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Interred 3 March 1949
M 814

DISINTERMENT DIRECTIVE

Secretary Superintendent

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SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
8730 00000

DATE
26 09 47
DAY MONTH YEAR

NAME *013* UNKNOWN SERIAL NUMBER X-000212 RANK [Signature] ARM 0 DATE OF DEATH DAY MONTH YEAR

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

PLOT 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-212 SERIAL NUMBER UNK RANK UNK DATE OF DEATH UNK DATE DISTINTERRED 10 Dec. '47 IDENTIFICATION TAG ON [] REMAINS [] MARKER ORGANIZATION UNK RELIGION UNK IDENTIFICATION VERIFIED BY W. A. McNamany Emb. NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL CASKET CONDITION OF REMAINS SKELETAL

OTHER MEANS OF IDENTIFICATION ONE GRAVE MARKER, ONE MORTUARY TAG

MINOR DISCREPANCIES 1 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. McNamany
WILLIAM A. MC NANAMY

SIGNATURE OF GRS INSPECTOR

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

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IDENTIFICATION DATA

1. REMAINS OF UNKNOWN Unknown X-212 Guadalcanal				2. DATE OF REPORT 18 February 1948	
3. NAME OF CEMETERY U.S. Army Mausoleum # 1 Guadalcanal	4. PLOT E	5. ROW A 144	6. GRAVE 74 4	7. DATE OF DISINTERMENT REINTERMENT 17 Feb '48 18 Feb '48	

PHYSICAL DESCRIPTION Age 21 to 22 years.

8. ESTIMATED WEIGHT 140 to 150 lbs	9. ESTIMATED HEIGHT 178-70.06-5' 10"	10. COLOR OF HAIR U. T. D.	11. RACE Probably White
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

One (1) embossed plate on blanket reads: Unknown X-212 Plot-E, Row-144, Grave-4.
 One (1) embossed plate on casket reads: Unknown X-212 64.

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

UNRECOVERABLE

None BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA

CYRIL C. DRINEY
1st. Lt., RA 0-1137395 *Cyril C. Driney 4 Jan 1949*

14. WAS BODY BURNED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT?
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15. WAS BODY MANGLED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT EXTENT? All parts present are badly fractured.
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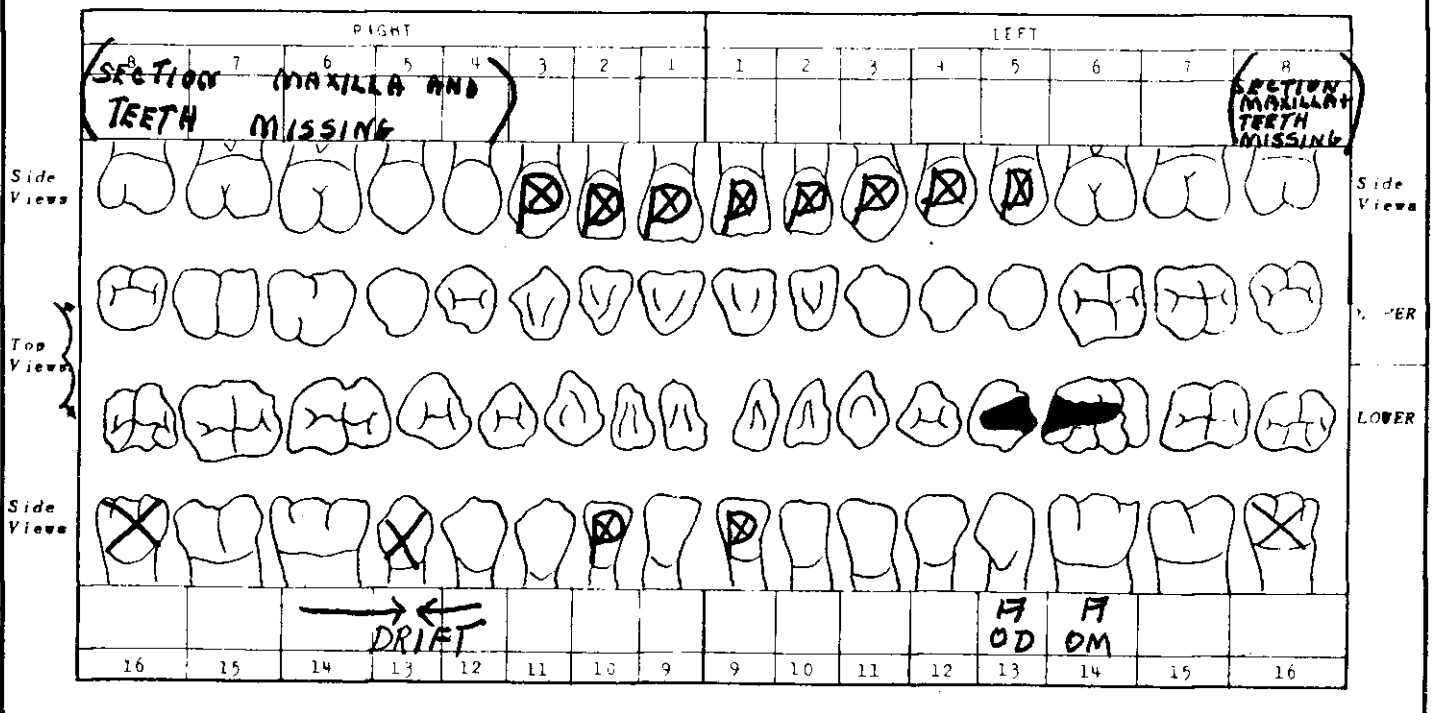
16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

