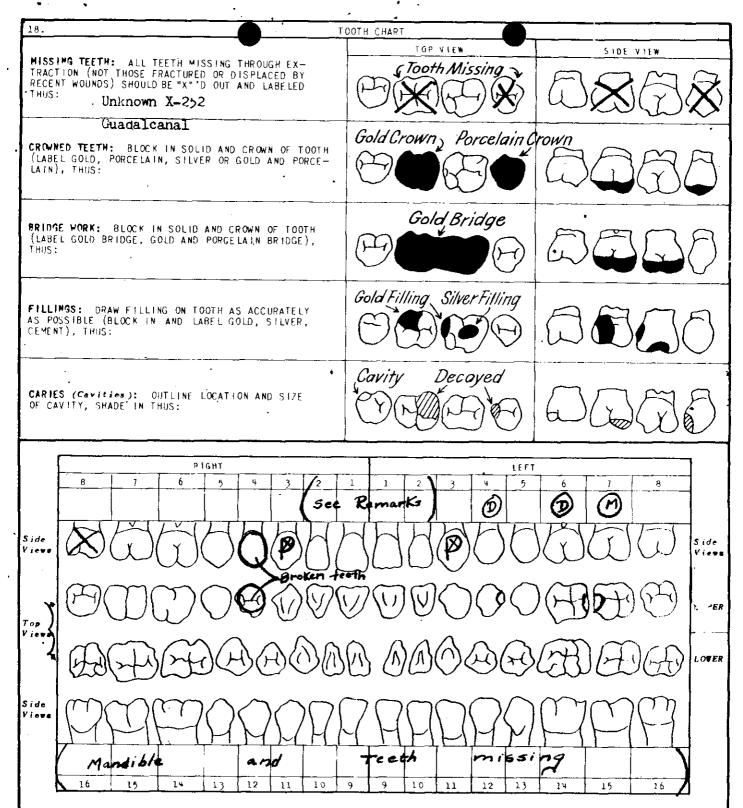
WATLONAL REMURIAL Cample -----THE PACIFIC Interred 14 March 1949 ISINTERMENT DIRECTIVE 697 💪 . =Cemetery Superintendent DIRECTIVE NUMBER DATE 8730 00000 26 | 09 | 47 NAME AND BURIAL LOCATION OF DECEASED MONTH DAY NAME SERIAL NUMBER RANK ARM DATE OF DEATH UNKHONNX-000 252 DAY MONTH YEAR CEMETERY DISPOSITION OF REMAINS CHADALCANAL 0492. 64 CODE DIST. PT. GRAVE PLOT ROW COUNTRY CAUSE OF DEATH SOLONON ISLANDS 165 6 SECTION B -- CONSIGNEE AND NEXT OF KIN NAME AND ADDRESS OF CONSIGNEE NAME AND ADDRESS OF NEXT OF KIN HONOLULU NATIONAL CEMETERY (BY ADMINISTRATIVE ORDER) SECTION C — DISINTERMENT AND IDENTIFICATION NAME SERIAL NUMBER RANK DATE OF DEATH DATE DISTINTERRED 19 November 47 UNKNOWN X-252 Unk Unk Unk IDENTIFICATION TAG ON George M. Clark, ORGANIZATION RELIGION REMAINS 1st Lt., INF NAME AND TITLE MARKER Unknown Unk SECTION D - PREPARATION OF REMAINS FOR SHIPMENT NATURE OF BURIAL CONDITION OF REMAINS Casket Skeleton OTHER MEANS OF IDENTIFICATION Grave marker and comptery record MÍNOR DISCREPANCIES 1 1 2 JUL 1949 REPAIRIATION None SRANCH REMAINS PREPARED AND PLACED IN CASKET 6 July 1948 WILLIAM J WILLIS, EMBALMER DATE CASKET SEALED BY EMBALMER (Signature) J. N. ROBINSON CASKET BOXED AND MARKED SHIPPING ADDRESS VERIFIED BY DATE 7-1-1948 BY -- J. N. ROBINSON J. TERADA I hereby certify that all the foregoing operations were conducted and accemplished under my immediate supervision and that the report above is correct. lbert Hellon GILBERT L. H. WONG, CAPT, INF SIGNATURE OF GRS INSPECTOR Prepare Discrepancy Report QMC Form 1194a for major discrepancies. VL N Inc

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. IDENTIFICA	TION D.	ATA			
1. REMAINS OF UNKNOWN				2. DATE OF RE	PORT .
X-252 (Guadalcanal)				29 March	1948
3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE		TE OF
U. S. Army Mausoleum #1		C	28	DISINTERMENT	REINTERMENT
Formerly of Guadalcanal	E	169	4	26 March 4	8 29 Mar 48
•	 DESCRIPTIO	1	25-27 y	1	
8. ESTIMATED WEIGHT 9. ESTIMATED HEIGHT	10. COLOR	OF HAIR		11. RACE	
155-165 178-70.08-5' 10" 12.Give description of any official identification found	UT			Probably	White
One (1) embossed plate on casket reads: One (1) embossed plate with remains rea One (1) I.D. (duplicate) tag reads: Un	ds: Uni known X-	dentifi 252	ed		
None BY REASON OF LACK CF Ls. Lt., FA 0-1167395 Court			H H IDENT	1	ATA
14. WAS BODY BURNED? TO WHAT EXTENT?	_	7			
TX YES NO Parts of skull face,	and lowe	r extre	mities	are burnt	
15. WAS BODY MANGLED? TO WHAT EXTENT?		•	•		
IS. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFO	d extens	ive ero	sion.		
None					
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL SERVICE, ETC. (If foundry marks are indistinct such channels for examination when facilities are not ava	notation a	hould be	ING THE TY made and a	PE, COLOR, SIZ pecimen forwas	E, MARKINGS, ded through

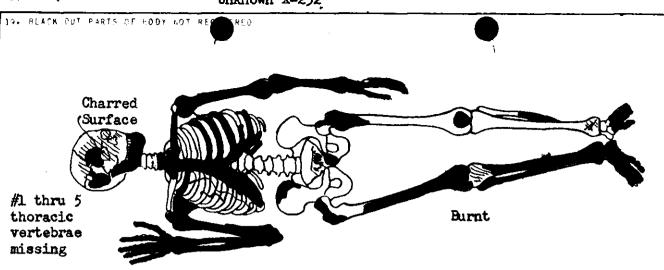
Such 4



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

REMARKS:

- 1. It looks like R-1 and R-2 and L-1 and L-2 are extracted but the maxilla is too badly broken away to say definitely.
- 2. Might have been a bridge supplying R-1 and R-2 and L-1 and L-2.



20 •

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:

No extra parts.

Paul L. Gravenor TONATURE OF HEDICAL OFFICER Lab Supervisor

TRP.

21. REMARKS AND ADDITIONAL INFORMATION

Picture a tall, slender man past twenty-five years of age, fairly muscular.

The skull is a long oval, with fairly prominent bosses. The backhead is rather straight. The face has average proportions. The nose appears to have been straight. The upper lip was probably long. The palate has average height and width.

Since the face and skull are charred, and the mandible is missing, this precludes any further description.

Fluoroscopic examination unnecessary. Teeth charted.

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

O. W. GREENWOOD, CAPT., QMC

entral identification laboratory

ND MAUSOLEUM, APO 957

Ow Greenwood

	CENTRAL		NTIFICATION BONE	LABORATORY & SOLEUM				
NAME	SIDE	NO	BONE LENGTHS IN CM	REMARKS (IF MISSING OR FRACTURED, LIST PARTS AND LOCATION				
SKULL		1	approx. 53.6	Badly burnt, extensive erosion. Mandible missing.				
· · · · · · · · · · · · · · · · · · ·	CERVICAL	6		#7 missing.				
VERTEBRAE	THORACIC	7		#1 thru #5 missing.				
	LU MB AR	5		Eroded.				
SACRUM		1		Eroded.				
I MMONT NA TEC	RIGHT	1	approx. BI-ILIAC DIAM	11				
I NNOM I NATES	LEFT	1	25.2	11				
RIBS		14		Multiple fractures.				
STERNUM		0		Missing.				
CLAY ICLES	RIGHT	1	approx. 14.7	End eroded.				
	LEFT	0		Missing.				
SCAPULAE	RIGHT	0		11				
	LEFT	1						
HUMERI	RIGHT	0		Missing.				
	LEFT	0		13.				
RADII	RIGHT	0		H				
	LEFT	0						
ULNAE	RIGHT LEFT	0		1 11				
		0		, , , , , , , , , , , , , , , , , , ,				
HANDS	RIGHT LEFT	0		All missing except #3 metacarpal.				
FEMORA	RIGHT	1		Burnt, distal 3/4, 1/2 of head missing. Fractured, upper ‡, and half of head missing.				
	LEFT	0						
PATELLAE	RIGHT			Missing.				
	LEFT	0		Medial condyle, small portion posterior shaft present only.				
TIBIAE	RIGHT	1	38.6	-				
	RIGHT	0	70.0	Eroded distal and proximal ends. Missing.				
FIBULAE	LEFT	1		Distal 1/2 missing.				
	RIGHT	1		All missing except talus, calcaneus, #1				
FEET	LEFT	ō		Cuneiform. Missing.				
HUMERO-CLAVICULAR			A PPROX	CIMATE				
ESTIMATED HEIGHT	178-70.08	-5'10	AGE 25-	-27 YEARS				
ESTIMATED WEIGHT	155-16	5	LEG-H11	P BR RATIO UTD				
ENCLOSURE TO:	Unknown	X - 252	(Guadalcanal	Paul L. Gravenor Lab Supervisor				

GP - AGRS 2 |

NARRATIVE

The above mentioned cases were processed simultaneously and during the course of processing it was found that the remains of X-254 consisted of an extra partly complete articulating skeleton.

The cases listed above were checked in an effort to associate the extra partial skeleton, and the only association made was that of a right and left articulating clavicles from X-254 to X-255.

The remainder of the partial skeleton has been removed and classified as X-254 "A" after being fully processed.

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NO ONC Form 1002					DATE REPORT FILLED OUT
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may be used until exhausted)	(TM IO	-630 and AR	30-1815)		11 October 1945
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1/	RANK		SERIAL NUMBER		COUNTRY
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	ORGANIZATIO			BRANCH	
\ \ \ \ \		Unknown		Unkno	
	RACE		RELIGION		DATE OF DEATH
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PLACE OF DEATH			CAUSE OF DEAT	гн	
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Tulagi, B.S.	I.		Unk	nown	
IDENTIFICATION TAGS FOUND ON BODY			IF NO IDENTIF	ICATION TAGS, OTHER	MEANS USED TO IDENTIFY
<u> </u>	EXEX NONE		800Y (Identif	ication Cards, Lett	ers, etc.'
DISPOSITION OF SUBSTITUTE TAGS, IF	MADE				
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YES	□ZC NO			TES	□ No
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			e Paragraph 4		1
BODY ON LEFT. NAME (Last, First, Mi	iddle Initial)		RANK	SERIAL NO.	ORGANIZATION U.S.S. LaVallette
X - 273 - Unknown			Unknown	Unknown	
BODY ON RIGHT, NAME (Last, First, A	liddle Initial		RANK Unknown	SERIAL NO. Unknown	ORGANIZATION S
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INSTRUCTIONS FOR FILLING OUT E	URIAL REPORT	MAKE OUT	MC FORM 1 GR	S IN QUADRUPLICATE	FOR LL S. DEAD, ONE ADDI-
TIONAL COPY FOR ALLIED AND ENEMY DE VICE. GRAVES REGISTRATION SERVICE	AD. SIGN ALL	COPIES. SI	AND TWO COPI	U NEAREST MEMBER OF	GRAVES REGISTRATION SER - ONE HIGHER ADMINISTRATION
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TION OFFICER OF THAT HEADQUARTERS	TO BASE SECT	ION GRAVES	REGISTRATION S	ERVICE OFFICER.	
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OVER FOR BURIAL INSTRUCTIONS			ao 011A		ток д, now 4. Grave

88, USN & USMC Cemetery #1 Tulagi B.S.I.

OVER FOR BURIAL INSTRUCTIONS

		LIGATION PAR DUMAN
-		INSTRUCTIONS FOR BUTAL 1. PREPARATION OF BODY, BURIAL AND MARKINGS OF GRAVE: HAVE BODY EXAMINED BY A MEMBER OF THE MEDICAL DETACHMENT AND ATTACH EMT 52D. REMOVE ALL PERSONAL PROPERTY. DRESS BODY WHEN PRACTICAL AND BURY IN A SUITABLE SHROUD. DIG GRAVE TO DEPTH OF FIVE FEET; IN HASTY BURIALS, TO SUFFICIENT DEPTH TO PREVENT DESTRUCTION OF BODY OR LOSS OF IDENTITY. PLACE ONLY ONE BODY IN A GRAVE. REMOVE ONE IDENTIFICATION TAG AND ATTACH TO GRAVE MARKER. LEAVE OTHER TAG ON BODY IN PROTECTED POSITION. IF NO TAG IS PRESENT, MAKE A NOTATION OF ID
N	JHW.	EAVE UTHER TAG ON BOUT IN PROTECTED POSTITON. IF NO TAG IS PRESENT, MAKE A NOTATION OF ID: ENTIFYING DATA IN DUPLICATE ON FORM; PLACE IN BURIAL BOTTLE, CANTEEN, SPENT SHELL OR OTHER AVAILABLE CONTAINER; BURY ONE WITH REMAINS AND THE OTHER ONE (1) FOOT BELOW GRAVE MARKER. WHEN MARKING THE GRAVE, FASTEN IDENTIFICATION TAG TO TEMPORARY NAME PEG AND PLACE AT HEAD OF GRAVE, IF NO TAG IS AVAILABLE, WRITE IDENTIFYING DATA ON MARKER. WHEN PEGS ARE NOT A- VAILABLE, USE OTHER SUITABLE MEANS TO UNMISTAKABLY IDENTIFY GRAVE AS A MILITARY BURIAL. IF BODY IS UNIDENTIFIED, TAKE FINGERPRINTS OF BOTH HANDS OR THOSE REMAINING FINGERS. IF NONE ARE AVAILABLE, FILL OUT TOOTH CHART, IF POSSIBLE AND NOTE:
	E N	HEIGHT WEIGHT COLOR OF EYES COLOR OF HAIR BIRTHMARKS, SCARS OR TATTOOS
	LIDENT	WEAPON AND SERIAL NUMBER LAUNDRY MARKS WHERE BODY WAS BURIED
,	IF IED. TAK	2. LOCATION OF GRAVE: REPORT BURIALS IN ESTABLISHED CEMETERIES BY PLOT, ROW, AND GRAVE NUMBER (OR SHOW ON CEMETERY MAP). FOR ALL OTHER BURIALS PREPARE SKETCH IN SPACE PROVIDED BELOW; AND GIVE LOCATION BY MEANS OF MAP REFERENCES, OR BY REFERENCE TO PROMINENT PERMANENT LANDMARKS. INFORMATION MUST BE SPECIFIC, ACCURATE, COMPLETE. STAND AT FOOT OF GREEVE FACING HEAD TO DETERMINE BODIES BURIED TO THE LEFT AND RIGHT.
	E 7	3. PERSONAL EFFECTS: LIST ONLY PERSONAL EFFECTS TAKEN FROM BODY ON THE BURIAL REFORM. PLACE THESE WITH INFORMATION AS TO IDENTITY OF OWNER, ORGANIZATION, EMERGENCY AS ESSEE IN PERSONAL EFFECTS BAG, OR WRAP IN HANDKERCHIEF, TOWEL, OR OTHER AVAILABLE MAY-EM LAND TURN OVER TO GRAVE REGISTRATION SERVICE PERSONNEL WITH REPORT OF DEATH. GOVERNMENT PROPERTY IS NOT TO BE INCLUDED IN PERSONAL EFFECTS BUT IS TO BE TURNED INTO SALVAGE COLD CTING POINT. THIS INDITION OF EACH AND EVERY TOOTH WILL BE INDICATED ON THE TOOTH CHART, INACCORDANCE
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					SERIAL	nown	ORGANIZ		GRAVE NO.
BODY ON RIGHT, NAME Unknowns X-2				RANK Unknown	1		USI		GRAVE NO.
PERSON CONDUCTING B				VERIFIED BY	G. R. S	. OFFICER		******	-
Unknown					Lt. Q	C for	•	QMC	
IF BURI.	AL OTHER THAN	IN ESTABLISHE	D CEMETERY	FURNISH SKETO	H AND M	AP REFEREN	CES ON F	REVERSE	
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GRAVES REGISTRATION HEADQUARTERS (TO BE REGISTRATION OFFICE	CHECKED AGAIL	NST CASUALTY (REPORTS AND	ALLIED PAPER	S AND AL	L COPIES'	VERIFIED	BY THE	GRAVES

OVER FOR BURIAL INSTRUCTIONS

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make a notation of identifying data in duplicate on torm; place in burial bottle, consider, cons	01 \$ _6 ,	.me 1 ខ្ញុំ s	ib diw son		chart, i	ļt.	. 0	
Mean of the control	o in homadkerchief, towel, or other tion Service Personnel, with Re- cluded in personal effects but is	effects bag, or wre t to Grave Registro erty is not tobe in ction point.	ajvage collections and turn over and personal	addressee material eath. Gov ned into s	to be turi available available	lint	Left	
make a notation of identifying data in abovected postition. If no tag is present and notation of identifying data in abovected postition of identifying data in advantable confaints bury one with remains and the other or confaints bury one with remains and the other one if postitions are not available, use other suitable means to unmistakably if it postible, and note: I	I other burials prepare sketch in map reference to specific, accurate, complete, Stand specific, accurate, complete, Stand site to the left and right. Ifects taken from body on the Burio identity of owner, organization	etery map). For a ocation by meams o Information must be determine bodies b ist only personal e ith information as	Tace these as ELECTS: Lind head to and dive 1 on and to a to a store transfer to a store transfer tran	f form b bEBSONAL dtuke to bermoment unmber (o	and grave prominent at foot of ial Repor	and fingerp	Left Index Finger	
make a notation of identifying data in duplicated postition. If no tag is present and the order is notation of identifying data in duplicated on form; place in burial bottle, can acker, spent shell or other available confaints, bury one with remains and the other one porary name peg and place at head of grave, if no tag is available, write identifying a data on marker. When pegs are not available, use other suitable means to unmistakably in a data on marker. When pegs are not available, use other suitable means to unmistakably in a data on marker. When pegs are not available, use other suitable means to unmistakably in a data on marker. When pegs are not available, it ill out tooth chart in the control of the control	AHEKE BODI MYS BURIED	AUNDRY MARKS	I SERMUN	ND SREIVE	MEVEON V	1 1	Left dle Finger	
make a notation of identifying datained the grave, fasten identification tag to ten and the other one and the other one is a form; place in burial bottle, contend to the spent shell or other available contained on form; place in burial bottle, contend to the other one is a form; place in burial bottle, contend to the other one is a form; place in burial bottle, contend to the other one is a form; place in burial bottle, contend to the other one is a form; place in burial bottle, contend to the other one is a form; place in burial bottle, contend to the other one is a form; place in burial bottle, contend to the other one is a form; place in burial bottle, contend to the other one is a form; place in burial bottle, contend to the other one is a form; place in burial bottle, contend to the other one is a form; place in burial bottle, contend to the other one is a form; place in burial bottle, contend to the other one is a form; place in burial bottle, contend to the other one is a form; place in burial bottle, contend to the other one is a form; place in burial bottle, contend to the other one is a form; place in burial bottle, contend to the other one is a form; place in burial bottle, contend to the other one is a form; place in burial	BIRTHMARKS, SCARS OR TATTOOS	COFOR OF HAIR	COFOE OF EY	MEICHL	HEIGHT	fied,	Mid	
by amember of the medical detachment and attach EMT 52b. Remove all personal property Dress body when practical and bury in a suitable shroud. Big grave to depth of five leet; in hasty burials, to sufficient depth to prevent destruction of body or loss on identity. Place only one body in agrave. Remove one identification tag and attach to grave and action of body or loss on a suitable shrows the suitable shrows the property of the suitable shrows the suitable shrows the property of the suitable shrows the suitable shrow	torm; place in burial bottle, con- yone with remains and the other one we, fasten identification tag to ten ug is available, write identifying ther switable means to unmistakably nidentified, take fingerprints of	datain duplicate or lable container, bu nen marking the gra ad of grave, if no t ot available, use o rial. If body is u	tdentifying of the control of the co	fatton of nt shell o below graw me peg and arker, Wh grave am o grove am o	make a no feen, spe data on m jdentify jointly	اة ا	Left Ring Finger	
INSTRUCTIONS FOR BURLAL	INCS OF GRAVE: Have body examine 52b. Remove all personal property promise. Did only or loss of the configuration togonal attach to be in the configuration togonal attach to the configuration to the	BURIAL, AND MAR Bent and attach DMI try in a suitable s icient depth to pre in agrave. Remove	ION OF BODY, dical detachi ctical and bi als, to suff	rotthemery ywhen pro hostyburi Ploceon	Dress bod feet; in identity.		Left ittle Finger	

WD OMC Form 1042 Rev. 1 November 1942					DATE REPORT FILLED OUT			
(GRS 1, dated 11 May 1942 may be used until exhausted)	RS 1, dated 11 May 1942 REFORT OF INTERMENT							
FOR IMPRINT OF IDENTIFICATION TAG	NAME (Last,	First, Midd	lle Initial)	 	12 April 1945			
/	<u> </u>	NTIFIED	BODY	X- 34	COUNTRY			
<i> </i>	RANK Unkn	O TOTAL	SERIAL NUMBER	nknown				
O NO TAGS	ORGANIZATION			BRANCH	Unknown			
II NO TAGE	- CANAL TEAT TO M	Unkno			known			
	RACE	UIIKIIO	RELIGION	011	DATE OF DEATH			
	Unk	nown		Unknown	Unknown -			
PLACE OF DEATH			CAUSE OF DEAT					
			İ					
Tulagi, B.S	3.I.			Unknow				
IDENTIFICATION TAGS FOUND ON BODY 1 2 DISPOSITION OF SUBSTITUTE TAGS, IF	MADE NONE	 		ICATION TAGS, OTHER lication Cards, Lette	MEANS USED TO IDENTIFY ers, etc.\			
COMPLETE FINGERPRINT CHART OF BOTH HANDS ON REVERSE COMPLETE TOOTH CHART ON REVERSE								
YES	MANUS ON REVE	OL	TOPH CETE 1001	YES YES	□ NO			
LIST ANATOMICAL CHARACTERISTICS AND		F FINGERPR	INTS CANNOT BE					
	<u> </u>							
LIST OF PERSONAL EFFECTS FOUND ON E	BODY AND DISPO	SITION OF S	SAME					
	No ne	rechel e	ffects/found	1				
	wo per	r sonar a	ilectslound	l.				
				•				
NAME OF EMERGENCY ADDRESSEE			ADDRESS OF EM	ERGENCY ADDRESSEE				
II-lan a a								
Unknown IF BURIAL OTHER THAN II	L FOTABLI CUED	COVETERY EL	IDNIOU SYSTEM A	Unknown	DEVENER			
	PLOT NO.	ROW NO.		GRAVE MARKER	REVERSE			
19 Dec. 1944 HOUR 1430	B	4	88	Wooden Cross				
(Reburial)	USN &	USMC CE	METERY #1_1	TULAGI, B.S.I.				
TYPE OF RELIGIOUS CEREMONY		**	PERSON REPORT	ING BURIAL				
Previous Service Unknow	v n		مر ديد خر	what	a. Marge			
IDENTIFICATION TAGS SURIED WITH BOIL	YES T	XX NO	ATTACHED TO		VES GOT NO			
IF IDENTIFICATION TAGS NOT PRESENT	, WHAT OTHER I	DENTIFICAT	ON DATA BURIED	WITH BODY AND IN W	HAT KIND OF CONTAINERS.			
				,				
BODIES BURIED EITHER SIDE (See Paragraph 4 on Reverse)								
BODY ON LEFT, NAME (Last, First, M' PARKS, John B.	iddle Initial)		Unknown	SER IAL NO.	ORGANIZATION			
BODY ON RIGHT, NAME (Last, First,)	fiddle toitiel	1	RANK	300-18-15 SERIAL NO.	ORGANIZATION			
COUNTRYMAN, Eugene D.	TING IS THE IST	1	Unknown	410-61-32	USN -			
PERSON CONDUCTING BURIAL RITES	-		VERIFIED BY G	. R. S. OFFICER	Land			
					MM N. / Wan			
Unknown				//	HN R. NOLAN			
			<u></u>		t Lt., QMC			
INSTRUCTIONS FOR FILLING OUT I TIONAL COPY FOR ALLIED AND ENEMY DE VICE. GRAVES REGISTRATION SERVICE HEADQUARTERS (TO BE CHECKED AGAINST TION OFFICER OF THAT HEADQUARTERS	EAD. SIGN ALL WILL FORWARD CASUALTY REP	. COPIES - S The Origina Ports and Al	SUBMIT REPORT T AL AND TWO COPI LLIED PAPERS AN	O NEAREST MEMBER OF ES THROUGH AT LEAST ID ALL COPIES VERIFI	GRAVES REGISTRATION SER - ONE HIGHER ADMINISTRATIVE			
DAEK LAN BAULUE INSTRUCTIONS								

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		INSTRUCTIONS FOR	
-	R OF THE MEDICAL DETA DY WHEN PRACTICAL AND STY BURIALS, TO SUFFI ACE ONLY ONE BODY IN AVE OTHER TAG ON BODY TIEVING DATA IN DUPLI	CHMENT AND ATTACH EMT 52D. BURY IN A SUITABLE SHROUD. CIENT DEPTH TO PREVENT DEST A GRAVE. REMOVE ONE IDENT IN PROTECTED POSITION. IF CATE ON FORM: PLACE IN BUR	REMOVE ALL PERSONAL PROPERTY. DRESS DIG GRAVE TO DEPTH OF FIVE FEET; IN FRUCTION OF BODY OR LOSS OF IDENTITY. FIGURATION TAG AND ATTACH TO GRAVE MARKER. NO TAG IS PRESENT, MAKE A NOTATION OF IDIAL BOTTLE, CANTEEN, SPENT SHELL OR OTHER
2	AILABLE CONTAINER; BU EN MARKING THE GRAVE, GRAVE, IF NO TAG IS ILLABLE, USE OTHER SUI DY IS UNIDENTIFIED, T E AVAILABLE, FILL OUT	RY ONE WITH REMAINS AND THI FASTEN IDENTIFICATION TAG AVAILABLE, WRITE IDENTIFY!! TABLE MEANS TO UNMISTAKABL' AKE FINGERPRINTS OF BOTH HI TOOTH CHART, IF POSSIBLE	TO THER ONE (1) FOOT BELOW GRAVE MARKER. TO TEMPORARY NAME PEG AND PLACE AT HEAD NG DATA ON MARKER. WHEN PEGS ARE NOT A- Y IDENTIFY GRAVE AS A MILITARY BURIAL. IF ANDS OR THOSE REMAINING FINGERS. IF NONE AND NOTE:
	IGHT WE IGHT	COLOR OF EYES COLOR OF	HAIR BIRTHMARKS, SCARS OR TATTOOS
	APON AND SERIAL NUMBE	_	WHERE BODY WAS BURIED
ω	AVE NUMBER (OR SHOW O DED BELOW; AND GIVE L RMANENT LANDMARKS. I PAVE FACING HEAD TO DE	N CEMETERY MAP). FOR ALL O OCATION BY MEANS OF MAP REI NFORMATION MUST BE SPECIFIC TERMINE BODIES BURIED TO T	
.	ORT FORM. PLACE THESE DORESSEE IN PERSONAL E ITAL AND TURN OVER TO INT PROPERTY IS NOT TO DILECTING POINT. TE CONDITION OF EACH A	WITH INFORMATION AS TO ID: FFECTS BAG, OR WRAP IN HAN GRAVE REGISTRATION SERVICE D BE INCLUDED IN PERSONAL E	FFECTS TAKEN FROM BODY ON THE BURIAL RE- ENTITY OF OWNER, ORGANIZATION, EMERGENCY DERCHIEF, TOWEL, OR OTHER AVAILABLE MAT- PERSONNEL WITH REPORT OF DEATH. GOVERN- FFECTS BUT IS TO BE TURNED INTO SALVAGE
	TH DIAGRAM.		DIAGRAM REPRESENTS THE MOUTH WIDE OPEN
THUMB		SILVER FILLING GOLD FILLING	TAGRAM REPRESENTS THE MOUTH WIDE OPEN
	AV ITIES	CAVITY	
RI GHT	ISSING TEETH	DECAYED	UPPER 15
		TOOTH MISSING	shortered no remarks chart of lower tell could
.	ROWNED TEETH	PORCELAIN CROWN GOLD CROWN	17 EF 10 10 10 10 10 10 10 10 10 10 10 10 10
ω	RTOGE WORK	GOLD BRIDGE	20 23 24 25 26 27
	 	SKETCH AND HAP R	EFERENCE
		N	•
N .	•	,	
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Tim mus com and 6 1				
WD QMC Form 1902 Rev. 1 November 1942 (GRS 1, dated 11 May 1942	DEBO	INTERMENT		DATE REPORT FILLED
(GRS 1, dated 11 May 1942 may be used until exhausted)	REPOR	INTERMENT		The second second
	(IN 10-030 and	AR 30-1015)		12 April 1945
FOR IMPRINT OF IDENTIFICATION TAG	NAME (Last, First, M	fiddle. Initial)		
	UNIDENTIFIE		X-34	
	RANK	SERIAL NUMBER		COUNTRY
0 , , , , , , ,	Unknown ORGANIZATION	U	nknown .	Unknown
NO TAGS				
	RACE	nown RELIGION	U	nknown DATE OF DEATH
	Unknown	ACCIDION	Unknown	Unknown
PLACE OF DEATH		CAUSE OF DEAT		OHRIO WIL
Tulagi, B.S	·I.		Unknow	WI .
IDENTIFICATION TAGS FOUND ON BODY		IF NO IDENTIF	ICATION TAGS, OTHER	MEANS USED TO IDENTIFY
1 2	XXX NONE	BODY (Identif	ication cards, Lett	ers, etc.
DISPOSITION OF SUBSTITUTE TAGS, IF	MADE			
COMPLETE FINGER PRINT CHART OF BOTH F	HANDS ON DEVEDSE	COMPLETE TOOT	H CHART ON REVERSE	
YES	AND NO	COMPLETE 1001	TEN YES	□ NO
LIST ANATOMICAL CHARACTERISTICS AND	OTHER DATA IF FINGER	PRINTS CANNOT BE	TAKÉN	
LIST OF PERSONAL EFFECTS FOUND ON BE	DOY AND DISPOSITION O	F SAME		
	N			
	No personal	effects/found	1	
NAME OF EMERGENCY ADDRESSEE		ADDRESS OF EN	MERGENCY ADDRESSEE	
Unknown			Unknown	
IF BURIAL OTHER THAN IN			NO MAP REFERENCES O	M REVERSE
19 Dec. 1944 HOUR 1430	PLOT NO. ROW NO.	GRAVE NO.	GRAVE MARKER	
(Reburial)		88 CEMETERY #1	Wooden Cross	
TYPE OF RELIGIOUS CEREMONY	COM & COME	PERSON REPORT	FULAGI, B.S.I.	
Previous Service Unknown		PERSON REPORT	ING BURIAL	
The second secon		1 Ags.	Suchara	. Hoyer
IDENTIFICATION TAGS BURIED WITH BODY IF IDENTIFICATION TAGS NOT PRESENT,				
THE PRESENT.	WHAT DIREK IDENTIFIC	ATTON DATA BURIEL	WITH BOUT AND IN W	HAT KIND OF CONTAINERS.
11008	ES BURIED EITHER SIDE	(See Paragraph)	on Reverse)	
BODY ON LEFT, NAME (Last, First, Mic	dle Initial)	RANK	SERIAL NO.	ORGAN IZAT ION
PARKS, John B.		Unknown	300-18-15	USN
BODY ON RIGHT, NAME (Last, First, Mi COUNTRYMAN, Eugene D.	iddle Initial)	RANK	SERIAL NO.	ORGANIZATION
COUNTRYMAN, Eugene D.		Unknown	410-61-32	USN .
PERSON CONDUCTING BURIAL RITES		VERIFIED BY G	. R. S. OFFICER	ha QN.C.
Thelenan			4	HN R. NOLAN
Unknown			//	THE PROPERTY
INSTRUCTIONS FOR SILL INC. OUT IN	IDIAL DEBORT. MAKE O	UT ONE SOOM ! OF	/ Is	t Lt., QMC
INSTRUCTIONS FOR FILLING OUT BUT TIONAL COPY FOR ALLIED AND ENEMY DEA VICE. GRAVES REGISTRATION SERVICE W HEADQUARTERS (TO BE CHECKED AGAINST TION OFFICER OF THAT HEADQUARTERS)	AD. SIGN ALL COPIES.	SUBMIT REPORT T	O IN QUADRUPLICATE O NEAREST MEMBER OF	FOR U.S. DEAD, ONE ADDI-
VICE. GRAVES REGISTRATION SERVICE V	WILL FORWARD THE ORIG	INAL AND TWO COP	ES THROUGH AT LEAST	ONE HIGHER ADMINISTRATIVE
TION OFFICER OF THAT HEADQUARTERS)	TO BASE SECTION CRAY	FS REGISTRATION S	D ALL COPIES VERIFI	ED BY THE GRAVES REGISTRA
THE HEADQUARTERS	TO DASE SECTION GRAV	CO MEGISINALIUM S	CRATICE OFFICER.	
OVER FOR BURIAL INSTRUCTIONS				

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