

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 West Guadalcanal X 218

SUBJECT

X 717 Ident as 293 Jackson, Henry C. (3754773)

NATIONAL MEMORIAL CEMETERY
OF THE PACIFIC

DISINTERMENT DIRECTIVE

Interred 22 June 1949

GR. ~~Unk. X-217~~ X-218, Sec Q, Gr. 782

ELVAN C. BAKER

Cemetery Superintendent

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

8730 ~~69-35~~

DATE

17 9 47
DAY MONTH YEAR

NAME COMMON GRAVE ~~GROUP BURIAL~~
(SEE BELOW) *Unk-218*

SERIAL NUMBER

RANK

ARM
8

DATE OF DEATH

DAY MONTH YEAR

CEMETERY
GUADALCANAL

Corrected per phone conversation with Cem. Branch. amp 29 York Guadalcanal X218

DISPOSITION OF REMAINS

0492 64
CODE DIST. PT.

PLOT ROW GRAVE
E 149 04

COUNTRY

SOLOMON ISLANDS

CAUSE OF DEATH

6

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

HONOLULU NATIONAL CEMETERY
HONOLULU, TERRITORY OF HAWAII

NAME AND ADDRESS OF NEXT OF KIN

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME G.B. #35
~~UNKNOWN X-217~~

SERIAL NUMBER

~~Unk.~~

RANK

~~Unk.~~

DATE OF DEATH

~~Unk.~~

DATE DISTINTERRED

18 Apr 49

IDENTIFICATION TAG ON

ORGANIZATION

UNKNOWN

RELIGION

Unk.

IDENTIFICATION VERIFIED BY

Lt. Clark

NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

Uncasketed

CONDITION OF REMAINS

Skeletal

OTHER MEANS OF IDENTIFICATION

Cemetery Record & Mortuary Plate

MINOR DISCREPANCIES

None

REMAINS PREPARED AND PLACED IN CASKET

DATE 18 Apr 49

BY

R. L. TRASK, EMB.

CASKET SEALED BY

E. E. BRAYBOY

EMBALMER (Signature)

E E Brayboy
E. E. BRAYBOY

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY

DATE 9 June 49

E. E. BRAYBOY

C. J. SURINE, CWO, USA

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

SIGNATURE OF GRS INSPECTOR

C Surine
C. J. SURINE, CWO, USA

37 597/5

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

THIS GRAVE CONTAINS THE REMAINS OF ~~UNKNOWN X-217~~ AND X-218, WHICH HAVE BEEN
inspected for identification only per paragraph ~~DECLARED UNIDENTIFIABLE~~

QMC Form 1194 (Pacific), dated 5 May 1948.

QMC FORM 1194
REV 15 MAR 46

1194

Unk

*NAI
11 27 1950
11 27 1950*

217 IDENTIFIED AS JACKSON

HH5

RECORD OF CUSTODIAL TRANSFER

THIS COPY CONTAINS THE SIGNATURES OF THE PERSONS WHO RECEIVED AND X-512

1. SHIPPED

FROM U. S. ARMY MAUSOLEUM NO. 3		13 JUN 1943	TO CHIEF HAWN D.	
KIND OF CONVEYANCE TRUCK			NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>[Signature]</i> T. E. WILSON CAPT. QMC	DATE	SIGNATURE OF RECEIVER <i>[Signature]</i> JAMES B HARRIS CAPTAIN QMC	DATE 14 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		NAME OF CONVOYER		
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE	

6. SHIPPED

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

7. SHIPPED

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

GROUP AND MASS BURIAL IDENTITY LIST

Overseas Cemetery

GUADALCANAL, SOLOMON ISLANDS

U.S. Nation Cemetery of
Final Burial

Group Burial Number

~~8730-GB-35~~

Number of Remains
In Group

2

Number of Caskets

2

NAME

RANK

SERIAL
NUMBER

ORGANIZATION

DISINTERMENT
DIRECTIVE NO.

~~UNKNOWN X-217~~

~~8730-GB-35~~

UNKNOWN X-218

"

217 IDENTIFIED AS JACKSON, HENRY CLAY
3959/73

Fill out in duplicate for each casket.
Each form to be sealed separately in a
shipping envelope.
One envelope to be attached to handle of casket.
Second envelope to be tacked to outside of
shipping case.

[Signature]
Signature of GRS Inspector

6

DISINTERMENT DIRECTIVE

243 *unk Guadalcanal* X218

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER 8730 CG-35

DATE 17 9 47 DAY MONTH YEAR

NAME COMMON GRAVE (SEE BELOW)

SERIAL NUMBER

RANK

ARM 8

DATE OF DEATH

DAY MONTH YEAR

CEMETERY GUADALCANAL

DISPOSITION OF REMAINS

0 0492 64 CODE DIST. PT.

PLOT E ROW 149 GRAVE 04 COUNTRY SOLOMON ISLANDS

CAUSE OF DEATH 6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE HONOLULU NATIONAL CEMETERY HONOLULU, TERRITORY OF HAWAII

NAME AND ADDRESS OF NEXT OF KIN

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER RANK DATE OF DEATH DATE DISTINTERRED

IDENTIFICATION TAG ON REMAINS MARKER

ORGANIZATION UNKNOWN

RELIGION

IDENTIFICATION VERIFIED BY

NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES

REMAINS PREPARED AND PLACED IN CASKET

DATE BY

CASKET SEALED BY

EMBALMER (Signature)

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY

DATE BY

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

SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

THIS GRAVE CONTAINS THE REMAINS OF UNKNOWN X-217 AND X-218

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN Unknown X-218				2. DATE OF REPORT 16 February 1948		
3. NAME OF CEMETERY U. S. Army Mausoleum # 1 Guadalcanal		4. PLOT E	5. ROW A 149	6. GRAVE 5 4	7. DATE OF DISINTERMENT 12 Feb '48	REINTERMENT 16 Feb '48

PHYSICAL DESCRIPTION Age 27 - 30

8. ESTIMATED WEIGHT About 160	9. ESTIMATED HEIGHT 5'11"	10. COLOR OF HAIR	11. RACE
----------------------------------	------------------------------	-------------------	----------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS
 One (1) original I.D. tag reading: Dale, Donald Eugene 3215913. T-12-41-O U.S.N.,
 (Finger print on back of tag).
 One (1) embossed plate on box reads: Unknowns X-217 & 218.

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

CIRIL C. DISNEY
 1st. Lt., FA 0-1167395 *Ciril C. Disney* 4 Jan 1949

14. WAS BODY BURNED? TO WHAT EXTENT?
 YES NO *Right shoulder, hip and knee regions.*

15. WAS BODY MANGLED? TO WHAT EXTENT?
 YES NO *Bones fractured and missing.*

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS
Wormian bone at bregma (osbregmaticum)

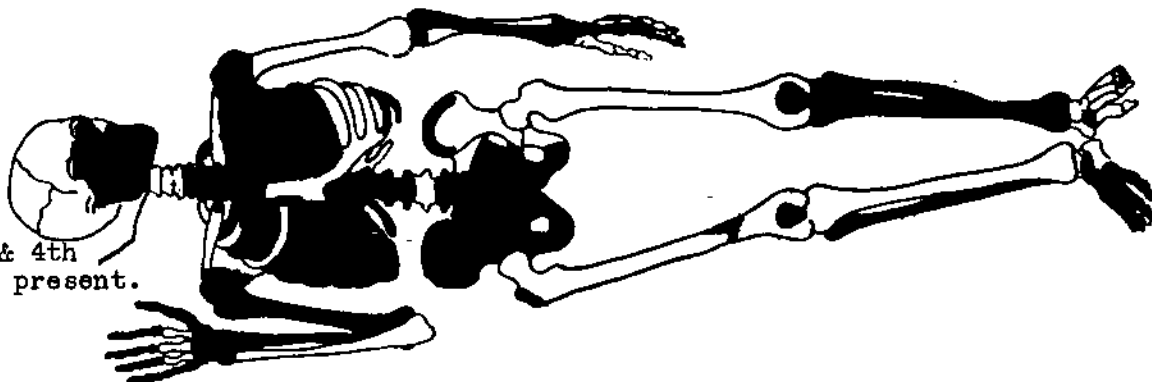
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

None

Incl. 9

19. BLACK OUT PARTS OF BODY NOT RECORDED

1st, 2nd & 4th
cervical 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 3 DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS:

	NUMBER
One (1) left ulna.	One (1) left cuboid.
One (1) left radius.	One (1), three (3), & five (5) metatarsals (left).
One (1) head of right radius.	Capitate, triangular (right).
One (1) left fibula.	2, 3, 4, 5 metacarpals (right).
One (1) portion of right fibula.	One (1) left 2nd metacarpal.
One (1) right tibia.	
One (1) left calcaneus.	
Portion of left and right parietals.	
One (1) left navicular.	

Charles E. Snow SIGNATURE OF MEDICAL OFFICER Anthropologist

21. REMARKS AND ADDITIONAL INFORMATION

There is no way to demonstrate the association of the skull and body. Picture a tall, slender, older man 27 to 30 years of age. The skull is elliptical in shape and medium in size with left asymmetry. The vault is relatively high. The backhead is rather flat and there is a characteristic slope up to the crown. The forehead is high, prominent and upright and has large browridges. There are two, probably characteristic mound shaped eminences at the back of the head behind the ears. It would appear that the upper face was probably full.

Extra bones listed under item # 20 have been made C.I.L. # 579.

Fluoroscopic examination negative. 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**

QMC FORM 1044b
18 MAR 47

**CENTRAL IDENTIFICATION LABORATORY & SOLEUM
BONE LIST**

NAME	SIDE	NO	BONE LENGTHS IN CM	REMARKS (IF MISSING OR FRACTURED, LIST PARTS AND LOCATION)
SKULL		1	53.0	Crushed. All of lower face missing.
VERTEBRAE	CERVICAL	3		1st, 2nd, & 4th present.
	THORACIC	4		Fractured.
	LUMBAR	1		
SACRUM		0		Missing.
INNOMINATES	RIGHT	0	BI-ILIAC DIAM	"
	LEFT	1		Fractured. Small part present.
RIBS		4		Fragments.
STERNUM		0		Missing
CLAVICLES	RIGHT	1		Both ends missing.
	LEFT	1		" " "
SCAPULAE	RIGHT	1		Small portion present.
	LEFT	0		Missing
HUMERI	RIGHT	0		"
	LEFT	1		Proximal end missing.
RADII	RIGHT	0		Missing
	LEFT	0		"
ULNAE	RIGHT	1		Distal end missing.
	LEFT	1		Both ends missing.
HANDS	RIGHT	1		2nd & 3rd metacarpals present.
	LEFT	1		1 & 3 metacarpals, 1 phalange present.
FEMORA	RIGHT	1		Fractured lower third. Greater trochanter missing.
	LEFT	1	48.8	
PATELLAE	RIGHT	0		Missing
	LEFT	0		"
TIBIAE	RIGHT	1	40.5	
	LEFT	0		Missing
FIBULAE	RIGHT	0		"
	LEFT	0		"
FEET	RIGHT	1		Calcaneum and talus present.
	LEFT	1		Calcaneum, talus, 2nd cuneiform, 5 metatarsals and 1 phalange present.

HUMERO-CLAVICULAR RATIO		APPROXIMATE	
ESTIMATED HEIGHT	5'11"	AGE	27 - 30 YEARS
ESTIMATED WEIGHT	About 160	LEG-HIP BR RATIO	

Charles E. Snow

ENCLOSURE TO: Unknown X-218 Guadalcanal

Charles E. Snow
ANTHROPOLOGIST

NARRATIVE

X-217 and X-218, Guadalcanal, Plot-E, Row-149, Grave-5 were completely processed. In processing these remains, extra non-articulating bones were discovered. In an attempt to absorb the afore mentioned extra bones, the burials to the left and right, namely Engstrom, Warren L., and Dale, Donald E., and also CIL X-409 from the casket of Engstrom were simultaneously checked with X-217 and X-218.

No absorption was possible and the extra bones found with X-217 and X-218 were removed and given number CIL X-579 and the associated cases returned to the proper place of interment.

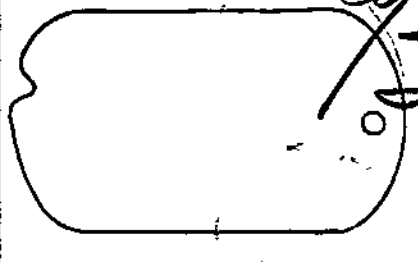
RESTRICTED

WD OMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

REPORT OF INTERMENT
(AR 30-1810 and AR 30-1815)

DATE OF REPORT
20 July 1949

Imprint Identification Tag If Possible
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)

UNKNOWN X-218

(GUADALCANAL
UNIDENTIFIABLE)

SERIAL NO.

Unknown

GRADE

Unknown

ORGANIZATION

Unknown

BRANCH OF SERVICE

Unknown

RACE

Unknown

RELIGION

Unknown

IF OTHER THAN U. S. DEAD, GIVE
NAME OF COUNTRY

PLACE OF DEATH

Guadalcanal, S. I.

CAUSE OF DEATH

Unknown

DATE OF DEATH

Unknown

EMERGENCY ADDRESSEE (Name, relationship, and address)

Unknown

IDENTIFICATION TAGS FOUND ON BODY
(1, 2, or none)

None

IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)

UNIDENTIFIABLE

WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)

Yes

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

None

Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

National Memorial Cemetery of the Pacific, Honolulu, T. H.

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE No.
22 June 1949	1000	Permanent Type Casket	Cross	Q		782

WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE	PLOT No.	ROW No.	GRAVE No.
Yes	ANM Cemetery, Guadalcanal BSI	E	149	4

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
Catholic Protestant	Eugene L.A. Fisher, Chaplain Albert F. Click, Chaplain	

IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)
Yes	Yes

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
Krieger, Billie F.	SQT	35918099	USAGE	752


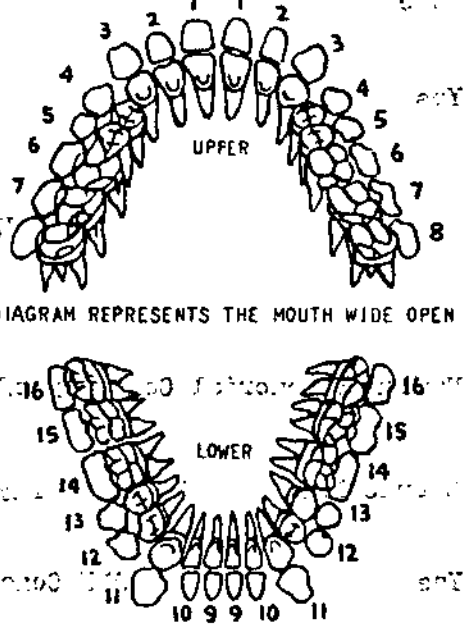





BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.

SIGNATURE OF PERSON PREPARING REPORT <i>Margaret E. Parry</i> Margaret E. Parry, Chief Clerk, HDC	SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>James B. Harris</i> James B. Harris, Captain, OMC
---	--

DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Office. Copies for retention in theater as prescribed by theater commander.

MKK

RESTRICTED

LEFT LITTLE FINGER	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
Section UNIDENTIFIED REMAINS.									
INSTRUCTIONS: (a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks. (b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.									
HEIGHT		WEIGHT		COLOR OF EYES		COLOR OF HAIR		BIRTHMARKS, SCARS, OR TATTOOS	
WEAPON AND SERIAL No.			LAUNDRY MARKS			WHERE BODY WAS BURIED OR FOUND			
OTHER IDENTIFICATION CLUES									
FILLINGS  SILVER FILLING GOLD FILLING					 UPPER LOWER DIAGRAM REPRESENTS THE MOUTH WIDE OPEN				
CAVITIES  CAVITY DECAYED									
MISSING TEETH  TOOTH MISSING									
CROWNED TEETH  PORCELAIN CROWN GOLD CROWN									
BRIDGE WORK  GOLD BRIDGE									
FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY.									
									
REMARKS:									
Group Burial Unknown X-217 & X-218 consisting of 2 remains in 2 caskets (Guadalcanal Cemetery) Unk X-217 (Casket 1 of 2) Unk X-218 (Casket 2 of 2) Sec Q, Gr. 782									

RESTRICTED

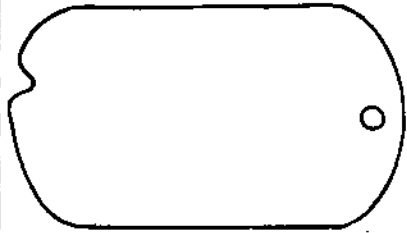
WD GMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

REPORT OF INTERMENT
(AR 30-1810 and AR 30-1815)

DATE OF REPORT

20 July 1949

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN X-216		(GUADALCANAL (UNIDENTIFIABLE))	SERIAL No. Unknown
GRADE Unknown	ORGANIZATION Unknown	BRANCH OF SERVICE Unknown	
RACE Unknown	RELIGION Unknown	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	

PLACE OF DEATH Guadalcanal, S. I.	CAUSE OF DEATH Unknown	DATE OF DEATH Unknown
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EMERGENCY ADDRESSEE (Name, relationship, and address)
Unknown

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) UNIDENTIFIABLE
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME
None

Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

National Memorial Cemetery of the Pacific, Honolulu, T. H.

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
22 June 1949	1000	Permanent Type Casket	Cross	Q		782

WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE ARM Cemetery, Guadalcanal BSI	PLOT No. E	ROW No. 149	GRAVE No. 4
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TYPE OF RELIGIOUS CEREMONY Catholic Protestant	PERSON CONDUCTING BURIAL RITES Eugene L.A. Fisher, Chaplain Albert F. Click, Chaplain	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes	<i>M. A. Fisher M. A. Fisher M. A. Fisher M. A. Fisher</i>

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) Krieger, Billie F.	RANK Sgt	SERIAL No. 35918099	ORGANIZATION USARP	GRAVE No. 782
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BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
---	------	------------	--------------	-----------

SIGNATURE OF PERSON PREPARING REPORT Margaret E. Perry, Chief Clerk, IDC	SIGNATURE OF GRS OFFICER VERIFYING REPORT James B. Harris, Captain, GRC
--	---

DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.

NRK

RESTRICTED

RESTRICTED

Section UNIDENTIFIED REMAINS.

INSTRUCTIONS:

(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks.

(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.

LEFT
LITTLE FINGER

LEFT
RING FINGER

LEFT
MIDDLE FINGER

LEFT
INDEX FINGER

LEFT
THUMB

RIGHT
THUMB

RIGHT
INDEX FINGER

RIGHT
MIDDLE FINGER

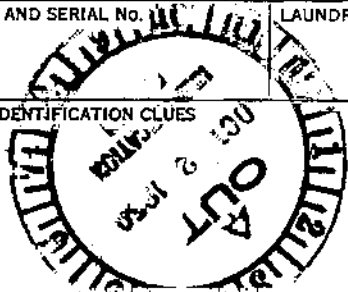
RIGHT
RING FINGER

RIGHT
LITTLE FINGER

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
--------	--------	---------------	---------------	-------------------------------

WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
-----------------------	---------------	--------------------------------

OTHER IDENTIFICATION CLUES



FILLINGS	SILVER FILLING GOLD FILLING
CAVITIES	CAVITY DECAYED
MISSING TEETH	TOOTH MISSING
CROWNED TEETH	PORCELAIN CROWN GOLD CROWN
BRIDGE WORK	GOLD BRIDGE

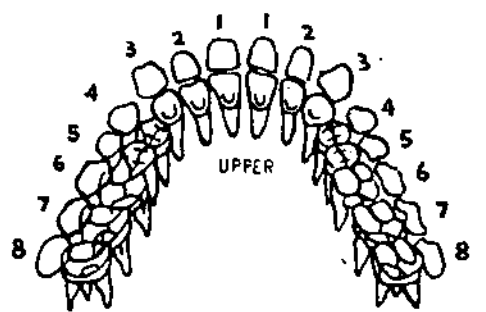
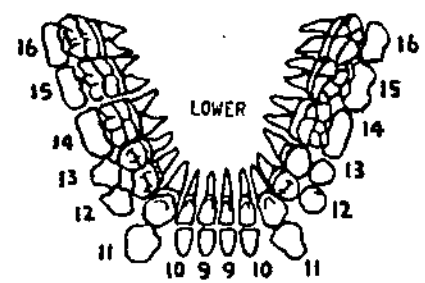
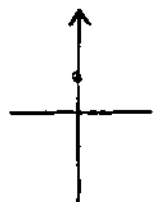


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN

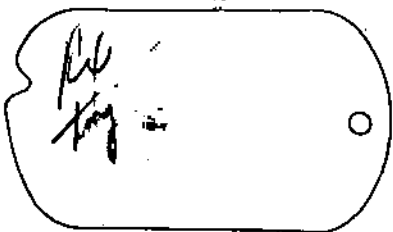


FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY



REMARKS:

**Group Burial Unknown X-217 & X-218 consisting of 2 remains in 2 caskets (Guadalcanal Cemetery)
 Casket X-217 (Casket 1 of 2)
 Casket X-218 (Casket 2 of 2) Sec Q, Gr. 782**

For Imprint of Identification Tag 	NAME (Last, First, Middle Initial) Unknowns 217 & X-218		
	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 <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.)
---	--

DISPOSITION OF SUBSTITUTE TAGS, IF MADE	COMPLETE TOOTH CHART ON REVERSE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
---	--

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.

Two Unknowns found in common grave. Only skeletons remained. Impossible to separate one from the other. Found on Hill approx. 1 mile inland from Pt. Cruz. Probably remains of men who were killed in action in that area in 1942. Impossible to get tooth charts.

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

No personal effects found

NAME OF EMERGENCY ADDRESSEE Unknown	ADDRESS OF EMERGENCY ADDRESSEE Unknown
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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 Sept 1945	1500	"E"	149	4	Wooden Cross

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

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) Dale, Donald E.	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.
	S lc	3215913	US Navy	
BODY ON RIGHT, NAME (Last, First, Middle Initial) Engstrom, Warren L.	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.
	Lt(jg)	123469	US Navy	

PERSON CONDUCTING BURIAL RITES Chaplain Zimmerer US Army Chaplain Cox US Army Chaplain Kravetz US Army	VERIFIED BY G. R. S. OFFICER /s/ John R. Nolan /t/ JOHN R. NOLAN 1st Lt., OMC
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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


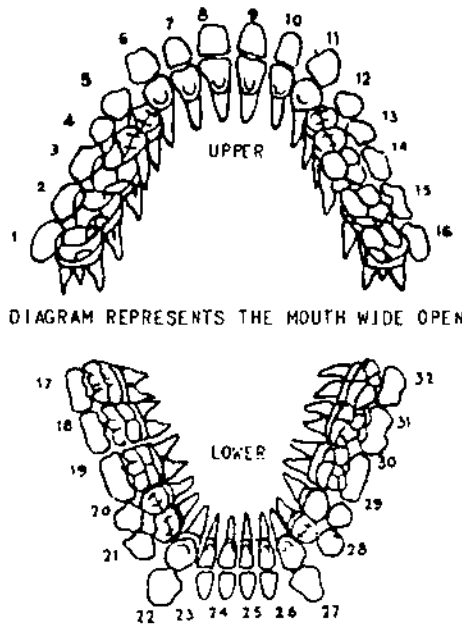




1. PREPARATION OF BODY, BURIAL, AND MARKINGS OF GRAVE: Have body examined by a member of the medical detachment and attach EMT 52b. Remove all personal property. Dress body when practical and bury in a suitable shroud. Dig grave to depth of five feet; in hasty burials, to sufficient depth to prevent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

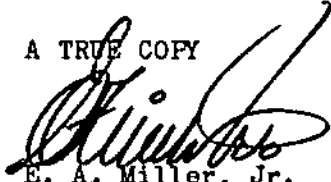
3. PERSONAL EFFECTS: List only personal effects taken from body on the Burial Report Form. Place these with information as to identity of owner, organization emergency addressee in personal effects bag, or wrap in handkerchief, towel, or other available material and turn over to Grave Registration Service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

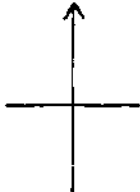
FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
CAVITIES	 <p>CAVITY DECAYED</p>	
MISSING TEETH	 <p>TOOTH MISSING</p>	
CROWNED TEETH	 <p>PORCELAIN CROWN GOLD CROWN</p>	
BRIDGE WORK	 <p>GOLD BRIDGE</p>	

SKETCH AND MAP REFERENCE

A TRUE COPY



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



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		