

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 unbr keys #1 X-360

SUBJECT

also manila mans X-3769

GMC FORM 1121
1 Aug 45

AIRMAIL

QICMT 293

GRS Far East

Unidentifiable

13 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-29,
USAF Cemetery Leyte #1

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

Unknown X-3406, AGRS Mausoleum Manila, formerly X-340,
USAF Cemetery Leyte #1

Unknown X-3769, AGRS Mausoleum Manila, formerly X-360,
USAF Cemetery Leyte #1

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

Unknown X-727, USAF Cemetery Leyte #1, formerly X-4594,
AGRS Mausoleum Manila

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

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

Unknown X-1066, 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

293
Unidentifiable
X-3724
X-3725
X-3406
X-3769
X-718
X-727
X-728
X-730
X-1066
X-3582

AIRMAIL

QUART 293

12 January 1950

GRS Far East

SUBJECT: Identification of World War II Deceased

Unknown X-3977, AGRS Mausoleum Manila, formerly X-7, USAF Cemetery Finschhafen #3, N. G.

Unknown X-3923, AGRS 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-4314 and X-4315, AGRS Mausoleum Manila, and X-736 and X-737, USAF Cemetery Leyte #1, have been suspended. The records of this Office indicate that QMC Forms 1042 are not on file for these Unknown Deceased, therefore, it is requested that Reports of Storage be forwarded as soon as practicable.

4. Findings of Unidentifiability, your headquarters, dated 6 December 1949, for Unknown X-342, Grave 1162, USAF Cemetery, Finschhafen #5, have been suspended. The records of this Office indicate that a QMC Form 1042 is not on file for this Unknown Deceased. A further search of records indicates that Unknown X-342, Grave 1460, USMC Finschhafen #5, formerly X-2701-A, AGRS Mausoleum Manila, and previously interred as X-94, 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. MONTZ
Lt. Colonel, QMC
Memorial Division

REB

E. A. Kazup:dal
C. Salsar
J. Windsor

TEC

Copy furnished CINCPAC, APO 500

AIRMAIL

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILOM ZONE

AFO 900
22 December 1949

GRFZ 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 QMNU 293, GRS (Far East), dated 17 September 1948, subject: Resolution of Cases of Unidentified Deceased, the following Unknown remains, presently stored at AGRS 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	Pinsch #5	UNKNOWN	X-3582	AGRS	Mslm
"	X-517	AGRS	Mslm	"	X-3724	" "
"	X-718	Leyte #1	"	"	X-3725	" "
"	X-727	" "	"	"	X-3769	" "
"	X-728	" "	"	"	X-3923	" "
"	X-730	" "	"	"	X-3977	" "
"	X-736	" "	"	"	X-4141	Manila #2
"	X-737	" "	"	"	X-4669	AGRS Mslm
"	X-1086	AGRS	Mslm	"	X-4670	" "
"	X-1397	" "	"	"	X-4691	" "
"	X-2431	" "	"	"	X-5214	" "
"	X-2816	" "	"	"	X-5215	" "
"	X-3406	" "	"	"		

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

FOR THE COMMANDING OFFICER:

25 Incls
QMC Forms 1044 w/Certificates
of Unidentifiability

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

1 /ebc ✓

Interred 30 Jan 1950
A 11 32 Ft. McKinley

DISINTERMENT DIRECTIVE

Carl R. Mark
CARL R. H. MARK

Cemetery Superintendent
SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7740 00353

DATE
15 05 48
DAY MONTH YEAR

NAME: UNKNOWN SERIAL NUMBER: X-000360 RANK: ARM: 0 DATE OF DEATH: DAY MONTH YEAR

CEMETERY: USAF CEMETERY LEYTE NO 1 DISPOSITION OF REMAINS: 7701 80 CODE DIST. PT.

