1. FILE UNDER NO.

293 - Unk. Guadalcanal X-69

SYNOPSIS

2. TYPE OF DOCUMENT:

1st Ind

3. DATE:

13 Jan 49

4. FROM:

OUMG

5. TO:

CO, American GRS, Pacific Zone, APO 958, Sam Francisco, Calif.

6. SUBJECT:

Resolution of Unidentified Remains.

7. DOCUMENT FILED UNDER NO.

293 - Unk. Guadalcanal (Mass) (I-68, 69, 98)-

mfs

INSTRUCTIONS.—Enter after the above headings information as follows:

- 1. File classification under which this cross-index sheet is to be filed.
- 2. Appropriate term, such as: "ltr," "memo," "1st ind," etc.
- 3. Date of Document.
- 4 and 5. Enter either or both, as applicable.
- 6. Brief and comprehensive synopsis of the content or subject matter.
- 7. File classification under which the document is filed.

CONDITION OF REMAINS

SKELETAL

NATURE OF BURIAL CASKET

OTHER MEANS OF IDENTIFICATION

GRAVE MARKER & MORTUARY TAG MINOR DISCREPANCIES I

NONE

REMAINS PREPARED AND PLACED IN CASKET

R.W. RALSTON, EMBALMER

CASKET SEALED BY

IRA J. VONK

2 July 1948

DATE

EMBALMER (Signature)

R. W. RALSTON SHIPPING ADDRESS VERIFIED BY

CASKET BOXED AND MARKED

DATE 2 July 48 BY IRA J. VONK

A. J. ROBERTSON

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

L. MURYHY, CAPT, QMC

SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

QMC FORM REV 15 MAR 46 1194 2,20

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l. This case Unknown X-69, Cuadalcanal has been reviewed and the recommendation of the Field as unidentifiable, due to lack of sufficient identifying data is approved.

2. These remains were (transferred

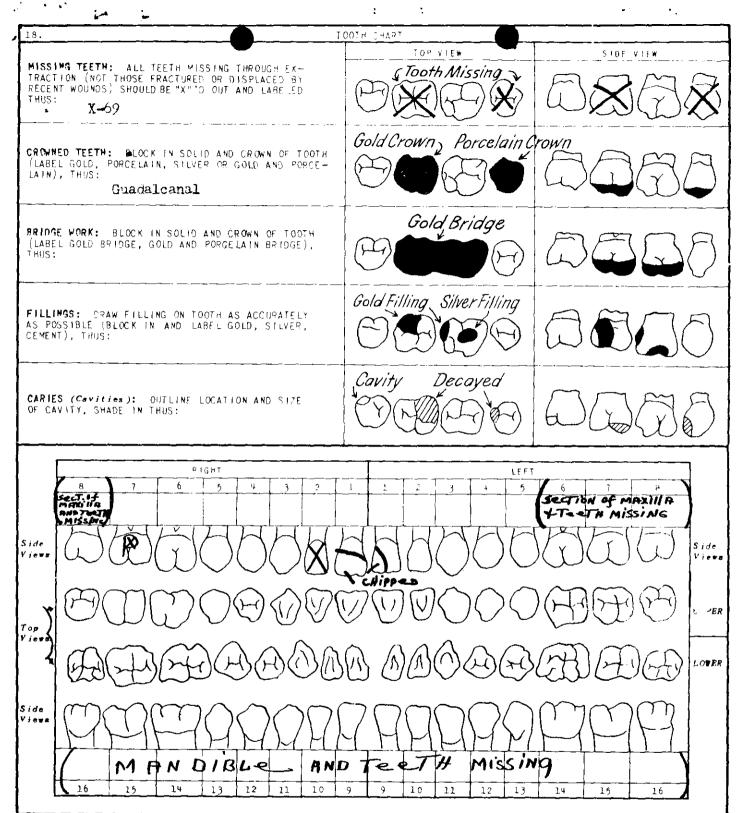
				<u>, , , , , , , , , , , , , , , , , , , </u>		
	IDENTIF	ICATION DATA				
1. REMAINS OF UNKNOWN				2. DATE OF REPOR	T .	
X-69 Guadalcar			2 February	1948		
3. NAME OF CEMETERY	+. PLOT 5. R	OW 6. GRAVE	7. DATE			
U. S. Army Mausole	Ē	3 152	DISINTERMENT RE	INTERMENT		
Formerly of Guadalcanal		B 58	8	30 Jan. 48 2	Feb. 48	
<u></u>	PHYSI	CAL DESCRIPTION A	re 22-24 yr	's.		
8. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR OF	1A IR	11. RACE		
150 lbs.	· · · · · · · · · · · · · · · · · · ·		U.T.D.		Probably White	
12.GIVE DESCRIPTION OF ANY	OFFICIAL IDENTIFICATION FO	OUND WITH REMAINS				
Plot B, Row 58, Gr	plate on casket read ave 8.			n kana terangai kalangai kalangai anta kanada da	,	
13.GIVE DESCRIPTION OF TATE	DOS OF SCARS ON BODY AND/			MOTHER SOURCES	A	
None	and By					
14. WAS BODY BURNED?	TO WHAT EXTENT?		7			
YES NO						
15. WAS BODY MANGLED?	TO WHAT EXTENT?					
YES X NO	<u> </u>					
16. DESCRIBE EVIDENCE OF HE	ALED FRACTURES AND BONE M	ALFORMATIONS			l	
None						

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

One pocket watch sent to lab for further examination.

UNIDENTIFIABLE

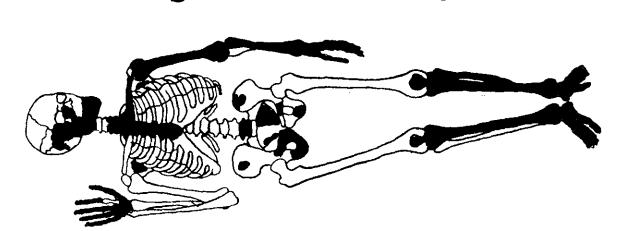
NOV 3 1941



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

There are two upper left molars present with restorations. The smaller of the two has an occlusal cavity. These molars may or may not belong to this body.

Spacing of upper anteriors



20. MASS BURIAL CERTIFICATE (1F APPLICABLE)
(Wherein segregation in whole or parts is impossible)

No extra parts.

Charles E. Snow SIGNATURE OF MEDICAL OFFICER Anthropologist

H

21. REMARKS AND ADDITIONAL INFORMATION

Picture a rather tall young man with average body build. The skull is a small average in size and has a short, broad oval outline. The backhead is rather flat. The forehead is broad, prominent and has little slope. The fragments of the upper face indicate a rather narrow face. The palate is narrow. The upper lip was probably short.

Fluoroscopic examination negative. Tooth chart completed.

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

SIGNATURE

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

O. W. GREENWOOD, CAPT., QMC

CENTRAL IDENTIFICATION LABORATORY

OMC FORM 10446

Ourgreenward

	CENTRAL		NTIFICA	TION LABORATORY & SOLEUM BONE LIST
NAME	SIDE	но	BONE LEN	IGTHS REMARKS
SKULL		1	approx 8	All present except portion of both temporal nasal, portions of the mexilla, malar and all of the mandible is missing except the
	CERVICAL	4		mandibular head. Nos. 2. 6 & 7 missing.
VERTEBRAE	THORACIC	12		
- <u></u>	LUMBAR	4		No. 5 missing.
SACRUM		1		Fractured. Left auricular crest missing.
INNOMINATES	RIGHT	1_	of Preside	61AM Fractured, pubis & portion of ischium missi
	LEFT	1	27.2	Fractured portion of ilium & pubis missing
RIBS		24		Fractured.
STERNUM		0		Missing.
CLAVICLES	RIGHT	1	14.6	
	LEFT	0	<u> </u>	Hissing
SCAPULAE	RIGHT	1	 	Fractured, portion of inferior angle missing
	LEFT	1	ļ	Fractured, portion of inferior angle missin
HUMERI	RIGHT	1	35,2	
	LEFT	0	ļ	Missing.
RADII	RIGHT	1	26.4	
	LEFT	0	 	Missing.
ULNAE	RIGHT	1	28.1	
	LEFT 1		28.0	
HANDS	RIGHT	0	 	All mmssing except #2 metatarsal.
	LEFT			Missing.
FEMORA	RIGHT LEFT	1	51.6 52.0	
	RIGHT	0		Missing.
PATELLAE	LEFT	0	 	Missing.
	RIGHT	0		Missing.
TIBIAE	LEFT	0		Missing.
	RIGHT	1	39.6	
FIBULAE	LEFT	0		Missing.
	RIGHT	0		Missing
FEET	LEFT	0		Missing
HUMERO-CLAVICULAR RATIO		41.5	A PPROX IMATE	
ESTIMATED HEIGHT	177.9 70	n.1	AGE	LEG-HIP BR RATIO 52.5
	11/00 1	7 • •		

