

293 - Unk. Guadalcanal (Misc) (X-95, X-99, X-118, 312, 314, & X-320)

QMGMT 293
GRS Pacific
SUBJECT: Resolution of Unidentified Remains

1st Ind

DEPARTMENT OF THE ARMY, QMG, WASHINGTON 25, D. C. 11 January 1949

TO: Commanding Officer, American Graves Registration Service
Zone, APO 958, c/o Postmaster, San Francisco, California Pacific

1. Reference is made to basic communication and inclosures, w/drawn.

2. Subject cases have been reviewed and this office concurs in the classification of Unknowns X-95, X-99, X-118, X-312, X-314, and X-320, all formerly Guadalcanal, as unidentifiable.

FOR THE QUARTERMASTER GENERAL:

6 Incls: w/d

T. H. METZ
Lt. Colonel, QMC
Memorial Division

COPY

X 293 W
Admiral Guadalcanal X-320

406

TDH *mtb*

NATIONAL MEMORIAL CEMETERY
OF THE PACIFIC

Interred 1 February 1949 **DISINTERMENT DIRECTIVE**
B 574 *Alvan C Baker* - Cemetery Superintendent

1

SECTION A — ALVAN C. BAKER DIRECTIVE NUMBER 8730 00000 DATE 26 09 47
NAME AND BURIAL LOCATION OF DECEASED

NAME SERIAL NUMBER RANK ARM DATE OF DEATH
UNKNOWN X-000320 8

CEMETERY GUADALCANAL DISPOSITION OF REMAINS 0492 64
CODE DIST. PT.

LOT ROW GRAVE COUNTRY SOLOMON ISLANDS CAUSE OF DEATH 6

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE HONOLULU NATIONAL CEMETERY TERRITORY OF HAWAII (BY ADMINISTRATIVE ORDER)
NAME AND ADDRESS OF NEXT OF KIN

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME UNKNOWN X-320 SERIAL NUMBER Unk RANK Unk DATE OF DEATH Unk DATE DISTINTERRED 17 Nov-47

IDENTIFICATION TAG ON REMAINS MARKER ORGANIZATION Unk RELIGION Unk IDENTIFICATION VERIFIED BY C W BARNETT NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Casket CONDITION OF REMAINS Skeletal

OTHER MEANS OF IDENTIFICATION 1 Grave marker, 1 Mortuary tag
MINOR DISCREPANCIES 1 None
FILE 18 MAY 1949

REPATRIATION BRANCH

REMAINS PREPARED AND PLACED IN CASKET DATE 1 July 1948 BY LAWRENCE A. JONES, EMBALMER

CASKET SEALED BY G. D. MEEK EMBALMER (Signature) *Lawrence A. Jones* LAWRENCE A. JONES

CASKET BOXED AND MARKED DATE 7/1/48 BY G. D. MEEK SHIPPING ADDRESS VERIFIED BY T. P. MADINE

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.

William A. McNamary
WILLIAM A. McNAMARY
SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

11/14
134

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

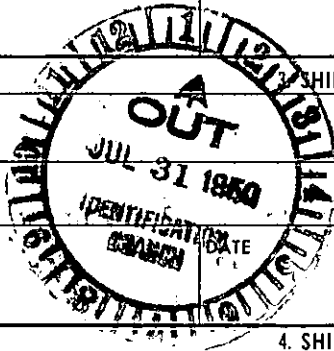
FROM U S ARMY MAUS NO 3		TO HAWN DIST CENTER	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>John L. Murphy</i> JOHN L. MURPHY Capt., QMC 01585944	DATE JAN 19 1949	SIGNATURE OF RECEIVER <i>James B. Harris</i> JAMES B HARRIS CAPTAIN Q M C	DATE JAN 19 1949

2. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

3. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE



4. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE (BY CONVEYANCE INSTITUTE ORDER)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER HONOLULU NATIONAL CEMETERY	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN Unknown X-320 Guadalcanal				2. DATE OF REPORT 30 March 1948		
3. NAME OF CEMETERY U. S. Army Mausoleum # 2 Guadalcanal		4. PLOT C	5. ROW 174	6. GRAVE 14 7	7. DATE OF DISINTERMENT 29 Mar '48	REINTERMENT 30 Mar '48

PHYSICAL DESCRIPTION **Age 21 to 23 years.**

8. ESTIMATED WEIGHT 100 to 110 lbs.	9. ESTIMATED HEIGHT <i>approx</i> 151-59.45-4'11 3/8"	10. COLOR OF HAIR U. T. D.	11. RACE U.T.D. due to the very short stature, these remains may be of a man other than white.
--	---	-------------------------------	---

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

One (1) embossed plate on blanket reads: Unknown X-320, Plot-C, Row-174, Grave-7.
 One (1) embossed plate on casket reads: Unknown X-320, Plot-C, Row-174, Grave-7.

13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES

None

U N I D E N T I F I A B L E

BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA

CYRIL C. DISNEY
 1st. Lt., FA 0-1167395 *Cyril C. Disney* | *22 Dec 1948*

14. WAS BODY BURNED? TO WHAT EXTENT?

YES NO

15. WAS BODY MANGLED? TO WHAT EXTENT?

YES NO **Ribs and vertebrae.**

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

None

17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

One (1) brown leather shoe (right) size 9½ C. (see below)
 One (1) canteen marked-U.S. AGM Co., 1943. On the bottom were scratched the letters K. V. P. (the latter P. could be a D.)

(Since these remains are of a man approximately 4' 11 3/8" it is very doubtful that this shoe was worn by this man).

Incl. 6

19. BLACK OUT PARTS OF BODY NOT RECORDED



Inferior end of fibula missing.

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: NUMBER

No extra parts.

Paul L. Gravenor SIGNATURE OF MEDICAL OFFICER Lab Supervisor

21. REMARKS AND ADDITIONAL INFORMATION

Picture an extremely short man, very likely of a race other than white. Due to the absence of the skull, a description of cranial and facial features is impossible.

Fluoroscopical examination unnecessary. No teeth.

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 GREENWOOD, CAPT., QMC ORGANIZATION


SIGNATURE

**CENTRAL IDENTIFICATION LABORATORY
AND MAUSOLEUM, APO 957**

CENTRAL IDENTIFICATION LABORATORY & MUSOLEUM
BONE LIST

NAME	SIDE	NO	BONE LENGTHS IN CM	REMARKS (IF MISSING OR FRACTURED, LIST PARTS AND LOCATION)
SKULL		0		Missing.
VERTEBRAE	CERVICAL	1		Fragment of #5 or 6 present.
	THORACIC	8		Fragments of 8 present.
	LUMBAR	3		#3 and 5 missing.
SACRUM		1		Fragments only present.
INNOMINATES	RIGHT	1	BI-ILIAC DIAM U. T. D.	Fractured - parts missing.
	LEFT	1		Fractured - parts missing.
RIBS		16		Fractured.
STERNUM		0		Missing.
CLAVICLES	RIGHT	1	13.0	
	LEFT	1	13.5	
SCAPULAE	RIGHT	1		Fractured - parts missing.
	LEFT	1		Fractured - parts missing.
HUMERI	RIGHT	1	27.3	
	LEFT	1	27.5	
RADII	RIGHT	1	20.9	
	LEFT	1	20.8	
ULNAE	RIGHT	1	22.7	
	LEFT	1	22.3	
HANDS	RIGHT	1		Lunate only present.
	LEFT	1		Capitate, 2, 3, & 4 metacarpals present.
FEMORA	RIGHT	0		Missing.
	LEFT	1		Fractured, inferior end missing.
PATELLAE	RIGHT	0		Missing.
	LEFT	0		"
TIBIAE	RIGHT	1		Fractured, both ends missing.
	LEFT	0		Missing.
FIBULAE	RIGHT	1		Fragments of shaft only.
	LEFT	0		Missing.
FEET	RIGHT	0		"
	LEFT	0		"

HUMERO-CLAVICULAR RATIO 48.5		APPROXIMATE	
ESTIMATED HEIGHT 151 59.45 4' 8 3/8"	AGE	21 to 23	YEARS
ESTIMATED WEIGHT 100 to 110 lbs.		LEG-HIP BR RATIO U. T. D.	


