

FILE IDENTIFICATION TOPPER

FILE NUMBER

SUBJECT

293. sub Manila Cem #2 X-763

Formerly Cabanatuan C-235

RESTRICTED

*Att.*

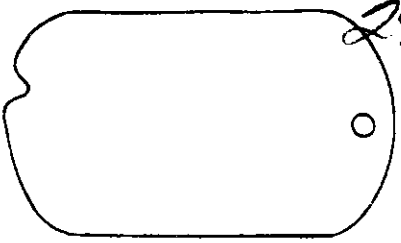
QMC Form 1042  
(Rev. 1 Apr. 1946)  
(Supersedes GRS Form 1, and  
Rev. of 1 Apr. 45, which may be used.)

**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)

293 UNKNOWN X-763 Manila #2

~~(Manila Mausoleum X-444)~~

SERIAL No.

Unknown

GRADE

Unknown

ORGANIZATION

Unknown

BRANCH OF SERVICE

Unknown

RACE

Unknown

RELIGION

Unknown

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

PLACE OF DEATH

POW Camp, Cabanatuan  
Luzon, P.I.

CAUSE OF DEATH

Unknown

DATE OF DEATH

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)

COMPLETED TOOTH CHART ON QMC FORM 1045 ATTACHED HERETO

YES  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. WM. MCKINLEY, P.I.

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	14	147

WAS THIS A REBURIAL?  
(Yes or no)

Yes

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

USAF Cemetery Manila #2, Luzon, P.I.

PLOT No.	ROW No.	GRAVE No.
2	18	2271

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)

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

Reclass, 7/15/52

FILE RECORDS ANNOTATED 11 Jan 52

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

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

Quinn

NAME H. BR. MEM. DIV. Regis

SIGNATURE OF PERSON PREPARING REPORT

SIGNATURE OF GRS OFFICER VERIFYING REPORT

Edward L. Berg, CPL, RA

Charles R. Whaylen, 1st Lt., QMC

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

RESTRICTED

**Section 3.—UNIDENTIFIED REMAINS.**

**INSTRUCTIONS:**

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

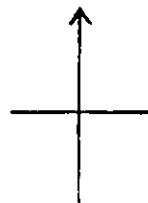
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

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

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

OTHER IDENTIFICATION CLUES

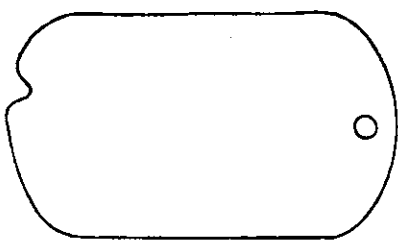

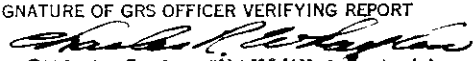
FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY



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

**RESTRICTED**

QMC Form 1042 (Rev. 1 Apr. 1946) (Supersedes GRS Form 1, 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 <p align="center"><b>3 Dec 1951</b></p>		
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.				
		NAME (Last, first, middle initial) <p align="center"><b>UNKNOWN X-763 Manila #2</b>                  (Manila Mausoleum X-4465)</p>		SERIAL No. <p align="center"><b>Unknown</b></p>		
GRADE <p align="center"><b>Unknown</b></p>		ORGANIZATION <p align="center"><b>Unknown</b></p>		BRANCH OF SERVICE <p align="center"><b>Unknown</b></p>		
RACE <p align="center"><b>Unknown</b></p>		RELIGION <p align="center"><b>Unknown</b></p>		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY		
PLACE OF DEATH <p><b>PO Camp, Cabanatuan Luzon, P.I.</b></p>		CAUSE OF DEATH <p align="center"><b>Unknown</b></p>		DATE OF DEATH <p align="center"><b>Unknown</b></p>		
EMERGENCY ADDRESSEE (Name, relationship, and address) <p align="center"><b>Unknown</b></p>						
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) <p align="center"><b>None</b></p>		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) <p align="center"><b>Yes (2)</b></p>		COMPLETED TOOTH CHART ON QMC FORM 1045 ATTACHED HERETO <p align="center"><input type="checkbox"/> YES      <input checked="" type="checkbox"/> NO</p>				
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME <p 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 align="center"><b>UNITED STATES MILITARY CEMETERY, Ft. Mc. 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.
<b>29 Nov 1951</b>	<b>--</b>	<b>Casket</b>	<b>Cross</b>	<b>H</b>	<b>14</b>	<b>147</b>
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.
<b>Yes</b>	<b>USAF Cemetery Manila #2, Luzon, P.I.</b>			<b>2</b>	<b>18</b>	<b>2271</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)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)					
<b>Yes</b>	<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			SIGNATURE OF GRS OFFICER VERIFYING REPORT			
 <b>EDWARD L. BERG, SGT., RA</b>			 <b>CHA LES 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.						

**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.

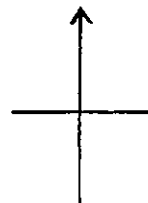
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

*ato*

1

DISINTERMENT DIRECTIVE

*293 unk manila #2 X-763*

SECTION A - NAME AND BURIAL LOCATION OF DECEASED	DIRECTIVE NUMBER	DATE
	7747 00428	17 <del>10</del> 52 DAY MONTH YEAR

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
UNKNOWN X-763			2	0	6

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS
MANILA #2 P I	2	18	2271	7701 80 CODE DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN

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

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISINTERRED
IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY	
<input type="checkbox"/> REMAINS <input type="checkbox"/> 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	EMBALMER (Signature)

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY

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

\_\_\_\_\_  
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

REMAINS ARE UNIDENTIFIABLE. PERM INTERRED IN FT. MCKINLEY, P. I., PLOT H, ROW 14, GRAVE 147. FORMERLY UNK C-235, CABANATUAN CEMETERY.

