

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
WHEELING 1948

QGRS 202

AFPO 200

SUBJECT: Unidentifiable Remains

15 MAR 1950

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 QGRS 202, QRS (Far East), dated 17 September 1948, subject: Resolution of Cases of Unidentified Deceased, the following Unknown remains, presently stored at AGRS Manzanera, Manila, P.I., have been processed by the Central Identification Laboratory and considered "Unidentifiable" by reason of lack of sufficient identifying data:

UNKNOWN	X-NO.	AGRS Name	✓
"	X-1419,	" "	"
"	X-1541,	" "	"
"	X-2387,	" "	"
"	X-2620,	" "	"
"	X-3712,	" "	"
"	X-4198,	Manila #8	"
"	X-4288,	AGRS Name	"
"	X-5121,	" "	"

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

FOR THE COMMANDING OFFICER:

9 Incls
QGR Form 1044 w/Certificates
of Unidentifiability

/s/ John Szepala
JOHN SZEPALA
1st Lt., Infantry
Adjutant

1. FILE UNDER NO. 293 Unk. P.I. X-605 (Maus. Manila)

SYNOPSIS

2. TYPE OF DOCUMENT: 1st Ind. 3. DATE: 3/28/50
4. FROM: OCMG
5. TO: CO, AGRS, APO 900, Calif.
6. SUBJECT: Identification of World War II Deceased
Unk. P.I. X-605 (Maus. Manila)

7. DOCUMENT FILED
UNDER NO. 293 GRS Far East (Ident)

or

INSTRUCTIONS.—Enter after the above headings information as follows:

1. File classification under which this cross-index sheet is to be filed.
2. Appropriate term, such as: "ltr," "memo," "1st ind," etc.
3. Date of Document.
- 4 and 5. Enter either or both, as applicable.
6. Brief and comprehensive synopsis of the content or subject matter.
7. File classification under which the document is filed.

1. FILE UNDER NO. 293 - Unk. P.I. X-605 (Maus. Mania)

SYNOPSIS

2. TYPE OF DOCUMENT: Ltr 3. DATE: 15 Mar 50
4. FROM: Hdqtrs., American GRS, Philcom Zone
5. TO: TCMG, Dept of the Army, Wash., D. C. Attn: Mem Div
6. SUBJECT: Unidentifiable Remains.

7. DOCUMENT FILED UNDER NO. 293 - GRS, Far East (Unident.)

mfs

INSTRUCTIONS.—Enter after the above headings information as follows:

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2. Appropriate term, such as: "ltr," "memo," "1st ind," etc.
3. Date of Document.
- 4 and 5. Enter either or both, as applicable.
6. Brief and comprehensive synopsis of the content or subject matter.
7. File classification under which the document is filed.

AIRMAIL

SECRET 273 (Rev. 1-20-52)
RMSB Room, Manila, P. I.

SUBJECT: Comparison of Fingerprints

Dept of the Army, GSA, Washington 25 D. C., August 23, 1949

TO: CG, Philippine General, APO SF, c/o Postmaster, San Francisco, California. ATTN: APO, Philippine Gen

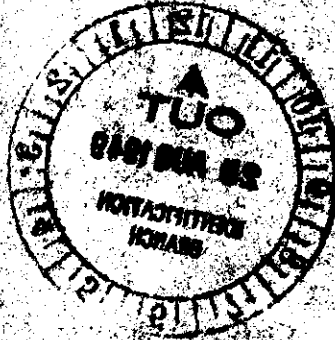
1. Fingerprints submitted for Unknown X-116, USAF Country Manila #2 (now designated as X-405, APOB Movement, Manila), have been compared by the Federal Bureau of Investigation with those of Edward Bruce Namura, 3004190, with negative results.

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 ACTING CHIEF OF THE HEADQUARTERS GENERAL:

T. E. MITT
Lt. Colonel, USA
General Division

Harvey/paj
D. Larkin
RFB



Aug 25 12 17 PM '49
MAIL ROOM
HEADQUARTERS

REB

✓ 293 unsh P.I. X 116 Manila #2

✓ 293 Namgura, Bernard Bruna
AIRMAIL 360069

AIR MAIL

**HEADQUARTERS
PHILIPPINES COMMAND
UNITED STATES ARMY**

**OSOR 293
Bat E-605, AERS Base.
Manila, P.I.**

**AFPO 707
8 AUG 1949**

SUBJECT: Comparison of Fingerprints

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

1. Reference is made to fingerprints imprinted on reverse of ROI for **UNIFORM E-116, USAF Com, Manila PI** (now designated as **E-605, AERS Memorial**).

2. It is requested that the fingerprints of the unknown deceased be compared with those of **T/S Bernard B. HERRERA, 36006196**, in view of a favorable comparison of physical and dental data existing between **OSOR Form 371 for T/S HERRERA** and processing report for **UNIFORM E-605**.

3. This case will be held pending receipt of findings from your office.

FOR THE QUARTERMASTER GENERAL:

**JOHN M. WESTON JR
1st Lt AGD
Asst. Adj. Gen**



X 293 ... X-116

(Memorandum #2)

AIR MAIL

1. FILE UNDER NO.

293 - Unk. P. I. X-116 (Manila #2)

SYNOPSIS

2. TYPE OF DOCUMENT:

MEMO

3. DATE:

17 Aug 46

4. FROM:

AGD, OIC, Casualty Section

5. TO:

OIC, CASUALTY SECTION, Pers. Action Branch, AGO

6. SUBJECT:

Change in Place of Death

Major	Garrett, Thomas R.	0426330
Major	Titensov, Allen E.	0399586
.....		

7. DOCUMENT FILED

UNDER NO.

293 - GRG Par East (Missing Air Crew) (IG Rept.)

msb

INSTRUCTIONS.—Enter after the above headings information as follows:

1. File classification under which this cross-index sheet is to be filed.
2. Appropriate term, such as: "ltr," "memo," "1st ind," etc.
3. Date of Document.
- 4 and 5. Enter either or both, as applicable.
6. Brief and comprehensive synopsis of the content or subject matter.
7. File classification under which the document is filed.

1
/ibp

Interred 14 March 1950
L 12 117 Ft. McKinley
Mark
CARL R. H. MARK

DISINTERMENT DIRECTIVE

Cemetery Superintendent
SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7747 02845

DATE
15 06 48
DAY MONTH YEAR

NAME		SERIAL NUMBER		RANK	ARM	DATE OF DEATH	
UNKNOWN		X-000116			0		
CEMETERY						DISPOSITION OF REMAINS	
USAF CEMETERY MANILA NO 2						0 7701 30 CODE DIST. PT.	
PLOT	ROW	GRAVE	COUNTRY			CAUSE OF DEATH	
F12	4	430	PHILIPPINE ISLANDS			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 DISINTERRED
116				21 Sept 48
605 (Have)				
IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY	
<input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	UNKNOWN		[Signature] NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
Letter half	Skeletal

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES 1
Exc to tag 116 - 605, [unclear]

REMAINS PREPARED AND PLACED IN CASKET
DATE 21 Sept 48 BY [unclear]

CASKET SEALED BY [unclear] EMBALMER (Signature) [Signature]
[unclear]

CASKET BOXED AND MARKED
DATE 21 Sept 1948 BY [unclear]

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

[Signature]
[unclear], 1st Lt., Inf
SIGNATURE OF GRS INSPECTOR

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

[Handwritten initials]



ARMY SERVICE FORCES

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON 25, D. C.



IN REPLY REFER TO: QMGG 293
X-116

(Manila #2) P. I.

2 July 1946

SUBJECT: Burial Information

TO : Commanding General, Army Forces Western Pacific Area,
APO 707, c/o Postmaster, San Francisco, California
For: Chief, American Graves Registration Service

1. This office is in receipt of a Report of Interment for X-116, Manila #2, P.I. buried in Plot 2, Row 4, Grave 430.
2. It is noted that the place of death or location of isolated burial is not indicated.
3. Since this information is necessary to aid in establishing identity, it is requested that a corrected report of interment be forwarded to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

James C. MacFarland
 JAMES C. MacFARLAND
 Major, QMC
 Assistant

3: 16 Aug 46
GDR/rpq

QMGG 293 1st Ind.
HEADQUARTERS, AMERICAN GRAVES REGISTRATION SERVICE GEDORC COMMAND,
UNITED STATES ARMY FORCES WESTERN PACIFIC, APO 707, 17 July 1946.

TO : Commanding Officer, USAF Cemetery, Manila No. 2, APO 358.

1. Attention is invited to basic letter.
2. Request information relative to place of death and if possible, any circumstances concerning the death of subject Mark X-116.

