

FILE IDENTIFICATION TOPPER

FILE NUMBER

SUBJECT

2932unk Leyte #1 X-649

also Manila Mass X-2312

QMC FORM 1121  
1 AUG 45

/ebc <b>1</b>	Interred 27 Feb. 1950 C 12 62 Ft. McKinley <i>Carl R. H. Mark</i>		<b>DISINTERMENT DIRECTIVE</b>		<b>PREPARED BY PHILCOM</b>		
	<b>CARL R. H. MARK</b> Cemetery Superintendent SECTION A — NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER <b>7740 81023</b>		DATE <b>17 02 50</b> DAY MONTH YEAR		
NAME <b>UNKNOWN X - 649</b>		SERIAL NUMBER		GRADE		ARM	
CEMETERY <b>USAF CEMETERY LEYTE NO. 1, P. I.</b>		PLOT <b>FIELD</b>		ROW <b>MORGUE</b>		GRAVE	
				DISPOSITION OF REMAINS <b>7701 80</b> CODE DIST. CTR.			
<b>SECTION B — CONSIGNEE AND NEXT OF KIN</b>							
NAME AND ADDRESS OF CONSIGNEE <b>UNITED STATES MILITARY CEMETERY FT. WM. MCKINLEY, P. I.</b>				NAME AND ADDRESS OF NEXT OF KIN <b>(BY ADMINISTRATIVE DECISION)</b>			
<b>SECTION C — DISINTERMENT AND IDENTIFICATION</b>							
NAME <b>UNKNOWN X-649</b>		SERIAL NUMBER		GRADE		DATE OF DEATH	
						DATE DISINTERRED <b>7 June '49</b>	
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input type="checkbox"/> MARKER		ORGANIZATION		RELIGION		IDENTIFICATION VERIFIED BY <b>RICHARD HOYT</b> Embalmer NAME AND TITLE	
<b>SECTION D — PREPARATION OF REMAINS FOR SHIPMENT</b>							
NATURE OF BURIAL <b>Shelter Half</b>				CONDITION OF REMAINS <b>Skeletal</b>			
OTHER MEANS OF IDENTIFICATION <p style="text-align: center;"><b>X-2312 Maus.</b></p>							
MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)							
REMAINS PREPARED AND PLACED IN CASKET							
DATE <b>7 June '49</b>		BY <b>RICHARD HOYT</b>		EMBALMER (Signature) <b>s/ Richard Hoyt</b>			
CASKET SEALED BY <b>RICHARD HOYT</b>							
CASKET BOXED AND MARKED DATE <b>7 June '49</b> BY <b>RAYMOND H TANCUAY</b> <b>Sgt 1c, RA</b>		SHIPPING ADDRESS VERIFIED BY <b>GERARD A BRICK</b>					
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.  <p style="text-align: center;"><b>s/ Gerard A Brick</b></p> <p style="text-align: center;">SIGNATURE OF AGRS INSPECTOR</p>							
REMARKS AND SPECIAL INSTRUCTIONS							

## RECORD OF CUSTODIAL TRANSFER

### 1. SHIPPED

FROM <b>AGRS MAUSOLEUM</b>		TO <b>US MILITARY CEMETERY</b>	
KIND OF CONVEYANCE <b>TRUCK</b>		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Carrollmark</i>	DATE <b>FEB 27 1950</b>

### 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		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	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