**RECORD OF CUSTODIAL TRANSFER**

<b>1. SHIPPED</b>			
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
			DATE
			SIGNATURE OF RECEIVER
			DATE
<b>2. SHIPPED</b>			
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
			DATE
			SIGNATURE OF RECEIVER
			DATE
<b>3. SHIPPED</b>			
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
			DATE
			SIGNATURE OF RECEIVER
			DATE
<b>4. SHIPPED</b>			
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
			DATE
			SIGNATURE OF RECEIVER
			DATE
<b>5. SHIPPED</b>			
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
			DATE
			SIGNATURE OF RECEIVER
			DATE
<b>6. SHIPPED</b>			
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
			DATE
			SIGNATURE OF RECEIVER
			DATE
<b>7. SHIPPED</b>			
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
			DATE
			SIGNATURE OF RECEIVER
			DATE

RESTRICTED

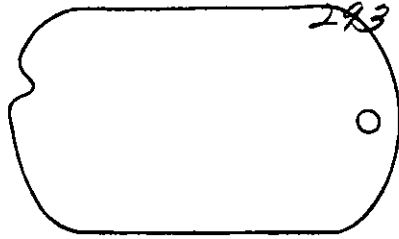
WD QMC FORM 1042  
(Rev. 1 Apr. 1945)  
(Supersedes GRS Form 1)

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

DATE OF REPORT

DEC 12 1950

Imprint Identification Tag If Possible.  
DO NOT TYPE



Section 1.—IDENTIFICATION.

243 unit Manila #2-1-763

NAME (Last, first, middle initial)

UNKNOWN X-763 USAF Gen Manila FC, P. I.  
(Manila Maus X-4465)

SERIAL No.

Unknown

GRADE

Unknown

ORGANIZATION

Unknown

BRANCH OF SERVICE

Unknown

RACE

White

RELIGION

Unknown

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

PLACE OF DEATH

POW Camp, Cabanatuan,  
Luzon, P. I.

CAUSE OF DEATH

Unknown

DATE OF DEATH

24 Oct 42

EMERGENCY ADDRESSEE (Name, relationship, and address)

Unknown

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

None

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

WERE SUBSTITUTE TAGS PROVIDED?(Yes or no)

Yes (2)

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

3 Nov 50

HOUR

--

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

Final type casket

TYPE OF GRAVE  
MARKER

MARKING

Manila Section 292

MARKING

D

MARKING

1242

WAS THIS A REBURIAL?  
(Yes or no)

Yes

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

AGRS Mausoleum Manila, P. I.

Manila Section 292  
302 D 1242

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

M. A. N. G. G. G.

GRAVE No.

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

manner of storing caskets.

RANK

--

SERIAL No.

--

ORGANIZATION

U. S. Army

GRAVE No.

SIGNATURE OF PERSON PREPARING REPORT

LERJOY F. TURNER, Adm. Asst.


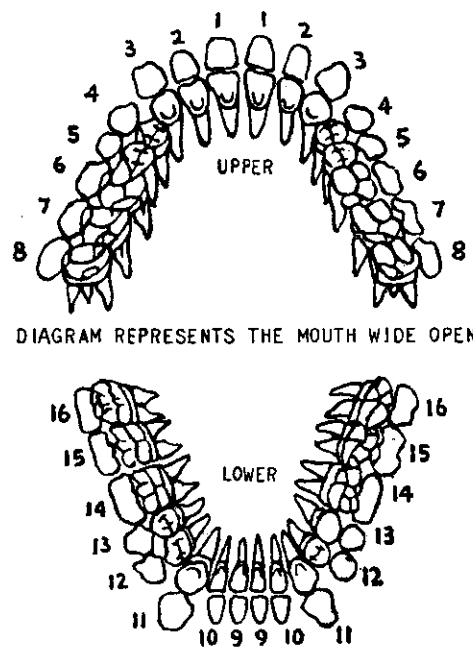




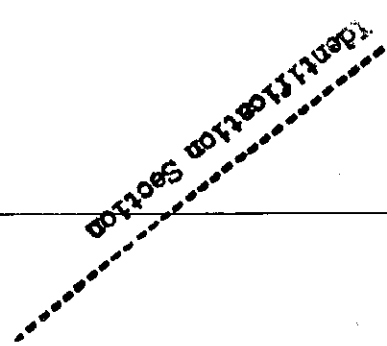
SIGNATURE OF GRS OFFICER VERIFYING REPORT

STANLEY E. LAY, Major, GRC

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



LEFT LITTLE FINGER	<b>Section — UNIDENTIFIED REMAINS.</b>				
	<p><b>INSTRUCTIONS:</b></p> <p>(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.</p> <p>(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.</p>				
LEFT RING FINGER	HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
LEFT MIDDLE FINGER	WEAPON AND SERIAL NO.		LAUNDRY MARKS		WHERE BODY WAS BURIED OR FOUND
LEFT INDEX FINGER	OTHER IDENTIFICATION CLUES				
LEFT THUMB	FILLINGS  SILVER FILLING GOLD FILLING		 <p align="center">UPPER</p> <p align="center">LOWER</p> <p align="center">DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>		
RIGHT THUMB	CAVITIES  CAVITY DECAYED				
RIGHT INDEX FINGER	MISSING TEETH  TOOTH MISSING				
RIGHT MIDDLE FINGER	CROWNED TEETH  PORCELAIN CROWN GOLD CROWN				
RIGHT RING FINGER	BRIDGE WORK  GOLD BRIDGE				
RIGHT LITTLE FINGER					
FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY					
					
REMARKS:					

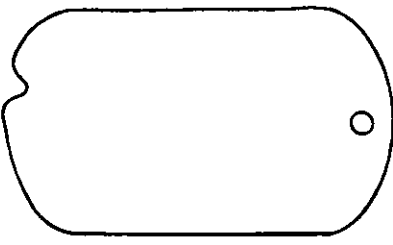
**RESTRICTED**

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

**REPORT OF IMPROPER STORAGE**  
(AR 30-1810 and AR 30-1815)

DATE OF REPORT

**DEC 12 1950**

<p><i>Imprint Identification Tag If Possible. DO NOT TYPE</i></p> 	<p><b>Section 1.—IDENTIFICATION.</b></p>		
	<p>NAME (Last, first, middle initial) <b>UNKNOWN I-765 USAF Com Manila #2, P. I. (Manila Maus I-4465)</b></p>		<p>SERIAL No. <b>Unknown</b></p>
	<p>GRADE <b>Unknown</b></p>	<p>ORGANIZATION <b>Unknown</b></p>	<p>BRANCH OF SERVICE <b>Unknown</b></p>
	<p>RACE <b>White</b></p>	<p>RELIGION <b>Unknown</b></p>	<p>IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY</p>

<p>PLACE OF DEATH <b>POW Camp, Cabanatuan, Luzon, P.I.</b></p>	<p>CAUSE OF DEATH <b>Unknown</b></p>	<p>DATE OF DEATH <b>24 Oct 48</b></p>
--	--	---

EMERGENCY ADDRESSEE (Name, relationship, and address)

**Unknown**

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

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 <b>3 Nov 50</b>	HOUR <b>--</b>	BURIED IN (Shroud, blanket, or name of other) <b>Final type casket</b>	TYPE OF GRAVE MARKER	PLLOT NO. <b>Manila</b>	ROW NO. <b>Section</b>	GRAVE NO. <b>282</b>
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<p>WAS THIS A REBURIAL? (Yes or no) <b>Yes</b></p>	<p>IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE</p> <p align="center"><b>AGRS Mausoleum Manila, P. I.</b></p>	<p>PLLOT NO. <b>802</b></p>	<p>ROW NO. <b>D</b></p>	<p>GRAVE NO. <b>1242</b></p>
--	--	---------------------------------	-----------------------------	----------------------------------

<p>TYPE OF RELIGIOUS CEREMONY <b>--</b></p>	<p>PERSON CONDUCTING BURIAL RITES <b>--</b></p>	<p>IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY</p>
<p>IDENTIFICATION TAG BURIED WITH BODY (Yes or no) <b>--</b></p>	<p>IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) <b>--</b></p>	

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

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

<p>SIGNATURE OF PERSON PREPARING REPORT <i>[Signature]</i> <b>HEROY F. TURNER, Adm. Asst.</b></p>	<p>SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>[Signature]</i> <b>STANLEY E. MAY, Major, MC</b></p>
---	--

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:**


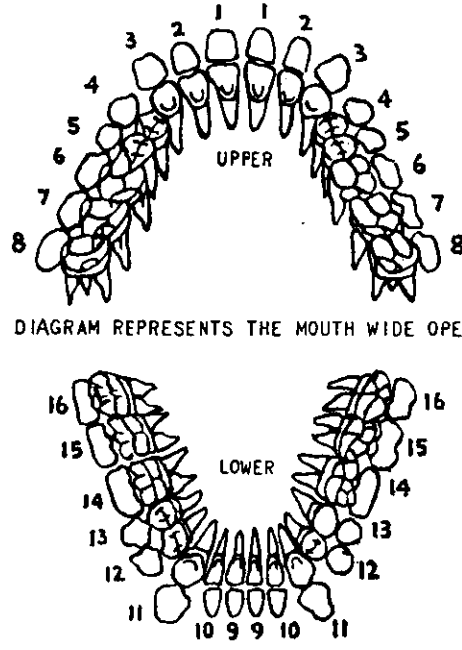




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HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
--------	--------	---------------	---------------	-------------------------------

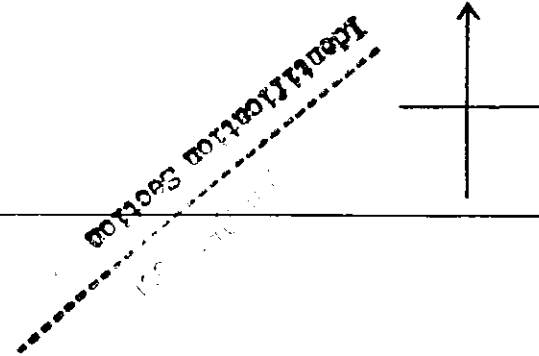
WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
-----------------------	---------------	--------------------------------

**OTHER IDENTIFICATION CLUES**

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

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

**REMARKS:**



DDMG FORM 1947  
16 JUN 50

ADJUSTMENT OF RECORDS  
ON X-NUMBER CASES

X-NUMBER OR NAME AND SERIAL NUMBER

X-763, USAF Cem

CEMETERY

Manila #2

PLOT

ROW

GRAVE

- |  |  |
|--|--|
| <input type="checkbox"/> APPROVED IDENTIFICATION | <input type="checkbox"/> REDESIGNATION |
| <input type="checkbox"/> CANCELLATION            | <input type="checkbox"/> NEW X-NUMBER  |
| <input type="checkbox"/> CONSOLIDATION           | <input type="checkbox"/>               |

REMARKS

23 Aug 50 -  
Mr. [unclear] said DD  
will not be out as  
X-763 is <sup>not</sup> <sub>1</sub> Declared Unidentifiable.  
fm

**IDENTIFICATION DATA**

1. REMAINS OF UNKNOWN UNKNOWN X-4465 (Formerly UNK X-763 Manila #2)				2. DATE OF REPORT 20 Dec 1949	
3. NAME OF CEMETERY 29B Unk, Manila #2 AGRS Mausoleum, Manila, P.I. 1-763		4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT REINTERMENT

PHYSICAL DESCRIPTION Age: 20-25

8. ESTIMATED WEIGHT 150-180 lbs	9. ESTIMATED HEIGHT 6'3 5/8"	10. COLOR OF HAIR U T D	11. RACE White
------------------------------------	---------------------------------	----------------------------	-------------------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

N O N E

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

U T D

14. WAS BODY BURNED? TO WHAT EXTENT?

YES  NO

15. WAS BODY MANGLED? TO WHAT EXTENT?

YES  NO

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

N O N E

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

N O N E

**APPROVED UNIDENTIFIABLE**

J. Lee  
Ident & Rec  
31 Mar 52

✓  
File - NAT  
6 Dec  
J. Lee  
31 Mar 52

600 13

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:

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

RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Maxilla Missing								Maxilla Missing							
Side Views								Side Views							
Top Views								Top Views							
Side Views								Side Views							
16								16							
15								15							
14								14							
13								13							
12								12							
11								11							
10								10							
9								9							
9								9							
10								10							
11								11							
12								12							
13								13							
14								14							
15								15							
16								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."

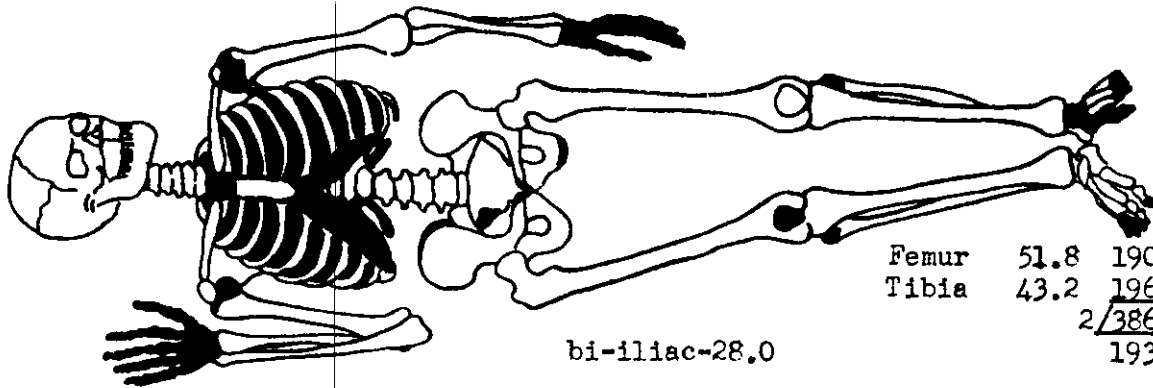
No loose maxillary teeth present with remains. R16 is partially impacted in horizontal position.

*Paul R. Nichols*

PAUL R. NICHOLS  
Chief, Identification Section

*Serial #3A*

19. BLACK OUT PARTS OF BODY NOT RECOVERED



Estimate height: 6'3 5/8"

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

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

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

21. REMARKS AND ADDITIONAL INFORMATION

This is the remains of a male individual, of white ancestry, well over six feet (est. 6'3 5/8"), weighing between 150 and 180 lbs, and in the early twenty's at time of death (est. 20-25 yrs.).

To the best of my professional ability, this remains is properly segregated, and represents one and the same individual.

See attached Anthropologist's statement dated 20 December 1949.

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 E. FOX  
 Anthropologist

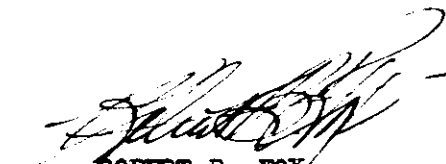
SIGNATURE





Remains UNK X-4467 compares best with the Form 371 submitted for REDKER, John William Jr., 1830108, as to height. No dental information or age was given on REDKER's 371.

Remains stored as DRAKE, Henry A., 20843587, do not compare well with the Form 371 submitted for DRAKE as to discrepancies in height and dental comparisons.



