

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 Work Keytop X-728

SUBJECT

QMC FORM 1121
1 Aug 45

DISINTERMENT DIRECTIVE

PREPARED BY PHILCOM

3
SIGNATURE OF PHILCOM
KIND OF COMPLAINT

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7740 81027

DATE
17 02 50
DAY MONTH YEAR

NAME
UNKNOWN X - 720

SERIAL NUMBER
1 2110ED

GRADE
ARM

RACE
RELIGION

CEMETERY
USAF CEMETERY LAYTON NO. 1, P. I.

PLOT ROW GRAVE
6237

DISPOSITION OF REMAINS
7701 80
CODE DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
UNION STATES MILITARY CEMETERY
PT. W. MCINLEY, P. I.

NAME AND ADDRESS OF NEXT OF KIN
(BY ADMINISTRATIVE DECISION)

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME
KIND OF COMPLAINT

SERIAL NUMBER

GRADE
DATE OF DEATH

DATE DISTINTERRED

IDENTIFICATION TAG ON
 REMAINS
 MARKER

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY
NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL
OTHER MEANS OF IDENTIFICATION

CONDITION OF REMAINS

STATUS

MINOR DISCREPANCIES (Prepare Discrepancy Report GMC Form 1194a for major discrepancies.)

REMAINS PREPARED AND PLACED IN CASKET
DATE BY

EMBALMER (Signature)

CASKET SEALED BY

SHIPPING ADDRESS VERIFIED BY

CASKET BOXED AND MARKED
DATE BY

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

SIGNATURE OF PHILCOM

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

RECORD OF CUSTODIAN TRANSFER

[Handwritten signature]

/ebc 1	Interred 1 March 1950 C 15 98 Ft. Inley <i>Care R. Nichols</i> CAREY R. H. MARK Cemetery Superintendent SECTION A - NAME AND BURIAL LOCATION OF DECEASED		DISINTERMENT DIRECTIVE PREPARED BY PHILCOM				
	DIRECTIVE NUMBER 7740 83027		DATE 17 02 50 <small>DAY MONTH YEAR</small>				
NAME UNKNOWN X - 728		SERIAL NUMBER	GRADE	ARM	RACE RELIGION		
CEMETERY USAF CEMETERY LETTE NO. 1, P. I.		PLOT	ROW	GRAVE 6237		DISPOSITION OF REMAINS 7701 80 <small>CODE DIST. CTR.</small>	
SECTION B - CONSIGNEE AND NEXT OF KIN							
NAME AND ADDRESS OF CONSIGNEE UNITED STATES MILITARY CEMETERY FT. WM. MCKINLEY, P. I.				NAME AND ADDRESS OF NEXT OF KIN (BY ADMINISTRATIVE DECISION)			
SECTION C - DISINTERMENT AND IDENTIFICATION							
NAME UNKNOWN X-728		SERIAL NUMBER	GRADE	DATE OF DEATH		DATE DISTINTERRED 21 Feb 1950	
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER		ORGANIZATION		RELIGION	IDENTIFICATION VERIFIED BY PAUL R NICHOLS Embalmer <small>NAME AND TITLE</small>		
SECTION D - PREPARATION OF REMAINS FOR SHIPMENT							
NATURE OF BURIAL Shelter Half				CONDITION OF REMAINS Skeletal			
OTHER MEANS OF IDENTIFICATION							
MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)							
REMAINS PREPARED AND PLACED IN CASKET							
DATE 21 Feb 1950		BY PAUL R NICHOLS		EMBALMER (Signature) <i>Paul R. Nichols</i> PAUL R NICHOLS			
CASKET SEALED BY PAUL R NICHOLS		SHIPPING ADDRESS VERIFIED BY L. W. RICHARDSON, M/Sgt., RA					
CASKET BOXED AND MARKED RAYMOND H TANGUAY Sgt 1c, RA		DATE 21 Feb 50					
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct. <div style="text-align: right;"> <i>L. W. Richardson</i> L. W. RICHARDSON, M/Sgt., RA <small>SIGNATURE OF AGRS INSPECTOR</small> </div>							
REMARKS AND SPECIAL INSTRUCTIONS <div style="text-align: right;"> <i>Embalmer</i> </div>							

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED			
FROM AGRS MAUSOLEUM		TO U S MILITARY CEMETERY	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Carrollmark</i>	DATE MAR 1 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		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

AIRMAIL
AIRMAIL

FORM 893

ONE Year Post

Unidentifiable

12 January 1950

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 findings of Unidentifiability for the following Unknown Deceased:

Unknown X-3724, AGRS Mausoleum Manila, formerly X-39,
USAF Cemetery Leyte #1

Unknown X-3725, AGRS Mausoleum Manila, formerly X-30,
USAF Cemetery Leyte #1

Unknown X-3405, AGRS Mausoleum Manila, formerly X-340,
USAF Cemetery Leyte #1

Unknown X-3789, AGRS Mausoleum Manila, formerly X-260,
USAF Cemetery Leyte #1

Unknown X-718, USAF Cemetery Leyte #1, formerly X-3405-2,
AGRS Mausoleum Manila

Unknown X-727, USAF Cemetery Leyte #1, formerly X-4504,
AGRS Mausoleum Manila

Unknown X-728, USAF Cemetery Leyte #1, formerly Aggan, R.O.#,
AGRS Mausoleum Manila

Unknown X-730, USAF Cemetery Leyte #1, formerly FIEDENWICK, G. J.,
AGRS Mausoleum Manila

Unknown X-1086, AGRS Mausoleum Manila, formerly X-72, USAF
Cemetery Finschhafen #2, N. G.

Unknown X-3582, AGRS Mausoleum Manila, formerly X-156, USAF
Cemetery Finschhafen #2, N. G.

AIRMAIL

343 11167 1000 X 788 211E 21

AIRMAIL

AFMST 303
OAS Far East

12 January 1950

SUBJECT: Identification of World War II Deceased

Unknown X-3977, AGNS Mausoleum Manila, formerly X-7, USAF
Cemetery Finschhafen #3, F. O.

Unknown X-3988, AGNS Mausoleum Manila

2. Recommendations for Unidentifiability have been approved by
this Office. Request your records be amended accordingly.

3. Findings of Unidentifiability, your headquarters, dated 9 and
13 December 1949, for Unknowns X-4214 and X-4215, AGNS Mausoleum Manila,
and X-726 and X-727, USAF Cemetery Leyte #1, have been suspended. The
records of this Office indicate that QIC Form 1043 are not on file for
these Unknown Deceased, therefore, it is requested that Reports of Pro-
cess be forwarded as soon as practicable.

4. Findings of Unidentifiability, your headquarters, dated 6 Decem-
ber 1949, for Unknown X-343, Grave 1162, USAF Cemetery, Finschhafen #3,
have been suspended. The records of this Office indicate that a QIC Form
1043 is not on file for this Unknown Deceased. A further search of rec-
ords indicates that Unknown X-343, Grave 1460, USMC Finschhafen #5,
formerly X-3701-A, AGNS Mausoleum Manila, and previously interred as X-34,
Finschhafen #5, was approved as Unidentifiable by letter this Office,
dated 16 September 1949. In view of the above, it is requested that your
headquarters conduct an investigation to clarify the above.

FOR THE QUARTERMASTER GENERAL:

T. H. HARRIS
Lt. Colonel, QIC
Memorial Division

E. A. Kasumptal
C. Salcer
J. Windsor

Copy furnished CINCPAC, AFM 300

AIRMAIL

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILIPPINE ZONE

AFC 500
22 December 1949

CRZE 293

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 CRZE 293, CRZ (Far East), dated 17 September 1948, subject: Resolution of Cases of Unidentified Deceased, the following Unknown remains, presently stored at ACPS Museum, Manila, P.I., have been processed by the Central Identification Laboratory and considered "Unidentifiable" by reason of lack of sufficient identifying data:

UNKNOWN	X-342	Pinook #5	UNKNOWN	X-3582	ACPS	Manila
"	X-317	ACPS	Manila	"	X-3724	"
"	X-318	Leyte #1	"	"	X-3725	"
"	X-327	"	"	"	X-3769	"
"	X-328	"	"	"	X-3923	"
"	X-330	"	"	"	X-3977	"
"	X-336	"	"	"	X-4141	Manila #2
"	X-337	"	"	"	X-4669	ACPS
"	X-3886	ACPS	Manila	"	X-4670	"
"	X-3977	"	"	"	X-4692	"
"	X-2131	"	"	"	X-5214	"
"	X-2316	"	"	"	X-5215	"
"	X-2406	"	"	"		

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

FOR THE COMMANDING OFFICER:

25 Incls
GSC Form 1044 w/Certificates
of Unidentifiability

/s/ John Shypula
JOHN SHYPULA
1st Lt., Infantry
Adjutant

QUEST 203
ASIAN, H. O.

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 BURE

1. Proceedings of the Field Board recommending that the remains presently stored at AGCS Mausoleum, Manila, P.I., (Marker 608, Bay 1, Crypt 5251), as P. O. Logan, be redesignated as Unknown remains and assigned an unknown number, have been approved by this Office.

2. It is requested that corrected Report of Interment indicating Unknown number be forwarded to this Office.

FOR THE ACTING THE QUARTERMASTER GENERAL:

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

J. Miller:lrc
Salser
JW

HBB

TBC

cc--Administrative Section
cc--Cinofc

CENTRAL IDENTIFICATION POINT
AGRS APO 900
NICHOLS FIELD, MANILA, P. I.

5 July 1949

11117.293.

Teeth # 1 X-728

STATEMENT

Aegen, R. O. (Nos. 1 and 2) of double recovery.

In processing the remains of the above, it was found that portions of skull and a few postcranial remains of two (2) individuals was present.

The following reassociation of parts was made:

1. Fragment of right side of mandible from #1 was found to belong to skull of #2 because of proven occlusion of teeth.
2. Three (3) portions of skull base including the articulating condyles were taken from #1 and placed with #2 because of duplication of parts.

The skull of #1 appears to be older than that of #2.

