

293 - Unk - P.I. (Misc) Maus, Manila X-1437 X-1547 X-1559 X-1561 X-2260

QUART 293  
GRS Far East

12 December 1949

SUBJECT: Identification of World War II Deceased

TO: Commanding Officer  
American Graves Registration Service  
Philcom Zone  
APO 900, c/o Postmaster  
San Francisco, California

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

Unknown X-1437	(Formerly X-220, Sta. Barbara #1)
Unknown X-1547	(Formerly X-78, Finsch # 2)
Unknown X-1559	(Formerly X-38, Finsch # 2)
Unknown X-1561	(Formerly X-71, Finsch # 2)
Unknown X-2260	(Formerly X-642, Leyte # 1)

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

FOR THE QUARTERMASTER GENERAL:

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

Copy  
eb

X 293 Unk. P.I. X-1561 (Maus. Manila)



[Faint, mostly illegible text, possibly a list or report]

COPY:

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
PHILCOM ZONE

GRPZ 293

AFO 900  
22 November 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 QMGWU 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-265	Island Command	UNKNOWN X-1437	AGRS Mslm
" X-1002	AGRS Mslm	" X-1547	"
" X-1169	" "	" X-1559	"
" X-1275	" "	" X-1561	"
" X-1315	" "	" X-1740	"
" X-1391	" "	" X-2260	"
" X-1421	" "		

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

FOR THE COMMANDING OFFICER:

JOHN SHYPULA  
1st Lt., Infantry  
Adjutant

13 Incls

QMC Forms 1044 w/Certificates  
of Unidentifiability

C  
O  
P  
Y

AIRMAIL

QRCMT 293 *unk N. G. X-71 (Finschhafen #2)*  
~~Unknown X-1561~~  
~~AGRS Mausoleum, Manila, P.I.~~ 6 September 1949

*X 293 unk P. I. X-1561 (Manila, Manila)*

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. Proceedings of the Field Board of Review recommending that the remains of Unknown X-1561, AGRS Mausoleum, Manila, P.I., (formerly Unknown X-71, USAF Cemetery #2, Finschhafen, N. G.) be identified as 1/4 Oscar C. Burnett, 3615636, are returned herewith disapproved for the following reasons:

a. Height listed on Army records on 1/4 Burnett does not compare favorably with that listed on QMC forms accomplished for Unknown X-1561.

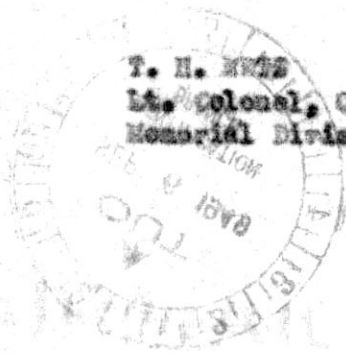
b. The dental information available on Army records for 1/4 Burnett is very meager. Dental comparisons of charts accomplished for 1/4 Burnett are not contradictory with dental data for Unknowns X-1547 and X-2707, AGRS Mausoleum, Manila, recovered from same area as Unknown X-1561. There are several Unknown remains recovered from this area for which dental charts could not be accomplished.

2. In view of the above it is requested that further investigation be conducted by your headquarters and findings forwarded upon completion thereof.

FOR THE ACTING THE QUARTERMASTER GENERAL:

1 Incl:  
Ed Proceedings (Burnett)

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



J. Miller:lre  
Salser  
JW  
cc--Administrative Section  
cc--Cincfe

REB  
TEC

62-111110  
COMMUNICATIONS SECTION  
24  
OFFICE  
WASHINGTON



INSTRUCTIONS (REVISED)  
1. [Illegible]

FOR THE [Illegible]

SECTION

1. [Illegible]

2. [Illegible]

3. [Illegible]

4. [Illegible]

5. [Illegible]

6. [Illegible]

7. [Illegible]

8. [Illegible]

9. [Illegible]

10. [Illegible]

11. [Illegible]

12. [Illegible]

**AIRMAIL**

*att*

QMGAT 293

Unknown X-1561

AGRS Mausoleum, Manila, P.I.

*Unk N.G. X-71 (Finschhafen #2)*

6 September 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. Proceedings of the Field Board of Review recommending that the remains of Unknown X-1561, AGRS Mausoleum, Manila, P.I., (formerly Unknown X-71, USAF Cemetery #2, Finschhafen, N. G.) be identified as T/4 Oscar C. Burnett, 36155636, are returned herewith disapproved for the following reasons:

a. Height listed on Army records on T/4 Burnett does not compare favorably with that listed on QMC forms accomplished for Unknown X-1561.

b. The dental information available on Army records for T/4 Burnett is very meager. Dental comparisons of charts accomplished for T/4 Burnett are not contradictory with dental data for Unknowns X-1547 and X-2709, AGRS Mausoleum, Manila, recovered from same area as Unknown X-1561. There are several Unknown remains recovered from this area for which dental charts could not be accomplished.

2. In view of the above it is requested that further investigation be conducted by your headquarters and findings forwarded upon completion thereof.