ROBERT B. FOX  
Anthropologist

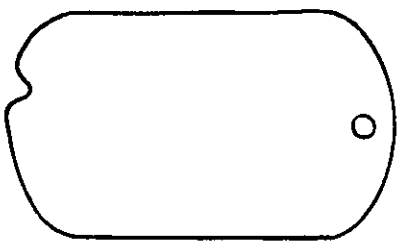
RESTRICTED

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

18 June 48

Imprint Identification Tag If Possible. DO NOT TYPE  	Section 1.—IDENTIFICATION.		
	NAME (Last, first, middle initial) UNKNOWN X-4465 (Formerly UNK X-763, USAF Cem Manila #2, Luzon, P.I.)		SERIAL No. Unknown
	GRADE Unknown	ORGANIZATION Unknown	BRANCH OF SERVICE Unknown
	RACE Unknown	RELIGION Unknown	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH POW Camp, Cabanatuan, Luzon, P.I.	CAUSE OF DEATH Unknown	DATE OF DEATH 24 Oct 47 <sup>42</sup>
--	---------------------------	--

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) See Remarks
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (2)	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  
None

A TRUE COPY:  
*K. B. McNEEMAN*  
K. B. McNEEMAN  
Capt., GMC

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  
AGRS Mausoleum, Manila, P.I.

DATE OF BURIAL STORAGE 25 May 48	HOUR 0800	BURIED IN (Shroud, blanket, or name of other) <del>SHROUD</del> Casket	TYPE OF GRAVE MARKER None	PLOT No. 802	ROW No. D	GRAVE No. CRYPT 1242
--	--------------	--	------------------------------	-----------------	--------------	----------------------------

WAS THIS A REBURIAL? (Yes or no) <del>RESTORED</del> Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery Manila #2, Luzon, P.I.	PLOT No. 2	ROW No. 18	GRAVE No. 2271
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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) <del>STORED</del> Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes
--	--

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) <del>NAME</del> PREECE, Roscoe (NMI)	RANK Pfc	SERIAL NO. 15116798	ORGANIZATION Btry "C" 136th FA Bn	GRAVE NO. CRYPT 1244
---	-------------	------------------------	---	----------------------------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) HOLLISTER, Clarence C	RANK Pfc	SERIAL NO. 37549203	ORGANIZATION Med Det 130th Inf Regt	GRAVE NO. CRYPT 1240
--	-------------	------------------------	---	----------------------------

SIGNATURE OF PERSON PREPARING REPORT <i>/s/t/ V C AQUINO T/5 GMC</i>	SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>/s/t/ L S PANOFIO, 1st Lt Inf</i>
---	---

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

**RESTRICTED**

**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

LEFT LITTLE FINGER		<p align="center">UPPER</p>
LEFT RING FINGER		
LEFT MIDDLE FINGER		
LEFT INDEX FINGER		
LEFT THUMB		
RIGHT THUMB		
RIGHT INDEX FINGER		
RIGHT MIDDLE FINGER		
RIGHT RING FINGER	<p align="center">LOWER</p>	
RIGHT LITTLE FINGER	<p align="center">DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>	

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

**REMARKS:** UNKNOWN X-4465 AGRS Mausoleum, Manila, P.I. (Formerly UNK X-763, USAF Cemetery Manila #2, Luzon, P.I.), could be anyone of the following burials in Grave 710, Row 0, Plot 7, Cabanatuan POW Camp Cemetery whose identity have not been established:

- REIMAN, John W. 1830108 ACMM USN
- OIE, Jasper J. 6937861 S/Sgt 21 FUR
- BERRIER, William I, 3602244, ACM/3c USN

REMARKS:

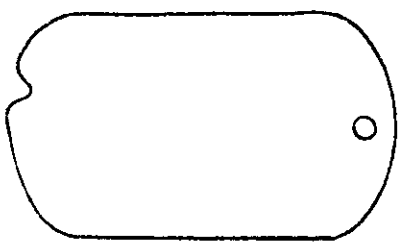
CMC Form 1044, 1044-A and 1044-B accomplished.

**7 FEB 1950**

**Identification Section**

**RESTRICTED**

WD OMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)	RE/ <b>REPORT OF INTERMENT</b> (AR 30-1810 and AR 30-1815)	DATE OF REPORT  <b>4 Feb 46</b>
---	--	---------------------------------------

Imprint Identification Tag If Possible. DO NOT TYPE  	Section 1.—IDENTIFICATION.			
	NAME (Last, first, middle initial) <b>U N K N O W N X-763 (REIMAN, John W)</b> <b>(Formerly UNKNOWN C-235 Cabanatuan Cem)</b>	SERIAL NO.  <b>1830108</b>		
	GRADE  <b>ACMM</b>	ORGANIZATION  <b>USN</b>	BRANCH OF SERVICE  <b>Navy</b>	
	RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	


PLACE OF DEATH <b>POW Camp, Cabanatuan, Luzon, P I</b>	CAUSE OF DEATH	DATE OF DEATH  <b>24 Oct 42</b>
---	----------------	---------------------------------------

EMERGENCY ADDRESSEE (Name, relationship, and address)

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>Seven (7) bodies found in common grave. Prison records indicate:-</b> <b>Reiman, John W. 1830108 ACMM USN</b> <b>Pvt Williams, Howard R. 39676506 194 Tank</b> <b>(See Sec 3 reverse side)-</b>
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no)  <b>Yes (2)</b>	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

**None**

TRUE COPY:  
  
**B. McNEMAR**  
**Capt., CMC**

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

**USAF Cemetery Manila #2, Luzon, P I**

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.
<b>9 Jan 46</b>	<b>0900</b>	<b>Shelter Half</b>	<b>Cross</b>	<b>2</b>	<b>18</b>	<b>2271</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>POW Camps I &amp; II Cabanatuan Cemetery, Luzon, P I</b> <b>45.7-70.9, 1/50,000</b>	PLOT No. <b>7</b>	ROW No. <b>0</b>	GRAVE No. <b>710</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>	


