MGM 293 GAS, Far Sast

MAK - 3 195

SUBJECT: Unidentifiable Remains

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Commencing Officer

Werican Graves degistration Dervice
Philosm Cone

MO 900, c/o Postmaster
San : rendisco, California

- 1. Reference is made to letter, your Readquarters, file GRTZ 293, dated 20 January 1950, subject: Raidentifiable Remains.
- 2. This Office concurs in the classification of Unknowns X-13, $\{-18, \ k=19, \ k=21, \ k=27, \ k=29, \ k=30, \ k=31, \ k=35, \ k=36 \ and \ k=40, \ kson Guan Cenetery #1, as unidentifiable.$

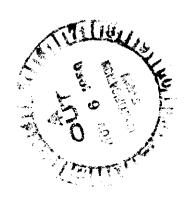
FOR THE BLANT MASTER GARAGE.

T. H. Matt Lt Colonel, CMC Memorial Division

CC: CTACKE



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HEADQUARTERS FHILCOL ZOND ALERICAN GRAVES REGISTRATION SERVICE

20 January 1950 Date

SUEJECT: Unidentifiable Remains

TO

: The Quartermaster Washington 25, D. C.

Attn: Memorial Division

The records pertaining to Unknown X-36, Plot 1, Row 18, Grave 1, USMC Cem #1, Asan, Guam, have been reviewed and it is the opinion of this carice that insufficient evidence is available to establish the identity of this deceased, and that these remains should be classified as unidentifiable.

APPROVED UNIDENTIFIABLE

FOR THE COMMANDING OFFICER:

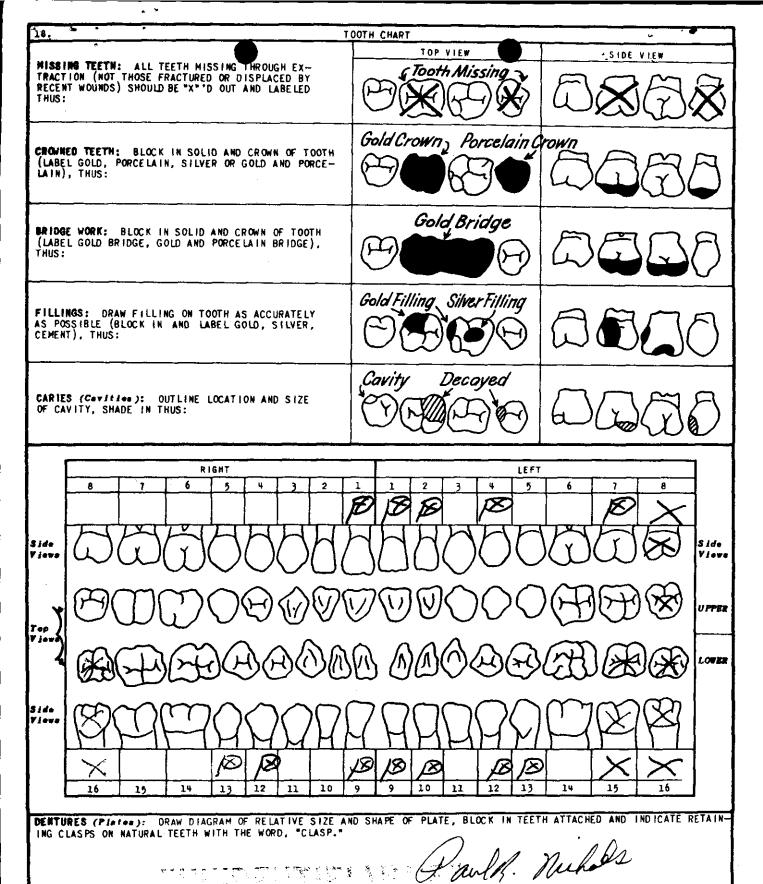
FEB 2 8 1950

H. B. McNEIAR Captain, QUC

Chief, Records Branch

Attch: Form 1044

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PAUL R. NICHOLS Chief, Identification Sec.

