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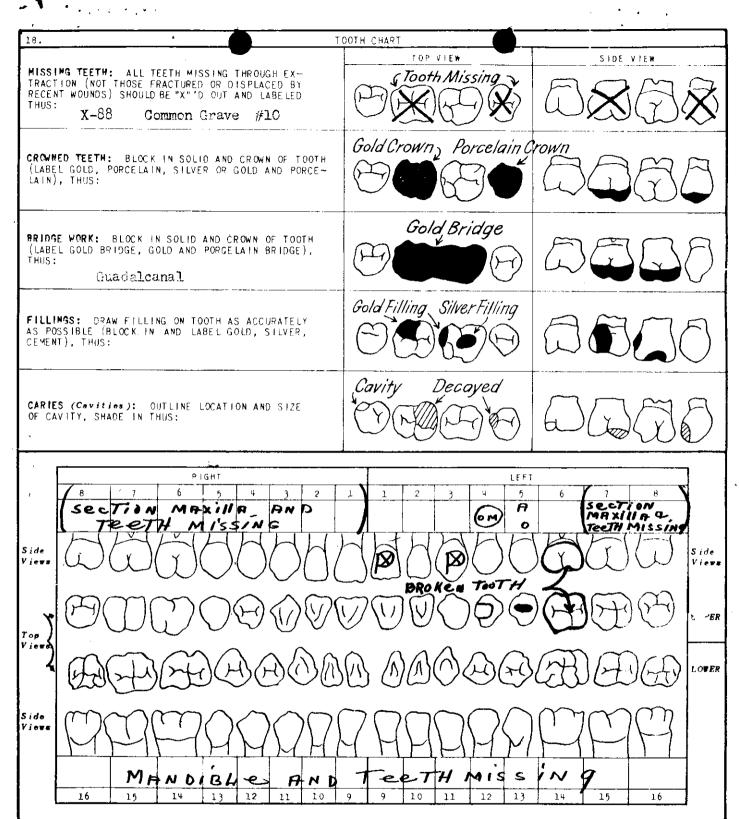
| The state of the s | | | | * |
|--|--|----------------------------------|------------|---|
| | · DENTIFI | CATION DATA | | • |
| 1. REMAINS OF UNKNOWN UNKNOWN Z-88 COMM | non Grave # 10 | A 4ma | | 2. DATE OF REPORT 9 February 1948 |
| 3. NAME OF CEMETERY | 1 | 4. PLOT 5. ROW | 6. GRAVE | 7. DATE OF |
| U.S. Army "ausoleum Formerly of | n # 2 | A | 72 | DISINTERMENT REINTERMENT |
| Guadelcanal | | B 76 | 10 | 9 Feb '48 9 Feb '48 |
| | | AL DESCRIPTION Apr | rox. Ag | es 25 = 27 |
| 8. ESTIMATED WEIGHT | | 1 | | |
| 160 - 170 lbs. | 5° 10-3/4" OFFICIAL IDENTIFICATION FOR | Unable to dete | rmine. | Probably White. |
| C.G. 10. | ites reading: Unknown | | | 1 Cemetery, D.D. 8730, |
| C.G. 10. One (1) embossed pla | tes reading: Unknown | n X-88, X-89, Gus | ; - B, R | ow = 76, Grave - 10. |
| C.G. 10. One (1) embossed pla | ites reading: Unknown | n X-88, X-89, Gus | ; - B, R | ow = 76, Grave = 10. |
| CoG. 10. One (1) embossed pla 13.GIVE DESCRIPTION OF TAR | tes reading: Unknown | X-88, X-89, Gus X-88, X-89, Plot | = B, Re | ow - 76, Grave - 10. |
| C.G. 10. One (1) embossed pla 13.GIVE DESCRIPTION OF TAR None. | tes reading: Unknown tes reading: Unknewn TOOS OR SCARS ON BODY AND/OR | X-88, X-89, Gus X-88, X-89, Plot | AINED FROM | OW - 76, Grave - 10. OTHER SOURCES |
| C.G. 10. One (1) embossed pla 13.GIVE DESCRIPTION OF TAR None. | tes reading: Unknown toos or scars on Body and/or | X-88, X-89, Gus X-88, X-89, Plot | AINED FROM | OW - 76, Grave - 10. OTHER SOURCES |
| C.G. 10. One (1) embossed pla 13.GIVE DESCRIPTION OF TAT | tes reading: Unknown tes reading: Unknewn toos or scars on Body and/or | X-88, X-89, Gus X-88, X-89, Plot | AINED FROM | OW - 76, Grave - 10. OTHER SOURCES |
| CoG. 10. One (1) embossed pla 13.GIVE DESCRIPTION OF TAT None. 44. WAS BODY BURNED? YES X NO | tes reading: Unknown tes reading: Unknewn toos or scars on Body and/or | X-88, X-89, Gus X-88, X-89, Plot | AINED FROM | OW - 76, Grave - 10. OTHER SOURCES |
| C.G. 10. One (1) embossed pla 13.GIVE DESCRIPTION OF TAT None. 14. WAS BODY BURNED? | tes reading: Unknown toos or scars on Body and/of | X-88, X-89, Gus X-88, X-89, Plot | AINED FROM | OW - 76, Grave - 10. OTHER SOURCES |

None.

One (1) Brown G. I. Shoe size 8 E (right).

Incl 1

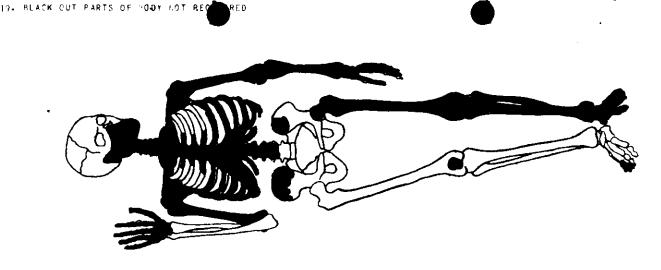
^{17.} LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)



DENTURES (Pietes): 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."

Remarks:

- 1. Peg shaped L-2.
- 2. L-h and L-5 are in slight torsi version.



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:

No extra parts.

Charles E. Snow.

SIGNATURE OF MEDICAL OFFICER Anthropologist

21. REMARKS AND ADDITIONAL INFORMATION

Picture a tall man, in his middle twenties, who walked toeing out.

The skull is average in size and oval in outline.

The backhead is steep and flat.

The forehead is rather narrow with slight slope.

The vault is high.

It appears the face was probably straight, with flat sides.

The nose appears to have been rather prominent and skewed to the left.

It cannot be demonstrated that this skull belongs to the post cranial skeleton.

Teeth charted. X-Ray negative.

I CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS OF DECEASED AND THAT ALL RESULTING INFORMATION HAS BEEN RECORDED TO THE BEST OF MY KNOWLEDGE.

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

SIGNATURE

O. W. GREENWOOD, CAPT. OMC CENTRAL IDENTIFICATION LABORATORY AND MAUSON CM. APO 957

ongremood

| | CENTRAL | | | ON LABORATORY & SOLEUM NE LIST |
|------------------|------------------------|-----------------|---------------------------------------|--|
| NAME | SIDE | но | BONE LENGTH IN CM | REMARKS (IF MISSING OR FRACTURED, LIST PARTS AND LOCATION) |
| SKULL | | 1 | 53.3 | Mandible missing. |
| | CERVICAL | 0 | | |
| VERTEBRAE | THORACIC | 0 | | |
| | LUMBAR | 1 | | |
| SACRUM | | 1 | | Fragment. |
| LEMONINA TEO | RIGHT | 1 | BI-ILIAC DIA | |
| INNOMINATES | LEFT | 1 | | Fragment. |
| RIBS | | 6 | | |
| STERNUM | | 0 | | |
| al Allas To | RIGHT | 0 | | |
| CLAY ICLES | LEFT | 0 | · · · · · · · · · · · · · · · · · · · | |
| | RIGHT | 0 | | |
| SCAPULAE | LEFT | 0 | | |
| | RIGHT | 0 | | |
| HUMERI | LEFT | 0 | | |
| 04014 | RIGHT | 1 | (26.0) | |
| RADII | LEFT | 0 | | |
| ULNAE | RIGHT | 1 | (28.0) | |
| ULRAC | LEFT | 0 | | |
| HANDS | RIGHT | 0_ | | |
| | LEFT | 0 | | |
| FEMORA | RIGHT | 1 | 50.0 | |
| | LEFT | 0 | | |
| PATELLAE | RIGHT | 0 | | |
| | LEFT | 0 | 40.0 | |
| TIBIAE | RIGHT | 1 | 40.0 | |
| | | 0 | 70 5 | |
| FIBULAE | RIGHT | * - | 39.5 | |
| | LEFT | 1 | | |
| FEET | RIGHT | | | |
| HUMERO-CLAVICULA | R RATIO | 0 | AI | PPROX IMATE |
| ESTIMATED HEIGHT | 180 - 70.8 5' 10-3/ | | AGE | 25 - 27 YEARS |
| ESTIMATED WEIGHT | 160 - 170 |) 15s. | LEG | 3-HIP BR RATIO |
| ENCLOSURE TO | : Unknown | X-88 • | • | Charles E. Snow ANTHROPOLOGIST |

GP - AGRS 2 1

CENTRAL IDENTIFICATION LABORATORY

9 February 1948

NARRATIVE

The remains tagged as Unknown X-88, X-89; Guadalcanal
D. D. 8730. Common Grave # 10 were in Major Discrepancy Box # 72.

These remains were processed simultaneously and it was found there were parts of three (3) remains.

By matching, articulating and age criteria, these remains are marked X-88; X-89; and X-89 A. The remains X-88 and X-89 have skulls and fragments of mandible and maxilla, but it cannot be demonstrated that the skull goes with the Post Cranial bodies of either. Each remains was completely processed and wrapped separately and returned to their respective casket.



CATEGORY III CASE NO CLUES IDENTIFICATION INPOSSIBLE AT PRESENT TILE

Graves Registration Form No. 1

REPORT OF INTERMENT

| Revised Mayll, | 1943) | (TM 10-630 AND AR 30- | -1815) | 7. Super |
|--|---------------------|--|---|--|
| UNIDENTIFIED F | ODIES #88 & | #89 | Mr. v | |
| (Last Name) | (First) | (Initial) (Serial | #) (Rank) (Organiz | cation) |
| Guadalcanal, S | •I• | و با ۱۹۰۰ تا نه این که شهد او دن در دو در در در در در در | | والمراجع في فراد في الأسوار مرا |
| Place of Death |) : | (Date of Death) | (Cause of | Death) |
| 0830-15 Mar 44 | (Reburial) | Guadalcanal Arm | y-Navy-Marine Cemetery | |
| Time and Date | of Burial) | (Name of Cemetery) | (Name or coordinat | tes of location) |
| 10 | 76 | 4B0 | Standar | d |
| (Grave Number) | (Row Num | ber) (Plot Number) | (Type of marker-Regular shaped or other | |
| | | on tags: Buried with | Body Yes No I X Attached to marker Yes | es i No III |
| | بدنين عوب جهوه عيمه | د در ۱۰۰۰ میلی در این | fication are buried wi | th body?) |
| Flesh decompos | ed-no identi | ifying marks-impossibl | e to take fingerprints | or tooth chart |
| (If no identifi | cation tags, | but identity definite | ely estab., give partic | culars) |
| Body buried on I | RIGHT End of | Row. | . , | · |
| 304, 24, 40 | (| Name) (Serial # | (Rank) (Orgn) | (Grave #) |
| Body buried on 1 | left John J. | . McCloskey, 0-885317. | Capt., USAAF-419 NF S | <u>9</u> |
| | (| Name) (Serial # |) (Rank) (Orgn) | (Grave #) |
| Barto con y one majorio agos con materiales gentos o trasperio | | - The state of the | و شهوران هی س ے بنیا ہے۔ کے کیوانی جب سیاسے جبلا سے بنیا ہے۔ اس سیاسہ سیاسہ سے ا | mark gant to the Samuel of Games patterning plants gath leady dates (1988) |
| (Name and addre | ss of EMERGE | NCY ADDRESSEE) (Name | and address of LEGAL | NEXT OF KIN) |
| List only perso | nal effects | FOUND ON BODY and disp | position of same: | |

| (Signature of Officer or other person reporting burial) | |
|--|--|
| 1/ 1st Charles Apart | THE |
| S AN ISOLATED BURIAL, ATTACH A SKETCH OF SOLENTED WITH PERMANEUT LANDMARKS. | |
| - 1 | |
| | |
| w any identifying clues found, such as photographs, probable organization of etc.: | |
| N | N |
| s, moles, deformities, etc.: | |
| ble, have medical personnel take a tooth chart) | lissoq M) |
| of eyes: Number of rifle: The first glasses? The footh chart | AfgleW Tolo0 Tolo0 Tolo0 Tolo0 General |
| | • (\$\\43) 1. To Viam 1. To Viam Height |
| IL DECEVEED ANIDENLILIED | |

