

FILE IDENTIFICATION TOPPER

FILE NUMBER

*292 unk key #1 X-565 (also  
manila X-2356)*

SUBJECT

AIRMAIL

QMSIT 293

10 March 1950

GRS Far East

*293 Unk P.I.R-2236 (maus manila)*

SUBJECT: Identification of World War II Deceased

To: Commanding Officer  
American Graves Registration Service  
Philcom Zone  
APO 900, c/o Postmaster  
San Francisco, California

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

- Unknown X-1496, Unit 2, Page 17
- " X-2236 (formerly X-557, USAF Cemetery #1, Leyte)  
Unit 2, Page 13
- " X-2350 (formerly X-565, USAF Cemetery #1, Leyte)  
Unit 2, Page 13

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

FOR THE QUARTERMASTER GENERAL:

T.A.Fields:lrc  
Saiser  
JW  
cc-- Administrative Section  
cc--Cinefe

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

JWM  
TEC

*Copy 293 Unk P.I.R-565 (Fugate #1)*

AIRMAIL

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
PHILCOM ZONE

GRZ 293

AFD 900  
23 FEB 1950

SUBJECT: Unidentifiable Remains

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

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

UNKNOWN X-1496 AGRS Malm  
X-1826  
X-2236

UNKNOWN X-2344 AGRS Malm  
X-2356  
X-3454

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

FOR THE COMMANDING OFFICER:

6 Incls  
QMC Forms 1044 w/Certificates  
of Unidentifiability

JOHN SHYPULA  
1st Lt., Infantry  
Adjutant

QMGOD 332.5  
Kansas City

2 November 1949

SUBJECT: Report on Certain Unknowns

TO: Commanding Officer  
Quartermaster Activities  
Kansas City Records Center (AGS)  
Kansas City, Missouri  
ATTENTION: Effects Quartermaster

1. Reference your inquiry concerning present status of the following named Unknowns, you are advised that identification has not yet been established:

X-590	AGRS	Manusclown,	Manila,	P. I.
X-1496	"	"	"	"
I-2224	"	"	"	"
I-2225	"	"	"	"
I-2243	"	"	"	"
I-2263	"	"	"	"
I-2356	"	"	"	"
X-3740	"	"	"	"
X-4155	"	"	"	"
X-4157	"	"	"	"
I-4213	"	"	"	"
I-4320	"	"	"	"
X-5022	"	"	"	"
X-5051	"	"	"	"
X-5082	"	"	"	"

2. Correspondence from the Bureau regarding these Unknowns is returned herewith.

BY COMMAND OF MAJOR GENERAL FELLOMAN:

1 Incl:  
Correspondence

WILLIAM F. DONLON  
Major, GSC  
Field Service Division

X QMGOD 295, UNKNOWN X-2356 MANILA P. I. (AGRS MAUS)

DEPARTMENT OF THE ARMY  
KANSAS CITY QUARTERMASTER DEPOT  
ARMY EFFECTS BUREAU  
601 HARDESTY AVENUE  
KANSAS CITY 1, MISSOURI

IN REPLY REFER TO QMDKG 890814

HCC/ns  
8 August 1949  
DATE

SUBJECT: Disposal of Personal Effects

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

1. Personal effects found on remain<sup>s</sup> interred as Unknown X-2356  
Plot Unk, Row \_\_\_\_\_, Grave \_\_\_\_\_, ~~WSSC~~ AGRS Mausoleum,  
Manila, P. I. have been held at this Bureau as of 28 July 1949

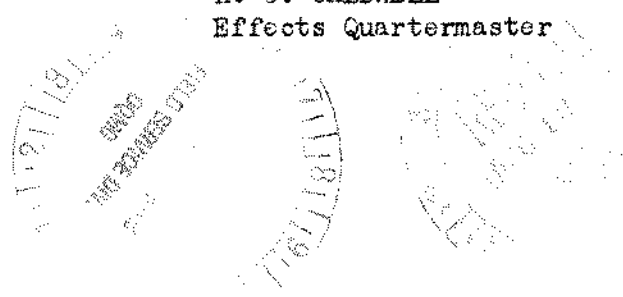
2. Bureau inspection of the effects has been made and the following description furnished for reference:

One yellow metal ring with cameo setting, band  
cut in center

3. It is requested that this Bureau be informed whether or not  
the above listed Unknown decedent has been officially identified.

FOR THE COMMANDING OFFICER:

H. O. CALDWELL  
Effects Quartermaster



/ars /div 1		Interred 20 March 1950 L 12 133 Ft. McKinley		DISINTERMENT DIRECTIVE <i>Carl R. H. Mark</i> CARL R. H. MARK Cemetery Superintendent						
		SECTION A— NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER 7740 00494				
NAME		SERIAL NUMBER		RANK		ARM		DATE		
UNKNOWN		X-000565				Q		15   05   48 DAY   MONTH   YEAR		
CEMETERY							DISPOSITION OF REMAINS			
USAF CEMETERY LEYTE NO 1							0		7701   80 CODE   DIST. PT.	
PLOT		ROW		GRAVE		COUNTRY		CAUSE OF DEATH		
				8489		PHILIPPINE ISLANDS		6		
SECTION B — CONSIGNEE AND NEXT OF KIN										
NAME AND ADDRESS OF CONSIGNEE					NAME AND ADDRESS OF NEXT OF KIN					
FORT MC KINLEY CEMETERY MANILA, PHILIPPINE ISLANDS (BY ADMINISTRATIVE ORDER)										
SECTION C — DISINTERMENT AND IDENTIFICATION										
NAME		SERIAL NUMBER		RANK		DATE OF DEATH		DATE DISTINTERRED		
UNKNOWN X-565 UNKNOWN X-2356 (MAUS)								37 Sept 1948		
IDENTIFICATION TAG ON		ORGANIZATION		RELIGION		IDENTIFICATION VERIFIED BY				
<input checked="" type="checkbox"/> REMAINS <input type="checkbox"/> MARKER		UNKNOWN				PERRY S. WHITE Embalmer NAME AND TITLE				
SECTION D — PREPARATION OF REMAINS FOR SHIPMENT										
NATURE OF BURIAL					CONDITION OF REMAINS					
SHALLOW GRAVE					SKELETAL					
OTHER MEANS OF IDENTIFICATION										
MINOR DISCREPANCIES /										
Two identification tags read MAUS UNKNOWN X-2356										
REMAINS PREPARED AND PLACED IN CASKET										
DATE		BY		PERRY S. WHITE						
27 Sept 1948				EMBALMER (Signature) <i>Perry S. White</i> PERRY S. WHITE						
CASKET SEALED BY				SHIPPING ADDRESS VERIFIED BY						
PERRY S. WHITE				TEOFILO M. AMORAN, 1st Lt, INF						
CASKET BOXED AND MARKED				DATE 27 Sept 48 BY HORACE E. ALLISON, Sgt, INF						
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.										
						<i>Teofilo M. Amoran</i> TEOFILO M. AMORAN, 1st Lt, INF SIGNATURE OF GRS INSPECTOR				
1 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 <i>Charles Mark</i>	DATE MAR 20 1950

### 2. SHIPPED

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

### 3. SHIPPED

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

### 4. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>CHAMBERLAIN</i>	DATE	SIGNATURE OF RECEIVER	DATE

### 5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE (BY VEHICLE ORDER) MILITARY SHIPMENT BOARD		NAME OF CONVOYER	
SIGNATURE OF SHIPPER LOUIS MC KINLEY CRAWFORD	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

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
PHILRYCOM SECTOR

CRHM/JGS/gyd\*

GSQM 293

*3*  
*Unk X- 3-65- P.I. Leyte #1*  
707  
20 February 1948

SUBJECT: Transmittal of Personal Effects

TO : Commanding Officer, Central Identification Point, APO 707

1. Forwarded herewith is one (1) gold ring which was found ten (10) yards from Unknown X-565, USAF Cemetery Leyte #1.

2. Acknowledgement of receipt is requested by indorsement hereon.

BY ORDER OF COLONEL MURPHEY:

*Harold Reverski*  
HAROLD F. REVERSKI  
Lt. Col., USAF  
Executive

1 Incl:  
a/s

1st Ind

ASR/fgj

HEADQUARTERS, AGRS CENTRAL IDENTIFICATION POINT, APO 707, 24 Feb 48

TO: Commanding Officer, American Graves Registration Service,  
PHILRYCOM Sector, APO 707

Receipt acknowledged.

*Andrew Robson*

ANDREW S. ROBSON  
Capt., QM-Res  
Central Identification Point

1 Incl: w/d

*File - 25 Feb 48 - Call*



HEAD QUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
PHILCOM ZONE

APO 900

21 February 1950  
(Date)

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 565, Plot \_\_\_\_\_,  
Row \_\_\_\_\_, Grave 8489, USMC USAF Cem., Leyte #1, P.I., have  
been reviewed and it is the opinion of this office that insufficient  
evidence is available to establish the identity of this decedent,  
and that these remains should be classified as unidentifiable.

FOR THE COMMANDING OFFICER:

Incl:  
Form 1044

  
W. B. McNEEMAR  
Captain, QMC  
Chief, Records Branch

Received 7 Mar 1950 0000  
Not identifiable from V.A. Fields ID  
information presently 8 Mar 1950  
available

## IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-2356 (Formerly Unk X-565 USAF Cemetery Leyte #1, P.I.)				2. DATE OF REPORT 21 February 1950	
3. NAME OF CEMETERY  AGRE MAUSOLEUM, MANILA, P.I.	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	HANGER 802	BAY A	CRYPT 241	DISINTERMENT	REINTERMENT
PHYSICAL DESCRIPTION					
8. ESTIMATED WEIGHT U T D	9. ESTIMATED HEIGHT 5' 7"	10. COLOR OF HAIR U T D		11. RACE U T D	
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS  N O N E					
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES  U T D					
14. WAS BODY BURNED?		TO WHAT EXTENT?			
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
15. WAS BODY MANGLED?		TO WHAT EXTENT?			
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS  N O N E					
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)  N O N E					

TOOTH CHART

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



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



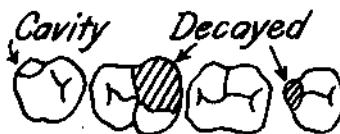
**BRIDGE WORK:** BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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



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



RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
								<del>1</del>	<del>2</del>		<del>4</del>	<del>5</del>			<del>8</del>
Side Views								Side Views							
UPPER								UPPER							
LOWER								LOWER							
Side Views								Side Views							
<del>16</del>	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

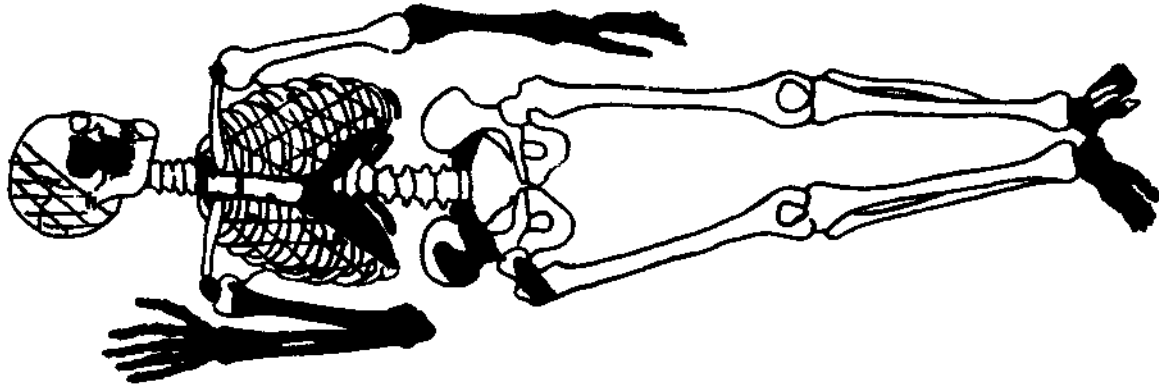
**DENTURES (Plates):** DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAINING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

R-15 full white gold crown.

*Paul R. Nichols*

PAUL R. NICHOLS  
Chief, Identification Section

19. BLACK OUT PARTS OF BODY NOT RECOVERED



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 ID tags, burial bottle, personal effects, or other means of identification found with remains.

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

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION  
PAUL R. NICHOLS  
Chief, Identification Section

SIGNATURE

X-2356

# 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-2356 (Formerly Unk  
X-565 USAF Comd/ Leyte #1, P.I.)

1 Dec 47

DATE

Unknown  
RANK

Unknown  
SERIAL NO.

Unknown

Unknown

15 Miles North <sup>UNIT</sup> West of Lahug AGRS Mausoleum ORGANIZATION

Air Base, Cebu, P.I.  
PLACE OF DEATH

Manila, P.I.  
PLACE OF BURIAL

802  
PLOT

A  
ROW

241  
GRAVE NO.

STORAGE

NUMBER

BAR

GOLF

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

\* 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

## KEY OF SYMBOLS TO BE USED ON ABOVE CHART

<p><b>SYMBOLS IN WHOLE BOX</b></p> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin-right: 10px; text-align: center; line-height: 30px;">X</div> <p>EXTRACTED</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin-right: 10px; text-align: center; line-height: 30px;">O</div> <p>CAVITY INDICATE LOCATION</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 60px; height: 30px; margin-right: 10px; text-align: center; line-height: 30px;">C X C</div> <p>FIXED BRIDGE (INCL. ABUTMENTS)</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 60px; height: 30px; margin-right: 10px; text-align: center; line-height: 30px;">X X X</div> <p>TEETH REPLACED BY DENTURE</p> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin-right: 10px; text-align: center; line-height: 30px;">P</div> <p>POSTHUMOUSLY MISSING (LOST AFTER DEATH)</p> </div>	<p><b>TYPE OF FILLING IN UPPER HALF OF BOX</b></p> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin-right: 10px; text-align: center; line-height: 30px;">A</div> <p>AMALGAM (SILVER)</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin-right: 10px; text-align: center; line-height: 30px;">G</div> <p>GOLD</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin-right: 10px; text-align: center; line-height: 30px;">S</div> <p>SILICATE OR PORCELAIN</p> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin-right: 10px; text-align: center; line-height: 30px;">O</div> <p>OXYPHOSPATE (CEMENT)</p> </div>	<p><b>LOCATION OF FILLING IN LOWER HALF OF BOX</b></p> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin-right: 10px; text-align: center; line-height: 30px;">m</div> <p>MESIAL (BETWEEN-TOWARD FRONT)</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin-right: 10px; text-align: center; line-height: 30px;">o</div> <p>OCCUSAL (BITING SURFACE BACK TEETH)</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin-right: 10px; text-align: center; line-height: 30px;">d</div> <p>DISTAL (BETWEEN-TOWARD BACK)</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin-right: 10px; text-align: center; line-height: 30px;">l</div> <p>LINGUAL (TOWARD TONGUE)</p> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin-right: 10px; text-align: center; line-height: 30px;">f</div> <p>FACIAL (TOWARD CHEEK)</p> </div>
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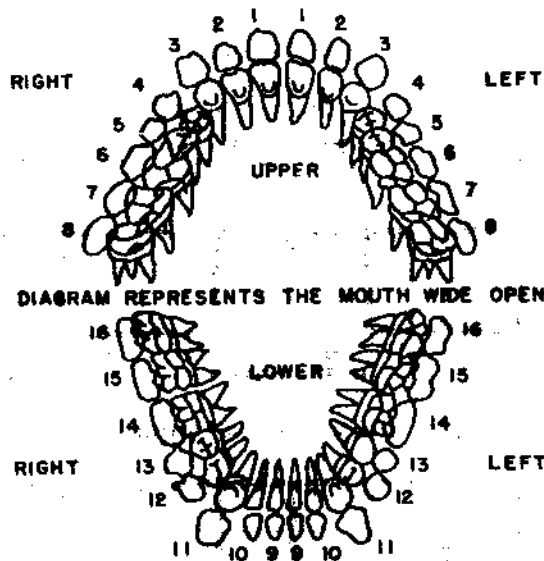
**INSTRUCTIONS:**

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 TLETH, 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:** R 15; in white Gold (full crown) L 15 & 16 missing unable to determine whether PX or X.

/s/ Hilarion V. Castillo  
SIGNATURE OF PERSON WHO PREPARED CHART

/p/ John H. Bennett Jr.  
VERIFIED BY ORS OFFICER

/p/ HILARION V. CASTILLO Emb's  
NAME AND RANK TYPED OR PRINTED Aide

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

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

1 Dec 47  
DATE

CERTIFIED TRUE COPY:

G. T. GAMBOA  
G. 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-2356 (Formerly  
 Unk X-565 USAF Cem.)

~~Unknown~~ Leyte #1, P.I.

Cemetery AGRS Mausoleum Manila, P.I.

Plot 802 <sup>ANGER</sup> Row A <sup>SAV</sup> Grave 241 <sup>ENYF</sup>

AGRS Mausoleum Manila, P.I.

1. Arrived at ~~cemetery~~ 1 Dec 47 (Date)  
 15 Miles NW of Lanug
2. Place of death Air Base, Cebu, P.I.  
 (Name of closest town)

(Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3. Remains recovered or disinterred by USAF Cem. Leyte #1, P.I.  
 (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 O		
Jacket, HBT	N E		
* Shirt, Wool OD	///		
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. Skeletal attached.

Age / / <sup>Est.</sup> Height 5' 7" <sup>Est.</sup> Weight 145 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 \_\_\_\_\_ <sup>U</sup> (Light, medium, dark, clear, pimples, pocks, freckles)

Build \_\_\_\_\_ <sup>T</sup> <sup>D</sup> (Large, fat, thin, muscular)

Hair \_\_\_\_\_ (Color, length/quantity, curly, wavy, straight, whorls, or definite parting)

Hair \_\_\_\_\_ (Baldness, widow's peak, distinctive cutting or other characteristics)

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





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

If not, explain Due to the condition of remains.

8. Has tooth chart been prepared? Yes If not, explain \_\_\_\_\_  
(Yes-no)

9. Remarks ROI burial found with remains. No personal effects, no identification dog tags or other means of identification found.

Estimated weight of remains eight (8) 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.

CERTIFIED TRUE COPY:

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

/s/ Clement G. Swan  
(Officer's Name)

Emb. Sr. Ung. C-064862  
Rank Service

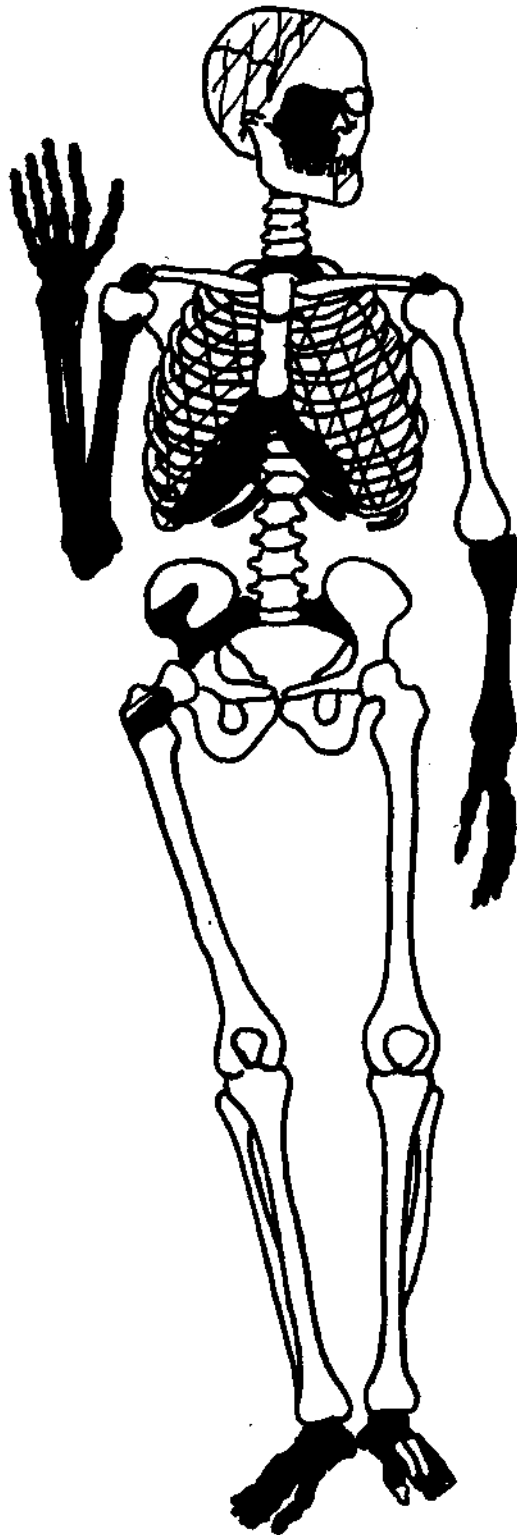
CIP LAB., Manila, P.I.  
(Organization)

1 Dec 47

SKELETAL CHART

X-2356

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



6- Cervical vertebrae  
Fragment of Ribs  
7- thoracic vertebrae

CHART "A"

L.R.

MAI 1948

RESTRICTED

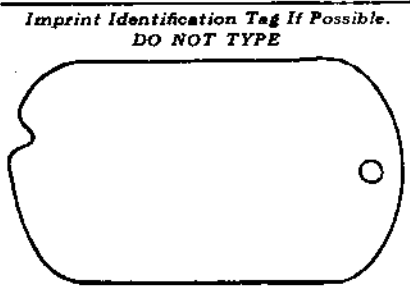
U 5484

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  
16 Dec 47



**Section 1.—IDENTIFICATION.**

NAME (Last, first, middle initial) UNKNOWN X-2356 (Formerly Unk X-565 USAF Cem. 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 15 Miles North West of Lahug Air Base, 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)	

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 MAUSOLEUM, MANILA P

DATE OF BURIAL STORAGE 2 Dec 47	HOUR 1000	BURIED IN (Shroud, blanket, or name of other) STORED Casket	TYPE OF GRAVE MARKER None	PLOT No. 802	ROW No. A	GRAVE No. 241
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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. 8489
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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) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes	

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) UNKNOWN X-2358	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRY# 243
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-2354	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRY# 239

SIGNATURE OF PERSON PREPARING REPORT  
R. R. ACIERTO PVT

SIGNATURE OF GRS OFFICER VERIFYING REPORT  
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

828

**Section 2.— 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.

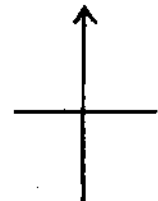
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

<b>FILLINGS</b>	<p>SILVER FILLING GOLD FILLING</p>	<p>UPPER</p> <p>LOWER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
<b>CAVITIES</b>	<p>CAVITY DECAYED</p>	
<b>MISSING TEETH</b>	<p>TOOTH MISSING</p>	
<b>CROWNED TEETH</b>	<p>PORCELAIN CROWN GOLD CROWN</p>	
<b>BRIDGE WORK</b>	<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.

**3 FEB 1948**

REPORT OF DISINTERMENT FOR IDENTIFICATION

21 October 1947

1. Remains of (Name)		Serial Number		
UNKNOWN X-565		-		
Grade	Organization			
-	-			
. Name, Number and Location of Cemetery		Plot	Row	Grave No.
USAF Cemetery Lejeune, P.I.				8489

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 and mandible fragmented. Missing: radius, ulna and one femur. 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

Held in Field Morgue

On Remains











Substitute tag

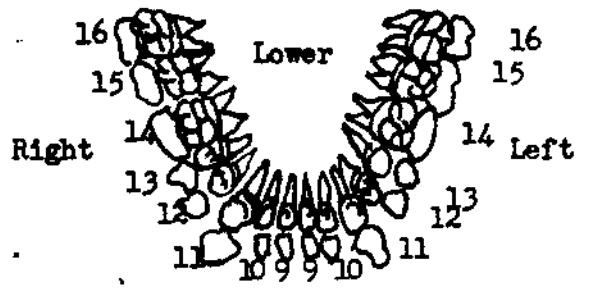
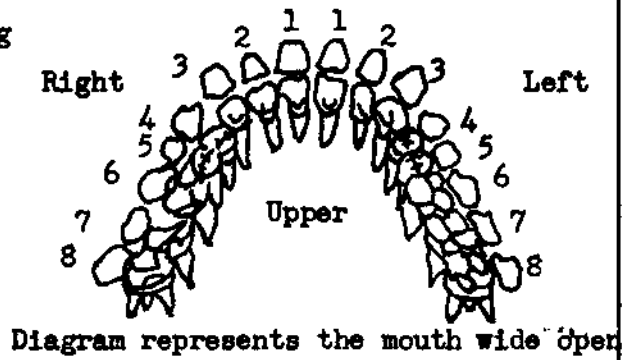
5. Signature of Officer Supervising Disinterment and Reinterment.

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

INSTRUCTIONS FOR PROPER MARKINGS ON DENTAL CHART

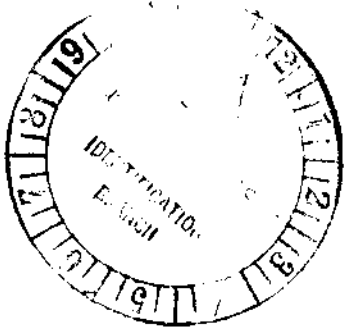
1. Give all information and description on dental chart as nearly correct as the condition of the body will allow. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws the teeth are arranged symmetrically on either side 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	 Tooth Missing	 Tooth Missing
Crowned Teeth	 Gold Crown	 Porcelain Crown
Bridgework	 Gold & Porcelain Bridge	 Gold Bridge
Fillings	 Silver Filling	 Gold Filling
Caries (Cavities)	 Cavity	 Decayed



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



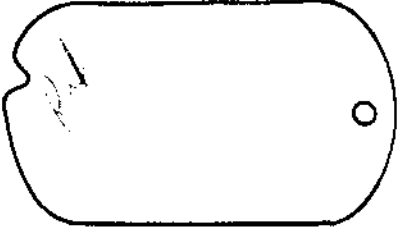
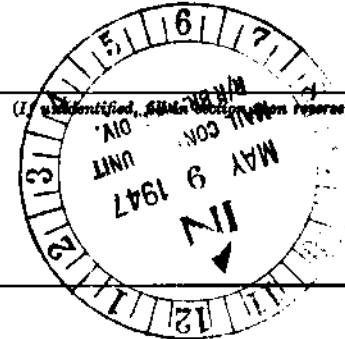
NY-0887C-5

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WD QMC FORM 1042 (Rev. 1 Apr. 1945) (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)  UNKNOWN X-565			SERIAL No.  --	
		GRADE  --	ORGANIZATION  --		BRANCH OF SERVICE  --	
		RACE  --	RELIGION  --	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY  --		
PLACE OF DEATH 15 Miles North West of Lahug Air Base, 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, state identification resource)				
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, P.I.						
DATE OF BURIAL 20 Feb 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. 8489
WAS THIS A REBURIAL? (Yes or no) No	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE Grid Coord: 10° 23' 7" N Lat., 123° 51' 30" East Long. Scale 1:200,000 Map of Cebu & Bohol, Polyconic Proj., Series of 1934.			PLOT No.	ROW No.	GRAVE No. 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) YES	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) YES					
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)  UNKNOWN X-564		RANK	SERIAL No.	ORGANIZATION	GRAVE No. 8488	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  UNKNOWN X-566 thru X-570 (Common Grave)		RANK	SERIAL No.	ORGANIZATION	GRAVE No. 8490	
SIGNATURE OF PERSON PREPARING REPORT Cpl Jack G. Slagle, G.R.S.			SIGNATURE OF GRS OFFICER VERIFYING REPORT Charles G. Waple, Jr. (Signature) CHARLES G. WAPLE, JR., 2nd Lt., QMC			
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.						

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File #74



**Section 3.—UNIDENTIFIED REMAINS.**

**INSTRUCTIONS:**


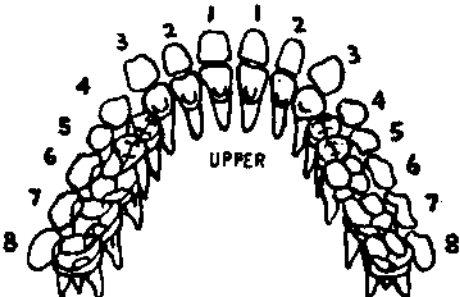




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

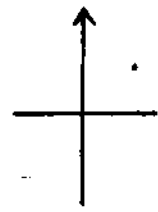
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS

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

**OTHER IDENTIFICATION CLUES**

<b>FILLINGS</b>	 <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p> <p>LOWER</p>
<b>CAVITIES</b>	 <p>CAVITY DECAYED</p>	
<b>MISSING TEETH</b>	 <p>TOOTH MISSING</p>	
<b>CROWNED TEETH</b>	 <p>PORCELAIN CROWN GOLD CROWN</p>	
<b>BRIDGE WORK</b>	 <p>GOLD BRIDGE</p>	

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



**REMARKS:**

LEFT LITTLE FINGER
LEFT RING FINGER
LEFT MIDDLE FINGER
LEFT INDEX FINGER
LEFT THUMB
RIGHT THUMB
RIGHT INDEX FINGER
RIGHT MIDDLE FINGER
RIGHT RING FINGER
RIGHT LITTLE FINGER

**17 APR 1947**

# IDENTIFICATION DENTAL CHART

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

20 February 1947  
DATE

UNKNOWN X-565
















LAST NAME                      FIRST                      INITIAL                      RANK                      SERIAL NO.

---

UNIT                      ORGANIZATION  
15 Miles NW of Lahug                      USAF Cemetery Leyte #1  
 Air Base, Cebu, P.I.                      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	 OXYPHOSPHATE (CEMENT)	 LINGUAL (TOWARD TONGUE)
 POSTHUMOUSLY MISSING (LOST AFTER DEATH)		 FACIAL (TOWARD CHEEK)

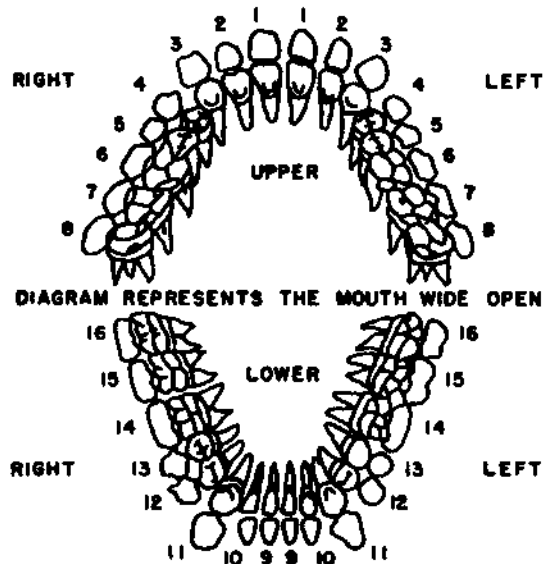
**INSTRUCTIONS:**

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:**

R<sub>16</sub> has cast platinum or AG-platinum full crown. L<sub>13</sub> and R<sub>5</sub> loose teeth which correspond with alveolar and tooth characteristics -- believe them to be original teeth.

*William R. Staples*  
/s/ WILLIAM R. STAPLES  
SIGNATURE OF PERSON WHO PREPARED CHART

Lt (jg), D.C.-U.S.N.  
NAME AND RANK TYPED OR PRINTED

USAF Cemetery Leyte #1  
PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

VERIFIED BY GNS OFFICER  
*George D. Redden, Jr.*  
GEORGE D. REDDEN, JR.  
NAME AND RANK TYPED OR PRINTED

20 February 1947  
DATE

SEARCH AND RECOVERY REPORT

On 15 January 1947, a search party composed of Pfc. Ralph L. Vernon and the undersigned left the FS-170, docked at Cebu City, mission: Recovery of Remains in the Vicinity of Lahug, Cebu City, Cebu.

Pfc. Vernon and I questioned several natives living north of Lahug which led to the recovery of one Unknown decedent now classified as Unknown X-557. The remains of one now interred as Unknown X-565 were recovered approximately five yards from Unknown X-557, buried at the foot of a mango tree. We searched the whole area for more identifying data but none could be found. (See statement of X-557).

Recovery was effected at polar coordinates:  $10^{\circ} 23' 7''$  North Latitude;  $123^{\circ} 51' 30''$  East Longitude, Scale 1:200,000, Map of Cebu and Bohol, Polyconic Projection, Series of 1934.

We then returned to the FS-170 arriving there at 1730, 15 January 1947.

*Lawrence M. Tomei*  
PVT LAWRENCE TOMEI