

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 uncl. Lett # 1 X-126

SUBJECT

Also 293 manus manila X-3409

OMC FORM 1121  
1 Aug 45

OMONT 293  
OPS Far East

13 June 1949

SUBJECT: Identification of World War II Deceased

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

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

Unknown X-224  
X-226  
X-399  
X-401  
X-404  
X-1821 (formerly X-37 Finschhafen #1, N.G.)  
X-3409 (formerly X-126, Leyte #1, P.I.)  
X-3671 (formerly X-97, Leyte #1, P.I.)

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

FOR THE QUARTERMASTER GENERAL:

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

R. Little:jdk  
Salsar  
JW

REB

NJS

cc: Administrative Section

COPY

OSCP 293.0

SUBJECT: Unidentifiable Remains

17 May 1949

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

1. In accordance with the provisions of your letter, file QMOMU 293, GIS (Far East), dated 17 September 1948, subject: Resolution of Cases of Unidentified Deceased, the following unknown remains, presently stored at AGHS Mausoleum, Manila, P.I., have been processed by the Central Identification Laboratory and considered "Unidentifiable" by reason of lack of sufficient identifying data:

UNKNOWN X-171	UNKNOWN X-2191
" X-224	" X-1326
" X-226	" X-1344
" X-399	" X-1621
" X-401	" X-1821
" X-404	" X-3409
" X-1213	" <del>X-3871</del>
	" X-4633

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

FOR THE COMMANDING GENERAL:

15 Incls:  
QMC Forms 1044 w/certificates  
of Unidentifiability

JOHN A. MARSHAL  
1st Lt., AGD  
Asst Adj Gen

Interred 26 Oct 49  
 L 17 34 P. McKinley  
*Case R. H. Mark*  
**DISINTERMENT DIRECTIVE**

NAME		SERIAL NUMBER		RANK	ARM	DATE	
		UNKNOWNX-000126			0	15	05 48
CEMETERY		DISPOSITION OF REMAINS		DATE OF DEATH			
USAF CEMETERY (LEYTE NO 1)		0		7701 80			
PLOT	ROW	GRAVE	COUNTRY		CAUSE OF DEATH		
		3205	PHILIPPINE ISLANDS		6		

**SECTION B - CONSIGNEE AND NEXT OF KIN**

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
FORT MC KINLEY CEMETERY MANILA, PHILIPPINE ISLANDS (BY ADMINISTRATIVE ORDER)	

**SECTION C - DISINTERMENT AND IDENTIFICATION**

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED
UNKNOWN X-126 UNK X-3409 (MAUSOLEUM)				27 Sept '48
IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY	
<input checked="" type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	UNKNOWN		GEORGE SIMONEAU Embalmer	

**SECTION D - PREPARATION OF REMAINS FOR SHIPMENT**

NATURE OF BURIAL	CONDITION OF REMAINS
Shelter Half	Skeletal

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES 1  
 Two (2) Identification tags show UNK X-3409 MAUS No.

REMAINS PREPARED AND PLACED IN CASKET  
 DATE 27 Sept '48 BY GEORGE SIMONEAU

CASKET SEALED BY GEORGE SIMONEAU  
 EMBALMER (Signature) *George Simoneau*  
 GEORGE SIMONEAU

CASKET BOXED AND MARKED  
 DATE 27 Sept 48 BY HORACE L. ALLISON, Sgt., Inf.  
 SHIPPING ADDRESS VERIFIED BY CHARLES R. BATES, 1st Lt., USATR

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.  
*Charles R. Bates*  
 CHARLES R. BATES, 1st Lt., USATR  
 SIGNATURE OF GRS INSPECTOR

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.  
 REMARKS: Unidentifiable - OQMG

# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

FROM AGRS Mausoleum	TO Fort McKinley Military Cemetery
KIND OF CONVEYANCE Truck	NAME OF CONVOYER <i>[Signature]</i>
SIGNATURE OF SHIPPER <i>[Signature]</i>	DATE 26 OCT 1948
SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE 26 OCT 1948

## 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 MILITARY BRIGADE	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

1 11 34 8  
 1948

BASIC: Ltr ASF, OQMG, Wash., dtd 7 Dec 45, file SPOYG 293, Unknown X-126, P.I. (Leyte), subj: Fingerprints of Unknown Deceased.

*Att 2/1/46  
150096*

*253 Unk. P.I. X-126 (Leyte)*

GSOQM 293 9th Ind  
HEADQUARTERS, UNITED STATES ARMY FORCES WESTERN PACIFIC, OFFICE OF THE  
CHIEF QUARTERMASTER, APO 707, 12 Apr 46

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

1. There is no further information available that would aid in identifying Unknown X-126.
2. Any further information received will be forwarded your headquarters.

