

## FILE IDENTIFICATION TOPPER

FILE NUMBER

293 Ant. Manila # 2 X-577

SUBJECT

Also Manila # 4519

Formerly ant. Palanatuan Com. C-174

Associated with 293. Cannon, William E. Jr.

Interred 20 February 1950  
N 13 190 Ft. McKinley

PREPARED BY PHILCOM

DISINTERMENT DIRECTIVE

N-13-112

*Carl R. H. Mark*  
CARL R. H. MARK  
Cemetery Superintendent  
SECTION A -  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER  
7747 80666

DATE  
09 02 50  
DAY MONTH YEAR

SERIAL NUMBER GRADE ARM RACE RELIGION

UNKNOWN X - 577

ETERY PLOT ROW GRAVE DISPOSITION OF REMAINS  
USAF CEMETERY MANILA NO. 2, P. I. 2 17 2163 7701 80  
CODE DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE  
UNITED STATES MILITARY CEMETERY  
FT. W. MCKINLEY, P. I.

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

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER GRADE DATE OF DEATH DATE DISTINTERRED  
UNKNOWN X - 577 18 Feb '50

IDENTIFICATION TAG ON ORGANIZATION RELIGION IDENTIFICATION VERIFIED BY  
 REMAINS  MARKER PAUL R NICHOLS  
Embalmer NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL CONDITION OF REMAINS  
Shelter Half Skeletal

OTHER MEANS OF IDENTIFICATION  
X - 4519 Maus.

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)

REMAINS PREPARED AND PLACED IN CASKET

DATE 18 Feb '50 BY PAUL R NICHOLS

CASKET SEALED BY EMBALMER (Signature)  
PAUL R NICHOLS PAUL R NICHOLS


CASKET BOXED AND MARKED SHIPPING ADDRESS VERIFIED BY  
DATE 18 Feb '50 BY RAYMOND H TANGUAY, Sgt 1c, RA L. W. RICHARDSON, M/Sgt, RA

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

*L. W. Richardson*  
L. W. RICHARDSON, M/Sgt, RA  
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS  
FILE  
3 APR 1950  
REPATRIATION  
BRANCH  
MEMO FILE

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED		FROM	AGRS MAUSOLEUM	TO	US MILITARY CEMETERY
KIND OF CONVEYANCE		TRUCK			
SIGNATURE OF SHIPPER					
DATE		FEB 20 1950			
2. SHIPPED		FROM		TO	
KIND OF CONVEYANCE					
SIGNATURE OF SHIPPER					
DATE					
3. SHIPPED		FROM		TO	
KIND OF CONVEYANCE					
SIGNATURE OF SHIPPER					
DATE					
4. SHIPPED		FROM		TO	
KIND OF CONVEYANCE					
SIGNATURE OF SHIPPER					
DATE					
5. SHIPPED		FROM		TO	
KIND OF CONVEYANCE					
SIGNATURE OF SHIPPER					
DATE					
6. SHIPPED		FROM		TO	
KIND OF CONVEYANCE					
SIGNATURE OF SHIPPER					
DATE					
7. SHIPPED		FROM		TO	
KIND OF CONVEYANCE					
SIGNATURE OF SHIPPER					
DATE					
8. SHIPPED		FROM		TO	
KIND OF CONVEYANCE					
SIGNATURE OF SHIPPER					
DATE					

3

PREPARED BY PHILCOM

DISINTERMENT DIRECTIVE

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

7747 08666

09 02 50  
DAY MONTH YEAR

NAME: UNKNOWN I - 977 SERIAL NUMBER: GRADE: ARM: RACE: RELIGION:

CEMETERY: USMP CEMETERY MANILA NO. 2, P. I. PLOT: 2 ROW: 19 GRAVE: 2163 DISPOSITION OF REMAINS: 7701 00  
CODE DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

NAME AND ADDRESS OF NEXT OF KIN

UNITED STATES MILITARY CEMETERY  
FT. W. MCINLEY, P. I.

(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: NAME AND TITLE:  
 REMAINS  
 MARKER

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: 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

REPAIR BRANCH

HEADQUARTERS  
PRILECOM ZONE  
AMERICAN GRAVES REGISTRATION SERVICE

12 Dec 1949

Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 577 , Plot 2 ,  
Row 17 , Grave 2163 , USMC USAF Cem Manila #2 have  
been reviewed and it is the opinion of this Office that insufficient  
evidence is available to establish the identity of this deceased,  
and that these remains should be classified as unidentifiable.

