

478

# RECLASSIFICATION SHEET

PAPERS ORIGINALLY FILED 293. Unk. (misc) Manila #2 X474, X475  
X476, X477, X478, X513, X514, X515

## SYNOPSIS AND DATES

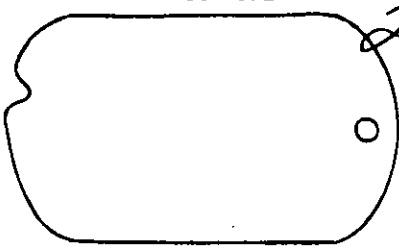
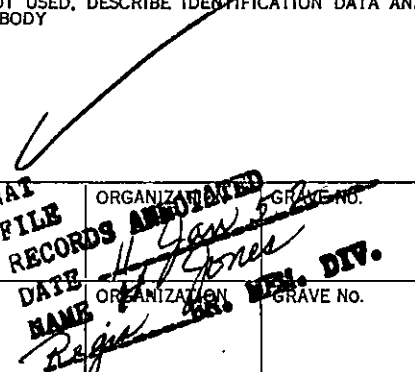
*Misc now filed*

NEW CLASSIFICATION 293. Unk Manila #2 X474

# RECLASSIFICATION SHEET

RESTRICTED

*atb*

QMC Form 1042 (Rev. 1 Apr. 1946) (Supersedes GRS Form I, and Rev. of 1 Apr. 45, which may be used.)		<b>REPORT OF INTERMENT</b> (AR 30-1810 and AR 30-1815)			DATE OF REPORT <b>3 Dec 1951</b>			
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION. NAME (Last, first, middle initial) <b>293 UNKNOWN X-478 Manila #2</b> <del>(Manila, Mausoleum X-4336)</del>					SERIAL No. <i>gpc</i> <b>Unknown</b>	
GRADE <b>Unknown</b>		ORGANIZATION <b>Unknown</b>			BRANCH OF SERVICE <b>Unknown</b>			
RACE <b>Unknown</b>		RELIGION <b>Unknown</b>		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY				
PLACE OF DEATH <b>POW Camp, Cabanatuan          Luzon, P.I.</b>		CAUSE OF DEATH <b>Unknown</b>			DATE OF DEATH <b>Unknown</b>			
EMERGENCY ADDRESSEE (Name, relationship, and address) <p style="text-align: center;"><b>Unknown</b></p>								
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) <b>None</b>		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) <b>Yes (2)</b>		COMPLETED TOOTH CHART ON QMC FORM 1045 ATTACHED HERETO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO						
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME <p style="text-align: center;"><b>None</b></p>								
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.								
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY <p style="text-align: center;"><b>UNITED STATES MILITARY CEMETERY, FT. WM. MCKINLEY, P. I.</b></p>								
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.		
29 Nov 1951	--	Casket	Cross	H	7	147		
WAS THIS A REBURIAL? (Yes or no) <b>Yes</b>	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE <b>USAF Cemetery Manila #2, Luzon, P.I.</b>			PLOT No. <b>2</b>	ROW No. <b>15</b>	GRAVE No. <b>1920</b>		
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) <b>Yes</b>	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) <b>Yes</b>							
BODY BURIED ON DECEASED LEFT. NAME (Last, first, middle initial) <i>Reclass. Made 11/15/52</i> <b>Allen</b>		RANK	SERIAL No.	ORGANIZATION	GRAVE No.			
BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial) <b>Allen</b>		RANK	SERIAL No.	ORGANIZATION	GRAVE No.			
SIGNATURE OF PERSON PREPARING REPORT <i>Edward L. Berg</i> <b>EDWARD L. BERG, CPL., RA</b>			SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>Charles R. Whylen</i> <b>CHARLES R. WHAYLEN, 1st Lt., QMC</b>					
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.								

FILE RECORDS ANNOTATED  
 DATE 11/15/52  
 NAME *gpc*  
 REG. DIV.

RESTRICTED

*Incl # 18'*

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

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



REMARKS:

REMARKS:

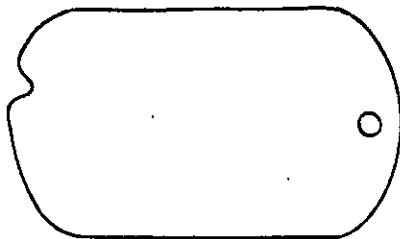
RESTRICTED

QMC Form 1042  
(Rev. 1 Apr. 1946)  
(Supersedes GRS Form 1, and  
Rev. of 1 Apr. 45, which may be used.)

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

DATE OF REPORT  
**3 Dec 1951**

Imprint Identification Tag If Possible.  
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) <b>UNKNOWN X-478 Manila #2 (Manila Mausoleum X-4236)</b>		SERIAL No. <b>Unknown</b>
GRADE <b>Unknown</b>	ORGANIZATION <b>Unknown</b>	BRANCH OF SERVICE <b>Unknown</b>
RACE <b>Unknown</b>	RELIGION <b>Unknown</b>	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH <b>POW Camp, Cabanatuan Luzon, P.I.</b>	CAUSE OF DEATH <b>Unknown</b>	DATE OF DEATH <b>Unknown</b>
---	----------------------------------	---------------------------------

EMERGENCY ADDRESSEE (Name, relationship, and address)  
**Unknown**

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) <b>None</b>	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) <b>Yes (2)</b>	COMPLETED TOOTH CHART ON QMC FORM 1045 ATTACHED HERETO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
---	---

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  
**UNITED STATES MILITARY CEMETERY, FT. WEL. MCKINLEY, P. I.**

DATE OF BURIAL <b>29 Nov 1951</b>	HOUR <b>--</b>	BURIED IN (Shroud, blanket, or name of other) <b>Casket</b>	TYPE OF GRAVE MARKER <b>Cross</b>	PLOT No. <b>H</b>	ROW No. <b>7</b>	GRAVE No. <b>147</b>
--------------------------------------	-------------------	--	--------------------------------------	----------------------	---------------------	-------------------------

WAS THIS A REBURIAL? (Yes or no) <b>Yes</b>	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE <b>USAF Cemetery Manila #2, Luzon, P.I.</b>	PLOT No. <b>2</b>	ROW No. <b>15</b>	GRAVE No. <b>1920</b>
---	--	----------------------	----------------------	--------------------------

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) <b>Yes</b>	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) <b>Yes</b>	

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

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

SIGNATURE OF PERSON PREPARING REPORT <i>Edward L. Berg</i> <b>EDWARD L. BERG, C.S.L., RA</b>	SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>Charles R. Whaylen</i> <b>CHARLES R. WHAYLEN, 1st Lt., QMC</b>
--	---

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.

182

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.