PLOT: ROW: GRAVE: 6166 COUNTRY: PHILIPPINE ISLANDS CAUSE OF DEATH: 6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE: FORT MCKINLEY CEMETERY, MANILA, PHILIPPINE ISLANDS (BY ADMINISTRATIVE ORDER)

NAME AND ADDRESS OF NEXT OF KIN

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME: UNK X-360 (Maus No.) UNK X-3769 SERIAL NUMBER: RANK: DATE OF DEATH: DATE DISTINTERRED: 27 Sept 48

IDENTIFICATION TAG ON: 3 REMAINS, 10 MARKER ORGANIZATION: UNKNOWN RELIGION: IDENTIFICATION VERIFIED BY: ROBERT F. STEVENSON, Embalmer

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: Shelter Half CONDITION OF REMAINS: Skeletal

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES: 2 Tags Maus No. UNK X-3769

REMAINS PREPARED AND PLACED IN CASKET DATE: 27 Sept 48 BY: ROBERT F. STEVENSON

CASKET SEALED BY: ROBERT F. STEVENSON EMBALMER (Signature): ROBERT F. STEVENSON

CASKET BOXED AND MARKED DATE: 27 Sept 48 BY: HORACE L. ALLISON Sgt., Inf SHIPPING ADDRESS VERIFIED BY: LUCIO S. PANOPIO, 1st Lt., Inf

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

Lucio S. Panopio
LUCIO S. PANOPIO, 1st Lt., Inf
SIGNATURE OF GRS INSPECTOR

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

RECORD OF CUSTODIAL TRANSFER

FROM		AGRS Mausoleum		TO		Fort McKinley Military Cemetery	
KIND OF CONVEYANCE		Truck		NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER		<i>W. P. Smith</i>	
DATE				DATE		JAN 8 0 1950	
2. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			
3. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			
4. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			
5. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			
6. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			
7. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			

mc

FILE UNDER NO: 293 - Unk own X-360 P.I. (Leyte #1)

INDEX SHEET
SYNOPSIS

Memo

16 April 1946

FROM: CMO, Memorial Div.
TO: AGO, World War II Records Adm. AGO, St. Louis, Mo.

RE: For necessary action.

DOCUMENT FILED UNDER NO: 293 - Unknown (Misc) P.I. (Leyte #1)

bm

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- 360, Plot _____,
Row _____, Grave 6166, 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, QMG
Chief, Records Branch

Attch: Form 1044

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

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-3769 (Formerly UNK X-360 Leyte #1)				2. DATE OF REPORT 15 Dec 1949	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.		4. PLOT 812	5. ROW W	6. GRAVE 5748	7. DATE OF DISINTERMENT REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT U T D	9. ESTIMATED HEIGHT 5' 1 3/8"	10. COLOR OF HAIR U T D	11. RACE Unknown
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

N O N E

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

U T D

14. WAS BODY BURNED? TO WHAT EXTENT?

YES NO

15. WAS BODY MANGLED? TO WHAT EXTENT?

YES NO

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

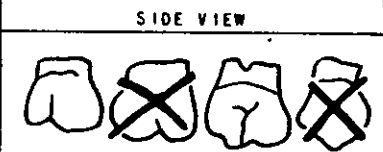
N O N E

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:



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



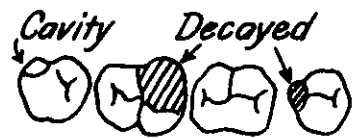
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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:



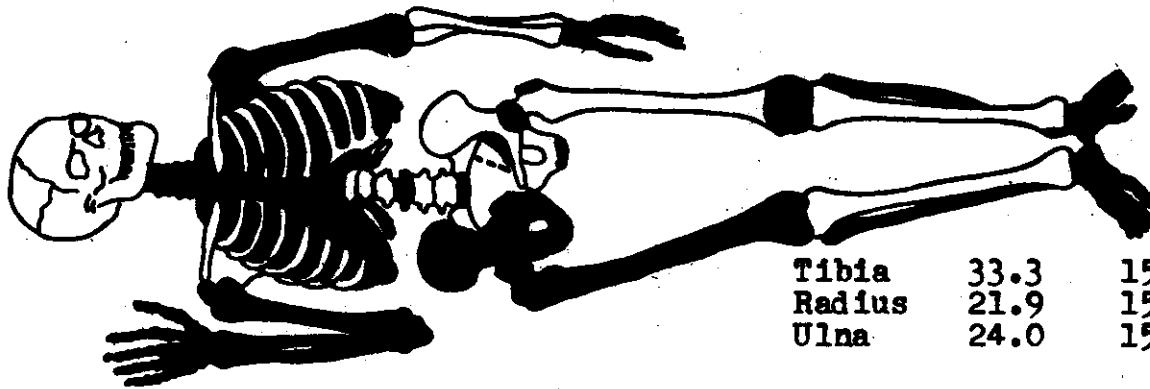
RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

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."

"UNIDENTIFIABLE"

Paul R. Nichols

PAUL R NICHOLS
Chief, Identification Section



Tibia	33.3	154
Radius	21.9	158
Ulna	24.0	156

Average height: 156 cms.

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 remains.

Estimated weight of remains - 5 lbs.

Circumference of skull - 21½ inches.

"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 X-3769 (Formerly Unk X-360, USAF Cem Leyte #1, P.I.)				2. DATE OF REPORT 12 February 1948	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.	4. PLOT 812	5. ROW W	6. GRAVE 5748	7. DATE OF	
				DISINTERMENT 22 Dec 47	REINTERMENT STORAGE 14 Feb 48

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT 5' 1-3/8"	10. COLOR OF HAIR UTD	11. RACE UTD
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

N O N E

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

U T D

14. WAS BODY BURNED ?

YES NO

TO WHAT EXTENT ?

15. WAS BODY MANGLED ?

YES NO

TO WHAT EXTENT ?

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS


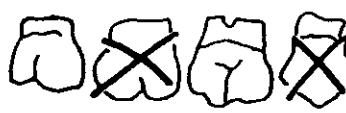
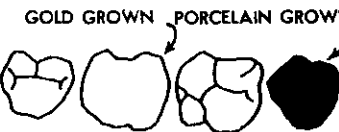



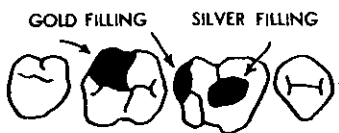

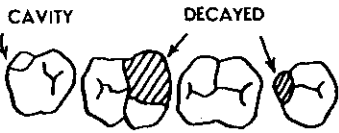

N O N E

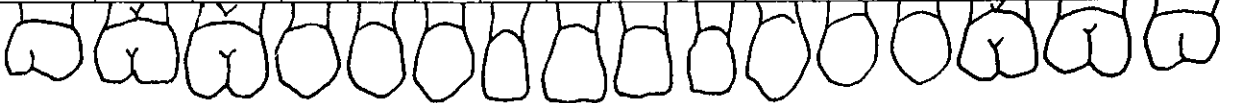



17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

N O N E

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:		

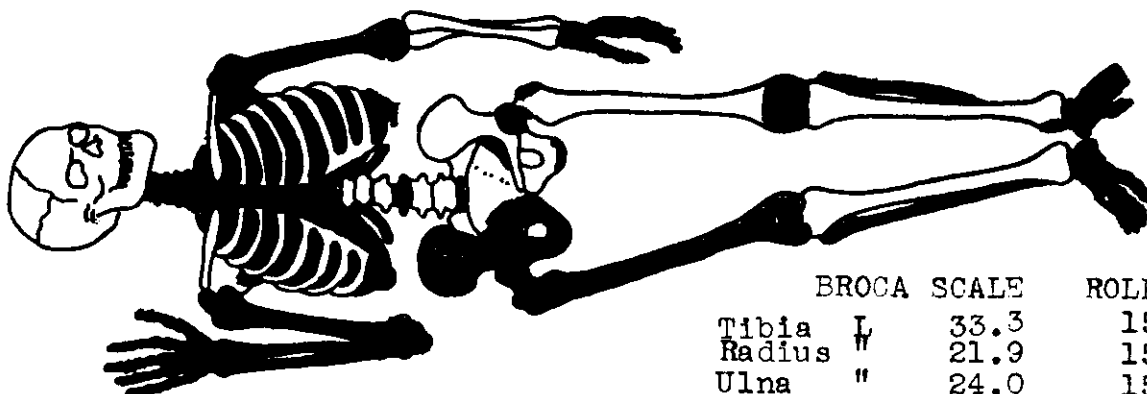
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SIDE VIEWS																	SIDE VIEWS
TOP VIEWS																	UPPER
																	LOWER
SIDE VIEWS																	
			X					X						X			
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16	

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."

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

s/ John J Connors

19. BLACK OUT PARTS OF BODY NOT COVERED



	BROCA SCALE	ROLLET
Tibia L	33.3	154 cms
Radius W	21.9	158 "
Ulna "	24.0	156 "

Average height 156 cms.

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 identification tags, personal effects, burial bottle, or other means of identification found with remains. Circumference of the skull 21-1/2 inches. Estimated weight of remains five (5) 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/ JOHN J CONNORS SP-6
CIP, Laboratory, Manila, P.I.

SIGNATURE
s/ John J Connors

5 January 1948

REPORT OF DISINTERMENT FOR IDENTIFICATION

1. Remains of (Name)

Serial Number

UNKNOWN X-360

Grade

Organization

. Name, Number and Location of Cemetery

Plot

Row

Grave No.

USAF Cemetery Ieyte Pl, P. I.

6166

2. Date of Disinterment

NEXT OF KIN:

1600 hrs 22 Dec. 1947

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

Original made in shelter halve burial. Skeletal remains. Subs tags on remains and on marker coincide with ROI on file.

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

Substitute tag

On Remains

Substitute tag

What Identification Used Upon Reinterment: On Marker

N o n e

On Remains

Held for concentration

5. Signature of Officer Supervising Disinterment and Reinterment.

James H. Jackson
JAMES H. JACKSON, Major, TC

5-24880-4M

1174-PHILTRON-3-47-130M

RESTRICTED

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 (cutting teeth), the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (grinding teeth). An examination should be made and findings charted to cover the following basic conditions: lost teeth, crowned teeth, bridgework, fillings, caries (cavities or decay), dentures (plates), and any deformity of jaws found.

Missing Teeth
 Tooth Missing
 Tooth Missing

Crowned Teeth
 Porcelain Crown
 Gold Crown

Bridgework
 Gold & Porcelain Bridge
 Gold Bridge

Fillings
 Silver Filling
 Gold Filling
 Gold Filling

Caries (Cavities)
 Cavity
 Decayed
 Decayed

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

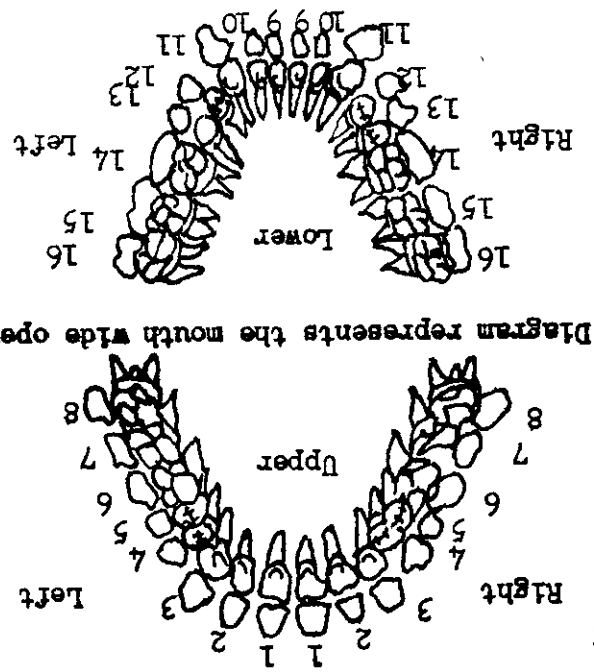
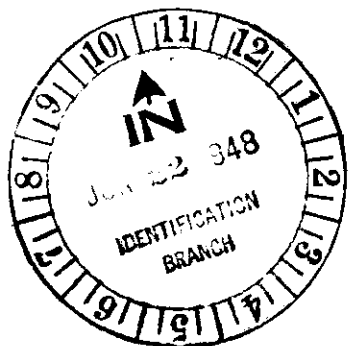


Diagram represents the mouth wide open

U-772-
Grave # 6166

Leyte #1
X-360
U-772

DENTAL CHART

Unknown X-360
Grave # 6166

Name-

R-8 Missing
R-7 _____
R-6 _____
R-5 _____
R-4 _____
R-3 _____
R-2 _____
R-1 Missing

R-8 _____
R-7 _____
R-6 _____
R-5 _____
R-4 _____
R-3 _____
R-2 _____
R-1 _____

L-1 Missing
L-2 Missing
L-3 _____
L-4 _____
L-5 _____
L-6 _____
L-7 _____
L-8 Missing

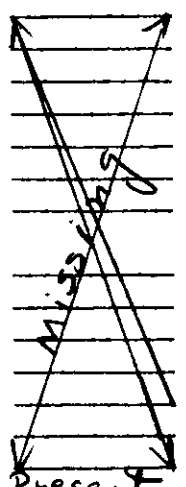
L-1 _____
L-2 _____
L-3 _____
L-4 _____
L-5 _____
L-6 _____
L-7 _____
L-8 _____

R-16 Present
R-15 _____
R-14 _____
R-13 _____
R-12 _____
R-11 _____
R-10 _____
R-9 _____

R-16 _____
R-15 _____
R-14 _____
R-13 _____
R-12 _____
R-11 _____
R-10 _____
R-9 _____

L-9 _____
L-10 _____
L-11 _____
L-12 _____
L-13 _____
L-14 _____
L-15 _____
L-16 Present

L-9 _____
L-10 _____
L-11 _____
L-12 _____
L-13 _____
L-14 _____
L-15 _____
L-16 _____



Comparing with:
X-328, X-355, X-358
X-359, X-360, X-366, X-367
+ John W. Smith 31368471
Tribbey
~~Stuck~~
Carson Unfavorable
Caranagno Unfavorable


Exhibit -

/amr

RESTRICTED

JUN 22 1948

U 772

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815) STORAGE				DATE OF REPORT 1 Mar 48
Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.					
	NAME (Last, first, middle initial) UNKNOWN X-3769 (Formerly UNK X-360 USAF Cem #1, Leyte, 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 Culasian, Leyte, P.I.	CAUSE OF DEATH Unknown			DATE OF DEATH Unknown		
EMERGENCY ADDRESSEE (Name, relationship, and address) None						
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) Yes (2)		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If used, fill in section 3 on reverse)				RECORDED 17 2 12 1948 RESEARCH SECTION
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) None						
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 Feb 48	HOUR 1300	BURIED IN (Shroud, blanket, or name of other) STORAGE Casket	TYPE OF GRAVE MARKER None	PLOT No. 812	ROW No. W	GRAVE No. CRYPT 5748
WAS THIS A REBURIAL? (Yes or no) RESTORED Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery #1, Leyte, P.I.			PLOT No.	ROW No.	GRAVE No. 6166
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) STORED	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)					
Yes	Yes					
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORED UNKNOWN X-3770-A	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 5749		
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED UNKNOWN X-3767	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 5747		
SIGNATURE OF PERSON PREPARING REPORT V O AQUINO, T/5, QMC			SIGNATURE OF GRS OFFICER VERIFYING REPORT S PANOPPO, 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

Section UNIDENTIFIED REMAINS.


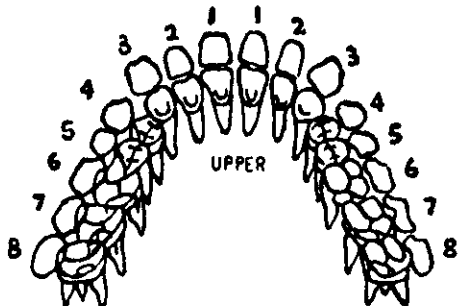




INSTRUCTIONS:

(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.

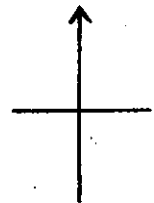
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.

LEFT LITTLE FINGER	HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
	LEFT RING FINGER	WEAPON AND SERIAL No.		LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
LEFT MIDDLE FINGER	OTHER IDENTIFICATION CLUES				

LEFT INDEX FINGER	LEFT THUMB	RIGHT THUMB	RIGHT INDEX FINGER	RIGHT MIDDLE FINGER	RIGHT RING FINGER	RIGHT LITTLE FINGER
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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>	

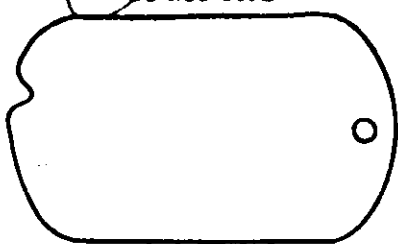
FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY



REMARKS:

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

12 MAY 1948

WD GMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)				REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)				DATE OF REPORT 4 Jan 46		
Impression Identification Tag If Possible. DO NOT TYPE 			Section 1.—IDENTIFICATION.						SERIAL No.	
			NAME (Last, first, middle initial) UNKNOWN X-360						-	
			GRADE -		ORGANIZATION -		BRANCH OF SERVICE -			
			RACE -		RELIGION -		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY			
PLACE OF DEATH Culasian, Leyte, 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)							
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes										
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME <i>July 758</i> 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 3 Jan 46		HOUR 1500	BURIED IN (Shroud, blanket, or name of other) shelter halve		TYPE OF GRAVE MARKER Reg Cross	PLOT No.	ROW No.	GRAVE No. 6166		
WAS THIS A REBURIAL? (Yes or no) Yes		IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE Top Map Cent Phil., sheet 3 of 5 sheets scale 1:250,000 Coord-1310.4-1360.6					PLOT No.	ROW No.	GRAVE No. Isolated burial	
TYPE OF RELIGIOUS CEREMONY -		PERSON CONDUCTING BURIAL RITES -		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY Report of Reinterment, identification tag buried with body in bottle.						
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-359				RANK -	SERIAL No. -	ORGANIZATION -	GRAVE No. 6165			
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-361				RANK -	SERIAL No. -	ORGANIZATION -	GRAVE No. 6167			
SIGNATURE OF PERSON PREPARING REPORT <i>Charles W. Hallock</i> T/5 Charles W. Hallock, GRS				SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>William D. Rogers</i> 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.										

22 JAN 1948

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.


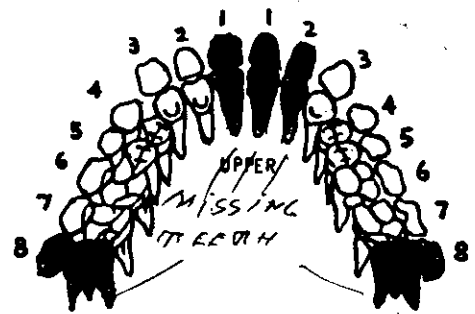





(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.

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

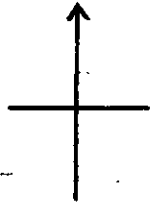
WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND 2 mi S. Culasian Leyte, P.I. Cantibo Mt.
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OTHER IDENTIFICATION CLUES

None

FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER MISSING TEETH</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>  <p>MISSING 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:

CONDITION OF BODY PRECLUDED FINGERPRINTING AND OTHER MEANS OF IDENTIFICATION,