

QMGMT 293
GRS Far East

11 July 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 X-1564 (formerly Unknown X-75 Finschhafen #2)
Unknown X-2230 (formerly Unknown X-629 Leyte #1)
Unknown X-2286 (formerly Unknown X-598 Leyte #1)
Unknown X-2289 (formerly Unknown X-601 Leyte #1)
Unknown X-2331 (formerly Unknown X-501 Leyte #1)
Unknown X-2441 (formerly Unknown X-576 Leyte #1)
Unknown X-3288 (formerly Unknown X-157 Finschhafen #2)
Unknown X-3431 (formerly Unknown X-332 Leyte #1)
Unknown X-3767 (formerly Unknown X-355 Leyte #1)
Unknown X-4253

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

FOR THE QUARTERMASTER GENERAL:

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

REB

NJS

J. Miller:lrc
Salser
JW

GSGK 293.9

SUBJECT: Unidentifiable Remains

9 June, 1949

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 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 X-621	UNKNOWN X-3172
" Y-625	" Y-3258
" X-630	" X-3288
" X-635	" Y-3422
" X-1322	" X-3431
" Y-1564	" X-3767
" X-1914	" X-4253
" X-2230	" X-4096, Manila #2
" X-2241	(Formerly Unk Y-1409, AGFS Mslm)
" X-2286	" X-5141 (Formerly Unk X-327-E, AGFS Mslm)
" Y-2289	" X-5142 (Formerly Unk Y-327-F, AGFS Mslm)
" X-2331	" X-5145 (Formerly Unk X-327-I, AGFS Mslm)

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

FOR THE COMMANDING GENERAL:

23 Incls:
QMC Forms 1044 w/certificates
of Unidentifiability

COPY

/ebc 15 Jan		Interred 20 Oct. 1949 D 1 216 Ft. McKinley <i>Caremark</i> CARL R. H. MARK Cemetery Superintendent		DISINTERMENT DIRECTIVE		M.K.	
SECTION A - NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER 7740 00514		DATE 15 05 48 DAY MONTH YEAR	
NAME <i>947</i> UNKNOWN		SERIAL NUMBER X-000598		RANK		ARM 0	
CEMETERY USAF CEMETERY LEYTE NO 1		DISPOSITION OF REMAINS 7701 80 CODE DIST. PT.		DATE OF DEATH DAY MONTH YEAR		DISPOSITION OF REMAINS 7701 80 CODE DIST. PT.	
PLOT		ROW		GRAVE 8515		COUNTRY 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-450 UNKNOWN X-598 UNKNOWN X-2286 (MAUS)		SERIAL NUMBER		RANK		DATE OF DEATH 24 Sept 1948	
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input type="checkbox"/> MARKER		ORGANIZATION UNKNOWN		RELIGION		IDENTIFICATION VERIFIED BY ROBERT F. STEVENSON Embalmer NAME AND TITLE	
SECTION D - PREPARATION OF REMAINS FOR SHIPMENT							
NATURE OF BURIAL Shelter Half				CONDITION OF REMAINS Skeletal			
OTHER MEANS OF IDENTIFICATION KIA Dec 44							
MINOR DISCREPANCIES / Two (2) Inside tags shows UNKNOWN X-2286 (MAUSOLEUM NUMBER) ONE (1) Marker Tag Shows UNKNOWN X-6 One (1) Inside tag shows UNKNOWN X-450							
REMAINS PREPARED AND PLACED IN CASKET							
DATE 24 Sept 1948				BY ROBERT F. STEVENSON			
CASNET SEALED BY ROBERT F. STEVENSON				EMBALMER (Signature) <i>Robert F. Stevenson</i> ROBERT F. STEVENSON			
CASNET BOXED AND MARKED DATE 24 Sep 48 BY HORACE L ALLISON, Sgt, INF				SHIPPING ADDRESS VERIFIED BY HONORIO V. AURELIO, 1st Lt., INF			
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.							
				<i>Honorio V. Aurelio</i> HONORIO V. AURELIO, 1st Lt., INF SIGNATURE OF GRS INSPECTOR			
1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.							
REMARKS: Unidentifiable - OQMG							

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>Everitt</i>	DATE 20 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 <i>AGRS Mausoleum</i>		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>Everitt</i>	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
PHILCOB ZONE
APO 900

27 May 1949


Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 598, Plot _____,
Row _____, Grave 8515, USMC 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:


H. B. McNEEMAR
Captain, QMG
Chief, Records Branch

Atch: Form 1044

Reviewed 21 June 1949 OQMG
Not identifiable from
information presently
available

11 July 1949
J. Miller Ad. Sec.

2.1. #10'

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-2286 (Formerly UNK X-598 Leyte # 1)						2. DATE OF REPORT 27 May 1949		
3. NAME OF CEMETERY ROSS MAUSOLEUM, MANILA, P. I.				4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
				810	L	4008	DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT 150 lbs.	9. ESTIMATED HEIGHT 5' 9 1/2"	10. COLOR OF HAIR U. T. D.	11. RACE UNKNOWN
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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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT?
15. WAS BODY MANGLED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT?

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

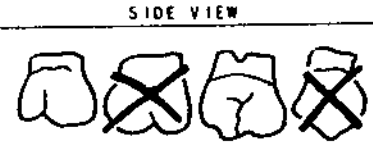
"UNIDENTIFIABLE"
"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

Ind. # 102

18.

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:



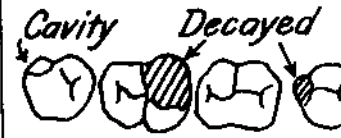
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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
o		m	p	p	p	p	p	p	p	p	p	p	p	m	o
Side Views								Side Views							
UPPER								UPPER							
LOWER								LOWER							
Side Views								Side Views							
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."

Mandible missing and mandibular teeth are missing.

"UNIDENTIFIABLE"

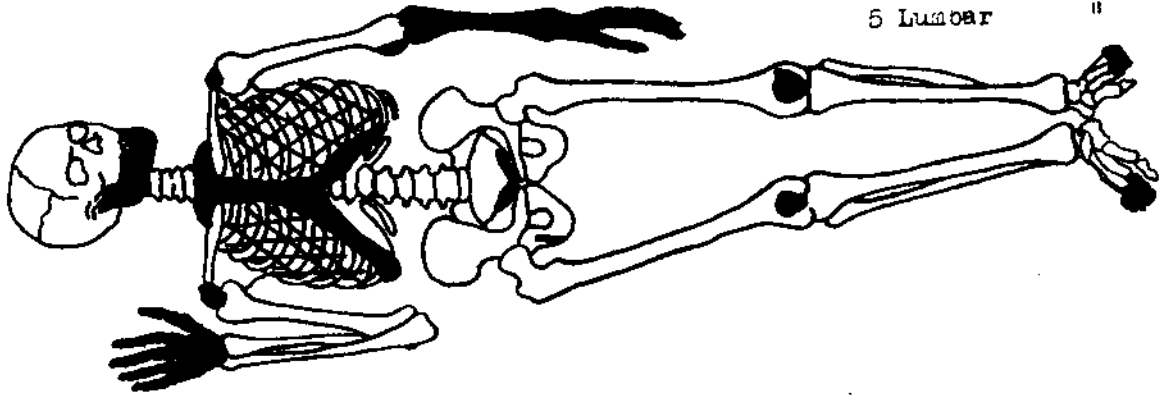
J. G. McDermott
J. G. McDERMOTT

BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA Laboratory Officer, CIP

19. BLACK OUT PARTS OF BODY NOT RECOVERED

Received:

- 5 Cervical vertebrae
- 10 Dorsal "
- 5 Lumbar "



Estimated height: 5' 9 1/4"

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 - 7 lbs.
 Circumference of skull 20 1/8 inches.

"REASON FOR 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

JAMES J. McDERMOTT

Laboratory Officer, GIP

SIGNATURE

1-2286

IDENTIFICATION DENTAL CHART

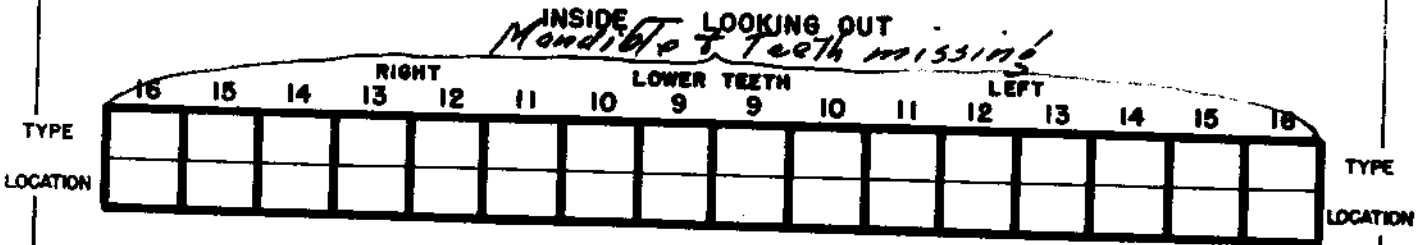
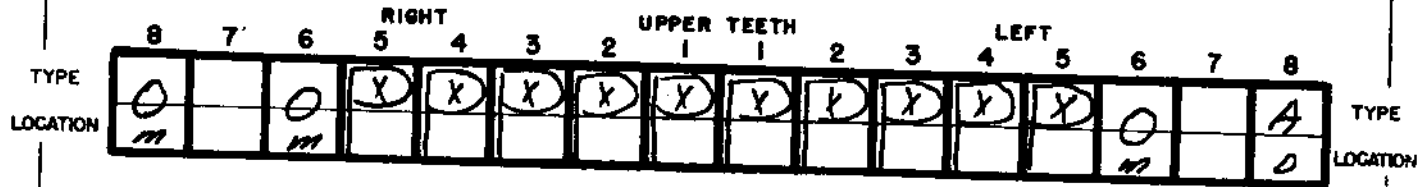
TO BE USED WITH QMC FORMS NOS. 1042 & 1044 IN PLACE OF CHART THEREON,
AND TO BE ATTACHED TO AND FORWARDED WITH THESE FORMS WHEN ACCOMPLISHED.

UNKNOWN X-2286 (Formerly Unk X-598)
USAF Cem Leyte #1, P.I.)















28 Nov 47

LAST NAME FIRST INITIAL RANK SERIAL NO.

Unknown Unknown
Approximately 2 KM East of Balogo, Leyte, P.I. AGRS MAUSOLEUM Manila, P.I. ORGANIZATION
810 L 4008
PLOT ROW GRAVE NO.



KEY OF SYMBOLS TO BE USED ON ABOVE CHART

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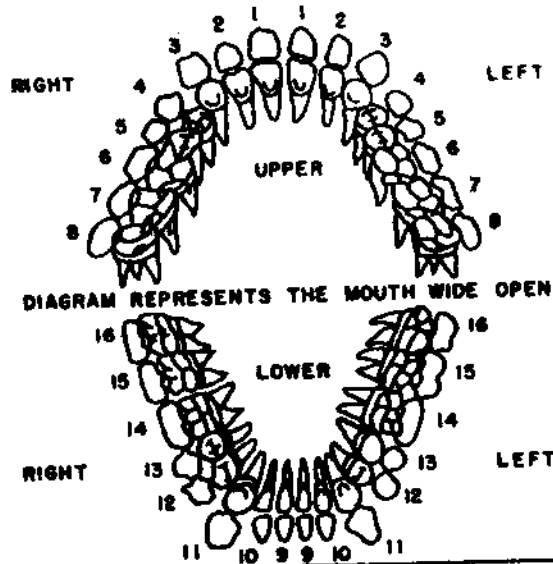
INSTRUCTIONS:

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 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:

s/ Frazier Oliver
SIGNATURE OF PERSON WHO PREPARED CHART

D/ FRAZIER OLIVER -SP-6
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

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

29 Nov 47
DATE

CERTIFIED TRUE COPY:

G. T. Gamboa
G. T. GAMBOA
2nd 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-2286 (Formerly Unk X-598
 USAF Cem Leyte #1, P.I.)

~~XXXXXXXXXX~~

Cemetery AGRS Mausoleum, Manila, P.I.

