

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 Cont. Dept. # 1 X-789

SUBJECT

Family 293 Wilson, Merle F.

RECLASSIFICATION SHEET

PAPERS ORIGINALLY FILED 293 Mak-Leyte #1 (misc)
X-385 X-787 X-788 X-789

SYNOPSIS AND DATES

NEW CLASSIFICATION misc filed
293 Mak-Leyte #1
X-787

RECLASSIFICATION SHEET

FORM 293
GDS Far East

9 June 1950

SUBJECT: Identification of World War II Deceased

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

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

Unknown X-7 (formerly Unknown X-7, 77th Division Cemetery, Okinawa), Unit 2, Page 1.
Unknown X-787 (formerly 1st Lt. Robert D. Dawkins, Jr., O-70774, USAF Cemetery #1, Leyte, P.I.), Unit 2, Page 14 (addition)
Unknown X-788 (formerly 1st Lt. William E. Hunter, Jr., O-60122, USAF Cemetery #1, Leyte, P.I.), Unit 2, Page 14 (addition)
Unknown X-789 (formerly S/sgt. Merle E. Wilson, 3770166, USAF Cemetery #1, Leyte, P.I.), Unit 2, Page 14 (addition)
Unknown X-5017, Unit 2, Page 21.

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

FOR THE QUARTERMASTER GENERAL:

T. A. Fields:rvs
Salsar

THOMAS E. COX
CAPT GDS
Memorial Division

JF

JMB

cc: Adm Section
Copy furnished CINCPAC APO 500

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE

GRPZ 293

AFPO 900
25 MAY 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 QMCMU 293, GRG (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-25	Agat, Guam	#2
"	X-737	Leyte	#1
"	X-788	"	"
"	X-789	"	"
"	X-5017	AGRS Mslm	

2. Forwarded herewith, for your consideration, are new QMC Forms 1014 for the above-mentioned Unknowns.

FOR THE COMMANDING OFFICER:

5 Incls
QMC Forms 1014 w/Certificates
of Unidentifiability

H. B. McNEEMAR
Capt., QMC
Asst. Adjutant

/drs 1	Interred 13 Jun 1950 L 15 51 Ft. McKinley <i>Carl R. Mark</i> CARL R. H. MARK Cemetery Superintendent		PREPARED BY PHILCOM DISINTERMENT DIRECTIVE		
	SECTION A - NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER 7740 81691		DATE 16 05 50 DAY MONTH YEAR
NAME UNKNOWN X - 789		SERIAL NUMBER	GRADE	ARM	RACE RELIGION
CEMETERY USAF CEMETERY LEYTE NO. 1, P. I.		PLOT	ROW	GRAVE 7949	DISPOSITION OF REMAINS 7701 80 CODE DIST. CTR.
SECTION B - CONSIGNEE AND NEXT OF KIN					
NAME AND ADDRESS OF CONSIGNEE UNITED STATES MILITARY CEMETERY FT. WM. MCKINLEY, P. I.			NAME AND ADDRESS OF NEXT OF KIN (BY ADMINISTRATIVE DECISION)		
SECTION C - DISINTERMENT AND IDENTIFICATION					
NAME UNKNOWN X-789		SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISTINTERRED 11 May 1950
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER		ORGANIZATION		RELIGION	IDENTIFICATION VERIFIED BY PAUL R NICHOLS 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 (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)					
REMAINS PREPARED AND PLACED IN CASKET					
DATE 11 May 1950		BY PAUL R NICHOLS			
CASKET SEALED BY PAUL R NICHOLS		EMBALMER (Signature) s/ Paul F Nichols			
CASKET BOXED AND MARKED			SHIPPING ADDRESS VERIFIED BY		
DATE 11 May 50 BY RAYMOND H TANGUAY, Sgt 1c,			PA L. W. RICHARDSON, M/Cgt., PA		
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.					
s/ L. W. Richardson, M/Cgt., PA SIGNATURE OF AGRS INSPECTOR					
REMARKS AND SPECIAL INSTRUCTIONS ✓					

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM AGRS MAUSOLEUM		TO US MILITARY CEMETERY	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Evermark</i>	DATE 13 JUN 1950

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	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

3

PREPARED BY PHILCOM

DISINTERMENT DIRECTIVE

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

7740 81691

DATE

16 05 50

DAY MONTH YEAR

NAME

UNKNOWN I - 789

SERIAL NUMBER

GRADE

ARM

RACE

RELIGION

CEMETERY

USAF CEMETERY LEYTE NO. 1, P. I.

PLOT

ROW

GRAVE

7949

DISPOSITION OF REMAINS

7701

80

CODE

DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

**UNITED STATES MILITARY CEMETERY
FT. WM. MCKINLEY, P. I.**

NAME AND ADDRESS OF NEXT OF KIN

(BY ADMINISTRATIVE DECISION)

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

GRADE

DATE OF DEATH

DATE DISTINTERRED

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

- REMAINS
- MARKER

NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)

REMAINS PREPARED AND PLACED IN CASKET

DATE

BY

CASKET SEALED BY

EMBALMER (Signature)

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY

DATE

BY

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

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

1. FILE UNDER NO. 293 - Unk. P.I. (Leyte #1-) X-789

SYNOPSIS

2. TYPE OF DOCUMENT: 3d Ind 3. DATE: 12 May 50
4. FROM: Hdqtrs., American GRS, Philcom Zone, APO 900
5. TO: TQMO, Dept of the Army, Wash., D. C. Attn: Mem Div
6. SUBJECT: Identification of World War II Deceased.

7. DOCUMENT FILED UNDER NO. 293 - Unk. P.I. (Leyte #1) (Misc.) X-787, X-788, X-789, X-385

mf's

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.

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE

APO 900

22 May 1950

(Date)

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 789, Plot _____,
Row _____, Grave 7949, 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 decedent,
and that these remains should be classified as unidentifiable.