 Paul L. Gravenor
 Lab. Supervisor
 ANTHROPOLOGIST

ENCLOSURE TO: Unknown X-320 Guadalcanal

WD QMC FORM 1042
Rev. 1 February 1945
(Supersedes form dated
3 Jan. 1945. Existing stocks
may be used until exhausted.)

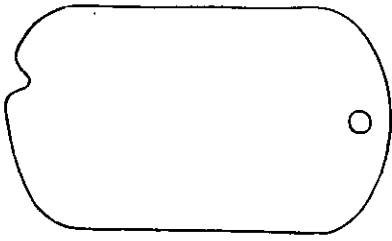
REPORT OF INTERMENT
(TM 10-630 and AR 30-1815)

DATE REPORT FILLED, QM7-7

29 Oct 1945

For Imprint of Identification Tag

NAME (Last, First, Middle Initial)



Unknown X-320

RANK
Unknown

SERIAL NUMBER
Unknown

COUNTRY
Unknown

ORGANIZATION
Unknown

BRANCH
Unknown

RACE
Unknown

RELIGION
Unknown

DATE OF DEATH
Unknown

PLACE OF DEATH

Unknown

CAUSE OF DEATH

Unknown

IDENTIFICATION TAGS FOUND ON BODY

1 2 NONE

IF NO IDENTIFICATION TAGS, OTHER MEANS USED TO IDENTIFY
BODY (Identification Cards, Letters, etc.)

DISPOSITION OF SUBSTITUTE TAGS, IF MADE

COMPLETE FINGERPRINT CHART OF BOTH HANDS ON REVERSE

YES NO

COMPLETE TOOTH CHART ON REVERSE

YES NO

LIST ANATOMICAL CHARACTERISTICS AND OTHER DATA IF FINGERPRINTS CANNOT BE TAKEN.

This skelton was found approximately
100 yards from the beach directly in

LIST OF PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME.

No personal effects found.

front of lever Brothers Managers
Home, on Gavutu.

An American Helmet & shoes were found
with the body.

No identification found.

NAME OF EMERGENCY ADDRESSEE

Unknown

ADDRESS OF EMERGENCY ADDRESSEE

Unknown

NAME, NUMBER AND LOCATION OF CEMETERY.

Army Navy Marine Cemetery Guadalcanal B.S.I.

DATE OF BURIAL

Reburial
29 Oct 1945

HOUR

1430

PLOT NO.

C

ROW NO.

174

GRAVE NO.

7

GRAVE MARKER

Wooden Cross

TYPE OF RELIGIOUS CEREMONY

Catholic, Protestant, Hebrew, Military

PERSON REPORTING BURIAL

/s/ T/5 William H. Tussey

IDENTIFICATION TAGS BURIED WITH BODY YES NO

ATTACHED TO MARKER

YES NO

IF IDENTIFICATION TAGS NOT PRESENT, WHAT OTHER IDENTIFICATION DATA BURIED WITH BODY AND IN WHAT KIND OF CONTAINERS.

BODIES BURIED EITHER SIDE (See Paragraph 2 on Reverse)

BODY ON LEFT, NAME (Last, First, Middle Initial)

Canterbury, Ralph P.

RANK

PhM 2c

SERIAL NO.

8507852

ORGANIZATION

Navy 145

GRAVE NO.

6

BODY ON RIGHT, NAME (Last, First, Middle Initial)

Drain, H. FF.

RANK

Unknown

SERIAL NO.

208 491

ORGANIZATION

USMC

GRAVE NO.

