FILE IDENTIFICATION TOPPER

FILE NUMBER	ant D	un and fi	o XA/		
SUBJECT	NIGH TON	man f	<u> </u>	······································	
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NC FORM 1121		·			

RESTRICTED

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(Revo. r. 1945) (Super ores GRS Form 1)	· • • • • • • • • • • • • • • • • • • •	REPORT OF (AR 30-1810 at		=	12	F REPORT	7
'* Imprint Identification	Tag If Possible.	Section 1.—IDENTIFICATION,				-/ 	
DO NOT T		NAME (Last, first, middle initial)		· <u> </u>	SERIA	AL No.	
	\	UNKNOWN X-71	Вс	ox No. 85	0		
REPORT	OF O	GRADE	ORGANIZATION		BRAN	CH OF SERVI	CE
DISINT	ERMENT /						
		RACE	RELIGION		I IE OTNER TH	(AN U.S. DEA	ID CRUE
		TOTAL	ALLIO OIL		NAME OF C		(O, G11L
PLACE OF DEATH		CAUSE OF DEATH	<u> </u>	-	DATE	OF DEATH	
GUAM		Unk			}		
EMERGENCY ADDRESSEE (N	ame, relationship, an	d address)					
<u> </u>							
IDENT!FICATION TAGS FOUR	ND ON BODY	IF NO TAGS FOUND ON BODY,	DESCRIBE MEANS C	F IDENTIFICATION (f unidentified, fi	Il in section 3	on reperse)
7: 1		2 cross tage	" one "	says fint	now	・フ/ '	
WERE SUBSTITUTE TAGS PRO	OVIDED?(Yes or No)	the other bay	- Unsa	ntified.	7/1\ In h		;
no				acimor.	er -v	T.	
LIST PERSONAL EFFECTS FO	UND ON BODY AND	1,175	ndible a	nd masci	11 mi		
		Aut	h hibia	and skul	-	in	?
		lefi	fibula	missing,	bet !	4	. Lat.
		Lil	t Lange			·	<i></i>
-			- Acces	era and ha	dus	also b	. ke
:			 -		dus	also b	roken
		lished cometery, furnish sketc	 -		dus	also b	roken
Section 2.—BURIAL If or NAME, NUMBER, COORDINAT		lished cometery, furnish sketc	 -		dus	also b	roken
		lished cometery, furnish sketc	h and map coord		dus	also b	rolen
[lished cometery, furnish sketc	h and map coord	inates on reverse.	PLOT No.	ROW No.	GRAVE NO.
NAME, NUMBER, COORDINAT	TES, AND LOCATION	dished cometery, furnish sketch of CEMETERY Agat, Catry	h and map coord	inates en revetse.		ROW No.	
NAME, NUMBER, COORDINAT	TES, AND LOCATION	Agat, Cutry BURIED IN (Shroud, blanked, or w	#2 Guan	TYPE OF GRAVE	PLOT No.	ROW No.	GRAVE NO.
NAME, NUMBER, COORDINAT	TES, AND LOCATION	dished cometery, furnish sketch of CEMETERY Agat, Catry	#2 Guan	TYPE OF GRAVE	PLOT No.	ROW No.	6
NAME, NUMBER, COORDINAT DATE OF BURIAL WAS THIS A REBURIAL?	TES, AND LOCATION	Agat, Cutry BURIED IN (Shroud, blanked, or w	#2 Guan	TYPE OF GRAVE	PLOT No.	ROW No.	
NAME, NUMBER, COORDINAT DATE OF BURIAL WAS THIS A REBURIAL? (Yes or no) Type of religious	HOUR	Agat, Cutry BURIED IN (Shroud, blanked, or w	#2 Guan ame of other) DINATES OF PREVIO	TYPE OF GRAVE MARKER DUS CEMETERY, AND L ON TAGS NOT USED,	PLOT No. OCATION OF G PLOT No.	ROW No.	GRAVE NO.
DATE OF BURIAL WAS THIS A REBURIAL? (Yes or no)	HOUR	Agat Cutry BURIED IN (Shroud, blanket, or m	#2 Guan ame of other) DINATES OF PREVIO	TYPE OF GRAVE MARKER DUS CEMETERY, AND L	PLOT No. OCATION OF G PLOT No.	ROW No.	GRAVE NO.
NAME, NUMBER, COORDINAT DATE OF BURIAL WAS THIS A REBURIAL? (Yes or no) TYPE OF RELIGIOUS CEREMONY	HOUR IF A REBURIAL, I	Agat, Cutry BURIED IN (Shroud, blankel, or m INDICATE NAME, NUMBER, COORE	#2 Guan ame of other) DINATES OF PREVIO	TYPE OF GRAVE MARKER DUS CEMETERY, AND L ON TAGS NOT USED,	PLOT No. OCATION OF G PLOT No. DESCRIBE IDE	ROW NO. RAVE ROW NO. ENTIFICATION	GRAVE NO.
NAME, NUMBER, COORDINAT DATE OF BURIAL WAS THIS A REBURIAL? (Yes or no) Type of religious	HOUR IF A REBURIAL. I PERSON CONDUC	Agat Cutry BURIED IN (Shroud, blanket, or m	#2 Guan ame of other) DINATES OF PREVIO	TYPE OF GRAVE MARKER DUS CEMETERY, AND L ON TAGS NOT USED,	PLOT No. OCATION OF G PLOT No. DESCRIBE IDE	ROW NO. RAVE ROW NO. ENTIFICATION	GRAVE NO.
NAME, NUMBER, COORDINAT DATE OF BURIAL WAS THIS A REBURIAL? (Yes or no) TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIE	HOUR IF A REBURIAL. I PERSON CONDUC	Agat, Cutry BURIED IN (Shroud, blanket, or m INDICATE NAME, NUMBER, COORD STING BURIAL RITES	#2 Guan ame of other) DINATES OF PREVIO	TYPE OF GRAVE MARKER DUS CEMETERY, AND L ON TAGS NOT USED,	PLOT No. OCATION OF G PLOT No. DESCRIBE IDE	ROW No.	GRAVE NO.
NAME, NUMBER, COORDINAT DATE OF BURIAL WAS THIS A REBURIAL? (Yes or no) TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIE	HOUR IF A REBURIAL, I PERSON CONDUC	Agat, Cutry Agat, Cutry BURIED IN (Shroud, blankel, or m INDICATE NAME, NUMBER, COORD STING BURIAL RITES FIFICATION TAG ATTACHED TO REER (Yes or no)	#2 Guan ame of other) DINATES OF PREVIO	TYPE OF GRAVE MARKER DUS CEMETERY, AND L ON TAGS NOT USED,	PLOT No. OCATION OF G PLOT No. DESCRIBE IDE	ROW NO. RAVE ROW NO. ENTIFICATION	GRAVE NO.
NAME, NUMBER, COORDINAT DATE OF BURIAL WAS THIS A REBURIAL? (Yes or no) TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIE BODY (Yes or no) BODY BURIED ON DECEASED	HOUR IF A REBURIAL, I PERSON CONDUCTOR O LEFT, NAME (Last,	Agat, Cutry Agat, Cutry BURIED IN (Shroud, blanket, or m INDICATE NAME, NUMBER, COORD CTING BURIAL RITES RIFICATION TAG ATTACHED TO RKER (Yes or no)	#2 Guan ame of other) IF IDENTIFICATI CONTAINERS B	TYPE OF GRAVE MARKER DUS CEMETERY, AND L ON TAGS NOT USED, URIED WITH BODY	PLOT NO. OCATION OF G PLOT NO. DESCRIBE IDE	ROW NO. RAVE ROW NO. ENTIFICATION ON GRAV	GRAVE NO. DATA AND E NO.
NAME, NUMBER, COORDINAT DATE OF BURIAL WAS THIS A REBURIAL? (Yes or no) TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIE BODY (Yes or no) BODY BURIED ON DECEASED	HOUR IF A REBURIAL, I PERSON CONDUCT TO WITH IDENT MAR D LEFT, NAME (Last,	Agat, Cutry Agat, Cutry BURIED IN (Shroud, blanked, or m INDICATE NAME, NUMBER, COORE CTING BURIAL RITES RIFICATION TAG ATTACHED TO REER (Yes or no)	#2 Guan ame of other) IF IDENTIFICATI CONTAINERS B	TYPE OF GRAVE MARKER DUS CEMETERY, AND L ON TAGS NOT USED, URIED WITH BODY	PLOT NO. OCATION OF G PLOT NO. DESCRIBE IDE	ROW NO. RAVE ROW NO. ENTIFICATION ON GRAV	GRAVE NO.
NAME, NUMBER, COORDINAT DATE OF BURIAL WAS THIS A REBURIAL? (Yes or no) TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIE BODY (Yes or no) BODY BURIED ON DECEASED	HOUR IF A REBURIAL, I PERSON CONDUCT TO WITH IDENT MAR D LEFT, NAME (Last,	Agat, Cutry Agat, Cutry BURIED IN (Shroud, blanked, or m INDICATE NAME, NUMBER, COORE CTING BURIAL RITES RIFICATION TAG ATTACHED TO REER (Yes or no)	#2 Guan ame of other) IF IDENTIFICATI CONTAINERS B	TYPE OF GRAVE MARKER DUS CEMETERY, AND L ON TAGS NOT USED, URIED WITH BODY	PLOT NO. OCATION OF G PLOT NO. DESCRIBE IDE	ROW NO. RAVE ROW NO. ENTIFICATION ON GRAV	GRAVE NO. I DATA AND E No.
NAME, NUMBER, COORDINAT DATE OF BURIAL WAS THIS A REBURIAL? (Yes or no) TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIE BODY (Yes or no) BODY BURIED ON DECEASED	HOUR IF A REBURIAL, I PERSON CONDUCT O LEFT, NAME (Last,	Agat. Cutry Agat. Cutry BURIED IN (Shroud, blanket, or m INDICATE NAME, NUMBER, COORD CTING BURIAL RITES FIFICATION TAG ATTACHED TO RKER (Yes or no) st, first, middle initial)	#2 GUAR ame of other) DINATES OF PREVIO	TYPE OF GRAVE MARKER DUS CEMETERY, AND L ON TAGS NOT USED, URIED WITH BODY	PLOT NO. OCATION OF G PLOT NO. DESCRIBE IDE	ROW NO. RAVE ROW NO. ENTIFICATION ON GRAV	GRAVE NO. I DATA AND E NO.
DATE OF BURIAL WAS THIS A REBURIAL? (Yes or no) TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIE BODY (Yes or no) BODY BURIED ON DECEASED BODY BURIED ON DECEASED SIGNATURE QE PERSON PRE	HOUR IF A REBURIAL, I PERSON CONDUCTOR DED WITH IDENT MAR D LEFT, NAME (Last, D RIGHT, NAME (Last, C PARING REPORT)	Agat. Cutry Agat. Cutry BURIED IN (Shroud, blanket, or m INDICATE NAME, NUMBER, COORD CTING BURIAL RITES FIFICATION TAG ATTACHED TO RKER (Yes or no) st, first, middle initial)	#2 Guana ame of other) IF IDENTIFICATI CONTAINERS B	TYPE OF GRAVE MARKER DUS CEMETERY, AND L ON TAGS NOT USED, URIED WITH BODY	PLOT NO. OCATION OF G PLOT NO. DESCRIBE IDE ORGANIZATIO	ROW NO. RAVE ROW NO. ENTIFICATION ON GRAV	GRAVE NO. I DATA AND E NO.
DATE OF BURIAL WAS THIS A REBURIAL? (Yes or no) TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIE BODY (Yes or no) BODY BURIED ON DECEASED BODY BURIED ON DECEASED SIGNATURE OF PERSON PRE	HOUR IF A REBURIAL, I PERSON CONDUCTOR D LEFT, NAME (Last, MARK) PARING REPORT	Agat. Cutry Agat. Cutry BURIED IN (Shroud, blanket, or many) INDICATE NAME, NUMBER, COORD CTING BURIAL RITES TIFICATION TAG ATTACHED TO REER (Yes or no) St., first, middle initial)	#2 Guana ame of other) IF IDENTIFICATI CONTAINERS B	TYPE OF GRAVE MARKER DUS CEMETERY, AND L ON TAGS NOT USED, URIED WITH BODY SERIAL NO.	PLOT No. OCATION OF G PLOT No. DESCRIBE IDE ORGANIZATIO	ROW NO. RAVE ROW NO. ENTIFICATION ON GRAV	GRAVE NO. I DATA AND E NO.
NAME, NUMBER, COORDINAT DATE OF BURIAL WAS THIS A REBURIAL? (Yes or no) TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIE BODY (Yes or no) BODY BURIED ON DECEASED BODY BURIED ON DECEASED SIGNATURE OF BERSON PRE	HOUR IF A REBURIAL I PERSON CONDUCT DEBUTE HOUR DESTRUCT PERSON CONDUCT DESTRUCT PERSON CONDUCT PERSON	Agat. Cutry Agat. Cutry BURIED IN (Shroud, blanket, or m INDICATE NAME, NUMBER, COORD CTING BURIAL RITES FIFICATION TAG ATTACHED TO RKER (Yes or no) st, first, middle initial)	#2 GUAR ame of other) DINATES OF PREVIO	TYPE OF GRAVE MARKER DUS CEMETERY, AND L ON TAGS NOT USED, URIED WITH BODY SERIAL NO. SERIAL NO. SERIAL NO.	PLOT NO. A OCATION OF G PLOT NO. DESCRIBE IDE ORGANIZATIO ORGANIZA	ROW NO. RAVE ROW NO. ENTIFICATION ON GRAV	GRAVE NO. I DATA AND E NO. Inf.

