



BOW BAPTIST CHURCH BURIAL GROUND
2-25 Payne Road
London
E3

London Borough of Tower Hamlets

A post-excavation assessment and
updated project design

April 2007

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A post-excavation assessment and
updated project design

Site Code: PAY05
National Grid Reference: 537698 183071

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Executive summary

This report is intended to inform the reader of the results of the excavations at the Bow Baptist Church burial ground, Payne Road site. The fieldwork included an evaluation during 2005, with the main excavation phase from July to August 2006 (site code PAY05). The excavations revealed the post-medieval cemetery north of the present Bow Baptist church. A total of 348 contexted burials were recorded and retained for analysis by the osteologist (351 actual burials). All were aligned east-west with the skull at the west end. Two brick vaults containing burials were also recorded. The majority of the burials on site were in wooden coffins, with two lead coffins from the general burial area and five from the northern vault. Forty-four burials were at least partially identifiable from their coffin plates

This assessment describes the findings made on the site, the post-excavation analysis achieved so far, the work which is still to be completed supported by the reasons it is required, and how and where the results of the excavation should be made public. It is proposed that the project will be published in conjunction with other post-medieval burial grounds in the area as part of the MoLAS Monograph Series books.

The report is written and structured to conform with the standards required of post-excavation analysis work as set out in *Management of Archaeological Projects* (English Heritage, 1991).

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1 Introduction

1.1 Site location

The site is located to the north of Bow Baptist church on the north side of Payne Road, Bow, London E3, NGR 537698 183071 ((Fig 1). The site area is bounded by Payne Road to the south and the Blackwall Tunnel Approach road to the east. The actual excavation area is bounded to the north and west by industrial buildings. The level of the current ground level in the area behind the Baptist church varies from 9.28-9.61m OD.

1.2 The scope of the project

The project covers work carried out within the burial ground of Bow Baptist church prior to development of a new housing scheme. This assessment includes the main phase of archaeological excavation (site code PAY05).

1.3 Circumstances and dates of fieldwork

The archaeological work on the site was covered by archaeological conditions to the planning consent (PA/04/00350) which were applied by Tower Hamlets Council under the terms of the Town and Country Planning Act, 1990; Planning Policy Guidance 16.

A desk-top *Archaeological Impact assessment* was previously prepared, which covers the whole area of the site (MoLAS, 2004) The *assessment* document should be referred to for information on the natural geology, archaeological and historical background of the site, and the initial interpretation of its archaeological potential

An archaeological evaluation was carried out in September and October 2005 while the main phase of archaeological excavation ran from 3 July to 30 August 2006. The main excavation was carried out with a Senior Archaeologist and up to sixteen archaeological field staff.

The main phase of excavation took place in an area which occupied 50% of the burial area which would be affected by the development. The other 50% of this area was exhumed in a non-archaeological manner by TCS Exhumation Services.

Organisation of the report

The *Post-excavation assessment and updated project design report* is defined in the relevant GLAAS guidance paper (Paper VI) as intended to 'sum up what is already known and what further work will be required to reach the goal of a well-argued presentation of the results of recording and analysis' (VI/1).

The principle underlying the concept of post-excavation assessment and updated project design were established by English Heritage in the *Management of Archaeological*

Projects 2 (MAP2), (1991). More recent GLAAS guidance has emphasised the need for this stage to be seen as 'brief and transitional', the document acting as a 'gateway' to further analysis and eventual publication (EH, GLAAS, 1999 VI/1).

Section 2 relates the topographical, historical and archaeological background to the site. The original research aims are set out in Section 3, based on knowledge prior to the excavation of the site. The interim results of the excavation are described briefly in Section 4. The full assessment of the retrieved data to date is reported in Section 5, including the interim specialist results of which the osteological assessment is particularly pertinent.

Section 6 goes on to discuss the success of the excavation and interim specialist analysis in terms of the original research aims and follows with an overview of the potential of the retrieved data. Section 7 presents the significance of the site in terms of local, regional, national and international criteria. In the light of the results obtained so far the revised research aims are detailed in Section 8 along with a synopsis of the proposed publication.

The final sections show the method by which the publication of the monograph will be achieved including Section 9, listing the tasks which are necessary for each part of the project and Section 10, the resourcing and programming.

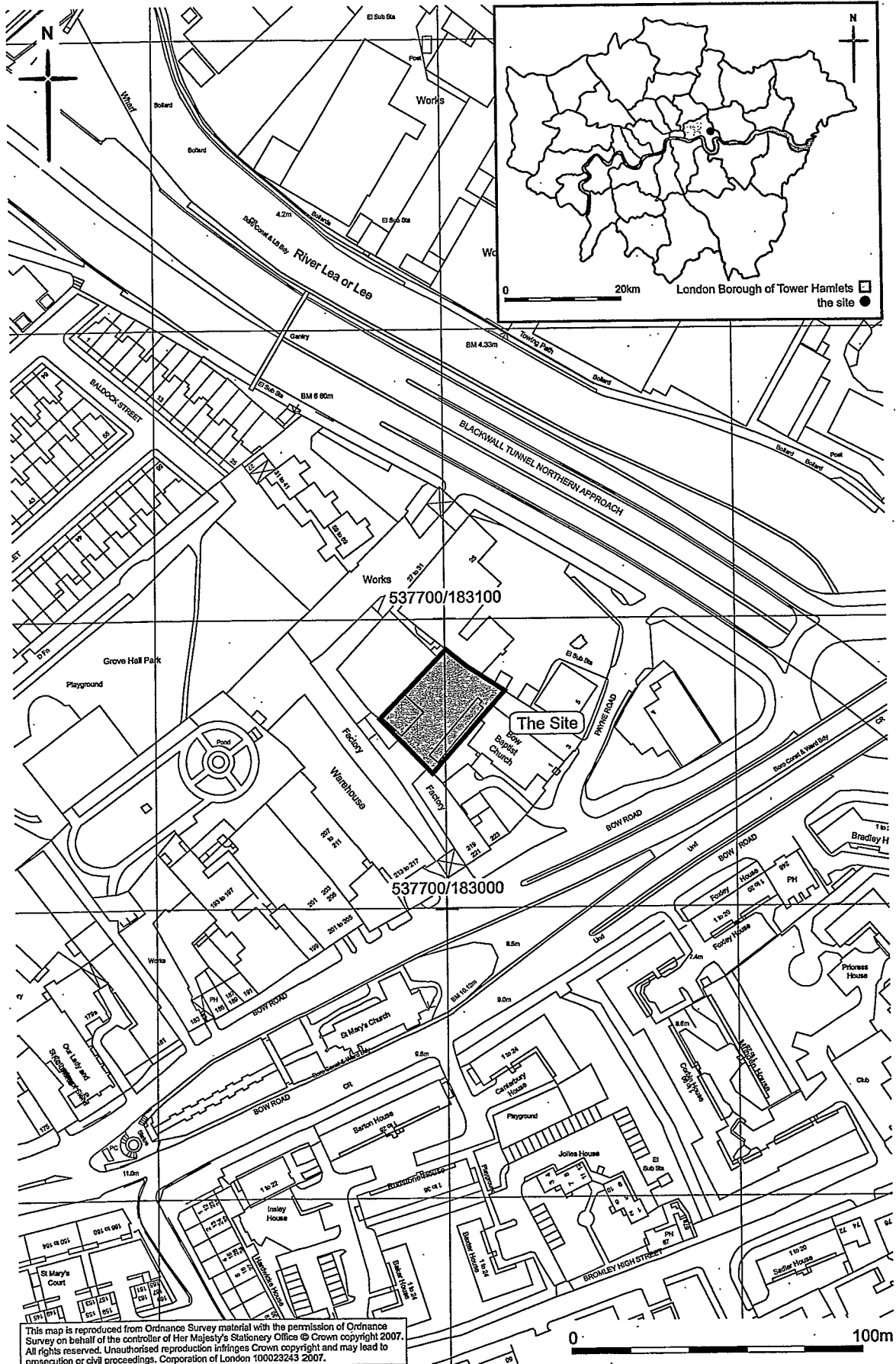


Fig 1 Site location

2 Historical and archaeological background

2.1 Topography

The highest natural type on the site is gravel which overlies alluvial clay. Natural gravel was observed to the west of the site at 8.20m OD. The site is located on Taplow river terrace gravel on the western side of the River Lea. Before it was canalised the river followed a meandering course and was bordered by marsh and reed beds. The site is situated on a slope with ground level rising from 6.3m OD on the pavement to the east of the site to 9.6m OD in the burial ground area to the rear of the Baptist church.

2.2 Prehistoric

Artefacts of flint and stone hand tools and occasionally faunal remains usually represent evidence of the earliest prehistoric periods. Despite the recovery of an important assemblage of Palaeolithic material from Stoke Newington to the north, finds of this period in Tower Hamlets are very rare. An isolated find of an axehead was recovered from Victoria Park to the northwest of the development site.

Evidence of later, post-Glacial, prehistoric activity is much more widespread in London generally, although once again there is little evidence from Tower Hamlets. Finds of Mesolithic date from Tower Hamlets are rare, the nearest isolated find being a tranchet axe from the Lea Valley, 1.4 km to the north. Rising sea levels resulting from glacial melt led to rising river levels and the creation of marshy conditions in the Thames valley and the valleys of its tributaries. From the Neolithic period onward the River Lea, as well as providing a good supply of natural resources such as wild fowl and reeds, was also becoming an important trade and communication route.

The Neolithic period is characterised by the introduction of agriculture, and settlement seems to be concentrated on light, easily worked, soils. Recent excavations at Lefevre Walk Estate to the north of the site, revealed a sequence of field boundaries and pits the earliest of which could be dated to the Neolithic and which included Peterborough Ware pottery of possible ritual significance. A Neolithic axe and dagger have been found 280m to the southeast of the site close to the A102.

Bronze Age pottery and Iron Age coins have been found in the vicinity of Victoria Park and a Bronze Age hoard of metalwork was discovered at the ambulance station in Bromley. Approximately 135m to the east of the site a Bronze Age spearhead was discovered.

2.3 Roman

The arrival of the Romans in AD43 brought a distinct change in the settlement pattern of the London area. Within about a decade, the Romans had established a thriving town, *Londinium*, approximately 4km to the east of the site on the north bank of the Thames

where the City of London now stands. A network of roads radiating out from the centre in several directions connected *Londinium* with other towns and major settlements in England.

One of the major arterial roads constructed in the 1st century AD ran east, from the City to *Camulodunum* (Colchester), and is located approximately 700m north of the site. An extensive cemetery with a number of high status burials in lead coffins and sarcophagi lay on either side of the road near Old Ford. Ditches found at sites to the north and south of the road probably indicate Roman field systems, although some may have been used to define burial plots within the cemetery. A settlement may also have developed at the crossing point of the River Lea at Old Ford, although evidence for Roman buildings in this area is extremely limited.

There is no evidence for Roman burial or occupation in the area immediately surrounding the site and occupation in this part of London may have been confined to the higher ground along the roads. The nearest Roman finds are of two Roman coins; one was located 420m to the southeast of the site, while the other was found in Fairfield Road 380m to the northwest of the site.

2.4 Saxon

There is little evidence for the area immediately around Bow during the Saxon period. At this time much of Tower Hamlets would have been waterlogged and marshy. Occupation of higher ground beyond the fringes of the Lea River is suggested by the location of the village of *Bramblege* to the south of the site, within the vicinity of Bromley. Although there are few records of the settlement of *Bramblege* it is known that St Leonard's Priory was founded in the 11th century on what is now Bromley High Street.

Although the area was unsuitable for habitation it may have been used for hunting, fishing and reed cutting. The River Lea was also a vital power source for the water driven fulling mills and corn mills that grew up along the riverbanks. Mills were recorded in the area in the Domesday Book, including at least one that had pre-Conquest origins, and which was situated to the north of the site close to the Blackwall Tunnel Northern Approach.

2.5 Medieval

The site lies within the medieval hamlet of Bow. At the time of the Domesday Survey (AD1086) Bow would have lain within the lands of the Manor of Stepney, in *Ossulstone* Hundred. The Bishop of London held this manor until the 16th century. At this time the manor was largely rural with marshland by the River Thames to the south and a forested area in Haringey to the north. At the beginning of the 12th century the manor of Stepney probably contained a population of around 900 people. By 1377 the population may have risen to around 2,500 people and would have been double that by the mid 16th century (Wilson, 2002).

A new bridge across the River Lea was constructed downstream from the crossing point at Old Ford, which lies to the east of the site. Historically, construction of the bridge

occurred at the insistence of Queen Matilda in AD 1110 in reaction to accounts of seasonal floods claiming victims who had attempted to cross the ford upriver. The name of Bow can be traced back to this time, as a reference to the single arch of the bridge, formerly known as *Stratford atte Bowe*.

It seems likely that on higher ground west of the bridge a small hamlet and manor house had become established by the 14th century. The church of St. Mary's, Bow was built as a chapel of ease to Stepney parish church, in 1311. It is likely given the proximity of the River Lea that much of the area in the vicinity of the site was pasture during the medieval period, but that corn and fulling mills continued to operate along the banks of the Lea. It is known that a 12th-century mill, a bake-house and a slaughterhouse existed approximately 280m to the southeast of the site.

2.6 Post-medieval

During the Tudor period the population of London quadrupled in size, but the medieval layout of the City did not change significantly. Whilst the City remained the commercial centre and Westminster the political centre of London, areas between them and beyond the City walls developed as suburbs. The wealthy moved into the area of the Strand and the Inns of Court, whilst the poor began occupying suburbs around Clerkenwell, Shoreditch, Aldgate and Southwark. The Manor of Stepney remained in the Bishop of London's hands until Bishop Nicholas Ridley surrendered it to the King in 1550. The Manor consequently passed on to the ownership of the Wentworth family, along with the marshes and Manor of Poplar.

The earliest maps of Bow, which date from the 18th century, show the settlement as a large village on either side of the bridge and around Bow Church. Rocque's map of 1746 shows buildings with gardens to the rear occupying the southern and eastern sides of the site while the northern side of the site is located within an open field. The first detailed map of the site is Horwood's map of 1799. It is not exactly clear from Horwood whether the chapel is the large building in the south east site area. The buildings are not labelled but from their size and shape they appear to be a mix of residential, commercial and industrial buildings. Milne's Land Use Map of London c 1800 indicates that fields immediately to the north of the site were used as paddocks and meadows.

Greenwood's map of 1826 shows that Payne Road had developed as a curved road (it had previously been a right-angled back road behind Bow Road. The nearby workhouse became redundant when in 1848, as a result of the City of London Poor Law Union formally coming into being in 1837; a new workhouse was built on the south side of Bow Road to accommodate 1,200 inmates (Tanner, 1995).

At the start of the 19th century the population of Bow was still small, about 2000 inhabitants, but the second half of the century saw rapid industrial development. Many factories started up in this period producing such things as soap rubber, hemp cloth and matches. The population of Bow more than doubled between 1861 and 1871. By 1862 dense housing, large-scale industrialisation and a network of railways had developed and the site was now occupied by a school, with a felt works and Baptist Chapel to the west. The 1893 Ordnance Survey map shows the site occupied by long industrial buildings to the rear of terraced houses.

Mrs Basil Holmes's book, *The London Burial Grounds*, published in 1896, describes the Baptist Chapel-ground, Bow as covering $\frac{1}{3}$ acre and that 'part of this ground is railed off as a private garden, the rest is used as a thoroughfare by the school-children. There are several tombstones, some of which have been put against the walls'.

The Official Guide to the Metropolitan Borough of Poplar, published in 1927, notes that 'Bow Baptist Chapel...stands near Bow Bridge, and has a convenient Church Hall adjoining'. The church's website states that 'Bow Baptist Church has been here since 1785'.

The church was bombed during raids on the east end of London on 7 October 1940. By the middle of March the local Scout Troop (36th Poplar (Bow Baptist Church) Troop) had rebuilt their meeting-room with boards dug out of the debris of the church, but on the 19 March 1941 another raid completed the destruction of the church property, including the hall in which the services were held. The Scouts offered their newly completed room, but hardly had the offer been accepted, when this, too, was blown to pieces in the great raid of the 10 May. They rebuilt the hut which by October was ready to house the Baptist worshippers. It stood for the rest of the war and still stood in 1948 (Saunders 1948).

The 1968 Ordnance Survey map of the site shows that 19th-century houses had been demolished and the site was occupied by a variety of industrial premises, including a paper works.

2.6.1 Burial registers

A burial register for 'Old Ford Chapel, being used by the congregation of the particular Baptist, founded about the year 1800' revealed that burials on the site were carried out from at least 1810 to 1837. Interestingly the first entry in the register dates to 13th April 1816, and relates that Penelope Huntley of unknown age, from Mile End in the parish of Stepney, was buried on this date but had been moved from 'the other burial ground to this' and was originally buried on April 27th 1814. It remains unclear where the original burial ground lay or why the deceased was moved.

Entries then continue from April 25th 1816. Following the entry dated to November 27th 1822, there are ten burials which appear to be backdated. It is clear from the writing in the register that the person responsible for completing the entries changed about this time. The earliest date for the backdated burials is February 28th 1810, and records the burial of Elizabeth Tippin aged 66, of Bromley. The location of the burial is given as 'nearest the shed'. The other 9 backlogged entries are not given locations. The progressive numbers accounting for the burials, which to this point had reached 150, are followed by further numbers in parentheses, eg [1] numbered 1-10 for these backlogged entries. They date from 1810 to March 25th 1822, after which point the sequence continues as before. It is not explained within the register why these burials failed to be entered at the correct time and it may be the new person responsible for the completion of the register noticed the error that had previously been missed or that these were earlier burials that had been moved.

The last entry in the register, number 792, is dated to July 1st 1837 and records the burial of Eliza Bennett, who was 17 months old and lived in Stratford in the parish of West Ham.

The volume has an alphabetical index at the start and each entry has a number, name, parents name (children only), residence (general eg Bow), parish, county, when died, when buried and locations given as distances from the 'north wall (eastward and southward)'. The date of death changes to the minister performing the service in March 1825.

The original of the register is deposited in the Public Record Office, Kew, under the reference RG4/4163. The registers were taken into the custody of the Registrar-General under the Non-Parochial Registers Act of 1840. They had previously been inspected and authenticated by a Royal Commission appointed 'to enquire into the state, custody and authenticity of registers kept in churches and chapels other than those of the Established Church'. The form with the register, dated 29 June 1837 is signed by Thomas Parnell, registrar and superintendent of burials.

The location of any later burial registers is unknown, but a note held by Tower Hamlets Local History Library and Archives relates that 12 volumes of minutes of meetings for Bow Baptist church were destroyed during bombings in 1940. It is likely that further records relating to burials were also lost at this time.

2.7 Baptists

The term Dissenter covers a number of Protestant denominations, including Presbyterians, Baptists, Quakers and Congregationalists, who refused to take the Anglican Communion or to conform to the tenets of the restored Church of England in 1662, and were then subjected to persecution by Parliament under various acts passed between 1661 and 1665. The Act of Uniformity required all churches in England to use the Book of Common Prayer, with penalties for those who would not comply. In 1689, the Toleration Act was passed, which permitted Dissenters to hold services in licensed meeting houses and to maintain their own preachers free from the fear of prosecution and persecution.

The first Baptist congregation was founded in Amsterdam in 1608 by John Smyth who along with Thomas Helwys, sought to set up the group according to New Testament patterns.

2.8 Other Baptist burial grounds

Mrs Basil Holmes, when carrying out her survey of the London burial grounds in 1896, noted that the grounds associated with Baptist chapels had suffered terribly and that a large number had entirely disappeared (Holmes 1896, 144). The Payne Road site is the only Baptist burial ground within the immediate vicinity, but mentions a few others within East London.

Zoar Chapel in Great Alie Street was a Baptist chapel frequented by preachers such as JC Philpot and John Bailey. It was earlier known as the Dutch Church. Holmes notes that in 1896 the burial ground was 'now warehouses, shops, and a forge' (Holmes, 327).

The Baptist Chapel-ground in Mare Street. The site has gone, along with some of the surrounding streets, the chapel was on the site of 153 Mare St. It and the burial-ground are under a coachworks. About 500 square yards at the back of the chapel. There are several tombstones tumbling about, and the ground is very untidy. (Holmes, 293)

Baptist Burial-ground, Broad Street, (Reardon Street) Wapping. Established as an independent chapel on 12 Sep 1633. Broad Street is now Reardon Street. Not built over on 1872 OS. A school was built on the site, but this has now closed and the building used for other purposes. The small yard to the south might be the site of the burial ground, or it could be under the school buildings.

'Mentioned by Maitland in 1756, and shown on Rocque's plan. The chapel has gone, but part of the adjoining yard belonging to a milkman. Before he bought it was the parish stone-yard. It is about 200 square yards in size. I have little doubt that is a burial ground.' (Holmes, 299)

3 Original research aims

All research is undertaken within the priorities established in the Museum of London's *A research framework for London Archaeology*, 2002. The following relevant research questions were drawn up as part of the method statement for the site and are divided into archaeological and osteological sections.

3.1 Archaeological research questions

3.1.1 *Natural topography and the prehistoric environment*

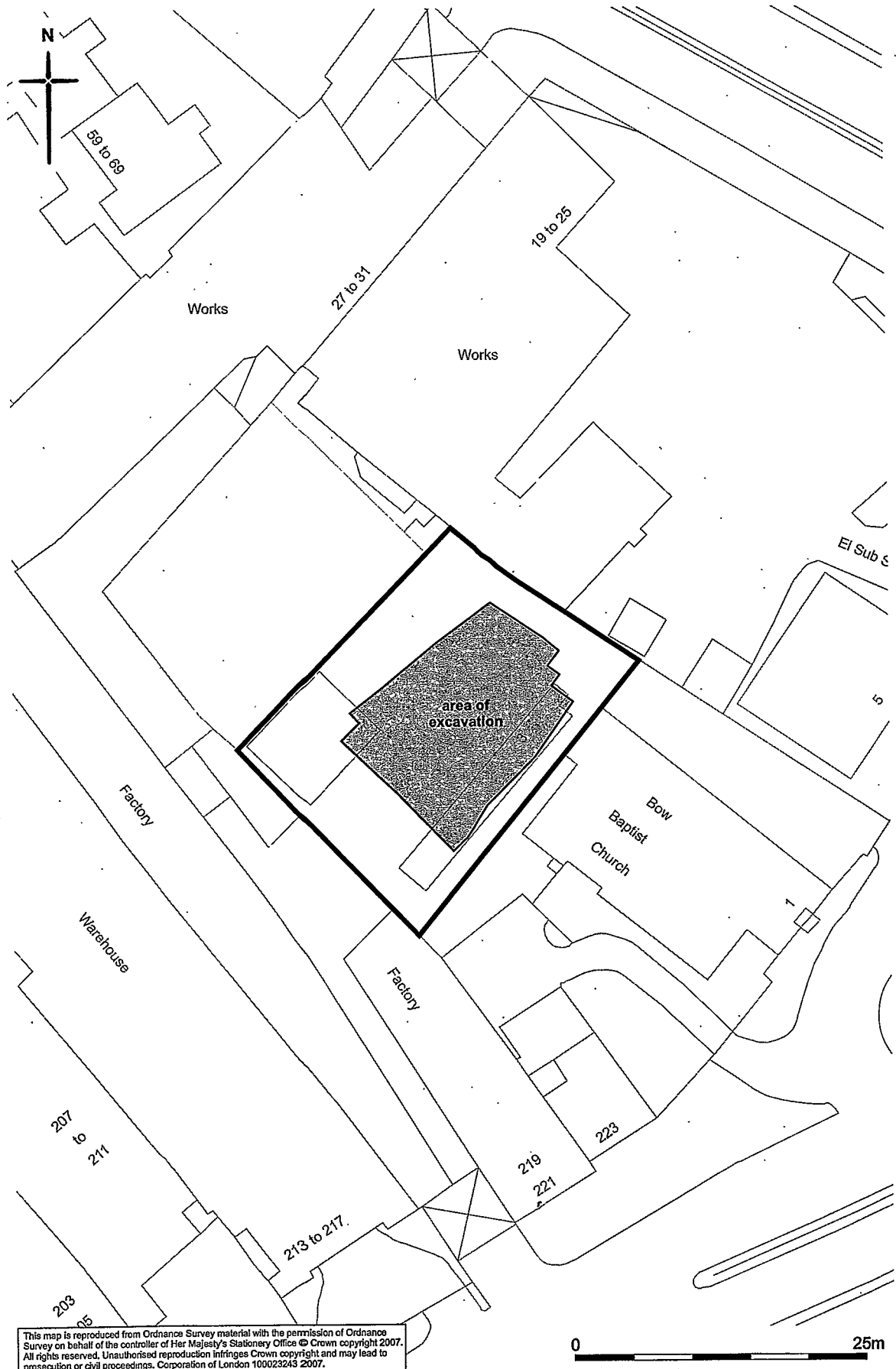
1. *Does the untruncated surface of natural gravels and/or brickearth subsoil survive?*
2. *Can information about the nature of natural deposits be used to determine site formation processes and reconstruct the post-glacial topography of the area? Is there any evidence for a prehistoric presence? If so, what is its context and the likely date range?*

3.1.2 *Medieval*

3. *What evidence, if any, exists for the function of the site in the medieval period?*

3.1.3 *Post-medieval*

4. *What evidence exists for the post-medieval development of the area?*
5. *In particular what evidence exists for the establishment and use of the burial ground known to have been located on the site.*



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Fig 2 Trench location plan

4 Site sequence: interim statement on field work

This section comprises a brief summary of the archaeological sequence from the site. From an archaeological point of view the sequence is a single period and relatively straightforward in terms of stratigraphic relationships, interpretation and land use.

4.1 Natural and topography

Natural deposits recorded on the site consisted of yellow/orange sand and gravel at approximately 8.2m OD. The area excavated measured roughly 22m by 17m.

4.2 Post-medieval

The excavated area (Fig 2) consisted of the post-medieval burial ground to the north and north-west of the present church, which was occupied by graveyard burials. A total of 348 contexted burials were recorded and retained for analysis by the osteologist (351 actual burials). All were aligned east-west with the skull at the west end. Two brick vaults containing burials were also recorded (Fig 4). The majority of the burials on site were in wooden coffins, with two lead coffins from the general burial area and five from the northern vault. The lowest burials were cut deeply into the natural deposits at c 6.2m OD, the shallowest at c 8.15m OD.

The burials were laid out in rows running north-south, with a total of 127 grave cuts. Very little intercutting of burials was found, although evidence was found of burials having been disturbed by later interments in the same grave. From the coffin plates which were recordable it seems that at least some the graves represent family plots. A total of 44 burials excavated provided at least some information from the coffin plate inscriptions recorded, with a further 10 plates recorded from the exhumation area (Fig 3).

No other archaeological deposits were encountered during the excavation.

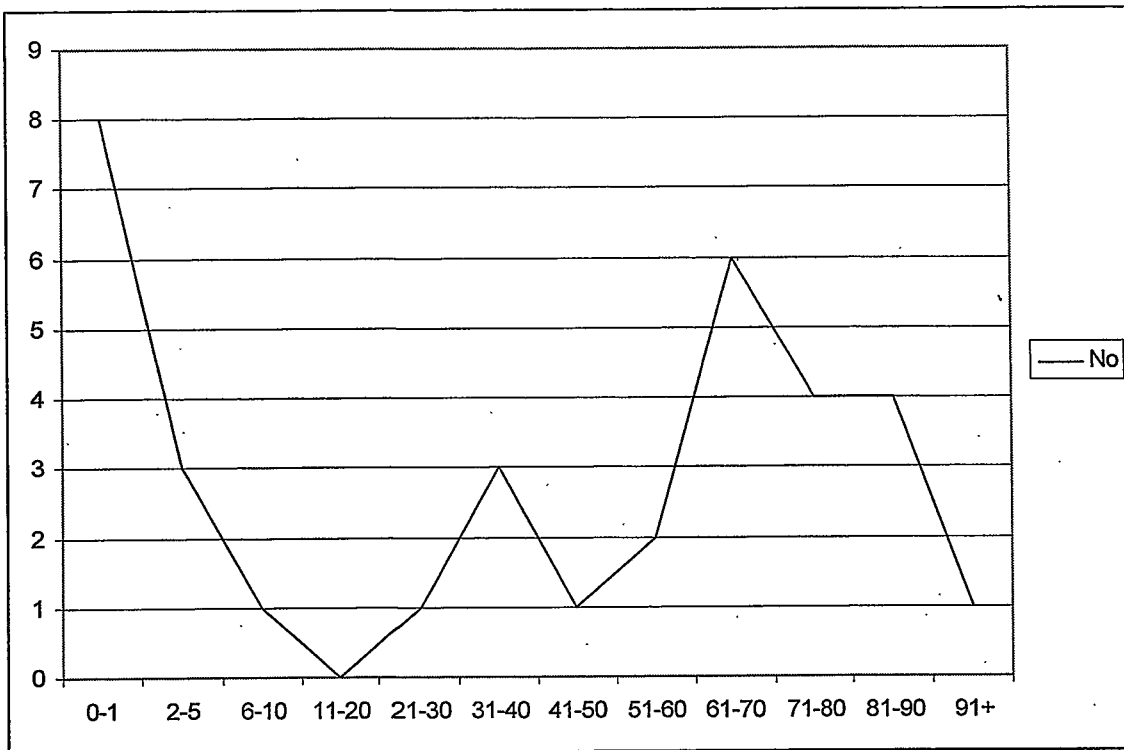


Fig 3 Age at death from coffin plate information

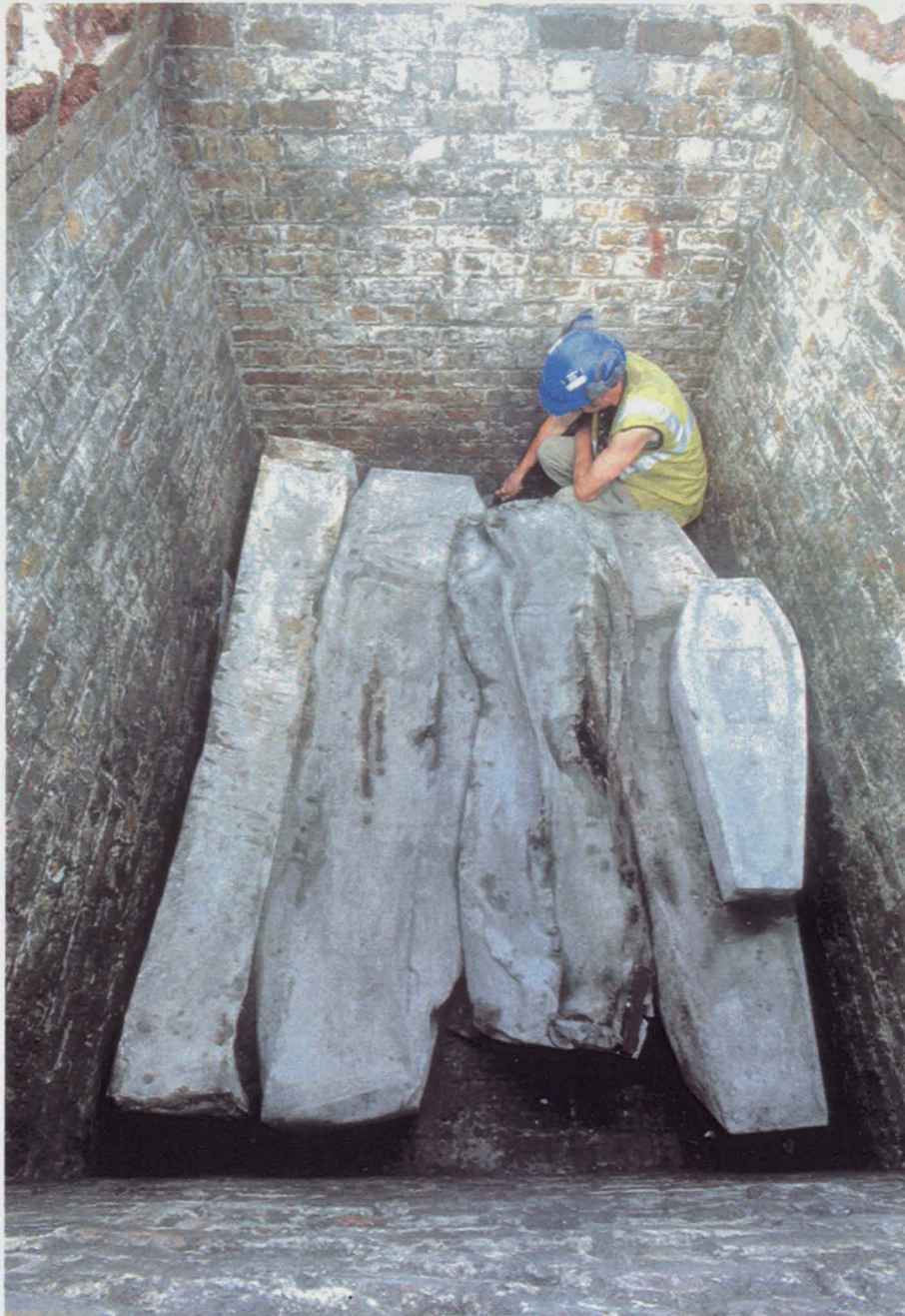


Fig 4 The northern vault under excavation

5 Quantification and assessment

5.1 Post-excavation review

The following elements of the post-excavation process for PAY05 have been completed:

- site records have been ordered and checked.
- site context matrix has been compiled, checked and established digitally on ArchEd 1.4.1 program.
- all photographs are digitally ordered and stored.
- osteological assessment has been completed (see below).
- site plans have been digitised

Further work required for the next stage of analysis:

- Complete the inputting of the site data onto the Oracle database
- Establish the group structure
- Establish the land use sequence

5.2 The site archive and assessment: stratigraphic

Type	Description	Quantity	Notes
Contexts	Single sheets for each context	888	
Plans	1:20 on gridded plan sheets	560	
Sections	1:20 on gridded sheets	2	
Matrices	Context matrix	1	Digital copy of context matrix
Photographs	Photographic Dept shots and Supervisor shots	Colour	Supervisor shots: 21 digital Photographic dept: 121

Table 1 Archaeological archive general summary

5.3 Site archive and assessment: finds and environmental

Human bone	353 contexts
Registered finds	171 objects: 2 bone, 1 ceramic, 22 composite metal, 44 copper alloy, 2 glass, 80 iron, 14 lead, 4 shell and 2 tortoiseshell

Table 2 Finds and environmental archive general summary

5.3.1 The human bone

Natasha Powers

5.3.1.1 Introduction

In advance of construction of a housing development, archaeological investigation of the burial ground of Bow Baptist church was undertaken by MoLAS. The Old Ford Chapel appears to have been founded at the start of the nineteenth century. Records suggest the burial ground covered just less than 3,000 square yards and that burials were carried out on the site from at least 1810.

Large scale excavation took place during 2006 with 50% of the area which would be affected by the building works excavated archaeologically and 50% cleared by TCS Exhumation Services Ltd. Most burials were contained within wooden coffins, with a small number of lead coffins and two brick vaults identified. All individuals were buried on an east-west alignment with the head to the west. The graveyard was neat and ordered with 127 grave cuts arranged in parallel rows. The burials archaeologically recovered dated from between 1800 and 1854, with occasional burials in existing plots up to 1870.

During the period of the cemetery's use, industrialisation brought significant population expansion to the Bow area. At the same time, the nineteenth century was a period of rapid growth for the Baptist church and in 1813 the General Union of Baptists was formed (www.bbc.co.uk/religion).

Archaeological excavation identified 348 articulated burials and several contexts of disarticulated bone from within grave fills. As there was almost no inter-cutting of graves, it appears that the disarticulated material represents early internments disturbed by later burials placed within the same cut. Together with epigraphic evidence, it is suggested that some of the stacked graves represent family plots. The osteological dataset for this report was 351 individuals (see 5.3.1.4).

The results presented here should be considered preliminary indicators of the nature of the assemblage and are subject to adjustment during detailed analysis.

5.3.1.2 Methods

The human bone was examined in accordance with MoLAS standard procedures (Powers *unpublished*). Results were recorded directly into an Excel spreadsheet. Preservation was estimated on a three-point scale from good (1) to poor (3). Completeness was assessed in 5% increments from (5-95%) based on the proportions of the skeleton as follows: skull 20%, legs and feet 20%, arms and hands 20%, torso and pelvis 40%. A summary catalogue supported this: the skull scored as '1' if present and '2' if present and intact (measurable), dentition, torso and pelvis as present or absent (1 or 0), and legs, feet, arms and hands by number present (0, 1 or 2). Non-adult age was estimated from the eruption of the permanent molars and by element size for foetal/neonatal individuals. If the dentition was absent, individuals were simply recorded as 'sub-adult', unless the size of the remains indicated they were those of a neonate. Adult sex was estimated from rapid visual assessment of the morphology of the pelvis and skull (Buikstra and Ubelaker 1994) and recorded on a five-point scale (Table 3). No attempt was made to age adult

individuals, though some observations of very young adults were noted. Gross pathological changes were recorded by disease category, coded according to Connell and Rauxloh (2003), with supporting summary descriptions. Only pathology that could be definitely associated with the primary individual was recorded. The minimum number of individuals (MNI) within each context was estimated from the maximum number of repeated elements taking age, sex and morphology into account. No attempt was made to separate intrusive remains at this stage, though possible associations were noted.

Code	Age
0	Foetal/neonatal
1	1 month to 6 years (to M1 erupted)
2	7-12 years (to M2 erupted)
3	13-18 years (to M3 erupting)
7	Adult (fusion complete*, M3 erupted)
12	Sub-adult (age unknown)
	Sex
1	Male
2	Male?
3	Intermediate
4	Female?
5	Female
9	Undetermined
0	Sub-adult

Table 3 Demographic assessment codes

*excluding medial clavicle, sacrum, ilial or ischial crests

5.3.1.3 Preservation and completeness

The level of preservation of the remains was similar to that seen at other recent excavations of post-medieval cemeteries in London: 108 contexts (31%) scored as 'good', 212 (60%) as 'moderate' and 31 (9%) as 'poor'. Unlike previous investigations though, the remains of infants with rickets did not appear to have degenerated significantly faster than those without: only 4/14 (29%) of those affected scored as poorly preserved. Isolated areas of erosion resulting from close contact with coffin fittings were present in a number of crania.

Copper staining was noted in 43 contexts (12%). Interestingly this is an almost identical proportion to those individuals with green staining noted at the recently excavated St. Mary and St. Michaels site (LUK01). Of the 43 affected individuals, 31 (72%) had staining on the cranium or mandible. Eight burials had iron coffin nails or studs adhering to the skeleton.

The remains of five adults and three sub-adults contained human hair adhering to the cranial vault, most consisted of a few short pieces, in all but two cases, associated with copper staining (Janaway 1987). A large patch of pale blond or grey hair up to 100mm long was found on the skull of female [683]. Hair associated with sub-adult(s) [452]/[453] was attached to a copper alloy pin. Black, bituminous material, possibly the degradation

products of soft tissue was seen adhering to the rear of the right femur of young female [228].

In all, 79% of the assemblage (279) was 50% complete or more, 66% (230) were 75% complete or more and more than half the assemblage (181) were 90% complete or more (Fig 5). Results again have parallels to those seen at St. Mary and St. Michaels, and are presumably related to the similar methods of cemetery management and absence of inter-cutting graves.

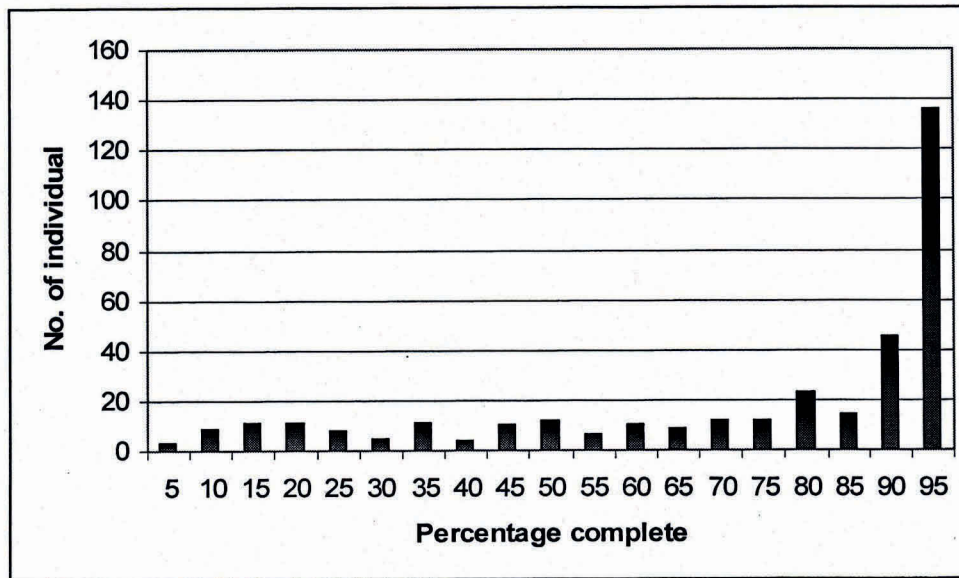


Fig 5 Completeness

5.3.1.4 Minimum number of individuals

In total 356 separate excel entries for burials were made at assessment. This included two duplicate numbers (four entries) where individuals had the same number but were demographically incompatible. These individuals will require the assignment of new context numbers prior to analysis. Five excel entries (for a total of nine contexts) were made for duplicated numbers where remains had almost certainly become disassociated from the rest of the individual. At this stage definite association was not possible; however, duplicate entries where the remains appear compatible with a single individual have been included only once in the calculation of results. Sub-adults [452] and [453] were commingled and have been counted as a single data entry at this stage. The removal of the five duplicates results in an osteological dataset of 351 individuals. In addition, a group of disarticulated individuals from [655] were recorded.

A single individual was seen in 78% of the contexts (273), 17% (60 including three of the duplicated numbers) contained parts of two individuals, predominantly a single intrusive element assumed to be from an adjacent burial, and 5% (18) contained a minimum of three individuals. Seven contexts had information provided by the excavator as to the probable origin of the intrusive bone. Nine contexts contained the remains of two largely complete, mixed infants and a further two contained three mixed infants.

Three contexts containing bone which was noted by the excavator to be disarticulated were identified: [441] contained bone from [423], [681] elements from [429] and [769] contained a collection of mixed adult and sub-adult elements (the adult remains were treated as the primary individual).

Context [655] was a deposit of bone containing a minimum of four adults (including articulated portions of two adults) and two sub-adults.

Intrusive animal bone was present in 21 contexts, whilst [557] was found to contain animal bone only.

Although the levels of mixing were relatively low for a site of this date, it is anticipated that the total number of individuals present will vary when analysis is carried out and mixed individuals can be separated. Additional numbers will be generated for the three genuinely duplicated context numbers, and for a number of infants whose remains had become scattered within other burials as the result of the stacking of individuals within the grave.

5.3.1.5 Results

5.3.1.5.1 DISARTICULATED REMAINS

Context [655] contained the remains of at least one adult male, one probable female and a child under 6 years old at death (Table 4).

Elements present	Age	Sex	Pathology	MNI	Comments
Complete cranium	7	1	dental 1,2,3,5	1	None
Complete cranium	1	0	conjoined left maxillary incisors	1	None
Fragmentary cranium	12	0	None	1	None
Fragmentary cranium	7	4	edentulous mandible	1	None
R+L humerus	7	9	None	1	Paired
L humerus	7	9	None	1	None
2x R+L femora	7	9	None	2	Paired
R+L innominate	7	2	None	1	Articulate with femora
3xR tibiae	7	9	None	3	Two possible pairs with L
4xL tibiae	7	9	None	4	Two possible pairs with R
L fibula	7	9	None	1	None
R femur	12	0	None	1	None
R scapula	7	9	None	1	None
L clavicle	7	9	None	1	None
Total MNI				6	

Table 4 Catalogue of remains [655]

5.3.1.5.2 DEMOGRAPHY

There was an almost even distribution of adults and sub-adults in the assemblage with 182 adults (52%) and 169 sub-adults (48%) recorded (Fig 6). Of the 166 adults for whom sex could be estimated, there were a slightly larger proportion of females (52%) than males (48%) present (Table 5), in contrast to the expected 'normal' ratio of 1.46:1 (Mays

and Faerman 2001) and results from recent excavations in the capital (Powers 2005 a, b, Miles and Powers 2006). Sixty percent of the sub-adults had died aged less than 7 years, the largest proportion dying between the ages of one month and 6 years (Table 6).

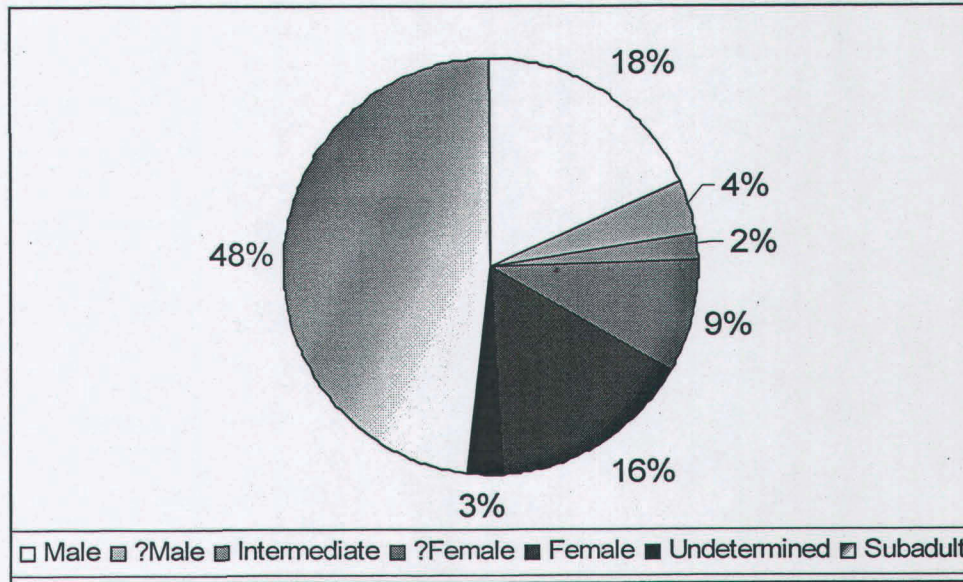


Fig 6 Demographic distribution

Sex	n	%
Male	64	18
Male?	15	4
Intermediate	7	2
Female?	31	9
Female	56	16
Undetermined	9	3
Total	182	100

Table 5 Adult sex

Age	n	%
Perinatal	24	14
1 month -6 years	78	46
7-12 years	19	11
13-16 years	11	7
Sub-adult	37	22
Total	169	100

Table 6 Sub-adult age at death

5.3.1.5.3 NAMED BURIALS

Partially legible coffin plates were recorded from 44 contexts associated with archaeologically excavated human remains. These include information on date and age at death, name and title. To allow blind testing at analysis, the osteologist has not examined the association of the epigraphic data with particular individuals at this stage. However the potential of this dataset and the larger group of named individuals facilitated by further documentary research is further discussed (6.1.4).

5.3.1.5.4 PALAEOPATHOLOGY

The crude prevalence rates presented here should be seen merely as an indicator of the potential of the assemblage at full analysis. Mixing of individuals generally involved elements of the torso and rates of pathology observed may have been adversely affected as a result. Full details by context can be seen in the appendix (section 15).

Dental health and dentistry

Sixty-two percent of those individuals in whom the dentition was observable had evidence of dental disease (180/292). In the adult population, 145 individuals (66 males, 73 females) had lost teeth during life (80%; 145/182). Tooth loss was noted in a single sub-adult [101] aged 7-12 years at death. Nineteen adults (7 male, 10 female) were largely edentulous. Dental pathology rates are outlined below and are of the range expected in a population of this date (Table 7). A peg incisor was noted in adult male [313]. An upper(?) partial denture constructed from shaped human teeth set into copper alloy (possibly rose gold) via a series of screw posts was recovered from the mouth of adult male [123]. There were four spaces for remaining teeth. In two of these the metal was extended to form a clip around the teeth and hold the denture in place. There was extreme wear on the buccal surface though this may have been precipitated by the shaping of the teeth in the initial construction. The sole example may be related to the economic status of the group but it is interesting that no evidence of treatment was seen in the Baptist burials at West Butts, Poole (McKinley in prep: 62).

	Adult		Male		Female		Sub-adult		Total	
	N	%	N	%	N	%	N	%	N	%
Observable dentitions	163		74		80		129		292	
Caries	92	56.4	37	50	50	62.5	15	12	107	36.6
Calculus	87	53.4	42	56.8	42	52.5	6	4.7	93	31.8
Enamel hypoplasia	22	13.5	9	12.2	12	15	1	0.8	23	7.88
Periapical abscesses	29	17.8	16	21.6	12	15	1	0.8	29	9.93
Periodontal disease	67	41.1	31	41.9	34	42.5	0	0	67	22.9

Table 7 Dental disease (CPR)

Congenital abnormalities

Twelve adults, six male and six female, had evidence of congenital morphological abnormalities, equating to 3% of the assemblage (excluding *hallux valgus*, see below). The parietals of male [861] were flattened in a c.100 mm circle over and around the parietal foramina. This may also have had a congenital aetiology.

Tarsal coalition was noted in the left talus and calcaneus of adult female [449] and the right of female [661]. Spondylolysis was noted in adult male [188], two males and a female had sacralised fifth lumbar vertebrae and *spina bifida occulta* was present in female [489]. Conjoined ribs were present in male [858].

Two males [473] and [680] had developmental abnormalities of the right hip resulting in subluxation of the joint. In the case of [680] this had led to the development of osteoarthritis.

Female [179] had three ankylosed thoracic vertebrae with slight scoliosis. This appeared like to be a congenital malformation, however as the ribs of this female had deformities typical of deformation following corset use; this should be considered as a secondary diagnosis.

Neoplastic disease

The left second metatarsal of adult male [596] had a large, hollow bone cyst *circa* 40 x 30 mm located on the dorsal surface. A pseudo facet had formed between this element and the first metatarsal. A definitive diagnosis for this lesion should be sought at analysis. No other neoplastic conditions were noted in the assemblage though a malignant condition should be considered as a differential diagnosis for [702] (see below).

Circulatory disorders

Two adult males and an adult female had suffered from *osteochondritis dissecans* during life (1.6% of adults, 1% of the assemblage). This condition affected the femoral heads in the female, the distal femur of one male and the first metatarsal head of the other. Male [324] had suffered from Perthe's disease of the right hip which had resulted in secondary osteoarthritis.

Infectious disease

Thirty individuals had suffered from infectious diseases during life (9%: 30/351), 27 of whom had non-specific indicators (8%: 27/351), 25 adults and an adolescent, the only no-adult with evidence of infection. Non specific periostitis was the most prevalent infectious condition with 21 adults, including six males and nine females, affected (6%: 20/351). This is just over half the rate seen at St. Mary and St. Michaels (Miles and Powers 2006). In seven cases the tibiae were affected. Visceral rib lesions were noted in 10 adults (3%: 10/351); in six cases the lesions were active at the time of death.

Adult male [746] had a number of infectious changes including new bone indicating he had suffered from maxillary sinusitis. There further adults also had infectious changes in the sinuses. In the case of male [725], this almost certainly resulted from dental disease as the left maxilla had a healed and smooth lesion communicating between the molar socket and the sinus.

Non-specific osteitis was present in the frontal of male [697] and appears to indicate an infection of the frontal sinus (0.3%: 1/351). Two adults and adolescent [281] had osteomyelitis. In male [203] the infection was secondary to a fracture of the left fibula, whilst infection in the fourth and fifth sacral vertebrae of male [680] may have resulted from a sacral fracture. Adolescent [281] had suffered from tuberculosis and been subject to surgical amputation of the right lower leg. This had resulted in a severe infection in the remaining portions of the tibia and fibula with massive cloacae formation and gross bony change. Osteomyelitis was also present in the sternum and manubrium, with periosteal new bone formation on the posterior ilium.

Two individuals with possible mycotic (fungal) infections were noted. Male [132] had lytic lesions in the lower thoracic vertebrae although bony change was predominantly proliferative and resulted in the ankylosis of the eleventh and twelfth vertebrae. There were also lytic and proliferative lesions in twelfth ribs. Perhaps more convincing were the

changes to the left shoulder of female [731]. Bubble-like lytic lesions were present both here and from the seventh thoracic to the third sacral vertebrae.

The only specific disease present was tuberculosis, affecting six adults and one adolescent (2%: 7/351). Tuberculosis may also be considered as a differential diagnosis for the possible mycotic infections. Vertebral lesions were common and in two adults had resulted in 'Pott's spine'. A further two adults had tuberculous infection of the hip. Four of the individuals affected had lesions in the heads of the ribs. Adult [601] showed extensive destruction of the lower cervical vertebrae with ankylosis and a septic arthropathy in the right sacro-iliac joint with sequestrum formation.

Joint disease

Degenerative joint disease was seen in the vertebrae of 93 adults, over half the adults present (51%: 93/182). Evidence of disc herniation was present in 65 adults: 36% (37 male, 24 female). Fourteen adults (7 male, 6 female) had suffered from intervertebral disc disease (7%). Osteophytosis was noted in 35 adults: 19% (22 male, 11 female). Osteoarthritic changes were noted in the cervical vertebrae of 26 adults: 14% (9 male, 16 female).

Adult male [399] had suffered from ankylosing spondylitis.

Extra-spinal osteoarthritis was present in eight males, nine females and an adult of intermediate sex, 5% (18/351) of the assemblage and 10% of the adults (18/182). The knee was affected in four cases, the foot and hip in three, the elbow and temporal mandibular joint in two individuals and the shoulder in one individual. In six of the affected joints the change was secondary to an underlying pathological condition.

In addition to D.I.S.H., male [368] had erosive arthritic changes in both feet with resulting ankylosis of all the major elements, there were also erosive lesions in the sacro-iliac joint and a possible diagnosis of Reiter's syndrome is suggested. Two adult males were seen to have erosive lesions in the head of the first metatarsals, possibly indicative of gout, a similarly low rate to that seen at most post-medieval sites in contrast to that which might be expected. Rotator cuff disease was present in adult male [608].

Trauma

Excluding surgical trauma, nineteen adults had suffered trauma during life, 10% of the adults and 55 of the assemblage. The rate of adult trauma was therefore half of that seen at St Mary and St Michael's (Miles and Powers 2006). In all, 14 males and just 4 females were affected, a ratio of 3.5:1.

Healed fractures were present in 18 adults (5% of the assemblage: 11 males, 4 females) and affected all areas of the skeleton: seven individuals had upper limb fractures (including three Colles fractures, two female and one male), six had lower limb injuries, nine axial fractures (only one of which was a vertebral compression injury) and one individual had a nasal fracture. Multiple fracture sites were noted in five individuals including male [816] who had healed fractures of the right ribs, left fibula, left first and second metatarsals and left third metacarpal and the nasal fracture.

This was the only suggestion of interpersonal violence in the assemblage and given the multiple injuries suffered by this male, is perhaps most likely to have had an accidental cause. This is interesting as individuals from Commercial Road Hereford, were found to have a high prevalence of facial injuries, with 10% of the individuals having suffered nasal fractures (www.archenfield.com 28/03/07). The discrepancy suggests that social factors independent of religious background were the primary influence on trauma rates and may be supported by reportedly high rates of trauma in a group from King's Lynn, Norfolk (Boston 2005). The West Butts population were concluded not to have been involved in high risk activities (McKinley in prep: 66).

Secondary infection was present in one instance as previously stated.

Male [800] had a healed fracture of the root of the left maxillary canine.

Osteophyte formation as the result of soft tissue trauma had led to the ankylosis of the left sacro-iliac joint in [816]. Bilateral and symmetrical fractures to the anterior portion of the ribs of female [775] suggested a crushing injury as the mechanism. Males [846] and [832] appeared to have suffered fracture dislocations of the elbow.

Myositis ossificans was noted in the pelvic girdle of male [250], with no other associated trauma.

As previously stated, adolescent [281] had survived the amputation of the right lower leg, although with subsequent complications which may have led to the early demise of the individual. Male [313] had also undergone surgery, with the amputation of the right leg in the mid-shaft of the femur. Striations caused by the surgeon's saw were clearly visible in the cut surface indicating that no healing had occurred and it is quite probable that the operation was the cause of death. An intrusive adult right femur found within [213] showed a successful amputation in the same location with healing and atrophy of the element. It is hoped that this element can be reunited with the rest of the individual during analysis.

Nutritional and metabolic disorders

Cribra orbitalia was noted in seventeen individuals, four adults and 13 sub-adults. Just 8% of the sub-adults were affected, fewer than anticipated in an assemblage of this date. Two sub-adults, a perinate and an infant under six years, had cranial lesions consistent with porotic hyperostosis. The low rates of both conditions may suggest that iron deficiency anaemia was uncommon in this population.

As with many post-medieval assemblages, the most prevalent nutritional disorder was rickets, the result of vitamin D deficiency. Fourteen sub-adults, 13 under the age of six years, a large proportion of the youngest members of the group were affected, all of whom were in the active stage of the condition at the time of death (18%: 13/73). One sub-adult aged between 7-12 years demonstrated resolved limb changes. The crude prevalence of the condition in the sub-adult assemblage was therefore 8% (13/169), slightly higher than St. Mary and St. Michael's.

The most dramatic changes were noted in infant [456] where there had been a complete and generalised failure of efficient mineralisation. The cranial vault and mandible were thickened and disorganised, ilium and scapulae also affected and the ribs enlarged. Severe hypoplastic defects were present in the unerupted crowns of a first molar and canine. Differential diagnosis of systemic conditions such as an endocrine disorder should also be considered.

One adult female had possible indications of senile osteoporosis 'codfish' vertebrae, whilst three males and one female had evidence of D.I.S.H (2% of adults: 4/182).

Other pathological conditions

A probable case of Paget's disease of bone was noted in male [702] affecting the cranial vault, vertebrae, scapulae and pelvis. All elements were poorly mineralised with a disorganised structure. There were pathological compression fractures in the vertebrae. A neoplastic aetiology or possible advanced osteomalacia should also be considered.

Perinate [118] had lesions consistent with a diagnosis of infantile cortical hyperostosis or Caffey's disease. Perinate [271] had hypervascularity of the metaphyses with a distinct groove located on the shaft beneath each epiphyseal end. This may have been the result of inappropriate mineralisation as the result of a maternal or uterine deficiency and should be further investigated.

The right parietal of adult female [725] was perforated by an unusually deep (5 mm) pachionian depression, whilst the left parietal showed a similarly deep depression with no perforation of the outer table.

Autopsy

Only one individual, adult male [800] demonstrated evidence of surgical autopsy. He had been the subject of a craniotomy: a single sweeping cut run around the vault, overlapping in the occipital. The blade had not been passed cleanly through both tables of the skull and the inner table had fractured in some areas as a result. Rib cuts were also noted. No significant pathology was present which might have explained the need for a post-mortem.

A child who had undergone craniotomy was found in the West Butts sample and was known to have died in 1813 (McKinley in prep: 82).

5.3.1.5.5 'LIFESTYLE' EVIDENCE

Four females (5%: 4/87) and an adult with intermediate sexual characteristics [109] demonstrated clear evidence of rib deformity of a type likely to result from the wearing of stays or corsets. It is likely that further examples will be noted when the remains can be more carefully examined and the torso of some individuals reconstructed.

Eleven males and six females (9% of the adults 17/182) had evidence of *hallux valgus*, a deformity of the great toe which may be caused or exacerbated by habitual use of restrictive footwear. In 12 cases the condition could be observed in both the right and left feet.

Adult male [342] was the only individual in whom notches resulting from habitual smoking of a clay pipes could be seen. Interestingly he was also suffering from rampant dental caries. The large number of loose teeth in the assemblage meant that observation was often impossible and the number of cases may rise at analysis. Regardless, this is significantly different from the results seen in the assessment of the St. Mary and St. Michaels assemblage (Miles and Powers 2006).

5.3.1.6 Assessment work outstanding

Advice should be sought from an appropriate specialist on the potential for isotopic and other scientific analyses of identifiable individuals or groups of individuals, for example family groups.



Fig 7 The lead coffin of Elizabeth Parnell under excavation

5.3.2 Coffin furniture

Adrian Miles

5.3.2.1 Coffin plates

Forty four coffin plates were recovered from the excavation area. Of these, five were manufactured in lead and three in brass. Also recorded, but not retained due to their fragmentary condition, were a further 36 iron plates from which some inscription information could be obtained.

An additional 10 lead plates were recovered by the exhumation contractors, which were drawn and photographed by MoLAS, but not retained.

The details of all these plates can be found in Section 14.

5.3.2.2 Coffin handles

The majority of the coffin furniture recovered from the site consisted of coffin handles (grips). As each coffin would originally have had either six or eight handles, in general only the best preserved example was kept.

A total of 94 coffin handles (of which 16 had attached grip plates) from 76 contexts were retained, which will need to be x-rayed, any variations in style and design recorded and a catalogue prepared.

5.3.3 Accessioned finds

Material	Post medieval
Copper alloy	36
Iron	80
Lead	14
Glass	2
Shell	4
Tortoiseshell	2
Ceramic	1
Bone	2
Composite materials	22
Coins	8
Total	171

Table 8 Summary of accessioned finds by material and period

All of the accessioned finds from this site are post-medieval in date and relate to either the skeletons or the coffins within the burial ground. The coffin plates, handles and other fittings are included in the section above. The accessioned finds are detailed in Section 16.

Copper-alloy shroud pins were recovered from 16 contexts and three copper-alloy rings, probably eyelets or some other type of clothing fastening. Nine buttons were found from eight contexts: one copper-alloy alloy, two bone, two glass and four shell. The indications are that these all came from burial clothing. Also directly associated with burials were three tortoiseshell combs, two of which came from the same burial [263]. An iron hair pin was found with burial [661]. The cemetery soil also produced a copper-alloy brooch and a finger ring.

Eight coins and two tokens came from nine contexts, eight of which related directly to a burial. Six unidentified Copper-alloy objects were also found.

5.3.4 Documentary research

Adrian Miles

It is significant that a burial register for this burial ground survive. Although it is not clear at this time what the full extent of the burial ground was, it seems likely that the 50% of the development area excavated represents approximately 25% of the total burial area.

The section within the registers which locates each of the burials within the churchyard uses distances eastward and southward from the north wall. It is not clear from the register if this is the north wall of the church or of the burial ground, but by using the location of some of the known burials from the excavation it is possible to determine this. This should allow the identification of a significantly higher number of burials that is possible from the coffin plates alone.

The burial register was used to fill in gaps from the plate data where possible.

A very quick search of the easily available documentary sources for the burials that could be identified from coffin plate data produced six wills from the Prerogative Court of Canterbury, of which three come from the excavation area (see Appendix 2). It is highly likely that once analysis of the burial locations has taken place many more wills and other sources will be obtainable.

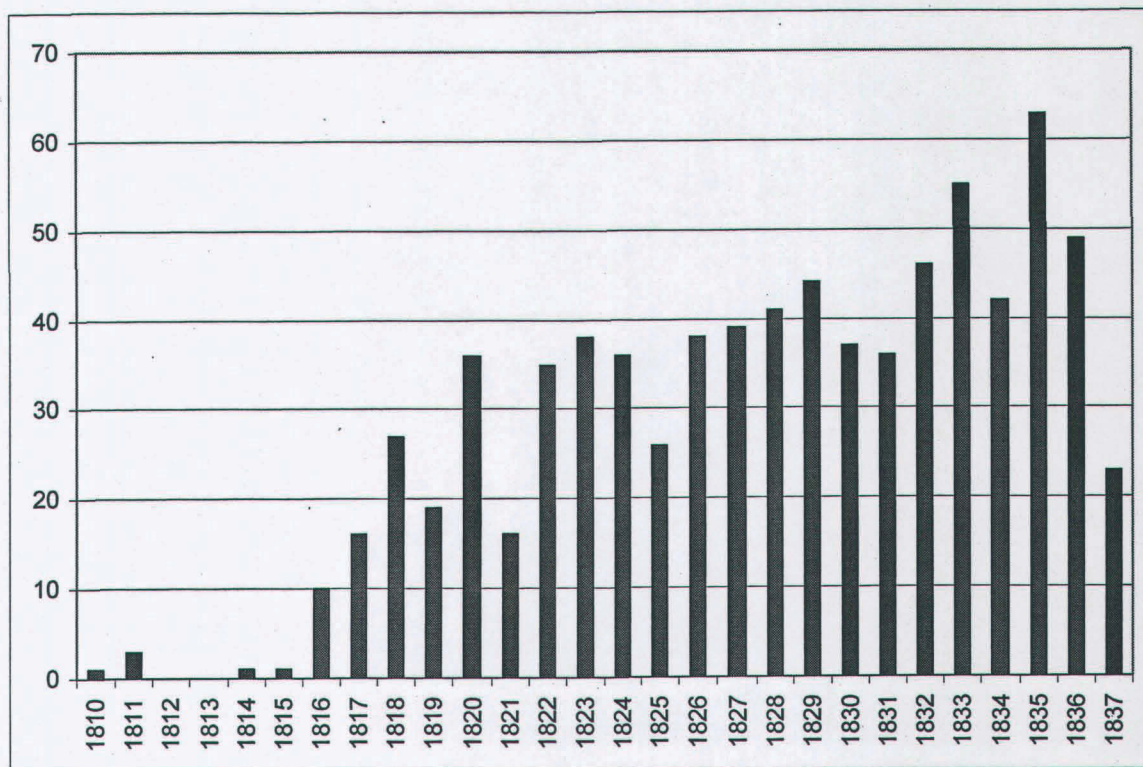


Fig 8 Burials per year from surviving burial register

The burial register at the National Archives records 792 burials. One page of this register has been left blank, which covers burials 734 to 743 (10 individuals).

A short history of the church available at the Tower Hamlets Archive indicate that there were a total number of 1354 burials which took place at Payne Road. This suggests that there is a further volume to the burial register and some 562 burials potentially recorded elsewhere.

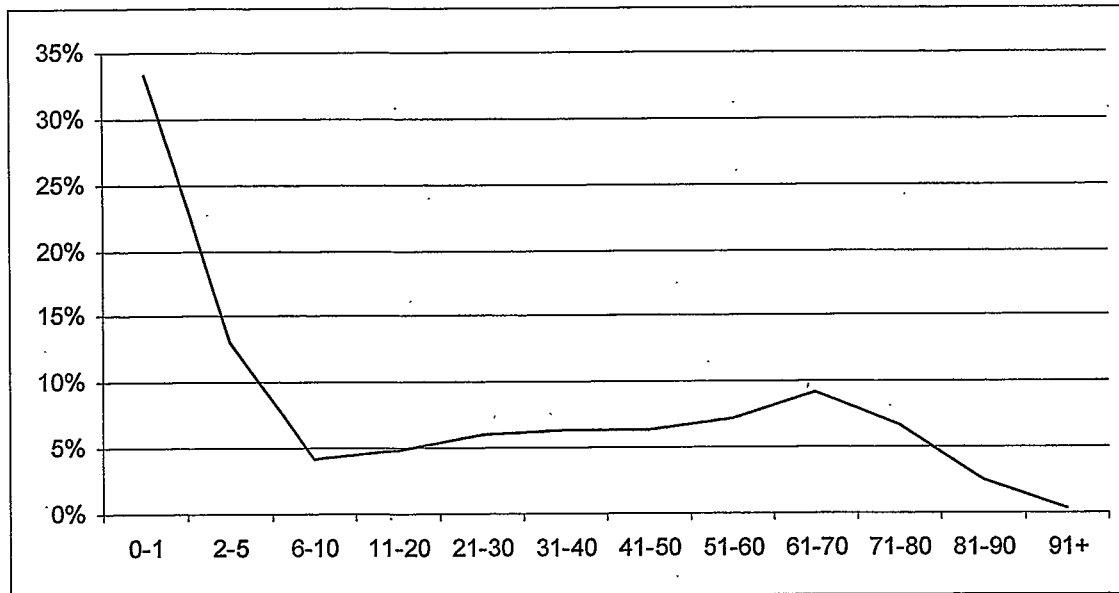


Fig 9 Age at death from burial register

Of the 792 burials identified from the first register only 688 had enough data to provide a point/line or plottable box on the location map created by plotting from the north wall. In total 2559 points were plotted. This means that from the register we have a total of 104 burials cannot be at present planned and given a location.

Of the 104 burials unlocated ten individuals are described as located by the cart shed, eight of which we have plottable location data for should we be able to locate the cart shed.

Research has commenced on the data from the surviving burial register. To date, the burial register details have been transferred to an Excel spreadsheet, the Imperial location details have been converted to metric and then used to provide grid locations. An AutoCad file has been created which combines the excavated data and the locational data from the register, which has been rotated and resized using the burials identified during excavation by coffin plate data as known fixed points.



Fig 10 Burial locations from register with excavated burials superimposed

6 Potential of the data

6.1 Realisation of the original research aims

This section examines the extent to which preliminary assessment of the results of the excavations meet the original research aims of the project, and also indicates any additional potential arising from the results.

6.1.1 Research questions

Natural topography and the prehistoric environment

Does the untruncated surface of natural gravels and/or brickearth subsoil survive?

Untruncated gravels survive in the areas of the burial ground between graves.

Can information about the nature of natural deposits be used to determine site formation processes and reconstruct the post-glacial topography of the area? Is there any evidence for a prehistoric presence? If so, what is its context and the likely date range?

No evidence was encountered from the excavation area for anything other than the post-medieval burial ground.

Medieval

What evidence, if any, exists for the function of the site in the medieval period?

No medieval evidence was encountered from the excavation area.

Post-medieval

What evidence exists for the post-medieval development of the area?

Some evidence of post-medieval quarrying preceded the establishment of the post-medieval burial ground.

In particular what evidence exists for the establishment and use of the burial ground known to have been located on the site?

348 burials dating between 1820 and 1870 were recorded, all of which had been in coffins. The burials were laid out in rows running north-south. Two brick vaults containing burials were also recorded.

6.1.2 Archaeological potential

Stratigraphically the site is not unusual and is demonstrably single period. It is difficult to refine the exact dating of most of the burials since there were few datable finds and only a small number of dated coffin plates from the graveyard. There are very few cases where relative dating can be achieved.

There are, however, a number of factors which can be studied and compared with data from other similar burial grounds, both in London and further afield, to reveal more about burial practice in the post-medieval period. It is in conjunction with the documentary and

osteological findings that the archaeological potential will best be realised. Much of the archaeological potential also fits in with the wider sociological studies of attitudes to death and burial in the 19th century and demographic change.

6.1.3 Documentary potential

Although the documentary sources have not been examined in detail, it is likely that there will be a reasonable quantity. This will allow biographical information to be obtained on some of the specific individuals excavated and also to provide a broader picture of the members of the parish buried in the churchyard. This will combine with the osteological analysis to help illustrate the buried population of the churchyard in the 19th century.

The potential exists with the burial register project to identify many more individuals than are known from coffin plate data alone. This will expand the potential number of available documentary sources for the site.

6.1.4 Osteological potential

In addition to those questions which can be address by all skeletal assemblages, the potential of post-medieval burials grounds is greatly enhanced by the ability to correlate the data produced with historical documents. In the case of Payne Road, this potential is increased yet further by the large number of named individuals who have, or may be identified.

The *Research Framework for Greater London Archaeology* (Nixon et al 2002) identified examining different cultural groups within the City as a primary theme for the post-medieval period, as the first assemblage of its kind from London the Payne Road assemblage plays a key role in achieving this aim.

A search of the existing literature suggests that, although places of worship across the country have been studied, there are very few comparative samples from Baptist burials grounds. Cotswold Archaeology carried out an evaluation of a small burial ground in Stroud during 2004, but although graves were identified, they were not excavated (www.cotswoldarch.org.uk 28/03/07). A group of 40 individuals were recovered from Commercial Road, Hereford by Archenfield Archaeology during 2001, but is as yet unpublished (ww.archenfield.com 28/03/07). The largest Baptist assemblage currently known is a group of 83 in situ burials and a small quantity of redeposited remains (MNI = 100) from West Butts, Poole dating from the late eighteenth to early nineteenth century (McKinley in prep).

6.1.4.1 General discussion of potential

The large sample from Payne Road will permit the creation and comparison of statistically significant datasets, allowing valid comparison with other, contemporary populations and the documentary record.

The date and nature of the assemblage presents the potential to examine the impact of rapid industrialisation on the health of the population. At the beginning of the 19th century the population of the parish was relatively small, but the building of many factories in the district drew people to the area and the population quickly expanded. By the mid-19th century, extreme poverty afflicted the working class in many areas of

London. Rate of infectious disease and non-specific stress indicators, child growth and adult stature may all provide clues as to the impact such rapid change had on the local inhabitants. Comparison with cemetery groups from high status and rural cemeteries of a similar age will be possible and will provide an indication of whether industrialisation and change had a detrimental affect on health or longevity.

At King's Lynn, Boston (2005, 124) found that there was an under-representation of sub-adults which contrasted to the evidence from the parish registers, whilst McKinley (in prep, 52) found a high proportion of females within the adult population at West Butts (61% female, 36% male). McKinley (McKinley in prep: 52) concluded that the eighteenth century General Baptist practice of endogamy, coupled with a transient male population comprised of sailors and the political ramifications on a non-conformist male until the 1661 Corporations Act was repealed in the nineteenth century were the likely causes of this discrepancy. Demographic comparison with the West Butts cemetery may provide useful data on the development of the Baptist church through the eighteenth and nineteenth centuries, contrasts between densely urban and less populated areas and perhaps even shed further light on the overriding influence on the population composition in Poole. Evidence from elsewhere suggests that many Baptists congregations were comprised of the poorer, working class members of society (Boston 2005: 134) and the osteological data will be examined to see if any conclusions about the relative status of the group can be made. Deficiency diseases, stress indicators infections and child growth are of particular relevance. Rates of trauma and joint disease can be examined to provide clues as the occupation and risk. Combined with the documentary evidence, it should be possible to create an accurate picture of the nature of the Baptist community in Bow.

It will be particularly interesting to examine if religious beliefs influenced social behaviour, and in turn the health of the population. Did the congregation drink or smoke? The former might have only an indirect influence on osteological indicators of health but the latter leaves traces on the dentition. At present it appears that there is a marked contrast between the number of smokers in the Payne Road population and that excavated from St Mary and St Michael, Whitechapel, and it will be possible to examine the possible causes of this contrast. Did a member of the Baptist church dress in the same clothes as their Anglican or Catholic counterparts? By the 1840s restrictive undergarments were commonly worn, whilst pointed footwear was fashionable for both sexes during the early Victorian era. The prevalence of *hallux valgus* and deformities of the ribs may provide us with evidence of this.

Was there a religious influence on attitudes to health care, medicine and surgery and did this influence extend into death with a particular stance on undergoing autopsy? Autopsies were carried out in London from the 1760s to establish cause of death (Lane 2001) and there appear to be fewer incidences of post-mortem intervention than might be expected of an assemblage of this later date. Finally, what were the attitudes to personal relationships and marriage and might these explain the absence of venereal infections in the group? An examination of the historical record in conjunction with the osteological data from both this and comparative sites should be able to answer these questions.

Previous authors have stated that we still know little of the burial practices of non-conformist groups in post-medieval England (Boston 2005, 146). The size and preservation of this assemblage will allow this to be redressed.

The large dataset of named individuals which it is anticipated will be produced will permit a large-scale blind testing of osteological methods which has not been attempted since the excavation of the crypt of Christchurch, Spitalfields. Biographic data can also be used to produce comprehensive case studies using the osteological and documentary data. It will be possible to examine the correlation between life histories, cause of death and the osteological data. Demographic, pathological and non-metric patterns may also be examined within each stack, with reference to possible family groupings.

The complete and well-preserved nature of the assemblage increases the potential for metric analyses, including child growth and adult stature. Sub-adults of known age increase the potential for examining growth retardation as the result of compromised health or nutritional status.

Comparative London samples of a similar date include: Golden Lane, St Mary and St Michael, Royal Mint Square, a small group of remains from the Davenant Centre, Christ Church Spitalfields (Molleson and Cox 1993), Red Cross Way (Brickley and Miles 1999), Old Church Chelsea, St. Marylebone, St Brides, and St. Pancras. The previously mentioned Baptist groups from Poole, King's Lynn and Hereford are of particular interest.

The Payne Road assemblage provides an unique opportunity for the detailed and integrated study of a discreet social group from post-medieval London and as such has enormous potential for further work.

6.1.5 Accessioned finds potential

The registered finds have potential for helping with dating the site as well as determining burial customs at the time. The buttons suggest normal, everyday clothing dressed the people for burial, although a few finds of pins, hooked fasteners, rings and eyelets may show other burial clothing was used.

7 Significance of the data

7.1 International significance

Neither the site nor the human bone have international significance.

7.2 National significance

This assemblage forms the largest collection of Baptist individuals archaeologically recovered in England. This group has limited national significance as it represents part of a distinct religious group of whom little osteological data exist. Recording this group will add to a currently limited corpus of cemetery data about post-medieval Britain. The archaeological sequence has no national significance beyond extending the number of post-medieval burials excavated under archaeological conditions in Britain..

7.3 Regional significance

The number of post-medieval burial grounds archaeologically excavated in London is still quite small and Baptist ones, such as Payne Road, are rarer still. The chance to compare documentary material with archaeological data and the skeletal assemblage can contribute significantly to regional population studies for the period. Osteologically it represents the opportunity to analyse a tightly dated, culturally discreet cemetery sample which will contribute significantly to regional population studies for the period. It forms the only Baptist assemblage excavated from within Greater London or the south east. Analysis will contribute significantly to the examination of health and population diversity in the south east

The registered finds are significant when looking at burial practice of the mid 19th century. The cemetery was in use for a short period of time by a distinct group of people, and so the finds may provide an insight into the customs and faith of these people at this time. This is a little studied period of burial practice and so the data is important for seeing the changes in preparing the body for burial, what was included with the body and how material culture reflected faith.

7.4 Local significance

The population is of considerable local significance. The defined religious group, tight date and wealth of supporting documentary and biographic data will allow detailed analysis of the experiences of the living population.

8 Publication project: aims and objectives

8.1 Revised research aims

Many of the original research questions (see Section 3) are still valid and remain to be answered. The following research aims can be regarded as additional:

8.1.1 Revised archaeological research aims

- *What was the area of the churchyard as extrapolated from the archaeological evidence in conjunction with historical data and what is the excavated percentage?*
- *Does spatial analysis of the graveyard give an insight into post-medieval burial practice? Is there, for example, a variation in status across the site?*
- *How does the density of burials within graves vary across the site?*
- *Can further analysis of the relationship between the dated burials and those to which they are stratigraphically related refine the dating of the burials?*
- *Can using the locations within the burial register be used to identify further burials by name?*
- *Is the group of burials excavated from the vaults in any way distinct from those outside it?*
- *Does the overall age at death profile from the burial register vary from that excavated?*

8.1.2 Revised osteological research aims

- *The Baptist movement believes that everyone is equal: is there any evidence of equality or inequality in the health and provision of treatment within the group?*

8.1.2.1 Demography

- *What is the demographic structure of the burial sample?*
- *Is the ratio of males to females significantly different to that of contemporary sites?*
- *Is the proportion of sub-adults significantly smaller than seen at nearby cemeteries of a similar date?*
- *Are there particular social or religious reasons why this may have been the case? Was there a lower than expected infant mortality in the group or a lower than average fertility?*
- *What is the demographic structure of each burial stack? Can this be related to family plots?*
- *Is there any evidence of epidemics (smallpox, influenza, typhus, cholera)?*

- *Are there indications of a lower female average age at death, and can this be related to the risks of childbirth?*
- *What does blind-testing of osteological methods show with regards to the accuracy of those methods?*
- *How does the mortality profile of the osteological sample compare with the documentary record?*
- *Can the osteological data for named individuals be correlated with biographic information particularly with regards to injuries, cause of death and health problems which were unresolved at the time of death?*

8.1.2.2 Metric analysis

- *How do child growth and adult stature compare with other contemporary London groups?*

8.1.2.3 Palaeopathology

- *What explanations are there for the apparently low rate of infectious disease and absence of venereal conditions?*
- *How do prevalence rates compare to historical data and contemporary assemblages?*
- *Is there any correlation between incidence of bronchitis and rib lesions?*
- *Are there patterns in the type and location of fractures?*
- *How does the prevalence compare with the high rate seen in King's Lynn (Boston 2005)?*
- *What are the likely mechanisms behind the bilateral rib fractures in female [775] are they in any way related to the use of restrictive corsetry?*
- *What evidence of inter-personal violence is there and how does this compare with contemporary groups?*
- *Who does the amputated leg in [213] belong with?*
- *Was the amputation of the leg of [281] related to treatment for tuberculosis?*
- *Is the rate of surgery significantly higher than elsewhere? If so is this related to access to medical care and can a specific hospital or surgeon be identified in the area?*
- *Can the date of death of the amputees be linked with known advances in anaesthetics?*
- *Is there any evidence of crutch use?*
- *Why is there only one example of autopsy in the assemblage? Who was this individual and why was the autopsy performed? Is the low rate of post-mortems influenced in any way by the religious beliefs of the group?*
- *What type of tool(s) was used to perform the autopsy?*
- *Is there a correlation between ante-mortem tooth loss and adult age?*
- *How does the apparent absence of dentistry compare with other post-medieval sites from London?*
- *How do the specific congenital abnormalities within this group compare with other London assemblages of the period?*
- *What is the cause of the bone cyst in [596]?*

- *Is there a correlation between spinal joint disease and age or sex? What are the implications of low rates of extra-spinal joint disease?*
- *Does the incidence of spinal joint disease support the hypothesis of a working class group subjected to hard manual labour?*
- *What is the incidence of stress indicators in this sample?*
- *What is the true prevalence rate and demographic distribution of skeletal lesions due to vitamin D deficiency?*
- *What are the implications for this condition as an indicator of status and changes in child rearing behaviour in the post-medieval period, particularly when compared with contemporary cemetery assemblages?*
- *What does the evidence of dental disease and nutritional disorders suggest about the diet of the population?*
- *How do the dentures compare with other examples from London and beyond?*
- *What is the date of manufacture of the dentures?*
- *Is there any evidence to suggest the boycott of sugar in the early nineteenth century due to the association with the slave trade (McKinley in prep: 62)?*

8.1.2.4 Burial practice

- *Can the period over which the burials within a single stack took place be established?*
- *What can be concluded about the apparent re-use of graves?*
- *What is the significance of [665]? Why were the remains redeposited and when?*
- *Boston (2005: 145) suggested that the alignment of the body within the grave was unimportant to the Baptists at King's Lynn, is there any evidence of lack of uniformity in burial orientation at Payne Road?*
- *Do the coffins and coffin furniture show the 'simplicity noted by Boston (2005) and if not what does this suggest about regional differences in Baptist burial practices?*

8.1.2.5 'Lifestyle'

- *Is there any skeletal evidence of deformity resulting from restrictive clothing?*
- *What type of stays would have been worn at this date?*
- *What is the demographic distribution pattern of individuals with rib deformities and/or hallux valgus?*
- *Why is the rate of pipe notches apparently so different from that seen at contemporary sites?*

8.1.3 Revised finds research aims

- *What do the finds tell us about burial practice and customs of the mid 19th century?*
- *What can the finds clothes fastenings tell us about clothing? Were the items everyday items or specially produced?*

8.2 Preliminary publication synopsis

It is proposed that the results of the Payne Road analysis will be published in conjunction with other recently excavated post-medieval cemeteries in London as part of the MoLAS Monograph Series books.

A full publication synopsis for this book will be presented when the assessments of the other sites to be included are complete.

9 Publication project: task sequence

9.1 Stratigraphic method statement.

Task 1 Finalise sub-grouping and input into the Oracle database.

Task 2 Analysis of stratigraphy to form stratigraphic sequence of burials through analysis of sub-groups and digitised burials.

Task 3 Spatial analysis of the graveyard to determine use over time, variations in burial density, locations of possible paths and any familial relationships.

Task 4 Liaison with photographic and graphics sections.

Task 5 Agree any changes required in association with other principal authors and specialists.

Task 6 Prepare contribution to publication text for Monograph.

Task 7 Prepare publication photography.

Task 8 Preparation of the stratigraphic records, finds and environmental archive, and general paper and digital archive for deposition: The archive material will be prepared for curation at the Museum of London.

9.2 Human bone method statement

The assemblage should be analysed in close conjunction with the stratigraphic data to allow the separation and re-association of mixed individuals. Contextual information will be obtained from the field team and referred to throughout analysis. Duplicate and additional context numbers will be assigned by the senior archaeologist at the request of the archaeologist and time will be allocated for the correction of any numerical discrepancies.

All articulated individuals will be recorded onto a specialist Oracle database designed to conform to current recognised standards. Named individuals will be prioritised. This record includes a full skeletal inventory, age and sex estimation, metric and non-metric analyses and detailed observations of pathological conditions. Pathological information will be supported by paper recording forms and digital photographs where required. All fractures will be radiographed in an anterior-posterior and medio-lateral direction to allow measurement of displacement and characterisation. Radiography of other specimens may be carried out for diagnostic or illustrative purposes. Blind testing of age and sex methods will be carried out. It is recommended that a recording method be devised to allow measurement of rib deformity.

The resulting data to establish true prevalence rates for all pathological conditions allowing full characterisation of the cemetery population, comparison with other contemporary sites and with the documentary record. A comprehensive osteological archive report will be produced. It is envisaged that publication will be in a monograph comparing several cemetery populations from the east end of London. The raw data will be made available via the WORD project web pages. Further specialist (peer reviewed) journal articles should be considered for aspects of the health of the population.

A selection of remains will be subject to publication level photography. This will include one illustrative example of common pathological conditions and all unusual pathology.

Advice should be sought from an appropriate specialist on the potential for isotopic and other scientific analyses of identifiable individuals or groups of individuals, for example family groups.

Recording

This task list assumes recording is carried out by one osteologist (if two staff members are used, allow an extra 8.0 days for inter-observer error testing).

Task 9 Context changes (duplicates etc)

Task 10 Rib deformation methodology

Task 11 Separating of mixing remains

Task 12 Recording of 352 skeletons @ 2.7 per day

Task 13 Radiography of c 25 contexts

Analysis

Task 14 Documentary research

Task 15 Analysis of correlation of data for named group

Task 16 GIS analysis (pathology, demography, non-metric traits)

Task 17 Data interrogation and generation of tables

Task 18 Discussion with external specialists and field team

Task 19 Production of archive report

Task 20 Editing to form publication report

Task 21 Specialist editing

Task 22 Archival of paper/ photographic record

Task 23 Archival of digital data and WORD summary

Task 24 Specialist articles

9.3 Accessioned finds method statement

Task 25 Prepare a catalogue of the coffin plates. X-ray coffin fittings. Cross reference fittings types with existing data to support analysis of burial sequence.

Task 26 Carry out further research on burial items including iconography

Task 27 Carry out further research on dress accessories

Task 28 Write text for publication

Task 29 Editing and finds review

9.4 Graphics method statement

Task 30 Finalise digitisation of burials through AutoCAD to allow GIS analysis of the burial sequence and density

Task 31 Produce location plans

Task 32 Scan historic maps.

Task 33 Digitise parish base map to create location plans of buried population's addresses

Task 34 Convert computer generated plots to drawings for publication

9.5 Conservation method statement

Task 35 Preparation for archive deposition

9.6 Photographic method statement

Task 36 Review selected photographic exposures in the archive, create new exposures of artefacts and other items, and develop monochrome and colour prints of publication quality

Task 37 Publication photography of human bone

9.7 Documentary research method statement

Task 38 Use burial register locations to identify more of excavated individuals

Task 39 Find and examine wills

Task 40 Examine census returns to determine size of households and family relations

Task 41 Obtain and examine death certificates for post-1837 individuals

Task 42 Examine other documentary sources as appropriate

9.8 Editing and publication

Task 43 Specialist edit: Specialist contributors will check the content of those sections of Monograph which contain data relevant to their specialism, for clarity and accuracy.

Task 44 Internal edit by the MoLAS academic editor, who will comment upon the form, and content of the first publication draft.

Task 45 All editorial corrections will be made by the principal authors.

Task 46 Technical editing will be carried out by the MoLAS academic editor.

9.9 Project management method statement

Task 47 Monitor expenditure and completion of tasks, prepare and ensure adherence to the project programme, facilitate communication between contributors, sections, monitors, and referees, and arrange meetings and report on progress

9.10 Provisional task list and person days required.

Task No.	Task	Person days
	Stratigraphic tasks	
1	Finalise sub-grouping and input into the Oracle database	3
2	Analysis of stratigraphy to form stratigraphic sequence of burials through analysis of sub-groups and digitised burials	2
3	Spatial analysis of the graveyard to determine usage over time, variations in burial density, locations of possible paths and any familial relationships	5
4	Prepare a catalogue of the coffin plates. X-ray coffin fittings. Cross reference fittings types with existing data to support analysis of burial sequence	3
5	Liaison with photographic and graphics sections	1
6	Agree any changes required in association with other principal authors and specialists	1
7	Prepare publication text for Monograph	16
8	Preparation of the stratigraphic records, finds and environmental archive, and general paper and digital archive for deposition: The archive material will be prepared for curation at the Museum of London	2
9	Human bone tasks	
10	Context changes (duplicates etc)	2
11	Rib deformation methodology	1
12	Separating of mixing remains	7
13	Recording of 352 skeletons @ 2.7 per day	131
14	Radiography of c 25 contexts	3
15	Documentary research	5
16	Analysis of correlation of data for named group	4
17	GIS analysis (pathology, demography, non-metric traits)	1
18	Data interrogation and generation of tables	8
19	Discussion with external specialists and field team	1
20	Production of archive report	20
21	Editing to form publication report	5
22	Specialist editing	1
23	Archival of paper/ photographic record	1
24	Archival of digital data and WORD summary	1
25	Specialist articles	3
26	Conservation tasks	
27	Preparation for archive deposition	1
28	Accessioned finds tasks	
29	Carry out further research on burial items including iconography	2
30	Carry out further research on dress accessories	2
31	Write text for publication	1
	Geomatics and graphics tasks	
32	Finalise digitisation of burials through AutoCAD to allow GIS analysis of the burial sequence and density	2
33	Produce location plans and convert computer generated plots to drawings for publication	3
34	Scan historic maps and digitise parish base map to create location plans of buried population's addresses	1
	Photographic tasks	
36	Review selected photographic exposures in the archive, create new exposures of artefacts and other items, and develop monochrome and colour prints of publication quality	1
37	Publication photography of human bone	3

Task No.	Task	Person days
	Documentary tasks	
38	Use burial register locations to identify more of excavated individuals	3
39	find and examine wills	3
40	examine census returns to determine size of households and family relations	2
41	obtain and examine death certificates for post-1837 individuals	2
42	examine other documentary sources as appropriate	10
	Editing and publication tasks	
43	Specialist edit. Specialist contributors will check the content of those sections of Monograph which contain data relevant to their specialism, for clarity and accuracy	1
44	Internal edit by the MoLAS academic editor, who will comment upon the form, and content of the first publication draft	1
45	All editorial corrections will be made by the principal authors	1
46	Internal technical editing will be carried out by the MoLAS academic editor	1
	Project management tasks	
47	Monitor expenditure and completion of tasks, prepare and ensure adherence to the project programme, facilitate communication between contributors, sections, monitors, and referees, and arrange meetings and report on progress	15
	Total	282

This table may need some revision when the tasks are finalised with regard to production of the final publication.

10 Publication project: resources and programme

Financial resources sufficient to cover the work proposed in this document have been sought via a separate document.

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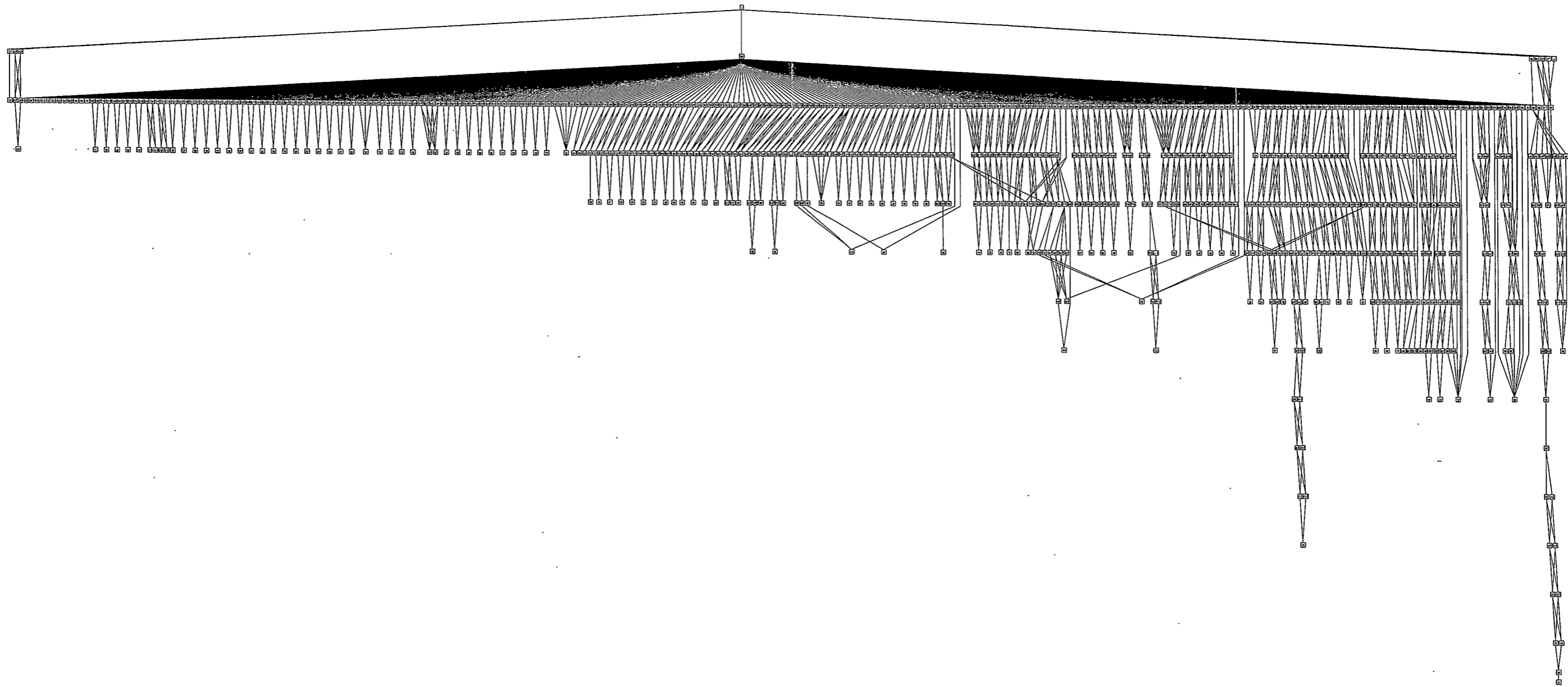
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13 Appendix 1 Site matrix



14 Appendix 2 Coffin plate information

Context no	Surname	Christian name	Title	Year of death	Date of death	Age	Actual age	Burial register No.	Date of burial	Address	Comments and additional information	Distance from north wall Eastward (ft.in) With no. refers to register no.	Distance from north wall Southward	Will	Plate material
163	Page (Scach)	Mary	Miss	1825	13-Apr	2	2 years 6 months	246	24-Apr	Bromley	Scach is the surname in the burial register	36 - 43	37.6 - 39.6		
175	Jones??	Mary Elizabeth		18_3	09-Feb										
196		Elizabeth	Miss	1833	May										
209	Woodward	Richard		1831	22-Jun	81	80 in register	485	26-Jun	Stratford		With 449			Brass
235	Woodward	Elizabeth	Mrs	1830	22-Aug	39		449	31-Aug	Stratford		55 - 62	31 - 30		Brass
274		Eliza...													
287		William		1830											
316					22		In her				probably fragments of more than one plate - see sheet				
323					22 Feb/Sep	*4									
349	Hill	George	Mast	1831	19-May	2		482	28-May	Old Ford		55 - 62	48 - 50		
379	Her...elb	Be...			18-Dec	68									
457	Parry	James	Mas	1823	31-Oct	3		197	06-Nov	Old Ford		35 - 42	22.6 - 24.6		
496	Wiggs	Edward	Mas		18-Jan	0	2 months								

Context no	Surname	Christian name	Title	Year of death	Date of death	Age	Actual age	Burial register No.	Date of burial	Address	Comments and additional information	Distance from north wall Eastward (ft.in) With no. refers to register no.	Distance from north wall Southward	Will	Plate material
498	Wiggs			1838?	April										
499		Elizabeth			22										
539	...artson	Peter													
545				1854??	Aug	64??					probably fragments of more than one plate - see sheet				
552	Smeeton				March			311	22-Jan	Marylebone	Register has 'Sarah or Elizabeth, brought from another burying place'	With 310			
555							4 ***								
593	Wi...	Thomas	Mas	18...	18-Aug	0	4 months								
595	Caunter	Elizabeth	Mrs	1824	29-Jan	66		211	15-Feb	Bromley		28 - 35	34.6 - 36.6		
619	Wright	Helen Maria	Miss	1837	23-Mar	32		779	04-Apr	Coborn Street, Mile End Road	With her stillborn child (plate recovered by machine from diesel contaminated area)				Lead
631	Green...	Thomas													
636						35									
644	Green	Sarah	Miss	1836	23-Dec	0	5 months	765	29-Dec	Old Ford	might relate to 646	81.6 (With 763)	38		

Context no	Surname	Christian name	Title	Year of death	Date of death	Age	Actual age	Burial register No.	Date of burial	Address	Comments and additional information	Distance from north wall Eastward (ft.in) With no. refers to register no.	Distance from north wall Southward	Will	Plate material
646											see 644				
662					18th	*8	years								
672	Reilly	Emily Maria	Miss	1837	02-Sep	0	4 months								
673	Robson	Mary	Mrs	1842	25-Aug	85									Lead
674	Sparkall	Elizabeth	Mrs	1833	22-May	93		514	01-Jun	Plaistow	Widow of Plaistow, Essex			PROB11/1819	
675	Sparkall	Alexander	Mr	1826	04-Aug	76	In his 76th year.	291	12-Aug	Plaistow	Gentleman of Westham, Essex	44.10 - 53.10	57.3 - 64.3	PROB11/1716	Lead
683	Parnell	Elizabeth	Mrs	1870	29-Dec	76									Brass
691	Robson	Alexander	Major	1836	24-Feb	54		725	16-May	Marseilles, France	Major in the British Army of Walton upon Thames, Surrey	Mr Sparkhall's Vault			Lead
695					st		In her...								
703		William		1837	21-Jul	83									
710	Parnell	Thomas		1853	27-Jan	61					Watchmaker of Bow, Middlesex. 32 High Street			PROB11/2169	Lead
730				1836	Sept	0?	...3 months								
762	Richardson	Charles			01-Mar										
772	Mann....nt														
814	...lory				Aug		years								

Context no	Surname	Christian name	Title	Year of death	Date of death	Age	Actual age	Burial register No.	Date of burial	Address	Comments and additional information	Distance from north wall Eastward (ft.in) With no. refers to register no.	Distance from north wall Southward	Will	Plate material
821	Pratt	W..	Mast	1853?	May	0	9 months								
829	Meredith	Mary Mar	Miss	1851	Jan	0	4 months								
499a	Lo...ett	William	Mas	182-	02-May	0	wks								
552a	Smeeton	Job	Mas	1827	15-Jan	0	10 months	310	21-Jan	Marylebone		37 - 44	67 - 69		
TCS 12	Cullum	Priscilla	Mrs	1839	02-Sep	62									Lead
TCS 13	Crane	Henry Samuel	Esq	1848	10-Feb	65									Lead
TCS 141	Shales	Josiah	Mr	1851	15-Dec	27									Lead
TCS 148	Cock	James	Mr	1823	04-Jun	65		183	10-Jun	Bow		44 - 51	15 - 17		Lead
TCS 15	Crane	Samuel	Mr	1832	22-Oct	80	In his 81st year	540	28-Oct	Stratford		17 - 24	66.10 - 68.10	PROB11/1807	Lead
TCS 17	Cullum	Jesse	Mr	1854	24-Oct	80								PROB11/2204	Lead
TCS 18	Shales	Sarah	M	1846	11-Apr	53									Lead
TCS 34	Pryke	Ann		1869	20-Aug	84									Lead
TCS 76	Mileham	Charles Thomas	Rev	1829	15-Dec	48		424	21-Dec	Stoke Newington	Protestant Dissenting Minister of Stoke Newington, Middlesex			PROB11/1767	Lead
TCS 83	Robins	Mary	Miss	1844	04-Feb	7	7 years 2 months								Lead

15 Appendix 3 Human bone assessment data

Site code	Context	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MNI	General comments									
PAY 05	101	1	90	1	1	1	1	2	2	2	2	2	0	resolved rickets? - bowed femora	0	0	0	0	0	0	0	1	511	0	0	1	1,2	1	None					
PAY 05	103	2	95	2	1	1	1	2	2	2	2	7	1	Cervical OA, Ost dissections RMT1, healed rib#	0	0	1	911	0	0	0	0	1	0	1	4210	0	0	0	0	1	2	1	ANBN
PAY 05	105	2	95	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None			
PAY 05	107	2	85	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	Int. infant humeri, adult vert.				
PAY 05	109	1	95	2	1	1	1	2	2	2	2	7	3	Tibial periostitis, poss. Corset deformity ribs,	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	1	Young adult. CU stain L ilium, sacrum	
PAY 05	111	3	80	1	0	1	1	2	2	2	2	1	0	trumpeting - active rickets	0	0	0	0	0	0	0	0	0	0	0	0	1	511	0	0	0	0	1	None
PAY 05	113	1	95	2	1	1	1	2	2	2	2	7	1	L MC5#, R fibula periostitis, complete ossification on costal cart.	0	0	0	0	0	0	1	211	0	0	1	4210	0	0	0	0	1	2,3,5	1	None
PAY 05	115	2	95	2	1	1	1	2	2	2	2	7	1	SN, sacro-iliac ank..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3,5,6	1	ANBN

Site code	Content	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MNI	General comments					
PAY 05	118	2	90	1	1	1	1	2	2	2	2	0	0	Infantile cortical hyperostosis	0	0	0	0	0	0	0	0	1	0	1	None				
PAY 05	120	2	95	1	1	1	1	2	2	2	2	2	0	None	0	0	0	0	0	0	0	0	0	0	1	None				
PAY 05	123	1	95	2	1	1	1	2	2	2	2	7	1	SN	0	0	0	0	1	0	0	0	0	1	1,2,3	1	None			
PAY 05	125	2	95	2	1	1	1	2	2	2	2	7	1	None	0	0	0	0	0	0	0	0	0	1	1,3	1	CU stain manubrium. Young adult			
PAY 05	127	1	95	2	1	1	1	2	2	2	2	1	0	greenstick # L femur	0	0	0	0	0	0	0	0	0	1	1	1	None			
PAY 05	130	2	65	1	1	1	1	2	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	2	Int. infant mandible				
PAY 05	132	1	95	2	1	1	1	2	2	2	2	7	1	Infection lower T vert. and 12th ribs (mycotic ??), hallux valgus with bunion R MT1, lesion perforating R palate (dental abscess?)	0	0	0	0	1	1	230	1	0	0	0	0	1	1,2,3,6	1	ANBN Young adult
PAY 05	134	1	70	2	1	1	1	2	2	2	2	7	2	erosive arthropathy LMT1	0	0	0	0	0	1	33	0	0	0	0	1	2,3,5	1	None	
PAY 05	137	1	95	2	1	1	1	2	2	2	2	7	4	TB hip	0	0	0	0	0	0	0	0	0	1	1	1	1	None		
PAY 05	139	2	90	2	1	1	1	2	2	2	2	7	5	Rampant caries	0	0	0	0	0	0	0	0	0	1	1,2,3	1	None			

Site code	Content	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MNI	General comments								
PAY 05	141	1	95	2	1	1	1	2	2	2	2	7	1	Visceral rib lesions (healed)	0	0	0	0	0	0	0	1	100/2	0	0	1	ANBN, young adult (clavicle unfused)						
PAY 05	146	2	90	1	1	1	1	2	2	2	2	7	5	None	0	0	0	0	0	0	0	0	0	1	1,2,3,5,6	1	None						
PAY 05	149	2	95	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	1	511	0	0	0	0	1	None				
PAY 05	151	2	75	0	0	1	1	2	2	2	2	7	4	SN, OP with ank. T vert. x2, periostitis post. L femur, L patella#, R Colles# and ulna#	0	0	0	0	0	0	1	211	1	0	1	4210	0	0	0	0	0	1	ANBN
PAY 05	153	2	95	2	1	1	1	2	2	2	2	7	1	OP, ?gout RMT1	0	0	0	0	0	0	0	1	33	0	0	0	0	0	1	2	1	Fe stain L tibia	
PAY 05	155	2	85	1	1	1	1	2	0	1	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	None			
PAY 05	157	2	10	0	0	0	0	2	2	0	0	1	2	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None			
PAY 05	159	2	85	2	1	1	1	2	2	2	2	3	0	None	0	0	0	0	0	0	0	0	0	0	0	0	1	1	3	Mixed with older adults x2			
PAY 05	162	2	95	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None			
PAY 05	164	2	95	2	1	1	1	2	2	2	2	7	1	Hallux valgus	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3,5	2	Int. infant limbs and torso		
PAY 05	167	3	65	1	1	1	1	2	2	2	2	1	0	early rickets?	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None			
PAY 05	169	1	55	1	1	1	1	1	0	1	0	7	5	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	ANBN. Int. L humerus, radius, femur with TB hip			

Site code	Context	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MNI	General comments						
PAY 05	169	1	10	0	1	1	0	0	0	1	0	7	2	None	0	0	0	0	0	0	0	0	0	1	2	1	"possible associated with 169"				
PAY 05	170	2	90	2	1	1	1	2	2	2	2	7	4	Bilateral hallux valgus, SN	0	0	0	0	1	1 4 3 0	0	0	0	0	1	1,2,3,5	1	Wood adhering to cranium.			
PAY 05	171	2	85	2	1	1	1	2	2	2	2	7	5	OA knees, SN, IVD, OP, OA, visceral rib lesions (healed), edentulous mandible	0	0	0	0	0	0	0	0	0	0	0	0	1	2	1	ANBN	
PAY 05	174	2	90	1	1	1	1	2	1	2	0	0	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None		
PAY 05	176	1	90	2	1	1	1	2	2	2	2	7	4	Bilateral hallux valgus, cervical OA, OP, SN	0	0	0	0	1	1 4 3 0	0	0	0	0	0	0	0	1	2,3,5	1	Female pubis, masculine skull (mixed?). CU stain R mastoid
PAY 05	179	1	90	1	1	1	1	2	2	2	2	7	5	Corset def. Ribs, ank. and slight scoliosis 3x T vert.	0	0	0	0	1	1 3 1	0	0	0	0	0	0	0	1	2,3	2	Int. adult feet
PAY 05	181	2	95	2	1	1	1	2	2	2	2	7	5	None	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3	3	Mixed hands/feet, int. L humerus, L innominate, subadult epiphyses,		
PAY 05	183	1	95	2	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	Two mixed infants	
PAY 05	184	2	95	2	1	1	1	2	2	2	2	7	1	L fibula#, rib#, SN, OP, cervical	0	0	0	0	0	0	0	0	0	0	1	2	2	Int. adult feet			

Site code	Content	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MNI	General comments				
														OA															
PAY 05	188	2	90	1	1	1	1	2	2	2	2	7	2	None	0	0	0	1	15 11	0	0	0	0	0	1	1,2	1	None	
PAY 05	191	1	15	1	1	0	0	0	0	0	0	1	0	None	0	0	0	0	0	0	0	1	100 1/2	0	0	0	0	1	None
PAY 05	192	1	90	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	1	CU stain cranium	
PAY 05	193	2	90	2	1	1	1	2	2	2	2	7	4	None	0	0	0	0	0	0	0	0	0	0	1	2	1	CU stain R parietal	
PAY 05	197	1	95	2	1	1	1	2	2	2	2	7	4	None	0	0	0	0	0	0	0	0	0	0	1	1,2	1	CU stain L radius, vert., R temporal	
PAY 05	198	2	90	2	1	1	1	2	2	2	2	7	4	OA R elbow, cervical OA, edentulous mandible	0	0	0	0	0	0	0	0	0	0	0	1	2	1	HAIR, CU stains cranium
PAY 05	201	2	45	0	0	1	1	2	2	1	1	1	2	None	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	203	1	95	2	1	1	1	2	2	2	2	7	1	SN, L fibula# with osteomyelitis, traumatic ank. L sacroiliac, TB hip, ribs and vert.	0	0	0	0	0	0	0	0	0	0	1	1,2,3,5	2	L acetabulum completely destroyed but femoral head intact - contamination/mixing	
PAY 05	205	1	90	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	206	1	75	2	1	1	1	1	1	1	1	2	0	Cribriform	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	209	2	90	1	1	1	1	2	2	2	2	7	2	OP	0	0	0	0	0	0	0	0	0	0	1	2	1	ANBN	

Site code	Content	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic		Circulatory		Congenital		Infection		Joint disease		Trauma		Metabolic / endocrine		Misc		Dental		MN	General comments
															0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
PAY 05	211	3	40	1	0	0	0	2	0	1	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	ANBN	
PAY 05	213	2	90	2	1	1	1	1	1	2	2	7	1	SN, T vert.#,	0	0	0	0	0	0	0	0	1	0	1	425	0	0	0	0	1	1,2,3,4,5	2	Int., R adult femur amputated at knee
PAY 05	215	1	95	2	1	1	1	2	2	2	2	7	1	SN	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	3	1	None	
PAY 05	217	2	45	1	1	1	1	2	0	1	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	1	101	0	0	1	0	2	Int., adult vert.	
PAY 05	218	2	20	1	0	0	1	1	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	Int. adult torso and R calcaneus	
PAY 05	226	2	65	1	1	1	1	2	0	2	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	Int. infant L humerus, ANBN	
PAY 05	228	1	90	2	1	1	1	2	2	2	2	7	4	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3	2	Int. infant mandible, CU stain cranium, bitumen like material adhering to rear of R femur (SOFT TISSUE?). Young adult	
PAY 05	229	2	25	1	1	1	0	2	0	0	0	2	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	233	2	60	1	1	1	1	1	0	2	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	235	2	95	2	1	1	1	2	2	2	2	7	5	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3,4,	1	CU stain ilium, ribs, vert.	
PAY 05	240	1	95	2	1	1	1	2	2	2	2	2	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	243	3	95	1	1	1	1	2	2	2	2	7	4	Colles# L radius, IVD	0	0	0	0	0	0	0	0	1	0	1	4210	0	0	0	0	1	2	1	HAIR, CU stain cranium
PAY 05	244	1	80	0	0	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	246	1	20	2	1	0	0	0	0	0	0	2	0	Cribra orb.	0	0	0	0	0	0	0	0	0	0	0	1	100	0	0	0	0	1	None	
PAY 05	247	2	20	2	1	0	0	0	0	0	0	3	0	Cribra	0	0	0	0	0	0	0	0	0	0	0	1	100	0	0	0	0	1	None	

Site code	Co nte xt	C o n d i t i o n	% c o m p l e t e	S k u l l	D e n t i t i o n	T o r s o	P e l v i s	L e g s	F e e t	A r m s	H a n d s	A g e	S e x	Patholo gy commen ts	Neo plas tic	Circula tory	Con gen ital	Infectio n	Joint diseas e	Trauma	Metabolic / endocrine	Misc	Dental	MN I	General comments										
05														orb.								1/2													
PAY 05	248	2	95	1	1	1	1	2	2	2	2	0	0	None	0	0	0	0	0	0	0	0	0	0	1	None									
PAY 05	250	1	95	2	1	1	1	2	2	2	2	7	1	Myositis ossificans L ilium, SN, OP	0	0	0	0	0	0	1	0	1	426	0	0	0	0	1	3	1	None			
PAY 05	252	3	70	1	1	1	1	1	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	1	None									
PAY 05	254	2	95	2	1	1	1	2	2	2	2	7	5	None	0	0	0	0	0	0	0	0	0	1	2,3,4,5	1	None								
PAY 05	256	2	95	2	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	1	None									
PAY 05	259	3	85	1	1	1	1	2	2	2	2	7	3	OA R knee, R shoulder, IVD, OP with ank. of T vert., rib#, visceral rib lesions (healed and active), poss. Corset def., edentulous maxilla	0	0	0	0	0	0	0	1	211	1	3 1 1	1	4210	0	0	1	0	1	2	1	None
PAY 05	264	1	75	2	1	1	1	2	2	2	2	7	1	sacro-iliac ank. edentulous maxilla, OA R hip, L distal radial shaft#	0	0	0	0	0	0	0	0	0	1	3 1 1, 3 4 1	1	4210	0	0	0	0	1	2	3	Int. infant ilium. Adult F head

Site code	Context	Condition	% complete	Skull	Dentition	Torsos	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic		Circulatory		Congenital		Infection		Joint disease		Trauma		Metabolic / endocrine		Misc		Dental		MNI	General comments	
															0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			0
PAY 05	265	2	50	1	1	1	0	1	0	2	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	Int. infant R humerus			
PAY 05	267	1	95	2	1	1	1	2	2	2	2	7	5	IVD, vert. OA, edentulous maxilla	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	2,3,5	1	CU stain L pelvis	
PAY 05	270	1	95	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	Int. adult R femur			
PAY 05	271	1	95	1	1	1	1	2	2	2	2	0	0	Mineralisation problem long bones?	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1		1	ANBN	
PAY 05	273	2	80	1	1	1	1	2	2	2	2	7	4	cervical OA, edentulous mandible	0	0	0	0	0	0	0	0	1	3 4 1	0	0	0	0	0	0	0	1	2	1	CU stain cranium
PAY 05	275	2	55	0	0	1	1	2	2	2	2	1	2	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	Int. adult sacrum			
PAY 05	277	2	60	1	1	1	1	2	0	2	0	0	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None			
PAY 05	279	2	95	1	1	1	1	2	2	2	2	1	0	Cribra orb.	0	0	0	0	0	0	0	0	0	0	0	1	100 1/2	0	0	0	0	1		1	None
PAY 05	281	1	95	2	1	1	1	2	1	2	2	3	0	TB with new bone on L posterior ilium, erosive rib lesions and new bone (healing), vertebral lesions. Amputated on R lower leg with	0	0	0	0	0	0	1	221 212	0	0	1	412	0	0	0	0	0	1	1,4	1	None

Site code	Content	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MNI	General comments						
														osteomyelitis. Osteomyelitis sternum/manubrium																	
PAY 05	283	2	90	2	1	1	1	2	2	2	2	7	3	Rampant caries, SN	0	0	0	0	0	0	0	0	0	0	1	1,2	1	Coffin plate adhering to skull			
PAY 05	286	3	55	1	1	1	0	2	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	1	None			
PAY 05	289	1	90	1	0	1	1	2	0	2	0	0	0	None	0	0	0	0	0	0	0	0	0	0	0	0	1	Pre-term			
PAY 05	292	2	95	2	1	1	1	2	2	2	2	7	4	None	0	0	0	0	0	0	0	0	0	0	1	1,2,3,4	1	None			
PAY 05	294	1	15	0	0	1	0	0	0	2	0	7	9	None	0	0	0	0	0	0	0	0	0	0	0	0	2	Int. humeral head - where is this material from?			
PAY 05	297	2	55	1	1	1	1	1	0	2	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	2	Int. adult hand			
PAY 05	299	1	95	1	1	1	1	2	2	2	2	3	0	Cribriform	0	0	0	0	0	0	0	0	0	0	1	100/1/2	0	1	3	1	Late adolescent
PAY 05	300	2	90	2	1	1	1	2	2	2	2	7	1	SN	0	0	0	0	0	0	0	0	0	0	1	1,2,3,5	2	Int. tibial epiphyses			
PAY 05	301	1	95	2	1	1	1	2	2	2	2	7	1	SN, OP. Cribriform	0	0	0	0	0	0	0	0	0	1	100/1/2	0	0	1	1,2,3,5,6	1	None
PAY 05	303	1	80	0	0	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None		
PAY 05	305	2	80	2	1	1	1	2	2	2	2	7	5	None	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3,5	1	None	

Site code	Conte xt	C on di ti on	% co mp let e	S k ul i	D en ti ti on	T or so	P el vis	L egs	F eet	A rms	H and s	A ge	S ex	Patholo gy com men ts	Neo plas tic	Circula tory	Con gen ital	Infectio n	Joint diseas e	Trauma	Metabolic / endocrine	Misc	Dental	MN I	General comments								
05																																	
PAY 05	307	1	30	0	0	1	0	0	0	1	0	1	0	None	0	0	0	0	0	0	0	0	0	0	1	None							
PAY 05	312	2	55	1	1	1	1	2	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	1	None							
PAY 05	313	1	95	2	1	1	1	2	0	2	2	7	1	Unhealed amputati on R femur, SN, IVD, visceral rib lesions (active), peg upper incisor. partial denture	0	0	0	0	0	0	0	0	0	0	1	1,2,3,5,6	3	paired feet presumable from someone elsel!? In. infant limbs.					
PAY 05	314	1	70	2	1	1	1	2	0	2	0	7	5	None	0	0	0	0	0	0	0	0	0	1	1,2	1	None						
PAY 05	315	1	95	2	1	1	1	2	2	2	2	7	5	None	0	0	0	0	0	0	0	0	0	1	1,4	1	None						
PAY 05	317	1	95	2	1	1	1	2	2	2	2	7	5	None	0	0	0	0	0	0	0	0	0	1	3	1	None						
PAY 05	319	2	90	1	1	1	1	2	2	2	2	1	0	Severe porotic hyperost osis, new bone in orbits	0	0	0	0	0	0	0	0	1	1	0 0 1 0	1	1	1	None				
PAY 05	324	2	90	2	1	1	1	2	2	2	2	7	1	SN, OP, cervical OA, Perthes with OA R hip, edentulo us	0	0	1	921	0	0	0	0	1	3 1 1	0	0	0	0	0	1	2	1	Wood adhering to cranium.

Site code	Content	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MNI	General comments			
PAY 05	326	1	20	1	1	0	0	0	0	0	0	2	0	None	0	0	0	0	0	0	0	0	0	0	1	1	1	HAIR. Cu stain occipital "poss Assoc with 303"
PAY 05	327	2	90	2	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	1	None
PAY 05	329	2	10	0	0	1	0	0	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	1	ANBN	
PAY 05	329	2	90	1	1	1	1	2	2	2	2	7	1	None	0	0	0	0	0	0	0	0	0	0	1	1,2,3,4	1	None
PAY 05	334	1	90	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	1	None
PAY 05	336	2	65	1	0	1	1	2	2	2	2	7	2	SN, OP	0	0	0	0	0	0	0	0	0	0	0	0	2	Int adult femora
PAY 05	336	1	35	2	1	1	1	0	0	0	0	7	1	edentulous	0	0	0	0	0	0	0	0	0	0	1	2	2	Int adult R ilium. Box says 2 of 2 but overlaps with previous 336? Could this be associated with 800?
PAY 05	338	2	35	0	0	1	1	2	0	1	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	3	Int. infant limbs and adult clavicle and sacrum
PAY 05	339	2	45	1	1	1	0	2	0	1	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	2	Int adult torso and R ulna	
PAY 05	342	1	95	2	1	1	1	2	2	2	2	7	1	Rampant caries, pipe notch, dental crowding	0	0	0	0	0	0	0	0	1	1	0	5	3	Int. infant tibia, (younger) humerus and ribs CU stain R wrist, young adult (clavicle fusing)

Site code	Content	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic		Circulatory		Congenital		Infection		Joint disease		Trauma		Metabolic / endocrine		Misc		Dental		MN I	General comments
															0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
PAY 05	344	2	95	1	1	1	1	2	2	2	2	7	1	SN, OP, IVD, tracheal rings	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1,2,3,4,5,6	1	CU stain cranium, WET
PAY 05	346	1	95	1	1	1	1	2	2	2	2	1	0	Active rickets	0	0	0	0	0	0	0	0	0	0	0	0	1	511	0	0	0	0	1	None
PAY 05	350	2	85	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	ANBN	
PAY 05	352	2	35	1	1	1	0	1	0	1	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	Int. various infant and adult elements "surface bone machined"	
PAY 05	353	1	75	0	0	1	1	2	2	2	2	7	1	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	356	1	95	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	357	3	85	1	1	1	1	2	2	2	2	1	0	early rickets?	0	0	0	0	0	0	0	0	0	0	0	1	511	0	0	0	0	1	None	
PAY 05	358	2	90	1	1	1	1	2	0	2	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	CU stain cranium	
PAY 05	360	2	60	1	1	1	0	0	0	2	0	1	0	Hypervascularity and slight sternal rib flaring. Early rickets?	0	0	0	0	0	0	0	0	0	0	0	1	511	0	0	0	0	2	"may be mixed with 410" Int neonate torso and limbs	
PAY 05	362	2	95	1	1	1	1	2	2	2	2	1	0	Early rickets?	0	0	0	0	0	0	0	0	0	0	0	1	511	0	0	1	1	1	None	
PAY 05	364	3	30	1	0	1	1	0	0	2	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None		
PAY 05	366	1	90	2	1	1	1	2	2	2	2	7	4	Rampant caries	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2	1	Young adult	

Site code	Content	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MNI	General comments													
PAY 05	368	2	90	2	1	1	1	2	2	2	2	7	1	Marginal osteophytes all joint surfaces of limbs, ossification of costal cart., proliferative new bone on muscle attachments, erosive arth with ank. both feet (Reiter's ??), ank T and L vert. (DISH)	0	0	0	0	0	0	0	0	0	0	0	0	1	3 2 2 3 4 1	0	0	0	0	0	0	1	2,6	1	None
PAY 05	374	3	75	1	1	1	1	2	0	2	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None			
PAY 05	378	2	95	2	1	1	1	2	2	2	2	7	2	OA feet, SN, IVD	0	0	0	0	0	0	0	0	0	0	0	0	1	3 1 1	0	0	0	0	0	0	1	1,2	1	CU stain R mandible
PAY 05	380	2	90	1	1	1	1	2	2	2	2	0	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None				
PAY 05	382	2	95	2	1	1	1	2	2	2	2	7	5	SN, visceral rib lesions (healed)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3,5	1	ANBN		
PAY 05	385	3	65	1	1	1	1	2	2	2	2	7	2	Cervical OA, ank T vert and rib, IVD	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2,3,5,6	2	Int adult C2	

Site code	Content	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MNI	General comments											
PAY 05	387	1	95	2	1	1	1	2	2	2	2	7	5	Hallux valgus (bilateral), OA R MT1, SN, OP	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	2	1	FE studs adhering to skull
PAY 05	390	2	75	1	0	1	1	2	2	2	2	7	1	SN, OP	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	390	2	70	2	1	1	1	2	2	2	2	7	4	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,5	1	CU stain mandible	
PAY 05	392	2	80	2	1	1	1	2	2	2	2	7	5	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2,3	1	None	
PAY 05	395	2	90	1	1	1	1	2	2	2	2	7	4	Hallux valgus (bilateral) with poss. Bunions and OA, Cervical OA with ank., OP, sinusitis, edentulous maxilla	0	0	0	0	1	1	211	1	3	1	1	0	0	0	0	0	0	1	2	1	Mandible appears V male	
PAY 05	397	2	90	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	CU stain R temporal		
PAY 05	399	2	80	0	0	1	1	2	2	2	2	7	2	Ost. Diss. R distal femur, sacralisation L5, visceral rib lesions (active)	0	0	1	911	1	0	1	211	1	3	2	1	0	0	0	0	0	0	0	0	2	Int. infant cranium
PAY 05	402	2	95	2	1	1	1	2	2	2	2	7	1	Rib#, sacro-iliac ank., SN, OP, cervical	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2,3	1	None	

Site code	Content	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MNI	General comments							
														OA																		
PAY 05	406	2	95	2	1	1	1	2	2	2	2	2	0	None	0	0	0	0	0	0	0	0	0	1	3	1	dentel staining					
PAY 05	408	2	95	2	1	1	1	2	2	2	2	7	4	SN	0	0	0	0	0	0	0	0	0	1	1,2,3,4,5	1	CU stain cranium, FE adhering cranium					
PAY 05	410	2	35	1	1	1	0	1	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	3	Three mixed infants inc. one pre-term "may be mixed with 360"						
PAY 05	412	2	15	1	0	0	0	0	0	0	0	7	1	None	0	0	0	0	0	0	0	0	0	0	1	None						
PAY 05	413	2	95	2	1	1	1	2	2	2	2	7	5	None	0	0	0	0	0	0	0	0	0	1	1,2,3	1	None					
PAY 05	417	2	40	1	0	1	0	1	0	2	0	1	0	expansion of humerus shaft ?Rickets ?infection	0	0	0	0	0	0	0	0	0	0	0	2	Two mixed infants					
PAY 05	419	1	65	1	1	1	0	0	0	1	0	1	0	None	0	0	0	0	0	0	0	0	0	0	1	Int. adult foot						
PAY 05	421	3	25	1	0	1	0	1	0	1	0	0	0	None	0	0	0	0	0	0	0	0	0	0	2	mixed adult and infant bone						
PAY 05	424	2	95	1	1	1	1	2	2	2	2	2	0	None	0	0	0	0	0	0	0	0	0	0	1	None						
PAY 05	426	1	95	2	1	1	1	2	2	2	2	7	5	SN, OP, cervical OA, healed rib#	0	0	0	0	0	0	1	0	1	4210	0	0	0	0	1	2,3,5	1	None
PAY 05	428	2	70	0	0	1	1	2	0	2	0	1	2	None	0	0	0	0	0	0	0	0	0	0	2	Int. older infant tibia and humerus						
PAY	430	2	35	1	1	0	0	2	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	1	None						

Site code	Content	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MNI	General comments								
PAY 05	432	2	65	1	1	1	1	2	0	0	1	1	0	None	0	0	0	0	0	0	0	0	0	0	3	Int. adult L fibula and neonate L femur							
PAY 05	434	2	70	1	1	1	1	2	0	2	0	1	0	Early rickets, bowed tibiae	0	0	0	0	0	0	0	0	0	0	2	Two mixed infants							
PAY 05	437	1	60	1	1	1	1	1	1	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	1	CU stain facial bones							
PAY 05	441	2	25	0	0	1	1	0	1	1	0	1	0	None	0	0	0	0	0	0	0	0	0	0	2	Int. adult vert. "Disartic from 423"							
PAY 05	442	2	45	1	1	1	1	1	0	1	0	7	9	Rib#, edentulous mandible, cervical OA	0	0	0	0	0	0	1	0	1	4210	0	0	0	0	0	0	3	Mixed adult torso, Int infant tibia	
PAY 05	443	2	80	1	1	1	1	2	0	2	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	1	None						
PAY 05	447	2	90	2	1	1	1	2	2	2	2	7	1	Cervical OA with ank., TMJ OA (bilateral), edentulous	0	0	0	0	0	0	1	3	1	1	0	0	0	0	0	1	2	1	None
PAY 05	449	2	70	2	1	1	1	2	2	2	2	7	5	Tarsal coalition L talus and calc. edentulous mandible	0	0	0	0	0	1	1	4	3	0	0	0	0	0	1	2	1	None	
PAY 05	451	3	80	1	1	1	1	2	2	2	2	7	5	OA R knee, cervical OA,	0	0	0	0	0	0	0	1	3	1	1	0	0	0	0	1	2	2	CU stain sternum and mandible, Int. subadult R humerus

Site code	Contxt	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MNI	General comments				
PAY 05	456	2	80	1	1	1	1	2	2	2	2	1	0	Complete mineralisation failure - rickets?	0	0	0	0	0	0	0	1	511	0	0	2	Int infant R forearm. "may belong to 432"		
PAY 05	460	2	95	2	1	1	1	2	2	2	2	7	1	SN	0	0	0	0	0	0	0	0	0	0	1	1,2,3,5,6	None		
PAY 05	463	2	50	1	1	1	1	2	0	1	0	3	0	None	0	0	0	0	0	0	0	0	0	0	0	1	None		
PAY 05	464	2	85	1	1	1	1	2	2	2	2	1	0	Sternal rib flaring	0	0	0	0	0	0	0	1	511	0	0	1	None		
PAY 05	466	1	95	2	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	1	HAIR. CU stain R parietal		
PAY 05	468	2	95	2	1	1	1	2	2	2	2	7	5	Corset deformation, visceral rib lesions (active), vert OA, tibial periostitis (healed), edentulous mandible	0	0	0	0	0	0	0	0	0	1	0	1	2	2	Int. infant scapula and femur
PAY 05	470	2	50	1	1	1	1	2	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	1	ANBN		
PAY 05	471	3	75	2	1	1	1	2	2	2	2	7	5	Tibial periostitis OP	0	0	0	0	0	0	0	0	0	0	1	1,2,5	1	None	
PAY 05	473	2	95	2	1	1	1	2	2	2	2	7	1	CDH R hip, SN	0	0	0	0	1	0	0	0	0	0	1	1,2,3,5	1	CU stain R ulna	
PAY 05	476	2	40	1	1	0	1	2	2	2	2	7	2	None	0	0	0	0	0	0	0	0	0	0	1	2	3	Int. adult L tibia, neonate L tibia "disarticulated skele"	

Site code	Conte xt	C on di ti on	% co mp let e	S k ul l	D en ti ti on	T or so	P el vis	L egs	F eet	A rms	H and s	A ge	S ex	Patholo gy com men ts	Neo plas tic	Circula tory	Con gen ital	Infectio n	Joint diseas e	Trauma	Metabolic / endocrine	Misc	Dental	MN I	General comments		
PAY 05	478	3	25	1	1	1	1	2	0	0	0	1	0	Severe rickets with disorganized cranial vault and trumpetin g	0	0	0	0	0	0	0	1	511	0	0	1	None
PAY 05	481	3	5	1	0	0	0	0	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	482	2	20	1	0	0	0	0	1	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	484	2	80	1	1	1	1	1	0	2	0	1	0	None	0	0	0	0	0	0	0	0	0	1	1	1	None
PAY 05	486	2	95	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	1	WET	
PAY 05	488	2	95	1	1	1	1	2	2	2	2	0	0	None	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	489	2	95	2	1	1	1	2	2	2	2	7	5	SBO, SN, poss. Corset def.	0	0	0	0	1	0	0	0	1	0	2	Int. adult feet, pair radii. Young adult	
PAY 05	493	2	85	0	1	1	1	2	2	2	2	3	0	None	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	495	2	50	1	1	1	1	1	0	0	0	0	0	None	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	497	2	95	2	1	1	1	2	2	2	2	7	5	SN, dental staining	0	0	0	0	1	0	0	0	1	0	1	None	
PAY 05	500	2	90	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	502	1	95	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	3	Int adult mandible and cranial frags, int infant craniotomy	
PAY 05	506	1	95	2	1	1	1	2	2	2	2	7	4	None	0	0	0	0	0	0	0	0	0	1	1,2,3,5,6	None	
PAY 05	508	2	35	1	0	1	0	1	0	1	0	0	0	None	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	509	2	95	1	1	1	1	2	1	2	1	0	0	None	0	0	0	0	0	0	0	0	0	0	1	None	

Site code	Conte xt	C o n d i t i o n	% c o m p l e t e	S k u l l	D e n t i t i o n	T o r s o	P e l v i s	L e g s	F e e t	A r m s	H a n d s	A g e	S e x	Patholo gy commen ts	Neo plas tic	Circula tory	Con geni tal	Infectio n	Joint diseas e	Trauma	Metabolic / endocrine	Misc	Dental	MN I	General comments								
05																																	
PAY 05	511	2	75	1	1	1	1	1	0	2	0	0	0	None	0	0	0	0	0	0	0	0	0	0	1	1010	0	0	0	0	1	None	
PAY 05	516	2	80	1	1	1	1	2	0	2	2	0	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	518	2	20	1	0	0	0	0	0	0	0	7	9	Sinusitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	519	2	10	1	0	0	0	0	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	Int. adult maxilla		
PAY 05	520	1	95	2	1	1	1	2	1	2	2	7	2	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	3	1	ANBN. HAIR. CU stain sternum, temporals	
PAY 05	525	1	95	2	1	1	1	2	2	2	2	3	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	527	1	95	2	1	1	1	2	2	2	2	7	1	SN, ossified thyroid cart.	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1,2,3,5	1	None	
PAY 05	530	3	50	2	1	1	1	2	0	2	2	7	4	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3	1	None	
PAY 05	531	2	80	1	1	1	1	2	0	2	0	1	0	early (active) rickets with cranial lesions	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None
PAY 05	533	2	15	1	0	0	0	0	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	536	3	50	1	1	1	1	2	2	2	2	7	9	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2	1	None	
PAY 05	538	1	95	2	1	1	1	2	2	2	2	7	1	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3,4,5	1	None	
PAY 05	541	2	65	2	1	0	1	2	2	2	2	7	1	bilateral hallux valgus	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2,3,5	1	None
PAY 05	543	2	50	1	0	1	1	2	2	2	2	7	9	SN	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	544	2	85	2	1	1	1	2	2	2	2	7	5	Cervical OA, SN, OP, OA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3,5	1	ANBN. Masculine skull

Site code	Content	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MNI	General comments					
														R hip																
PAY 05	547	2	95	2	1	1	1	2	2	2	2	7	3	SN	0	0	0	0	0	0	0	0	0	0	0	1	3	1	None	
PAY 05	551	2	90	2	1	1	1	2	2	2	2	7	5	None	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3,5,6	1	None	
PAY 05	553	2	90	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	554	1	95	1	1	1	1	2	2	2	2	2	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	556	1	15	0	0	0	0	2	0	2	0	7	9	None	0	0	0	0	0	0	0	0	0	0	0	0	0	2	Int. infant L humerus	
PAY 05	559	1	95	1	1	1	1	2	2	2	2	2	0	None	0	0	0	0	0	0	0	0	0	0	0	1	1	1	None	
PAY 05	560	1	95	2	1	1	1	2	2	2	2	7	2	None	0	0	0	0	0	0	0	0	0	0	0	1	1	1	Young adult	
PAY 05	563	2	95	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	565	1	95	2	1	1	1	2	2	2	2	7	4	None	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3,5	1	None	
PAY 05	567	2	95	2	1	1	1	2	2	2	2	2	0	None	0	0	0	0	0	0	0	0	0	0	0	1	1,3	1	None	
PAY 05	572	2	95	1	1	1	1	2	2	2	2	1	0	Cribriform orb.	0	0	0	0	0	0	0	0	0	0	0	1	1	1	None	
PAY 05	573	2	95	2	1	1	1	2	2	2	2	7	4	SN	0	0	0	0	0	0	0	0	0	0	0	1	2	1	None	
PAY 05	574	2	95	2	1	1	1	2	2	2	2	7	2	cervical OA	0	0	0	0	0	0	0	0	0	0	0	1	2,6	1	None	
PAY 05	577	2	20	2	1	0	0	0	0	0	0	7	4	Edentulous maxilla	0	0	0	0	0	0	0	0	0	0	0	1	2	2	Int. infant limbs	
PAY 05	579	2	95	2	1	1	1	2	2	2	2	7	5	Complete ossification of costal cart., possible TB lesion anterior L vert.	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3,5,6	1	None

Site code	Context	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MNI	General comments				
PAY 05	580	2	10	1	0	0	0	0	0	0	0	1	2	0	None	0	0	0	0	0	0	0	0	0	0	3	Collection of mixed adult and juvenile bone within 580		
PAY 05	581	2	35	1	1	1	1	0	0	2	0	1	2	0	None	0	0	0	0	0	0	0	0	0	0	1	None		
PAY 05	582	2	50	1	1	1	0	1	0	2	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	1	None		
PAY 05	583	2	35	1	1	1	1	1	1	0	0	2	0	None	0	0	0	0	0	0	0	0	0	0	0	2	Int. infant tibia		
PAY 05	585	2	5	1	0	0	0	0	0	0	0	1	2	0	None	0	0	0	0	0	0	0	0	0	0	2	infant frontal int. adult mandible		
PAY 05	587	1	95	2	1	1	1	2	2	2	2	7	4	cervical OA, S, ank C2-3, codfish vert	0	0	0	0	0	0	0	1	531	0	0	1	1,2,3,5,6	1	None
PAY 05	590	1	95	2	1	1	1	2	2	2	2	7	4	Corset def.	0	0	0	0	0	0	0	0	0	1	0	1	1,2,3,5	2	Int infant calcaneum. CU stain L mandible
PAY 05	594	2	95	2	1	1	1	2	2	2	2	7	4	cervical OA	0	0	0	0	0	0	0	0	0	0	0	1	2	1	None
PAY 05	596	2	95	2	1	1	1	2	2	2	2	7	1	L MT2 large bone cyst. Cervical OA, OP, SN, IVD	1	0	0	0	0	0	0	0	0	0	0	1	2,3,5	1	Loose teeth labelled 565
PAY 05	598	2	35	1	1	1	1	1	0	1	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	2	Int. infant tibia	
PAY 05	600	3	20	0	0	1	1	0	0	1	0	1	2	None	0	0	0	0	0	0	0	0	0	0	0	0	1	"disartic. From cut"	
PAY 05	601	2	30	0	0	1	1	2	2	1	1	7	4	TB with septic arthropathy R sacro-ilia,	0	0	0	0	0	0	0	0	0	0	0	0	0	2	Mixed with infant (1) with severe rickets

Site code	Conte xt	C on di ti on	% co mp let e	S k ul l	D en ti ti on	T or so	P el vis	L egs	F ee t	A rms	H and s	A ge	S ex	Patholo gy com men ts	Neo plas tic	Circula tory	Con geni tal	Infectio n	Joint diseas e	Trauma	Metabolic / endocrine	Misc	Dental	MN I	General comments		
														cervical destructi ons and ank.													
PAY 05	602	2	15	0	0	0	0	1	1	0	1	7	9	None	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	604	2	60	1	1	1	0	1	0	1	0	0	0	None	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	605	2	30	1	1	0	0	2	1	1	0	2	0	None	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	608	3	80	2	1	1	1	2	2	2	2	7	1	Rotator cuff R humerus, vert. OA with ank, IVD, edentulo us mandible	0	0	0	0	0	0	0	0	0	1	2	1	CU stain cranium, ANBN
PAY 05	611	1	95	2	1	1	1	2	2	2	2	7	5	None	0	0	0	0	0	0	0	0	0	1	3	Int. Male R ilium, neonate parietal	
PAY 05	612	1	80	1	1	1	1	2	2	2	2	3	0	None	0	0	0	0	0	0	0	0	0	1	3	CU stain L ulna	
PAY 05	616	3	80	0	0	1	1	2	2	2	2	7	4	None	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	618	2	40	1	1	1	1	2	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	3	Two mixed infants. Int. adult vert		
PAY 05	621	2	85	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	623	2	60	1	0	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	3	"disassociated bone from 522" Two mixed infants. Adult mandible, scapula and MT1		
PAY 05	625	3	25	0	0	1	1	2	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	1	None		

Site code	Conte xt	C on d i t i o n	% c o m p l e t e	S k u l l	D e n t i t i o n	T o r s o	P e l v i s	L e g s	F e e t	A r m s	H a n d s	A g e	S e x	Patholo gy commen ts	Neo plas tic	Circula tory	Con geni tal	Infectio n	Joint diseas e	Trauma	Metabolic / endocrine	Misc	Dental	MN I	General comments							
PAY 05	626	1	15	0	0	0	1	0	0	1	0	7	5	None	0	0	0	0	0	0	0	0	0	0	1	None						
PAY 05	627	1	95	2	1	1	1	1	1	1	1	7	1	SN, OP, IVD, cervical ank	0	0	0	0	1	0	0	0	0	1	1,2,3,5,6	1	None					
PAY 05	629	2	15	2	1	0	0	0	0	0	0	7	1	None	0	0	0	0	0	0	0	0	0	1	2,6	1	None					
PAY 05	630	1	95	2	1	1	1	2	2	2	2	7	3	None	0	0	0	0	0	0	0	0	0	0	0	1	None					
PAY 05	633	2	35	1	1	1	0	0	0	1	1	7	1	None	0	0	0	0	0	0	0	0	0	1	2,3	1	None					
PAY 05	634	1	95	2	1	1	1	2	2	2	2	7	5	Potts spine with rib def. Osteitis rib heads and vert, ost. Dissecans, femoral heads	0	0	1	911	0	0	1	221	0	0	1	100 1/2	0	0	1	1,2,4,6	1	Young adult. FE nail adhering R ulna
PAY 05	635	1	95	2	1	1	1	2	2	2	2	7	5	visceral rib lesions (active)	0	0	0	0	0	0	0	0	0	0	1	1,2,5,6	1	None				
PAY 05	638	2	90	1	1	1	1	2	2	2	2	2	0	Cribr a orb.	0	0	0	0	0	0	0	0	0	1	100 1/2	0	0	1	1	2	Int. adult vertebrae	
PAY 05	640	2	80	1	1	1	1	2	0	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	1	None				
PAY 05	643	2	60	1	1	1	1	2	2	2	2	1	2	None	0	0	0	0	0	0	0	0	0	0	0	0	2	Mixed with 645				
PAY 05	645	2	60	1	1	1	1	2	2	2	2	1	2	None	0	0	0	0	0	0	0	0	0	0	0	0	2	Mixed with 643				
PAY 05	647	2	90	2	1	1	1	2	2	2	2	7	4	SN	0	0	0	0	0	0	0	0	0	1	100 1/2	0	0	1	1,2,3,5	1	None	
PAY 05	650	1	95	2	1	1	1	2	2	2	2	7	1	None	0	0	0	0	0	0	0	0	0	1	3	1	CU stain R radius					
PAY 05	652	1	75	0	0	1	1	2	2	2	2	7	1	SN, tibial periostitis	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None			

Site code	Content	Condition	% complete	Skull	Dentition	Torsio	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic		Circulatory		Congenital		Infection		Joint disease		Trauma		Metabolic / endocrine		Misc		Dental		MN I	General comments						
															0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			0	0	0	0	0	0
PAY 05	653	2	90	1	1	1	1	2	2	2	2	7	5	Hallux valgus (bilateral)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	1	None						
PAY 05	657	1	95	2	1	1	1	2	2	2	2	7	5	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	Int Male head						
PAY 05	659	2	95	2	1	1	1	2	2	2	2	7	1	Hallux valgus R MT1, SN	0	0	0	0	1	1	4	3	0	0	0	1	0	0	0	0	0	0	1	1,2	1	None				
PAY 05	661	3	70	2	1	1	1	2	2	2	2	7	4	Tarsal coalition R talus and calcaneus	0	0	0	0	1	1	4	3	0	0	0	0	0	0	0	0	0	1	1,2	1	Coffin plate adhering to skull					
PAY 05	663	1	45	1	1	0	0	1	2	1	1	7	2	Hallux valgus L MT1	0	0	0	0	1	1	4	3	0	0	0	0	0	0	0	0	0	1	3	1	Skull and post cranial associated?					
PAY 05	664	2	95	2	1	1	1	2	2	2	2	7	4	SN	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,3,4	1	None						
PAY 05	666	2	55	2	1	1	1	0	0	2	2	7	5	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,5	1	None						
PAY 05	668	1	65	0	0	0	1	2	2	2	2	7	5	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None						
PAY 05	669	2	90	1	1	1	1	2	2	2	2	2	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	CU stain cranium						
PAY 05	680	2	90	2	1	1	1	2	2	2	2	7	1	OA R hip (CDH?), R+L MT1, OA vert with ank. Sacral#? Osteomyelitis S4+5	0	0	0	0	1	1	4	3	2	1	212	1	3	1	1	4210	0	0	0	0	0	0	1	2,3,5	1	Feet stained black
PAY 05	681	2	25	0	0	1	0	1	0	1	0	7	9	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	Int. Infant L femur and petrous temporal. "disartic bone from 429"						

Site code	Conte xt	C on di ti on	% co mp le te	S k ul	D en ti ti on	T or so	P el vis	L egs	F eet	A rms	H and s	A ge	Sex	Patholo gy commen ts	Neo plas tic	Circula tory	Con gen ital	Infectio n	Joint diseas e	Trauma	Metabolic / endocrine	Misc	Dental	MN I	General comments					
PAY 05	683	2	85	2	1	1	1	2	2	2	2	7	5	OA R knee, carpals, sacralisat ion L5, cervical OA, OP, IVD, edentulo us	0	0	0	0	1	3 1 1	0	0	0	0	0	0	1	2	1	HAIR
PAY 05	686	1	90	2	1	1	1	2	2	2	2	7	4	Slight (bilateral) hallux valgus?	0	0	0	0	1	1 4 3 0	0	0	0	0	0	0	1	1,2,3	1	None
PAY 05	686	2	20	0	0	1	0	0	0	0	0	7	9	None	0	0	0	0	0	0	0	0	0	0	0	0	0	1	Where's the rest of it!?	
PAY 05	688	2	70	1	1	1	1	2	1	0	0	0	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	691	1	95	2	1	1	1	2	2	2	2	7	2	Hallux valgus (bilateral) with poss. Bunions, SN, OP	0	0	0	0	1	1 4 3 0	0	0	0	0	0	0	1	1,2,3,4, 5,6	1	None
PAY 05	692	3	70	1	1	1	0	2	1	2	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None	
PAY 05	694	1	95	2	1	1	1	2	2	2	2	7	1	Hallux valgus (bilateral) with bunions, SN, OP	0	0	0	0	1	1 4 3 0	0	0	0	0	0	0	1	1,2,5	1	None
PAY 05	696	1	95	2	1	1	1	2	2	2	2	7	5	Cervical OA, SN, OP, edentulo us	0	0	0	0	0	0	0	0	0	0	0	0	1	2	1	None
PAY 05	697	1	75	2	1	1	1	1	0	2	0	7	1	Tibial periostitis , SN, osteitis frontal	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3	1	Radiograph

Site code	Content	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MNI	General comments					
PAY 05	698	2	30	1	0	0	1	2	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	1	None				
PAY 05	701	1	95	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	1	100 1/2	0	0	1	CU stain cranium			
PAY 05	702	3	95	1	1	1	1	2	2	2	2	7	1	Paget's skull, vert, pelvis, scapulae	1	0	0	0	0	0	0	0	1	0	1	1	050	None		
PAY 05	706	2	95	2	1	1	1	2	2	2	2	7	1	None	0	0	0	0	0	0	0	0	0	0	1	1,2,3,5	1	Small adult		
PAY 05	708	3	10	0	0	0	0	2	0	0	0	0	0	None	0	0	0	0	0	0	0	0	0	0	0	0	1	None		
PAY 05	710	2	90	2	1	1	1	2	2	2	2	7	1	Hallux valgus (bilateral), SN, teeth highly polished	0	0	0	0	1	1	0	0	0	0	1	1,2,5,6	1	None		
PAY 05	713	2	50	1	1	1	1	1	0	1	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	3	Int. adult torso and neonate limbs		
PAY 05	717	2	95	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	1	100 1/2	0	0	1	1	None		
PAY 05	721	1	95	2	1	1	1	2	2	2	2	7	5	IVD	0	0	0	0	0	0	0	0	0	1	2,3,5	1	None			
PAY 05	725	2	90	1	1	1	1	2	2	2	2	7	5	Cervical OA, SN, pachionian depression perforating R parietal, sinusitis	0	0	0	0	0	0	0	0	0	0	1	0	1	1,2,5,6	1	None
PAY 05	727	2	80	1	1	1	1	2	2	2	2	7	5	SN, ank T vert x2, edentulous mandible	0	0	0	0	0	0	0	0	0	0	0	0	1	2	1	None
PAY	729	3	15	1	0	0	1	1	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	1	None		

Site code	Conte xt	Co ndi tion	% co mple te	Skul l	De nti tion	To rso	Pe lvis	Le gs	Fee t	Ar ms	Ha nds	Age	Sex	Patholo gy com men ts	Neo plas tic	Circula tory	Con geni tal	Infectio n	Joint diseas e	Trauma	Metabolic / endocrine	Misc	Dental	MN I	General comments														
05												2																											
PAY 05	731	2	95	1	1	1	1	2	2	2	2	7	5	poss. Mycotic infection T7-S3 and L shoulder (diff. TB), secondary OA	0	0	0	0	0	0	0	0	0	0	1	230	1	3 1 1	0	0	0	0	0	0	0	1	2,3,5	1	ANBN, "poss. mixing with 697"
PAY 05	733	1	20	1	0	1	0	0	0	1	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None		
PAY 05	736	2	35	1	1	1	0	0	0	1	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None		
PAY 05	738	2	95	2	1	1	1	2	2	2	2	7	4	SN, cervical OA	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	2,3	1	None	
PAY 05	742	1	95	1	1	1	1	2	2	2	2	2	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None			
PAY 05	744	2	10	1	0	0	0	0	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	ANBN			
PAY 05	746	2	95	2	1	1	1	2	2	2	2	7	1	Visceral rib lesions (healed), sinusitis, TB - osteomyelitis ribs (healed), Pott's spine, SN	0	0	0	0	0	0	0	0	0	1	221 211	1	0	0	0	0	0	0	0	0	0	1	1,2,3	1	None
PAY 05	755	2	45	2	1	0	0	2	0	1	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	CU stain cranium			
PAY 05	756	2	65	2	1	1	1	2	2	2	2	7	4	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3,4, 5,6	2	Int infant tibia			
PAY 05	757	2	95	2	1	1	1	2	2	2	2	7	1	SN, OP,	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	2,3,5	1	None		
PAY 05	761	1	95	2	1	1	1	2	2	2	2	3	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,3,6	1	None			
PAY 05	763	1	20	2	1	0	0	0	0	0	0	7	1	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2,6	1	None			

Site code	Content	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MNI	General comments											
PAY 05	764	2	90	1	1	1	1	2	2	2	2	7	1	None	0	0	0	0	0	0	0	0	0	1	1,2	1	None									
PAY 05	767	1	95	2	1	1	1	2	2	2	2	7	1	None	0	0	0	0	0	0	0	0	0	1	1,2	1	HAIR, CU stains cranium, WET									
PAY 05	768	2	50	1	1	1	1	2	0	1	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	2	Int. adult clavicle "may be from 761"									
PAY 05	769	3	10	0	0	0	0	0	0	1	0	7	9	None	0	0	0	0	0	0	0	0	0	0	0	3	"DISARTIC" from adult, sub-adult and neonate									
PAY 05	771	2	95	1	1	1	1	2	2	2	2	3	0	None	0	0	0	0	0	0	0	0	0	0	0	1	None									
PAY 05	773	1	95	2	1	1	1	2	2	2	2	7	1	Hallux valgus (bilateral), SN, visceral rib lesions (active)	0	0	0	0	1	1	1	211	1	0	0	0	0	1	1,2,3,4,5	1	Fe object adhering to teeth.					
PAY 05	775	1	95	2	1	1	1	2	2	2	2	7	5	L tibia and fibula periostitis, corset deformity, bilateral rib#s	0	0	0	0	0	0	0	1	211	0	0	1	4210	0	0	0	0	0	1	2	1	CU stain cranium
PAY 05	776	2	45	1	0	1	0	1	0	1	0	1	2	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	Int. adult manubrium					
PAY 05	778	2	95	2	1	1	1	2	2	2	2	7	3	SN, OP	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1,2,3,4,5,6	1	None				
PAY 05	781	2	90	2	1	1	1	2	2	2	2	7	5	Cervical OA, TMJ OA	0	0	0	0	0	0	0	0	1	3	1	1	0	0	0	1	1,2,3,4,5	2	Int adult R femur, CU stain manubrium			
PAY 05	783	2	70	0	1	1	1	2	2	2	2	7	5	None	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,5	1	None					
PAY 05	786	2	80	1	1	1	1	2	0	1	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None					

Site code	Content	Condition	% complete	Skull	Dentition	Torsion	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic		Circulatory		Congenital		Infection		Joint disease		Trauma		Metabolic / endocrine		Misc		Dental		MNI	General comments		
PAY 05	786	3	5	0	0	0	0	1	0	0	0	0	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None		
PAY 05	789	1	95	2	1	1	1	2	2	2	2	7	5	Hallux valgus, corset deformity (ribs), SN, rampant caries, SBO	0	0	0	0	1	1	4	3	0	0	1	0	0	0	0	0	1	0	1	1,2,3,5,6	2	Int, humeral epiphyses
PAY 05	791	1	95	2	1	1	1	2	2	2	2	7	1	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3,5	1	None		
PAY 05	794	2	10	1	0	1	0	0	0	0	0	1	2	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	mixed adult and infant bone		
PAY 05	797	2	90	2	1	1	1	2	2	2	2	7	2	SN, OP, sacralisation L5	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	1	1,2	1	None		
PAY 05	800	1	95	2	1	1	1	2	2	2	2	7	1	SN, craniotomy, rib cut, healed dental fracture	0	0	0	0	0	0	0	0	0	0	1	0	1	41, 436	0	0	0	0	1	2,3,4	1	Young adult
PAY 05	801	1	80	0	0	1	1	2	2	2	2	0	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	ANBN		
PAY 05	803	2	20	1	1	0	0	0	0	0	0	2	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	Int. infant skull		
PAY 05	803	2	75	0	0	1	1	2	2	2	2	1	2	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	Younger individual, mixed with 819		
PAY 05	806	1	25	0	0	0	1	2	0	0	0	0	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None		
PAY 05	809	2	45	1	1	1	0	0	0	1	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	CU stain parietals		
PAY 05	812	2	15	1	0	0	0	0	0	0	0	1	2	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None		
PAY 05	813	2	95	2	1	1	1	2	2	2	2	7	1	SN, OP	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	2,3	1	black staining on teeth		

Site code	Context	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MNI	General comments					
PAY 05	832	2	95	2	1	1	1	2	2	2	2	7	1	R fibula#, OA L elbow, Colles # R radius and ulna, bilateral hallux valgus, SN, OP	0	0	0	0	1	3	1	4210	0	0	0	0	1	2	1	None
PAY 05	833	2	95	2	1	1	1	2	2	2	2	7	5	SN	0	0	0	0	1	0	0	0	0	1	1,2,3,4,5,6	1	None			
PAY 05	836	2	35	1	1	0	0	2	0	0	0	1	0	None	0	0	0	0	0	0	0	1	100	0	0	0	0	2	Int. infant tibia	
PAY 05	838	1	95	2	1	1	1	2	2	2	2	7	5	None	0	0	0	0	0	0	0	0	0	1	1,3	1	CU stain cranium			
PAY 05	840	2	95	1	1	1	1	2	2	2	2	7	5	SN, corset deformity	0	0	0	0	0	0	0	0	0	1	1,2,4	1	None			
PAY 05	842	2	95	1	1	1	1	2	2	2	2	3	0	None	0	0	0	0	0	0	0	0	0	1	3	1	None			
PAY 05	844	1	95	2	1	1	1	2	2	2	2	7	1	SN	0	0	0	0	1	0	0	0	0	1	1,2,6	1	FE nail adhering to R patella, CU stain L mandible			
PAY 05	846	1	95	2	1	1	1	2	2	2	2	7	1	# dislocation R elbow, secondary OA, SN, edentulous	0	0	0	0	1	3	1	4210	0	0	0	0	1	2	2	Int. adult vertebrae
PAY 05	848	2	70	1	1	1	1	2	0	2	0	0	0	None	0	0	0	0	0	0	0	0	0	0	0	0	1	None		
PAY 05	849	2	80	2	1	1	1	2	2	2	2	7	5	SN	0	0	0	0	1	0	0	0	0	0	1	1,2	1	None		
PAY 05	852	2	85	1	1	1	1	2	0	0	0	0	0	None	0	0	0	0	0	0	0	0	0	0	0	0	1	None		
PAY 05	855	3	60	1	0	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	2	Int. infant femur		

Site code	Conte xt	C on d i t i o n	% co mp l e t e	S k u l	D e n t i t i o n	T o r s o	P e l v i s	L e g s	F e e t	A r m s	H a n d s	A g e	S e x	Patholo gy commen ts	Neo plas tic	Circula tory	Con geni tal	Infectio n	Joint diseas e	Trauma	Metabolic / endocrine	Misc	Dental	MN I	General comments										
PAY 05	858	1	95	2	1	1	1	2	2	2	2	7	1	edentulo us maxilla, SN, conjoine d ribs x2	0	0	0	0	1	0	0	0	0	1	2	1	CU stain R zygomatic								
PAY 05	861	2	95	2	1	1	1	2	2	2	2	7	1	Bilateral hallux valgus with secondar y OA, SN, OP (?DISH), flattened parietals	0	0	0	0	1	1 4 3 0	0	0	1	3 1 1	0	0	0	0	1	2,3,5,6	1	Cu stain cranium			
PAY 05	863	2	95	2	1	1	1	2	2	2	2	7	5	Visceral rib lesions (healed)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3,5	1	CU stain manubrium			
PAY 05	865	1	50	0	0	1	1	2	0	2	0	7	5	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None				
PAY 05	865	2	50	2	1	1	1	0	2	0	2	7	5	SN	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3	1	None			
PAY 05	868	2	60	1	1	1	1	2	0	1	0	0	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None				
PAY 05	870	1	85	1	1	1	1	2	2	2	2	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None				
PAY 05	872	2	45	1	1	1	0	0	0	1	1	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None				
PAY 05	873	2	90	2	1	1	1	2	2	-2	2	7	5	SN	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3,5	1	None			
PAY 05	875	2	95	2	1	1	1	2	2	2	2	7	5	OA L knee, SN, OP, cervical OA	0	0	0	0	0	0	0	0	0	1	3 1 1	0	0	0	0	0	0	1	1,2,3,6	1	None
PAY 05	877	3	80	1	1	1	1	2	2	2	2	7	3	MT3# (healing), SN	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,3,5	1	None		
PAY 05	882	2	20	0	0	0	0	2	2	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	None				
PAY 05	884	2	95	2	1	1	1	2	2	2	2	7	1	cervical	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1,2,5	1	None		

Site code	Content	Condition	% complete	Skull	Dentition	Torso	Pelvis	Legs	Feet	Arms	Hands	Age	Sex	Pathology comments	Neoplastic	Circulatory	Congenital	Infection	Joint disease	Trauma	Metabolic / endocrine	Misc	Dental	MN 1	General comments		
05														OA													
PAY 05	329 /30 7/2 44	2	55	1	1	1	1	1	0	0	0	2	0	None	0	0	0	0	0	0	0	0	0	0	0	3	Three mixed sub-adults
PAY 05	452 -3	2	25	1	1	1	1	1	0	0	0	1	0	None	0	0	0	0	0	0	0	0	0	0	0	2	HAIR. Mixed adult and juvenile
PAY 05	489 /47 6	2	15	0	0	0	0	1	0	1	0	7	9	None	0	0	0	0	0	0	0	0	0	0	2	disartic with infant skull and torso	

16 Appendix 4 Accessioned finds

Site	Context	Acc.no	Material	Object	Period	Complete	Comments
PAY05	123.0	155	BONE	BUTT	PM	W	
PAY05	301.0	156	BONE	BUTT	PM	W	
PAY05	100.0	141	CERA	PIPE	PM	W	MAKERS MARK
PAY05	100.0	140	COMP	BROO	PM	W	COPP BROOCH
PAY05	142.0	76	COMP	COFF	PM	W	COFF IRON HAND & LEAD GRIP PLATE
PAY05	142.0	90	COMP	COFF	PM	H	COFF IRON HAND & LEAD GRIP PLATE
PAY05	165.0	87	COMP	COFF	PM	H	COFF IRON HAND & LEAD GRIP PLATE
PAY05	171.0	105	COMP	COFF	PM	H	COFF IRON HAND & LEAD GRIP PLATE
PAY05	196.0	104	COMP	COFF	PM	H	COFF IRON HAND & LEAD GRIP PLATE
PAY05	325.0	88	COMP	COFF	PM	H	COFF IRON HAND & LEAD GRIP PLATE
PAY05	349.0	40	COMP	COFF	PM	W	COFF IRON HAND & LEAD GRIP PLATE
PAY05	386.0	96	COMP	COFF	PM	H	COFF IRON HAND & LEAD GRIP PLATE
PAY05	454.0	53	COMP	COFF	PM	W	COFF IRON HAND & LEAD GRIP PLATE
PAY05	469.0	97	COMP	COFF	PM	H	COFF IRON HAND & LEAD GRIP PLATE
PAY05	673.0	170	COMP	COFF	PM	W	LEAD NAME PLATE & IRON NAIL
PAY05	675.0	166	COMP	COFF	PM	W	LEAD NAME PLATE & IRON NAIL
PAY05	678.0	64	COMP	COFF	PM	H	COFF IRON HAND & LEAD GRIP PLATE
PAY05	678.0	172	COMP	COFF	PM	W	COPPER NAME-PLATE & FIBR
PAY05	703.0	51	COMP	COFF	PM	W	COFF IRON HAND & LEAD GRIP PLATE
PAY05	785.0	50	COMP	COFF	PM	W	COFF IRON HAND & LEAD GRIP PLATE
PAY05	814.0	94	COMP	COFF	PM	H	COFF IRON HAND & LEAD GRIP PLATE
PAY05	814.0	95	COMP	COFF	PM	H	COFF IRON HAND & LEAD GRIP PLATE
PAY05	818.0	42	COMP	COFF	PM	W	COFF IRON HAND & LEAD GRIP PLATE
PAY05	574.0	157	COMP	COMB	PM	W	TORTOISESHELL COMB & IRON PIN
PAY05	100.0	139	COMP	RING	PM	W	COPP FINGER RING
PAY05	538.0	137	COPP	BRAC	PM	H	
PAY05	113.0	150	COPP	BUTT	PM	W	
PAY05	210.0	160	COPP	COFF	PM	W	NAME PLATE
PAY05	236.0	167	COPP	COFF	PM	W	NAME PLATE
PAY05	325.0	142	COPP	COFF	PM	H	
PAY05	515.0	52	COPP	COFF	PM	H	COFF HAND

Site	Context	Acc.no	Material	Object	Period	Complete	Comments
PAY05	867.0	24	COPP	COFF	PM	W	COFF WASHER
PAY05	867.0	25	COPP	COFF	PM	W	COFF WASHER
PAY05	867.0	26	COPP	COFF	PM	W	COFF HAND
PAY05	100.0	127	COPP	COIN	PM	W	
PAY05	229.0	124	COPP	COIN	PM	W	
PAY05	229.0	132	COPP	COIN	PM	W	
PAY05	410.0	129	COPP	COIN	PM	W	
PAY05	437.0	131	COPP	COIN	PM	W	
PAY05	511.0	130	COPP	COIN	PM	W	
PAY05	557.0	126	COPP	COIN	PM	W	
PAY05	559.0	128	COPP	COIN	PM	W	
PAY05	100.0	122	COPP	PIN	PM	H	SHROUD PIN
PAY05	123.0	121	COPP	PIN	PM	W	SHROUD PIN
PAY05	146.0	118	COPP	PIN	PM	W	SHROUD PIN
PAY05	363.0	111	COPP	PIN	PM	W	SHROUD PIN
PAY05	444.0	110	COPP	PIN	PM	W	SHROUD PIN
PAY05	451.0	117	COPP	PIN	PM	W	SHROUD PIN
PAY05	484.0	114	COPP	PIN	PM	W	SHROUD PIN
PAY05	506.0	119	COPP	PIN	PM	W	SHROUD PIN
PAY05	631.0	107	COPP	PIN	PM	W	SHROUD PIN
PAY05	634.0	113	COPP	PIN	PM	W	SHROUD PIN
PAY05	670.0	116	COPP	PIN	PM	H	SHROUD PIN
PAY05	717.0	112	COPP	PIN	PM	H	SHROUD PIN
PAY05	762.0	115	COPP	PIN	PM	H	SHROUD PIN
PAY05	763.0	108	COPP	PIN	PM	W	SHROUD PIN
PAY05	767.0	120	COPP	PIN	PM	H	SHROUD PIN
PAY05	814.0	109	COPP	PIN	PM	W	SHROUD PIN
PAY05	451.0	136	COPP	RING	PM	W	
PAY05	460.0	138	COPP	RING	PM	W	
PAY05	816.0	133	COPP	RING	PM	W	
PAY05	634.0	143	COPP	WIRE	PM	H	
PAY05	263.0	135	COPP	ZZZ	PM	H	
PAY05	299.0	151	COPP	ZZZ	PM	H	
PAY05	437.0	145	COPP	ZZZ	PM	W	
PAY05	437.0	146	COPP	ZZZ	PM	W	
PAY05	640.0	144	COPP	ZZZ	PM	W	
PAY05	683.0	125	COPP	ZZZ	PM	W	TOKEN
PAY05	781.0	123	COPP	ZZZ	PM	W	WATERLOO TEETH DENTURES
PAY05	557.0	149	GLAS	BUTT	PM	W	
PAY05	560.0	148	GLAS	BUTT	PM	W	
PAY05	114.0	27	IRON	COFF	PM	W	COFF HAND
PAY05	115.0	38	IRON	COFF	PM	W	COFF HAND
PAY05	119.0	72	IRON	COFF	PM	W	COFF HAND
PAY05	124.0	78	IRON	COFF	PM	W	COFF HAND
PAY05	126.0	29	IRON	COFF	PM	H	COFF HAND
PAY05	127.0	5	IRON	COFF	PM	W	COFF HAND
PAY05	132.0	33	IRON	COFF	PM	W	COFF HAND
PAY05	134.0	71	IRON	COFF	PM	W	COFF HAND
PAY05	160.0	73	IRON	COFF	PM	W	COFF HAND
PAY05	171.0	99	IRON	COFF	PM	W	COFF HAND
PAY05	172.0	102	IRON	COFF	PM	W	COFF HAND
PAY05	177.0	35	IRON	COFF	PM	W	COFF HAND
PAY05	184.0	8	IRON	COFF	PM	W	COFF HAND
PAY05	186.0	89	IRON	COFF	PM	W	COFF HAND

Site	Context	Acc.no	Material	Object	Period	Complete	Comments
PAY05	199.0	10	IRON	COFF	PM	W	COFF HAND
PAY05	203.0	45	IRON	COFF	PM	W	COFF HAND
PAY05	212.0	77	IRON	COFF	PM	W	COFF HAND
PAY05	216.0	37	IRON	COFF	PM	W	COFF HAND
PAY05	221.0	79	IRON	COFF	PM	H	COFF HAND
PAY05	225.0	22	IRON	COFF	PM	W	COFF GRIP PLATE
PAY05	227.0	82	IRON	COFF	PM	W	COFF HAND
PAY05	231.0	30	IRON	COFF	PM	W	COFF HAND
PAY05	268.0	100	IRON	COFF	PM	W	COFF HAND
PAY05	284.0	44	IRON	COFF	PM	W	COFF HAND
PAY05	288.0	7	IRON	COFF	PM	W	COFF HAND
PAY05	291.0	59	IRON	COFF	PM	W	COFF HAND
PAY05	291.0	74	IRON	COFF	PM	W	COFF HAND
PAY05	302.0	14	IRON	COFF	PM	W	COFF HAND
PAY05	311.0	54	IRON	COFF	PM	W	COFF HAND
PAY05	311.0	81	IRON	COFF	PM	W	COFF HAND
PAY05	325.0	67	IRON	COFF	PM	W	COFF HAND
PAY05	333.0	61	IRON	COFF	PM	H	COFF HAND
PAY05	343.0	46	IRON	COFF	PM	W	COFF HAND
PAY05	369.0	28	IRON	COFF	PM	W	COFF HAND
PAY05	386.0	47	IRON	COFF	PM	W	COFF HAND
PAY05	401.0	32	IRON	COFF	PM	W	COFF HAND
PAY05	414.0	49	IRON	COFF	PM	W	COFF HAND
PAY05	480.0	83	IRON	COFF	PM	W	COFF HAND
PAY05	490.0	62	IRON	COFF	PM	W	COFF HAND
PAY05	504.0	93	IRON	COFF	PM	W	COFF HAND
PAY05	528.0	103	IRON	COFF	PM	W	COFF HAND
PAY05	545.0	70	IRON	COFF	PM	W	COFF HAND
PAY05	555.0	6	IRON	COFF	PM	W	COFF HAND
PAY05	566.0	13	IRON	COFF	PM	W	COFF HAND
PAY05	589.0	101	IRON	COFF	PM	H	COFF HAND
PAY05	592.0	75	IRON	COFF	PM	W	COFF HAND
PAY05	592.0	80	IRON	COFF	PM	H	COFF HAND
PAY05	593.0	19	IRON	COFF	PM	W	COFF HAND
PAY05	593.0	20	IRON	COFF	PM	W	COFF HAND
PAY05	609.0	9	IRON	COFF	PM	W	COFF HAND
PAY05	622.0	63	IRON	COFF	PM	W	COFF HAND
PAY05	631.0	68	IRON	COFF	PM	W	COFF HAND
PAY05	656.0	65	IRON	COFF	PM	W	COFF HAND
PAY05	662.0	39	IRON	COFF	PM	W	COFF HAND
PAY05	670.0	12	IRON	COFF	PM	H	COFF HAND
PAY05	671.0	16	IRON	COFF	PM	W	COFF BRACKET
PAY05	671.0	17	IRON	COFF	PM	W	COFF HAND
PAY05	671.0	18	IRON	COFF	PM	W	COFF HAND
PAY05	671.0	36	IRON	COFF	PM	W	COFF HAND
PAY05	684.0	98	IRON	COFF	PM	W	COFF HAND
PAY05	687.0	23	IRON	COFF	PM	W	COFF GRIP PLATE
PAY05	695.0	91	IRON	COFF	PM	W	COFF HAND
PAY05	703.0	34	IRON	COFF	PM	W	COFF HAND
PAY05	711.0	85	IRON	COFF	PM	W	COFF HAND
PAY05	732.0	66	IRON	COFF	PM	W	COFF HAND
PAY05	762.0	48	IRON	COFF	PM	W	COFF HAND
PAY05	779.0	84	IRON	COFF	PM	W	COFF HAND
PAY05	782.0	86	IRON	COFF	PM	W	COFF HAND
PAY05	784.0	57	IRON	COFF	PM	W	COFF HAND

Site	Context	Acc.no	Material	Object	Period	Complete	Comments
PAY05	785.0	31	IRON	COFF	PM	W	COFF HAND
PAY05	818.0	69	IRON	COFF	PM	W	COFF HAND
PAY05	827.0	58	IRON	COFF	PM	H	COFF HAND
PAY05	827.0	92	IRON	COFF	PM	W	COFF HAND
PAY05	839.0	56	IRON	COFF	PM	W	COFF HAND
PAY05	847.0	43	IRON	COFF	PM	W	COFF HAND
PAY05	33.0	1	IRON	HAND	PM	W	COFFIN HANDLE
PAY05	33.0	2	IRON	HAND	PM	W	COFFIN HANDLE
PAY05	33.0	3	IRON	HAND	PM	W	COFFIN HANDLE
PAY05	33.0	4	IRON	HAND	PM	H	COFFIN HANDLE
PAY05	661.0	106	IRON	PIN	PM	H	IRON HAIR-PIN
PAY05	287.0	41	LEAD	COFF	PM	W	COFF GRIP PLATE
PAY05	437.0	60	LEAD	COFF	PM	H	COFF PLATE
PAY05	575.0	11	LEAD	COFF	PM	W	COFF GRIP PLATE
PAY05	673.0	171	LEAD	COFF	PM	W	NAME PLATE
PAY05	676.0	162	LEAD	COFF	PM	W	NAME PLATE
PAY05	679.0	168	LEAD	COFF	PM	W	NAME PLATE
PAY05	687.0	55	LEAD	COFF	PM	H	COFF GRIP PLATE
PAY05	691.0	163	LEAD	COFF	PM	W	NAME PLATE
PAY05	703.0	15	LEAD	COFF	PM	H	COFF GRIP PLATE
PAY05	711.0	164	LEAD	COFF	PM	W	NAME PLATE
PAY05	711.0	169	LEAD	COFF	PM	W	NAME PLATE
PAY05	730.0	161	LEAD	COFF	PM	W	NAME PLATE
PAY05	784.0	21	LEAD	COFF	PM	W	COFF GRIP PLATE
PAY05	500.0	134	LEAD	ZZZ	PM	W	TOKEN
PAY05	132.0	147	SHEL	BUTT	PM	W	
PAY05	761.0	154	SHEL	BUTT	PM	H	
PAY05	800.0	152	SHEL	BUTT	PM	W	
PAY05	800.0	153	SHEL	BUTT	PM	W	
PAY05	263.0	158	TORT	COMB	PM	W	TORTOISESHELL COMB
PAY05	263.0	159	TORT	COMB	PM	H	TORTOISESHELL COMB

17 Appendix 5 Named burials

A very basic search has been carried out on some of those burials that could be identified from their coffin plates. Further information is likely to be found for most of these individuals.

17.1 Excavated burials

17.1.1 *Mrs Elizabeth Caunter*

Context no. 595
 Died 29 Jan 1824
 Aged 66
 Buried 15 February
 Address Bromley

17.1.2 *Miss Sarah Green*

Context no. 644
 Died 23 December 1836
 Aged 5 months
 Buried 29 December
 Address Old Ford

17.1.3 *Master George Hill*

Context no. 349
 Died 19 May 1831
 Aged 2
 Buried 28 May
 Address Old Ford

17.1.4 *Miss Mary Margaret Meredith*

Context no. 829
 Died Jan 1851
 Aged 4 months
 Buried
 Address

17.1.5 Thomas Parnell

Context no. 710
 Died 27 January 1853
 Aged 61
 Buried
 Address High Street, Bow

His will shows him to be a Watchmaker of Bow, Middlesex, while the 1846 Post Office Directory shows this to have been at 32 High Street
 PROB11/2169

The 1851 Census entry for 55 High Street shows that it was occupied by a William Parnell, but this may be a mistake, as all the indications are that this is Thomas, as his will mentions property in Canterbury.

Name	Relation to head	Age	Occupation	Parish of birth
William Parnell	Head	60	Watchmaker	Canterbury, Kent
Elizabeth Parnell	Wife	56		Sudbury, Suffolk
Thomas Parnell	Son	30	Watchmaker	Bow
Henry Parnell	Son	21	Watchmaker	Bow
Frederick Parnell	Son	16	Watchmaker	Bow
Mary Parnell	Daughter	18		Bow

17.1.6 Mrs Elizabeth Parnell

Context no. 683
 Died 29 December 1870
 Aged 76
 Buried
 Address High Street, Bow

Wife of the above

17.1.7 Master James Parry

Context no. 457
 Died 31 October 1823
 Aged 3
 Buried 6 November
 Address Old Ford

17.1.8 Miss Emily Maria Reilly

Context no. 672
 Died 2 September 1837
 Aged 5 months
 Buried 29 December
 Address Old Ford

17.1.9 Major Alexander Robson

Context no. 691
 Died 24 Feb 1836
 Aged 54
 Buried 16 May
 Address Marseilles, France

Major in the British Army of Walton upon Thames, Surrey

17.1.10 Mrs Mary Robson

Context no. 673
 Died 25 August 1842
 Aged 85
 Buried
 Address

17.1.11 Miss Mary Scach

Context no. 163
 Died 13 Apr 1825
 Aged 2 years 6 months
 Buried 24 April
 Address Bromley

17.1.12 Master Job Smeeton

Context no. 552a
 Died 15 Jan 1827
 Aged 10 months
 Buried 21 January
 Address Marylebone

17.1.13 Miss Smeeton

Context no. 552
 Died March
 Aged
 Buried 22 January 1827
 Address Marylebone

Register has 'Sarah or Elizabeth, brought from another burying place'

17.1.14 Mr Alexander Sparkall

Context no. 674

Died 04 Aug 1826
 Aged 'In his 76th year'
 Buried 12 August
 Address Plaistow

His will, PROB11/1716, describes him as a 'Gentleman of Westham'

17.1.15 Mrs Elizabeth Sparkall

Context no. 674
 Died 22 May 1833
 Aged 93
 Buried 1 June
 Address Plaistow

Widow of Plaistow, Essex, PROB11/1819

17.1.16 Mrs Elizabeth Woodward

Context no. 235
 Died 22 Aug 1830
 Aged 39
 Buried 31 August
 Address Stratford

17.1.17 Richard Woodward

Context no. 209
 Died 22 Jun 1831
 Aged 81 (80 in register)
 Buried 26 June
 Address Stratford

17.1.18 Miss Helen Maria Wright

Context no. 619
 Died 23 Mar 1837
 Aged 32
 Buried 4 April
 Address Coborn Street, Mile End Road

The register notes 'With her stillborn child' (The plate was recovered by machine from a grave cut within the diesel contaminated area, the context number being that of the cut)

17.2 Exhumed burials**17.2.1 *Mr James Cock***

Context no. TCS148
 Died 04 June 1823
 Aged 65
 Buried 10 June
 Address Bow

17.2.2 *Mr Samuel Crane*

Context no. TCS15
 Died 22 Oct 1832
 Aged 'In his 81st year'
 Buried 28 October
 Address Stratford

Will, PROB11/1807

17.2.3 *Henry Samuel Crane Esq*

Context no. TCS13
 Died 10 February 1848
 Aged 65
 Buried
 Address

Henry Samuel Crane seems to have been a chemist from Stratford, as The Proceedings of the Old Bailey for 4 December 1828 show, when Jarvis Murrell was charged with theft and simple grand larceny (T18281204-34).

Original Text:

34. JARVIS MURRELL was indicted for stealing, on the 18th of July, 92lbs. weight of lead, value 30s., the goods of Henry Samuel Crane.

HENRY SAMUEL CRANE. I am a manufacturing chemist, and live at Stratford, in Essex. I missed a piece of lead on the 19th of July - it had been cut out for a chemical vessel, and was in a shed; the prisoner had worked about my premises, and on the 10th of July had unloaded some coals for me, with a man named Connotly, but neither of them worked for me on the 19th of July.

HENRY CRANE. I am the prosecutor's son. I know this lead to be my father's - I did not see the prisoner about there on the 18th or 19th of July.

CHARLES WYATT. I saw the prisoner on the 18th of July, about four o'clock in the afternoon, with this lead on his back; he was going down Cut Throat-lane, and Connelly with him - I knew him quite well; I got up into a tree, watched them, and saw them put the lead into some bushes, and go away - I went and told Mr. Giles'

foreman, for whom I work; we went, got the lead, and put it into Mr. Giles' granary - this was in the Country of Middlesex.

Prisoner. The other had the lead. Witness. He had it first and then you took it.

JOHN BURNHAM. Wyatt came and told me of it; we went and took the lead to our master's granary - I shewed the same lead to the prosecutor.

JAMES BROWN. I am a watchman. I produce the lead.(Property produced and sworn to.)

Prisoner's Defence. I am in the habit of working in the coal business at various places, and I dare say I was coming along at the time this boy says he saw me with the lead, but he did not see me touch it; I have never been away from the place - I get up in the morning to go to work, and return at night.

GUILTY. Aged 25.

Transported for Seven Years.

The 1846 Post Office Directory lists Crane, Son and Graham, manufacturing chemists, Stratford, White's Row, Whitechapel, and Jamaica Coffeehouse, St Michaels Alley, Cornhill.

17.2.4 Mrs Priscilla Cullum

Context no. TCS12
 Died 2 September 1839
 Aged 62
 Buried
 Address

17.2.5 Mr Jesse Cullum

Context no. TCS17
 Died 24 October 1854
 Aged 80
 Buried
 Address

Will, PROB11/2204,

Jesse Cullum seems to have kept livestock, as this entry from the Proceedings of the Old Bailey for 7 April 1813 indicate (T18130407-100), when Joseph Barker was convicted of animal theft.

444. JOSEPH BARKER was indicted for feloniously stealing, on the 18th of March, two cows, value 20 l. the property of William Cole and Jesse Cullum.

WILLIAM COLE. I live at Mile-end-road. I am a cow-keeper. My partner's name is Jesse Cullum. On the 18th of March I lost two cows out the Marsh ground, at Stratford. I had information about three o'clock in the morning, that he went up the road with them. I followed him, and found my cows in New Inn yard, Shoreditch. They refused to let me have my cows.

Q. Who refused - A. A person of the name of Robert Young. I then applied at Worship-street office. An officer went with me, and he delivered the cows. I am sure they are my cows. One of them calved about a fortnight ago; the other died; it was over drove. They were both ready to calve. I know the prisoner very well; he lived with Hancock, a butcher, at Bow-bridge: he has gone by my marsh lands; he knew they were my cows, and he knew they were in that land all the winter.

CHARLES LAMBERT. I am a butcher. I saw the cows on the 18th of March, in Bow. The prisoner was driving them along, about five minutes after three in the morning. He was driving them toward London.

Q. Did you know the prisoner before - A. Yes, I spoke to him. He told me he brought them from Rumford, and they had strayed out of the drove into Handcock's Marsh; he was going to take them to Shoreditch. He told me he was going to take the money for the cows. He did not tell me what money.

Q. Did you know the cows - A. Yes.

Q. Whose cows were they - A. William Cole's, I believe. I knew the cows, but I did not know whose they were.

Q. Have you seen them since - A. Yes, I saw them at Worship-street, and those are the cows that I saw at Mile-end on the 18th of March, and which Mr. Cole claimed as his own. They were red and white cows; they were in calf, and very pretty cows. When I saw them in Worship-street I knew them again.

ROBERT YOUNG. I am a butcher. The cows were brought to me about half past four on the same morning, in New Inn yard, Shoreditch.

Q. By whom were they brought - A. By the prisoner at the bar, and offered for sale.

Q. Were they in calf - A. Yes. He asked eight pounds for them. He said he brought them from Mr. Greenhill. The gentleman ordered him to bring them to me.

Q. Did you know Mr. Greenhill - A. No. I told him I should keep them and go to Mr. Greenhill. As I was going along I stopped at Bow-bridge, at Mr. Handcock's, and asked him whether he knew any thing about two cows that his drover brought down. He said, yes: there had been a gentleman enquiring about two cows that he had lost out of the marsh. I told him I had got them at home. The prisoner brought them in. Before Mr. Cole came the prisoner brought a bill to receive four pounds upon the two. It is put bullocks in the bill. I did not give him any money.

Q. They were not fit for the butcher, were they - A. No; they were too heavy in calf. I am sure the prisoner is the man that brought me the cows, and offered them for eight pounds, and they were the cows that were claimed by Mr. Cole.

Mr. Walford. You thought the prisoner a sensible man - A. I thought him a madman.

RICHARD WILSON. On the 18th of March last the prosecutor came to my house, he informed me he had lost two cows. I went down to New Inn yard. The witness, Young, delivered the cows to the prosecutor. They are the same cows that the prosecutor swore to at the office.

Prosecutor. I have no doubt about the two cows. I have had them since Michaelmas. I had them in the marsh all the winter. I saw them there every day. They were worth from fifteen to seventeen pound each if they had good luck in calving. They were small cows.

Mr. Walford. When had you seen the cows before you lost them - A. The day before I saw them in the marsh. I had a key of the marsh-gate. The gate was taken off the hinges to get the cows out.

GUILTY - DEATH , aged 48.

17.2.6 *Reverend Charles Thomas Mileham*

Context no. TCS76
Died 15 Dec 1829
Aged 48
Buried 21 December
Address Stoke Newington

Protestant Dissenting Minister of Stoke Newington, Middlesex,
Will PROB11/1767

17.2.7 *Ann Pryke*

Context no. TCS34
Died 20 August 1869
Aged 84
Buried
Address

17.2.8 *Miss Mary Robins*

Context no. TCS83
Died 4 February 1844
Aged 7 years 2 months
Buried
Address

May be the daughter of Joshua Robins, a stonemason of Bow.

17.2.9 Sarah Shales

Context no. TCS18
 Died 11 April 1846
 Aged 53
 Buried
 Address

Mother of Josiah Shales
 bp. 31 JAN 1790 Brighton, Sussex
 d. 11 APR 1846 West Ham, of bronchitis

17.2.10 Mr Josiah Shales

Context no. TCS141
 Died 15 December 1851
 Aged 27
 Buried
 Address

b. 5 OCT 1824 Stratford
 d. 15 DEC 1851 West Ham

Parents

Thomas Shales
 b. 1784
 d. 23 JAN 1838 Stratford

Family:

Marriage: 28 SEP 1819 St. Nicholas Church, Brighton
 Spouse: **Sarah Harman**
 bp. 31 JAN 1790 Brighton, Sussex
 d. 11 APR 1846 West Ham, of bronchitis

There are two relevant entries in the Post Office Directory John Shales, tailor, Stratford and Mrs Sarah Shales, tailor, Stratford Broadway.

18 OASIS DATA COLLECTION FORM: England**OASIS ID: molas1-25952****Project details**

Project name Bow Baptist Church burial ground

Short description of the project An excavation revealed the post-medieval cemetery north of the present Bow Baptist church. A total of 348 contexted burials were recorded and retained for analysis by the osteologist (351 actual burials). All were aligned east-west with the skull at the west end. Two brick vaults containing burials were also recorded. The majority of the burials on site were in wooden coffins, with two lead coffins from the general burial area and five from the northern vault. 44 burials were at least partially identifiable from their coffin plates

Project dates Start: 03-07-2006 End: 30-08-2006

Previous/future work Yes / No

Any associated project reference codes PAY05 - Sitecode

Type of project Recording project

Site status Local Authority Designated Archaeological Area

Current Land use Other 4 - Churchyard

Monument type CEMETERY Post Medieval

Significant Finds COFFIN Post Medieval

Investigation type 'Open-area excavation'

Prompt Direction from Local Planning Authority - PPG16

Project location

Country England

Site location GREATER LONDON TOWER HAMLETS BOW Bow Baptist church burial ground, 2-25 Payne Road

Postcode E3

Study area 400.00 Square metres

Site coordinates TQ 37698 83071 51.5292374642 -0.01469130766880 51 31 45 N 000 00 52 W Point

Height OD Min: 9.30m Max: 9.60m

Project creators

Name of Organisation MoLAS

Project brief originator MoLAS project manager
 Project design originator MoLAS
 Project director/manager David Lakin
 Project supervisor Adrian Miles
 Type of sponsor/funding body Galliford Try

Project archives

Physical Archive recipient LAARC
 Physical Contents
 Digital Archive recipient LAARC
 Digital Contents
 Digital Media available
 Paper Archive recipient LAARC
 Paper Contents
 Paper Media available

Project bibliography 1

Publication type Grey literature (unpublished document/manuscript)
 Title BOW BAPTIST CHURCH BURIAL GROUND, 2-25 Payne Road, London, E3
 Author(s)/Editor(s) Miles, A. and Powers, N.
 Date 2007
 Issuer or publisher MoLAS
 Place of issue or publication London

Entered by Adrian Miles (adrianm@molas.org.uk)
 Entered on 4 April 2007