

HEADQUARTERS
PHILIPPINES COMMAND
UNITED STATES ARMY

AGO 707
9 MAY 1949

OSGR 293.5

SUBJECT: Assignment of CIL Numbers

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 AGNS Mausoleum, Manila,
P.I., have been assigned CIL Numbers as indicated below:

a. Unknown X-3900-B (formerly Unknown X-1156, USAF
Cemetery Manila #2), assigned CIL #249.

b. Unknown X-3813 (S & R Evacuation No. 1-D-12-B),
assigned CIL #256.

c. Unknown X-4333 (S & R Evacuation No. 1-9-1-21),
assigned CIL #267.

d. Unknown X-1677 (formerly Unknown X-3438, USAF
Cemetery Manila #2), assigned CIL #268.

e. Unknown X-225, AGNS Mausoleum, Manila, P.I.,
assigned CIL #269.

f. Unknown X-959 (formerly Unknown X-4016, USAF
Cemetery Manila #2), assigned CIL #267.

g. Unknown X-1410 (formerly Unknown X-3975-G, USAF
Cemetery Finschhafen #2), assigned CIL #281.

h. Unknown X-3842-B (formerly Unknown X-163, USAF
Cemetery Finschhafen #2), assigned CIL #282.

i. Unknown X-3842-C (formerly Unknown X-163, USAF
Cemetery Finschhafen #2), assigned CIL #283.

j. Unknown X-1392 (formerly Unknown X-3985-B, USAF
Cemetery Manila #2), assigned CIL #284.

OSGR 293

Subject: Assignment of CIL Numbers

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:

M. W. BILBIE
Capt., A. G. D.
Asst Adj Gen

DISINTERMENT DIRECTIVE

1

SECTION A —
 NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

7747 02571

DATE

 15 09 48
 DAY MONTH YEAR

NAME

SERIAL NUMBER

GRADE

ARM

RACE

RELIGION

UNKNOWNX-004016

Q 0 6

CEMETERY

PLOT

ROW

GRAVE

DISPOSITION OF REMAINS

MANILA NO 2 P I

4 22 2765

 7701 80
 CODE DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

NAME AND ADDRESS OF NEXT OF KIN

 FORT MCKINLEY CEMETERY
 MANILA, PHILIPPINE ISLANDS

(BY ADMINISTRATIVE DECISION)

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

GRADE

DATE OF DEATH

DATE DISTINTERRED

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

-
- REMAINS
-
-
- MARKER

UNKNOWN

NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

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

REMAINS PREPARED AND PLACED IN CASKET

DATE

BY

CASKET SEALED 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 AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

IDENTIFICATION CHECK LIST

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

Unknown X _____

Cemetery _____

Plot _____ Row _____ Grave _____

1. Arrived at cemetery _____
(Hour) (Date)

2. Place of death _____
(Name of closest town) (Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3. Remains recovered or disinterred by _____
(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			

Goatee
 (Light, color, extent)

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

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

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

Teeth
 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw Circumference of head in inches
 (Large, small, normal) (Hat band)

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

Shoulders Arms
 (Broad, straight, small, rounded) (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 Circumcision Pubic Hair
 (Quantity and extent of hair) (Yes-no) (Color)

Hernioplasty
 (Yes-no; location)

Legs
 (Dissect, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

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

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

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

SKELETAL CHART

X-4016

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



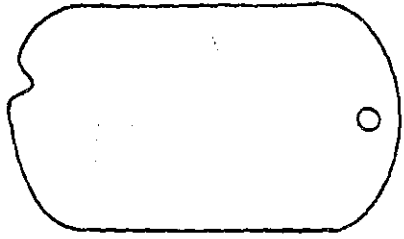
Received one
fragment of ~~sk~~
~~skull~~ of the
~~skull of the skull~~
This probably the
Tibia

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

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

DATE OF REPORT

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)		SERIAL No.
GRADE	ORGANIZATION	BRANCH OF SERVICE
RACE	RELIGION	IF OTHER THAN U. S. DEAD. GIVE NAME OF COUNTRY

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
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EMERGENCY ADDRESSEE (Name, relationship, and address)

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or 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)	CANCEL—Assigned CIL #267 per ltr Philcom 9 May 49, Subj: Assignment of CIL Numbers.

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

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	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
STORAGE		STORAGE		HANGER	BAW	CRUPT

WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE
RESTORED	

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
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IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)
STORAGE	

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
				CRUPT

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
				CRUPT

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
<i>[Signature]</i>	<i>[Signature]</i>

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.

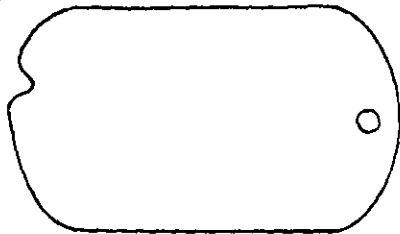
WD OMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

24 Sep 47

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)

UNKNOWN - 4010

SERIAL No.

GRADE

ORGANIZATION

BRANCH OF SERVICE

RACE

RELIGION

IF OTHER THAN U. S. DEAD, GIVE
NAME OF COUNTRY

PLACE OF DEATH Maricao, Babaco,
Bermosa, Nataan, Luzon,
P. I.

CAUSE OF DEATH

K.I.A.

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 (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	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
31 July 47	1300	Shelter Kit	Cross	4	22	2765

WAS THIS A REBURIAL?
(Yes or no)

No

IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE

Recovered from an isolated grave 1/2 mile from
Maricao Babaco, Bermosa, Nataan, Luzon, P. I.

PLOT No.	ROW No.	GRAVE No.
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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 - 4015

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

2764

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)

UNKNOWN - 4017

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

2766

SIGNATURE OF PERSON PREPARING REPORT

Al S Padaybag
AL S PADAYBAG, Sgt., GRS

SIGNATURE OF GRS OFFICER VERIFYING REPORT

Ward C Stephens
WARD C STEPHENS, 1st Lt., GRS

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.

6 JUNE 1947

S T A T E M E N T

I, Bonifacio Chavez, Filipino citizen of age, and citizen of barrio Mabuco, Hermosa, Bataan, do declare:

That on April 6, 1942 during the bombing, I saw one American soldier, about half mile from this barrio Mabuco, Hermosa.

That I buried him two days latter and mark the grave with a cross.

That on June 6, 1947 I showed the grave to an American Recovery Team.

That these are the remains of one of the unknown American soldier.

/s/ Bonifacio Chavez

Witness:

/s/ T/Sgt. Gregorio Novencido

/s/ Mario Jorge

A TRUE COPY:

Ward C Stephenson
WARD C STEPHENSON
1st Lt., *MC*