FOR THE COMMANDING OFFICER:

Incl:
Form 1044


W. B. MCENMAR
Captain, QMG
Chief, Records Branch

Received 19 June 1950 OCMG

Not identifiable from
information presently
available

T. A. Fields-ID
7 June 1950

IDENTIFICATION DATA









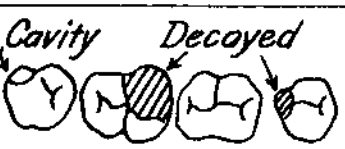
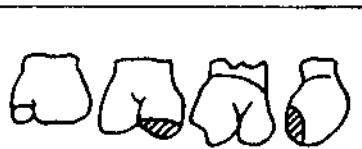
1. REMAINS OF UNKNOWN UNK. X-789 Leyte # 1				2. DATE OF REPORT 22 May 1950	
3. NAME OF CEMETERY AGRS Mausoleum Manila P. I.		4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT REINTERMENT
PHYSICAL DESCRIPTION					Age: 25 to 30 yrs.
8. ESTIMATED WEIGHT U. T. D.	9. ESTIMATED HEIGHT 5'6 1/2"	10. COLOR OF HAIR U. T. D.		11. RACE White	
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">N o n e</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">Old healed fracture on the acromial extremity of right clavical.</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"

"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:		
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
	X						P	P						X	A	X
Side Views																
Top Views																
Side Views																
			A		P			P	X				P	X	A	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."

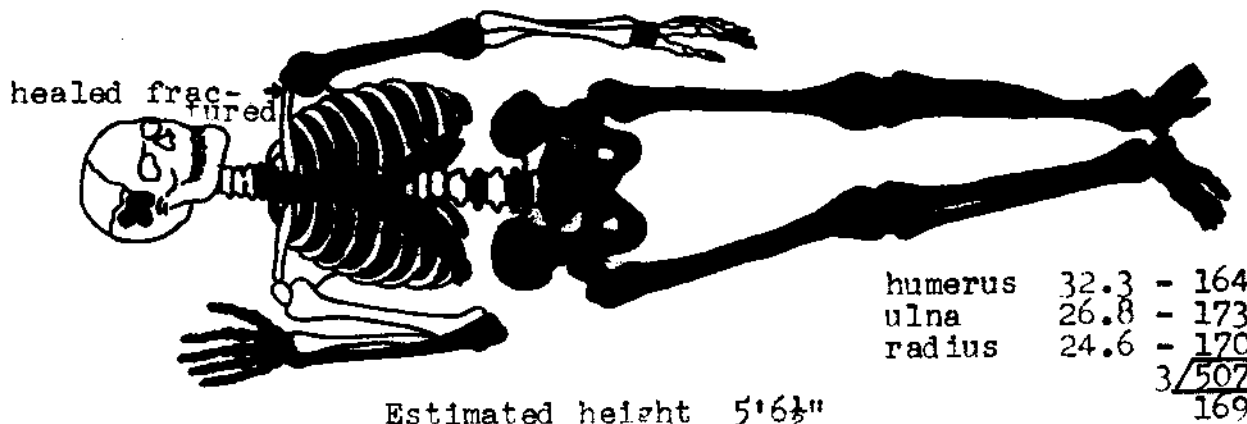
"UNIDENTIFIABLE"

Paul R. Nichols

PAUL R NICHOLS
Chief Ident. Section

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

19. BLACK OUT PARTS OF BODY NOT RECOVERED



humerus	32.3	-	164
ulna	26.8	-	173
radius	24.6	-	170
	3	x	507
		=	169

Estimated height 5'6 1/2"

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 tag, personal effect or any other means of identification found with remains.

"UNIDENTIFIABLE"
"BY REASON OF LACK OF 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

PAUL R NICHOLS
 Chief Ident. Section

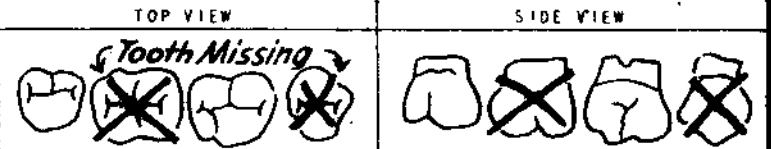
SIGNATURE

Paul R. Nichols

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN WILSON, Merle E. 37701166				2. DATE OF REPORT 22 October 1949	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.		4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT REINTERMENT
PHYSICAL DESCRIPTION AGE: 35 + years					
8. ESTIMATED WEIGHT U T D	9. ESTIMATED HEIGHT 5' 6 1/8"	10. COLOR OF HAIR U T D		11. RACE White	
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS Two tags: Wilson, Merle E 37701166					
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES N O N E					
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 Bony growth on the acromial extremity of right clavicle and on the acromian process of the right scapula may be an old bone fracture or injury.					
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					

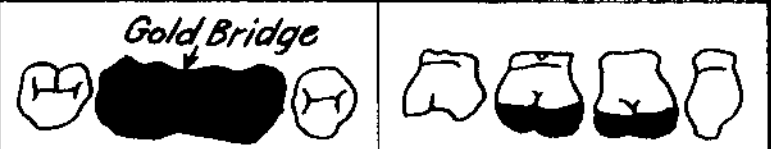
MISSING TEETH: ALL TEETH MISSING THROUGH EX-TRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" 'D OUT AND LABELED THUS:



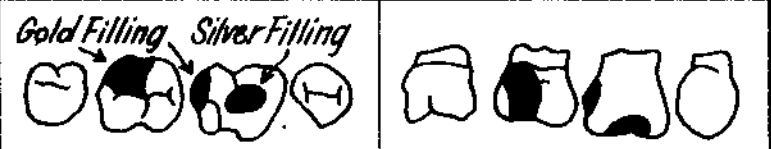
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCE-LAIN), THUS:



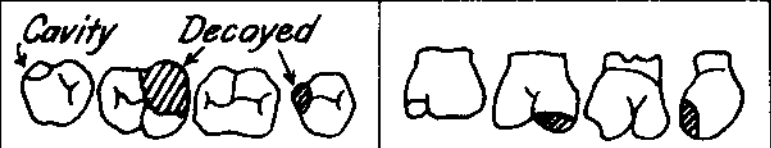
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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:

