

A I R M A I L

QMGMT 293

GRS Pacific

1st Ind.

SUBJECT: Resolution of Unidentified Remains

Department of the Army, OCMG, Washington 25, D. C. 15 April 1949

TO: Commanding Officer, American Graves Registration Service, Pacific Zone, APO 953, c/o Postmaster, San Francisco, California

1. Reference is made to basic communication and inclosures, withdrawn.

2. Subject cases have been reviewed and this Office approves the classification of the following Unknowns as unidentifiable: Unknowns X-8, X-12, X-14, X-16, X-19, X-25, X-27, X-32, X-33, X-35, X-40, X-41, X-52, X-53, X-54, X-51, X-90, X-91A, X-91B, X-94, X-104, X-117, X-177, X-182, X-183, X-190, X-196, X-217, X-219, X-220, X-225, X-226, X-235, X-237, X-242, X-243, X-244, X-245, X-247, X-249, X-250, X-255, X-277, X-281, X-282, X-285, X-287, X-288, X-290, X-291, X-293, X-295, X-296, X-297, X-298, X-301, X-304, X-308, X-323, X-324, X-344, formerly Guadalcanal; X-743, X-744, X-668, X-672, X-673, X-674, X-675, X-693, X-902, formerly Shanghai Remains Depot; X-7, formerly Emynlabagan; X-30, formerly Kunning; X-125, X-146, X-149A, X-149 B X-149 C, X-150 A, X-150 B, X-233, X-238, formerly Barrackpore.

3. Further reference is made to inclosures 82 and 83, Unknowns X-315A, and X-315 B, formerly Barrackpore. Subject cases are suspended for further investigation.

FOR THE QUARTERMASTER GENERAL:

83 Incls: w/d

T. H. MEYER  
Lt. Colonel, OMC  
Memorial Division

S. Morgan:lrc

Salsor

JW

cc--Administrative Section

A I R M A I L

*15997  
Lark  
Barrackpore  
X-315  
X-315A  
X-315B*

REC  
NJS

COPY

AIR MAIL

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
(PACIFIC ZONE)  
APO 953

FORM 203

JUN 24 1940

SUBJECT: Resolution of Unidentified Remains

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

1. Enclosed herewith eighty-three (83) QMG Forms 1044 for Kun Ming, Shanghai, Rowans Point, Guadalcanal, Barrackpore, Shanghai and Bangkok-Comeborior, stamped and signed in accordance with letter, DA QMG, QMGHS 293 GRS (Pacific Zone), Subject: Resolution of Cases of Unidentified Deceased, dated 22 September 1940.

2. Acknowledgment of receipt is requested.

FOR THE COMMANDING OFFICER:

Horace Mann  
s/ HORACE MANN  
Captain, QMG  
Chief, ER Div

85 Incls

1. QMG Form 1044-1044a-1044b-  
Bone List X-8-Guadalcanal
2. QMG Form 1044-1044a-1044b-  
Bone List X-12-Guadalcanal
3. QMG Form 1044-1044a-1044b-Bone List-  
Fluoroscopic Findings X-14-  
Guadalcanal
4. QMG Form 1044-1044a-1044b-Bone List-  
X-16-Guadalcanal
5. QMG Forms 1044-1044a-1044b-Bone List-  
X-19 Guadalcanal
6. QMG Form 1044-1044a-1044b-Bone List-  
X-25 Guadalcanal
7. QMG Form 1044-1044a-1044b-Bone List-  
X-27 Guadalcanal
8. QMG Form 1044-1044a-1044b-Bone List-  
X-32 Guadalcanal

