

/fms

Interred 13 Oct 1949
L 12 11 Ft. McKinley

DISINTERMENT DIRECTIVE

1

Carl R. H. Mark
Cemetary Superintendent

NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7747 00226

DATE
15 06 48
DAY MONTH YEAR

NAME: *99* UNKNOWN X-000381
SERIAL NUMBER: UNKNOWN X-000381
RANK: *glt*
ARM: 0
DATE OF DEATH: DAY MONTH YEAR

CEMETERY: USAF CEMETERY MANILA NO 2
DISPOSITION OF REMAINS: 7701 80
CODE: DIST. PT.

PLOT: 2 ROW: 13 GRAVE: 1593 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: UNKNOWN X - 381 SERIAL NUMBER: 6564899 RANK: Sgt DATE OF DEATH: 7 Jan 1942 DATE DISTINTERRED: 21 Sept 48
IDENTIFICATION TAG ON: REMAINS MARKER ORGANIZATION: UNKNOWN RELIGION: IDENTIFICATION VERIFIED BY: WILLIAM A. MULLINS, 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: Marker shows Unknown X - 301 MURRAY, James H., Ash: 6564899 and Rank - Sgt. 2 Identification tags - Unknown X-659, Formerly Unknown X-381

REMAINS PREPARED AND PLACED IN CASKET
DATE: 21 Sept 48 BY: WILLIAM A. MULLINS

CASKET SEALED BY: WILLIAM A. MULLINS EMBALMER (Signature): *William A. Mullins* WILLIAM A. MULLINS

CASKET BOXED AND MARKED: DATE: 21 Sept 48 BY: HORACE L. ALLISON, Sgt. SHIPPING ADDRESS VERIFIED BY: HONORIO V. AURELIO, 1st Lt., INF.

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

Honorio V. Aurelio
HONORIO V. AURELIO, 1st Lt., INF.
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	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Case R. Mark</i>	DATE 13 OCT 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	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

BASIC: Ltr fr Dept of the Army, OQMG, Wash. 25, D.C., file QMGMT 293
~~Unknowns X-381, 382 & 383 (Manila #2) P.I., dtd 2 Mar 48, subject:~~
Identification of Unknown Deceased.

GSGPR 293

1st Ind

CRHM/JGS/gdg*

Headquarters, PHILRYCOM Sector, American Graves Registration Service
APO 707, 12 April 1948

293. Unit Manila #2 X381 cc

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

Reply to reference letter was forwarded 12 April 1948.

FOR THE COMMANDING OFFICER:

Daniel E. Kalish

DANIEL E. KALISH
1st Lt., Cml. C.
Asst. Adjutant

1 Incl: n/c

293 Unit Manila #2 X381 cc
PT (Pres.) Memorials #291

X-381, 382, 383

4/27/48
4/27/48
4/27/48
4/27/48
4/27/48

APR 28 1948
NOTIFICATION
MAY 1948

RECEIVED
APR 27 1948
C.O.M.A.
E & R BR.

APR 13 1948
DRAFT
FIF

DEPARTMENT OF THE ARMY
~~WAR DEPARTMENT~~

OFFICE OF THE QUARTERMASTER GENERAL

IN REPLY REFER TO QMGMT 293 WASHINGTON 25, D. C.

Unks. X-381, 382 & 383
(Manila #2) P.I.

2 March 1948

AGRS

SUBJECT: Identification of Unknown Deceased

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

1. Reference is made to letter this office dated 26 November 1947, copy inclosed, to which no reply has been received.

2. It is requested that the status of the above communication be forwarded to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

James C. MacFarland

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

1 Incl:
Cpy ltr. dtd 26 Nov 47

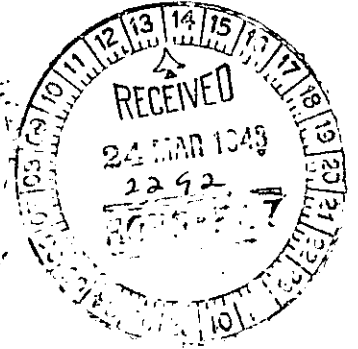
RECORDED COPY
0000

1948 3 10 11:00 AM

MAR 2 4 10 PM '49

DDMG
MAIL & RECORDS BRANCH

RECEIVED
24 MAR 1949



DEPARTMENT OF THE ARMY

QMGMU
Unknowns X-318, 382 & 383
(Manila #2) P.I.

26 November 1947

SUBJECT: Identification of Unknown Deceased

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

1. Reference is made to Reports of Reinterment submitted to this office for Unknowns X-381, X-382 and X-383, Plot 2, Row 13, Graves 1593, 1592, and 1591, respectively.

2. It is requested that the remains of these casualties be exhumed in the presence of a medical officer and Revised Forms 1044 be accomplished, indicating all fillings and extracted or posthumously missing teeth, at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

JAMES C. Mac FARLAND
Major, QMC
Memorial Division

Incl #1

Handwritten scribble

1944

SECRET

FOR THE INFORMATION OF THE:

1. The purpose of this report is to provide a summary of the activities of the organization during the period from January 1, 1944, to December 31, 1944. The information is based on the records of the organization and the reports of its members.

2. The organization has continued to operate in a clandestine manner, with its members working to further its objectives. The organization has been successful in maintaining its secrecy and in carrying out its activities without being detected by the authorities.

3. The organization has received financial support from its members and from other sources. The funds have been used to pay for the expenses of the organization, including the salaries of its members and the cost of its activities.

4. The organization has been successful in recruiting new members and in expanding its activities. It has also been successful in maintaining its contact with its members and in carrying out its operations.