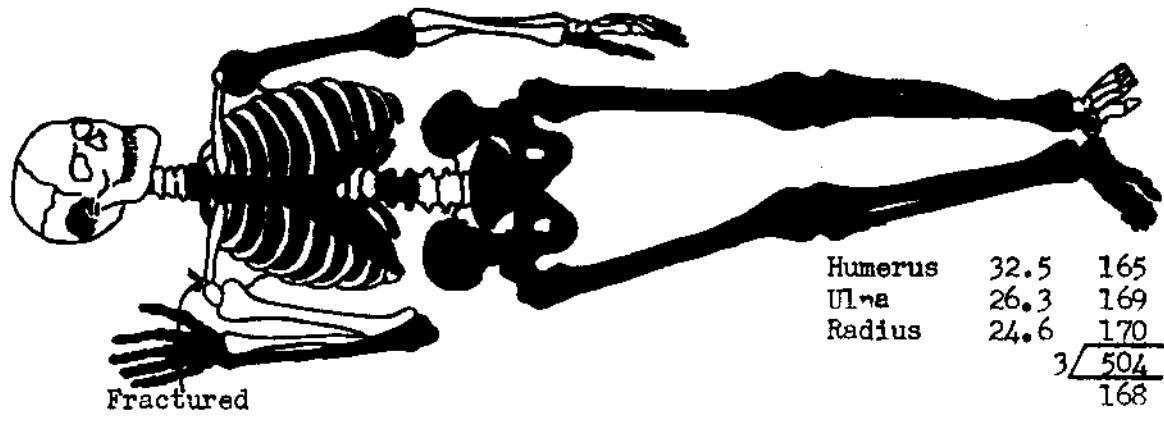


RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
X						P			P		X	P	X	P	X
Side View	[Tooth diagrams for side views]														Side View
[Tooth diagrams for top views]															
[Tooth diagrams for lower side views]															
		P		P				P	X			P	X	P	λ
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

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

Paul R. Nichols
PAUL R NICHOLS
Chief, Identification Section

Incl 2²



Estimated height: 5' 6 1/8".

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

This is the remains of a male individual, of white ancestry, short and of average muscularity, and in his mid or late thirty's. The height estimate is based upon measurement of the long bones of the arms only.

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

ROBERT B FOX
Anthropologist

SIGNATURE

IDENTIFICATION DATA

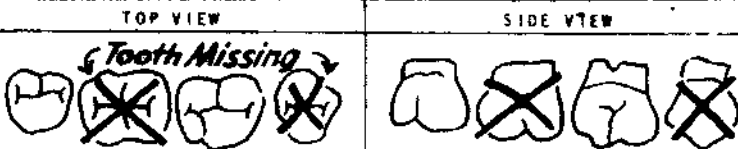
1. REMAINS OF UNKNOWN WILSON, Merle E., 37701166				2. DATE OF REPORT 22 March 1950	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.		4. PLOT	5. ROW	6. GRAVE	7. DATE OF
					DISINTERMENT REINTERMENT
PHYSICAL DESCRIPTION				AGE: 30-40 years	
8. ESTIMATED WEIGHT U T D	9. ESTIMATED HEIGHT 5' 6"	10. COLOR OF HAIR U T D		11. RACE White	
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">N O N E</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 RADIOLOGIC REPORT, USAPSH, APO 1105: RIGHT CLAVICLE: There is a small pertuberance arising from the upper border of the acromial end of the right clavicle which viewed in different projections appears like an old chip fracture. Firm union between fragments is however present. There seems to be an interruption in the distribution of the travicular pattern at this level. (The left clavicle here present has been used for control.) RIGHT SCAPULA: There is an exestesis arising from the upper border of the					
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) acromial process which is suggestive of an old fracture with bony proliferation. Sgd. H. Zialcita, MD., 23 March 1950 <p align="center">N O N E</p>					

Incl # 8

18.

TOOTH CHART

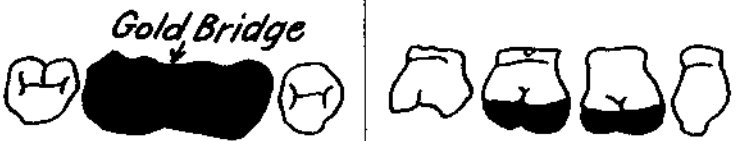
MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X"ED OUT AND LABELED THUS:



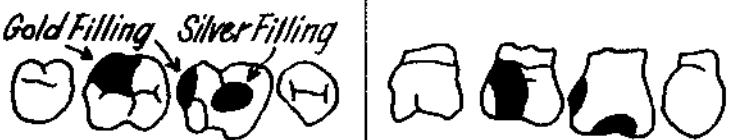
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:



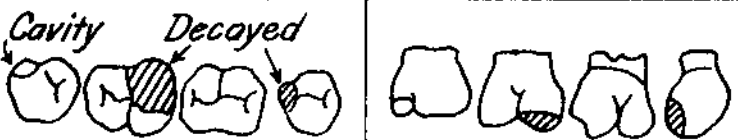
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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:

