

MANILA HEALTH DEPARTMENT
DIV. OF PREVENTABLE DISEASES
RECEIVED
MAR 10 1950
RELEASED

Republic of the Philippines
City of Manila
MANILA HEALTH DEPARTMENT
CITY HALL

293 unbk X-2315, P.O. Manila
March 10, 1950

RECEIPT OF REMAINS

I, DR. ANGEL ALOMIA, Chief, Division of Preventable Diseases,
on behalf of the Manila Health Department, hereby acknowledged
receipt of the remains of UNK X-2315 AGRS Mausoleum, Manila,
formerly X-592 USAF Cemetery Leyte #1, which were recovered from
Leyte #1.

Angel Alomia
ANGEL ALOMIA

Chief, Div. of Preventable Diseases

Records of UNK X-2315 includes:

1. Report of Interment
2. Statement dtd 23 Feb 50
3. QMC Form 1045
4. Identification Check List
5. Skeletal chart
6. QMC Form 1044
7. S & R Report

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only
this
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11
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SH...

Incl 3 2

293

UNKNOWN X-2315

P. I. (Manila)

Name	Last	First	Middle	ASN	Rank
------	------	-------	--------	-----	------

Organization	Religion
POW Camp at Davao Penal Colony Davao, Mindanao	

Place of Death	Date of Death
Isolated Burial	

Place of Burial	Date of Burial
	USAF Cemetery Leyte #1, P.I.

Grave No., etc.	Reburial

Next of Kin	Address

Name	Base Section	File No.
Incl a' UNKNOWN X-2315	P.I.	U 3016

USAF Cemetery Leyte #1, P.I.

14 May 47

Place of Reburial

Date of Reburial

8504

Grave No., etc.

AGRS Mausoleum, Manila P.I.

1 Dec '47

Place of Reburial

Storage

Date of Reburial Storage

Crypt 4031 Bay L Hanger 810

Grave No., etc.

Remarks:

CIP: YES No. Formerly Unk X- 592 USAF Cem. Leyte #1, P.I.

AREA 60, SUB-AREA _____

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE
APO 900

CHECK SHEET

LWR/atz
USAPSH-50

(Do Not Remove From Attached Sheets)

File No. GRPZ Turn Over of Remains to Local
SUBJECT: Civilian Authorities

(2) FROM: AGRS Mausoleum TO: AGRS Records Branch 10 Mar 1950

1. Remains of UNK X-988 Maus. formerly X-3947 USAF Cem. Manila #2 and UNK X-2315 Maus. formerly X-592 Leyte #1, were turned over to local civilian authorities this date.

2. Enclosed is copy of receipt signed by the Chief, Division of Preventable Diseases, Manila Health Department.

L. W. Richardson
L. W. RICHARDSON
M/Sgt., QMC

5 Incls:
Incl 1 - 4 - w/d
Incl 5 - Cy of receipt

Returned to Allied Control

Benny

LWR/atg
USAPSH-50

GRFZ

Turn Over of Remains to Local
Civilian Authorities

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Incl 1 - 4 - w/d
Incl 5 - Cy of receipt

L. W. RICHARDSON
M/Sgt. QMC

LWR/atg
USAPSH-50

GRFZ

Turn Over of Remains to Local
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Incl 1 - 4 - w/d
Incl 5 - Cy of receipt

L. W. RICHARDSON
M/Sgt., QMC

HEADQUARTERS
PHILCOM ZONE
AMERICAN GRAVES REGISTRATION SERVICE

APO 900

HBM/RHT/vcf
USAPSH 60
6 March 1950

CHECK SHEET

(Do Not Remove From Attached Sheets)

File No. _____ Subject: Turn Over of Remains to Local Civilian Authorities

FROM: AGRS Records Branch

TO: AGRS Mausoleum
Nichols Field


1. Request the remains presently stored as Unknown X-988, AGRS Mausoleum, Manila, formerly Unknown X-3947 USAF Cemetery Manila #2 and Unknown X-2315 AGRS Mausoleum, Manila, formerly X-592 USAF Cemetery Leyte #1, be turned over to the local civilian authorities for interment.

2. Reference is made to Inclosures which indicate that Unknown X-2315 Mausoleum, formerly X-592 Leyte #1, is a Female mongoloid, in the mid or late twenty's, approximately 5' 3-5/8" in height, and having numerous caries but no dental work and Unknown X-988 is a female mongoloid approximately 4'11" in height, and in the estimate age grouping of 30-40 years.

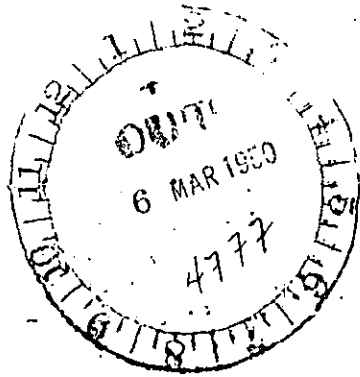
3. Request this Office be notified when subject remains have been delivered to the local civilian authorities.

4 Incls:

- 1 - Statement of Robert
FOX dtd 23 Feb 50
- 2 - QMC Form 1042 re:
X-2315 Maus., Mla
- 3 - Statement of Robert
FOX dtd 27 Feb 50
- 4 - QMC Form 1042 re:
X-988 Maus., Mla


H. B. McNEMAR
Captain, QMC
Chief, Records Branch

Incl 2-3



31

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103

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CHANGE OF STATUS REPORT

INITIATED BY Mausoleum SECTION DATE 13 Mar 50

The administrative and/or physical changes indicated below will be performed by the section concerned in the shortest possible time. Initials where indicated signify completion of the procedure required by that section. When a casualty is referred to name, rank and serial number will be shown.

PROCEDURE	FROM	TO
1. IDENTITY	UNK X-988 Maus. (for. X-3947)	NONELIGIBLE
2. CATEGORY		
3. CODE		
4. ORIG. CEM.	Manila #2	
5. LOCATION		

RECORDS ACCOUNTING _____ (Initials) IDENTIFICATION _____ (Initials) CIP _____ (Initials)

REMAINS ACCOUNTING _____ MAUSOLEUM RECORDS AV CAS-KETED _____

L. W. Richards

(Signature)

Send

CHANGE OF STATUS REP

INITIATED BY Mausoleum SECTION DATE 19 Mar 50

The administrative and/or physical changes indicated below will be performed by the section concerned in the shortest possible time. Initials where indicated signify completion of the procedure required by that section. When a casualty is referred to name, rank and serial number will be shown.

PROCEDURE	FROM	TO
1. IDENTITY	UNK X-988 Maus. (ser. X-3947)	<i>None</i>
2. CATEGORY		
3. CODE		
4. ORIG. CEM.	Manila #2	
5. LOCATION		

RECORDS ACCOUNTING _____ (Initials) IDENTIFICATION _____ (Initials) CIP _____ (Initials)

REMAINS ACCOUNTING _____ MAUSOLEUM RECORDS _____ CAS-KETED _____

L W K

(Signature)

CHANGE OF STATUS REPORT

INITIATED BY Mausoleum SECTION DATE 13 Mar 50

The administrative and/or physical changes indicated below will be performed by the section concerned in the shortest possible time. Initials where indicated signify completion of the procedure required by that section. When a casualty is referred to name, rank and serial number will be shown.

PROCEDURE	FROM	TO
1. IDENTITY	UNK X-2315 Maus. (for. X-592)	NON-ELIGIBLE
2. CATEGORY		
3. CODE		
4. ORIG. CEM.	Leyte #1	
5. LOCATION		

RECORDS ACCOUNTING _____ (Initials) IDENTIFICATION _____ (Initials) CIP _____ (Initials)

REMAINS ACCOUNTING _____ MAUSOLEUM RECORDS _____ CAS-KETED _____

J. W. Richardson

(Signature)

Encls 5

CHANGE OF STATUS REPORT

INITIATED BY _____

Mausoleum

SECTION _____

DATE _____

13 Mar 50

The administrative and/or physical changes indicated below will be performed by the section concerned in the shortest possible time. Initials where indicated signify completion of the procedure required by that section. When a casualty is referred to name, rank and serial number will be shown.

PROCEDURE	FROM	TO
1. IDENTITY	UNK X-2915 Maus. (for. X-592)	<i>non-digible</i>
2. CATEGORY		
3. CODE		
4. ORIG. CEM.	Loyte #1	
5. LOCATION		
RECORDS ACCOUNTING	(Initials) _____	(Initials) _____
REMAINS ACCOUNTING	IDENTIFICATION _____	CIP _____
	MAUSOLEUM RECORDS _____	CAS-KETED _____
		<i>A-111</i>
		<i>gWR</i>
		(Signature)

DISINTERMENT DIRECTIVE

/avy
↑

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7740 00506

DATE
15 05 48
DAY MONTH YEAR

NAME

UNKNOWN X-000592

SERIAL NUMBER

RANK

ARM

DATE OF DEATH

DAY MONTH YEAR

CEMETERY

USAF CEMETERY LEYTE NO 1

DISPOSITION OF REMAINS

7701 80
CODE DIST. PT.

PLOT

ROW

GRAVE

COUNTRY

8504 PHILIPPINE ISLANDS

CAUSE OF DEATH

6

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

FORT MC KINLEY CEMETERY

NAME AND ADDRESS OF NEXT OF KIN

MANILA, PHILIPPINE ISLANDS
(BY ADMINISTRATIVE ORDER)

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

UNKNOWN X-592

UNKNOWN X-2315 (MAUS)

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISTINTERRED

27 Sept 1948

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

SKELTAL

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES

Two identification tags re MAUS UNKNOWN X-2315

REMAINS PREPARED AND PLACED IN CASKET

DATE 27 Sept 1948

PERRY E WHITE

CASKET SEALED BY

PERRY E WHITE

EMBALMER (Signature)

Perry E White
PERRY E WHITE

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY

DATE 27 Sept 48 BY HORACE L ALLISON, Sgt, INF

LUCIO S PANOFIO, 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.

Lucio S Panofio
LUCIO S PANOFIO, 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 ПРИКОМАН	DATE	SIGNATURE OF RECEIVER	DATE

5. SHIPPED

FROM КОНВОЙ (СЛУЖИТЕЛИ ВЪВЕД) НАЙТИ ВЪВЕДЕНИЕ ИЗДАНО		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER СОБ. МО КИНГЛЕА СЕМЕТЕРА	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

FROM СОБ. МО КИНГЛЕА СЕМЕТЕРА		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER МАРИКА ПУКИ	DATE	SIGNATURE OF RECEIVER О. ДАВИ	DATE 17.08.90

7. SHIPPED

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

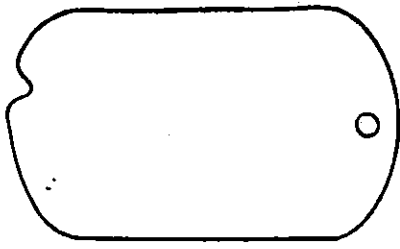
/ZVM

RESTRICTED

JUN 18 1948

U-3016

WD FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)	REPORT OF INTERMENT STORAGE (AR 30-1810 and AR 30-1815)	DATE OF REPORT 8 Dec 47
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Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.		
	NAME (Last, first, middle initial) UNKNOWN X-2315 (Formerly Unk X-592 USAF Cemetery Leyte #1, 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, Davao Penal Colony, Davao, Mindanao, P.I.	CAUSE OF DEATH Unknown	DATE OF DEATH Unknown	

EMERGENCY ADDRESSEE (Name, relationship, and address) **Unknown** **CANCEL: 10 April 1950 - Declared to be Native Mongoloid per Philcom Letter dtd 15 March 1950**

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)	<i>293 UNK P.I. X-2315 (mausoleum)</i>

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.

DATE OF BURIAL STORAGE 1 Dec 47	HOUR 1100	BURIED IN (Shroud, blanket, or name of other) STORED Casket	TYPE OF GRAVE MARKER None	PLOT No. 810	ROW No. L	GRAVE No. 4031
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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 Leyte #1, P.I.	PLOT No.	ROW No.	GRAVE No. 8504
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TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA, AND CONTAINERS BURIED WITH BODY
----------------------------	--------------------------------	--

IDENTIFICATION TAG BURIED WITH BODY (Yes or no) STORED Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes
---	--

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORED McDonald, Orriel O	RANK Pfc	SERIAL No. 16007086	ORGANIZATION Co F 21st Inf	GRAVE No. CRYPP 4033
--	--------------------	-------------------------------	--------------------------------------	--------------------------------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED Unknown X-2310	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPP 4029
---	------	------------	--------------	--------------------------------

SIGNATURE OF PERSON PREPARING REPORT: **R.R. ACIERTO, Pvt**
 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.

277

RESTRICTED

Section UNIDENTIFIED REMAINS.

INSTRUCTIONS:


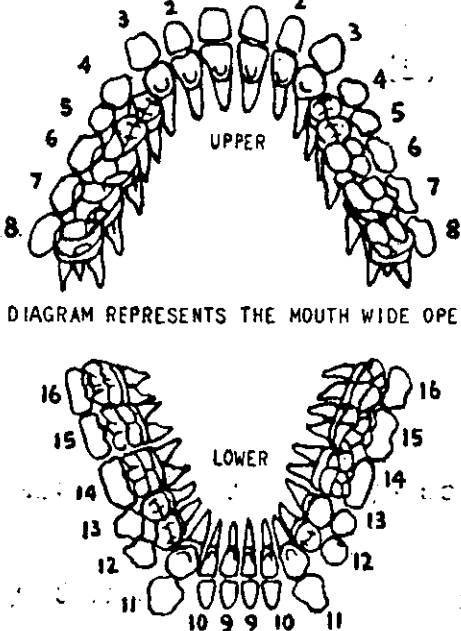




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

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

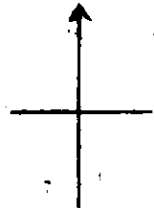
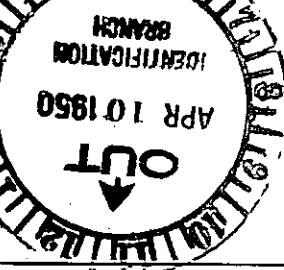
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
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WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
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OTHER IDENTIFICATION CLUES

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

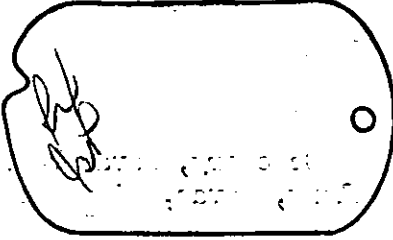
Identification Check List and Dental Chart accomplished.

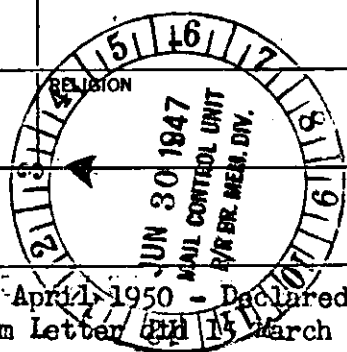
19 MAY 1948

RESTRICTED

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8504

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 15 May 1947		
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.					
		NAME (Last, first, middle initial) UNKNOWN X-592			SERIAL No.		
		GRADE -	ORGANIZATION		BRANCH OF SERVICE -		
		RACE -	RELIGION		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY -		
PLACE OF DEATH POW Camp at Davao Penal Colony, Davao, Mindanao		CAUSE OF DEATH -			DATE OF DEATH -		
EMERGENCY ADDRESSEE (Name, relationship, and address) CANCEL: 10 April 1950 - Declared to be Native Mongoloid per Philcom Letter #14 March 1950							
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 (Unknown Tags)							
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME NONE							
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.							
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY USAF Cemetery Leyte #1, Leyte, P.I.							
DATE OF BURIAL 14 May 1947	HOUR 1400 hrs	BURIED IN (Shroud, blanket, or name of other) Casket "C" Type		TYPE OF GRAVE MARKER Reg. Cross	PLOT No.	ROW No.	GRAVE No. 8504
WAS THIS A REBURIAL? (Yes or no) No	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE Disinterred from POW Cemetery, Davao Penal Colony, Davao, Mindanao Cord: 7° 24' N., 125° 38' E						
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY Report of interment buried in bottle 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-591			RANK -	SERIAL NO. -	ORGANIZATION -	GRAVE No. 8503	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) ROGERS, Lloyd W. Jr.			RANK -	SERIAL NO. 0-890143	ORGANIZATION -	GRAVE No. 8505	
SIGNATURE OF PERSON PREPARING REPORT Gpl. Jack G. Stagle, G. R. S.				SIGNATURE OF GRS OFFICER VERIFYING REPORT William C. Clark WILLIAM C. CLARK, 1st Lt., OMC			
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.							



Incl 21

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
				POW Cemetery, Davao Penal Colony, Davao, Mindanao

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

OTHER IDENTIFICATION CLUES

SEE ATTACHED QMC FORM 1045

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:

29 MAY 1947

/zvm

X-2315

IDENTIFICATION DENTAL CHART

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

29 Nov 47

UNKNOWN X-2315 (Formerly Unk X-592
USAF Cemetery Leyte #1, P.I.)

Unknown

DATE
Unknown

LAST NAME FIRST INITIAL

RANK

SERIAL NO.

Unknown

Unknown

POW Camp, Davao ^{UNIT} Penal Colony,
Davao, Mindanao, P.I.

AGRS Mausoleum
Manila, P.I.

ORGANIZATION

810 L 4031

PLACE OF DEATH

PLACE OF BURIAL

PLOT

ROW

GRAVE NO.

STORAGE

HANGER

BAY

KEY

crowns broken















implant

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	○	○							⊗	⊗		⊗	⊗		
LOCATION															

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	 OXYPHOSPHATE (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.

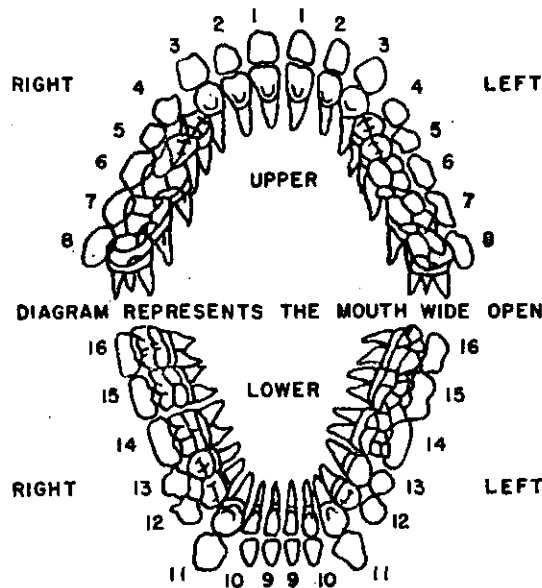


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN

REMARKS:

L-4 and L-5 crown broken and L-8 malposed

/s/ Gerald M. Holtz
SIGNATURE OF PERSON WHO PREPARED CHART

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

/p/ GERALD M. HOLTZ Emb Sr.
NAME AND RANK TYPED OR PRINTED

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

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

29 Nov 47
DATE

CERTIFIED TRUE COPY:

George T. Gamboa
GEORGE T GAMBOA
2d Lt MAC

IDENTIFICATION CHECK LIST

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

UNKNOWN X-2315 (Formerly Unk X-592
 USAF Cemetery Leyte #1, P.I.)
 Unknown X

Cemetery AGRS Mausoleum Manila, P.I.

Plot 810 HANGER L SAV GRY P 4031
Row Grave

AGRS Mausoleum Manila, P. I.
 29 Nov 47

1. Arrived at ~~cemetery~~ POW Camp, Davao Penal Colony
(Hour) (Date)
2. Place of death Davao, Mindanao, P.I.
(Name of closest town) (Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3. Remains recovered or disinterred by 583rd QM AGRS
(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	/		
Raincoat	/		
Overcoat	/		
Jacket, Field	/		
Jacket, Combat	/		
Mackinaw	/		
Sweater	/		
Jacket, HBT	/		
* Shirt, Wool OD	/		
Undershirt, Wool	/	N	
Undershirt, Cotton	/	O	
Trousers, HBT	/	N	
* Trousers, Wool OD	/	E	

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 / / Est Height 5'7" Est Weight 140 lbs 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, pocks, freckles)

Build _____ (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 (Color, setting, shape) Eyebrows (Color, bushiness, extent across nose)

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

Mouth **Tooth chart attached** 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 **19 1/2"** (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? **Yes** If not, explain
(Yes-no)

9. Remarks **ROI bottle was received with remains, but no I.D. tags nor personal effects found nor any other means of identification. Weight of remains is approximately 8½ 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/ Gerald M. Holtz
(Officer's Name)

Emb Sr. C-063008
Rank Service

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

CERTIFIED TRUE COPY

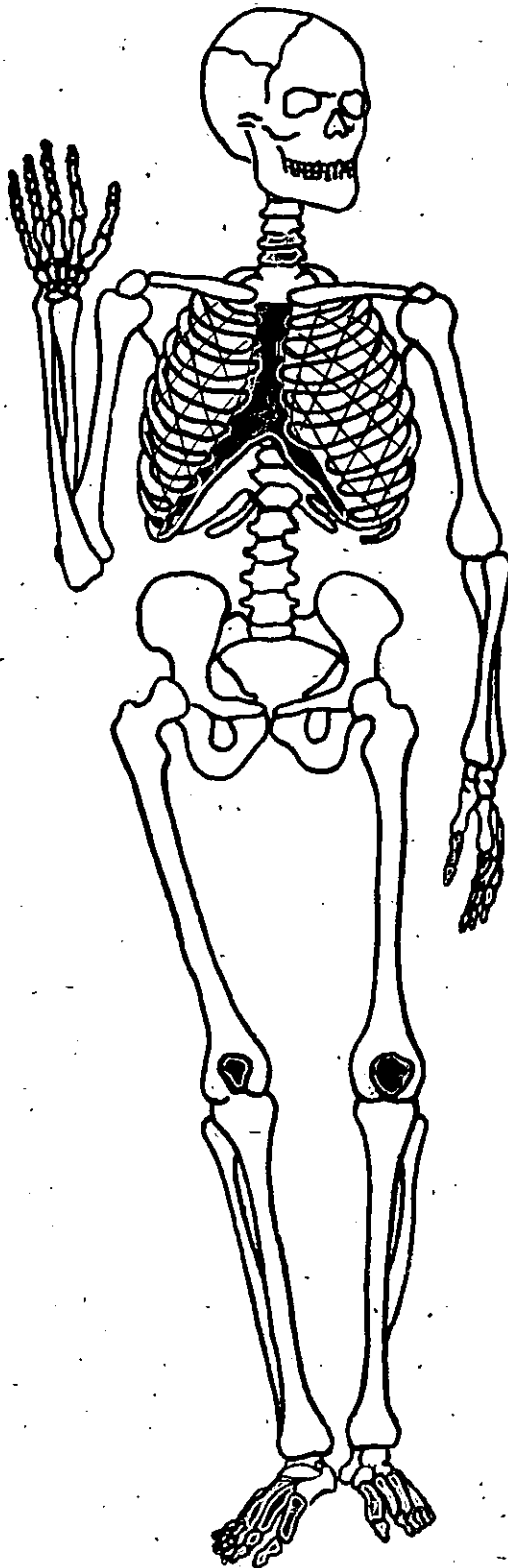
George T. Gamboa
GEORGE T GAMBOA
2d Lt., MAC

29 Nov 47

SKELETAL CHART

X-2315

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



*2 cervical vertebrae
missing*

FMS
CHART "A"

REPORT OF DISINTERMENT FOR IDENTIFICATION

21 October 1947

1. Remains of (Name)

Serial Number

UNKNOWN X-592

Grade

Organization

. Name, Number and Location of Cemetery

Plot

Row

Grave No.

USAF Cemetery Leyte #1, P.I.

8504

2. Date of Disinterment

21 October 1947

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

Original made in Type "C" casket burial. Skeletal remains complete. Substitute tag found on marker coincide with R.O.I. on file. No identification found on remains. No tag found on remains.

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

Substitute tag

On Remains

None

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
PAUL R. NICHOLS, *Inspector*

INSTRUCTIONS FOR PROPER MARKINGS ON DENTAL CHART

1. Give all information and description on dental chart as nearly correct as the condition of the body will allow. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: lost teeth, crowned teeth, bridgework, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

Missing Teeth



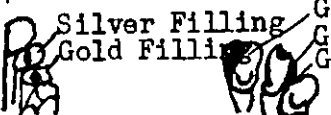
Crowned Teeth



Bridgework



Fillings



Caries (Cavities)

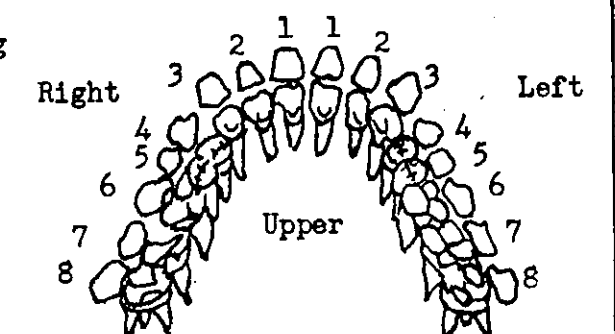
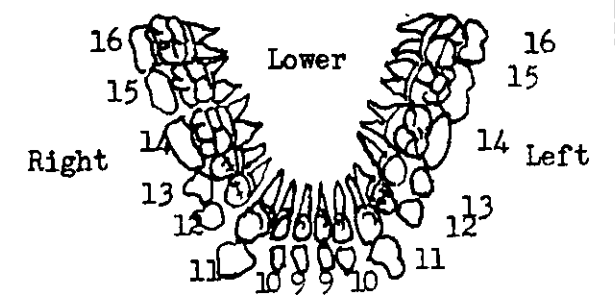
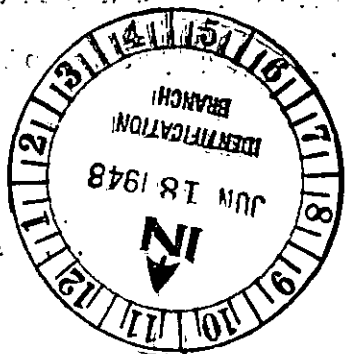



Diagram represents the mouth wide open



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



17-0887-4N

IDENTIFICATION DENTAL CHART

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

14 May 1947

DATE

UNKNOWN X-592

LAST NAME FIRST INITIAL RANK SERIAL NO.

UNIT
POW Camp at Davao Penal Colony,
Davao, Mindanao

ORGANIZATION

USAF Cemetery Leyte #1, P.I. 8504
PLACE OF BURIAL PLOT ROW GRAVE NO.

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

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)

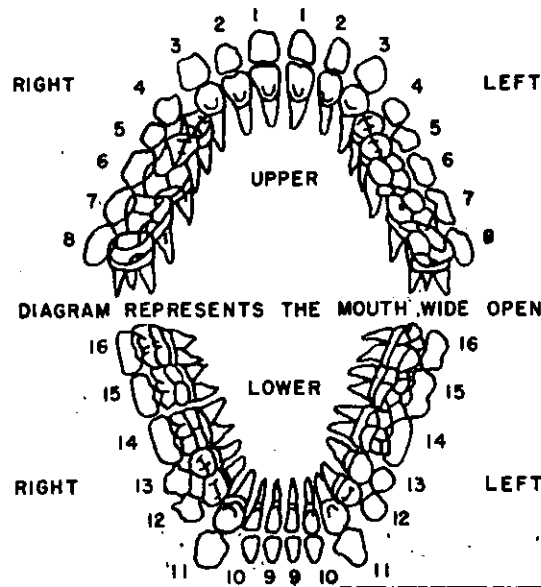
INSTRUCTIONS:

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



REMARKS:

Upper 4 & 5 left, half the teeth gone.

Paul R. Nichols
SIGNATURE OF PERSON WHO PREPARED CHART

Paul R. Nichols, Embalmer
NAME AND RANK TYPED OR PRINTED

USAF Cemetery Leyte #1

PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

William C. Clark
VERIFIED BY GRS OFFICER

WILLIAM C. CLARK, 1st Lt., QMC
NAME AND RANK TYPED OR PRINTED

14 May 1947

DATE

R E S T R I C T E D

HEADQUARTERS
USAF CEMETERY LEYTE NO. I
APO 1000

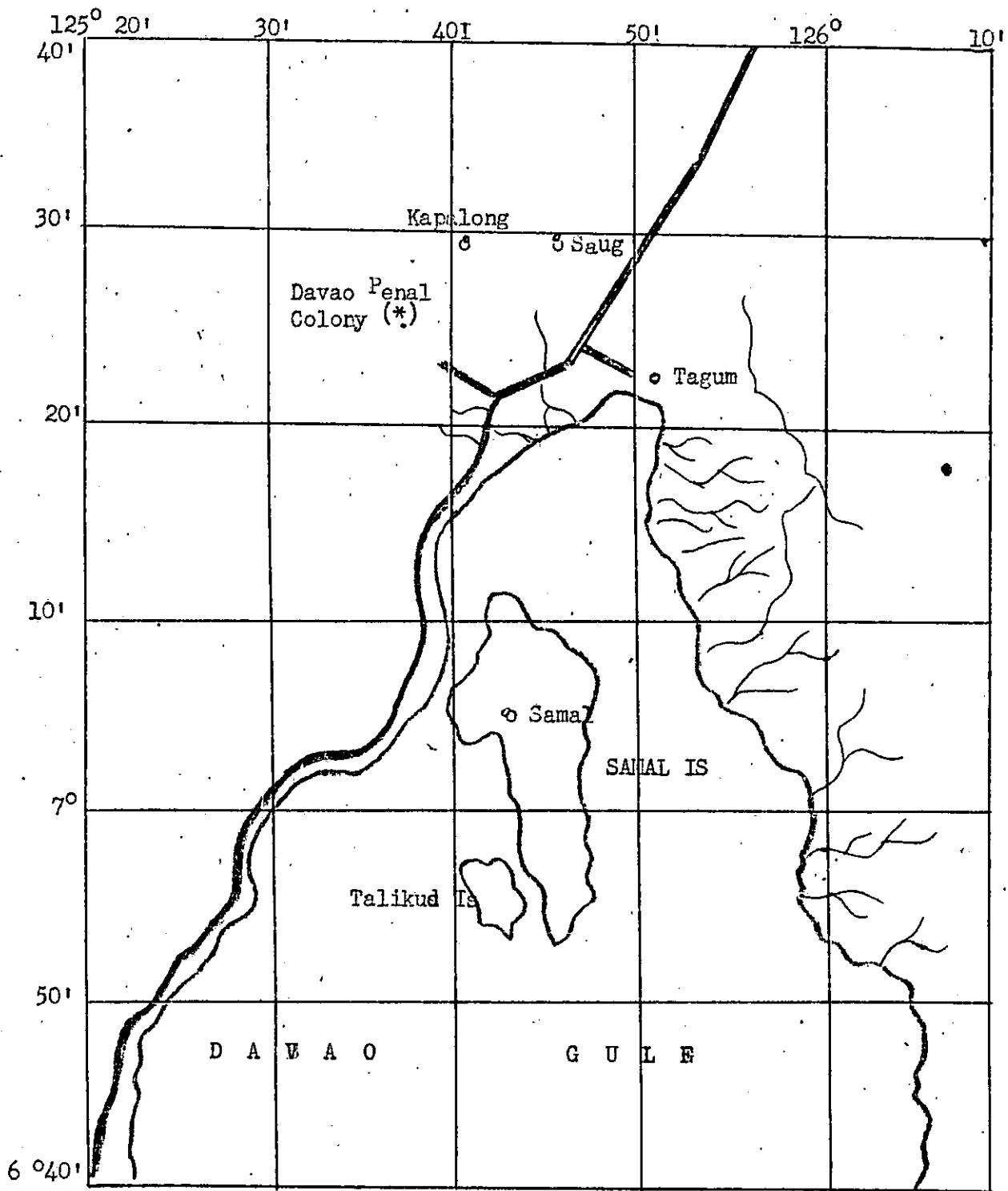
SEARCH AND RECOVERY REPORT
TRIP # 57 (Search #10)

1. TIME AND DATE DEPARTED: 5 April 1947 0900
2. NUMBER OF PERSONNEL IN PARTY: 2
3. TOWN OR BARRIO: Davao Penal Colony
4. PROVINCE OR ISLAND: Davao, Mindanao
5. PERSONS CONTACTED:
 - a. Edilberto C. Rausa *
 - b. _____
 - c. _____
 - d. _____
 - e. _____
6. LOCATION OF REMAINS (GRID COORD.): 7° 24' N 125° 38' E
7. TYPE OF RECOVERY: Disinterment, Dapecol American National Cemetery, 1942
8. NUMBER OF REMAINS RECOVERED: 16 (See Incl #1, grave #1)
9. CONDITION OF REMAINS: See attachments #1 and 2
10. IDENTIFICATION CLUES FOUND WITH REMAINS:
 - a. See attachment #1
 - b. _____
 - c. _____
 - d. _____
 - e. _____
11. PERSONAL EFFECTS FOUND WITH REMAINS:
 - a. See attachment #1
 - b. _____
 - c. _____
 - d. _____
 - e. _____
12. TIME AND DATE RETURNED: 6 April 1947 1800
13. REMARKS:

See Statement

R E S T R I C T E D

Charles H. Dunshee
Search Party Leader Cpl. Dunshee



(*) Location of Remains when recovered Unk. X-592
 Map of Mindanao P.I., Series of 1941 Coast and Geodetic Survey.
 Grid Coord: 7° 24' N- 125° 38' E

REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF JUSTICE
BUREAU OF PRISONS

DAVAO PENAL COLONY
DAVAO

April 7, 1947

TO WHOM IT MAY CONCERN:

This is to certify that on April 6, 1947, three American Soldiers came inside the Colony asking the place of the crashed airplane and also the American National Cemetery. Being the nearest person available, I was ordered by the Superintendent to escort the said soldiers. I brought them first to the place of the crashed airplane, three (3) kilometers away from the central. We located any possible identification of the plane and also its number. We found on the tail a number bearing 44074 and also in one part of the wind is a letter ROLFE.

The following day, two of the Americans came again and I brought them to the American National Cemetery. I brought with me fifteen (15) men to dig up the graves. We have dug around sixteen (16) graves and found bones of the deceased. Some skulls were missing and in one grave, there was only a pair of gloves without any sign of human bones. All in all there were fifteen (15) graves dug that have human bones though most part of it were missing.

In testimony hereof, I affix my signature this 7th
day of April, 1947.

s/ E. C. Rausa
EDILBERTO C. RAUSA
(Employee of Davao Penal Colony, Davao)

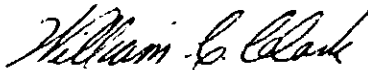
WITNESSES:

S/ D. Hernandez

S/ R. Esteban

S/ Arsenio Plavo

A CERTIFIED TRUE COPY:


WILLIAM C. CLARK
1st Lt., QMC

S T A T E M E N T

Iligan, Lanao
April 29, 1947

SUBJECT: American Graveyard at Davao Penal Colony

TO : Lt. Waple

To the best of my memory, the following was the condition of the American Prisoners Graveyard at Davao Penal Colony in May 1944, when we were moved away.


The Cemetery was located about $\frac{1}{2}$ km. east of the main compound and on the south side of the railroad tracks. At the time of our departure, when the camp was closed, there were twenty seven graves, each marked with a gray wooden cross with the man's name carved into the cross. As you enter the Cemetery through the wooden arch and along the pathway, the graves are to the right and left. All of the bodies were of men who died of sickness or disease except two. These two were killed by the Japanese as follows:

Ensign DANIEL BOONE: Small, slim, bald headed with large nose and wore glasses; killed by Japanese when he attempted to escape in March 1944. He was buried in the Cemetery and as I remember, did carry some keys on a chain. His bones would be small and slight.

Major CHARLES HARRISON, C.W.S., (Leesburg, Virginia): Average sized man. He was captured while attempting to escape and was killed by the Japanese soldiers at the guardhouse at Davao Penal Colony, during the night. They claimed he died of his wounds, but that was impossible, because he was not badly wounded when captured. Date of his death was around May 22, 1944.

I do not remember the names of the other men that died there, but all the names that Lt. Waple already has, sound very familiar to me.

A TRUE COPY:


WILLIAM C. CLARK
1st Lt., QMC

s/ Donald H. Wills
DONALD H. WILLS
Major, Cavalry Res.
O-389373

ATTACHMENT #1

<u>NUMBER</u>	<u>CONDITION OF REMAINS</u>	<u>IDENTIFICATION CLUES</u>
1	Good	* Cross with "Charles F. Harrison, Major, C.W.S. 5-22-44"
2	Good	Upper and lower jaw (Teeth)
3	Good	Lower jaw (teeth) set of keys on chain
4	Poor	Dog tags, "F. B. Howden, Jr 0-311078"
5	Poor	Dog tags, "Wilmer E. Evers, 19006375"
6	Very poor	Nothing, very few bones
7	Very poor	Same as #6
8	Very poor	Same as #6
9	Very poor	Same as #6
10	Very poor	Same as #6
11	Very poor	Same as #6
12	Very poor	Same as #6
13	Very poor	Same as #6
14	Very poor	Same as #6
15	Fair	Dog tags, "John H. McPhee, Sgt, MD, 7031954"
16	Fair	Dog tags, "Lloyd W. Rogers, Jr 0-890143" Back of tag, "2084358", Lower jaw (teeth)

(SEE ATTACHMENT NUMBER TWO)

A TRUE COPY:

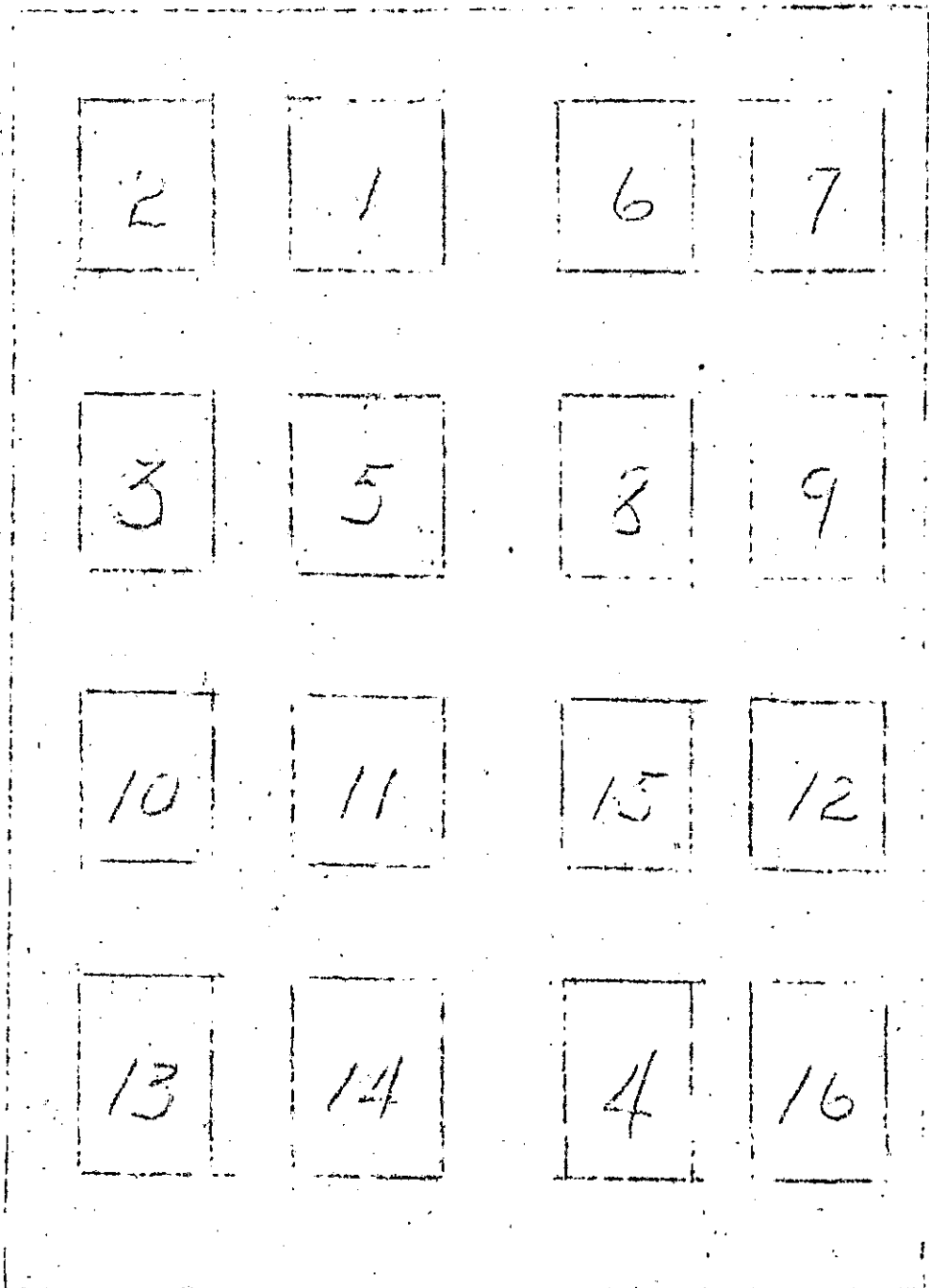


WILLIAM C. CLARK
1st Lt., QMC

ATTACHMENT #2

MAP SKETCH OF DISINTERMENT OF DAVAO PENAL COLONY, DAVAO MINDANAO

(Numbers indicate the order the remains were disinterred)



CERTIFIED TRUE COPY:

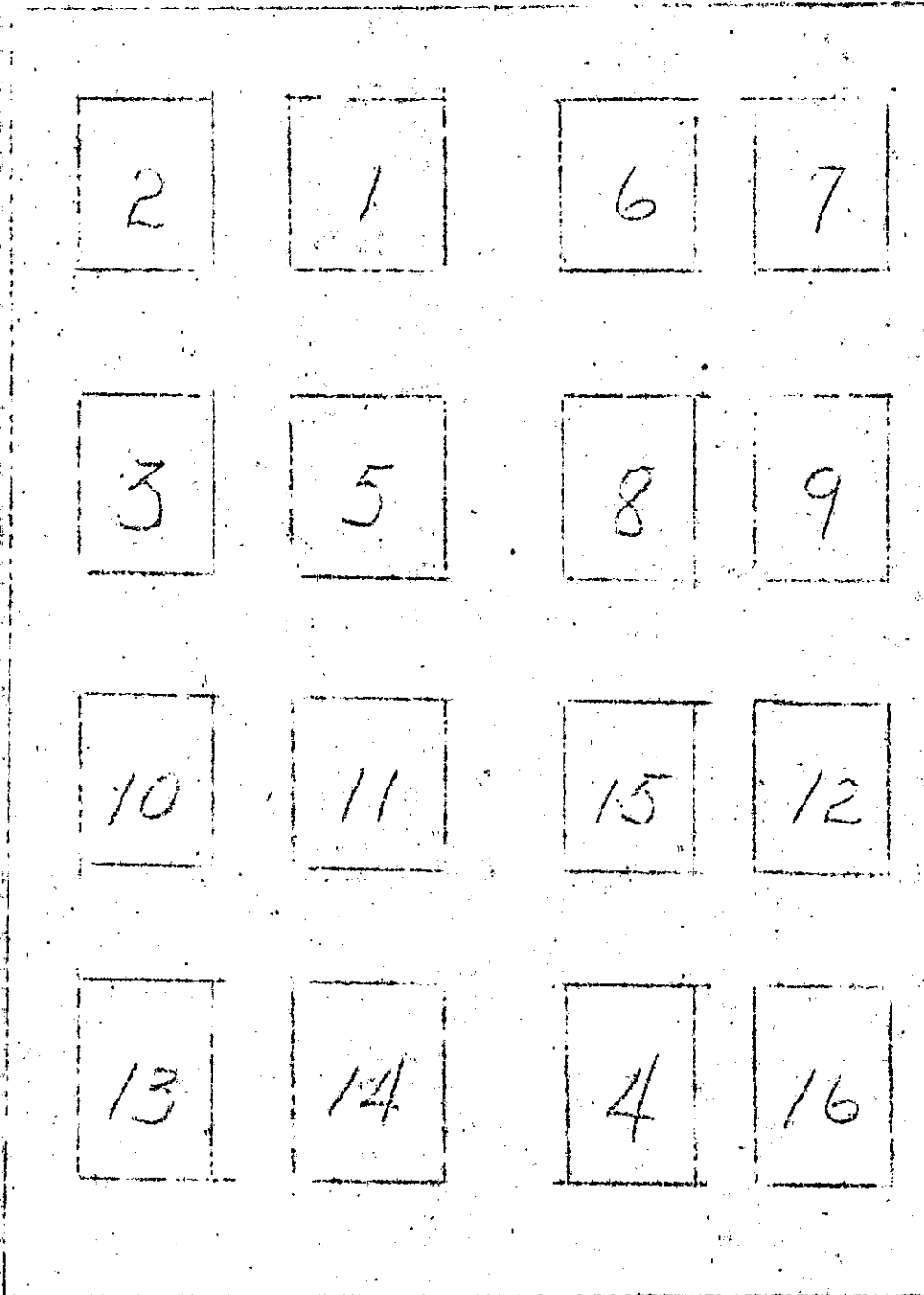
William C. Clark

WILLIAM C. CLARK
1st Lt., QMC

ATTACHMENT 2

MAP SKETCH OF DISINTERMENT OF DAVAO PENAL COLONY, DAVAO
MINDANAO

(Numbers indicate the order the remains were disinterred)



CERTIFIED TRUE COPY:

William C. Clark

WILLIAM C. CLARK
1st Lt., QMC