

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 unk. Manila #2 X-816

SUBJECT

Miss Manila News X-4858

Family unk. Sabanautan Am. C-276

Interred 21 Feb 1950 11 FEB 52
 N-11-101 Ft. McKinley PRA 1042 DTD 2 Feb 52
 A-102-195
 Carl R. H. Mark
 CARL R. H. MARK
 PREPARED BY PHILCOM
 DISINTERMENT DIRECTIVE
 N-11-101

1

Cemetery Superintendent
 SECTION A -
 NAME AND BURIAL LOCATION OF DECEASED
 DIRECTIVE NUMBER
 7147 80690
 DATE
 09 02 50
 DAY MONTH YEAR

NAME SERIAL NUMBER GRADE ARM RACE RELIGION
 UNKNOWN X - 816

CEMETERY PLOT ROW GRAVE DISPOSITION OF REMAINS
 USAF CEMETERY MANILA NO. 2, P. I. 2 20 2485
 7701 80
 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. WM. MCKINLEY, P. I. (BY ADMINISTRATIVE DECISION)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER GRADE DATE OF DEATH DATE DISTINTERRED
 UNKNOWN X - 816 20 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 - 4858 Maus.

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

REMAINS PREPARED AND PLACED IN CASKET

DATE 20 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
 20 Feb '50 BY RAYMOND H TANGUAY, Sgt lc, 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

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM

AGRS MAUSOLEUM

TO

US MILITARY CEMETERY

KIND OF CONVEYANCE

TRUCK

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

3

PREPARED BY PHILCOM

DISINTERMENT DIRECTIVE

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

7147 80690

09 02 50
DAY MONTH YEAR

NAME: UNKNOWN I - 816 SERIAL NUMBER: GRADE: ARM: RACE: RELIGION:

CEMETERY: USAF CEMETERY MANILA NO. 2, P. I. PLOT: 2 ROW: 20 GRAVE: 2485 DISPOSITION OF REMAINS: 7701 80
CODE DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE: UNITED STATES MILITARY CEMETERY FT. WM. 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: IDENTIFICATION TAG ON: ORGANIZATION: RELIGION: IDENTIFICATION VERIFIED BY: NAME AND TITLE:

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: CONDITION OF REMAINS:

OTHER MEANS OF IDENTIFICATION:

MINOR DISCREPANCIES (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:

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM

TO

NAME OF CONVOYER

KIND OF CONVEYANCE

DATE

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

2. SHIPPED

FROM

TO

NAME OF CONVOYER

KIND OF CONVEYANCE

DATE

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

3. SHIPPED

FROM

TO

NAME OF CONVOYER

KIND OF CONVEYANCE

DATE

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

4. SHIPPED

FROM

TO

NAME OF CONVOYER

KIND OF CONVEYANCE

DATE

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

5. SHIPPED

FROM

TO

NAME OF CONVOYER

KIND OF CONVEYANCE

DATE

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

6. SHIPPED

FROM

TO

NAME OF CONVOYER

KIND OF CONVEYANCE

DATE

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

7. SHIPPED

FROM

TO

NAME OF CONVOYER

KIND OF CONVEYANCE

DATE

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

293 -Unk. P. I. (Misc) (Maus. Manila) (X-4849 thru X-4858, X-2806, 2807-A thru X-2812, 2799 thru X-2795, 2796-A, 2797 Thru X-2799, X-4101 and X-4102)
 26 January 1950

AIRMAIL
 GRS Far East

SUBJECT: Identification of World War II Deceased

TO : Commanding Officer
 American Graves Registration Service
 Philcom Zone
 APO 900, c/o Postmaster
 San Francisco, California

1. Reference is made to findings of Unidentifiability for the following Unknown Deceased:

Unknown	ACRS Maus. Manila, formerly	USAF Com. Man. #2
X-4849,	X-818	
" X-4850,	" " " "	X-920
" X-4851,	" " " "	X-821
" X-4852,	" " " "	X-822
" X-4853,	" " " "	X-823
" X-4854,	" " " "	X-824
" X-4855,	" " " "	X-812
" X-4856,	" " " "	X-814
" X-4857,	" " " "	X-815
" X-4858,	" " " "	X-816
" X-2806,	" " " "	X-2936
" X-2807-A,	" " " "	X-2937
" X-2808,	" " " "	X-2938
" X-2809,	" " " "	X-2939
" X-2810,	" " " "	X-2940
" X-2811,	" " " "	X-2941
" X-2812,	" " " "	X-2942
" X-2793,	" " " "	X-2943
" X-2794,	" " " "	X-2944
" X-2795,	" " " "	X-2945
" X-2796-A,	" " " "	X-2946
" X-2797,	" " " "	X-2947
" X-2798,	" " " "	X-2948
" X-2799,	" " " "	X-2949
" X-4101,	Manila #2, P. I.	X-2796-B, AGRS Maus. Manila
" X-4102,	" " " "	X-2807-B, " " "

2. Recommendations for Unidentifiability have been approved by this Office. Request your records be amended accordingly.

FOR THE QUARTERMASTER GENERAL:

A. C. Kingsrve
 L. E. White
 J. Windsor

T. H. Metz
 T. H. METZ
 Lt. Colonel, SIG
 Memorial Division

REB
 TEC

AIRMAIL

X 293 Unk P. I. X-816 (Manila #2)

HEADQUARTERS
PHILCOM 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- 116, Plot 2,
Row 20, Grave 2455, USMC USMC Ser. [unclear] 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. McNEEMAR
Captain, QMC
Chief, Records Branch

Atch: Form 1044

Received 19 Jan 50 OQMG
Not identifiable from
information presently
available 26 Jan 50
A. C. King 1D. Dr.

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-4858 (Formerly UNK X-816 Manila #2)				2. DATE OF REPORT 21 Dec 1949	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.	4. PLOT 810	5. ROW F	6. GRAVE 1987	7. DATE OF	
				DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT U T D	9. ESTIMATED HEIGHT 5' 8 5/6"	10. COLOR OF HAIR U T D	11. RACE Unknown
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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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT?
---	-----------------

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

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

N O N E

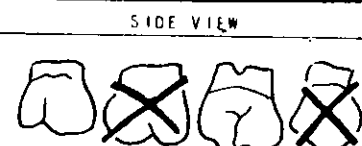
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

N O N E

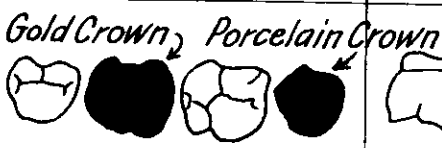
"UNIDENTIFIABLE"

"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:



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



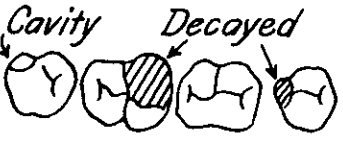
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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



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



Missing See Remarks

RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
UTD	de	P	P	P		S		S	P		P		H	H	Missing
Side Views															
UPPER															
LOWER															
H	H	P	P	P							P	P	P	P	H
0	m													0	f
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

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

REMARKS: Portion of maxilla missing from R7 thru R8 and L8 but only maxillary tooth, R7, is only present on this portion. Crown of L5 broken off.

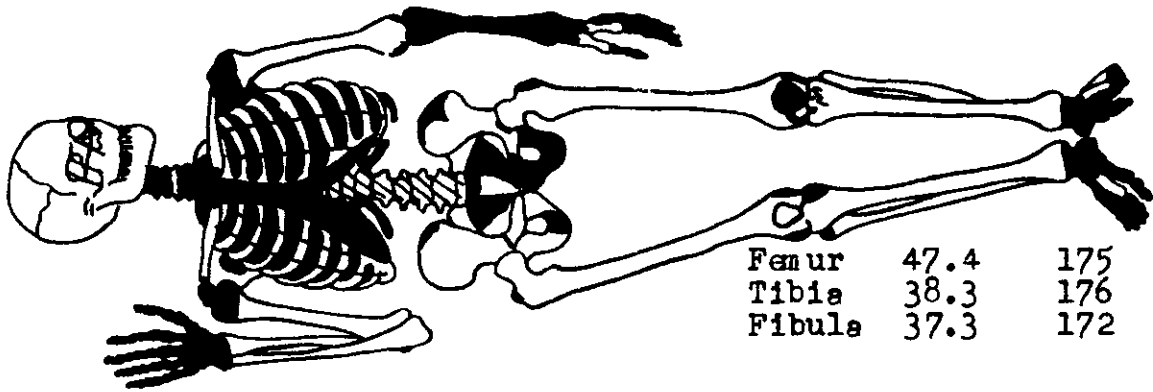
Paul R. Nichols

"UNIDENTIFIABLE"

PAUL R NICHOLS
Chief, Identification Section

BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA

19. BLACK OUT PARTS OF BODY NOT RECOVERED



Femur	47.4	175
Tibia	38.3	176
Fibula	37.3	172

Average height: 174 1/3 or 5' 8 5/6".

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 - 5½ 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 Sec.

SIGNATURE

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN X-4858 (Formerly UNKNOWN X-816, USAF Cometary Manila #2)				2. DATE OF REPORT 12 August 1948	
3. NAME OF CEMETERY AGRS MAUSOLEUM, MANILA, P.I.	4. PLOT 810	5. ROW F	6. GRAVE 1087	7. DATE OF	
				DISINTERMENT 15 Dec. '47	REINTERMENT 12 Aug 48

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT U.T.D.	9. ESTIMATED HEIGHT 5'-8-5/6"	10. COLOR OF HAIR U.T.D.	11. RACE UNKNOWN
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

No Identification tag found.

Embossed tag and two (2) cemetery tag found w/this inscription:-
UNKNOWN X-816
(All three (3) tags placed with remains).

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

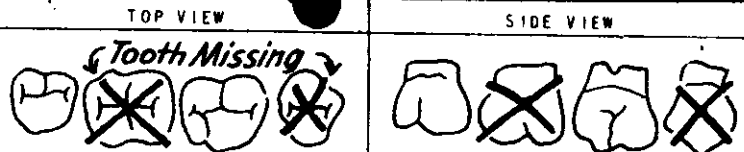
U.T.D.

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)

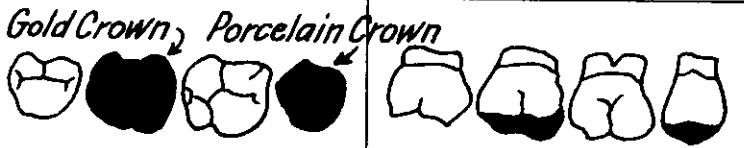
NONE

TOOTH CHART

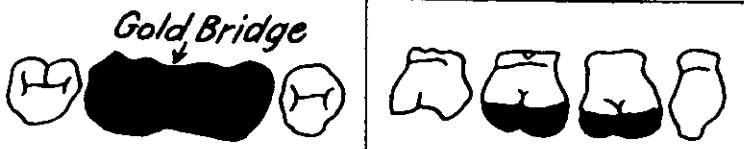
MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED THUS:



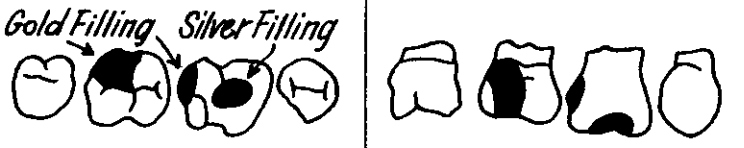
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN). THUS:



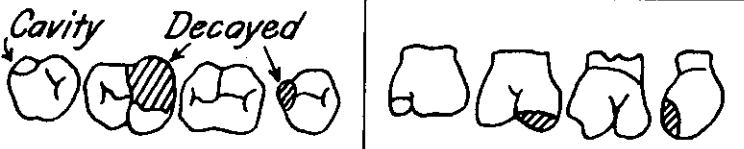
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE). THUS:



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



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



Missing *See female*

RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
UTD	AC dg	TD	TD	TD		S d		S d	TD	TD	TD	TD	TD	MOLO	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							

UPPER

LOWER

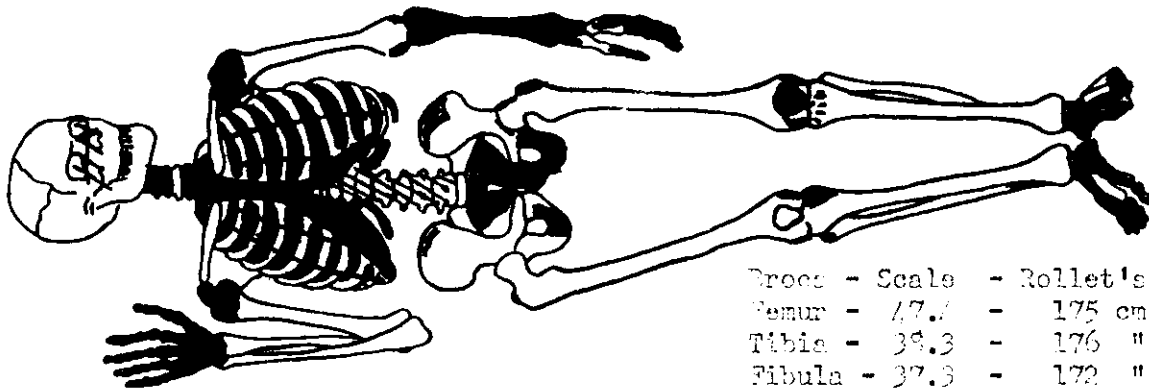
DENTURES (Plates): DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAINING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

REMARKS: Portion of maxilla missing from R7 thru R8 and L8 but only maxillary tooth, R7, is only present on this portion. Crown of L5 broken off.

Vicente R. Quinquini.

/s/ Cpl. Joseph D. Murphy

19. BLACK OUT PARTS OF BODY NOT RECORDED



Procs - Scap - Rollet's - Table
 Femur - 17.1 - 175 cm.
 Tibia - 38.3 - 176 "
 Fibula - 37.9 - 172 "

Av. Ht. of Remains - 171-1/3 or 5' 8-5/8"

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

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

NUMBER

 SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

No I.D. tags, personal effects or burial bottle found with remains.
 Circumference of skull in inches: (21)
 Estimated weight of remains: (5 1/2) lbs.
 These remains were among a group disinterred from Grave No. 717, Row No 1,
 Plot No. 7, from POW Camps I & II, Sabastuan Cemetery, Luzon, P.I.

A TRUE COPY:

Charles F. Keeney
 CHARLES F. KEENEY
 Capt., MC

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
 /s/ Charles F. Keeney - 0-063090
 C.I.P. Laboratory - Manila, P.I.

SIGNATURE
 /s/ Charles F. Keeney

RESTRICTED

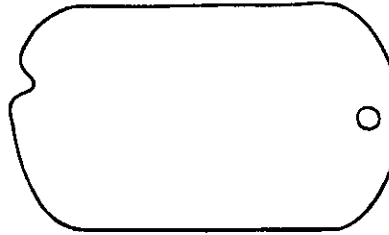
QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

12 Feb 1952

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)		SERIAL No.
UNKNOWN X-816 Manila #2		Unknown
GRADE	ORGANIZATION	BRANCH OF SERVICE
Unknown	Unknown	Unknown
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
Unknown	Unknown	

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

EMERGENCY ADDRESSEE (Name, relationship, and address) *293 Yank Manila #2 X-816*
Unknown

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

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.
11 Feb 1952	--	Casket	Cross	A	12	195

WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE
Yes	US MILITARY CEMETERY, FT WM MCKINLEY, P.I.

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
		<i>FILE</i> <i>Name Inc [unclear]</i> <i>Action NAT</i> <i>18 MAR 52</i>
IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)	
Yes	Yes	

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

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

SIGNATURE OF PERSON PREPARING REPORT <i>Roger L. Dion</i> ROGER L. DION, Sgt., RA	SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>Charles R. Haylen</i> CHARLES R. HAYLEN, 1st Lt., QMC
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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

CAH To ADAC 16-43097-1

Section 3.—UNIDENTIFIED REMAINS.

INSTRUCTIONS:


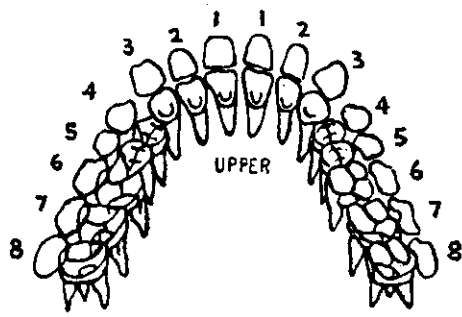




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

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

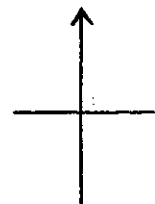
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
--------	--------	---------------	---------------	-------------------------------

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

OTHER IDENTIFICATION CLUES

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

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



REMARKS:

Grave 195, Row 12, Plot A, was formerly occupied by UNKNOWN X-2063 Manila #2, disinterred and shipped to ZI as part of a Group Burial (Cabanatuan Project).

RESTRICTED

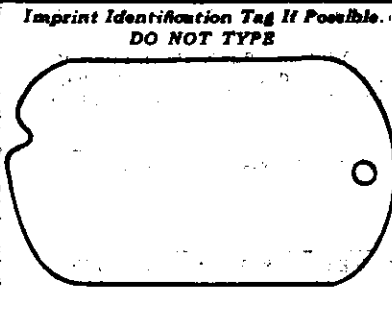
WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

7 Sept 48

STORAGE



Section 1.—IDENTIFICATION

NAME (Last, first, middle initial) UNKNOWN X-4858 (Formerly UNK X-816 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 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) 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:
A. B. McNEEMAR
A. B. McNEEMAR
Capt., QMC

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 12 Aug 48	HOUR 1100	BURIED IN (Shroud, blanket, or name of other) STORRED Casket	TYPE OF GRAVE MARKER None	PLOT No. 810	ROW No. BAY F	GRAVE No. CRYPT 1987
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WAS THIS A REBURIAL? (Yes or no) RESTORED 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. 20	GRAVE No. 2485
--	---	---------------	---------------	-------------------

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
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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) STORED UNKNOWN X-4833	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 1989
--	------	------------	--------------	----------------------------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED GLEATON, Minrod	RANK Pvt	SERIAL No. 34415095	ORGANIZATION Btry D 466 AAA AW Bn	GRAVE No. 1985
--	-------------	------------------------	---	-------------------

SIGNATURE OF PERSON PREPARING REPORT /t/ J. J. McDERMOTT, Adm. Asst.	SIGNATURE OF GRS OFFICER VERIFYING REPORT /s/t/ ANDREW S. ROBSON, Capt., 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:


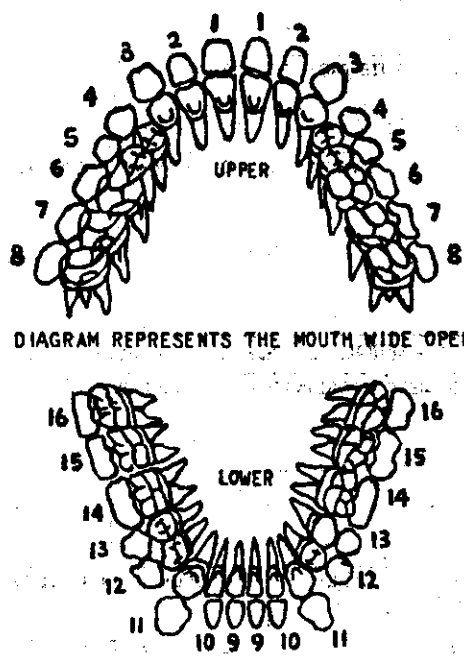




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

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

FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY.
REMARKS: UNKNOWN X-4858, AGRS Mausoleum, Manila, P.I., formerly UNK X-816, USAF Cemetery Manila #2, Luzon, P.I., could be anyone of the following listed burials in the Cabanatuan roster:

YORK, George Sr.	Civilian	
Cpl BUARK, John W.	278681	USMC
Cpl COLLINS, Frederick G.	6578818	QMC
Cpl SIMMONS, George G.	19019886	60
Pfc LOBELI, Lloyd J.	20645267	192 Tank

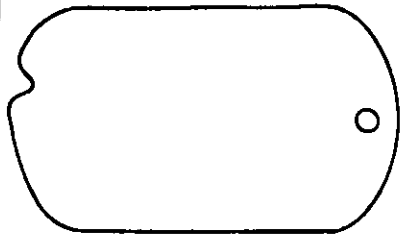


REMARKS:

Pvt WARD, Charles M.	19029058	MD
Pvt KOVACH, John	20500764	
Pvt KELDER, Arthur H.	36016623	MD
Pvt KIRSCHI, Harold S.	19038407	
Pvt OVERBY, Evans E.	13035026	19 Bomb

QMC Form 1044, 1044a and 1044b accomplished.

RESTRICTED

U-1742

WD QMS FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)			DATE OF REPORT 7 Feb 46	
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.				
		NAME (Last, first, middle initial) UNKNOWN X-816 (COLLINS, Fredrick G) (Formerly UNKNOWN C-276 Cabana tuan Cemetery)			SERIAL NO. 6578818	
		GRADE Cpl		ORGANIZATION QMC	BRANCH OF SERVICE Army	
		RACE		RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	
PLACE OF DEATH POW Camp Cabanatuan, Luzon, P I		CAUSE OF DEATH Hwz DYSentery			DATE OF DEATH Hwz 19 Nov 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 fourteen (14) bodies found in common grave, thirteen (13) bodies of which were unidentified:-				
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (2)		-(See Sec 3 reverse side)-				
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME Jul 934 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 12 Jan 46	HOUR 0900	BURIED IN (Shroud, blanket, or name of other) Shelter Half	TYPE OF GRAVE MARKER Cross	PLOT No. 2	ROW No. 20	GRAVE No. 2485
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 Cabanatuan Cemetery, Luzon, P I 45.7-70.9 1/50,000			PLOT No. 7	ROW No. 0	GRAVE No. 717
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-815 (SIMMONS, George G) (Formerly UNKNOWN C-275 Cabanatuan Cemetery)			RANK Cpl	SERIAL NO. 19019886	ORGANIZATION 60 CAC	GRAVE No. 2484
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) BAIN, Daniel C			RANK Pfc	SERIAL NO. 33035131	ORGANIZATION AUS	GRAVE No. 2486
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

Section 3. IDENTIFIED REMAINS.

INSTRUCTIONS:

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

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

6 MAR 1946

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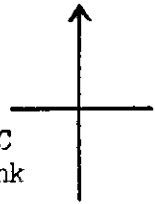
WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
-----------------------	---------------	--------------------------------

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

York, George Sr.	Civilian
Sgt Hanscom, Lawrence K.	6137280 31 Inf
Cpl Ruark, John W.	278681 USMC
Cpl Collins, Fredrick G.	6578818 QMC
Cpl Simmons, George G.	19019886 60 CAC
Pfc Gutierrez, Juan E.	20943125 200 CAC
Pfc Iobdell, Lloyd J.	20645267 192 Tank
Pfc Nichols, Harvey A.	7009171



REMARKS:

Pvt Waid, Charles M.	19049058	MD
Pvt Kelder, Arthur H.	36016623	MD
Pvt Kovach, John	20500764	
Pvt Kirschi, Harold S.	19038407	
Pvt Overby, Evans E.	13035026	19 Bomb

These bodies were buried in this grave but individual identification is impossible.

RESTRICTED

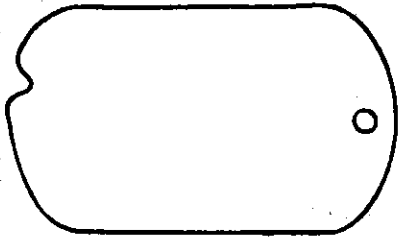
WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

7 Feb 46

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)
UNKNOWN X-816 (COLLINS, Fredrick G)
(Formerly UNKNOWN C-276 Cabanatuan Cemetery)

SERIAL No.
6573818

GRADE
Cpl

ORGANIZATION
QMC

BRANCH OF SERVICE
Army

RACE

RELIGION

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

PLACE OF DEATH
POW Camp Cabanatuan,
Luzon, P I

CAUSE OF DEATH
DYS
Dysentery

DATE OF DEATH
19 Nov 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 fourteen (14) bodies found in common
grave, thirteen (13) bodies of which were unidentified:-

WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)

Yes (2)

-(See Sec 3 reverse side)-

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

None

A TRUE COPY:

[Signature]
H. B. McNEEMAR
Capt., QM

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.
12 Jan 46	0900	Shelter Half	Cross	2	20	2485

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 Cabanatuan Cemetery, Luzon, P I
45.7-70.9 1/50,000

PLOT No.	ROW No.	GRAVE No.
7	0	717

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-815 (SIMMONS, George G)
(Formerly UNKNOWN C-275 Cabanatuan Cemetery)

RANK

Cpl

SERIAL No.

19019886

ORGANIZATION

60 CAG

GRAVE No.

2484

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

BAIN, Daniel C

RANK

Pfc

SERIAL No.

33035131

ORGANIZATION

AUS

GRAVE No.

2486

SIGNATURE OF PERSON PREPARING REPORT

/s/t/ R. C. BARRITT, S/Sgt., GRS.

SIGNATURE OF GRS OFFICER VERIFYING REPORT

/s/t/ E. M. MOORE, 1st Lt., QMC.

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

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