Supra-condyloid process of Left humerus.
 Extra facets at ankle joints-denote the habit of squatting.

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

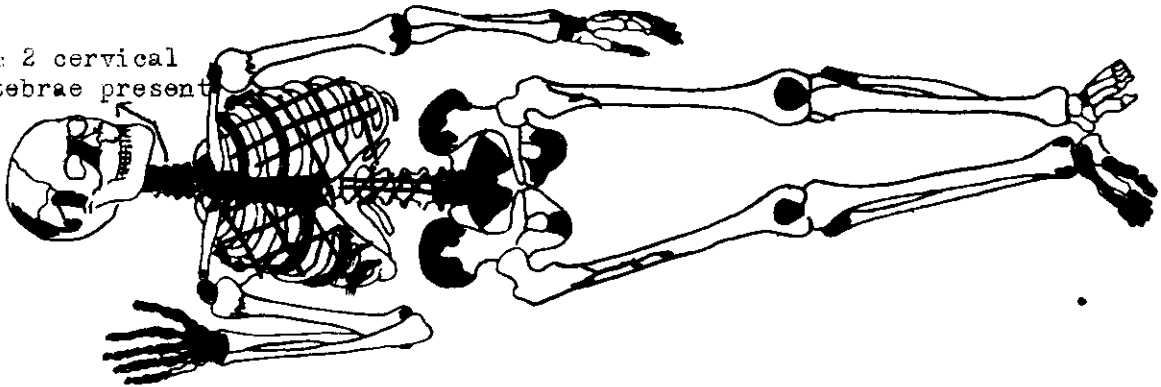
19. TOOTH CHART		TOP VIEW	SIDE VIEW
<p>MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X"ED OUT AND LABELED THUS:</p> <p>Unknown X-212</p>		<p>TOOTH MISSING</p>	
<p>CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:</p> <p>Gold Crown, Porcelain Crown</p>			
<p>BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:</p> <p>Gold Bridge</p>			
<p>FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:</p> <p>Gold Filling, Silver Filling</p>			
<p>CARIES (Cavities): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:</p> <p>Cavity, Decayed</p>			



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

19. BLACK OUT PARTS OF BODY NOT REQUIRED

1, & 2 cervical vertebrae present



20.

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

I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF 2 DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS:
NUMBER

- One (1) extraright talus.
- One (1) extra left clavicle.

Charles W. Snow SIGNATURE OF MEDICAL OFFICER Anthropologist

21. REMARKS AND ADDITIONAL INFORMATION

Picture a tall, rather slender man 21 to 22 years of age. These remains are in an advanced state of disintergration. The skull appears to have been of average size, and has a rather broad oval outline. The backhead is broad and flat. The forehead has little slope, and has prominent bosses. Also has large browridges. The face appears to have been of average proportions; with usual fullness. The mandible is rather shallow; chin is prominent and very wide.

