

1

*Returned  
Q-1110*

DISINTERMENT DIRECTIVE

SECTION A —  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER  
8730 00000

DATE  
21 11 49  
DAY MONTH YEAR

NAME UNKNOWN X-323 SERIAL NUMBER GRADE ARM 8 RACE 0 RELIGION 6

CEMETERY (GUADALCANAL) SOLOMON ISLANDS PLOT F ROW 200 GRAVE 2 DISPOSITION OF REMAINS 0492 64  
CODE DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE  
NATIONAL MEMORIAL CEMETERY  
OF THE PACIFIC  
TERRITORY OF HAWAII

NAME AND ADDRESS OF NEXT OF KIN  
(BY ADMINISTRATIVE DECISION)

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER GRADE DATE OF DEATH DATE DISTINTERRED

IDENTIFICATION TAG ON ORGANIZATION UNKNOWN RELIGION IDENTIFICATION VERIFIED BY  
 REMAINS  
 MARKER NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)

**CHANGE**

REMAINS PREPARED AND PLACED IN CASKET

DATE

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 AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS  
REMAINS ARE UNIDENTIFIABLE.

**FILE**  
DEC 9 1949  
*Amosmith  
Rec Sec*

*Ind 2! [unclear]*

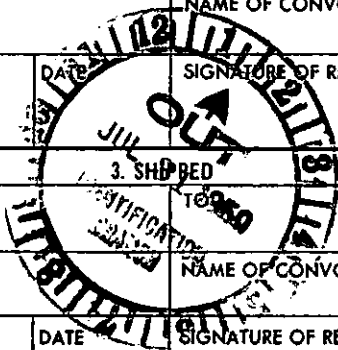
# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

FROM FEDERAL BUREAU OF INVESTIGATION		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

## 2. SHIPPED

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



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 FEDERAL BUREAU OF INVESTIGATION		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

## DISINTERMENT DIRECTIVE

2

SECTION A —  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

8730 00000

DATE

21 11 49  
DAY MONTH YEAR

NAME

UNKNOWN X-323

SERIAL NUMBER

GRADE

ARM

8

RACE

0

RELIGION

6

CEMETERY

GUADALCANAL SOLOMON ISLANDS

PLOT

F

ROW

200

GRAVE

2

DISPOSITION OF REMAINS

0492  
CODE64  
DIST. CTR.

## SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

NATIONAL MEMORIAL CEMETERY  
OF THE PACIFIC  
TERRITORY OF HAWAII

NAME AND ADDRESS OF NEXT OF KIN

(BY ADMINISTRATIVE DECISION)

## SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

GRADE

DATE OF DEATH

DATE DISTINTERRED

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

NAME AND TITLE

- 
- REMAINS
- 
- 
- MARKER

UNKNOWN

## SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)

REMAINS PREPARED AND PLACED IN CASKET

DATE

CASKET SEALED BY

BY

EMBALMER (Signature)

CASKET BOXED AND MARKED

DATE

BY

SHIPPING ADDRESS VERIFIED 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 AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

REMAINS ARE UNIDENTIFIABLE.

FILE  
DEC 9 1949Amos...  
Rea Sec

# RECORD OF CUSTODIAL TRANSFER

DEC 2 1970  
C. J. F.

## 1. SHIPPED

FROM LEONINE M. AND CHERIE M. ...		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

## 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 LEONINE M. AND CHERIE M. ...		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

A I R M A I L

QMOMT 293  
GRS Pacific 1st Ind.  
SUBJECT: Resolution of Unidentified Remains

Department of the Army, OOMG, Washington 25, D. C. 15 April 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 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-61, 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-868, X-872, X-873, X-874, X-875, X-893, X-902, formerly Shanghai Remains Depot; X-7, formerly Enrylabegan; X-30, formerly Kunming; 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, QMC  
Memorial Division

S. Morgan:lrc  
Salser  
JW  
cc--Administrative Section

A I R M A I L

X 293  
cont. Salser  
S. Morgan (Guadalcanal)  
X-315

REB  
HJS

C O P Y

A I R M A I L

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
(PACIFIC ZONE)  
APO 958

INREG 263

JAN 24 1949

SUBJECT: Resolution of Unidentified Remains

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

1. Enclosed herewith eighty-three (83) QMC Forms 1044 for Kuming, Shanghai, Rezzano Depot, Guadalcanal, Barrackpore, Shanghai and Emgylabagan Cemeteries, stamped and signed in accordance with letter, DA CREG, QMCNU 293 GRS (Pacific Zone), Subject: Resolution of Cases of Unidentified Deceased, dated 22 September 1948.

2. Acknowledgment of receipt is requested.

FOR THE COMMANDING OFFICER:

Horace Mann  
s/ HORACE MANN  
Captain, QMC  
Chief, RR Div

85 Incls

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

A I R M A I L

RRHC 253

SUBJECT: Resolution of Unidentified Remains

33 Encls

0. QIC Form 1044-1044a-1044b-Bone List  
X-33 Guadalcanal
1. QIC Form 1044-1044a-1044b-Bone List  
X-35 Guadalcanal
2. QIC Form 1044-1044a-1044b-Bone List  
X-40 Guadalcanal
3. QIC Form 1044-1044a-1044b-Bone List-Fluoroscopical Findings  
X-41 Guadalcanal
4. QIC Form 1044b-1044a-1044b-Bone List  
X-52 Guadalcanal
5. QIC Form 1044-1044a-1044b-Bone List  
X-53 Guadalcanal
6. QIC Form 1044-1044a-1044b-Bone List  
X-54 Guadalcanal
7. QIC Form 1044-1044a-1044b-Bone List  
X-56 Guadalcanal
8. QIC Form 1044-1044a-1044b-Bone List  
X-61 Guadalcanal
17. QIC Form 1044-1044a-1044b-Bone List  
X-60 Guadalcanal
18. QIC Form 1044-1044a-1044b-Bone List  
X-91 "A" Guadalcanal
19. QIC Form 1044-1044a-1044b-Bone List  
X-91 "B" Guadalcanal
20. QIC Form 1044-1044a-1044b-Bone List  
X-104 Guadalcanal
21. QIC Form 1044-1044a-1044b-Bone List  
X-117-Guadalcanal
22. QIC Form 1044-1044a-1044b-Bone List  
X-177 Guadalcanal
23. QIC Form 1044-1044a-1044b-Bone List  
X-182-Guadalcanal
24. QIC Form 1044-1044a-1044b-Bone List  
X-183 Guadalcanal
25. QIC Form 1044-1044a-1044b-Bone List  
X-190 Guadalcanal
26. QIC Form 1044-1044a-1044b-Bone List  
X-195 Guadalcanal
27. QIC Form 1044-1044a-1044b-Bone List  
X-94 Guadalcanal
28. QIC Form 1044-1044a-1044b-Bone List  
X-217 Guadalcanal
29. QIC Form 1044-1044a-1044b-Bone List  
X-219-Guadalcanal
30. QIC Form 1044-1044a-1044b-Bone List  
X-220 Guadalcanal
31. QIC Form 1044-1044a-1044b-Bone List  
X-225 Guadalcanal

RRREC 295

SUBJECT: Resolution of Unidentified Remains

83 Incis

- 32. QMC Form 1044-1044a-1044b-Bone List-  
X-226-Guadalcana1
- 33. QMC Form 1044-1044a-1044b-Bone List-  
X-235-Guadalcana1
- 34. QMC Form 1044-1044a-1044b-Bone List-  
X-237-Guadalcana1
- 35. QMC Form 1044-1044a-1044b-Bone List-  
X-242-Guadalcana1
- 36. QMC Form 1044-1044a-1044b-Bone List-  
X-243-Guadalcana1
- 37. QMC Form 1044-1044a-1044b-Bone List-  
X-244-Guadalcana1
- 38. QMC Form 1044-1044a-1044b-Bone List-  
X-245-Guadalcana1
- 39. QMC Form 1044-1044a-1044b-Bone List-  
X-247-Guadalcana1
- 40. QMC Form 1044-1044a-1044b-Bone List-  
X-249-Guadalcana1
- 41. QMC Form 1044-1044a-1044b-Bone List-  
X-250-Guadalcana1
- 42. QMC Form 1044-1044a-1044b-Bone List-  
X-255-Guadalcana1
- 43. QMC Form 1044-1044a-1044b-Bone List-  
X-277-Guadalcana1
- 44. QMC Form 1044-1044a-1044b-Bone List-  
X-281-Guadalcana1
- 45. QMC Form 1044-1044a-1044b-Bone List-  
X-282-Guadalcana1
- 46. QMC Form 1044-1044a-1044b-Bone List-  
X-285-Guadalcana1
- 47. QMC Form 1044-1044a-1044b-Bone List-  
X-287-Guadalcana1
- 48. QMC Form 1044-1044a-1044b-Bone List-  
X-288-Guadalcana1
- 49. QMC Form 1044-1044a-1044b-Bone List-  
X-290-Guadalcana1
- 50. QMC Form 1044-1044a-1044b-Bone List-  
X-291-Guadalcana1
- 51. QMC Form 1044-1044a-1044b-Bone List-  
X-293-Guadalcana1
- 52. QMC Form 1044-1044a-1044b-Bone List-  
X-295-Guadalcana1
- 53. QMC Form 1044-1044a-1044b-Bone List-  
X-296-Guadalcana1



RRREC 293

SUBJECT: Resolution of Unidentified Remains

## 83 Incls

54. QMC Form 1044-1044a-1044b-Bone List-  
X-297-Guadalucaanal
55. QMC Form 1044-1044a-1044b- Bone List-  
X-298 Guadalucaanal
56. QMC Form 1044-1044a-1044b-Bone List-  
X-301-Guadalucaanal
57. QMC Form 1044-1044a-1044b-Bone List-  
X-304-Guadalucaanal
58. QMC Form 1044-1044a-1044b-Bone List-  
X-308-Guadalucaanal
59. 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-1044c-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-868-Remains Depot
65. QMC Form 1044-1044a-1044b-Bone List-  
X-872-Remains Depot
66. QMC Form 1044-1044a-1044b-Bone List-  
X-873-Remains Depot
67. QMC Form 1044-1044a-1044b-Bone List-  
X-874-Remains Depot
68. QMC Form 1044-1044a-1044b-Bone List-  
X-875-Remains Depot
69. QMC Form 1044-1044b-Bone List X-902-  
Remains Depot.
70. QMC Form 1044-1044a-1044b-Bone List-  
X-7-Ennlabegan
71. QMC Form 1044-1044a-1044b-Bone List-  
X-80 Kanning
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-245-Barrackpore
75. QMC FORM 1044-1044a-1044b-Bone List X-149-  
"A" Barrackpore.

AIR MAIL

RRREC 293

SUBJECT: Resolution of Unidentified Remains

83 Incls

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

AIR MAIL

Of THE PACIFIC  
Interred 27 June 1949  
1110

DISINTERMENT DIRECTIVE

ALVAN C. BAKER Cemetery Superintendent

1

SECTION A - NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER 8730.00000	DATE 26 09 47 DAY MONTH YEAR	
NAME UNKNOWN		SERIAL NUMBER X-323	RANK	ARM Q
CEMETERY GUADALCANAL		DATE OF DEATH		DISPOSITION OF REMAINS 0492 64 CODE DIST. PT.
PLOT F200	ROW 2	GRAVE 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
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SECTION C - DISINTERMENT AND IDENTIFICATION

NAME UNKNOWN X-323 Guadalcanal	SERIAL NUMBER Unk.	RANK Unk.	DATE OF DEATH Unk.	DATE DISTINTERRED 3 Mar 49
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	ORGANIZATION	RELIGION Unk.	IDENTIFICATION VERIFIED BY H. Mann, CAPT, QMC NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Temporary Casket	CONDITION OF REMAINS Skeletal
--------------------------------------	----------------------------------

OTHER MEANS OF IDENTIFICATION  
QMC FORM 1042 & Letter, QMGMO 293, dated 27 June 1947

MINOR DISCREPANCIES  
None

REMAINS PREPARED AND PLACED IN CASKET

DATE 3 Mar 49 CASKET SEALED BY M. C. DUNMAN	BY R. L. TRASK, EMB. EMBALMER (Signature) <i>R. L. Trask</i> M. C. DUNMAN
CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY R. L. TRASK

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

FILE  
R. L. Trask 16 JAN 1950  
R. L. TRASK  
SIGNATURE OF GRS INSPECTOR

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.  
"Inspected for identification only per paragraph 2, 1st Ind, QMG, file QMGMO 293 (Pacific), dated 5 May 1948."

