

QMGMT 293  
GRS Far East

11 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 Unknown remains now stored at AGRS Mausoleum, Manila, P. I.:

Unknown X-1564 (formerly Unknown X-75 Finschhafen #2)  
Unknown X-2230 (formerly Unknown X-524 Leyte #1)  
Unknown X-2286 (formerly Unknown X-598 Leyte #1)  
Unknown X-2289 (formerly Unknown X-601 Leyte #1)  
Unknown X-2331 (formerly Unknown X-501 Leyte #1)  
Unknown X-2441 (formerly Unknown X-576 Leyte #1)  
Unknown X-3288 (formerly Unknown X-157 Finschhafen #2)  
Unknown X-3431 (formerly Unknown X-332 Leyte #1)  
Unknown X-3767 (formerly Unknown X-355 Leyte #1)  
Unknown X-4253

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

RRB

NJS

J. Miller:lrc  
Salser  
JW

OSCR 293.9

SUBJECT: Unidentifiable Remains

9 June, 1949

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 AGIS Mausoleum, Manila, P.I., have been processed by the Central Identification Laboratory and considered "Unidentifiable" by reason of lack of sufficient identifying data:

UNKNOWN Y-621	UNKNOWN Y-3172
" Y-625	" Y-3258
" Y-630	" Y-3288
" Y-635	" Y-3422
" Y-1322	" Y-3431
" Y-1564	" Y-3767
" Y-1914	" Y-4253
" Y-2230	" Y-4096, Manila #2
" Y-2241	(Formerly Unk Y-1409, AGIS Mslm)
" Y-2286	" Y-5141 (Formerly Unk Y-327-F, AGIS Mslm)
" Y-2289	" Y-5142 (Formerly Unk Y-327-I, AGIS Mslm)
" Y-2331	" Y-5145 (Formerly Unk Y-327-I, AGIS Mslm)

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

FOR THE COMMANDING GENERAL:

23 Incls:

QMC Forms 1044 w/certificates  
of Unidentifiability



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1 /fms

Interred 13 Oct. 49  
L 6 11 Ft. McKinley  
Caremark  
CAREMARK

DISINTERMENT DIRECTIVE

CARL R. H. MARK  
Cemetery Superintendent  
SECTION A  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER  
6911 00254

DATE  
15 01 48  
DAY MONTH YEAR

NAME  
297 UNKNOWN X-000075

SERIAL NUMBER  
RANK  
ARM 0

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  
2409 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  
UNKNOWN X-1564 (Mausoleum)  
UNK X-000075 (Finsch #2)

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISINTERRED  
14 May 48

IDENTIFICATION TAG ON  
 REMAINS  
 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 Hal f

CONDITION OF REMAINS  
Skeletal

OTHER MEANS OF IDENTIFICATION  
Unk - X-75

MINOR DISCREPANCIES 1

REMAINS PREPARED AND PLACED IN CASKET  
DATE 14 May 48 BY HENRY P. SMITH

CASKET SEALED BY  
HENRY P. SMITH

EMBALMER (Signature)  
Henry P. Smith  
HENRY P. SMITH

CASKET BOXED AND MARKED  
DATE 14 May 48 BY PLACIDO M. CASTILLO

SHIPPING ADDRESS VERIFIED BY  
AGUSTIN LIQUIGAN, 2nd Lt., FA

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

AGUSTIN LIQUIGAN, 2nd Lt., FA  
SIGNATURE OF GRS INSPECTOR

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

REMARKS: Unidentifiable - OQMG

NOV 1948

# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

FROM AGRS 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>Caremark</i>	DATE 18 OCT 1949

## 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 (BY ADMINISTRATIVE ORDER) MARINE PHILIPPINE ISLANDS		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

## 6. SHIPPED

FROM SPOB WBI GAIWV		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER GAIWV	DATE	SIGNATURE OF RECEIVER	DATE

## 7. SHIPPED

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

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
PHILCOM ZONE  
APO 900

28 May 1949  
Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 75, Plot \_\_\_\_\_,  
Row \_\_\_\_\_, Grave 2409, 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, QMG  
Chief, Records Branch

Atch: Form 1044

Received 21 June 1949 OQMG  
Not identifiable from  
information presently  
available

11 July 1949

Encl #6'

**IDENTIFICATION DATA**

1. REMAINS OF UNKNOWN <b>UNKNOWN X-1564 (Formerly UNK X-75 Finsch #2)</b>	2. DATE OF REPORT <b>28 May 1949</b>
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3. NAME OF CEMETERY <b>AGRS MAUSOLEUM, MANILA, P. I.</b>	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	<b>810</b>	<b>A</b>	<b>166</b>	DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT <b>160 lbs</b>	9. ESTIMATED HEIGHT <b>5'9"</b>	10. COLOR OF HAIR <b>U T D</b>	11. RACE <b>Unknown</b>
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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"**


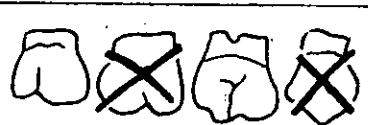
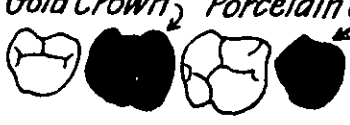







**"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"**

*Incl. #62*



18.

TOOTH CHART

<p><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:</p>	<p>TOP VIEW</p>  <p><i>Tooth Missing</i></p>	<p>SIDE VIEW</p> 
<p><b>CROWNED TEETH:</b> BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:</p>	<p><i>Gold Crown, Porcelain Crown</i></p> 	
<p><b>BRIDGE WORK:</b> BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:</p>	<p><i>Gold Bridge</i></p> 	
<p><b>FILLINGS:</b> DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:</p>	<p><i>Gold Filling, Silver Filling</i></p> 	
<p><b>CARIES (Cavities):</b> OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:</p>	<p><i>Cavity, Decayed</i></p> 	

RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
M A X I L L A								M I S S I N G							
<del>Side Views</del>															
<del>Top Views</del>															
<del>Side Views</del>															
M A N D I B L E								M I S S I N G							
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."

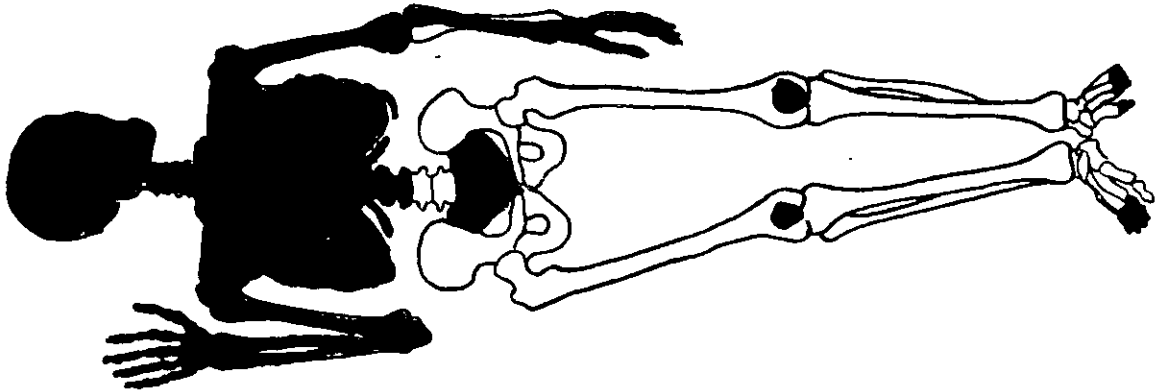
No loose teeth present with remains.

**"UNIDENTIFIABLE"**

*James J. McDermott*  
**JAMES J. McDERMOTT**  
 Laboratory Officer, CIP

DO NOT RECALCULATE OR CHANGE IDENTIFYING DATA

19. BLACK OUT PARTS OF BODY NOT RECOVERED



Estimated height: 5'9"

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 - 7 lbs.

**"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

# IDENTIFICATION CHECK LIST

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

UNKNOWN X-1564 (Formerly UNK X-75 USAF  
~~XXXXXXXX~~ Cemetery #2, Finschhafen, N.G.)

Cemetery AGRS Mausoleum, Manila, P.I.  
 Plot 810 ROW A GRAVE 166

OIP, AGRS Mausoleum, Manila, P.I.

1. Arrived at ~~Sanananda~~ 10 Nov 47  
(Hour) (Date)

2. Place of death Sanananda Roads, N.G.  
(Name of closest town)

(Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3. Remains recovered or disinterred by OMT 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	/		
Raincoat	/		
Overcoat	/		
Jacket, Field	/		
Jacket, Combat	/		
Mackinaw	/	N	
Sweater	/	O	
Jacket, HBT	/	N E	
* Shirt, Wool OD	/		
Undershirt, Wool	/		
Undershirt, Cotton	/		
Trousers, HBT	/		
* Trousers, Wool OD	/		

Belt, web .....  
 Drawers, wool .....  
 Drawers, cotton .....  
 Leggings, wool .....  
 Socks, cotton .....  
 \* Shoes ..... (type) **N**  
 Overshoes ..... **O**  
 Web Equipment ..... (type) **N**  
 (Other item) ..... **E**  
 (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 - Skeletal Chart attached.**

Age ..... / Height <sup>Est</sup> **5'9"** Weight <sup>Est</sup> **160 lbs** 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 ..... **U**  
 Complexion ..... **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, widows peak, distinctive cutting or other characteristics)  
 Sideburns ..... Mustache ..... Beard or ..... (Color, setting, shape) (Color, size, shape) (Length, heavy)



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 No skull received.

(Yes-no)

9. Remarks No ROI bottle found with remains. No personal effects. Nothing found to warrant identification. Estimated weight of remains 7 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.

s/ Charles A. Burkett

(Officer's Name)

Civ Embalmer C-064895

Rank

Service

AGRS Mausoleum, Manila, P.I.

(Organization)

10 Nov 47

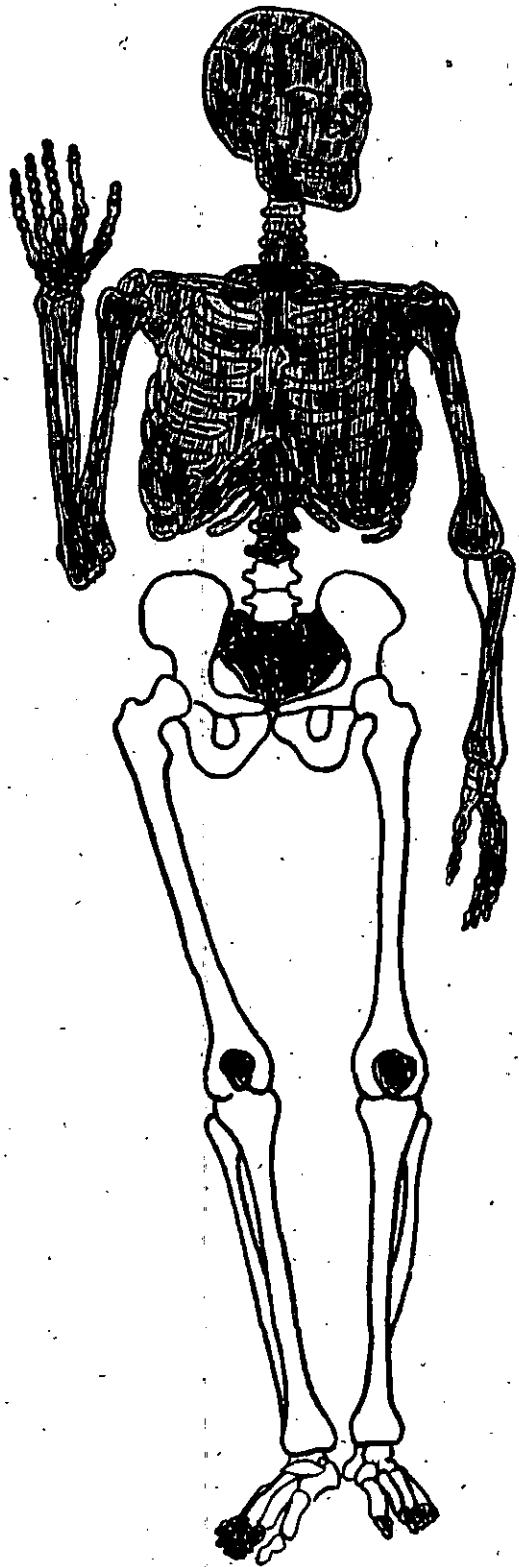
CERTIFIED TRUE COPY:

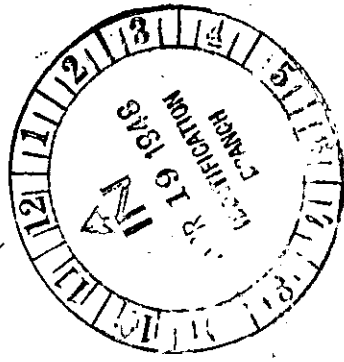
*George T. Gamboa*  
GEORGE T. GAMBOA  
2d Lt., MAO

# SKELETAL CHART

X-1564

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)





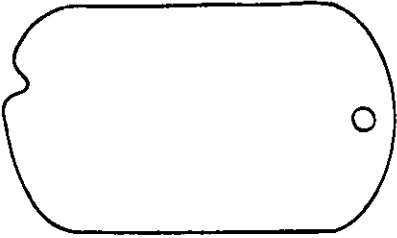


WD QMC FORM 1042  
(Rev. 1 Apr. 1945)  
(Supersedes GRS Form 1)

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

DATE OF REPORT

14 Nov 47

<p>Imprint Identification Tag If Possible. DO NOT TYPE</p> 	Section 1.—IDENTIFICATION.		
	NAME (Last, first, middle initial) <b>UNKNOWN X-1564 (Formerly UNK X-75 USAF Cem #2, Finschhafen, N.G.)</b>		SERIAL NO. <b>Unknown</b>
	GRADE <b>Unknown</b>	ORGANIZATION <b>Unknown</b>	BRANCH OF SERVICE <b>Unknown</b>
	RACE <b>Unknown</b>	RELIGION <b>Unknown</b>	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
PLACE OF DEATH <b>Sanananda Roads, N.G.</b>	CAUSE OF DEATH <b>Unknown</b>	DATE OF DEATH <b>Unknown</b>	

EMERGENCY ADDRESSEE (Name, relationship, and address)  
**Unknown**

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

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>STORED Casket</b>	TYPE OF GRAVE MARKER <b>None</b>	PLOT No. <b>810</b>	ROW No. <b>BAY A</b>	GRAVE No. <b>CRYPT 166</b>
------------------------------------	---------------------	---	-------------------------------------	------------------------	-----------------------------	-----------------------------------

WAS THIS A REBURIAL? (Yes or no) <b>RESTORED</b> <b>Yes</b>	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE <b>USAF Cemetery #2, Finschhafen, New Guinea</b>	PLOT No.	ROW No.	GRAVE No. <b>2409</b>
---	---	----------	---------	--------------------------

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>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>STORED</b> <b>UNKNOWN X-1565</b>	RANK	SERIAL No.	ORGANIZATION	GRAVE No. <b>CRYPT 168</b>
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) <b>STORED</b> <b>UNKNOWN X-1551</b>	RANK	SERIAL No.	ORGANIZATION	GRAVE No. <b>CRYPT 164</b>

SIGNATURE OF PERSON PREPARING REPORT  <b>Wm R. GILBERT, Adm Asst</b>	SIGNATURE OF GRS OFFICER VERIFYING REPORT  <b>LUCIO 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.

Incl # 1221

**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.

LEFT  
LITTLE FINGER

LEFT  
RING FINGER

LEFT  
MIDDLE FINGER

LEFT  
INDEX FINGER

LEFT  
THUMB

RIGHT  
THUMB

RIGHT  
INDEX FINGER

RIGHT  
MIDDLE FINGER

RIGHT  
RING FINGER

RIGHT  
LITTLE FINGER

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>	
<p>FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY</p> <div style="text-align: center;"> </div>		

**REMARKS:**

**Identification Check List accomplished.**

**16 JAN - 1948**

RESTRICTED

CONFIDENTIAL

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

REPORT OF INTERMENT

(TM 40-630 AND AR 30-1815)

1258

1258

UNKNOWN 75

(Last name) (First) (Initial) (Serial number) (Rank) (Organization)
Sanananda Roads, 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) (Name of Cemetery) (Name of coordinates of location)
Disinterred from grave #160 USAF #1, Soputa, N. G. X 25

(Grave number) (Row number) (Plot number) (Type of marker—Regulation V-shaped or other)
2409 Cross-regulation w/plate

Disposition of identification tags: Buried with body Yes [X] No [ ] Attached to marker Yes [X] 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 BEAUPRE John S. 36 328 863 Pfc Hosp 2410
(Name) (Serial number) (Rank) (Organization) (Grave number)

Body buried on LEFT STAUB, Norman E. 37 074 568 Pfc Inf 2408
(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



# REPORT OF INTERMENT

(TM 10-630 AND AR 30-1815)

NOB 1258  
30 1943

**CONFIDENTIAL** *Calc*

UNKNOWN X 25, Soputa No. 1  
(Last name) (First) (Initial) (Serial number) (Rank) (Organization)

Sanananda Road, N.G.  
(Place of death) (Date of death) (Cause of death)

1600 hours 27 April 1943 U.S.T.C. No. 1, Soputa, N.G.  
(Time and date of burial) (Name of cemetery) (Name or coordinates of location)

Can teen stamped "Unidentified American Soldier" Disc stamped  
"Unidentified American Soldier"

160 12  
(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 USTC No. 1, Sanananda N.G., Grave No. 40,  
Skeleton examined on disinterment but no identification possible.

(If no identification tags, what means of identification are buried with the body?)  
Originally buried 2 1/2 miles from Sanananda Point and left side of  
road leading to Soputa (Gona Locality (Rev. Dec. 1942) Grid 26.4-18.4)

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

Body buried on **RIGHT** HERMANSON, Emil Pvt., 371111141, Co. K. 126 Inf. 161  
(Name) (Serial number) (Rank) (Organization) (Grave number)

Body buried on **LEFT** GASKEL, Owen D. Sgt., 20912648, Co. B. 163 Inf. 159  
(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**



REPORT OF INTERMENT

1258

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

293 *New Guinea (Unknown)* (Par. 2) (d. TM 10-630)

UNIDENTIFIED AMERICAN SOLDIER

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

Sanananda Rd., N.G.

(Place of Death) (Date of Death) (Cause of Death)

1600 Hours 27 April 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)

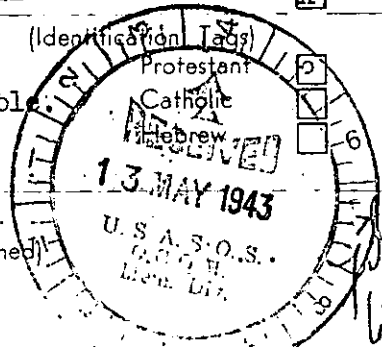
Canteen stamped "Unidentified American Soldier" - Buried with body

160 12 Disc stamped "Unidentified American Soldier" - Attached to marker

(Grave No.) (Row No.) (Plot No.) (Kind Grave Marker) (Identification Tags)

Disinterred from U.S.T.C. #1, Sanananda, N.G. Grave #40.

Skeleton examined on disinterment but no identification possible.



Other pertinent data to enable grave to be located.

(Where necessary sketch to locate grave should be furnished)

✓ X 293 *New Guinea (Unknown)*

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
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List of personal effects and disposition of same

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

On Right— HERMANSON, Emil Pvt. 371111144 Co. K 126 Inf. Grave #161

On Left— GASKEL, Owen D. Sgt. 20942648 Co. B 163 Inf. Grave #159

S/Sgt. F.J. Winsor

Signature of Officer or other person reporting Burial.

*James T. McConnaughey*  
Verified by JAMES T. McCONNAUGHEY  
2nd Lt., Q.M.G.

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.



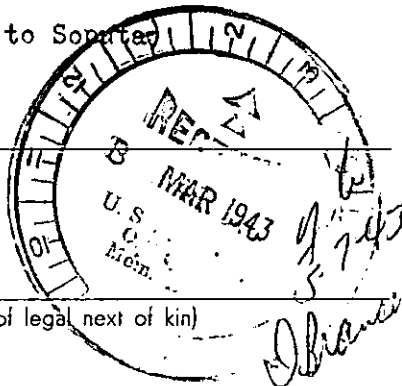
# REPORT OF INTERMENT

25782  
1253

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

(Par. 21d - TM 10-630)

Unknown		unknown	unknown	unknown
(Last Name)	(First)	(Initial)	(Serial No.)	(Rank)
393	Sanananda	Road	unknown	
Sanananda Road, N.G.			unknown	unknown
(Place of Death)		(Date of Death)		(Cause of Death)
Jan. 21, 1943		U.S.T.C. No. 1		Sanananda Road, N.G.
(Time and Date of Burial)		(Place of Burial - Name and No. of Cemetery, if in a cemetery)		
40	4	Cross		Buried with body <input type="checkbox"/>
(Grave No.)	(Row No.)	(Plot No.)	(Kind Grave Marker)	Attached to marker <input type="checkbox"/>
(2 1/2 Miles from Sanananda Point on left side of road leading to Soputa)				
(Gona Locality (Revised Dec. 1942) Grid 26.4 - 18.4)				
Other pertinent data to enable grave to be located (Where necessary sketch to locate grave should be furnished)				
unknown		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) (Page 2)

TM 10-630

Place X mark  
below when  
prints are of  
left hand



Thumb	1	2	3	4
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List of personal effects and disposition of same

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

On Right- **Fence**

On Left- **Carlson, Alfred M. 39377973 Pfc. Co. I, 163rd Inf.**

**S/Sgt. C.P. Fulkerson 20929581 G.R.S.**

Signature of Officer or other person reporting Burial.

*James T. McCunnaughey*  
Verified by Army G.R.S. Officer  
**JAMES T. MCCUNNAUGHEY**  
2nd Lt. Q.M.C. Graves Reg. 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.