

FILE IDENTIFICATION TOPPER

FILE NUMBER	293 unk Legt #1 X-491
SUBJECT	Also 293 unk maus Manila 2337

GMC FORM 1121  
1 Aug 45

# DISPOSITION FORM

LMW/mmg/1C712 <sup>to</sup> 493 Unk Leyte #1 X491

FILE No.

AGPO-D

SUBJECT

Identity of fingerprints

TO

FROM

DATE 3 August 1949

COMMENT No. 2

The Quartermaster General Personnel Actions Br. AGO  
Memorial Division  
ATTN: Major Sekowski  
Rm. 1D778, Pentagon

Lt. Col. Meredith/4814

A search of the fingerprint files in the Federal Bureau of Investigation fails to disclose any record for UNKNOWN X-491.

FOR THE DIRECTOR OF PERSONNEL AND ADMINISTRATION:

Incl:  
Rpt. of Burial  
Unk. X-491, Leyte

*R. Meredith*  
For RALPH NEMO, COLONEL, AGD  
Chief, Personnel Actions Br. AGO

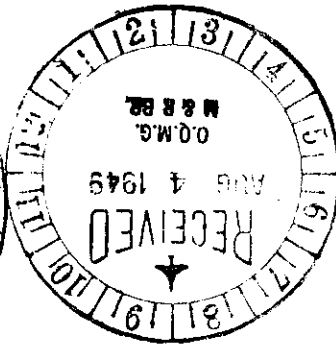
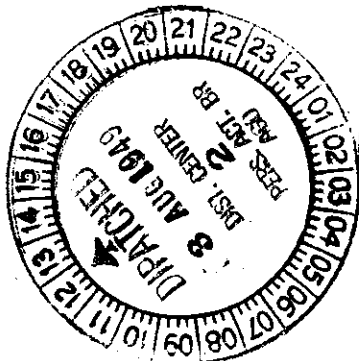
RAT  
File

29 Aug. 50

*CLM*

Identification Branch

*X-491*  
*Leyte*



MMW

DEPARTMENT

# DISPOSITION FORM

FILE No.

SUBJECT

Unk X-491, Leyte  
(Fingerprint Comparison)

TO

FROM

DATE

COMMENT

Disciplinary Section  
P.A. Br.  
Rm. 1-G-712

QM Liaison  
Rm. 1-D-778, Pentagon Bldg.

21 July 49

1. Report of Burial for Unknown X-491, Leyte, with attached fingerprints, is forwarded with request that comparison be made with those on file.
2. It is requested that this Office be advised of the findings, together with return of the inclosure.

*B. J. Sakowski*  
B. J. Sakowski  
Major, QMC

1 Incl:  
Rpt. of Burial  
Unk. X-491, Leyte



SECRET  
(When used in connection with the  
Atomic Energy Act of 1954)

82-0-1



*green file*  
*293 unk*  
 Form #2, (misc) unidentified (files.)

6 May 1950

~~SECRET~~  
 War Dept  
 SUBJECT: Identification of World War II Deceased

To: Commanding Officer  
 American Graves Registration Service  
 Philcoz Zone  
 APO 900, c/o Postmaster  
 San Francisco, California

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

Unknown	A-1419,	(form	X-88	Pinsch #2),	Unit	2,	Page	27
"	X-1643,	( "	X-258	" "	"	2,	"	30
"	<del>X-2122,</del>	( "	<del>X-491</del>	<del>Loyte #1),</del>	"	2,	"	12
"	X-2660,	( "	X-48	" "	"	2,	"	8
"	X-3713,	( "	X-48	" "	"	2,	"	8
"	X-4255,	AGRS	Maus.	Manila,	P.I.,	"	"	21
"	X-5051,	"	"	"	"	2,	"	24
"	X-5054,	"	"	"	"	2,	"	24
"	X-5229,	"	"	"	"	2,	Addition	
"	X-5230,	"	"	"	"	2,	"	

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

FOR THE ACTING THE QUARTERMASTER GENERAL:

W.Eustace:lrc  
 Salsor

THOMAS E. COX  
 Capt OIC  
 Memorial Division

JMN  
 JW

cc--Administrative Section  
 cc--Cincfs

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
PHILCOM ZONE

GPZ 293

APO 900  
15 MAR 1950

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 QMGS 293, GRS (Far East), dated 17 September 1948, subject: Resolution of Cases of Unidentified Deceased, the following Unknown remains, presently stored at AGRS 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-605, AGRS Main		
"	X-1419, " "		
"	X-1543, " "		
"	X-2337, " "		
"	X-3660, " "		
"	X-3713, " "		
"	X-4198, Manila #2		
"	X-4255, AGRS, Main		
"	X-5121, " "		

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

FOR THE COMMANDING OFFICER:

9 Incls  
QMC Forms 1044 w/Certificates  
of Unidentifiability

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

C  
D  
P  
Y

**MEMO ROUTING SLIP**NEVER FOR APPROVALS, DISAPPROVALS,  
CONCURRENCES, OR SIMILAR ACTIONS

1 NAME OR TITLE <b>The Quartermaster General</b>	INITIALS		CIRCULATE
ORGANIZATION AND LOCATION <b>Memorial Division</b>	DATE		COORDINATION
2 <b>ATTN: Major Sekowski</b>			FILE
<b>Rm. 1C675</b>			INFORMATION
3 <i>Mrs. Harvey</i>			NECESSARY ACTION
<i>Adm. Sec.</i>			NOTE AND RETURN
4			SEE ME
			SIGNATURE

## REMARKS

Attention is invited to the inclosed FBI Memo dated 22 Aug 49 concerning WC-1000, Unknown X491.

1 Incl:  
FBI Memo dated 22 Aug 49.

FROM NAME OR TITLE <i>W</i> <b>WOODLAND/hl/1C712</b>	DATE <b>29 Aug 49</b>
ORGANIZATION AND LOCATION <b>PAB, Discip Sec., Pentagon</b>	TELEPHONE <b>71461</b>



FEDERAL BUREAU OF INVESTIGATION  
WASHINGTON, D. C.

Date August 22, 1949

TO: Mr. L. M. Woodland  
Pentagon Building

Re: This confirms the telephonic report given Mrs. Harvey of the Memorial Division on August 17, 1949, to the effect that fingerprints appearing on WC-1000, your unknown X49L, Leyte were not identical with the fingerprints of Lyman Keith Neubauer, who was born March 9, 1926 at Bismarck, North Dakota.

*J. E. Hoover*

John Edgar Hoover  
Director

1 ID Section      Discipline- 19 Jul  
ID Branch      ary Sec      1949  
Memorial      P.A. Br  
Division      Room 1A-678

293 Unk X-491, Leyte  
(Fingerprint Comparison)

1. Report of Burial for Unknown X-491, Leyte, with attached fingerprints, is forwarded with request that comparison be made with those on file.

2. It is requested that this Office be advised of the findings, together with return of the inclosure.

1 Incl:  
Rpt of Burial Unk X-491, Leyte

BARRY  
2462

VHarvey

**AIRMAIL**

293 Unknown - P.I. X-491 (Leyte) #1

QUEST 293  
AGRS Manila, P. I.  
SUBJECT: ~~Tracer~~

1st Ind.

Department of the Army, QMG, Washington 25, D. C., 14 September 1949

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

1. Fingerprints submitted for Unknown X-491, USAF Country, Leyte #1 (currently designated as Unknown X-2337, AGRS Mausoleum, Manila, P. I.) have been compared by the Federal Bureau of Investigation with those of Lyman Keith Neubauer with negative results. A search of the War Casualty List failed to reveal a casualty by the name mentioned in inclosure 1.

2. In the event additional information becomes available to your Headquarters which may be of assistance in the identification of subject Unknown, it should be forwarded to this Office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

1 Inclosure

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

nih:Harvey  
Blandes

cc: Adm Sec

RUB

TEG

SEP 15 10 11 AM '49  
MAIL ROOM

293-Unknown X-2337 (Mausoleum) Manila  
293 Neubauer, Lyman Keith

**AIRMAIL**

AIR MAIL

HEADQUARTERS  
PHILIPPINES COMMAND  
UNITED STATES ARMY

APO 707  
20 JUN 1949

GSCF 293  
Unknown X-2337  
AGRS Mausoleum,  
Manila, P. I.