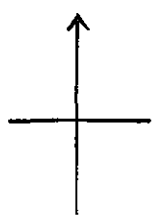
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

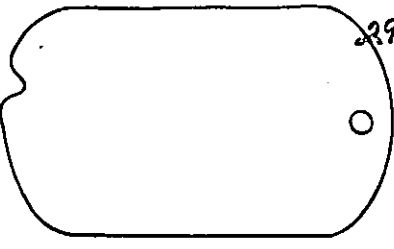

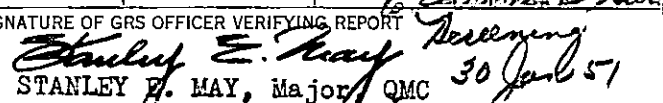
OTHER IDENTIFICATION CLUES

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



REMARKS:

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

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		<b>REPORT OF INTERMENT STORAGE</b> (AR 30-1810 and AR 30-1815)			DATE OF REPORT DEC 12 1950	
Imprint Identification Tag If Possible. DO NOT TYPE  		Section 1.—IDENTIFICATION <i>943 unk Manila #2 X-478</i>				
		NAME (Last, first, middle initial) UNKNOWN X-478 USAF Cem Manila #2, P.I. (Manila Maus X-4236)			SERIAL No. Unknown	
		GRADE Unknown		ORGANIZATION Unknown		BRANCH OF SERVICE Unknown
		RACE Probably White		RELIGION Unknown		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
PLACE OF DEATH Cabanatuan POW Camp I & II, Luzon, P.I.		CAUSE OF DEATH Unknown			DATE OF DEATH Unknown	
EMERGENCY ADDRESSEE (Name, relationship, and address) Unknown						
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)				
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (2)						
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  None						
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.						
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  U. S. Army Mausoleum, AGRS-PAZ <span style="float:right">Casket</span>						
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	BOOK NO.	ROW NO.	GRAVE NO.
3 Nov 50	--	Final type casket		Manila	Section	281
WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE AGRS Mausoleum Manila, P. I.			HANGER BAY BOOK NO. 813	ROW NO. C	GRAVE NO. 814
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) Not applicable due to			RANK	SERIAL No.	ORGANIZATION	GRAVE No.
manner of storing caskets.			--	--	--	--
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)			RANK	SERIAL No.	ORGANIZATION	GRAVE No.
			--	--		
SIGNATURE OF PERSON PREPARING REPORT  LEROY F. TURNER, Adm. Asst.			SIGNATURE OF GRS OFFICER VERIFYING REPORT  STANLEY E. MAY, Major 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.						

**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



SILVER FILLING  
GOLD FILLING

CAVITIES



CAVITY  
DECAYED

MISSING TEETH



TOOTH MISSING

CROWNED TEETH

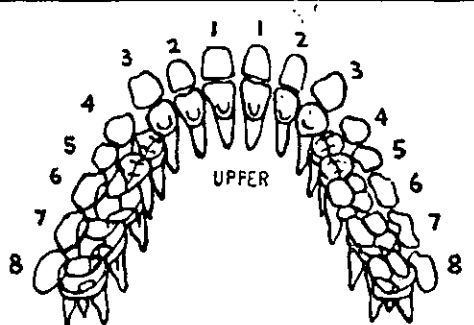


PORCELAIN CROWN  
GOLD CROWN

BRIDGE WORK

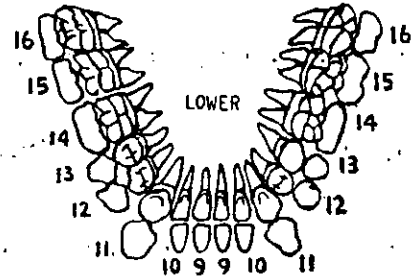


GOLD BRIDGE



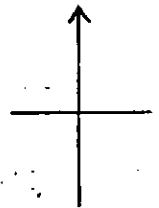
UPPER

DIAGRAM REPRESENTS THE MOUTH WIDE OPEN

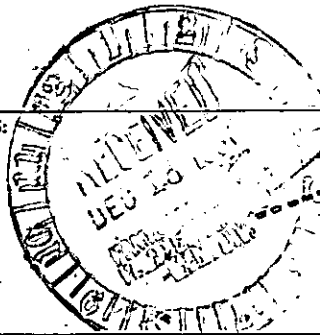


LOWER

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

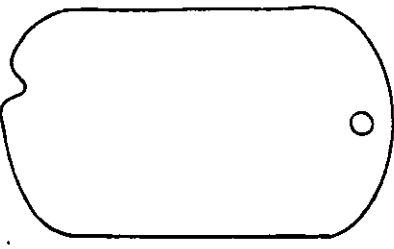


REMARKS:



**Identification Section**  
**19 DEC 1950**

WD QMC FORM 1042 (Rev. 1 Apr. 1946) (Supersedes GRS Form 1)	<b>REPORT OF INTERMENT STORAGE</b> (AR 30-1810 and AR 30-1815)	DATE OF REPORT <b>DEC 12 1950</b>
---	---	--------------------------------------

Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.		
NAME (Last, first, middle initial) <b>UNKNOWN X-478 USAF Com Manila #2, P. I.</b> <b>(Manila Maus X-4236)</b>	SERIAL No. <b>Unknown</b>		
GRADE <b>Unknown</b>	ORGANIZATION <b>Unknown</b>	BRANCH OF SERVICE <b>Unknown</b>	
RACE <b>Probably white</b>	RELIGION <b>Unknown</b>	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	

PLACE OF DEATH <b>Cabanatuan POW Camp</b> <b>I &amp; II, Luzon, P.I.</b>	CAUSE OF DEATH <b>Unknown</b>	DATE OF DEATH <b>Unknown</b>
--	----------------------------------	---------------------------------

EMERGENCY ADDRESSEE (Name, relationship, and address)  
**Unknown**

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) <b>None</b>	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) <b>Yes (2)</b>	

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  
**U. S. Army Mausoleum, AGRS-PAZ** **Casket**

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	<del>PLOT NO.</del>	<del>ROW NO.</del>	<del>GRAVE NO.</del>
<b>3 Nov 50</b>	<b>--</b>	<b>Final type casket</b>		<b>Manila</b>	<b>Section</b>	<b>281</b>

WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE	<del>PLOT NO.</del>	<del>ROW NO.</del>	<del>GRAVE NO.</del>
<b>Yes</b>	<b>AGRS Mausoleum Manila, P. I.</b>	<b>Manila Bay</b>	<b>Crypt</b>	
		<del>PLOT NO.</del>	<del>ROW NO.</del>	<del>GRAVE NO.</del>
		<b>813</b>	<b>C</b>	<b>814</b>

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY		
<b>--</b>	<b>--</b>			

IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)
<b>--</b>	<b>--</b>

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
<b>Not applicable due to</b>	<b>--</b>	<b>--</b>	<b>--</b>	<b>--</b>

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
<b>manner of storing caskets.</b>	<b>--</b>	<b>--</b>	<b>--</b>	<b>--</b>

SIGNATURE OF PERSON PREPARING REPORT <i>Leroy P. Turner</i> <b>LEROY P. TURNER, Adm. Asst.</b>	SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>Stanley E. May</i> <b>STANLEY E. MAY, Major, QMC</b>
--	---

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.

