

QUART 296
GRS Far East

13 June 1949

SUBJECT: Identification of World War II Deceased

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

ATTN: AGRS, PHILCOM ZONE

1. Reference is made to findings of unidentifiability for the following unknown remains:

Unknown X-5150	AGRS	Mausoleum	Manila	formerly	X-1027	Manila	#2
Unknown X-3168	AGRS	Mausoleum	Manila	formerly	X-1045	Manila	#2
Unknown X-3147	AGRS	Mausoleum	Manila	formerly	X-1024	Manila	#2
Unknown X-2065	AGRS	Mausoleum	Manila	formerly	X-3188	Manila	#2
Unknown X-1973	AGRS	Mausoleum	Manila	formerly	X-3268	Manila	#2
Unknown X-1895	AGRS	Mausoleum	Manila	formerly	X-3247	Manila	#2
Unknown X-1723	AGRS	Mausoleum	Manila	formerly	X-3564	Manila	#2
Unknown X-1616	AGRS	Mausoleum	Manila	formerly	X-3484	Manila	#2
Unknown X-1348	AGRS	Mausoleum	Manila	formerly	X-3577	Manila	#2
Unknown X-1217	AGRS	Mausoleum	Manila	formerly	X-3726	Manila	#2
Unknown X-1250	AGRS	Mausoleum	Manila	formerly	X-3641	Manila	#2
Unknown X-937	AGRS	Mausoleum	Manila	formerly	X-4004	Manila	#2
Unknown X-2062	AGRS	Mausoleum	Manila	formerly	X-3205	Manila	#2
Unknown X-1215	AGRS	Mausoleum	Manila	formerly	X-3748	Manila	#2
Unknown X-4690	AGRS	Mausoleum	Manila	formerly	X-2003	Manila	#2
Unknown X-1291	AGRS	Mausoleum	Manila	formerly	X-3590	Manila	#2
Unknown X-1344	AGRS	Mausoleum	Manila	formerly	X-3561	Manila	#2
Unknown X-1621	AGRS	Mausoleum	Manila	formerly	X-3439	Manila	#2
Unknown X-1326	AGRS	Mausoleum	Manila	formerly	X-3327	Manila	#2
Unknown X-4635	AGRS	Mausoleum	Manila	formerly	X-632	Manila	#2
Unknown X-702	AGRS	Mausoleum	Manila	formerly	X-317	Manila	#2
Unknown X-719	AGRS	Mausoleum	Manila	formerly	X-236	Manila	#2
Unknown X-414	AGRS	Mausoleum	Manila	formerly	X-264	Manila	#2
Unknown X-720	AGRS	Mausoleum	Manila	formerly	X-237	Manila	#2
Unknown X-441	AGRS	Mausoleum	Manila	formerly	X-394	Manila	#2
Unknown X-932	AGRS	Mausoleum	Manila	formerly	X-317	Manila	#2
Unknown X-1923	AGRS	Mausoleum	Manila	formerly	X-3257	Manila	#2
Unknown X-1939	AGRS	Mausoleum	Manila	formerly	X-3327	Manila	#2

*File
11/24/50
AGRS
Far East*

QUENT 293

GRS Far East

Ltr 13 June 1949

SUBJECT: Identification of World War II Deceased

Unknown X-1965 AGRS Mausoleum Manila formerly X-3290 Manila #2
Unknown X-4630 AGRS Mausoleum Manila formerly X-1089 Manila #2
Unknown X-4678 AGRS Mausoleum Manila formerly X-1087 Manila #2
Unknown X-4677 AGRS Mausoleum Manila formerly X-1086 Manila #2
Unknown X-4675 AGRS Mausoleum Manila formerly X-1084 Manila #2
Unknown X-1685 AGRS Mausoleum Manila formerly X-3245 Manila #2
Unknown X-2750 AGRS Mausoleum Manila formerly X-3315 Manila #2
Unknown X-1306 AGRS Mausoleum Manila formerly X-3637 Manila #2