8

PERSON CONDUCTING BURIAL RITES

Chaplain Julius Kravetz

Chaplain Franklyn Board

Chaplain John P. Morrissey

VERIFIED BY G. R. S. OFFICER

/s/ Raymond T. Manuel, 1st Lt., QMC

/t/ FOR John R. Nolan, 1st Lt., QMC

IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCES ON REVERSE

INSTRUCTIONS FOR FILLING OUT BURIAL REPORT: PREPARE IN QUADRUPPLICATE FOR U. S. DEAD, ONE ADDITIONAL COPY FOR ALLIED AND ENEMY DEAD. SIGN ALL COPIES. SUBMIT REPORT TO NEAREST MEMBER OF GRAVES REGISTRATION SERVICE. GRAVES REGISTRATION SERVICE WILL FORWARD THE ORIGINAL AND TWO COPIES THROUGH AT LEAST ONE HIGHER ADMINISTRATIVE HEADQUARTERS (TO BE CHECKED AGAINST CASUALTY REPORTS AND ALLIED PAPERS AND ALL COPIES VERIFIED BY THE GRAVES REGISTRATION OFFICER OF THAT HEADQUARTERS) TO BASE SECTION GRAVES REGISTRATION SERVICE OFFICER.

OVER FOR BURIAL INSTRUCTIONS

INSTRUCTIONS FOR BURIAL.






1. PREPARATION OF BODY, BURIAL, AND MARKINGS OF GRAVE: Have body examined by a member of the medical detachment and attach EMT 52b. 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 identifying 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 available, 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:

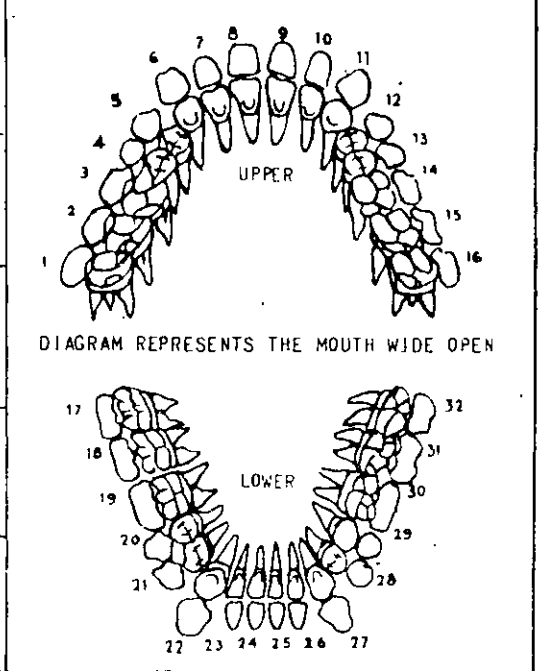
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS OR TATTOOS
WEAPON AND SERIAL NUMBER		LAUNDRY MARKS		WHERE BODY WAS BURIED

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 grave facing head to determine bodies buried to the left and right.

3. PERSONAL EFFECTS: List only personal effects taken from body on the Burial Report Form. Place these with information as to identity of owner, organization emergency addressee in personal effects bag, or wrap in handkerchief, towel, or other available material and 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 collection point.

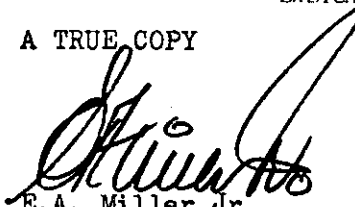
The condition of each and every tooth will be indicated on the tooth chart, in accordance with diagram.

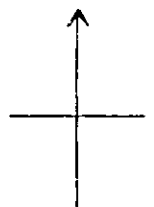
FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>
CAVITIES	 <p>CAVITY DECAYED</p>
MISSING TEETH	 <p>TOOTH MISSING</p>
CROWNED TEETH	 <p>PORCELAIN CROWN GOLD CROWN</p>
BRIDGE WORK	 <p>GOLD BRIDGE</p>



SKETCH AND MAP REFERENCE

A TRUE COPY


 E.A. Miller Jr.
 1st Lt., QMC



When unidentified, take thumb and fingerprints of both hands - if this is not possible fill in tooth chart.