The extra parts listed under item 20 above have been classified as CIL Unknown X-583.

Fluoroscopical examination negative. 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., AMC

CENTRAL IDENTIFICATION LABORATORY
 AND HEADQUARTERS, APO 957

SIGNATURE

**CENTRAL IDENTIFICATION LABORATORY & ANATOMY DEPARTMENT
BONE LIST**

NAME	SIDE	NO	BONE LENGTHS IN CM	REMARKS (IF MISSING OR FRACTURED, LIST PARTS AND LOCATION)
SKULL		1		Multiple fractures.
VERTEBRAE	CERVICAL	2		First two present.
	THORACIC	8		Fractured fragments of 8 present.
	LUMBAR	2		Fractured fragments of 2 present.
SACRUM		1		Only several small fragments are present.
INNOMINATES	RIGHT	1	BI-ILIAC DIAM	Multiple fractures.
	LEFT	1		" "
RIBS		20		20 ribs with multiple fractures and some fragments are present.
STERNUM		0		Missing
CLAVICLES	RIGHT	1	approx 14.5	Fractured - both ends missing.
	LEFT	1	14.8	
SCAPULAE	RIGHT	1		Multiple fractures.
	LEFT	1		" "
HUMERI	RIGHT	1	approx 33.9	Fractured.
	LEFT	1	34.1	Fractured.
RADII	RIGHT	1		Fractured - head missing.
	LEFT	1	26.4	
ULNAE	RIGHT	1	approx 26.4	Fractured - inferior end missing.
	LEFT	1		
HANDS	RIGHT	1	R-5 metacarpal present.	
	LEFT	1		L-1,2,3,4 metacarpal present, some phalanges.
FEMORA	RIGHT	1		Fractured in upper shaft-lower end missing.
	LEFT	1	49.0	Fractured in uppershaft.
PATELLAE	RIGHT	0		Missing
	LEFT	0		"
TIBIAE	RIGHT	1		Fractured - lower tip missing
	LEFT	1	39.8	
FIBULAE	RIGHT	1		Fractured - both ends missing.
	LEFT	1		" " " "
FEET	RIGHT	1		All missing except calcaneus, talus, #3,4 and 5 metatarsals.
	LEFT	1		All present except 1,2, & 3 cuneiforms, cuboid and several phalanges.

HUMERO-CLAVICULAR RATIO		APPROXIMATE	
ESTIMATED HEIGHT 178-70.06-5'10"	AGE	21 to 22	YEARS
ESTIMATED WEIGHT 140 to 150 lbs		LEG-HIP BR RATIO	

Charles E. Snow

Charles E. Snow
ANTHROPOLOGIST

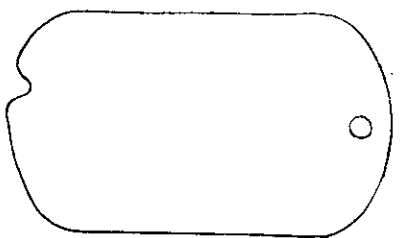
ENCLOSURE TO: Unknown X-212 Guadalcanal

WD OMC 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 OUT.
 26 Sept 1945

For Imprint of Identification Tag



NAME (Last, First, Middle Initial)
 Unknown X-212

RANK Unknown SERIAL NUMBER Unknown COUNTRY Unknown

ORGANIZATION Unknown BRANCH Unknown

RACE Unknown RELIGION Unknown DATE OF DEATH Unknown

PLACE OF DEATH: Guadalcanal, B.S.I. 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.
 Remains found on hill approximately 1 mile inland from Pt. Cruz. No

LIST OF PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME.
 No personal effects found. identification found. Probably the body of a man killed in action in that area in 1942. Only the skeleton remained. Impossible to make tooth chart.

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	HOUR	PLOT NO.	ROW NO.	GRAVE NO.	GRAVE MARKER
10 Sep 45	1500	"E"	144	4	Wooden Cross

TYPE OF RELIGIOUS CEREMONY: Protestant Catholic and Jewish. PERSON REPORTING BURIAL: /s/ S/Sgt. Richard J. Moyer

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)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.
Fox, Myles C.	1st Lt	06945	Co E. 2nd Mar Bdr	Bn USMC
BODY ON RIGHT, NAME (Last, First, Middle Initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.
Burri, Henry J.	PFC	284933	1st Para Bn, 1st Mar	Div USMC

PERSON CONDUCTING BURIAL RITES: Chaplain Cox, U.S. Army; Chaplain Zimmerer, U.S. Army; Chaplain Kravetz, U.S. Army
 VERIFIED BY G. R. S. OFFICER: /s/ John R. Nolan; /t/ JOHN R. NOLAN, 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.

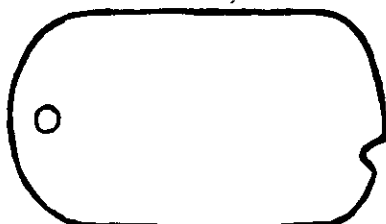
OVER FOR BURIAL INSTRUCTIONS

WD OMC Form 1042
 Rev. 1 November 1942
 (GRS 1, dated 11 May 1942
 may be used until exhausted)

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

DATE REPORT FILLED OUT

26 Sept 1945

	FOR IMPRINT OF IDENTIFICATION TAG			NAME (Last, First, Middle Initial) Unknown X-212		
	RANK Unknown	SERIAL NUMBER Unknown	COUNTRY Unknown			
	ORGANIZATION Unknown		BRANCH Unknown			
	RACE Unknown	RELIGION Unknown	DATE OF DEATH Unknown			

PLACE OF DEATH Guadalcanal, B.S.I.	CAUSE OF DEATH Unknown
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IDENTIFICATION TAGS FOUND ON BODY <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> NONE	IF NO IDENTIFICATION TAGS, OTHER MEANS USED TO IDENTIFY BODY (Identification Cards, Letters, etc.)
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DISPOSITION OF SUBSTITUTE TAGS, IF MADE	
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COMPLETE FINGERPRINT CHART OF BOTH HANDS ON REVERSE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	COMPLETE TOOTH CHART ON REVERSE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
--	--

LIST ANATOMICAL CHARACTERISTICS AND OTHER DATA IF FINGERPRINTS CANNOT BE TAKEN	Remains found on hill approximately 1 mile inland from Pt. Cruz. No
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LIST OF PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME No personal effects found.	identification found. Probably the body of a man killed in action in that area in 1942. Only the skeleton remained. Impossible to make tooth chart.
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NAME OF EMERGENCY ADDRESSEE Unknown	ADDRESS OF EMERGENCY ADDRESSEE Unknown
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IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCES ON REVERSE

DATE 10 Sept 45	HOUR 1500	PLOT NO. "E"	ROW NO. 144	GRAVE NO. 4	GRAVE MARKER Wooden Cross
Army Navy Marine Cemetery Guadalcanal, B.S.I.					

TYPE OF RELIGIOUS CEREMONY Protestant Catholic and Jewish.	PERSON REPORTING BURIAL <i>Sgt. Richard J. Hayes</i>
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IDENTIFICATION TAGS BURIED WITH BODY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	ATTACHED TO MARKER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
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IF IDENTIFICATION TAGS NOT PRESENT, WHAT OTHER IDENTIFICATION DATA BURIED WITH BODY AND IN WHAT KIND OF CONTAINERS.	
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BODIES BURIED EITHER SIDE (See Paragraph 4 on Reverse)

BODY ON LEFT, NAME (Last, First, Middle Initial) Fox, Myles C.	RANK 1st Lt	SERIAL NO. 06945	ORGANIZATION Co E. 2nd Mar Rdr Bn USMC
BODY ON RIGHT, NAME (Last, First, Middle Initial) Burri, Henry J.	RANK PFC	SERIAL NO. 284933	ORGANIZATION 1st Para Bn. 1st Mar Div USMC
PERSON CONDUCTING BURIAL RITES Chaplain Cox, U.S. Army Chaplain Zimmerer, U.S. Army Chaplain Kravetz, U.S. Army	VERIFIED BY G. R. S. OFFICER <i>John R. Nolan</i> JOHN R. NOLAN 1st Lt., OMC		

INSTRUCTIONS FOR FILLING OUT BURIAL REPORT: MAKE OUT OMC FORM 1, GRS 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