3107

QMCEM 293 (18 Sep 51) 1st Ind Mr. Suzuki/ff/666160
SUBJECT: Interment of Unknowns

Headquarters, Hawaiian Quartermaster Operations Group, APO 958, 22 Oct 1951

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

1. Reference is made to paragraph 1, basic communication. Unknown X-117 (Guadalcanal) was disinterred on 13 March 1950, and interment was made in the same grave location of Unknown X-112 (Kalaikundi) on 17 March 1950. Copy of the disinterment Form 14 is attached for your files.

2. In reference to paragraph 2, basic communication, attached is copy of radio M-24465, dated 5 October 1951. Pending reply to radio no action has been taken.

J. B. Baker
J. B. BAKER
Lt. Col., QMC
Commanding

2 Incls
1. Form 14 (quad)
2. Cy radio

Unk Kalaikundi X-112

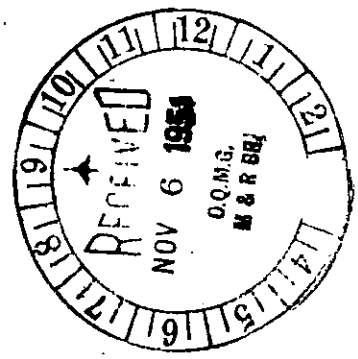
3 cy

NAT
a. Sandoe
11/21/51
cem

FILE NOV 21 1951
a. Sandoe

CEMETERY BRANCH

Nov 6 4 27 PM '51



DEPARTMENT OF THE ARMY
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

QMGMC 293
Nat Mem Cem of Pacific

18 September 1951

SUBJECT: Interment of Unknowns

TO: Superintendent
National Memorial Cemetery of the Pacific
Honolulu, Hawaii

1. This Office has on file Form 14 covering the interment of unknown X 117 (Guadalcanal) in Grave F 391 on 11 March 1949 and also a Form 14 covering interment of unknown X 112 (Kalaikundi) in the same grave on 17 March 1950. It is requested that this Office be advised as to whether both of these are interred in this grave or whether one of these has been disinterred.

2. Receipt is acknowledged of Form 14 covering interment in Grave Q 1373 "bottom" of seven unknowns in one casket. This form lists the unknowns as X 4916 through X 4920 which would only total five unknowns. Information is requested as to the "X" numbers of the other two unknowns.

FOR THE QUARTERMASTER GENERAL:

Jas F Watt

JAS. F. WATT
Lt. Colonel, QMC
Memorial Division

HUSARPAC

OUTGOING MESSAGE

This pertains to X-4916 thru X-4920, Manila Maus

DEFERRED

TO : QMG DEPTAR WashDC (Deferred)

M-24465
(GRAVES)

050340Z

From RRGRS URMSG DA 28675 and ltr this Hq RRREC 293 17 July 51 subject: Processing of WWII Unknowns

Ref is made to 1044 case papers with attached narratives dated 26 June 51 and rept of stor dated 17 July 51 fwd as incl 2 and 4 to ref ltr.

ADMSG.

NOTE BY AGDR: Refers to QM-IN-09795

ORIGINATOR: AGRS (Lt Col J B Baker)

OFFICE SYMBOL: AGRS-RRADM

DISTRIBUTION: G4, QM, MQMOG

M-24465 5 Oct 51 0340Z hy

HUSARPAC

OUTGOING MESSAGE

This pertains to X-4916 thru X-4920, Manila Maus

DEFERRED

TO : QMG DEPTAR WashDC (Deferred)

M-24465
(GRAVES)

050340Z

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NOTE BY AGDR: Refers to CM-IN-09795

ORIGINATOR: AGRS (Lt Col J B Baker)

OFFICE SYMBOL: AGRS-RRADM

DISTRIBUTION: G4, QM, HQMOG

M-24465 5 Oct 51 0340Z hy

GA

1

DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED	DIRECTIVE NUMBER	DATE (DAY / MONTH / YEAR)
	4996 02008	05 09 50

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
UNKNOWN X-112			8	0	6

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS (CODE)	(DIST. CTR.)
KALAIKUNDA INDIA	7	S	1868	0492	64

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
NATIONAL MEMORIAL CEMETERY OF THE PACIFIC TERRITORY OFHAWAII	(BY ADMINISTRATIVE DECISION)

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	GRADE	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 (*Prepare Discrepancy Report QMC Form 1194a for major discrepancies.*)

REMAINS PREPARED AND PLACED IN CASKET

DATE BY

CASKET SEALED BY

EMBALMER (*Signature*)

CASKET BOXED AND MARKED

DATE BY

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.

FILE

SEP 11 1950

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

REMAINS ARE UNIDENTIFIABLE. FORMERLY MONIUSZKO, JOHN J., SGT, 12085639, KALAIKUNDA, PLOT 7, ROW S, GRAVE 1868.

Permanently interred in N.M.C.P. Plot A - Grave 391

QMC FORM REV 11 FEB 48 1194

Disp. as Unk.

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		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	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

6

DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED	DIRECTIVE NUMBER	DATE
	4996 02008	03 09 50 (DAY MONTH YEAR)

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
UNKNOWN X-112			8	0	6

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS	
KALAIKUNDA INDIA	7	5	1868	0492 (CODE)	64 (DIST. CTR.)

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
NATIONAL MEMORIAL CEMETERY OF THE PACIFIC TERRITORY OF HAWAII	(BY ADMINISTRATIVE DECISION)

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	GRADE	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 (*Prepare Discrepancy Report QMC Form 1194a for major discrepancies.*)

CHANGE

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 AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

REMAINS ARE UNIDENTIFIABLE. FORMERLY MONIUSZKO, JOHN J., SGT, 12005639, KALAIKONDA, PLOT 7, ROW 5, GRAVE 1868.

Permanently interred in N. M. C. P. Plot F - Grave 391.

QMC FORM REV 11 FEB 48 1194

AIRMAIL

29 Bunk Kalaikunda X110

QMGM 293
GRS Pacific

1 September 1950

SUBJECT: Identification of World War II Deceased

TO : Commanding Officer
American Graves Registration Service
Pacific Zone
APO 958, c/o Postmaster
San Francisco, California

1. Reference is made to the following Unknown remains now stored in U. S. Army Mausoleum #2:

Unknown X-110 US Military Cemetery, Kalaikunda, India
Unit A, Page 1
Unknown X-111, U. S. Military Cemetery, Kalaikunda, India
Unit A, Page 1
Unknown X-112, U. S. Military Cemetery, Kalaikunda, India
Unit A, Page 1
Unknown X-113, U. S. Military Cemetery, Kalaikunda, India
Unit A, Page 1

2. Subject cases have been reviewed and this Office approves the classification of the above Unknowns as Unidentifiable.

FOR THE QUARTERMASTER GENERAL:

THOMAS E. COX
CAPT QMC
Memorial Division

J. Miller:dal
C. C. Salser

Copys furnished: CINCFE, APO 500

COAGRS, PZ, APO 928

X 29 Bunk Kalaikunda X110

AIRMAIL

RL

NATIONAL MEMORIAL CEMETERY OF THE PACIFIC

Interred 17 March 1950

F 391

DISINTERMENT DIRECTIVE

Cemetery Superintendent

SECTION A — NAME AND BURIAL LOCATION OF DECEASED	DIRECTIVE NUMBER	DATE
ALVAR C. BARKER	4996 00000	15 (DAY) 12 (MONTH) 47 (YEAR)

NAME	SERIAL NUMBER	RANK	ARM	DATE OF DEATH
UNKNOWN	X-112		J	DAY MONTH YEAR

CEMETERY	DISPOSITION OF REMAINS
KALAIKUNDA	0492 (CODE) 64 (DIST. PT.)

PLOT	ROW	GRAVE	COUNTRY	CAUSE OF DEATH
7	S	1868	INDIA	6

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
HONOLULU NATIONAL CEMETERY TERRITORY OF HAWAII (BY ADMINISTRATIVE ORDER)	

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED
UNKNOWN X-112 (KALAIKUNDA)	/		7 May '44	23 Oct '47

IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY
☐ REMAINS ☐ MARKER	UNKNOWN	Unk	D. D. HINDS 1st Lt., QMC NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
Temporary Casket	Skeletal

OTHER MEANS OF IDENTIFICATION

QMC Form 1042 & Ltr QMGMT-293, dated 21 Dec '49

MINOR DISCREPANCIES *1*

None

REMAINS PREPARED AND PLACED IN CASKET

DATE 23 Mar '48 BY L. A. JONES

CASKET SEALED BY	EMBALMER (Signature)
J. P. SIMONI	J. P. Simoni J. P. SIMONI

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
DATE 15 Mar 50 BY J. P. SIMONI	D. C. HERR

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

D. C. Herr

D. C. HERR

SIGNATURE OF GRS INSPECTOR

FILE 10 APR

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

QMC FORM REV 15 MAR 46 1194

X

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM U. S. ARMY MAUSOLEUM		TO CHIEF, HAWAIIAN DISTRIBUTION CENTER	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER DONALD D. HINES 1st Lt., QMC 0-2033595	DATE MAR 16 1950	SIGNATURE OF RECEIVER STEWART W. ABEL MAJOR, QMC	DATE MAR 16 1950

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
INDIA-BURMA ZONE
APO 465
c/o Postmaster, New York, N.Y.

12-WCH/se

Calcutta, India
13 January 1947

293 Unk. India (Kalaikunda) X-112

314.6 (13 Jan 47)

SUBJECT: Examination of human remains.

TO : The Commanding Officer,
American Graves Registration Service, India-Burma Zone,
APO 465.

1. The remains of grave No. 7 - S - 1868 of Manusko, John J. of U.S. Military Cemetery, Kalaikunda, India, were examined on 10th January 1947 and the following were identified:

2 Fragments of cranium
Fragment of a humerus
Fragment of a sacrum
Fragment of an ilium
Left femur
Left tibia

2. Accomplishment of dental identification chart was impossible.

3. There is no evidence of remains of more than one individual.

W.C. HILDERMAN,
Captain, M.C.
Surgeon.

Incl #3

6

DISINTERMENT DIRECTIVE

293 Unk (Indian) Tribe (Kalakunda)

SECTION A — NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER	DATE (DAY / MONTH / YEAR)
[illegible]	[illegible] / [illegible] / 47

NAME	SERIAL NUMBER	RANK	ARM	DATE OF DEATH (DAY / MONTH / YEAR)
UNKNOWN			U	

CEMETERY	DISPOSITION OF REMAINS (CODE / DIST. PT.)
NALAEKUHUA	[illegible] / [illegible]

PLOT	ROW	GRAVE	COUNTRY	CAUSE OF DEATH
[illegible]	[illegible]	[illegible]	INDIA	[illegible]

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
HONOLULU NATIONAL CEMETERY TERRITORY OF HAWAII. (BY ADMINISTRATIVE ORDER)	

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 DATE BY	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

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

QMC FORM REV 15 MAR 46 **1194**

6

DISINTERMENT DIRECTIVE

393 Unk (Indian) Mica (Kalakunda)

SECTION A — NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER	DATE (DAY / MONTH / YEAR)
4995 00000	15 / 12 / 47

NAME	SERIAL NUMBER	RANK	ARM	DATE OF DEATH (DAY / MONTH / YEAR)
UNKNOWN			J	

CEMETERY	DISPOSITION OF REMAINS (CODE / DIST. PT.)
KALAIKUNDA	0492 / 04

PLOT	ROW	GRAVE	COUNTRY	CAUSE OF DEATH
7	8	1365	INDIA	6

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
HONOLULU NATIONAL CEMETERY TERRITORY OF HAWAII (BY ADMINISTRATIVE ORDER)	

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 DATE BY	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

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

QMC FORM REV 15 MAR 46 **1194**

SPECIAL DIRECTIVE

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN				2. DATE OF REPORT
Moniuszko, John J., Sgt., 12085639				29 March 1948
3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT / REINTERMENT
U. S. Army Mausoleum #2	FINAL TYPE			29 Mar '48 / 29 Mar '48

PHYSICAL DESCRIPTION Age 22 to 24 years.

8. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR OF HAIR	11. RACE
approx 165 to 170	184.0-72.44-6' 3/8"	U. T. D.	Probably White

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

One (1) duplicate I.D. tag reading: Moniuszko, John J., Sgt, 12085639.

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

None

14. WAS BODY BURNED?	TO WHAT EXTENT?
[X] YES [ ] NO	Skull charred.
15. WAS BODY MANGLED?	**TO WHAT EXTENT?**
[X] YES [ ] NO	Fractured.

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)*

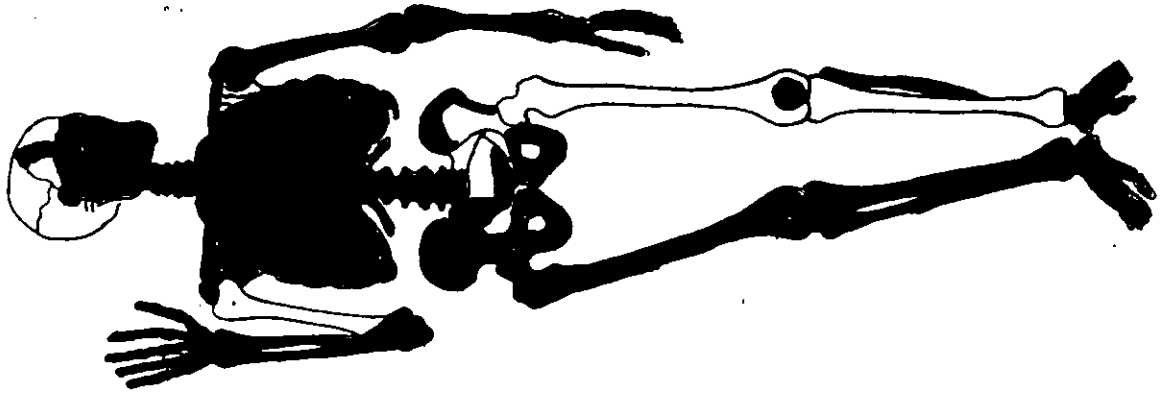
None

Incl 2

QMC FORM REV 18 MAR 47 1044 PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE

Moniuszko, John J., Sgt 12085639

19. BLACK OUT PARTS OF BODY NOT RECOVERED



20. **MASS BURIAL CERTIFICATE** *(IF APPLICABLE)*
(Wherein segregation in whole or parts is impossible)

I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF _____ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE
NUMBER
OF THE FOLLOWING ANATOMICAL PARTS:

No extra parts.

Paul L. Gravenor
SIGNATURE OF MEDICAL OFFICER Lab Supervisor

21. REMARKS AND ADDITIONAL INFORMATION

Picture a very tall but slender young man in his middle twenties.
The skull is medium in size and oval in outline. The backhead has a small occipital protuberance.
The face parts are missing which precludes description of facial characteristics.

Fluoroscopical examination unnecessary. No teeth present.

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	SIGNATURE
O. W. GREENWOOD, CAPT., QMC **CENTRAL IDENTIFICATION LABORATORY AND MAUSOLEUM, APO 957**	O W Greenwood

QMC FORM 18 MAR 47 1044b

J6

CENTRAL IDENTIFICATION LABORATORY & MAUSOLEUM
BONE LIST

NAME	SIDE	NO	BONE LENGTHS IN CM	REMARKS (IF MISSING OR FRACTURED, LIST PARTS AND LOCATION)
SKULL		1	approx 52.0	Fractured-facial parts missing.
VERTEBRAE	CERVICAL	0		Missing.
	THORACIC	0		"
	LUMBAR	0		"
SACRUM		1		Right wing & 1,2,3 segments missing.
INNOMINATES	RIGHT	0	BI-ILIAC DIAM	Missing.
	LEFT	1		Portion of ilium, ischium, pubis missing.
RIBS		0		Missing.
STERNUM		0		"
CLAVICLES	RIGHT	0		"
	LEFT	0		"
SCAPULAE	RIGHT	0		"
	LEFT	1		Fractured.
HUMERI	RIGHT	1		Lower end missing.
	LEFT	0		Missing.
RADII	RIGHT	0		"
	LEFT	0		"
ULNAE	RIGHT	0		"
	LEFT	0		"
HANDS	RIGHT	0		"
	LEFT	0		"
FEMORA	RIGHT	0		"
	LEFT	1	51.0	
PATELLAE	RIGHT	0		Missing
	LEFT	0		"
TIBIAE	RIGHT	0		"
	LEFT	1	41.1	
FIBULAE	RIGHT	0		Missing.
	LEFT	0		"
FEET	RIGHT	0		"
	LEFT	0		"

HUMERO-CLAVICULAR RATIO		APPROXIMATE	
184 72.44 ESTIMATED HEIGHT	6' 3/8"	AGE	22 to 24 YEARS
ESTIMATED WEIGHT	approx 165 to 170 lbs.	LEG-HIP BR RATIO	

ENCLOSURE TO: Moniuszko, John J., Sgt 12085639

Paul V. Gravenor
Lab Supervisor
ANTHROPOLOGIST

GP - AGRS 21
29 SEP 47

NARRATIVE

The remains of:

White, William W.,
Mahan, John J.,
Jones, Harold G.,
Moniuszko, John J.

were processed simultaneously. The bones of each remains were matched and compared and there were no errors in the previous associations of bones each casket contained, nor were there any extra bones present.

The remains were checked carefully and processed and then were wrapped separately and placed in their respective caskets.

SPECIAL DIRECTIVE

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-112 ~~Moniuszko, John J., Sgt., 12085639~~				2. DATE OF REPORT 29 March 1948	
3. NAME OF CEMETERY U. S. Army Mausoleum #2	4. PLOT FINAL	5. ROW TYPE	6. GRAVE	7. DATE OF DISINTERMENT 29 Mar '48	REINTERMENT 29 Mar '48

PHYSICAL DESCRIPTION Age 22 to 24 years.

8. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR OF HAIR	11. RACE
approx 165 to 170	184.0-72.44-6' 3/8"	U. T. D.	Probably White

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

None

14. WAS BODY BURNED?	TO WHAT EXTENT?
[X] YES [ ] NO	Skull charred.
15. WAS BODY MANGLED?	**TO WHAT EXTENT?**
[X] YES [ ] NO	Fractured.

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

None

UNIDENTIFIABLE
BY REASON OF LACK OF [illegible] IDENTIFYING DATA

DONALD D. HINDS
1st Lt. QMC 0-2033595 | Donald D. Hinds | MAR 14 1950

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)*

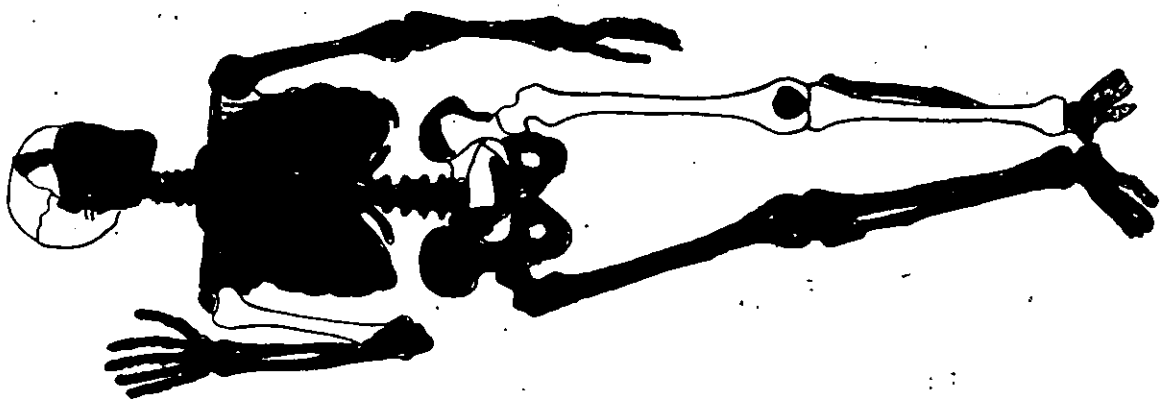
None

Received 21 Mar. 50 QMC
Not identifiable from information presently available
T. A. Fields
30 Aug. 50

Incl 15

QMC FORM REV 18 MAR 47 1044 PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE

19. BLACK OUT PARTS OF BODY NOT REQUIRED



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
NUMBER
OF THE FOLLOWING ANATOMICAL PARTS:

No extra parts.

Paul L. Cravonor
Paul L. Cravonor SIGNATURE OF MEDICAL OFFICER Lab Supervisor

21. REMARKS AND ADDITIONAL INFORMATION

Picture a very tall but slender young man in his middle twenties.
The skull is medium in size and oval in outline. The backhead has a small occipital protuberance.
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Fluoroscopical examination unnecessary. No teeth present.

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	SIGNATURE
O. W. GREENWOOD, CAPT., QMC CENTRAL IDENTIFICATION LABORATORY AND MAUSOLEUM, APO 957	O W Greenwood

QMC FORM 1044b
18 MAR 47

CENTRAL IDENTIFICATION LABORATORY & MUSOLEUM

BONE LIST

NAME	SIDE	NO	BONE LENGTHS IN CM	REMARKS (IF MISSING OR FRACTURED, LIST PARTS AND LOCATION)
SKULL		1	approx 52.0	Fractured-facial parts missing.
VERTEBRAE	CERVICAL	0		Missing.
	THORACIC	0		"
	LUMBAR	0		"
SACRUM		1		Right wing & 1,2,3 segments missing.
INNOMINATES	RIGHT	0	BI-ILIAC DIAM	Missing.
	LEFT	1		Portion of ilium, ischium, pubic missing.
RIBS		0		Missing.
STERNUM		0		"
CLAVICLES	RIGHT	0		"
	LEFT	0		"
SCAPULAE	RIGHT	0		"
	LEFT	1		Fractured.
HUMERI	RIGHT	1		Lower end missing.
	LEFT	0		Missing.
RADII	RIGHT	0		"
	LEFT	0		"
ULNAE	RIGHT	0		"
	LEFT	0		"
HANDS	RIGHT	0		"
	LEFT	0		"
FEMORA	RIGHT	0		"
	LEFT	1	51.0	
PATELLAE	RIGHT	0		Missing
	LEFT	0		"
TIBIAE	RIGHT	0		"
	LEFT	1	41.1	
FIBULAE	RIGHT	0		Missing.
	LEFT	0		"
FEET	RIGHT	0		"
	LEFT	0		"

HUMERO-CLAVICULAR RATIO		APPROXIMATE	
184 72.44 ESTIMATED HEIGHT 6' 3/8"	AGE	22 to 24	YEARS
ESTIMATED WEIGHT approx 165 to 170 lbs.		LEG-HIP BR RATIO	

ENCLOSURE TO: ~~[illegible]~~
UNKNOWN X-112

Paul L. Gravenor
Lab Supervisor
ANTHROPOLOGIST

GP - AGRS 21
29 SEP 47

NARRATIVE

The remains of:

White, William W.,
Mahan, John J.,
Jones, Harold G.,
Moniussko, John J.

were processed simultaneously. The bones of each remains were matched and compared and there were no errors in the previous associations of bones each casket contained, nor were there any extra bones present.

The remains were checked carefully and processed and then were wrapped separately and placed in their respective caskets.

SPECIAL DIRECTIVE

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN				2. DATE OF REPORT
Moniuszko, John J., Sgt., 12085639				29 March 1948
3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT / REINTERMENT
U. S. Army Mausoleum #2	FINAL TYPE			29 Mar '48 / 29 Mar '48

PHYSICAL DESCRIPTION Age 22 to 24 years.

8. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR OF HAIR	11. RACE
approx 165 to 170	184.0-72.44-6' 3/8"	U. T. D.	Probably White

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

One (1) duplicate I.D. tag reading: Moniuszko, John J., Sgt, 12085639.

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

None

14. WAS BODY BURNED?	TO WHAT EXTENT?
[X] YES [ ] NO	Skull charred.
15. WAS BODY MANGLED?	**TO WHAT EXTENT?**
[X] YES [ ] NO	Fractured.

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)*

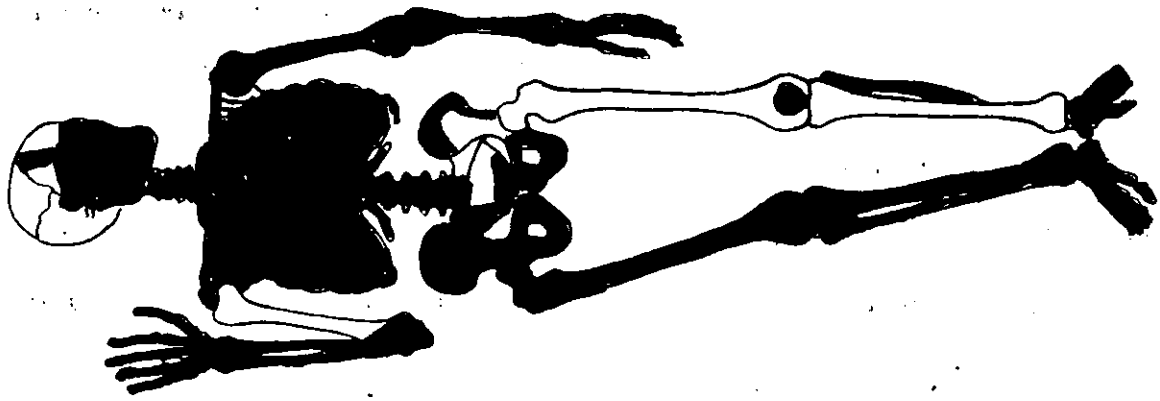
None

Incl 2

QMC FORM REV 18 MAR 47 1044 PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE

Moniuszko, John J., Sgt 12085639

19. BLACK OUT PARTS OF BODY NOT RECOVERED



20. **MASS BURIAL CERTIFICATE** *(IF APPLICABLE)*
(Wherein segregation in whole or parts is impossible)

I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF _____ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE
NUMBER
OF THE FOLLOWING ANATOMICAL PARTS:

No extra parts.

Paul L. Gravenor
SIGNATURE OF MEDICAL OFFICER Lab Supervisor

21. REMARKS AND ADDITIONAL INFORMATION

Picture a very tall but slender young man in his middle twenties.
The skull is medium in size and oval in outline. The backhead has a small occipital protuberance.
The face parts are missing which precludes description of facial characteristics.

Fluoroscopical examination unnecessary. No teeth present.

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	SIGNATURE
C. W. GREENWOOD, CAPT., QMC CENTRAL IDENTIFICATION LABORATORY AND MAUSOLEUM, APO 957	

QMC FORM 1044b
18 MAR 47

JG

CENTRAL IDENTIFICATION LABORATORY & MAUSOLEUM
BONE LIST

NAME	SIDE	NO	BONE LENGTHS IN CM	REMARKS (IF MISSING OR FRACTURED, LIST PARTS AND LOCATION)
SKULL		1	approx 62.0	Fractured-facial parts missing.
VERTEBRAE	CERVICAL	0		Missing.
	THORACIC	0		"
	LUMBAR	0		"
SACRUM		1		Right wing & 1,2,3 segments missing.
INNOMINATES	RIGHT	0	BI-ILIAC DIAM	Missing.
	LEFT	1		Portion of ilium, ischium, pubis missing.
RIBS		0		Missing.
STERNUM		0		"
CLAVICLES	RIGHT	0		"
	LEFT	0		"
SCAPULAE	RIGHT	0		"
	LEFT	1		Fractured.
HUMERI	RIGHT	1		Lower end missing.
	LEFT	0		Missing.
RADII	RIGHT	0		"
	LEFT	0		"
ULNAE	RIGHT	0		"
	LEFT	0		"
HANDS	RIGHT	0		"
	LEFT	0		"
FEMORA	RIGHT	0		"
	LEFT	1	51.0	
PATELLAE	RIGHT	0		Missing
	LEFT	0		"
TIBIAE	RIGHT	0		"
	LEFT	1	41.1	
FIBULAE	RIGHT	0		Missing.
	LEFT	0		"
FEET	RIGHT	0		"
	LEFT	0		"

HUMERO-CLAVICULAR RATIO		APPROXIMATE	
184 72.44 ESTIMATED HEIGHT 6' 3/8"	AGE	22 to 24	YEARS
ESTIMATED WEIGHT approx 165 to 170 lbs.		LEG-HIP BR RATIO	

ENCLOSURE TO: Koniussko, John J., Sgt 12085639

Paul L. Cravenor
Lab Supervisor
~~ANTHROPOLOGIST~~

GP - AGRS 21
29 SEP 47

NARRATIVE

The remains of:

White, William W.,
Mahan, John J.,
Jones, Harold G.,
Koniussko, John J.

were processed simultaneously. The bones of each remains were matched and compared and there were no errors in the previous associations of bones each casket contained, nor were there any extra bones present.

The remains were checked carefully and processed and then were wrapped separately and placed in their respective caskets.

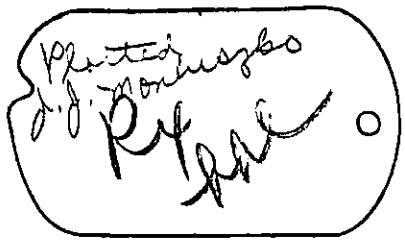
WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

REPORT OF ~~INTERMENT~~ STORAGE

(AR 30-1810 and AR 30-1815)

DATE OF REPORT: 13 March 1950

Imprint Identification Tag If Possible. DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (*Last, first, middle initial*)		SERIAL No.
UNIDENTIFIABLE UNKNOWN X-112	(Formerly Moniuszko, John J., USMC Kalaikunda)	Unknown

GRADE	ORGANIZATION	BRANCH OF SERVICE
Unknown	Unknown	Unknown

RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
White	Unknown	

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
Near Shillong Road, Assam, India	Explosion and disintegration of plane in mid-air	7 May 1944

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

Unknown

IDENTIFICATION TAGS FOUND ON BODY (*1, 2, or none*): None

WERE SUBSTITUTE TAGS PROVIDED? (*Yes or no*): Yes

IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (*If unidentified, fill in section 3 on reverse*)

Ltr. OQMG, QMGMT 293, GRS Pacific dtd 21 December 1949
Subj: Identification of World War II Deceased.

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

DATE OF BURIAL	HOUR	BURIED IN (*Shroud, blanket, or name of other*)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	~~GRAVE~~ No.
24 Feb. '48		Casket Final type casket				1718

WAS THIS A REBURIAL? (*Yes or no*)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE	PLOT No.	ROW No.	GRAVE No.
Yes	USMC Kalaikunda, India	7	S	1868

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

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

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

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

SIGNATURE OF PERSON PREPARING REPORT: I. K. Usher
I. K. USHER - Clerk

SIGNATURE OF GRS OFFICER VERIFYING REPORT: Donald D. Hinds
DONALD D. HINDS, 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.*

Incl 11'

16—43997-1

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	

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

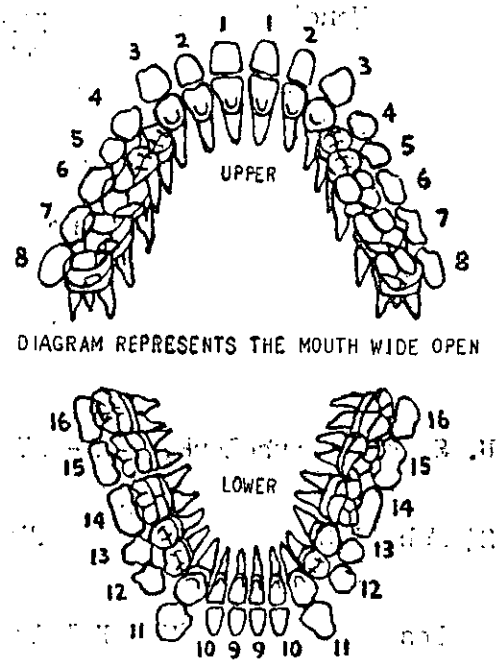
FILLINGS

CAVITIES

MISSING TEETH

CROWNED TEETH

BRIDGE WORK



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

REMARKS:

22 MAY

Identification [illegible]

16—48097-1 U. S. GOVERNMENT PRINTING OFFICE

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: 13 March 1950

Imprint Identification Tag If Possible. DO NOT TYPE

Section 1.—IDENTIFICATION.

NAME (*Last, first, middle initial*)	SERIAL No.
UNIDENTIFIABLE UNKNOWN X-112 (Formerly Moniuszko, John J., USMC Kalaikunda)	Unknown

GRADE	ORGANIZATION	BRANCH OF SERVICE
Unknown	Unknown	Unknown

RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
White	Unknown	

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
Near Shillong Road, Assam, India	Explosion and disintegration of plane in mid-air	7 May 1944

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

Unknown

IDENTIFICATION TAGS FOUND ON BODY (*1, 2, or none*): None

WERE SUBSTITUTE TAGS PROVIDED? (*Yes or no*): Yes

IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (*If unidentified, fill in section 3 on reverse*)

Ltr. OQMG, QMGMT 293, GRS Pacific dtd 21 December 1949
Subj: Identification of World War II Deceased.

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

DATE OF BURIAL	HOUR	BURIED IN (*Shroud, blanket, or name of other*)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	~~GRAVE~~ Casket No.
24 Feb. '48		Final type casket				1718

WAS THIS A REBURIAL? (*Yes or no*)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE	PLOT No.	ROW No.	GRAVE No.
Yes	USMC Kalaikunda, India	7	8	1868

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

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

BODY BURIED ON DECEASED LEFT, NAME (*Last, first, middle initial*)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
Not applicable due to	—	—	—	—

BODY BURIED ON DECEASED RIGHT, NAME (*Last, first, middle initial*)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
manner of storing caskets	—	—	—	—

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
I. K. USHER - Clerk	DONALD D. HINDS, 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.*

Incl 11 2

16—43997-1

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

Section 3.—UNIDENTIFIED REMAINS.

INSTRUCTIONS:

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

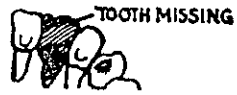
WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND

OTHER IDENTIFICATION CLUES

FILLINGS

CAVITIES

MISSING TEETH



CROWNED TEETH

BRIDGE WORK

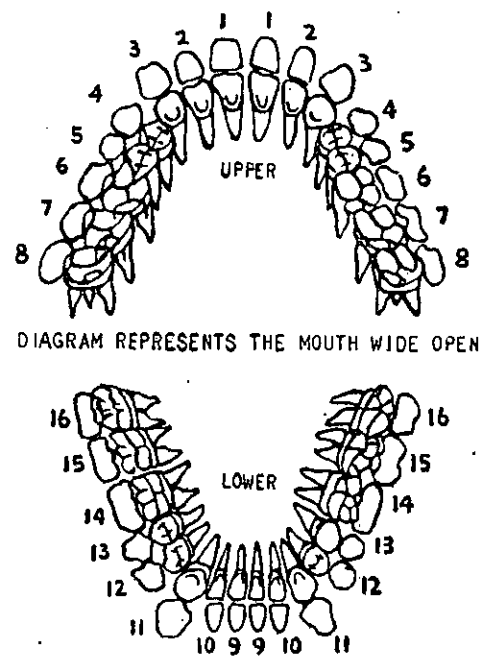
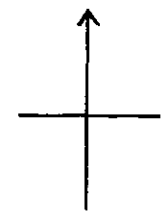


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN

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



REMARKS:

22 MAR 1950

Identification Section

16—43907-1 U. S. GOVERNMENT PRINTING OFFICE

RESTRICTED REINTERMENT

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: 12 Feb 1946

Imprint Identification Tag If Possible. DO NOT TYPE

Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)	SERIAL No.
Moniuszko, John J.	12085639

GRADE	ORGANIZATION	BRANCH OF SERVICE
Sgt	82 Bomb Sq 12 Bomb Gp	

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

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
Near Shillong Rd Assam, India	Explosion and disintegration of Plane in mid air	7 May 1944

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

Mrs. Martha Moniuzko (Mother) 109 - 15 Pine Rd, Jamaica L. I. N.Y.

IDENTIFICATION TAGS FOUND ON BODY (*1, 2, or none*): ~~CEC~~ NO

WERE SUBSTITUTE TAGS PROVIDED? (*Yes or no*): yes (1)

IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (*If unidentified, fill in section 3 on reverse*): GRAVE MARKER ~~CEC~~

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

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. Military Cemetery, Kalaikunda, India

DATE OF BURIAL	HOUR	BURIED IN (*Shroud, blanket, or name of other*)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
11 Feb 1946	1600	Blanket	Reg. V-Type	7	S	1868

WAS THIS A REBURIAL? (*Yes or no*)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE ~~CEC~~	PLOT No.	ROW No.	GRAVE No.
yes	British Military Cemetery, Sylhet, India	1	B	14

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

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

BODY BURIED ON DECEASED LEFT, NAME (*Last, first, middle initial*)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
Teer, John W., Jr.	Sgt	14163577	1347th AAF Bn	1869

BODY BURIED ON DECEASED RIGHT, NAME (*Last, first, middle initial*)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
Hunter, Vurlen M.	Sgt	17013930	3rd Com Car	1867

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
Pfc P.J. Krystosek	William S Smith Jr, 2nd Lt, Inf

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

Incl A 2

RESTRICTED

16—43907-1

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

Section 3. UNIDENTIFIED REMAINS.

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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

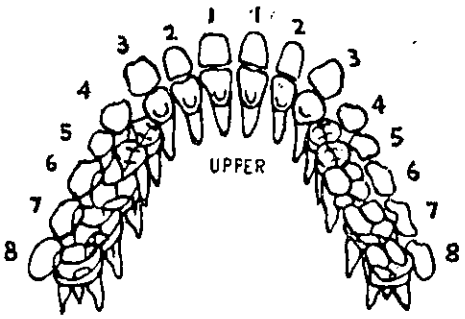
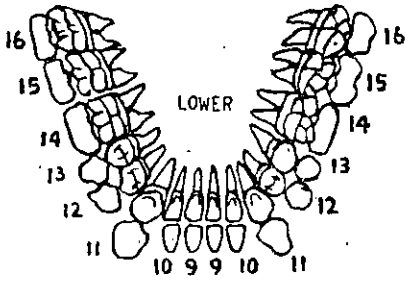
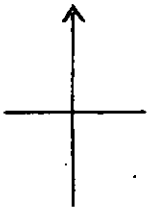


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



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



REMARKS:

16—43997-1 U. S. GOVERNMENT PRINTING OFFICE