

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 Wmk Lcpt #17-581 (also name Manila X-2243)

SUBJECT

QMC FORM 1121
1 AUG 45

AIRMAIL

293- Unk - P.I. X-581 (Ft. McKinley)

WRIGHT 293
GIS Far East

26 October 1949

SUBJECT: Identification of World War II Deceased

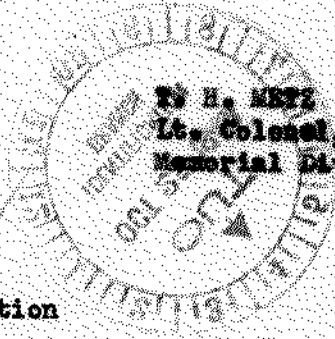
TO: Commanding General
Philippine Command
APO 707, c/o Postmaster
San Francisco, California
ATTN: AGRS, PHILCOM ZONE

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

Unknown X-2245 (formerly Unk. X-581, USAF Cemetery Leyte #1, P.I.)
Unknown X-1481

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

FOR THE QUARTERMASTER GENERAL:



W. H. MEYER
Lt. Colonel, QMG
Memorial Division

R. Little:rc
Salsar
JW

cc--Administrative Section
cc--Cincfe

Handwritten initials and stamps: REB, TEC

Oct 25 4 46 PM '49
O. G. M. S.
MAIL & RECORDS BRANCH

AIRMAIL

Reclass 10/27/49
293 Unk. P.I. X-581
Leyte 1

GSGR 293.9

APO 707
29 SEP 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 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-676	AGRS	Mslm	UNKNOWN	X-2243	AGRS	Mslm
"	X-1052	"	"	"	X-2354	"	"
"	X-1203	"	"	"	X-4129	Manila	#2

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

FOR THE COMMANDING GENERAL:

6 Incls
QMC Forms 1044 w/Certificates
of Unidentifiability

C. H. LIEURANCE
2nd Lt. AGD
Asst. Adj. Gen

/jdm

BHR

/fms

Interred 18 Oct. 1949
N 11 70 Ft. McKinley

DISINTERMENT DIRECTIVE

67MB

Carl R. H. Mark

CARL R. H. MARK

Cemetery Superintendent
SECTION A
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7740 00482

DATE
15 05 48
DAY MONTH YEAR

NAME		SERIAL NUMBER		RANK	ARM	DATE OF DEATH	
<i>WJ</i> UNKNOWN X-000581		X-000581			0	DAY	MONTH
CEMETERY						DISPOSITION OF REMAINS	
USAF CEMETERY LEYTE NO 1						0	7701 80
						CODE	DIST. PT.
PLOT	ROW	GRAVE	COUNTRY			CAUSE OF DEATH	
		8473	PHILIPPINE ISLANDS			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	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISTINTERRED
UNKNOWN X-581 UNKNOWN X-2243 (MAUS)				24 Sept 1948
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	ORGANIZATION UNKNOWN	RELIGION	IDENTIFICATION VERIFIED BY CLIFFORD INGROVILLE Embalmer NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Shelter Half	CONDITION OF REMAINS Skeletal
----------------------------------	----------------------------------

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES 1
Two (2) Identification tags shows UNKNOWN X-2243(MAUSOLEUM NUMBER)

REMAINS PREPARED AND PLACED IN CASKET
DATE 24 Sept 1948 BY CLIFFORD INGROVILLE

CASKET SEALED BY CLIFFORD INGROVILLE	EMBALMER (Signature) <i>Clifford Ingroville</i> CLIFFORD INGROVILLE
---	---

CASKET BOXED AND MARKED DATE 24 Sep 48 BY HORACE L ALLISON, Sgt, INF	SHIPPING ADDRESS VERIFIED BY CELESTINO E. ABELLAR, 1st Lt., PA
---	---

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

Celestino E. Abellar
CELESTINO E. ABELLAR, 1st Lt., PA
SIGNATURE OF GRS INSPECTOR

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

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Carroll Mark</i>	DATE 18 OCT 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	DATE	SIGNATURE OF RECEIVER	DATE

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE SIBYLIAE JOLDES MAGLEV SHIPPIE TSEWIS		NAME OF CONVOYER	
SIGNATURE OF SHIPPER EOLB MC KIMDA CEWELISA	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

OMGOD 532.3
Kansas City

2 November 1949

SUBJECT: Report on Certain Unknowns

TO: Commanding Officer
Quartermaster Activities
Kansas City Records Center (AGC)
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:

	AGRS Museum, Manila, P. I.			
X-290	"	"	"	"
X-1496	"	"	"	"
X-2224	"	"	"	"
X-2226	"	"	"	"
X-2243	"	"	"	"
X-2263	"	"	"	"
X-2556	"	"	"	"
X-3740	"	"	"	"
X-4155	"	"	"	"
X-4157	"	"	"	"
X-4213	"	"	"	"
X-4320	"	"	"	"
X-5022	"	"	"	"
X-5051	"	"	"	"
X-5082	"	"	"	"

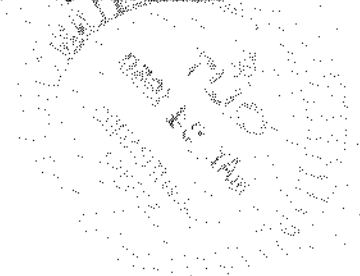
2. Correspondence from the Bureau regarding these Unknowns is returned herewith.

BY COMMAND OF MAJOR GENERAL FELDMAN:

1 Incl:
Correspondence

WILLIAM F. GIBSON
Major, SRC
Field Service Division

X OMGOD 293, UNKNOWN X-2243 MANILA, P. I. (AGRS MUSE)



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

IN REPLY REFER TO QMDKG 890815

EOG/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 remains interred as Unknown X-2245

Plot Unk, Row _____, Grave _____, ~~USMC~~ 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 wood and metal crucifix about 5" long

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

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHELOON BONE
APO 900

25 July 1949


Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 581, Plot _____,
Row _____, Grave 8473, USMC USAF Cem 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:


G. B. McNemar
Captain, MC
Chief, Records Branch

Atch: Form 1044

Received 10/19/49 OQMG

Responsible from

Information presently

available 10/24/49 - Little

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-2243 (Formerly Unk X-581 Leyte #1)				2. DATE OF REPORT 22 Sept 49	
3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	810	K	3666	DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT 5'3 3/4"	10. COLOR OF HAIR UTD	11. RACE UNKNOWN
-----------------------------------	--	---------------------------------	----------------------------

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

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

18. TOOTH CHART		TOP VIEW	SIDE VIEW
MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED THUS:		<p><i>Tooth Missing</i></p>	
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:		<p><i>Gold Crown, Porcelain Crown</i></p>	
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:		<p><i>Gold Bridge</i></p>	
FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:		<p><i>Gold Filling, Silver Filling</i></p>	
CARIES (Cavities): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:		<p><i>Cavity, Decayed</i></p>	

RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
X			⊗			⊗	⊗	⊗			⊗				X
⊗			⊗			⊗			⊗	⊗	⊗	⊗			
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."

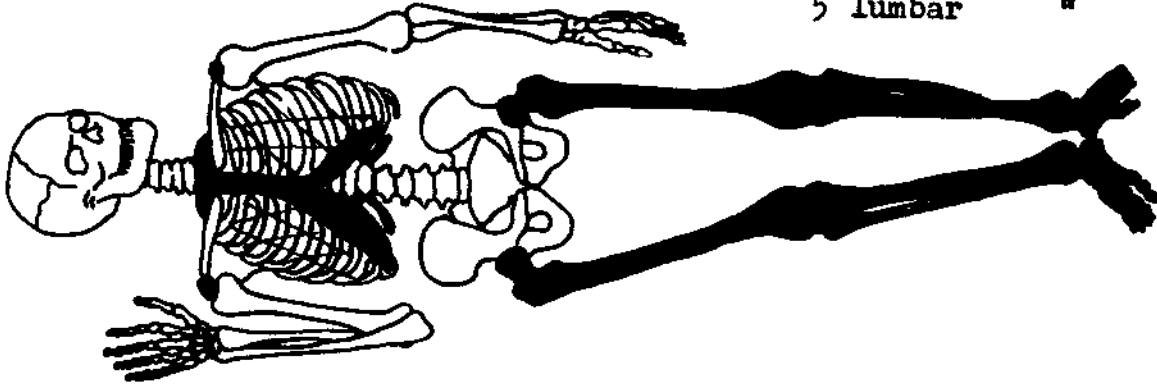
"UNIDENTIFIABLE"

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

J. J. McDERMOTT
Laboratory Officer, CIP

19. BLACK OUT PARTS OF BODY NOT REFERRED

cervical vertebrae
 10 thoracic "
 5 lumbar "
 "



Estimated height: 5' 3 3/4"

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 - 4 lbs.
 Circumference of skull - 20 inches.

"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
 Lab. Officer, CIP

SIGNATURE

X-2243

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-2243 (Formerly UNK X-581)
USAF Com Leyte #1, P.I.

28 Nov 47

DATE

Unknown

Unknown

LAST NAME FIRST INITIAL

RANK

SERIAL NO.

Unknown

Unknown

Vicinity of Vittaba,
Leyte, P.I.

AGRA Mausoleum,
Manila, P.I.

ORGANIZATION

810

K

3666

PLACE OF DEATH

PLACE OF BURIAL
STORAGE

PLOT

ROW

GRAVE NO.

ANGER BAY
















CRPT

		RIGHT								UPPER TEETH		LEFT									
		8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8				
TYPE		X			P			P		P			P				X	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		P			P		P				P	P	P	P				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.

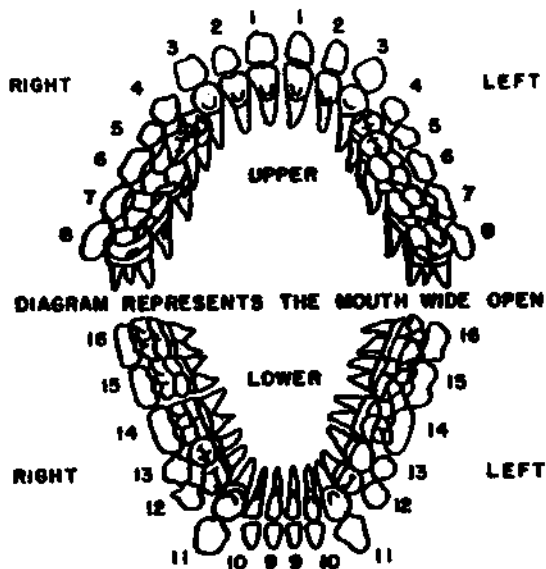


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN

REMARKS:

/s/ William A. Johnson
SIGNATURE OF PERSON WHO PREPARED CHART

/p/ WILLIAM A. JOHNSON
NAME AND RANK TYPED OR PRINTED

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

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

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

28 Nov 47
DATE

CERTIFIED TRUE COPY:

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-2243 (Formerly UNK X-581
 USAF Cem Leyte #1, P.I.)
~~XXXXXXXXXX~~

Cemetery AGRS Mausoleum, Manila, P.I.
 Plot 810 Row K Grave 3666

AGRS Mausoleum, Manila, P.I.

1. Arrived at cemetery 28 Nov 47
Vicinity of Vittaba,
2. Place of death Leyte, P.I.
(Name of closest town)

(Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3. Remains recovered or disinterred by Leyte #1
(Name and organization)
4. Evacuated to Cemetery by _____
(Name and organization)
5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

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

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.**

EST. 5'3 3/4"
Age / Height _____ Weight _____ Description of wounds _____

Bandages of 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, widow's 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 (Large, medium, small) Lips (Small, large, full)

Teeth **See chart attached** (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw (Large, small, normal) Circumference of **Skull** head in inches **20"** (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 No personal effects, no ROI bottle nor identification tags found with remains. Estimated weight of remains four (4) 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 C-0234835
Rank Service

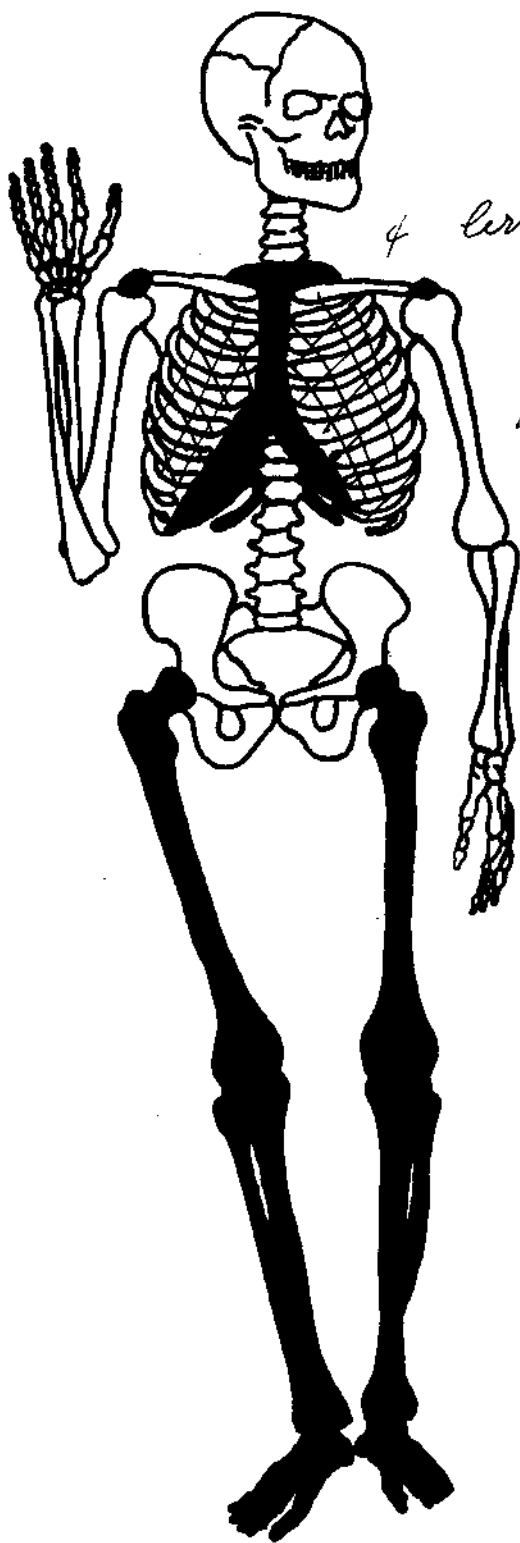
GIP Laboratory, Manila, P.I.
(Organization)

CERTIFIED TRUE COPY:

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

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



4 cervical vert. present
fragment of ribs
10 - Thoracic vert. present
5 - Lumbar vert. present.

Handwritten initials

REPORT OF DISINTERMENT FOR IDENTIFICATION

21 October 1947

1. Remains of (Name)

Serial Number

UNKNOWN X-581

-

Grade

Organization

-

-

.Name, Number and Location of Cemetery

Plot

Row

Grave No.

USAF Cemetery Leyte #1, P.I.

8473

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 incomplete. (Two femur, one clavicle, one radius missing). Substitute tags on remains and on marker coincide with R.O.I. on file. No identification clues found on remains.

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

Substitute tag

On Remains

Substitute tag

What Identification Used Upon Reinterment: On Marker

Held in Field Morgue

On Remains

Substitute tag

5. Signature of Officer Supervising Disinterment and Reinterment.

Paul R. Nichols
PAUL R. NICHOLS, Embalmer

RESTRICTED

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)

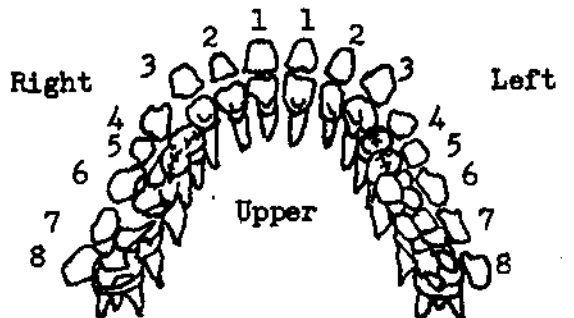
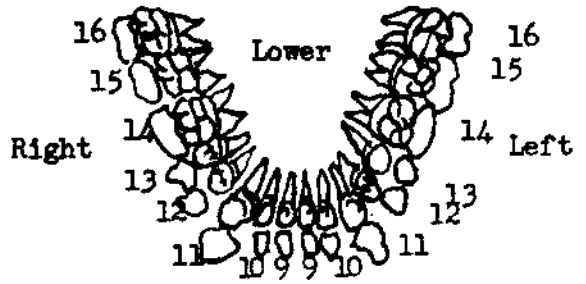


Diagram represents the mouth wide open



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

5-34880-41

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.

