

I

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 pink manila # 2 X-303 / Ft Mc Koolsey

SUBJECT

also 293 pink manila X-X50

GMC FORM 1121
1 Aug 45

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE

GRP# 293

APO 900
16 January 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 QMGMU 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-450	AGRS Mslm	UNKNOWN X-2221	AGRS Mslm
" X-695	" "	" X-2226	" "
" X-1214	" "	" X-2288	" "
" X-2204	" "	" X-3723	" "
" X-2219	" "		

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

FOR THE COMMANDING OFFICER:

JOHN SHYPULA
1st Lt., Infantry
Adjutant

9 Incls
QMC Forms 1044 w/Certificates
of Unidentifiability

C
O
P
H

Possible

AIR MAIL

293 Unknown P.I. X-450 (Maus. Manila)

ORDER 293
PRATT, Lyman Milford
405 68 58, USN

700 1 3 1949

SUBJECT: Identification of Unknown Deceased

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

1. Reference is made to Case History dated 12 May 1949, PHILCOM ZONE, recommending that the remains of Unknown X-450, AGM Mausoleum, Manila, P. I., Hanger 812, Bay 2, Crypt 45, formerly USAF Cemetery, Manila #2, Luzon, P. I., Plot 2, Row 12, Grave 1474, be designated as those of PRATT, Lyman Milford, Flc, 405 68 58, USN.

2. The recommendation of the Field is disapproved.

3. The documentary evidence in this case is considered insufficient to conclusively identify the remains of Unknown X-450 as PRATT.

4. It is recommended that this case be processed in accordance with A. G. letter File AGAO-S 293.9 (27 March 1947) D-M, dated 9 April 1947.

5. It is further recommended that a Certificate of Unidentifiability if applicable, be submitted to this Office.

FOR THE QUARTERMASTER GENERAL:

T. H. MEYER
Lt Colonel, GMC
Memorial Division

JEM
WEM

CC: CINCPAC

*293 Pratt, Lyman Milford
(4056858)*

AIR MAIL

AIR MAIL

FORM 293
Unknown X-450
Maus. Manila

P.I. #1
em

SUBJECT: Unidentifiable Remains

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

1. Reference is made to letter, your Headquarters, file GRPZ 293, dated 16 January 1950, Subject: Unidentifiable Remains.
2. This Office concurs in the classification of Unknown X-450, AGRS Mausoleum, Manila, P. I., as unidentifiable.

FOR THE QUARTERMASTER GENERAL:

T. H. METZ
Lt Colonel, GMC
Memorial Division

M.H.
WEM

737 230715J
MAIL & TELETYPE BRANCH
CC: [unclear]
[Signature]

RECEIVED
AGRS
SEP 1 1950
TDO
OCS

AIR MAIL

/bpm		Interred 16 , 1950 D 16 18 Ft. McKinley <i>Embalmer</i> CARL R. H. MARK Cemetery Superintendent			DISINTERMENT DIRECTIVE		
		SECTION A— NAME AND BURIAL LOCATION OF DECEASED			DIRECTIVE NUMBER 7747 00167		DATE 15 06 48 DAY MONTH YEAR
NAME UNKNOWN				SERIAL NUMBER X-000303		RANK K	
CEMETERY USAF CEMETERY (MANILA NO 2)				DISPOSITION OF REMAINS 0		DATE OF DEATH 7701 80 CODE DIST. PT.	
PLOT 2 12		GRAVE 1474		COUNTRY PHILIPPINE ISLANDS		CAUSE OF DEATH 6	
SECTION B — CONSIGNEE AND NEXT OF KIN							
NAME AND ADDRESS OF CONSIGNEE FORT MC KINLEY CEMETERY MANILA, PHILIPPINE ISLANDS				NAME AND ADDRESS OF NEXT OF KIN (BY ADMINISTRATIVE DECISION)			
SECTION C — DISINTERMENT AND IDENTIFICATION							
NAME UNK X-303 UNK X-450 (Maus)		SERIAL NUMBER		RANK		DATE OF DEATH 22 Sept 1948	
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input 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 (2) Remains Tags - UNK X-450 (Maus)							
REMAINS PREPARED AND PLACED IN CASKET							
DATE 22 Sept 1948		BY C. MAXLEE FANN					
CASKET SEALED BY C. MAXLEE FANN				EMBALMER (Signature) <i>C. Maxlee Fann</i> C. MAXLEE FANN			
CASKET BOXED AND MARKED DATE 22 Sept 1948		BY HORACE L. ALLISON Sgt., Inf.		SHIPPING ADDRESS VERIFIED BY CHARLES R. BATES, 1st Lt, USAFR			
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct. <i>Charles R. Bates</i> CHARLES R. BATES, 1st Lt, USAFR SIGNATURE OF GRS INSPECTOR							
1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.							

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM AGRS MAUSOLEUM		TO FORT MCKINLEY MILITARY CEMETERY	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER <i>[Signature]</i>	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE FEB 16 1950

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	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

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

7. SHIPPED

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

Navy

HEADQUARTERS
PHILCOB ZONE
AMERICAN GRAVES REGISTRATION SERVICE

13 Jan. 1950
Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 303, Plot 2,
Row 12, Grave 1474, USMC Manila #2, Luzon, P.I., have
been reviewed and it is the opinion of this office that insuf-
ficient evidence is available to establish the identity of this
deceased, and that these remains should be classified as un-
identifiable.