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	Section 3.—CNI	DENTIFIED REI	MAINS,		, , , , , , , , , , , , , , , , , , , 	
TEFT TITLE FINGER	nlanes vehicle	care will be to nanatomical of number; positions	don or body to	und in airpianes, v	renicies, and tanks; a	lentity of unidentified re- ther," such as shoe size, nd serial numbers of air- ingers and thumbs in the he condition of each and Tooth chart will not be
LEFT RING FINGER			tingerprints ai	COLOR OF HAIR		CARS, OR TATTOOS
LEFT MIDDLE FINGER	WEAPON AND SER		LAUNDRY	MARKS	WHERE BODY WA	IS BURIED OR FOUND
LEFT INDEX FINGER	FILLINGS .		SILVER FILL GOLD FILLIN	ing ig	4 3000	\hat{Q}_{Ω^3}
THUMB	CAVITIES	****	CAVIT	ξ _D 6	5 OON UPPER	17845 17845 17847
RIGHT THUMB	MISSING TE	D'	TOCTH MISSII	D IAG	RAM REPRESENTS TH	E NOUTH WIDE OPEN
RIGHT INDEX FINGER	BRIDGE WOR		GOLD B	r H	14 LOWER 13 CONTROL 12) is (i) i4 (i) i3 (i) i2
RIGHT RIGHT	FURNISH SKETCH	AND MAP REFE	RENCE AND COOL	RDINATES FOR BURIA	10 9 9	BLISHED CEMETERY
RIGHT RING FINGER	REMARKS:					
RIGHT	•				• •	

REPORT OF BURIAL NAMED—401 (2-45)

PY TO:

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

Communer Marianas;

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.

COPY OF IDENTIFICATION TAG	NAME	(Lasi)	(Received from	Received from Truk marked		
	ULT	CHOME X-71	(x-3)			
	FILE OR SERVICE NO.	RANK OR RATE		OF SERVICE		
	Unknown	Unknown	U	nknova		
	CORPS OR RESERVE CLASSI	FICATION	RACE	n Office		
	Unkr		i onk	n own		
AUSE OF DEATH		PLACE OF DEATH				
nkn ow n		Unknown	L			
NAME OF NEXT OF KIN (If known)			OF KIN (If known)			
DATE OF DEATH		DATE OF BURIAL				
Unknown			ed Guam. lo Apr	11 1946		
NAME OF CEMETERY		LOCATION OF CEME	TERY			
Army, Navy, Marine (Cemetery #2	A to G	uen			
GRAVE MARKER TYPE	PLOT No.	ROW No.	GRAVE NO).		
Cross	4	44		6		
BURIED AT SEA (Date)		AREA				
TYPE OF RELIGIOUS CEREMONY		RELIGION OF DECE	ASED			
Full Military Honors		Unknown				
DENTIFICATION TAGS FOUND ON BODY	· · · · · · · · · · · · · · · · · · ·	IF NO IDENTIFICATI	ON TAGS, OTHER MEANS US	ED TO IDENTIFY BOD		
1	2 MONE	(Identification card				
COMPLETE DENTAL CHART ON REVERSI	E Yes 🛣 No					
COMPLETE FINGERPRINT CHART OF BO	TH HANDS ON REVERSE					
	Yes 🙀 No					
LIST OF PERSONAL EFFECTS FOUND OF	BODY AND DISPOSITION OF SAI	ME				
IDENTIFICATION TAG BURIED WITH BOI	ny .	IDENTIFICATION TO	G ATTACHED TO MARKER			
IDENTIFICATION TAG BUKIEU WITH BO	□ Yes 🙀 Nα	IDENTIFICATION TA	G ATTACHED TO MARKER	₩ No		
IF IDENTIFICATION TAGS NOT PRESENT		DATA BURIED WITH BODY				
		· · · · · · · · · · · · · · · · · · ·				
15 Bilb A7425 -	HAN ESTABLISHED CEMETER	OV EUDNIEU SPETAN	NA MAR REFERENCES AT	M DEVERSE		
IF BURIAL UIMER T	MAN ESTABLISHED CEMETER	II, FURNISH SKEICH A	NO MAE REFERENCES OF	- MEASURE		
		uried on Either Side				
BODY ON LEFT. NAME (Last, first, middle	e)	RANK OR RATE	FILE OR SERVICE NO.			
UNKNOTT X=72 BODY ON RIGHT, NAME (Last, first, mid	313		Leve on service	7		
	416)	RANK OR RATE	FILE OR SERVICE NO.	1		
UNKNOWN X-70	(Rank or	sate) PERSON CONTINUE	Na BORIAL RUES	5		
The Management	USEC	1 6-9-6-4-9-4				
IN REBURIAL, GIVE LOCATION OF PRE		THO MYTON		CHAPLAIN		
		W. F. VEA	тсн сарт	USNo		

... INSTRUCTIONS FOR BUI

i. THUMB	When without sm	1. IDENTIFICATION, PREPARATION OF BODY, BURIAL AND MARKINGS OF GI ISOLATED BURIALS. Have body examined to establish IDENTITY. If body is uniden four (4) sets of fingerprints of all available fingers. Complete the following:					
<u>.</u>	unident udging.		TED WEIGHT	COLOR OF EYES	COLOR OF HAIR		
r	When unidentified, take rolled impression of ithout smudging. Obtain sharp, clear contrast	BIRTHMARKS, SCARS, OR TATTOOS LAUNDRY MARKS		WEAPON AND SERIAL N	D.		
IDDEX	roited imp		weight and height	are used, delete estimat			
L. MIDDLE L. RING	fingerprints. Cleanse fingers of all foreign of inked ridges and intervening space. Do	Wrap and tie body securely in a to five feet or in hasty burials, to so nly one body in grave. Securely tag and attach to grave marker (voto BuPers, Marine Corps, or Coapencil of identifying data on form container which can be made water marker. If no tag is available, wrisuitable means to identify grave a 2. LOCATION OF GRAVE: Refor all other burials, prepare skettences, or by reference to promin complete. Stand at foot of grave	blanket, pad cover ufficient depth to p y fasten one ident when body is dising st Guard, as indicated in duplicate, place ertight, bury one we ite identifying data as a military grave eport burials in esta ch in space provided	ring, canvas or other suitevent destruction of boilification tag to body. Interred or properly rectated). If no tag is present in bottle, canteen, spith remains and the other on marker. When pegot. ablished cemeteries by ped below; and give local ndmarks. Information	itable substance. Dig grave dy or loss of identity. Place Remove other identification orded, remove and forward esent, make a notation with lent shell or other available er, one (1) foot below graves are not available, use other lotor, row, and grave numberation by means of map refermust be specific, accurate.		
LITTLE	foreign matter. Roll finger e. Do not overlak.	If the body is otherwise unidentified of dental conditions in conformity with Instrumental Chart (2) (1945 Ed. para. CHARTING EXAMPLE: (Chart Cavit Tooth No. 1, missing: No. 2, gold Inlay and crown; No. 4, cavity; No. 5, two porcelain fixed bridge supplying missing tooth No. 7.	ructions in MMD (19- 2234.1 & .2). This mu- ties in BLACK; other- id two silver fillings; or temporary fillings;	42, 1938–43 Ed. ust be accurate. wise use RED) No. 3, full gold Nos. 6, 7, 8, gold			
R. THUME	er to include	Missing teeth Nos.	- 1 : :	HHHMHMM CHEEK SIDE	10 11 12 13 14 15 16 WMHHHHHH		
	e crease	Occlusion (Type of)		ABBBBBBC			
д =	of first	Malposed teeth (Describe)		TOO S			
INDEX	joint thr	Removable appliances					
	nt through 180°	Other defects	17 10	10 20 21 22 23 24 25 CHEEN SIDE	26 27 28 29 30 31 32		
א. אוסטרב		Remarks		VE IDENTITY SOME RESE	H-4 (DENTAL RECORD) REVEALS MBLANCE NO RESEMBLANCE		
	on inked surface		(Signatur	e of dental examiner)	(Rank or rate)		
R. RING	ice. Record impression of same			ī			
ת נודונב	on of same motion			÷ •			

REPORT OF BURIAL

FY TO:

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

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.

