

Interred 12 October 1949  
N 12 34 Ft. McKinley  
*Checkmark*  
DISINTERMENT DIRECTIVE  
CARL R. H. MARK

Cemetery Superintendent  
SECTION A -  
NAME AND BURIAL LOCATION OF DECEASED  
DIRECTIVE NUMBER  
6911 00200  
DATE  
15 01 48  
DAY MONTH YEAR

NAME  
*9/11* UNKNOWNX-000053  
SERIAL NUMBER  
RANK  
ARM  
DATE OF DEATH  
DAY MONTH YEAR

CEMETERY  
BRITISH GUINEA USAF FINSCHAFFEN NO 20  
DISPOSITION OF REMAINS  
7701 80  
CODE DIST. PT.

PLOT ROW GRAVE COUNTRY  
1276 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

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME  
UNK X-000053 (Finsch #2)  
UNK X-2703 (Maus)  
SERIAL NUMBER  
RANK  
DATE OF DEATH  
DATE DISINTERRED  
19 May '48  
IDENTIFICATION TAG ON  
 REMAINS  
 MARKER  
ORGANIZATION  
USAGF  
RELIGION  
IDENTIFICATION VERIFIED BY  
ROBERT L. LENNON  
Embalmer  
NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL  
Shelter Half  
CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION  
Formerly Unk X-53, USAF Cem Finsch #2, NG. Grave: 1276

MINOR DISCREPANCIES  
REMAINS PREPARED AND PLACED IN CASKET

DATE 19 May '48  
BY ROBERT L. LENNON

CASKET SEALED BY  
ROBERT L. LENNON  
EMBALMER (Signature)  
*Robert L. Lennon*  
ROBERT L. LENNON

CASKET BOXED AND MARKED  
DATE 19 May '48  
PLACIDO M. CASTILLO  
SHIPPING ADDRESS VERIFIED BY  
CAMERON P. WILEY, 1st Lt., USAFR

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

*Cameron P. Wiley*  
CAMERON P. WILEY  
1st Lt., USAFR  
SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

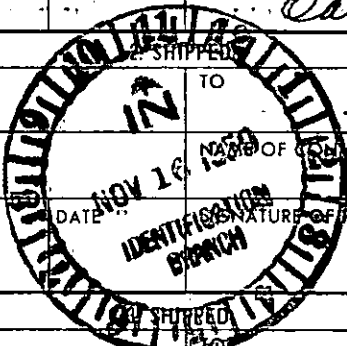
REMARKS: Unidentifiable - OQMG

REPAIRS  
*Graves*

# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

FROM <b>AGRS Mausoleum</b>		TO <b>Fort McKinley Military Cemetery</b>	
KIND OF CONVEYANCE <b>Truck</b>		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Barclay Mark</i>	DATE <b>12 OCT 1949</b>



FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

## 4. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

## 5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE <i>(D) EDWARDSVILLE ORDER</i>		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>SMITH</i>	DATE	SIGNATURE OF RECEIVER	DATE

## 6. SHIPPED

FROM <b>ISSUE NEW CRIMEA</b>		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>CRIMEA</i>	DATE	SIGNATURE OF RECEIVER	DATE

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER <b>00500 12 01 49</b>	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

Car JLD

6

DISINTERMENT DIRECTIVE

293 Lt. New Guinea X-53 (Finschhafen #2)

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

0011 00000

16 01 48  
DAY MONTH YEAR

NAME

SERIAL NUMBER

RANK

ARM

DATE OF DEATH

UNKNOWN X-00000

J

DAY MONTH YEAR

CEMETERY

DISPOSITION OF REMAINS

BRITISH GUINEA USAF FINSCHAFFEN NO 10

7701 30  
CODE DIST. PT.

PLOT

ROW

GRAVE

COUNTRY

CAUSE OF DEATH

1270 NEW GUINEA

5

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

NAME AND ADDRESS OF NEXT OF KIN

MANILA, PHILIPPINE ISLANDS  
(BY ADMINISTRATIVE ORDER)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISINTERRED

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

REMAINS

USAGF

NAME AND TITLE

MARKER

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

SHIPPING ADDRESS VERIFIED BY

DATE 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.

6

DISINTERMENT DIRECTIVE

293 Lt. New Guinea X-53 (Finschappen #2)

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

0911 00200

DATE

15 01 48  
DAY MONTH YEAR

NAME

UNKNOWNX-000053

SERIAL NUMBER

RANK

ARM

J

DATE OF DEATH

DAY MONTH YEAR

CEMETERY

BRITISH GUINEA USAP FINSCHAPPEN NO 20

DISPOSITION OF REMAINS

7701 80  
CODE DIST. PT.