*July 1949*

# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

FROM <b>U. S. ARMY MAUSOLEUM NO. 3</b>	13 JUN 1949	13 JUN 1949	13 JUN 1949	TO <b>CHIEF HAWN</b>
KIND OF CONVEYANCE <b>TRUCK</b>				NAME OF CONVOYER
SIGNATURE OF SHIPPER <i>J. E. Wilson</i> <b>J. E. WILSON, CAPT., QMC</b>	DATE	SIGNATURE OF RECEIVER <i>James B Harris</i> <b>JAMES B HARRIS CAPTAIN QMC</b>		DATE

JUN 25 1 43 PM '49  
 RECEPTION  
 RECORDS BRANCH  
 11A  
 1005

## 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 REVEREND NATIONAL COUNCIL	DATE	SIGNATURE OF RECEIVER		DATE

## 6. SHIPPED

FROM <b>2500</b>				TO <b>5 2070104 120402</b>
KIND OF CONVEYANCE				NAME OF CONVOYER
SIGNATURE OF SHIPPER <b>WAVY</b>	DATE	SIGNATURE OF RECEIVER		DATE

## SHIPPED

FROM				TO
KIND OF CONVEYANCE				NAME OF CONVOYER <b>00000</b>
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER		DATE

19 3 unk Guadalcanal X-323

(Army Army maintenance)

UNK 293, Unknown X-323  
Guadalcanal

1st Ind

Department of the Army, OCMG, Washington 25, D. C., 11 April 1948

Commanding Officer, QM Activities, Kansas City Records Center (AGO), Mo.  
ATT: Effects Quartermaster

Unknown X-323, USMC #1, Tulagi, B.S.I., Guadalcanal, has not yet been identified.

BY COMMAND OF MAJOR GENERAL FRIEDMAN:

R

WM. T. BROWN  
Lt. Colonel, OMC  
Field Service Battalion

APR 11 4 10 PM '48  
O. M. & RECORDS CENTER

DEPARTMENT OF THE ARMY  
KANSAS CITY QUARTERMASTER DEPOT  
ARMY EFFECTS BUREAU  
601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

IN REPLY REFER TO QMDKG 550015

HOC/elw  
18 January 1949  
DATE

SUBJECT: Disposal of Personal Effects

TO: The Quartermaster General  
Memorial Division  
Washington 25, D. C.

1. Personal effects found on remains interred as Unknown X-323

Plot F, Row 200, Grave 2, USMC #1, Tulagi, B.S.I.

Guadalcanal have been held at this Bureau as of 26 September 1947

2. Bureau inspection of the effects has been made and the following description furnished for reference:

1 ring with 1 small white stone

3. It is requested that this Bureau be informed whether or not the above listed Unknown decedent has been officially identified.

FOR THE COMMANDING OFFICER:

QMGOD 29S, Unknown X-323  
Guadalcanal

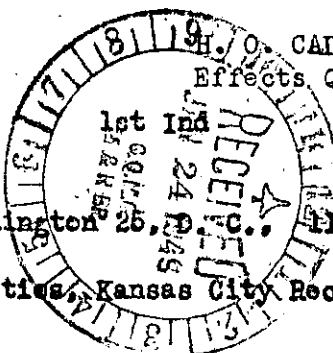
Department of the Army, OQMG, Washington 25, D.C., 11 April 1949

TO: Commanding Officer, QM Activities, Kansas City Records Center (AGO), Mo.  
ATT: Effects Quartermaster

Unknown X-323, USMC #1, Tulagi, B.S.I., Guadalcanal, has not yet been identified.

BY COMMAND OF MAJOR GENERAL FEIDMAN:

WM. T. BROWN  
Lt. Colonel, OMC  
Field Service Division



*2925 Unit X-323 (Guadalcanal) Army (Hawaii)*

QMGOD 293 Unknown X-323  
Guadalcanal

1st Ind

*(Army, Navy, Marine Corps)*

Department of the Army, OQMG, Washington 25, D. C., 19 April 1948

TO: Commanding Officer, Kansas City Quartermaster Depot, 601 Hardesty Ave.,  
Kansas City 1, Missouri. ATTENTION: Effects Quartermaster

Unknown X-323, USMC #1, Tulagi, Guadalcanal, is under investigation  
in this office. Upon completion of investigation, your Bureau will be  
advised.

BY COMMAND OF MAJOR GENERAL LARKIN:

SMG

ELR

GUY B. KEGLEY  
Major, QMC  
Field Service Division

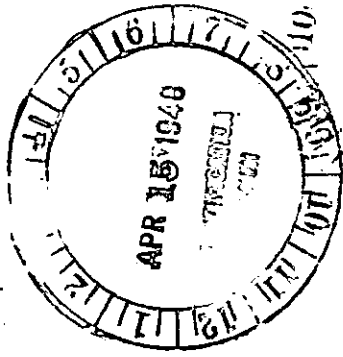
APR 19 8 40 AM '48  
O. Q. M. C.  
MAIL & RECORDS BRANCH

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY  
**INTEROFFICE REFERENCE SHEET**

DUE, HOUR AND DATE \_\_\_\_\_

1 No.	2 FROM--	3 TO--	4 DATE	5 MESSAGE
1	Chief Identification Branch Memorial Division	Field Service Dep Opr Effects Section	15 Apr 48	<p>The following information is submitted upon which to base a reply:</p> <ol style="list-style-type: none"> <li>1. Unknown X-323 under investigation in this office.</li> <li>2. Upon completion of investigation your office will be advised.</li> </ol>
				<p><i>M</i> METZ 74059</p>
				<p><i>S</i> SLOANE 2462</p>





APR 16 1948  
MEMORIAL DIVISION

APR 15 4 25 PM '48  
MEMORIAL DIVISION

DEPARTMENT OF THE ARMY  
KANSAS CITY QUARTERMASTER DEPOT  
ARMY EFFECTS BUREAU  
601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

IN REPLY REFER TO QMDKG 560015

HOC/ELR/mjo's

9 April 1948

DATE

SUBJECT: Disposal of Personal Effects

TO: The Quartermaster General  
Memorial Division  
Washington 25, D. C.

1. Personal effects found on remains interred as Unknown X -323,  
Guadalcanal  
Plot F, Row 200, Grave 2, USMC #1, Tulagi, B. S. I.  
\_\_\_\_\_ have been held at this Bureau as of 26 September 1947.

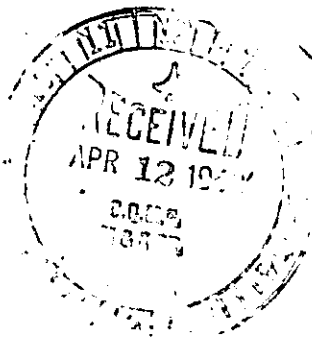
2. Bureau inspection of the effects has been made and the following description furnished for reference:

**1 ring with 1 small white stone**

3. It is requested that this Bureau be informed whether or not the above listed Unknown decedent has been officially identified.

FOR THE COMMANDING OFFICER:

H. O. CALDWELL  
Effects Quartermaster



*TP<sup>EV</sup>*  
AIR MAIL

23 September 1947

QMGOD 293, Unknown X-323, USN

3821

QMG

FIELD SERVICE

DEPOT OPR

EFFECTS

QMGOD

2nd and T. Sts., S. W., Washington 25, D. C.

1632 - A BLDG

Commanding Officer  
Kansas City Quartermaster Depot  
601 Hardesty Avenue  
Kansas City 1, Missouri  
ATTENTION: Effects Quartermaster

X  
X

*293 Unk. Guadalcanal X-323 (Army, Navy + Marine  
Cems.)*

1. The inclosed ring marked as property of D. T. Walsh is returned herewith.

2. The remains previously carried as D. T. Walsh, USN and USMC Cemetery No. 1, Tulagi, B. S. I., have been reburied and designated Unknown X-323, Army Navy Marine Cemetery, Guadalcanal, B. S. I., Plot F, Row 200, Grave 2. It is requested that the records of your Bureau be changed accordingly.

3. When identity of this Unknown is established, your Bureau will be advised.

BY COMMAND OF MAJOR GENERAL LARKIN:

1 Incl  
Ring

R

*SEP 23 12 20 PM '47*

QMG  
RECORDS



GUY B. KEGLEY  
Major, QMG  
Field Service Division

*4332.3 Kansas City*

AIR MAIL

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY

**INTEROFFICE REFERENCE SHEET**

See reverse side for instructions in the use of this form

DUE, HOUR AND DATE \_\_\_\_\_

1 NO.	2 FROM--	3 TO--	4 DATE	5 MESSAGE
1	Chief, RR Br. Memorial Division	Field Service Dep Opr Effects Section	23 Sept 1947	<p>1. Request ring marked as property of D. T. Walsh be returned by registered mail to Army Effects Bureau, Kansas City, Missouri.</p> <p>2. The remains previously carried as D. T. Walsh, USN and USMC Cemetery #1, Tulagi, B.S.I. have been reburied and designated Unknown X-323, Army Navy Marine Cemetery, Guadalcanal, B.S.I., Plot F, Row 200, Grave 2. Request records be changed accordingly.</p> <p>3. When identify of this Unknown is established the Army Effects Bureau will be advised.</p> <p>1 Incl: Ring</p> <p style="text-align: right;"><i>B</i> BAUKNIGHT 71955</p>

MAJOR DISCREPANCY		IDENTIFICATION DATA						
1. REMAINS OF UNKNOWN X-323 Guadalcanal					2. DATE OF REPORT 29 July 1948			
3. NAME OF CEMETERY U. S. Army Mausoleum #2 Formerly of Guadalcanal				4. PLOT F	5. ROW 200	6. GRAVE 2	7. DATE OF DISINTERMENT 29 Jul 48	REINTERMENT 29 Jul 48
PHYSICAL DESCRIPTION Age 22 to 24 years.								
8. ESTIMATED WEIGHT 160 to 165 lbs.		9. ESTIMATED HEIGHT 176-69.29-5' 9 1/4"			10. COLOR OF HAIR Light brown-fine.		11. RACE White	
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS								
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES								
None		<div style="border: 1px solid black; padding: 5px; text-align: center;"> <b>UNIDENTIFIABLE</b>            BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA         </div>						
CYRIL C. DISNEY		1st Lt. FA 0-1167395			April 6, Disney		20 Jan 1949	
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? Upper portion of remains badly eroded.						
16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS Perforation of olecranon fossa of left humerus.								
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								

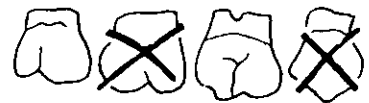
Incl 59

**MISSING TEETH:** ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED THUS:

X-323

TOP VIEW

SIDE VIEW



**Quadalcanal**

**CROWNED TEETH:** BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:

Gold Crown, Porcelain Crown



**BRIDGE WORK:** BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:

Gold Bridge



**FILLINGS:** DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:

Gold Filling, Silver Filling



**CARIES (Cavities):** OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:

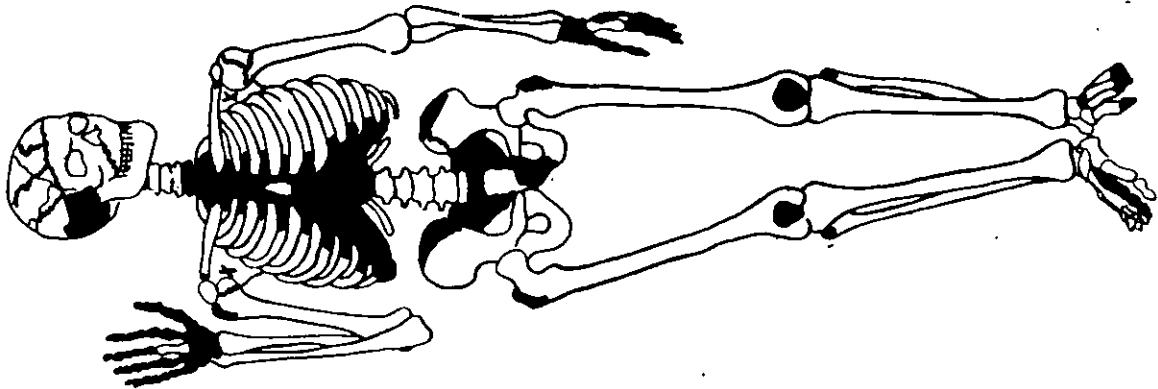
Cavity, Decayed



RIGHT								LEFT								
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
IMP	F,F, O,O		D,M									O	A FOD	O,O	IMP	
Side Views																
Top Views																
Side Views																
	A F,O	Drift	F	F	F							A FO		A F,O FOD	IMP	
	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."

19. BLACK OUT PARTS OF BODY NOT REQUIRED



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.