AIR MAIL

SUBJECT: Resolutions of Unidentified Remains

23 Incls

3. QMC Form 1044-1044a-1044b-Bone List  
X-23 Guadalcanal
- 10 QMC Form 1044-1044a-1044b-Bone List  
X-25 Guadalcanal
- 11 QMC Form 1044-1044a-1044b-Bone List  
X-26 Guadalcanal
- 12 QMC Form 1044-1044a-1044b-Bone List-Fluorocyclophical Findings  
X-41 Guadalcanal
- 13 QMC Form 1044-1044a-1044b-Bone List  
X-52 Guadalcanal
- 14 QMC Form 1044-1044a-1044b-Bone List  
X-53 Guadalcanal
- 15 QMC Form 1044-1044a-1044b-Bone List  
X-54 Guadalcanal
- 16 QMC Form 1044-1044a-1044b-Bone List  
X-61 Guadalcanal
- 17 QMC Form 1044-1044a-1044b-Bone List  
X-90 Guadalcanal
- 18 QMC Form 1044-1044a-1044b-Bone List  
X-91 "A" Guadalcanal
- 19 QMC Form 1044-1044a-1044b-Bone List  
X-91 "B" Guadalcanal
- 20 QMC Form 1044-1044a-1044b-Bone List  
X-104 Guadalcanal
- 21 QMC Form 1044-1044a-1044b-Bone List  
X-117 Guadalcanal
- 22 QMC Form 1044-1044a-1044b-Bone List  
X-177 Guadalcanal
- 23 QMC Form 1044-1044a-1044b-Bone List  
X-182 Guadalcanal
- 24 QMC Form 1044-1044a-1044b-Bone List  
X-183 Guadalcanal
- 25 QMC Form 1044-1044a-1044b-Bone List  
X-190 Guadalcanal
- 26 QMC Form 1044-1044a-1044b-Bone List  
X-195 Guadalcanal
- 27 QMC Form 1044-1044a-1044b-Bone List  
X-94 Guadalcanal
- 28 QMC Form 1044-1044a-1044b-Bone List  
X-217 Guadalcanal
- 29 QMC Form 1044-1044a-1044b-Bone List  
X-219 Guadalcanal
- 30 QMC Form 1044-1044a-1044b-Bone List  
X-220 Guadalcanal
- 31 QMC Form 1044-1044a-1044b-Bone List  
X-225 Guadalcanal

RRREC 293

SUBJECT: Resolution of Unidentified Remains

83 Incis

- 32. QMC Form 1044-1044a-1044b-Bone List-  
X-226-Guadalupe
- 33. QMC Form 1044-1044a-1044b-Bone List-  
X-235-Guadalupe
- 34. QMC Form 1044-1044a-1044b-Bone List-  
X-237-Guadalupe
- 35. QMC Form 1044-1044a-1044b-Bone List-  
X-242-Guadalupe
- 36. QMC Form 1044-1044a-1044b-Bone List-  
X-243-Guadalupe
- 37. QMC Form 1044-1044a-1044b-Bone List-  
X-244-Guadalupe
- 38. QMC Form 1044-1044a-1044b-Bone List-  
X-245-Guadalupe
- 39. QMC Form 1044-1044a-1044b-Bone List-  
X-247-Guadalupe
- 40. QMC Form 1044-1044a-1044b-Bone List-  
X-249-Guadalupe
- 41. QMC Form 1044-1044a-1044b-Bone List-  
X-250-Guadalupe
- 42. QMC Form 1044-1044a-1044b-Bone List-  
X-255-Guadalupe
- 43. QMC Form 1044-1044a-1044b-Bone List-  
X-277-Guadalupe
- 44. QMC Form 1044-1044a-1044b-Bone List-  
X-281-Guadalupe
- 45. QMC Form 1044-1044a-1044b-Bone List-  
X-282-Guadalupe
- 46. QMC Form 1044-1044a-1044b-Bone List-  
X-285-Guadalupe
- 47. QMC Form 1044-1044a-1044b-Bone List-  
X-287-Guadalupe
- 48. QMC Form 1044-1044a-1044b-Bone List-  
X-288-Guadalupe
- 49. QMC Form 1044-1044a-1044b-Bone List-  
X-290-Guadalupe
- 50. QMC Form 1044-1044a-1044b-Bone List-  
X-291-Guadalupe
- 51. QMC Form 1044-1044a-1044b-Bone List-  
X-293-Guadalupe
- 52. QMC Form 1044-1044a-1044b-Bone List-  
X-295-Guadalupe
- 53. QMC Form 1044-1044a-1044b-Bone List-  
X-296-Guadalupe