3425

2. Recommendations for unidentifiability have been accepted by this Office. Request your records be amended accordingly.

FOR THE QUARTERMASTER GENERAL:

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

cc: Adm Section
G. Reynolds:pmr
L. V. Monzel
J. Windsor

REB

NJS

JLW
JAB

bpm
/mfc
1

Interred 5 July 49
F 6 26 Ft. McKinley
Carl R H. Mark
CARL R H. MARK

DISINTERMENT DIRECTIVE

Cemetery Superintendent
SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7747 00083

DATE
15 06 48
DAY MONTH YEAR

NAME
UNKNOWNX-000237

SERIAL NUMBER
RANK

ARM
DATE OF DEATH
DAY MONTH YEAR

CEMETERY
USAF CEMETERY MANILA NO 2

DISPOSITION OF REMAINS
7701 80
CODE DIST. PT.

PLOT ROW GRAVE COUNTRY
2 8 1022 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 UNK X-237 (Maus) UNK X-720	SERIAL NUMBER	RANK	DATE OF DEATH 30 Dec 44	DATE DISTINTERRED 21 Sept 48
IDENTIFICATION TAG ON <input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION UNKNOWN	RELIGION	IDENTIFICATION VERIFIED BY C. MAXLEE FANN Embalmer NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Shelter Half	CONDITION OF REMAINS Skeletal
----------------------------------	----------------------------------

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES 1

Two remains Tags- UNK X-720 (AGRS MAUS)

REMAINS PREPARED AND PLACED IN CASKET

DATE 21 Sept 48	BY C. MAXLEE FANN
CASKET SEALED BY C. MAXLEE FANN	EMBALMER (Signature) <i>C. Maxlee Fann</i> C. MAXLEE FANN

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY CHARLES R. BATES, 1st Lt., USAFR
DATE 21 Sept 48	BY HORACE L. ALLISON, Sgt. INF.

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

Charles R. Bates
CHARLES R. BATES, 1st Lt., USAFR
SIGNATURE OF GRS INSPECTOR

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

HAS FILE
RECORDS ANNOTATED
DATE 8/2/49
NAME NIMBERLY
R & R BR.

NLN

1949
D108787A

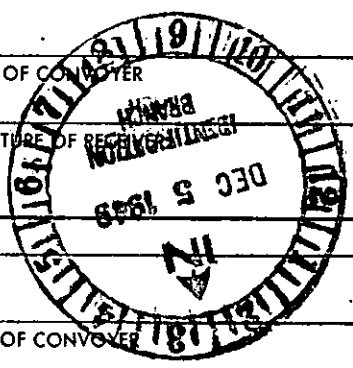
RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM AGRS MAUSOLEUM		TO FORT MCKINLEY MILITARY CEMETERY	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Caremark</i>	DATE 5 JU 1949

2. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE



3. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

4. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER FORT MCKINLEY CEMETERY	DATE	SIGNATURE OF RECEIVER MILITARY DECISION	DATE

6. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

RECEIVED: SHIPPED: 1949

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE
APO 900

6 May 1949


Date

SUBJECT: Unidentifiable Remains

TO : The Quartermaster General
Washington 25, D. C.
Attn: Memorial Division

The records pertaining to Unknown X- 237 , Plot 2 ,
Row 8 , Grave 1022 , USMC Manila #2, Luzon, P.I. have
been reviewed and it is the opinion of this office that insufficient
evidence is available to establish the identity of this deceased,
and that these remains should be classified as unidentifiable.