PLOT ROW GRAVE COUNTRY

1276 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

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER RANK DATE OF DEATH DATE DISTINTERRED

IDENTIFICATION TAG ON

REMAINS  
 MARKER

ORGANIZATION

USAGF

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

SHIPPING ADDRESS VERIFIED BY

DATE 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.

MSGT 293  
GNS Far East

22 July 1949

SUBJECT: Identification of World War II Deceased

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

1. Reference is made to the following remains now stored at AGNS Mausoleum, Manila, P.I.:

I-2237 (formerly I-558 Leyte #1, P.I.)  
I-2706 (formerly I-61 Finschhafen #2, H.G.)  
I-2703 (formerly X-53 Finschhafen #2, H.G.)

2. Subject cases have been reviewed and this Office approves the classification of the above listed Unknowns as unidentifiable.

FOR THE ACTING THE QUARTERMASTER GENERAL:

H. Little:jck  
Salser  
JW

T. H. MITTS  
Lt. Colonel, GMC  
Memorial Division

FEB

NJS

cc: Administrative Section

OSIGHT 293  
ONS Far East

22 July 1949

SUBJECT: Identification of World War II Deceased

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

1. Reference is made to the following remains now stored at AGRS Mausoleum, Manila, P.I.:

X-2237 (formerly X-558 Leyte #1, P.I.)  
X-2706 (formerly X-61 Finschhafen #2, H.G.)  
X-2703 (formerly X-53 Finschhafen #2, H.G.)

2. Subject cases have been reviewed and this Office approves the classification of the above listed Unknowns as unidentifiable.

FOR THE ACTING THE QUARTERMASTER GENERAL:

R. Little:jdk  
Salser  
JW

T. E. METS,  
Lt. Colonel, QMC  
Memorial Division

cc: Administrative Section

REB

NJS

COPY

HEADQUARTERS  
PHILIPPINES COMMAND  
UNITED STATES ARMY

GSGR 293.9

AFPO 707  
8 JUL 1949

SUBJECT: Unidentifiable Remains

TO: The Quartermaster General  
Department of the Army  
Washington 25, D. C.  
ATTN: Memorial Division

1. In accordance with the provisions of your letter, file QMGMU 293, GRS (Far East), dated 17 September 1948, subject: Resolution of Cases of Unidentified Deceased, the following unknown remains, presently stored at AGRS Mausoleum, Manila, P. I., have been processed by the Central Identification Laboratory and considered "Unidentifiable" by reason of lack of sufficient identifying data:

Unknown X-1128	Unknown Y-1894
" X-1346	" X-1907
" X-1403	" X-2057
" X-1522	" Y-2059
" X-1612	" X-2237
" X-1713	" X-2377
" X-1721	" X-2412
" X-1733	" Y-2433
" X-1737	" X-2703
	" Y-2706

2. Forwarded herewith, for your consideration, are new QMC Forms 1044 for the above-mentioned Unknowns.

FOR THE COMMANDING GENERAL:

JOHN A. MARSZAL  
1st Lt., AGD  
Asst Adj Gen

19 Incls.

QMC Forms 1044 w/certificate  
of Unidentifiability

*Rec'd 18 July 49*

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
PHILCON ZONE  
APO 900

18 May 1949

Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X-53, Plot \_\_\_\_\_,  
Row \_\_\_\_\_, Grave 1276, USMC Finschhafen #2, \_\_\_\_\_ have  
been reviewed and it is the opinion of this office that insufficient  
evidence is available to establish the identity of this deceased,  
and that these remains should be classified as unidentifiable.

FOR THE COMMANDING OFFICER:



H. B. McNEMAR  
Captain, QMC  
Chief, Records Branch

Atch: Form 1044

Received 18 July 49  
Not identifiable from  
information presently  
available 23 July 49 Little

Ref # 18



**IDENTIFICATION DATA**

1. REMAINS OF UNKNOWN <b>UNKNOWN X-2703 (Formerly UNK X-53 Finsch #2)</b>				2. DATE OF REPORT <b>18 May 1949</b>	
3. NAME OF CEMETERY <b>AGRS MAUSOLEUM MANILA P I</b>		4. PLOT <b>802</b>	5. ROW <b>E</b>	6. GRAVE <b>1668</b>	7. DATE OF DISINTERMENT REINTERMENT

**PHYSICAL DESCRIPTION**

8. ESTIMATED WEIGHT <b>U. T. D.</b>	9. ESTIMATED HEIGHT <b>U. T. D.</b>	10. COLOR OF HAIR <b>U. T. D.</b>	11. RACE <b>UNKNOWN</b>
--	--	--------------------------------------	----------------------------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

**N O N E**

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

**U. T. D.**

14. WAS BODY BURNED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT?
---	-----------------

15. WAS BODY MANGLED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT?
--	-----------------

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

**N O N E**

17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

**N O N E**



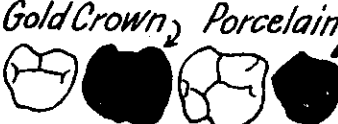







Received ..... **OQMG**  
*in Manila to be  
 available*




**"UNIDENTIFIABLE"**  
**"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"**

*Serial 182*

18.

