QMGMT 293

1st Ind

GRS Pacific

SUBJECT: Resolution of Unidentified Kemains

DEPARTMENT OF THE ARMY, QMG, WASHINGTON 25, D. C. 11 January 1949

TO: Commanding Officer, American Graves Registration Service, Pacific Zone, APO 958, 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 Reference is made to basic communication and inclosures, withdrawn.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 concurs in the classification of Unknowns $^{\lambda}$ -95, $^{\chi}$ -99, $^{\chi}$ -118, $^{\chi}$ -312, $^{\chi}$ -314, and $^{\chi}$ -320, all formerly Guadalcanal, as unidentifiable.

FOR THE QUARTERMASTER GENERAL:

6 Incls: w/d

T. H. METZ It. Colonel, QMC Memorial Division

COPY

1-3/2

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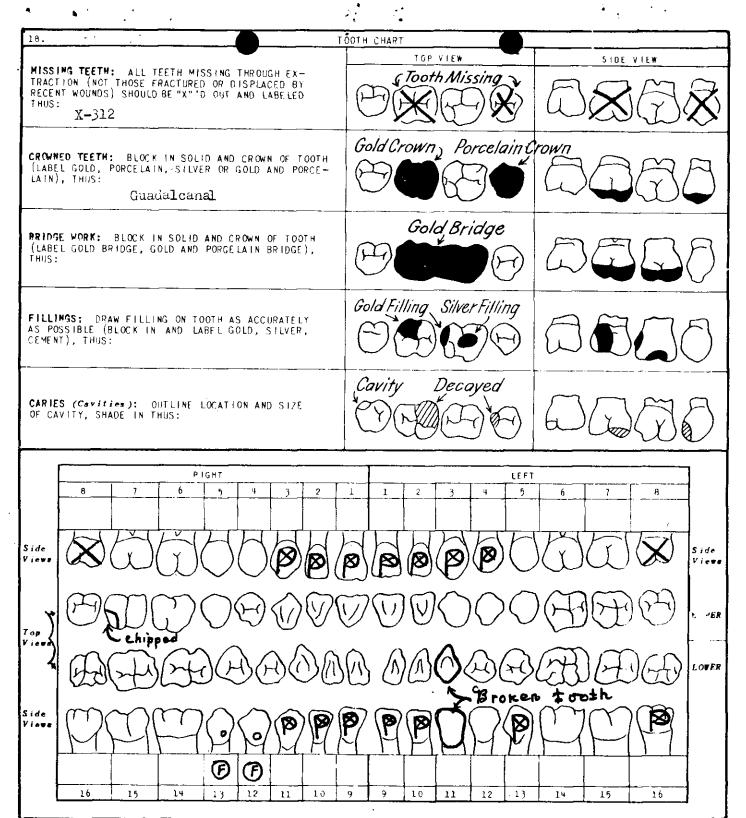
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MAJOR DISCREPANCY			_	• • •		
IDENTIFIC	ATION D	ATA				
1. REMAINS OF UNKNOWN				2. DATE OF REPORT		
Unknown X-312 Guadalcanal				30 March 1948		
3. NAME OF CENETERY	4. PLOT	5 ROW	6. GRAVE	7. DATE OF		
U. S. Army Mausoleum #1		B	22	DISINTERMENT REINTERMENT		
Formerly of				30 Mar '48 30 Mar '48		
Guadalcanal	С	174	3			
PHYSICAL	DESCRIPTIO	n Age 24	to 26	years.		
8. ESTIMATED WEIGHT 9. ESTIMATED HEIGHT	10. COLO	R OF HAIR		11. RACE		
145 to 150 lbs. 170.0-66.9-5'6 7/8"	τ	J. T. D.		Probably Mongoloid		
One (1) embossed plate on casket reads: One (1) embossed plate with remains read	s: Unknov	vn X-312	, Plot-	C, Row-174, Grave-3.		
None BY REASON OF LACK OF STATE OF THE COLUMN THE STATE OF THE COLUMN THE STATE OF	USFICI	ENT IC	ENTIF	EYING DATA		
14. WAS BODY BURNED? TO WHAT EXTENT?	78. K	Dune	1 4.	2 Lbe 1948		
TYES NO						
15. WAS BODY MANGLED? TO WHAT EXTENT?						
16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALF	ORMATIONS			•		

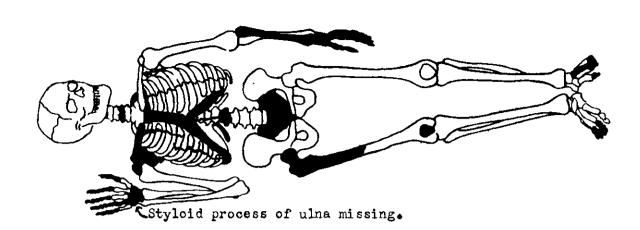
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

One (1) brown pig-skin New Zealand, hob-nail shoe (no markings).