*Lee M. Hester*  
LEE M. HESTER  
Colonel, QMC  
Chief Quartermaster

*293 Unk X-126 P.I.*

*File  
Sent  
Hester  
18 June 46*

*pm*

BASIC: Ltr ASF, OQMG, Wash., dtd 7 Dec 45, file SPQYG 293, Unknown X-126, P.I. (Leyte), subj: Fingerprints of Unknown Deceased.

GSQMM 293

7th Ind.

S: 3 May 46

HEADQUARTERS, UNITED STATES ARMY FORCES WESTERN PACIFIC, APO 707

5 APR 1946

TO : Commanding General, Pacific Air Command, United States Army,  
APO 925.

1. Attention is invited to basic communication.
2. Report of Interment states that Unknown X-126 is believed to be a P-38 pilot that had crashed landed on the beach at Leyte on 26 Oct 44.
3. Request records your headquarters be reviewed for any further information that would aid in identifying this Unknown.

FOR THE COMMANDING GENERAL:



THOMAS J. BROWN  
CWO USA.  
ASST. ADJ. GEN.

AG 704 GA

8th Ind

9 APR 1946

HEADQUARTERS, PACIFIC AIR COMMAND, U. S. ARMY (ADMIN), APO 925

TO: Commanding General, U. S. Army Forces, Western Pacific, APO 707

Records this headquarters have been reviewed for any information that would aid in identifying Unknown X-126 with negative results.

FOR THE COMMANDING GENERAL:



V. A. MASON  
Major, Air Corps  
Actg Asst Adj Gen

213885

*OSM*

(Basic: Ltr. ASF OGD, Wash. 25, D. C. File: SPCYD 293, dtd 7 Dec. 45  
Subj: Fingerprints of Unknown Deceased.)

5th Ind.  
HEADQUARTERS, QUARTERMASTER TROOPS, OKINAWA BASE COMMAND, APO 331,  
21 March 1946.

TO: Commanding General, Okinawa Base Command, APO 331.

*Jup*

293 (AICID) 6th Ind.  
HEADQUARTERS, OKINAWA BASE COMMAND, APO 331, 22 MAR 1946

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

Attention is invited to 4th Indorsement.

FOR THE COMMANDING GENERAL:

1 Incl.  
Ltr. ASF OGD, Wash. 25 D. C.

*Fred L. Hornung III*  
FRED L. HORNUNG III  
CWO, USA  
ASST ADJUTANT GENERAL

213885




BASIC: Ltr ASF, OCMC, Wash., dtd 7 Dec 45, file SPOYG 293, Unknown X-126,  
subject: Fingerprints of Unknown Deceased.

GSOM 293/1595 3rd Ind  
HEADQUARTERS, UNITED STATES ARMY FORCES WESTERN PACIFIC, APO 707 18 FEB 1946

TO : Commanding General, Okinawa Base Command, APO 531

For compliance with second indorsement and return to  
this headquarters.

BY COMMAND OF LIEUTENANT GENERAL STYER:

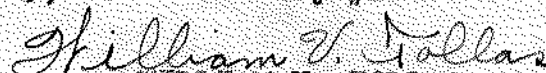
  
FRANK J. KLEAGER  
1st LT. INF  
ACTG ASST ADJ GEN

293 (AICMC) 4th Ind. WVT/ja  
3008 1M GRAVES REGISTRATION CO., APO 331 9 March 1946

THROUGH: Commanding Officer, Hq Quartermaster Troops, APO 331

TO : Commanding General, Army Forces, Western Pacific  
APO 707

The available files of this Headquarters have been searched  
but regret to say that no further information can be offered  
pertaining to Unknown X-126, Grave 3205, USAF Cemetery #1.

  
WILLIAM V. TOLLAS  
1st Lt., OMC  
Commanding

213885

67M

BASIC: Ltr ASF, OQMG, Wash., dtd 7 Dec 45, file SPQYG 293, Unknown X-126,  
subject: Fingerprints of Unknown Deceased.

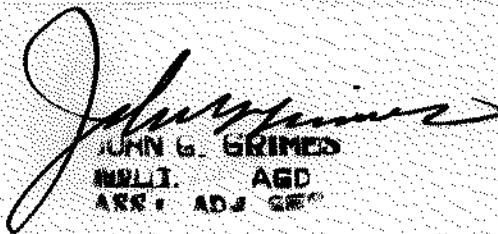
GSQMM 293 1st Ind. S: 23 Feb 46  
HEADQUARTERS, UNITED STATES ARMY FORCES WESTERN PACIFIC, APO 707

TO : Commanding General, XXIV Corps, APO 235

23 JAN 1946

Forwarded for any additional information which may be obtained  
from your files.

FOR THE COMMANDING GENERAL:

  
JOHN G. GRIMES  
MPLI. AGD  
AKK: ADJ GEN

AG 293 (TFYQM) 2nd Ind  
HEADQUARTERS XXIV CORPS, APO 235

FEB 5 1946

TO: Commanding General, United States Army Forces Western  
Pacific, APO 707

1. No information on the subject is contained in the files  
of this Headquarters.

2. Recommend that the Commanding Officer of the 3008th  
Quartermaster Graves Registration Company be contacted in order  
to furnish any information available at his headquarters. This  
company was last known to be under Okinawa Base Command. It  
was formerly the Provisional Graves Registration Company which  
administered Dulag Cemetery #1 at the time mentioned in the basic  
communication.

FOR THE COMMANDING GENERAL:

  
M. A. McCULLOCH  
2d Lt, Inf  
Actg Asst Adj Gen

213885

SAVE

ARMY SERVICE FORCES



IN REPLY REFER TO

SPQYG 293

OFFICE OF THE QUARTERMASTER GENERAL

Unknown X-126

WASHINGTON 25, D. C.

P.I. (Leyte)

7 December 1945

293

SUBJECT: Fingerprints of Unknown Deceased

TO : General Headquarters, USAF West Pacific  
APO 707, c/o Postmaster  
San Francisco, California  
FOR: The Chief Quartermaster

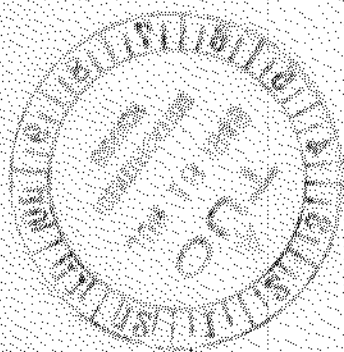
1. The fingerprints submitted for Unknown X-21, USAF Cemetery, Dulag #1, Plot 1, Row 5, Grave 188, covering reinterment in the USAF Cemetery #1, Grave 3205, as Unknown X-126, have been compared, insofar as possible, but have not been identified. They have also been compared with all those known to have been missing in action in Leyte from 20 October 1944 through 26 October 1944 and Air Corps personnel known to have been lost on those dates in the vicinity of the Philippine Islands, without results.

2. It is requested any additional information available in your headquarters, which may be of assistance in the identification of the Unknown Deceased, be forwarded to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

*Arthur S. Rosengard*

ARTHUR S. ROSENGARD  
2nd Lt., QMC  
Assistant



*File  
J. H. [unclear] / [unclear]  
RAN  
Hawkins  
18 Jan 46*

213885

SPQYG 293  
Unknown X-126  
P.I. (Leyte)

7 December 1945

SUBJECT: Fingerprints of Unknown Deceased

TO : General Headquarters, USAF West Pacific  
APO 707, c/o Postmaster  
San Francisco, California  
FOR: The Chief Quartermaster

1. The fingerprints submitted for Unknown X-21, USAF Cemetery, Dulag #1, Plot 1, Row 5, Grave 188, covering reinterment in the USAF Cemetery #1, Grave 3205, as Unknown X-126, have been compared, insofar as possible, but have not been identified. They have also been compared with all those known to have been missing in action in Leyte from 20 October 1944 through 26 October 1944 and Air Corps personnel known to have been lost on those dates in the vicinity of the Philippine Islands, without results.

2. It is requested any additional information available in your headquarters, which may be of assistance in the identification of the Unknown Deceased, be forwarded to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

ARTHUR S. ROSENGARD  
2nd Lt., QMC  
Assistant

REC 7 10 06 AM '45  
MEMORIAL DIVISION

*San Francisco  
4-28-45*

*File  
4-28-45*

JJP

AGPC-S 293 (2 Feb 45) 1st Ind.  
WD, AGO, Washington 25, D. C., 11 May 1945.

TJH/JHA/jfs/4602

TO: The Quartermaster General, Washington 25, D. C., Att: Chief,  
Registration and Planning Branch, Room 1100, Temporary Building C.

1. Fingerprints on the attached Report of Burial No. 8303 have been compared with all those known to have been missing in action in Leyte from 20 October 1944 through 26 October 1944 and Air Corps personnel known to have been lost on those dates in the vicinity of the Philippine Islands, without results.

2. The fingerprints have also been searched in the Federal Bureau of Investigation without result.

FOR THE ADJUTANT GENERAL:

JOHN T. BURNS  
Major, AGO,  
Officer in Charge,  
Status Review and  
Determination Section.

1 Incl. n/c

*Handwritten:*  
2-20-45  
5808 for city 16

R E S T R I C T E D

SPQYG 293  
Unknown 8308, P.I.

2 February 1946

SUBJECT: Fingerprints of Unknown Deceased.

TO : The Adjutant General, ASF, Washington, D. C.