OPY OF IDENTIFICATION TAG	NAME	(Last)	(First)	(Middle)
	UN	kiiovin 1-71	(Received from	Truk marked
	FILE OR SERVICE NO.	RANK OR RATE		OF SERVICE
	linknown.	Unknown	l	iaknewa
	CORPS OR RESERVE CLASSII	FICATION	RACE	
	Linku			
AUSE OF DEATH		PLACE OF DEATH		
Johnson		Vokacen	•	
NAME OF NEXT OF KIN (If known)		ADDRESS OF NEXT		
			•	
DATE OF DEATH		DATE OF BURIAL		
Unknoun		Reinter	red Guam. lo Apr	11 1946
NAME OF CEMETERY	· · · · · · · · · · · · · · · · · · ·	LOCATION OF CEME		
A	a Camakaan #2			
Army, Nevy, Marin		ROW NO.		
RAYE MARRER TYPE	PLOT No.	NOW NO.	GRAVE NO	
BURIED AT SEA (Date)		AREA		•
·				
TYPE OF RELIGIOUS CEREMONY	<u> </u>	RELIGION OF DECE	ASED	
Pull Military Honor		Unicacien		
DENTIFICATION TAGS FOUND ON BO	YOU	IF NO IDENTIFICATION (Identification card	ON TAGS, OTHER MEANS US	ED TO IDENTIFY BOD
	2 NONE		, , , , , , , , , , , , , , , , , , , ,	
COMPLETE DENTAL CHART ON REVE				
COMPLETE FINGERPRINT CHART OF	Yes No			
COMPLETE PINGERPRINT CHART OF	Yes No			
LIST OF PERSONAL EFFECTS FOUND	ON BODY AND DISPOSITION OF SAM	AE.		
		·- -		
			ı	
DENTIFICATION TAG BURIED WITH E	BODY	IDENTIFICATION TA	G ATTACHED TO MARKER	
	Yes No		Yes	No.
F IDENTIFICATION TAGS NOT PRESE	NT, WHAT OTHER IDENTIFICATION D	DATA BURIED WITH BODY A	ND IN WHAT KIND OF CON	TAINER
IF BURIAL OTHER	THAN ESTABLISHED CEMETER	Y, FURNISH SKETCH AN	ID MAP REFERENCES OF	REVERSE
	D 1: D	Prof. Co. I		
BODY ON LEFT. NAME (Last, first, mic		ried on Either Side	FILE OR SERVICE NO.	GRAVE NO.
				•
BOD BER HAR NAME (Bast, first, "	niddle)	RANK OR RATE	FILE OR SERVICE NO.	GRAVE NO.
UNIXON I-70		1		5
PERSON REPORTING BURIAL (Name)	(Rank or	rate) PERSON CONDUCTIN	G BURIAL RITES	
E. A. HATTHES 1.	LLL. BRIC	VERIFIED AND FOR	C. MILITE	CHAPT ATN
IN REBURIAL, GIVE LOCATION OF PI	REVIOUS BURIAL	VERIFIED AND FOR	WARDED	
		76 F W (No. 1)	TY'H CAP#	neno
		4 日 日 1 日 1 日 1 日 1 日 1 日 1 日 1 日 1 日 1	No. of the last of	(Title)

T.		INSTRUCTIONS F	OR BUILD	
Without smudg	1. IDENTIFICATION, PRE ISOLATED BURIALS. I four (4) sets of fingerprin	Have body examined to ex	stablish IDENTITY.	RKINGS OF GRAVES OF If body is unidentified, take ing:
nidentifiu deing.	ESTIMATED HEIGHT	STIMATED WEIGHT	COLOR OF EYES	COLOR OF HAIR
Jambain &	BIRTHMARKS, SCARS, OR TATTO	pos		
Janzak [®] È	<u> </u>			
<u>ح</u> ا الله ع	LAUNDRY MARKS		WEAPON AND SERIAL N	10.
^ ^	(If a	ctual weight and height a) re used, delete estimat	
con		-		
impression of fingerprints. lear contrast of inked ridges L. MIDDLE	to five feet or in hasty burial only one body in grave. So tag and attach to grave man	s, to sufficient depth to pr ecurely fasten one identi ker (when body is disin	event destruction of bo fication tag to body, terred or properly red	pitable substance. Dig grave ody or loss of identity. Place Remove other identification corded, remove and forward
ridges	pencil of identifying data or container which can be mad	n form in duplicate, place e watertight, bury one wi	e in bottle, canteen, s th remains and the oth	esent, make a notation with pent shell or other available ner, one (!) foot below grave
L. RING	suitable means to identify g	rave as a military grave.		s are not available, use other
ringers of all foreign ervening space. Do	For all other burials, prepare	e sketch in space provided rominent, permanent lan	d below; and give local Idmarks. Information	plot, row, and grave number. tion by means of map refer- must be specific, accurate, to the left and right.
Do no	If the body is otherwise uniden dental conditions in conformity wi			· · · · · · · · · · · · · · · · · · ·
not overink.	para. 2318 (b) (1) & (2))(1945 Ed CHARTING EXAMPLE: (Chai Tooth No. 1, missing; No. 2, gold is crown; No. 4, cavity; No. 5, two po	t Cavities in BLACK; otherw nlay and two silver fillings; N	rise use RED)	
FI. TI	fixed bridge supplying missing too			
THUMB	Missing teeth Nos.		HHHHHHL	THMHAHHH
Crease	Occlusion (Type of)		1680000	
or first	Malposed teeth (Describe)		TONGUE SI	<u></u>
NDEX	Removable appliances			
	Other defects	13 19	HMHHHHH 10 20 21 22 23 24 25 CHEEK SIDE	26 27 28 29 30 31 32
R. MID	Remarks		IDENTITY SOME RESE	H-4 (DENTAL RECORD) REVEALS:
on inked surface		(Signature	of dental examiner)	(Rank or rate)
				
R. RING	1	N		
ion of a				
R. LITTE			•	,

								,		
/drs	ተ ነገ ሳሳ	Et Children				PR	ARE	D BY	PH!L	COM
21	2 1 23 S	office of D	ISINT	ERMEN	NT DIR	RECTIVE	****	_ 	P-19	
									•	-
	Cometery S	uperintendent		DIR	CTIVE NU	JMBER		DATE		
	SECTION A —				6321	81676	5	03	05	50
NAME	- TAME AND BURNE CO.		SEDIA	L NUMBEI		GRADE	ARM	DAY	MONTH	YEAR
	OWN X - 71		Samue Name Samue S						KELIGIÇIA	
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l hereby	certify that all the	foregoing operations	were c	onducte	d and a	ccomplishe	ed under m	ny immed	iate supe	rvision
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PREPARED BY PHILCOM DESINTERMENT DIRECTIVE DIRECTIVE NUMBER DATE SECTION A --**F/3** 65 2676 NAME AND BURIAL LOCATION OF DECEASED DAY HTHOM NAME SERIAL NUMBER GRADE ARM RACE RELIGION 1. 1 5 I - 71 CEMETERY PLOT ROW GRAVE DISPOSITION OF REMAINS 7701 THE CONTRACT LOS NO. 2, COM DIST. CTR CODE SECTION B - CONSIGNEE AND NEXT OF KIN NAME AND ADDRESS OF CONSIGNEE NAME AND ADDRESS OF NEXT OF KIN THITED STATES HILITARY CONSTRUCT (MI ADMINISTRATIVE HEGISION) PT. W. WOXXVIZY, P. X. SECTION C — DISINTERMENT AND IDENTIFICATION SERIAL NUMBER GRADE DATE OF DEATH DATE DISTINTERRED NAME IDENTIFICATION VERIFIED BY IDENTIFICATION TAG ON ORGANIZATION RELIGION REMAINS MARKER NAME AND TITLE SECTION D - PREPARATION OF REMAINS FOR SHIPMENT CONDITION OF REMAINS NATURE OF BURIAL OTHER MEANS OF IDENTIFICATION MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.) REMAINS PREPARED AND PLACED IN CASKET DATE EMBALMER (Signature) CASKET SEALED BY SHIPPING ADDRESS VERIFIED BY CASKET BOXED AND MARKED DATE I hereby certify that all the foregoing operations were conducted and accomplished under my Immediate supervision and that the report above is correct. SIGNATURE OF AGRS INSPECTED

REMARKS AND SPECIAL INSTRUCTIONS

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	Transport Commander		KIND OF CONVEYENCE KIND OF CONVEYENCE KIND OF CONVEYENCE
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13/1/61	ROBERT G. SHOWDEN 1st Lt. Inf.	8 7	JOHN (H. LOTT, MA.). CUP
DATE	SIGNATURE OF RECEIVER	DATE 19	SIGNATURE OF SHIPPED
	NAME OF CONVOYER		KIND OF CONVEYANCE
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CENTRAL IDENTIFICATION POINT AMERICAN GRAVES REGISTRATION SERVICE MARBO ZONE, APO 244

293.