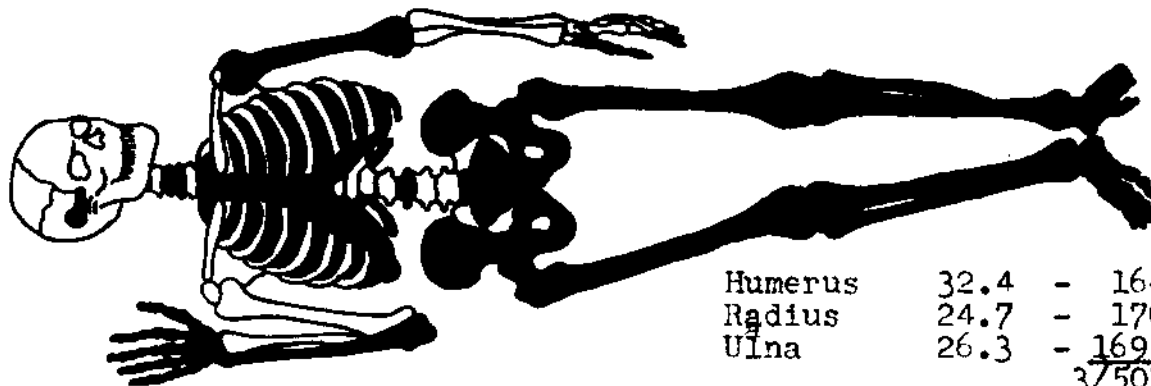


RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
X						B		B	S/m		X	A/m	X	A/O	X
Side View															Side View
Top View															UPPER
Top View															LOWER
Side View															Side View
		A/O		B				B	X			B	X	A/O	X
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

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."

Paul R. Nichols
 PAUL R NICHOLS
 Chief, Identification Section

19. BLACK OUT PARTS OF BODY NOT RECORDED



Humerus	32.4	-	164
Radius	24.7	-	170
Ulna	26.3	-	169
			<u>37503</u>
			167-2/3

Estimated height - 5' 6"

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

- (1) Male
- (2) White
- (3) Estimated height - 5' 6"
- (4) " age - 30 to 40 years or possible slightly older.
- (5) Old fracture of clavicle, a "chip fracture", and of right scapula (see item #16).

See attached Anthropologist's statement dated 22 Mar 1950.

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

ROBERT B FOX
 Anthropologist

SIGNATURE

CENTRAL IDENTIFICATION POINT
AGRS APO 900
NICHOLS FIELD, MANILA, P.I.

22 March 1950

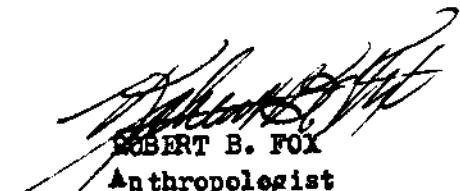
S T A T E M E N T

Reference: Remains stored as WILSON, Merle E., 37701166

The above remains was reprocessed by me this date for proper segregation, and new QMC Forms 1044 were accomplished.

The paucity of this remains precludes thorough articulation as a check for proper association; nevertheless, the texture, muscularity, relative sizes of the bones, as well as general bone morphology, denote that this remains is properly segregated, and represents one and the same individual.

The two tags present with the remains are not original ID tags, *but* tags prepared at the cemetery.


ROBERT B. FOX
Anthropologist

C O R R E C T E D

R E S T R I C T E D

RE/
REPORT OF INTERMENT

Unknown X-17		B-24 Plane No. 1441381		USAAF	
Last Name	First	Initial	Serial number	Rank	Organization
Talisay Area		Feb 45		KIA Plane crash	
Place of death		Date of death		Cause of death	
09001 1 Oct 45		USAF CEMETERY BAGOLOD No. 1 NEGROS OCCIDENTAL			
Time and date of burial		Name of cemetery			
386	20	American Dead		Reg Cross	
Grave number	Row numbers	Cemetery Section		Type marker	
Unknown	1 Oct 45		O'Conner		
Religion	Date of burial service		Name of chaplain		

Disposition of identification tags: Buried with body yes no XXX

No identification tags found. Duplicate of this Report of Interment enclosed in identification bottle buried with body. Zinc strip with pertinent information thereon attached to marker/cross XXX

Only one identification tag found--buried with body. Zinc strip with pertinent information attached to marker/cross.

Identified by EMT _____ Identified by personnel of deceased's Organ _____
Other identification data No teeth available for charting

Body on Right	<u>Empty</u>				
	Family	Initial	First	Serial No.	Rank Organ Grave
Body on Left	<u>Kropiewnicki, Stanley P. 32767647 Pfc. CoA 503 385</u>				
	Family	Initial	First	Serial No.	Rank Organ Grave

Name of LEGAL NEXT OF KIN	Address
PERSONAL EFFECTS FOUND ON BODY: NONE	<u>XXX</u>
DISPOSITION OF PERSONAL EFFECTS:	
This body was originally buried in an isolated grave by Josue R. DeJose c/o office of the mayor, Talisay. Dissenters and moved to <u>grave 338 along with X-4. Later dissenters and moved to this grave</u>	
Rank of Recipient	Name Organization Title Station Date

Items:
Killed in same plane as Charles H. ... (336) and William Hunter, 1st Lt (337) Row 17

/s/t/DONALD E. ABBOTT
1st Lt. Inf.

QMGMT 293

2d Ind

Unknown X-385

Leyte #1, P.I.

SUBJECT: Identification of World War II Deceased

Dept of the Army, OQMG, Washington 25, D. C., 1 May 1950

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

1. The identity of T/Sgt Charles N. Witham, 39276627, as established is acceptable.

2. The identifications as established for remains now stored as 1/Lt William R. Hunter, Jr., O-699422, 2/Lt Robert D. Dawkins, O-767764, and S/Sgt Merle E. Wilson, 37701166, are not acceptable for the following reasons:

a. The dental chart accomplished for remains currently stored in AGRS Mausoleum, Manila, does not compare favorably with Army records of any of the decedents involved.

b. Available dental and physical data for remains currently stored in AGRS Mausoleum, Manila, as 2/Lt Dawkins and 1/Lt Hunter will not substantiate individual identifications.


3. In view of the above, it is requested that remains now stored as 2/Lt Dawkins, 1/Lt Hunter and S/Sgt Wilson be redesignated Unknowns and Corrected Reports of Storage forwarded this Office.

