Graves Registration Form No. 1 (Revised May 11, 1943) UNKNOWN X-4

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

	,					·····	
Last Name	First	Initial	Se	rial number	r	Rank	Organization
Place of death		Date o	of death			Cause of death	
2 1000 01 10000		USN & USMC	CEME TERY	#1.	TULAGI.	B.S.I.	r Henig
Time and date of bu	ırial	Name of c				coordinates of loca	tion
49	2	A			Woode	n Cross	
Grave number Row number		Plo	t number ,		Type of marker	- Regulation V-sh	aped or other
	of any atte		fidentification	एक ए जेका सि			
	·4 - identificatio						
Body buried on RIGI	TT Laymon	, NoHe	27	77310	8 FLDC	y USMC	50
but but led on like		Name		ıl number	Rank	Organization	Grave numbe
Body buried on LEF ?	r Quinn,	R.W.				NEU	48
Body Bullou ou LLL		Name	Seri	al number	Rank	Organization	Grave numbe
Name and address of EM	ERGENCY ADDR	RESSEE	······································	Nam	e and address o	of LEGAL NEXT	
List only personal effe	ects FOUNI	OF BOD	Y and dis	spositio	n of same	:	Fill 1
d 1		No record o		-		arict e d	Fill lang
		no record of	r erreces	م فينسير			" <i>RA</i> N

THUNB	Signature of officer or other person reporting the cortain in the contract of the cortain in the	awa a sa
	TYZDHYBKŞ' OE THE LOCATION, ORIENTED WITH PERMANENT IF THIS IS AN ISOLATED BURIAL, ATTACH A SKETCH	; •
	Zote below any identifying clues found, such as letters, photographs,	
*3	In space below, locate and describe any scars, birthmarks, moles, deformities, etc.:	જ
w	You are able Height: Weight: Weight: Color of eyes: Color of hair: A pparent nationality: Color of eyes: Wear glasses? Is tooth chart attached? Race: Is tooth chart attached? If possible, have medical personnel take a tooth chart.	ಣ
*	THOSE YOU CAN, and fill in as many of the following as TAKE FIXGERPRIXTS OF BOTH HANDS (W. D. Cir. No. 79; 3/19/43). If DECEASED UNIDENTIFIED	7

Rev. 1 November 1942				DATE REPORT FILLEN OUT
WD OME Form 10m2 ! Rev. 1 November 1942 (GRS 1, dated 11 May 1942 may be used until exhausted)	REPORT OF			
		d AR 30-1815)		
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(Reburiel)	USN & USMC CEN			0 0			
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Unknown			15	OHN R. NOLAN			
				st Lt., QMC			
INSTRUCTIONS FOR FILLING OL	T BURIAL REPORT: MAKE O	UT QMC FORM 1 1 GRS	IN QUADRUPLICAT	TE FOR LL S. DEAD, ONE ADDI-			
TIONAL COPY FOR ALLIED AND ENEMY	DEAD. SIGN ALL COPIES.	SUBMIT REPORT TO	NEAREST MEMBER	OF GRAVES REGISTRATION SER -			
VICE. GRAVES REGISTRATION SERVI	CE WILL FORWARD THE ORIG	INAL AND TWO COPIE	S THROUGH AT LE	AST ONE HIGHER ADMINISTRATIVE			
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THAT HEADQUARTER	S / TO DAGE SECTION GRAVE	LO REGIONALION OF					
OVER FOR BURIAL INSTRUCTIONS							

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Alb datula taeras at	INSTRUCTIONS FOR BUR
Tarao ayyonglali	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 IT 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 MARE 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:
TE OF DEATH	HEIGHT WEIGHT COLOR OF EYES COLOR OF HAIR BIRTHMARKS, SCARS OR TATTOOS
1	WEAPON AND SERIAL NUMBER LAUNDRY MARKS WHERE BODY WAS BURIED
MS WSED TO IDENTIFY	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.
	PERSONAL EFFECTS: LIST ONLY PERSONAL EFFECTS TAKEN FROM BODY ON THE BURIAL RE- PORT 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 COLLECTING POINT.
	THE CONDITION OF EACH AND EVERY TOOTH WILL BE INDICATED ON THE TOOTH CHART, INACCORDANCE WITH DIAGRAM. FILLINGS SILVER FILLING DIAGRAM REPRESENTS THE MOUTH WIDE OPEN
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A THE SECRET REPORTED AND AND AND AND AND AND AND AND AND AN	INSTRUCTIONS FOR FYELING OUT SUBJECT OUT CONTINUED IN STADSFELD OF SOME IN STADSFELD OF TOWN TOWN TOWN THE ARCHITECT OF THE SECRET OF THE RESIDENCE OF THE RESI
	가게 잘 보면했다고 바로, 관리막으시다고 하는 사람들은 장무를 가면 하는 바로 바로 하는 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은