*30152*



**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.

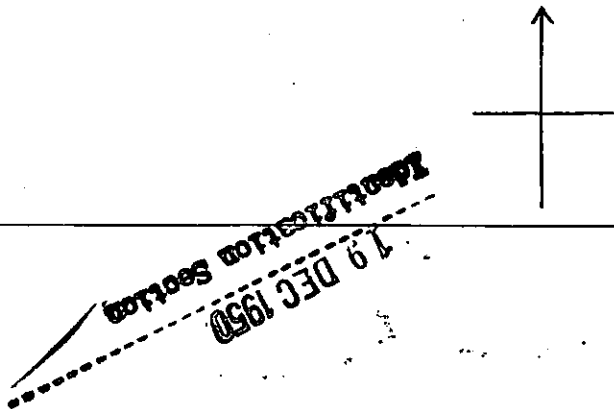
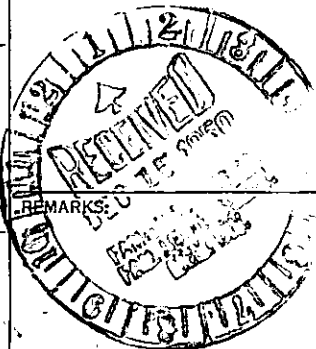
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
--------	--------	---------------	---------------	-------------------------------

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



/jdm

1

Interred 29 November 1951  
H 7 147 Ft. McKinley **DISINTERMENT DIRECTIVE**

*[Handwritten signature]*

SECTION A *Stewart W. Abel*  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER  
7747 00314

DATE  
15 06 48  
DAY MONTH YEAR

NAME <i>243 unk Manila # 2 X-478</i>		SERIAL NUMBER UNKNOWN X-000478	RANK	ARM 0	DATE OF DEATH DAY MONTH YEAR
CEMETERY USAF CEMETERY MANILA NO 2 <i>ms</i>				DISPOSITION OF REMAINS 0	7701 80 CODE DIST. PT.
PLOT 2	ROW 15	GRAVE 1920	COUNTRY PHILIPPINE ISLANDS		CAUSE OF DEATH 6

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE FORT MCKINLEY CEMETERY MANILA, PHILIPPINE ISLANDS	NAME AND ADDRESS OF NEXT OF KIN (BY ADMINISTRATIVE DECISION)
---	---

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME UNKNOWN X-000478 UNKNOWN X-4236 (MAUS)	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED 22 Sept 1948
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> 4 REMAINS <input type="checkbox"/> 1 MARKER	ORGANIZATION UNKNOWN	RELIGION	IDENTIFICATION VERIFIED BY ALBION H. McLELLAN, Jr 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) Identification tags shows UNKNOWN X-4236 (AGRS MAUSOLEUM NUMBER)

REMAINS PREPARED AND PLACED IN CASKET

DATE 22 Sept 1948 BY ALBION H. McLELLAN, Jr.

CASKET SEALED BY ALBION H. McLELLAN, Jr	EMBALMER (Signature) <i>Albion H. Mclellan Jr</i> ALBION H. McLELLAN, Jr.
--	---

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
-------------------------	------------------------------

DATE 22 Sep 48 by HORACE L. ALLISON, Sgt, INF 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.

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

*NAT*  
*249 Jan 52*

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

*Incl. 3*

# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

FROM <b>AGRS MAUSOLEUM</b>		TO <b>FORT MCKINLEY MILITARY CEMETERY</b>	
KIND OF CONVEYANCE <b>TRUCK</b>		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

## 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 <b>AGRS MAUSOLEUM</b>	DATE	SIGNATURE OF RECEIVER <b>(Solemnly and Deliberately)</b>	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

**IDENTIFICATION DATA**

1. REMAINS OF UNKNOWN UNK.X-4236 (Formerly <del>X-475</del> <sup>X-478</sup> Manila # 2)				2. DATE OF REPORT 17 May 1950	
3. NAME OF CEMETERY AGRS Mausoleum Manila P. I.		4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT REINTERMENT
<i>293 Unk. Manila #2 X-478</i>					<i>Age: 22-28 yrs.</i>
8. ESTIMATED WEIGHT U. T. D.	9. ESTIMATED HEIGHT 5'7 1/8"	10. COLOR OF HAIR U. T. D.		11. RACE White (probably)	

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

None

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? Bones are eroded.

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

**APPROVED UNIDENTIFIABLE**

*U. Per  
Ident Br  
14 Mar 52*

*File - NAT  
U. Per  
Ident Br  
14 Mar 52*

*Ident Br*

293 - Unk. X-478 Manila #2

18.

TOOTH CHART

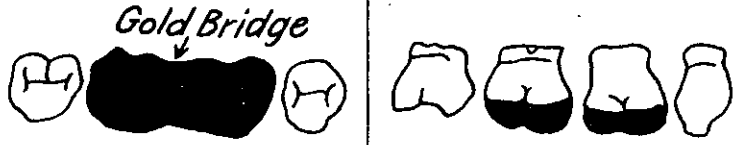
**MISSING TEETH:** ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" 'D OUT AND LABELED THUS:



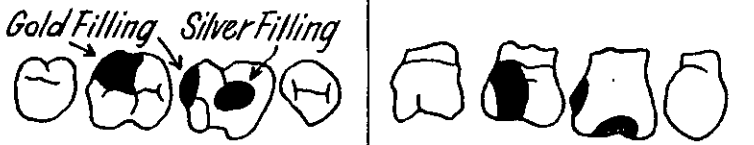
**CROWNED TEETH:** BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:



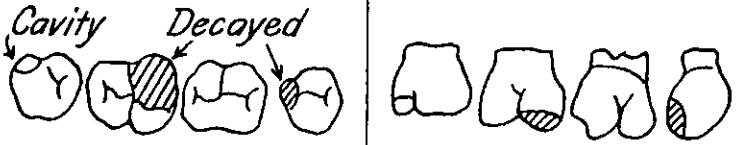
**BRIDGE WORK:** BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



**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:



Maxilla Missing

		RIGHT								LEFT									
		8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8		
		A			A	A		S	S				A	A	A	A			
		o			mod	od		m	d				od	o	mod	ol			
Side Views																		Side Views	
																			UPPER
																			LOWER
Side Views																			
		P	A	P	A			P						A	X	A	o		
		of			o									o		of	of		
		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."

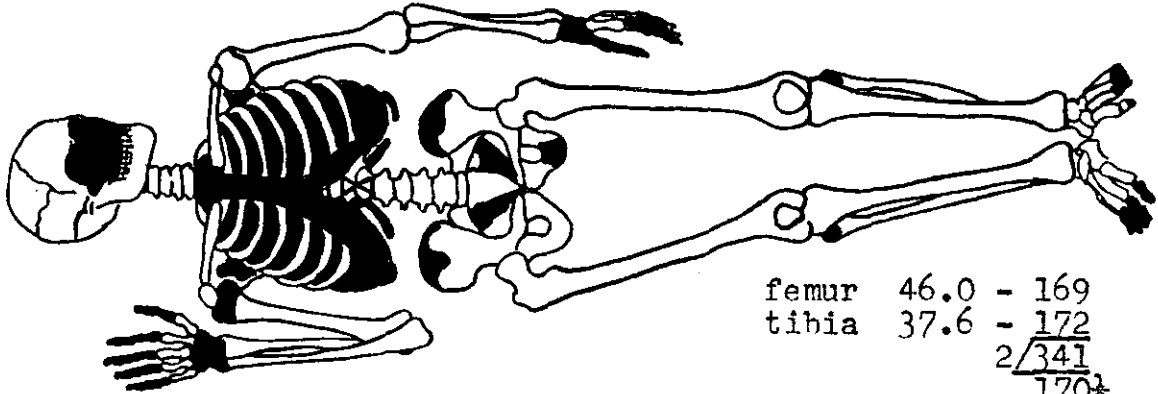
Maxillary teeth except R-6, 7 and L-1 are loose present with remains.

*Paul R. Nichols*

PAUL R NICHOLS  
Chief Ident. Section

*Doc 134*

19. BLACK-OUT PARTS OF BODY NOT RECOVERED



Estimated height 5'7 1/8"

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

- (1) Male
- (2) Probably White
- (3) Est. Age - 22 to 28 years ( a crude estimate due to erosion of aging criteria)
- (4) Est. Height - 5'7 1/8"

See attached Anthropologist's statement dated 17 May 1950.

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

ROBERT B FOY  
 Anthropologist

SIGNATURE

CENTRAL IDENTIFICATION POINT  
APO SF 900  
WHEELER FIELD, HAWAII, P.I.

17 May 1950

R E S U M E

Reference:	UNK X-4237	Male	(formerly X-513, Manila #2)
"	X-4238	"	( " X-514 " )
"	X-4239	"	( " X-515 " )
"	X-4240	"	( " X-474 " )
"	X-4241	"	( " X-475 " )
"	X-4244-A	"	( " X-476 " )
"	X-4244-B	"	( " X-476 " )
"	X-4245	"	( " X-477 " )
"	X-4246	"	( " X-478 " )

The above nine (9) remains from Graves 825 and 829 Cabanatuan APO Cemetery were reprocessed by me this date for proper segregation, and new QC Form 104A were accomplished for each.

Each of the remains is now properly segregated, and each represents one and the same individual. Improperly segregated bones, which could not be reassociated due to their eroded condition, were assigned OH #589.

Examination of the three (3) remains from Grave #825 yielded the following associations:

UNK X-4237 Male, compares very favorably with LeBOY, Douglas W., as to height and absence of extractions. LeBOY's age is not known at this headquarters but the estimate age of the remains is 22 to 28 years.

UNK X-4238 Male, compares very favorably with BURDIE, Donald H., as to short height (BURDIE was the shortest decedent involved, and this remains is the shortest of the group), hair color, and absence of extractions and fillings. The third molars marked "X" on BURDIE's dental chart were possibly unerupted at time that the dental chart was made. BURDIE's age is not known at this headquarters, but the estimate age of the remains is 12 to 27 years.

UNK X-4239 Male, compares very favorably with COOPERHALL, Charles A., as to height, race, and absence of extractions and fillings (there was only one (1) small filling on P-14 on this remains). COOPERHALL's age is not known at this headquarters, but the estimate age of the remains is 20 to 25 years.

*Done & Co. Inc. - Japan*

CENTRAL IDENTIFICATION POINT  
APO 960  
WHEELS FIELD, HAWAII, P.I.

17 May 1950

STATEMENT

Reference: 

ONE X-4237 Malm (formerly X-513, Manila #2)
" X-4238 " ( " X-514 " )
" X-4239 " ( " X-515 " )
" X-4232 " ( " X-474 " )
" X-4233 " ( " X-475 " )
" X-4234-A " ( " X-476 " )
" X-4234-B " ( " X-476 " )
" X-4235 " ( " X-477 " )
" X-4236 " ( " X-478 " )

The above nine (9) remains from Graves 825 and 829 Oahuatan  
POW Cemetery were reprocessed by me this date for proper segregation,  
and new QC Form 1044 were accomplished for each.

Each of the remains is now properly segregated, and each repre-  
sents one and the same individual. Improperly segregated bones,  
which could not be reassociated due to their eroded condition, were  
assigned OIL #589.

Examination of the three (3) remains from Grave #825 yielded the  
following associations:

ONE X-4237 Malm. compares very favorably with LeBOUY, Rouglas W.,  
as to height and absence of extractions. LeBOUY's age is not known  
at this headquarters but the estimate age of the remains is 22 to 28  
years.

ONE X-4238 Malm. compares very favorably with SURBER, Donald H.,  
as to short height (SURBER was the shortest decedent involved, and  
this remains is the shortest of the group), hair color, and absence  
of extractions and fillings. The third molars marked "X" on SURBER's  
dental chart were possibly unerupted at time that the dental chart  
was made. SURBER's age is not known at this headquarters, but the  
estimate age of the remains is 22 to 27 years.

ONE X-4239 Malm. compares very favorably with COGGESHALL, Charles  
A., as to height, race, and absence of extractions and fillings (there  
was only one (1) small filling on D-14 on this remains). COGGESHALL's  
age is not known at this headquarters, but the estimate age of the  
remains is 20 to 25 years.

*Done # 50, Part page*



Examination of the six (6) remains from Grave #229 yielded the following results:

UMI 1-4232 Male, compares perfectly with DANIEL S. Elmer as to great height, and pattern of extractions.

UMI 1-4233 Male, compares very favorably with AGOSTINI, John J., as to height and dental work. The presence of a porcelain (Davis) crown on I-1 is a very diagnostic, and favorable comparison.

UMI 1-4236 Male, compares very favorably with GOULAY, Carlton B., as to height and pattern of extractions and fillings.

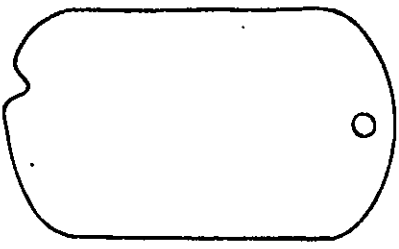
The other three (3) remains from Grave #229 do not compare favorably enough for individual comparison with the other associated decedents.

I recommend the individual identification of the following unknown remains:

UMI 1-4237 Male as LeCHRY, Douglas V.  
UMI 1-4238 Male as SHERMAN, Donald H.  
UMI 1-4239 Male as GOODBRILL, Charles A.  
UMI 1-4235 Male as DANIEL S. Elmer  
UMI 1-4234 Male as AGOSTINI, John J.  
UMI 1-4236 Male as GOULAY, Carlton B.

  
W. H. FOX  
Anthropologist

WD GMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)	<b>REPORT OF INTERMENT</b> (AR 30-1810 and AR 30-1815)	<b>STORAGE</b> DATE OF REPORT <b>27 April 48</b>
---	---	--

Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.		
	NAME (Last, first, middle initial) <b>UNKNOWN X-4236 (Formerly UNK X-478 USAF Cemetery Manila #2, Luzon, P.I.)</b>	SERIAL No. <b>Unknown</b>	
	GRADE <b>Unknown</b>	ORGANIZATION <b>Unknown</b>	BRANCH OF SERVICE <b>Unknown</b>
	RACE <b>Unknown</b>	RELIGION <b>Unknown</b>	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH <b>Cabanatuan POW Camp I &amp; II, Luzon, P.I.</b>	CAUSE OF DEATH <b>Unknown</b>	DATE OF DEATH <b>Unknown</b>
--	----------------------------------	---------------------------------

EMERGENCY ADDRESSEE (Name, relationship, and address)  
**Unknown**

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) <b>None</b>	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) <b>See Remarks</b>
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) <b>Yes (2)</b>	

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 <b>23 April 48</b>	STORAGE	HOUR <b>1000</b>	BURIED IN (Shroud, blanket, or name of other): <b>Casket</b>	TYPE OF GRAVE MARKER <b>None</b>	PLOT No. <b>813</b>	ROW No. <b>0</b>	GRAVE No. <b>814</b>
--------------------------------------	---------	---------------------	---	-------------------------------------	------------------------	---------------------	-------------------------

WAS THIS A REBURIAL? (Yes or no) RESTORED <b>Yes</b>	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE <b>USAF Cemetery Manila #2, Luzon, P.I.</b>	PLOT No. <b>2</b>	ROW No. <b>15</b>	GRAVE No. <b>1920</b>
---	--	----------------------	----------------------	--------------------------

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 <b>Yes</b>	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) <b>Yes</b>
--	---

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORED <b>PEDERSEN, Victor P.</b>	RANK <b>Sgt</b>	SERIAL No. <b>20945227</b>	ORGANIZATION <b>146 FA Btry Bn.</b>	GRAVE No. CRYPT <b>816</b>
---	--------------------	-------------------------------	--	-------------------------------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED <b>CRUZ, Jose C.</b>	RANK <b>1/A</b>	SERIAL No. <b>38012441</b>	ORGANIZATION <b>515 OAD</b>	GRAVE No. CRYPT <b>812</b>
--	--------------------	-------------------------------	--------------------------------	-------------------------------

SIGNATURE OF PERSON PREPARING REPORT <i>[Signature]</i> <b>W. G. COBINS, 1st Lt, OIC</b>	SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>[Signature]</i> <b>L. S. PANOFIO, 1st Lt INF</b>
--	---

DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.

**Section UNIDENTIFIED REMAINS.**

**INSTRUCTIONS:**


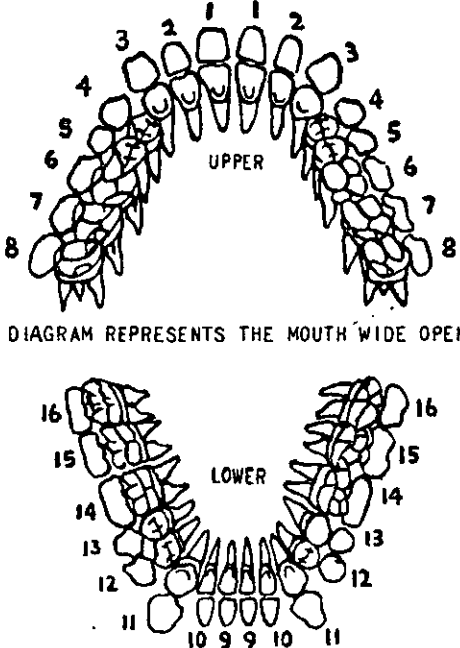




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

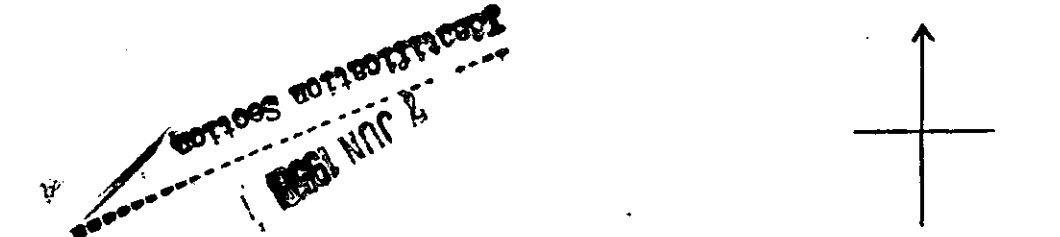
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS

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

**OTHER IDENTIFICATION CLUES**

<p><b>FILLINGS</b></p>  <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER</p> <p>LOWER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
<p><b>CAVITIES</b></p>  <p>CAVITY DECAYED</p>	
<p><b>MISSING TEETH</b></p>  <p>TOOTH MISSING</p>	
<p><b>CROWNED TEETH</b></p>  <p>PORCELAIN CROWN GOLD CROWN</p>	
<p><b>BRIDGE WORK</b></p>  <p>GOLD BRIDGE</p>	

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



**REMARKS:** UNKNOWN R-4236 AGRS Mausoleum, Manila, P.I. could possibly be anyone of the Unidentified persons listed on previous Report of Reinterment USAF Cemetery Manila #2, Luzon, P.I.

CID Form 1044, 1044-A and 1044-B accomplished.

**RESTRICTED**

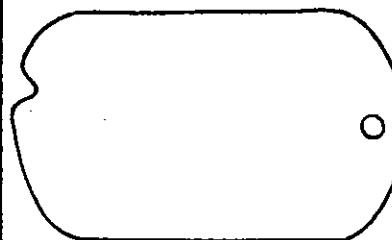
WD QMC FORM 1042  
(Rev. 1 Apr. 1945)  
(Supersedes GRS Form 1)

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

DATE OF REPORT

29 January 1946

Imprint Identification Tag If Possible.  
DO NOT TYPE

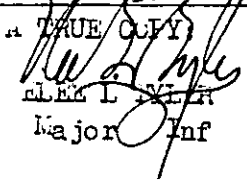


<b>Section 1.—IDENTIFICATION.</b>		
NAME (Last, first, middle initial) UNKNOWN X-478 (Formerly Unknown G-80 Cabanatuan Cemetery, Luzon, P.I.)		SERIAL No.
GRADE	ORGANIZATION	BRANCH OF SERVICE
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH Cabanatuan POW Camp I and II, Luzon, P.I.	CAUSE OF DEATH	DATE OF DEATH
--	----------------	---------------

EMERGENCY ADDRESSEE (Name, relationship, and address)

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) Five (5) bodies found in common grave - Prison Records indicate ten (10) bodies buried in this grave as follows. 1. Anderson, John A. T/Sgt DEAL 7031364 2. Courlay, Carlton R. Pvt. 803 ENGR 32074027 (See reverse side Section 3)
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no)	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  None	<p align="right">A TRUE COPY                    MAJOR INF</p>
---	---

**Section 2.—BURIAL.** If other than in established cemetery, furnish sketch and map coordinates on reverse.

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  
  
USAF Cemetery Manila No. 2, Luzon, P.I.

DATE OF BURIAL 31 Dec. 1945	HOUR 0900	BURIED IN (Shroud, blanket, or name of other) Shelter Half	TYPE OF GRAVE MARKER Cross	PLOT No. 2	ROW No. 15	GRAVE No. 1920
--------------------------------	--------------	---	-------------------------------	---------------	---------------	-------------------

WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE POW Camps I and II Cemetery, Cabanatuan, Nueva Ecija, Luzon, P.I. - 45.7-70.9 1/50.000	PLOT No. 8	ROW No. 0	GRAVE No. 829
--	---	---------------	--------------	------------------

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-477 (Formerly Unknown C-79 Cabanatuan Cemetery, Luzon, P.I.)	RANK	SERIAL No.	ORGANIZATION	GRAVE No. 1919
---	------	------------	--------------	-------------------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-468 (BURNETTE, Gordon) (Formerly Unknown C-70, Cabanatuan Cem., Luzon, P.I.)	RANK	SERIAL No.	ORGANIZATION	GRAVE No. 1921
--	------	------------	--------------	-------------------

SIGNATURE OF PERSON PREPARING REPORT  /s/t/ R. C. BARRETT, T/4, GRG	SIGNATURE OF GRS OFFICER VERIFYING REPORT  /s/t/ E. M. MOORE, 1st Lt., J.C
---	--

**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. IDENTIFIED REMAINS.**

**INSTRUCTIONS:**


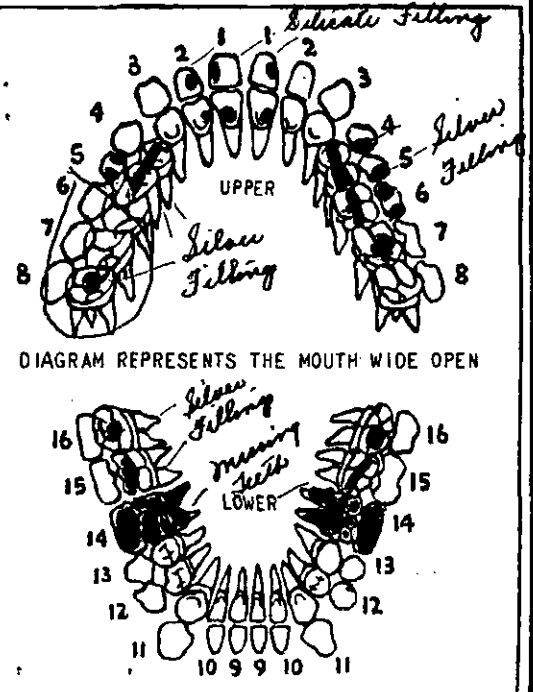




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

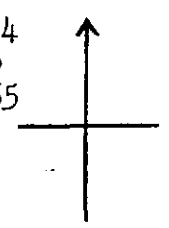
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
WEAPON AND SERIAL No.		LAUNDRY MARKS		WHERE BODY WAS BURIED OR FOUND

**OTHER IDENTIFICATION CLUES**

- 3. Olson, Everell D. S/Sgt. 17 Pur. 6913132
- 4. Daniels, Elmer Pfc CAC. 1501735
- 5. Acamando, John H. S/Sgt. CAC. 6981597
- 6. Coggeshall, Charles A. Sgt. 515 CAC. 20849750
- 7. Donahue, Joseph J. Sgt. MAT. 6933204

<p><b>FILLINGS</b></p>  <p>SILVER FILLING GOLD FILLING</p>	 <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
<p><b>CAVITIES</b></p>  <p>CAVITY DECAYED</p>	
<p><b>MISSING TEETH</b></p>  <p>TOOTH MISSING</p>	
<p><b>CROWNED TEETH</b></p>  <p>PORCELAIN CROWN GOLD CROWN</p>	
<p><b>BRIDGE WORK</b></p>  <p>GOLD BRIDGE</p>	
<p><b>FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY</b></p>	

- 8. Jordan, Major B. Corp. 803 Engr. 69233204
- 9. Finton, Norman W. Pfc. 19 AB 6578716
- 10. Surber, Donald H. Pvt. 19 AB 19018755



REMARKS:

*69233204*  
*69233204*

HEADQUARTERS  
CENTRAL IDENTIFICATION POINT  
AMERICAN GRAVES REGISTRATION SERVICE FAR-EASTERN ZONE

APO 707  
15 June 1948

The following cases are those disinterred from a common grave at Cabanatuan Prison Camp - Grave # 829, Row # 0, Plot # 8. The unknown numbers are AGRS Mausoleum numbers:

UNKNOWN X-4232  
" X-4233  
" X-4234-A  
" X-4234-B  
" X-4235  
" X-4236

*Handwritten mark*

HEADQUARTERS  
CENTRAL IDENTIFICATION POINT  
AMERICAN GRAVES REGISTRATION SERVICE FAR-EASTERN ZONE

APO 707  
15 June 1948

The following cases are those disinterred from a common grave at Cabanatuan Prison Camp - Grave # 829, Row # 0, Plot # 8. The unknown numbers are AGRS Mausoleum numbers:

UNKNOWN X-4232  
" X-4233  
" X-4234-A  
" X-4234-B  
" X-4235  
" X-4236

*Inc 65*

(EXTRACT COPY) PHOTOSTATIC COPY OF CASUALTY REPORT FOR CAUSE DEATH REPORT

E X T R A C T

Name	Rank & Crn.	Ser. No.	Age	Birth	Date of Death	No.	Cause	Nearest Kin and address	Grave No.
LEGROY, Douglas J.	S-Sgt	27 Bomb	22	1/17/20	2:30 PM	2434	BB	Mrs Sadie LeGroy; 1713 Ft Williams St., Sylacauga, Ala.	825
DUKE, George B.	Pvt	200 C.C.	21	8/21/21	11:15 PM	2435	DU	Mrs Larry Duke; 419 Ash St., Clevis, N. L.	825
	X			X		X		X	X
SOTTO, Bernard J.	S-Sgt	409 SC	26	7/19/16	11:00 PM	2437	Da	Mrs Due Sate; 1124 Chappelle St., Santa Barbara, Calif.	825
COGGESHALL, Charles A.	Sgt	515 C.C.	24	1/19/18	8:00 PM	2438	BB	Mrs G. A. Coggeshall; 424 Euclid Ave., Alburquerque, N. M.	829
DOMAHUE, Joseph J.	Sgt	27 Mat	24	1/1/18	10:00 AM	2439	L	Mrs Marie Hoffman; 734 E. 15th St., Minneapolis, Minn	829
JORDAN, Major B.	Corp	803 CE	26	5/3/16	8:00 AM	2440	BB	John Jordan; Candler, N. C.	829
FITZGON, Norman W.	Pfc	19 AB	24	1/18/18	10:00 AM	2441	BB	Mrs Flora Sharp; LeGrand, Iowa.	829
SURBER, Donald H.	Pvt	19 AB	20	2/18/22	11:00 PM	2442	BB	H. H. Surber; Levistowa, Mont.	829
	X			X		X		X	X
DANIELS, Elmer	1fc	59 C.C.	22	3/17/20	8:30 AM	2582	BB	Mrs Anna Daniels; Boswell, Pa.	829
ACCOLANDO, John J.	S-Sgt	C.C.	27	7/18/15	10:00 PM	2583	Da	Mrs Phillip Acamando; 1078 Southern Blvd, New York, N.Y.	829
	X			X		X		X	X
ANDERSON, John A.	T-Sgt	DETL	24	7/3/18	7:30 PM	2589	Dipth	Mrs John A. Anderson; 650 Dewey Blvd, Manila, P.I.	829
COULLEY, Carlson R.	Pvt	803 CE	34	2/27/08	11:30 PM	2590	Dipth	Mrs Clara Courley; Rt #3, Delsea Drive, Vineland, N. J.	829
OLSON, Everell D.	S-Sgt	17 Pur	22	7/24/20	10:30 AM	2591	DU	Mrs Etta Olson; Smith Center, Kan.	829
	X			X		X		X	X

A TRUE EXTRACT COPY:

H. D. McNEELAR  
Captain, QMC







1. FILE UNDER NO. 293 - Unk. P.I. X-478 (Manila #2)

### SYNOPSIS

2. TYPE OF DOCUMENT: **Ltr** 3. DATE: 9 May 50  
4. FROM: **OQMG, Mem Div**  
5. TO: **CO, American GRS, Philcom Zone, APO 900, San Francisco, Calif.**  
6. SUBJECT: **Identification of WWII Deceased**

re: 1. Ref is made to letter this Office, OQMG 293 X-474 thru X-478 and X-513 thru X-515 USAF Cemetery, Manila #2, Subject: Identification of Deceased Personnel, dated 28 Feb 1949, copy inclosed, to which no reply has been received.

7. DOCUMENT FILED  
UNDER NO. 293 - Unk. P. I. (Misc.) (Manila #2) (X-474 thru X-478, X-513 thru X-515)

mfs

*Calvin  
C80*

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

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

293 - Unk. P. I. (Misc) (Manila #2) (X-474 thru X-478 & X-513 thru X-515) -

ORIG 293

X-4232, 4236, 4237, 4238, 4239

X-4233, 4234-2, 4234-B, 4235

AGRS Mausoloun, Manila, P.I.

(Formerly X-474, 478, 513, 514, 515

475, 476, 477, USAF Cem, Manila #2)

29 February 1949

SUBJECT: Identification of Deceased Personnel

TO : Commanding General  
Philippine Command  
APO 707, c/o PM, San Francisco, Calif  
ATTN AGRS PHILCOM ZONE

1. Reference is made to Board Proceedings, your Headquarters, recommending the following identification:

Unknown X-4232 as Daniels, Elmer, Pvt. 15 017 359

Unknown X-4236 as Accomando, John J., S/Sgt. 6 981 597

Unknown X-4237 as Finton, Norman W. Pfc. 6 578 716

Unknown X-4238 as Surber, Donald H., Pvt. 19 018 756

Unknown X-4239 as Coggeshall, Charles A., S., 19 018 755

and the Group Identification of Unknowns X-4233, X-4234-2, X-4234-B, and X-4235 as the recoverable remains of:

Anderson, John A.	T/Sgt.	7 031 364
Gourlay, Carlton R.	Pvt.	32 074 027
Jordan, Major B.	Cpl.	6 923 348
LeCroy, Douglas W.	S/ Sgt.	6 971 422
Olson, Everell D.	S/Sgt.	6 913 132

These Board Proceedings are being returned herewith.

2. Since a discrepancy exists between the grave numbers shown for these individuals on the Cabanatuan Death Report and the actual grave from which several of the remains being recommended for identification were recovered, a closer comparison of dental and physical characteristics will be necessary before individual identifications can be confirmed. Forms 371 for each of the individuals concerned are inclosed.

X 293 Unk P. I. Q, X-478 (Manila #2)

Ltr 26 February 1949

**SUBJECT: Identification of Deceased Personnel**

3. It is requested that the remains of Unknown X-4232, recommended for identification as Private Elmer Daniels, be reprocessed to determine if teeth I-2 and I-6 were missing before or after death.

4. Additional dental information has been received for Staff Sergeant John J. Accomando, which indicates that he may be associated with Unknown X-4233. A closer dental and height comparison exists between this soldier and the remains of Unknown X-4233, than for the remains of X-4236, recommended for individual identification as this soldier.

5. Dental information for Pfc Norman W. Finton does not compare favorable with the dental data for the Remains of Unknown X-4237, recommended for identification as this soldier.

6. The comparison of dental data for Unknown X-4238 and Private Donald H. Surber, recommended for individual identification, is not conclusive. This soldier was reported to be buried in Grave 828, and remains were recovered from Grave 825. (See paragraph 2, above). The same situation exists in the case of remains of Unknown X-4239 and Sergeant Charles A. Coggeshall for whom no conclusive dental comparisons are noted.

7. It is requested that remains recovered from Graves 825 and 829, Cabanatuan POW Cemetery, which were recommended for identification be reprocessed in the Central Identification Laboratory, and that finding be reported to the Field Board of Review for their action.

8. It is further requested that this Office be advised at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

16 Incls:

G. H. MENZ  
Lt. Colonel, QMC  
Memorial Division

COPY

6

DISINTERMENT DIRECTIVE

SECTION A —  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER  
7747 00314

DATE  
15 05 48  
DAY MONTH YEAR

NAME  
UNKNOWNX-000473

SERIAL NUMBER

RANK  
0

DATE OF DEATH  
DAY MONTH YEAR

CEMETERY  
USAF CEMETERY MANILA NO 2

DISPOSITION OF REMAINS  
0 7701 80  
CODE DIST. PT.

PLOT ROW GRAVE COUNTRY  
2 15 1920 PHILIPPINE ISLANDS

CAUSE OF DEATH  
6

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE  
FORT MCKINLEY CEMETERY  
MANILA, PHILIPPINE ISLANDS

NAME AND ADDRESS OF NEXT OF KIN  
(BY ADMINISTRATIVE DECISION)

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER RANK DATE OF DEATH DATE DISTINTERRED

IDENTIFICATION TAG ON ORGANIZATION RELIGION IDENTIFICATION VERIFIED BY  
 REMAINS  
 MARKER UNKNOWN NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES 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

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

1. FILE UNDER NO. 293 - Unk. P. I. X- 478 (Manila #2)

### SYNOPSIS

2. TYPE OF DOCUMENT: Letter 3. DATE: 12 March 48  
4. FROM: OJMB  
5. TO: CG, PhilRyComd., APO 707, 7PM, San Francisco, Calif.  
6. SUBJECT: Identification of Unknown Deceased

7. DOCUMENT FILED  
UNDER NO. 293 - Unk. P. I. (Misc) (Manila #2) (X-474-478 & X513-519)

msb

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

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

Am  
FILE UNDER NO. 293 - Unk. P.I. X- 478 ( Manila #2 )

I N D E X S H E E T

SYNOPSIS

Letter 12 Dec. '47

FROM: OQMG

TO: CG, Philippine- Ryukyus Command APO 707, c/o PM,  
San Francisco, Calif.

SUBJ: Identification of Unknown Decensed

DOCUMENT FILED UNDER NO. 293 - Unk. P.I. (Misc.) X-474-478 & X-515-X515  
(Manila #2)



7 Aug 50

~~see record~~

478

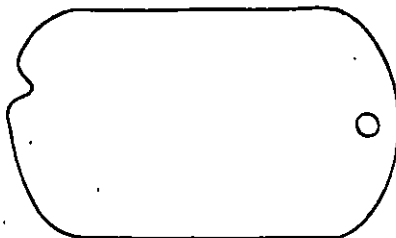
X-

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

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

DATE OF REPORT  
29 January 1946

Imprint Identification Tag If Possible.  
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN X - 478 (Formerly unknown C-80 Cabanatuan Cemetery, Luzon, P.I.)		SERIAL No.
GRADE	ORGANIZATION	BRANCH OF SERVICE
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH Cabanatuan POW Camp I and II, Luzon, P. I.	CAUSE OF DEATH	DATE OF DEATH
---	----------------	---------------

EMERGENCY ADDRESSEE (Name, relationship, and address)

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) Five (5) bodeis found in Common Grave - Prison Records indicate ten (10) bodies buried in this grave as follows: 1. Anderson, John A. T/Sgt. DEML 7031364 2. Gourlay, Carlton R. Pvt. 803 ENGR 32074027 (See reverse side Section 3)
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (2)	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  
*Jan 14 1946*  
None

Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  
USAF Cemetery Manila No. 2, Luzon, P. I.

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
31 Dec. 1945	0900	Shelter Half	Cross	2	15	1920

WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE POW Camps I and II Cemetery, Cabanatuan, Nueva Ecija, Luzon, P. I. - 45.7-70.9 1/50,000			PLOT No.	ROW No.	GRAVE No.
				8	0	829

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 - 477 (Formerly unknown C-79 Cabanatuan cemetery, Luzon, P. I.)	RANK	SERIAL No.	ORGANIZATION	GRAVE No. 1919
--	------	------------	--------------	-------------------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X - 468 (BURNETTE, Gordon)(Formerly unknown C-70, Cabanatuan Cem., Luzon, P.I.)	RANK	SERIAL No.	ORGANIZATION	GRAVE No. 1921
---	------	------------	--------------	-------------------

SIGNATURE OF PERSON PREPARING REPORT <i>R. C. Barrett</i> R. C. BARRETT, T/4, GRS.	SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>E. M. Moore</i> E. M. MOORE, 1st Lt., QMC.
--	---

DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.

*Jan 25!*

**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.

7 FEB 1946

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

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

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

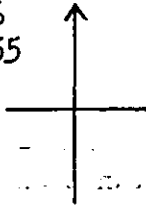
**OTHER IDENTIFICATION CLUES**

3. Olson, Everell D.	S/sgt.	17 Pur.	6913132
4. Daniels, Elmer	Pfc.	CAC	1501735
5. Acamando, John J.	S/sgt.	CAC	6981597
6. Coggenshall, Charles A.	Sgt.	515 CAC	20849750
7. Donahue, Joseph J.	Sgt.	27 MAT	6933204

<p><b>FILLINGS</b></p> <p>SILVER FILLING GOLD FILLING</p>	<p>UPPER</p> <p>LOWER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
<p><b>CAVITIES</b></p> <p>CAVITY DECAYED</p>	
<p><b>MISSING TEETH</b></p> <p>TOOTH MISSING</p>	
<p><b>CROWNED TEETH</b></p> <p>PORCELAIN CROWN GOLD CROWN</p>	
<p><b>BRIDGE WORK</b></p> <p>GOLD BRIDGE</p>	
<p><b>BRIDGE WORK</b></p> <p>GOLD BRIDGE</p>	

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

8. Jordan, Major B.	Corp.	803 Engr.	69233204
9. Finton, Norman W.	Pfc.	19 AB	6578716
10. Gurber, Donald H.	Pvt.	19 AB	19018755



**REMARKS:**

X-478

# 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.

27 Dec 46

DATE

UNKNOWN X - 478

LAST NAME FIRST INITIAL RANK SERIAL NO.

Cabanatuan POW Camp I and II, Luzon, P. I.

PLACE OF DEATH

USAF Cem Manila # 2

PLACE OF BURIAL

ORGANIZATION

2 15 1920















PLOT ROW GRAVE NO.

RIGHT				UPPER TEETH				LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
⊗	A	⊗	A	A			S				A	A	A	A	⊗
FO	OF	FO	MOD	DO			D				DO	O	DOHFA	LO	FO

INSIDE — LOOKING OUT

RIGHT				LOWER TEETH				LEFT							
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16
A	X	A	A								A	X	A	A	⊗
FO		FO	OO								OO	X	FO	FO	FO

## 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)

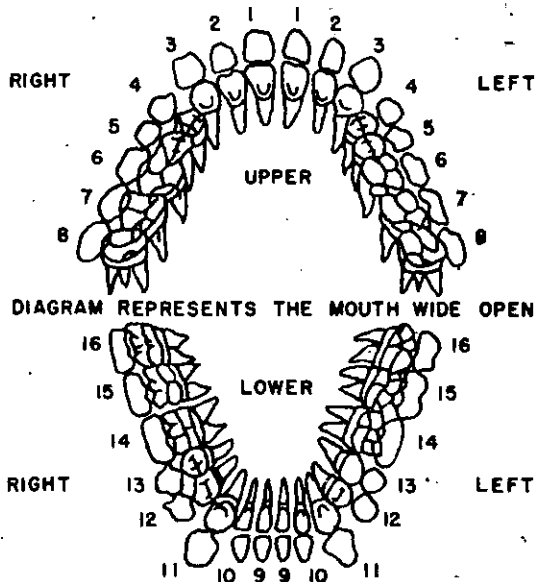
**INSTRUCTIONS:**

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

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



**REMARKS:**

*Al S. Padayhag*  
SIGNATURE OF PERSON WHO PREPARED CHART

**AL S. PADAYHAG, CFL**  
NAME AND RANK TYPED OR PRINTED

**USAF Cem Manila No. 2, Luzon, P.I.**  
PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

*Fenwick H Burch*  
VERIFIED BY GRS OFFICER

**FENWICK H BURCH, CAPT., CMP**  
NAME AND RANK TYPED OR PRINTED

**27 Dec 46**  
DATE