

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 rank Keyte #1 X-277

SUBJECT

Formerly maus manila X-3395 1/2

and formerly Keyte #1 X-299

DDMG FORM 1947
16 JUN 50

ADJUSTMENT OF RECORDS
ON X-NUMBER CASES

X-NUMBER OR NAME AND SERIAL NUMBER

X-774

CEMETERY

Leyte Cem. #1, P.I.

PLOT

ROW

GRAVE

5772

- | | | | |
|-------------------------------------|-------------------------|--------------------------|---------------|
| <input type="checkbox"/> | APPROVED IDENTIFICATION | <input type="checkbox"/> | REDESIGNATION |
| <input checked="" type="checkbox"/> | CANCELLATION | <input type="checkbox"/> | NEW X-NUMBER |
| <input type="checkbox"/> | CONSOLIDATION | <input type="checkbox"/> | |

REMARKS

Cancelled. Remains consol.
with other Puerto Princesa
remains, per Philcom ltr,
dtg 30 June 50

Sink

RECLASSIFICATION SHEET

PAPERS ORIGINALLY FILED 293 Wak. Leyte #1 (misc)
X-742 X-751 X-752 X-761 X-767 X-770
X-773 X-774 SYNOPSIS AND DATES X-777 X-778

NEW CLASSIFICATION misc filed
293 Wak. Leyte #1 X-742
11/17/50
2nd

RECLASSIFICATION SHEET

/bpm 1	Interred 23 Feb 1950 C 8 73 Ft. Kinley <i>burial mark</i>		PREPARED BY PHILCOM			
	Cemetary Superintendent SECTION A - NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER 7740 81070		DATE 17 02 50 DAY MONTH YEAR	
NAME UNKNOWN X - 774		SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
CEMETERY USAF CEMETERY LEYTE NO. 1, P. I.		PLOT	ROW	GRAVE 5772	DISPOSITION OF REMAINS 7701 80 CODE DIST. CTR.	
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-774		SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISINTERRED 22 Dec '49	
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER		ORGANIZATION		RELIGION	IDENTIFICATION VERIFIED BY GERARD A BRICK Embalmer NAME AND TITLE	
SECTION D - PREPARATION OF REMAINS FOR SHIPMENT						
NATURE OF BURIAL Shelter Half			CONDITION OF REMAINS Skeletal			
OTHER MEANS OF IDENTIFICATION X-3395 Maus.						
MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)						
REMAINS PREPARED AND PLACED IN CASKET						
DATE 22 Dec '49		BY GERARD A BRICK		<i>Tuscher</i>		
CASKET SEALED BY GERARD A BRICK		EMBALMER (Signature) <i>6 Sept 50</i> s/ Gerard A Brick				
CASKET BOXED AND MARKED DATE 22 Dec '49		BY RAYMOND H TANGUAY Sgt 1c, RA		SHIPPING ADDRESS VERIFIED BY L. W. RICHARDSON, M/Sgt, RA		
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.						
s/ L. W. Richardson, M/Sgt, RA SIGNATURE OF AGRS INSPECTOR						
REMARKS AND SPECIAL INSTRUCTIONS <i>W. J. Capri 50</i> <i>1482</i>						

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM AGRS MAUSOLEUM		TO US MILITARY CEMETERY	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Barrett Mark</i>	DATE FEB 28 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

DISINTERMENT DIRECTIVE

PREPARED BY PHILIP...

3

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

7740 81070

DATE

17 02 50

DAY MONTH YEAR

NAME

UNKNOWN X - 774

SERIAL NUMBER

GRADE

ARM

RACE

RELIGION

CEMETERY

USA F CEMETERY LEYTE NO. 1, P. I.

PLOT

ROW

GRAVE

5772

DISPOSITION OF REMAINS

7701

80

CODE

DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

UNITED STATES MILITARY CEMETERY
FT. S.M. MCKINLAY, P. I.