WD. OMC FORM 1042	DEDART	AE INTERMENT		DATE REPORT	- ILLED OUT		
Rey. 1 February 1945 Supersedes form dated	REPORT OF INTERMENT			12 Octobe	er 194 5		
3 Jan. 1945. Existing stocks may be used until exhausted.	(TM 10-630	and AR 30-181	5)				
For Imprint of Identification Tag	NAME (Last, First,	Middle Initial					
For Imprint of Identification Ing	•	_			·		
	UNIDENTIFIED BODY X-222						
	RANK	SERIAL NUMBE	R	COUNTR	Y		
- \	Unknown	Unknown			iknown		
\	ORGANIZATION		BRANCH				
\ /	unknown		unkno	wn			
	RACE	RELIGION		DATE C	F DEATH		
	unknown	unkno	Win	unkr	nown		
PLACE OF DEATH	CAUSE OF DEA						
Tulagi, B.S.I.		unknow	n				
IDENTIFICATION TAGS FOUND ON BODY	·		FICATION TAGS, OTH		TO IDENTIFY		
<u> </u>	NONE	DOUT (Identi)	rication Cards, Le	ettera, etc.)			
DISPOSITION OF SUBSTITUTE TAGS, IF	MADE						
COMPLETE FINGERPRINT CHART OF BOTH	HANDS ON DEVEDOR	COMPLETE TOO	TH CHART ON REVERS	s F			
		COMPLETE 100		□ NO			
LIST ANATOMICAL CHARACTERISTICS AN	D OTHER DATA IS EIN	CEDPRINTS CANNOT	E TAKEN.	٠ ۴۷			
EIST ANATOMICAL CHARACTERISTICS AN	U VINER DATA IF FIR	IGERFRINIS CANNOT	DE PARCH.				
					4		
LIST OF PERSONAL EFFECTS FOUND ON	BODY AND DISPOSITIO	N OF SAME					
		DIE OF SAME					
No personal effects	Tourid						
•							
NAME OF EMERGENCY ADDRESSEE		ADDRESS OF E	MERGENCY ADDRESSE	E			
unknown		unknow					
NAME, NUMBER AND LOCATION OF CEMET	ERY.		111				
Army Navy Marine Ceme	tery Guadalcar	nal BSI					
	OT NO. ROW N		GRAVE MAR				
Reburial 0900	E 165	8	Woode	n Cross			
TYPE OF RELIGIOUS CEREMONY		PERSON REPOR					
Previous service unknown	l	/s/ T- 5 W	Illiam H. Tus	sey			
IDENTIFICATION TAGS BURIED WITH BO		NO ATTACHED TO		☐ YE			
IF IDENTIFICATION TAGS NOT PRESENT	T, WHAT OTHER IDENT	IFICATION DATA BUR	RIED WITH BODY AND	IN WHAT KIND	OF CONTAINERS.		
<u></u>							
	DIES BURIED EITHER				T 40 412		
BODY ON LEFT, NAME (Last, First, A	(iddle Initial)	RANK		ORGANIZATION	GRAVE NO.		
Weber, William A.		Sgt	20501308	US Army			
BODY ON RIGHT, NAME (Last, First, Wollam, Talbert	Middle Initial)	RANK		ORGANIZATION USAAC	GRAVE NO.		
		lst Lt	0432571		<u> </u>		
PERSON CONDUCTING BURIAL RITES			G. R. S. OFFICER worth Marshal	1			
lem		, , ,					
unknown			Lt., QMC fo IN R. NOLAN,]		C		
IF BURIAL OTHER THAN I		and the second s					
INSTRUCTIONS FOR FILLING OU FOR ALLIED AND ENEMY DEAD. SIGN	T BURIAL REPORT: F	REPARE IN QUADRUP	LICATE FOR U. S. (T MEMBER OF GRAVES	DEAD, ONE ADDIT S REGISTRATION	SERVICE.		
GRAVES REGISTRATION SERVICE WILL	FORWARD THE ORIGINA	AL AND TWO COPIES	THROUGH AT LEAST (JNE HIGHER ADMI	NISIKALIVE		
HEADQUARTERS (TO BE CHECKED AGAIN REGISTRATION OFFICER OF THAT HEAD	ST CASUALTY REPORTS	S AND ALLIED PAPER	S AND ALL COPIES \	ERIFIED BY THE	GRAVES		
1	DUARIERS) IU BASE 3	DECLION GRAVES REG	JULIANIO TOLIANIO	UI I IULII			
		r hunied se Ilr	nknown Y-A Pla	ot B. Row 1	. Grave 9.		
OVER FOR BURIAL INSTRUCTION	s Previously	y buried as Ur Cemetery #1,	nknown X-4 Flo	ot B, Row 1	, Grave 9,		

