

COMGENUSARPAC FT SHAFTER TH

PRIORITY

293 Wk; Solomon Islands (Guadalcanal) R 113

CHARGE GRAVES WW II

FROM QMGM T REURLET FILE ROGER ROGER ROGER TWO NINE THREE RESOLUTION
OF UNIDENTIFIED REMAINS DATED ONE FIVE DECEMBER FOUR EIGHT

UNKNOWN S XRAY FOUR SIX XRAY FOUR SEVEN XRAY FOUR EIGHT XRAY FIVE SEVEN
XRAY SIX TWO XRAY SIX THREE XRAY SIX SEVEN XRAY SEVEN ZERO XRAY EIGHT FOUR
XRAY EIGHT FIVE XRAY NINE TWO X-113 XRAY ONE ONE THREE XRAY ONE ONE FOUR XRAY ONE
ONE FOUR ABLE CMA BAKER AND CHARLIE XRAY ONE ONE FIVE XRAY ONE SEVEN SIX
XRAY ONE SEVEN EIGHT XRAY ONE SEVEN NINE XRAY TWO TWO ONE XRAY TWO TWO SEVEN
XRAY TWO TWO EIGHT XRAY TWO THREE ZERO XRAY TWO THREE XRAY TWO THREE THREE
XRAY TWO THREE NINE XRAY TWO FOUR ZERO XRAY TWO FOUR EIGHT XRAY TWO FIVE SIX
XRAY TWO FIVE SEVEN XRAY TWO EIGHT ZERO ABLE AND BAKER XRAY TWO NINE TWO ABLE
AND BAKER XRAY TWO NINE FOUR AND XRAY THREE ZERO THREE CMA ALL OF GUADALCANAL
PD THIS OFFICE CONCURS IN THE CLASSIFICATION OF ALL UNKNOWN S AS UNIDENTIFIABLE

UNCLASSIFIED

QMGM T 293
GRS PACIFIC

4 JAN 49

J. G. HOLDEN, JR, COL, GAC
MEMORIAL DIVISION

AIR MAIL

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
(PACIFIC ZONE)
APO 958

HRREC 298

DEC 15 1948

SUBJECT: Resolution of Unidentified Remains

TO: The Quartermaster General
Department of the Army
Washington 25, D. C.

1. Transmitted herewith QMC Form 1044 for thirty-seven (37) unidentified remains, stamped and signed in accordance with letter, DA QQNG QNGMU 298 GRS (Pacific Zone), Subj: Resolution of Cases of Unidentified Deceased dated 22 September 1948.

2. The majority of these unknowns have no dental anatomy or clues that might lead to identification, other than location and in some instances, date of death. All such clues have been investigated, with negative results.

3. The remainder that have dental anatomy could possibly compare with many persons missing, thereby precluding any individual identification.

4. Acknowledgment of receipt is requested.

FOR THE COMMANDING OFFICER:

57 Incls: (All Guadalcanal)

1. QMC Form 1044-1044b
Bone List-Chemical
Laboratory Findings-X-46
2. QMC Form 1044-1044a-1044b-
Bone List-Unknown X-47
3. QMC Form 1044-1044a-1044b-
Bone List-Unknown X-48
4. QMC Form 1044-1044a-1044b
Bone List-Fluoroscopical
Findings for Identification
Unknown X-57

HORACE MANN
Captain, QMC
Chief, RR Div

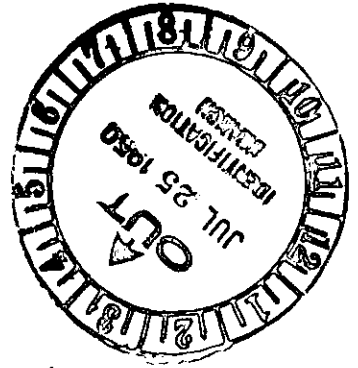
AIR MAIL

RRREC 293

Subject: Resolution of Unidentified Remains

37 Incls: (All Guadalcanal)

5. QMC Form 1044-1044b-Bone List-Unknown X-62
6. MC Form 1044-1044a-1044b-Bone List-Unknown X-63
7. QMC Form 1044-1044b-Bone List-Major Discrepancy X-67
8. QMC Form 1044-1044b-Bone List-X-70
9. QMC Form 1044-1044b-Bone List-X-84
10. QMC Form 1044-1044b-Bone List-Unknown X-85
11. QMC Form 1044-1044a-1044b-Bone List-Unknown X-92
12. QMC Form 1044-1044b-Bone List-Unknown X-115
13. QMC Form 1044-1044b-Bone List-Narrative-Unidentified X-114
14. QMC Form 1044-1044b-Bone List-Narrative X-114A
15. QMC Form 1044-1044a-1044b-Bone List-Narrative-X-114B
16. QMC Form 1044-1044b-Bone List-Narrative-Unidentified X-114C
17. QMC Form 1044-1044a-1044b-Bone List-Unidentified X-115
18. QMC Form 1044-1044b-Bone List-Unknown X-176
19. QMC Form 1044-1044b-Bone List-Unknown X-176
20. QMC Form 1044-1044b-Bone List-Unknown X-179
21. QMC Form 1044-1044b-Bone List-Narrative-Unknown X-221
22. QMC Form 1044-1044b-Bone List-Narrative X-227
23. QMC Form 1044-1044b-Bone List-Narrative-X-228
24. QMC Form 1044-1044b-Bone List-X-230
25. QMC Form 1044-1044b-Bone List-Narrative-X-232
26. QMC Form 1044-1044b-Bone List-X-233
27. QMC Form 1044-1044b-Bone List-X-239
28. QMC Form 1044-1044b-Bone List-Narrative-Unknown X-240
29. QMC Form 1044-1044a-1044b-Bone List-Narrative-Unknown X-248
30. QMC Form 1044-1044b-Bone List-X-256
31. QMC Form 1044-1044b-Bone List-Unknown X-257
32. QMC Form 1044-1044b-Bone List-Narrative X-280 "A"
33. QMC Form 1044-1044b-Bone List-Narrative-X-280 "B"
34. QMC Form 1044-1044b-Bone List-Narrative X-292-"A"
35. QMC Form 1044-1044b-Bone List-Narrative X-292 "B"
36. QMC Form 1044-1044b-Bone List-Unknown X-294
37. QMC Form 1044-1044a-1044b-Bone List-Narrative-Unknown X-303



OF THE PAPER

Interred 7 February 1948
B 756

DISINTERMENT DIRECTIVE

Cemetery Superintendent

SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

ALVAN C. BAKER

DIRECTIVE NUMBER
8730 00000

DATE
26 09 47
DAY MONTH YEAR

NAME
UNKNOWN X-000113

SERIAL NUMBER
0

RANK
0

ARM
Q

DATE OF DEATH
DAY MONTH YEAR

CEMETERY
GUADALCANAL

DISPOSITION OF REMAINS
0492 64
CODE DIST. PT.

PLOT ROW GRAVE
C100

COUNTRY
3 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-113

SERIAL NUMBER
UNK

RANK
UNK

DATE OF DEATH
UNK

DATE DISTINTERRED
6 Dec. '47

IDENTIFICATION TAG ON
 REMAINS
 MARKER

ORGANIZATION
UNK

RELIGION
UNK

IDENTIFICATION VERIFIED BY
N. R. Joynes
Emb.
NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL
CASKET

CONDITION OF REMAINS
SKELETON

OTHER MEANS OF IDENTIFICATION
ONE GRAVE MARKER -- ONE MORTUARY TAG

NAT FILE
RECORDS ANNOTATED
DATE 6 1949
NAME WIMBERLY
R & BR

MINOR DISCREPANCIES
NONE

REMAINS PREPARED AND PLACED IN CASKET
DATE 2 July 1948 BY L.A. JONES, EMBALMER

CASKET SEALED BY
G. D. MEEK

EMBALMER (Signature)
L. A. JONES

CASKET BOXED AND MARKED
DATE 2 July 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. MCNANAMY
SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