FOR THE ACTING THE QUARTERMASTER GENERAL:

8 Incls
w/d

/s/ Thomas E. Cox
/t/ THOMAS E. COX
Capt OMC
Memorial Division

A TRUE COPY:


H. B. MCNEMAR
Captain, OMC

AIRMAIL

393 Und. P.I. X-385 (Copy #1)

QUART 203
342 Far East

14 February 1948

SUBJECT: Identification of World War II Deceased

**TO: Commanding Officer
American Graves Registration Service
Philson Base
APO 930, c/o Postmaster
San Francisco, California**

1. Reference is made to your radio B 1437 and to Reports of Storage for remains now stored in the 4985 Mausoleum, Manila, P.I., as:

~~Dawkins, Robert E., 2nd Lt., O-767764, Manger 802, Bay 3, Crypt 5733,
(formerly Unknown X-384, Loyal #1, Grave 6444).~~

Wilson, Maria E., 1/sgt., 37701166, Manger 810, Bay 3, Crypt 2436,
(formerly Unknown X-441, Loyal #1, Grave 7949).

Hunter, William H. Jr., 1st Lt., O-699423, Manger 802, Bay 3, Crypt 5731,
(formerly Loyal #1, Grave 6329).

Witman, Charles E., 1/sgt., 30278537, Manger 802, Bay 3, Crypt 5732,
(formerly Loyal #1, Grave 6350).

2. Neither of the two (2) courses of action suggested in referenced radio is acceptable without additional information.

3. It is requested that the following investigation be conducted by your headquarters:

a. Determine the method used by Jesus R. Rojas in identifying Hunter and Witman, getting complete and detailed statement from him concerning the burial and initial disinterment of all remains involved.

b. Trace all identification tags now indicated as being with the above remains.

c. Make another attempt to locate 6th Indorsement, dated 22 February 1948, given as the authority for identifying Wilson and Dawkins.

AIRMAIL

X-393 Und. P.I. X-789 (Copy #1)

AIRMAIL

OSWALD 200

OSWALD 200

SUBJECT: Identification of World War II deceased

14 February 1950

3. Investigate the possibility that the remains now stored as Wilson may not be the same as those recovered as Unknown 2-17 during cemetery located #1.

4. Reexamine the remains now stored as Wilson.

5. It is further requested that the results of your findings be forwarded by interconnect bureau.

FOR THE QUARTERMASTER GENERAL:

1 Incl

Copy ltr dtd 27 Sep 49
w/ 2 incls

W. A. WEA
Lt. Colonel, USA
Memorial Division

JAN

TRC

J. Miller:lrc

Salsar

JW

cc--Administrative Section

cc--Sinofe

AIRMAIL

RESTRICTED

QMC Form 1042
(Rev. 1 Apr. 1946)
(Supersedes GRS Form 1, and
Rev. of 1 Apr. 45, which may be used.)

CORRECTED

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

STORAGE

DATE OF REPORT

12 May 50

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)

**UNKNOWN X-789 USAF Cemetery Leyte #1
(Formerly WILSON, Marle E.)**

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

**Tortosa, Negros
Occidental, 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)

(See Remarks)

WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)

Yes (2)

COMPLETED TOOTH CHART ON QMC FORM 1045 ATTACHED HERETO

YES

NO

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

46185 ... MANILA P. I.

DATE OF BURIAL

20 Nov 47

HOUR

1530

BURIED IN (Shroud, blanket, or name of other)

Casket

TYPE OF GRAVE
MARKER

PLOT No.

800

ROW No.

10B

GRAVE No.

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.

7949

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)

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

SIGNATURE OF PERSON PREPARING REPORT

RAYMOND H. TANGUAY, SPC, 8131st Sv Un

SIGNATURE OF GRS OFFICER VERIFYING REPORT

A. B. McHEMAR, Capt., QMC, Chief, Rec Br

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

RESTRICTED

Section 3. UNIDENTIFIED REMAINS.

INSTRUCTIONS:

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

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

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

Identification Section
 MAY 28 1950



REMARKS:

Subject remains are redesignated to unknown status as per 2d Ind fr the DA, OQMG, Wash. 25, D. C., file OQMG 293, Unknown X-385 Loyte #1, P.I., dtd 1 May 1950, subject: Identification of World War II Deceased.
 (True Copy Attached)

LEFT
LITTLE FINGER

LEFT
RING FINGER

LEFT
MIDDLE FINGER

LEFT
INDEX FINGER

LEFT
THUMB

RIGHT
THUMB

RIGHT
INDEX FINGER

RIGHT
MIDDLE FINGER

RIGHT
RING FINGER

RIGHT
LITTLE FINGER

RESTRICTED

32533

WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

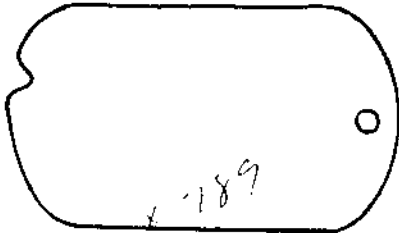
REPORT OF INTERMENT
(AR 30-1810 and AR 30-1815)

STORAGE

DATE OF REPORT

5 Feb 48

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)		SERIAL NO.
WILSON, Merle E.		37 701 166
GRADE	ORGANIZATION	BRANCH OF SERVICE
T/Sgt	Unknown	Army
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
	Unknown	

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
V. gros, P.I.	P. I. A	8 Nov 44

EMERGENCY ADDRESSEE (Name, relationship, and address)
Mrs. Merle W. Wilson (W) 1500 Peterson St., Fort Collins, Colorado

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none)	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)
None	
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
GRS MAUSOLEUM, MANILA

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
20 Nov 47	1530	Casket	None	810	2	2436

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.
Yes	USAF Cem. Ieyte #1, P.I.			7949

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
		NAT

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.
CLAPMAN, Ray L	Pvt	40731519	Co. D, 503rd Para Inf	2438

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
SOLIZ, Jesus A	Pfc	39280301	Hq. Co., 160th Inf	2434

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
V. J. ANJINO, T/5 GRC	P. S. FAXOPIO, 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 Officer. Copies for retention in theater as prescribed by theater commander.