Date 13 July 48

CASE SUMMARY OF

NAME:	UNK	N OVN	X	- 7E	1			13	ANTIZ .		0.50	37 / T 33	•	
CEMETERY	Agat	#2	GU	AM	Plot	t:4	Ro	w:	44	Grav	.е: _ _{гай}	6		··
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									***************************************		(Sig	ature)	

Remerks:

1. X-3.

- A. Date and place of disinterment 25 February, 1946 Dublon Island. Truk Atoll.
- B. List of effects found in grave: Found in grave pieces of charred wood.
- C. Medical survey of remains:
 - 1. Skull: None.
 - 2. Humerus: right normal.

deft - fracture of distal 1/3 latter portion rissing.

- 3. Radius and ulma: left radius missing rest normal.
- 4. Femurs: left fracture transerve supracondylar. right- spiral fracture at junction of proximal and middle 1/3.
- 5. Tibia and Fibulae: tibias missing.
 both fibulas fractured in the middle.
- 6. Pelvis: (a) fracture of left ilium extending through antenoi inferior spine.
 - (b) fracture of ramus left. right pelvis ck.
- 7. Scapulae: left norral.
 right- fracture thru base of coronoid
 process.
- 8. Clavicles: right normal. left - fractured at distal 1/3.
- 9. Vertebrae: 16
 - (a) fracture transverse processes L l and 3.
 - (b) fracture right transverse processes dorsal spine of 3 superior thoracic vertebrae.
- 10. Sacrum: normal.
- 11. Ribs: left: 7: 1 fracture.
 right: 12: 4 fractures.
- D. Cause of death noted in Japanese report drowning.
- E. Translation of Japanese grave marker.

 American Airplane Filot Killed in Action.

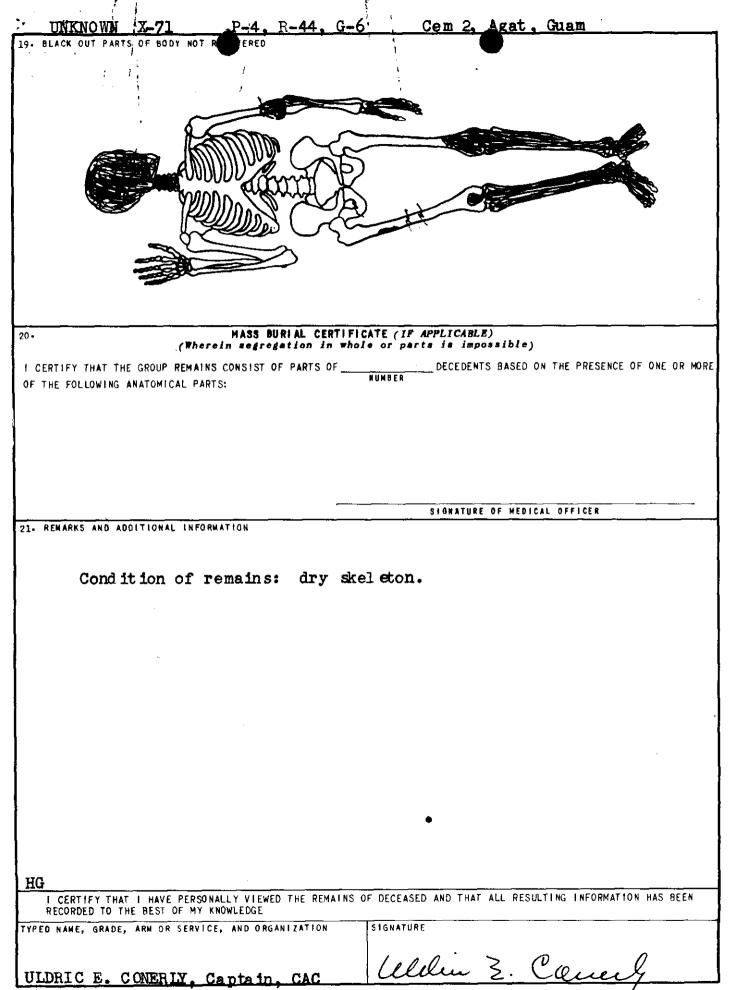
 Place Where Buried.

L. R. MARTIN, Lt (jg), MC., USNR.

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	4		IDEN	TIFICATI	ON	DATA			·
MAINS OF UNION	- 1 A							2. DATE OF REPO	ORT
UNKNOT AME OF CEMETER	VN 3	<u>k-71</u>		4. F	PLOT	5, ROW	6. GRAVE	7. DA	TE OF
Cem 2	2, A	· gat,	Guam		4	44	6	DISINTERMENT	REINTERMENT
							<u> </u>		
				PHYSICAL DESC					
STIMATED WEIGHT UTD			9. ESTIMATED HEIGHT	10.		OF HAIR I'D		UTD	
IVE DESCRIPTION	OF AN	Y OFFICI	AL IDENTIFICATION FOUND	WITH REMAINS			,		
GIVE DESCRIPTION	OF TAT	TOOS O	R SCARS ON BODY AND OR	SUCH INFORMATION	OM OB.	TAINED FROM	OTHER SOUR	CES	
\$T									
None									
WAS BODY BURNE	DŦ		TO WHAT EXTENT \$					_ 	
YES	X	NO							
WAS BODY MANG	LED 1		TO WHAT EXTENT?	<u> </u>					
YES_		NO							
ESCRIBE EVIDENC	E OF HE	ALED FRA	ACTURES AND BONE MALFOR	RMATIONS			=		
				a	a.				
Found	on	righ	t femur (see	Skeletal	Cha	art)			
LIST EVERY ITEM C	F CLOTE	HNG, EC	UIPMENT AND PERSONAL EFT	FECTS FOUND, SHO	WING	THE TYPE, CT	DLOR, SIZE, MA	ARKINGS, SERVICE	, ETC. If laundiy
			ld be made and specimen forw						
			•	•					
No	ne								

UNIDENTIFIABLE BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA.

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



OMC FORM 1044

GPO-O-47 - 754877

PAGE 3 OF 3

	DENTIFICATION DENTAL	CHART		B Mar	ch 1948
NAME (Last, First, Middle Initial)		RANK		SERIAL NUMBE	R
UNKNOWN Z-71			k	Unk	
UNIT	ORGANIZATION	CAUSE OF DE		DATE OF DEAT	Н
Unk	Unk	<u> `Un</u>	<u>k</u>	Unk	·
PLACE OF DEATH	PLACE OF BURIAL		·	PLOT RO	OW GRAVE
Guam	Cemetery #2, Ag	at, Jua	TOP VIEW	1. 44. 1	SIDE VIEW
	NG THROUGH EXTRACTION (NOT THO NT WOUNDS) SHOULD BE "X" "D C		TOOTH MISSING		
CROWNED TEETH: BLOCK IN SOL PORCELAIN, SILVER OR GOLD AND	ID AND CROWN OF TOOTH (LABEL (PORCELAIN), THUS :	GOLD,	GOLD CROWN , PORCELAND	N CROWN	
BRIDGE WORK: BLOCK IN SOLID BRIDGE, GOLD AND PORCELAIN BRID	AND CROWN OF TOOTH (LABEL GOL OGE), THUS :	D	GOLD BRIDGE	9 5	
FILLINGS: DRAW FILLING ON TOO AND LABEL GOLD, SILVER, CEMENTI,	OTH AS ACCURATELY AS POSSIBLE (BLC THUS :	OCK IN	GOLD FILLING SILVER FILL	ING (
CARIES : (Cavities) : OUTLINE LOCA SHADE IN THUS :	ation and size of Cavity,		CAVITY DECAYED	0 6	
SIDE VIEWS	RIGHT 6 5 4 3 2		2 3 4 5 6	7000	SIDE VIEW'S
TOP 7 CO			9000E	DED (UPPER
VIEWS 1	30000	10 OC	MOQQQ (C)	DEE	LOWER
SIDE VIEWS 16 15	14 13 12 11 10		10 11 12 13 14	15	16
TEETH WITH THE WORD, "CLASP."	Mandible missing.		eeth attached and indicat	TE RETĂINING CL	ASPS ON NATURAL

VERIFIED BY GRS OFFICER

OMC FORM 1045 PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

HARRY GUNDERMAN, CIP

SIGNATURE OF OFFICER OR OTHER PERSON WHO PREPARED DENTAL CHART

OLDRIC E. CONERLY, Captain, CAC

•					· · · · · · · · · · · · · · · · · · ·	
	IDEN	TIFICATION	DATA			
REMAINS OF UNKNOWN			-		2. DATE OF RE	PORT
UNKNOUT X-7	<u> </u>			11	<u> </u>	
NAME OF CEMETERY		4. PLOT	5. ROW	6. GRAVE	7. DISINTERMENT	REINTERMENT
Cem 2, Agat	, Guam	4	44	6		
		PHYSICAL DESCRIPTION	ON			
ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR	OF HAIR		II. RACE	
TITO	5*6"	Ŭ.	rd		UTD	
None						
WAS BODY BURNED F	TO WHAT EXTENT #					
YES 🗶 NO		· · · · · · · · · · · · · · · · · · ·				
WAS BOOY MANGLED F	TO WHAT EXTENT ?					
DESCRIBE EVIDENCE OF HEALED FI	PACTURES AND BONE MALFORA	ZAOITAN	·			
Found on rig	ht femur (see)	Skeletal Ch	art)			,
. LIST EVERY ITEM OF CLOTHING, E						
marks are indistinct such notation sho	and be mede the specimen forms	•			THOSE STURBOLD IN	me area;

UNIDENTIFIABLE BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA.

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

MASS BURIAL CERTIFICATE (IF APPLICABLE) 20 • (Wherein segregation in whole or parts is impossible) 1 CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF NUMBER ____DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS: SIGNATURE OF MEDICAL OFFICER 21. REMARKS AND ADDITIONAL INFORMATION Condition of remains: dry skel cton. HO 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 SIGNATURE

OMC FORM 1044

ULDRIC E. COMERLY, Captain, CAC

GPO-O-47 - 754877

aldin E.

PAGE 3 OF 3

	DENTIFICATION DENT	AL CHART		DATE 8	rch 194	8
NAME (Lost, First, Middle Initial)		RANK		SERIAL NUM		
UNKNOWN X-71	ORGANIZATION	CAUSE OF D		DATE OF DE	ATU	_·
Unk	ORGANIZATION	CAUSE OF D		Unk	Aiff	
PLACE OF DEATH	PLACE OF BURIAL			PLOT	ROW	GRAVE
Guam	Cemetery #2,	Agat, Gua		4	44	6
MISSING TEETH: ALL TEETH MISSING FRACTURED OR DISPLACED BY RECENTION OF THE PROPERTY OF THE PR			TOP VIEW TOOTH MISSING	\$ E	SIDE VIEW	38
CROWNED TEETH : BLOCK IN SOI PORCELAIN, SILVER OR GOLD AND		ABEL GOID,	COLD CROWN PORCELAIN	CROWN	306	
BRIDGE WORK : BLOCK IN SOLID BRIDGE, GOLD AND PORCELAIN BRI		GOID	GOLD BRIDGE	7 [30
FILLINGS : DRAW FILLING ON TOO AND LAREL GOLD, SILVER, CEMENT),		BLOCK IN	GOLD FILLING SILVER FILLI	NG (I		30
CARIES: (Cavities): OUTLINE LOCA SHADE IN THUS:	ATION AND SIZE OF CAVITY,		CAVITY DECAYED	3 6	36	30
SIDE VIEWS	RIGHT 6 5 4 3		2 3 4 5 6	7	1 / 1	HDE TEWS
TOP YIEWS 7	DD000	QQQ	9000E	DEN (3	PPER
1 600	JEDE (1966)	AND DOM	AQQQQCT			OWER
SIDE VIEWS 16 15	14 13 12 11	10 9 9	10 11 12 13 14	15	16	
DENTURES (Plaies): DRAW DIAGRAM TEETH WITH THE WORD, "CLASP." Maxilla and	A OF RELATIVE SIZE AND SHAPE C		EETH ATTACHED AND INDICATE	RETĀINING (CLASPS ON NAT	URAL

SIGNATURE OF OFFICER, OR OTHER PERSON WHO PREPARED DENTAL CHART	VERIFIED BY GRS OFFICER
HARRY GUNDERMAN, CIP	Uldric E. CONERIN, Captein, CAC

•	l D	ENTIFICATIO	N DATA			
MAINS OF UNKNOWN					2. DATE OF REP	ORT
TINX NOVE:	TC #979					
NAME OF CEMETERY	×-71	4. PLC	T 5. ROW	6. GRAVE	7. DA	TE OF
					DISINTERMENT	REINTERMENT
Cem 2, A	get. Guem	4	44	5		
		PHYSICAL DESCR	PTION	_ 	<u> </u>	
ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. CO	LOR OF HAIR		II. RACE	
IPPE	NY OFFICIAL IDENTIFICATION FOL		to areas and			
GIVE DESCRIPTION OF TAI	TTOOS OR SCARS ON BODY AND	OR SUCH INFORMATION	OBTAINED FROM	OTHER SOUR	CES	
None						
WAS BODY BURNED ?	TO WHAT EXTENT !					<u> </u>
YES 🚉	l l					
WAS BODY MANGLED #	TO WHAT EXTENT?					
TES 📑	NO EALED FRACTURES AND BONE MAI					
F ound on	right femur (se	e Skeletal	Chart)			

UNIDENTIFIABLE BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA.

H. W. HARRIMAN Coptain, CMC Operations Officer AGRS, Marbo Zone

X

HASS BURIAL CERTIFICATE (IF APPLICABLE) 20 • (Wherein segregation in whole or parts is impossible) S CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF ______ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE ______ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS: SIGNATURE OF MEDICAL OFFICER 21. REMARKS AND ADDITIONAL INFORMATION Condition of remains: dry skel cton.

I CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS OF DECEASED AND THAT ALL RESULTING INFORMATION HAS BEEN

SIGNATURE

Uldin E. C

ULDRIC E. COMERIX. Captain. CAC

RECORDED TO THE BEST OF MY KNOWLEDGE

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

GPO-0-47 - 754877

PAGE 3 OF 3

	DENTIFICON DENTAL	CHART		B Mai	rch 1948
NAME (Lost, First, Middle Initial) UNKNOWN X-71		RANK Un	le .	SERIAL NUMB	ER
UNIT	ORGANIZATION	CAUSE OF DE	ATH	DATE OF DEA	н
PLACE OF DEATH	PLACE OF BURIAL	Un	k	Unk	ROW GRAVE
Guam	Cemetery #2, Ag	at, Gua	#	4	44 6
	ng through extraction inot tho nt wounds) should be "X" o o		TOP VIEW TOOTH MISSING	\$ E	SIDE VIEW
CROWNED TEETH: BLOCK IN SOL PORCELAIN, SILVER OR GOLD AND I	ID AND CROWN OF TOOTH (LABEL G PORCELAIN), THUS :	⇔ID,	COLD CROWN) PORCELAIN	CROWN	
BRIDGE WORK : BLOCK IN SOLID I BRIDGE, GOLD AND PORCELAIN BRID	AND CROWN OF TOOTH (LABEL GOL) DGE), THUS :	D	GOLD BRIDGE	7 4	
FILLINGS : DRAW FILLING ON TOO AND LABEL GOLD, SILVER, CEMENT),	OTH AS ACCURATELY AS POSSIBLE IBLO . THUS :	CK IN	GOLD FILLING SILVER FILLS	ING (I	
CARIES : (Cavities) : OUTLINE LOCA SHADE IN THUS :	ATION AND SIZE OF CAVITY,		CAVITY DECAYED	9 6	
SIDE VIEWS P	RIGHT 6 5 4 3 2		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	HED (SIDE VIEWS
TOP VIEWS A DOCUMENT			1000G) D	LOWER
SIDE VIEWS	3 14 13 12 11 10	9 9	10 11 12 13 14	15	16
DENTURES (Plotes) : DRAW DIAGRAM TEETH WITH THE WORD, "CLASP."	A OF RELATIVE SIZE AND SHAPE OF PLA	ATE, BLOCK IN T	EETH ATTACHED AND INDICATI	e retaining c	LASPS ON NATURAL

Maxilla and Mandible missing.

SIGNATURE OF OFFICER OR OTHER PERSON WHO PREPARED DENTAL CHART

VERYFIED BY GRS OFFICER

REPORT OF BURIAL NAVMED-601 (3-45)

OPY TO:

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

Commander Marianas;

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.

COPY OF IDENTIFICATION TAG	NAME	(Last)	(First)	(Middle)
	UN	KNOVN X-71	Received from	Truk marked
	FILE OR SERVICE No.	RANK OR RATE	(жуу)сн с	OF SERVICE
	Uniknowa.	Unknowa	U	nkrown
	CORPS OR RESERVE CLASSI	FICATION	RACE	
	Uok	MORE	. Unk	DENTA.
AUSE OF DEATH		PLACE OF DEATH		
nkasan		Unknows		
IAME OF NEXT OF KIN (If known)	- · · · · · · · · · · · · · · · · · · ·	ADDRESS OF NEXT	OF KIN (If known)	
DATE OF DEATH		DATE OF BURIAL		
Unknown		Rednters	red Guam. lo Apr	11 1946
NAME OF CEMETERY		LOCATION OF CEME	TERY	
Army, Navy, Marin	ne Comstary #2	Agat (luan	
GRAVE MARKER TYPE	PLOT NO.	ROW No.	GRAVE NO.	
Cross				4
BURIED AT SEA (Date)		AREA		
TYPE OF RELIGIOUS CEREMONY		RELIGION OF DECE	ASED	
Full Military Hono	200	Unknown		
DENTIFICATION TAGS FOUND ON E	BODY		ON TAGS OTHER MEANS USE	ED TO IDENTIFY BODY
1	2 RONE	(Identification card	s, tetters, etc.)	
COMPLETE DENTAL CHART ON REV	ERSE			
	Yes No		•	
COMPLETE FINGERPRINT CHART OF	BOTH HANDS ON REVERSE			
	Yes No			
LIST OF PERSONAL EFFECTS FOUND	O ON BODY AND DISPOSITION OF SAM	ve		
DENTIFICATION TAG BURIED WITH	BODY	IDENTIFICATION TA	G ATTACHED TO MARKER	
	Yes No		Yes	M•
F IDENTIFICATION TAGS NOT PRES	SENT, WHAT OTHER IDENTIFICATION (DATA BURIED WITH BODY A	ND IN WHAT KIND OF CON	TAINER
IF BURIAL OTHE	R THAN ESTABLISHED CEMETER	Y, FURNISH SKETCH AF	ID MAP REFERENCES ON	REVERSE
	D. J D.	vried on Either Side	 	_
			FILE OR SERVICE NO.	GRAVE NO.
BODY ON LEFT. NAME (Last, first, m		RANK OR RATE	1,000	1 _
	niddle)			7
	niddle)	RANK OR RATE	FILE OR SERVICE NO.	GRAVE NO.
BODIES AND N. NAME Asst, first,	riddle) middle)	RANK OR RATE	FILE OR SERVICE NO.	GRAVE NO.
PERSON REPORTING BURIAL (Nam	niddle) middle) (Rank or	RANK OR RATE	FILE OR SERVICE NO.	GRAVE NO.
BOOK NAME (wast, first,	niddle) middle) (Rank or	FANK OR RATE FALE) PERSON CONDUCTIN	FILE OR SERVICE NO.	GRAVE NO. 5
BOD LINET. NAME (wast, first,	niddle) middle) (Rank or	RANK OR RATE	FILE OR SERVICE NO.	5
BOD LINET. NAME (wast, first,	niddle) middle) (Rank or	FANK OR RATE FALE) PERSON CONDUCTIN	FILE OR SERVICE NO.	5

	When unidentified, take rolled without smudging. Obtain sharp, of the L. INDEX	ISOLATED BURIALS.	REPARATION OF BOD Have body examined to nts of all available finger	establish IDENTITY.	ARKINGS OF GRAVES OF If body is unidentified, take wing:
	nidenti dging.	ESTIMATED HEIGHT	ESTIMATED WEIGHT	COLOR OF EYES	COLOR OF HAIR
	fied, tal Obtain	BIRTHMARKS, SCARS, OR TAT	TOOS		<u>-</u>
	sharp, o	LAUNDRY MARKS		WEAPON AND SERIAL	Na.
	limpres clear co	(If	actual weight and height	are used, delete estima	ated)
	contrast of inked ridges L. MIDDLE	to five feet or in hasty burid enly one body in grave. tag and attach to grave ma to BuPers, Marine Corps, pencil of identifying data of	als, to sufficient depth to Securely fasten one iden irker (when body is dis or Coast Guard, as indi on form in duplicate, pla	prevent destruction of to itification tag to body, interred or properly re cated). If no tag is p ce in bottle, canteen, s	uitable substance. Dig grave body or loss of identity. Place Remove other identification ecorded, remove and forward present, make a notation with spent shell or other available
	anc and	container which can be ma marker. If no tag is availa suitable means to identify	ble, write identifying data	on marker. When pe	ther, one (1) foot below grave gs are not available, use othe
	I intervening space. L. RING	For all other burials, prepa	re sketch in space provid prominent, permanent la	ed below; and give locandmarks. Information	r plot, row, and grave number ation by means of map refer n must be specific, accurate to the left and right.
	foreign matter. Roil e. Do not overlink. L. LITTLE	If the body is otherwise unide dental conditions in conformity v para. 2318 (b) (1) & (2))(1945 E CHARTING EXAMPLE: (Ch	vith instructions in MMD (19 d. para. 2234.1 & .2). This m	942, 1938-43 Ed. ust be accurate.	
	finger :	Tooth No. 1, missing; No. 2, gold crown; No. 4, cavity; No. 5, two p fixed bridge supplying missing to	orcelain or temporary fillings:	Nos. 6, 7, 8 gold	388888
	Include	Missing teeth Nos.		HAHAHAL	ZHMHHHHH
	crease o	Occlusion (Type of)		JABBBBBC	10000000000000000000000000000000000000
	of first join	Malposed teeth (Describe)		TONGUE SI	
	joint through	Removable appliances		#888A8A	
	Igh 180°	Other defects	17 18 COMPARISO	19 20 21 22 23 24 25 CHEEK SIDE N WITH DECEASED NAVMED	26 27 28 29 30 21 32 D-H-4 (DENTAL RECORD) REVEALS
	on Inked s	Remarks	——————————————————————————————————————	/E IDENTITY SOME RES	ר״ז
	d surface.		(Signatur	e of dental examiner)	(Rank or rate)
	Record Impression of		ļ	ī	
	ssion of s				
<u>.</u>	same motion	<i>,</i>		+ A	
REPORT OF BURIAL (Back)	NAVMI	ED-601 (3-46)		16-43032-1	W B. S. GOVERNMENT PRINTING OFFICE

18-43688-3 🕸 B. S. GOVERNMENT PRINTING OFFICE

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.

SHIP OR STATION ATTACHED AT TIME OF DEATH	unknown	.	DATE REPORT 24 N	arch, 1946.		
OPY OF IDENTIFICATION TAG	NAME	(Last)	(First)	(Middle)		
	unknown	X = 3				
unknewn	FILE OR SERVICE No.	RANK OR RATE	BRANCH C	OF SERVICE		
	unknewna	unknewn	unkn●	V n		
	CORPS OR RESERVE CLASSIFICA	TION	RACE			
	unkneyn		unkne	V A		
USE OF DEATH		PLACE OF DEATH				
microan		Trak Atell, C	entmal Carelin	e islands		
AME OF NEXT OF KIN (If known)		ADDRESS OF NEXT OF	KIN (If known)			
unkneyn		rnknewn				
ATE OF DEATH		DATE OF BURIAL				
7 April, 1944 (Appre	ximate)	27 April, 19	44 (Appreximat	•)		
AME OF CEMETERY		LOCATION OF CEMETE				
unkuewn		157.95 - 54 Dublen Isla	86 Defense and nd, Truk Atell	Terrain Map.		
RAVE MARKER TYPE	PLOT No.	ROW NO.	GRAVE NO.			
Japanese						
URIED AT SEA (Date)		AREA	-			
No.			···	<u> </u>		
YPE OF RELIGIOUS CEREMONY		RELIGION OF DECEASED				
UNKNOWN ENTIFICATION TAGS FOUND ON BOD		1				
1	2 NONE	(Identification cards, l	TAGS, OTHER MEANS USE ellera, elc.)	ED TO IDENTIFY BODY		
OMPLETE DENTAL CHART ON REVER	5E. Yes X No					
OMPLETE FINGERPRINT CHART OF B	OTH HANDS ON REVERSE	_				
ST OF PERSONAL EFFECTS FOUND &	N BODY AND DISPOSITION OF SAME					
N	ene.					
DENTIFICATION TAG BURIED WITH BO	DDY	IDENTIFICATION TAG	ATTACHED TO MARKER			
	Yes 🔀 No		Yes	X No		
IDENTIFICATION TAGS NOT PRESEN	T, WHAT OTHER IDENTIFICATION DATA	BURIED WITH BODY AND	IN WHAT KIND OF CON	TAINER		
	nene.	-				
IF BURIAL OTHER	THAN ESTABLISHED CEMETERY, F	URNISH SKETCH AND	MAP REFERENCES ON	REVERSE		
DDY ON LEFT. NAME (Last, first, mida		on Either Side	FILE OR SERVICE NO.	GRAVE No.		
SOT ON LEFT. NAME (Buss, Julie, Man	(a)	RANK OR RATE	FILE OR SERVICE NO.	GRAVE NO.		
ODY ON RIGHT. NAME (Last, first, mi	ddle)	RANK OR RATE	FILE OR SERVICE NO.	GRAVE NO.		
ERSON REPORTING BURIAL (Name)	(Rank or rate)	PERSON CONDUCTING	BURIAL RITES			
N REBURIAL, GIVE LOCATION OF PRE	EVIOUS BURIAL	VERIFIED AND FORWA	inte	(4) 1/2		
		(Name)	Lt.	(jg) MC US		

ТНОМВ	four (4) sets of fing	gerprints of all available fin	igers. Complete the lollow	my.
	45 H————	ESTIMATED WEIGHT	COLOR OF EYES	COLOR OF HAIR
	ESTIMATED HEIGHT	unknown	unknewn	unknewn
	BIRTHMARKS, SCARS, C			
	1028.			
, INDEX	LAUNDRY MARKS		WEAPON AND SERIAL	No.
že X	none.		none.	
	mpr	(If actual weight and hei	ght are used, delete estima	ted)
ר. אוסטרנ	to five feet or in hasty enly one body in gra tag and attach to gra to BuPers, Marine C	securely in a blanket, pad or burials, to sufficient depth ve. Securely fasten one in vermarker (when body is forps, or Coast Guard, as in	to prevent destruction of b dentification tag to body. disinterred or properly re indicated). If no tag is pi	ody or loss of identity. Pla Remove other identificat corded, remove and forwa resent, make a notation w
F. RING	marker. If no tag is suitable means to ide suitable means to ide 2. LOCATION OF For all other burials, ences, or by references,	data on form in duplicate, be made watertight, bury or available, write identifying centify grave as a military gentify grave as a military gentify grave as a military gentify grave sketch in space proce to prominent, permanent foot of grave facing head to	ne with remains and the ot data on marker. When per grave. established cemeteries by ovided below; and give loca nt landmarks. Information	her, one (1) foot below grags are not available, use other plot, row, and grave numbation by means of map reformers be specific, accurate
L. LITTLE	If the bódy is otherwise dental conditions in conformation para. 2318 (b) (1) & (2)) (2) CHARTING EXAMPL Tooth No. 1, missing; No.	nunidentified or fingerprints und rmity with instructions in MMC 1945 Ed. para. 2234.1 & .2). Th E: (Chart Cavitles in BLACK; c 2: gold inlay and two silver fillin	D (1942, 1938-43 Ed. als must be accurate. otherwise use RED) ngs; No.3, full gold	
R. THUMB	E Cruss 140. 4, Cayley 140.	5, two porcelain or temporary fillings tooth No. 7; No. 9, porcelain	ngs; Nos. 6, 7, 8, gold on crown (outlined).	1400 1011 1212 14 151
_	Occlusion (Type of)			
0	Malposed teeth (Descri	ibe)	TONGUE S.	
NDEX	Removable appliance			
 -	Other defects) had h		
	Remarks	COMPA	RISON WITH DECEASED NAVME	
, 2 0	S No Sky	11.	POSITIVE IDENTITY SOME RES	EMBLANCE
	_		JOING REA	TO RESEMBLAN
	n	l	×	
MIDDLE	n ked s	(Sign	* nature of dental examiner)	(Rank or rate)
	nked surfa	(Sign		(Rank or rate)
	inked surface.	(Sig		(Rank or rate)
MIDDLE	n ked surface.	(Sig:		(Rank or rate)
MIDDLE R.	n ked surface.	(Sign		(Rank or rate)
MIDDLE	n ked surface.	(Sign	nature of dental examiner)	(Rank or rate)
MIDDLE R.	n ked surface.	(Sig	nature of dental examiner)	(Rank or rate)
MIDDLE R.	n ked surface.	(Sig	nature of dental examiner)	(Rank or rate)
MIDDLE R. RING	n ked surface.	(Sign	nature of dental examiner)	(Rank or rate)
MIDDLE R. RING R.	n ked surface.	(Sign	nature of dental examiner)	(Rank or rate)
MIDDLE R. RING R.	n ked surface.	(Sign	nature of dental examiner)	(Rank or rate)
MIDDLE R. RING	nked surface. Record Impression of same motion	(Sign	nature of dental examiner)	(Rank or rate)

MAVMED-401 (3-45)

Report Plaintement.

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.