NAME AND ADDRESS OF NEXT OF KIN

(BY ADMINISTRATIVE DECISION)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

GRADE

DATE OF DEATH

DATE DISTINTERRED

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

REMAINS

MARKER

NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

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

REMAINS PREPARED AND PLACED IN CASKET

DATE

BY

EMBALMER (Signature)

CASKET SEALED BY

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY

DATE

BY

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

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

File
10 May 50
Mitchell

SECOND DISINTERMENT INQUIRY

FORM 298
15 Feb 1950

15 February 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 now stored in the AGRS Macaboon, Manila, P.I.:

Unknown X-742,	SSMC	Loyds	1
" X-751,	"	"	"
" X-752,	"	"	"
" X-761,	"	"	"
" X-767,	"	"	"
" X-770,	"	"	"
" X-773,	"	"	"
" X-774,	"	"	"
" X-777,	"	"	"
" X-778,	"	"	"
" X-781,	"	"	"
" X-782,	"	"	"
" X-783,	"	"	"

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

FOR INFO: [unclear] [unclear]

K.A. Kazup:lr c
Salzer
JW
cc--Administrative Section
cc--CinCef

T. H. WATK
Lt. Colonel, GPO
Memorial Division

JAW
TEC

666-1-1-1-779

REF: 293
(Puerto Princessa)

APG 900
17 January 1960

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 #0000 293, 000 (Far East), dated 17 September 1948, subject: Resolution of Cases of Unidentified Decedent, the following Unknown remains, presently stored at ANAS Museum, Manila, P.I., have been processed by the Central Identification Laboratory and considered "Unidentifiable" by reason of lack of sufficient identifying data:

0000 000	X-738	Leyte #1	0000 000	X-761	Leyte #1
	X-739			X-762	
	X-740			X-764	
	X-741			X-765	
	X-742			X-766	
	X-743			X-767	
	X-744			X-768	
	X-745			X-769	
	X-746			X-770	
	X-747			X-771	
	X-748			X-772	
	X-749			X-773	
	X-750			<u>X-774</u>	
	X-751			X-775	
	X-752			X-776	
	X-753			X-777	
	X-754			X-778	
	X-755			X-779	
	X-756			X-780	
	X-757			X-781	
	X-758			X-782	
	X-759			X-783	
	X-760				

2. Forwarded herewith, for your consideration, are new Q20 Forms 1044 for the above-mentioned Unknowns.

ORFE 228

(Fourth Princess POW)

SUBJECT: Unidentifiable remains (Cont'd)

17 January 1980

3. The above listed Layte # 1 Unknowns were previously designated X-Numbers with letter suffixes (XXXX XXXXX) but the dropping of the letter suffix "A" of their former complimentary Unknowns necessitates the reassignment of new Layte #1 X-Numbers.

4. Corrected Reports of Storage have been prepared indicating the new Layte #1 X-Numbers which will be forwarded to your office through normal channels.

FOR THE COMMANDER:

48 Incls

303 Forms 104 w/ certificates
of unidentifiability

JASE ROYALA

1st Lt., Infantry
Adjutant

HEADQUARTERS
FILICON ZONE
AMERICAN GRAVES REGISTRATION SERVICE

5 Jan 1950

Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 774, Plot _____,
Row _____, Grave 5772, USMC _____ Leyte #1, have
been reviewed and it is the opinion of this office that insuf-
ficient evidence is available to establish the identity of this
deceased, and that these remains should be classified as un-
identifiable.

FOR THE COMMANDING OFFICER:



B. MCNEELAR
Captain, QMG
Chief, Records Branch

Atch: Form 1044

Received 31 Jan 1950 OQMG
Not identifiable from
information presently 10 Feb. 1950
available

Ea Kayup

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-774 Leyte #1				2. DATE OF REPORT 5 Jan 50	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.	4. PLOT 813	5. ROW J	6. GRAVE 3312	7. DATE OF	
			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? YES NO TO WHAT EXTENT?

15. WAS BODY MANGLED? YES 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"

1044

T8.

TOOTH CHART

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

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

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

REMARKS: No loose teeth found with remains.

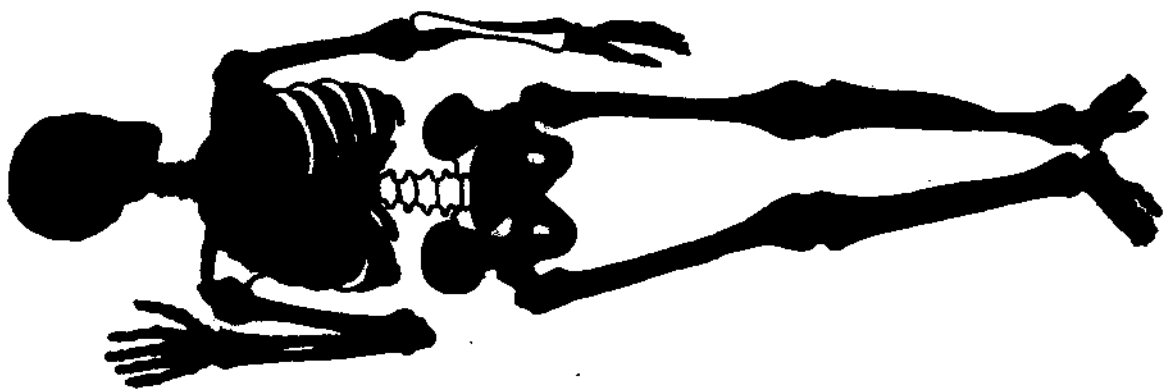
"UNIDENTIFIABLE"

Paul R. Nichols

PAUL R. NICHOLS
Chief, Identification Sec

"BY REASON OF LACK OF SUFFICIENT 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 - 1 lb.

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

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

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION
PAUL R. NICHOLS
Chief, Identification Section

SIGNATURE
Paul R. Nichols

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-3395-B (Formerly UNK X-299, USAF Cemetery Leyte #1, P.I.)				2. DATE OF REPORT 12 Jan 48		
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.		4. PLOT 813	5. ROW DANGER BAY J	6. GRAVE CRYPT 3312	7. DATE OF DISINTERMENT 25 Nov 47	REINTERMENT STORAGE 14 Jan 48

PHYSICAL DESCRIPTION

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

None

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

UTD

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

None

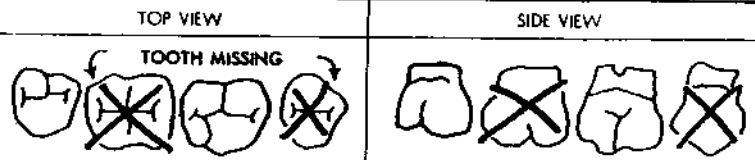
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

No clothing nor personal effects found with remains.

18.

TOOTH CHART

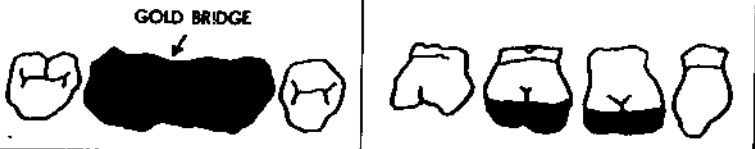
MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" 'D OUT AND LABELED THUS:



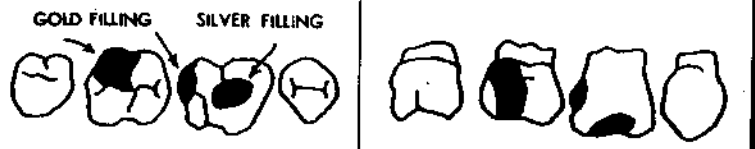
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD PORCELAIN SILVER OR GOLD AND PORCELAIN), THUS:



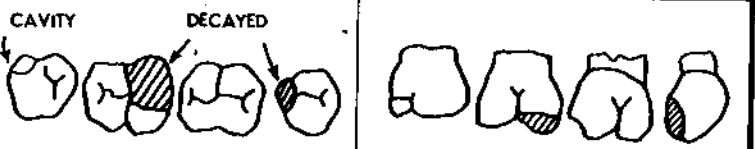
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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



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



RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
M a x i l l a r y								M i s s i n g							
Side Views (Upper)															
Top Views (Upper)															
Side Views (Lower)															
M a n d i b l e								M i s s i n g							
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

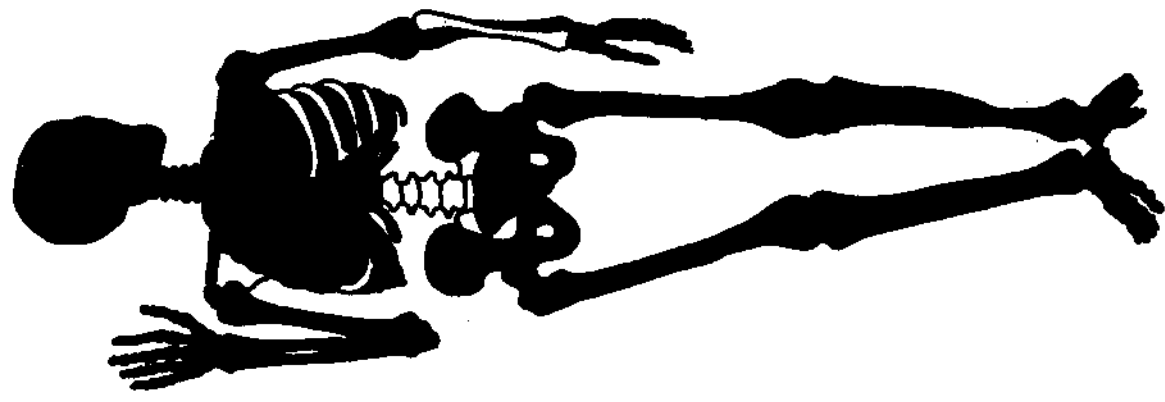
DENTURES (Plates): DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAINING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

No loose teeth found with remains.

CERTIFIED TRUE-COPY
G. T. Gamboa
 G. T. GAMBOA
 2d Lt., MSC

/s/ John J. Connors

19. BLACK OUT PARTS OF BODY NOT RECOVERED



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

I Certify that the Group Remains Consist of Parts of _____ Decedents Based on the Presence of One or More of the Following Anatomical Parts: _____ NUMBER

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

- 5 - Ribs
- 5 - Lumbar vertebrae
- Right scapula.
- Left radius - 22.8 centimeters.

In processing this case (Formerly UNK X-299 USAF Cem Leyte #1) two remains were found because of bone structure. Segregation was made and the two remains were assigned UNK X-3395-A and X-3395-B. (Refer to UNK X-3395-A).
The deceased was one of those massacred by the Japs in Puerto Princesa, Palawan, P.I.

CERTIFIED TRUE COPY

G. T. Gamboa
G. T. GAMBOA
2d Lt., MSC

I Certify that I Have Personally Viewed the Remains of Deceased and that All Resulting Information Has Been Recorded to the Best of My Knowledge

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION
/p/ FORREST G. BRADEN
Sr Emb.
CIP Laboratory, Manila, P.I.

SIGNATURE

/s/ Forrest G. Braden

hce/

CORRECTED

RESTRICTED

STORAGE

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

5 Jan 50

Imprint Identification Tag If Possible.
DO NOT TYPE

*Plotted
MANGO, C.I.
0357452*

Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN I-774 Leyte #1 (Formerly UNK I-3395 B AGRS Mausoleum, Manila, P.I.)		SERIAL No. Unknown
GRADE Unknown	ORGANIZATION Unknown	BRANCH OF SERVICE Unknown
RACE Unknown	RELIGION Unknown	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH Puerto Princesa, Palawan, P.I.	CAUSE OF DEATH Massacred by Japanese	DATE OF DEATH 14 Dec '44
---	--	------------------------------------

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) See Remarks
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 STORAGE 14 Jan 48	HOUR 1300	BURIED IN (Shroud, blanket, or name of other) None Casket	TYPE OF GRAVE MARKER None	PLOT No. 800	ROW No. 10C	GRAVE No.
--	---------------------	---	-------------------------------------	------------------------	-----------------------	-----------

WAS THIS A REBURIAL? (Yes or no) Yes REBURIED	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. 5772
--	--	----------	---------	--------------------------

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) None	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 <i>Paul R. Nichols</i> PAUL R. NICHOLS, Chief, Ident Sec	SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>A. B. McEwan</i> A. B. McEWAN, Captain, QMC
--	---

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 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.

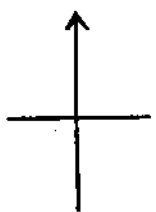
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
WEAPON AND SERIAL No.		LAUNDRY MARKS		WHERE BODY WAS BURIED OR FOUND

OTHER IDENTIFICATION CLUES

FILLINGS		
CAVITIES		
MISSING TEETH		
CROWNED TEETH		
BRIDGE WORK		

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

8 FEB 1950


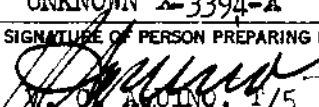



REMARKS:

Identification Section

Remains Manila Mausoleum Unknown 3395-B (Formerly Unk X-299 Leyte #1) was redesignated Unknown X-774 Leyte #1 to correspond to cemetery where remains was disinterred.
 QMC Forms 1044, 1044a & 1044b accomplished.

05/11

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 19 Jan 48	
Imprint Identification Tag, If Possible DO NOT TYPE 		Section 1.—IDENTIFICATION.					
NAME (Last, first, middle initial) UNKNOWN X-3395-B (Formerly UNK X-299 USAF Gen Leyte #1, P.I.)		SERIAL No. Unknown		GRADE Unknown		ORGANIZATION Unknown	
BRANCH OF SERVICE Unknown		RACE Unknown		RELIGION Unknown		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	
PLACE OF DEATH Puerto Princesa, Palawan, P.I.		CAUSE OF DEATH Massacred by Japanese				DATE OF DEATH 14 Dec 44	
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) See Remarks					
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 MUSCOLEUM, MANILA, P. I.							
DATE OF BURIAL 14 Jan 48	HOUR 1300	BURIED IN (Shroud, blanket, or name of other) Casket	TYPE OF GRAVE MARKER None	PLOT No. 813	ROW No. J	GRAVE No. 3312	
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.						
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) UNKNOWN X-3396-B			RANK	SERIAL No.	ORGANIZATION	GRAVE No. 3314	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-3394-A			RANK	SERIAL No.	ORGANIZATION	GRAVE No. 3310	
SIGNATURE OF PERSON PREPARING REPORT  W. S. AQUINO, T/5 QMC				SIGNATURE OF GRS OFFICER VERIFYING REPORT  L. S. PANOPIO 2d Lt., INF			
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.							

Jan 15 49

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

LEFT LITTLE FINGER		<p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
LEFT RING FINGER		
LEFT MIDDLE FINGER		
LEFT INDEX FINGER		
LEFT THUMB		
RIGHT THUMB		
RIGHT INDEX FINGER	<p>TOOTH MISSING</p>	
RIGHT MIDDLE FINGER	<p>PORCELAIN CROWN GOLD CROWN</p>	
RIGHT RING FINGER	<p>GOLD BRIDGE</p>	
RIGHT LITTLE FINGER		

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

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REMARKS: In processing former UNKNOWN X-299, USAF Cemetery Leyte #1, at CIP, AGRS Mausoleum, Manila, P.I., parts of two remains were found, segregated according to bone structures and assigned as UNKNOWN X-3395-A and X-3395-B. Refer to UNK X-3395-A for original report.

MC Form 1044, 1044-A and 1044-B accomplished.

9 MAR 1948