RESTRICTED

Section 3. UNIDENTIFIED REMAINS.

INSTRUCTIONS:


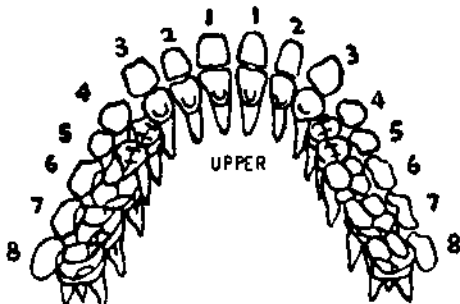




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

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

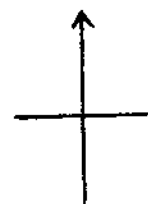
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
--------	--------	---------------	---------------	-------------------------------

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

OTHER IDENTIFICATION CLUES

FILLINGS	 <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:

LEFT
LITTLE FINGER

LEFT
RING FINGER

LEFT
MIDDLE FINGER

LEFT
INDEX FINGER

LEFT
THUMB

RIGHT
THUMB

RIGHT
INDEX FINGER

RIGHT
MIDDLE FINGER

RIGHT
RING FINGER

RIGHT
LITTLE FINGER

/fbp

IDENTIFICATION DENTAL CHART

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

UNIT			ORGANIZATION		
Negros, P.I.			USAF Cemetery		
PLACE OF DEATH			PLACE OF BURIAL		
-			-		
-			7949		
PLOT			ROW		
-			GRAVE NO.		

13 Nov '47

DATE

WILSON, Merle E.

T/Sgt

37701166

LAST NAME

FIRST

INITIAL

RANK

SERIAL NO.

	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
	UPPER TEETH																
	RIGHT								LEFT								
TYPE	X						⊗			J		X	A	A	X	X	TYPE
LOCATION										M				o			LOCATION

INSIDE — LOOKING OUT

	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16	
	LOWER TEETH																
	RIGHT								LEFT								
TYPE			A		⊗			⊗					⊗	X	A	X	TYPE
LOCATION			o												of		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	OXYPHOSPATE (CEMENT)	LINGUAL (TOWARD TONGUE)
POSTHUMOUSLY MISSING (LOST AFTER DEATH)		FACIAL (TOWARD CHEEK)

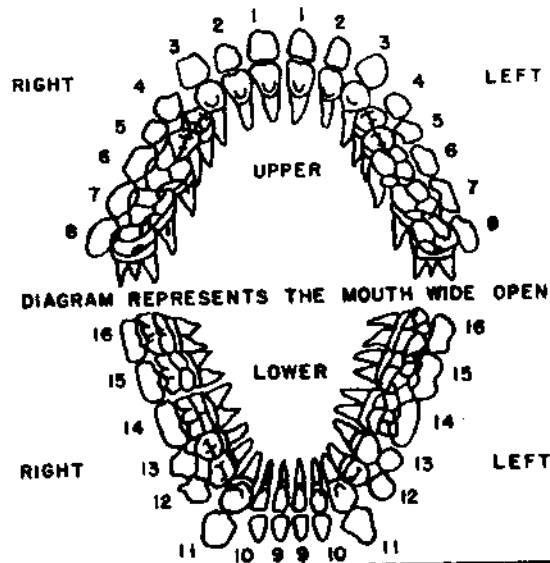
INSTRUCTIONS:

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:

/s/ Jason R. Taylor
SIGNATURE OF PERSON WHO PREPARED CHART

/s/ James H. Jackson
VERIFIED BY ORS OFFICER

/p/ JASON R. TAYLOR, Embalmer
NAME AND RANK TYPED OR PRINTED

/t/ JAMES H. JACKSON, Major, TC
NAME AND RANK TYPED OR PRINTED

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

13 November 1947
DATE

CERTIFIED TRUE COPY:


L.S. Panopio
L.S. PANOPIO,
2nd Lt., INF

CORRECTED

RESTRICTED

1jt

794932588

WD GRC FORM 1042 (Rev. 1 Apr. 1948) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)				DATE OF REPORT CORRECTED 25 Feb 46		
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.				SERIAL No.		
		NAME (Last, first, middle initial)				37 701 166		
		GRADE		ORGANIZATION		BRANCH OF SERVICE		
		T/Sgt		424 Bn Sq., 307 Bn Grp		Army		
RACE		RELIGION		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY				
PLACE OF DEATH		CAUSE OF DEATH			DATE OF DEATH			
Free Talisay Negros, P.I.		Kia, Plane crash			8 Nov 44			
EMERGENCY ADDRESSEE (Name, relationship, and address)								
Mrs. Merle E. Wilson (W) 1500 Peterson St., Fort Collins, Colorado.								
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none)		IF NO TAGS FOUND ON BODY DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)						
None		Disinterred fr USAF Cemetery, Bacolod #1, Occidental Negros, P.I. Changed fr X-441, Leyte #1, to WILSON, Merle E, per ltr Hqs, AFWESPAC, dtd 22 Feb 45, per 8th Ind.						
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)								
Yes								
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME								
Aid 490 None								
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.								
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY								
USAF Cemetery Leyte #1, P.I.								
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.		
2 Feb 46	1000	shelter half	Reg Cross			7949		
WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE							
Yes	USAF Cemetery Bacolod #1, Occidental Negros, P.I.			PLOT No.	ROW No.	GRAVE No.		
				1	20	386		
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY					
			Corrected Report buried w/body Corrected metal attached to marker					
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.		
DAHIEL, Fred E						7948		
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)			RANK	SERIAL No.	ORGANIZATION	GRAVE No.		
KRIEG, Donald P						7950		
SIGNATURE OF PERSON PREPARING REPORT				SIGNATURE OF GRS OFFICER VERIFYING REPORT				
Sgt Charles W. Hallock, GRS				WILLIAM D ROGERS, 1st 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

RESTRICTED

Section 3.- IDENTIFIED 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.