Plot 810 Row L Grave 4008

AGRS Mausoleum, Manila, P.I.
 29 Nov 47

1. Arrived at ~~XXXXXXXXXX~~ Approximately 2 KM East
(Date)
2. Place of death of Balogo, Leyte, P.I.
(Name of closest town)

(Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

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

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

Belt, web _____
 Drawers, wool _____
 Drawers, cotton _____
 Leggings, wool _____
 Socks, cotton _____
 * Shoes _____ (type) _____
 Overshoes _____
 Web Equipment _____ (type) _____

(Other item) One (1) Canteen found with remains on front

(Other item) name ROSSI, on back N&RZ.

*If body is nude, sizes of these items should be computed by measuring the remains

Chevrons or Insignia _____
 (Type & location / shirt, jacket, coat, helmet)

Shoulder Patch _____

Does clothing indicate that deceased was a member of the Air, Ground or Naval Force? _____

6. Description of Remains: Skeleton only - Skeletal chart attached.

Age _____ Est. Height 5'04" Est. Weight 150 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 _____
 U (light, medium, dark, clear, pimples, pocks, freckles)

Build _____
 T D (Large, fat, thin, muscular)

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

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

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

Goatee
 (Light, color, extent)

Eyes
 (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 **Tooth chart attached**
 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw
 (Large, small, normal)

Circumference of ~~neck~~ ^{skull} in inches **20 1/3"**
 (Hat band)

Neck
 (Size, length, short, normal, wrinkled)

Larynx
 (Prominent, normal)

Shoulders
 (Broad, straight, small, rounded)

Arms
 (Length, muscular, color, extent and quantity of hair)

Hands
 (Short, thick, long, slender, size of knuckles, missing fingers or joints)

Fingers
 (Unusual characteristics of fingers/hands)

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 I.D. tags found with remains. No burial bottle.
One (1) canteen found with remains on front name ROSSI,
on back NARZ. Estimated weight of remains 7 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/ Frazier Oliver
(Officer's Name)

SP - 6 C 063027
Rank Service

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

29 Nov 47

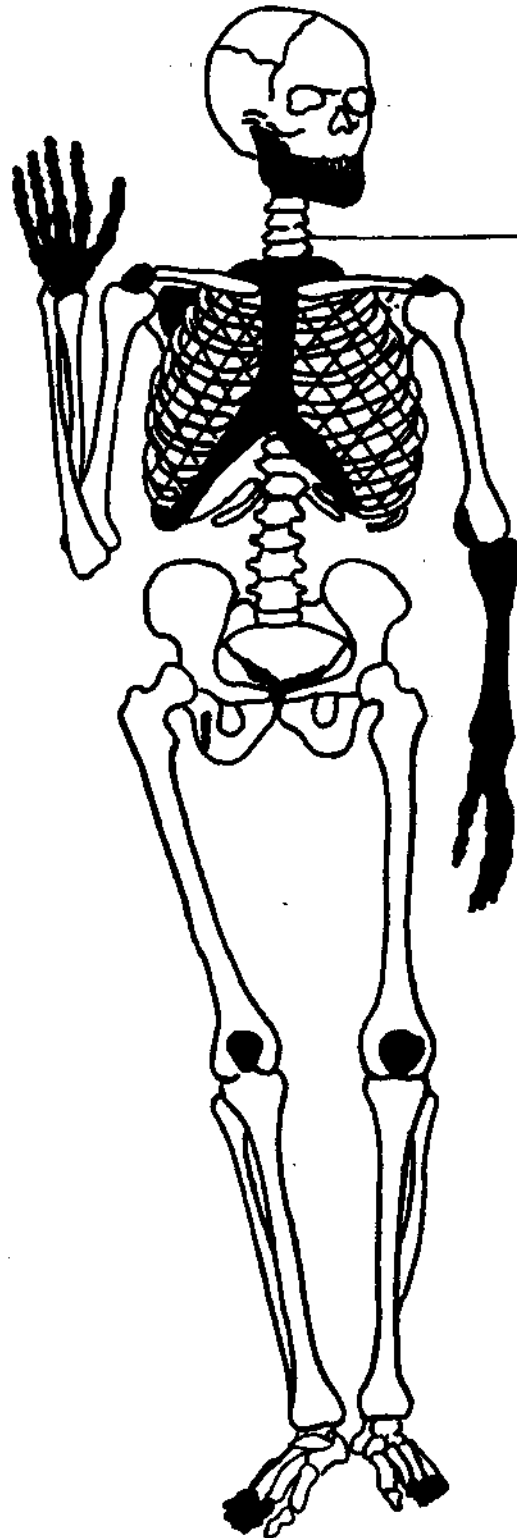
CERTIFIED TRUE COPY:


G. T. GAMBOA
2nd Lt., MAC

SKELETAL CHART

X-2286

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



→ Cervical — 5
Ribs fragments — 16
Dorsal — 10
Lumbar — 5

IDENTIFICATION DENTAL CHART

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

15 May 1947
DATE

UNKNOWN X-598

LAST NAME

FIRST

INITIAL

RANK

SERIAL NO.

Approx. 2 Kilometers East of Balogo, Leyte

PLACE OF DEATH

USAF Cemetery Leyte #1, P.I.

PLACE OF BURIAL

ORGANIZATION

PLOT

ROW

8515

GRAVE NO.

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

INSIDE — LOOKING OUT

Missing

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

KEY OF SYMBOLS TO BE USED ON ABOVE CHART

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

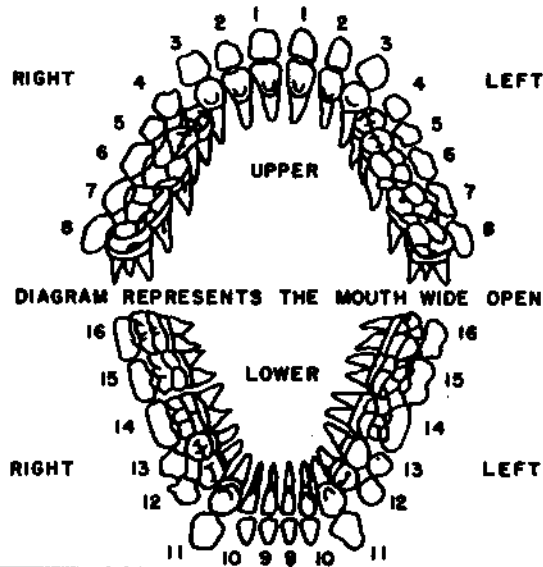
INSTRUCTIONS:

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

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

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

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



REMARKS:

CANTEEN:
Front: ROSSI
Back: HARZ

Paul R. Nichols
SIGNATURE OF PERSON WHO PREPARED CHART

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

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

William C. Clark
VERIFIED BY GRS OFFICER

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

15 May 1947
DATE

RECORDED

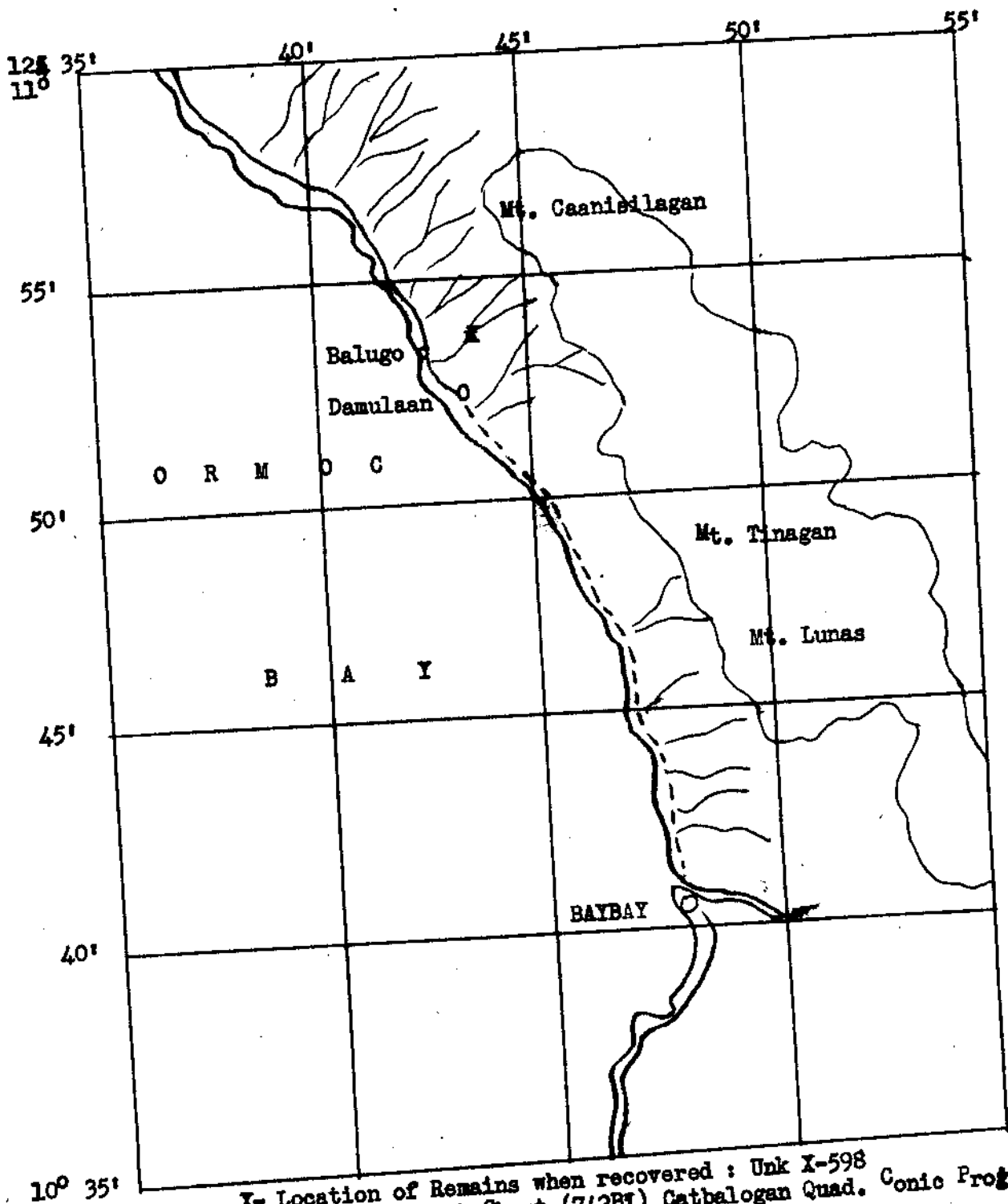
HEADQUARTERS
USAFFE, CEBU, LEYTE NO. 1
APR 1947

SEARCH AND RECOVERY REPORT
TRIP # 5

1. DATE AND TIME OF DEPARTURE: 1300 on 13 April 1947
2. PARTY CONSISTED OF: 3
3. TOWN OR BARRIO: Balogo PROVINCE AND ISLAND: Leyte
4. PERSONS INTERROGATED:
 - a. _____
 - b. _____
 - c. _____
 - d. _____
 - e. _____
 - f. _____
 - g. _____
5. GUIDES:
 - a. Eglecirio Andrade
 - b. _____
 - c. _____
 - d. _____
6. LOCATION OF REMAINS (GRID COORD.): 10° 53' 30" N., / 124° 43' 30" E.
7. DATE AND TYPE OF RECOVERY: Isolated Burial
8. NUMBER OF REMAINS RECOVERED: 1
9. CONDITION OF REMAINS: Poor
10. IDENTIFICATION CLUES FOUND WITH REMAINS:
 - a. Canteen with markings on front: ROSSI, on back NARZ
 - b. _____
 - c. _____
 - d. _____
 - e. _____
11. PERSONAL EFFECTS FOUND WITH REMAINS:
 - a. None
 - b. _____
 - c. _____
 - d. _____
 - e. _____
12. DATE AND TIME RETURNED: 13/April / 1947 / 1800hr.
13. REMARKS: (SEE REVERSE SIDE) _____

Body found unburied approximately 2 kilometers east of Barrio Balogo and one half kilometer from Palanas river. No dog tags found, Canteen with name punched on side only item found with remains.