ATTACHED AT TIME OF DEATH	H			DATE REP	DUT 🎎 🕍	erch 1946.
PY OF IDENTIFICATION TAG	NAME		(Last)	(First)		(Middle)
	Unkano		9			<u>.</u>
Chilm (187)	FILE OR S	ERVICE No.	RANK OR RATE		BRANCH OF	SERVICE
**************************************	LONE OF	RESERVE CLASSIFICAT	ION TRACEMENT		RACE	
					The last	
AUSE OF DEATH			PLACE OF DEATH			
Valcación			Truk Ato	11, Cant	inel (m	reliest.
AME OF NEXT OF KIN (If known)		·	ADDRESS OF NEXT	OF KIN (If km	(12FT)	
			Delengen			
ATE OF DEATH			DATE OF BURIAL			
27 April 1944(Apr	proximate)	LICATION OF CEM	TOLL (produ	nate)
			197.05.5	LAS DAP		i Terrein
Unicación .			Dublon 1	sland T	rek Ate	11.
GRAVE MARKER TYPE	PLOT No.		ROW No.		GRAVE No.	-
URIED AT SEA (Date)			AREA		-	

YPE OF RELIGIOUS CEREMONY			RELIGION OF DECI	EASED	,	
United the control of			inknosm			a
DENTIFICATION TAGS FOUND ON 80	DDY	NONE	IF NO IDENTIFICAT (Identification car	ION TAGS. OTHE ds, letters, etc.)	R MEANS USED	TO IDENTIFY BODY
OMPLETE DENTAL CHART ON REVE			-			
	Yes	∏. No				
OMPLETE FINGERPRINT CHART OF	BOTH HANDS ON F		_	Lions		
LOT OF PERCONAL PERCOTO CO. N.D.	Yes	No No				·····
IST OF PERSONAL EFFECTS FOUND	ON BODY AND DIS	POSITION OF SAME				
lime.						
DENTIFICATION TAG BURIED WITH E	YGOE		IDENTIFICATION TA	AG ATTACHED TO	MARKER	
- IOSNITICIONATION TAGG NOT DESCE	Yes	No No	<u> </u>	<u> </u>	Ym	No
F IDENTIFICATION TAGS NOT PRESE	NI, WHAI OTHER	IDENTININGATION DATA	BURIED WITH BODY	AND IN WHAT K	IND OF CONTA	INER
None.				-		
IF BURIAL OTHER	THAN ESTABLIS	SHED CEMETERY, FO	URNISH SKETCH A	NO MAP REFE	RENCES ON	REVERSE
BODY ON LEFT. NAME (Last, first, mid	tdle)	Bodies Buried	on Either Side	LEUE OR	SERVICE NO.	GRAVE No.
(2, ,	,		AAAR OR RAIE	FIEL OK	SERVICE NO.	GRAVE NO.
BODY ON RIGHT, NAME (Last, first, m	riddle)		RANK OR RATE	FILE OR	SERVICE NO.	GRAVE NO.
			1			
		(Rank or rate)	PERSON CONDUCTI	NG BURIAL RITE	S	
PERSON REPORTING BURIAL (Name)						
PERSON REPORTING BURIAL (Name)	EVIOUS BURIAL		VERIFIED AND FOI	RWARDED		
	REVIOUS BURIAL		VERIFIED AND FOI	RWARDED		
	REVIOUS BURIAL		VERIFIED AND FOR	RWARDED	<u></u>	

ا ا	1. IDENTIFICATION	N, PREPARATION OF BO	ODY, BURIAL AND MA	ARKINGS OF GRAVES OF
준 1	Y S CAN CAN SAGE OF SIGN	ALS. Have body examined agerprints of all available fin		If body is unidentified, take wing:
<u>\$</u>	ESTIMATED HEIGHT ESTIMATED HEIGHT DOCT 12 TO THE T	ESTIMATED WEIGHT	COLOR OF EYES	COLOR OF HAIR
	BIRTHMARKS, SCARS, C	OR TATTOOS		
<u>_</u>	take		The Contain	· · · · · · · · · · · · · · · · · · ·
INDEX	Sharp, c		WEAPON AND SERIAL I	No.
	clear contra	(If actual weight and heigh	ght are used, delete estima	ited)
;	to five feet or in hasty	y burials, to sufficient depth ave. Securely fasten one ic	to prevent destruction of b dentification tag to body.	uitable substance. Dig grave ody or loss of identity. Place Remove other identification ecorded, remove and forward
	pencil of identifying	Corps, or Coast Guard, as in data on form in duplicate,	indicated). If no tag is proplace in bottle, canteen, s	resent, make a notation with spent shell or other available ther, one (1) foot below grave
! 	marker. If no tag is		data on marker. When pe	gs are not available, use other
RING	For all other burials,	, pr <mark>epare sk</mark> etch in space pro	ovided below; and give locant landmarks. Information	plot, row, and grave number. ation by means of map refer- n must be specific, accurate, to the left and right.
י ר הגורפ	dental conditions in confo para, 2318 (b) (1) & (2)) CHARTING EXAMPL Tooth No. 1, missing; No	se unidentified or fingerprints uno ormity with instructions in MMD (1945 Ed. para. 2234.1 & .2). Thi LE: (Chart Cavities in BLACK; o b. 2, gold inlay and two silver fillin 5, two porcelain or temporary filling.	otherwise use RED) ngs; No. 3, full gold ngs; Nos. 6, 7, 8, gold	
R. THUMB	fixed bridge supplying mi	Issing tooth No. 7; No. 9, porcelain	crown (outlined).	2 10 11 12 13 14 15 18
N O	g	ÄÄ	THANDAN	
70	9	Title)	TO SOUNCE S.	MARRET SE
R. INDE	rst jo	_	BB88000	·^88888
×	Other defects	The state of the s	See	MODDEDED
, π	Remarks	COMPA	RISON WITH DECEASED NAVME	26 27 26 29 30 31 32 E.D.H4 (DENTAL RECORD)REVEALS:
WIDDLE	9			SEMBLANCE NO RESEMBLANCE
Ę	inked surface.	(Sigr	nature of dental examiner)	(Rank or rate)
_	[[
R. RING	Record Impression of same motion		N 	
71	lon of su			
R. CITTEE	ame moti	•		
m	9		•	

NAVMED-801 (3-45)

INSTRUCTIONS.—Forward original and two copies for U. S. dead (additional copy for allied and enemy dead) to BuMed on all burials are 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.

HIP OR STATION ATTACHED AT TIME OF DEATH				FILLED OUT				
PPY OF IDENTIFICATION TAG	NAME		(Last)	(First)	(Middle)			
	FILE OR SE	RVICE NO.	RANK OR RATE	BRANCH O	F SERVICE			
		ender.	walcome.	THE TAXABLE PARTY.	vr.			
	CORPS OR RESERVE CLASSIFICATION		TION	RACE	RACE			
AUSE OF DEATH			I PLACE OF DEATH					
			Truk Atell.	Soutshi Sarolin	a Talanda			
			WEAR GARTO	additionally afternoon				
AME OF NEXT OF KIN (If known)			ADDRESS OF NEXT C	ADDRESS OF NEXT OF KIN (If known)				
Talkaona.			DATE OF BURIAL					
ATE OF DEATH	المغسف			944 (Approximat	-1			
AME OF CEMETERY	Zineto/		LOCATION OF CEMET					
wiknows			157,96 - 5 Bublen Isl	406 Joseph and and, Truk Atoli	_			
RAVE MARKER TYPE	PLOT No.		ROW No.	GRAVE NO.				
Japanese			-					
URIED AT SEA (Date)	 -	_	AREA					
YPE OF RELIGIOUS CEREMONY			RELIGION OF DECEA	SED	 			
where			wikana					
DENTIFICATION TAGS FOUND ON BOD			IF NO IDENTIFICATIO	N TAGS, OTHER MEANS USE	D TO IDENTIFY BODY			
1	2	NONE						
OMPLETE DENTAL CHART ON REVER	SE Yes	™ No						
OMPLETE FINGERPRINT CHART OF B			-					
	Yes	No No						
IST OF PERSONAL EFFECTS FOUND &	N BOBY AND DIS	POSITION OF SAME	···					
1	iono,							
DENTIFICATION TAG BURIED WITH BO	ODY		I IDENTIFICATION TAG	ATTACHED TO MARKER				
	Yes	No No		☐ Vet 👚 No				
F IDENTIFICATION TAGS NOT PRESEN	IT, WHAT OTHER I	DENTIFICATION DAT	A BURIED WITH BODY AN	ID IN WHAT KIND OF CONT	AINER			
	20.00	•	4					
IF BURIAL OTHER	THAN ESTABLIS	HED CEMETERY,	FURNISH SKETCH AN	D MAP REFERENCES ON	REVERSE			
		Padias Pusia	d on Either Side					
BODY ON LEFT. NAME (Last, first, midd	ile)	Boales BUFIE	RANK OR RATE	FILE OR SERVICE NO.	GRAVE No.			
ODY ON RIGHT. NAME (Last, first, mi	iddle)		RANK OR RATE	FILE OR SERVICE NO.	GRAVE NO.			
PERSON REPORTING BURIAL (Name)		(Rank or rate	PERSON CONDUCTIN	G BURIAL RITES	1			
N REBURIAL, GIVE LOCATION OF PRE	EVICUS BURLAL		VERIFIED AND FORM	VARDED				
IN REBURIAL, GITE LOCATION OF PRE	LIIOUS BURNAL		I venicied and the	/				
				<u> </u>				
			John	rantu.				