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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	<p>SILVER FILLING GOLD FILLING</p>	<p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN MANDIBLE</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:

CONDITION OF BODY PRECLUDED FINGERPRINTING AND TOOTHCHARTING:

14 MAR 1948

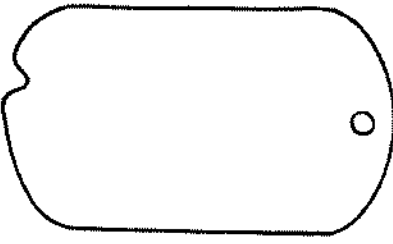
LEFT LITTLE FINGER
LEFT RING FINGER
LEFT MIDDLE FINGER
LEFT INDEX FINGER
LEFT THUMB
RIGHT THUMB
RIGHT INDEX FINGER
RIGHT MIDDLE FINGER
RIGHT RING FINGER
RIGHT LITTLE FINGER

COPY
RESTRICTED

WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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


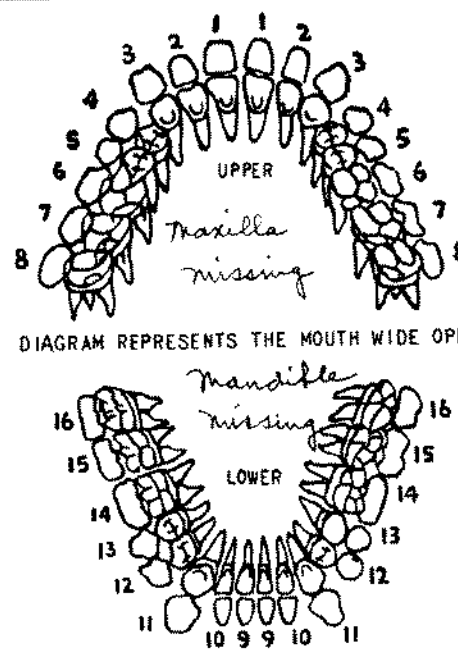





DATE OF REPORT
CORRECTED
25 Feb 46

<p><i>Imprint Identification Tag If Possible. DO NOT TYPE</i></p> 	Section 1.—IDENTIFICATION.		
	NAME (Last, first, middle initial)		SERIAL NO.
	WILSON, Merle E; formerly (X-17, Bacolod #1) (X-441, Leyte #1)		37 701 166
	GRADE	ORGANIZATION	BRANCH OF SERVICE
T/Sgt	424 Bn Sq., 307 Bn Gp	Army	
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	
PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH	
Free Talisay Negros, P.I.	Kia, Plane crash	8 Nov 44	
EMERGENCY ADDRESSEE (Name, relationship, and address)			
Mrs. Merle E. Wilson (W) 1500 Peterson St., Fort Collins, Colorado			
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none)	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 5 on reverse)		
None	Disinterred fr USAF Cemetery, Bacolod #1, Occidental Negros, P.I. Changed fr X-441, Leyte #1, to WILSON, Merle E, per ltr Hqs, AFWESPAG, dtd 22 Feb 45, per 8th Ind.		
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)			
Yes			
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME			
None			

Section 2.—BURIAL. <i>If other than in established cemetery, furnish sketch and map coordinates on reverse.</i>					
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY					
USAF Cemetery Leyte #1, P.I.					
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	GRAVE No.
2 Feb 46	1000	shelter half	Reg Cross		7949
WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE				
Yes	USAF Cemetery Bacolod #1, Occidental Negros, P.I.				
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY			
		Corrected Report buried w/body Corrected metal attached to marker			
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.	
DAHILL, Fred E	Pvt	31376405	Co. E 503rd Proht INF	7948	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.	
KRIEG, Donald P				7950	
SIGNATURE OF PERSON PREPARING REPORT			SIGNATURE OF GRS OFFICER VERIFYING REPORT		
s/tsgt Charles W. Hallock, GRS			s/t/ WILLIAM D ROGERS, 1st 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.					

Incl #5

RESTRICTED

LEFT LITTLE FINGER	Section 3 UNIDENTIFIED REMAINS.			
	<p>INSTRUCTIONS:</p> <p>(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.</p> <p>(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.</p>			
LEFT RING FINGER	HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR
	BIRTHMARKS, SCARS, OR TATTOOS			
LEFT MIDDLE FINGER	WEAPON AND SERIAL NO.		LAUNDRY MARKS	
	WHERE BODY WAS BURIED OR FOUND			
LEFT INDEX FINGER	OTHER IDENTIFICATION CLUES			
LEFT THUMB	<p>FILLINGS</p>  <p>SILVER FILLING GOLD FILLING</p>		 <p>UPPER Maxilla missing</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p> <p>Mandible missing</p> <p>LOWER</p>	
	<p>CAVITIES</p>  <p>CAVITY DECAYED</p>			
RIGHT THUMB	<p>MISSING TEETH</p>  <p>TOOTH MISSING</p>			
	<p>CROWNED TEETH</p>  <p>PORCELAIN CROWN GOLD CROWN</p>			
RIGHT INDEX FINGER	<p>BRIDGE WORK</p>  <p>GOLD BRIDGE</p>			
RIGHT MIDDLE FINGER	<p>FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY</p> <div style="text-align: center;">  </div>			
RIGHT RING FINGER	REMARKS:			
RIGHT LITTLE FINGER	CONDITION OF BODY PRECLUDED FINGERPRINTING AND TOOTHCHARTING.			

RESTRICTED
REPORT OF INTERMENT
(TM 10-630 AND AR 30-1815)
"COMMON GRAVE"

"AMERICAN SECTION" *31*

U 327

UNKNOWN X-17

U.S. Air Force

(Last name) (First) (Initial) (Serial number) (Rank) (Organization)

Tortosa, Negros, P.I.

Estimated:
February 1945

KIA - Plane Crash - Badly

Burned and Crushed

(Place of death) (Date of death) (Cause of death)

0900 - 26 May 1945

USAF Cem. Bacolod No. 1,

Occidental, Negros, P.I.

