

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 Ink Lgts #1 X-104

SUBJECT

also 293 ink maus Manila X-3787

QM QM 293
GRS Far East

27 April 1949

SUBJECT: Unidentifiable Remains

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

1. Reference is made to following Unknown remains now stored at
AGRS Mausoleum, Manila, Philippine Islands:

X-4960	(Formerly Vondrak, Gordon, Leyte #1, P.I.)
X-3787	(Formerly X-104, Leyte #1, P.I.)
X-3312	(Formerly X-189, Leyte #1, P.I.)
X-3234	(Formerly X- 70, Santa Barbara #1, P.I.)
X-3236	(Formerly X- 72, Santa Barbara #1, P.I.)
X-3360	(Formerly X-201, Leyte #1, P.I.)
X-3761	(Formerly X-543, Leyte #1, P.I.)

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

cc--Administrative Section
J. Tinberg: lrc
Salser
JW

REB

NJS

1	Interred 10 October 1949 C 1 68 Ft. McKinley <i>caremark</i> CARL R. H. MARK	DISINTERMENT DIRECTIVE
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Cemetery Superintendent SECTION A - NAME AND BURIAL LOCATION OF DECEASED	DIRECTIVE NUMBER 7740 00128	DATE 15 05 48 <small>DAY MONTH YEAR</small>
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NAME <i>9000</i> UNKNOWN	SERIAL NUMBER X-000104	RANK <i>AS.</i>	ARM 1	DATE OF DEATH <small>DAY MONTH YEAR</small>
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CEMETERY USAF CEMETERY LEYTE NO 1	0	DISPOSITION OF REMAINS 7701 80 <small>CODE DIST. PT.</small>
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PLOT	ROW	GRAVE 3074	COUNTRY PHILIPPINE ISLANDS	CAUSE OF DEATH 6
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SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE FORT MC KINLEY NATIONAL CEMETERY MANILA, PHILIPPINE ISLANDS (BY ADMINISTRATIVE ORDER)	NAME AND ADDRESS OF NEXT OF KIN
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SECTION C - DISINTERMENT AND IDENTIFICATION

NAME UNKNOWN X-104 UNKNOWN X-3787	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED 27 Sept 1948
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IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	ORGANIZATION UNKNOWN	RELIGION	IDENTIFICATION VERIFIED BY PERRY E. WHITE Embalmer NAME AND TITLE
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SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Shelter Half	CONDITION OF REMAINS Skeletal
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OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES 1

Two (2) Identification tags reads UNKNOWN X-3787

REMAINS PREPARED AND PLACED IN CASKET	
DATE 27 Sept 1948	BY PERRY E. WHITE

CASKET SEALED BY PERRY E. WHITE	EMBALMER (Signature) <i>Perry E. White</i> PERRY E. WHITE
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CASKET BOXED AND MARKED DATE 27 Sep 48 BY HORACE L. ALLISON, Sgt, INF	SHIPPING ADDRESS VERIFIED BY TEOPILLO M. ANUTAN, 1st Lt., INF
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I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.

Teopilo M. Anutan
 TEOPILLO M. ANUTAN, 1st Lt., INF

SIGNATURE OF GRS INSPECTOR

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

REMARKS: Unidentifiable - OQMG

Spencer

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM AGS Mausoleum		TO Fort McKinley Military Cemetery	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Carroll Mark</i>	DATE 10 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		TO	
KIND OF CONVEYANCE		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

7. SHIPPED

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

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN			UNKNOW. X-3787 (Formerly X-104 UASF Cemetery Leyte #1, P. I.)			2. DATE OF REPORT		25 March 49	
3. NAME OF CEMETERY				4. PLOT	5. ROW	6. GRAVE	7. DATE OF		
							DISINTERMENT		REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR OF HAIR	11. RACE
U T D	U T D	U T D	UNKNOW.

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

One (1) substitute tag with the only inscription found;
UNKNOW. X-104

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

U T D

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

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

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

U T D

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)

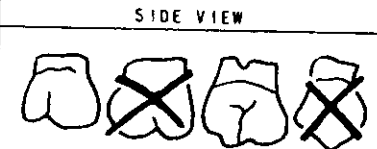
NONE

"UNIDENTIFIABLE"

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

Received 21 Apr 49 OQMG
 Not identifiable from
 information presently
 available 27 Apr 49 J. Imberg

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:



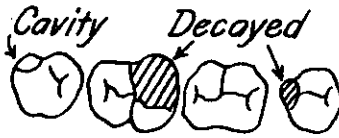
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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:



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							
Side Views															
Top Views															
Side Views															
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."

Maxilla and mandible missing. No loose teeth present with remains.

"UNIDENTIFIABLE"

J. J. McDermott
J. J. McDERMOTT
Laboratory Officer, CIP

BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA
18 MAR 47 1044 d

19. BLACK OUT PARTS OF BODY NOT RECOVERED



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 personal effects, no ROI bottle found with remains.

Estimated weight of remains 3½ lbs.

"UNIDENTIFIABLE"
"BY REASON OF LACK OF POSITIVE IDENTIFICATION 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 DATA

1. REMAINS OF UNKNOWN UNKNOWN X-3787 (Formerly UNK X-104, USAF Cemetery #1, Leyte, P.I.)				2. DATE OF REPORT 13 Feb 48		
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.		4. PLOT 810	5. ROW M	6. GRAVE 4061	7. DATE OF DISINTERMENT REINTERMENT 11 Dec 47 18 Feb 48	

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT UTD	10. COLOR OF HAIR UTD	11. RACE UTD
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

One (1) substitute tag with the only inscription found;
UNKNOWN X-104

(The tag placed with remains)

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

UTD

14. WAS BODY BURNED ? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT EXTENT ? Severe
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15. WAS BODY MANGLED ? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT EXTENT ? Severe
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16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS


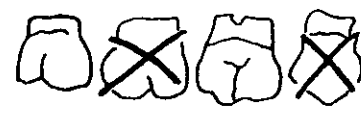
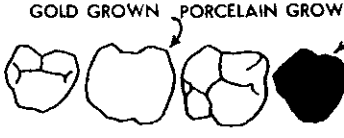

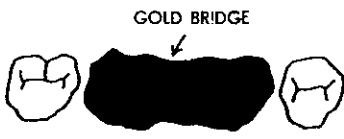

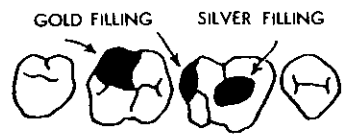

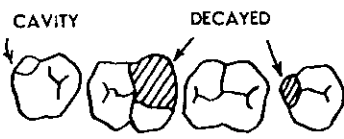

UTD




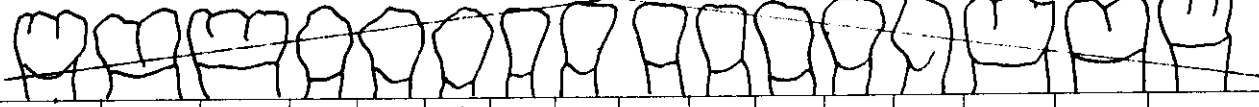
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

None

18.

TOOTH CHART

	TOP VIEW	SIDE VIEW
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:		

	RIGHT								LEFT								
	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
	<i>Maxilla</i>								<i>Missing</i>								
SIDE VIEWS																	SIDE VIEWS
TOP VIEWS																	
																	
SIDE VIEWS																	
	<i>Mandible</i>								<i>Missing</i>								
	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."

REMARKS: Maxilla and mandible missing. No loose teeth present with remains.

CERTIFIED TRUE COPY
A. J. Garbo
 G T GARBO
 2d Lt MSC

/s/ John J. Connors

19. BLACK OUT PARTS OF BODY NOT RECOVERED



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 personal effects, no ROI bottle found with remains. One (1) tag as described in section 12 found. Circumference of the skull cannot be determined due to condition of remains. Estimated weight of remains 3 1/2 lbs.

CERTIFIED TRUE COPY

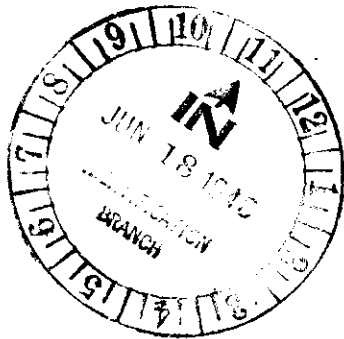
G. T. Gamboa

G T GAMBOA
2d Lt MSC

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
/p/ CLAUDE A. FILLERS
CIP LABORATORY, MANILA, P.I.

SIGNATURE
/s/ Claude A. Fillers



IDENTIFICATION DENTAL CHART

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

14 November 1946

DATE

Unknown X - 104

LAST NAME	FIRST	INITIAL	RANK	SERIAL NO.
UNIT			ORGANIZATION	
PLACE OF DEATH	PLACE OF BURIAL		PLOT	ROW GRAVE NO.

USAF Gen. Leyte #1, P.I. 3074

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

INSIDE — LOOKING OUT
MANDIBLE MISSING

	16	15	14	RIGHT	13	12	11	10	9	9	10	11	12	13	14	15	16	
TYPE	LOWER TEETH																TYPE	
LOCATION																	LOCATION	

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.

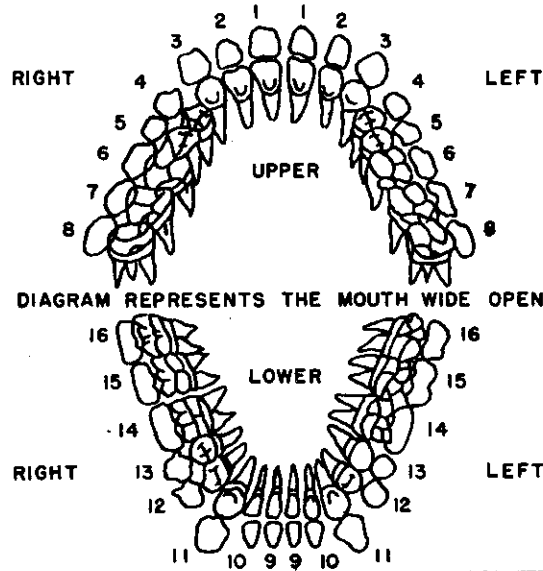


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN

REMARKS:

Paul R. Nichols
SIGNATURE OF PERSON WHO PREPARED CHART

Paul R. Nichols, Embalmer
NAME AND RANK TYPED OR PRINTED

USAF Cemetery Leyte #1
PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

Joseph M. Phelan
VERIFIED BY GRS OFFICER

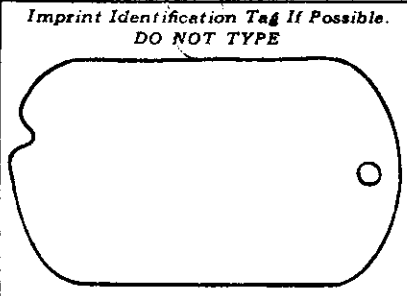
JOSEPH M. PHELAN, Capt., CAC
NAME AND RANK TYPED OR PRINTED

14 November 1946
DATE

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
28 Feb 48



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN X-3787 (Formerly UNK X-104 USAF Cem Leyte #1, P.I.)		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 Pinamopoan Area, Leyte, P.I.	CAUSE OF DEATH KIA GSW chest and severe burns	DATE OF DEATH Unknown
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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 3 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 MAUSCLEUM, MANILA, P.I.

DATE OF BURIAL 18 Feb 48	HOUR 0900	BURIED IN (Shroud, blanket, or name of other) Casket	TYPE OF GRAVE MARKER None	PLOT No. 810	ROW No. M	GRAVE No. 4061
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WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery Leyte #1, P.I.	PLOT No.	ROW No.	GRAVE No. 3074
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TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
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IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes	<i>Received 21 Apr 49</i> <i>Not identifiable from information presently available 27 Apr 49 - J. Tankberg</i> <i>DDMG</i>
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BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) UNKNOWN X-3789	RANK	ORGANIZATION	GRAVE No. 4062
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BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-3783	RANK	SERIAL No.	ORGANIZATION	GRAVE No. 4060
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SIGNATURE OF PERSON PREPARING REPORT <i>V. C. Aquino</i> V. C. AQUINO, T/5, QMC	SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>B. S. Panofic</i> B. S. PANOFIC 2d Lt INF
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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.

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

FILLINGS	<p>SILVER FILLING GOLD FILLING</p>	<p>UPPER</p> <p>LOWER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
CAVITIES	<p>CAVITY DECAYED</p>	
MISSING TEETH	<p>TOOTH MISSING</p>	
CROWNED TEETH	<p>PORCELAIN CROWN GOLD CROWN</p>	
BRIDGE WORK	<p>GOLD BRIDGE</p>	

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



REMARKS:

QMC Form No 1044, 1044 A and 1044 B accomplished.

18 MAY 1948

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

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

UNKNOWN X-104

(Last name) (First) (Initial) (Serial number) (Rank) (Organization)
Pinamopoan Area, Leyte, P. I. KIA-GSW-chest and
(Place of death) (Date of death) (Cause of death)
1000 hrs 23 July 1945 USAF Cemetery Leyte # 1, P. I.
(Time and date of burial) (Name of cemetery) (Name or co-ordinates of location)

3074 Reg Cross
(Grave number) (Row number) (Plot number) (Type of marker—Regulation V-shaped or other)

Disposition of identification tags: Buried with body Yes () No (X) Attached to marker Yes () No (X)
DISINTERRED from Grave 80, USAF Cemetery Pinamopoan # 1, Leyte, P. I.
Religion (UNKNOWN X-4)

Metal tag buried with remains and attached to Marker.
(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 COX, William R. 6 274 495 Pvt 1cl Co I 21 Inf 3075
(Name) (Serial number) (Rank) (Organization) (Grave number)
Body buried on LEFT DEFOOR, Herschel B. 34 826 214 Pvt Co K 21 Inf Regt 3073
(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: NONE RESTRICTED

724

Plot Map has p² ~~ted~~ X 103. According
to Identification it should be Unknown
X 104.