Casper St. Hobbs
CASPER W. HOBBS
Embalmer

HEADQUARTERS
CENTRAL IDENTIFICATION POINT
LABORATORY

JJM/abl

~~193 unk. Supte. #1 X-728 P.D. 78~~
~~293 unk. X-728 P.D. 78~~
~~3~~

APO 707
22 June 1948

J.M.C. Kinley

S-T-A-T-E-M-E-N-T

Remains of AEGEN, R. O., re-processed as per 1st Ind ltr re-discrepancy. The OQMG Form 371 of 2nd Lt RAGAN, Robert G., was submitted for comparison. The OQMG Form 371 of RAGAN, Robert G., does not compare favorably with the teeth of AEGEN, R. O., and fragmentation of bones make estimate of height impossible. Upon processing it was determined that there were two partial skulls, two maxillas and one mandible. The portion of two skulls bear evidence of fire but the one mandible does not indicate burning but the one mandible does compare favorably with one maxilla so that there are definitely two remains but neither remains are RAGAN, Robert G. The only way to substantiate identity of AEGEN, R. O., would be by AEGEN's OQMG Form 371 comparison. Recommend assigning Unknown case number to AEGEN, R. O., showing AEGEN, R. O., could possibly be one of the two remains.

Pending ^{authorization} authorization from headquarters, both cases are still casketed as one remains and still carried as known - AEGEN, R. O.

James J. McDermott
JAMES J. McDERMOTT
~~Identified - [unclear]~~
Lab. Officer

Charles F. Feeney
CHARLES F FEENEY
Emb. - C-063090

OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY
INTRAOFFICE REFERENCE SHEET

DUE, HOUR AND DATE _____

1 NO.	2 FROM	3 TO	4 DATE	5 MESSAGE
1	Navy Liaison Section Rep Br Mem Div	Iden Sec Iden Br Mem Div	19 Apr 49	<p>QMGTN R. O. AEGAN</p> <p>1. Subject case is forwarded herewith for any action deemed necessary by your Section relative to association with Army or Civilian casualties.</p> <p>2. This case is considered closed as far as association with Navy, Marine Corps or Coast Guard Casualties is concerned.</p> <p style="text-align: right;"><i>W.H.</i> MARSDEN 73880</p>
1	Incl. 3rd Ind to O	MG ltr dtd	13 Dec 48	w/incl.

DEPARTMENT OF THE ARMY
////////////////////

QUART 298
AGIAN, R.O.
(Leyte #1), P.I.

29 November 1948

SUBJECT: Redesignation of Status of Remains

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

ATTN: AGRS, Philcom Zone

1. Reference is made to Report of Interment for remains of R.O. Agian, USAF Cemetery, Leyte #1, P.I., Grave 6237.

2. In view of the fact that efforts to identify these remains in records of the Army and Navy Departments have been unsuccessful, it is requested the remains be redesignated to unidentified status, and corrected Reports of Interment and/or Storage be forwarded this office with return of this correspondence at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

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

White:lrc

HJS

HEADQUARTERS
PHILIPPINES COMMAND
UNITED STATES ARMY

WGH/eva*
APO 707

GRPZ 293

11 AUG 1946

SUBJECT: Resolution of Interment Discrepancy

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

293
Proceedings of the Board of Review, AGRS, PHILCOM Zone, are forwarded herewith recommending that the remains presently stored at AGRS Mausoleum, Manila, P. I. (Hangar 802, Bay T, Crypt 5351), as R. O. AEGAN be redesignated as Unknown remains and assigned an unknown number.

FOR THE COMMANDING GENERAL:

JOHN M. WESTON JR
1st Lt AGD
Asst. AGD

1 Incl:
Board proceedings



QMCMT 293
AEGAN, R. O.

SUBJECT: Report of Reinterment

TO : APO 707, Philippine-Ryukyus Command

J93 Field Aegan
Ltr to Bill
re Aegan

Request for 371 re Aegan
Jed for Robert Aegan
0-696141

Miss Hester has
293 re Aegan
Pagan → 4 May 48

3) Ltr to Dick 7 May 48

with 371 on Rayan

See 371 Section Reading Dick

Ext. now

375
Dick

Wing
Campbell

Campbell

78th 1166 on 78th 1165
Foster

FORM 293

5th W/Ind

DM/et

HEADQUARTERS, AMERICAN GRAVES REGISTRATION SERVICE AREA COMMAND, PACIFIC
THEATER, APO 707, 14 JUNE 1946

TO: Quartermaster General, Washington 25, D. C.

1. Attention is invited to inclosed Reports of Interment and Reports of Reinterment and to paragraph four of 2nd W/Indorsement.

2. It is believed by this headquarters that the facts contained herein have been misinterpreted and the following points should be made clear:

a. It is not a definite fact that Helwig, Laner, Kennedy and Aegan were on the same plane and died in the same crash.

b. The date of death as given on the Reports of Interment as "early part of February 45" is merely an estimated one and not binding.

3. In considering the cases of Ensign Kennedy, Lt. (j.g.) Helwig and Ensign Laner individually and comparing them against the Reports of Interment received, the following similarities are noted:

a. In each case the last name has been correctly spelled on the Report of Interment, and in the case of Kennedy the correct first two initials are also given.

b. Each case is reported as Killed In Action, plane crash, location Negroes Island on the Report of Interment, and the same information is given for each in paragraph four in 2nd W/Indorsement.

c. The estimated dates of death could easily be two to three months in error, bringing the dates back to September and October 1944 as also shown in paragraph four of 2nd W/Indorsement.

4. Due to the discharge of the Graves Registration personnel who made the original interments of subject deceased; the near impossibility of locating the natives that made the isolated burials; and the fact that the men were recovered from isolated burials and not directly from a crashed plane, it is not possible to furnish any further information as to plane numbers, engine numbers or verification of the dates of death as requested in paragraph six of 2nd W/Indorsement.

5. In view of the preceding statements it is believed reasonable to assume that the remains presently interred as Helwig, Laner and J.G. Kennedy are one and the same as Lt. (j.g.) Earl Louis Helwig, 156630, USNR, Ensign Daniel Laner, 304256, USNR, and Ensign Jesse Orlando Kennedy, Jr., 200970, USNR, and that corrected Reports of Interment should be submitted establishing them as such.

6. In the case of R. O. Aagan it is recommended that a further review be made of the records of the Navy, Marines and Army for all planes that crashed around Nagres Island between September 1944 and January 1945; and the Royal Australian Air Force and the Royal Air Force of Great Britain be contacted for possible identification as an Allied airman.

LEE W HESTER
Colonel, QMC
Area Graves Registration Officer

8 Incls:

- Incls #1 to 5 - n/c
- Incl #6 - Report of Reinterment-True Copy
Ensign J. O. Kennedy
- Incl #7 - Report of Reinterment-True Copy
R. O. Aagan
- Incl #8 - Report of Reinterment-True Copy
Lt. (j.g.) E. L. Helvig

QCMT 293

4th Ind.

ALAN, R. O.

SUBJECT: Identification of World War II Deceased

Dept. of the Army, OQMC, Washington 25, D. C., 2 August 1949

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

1. Reference is made to preceding correspondence.
2. It is requested that remains now interred as "R. O. Aegan" be designated as an Unknown, and that a corrected Report of Storage be submitted to this Office.

FOR THE ACTING THE QUARTERMASTER GENERAL:

1 Incl: n/c

/s/t/ T. E. METZ
Lt. Colonel, OMC
Memorial Division

A TRUE COPY

H. P. Monemar
H. P. MONEMAR
Capt., OMC

QMGMN 293
GHS Far East

2d Ind

Dept. of the Army, OQMG, Washington 25, D. C., 25 February 1949

TO: Commanding General, Philippine Command, APC 707, c/o Postmaster,
San Francisco, California ATTENTION: AGES FHIICOM ZONE

Department of the Navy Records indicate that W. C. (Machinist)
Richard A. Regan, 197 572, USN was killed along with 1,775 POWs on
24 October 1944 aboard a Japanese transport which was torpedoed off
Shonan, eastern coast of China. Remains have been declared Non-
Recoverable by the Navy.

FOR THE QUARTERMASTER GENERAL:

/s/t/ T. H. METZ
Lt. Colonel, QMG
Memorial Division

1 Incl: n/c

GSCR 293

3rd Ind

HEADQUARTERS, PHILIPPINES COMMAND, APC 707 15 MAR 1949

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

1. With reference to paragraph 3, basic communication, reference
is made to paragraph 1, 1st indorsement.

2. This Headquarters is unable to further identify a casualty
by the name of R. C. AEGAN, neither could this name be associated
with any casualty of a similar name.

FOR THE COMMANDING GENERAL:

s/ Frank C. Calchan, Jr.
p/ FRANK C. CALCHAN, JR.
CWO USA
Asst Adj Gen

1 Incl: n/c

C
O
P
Y

BASIC: Ltr fr Dept of the Army, OQMG, wash. 25, D. C., file QMGMT 293, GRS F. I., dtd 13 December 1948, subject: Burial Information.

GSCR 293

1st Ind

HEADQUARTERS, PHILIPPINES COMMAND, APO 707 26 JAN 1949

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

1. With reference to basic communication, a search of the records available at this Headquarters has failed to disclose additional information on R. C. AEGAN other than that which is contained on the original Report of Interment completed at USAF Cemetery, Bacolod #1, Occidental Negros, I. I. in 1945, see copy attached as inclosure #1.

2. Further investigation reveals a Richard A. REGAN, SN 197572, W. O., USN, date of death 24 October 1944, shown on List of Deceased Naval Personnel in the Pacific - Asiatic Area from 7 December 1941 through 31 December 1946.

3. Request Form 371 on decedent listed in paragraph 2, above in an effort to associate the remains of R. C. AEGAN with Richard A. REGAN.

FOR THE COMMANDING GENERAL:

s/ Frank C. Calohan, Jr.
P/ FRANK C. CALCHAN, JR.
C/C USA
Asst Adj Gen

1 Incl:
As stated

C
C
P
Y

DEPARTMENT OF THE ARMY
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

QMGMT 293
GRS P.I.

13 December 1948

SUBJECT: Burial Information

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

1. Reference is made to Report of Interment for remains interred as R. C. Aegan, ASN unknown, USAF Cemetery, Leyte #1, Grave 6237.
2. A search of records in the Army, Navy and State Departments was made in an effort to associate a casualty with these remains. Results were negative.
3. It is requested that a further search of your records be accomplished to ascertain whether subject remains can be associated with a casualty by this name, and that this office be advised of your findings.

FOR THE QUARTERMASTER GENERAL:

/s/t/ T. H. METZ
Lt. Colonel, QMG
Memorial Division

C
O
P
Y

BASIC: Ltr fr Hq., AGRS Mausoleum, Manila, APO 707, file GSQMM, dtd
5 Feb 48, subject: Report of Discrepancy.

GSGPR 293

3rd Ind

WHF/lfi*

Headquarters, American Graves Registration Service, PHILRYCOM Sector
APO 707, 24 March 1948

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

Records of this office indicate place of death of subject decedent
as Negros, P. I. In this connection, attention is invited to the inclosed
copy of Casualty Card, Report of Interment, and Report of Reinterment.

FOR THE COMMANDING OFFICER:

6 Incls:

1-3 - n/c

Added:

4 - Gy Cas Card

5 - Report of Interment

6 - Report of Reinterment.

HAROLD F. BEVERSKI
Lt. Colonel, USAF
Executive

FKQM 293

4th W/Ind.

HP/haw

HEADQUARTERS BASE K, UNITED STATES ARMY FORCES WESTERN PACIFIC, APO 72
21 May 1946.

TO: Headquarters, United States Army Forces Western Pacific, APO 707.

1. Due to lack of information in the case of LANER, the remains, now reinterred in grave 6589, USAF Cemetery Leyte #1, P.I., are now carried on records as UNKNOWN X-504, Tentatively known as "LANER".

2. LANER was changed to X-504, "Tentatively known as LANER" per Ltr, AFWESPAC, OCQM, dtd 2 March 1946.

3. Inclosure #4 is a true copy of the corrected report for UNKNOWN X-504, grave 6589, USAF Cemetery Leyte #1, submitted to CQM, AFWESPAC, APO 707, on 17 May 1946, by this headquarters.

4. Inclosure #5 is true copy of report of DIS-Interment for LANER, showing that he was disinterred from grave 57, row 3, plot 1, USAF Cemetery Bacolod #1, Occidental Negros, P.I.

5. This headquarters has no report of interment on file for LANER, only the report of DIS-Interment (Inclosure #5) was received with remains.

FOR THE COMMANDING OFFICER:

5 Incls:

Incls: #1-3 n/c

Incls: #4 True Copy Corrt'd Rep
of Reint for X-504,
Tentatively known as LANER

Incls: #5 True Copy of Rep of DIS-
Int. for LANER.

C. P. MCCUSKEY
Major, AGD
Adjutant General

FKQM 293

3rd Ind.

HP/hsw

HEADQUARTERS BASE K, UNITED STATES ARMY FORCES WESTERN PACIFIC, APO 72,
27 May 1946.

TO: Headquarters United States Army Forces Western Pacific, American Graves
Registration Service Sector Command, APO 707.

1. Transmitted herewith WD QMC Form 1042 (in triplicate) for Unknown
X-504, with WD QMC Form 1045 attached to each copy/

2. Request acknowledgement of receipt by indorsement hereon.

FOR THE COMMANDING OFFICER:

3 Incls: n/c

C. P. McCUSKEY
Major, AGD
Adjutant General

30 November 1948

QM LIAISON OFFICE, PENTAGON:

It is requested that a review of records in the AGO be made in an effort to associate a casualty (either Army or civilian attached to the Army) with each of the following listed deceased, for whom reports of burial have been received, but no serial numbers are known. If no association is made, it is requested that the State Department be contacted for possible association with American civilians.

1. R. O. AEGAN - Reported killed in plane crash February 1945, Negros, P.I. (No additional information is known)
2. A. LYNN - Believed drowned in San Pedro Bay, Leyte, P.I., date unknown. (No additional information known)
3. ELMER V. SCHARD - Reported killed in action in bombing 27 October 1944, Palo, Leyte, P.I. (No additional information known)

It is further requested that results of your findings be noted below and this correspondence returned to Identification Section, Identification Branch, Mem Div, OCMG.

Mr. White
X - 74158

Mr. White

9 Dec. 1948

A thorough search of the AGO Casualty files fails to disclose a record on any of the above-mentioned deceased. Check was also made with the Passport Division of the State Department, but none of the above could be identified.

B. J. Z.
SEKOWSKI
6679

E. M. B.
DYER
73090

HEADQUARTERS
PHILCOM ZONE
AMERICAN GRAVES REGISTRATION SERVICE

6 Dec 1949

Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 728, Plot _____,
Row _____, Grave 6237, USMC USAF Cem. Leyte #1 _____ 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. McNEEMAR
Captain, QMC
Chief, Records Branch

Atch: Form 1044

Received 4 Jan. 1950 OQMG
Not identifiable from
information presently
available 10 Jan. 1950

Ed Rausch

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-728 Leyte #1						2. DATE OF REPORT 15 Dec 1949		
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.				4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
				800	10-B		DISINTERMENT	REINTERMENT
PHYSICAL DESCRIPTION								
8. ESTIMATED WEIGHT U T D		9. ESTIMATED HEIGHT U T D		10. COLOR OF HAIR U T D		11. RACE Unknown		
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"

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

TOP VIEW

SIDE VIEW



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

Gold Crown, Porcelain Crown



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

Gold Bridge



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

Gold Filling, Silver Filling



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

Cavity, Decayed



RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Side Views (Upper and Lower rows)															
Top Views (Upper and Lower rows)															
X	A	R													
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

See Remarks

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: U T D whether L9 thru L11 are X or PX due to condition of mandible badly decomposed.

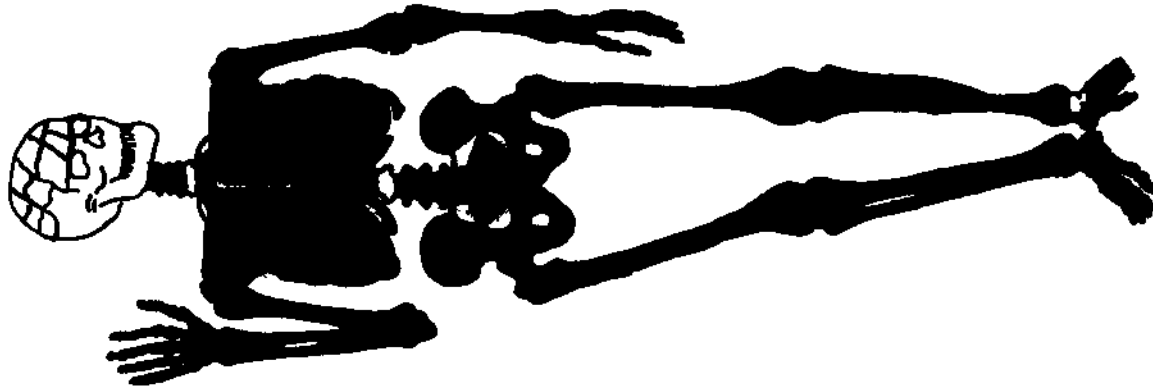
Portion of mandible and mandibular teeth missing from L12 thru L16. No caries found on maxillary teeth present.

"UNIDENTIFIABLE"

Paul R. Nichols
PAUL R NICHOLS
Chief, Identification Section

BY REASON OF LACK OF IDENTIFYING DATA

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 ROI, identification tags or personal effects found with remains.
Estimated weight of remains - 10 oz.

"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

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.

BTB: Unknown X-728 2-2-48
DATE

AEGEN, R. O. RANK None
SERIAL NO.

UNIT USNR
ORGANIZATION

PLACE OF DEATH PLACE OF BURIAL PLOT ROW GRAVE NO.
















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

INSIDE — LOOKING OUT

fracture *mandible & teeth missing*

	RIGHT				LOWER TEETH				LEFT								
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16	
TYPE	X	A	A				P										TYPE
LOCATION		o	OL														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)

(101)

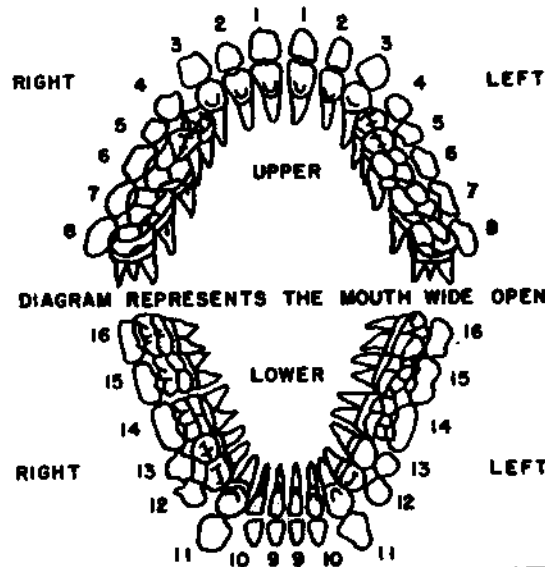
INSTRUCTIONS:

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 $\frac{3}{4}$), $\frac{3}{4}$ GOLD CROWN WITH SILICATE WINDOW.

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



REMARKS:

Perry F. White
SIGNATURE OF PERSON WHO PREPARED CHART

Perry F. White
NAME AND RANK TYPED OR PRINTED

PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

VERIFIED BY GRS OFFICER

NAME AND RANK TYPED OR PRINTED

DATE

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.

BTB: UNKNOWN X-TRE 2-2-48
DATE

AEGEN, R. O.
LAST NAME FIRST INITIAL

_____ RANK _____ SERVICE NO. _____

_____ UNIT USNR
ORGANIZATION

PLACE OF DEATH PLACE OF BURIAL PLOT ROW GRAVE NO.

impacted *fracture* *maxilla & teeth missing*

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8

RIGHT UPPER TEETH LEFT

TYPE																		TYPE	
LOCATION		A	A																LOCATION
		o	OL																
















fracture
INSIDE — LOOKING OUT

16 15 14 13 12 11 10 9 9 10 11 12 13 14 15 16

RIGHT LOWER TEETH LEFT

TYPE																	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)

7.1/42

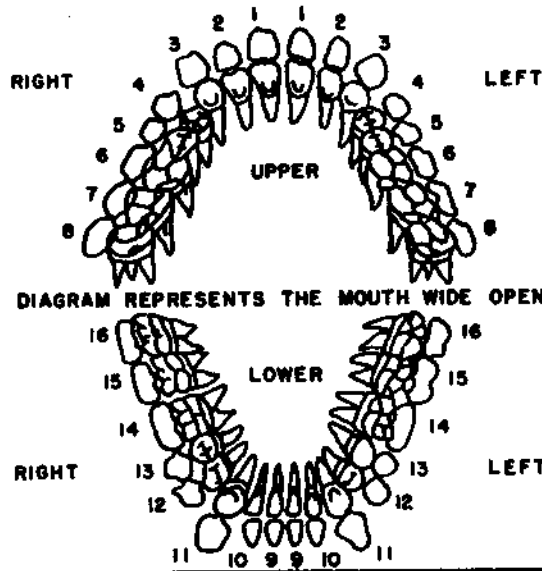
INSTRUCTIONS:

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 $\frac{3}{4}$), $\frac{3}{4}$ GOLD CROWN WITH SILICATE WINDOW.

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



REMARKS:

Perry K White
SIGNATURE OF PERSON WHO PREPARED CHART

Perry K White
NAME AND RANK TYPED OR PRINTED

PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

VERIFIED BY GRS OFFICER

NAME AND RANK TYPED OR PRINTED

DATE

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.

