

FILE IDENTIFICATION TOPPER

FILE NUMBER

SUBJECT

293 rank Letter #1 - C I L #250

Formerly Letter #1 - X397

Also Inscribed Manus. X3267

HEADQUARTERS  
PHILIPPINES COMMAND  
UNITED STATES ARMY

GSGR 293

APO 707

SUBJECT: Assignment of CIL Numbers

31 Mar 1949

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 QMGNT 293, dated 2 April 1948, 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-1068 (formerly Unknown X-3837, USAF Cemetery Manila #2), assigned CIL #248.

b. Unknown X-3267 (formerly Unknown X-397, USAF Cemetery Leyte #1), assigned CIL #250.

c. Unknown X-3330 (formerly Unknown X-169, USAF Cemetery Leyte #1), assigned CIL #251.

d. Unknown X-3615-C, AGRS Mausoleum Manila, P.I. assigned CIL #252.

e. Unknown X\*4608-C AGRS Mausoleum, Manila, P.I., assigned CIL #253.

f. Unknown X-4815-B, AGRS Mausoleum, Manila, P.I. assigned CIL #255.

g. Unknown X-4610\*B, AGRS Mausoleum, Manila, P.I. assigned CIL #254.

h. Unknown X-4811-B, AGRS Mausoleum, Manila, P.I. assigned CIL #256.

*File  
P. Glavin  
24 Aug. 50  
Sullivan*

i. Unknown X-3615-B, AGRS Mausoleum, Mankla, P.I.,  
assigned OIL #257.

j. Unknown X-3701 (formerly Unknown X-58, USAF Cemetery  
Leyte #1), assigned #258.

k. Unknown X-4818-B, AGRS Mausoleum, Manila, P.I.,  
assigned OIL #259.

l. Unknown X-2996 (formerly Unknown X-99, USAF Cemetery  
Sta. Barbara No. 1), assigned OIL #261.

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

FOR THE COMMANDING GENERAL:

FRANK O CALOHAN JR.  
CWO USA  
Asst Adj General

293 - Unk. P. I. (Misc.) (Leyte #1) (X-392 thru X-405 )

QUART 293 1st Incl.  
Unknowns X-392 thru X-405  
Leyte #1, P. I.  
SUBJECT: Identification of Unknowns

Department of the Army, OCMG, Washington 25, D. C.

4 February 1949

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

1. Reference is made to basic communication and to Board Proceedings returned herewith.
2. The individual identifications recommended by your Board of Review have been disapproved by this Office. The decision was based on the facts that dental chart comparisons are inconclusive and the remains fragmentary. It is believed that this case should be resolved as a group identification of the fourteen men involved.
3. It is requested that the case be presented to a Zone Board of Review, and their findings forwarded to this Office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

12 Incls:  
n/c

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

C O P Y:  
m/s

X 293 Unk P. I. X-392  
(Leyte #1)

# DISINTERMENT DIRECTIVE

# 1

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER  
7740 00378

DATE  
15 05 48  
DAY MONTH YEAR

NAME  
UNKNOWN

SERIAL NUMBER  
X-000397

RANK

ARM  
0  
DATE OF DEATH  
DAY MONTH YEAR

CEMETERY  
USAF CEMETERY LEYTE NO 1

DISPOSITION OF REMAINS  
0 7701 80  
CODE DIST. PT.

PLOT ROW GRAVE COUNTRY  
7316 PHILIPPINE ISLANDS

CAUSE OF DEATH  
6

### SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE  
FORT MC KINLEY CEMETERY  
MANILA, PHILIPPINE ISLANDS  
(BY ADMINISTRATIVE ORDER)

NAME AND ADDRESS OF NEXT OF KIN

### SECTION C - DISINTERMENT AND IDENTIFICATION

NAME  
UNK X-397  
(Maus No.) UNK X-3267

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISINTERRED  
27 Sept 48

IDENTIFICATION TAG ON  
 REMAINS  
 MARKER

ORGANIZATION  
UNKNOWN

RELIGION

IDENTIFICATION VERIFIED BY  
PERRY E. WHITE  
Embalmer  
NAME AND TITLE

### SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL  
Shelter Half

CONDITION OF REMAINS  
25 skeletal 49

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES 1  
2 Identification tags read Maus UNK X-3267

REMAINS PREPARED AND PLACED IN CASKET  
DATE 27 Sept 48 BY PERRY E. WHITE

CASKET SEALED BY  
PERRY E. WHITE

EMBALMER Signature  
PERRY E. WHITE

CASKET BOXED AND MARKED  
DATE 27 Sept 48 BY HORACE L. ALLISON  
Sgt., Inf

SHIPPING ADDRESS VERIFIED BY  
TEOFILO M. AMUTAN, 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.

TEOFILO M. AMUTAN, 1st Lt., Inf  
SIGNATURE OF GRS INSPECTOR

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

## RECORD OF CUSTODIAL TRANSFER

### 1. SHIPPED

FROM <b>AGRS Mausoleum</b>		TO <b>Fort McKinley Military Cemetery</b>	
KIND OF CONVEYANCE <b>Truck</b>		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 <b>ARMY'S SHIPMENT ISLAND</b>		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <b>FOR MC KINLEY CEMETERY</b>	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

## IDENTIFICATION DATA

1. REMAINS OF UNKNOWN <b>UNKNOWN X-3267</b>			(Formerly UNK X-397 USAF Cem Leyte #1, P.I.)			2. DATE OF REPORT <b>8 Jan 48</b>	
3. NAME OF CEMETERY  <b>AGRS Mausoleum, Manila, P.I.</b>			4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
			<b>LANGE</b> <b>813</b>	<b>BAY</b> <b>F</b>	<b>CR1P1</b> <b>1876</b>	DISINTERMENT <b>12 Dec 47</b>	REINTERMENT <b>STORAGE</b> <b>8 Jan 48</b>
PHYSICAL DESCRIPTION							
8. ESTIMATED WEIGHT <b>UTD</b>		9. ESTIMATED HEIGHT <b>UTD</b>		10. COLOR OF HAIR <b>UTD</b>		11. RACE <b>UTD</b>	
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS  <p style="text-align: center;"><b>N O N E</b></p>							
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES  <p style="text-align: center;"><b>U T D</b></p>							
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  <p style="text-align: center;"><b>U T D</b></p>							
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)							
<b>No clothing or equipment or personal effects found with remains.</b>							

TOOTH CHART		
	TOP VIEW	SIDE VIEW
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:		

RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
<i>M a x i l l a</i>								<i>M i s s i n g</i>							
Side Views								Side Views							
Top Views								Top Views							
UPPER								LOWER							
Side Views								Side Views							
<i>M a n d i b l e</i>								<i>M i s s i n g</i>							
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."

Maxilla and mandible missing.

No teeth found with remains.

CERTIFIED TRUE COPY  
*G. T. Gamboa*

s/ James W. McClanahan

G. T. GAMBOA  
 2d Lt., MSO



19. BLACK OUT PARTS OF BODY NOT RECOVERED

4 Rib fragments



L.R.

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

Remains consist of four (4) rib fragments.

Weight of remains approximately 1 oz.

\*Circumference of skull unable to determine due to no skull.

No ID tags nor ROI bottle found with remains.

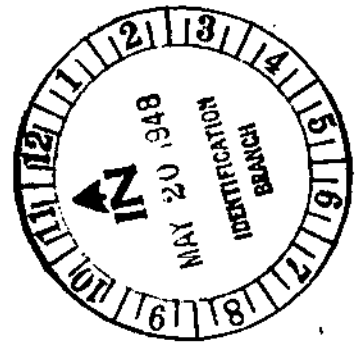
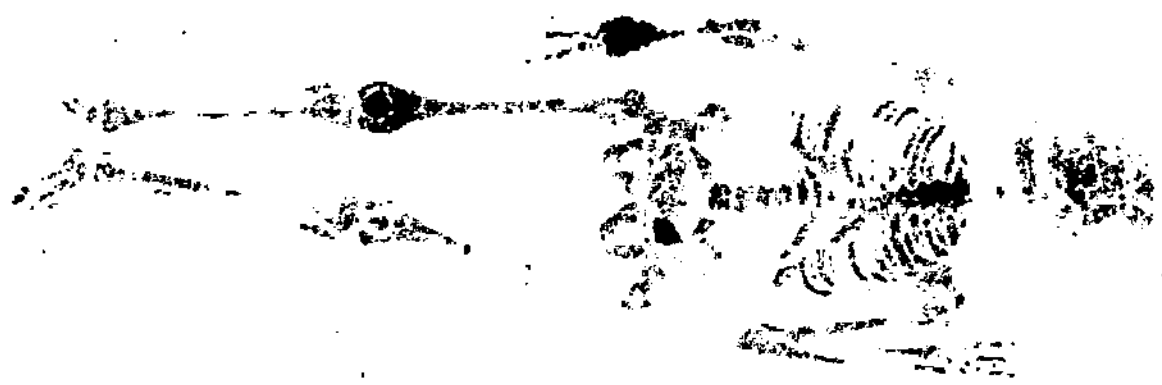
CERTIFIED TRUE COPY:

*G. T. Gamboa*  
G. T. GAMBOA  
2d Lt., M90

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  
p/ JAMES W. McCLANAHAN SP-6  
C-064983, OIP Lab., Manila, P.I.

SIGNATURE  
s/ James W. McClanahan



MAY 20 1948

RESTRICTED

U 381

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

13 Jan 48

Imprint Identification Tag If Possible. DO NOT TYPE		Section 1.—IDENTIFICATION.				
		NAME (Last, first, middle initial) UNKNOWN X-3267 (Formerly UNK X-397 USAF Cemetery Leyte #1, P.I.)		SERIAL NO. Unknown		
		GRADE Unknown	ORGANIZATION Infantry	BRANCH OF SERVICE Army		
		RACE Unknown	RELIGION Unknown	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY		
PLACE OF DEATH Cebu, P.I.	CAUSE OF DEATH KIA		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)	<p style="text-align: center;"> <i>CANCELLED</i>  <i>REMOVED 1/24/48</i>  <i>207 Lt. B-1-44</i> </p>					
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME None						
Section 2.—BURIAL (If other than established cemetery, furnish sketch and map coordinates on reverse.)						
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY GRS MAUSOLEUM, MANILA, P.						
DATE OF BURIAL 8 Jan 48	HOUR 1100	BURIED IN (Shroud, blanket, or name of other) Casket	TYPE OF GRAVE MARKER None	PLOT No. 813	ROW No. F	GRAVE No. 1876
WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery Leyte #1, P.I.					
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) MONOSSO, Ray W.	RANK Pvt	SERIAL No. 39473997	ORGANIZATION Co "B" 127th Inf Regt	GRAVE No. CRYPT 1878		
BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial) UNKNOWN X-3266-A	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 1874		
SIGNATURE OF PERSON PREPARING REPORT R. R. ACIERTO, Pfc			SIGNATURE OF GRS OFFICER VERIFYING REPORT L. S. PANOPLO, 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.						

RESTRICTED

Incl 7B

**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**

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


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

**REMARKS:**

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

81 MAR 1948

U-381 hsw 7316  
**RESTRICTED**

WD GMC 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 27 Feb. 1946
<i>Imprint Identification Tag If Possible.</i> <b>DO NOT TYPE</b> 	<b>Section 1.—IDENTIFICATION.</b>					
	NAME (Last, first, middle initial) (Formerly Unknown X-25, Cebu #2, P.I.) UNKNOWN X-397				SERIAL No.	
	GRADE	ORGANIZATION		BRANCH OF SERVICE Army (Inf)		
	RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY			
PLACE OF DEATH Cebu, P.I.	CAUSE OF DEATH KIA			DATE OF DEATH		
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) Disinterred from USAF Cemetery Cebu #2, P.I.					
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (Unknown tags.)						
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  None						
<b>Section 2.—BURIAL.</b> <i>If other than in established cemetery, furnish sketch and map coordinates on reverse.</i>						
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY USAF Cemetery Leyte #1, P.I.						
DATE OF BURIAL 24 Jan 1946	HOUR 1400 hrs	BURIED IN (Shroud, blanket, or name of other) Shelter half	TYPE OF GRAVE MARKER Reg. Cross	PLOT No.	ROW No.	GRAVE No. 7316
WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery Cebu #2, P.I.			PLOT No. 2	ROW No. 6	GRAVE No. 497
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) MILES, James R.		RANK Pvt.	SERIAL No. 35 815 762	ORGANIZATION 164th Inf	GRAVE No. 7315	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) FEDLER, Wilfred P.		RANK Pfc.	SERIAL No. 37 679 752	ORGANIZATION 182nd Inf	GRAVE No. 7317	
SIGNATURE OF PERSON PREPARING REPORT Sgt. Charles W. Hallock, GRS			SIGNATURE OF GRS OFFICER VERIFYING REPORT WILLIAM D. ROGERS, 1st 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 Office. Copies for retention in theater as prescribed by theater commander.						

**RESTRICTED**

**Section UNIDENTIFIED REMAINS.**

**INSTRUCTIONS:**


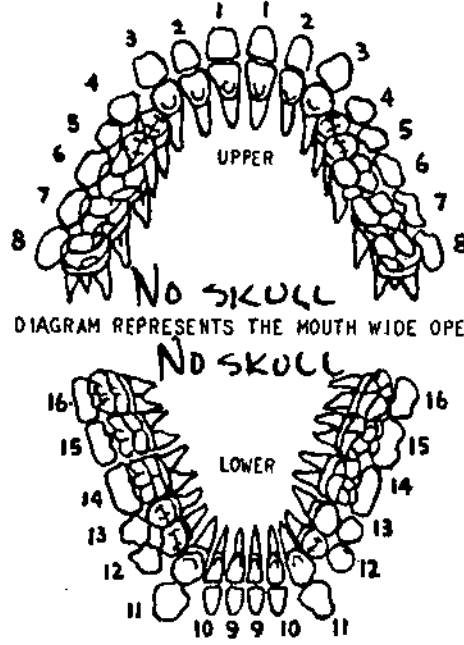




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

**27 MAR 1946**

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>NO SKULL 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:---**

This body was recovered from the far end of horse shoe ridge. It was laying approximately 500 yds from that of Pfc. Johnnie L. Nance, 34608910, Co. B, 182nd Inf., Nance was killed on April 4, 1945. This Unknown was evidently the victim of a direct hit from enemy mortar fire as there was very little left of the body.

**REMARKS:** (Skull missing)

CONDITION OF BODY PRECLUDED FINGERPRINTING AND TOOTHCHARTING.

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

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

DATE OF REPORT

21 Dec 1945

Imprint Identification Tag If Possible.  
DO NOT TYPE



**Section 1.—IDENTIFICATION.**

NAME (Last, first, middle initial) <u>UNKNOWN X-25</u>		No list of possibilities.		SERIAL NO. <u>Unknown</u>
GRADE <u>Unknown</u>	ORGANIZATION <u>Unknown</u>		BRANCH OF SERVICE <u>Infantry</u>	
RACE <u>Unknown</u>	RELIGION <u>Unknown</u>	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY		

PLACE OF DEATH <u>Cebu, P.I.</u>	CAUSE OF DEATH <u>K. I. A.</u>	DATE OF DEATH
-------------------------------------	-----------------------------------	---------------

EMERGENCY ADDRESSEE (Name, relationship, and address)

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

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  
id 10 76  
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. ... Cemetery Cebu #2 Cebu P.I.

DATE OF BURIAL <u>30 June 45</u>	HOUR <u>1130</u>	BURIED IN (Shroud, blanket, or name of other) <u>Poncho</u>	TYPE OF GRAVE MARKER <u>Cross</u>	PLOT No. <u>2</u>	ROW No. <u>6</u>	GRAVE No. <u>497</u>
-------------------------------------	---------------------	--	--------------------------------------	----------------------	---------------------	-------------------------

WAS THIS A REBURIAL? (Yes or no) <u>No</u>	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE
---	---

TYPE OF RELIGIOUS CEREMONY <u>Burial Service</u> <u>Faith Unknown</u>	PERSON CONDUCTING BURIAL RITES <u>Chap. L. O. Coleman</u>	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY <u>Report of Interment in wax. sealed bottle.</u>
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) <u>No</u>	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) <u>Yes</u>	

BODY BURIED ON DECEASED LEFT. NAME (Last, first, middle initial) <u>Lewis, James S.</u>	RANK <u>Pfc</u>	SERIAL No. <u>38452906</u>	ORGANIZATION <u>Btry 247</u> <u>F. A.</u>	GRAVE No. <u>496</u>
--	--------------------	-------------------------------	---	-------------------------

BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial) <u>Helms, Glenn L.</u>	RANK <u>Pfc</u>	SERIAL No. <u>37554940</u>	ORGANIZATION <u>Co. D.</u> <u>132 Inf.</u>	GRAVE No. <u>498</u>
---	--------------------	-------------------------------	--	-------------------------

SIGNATURE OF PERSON PREPARING REPORT <u>John J. Luff</u>	SIGNATURE OF GRS OFFICER VERIFYING REPORT <u>John J. Luff</u>
---	--

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.

**11 JAN 1946**

**Section 3 - UNIDENTIFIED REMAINS.**


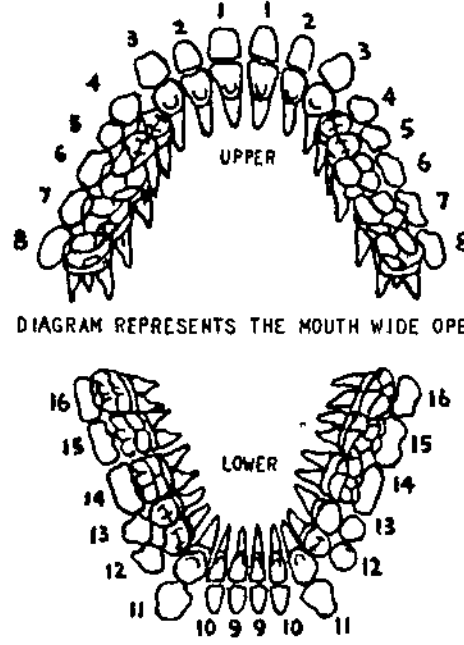




**INSTRUCTIONS:**

(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.

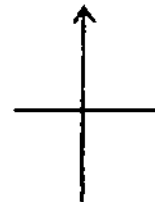
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

Tooth Chart not possible.

This body was recovered from the far end of horse shoe ridge. It was laying approximately 500 yds. from that of PFC Johnnie L. Nance 34608910 Co. B 172 Inf. Nance was killed on 4 Apr 45. This unknown was evidently the victim of a direct hit from enemy mortar fire as there was very little left of his jaw.



Unknown X-25

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

Cebu, P.I.

Unknown

Unknown

(Place of death)

(Date of death)

(Cause of death)

1130 Hours 30 June 1945

U.S.A.F. Cemetery Cebu # 2, P.I.

(Time and date of burial)

(Name of cemetery)

(Name or coordinates of location)

497

6

2

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

Religion: Unknown

**Report of Interment buried with body**

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

See attached sheet

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

Body buried on RIGHT	Glenn D. Phelps	37554940	Pfc	Co. D, 132d Inf	498
	(Name)	(Serial number)	(Rank)	(Organization)	(Grave number)
Body buried on LEFT	James S. Lewis	38452996	Pfc	Btry 247 F.A.	496
	(Name)	(Serial number)	(Rank)	(Organization)	(Grave number)

Unknown

(Name and address of EMERGENCY ADDRESSEE)

(Name and address of LEGAL NEXT OF KIN)

51A

List only personal effects FOUND ON BODY and disposition of same. No personal effects found on body.

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 LAND-MARKS.

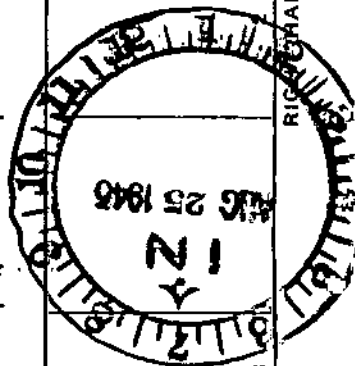
(Signature of officer or other person reporting burial)

*Samuel J. Larkins*

8075

63A

SAMUEL J. LARKINS, 1st Lt., QMC, G.I. Officer.



LEFT HAND

4

3

2

1

THUMB

4

3

RIGHT HAND

THUMB

unknown X-25 -

120

Unknown X - 25

This body was recovered from the far end of horse shoe ridge. It was laying approximately 500 yds. from that of PFC Johnnie L. Nance 34608910 Co. B 182 Inf. Nance was killed on 4 April 1945. This unknown was evidently the victim of a direct hit from enemy mortar fire as there was very little left of his body.