12 May 1947
DATE

UNKNOWN X-581

LAST NAME

FIRST

INITIAL

RANK

SERIAL NO.

UNIT
Vicinity of Villaba,
Leyte

PLACE OF DEATH

ORGANIZATION
USAF Cemetery Leyte, #1, P.I.

PLACE OF BURIAL

PLOT















ROW

8473
GRAVE NO.

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

FRACTURE MISSING

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)	

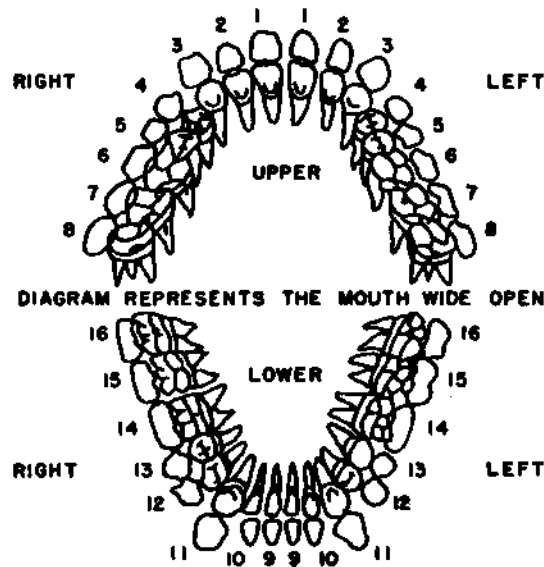
INSTRUCTIONS:

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:

Helmet Liner Markings: MHL
Crucifix

Paul R. Nichols
SIGNATURE OF PERSON WHO PREPARED CHART

PAUL R. NICHOLS, Embalmer
NAME AND RANK TYPED OR PRINTED

USAF Cemetery Leyte #1, P.I.
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

12 May 1947
DATE

RESTRICTED

HEADQUARTERS
USAF CEMETERY LEYTE O. I.
APO 1000

SEARCH AND RECOVERY REPORT
1947

1. DATE AND TIME OF DEPARTURE: 28 April 1947
2. PARTY CONSISTED OF: 1 Officer, 4 EM, & 3 Civilians
3. TOWN OR VILLAGE: Dipi PROVINCE AND ISLAND: Leyte
4. PERSONS INTERVIEWED:
 - a. All Civilians near Route of travel.
 - b.
 - c.
 - d.
 - e.
5. GUIDES:
 - a.
 - b.
 - c.
6. LOCATION OF REMAINS (GRID COORD.): See Remarks
7. DATE AND TYPE OF RECOVERY: Isolated burial
8. NUMBER OF REMAINS RECOVERED: 3
9. CONDITION OF REMAINS: Decomposed, unburied, & skeletons
10. IDENTIFICATION CLUES FOUND WITH REMAINS:
 - a. UNKNOWN X-580 Buttons only
 - b. UNKNOWN X-581 Crucifix
 - c. SMITH, RICHARD H. Identification Tag (1)
 - d.
 - e.
11. PERSONAL EFFECTS FOUND WITH REMAINS:

NONE

 - a.
 - b.
 - c.
 - d.
12. DATE AND TIME RETURNED: 1 May 1947
13. REMARKS: (SEE REVERSE SIDE)

Party departed from Dipi at 1000 hours, 28 April 1947, by Motor, arriving at Sabale at 1100; travel by motor from this point was impossible, so the party continued North on foot. All Civilians on the

route of travel were questioned regarding any possible American remains in the area.

On arriving at Lomonon, a search was made for the graves of CHAMLEY and OLSON. Nothing was found and none of the Civilians in the Vicinity had knowledge of any possible burial near the barrio. On further questioning of local civilians, leads were found on 3 possible remains about 5 Kilometers East of Lomonon. Each was checked, but proved to be unburied Japanese.

The night of 28 April was spent in the local schoolroom.

On 29 April, the party was divided into 2 crews. One crew of 2 EM and one civilian guide departed to search the area in the vicinity of Mt. Agobob. The second crew of 1 EM, 2 Civilians (guides) and one Officer continued North up the Coast. All civilians on the route were questioned, but no further leads were found until, arriving at Villaba, one trip about 4 Kilometers east of Villaba, but the remains proved to be Japanese. The night of 29 April, was spent in Villaba.

On 30 April, guided by Juan Comonol, a Barrio Policeman, 3 recoveries were made:

GRID COORD: $11^{\circ} 12' N.$, $124^{\circ} 24' E$ - unburied but complete skeleton, no identification except buttons from fatigue clothing.

GRID COORD: $11^{\circ} 13' 15'' N.$, $124^{\circ} 24' 30'' E$ - unburied, but complete skeleton, no identification except buttons, minor scrap of American equipment. About a year previous, some Civilians in the area had picked up a crucifix from the body. The crucifix was recovered, but had no identification markings.

GRID COORD: $11^{\circ} 13' 15'' N.$, $124^{\circ} 24' E$ - unburied, but complete skeleton and one dog tag bearing the following information:

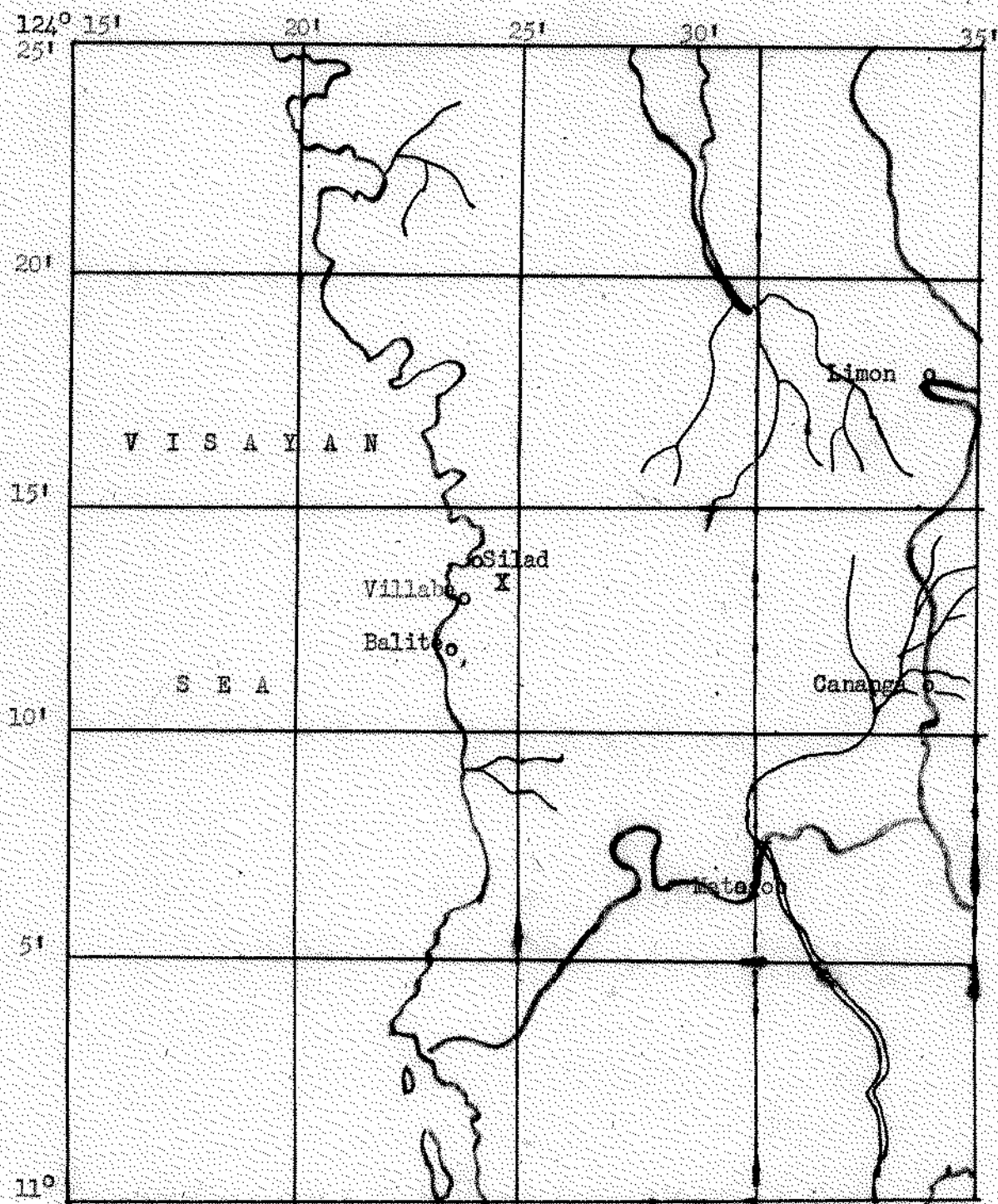
NATHANIEL E. SMITH, 20212581 T41 2 A
MR. E. W. SMITH
306 Harmon St.
Elmira, N. Y.

The recovered remains were returned with one EM and one civilian, who spent the night of 30 April in Villaba, returned to Palompon by boat and truck to DIPI.

The balance of the search team, one officer and one guide, continued the search, traveling East to Taob and South thru Hibuluangan, Bugabuga, Sulpa, Agobob and back to Dipi. Civilians were questioned on the entire route, but no further information could be found.

It is the opinion of the undersigned that further search of this area would be futile.

HARON THOMAS
Captain, OMC
Search Party Leader





X- Location of Remains when recovered: Unk. X-581
 AAF Aeronautical Approach Chart (742BI)Cathalogan Quad. Conic Proj.
 Grid Coord: 11° 13' 15" N 124° 24' 30" E Scale 1:200,000

/enl

RESTRICTED

U 973

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 6 Dec 47	
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.				SERIAL No.	
		NAME (Last, first, middle initial) UNKNOWN X-2243 (Formerly UNK X581 USAF Cem 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 Vicinity of Villaba, Leyte, P.I.		CAUSE OF DEATH Unknown			DATE OF DEATH Unknown		
EMERGENCY ADDRESSEE (Name, relationship, and address) Unknown							
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)					
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.							
DATE OF BURIAL STORAGE 29 Nov 47	HOUR 1300	BURIED IN (Shroud, blanket, or name of casket) STORED Casket	TYPE OF GRAVE MARKER None	PLOT No. YANGER 810	ROW No. BAH K	GRAVE No. CR-PI 3666	
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. 8473
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY <i>file checked 2/27/48 N.H.D.</i>				
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) STOP UNKNOWN X-2245		RANK	SERIAL No.	ORGANIZATION	GRAVE No. CR-PI 3668		
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-2241		RANK	SERIAL No.	ORGANIZATION	GRAVE No. CR-PI 3664		
SIGNATURE OF PERSON PREPARING REPORT <i>R. R. Acierto</i> R. R. ACIERTO, Pvt.			SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>L. S. Panopio</i> L. S. PANOPIO 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

100 995

Section 3.—UNIDENTIFIED REMAINS.

INSTRUCTIONS:






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

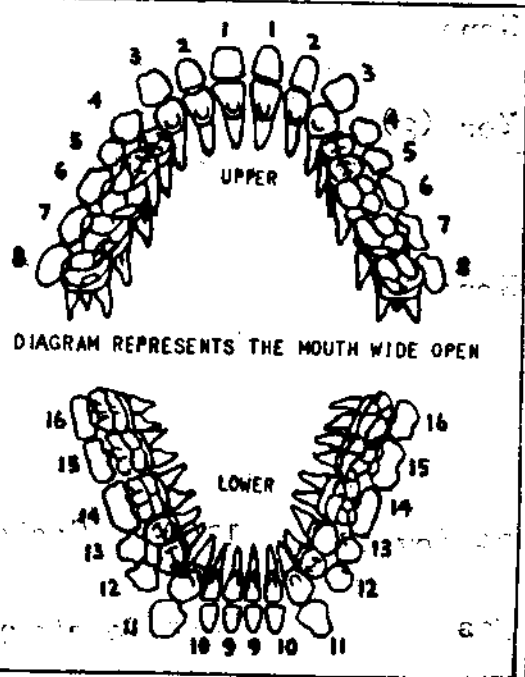
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

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

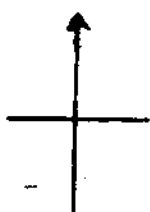
WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
-----------------------	---------------	--------------------------------

OTHER IDENTIFICATION CLUES

FILLINGS		SILVER FILLING GOLD FILLING
CAVITIES		CAVITY DECAYED
MISSING TEETH		TOOTH MISSING
CROWNED TEETH		PORCELAIN CROWN GOLD CROWN
BRIDGE WORK		GOLD BRIDGE



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



REMARKS:
Identification Check List and Dental Chart accomplished

20 JAN 1948

RESTRICTED

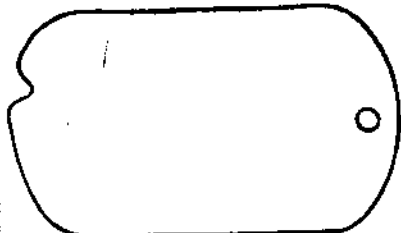
973
MC 3473

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

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

DATE OF REPORT
22 May 1947

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN X-581		SERIAL NO. ---
GRADE ---	ORGANIZATION ---	BRANCH OF SERVICE ---
RACE ---	RELIGION ---	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

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

EMERGENCY ADDRESSEE (Name, relationship, and address)

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

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME
One Crucifix (Forwarded to Sector Commander, AGRS-FEZ, Hqs, PHILRYCOM, APC 707)

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 12 May 1947	HOUR 0900	BURIED IN (Shroud, blanket, or name of other) Casket "C" Type	TYPE OF GRAVE MARKER Reg. Cross	PLOT NO.	ROW NO.	GRAVE NO. 8473
-------------------------------	--------------	--	------------------------------------	----------	---------	-------------------

WAS THIS A REBURIAL? (Yes or no) No	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE Grid Coord: 11° 13' 15" N, 124° 24' 30" E, AAF Aeronautical Approach Chart, Catbalogan Quad. Conical 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-580	RANK	SERIAL NO.	ORGANIZATION	GRAVE No. 8472
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-582	RANK	SERIAL NO.	ORGANIZATION	GRAVE No. 8474

SIGNATURE OF PERSON PREPARING REPORT Cpl Jack G. Slagle, G.R.S.	SIGNATURE OF GRS OFFICER VERIFYING REPORT WILLIAM C. CLARK, 1st 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.

RESTRICTED

Incl 15

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.


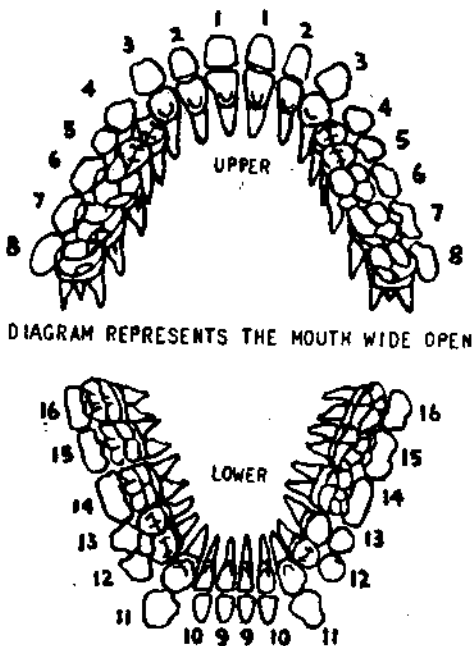




(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

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

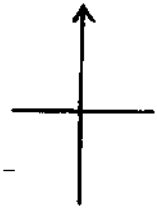
WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
		Villaba, Leyte 1290.0-1356.0 Scale 1:50,000

OTHER IDENTIFICATION CLUES
See attached QMC Form 1045

Helmet Liner with Markings: MHL

FILLINGS		 <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
CAVITIES		
MISSING TEETH		
CROWNED TEETH		
BRIDGE WORK		

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



12 JUN 1947

REMARKS:
This grave was formerly occupied by FITZPATRICK, Thomas J. who was disinterred and shipped to the United States under the Current Death Program.