(Verified by Army GRS Officer)

| Overseas Cemetery GUADALCANAL, | Solomon Is. | U.S. Nation Cemetery of Final Burial | | | |
|--|--------------------------------|---|--|---------------------------|--|
| Group Burial Number Number of Remains In Group 3 | | | Number of Caskets 3 | | |
| NAME | RANK | SERIAL NUMBER | ORGANIZATION | DISINTERMENT DIRECTIVE NO | |
| GROUP BURIAL UNE. X- | -88 | | | 8730 GB-10 | |
| " UNK. K- | -39 | | | 79 | |
| " UNK. X- | .89A | | | 11 | |
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| lout in diplicate f de room to be coaled pping envelope. | separately in | я | | , l | |
| Anvelope to be atte ond envelope to be t pring case. | ched to handl acked to outs | e of casket. ide of | R.L. | Inasy | |

н.

QMC Form 1233

| , , , , , , , , , , , , , , , , , , , | | | | | | | |
|--|---------------------------------------|--|---------------------------------------|---|---------------------|---------------------------------------|---------------------------------------|
| WD OMC FORM 1042 (Rev. 1 Apr. 1945) | | REPORT OF | INTERMEN | T | DATE | OF REPORT | . |
| (Supersedes GRS Form 1) | | (AR 30-1810 an | | • | ı | July 19 | 949 |
| Imprint Identification T | | Section 1.—IDENTIFICATION. | | | | · · · · · · · · · · · · · · · · · · · | |
| DO NOT TY | | NAME (Last, first, middle initial) | | | SERIAL | L No. | |
| Matted | $\frac{1}{\lambda}$: λ | | (GUADALC | _ | Timi | | |
| 11-88 | D N | UNKNOWN X-88 | · | CIFIABLE) | | knewn | |
| (11-19) | JA O | GRADE | ORGANIZATION | | BRANL | CH OF SERVI | CE |
| 100 | 1 | Unknown | Unknown | | Uni | knewn | |
| | / | RACE | RELIGION | | IF OTHER TH | AN U.S. DEA | ID, GIVE |
| | | | | | NAME OF CO | JUNTRY | |
| TI ACC OF DEATH | | Unknown | Unknewn | | | | |
| PLACE OF DEATH | 1 | CAUSE OF DEATH | | | DATE | OF DEATH | |
| Guadalcanal, S | . I. | Unknown | | | Unl | kn own | |
| EMERGENCY ADDRESSEE (Na | | · | | | | | |
| | | - | | | | | |
| . IDENTIFICATION TAGS FOUND | 2 AH BODY | Unknown | UFANC / | TOTAL CE | 17 116.1 61 | | |
| (1, 8, or none) |) ON BODY | IF NO TAGS FOUND ON BODY, D | DESCRIBE MEANS (| OF IDENTIFICATION (2) | l unidentified, jui | l in section 3 | on reverse) |
| None | Ī | | | | | | |
| WERE SUBSTITUTE TAGS PRO | VIDED?(Yes or no) | 1 | UNIDENTI | FIABLE | | | |
| | ļ | | | | | | |
| Yes LIST PERSONAL EFFECTS FOU | THE POOL NO. | TOPONITION OF CIME | | | | | |
| LIST PERSONAL EL LOIGIT CO | אט טת אטטיו ועני | DISPUSITION OF SAME | | | | | |
| | | | | | | | |
| | | None | | | | | |
| | | | | | | | |
| Saction 2.—BURIAL If oth | her than in estab | lished cemetery, furnish sketch | h and man coord | inetes on reverse, | <u> </u> | | |
| NAME, NUMBER, COORDINATE | | | 1 2114 2000 22 | Interes was a vivial. | | | |
| | | ery of the Pacific, | Honalulu. | ጥ ከ _ | | | |
| | | 1 | | | | | |
| DATE OF BURIAL | HOUR | BURIED IN (Shroud, blanket, or na | ime of other) | TYPE OF GRAVE MARKER | PLOT No. | ROW No. | GRAVE No. |
| 13 June 1949 | 1000 | Permanent Type C | asket | Cross | Q | | 526 |
| WAS THIS A REBURIAL? | <u> </u> | INDICATE NAME, NUMBER, COORDI | | <u> </u> | <u> </u> | RAVE | |
| (Yes or no) | | | | | PLOT No. | ROW No. | GRAVE No. |
| Yes | <u> </u> | tery, Guadalcanal | | | В | 76 | 10 |
| TYPE OF RELIGIOUS CEREMONY | | TING BURIAL RITES | | ON TAGS NOT USED, URIED WITH BODY | | ITIFICATION | DATA AND |
| Catholic | | A. Fisher, Chaplai | | H | at | | |
| Protestant IDENTIFICATION TAG BURIED | WITH IDENT | Click Chaplain | | | ili | | |
| BODY (Yes or no) | MARI | RKER (Yes or no) | | | -22-49 | | |
| Yes | Ye | | | 7. | m H. | | |
| BODY BURIED ON DECEASED I | | first, middle initial) | RANK | SERIAL No. | ORGANIZATION | N GRAVE | E No. |
| Unknowns X-90, (Guadalcanal Co | | | | ļ | | 4 | 97 |
| BODY BURIED ON DECEASED I | | et first middle initial) | RANK | SERIAL NO. | ORGANIZATION | ! | |
| Unknowns X-89, | | 3) 30 00) | | , | U15044 | | - |
| (Guadalcanal Co | emetery) | | · | <u></u> | | 5 | 555 |
| SIGNATURE OF PERSON PREP | TRING REPORT | | | RS OFFICER VERIFYING | REPORT | <u>`</u> | · · · · · · · · · · · · · · · · · · · |
| Mauxant & | acey | | me | 00 7 000 | | | |
| Margaret E. Par | | Clark, HDC | | | otain. OM | | |
| DISTRIBUTION OF REPURI | : Signed origina IS Officer. Copie | al for U.S. and allied dead, sign se for retention in theater as pr | ned ofiginal and rescribed by thes | one copy for enemy (ster commander. | dead, to the Q | uartermasi | er General |

MKK

| | Section 3UNIDENTIFIED REMAIN | 2 | |
|-------------------------|---|------------------------------|---|
| LEFT LITTLE FINGER F | I blance volucion and tanks | | s for the future identity of unidentified reclues under "Other," such as shoe size, cles, and tanks; and serial numbers of airces. Imprint all fingers and thumbs in the can be secured, the condition of each and h diagram below. Tooth chart will not be |
| LEFT RING FINGER | HEIGHT WEIGHT COLOR C | | BIRTHMARKS, SCARS, OR TATTOOS |
| LEFT MIDDLE FINGER | WEAPON AND SERIAL NO. OTHER IDENTIFICATION CLUES | LAUNDRY MARKS | WHERE BODY WAS BURIED OR FOUND |
| LÈFT INDEX FINGER | FILLINGS | ILVER FILLING OLD FILLING | 3000003 |
| THUMB | CAVITIES MISSING TEETH | CAVITY DECAYED | UPPER TO 7 |
| RIGHT THUMB | CROWNED TEETH | RCELAIN CROWN | REPRESENTS THE MOUTH WIDE OPEN |
| RIGHT INDEX FINGER | BRIDGE WORK | GOLD BRIDGE | LOWER STATE IS |
| RIGHT MIDDLE FINGER | | | N OTHER THAN ESTABLISHED CEMETERY |
| RIGHT RING FINGER | 4 + | קחר ל | 7 - , |
| RIGHT LITILE FINGER | Unknown X-88/4 Gask | abll of 3) Guadalcan | al Cemetery, Sec Q. Gr 526 |

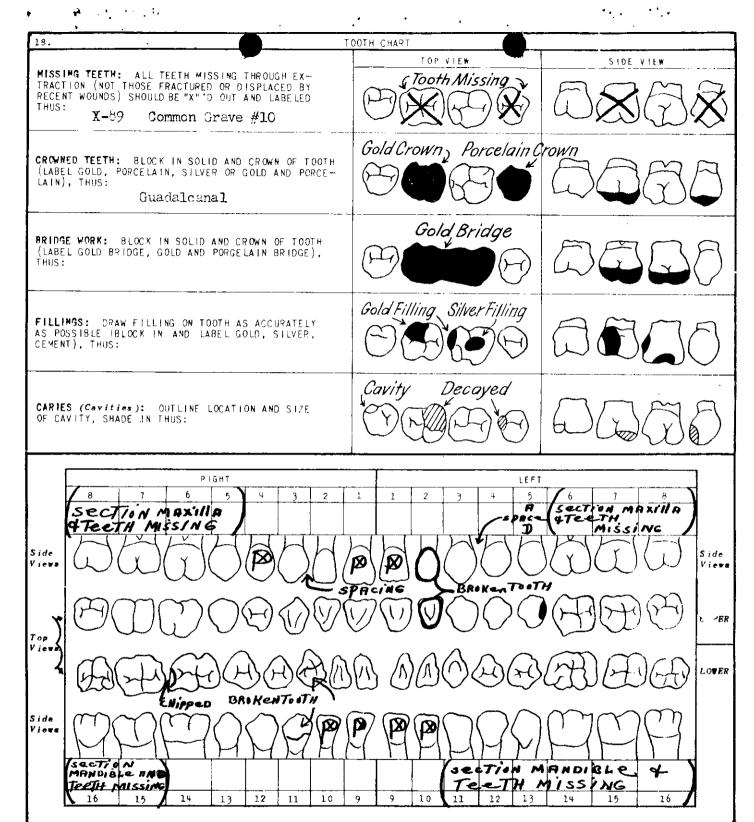
| | | _ | | | DATE | | |
|---|---|---|--------------------------------------|--|---------------------|-------------------|--------------|
| WE PMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1) | | REPORT OF | INTERMEN | T | DATE | OF REPORT | |
| (Supersedes GRS rorm 1) | | (AR 30-1810 ar | nd AR 30-18 | 15) | 1 | July 1 | 949 |
| Imprint Identification | | Section 1.—IDENTIFICATION. | | | | | |
| DO NOT TI | YPE | NAME (Last, first, middle initial) | (GUADALO | LAWAT | SERIA | AL No. | |
| | \ | UNKNOWN I-58 | T | rifiable) | u u | knovn | |
| S . | 1 | GRADE | ORGANIZATION | s de | | ICH OF SERVI | ICE |
| · | 0 | | | | | Oit 0 | |
| 1 | 1 | Unknown | Unknown | | Un | kn eva | |
| | | RACE | RELIGION | | IF OTHER TH | IAN U.S. DEA | AD, GIVE |
| | | Unknown | Unkneva | | | | |
| LACE OF DEATH | | CAUSE OF DEATH | Attantant | | DATE | OF DEATH | |
| | | | | | | | |
| Guadalcanal, S MERGENCY ADDRESSEE (N | | Unknown | | | Un | known | |
| DENTIFICATION TAGS FOUN | ND ON BODY | Unknown IF NO TAGS FOUND ON BODY, D | DESCRIBE MEANS (| OF IDENTIFICATION (I | !f unidentified, fi | Il in section 3 | ON PROGRESS) |
| _ | | | | | | | |
| TORS VERE SUBSTITUTE TAGS PRO | OVIDED?(Yes or no) | - | UNIMENT | PTARTE | | | |
| | ,, | | An Same 2 |) # #********************************** | | | |
| Yes | | | | | | | |
| JST PERSONAL EFFECTS FO | CHO ON BOD! AND | DISPOSITION OF SAME | | | | | |
| | | | | | | | |
| | | H on e | | | | | |
| | | | | | • | | |
| Section 2,—BURIAL If of | her than in estab | lished cemetery, furnish sketch | and map coord | inates on reverse. | <u></u> | | |
| IAME, NUMBER, COORDINAT | TES, AND LOCATION | OF CEMETERY | | | | | |
| Estimal Monor | rial Cometo | ry of the Pacific, | Ronelulu, | , T. I. | | | |
| DATE OF BURIAL | HOUR | BURIED IN (Shroud, blanket, or no | | TYPE OF GRAVE | PLOT No. | ROW No. | GRAVE NO. |
| | 1 | | | MARKER | 1.23 | 1.011 1.10. | OIDATE NO. |
| 13 June 1949 | 1000 | Permanent Type 0 | asket | Gross | Q | | 526 |
| AS THIS A REBURIAL? (Yes or so) | IF A REBURIAL, I | INDICATE NAME, NUMBER, COORD | INATES OF PREVIO | OUS CEMETERY, AND L | OCATION OF G | RAVE | |
| Tes | ANN Come | tory, Guadalcanal | dei | | PLOT No. | ROW No. | GRAVE No. |
| YPE OF RELIGIOUS | <u>!</u> | TING BURIAL RITES | | ON TAGS NOT USED, | DESCRIBE IDE | TAGE NETIFICATION | 10 |
| CEREMONY | 1 | | CONTAINERS B | URIED WITH BODY | | | · DRIA AND |
| Cathelic Protestant | 1 495 . 4 98 | A. Fisher, Chaplai | | | | | |
| PENTIFICATION TAG BURIER BODY (Yes or no) | D WITH IDENT | IFICATION TAG ATTACHED TO RKER (Yes or no) | | | | | |
| Yes | Ye | 16 | • | | | | |
| ODY BURIED ON DECEASED | LEFT, NAME (Last, | , first, middle initial) | RANK | SERIAL No. | ORGANIZATIO | ON GRAVI | E No. |
| Vakaowas X-90, | | | | | 1 | 4 | 97 |
| ODY BURIED ON DECEASED | | at first middle initial) | RANK | SERIAL NO. | ORGANIZATIO | | |
| Unknowns X-89, | | -, , , , | | , | Chaniballe | NI GIGAL | L NO. |
| (Gradalessal | <u>.</u> . | | | / | | | 555 |
| GNATURE OF PERSON PRE | PARING REPORT | | SIGNATURE OF | RS OFFICER YERIFYIN | IG REPORT | | |
| Margaret (| - any | , | nuo | Men | 6 | | |
| Margaret H. Pr | yray, Chief | Clerk, EDC | James 1 | | piets, q | MQ | |
| DISTRIBUTION OF REPUR through Headquarters G. | .¶; Signed origin. RS Officer. Copie | al for U.S. and allied dead, signs for retention in theater as pi | ned driginal and resoribed by the | lone copy for enemy ater commander. | dead, to the (| }uartermas: | ter General |
| | | | | | | | |

| | Section | on and | NIDTIFIED | REMAINS | <u> </u> | | | | | • • |
|-----------------|----------|---|---|--|--|--|---|--|----------------------------------|-------------------------------|
| LITTLE FINGER R | chart | ns. Fill al securit es, vehic (b) A fi t at left, v tooth v | at care will in anatomi ty number; sles, and tar | cal charac position on ks. r prints, a as possib ated on th | cteristics to the body four are the mobile. If no ne tooth ch | elow, and and in airp st valuabl fingerprid art in acc | f any other ollanes, vehicle e of all clues nt or prints co ordance with | for the future is clues under "C es, and tanks; an le secured, diagram below | Other,' such a and serial nun | s shoe size, obers of air- |
| RING FINGER | HEIGH | | WEIGHT | COLOR O | | COLOR OF | | BIRTHMARKS, S | CARS, OR TATTO | oos |
| MIDDE | | ON AND S | ERIAL No. | | LAUNDRY | MARKS | | WHERE BODY W | AS BURIED OR | FOUND |
| MIDDLE FINGER | ОТНЕ | R IDENTII | FICATION CL | is | | | | | 1 | |
| INDEX FINGER | } | | | | | | | | | |
| NGER | ' F1 | LLINGS | | GC SI | LVER FILL OLD FILLIN | NG G | 4 | 3000 | | |
| THUMB | CA | AVITIES | | | T CAVITY DECAY | Y ED | 3 | UPPE UPPE | | 5 16 7 7 |
| Тнимв | BIGHT | SSING | | | OOTH MISSII | (G | | N REPRESENTS T | HE MOUTH WI | DE OPEN |
| INDEX FINGER | _ | ROWNED | { | VUN ? | RCELAIN C OLD CROV | | 15 (15 (14 | Low | |) 15 15 4 |
| | | | S | | GOLDE | RIDGE | | | 1000 12 1000 11 | |
| MIDDLE FINGER | FURN | NISH SKET | CH AND MAP | REFERENC | E AND COO | RDINATES I | OR BURIAL IN | OTHER THAN ES | TABLISHED CEM | ETERY |
| RING TINGER | RIGHT | | ગો, ધ | A 80 0 | i 617 | UI: | | | | |
| | REM. | ARKS: | SHOUP H | (Salah | МЕРА 140103m | r 3) G | tada lea X | al Cometes | 77, Sec Q | , Gr 526 |

RESTRICTED

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| | <u>,</u> | | |
|---|--|--|--------------|
| identif . | ICATION DATA | | |
| 1. REMAINS OF UNKNOWN | | 2. DATE OF REPORT | |
| INKNOWN X-89 CG 10 | | 9 February 19 | 48 |
| 3. NAME OF CENETERY | 4. PLOT 5. ROW | 6. GRAVE 7. DATE OF | ERMENT |
| U.S. Army Mausoleum #2 Formerly of | A | 72 DISTNIERMENT REINT | |
| Guadalcanal | B 76 | 10 9 Feb '48 9 F | eh !48 |
| | <u> </u> | ox. Age: 21 - 22 | 00 10 |
| 8. ESTIMATED WEIGHT 9. ESTIMATED HEIGHT | 10. COLOR OF MAIR | L1. RACE | |
| 140 - 150 1bs. 180 - 70.87 - 5° 1 | 0-3/4" UTD | Probably White | • |
| 12.Give description of any official identification for Two (2) embossed plates reading: Unknown | | elagnal Cometons DD 873 | 0 00 10 |
| ino (2) amboond biance i cading, outloan | | ricenst cemerery pp 615 | U, UG 1 |
| One (1) embossed plates reading: Unknown | X-88, X-89, Plot | - B, Row - 76, Grave - | 10. |
| | • | · | |
| One (1) embossed plates reading: Uniden | | week and the second sec | |
| 13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/ | OR SUCH INFORMATION OUT | A INED FROM OTHER SOURCES | |
| DY REASON OF MACH | The state of the s | | |
| None. (YEZZ | | IMARYING L | |
| 31 | 100. | 9010 1000 | , |
| 1305 ayrig | 16. Lune | 1 29200 1948 | |
| 14. WAS BODY BURNED? TO WHAT EXTENT? | 7% | | |
| YES NO 15. WAS BODY MANGLED? TO WHAT EXTENT? | | | |
| 15. WAS BODY MANGLED? TO WHAT EXTENT? | | | |
| 16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MA | ALFORMATIONS | · | |
| There is a small healed lesion, which ex | | v thru the middle of the | e left |
| brow ridge, which indicates some wound | above the left ey | ebrow. There are two (| 2) |
| curious pits, one on each side, above a | | | |
| one quarter inch in length, almost as d | eep, and may repr | esent some developmenta | 1 |
| anamoly. (?) | | | |
| | | | |
| 17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSO | NAL EFFECTS FOUND, SHOW | ING THE TYPE, COLOR, SIZE, MAR | KING5, |
| SERVICE, ETC. (If laundry marks are indistinct a channels for examination when facilities are not | | | ir ough |
| | | | |
| A (7) | 770 | | |
| One (1) right brown "G.I." shoe size 10 | EE • | | |
| | • | | |
| | | | |
| | • | | |
| ` | • | | |
| | · · · · · · · · · · · · · · · · · · · | V. | |
| | • | | |
| | | | |
| | • * | | |
| | | | |
| | | | |

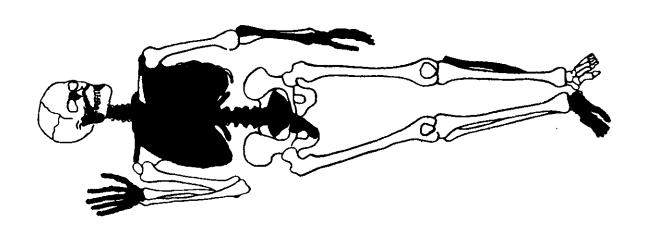


DENTURES (Plates): DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAIN-ING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

Remarks:

- 1. R-3 is in torsi version.
- 2. R-12 is in slight lingual version.

19. BLACK OUT PARTS OF "ODY HOT REQ



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

OF THE FOLLOWING ANATOMICAL PARTS:

No extra parts.

Mas, C. Show

Charles E. Snow, SIGHATURE OF MEDICAL OFFICERAnthropologist

21. REMARKS AND ADDITIONAL INFORMATION

Picture a tall, slender, rather lightly boned young man.

The skull is small average in size and presents a broad oval outline.

The backhead has slight projection.

The forehead is high with prominent bosses and slight slope. There is a slight depression across the crown of the head (coronal depression.).

The face appears to have been rather narrow and perhaps rather long with flat sides.

The jaw appears to have been projecting.

The chin was perhaps of average prominence and presents a very narrow bilateral eminence.

Ir cannot be demonstrated that this skull belongs to the post cranial skeleton.

Teeth charted. X-Ray negative.

I CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS OF DECEASED AND THAT ALL RESULTING INFORMATION HAS BEEN RECORDED TO THE BEST OF MY KNOWLEDGE

SIGNATURE

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION O. W. GREENWOOD, CAPT., QMC

CENTRAL IDENTIFICATION LABORATORY

AND MAUSOLLUM, APO 957

averumood

| | | | BONE LENG | S REMARKS |
|-------------------|-------------------|--------------|--------------|--|
| NAME | SIDE | NO | IN CM | (IF MISSING OR FRACTURED, LIST PARTS AND LOCATION) |
| SKULL | | 1 | 53 .4 | |
| | CERVICAL | 0 | | |
| VERTEBRAE | THORACIC | 0 | | |
| | LUMB AR | 0 | | |
| SACRUM | | 0 | : | |
| INNOMINATES | RIGHT | 1 | BI-ILIAC D | Fractured, pubis missing. |
| THROFINATES | LEFT | 1 | | |
| RIBS | | 0 | | |
| STERNUM | | 0 | | |
| CLAVICIES | RIGHT | 0 | | |
| CLAY ICLES | LEFT | 1 | | |
| | RIGHT | 1 | | |
| SCAPULAE | LEFT | 0 | | |
| | PIGHT | 1 | 34.4 | |
| HUMERI | LEFT | 1 | 34.1 | |
| 24011 | RIGHT | 1 | 26.6 | |
| RAD I I | LEFT | 0 | | |
| ULNAE | RIGHT | 1 | (28.5) | |
| | LEFT | 1 | (28.5) | |
| HANDS | RIGHT | 0_ | | |
| | LEFT | 0 | | |
| FEMORA | RIGHT | 1 | 47.5 | |
| | LEFT | 0 | 47.4 | |
| PATELLAE | RIGHT | 0 | - | |
| | LEFT | 1 | 39.5 | |
| TIBIAE | RIGHT | 1 | 39.5 | |
| <u> </u> | RIGHT | 1 | | |
| FIBULAE | LEFT | 0 | | |
| - | RIGHT | 0 | | |
| FEET | LEFT | 1 | | |
| HUMERO-CLAVICULAR | | | | PPROX I MA TE |
| ESTIMATED HEIGHT | 180 - 7 0. | .87 3/4** | AGE | 21-22 YEARS G-HIP BR RATIO |
| ESTIMATED WEIGHT | 140 - 15 | in the |] | G-HIP BR RATIO |

ENCLOSURE TO:

war san take the same of the

Unknown X-89.

Charles E Speciosist

•...

CENTRAL IDENTIFICATION LABORATORY

9 February 1948

NARRATIVE

The remains tagged as Unknown X-88, X-89; Guadalcanal D. D. 8730. Common Grave # 10, were in Major Discrepancy Box # 72.

These remains were processed simultaneously and it was found there were parts of three (3) remains.

By matching, articulating and age criteria, these remains are marked X-88; X-89; and X-89 A. The remains X-88 and X-89 have skulls and fragments of mandible and maxilla, but it cannot be demonstrated that the skull goes with the Post Cranial bodies of either. Each remains was completely processed and wrapped separately and returned to their respective casket.

| WD-BMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1) | | REPORT OF | INTERMEN | | DATE | E OF REPORT | |
|---|-----------------------|---|--------------------------------|-----------------------|------------------|------------------|-------------|
| (Supersones GRS Form 1) | | (AR 30-1810 ar | nd AR 30-18 | (15) | 1 | l July 1 | 1949 |
| Imprint Identification | | Section 1.—IDENTIFICATION. | | | | | |
| | TE | NAME (Last, first, middle initial) | (GUADAL | CANAT. | SERIA | AL No. | _ |
| 1 | \ | UNKNOWN X-89 | 1 | TIFIABLE) | Ū | nknown | |
| 12 W | ~ 1 | GRADE | ORGANIZATION | | BRAN | NCH OF SERVI | ICE |
| 1 | 0) | Unknown | Unknown | | 177 | nknown | |
| | / | RACE | RELIGION | | IF OTHER TH | HAN U. S. DEA | AD. GIVE |
| | | | | ļ | NAME OF C | OUNTRY | |
| PLACE OF DEATH | | Unknown CAUSE OF DEATH | Unknown | | I DATE | | |
| PLACE OF DEATH | | CAUSE OF DEATH | | | DAIL | E OF DEATH | |
| Guadalcanal, S | | Unknown | | | Ur | nknown | |
| EMERGENCY ADDRESSEE (No | ame, relationship, an | id address) | | | | | |
| | | Unknown | | | | | |
| IDENTIFICATION TAGS FOUN | ND ON BODY | IF NO TAGS FOUND ON BODY, I | DESCRIBE MEANS (| OF IDENTIFICATION (If | unidentified, fi | ill in section 3 | ON TODETSE) |
| (1, 2, or none) | | | | | | | |
| None WERE SUBSTITUTE TAGS PRO | OUDED?/Yes of No) | _ | कारत के दुर्ग हों हों है। - | | | | |
| WERE SUBSTITUTE | MINEDIA | | UNIDENTI | (FIABLE | | | |
| Yes | | | | <u>-</u> , | | <u>-</u> | |
| LIST PERSONAL EFFECTS FOR | UND ON BODY AND | DISPOSITION OF SAME | | | | | |
| | | | | | | • | |
| | | None | | | | - | |
| | | 11.017 | | | | | |
| Section 2.—BURIAL. If of | her than in estab | blished cometery, furnish sketch | h and map coord | instan on reverse. | | | |
| NAME, NUMBER, COORDINAT | | | I dive may | Retor Co | • | | |
| | | ery of the Pacific, | Henelulu. | ሞ. ክ. | | | |
| DATE OF BURIAL | HOUR | BURIED IN (Shroud, blanket, or no | | TYPE OF GRAVE | PLOT No. | ROW No. | NE NO |
| | | | | MARKER | | ROW No. | GRAVE No. |
| 13 June 1949 | 1000 | Permanent Type | | Cross | Q | ' | 555 |
| WAS THIS A REBURIAL? (Yes or no) | IF A REBURIAL, I | INDICATE NAME, NUMBER, COORD | JINATES OF PREVIO | OUS CEMETERY, AND LO | | | |
| Yes | ANN C | Cemetery, Guadalcan | mal BSI | | PLOT No. | 76 ROW No. | GRAVE No. |
| TYPE OF RELIGIOUS CEREMONY | PERSON CONDUC | CTING BURIAL RITES | IF IDENTIFICATI | ION TAGS NOT USED, D | <u> </u> | 7 1 1 | <u> </u> |
| Catholic | | A. Fisher, Chaplai | | KIED WITH BOD! | | | |
| Protestant IDENTIFICATION TAG BURIED | | Click Chaplain | | | | | |
| BODY (Yes or no) | | TIFICATION TAG ATTACHED TO RKER (Yes or no) | | | | | |
| Yes | Yes | - | | | | | |
| BODY BURIED ON DECEASED | LEFT, NAME (Last, | , first, middle initial) | RANK | SERIAL No. | ORGANIZATIO | ON GRAVE | E No. |
| Unknown X-86 (Guadalcanal C | !ematary) | ! | 1 | 1 | | 5 | 26 |
| BODY BURIED ON DECEASED | RIGHT, NAME (Last | | RANK | SERIAL NO. | ORGANIZATIO | ! | |
| Unknown X-666 Unk X-678A & B | 3. Unk X-679 | '9 thru X-686 | 1 | 1 | / | 5 | 84 |
| GB FOTROSE (Sh. | anghai Rema | eins Depot) | I managine of | SRS OFFICER FERIFYING | - SCOOLDT | | |
| Macaul | Flame | 4 | SIGNAL OF G | | KEPURI | | |
| | rry. Chief | Clerk, HDG | | | otain. OM | MC | |
| DISTRIBUTION OF REPORT | II: Signed origina | nal for U.S. and allied dead, signer of the second section in theater as pr | aned original and | one copy for enemy d | | | ter General |
| . Chrough meauguestes | AS Umcer | A TOT TOTORILION HE ENVELOW | LOSCIDOR DY SAIDS | ster commender. | | | |

| | Section 3. NIL IFIED REMAINS | | - |
|---------------------------|---|-------------------------------------|--|
| LEFT LITTLE FINGER RIN | i hianes vehicles and tanks | | is for the future identity of unidentified re- r clues under "Other," such as shoe size, cles, and tanks; and serial numbers of air- les. Imprint all fingers and thumbs in the can be secured, the condition of each and th diagram below. Tooth chart will not be |
| LEFT RING FINGER | HEIGHT WEIGHT COLOR OF | FEYES COLOR OF HAIR | BIRTHMARKS, SCARS, OR TATTOOS |
| LEFT MIDOLE FINGER | WEAPON AND SERIAL NO. OTHER IDENTIFICATION CLUES | LAUNDRY MARKS | WHERE BODY WAS BURIED OR FOUND |
| LÉFT INDEX FINGER | FILLINGS | LVER FILLING LD FILLING | 3000003 |
| LEFT | CAVITIES | CAVITY DECAYED | DATE NO S |
| RIGHT | CROWNED TEETH | OTH MISSING O IAGRAI CELAIN CROWN | M REPRESENTS THE MOUTH WIDE OPEN |
| RIGHT INDEX FINGER | BRIDGE WORK | GOLD BRIDGE | LOWER STATE OF THE PARTY OF THE |
| RIGHT MIDDLE FINGER | | E AND COORDINATES FOR BURIAL | IN OTHER THAN ESTABLISHED CEMETERY |
| RIGHT RING FINGER | REMARKS: HTTYVHE SONO CROUP BURIAL VINIT | אחר 1 | |
| RIGHT LITTLE FINGER | CROWN X-89 (Carles | H2 of 3) Guadalcan | al Cemetery, Sec Q, Gr 555 |

| WB90MC FORM 1042 (Rev. 1 Apr. 1945) | | REPORT OF | INTERMEN | IT | DATE | OF REPORT | |
|--|---------------------|------------------------------------|------------------|---------------------------------------|---------------------|---------------------------------------|-------------|
| (Supersedes GRS Form 1) | | (AR 30-1810 ar | nd AR 30-18 | 315) | 3 | July 1 | 1.949 |
| Imptint Identification | | Section 1.—IDENTIFICATION. | | · · · · · · · · · · · · · · · · · · · | | | |
| DO NOT T | YPE | NAME (Last, first, middle initial) | / OTL 347 | | SERIA | AL No. | |
| | | UNEXOVE I-89 | (GUADAI | Casal Tipiable) | 1234 | eknowa | |
| > | 1 | GRADE | ORGANIZATION | | <u> </u> | ICH OF SERVI | CE |
| (| 0 | | | | | | |
| \ | - / | Unkneva | Unknows | <u> </u> | | nknewn | |
| | / . | RACE | RELIGION | | NAME OF C | KAN U.S. DEA COUNTRY | ND, GIVE |
| | | Unkneva | Unkners | L | | | |
| PLACE OF DEATH | | CAUSE OF DEATH | | | DATE | OF DEATH | |
| One de l'acces | | The law on the | | | - | - - | • |
| Ouedalcanal, EMERGENCY ADDRESSEE (A | | Unknewn | | | U1 | ekenen e | |
| | | | | | | | |
| | | Unknown | - | | | | <u></u> . |
| IDENTIFICATION TAGS FOU (1, 2, or none) | ND ON BODY | IF NO TAGS FOUND ON BODY, I | DESCRIBE MEANS | OF IDENTIFICATION (| If unidentified, fi | II in section 3 | OR POORTSE) |
| Tone | | | | | | | |
| WERE SUBSTITUTE TAGS PE | ROVIDED?(Yes or no) | | UNIDENT | TPIARIE | | | |
| | | | | | | | |
| Tes | NIND ON DORY AND | DISPOSITION OF TAKE | | | | | |
| LIST PERSONAL EFFECTS FO | JUNE ON BODY AND | DISPOSITION OF SAME | | | | | |
| | | | | | | | |
| | | Xene | | | | | |
| | | | | | | | |
| Section 2BURIAL If o | ther than in establ | lished cemetery, furnish sketci | h and map coore | finates on reverse. | | · · · · · · · · · · · · · · · · · · · | |
| NAME, NUMBER, COORDINA | ITES, AND LOCATION | OF CEMETERY . | | | | ····· | |
| Hatienal Memo | rial Comoto | ry of the Pacific, | Henelulu | , T. H. | | | |
| DATE OF BURIAL | l Hour | BURIED IN (Shroud, blanket, or m | ame of other) | TYPE OF GRAVE | PLOT No. | ROW No. | GRAVE No |
| _ | | | - ' | MARKER | _ | | Ì |
| 13 June 1949 | 1000 | Permanent Type | | Cross | Q . | | 556 |
| WAS THIS A REBURIAL? (Yes of No) | IF A REBURIAL, I | NDICATE NAME, NUMBER, COORD | DINATES OF PREVI | OUS CEMETERY, AND I | | | leave v- |
| Yes | ANN C | emetery, Guadalean | al 351 | | PLOT No. | 76 | GRAVE No |
| TYPE OF RELIGIOUS | PERSON CONDUC | TING BURIAL RITES | IF IDENTIFICAT | ION TAGS NOT USED. | | <u></u> | |
| CEREMONY Catholie | Bugone L. | A. Fisher, Chaplai | | SORIED WITH BODI | | | |
| Protestant | Albert Z. | | | | | | |
| IDENTIFICATION TAG BURII BODY (Yes or no) | | KER (Yes or no) | | | | | |
| Yes | Ye | • | | | | | |
| BODY BURIED ON DECEASE | D LEFT, NAME (Last, | first, middle initial) | RANK | SERIAL NO. | ORGANIZATIO | ON GRAV | E No. |
| Vakmous X-88 | | | | | Ì | | 26 |
| BODY BURIED ON DECEASE | | t. first. middle initial) | RANK | SERIAL No. | ORGANIZATIO | | |
| Takana I-666 | thru X-676 | | | / | | | |
| GR Parmage (S) | hazaka L. Ban | thru X-686 | | 1_/_ | <u> </u> | | 84 |
| SIGNATURE OF PERSON PRI | EPARING PEP ORT | | SIGNATURE OF | GRS OFFICER VERIFYII | NG REPORT | | |
| Margans | 6 rue | 6 2 | | Warn |) mara 4 | | |
| DISTRIBUTION OF REPO | | al for U.S. and allied dead, sig | ned original an | | dead, to the | Quartermas | ter General |
| | | e for retention in theater as p | | | | | |

| | Section SMISSTIFIED REMAINS. | • |
|--|--|---|
| LEFT LITTLE FINGER RI | INSTRUCTIONS: (a) Great care will be taken to record the most min mains. Fill in anatomical characteristics below, and ar social security number; position of body found in airplan planes, vehicles, and tanks. (b) A fingerprint, or prints, are the most valuable o chart at left, or as many as possible. If no fingerprint o every tooth will be indicated on the tooth chart in accord accomplished if one or more fingerprints are secured. | ny other clues under ''Other,' such as shoe size, les, vehicles, and tanks; and serial numbers of air- |
| LEFT RING FINGER | HEIGHT WEIGHT COLOR OF EYES COLOR OF HA | |
| MIDDL | WEAPON AND SERIAL NO. LAUNDRY MARKS | WHERE BODY WAS BURIED OR FOUND |
| LEFT MIDDLE FINGER | OTHER IDENTIFICATION CLUES | , |
| LÉFT INDEX FINGER | FILLINGS SILVER FILLING | 11, |
| R THUMB | CAVITY CAVITY DECAYED | UPPER NO.5 |
| Р. П. В. | MISSING TEETH TOOTH MISSING | B O IAGRAM REPRESENTS THE MOUTH WIDE OPEN |
| RIGHT INDEX FINGER | CROWNED TEETH PORCELAIN CROWN GOLD CROWN | 16 LOWER 15 15 |
| INGER | BRIDGE WORK | |
| RIGHT MIDDLE FINGER | FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR | BURIAL IN OTHER THAN ESTABLISHED CEMETERY |
| RIGHT RING FINGER | ### 80 0 6 70p | |
| LITILE FIMEER | COUP BUNIAL VERY COURT TO STANDER STORE TO STANDERS (S 15, 45, 45, 45, 45, 45, 45, 45, 45, 45, 4 | alcamel Cemetery, Sec Q, Or SSS |

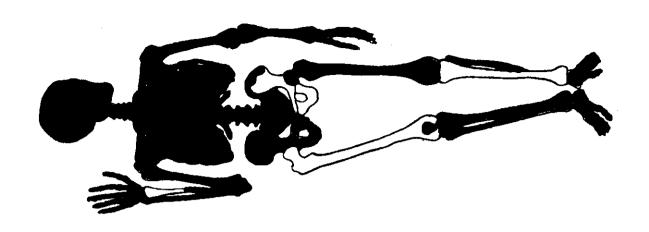
| · · · · · · · · · · · · · · · · · · · | IDENTIFICA | ATION DA | ATA . | | | |
|--|--|--------------|----------------------|---------------------------|-----------------|--|
| REMAINS OF UNKNOWN | <u></u> | | | | 2. DATE OF RE | PORT |
| INIONOMIN X=89 A CG 10 | | | | | 9 February | 1948 |
| NAME OF CEMETERY CG LO | | +. PLOT | 5. ROW | 6. GRAVE | 7. DA | TE OF |
| J. S. Army Mausoleum #2 | | | | 72 | DISINTERMENT | REINTERMENT |
| Formerly of | | 1 | | | | |
| Fuadaloanal | | В | 76 | 10 | 9 Feb 148 | 9 Feb '48 |
| | | DESCRIPTION | | 5 - 26 | (4) | |
| ESTIMATED WEIGHT 9. ESTIMA | ATED HEIGHT | 10. COLOR | OF HAIR | | 1: PACE | |
| GIVE DESCRIPTION OF ANY OFFICIAL | 51 94H | U | | | UTD. | |
| Two (2) embossed plates res CG 10. One (1) embossed plates res | ading: Unknown | X-88, X-8 | 39, Plo | | | • |
| ne (1) embossed plates re : | ading: Unident | ified | nakaga pam e militar | Briss vers representative | | en e |
| SIVE DESCRIPTION OF TATTOOS OR SC | ARS ON BODY AND/OR S | SUCH INFORMA | TION OBT | AINED FROM | OTHER SOURCES | |
| | | | | | | |
| TY DEASON OF | 1 /2007 | , | 17 Jan | 5 + 4°4 + 5,4 | HIG DATA | \ |
| Vone. | en e | | | , , , , , | 11.02 127117 | • |
| St. E., L. C. 2207 | 7100 21 | Q 19 | | 20 | Dec/9 | 18 |
| *************************************** | 1000 ayr-9 | u Li | every | <u> </u> | | 70 |
| . WAS BODY BURNED? TO WHAT | EXTENT? | | | | | |
| YES X NO | EMEENTE | | | | | |
| . WAS BODY MANGLED? TO WHAT | EXTENT? | | | | | |
| YES X NO | TUDES 145 FORE 4415 | 204471045 | | | | |
| . DESCRIBE EVIDENCE OF HEALED FRAC | INKE2 WAS DOUG WEELS | UR MAI FUNS | | | | |
| | | | | | | |
| lone, | | | | | | |
| | | | | | | |
| • | | | | | | |
| | | | | | | |
| | | • | | | | |
| . LIST EVERY ITEM OF CLOTHING, EQU | JIPMENT AND PERSONAL | EFFECTS FO | JND, SHOW | ING THE T | PE, COLOR, SI | E, MARKINGS, |
| 1 I | are indistinct such | notation a | hould be | made and s | specimen forwar | ded through |
| SERVICE, ETC. (If laundry marks | Cliftles ate Nor av | allable in | ine area, | | | |
| SERVICE, ETC. (If laundry marks channels for examination when fa | | | | | | |
| SERVICE, ETC. (If laundry marks | , | | | | | |
| SERVICE, ETC. (If laundry marka channels for examination when fa | | | | | | |
| SERVICE, ETC. (If laundry marka channels for examination when fa | • | | | | | |
| SERVICE, ETC. (If laundry marka channels for examination when fa | · | | | | | |
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| SERVICE, ETC. (If laundry marka channels for examination when fa | | | | | | |
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| SERVICE, ETC. (If laundry marka channels for examination when fa | | | | | | |
| SERVICE, ETC. (If laundry marka channels for examination when fa | | | | | | |

CHC FORM REV 18 MAR 47 1044

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE

GPO-O-47-754879 PAGE 1 OF 3

19. BLACK OUT PARTS OF "ODY LOT REQ



MASS BURIAL CERTIFICATE (IF APPLICABLE) (Wherein segregation in whole or parts is impossible) DECEDENTS HASED ON THE PRESENCE OF ONE OR MORE I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF OF THE FOLLOWING ANATOMICAL PARTS:

No extra parts.

Charles E. Snow. . FICE Anthropologist

Picture a tall average sized man possibly in his middle twenties. The right femur the only whole bone present, presents prominent anterior bowing and well developed pilaster, both suggestive of rugged musculature.

It cannot be demonstrated that these bones belong together.

No teeth. X-Ray negative.

I CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS OF DECEASED AND THAT ALL RESULTING INFORMATION HAS BEEN RECORDED TO THE BEST OF MY KNOWLEDGE

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

GREENWOOD, CAPT., QMC NELSORATORY

D MAUSSELOM, APO 957

Owerrenvoor

| | CENTRAL | | | ION LABORATORY & SOLEUM ONE LIST |
|------------------|----------|--------------|--------------|--|
| NAME | SIDE | NO | BONE LENGT | REMARKS (IF MISSING OR FRACTURED, LIST PARTS AND LOCATION) |
| SKULL | | 0 | | Missing |
| | CERVICAL | 0 | | Missing. |
| VERTEBRAE | THORACIC | 0 | | Missing. |
| | LUMBAR | 0 | | Missing. |
| SACRUM | | 0 | | Missing. |
| | RIGHT | 0 | BI-ILIAC DIA | l and the second |
| INNOMINATES | LEFT | 1 | 1 | Fractured. |
| RIBS | | 0 | | Missing. |
| STERNUM | | 0 | | |
| CLAVICLES | RIGHT | 0 | | |
| CENTICEES | LEFT | 0 | | |
| | RIGHT | 0 | | |
| SCAPULAE | LEFT | 0 | | |
| | PIGHT | 0 | | |
| HUMERI | LEFT | 0 | | |
| | RIGHT | 1 | | Distal head 2/3 shaft. |
| RADII | LEFT | 0 | | Missing |
| ULNAE | RIGHT | 0 | | |
| VERAL | LEFT | 0 | | |
| HANDS | RIGHT | 0 | | |
| | LEFT | 0 | | |
| FEMORA | RIGHT | 1 | 47.7 | |
| | LEFT | 0 | | |
| PATELLAE | RIGHT | 0 | | |
| | LEFT | 0 | | |
| TIBIAE | RIGHT | 0 | 38.5 | Mr al au |
| | <u> </u> | | | Missing. |
| FIBULAE | RIGHT | 0 | | |
| | LEFT | 0 | | |
| FEET | RIGHT | 0 | | |
| HUMERO-CLAVICULA | R RATIO | 1 0 | | A PPROX I MA TE |
| | | | AGE | |
| ESTIMATED HEIGHT | • | 29 | | 25 - 26 (7) YEARS EG-HIP BR RATIO |
| ENCLOSURE TO | ** • | X-89 . | <u> </u> | 25 - 26 (7) YEARS EG-HIP BR RATIO Charles E STORIST |

GP - AGRS 2 |

CENTRAL IDENTIFICATION LABORATORY

9 February 1948

NARRATIVE

The remains tagged as Unknown X-88, X-89; Guadalcanal D. D. 8730, Common Grave # 10, were in Major Discrepancy Box # 72.

These remains were processed simultaneously and it was found there were parts of three (3) remains.

By matching, articulating and age criteria, these remains are marked X-88; X-89; and X-89 A. The remains X-88 and X-89 have skulls and fragments of mandible and maxilla, but it cannot be demonstrated that the skull goes with the Post Cranial bodies of either. Each remains was completely processed and wrapped separately and returned to their respective casket.

| WDOMC FORM 1042 (Rev. I Apr. 1945) (Supersedes GRS Form 1) | | REPORT OF (AR 30-1810 ar | | | | of report July 1 | 949 |
|--|-----------------------|--|--|---|----------------------|------------------|--------------|
| Imprint Identification | | Section 1.—IDENTIFICATION. | | | · | | |
| DO NOT TY | YPE | NAME (Last, first, middle initial) | / ATT 1 TO 1 T | 51 W17 | SERIA | L No. | |
| 1111 | 1 | UNKNOWN X-59A | (GUADAL | Tifiable) | ITe | known | |
| | \ | | | | | | |
| | 0 | GRADE | ORGANIZATION | | BRAM | CH OF SERVI | CE |
| 1 | 9 | Unknown | Unknown | • | Un | known | |
| | | RACE | RELIGION | | IF OTHER TH | | ID, GIVE |
| | | Unknown | Unknown | | | • | |
| PLACE OF DEATH | | CAUSE OF DEATH | | | DATE | OF DEATH | - |
| Guadalcanal, S | 3. I. | Unknewn | | | Un | known | |
| EMERGENCY ADDRESSEE (N | ame, relationship, an | d address) | | ··· | | | |
| | | _ | | | | | |
| | ··· | Unknown | | | | | |
| IDENTIFICATION TAGS FOUN | ND ON BODY | IF NO TAGS FOUND ON BODY, I | DESCRIBE MEANS | OF IDENTIFICATION (| [f unidentified, fil | l in section 3 | on reserse) |
| None | | | | | | | |
| WERE SUBSTITUTE TAGS PRO | OVIDED?(Yes or so) | | UNIDENT | TWTABLE | | | |
| | | | V. 1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. | | | | |
| Yes | | | | | | | |
| LIST PERSONAL EFFECTS FO | UND ON BODY AND | DISPOSITION OF SAME | | | | | • • |
| | | | | | | | |
| | | | | | | | |
| | | Nene | | | | | |
| | | | | | | | |
| Section 2.—BURIAL, If of | her than in estab | lished cemetery, furnish sketci | h and map coor | dinates on reverse. | | | |
| NAME, NUMBER, COORDINAT | TES, AND LOCATION | OF CEMETERY | | | | | |
| National Memor | rial Cemete | ry of the Pacific, | Honelulu | . T. H. | | | |
| | Tueste | I multiplem and a management of the | | | PLOT No | DOW No. | - CDAVE No |
| DATE OF BURIAL | HOUR | BURIED IN (Shroud, Manket, or m | sma of other) | TYPE OF GRAVE MARKER | PLOT NO. | ROW No. | GRAVE No |
| 13 June 1949 | 1000 | Permanent Type | Cosket | Cross | Q | | 526 |
| WAS THIS A REBURIAL? | - ' <u> </u> | INDICATE NAME, NUMBER, COORD | | | | RAVE | 1 020 |
| (Yes or no) | | Wil Canadamy Guada | leamel DC | ₹ | PLOT No. | ROW No. | GRAVE No. |
| Yes | ^ | MM Cemetery, Guada | TCGUST PS | 1 | В | 76 | 10 |
| TYPE OF RELIGIOUS CEREMONY | PERSON CONDUC | TING BURIAL RITES | IF IDENTIFICAT | TION TAGS NOT USED, BURIED WITH BODY | DESCRIBE (DE | NTIFICATION | DATA AND |
| Catholic | Eugene L. | A. Fisher, Chaplain | | | | | |
| Protestant | | Click, Chaplain | | | | | |
| IDENTIFICATION TAG BURIE BODY (Yes or No) | | TIFICATION TAG ATTÄCHED TO RKER (Year of 180) | | | | | |
| Yes | Y | es | <u> </u> | | | | •• |
| BODY BURIED ON DECEASED | LEFT, NAME (Last, | , first, middle initial) | RANK | SERIAL No. | ORGANIZATIO | N GRAV | E No. |
| Unknown X-88 | | | ļ | | | | ne |
| (Guadalcanal C | - | 4 6-4 | RANK | SERIAL No. | ORGANIZATIO | ! | 26 /E No. |
| BODY BURIED ON DECEASED UNKNOWN X-666 | thru X-676 | | RANK | SERIAL NO. | URGANIZATIO | M GRAV | E NO. |
| Unk_K-678A & B | 3, Unk X ∽67 | 9 thru X-686 | | / | | 5 | 84 |
| GB Formose (Sh SIGNATURE OF PERSON PRE | | NITE DEDOL! | SIGNATURE OF | GRS OFFICER VERIFYII | NG REPORT | | |
| Macauel | Flace | | Inu | 1/2/ | 1.4. | | |
| Margaret E. Pa | rry. Chief | Clerk, HDC | James B | | tain. QM | 3 | |
| DISTRIBUTION OF REPOR | T: Signed origin | al for U.S. and allied dead, sig | ened original an | d one copy for enem; | | | ter General |
| through Headquarters G | RS Officer. Copie | se for retention in theater as p | rescribed by th | eater commander. | | | |

| | Section 3. WILDERTIFIED REMAINS. | |
|------------------------|--|--|
| LEFT LITTLE FINGER | INSTRUCTIONS: (a) Great care will be taken to record the most minute clue mains. Fill in anatomical characteristics below, and any othe social security number; position of body found in airplanes, vehiplanes, vehicles, and tanks. (b) A fingerprint, or prints, are the most valuable of all clue chart at left, or as many as possible. If no-fingerprint or prints every tooth will be indicated on the tooth chart in accordance will accomplished if one or more fingerprints are secured. | r clues under "Other," such as shoe size, icles, and tanks; and serial numbers of air- |
| LEFT RING FINGER | every tooth will be indicated on the tooth chart in accordance wi accomplished if one or more fingerprints are secured. HEIGHT WEIGHT COLOR OF EYES COLOR OF HAIR | th diagram below. Tooth chart will not be BIRTHMARKS, SCARS, OR TATTOOS |
| YGER | WEAPON AND SERIAL No. LAUNDRY MARKS | I Must be book was been a second |
| LEFT MIDDLE FINGER | LAUNDRY MARKS | WHERE BODY WAS BURIED OR FOUND |
| FINGER | OTHER IDENTIFICATION CLUES | |
| LEFT (NDEX FINGER | | |
| NGER | FILLINGS SILVER FILLING GOLD FILLING | 300000 |
| LEFT | CAVITIES CAVITY DECAVED | DENTAL PROPERTY. |
| RIGHT THUMB | TOOTH MISSING DIAGRAL | M REPRESENTS THE MOUTH WIDE OPEN |
| RIGHT INDEX FINGER | BRIDGE WORK GOLD BRIDGE GOLD BRIDGE | LOWER 15 14 13 12 10 10 10 11 12 11 10 10 10 10 11 |
| RIGHT MIDDLE FINGER | FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL | IN OTHER THAN ESTABLISHED CEMETERY |
| RIGHT RING FINGER | 50 HV 80 U 6 1707 | |
| RIGHT LITTLE FINGER | GROUP BURIAL | nal Cemetery, Sec Q, Gr 555 |

| Rev. 1 Apr. 1945) | | REPORT OF | INTERMENT | | DATE | OF REPORT | |
|--|---|--|--|---|--|-------------------------|-----------------------------|
| persedes GRS Form 1) | | (AR 30-1810 ar | | - | 1 | Jely 1 | 949 |
| Imprint Identification | Tag If Possible. | Section 1.—IDENTIFICATION. | | | | | |
| DO NOT T | YPE | NAME (Last, first, middle initial) | 4 | | SERIA | AL No. | |
| | | WANTED T. CO. | (GUADAL) | | | - b | |
| | \ | THENOUS I-89A | | rifiable) | | eknown | |
| 7 | | GRADE | ORGANIZATION | | BRAN | ICH OF SERVI | CE |
| 1 | \sim $_{I}$ | Enknova | Unknown | | Eh. | aknova | |
| | | RACE | RELIGION | | | HAN U. S. DEA | D, GIVE |
| | | Unknown | Unknown | | | | |
| PLACE OF DEATH | | CAUSE OF DEATH | | | DATE | OF DEATH | |
| Guadaleanal, | s. I. | Vakaewa. | | | T) | nicrown | |
| EMERGENCY ADDRESSEE (N | | nd address) | | | | | |
| (1, 2, or none) Sone WERE SUBSTITUTE TAGS PRO | | · | THE PERSON | YIABLE | | | |
| NAME, NUMBER, COORDINA | ther then in estai | Tene blished cemetery, furnish sketc | Monolulu, | T. I. | PLOT No. | ROW No. | GRAVE NO |
| Section 2.—BURIAL II of NAME, NUMBER, COORDINA Entichel Home: | ther than in estaintes, and location | Hene blished cometery, furnish sketc. N OF CEMETERY PRY of the Pacific, | Monolulu, | 2. I. | PLOT No. | ROW No. | GRAVE NO |
| Section 2,—BURIAL. II of NAME, NUMBER, COORDINATE SECTION OF BURIAL 13 June 1949 | her than in estail TES, AND LOCATIO | Bone blished cometery, furnish sketc. N OF CEMETERY OTY of the Pacific, BURIED IN (Shroud, blanks, or a | Henelulu, ame of alber) Cashet | T. I TYPE OF GRAVE MARKER Cross | Q | | GRAVE NO |
| Section 2,—BURIAL. II of NAME, NUMBER, COORDINA BASICAL HOME: | her than in estail TES, AND LOCATIO | blished cometery, furnish sketc. N OF CEMETERY ORY of the Pacific, BURIED IN (Shroud, blanks), or se | Henelulu, ame of alber) Cashet | T. I TYPE OF GRAVE MARKER Cross | LOCATION OF G | BRAVE | 526 |
| Section 2,—BURIAL. If or NAME, NUMBER, COORDINA. Batienel Home: DATE OF BURIAL 13 June 1949 WAS THIS A REBURIAL? | ther than in estaintes, and location rial Genetal Hour | Bone blished cometery, furnish sketc. N OF CEMETERY OTY of the Pacific, BURIED IN (Shroud, blanks, or a | Kenelulu, ame of other) Control Dinates of previo | TYPE OF GRAVE MARKER DUS CEMETERY, AND | Q | | GRAVE NO |
| Section 2,—BURIAL II of NAME, NUMBER, COORDINA' Baticael Home: DATE OF BURIAL 13 Jame 1949 WAS THIS A REBURIAL? (Yes or no) TOS TYPE OF RELIGIOUS | ther than in estaintes, and location rial Comet. Hour | Buried in (Shroud, Mankel, or an Indicate Name, Number, Coord | Menelulu, ame of other) Control DINATES OF PREVIO | TYPE OF GRAVE MARKER CRASS DUS CEMETERY, AND ON TAGS NOT USED | LOCATION OF G | BRAVE ROW No. | GRAVE NO |
| Section 2,—BURIAL. II of NAME, NUMBER, COORDINA BATIONAL HOME DATE OF BURIAL 13 June 1949 WAS THIS A REBURIAL? (Yes or no) Tes TYPE OF RELIGIOUS CEREMONY | HOUR TES AND LOCATION TES AND LOCATION TES AND LOCATION TES AND LOCATION HOUR 1000 IF A REBURIAL. PERSON CONDU | Bone blished cometery, furnish sketch N OF CEMETERY BURIED IN (Shroud, blanks, or a Personal Tree INDICATE NAME, NUMBER, COORE ADS CEMETERY CTING BURIAL RITES | Menelulu, ame of other) Control DINATES OF PREVIO | TYPE OF GRAVE MARKER Cross DUS CEMETERY, AND | LOCATION OF G | BRAVE ROW No. | GRAVE NO |
| Section 2,—BURIAL II of NAME, NUMBER, COORDINA' Baticael Home: DATE OF BURIAL 13 Jame 1949 WAS THIS A REBURIAL? (Yes or no) TOS TYPE OF RELIGIOUS | HOUR TES AND LOCATION TES AND LOCATION TES AND LOCATION TES AND LOCATION HOUR 1000 IF A REBURIAL. PERSON CONDU | Bone blished cometery, furnish sketc. N OF CEMETERY DRY of the Pacific, BURIED IN (Skroud, blanks), or a Personnel Type INDICATE NAME, NUMBER, COORD ADS Comptony, Guada | Menelulu, ame of other) Control DINATES OF PREVIO | TYPE OF GRAVE MARKER CRASS DUS CEMETERY, AND ON TAGS NOT USED | LOCATION OF G | BRAVE ROW No. | GRAVE NO |
| Section 2,—BURIAL. II of NAME, NUMBER, COORDINA BATIONAL HOME DATE OF BURIAL 13 June 1949 WAS THIS A REBURIAL? (Yes or no) Tes TYPE OF RELIGIOUS CEREMONY | HOUR | Buried in (Shroud, blanket, or a Permanent Type Indicate Name, number, coord Buried Buried Remotery, Ganda Cting Burial Rites | Menelulu, ame of other) Control DINATES OF PREVIO | TYPE OF GRAVE MARKER CRASS DUS CEMETERY, AND ON TAGS NOT USED | LOCATION OF G | BRAVE ROW No. | GRAVE NO |
| Section 2.—BURIAL If or NAME, NUMBER, COORDINAT BASICAL HOMO: DATE OF BURIAL 13 June 1949 WAS THIS A REBURIAL? (Yes or no) TOS TYPE OF RELIGIOUS CEREMONY CATALLE IDENTIFICATION TAG BURIE BODY (Yes or no) | HOUR HOUR HOUR FA REBURIAL PERSON CONDU | BURIED IN (Shroud, Manket, or an Indicate Name, Number, Coordinate Buries, Chapter, Cha | Echelulu, ame of other) Control DINATES OF PREVIO | TYPE OF GRAVE MARKER DUS CEMETERY, AND ON TAGS NOT USED URIED WITH BODY | LOCATION OF G PLOT NO. DESCRIBE IDE | ROW NO. 76 ENTIFICATION | GRAVE NO 10 DATA AND |
| Section 2.—BURIAL. If or NAME, NUMBER, COORDINAT BATIONAL HOME DATE OF BURIAL 13 June 1949 WAS THIS A REBURIAL? (Yes or no) TOPE OF RELIGIOUS CEREMONY CATALLE IDENTIFICATION TAG BURIE BODY (Yes or no) TOPE BODY BURIED ON DECEASED | HOUR HOUR HOUR FA REBURIAL PERSON CONDU | BURIED IN (Shroud, Manket, or an Indicate Name, Number, Coordinate Buries, Chapter, Cha | Menelulu, ame of other) Control DINATES OF PREVIO | TYPE OF GRAVE MARKER CRASS DUS CEMETERY, AND ON TAGS NOT USED | LOCATION OF G | ROW NO. 76 ENTIFICATION | GRAVE NO 10 DATA AND |
| Section 2.—BURIAL. If or NAME, NUMBER, COORDINAT BATIONAL HOME DATE OF BURIAL 13 June 1949 WAS THIS A REBURIAL? (Yes or no) TOPE TYPE OF RELIGIOUS CEREMONY CARDOLLE DENTIFICATION TAG BURIE BODY (Yes or no) TOPE BODY BURIED ON DECEASED UNINOVAL 3.—88 | HOUR 1000 IF A REBURIAL PERSON CONDU BEGENE LA O LEFT, NAME (Las | BURIED IN (Shroud, Manket, or an Indicate Name, Number, Coordinate Buries, Chapter, Cha | Echelulu, ame of other) Control DINATES OF PREVIO | TYPE OF GRAVE MARKER DUS CEMETERY, AND ON TAGS NOT USED URIED WITH BODY | LOCATION OF G PLOT NO. DESCRIBE IDE | ROW NO. 76 ENTIFICATION | GRAVE NO. |
| Section 2.—BURIAL. If or NAME, NUMBER, COORDINAT BATIONAL HOME DATE OF BURIAL 13 June 1949 WAS THIS A REBURIAL? (Yes or no) TOPE OF RELIGIOUS CEREMONY CATALLE IDENTIFICATION TAG BURIE BODY (Yes or no) TOPE BODY BURIED ON DECEASED | HOUR 1000 IF A REBURIAL PERSON CONDU- BIGGIE L. Albert MA D LEFT, NAME (Las | Buried initial) Buried in the Pacific, Buried in (Shroud, blanks, or an indicate name, number, coordinated buried by the pacific of the pac | Echelulu, ame of other) Control DINATES OF PREVIO | TYPE OF GRAVE MARKER DUS CEMETERY, AND ON TAGS NOT USED URIED WITH BODY | LOCATION OF G PLOT NO. DESCRIBE IDE | ROW NO. 76 ENTIFICATION | GRAVE NO. |
| Section 2.—BURIAL. II of NAME, NUMBER, COORDINATE SECTION OF BURIAL 13 June 1949 WAS THIS A REBURIAL? (Yes or no) TOPE TYPE OF RELIGIOUS CEREMONY CATABOLIC IDENTIFICATION TAG BURIED BODY BURIED ON DECEASE Unknown I—88 (Guadalessal G | HOUR 1000 IF A REBURIAL PERSON CONDU- BASEBLE D LEFT, NAME (Last O RIGHT, NAME (Last O RIGHT) | BURIED IN (Shroud, blanket, or many states) INDICATE NAME, NUMBER, COORD AND Genesery, Chaples CTING BURIAL RITES A. Fisher, Chaples TIFICATION TAG ATTACHED TO RKER (Yes or no) (a) (b) (c) (c) (c) (c) (c) (c) (c | Intelulu, ame of other) Control DINATES OF PREVIO | TYPE OF GRAVE MARKER DUS CEMETERY, AND ON TAGS NOT USED URIED WITH BODY SERIAL NO. | LOCATION OF G PLOT NO. DESCRIBE IDE | ON GRAV | GRAVE NO. |
| Section 2,—BURIAL II of NAME, NUMBER, COORDINA BATIONAL HOME STATEMENT OF BURIAL 13 Jane 1949 WAS THIS A REBURIAL? (Yes or no) TOS TYPE OF RELIGIOUS CEREMONY CATALLIS IDENTIFICATION TAG BURIE BODY (Yes or no) TOS BODY BURIED ON DECEASE TAKASAN I SECTION TAGE TOTAL TAGE TOTA | HOUR HOUR 1000 IF A REBURIAL PERSON CONDUCTOR DESCRIPTION O LEFT, NAME (Last O RIGHT, NAME (Last O RIGHT) | BURIED IN (Shroud, blanket, or many states of the Pacific, BURIED IN (Shroud, blanket, or many states of the Pacific of the Pa | Espelulu, ame of other) Control DINATES OF PREVIO | TYPE OF GRAVE MARKER DUS CEMETERY, AND ON TAGS NOT USED URIED WITH BODY SERIAL NO. | DESCRIBE IDE | ON GRAV | GRAVE NO. GRAVE NO. E NO. |
| Section 2.—BURIAL II of NAME, NUMBER, COORDINATE OF BURIAL 13 June 1949 WAS THIS A REBURIAL? (Yes of No) TOPE OF RELIGIOUS CEREMONY Catholic BODY (Yes of No) TOPE BODY BURIED ON DECEASED BODY BURIED ON DECEASED BODY BURIED ON DECEASED SIGNATURE OF PERSON PRE | HOUR HOUR 1000 IF A REBURIAL PERSON CONDUCTOR DESCRIPTION O LEFT, NAME (Last O RIGHT, NAME (Last O RIGHT) | BURIED IN (Shroud, blanket, or many states) BURIED IN (Shroud, blanket, or many states) INDICATE NAME, NUMBER, COORD THE CATTON TAG ATTACKED TO RKER (Yes or no) Let, first, middle initial) | Espelulu, ame of other) Control DINATES OF PREVIO | TYPE OF GRAVE MARKER DUS CEMETERY, AND ON TAGS NOT USED URIED WITH BODY SERIAL NO. | ORGANIZATION OF GRANIZATION ORGANIZATION ORG | ON GRAV | GRAVE NO. GRAVE NO. E NO. |
| Section 2,—BURIAL II of NAME, NUMBER, COORDINA BATIONAL HOME STATEMENT OF BURIAL 13 Jane 1949 WAS THIS A REBURIAL? (Yes or no) TOS TYPE OF RELIGIOUS CEREMONY CATALLIS IDENTIFICATION TAG BURIE BODY (Yes or no) TOS BODY BURIED ON DECEASE TAKASAN I SECTION TAGE TOTAL TAGE TOTA | HOUR HOUR 1000 IF A REBURIAL PERSON CONDUCTOR DESCRIPTION O LEFT, NAME (Last O RIGHT, NAME (Last O RIGHT) | BURIED IN (Shroud, blanket, or many states) BURIED IN (Shroud, blanket, or many states) INDICATE NAME, NUMBER, COORD THE CATTON TAG ATTACKED TO RKER (Yes or no) Let, first, middle initial) | Espelulu, ame of other) Control DINATES OF PREVIO | TYPE OF GRAVE MARKER DUS CEMETERY, AND ON TAGS NOT USED URIED WITH BODY SERIAL NO. | DESCRIBE IDE | ON GRAV | GRAVE NO. GRAVE NO. E NO. |

| | Section 3. NIL TIFIE | D REMAINS. | | _ | | 7 |
|------------------------|---|--|--|--|--|--|
| LEFT LITTLE FINGER | mains. Fill in anatom social security number planes, vehicles, and ta (b) A fingerprint. | ical character ; position of b inks, or prints, are | ristics below, an ody found in air the most valual | id any other cl rplanes, vehicle: nle of all clues | ues under "Othe s, and tanks; and Imprint all fing | ere and thumbe in the |
| RING E | every tooth will be indi- accomplished if one or | y as possible, cated on the t more fingerpi | ooth chart in accints are secured | cordance with o | n be secured, the diagram below. | condition of each and Footh chart will not be |
| LEFT RING FINGER | HEIGHT WEIGHT | COLOR OF E | COLOR C | | BIRTHMARKS, SCAR | |
| WIDDLE | WEAPON AND SERIAL NO. | L | AUNDRY MARKS | | WHERE BODY WAS B | URIED OR FOUND |
| LEFT MIDDLE FINGER | OTHER IDENTIFICATION CL | UES | | | | |
| LÉFT INDEX FINGER | | | | | | |
| NGER | FILLINGS | GOLD | R FILLING FILLING | | 3996 | 2)03 |
| LEFT | CAVITIES | | CAVITY DECAYED | , 5 G | A DA A A P | |
| RIGHT | MISSING TEETH | TROL | I MISSING | DIAGRAM R |) EPRESENTS THE I | MOUTH WIDE OPEN |
| RIGHT INDEX FINGER | BRIDGE WORK | VINE SOLE | CROWN CROWN CROWN GOLD BRIDGE | 15 (3) | LOWER | 3(2) 15 (6) 14 (3) 13 |
| | 6 | | GOLD BRIDGE | 12 | | 0,11 |
| RIGHT MIDDLE FINGER | FURNISH SKETCH AND MAP | REFERENCE AL | ND COORDINATES | FOR BURIAL IN O | THER THAN ESTABL | ISHED CEMETERY |
| RIGHT RING FINGER | | | | | | |
| RIGHT LITTLE FINGER | GROUP BURIAL VIRIAN X-89A | • | 3 of 3) 0 | - Wadaloana | _ Gemetery,i | lec Q, 6x 565 |

| 6 | | RE311 | AICTED | | | | | | |
|--|--|------------------------------------|------------------------------------|----------------------|----------------------|-----------------|--------------------|--|--|
| WD QLIC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1) | | REPORT OF | | | DATE | OF REPORT | | | |
| | | (AR 30-1810 a. | (AR 30-1810 and AR 30-1815) | | | | 29 Dec 1948 | | |
| Imprint Identification 2 | | Section 1.—IDENTIFICATION | | | 1 | | | | |
| | | NAME (Last, first, middle initial) | NAME (Last, first, middle initial) | | | | SERIAL No. | | |
| (, + | / \ | UNKNOWN X -8 | Unknown | | | | | | |
| > s / / / / | \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | GRADE | ORGANIZATION | | BRANCH OF SERVICE | | | | |
| N 1 4 | / 01 | Unknown | Unknown | | Unknown | | | | |
| 1 19 1 10 | / | RACE | RELIGION | | IF OTHER TH | AN II S DE | AD CIVE | | |
| <u> </u> | | i e | Unknown Unknown | | | OUNTRY | AD, GIFL | | |
| | | | <u> </u> | | <u> </u> | | | | |
| PLACE OF DEATH | | CAUSE OF DEATH | · · · · · · · · · · · · | | DATE | OF DEATH | - | | |
| Guadalcanal, | 5. I. | Unknown | | | T | Jnknown | | | |
| EMERGENCY ADDRESSEE (No | ome, relationship, an | d address) | | | | TREGO WIL | | | |
| · | | | | | | | | | |
| INCOME THE PARTY OF THE PARTY O | D 611 5001 | | nown | | | | | | |
| IDENTIFICATION TAGS FOUN (1, 2, or nome) | ID ON BODY | IF NO TAGS FOUND ON BODY, | DESCRIBE MEANS | OF IDENTIFICATION (| [] unidentified, fi | II in section 3 | on reserve) | | |
| Mone | | Unic | dentifiabl | e | | | | | |
| WERE SUBSTITUTE TAGS PRO | OVIDED?(Yes or no) | | | | | | | | |
| Yes | | | | | | | | | |
| LIST PERSONAL EFFECTS FOR | UND ON BODY AND | DISPOSITION OF SAME | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | No | 10 | · | | | | | |
| | , | • | | | | | | | |
| Section 2,-BURIAL If of | her than in estab | lished cemetery, furnish skett | h and map coord | linates on reverse. | | | | | |
| NAME, NUMBER, COORDINAT | ES, AND LOCATION | OF CEMETERY | | | | | | | |
| US Army Mausol | eum, Schof | ield Barracks, T. | H. | | | | Casket | | |
| DATE OF BURIAL | HOUR | BURIED IN (Shroud, blanket, or | ame of other) TYPE OF GRAVE | | PLOT No. | ROW No. | 200050X | | |
| 14 Jan 1948 | | Metal lined | anakat | MARKER | | | 72 A | | |
| | | <u> </u> | | <u> </u> | | <u> </u> | 100 | | |
| WAS THIS A REBURIAL? (Yes or no) | IF A REBURIAL. | INDICATE NAME, NUMBER, COOR | DINATES OF PREVI | OUS CEMETERY, AND L | PLOT No. | RAVE ROW No. | GRAVE No. | | |
| уев | ANM Come | tery, Guadalcanal | | • | B | 76 | 10 | | |
| TYPE OF RELIGIOUS CEREMONY | <u> </u> | TING BURIAL RITES | IF IDENTIFICAT | ION TAGS NOT USED, | DESCRIBE IDE | NTIFICATION | N DATA AND | | |
| CEREMON'I | | | CONTRINERS | | | | | | |
| IDENTIFICATION TAC BURIES | D WITH LINEAR | IFICATION TAG ATTACHED TO | - | : | | | | | |
| IDENTIFICATION TAG BURIEL BODY (Yes or se) | | RKER (Yes or no) | | V | | | | | |
| | | | ļ | | | | | | |
| BODY BURIED ON DECEASED | LEFT, NAME (Last | , first, middle initial) | RANK | SERIAL NO. | ORGANIZATIO | M GRAV | /E No. | | |
| Not applicable | due to | | | | | _ | | | |
| BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) | | | RANK | SERIAL NO. | ORGANIZATIO | N GRA | /E No. | | |
| manner of storing caskets. | | | | | _ | | | | |
| | | | / | | , | | | | |
| SIGNATURE OF PERSON PRE | PARING REPORT | \checkmark | SIGNATURE OF | GRS OFFICER YERRYII | G REPORT | 4 | | | |
| I. K. USHE | R - Clerk | | EARI | B. YANCY, C | | | | | |
| DISTRIBUTION OF REPOR | T: Signed origin | al for U.S. and allied dead, si | aned original and | d one copy for enem; | | Quartermai | ster General | | |
| through Headquarters G. | RS Officer. Copi | es for retention in theater as | prescribed by the | ater commander. | | | | | |
| | | DECTE | ICTED | | | 8v - 1- | -25-49-8#-1-1100 | | |

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|--|------------|--|---|--|--|--|---------------------------------------|--|---|
| r | Section 3. | UNIDENTIFIE | D REMAINS | <u>. </u> | | | _ | | |
| LITTLE FINGER RI | (b) A | CTIONS: Great care will Fill in anatom urity number; ehicles, and take A fingerprint, ce eft, or as man th will be indic hed if one or | ical charac ; position o nks. or prints, a y as possib cated on th | teristics to body four the mode. If no be tooth check the mode tooth check the check t | pelow, and and in airp est valuable fingerprin art in acco | l any other clanes, vehicle e of all clues nt or prints co ordance with | clues under '' es, and tanks; | Other,'' such and serial nu | as shoe size, mbers of air- |
| LEFT RING FINGER | HEIGHT | WEIGHT COLOR OF EYES COLOR OF HAIR | | | HAIR | BIRTHMARKS, SCARS, OR TATTOOS | | | |
| MIDDLE FINGER | | ID SERIAL NO. | UES | LAUNDRY | MARKS | | WHERE BODY | WAS BURIED OR | FOUND |
| LEFT INDEX FINGER | FILLIN | GS | | LVER FILL | ing T | | <u> </u> | | |
| ER THOMB | _ | ES | | CAVITY DECAY | Y | 5 5 7 8 | | | 5 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5 |
| THUMB | | G TEETH | i Re | POTH MISSIN | | | REPRESENTS | THE MOUTH W | Die oben |
| NGHT | BRIDGE | WORK | | GOLD E | /N | 15 (14) 14 (3) | 100 200 1000 | AND CIT | }15 14 3 |
| MIDDLE FINGER | FURNISH S | KETCH AND MAP | P REFERENCE | E AND COOL | RDINATES F | OR BURIAL IN | OTHER THAN E | 9 10 11 | AETERY |
| RING FINGER | REMARKS: | | A-10 | | | | ÷ | | |
| LITTLE FINGER | - | - <i>-</i> | | | | ٠ | · · · · · · · · · · · · · · · · · · · | ne en e | * * * * * * * * * * * * * * * * * * * |

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|---|--------------------------------------|--|--------------------|-------------------------|---------------------|-----------------|--------------|--|
| (Rev. 1 Apr. 1945) (Supersedes GRS Form 1) | | | | | | OF REPORT | | |
| Imprint Identification | | Section 1.—IDENTIFICATION | i | | | | | |
| DO NOT TY |) | | SERI | AL No. | | | | |
| | / | TOWNS W | | | [83 | Unknown | | |
| \ | 1 | GRADE | GRADE ORGANIZATION | | | | //CF | |
| | 0 | Thinner. | | knova | | ICH OF SERV | TICE | |
| \ | Ú | V-12-1-12 | | KROTA | U U | nknown | | |
| \ | / | RACE | RELIGION | | IF OTHER TH | IAN U. S. DE | AD, GIVE | |
| | | Taknova | | meva | NAME OF C | OUNTRY | | |
| | | | <u> </u> | | <u> </u> | | <u> </u> | |
| PLACE OF DEATH | | CAUSE OF DEATH | | | DATE | OF DEATH | | |
| Quadalcanal, | B. T. | Unknown | | | | | | |
| EMERGENCY ADDRESSEE (No | | _ | | · | | <u>Taknom</u> | <u> </u> | |
| · | | • | | | | | | |
| | | Uni | BOVE | | | | | |
| IDENTIFICATION TAGS FOUN | D ON BODY | IF NO TAGS FOUND ON BODY. | | F IDENTIFICATION (| [f unidentified, fi | Il in section t | on reserve) | |
| (1, 2, or none) | | | | | | | | |
| None | | Uni | dentifiable | • | * | | | |
| WERE SUBSTITUTE TAGS PRO | OVIDED?(Yes or no |) | | | | | | |
| Yes | | | | | | | | |
| LICT PERCONAL SECENT FO | UND ON DODY IN | D DICTOCITION OF CAME | | | | | | |
| LIST PERSONAL EFFECTS FO | UND ON BOOT AN | D DISPOSITION OF SAME | | | | | | |
| | | | | | | | | |
| | | _ | | | | | | |
| | | I.e | ne e | | | | | |
| | | | | | | | | |
| Section 2,—BURIAL If of | her than in eeta | blished cemetery, furnish sket | ch and map coord | inates on reverse. | | | | |
| NAME, NUMBER, COORDINAT | ES, AND LOCATIO | N OF CEMETERY | | | | | | |
| US Army Manao] | own. Sobo | field Barracks, T. | • | | | | | |
| ··· | | | | | | , | Facket | |
| DATE OF BURIAL | HOUR | BURIED IN (Shroud, blanket, or | name of other) | TYPE OF GRAVE MARKER | PLOT No. | ROW No. | CRAVE NO. | |
| 14 Jan 1948 | | Metal lined | castes | | | i | 73 A | |
| WAS THIS A REBURIAL? | IF A REBURIAL | INDICATE NAME, NUMBER, COOR | | US CEMETERY AND I | OCATION OF G | RAVE | 1 | |
| (Yes or no) | | The state of the s | | | PLOT No. | ROW No. | GRAVE No. | |
| Va. | ATTO COM | etery, Quadalcanal | | | 1 | 76 | 10 | |
| TYPE OF RELIGIOUS | | CTING BURIAL RITES | IF IDENTIFICATI | ON TAGS NOT USED. | DESCRIBE IDE | | | |
| CEREMONY | CEREMONY CONTAINERS BURIED WITH BODY | | | | | | | |
| | | | | | | | | |
| IDENTIFICATION TAG BURIES BODY (Yes or No) | | ITIFICATION TAG ATTACHED TO | | | | | | |
| DOD! (188 0F 180) | | THE OF HO | | | | | | |
| | | | | | | | | |
| BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) | | | RANK | SERIAL No. | ORGANIZATIO |)N GRA | VE. No. | |
| Not applicable due to | | | | | | | | |
| BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) | | | I RANK | SERIAL No. | ORGANIZATIO | ATION GRAVE NO. | | |
| DOUG DUNIED ON DEDUCATE AND A TAME (LAMIS STATE STREET) | | |) Marin | SERIAL NO. | ONGANIZATIO | GRAVE NO. | | |
| manner of storing caskets. | | | | | | | | |
| SIGNATURE OF PERSON PRE | SIGNATURE OF G | RS,OFFICER VERIFYII | NG REPORT | | | | | |
| Denevice J. | J. Jow | For | Fre | 1 12 lin | | | • | |
| I. K. USRE | R - Clerk | | MARI | سا کمکتریته است | WO, TRA | | | |
| | | nal for U.S. and allied dead, e | | | dead, to the | Quarter mai | eter General | |
| through Headquarters G | KS Officer. Cop | ies for retention in theater as | prescribed by the | ter commander. | 2 | | | |

| | Section 3. NIDENTIFIED | REMAINS. | | | | | |
|------------------------|---|---|--------------------|-----------------------|--|--|--|
| LEFT RII | INSTRUCTIONS: (a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks. (b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured. | | | | | | |
| LEFT RING FINGER | HEIGHT WEIGHT | · · · · | | SCARS, OR TATTOOS | | | |
| MIDDLE FINGER | WEAPON AND SERIAL NO. | LAUNDRY MARKS | WHERE BODY | WAS BURIED OR FOUND | | | |
| NGER | DIMER IDENTIFICATION CEC | , E | | | | | |
| LÉFT INDEX FINGER | FILLINGS | SILVER FILLING | 3 3 0 | | | | |
| THUMB | CAVITIES | CAVITY | 5 000 | PER NO. | | | |
| RIGHT THUMB | MISSING TEETH | TOOTH MISSING | DIAGRAM REPRESENTS | THE MOUTH WIDE OPEN | | | |
| RIGHT INDEX FINGER | BRIDGE WORK | PORCELAIN CROWN GOLD CROWN GOLD BRIDGE | 15 C | MER 15 14 14 13 12 12 | | | |
| MIDDLE FINGER | FURNISH SKETCH AND MAP | REFERENCE AND COORDINATE | 11 O 0 9 | ESTABLISHED CEMETERY | | | |
| GER RING FINGER | - | | | | | | |
| RIGHT LITILE FINGER | REMARKS: | | | | | | |