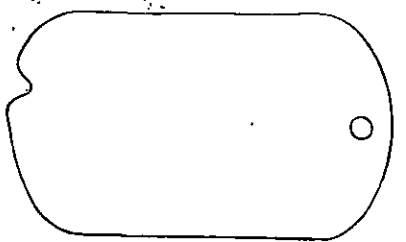
Little Finger Left
 Ring Finger Left
 Middle Finger Left
 Index Finger Left
 Thumb Left
 Thumb Right
 Index Finger Right
 Middle Finger Right
 Ring Finger Right
 Little Finger Right

WD OMC FORM 1082
 Rev. 1 February 1945
 (Supersedes form dated
 3 Jan. 1945. Existing stocks
 may be used until exhausted.)

REPORT OF INTERMENT
 (TM 10-630 and AR 30-1815)

9215
 DATE REPORT FILLED OUT
 29 October 1945

For-Imprint of Identification Tag



NAME (Last, First, Middle Initial)

Unknown X-320

RANK

Unknown

SERIAL NUMBER

Unknown

COUNTRY

Unknown

ORGANIZATION

Unknown

BRANCH

Unknown

RACE

Unknown

RELIGION

Unknown

DATE OF DEATH

Unknown

PLACE OF DEATH

Unknown

CAUSE OF DEATH

Unknown

IDENTIFICATION TAGS FOUND ON BODY

1 2 NONE

IF NO IDENTIFICATION TAGS, OTHER MEANS USED TO IDENTIFY
 BODY (Identification Cards, Letters, etc.)

DISPOSITION OF SUBSTITUTE TAGS, IF MADE

COMPLETE FINGERPRINT CHART OF BOTH HANDS ON REVERSE

YES NO

COMPLETE TOOTH CHART ON REVERSE

YES NO

LIST ANATOMICAL CHARACTERISTICS AND OTHER DATA IF FINGERPRINTS CANNOT BE TAKEN.

This skelton was found approximately
 100 yards from the beach directly in

LIST OF PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME.

No personal effects found.

Front of Lever Brothers Managers
 Home, on Gavutu.
 An American Helmet & shoes were found
 with the body.
 No identification found.

NAME OF EMERGENCY ADDRESSEE

Unknown

ADDRESS OF EMERGENCY ADDRESSEE

Unknown

NAME, NUMBER AND LOCATION OF CEMETERY.

Army Navy Marine Cemetery Guadalcanal B.S.I.

DATE OF BURIAL

29 Oct. 45
 (Reburial)

HOUR

1430

PLOT NO.

C

ROW NO.

174

GRAVE NO.

7

GRAVE MARKER

Wooden Cross

TYPE OF RELIGIOUS CEREMONY

Catholic, Protestant & Hebrew. Military

PERSON REPORTING BURIAL

T. S. William A. Treacy

IDENTIFICATION TAGS BURIED WITH BODY YES NO

ATTACHED TO MARKER

YES NO

IF IDENTIFICATION TAGS NOT PRESENT, WHAT OTHER IDENTIFICATION DATA BURIED WITH BODY AND IN WHAT KIND OF CONTAINERS.

BODIES BURIED EITHER SIDE (See Paragraph 2 on Reverse)

BODY ON LEFT, NAME (Last, First, Middle Initial)

Canterbury, Ralph P

RANK

PhM 2c

SERIAL NO.

8507852

ORGANIZATION

Navy 145

GRAVE NO.

6

BODY ON RIGHT, NAME (Last, First, Middle Initial)

Drain H. F.

RANK

Unknown

SERIAL NO.

208 491

ORGANIZATION

USMC

GRAVE NO.

8

PERSON CONDUCTING BURIAL RITES

Chaplain Julius Kravetz
 Chaplain Franklyn Board
 Chaplain John P Morrissey

VERIFIED BY G. R. S. OFFICER

Raymond J. Manuella
 1st Lt. OMC for 1st. Lt., OMC

IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCES ON REVERSE

INSTRUCTIONS FOR FILLING OUT BURIAL REPORT: PREPARE IN QUADRUPPLICATE FOR U. S. DEAD, ONE ADDITIONAL COPY FOR ALLIED AND ENEMY DEAD. SIGN ALL COPIES. SUBMIT REPORT TO NEAREST MEMBER OF GRAVES REGISTRATION SERVICE. GRAVES REGISTRATION SERVICE WILL FORWARD THE ORIGINAL AND TWO COPIES THROUGH AT LEAST ONE HIGHER ADMINISTRATIVE HEADQUARTERS (TO BE CHECKED AGAINST CASUALTY REPORTS AND ALLIED PAPERS AND ALL COPIES VERIFIED BY THE GRAVES REGISTRATION OFFICER OF THAT HEADQUARTERS) TO BASE SECTION GRAVES REGISTRATION SERVICE OFFICER.

OVER FOR BURIAL INSTRUCTIONS

INSTRUCTIONS FOR []IAL


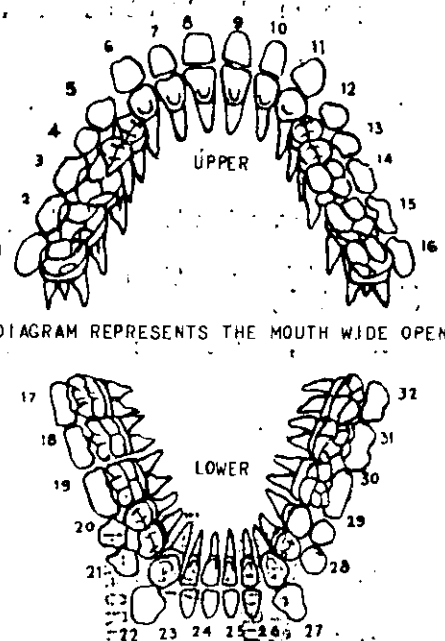




1. PREPARATION OF BODY, BURIAL, AND MARKINGS OF GRAVE: Have body examined by a member of the medical detachment and attach EMT 52b. Remove all personal property. Dress body when practical and bury in a suitable shroud. Dig grave to depth of five feet; in hasty burials, to sufficient depth to prevent 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 identifying 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 available, 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:

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS OR TATTOOS
WEAPON AND SERIAL NUMBER		LAUNDRY MARKS		WHERE BODY WAS BURIED

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 grave facing head to determine bodies buried to the left and right.

3. PERSONAL EFFECTS: List only personal effects taken from body on the Burial Report Form. Place these with information as to identity of owner, organization emergency addressee in personal effects bag, or wrap in handkerchief, towel, or other available material and 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 collection point.

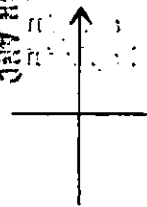
The condition of each and every tooth will be indicated on the tooth chart, in accordance with diagram.

FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER</p> <p>LOWER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
CAVITIES	 <p>CAVITY DECAYED</p>	
MISSING TEETH	 <p>TOOTH MISSING</p>	
CROWNED TEETH	 <p>PORCELAIN CROWN GOLD CROWN</p>	
BRIDGE WORK	 <p>GOLD BRIDGE</p>	

SKETCH AND MAP REFERENCE

02 PM '45

FOR AND
BRANCH



Left Little Finger	When unidentified, take thumb and fingerprints of both hands - if this is not possible fill in tooth chart.
Left Ring Finger	
Left Middle Finger	
Left Index Finger	
Left Thumb	
Right Thumb	
Right Index Finger	
Right Middle Finger	
Right Ring Finger	
Right Little Finger	