ATTENTION: Capt. Hennessey, Status Review & Determination,  
Casualty Branch, 4602 Munitions Building, Washington, D. C.

1. The inclosed Burial Form is forwarded to your office with a request that comparison be made of the fingerprints thereon with those on file for Air Corps personnel known to have been killed in action 26 October 1944 in the Philippines.

2. If found to be identical, it is requested that the name, rank, serial number, organization, emergency addresses and religious preference of the deceased be forwarded to this office, together with the return of the Form, when report is rendered.

For The Quartermaster General:

MAYO A. DARLING,  
Lt. Colonel, Q.M.C.,  
Assistant.

1 Incl:  
Burial Form.

R E S T R I C T E D

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
PHILCOM ZONE  
APO 900

5 May 1949

Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 126, Plot \_\_\_\_\_,  
Row \_\_\_\_\_, Grave 3205, USMC 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. McNEMAR  
Captain, QMC  
Chief, Records Branch



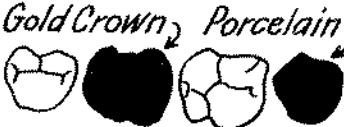





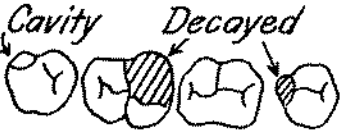

Attach: Form 1044





Received 2/20/49 OQMG  
Information from  
Information presently  
available 1/21/49

## IDENTIFICATION DATA

1. REMAINS OF UNKNOWN Unknown X-3409 ( Formerly Unk X-126 Leyte #1 )				2. DATE OF REPORT 5 May 49	
3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	813	J	3353	DIS INTERMENT	REINTERMENT
PHYSICAL DESCRIPTION					
8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT 6' 2 3/4"	10. COLOR OF HAIR UTD		11. RACE Unknown	
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)  None					



18. TOOTH CHART		TOP VIEW	SIDE VIEW
<b>MISSING TEETH:</b> ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X"ED OUT AND LABELED THUS:			
<b>CROWNED TEETH:</b> BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:			
<b>BRIDGE WORK:</b> BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:			
<b>FILLINGS:</b> DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:			
<b>CARIES (Cavities):</b> OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:			

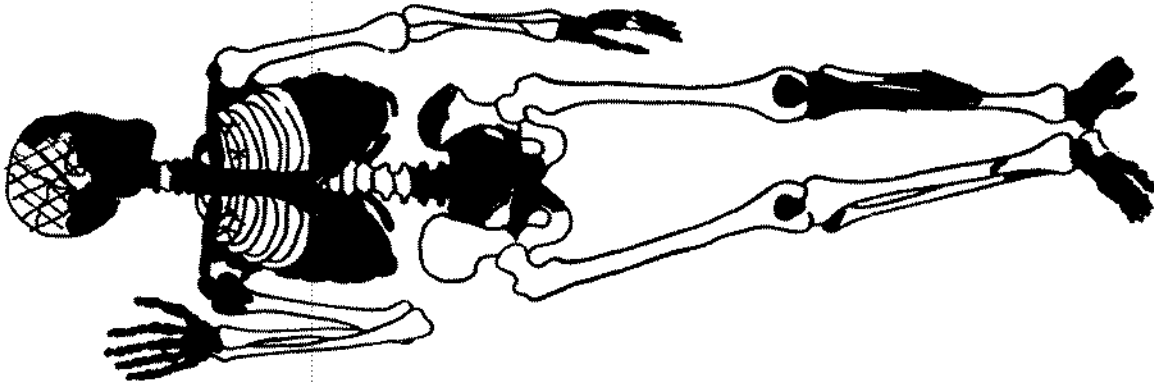
RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
MAXILLA								MISSING							
															
															
															
															
MANDIBLE								MISSING							
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

**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."

One (1) loose tooth with amalgam filling on the biting surface found with remains - R12

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

19. BLACK OUT PARTS OF BODY NOT DISCOVERED



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 - 4 lbs.