Harold J. Lemons
S/Sgt. Harold J. Lemons



X- Location of Remains when recovered : Unk X-598
 AAF Aeronautical Approach Chart (742B1) Catbalogan Quad. Conic Proj.
 Grid Coord: 10° 53' N- 124° 43' 15"
 Scale 1:200,000

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mm

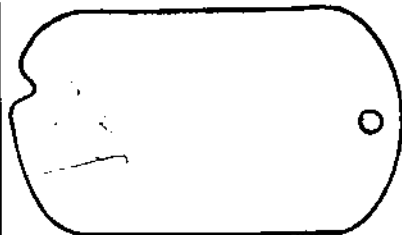
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WD OMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)REPORT OF INTERMENT
(AR 30-1810 and AR 30-1815)

DATE OF REPORT

23 May 1947

Imprint Identification Tag If Possible.
DO NOT TYPE

Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)

UNKNOWN X-598

SERIAL No.

-

GRADE

-

ORGANIZATION

-

BRANCH OF SERVICE

-

RACE

-

RELIGION

-

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

-

PLACE OF DEATH Approximately
2 Kilometers East of
Balogo, Leyte

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

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.
15 May 1947	0930	Casket "C" Type	Reg. Cross	194	11th	8515
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	Recovered at Grid Coord: 10° 53' 30" N. 124° 43' 30" E AAF Aeronautical Approach Chart (742BI) (Cabalogan Quadr. Conic Proj.)		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-597						8514
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)			RANK	SERIAL No.	ORGANIZATION	GRAVE No.
UNKNOWN X-599 (Possibly RICKS, John A.)			1st Lt.	0-1183602	11th Air Div.	8516
SIGNATURE OF PERSON PREPARING REPORT			SIGNATURE OF GRS OFFICER VERIFYING REPORT			
Cpl. Jack G. Stagle, G.R.S.			WILLIAM C. CLARK, 1st Lt., OMC			

DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.

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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
		2 Kilometers East of Balogo, Leyte

OTHER IDENTIFICATION CLUES

- 1. Canteen found with remains:**
 - a. Name on front of canteen: **ROSSI**
 - b. Name on back of canteen: **NARZ**
- 2. SEE ATTACHED QMC FORM 1045**

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

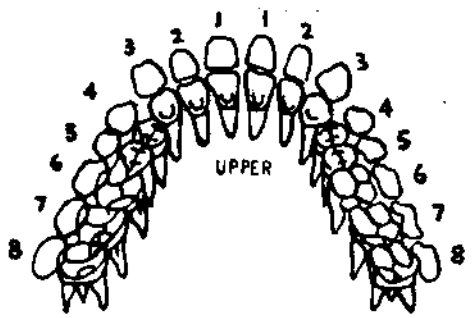
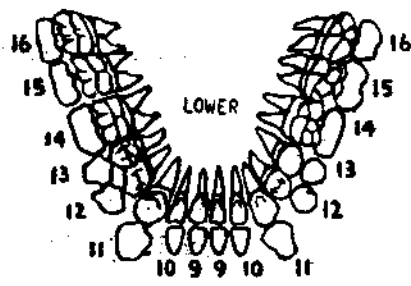


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



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



12 JUN 1947

REMARKS:

REPORT OF DISINTERMENT FOR IDENTIFICATION

20 October 1947

1. Remains of (Name)

Serial Number

UNKNOWN X-598

-

Grade

Organization

-

-

Name, Number and Location of Cemetery

Plot

Row

Grave No.

USAF Cemetery Leyte #1, P.I.

8515

2. Date of Disinterment

20 October 1947

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

Original made in Type "C" wooden casket burial. Skeletal remains incomplete. Missing mandible. Canteen found with remains on front name ROSSI, on back KAZ. Substitute tags on remains and on marker coincide with R.O.I. on file.

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

Substitute tag

On Remains

Substitute tag

What Identification Used Upon Reinterment: On Marker

Held in Field Morgue

On Remains

Substitute tag

5. Signature of Officer Supervising Disinterment and Reinterment.

PAUL R. NICHOLS, Embalmer

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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

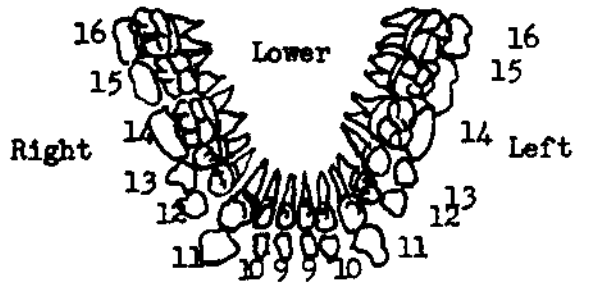
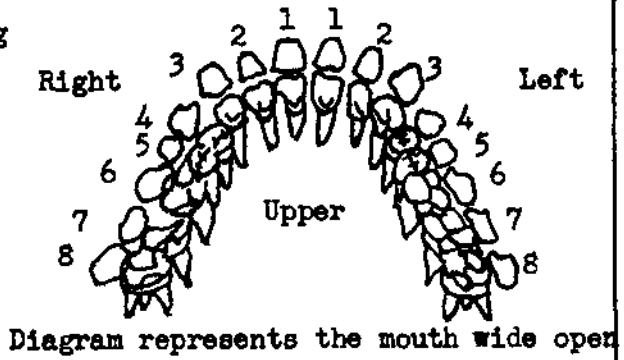


Caries (Cavities)



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



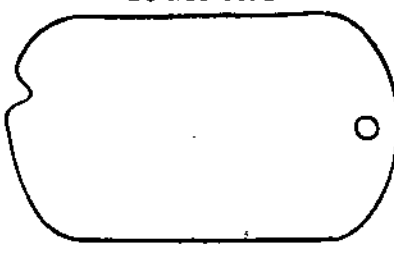
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WD GRC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815) STORAGE				DATE OF REPORT 8 Dec 47	
Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.						
	NAME (Last, first, middle initial) UNKNOWN X-2286 (Formerly Unk X-598 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 Approximately 2 KM East of Balogo, 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)		RECORDED 233 PM '47 SECTION 1 233 PM '47					
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 STORAGE 1 Dec 47	HOUR 1100	BURIED IN (Shroud, blanket, or name of other) STORED Casket	TYPE OF GRAVE MARKER None	PLOT NO. RANGER 810	ROW NO. RAY L	GRAVE NO. CRYPT 4008	
WAS THIS A REBURIAL? (Yes or no) 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. 8515
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) STORED UNKNOWN X-2289			RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 4010	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-2284			RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 4006	
SIGNATURE OF PERSON PREPARING REPORT <i>R. R. Acierto</i> R. R. ACIERTO, Pvt.			SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>D. S. Panopio</i> D. S. PANOPIO, 2nd 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 Office. Copies for retention in theater as prescribed by theater commander.							

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Section 3.—UNIDENTIFIED REMAINS.

INSTRUCTIONS:

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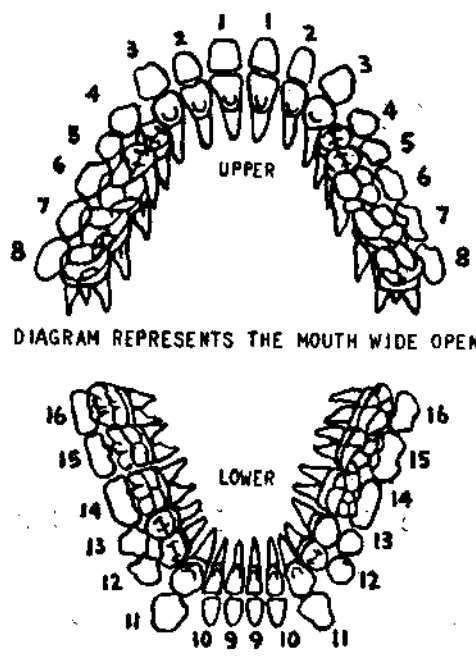




(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

**One (1) Canteen with the following markings:
On front - ROSSI
On back - NARZ**

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

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



REMARKS:

Identification Check List and Dental Chart accomplished.