DISINTERMENT DIRECTIVE PREPARED BY PHILCOM							
SIGNATURE OF SHIPPER		DATE	SIGNATURE OF RECEIVER		DATE		
SECTION A — NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER 7740 01023			DATE 17 02 50 DAY MONTH YEAR		
NAME		SERIAL NUMBER	GRADE	ARM	RACE	RELIGION	
UNKNOWN I - 649		1 SHIPPED					
CEMETERY		PLOT	ROW	GRAVE	DISPOSITION OF REMAINS		
USAF CEMETERY LITTLE NO. 1, P. I.		FIELD	MORQUE		7701	00	
CODE		DIST. CTR.					
SECTION B — CONSIGNEE AND NEXT OF KIN							
NAME AND ADDRESS OF CONSIGNEE				NAME AND ADDRESS OF NEXT OF KIN			
UNITED STATES MILITARY CEMETERY PT. HN. MCINDLEY, P. I.				(BY ADMINISTRATIVE DECISION)			
SECTION C — DISINTERMENT AND IDENTIFICATION							
NAME		SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISTINTERRED		
IDENTIFICATION TAG ON		ORGANIZATION	IO	RELIGION	IDENTIFICATION VERIFIED BY		
<input type="checkbox"/> REMAINS		2 SHIPPED					
<input type="checkbox"/> MARKER				NAME AND TITLE			
SECTION D — PREPARATION OF REMAINS FOR SHIPMENT							
NATURE OF BURIAL		DATE	CONDITION OF REMAINS			DATE	
OTHER MEANS OF IDENTIFICATION		1 SHIPPED					
MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)							
REMAINS PREPARED AND PLACED IN CASKET		DATE BY 3 SHIPPED					
CASKET SEALED BY		EMBALMER (Signature)					
CASKET BOXED AND MARKED		SHIPPING ADDRESS VERIFIED BY					
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct. 3 SHIPPED							
REMARKS AND SPECIAL INSTRUCTIONS		SIGNATURE OF AGRS INSPECTOR					
FILE RECORDS AMOUNT TO DATE 1990/2/17		BR. NAV. DIV.					

1. FILE UNDER NO. 293 - Unk P.I. X-649A (Leyte#1)

### SYNOPSIS

2. TYPE OF DOCUMENT: **Letter** 3. DATE: 7 Feb 50  
4. FROM: OJMC  
5. TO: Commanding Officer AGES, IZ APO 900 c/o HI San Francisco, Calif.  
6. SUBJECT: Identification of World War II Deceased

7. DOCUMENT FILED UNDER NO. 293 - Unk P.I. (Misc) Maus Manila X-186 X-239 X-300 X-382B  
X-4180 X-4199 X-4250 X-4251 X-2336 X-2228 X-2312A

ob

**INSTRUCTIONS.**—Enter after the above headings information as follows:

1. File classification under which this cross-index sheet is to be filed.
2. Appropriate term, such as: "ltr," "memo," "1st ind," etc.
3. Date of Document.
- 4 and 5. Enter either or both, as applicable.
6. Brief and comprehensive synopsis of the content or subject matter.
7. File classification under which the document is filed.

SECRET 203  
GPO For East

7 February 1950

SUBJECT: Identification of World War II Deceased

TO: Commanding Officer  
American Graves Registration Service  
Philcom Zone  
APO 958, c/o Postmaster  
San Francisco, California

1. Reference is made to Findings of Unidentifiability for the following Unknown Deceased:

Unknown X-106, AGRS Mausoleum Manila, P.I.					
" X-239, " " " " "	"	"	"	"	"
" X-309, " " " " "	"	"	"	"	"
" X-3828, " " " " "	"	"	"	"	"
" X-4180, " " " " "	"	"	"	"	"
" X-4198, " " " " "	"	"	"	"	"
" X-4250, " " " " "	"	"	"	"	"
" X-4251, " " " " "	"	"	"	"	"
" X-2336, AGRS, Maus. Manila, formerly X-490, USMC Leyte #1					
" X-2228, " " " " " X-625, " " "	"	"	"	"	"
" <del>X-2312-A</del> , " " " " " <del>X-2312-A</del> , " " "	"	"	"	"	"
" X-724, USMC Leyte #1, formerly X-2312-B, AGRS Maus. Manila					

2. Recommendations for Unidentifiability have been approved by this Office. Request your records be amended accordingly.

FOR THE QUARTERMASTER GENERAL:

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

GRPZ 293

AFO 900  
18 January 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-196	AGRS	Mslm	UNKNOWN	X-2336	AGRS	Mslm
"	X-239	"	"	"	X-3014	"	"
"	X-309	"	"	"	X-3828	"	"
"	X-539	"	"	"	X-4132	Manila #2	
"	X-657	"	"	"	X-4180	AGRS	Mslm
"	X-667	"	"	"	X-4197	"	"
"	X-690	"	"	"	X-4199	"	"
"	X-724	Leyte #1		"	X-4250	"	"
"	X-888	AGRS	Mslm	"	X-4251	"	"
"	X-889	"	"	"	X-4655	"	"
"	X-1366	"	"	"	X-4657	"	"
"	X-1703	"	"	"	X-4659	"	"
"	X-1963	"	"	"	X-4660	"	"
"	X-2228	"	"	"	X-4688	"	"
"	X-2312	"	"				

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

FOR THE COMMANDING OFFICER:

29 Incls  
QMC Forms 1044 w/Certificates  
of Unidentifiability

/s/  
/t/ John Shypula  
JOHN SHYPULA  
1st Lt., Infantry  
Adjutant

G  
O  
P  
Y

HEADQUARTERS  
PHILCOM ZONE  
AMERICAN GRAVES REGISTRATION SERVICE

17 Jan. 1950

Date

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

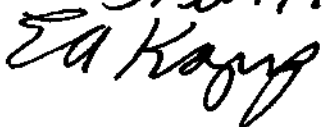
The records pertaining to Unknown X- 649-A, Plot Held in Field  
Morgue  
Row \_\_\_\_\_, Grave \_\_\_\_\_, USMC Leyte #1, P.I., have  
been reviewed and it is the opinion of this office that insuffi-  
cient evidence is available to establish the identity of this  
deceased, and that these remains should be classified as uniden-  
tifiable.

FOR THE COMMANDING OFFICER:

  
H. B. MCNETTER  
Captain, OMC  
Chief, Records Branch

Atch: Form 1044

Received 31 Jan. 1950 OCMG  
Not identifiable from  
information presently  
available 3 Feb. 1950





**IDENTIFICATION DATA**

1. REMAINS OF UNKNOWN X-2312 (formerly UNK X-649-A USAF Cem Leyte #1, P.I.)				2. DATE OF REPORT 17 Jan. 1950	
3. NAME OF CEMETERY  AGRS MAUSOLEUM, Manila P.I.		4. PLOT 802	5. ROW A	6. GRAVE 195	7. DATE OF DISINTERMENT REINTERMENT
PHYSICAL DESCRIPTION					
8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT 5'8"	10. COLOR OF HAIR Black		11. RACE Unk.	
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS  <p align="center">N O N E</p>					
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES  <p align="center">U T D</p>					
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  <p align="center">N O N E</p>					
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)  <p align="center">N O N E</p>					

**UNIDENTIFIABLE**  
DUE TO LACK OF SUSPICIOUS IDENTIFIABLE DATA

*2nd 13*

TOOTH CHART

	TOP VIEW	SIDE VIEW
<b>MISSING TEETH:</b> ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED THUS:		
<b>CROWNED TEETH:</b> BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:		
<b>BRIDGE WORK:</b> BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:		
<b>FILLINGS:</b> DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:		
<b>CARIES (Cavities):</b> OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:		

	RIGHT								LEFT								
	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
							P					X					
Side Views																	Side Views
Top Views																	UPPER
																	LOWER
Side Views																	Side Views
		X					P	P	P	P						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."

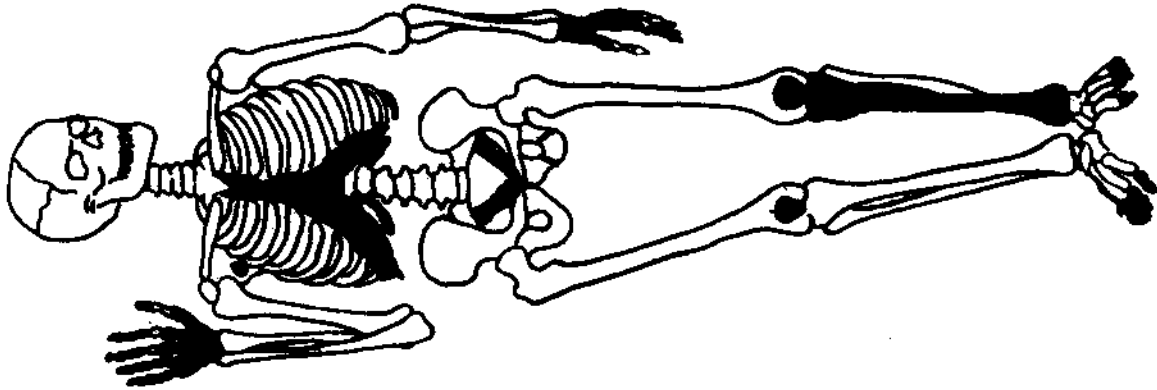
REMARKS: R-7, R-16, L-5, L-7, L-14, & L-15 carious oclusol

NOT REPAIRABLE

*Paul R. Nichols*

PAUL R. NICHOLS  
Chief, Ident. 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 identification tags, bottle, burial, personal effects or other means of  
identification found with remains.  
Est. weight of remains - 8 lbs**

**UNIDENTIFIABLE**

THE REMAINS OF \_\_\_\_\_

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, Ident. Section**

SIGNATURE

449  
\*2312

HEADQUARTERS  
PHILIPPINES COMMAND  
UNITED STATES ARMY

GSCR 293.9

AFO 707

SUBJECT: Cancellation of Letter Suffixes of Unknown Numbers 10 AUG 1949

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

1. The reprocessing of Unknown remains, presently at AGRS Huisleum, Manila, P.I., resulted in the declaration of some Unknowns as Unidentifiables and also necessitated the cancellation of the letter suffix "A" or "B" of the X numbers of the Unknowns which were originally recovered or interred together with those declared Unidentifiables.

2. In view of the above, it is requested that all records, your office, pertaining to the following Unknowns be amended indicating the cancellation of the letter suffixes:

(See enclosed list.)

3. All pertinent records in this Headquarters have already been amended accordingly.

FOR THE COMMANDING GENERAL:

/s/ John H. Weston Jr.  
JOHN H. WESTON JR  
Int Lt ACD  
Asst. Adj Gen

1 Incl:  
list

X-NOS. OF DEEDS (AGES MAUSOLEUM, MANILA, P.I.)  
LETTER SYMBOLS OF WHICH HAVE BEEN CANCELLED

X-610A	X-2486-B	X-3079-A	X-396-A
X-449-A	X-2542-A	X-3087-A	X-4012-A
X-508-A	X-2652-A	X-3095-A	X-4031-A
X-860-A	X-2654-A	X-3326-B	X-4074-A
X-883-B	X-2805-A	X-3483-A	X-4189-A
X-889-B	X-2807-A	X-3499-A	X-4217-A
X-1563-A	X-2849-A	X-3535-A	X-4622-B
X-1866-A	X-2908-A	X-3551-A	X-4646-A
X-1868-A	X-2944-A	X-3568-A	X-4739-A
X-2110-A	X-2946-A	X-3590-A	X-4795-A
X-2119-A	X-2969-A	X-3591-A	X-4801-A
X-2142-A	X-2979-A	X-3639-A	X-4843-A
X-2147-A	X-2646-A	X-3644-A	X-4887-A
X-2312-A	X-2761-A	X-3905-A	

Edmund E. Scarci  
39345912

Repatriated to U.S.  
See 293

Ed Scarci

X-2312

# 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-2312-A (Formerly UNK X-649-A,  
USAF Cem Leyte #1, P.I.)

1 Dec 47

DATE

LAST NAME FIRST INITIAL

Unknown RANK

Unknown SERIAL NO.

Unknown

Unknown

UNIT  
Valencia, Malaybalay,  
Bukidnon, Mindanao, P.I.

AGRS Mausoleum,  
Manila, P.I.

ORGANIZATION

PLACE OF DEATH

PLACE OF BURIAL  
STORAGE

802

A

195

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															
LOCATION															

INSIDE — LOOKING OUT

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

## KEY OF SYMBOLS TO BE USED ON ABOVE CHART

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

**INSTRUCTIONS:**

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

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

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

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

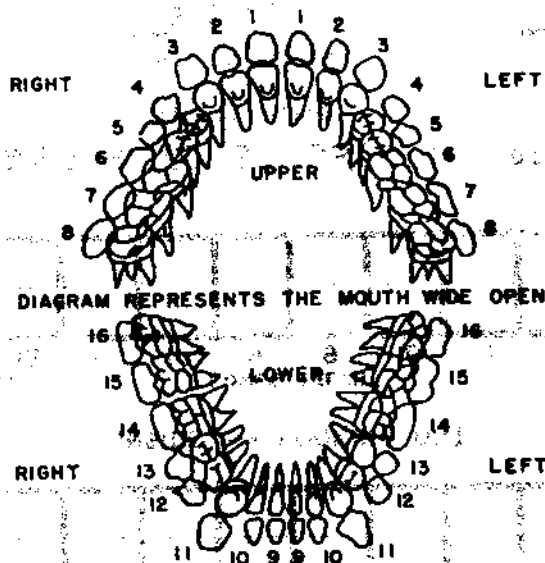


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN

**REMARKS:**

/s/ Vernon H. Korn  
SIGNATURE OF PERSON WHO PREPARED CHART

/p/ VERNON H. KORN  
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

1 Dec 47  
DATE

A 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-2312-A (Formerly  
 Unknown X-649-A, USAF Gen Leyte #1, P.I.)  
 Cemetery AGRS Mausoleum, Manila, P.I.  
 Plot 802 RANGER A BAY GRIVE 195  
Row Grave

AGRS Mausoleum, Manila, P.I.

1. Arrived at cemetery 1 Dec 47  
Valentin, Malaybata,
2. Place of death Bukidnon, Mindanao, 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	N		
Mackinaw	O		
Sweater	N		
Jacket, HBT	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) **One (1) bottle with Report of Interment for SCARCI, Edmund E.**  
 (Other item) **39345912 Pfc 108th Inf. Co. I**

\* 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 .....  
 (Type & location; shirt, jacket, coat, helmet)

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 ..... Height ..... Weight ..... Description of wounds .....

Bandages or dressings ..... Scars .....  
 (Length, width, location)

Tattoos .....  
 (Number, location -- illustrate on separate page)

Outstanding moles, warts or birthmarks .....  
 (Yes-no; description, location)

Sunburn or tan, other than hand and face .....

Complexion .....  
 (Light, medium, dark, clear, pimples, pocks, freckles)

Build .....  
 (Large, fat, thin, muscular)

Hair **Black Hair was found on skull** .....  
 (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 ~~head~~ **skull** in inches **19** / (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 Battle with Report of Interment for SCARCI, Edmond R. 39345912, Pfc  
108th Inf. Co. I, received with remains. Refer to X-2312-B. 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/ Vernon H. Korn  
(Officer's Name)

SP\_6 C-064977  
Rank Service

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

1 Dec 47

A CERTIFIED TRUE COPY;  
*George T. Gamboa*  
GEORGE T GAMBOA  
2d Lt MAC

# SKELETAL CHART

X-2312

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

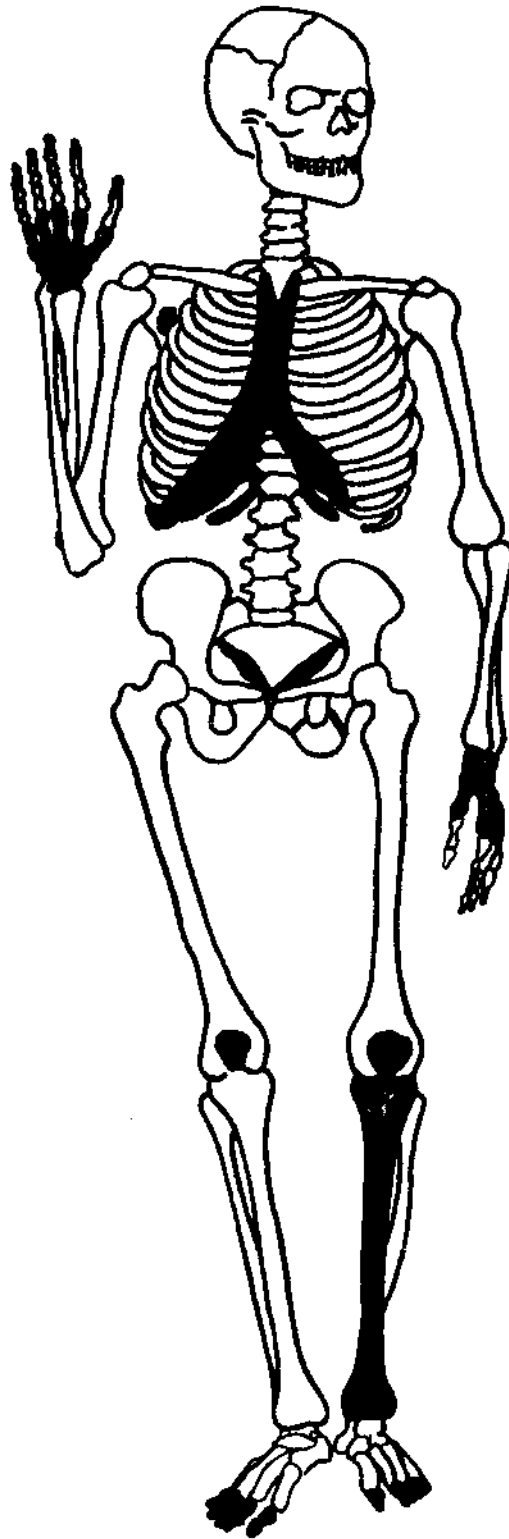


CHART "A"  
*J.A.*

DMO Form 1044  
Rev. 1 Apr. 1945

RESTRICTED

DE

REPORT OF DISINTERMENT FOR IDENTIFICATION

3 October 1947

1. Remains of (Name)

X-649 A, Unknown

Serial Number

Grade

Organization

.Name, Number and Location of Cemetery

USAF Cemetery Leyte #1

Plot

Row

Grave No.  
Isolated  
Burial

2. Date of Disinterment

15 September 1947

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

Original burial isolated recovery, skeletal remains, identification clues are hair and bottle containing Report of Interment. See Search and Recovery Report and OIC Form 1045.

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

Isolated burial - No marker

On Remains

Hair and bottle containing Report of Interment.

~~What Identification Used Upon Reinterment: On Marker~~

~~Held in Field Morgue~~

On Remains

Substitute Tags.











5. Signature of Officer Supervising Disinterment and Reinterment.

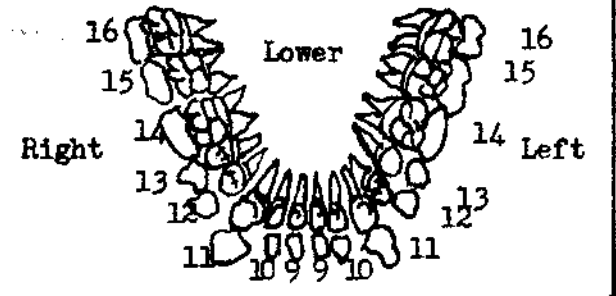
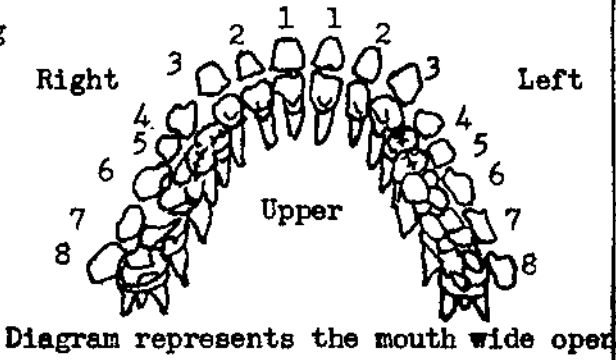
  
PAUL R. NICHOLS, Embalmer

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)	 



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

RESTRICTED

HEADQUARTERS  
USAF CEMETERY LISTS NO. 1  
APO 977

SEARCH AND RECOVERY REPORT

TRIP # \_\_\_\_\_ SEARCH # \_\_\_\_\_

1. DATE AND TIME OF DEPARTURE: 0730 15 September 1947
2. PARTY CONSISTED OF: 4 EM
3. TOWN OR BARRIO: Valencia, Malaybalay PROVINCE OR ISLANDS: Bukidnon, Mindanao
4. PERSONS INTERROGATED:
  - a. Vicente Benafay--- Eo. Lt.
  - b. \_\_\_\_\_
  - c. \_\_\_\_\_
  - d. \_\_\_\_\_
  - e. \_\_\_\_\_
  - f. \_\_\_\_\_
5. GUIDES:
  - a. \_\_\_\_\_
  - b. \_\_\_\_\_
  - c. \_\_\_\_\_
  - d. \_\_\_\_\_
  - e. \_\_\_\_\_
  - f. \_\_\_\_\_
6. LOCATION OF REMAINS (GRID COORD.) 7° 59' N- 125°
7. DATE AND TYPE OF RECOVERY: Isolated Burial
8. NUMBER OF REMAINS RECOVERED: ✓ (2) (1) (1) (1) (Check one)
9. CONDITION OF REMAINS: Good
10. IDENTIFICATION CASES FOUND WITH REMAINS:
  - a. Bottle with Report of Interment for SCABCI, Edmund E. 39345912
  - b. Pfc 108th Inf. Co. I
  - c. Hair
  - d. \_\_\_\_\_
  - e. \_\_\_\_\_
11. PERSONAL EFFECTS FOUND WITH REMAINS:
  - a. N O N E
  - b. \_\_\_\_\_
  - c. \_\_\_\_\_
  - d. \_\_\_\_\_
  - e. \_\_\_\_\_
12. DATE AND TIME RETURNED: 1730 15 Sept '47
1. REMARKS: (SEE REVERSE SIDE):



REMARKS:

There were two bodies in this grave. The report of interment was made out at 99th Evac. Hosp., APO 159 14, June '45 signed by Sgt Bayard T. Gardner.

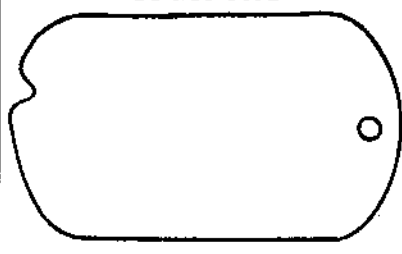
/s/ Joe E. Remes  
S/Sgt 17004220

A TRUE COPY:



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RAMON THOMAS, Capt., QMC

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		
APR 28 1948		STORAGE			4 Dec 47		
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.					
		NAME (Last, first, middle initial) UNKNOWN X-2312-A (Formerly UNK X-649-A, USAF Cam 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 Valencia, Malaybalay, Bukidnon, Mindanao, 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)		See Remarks					
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 AGRA MANSOLETO, MANTALAY.							
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. 195
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.					
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-2313			RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 197	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-2295			RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 193	
SIGNATURE OF PERSON PREPARING REPORT K R ACIERTO, Pvt				SIGNATURE OF GRS OFFICER VERIFYING REPORT L S PANOPIO, 3d 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.							

Encl 1987

**RESTRICTED**

**Section — UNIDENTIFIED REMAINS.**

**INSTRUCTIONS:**






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

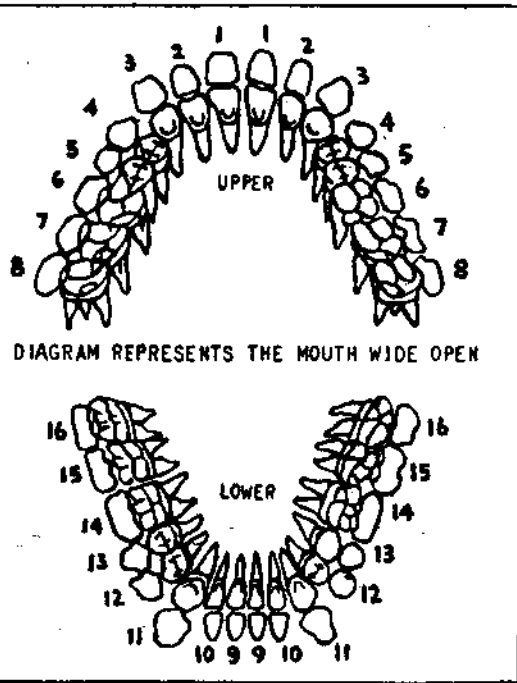
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
			<b>Black</b>	

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:** UNKNOWN X-2312-A AGRS Mausoleum, Manila, (Formerly UNK X-649-A USAF Cem Leyte #1, P.I.) was one of the two (2) remains recovered from an isolated burial in Valencia, Malaybalay, Bukidnon, Mindanao, P.I. which subject remains could be SCARCI, Edward E., 39345912, Pfc, 108th Inf. Co. I, as attached copies of Search and Recovery Report and QMC Form 1045. Cross reference this case with UNKNOWN X-2312-B, AGRS Mausoleum, Manila, P.I.

REMARKS:

Identification Check List and Dental Chart accomplished.

**2 MAR 1948**

RIGHT LITTLE FINGER

**RESTRICTED**