/s/ M. Trotter  
 M. TROTTER SIGNATURE OF MEDICAL OFFICER ANTHROPOLOGIST

21. REMARKS AND ADDITIONAL INFORMATION

These are the remains of a light, brown haired man in his early twenties.  
 The skull is average in size, round-oval in shape with a moderate external occipital protuberance.  
 The forehead is broad with a long slope.  
 The face is fairly long and was probably pinched.  
 The browridges show medium prominence.  
 The nasal root is high and very narrow, and suggests a long pointed nose slightly skewed to the left.  
 The upper lip was probably long.  
 The mouth parts are full.  
 The palate is "U" shaped and average in height.  
 The line of the lower jaw is long.  
 The chin is fairly deep and forms a well-rounded median eminence.  
 There was no discrepancy involving skeletal parts.

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

SIGNATURE

O. W. GREENWOOD, CAPT., QMC  
 CENTRAL IDENTIFICATION LABORATORY  
 AND MAUSOLEUM, APO 957

/s/ O. W. Greenwood  
 O. W. GREENWOOD

**CENTRAL IDENTIFICATION LABORATORY**  
**BONE LIST**

NAME	SIDE	NO	BONE LENGTHS IN CM	REMARKS (IF MISSING OR FRACTURED, LIST PARTS AND LOCATION)
SKULL		1	approx. 54.0	Fractured. Missing are: portion of right temporal, occipital, and skull base. Mandible fractured.
VERTEBRAE	CERVICAL	5		#6 and 7 missing.
	THORACIC	7		5 missing.
	LUMBAR	5		
SACRUM		1		Fragments only present.
INNOMINATES	RIGHT	1	BI-ILIAC DIAM	Badly eroded.
	LEFT	1		Badly eroded-portion of pubis missing.
RIBS		24		Badly eroded.
STERNUM		1		Fragment only present.
CLAVICLES	RIGHT	1	approx. 15.2	Both ends eroded.
	LEFT	1	approx. 15.5	Both ends eroded.
SCAPULAE	RIGHT	1		Eroded-most of body missing.
	LEFT	1		" " " " "
HUMERI	RIGHT	1	approx. 33.4	Proximal end eroded.
	LEFT	1		" " "
RADII	RIGHT	1	25.0	
	LEFT	1	24.9	
ULNAE	RIGHT	1	26.5	
	LEFT	1	26.4	
HANDS	RIGHT	1		#3 metacarpal present only.
	LEFT	1		#'s 2 & 4 metacarpals present only.
FEMORA	RIGHT	1	47.9	Greater trochanter missing.
	LEFT	1	47.7	" " "
PATELLAE	RIGHT	0		Missing.
	LEFT	0		"
TIBIAE	RIGHT	1	39.2	
	LEFT	1	39.6	
FIBULAE	RIGHT	1	approx. 39.5	Proximal head eroded.
	LEFT	1	approx. 39.4	
FEET	RIGHT	1		All present except 2 & 3 cuneiform and #2 metatarsal.
	LEFT	1		All present except #1 cuneiform and terminal phalanges.

NUMERO-CLAVICULAR RATIO		APPROXIMATE AGE (in years)
ESTIMATED HEIGHT	176 - 69.29 51 9 1/4"	22 to 24
ESTIMATED WEIGHT	160 to 165 lbs.	LEG-HIP BR RATIO U.T.D.

/s/ M. Trotter  
M. TROTTER  
ANTHROPOLOGIST

ENCLOSURE TO: X-323 Guadalcanal

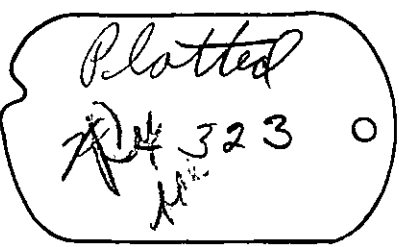


**RESTRICTED**

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

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

DATE OF REPORT  
18 July 1949

Imprint Identification Tag If Possible. DO NOT TYPE  	Section 1.—IDENTIFICATION.	
	NAME (Last, first, middle initial) <b>UNKNOWN X-323</b>	SERIAL No. <b>Unknown</b>
	GRADE <b>Unknown</b>	ORGANIZATION <b>Unknown</b>
	RACE <b>White</b>	RELIGION <b>Unknown</b>

PLACE OF DEATH <b>Tulagi, B. S. I.</b>	CAUSE OF DEATH <b>Unknown</b>	DATE OF DEATH <b>Unknown</b>
---	----------------------------------	---------------------------------

EMERGENCY ADDRESSEE (Name, relationship, and address)  
**Unknown**

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

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 <b>21 June 1949</b>	HOUR <b>1000</b>	BURIED IN (Shroud, blanket, or name of other) <b>Permanent Type Casket</b>	TYPE OF GRAVE MARKER <b>Cross</b>	PLOT No. <b>Q</b>	ROW No. <b></b>	GRAVE No. <b>1110</b>
---------------------------------------	---------------------	---	--------------------------------------	----------------------	--------------------	--------------------------

WAS THIS A REBURIAL? (Yes or no) <b>Yes</b>	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE <b>ANM Cemetery, Guadalcanal BSI</b>	PLOT No. <b>F</b>	ROW No. <b>200</b>	GRAVE No. <b>2</b>
--	---	----------------------	-----------------------	-----------------------

TYPE OF RELIGIOUS CEREMONY <b>Catholic Protestant</b>	PERSON CONDUCTING BURIAL RITES <b>Eugene L. A Fisher, Chaplain Albert F Click, Chaplain</b>	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) <b>Yes</b>	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) <b>Yes</b>	

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) <b>Jones, Isaac Jr.</b>	RANK <b>Pfc</b>	SERIAL No. <b>35249514</b>	ORGANIZATION <b>USAGF</b>	GRAVE No. <b>1078</b>
---	--------------------	-------------------------------	------------------------------	--------------------------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) <b>Warren, Calvin S.</b>	RANK <b>1 Lt</b>	SERIAL No. <b>0-698165</b>	ORGANIZATION <b>USA/AF</b>	GRAVE No. <b>1142</b>
---	---------------------	-------------------------------	-------------------------------	--------------------------

SIGNATURE OF PERSON PREPARING REPORT  Margaret E Parry, Chief Clerk, HDC	SIGNATURE OF GRS OFFICER VERIFYING REPORT  James B Harris, Capt., QMC
---	---

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.

**Section 3. UNIDENTIFIED REMAINS.**

**INSTRUCTIONS:**


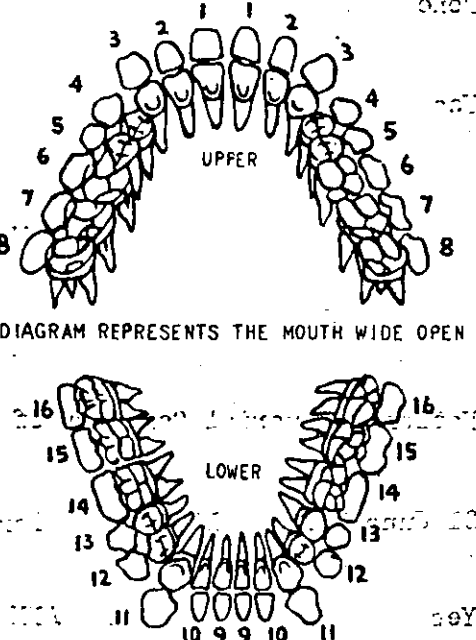




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

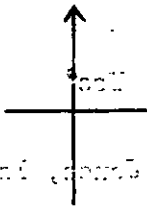
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
--------	--------	---------------	---------------	-------------------------------

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

OTHER IDENTIFICATION CLUES

FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER</p> <p>LOWER</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>	

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

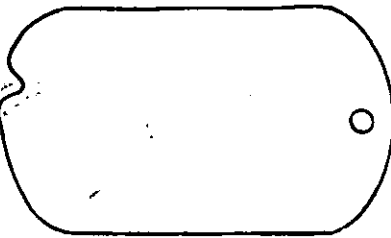
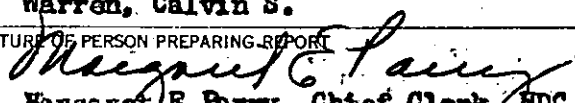



REMARKS:

Unknown X-323, Guadalcanal, Solomon Islands,  
Section Q, Grave No. 1110

REPRODUCTION  
 RECORDS BRANCH  
 JUL 25 1943 PM 4:43  
 MEMORIAL DIVISION

**RESTRICTED**

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		<b>REPORT OF INTERMENT</b> (AR 30-1810 and AR 30-1815)				DATE OF REPORT <p align="center"><b>18 July 1949</b></p>
Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.					
	NAME (Last, first, middle initial) <p align="center"><b>UNKNOWN X-323 (GUADALCANAL (UNIDENTIFIABLE))</b></p>			SERIAL No. <p align="center"><b>Unknown</b></p>		
	GRADE <p align="center"><b>Unknown</b></p>		ORGANIZATION <p align="center"><b>Unknown</b></p>		BRANCH OF SERVICE <p align="center"><b>Unknown</b></p>	
	RACE <p align="center"><b>White</b></p>		RELIGION <p align="center"><b>Unknown</b></p>		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	
PLACE OF DEATH <p align="center"><b>Tulegi, B. S. I.</b></p>		CAUSE OF DEATH <p align="center"><b>Unknown</b></p>			DATE OF DEATH <p align="center"><b>Unknown</b></p>	
EMERGENCY ADDRESSEE (Name, relationship, and address) <p align="center"><b>Unknown</b></p>						
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) <p align="center"><b>None</b></p>		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) <p align="center"><b>UNIDENTIFIABLE</b></p>				
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) <p align="center"><b>Yes</b></p>						
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME <p align="center"><b>None</b></p>						
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.						
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY <p align="center"><b>National Memorial Cemetery of the Pacific, Honolulu, T. H.</b></p>						
DATE OF BURIAL <p align="center"><b>21 June 1949</b></p>	HOUR <p align="center"><b>1000</b></p>	BURIED IN (Shroud, blanket, or name of other) <p align="center"><b>Permanent Type Casket</b></p>	TYPE OF GRAVE MARKER <p align="center"><b>Cross</b></p>	PLOT No. <p align="center"><b>Q</b></p>	ROW No. <p align="center"><b>1110</b></p>	
WAS THIS A REBURIAL? (Yes or no) <p align="center"><b>Yes</b></p>	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE <p align="center"><b>ARM Cemetery, Guadalcanal BSI</b></p>			PLOT No. <p align="center"><b>F</b></p>	ROW No. <p align="center"><b>200</b></p>	
TYPE OF RELIGIOUS CEREMONY <p align="center"><b>Catholic Protestant</b></p>	PERSON CONDUCTING BURIAL RITES <p align="center"><b>Eugene L A Fisher, Chaplain Albert F Click, Chaplain</b></p>		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY			
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) <p align="center"><b>Yes</b></p>	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) <p align="center"><b>Yes</b></p>					
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) <p align="center"><b>Jones, Isaac Jr.</b></p>			RANK <p align="center"><b>Pfc</b></p>	SERIAL No. <p align="center"><b>35249514</b></p>	ORGANIZATION <p align="center"><b>USAGF</b></p>	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) <p align="center"><b>Warren, Calvin S.</b></p>			RANK <p align="center"><b>1 Lt</b></p>	SERIAL No. <p align="center"><b>O-698165</b></p>	ORGANIZATION <p align="center"><b>USAAP</b></p>	
SIGNATURE OF PERSON PREPARING REPORT  <p align="center"><b>Margaret E Parry, Chief Clerk, HHC</b></p>			SIGNATURE OF GRS OFFICER VERIFYING REPORT  <p align="center"><b>James B Harris, Capt., QMC</b></p>			
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.						