FOR THE COMMANDING OFFICER:


H. B. McNEMAR
Captain, QMC
Chief, Records Branch

Attch: Form 1044

Received 3 June 49 OQMS
Not identifiable from
information presently
available

G. Reynolds 6-9-49

Proc. #5'

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-720 (Formerly Unk X-237 Manila # 2)				2. DATE OF REPORT 6 May 1949	
3. NAME OF CEMETERY SANS MAUSOLEUM, ...	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	801	F	1408	DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT U.T.D.	9. ESTIMATED HEIGHT U.T.D.	10. COLOR OF HAIR U.T.D.	11. RACE Unknown
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

N O N E

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

U. T. D.

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

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

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

N O N E

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

N O N E

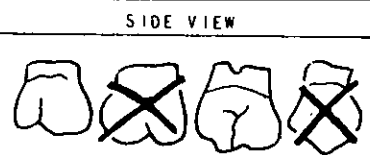
"UNIDENTIFIABLE"

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

Manila # 5-2

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:



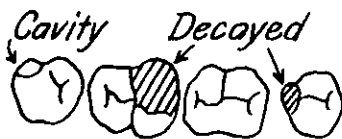
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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
MAXILLA								MISSING							
Side Views								Side Views							
Top Views								UPPER							
Side Views								LOWER							
MANDIBLE								MISSING							
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."

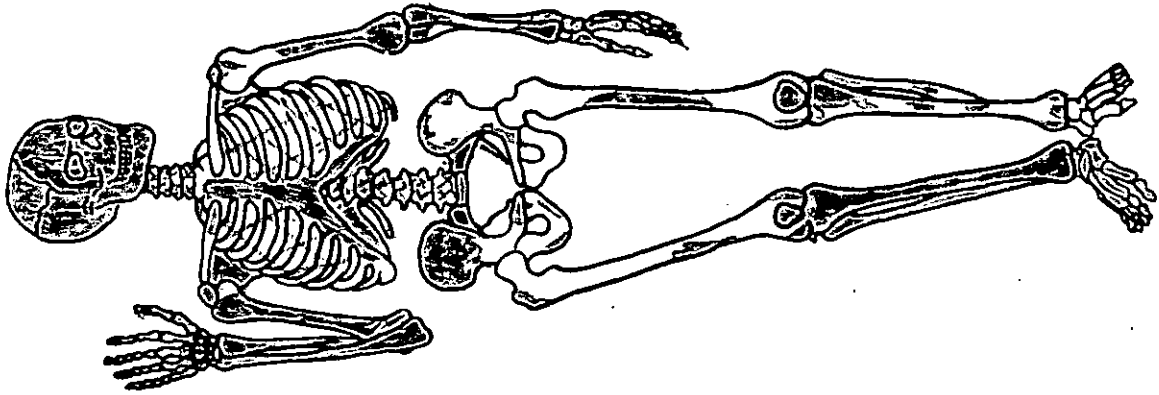
No loose teeth present with the remains.

"UNIDENTIFIABLE"

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

J. J. Mc Dermott
 J. J. McDERMOTT
 Laboratory Officer, CIP

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 _____ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS: _____ NUMBER

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

No ROI, identification tags or personal effects found with remains.

Estimated weight of remains - 3½ lbs.

REASON OF LACK OF IDENTIFICATION TAGS

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

JAMES J. McDERMOTT
Laboratory Officer, CIP

SIGNATURE

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, poeks, 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 U
T
D

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)

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? No If not, explain No skull
(Yes-no)

9. Remarks No ROI bottle nor identification tags received
with remains. No personal effects. Remains are very badly
mangled. Weight of remains, composed mostly of rib and
vertebrae fragments and small fragment of bones, is estimated
about 3½ 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.

/s/ E.F. Moriarty
(Officer's Name)

SP 6.
Rank Service

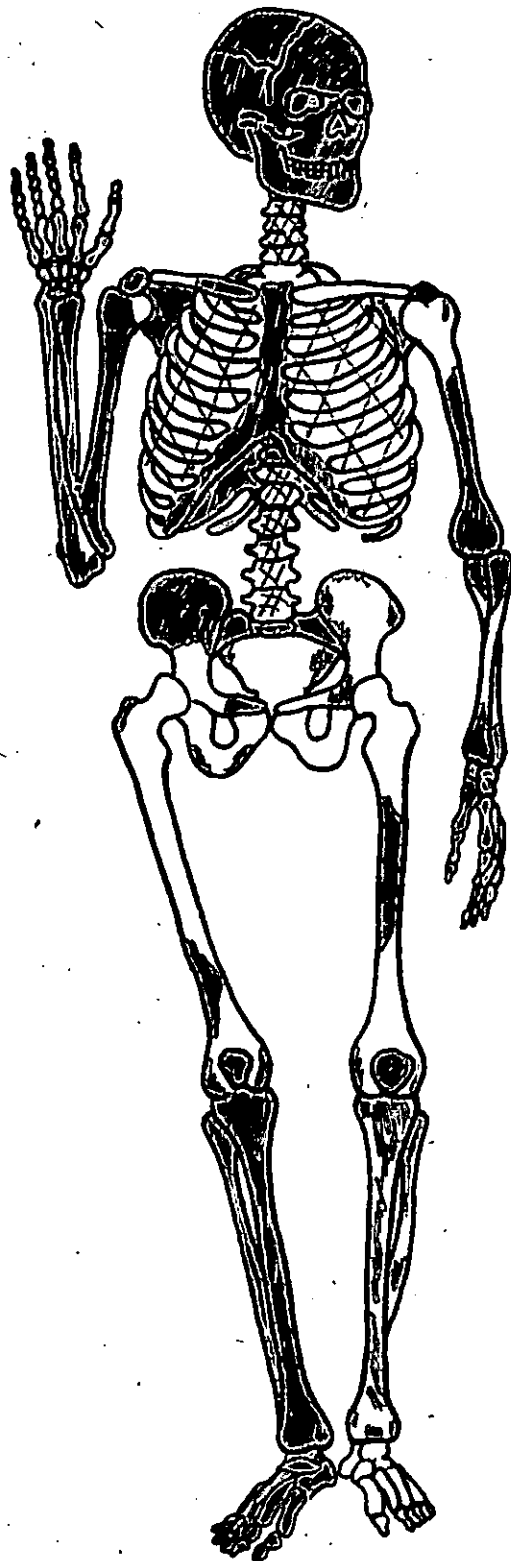
A.G.R.S.
(Organization)

CERTIFIED TRUE COPY:

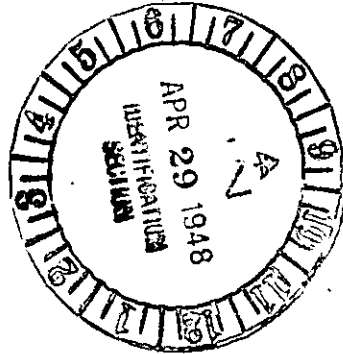
George T. Gamboa
GEORGE T. GAMBOA
2d Lt., MAC

SKELETAL CHART X-720

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



*Rib fragment 5
Vertebrae fragments
Also small bone
fragments*



73
73

APR 29 1948

RESTRICTED

U 98

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

15 Oct 47

Imprint Identification Tag If Possible.
DO NOT TYPE

Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)

UNKNOWN X-720 (Formerly Unk X-237
USAF Cem Manila #2, Luzon, P.I.)

SERIAL NO.

Unknown

GRADE

Unknown

ORGANIZATION

Unknown

BRANCH OF SERVICE

Unknown

RACE

Unknown

RELIGION

Unknown

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

PLACE OF DEATH

Unknown

CAUSE OF DEATH

KIA-EA- Body badly decomposed.

DATE OF DEATH

30 Dec 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)

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

None

REPAIRATION
RECORDS BRANCH
DEC 22 2 57 PM '47
MEMORIAL DIVISION

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	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
STORAGE 13 Oct 47	1000	STORAGE Casket	None	HANGER 801	BAY F	CRYPT. 1408

WAS THIS A REBURIAL?
(Yes or no)

Yes

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

USAF Cemetery Manila #2, Luzon, P.I.

PLOT No.	ROW No.	GRAVE No.
2	8	1022

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

STOPER

IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)

Yes

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

STORAGE

UNKNOWN X-722

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

CRYPT
1410

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

STORAGE

UNKNOWN X-717

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

CRYPT
1406

SIGNATURE OF PERSON PREPARING REPORT

Wm R GILBERT, Adm Asst

SIGNATURE OF GRS OFFICER VERIFYING REPORT

LUCIO S. PANOPIO, 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.

RESTRICTED

Qal 567

Section 3.—UNIDENTIFIED REMAINS.

INSTRUCTIONS:

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

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

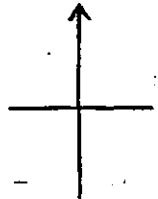
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
--------	--------	---------------	---------------	-------------------------------

WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
-----------------------	---------------	--------------------------------

OTHER IDENTIFICATION CLUES

FILLINGS	<p>SILVER FILLING GOLD FILLING</p>	<p>UPPER TOOTH CHART IMPOSSIBLE DIAGRAM REPRESENTS THE MOUTH WIDE OPEN NO SKULL LOWER</p>
CAVITIES	<p>CAVITY DECAYED</p>	
MISSING TEETH	<p>TOOTH MISSING</p>	
CROWNED TEETH	<p>PORCELAIN CROWN GOLD CROWN</p>	
BRIDGE WORK	<p>GOLD BRIDGE</p>	

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



REMARKS:

Identification Check List accomplished.

LITTLE LEFT LITTLE LEFT
 RING LEFT RING LEFT
 MIDDLE LEFT MIDDLE LEFT
 INDEX LEFT INDEX LEFT
 THUMB LEFT THUMB LEFT
 THUMB RIGHT THUMB RIGHT
 INDEX RIGHT INDEX RIGHT
 MIDDLE RIGHT MIDDLE RIGHT
 RING RIGHT RING RIGHT
 LITTLE RIGHT LITTLE RIGHT
 18 NOV 1947

RESTRICTED

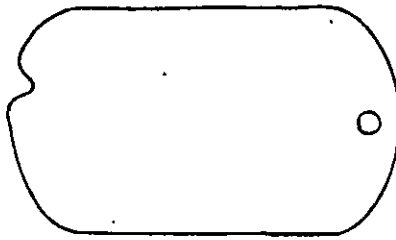
U 384-98

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
5 January 1946

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN X - 237 (Formerly Unknown X-12 USAF Cem. San Jose No. 1, Mindoro, P. I.)		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 E.I.A.--EA- body badly decomposed	DATE OF DEATH 30 December 1944
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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)
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) yes (2)	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME
Jan 14/46
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 No. 2, Luzon, P. I.						
DATE OF BURIAL 11 Dec. 1945	HOUR 1100	BURIED IN (Shroud, blanket, or name of other) shelter half	TYPE OF GRAVE MARKER cross	PLOT No. 2	ROW No. 8	GRAVE No. 1022
WAS THIS A REBURIAL? (Yes or no) yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery San Jose No. 1, Mindoro, P. I. 86.8-05.7			PLOT No. 1	ROW No. 5	GRAVE No. 69
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 - 236 (Formerly Unknown X-6 USAF Cem. San Jose No.1, Mindoro, P. I.)		RANK	SERIAL No.	ORGANIZATION	GRAVE No. 1021	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X - 238 (Formerly Unknown X-9 USAF Cem. San Jose No. 1, Mindoro, P.I.)		RANK	SERIAL No.	ORGANIZATION	GRAVE No. 1023	
SIGNATURE OF PERSON PREPARING REPORT <i>R. C. Barrett</i> R. C. BARRETT, T/4, GRS.			SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>E. M. Moore</i> E. M. MOORE, 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.

RESTRICTED

Jan 89'

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.


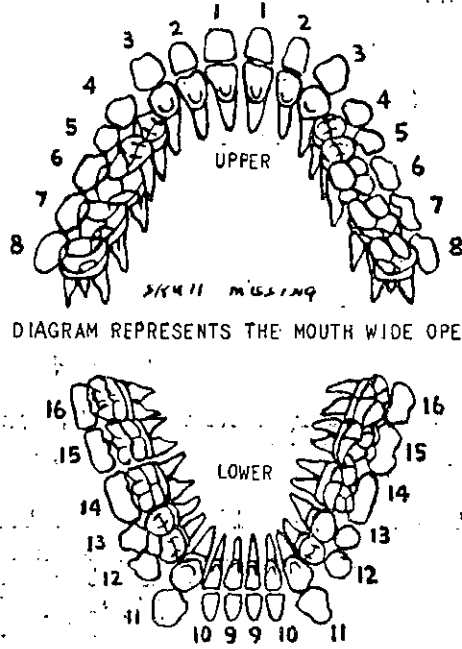




(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

19 FEB 1948

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

WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND

OTHER IDENTIFICATION CLUES

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:

E. W. M.

1948

RIGHT
LITTLE FINGER

RIGHT
RING FINGER

RIGHT
MIDDLE FINGER

RIGHT
INDEX FINGER

RIGHT
THUMB

LEFT
THUMB

LEFT
INDEX FINGER

LEFT
MIDDLE FINGER

LEFT
RING FINGER

LEFT
LITTLE FINGER

REPORT OF INTERMENT
(TM 10-630 AND AR 30-1815)

20 June 45
U 98

Unknown X-12

(Last name)

(First)

(Initial)

(Serial number)

(Rank)

(Organization)

(Place of death)

(Date of death)

(Cause of death)

0930

3 Jan 1945

USAF Cem San Jose No. 1 Mindoro PI

86.8-05.7

(Time and date of burial)

(Name of cemetery)

(Name or co-ordinates of location)

69

5

1

V-shaped

(Grave number)

(Row number)

(Plot number)

(Type of marker—Regulation V-shaped or other)

Disposition of identification tags: Buried with body Yes No Attached to marker Yes No

Religion

(If no identification tags, what means of identification are buried with the body?)

(If no identification tags, but identity definitely established, give particulars)

Body buried on **RIGHT** Unknown X-11

(Name)

(Serial number)

(Rank)

(Organization)

(Grave number)

68

Body buried on **LEFT** Jackson Clifford D.

(Name)

8238451

(Serial number)

MoMM 2/c

(Rank)

USNR

(Organization)

70

(Grave number)

(Name and address of EMERGENCY ADDRESSEE)

(Name and address of LEGAL NEXT OF KIN)

List only personal effects **FOUND ON BODY** and disposition of same: None

(21)

146

RESTRICTED

Cluth AR 30-1815 C2 over
W. E. PETH 9/27/56

~~CONFIDENTIAL~~

IF DECEASED UNIDENTIFIED

0405

TAKE FINGERPRINTS OF BOTH HANDS (W. D. Cir. No. 79; 3/19/43). If unable to obtain a complete set of fingerprints, **TAKE THOSE YOU CAN**, and fill in as many of the following as you are able:

Height :	Apparent nationality :
Weight :	Laundry marks :
Color of eyes :	Number of rifle :
Color of hair :	Wear glasses ?
Race :	Is tooth chart attached ?

(If possible, have medical personnel take a tooth chart)

In space below, locate and describe any scars, birthmarks, moles deformities, etc. :
Body so badly decomposed that identification impossible.

Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc. :

IF THIS IS AN ISOLATED BURIAL, ATTACH A SKETCH OF THE LOCATION, ORIENTED WITH PERMANENT LANDMARKS.

Fred T. Huffman, Sgt. QMC
Fred T. Huffman Sgt. QMC

(Signature of officer or other person reporting burial)

A. Bertram Koenig, Lt. QMC
A. BERTRAM KOENIG Lt. QMC

(Verified by Army GRS Officer)

LEFT HAND

4

3

2

1

THUMB

RIGHT HAND

4

3

2

1

THUMB

RECEIVED
25 MAY 1945