TOOTH CHART

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

RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
MAXILLA								MISSING							
															
															
															
MANDIBLE								MISSING							
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

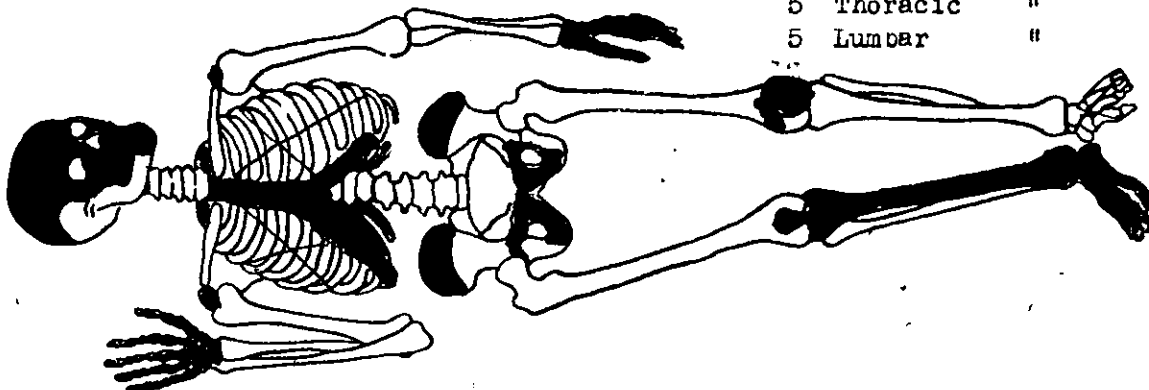
**DENTURES (Plates):** DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAINING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

No loose teeth present with remains.

*J. J. McDERMOTT*  
 J. J. McDERMOTT  
 Laboratory Officer, CIP

19. BLACK OUT PARTS OF BODY NOT RECEIVED

Received: 13 lbs  
3 Cervical vertebrae  
5 Thoracic "  
5 Lumbar "



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

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

\_\_\_\_\_  
SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

No ROI, identification tags or personal effects found with remains.

Estimated weight of remains - 4 lbs.

Received 7/19/49 OQMG  
Not identifiable from  
information presently  
available *Ident. Ident. B.*

**"UNIDENTIFIABLE"**

**"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"**

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

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

JAMES J. McDERMOTT  
Laboratory Officer, CIP

SIGNATURE

*James J. McDermott*

## IDENTIFICATION CHECK LIST

(To be completely filled out and attached to each copy  
 of Report of Interment WD QMC Form 1042)

(Formerly UNK X-53  
 (USAF Cem # 2, Finsch.

Unknown X - 2703 (New Guinea)

Cemetery AGRS Mausoleum, Manila, P.I.

Plot 1862R Row BA Grave 1668

AGRS Mausoleum, Manila, P.I.

1. Arrived at cemetery 6 Dec 47  
(Hour) (Date)

2. Place of death Soputa Killerton Tract  
(Name of closest town)

(Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3. Remains recovered or disinterred by AGRS Det #2  
(Name and organization)

4. Evacuated to Cemetery by \_\_\_\_\_  
(Name and organization)

5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

Item	Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear	/ (Type)		
Raincoat	/		
Overcoat	/		
Jacket, Field	/		
Jacket, Combat	/		
Mackinaw	/		
Sweater	/ N		
Jacket, HBT	/ N		
* Shirt, Wool OD	/ E		
Undershirt, Wool	/		
Undershirt, Cotton	/		
Trousers, HBT	/		
* Trousers, Wool OD	/		

Belt, web \_\_\_\_\_

Drawers, wool \_\_\_\_\_

Drawers, cotton \_\_\_\_\_

Leggings, wool \_\_\_\_\_

Socks, cotton \_\_\_\_\_

\* Shoes \_\_\_\_\_ (type) \_\_\_\_\_

Overshoes \_\_\_\_\_ N  
O

Web Equipment \_\_\_\_\_ (type) N  
E

(Other item) \_\_\_\_\_

(Other item) \_\_\_\_\_

\* If body is nude, sizes of these items should be computed by measuring the remains

Chevrons or  
Insignia \_\_\_\_\_ (Type & location; shirt, jacket, coat, helmet)

Shoulder Patch \_\_\_\_\_

Does clothing indicate that deceased was a member of the Air, Ground or Naval Force?

6. Description of Remains: Skeleton only. Chart attached.

Age \_\_\_\_\_ / Height \_\_\_\_\_ Weight \_\_\_\_\_ Description of wounds \_\_\_\_\_

Bandages or dressings \_\_\_\_\_ Scars \_\_\_\_\_ (Length, width, location)

\_\_\_\_\_ Tattoos \_\_\_\_\_ (Number, location — illustrate on separate page)

Outstanding moles, warts or birthmarks \_\_\_\_\_ (Yes-no; description, location)

Sunburn or tan, other than hand and face \_\_\_\_\_

Complexion \_\_\_\_\_ U  
T (Light, medium, dark, clear, pimples, pocks, freckles)

Build \_\_\_\_\_ D  
(Large, fat, thin, muscular)

Hair \_\_\_\_\_ (Color, length/quantity, curly, wavy, straight, whorls, or definite parting)

Hair \_\_\_\_\_ (Baldness, widow's peak, distinctive cutting or other characteristics)

Sideburns \_\_\_\_\_ Mustache \_\_\_\_\_ Beard or \_\_\_\_\_  
(Color, setting, shape) (Color, size, shape) (Length, heavy)

Goatee ..... (Light, color, extent)

Eyes ..... U ..... Eyebrows ..... (Color, bushiness, extent across nose)

Nose ..... D ..... Ears ..... (Size, set close to or far from head)

Mouth ..... (Large, medium, small) ..... Lips ..... (Small, large, full)

Teeth ..... No teeth. ..... (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin ..... (Prominent, receding, pointed, dimples, double)

Jaw ..... (Large, small, normal) ..... Skull ..... Skull fractured (Hat band)

Neck ..... (Size, length, short, normal, wrinkled) ..... Larynx ..... (Prominent, normal)

Shoulders ..... (Broad, straight, small, rounded) ..... Arms ..... (Length, muscular, color, extent and quantity of hair)

Hands ..... U

Fingers ..... T ..... (Short, thick, long, slender, size of knuckles, missing fingers or joints)

..... (Unusual characteristics of fingernails)

Chest ..... (Size of nipples, color, quantity and extent of hair, large, small, normal)

Waist ..... (Size of navel, appendectomy, amount, quantity, and color of hair)

Back ..... (Quantity and extent of hair) ..... Circumcision ..... (Yes-no) ..... Pubic Hair ..... (Color)

Hernioplasty ..... (Yes-no; location)

Legs ..... (Inseam, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

Feet ..... (Size, corns, callouses, flat) ..... Toes ..... (Slender, straight, crooked, overlap)

Evidence of healed fractures ..... (Nose, arms, legs, etc.)

NOTE: Use attached charts "A" and "B" to indicate parts not received.

7. Have finger prints been placed on Report of Interment? No  
(Yes-no)

If not, explain Due to condition of remains.

8. Has tooth chart been prepared? No If not, explain  
(Yes-no)

9. Remarks No personal effects, no ROI bottle nor I. D. tags found with remains.  
Estimated weight of remains 4 lbs.

I certify that I have personally viewed the remains of subject deceased and all resulting information has been recorded to the best of my knowledge.

CERTIFIED TRUE COPY:

*G. T. Gamboa*  
G. T. GAMBOA  
2d Lt., MAC

/s/ Frazier Oliver  
(Officer's Name)

SP-6 C-063027  
Rank Service

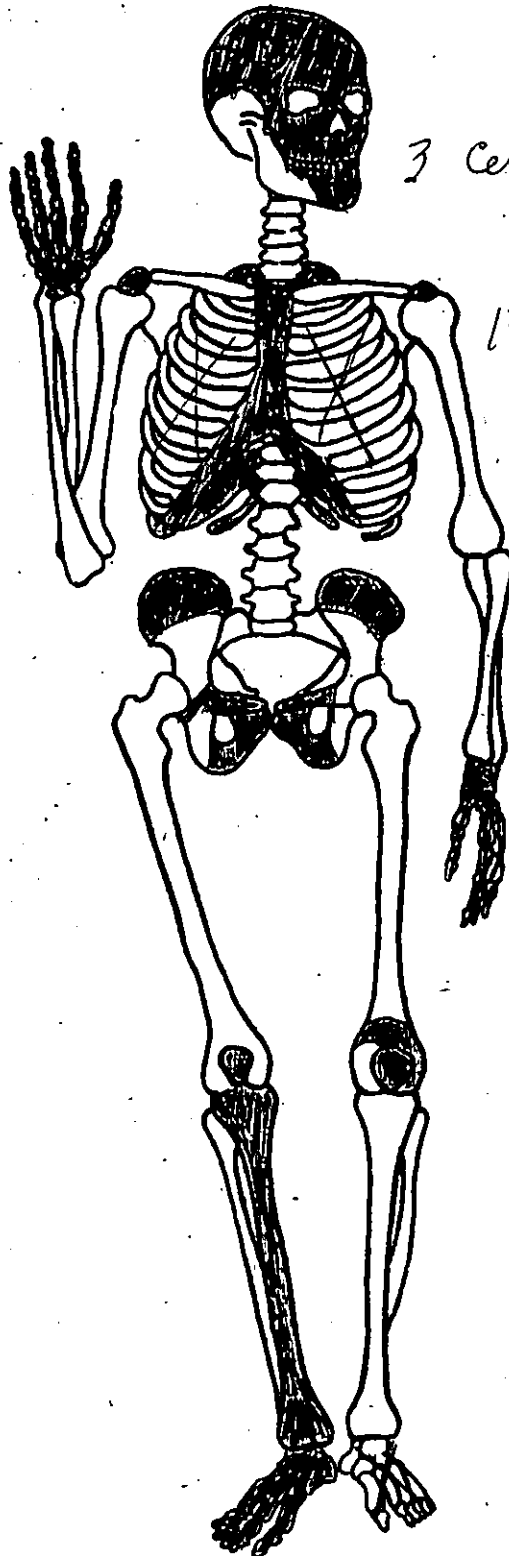
CIP, Laboratory, Manila, P.I.  
(Organization)