r	Whout	1. IDENTIFICATION	L DREDARATION	OF BODY	PUPIAL AND	MARKING	S OF GRAVES OF
	1 0 00	ISOLATED BURIA	LS. Have body ex	amined to est	ablish IDENT!	ITY. If bod	y is unidentified, take
THUMB	mudg	four (4) sets of fing	gerprints of all avail		Complete the		COLOR OF HAIR
	nidentifi iging.	ESTIMATED HEIGHT				.	wakasua.
	ြင့္မွာ ၂	BIRTHMARKS, SCARS, O	R TATTOOS			<u> </u>	
	take tain s	2033,					
ZDEX	e rolled sharp, s	LAUNDRY MARKS			WEAPON AND SE	ERIAL NO.	
×	ed im p, clea	2020,			20120,		
	1 - 5		(If actual weight a	and height are	used, delete e	estimated)	
r. MIDDLE	ression of fingerprints. contrast of inked ridges	to five feet or in hasty •nly one body in gra tag and attach to gra- to BuPers, Marine C	burials, to sufficien ve. Securely faster ve marker (when b orps, or Coast Gua	t depth to pre n one identifi ody is disinte rd, as indicat	vent destruction cation tag to be erred or prope ed). If no tag	on of-body or body. Remo rly recorded g is present,	ve other identification , remove and forward make a notation with
ŗ	s. Cleanse finge	pencil of identifying of container which can be marker. If no tag is a suitable means to ide	oe made watertight, available, write iden	bury one with tifying data or	remains and	the other, on	e (1) foot below grave
RING	rs of all		prepare sketch in sp ce to prominent, pe	oace provided rmanent land	below; and gi	ve location b mation must	ow, and grave number y means of map refer be specific, accurate left and right.
,	%			<u></u>			
י נודדע ב	ign matter. Roll Do not overink.	If the body is otherwise dental conditions in confo para. 2318 (b) (1) & (2))(rmity with instructions	In MMD (1942,	1938-43 Ed.	以 文 文	angana pangana
	Roll finger	CHARTING EXAMPL Tooth No. 1, missing; No. crown; No. 4, cavity; No. 5 fixed bridge supplying mis	7. gold i nlay and two sit 5. two porcelain or tempo	iver fillings; No trary fillings; No	. 3, full gold s. 6, 7, 8, gold		
ТНИМВ	r to include	Missing teeth Nos		**************************************	HHMH	MMHr • * * * * * * * * * * * * * * * * * * *	7HHH
 .	crease	Occlusion (Type of)				D D D O	
, 1 2	of first	Malposed teeth (Descr	ibe)		<u> </u>	GUE SIDE	
ZOEX	joint through 180°	Removable appliances	s			18888	
	dguc	Other defects		12 19 19 14 12 12 12 12 12 12 12 12 12 12 12 12 12	4 M M M M L وين 22 23 25	1 M M M M M 3 24 25 26 27 For SIDE	28 29 30 31 82
تر ب		Remarks		COMPARISON			DENTAL RECORD) REVEALS
3	9	Se Stra	11.	POSITIVE I	DENTITY S	SOME RESEMBLANCE	NO RESEMBLANCE
MIDOLE	inked:		· -	(Signature o	f dental examiner)	(F	Cank or rate)
	surface						
	Ĝ.						
R. RING	Record impression of			N			
	sion of						
R. LITTEE	same motion						
Ë	Hon	_		1			

I DENTIFICATION DENTAL CHART
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.

MAF

CHEEK)

LAPPRIMEN X-74TEST INITIAL RANK SERIAL NO. UNIT ORGANIZATION PLACE RIGHT UPPER TEETH LEFT 5 6 TYPE TYPE LOCATION LOCATION INSIDE - LOOKING OUT RIGHT LOWER TEETH LEFT 16 15 14 13 12 11 10 9 9 10 12 13 14 11 15 16 TYPE TYPE LOCATION LOCATION KEY OF SYMBOLS TO BE USED IN ABOVE CHART SYMBOLS TYPE OF FILLING LOCATION OF FILLING IN IN WHOLE BOX UPPER HALF OF BOX LOWER HALF OF BOX EXTRACTED AMALGAN MESIAL (BETWEEN (SILVER) TOWARD FRONT) CAVITY, INDICATE GOLD OCCLUSAL (BETWEE LOCATION SURFACE BACK TEE FIXED BRIDGE DISTAL (BETWWEN SILICATE OF (INCL. ABUTENETS) PORCELAIN TOWARD BACK) TEETH REPLACED LINGUAL (TOWARD OXYPHOSPATE BY DENTURE I (CEMENT TONGUE) PHOSTHOMOUSLY MISSING FACIAL (TOWARD

D'LE

CELUIE UND ETELL LAKED OF BEILD

NEED AND RANK TYPED, OR PRINTED

EMILIO 8, ZAPICO, 2nd Lt., Inf.

ASSIBLED BY CRS OFFICER

SICH. TURE OF PERSON THO PREP. RED CHIRT

Entire Mendible, Maxilla and Teeth Missing.

HETT YKE:

LEET ST RICHT SI TOWER

DIVERSE REPRESENTS THE MOUTH WIDE OPEN



†
 INDOMINATION OF STANDARD NUMBERING OF TESTH SIE DIACRAE SELOW.

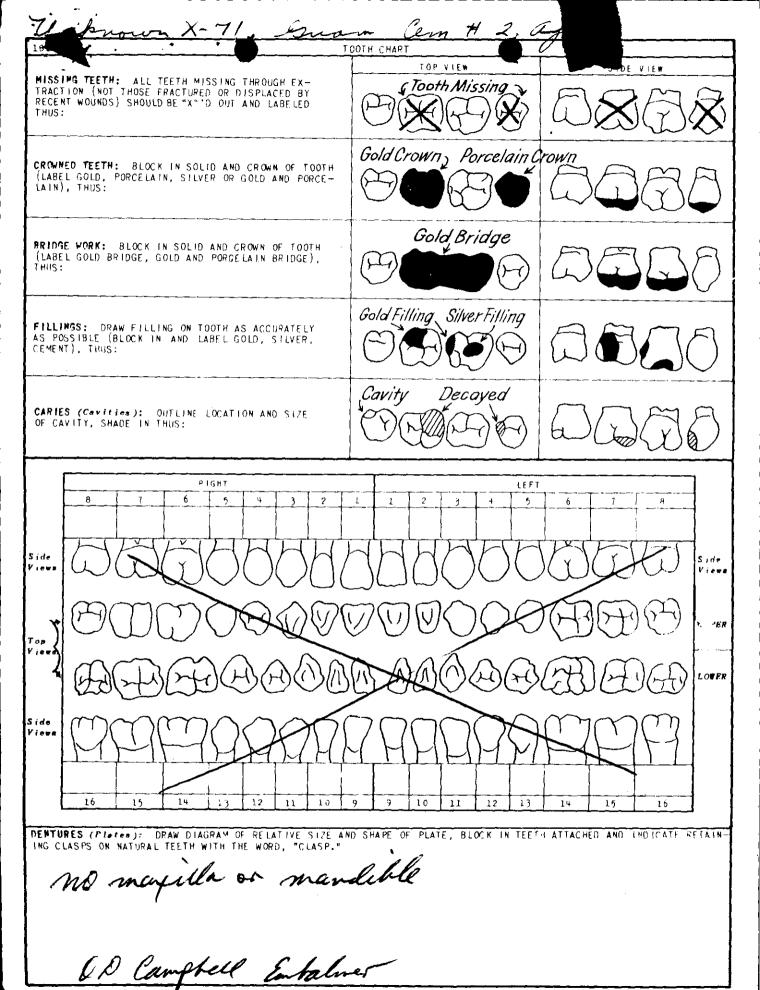
| Properties of the properti

TVIM CHOMMS' GOID CHOMMS (LAIT OF 3/4), 3/4 GOLD CHOMM WITH SILICATE WINDOW. SHOULD BE NOTED. DENTAL WORK NOT COVERED ABOVE WILL BE INDICATED. C.E. 3. ANY ABWORMALITIES SUCH AS MALPOSED, MALFORMED OR DISCOLOHED TEETH, FIC.

LITTING VER LO INSERTED IN TOMER HALF OF BOX. ARE TO BE INSERTED IN UPPER HALF OF BOX, AND SYMBOLS INDICATING LOCATION OF BRIDGE MOHE VET TO BE INSERTED IN PROLE BOX; STABOLS INDICATING TYPE OF FILLING S' NOTE CHEENITY THAT: SYROLS INDICATING MISSING TELTH, CAVITIES AND

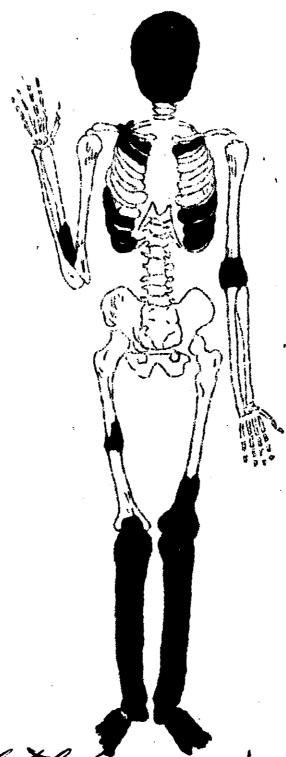
OF PARALOUNT IMPORTANCE, IF SAME IS TO EE OF MAXIMUM VALUE. ACCURACY AND ATTENTION TO DETAIL IN THE PREPARATION OF THIS CHART ARK

:SNOTIONIENT



QMC FORM 1044a

Unbrown X-71 bran (Rasz) (Sor No.) (Er of SV)



Spelital Rune

SKELETAL CEART

Ancomplete

MEDICAL REPORT OF DISINTERMENT

1. X-3.

- A. Date and place of disinterment 25 February, 1946 Dublon Island Truk Atoll.
- B. List of effects found in grave: Found in grave pieces of charred wood.
- C. Medical survey of remains:
 - 1. Skull: None.
 - 2. Humerus: right normal.

 left fracture of distal 1/3 latter portion missing.
 - 3. Radius and ulna: left radius missing rest normal.
 - 4. Femurs: left fracture transerve supracondylar.
 right- spiral fracture at junction of proximal and middle 1/3.
 - 5. Tibia and Fibulae: tibias missing.
 both fibulas fractured in the middle.
 - 6. Pelvis: (a) fracture of left ilium extending through antenoi inferior spine.
 - (b) fracture of ramus left. right pelvis ck.
 - 7. Scapulae: left normal.
 right- fracture thru base of coronoid process.
 - 8. Clavicles: right normal. left - fractured at distal 1/3.
 - 9. Vertebrae: 16
 - (a) fracture transverse processes L l and 3.
 - (b) fracture right transverse processes dorsal spine of 3 superior thoracic vertebrae.
 - 10. Sacrum: normal.
 11. Ribs: left: 7: 1 fracture.
 right: 12: 4 fractures.
 - I. Cause of death noted in Japanese report drowning.
 - E. Translation of Japanese grave rarker.
 American Airplane Filot Killed in Action.
 Place Where Buried.

L. R. MARTIN, Lt (jg), MC., USNR.

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 American Airplane Pilot Killed in Action.

 Place Where Buried.

Lt (jg), MC., USNR.