LEW

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	DATE 19 JAN 1943	SIGNATURE OF RECEIVER <i>James B. Harris</i> JAMES B HARRIS CAPTAIN Q M O	DATE JAN 19 1943

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 ADMINISTRATIVE ORDER)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>L. H. W. V. I.</i> L. H. W. V. I.	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>V. V. V.</i> V. V. V.	DATE	SIGNATURE OF RECEIVER	DATE

7. SHIPPED

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

JAN 19 1943

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN Unknown X-113 Guadalcanal				2. DATE OF REPORT 23 March 1948	
3. NAME OF CEMETERY Guadalcanal U. S. Army Mausoleum #1		4. PLOT C	5. ROW 100 C	6. GRAVE 3 13	7. DATE OF DISINTERMENT 23 Mar '48
				REINTERMENT 23 Mar '48	

PHYSICAL DESCRIPTION Approx age 22 to 24 years.					
8. ESTIMATED WEIGHT 125 to 135 lbs.	9. ESTIMATED HEIGHT 164-64.57-5'4 1/2"	10. COLOR OF HAIR U. T. D.		11. RACE Probably White	

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS
One (1) embossed plate reading: Unidentified X-113.
One (1) embossed plate reading: Unknown X-113, Plot-C, Row-100, Gr-3.

13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES
None
BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA
ORRIN C. DISNEY
1st. Lt., FA 0-1167395 *Cyril B. Disney 14 Dec 1948*

14. WAS BODY BURNED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT?
---	-----------------

15. WAS BODY MANGLED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT?
--	-----------------

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

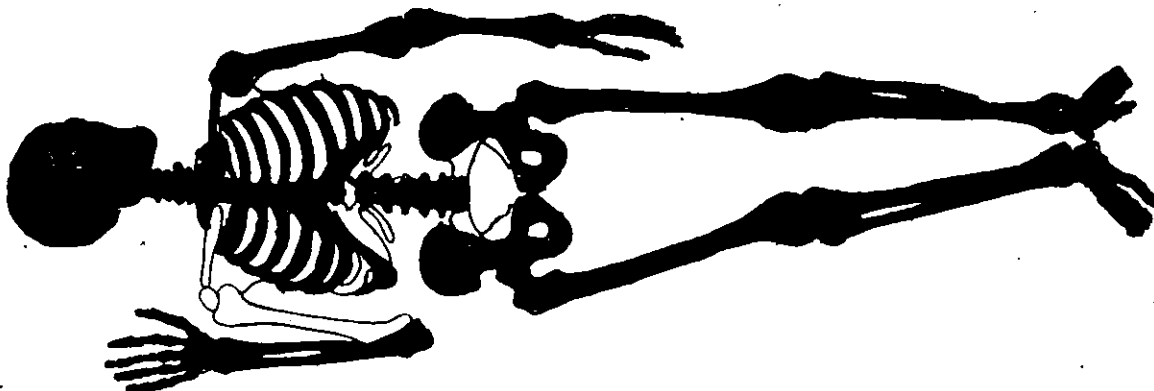
None

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)

None

Incl. 12

19. BLACK OUT PARTS OF BODY NOT RECORDED



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:

The absence of most all skeletal parts prevents any description other than to say this man was short and of average build and muscularity.

Fluoroscopical examination unnecessary. No teeth present.

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

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

**CENTRAL IDENTIFICATION LABORATORY & MUSEUM
BONE LIST**

NAME	SIDE	NO	BONE LENGTHS IN CM	REMARKS (IF MISSING OR FRACTURED, LIST PARTS AND LOCATION)
SKULL		0		Missing.
VERTEBRAE	CERVICAL	0		"
	THORACIC	1		11 missing.
	LUMBAR	0		Missing.
SACRUM		1		
INNOMINATES	RIGHT	0	BI-ILIAC DIAM	Missing.
	LEFT	0		"
RIBS		2		22 missing.
STERNUM		0		Missing.
CLAVICLES	RIGHT	1	15.9	
	LEFT	0		Missing.
SCAPULAE	RIGHT	1		
	LEFT	0		Missing.
HUMERI	RIGHT	1	30.2	
	LEFT	0		Missing.
RADII	RIGHT	0		"
	LEFT	0		"
ULNAE	RIGHT	0		"
	LEFT	0		"
HANDS	RIGHT	0		"
	LEFT	0		"
FEMORA	RIGHT	0		"
	LEFT	0		"
PATELLAE	RIGHT	0		"
	LEFT	0		"
TIBIAE	RIGHT	0		"
	LEFT	0		"
FIBULAE	RIGHT	0		"
	LEFT	0		"
FEET	RIGHT	0		"
	LEFT	0		"

HUMERO-CLAVICULAR RATIO	52.4	APPROXIMATE	
ESTIMATED HEIGHT	164.64.57 5' 4 1/2"	AGE	22 to 24 ? YEARS
ESTIMATED WEIGHT	125 to 135 lbs.	LEG-HIP BR RATIO	U. T. D.


Paul L. Gravenor
 Lab Supervisor
 ANTHROPOLOGIST

ENCLOSURE TO: Unknown X-113 Guadalcanal

IDENTIFICATION SECTION
REPATRIATION RECORDS BRANCH
MEMORIAL DIVISION

CATEGORY III CASE
NO CLUES
IDENTIFICATION IMPOSSIBLE
AT PRESENT TIME

~~CONFIDENTIAL~~ REPORT OF INTERMENT
(FM 10-630 AND AR 60-1815)

Restricted
SEP 22 1944

3102

Unidentified Body X-1

(Last name)	(First)	(Initial)	(Serial number)	(Rank)	(Organization)
Guadalcanal			Unknown	Unknown	
(Place of death)	(Date of death)		(Cause of death)		
0900-26 Aug 1944 (Reburial)	Army, Navy, Marine Cemetery		Guadalcanal		
(Time and date of burial)	(Name of cemetery)		(Name or coordinates of location)		
3	100	0	Wooden Cross.		
(Grave number)	(Row number)	(Plot number)	(Type of marker—Regulation V-shaped or other)		

Disposition of identification tags: Buried with body Yes No Attached to marker Yes No

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

This body found in same grave with X-112. Body Completely decomposed. This area is 200 yds North of Pt. Cruz approximately 500 yds inland.

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

Body buried on RIGHT	Frank, Raymond E.	1908455	Pvt.	481 Amph Trk Co.	4
	(Name)	(Serial number)	(Rank)	(Organization)	(Grave number)
Body buried on LEFT	McLeroy, William A.	515987	Pfc.	Co "L" 3rd Bn	
	(Name)	(Serial number)	(Rank)	22nd Mar USMC	2
	(Name and address of EMERGENCY ADDRESSEE)			(Organization)	(Grave number)
	Unknown			Unknown	
	(Name and address of EMERGENCY ADDRESSEE)			(Name and address of LEGAL NEXT OF KIN)	

List only personal effects FOUND ON BODY and disposition of same: Not handled.

Auth: War Dept Memo 600-61-43-dated 28 July 1943

87 Memo Hq. 121 USAFISA dated 21 August 1943

~~CONFIDENTIAL~~

Restricted

IF DECEASED UNIDENTIFIED

TAKE FINGERPRINTS OF BOTH HANDS (W. D. Cir. No. 79; 3/19/43). If unable to obtain a complete set of fingerprints, TAKE THOSE YOU CAN, and fill in as many of the following as you are able:

Height: Apparent nationality:
Weight: Laundry marks:
Color of eyes: Number of rifle:
Color of hair: Wear glasses?
Race: Is tooth chart attached?

(If possible, have medical personnel take a tooth chart)

In space below, locate and describe any scars, birthmarks, moles, deformities, etc.:

Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc.:

IF THIS IS AN ISOLATED BURIAL, ATTACH A SKETCH OF THE LOCATION, ORIENTED WITH PERMANENT LANDMARKS.

Sgt. Richard Meyer

(Signature of officer or other person reporting burial)

John C. Stewart

(Verify by Army GIs Officer)

LEFT HAND

4

3

2

1

THUMB

4

3

2

1

THUMB

RIGHT HAND