6 Dec 47

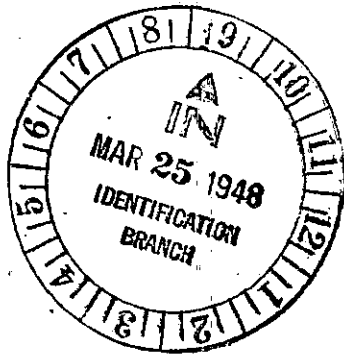
# SKELETAL CHART

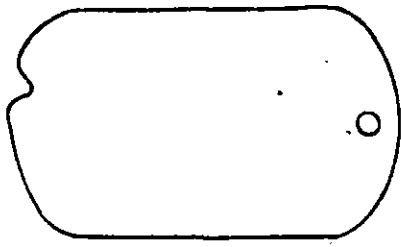
X-2703

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)




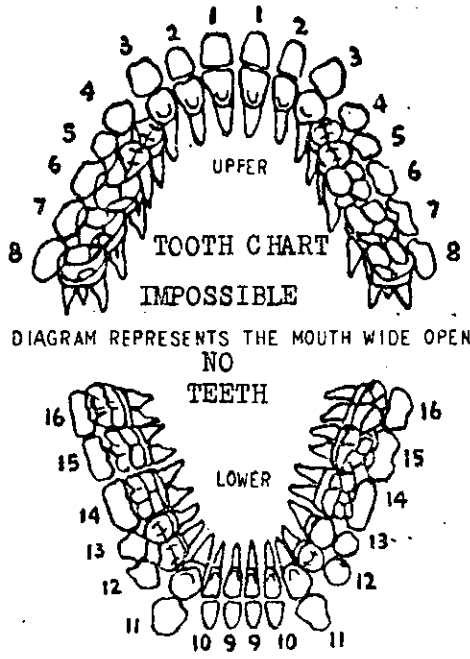




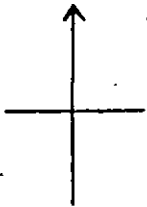




WD OMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)				DATE OF REPORT 18 Dec 47	
Imprint Identification Tag If Possible. DO NOT TYPE  	Section 1.—IDENTIFICATION.						
	NAME (Last, first, middle initial) UNKNOWN X-2703 (Formerly UNK X-53 USAF Cem #2, Finschhafen, New Guinea)				SERIAL NO. Unknown		
	GRADE Unknown		ORGANIZATION Unknown		BRANCH OF SERVICE Unknown		
RACE Unknown		RELIGION Unknown		IF OTHER THAN U. S. DEAD. GIVE NAME OF COUNTRY			
PLACE OF DEATH Soputa Killerton Tract		CAUSE OF DEATH KIA			DATE OF DEATH Dec 1942		
EMERGENCY ADDRESSEE (Name, relationship, and address) Unknown							
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 2 on reverse)					
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (2)							
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME None							
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.							
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY AGRS MAUSOLEUM, MANILA, P							
DATE OF BURIAL 8 Dec 47	HOUR 0900	BURIED IN (Shroud, blanket, or name of other) STORED Casket	TYPE OF GRAVE MARKER None	PLOT NO. 802	ROW NO. E	GRAVE NO. CRYPT 1668	
WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery #2, Finschhafen, New Guinea			PLOT No.	ROW No.	GRAVE No. 1276	
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY				
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes						
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORED UNKNOWN X-2707			RANK	SERIAL NO.	ORGANIZATION	GRAVE NO. CRYPT 1670	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED UNKNOWN X-2700			RANK	SERIAL NO.	ORGANIZATION	GRAVE NO. CRYPT 1666	
SIGNATURE OF PERSON PREPARING REPORT R. R. ACERTO, PVT.			SIGNATURE OF GRS OFFICER VERIFYING REPORT L. S. PANOPLO, 2d Lt., INF				
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.							