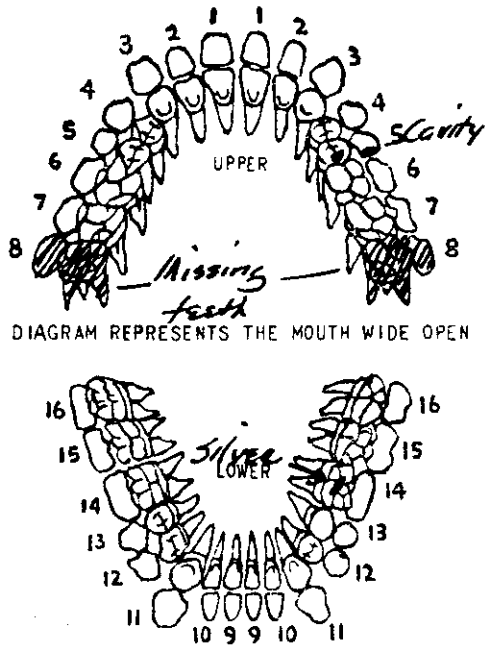




BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) <b>U N K N O W N X-762 (THOMPSON, Samuel H)</b> <b>(Formerly UNKNOWN C-234 Cabanatuan Cem)</b>	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.  <b>2270</b>
---	------	------------	--------------	------------------------------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) <b>U N K N O W N X-764 (WILLIAMS, Howard R)</b> <b>(Formerly UNKNOWN C-236 Cabanatuan Cem)</b>	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.  <b>2272</b>
--	------	------------	--------------	------------------------------

SIGNATURE OF PERSON PREPARING REPORT  <b>/s/t/ R. C. BARRETT, S/Sgt., GRS.</b>	SIGNATURE OF GRS OFFICER VERIFYING REPORT  <b>/s/t/ E. M. MOORE, 1st Lt., CMC.</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.

**RESTRICTED**

LEFT LITTLE FINGER	Section <b>UNIDENTIFIED REMAINS.</b>			
	<b>INSTRUCTIONS:</b> (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.			
LEFT RING FINGER	HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR
				BIRTHMARKS, SCARS, OR TATTOOS
LEFT MIDDLE FINGER	WEAPON AND SERIAL No.		LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
	OTHER IDENTIFICATION CLUES			
LEFT INDEX FINGER	FILLINGS  SILVER FILLING GOLD FILLING		 DIAGRAM REPRESENTS THE MOUTH WIDE OPEN	
LEFT THUMB	CAVITIES  CAVITY DECAYED			
RIGHT THUMB	MISSING TEETH  TOOTH MISSING			
RIGHT INDEX FINGER	CROWNED TEETH  PORCELAIN CROWN GOLD CROWN			
RIGHT MIDDLE FINGER	BRIDGE WORK  GOLD BRIDGE			
RIGHT RING FINGER	FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY S/Sgt Oie, Jasper J. 6937861 21 Pur 1st Sgt Sullivan, Robert E. 6763372 31 Inf Berrier, William I. 3602244 AOM 3/c USN Cpl Drake, Henry A. 20843587 200 CAC			
RIGHT LITTLE FINGER	The above names were buried in this grave. Individual identification impossible. Out of the seven (7) bodies found One (1) was identified and Six (6) were unidentified.			
	REMARKS:			
	Previously reported UNKNOWN X-673 (REITMAN, John W) (Formerly UNKNOWN C-235 Cabanatuan Cem)			

HEADQUARTERS  
CENTRAL IDENTIFICATION POINT  
A BRIGHT GRAVES REGISTRATION SERVICE-FAR EASTERN ZONE

APO 707  
25 June 48

The following cases are those disinterred from a common  
grave at Cabanatuan Prison Camp - Grave #710, Row O, Plot #7.  
The unknown numbers are AGIS Mausoleum numbers:

UNKNOWN X-4467  
" X-4466  
" X-4465

YOUNG, Elwyn S.  
SULLIVAN, Robert L.  
WILLIAMS, Howard B.  
DRAKE, Henry A.

*File #5*

(EXTRACT COPY) HISTORICAL COPY OF CASUALTY REPORT CAMP DEATH REPORT

(EXTRACT)

Name	Rank & Organ	Ser. No.	Age	Birth	Date of Death	No.	Cause	Nearest kin and address	Grave
Reimen, John W.	AD Lt USN	1830108	42	11/6/99	10:00 AM 10/24/42	2041	M. DU	Margaret Reimen; Havelock, Iowa.	710
Williams, Howard R.	Pvt 194 Tank	39676506	25	1/17/17	6:00 AM 10/24/42	2042	DU	Grever O. Williams; Rt #2, Buhl, Idaho.	710
Drake, Henry A.	Corp 200 O.C	20843587	23	9/29/19	2:30 PM 10/24/42	2043	DU	Mrs I. Drake; 407 Prince St., Clevis, N. D.	710
Oie, Casper J.	S-Sgt 21 Fur	6937851	25	12/4/17	1:30 PM 10/24/42	2044	DU. Malm	Mrs Bert Oie; Colfax, N. D.	710
									X
Sullivan, Herbert B.	1st Sgt 31 Inf	6763372	33	8/15/09	7:30 AM 10/24/42	2046	Malm	James Sullivan; 1752 Bendary St., Carmure, Mich.	710
Youmans, Elwyn S.	1st AD	12016296	32	12/28/10	11:00 PM 10/24/42	2047	Malm	Mr F. Youmans; Box 32, McLean, N. Y.	710
Berrier, William I.	Corp AD	1007819	22	12/26/19	10:00 PM 10/24/42	2048	BB	Mrs O. W. Berrier; Maypearl, Texas	710
									X

A TRUE EXTRACT COPY:

*H. D. McNEIL*  
 H. D. McNEIL  
 Captain, JMC

RESTRICTED

N 4465

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

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

DATE OF REPORT  
4 Feb 46

<p>Imprint Identification Tag If Possible. DO NOT TYPE</p>	<p><b>Section 1.—IDENTIFICATION.</b></p>		
	<p>NAME (Last, first, middle initial) U N K N O W N X-763 (REILAN, John W) (Formerly UNKNO N O-235 Cabanatuan Cem)</p>		<p>SERIAL No. 1830108</p>
	<p>GRADE ACM</p>	<p>ORGANIZATION USI</p>	<p>BRANCH OF SERVICE Navy</p>
	<p>RACE</p>	<p>RELIGION</p>	<p>IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY</p>

<p>PLACE OF DEATH PO. Camp, Cabanatuan, Luzon, P I</p>	<p>CAUSE OF DEATH</p>	<p>DATE OF DEATH 24 Oct 42</p>
--	-----------------------	------------------------------------

EMERGENCY ADDRESSEE (Name, relationship, and address)

<p>IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None</p>	<p>IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) Seven (7) bodies found in common grave. Prison records indicate:- Reilan, John W. 1830108 ACM USN Pvt Williams, Howard R. 39676506 194 Tank (see Sec 3 reverse side)-</p>
<p>WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (2)</p>	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

None

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  
USAF Cemetery Manila #2, Luzon, P I

DATE OF BURIAL	HOOR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
9 Jan 46	0900	Shelter half	Cross	2	18	2271

<p>WAS THIS A REBURIAL? (Yes or no) Yes</p>	<p>IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE PO. Camps I &amp; II Cabanatuan Cemetery, Luzon, P I 45.7-70.9 1/30,000</p>	<p>PLOT No. 7</p>	<p>ROW No. 0</p>	<p>GRAVE No. 710</p>
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<p>TYPE OF RELIGIOUS CEREMONY</p>	<p>PERSON CONDUCTING BURIAL RITES</p>	<p>IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY</p>
<p>IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes</p>	<p>IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes</p>	

<p>BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) U N K N O W N X-762 (THOMPSON, Samuel H) (Formerly UNKNO N O-234 Cabanatuan Cem)</p>	<p>RANK</p>	<p>SERIAL No.</p>	<p>ORGANIZATION</p>	<p>GRAVE No. 2273</p>
--	-------------	-------------------	---------------------	---------------------------

<p>BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) U N K N O W N X-764 (WILLIAMS, Howard R) (Formerly UNKNO N O-236 Cabanatuan Cem)</p>	<p>RANK</p>	<p>SERIAL No.</p>	<p>ORGANIZATION</p>	<p>GRAVE No. 2272</p>
---	-------------	-------------------	---------------------	---------------------------

<p>SIGNATURE OF PERSON PREPARING REPORT <i>[Signature]</i></p>	<p>SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>[Signature]</i> E. M. [Name], 1st Lt., [Grade]</p>
--	--

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 8. UNIDENTIFIED REMAINS.**


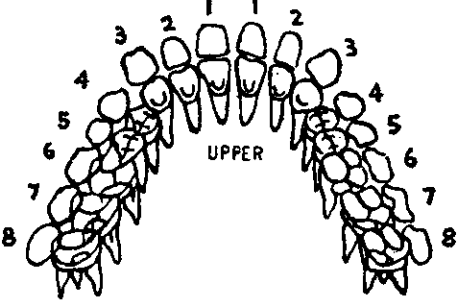




**INSTRUCTIONS:**

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

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

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

**OTHER IDENTIFICATION CLUES**

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

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

S/ Sgt Oke, Jasper J. 6937361 21 Fur  
 1st Sgt Sullivan, Robert E. 6763272 31 Inf  
 Berreier, William I. 3602244 AOM 3/c USN  
 Cpl Drake, Henry A. 20843587 200 CAC

The above names were buried in this grave. Individual identification impossible. Out of the seven (7) bodies found One (1) was identified and Six (6) were unidentified.

**REMARKS:**

Previously reported UNKNOWN X-673 (REILAN, John W)  
 (Formerly UNKNOWN C-235 Cabanatuan Cem)

9 APR 1949

LEFT  
LITTLE FINGER

LEFT  
RING FINGER

LEFT  
MIDDLE FINGER

LEFT  
INDEX FINGER

LEFT  
THUMB

RIGHT  
THUMB

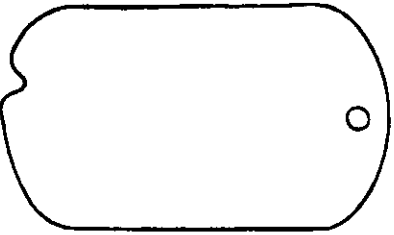
RIGHT  
INDEX FINGER

RIGHT  
MIDDLE FINGER

RIGHT  
RING FINGER

RIGHT  
LITTLE FINGER

**RESTRICTED**

WD OMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		<b>REPORT OF INTERMENT</b> (AR 30-1810 and AR 30-1815)			DATE OF REPORT 4 Feb 46	
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.				
		NAME (Last, first, middle initial) UNKNOWN X-763 (Reiman, John W.) (Formerly Unknown G-235 Cabanatuan Cen.)			SERIAL No. 13 01 08	
		GRADE AC1	ORGANIZATION Navy		BRANCH OF SERVICE Navy	
		RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY		
PLACE OF DEATH POW Camp, Cabanatuan, Luzon, P.I.		CAUSE OF DEATH			DATE OF DEATH 24 Oct 42	
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) Records indicate seven (7) bodies found in common grave, six unknowns of which were unidentified:				
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (2)		REIMAN, John W. 13 01 08 AC1 USN WILLIAMS, Howard R. Pvt. 39676506 194 Tank (See sec. 3 reverse side)				
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME None						
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.						
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY USAF Cemetery Manila #2, Luzon, P.I.						
DATE OF BURIAL 9 Jan 46	HOUR 0900	BURIED IN (Shroud, blanket, or name of other) Shelter Half	TYPE OF GRAVE MARKER Cross	PLOT No. 2	ROW No. 18	GRAVE No. 2271
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 Cabanatuan Cemetery, Luzon, P.I. 45.7-70.9 1/50,000			PLOT No. 7	ROW No. 0	GRAVE No. 710
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-762 (Thompson, Samuel H.) (Formerly Unknown G-234 Cabanatuan Cen.)			RANK	SERIAL No.	ORGANIZATION	GRAVE No. 2270
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-764 (Williams, Howard R.) (Formerly Unknown G-236 Cabanatuan Cen.)			RANK	SERIAL No.	ORGANIZATION	GRAVE No. 2272
SIGNATURE OF PERSON PREPARING REPORT /s/ R.C. BARRETT, S/Sgt AUS			SIGNATURE OF GRS OFFICER VERIFYING REPORT /s/ E.M. MOORE, 1st Lt. OMC			
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 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.

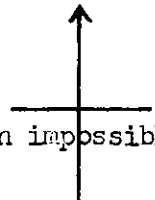
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
WEAPON AND SERIAL NO.		LAUNDRY MARKS		WHERE BODY WAS BURIED OR FOUND

**OTHER IDENTIFICATION CLUES**

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

Cpl. DRAKE, Henry A. 20843587 200 CAC  
 S/Sgt OLE, Jasper J. 6937861, 21 PUR  
 1st Sgt. SULLIVAN, Robert E. 6763372 31st Inf  
 BERRIER, William I. 18007819 Pvt AC  
 were buried in this grave. Individual identification impossible.  
 Out of seven bodies one identified.



**REMARKS:**

RESTRICTED

N 4465

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

4 Feb. 46

Imprint Identification Tag If Possible. DO NOT TYPE		Section 1.—IDENTIFICATION.		SERIAL No.		
		NAME (Last, first, middle initial) UNKNOWN -X- 673 (Reiman, John W.) (Formerly unknown C-235 Cabanatuan Cem.)		1830108		
		GRADE ACMM	ORGANIZATION USN	BRANCH OF SERVICE NAVY		
		RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY		
PLACE OF DEATH POW Camp, Cabanatuan, Luzon, P. I.		CAUSE OF DEATH		DATE OF DEATH 24 Oct. 42		
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) Seven (7) bodies found in common grave. Records indicate: Reiman, John W. 1830108 ACMM USN Pvt Williams, Howard R. 39676506 194 Tank Cpl Drake, Henry A. 20843587 200 OAC (See Section 3, reverse side)				
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (2)						
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  None						
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.						
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  USAF Cemetery Manila #2, Luzon, P. I.						
DATE OF BURIAL 9 Jan. 46	HOUR 0900	BURIED IN (Shroud, blanket, or name of other) shelter half	TYPE OF GRAVE MARKER Cross	PLOT No. 2	ROW No. 18	GRAVE No. 2271
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 & II Cemetery, Cabanatuan, Luzon, P. I. 45-7-70.9 1/50.000			PLOT No. 7	ROW No. 0	GRAVE No. 710
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- 762 (Thompson, Samuel H.) (Formerly unknown C-234 Cabanatuan Cem.) Pvt		RANK Pvt	SERIAL No. 13003316	ORGANIZATION AC	GRAVE No. 2270	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN -X- 764 (Williams, Howard R.) (Formerly unknown C-236 Cabanatuan Cem.) Pvt		RANK Pvt	SERIAL No. 39676506	ORGANIZATION 194 Tank	GRAVE No. 2272	
SIGNATURE OF PERSON PREPARING REPORT R. C. BARRETT, S/Sgt. GRS.			SIGNATURE OF GRS OFFICER VERIFYING REPORT E. M. MOORE, 1st Lt. QMC.			
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.						

RESTRICTED

16-43997-1

**25 FEB 1948**

**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
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WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
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OTHER IDENTIFICATION CLUES

FILLINGS	<p>SILVER FILLING GOLD FILLING</p>	
CAVITIES	<p>CAVITY DECAYED</p>	
MISSING TEETH	<p>TOOTH MISSING</p>	
CROWNED TEETH	<p>PORCELAIN CROWN GOLD CROWN</p>	
BRIDGE WORK	<p>GOLD BRIDGE</p>	

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

S/sgt. Oie, Jasper J. 693786a 21 PUR  
 1st Sgt. Sullivan, Robert E. 6763372 31st Inf.  
 Barrister, William I. 3602244 AOM 30 USN

The above names were buried in this grave. Individual identification impossible. Out the seven (7) bodies found one (1) was identified and six (6) were unidentified.

REMARKS: