAGE OFFICER (SAIPAN MI)	(IL NVAIVS) HARTCSAVE SA
1. SHIPPED	

SIGNATURE OF RECEIVER

NAME OF CONVOYER

SIGNATURE OF RECEIVER

NAME OF CONVOYER

J. SHIPPED

3TA0

DATE

SIGNATURE OF SHIPPER

KIND OF CONVEYANCE

SIGNATURE OF SHIPPER

KIND OF CONVEYANCE

**FROM**