Incl 1194

MAR 25 1948

LEFT LITTLE FINGER	Section <b>UNIDENTIFIED REMAINS.</b>			
	<p><b>INSTRUCTIONS:</b></p> <p>(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks.</p> <p>(b) A-fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.</p>			
LEFT RING FINGER	HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR
				BIRTHMARKS, SCARS, OR TATTOOS
LEFT MIDDLE FINGER	WEAPON AND SERIAL No.		LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
	OTHER IDENTIFICATION CLUES			
LEFT INDEX FINGER	FILLINGS  SILVER FILLING GOLD FILLING			
LEFT THUMB	CAVITIES  CAVITY DECAYED			
RIGHT THUMB	MISSING TEETH  TOOTH MISSING			
RIGHT INDEX FINGER	CROWNED TEETH  PORCELAIN CROWN GOLD CROWN			
RIGHT MIDDLE FINGER	BRIDGE WORK  GOLD BRIDGE			
RIGHT RING FINGER				
RIGHT LITTLE FINGER	FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY <div style="text-align: right; margin-top: 20px;">  </div>			
	REMARKS:			
	Identification Check List accomplished.			

10 FEB 1949

RE--  
**REPORT OF INTERMENT**  
(TM 10-630 AND AR 30-1815)

UNKNOWN X-53

(Last name) (First) (Initial) (Serial number) (Rank) (Organization)  
Soputa Killerton Tract Dec 1942 KIA

(Place of death) (Date of death) (Cause of death)

1000 hrs. 2 April 1945 USAF Cem Fischhafen #2, N.G.  
(Time and date of burial) reburial (Name of cemetery) (Name or co-ordinates of location)

Disinterref from grave 149 USAF Cem, Soputa #1, N.G. as Unknown X-24

1276 Cross-regulation w/plate  
(Grave number) (Row number) (Plot number) (Type of marker—Regulation V-shaped or other)

Disposition of identification tags: Buried with body Yes  No  Attached to marker Yes  No

Religion

CERTIFIED TRUE COPY

*Saul J. Tonn*  
P. J. TONN, Capt., CMIC  
(If no identification tags, what means of identification are buried with the body?)  
(If no identification tags, but identity definitely established, give particulars)

Body buried on RIGHT Barker, Russell N. 39019762 Pvt 1277  
(Name) (Serial number) (Rank) (Organization) (Grave number)

Body buried on LEFT Keast, Roger 0-315798 Capt Anti Tank 126 Inf 1275  
(Name) (Serial number) (Rank) (Organization) (Grave number)

///  
(Name and address of EMERGENCY ADDRESSEE) (Name and address of LEGAL NEXT OF KIN)

List only personal effects FOUND ON BODY and disposition of same:

997

RESTRICTED

**IF DECEASED UNIDENTIFIED**

**TAKE FINGERPRINTS OF BOTH HANDS** (W. D. Cir. No. 79; 3/19/43). If unable to obtain a complete set of fingerprints, **TAKE THOSE YOU CAN**, and fill in as many of the following as you are able :

Height :	Apparent nationality :
Weight :	Laundry marks :
Color of eyes :	Number of rifle :
Color of hair :	Wear glasses ?
Race :	Is tooth chart attached ?

(If possible, have medical personnel take a tooth chart)

In space below, locate and describe any scars, birthmarks, moles deformities, etc. :

Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc. :

**IF THIS IS AN ISOLATED BURIAL, ATTACH A SKETCH OF THE LOCATION, ORIENTED WITH PERMANENT LANDMARKS.**

GEORGE A. ROSS, M/Sgt., GRS  
(Signature of officer or other person reporting burial)

CHARLES R. MYERS, LT., CMC  
(Verified by Army GRS Officer)

LEFT HAND

4

3

2

1

THUMB

4

3

2

1

THUMB

RIGHT HAND

**RESTRICTED**

RE

**REPORT OF INTERMENT**

(TM 10-630 AND AR 30-1815)

1500

1500

UNKNOWN X-53

(Last name) (First) (Initial) (Serial number) (Rank) (Organization)  
 Soputa Killerton Tract December 1942 KIA  
 (Place of death) (Date of death) (Cause of death)

1000 hrs. 2 April 1945 USAF CEMETERY, FINSCHHAFEN #2, N.G.  
 (Time and date of burial) reburial (Name of Cemetery) (Name of coordinates of location)

Disinterred from Grave ~~###76#~~ 149 USAF Cemetery, Soputa #1, N.G. *as Unknown*

1276

Cross-regulation w/plate

(Grave number) (Row number) (Plot number) (Type of marker—Regulation V-shaped or other)  
 Disposition of identification tags: Buried with body Yes  No  Attached to marker Yes  No

(If no identification tags, what means of identification are buried with the body?)

(If no identification tags, but identify definitely established, give particulars)

Religion

Body buried on RIGHT BARKER, Russell N. 39 019 762 Pvt. 1277  
 (Name) (Serial number) (Rank) (Organization) (Grave number)

Body buried on LEFT KEAST, Roger 0 315 798 Capt 126 Inf 1275  
 (Name) (Serial number) (Rank) (Organization) (Grave number)

1000

(Name and address of EMERGENCY ADDRESSEE)

(Name and address of LEGAL NEXT OF KIN)

List only personal effects FOUND ON BODY and disposition of same:

**RESTRICTED**

IF DECEASED UNIDENTIFIED

TAKE FINGERPRINTS OF BOTH HANDS (W. D. Cir. No. 79; 3/19/43).  
If unable to obtain a complete set of fingerprints, TAKE THOSE YOU  
CAN, and fill in as many of the following as you are able:

Height:	Apparent Nationality:
Weight:	Laundry marks:
Colour of eyes:	Number of rifle:
Colour of hair:	Wear glasses?
Race:	Is Tooth chart attached?

(If possible, have medical personnel take a tooth chart)

In space below, locate and describe any scars, birthmarks, moles,  
deformities, etc.:

Note below any identifying clues found, such as letters, photographs,  
probable organization of deceased, etc.:

IF THIS IS AN ISOLATED BURIAL, ATTACH A SKETCH OF THE  
LOCATION, ORIENTED WITH PERMANENT LANDMARKS.

*GEO. A. ROSS*  
GEO. A. ROSS, II SGT., GRS.

(Signature of officer or other person reporting burial)

*Charles R. Myers*  
CHARLES R. MYERS, LT., OMC.

(Verified by Army GRS Officer)

LEFT HAND

THUMB

RIGHT HAND

THUMB

RECEIVED  
8 MAY 1945

REPORT OF INTERMENT

(TM 10-630 AND AR 30-1815)

CONFIDENTIAL 1500

UNKNOWN X 21 Soputa No. 1 126 Inf. 1943  
 (Last name) (First) (Initial) (Serial number) (Rank) (Organization)  
 Soputa-Killerton Tract December 1942 K.I.A.  
 (Place of death) (Date of death) (Cause of death)  
 3 3/4 miles N. Soputa  
 1400 hours, April 26, 1943 U.S.T.C. No. 1, Soputa, N.G.  
 (Time and date of burial) (Name of cemetery) (Name or coordinates of location)

149 11 Temp. Grave Marker  
 (Grave number) (Row number) (Plot number) (Type of marker—Regulation V-shaped or other)  
 Disposition of identification tags: Buried with body Yes  No  Attached to marker Yes  No   
 Skeleton found at map Ref. 17.4-26.3 (Gona locality Rev. Scale  
 4" to the miles Dec. 1942) on April 26, 1943. Only identification  
 possible - Bayonet No. 1052379  
 (If no identification tags, what means of identification are buried with the body?)

Religion  
 (If no identification tags, but identity definitely established, give particulars)  
 Body buried on RIGHT STAUB, Herman E., Pfc., 37071568, Co. C. 163 Inf. 150  
 (Name) (Serial number) (Rank) (Organization) (Grave number)  
 Body buried on LEFT Unidentified American Soldier 148  
 (Name) (Serial number) (Rank) (Organization) (Grave number)

(Name and address of EMERGENCY ADDRESSEE) (Name and address of LEGAL NEXT OF KIN)  
 List only personal effects FOUND ON BODY and disposition of same:

CONFIDENTIAL



IF DECEASED UNIDENTIFIED

TAKE FINGERPRINTS OF BOTH HANDS (W. D. Cir. No. 79 : 3/19/43). If unable to obtain a complete set of fingerprints, TAKE THOSE YOU CAN, and fill in as many of the following as you are able :

Height : Apparent nationality :

Weight : Laundry marks :

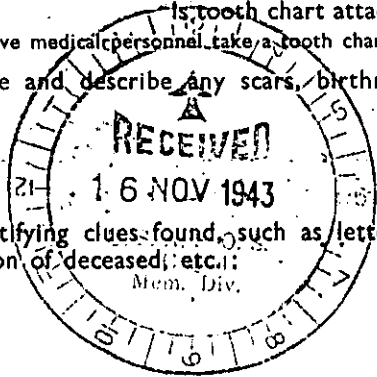
Color of eyes : Number of rifle :

Color of hair : Wear glasses ?

Race : Is tooth chart attached ?

(If possible, have medical personnel take a tooth chart)

In space below, locate and describe any scars, birthmarks, moles deformities, etc. :



Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc. :

IF THIS IS AN ISOLATED BURIAL, ATTACH A SKETCH OF THE LOCATION, ORIENTED WITH PERMANENT LANDMARKS.

S/Sgt. Turner

(Signature of officer or other person reporting burial)

JAMES T. McCONAGHEY

2nd (Verified by Army GRS Officer)

Adv. Base GRO

LEFT HAND

4

3

2

1

THUMB

4

3

2

1

THUMB

RIGHT HAND

# REPORT OF INTERMENT

1500  
Out to

(To be submitted through channels to the Quartermaster General, Washington, D.C.)

293 *Guinea (Unknown)* (Par. 21d) TM 10-630

UNIDENTIFIED AMERICAN SOLDIER

(Last Name) (First) (Initial) (Serial No.) (Rank) (Organization)

Soputa-Killerton tract

3 3/4 miles N. Soputa.

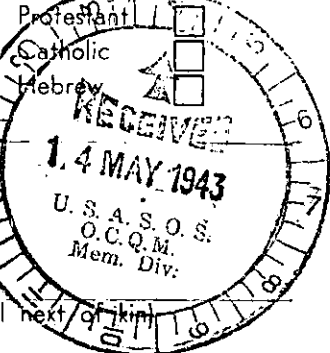
(Place of Death) Dec. 1942 (Date of Death) K.I.A. (Cause of Death)

1400 Hours, April 26, 1943

(Time and Date of Burial) U.S.T.C. # 1, Soputa, N. G. (Place of Burial - Name and No. of Cemetery, if in a cemetery)

149 11 Temp <sup>G</sup> grave Marker Buried with body  Alum. disc on body and marker  
(Grave No.) (Row No.) (Plot No.) (Kind Grave Marker) (Identification Tags)  Attached to marker

Skeleton found at map Ref. of 17.4 - 26.3, (Gona Locality Rev., Scale 4" to the mile, Dec. 1942) on April 26, 1943. Only identification possible - Bayonet # 1052379.



Other pertinent data to enable grave to be located.  
(Where necessary sketch to locate grave should be furnished)

Unknown. *293 Guinea (Unknown)*

(Name and address of Emergency Addressee) (Name and address of legal next of kin)

Fingerprints (right hand) if right hand missing furnish prints of left hand.

(Required when positive identity cannot otherwise be established) (Par. 25e (2)  
TM 10-630)

Place X mark  
below when  
prints are of  
left hand



Thumb	1	2	3	4

List of personal effects and disposition of same

(Name, rank, serial number, organization, grave numbers of bodies buried on either side:)

On Right— STAUB, Herman E., Pfc., 37074568, Co C, 163 Inf., Grave # 150.

On Left— UNIDENTIFIED AMERICAN SOLDIER, GRAVE NO. 148.

S/Sgt. TURNER

Signature of Officer or other person reporting Burial.

*James T. McConnaughey*  
JAMES T. McCONNAUGHEY

Verified by Army G.R.S. Officer.

Adv. Base GRO.

Prepare in triplicate—1 copy to Army G.R.S. Officer—1 copy to Chief, G.R.S.—Original to the Q.M.G.

Graves Registration  
Form No. 1  
(Revised May 11, 1943)

RE-  
**REPORT OF INTERMENT**  
(TM 10-630 AND AR 30-1815)

1500

279

UNKNOWN X-53

(Last name) (First) (Initial) (Serial number) (Rank) (Organization)

Soputa Killerton Tract (Place of death) Dec 1942 (Date of death) KIA (Cause of death)

1000 hrs. 2 April 1945 (Time and date of burial) reburial USAF Cem Fischhafen #2, N.G. (Name of cemetery) (Name or co-ordinates of location)

Disinterref from grave 149 US F Cem, Soputa #1, N.G. as Unknown X-24

1276

Cross-regulation w/plate

(Grave number) (Row number) (Plot number) (Type of marker—Regulation Y-shaped or other)

Disposition of identification tags: Buried with body Yes  No  Attached to marker Yes  No

Religion

CERTIFIED TRUE COPY

*Saul Tom*  
P. J. TOM, Capt., GIC (If no identification tags, what means of identification are buried with the body?)

(If no identification tags, but identity definitely established, give particulars)

Body buried on RIGHT Barker, Russell N. 39019762 Pvt. 1277  
(Name) (Serial number) (Rank) (Organization) (Grave number)

Body buried on LEFT Keast, Roger O-315798 Capt. Anti Tank 126 Inf. 1275  
(Name) (Serial number) (Rank) (Organization) (Grave number)

(Name and address of EMERGENCY ADDRESSEE)

(Name and address of LEGAL NEXT OF KIN)

List only personal effects FOUND ON BODY and disposition of same:

(21)

997

RESTRICTED