

243
QMGMT 293

Unks X-104 and ~~X-114~~
(Formerly USAF Finschhafen #2) N.G.

5 October 1948

SUBJECT: Board of Review Proceedings

TO : Commanding General
Philippine Command
APO 707, c/o Postmaster
San Francisco, California

ATTENTION: AGRS, PHILCOM ZONE

1. Reference is made to Proceedings of Board of Review, dated 27 August 1948, and Case History for remains Recovered but Non-Human.

2. Recommendation that the remains of Unknown X-3108, (formerly X-104, Finschhafen No. 2, N.G.) and X-3100, (formerly X-114, Finschhafen No. 2, N.G.) be declared non-human and disposed of according to existing regulations, has been approved by this office.

3. Reports of Interment for Unknowns referred to above have been cancelled.

FOR THE QUARTERMASTER GENERAL:

cc: Commander-in-Chief
Far East, APO 500, c/o PM
San Francisco, California

T. H. METZ
Lt. Colonel, QMC
Memorial Division

cc: Adm Sect
tmd: Jeffrey

7 12 52 PM '48



[Handwritten signature]
JMS

JCM

243 uncl New Guinea X114 (Finschhafen #2)



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DISINTERMENT DIRECTIVE

293 Oak New Guinea 7-104 Finschaffens

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
6911 00227

DATE
15 01 49
DAY MONTH YEAR

NAME
UNKNOWNX-000104

SERIAL NUMBER

RANK

ARM
0
DATE OF DEATH
DAY MONTH YEAR

CEMETERY
BRITISH GUINEA USAP FINSCHAFFEN NO 20

DISPOSITION OF REMAINS
7701 80
CODE DIST. PT.

PLOT ROW GRAVE COUNTRY
1937 NEW GUINEA

CAUSE OF DEATH
6

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
**MANILA, PHILIPPINE ISLANDS
(BY ADMINISTRATIVE ORDER)**

NAME AND ADDRESS OF NEXT OF KIN
[Handwritten signature]

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER RANK DATE OF DEATH DATE DISTINTERRED

IDENTIFICATION TAG ON
 REMAINS
 MARKER

ORGANIZATION
UNKNOWN

RELIGION

IDENTIFICATION VERIFIED BY
NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES *1*

REMAINS PREPARED AND PLACED IN CASKET

DATE BY
CASKET SEALED BY

EMBALMER (Signature)

CASKET BOXED AND MARKED
DATE BY

SHIPPING ADDRESS VERIFIED BY

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

SIGNATURE OF GRS INSPECTOR

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.