BTB: X-728

2-2-48

AEGEN R. O.
LAST NAME FIRST INITIAL

RANK

None
SERIAL NO.

UNIT

USNR
ORGANIZATION

PLACE OF DEATH

PLACE OF BURIAL

PLOT

ROW

GRAVE NO.

	RIGHT								UPPER TEETH				LEFT				
	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
TYPE																	
LOCATION																	<i>O</i> <i>M</i>

INSIDE — LOOKING OUT

	RIGHT								LOWER TEETH				LEFT				
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16	
TYPE																	
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	OXYPHOSPHATE (CEMENT)	LINGUAL (TOWARD TONGUE)
POSTHUMOUSLY MISSING (LOST AFTER DEATH)		FACIAL (TOWARD CHEEK)

Incl # 3

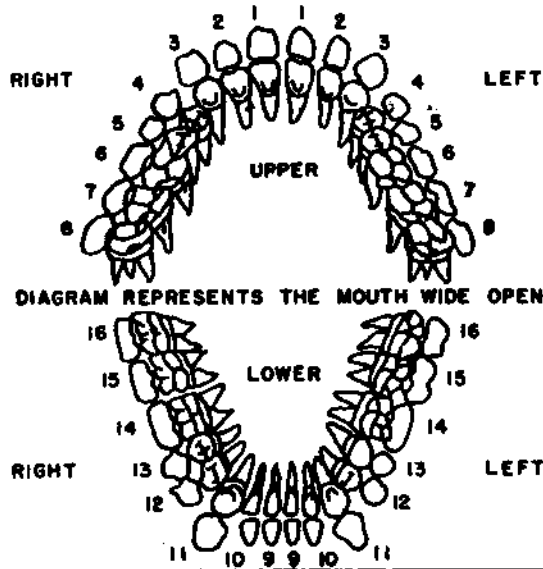
INSTRUCTIONS:

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 $\frac{3}{4}$), $\frac{3}{4}$ GOLD CROWN WITH SILICATE WINDOW.

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



REMARKS:

Kerry E. White
SIGNATURE OF PERSON WHO PREPARED CHART

Kerry E. White
NAME AND RANK TYPED OR PRINTED

PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

VERIFIED BY GRS OFFICER

NAME AND RANK TYPED OR PRINTED

DATE

HEADQUARTERS
PHILCOM ZONE
AMERICAN GRAVES REGISTRATION SERVICE

PRN/JJH/cvs*

APO 900
2 August 1949

RECOMMENDATION OF CHANGE FROM KNOWN
TO UNKNOWN STATUS

AEGAN, R. O., AGRS Mslm., Manila, P.I.
(Hangar 802, Bay T, Crypt 5351)

(Formerly Grave 6237, USAF Cem. Leyte #1, P.I.)
(Originally Grave 56, Row 3, Plot 1, USAF Cem.
Bacolod #1, Occ. Negros, P.I.)

BASIS FOR CHANGE OF STATUS

1. On 12 April 1945 the remains presently designated as those of "R. O. AEGAN" were interred in Row 3, Grave 56, USAF Cem. Bacolod #1, Occ. Negros, P.I. (See Incls. 6 and 9).
2. The remains were originally recovered from an isolated burial and were positively identified as one "R. O. AEGAN" by Filipinos who had originally interred the remains. No means of identification were found with the remains. (See Incl. 6).
3. The original ROI for the remains designated as "R. O. AEGAN" states that subject decedent was probably a member of the U.S. Navy Air Corps who was killed in an airplane crash on Negros in the early part of February 1945. (See Incl. 10).
4. In processing remains of AEGAN, R. O. at CIP, AGRS Mausoleum, Manila, P.I., found with the remains were two (2) maxilla and one (1) mandible, indicating definitely remains of two (2) bodies. They were wrapped separately and placed in one casket and carried as known - AEGAN, R. O. (See reverse side of incl. 1).
5. According to OQM letter QMGMT 293, GRS, P.I., dated 13 Dec. 1948, subj: Burial Information, a search of records in the Army, Navy and State Departments was made in an effort to associate a casualty with the remains designated as "R.O. AEGAN" with negative results. Further search of records in this headquarters was made, with negative results. (See Incl. 8).

Y. cl.

RECOMMENDATION FOR CHANGE OF STATUS: (continued)

AEGAN, R. O., AGRS Mausoleum, Manila, P.I.
(Hangar 802, Bay T, Crypt 5351)

6. OQMG letter QMGMS 293 RAGAN, Robert G., SN 0-696 141, dtd 10 May 1948, subj: Report of Discrepancy, forwarded OQMG Form 371 for 2nd Lt. Robert G. Ragan, 0-696 141, for possible association with the remains designated as "R. O. AEGAN", however, a comparison of identification data on OQMG Form 371 for 2nd Lt. Ragan with identification data for remains designated as R. O. AEGAN was made with negative results. (See statement of CIP Lab. Officer).

7. Investigation revealed that 2nd Lt. Ragan was one of seven (7) crew members of a B-25 aircraft, serial No. 43-36163, which crashed in the Philippine area, therefore, data on the OQMG Forms 371 for the other six (6) crew members were compared with the data obtained from reprocessing the remains designated as "R. O. AEGAN" with negative results.

8. On the basis of the above, it is recommended that the remains presently stored at AGRS Mausoleum, Manila, P.I. (Hangar 802, Bay T, Crypt 5351), as R. O. AEGAN be redesignated as Unknown remains and assigned an unknown number.

IDENTIFICATION ACCEPTED. APPROVAL RECOMMENDED: 2 August 1949

Wilbur G. Hobbs
WILBUR G. HOBBS
1st Lt., Inf
0-887 555
Member

John Sheppula
JOHN SHEPPULA
1st Lt., Inf
0-1 307 091
Member

Harold B. Monemar
HAROLD B. MONEMAR
Capt., QMC
0-507 074
Member

*See file 11 Sept 49
with original
copy of letter
to file 11 Sept 49
with original
copy of letter
to file 11 Sept 49*

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE

APO 900
13 July 1949

GRPZ

SPECIAL ORDER
NUMBER 82

1. EXTRACT


2. In accordance with ltr Hqs OTAG file AGAO-S 293.9 (27 Mar 47) D-M, Subject "Establishment of Boards of Review for Identification of Unknown Dead Overseas", CINCFE radio CX59238 dtd 18 March 48 and par 59 h, TM 10-281, the following Officers, 8131st Sv Unit AGRS-PZ, APO 900, are aptd as Board of Officers for the purpose of reviewing and acting upon all cases referred to the Board pertaining to identity of unknown remains, finalizing disinterment discrepancy reports, and to review and determine in all cases, from evidence presented, the non-recoverability of remains referred to the Board within the PHILCOM Zone, AGRS:

MEMBERS OF BOARD

Major	Elee L. Tyler	O-324330	Inf
Major	Glenn A. Lee	O-23792	Cav
Capt	Harold B. McNemar	O-507074	QMC
1st Lt.	Wilbur G. Hobbs	O-887555	Inf
1st Lt.	John Shypula	O-1307091	Inf

BY ORDER OF MAJOR TYLER:

OFFICIAL:


JOHN SHYPULA
1st Lt., Inf
Adjutant

JOHN SHYPULA
1st Lt., Inf
Adjutant

DISTRIBUTION

"A"

QMCMT 293
GRG P.I.

13 December 1948

SUBJECT: Burial Information

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

1. Reference is made to Report of Interment for remains interred as R. O. Regan, ASN unknown, USAF Cemetery, Leyte #1, Grave 6237.
2. A search of records in the Army, Navy and State Departments was made in an effort to associate a casualty with these remains. Results were negative.
3. It is requested that a further search of your records be accomplished to ascertain whether subject remains can be associated with a casualty by this name, and that this office be advised of your findings.

FOR THE QUARTERMASTER GENERAL:

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


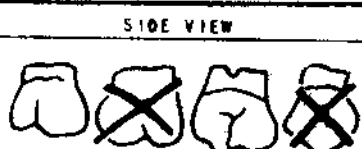




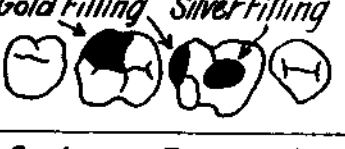



A TRUE COPY:







H. B. McNEELAR
Capt., QMC

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN AEGEN, R. O				2. DATE OF REPORT 21 June 48				
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P. I.			4. PLOT HANGAR 802	5. ROW BAY T	6. GRAVE CRYPT 5351	7. DATE OF DISINTERMENT 31 Dec 47		REINTERMENT STORAGE 31 Jan 48
PHYSICAL DESCRIPTION								
8. ESTIMATED WEIGHT U T D		9. ESTIMATED HEIGHT U.T.D. <i>(See section 31, of skeletal chart att.)</i>			10. COLOR OF HAIR U T D		11. RACE Unknown	
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS								
One I.D. tag found with this inscription: AEGEN, R. O. (No Rank and ASN found on same tag.)				No embossed tag or cemetery tag found with remains.				
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 type="checkbox"/> YES <input checked="" type="checkbox"/> NO								
15. WAS BODY MANGLED?		TO WHAT EXTENT?						
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO								
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)								
N O N E								

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
															
															
															
															
X	A	A				P	P	UTD						MISSING	
16	15	14	13	12	11	10	9	8	7	6	5	4	3	2	1

SECRET

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: U T D whether L9 thru L11 are X or P due to condition of mandible badly decomposed.

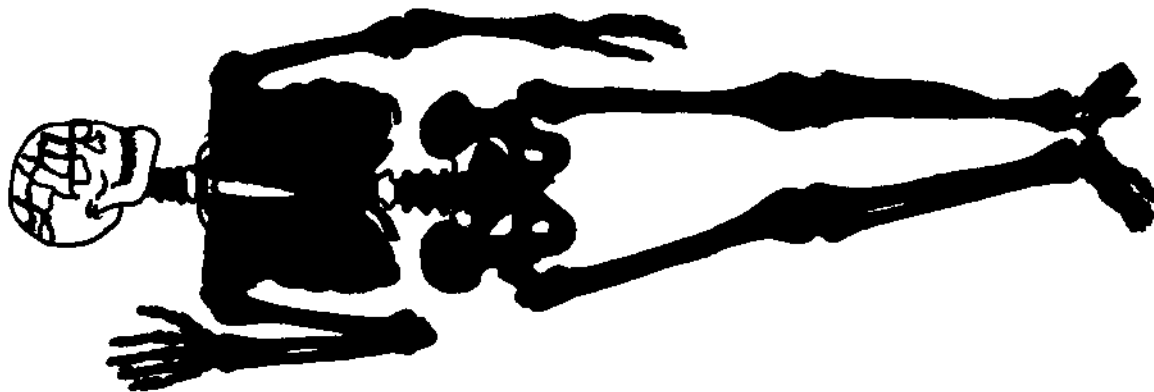
Portion of mandible and mandibular teeth missing from L12 thru L16. No caries found on maxillary teeth present.

CERTIFIED TRUE COPY:

/s/t/ L. S. PANOPIO, 1st Lt., INF

/s/ Sgt. Joseph D. Murphy

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 ROI bottle or personal effects found with remains.

Circumference of skull in inches: - UTD due to decomposed skull found with remains.

Estimated weight of remains - 10 ounces.

Estimated height of remains is UTD due to no bones found with remains with the exception of the decomposed skull found.

In processing these remains, two (2) maxillas were found and designated as AECEN, R. O. No. 1 and No. 2. (See Toothcharts attached).

See CIP statement, dated 22 June 1948.

CERTIFIED TRUE COPY:

A TRUE COPY:

H. B. McNEMAR
Captain, QMC

/s/t/ L S PANOPPIO, 1st Lt, INF

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

SIGNATURE

/p/ CHARLES F. FEENEY - Emb -SP - 6
CIP LAB, MANILA, P.I.

/s/ Charles F. Feeney

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN AEGEN, R. O. (USAF Cemetery Leyte #1, P.I.)						2. DATE OF REPORT 21 June 48		
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P. I.				4. PLOT 802	5. ROW T	6. GRAVE 5351	7. DATE OF DISINTERMENT 31 Dec 47	REINTERMENT 31 Jan 48
PHYSICAL DESCRIPTION								
8. ESTIMATED WEIGHT U T D		9. ESTIMATED HEIGHT U.T.D. <i>(See section 21, of skeletal chart att.)</i>			10. COLOR OF HAIR U T D		11. RACE Unknown	
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>One I.D. tag found with this inscription:- AEGEN, R. O. (No Rank and ASN found on same tag)</p> </div> <div style="width: 45%;"> <p>No embossed tag or cemetery tag found with remains.</p> </div> </div>								
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES <p style="text-align: center;">U T D</p>								
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 <p style="text-align: center;">U T D</p>								
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. <i>(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)</i> <p style="text-align: center;">N O N E</p>								

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:			

enlisted

RIGHT								LEFT								
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
	A	A					P	← MISSING →								
← 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."

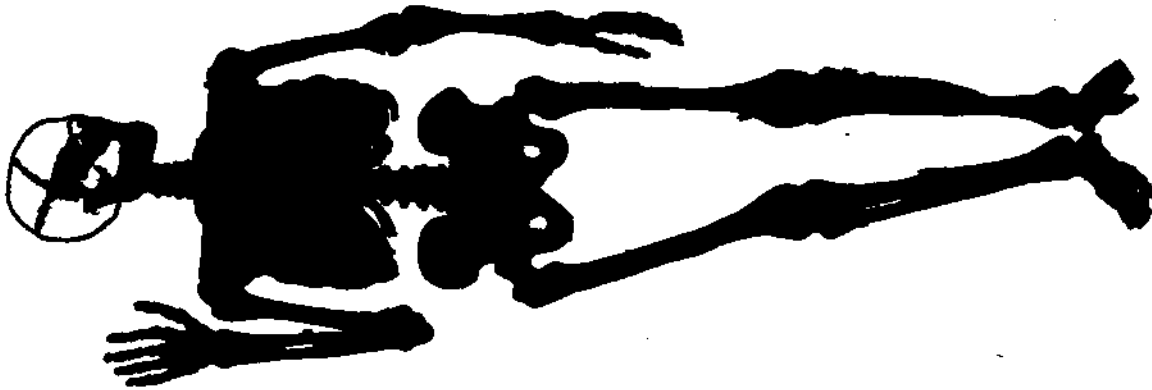
REMARKS: Portion of maxilla and maxillary teeth missing from L-1 thru L-8. Mandible and mandibular teeth missing with remains.

CERTIFIED TRUE COPY:

/s/t/ L. S. PANOPIO
1st Lt., INF

/s/ Sgt Joseph D. Murphy

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 ROI bottle or personal effects found with remains.
Circumference of skull in inches:-U.T.D. due to the decomposition of skull.

Estimated weight of remains - 8 ounces.
Estimated height of remains is unobtainable due to no bones found with remains with the exception of the decomposed skull found.

In processing this remains two (2) maxillas were found, and designated as AEGAN, R. O. No. 1 & No. 2.

(See attached statement of GIP Laboratory, dated 22 June 1948).

CERTIFIED TRUE COPY:

/s/t/ L. S. PANOPIO
1st Lt., INF

A TRUE COPY:

[Handwritten Signature]
H. B. McNEMAR
Captain, QMC

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

SIGNATURE

/p/ CHARLES F. FEENEY

/s/ Charles F. Feeney

HEADQUARTERS
CENTRAL IDENTIFICATION POINT
LABORATORY

JJM/abl

APO 707
22 June 1948

S-T-A-T-E-M-E-N-T

Remains of AEGEN, R. O., re-processed as per 1st Ind ltr re-discrepancy. The OQMG Form 371 of 2nd Lt RAGAN, Robert G., was submitted for comparison. The OQMG Form 371 of RAGAN, Robert G., does not compare favorably with the teeth of AEGEN, R. O., and fragmentation of bones make estimate of height impossible. Upon processing it was determined that there were two partial skulls, two maxillas and one mandible. The portion of two skulls bear evidence of fire but the one mandible does not indicate burning but the one mandible does compare favorably with one maxilla so that there are definitely two remains but neither remains are RAGAN, Robert G. The only way to substantiate identity of AEGEN, R. O., would be by AEGEN's OQMG Form 371 comparison. Recommend assigning Unknown case number to AEGEN, R. O., showing AEGEN, R. O., could possibly be one of the two remains.

Pending disposition authorization from headquarters, both cases are still casketed as one remains and still carried as known - AEGEN, R. O.


s/ Charles F. Feeney
t/ CHARLES F. FEENEY
Emb. - C-063090

s/ James J. McDermott
t/ JAMES J. McDERMOTT
Laboratory Officer

CERTIFIED TRUE COPY:

A TRUE COPY:

/s/t/ L. S. PANOPIO
1st Lt., INF


H. B. McNEMAR
Captain, QMG

REPORT OF DISINTERMENT FOR IDENTIFICATION

12 January 1948

1. Remains of (Name)

Serial Number

AEGEN, R. O.

Grade

Organization

.Name, Number and Location of Cemetery

Plot

Row

Grave No.

USAF Cemetery Leyte #1, P.I.

6237

2. Date of Disinterment

31 December 1947

3. Report as to Nature of Original Burial and Condition of Body Upon Disinterment.

Original made in shelter halve burial. Majority of the bones missing. No tag found on remains. Tag on marker coincide with R.O.I. on file.

4. What Identification Found at Time of Disinterment: On Marker

Subs. tag

On Remains

Identification tag

What Identification Used Upon Reinterment: On Marker

None

On Remains

Held for concentration

5. Signature of Officer Supervising Disinterment and Reinterment.

/s/t/ PAUL R. NICHOLS, Embalmer

215

INSTRUCTIONS FOR PROPER MARKINGS ON DENTAL CHART

1. Give all information and description on dental chart as nearly correct as the condition of the body will allow. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: lost teeth, crowned teeth, bridgework, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

Missing Teeth



Crowned Teeth



Bridgework



Fillings



Caries (Cavities)

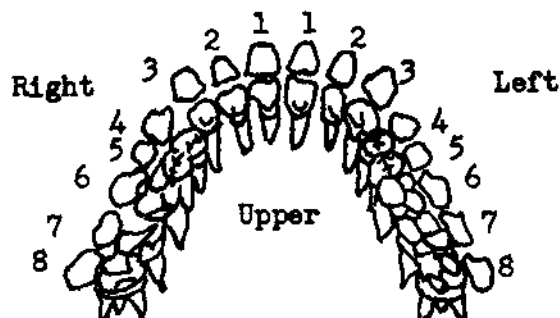
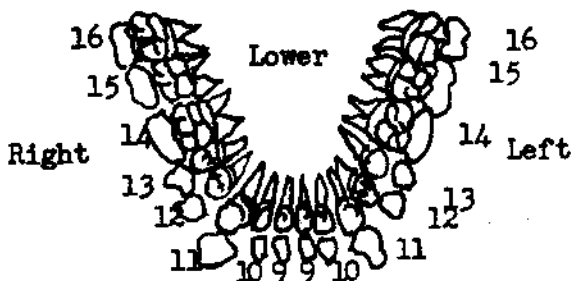


Diagram represents the mouth wide open



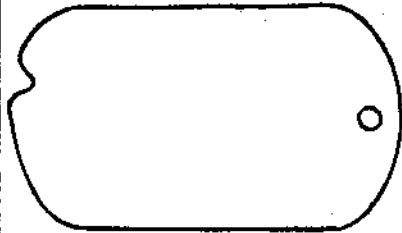

Dentures (Plates) Draw diagram of relative size and shape of plate block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp".

Remarks

NY-08874-5

RESTRICTED

fvs-6237

WD OMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)				DATE OF REPORT 29 Jan 46	
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.					
		NAME (Last, first, middle initial) AEGEN, R.O.				SERIAL NO.	
		GRADE		ORGANIZATION		BRANCH OF SERVICE	
		RACE		RELIGION		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	
PLACE OF DEATH NEGROS, P.I.		CAUSE OF DEATH			DATE OF DEATH		
EMERGENCY ADDRESSEE (Name, relationship, and address)							
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) Identified by Filipino Burial Party. Disint. from USAF CEM. BACOLOD # 1, NEGROS, P.I.					
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) YES							
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME NONE							
A TRUE COPY:  E. B. McNEELAR Captain, OMC							
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.							
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY USAF CEMETERY LEYTE # 1, P.I.							
DATE OF BURIAL 12 Jan 46	HOUR 1400	BURIED IN (Shroud, blanket, or name of casket) Shelter half	TYPE OF GRAVE MARKER Reg Cross	PLOT No.	ROW No.	GRAVE No. 6237	
WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF CEMETERY BACOLOD #1, OCCIDENTAL NEGROS, P.I.			PLOT No. 1	ROW No. 3	GRAVE No. 56	
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY				
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes						
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) BUCHANAN, German D.		RANK	SERIAL No. 34 983 553	ORGANIZATION Hq 503 Para Inf.	GRAVE No. 6236		
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) JIMENES, Rupert		RANK T/Sgt	SERIAL No. 20 911 180	ORGANIZATION Co F, 185 Inf	GRAVE No. 6238		
SIGNATURE OF PERSON PREPARING REPORT Sgt. Charles W. Hallock, GRS			SIGNATURE OF GRS OFFICER VERIFYING REPORT WILLIAM D. ROGERS, 1st Lt. Inf.				
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commands.							

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Section 2- 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:

CONDITION OF BODY PRECLUDED A TOOTH CHART.
MEXILLA AND MANDIBLE MISSING.

IDENTIFICATION DENTAL CHART

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

31-12-7

DATE

MEGEN R. O.

LAST NAME

FIRST

INITIAL

RANK

SERIAL NO.

UNIT

ORGANIZATION

NEGROS, P.I.

USAF Cemetery Leyte #1, P.1

6237

PLACE OF DEATH

PLACE OF BURIAL

PLOT

ROW
















GRAVE NO.

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

INSIDE — LOOKING OUT *Missing Remnant* →

	RIGHT								LOWER TEETH				LEFT							
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16				
TYPE	X	A	⊖				⊖													
LOCATION		o	o/																	

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	 OXYPHOSPHATE (CEMENT)	 LINGUAL (TOWARD TONGUE)
 POSTHUMOUSLY MISSING (LOST AFTER DEATH)		 FACIAL (TOWARD CHEEK)

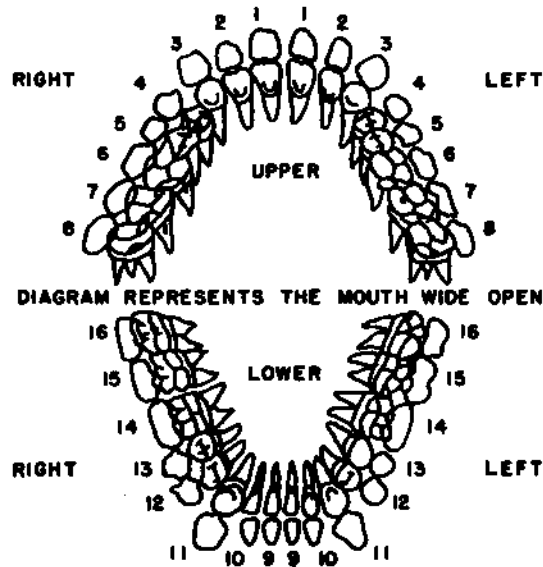
INSTRUCTIONS:

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 $\frac{3}{4}$), $\frac{3}{4}$ GOLD CROWN WITH SILICATE WINDOW.

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



REMARKS:

/s/ Braulio P. Baring
SIGNATURE OF PERSON WHO PREPARED CHART

/s/ Paul R. Nichols
VERIFIED BY GRS OFFICER

/t/ BRAULIO P. BARING, Specialist
NAME AND RANK TYPED OR PRINTED

/t/ PAUL R. NICHOLS
NAME AND RANK TYPED OR PRINTED

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

31 December 1947
DATE

A TRUE COPY:

[Handwritten Signature]
W. MONEMAR
Captain, QMC

18 October 1945

TO: Commanding General, Headquarters, U. S. Army Services of Supply,
APO-707, c/o Postmaster, San Francisco, California.

Subj: Information concerning certain naval personnel.

1. Returned. Records of this Bureau failed to identify the personnel listed in basic correspondence as having died as the result of a plane crash in the early part of February 1945 on Negros, P.I.
2. Listed below are naval personnel of similar names who are being carried in a casualty status. The date of casualty, duty attachments, status and next of kin are also indicated.

Ensign Jesse Orlando Kennedy, Jr., A-V(N), USNR, 300970 (Deceased) -
(attached to VF-35, killed 19 Oct. 1944 Air Combat)
Father - Mr. Jesse Orlando Kennedy, Sr., Reidsville, Georgia

Lieut. (jg) Earl Louie Helwig, A-V(N), USNR 156630 (Missing) -
(Attached to VF-60, missing 23 Oct. 1944 enemy action)
Mother - Mrs. Laura Martha Helwig, 22053 Beech St., Dearborn, Michigan

Ensign Daniel Laner, A-V(G), USNR, 304256 (Missing) -
(attached to VT-18, missing 13 Sept. 1944 enemy action)
Mother - Mrs. Madalene Bogg, Marcola, Oregon

3. The Bureau is unable to identify R. O. Aegan as a member of the United States Navy. A check of the casualty files of the United States Army reveals that 2nd Lieutenant Robert L. Agan, O-689729, a member of the United States Army Air Corps, was killed in action on 15 April 1945. Lieutenant Agan listed as his next of kin, Mrs. Mary J. Agan, 70 St., Johns Avenue, Binghamton, New York.

By direction of Chief of Naval Personnel.

/s/ H. B. Atkinson
/t/ H. B. ATKINSON
Commander, USNR
Officer in Charge
Casualty Section

cc: ComServ7thFlt
ComServPacFlt

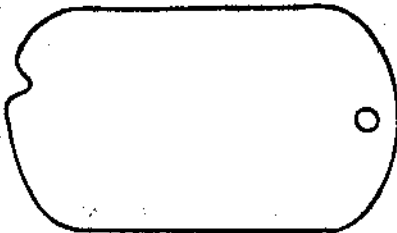

A CERTIFIED TRUE COPY:

HENRY PATERNO, 1st Lt., QMC

A TRUE COPY:


H. B. McNEMAR
Capt. QMC

RESTRICTED

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)			DATE OF REPORT <p align="center">4 Jan 46</p>	
Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.					
	NAME (Last, first, middle initial) <p align="center">AEGEN, R. O.</p>			SERIAL NO.		
	GRADE	ORGANIZATION		BRANCH OF SERVICE		
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY				
PLACE OF DEATH	CAUSE OF DEATH			DATE OF DEATH		
EMERGENCY ADDRESSEE (Name, relationship, and address)						
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or 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)		A TRUE COPY:  H. B. MCNEMAR Captain, QMC				
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME REINTERRED 12 Apr 45 (Cemetery or location Unknown) Disinterred from USAF Cemetery, Bacolod No. 1, Occidental Negros, P.I. Grave No. 56, Row No. 3, Plot No. 1						
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.						
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY						
DATE OF BURIAL Reinterred 12 Apr 45	HOUR	BURIED IN (Shroud, blanket, or name of casket)	TYPE OF GRAVE MARKER <p align="center">Reg. Cross</p>	PLOT NO.	ROW NO.	GRAVE NO.
WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE			PLOT NO.	ROW NO.	GRAVE NO.
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES <p align="center">HALLINAN</p>		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY			
IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)					
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)		RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)		RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.	
SIGNATURE OF PERSON PREPARING REPORT			SIGNATURE OF GRS OFFICER VERIFYING REPORT <p align="center">WILLIAM C. EHINGER, 1st Lt., QMC</p>			
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 Office. Copies for retention in theater as prescribed by theater commander.						

RESTRICTED

RESTRICTED

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>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:

Condition of body precluded the taking of a tooth chart.

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
MAUSOLEUM
Manila

WRG/glm
arO 707
5 February 1948

GSQ:ll

SUBJECT: Report of Discrepancy

TO : Commanding Officer, AGRS-FEZ, FHEIRYCOM Sector, APO 707
Attn: Records Section

1. Reference remains of AEGAN, R. O., (No ASN) disinterred from USAF Cemetery Leyte #1, and presently stored in Hangar 802, Bay T, Crypt 5351.
2. Found with remains are two (2) maxillas and one (1) part of a mandible.
3. Three (3) toothcharts prepared and forwarded herewith.
4. R. O. S. prepared and previously forwarded your section.

FOR THE COMMANDING OFFICER:

3 Incls: Toothcharts.

/t/ Wm R. GILBERT
Exec. adm. asst.

A TRUE COPY:


H. B. McNEELAR
Capt., QMC

DEPARTMENT OF THE ARMY
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

QMGS 293
Ragan, Robert G.
SN C-696 141

10 May 1948

SUBJECT: Report of Discrepancy

TO: Commanding General
Philippine-Ryukyus Command
ARO 7-7, c/o Postmaster
San Francisco, California
ATTENTION: AGRS, Philrycom Zone

1. Reference is made to 1st Indorsement, your headquarters, file GSQM 293, dated 12 February 1948 pertaining to report of discrepancy re Ragan, R. O.

2. Attached herewith is QMG Form 371 pertaining to Second Lieutenant Robert G. Ragan, C-696141 for possible association with above referenced case. If identification cannot be established request attached QMG Form 371 be processed in accordance with provisions of letter, The Adjutant General's Office, file AGAO-S 293.9 (27 Mar 47) D-4, subject, Establishment of Boards of Review for Identification of Unknown Dead Overseas, dated 9 April 1947.

FOR THE QUARTERMASTER GENERAL:

1 Incl
QMG Form 371 (in dup)

/s/t/ T. H. METZ
Lt. Colonel, QMG
Memorial Division

A TRUE COPY:


R. B. McHenry
Capt., QMG

ALL MAIL

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DATA ON REMAINS-NOT YET RECOVERED OR IDENTIFIED

NAME (Last, First, Middle Initial) RAGAN, ROBERT		GRADE 2nd Lt	PRESENT SERIAL NUMBER C-69-141
ORGANIZATION 499 Bomb Sq. 345 Bomb Gp.		RACE W	CREED P
FORMER SERIAL NUMBER (If applicable) 15101664		DATE OF DEATH/MIA 8 Jan 45	
CAUSE OF DEATH KILLED IN ACTION		PLACE OF DEATH OR PLACE LAST SEEN IF MIA BEROS ISLANDS	
DATE OF FOD	HEIGHT 5' 3"	WEIGHT 136th	COLOR EYES GREY
			COLOR HAIR GREY
			SHOE SIZE

DENTAL CHART

28 - June - 44

UPPER RIGHT	dos dol mod 8	dos mo ola 6	X	MOD PA 4	MD S 3	MD S 2	D S 1	UPPER LEFT	MD S 1	DO FA 2	MS OK 3	MO DA 4	MO DA 5	MOD FA 6	X	8	
LOWER RIGHT	X 16	MOD LFA 15	mod AA 14	do A 13	do A 12	11	X 10	9	LOWER LEFT	D S 9	DO A 10	DA 11	X 12	MO DA 13	MO DOA 14	15	16

X=Extracted

O=Cariou

1=Cariou Non-Restorable

FRACTURES AND/OR BREAKS Fracture radius & ulna - left wrist 1931 - NSND	TATTOOS AND/OR BIRTHMARK SEDAL SPUR RT -20% OBST - NSND
---	--

ADDITIONAL INFORMATION

BORN - 17 Dec. 1915

(C O P Y)

BASIC: Ltr Hqs, AFWSBPAC, OCGM, file GSQMS 285, APO 707, dtd 2 Mar 46,
subj: Graves Registration

S: 22 June 46

GSQMS 214.6

2nd Indl.

WBC/lmm

HEADQUARTERS, UNITED STATES ARMY FORCES WESTERN PACIFIC, AMERICAN GRAVES
REGISTRATION SERVICE SECTOR COMMAND, APO 707, 22 May 1946.

TO : Commanding Officer, USAF Cemetery Leyte #1, APO 72

1. Request tooth chart WD OMC Form #1042 be accomplished in triplicate
and attached to Report of Reinterment for Unknown X-804.

2. Further request Report of Reinterment be so designated on WD OMC
Form #1042 and that a triplicate copy of Report of Reinterment be forwarded
this Headquarters with return of correspondence.

LEE M. HESTER

Colonel, OMC

Sector Graves Registration Officer

3 Incls: n/c

SUSPENSE COPY

907

RESTRICTED

Salon: 72749

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

CORRECTED

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

DATE OF REPORT

25 Aug 49

Imprint Identification Tag If Possible.
DO NOT TYPE

Plotted
McCRORY, H. P.
392 68594
6237

Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN X-728 USAF Cemetery Leyte #1 (Formerly AEGAN, R. O.)		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 Negros, P. I.	CAUSE OF DEATH Unknown	DATE OF DEATH Unknown
---------------------------------	---------------------------	--------------------------

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) Subject remains are redesignated to unknown status as per 4th Ind. fr the DA, OCMG, Wash. 25, D. C., file OCMGT 293, AEGAN, R. O., dtd 2 August 1949, subj: Identification of World War II Deceased. (True copies of Basic ltr, 1st, 2nd, 3rd and 4th Inds. attached)
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) Yes (2)	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME
None

Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

AGRS MAUSOLEUM, MANILA, P. I.

DATE OF BURIAL 31 Jan 48	HOUR 1100	BURIED IN (Shroud, blanket, or name of other) Casket	TYPE OF GRAVE MARKER	PLOT No. 800	ROW No. 10B	GRAVE No.
-----------------------------	--------------	---	----------------------	-----------------	----------------	-----------

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. 6237
--	--	----------	---------	-------------------

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
----------------------------	--------------------------------	---

IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes
--	--


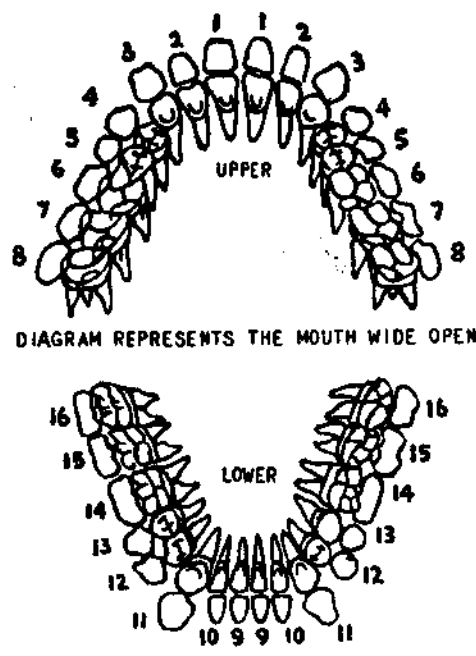




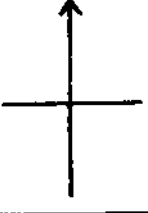
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
--	------	------------	--------------	-----------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
---	------	------------	--------------	-----------

SIGNATURE OF PERSON PREPARING REPORT Charles A. Gould CHARLES A. GOULD, Adm Asst	SIGNATURE OF GRS OFFICER VERIFYING REPORT H. B. McNEAR H. B. McNEAR, Capt., OMC, Chief Rec Br
--	---

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.

RESTRICTED

	Section 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	HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
LEFT MIDDLE FINGER	LEFT INDEX FINGER	WEAPON AND SERIAL NO.		LAUNDRY MARKS		WHERE BODY WAS BURIED OR FOUND
OTHER IDENTIFICATION CLUES						
LEFT THUMB	RIGHT THUMB	FILLINGS 				
LEFT THUMB	RIGHT THUMB	CAVITIES 				
RIGHT THUMB	RIGHT THUMB	MISSING TEETH 				
RIGHT INDEX FINGER	RIGHT INDEX FINGER	CROWNED TEETH 				
RIGHT MIDDLE FINGER	RIGHT MIDDLE FINGER	BRIDGE WORK 				
RIGHT RING FINGER	RIGHT RING FINGER					
RIGHT LITTLE FINGER	RIGHT LITTLE FINGER	FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY				
						
REMARKS:						
RIGHT LITTLE FINGER	<i>Edward J. ...</i>					

26 Nov 1949

RESTRICTED

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

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

DATE OF REPORT

2 July 48

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)

AEGEN, R. O.

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

Negros, P. I.

CAUSE OF DEATH

Unknown

DATE OF DEATH

Unknown

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)

(See Remarks)

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

None

A TRUE COPY:

H. B. McNEEMAR
H. B. McNEEMAR
Capt., QMC

Section 2.—BURIAL If other than in established cemetery, furnish sketch and map coordinates on reverse.

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
31 Jan 48	1100	Casket	None	802	T	5351

WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE	PLOT No.	ROW No.	GRAVE No.
Yes	USAF Cemetery Leyte #1, P. I.			6237

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)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)
Yes	Yes

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
FROJEN, Kenneth O	Pvt.	37774902		5352

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
DIERL, Albert L.	Sgt.	35099369		5350

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
/s/t/ V. C. AQUINO, T/5, QMC	/s/t/ L. S. PANOPIO, 1st Lt., INF

DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.

RESTRICTED

Section 1. UNIDENTIFIED REMAINS.


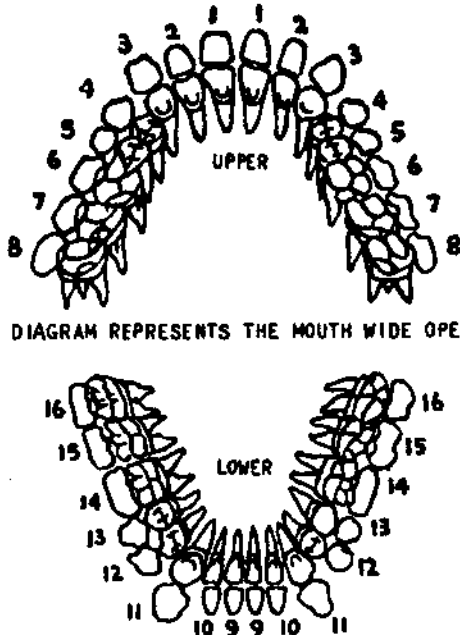




INSTRUCTIONS:

(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>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p> <p>LOWER</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:

In processing remains of Aegen, R. O, presently stored in Hangar 802, Bay 1, Crypt 5351, found with the remains were two (2) maxillae and one (1) mandible, indicating definitely remains of two bodies. They were formed into two cases, wrapped separately, and placed in one casket as one case and carried as known AEGEN, R. O. stored in above-mentioned storage. Comparison of OQMG Form 371 of RAGAN, Robert G with remains of AEGEN, R. O.

RESIDUES: was done but neither remains compared favorably. State- of CIP Laboratory Officer attached.

QMG Form 1044, 1044a and 1044b for the two separately wrapped remains were accomplished.

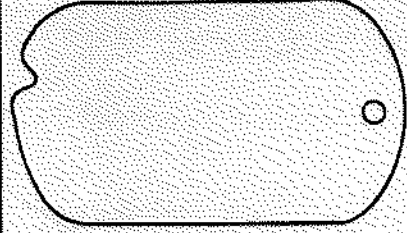
RESTRICTED

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

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

DATE OF REPORT
29 Jan 46

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) <u>BUCHANAN, R. D.</u>		SERIAL No.
GRADE	ORGANIZATION	BRANCH OF SERVICE <u>Navy AC</u>
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH <u>Negros, P. I.</u>	CAUSE OF DEATH <u>Plane-crash</u>	DATE OF DEATH <u>Early part of Feb.</u>
--	--------------------------------------	--

EMERGENCY ADDRESSEE (Name, relationship, and address)

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) <u>None</u>	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) <u>Identified by Filipino Burial Party. Disint. from USAF Cem. Bacolod #1, Negros, P.I.</u>
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) <u>Yes</u>	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME <u>None</u>	DISPOSITION OF SAME <u>Don't know</u>
--	--

Handwritten notes: A TRUE COPY: DON L. MADISON, 2nd Lt., IAF. /s/t/ H. W. Zimmerman, Captain, U. S. C.

Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY
USAF Cemetery Leyte #1, P.I.

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
<u>12 Jan 46</u>	<u>1400</u>	<u>Shelter Half</u>	<u>Reg Cross</u>			<u>6237</u>

WAS THIS A REBURIAL? (Yes or no) <u>Yes</u>	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE
	<u>USAF Cemetery Bacolod #1, Occidental Negros 1 3 56</u>

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) <u>Yes</u>	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) <u>Yes</u>
---	---

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) <u>BUCHANAN, Herman D.</u>	RANK	SERIAL No. <u>3 4983553</u>	ORGANIZATION <u>Hq 503 Para Inf</u>	GRAVE No. <u>6236</u>
--	------	--------------------------------	--	--------------------------


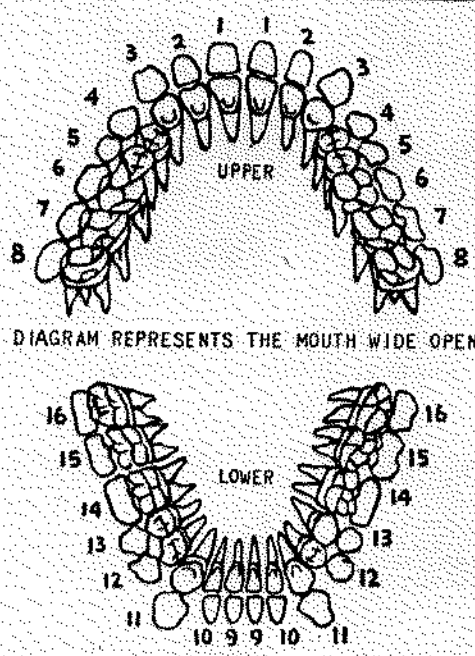




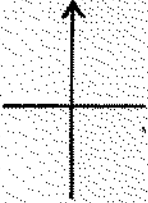
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) <u>JIMENEZ, Rupert</u>	RANK <u>T/Sgt</u>	SERIAL No. <u>20 911 120</u>	ORGANIZATION <u>Co F, 1st</u>	GRAVE No. <u>6238</u>
---	----------------------	---------------------------------	----------------------------------	--------------------------

SIGNATURE OF PERSON PREPARING REPORT <u>/s/t/ Sgt. Charles W. Hallock, GRS</u>	SIGNATURE OF GRS OFFICER VERIFYING REPORT <u>/s/t/ WILLIAM D. ROGERS, 1st Lt., IAF</u>
---	---

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.