**RESTRICTED**

**Section UNIDENTIFIED REMAINS.**

**INSTRUCTIONS:**


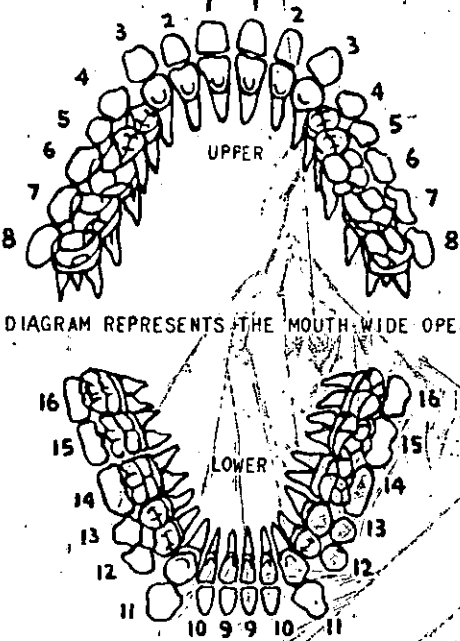




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size; social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

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**

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

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

**REMARKS:**

**Unknown X-323, Guadalcanal, Solomon Islands,  
Section Q, Grave No. 1110**

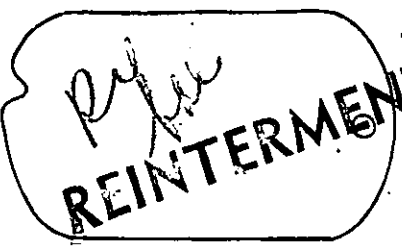
**REPATRIATION  
RECORDS BRANCH**  
 JUL 25 4 43 PM '49

**RESTRICTED**

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

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

DATE OF REPORT  
22 July 1947

Imprint Identification Tag If Possible. DO NOT TYPE  	<b>Section 1.—IDENTIFICATION.</b>	
	NAME (Last, first, middle initial)	
	UNKNOWN X-323	
	GRADE	SERIAL No.
Unknown	Unknown	Unknown
ORGANIZATION	BRANCH OF SERVICE	
Unknown	Unknown	
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
Unknown	Unknown	

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
Tulagi, B.S.I.	Unknown	Unknown

EMERGENCY ADDRESSEE (Name, relationship, and address)

Unknown

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none)	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)
None	
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no)	
Embossed plate bearing name D.T. Walsh buried with body.	See Remarks

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

One ring. Forwarded to the Effects Bureau, at Kansas City, Mo.

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

Army Navy Marine Cemetery, Guadalcanal, B.S.I.

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
26 Sep 1945	1523	---	Wooden Cross	F	200	2

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	USN and USMC Cemetery No. 1	A	1	30

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
Unknown	Unknown	
IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)	Embossed plate bearing name, D.T. Walsh, buried with the body.
No	No	

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
DeMATTEIS, Crescenzo	Cpl	279635	USMC	1

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
COTALING, Louis F	S 1/c	6424750	USS DENVER	3

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
G. PAGE - Clerk	HORACE MANN, Capt., QMC

**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.

*Encl # 1*

**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.

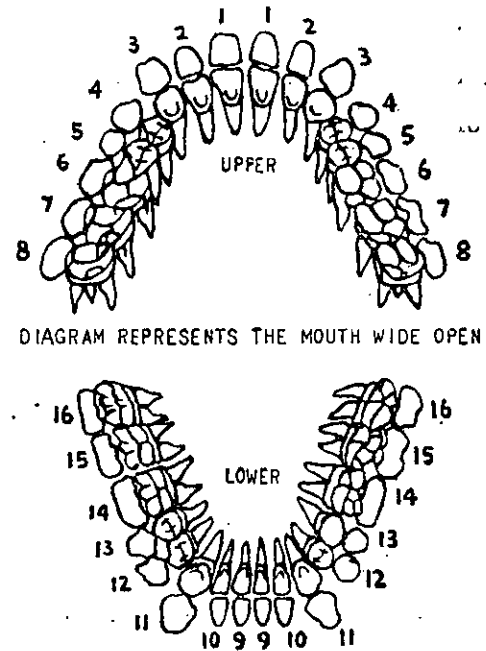
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

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

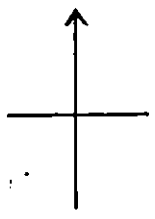
WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
-----------------------	---------------	--------------------------------

**OTHER IDENTIFICATION CLUES**

FILLINGS	 <p>SILVER FILLING GOLD FILLING</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>



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



**REMARKS:** Formerly buried as D.T. WALSH, as that name appeared on cross marking grave. See OQMG Ltr, GMG MU WALSH, D. T. (Guadalcanal) S.I., subj: Identification of Unknown Deceased, 27 June 1947, for change in status.

**RESTRICTED**

**REPORT OF INTERMENT**

(AR 30-1810 and AR 30-1815)

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

DATE OF REPORT

**22 July 1947**

*Imprint Identification Tag If Possible.  
DO NOT TYPE*

**Section 1.—IDENTIFICATION.**

NAME (Last, first, middle initial)

**UNKNOWN X-323**

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

**Tulagi, B.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)

WERE SUBSTITUTE TAGS PROVIDED?(Yes or no)  
**Embossed plate bearing  
name D.T. Walsh buried  
with body.**

**See Remarks**

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

**One ring. Forwarded to the Effects  
Bureau, at Kansas City, Mo.**

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

**Army Navy Marine Cemetery, Guadalcanal, B.S.I.**

DATE OF BURIAL

**26 Sep 1945**

HOUR

**1523**

BURIED IN (Shroud, blanket, or name of other)

**---**

TYPE OF GRAVE  
MARKER

**Wooden  
Cross**

PLOT No.

**F**

ROW No.

**200**

GRAVE No.

**2**

WAS THIS A REBURIAL?  
(Yes or no)

**Yes**

IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE

**USN and USMC Cemetery No. 1**

PLOT No.

**A**

ROW No.

**1**

GRAVE No.

**30**

TYPE OF RELIGIOUS  
CEREMONY

**Unknown**

PERSON CONDUCTING BURIAL RITES

**Unknown**

IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND  
CONTAINERS BURIED WITH BODY

**Embossed plate bearing name, D.T.  
Walsh, buried with the body.**

IDENTIFICATION TAG BURIED WITH  
BODY (Yes or no)

**No**

IDENTIFICATION TAG ATTACHED TO  
MARKER (Yes or no)

**No**

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)

**DeMATTEIS, Crescenzo**

RANK

**Cpl**

SERIAL No.

**279635**

ORGANIZATION

**USMC**

GRAVE No.

**1**

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)

**GOTALING, Louis F**

RANK

**S 1/c**

SERIAL No.

**6424750**

ORGANIZATION

**USS  
DENVER**

GRAVE No.

**3**

SIGNATURE OF PERSON PREPARING REPORT

**G. Page - Clerk**

SIGNATURE OF GRS OFFICER VERIFYING REPORT

**Horace Mann**  
**HORACE MANN, Capt., 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 Officer. Copies for retention in theater as prescribed by theater commander.

**RESTRICTED**

*Incl #1*

**RESTRICTED**

**Section UNIDENTIFIED REMAINS.**

**INSTRUCTIONS:**


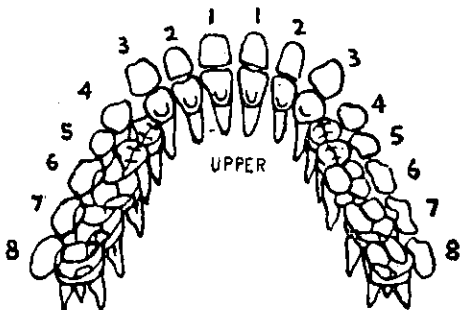




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

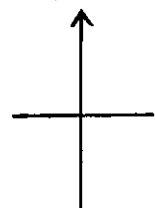
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
--------	--------	---------------	---------------	-------------------------------

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

**OTHER IDENTIFICATION CLUES**

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

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



**REMARKS:** Formerly buried as D.T. WALSH, as that name appeared on cross marking grave. See OQMG Ltr, GCMGU WALSH, D. T. (Guadalcanal) S.I., subj: Identification of Unknown Deceased, 27 June 1947, for change in status.





# 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>
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>

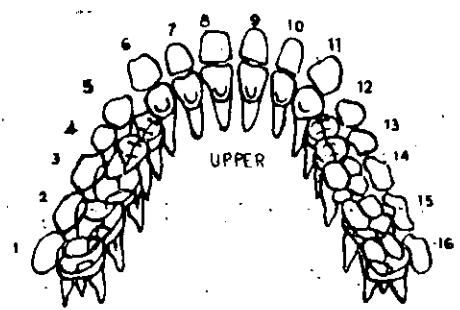
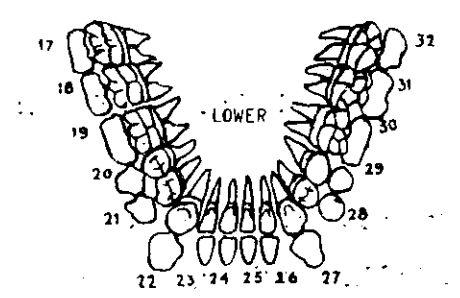
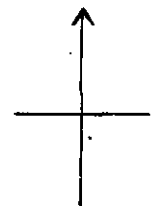


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



SKETCH AND MAP REFERENCE



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

6 SEP 1946

Left Little Finger		Left Ring Finger	Left Middle Finger	Left Index Finger	Left Thumb
Right Little Finger		Right Ring Finger	Right Middle Finger	Right Index Finger	Right Thumb

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

16 March 1945

FOR IMPRINT OF IDENTIFICATION TAG



NAME (Last, First, Middle Initial)

WALSH, D. T.

RANK

Unknown

SERIAL NUMBER

Unknown

COUNTRY

United States

ORGANIZATION

Unknown

BRANCH

Unknown

RACE

Unknown

RELIGION

Unknown

DATE OF DEATH

Unknown

PLACE OF DEATH

Tulagi, 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.)

Identified from name on cross marking the grave.

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

LIST OF PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

To be forwarded to the Effects Bureau at Kansas City.

One Ring

NAME OF EMERGENCY ADDRESSEE

Unknown

ADDRESS OF EMERGENCY ADDRESSEE

Unknown

IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCES ON REVERSE

DATE	HOUR	PLOT NO.	ROW NO.	GRAVE NO.	GRAVE MARKER
4 Jan. 1945 (Reburial)	0930	A	1	30	Wooden Cross

USN & USMC CEMETERY #1 TULAGI, B.S.I.

TYPE OF RELIGIOUS CEREMONY

Previous Service Unknown

PERSON REPORTING BURIAL

*Plt. Richard I. Moser*

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.

Embossed plate bearing name buried with the body.

BODIES BURIED EITHER SIDE (See Paragraph 4 on Reverse)

BODY ON LEFT, NAME (Last, First, Middle Initial)

AHRENS, Edward H.

RANK

Opl.

SERIAL NO.

358161

ORGANIZATION

1st Mar. Raider Bn.

BODY ON RIGHT, NAME (Last, First, Middle Initial)

LEWIS, M.

RANK

Unknown

SERIAL NO.

270-365

ORGANIZATION

USMC

PERSON CONDUCTING BURIAL RITES

Unknown

VERIFIED BY G. R. S. OFFICER

*John R. Nolan*  
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.

Incl # 71

## 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 COLLECTING POINT.

**THE CONDITION OF EACH AND EVERY TOOTH WILL BE INDICATED ON THE TOOTH CHART, IN ACCORDANCE WITH DIAGRAM.**






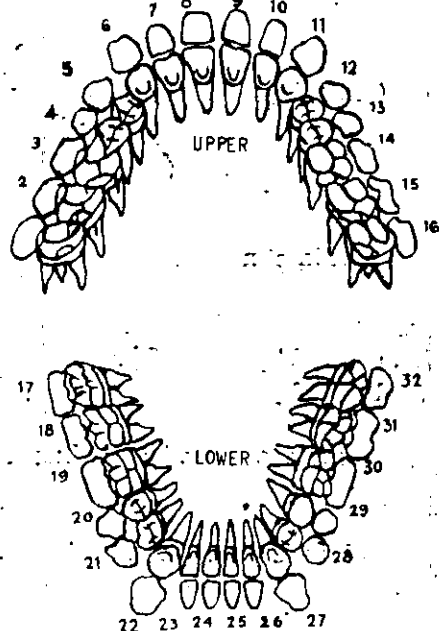
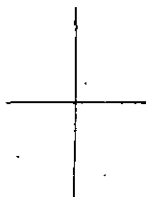
FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>
CAVITIES	 <p>CAVITY DECAYED</p>
MISSING TEETH	 <p>TOOTH MISSING</p>
CROWNED TEETH	 <p>PORCELAIN CROWN GOLD CROWN</p>
BRIDGE WORK	 <p>GOLD BRIDGE</p>

DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



SKETCH AND MAP REFERENCE

N



WHEN UNIDENTIFIED, TAKE THUMB AND FINGERPRINTS OF BOTH HANDS - IF THIS IS NOT POSSIBLE FILL IN TOOTH CHART

DD FORM 1300  
Rev. 1 November 1942  
(G.S. 1, dated 11 May 1942  
may be used until exhausted)

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

DATE REPORT FILLED OUT  
16 March 1945

FOR IMPRINT OF IDENTIFICATION TAG



NAME (Last, First, Middle Initial)

**WALSH, D. T.**  
 RANK Unknown SERIAL NUMBER Unknown COUNTRY United States  
 ORGANIZATION Unknown BRANCH Unknown  
 RACE Unknown RELIGION Unknown DATE OF DEATH Unknown

PLACE OF DEATH

CAUSE OF DEATH

Tulagi, B.S.I.

Unknown

IDENTIFICATION TAGS FOUND ON BODY

IF NO IDENTIFICATION TAGS, OTHER MEANS USED TO IDENTIFY BODY (Identification Cards, Letters, etc.)

DISPOSITION OF SUBSTITUTE TAGS, IF MADE  
 1  2  NONE

Identified from name on cross marking the grave.

COMPLETE FINGERPRINT CHART OF BOTH HANDS ON REVERSE

COMPLETE TOOTH CHART ON REVERSE

YES  NO

YES  NO

LIST ANATOMICAL CHARACTERISTICS AND OTHER DATA IF FINGERPRINTS CANNOT BE TAKEN

LIST OF PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

To be forwarded to the Effects Bureau at Kansas City.

One Ring

NAME OF EMERGENCY ADDRESSEE

ADDRESS OF EMERGENCY ADDRESSEE

Unknown

Unknown

IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCES ON REVERSE

DATE <u>4 Jan. 1945</u> (Reburial)	HOUR <u>0930</u>	PLOT NO. <u>A</u>	ROW NO. <u>1</u>	GRAVE NO. <u>30</u>	GRAVE MARKER <u>Wooden Cross</u>
--	---------------------	----------------------	---------------------	------------------------	-------------------------------------

USN & USMC CEMETERY AT TULAGI, B.S.I.

TYPE OF RELIGIOUS CEREMONY

PERSON REPORTING BURIAL

Previous Service Unknown

Abt. Richard I. Mager

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.

Bronzed plate bearing name buried with the body.

BODIES BURIED EITHER SIDE (See Paragraph 8 on Reverse)

BODY ON LEFT, NAME (Last, First, Middle Initial) <u>AHRENS, Edward H.</u>	RANK <u>Opl.</u>	SERIAL NO. <u>358161</u>	ORGANIZATION <u>1st Mar. Raider Bn.</u>
BODY ON RIGHT, NAME (Last, First, Middle Initial) <u>LEWIS, E.</u>	RANK <u>Unknown</u>	SERIAL NO. <u>270-365</u>	ORGANIZATION <u>USMC</u>

PERSON CONDUCTING BURIAL RITES

VERIFIED BY G. R. S. OFFICER

Unknown

John R. Nolan  
JOHN R. NOLAN  
1st Lt., GRC

INSTRUCTIONS FOR FILLING OUT BURIAL REPORT: MAKE OUT GRC 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

*Incl # 71*

X-323

In Reply Refer to  
QMGOD 332.3  
Kansas City

DEPARTMENT OF THE ARMY  
Office of the Quartermaster General  
Washington 25, D. C.

5 September 1951

SUBJECT: World War II Unknowns

TO: Chief, Army Effects Bureau

1. As a result of a survey recently conducted at the Army Effects Bureau by a representative of the Memorial Division, it was found that there are approximately 200 cases of World War II Unknowns for whom personal effects are stored at the Bureau. All information pertinent to identification has been extracted from these effects and a complete inventory has been furnished the Identification Branch of all such effects.

2. Since the World War II Unknown personal effects will be of no further value to the Memorial Division for identification purposes, authority is hereby delegated to the Chief, Army Effects Bureau, to render administrative determinations on disposition of personal effects for World War II Unknowns.

3. A certificate signed by the Chief, indicating reasons for disposal of the property will be placed in the case folder and the case closed.

BY COMMAND OF MAJOR GENERAL FELDMAN:

/s/ C. J. Harrold  
/t/ C. J. HARROLD  
Colonel, QMC  
Chief, Field Service Division

Date 5 Sep 51

This is to certify that an administrative decision has been made to salvage the property in this case for the following reasons:

held for identification purposes - Unable to identify owner

H. V. HAWES  
Major, QMC  
Effects Quartermaster

Frank 1293

550,015

S

7920

DEC 14 1950

Wickham # 1293

550015

S

26 Sept 47

JAN 19 1950

7920



Unknown

S

26 Sept 47 JAN 1950

SECRET  
7020

Unkman # 1293

550015

S

26 Sept 47 JAN 19 1950

7920

Workdown 1083

550,015

5

26 Sep 47

APR 25 1949

7920

Link 1293

500,015

S

26 Sep 47

JUL 30 1948

1920

Link 1293

550,015

S

26 Sep 47

JUL 30 1948

1920

1293

S

Return  
from  
00m6

26 Sept 47

DEC 5 1947

880839

880730

880722

880712

ATTACHMENTS		EFFECTS INVENTORY ARMY EFFECTS BUREAU	STATUS	
<input checked="" type="checkbox"/>	INBOUND INVENTORY		DECEASED	
	G. R. OR SUB GR LABEL		MISSING	
	WILL OR POWER OF ATTY.		P. O. W.	
<input checked="" type="checkbox"/>	TALLY IN FORM 43		ABANDONED	
		UNKNOWN		

<input type="checkbox"/>	BAGS, CLOTH OR TRAVEL	<input type="checkbox"/>	BELT	<input type="checkbox"/>	OVERCOATS	
<input type="checkbox"/>	BELT, MONEY (NO MONEY)	<input type="checkbox"/>	BOOKS, ADDRESS	<input type="checkbox"/>	PAPERS, PERSONAL	1 ring (gold color)
<input type="checkbox"/>	BILLFOLD (NO MONEY)	<input type="checkbox"/>	BOOKS, PILOT LOG	<input type="checkbox"/>	PENCIL, MECHANICAL	small
<input type="checkbox"/>	BOOKS	<input type="checkbox"/>	BRUSHES	<input type="checkbox"/>	PEN, FOUNTAIN	white stones
<input type="checkbox"/>	BRACELET, IDENT.	<input type="checkbox"/>	CASE	<input type="checkbox"/>	PHOTOS	
<input type="checkbox"/>	CAMERAS	<input type="checkbox"/>	CLOTH, WASH	<input type="checkbox"/>	PIPES	
<input type="checkbox"/>	CLOTHING	<input type="checkbox"/>	COATS	<input type="checkbox"/>	RINGS	
<input type="checkbox"/>	MISC. ARTICLES	<input type="checkbox"/>	FOOTLOCKER	<input type="checkbox"/>	SCARFS	
<input type="checkbox"/>	RELIGIOUS ARTICLES	<input type="checkbox"/>	FOOTWEAR, PR.	<input type="checkbox"/>	SHIRTS	
<input type="checkbox"/>	RIBBONS, DECORATION	<input type="checkbox"/>	GLASSES	<input type="checkbox"/>	SOCKS, PR.	
<input type="checkbox"/>	SHORT SNORTER	<input type="checkbox"/>	GLOVES, PR.	<input type="checkbox"/>	STATIONERY	
<input type="checkbox"/>	SOUVENIR MONEY	<input type="checkbox"/>	HANDKERCHIEFS	<input type="checkbox"/>	TIES	
<input type="checkbox"/>	SOUVENIRS	<input type="checkbox"/>	HEADWEAR	<input type="checkbox"/>	TOBACCO	
<input type="checkbox"/>	TESTAMENTS	<input type="checkbox"/>	JACKETS	<input type="checkbox"/>	TOILET ARTICLES	
<input type="checkbox"/>	TOWELS & WASHCLOTHS	<input type="checkbox"/>	KITS	<input type="checkbox"/>	TOWELS	
<input type="checkbox"/>	U. S. MONEY (AMOUNT)	<input type="checkbox"/>	KNIVES	<input type="checkbox"/>	TROUSERS, PR.	
<input type="checkbox"/>	WATCH	<input type="checkbox"/>	LETTERS	<input type="checkbox"/>	TRUNKS, PR.	
<input type="checkbox"/>	WINGS	<input type="checkbox"/>	LIGHTERS	<input type="checkbox"/>	UNDERWEAR	

<p>CONTAINERS ADDRESSED TO</p> <p style="text-align: center;"><i>none</i></p>	<p>INFORMATION</p> <p style="text-align: center;"><i>none</i></p> <p style="text-align: center;"><i>Ranch</i></p>
<p>NAME AND STATUS VARIATIONS</p> <p><i># 43 shows Unid #1.</i></p>	<p>CROSS REFERENCE</p>

<input type="checkbox"/>	CHECK	REC'D BY	NUMBER	<input type="checkbox"/>	BUREAU CHECK
<input type="checkbox"/>	MONEY ORDER		SYMBOL	<input type="checkbox"/>	TRANSMIT ORIGINAL
<input type="checkbox"/>	BOND		AMOUNT	<input type="checkbox"/>	ORIG. REG. MAIL
<input type="checkbox"/>	TRAV. CHECK		DATE	<input type="checkbox"/>	TO G. A. O.
<input type="checkbox"/>	FOREIGN CURRENCY			<input type="checkbox"/>	MUTILATED
<input type="checkbox"/>	U. S. CURRENCY			<input type="checkbox"/>	TO ISSUING AGENCY

BANK OR PLACE OF ISSUE	
PAYEE	
REMITTER OR DRAWER	
TALLY NO. <i>7920</i>	ORIG. NO. OF PKGS.
EXAMINING DATE <i>26 Sept 47</i>	BOX NO.
SHEET _____ OF _____ SHEETS	

NAME <i>UNKNOWN # 1293</i>	A. S. N. <i>—</i>
ORGANIZATION	RANK <i>—</i> CASE NO.

WAREHOUSE SPACE <i>S</i>	EXAMINED BY <i>Probst</i>	<input type="checkbox"/>	DIARY REMOVED
PACKAGE DESCRIPTION <i># 16</i>	PACKED BY <i>—</i>	<input type="checkbox"/>	PHOTO FILM REMOVED
	INSPECTED BY <i>—</i>	<input type="checkbox"/>	MOTION PICTURE FILM REMOVED
	STORED BY <i>—</i>	DATE	SHIPPED BY WHOM



ADDITIONAL REMARKS

REMOVALS (other than G. I.)

DAMAGES (List type of damage-extent)

SHORTAGES

U. S. GOV'T CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

I certify that the above items were not in the containers inventoried by me.

INVENTORY CLERK

SUPERVISOR

G. I. REMOVED

UNID #1

BAZ	PALLET	BOX	TALLY	TYPE P1
-----	--------	-----	-------	---------

7920

PKG

REG 1321983

9/24/47  
OQMG, Wash. D.C.

EFF QM FORM 43  
5 JULY 1945 =

**WAR DEPARTMENT  
SERVICES OF SUPPLY  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON  
AIR MAIL  
MESSAGE FORM**

550,015  
Date 23 September 1947

File No. QMGOD 293, Unknown X-323, USN

Telephone No. 3821

Office of origin QMG (Division) FIELD SERVICE (Branch) DEPOT OPR (Branch) EFFECTS (Section) QMGOD (Symbol)  
Address 2nd and T. Sts., S. W., Washington 25, D. C. Room No. 1632 - A BLDG

To: Commanding Officer  
Kansas City Quartermaster Depot  
601 Hardesty Avenue  
Kansas City 1, Missouri  
ATTENTION: Effects Quartermaster

PRECEDENCE		
WIRE OR RADIO	ESSENTIAL MILITARY MAIL	
Urgent.....	Air mail.....	X
Priority.....	Special delivery.....	
Routine.....	Ordinary.....	A
Deferred.....	Registered.....	X
Week end.....		
Any message not X'd for precedence will be sent "Deferred."		Initial

**MESSAGE:**

1. The inclosed ring marked as property of D. T. Walsh is returned herewith.
2. The remains previously carried as D. T. Walsh, USN and USMC Cemetery No. 1, Tulagi, B. S. I., have been reburied and designated Unknown X-323, Army Navy Marine Cemetery, Guadalcanal, B. S. I., Plot F, Row 200, Grave 2. It is requested that the records of your Bureau be changed accordingly.
3. When identity of this Unknown is established, your Bureau will be advised.

BY COMMAND OF MAJOR GENERAL LARKIN:

1 Incl  
Ring

*Guy B. Kegley*  
GUY B. KEGLEY  
Major, QMC  
Field Service Division

**CHECKED** *22 a.m.*

**AIR MAIL**





DEPARTMENT OF THE ARMY  
~~WAR DEPARTMENT~~  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

QMGOD 332.3  
Kansas City

6 December 1949

SUBJECT: Present Status of Certain Unknowns

TO : Commanding Officer, QM Activities  
Kansas City Records Center (AGC), Mo.  
ATT: Effects Quartermaster

1. You are advised that the following named Unknowns have been declared unidentifiable:

Unknown X-529, Takao Harbor, Formosa  
Unknown X-323, USMC #1, Tulagi, BSI, Guadalcanal  
Unknown X-243, USMC, Margraten, Holland  
Unknown X-8036, USMC, Neuville-en-Condroz, Belgium  
Unknown X-1994, Manila #2, PI  
Unknown X-482, formerly stored at Shanghai Remains Depot  
Unknown X-197, Castellfiorentino, Italy  
Unknown X-309, St. Andre, France  
Unknown X-6929, St. Andre, France

2. Unknown X-6841, Nauville-en-Condroz, Belgium, has been cancelled.

3. Correspondence from the Bureau regarding these Unknowns is returned herewith.

BY COMMAND OF MAJOR GENERAL FELDMAN:

1 Incl:  
Corres.

WILLIAM F. CONLON  
Major, QMC  
Field Service Division





DEPARTMENT OF THE ARMY  
KANSAS CITY QUARTERMASTER DEPOT  
ARMY EFFECTS BUREAU  
601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

S-21 December 1949  
HOC/LL/vlm  
21 October 1949

IN REPLY REFER TO QMDKG 550015

DATE

SUBJECT: Disposal of Personal Effects

TO: The Quartermaster General  
Memorial Division  
Washington 25, D. C.

1. Personal effects found on remains interred as Unknown X-323  
Plot F, Row 200, Grave 2, USMC#1, Tulagi, B.S.I.

Guadalcanal have been held at this Bureau as of 26 September 1947

2. Bureau inspection of the effects has been made and the following description furnished for reference:

1 ring with 1 small white stone

3. It is requested that this Bureau be informed whether or not the above listed Unknown decedent has been officially identified.

FOR THE COMMANDING OFFICER:

*H. O. Caldwell*  
H. O. CALDWELL  
Effects Quartermaster

*Unidentified*

293  
293  
323  
Bureau of Tulagi, B.S.I.

*293*



RECEIVED  
OCT 24 1949  
O.Q.M.A.  
F & B BR.

365  
FIELD SERVICE DIV.  
OQMG

RECEIVED  
DEPT. OF EFFECTS BUREAU  
KANSAS CITY, MO.

DEC 7 1949 AM

DEPARTMENT OF THE ARMY  
KANSAS CITY QUARTERMASTER DEPOT  
ARMY EFFECTS BUREAU  
601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

HOC/elw

18 January 1949

DATE

IN REPLY REFER TO QMDKG 550015

SUBJECT: Disposal of Personal Effects

TO: The Quartermaster General,  
Memorial Division  
Washington 25, D. C.

1. Personal effects found on remains interred as Unknown X-323

Plot F, Row 200, Grave 2, USMC #1, Tulagi, B.S.I.

Guadalcanal have been held at this Bureau as of 26 September 1947

2. Bureau inspection of the effects has been made and the following description furnished for reference:

1 ring with 1 small white stone

3. It is requested that this Bureau be informed whether or not the above-listed Unknown decedent has been officially identified.

FOR THE COMMANDING OFFICER:

*H. O. Caldwell*

H. O. CALDWELL  
Effects Quartermaster

QMGOD 293, Unknown X-323  
Guadalcanal

1st Ind

Department of the Army, OQMG, Washington 25, D. C., 11 April 1949

TO: Commanding Officer, QM Activities, Kansas City Records Center (AGO), Mo.  
ATT: Effects Quartermaster

Unknown X-323, USMC #1, Tulagi, B.S.I., Guadalcanal, has not yet been identified.

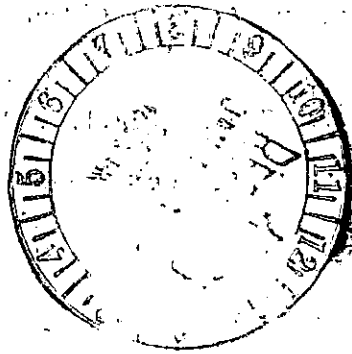
BY COMMAND OF MAJOR GENERAL FELDMAN:

*W. T. Brown*

WM. T. BROWN  
Lt. Colonel, QMC  
Field Service Division

2933  
Unknown X-323  
Guadalcanal  
Effects Quartermaster  
11 April 1949

Apr 11 4:10 PM '49  
O. Q. M. G.  
MAIL & RECORDS BRANCH



APR 14 1949  
KANSAS CITY, MO.  
DEPT. OF CORRECTIONS  
BUREAU OF EFFECTS  
MAIL ROOM

18 March 1949

MDC/elw  
18 January 1949

850015

-823

F

200

2

#1, Tulagi, B.S.I.

Guadalcanal

26 September 1947

1 ring with 1 small white stone

*S. J. ...*

*File*

QMGOD 293 Unknown X-323  
Guadalcanal

1st Ind

Department of the Army, OQMG, Washington 25, D. C., 19 April 1948

TO: Commanding Officer, Kansas City Quartermaster Depot, 601 Hardesty Ave.,  
Kansas City 1, Missouri. ATTENTION: Effects Quartermaster

Unknown X-323, USMC #1, Tulagi, Guadalcanal, is under investigation  
in this office. Upon completion of investigation, your Bureau will be  
advised.

BY COMMAND OF MAJOR GENERAL LARKIN:

*G. B. Kegley*  
*for*  
GUY B. KEGLEY  
Major, QMC  
Field Service Division

APR 19 8 40 AM '46  
O. O. W. G.  
MAIL & RECORDS BRANCH

APR 19 1946  
O. O. W. G.

~~APR 19 1946~~  
~~O. O. W. G.~~  
~~MAIL & RECORDS BRANCH~~

DEPARTMENT OF THE ARMY  
KANSAS CITY QUARTERMASTER DEPOT  
ARMY EFFECTS BUREAU  
601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

HOC/ELR/mjo'o  
9 April 1948

IN REPLY REFER TO QMDKG 550015

DATE

SUBJECT: Disposal of Personal Effects

TO: The Quartermaster General  
Memorial Division  
Washington 25, D. C.

1. Personal effects found on remains interred as Unknown X -323  
Guadalcanal  
Plot F, Row 200, Grave 2, USMC #1, Tulagi, B. S. I.  
\_\_\_\_\_ have been held at this Bureau as of 26 September 1947.

2. Bureau inspection of the effects has been made and the following description furnished for reference:

1 ring with 1 small white stone

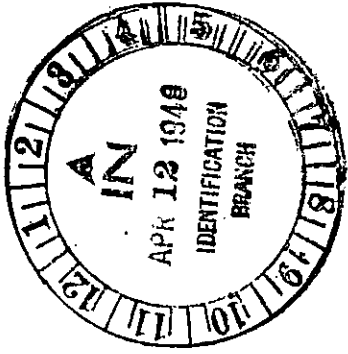
3. It is requested that this Bureau be informed whether or not the above listed Unknown decedent has been officially identified.

FOR THE COMMANDING OFFICER:

*H. O. Caldwell*

H. O. CALDWELL  
Effects Quartermaster

*293 Unknown X 323 Guadalcanal (Tulagi)*





QMGMU 293  
WALSH, D.T.  
(Guadalcanal)

2nd Ind

WD, OQMG, Washington 25, D.C.

23 September 1947

TO: Effects Quartermaster, Army Effects Bureau, Kansas City Quartermaster Depot, 601 Hardesty Avenue, Kansas City 1, Missouri

1. Subject ring marked as property of D. T. Walsh is being returned under separate cover by registered mail.

2. The remains previously carried as D. T. Walsh, USN and USMC Cemetery #1, Tulagi, B.S.I., have been reburied and designated Unknown X-323, Army Navy Marine Cemetery, Guadalcanal, B.S.I., Plot F, Row 200, Grave 2. Request your records be changed accordingly.

3. When identity of this Unknown is established your office will be advised.

BY COMMAND OF MAJOR GENERAL LARKIN:

*James C. MacFarland*  
JAMES C. MacFARLAND  
Major, QMC  
Memorial Division

*file  
9/30/47  
aid*

*copy  
1000*

SEP 23 4 15 PM '47

O. O. H. G.  
MAIL & RECORDS BRANCH

SEP 26 1947 #  
WASHINGTON, DC  
RECEIVED

RECEIVED  
OCT 1 1947

TO THE DIRECTOR OF THE BUREAU OF INVESTIGATION  
FROM THE SAC, [illegible]

RE: [illegible]  
[illegible]

IT IS REQUESTED THAT YOU [illegible]

VERY TRULY YOURS,  
[illegible]

[illegible]

[illegible]

QMDKG 550015 (25 Aug 47)

1st Ind

MEM/ELR/bj


ARMY EFFECTS BUREAU, Kansas City Quartermaster Depot, 601 Hardesty Avenue, Kansas City 1, Missouri, 3 September 1947

TO: The Quartermaster General, Memorial Division, Washington 25, D. C.

1. One ring received at the Army Effects Bureau marked as property of D. T. Walsh was forwarded to your office by registered package No. 867-411 on 3 September 1947. The shipping label on package was marked for D. T. Walsh, USMC, Cemetery #1, Tulagi, B.S.I., Plot A, Row 1, Grave 30.

2. Upon completion of investigation by your office, it is requested that this Bureau be informed of result.

FOR THE COMMANDING OFFICER:

  
M. E. MOHR  
Major, QMC  
Effects Quartermaster

REAR  
SEP 26 1947  
KANSAS CITY, MO.

RECEIVED  
SEP 5 1947

IN  
SEP 8 1947  
IDENTIFICATION  
DIVISION



WAR DEPARTMENT  
~~ARMY SERVICE FORCES~~

OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON 25, D. C.



IN REPLY REFER TO QMGM 293

UNKNOWN  
Walsh, D. T.  
Guadalcanal

25 August 1947

SUBJECT: Personal Effects

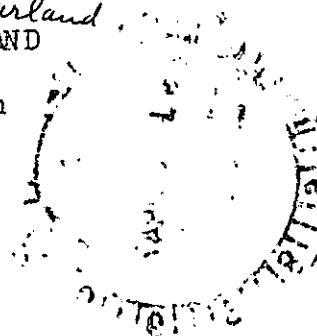
TO: Effects Quartermaster  
Army Effects Bureau  
Kansas City Quartermaster Depot  
601 Hardesty Avenue  
Kansas City 1, Missouri

1. Reference is made to a ring which was found on the remains now interred in the USN and USMC Cemetery #1, Tulagi, B.S.I., Plot A, Row 1, Grave 30. The ring is yellow gold with worn engraving and small white stone which was marked as belonging to D. T. Walsh.

2. It is requested that subject ring be forwarded to this office in order that an examination may be made of the inscription thereon.

BY COMMAND OF MAJOR GENERAL LARKIN:

*James C. MacFarland*  
JAMES C. MacFARLAND  
Major, QMG  
Memorial Division



Aug 25 2 43 PM '47  
U.S. DEPT. OF JUSTICE  
RECORDS SECTION

SEP 26 1947

KANSAS CITY  
AUG 27



## OUT-CHARGE FORM

FILE No.	550015	DATE	27 August 1947
SUBJECT	Walsh, D. T.		
TYPE OF CORRESPONDENCE	OQMG	LAST DATE	28 August 1947 3:10
<input type="checkbox"/> LETTER	<input type="checkbox"/> MEMORANDUM	<input type="checkbox"/> INDORSEMENT	<input type="checkbox"/> TELEGRAM
CHARGED TO	Elizabeth Richter <i>ER</i>	SEARCHER	zrs

NOTE:—This form must not be detached from file herewith until returned to—

AMOUNT OF CHECK	NOTE DISCREPANCY IN	ENCLOSE VALUABLES	RECIPIENT FROM
	NAME	<input checked="" type="checkbox"/> SHIP VALUABLES	CASUALTY REPORT
ACCOUNT NUMBER	SERIAL NUMBER	VALUABLES SHIPPED BY (clerk)	INVENTORY
	RANK	9-3-47 ew	FORM 20
<p>The Quartermaster General</p> <p>Memorial Division</p> <p>Washington 25, D. C.</p>			LETTER
			NO. & TYPE OF CONTAINER
			ENVELOPE
			CARTONS
			PACKAGE
			FOOT LOCKER
			SPECIAL INSTRUCTIONS
			REMOVE GI
			SHIP BLOODSTAINED
			SHIP DAMAGED
REMOVE BL'DSTAINED			
REMOVE DAMAGED			
FILMS REMOVED			
DIARY REMOVED			
MEM EIR bj	SUMMARY COURT DATA	DATE ACTION TAKEN	
DATE OF FINDING	APPLICANT	8/22/47	
<p>REMARKS</p> <p>Ship by registered mail</p>		MAIL REVIEWER (initials)	
		67	
		SHIPPED	
		FRANKED	
		EXPRESS	
		FREIGHT	
		DATE SHIPPED	
		SHIPPING CLERK	
		ROUTING	
		ACCOUNTING BRANCH	
1 WAREHOUSE 205			
<input checked="" type="checkbox"/> FILE ew			

ORDER FOR ACTION



Deceased X  
 Missing \_\_\_\_\_  
 A.W.O.L. \_\_\_\_\_  
 P.O.W. \_\_\_\_\_  
 Abandoned \_\_\_\_\_

ARMY EFFECTS BUREAU  
 INVENTORY

Set \_\_\_\_\_ of \_\_\_\_\_ Sheets  
 Flat \_\_\_\_\_ Box \_\_\_\_\_

Shown on Tally In as \_\_\_\_\_

TALLY IN NO. \_\_\_\_\_ INVENTORY DATE 7-24-47 CASE NO. \_\_\_\_\_

EFFECTS OF D. J. Walsh RANK \_\_\_\_\_

ARMY SERIAL NO. \_\_\_\_\_ ORG. \_\_\_\_\_

CONSIGNOR O. I. M. G. Washington D. C.

DELIVERING CARRIER Mail G B/L NO. \_\_\_\_\_ G B/L DATE \_\_\_\_\_

PACKAGE NO.	ARTICLE DESCRIPTION	REMARKS
1	1 U.S. Treasurer's Check	Check payable to
ENVELOPE	Dated	
	Symbol	Indorsed to Effects Q.M.
	Amount	
	<i>Returned Shipment</i>	
		Letter of trans. removed to Section File
	<i>1 yellow metal ring w/ small white stone</i>	Attached:
		<i>2/7, Form 5.4, and copy ltr. dtd 26 Dec 45 and Name Label</i>
	<b>RECEIVED</b> <b>VALUABLES SHIPPED</b> DATE <u>7-24-47</u> BY _____	

Warehouse Space \_\_\_\_\_ Inventoried by E. Saville HE:es

Locked Storage Space Office Safe Packed By \_\_\_\_\_

Case No.  
Inspector  
Recorder

**VALUABLES RECEIVED**  
BUREAU OF SUPPLIES & ACCOUNTS  
PERSONAL EFFECTS DISTRIBUTION CENTER  
Farragut, Idaho

Regular Mail  
Registered  
No.

12/26/45

(Ser. No.) (Name) (Rate) (Branch)

No Deposit

From: AEB

**INVENTORY**

QUANTITY

DESCRIPTION

1

Ring, finger

Received ..... the above mentioned articles from:

C.A. EDMONSON, CFC, USA

OffC. Valuables

7271

Name

Rate

Case No.  
Inspector  
Recorder

7271  
DAR  
REN

**VALUABLES RECEIVED**  
BUREAU OF SUPPLIES & ACCOUNTS  
PERSONAL EFFECTS DISTRIBUTION CENTER  
Farragut, Idaho

Regular Mail  
Registered  
No.

12/26/45

(Ser. No.)

(Name)

(Rate)

(Branch)

**No Deposit**

From: **AEB**

**I N V E N T O R Y**

**QUANTITY**

**DESCRIPTION**

**1**

**Ring, finger**

Received ..... the above mentioned articles from:

**C. A. EDMONSON, SPC, USN**

OinC "Valuables"

**7271**

Name

Rate

500.015? 76

WAR DEPARTMENT

XXXXXXXXXXXXXXXXXXXXXXXXXXXX

QMCMU 293  
UNKNOWN  
Walsh, D. T.  
Guadalcanal

25 August 1947

SUBJECT: Personal Effects

TO: Effects Quartermaster  
Army Effects Bureau  
Kansas City Quartermaster Depot  
601 Hardesty Avenue  
Kansas City 1, Missouri

1. Reference is made to a ring which was found on the remains now interred in the USN and USMC Cemetery #1, Tulagi, B.S.I., Plot A, Row 1, Grave 30. The ring is yellow gold with worn engraving and small white stone which was marked as belonging to D. T. Walsh.

2. It is requested that subject ring be forwarded to this office in order that an examination may be made of the inscription thereon.

BY COMMAND OF MAJOR GENERAL LARKIN:

JAMES C. MacFARIAND  
Major, QMC  
Memorial Division

AMERICAN  
UNIVERSITY  
WASHINGTON, D.C.  
AUG 27 1977

101  
R 2, 22

**AIR MAIL**  
**MESSAGEFORM**

QMDKG 550015 (21 Jul 47)

1st Ind

MEM/BRK/bq

ARMY EFFECTS BUREAU, Kansas City Quartermaster Depot, 601 Hardesty Avenue,  
Kansas City 1, Missouri, 25 July 1947

TO: The Quartermaster General, Effects Section, Field Service Division,  
Washington 25, D.C.

1. The inclosed copy of letter, your office, dated 20 December 1946,  
with Bureau 1st Ind, dated 27 December 1946, thereto is inclosed for your  
further information.

2. Further disposal will be withheld pending receipt of instructions  
therefor from your office.

FOR THE COMMANDING OFFICER:

5 Incls

Incls 1, 2, & 3--N/c

Incl 4--W/d

Added 2 incls

5. Cy ltr, QMG, 20 Dec 46

6. Cy 1st Ind, AEB, 27 Dec 46

M. E. MOHR

Major, QMC

Asst Effects Quartermaster

*[Handwritten signature]*

AIR 2/1/47

AIR MAIL

21 July 1947

QMGOD 293 Walsh, D. T.

3821

QMG

FIELD SERVICE

DEPOT OPR

EFFECTS

QMGOD

2nd and T. Sts., S. W., Washington 25, D. C.

1632 "A"

Commanding Officer  
Kansas City Quartermaster Depot  
601 Hardesty Avenue  
Kansas City 1, Missouri  
ATTENTION: Effects Quartermaster

X

X

1. There are inclosed copy of Bureau letter dated 26 December 1945, addressed to the Officer in Charge, Personal Effects Distribution Center, Farragut, Idaho, concerning D. T. Walsh, deceased, Graves Label, WDAGO Form No. 54, and personal effects belonging to this decedent.

2. The above mentioned inclosures were received in this office from the Personal Effects Distribution Center, United States Naval Supply Depot, Clearfield, Utah, without any explanations.

BY COMMAND OF MAJOR GENERAL LARKIN:

4 Incls:

1. Cy ltr dtd 26 Dec 45
2. GR Label
3. WDAGO Form No. 54
4. Box of p. e.

GUY B. KEGLEY  
Major, QMG  
Field Service Division

AIR MAIL

100-100000  
100-100000  
100-100000  
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JUL 29 1954  
MAILS

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100-100000



## OUT-CHARGE FORM

FILE No.	DATE
550015	26 December 1946
SUBJECT	
Walsh, D. T.	
TYPE OF CORRESPONDENCE	LAST DATE
<input checked="" type="checkbox"/> LETTER <b>QQMG</b> <input type="checkbox"/> MEMORANDUM <input type="checkbox"/> INDORSEMENT <input type="checkbox"/> TELEGRAM	1:00
CHARGED TO	SEARCHER
Section 5	rmb
27 December 1946	

*NOTE:—This form must not be detached from file herewith until returned to—*

*filed  
me 12/27*

QMDKG 550015 (20 Dec 46)

1st Ind

*mm*  
CLR/LD/crn

ARMY EFFECTS BUREAU, Kansas City Quartermaster Depot, 601 Hardesty Avenue,  
Kansas City 1, Missouri, 27 December 1946

TO: The Quartermaster General, Washington 25, D. C.

1. One yellow gold ring with worn engraving and small white stone marked as belonging to D.T. Walsh was received at this Bureau and forwarded, on 19 December 1945, to Officer in Charge, Personal Effects Distribution Center, Farragut Idaho, for disposition.

2. Inclosed is copy of WD, AGO Form 54 and Graves Registration label received here. The originals of these papers were sent to the Personal Effects Distribution Center with Bureau letter of 26 December 1945.

FOR THE COMMANDING OFFICER:

2 Incls

1. WD Form 54
2. Label

C. L. RUMFIELD

1st Lt, JMC

Asst Effects Quartermaster

QMGMR 293  
Unknown  
Walsh, D. T.  
Guadalcanal

20 December 1946

SUBJECT: Personal Effects

TO : Effects Quartermaster, Army Effects Bureau  
Kansas City Quartermaster Depot  
601 Hardesty Avenue  
Kansas City 1, Missouri

1. This office is endeavoring to establish the identity of an American Soldier, Walsh, D. T., who was killed in Tulagi, B. S. I.

2. Personal effects found with the remains consisted of one ring (no description).

3. It is requested that personal effects for subject soldier be examined for clues that may aid in establishing identity and a complete description including any markings found thereon be forwarded to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

JAMES C. MacFARLAND  
Major, QMC  
Assistant

100-100000-100000

100-100000-100000

100-100000-100000

100-100000-100000

100-100000-100000

100-100000-100000

10 OCT 1945

AMOUNT OF CHECK	NOTE DISCREPANCY IN	INCLOSE VALUABLES	RECIPIENT FROM
ACCOUNT NUMBER	NAME	SHIP VALUABLES	CASUALTY REPORT
	SERIAL NUMBER	VALUABLES SHIPPED BY (clerk)	INVENTORY
	RANK		<input checked="" type="checkbox"/> FORM 20 F(1) 1-2
<p style="text-align: center;"><b>Officer in Charge</b></p> <p style="text-align: center;"><b>Personal Effects Distribution Center</b></p> <p style="text-align: center;"><b>Farragut, Idaho</b></p> <p style="text-align: center;"><b>D. T. Walsh</b></p> <p style="text-align: center;"><b>550015-D</b></p>			LETTER
			NO. & TYPE OF CONTAINER
			ENVELOPE
			CARTONS
			PACKAGE
			FOOT LOCKER
			SPECIAL INSTRUCTIONS
			REMOVE GI
			SHIP BLOODSTAINED
			SHIP DAMAGED
			REMOVE BL'DSTAINED
			REMOVE DAMAGED
			FILMS REMOVED
			DIARY REMOVED
L. DINWIDDIE:lw			DATE ACTION TAKEN
SUMMARY COURT DATA			MAIL REVIEWER (initials)
DATE OF FINDING	APPLICANT		
REMARKS			<input checked="" type="checkbox"/> SHIPPED <input type="checkbox"/> FRANKED <input type="checkbox"/> EXPRESS <input type="checkbox"/> FREIGHT
			DATE SHIPPED OCT 19 1945
			SHIPPING CLERK <i>AWP</i>
			ROUTING
			ACCOUNTING BRANCH
			1 WAREHOUSE
			2 FILE
ORDER FOR ACTION			

55001594

ATTACHMENTS	
X	INBOUND INVENTORY
X	G. R. OR SUB GR LABEL
	WILL OR POWER OF ATTY.
X	TALLY IN FORM 43

**EFFECTS INVENTORY  
ARMY EFFECTS BUREAU**

STATUS	
DECEASED	X
MISSING	
P. O. W.	
ABANDONED	
UNKNOWN	

BAGS, CLOTH OR TRAVEL	BELT	OVERCOATS
BELT, MONEY (NO MONEY)	BOOKS, ADDRESS	PAPERS, PERSONAL
BILLFOLD (NO MONEY)	BOOKS, PILOT LOG	PENCIL, MECHANICAL
BOOKS	BRUSHES	PEN, FOUNTAIN
BRACELET, IDENT.	CASE	PHOTOS
CAMERAS	CLOTH, WASH	PIPES
CLOTHING	COATS	RINGS
X MISC. ARTICLES	FOOTLOCKER	SCARFS
RELIGIOUS ARTICLES	FOOTWEAR, PR.	SHIRTS
RIBBONS, DECORATION	GLASSES	SOCKS, PR.
SHORT SNORTER	GLOVES, PR.	STATIONERY
SOUVENIR MONEY	HANDKERCHIEFS	TIES
SOUVENIRS	HEADWEAR	TOBACCO
TESTAMENTS	JACKETS	TOILET ARTICLES
TOWELS & WASHCLOTHS	KITS	TOWELS
U. S. MONEY (AMOUNT)	KNIVES	TROUSERS, PR.
WATCH	LETTERS	TRUNKS, PR.
WINGS	LIGHTERS	UNDERWEAR

CONTAINERS ADDRESSED TO  
*none*

*9-20 file  
J.S.*

NAME AND STATUS VARIATIONS

INFORMATION  
*none*

*rechecked*

CROSS REFERENCE

CHECK	REC'D BY	NUMBER	BUREAU CHECK
MONEY ORDER			TRANSMIT ORIGINAL
BOND		SYMBOL	ORIG. REG. MAIL
TRAV. CHECK		AMOUNT	TO G. A. O.
FOREIGN CURRENCY		DATE	MUTILATED
U. S. CURRENCY		BANK OR PLACE OF ISSUE	TO ISSUING AGENCY
		PAYEE	
		REMITTER OR DRAWER	

TALLY NO. <i>737</i>	ORIG. NO. OF PKGS. <i>1</i>	EXAMINING DATE <i>10 Sept 45</i>	BOX NO. <i>1</i>	SHEET <i>1</i> OF <i>1</i> SHEETS
NAME <i>D. T. WASH</i>		A. S. N. <i>✓</i>		
ORGANIZATION <i>-</i>		RANK <i>✓</i> CASE NO.		
WAREHOUSE SPACE <i>797</i>	EXAMINED BY <i>Anthony</i>	DIARY REMOVED		
PACKAGE DESCRIPTION <i>1 Pkg.</i>	PACKED BY <i>M. S. ...</i>	PHOTO FILM REMOVED		
WEIGHT	INSPECTED BY <i>P</i>	MOTION PICTURE FILM REMOVED		
	STORED BY <i>M. S. ...</i>	SHIPPED		
		DATE <i>DEC 19 1945</i>	BY WHOM <i>WR</i>	

ADDITIONAL REMARKS

REMOVALS (other than G. I.)

