

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 Unknown, Castelfiorentino, X-247

SUBJECT

Interred 3 Nov. 1949

H 8 24 USMC ANZIO

1

DISINTERMENT DIRECTIVE
WILLARD EDGERTON
Major QMC, Cemetery Superintendent

*AUTH: WCL 48670, OOLG, DTD 17 Oct 49

SECTION A - NAME AND BURIAL LOCATION OF DECEASED
DIRECTIVE NUMBER: 5217 04854
DATE: 28 DAY, 09 MONTH, 49 YEAR

NAME: UNKNOWN X-247
SERIAL NUMBER: [blank]
GRADE: [blank]
ARM: 8
RACE: 0
RELIGION: 6

CEMETERY: CASTELFIORENTINO ITALY
PLOT: 2J
ROW: 86
GRAVE: 4768
DISPOSITION OF REMAINS: 5202 CODE, 80 DIST CTR

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE: FIRENCE, ITALY
* NEPTUNO, ITALY
NAME AND ADDRESS OF NEXT OF KIN: (BY ADMINISTRATIVE DECISION)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME: [blank]
SERIAL NUMBER: [blank]
GRADE: [blank]
DATE OF DEATH: [blank]
DATE DISTINTERRED: [blank]
IDENTIFICATION TAG ON: [blank]
ORGANIZATION: UNKNOWN
RELIGION: [blank]
IDENTIFICATION VERIFIED BY: [blank]
NAME AND TITLE: [blank]

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: [blank]
CONDITION OF REMAINS: [blank]
OTHER MEANS OF IDENTIFICATION: [blank]

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

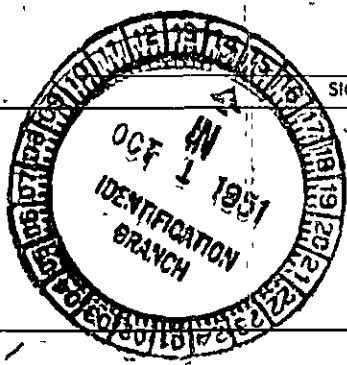
REMAINS PREPARED AND PLACED IN CASKET

DATE: [blank] BY: [blank]
CASKET SEALED BY: [blank] EMBALMER (Signature): [blank]
CASKET BOXED AND MARKED: [blank] SHIPPING ADDRESS VERIFIED BY: LEWIS A. MC AMIS CAPT. QMC

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 UNIDENTIFIABLE



FILE
16 JAN 1950
IDENTIFICATION BRANCH
MEMO. DIV.

Serial # 61

RECORD OF CUSTODIAL TRANSFER

1 SHIPPED

FROM LEGHORN PORT MORGUE		TO USMC ANZIO	
KIND OF CONVEYANCE TRAIN		NAME OF CONVOYER CHARLES D. BUTTE, 1st Lt, MC	
SIGNATURE OF SHIPPER LEWIS A MCANIS CAPT MC	DATE 27 Oct 49	SIGNATURE OF RECEIVER <i>Willard Edgerton</i> WILLARD EDGERTON, MAJOR MC	DATE 28 Oct. 1949

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		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

To be used only when disinterment is made prior to receipt of OQG Form 1194 (Disinterment Directive)

Remains Storage Point Location

AGRS - MZ WORK SHEET DISINTERMENT

Date 4 August 1949

No.

SECTION A: Information obtained from Zone Hq Record

NAME	SERIAL NO.	RANK	ARMS
UNKNOWN AMERICAN X-247	Unk.	Unk.	Unk.

CEMETERY	RACE
U.S. MILITARY CEMETERY, CASTELFIORENTINO, ITALY	Unk.

PLOT	ROW	GRAVE	COUNTRY	RELIGION
2J	86	4768	ITALY	Unk.

*SECTION C: DISINTERMENT AND IDENT. (Info obtained from Remains &/or Grave marker)

NAME	SERIAL NO.	RANK	DATE DISINTERRED
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IDENTIFICATION TAG ON	OQG FORM #1042 with remains	RELIGION	IDENTIFICATION VERIFIED BY
-----------------------	-----------------------------	----------	----------------------------

Remains	Marker	(Yes or No)	Name & Title

SECTION D: PREPARATION OF REMAINS FOR STORAGE

NATURE OF BURIAL	CONDITION OF REMAINS
SHROUD	SKELETAL STATE

OTHER MEANS OF IDENTIFICATION
NONE

MINOR DISCREPANCIES
NONE

REMAINS PREPARED AND PLACED IN CASKET

Date 19 August 1949

By LEWIS A. MC AMIS, CAPT OMC

CASKET SEALED BY

EMBALLER (Signature)

LEWIS A. MC AMIS, CAPT OMC

IDENTIFICATION PLATE PLACED ON CASKET

Date 19 August 1949

Name LEWIS A. MC AMIS,

Title CAPT OMC

REMARKS

NONE

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

H. L. Duncan
H. L. DUNCAN, MAJ OMC

Signature of GRS Inspector
Grade and Organization

*Section "B" Omitted

To be used only when disinterment is made prior to receipt of OCG Form 1194 (Disinterment Directive) Remains Storage Point Location

AGRS - MZ WORK SHEET DISINTERMENT

Date 4 August 1949

No.

SECTION A: Information obtained from Zone Hq Record

NAME	SERIAL NO.	RANK	ARMY	
UNKNOWN AMERICAN X-247	Unk.	Unk.	Unk.	
CEMETERY			RACE	
U.S. MILITARY CEMETERY, CASTELFIORENTINO, ITALY			Unk.	
PLOT	ROW	GRAVE	COUNTRY	RELIGION
2J	86	4768	ITALY	Unk.

*SECTION C: DISINTERMENT AND IDENT. (Info obtained from Remains &/or Grave marker)

NAME	SERIAL NO	RANK	DATE DISINTERRED
IDENTIFICATION TAG ON	QPC FC: #1042	RELIGION	IDENTIFICATION VERIFIED
	with remains		BY
Remains	Marker	(Yes or No)	
<input type="checkbox"/>	<input type="checkbox"/>		Name & Title

SECTION D: PREPARATION OF REMAINS FOR STORAGE

NATURE OF BURIAL	CONDITION OF REMAINS	
SHROUD	SKELLETAL STATE	
OTHER MEANS OF IDENTIFICATION		
NONE		
MINOR DISCREPANCIES		
NONE		
REMAINS PREPARED AND PLACED IN CASKET		
Date 19 August 1949	By LEWIS A. MC AMIS, CAPT OMC	
CASKET SEALED BY	EMBALMER (Signature)	
LEWIS A. MC AMIS, CAPT OMC		
IDENTIFICATION PLATE PLACED ON CASKET		
Date 19 August 1949	Name LEWIS A. MC AMIS,	Title CAPT OMC
REMARKS		
NONE		

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

H. L. Duncan
H. L. DUNCAN, MAJ OMC
Signature of GRS Inspector
Grade and Organization

*Section "B" Omitted

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
MEDITERRANEAN ZONE
9107 TSU GMC
APO 794 US ARMY

TCA/WN/iv
12 August 1949

GR 293

SUBJECT: Unidentifiable Deceased

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

1. Transmitted herewith are CIL Reports with Certificates of Unidentifiability for remains of Unknowns X-247 and X-248, USMC Castelfiorentino, Plot 2J, Row 86, Graves 4768 and 4769.
2. CIL Report for remains of Unknown X-248 is being forwarded for record in lieu of report forwarded by letter, this Headquarters, file GR 293, subject: Remains U. S. Deceased, Unidentifiable, dated 21 February 1949.
3. Remains interred as Unknown X-247 were segregated from remains interred in USMC Castelfiorentino as Unknown X-248 and USMC Pietramala, Plot O, Row 20, Grave 1966, as Pvt Madison C Eiland, 33749529. These remains were simultaneously processed on 28 July 1949 in an effort to reestablish the identity of Pvt Eiland.
4. Report of Board Proceedings reestablishing the identity of Pvt Madison C Eiland in USMC Pietramala, Plot O, Row 20, Grave 1966 is presently being prepared for Field Board action.

FOR THE COMMANDING OFFICER:

2 Incls:

- 1 - CIL Rpt, X-247
- 2 - CIL Rpt, X-248

*Incls w/d by
Ident. Sec. P. M. M.*

[Signature]
T. C. ANDERSON
Major QMC
S-3

GR 293 Castelfiorentino X-247

*File
25 Sep 49
Ralph [Signature]
J. M. [Signature]
[Signature]*

RECEIVED
AUG 30 1949
O O M G.
M & R BR.

IN
AUG 30 1949
IDENTIFICATION
BRANCH

OUT
SEP 2 1949
IDENTIFICATION
BRANCH

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
MEDITERRANEAN ZONE
9107 TSU GMC
APO 794 US ARMY

RB 293 CIL
UNKNOWN X-247
2J-86-4768
Castelfiorentino, Italy

JLJ/alj/rm
4 August 1949

SUBJECT: Transmittal of Report of Interment.


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

1. Reference is made to letter this Headquarters dated 17 January 1949 file GR 293 CIL, Subject: Transmittal of Reports of Interment, to which was attached Report of Interment for Vacant Grave 4768, Row 86, Plot 2-J, USMC Castelfiorentino. The remains formerly interred in Grave 4768 had been articulated with remains from Plot 2-J, Row 86, Grave 4769, USMC Castelfiorentino and Plot O, Row 20, Grave 1966, USMC Pietramala.

2. Subsequent reprocessing of remains in graves 4769, USMC Castelfiorentino and 1966, USMC Pietramala by anthropologist revealed that proper articulation had not been accomplished. Reprocessing by the anthropologist resulted in segregation of representative portions of three (3) remains.

3. Therefore, the third remains recovered through above mentioned reprocessing have been placed in Plot 2-J, Row 86, Grave 4768, USMC Castelfiorentino as Unknown X-247 and it is requested that the Report of Interment for Vacant Grave be cancelled. Corrected Report of Interment (QMC Form 1042) for grave 4768 together with QMC Form 1044 is attached herewith.

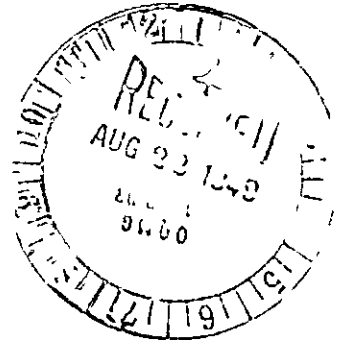
FOR THE COMMANDING OFFICER:


T. C. ANDERSON
Major QMC
S-3

2 Incls:
1. QMC Fm 1042 (Unk. X-247)
2. QMC Fm 1044 (Unk. X-247)

3096

293 Unk + 247 Italy Castelfiorentino



HEADQUARTERS
 AMERICAN GRAVES REGISTRATION SERVICE
 MEDITERRANEAN THEATER SEPARATE ZONE COMMAND-MTOUSA
 APO 794 US ARMY

LVD/az S-30
 27 August 1946

SUBJECT: Tracer.

TO : Commanding Officer
 2621 GRU (Ovhd), Field Sector Unit #2
 APO 790, U.S. Army.

1. Reference is made to letter, this headquarters, dated 8 June 1946, subject: Reports of Reinterment, with reference to "Believed to be" Eiland, Madison C., 33 749 526, interred in plot 2-J, row 86, grave 4768, Castelfiorentino.

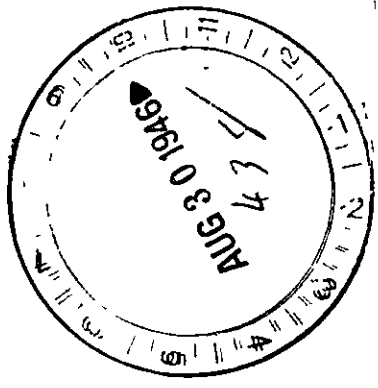
2. Subject report of reinterment was returned to your headquarters due to the fact a report of interment was previously transmitted to this headquarters for Pvt Madison C. Eiland, 33 749 526, interred in plot O, row 20, grave 1966, Pietramala, Italy.

3. It is requested status of subject correspondence be furnished this headquarters as to date records indicate no reply has been received.

BY ORDER OF LIEUTENANT COLONEL SCOTT:

1 Incl
 Cy of ltr. 8 June 46


 SAMUEL F. FRITZ
 Captain QMC
 S-1



HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
MEDITERRANEAN THEATER SEPARATE ZONE COMMAND-MTOUSA
APO 794 US ARMY

LVD/rm S-30
8 June 1946

SUBJECT: Reports of Reinterment

TO : Commanding Officer
2621 GRU (Ovhd) Zone #2
APO 790, U.S. Army

1. Report of reinterment for "Believed to be" Eiland, Madison C., 33749526, interred in plot 2-J, row 86, grave 4768, is returned herewith for further information.

2. Report of interment for Pvt. Madison C. Eiland, 33749526, has been previously submitted to this headquarters as positively identified by reason of one identification tag found on body. Subject deceased is interred in plot 0, row 20, grave 1966, Mt. Beni U.S. Military Cemetery, Pietramala, Italy.

3. Information made part of reports concerned indicates remains interred in grave 4768, Castelfiorentino, and grave 1966, Pietramala, were recovered from approximately the same location i.e. vicinity of Gesso, Italy, coords: M 01-24 and M 12-49, respectively.

4. It is requested remains interred in graves 4768 and 1966 be exhumed in an effort to determine whether remains in either or both graves constitute the recoverable remains of a single body. Report of findings will be furnished this headquarters indicating anatomical structure of remains found in both graves. Your headquarters will be notified of further action desired.

E. B. WADSWORTH,
Colonel QMC,
Commanding.

1 Incl: a/s

TRUE COPY

Samuel F. Fritz
SAMUEL F. FRITZ

Captain QMC
S-1

INCL #1

RESTRICTED

REPORT OF INTERMENT
(AR 30-1810 and AR 30-1814)

Date of Report
4 August 1949



Section 1-IDENTIFICATION		
Name (last, first, middle initial)		Serial No.
UNKNOWN AMERICAN X-247		Unk.
Grade	Organization	Branch of Service
Unk.	Unk.	Unk.
Race	Religion	If other than U.S. Dead, give name of Country
White	Unk.	USA

Place of Death	Cause of Death	Date of Death
Vicinity of Gesso, Italy	KIA	10 October 1944

Emergency addressee (Name, relationship and address)

Unknown

Ident. Tags found on body (1, 2, or none)	If no Tags found on body, describe means of identification (if unauthenticated, fill in sect. 3 on reverse)
None	

Were substitute tags provided? (Yes or No)	None
No	

Last personal effects found on body and disposition

None

Sect. 2-Burial if other than in established cemetery, furnish sketch and map coords on reverse side

Name, Number, Coordinates, and Location of cemetery
U.S. Military Cemetery, Castelfiorentino, Italy

Date of Burial	Hour	Buried in	Type of Grave	Plot #	Row #	Grave
Est. 30 Apr. 46	1100	Shroud	Wooden Cross	2J	86	4768

Was this a Reburial (Yes or No)	If a reburial, indicate Name, Number, Coords. of previous Cemeteries, & location of grave	Remains removed from the US Mil.
Yes	Cemeteries of Castelfiorentino and Pietramala, Italy.	Plot # 2J & 0 Row # 86 & 20 Grave 4769 & 1966

Type of religious ceremony	Person conducting burial	If Id. Tags not used, describe Id. Data and containers buried w/body
General	Local Chaplain	

Id. Tag buried with body (Yes or No)	If tag attached to marker (Yes or No)	Copy of this Report interred with remains.
None	No	

Body buried on deceased left, Name	Rank	Serial N.	Organization	Grave N.
UNKNOWN AMERICAN X-248	Unk.	Unk.	88 Inf. Div.	4769

Body buried on deceased right, Name	Rank	Serial N.	Organization	Grave N.
STEIN, William K.	Pvt.	42039881	Hq., 351st Inf.	4767

Signature of person preparing Report	Signature of GRS Officer verifying Report
	JOHN L. JACKS, JR., CAPT. QMC., GRO.

RESTRICTED

EX. H

RESTRICTED

Sect.3-Undertified Remains

Other identification class

Furrish sketch and coordinates for
Burial in other that established Cemetery

Remarks:

Remains of Unknown X-247 obtained through simultaneous processing by an anthropologist of remains of X-248, Plot 2J, Row 86, Grave 4769, USMC Castelflorentino and Pvt Madison C. Eiland, 33749529, Plot O, Row 20, Grave 1966, USMC Pietramala.

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN X-247				2. DATE OF REPORT 28 July 1949	
3. NAME OF CEMETERY USMC Castelfiorentino, Italy	4. PLOT	5. ROW	6 GRAVE	7. DATE OF	
	2J	85	4768	DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT About 140 lbs.	9. ESTIMATED HEIGHT 5' 9" Rollet	10. COLOR OF HAIR None	11. RACE White
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

None **"Non-Identifiable by reason of lack of sufficient identification data".**

T.C. ANDERSON
Major **OMC**

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

None

14. WAS BODY BURNED? TO WHAT EXTENT?

YES NO

15. WAS BODY MANGLED? TO WHAT EXTENT?

YES NO

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

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)

None

T/L 12 Aug 49
Subj: Unident. Remains
Received 2 Sep 49 OQMG
Not identifiable from
information presently available

INCL #1

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

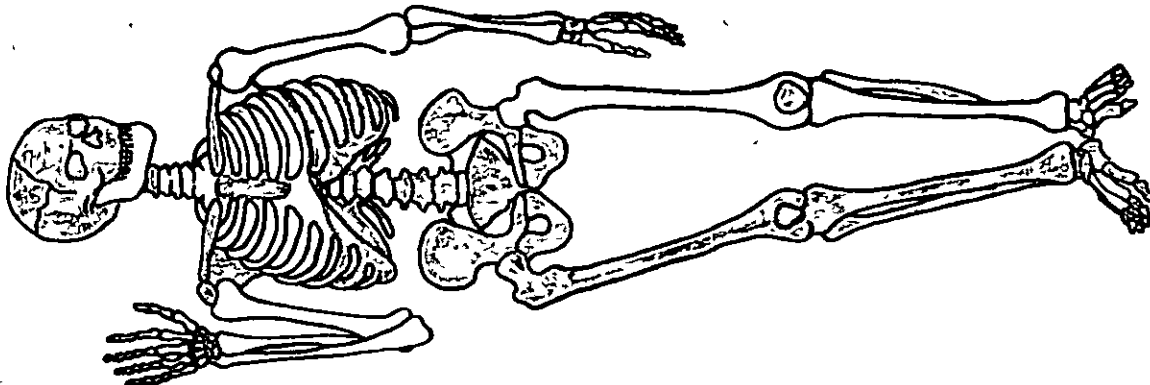
RIGHT								LEFT															
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8								
←								M I S S I N G								→							
Side Views																							
UPPER																							
LOWER																							
Side Views																							
⊗	A OM	A OM	⊗	A ODL			⊗	⊗	⊗			⊗	⊗	A O	A O								
16	15	14	13	12	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."

Tooth 12-R is leaning lingually so that tooth 11-R is slightly overlapping this tooth. The illustrated fillings are well made.

Teeth 15-L and 16-L are twisted mesially to fill the position of tooth 14-L which was extracted a long time prior to death.

19. BLACK OUT PARTS OF BODY NOT IDENTIFIED



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

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

Medium build.

In the opinion of the undersigned, the representative parts of a human remains, graphically represented in par 19 are those of one and the same individual.

s&t/Dr. ALEXANDER TARDY
ID., DA. (Anthropology), GSD., OGD.

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

s&t/LEWIS A. McAMIS, CAPT QMC, 9107 TSU-4MC, AGRS/MZ.

HEADQUARTERS
9102 TSU - CMC
MILITARY GRAVE REGISTRATION SERVICE
MEDITERRANEAN ZONE
APO 794 US A

CENTRAL IDENTIFICATION POINT

PROGRAM OF INVESTIGATION

Paragraph 1-17 and 19-21, Identification Data QMC 1044 and 1044b

Paragraph 18 - Identification Dental Chart

Remains segregated from X-248, 2J-86-4769, USMC
Castelfiorentino, Italy, and from EILAND, Madison
C., Pvt., 33749529, O-20-1966, USMC Pietramala,
Italy.

Unknown American X- 247

C.I.P. Case No. _____

Date of Investigation 28 July 49

Am. Mil. Cor. Castelfiorentino Italy: Plot 2J Row No. 86 Grave 4768

Place of Death _____ Date of Death _____

Map Reference _____ Sheet _____ Map of Italy _____

Other American Dead Found in Same Area _____

Cause of Death _____

22. Description of Remains

Skeletal state.

(If the remains have not been decomposed, attach to this form QMC Form 1042,
completely filled out to physical characteristics).

23 Skeletal Data

HEAD Only mandible present.

TOOTH CHART Accomplished.

TRUNK Present are: the 5th, 6th, 7th cervical; 2nd, 3rd, 4th, 8th, 9th, 10th, 11th dorsal; 1st lumbar vertebrae; 1 Scapula, and 6 R and 4 L ribs.

UPPER EXTREMITIES (Give measurements of long bones).

R Humerus 33.9 cm. L Humerus 34.2 cm.

R Ulna 27.1 cm. L Ulna 27.0 cm.

R radius 25.5 cm. L radius 25.3 cm.

Carpels, Metacarpels, Phalanges 8 Metacarpels and 1 phalanx are present.

LOWER EXTREMITIES. (Give measurements of long bones).

R Femur Missing L Femur 47.6 cm.

R Tibia Missing L Tibia 38.5 cm.

R Fibula Missing L Fibula Missing

Calcanea, Tarsals, Phalanges, Metatarsals, Phalanges 1 R and 4 L tarsals, 2 R and 2 L metatarsals, and 2 phalanges are present.

Remains segregated from X-248 and from ELLAND, Madison C.

24. AGE ESTIMATED AT 23-30

BASED ON Degree of closure of epiphyseal lines of the bones.

25. SUMMARY OF FINDINGS: Tooth chart - Accomplished.
 Age estimate - 23-30.
 Height estimate - 5' 9" Rollet.
 Weight estimated at about - 140 lbs., medium build.
 Shoe size estimated at about - 8 (By my own system).
26. RECOMMENDATIONS: (Exact determination of shoe size is impossible due
 to the few foot bones present).

PROCESSED BY:

s/t/Dr. ALEXANDER TARDY
M.D., DA. (Anthropology), GSD., OSD.

s/Lewis A. McAmis
(Signature of Officer)

t/LEWIS A. McAMIS
Capt QMC
OIC CIL

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN Eiland, Madison C., 33 749 529			2. DATE OF REPORT 24 January 1948		
3. NAME OF CEMETERY U. S. Military Cemetery Pietramala, Italy	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	0	20	1966	DISINTERMENT 24 Jan 48	REINTERMENT 24 Jan 48

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT 5' 9"	10. COLOR OF HAIR	11. RACE White
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

**1 identification tag: Eiland, Madison C.
1 EMT 33749529 T43 0**

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

14. WAS BODY BURNED? TO WHAT EXTENT?

YES NO

15. WAS BODY MANGLED? TO WHAT EXTENT?

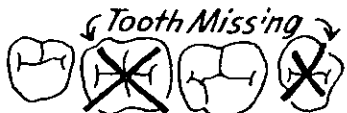
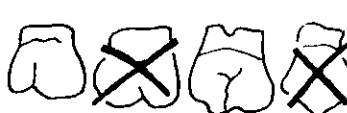
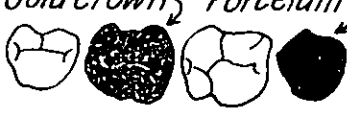



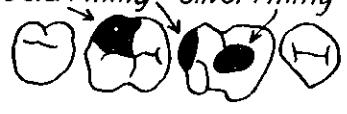



YES NO

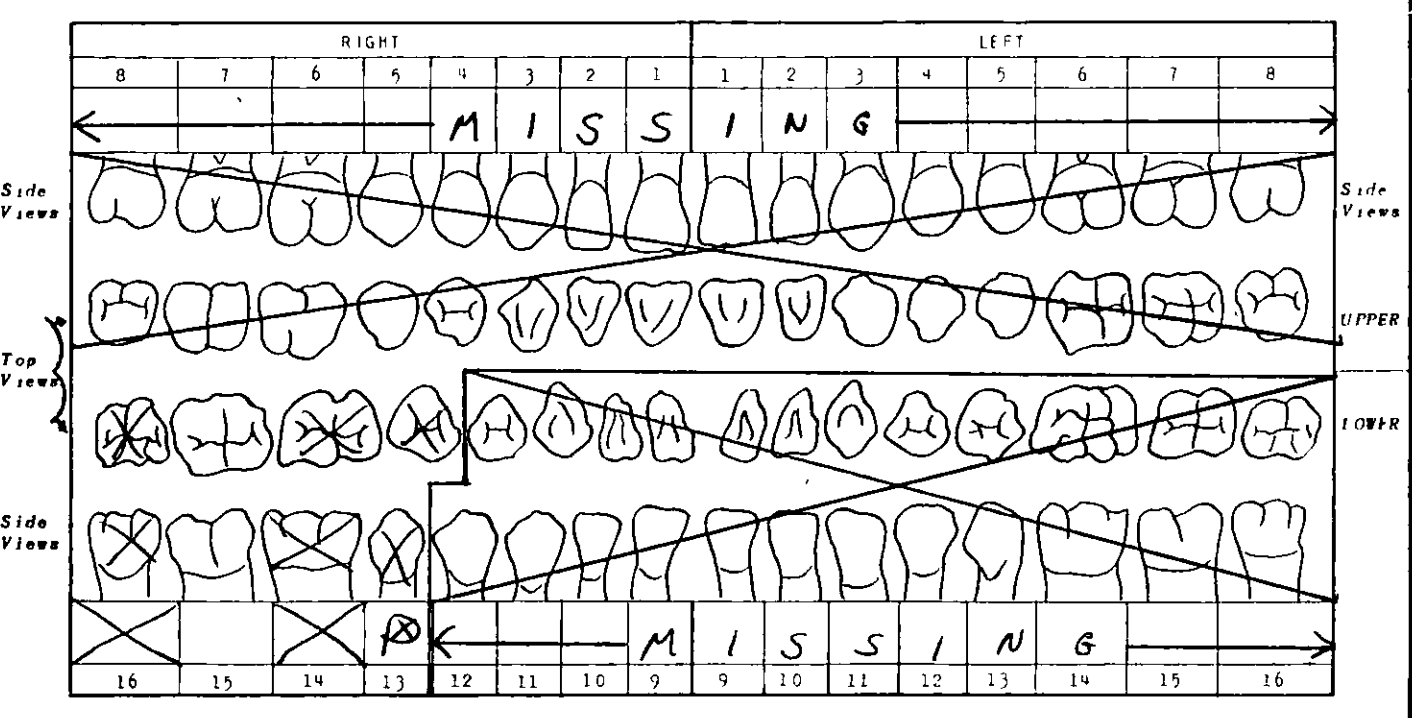
16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

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)

**Woolen sweater
Cotton shorts
scraps of web waist belt
Woolen socks
Combat trouser s
No markings or pin numbers were found.**

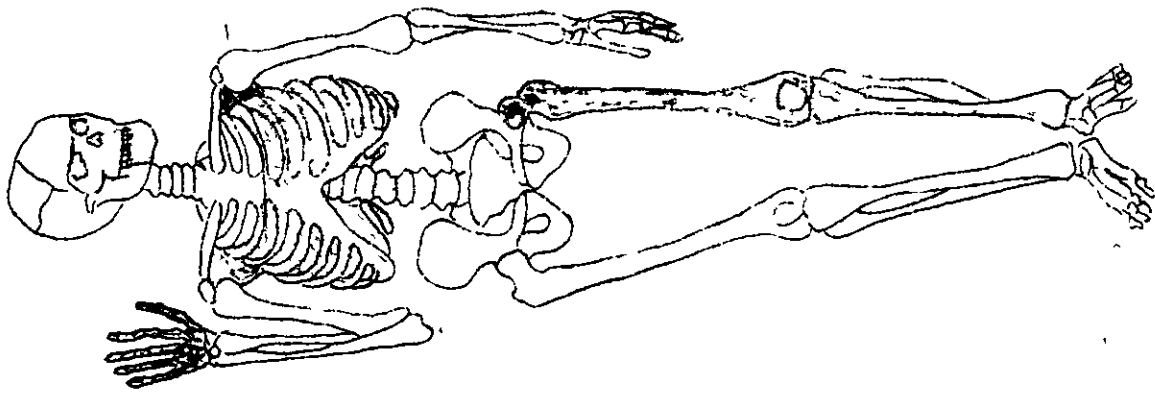
18.	TOOTH CHART	
<p>MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED, THUS</p>	<p>TOP VIEW</p> 	<p>SIDE VIEW</p> 
<p>CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN),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



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"

tooth 15-R is so broken that the crown is completely missing.

19. BLACK OUT PARTS OF BODY NOT RECOVERED



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

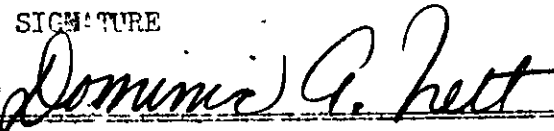
I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF _____ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS:

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

The above chart represents the remains now interred as positively identified Madison G. Biland.
The skeletal remains of only one (1) man is now present in the grave.
Exchange of bones between original remains interred in this grave and "Believed to Be" Madison G. Biland, Plot 2-J, Row 65, Grave 4768 and Unknown American X-248, Plot 2-J, Row 65, Grave 4769, both interred at U. S. Military Cemetery Castelfiorentino, was accomplished.
The skeletal remains of only two (2) men were found to be present in the combined three (3) graves.
Grave 4769, Row 65, Plot 2-J, "Believed to Be" Madison G. Biland is now a vacant grave.

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

TYPED NAME, GRADE, ARM OF SERVICE AND ORGANIZATION 2nd Lt. ASST 9107 SOU-CMO, ACRO/MZ	SIGNATURE 
--	---

23. Skeletal Data

HEAD Facial bones missing.

TOOTH CHART Accomplished.

TRUNK Left & right clavicles, 6 ribs, 5 cervical, 12 dorsal and 4 lumbar vertebrae and complete pelvic structure are present.

UPPER EXTREMITIES. (Give measurements of long bones.)

R Humerus	<u>33.9 cm.</u>	L Humerus	<u>33.9 cm.</u>
R Ulna	<u>26.8 cm.</u>	L Ulna	<u>26.8 cm.</u>
R Radius	<u>25.4 cm.</u>	L Radius	<u>25.3 cm.</u>
Carpals, Metacarpals, Phalanges	<u>Missing.</u>		

LOWER EXTREMITIES. (Give measurements of long bones.)

R Femur	<u>43.5 cm.</u>	L Femur	<u>missing</u>
R Tibia	<u>38.8 cm.</u>	L Tibia	<u>missing</u>
R Fibula	<u>broken</u>	L Fibula	<u>30.5 cm.</u>

Calcanea, Tarsals, Patallae, Metatarsals, Phalanges Right patella, right calcanea, right & left tali, 6 tarsals, 10 metatarsals, and 4 phalanges are present.

24. AGE ESTIMATED AT between 35 and 40 years.

BASED ON Sagittal suture completely closed. Lambdoidal suture almost closed.

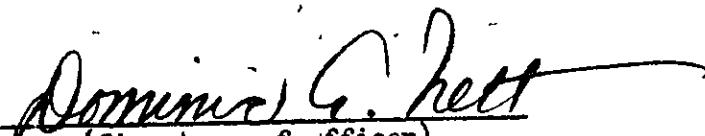
25. SUMMARY OF FINDINGS:

Tooth chart--accomplished
Height estimate--5' 9"
Age estimate --between 35 and 40 years
The skeletal remains of only one (1) man is now present in the grave.



26. RECOMMENDATIONS:

That the above data be checked with known information on Madison C. Eiland, Private, 33 749 529, in order to verify identification.

PROCESSED BY:
DR. Alexander Hardy, MD
Chief Anthropologist


(Signature of Officer)
DOMINIC A. NETT
2nd Lt., QMC
C.I.P. Officer

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 4 August 1949	
Imprint Identification Tag If Possible DO NOT TYPE 		Section 1—IDENTIFICATION.					
		NAME (Last, first, middle initial) UNKNOWN AMERICAN X-247				SERIAL NO Unk.	
		GRADE Unk.		ORGANIZATION Unk.		BRANCH OF SERVICE Unk.	
		RACE White		RELIGION Unk.		IF OTHER THAN U S DEAD GIVE NAME OF COUNTRY USA	
PLACE OF DEATH Vicinity of Gesso, Italy		CAUSE OF DEATH KIA				DATE OF DEATH 10 Oct 1944	
EMERGENCY ADDRESSEE (Name, relationship, and address) Unk.							
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) No		None					
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 US Military Cemetery, Castelfiorentino, Italy							
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO	ROW No	GRAVE No	
Est. 30 Apr 1946	1100	Shroud	Wooden Cross	2J	86	1768	
WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER COORDINATES OF PREVIOUS CEMETERY AND LOCATION OF GRAVE Remains removed from the US Military Cemeteries of Castelfiorentino and Pietramala, Italy						
TYPE OF RELIGIOUS CEREMONY General		PERSON CONDUCTING BURIAL RITES Local Chaplain		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY Copy of this report interred with remains.			
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) None		IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) No					
BODY BURIED ON DECEASED LEFT NAME (Last, first, middle initial) Unknown American X-248			RANK Unk.	SERIAL NO Unk.	ORGANIZATION 88 Inf Div	GRAVE NO 1769	
BODY BURIED ON DECEASED RIGHT NAME (Last, first, middle initial) Stein, William K.			RANK Pvt	SERIAL NO 42039881	ORGANIZATION Hq 351st Inf	GRAVE NO 4767	
SIGNATURE OF PERSON PREPARING REPORT				SIGNATURE OF GRS OFFICER VERIFYING REPORT  JOHN H. JACKS, JR., CAPT. QMC., GRO			
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							

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Section 3 - UNIDENTIFIED REMAINS.


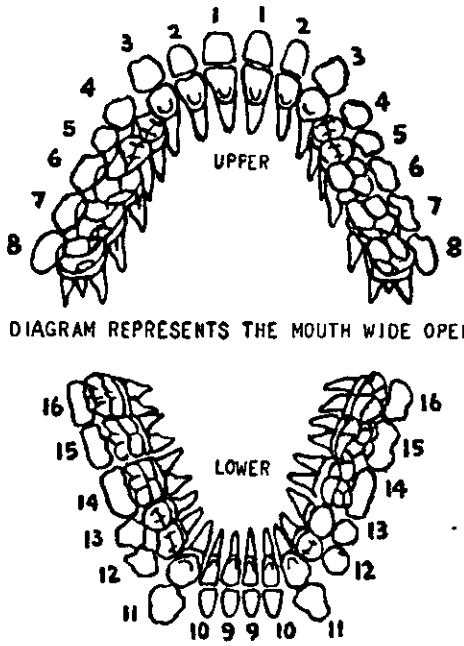




INSTRUCTIONS

(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.

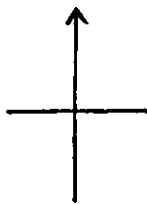
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth 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>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p> <p>LOWER</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 Remains of Unknown X-247 obtained through simultaneous processing by an anthropologist of remains of X-248, Plot 2J, Row 86, Grave 4769, USMC Castelfiorentino and Pvt Madison C. Eiland, 33749529, Plot O, Row 20, Grave 1966, USMC Pietramala.

Remains segregated from X-248, Plot 2J, Row 86, Grave 4769, USMC
 Castelfiorentino, Italy, and from EILAND, Madison C., Pvt.,
 33749529, Plot O, Row 20, Grave 1966, USMC Pietramala, Italy.

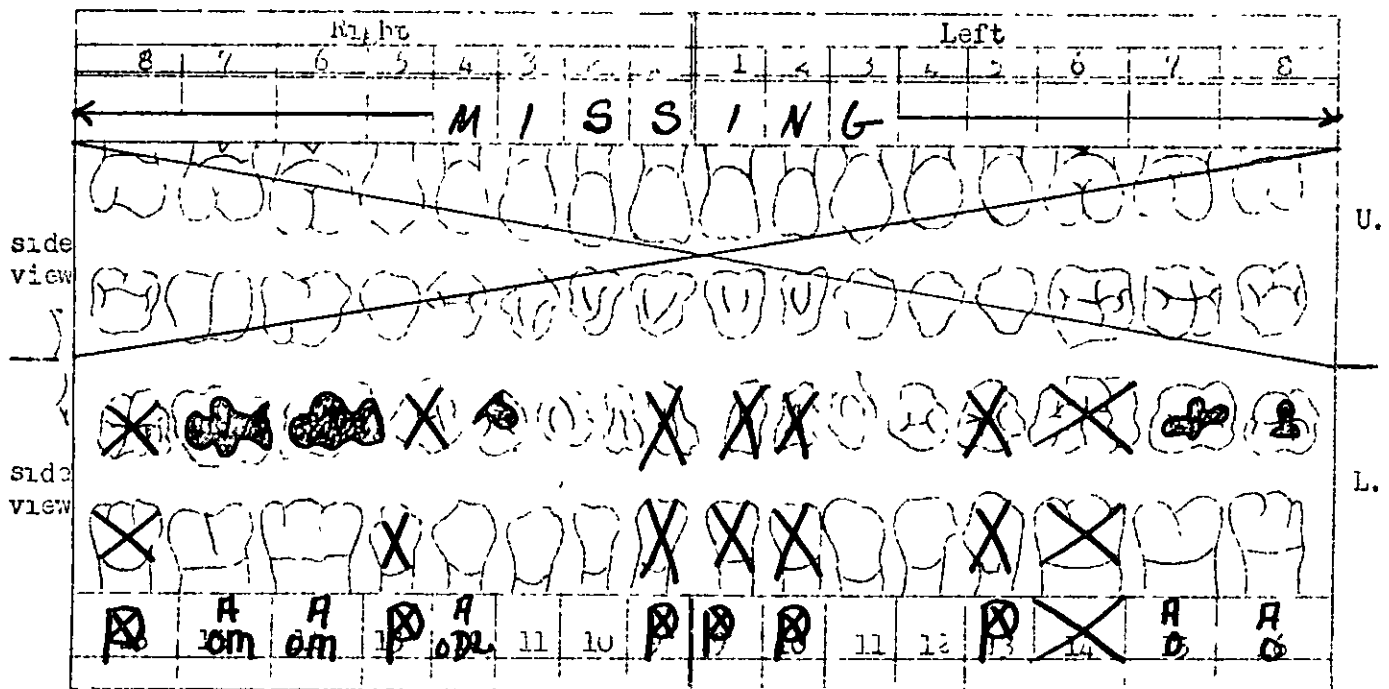
IDENTIFICATION REPORT						
1. NAME OF UNIT				2. DATE OF REPORT		
X-247				28 July 1949		
3. NAME OF CELESTIAL BODY		4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
USMC		:	:	:	: BEGIN - END -	
Castelfiorentino		2J	86	4768	: INTERMEDIATE - TERMINAL	
PHYSICAL DESCRIPTION						
8. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR OF HAIR	11. COLOR			
About 140 lbs.	5'9" Rollet	None	White			
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS						
None						
13. GIVE DESCRIPTION OF TATTOOS OR SCARS OR ANY OTHER SUCH INFORMATION OBTAINED FROM OTHER SOURCES.						
None						
14. WAS COMBATED?		15. HOW EXTENSIVE?				
<input checked="" type="checkbox"/> YES						
16. WAS BODY MARKED?		17. TO WHAT EXTENT?				
<input checked="" type="checkbox"/> YES						
18. DESCRIBE EVIDENCE OF FINGER FRAGMENTS AND FINGERPRINTS FOUND						
None						
19. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, MATERIAL, 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						

MC FORM 1044 PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE

[Handwritten signature and initials]

18.

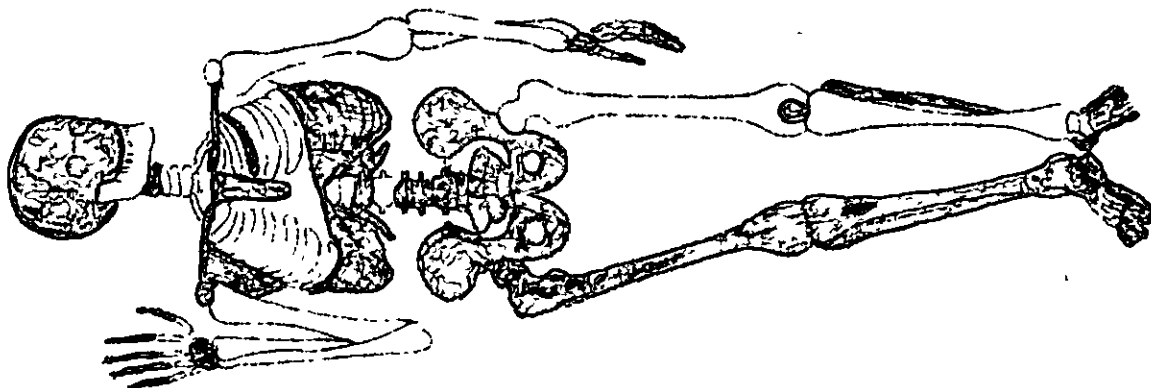
TOOTH CHART



Dentures (Plates): Tooth 12-R is leaning lingually so that tooth 11-R is slightly overlapping this tooth. The illustrated fillings are well made. Teeth 15-L and 16-L are twisted mesially to fill the position of tooth 14-L which was extracted a long time prior to death.

Remains Segregated from X-248 and EILAND, Madison C.

19. Black out parts of body not recovered



20. MASS BURIAL CERTIFICATE (if applicable)
(Wherein segregation in whole or parts is impossible)

I certify that the Group remains consist of parts of _____ (Number)
precedents based on the presence of one or more of the following
anatomical parts.

(Signature of Medical Officer)

21. RETURNS AND IDENTIFICATION INFORMATION

Medium build.

In the opinion of the undersigned, the representative parts
of a human remains graphically represented in par 19 are those
of one and the same individual.

Alexander Tandy
Dr. ALEXANDER TANDY
M.D., D.A. (Antropology), G.S.D., O.S.D.

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

Typed Name, Grade, Arm or Service and Organization SIGNATURE

Lewis A. McAmis
LEWIS A. MC AMIS, CAPT QMC, 9107 TSU-QMC, AGRS/MZ

HEADQUARTERS
9107 TSH - OMC
AMERICAN COMBAT IDENTIFICATION SERVICE
EUROPEAN ZONE
APO 994 US ARMY

CENTRAL IDENTIFICATION POINT

REPORT OF INVESTIGATION

Paragraph 1-17 and 19-21, Identification Data OMC 1044, and 1044b
Paragraph 18 - Identification Dental Chart

Remains segregated from X-248, 2J-86-4769,
USMC Castelfiorentino, Italy, and from EILAND, C.I.P. Case No. _____
Madison C., Pvt., 33749529, O-20-1966, USMC
Pietramala, Italy. Date of Investigation 28 July 49
Unknown American X- 247

Am. Mil. Cer: Castelfiorentino Italy: Plot 2J Row No. 86 Grave 1768

Place of Death _____ Date of Death _____

Map Reference _____ Sheet _____ Map of Italy _____

Other American Dece Found in Same Area _____

Cause of Death _____

22. Description of remains

Skeletal state.

(If the remains have not been decomposed, attach to this form OMC Form 1042,
completely filled out to physical characteristics).

23 Skeletal Data

HEAD Only mandible present.

TOOTH CHART Accomplished.

TRUNK Present are: the 5th, 6th, 7th cervical; 2nd, 3rd, 4th, 8th, 9th, 10th, 11th dorsal; 1st lumbar vertebrae; L Scapula, and 6 R and 4 L ribs.

UPPER EXTREMITIES (Give measurements of long bones).

R Humerus 33.9 cm L Humerus 34.2 cm

R Ulna 27.1 cm L Ulna 27.0 cm

R Radius 25.5 cm L Radius 25.3 cm

Carpels, Metacarpels, Phalanges 8 Metacarpels and 1 phalanx are present.

LOWER EXTREMITIES. (Give measurements of long bones).

R Femur Missing L Femur 47.6 cm

R Tibia Missing L Tibia 38.5 cm

R Fibula Missing L Fibula Missing

Calcanea, Tarsals, Patallae, Metatarsals, Phalanges 1 R and 4 L tarsals, 2 R and 2 L metatarsals, and 2 phalanges are present.

Remains segregated from X-248 and from EILAND, Madison C.

24. AGE ESTIMATED AT 23-30

BASED ON Degree of closure of epiphvseal lines of the bones.

25. SUMMARY OF FINDINGS:

Tooth chart - Accomplished

Age estimate - 23-30

Height estimate - 5' 9" Rollet.

Weight estimated at about - 140 lbs., medium build.

Shoe size estimated at about - 8 (By my own system).

(Exact determination of shoe size is impossible due


26. RECOMMENDATIONS: to the few foot bones present)

PROCESSED BY:

Alexander Tandy

Dr. ALEXANDER TANDY
M.D., D.A. (Anthropology), G.S.D., 030

60784



(Signature of Officer)

LEWIS A. MC ANIS
Capt QMC
OIC CIL

RESTRICTED

Q.M.C. Form 1 - GRS
505 NATOUSA
July 1943

Stamped:
EILAND, MADISON C.
93749529 T-3

REPORT OF BURIAL
AR 30-1815 & TM 10-630

21 July 1945

Date Report Filled Out

EILAND (Last Name) **Madison** (First Name) **C.** (Middle Initial) **93749529** (Serial No.) **White** (Race)
Unknown Pvt. (Rank) **Unknown (Co.B) (351st Inf)** (Organization) **Army (88th div)** (Branch) **USA** (Country)
Vicinity of Gesso, Italy (Place of Death) **Unknown (100st 44)** (Date of Death) **KIA** (Cause of Death) **Unk. (Protestant)** (Religion P. C. H. etc)

M 012-249

MEANS OF IDENTIFICATION

Identification Tags found on body (1); No ().
If no identification tags, other means used to identify body (identification card, letters, etc) - **EMT Form 52b**

Complete fingerprint chart of both hands on reverse side if body cannot be identified.
Complete tooth-chart on reverse side and list anatomical characteristics and other data if fingerprints cannot be taken.

If unidentified, give circumstances.

List of Personal Effects found on Body and disposition of Same **None**

Wife: **Mrs. Mary A. Eiland**
o/o Mrs. Avis Adams
C.F.

Route #2, Box 82
Andalusia, Alabama

(Name of Emergency Addressee)

(Address of Emergency Addressee)

Joseph A. Aja, T/Sgt. 602nd JG CR Company

(Signature (or Name) of Person furnishing above data when other than the Officer reporting burial.)

Shroud 1000 hrs. 21 July 1945

Lt. Beni US Military Cem., Pietramala, Italy

(Time and Date of Burial)

(Location, Name, & No. of Cemetery)

IF BURIAL OTHER THAN IN ESTABLISHED CEMETERY FURNISH SKETCH AND MAP REFERENCE REVERSE SIDE THIS FORM

0 (Plot No.) **20** (Row No.) **1966** (Grave No.) **Wooden cross** (King Grave Markers) **General** (Type of Religious Ceremony)

Identification Tag buried with body () Identification Tag attached to marker ()
If identification Tags not present, what other identification data were buried with the body and in what kind of container? **QMC Form 1 GRS sealed in bottle and buried one (1) foot below grave marker.**

Bodies buried on either side (See paragraph 4 on reverse side this form.)

Right side: **HELRICH, Lewis** (Name) **Unk.** (Rank) **15301057** (ASN) **Unk.** (Organization) **1965** (Grave No.)
 Left side: **HINTON, Henry** (Name) **Unk.** (Rank) **93794600** (ASN) **Unk.** (Organization) **1967** (Grave No.)

(Signature of Person Reporting Burial)

/s/ Bill L. Jack
(Verified by G.R.S. Officer)

BILL L. JACK, 1st Lt. OLP

INSTRUCTIONS FOR FILLING OUT BURIAL REPORT: Make out QMC Form 1 - GRS in quadruplicate for U.S. dead, one additional copy for allied and enemy dead. Sign all copies. Submit report to nearest member of Graves Registration Service. Graves Registration Service will forward the original and two copies through at least one higher administrative headquarters (to be checked against Casualty Reports and allied papers and all copies verified by the Graves Registration Officer of that headquarters) to Base Section Graves Registration Service Officer. OVER FOR BURIAL INSTRUCTIONS.

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INSTRUCTIONS FOR BURIAL

1 PREPARATION OF BODY . Have body examined by member of Medical Department whenever possible (to attach E M T Form 52b) Remove all personal property, remove one identification tag leave other on body in protected position (in case of enemy dead, leave 1/2 tag on body forward 1/2 with personal effects) If no tag present, make notation of identifying data on form, protect in sealed bottle canteen, spent shell, or best available container and bury with remains. If unidentified take fingerprints of both hands, if this not possible fill out tooth chart and note height, weight, color of eyes and hand tattoo marks, birth marks, etc., and other data as serial no, of weapon, laundry marks, where body found etc. Wrap body in shelter half, mattress cover, or blanket when available

2 BURIAL . Dig grave to a depth of five feet (hasty battlefield burials, to sufficient depth to prevent elements from exposing the body) Place only one body in a grave Dig graves side by side, row behind row

3. MARKING OF GRAVE . Fasten identification tag to temporary name peg and place at head of grave. For enemy dead, write data on peg. When pegs are not available copy data on a piece of paper, place in bottle, spent shell or other receptacle, seal tightly and place so as to mark and identify grave. If identification tag cannot be fastened to peg or placed in container do not leave at grave but forward with report of burial. If only one tag is found on body, it should be buried with body. The information thereon should be written on marker or placed in container at head of grave. Do not use weapons or helmets to mark graves.

4 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.

5. 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 burial. Government property is not to be included in personal effects but is to be turned in to Salvage Collecting Point

SKETCH AND MAP REFERENCE . N

TOOTH-CHART

8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
16	15	14	13	12	11	10	9	8	7	6	5	4	3	2	1

INDICATE missing natural teeth by X, crowns by O, fillings by □, bridges by ⊖ linkings anchor teeth, replacements by denture (horizontal line.)

□

⊖

X

Characteristics

Other Data

When unidentified, take thumb and fingerprints of both hands.

If this not possible, fill in tooth chart.

4

3

2

1

Thumb

Left

Thumb

Right

1

2

3

4