None



DENTURES (Places): DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETS ATTACHED AND IMPRICATE RETAIN-ING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."



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

_ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF ___ NUMBER

OF THE FOLLOWING ANATOMICAL PARTS:

One (1) extra left scapula.

One (1) extra right femora.

One (1) extra left talus.

One (1) extra left cuboid.

One (1) extra # 1 metatarsal.

One (1) extra # 4 metatarsal.

One (1) extra # 5 metatarsal.

Paul L. Gravenor Venature of MEDICAL OFFICER Lab Supervisor

21. REMARKS AND ADDITIONAL INFORMATION

Picture a fairly short, rather slender young man in his middle twenties.

The skull is average in size, broad oval in outline.

The forehead is quite broad with average slope and height.

The face is quite long and rugged, suggesting considerable facial muscularity. The nasal bones are quite low, long and suggest that the nose appears rather flat in relation to the face.

The upper jaw presents moderate alveolar prognathism.

The palate is quite short and wide.

The lower jaw is heavy in structure and very deep with a smoothly rounded chin.

The chin is very receding.

The general flatness of the facial features, heavyness of the jaw structures, and the excellence of the teeth, suggest the possibility of Mongoloid Ancestry.

The extra bones mentioned in item 20 have been classified as C.I.L. Unknown X-648.

Fluoroscopical 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

CENTRAL IDENTIFICATION LABORATORY ND MAUSOLEUM, APO 957

Owyrumon

	CENTRAL			LABORATORY & SOLEUM			
NAME	SIDE	NO	BONE LENGTHS IN CM	REMARKS (IF MISSING OR FRACTURED, LIST PARTS AND LOCATION)			
SKULL		1	53.3				
 	CERVICAL	6		#6 missing.			
VERTEBRAE	THORACIC	8		Slightly fractured: 4 missing.			
	LUMBAR .	4		# 1 missing.			
SACRUM		0		Missing.			
INNOMINATES	RIGHT 1	1	BI-TLIAC DIAM				
INNOMINATES	LEFT	1					
RIBS		22		Fractured: 2 missing.			
STERNUM		1		All missing except manubrium.			
	RIGHT	0		Missing.			
CLAY ICLES	LEFT	1	14.8	Sternal extremity fractured.			
	RIGHT	0	11.0	Missing.			
SCAPULAE	LEFT	1		Fractured.			
	RIGHT	1	32.7	110001000			
HUMERI	LEFT	1	32.5				
	RIGHT	ī	22.8				
RADII	LEFT	0		Missing.			
	RIGHT	1	approx 26.8	Styloid process missing.			
ULNAE	LEFT	1	26.6				
HANDS	RIGHT	1		All missing except metacarpals #1,2,3 & 5.			
	LEFT	0		Missing.			
FEMORA	RIGHT	1		Upper 1/2 missing.			
	LEFT	1	47.4				
PATELLAE	RIGHT	0		Missing.			
<u> </u>	LEFT	1	75.0				
TIBIAE	RIGHT	1	37.6				
	LEFT	1	37.8				
FIBULAE	RIGHT		36.7	 			
· — · · — · · · · · · · · · · · · · · ·	LEFT RIGHT	1	37.1	All present except a few phalances.			
FEET		1		All present except a few phalanges. All present except cuneiforms #1,2,3,			
	LEFT	<u> </u>		metatarsals #3 % 5 and a few phalanges.			
	HUMERO-CLAVICULAR RATIO 42.6 APPROXIMATE						
170.0 66 EST IMATED HEIGHT	6.9 5'6 7/8*		AGE 24 t	50 26 YEARS			
ESTIMATED WEIGHT 145 to 150 1bs. LEG-HIP BR RATIO							
ENCLOSURE TO: Unknown X-312 Guadalcanal Paul IX Gravenor Lab Supervisor ANTHROPOLOGIST							

GP - AGRS 2 1

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NARRATI VE

Unknown 4-312, Plot-C, Row-174, Grave-3, (Guadalcanal) Box-22.

The above mentioned case was given a complete processing, and during the coarse of processing it was found to consist of the following extra skeletal parts:

- One (1) extra left scapula.
- One (1) extra right femora.
- One (1) extra left talus.
- One (1) extra left cuboid.
- One (1) extra 🖆 1 metatarsal.
- One (1) extra # 4 metatarsal.
- One (1) extra # 5 metatarsal.

The remains of:

Unknown X-313, Plot-C, Row-174, Gr-4; (Guadalcanal) (R-C, Gr-17). was checked in an effort to associate the extra parts, but no association was possible.

Therefore they have been removed and classified as C.I.L. 648.

ND QMC FORM 1042	DEDART AF	LUTERMENT		/DATI	E REPORT	FILLED OUT		
Rev. 1 February 1945 (Supersemes form dated	WEPUK! UF	INTERMENT		- / • // •				
3 Jan. 1945. Existing stocks	(TM 10-630 an	d AR 30-18	15/ 🗹 🗀	uh 1	5 Nov 1	1945		
may be used until exhausted.)	• • • • • • • • • • • • • • • • • • • •		7	17				
For Imprint of Identification Tag	NAME (Last, Pirst, Wi	ddle Initial)						
	Unknown X-312							
)	RANK	SERIAL NUMBE	R		COUNTR			
	Unknown	Unknown			Unkn	own		
\	ORGANIZATION Unknown		BRANCH Unknown					
	RACE	RELIGION			DATE	F DEATH		
	Unknown Unknown				Unkn			
PLACE OF DEATH		CAUSE OF DEA	ATH .	,				
Guadalcanal B.S.I.		Unkno	own					
IDENTIFICATION TAGS FOUND ON BODY		IF NO IDENTI	FICATION T	AGS, OTHER ME	ANS USED	TO IDENTIFY		
1 2	XX NONE	BODY (Identi	fication C	arda, Lettera	, etc.)			
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				map #104.				
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		T						
NAME OF EMERGENCY ADDRESSEE		ADDRESS OF EMERGENCY ADDRESSEE Unknown						
Unknown NAME, NUMBER AND LOCATION OF CEMET		Unknown						
		T						
Army Navy Marine Cemetery			- 101	AUE WARKER				
Rehuriel 1400	OT NO. ROW NO. C 174	GRAVE NO.		RAVE MARKER				
12 Oct 1945 1400 TYPE OF RELIGIOUS CEREMONY	0 1/4	·		Mooden Cro				
		PERSON REPOR						
Catholic, Protestant, Jev	·	/s/ T/ 5		m H. Tusse				
IDENTIFICATION TAGS BURIED WITH BO		ATTACHED TO			YES			
IF IDENTIFICATION TAGS NOT PRESENT	Γ, WHAT OTHER IDENTIFIC	ATION DATA BUR	RIED WITH E	BODY AND IN WE	IAT KIND (OF CONTAINERS.		
								
	DIES BURIED EITHER SIDE							
BODY ON LEFT, NAME (Last, First, &	liddle Initial)	RANK	SERLAL NO.		ZATION	GRAVE NO.		
Unknown X-311		Unknown	Unkn w		nown	2		
BODY ON RIGHT. NAME (Last, First,	Middle Initial)	RANK	SERIAL NO.		ZATION	GRAVE NO.		
Unknown X-313		Unknown	Unknow		nown	4		
PERSON CONDUCTING BURIAL RITES		VERIFIED BY			_	_		
Chaplain Julius Krawetz	•	/s/ Raymo	and T_{\bullet} M	anuel, lst	Lt., (OMC		
Chaplain Franklin H. Boar	-d			Nolan, ls				
Chaplain John P. Morrisey								
	N ESTABLISHED CEMETERY	FURNISH SKETC	H AND MAP	REFERENCES ON	REVERSE			

INSTRUCTIONS FOR FILLING OUT BURIAL REPORT: 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.

OVER FOR BURIAL INSTRUCTIONS

		•	
a	E		INSTRUCTIONS FOR INSTRUCTIONS FOR
	Left ttle 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 preperty. 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, can-
	Left Ring Finger	Then unidenti	teen, 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 hunds or those remaining fingers. If none are available, fill out tooth chart if possible, and note:
	Left Middle Fi	fied, to	HEIGHT WEIGHT COLOR OF BYES COLOR OF HAIR BIRTHMARKS, SCARS OR TATTOOS
	ft Finger	ake thumb	WBAPON AND SERIAL NUMBER LAUNDRY MARKS WHERE BODY WAS BURIED
	Left Index Finger	and	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 Thumb	rprints of	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
		both hand	chart, in accordance with diagram. FILLINGS SHEVER FILLING FOLD FILLING 7 8 10 0 11
	Right Thumb	s - if thi	CAVITIES CAVITY DECAYED 12 13 UPPER 14 15
	Right Index Finger	s is not possi	MISSING TEETH TOOTH MISSING DIAGRAM REPRESENTS THE MOUTH WIDE OPEN
	Right Middle Finger	ible fill in	PORCELAIN CROWN GOLD CROWN 19 LOWER 20 MANN 29
		tooth ch	GOLD BRIDGE 21 0000 22 23 24 25 24 27 SKETCH AND MAP REFERENCE
	Right Ring Finger	chart.	A TRUE COPY
	Right Little Finger		E.A. Miller Jr Job

WU QMC FORM 1042							DATE REPORT	FILLED OF
Rev. 1 February 1945 (Supersedes form date	n d	R	EPORT OF	INTERMENT	·		* .	٠_
3 Jan 1945 Existing may be used until exh	g stocks	(TM I	nd AR 30-1815)				1 945	
For Imprint of Identi	fication T	ad NAME (Last,	. First, Mi	ddle Initial)	<u>-</u>		<u> </u>	<u> </u>
		Unkno	wn X-31					
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Guadalca	anal B.S	•I•				Unknown		
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LIST ANATOMICAL CHARA	CTERISTICS	AND OTHER DATA	IF FINGER					
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		•		Gu	adalcar	nal map	#104 . Çòo	rdinate
LIST OF PERSONAL EFFE	CTS FOUND	ON BODY AND DIS	POSITION O	F SAME. 71	·7-195	7. No	means of	identif
					on four	id. Pro	bably the	body o
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NAME OF EMERGENCY ADD				ADDRESS OF E	MERGENCY	ADDRESSEE		· · · · · · -
NAME OF EMERGENCY ADD				ADDRESS OF E				
NAME OF EMERGENCY ADDR UNIXO NAME, NUMBER AND LOCA	own	METERY.		ADDRESS OF E		ADDRESSEE		
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Unkno NAME, NUMBER AND LOCA Army Navy L	own ATION OF CE Marine C		ROW NO.	BeSele GRAVE NO.	Unl	mown Grave Marki		
Unkno NAME, NUMBER AND LOCA Army Navy I DATE OF BURIAL H	own Marine C	emetery Gua		B.S.I.	Unl	mown Grave Marki	R n Cross.	
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OVER FOR BURIAL INSTRUCTIONS

I.		INSTRUCTIONS FOR LIAL
Left		1: PREPARATION OF BODY, BURIAL, AND MARKINGS OF GRAVE: Have body examined by a member of the medical detachment and attach BMT 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 lose of
Left Ring Fin	When unidenti	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 duta in duplicate on form; place in burial bottle, comteen, 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 thum	HBIGHT WEIGHT COLOR OF BYES COLOR OF HAIR BIRTHMARKS, SCARS OR TATTOOS WEAPON AND SERIAL NUMBER LAUNDRY MARKS , WHERE BODY WAS BURIED
Left Index Finge	b and	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 Burn
Left Thumb	prints of bo	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.
Right Thumb	th hunds - if thi	CAVITIES SILVER FILLING SOLD FILLING 10 11 12 13 UPPER 14
Right Index Finger	s is not possi	MISSING TEETH TOOTH MISSING DIAGRAM REPRESENTS THE MOUTH WIDE OPEN
Right Widdle Finger	ible fill in too	PORCELAIN CROWN GOLD CROWN BRIDGE WORK GOLD BRIDGE GOLD BRIDGE 29 29 29 20 20 20 20 20 20 20
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