

FILE IDENTIFICATION TOPPER

FILE NUMBER

2932nd Legat # 7-569 (also Manila X-2355)

SUBJECT

OMGT 293  
GHS Far East

10 August 1949

SUBJECT: Identification of World War II Deceased

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

1. Reference is made to the following Unknown remains now stored at AGRS Mausoleum, Manila, P.I.:

Unknown Y-177  
Unknown Y-2355 (formerly Unk. Y-564, USAF Com., Leyte #1, P.I.)  
Unknown Y-3224 (formerly Unk. Y-89, USAF Com., Santa Barbara #1, Luzon, P.I.)

2. Subject cases have been reviewed and this Office approves the classification of the above listed Unknowns as unidentifiable.

FOR THE ACTING THE QUARTERMASTER GENERAL:

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

T. FIELDS:jdk  
SALSER  
JW

REB

cc: Administrative Section  
cc: Cinco

COMBAT 293  
CIS War East

2 August 1949

SUBJECT: Identification of World War II Deceased

TO : Commanding General  
Philippine Command  
APO 707, c/o Postmaster  
San Francisco, California  
ATTN: AOPS, PHILIPPINE COM

1. Reference is made to the following Unknown remains now stored at AGMP Mausoleum, Manila, P.I.:

Unknown T-177  
Unknown T-2355 (formerly Unk. T-564, USAF Com., Leyte (I, P.I.))  
Unknown T-3224 (formerly Unk. T-89, USAF Com., Santa Barbara (I, Luzon, P.I.))

2. Subject cases have been reviewed and this Office approves the classification of the above listed Unknowns as unidentifiable.

FOR THE ACTING THE QUARTERMASTER GENERAL:

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

T. A. Fields:jdk  
Salser  
JW

cc: Administrative Section  
cc: CinCfe

REB

COPY

HEADQUARTERS  
PHILIPPINES COMMAND  
UNITED STATES ARMY

GSGR.293.9

APD 707  
21 JUL 1949

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 QMGM 293, GRS (Far East), dated 17 September 1948, subject: Resolution of Cases of Unidentified Deceased, the following Unknown remains, presently stored at AGFS Mausoleum, Manila, P.I., have been processed by the Central Identification Laboratory and considered "Unidentifiable" by reason of lack of sufficient identifying data:

UNKNOWN	Y-177	AGFS	Mslm	UNKNOWN	Y-1639	AGFS	Mslm
"	X-439	"	"	"	X-1656	"	"
"	X-444	"	"	"	X-1736	"	"
"	X-617	"	"	"	X-2355	"	"
"	X-627	"	"	"	X-2424	"	"
"	X-637	"	"	"	X-2427	"	"
"	X-722	"	"	"	X-3153	"	"
"	X-1127	"	"	"	X-3156	"	"
"	X-1153	"	"	"	X-3164	"	"
"	X-1219	"	"	"	X-3224	"	"

2. Forwarded herewith, for your consideration, are new QMC Forms 1044 for the above-mentioned Unknowns.

FOR THE COMMANDING GENERAL:

JOHN A. MARZAL  
1st Lt., AGD  
Asst Adj Gen

20 Incls:  
QMC Forms 1044 w/certificates  
of Unidentifiability

COPY

BW BHR

1 /div /drs Interred 20 J 1949  
L 7 54 Ft. McKinley  
*Carl R. H. Mark*  
CARL R. H. MARK  
**DISINTERMENT DIRECTIVE**

SECTION A -  
NAME AND BURIAL LOCATION OF DECEASED  
Cemetery Superintendent  
DIRECTIVE NUMBER  
7740 00493  
DATE  
15 05 48  
DAY MONTH YEAR

NAME  
UNKNOWN X-000564  
SERIAL NUMBER  
RANK  
ARM  
Q  
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  
8488 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  
UNKNOWN X-564  
UNKNOWN X-2355 (MAUS)  
SERIAL NUMBER  
RANK  
DATE OF DEATH  
DATE DISINTERRED  
27 Sept 1948

IDENTIFICATION TAG ON  
 REMAINS  
 MARKER  
ORGANIZATION  
UNKNOWN  
RELIGION  
IDENTIFICATION VERIFIED BY  
GEORGE SIMONEAU  
Embalmers NAME AND TITLE

**SECTION D - PREPARATION OF REMAINS FOR SHIPMENT**

NATURE OF BURIAL  
SHELTER HALF  
CONDITION OF REMAINS  
SKLETAL

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES /  
Two identification tags show UNKNOWN X-2355 MAUS. No.

REMAINS PREPARED AND PLACED IN CASKET

DATE 27 Sept 1948 BY GEORGE SIMONEAU

CASKET SEALED BY  
GEORGE SIMONEAU  
EMBALMER (Signature)  
*George Simoneau*  
GEORGE SIMONEAU

CASKET BOXED AND MARKED  
DATE 27 Sept 48 BY HORACE L ALLISON, Sgt, INF  
SHIPPING ADDRESS VERIFIED BY  
CHARLES R. BATES, 1st Lt, USAFR

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

*Charles R. Bates*  
CHARLES R. BATES, 1st Lt, USAFR  
SIGNATURE OF GRS INSPECTOR

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.  
5 AUG 1948  
REGISTRATION  
BRANCH  
ADJUTANT

# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

FROM AGRS Mausoleum		TO Fort McKinley Military Cemetery	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER <i>[Signature]</i>	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Casey Mark</i>	DATE 20 JUL 1949

## 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 <i>[Signature]</i>	DATE	SIGNATURE OF RECEIVER	DATE

## 5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE MILITARY SHIP (LINE ISLANDS)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER FORT MC KINLEY CEMETERY	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

REPAIRATION RECORDS BRANCH

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
PHILCOM ZONE  
APO 900

12 July 1949  
Date

SUBJECT: Unidentifiable Remains

TO : The Quartermaster General  
Washington 25, D. C.  
Attn: Memorial Division

The records pertaining to Unknown X- 564, Plot \_\_\_\_\_,  
Row \_\_\_\_\_, Grave 6488, USMC USMC Gen. Leyte #1 have  
been reviewed and it is the opinion of this office that insufficient  
evidence is available to establish the identity of this deceased,  
and that these remains should be classified as unidentifiable.

FOR THE COMMANDING OFFICER:

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

Attach: Form 1044

Received 2 Aug 49 OQMG  
Not identifiable from  
information presently  
available W. A. Fields  
8 Aug. 49

File # 14'

**IDENTIFICATION DATA**

1. REMAINS OF UNKNOWN UNKNOWN X-2355 (Formerly UNK X-564 Leyte #1)				2. DATE OF REPORT 14 July 49	
3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	802	A	240	DISINTERMENT	REINTERMENT

**PHYSICAL DESCRIPTION**

8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT UTD	10. COLOR OF HAIR UTD	11. RACE UNKNOWN
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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

UTD

14. WAS BODY BURNED? TO WHAT EXTENT?

YES  NO

15. WAS BODY MANGLED? TO WHAT EXTENT?

YES  NO

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

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

**"UNIDENTIFIABLE"**

**"BY REASON OF LACK OF SUFFICIENT VERIFYING DATA"**

*Incl. # 14<sup>2</sup>*



18. TOOTH CHART		TOP VIEW	SIDE VIEW
<b>MISSING TEETH:</b> ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED THUS:			
<b>CROWNED TEETH:</b> BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:			
<b>BRIDGE WORK:</b> BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:			
<b>FILLINGS:</b> DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:			
<b>CARIES (Cavities):</b> 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
M A X I L L A								M I S S I N G							
Side Views								Side Views							
Top Views								Top Views							
M A N D I B L E								M I S S I N G							
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."

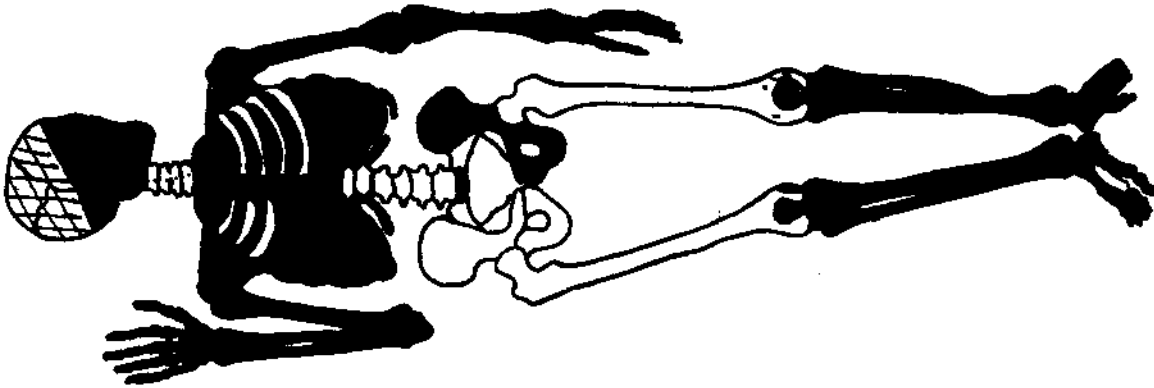
No loose teeth present with remains.

"UNIDENTIFIED"

*J. J. McDermott*  
 J. J. McDERMOTT  
 Laboratory Officer, CIP

BY REASON OF LACK OF IDENTIFYING DATA

19. BLACK OUT PARTS OF BODY NOT COVERED



20.

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

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

\_\_\_\_\_  
 SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

No ROI, identification tags or personal effects found with remains.

Estimated weight of remains - 2 lbs.

**"UNIDENTIFIABLE"**  
**"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"**

I CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS OF DECEASED AND THAT ALL RESULTING INFORMATION HAS BEEN  
 RECORDED TO THE BEST OF MY KNOWLEDGE

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

J. J. McDERMOTT  
 Laboratory Officer, CIP

SIGNATURE

*J. J. McDermott*

## IDENTIFICATION CHECK LIST

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

(Formerly UNK X-564 USAF  
 Unknown X-2355 Gen Leyte #1, P.I.)  
 Cemetery AGRS Mausoleum, Manila, P.I.  
 Plot 802 Row A Grave 240

AGRS Mausoleum, Manila, P.I.

1. Arrived at ~~sanctuary~~ 1 Dec 47  
 Approx (Hour) 18 kil (Date) East of  
Concepcion, Negros, P.I.
2. Place of death Concepcion, Negros, 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) <u>/</u>		
Raincoat	<u>/</u>		
Overcoat	<u>/</u>		
Jacket, Field	<u>/</u>		
Jacket, Combat	<u>/</u>		
Mackinaw		<u>N</u>	
Sweater		<u>N</u>	
Jacket, HBT		<u>E</u>	
* Shirt, Wool OD		<u>/</u>	
Undershirt, Wool		<u>/</u>	
Undershirt, Cotton		<u>/</u>	
Trousers, HBT		<u>/</u>	
* Trousers, Wool OD		<u>/</u>	

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 \_\_\_\_\_ 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, 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 ..... Eyebrows .....  
 (Color, setting, shape) (Color, bushiness, extent across nose)

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

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

Teeth **No teeth.** .....  
 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw ..... Circumference of ~~neck~~ **Skull** ..... **skull fractured.** .....  
 (Large, small, normal) (Hat band)

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

Shoulders ..... Arms .....  
 (Broad, straight, small, rounded) (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 ..... Circumcision ..... Pubic Hair .....  
 (Quantity and extent of hair) (Yes-no) (Color)

Hernioplasty .....  
 (Yes-no; location)

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

Feet ..... Toes .....  
 (Size, corns, callouses, flat) (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 .....

No Maxilla, no mandible

9. Remarks No personal effects, no ID tags present. ROI bottle found with remains. Estimated weight of remains two (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/ William A. Johnson

(Officer's Name)

SP-6 D-234835

Rank

Service

OIP Laboratory, Manila, P.I.

(Organization)

1 Dec 47

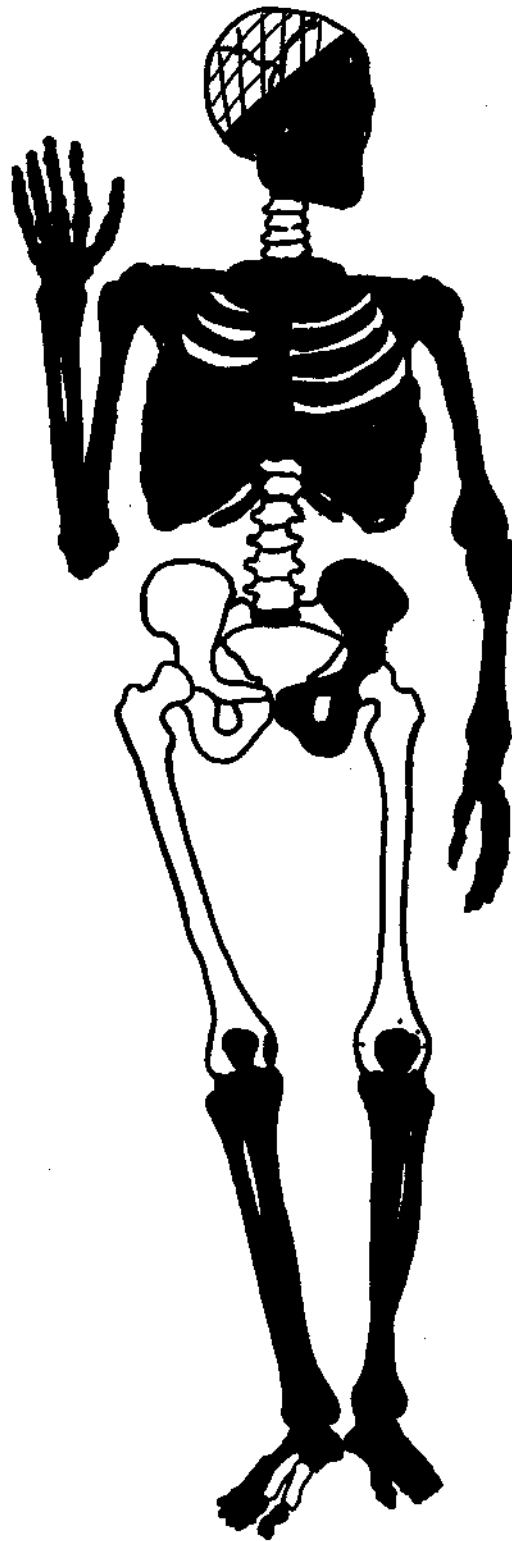
CERTIFIED TRUE COPY:

*George T. Gamboa*  
GEORGE T. GAMBOA  
2d Lt., MAO

C O

# SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY) X-2352



*7 ribs fragments*

*JMS*  
CHART "A"

REPORT OF DISINTERMENT FOR IDENTIFICATION

21 October 1947

1. Remains of (Name) WILSON X-564	Serial Number -
--------------------------------------	--------------------

Grade -	Organization -
------------	-------------------

Name, Number and Location of Cemetery USAF Cemetery Leyte I., I.I.	Plot	Row	Grave No. 1488
---	------	-----	-------------------

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. Substitute tags on remains and on marker coincide with R.O.I. on file. Skeletal remains incomplete. Maxilla fragmented. Missing: Mandible, clavicle, femur, scapula, radius, ulna, one hip bone, one humerus, knee bone, tibia and fibula. No identification clues found with remains.

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

Substitute tag

On Remains

Substitute tag - R.O.I. placed in bottle

What Identification Used Upon Reinterment: On Marker

Field in Field Tongue

On Remains

Substitute tag

5. Signature of Officer Supervising Disinterment and Reinterment.

*Paul R. Nichols*  
PAUL R. NICHOLS, Embalmer



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)

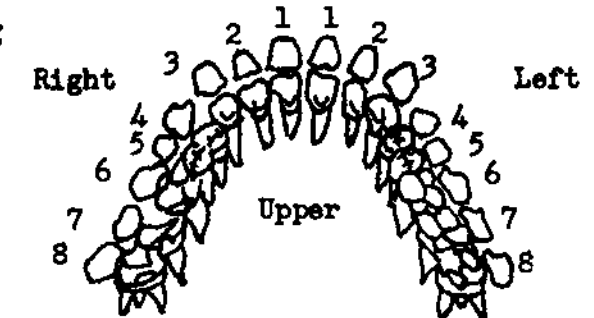
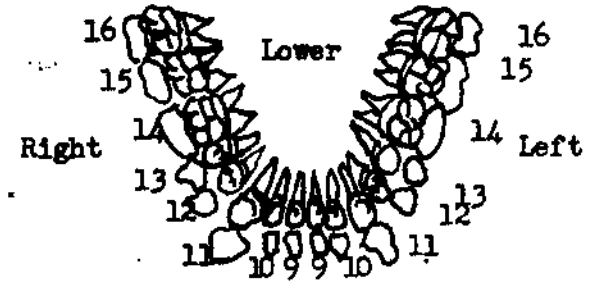
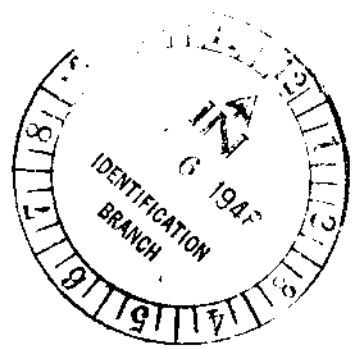


Diagram represents the mouth wide open



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

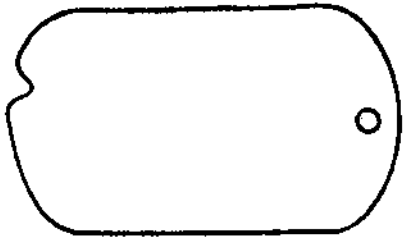


N7-0887E-5

MAY 2 1948

RESTRICTED

U 5482

WD CMC FORM 1042 (Rev. 1 Apr. 1946) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)			STORAGE	DATE OF REPORT
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.			SERIAL No.	
		NAME (Last, first, middle initial) UNKNOWN X-2355 (Formerly UNK X-564 USAF Cemetery Leyte #1, P.I.)			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 Approx. 18 Kil. East of Concepcion, Negros, PI		CAUSE OF DEATH K I A			DATE OF DEATH Unknown	
EMERGENCY ADDRESSEE (Name, relationship, and address) Unknown						
IDENTIFICATION TAGS FOUND ON BODY (I, S, 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 GRADE 2 Dec 47	HOUR 1000	BURIED IN (Shroud, blanket, or name of other) STORED Basket	TYPE OF GRAVE MARKER None	PLOT No. RANGER 802	ROW No. BAY A	GRAVE No. C.N.P. 240
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. 8488
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY			
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes					
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) UNKNOWN X-2357			RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 242
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-2353			RANK	SERIAL No.	ORGANIZATION	GRAVE No. 238
SIGNATURE OF PERSON PREPARING REPORT R. R. ROTERIO, Pvt.			SIGNATURE OF GRS OFFICER VERIFYING REPORT D. 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

827

**RESTRICTED**

**Section 3.—UNIDENTIFIED REMAINS.**

**INSTRUCTIONS:**


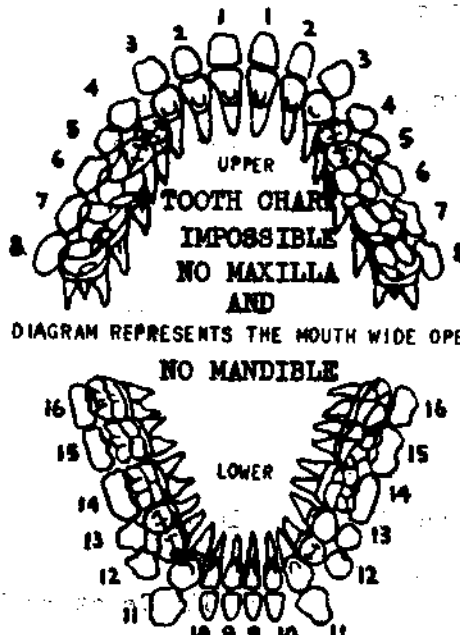




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

(b) A fingerprint, or prints, are the most valuable of all clues. Inprint 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.

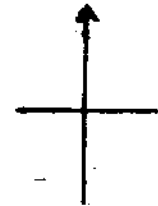
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
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WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
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**OTHER IDENTIFICATION CLUES**

FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER TOOTH CHART IMPOSSIBLE NO MAXILLA AND NO MANDIBLE 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 accomplished.**

**3 FEB 1948**

**RESTRICTED**

U 5482  
MU 8488

WD QMC FORM 1042  
(Rev. 1 Apr. 1946)  
(Supersedes GRS Form 1)

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

DATE OF REPORT  
20 February 1947

Imprint Identification Tag If Possible.  
DO NOT TYPE

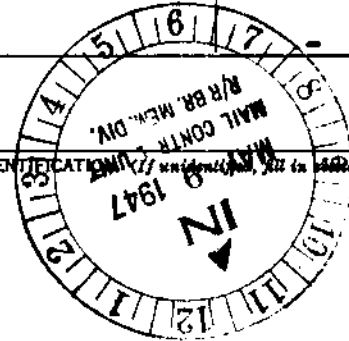


**Section 1.—IDENTIFICATION.**

NAME (Last, first, middle initial)		SERIAL No.
UNKNOWN X-564		-
GRADE	ORGANIZATION	BRANCH OF SERVICE
-	-	-
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
-	-	-

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
Approx. 18 Kilometers East of Concepcion, Negros P.I.	KIA	
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 (See instructions on reverse)
None	
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	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE No.
20 Feb. '47	1400 hrs	Casket "C" Type	Reg. Cross			8488

WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE	PLOT NO.	ROW NO.	GRAVE No.
No	Grid Coord: 10°42' North Lat., 123°10 East Long Scale 1:250,000, AAF AERO. Approach Chart.			Isolated Burial

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)	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 - 563	-	-	-	8487
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
UNKNOWN X - 565	-	-	-	8489

SIGNATURE OF PERSON PREPARING REPORT Cpl. Jack G. Sigle, G.R.S.	SIGNATURE OF GRS OFFICER VERIFYING REPORT for CHARLES G. WAPLE, JR., 2nd Lt., QMC
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**DISTRIBUTION OF REPORT:** Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.

*Incl # 27*

**RESTRICTED**



# IDENTIFICATION DENTAL CHART

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
















19 February 1947  
DATE

UNKNOWN X-564			
LAST NAME	FIRST	INITIAL	SERIAL NO.
Approx 18 Kilometers East of Concepcion, Negros, P. I.		USAF Cemetery Leyte #1, P. I.	
PLACE OF DEATH	PLACE OF BURIAL	PLOT	GRAVE NO.
		ROW	8488

	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
	RIGHT				UPPER TEETH						LEFT						
TYPE																	TYPE
LOCATION																	LOCATION
	M		I		S		S		I		N		G				
	INSIDE — LOOKING OUT																

	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16	
	RIGHT				LOWER TEETH						LEFT						
TYPE																	TYPE
LOCATION																	LOCATION
	M		I		S		S		I		N		G				

## 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)

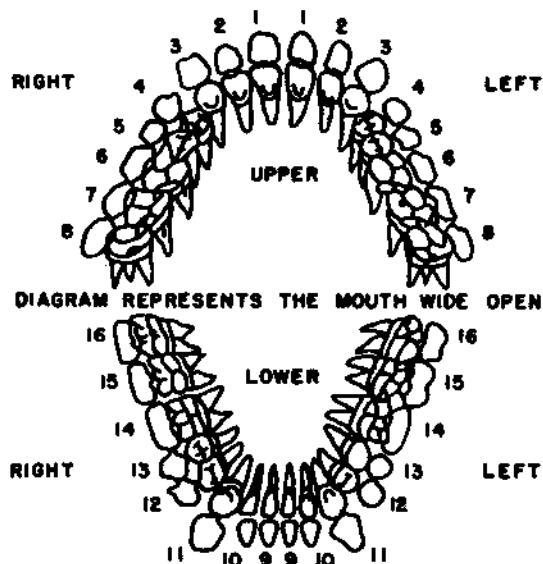
**INSTRUCTIONS:**

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.



**REMARKS:**

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

VERIFIED BY GRS OFFICER  
Charles G. Waple, Jr.  
CHARLES G. WAPLE, Jr., 2nd Lt., QMC  
NAME AND RANK TYPED OR PRINTED

19 February 1947  
DATE

SEARCH AND RECOVERY REPORT

for

UNKNOWN X-564

These remains were recovered at a distance of 20 yards from Unknown X-563. For more information see Search and Recovery Report for Unknown X-563.

The remains were carefully searched for more identifying data but none was found. We did find pieces of cartridge belt, combat shoes, and buckles. I then brought the Filipino guides back to Concepcion and returned to the FS boat at 1230 hours on the same day.

*Lawrence R. Tomei*

Pvt. Lawrence R. Tomei



January 29, 1947

S T A T E M E N T

I, Mamerto Jonata say that I saw two American bodies lying on the trail to Danao in August 1945. Since they were in a decomposing stage I didn't bury them cause the smell was strong. They wore fatigues and combat boots.

It is eighteen kilometers from Concepcion.

/s/ Mamerto Jonata

WITNESS:

/s/ Pvt Lawrence Tomei

I SWEAR THAT THE FOLLOWING STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

A TRUE COPY:

Charles G. Waple, Jr. (Handwritten signature)  
CHARLES G. WAPLE, JR  
2nd Lt., Q. M. C.