3	E.		INSTRUCTIONS FOR BURLAL
	Left ittle Finger		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. Dag 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
	Left Ring Finger	When unidenti	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:
	Left Middle Finger	fied, take thumb	HEIGHT WEIGHT COLOR OF BYES COLOR OF HAIR BIRTHMARKS, SCARS OR TATTOOS WEAPON AND SERIAL NUMBER LAUNDRY MARKS WHERE BODY WAS BURIED
	Left Index Finger	and finge	a 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 Bur-
	Left	rprints of bot	ial 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 tobe 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
	Right Thumb	-	CAVITIES SILVER FILLING GOLD FILLING CAVITY DECAYED SILVER FILLING 10 11 12 13 UPPER 14
	Right Index Finger	this is not poss	MISSING TEETH TOOTH MISSING DIAGRAM REPRESENTS THE MOUTH WIDE OPEN
	Right Middle Finger	ible	CROWNED TEETH PORCELAIN CROWN GOLD CROWN 18 LOWER 20 20 20 21 20 20 20 20 20 20
	Right Ring Finger	5	SKETCH AND MAP REFERENCE A TRUE COPY:
	Hight Little Finger	,	C. M. ISELEY, Lt.Col., G.8.C.

(850			
1, Grave 9.	Unknown X-4 Plot B, Row	Previcualy buried as USN & USMC Cemetery	OVER FOR BURIAL INSTRUCTIONS
ONE HIGHER NOWINISTRATIVE	MC FORM 11 GRS IN QUADRUPLICATE F BMIT REPORT TO NERREST MEMBER OF AND TWO COPIES THROUGH AT LEAST IED PAPERS AND ALL COPIES VERIFIE EGISTRATION SERVICE OFFICER.	17 DEAD. SIGN ALL COPIES. SU VICE WILL FORWARD THE ORIGINAL VINST CASUALTY REPORTS AND ALL	TIONAL COPY FOR ALLIED AND ENEN
		and the land	
	lat Lt. CMC.	ows her	*********
	MAJON A WHOL		Опкломп
2.5	VERIFIED BY G. R. S. OFFICER		PERSON CONDUCTING BURIAL RITES
ORGANIZATION USAAC	13t to OLIZZSTI	t, Middle Initial)	BODY ON RIGHT, NAME (Last, Firs
NOI TAZI NADRO VITTA EU	SOEUR SERIAL NO.	(faitint afbbim .	BODY ON LEFT, WAME (Last, First
NOT 2727 N 1000		BODIES BURIED EITHER SIDE (Se	
		A CONTRACTOR OF THE CONTRACTOR	
AT KIND OF CONTAINERS.	N DATA BURIED WITH BODY AND IN WH	SENT, WHAT OTHER IDENTIFICATIO	IF IDENTIFICATION TAGS NOT PRES
CON DE SE	ATTACHED TO MARKER	BODA JES X NO	IDENTIFICATION TAGS BURIED WITH
. Lucary	T-5 M ellion X	RUOME	Erevious Service Un
-J.	PERSON REPORTING BURIAL		ILLE OF RELIGIOUS CEREMONY
	Guadalcanal BSI	Wayy Marine Cenatery	
	g Mooden Cross		0060 St de Lt
	BRAE NO. GRAVE MARKER 113H SKETCH AND MAP REFERENCES ON		BUOH 3TAO
BEAEBSE	ILEH SKETCH AND MAP REFERENCES ON	M 18 CSTABLISHED CENETERY FUR	ANT GANTO IAIGIRE 31
	Ω nknewn		Опкломп