DAMAGES (List type of damage-extent)

SHORTAGES

U. S. GOV'T CHECK SHORT

NUMBER

DATE

SYMBOL

AMOUNT

I certify that the above items were not in the containers inventoried by me.

INVENTORY CLERK

SUPERVISOR

G. I. REMOVED

NAME

WALSH, D. T.

BAY

PALLET

BOX

TALLY

8

1

737

TYPE OF PKG.

WHSE. SPACE

INVENTORIED

GRB



SPQDK 210.87

RTB:LD:lw  
26 December 1945

12-14 ng

SUBJECT: Disposal of Personal Property

TO: Officer in Charge  
Personal Effects Distribution Center  
Farragut, Idaho

1. The Army Effects Bureau has received personal property marked as belonging to D. T. Walsh, whom the A.G.O. is unable to identify as a member of the United States Army.

2. Inclosed is a Graves Label and a W.D., A.G.O. Form No. 54 which were received with the property.

3. Subject property, contained in one package, was forwarded this date to you.

FOR THE EFFECTS QUARTERMASTER:

2 Incls: a/s

R. T. BROWN  
1st Lt., QMC  
Chief, Adm. Division

**ARMY SERVICE FORCES**  
**KANSAS CITY QUARTERMASTER DEPOT**

661 HARDESTY AVENUE  
 KANSAS CITY 1, MISSOURI

(S-10-26-45)

RTB:LD:bb

Date 27 September 1945

File No. SPQDK 220.87 (550015)

**M E S S A G E F O R M**

Office of Origin ARMY EFFECTS BUREAU  
 (Division)

Administrative  
 (Branch)

Correspondence  
 (Section)

Address \_\_\_\_\_

TO: [

The Adjutant General  
 Casualty Branch  
 Washington 25, D. C.

**P R E C E D E N C E**

P R E C E D E N C E				E S S E N T I A L M I L I T A R Y M A I L	
TWX	TEL	RAD		Air Mail	
Urgent				Special Delivery	
Priority				Ordinary	
Routine				Registered	
Deferred					
Week end					

Any message not "X'd" for precedence will be sent "Deferred."

Initial \_\_\_\_\_

**Messages**

1. Attention is invited to inclosed copy of Graves Registration Label, and W.D. A.G.O. form no. 54, Inventory of Effects, signed by John R. Nolan, 1st Lt., QMC, 109th QM (GR) Platoon, in the case of D. T. Walsh, indicating that D. T. Walsh was killed in action.

2. This Bureau has not on file an official casualty report in this case. It is requested such report be furnished this Bureau as soon as practicable.

FOR THE EFFECTS QUARTERMASTER:

Incl.-a/s



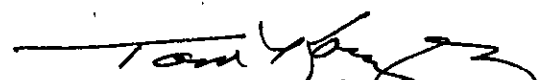
R. T. Brown  
 R. T. BROWN  
 1st Lt., QMC  
 Chief, Adm. Division

SPXPC-S 220.87                      1st Ind.                      / TK/jk/4627  
 (27 Sep 45)  
 ASF, AGO, Washington 25, D. C., 20 October 1945.

TO: Effects Quartermaster, Kansas City, Missouri.

Thorough investigation has been made and individual referred to as D. T. Walsh cannot be identified as being a member of the Army of the United States from the information furnished.

For the Chief, Casualty Branch:



TOM KOUZES, 1st Lt., AGD,  
 OIC, Spec Ident Sub-Sec,  
 Status Review & Det. Sec.

1 Incl:  
 n/c

0817 23145

MO.

BUREAU

ST. LOUIS

MO.

Eff. OM Form 37 (28 June 45)					EXPEDITE MEMO - TO WAREHOUSE DIVISION				
DATE			PRIORITY		CASE NO.				
27 November 1945					550 015				
NAME (OR TALLY)									
Walsh D. T.									
A.S.N.			RANK		STATUS				
					D				
TALLY NO.		BAY	PALLET	BOX		TYPE CONTAINER			
737			8	1		GRB			
WHSE. LOCATION (POST-INVENTORY)			REQUESTED BY			APPROVED BY			
797			Section 5						
<input type="checkbox"/> COMPLETE INVENTORY									
<input type="checkbox"/> TRANSMITTAL INVENTORY									
<input type="checkbox"/> CLEAN BLOOD STAINED ITEMS									
<input type="checkbox"/> ATTACH ALL PAPERS									
<input type="checkbox"/> CHECK FOR ADDITIONAL INFORMATION									
<input type="checkbox"/> DO NOT LAUNDRER OR CLEAN									
<input type="checkbox"/> LAUNDRER AND CLEAN IF NECESSARY									
<input type="checkbox"/> DETERMINE IF OWNER IS									
<input type="checkbox"/> FLAG TALLY IN									
SHIP	NAME								
TO	ADDRESS								
REMARKS: A.C.M. DIV. It is requested by this office that ring in warehouse space 797 be examined and a full description be forwarded this office.									
REMARKS: WHSE. DIV. 1 yellow (Gold?) hand ring w/ worn engraving and small white stone set in center. no information in ring MFR.									

**ARMY SERVICE FORCES  
KANSAS CITY QUARTERMASTER DEPOT**

601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

(S-10-26-45) ✓

RTB:LD:bb ✓

Date 27 September 1945

File No. SPQDK 220.87 (550015) ✓

**M E S S A G E F O R M**

Office of Origin: ARMY EFFECTS BUREAU

Administrative

Correspondence

(Division)

(Branch)

(Section)

Address

TO:

The Adjutant General  
Casualty Branch  
Washington 25, D. C. ✓

**P R E C E D E N C E**

TWX				TEL		RAD		ESSENTIAL MILITARY MAIL	
Urgent						Air Mail			
Priority						Special Delivery			
Routine						Ordinary			
Deferred						Registered			
Week end									
Any message not "X'd" for precedence will be sent "Deferred."								Initial	

Message:

1. Attention is invited to inclosed copy of Graves Registration Label, and W.D. A.G.O. form no. 54, Inventory of Effects, signed by John R. Nolan, 1st Lt., QMC, 109th QM (GR) Platoon, in the case of D. T. Walsh, indicating that D. T. Walsh was killed in action. ✓

2. This Bureau has not on file an official casualty report in this case. It is requested such report be furnished this Bureau as soon as practicable. ✓

FOR THE EFFECTS QUARTERMASTER: ✓

Incl.-a/s ✓

R. T. BROWN ✓  
1st Lt., QMC ✓  
Chief, Adm. Division ✓

Serial No. UNK Name WALSH, D.T.

Grade UNK Rank UNK

Organization UNK

Address UNK

Nearest Relative UNK

Address UNK

Killed in Action UNK Died of Disease UNK

Date UNK Hospital UNK

Battle Area TULAGI BSL Information UNK

Place of Burial USN + USMC CAMP No 1

Point of Coordination TULAGI BSL

Description of Body UNK

UNK

Members Missing UNK

UNK

Signed UNK

## INVENTORY OF EFFECTS - AR 600-550

1. LAST NAME - FIRST NAME - MIDDLE INITIAL <b>WALSH, D.T.</b>	2. ARMY SERIAL NUMBER	3. GRADE	4. DATE OF DEATH
--	-----------------------	----------	------------------

5. ORGANIZATION OF DECEASED (Assigned) <b>Unknown</b>	6. PLACE OF DEATH <b>Tulagi</b>
--	------------------------------------

7. CLASS I EFFECTS - SABER, INSIGNIA, DECORATIONS, MEDALS, CAMPAIGN CITATIONS, WATCHES, MANUSCRIPTS AND OTHER ARTICLES VALUABLE CHIEFLY AS KEEPSAKES. (If necessary Class I Effects may be included and listed under 8.)

NUMBER	DESCRIPTION OF ARTICLE	NUMBER	DESCRIPTION OF ARTICLE
1	<p style="font-size: 1.2em; margin: 0;"><b>One Ring</b></p> <p style="font-size: 1.2em; margin: 0;">//////////////////Last Item//////////////////</p>		

8. CLASS II EFFECTS - MONEY, BANK DRAFTS, CHECKS, MONEY ORDERS, PERSONAL EFFECTS, BILFOLD ETC.

NUMBER	DESCRIPTION OF ARTICLE	NUMBER	DESCRIPTION OF ARTICLE
	<p style="font-size: 1.2em; margin: 0;">//////////////////Nothing//////////////////</p>		

ENTER TOTAL AMOUNT OF CASH OR EQUIVALENT HERE:

FOR USE OF IMMEDIATE COMMANDING OFFICER OF ORGANIZATION SECURING-EFFECTS

9. CHECK HERE IF EFFECTS SENT TO THE EFFECTS QUARTERMASTER, ARMY EFFECTS BUREAU, KANSAS CITY QUARTERMASTER DEPOT, KANSAS CITY, MO. <small>NOTE: DO NOT SEND PERSONAL EFFECTS OF PERSONNEL DECEASED WITHIN THE UNITED STATES TO THE EFFECTS QUARTERMASTER.</small>	YES	11. I CERTIFY THAT THE FOREGOING INVENTORY COMPRISES ALL THE EFFECTS OF ABOVE NAMED DECEASED.  <div style="text-align: right; font-family: cursive; font-size: 1.5em; margin: 0;"><i>John R. Nolan</i></div> <small>SIGNATURE</small>
--	-----	---

10. EFFECTS ARE TO BE DELIVERED OR SHIPPED IN ACCORDANCE WITH A.M. 112  IF EFFECTS DELIVERED TO LEGAL REPRESENTATIVE MAKE ENTRIES HERE. NAME ADDRESS CITY AND STATE DATE DELIVERED	NAME AND GRADE <b>JOHN R. NOLAN., 1st Lt. QMC</b> ORGANIZATION <b>109th QM (GR) Platoon</b> 12. SIGNATURE OF RECIPIENT OR SUMMARY-COURT OFFICER
--	---

# REPORT OF SUMMARY COURT - AR 600-550

13. THE FOLLOWING AMOUNTS DUE THE ESTATE OF THE DECEASED WERE COLLECTED

DATE	AMOUNT	RECEIVED FROM	DATE	AMOUNT	RECEIVED FROM
	\$			\$	
		TOTAL			

14. THE FOLLOWING CLAIMS AGAINST THE ESTATE OF THE DECEASED WERE PAID

DATE	AMOUNT	PAID TO	DATE	AMOUNT	PAID TO
	\$			\$	
		TOTAL			

15. OTHER TRANSACTIONS, INCLUDING SALE OF EFFECTS. REPORT EACH TRANSACTION IN DETAIL (See AR 600-550). NOTE: STOCKS, BONDS AND OTHER COMMERCIAL PAPER WILL NOT BE CONVERTED INTO CASH, BUT SENT TO THE ADJUTANT GENERAL WITH THIS REPORT IN CASE OF DOMESTIC DECEASE. FOR OVERSEAS CASUALTIES THESE EFFECTS WILL BE SENT TO THE EFFECTS QUARTERMASTER.

ENTER AMOUNT OF MONEY REALIZED FROM SALE OF EFFECTS HERE IN WORDS AND FIGURES.

\$

16.

**RECEIPT FOR FUNDS**

PROCEEDS OF SALE OF PROPERTY OF DECEASED MILITARY PERSONNEL (AR 600-550)

*(Normally not to be used for overseas casualties under Par. 16, W.D. Circular 195, 1943. Send Check to Effects Quartermaster.)*

APPROPRIATION TO BE CREDITED BY DISBURSING OFFICER	AMOUNT <i>(In words and figures)</i> DEPOSITED WITH DISBURSING OFFICER
DATE, ORGANIZATION AND LOCATION OF DISBURSING OFFICER	SIGNATURE AND TYPED NAME AND GRADE OF DISBURSING OFFICER
17. DATE APPROVED BY COMMANDING OFFICER	18. DATE AND LOCATION
SIGNATURE OF COMMANDING OFFICER	SIGNATURE OF SUMMARY COURT OFFICER
TYPED NAME AND GRADE	TYPED NAME, GRADE AND ORGANIZATION