Charles E. Snow ANTHROPOLOGIST

GP - AGRS 2 1

ENCLOSURE TO: X-69 GUADALCANAL

CENTRAL IDENTIFICATION LABORATORY

CHEMICAL LABORATORY FINDINGS

for

IDENTIFICATION

			2,2,800	Date	
Unknown X69 (Guadalcana	1)				
U.S. Army Meusoleum #1, Location in Mausoleum	Row B, Grave 152, Guad	alcanal	Organization		
Place of Death	Place of Burati	Plot	B	152 Grave	
FINGLOSSI					
SPECIMEN SUBWITTED: Pocket	watch in corroded con	dition			
FINDINGS: Movement of water	ch revealed the followi	ng informati	on:		
MADE IN					

Gottens & Signature

U.S.A.

F 4457830

- MAJOR DISCREPANCY -

GUADAL CANAL

```
Seiden, Bernard
Pfc. 344928

X Unknown 65 ) Previously processed
X Unknown 66 ) Common Grave No. 5.

X Unknown 67
X Unknown 68
X Unknown 69

Kimmel, J. L. )
285308 USMC )-- Final Type
"A" T-5-41
```

The above mentioned cases were processed simultaneously in an effort to associate the many non-articulating skeletal parts that were found with each case.

After a careful examination of each case involved and many skeletal inter-changes, the following named extra non-articulating parts could not be associated with any of these cases and have been removed and classified as CIL X Unknown 538.

```
One (1) right innominate bone with pubis missing.

One (1) left innominate bone.

One (1) sacrum (fragmentary).

One (1) right femur minus the section of the upper shaft.

One (1) left femur minus the upper 1/2.

One (1) right tibia.

One (1) left tibia.

One (1) right fibula.

One (1) pair feet bone; one (1) pair calcanei, one (1) pair tali, one (1) pair cuboids, one (1) pair naviculars, one (1) pair nos.,

1, 2, & 3 cuneiforms, one (1) pair nos., 1, 2, 3, 4, & 5 metatarsals.
```

ONC Form
No. 1-GRS.

IDENTIFICATION SECTION REPATRIATION RECORDS BRANCH RETURNAL DIVISION

REPORT OF HITERAENT

(To be submitted through channels to the Guartermaste (Par. 21d - TM 10-630)

CATEGORY III CASE NO CLUES IDENTIFICATION IMPOSSIBLE AT PRESENT TILE

United Name | Contract | Contract

INIDENTIFIABLE

NOV 3 1949

Summeric and, J.L. Subbar 1, 19,2

(Flace of Death) (Date of Death)

(Cause of Death)

On Marker:

(rebunied) (1755)m.mat 7, 193 (d/ rhensal by-..vg-.chic obstace)

(Time & Date of Burial)

(Flace of Burial - Name & No. of Cemetery)

5 Stormland Storm With Pody:

(Grave No.) (Row No.) (Plot No.) (Kind of Grave Marker) (Identification Tags)

.losk.Coco ກ່ວາຍພິ+ກວ ເປັນເຮັດກ່ຽນກ່ານ ການ ຄວາມ ຍົວໄຫຼ-1 ກ່ວຍເພື່ອນ ຮັບ ຮັດ - 11ຄົ້າຄົວກ່ວນຄົນພິດ, out ຮ້ອຍຮັດ, ຄວາມຮັ

was worked him and his and involve the interest of the

Other partinent data to enable grave to be located. (Where necessary sketch to locate grave should be furnished)

Unition in Company of Company to

(Name and address of Emergency Addressee) (Name and address of legal next of Kin)

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