	VODBERS OF EMERGENCY ADDRESSEE		NAME OF EMERGENCY ADDRESSEE
	3 3 3 3 3 3 3 3 3 3 3 3		LIST OF PERSONAL EFFECTS FOUND
	W7004 76 LONGYO O	MINIMARKE IN WIND VILLE ON	FIST BRANCHE CHANACIENISTICS
ON 5	S CVHHOL BE LAKEN	ON T	LIST ANATOMICAL CHARACTERISTICS
	COMPLETE TOOTH CHART ON REVERSE	1	COMPLETE FINGERPRINT CHART OF 8
*			
	;	IF MADE	DISPOSITION OF SUBSTITUTE TAGS,
.co.e fs.	30DY (identification Cards, Letter	MONE NONE	s
MEANS USED TO IDENTIFY	E NO IDENTIFICATION TAGS, OTHER P	, and	IDENTIFICATION TAGS FOUND ON BO
	имоинип		Tulagi, ESI
	HTA30 FO BEVAL		PLACE OF DEATH
Unknown	Спкломп	оркиоти	
DATE OF DEATH	SETICION LETTERON		
· co	[luknon	umounun S	<i>1</i>
T. 0.4 (\ 7.74.777.2.)	BRANCH	NOTATION ORGANIZATION	01
uvoranu .	Пркломп	RANK UNKNOWN	1
Солитку	ERIAL NUMBER	ANVO	
	<u> </u>	1	
		Unknown X-222	
			THERINT OF IDENTIFICATION TO
5761 aeqoto <u>o</u> 5 7	(2181-08 (faitint a	# A bas @63-01 MT) AG NAME (Last, First, Middle	(GRS 1, dated 11 May' 194,8
DATE REPORT FILLED OUT LS October 1945	RMENT 30-1815) 5 Initial)	AG NAME (Last, First, Middle	MD CAIC FORM 1042 FOR IMPRINT OF IDENTIFICATION TO FOR IMPRINT OF IDENTIFICATION TO FOR IMPRINT OF IDENTIFICATION TO

· · · · · · · · · · · · · · · · · · ·	
. 1	INSTRUCTIONS FOR E 'AL
-	1. PREPARATION OF BODY, BURIAL AND MARKINGS OF GRAVE: HAVE BODY EXAMINED BY A MEN BER OF THE MEDICAL DETACHMENT AND ATTACH EMT 520. 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 ENTIFYING DATA IN DUPLICATE ON FORM; PLACE IN BURIAL BOTTLE, CANTEEN, SPENT SHELL OR OTHE
2	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. BODY IS UNIDENTIFIED, TAKE FINGERPRINTS OF BOTH HANDS OR THOSE REMAINING FINGERS. IF NOW 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.
A STANCE	PERSONAL EFFECTS: LIST ONLY PERSONAL EFFECTS TAKEN FROM BODY ON THE BURIAL RE- POR 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 MAT ERIAL AND TURN OVER TO GRAVE REGISTRATION SERVICE PERSONNEL WITH REPORT OF DEATH. GOVERN MENT PROPERTY IS NOT TO BE INCLUDED IN PERSONAL EFFECTS BUT IS TO BE TURNED INTO SALVAGE COLLECTING POINT.
T ORDS	THE CONDITION OF EACH AND EVERY TOOTH WILL BE INDICATED ON THE TOOTH CHART, INACCORDANCE WITH BIAGRAM.
THUMB	SILVER FILLING GOLD FILLING TO THE MOUTH WIDE OPE
-1.20	CAVITIES CAVITY DECAYED 12 13 UPPER 14
H-CMB.	MISSING TEETH TOOTH MISSING
4	CROWNED TEETH PORCELAIN CROWN 18 18 18 10 15 15 15 15 15 15 15 15 15 15 15 15 15
	19 LOWER 30 29
ω	GOLD BRIDGE 21 0000 22 23 24 25 16 27
	SKETCH AND MAP REFERENCE
N	N
<u> </u>	

