

IDENTIFICATION CHECK LIST

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

UNKNOWN X-2251-C (Formerly UNK X-616-C
~~UNKNOWN X~~ USAF Cem: Leyte #1, P.I.)
 Cemetery: AGRS Mausoleum, Manila, P.I.
 Plot: 810 Row K Grave: 3674

AGRS Mausoleum, Manila, P.I.

1. Arrived at ~~recovery~~ 28 Nov 47

(Hour) (Date)
 Vicinity of Iubi,

2. Place of death Leyte, P.I.

(Name of closest town)

(Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3. Remains recovered or disinterred by Leyte #1

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

Belt, web

Drawers, wool

Drawers, cotton

Leggings, wool

Socks, cotton

* Shoes (type)

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: **Skeleton only. Chart attached.**

Age Height **UTD** 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 **U** (Light, medium, dark, clear, pimples, poeks, freckles)

Build **D** (Large, fat, thin, muscular)

Hair (Color, length, quantity, curly, 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 U Eyebrows (Color, bushiness, extent across nose)

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

Mouth Lips (Small, large, full)

Teeth **Tooth Chart attached.** (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw (Large, small, normal) **skull** **UTD** Circumference of ~~head~~ in inches (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 (Short, thick, long, slender, size of knuckles, missing fingers or joints)

Fingers (Unusual characteristics of fingernails)

Chest T D (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? Yes If not, explain _____
(Yes-no)

9. Remarks In processing these remains, it was found that there were more than one remains present. Due to bone structures, we were able to segregate these remains into three (3) different remains designated as: UNK X-2251-A, B, and C. For further reference refer to UNKs X-2251-A and B. Estimated weight of remains, 2 lbs.

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/ Julian H Weddle
(Officer's Name)

Enb Sr C-064965
Rank Service

CIP Laboratory, Manila, P.I.
(Organization)

28 Nov 47

CERTIFIED TRUE COPY:

G. T. Gamboa
G T GAMBOA
2d Lt MAC

X-2251-C

IDENTIFICATION DENTAL CHART

TO BE USED WITH OMC FORMS NOS. 1042 & 1044 IN PLACE OF CHART THEREON,
AND TO BE ATTACHED TO AND FORWARDED WITH THESE FORMS WHEN ACCOMPLISHED.

UNKNOWN: X-2251-C (Formerly UNK X-616-C)
USAF Com Leyte #1, P.I.

28 Nov 47

DATE

Unknown

Unknown

LAST NAME

FIRST

INITIAL

RANK

SERIAL NO.

Unknown

Possibly Army

UNIT
Vicinity of Dabi,
Leyte, P.I.

AGRS Mausoleum,
Manila, P.I.

ORGANIZATION

810 K 3674

PLACE OF DEATH

PLACE OF BURIAL

PLOT

ROW

GRAVE NO.

maxilla missing
STORAGE

ANGER

DAY

CRYPT
















RIGHT								UPPER TEETH				LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8				
TYPE																			
LOCATION																			

INSIDE — LOOKING OUT

RIGHT								LOWER TEETH				LEFT			
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16
TYPE	A													A	
LOCATION	70													70	

see Remarks

KEY OF SYMBOLS TO BE USED ON ABOVE CHART

SYMBOLS IN WHOLE BOX	TYPE OF FILLING IN UPPER HALF OF BOX	LOCATION OF FILLING IN LOWER HALF OF BOX
 EXTRACTED	 AMALGAM (SILVER)	 MESIAL (BETWEEN-TOWARD FRONT)
 CAVITY INDICATE LOCATION	 GOLD	 OCCLUSAL (BITING SURFACE BACK TEETH)
 FIXED BRIDGE (INCL. ABUTMENTS)	 SILICATE OR PORCELAIN	 DISTAL (BETWEEN - TOWARD BACK)
 TEETH REPLACED BY DENTURE	 OXYPHOSPATE (CEMENT)	 LINGUAL (TOWARD TONGUE)
 POSTHUMOUSLY MISSING (LOST AFTER DEATH)		 FACIAL (TOWARD CHEEK)

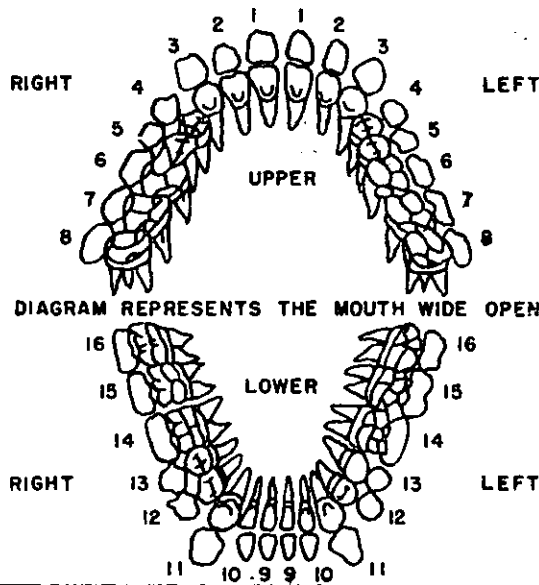
INSTRUCTIONS:

1. ACCURACY AND ATTENTION TO DETAIL IN THE PREPARATION OF THIS CHART ARE OF PARAMOUNT IMPORTANCE, IF SAME IS TO BE OF MAXIMUM VALUE.

2. NOTE CAREFULLY THAT: SYMBOLS INDICATING MISSING TEETH, CAVITIES AND BRIDGE-WORK ARE TO BE INSERTED IN WHOLE BOX; SYMBOLS INDICATING TYPE OF FILLING ARE TO BE INSERTED IN UPPER HALF OF BOX; AND SYMBOLS INDICATING LOCATION OF FILLING ARE TO BE INSERTED IN LOWER HALF OF BOX.

3. ANY ABNORMALITIES SUCH AS MALPOSED, MALFORMED OR DISCOLORED TEETH, ETC. SHOULD BE NOTED. DENTAL WORK NOT COVERED ABOVE WILL BE INDICATED, e.g., PORCELAIN CROWNS, GOLD CROWNS (FULL OR $\frac{3}{4}$), $\frac{3}{4}$ GOLD CROWN WITH SILICATE WINDOW.

4. FOR INFORMATION OF STANDARD NUMBERING OF TEETH, SEE DIAGRAM BELOW.



REMARKS:

Maxilla missing. I11 fractured on its mesial surface.

/s/ Antonio B. Iaconico
SIGNATURE OF PERSON WHO PREPARED CHART

/p/ ANTONIO B IACONIO - Recorder
NAME AND RANK TYPED OR PRINTED

CIP Laboratory, Manila, P.I.
PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

/s/ John H Bennett, Jr
VERIFIED BY GRS OFFICER

/p/ JOHN H BENNETT JR
NAME AND RANK TYPED OR PRINTED

28 Nov 47
DATE

CERTIFIED TRUE COPY:

G. T. Gamboa
G T GAMBOA
2d Lt MAC

SKELETAL CHART

X-2251-C

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



CHART "A"

A.R.

X-2251-C

DMO Form 1042
Rev. 1 Apr. 1945

RESTRICTED

REPORT OF DISINTERMENT FOR IDENTIFICATION

20 October 1947

1. Remains of (Name)

Serial Number

UNKNOWN X-616C

-

Grade

Organization

-

-

.Name, Number and Location of Cemetery

Plot

Row

Grave No.

USAF Cemetery Leyte #1, P.I.

8535

2. Date of Disinterment

20 October 1947

3. Report as to Nature of Original Burial and Condition of Body Upon Disinterment.

Original made in Type "C" wooden casket burial. Three skeletal remains. Remains in separate containers. Tags on remains coincide with R.O.I.s and burial bottle.

4. What Identification Found at Time of Disinterment: On Marker

Substitute tag

On Remains

Substitute tag

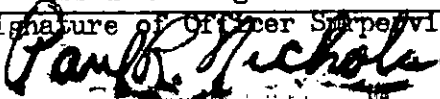
~~What Identification Used Upon Reinterment: On Marker~~

Held in Field Morgue

On Remains

Substitute tag

5. Signature of Officer Supervising Disinterment and Reinterment.



PAUL R. NICHOLS, Embalmer

RESTRICTED

IDENTIFICATION CHECK LIST

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

Unknown X 616C

Cemetery Leyte #1

Plot _____ Row _____ Grave 8535
 Isolated grave approximately 2 km. east
 along Daguitan river. Remains were 25
 yards from the banks of the Daguitan river.

1. Arrived at cemetery 16 May 1947
(Hour) (Date)

2. Place of death Lubi, Leyte, P.I.
(Name of closest town) (Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3. Remains recovered or ~~disinterred~~ by 1st Plat., 3008th QM GR Co.
(Name and organization)

4. Evacuated to Cemetery by 1st Plat., 3008th QM GR Co.
(Name and organization)

5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

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

NONE

Belt, web

Drawers, wool

Drawers, cotton

Leggings, wool

Socks, cotton

* Shoes (type)

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: **Skeleton only - Skeletal chart attached.**

Age Height Weight Description of wounds

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, poeks, freckles)

Build (Large, fat, thin, muscular)

Hair (Color, length, quantity, curly, wavy, straight, worn, or definite parting)

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

Sideburns Mustache Beard or (Length, heavy)

X-6160

Goatee (Light, color, extent)

Eyes (Color, setting, shape) Eyebrows (Color, bushiness, 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 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw (Large, small, normal) Circumference of head in inches (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 (Short, thick, long, slender, size of knuckles, missing fingers or joints)

Fingers (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 (Disseam, 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.

X-6160
X-616C

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 If not, explain No skull received with
(Yes-no) remains

9. Remarks While processing the remains of X-616 (Isolated grave near Daguitan
River, Lubi, Leyte, P.I.) extra remains were found and recorded as - See - X-616A,
X-616B, X-616C.

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.

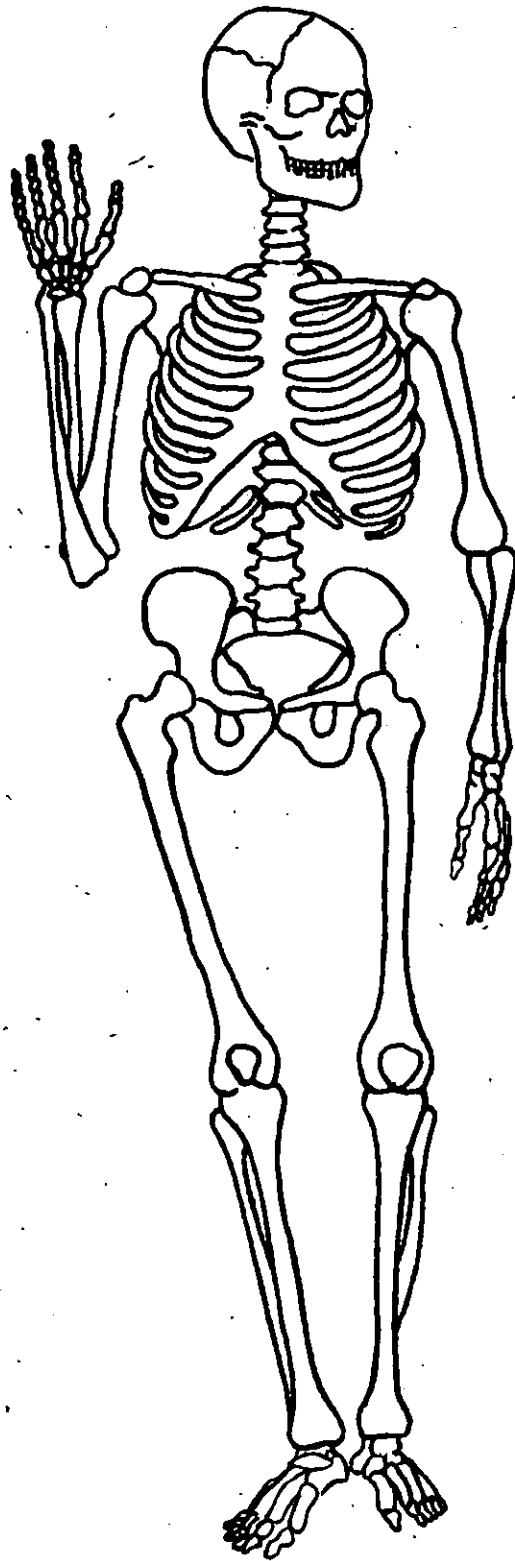
[Signature]
(Officer's Name)

[Signature] Rank [Signature] Service

(Organization)

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



NOTICE

THESE REMAINS
CONSIST OF ONE
(1) ATLAS, ONE (1)
AXIS, ONE (1)
METACARPAL
ONLY.

R E S T R I C T E D

HEADQUARTERS
USAF CEMETERY LEYTE NO. I
APO 707

SEARCH AND RECOVERY REPORT

TRIP # 68 SEARCH # 2

1. DATE AND TIME OF DEPARTURE: 2 May 1947 at 0800 Hrs.
2. PARTY CONSISTED OF: 4 EM
3. TOWN OR BARRIO: Lubi PROVINCE OR ISLANDS: Leyte, P.I.
4. PERSONS INTERROGATED:
 - a. Andres Kasakit
 - b. Eutiquio Kamantang
 - c. _____
 - d. _____
 - e. _____
 - f. _____
5. GUIDES:
 - a. Andres Kasakit
 - b. Eutiquio Kamantang
 - c. _____
 - d. _____
 - e. _____
 - f. _____
6. LOCATION OF REMAINS (GRID COORD.) 10° 57' 59" N-124° 45' 52" E.
2 Km East along Daguitan river.
7. DATE AND TYPE OF RECOVERY: Isolated Burial
8. NUMBER OF REMAINS RECOVERED: (1) (2) (B) (L) (6) (Check one)
9. CONDITION OF REMAINS: Completely decomposed
10. IDENTIFICATION CLUES FOUND WITH REMAINS:
 - a. N O N E
 - b. _____
 - c. _____
 - d. _____
 - e. _____
11. PERSONAL EFFECTS FOUND WITH REMAINS:
 - a. N O N E
 - b. _____
 - c. _____
 - d. _____
 - e. _____
12. DATE AND TIME RETURNED: 16 May 1947 at 1730 Hrs.
13. REMARKS: (SEE REVERSE SIDE):

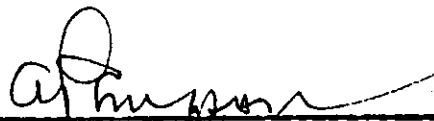
REMARKS:

These Unknown bodies were found approximately 2 Km East along Daguitan river. The location of remains was 25 yards from the banks of the Daguitan river.

/s/t/S/Sgt. Harold J. Lemons

Search Party Leader

A TRUE COPY:


A. P. SINGSON, 1st Lt., Inf.

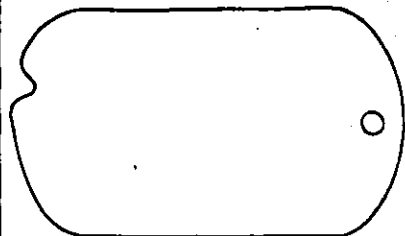
WD OMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

8 Dec 47

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)

UNKNOWN, X-2251-C (Formerly UNK X-616-C
USAF Cam Leyte #1, P.I.)

SERIAL No.

Unknown

GRADE

Unknown

ORGANIZATION

Unknown

BRANCH OF SERVICE

Possibly Army

RACE

Unknown

RELIGION

Unknown

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

PLACE OF DEATH

Vicinity of Lubi,
Leyte, 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)

CANCEL---Assigned CIL #348 per ltr Philcom
7 June 49, Subj: Assignment of CIL Numbers.

WERE SUBSTITUTE TAGS PROVIDED?(Yes or no)

Yes (2)

See Remarks

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

46RS MAUSOLEUM, MANILA, P.I.

DATE OF BURIAL
STORAGE
29 Nov 47

HOUR

12 52 PM

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

RESTORED
Casket

TYPE OF GRAVE
MARKER

None

PLOT No.
DANGER
810

ROW No.
BAY
E

GRAVE No.
CRYPT
3674

WAS THIS A REBURIAL?
(Yes or no)

Yes

RESTORED

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

USAF Cemetery Leyte #1, P.I.

PLOT No.

ROW No.

GRAVE No.
8535

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

STORED

IDENTIFICATION TAG ATTACHED TO
MARKER (Yes or no)

Yes

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

STORED
UNKNOWN X-2253

RANK

SERIAL No.

ORGANIZATION

GRAVE No.
CRYPT
3676

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

STORED
UNKNOWN X-2250

RANK

SERIAL No.

ORGANIZATION

GRAVE No.
CRYPT
3672

SIGNATURE OF PERSON PREPARING REPORT

R R ACIERTO, Pvt

SIGNATURE OF GRS OFFICER VERIFYING REPORT

L S PANOPIC, 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.

9.1.00.941

Section 3. UNIDENTIFIED REMAINS.

INSTRUCTIONS:


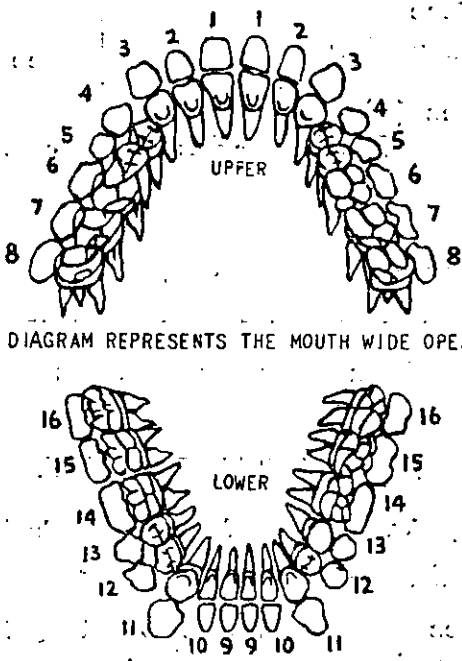




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number, position of body found in airplanes, vehicles, and tanks; and serial numbers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

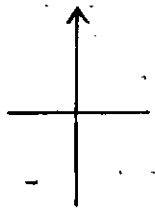
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS

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

OTHER IDENTIFICATION CLUES

FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>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:
 Cross reference subject case with UNKs X-2251-A and X-2251-B.
 AGRS Mausoleum, Manila, P.I.

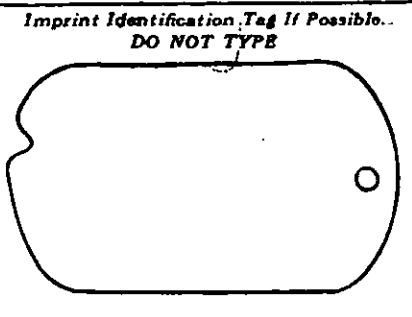
Identification Check List and Dental Chart accomplished.

20 JAN 1948

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

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

DATE OF REPORT
28 August 1947



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)		SERIAL No.
UNKNOWN X-616C		-
GRADE	ORGANIZATION	BRANCH OF SERVICE
-	-	Possibly Army
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
-	-	-

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
Vicinity of Lubi, Leyte, P.I.	-	-

EMERGENCY ADDRESSEE (Name, relationship, and address)

-

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)
None	
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no)	
Yes (Unknown tags)	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

N O N E

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 Leyte #1, Leyte, P.I.

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
27 August 1947	1400	Separate container (Shelter halve) in Casket "C" Type	Reg Cross			8535

WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE
No	Recovered at Grid Coord: 10 57' 59" N-124 45' 52" W Map of Leyte, Series of 1934, Scale 1:200,000

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
Catholic and Protestant	HUGH F. KENNEDY, Major, Ch.C. Rev. Magno Managbanag	Report of Interment buried in bottle with body.

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.
UNKNOWN X-615				8534

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
UNKNOWN X-617				8536

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
Cpl. Jack G. Slegle, GRS	A. P. SINGSON, 1st Lt., Infantry

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.

File 28

Section UNIDENTIFIED REMAINS.

INSTRUCTIONS:


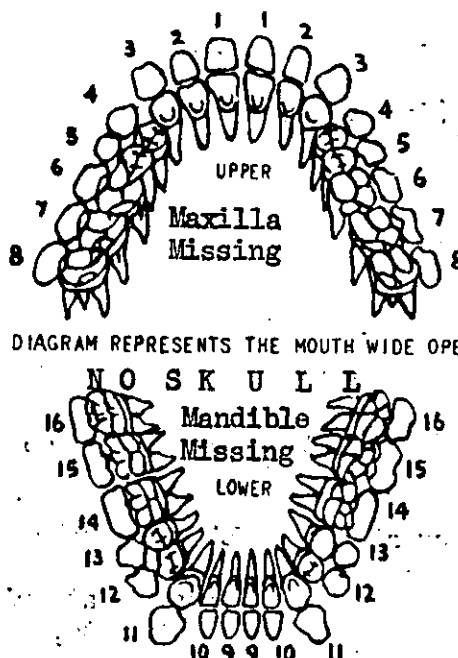





(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

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

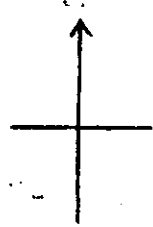
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
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WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
		Vicinity of Lubi, Leyte

OTHER IDENTIFICATION CLUES

FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER Maxilla Missing</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p> <p>NO SKULL Mandible Missing 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>	
FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	

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



REMARKS:
Condition of remains precluded tooth charting.

3 SEP 1947