FOR THE ACTING THE QUARTERMASTER GENERAL:

*X 293 Burnett, Oscar C. 36155636*  
*X 293 Unk P.I. X-1561 (manus, Manila)*

1 Incl:  
Bd Proceedings (Burnett)

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

REB

*X 293 Unk P.I. X-1547, X-2709 (manus, Manila)*

TEC

*J.M.*  
J. Miller:lre  
Salser  
JW

cc--Administrative Section  
cc--Cincfe

**AIRMAIL**  
SEP 15 1949

10-10-49  
10-10-49  
10-10-49  
10-10-49  
10-10-49



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JIANBIA

QMGMV 293

BURNETT, Oscar C.  
T/4 36155636

1 September 1949

SUBJECT: Identification of World War II Deceased

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

1. Proceedings of the Field Board of Review, recommending that the remains of Unknown X-1561, AGNS Mausbleum, Manila, P.I., (formerly Unknown X-71, USAF Cemetery #2, Finschhafen, N. G.) be identified as T/4 Oscar C. Burnett 36155636, are returned herewith disapproved for the following reasons:

a. Height listed on Army records of T/4 Burnett does not compare favorably with that listed on ~~MC~~ forms accomplished for Unknown X-1561.

b. The dental information available on Army records for T/4 Burnett is very meager. Dental comparisons of charts accomplished for T/4 Burnett are not contradictory with dental data for Unknowns X-1547 and X-2709, recovered from same area as Unknown X-1561. There are several Unknown remains for which dental charts could not be accomplished from this area.

2. In view of the above it is requested that further investigation be conducted by your headquarters and finding forwarded upon completion thereof.

FOR THE ACTING THE QUARTERMASTER GENERAL:

1 Incl  
Ed Proceedings (Burnett)

J. Miller:lro  
Salsar  
JW  
cc--Administrative Section  
cc--Cincfe

T. B. STE  
Lt. Colonel  
Medical Division



REB

TEC



QMGT 293

BURNETT, Oscar C.

T/4 36156636

1 September 1948

SUBJECT: Identification of World War II Deceased

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

1. Proceedings of the Field Board of Review, recommending that the remains of Unknown X-1561, AGCS Mausoleum, Manila, P.I., (formerly Unknown X-71, USAF Cemetery #2, Finschhafen, N. G.) be identified as T/4 Oscar C. Burnett 36156636, are returned herewith disapproved for the following reasons:

a. Height listed on Army records of T/4 Burnett does not compare favorably with that listed on ~~MC~~ forms accomplished for Unknown X-1561.

b. The dental information available on Army records for T/4 Burnett is very meager. Dental comparisons of charts accomplished for T/4 Burnett are not contradictory with dental data for Unknowns X-1547 and X-2709, recovered from same area as Unknown X-1561. There are several Unknown remains for which dental charts could not be accomplished from this area.

2. In view of the above it is requested that further investigation be conducted by your headquarters and finding forwarded upon completion thereof.

FOR THE ACTING THE QUARTERMASTER GENERAL:

1 Incl  
M Proceedings (Burnett)

J. Miller:lro  
Salser  
JW  
cc--Administrative Section  
cc--Cincfe

T. H. WITZ  
Lt. Colonel  
Memorial Division



REB

TEC

NOV 10 1950



NOV 10 1950

NOV 10 1950

NOV 10 1950

NOV 10 1950

NOV 10 1950

NOV 10 1950

NOV 10 1950

J. Miller  
Investigator

DISAPPROVAL OF FIELD BOARD FINDINGS

Field Board Findings received recommending the individual identification of Unknown X-1561 as T/4 Oscar C. Burnett, 36155636.

T/4 Burnett, of Company "L", 126th Infantry Regiment, 32nd Infantry Division, was killed in action at Soputa, Sanananda Track, New Guinea, 1 Jan 1943.

The remains were found (skeleton only) 28 March 1943 and buried in USTC #3, Sanananda, N.G., Grave 25. Subject Unknown was interred in USTC #1, Soputa, N.G., Grave 226, 5 May 1943, as Unknown X-32. Subject remains were reinterred USAF Cemetery, Finschhafen #2, N.G., 2 April 1945, as Unknown X-71, and are now stored at the AGRS Mausoleum, Manila, P.I., as Unknown X-1561.

Height listed on Army forms for T/4 Burnett does not compare favorably with that listed on QMC forms accomplished for Unknown X-1561.

Several unresolved unknown remains for which complete dental charts could not be accomplished were recovered from the same area. The dental information available on Army records for T/4 Burnett is very meager. Dental comparisons of charts accomplished for T/4 Burnett are not contradictory with dental data for Unknowns X-1547, X-2709 and X-1561.

In view of the above, it is recommended that the individual identification of Unknown X-1561, as proposed by the Field, be disapproved.

*C. B. Salser*  
*pk*  
*gpk*

1 M

1 /drs

Interred 18 January 1950  
H. 3 140 Ft. McKinley  
*Caremark*  
CARL R. H. MARK

DISINTERMENT DIRECTIVE

Cemetery Superintendent  
SECTION A -  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER  
6911 00233

DATE  
15 01 48  
DAY MONTH YEAR

NAME		SERIAL NUMBER		RANK	ARM	DATE OF DEATH	
		UNKNOWNX-000071			Q		
CEMETERY						DISPOSITION OF REMAINS	
BRITISH GUINEA USAF (FINSCHAFFEN NO 20)						7701 80	
						CODE	DIST. PT.
LOT	ROW	GRAVE	COUNTRY		CAUSE OF DEATH		
		2108	NEW GUINEA		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
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SECTION C - DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISTINTERRED
UNKNOWN X-1561 (MAUSOLEUM) UNK X-000071 (Finsch. #2)				17 May 48
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	ORGANIZATION UNKNOWN	RELIGION	IDENTIFICATION VERIFIED BY HENRY P. SMITH Embalmer NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Shelter Half	CONDITION OF REMAINS Skeletal
----------------------------------	----------------------------------

OTHER MEANS OF IDENTIFICATION  
UNK X-71

MINOR DISCREPANCIES /

REMAINS PREPARED AND PLACED IN CASKET

DATE 17 May 48 BY HENRY P. SMITH

CASKET SEALED BY HENRY P. SMITH	EMBALMER (Signature) <i>Henry P. Smith</i> HENRY P. SMITH
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CASKET BOXED AND MARKED DATE 17 May 48 BY 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.

NAT FILE RECORDS ANNOTATED  
DATE 6 Feb 50  
CAMERON P. WILEY, 1st Lt., USAFR  
SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194 for major discrepancies.  
*J. Brooks*  
S. P. R. ER.

# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

FROM AHS Remains Depot		TO Supt. Memorial Cemetery P.I.	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER J. BULAWAN, Capt., Cav.	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Carrollmark</i>	DATE JAN 18 1950

## 2. SHIPPED

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

## 3. SHIPPED

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 (BY ADMINISTRATIVE ORDER)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

## 6. SHIPPED

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

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
PHILCOM ZONE

21 Oct. 1949

Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 71, Plot \_\_\_\_\_,  
Row \_\_\_\_\_, Grave 2108, USMC USAF Cem. #2, Finsch. \_\_\_\_\_ 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

*Incl III*

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IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-1561 (Formerly UNK X-71 Finsch #2)				2. DATE OF REPORT 24 Oct 1949	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.	4. PLOT 810	5. ROW A	6. GRAVE 161	7. DATE OF	
				DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT 5'6 7/8"	10. COLOR OF HAIR UTD	11. RACE Unknown
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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

**"UNIDENTIFIABLE"**

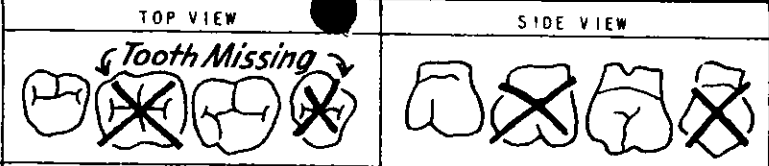
**"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"**

Incl 11<sup>2</sup>

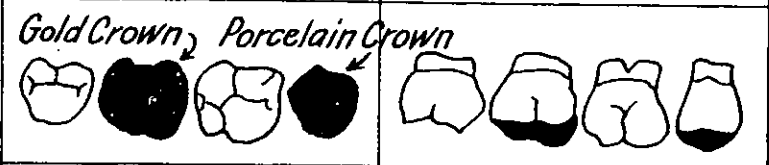
18.

TOOTH CHART

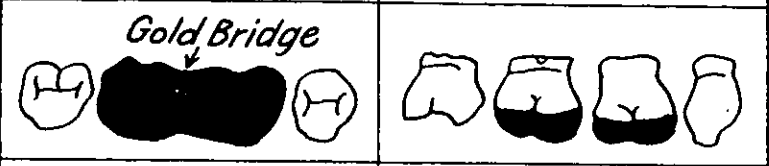
MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED THUS:



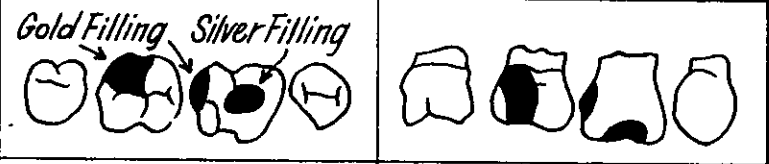
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:



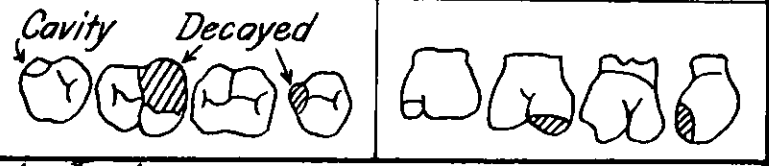
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:



CARIES (Cavities): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:



*fractured*

RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
<i>Mandibular Missing</i>								<i>Maxillary Missing</i>							
Side Views								Side Views							
Top Views								Top Views							
Side Views								Side Views							
UPPER								LOWER							
↑	<del>A</del> O	<del>A</del> O	B	B		B	B	B	<del>F</del> O	<del>F</del> O	B		<del>A</del> O	X	↑
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

*See remarks* *partially impacted*

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."

R16 is partially impacted in horizontal position.

*Paul R. Nichols*

PAUL R. NICHOLS  
Chief, Ident Sec

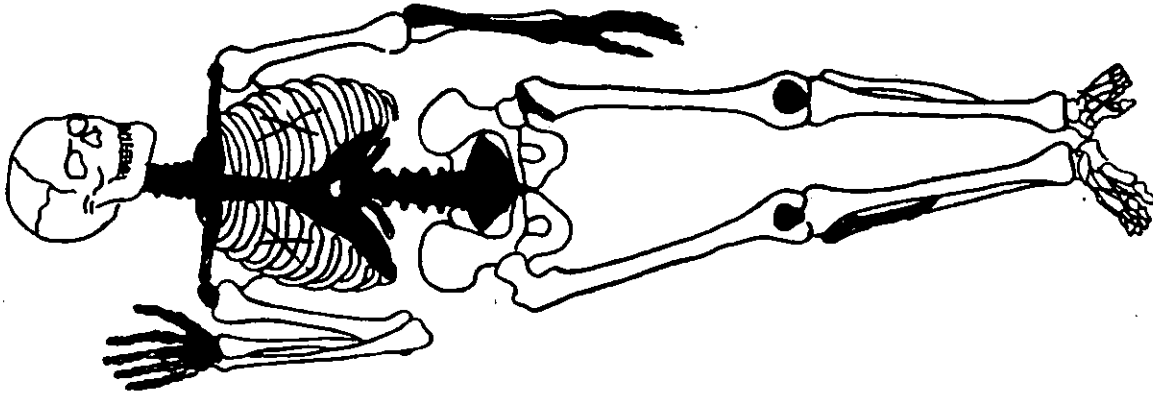
**"UNIDENTIFIABLE"**

BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA



19. BLACKOUT PARTS OF BODY NOT RECOVERED

Ribs  
I Thoracic Vertebrae



Estimated height: 5'6 7/8"

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.- 5 lbs.

Circumference of skull - 22 inches.

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  
PAUL R NICHOLS  
Chief, Identification Section

SIGNATURE

Paul R. Nichols

/88

# IDENTIFICATION DENTAL CHART

TO BE USED WITH QMC FORMS NOS. 1042 & 1044 IN PLACE OF CHART THEREON, AND TO BE ATTACHED TO AND FORWARDED WITH THESE FORMS WHEN ACCOMPLISHED.

UNKNOWN X-1561 (Formerly Unk X-71)  
 USAF Cem #2, Finschhafen, N. G.)

10th Nov 47  
 DATE

Unknown  
 RANK

Unknown  
 SERIAL NO.

Unknown  
 UNIT  
 Soputa-Sanananda Area,  
 New Guinea  
 PLACE OF DEATH

AGRS Mausoleum  
 Manila, P.I.  
 PLACE OF BURIAL

ORGANIZATION

810 A 161  
 PLOT ROW GRAVE NO.  
 WANGER BAY CRYPT

STORAGE fractured















missing				RIGHT	UPPER TEETH				LEFT	missing					
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
			⊗				⊗	⊗	⊗						
TYPE															TYPE
LOCATION															LOCATION

INSIDE — LOOKING OUT

partially impacted				RIGHT	LOWER TEETH				LEFT	partially impacted					
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16
	○	⊗	⊗			⊗	⊗	⊗	↑		⊗		⊗	⊗	
TYPE															TYPE
LOCATION															LOCATION

See remarks

## KEY OF SYMBOLS TO BE USED ON ABOVE CHART

SYMBOLS IN WHOLE BOX	TYPE OF FILLING IN UPPER HALF OF BOX	LOCATION OF FILLING IN LOWER HALF OF BOX
 EXTRACTED	 AMALGAM (SILVER)	 MESIAL (BETWEEN-TOWARD FRONT)
 CAVITY INDICATE LOCATION	 GOLD	 OCCLUSAL (BITING SURFACE BACK TEETH)
 FIXED BRIDGE (INCL. ABUTMENTS)	 SILICATE OR PORCELAIN	 DISTAL (BETWEEN-TOWARD BACK)
 TEETH REPLACED BY DENTURE	 OXYPHOSPATE (CEMENT)	 LINGUAL (TOWARD TONGUE)
 POSTHUMOUSLY MISSING (LOST AFTER DEATH)		 FACIAL (TOWARD CHEEK)

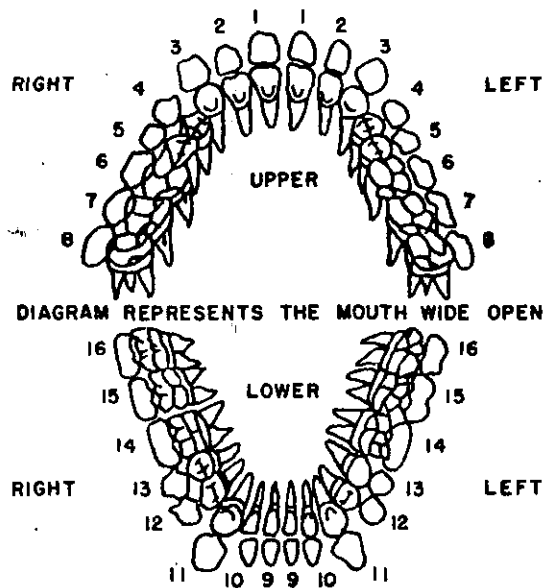
**INSTRUCTIONS:**

1. ACCURACY AND ATTENTION TO DETAIL IN THE PREPARATION OF THIS CHART ARE OF PARAMOUNT IMPORTANCE, IF SAME IS TO BE OF MAXIMUM VALUE.

2. NOTE CAREFULLY THAT: SYMBOLS INDICATING MISSING TEETH, CAVITIES AND BRIDGE-WORK ARE TO BE INSERTED IN WHOLE BOX; SYMBOLS INDICATING TYPE OF FILLING ARE TO BE INSERTED IN UPPER HALF OF BOX; AND SYMBOLS INDICATING LOCATION OF FILLING ARE TO BE INSERTED IN LOWER HALF OF BOX.

3. ANY ABNORMALITIES SUCH AS MALPOSED, MALFORMED OR DISCOLORED TEETH, ETC. SHOULD BE NOTED. DENTAL WORK NOT COVERED ABOVE WILL BE INDICATED, e.g., PORCELAIN CROWNS, GOLD CROWNS (FULL OR 3/4), 3/4 GOLD CROWN WITH SILICATE WINDOW.

4. FOR INFORMATION OF STANDARD NUMBERING OF TEETH, SEE DIAGRAM BELOW.



**REMARKS:** Fractured between R1 and L1 of maxilla L-10 of mandible malposed.

/s/ Cirilo R. Sario  
SIGNATURE OF PERSON WHO PREPARED CHART

/s/ John H. Bennett Jr.  
VERIFIED BY GRS OFFICER

/p/ CIRILO R. SARIO  
NAME AND RANK TYPED OR PRINTED

/p/ JOHN H. BENNETT JR.  
NAME AND RANK TYPED OR PRINTED

CIP Mausoleum Manila, P.I.  
PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

10 Nov 47  
DATE

CERTIFIED TRUE COPY:

*George T. Gamboa*  
GEORGE T. GAMBOA  
2d/Lt MAC

## IDENTIFICATION CHECK LIST

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

788

UNKNOWN X-1561 (Formerly  
 Unknown X -71 USAF Cem #2 Finsch, N.G.)  
 Cemetery AGRS Mausoleum, Manila, P.I.  
 Plot 810 HANGER Row A BAY A CRYPT Grave 161

CIP, AGRS Mausoleum, Manila, P.I.

1. Arrived at ~~cemetery~~ 10 Nov 47  
(Hour) (Date)
2. Place of death Soputa, Sanananda Area, N.G.  
(Name of closest town) (Coordinates and letter Prefix, maps)  
(Sheet, scale and serials used)
3. Remains recovered or disinterred by DST #2, AGRS  
(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	N		
Mackinaw	O		
Sweater	N		
Jacket, HBT	E		
* Shirt, Wool OD	//		
Undershirt, Wool	//		
Undershirt, Cotton	//		
Trousers, HBT	//		
* Trousers, Wool OD	//		

Belt, web //  
 Drawers, wool //  
 Drawers, cotton //  
 Leggings, wool //  
 Socks, cotton // N  
 \* Shoes // O (type) E  
 Overshoes //  
 Web Equipment // (type)  
 (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 // Est. Height 5' 6 7/8" // Est. Weight UTD // 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 // T D (Light, medium, dark, clear, pimples, pocks, freckles)  
 Build // (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 ..... (Color, setting, shape)      Eyebrows ..... (Color, bushiness, extent across nose)

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

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

Teeth **See tooth chart.** ..... (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw ..... (Large, small, normal)      Circumference of ~~neck~~ **skull** in inches **Est. 22"** ..... (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 ..... (Short, thick, long, slender, size of knuckles, missing fingers or joints)

Fingers ..... (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 ..... (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? Yes If not, explain

(Yes-no)

9. Remarks No ROI bottle found, no I.D. tags or personal effects found with remains. Estimated weight of remains 5 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:

*George T. Gamboa*  
GEORGE T. GAMBOA  
2d Lt MAC

/s/ Alton E. Jones

(Officer's Name)

SP-6 062812

Rank

Service

CIP, AGRS Mausoleum, Manila, P.I.

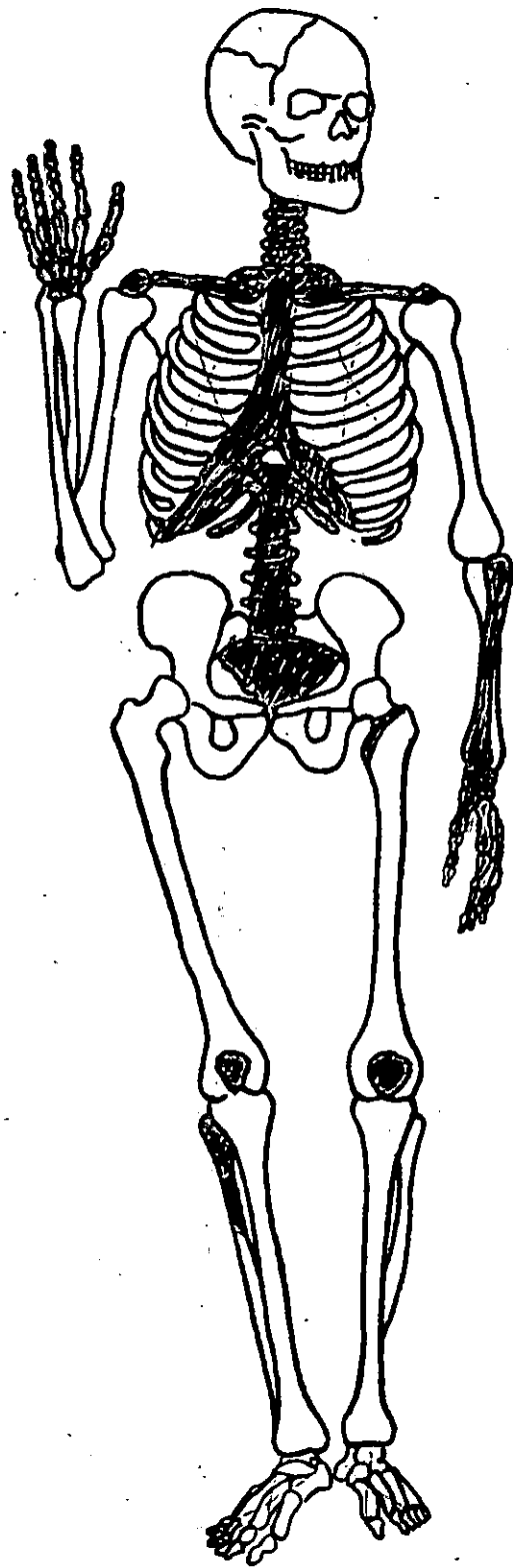
(Organization)

10 Nov 47

X-1561

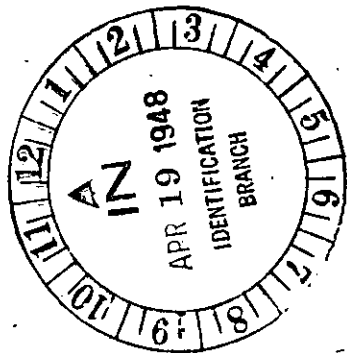
# SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



10 ribs present  
1 Thoracic vertebrae present.





**REGISTER OF DENTAL PATIENTS AT**

**UNKNOWN X-32 Grave 226**

(1) SURNAME

(2) CHRISTIAN NAME

**SOPOTA #1**

(3) RANK

(4) COMPANY

(5) REGIMENT OR STAFF CORPS

(6) AGE, YEARS

(7) RACE

(8) NATIVITY

(9) SERVICE, YEARS

											(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.
											(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS
											(12) RESULTS AND REMARKS

*Dental Corps, U. S. A.*

# \*REPORT OF DENTAL SURVEY

## UPPER TEETH

Right								Left							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
X		O	X				X	X	X						

## LOWER TEETH

Right									Left						
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16
X	A	A	X	X			X	X						X	X

CLASS .....

Occlusion .....: Calculus: Slight, Medium, Heavy

Periodontoclasia .....

Dental foci suspected:      Yes                      No

Other conditions .....

*L15 missing, extracted*  
*U, L2, L9, missing, not extracted*  
*R1, R5, R9, R12, R13 missing, not extracted*  
*R8, R16, L16, impacted*

Date *18 Sept*, 19 *44*

*[Signature]*  
 Dental Corps, U. S. A.

\*Restorable carious teeth by O  
 Nonrestorable carious teeth by /  
 Missing natural teeth by X

Teeth replaced by denture  
 (horizontal line)

X	X	X

Teeth replaced by fixed bridge  
 (oval to include abutments)

(	X	)

**REGISTER OF DENTAL PATIENTS AT**

**UNKNOWN X-32      Grave 226**

(1) SURNAME

(2) CHRISTIAN NAME

**SOPUTA #1**

(3) RANK

(4) COMPANY

(5) REGIMENT OR STAFF CORPS

(6) AGE YEARS

(7) RACE

(8) NATIVITY

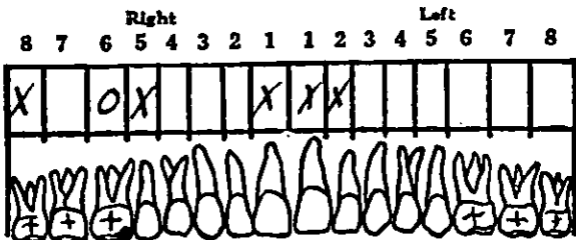
(9) SERVICE YEARS

										(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.
										(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS
										(12) RESULTS AND REMARKS

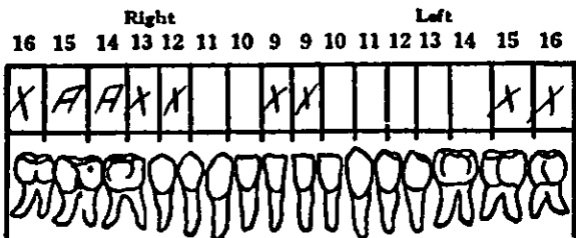
*Dental Corps, U. S. A.*

# \*REPORT OF DENTAL SURVEY

## UPPER TEETH



## LOWER TEETH



CLASS .....

Occlusion .....: Calculus: Slight, Medium, Heavy

Periodontoclasia .....

Dental foci suspected:            Yes                            No

Other conditions .....

*L15 missing, extracted*  
*L1, L2, L9 missing, not extracted*  
*R 9, R5, R9, R12, R13 missing, not extracted*  
*R8, R16, L16 impacted*

Date ..... *18 Sept.* ..... 19 *44*

*Sgt. Burton L. Lator*  
 Dental Corps, U. S. A.

\*Restorable carious teeth by O  
 Nonrestorable carious teeth by /  
 Missing natural teeth by X

Teeth replaced by denture  
 (horizontal line)



Teeth replaced by fixed bridge  
 (oval to include abutments)

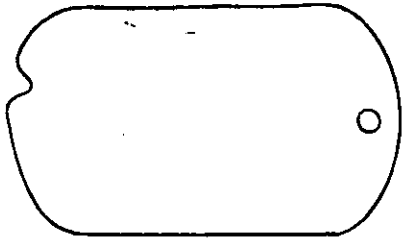


WD QMC FORM 1042  
(Rev. 1 Apr. 1945)  
(Supersedes GRS Form 1)

**REPORT OF INTERMENT STORAGE**  
(AR 30-1810 and AR 30-1815)

DATE OF REPORT

14 Nov 47

<p><i>Imprint Identification Tag If Possible. DO NOT TYPE</i></p> 	<p><b>Section 1.—IDENTIFICATION.</b></p>	
	<p>NAME (Last, first, middle initial) <b>UNKNOWN X-1561 (Formerly Unk X-71 USAF Cem #2, Finschhafen, N.G.)</b></p>	<p>SERIAL No. <b>Unknown</b></p>
	<p>GRADE <b>Unknown</b></p>	<p>ORGANIZATION <b>Unknown</b></p>
	<p>RACE <b>Unknown</b></p>	<p>RELIGION <b>Unknown</b></p>
<p>PLACE OF DEATH <b>Soputa-Sanananda Area, New Guinea</b></p>		<p>CAUSE OF DEATH <b>Unknown</b></p>
<p>EMERGENCY ADDRESSEE (Name, relationship, and address) <b>Unknown</b></p>		<p>BRANCH OF SERVICE <b>Unknown</b></p>
<p>IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY</p>		<p>DATE OF DEATH <b>Unknown</b></p>

<p>IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) <b>None</b></p>	<p>IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)</p>
<p>WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) <b>Yes (2)</b></p>	

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 <b>12 Nov 47</b>	HOUR <b>0830</b>	BURIED IN (Shroud, blanket, or name of other) <b>STOP : : Casket</b>	TYPE OF GRAVE MARKER <b>None</b>	PLOT No. <b>810</b>	ROW No. <b>A</b>	GRAVE No. <b>CRYPT 161</b>
------------------------------------	---------------------	---	-------------------------------------	------------------------	---------------------	-----------------------------------

<p>WAS THIS A REBURIAL? (Yes or no) <b>RESTORED</b> <b>Yes</b></p>	<p>IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE</p> <p><b>USAF Cemetery #2, Finschhafen, New Guinea</b></p>	<p>PLOT No.</p>	<p>ROW No.</p>	<p>GRAVE No. <b>2108</b></p>
--	--	-----------------	----------------	----------------------------------

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) <b>STOP : : STORED</b> <b>Yes</b>	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) <b>Yes</b>
--	---

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) <b>STOP : : UNKNOWN X-1567</b>	RANK	SERIAL No.	ORGANIZATION	GRAVE No. <b>CRYPT 163</b>
--	------	------------	--------------	-----------------------------------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) <b>STOP : : UNKNOWN X-1531</b>	RANK	SERIAL No.	ORGANIZATION	GRAVE No. <b>CRYPT 159</b>
---	------	------------	--------------	-----------------------------------

SIGNATURE OF PERSON PREPARING REPORT <i>Wm R Gilbert</i> <b>Wm R GILBERT, Adm Asst</b>	SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>Nucio S Panopio</i> <b>NUCIO S PANOPIO, 2d Lt Inf</b>
--	--

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.

cmcp # 1219

**Section 3. UNIDENTIFIED REMAINS.**

**INSTRUCTIONS:**






(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.

(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.

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS

WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND

**OTHER IDENTIFICATION CLUES**

<b>FILLINGS</b>	 <p>SILVER FILLING GOLD FILLING</p>
<b>CAVITIES</b>	 <p>CAVITY DECAYED</p>
<b>MISSING TEETH</b>	 <p>TOOTH MISSING</p>
<b>CROWNED TEETH</b>	 <p>PORCELAIN CROWN GOLD CROWN</p>
<b>BRIDGE WORK</b>	 <p>GOLD BRIDGE</p>

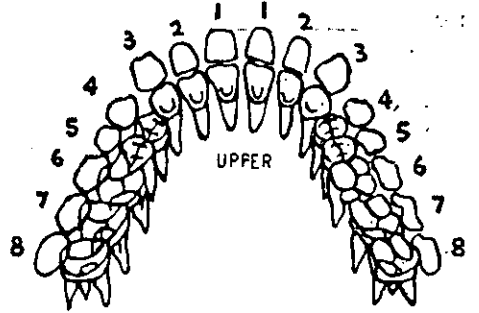
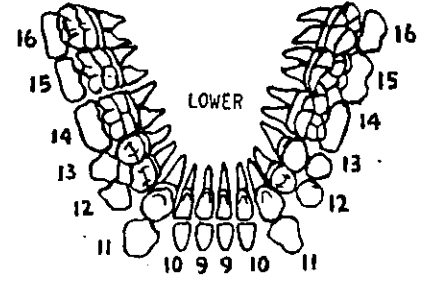
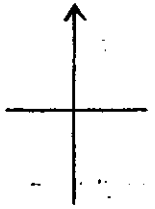


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY



REMARKS:

**Identification Check List and Dental Chart accomplished.**

**© JAN 1942**

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

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

UNKNOWN X-71

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

Soputa Sanananda Area, NG

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

1000 hrs 2 Apr 45 USAF CEM Finschhafen 2, NG

(Time and date of burial) reburial (Name of cemetery) (Name or co-ordinates of location)

Disinterred from Grave 226 USAF CEM, Soputa 1, NG as Unknown X-32

2108

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

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

P. J. TONN, Capt., OMC

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

Body buried on **RIGHT** Perry, Anthony J. 39011381 Pfc Btry C 218 FA 2109  
(Name) (Serial number) (Rank) (Organization) (Grave number)

Body buried on **LEFT** Massaro, DAN 36208232 Pvt Co A 114 Engr 2107  
(Name) (Serial number) (Rank) (Organization) (Grave number)

*111* (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 :
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.**

Geo. A. Ross, M/ Sgt, OMC GRS

(Signature of officer or other person reporting burial)

CHARLES R. MYERS, Lt, OMC

(Verified by Army GRS Officer)

LEFT HAND

4

3

2

1

THUMB

4

3

2

1

THUMB

RIGHT HAND

RE

1531

1531

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

# RESTRICTED REPORT OF INTERMENT

(TM 10-630 AND AR 30-1815)

UNKNOWN X-71

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

Soputa-Sanananda Area, N.G.

(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 #226 USAF Cemetery, Soputa #1, N.G. as Unknown X-32

2108

(Grave number) (Row number) (Plot number) Cross-regulation w/plate (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?)

Religion

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

Body buried on RIGHT PERRY, Anthony J. 39 011 381 Pfc Btry C, 218 FA 2109  
(Name) (Serial number) (Rank) (Organization) (Grave number)

Body buried on LEFT MASSARO, Dan 36 008 232 Pvt. Co. A, 114 Engr 2107  
(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:

(9) No. 1247

# 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, M/SGT., OMC., GRS.,  
 (Signature of officer or other person reporting burial)

*Charles R Myers*  
 CHARLES R. MYERS, OMC.,  
 (Verified by Army G. officer)

LEFT HAND

4

3

2

1

THUMB

RIGHT HAND

4

3

2

1

THUMB

RECEIVED  
 8 JAN 1945

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

1531

UNKNOWN X-32, Soputa No. 1.  
(Last name) (First) (Initial) (Serial number) (Rank) (Organization)

Soputa-Sanananda Area, N.G. Unknown  
(Place of death) (Date of death) (Cause of death)

1100 hours May 5, 1943, U.S.T.c. No. 1, Soputa N.G.  
(Time and date of burial) (Name of Cemetery) (Name of coordinates of location)

Unidentified stamped on canteen and disc.

226 17 Temp. Cross  
(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

Disinterred from U.S.T.C. No. 3, Sanananda, N.G., Grave No. 25  
(If no identification tags, what means of identification are buried with the body?)

Skeleton found on March 28, 1943, by 116 Eng. and buried Religion  
(If no identification tags, but identity definitely established, give particulars)

Body buried on RIGHT UNIDENTIFIED AMERICAN SOLDIER 227  
(Name) (Serial number) (Rank) (Organization) (Grave number)

Body buried on LEFT UNIDENTIFIED AMERICAN SOLDIER 225  
(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: Certified true copy:  
8 No. 1247 *Paul J. Tonn*  
PAUL J. TONN, 1st Lt. OMC.

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.

.....  
(Signature of officer or other person reporting burial)

.....  
(Verified by Army Officer)

LEFT HAND

THUMB

RIGHT HAND

THUMB

UNKNOWN X-32 Grave 226, Soputa #1

A canteen was found buried in this grave with the initials "H.S.P., also stamped on the canteen was "Unid. Amer." A tooth chart has been made of the deceased.

REPORT OF INTERMENT

CONFIDENTIAL 1531

(TM 10-630 AND AR 30-1815)

UNKNOWN X 32, Soputa No. 1

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

Soputa-Sanananda Area, N.G. Unknown

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

1100 Hours May 5, 1943 U.S.T.C. No. 1, Soputa, N.G.

(Time and date of burial) (Name of cemetery) (Name or coordinates of location)

Unidentified stamped on canteen and disc.

226 17 Temp. Cross

(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

Disinterred from U.S.T.C. No. 3, Sanananda, N.G., Grave No. 25.

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

Skeleton found on March 28, 1943 by 116 Eng. and buried.  
Religion

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

Body buried on RIGHT UNIDENTIFIED AMERICAN SOLDIER (Name) (Serial number) (Rank) (Organization) (Grave number) 227

Body buried on LEFT UNIDENTIFIED AMERICAN SOLDIER (Name) (Serial number) (Rank) (Organization) (Grave number) 225

(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





RE  
REPORT OF INTERMENT

*Carroll ...*  
**CONFIDENTIAL**  
**1531**

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

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

UNIDENTIFIED AMERICAN SOLDIER

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

Soputa-Sanananda Area, N. G. Unknown  
(Place of Death) (Date of Death) (Cause of Death)

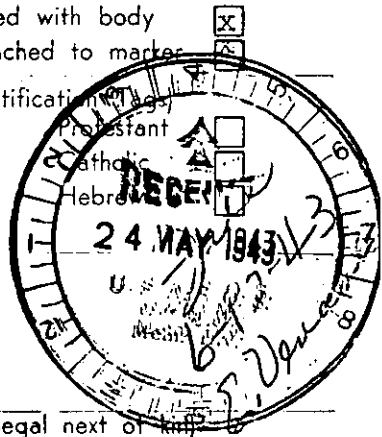
1100 Hours May 5, 1943 U.S.T.C. # 1, Soputa, N. G.  
(Time and Date of Burial) (Place of Burial - Name and No. of Cemetery, if in a cemetery)

Unidentified stamped on canteen and buried with body

226 17 Temp Cross Disattached to marker  
(Grave No.) (Row No.) (Plot No.) (Kind Grave Marker) (Identification Tag)

Disinterred from U.S.T.C. # 3, Sanananda, N. G., Grave 25.

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



(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— UNIDENTIFIED AMERICAN SOLDIER, Grave 227.

On Left— UNIDENTIFIED AMERICAN SOLDIER, Grave 225.

S/Sgt. JOHANNING

Signature of Officer or other person reporting Burial.

*Stewart W. Abel*  
STEWART W. ABEL  
1st Lt. <sup>CMC</sup>  
Adv. Base GRO

Verified by Army G.R.S. Officer.

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

# REPORT OF INTERMENT

1531

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

93 New Guinea (Unknown)  
(Par. 21d-FTM 10-630)

**UNIDENTIFIED AMERICAN SOLDIER**

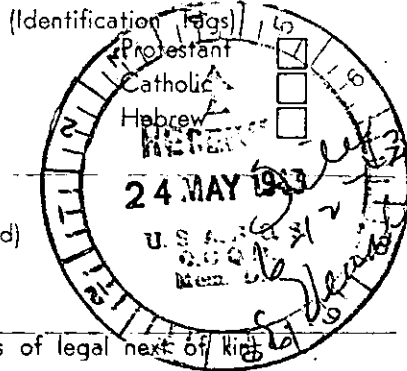
(Last Name) (First) (Initial) (Serial No.) (Rank) (Organization)

Soputa-Sanananda Area, N. G. (Place of Death) Unknown (Date of Death) (Cause of Death)

March 28, 1943 (Time and Date of Burial) U.S.T.C. # 3, Sanananda, N. G. (Place of Burial - Name and No. of Cemetery, if in a cemetery)

25 (Grave No.) 4 (Row No.) Temp Cross (Plot No.) (Kind Grave Marker) Buried with body  Attached to marker

Skeleton found on March 28, 1943 by 116 Eng. and buried.



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

(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 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— HOODJER, Carl A., Pvt., 3711137, Co K, 126 Inf., Grave 26.

On Left— Beginning of Row.

S/Sgt. WINSOR

Signature of Officer or other person reporting Burial.

*Stewart W. Abel*  
STEWART W. ABEL

Verified by Army G.R.S. Officer.

Adv. Base GRB

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