(SIGNED) _____
DIRECTOR

SECRET

mb

DEPARTMENT OF THE ARMY
////////////////////////////////////

MSGT 293

Unks. 2-381, 382 & 383
(Manila #2) P.I. *(incl.)*

2 March 1948

SUBJECT: Identification of Unknown Deceased

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

1. Reference is made to letter this office dated 26 November 1947, copy inclosed, to which no reply has been received.

2. It is requested that the status of the above communication be forwarded to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

1 Incl:
Copy ltr. dtd 26 Nov 47

T. H. MITE
Lt. Colonel, GSC
Memorial Division

2
ERS

gen
SCM

rg

cam

cam
(7)



MAR 2 4 10 PM '48
U. S. ARMY
MAIL & RECORDS BRANCH

(Handwritten signature)

mb

DEPARTMENT OF THE ARMY
////////////////////

SECRET 293

Unkn. # 381, 382 & 383
(Manila #2) P.I. *miss.*

2 March 1948

SUBJECT: Identification of Unknown Deceased

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

1. Reference is made to letter this office dated 26 November 1947, copy inclosed, to which no reply has been received.

2. It is requested that the status of the above communication be forwarded to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

1 Incl:
Copy ltr. dtd 26 Nov 47

F. H. MITZ
Lt. Colonel, GSC
Memorial Division

2
MS

gen
SCM

rg

cam

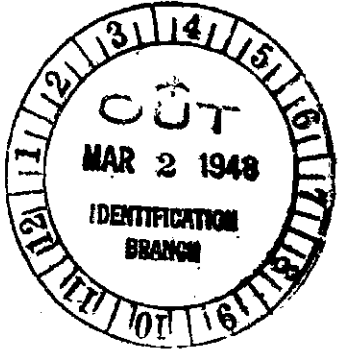
cam
77



MAR 2 4 10 PM '48
U S A R M Y
MAIL & RECORDS BRANCH

[Handwritten signature]

UNIT 8 BECCO 6122 8144
NOV 5 4 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31



Handwritten mark

293 Unk. P.I. (misc.) Manila #2

X-381, 382, 383

Att
the
11/26/47
P.I.

BASIC: Ltr fr Dept of the Army, OCMG, Wash. 25, D.C., file OCMGU 293,
-Unknowns X-381, X-382 & 383 (Manila #2), P. I., dtd 26 Nov 47,
subject: Identification of Unknown Deceased.

GSGFR 293

3rd Ind

ELT/JGS/lfl*

Headquarters, PHILRYCOM Sector, American Graves Registration Service
APO 707, 12 April 1948

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

Forwarded herewith are QMC Forms 1044, 1044A, and 1044B for Unknowns
X-381, X-382, and X-383, USAF Cemetery Manila #2, now designated as Un-
knowns X-859, X-860A, X-860B, X-860C, and X-861, AGRS Mausoleum, Manila,
P. I.

FOR THE COMMANDING OFFICER:

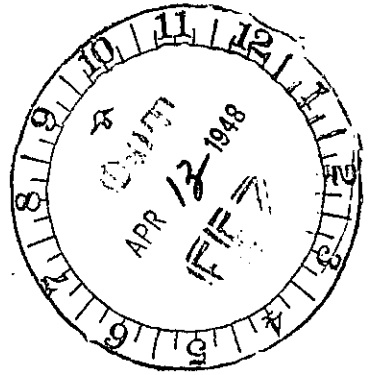
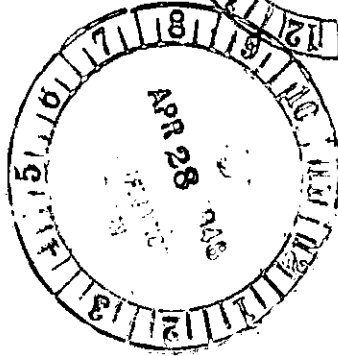
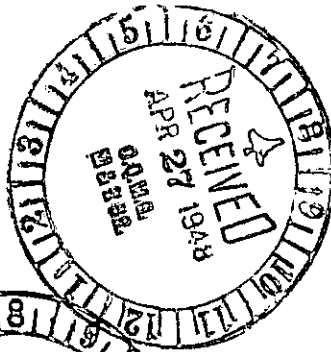
Daniel E. Kalish

5 Incls: n/c
2 copies each w/d.

DANIEL E. KALISH
1st Lt., Cml. C.
Asst. Adjutant

Incls w/d by Ident Section

*Man
File
4/27/48
R Grant
Ident Br.*



BASIC: Ltr fr Dept of the Army, OQMG, Wash. 25, D.C., file QMGMU 293
Unknowns X-381, 382 & 383 (Manila #2) P.I., dtd 26 Nov 47, subj:
Identification of Unknown Deceased.

GSQMM 293

1st Ind

S: 12 Jan 48
GDR/lfl*


PHILRYCOM Sector Graves Registration Service, APO 707, 12 December 1947

TO: Commanding Officer, Central Identification Point, APO 707

1. Attention is invited to letter from the Office of the Quartermaster General, Department of the Army, Washington 25, D.C., file QMGMU 293 Unknowns X-381, 382 and X-383 (Manila #2) P.I., dated 26 November 1947, which is forwarded for your compliance.

2. It is requested that these remains be exhumed in the presence of a medical officer and revised QMC Forms 1044 be accomplished, indicating all fillings and extracted or posthumously missing teeth at the earliest practicable date and this office be notified upon completion thereof.

BY ORDER OF COLONEL MURPHEY:


HAROLD F. REVERSKI
Lt. Colonel, AC
Executive

Incls:

3 sets of Revised Form 1044.

GSQMM 293

2nd Ind

JJM:JCP/nsr

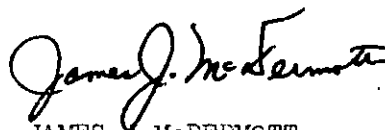
HEADQUARTERS, AGRS CENTRAL IDENTIFICATION POINT, APO 707, 7 April 1948

TO: Commanding Officer, AGRS PHILRYCOM Sector, APO 707

1. Basic communication complied with.

2. Attached herewith are the requested QMC Form 1044, 1044-A and 1044-B, accomplished for subject remains, in triplicate.

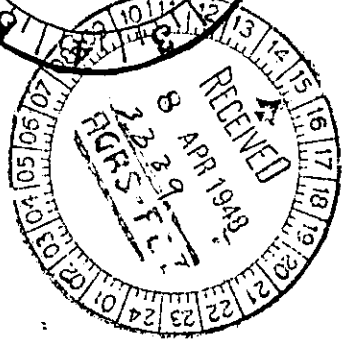
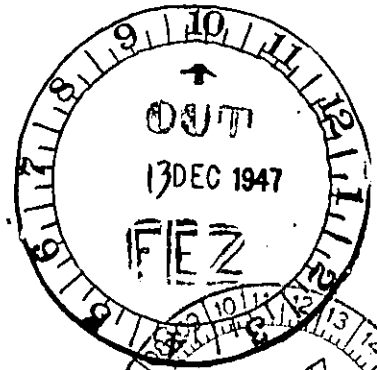
FOR THE COMMANDING OFFICER:


JAMES J. McDERMOTT
Adm Assistant

5 Incls:

1. X-859 (For. X-381)
2. X-860-A (For. X-382)
3. X-860-B (" " ")
4. X-860-C (" " ")
5. X-861 (" " 383)

DEC 15 1947



1947

1948

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DEPARTMENT OF THE ARMY
~~ARMY SERVICE FORCES~~



IN REPLY REFER TO QMGAU 293

OFFICE OF THE QUARTERMASTER GENERAL

WASHINGTON 25, D. C.

293
Unknowns X-381, 382 & 383
(Manila #2) P. I.

26 November 1947

SUBJECT: Identification of Unknown Deceased

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

1. Reference is made to Reports of Reinterment submitted to this office for Unknowns X-381, X-382 and X-383, Plot 2, Row 13, Graves 1593, 1592 and 1591, respectively.

2. It is requested that the remains of these casualties be exhumed in the presence of a medical officer and Revised Forms 1044 be accomplished, indicating all fillings and extracted or posthumously missing teeth, at the earliest practicable date.

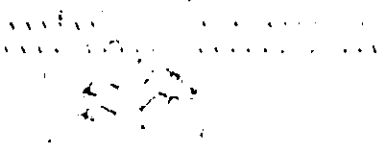
FOR THE QUARTERMASTER GENERAL:

James C. MacFarland
JAMES C. MacFARLAND
Major, QMC
Memorial Division

DEC 15 1947



DEC 26 3 40 P.M. '47
U.S. DEPT. OF COMMERCE
WASHINGTON, D.C.



DEPARTMENT OF THE ARMY

QMCMU 293

Unknowns X-381, 382 & 383
(Manila #2) P. I.

26 November 1947

293 Unk. P. I. (Misc) Manila #2

SUBJECT: Identification of Unknown Deceased

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

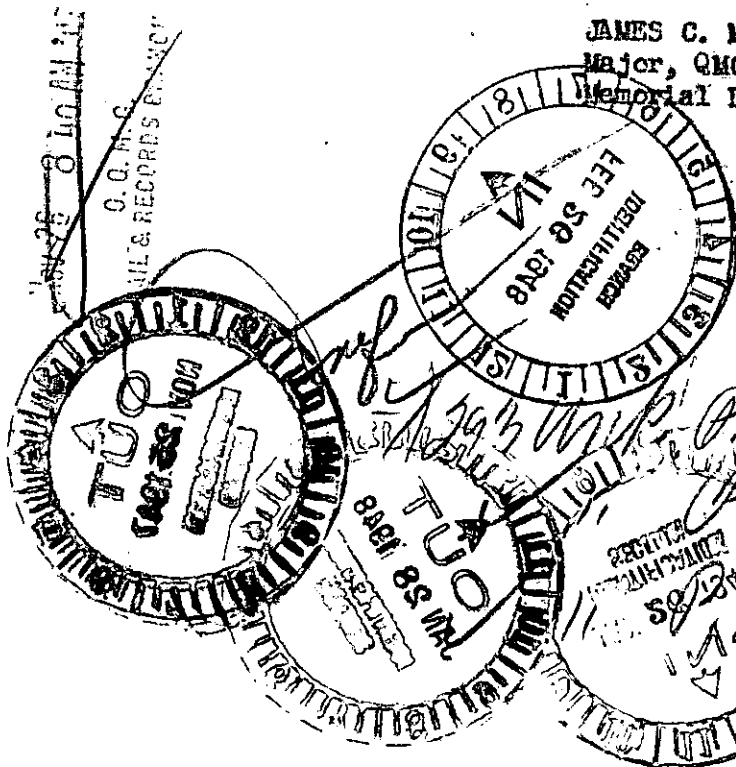
1. Reference is made to reports of Reinterment submitted to this office for Unknowns X-381, X-382 and X-383, Plot 2, Row 13, Graves 1593, 1592 and 1591, respectively.

2. It is requested that the remains of these casualties be exhumed in the presence of a medical officer and Revised Forms 1044 be accomplished, indicating all fillings and extracted or posthumously missing teeth, at the earliest practicable date.

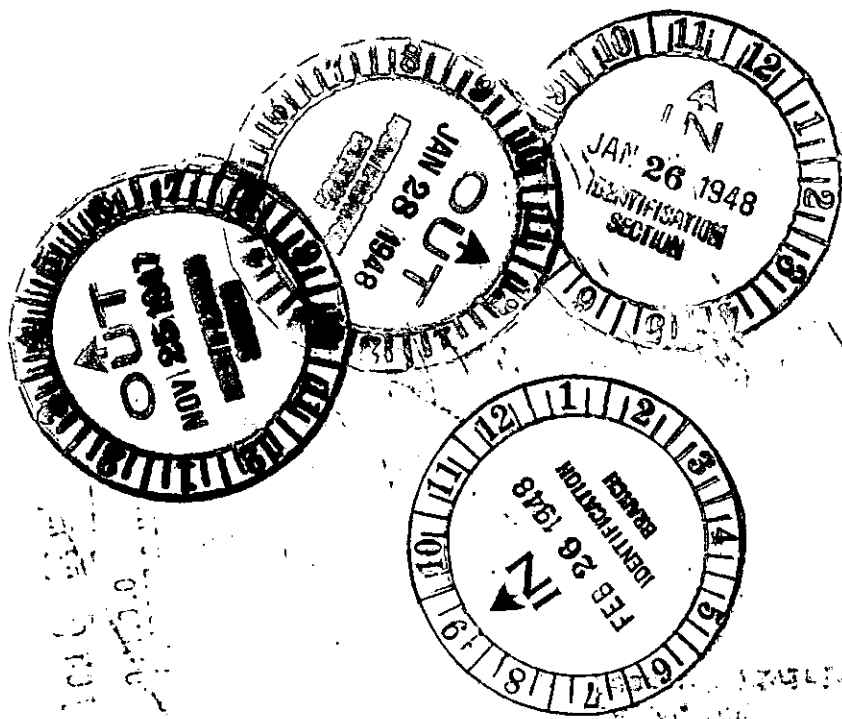
FOR THE QUARTERMASTER GENERAL:

JAMES C. MacFARLAND
Major, QMC
Memorial Division

7/106



wfl
26



NOV 28 1948
 OCT 28 1948

FEB 26 1948
 JAN 26 1948

BM

FOR THE IDENTIFICATION SECTION
 FEDERAL BUREAU OF INVESTIGATION
 DEPARTMENT OF JUSTICE
 WASHINGTON, D. C.
 IDENTIFICATION SECTION
 FEDERAL BUREAU OF INVESTIGATION
 DEPARTMENT OF JUSTICE
 WASHINGTON, D. C.

NOV 28 1948
 OCT 28 1948
 FEB 26 1948
 JAN 26 1948

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILRYCOM SECTOR

GDR/lcr

GSQMM 293 - C

APO 707
5 January 1948
5 January 1948

SUBJECT: Processing of Remains

TO: Commanding Officer, Central Identification Laboratory,
APO 707.

1. It is requested that the following unknowns be processed in accordance with existing standard operating procedures:

	<u>Grave</u>	<u>Row</u>	<u>Plot</u>
Unknown X - 383	1591	13	2
" X - 382	1592	13	2
" X - 381	1593	13	2

2. The following known was also interred with the above unknowns in the same grave at Cabanatuan:

	<u>Grave</u>	<u>Row</u>	<u>Plot</u>
Mancl, Frank J.	1599	13	2

BY ORDER OF COLONEL MURPHYEY:

HAROLD F. REVERSKI
Lt. Colonel, USAF
Executive

CC: Commanding Officer, USAF
Cemetery Manila # 2, APO 358

C O P Y

NOTE:

all removed from grave 816, Cabanatuan POW cemetery
293 X-381, Manila
X-382, Manila - segregated into A, B, C
X-383, Manila

Handwritten:
J. J. N. N.
18 Jan 52

6

DISINTERMENT DIRECTIVE

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE DAY MONTH YEAR

NAME

SERIAL NUMBER

RANK

ARM DATE OF DEATH DAY MONTH YEAR

CEMETERY

DISPOSITION OF REMAINS

PLOT ROW GRAVE

COUNTRY

CODE DIST. PT. CAUSE OF DEATH

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

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISINTERRED

IDENTIFICATION TAG ON
 REMAINS
 MARKER

ORGANIZATION
UNKNOWN

RELIGION

IDENTIFICATION VERIFIED BY
NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES

REMAINS PREPARED AND PLACED IN CASKET

DATE BY CASKET SEALED BY

EMBALMER (Signature)

DATE BY CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY

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

SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

6

DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER 7747 00226

DATE 15 05 46 DAY MONTH YEAR

NAME UNKNOWN SERIAL NUMBER 000381 RANK ARM 0 DATE OF DEATH DAY MONTH YEAR

CEMETERY USAF CEMETERY MANILA NO 2 DISPOSITION OF REMAINS 7701 80 CODE DIST. PT.

PLOT ROW GRAVE COUNTRY PHILIPPINE ISLANDS CAUSE OF DEATH 5

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 SERIAL NUMBER RANK DATE OF DEATH DATE DISTINTERRED IDENTIFICATION TAG ON ORGANIZATION UNKNOWN RELIGION IDENTIFICATION VERIFIED BY NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES 1

REMAINS PREPARED AND PLACED IN CASKET

DATE BY CASKET SEALED BY EMBALMER (Signature)

CASKET BOXED AND MARKED SHIPPING ADDRESS VERIFIED BY DATE BY

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

SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

DOCUMENT NO. 292 - Unk. P. I. (X-381) (Manila #2)

I N D E X S E E T

S U M M A R Y

Letter

26 Nov. 1947

FROM:

COMC

TO:

CG, Philippine-Ryukyus Command, APO 707, San Francisco, Calif.

SUBJ:

Identification of Unknown Deceased

DOCUMENT FILED UNDER NO. 293 - Unk. P. I. (Misc.) (Manila #2)

mf:

FILE UNDER NO. 293 - Unk. P. I. (X-381) (Manila #2)

I N D E X S H E E T

S Y N O P S I S

Letter

26 Nov. 1947

FROM: CCMG

TO: CG, Philippine-Ryukyus Command, APO 707, San Francisco, Calif.

SUBJ: Identification of Unknown Deceased

DOCUMENT FILED UNDER NO. 293 - Unk. P. I. (Misc.) (Manila #2)

mfs

Lewis

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE
APO 900

15 Sept 1949

Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 381, Plot 2,
Row 13, Grave 1593, USMC USAF Cem. Manila #2 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, GMC
Chief, Records Branch

Atch: Form 1044

Received 10/6/49 0018
Not identifiable from
information presently Lewis Del B.
available 10/6/49

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-859				2. DATE OF REPORT 19 Sept 1949			
(Formerly UNK X-381 Manila #2)				4. PLOT 812		5. ROW B	6. GRAVE 390
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.				7. DATE OF DISINTERMENT		REINTERMENT	

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT U T D	9. ESTIMATED HEIGHT 5'7 5/8"	10. COLOR OF HAIR U T D	11. RACE Unknown
-------------------------------------	--	-----------------------------------	----------------------------

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? TO WHAT EXTENT?

YES NO

15. WAS BODY MANGLED? TO WHAT EXTENT?

YES NO

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

N o n e

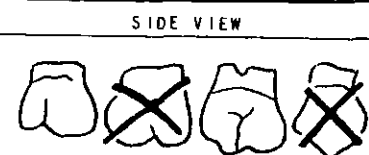
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

N o n e

"UNIDENTIFIABLE"
"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

TOOTH CHART

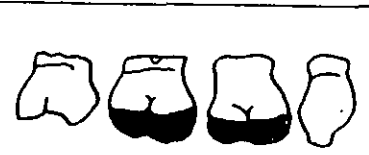
MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED THUS:



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



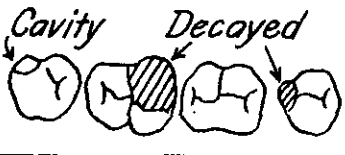
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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		⊗	⊗	⊗		⊗	⊗	⊗	⊗	⊗			Maxilla missing		
Side Views								Side Views							
UPPER								UPPER							
LOWER								LOWER							
Side Views								Side Views							
WORN								WORN							
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."

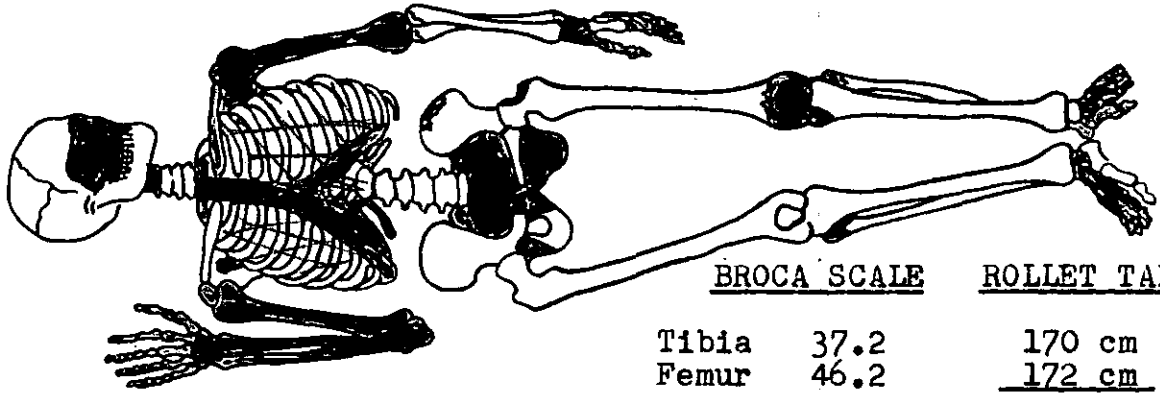
REMARKS: I6 is found loose. R3, R4, and R5 are discolored and all mandibular teeth shows sign of severe attrition.

"UNIDENTIFIABLE"

J. J. McDERMOTT
Laboratory Off. CIP

BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA

19. BLACK OUT PARTS OF BODY NOT RECOVERED



Estimated height - 171 cm or 5'7 5/8".

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 - 6 lbs.

Circumference of skull - 21 1/4 inches.

"UNIDENTIFIABLE"
"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

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

J. J. McDERMOTT
Laboratory Officer, CIP

SIGNATURE

J. J. McDermott

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN: UNKNOWN X-859 (Formerly UNK X-381, USAF Cemetery Manila #2, Luzon, P.I.)			2. DATE OF REPORT 30 March 1948	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.	4. PLOT	5. ROW	6. GRAVE	7. DATE OF
	HANGER BAY	CRYPT		DISINTERMENT REINTERMENT STORAGE
	812	B	390,	16 Oct 47

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT	10. COLOR OF HAIR UTD	11. RACE UTD
----------------------------	---------------------	--------------------------	-----------------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

One (1) embossed tag and (1) cemetery tag received with remains, bearing the following inscriptions:
UNKNOWN X-381, MURRAY, JAMES H. - 6564899 SGT 93 BOMB -
7 JAN 42 1593-13-2. Tags placed with remains.

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

UTD - Skeleton only - Skeletal chart and tooth chart attached.

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


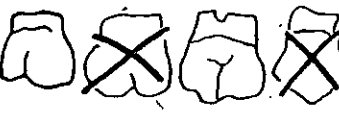


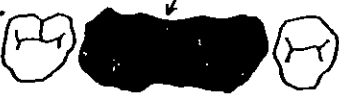




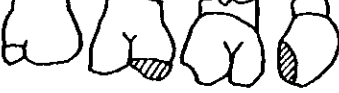
NONE



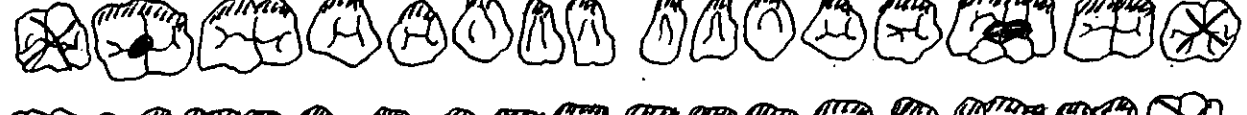

17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

NONE

18.


TOOTH CHART

<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>TOOTH MISSING</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 GROWN PORCELAIN GROWN</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	
		<i>Maxilla Missing</i>								<i>Maxilla Missing</i>								
		<i>D</i>	<i>D</i>	<i>D</i>	<i>D</i>	<i>D</i>	<i>D</i>	<i>D</i>	<i>D</i>	<i>D</i>	<i>D</i>	<i>D</i>	<i>D</i>	<i>D</i>	<i>D</i>	<i>D</i>	<i>D</i>	
SIDE VIEWS																		SIDE VIEWS
TOP VIEWS																		UPPER
																		LOWER
SIDE VIEWS																		
		<i>X</i>	<i>F</i>					<i>Worn</i>						<i>F</i>	<i>X</i>		<i>X</i>	
		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."

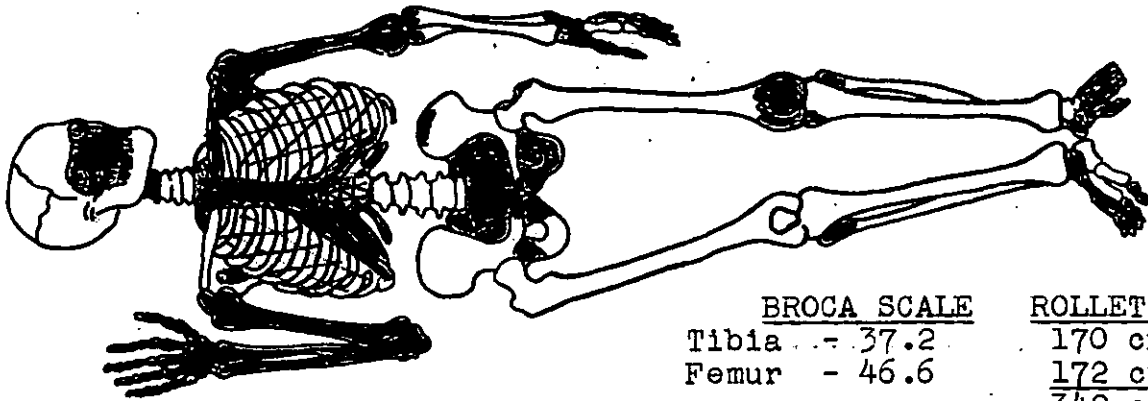
REMARKS: L 6 is found loose. R 3, R 4, and R 5 are discolored and all mandibular teeth shows sign of severe attrition.

CERTIFIED TRUE COPY:

 L S PANOPIO
 1st Lt. INF

s/ Joseph D. Murphy T/5

19. BLACK OUT PARTS OF BODY NOT RECOVERED

Ribs fragments
5 - Femoral Vertebrae



	<u>BROGA SCALE</u>	<u>ROLLET TABLE</u>
Tibia	= 37.2	170 cms.
Femur	= 46.6	172 cms.
		342 cms.

Estimated height 171 cms. or 5' 7-5/8"

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 burial bottle, original I.D. tags, equipment, nor personal effects received with remains. Skull is 21 1/4 inches in circumference. Estimated weight 6 lbs.

This remains is one group disinterred from Grave # 816, Row O, Plot 8 of POW, Cabanatuan, Luzon, P.I.

Embossed tag and cem.tag received with remains described in section 12.

CERTIFIED TRUE COPY:

L. S. Panopio
L S PANOPIO
1st Lt. (INF)

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

p/ EDWARD F. MORIARTY, Emb.Sup.
CIP Laboratory, Manila, P.I.

SIGNATURE

s/ Edward F. Moriarty

IDENTIFICATION CHECK LIST

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

UNKNOWN X-859, (Formerly UNK X-381, USAF
~~Unknown-X-Cem Manila #2, Luzon, P.I.~~)

Cemetery AGRS Mausoleum, Manila, P.I.
 Plot 812 Row B Grave 390

AGRS Mausoleum, Manila, P.I.
 1. Arrived at cemetery 16 Oct 47
 (Hour) (Date)

2. Place of death P.O.W. Camp, Cabanatuan, Luzon, P.I.
 (Name of closest town) (Coordinates and letter Prefix, maps)
 (Sheet, scale and serials used)

3. Remains ~~covered~~ or disinterred by AGR Det #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	(Type)		
Raincoat	/		
Overcoat	//		
Jacket, Field	/		
Jacket, Combat	/N		
Mackinaw	O		
Sweater	N		
Jacket, HBT	E		
* 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: Skeletal Remains only - Chart attached.

Age ^{UTD} _____ Height ^{Est} 5'6" Weight ^{Est} 136 lbs 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 _____ ^U
 (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 _____ 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 **Tooth Chart attached.**
 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw (Large, small, normal) **skull**
 Circumference of head in inches **Approximately 21**
 (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
 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, 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.

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 According to original records at HQ USAF Cem I & II shows that these remains could be anyone of the following: MURRAY, James H. SGT. 93 Bomb 6564899; MITCHELL, James S, Pvt 31 Inf 19013612; SNOW, William K, CPO, USN Unknown. (See original papers) no burial bottle, identification tags, personal effects, or other means of identification found with remains. Estimated weight of remains 6 lbs. Cross reference with this case X-859 are cases X-860-A, X-860-B, X-860-C and X-861.

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/ Edward H. Marshall
(Officer's Name)

SP-8 C-062874
Rank Service

CIP, AGRS Mausoleum
(Organization)

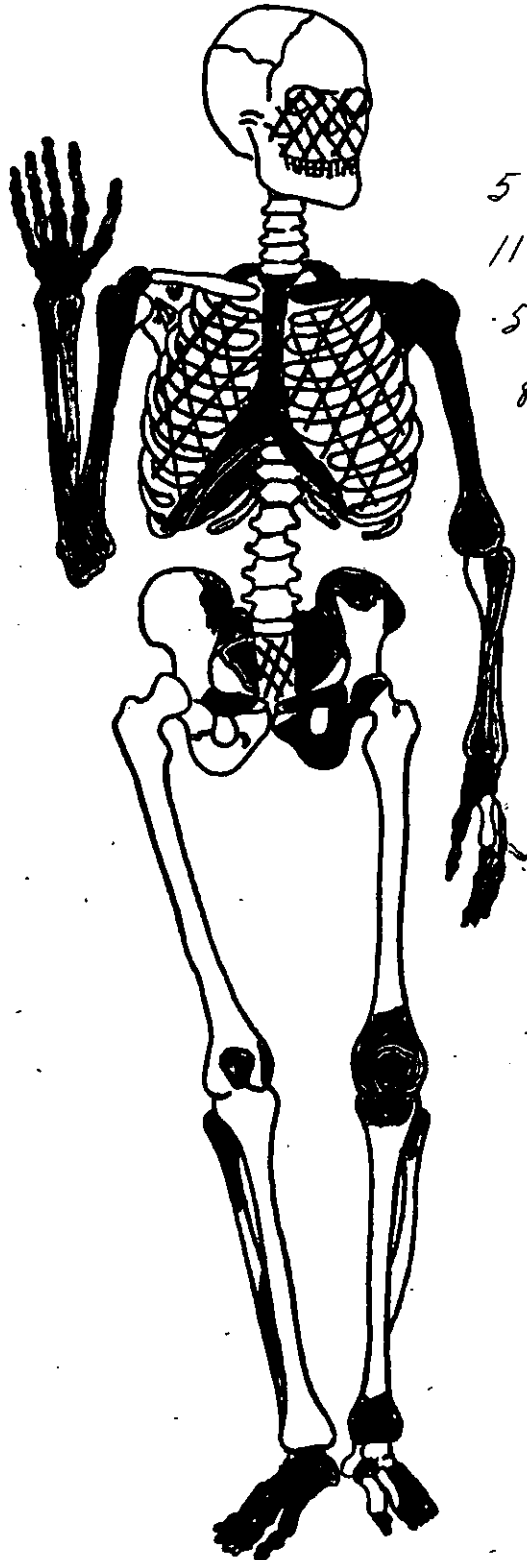
16 Oct 47

A CERTIFIED TRUE COPY:

George T Gamboa
GEORGE T GAMBOA
2d Lt MAC

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



- 5 Cervical vertebrae
- 11 Dorsal fragments
- 5 Lumbar vertebrae
- 8 Rib fragments
- Small bone fragments

Y-859

IDENTIFICATION DENTAL CHART

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

UNKNOWN X-859 (Formerly UNK X-381, USAF
Cem Manila #2, Luzon, P.I.)

16 Oct. 47

DATE

Unknown

Unknown

LAST NAME

FIRST

INITIAL

RANK

SERIAL NO.

Unknown

Unknown

UNIT
POW Camp, Cabanatuan,
Luzon, P.I.

AGRS Mausoleum,
Manila, P.I.

ORGANIZATION

812

B

390

PLACE OF DEATH

PLACE OF BURIAL
STORAGE

PLOT
BANGER

ROW
DAY

GRAVE NO.
R.P.

Maxilla missing

maxilla missing

		RIGHT				UPPER TEETH				LEFT							
		8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
TYPE		\otimes	\otimes	\otimes		A		\otimes	\otimes	\otimes	\otimes	\otimes				\otimes	\otimes
LOCATION						do											

INSIDE — LOOKING OUT

		RIGHT				LOWER TEETH				LEFT							
		16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16
TYPE		\otimes	A												A		\otimes
LOCATION			o												o		

KEY OF SYMBOLS TO BE USED ON ABOVE CHART

SYMBOLS IN WHOLE BOX



EXTRACTED



CAVITY. INDICATE LOCATION



FIXED BRIDGE (INCL. ABUTMENTS)



TEETH REPLACED BY DENTURE



POSTHUMOUSLY MISSING (LOST AFTER DEATH)

TYPE OF FILLING IN UPPER HALF OF BOX.



AMALGAM (SILVER)



GOLD



SILICATE OR PORCELAIN



OXYPHOSPHATE (CEMENT)



LOCATION OF FILLING IN LOWER HALF OF BOX



MESIAL (BETWEEN-TOWARD FRONT)



OCCUSAL (BITING SURFACE BACK TEETH)



DISTAL (BETWEEN-TOWARD BACK)



LINGUAL (TOWARD TONGUE)



FACIAL (TOWARD CHEEK)

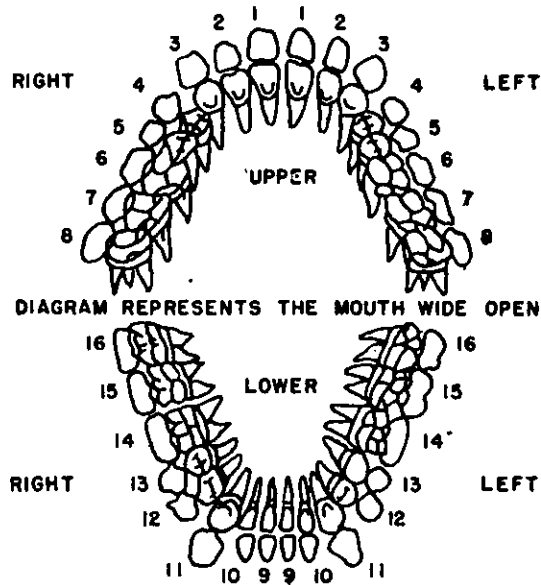
INSTRUCTIONS:

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 3/4), 3/4 GOLD CROWN WITH SILICATE WINDOW.

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



REMARKS:

Attrition posterior teeth. Maxilla missing L 5, 6, 7, 8 R 6, 7, 8 Impossible to determine whether missing teeth in these areas X or P.

/s/ Russell Smith
SIGNATURE OF PERSON WHO PREPARED CHART

/s/ Edward H. Marshall
VERIFIED BY GRS OFFICER

/D/ RUSSELL SMITH T/4
NAME AND RANK TYPED OR PRINTED

/D/ EDWARD H. MARSHALL, SP-8 C-062874
NAME AND RANK TYPED OR PRINTED

CIP, AGRS Mausoleum
PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

16 Oct 47
DATE

CERTIFIED TRUE COPY:

George T. Gamboa
GEORGE T GAMBOA
2d Lt MAC

jaan

APR 5 - 1947

1544
RESTRICTED

U 1544

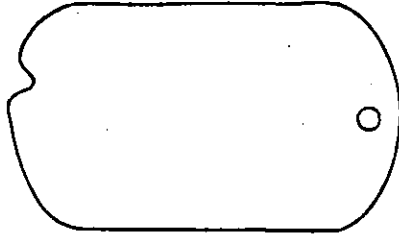
WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

22 Oct 47

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)
UNKNOWN X-859 (Formerly UNK X-381
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
POW Camp, Cabanatuan,
Luzon, P.I.

CAUSE OF DEATH
Unknown

DATE OF DEATH
7 Jan 42

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)

See Remarks

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

GRS 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 16 Oct 47	0800	STORER Casket	None	DANGER - 812	5A7 B	CRTP1 390

WAS THIS A REBURIAL?
(Yes or no) RESTORER
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	13	1593

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)
STORED
WELCH, Walter

RANK	SERIAL No.	ORGANIZATION	GRAVE No.
Pvt	35467624	Co. B, 1873rd Eng.	CRTP1 392

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)
STORED
UNKNOWN X-856

RANK	SERIAL No.	ORGANIZATION	GRAVE No.
			CRTP1 388

SIGNATURE OF PERSON PREPARING REPORT
Wm R Gilbert
Wm R GILBERT, Adm. Asst.

SIGNATURE OF GRS OFFICER VERIFYING REPORT
Lucio S Panopio Jr.
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

Section 3. UNIDENTIFIED REMAINS.

INSTRUCTIONS:


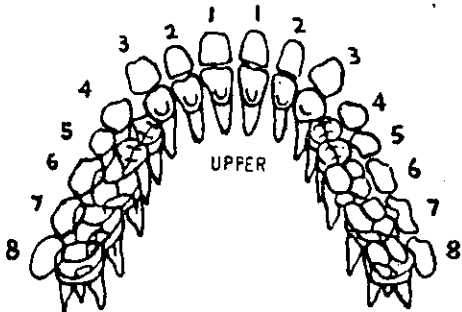
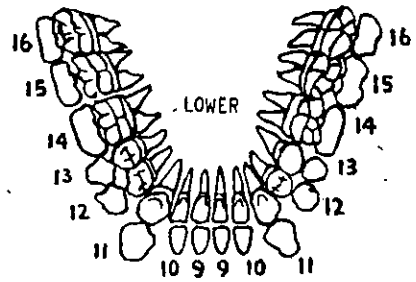





(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

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

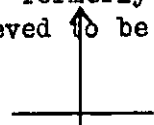
REMARKS: UNKNOWN X-859 AGRS Mausoleum, Manila, P.I., formerly UNK X-381, USAF Cemetery Manila #2, Luzon, P.I., is believed to be any one of the following:

MURRAY, James H Sgt 93 Bomb 6564899

MITCHELL, James S Pvt 31 Inf 19013612

SNOW, William K CPO USN Unkn according to old Report of Interment, USAF Cemetery I & II, Cabanatuan, Luzon, P.I. Cross

REMARKS: reference with this subject case are cases Unknown X-860-A, B, C, and Unknown X-861. Identification Check List and Dental Chart accomplished.



24 NOV 1947

RESTRICTED

U-1544

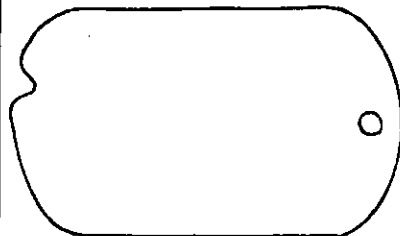
WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

23 Jan 46

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)

UNKNOWN X-381 (MURRAY, James H)
(Formerly UNKNOWN C-22 Cabanatuan Cemetery)

SERIAL No.

6564899

GRADE

Sgt

ORGANIZATION

93 Bomb Sq. ^{WZ}

BRANCH OF SERVICE

Air Corps

RACE

RELIGION

Unknown

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

PLACE OF DEATH

POW Camp Cabanatuan,
Luzon, P I

CAUSE OF DEATH

Unknown

BERI-BERI, DYSENTERY ^{WZ}

DATE OF DEATH

7 Jan 42

EMERGENCY ADDRESSEE (Name, relationship, and address)

SARAH A. MURRAY, ^{Unknown} 5462 MARATHON AVE, HOLLYWOOD, CALIF. ^{WZ}

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)

Three (3) bodies found on common grave. Prison records indicate
Murray, James H Sgt 93 Bomb 6564899
Mitchell, James S Pvt 31 Inf 19013612
Snow, William K CPO USN

WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)

Yes (2)

were buried in this grave. Individual identification impossible

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

Serial 741

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

23 Dec 45

HOOR

1000

BURIED IN (Shroud, blanket, or name of other)

Shelter Half

TYPE OF GRAVE
MARKER

Cross

PLOT No.

2

ROW No.

13

GRAVE No.

1593

WAS THIS A REBURIAL?
(Yes or no)

Yes

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

45.7-70.9 1/50,000
POW Camps I & II Cemetery, Cabanatuan, Luzon, P I

PLOT No.

8

ROW No.

0

GRAVE No.

16

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-382 (MITCHELL, James S)
(Formerly UNKNOWN C-23 Cabanatuan Cemetery)

RANK

Pvt

SERIAL No.

19013612

ORGANIZATION

31st Inf

GRAVE No.

1592

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

UNKNOWN X-380 (PENNY, Bruce H)
(Formerly UNKNOWN C-21 Cabanatuan Cemetery)

RANK

Pvt

SERIAL No.

14039411

ORGANIZATION

7th CWS

GRAVE No.

1594

SIGNATURE OF PERSON PREPARING REPORT

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

SIGNATURE OF GRS OFFICER VERIFYING REPORT

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

Serial 11

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



CAVITIES



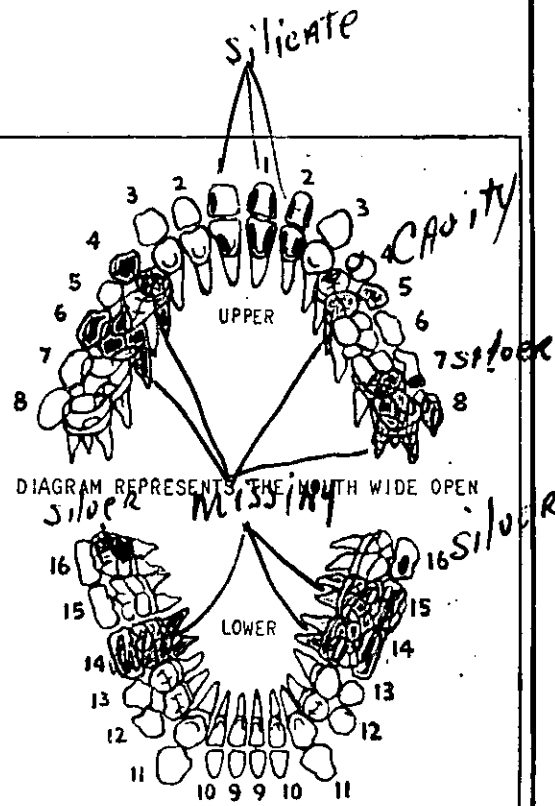
MISSING TEETH



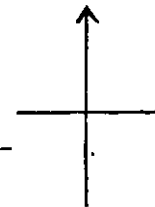
CROWNED TEETH



BRIDGE WORK



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



REMARKS:

20 FEB 1949

LEFT LITTLE FINGER

LEFT RING FINGER

LEFT MIDDLE FINGER

LEFT INDEX FINGER

LEFT THUMB

RIGHT THUMB

RIGHT INDEX FINGER

RIGHT MIDDLE FINGER

RIGHT RING FINGER

RIGHT LITTLE FINGER

Date

I certify that a comparison of the
Dental Records verifies the
Identification of

Mitchell, James S
Name

19013612
Serial No

George R. Kennebeck
GEORGE R. KENNEBECK
Colonel, DC