FOR THE COMMANDING OFFICER:

A. L. McCloskey
 A. L. McCLOSKEY
 Major, QMC
 Executive Officer

*File 22 Mar 50
A. C. King, Lt. Br.*

alt

BASIC: Ltr fr ASF, OQG, Washington 25, D.C., dtd 2 July 46,
file QMGYG 293, subj: Burial Information

GSQMM 293 2nd Ind CLB/arr
HEADQUARTERS, UNITED STATES ARMED FORCES CEMETERY MANILA #2,
APO 358, 24 July 1946

TO : Sector Commander, AGRS-PATA, Hqs AFWESPAC, APO 707

1. In compliance with 1st Ind a complete review of our records reveal the following:

UNKNOWN X - 116
Place of Death: Unknown
Date of Death: 26 Nov 1945
Place of Burial: USAF Cemetery Manila #2, Luzon, P.I.
Date of Burial: 27 Nov 1945
Grave 430 Row 4 Plot 2

2. At the time of burial, this death was under CID investigation. No other information was received at this office.

3. Forwarded with this correspondence is a true copy of unsigned information that was attached to our Report of Interment file copy.

C. L. Baskin
C. L. BASKIN
1st Lt., QMC
Commanding Officer

1 Incl:
True Copy of Unsigned
Information

GSQMM 293 2nd Ind CLB/arr
HEADQUARTERS, UNITED STATES ARMED FORCES CEMETERY MANILA #2, APO 358, 24 July 1946

TO : Sector Commander, AGRS-PATA, Hqs AFWESPAC, APO 707

1. In compliance with 1st Ind a complete review of our records reveal the following:
2. No other information was received at this office.

UNKNOWN X - 116

W. M. Mellorey
W. M. MELLOREY
1st Lt., QMC
Commanding Officer

1 Incl: n/c

*File 97 7m 50
A.C. King, Ed Br.*

TOP SECRET

JUL 3 1946

MEMORANDUM FOR THE DIRECTOR

1. [REDACTED]

2. [REDACTED]

3. [REDACTED]

4. [REDACTED]

FOR THE DIRECTOR'S INFORMATION

[REDACTED]

JUL 3 2 11 PM '46
MAIL & RECORDS BRANCH

JUL 3 12 09 PM '46
MAIL & RECORDS BRANCH

TOP SECRET

QUEST: 200
Unknown 2-116
P. I. (Mason)

24 June 1946

SUBJECT: Fingerprints of Unknown Deceased

TO: Commanding General
Army Post Office Western Pacific Area
APO 907, c/o Postmaster
San Francisco, California
FROM: Chief, American Graves Registration Service

1. The fingerprints submitted on the report of burial for Unknown 2-116, USAF Cemetery, Manila 70, Luzon, P. I., Plot B, Row 4, Grave 480, have been compared, insofar as possible, but were not found identical.
2. Should additional information become 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:

mm
g.p.

JAMES S. McNEILAND
Major, GSG
Assistant

RECORDED AND
INDEXED
JUN 24 9 12 AM '46
HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE

20

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE

IN REPLY
REFER TO ACPC-S 704 (31 May 46)

WASHINGTON

MG/CP/19525a

SUBJECT: Report of Burial U-571

Report of Burial U-571

To: The Quartermaster General, Washington 25, D. C.

ATTENTION: Chief, Identification Section, Repatriation Records Branch,
Room 2426, Temporary Building B.

Fingerprints on attached Report of Burial U-571 for Unknown X-116, USAF Cemetery Manila #2, Luzon, Philippine Islands, have been searched in the files of the Federal Bureau of Investigation and could not be found.

FOR THE ADJUTANT GENERAL:

Lloyd E. Hirschhorn

LOYD E. HIRSCHORN
Major, ACD
Officer in Charge
Status Review and
Determination Section

1 Incl.
Report of Burial



HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE

APO 900

(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- 116, Plot 2,
Row 4, Grave 430, USMC USAF Cem Manila #2, 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

[Signature]
M. B. McNEELAR
Captain, OMC
Chief, Records Branch

Received 31 March 50 OQMG
Not identifiable from
information presently
available *[Signature]*

3 April 50

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-116, USAF Cem. Manila #2	2. DATE OF REPORT 10 March 1950
---	------------------------------------

3. NAME OF CEMETERY X-116 AGRO MACBOLLUM, Manila	4. PLOT HANGER	5. ROW BAY	6. GRAVE CRYPT	7. DATE OF	
	801	D	926	DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT 5' 8"	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 ?
--	------------------







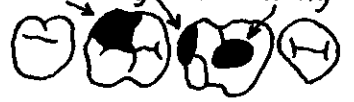



15. WAS BODY MANGLED ? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT ?
---	------------------





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

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

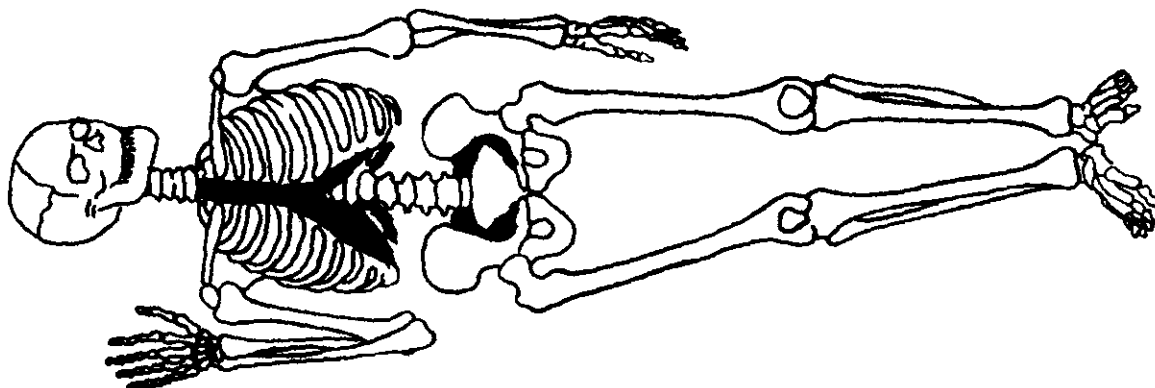
RIGHT								LEFT									
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8		
	X	X	X	X							d	X		odf	P		
Side Views																	Side Views
Top Views																	UPPER
																	LOWER
Side Views																	
	X	X					X						X	X			
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16		

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."

Paul H. Nichols

PAUL H. NICHOLS
Chief, Identification Section

19. BLACK OUT PARTS OF BODY NOT COVERED



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 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

Paul R. Nichols

Incl 1^d

X-605

IDENTIFICATION DENTAL CHART

TO BE USED WITH QMG FORMS NOS. 1042 & 1044 IN PLACE OF CHART THEREON,
AND TO BE ATTACHED TO AND FORWARDED WITH THESE FORMS WHEN ACCOMPLISHED.

UNKNOWN X-605 (Formerly UNK X-116)
USAF Gen Manila #2, Luzon, P.I.)

8 Oct 47

Unknown

Unknown

LAST NAME	FIRST	INITIAL	RANK	SERIAL NO.		
Unknown				Unknown		
UNIT	AGRS Mausoleum, Manila, P.I.		ORGANIZATION			
Unknown			801	D	926	
PLACE OF DEATH	PLACE OF BURIAL		PLOT RANGER	ROW BAY	GRAVE NO. CRYPT	
















STORAGE

	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
TYPE		X	X	X	X							O	X		O	X	
LOCATION												D			F		D

INSIDE — LOOKING OUT

	16	15	14	13	12	11	10	9	8	10	11	12	13	14	15	16	
TYPE		X	X					X						X	X		
LOCATION																	

KEY OF SYMBOLS TO BE USED ON ABOVE CHART

<p>SYMBOLS IN WHOLE BOX</p> <p> EXTRACTED</p> <p> CAVITY INDICATE LOCATION</p> <p> FIXED BRIDGE (INCL. ABUTMENTS)</p> <p> TEETH REPLACED BY DENTURE</p> <p> POSTHUMOUSLY MISSING (LOST AFTER DEATH)</p>	<p>TYPE OF FILLING IN UPPER HALF OF BOX</p> <p> AMALGAM (SILVER)</p> <p> GOLD</p> <p> SILICATE OR PORCELAIN</p> <p> OXYPHOSPATE (CEMENT)</p> <p></p>	<p>LOCATION OF FILLING IN LOWER HALF OF BOX</p> <p> MESIAL (BETWEEN-TOWARD FRONT)</p> <p> OCCLUSAL (BITING SURFACE BACK TEETH)</p> <p> DISTAL (BETWEEN-TOWARD BACK)</p> <p> LINGUAL (TOWARD TONGUE)</p> <p> FACIAL (TOWARD CHEEK)</p>
---	--	--

IDENTIFICATION CHECK LIST

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

UNKNOWN X-605 (Formerly
 Unknown X -116 USAF Cem Manila #2 Luzon PI)
 Cemetery AGRS Mausoleum, Manila, P.I.
 Plot 801 Row D Grave 926

CIP, AGRS Mslm, Manila, P.I.

1. Arrived at ~~cemetery~~ 8 Oct 47
(Hour) (Date)
2. Place of death Unknown
(Name of closest town) (Coordinates and letter Prefix, maps)
(Sheet, scale and serials used)
3. Remains ~~recovered~~ or disinterred by AGRS CMT #1
(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	/		
Raincoat	/		
Overcoat	/		
Jacket, Field	/		
Jacket, Combat	/		
Mackinaw	/		
Sweater		N	
Jacket, HBT		O	
* Shirt, Wool OD		N	
Undershirt, Wool	/		
Undershirt, Cotton	/		
Trousers, HBT	/		
* Trousers, Wool OD	/		

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 21 1/8" (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, howed, normal, quantity, color and extent of hair)

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

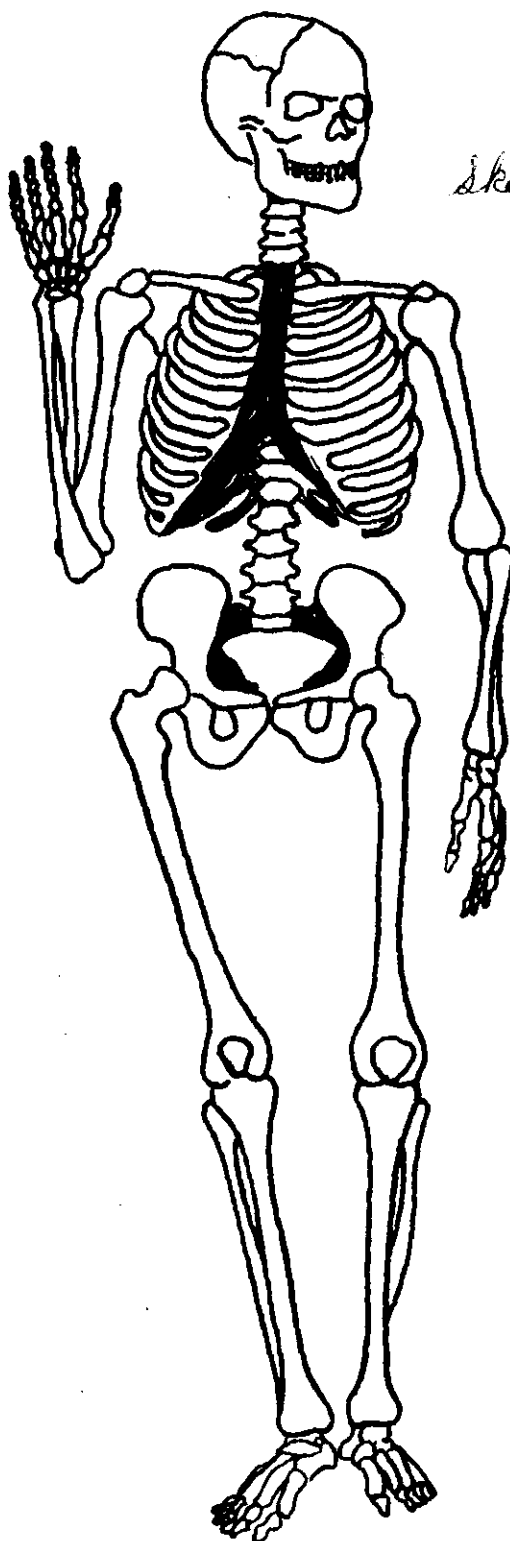
Evidence of healed fractures (Nose, arms, legs, etc.)

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

SKELETAL CHART

X-605

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



Skeleton received complete

WD-10 293

Form - 1

May 1946

3 May 1946

SUBJECT: Fingerprint Cards Requested

**TO: The Federal Bureau of Investigation, Department of Justice,
Washington, D. C.**

**FROM: Major Service, Casualty Branch,
The War Relocation Authority, Washington, D. C.**

**RE: Major Service, Casualty Branch,
The War Relocation Authority, Washington, D. C.**

1. The enclosed forms have been forwarded to your office with request that appropriate copies of the fingerprints thereon with those on file, with view to establishing the identity of Unknown Deceased.

2. If found to be correct, it is requested that the name, rank, social number, branch, company, address and religious preference, of the deceased, be furnished together with return of the forms.

FOR THE COMMANDER (SIGNED)

**1 Incl. 1
of Serial Form**

**AMBER S. ROSSWARD
Major, USA
Adjutant**

BASIC: Ltr fr ASF, GSC, Washington 25, D.C., dtd 2 July 46,
file GMSX 291, subj: Burial Information

GSQM 293 2nd Ind CLB/arr
HEADQUARTERS, UNITED STATES ARMED FORCES CEMETERY MANILA #2,
APO 358, 24 July 1946

TO : Sector Commander, AGRS-PATA, Hqs AFWS PAC, APO 707

1. In compliance with 1st Ind a complete review of our records reveal the following:

UNKNOWN X - 116
Place of Death: Unknown
Date of Death: 26 Nov 1945
Place of Burial: USAF Cemetery Manila #2, Luzon, P.I.
Date of Burial: 27 Nov 1945
Grave 430 Row 4 Plot 2

2. At the time of burial, this death was under CID investigation. No other information was received at this office.

3. Forwarded with this correspondence is a true copy of unsigned information that was attached to our Report of Interment file copy.

C. L. SARKIN
C. L. SARKIN
1st Lt., GSC
Commanding Officer

1 Incl:
True Copy of Unsigned
Information

GSQM 291 3rd Ind GSC/rpq
HEADQUARTERS, AMERICAN GRAVES REGISTRATION SERVICE AREA COMMAND, PACIFIC
THEATER, APO 707, 29 July 1946.

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

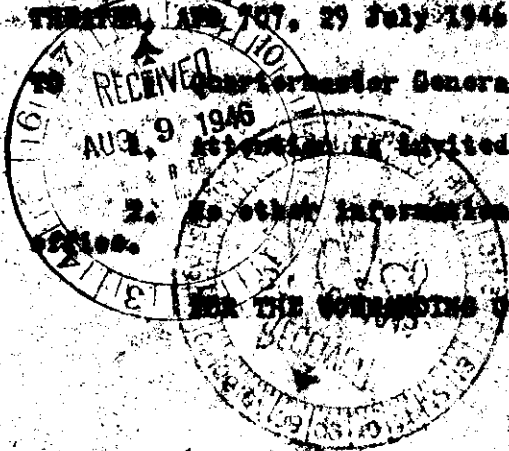
1. Attached is invited to 2nd Ind and inclosed unsigned memo.

2. No other information relative to Unknown X-116 available this office.

FOR THE COMMANDING OFFICER:

A. L. McLOONEY
Major, GSC
Executive Officer

1 Incl: a/c



293
Ltr X-116 (Manila #2) P.S.

INFORMATION REGARDING UNKNOWN X - 116

Captain Leo Gitman
Pathology Dept 363 Med. Lab.
Extention #8
(Ring 120 G. H.)

Call the above name for information in
regards to the unknown.

Diagnosis # 116
Stabbing (Murder)

CID - Investigating

A TRUE COPY:

C. L. Baskin
C. L. BASKIN
1st Lt., QMC

Gen. 11/1/18

MEMO ROUTING SLIP

NEVER USE FOR APPROVALS, DISAPPROVALS,
CONCURRENCES, OR SIMILAR ACTIONS

1	NAME OR TITLE The Quartermaster General	INITIALS	CIRCULATE
	ORGANIZATION AND LOCATION Memorial Division	DATE	COORDINATION
4	ATTN: Major Sekowski		FILE
	Rm. 1C675		INFORMATION
3	<i>Idem, des.</i>		NECESSARY ACTION
	<i>attn: Mrs. Harvley</i>		NOTE AND RETURN
4			SEE ME
			SIGNATURE

REMARKS

Attention is invited to the inclosed FBI Memo dated 18 August 1949 concerning WC-922, Unknown X-116.

1 Incl:
FBI Memo dated 18 Aug. 49

FROM NAME OR TITLE <i>W</i> WOODLAND/mmg/1C712	DATE 18 Aug. 49
ORGANIZATION AND LOCATION PAB Discip. Sec. Pentagon	TELEPHONE 71461

FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D. C.

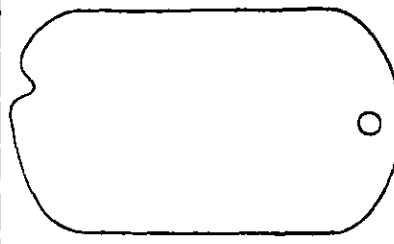
Date August 18, 1949

TO: Mr. L. M. Woodland
Pentagon Building

Re: This confirms the telephonic report given Mrs. Harvey of the Memorial Division on August 18, 1949, to the effect that fingerprints appearing on WC-922, your unknown X116, U.S.A.F. Cemetery Manila No. 2 were not identified with the fingerprints of Bernard Bruno Nemzura, ASN-36006198.

J. E. Hoover
John Edgar Hoover
Director

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 2 Dec 45
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Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.		
	NAME (Last, first, middle initial) <p style="text-align: center;">UNKNOWN - X - 116</p>	SERIAL No.	
	GRADE	ORGANIZATION	BRANCH OF SERVICE
	RACE <p style="text-align: center;">White</p>	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
PLACE OF DEATH	CAUSE OF DEATH <p style="text-align: center;">STABB (murder)</p>	DATE OF DEATH <p style="text-align: center;">26 Nov 45</p>	

EMERGENCY ADDRESSEE (Name, relationship, and address)

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) <p style="text-align: center;">None</p>	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 2 on reverse)
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) <p style="text-align: center;">Yes (2)</p>	

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 <p style="text-align: center;">USAF Cemetery Manila #2, Duzon, P. I.</p>									
DATE OF BURIAL <p style="text-align: center;">27 Nov 45</p>	HOUR <p style="text-align: center;">1430</p>	BURIED IN (Shroud, blanket, or name of other) <p style="text-align: center;">Casket</p>	TYPE OF GRAVE MARKER <p style="text-align: center;">Cross</p>	PLOT No. <p style="text-align: center;">2</p>	ROW No. <p style="text-align: center;">4</p>	GRAVE No. <p style="text-align: center;">430</p>			
WAS THIS A REBURIAL? (Yes or no) <p style="text-align: center;">No</p>	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>PLOT No.</td> <td>ROW No.</td> <td>GRAVE No.</td> </tr> </table>						PLOT No.	ROW No.	GRAVE No.
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							
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) <p style="text-align: center;">Yes</p>	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) <p style="text-align: center;">Yes</p>								
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) <p style="text-align: center;">ROSS, George</p>			RANK <p style="text-align: center;">T/4</p>	SERIAL No. <p style="text-align: center;">19171917</p>	ORGANIZATION <p style="text-align: center;">6160 Bom. Bn.</p>	GRAVE No. <p style="text-align: center;">429</p>			
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) <p style="text-align: center;">PAIGE, Robert</p>				SERIAL No. <p style="text-align: center;">33850442</p>	ORGANIZATION <p style="text-align: center;">1310 Engr.</p>	GRAVE No. <p style="text-align: center;">431</p>			
SIGNATURE OF PERSON PREPARING REPORT <p style="text-align: center;"><i>R. C. Barrett</i> R. C. BARRETT, Cpl. GRS.</p>			SIGNATURE OF GRS OFFICER VERIFYING REPORT <p style="text-align: center;"><i>D. L. Armstrong</i> D. L. ARMSTRONG, Capt. GRS.</p>						

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.

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.

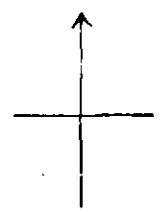
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
5.8	180 LB	Blue	light Brown	none
WEAPON AND SERIAL No.		LAUNDRY MARKS		WHERE BODY WAS BURIED OR FOUND
none		none		

OTHER IDENTIFICATION CLUES

- 1. slightly bald
- 2. heavy eye brows
- 3. Roman nose
- 4. thin neck bones
- 5. Age about 35 yrs old
- 6. mal occlusion of incisors
- 7. Lower incisors aren't centered
- 8. Circumcised

FILLINGS	<p>SILVER FILLING GOLD FILLING</p>	<p>UPPER</p> <p>LOWER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</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>	

Sketch and map (reference to coordinates) of burial in other than a standard cemetery



REMARKS:

14 DEC 1945

LEFT LITTLE FINGER

LEFT MIDDLE FINGER

LEFT INDEX FINGER

LEFT THUMB

RIGHT THUMB

RIGHT INDEX FINGER

RIGHT MIDDLE FINGER

RIGHT RING FINGER

RIGHT LITTLE FINGER

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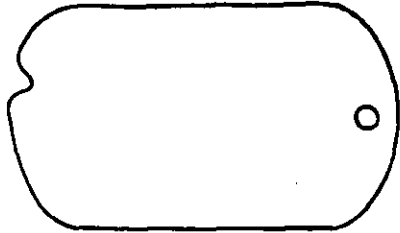
WD OMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

2 Dec 45

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)

UNKNOWN - X - 116

SERIAL NO.

GRADE

ORGANIZATION

BRANCH OF SERVICE

RACE

White

RELIGION

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

PLACE OF DEATH

CAUSE OF DEATH

STABB (murder)

DATE OF DEATH

26 Nov 45

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 8 on reverse)

WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)

Yes (2)

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

Jewel 776

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, Bases, P. I.

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
27 Nov 45	1430	Casket	Cross	2	1	429

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

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.
ROSS, George	T/4	1012317	6160 Eng. Sq.	429

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
RAJCH, Robert		9305414	1010 Eng. Sq.	431

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
<i>[Signature]</i> R. G. [Name], Cpl. GRS.	<i>[Signature]</i> D. L. [Name], Capt. 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 Office. Copies for retention in theater as prescribed by theater commander.

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INSTRUCTIONS


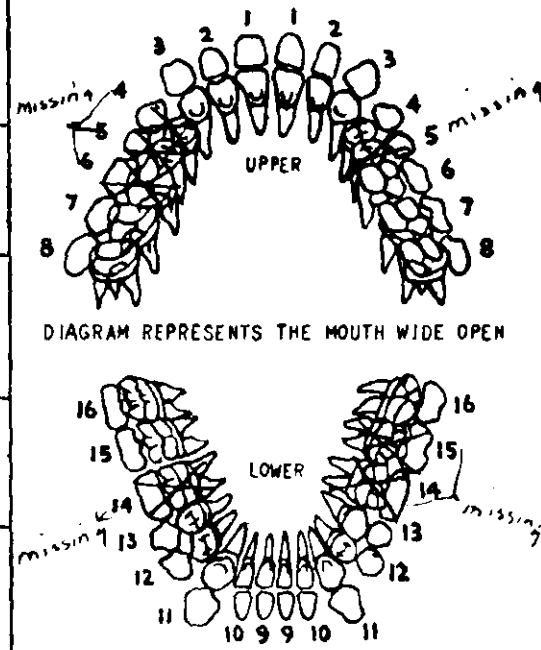




(a) Greatly assist in the most minute details. Fill in all spaces, including name, and any social security number; location of residence, airplane, plane, vehicle, and tank.

(b) A fingerprint or print, or as many as possible, on every tooth will be indicated by a dot on the diagram. This is accomplished if one or more fingerprints are secured.

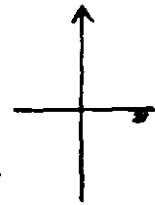
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	HAIR STYLE
5' 8"	180 LB	Blue	light brown	None
WEAPON AND SERIAL No.		LAUNDRY MARKS		WHERE BODY WAS SEEN OR FOUND
None		None		

OTHER IDENTIFICATION CLUES

- | | |
|---------------------|-----------------------------------|
| 1- slightly Bald | 5- age about 35 years old |
| 2- heavy eye brows | 6- mal occlusion of incisors |
| 3- Roman nose | 7- lower incisors aren't centered |
| 4- High cheek bones | 8- Circumsised- |

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

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
5.8	180 LB	Blue	light Brown	None
WEAPON AND SERIAL No.		LAUNDRY MARKS		WHERE BODY WAS BURIED OR FOUND
None		None		

OTHER IDENTIFICATION CLUES

- 1- slightly Bald
- 2- heavy eye brows
- 3- Roman nose
- 4- High cheek bones
- 5- Age about 35 yrs old
- 6- mal occlusion of incisors
- 7- lower incisors aren't centered
- 8- Circumcised-

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

not fd. in F.B.I.

Woodland / Cal 73

22 / May 66

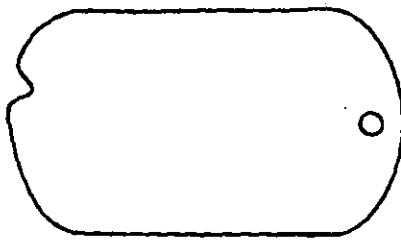
REMARKS:

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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 11 Oct 47
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Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.		
	NAME (Last, first, middle initial) UNKNOWN X-605 (Formerly UNK X-116 USAF Cemetery Manila #2, Luzon, P.I.)		SERIAL No. Unknown
	GRADE Unknown	ORGANIZATION Unknown	BRANCH OF SERVICE Unknown
	RACE White	RELIGION Unknown	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH Unknown	CAUSE OF DEATH STAB (Murder)	DATE OF DEATH 26 Nov 45
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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)	REBURIAL RECORDS BRANCH Dec 22 2 50 PM '47

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 8 Oct 47	STORAGE	HOUR 1500	BURIED IN (Shroud, blanket, or name of other) Casket	TYPE OF GRAVE MARKER None	PLOT No. 801	ROW No. D	GRAVE No. 926
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WAS THIS A REBURIAL? (Yes or no) Yes RESTORED	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery Manila #2, Luzon, P.I.	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">PLOT No. 2</td> <td style="width: 33%;">ROW No. 4</td> <td style="width: 33%;">GRAVE No. 430</td> </tr> </table>	PLOT No. 2	ROW No. 4	GRAVE No. 430
PLOT No. 2	ROW No. 4	GRAVE No. 430			

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) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes
--	--

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) UNKNOWN X-609	RANK	SERIAL No.	ORGANIZATION	GRAVE No. 928
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-607	RANK	SERIAL No.	ORGANIZATION	GRAVE No. 924

SIGNATURE OF PERSON PREPARING REPORT  Wm. R GILBERT, Adm. Asst.	SIGNATURE OF GRS OFFICER VERIFYING REPORT  LUDIO S. PANOFIO, JR., 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.

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