RESTRICTED

Handwritten: Incl # 7

LEFT LITTLE FINGER	<p>Section 3. UNIDENTIFIED REMAINS.</p> <p>INSTRUCTIONS:</p> <p>(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks.</p> <p>(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.</p>				
LEFT RING FINGER	HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
LEFT MIDDLE FINGER	WEAPON AND SERIAL NO.		LAUNDRY MARKS		WHERE BODY WAS BURIED OR FOUND
LEFT INDEX FINGER	OTHER IDENTIFICATION CLUES				
LEFT THUMB	<p>FILLINGS</p>  <p>SILVER FILLING GOLD FILLING</p>		 <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>		
RIGHT THUMB	<p>CAVITIES</p>  <p>CAVITY DECAYED</p>				
RIGHT INDEX FINGER	<p>MISSING TEETH</p>  <p>TOOTH MISSING</p>				
RIGHT MIDDLE FINGER	<p>CROWNED TEETH</p>  <p>PORCELAIN CROWN GOLD CROWN</p>				
RIGHT RING FINGER	<p>BRIDGE WORK</p>  <p>GOLD BRIDGE</p>				
RIGHT LITTLE FINGER	<p>FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY</p> <div style="text-align:center; margin-top: 20px;">  </div>				
<p>REMARKS:</p> <p>CONDITION OF BODY PRECLUDED A TOOTH CHART. MAXILLA AND MANDIBLE MISSING.</p>					

Wak- X-728

Front

~~FORMERLY~~ AEGAN, R. O.
 Name Last First Middle ASN Rank

Probably U.S. Navy Air Corps
 Organization Religion

Negros, P. I. Early part of Feb.
 Place of Death Estimated Date of Death

USAF Cem. Bacolod #1, Occ. Negros 12 Apr. 45
 Place of Burial Date of Burial

56-3 USAF Cemetery Leyte No 1, P. I.
 Grave No., etc. Reburial

No EMT found
 Probable cause of death-plane crash-skeleton
 Next of kin Address

Name Base Section File No.

Case No. _____
 AEGAN, R. O. P. I. N-1846

Back

USAF Cem Leyte No 1, P. I. 12 Jan 46
 Place of Reburial Date of Reburial

6237
 Grave No., etc.

Place of Reburial Date of Reburial

Grave No., etc.

Remarks:
 CIP: Yes NO
 Area Sub Area

COPY

Incl # 4

RESTRICTED

REPORT OF INTERMENT

(TM 10-636 AND AR 30-1815)

"AMERICAN SECTION"

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

UNKNOWN A-728

Probably U. S. Navy Air Corps

(FORMERLY) AEGAN

R.

O.)

(Last name)

(First)

Estimated date of death:

Possible Cause of Death:

Negros, P.I.

Early part of February 1945

Plane crash-Skeleton -

(Place of death)

(Date of death)

No EMT found (of death)

1800 - 12 April 1945

USAF Cem. Bacolod No. 1, Occidental, Negros, P.I.

(Time and date of burial)

(Name of cemetery)

(Name or co-ordinates of location)

56

3

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

Religion

No identification tags found. Duplicate of this Report of Interment enclosed in identification bottle buried with body. Zinc strip, with pertinent information thereon, attached to deceased was positively identified by Philippines who had made original isolated burial. No additional information disclosed by exhaustive investigation. Body disinterred by this GRS unit and reinterred in present USAF cemetery.

Body buried on RIGHT

Laner

(Name)

(Serial number)

(Rank)

(U.S. Navy Air Corps)

57

(Organization) (Grave number)

Body buried on LEFT

Helwig

(Name)

(Serial number)

(Rank)

(U.S. Navy Air Corps)

55

(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) COPY Incl 5

RESTRICTED

COPY

IF DECEASED UNIDENTIFIED

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

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

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

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

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

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

/s/ Arthur B. Dodd

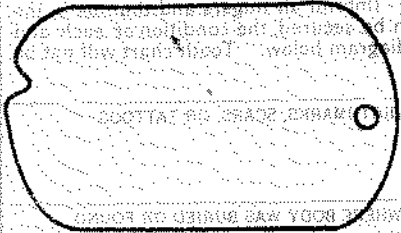
/t/ S/Sgt Arthur B. Dodd, 101st ^(Signature of officer or other person reporting burial) W Gr Reg Plat

/s/ William W. Beardsley

/t/ WILLIAM W. BEARDSLEY, 2nd ^(Verified by Army GNS Officer) Lt CMC

LEFT HAND	4
	3
	2
	1
THUMB	

RIGHT HAND	4
	3
	2
	1
THUMB	

WVD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)			DATE OF REPORT 29 Jan 46	
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION. NAME (Last, first, middle initial) (FORMERLY) ABGAN, R. O. <i>Likawan X 728</i>			SERIAL NO.	
GRADE		ORGANIZATION		BRANCH OF SERVICE Navy AC		
RACE		RELIGION		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY		
PLACE OF DEATH Negros, P.I.		CAUSE OF DEATH Plane-crash		DATE OF DEATH Early part of Feb.		
EMERGENCY ADDRESSEE (Name, relationship, and address)						
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none)		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 2 on reverse)				
None		Identified by Filipino Burial Party. Disint. from USAF Cem., Bacolod #1, Negros, P.I.				
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)						
Yes						
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 USAF Cemetery Leyte #1, P.I.						
DATE OF BURIAL 12 Jan 46		HOUR 1400		BURIED IN (Shroud, blanket, or name of other) Shelter Half		
		TYPE OF GRAVE MARKER Reg Cross		PLOT NO. ROW NO. GRAVE NO. 6237		
WAS THIS A REBURIAL? (Yes or no)		IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE			PLOT NO. ROW NO. GRAVE NO.	
Yes		USAF Cemetery Bacolod #1, Occidental Negros			1 3 56	
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)		IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)				
Yes		Yes				
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)		RANK		SERIAL NO. ORGANIZATION GRAVE NO.		
BUCHANAN, Herman D.				34983553 Hq 503 Para Inf, 6236		
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)		RANK		SERIAL NO. ORGANIZATION GRAVE NO.		
JIMENEZ, Rupert		T/Sgt		20 911 180 Co F, 185 Inf. 6238		
SIGNATURE OF PERSON PREPARING REPORT s/t/ Sgt. Charles W. Hatlock, GRS			SIGNATURE OF GRS OFFICER VERIFYING REPORT s/t/ WILLIAM D. ROGERS, 1st Lt., Inf.			
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.						

Incl # 6

Section 3. IDENTIFIED 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.

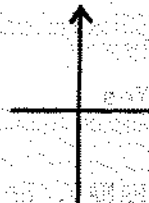
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
--------	--------	---------------	---------------	-------------------------------

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

OTHER IDENTIFICATION CLUES

FILLINGS		<p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
CAVITIES		
MISSING TEETH		
CROWNED TEETH		
BRIDGE WORK		

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



REMARKS:

CONDITION OF BODY PRECLUDED A TOOTH CHART.
MAXILLA AND MANDIBLE MISSING.

RESTRICTED

REPORT OF INTERMENT

(TM 10-630 AND AR 20-1815)

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

Probably U.S. Navy-Air Corps

ALLEN, R. O. (Last name) (First) (Initial) February-1945 (Probable Cause) of Death Negroes, P.I. Estimated Date of Death: Early part of Plane Crash-skeleton-No 1800. (Place of death) (Date of death) (Name of cemetery) Babeloa-1, Occidental Negroes, P.I. (Time and date of burial) (Name or co-ordinates of location)

56

3

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]

Religion: No identification tags found. Duplicate of this report deceased was positively identified by Filipinos who had made original isolated burial. No additional information disclosed by exhaustive investigation. Body disinterred by this unit and reinterred in present USAR Cemetery. (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 LANER (Name) (Serial number) (Rank) U.S. NAVY Air Corps 57 (Grave number) Body buried on LEFT HELWIG (Name) (Serial number) (Rank) U.S. NAVY Air Corps 55 (Grave number)

(Name and address of EMERGENCY ADDRESSEE) None (Name and address of LEGAL NEXT OF KIN)

List only personal effects FOUND ON BODY and disposition of same

(21) Certified True Copy: STEVE W. MASON, Capt., GMC.

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

Probably U. S.
Navy Air Corps

EAGAN

R.

O.

(Last name)

(First)

(Initial)

(Serial number)

(Rank)

(Organization)

Negros, P.I.

(Place of death)

Estimated Date of Death:

Early part of February 1945

(Date of death)

Probable cause of Death:

Plane Crash - Skeleton

(Cause of death)

1800 - 12 April 1945

(Time and date of burial)

USAF Cem. Bacolod No. 1, Occidental,

(Name of cemetery)

Negros, P.I.

(Name or co-ordinates of location)

56

(Grave number)

3

(Row number)

(Plot number)

Reg. Cross

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

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

Religion

No identification tags found. Duplicate of this report of Interment enclosed in identification bottle buried with body. Zine strip, with pertinent information thereon, attached to

Deceased was positively identified by Filipinos who had made original isolated burial. No additional information disclosed by exhaustive investigation. Body disinterred by this GRS unit and reinterred in present USAF Cemetery. cross.

Body buried on RIGHT

Laner

(Name)

(Serial number)

(Rank)

U.S. Navy

Air Corps

57

(Organization) (Grave number)

Body buried on LEFT

Helwig

(Name)

(Serial number)

(Rank)

U.S. Navy

Air Corps

55

(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

R E S T R I C T E D

LEFT HAND

4

3

2

1

THUMB

IF DECEASED UNIDENTIFIED

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

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

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

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

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

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

/s/t/ Arthur B. Dodd, S/Sgt, 101st Q M Gr Reg Plat
(Signature of officer or other person reporting burial)

/s/t/ WILLIAM W. BEARDSLEY, 2nd Lt QMC
(Verified by Army GRS Officer)

A TRUE COPY:

H. B. McENEMAR

H. B. McENEMAR
Capt., QMC

4

3

1

THUMB

RIGHT HAND