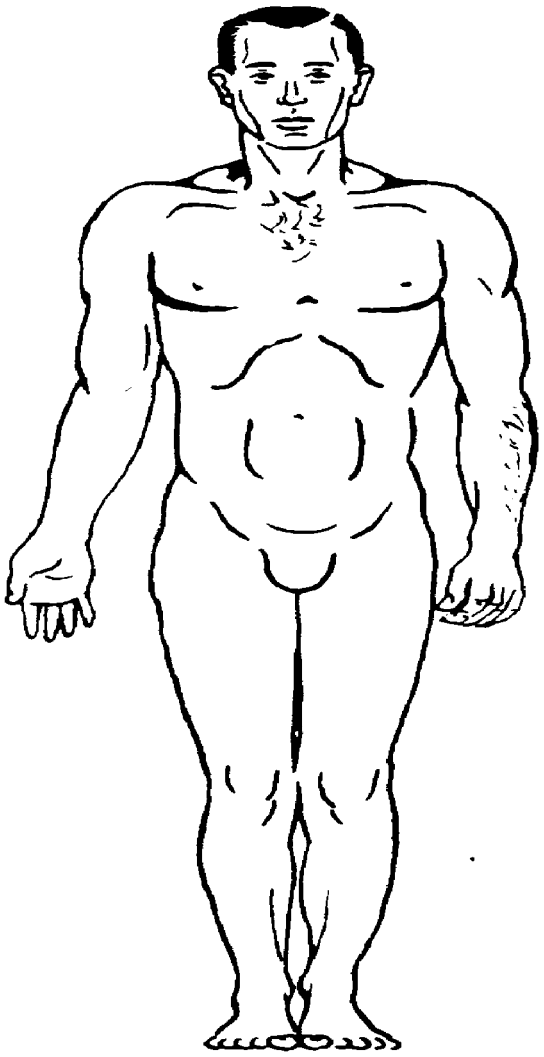
RECORD OF IDENTIFICATION PROCESSING
ANATOMICAL CHART

LAST NAME - FIRST NAME - MIDDLE INITIAL *(or unknown number)*		GRADE		SERVICE NUMBER	
NAME OF CEMETERY, EVACUATION NUMBER, OR SEARCH AND RECOVERY NO.	PLOT	ROW	GRAVE	ESTIMATED AGE *(Yrs)*	ESTIMATED HEIGHT

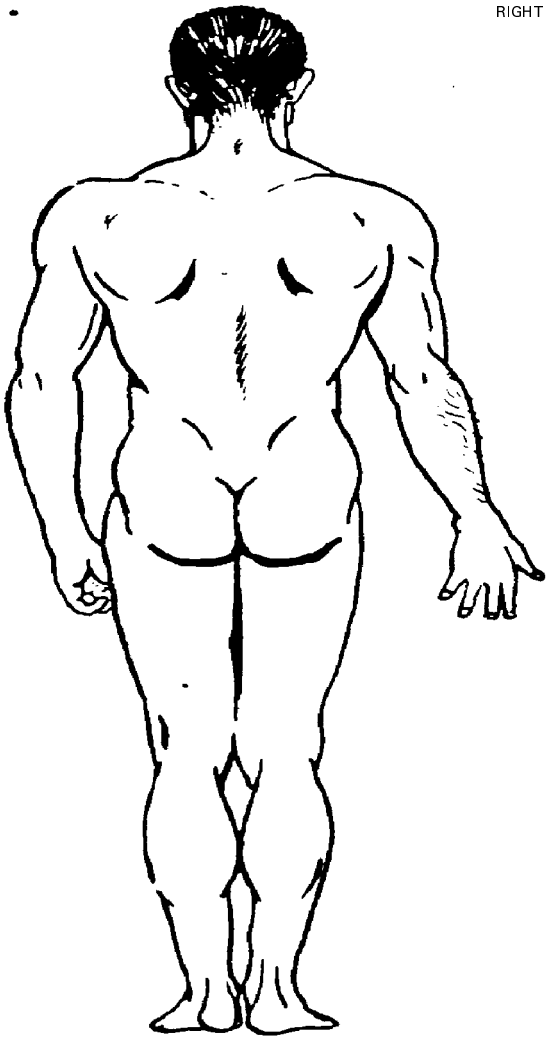
BLACK OUT PORTIONS NOT RECOVERED

RIGHT LEFT



ANTERIOR

LEFT RIGHT



POSTERIOR

CONDITION OF REMAINS *(Check pertinent blocks)*

☐ INTACT ☐ DECOMPOSED

☐ SEMI-SKELETAL ☐ FLESH COVERED ☐ BURNED *(Degree:* ☐ *1st* ☐ *2d* ☐ *3d)*

REMARKS *(Continue on reverse if additional space is required)*

NAME OF PREPARING OFFICIAL *(Print or type)*	SIGNATURE