FOR THE COMMANDING OFFICER:

*H. B. McNEELAR*  
H. B. McNEELAR  
Captain, QMC  
Chief, Records Branch

Atch: Form 1044

Rec'd  
Not identifiable from  
information presently  
available

JAN 18 1950

*J. J. Gules*  
JAN 23 1950

## IDENTIFICATION DATA

1. REMAINS OF UNKNOWN <b>UNKNOWN X-4519 (Formerly UNK X-577 Manila #2)</b>				2. DATE OF REPORT <b>21 Dec 1949</b>	
3. NAME OF CEMETERY <b>AGRS Mausoleum, Manila, P.I.</b>		4. PLOT <b>802</b>	5. ROW <b>G</b>	6. GRAVE <b>2211</b>	7. DATE OF DISINTERMENT REINTERMENT

### PHYSICAL DESCRIPTION

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

**N O N E**

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

**U T D**

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

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

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

**N O N E**

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

**N O N E**

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

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

TOP VIEW

SIDE VIEW



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

Gold Crown, Porcelain Crown



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

Gold Bridge



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

Gold Filling, Silver Filling



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

Cavity, Decayed



Fractured

Maxilla Missing

RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
<i>o</i>	<i>h</i>	<i>A</i>											<i>A</i>		<i>o</i>
<i>f</i>	<i>d</i>	<i>mo</i>											<i>o</i>		<i>o</i>
Side Views															
UPPER															
LOWER															
Side Views															
	<i>A</i>	<i>o</i>									<i>o</i>		<i>A</i>	<i>A</i>	
	<i>o</i>	<i>o</i>									<i>o</i>		<i>o</i>	<i>no</i>	<i>o</i>
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

See Remarks

**DENTURES (Plates):** DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAINING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

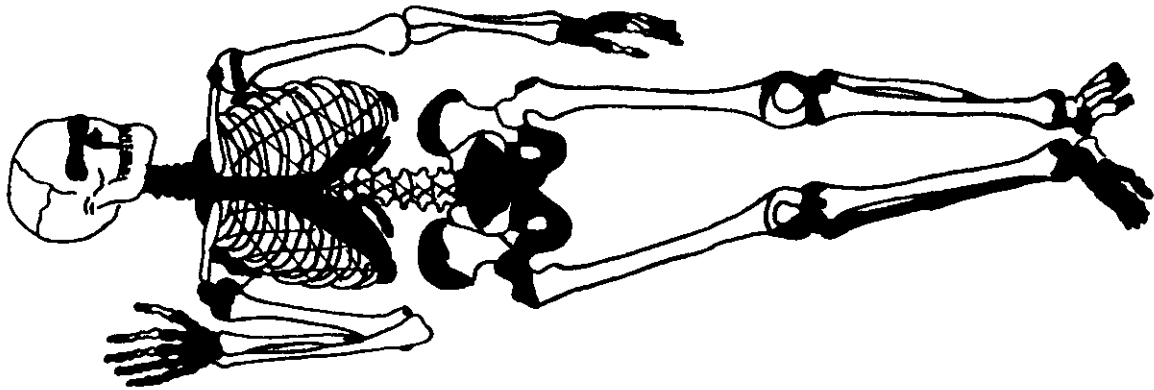
**REMARKS:** L16 unerupted. R2 thru L2 and R10 thru L10 indicate sign of attrition.

*Paul R. Nichols*

PAUL R. NICHOLS  
Chief, Identification Section

**"UNIDENTIFIABLE"**

REASON OF LACK OF SUFFICIENT IDENTIFYING DATA



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

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

\_\_\_\_\_  
SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

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

Estimated weight of remains - 7 lbs.

Circumference of skull - 21 inches.

**"UNIDENTIFIABLE"**

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

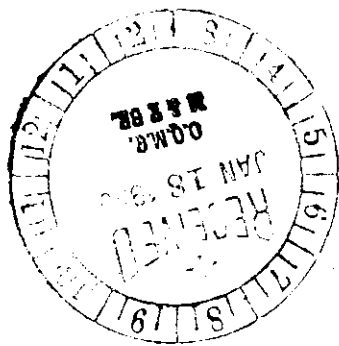
I CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS OF DECEASED AND THAT ALL RESULTING INFORMATION HAS BEEN RECORDED TO THE BEST OF MY KNOWLEDGE

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION  
**PAUL R NICHOLS**  
Chief, Identification Section

SIGNATURE  
*Paul R. Nichols*







**ARMY SERVICE FORCES  
MEMO ROUTING SLIP**

TO THE FOLLOWING IN THE ORDER INDICATED		CHECK ACTION	
TO: (Name, organization, building) 1. <b>CARE OF THE DEAD SECTION ADMINISTRATIVE DIVISION BUREAU OF MEDICINE &amp; SURGERY</b>	INITIALS		CONCURRENCE
	DATE	<b>X</b>	SIGNATURE
2.  <b>ATTENTION: Miss Cordy</b>			NOTE AND RETURN
			NOTE AND FORWARD
3.			COMPLETE ACTION
			CIRCULATE
			INFORMATION
			FILE

It is requested that the dental charts on the attached Reports of Interment for Unknowns X-575, X-576, and X-577, USAF Cemetery Manila No. 2, be checked with the dental record of ROEBUCK, George B., GM3c, 266 02 20, USN, for possible identification.

*J. K. Waite*  
J. K. WAITE

*No dental chart  
in jacket.*

FROM: (Name, organization, building) <b>NAVY LIAISON OFFICER BLDG "B" RM2448 REP. RECORDS BR., MEMORIAL DIV., OCMG</b>	DATE <b>11 July 46</b> TEL <b>87-73880</b>
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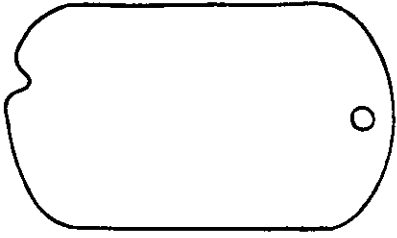
RESTRICTED

U-1991

WD OMC FORM 1042  
(Rev. 1 Apr. 1945)  
(Supersedes GRS Form 1)REPORT OF INTERMENT  
(AR 30-1810 and AR 30-1815)

DATE OF REPORT

1 February 1946

Imprint Identification Tag If Possible. DO NOT TYPE  	Section 1.—IDENTIFICATION.		
	NAME (Last, first, middle initial) UNKNOWN X - 577 (CANNON, William E) (Formerly Unknown C-174, Cabanatuan Cem., Luzon, P.I.)		SERIAL No. 11024133 <del>2660220</del> JR
	GRADE Pvt.	ORGANIZATION 27th Bomb	BRANCH OF SERVICE Air Corps
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	

PLACE OF DEATH Cabanatuan POW Camps I and II, Luzon, P.I.	CAUSE OF DEATH Dysentery	DATE OF DEATH 3 Mar 43
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EMERGENCY ADDRESSEE (Name, relationship, and address)  
Mrs. Mary Cannon (W) 28 Jefferson St, Newton, Maine

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) Three (3) bodies found in Common Grave - Prison Record indicate as follows:
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) Yes (2)	1. S/Sgt. Williams, Robert W. 7 CWS 6906704 2. GM 3/c Roebuck, George B. USN 11024133 JR 3. Pvt. Cannon, William F. 27 Bomb 2660220

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  
None

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY USAF cemetery Manila No. 2, Luzon, P. I.						
DATE OF BURIAL 5 Jan. 1946	HOUR 1400	BURIED IN (Shroud, blanket, or name of other) Shelter Half	TYPE OF GRAVE MARKER Cross	PLOT No. 2	ROW No. 17	GRAVE No. 2163
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. 41(841)
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 - 576 (ROEBUCK, George B) (Formerly Unknown C-173, Cabanatuan Cem., Luzon, P.I.)	RANK GM 3/c	SERIAL No. 11024133	ORGANIZATION USN	GRAVE No. 2162
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) ALLISON, Elkony A.	RANK Pfc.	SERIAL No. 6972937	ORGANIZATION 192nd Tank USA	GRAVE No. 2164

SIGNATURE OF PERSON PREPARING REPORT R. C. BARRETT, T/4, GRS.	SIGNATURE OF GRS OFFICER VERIFYING REPORT E. M. MOORE, 1st Lt., OMC.
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DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.

RESTRICTED

**Section 3. UNIDENTIFIED REMAINS.**

**INSTRUCTIONS:**

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


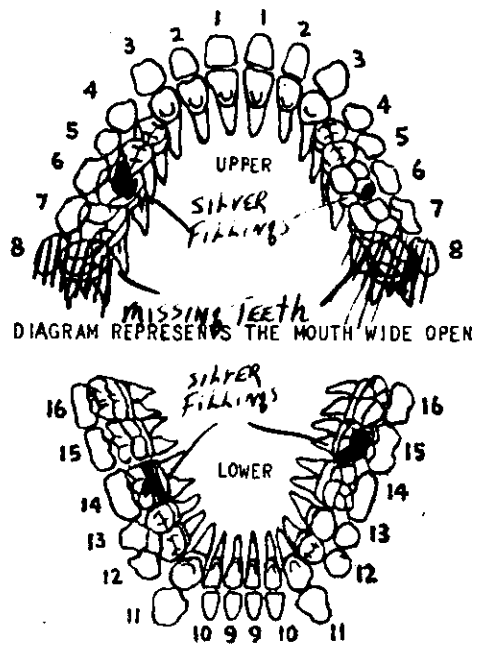




(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

**85 MAR 1946**

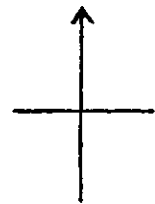
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
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WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
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OTHER IDENTIFICATION CLUES

FILLINGS		
CAVITIES		
MISSING TEETH		
CROWNED TEETH		
BRIDGE WORK		

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



REMARKS: