

AIRMAIL

293 unknown P.I. (Maus Manila) X-1583

QICMT 293
Unknown X-1583
AGRS Maus, Manila, P.I.

5 July 1950

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 Unknown X-1583, AGRS Mausoleum, Manila, P.I., formerly X-77, Finschhafen #2, Unit 2, Page 27.

2. Subject case has been reviewed and this Office approves the classification of the above Unknown as Unidentifiable.

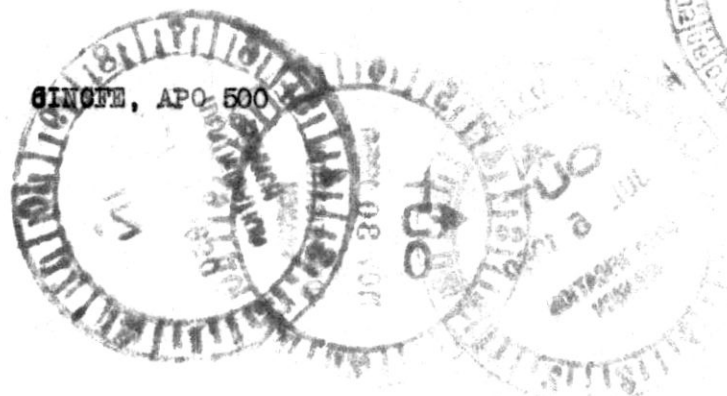
FOR THE QUARTERMASTER GENERAL:

ROBERT G. LAY
CAPT GIC
Memorial Division

cc: Adm Section

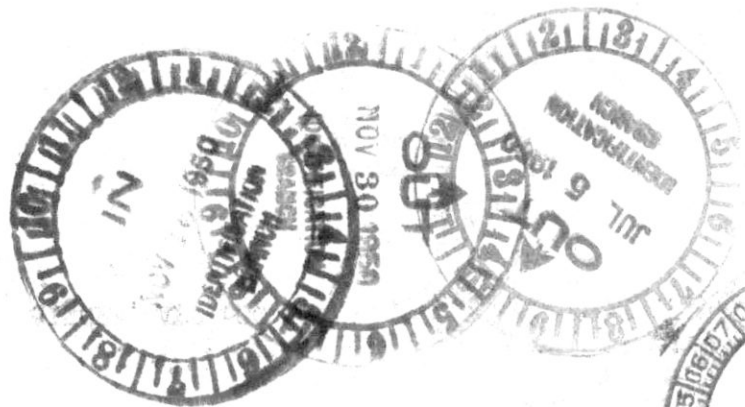
me
cs
Eustace: dal
C. Salser

Copy furnished: SINGAPORE, APO 500



JW
JMN

AIRMAIL



/drs

Interred 20 June 1950
N 16 194 Ft. McKinley

PREPARED BY PHILCOM

DISINTERMENT DIRECTIVE

CARL R. H. MARK

Cemetery Superintendent

DIRECTIVE NUMBER

DATE

SECTION A

NAME AND BURIAL LOCATION OF DECEASED

6911 81726

19 06 50

DAY MONTH YEAR

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
UNKNOWN X-77					

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS
USAF CEMETERY FINSCHAFFEN NO. 2, N. G.			2418	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-77				9 June 50
IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY	
<input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> 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-1583 Mausoleum	

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

REMAINS PREPARED AND PLACED IN CASKET	
DATE 9 June 50	BY PAUL R NICHOLS
CASKET SEALED BY	EMBALMER (Signature)
PAUL R NICHOLS	s/ Paul R Nichols
CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
DATE 9 June 50 BY ALBERT C EVATT, Sgt, RA	RAYMOND H TANGUAY, Sgt lc, RA

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

s/ Raymond H Tanguay, Sgt lc, RA
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS
(Plot N, Row 16, Grave 194 was formerly occupied by Unknown X-741, Leyte, DD # 7740 81038 which was disinterred, reprocessed by an Anthropologist and consolidated.)

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 <i>C. R. H. Mark</i>	20 JUN 1950

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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

DISINTERMENT-DIRECTIVE

3

SECTION A - NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER		DATE		
UNKNOWN R - 77		6911 FEB 81726		19 05 50		

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
UNKNOWN	1				
CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS	
USAT CAMPBELL BY DISPATCH NO. 2, D. G.	2		2418	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. W. McKinley, P. I.	(BY ADMINISTRATIVE DECISION)

SECTION C - DISINTERMENT AND IDENTIFICATION			
NAME	SERIAL NUMBER	GRADE	DATE OF DEATH
IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY
<input type="checkbox"/> REMAINS			
<input type="checkbox"/> MARKER			

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT	
NATURE OF BURIAL	CONDITION OF REMAINS
OTHER MEANS OF IDENTIFICATION	

MINOR DISCREPANCIES (Prepare Discrepancy Report OMC Form 1194a for major discrepancies.)	
SIGNATURE OF SHIPPER	SIGNATURE OF RECEIVER
REMAINS PREPARED AND PLACED IN CASKET	
DATE	BY

CASKET SEALED 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 SHIPPER	SIGNATURE OF AGRS-INSPECTOR
REMARKS AND SPECIAL INSTRUCTIONS	NAME OF CONSIGNEE

RECORD OF CREATING ARTICLES

Handwritten notes: 7/16/78, All per [unclear], [unclear]

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

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

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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

RECEIVED BY _____

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE

GRPZ 293

AFO 928

16 JUN 1950

SUBJECT: Unidentifiable Remains

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

1. In accordance with the provisions of your letter, file QMGMU 293, GRS (Far East), dated 17 September 1948, subject: Resolution of Cases of Unidentified Deceased, the remains of UNKNOWN X-1583 AGRS Mausoleum, Manila, P.I., have been processed by the Central Identification Laboratory and considered "Unidentifiable" by reason of lack of sufficient identifying data.

2. Forwarded herewith, for your consideration, is the new QMC Form 1044 for the above-mentioned Unknown.

FOR THE COMMANDING OFFICER:

1 Incl
QMC Forms 1044 w/Certificate
of Unidentifiability

not Rec'd
7/5/50

Charles R. Whaylen
CHARLES R. WHAYLEN
2d Lt., QMC
Assistant Adjutant

30 June 50
W. E. Stacey
Identification Section

293 Corp P.I. (Manila Mausoleum) (Y-1583)

RECEIVED
JUN 27 1950
COMM
M & M

16 JUN 1950
1525

OUT
JUN 30 1950
IDENTIFICATION
CENTER

IDENTIFICATION
BRANCH
JUN 28 1950

293 - Unk - P.I. (Misc) (Maus. Manila) (X-4968, X-4971, X-4951, X-5017, X-1583)

QMGMT 293
GRS Far East

26 October 1949

SUBJECT: Identification of World War II Deceased

TO: Commanding General
Philippine Command
APO 707, c/o Postmaster
ATTN: AGRS, PHILCOM ZONE

1. Reference letter your Headquarters, dated 26 September 1949, file GS GR 293.9, Subject; Assignment of CIL Numbers.

2. It is requested that the CIL designation of the following Unknowns be cancelled and the remains revert back to the original Unknown Numbers, in accordance with letter this headquarters dated 26 July 1949, file QM GMP 293, Subject; Disinterment Discrepancies:

X-4968	AGRS Mausoleum, Manila, Hanger 810, Bay E, Crypt 1388
X-4971	" " " " 810, " F, " 1684
X-4951	" " " " 811, " 21-A, " F-33
X-5017	" " " " 803 " 27-A, " F-34
X-1583	" " " " 810, " B, " 459

FOR THE QUARTERMASTER GENERAL:

T. H. METZ
Lt. Colonel, QMC
Memorial Division

Copy

eb

X 293 Unk. P.I. X-1583 (Maus Manila)

OSGR 293.9

APO 707
26 SEP 1949

SUBJECT: Assignment of CIL Numbers.

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

1. In accordance with the provisions of your letter, file QMGP 293, dated 2 April 1949, Subject: Disinterment Discrepancies, the following Unknowns, presently stored at AGRS Mausoleum, Manila, P.I., have been assigned CIL numbers as indicated below:

a. Unknown X-4968, AGRS Mausoleum, Manila, P.I., assigned CIL #450.

b. Unknown X-4971, AGRS Mausoleum, Manila, P.I., assigned CIL #454.

c. Unknown X-4951, AGRS Mausoleum, Manila, P.I., assigned CIL #455.

d. Unknown X-5017, AGRS Mausoleum, Manila, P.I. assigned CIL #456.

e. Unknown X-1583 (Formerly Unk X-77, Finschhafen #2) assigned CIL #457.

2. It is requested that all pertinent records, your office, be amended to indicate that the above-mentioned Unknowns have been assigned CIL numbers.

FOR THE COMMANDING GENERAL:

JOHN M. WESTON JR
1st Lt AGD
Asst Adj. Gen

/rgb //

War-IRR

1

DISINTERMENT DIRECTIVE

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
6911 00256

DATE
15 01 48
DAY MONTH YEAR

NAME
UNKNOWN X-000077

SERIAL NUMBER
UNKNOWN X-000077

ARM
0

CEMETERY
BRITISH GUINEA USAF FINSCHAFFEN NO 20

DATE OF DEATH
7701 80
DAY MONTH YEAR

PLOT
2418

ROW
NEW GUINEA

DISPOSITION OF REMAINS
7701 80

SECTION B — CONSIGNEE AND NEXT OF KIN
NAME AND ADDRESS OF CONSIGNEE
**MANILA, PHILIPPINE ISLANDS
(BY ADMINISTRATIVE ORDER)**

NAME AND ADDRESS OF NEXT OF KIN
[Handwritten signature]

SECTION C — DISINTERMENT AND IDENTIFICATION
NAME
**UNK X-77
UNK X-1583 (Maus)**

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISTINTERRED
1 Oct 1948

IDENTIFICATION TAG ON
 REMAINS
 MARKER

ORGANIZATION
UNKNOWN

RELIGION

IDENTIFICATION VERIFIED BY
**ROBERT F. STEVENSON
Embalmer** NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT
NATURE OF BURIAL
Shelter Half

CONDITION OF REMAINS
Skeletal

OTHER MEANS OF IDENTIFICATION
Grave 2418

*CIL # 457
Auth - B/Shop 16 Aug 49*

MINOR DISCREPANCIES
Two (2) Tags - UNK X-1583 (Maus)

[Handwritten notes]

REMAINS PREPARED AND PLACED IN CASKET
DATE
1 Oct 1948

BY
ROBERT F. STEVENSON

CASKET SEALED BY
ROBERT F. STEVENSON

EMBALMER (Signature)
[Signature]
ROBERT F. STEVENSON

CASKET BOXED AND MARKED
DATE
1 Oct 1948

SHIPPING ADDRESS VERIFIED
HONORIO V. AURELIO, 1st Lt., Inf

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

[Signature]
HONORIO V. AURELIO, 1st Lt., INF.
SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM AGRS Mausoleum		TO Fort McKinley 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 (BY ADMINISTRATIVE ORDER)		TO	
KIND OF CONVEYANCE NAVIGA PHILIPPINE ISLANDS		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

(SHIPPED) 00000

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

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE

APO 928 928

14 June 1950

(Date)

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 77, Plot _____,
Row _____, Grave 2418, USMC USAF Cem. Finsch #2, have
been reviewed and it is the opinion of this office that insufficient
evidence is available to establish the identity of this decedent,
and that these remains should be classified as unidentifiable.

FOR THE COMMANDING OFFICER:

Incl:
Form 1044

H. B. McNEAR
H. B. MCNEAR
Captain, QMC
Chief, Records Branch

Received JUN 27 1950
Not identifiable from
information presently
available

..... OQMG
W. Eustace
Ident

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN		2. DATE OF REPORT			
UNK. X-1583 Mslm. (Formerly X-77 Finsch. #2)		9 June 1950			
3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
				DISINTERMENT	REINTERMENT
AGRS Mausoleum Manila P. I.					

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR OF HAIR	11. RACE
U. T. D.	5'11 3/8"	U. T. D.	☉ U. T. D.

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

None

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

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

None

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

None

18.

TOOTH CHART

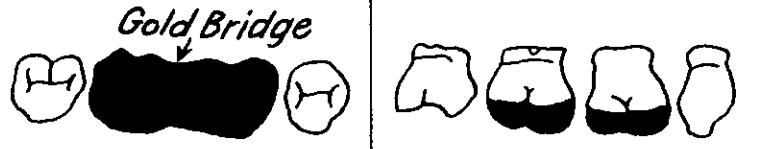
MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" 'D OUT AND LABELED THUS:



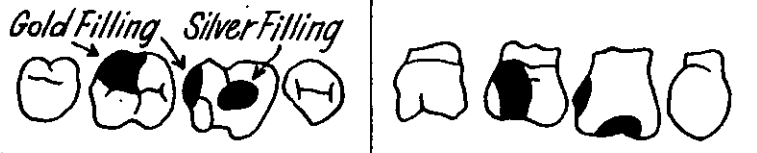
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:



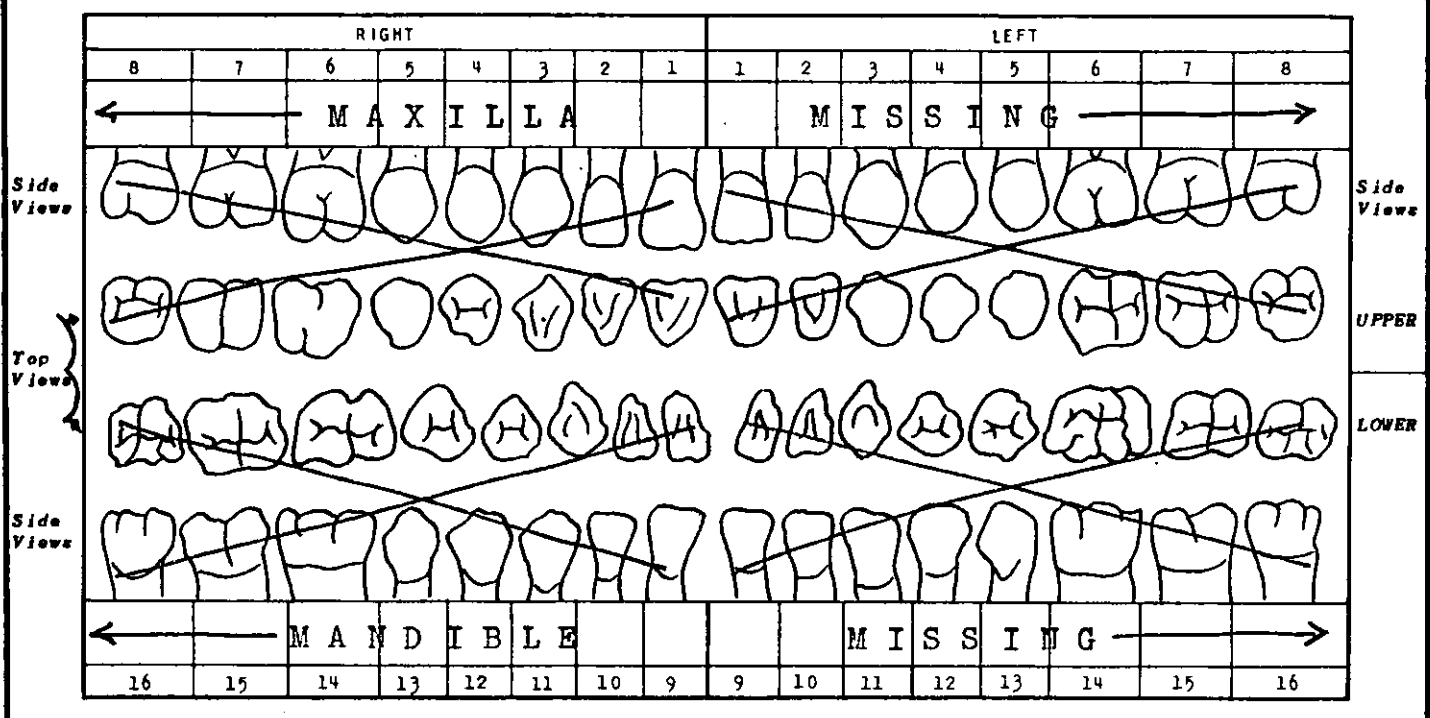
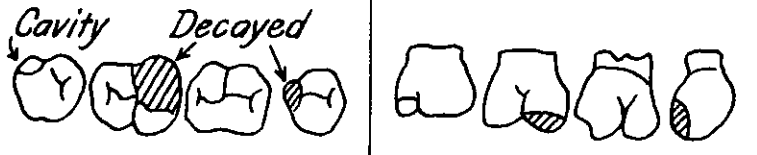
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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



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



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 teeth present with remains.

Paul R Nichols
 PAUL R NICHOLS
 Chief Ident. Section

19. BLACK OUT PARTS OF BODY NOT RECOVERED



Fibula 39.2 - 182
 tibia 39.3 - 181
 2/363
 181 1/2 or
 5'11 3/8"

Estimated height 5'11 3/8"

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 ROI, identification tags or personal effects found with remains.

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 Ident. Section

SIGNATURE

Paul R Nichols

IDENTIFICATION CHECK LIST

(To be completely filled out and attached to each copy
 of Report of Interment WD QMC Form 1042)

(Formerly Unk X-77
 USAF Cem Finsch #2,

Unknown X -1583 N.G.)

Cemetery AGRS MAUSOLEUM Manila, P.I.

Plot 810 HANGER Row B BAY GRAVE Grave 459

AGRS MAUSOLEUM, Manila, P.I. 10 Nov 47

1. Arrived at ~~AGRS~~ _____
 (Hour) (Date)
2. Place of death Killerton Tract, N.G.
 (Name of closest town) (Coordinates and letter Prefix, maps)
- _____ (Sheet, scale and serials used)
3. Remains recovered or disinterred by AGRS CMT # 2
 (Name and organization)
4. Evacuated to Cemetery by _____
 (Name and organization)
5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

Item	Clothing Markings (Type)	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear	///		
Raincoat	///		
Overcoat	///		
Jacket, Field	///		
Jacket, Combat	///		
Mackinaw	NON		
Sweater	NE		
Jacket, HBT	///		
* Shirt, Wool OD	///		
Undershirt, Wool	///		
Undershirt, Cotton	///		
Trousers, HBT	///		
* Trousers, Wool OD	///		

Belt, web _____

Drawers, wool _____

Drawers, cotton _____

Leggings, wool _____

Socks, cotton _____

* Shoes _____ (type) **N O W E**

Overshoes _____

Web Equipment _____ (type)

(Other item) _____

(Other item) _____

* If body is nude, sizes of these items should be computed by measuring the remains

Chevrons or Insignia _____ (Type & location; shirt, jacket, coat, helmet)

Shoulder Patch _____

Does clothing indicate that deceased was a member of the Air, Ground or Naval Force?

6. Description of Remains: **Remains are Skeleton only (Chart attached)**

Age **UTD** Height **UTD** **Estimation of Tibia gives height of about 6'6 1/2"** Weight **UTD** Description of wounds **UTD**

Bandages or dressings _____ Scars _____ (Length, width, location)

Tattoos _____ (Number, location — illustrate on separate page)

Outstanding moles, warts or birthmarks _____ (Yes-no; description, location)

Sunburn or tan, other than hand and face _____

Complexion _____ (Light, medium, dark, clear, pimples, pocks, freckles)

Build _____ (Large, fat, thin, muscular)

Hair _____ (Color, length, quantity, curly, **U T D** wavy, straight, whorls, or definite parting)

Hair _____ (Baldness, widows peak, distinctive cutting or other characteristics)

Sideburns _____ Mustache _____ Beard or _____ (Color, setting, shape) (Color, size, shape) (Length, heavy)

Goatee (Light, color, extent)

Eyes (Color, setting, shape) Eyebrows (Color, hushiness, extent across nose)

Nose (Size, shape, straight) Ears (Size, set close to or far from head)

Mouth (Large, medium, small) Lips (Small, large, full)

Teeth **Unobtainable** (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin (Prominent, receding, pointed, dimples, double)

Jaw (Large, small, normal) Circumference of ~~head~~ **skull** in inches **UD** (Hat band)

Neck (Size, length, short, normal, wrinkled) Larynx (Prominent, normal)

Shoulders (Broad, straight, small, rounded) Arms (Length, muscular, color, extent and quantity of hair)

Hands

Fingers (Short, thick, long, slender, size of knuckles, missing fingers or joints)

..... (Unusual characteristics of fingernails)

Chest (Size of nipples, color, quantity and extent of hair, large, small, normal)

Waist (Size of navel, appendectomy, amount, quantity, and color of hair)

Back (Quantity and extent of hair) Circumcision (Yes-no) Pubic Hair (Color)

Hernioplasty (Yes-no; location)

Legs (Inseam, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

Feet (Size, corns, callouses, flat) Toes (Slender, straight, crooked, overlap)

Evidence of healed fractures (Nose, arms, legs, etc.)

NOTE: Use attached charts "A" and "B" to indicate parts not received.

7. Have finger prints been placed on Report of Interment? No (Yes-no)

If not, explain Due to condition of remains.

8. Has tooth chart been prepared? No (Yes-no) If not, explain Tooth chart impossible due to the absence of skull.

9. Remarks No I.D. tags, personal effects, or burial bottle found with remains. Found three (3) pieces of bones only (1) Tibia (2) Fibula (3) Sacrum with remains. No other means of identification found with remains. Estimated weight of remains 1-lb

I certify that I have personally viewed the remains of subject deceased and all resulting information has been recorded to the best of my knowledge.

/s/ Alton E. Jones
(Officer's Name)

SP-6 062812 AGRS
Rank Service

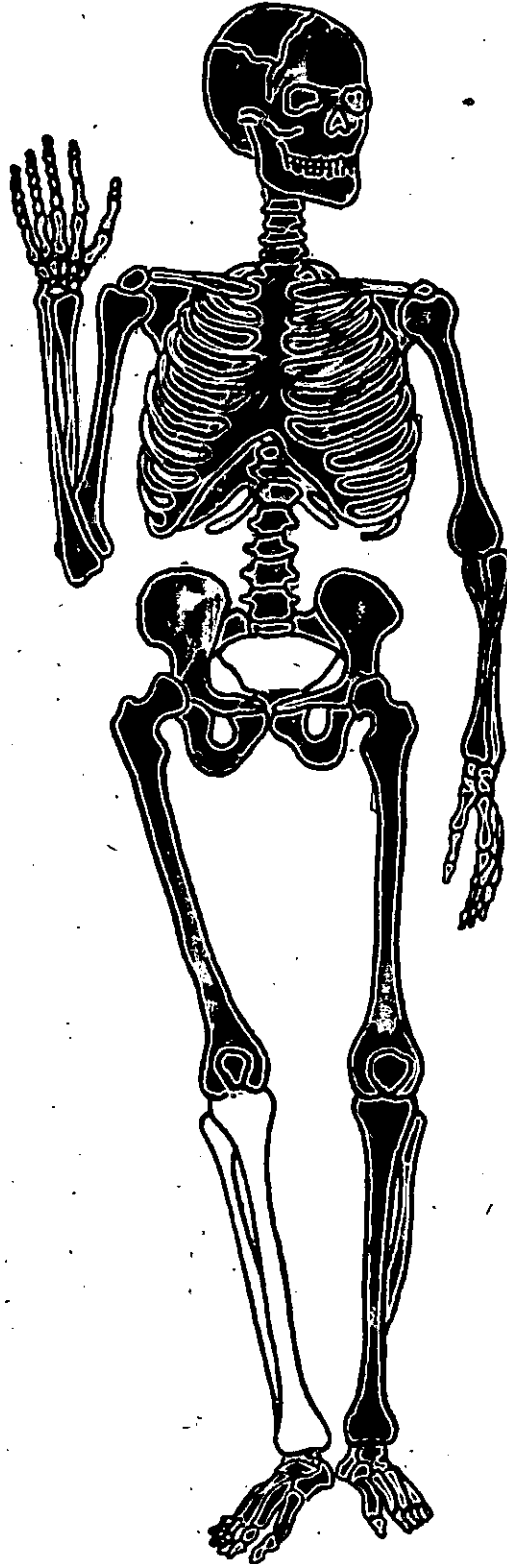
CIP, AGRS MAUSOLEUM Manila, P.I.
(Organization)

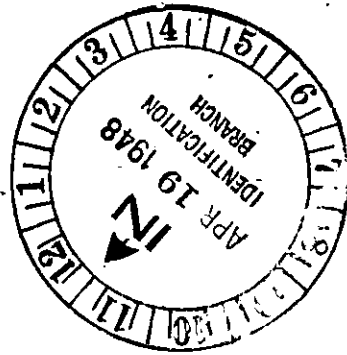
10 Nov 47

CERTIFIED TRUE COPY:
George T. Gamboa
GEORGE T. GAMBOA
2d Lt., MAC

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)






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

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

DATE OF REPORT
15 Nov 47

Imprint Identification Tag If Possible. DO NOT TYPE		Section 1.—IDENTIFICATION.		SERIAL No.	
		NAME (Last, first, middle initial) UNKNOWN X-1583 (Formerly Unk X-77 USAF Cem Finschhafen #2, N.G.)		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 Killerton Tract, N.G.		CAUSE OF DEATH Unknown		DATE OF DEATH Unknown	
EMERGENCY ADDRESSEE (Name, relationship, and address) Unknown					
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)			
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (2)					
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME None					
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.					
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY AGRS MAUSOLEUM, MANILA, P.I.					
DATE OF BURIAL STORAGE 13 Nov 47	HOUR 1000	BURIED IN (Shroud, blanket, or name of other) STORAGE Casket	TYPE OF GRAVE MARKER None	PLOT No. HANGER 810	ROW No. BAY B
GRAVE No. CRYPT 459	WAS THIS A REBURIAL? (Yes or no) RESTORED Yes				
IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cem Finschhafen #2, New Guinea		PLOT No.	ROW No.	GRAVE No. 2418	
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) STORAGE	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes				
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORAGE UNKNOWN X- 1585		RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 461
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORAGE CARLOTTA, Bruno P.		RANK T/Sgt.	SERIAL No. 36232217	ORGANIZATION Co.L, 145th Inf. Regt.	GRAVE No. 457
SIGNATURE OF PERSON PREPARING REPORT Wm R GILBERT, Adm Asst			SIGNATURE OF GRS OFFICER VERIFYING REPORT LUCIO S. PANOPIO, 2d Lt., Inf		
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.					

Section 3. UNIDENTIFIED REMAINS.

INSTRUCTIONS:


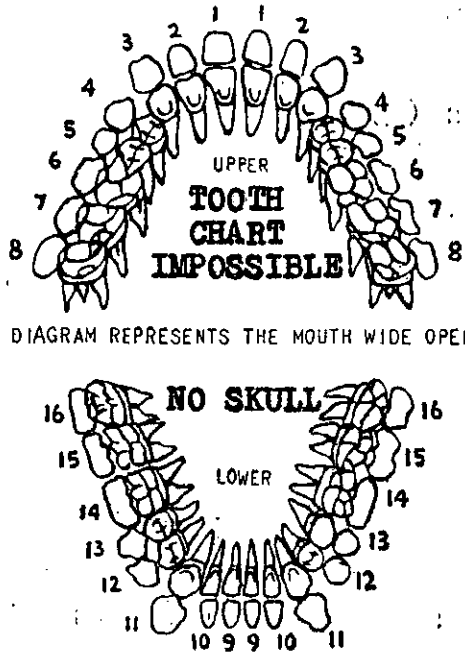




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

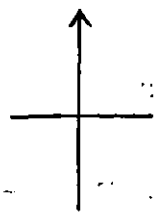
(b) A fingerprint, or prints; are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

<p>FILLINGS</p>  <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER TOOTH CHART IMPOSSIBLE</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p> <p>NO SKULL LOWER</p>
<p>CAVITIES</p>  <p>CAVITY DECAYED</p>	
<p>MISSING TEETH</p>  <p>TOOTH MISSING</p>	
<p>CROWNED TEETH</p>  <p>PORCELAIN CROWN GOLD CROWN</p>	
<p>BRIDGE WORK</p>  <p>GOLD BRIDGE</p>	
<p>FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY</p>	



REMARKS:

Identification Check List accomplished.

6 JAN 1946

RE ~~CONFIDENTIAL~~
REPORT OF INTERMENT RESTRICTED
(TM 10-630 AND AR 30-1815)

1442
1442

UNKNOWN X 77

(Last name) (First) (Initial) (Serial number) (Rank) (Organization)

Killerton Tract, N. G.

(Place of death) (Date of death) (Cause of death)

1000 hrs., 2 April 1945 USAF CEMETERY FINSCHHAFEN #2, N. G.

(Time and date of burial) reburial (Name of Cemetery) (Name of coordinates of location)

Disinterred from grave #89 USAF Cemetery Soputa #1, N. G. X 13

2418

Cross-regulation w/plate

(Grave number) (Row number) (Plot number) (Type of marker—Regulation V-shaped or other)

Disposition of identification tags: Buried with body Yes No Attached to marker Yes No

(If no identification tags, what means of identification are buried with the body?)

Religion

(If no identification tags, but identity definitely established, give particulars)

Body buried on RIGHT CHERNEY, Carl J.

(Name)

20 649 177

(Serial number)

(Rank)

Co L 128 Inf 2419

(Organization)

(Grave number)

Body buried on LEFT

UNKNOWN X 76

(Name)

(Serial number)

(Rank)

(Organization)

(Grave number)

2417

610 (Name and address of EMERGENCY ADDRESSEE)

(Name and address of LEGAL NEXT OF KIN)

List only personal effects FOUND ON BODY and disposition of same

RESTRICTED

IF DECEASED UNIDENTIFIED

TAKE FINGERPRINTS OF BOTH HANDS (W. D. Cir. No. 79; 3/19/43).
If unable to obtain a complete set of fingerprints, TAKE THOSE YOU
CAN, and fill in as many of the following as you are able:

Height:	Apparent Nationality:
Weight:	Laundry marks:
Colour of eyes:	Number of rifle:
Colour of hair:	Wear glasses?
Race:	Is Tooth chart attached?

(If possible, have medical personnel take a tooth chart)

In space below, locate and describe any scars, birthmarks, moles, deformities, etc.:

Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc.:

IF THIS IS AN ISOLATED BURIAL, ATTACH A SKETCH OF THE
LOCATION, ORIENTED WITH PERMANENT LANDMARKS.

George A Ross, M/Sgt QMC-GRS
(Signature of officer or other person reporting burial)

CHARLES R. MYERS, 1st Lt QMC
(Verified by Army GRS Officer)

LEFT HAND

4

3

2

1

THUMB

4

3

2

1

THUMB

RECEIVED
3 MAY 1951
AV

RIGHT HAND

REPORT OF INTERMENT

(TM 10-630 AND AR 30-1815)

NOV 30 1943 1442
CONFIDENTIAL

UNKNOWN X 15 Soputa No. 1 Unknown
(Last name) (First) (Initial) (Serial number) (Rank) (Organization)

Killerton Tract, New Guinea
(Place of death) (Date of death) (Cause of death)

April 7, 1943 3:00 p.m. U.S.T.C. No. 1 Soputa, N.G.
(Time and date of burial) (Name of cemetery) (Name or coordinates of location)

89 7 Temp. Cross
(Grave number) (Row number) (Plot number) (Type of marker—Regulation V-shaped or other)

Disposition of identification tags: Buried with body Yes No Attached to marker Yes No

(If no identification tags, what means of identification are buried with the body?)

(If no identification tags, but identity definitely established, give particulars)

Body buried on RIGHT Unidentified American Soldier 90
(Name) (Serial number) (Rank) (Organization) (Grave number)

Body buried on LEFT Unidentified American Soldier 88
(Name) (Serial number) (Rank) (Organization) (Grave number)

(Name and address of EMERGENCY ADDRESSEE)

(Name and address of LEGAL NEXT OF KIN)

List only personal effects FOUND ON BODY and disposition of same:

CONFIDENTIAL

IF DECEASED UNIDENTIFIED

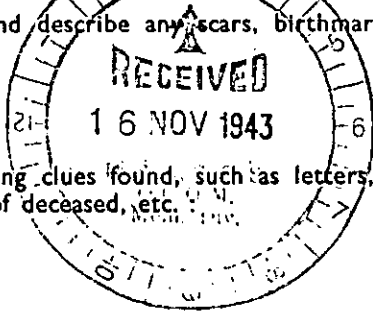
TAKE FINGERPRINTS OF BOTH HANDS (W. D. Cir. No. 79 : 3/19/43). If unable to obtain a complete set of fingerprints, TAKE THOSE YOU CAN, and fill in as many of the following as you are able :

Height : Apparent nationality :
Weight : Laundry marks :
Color of eyes : Number of rifle :
Color of hair : Wear glasses ?

Race : Is tooth chart attached ?

(If possible, have medical personnel take a tooth chart)

In space below, locate and describe any scars, birthmarks, moles deformities, etc.



Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc.

IF THIS IS AN ISOLATED BURIAL, ATTACH A SKETCH OF THE LOCATION, ORIENTED WITH PERMANENT LANDMARKS.

S/Sgt. Winsor, G.R.S.

(Signature of officer or other person reporting burial)

STEWART W. ABET

1st Lt. (Verified by Army GRS Center)

48th QM. Co. GRS

LEFT HAND

4

3

2

1

THUMB

4

3

2

1

THUMB

RIGHT HAND

REPORT OF INTERMENT

(To be submitted through channels to the Quartermaster General, Washington, D.C.)

(Par. 21d - TM 10-630)

UNIDENTIFIED AMERICAN SOLDIER

(Last Name)

(First)

(Initial)

(Serial No.)

(Rank)

(Organization)

293
Killerton Tract, New Guinea

(Place of Death)

(Unknown)
(Date of Death)

(Cause of Death)

April 7, 1943 3:00 P.M.

(Time and Date of Burial)

U.S.T.C. #1 Soputa, N.G.

(Place of Burial - Name and No. of Cemetery, if in a cemetery)

89

7

(Grave No.)

(Row No.)

Temp. cross

(Plot No.)

(Kind Grave Marker)

Buried with body

Attached to marker

(Identification Tags)

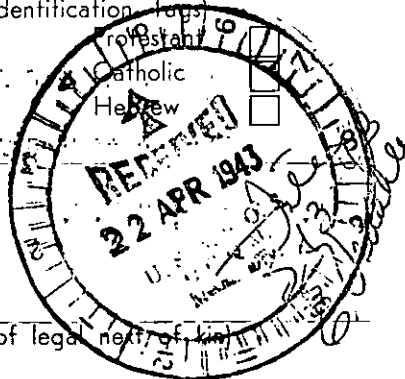
Protestant
Catholic
Hebrew

Other pertinent data to enable grave to be located.

(Where necessary sketch to locate grave should be furnished)

(Name and address of Emergency Addressee)

(Name and address of legal next of kin)



Fingerprints (right hand) if right hand missing furnish prints of left hand.

(Required with positive identity cannot otherwise be established) (Par. 25e (2)
TM 10-630)

Place X mark
below when
prints are of
left hand



Thumb	1	2	3	4
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List of personal effects and disposition of same

(Name, rank, serial number, organization, grave numbers of bodies buried on either side:)

On Right— Unidentified American Soldier

Grave # 90

On Left— Unidentified American Soldier

Grave # 88

S/Sgt. Winsor, G.R.S.

Signature of Officer or other person reporting Burial.

Verified by Army G.R.S. Officer

Stewart W. Abel
STEWART W. ABEL

1st. Lt.

48th QM. Co. GRS.

Prepare in triplicate—1 copy to Army G.R.S. Officer—1 copy to Chief, G.R.S.—Original to the Q.M.G.