19. BLACK OUT PARTS OF BODY NOT RECOVERED MASS BURIAL CERTIFICATE (IF APPLICABLE) (Wherein segregation in whole or parts is impossible) I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF _____ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS: SIGNATURE OF MEDICAL OFFICER 21. REMARKS AND ADDITIONAL INFORMATION No identification tags, burial bottle, personal effects or other means of identification found with remains.

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

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

PAUL R. NICHOLS

Chief, Identification Sec.

Paul R. Vaihals

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		DIS	SINTERN	/ENT	DIRE	CTIVE				
<u> </u>				DIRECT	IVE NUM	ABER		DATE		
•	SECTION A — NAME AND BURIAL LOC	CATION OF DECEASED		6:	320	0000	0			48
NAME	- .		SERIAL NU			GRADE	ARM	RACE	MONTI	
	. 153	UNKNOWN	X - OC	000	036		Q	0	6	
CEMETERY			PLO	1	ow -	GRAVE		DISPOSITI		
GUAM N	O 1 MARI	ANAS IS	2)	_1	18	1	-	77 C	į.	80 DIST. CTR.
NAME AND ADDRESS		SECTION B — CO	_ ,							
FORT MC	CINLEY CEMETI					STRATIVI		CISION	1)	
		SECTION C — DISINT	ERMENT A	1D IDEI	NTIFICAT	TON				
NAME		SERIAL NUMBER	GRADE	DATE	OF DEAT	ГН	D	ATE DISTIN	TERRED	
IDENTIFICATION TAG	ON ORGANIZATIO	N A		RELIG	ION	IDENTIFICA	TION VI	OIFIFD RY		
REMAINS		UNKNOWN		, KELIO	1011		CHOIC VI	KITIED DI		
MARKER		SECTION D — PREPARA	TION OF RE	MAINS	FOR SHI	PMENT		NA	WE AN	D TITLE
NATURE OF BURIAL			CONDITION						-	
MINOR DISCREPANCI	ES (Prepare Discrip	and Researt QMC Form	n 1194a fo	r maj	or disci	repancies.)			- 04	Su
REMAINS PREPARED A	AND PLACED IN CASKET	BY								
CASKET SEALED BY			EMBALM	R C	mature)	A			
							1			
CASKET BOXED AND	MARKED		SHIPPING	S ADDR	ESS VERI	FIED BY				
DATE	ВУ		<u> </u>							 .
l hereby and that the i	certify that all the freport above is corre	foregoing operations w ect.	ere c ondi	ucted	and ac	complished u	nder m	y immedi	ate su	pervision
					SIGI	NATURE OF AGE	S INSPE	CTOR		
REMARKS AND SPECIA	al instructions					S	71	000		
QMC FORM 440										

REV 11 FEB 48 1194

(106)

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SIGNATURE OF SHIPPER	Ad	JTAO	SIGNATURE OF RECEIVER	DATE
KIND OF CONVEYANCE			NAME OF CONVOYER	
				<u> </u>
MORF		IHS .T	10 10	
SIGNATURE OF SHIPPER	.∀a	DATE	SIGNATURE OF RECEIVER	DATE
KIND OF CONVEYANCE			NAME OF CONVOYER	
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		HS .8		
SEGNATURE OF SHIPPER	.va	3TA0	SIGNATURE OF RECEIVER	DATE
	<u> </u>			
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FROM				
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REGNATURE OF SHIPPER	IAO "	31A0	SIGNATURE OF RECEIVER	31AQ
KIND OF CONVEYANCE			NAME OF CONVOYER	
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KIND OŁ CONAEAYNCE			NAME OF CONVOYER	
way			OI.	1
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SIGNATURE OF SHIPPER	l\d	31AQ	SIGNATURE OF RECEIVER	3TA0
KIND OF CONVEYANCE		1	NAME OF CONVOYER	
FROM		IIHS 'I	10	
			4380	

RECORD OF CUSTODIAL TRANSFER

	DENTIFIC ON DENTAL	CHART		DATE 19	Nov 47
NAME (Last, First, Middle Initial)		RANK		SERIAL NUMBER	
UNIT	ORGANIZATION	CAUSE OF DE		DATE OF DEATH	
PLACE OF DEATH	PLACE OF BURIAL	Um Um	known	PLOT ROW	GRAVE
- Gran	Cemetery #	l, Asan,	Criem TOP VIEW	1	18 1
	ng through extraction (not the nt wounds) should be "X" 'd c		TOOTH MISSING		358 358
CROWNED TEETH: BLOCK IN SOL PORCELAIN, SILVER OR GOLD AND I	ID AND CROWN OF TOOTH (LABEL) PORCELAINI, THUS :	GOLD,	GOLD CROWN PORCELAI	N CROWN	
BRIDGE WORK : BLOCK IN SOLID BRIDGE, GOLD AND PORCELAIN BRI	and crown of tooth (label go) oce), thus :	lD	GOLD BRIDGE	B 55	
FILLINGS : DRAW FILLING ON TOO AND LABEL GOLD, SILVER, CEMENTI,	OTH AS ACCURATELY AS POSSIBLE IBLO	DCK IN	GOLD FILLING SILVER FIL	LING (
CARIES : (Covities) : OUTLINE LOCA	ATION AND SIZE OF CAVITY,		CAVITY DECAYED	0 00	
SIDE VIEWS TOP VIEWS SIDE VIEWS DENTURES (Plates): DRAW DIAGRAM TEETH WITH THE WORD, "CLASP."			LEFT 2 3 4 5 6 10 11 12 13 14 EETH ATTACHED AND INDICA	DOW DOW DOW DOW DOW DOW DOW DOW DOW DOW	SIDE VIEWS UPPER LOWER ON NATURAL
L. HO, Ca	person who prepared dental cr		EMILIO S. ZA	FICO, 2nd	Lt., Inf.

OMC FORM 1045 PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

RESTRICTED

WD-CMC PCRM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT O	F INTERN	MENT -	DATE	OF REPORT	
		(AR 30-1810 a		0-1815)		19 H	ov 47
Imprint Identification DO NOT T		Section 1.—IDENTIFICATION		·			
		NAME (Last, first, middle initia	0		SERIA	AL No.	
REPORT	OF \	UNKNOWN # 30	6	Dox # 3	54		
O Partition		GRADE	ORGANIZA			ICH OF SERV	ICE
NTO TENED					İ	10.5 5.65	
DIBINTER	masr /	RACE	RELIGION		I IE OTUED TO	USIE	10.085
			, indicate the second		NAME OF C	IAN U. S. DEJ OUNTRY	ND, GIVE
PLACE OF DEATH		CAUSE OF DEATH	_ !	<u> </u>	DATE	OF DEATH	·
۸.		Planton come					
		Unknown	<u></u>				
EMERGENCY ADDRESSEE (N	ame, relationship, a	nd address)					
IDENTIFICATION TAGS FOUR	ND ON BODY	IF NO TAGS FOUND ON BODY.	DESCRIBE ME	ANS OF IDENTIFICATION (If unidentified, fi	U in section 3	OR reserve)
	2048		i nana	UPD HAUDENT	irii ni r		
WERE SUBSTITUTE TAGS PR	OVIDED?(Yes of no)	,		YED UNIDENT	ILIADIT		
	,		1	EB 2 3 1956			
No.							
LIST PERSONAL EFFECTS FO	UND ON BODY AN	D DISPOSITION OF SAME					
Cartina 2 DIDIAI 74 -4	£ - 4 £ : 4 . 1	olished cemetery, furnish sket					
NAME, NUMBER, COORDINAT	··		on and map c	DOIGHNATES ON TEVERSE.		·	
	Complement	. # 9 14 com - Com					
	-,	# 1, Asan, Gu			J =\ == ==	T = = 11	1
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or	name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
30 Jul 44					1	18	1
WAS THIS A REBURIAL?	IF A REBURIAL.	INDICATE NAME, NUMBER, COOR	DINATES OF P	REVIOUS CEMETERY, AND I	OCATION OF G	RAVE	'
(Yee or no)					PLOT No.	ROW No.	GRAVE No.
TYPE OF RELIGIOUS	DEBSON CONDIN	CTING BURIAL RITES	LIE IDENTIE	ICATION TAGS NOT USED,	DESCRIBE IDE	NTIFICATION	V DATA ANO
CEREMONY	PERSON CONDO	CITING BUNIAL RITES	CONTAINE	RS BURIED WITH BODY	DERRIBE IDE	MIFICATION	T DAIA AILD
IDENTIFICATION TAG BURIE BODY (Yes or no)		TIFICATION TAG ATTACHED TO					
(140 0)		(
BODY BURIED ON DECEASEL	LEFT. NAME (Las	(, first, middle initial)	RANK	SERIAL NO.	ORGANIZATIO	ON GRAV	/E No.
		_					_
Unkn	OWN X-3	7					
BODY BURIED ON DECEASED	RIGHT, NAME (La	ist, first, middle initial)	RANK	SERIAL NO.	ORGANIZATIO	ON GRAV	/E No.
Begi	nning of	Row					
SIGNATURE OF PERSON PRE	PARING REPORT	Fl. an Tel	SIGNATURE	OF GRS OFFICER VERIFYI	NG REPORT		
serd	popular	BODIMAT	771	ITITO & TART	2	 - [т 🧈
TEO	DORICO J		1 ISM		CO, 2nd		THY .
DISTRIBUTION OF REPOR through Headquarters G	T: Signed origin R\$ Officer. Cop.	nai for U.S. and allied dead, a les for retention in theater as	igned origina prescribed by	I and one copy for enemy theater commander.	y dead, to the	Quartermas	ster General

RESTRICTED

RESTRICTED

	Section 3 DENTIFIE	D REMAINS			
LEFT LITTLE FINGER RI	INSTRUCTIONS:	I be taken to record nical characteristics ; position of body fo	und in airplanes, vehic	clues under "Other, cles, and tanks; and s	"such as shoe size, erial numbers of air-
LEFT RING FINGER	HEIGHT WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS,	
MIDDLE FINGER	WEAPON AND SERIAL NO. OTHER IDENTIFICATION CL	LAUNDRY	Y MARKS	WHERE BODY WAS BU	JRIED OR FOUND
LEFT *	FILLINGS	SLVER FILLING	ING IG	3.2000	,
THUMB	CAVITIES	CAVIT	¥0 6 7 7 0	STORY OF THE REAL PROPERTY.	
RIGHT	MISSING TEETH	PORCELAIN CO	D IAGRAM	REPRESENTS THE MO	OUTH WIDE OPEN
RIGHT INDEX FINGER	BRIDGE WORK	GOLD CROW	15 14 15 13 13 13 13 13 15 15 15 15 15 15 15 15 15 15 15 15 15	LOWER S	5(8) 15 (8) 14 (13) 13 (0)12
RIGHT MIDDLE FINGER	FURNISH SKETCH AND MAP	REFERENCE AND COOF	RDINATES FOR BURIAL IN	OTHER THAN ESTABLISH	HED CEMETERY
RIGHT RING FINGER	REMARKS:		<u> </u>	f	Tage :
RIGHT LITILE FINGER	Conditant sacrum as rated. Light	ion of Remi re broken. t foot miss	ins: Both a Both fibulating	scapula, ma a are partl	

REPORT OF BURIAL

INSTRUCTIONS.—Farward 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—Howaiian, Alaskan, etc. Assign consecutive numbers with a prefix "X" to all unidentified remains. This "X" number shall be used in all correspondence regarding burial.

OPY OF IDENTIFICATION TAG	NAME	(Last) (Fi	rst) (Middle)
OF TO TOLIN TOATION TAG		ddentified # 36	(Maddie)
	FILE OR SERVICE NO.	RANK OR RATE	BRANCH OF SERVICE
	CORPS OR RESERVE CLASSIE	EICATION	RACE
	CORPS ON RESERVE CLASSIF	ICATION	RACE
AUSE OF DEATH		PLACE OF DEATH	
GSW-KIA		Guam.	
NAME OF NEXT OF KIN (If known)		ADDRESS OF NEXT OF KIN	v (If known)
DATE OF DEATH	ATE OF DEATH		
		7/30/44	
NAME OF CEMETERY		LOCATION OF CEMETERY	
y Navy Marine Cemet	ery #1.	Asan Guam.	
GRAVE MARKER TYPE	PLOT No.	ROW No.	GRAVE NO.
Cross	<u> </u>	18	1
BURIED AT SEA (Date)		AREA	
TYPE OF RELIGIOUS CEREMONY		RELIGION OF DECEASED	
Military Honors			
IDENTIFICATION TAGS FOUND ON E	2 NONE	IF NO IDENTIFICATION TAG (Identification cards, letters	GS OTHER MEANS USED TO IDENTIFY BODY 8, etc.)
COMPLETE DENTAL CHART ON REV		ADDD	OVED UNIDENTIFIABLE
	Yes No	ALIR	OATD AMINEMALIA INTER
COMPLETE FINGERPRINT CHART OF	BOTH HANDS ON REVERSE		FEB 23 1950
LIST OF PERSONAL EFFECTS FOUND	O ON BODY AND DISPOSITION OF SAM	IE .	
IDENTIFICATION TAG BURIED WITH	BOOV	IDENTIFICATION TAG ATT/	ACHED TO MADVER
IDENTIFICATION TAG BONIES WITH	Yes No	IDENTIFICATION TAG ATT	Yes No
IF IDENTIFICATION TAGS NOT PRES	SENT, WHAT OTHER IDENTIFICATION D	ATA BURIED WITH BODY AND IN	WHAT KIND OF CONTAINER
Information	n extracted from Cemet	terv Records	
2112 02 210 02 01	1 031010000 2102 0000		
IF BURIAL OTHE	R THAN ESTABLISHED CEMETER	Y, FURNISH SKETCH AND MA	AP REFERENCES ON REVERSE
	Rodies Ru	ried on Either Side	
BODY ON LEFT, NAME (Last, first, n			FILE OR SERVICE NO. GRAVE NO.
Unidentified BODY ON RIGHT. NAME (Last, first,	middle)	RANK OR RATE	FILE OR SERVICE NO. GRAVE NO.
NO ON C OUVICE PERSON REPORTING BURIAL (Nam			
		rate) PERSON CONDUCTING BUI	RIAL RITES
R.L. RIDOLFI 2dLt., IN REBURIAL, GIVE LOCATION OF	PREVIOUS BURIAL	VERIFIED AND FORWARDS	ED / ///
		No.	SAMES A. LANI
		L.N. UTZ-Col.	. USMC- AssMt Chier MARINE
		(Name)	(Rank) (Title)

· _	\ <u>*</u>				
ŗ H	Wh ithout	1. IDENTIFICATION, PREPARA ISOLATED BURIALS. Have be			
THO AB	Smir.	four (4) sets of fingerprints of al			
<u> </u>	inidentifing.	II	TED WEIGHT	COLOR OF EYES	COLOR OF HAIR
	Ob.	BIRTHMARKS, SCARS, OR TATTOOS			
٢	take btain s				
Z U E X	20	LAUNDRY MARKS		WEAPON AND SERIAL NO	
H X					
	impression of clear contrast	(If actual w	eight and height a	are used, del <mark>ete estimate</mark>	ed)
-	Ssion	Wrap and tie body securely in a	blanket, pad cove	ring, canvas or other suit	table substance. Dig grave
Σ	of fi	to five feet or in hasty burials, to su only one body in grave. Securely	· ·		
	ingerpr	tag and attach to grave marker (w			
ה	d ric	to BuPers, Marine Corps, or Coas			
	ridges	pencil of identifying data on form container which can be made water			
	Clear	marker. If no tag is available, writ	te identifying data	on marker. When pegs	
ָר. ר	inter	suitable means to identify grave a	s a military grave	9.	
RING	fingers	2. LOCATION OF GRAVE: Rep For all other burials, prepare sketc			
•	65 °	ences, or by reference to promine			
	of all to	complete. Stand at foot of grave	facing head to de	termine bodies buried to	the left and right.
ŗ	Do Do		# = = = = = = = = = = = = = = = = = = =		
=======================================	23	If the body is otherwise unidentified or dental conditions in conformity with Instru	uctions in MMD (19-	42. 1938-43 Ed. 💢 🍍	
נודדנ	tter over	para, 2318 (b) (1) & (2))(1945 Ed. para, 2	!234.1 & ,2), This mu	ust be accurate.	書ならのひつり
	etter Roll overink.	CHARTING EXAMPLE: (Chart Cavition Tooth No. 1, missing; No. 2, gold inlay and	es in BLACK; other	wise use RED)	
	- =	crown; No. 4, cavity; No. 5, two porcelain o	or temporary fillings ; I	Nos. 6, 7, 8, gold 🕒 🐷 🖊	
,		fixed bridge supplying missing tooth No. 7	; No. 9, porceram cros	wn (outimes).	
8 H C M H	to inc	Missing teeth Nos.	1 2	3 4 5 6 7 8 9	10 11 12 13 14 15 16
Z W	include	Thirties and the second		HHHHHHH	エフエエアブル
	Crease	Occlusion (Type of)		HEADADD	
	5e Q		— \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	<i></i> 788~~~	~~888488
्र	=======================================	Malposed teeth (Describe)		TONGUE SID	
ž D		Removable appliances		#888	
×	5		{#}		
	joint through	Other defects	12 to }		
, 21	180°		COMPARISO	N WITH DECEASED NAVMED-	H-4 (DENTAL RECORD) REVEALS
 Z		Remarks		IE IDENTITY SOME RESEM	r-¬
אַסטר	Inked				
[7]	d su		(Signatur	e of dental examiner)	(Rank or rate)
	surface.				
Œ	교				
· .	cord		Ņ	I	
RING	impi		[
	683		j		
	Record impression of				
נק					• •
딕	same motion		j		
T.E.	tion		1		i
		· · · · · · · · · · · · · · · · · · ·			

(Place of death)

(Grave Number)

BODY BURIED ON RIGHT

BODY BURIED ON LEFT

REPORT OF INTERMENT

UNIDENTIFIED #36

(Initial) (Last Name) (First)

A N & M #1

(Serial Number) (Rank) (Organization)

Guam Island (Name of Cemetery) (Name or coordinates of location)

(Row Number) (Plot Number) (Religion, if known)

(If no identification tags, what means of identification are buried with body?)

(If no identification tags, but identity definitely established, give particulars)

(Ser. No.) (Rank) (Org) (Grave No.)

(Org) (Grave No.)

BASE DEPOT REPRODUCTION

INSTRUCTIONS: Fill in all possible information, forward two (2) copies to CG, FMF, PAC as soon as practicable. Take prints of one finger (Preferably right index) of iden.

(Name)

tified dead and all ten fingers of unidentified, if possible.

Disposition of identification tags:

One Buried with body Yes One Attached to marker Yes

(Ser. No.) (Rank)

THUMB	-	(Signature of office person reporting burish.)		 THUMB
		IF THIS IS AN ISOLATED BURIAL, ATTACH A SKETCH OF LOCATION, ORIENTED WITH PERMANENT LANDMARKS,		
i L		NOTE below any identifying clues found, such as letters, photographs, probable organizat- ion of deceased, etc.:		1
2	RIGHT HAND	tooth chart) In space below, locate and describe any scars, birthmarks, moles, deformities, etc.:	LEFT HAND	2
w		HEIGHT: APPARENT NATIONALITY: COLOR OF EYES: NUMBER OF RIFLE: COLOR OF HAIR: RACE IS TOOTH CHART ATTACHED? (If possible, have medical personnel take a		E
4		IF DECEASED UNIDENTIFIED TAKE FINGERPRINTS OF BOTH HANDS, If unable to obtain a complete set of fingerprints, TAKE THOSE YOU CAN, And fill in as many of the following as possible.		4

The state of the s			lled	Out 15 Apr 46	
Capy of Identification Tag	Name (Last)		(Pirst)	(Middle)	
	UN	IDENTIFIE	ED #36		
	File or Ser	vice No. F	late or Rank	Branch of Servi	
	<u> </u>	<u> </u> 		USMC	
	Corps or Re	serve Class	sification	Race	
Cause of Death	<u> </u>	Place of	Death		
GSW-KIA		Guam			
Name of Next of Kin (If Known	.)	Address o	of Next of Ki	n (If Known)	
Date of Death		Date of F	Burial		
part of heavi		•			
Name of Cemetery	7/30/44 Location of Cemetery				
Army Navy Marine Cemete	erv #1	Asan,	_	-	
Grave Marker Type	Plot No.	Row No.		Grave No.	
Cross	1	18		1	
Buried at Sea (Date)	<u> </u>	Area		A STATE OF THE STA	
Type of Religious Ceremony	<u> Andreas - Contrator de la Articolo</u>	Religion of Deceased			
Military Honors				and the second s	
Identification Tags found on	Body			Tags, other means	
	None	used to identify body (Identification cards, letters, etc.)			
Complete Dental Chart on Reve	erse	Carab in	, ,		
Yes		1			
Complete Fingerprint Chart of	e Fingerprint Chart of both Hands				
on Reverse	No				
List of Personal Effects four		d Disposit	ion of Same		
••• · · · · · · · · · · · · · · · · · ·	•		+		
Identification Tag Buried wit	h Body	Identifi	cation Tag At	tached to Harker	
Yes [No		Yes	No	
TO TA-14101 -11	resent, what	other Iden	tification Da	to busined and in	
If Identification Tags not pr What Kind of Container				ita buried and in	
What Kind of Container Information extracted	from Cemet	erv Rácor	ds		
What Kind of Container	from Cemet	erv Rácor	ds	· · · · · · · · · · · · · · · · · · ·	
What Kind of Container Information extracted IF BURIAL OTHER THAN ESTABLIS	from Cemet SHED CELETERY	ery Recor , FURNISH	rds Sketch and Ha	AP REFERENCES ON	
What Kind of Container Information extracted IF BURIAL OTHER THAN ESTABLIS REVERSE	from Cemet SHED CELETERY	Rank or	rds SKETCH AND IM Rate File or	AP REFERENCES ON Service No. Grave	
What Kind of Container Information extracted IF BURIAL OTHER THAN ESTABLIS REVERSE Body on Left, Name (Last, first	from Cemet SHED CELETERY st, middle)	Rank or	rds SKETCH AND IM Rate File or	AP REFERENCES ON Service No. Grave	
What Kind of Container Information extracted IF BURIAL OTHER THAN ESTABLIS REVERSE Body on Left, Name (Last, firs Unidentified #37 Body on Right, Name (Last, firs Nocne buried here	from Cemet SHED CEMETERY st, middle)	Rank or USMC	rds SKETCH AND HA Rate File or Rate File or	P REFERENCES ON Service No. Grave Service No. Grave	
What Kind of Container Information extracted IF BURIAL OTHER THAN ESTABLIS REVERSE Body on Left, Name (Last, firs Unidentified #37 Body on Right, Name (Last, firs	from Cemet SHED CEMETERY st, middle)	Rank or USMC	rds SKETCH AND IM Rate File or	P REFERENCES ON Service No. Grave Service No. Grave	
What Kind of Container Information extracted IF BURIAL OTHER THAN ESTABLIS REVERSE Body on Left, Name (Last, firs Unidentified #37 Body on Right, Name (Last, firs Nocne buried here Person Reporting Burial (Name Rank) R.L.RIDOLFI 2d Lt., US	from Cemet SHED CEMETERY st, middle) st, middle) st, middle)	Rank or USMC Rank or Person Co	Rate File or onducting Bur	AP REFERENCES ON Service No. Grave Service No. Grave	
Information extracted IF BURIAL OTHER THAN ESTABLIS REVERSE Body on Left, Name (Last, firs Unidentified #37 Body on Right, Name (Last, firs Nocne buried here Person Reporting Burial (Name Rank)	from Cemet SHED CEMETERY st, middle) st, middle) st, middle)	Rank or USMC Rank or Person Co	rds SKETCH AND HA Rate File or Rate File or	AP REFERENCES ON Service No. Grave Service No. Grave	