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

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

JAMES J. McDERMOTT  
Laboratory Officer, CIP

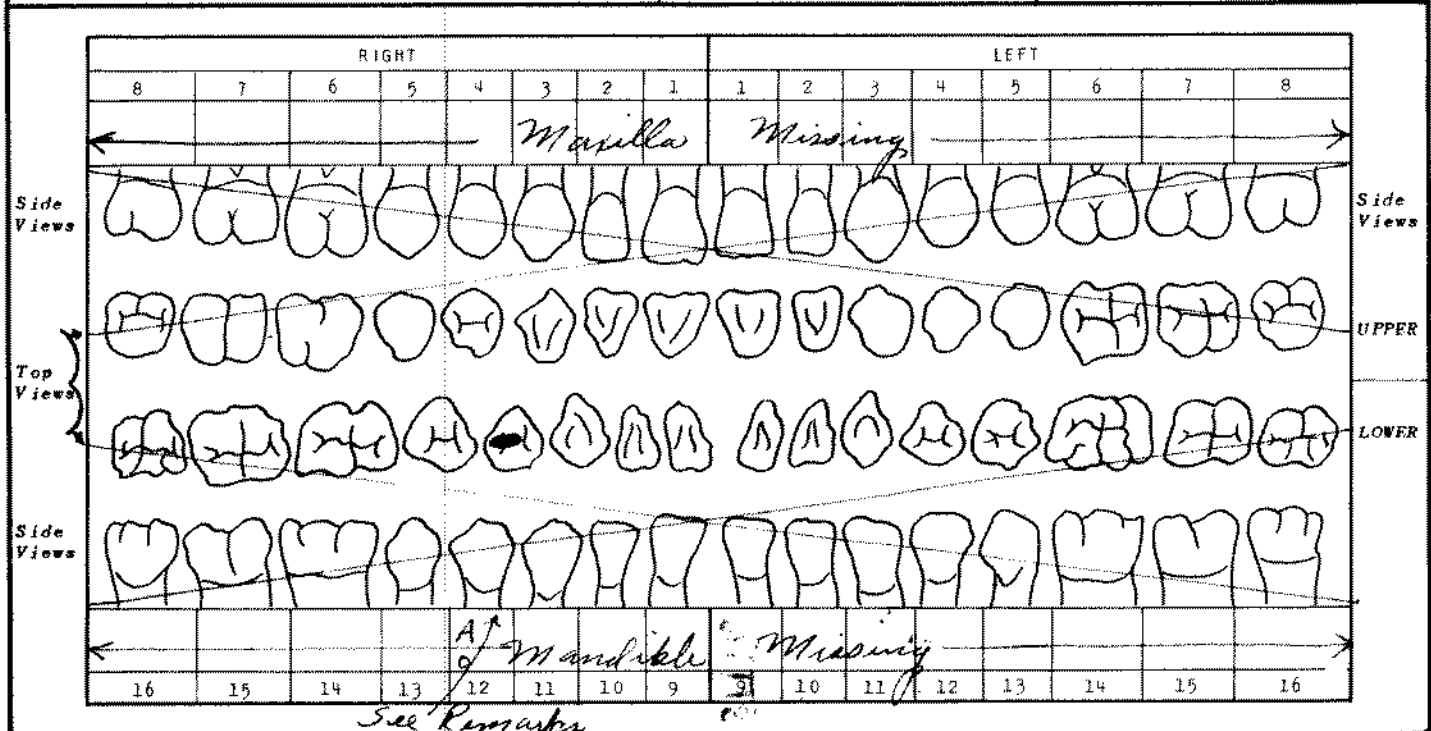
SIGNATURE

## IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-3409 (Formerly UNK X-126 USAF Cem 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 J	6. GRAVE 3353	7. DATE OF	
				DISINTERMENT 10 Dec 47		REINTERMENT 14 Jan 48		
PHYSICAL DESCRIPTION								
8. ESTIMATED WEIGHT UTD		9. ESTIMATED HEIGHT 6'2 3/4"		10. COLOR OF HAIR UTD		11. RACE UTD		
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  UTD due to condition of remains.								
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 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								

TOOTH CHART

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



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

**REMARKS:** Maxilla and mandible missing. One (1) loose tooth with amalgam filling on the biting surface (o) found with remains, and identified as R12.

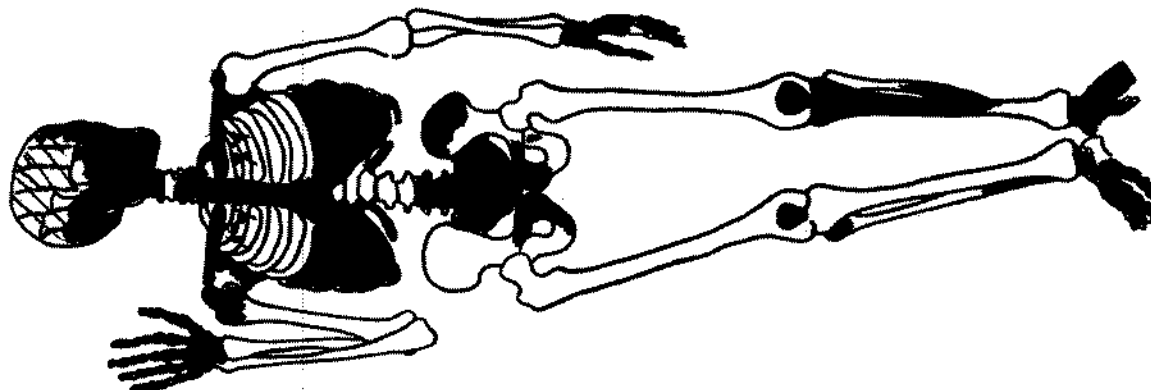
CERTIFIED TRUE COPY:

*G. T. Gamboa*

G T GAMBOA  
2d Lt MSC

/s/ Henry P Smith, SP-6

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 ID tag, ROI bottle, personal effects or other means of identification. Skeletal remains fragmented. Unable to determine circumference of skull due to condition of remains. Estimated weight of remains, 4 lbs.