RE

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

George D. Redden, Jr.
GEORGE D. REDDEN, JR.
Captain, Infantry

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

UNKNOWN X-104

(Last name) (First) (Initial) (Serial number) (Rank) (Organization)
Pinamopoan Area, Leyte, P.I. KIA-GSW-chest and
(Place of death) (Date of death) (Use of death)
1000 hrs 23 July 1945 USAF Cemetery Leyte #1, P.I. severe burns
(Time and date of burial) (Name of cemetery) (Name or co-ordinates of location)

3074

- Reg 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 Grave 80, USAF Cemetery Pinamopoan #1, P.I. (UNKNOWN X-4)

Religion

Metal tag buried with remains and attached to Marker.

(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 COX, William R.	6 274 495	Pvt 1cl	Co I 21 Inf	3075
(Name)	(Serial number)	(Rank)	(Organization)	(Grave number)
Body buried on LEFT DEFOOR, Herschel B.	34 826 214	Pvt	Co K 21 Inf	Regt 3073
(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: NONE RESTRICTED

IF DECEASED UNIDENTIFIED

TAKE FINGERPRINTS OF BOTH HANDS (W. D. 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 ? No
Race :	Is tooth chart attached ?

(If possible, have medical personnel take a tooth chart)
Impossible to take tooth chart on disinterment
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/t/ S/Sgt John E. Bobis, GRS
(Signature of officer or other person reporting burial)

/s/t/ FRANCIS, M. SIMON, 1st Lt., OMC
(Verified by Army GRS Officer)

LEFT HAND

4

3

2

1

THUMB

4

3

2

1

THUMB

RIGHT HAND

CONFIDENTIAL

RESTRICTED

REPORT OF INTERMENT

(TM 10-630 AND AR 30-1815)

12 Mar 45

10361

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

Unknown X-4

Pinamopoen Area (First) (Initial) (Serial number) (Rank) (Organization)
Leyte Island, P.I. Not indicated on EMT KIA - GSW Chest and Severe Burns.
(Place of death) (Date of death) (Cause of death)
1615 - 23 November, 1944 USAF Cem. Pinamopoen No. 1, Leyte Island, P.I.
(Time and date of burial) (Name of cemetery) (Name or co-ordinates of location)

80

(Grave number)

2

(Row number)

(Plot number)

Improvised marker.

(Type of marker—Regulation V-shaped or other)

Disposition of identification tags: Buried with body Yes No Attached to marker Yes No ^{Mem}
with appropriate data thereon, enclosed in identification bottle buried with
Religion: body, zinc strip attached to marker.

CERTIFIED TRUE COPY:

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

1st Lt. P. J. TONN, OMC.

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

Body buried on RIGHT DE FOOR, Herschel B. 34826214 Pvt 21st Inf. Regt. 81
(Name) (Serial number) (Rank) (Organization) (Grave number)

Body buried on LEFT VACANT - Rock obstruction 79
(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: None

(a1)

CONFIDENTIAL

#130

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 : Not determ Apparent nationality : Not Determined.

Weight : Not determ Laundry marks : None

Color of eyes Not determ Number of rifle : No rifle

Color of hair : Not determ Wear glasses ? Not determ

Race : not determ Is tooth chart attached ? No.

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

In space below, locate and describe any scars, birthmarks, moles deformities, etc. : Body was so severely burned as to take fingerprints impossible. EMT did not indicate date of death.

Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc. : No identifying clues found on body.

Deceased was found lying on "Hot Spot knob" in proximity to men of the 21st Inf Regt, thus furnishing clue to his probable organization: size of shoes 9E

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

CERTIFIED TRUE COPY:

MARLIN D. LEWIS, Capt, QMC

T/Sgt Franklin G. Stecher, Hq. 128th Inf. Regt

Jay W. Moon, Capt, Inf. Adj. 128th Inf. Regt.

LEFT HAND

RIGHT HAND

THUMB

THUMB

INDEX
22 FEB 1945

s/
t/
Is/
t/

Signature of officer or other person reporting burial

Certified by Army Sgt. Ormond