SUBJECT: Tracer

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

Request status of letter, this Headquarters, file reference  
GSCF 293, dated 25 Oct. 48, subject: Request for Information, copy  
attached.

FOR THE COMMANDING GENERAL

/s/ John A. Marszal  
JOHN A. MARSZAL  
1st Lt., AGC  
Asst Adj Gen

1 Incl:  
a/s

AIR MAIL

HEADQUARTERS  
PHILIPPINES COMMAND  
UNITED STATES ARMY

AFD 707  
25 Oct 48

OSGR 293

SUBJECT: Request for Information

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

1. Report of Interment and Certificate of Death for Unknown X-491, USAF Cemetery Leyte No. 1 (currently designated as Unknown X-2337, AGRS Mausoleum, Manila, P. I.) indicate that subject Unknown, at time of recovery, was wearing a white Navy type jumper on which was stenciled the name and number, Neubauer, L. K., 218.
2. Original Certificate of Death, bearing the right index fingerprint of subject Unknown and containing information as to circumstances surrounding recovery, is inclosed herewith.
3. There is no record in this office of a casualty by the above-mentioned name. It is, therefore, requested that an attempt be made to associate reference name and fingerprint with a casualty, and this office be furnished QMG Form 371 together with any additional information which may aid in identification proceedings.

FOR THE COMMANDING GENERAL:

NORMAN L. QUIGG  
CWO USA  
Asst Adj Gen

1 Incl  
As stated

10/25/48

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	ID Section ID Branch Memorial Division	Disciplin- ary Sec P.A. Br Room 1A-678	19 Jul 1949	<p>293 Unk X-491, Leyte (Fingerprint Comparison)</p> <p>1. Report of Burial for Unknown X-491, Leyte, with attached fingerprints, is forwarded with request that comparison be made with those on file.</p> <p>2. It is requested that this Office be advised of the findings, together with return of the inclosure.</p> <p>1 Incl: Rpt of Burial Unk X-491, Leyte</p> <p style="text-align: right;"><i>BARRY</i> BARRY 2462</p>
2	QM Pentagon Liaison	Id Sec Id Br Mem Div V. Harvey	15 Aug 49	<p>Results of comparison and report of burial are returned herewith.</p> <p style="text-align: center;"><i>B. J. D.</i> Sekowski 6079</p> <p style="text-align: right;"><i>E. M. D.</i> Dyer 73090</p>

VHarvey

*Handwritten notes:*  
 293 Unk X-491  
 19 Jul 49  
 ID Section

**Pentagon Liaison**

**JUL 20 1949**

**Mem. Div. OQMS**

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	Chief, Navy Sect MemDiv	Iden Sect Id Br. MemDiv	1 Dec 1948	<p>1. Reference is made to letter from the Field attached hereto with Cert of Death for an unknown buried in Leyte Cemetery P.I.</p> <p>2. The fingerprint on Death Certificate could not be identified as a Navy man.</p> <p style="text-align: center;"><i>Wait</i> WAITE 73880</p> <p>3 Att: (1) Death Certificate (2) Ltr from Field 25 Oct 1948 (3) Ltr to BUPERS 18 Nov 1948</p>





IN REPLY REFER TO \_\_\_\_\_

DEPARTMENT OF THE ARMY  
~~MEMORANDUM FOR THE CHIEF OF STAFF~~  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON 25, D. C.



18 Nov 1948

MEMORANDUM FOR IDENTIFICATION SECTION: BUREAU OF NAVAL PERSONNEL

SUBJECT: UNKNOWN Leyte Cemetery #1, P.I.

1. Attached hereto is Certificate of Death for an Unknown buried in Leyte #1 Cemetery, P.I., bearing fingerprint of the deceased.

It is requested that this fingerprint be checked against a possible casualty by the name of NEUBAUER, L.K.

It is further requested this fingerprint be checked against your files, and this office be informed by telephone (War Dept Ext 73880) when comparison has been completed.

*J.K. Waite*  
J.K. WAITE  
Lieut (MSC) USN  
Naval Liaison Officer AGRS.

*11-23-48*  
Not Lyman Keith Neubauer  
*386-98-49*

HEADQUARTERS  
PHILIPPINES COMMAND  
UNITED STATES ARMY

GSGR 293

APO 707

SUBJECT: Request for Information

25 OCT 1948

*By Burkh Leyte #1 X 491*

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

1. Report of Interment and Certificate of Death for Unknown X-491, USAF Cemetery Leyte #1 (currently designated as Unknown X-2337, AGRS Mausoleum, Manila, P. I.) indicate that subject Unknown, at time of recovery, was wearing a white Navy type jumper on which was stenciled the name and number, Neubauer, L. K., 218.

2. Original Certificate of Death, bearing the right index fingerprint of subject Unknown and containing information as to circumstances surrounding recovery, is inclosed herewith.

3. There is no record in this office of a casualty by the above-mentioned name. It is, therefore, requested that an attempt be made to associate reference name and fingerprint with a casualty, and this office be furnished OQMG Form 371 together with any additional information which may aid in identification proceedings.

FOR THE COMMANDING GENERAL:



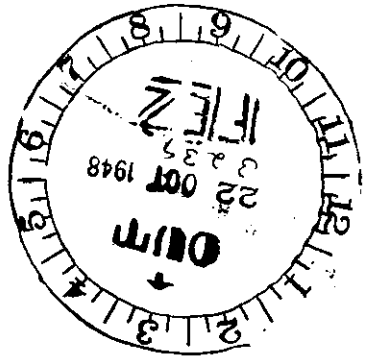
NORMAN L. QUIGG  
CWO, USA  
Asst Adj Gen



1 Incl.  
As stated

*993 Under X - 1491 P.I. (Leyte #1)*

EX-115  
MAY 31 1950  
Identification Branch



RECEIVED  
MEMORIAL DIVISION  
NOV 4 12 12 PM '48  
MEMORIAL DIVISION  
NOV 4 10 28 AM '48

**HEADQUARTERS  
PHILIPPINES COMMAND  
UNITED STATES ARMY**

GSGR 293

APO 707  
25 Oct 48

**SUBJECT: Request for Information**

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

1. Report of Interment and Certificate of Death for Unknown X-491 USAF Cemetery Leyte No. 1 (currently designated as Unknown X-2337 AGRS Mausoleum, Manila, P. I.) indicate that subject Unknown, at time of recovery, was wearing a white Navy type jumper on which was stenciled the name and number, Neubauer. L. K., 218.

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**FOR THE COMMANDING GENERAL:**

1 Incl  
As stated

**NORMAN L. QUIGG  
CWO USA  
Asst Adj Gen**

C  
O  
P  
Y

DO NOT ADDRESS THE SIGNER OF THIS LETTER  
BUT ADDRESS YOUR REPLY TO  
BUREAU OF MEDICINE AND SURGERY  
NAVY DEPARTMENT, WASHINGTON 25, D. C.

AND REFER TO No.

BUMED-ECd-EK  
QW20/P6-1



WASHINGTON 25, D. C.

21 Aug 1946

X 491

MEMORANDUM FOR LT. WAITE

Subj: Identification from fingerprints in case of UNKNOWN  
interred in Grave 8399, USAF Cemetery, Leyte No. 1,  
Palo Leyte, P.I.

1. The fingerprints in the case of the subject-named UNKNOWN have been checked by the Coast Guard Identification Section, but no identification was made.
2. The fingerprints have previously been checked by BuPers and the FBI, without result.

*E. M. Trout*  
E. M. TROUT

**CERTIFICATE OF DEATH**

QW170/Pa  
21/11/46

From: Medical Officer in Command, U.S. Fleet Hospital #114, Navy 31491 3 1946

To: Bureau of Medicine and Surgery, Navy Department, Washington, D. C.

NAVY DEPARTMENT

(See Circular Letter R-6, Appendix D, Manual of the Medical Department, for instructions)

1. Name Unknown Rank or rate Unknown  
 2. Born: Place Unknown Date Unknown  
 3. Nationality Unknown Religion Unknown  
(White—U. S., Colored, Samoan, etc.) (Denomination)  
 4. Eyes Unknown Hair Black Complexion Unknown Height 62 1/2 in. Weight 130  
 5. Marks, scars, etc. (noted in health record)

FINGERPRINT



State which finger Rt. index  
(Right index preferred)

6. Relation, name and address of next of kin or friend Unknown 28575

7. Original admission: Place \_\_\_\_\_ Date \_\_\_\_\_  
(Ship or station to which attached when first admitted to sick list)

8. Died: Place \_\_\_\_\_ Date \_\_\_\_\_ Hour \_\_\_\_\_

9. Cause of death { Principal Skull Fracture Key Letter \_\_\_\_\_  
 { Contributory \_\_\_\_\_

10. Death \_\_\_\_\_ the result of own misconduct and \_\_\_\_\_ in the line of duty.  
(is or is not) (is or is not)

11. Disposition of remains Forwarded to U.S.N.F. Cemetery Leyte #1, Balb. Leyte,  
Philippine Islands for burial.

**12. Summary of facts relative to the death:**

This body was found floating in the water between Manicani Island, P.I. and Calicoan Island, P.I. by L.S.N. 1119, picked up and brought to Fleet Hospital #114 for disposition.

The body is that of a male about 62 1/2 inches tall, weighing approximately 130 pounds, and approximately 20 to 30 years old. There is a strong odor of putrefaction present with marked decay of the tissues. The body is that apparently of a white person. What remains of the hair shows to be black. The eyebrows, eyes, nose, and part of the maxilla and mandible are missing. He is wearing a white Navy type jumper with a black stripe around the right sleeve at the shoulder. There is a

Approved: *[Signature]*  
 Commanding Officer (Rank) Captain  
 Will not be held (Will or will not)  
 Medical Officer (Rank) Lt (jg) (c)  
 A. B. QUINN, JR.  
 M. O., U. S. Navy, R.

*118641000*  
*14 The King*  
*8/15/46*

1. Fracture of the skull.
2. Infraction of the tissues.
3. Laceration of the scalp.

ANATOMIC DIAGNOSIS:

The body was so badly decomposed that it was felt that further examination of the remains would not give us further information.

Upon incision of the scalp in the routine manner for working exposure of the skull, there is found a large subgaleal hematoma starting at the area of laceration and extending upward and medially for twelve cm. involving the right parietal and upper portion of the occipital bone near the vertex. There is a separation fracture from the site of the depression fracture along the right tempo-parietal suture extending forward to the frontal bone.

There is a laceration 7.5 cm. long at the top of the head which has the appearance of having been made by a dull instrument. There is a 1.5 cm. round hole about 4 cm. toward the occiput from the laceration. There is a fracture of the right ramus of the mandible and another fracture right side of the mandible through the region of the canine tooth.

There are no scars or marks on the skin other than the laceration. There are no other marks of identity in the clothes. Each letter, is a name NEUBAUER, L.H. 218. The pockets are empty and there is only has a mother of pearl heart shaped pendant.

On the underside, at the bottom of the jumper, put on with a stencil in 3/4 inch letters, he has a small ball type chain commonly used for dog tags but it around his neck. On one side of this bracelet, "Solomon Islands" and "U.S. Navy" is stamped with a die set. Some numbers have been ground off on one side. The trousers are held up by a rubber band. There are no shoes and the soles of the feet are smooth. There is a bracelet, made to carry a wrist watch, on the left arm with a piece of glass held in place by rubber bands. This glass fits into the place for the watch. On one side of this bracelet, "Solomon Islands" and "U.S. Navy" is stamped with a die set. Some numbers have been ground off on one side.

BUMED-ECd-EX  
QW20/P6-1

9 Aug 1946

To: CO, U. S. Fleet Hospital 114, Navy 3149,  
c/o Fleet Post Office, San Francisco, California.

Subj: Identification from fingerprints in case of UNKNOWN,  
recovered at sea between islands of Manicani and Calicoan,  
P.I., on 2 Apr 1946 by USF LCT 1119 and interred USAF  
Cemetery, Leyte No. 1, Palo Leyte, P.I., Grave 8399.

Ref: Your speedletter 16 Apr 1946, NH60/P6-2 Classification  
No. 1411.

1. The fingerprints on NMS Form N and BNP Form 680, submitted with reference, have been checked by the Identification Section, BuPers, and by the Federal Bureau of Investigation, but identity could not be established.

By direction of the Chief, BuPers:

J. W. ROHRBACK  
Executive Civilian Assistant  
Administration Division

*Copy sent to  
C. G. ...  
7/9/46.*



7

U. S. FLEET HOSPITAL #114  
Samar, P. I.

NH60/A9-4  
GFB:lmv  
Serial 1322

8 April 46

**FROM:** Medical Officer in Command  
**TO :** Officer in Charge, Graves Registration Office, USAF  
Cemetery Leyte #1, P.I.

**SUBJECT:** Report of Burial (NavMed 601) and Report of Interment  
(WDQMS form 1042) inability to record fingerprints of  
unidentified body, report of:

1. Due to the badly decomposed condition of the unidentified body recovered at sea by the LST 1119 on 2 April 46 and brought to Fleet Hospital 114 for disposition, it was possible to obtain only enough fair prints which are being forwarded to the Navy Department, Washington, D. C. for the purpose of establishing identity.
2. Four Navy Certificates of Death containing an impression of the right index finger are being delivered to you.
3. Upon receipt of information from the Navy Department regarding whether or not identification of the remains has been established, all pertinent facts will be forwarded to you.

s/t G. F. BLODGETT  
Captain (MC) USN  
By direction.

A CERTIFIED TRUE COPY:

*Geoff G. Carter*  

---

GEOFF G CARTER, 1st Lt., USN



1/jcs

72 MM

1/ars  
1 ✓

Interred 21 March 1950  
L 11 125 Ft. McKinley  
*Carl H. Mark*  
CARL R. H. MARK

DISINTERMENT DIRECTIVE

Cemetery Superintendent  
SECTION A  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER  
7740 00444

DATE  
15 05 48  
DAY MONTH YEAR

NAME		SERIAL NUMBER	RANK	ARM	DATE OF DEATH
UNKNOWN		X-000491		0	
CEMETERY					DISPOSITION OF REMAINS
USAF CEMETERY LEYTE NO 1					0 7701 80 CODE DIST. PT.
PLOT	ROW	GRAVE	COUNTRY		CAUSE OF DEATH
		8399	PHILIPPINE ISLANDS		6

SECTION B — CONSIGNEE AND NEXT OF KIN

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

NAME AND ADDRESS OF NEXT OF KIN

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME		SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISTINTERRED
UNK X-491 UNK X-2337 (Maus)					27 Sept. 1948
IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY		
<input checked="" type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	UNKNOWN		JOSEPH W. GESUSE Embalmer NAME AND TITLE		

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
Shelter Half	Skeletal

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES /  
Two (2) Mausoleum Identification Tags - UNK X-2337

REMAINS PREPARED AND PLACED IN CASKET  
DATE 27 Sept. 1948 BY JOSEPH W. GESUSE

CASKET SEALED BY JOSEPH W. GESUSE EMBALMER (Signature) JOSEPH W. GESUSE

CASKET BOXED AND MARKED 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.

*JL*

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM	AGRS Mausoleum	TO	Fort McKinley Military Cemetery
KIND OF CONVEYANCE	Truck	NAME OF CONVOYER	
SIGNATURE OF SHIPPER		SIGNATURE OF RECEIVER	<i>W. R. Smith</i>
DATE		DATE	MAR 21 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	UNKNOWN	SIGNATURE OF RECEIVER	
DATE		DATE	

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	(BY AUTHORITY OF THE BOARD OF ADMINISTRATION) FORT MC KINLEY CEMETERY	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	

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
PHILCOM ZONE

APO 900

10 March 1950  
(Date)

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 491, Plot \_\_\_\_\_,  
Row \_\_\_\_\_, Grave 8399, USMC USAF Cem 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  
decedent, and that these remains should be classified as uniden-  
tifiable.

FOR THE COMMANDING OFFICER:

Incl:  
Form 1044

*H. B. McNEELAR*  
H. B. McNEELAR  
Captain, OMC  
Chief, Records Branch

Received 31 Mar 50 OMC  
Not identifiable from  
information presently  
available  
*M. Eustace*  
*Ident*

# IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-491, USAF Cem. <i>Leite Manila 72</i>				2. DATE OF REPORT 10 March 1950	
3. NAME OF CEMETERY <i>X-2337</i> AGRS MAUSOLEUM, MANILA, P. I.		4. PLOT HANGAR 802	5. ROW BAY A	6. GRAVE CRYPT 221	7. DATE OF DISINTERMENT REINTERMENT <b>STORAGE</b>

### PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT 5' 2 1/2"	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

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

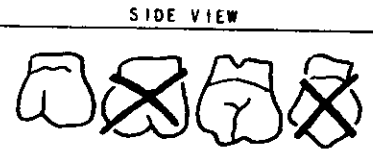
N O N E

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

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:



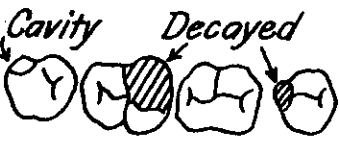
**BRIDGE WORK:** BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



**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:



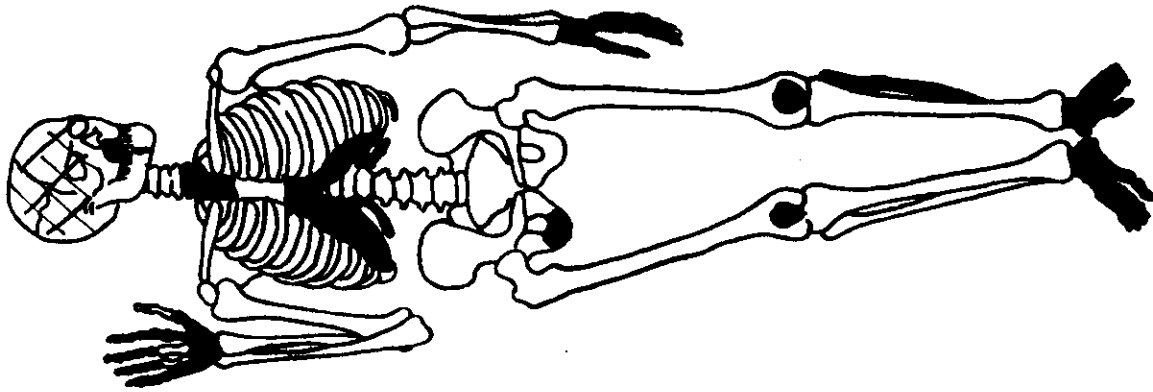
RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
			P		<i>Missing</i>										
Side View								Side View							
UPPER								UPPER							
LOWER								LOWER							
			P					P	P						
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

**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."

R-11 roots present only.  
Mandible fractured between R-11 and R-12.

*Paul R. Nichols*  
PAUL R. NICHOLS  
Chief, Identification Section

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 \_\_\_\_\_ DECEASETS BASED ON THE PRESENCE OF ONE OR MORE  
OF THE FOLLOWING ANATOMICAL PARTS: NUMBER

\_\_\_\_\_  
SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

No I.D. tags, burial bottle, personal effects, or other means of identification found with remains.

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



CERTIFICATE OF DEATH

From: Medical Officer in Command, U.S. Fleet Hospital #114, Navy 3149

To: Bureau of Medicine and Surgery, Navy Department, Washington, D. C.  
(See Circular Letter R-6, Appendix D, Manual of the Medical Department, for instructions)

1. Name UNIDENTIFIED BODY Rank or rate Unknown

2. Born: Place Unknown Date Unknown

3. Nationality Unknown Religion Unknown  
(White—U. S., Colored, Samoan, etc.) (Denomination)

4. Eyes Unknown Hair Black Complexion Unknown Height 62½ Weight 130 (approx.)

5. Marks, scars, etc. (noted in health record) \_\_\_\_\_

FINGERPRINT



State which finger Rt. Index  
(Right index preferred)

6. Relation, name and address of next of kin or friend Unknown

7. Original admission: Place \_\_\_\_\_ Date \_\_\_\_\_  
(Ship or station to which attached when first admitted to sick list)

8. Died: Place Unknown Date 3-28-46 Approx Hour \_\_\_\_\_

9. Cause of death: Principal FRACTURE SKULL Key Letter \_\_\_\_\_  
Contributory \_\_\_\_\_

10. Death \_\_\_\_\_ the result of own misconduct and \_\_\_\_\_ in the line of duty.  
(Is or is not) (Is or is not)

11. Disposition of remains Forwarded to U.S.A.F. Cemetery Leyte No.1, Palo, Leyte, Philippine Islands for burial.

12. Summary of facts relative to the death: This body was found floating in the water between Manicaní Island, P.I. and Calicoan Island, P.I. by L.C.T. 1119, picked up and brought to Fleet Hospital 114 for disposition.

The body is that of a male about 62½ in. tall and weighing approximately 130 lbs; approximate age 20 to 30 years. There is a strong odor of putrefaction present with remarked decay of the tissues. The body is apparently that of a white person. The remains of the hair shows it to be black. The eyebrows, eyes, nose, part of the maxilla and mandible are missing. He is wearing a white Navy type jumper with a black stripe around the rt. sleeve at the shoulder. There is a blue undershirt and blue dungarees made into shorts cut off just below the pockets. The trousers are held up

Incl

by a rubber band. There are no shoes and the soles of the feet are smooth. There is a bracelet, made to carry a wrist watch, on the left arm with a piece of glass held in place by rubber bands. The glass fits into the place for the watch. On one side of this bracelet "Solomon Islands" and U S NAVY are stamped with a die set. Some numbers have been ground off one side. Around his neck he had a small ball-type chain commonly used for dog tags but it only has a mother of pearl heart shaped pendant. On the underside, at the bottom of the jumper, put on with a stensil in 3/4 inch letters, is the name NEUBAUER, L. K. 218. The pockets are empty and there are no other marks of identity in the clothes. There are no scars or marks on the skin discernable. There is a laceration 7.5 cm. long at the top of the head which has the appearance of having been made by a dull instrument. There is a 1.5 cm. round hole about 4 cm. toward the occiput from the laceration. There is a fracture of the right ramus of the mandible and another fracture right side of the mandible through the region of the canine tooth.

Upon incision of the scalp in the routine incision for making exposure of the skull there is found a large subgaleal hematoma starting at the area of laceration and extending just behind the right ear. On stripping the galea from the cranium a depressed fracture is seen just posterior to the ear. There is a separation fracture from the site of depression fracture along the right tempo-parietal suture extending forward to the frontal bone. The rest of the body was so badly decomposed that it was felt that further examination of the remains would not give us further information.

ANATOMIC DIAGNOSIS

1. Fracture of skull.
2. Putrefaction of tissues.
3. Laceration of scalp.

Approved: *Abraham B. Blum*  
 Medical Officer

*A. B. CURRY ELLISON*  
 Medical Officer

*Sheldon E. Brown*  
 (Commanding Officer)

*LTJG (S)*  
 (Rank)

*M.C. U.S. Navy. R.*  
 (Will or will not) be held.

*(M.C.) U.S. Navy. R.*  
 (Rank)

104

CERTIFICATE OF DEATH

8

From: **Medical Officer in Command, U.S. Fleet Hospital #114, Navy 3149**

To: *Bureau of Medicine and Surgery, Navy Department, Washington, D. C.*  
(See Circular Letter R-6, Appendix D, Manual of the Medical Department, for instructions)

1. Name **UNIDENTIFIED BODY** Rank or rate **Unknown**  
 2. Born: Place **Unknown** Date **Unknown**  
 3. Nationality **Unknown** Religion **Unknown**  
(White—U. S., Colored, Samoan, etc.) (Denomination)  
 4. Eyes **Unknown** Hair **Black** Complexion **Unknown** Height **62½** Weight **130 (approx.)**  
 5. Marks, scars, etc. (noted in health record).....

FINGERPRINT



State which finger **Rt. Index**  
(Right index preferred)

6. Relation, name and address of next of kin or friend **Unknown**

7. Original admission: Place \_\_\_\_\_ Date \_\_\_\_\_  
(Ship or station to which attached when first admitted to sick list)

8. Died: Place **Unknown** Date **3-28-46** Hour **Approx.**

9. Cause of death { Principal **FRACTURE SKULL** Key Letter \_\_\_\_\_  
 Contributory \_\_\_\_\_

10. Death \_\_\_\_\_ the result of own misconduct and \_\_\_\_\_ in the line of duty.  
(Is or is not) (Is or is not)

11. Disposition of remains **Forwarded to U.S.A.F. Cemetery Leyte No. 1, Palo, Leyte, Philippine Islands for burial.**

12. Summary of facts relative to the death: **This body was found floating in the water between Mariani Island, P.I. and Calicoan Island, P.I. by L.C.T. 1119, picked up and brought to Fleet Hospital 114 for disposition.**

The body is that of a male about 62½ in. tall and weighing approximately 130 lbs; approximate age 20 to 30 years. There is a strong odor of putrefaction present with remarked decay of the tissues. The body is apparently that of a white person. The remains of the hair show it to be black. The eyebrows, eyes, nose, part of the maxilla and mandible are missing. He is wearing a white Navy type jumper with a black stripe around the rt. sleeve at the shoulder. There is a blue undershirt and blue dungarees made into shorts cut off just below the pockets. The trousers are held up

U. S. Navy, (Rank) (Commanding officer)

Approved: Court of inquiry or board of investigation (Will or will not) be held. A. B. CONNELL (Rank) (S) M. O., U. S. Navy. (Officer)

- 1. Fracture of skull.
- 2. Fracture of tibiae.
- 3. Location of scalp.

ANATOMIC DIAGNOSIS

Upon isolation of the scalp in the routine incision for making exposure of the skull there is found a large subgaleal hematoma starting at the area of laceration and extending just behind the right ear. On stripping the galea from the cranium a depressed fracture is seen just posterior to the ear. There is a separation fracture from the site of depression fracture along the right tempo-parietal suture extending forward to the frontal bone.

The rest of the body was so badly decomposed that it was felt that further examination of the remains would not give us further information.

There are no shoes and the soles of the feet are smooth. There is a parcel, made to carry a wrist watch, on the left arm with a piece of glass held in place by rubber bands. The glass fits into the place for the watch. On one side of this parcel "Solomon Islands" and "U S NAVY" are stamped with a die set. Some numbers have been ground off one side. Around his neck he had a small ball-type chain commonly used for dog tags but it only has a rather of pearl heart shaped pendant.

On the underside, at the bottom of the jumper, put on with a strand in 3/4 inch letters, is the name "KROEMER, L. K. 218". The pockets are empty and there are no other marks of identity in the clothes. There are no scars or marks on the skin discernible.

There is a laceration 7.5 cm. long at the top of the head which has the appearance of having been made by a dull instrument. There is a 1.5 cm. round hole about 4 cm. toward the occiput from the laceration. There is a fracture of the right ramus of the mandible and another fracture right side of the mandible through the region of the canine teeth.

Upon isolation of the scalp in the routine incision for making exposure of the skull there is found a large subgaleal hematoma starting at the area of laceration and extending just behind the right ear. On stripping the galea from the cranium a depressed fracture is seen just posterior to the ear. There is a separation fracture from the site of depression fracture along the right tempo-parietal suture extending forward to the frontal bone.

9A

(Surname of recruit.)

(Christian name in full)

Race, .....; height, ..... ins.

Date of birth, .....

Record made by .....

(Signature of medical officer.)

Surgeon, U. S. A.

Enlisted ..... 19.....

At .....

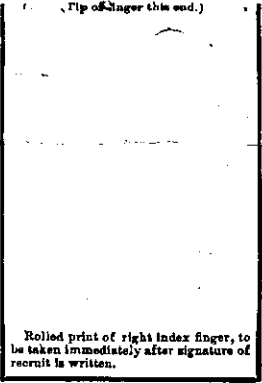
Rating, .....

Previous naval service, ..... years.

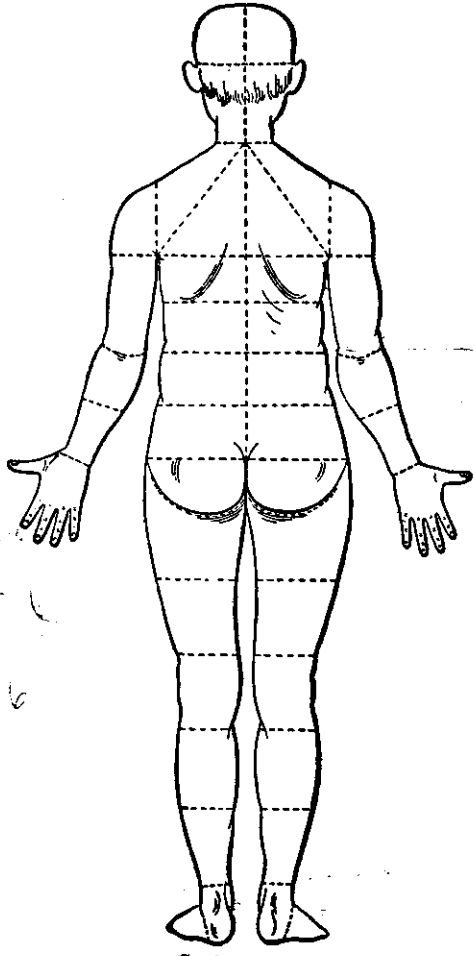
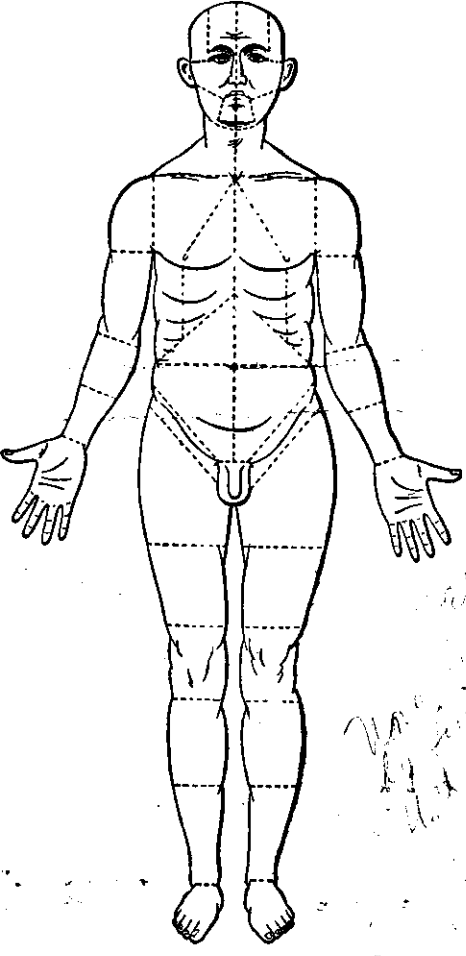
Compared with enlistment record and forwarded.

(Signature of recruiting officer.)

U. S. A.



(Signature of recruit.)



Handwritten notes in the center of the page, including a date '8/15/46' and some illegible text.

RIGHT HAND.

1. Thumb. ✓	2. Index. ✓	3. Middle. ✓	4. Ring. ✓	5. Little. ✓

LEFT HAND.

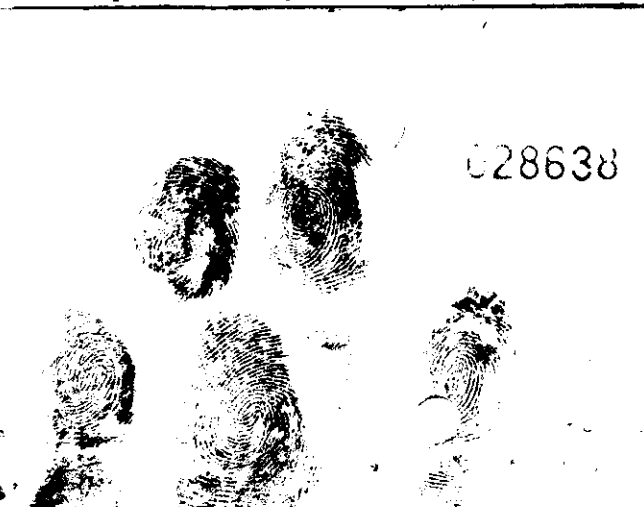
6. Thumb. ✓	7. Index. ✓	8. Middle. ✓	9. Ring. ✓	10. Little. ✓

LEFT HAND.

Plain impression of the four fingers taken simultaneously and of the thumb.

RIGHT HAND.

Plain impression of the four fingers taken simultaneously and of the thumb.



X-2337

# 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.

UNKNOWN X-2337 (Formerly UNK X-491  
USAF Cem Leyte #1, P.I.)

1 Dec 47

Unknown

DATE  
Unknown

LAST NAME

FIRST

INITIAL

RANK

SERIAL NO.

Unknown

Unknown

In water between Mt Manicani, AGRS Mausoleum,  
and Calicoan Is, P.I. Manila, P.I.

ORGANIZATION

802

A

221

PLACE OF DEATH

PLACE OF BURIAL

PLOT

ROW

GRAVE NO.

STORAGE

*Maxilla missing*

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

*Maxilla fractured*

INSIDE LOOKING OUT

*Chipped crown*

RIGHT								LOWER TEETH				LEFT							
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16				
			<i>⊗</i>				<i>⊗</i>	<i>⊗</i>											
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		OCCUSAL (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)

*broken only root left*

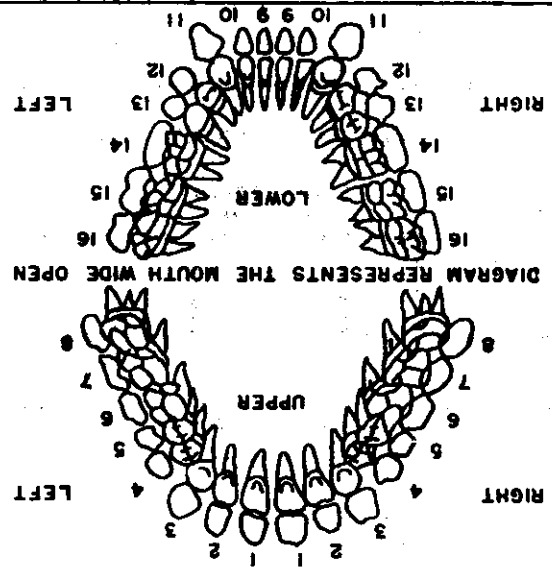
**INSTRUCTIONS:**

1. **ACCURACY AND ATTENTION TO DETAIL** IN THE PREPARATION OF THIS CHART ARE OF PARAMOUNT IMPORTANCE, IF SAME IS TO BE OF MAXIMUM VALUE.

2. **NOTE CAREFULLY THAT:** SYMBOLS INDICATING MISSING TEETH, CAVITIES AND BRIDGE-WORK ARE TO BE INSERTED IN **WHOLE BOX;** SYMBOLS INDICATING TYPE OF FILLING ARE TO BE INSERTED IN **UPPER HALF OF BOX;** AND SYMBOLS INDICATING LOCATION OF FILLING ARE TO BE INSERTED IN **LOWER HALF OF BOX.**

3. ANY ABNORMALITIES SUCH AS MALPOSED, MALFORMED OR DISCOLORED TEETH, ETC. SHOULD BE NOTED. DENTAL WORK NOT COVERED ABOVE WILL BE INDICATED, e.g., PORCELAIN CROWNS, GOLD CROWNS (FULL OR 3/4), 3/4 GOLD CROWN WITH SILICATE WINDOW.

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



**REMARKS:**

Mandible fractured between R 11 & R 12.

/s/ Forrest G. Braden

SIGNATURE OF PERSON WHO PREPARED CHART

/p/ FORREST G. BRADEN Embalmer Sr.

NAME AND RANK TYPED OR PRINTED

CIP, Laboratory, Manila, P.I.

PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

DATE

1 Dec 47

NAME AND RANK TYPED OR PRINTED

/p/ JOHN H. BENNETT JR.

VERIFIED BY GRS OFFICER

/s/ John H. Bennett Jr.

CERTIFIED TRUE COPY:

G. I. CAMBOA  
2d Lt., MAC

*[Handwritten signature]*



## IDENTIFICATION CHECK LIST

(To be completely filled out and attached to each copy  
 of Report of Interment WD QMC Form 1042)

(Formerly UNK X-491  
 (USAF Leyte #1,  
 (P.I.

Unknown X - 2337 \_\_\_\_\_  
 Cemetery AGRS Mausoleum, Manila, P.I.  
 Plot 802 RANGER A BAY CHUR Grave 221

AGRS CIP, Mausoleum, Manila, P.I.

1. Arrived at ~~AGRS CIP~~ 1 Dec 47  
In water (off) between Manicani  
 2. Place of death and Calicoan Is, P.I.  
(Name of closest town)

(Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3. Remains ~~recovered~~ disinterred by 583rd QM AGRS  
(Name and organization)
4. Evacuated to Cemetery by \_\_\_\_\_  
(Name and organization)
5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

Item	Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear	/		
	(Type)		
Raincoat	/		
Overcoat	/		
Jacket, Field	/		
Jacket, Combat	/		
Mackinaw	/		
Sweater	/		
Jacket, HBT	/		
* Shirt, Wool OD	/		
Undershirt, Wool	/		
Undershirt, Cotton	/		
Trousers, HBT	/		
* Trousers, Wool OD	/		

Belt, web .....  
 Drawers, wool .....  
 Drawers, cotton .....  
 Leggings, wool .....  
 Socks, cotton .....  
 \* Shoes ..... (type) N  
 Overshoes ..... O  
 Web Equipment ..... N (type)  
 (Other item) .....  
 (Other item) .....  
 \* If body is nude, sizes of these items should be computed by measuring the remains  
 Chevrons or Insignia ..... (Type & location; shirt, jacket, coat, helmet)  
 Shoulder Patch .....  
 Does clothing indicate that deceased was a member of the Air, Ground or Naval Force?

6. Description of Remains: Skeleton only. Skeletal chart attached.

Age ..... Est. Height 5' 2 $\frac{1}{2}$ " Est. Weight 130 Description of wounds .....  
 Bandages or dressings ..... Scars ..... (Length, width, location)  
 ..... Tattoos (Number, location — illustrate on separate page)  
 Outstanding moles, warts or birthmarks ..... (Yes-no; description, location)  
 Sunburn or tan, other than hand and face .....  
 Complexion ..... U (Light, medium, dark, clear, pimples, pocks, freckles)  
 Build ..... D (Large, fat, thin, muscular)  
 Hair ..... (Color, length, quantity, curly, wavy, straight, whorls, or definite parting)  
 Hair ..... (Baldness, widow's peak, distinctive cutting or other characteristics)  
 Sideburns ..... Mustache ..... Beard or ..... (Color, setting, shape) (Color, size, shape) (Length, heavy)

Goatee ..... (Light, color, extent)

Eyes ..... (Color, setting, shape)      Eyebrows ..... (Color, bushiness, extent across nose)

Nose ..... (Size, shape, straight)      Ears ..... (Size, set close to or far from head)

Mouth ..... (Large, medium, small)      Lips ..... (Small, large, full)

Teeth ..... **Tooth chart attached.**  
 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin ..... (Prominent, receding, pointed, dimples, double)

Jaw ..... (Large, small, normal)      Circumference of head in inches ..... **Skull fragments.**  
 (Hat band)

Neck ..... (Size, length, short, normal, wrinkled)      Larynx ..... (Prominent, normal)

Shoulders ..... (Broad, straight, small, rounded)      Arms ..... (Length, muscular, color, extent and quantity of hair)

Hands .....  
 Fingers ..... (Short, thick, long, slender, size of knuckles, missing fingers or joints)  
 (Unusual characteristics of fingernails)

Chest ..... (Size of nipples, color, quantity and extent of hair, large, small, normal)

Waist ..... (Size of navel, appendectomy, amount, quantity, and color of hair)

Back ..... (Quantity and extent of hair)      Circumcision ..... (Yes-no)      Pubic Hair ..... (Color)

Hernioplasty ..... (Yes-no; location)      U  
 T  
 D

Legs ..... (Muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

Feet ..... (Size, corns, callouses, flat)      Toes ..... (Slender, straight, crooked, overlap)

Evidence of healed fractures ..... (Nose, arms, legs, etc.)

NOTE: Use attached charts "A" and "B" to indicate parts not received.

7. Have finger prints been placed on Report of Interment? No  
(Yes-no)

If not, explain Due to condition of remains.

8. Has tooth chart been prepared? Yes If not, explain \_\_\_\_\_  
(Yes-no)

9. Remarks No ROI bottle nor I. D. tags found with remains. No personal  
effects found nor any other means of identification. Weight of remains  
is about 6 lbs.

I certify that I have personally viewed the remains of subject deceased and all resulting information has been recorded to the best of my knowledge.

CERTIFIED TRUE COPY:

*G. T. Gamboa*  
G. T. GAMBOA  
2d Lt., MAC

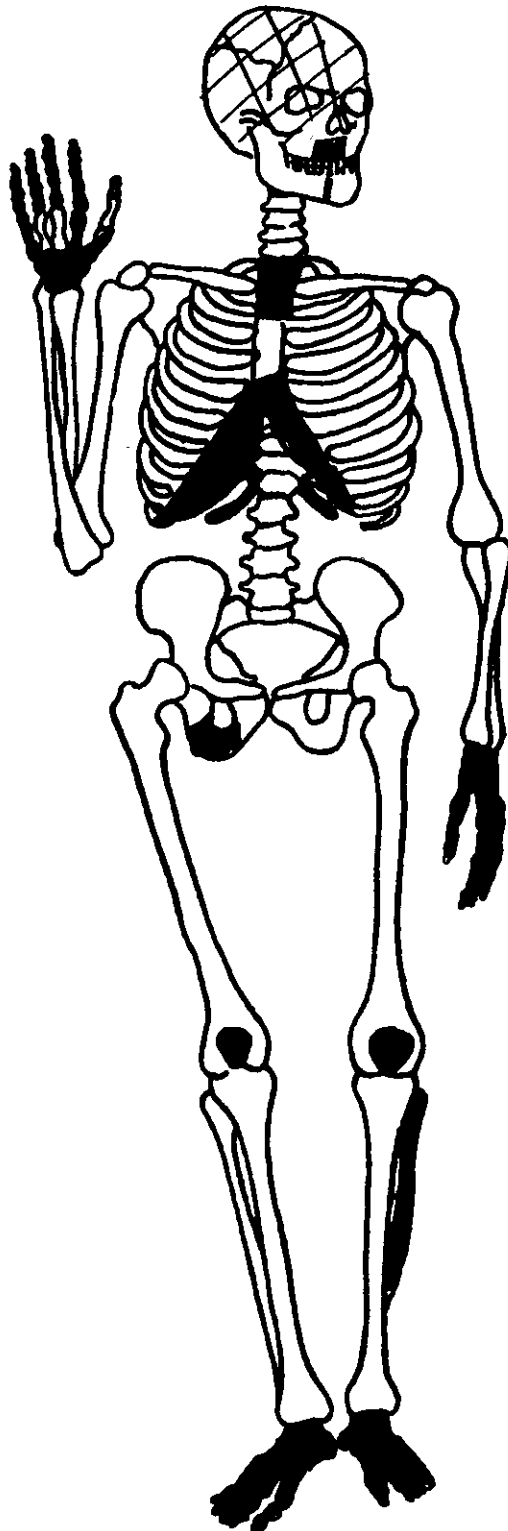
/s/ Forrest G. Braden  
(Officer's Name)  
Embalmer Senior C-064971  
Rank Service  
CIP, Laboratory, Manila, P.I.  
(Organization)

1 Dec 47

SKELETAL CHART

X-2337

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



Received  
22 Ribs,  
5 Cervical  
11 Thoracic } Vertebrae  
5 Lumbar }

*AMS*  
CHART "A"

REPORT OF DISINTERMENT FOR IDENTIFICATION

15 October 1947

1. Remains of (Name)

WINDO, K-491

Serial Number

-

Grade

-

Organization

-

Name, Number and Location of Cemetery

Windsor Cemetery, Lehigh, Pa.

Plot

Row

Grave No.

1390

2. Date of Disinterment

15 October 1947

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

Original was in type "0" box of wood. Box was in good condition and  
contents enclosed with ... in ... of ...  
shell was ... Identifying ... of ... and ... of ...  
no facial features were seen ...

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

On Marker tag

On Remains

On Remains tag

What Identification Used Upon Reinterment: On Marker

On Marker tag

On Remains

On Remains tag

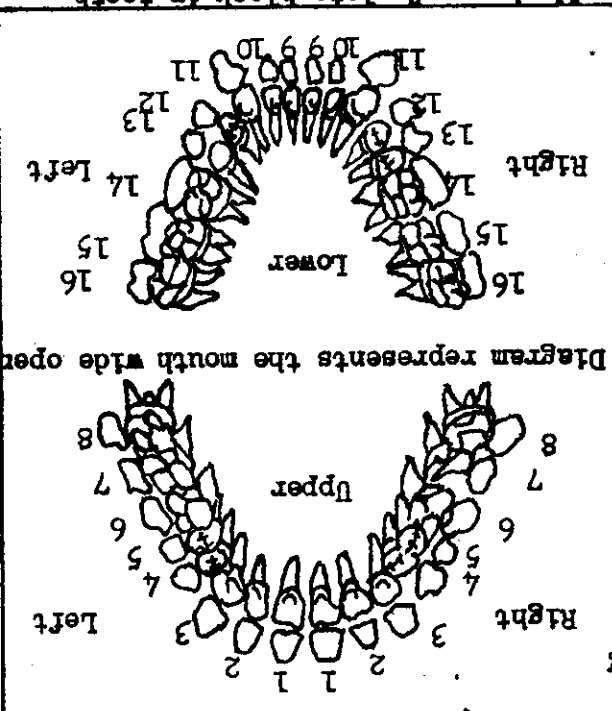
5. Signature of Officer Supervising Disinterment and Reinterment.

Paul R. Nichols

1st Lt. Nichols, USAF

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 (grinding teeth). An examination should be made and findings charted to cover the following basic conditions: lost teeth, crowned teeth, dentures (plates), and any deformity of jaws found. (cavities of decay), dentures (plates), and any deformity of jaws found.



Missing Teeth  
Tooth Missing  
Tooth Missing

Crowned Teeth  
Gold Crown, Porcelain Crown  
Gold Crown, Porcelain Crown

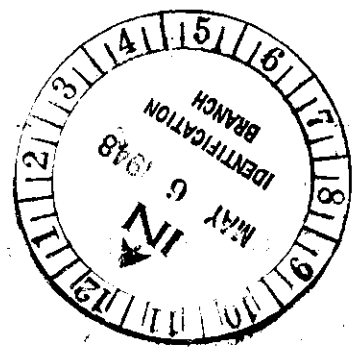
Bridgework  
Gold & Porcelain Bridge  
Gold Bridge

Fillings  
Silver Filling, Gold 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



MAY 6 1948

RESTRICTED

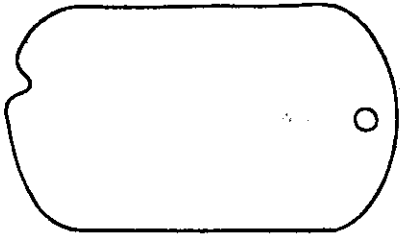

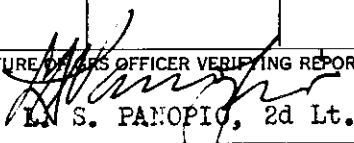
U 3749

WD QMC FORM 1042  
(Rev. 1 Apr. 1946)  
(Supersedes GRS Form 1)REPORT OF INTERMENT  
(AR 30-1810 and AR 30-1815)

STORAGE

DATE OF REPORT

13 Dec 47

Imprint Identification Tag If Possible. DO NOT TYPE		Section 1.—IDENTIFICATION.		SERIAL NO.		
		NAME (Last, first, middle initial) UNKNOWN X-2337 (Formerly UNK X-491 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 In water between Manicani, and Calicoan Is, P.I.		CAUSE OF DEATH Skull Fracture		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)- (Unknown Tags)						
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.						
DATE OF BURIAL STORAGE 2 Dec 47	HOUR 1000	BURIED IN (Shroud, blanket, or name of other) STORED Casket	TYPE OF GRAVE MARKER None	PLOT No. 802	ROW No. A	GRAVE No. 221
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 Leyte #1, P.I.			PLOT No.	ROW No.	GRAVE No. 8399
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) STORED UNKNOWN X-2339	RANK	SERIAL NO.	ORGANIZATION	GRAVE No. CRYPT 223		
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED UNKNOWN X-2335	RANK	SERIAL NO.	ORGANIZATION	GRAVE No. CRYPT 219		
SIGNATURE OF PERSON PREPARING REPORT  R. R. ACIERIO, PVT.			SIGNATURE OF GRS OFFICER VERIFYING REPORT  LT. 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

Incl 815



**RESTRICTED**

**Section 2.— UNIDENTIFIED REMAINS.**

**INSTRUCTIONS:**


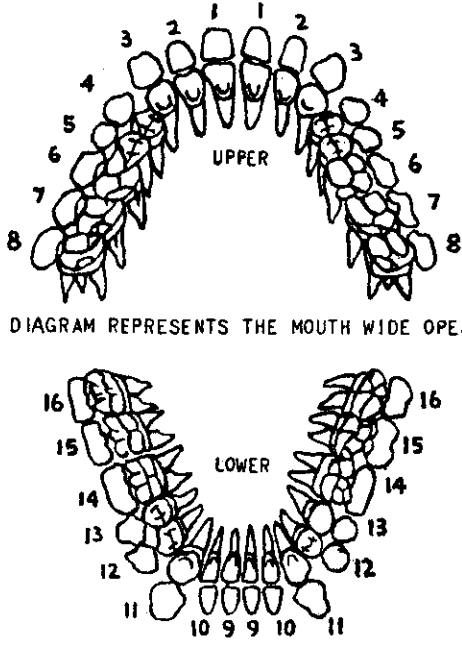




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers 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.

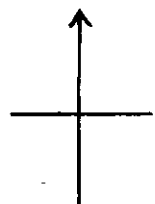
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
62 1/2"	130		Black	
WEAPON AND SERIAL No.		LAUNDRY MARKS		WHERE BODY WAS BURIED OR FOUND

**OTHER IDENTIFICATION CLUES**

Name "NEUBAUER, L. K. 218" on Jumper that man was wearing.  
 Chain with mother of pearl heart attached around neck.  
 Watch with "Solomon Islands" and "U S Navy" stamped with die set.  
 Blue shorts.

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

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

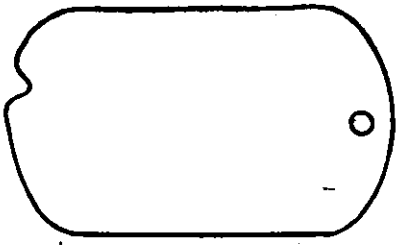


**REMARKS:**

Identification Check List and Dental Chart accomplished.

3 FEB 1948

<b>WD CMC FORM 1042</b> (Rev. 1 Apr. 1948) (Supersedes GRS Form 1)	<b>REPORT OF INTERMENT</b> (AR 30-1810 and AR 30-1815)	DATE OF REPORT <p style="text-align: center; font-size: 1.2em;">9 April 46</p>
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<i>Imprint Identification Tag If Possible. DO NOT TYPE</i> 	<b>Section 1.—IDENTIFICATION.</b>		
	NAME ( <i>Last, first, middle initial</i> )		SERIAL No.
	<b>UNKNOWN X-491</b>		<b>Unknown</b>
	GRADE	ORGANIZATION	BRANCH OF SERVICE
-	-	-	
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	
-	-		

PLACE OF DEATH <b>In water between Manicani &amp; Calicoan Is, P.I.</b>	CAUSE OF DEATH <b>Skull Fracture</b>	DATE OF DEATH <b>Unknown</b>
---	---	---------------------------------

EMERGENCY ADDRESSEE (*Name, relationship, and address*)

IDENTIFICATION TAGS FOUND ON BODY ( <i>1, 2, or none</i> )	IF NO TAGS FOUND ON BODY DESCRIBE MEANS OF IDENTIFICATION ( <i>If unidentified, fill in section 3 on reverse</i> )
<b>None</b>	<b>See attached correspondence</b>
WERE SUBSTITUTE TAGS PROVIDED? ( <i>Yes or no</i> )	
<b>Yes</b>	

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	HOUR	BURIED IN ( <i>Shroud, blanket, or name of other</i> )	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
<b>9 April 46</b>	<b>1430</b>	<b>"C" Type casket</b>	<b>Reg Cross</b>			<b>8399</b>

WAS THIS A REBURIAL? ( <i>Yes or no</i> )	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE		
<b>No</b>			
	PLOT No.	ROW No.	GRAVE No.

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
<b>Protestant</b>	<b>E. Brown, Capt, ChC, Base K</b>	
	<b>Catholic: John G Wise, Capt, ChC, Base K</b>	

IDENTIFICATION TAG BURIED WITH BODY ( <i>Yes or no</i> )	IDENTIFICATION TAG ATTACHED TO MARKER ( <i>Yes or no</i> )
<b>Yes</b>	<b>Yes</b>

BODY BURIED ON DECEASED LEFT. NAME ( <i>Last, first, middle initial</i> )	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
<b>Stephen, Bernie</b>				<b>8398</b>

BODY BURIED ON DECEASED RIGHT. NAME ( <i>Last, first, middle initial</i> )	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
<b>No grave opened this date.</b>				

SIGNATURE OF PERSON PREPARING REPORT <i>Charles W. Hallock</i> <b>S/Sgt Charles W. Hallock, GRS</b>	SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>Cecil G. Carter</i> <b>CECIL G CARTER, 1st Lt., CMC</b>
---	--

**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.

FA

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
62½"	130	Unk	Black	-

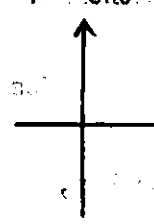
WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
		In water between Maricani and Calicoan Islands, P.I.

OTHER IDENTIFICATION CLUES

Name "NEWBAUER" on Jumper that man was wearing.  
Chain with Pearl heart attached around neck  
Watch with "Solomon Islands" on metal watch strap  
Blue shorts

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

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



REMARKS:

Fingerprinting impossible due to condition of body on arrival at this base from Navy Hospital 114. Navy form "N" is attached with the print of the Right Index finger.

MAY 1946

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