RRREC 293

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83 Incls

- 64. QMC Form 1044-1044a-1044b-Bone List-  
X-297-Guadalucaanal
- 65. QMC Form 1044-1044a-1044b- Bone List-  
X-298 Guadalucaanal
- 66. QMC Form 1044-1044a-1044b-Bone List-  
X-301-Guadalucaanal
- 67. QMC Form 1044-1044a-1044b-Bone List-  
X-304-Guadalucaanal
- 68. QMC Form 1044-1044a-1044b-Bone List-  
X-308-Guadalucaanal
- 69. QMC Form 1044-1044a-1044b-Bone List-  
X-325-Guadalucaanal
- 60. QMC Form 1044-1044a-1044b-Bone List-  
X-324-Guadalucaanal
- 61. QMC Form 1044-1044a-1044b-Bone List-  
X-344-Guadalucaanal
- 62. QMC Form 1044-1044a-1044b-Bone List-  
X-743 Remains Depot
- 63. QMC Form 1044-1044a-1044b-Bone List-  
X-744-Remains Depot
- 64. QMC Form 1044-1044a-1044b-Bone List-  
X-363-Remains Depot
- 65. QMC Form 1044-1044a-1044b-Bone List-  
X-372-Remains Depot
- 66. QMC Form 1044-1044a-1044b-Bone List-  
X-373-Remains Depot
- 67. QMC Form 1044-1044a-1044b-Bone List-  
X-374-Remains Depot
- 68. QMC Form 1044-1044a-1044b-Bone List-  
X-375-Remains Depot
- 69. QMC Form 1044-1044b-Bone List X-502-  
Remains Depot.
- 70. QMC Form 1044-1044a-1044b-Bone List-  
X-7-Ennlabegan
- 71. QMC Form 1044-1044a-1044b-Bone List-  
X-30 Kunming
- 72. QMC Form 1044-1044a-1044b-Bone List-  
X-893 Shanghai
- 73. QMC Form 1044-1044a-1044b-Bone List-  
X-125-Barrackpore
- 74. QMC Form 1044-1044a-1044b-Bone List-  
X-146-Barrackpore
- 75. QMC Form List Bone List X-149-  
"A" Barrackpore.

AIR MAIL

RRREC 293

SUBJECT: Resolution of Unidentified Remains

83 Incls

76. QMC Form 1044-1044b-Base List X-149 "B".  
Barrackpore
77. QMC Form 1044-1044b-Base List X-149 "C".  
Barrackpore
78. QMC Form 1044-1044b-Base List X-150  
"A" Barrackpore
79. QMC Form 1044-1044a-1044b-Base List-  
X-150 "B" Barrackpore
80. QMC Form 1044-1044a-1044b-Base List-  
X-233 Barrackpore
81. QMC Form 1044-1044a-1044b- Base List-  
X-238-Barrackpore
82. QMC Form 1044-1044b-Base List X-315 "A"  
Barrackpore
83. QMC Form 1044-1044b-Base List X-315 "B"  
Barrackpore

AIR MAIL

HT

NATIONAL MEMORIAL CEMETERY  
OF THE TERRITORY OF HAWAII

302

TJ

4 sub

Interred 14 March 1949 **DISINTERMENT DIRECTIVE**

F 414

*Alvan C. Baker* 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

*MB*

UNKNOWN X-000308

SERIAL NUMBER

RANK

ARM

DATE OF DEATH

DAY MONTH YEAR

CEMETERY

GUADALCANAL

DISPOSITION OF REMAINS

0492 64  
CODE DIST. PT.

PLOT

ROW

GRAVE

COUNTRY

D175

6

SOLOMON ISLANDS

CAUSE OF DEATH

6

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

HONOLULU NATIONAL CEMETERY  
TERRITORY OF HAWAII

NAME AND ADDRESS OF NEXT OF KIN

(BY ADMINISTRATIVE ORDER)

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISINTERRED

UNKNOWN X-308

Unk

Unk

Unk

18 November 47

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

REMAINS  
 MARKER

Unk

Unk

Arthur A. Latham,  
1st Lt., INF NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

Casket

CONDITION OF REMAINS

Skeleton

OTHER MEANS OF IDENTIFICATION

Mortuary plate and grave marker

MINOR DISCREPANCIES

None

REMAINS PREPARED AND PLACED IN CASKET

DATE 1 July 1948

BY

WILLIAM J WILLIS, EMBALMER

CASKET SEALED BY

J. N. ROBINSON

EMBALMER (Signature)

*William J. Willis*  
WILLIAM J. WILLIS

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY

DATE 7/1/48

BY

J. N. ROBINSON

J. TERADA

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

*Gilbert L. Wong*

GILBERT L. WONG, CAPT., INF.

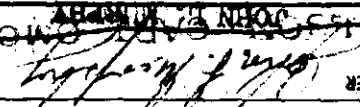
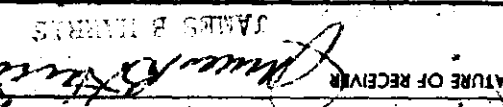
SIGNATURE OF GRS INSPECTOR

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

*NL 2nd 8*

MUNICIPAL DIVISION  
JUN 8 10 36 AM '49  
REPAIRS RECORDS BRANCH

RECORD OF CUSTODIAL TRANSFER

FROM		U S ARMY MAUS NO 9	
KIND OF CONVEYANCE		TRUCK	
SIGNATURE OF SHIPPER		 Capt. G.M.C. 01585944 JOHN E. MURPHY G.M.C.	
DATE		24 FEB 1949	
NAME OF CONVOYER		HAWN DIST CENTER	
SIGNATURE OF RECEIVER		 JAMES B. HARRIS CAPTAIN G.M.C.	
DATE		FEB 24 1949	
1. SHIPPED			
FROM			
KIND OF CONVEYANCE			
SIGNATURE OF SHIPPER			
DATE			
NAME OF CONVOYER			
SIGNATURE OF RECEIVER			
DATE			
2. SHIPPED			
FROM			
KIND OF CONVEYANCE			
SIGNATURE OF SHIPPER			
DATE			
NAME OF CONVOYER			
SIGNATURE OF RECEIVER			
DATE			
3. SHIPPED			
FROM			
KIND OF CONVEYANCE			
SIGNATURE OF SHIPPER			
DATE			
NAME OF CONVOYER			
SIGNATURE OF RECEIVER			
DATE			
4. SHIPPED			
FROM			
KIND OF CONVEYANCE			
SIGNATURE OF SHIPPER			
DATE			
NAME OF CONVOYER			
SIGNATURE OF RECEIVER			
DATE			
5. SHIPPED			
FROM			
KIND OF CONVEYANCE			
SIGNATURE OF SHIPPER			
DATE			
NAME OF CONVOYER			
SIGNATURE OF RECEIVER			
DATE			
6. SHIPPED			
FROM			
KIND OF CONVEYANCE			
SIGNATURE OF SHIPPER			
DATE			
NAME OF CONVOYER			
SIGNATURE OF RECEIVER			
DATE			
7. SHIPPED			
FROM			
KIND OF CONVEYANCE			
SIGNATURE OF SHIPPER			
DATE			
NAME OF CONVOYER			
SIGNATURE OF RECEIVER			
DATE			



## IDENTIFICATION DATA

1. REMAINS OF UNKNOWN <b>X-308 GUADALCANAL</b>				2. DATE OF REPORT <b>18 February 1948</b>	
3. NAME OF CEMETERY <b>U. S. Army Mausoleum # 1 Formerly of Guadalcanal</b>	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	<b>D</b>	<b>A</b>	<b>95</b>	DISINTERMENT	REINTERMENT
				<b>17 Feb '48</b>	<b>18 Feb '48</b>

PHYSICAL DESCRIPTION			Approx. Age:	35 - 40
8. ESTIMATED WEIGHT <b>120 - 125 lbs.</b>	9. ESTIMATED HEIGHT <b>166 - 65.36 - 5' 5-3/8"</b>	10. COLOR OF HAIR <b>UTD</b>	11. RACE <b>UTD</b>	

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS  
**One (1) embossed plate reading: Unknown X-308, Plot - D, Row - 175, Grave - 6**

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

UNIDENTIFIABLE

**None.**

**CYRIL C. DISNEY**  
**1st. Lt., EA O-1167395** *Cyril C. Disney 20 Jan 1949*

14. WAS BODY BURNED? TO WHAT EXTENT?  
 YES  NO

15. WAS BODY MANGLED? TO WHAT EXTENT?  
 YES  NO

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

**All bones show considerable arthritic exostoses, particularly of tibial tubercles and in knee caps and ankle joints.  
 A single Inca bone is present.  
 Wormian bones at lambda.  
 All long bones show a pitted condition.**

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. 51*

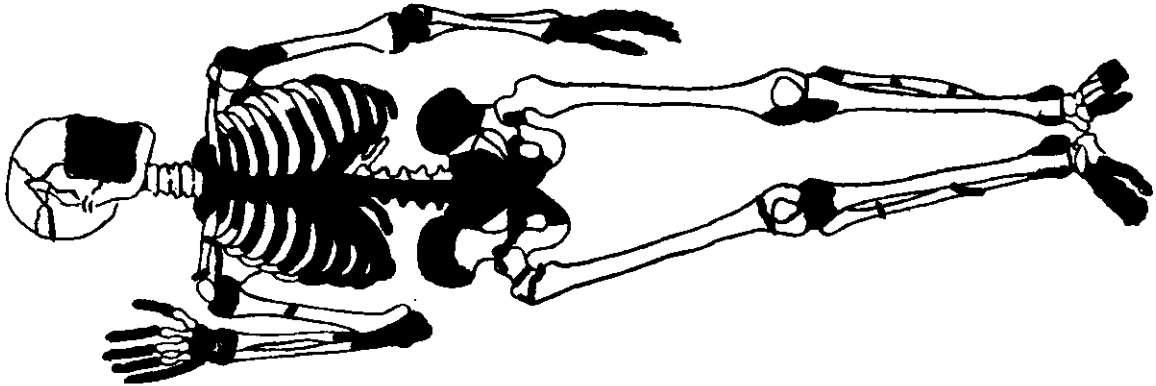
18. TOOTH CHART		TOP VIEW	SIDE VIEW
<p><b>MISSING TEETH:</b> ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED THUS: Unknown X-308</p>		<p>TOOTH MISSING</p>	
<p><b>CROWNED TEETH:</b> BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS: Gusdalcanal</p>		<p>Gold Crown, Porcelain Crown</p>	
<p><b>BRIDGE WORK:</b> BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:</p>		<p>Gold Bridge</p>	
<p><b>FILLINGS:</b> DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:</p>		<p>Gold Filling, Silver Filling</p>	
<p><b>CARIES (Cavities):</b> OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:</p>		<p>Cavity, Decayed</p>	

RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
<b>MAXILLA + TEETH MISSING</b>															
Side Views															
Top Views															
Side Views															
16 15 14 13 12 11 10 9 9 10 11 12 13 14 15 16															

**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."

Remarks:  
1. All teeth are extracted on mandible. No evidence of denture present.

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.

Charles E. Snow, SIGNATURE OF MEDICAL OFFICER Anthropologist

21. REMARKS AND ADDITIONAL INFORMATION

Picture a short, slight, older man at least thirty-seven (37) or thirty-eight (38) and probably older. The remains are characterized by a number of peculiarities which are mentioned below.

The skull vault is fragmentary, extremely small, oval in outline and relatively high. The backhead is quite narrow and has small projection. The forehead appears to have been upright and was high. The face is missing, except the mandible, which is edentulous; indeed, the alveolar height is only about 1.5 CM. The mandible suggest a wide, short face with considerable fullness of jaw angles. The chin is a fairly broad, rounded region.

The femoral shafts show great development of pilasters. The tibia present backward tilting of the head, lateral thinning of the shafts, anterior bowing and presence of squatting facets. These last features are found in primitive habits.

The man walked with a bent knee gait and squatted.

It is suggested that this may be the remains of a native rather than a white man.

Teeth charted. Fluoroscope examination negative.