FOR THE COMMANDING OFFICER:

[Handwritten Signature]
E. J. JENSEN
Captain, QMC
Chief, Records Branch

Attch: Form 1044

APPROVED UNIDENTIFIABLE

31 JAN 1950

Final 1'

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON 25, D. C.

IN REPLY REFER TO

QMGYG 293

Unknown X-303

(USAF Cem. Manila # 2)

23 September 1946

MEMORANDUM FOR IDENTIFICATION SECTION:

SUBJECT: Unknown X-303 (Manila No. 2), Non-identification of.

1. The dental chart on the reverse side of the Report of Interment for Unknown X-303, buried in Grave 1474, Row 12, Plot 2, U.S. Armed Forces Cemetery, Manila No. 2, Luzon, P.I. has been checked with the dental record of Bridgeman G. Hall, 385 62 94, RM2c, USN, by the Dental Professional Division, Bureau of Medicine and Surgery. They state that the dental chart for Unknown X-303 cannot be identified as belonging to Bridgeman G. Hall.



J. K. WAITE

Lieut. (HC) USN

Navy Liaison Officer, AGRS.

1 Incl:

Rpt of Interment - X-303

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN X-450 (Form.UNK-303 USAF Cem.Manila #2, Luzon, P.I.)				2. DATE OF REPORT 13 Jan 1950	
3. NAME OF CEMETERY AGRS Mausoleum, Manila,P.I.			4. PLOT Hanger P10	5. ROW Bay A	6. GRAVE Crypt 45
			7. DATE OF DISINTERMENT		REINTERMENT
PHYSICAL DESCRIPTION					
8. ESTIMATED WEIGHT UTD		9. ESTIMATED HEIGHT 5'10"		10. COLOR OF HAIR UTD	
11. RACE UNK					
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS None					
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES UTD					
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 None					
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) None					

MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X"ED OUT AND LABELED THUS:

TOP VIEW

SIDE VIEW



CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:

Gold Crown, Porcelain Crown



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

Gold Bridge



FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:

Gold Filling, Silver Filling



CARIES (Cavities): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:

Cavity Decayed



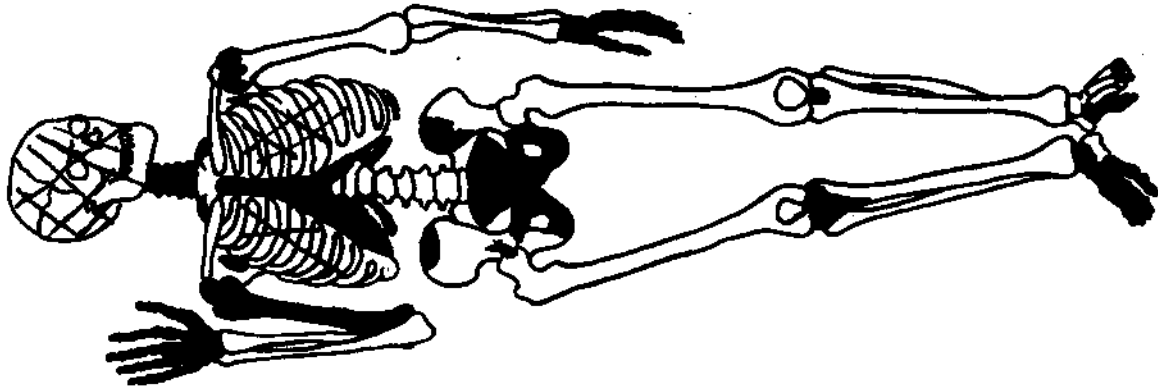
RIGHT								LEFT								
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
						⊗	⊗			MISSING						
Side Views								Side Views								
Top Views								Top Views								
Side Views								Side Views								
X	A		⊗			⊗							A		X	
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16	

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 R. Nichols
 PAUL R. NICHOLS
 Chief, Ident. Sect.

Incl 3

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 ID tags, burial bottle, personal effects, or other means
of identification found with remains.

Est. weight of remains - 7 lbs.

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, Ident. Sect.

SIGNATURE

Paul R. Nichols

X-303

Formerly interred ^{X-303} USAF Cemetery Manila #2, Luzon, P. I. 2 12 1972

~~Formerly #3~~

Formerly #3 USAF Cem. Ft. Wm. McKinley, Luzon, P. I. F 2 10

Formerly

X-450

AGRS MAUS. MANILA, P. I.

812 A 45

Formerly X-3 USAF Com. Ft. Wm. McKinley, Luzon, P. I.	F	2	10
---	---	---	----

Now Stored X-450 AGRS Maus., Manila, P. I.	812	A	45
--	-----	---	----

X-303 USAF Com. Manila #2, Luzon, P. I.	2	12	1474
---	---	----	------

Now Stored X-450 AGRS Maus., Manila, P. I.	812	A	45
Formerly X-303 USAF Com. Manila #2, Luzon, P. I.	2	12	1474
X-3 USAF Com. Ft. Ma. McKinley, Luzon, P. I.	F	2	10

18. TOOTH CHART		TOP VIEW	SIDE VIEW
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	P	←	MAXILLA				MISSING →			
P	a		P		P	P	P	P	P	P			a		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 AND INDICATE RETAINING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

No loose maxillary teeth present with remains.