NARRATIVE

Robert M. Bonds

3827038

USN

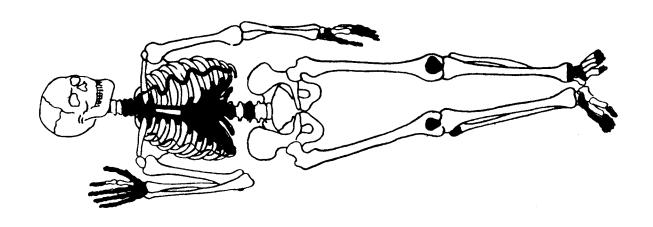
Final Type

Unknown X-222 Guadalcanal P-F, R-165, Gr-8 Box #127

Unknown X-222 was completely processed and during the processing was compared with Robert M. Bonds. The comparison was made due to the small variation of length of right arm bones. It is thought the difference is accounted for due to the abnormality in structure of the proximal end of the left radius. No changes were made during the comparison and the remains have been placed in their respective caskets.

NAME	SIDE	NO	BONE LENGTI IN CM	REMARKS (IF MISSING OR FRACTURED, LIS	
SKULL		1	52.2		
	CERVICAL	4		#2, 5 and 6 missing	
VERTEBRAE	THORACIC	9		#3, 7, and 8 missing	
	LUMBAR	3		#1 and 3 missing	
SACRUM		1		Complete	
	RIGHT	1	BI-ILIAC DIA	Eroded	· · · · · · · · · · · · · · · · · · ·
INNOMINATES	LEFT	1	27.3	13	
RIBS		22		2 missing	
STERNUM		1		Manubrium missing	
01.4410150	RIGHT	1	14.9	Eroded	
CLAV ICLES	LEFT	1	Approx 14.	Distal end missing	
00400145	RIGHT	1		Body eroded	
SCAPULAE	LEFT	1		Complete	
HUMERI	RIGHT	1	34.5	Eroded	
nuncki	LEFT	1	33.4	п	
RADII	RIGHT	1	25.5	#	
	LEFT	1	24.6	27	
ULNAE	RIGHT	1	27.5	n	
	LEFT	1	26.0	" distal end missin	
HANDS	RIGHT	$\frac{1}{1}$		No 2 metacarpal present	
· · · · · · · · · · · · · · · · · · ·	LEFT	1	100	Nos 2 and 3 metacerpal	and navicular pres
FEMORA	RIGHT	+	48.9	Eroded medial condyle	
	LEFT	0	48.7	Rroded Vi anima	
PATELLAE	RIGHT	0		Missing	
	RIGHT	1	38,0	Extensive erodion dista	l end
TIBIAE	LEFT	1	Approx 38.		
	RIGHT	1	" 38.		
FIBULAE	LEFT	1	38.5	77 11 15	
FEET	RIGHT	1		Calcaneus #3 cuneiform metacarpal present	Nos 1,2,4 and 5
r Lici	LEFT	1		Calcaneus, cuboid #3 cu	-
HUMERO-CLAVICULA	R RATIO 43.	5		PROX IMATE	ls present
ESTIMATED HEIGHT	176.3-69.3	-519 <u>1</u>	AGE	23 - 25 YEARS	
ESTIMATED WEIGHT	160 - 16	5	L	-HIP BR RATIO 56.2 Par	ul L Gravenor
			2 Guadales		b Supervisor





20

MASS BURIAL CERTIFICATE (IF APPLICABLE)
(Wherein segregation in whole or parts is impossible)

1 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.

Faul L. Gravenor

SIGNATURE OF MEDICAL OFFICER Lab Supervisor

21. REMARKS AND ADDITIONAL INFORMATION

Picture a well-muscled young man of average height in his middle twenties, with reddish brown hair. The skull is oval in shape and average in size and has moderate backhead projection and rather prominent parietal bosses. The forehead is fairly upright. The face is average in proportion. The mouth parts protrude slightly and there is noticeable overbite. The palate is fairly high and narrow. The jaw is rugged and quite wide across the angles. The chin is prominent and presents a wide, well-rounded eminence.

Teeth charted. Fluoroscopic examination unnecessary.

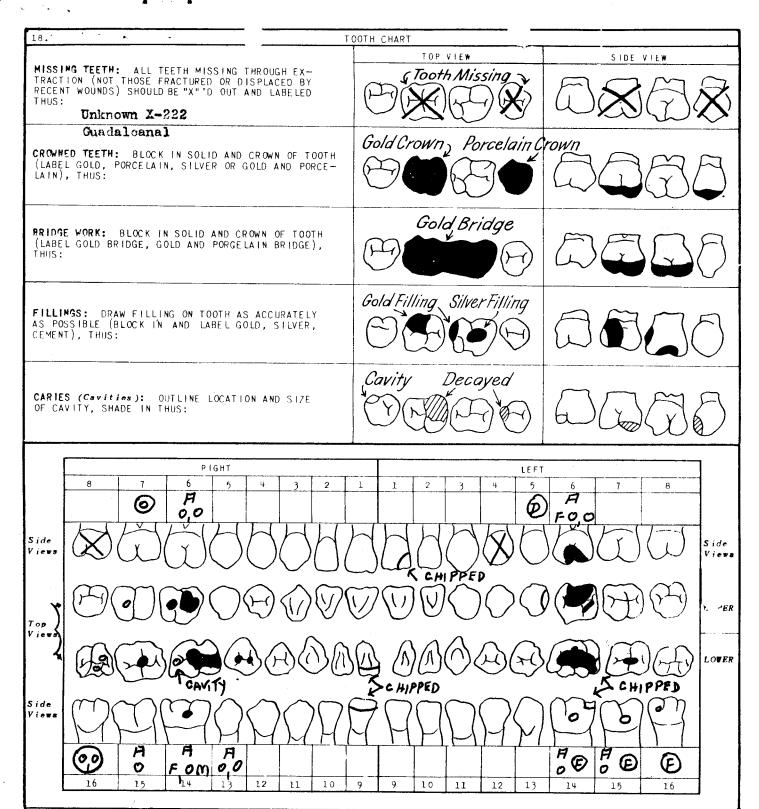
I CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS OF DECEASED AND THAT ALL RESULTING INFORMATION HAS BEEN RECORDED TO THE BEST OF MY KNOWLEDGE

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

SIGNATURE

CENTE AND MAUSOLEUM, APO 957

OwGreenwood



DEMTURES (Plates): 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. L-13 is in facial version.
- 2. R-12 is in lingual version.

	IDENTIFI	ICATION DA	TA		2 B DATE OF RE		
REMAINS OF UNKNOWN Unknown X-222	(Guadale	(Guadalcanal)					
NAME OF CEMETERY		4. PLOT 5	. ROW 6.	GRAVE	7. DA	TE OF	
. S. Army Mausoleu	m No. 1		B 1 165 8	.27	8 Apr 48	8 Apr 48	
ormerly of Guadalo	· · · · · · · · · · · · · · · · · · ·		Age: 23		G Apr 40		
ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	LAL DESCRIPTION 10. COLOR 10. COLOR	OF HAIR	d to	11. RACE		
60 - 165	176.3-69.3-5.9."				Whit	• •	
na (1) ambaesed Di	late on casket reads: late with remains reads: I. D. tag with remain	de: "Unknow	m x-444,	, O4	• "		
GIVE DESCRIPTION OF TAT	TTOOS OR SCARS ON BODY AND/O	OR SUCH INFORMAT	ION OBTAIN	ED FROM	OTHER SOURCES		
		, is					
one							
WAS BODY BURNED?	TO WHAT EXTENT?						
WAS BODY MANGLED?	TO WHAT EXTENT?						
YES NO	HEALED FRACTURES AND BONE MA						
LIST SUSDIVITIES OF SU	OTHERS COMPANY IN OCCUPA	WALL SESSOTS FOUN	The CHOW INC	THE TV			
SERVICE, ETC. (If lau	OTHING, EQUIPMENT AND PERSON ndry marks are indistinct as ion when facilities are not	uch notation sho	ould be mad				
	Ton January Gold Title Gife Hot	Transfer III C.					
fon e							
RUM -							
/ 11							

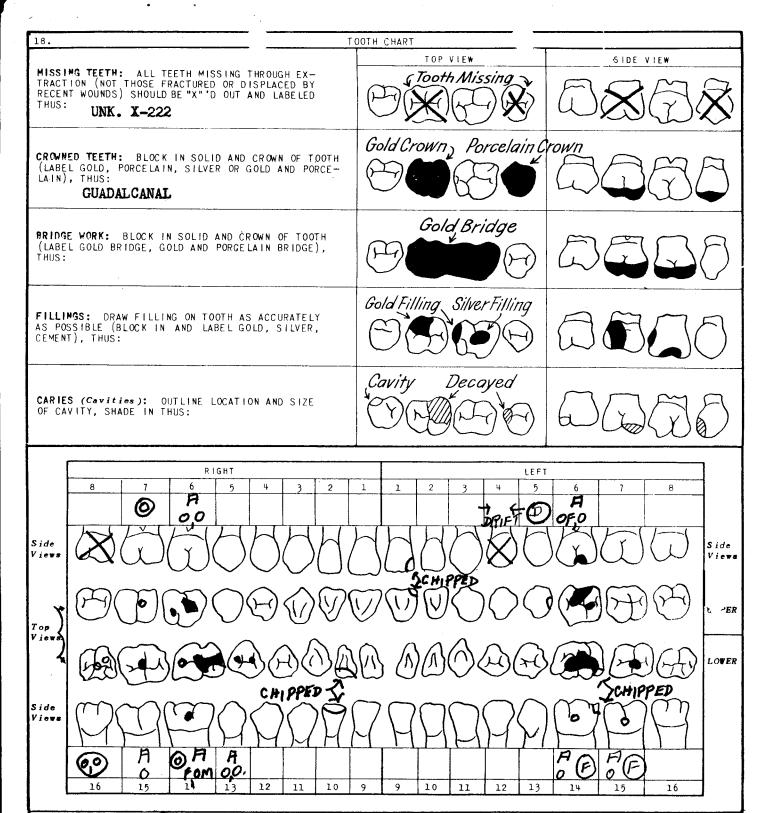
NAME	SIDE	NO	BONE LENGTHS IN CM	(IF MISSING OR FRACTU	REMARKS RED, LIST PARTS AND LOCATION)
SKULL		1	52.5		pracoid process of mandible sing; distal 1/4 of rt. mass
	CERVICAL	4		2.5 and 6 missing	r
VERTEBRAE	THORACIC	9		$\frac{\pi}{4}$ 5.11 and 12 missi	·
	LUMBAR	3		#1 and 3 missing.	
SACRUH		1			
INNOMINATES	RIGHT	1	BI-ILIAC DIAM		
THROTTEN TEO	LEFT	1	27.1	Pubic symphysis er	roded.
RIBS		22		Two (2) missing.	
STERNUM		1		Manubrium missing.	
014410150	RIGHT	1	14.8	Acromial end erode	- d-
CLAV ICLES	LEFT	1		Acromial end erode	
	RIGHT	1		Portion of wing er	
SCAPULAE	LEFT	1			
	RIGHT	7	34.5		
HUMERI	LEFT	1	ວິວ ີ 2		
	RIGHT	1	25 .5		
RADII	LEFT	1	24.6		
ALL MAR	RIGHT	l	27.4		
ULNAE	LEFT	1		Eroded, distal end	-styloid process missing.
HANDS	RIGHT	1		1	rpals, 1 phalanx present
- IAROO	LEFT	1		l metacarpal prese	
FEMORA	RIGHT	1	48.7-49.0	Groded, distal and	proximal onds.
	LEFT	1	48.5-48.9	Eroded, greater tr	ochanter
PATELLAE	RIGHT	0		Missing.	
	LEFT	0		Missing.	
TIBIAE	RIGHT	11	59.2	Eroded-proximal an	
	LEFT	1			medial malleolus missing.
FIBULAE	RIGHT	1	KO =	,	proximal head missing.
	LEFT	1	38. 5	Eroded, proximal a	
FEET	RIGHT	1		2 tarsals.4 metata	rsals.2 phalanges present.
	LEFT	1		3 tarsals, and 5 m	etatarsals present.
HUMERO-CLAVICUL	AR RATIO	·	l 1	IMATE AGE (in years) to 25 years.	
ESTIMATED HEIGH	See Item 2	1.	LEG-HI	P BR RATIO	

GP - AGRS 15 JUN 48 21

ENCLOSURE TO:

Unknown X-222 Guadalcanal

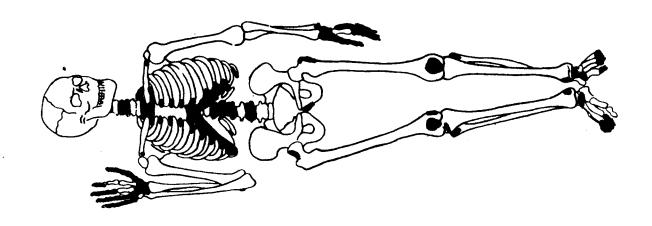
M. Trotter
ANTHROPOLOGIST



DENTURES (Plates): 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. R-12 is in a lingual version.
- 2. L-13 is in a facial version.



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.

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

This is the remains of a man, 23 to 25 years of age, of average height and muscularity.

The skull is ovoid in shape, medium in type, and with fairly prominent parietal and frontal bosses. The browridges are medium. The glabella region is slightly depressed The vault is medium. The forehead is medium with a marked vertical form. The backhead is moderately convex. The external occipital protuberance is moderate. The nasal bones are medium and indicate the possibility of a fairly prominent nose., with possible left asymmetry.

The lower borders of the masal aperture are sharp. The palate is of average height with an ovoid shape.

The lower jaw is of medium size and strength. The chin is rounded with a slightly protruding form.

Inquiry has been made concerning healed fracture of nose in this case! Other than a possible slight left asymmetry of the nasal bones, there is no evidence of a healed fracture of the nose. (However, it should be noted that the distal 1/4 of the right nasal bone is missing.)

Height estimate: R-178-70.08-5'10"

K-175-68.90-5'8 7/8"

P-171-67.32-5'7 3/8"

Fluorescopic 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

O. W. GREENWOOD, CAPT., QMC.

SIGNATURE

Owyreenwoo

1044b

	IDENTIFIC	ATION DAT	A				
. REMAINS OF UNKNOWN					2. DATE 0		.40
X-222				·		nuary 19	949
. NAME OF CEMETERY		4. PLOT 5.	R OW	6. GRAVE	7. DISINTERM	DATE OF REINT	FRMFNT
U.S. Army Mausoleum #2	2		L	79	1	49 21	
Formerly of Guadalcans			_				
		L DESCRIPTION	Age:	23 to 3	25 years	•	
. ESTIMATED WEIGHT 9.	ESTIMATED HEIGHT	10. COLOR OF	HAIR		11. RACE		
140 to 165 lbs. 5	17 3/8" - 5110"	Possibly	y ligh	t brown	n. Whi	te.	
2.GIVE DESCRIPTION OF ANY OFF	ICIAL IDENTIFICATION FOUN	ID WITH REMAINS		•			
Two (2) embossed tags	on box reads: 1). 2).	X-222, Guad X-222.	dalcar	al.			
•	REASON OF LAC	K OF SUF	FICIE	NT 10	A DENTIF	8	
4. WAS BODY BURNED? TO	WHAT EXTENT?		- <u>i</u>				
L VEC L NO							
YES X NO							
	WHAT EXTENT?						
5. WAS BODY MANGLED? YES NO 6. DESCRIBE EVIDENCE OF HEALE 1. Palatine torus. 2. The anterior borde	D FRACTURES AND BONE MALF	surface of	the le	∍ft rad	ius (for	the rac	dial
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NARRATIVE

UNKNOWN X-4 - USN & USMC CEMETERY #1, TULAGI, BRITISH SOLOMON ISLANDS

Plot map indicates that the remains of Unknown X-4 were buried in Plot A, Row 2, Grave 49 and were reinterred in Plot B, Row 1, Grave 9, USN & USMC Cemetery #1, Tulagio

At the time remains were concentrated into the Guadalcanal Cemetery, Unknown X-4, Tulagi, was redesignated as Unknown X-222 and buried in Plot E, Row 165, Grave 8.

These remains were interred in Section F, Grave 194, NMCP by Administrative Order, Disinterment Directive No. 8730-00000.

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