CERTIFIED TRUE COPY:

*G. T. Gamboa*

G T GAMBOA  
 2d Lt MSC

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

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION  
 /p/ HENRY P SMITH  
 SP-6  
 CIP Laboratory, Manila, P.I.

SIGNATURE  
 /s/ Henry P Smith, SP-6

REPORT OF DISINTERMENT FOR IDENTIFICATION

Place Leyte, P.I.

Date \_\_\_\_\_

1. Remains of UNKNOWN X-126 Grave 3205 Serial Number \_\_\_\_\_  
Rank \_\_\_\_\_ ~~Organization~~ Formerly UNKNOWN X-21, Dulag

2. Disinterred (date): 26 Aug 45 From (give complete location): \_\_\_\_\_  
By: Group Pfc Sege Unit Base K, GRS

3. Reburied (date): 26 Aug 45 In (give complete location): USAF Cemetery Leyte #1, P.I. Grave 3205  
By: Group Pfc Sege Unit Base K, GRS Nature of reburial Blanket

4. Report as to nature of original burial and condition of body upon disinterment:  
Body completely decomposed, impossible to take tooth chart  
crushed skull.

5. (a) Identification tags: Buried with body? No On grave marker? No  
(b) Other means of identification found upon disinterment, and general remarks: Metal tag made by GRS buried with remains and attached to marker.

6. What does examination of body show as regards the following identifying items?  
(a) Height (actual measurement) \_\_\_\_\_  
(b) Weight (estimated) \_\_\_\_\_  
(c) Hair-Color \_\_\_\_\_  
Quantity \_\_\_\_\_  
Characteristics \_\_\_\_\_  
(d) Hair on face-Color \_\_\_\_\_  
Location \_\_\_\_\_  
Quantity \_\_\_\_\_  
(e) Permanent marks on body (old scars, peculiarities, or missing parts) \_\_\_\_\_  
(f) Wounds or missing parts (received at time of casualty) \_\_\_\_\_

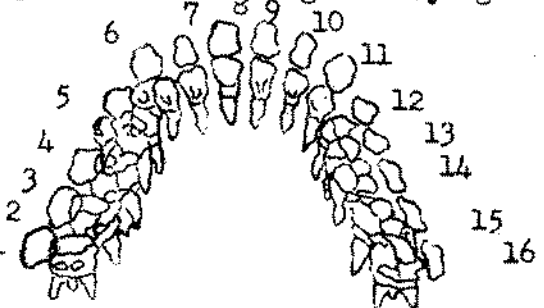
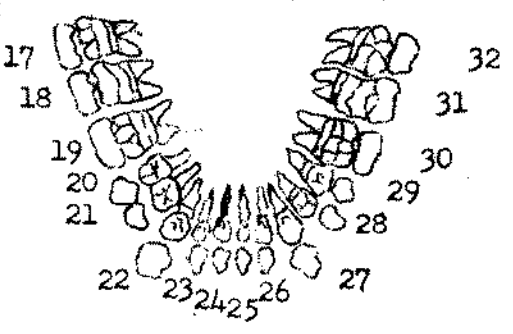


Diagram represents mouth wide open



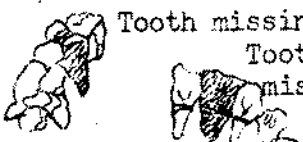


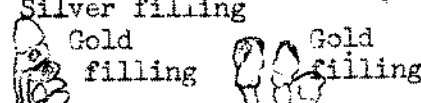

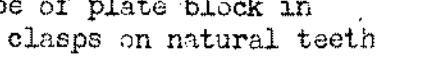
7. Disinterment supervised by Pfc Sege Approved: Francis M. Simon, 1st Lt., QMC  
(Title) GRO

8. Reburial supervised by Pfc Sege Approved: Francis M. Simon, 1st Lt., QMC  
(Title) GRO

INSTRUCTIONS FOR THE PROPER COMPLETION OF G. R. S. FORM NO. 4

Enter information, as noted below, on reverse side of sheet in the corresponding numbered space.

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.
2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.
3. Give date and accurate information, as to location of reburial and the group and unit which made reburial, and how reburial was made--in casket, wooden box, ect.
4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried--in a casket, box, burlap, ect. This statement should be as complete as possible.
5. (a) State whether identification tags were found buried with body and on grave marker by reporting "Yes" or "No".  
(b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying the body, other than that tabulated under Item No. 6. If additional remarks are necessary use additional sheet of paper and attach hereto.
6. Give all information as to body description and dental chart as nearly correct as the condition of the body will allow. Items (e) and (f) under the body description are very important and should be very complete. The dental chart is also very important and should be filled with great care. 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, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

<b>MISSING TEETH</b>	All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus:		Tooth missing Tooth missing
<b>CROWNED TEETH</b>	Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain) thus:		Gold crown Porcelain crown
<b>BRIDGE WORK</b>	Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:		Gold & porcelain bridge Gold bridge
<b>FILLINGS</b>	Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus:		Silver filling Gold filling
<b>CARIES (CAVITIES)</b>	Outline location and size of cavities, shade in thus:		Cavity Decayed
<b>DENTURES (PLATES)</b>	Draw diagram of relative size and shape of plate block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp".		Decayed Decayed

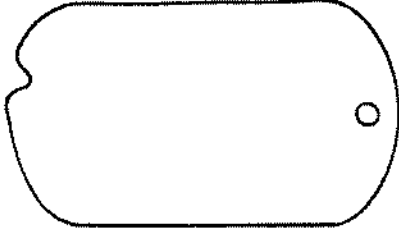
7. Show name of person supervising the disinterment and the name and title of the person approving same.

8. Show name of person supervising the reburial and the name and title of the person approving same.

/chf

RESTRICTED


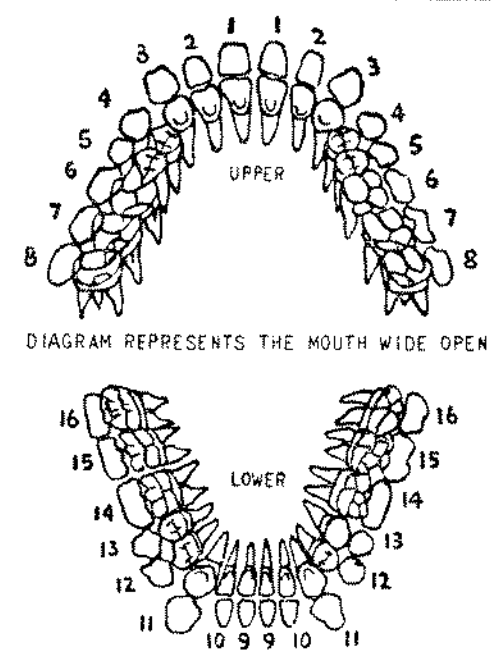





U 1428

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815) <b>STORAGE</b>			DATE OF REPORT 20 Jan 48		
Imprint Identification Tag If Possible. DO NOT TYPE  		Section 1.—IDENTIFICATION.			SERIAL NO.		
		NAME (Last, first, middle initial) UNKNOWN X-3409 (Formerly UNK X-126 USAF Cem Leyte #1, P.I.)			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 Dulag, Leyte, P.I.		CAUSE OF DEATH KIA - Shrapnel wounds, multiple			DATE OF DEATH 26 Oct 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)					
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							
DATE OF BURIAL 14 Jan 48	HOUR 1100	BURIED IN (Shroud, blanket, or name of other) Casket	TYPE OF GRAVE MARKER None	PLOT NO. 813	ROW NO. J	GRAVE No. 3353	
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. 3205	
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-3411-B			RANK	SERIAL No.	ORGANIZATION	GRAVE No. 3355	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-3448			RANK	SERIAL No.	ORGANIZATION	GRAVE No. 3351	
SIGNATURE OF PERSON PREPARING REPORT V C 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.							

RESTRICTED



**RESTRICTED**

LEFT LITTLE FINGER	<p><b>Section 3.—UNIDENTIFIED REMAINS.</b></p> <p><b>INSTRUCTIONS:</b>                  (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.</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	FILLINGS  SILVER FILLING GOLD FILLING		 DIAGRAM REPRESENTS THE MOUTH WIDE OPEN		
RIGHT THUMB	CAVITIES  CAVITY DECAYED				
RIGHT INDEX FINGER	MISSING TEETH  TOOTH MISSING				
RIGHT MIDDLE FINGER	CROWNED TEETH  PORCELAIN CROWN GOLD CROWN				
RIGHT RING FINGER	BRIDGE WORK  GOLD BRIDGE				
RIGHT LITTLE FINGER	FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY				
					
REMARKS:					
21 APR 1948	QMC Form 1044, 1044-A and 1044-B accomplished.				

177 J... INFORMATION REMOVED 4  
City of T. 4103  
4 Mar 45

**RESTRICTED**  
**CONFIDENTIAL**

**UNKNOWN I- 21**

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

**Dulag, Leyte, P.I.** **26 October 1944** **KIA - Shrapnel Wounds,**  
 (Place of death) (Date of death) (Cause of death) **Mult.**

**0950 26 October 1944** **USAF Cemetery Dulag #1 Dulag, Leyte, P.I.**  
 (Time and date of burial) (Name of cemetery) (Name or coordinates of location)

**188** **5** **1** **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   
 Embossed Plate attached to Marker Religion - Unknown

One copy of GR Form #1 placed in sealed bottle and buried with Body  
 (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 <del>XXXX</del> <b>Left</b> <b>Lewis, William R.</b> <b>34598370</b> <b>Sgt.</b> <b>722nd Eng Dpt</b> <b>187</b>	(Name)	(Serial number)	(Rank)	(Organization)	(Grave number)
Body buried on <del>XXXX</del> <b>Right</b> <b>Unknown I-22</b> <b></b> <b></b> <b>Det</b> <b>189</b>	(Name)	(Serial number)	(Rank)	(Organization)	(Grave number)

(Name and address of EMERGENCY ADDRESSEE)

(Name and address of LEGAL NEXT OF KIN)

List only personal effects FOUND ON BODY and disposition of same: **NONE**

IF DECEASED UNIDENTIFIED

TAKE FINGERPRINTS OF BOTH HANDS (W. D. Cir. No. 39; 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.

Believed to Be ~~was~~ an Air Corps Pilot (P-38) that had just landed on beach

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

*Francis J. Greer*  
(Signature of officer or other person reporting burial)  
Lovillo, Co. 4, 2nd Lt. Tec 4

(Verified by Army GRS Officer)

Robert W. Greer, 2nd Lt. Inf

LEFT HAND

THUMB

4

3

2

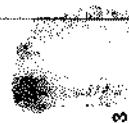
1

4

*W. D. Land / other  
A 16/ May 1945*

*Not found  
7-33-45*

RECEIVED  
3 JAN 1945



3



2



1



THUMB

RIGHT HAND

4

## REPORT OF INTERMENT

(TM 10-630 AND AR 30-1815)

UNKNOWN X-126

(Last name)	(First)	(Initial)	(Serial number)	(Rank)	(Organization)
Dulag, Leyte, P. I.			26 Oct 1944		KIA-shrapnel wounds, mult.
(Place of death)		(Date of death)		(Cause of death)	
0900 hrs 24 July 1945	USAF Cemetery Leyte # 1, P.I.		(Name or co-ordinates of location)		
(Time and date of burial)		(Name of cemetery)			
3205			Reg Cross		
(Grave number)	(Row number)	(Plot number)	(Type of marker—Regulation V-shaped or other)		

Disposition of identification tags: Buried with body Yes ( ) No (X) Attached to marker Yes ( ) No (X)  
 DISINTERRED from Grave 188, USAF Cemetery Dulag # 1, Leyte, P.I.  
 Religion \_\_\_\_\_ (UNKNOWN X-21)

Metal tag buried with remains and attached to Marker.

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

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

Body buried on <b>RIGHT</b>	McMORROW, George J.	20 617 970	Tec 4	Hq Btry 510 AAA Gun Bn	3206
	(Name)	(Serial number)	(Rank)	(Organization)	(Grave number)
Body buried on <b>LEFT</b>	UNKNOWN X-125				3204
	(Name)	(Serial number)	(Rank)	(Organization)	(Grave number)

(Name and address of EMERGENCY ADDRESSEE)

(Name and address of LEGAL NEXT OF KIN)

List only personal effects **FOUND ON BODY** and disposition of same:

NONE RESTRICTED

**IF DECEASED UNIDENTIFIED**

**TAKE FINGERPRINTS OF BOTH HANDS (W.D. 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? <b>NO</b>

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

**Skull crushed--Unable to take tooth chart** on disinterment  
In space below, locate and describe any scars, birthmarks, moles deformities, etc.:

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

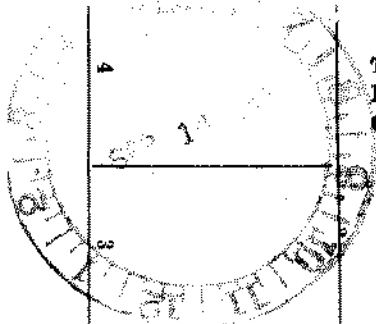
**IF THIS IS AN ISOLATED BURIAL, ATTACH A SKETCH OF THE LOCATION, ORIENTED WITH PERMANENT LANDMARKS.**

*John E. Bobis*  
S/Sgt John E. Bobis, GRS

(Signature of officer or other person reporting burial)

*Francis M. Simon*  
FRANCIS M. SIMON, 1st Lt., QMC

(Verified by Army GRS Officer)



LEFT HAND

4

3

2

1

THUMB

4

3

2

1

THUMB

RIGHT HAND