

HEADQUARTERS
PHILIPPINES COMMAND
UNITED STATES ARMY

GSCR 293.8
Unknown X-B3922

APO 707

18 MAR 1949

SUBJECT: Disinterment Directive - Cancellation

13 Unknown X-B3922 (Manila #2)

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

Returned herewith, for cancellation, is Disinterment Directive No. 7747 02696 for Unknown X-B3922 formerly interred in USAF Cemetery Manila No. 2, Plot 4, Row 23, Grave 3911. Subject remains have been designated CIL No. 233 by this Headquarters.

FOR THE COMMANDING GENERAL:

John A. Marszal
JOHN A. MARSZAL
1st Lt., AGD
Medical Officer

1 Incl:
DD #7747 02696 (1-3)

wd. @

943 Unknown X-B3922 Manila #2

sent to [unclear]

HEADQUARTERS
PHILIPPINES COMMAND
UNITED STATES ARMY

OSGR 293

APO 707

SUBJECT: Assignment of CIL Numbers

15 MAR 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 OSGR 293, dated 2 April 1948, subject: Disinterment Discrepancies, the following Unknowns, presently stored at AGRS Mausoleum, Manila, P. I., have been assigned CIL numbers as indicated below:

- a. Unknown X-983 (formerly Unknown X-3922-B, USAF Cemetery Manila #2), assigned CIL #233.
- b. Unknown X-4784-B (formerly Unknown X-1735, USAF Cemetery Manila #2), assigned CIL #243.
- c. Unknown X-3365-B (formerly Unknown X-153, USAF Cemetery Manila #2), assigned CIL #244.
- d. Unknown X-3662-B (formerly Unknown X-67, USAF Cemetery Leyte #1), assigned CIL #245.
- e. Unknown X-4718-B (formerly Unknown X-1654, USAF Cemetery Manila #2), assigned CIL #246.
- f. Unknown X-1069 (formerly Unknown X-3838, USAF Cemetery Manila #2), assigned CIL #247.

2. It is requested that all pertinent records your office be amended to indicate that the above-mentioned Unknowns have been assigned CIL numbers.

FOR THE COMMANDING GENERAL:

/s/ Frank O. Calohan, Jr.

FRANK O. CALOHAN, JR.
C W O USA
Asst Adj Gen

CMB LH

DISINTERMENT DIRECTIVE

6

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7747 02090

DATE
DAY MONTH YEAR
15 06 48

NAME
43 unk x 39 22 UNKNOWN

SERIAL NUMBER
003922

RANK

ARM
0
DATE OF DEATH
DAY MONTH YEAR

CEMETERY
USAF CEMETERY MANILA NO 2

DISPOSITION OF REMAINS
7701
CODE

PLOT
4

ROW GRAVE COUNTRY
23 2011 PHILIPPINE ISLANDS

CAUSE OF DEATH
6

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
**FORT MCKINLEY CEMETERY
MANILA, PHILIPPINE ISLANDS**

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

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISTINTERRED
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	ORGANIZATION UNKNOWN	RELIGION	IDENTIFICATION VERIFIED BY NAME AND TITLE	

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
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OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES *1*

REMAINS PREPARED AND PLACED IN GASKET

DATE	BY	EMBALMER (Signature)
------	----	----------------------

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
-------------------------	------------------------------

DATE BY

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

SIGNATURE OF GRS INSPECTOR

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

IDENTIFICATION CHECK LIST

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

Unknown X 3922-B
 Cemetery USAF Cem. Manila No. 2
 Plot 4 Row 23 Grave 2911

1. Arrived at cemetery 24 May 47
(Hour) (Date)
 2. Place of death Peleliu Island
(Name of closest town) Old X-160, USAF Cem. Peleliu
(Coordinates and letter Prefix, maps)
No. 1 G-174 R-12 P-4

(Sheet, scale and serials used)

3. Remains recovered or disinterred by 609th Graves Reg. Co.
(Name and organization)

4. Evacuated to Cemetery by 9122nd Ser. Det.
(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)
 Overshoes
 Web Equipment (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 Height Weight 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 (light, medium, dark, clear, pimples, pocks, freckles)
 Build (Large, fat, thin, muscular)
 Hair (Color, length, quantity, curly, wavy, straight, whorls, or definite parting)
 Hair (Baldness, widows 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 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw (Large, small, normal) Circumference of head in inches (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 (Unusual characteristics of fingernails)

Fingers (Short, thick, long, slender, size of knuckles, missing fingers or joints)

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)

Legs (Inseam, 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? No If not, explain No Skull
(Yes-no)

9. Remarks In processing extra bones were found with Old X-160, of
USAF Cem. Peleliu No.1. See X-3922-A.

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.



ANDRE J. ROBSON
(Officer's Name)

Capt. QMC
Rank Service

CLL, AGRS, FEZ, APO 707
(Organization)

SKELETAL CHART

X-3522-13

(BLACK OUT PARTS OF BODY ~~RECEIVED~~ RECEIVED AT CEMETERY)

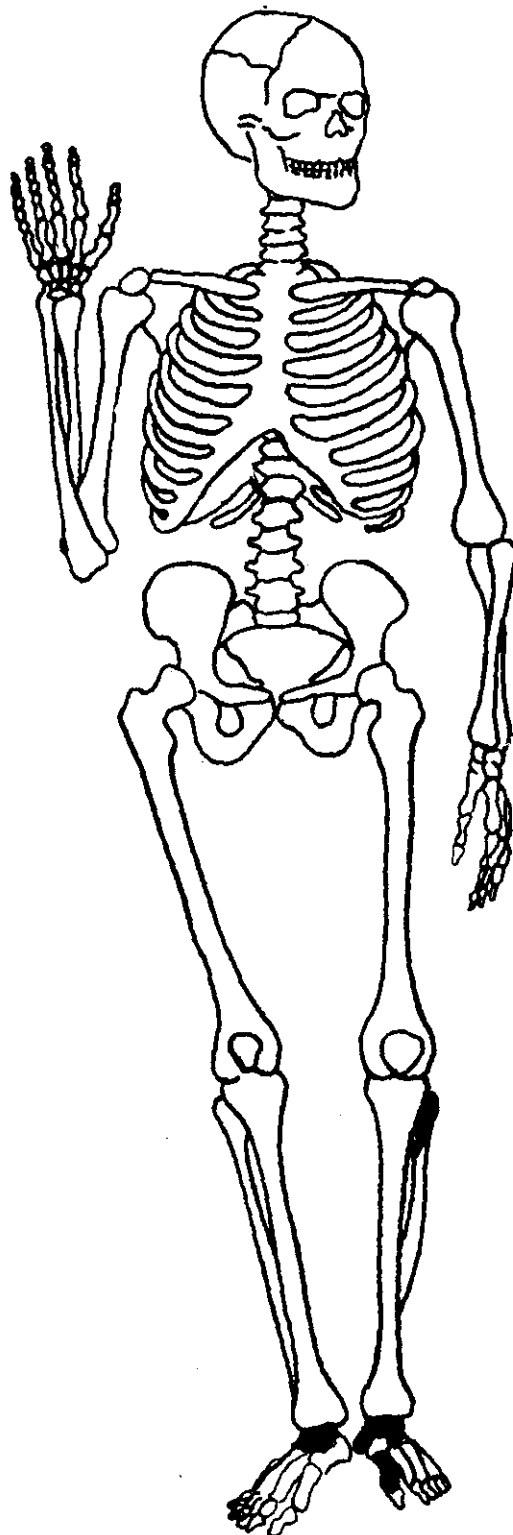


CHART "A"

RESTRICTED

U 1161

AC FORM 10
1 Apr. 1946
idem GRS Form 1

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

DATE OF REPORT

18 Nov. '47

Print Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)
UNKNOWN X-983 (Formerly Unknown X-3922-B,
USAF Cemetery Manila # 2)

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
Peleliu Island,
Palau Group

CAUSE OF DEATH
K.I.A.

DATE OF DEATH
28 Sept. '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)

Cancelled
See Remarks
23 15-41

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

DATE OF BURIAL STORAGE	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
20 Oct. '47	1300	Casket	None	812	C	845

WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE	PLOT No.	ROW No.	GRAVE No.
Yes	USAF Cemetery Manila # 2, Inzon, P.I.	4	23	2911

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

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

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
UNKNOWN X-966				CRYP 847

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
UNKNOWN X-953				CRYP 843

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
<i>Ricardo R. Acierro</i> RICARDO R. ACIERRO, Pvt.	<i>D. D. Hines</i> D. D. HINES, 2nd Lt., OMC

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

Incl. 593

RESTRICTED

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U 1181

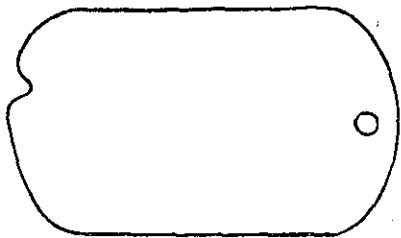
WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

21 Aug 47

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN X-3922-3 (Formerly UNK X-160, USAF Cemetery Peleliu #1)		SERIAL No.
GRADE	ORGANIZATION	BRANCH OF SERVICE
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH Peleliu Island, Palau Group	CAUSE OF DEATH MIA	DATE OF DEATH 23 Sept 44
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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) See Remarks
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (2)	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

None

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY
USAF Cemetery Manila #2, Luzon, P. I.

DATE OF BURIAL 3 July 47	HOUR 0900	BURIED IN (Shroud, blanket, or name of other) Shelter Half	TYPE OF GRAVE MARKER Cross	PLOT No. 4	ROW No. 23	GRAVE No. 2911
WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE Disinterred from USAF Cemetery Peleliu #1, Peleliu Island, Palau Group			PLOT No. 4	ROW No. 12	GRAVE No. 174
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-3922	RANK	SERIAL No.	ORGANIZATION	GRAVE No. 2910		
BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial) UNKNOWN X-3923	RANK	SERIAL No.	ORGANIZATION	GRAVE No. 2912		
SIGNATURE OF PERSON PREPARING REPORT AL S PADAWIAG, SGT, GRS			SIGNATURE OF GRS OFFICER VERIFYING REPORT WARD C STEPHENSON, 1ST LT., QMC			

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

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