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

O. W. GREENWOOD, CAPT., QMC

**CENTRAL IDENTIFICATION LABORATORY**

**AND MAUSOLEUM, APO 957**

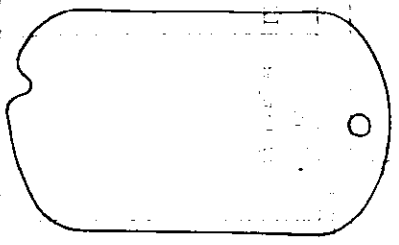
**CENTRAL IDENTIFICATION LABORATORY & MUSEUM  
BONE LIST**

NAME	SIDE	NO	BONE LENGTHS IN CM	REMARKS (IF MISSING OR FRACTURED, LIST PARTS AND LOCATION)
SKULL		1	45.4	Multiple fracture.
VERTEBRAE	CERVICAL	2		Fragments.
	THORACIC	5		Fragments.
	LUMBAR	3		Fragments.
SACRUM		1		Fragments.
INNOMINATES	RIGHT	1	BI-ILIAC DIAM	Fragments.
	LEFT	1		Fragments.
RIBS		13		Fragments.
STERNUM		0		
CLAVICLES	RIGHT	1		Fragments.
	LEFT	1		Fragments.
SCAPULAE	RIGHT	1		Fragments.
	LEFT	1		Fragments.
HUMERI	RIGHT	1		Fragments.
	LEFT	1		Fragments.
RADII	RIGHT	1		Fragments.
	LEFT	1		Fragments.
ULNAE	RIGHT	1		Fragments.
	LEFT	1		Fragments.
HANDS	RIGHT	1		#1 & 4 metacarpals and navicular.
	LEFT	1		#2 metacarpals
FEMORA	RIGHT	1		
	LEFT	1	(45.2)	
PATELLAE	RIGHT	1		
	LEFT	1		
TIBIAE	RIGHT	1		
	LEFT	1	(36.5)	
FIBULAE	RIGHT	1		
	LEFT	1		
FEET	RIGHT	1		Talus, cuboid #1 cuneiform & #4 metatarsals.
	LEFT	1		Talus, cuboid, calcaneous #3,4,5 metatarsals.

HUMERO-CLAVICULAR RATIO		APPROXIMATE	
ESTIMATED HEIGHT	166 - 65.36 5' 5-3/8"	AGE	35 - 40 YEARS
ESTIMATED WEIGHT	120 - 125 lbs.	LEG-HIP BR RATIO	

*Charles E. Snow*  
Charles E. Snow  
ANTHROPOLOGIST

ENCLOSURE TO: X-308 GUADALCANAL

<b>WD OMC FORM 1042</b> Rev. 1 February 1945 (Supersedes form dated 3 Feb. 1945. Existing stocks may be used until exhausted.)		<b>REPORT OF INTERMENT</b> (TM 10-630 and AR 30-1815)		DATE REPORT FILLED OUT 15 Nov 1945	
For Imprint of Identification Tag 		NAME (Last, First, Middle Initial) Unknown X-308			
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 FINGERPRINT CHART OF BOTH HANDS 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: Body found in isolated grave approximately 3 miles inland from Kukum.					
LIST OF PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME. No identification found. Only skelton remained. No tooth Chart could be taken.  No personal effects 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 Sept 1945	HOUR 1015	PLOT NO. D	ROW NO. 175	GRAVE NO. 6	GRAVE MARKER Wooden Cross
TYPE OF RELIGIOUS CEREMONY General service			PERSON REPORTING BURIAL /s/ T/S Willaim H. Tussey		
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.					
<b>BODIES BURIED EITHER SIDE (See Paragraph 2 on Reverse)</b>					
BODY ON LEFT, NAME (Last, First, Middle Initial) Bennett, Gene V.		RANK Unknown	SERIAL NO. Unknown	ORGANIZATION US NAVY	GRAVE NO. 5
BODY ON RIGHT, NAME (Last, First, Middle Initial) Smith, Ollie R.		RANK Pvt	SERIAL NO. 956447	ORGANIZATION 30th Mar. Div.	GRAVE NO. 7
PERSON CONDUCTING BURIAL RITES Chaplain Cox. Chaplain Zimmerer			VERIFIED BY G. R. S. OFFICER /s/ (Signature Illegible) 1st Lt., OMC /t/ FOR John R. Nolan, 1st Lt., OMC		
IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCES ON REVERSE					
<b>INSTRUCTIONS FOR FILLING OUT BURIAL REPORT:</b> PREPARE IN QUADRUPLICATE 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.					
<b>OVER FOR BURIAL INSTRUCTIONS</b>					