~~Paul P. Nichols~~
 PAUL P. NICHOLS
 Chief, Identification Section

Inc # 2

IDENTIFICATION DENTAL CHART

DATE 13 Oct 47

NAME (Last, First, Middle Initial) UNKNOWN X-450 (Formerly UNK X-303, USAF Cem Manila #2, Luzon, PI)

RANK EM

SERIAL NUMBER Unknown

UNIT Unknown

ORGANIZATION USN

CAUSE OF DEATH

DATE OF DEATH

PLACE OF DEATH Unknown

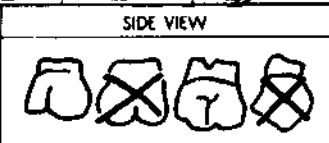
PLACE OF BURIAL AGRS Mausoleum, Manila, P.I.

PLOT 812

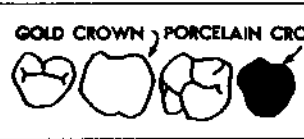
ROW A

GRAVE 45

MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED THUS:



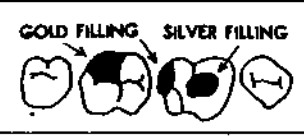
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:



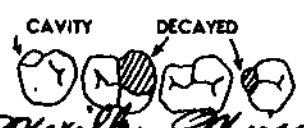
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



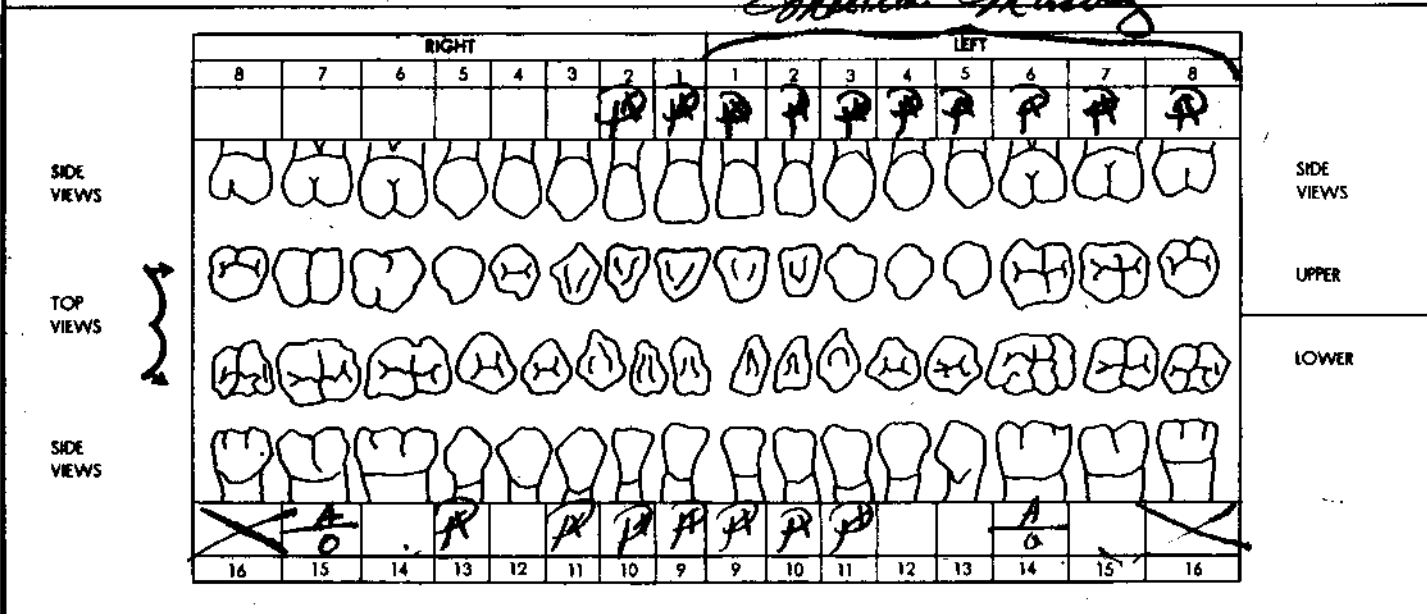
FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:



CARIES: (Cavities): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:



Maxilla Missing



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: Unable to tell whether upper left teeth P or X. Left quadrant maxilla missing.

W. L. MANTON COPY

Felix Glass
GOLDEN FRAME
1st Lt., OMC

SIGNATURE OF OFFICER OR OTHER PERSON WHO PREPARED DENTAL CHART
s/ Magno A. Noble
p/ MAGNO A NOBLE
CIP, AGRS Mausoleum, Manila, PI

VERIFIED OFFICER
/s/ Felix Glass
/p/ FELIX GLASS, Capt., DC, 01717213
13 Oct 47

X-452

IDENTIFICATION DENTAL CHART

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

UNKNOWN X-450 (Formerly UNK X-303, USAF)
Cem Manila #2, Luzon, P.I.

13 Oct 47

<u>Unknown</u> LAST NAME	<u>Unknown</u> FIRST	<u>Unknown</u> INITIAL	<u>EM</u> RANK	<u>Unknown</u> SERIAL NO.	<u>Unknown</u> DATE
<u>Unknown</u> UNIT			<u>USN</u> ORGANIZATION		
<u>Unknown</u> PLACE OF DEATH		<u>AGBS Mausoleum, Manila, P.I.</u> PLACE OF BURIAL		<u>812</u> MANAGER	<u>45</u> GRAVE NO.
		<u>MISSING</u> STORAGE			

	RIGHT								LEFT								
	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
TYPE							X	X	X	X	X	X	X	X	X	X	TYPE
LOCATION																	LOCATION

INSIDE — LOOKING OUT

	RIGHT								LEFT								
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16	
TYPE	X	H		X		X	X	X	X	X	X			H		X	TYPE
LOCATION		O												O			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	OCCLUSAL (BITING SURFACE BACK TEETH)
FIXED BRIDGE (INCL. ABUTMENTS)	SILICATE OR PORCELAIN	DISTAL (BETWEEN-TOWARD BACK)
TEETH REPLACED BY DENTURE	OXYPHOSPHATE (CEMENT)	LINGUAL (TOWARD TONGUE)
POSTHUMOUSLY MISSING (LOST AFTER DEATH)		FACIAL (TOWARD CHEEK)

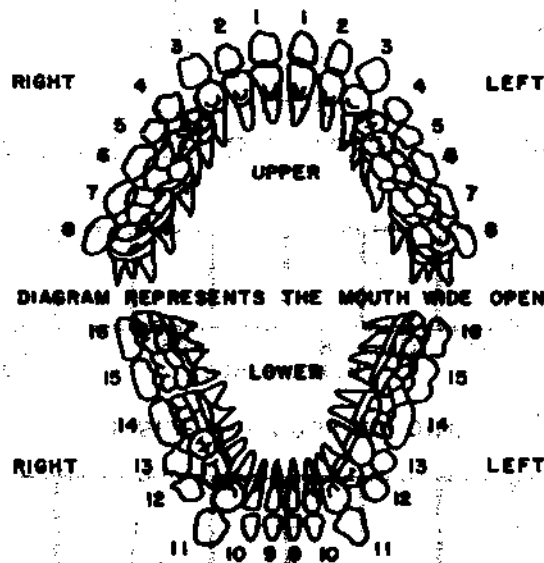
INSTRUCTIONS:

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 $\frac{3}{4}$), $\frac{3}{4}$ GOLD CROWN WITH SILICATE WINDOW.

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



REMARKS:

Unable to tell whether upper left teeth P or I. Left quadrant of maxilla missing.

/s/ Magno A. Noble
SIGNATURE OF PERSON WHO PREPARED CHART

/s/ Felix Glass
VERIFIED BY DRS OFFICER

/p/ MAGNO A. NOBLE
NAME AND RANK TYPED OR PRINTED

/p/ FELIX GLASS, Capt. DG, 01717213
NAME AND RANK TYPED OR PRINTED

CIP, AGRS Mausoleum, Manila, P.I.
PLACE OR NO. WHERE THIS FORM ACCOMPLISHED

13 Oct 47
DATE

A CERTIFIED TRUE COPY:

George T. Gamboa
GEORGE T GAMBOA
2d Lt MAC

IDENTIFICATION CHECK LIST

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

UNKNOWN X-450 (Formerly UNK X-303, USAF
~~Unknown X Gen Manila #2, Luzon, P.I.~~)
 Cemetery AGRS Mausoleum, Manila, P.I.
 Plot 812 RANGER BAY CRPT
 Row A Grave 45

AGRS Mausoleum, Manila
 1. Arrived at cemetery 7 Oct 1947
(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 C M T #1
(Name and organization)

4. Evacuated to Cemetery by C M T #1
(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 _____ Est. Height 5'10 ^{3/4} inches 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 **See tooth Chart**
 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw (Large, small, normal) Circumference of head in inches **UTD**
 (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
 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 (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? _____ Yes _____ If not, explain _____
(Yes-no)

9. Remarks _____ No ROI bottle, personal effects, or I.D. tags found with
remains. ROI shows remains might be those of B.G. Hall, USN, KIA. Extreme
wounds #266 A. Estimated weight of remains 7 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/ Alton E. Jones
(Officer's Name)

SP-6 062812
Rank Service

AGRS Mausoleum
(Organization)

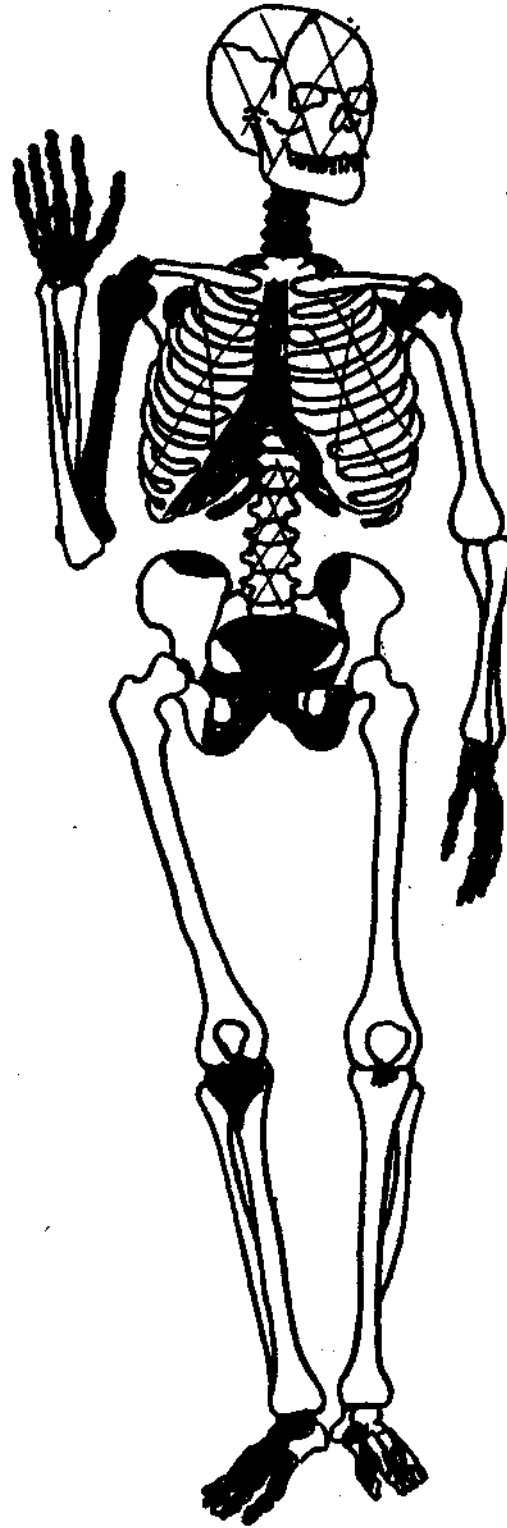
* CERTIFIED TRUE COPY:

George T. Gansoa
GEORGE T GANSOA
2d Lt MAC

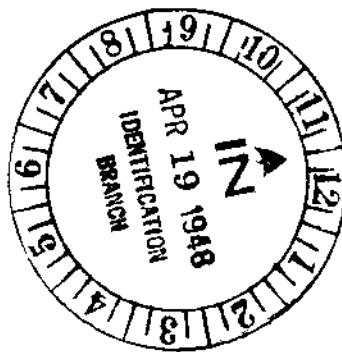
SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY) B. G. Hae

X-450
formerly X-303
(BTR)



fragments of ribs and
vertebrae



IDENTIFICATION CHECK LIST

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

UNKNOWN X-450 (Formerly UNK X-303, USAF
~~Unknown~~ Cem Manila #2, Luzon, P.I.)
Cemetery AGRS Mausoleum, Manila, P.I.
HANGER BAY CRYPT
Plot 812 Row A Grave 45

AGRS Mausoleum, Manila

1. Arrived at ~~cemetery~~ 7 Oct. 1947
(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 C M T #1
(Name and organization)

4. Evacuated to Cemetery by C M T #1
(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		N	
Jacket, Combat		O	
Mackinaw		N	
Sweater		E	
Jacket, HBT			
* Shirt, Wool OD			
Undershirt, Wool			
Undershirt, Cotton			
Trousers, HBT			
* Trousers, Wool OD			

Done 1/4

Belt, web /
Drawers, wool /
Drawers, cotton /
Leggings, wool /
Socks, cotton /
* Shoes / (type) /

Overshoes N
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' 10 3/4 inches 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 T (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, widows peak, distinctive cutting or other characteristics)

Sideburns (Color, setting, shape) Mustache (Color, size, shape) Beard or (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 See tooth Chart
 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw (Large, small, normal) Circumference of head in inches UTD
 (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 (Inseam, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

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

Evidence of healed fractures (Nose, arms, legs,

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

~~CONFIDENTIAL - SECURITY INFORMATION~~


3

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, personal effects, or I.D. tags found with
remains. ROI shows remains might be those of B.G. Hall, USN, KIA,
Extreme wounds #256 A. Estimated weight of remains 7 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.

A TRUE COPY:

GOLDEN S. FRAME
1st Lt., QMC

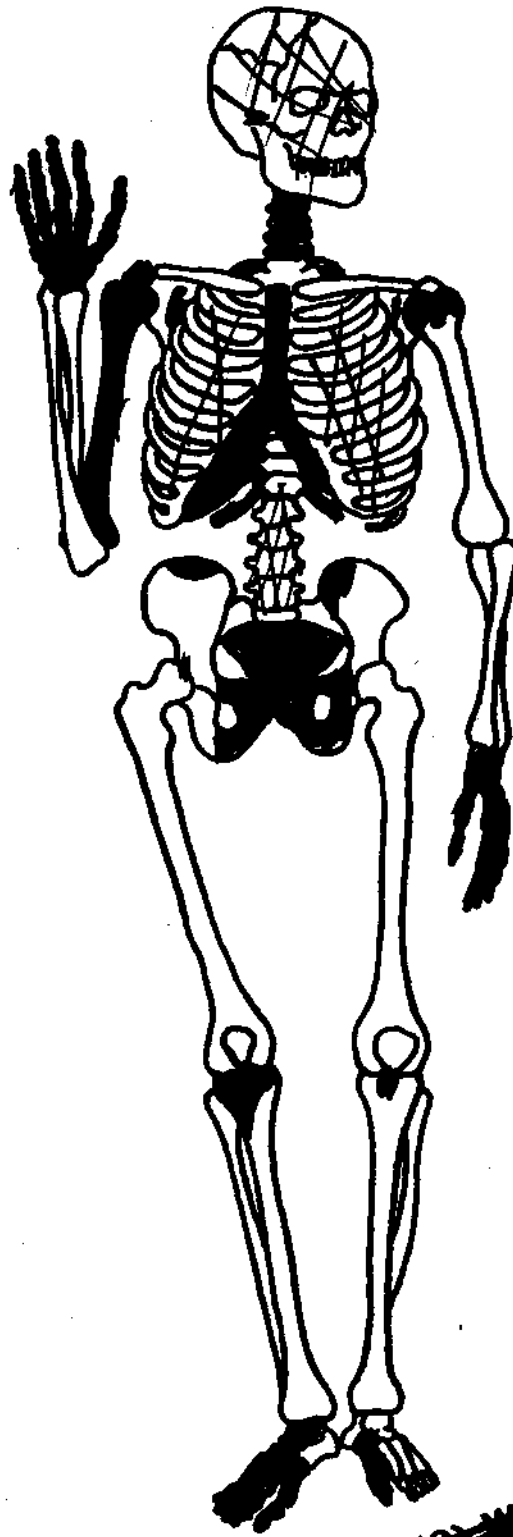
/s/ Alton E. Jones
(Officer's Name)
SP-6 062812
Rank Service
AGRS Mausoleum
(Organization)

A CERTIFIED TRUE COPY:
/s/t/ GEORGE T GAMBOA
2d Lt MAC

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

X-450
Punery 1-20-23
(BTB B.G. Hall)




fragments of ribs
and vertebrae

CHART "A"

/aan

RESTRICTED

4481

WD GMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT STORAGE (AR 30-1810 and AR 30-1815)			DATE OF REPORT 16 Oct 47	
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION. NAME (Last, first, middle initial) UNKNOWN X-450 (Formerly UNK X-303, USAF Cem Manila #2, Luzon, P.I.)			SERIAL NO. Unknown	
GRADE EM		ORGANIZATION USN		BRANCH OF SERVICE Navy		
RACE Unknown		RELIGION Unknown		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY		
PLACE OF DEATH Unknown		CAUSE OF DEATH Wounds extreme #256A			DATE OF DEATH 10 Dec 41	
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 possible, fill in section 2 on reverse) APPROVED UNIDENTIFIABLE 12 JAN 1950				
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 AGRS MAUSOLEUM, MANILA, P.I.						
DATE OF BURIAL STORAGE 14 Oct 47	HOUR 0800	BURIED IN (Shroud, blanket, or some of other) STORAGE Casket	TYPE OF GRAVE MARKER None	PLOT No. 1 ANGER 812	ROW No. BAY A	GRAVE No. CRYP 45
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 Manila #2, Luzon, P.I.			PLOT No. 2	ROW No. 12	GRAVE No. 1474
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) STORED Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes					
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORAGE UNKNOWN X-457		RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYP 47	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORAGE UNKNOWN X-471		RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYP 43	
SIGNATURE OF PERSON PREPARING REPORT <i>Wm E Gilbert</i> Wm E. GILBERT, Adm. Asst.			SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>Lucio S Panopio Jr</i> 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

July 79

Section 3.—UNIDENTIFIED REMAINS.

INSTRUCTIONS:


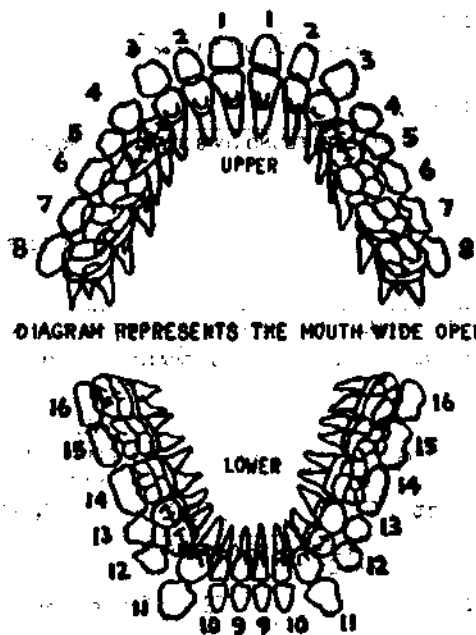




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

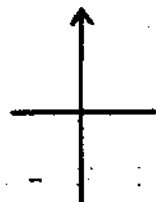
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
--------	--------	---------------	---------------	-------------------------------

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

OTHER IDENTIFICATION CLUES

FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER</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>	

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



REMARKS:

Identification Check List and Dental Chart accomplished.

24 NOV 1947

RIGHT
LITTLE FINGER

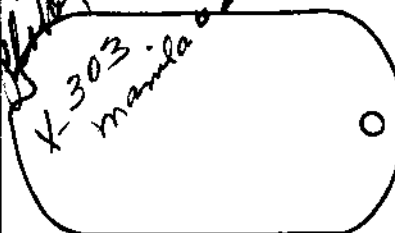
RESTRICTED

WD QMC FORM 1042
(Rev. 1 Apr. 1946)
(Supersedes GRS Form 1)

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

DATE OF REPORT
16 Oct 47

Impress Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN X-450 (Formerly UNK X-303, USAF Com Manila #2, Luzon, P.I.)		SERIAL No. Unknown
GRADE EM	ORGANIZATION USN	BRANCH OF SERVICE Navy
RACE Unknown	RELIGION Unknown	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH Unknown	CAUSE OF DEATH Wounds extreme #256A	DATE OF DEATH 10 Dec 41
---------------------------	--	----------------------------

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 2 on reverse) APPROVED UNIDENTIFIABLE 1 JAN 1950
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
AGRS MAUSOLEUM, MANILA P.I.

DATE OF BURIAL 14 Oct 47	HOUR 0800	BURIED IN (Shroud, blanket, or name of other) Casket	TYPE OF GRAVE MARKER None	PLOT No. 812	ROW No. A	GRAVE No. 45
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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 Manila #2, Luzon, P.I.	PLOT No. 2	ROW No. 12	GRAVE No. 1474
--	---	---------------	---------------	-------------------

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY A TRUE COPY: <i>Golden J. Frame</i> GOLDEN J. FRAME 1st Lt., QMC
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-457	RANK	SERIAL No.	ORGANIZATION	GRAVE No. 47
---	------	------------	--------------	-----------------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-471	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
--	------	------------	--------------	-----------

SIGNATURE OF PERSON PREPARING REPORT s/t/ Wm R. GILBERT, Adm. Asst.	SIGNATURE OF OFFICER VERIFYING REPORT Lucio S Panopio, Jr. LUCIO S PANOPIO, Jr., 2nd 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

met 2

Section 3.—UNIDENTIFIED REMAINS.

INSTRUCTIONS:


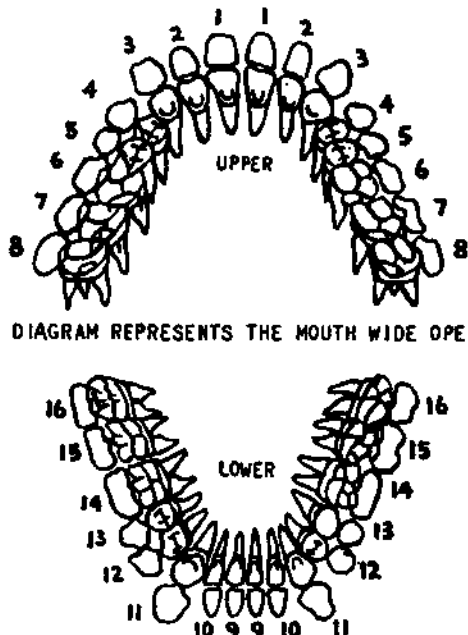




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

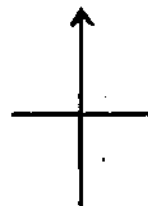
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS

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

OTHER IDENTIFICATION CLUES

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

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



REMARKS:

Identification Check List and Dental Chart accomplished.

RESTRICTED

N 4481

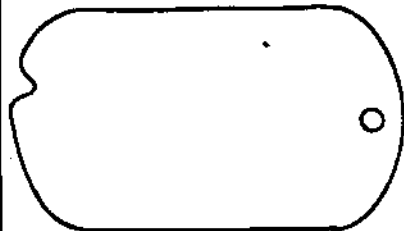
WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

Jan 46

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)
U N K N O W N X-303 (Cem Manila #2)
Formerly UNKNOWN #3 (Cem Ft Wm McKinley)

SERIAL NO.

GRADE

EL.

ORGANIZATION

USN

BRANCH OF SERVICE

Navy

RACE

RELIGION

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

PLACE OF DEATH

CAUSE OF DEATH

Wounds extreme #256A

DATE OF DEATH

10 Dec 41

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)

APPROVED UNIDENTIFIABLE
31 JAN 1950

WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)

Yes (2)

IDENTIFICATION SECTION
REPATRIATION RECORDS BRANCH
MEMORIAL DIVISION

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

None

None

CATEGORY III CASE
NO CLUES
IDENTIFICATION IMPOSSIBLE
AT PRESENT TIME

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.
22 Dec 45	0900	Shelter Half	Cross	2	12	1474

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 Ft Wm McKinley, Luzon, P I	F	2	10

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)	BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
Yes	Yes					1473
		BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)				GRAVE No.
		UNKNOWN X-304				1475

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
R. C. BARRETT, T/4, GRS.	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

771 71

27 FEB 1946

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.

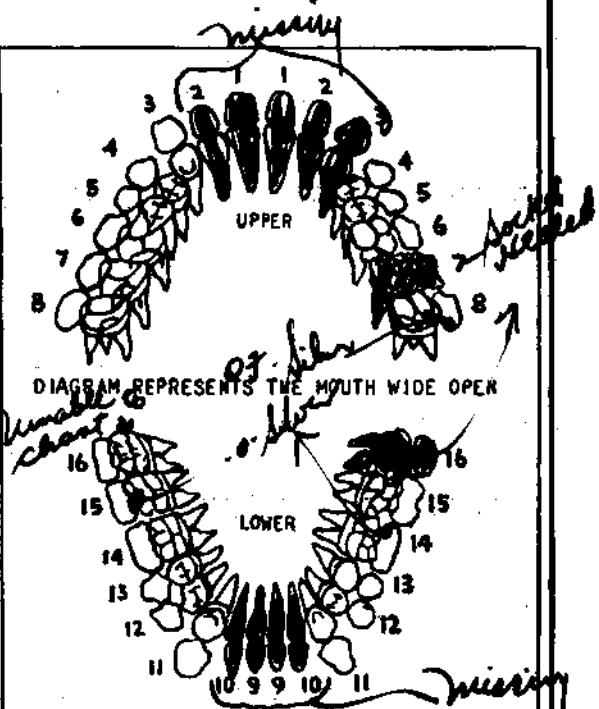
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS

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

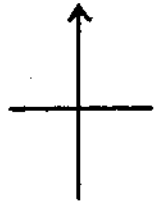
OTHER IDENTIFICATION CLUES

Comparison of remnants of original burial records with original cemetery records indicate these remains very probably those of B. G. Hall, Radioman 3c, USN.

FILLINGS	 SILVER FILLING GOLD FILLING
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:

RESTRICTED

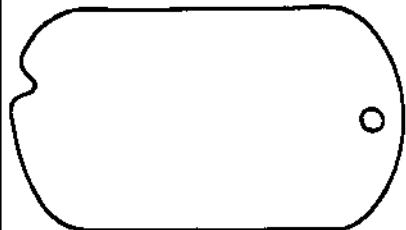
WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

18 Jan 46

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)

U N K N O W N X-303 (Cem Manila #2)
Formerly UNK.OWN #3 (Cem Ft Wm McKinley)

SERIAL NO.

GRADE

EM

ORGANIZATION

USN

BRANCH OF SERVICE

Navy

RACE

RELIGION

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

PLACE OF DEATH

CAUSE OF DEATH

Wounds extreme #256A

DATE OF DEATH

10 Dec 41

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)

APPROVED UNIDENTIFIABLE

31 JAN 1950

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.
22 Dec 45	0900	Shelter Half	Cross	2	12	1474

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 Ft Wm McKinley, Luzon, P I	F	2	10

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

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

GOLDEN J. FRAME
1st Lt., QMC

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE No.
				1473
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE No.
UNKNOWN X-304				1475

SIGNATURE OF PERSON PREPARING REPORT

/s/t/ R. C. BARRETT, T/4, GRS.

SIGNATURE OF GRS OFFICER IN CHARGE OF THE REPORT

/s/t/ GOLDEN J. FRAME, 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

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.

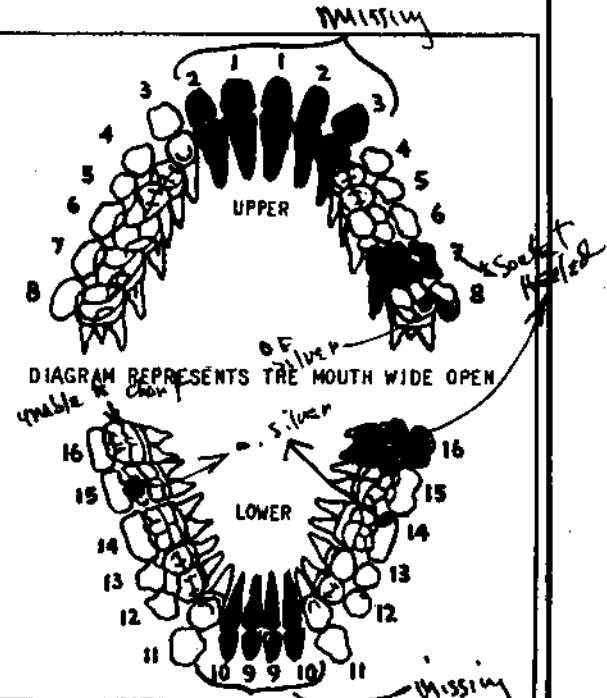
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth 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	

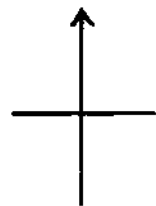
OTHER IDENTIFICATION CLUES

Comparison of remnants of original burial records with original cemetery records indicate these remains very probably those of B. G. Hall, Radioman 3c, USN.

FILLINGS	<p>SILVER FILLING GOLD FILLING</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: