

CONFIDENTIAL

Q.M.C. FORM 1 - GRS

SOS NATOUA

July 1943

REPORT OF BURIAL

AR 30-1815 & TM 10-630

3 JAN 43
Date Report Filled Out

MORI, Kiyoto NMI 30100501
(Last Name) (First Name) (Middle Initial) (Serial No.)
PFC CO D 100TH INF
(Rank) (Organization) (Branch) (Country)
Hill #801 5 DEC 43 SHRAPNEL WOUNDS P
(Place of Death) (Date of Death) (Cause of Death) (Religion : P, C, H, etc.)

MEANS OF IDENTIFICATION

Identification Tags found on body : Yes (); No (X).

If no identification tags, other means used to identify body (identification card, letters, etc.) :

BY PAY RECORD CARD IN POCKET

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 :

WALLET
PAY RECORD
LETTERS

TO REGT GRO

PARTIALLY BURIED BY
TRENCH SOME DAYS PREVIOUS

KIYOSHI MORI (FATHER)
(Name of Emergency Addressee)

Box 158

HANA PEPE KAWAKI T-14
(Name of Emergency Addressee)

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

21 DEC 43

(Time and Date of Burial)

SW SCAPOLE

(Location, Name, & No. of Cemetery)

Hill #801

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

(Plot No.) (Row No.) (Grave No.) (King Grave Markers) (Type of Religious Ceremony)

Identification Tag buried with body (X); Identification tag attached to marker (X).

If identification Tags not present, what other identification data were buried with the body and in what kind of container ? IDENTIFICATION IN WAXED ENVELOPE ATTACHED TO MARKER

Bodies buried on either side (See paragraph 4 on reverse side this form.) OF BRANCHES; GRAVE BOUNDED BY STONES

Right side : NONE

(Name)

(Rank)

(ASN)

(Organization)

(Grave No.)

Left side : NONE

(Name)

(Rank)

(ASN)

(Organization)

(Grave No.)

(Signature of Officer Reporting Burial)

(Verified by unit G.R.S. Officer)

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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H.Q. - 160-q. - 7-43 - 200 M.

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 ½ tag on body, forward ½ 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 hair tattoo marks, birthmarks, 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 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 :

TOOTH-CHART

Map
Italy 1:50000
Sheet 117 Castel S. Vincenz

Coordinates : 03.20-31.91
(Compass sights 105° to Hill 1017
360° Hill 1184
(Peak of hill
NW of Castelnuovo)

Can approach spot on donkey trail to east of 801 coming uphill from Mass Acquarossa

| (Left) | | | | (Right) | | | |
|--------|----|----|----|---------|----|----|---|
| 8 | 7 | 6 | 5 | 4 | 3 | 2 | 1 |
| 16 | 15 | 14 | 13 | 12 | 11 | 10 | 9 |
| 8 | 7 | 6 | 5 | 4 | 3 | 2 | 1 |
| 16 | 15 | 14 | 13 | 12 | 11 | 10 | 9 |

INDICATE : missing natural teeth by X; crowns by O; fillings by □ ; bridges by — ; denture replacements by denture



Characteristics :

Other Data :

When unidentified, take thumb and fingerprints of both hands.

If this not possible, fill in tooth chart.

Left
Right

Thumb

Thumb

1

2

3

4