**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 feet. 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 (teen, spent shell or other available container, bury one with remains and the other one, make a notation of identifying data in duplicate on form; place in burial bottle, cam-teen, spent shell or other available container, bury one with remains and the other one, 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 SILVER FILLING	CAVITIES CAVITY	MISSING TEETH TOOTH MISSING	CROWNED TEETH PORCELAIN CROWN GOLD CROWN	BRIDGE WORK GOLD BRIDGE
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DIAGRAM REPRESENTS THE MOUTH WIDE OPEN

A TRUE COPY

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

SKETCH AND MAP REFERENCE

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

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

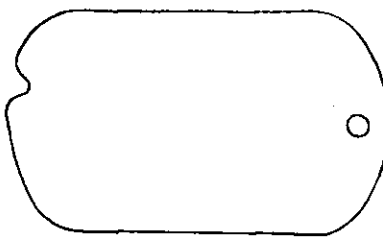
REPORT OF INTERMENT  
 (TM 10-630 and AR 30-1815)

9215  
 DATE REPORT FILLED OUT

15 Nov 1945

For Imprint of Identification Tag

NAME (Last, First, Middle Initial)



Unknown X-308

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.

Body found in isolated grave approximately 3 miles inland from Kukum.

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

No personal effects found.

No identification found. Only skeleton remained. No tooth Chart could be taken.

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 Sept 45 <i>Reburial</i>	HOUR 1015	PLOT NO. D	ROW NO. 175	GRAVE NO. 6	GRAVE MARKER Wooden Cross.
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TYPE OF RELIGIOUS CEREMONY  
 General Services.

PERSON REPORTING BURIAL

T-5 William H. Tussay

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) Bennett, Gene V.	RANK Unknown	SERIAL NO. Unknown	ORGANIZATION US Navy	GRAVE NO. 5
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PERSON CONDUCTING BURIAL RITES

Chaplain Cox.  
 Chaplain Zimmerer

VERIFIED BY G. R. S. OFFICER

*[Signature]* JOHN R. NOLAN  
 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

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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.

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

FILLINGS



CAVITIES



MISSING TEETH



CROWNED TEETH



BRIDGE WORK

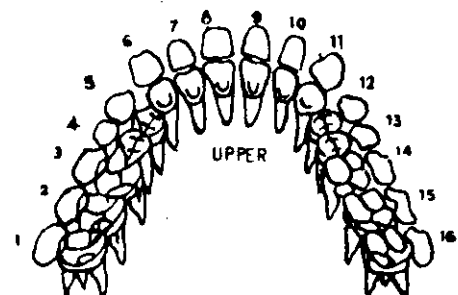
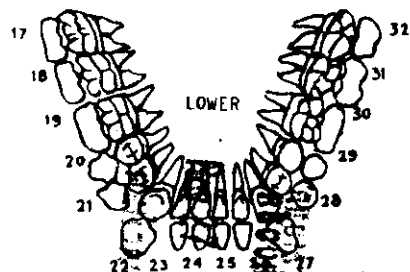
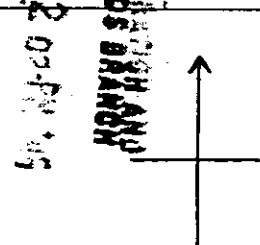


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



SKETCH AND MAP REFERENCE



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

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	



IDENTIFICATION SECTION  
REPATRIATION RECORDS BRANCH  
MEMORIAL DIVISION

CATEGORY III CASE  
NO CLUES  
IDENTIFICATION IMPOSSIBLE  
AT PRESENT TIME