(Time and date of burial) (Name of cemetery) (Name or coordinates of location)

338

17

Reg. Cross

(Grave number) (Row number) (Plot number) (Type of marker—Regulation V-shaped or other)

Disposition of identification tags: Buried with body Yes No Attached to marker Yes No

Religion: **Undeterminable**

Duplicate of this Report of Interment enclosed in identification bottle

buried with body. Zinc strip, with pertinent information thereon, attached
(If no identification tags, what means of identification are buried with the body?) **to cross.**

(If no identification tags, but identity definitely established, give particulars)

Body buried on **RIGHT David W. Winey** **39467603** **Pfc** **Co F,** **185th Inf** **339**
(Name) (Serial number) (Rank) (Organization) (Grave number)

Body buried on **LEFT William Hunter** **1st Lt** **U.S. Air Force** **337**
(Name) (Serial number) (Rank) (Organization) (Grave number)

Undeterminable

(Name and address of EMERGENCY ADDRESSEE)

(Name and address of LEGAL NEXT OF KIN)

List only personal effects **FOUND ON BODY** and disposition of same: **None**

RESTRICTED

IF DECEASED UNIDENTIFIED

TAKE FINGERPRINTS OF BOTH HANDS (W. D. Cir. No. 79; 3/19/43). If unable to obtain a complete set of fingerprints, TAKE THOSE YOU CAN, and fill in as many of the following as you are able:

Height: Undeterminable Apparent nationality: Undeterminable
 Weight: Undeterminable Laundry marks: None
 Color of eyes: Undeterminable Number of rifle: No arms found
 Color of hair: Undeterminable Wear glasses? Undeterminable
 Race: Undeterminable Is tooth chart attached? No - see below remark
 (If possible, have medical personnel take a tooth chart)

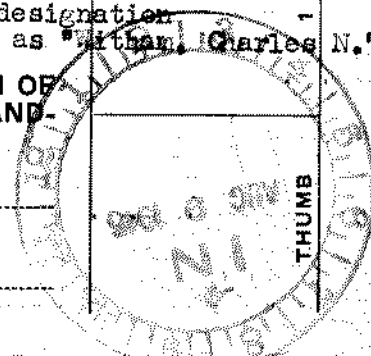
In space below, locate and describe any scars, birthmarks, moles, deformities, etc.: Two bodies ("UNKNOWN X-4 and UNKNOWN X-17") were so badly burned and crushed as to make fingerprinting and the taking of a tooth chart (as well as determination of data listed above) impossible. Bodies originally interred in one grave (isolated) by Josue R. DeJose, C/O Office of the Mayor, Talisay, Occidental, Negros, P.I. and disinterred by this GRS unit.

Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc.: Anatomical remains of these two (2) crew members of a bomber B-24, No. 1441381, could not be matched as individual bodies, wherefor interment made in one grave, with designation "UNKNOWN X-4 and UNKNOWN X-17. Two bodies were from same plane as "William, Charles N." Grave #336 and "Hunter, William", Grave #337.

IF THIS IS AN ISOLATED BURIAL, ATTACH A SKETCH OF THE LOCATION, ORIENTED WITH PERMANENT LANDMARKS.

.....
 S/Sgt Arthur B. Doad, 101st AM Gr Reg Mat
William W. Beardsley

6012 WILLIAM W. BEARDSLEY, 1st Lt & C
 (Verified by Army GRS Officer)



LEFT HAND

RIGHT HAND

4
3
2
1
THUMB

4
3
2
1
THUMB

R E S T R I C T E D
REPORT OF INTERMENT
(TM 10-630 AND AR 30-1815)

"AMERICAN SECTION"

UNKNOWN X-17

U.S. Air Force

(Last name) (First) (Initial) (Serial number) (Rank) (Organization)

Tortosa, Negros, P.I. **Estimated: KIA - Plane Crash - Badly**
(Place of death) (Date of death) (Cause of death)

0900 - 26 May 1945 **USAF Cem. Bacolod No. 1, Occidental, Negros, P.I.**
(Time and date of burial) (Name of cemetery) (Name or co-ordinates of location)

338

17

Reg. Cross

(Grave number) (Row number) (Plot number) (Type of marker--Regulation V-shaped or other)

Disposition of identification tags: Buried with body Yes () No () Attached to marker Yes () No ()

Religion: **Undeterminable**

Duplicate of this Report of Interment enclosed in identification bottle buried with body. Zinc strip, with pertinent information thereon, attached to cross.

(If no identification tags, what means of identification are buried with the body?)

(If no identification tags, but identity definitely established, give particulars)

Body buried on **RIGHT David W. Winey** **39467603** **Pfc** **Co F,** **185th Inf** **339**
(Name) (Serial number) (Rank) (Organization) (Grave number)

Body buried on **LEFT William Hunter** **1st Lt** **U.S. Air Force** **337**
(Name) (Serial number) (Rank) (Organization) (Grave number)

Undeterminable

(Name and address of EMERGENCY ADDRESSEE) (Name and address of LEGAL NEXT OF KIN)

List only personal effects **FOUND ON BODY** and disposition of same: **None**

Incl # 7

R E S T R I C T E D

C O P Y -OM Printing Form 3-10-45 (30A)

IF DECEASED UNIDENTIFIED

TAKE FINGERPRINTS OF BOTH HANDS (W.D. Cir. No. 10; 3/19/43).

If unable to obtain a complete set of fingerprints, **TAKE THOSE YOU CAN**, and fill in as many of the following as you are able:

Height: **Undeterminable** Apparent nationality: **Undeterminable**
 Weight: **Undeterminable** Laundry marks: **None**
 Color of eyes: **Undeterminable** Number of rifle: **No arms found**
 Color of hair: **Undeterminable** Wear glasses? **Undeterminable**
 Race: **Undeterminable** Is tooth chart attached? **No - see below remark**

(If possible, have medical personnel take a tooth chart)

In space below, locate and describe any scars, birthmarks, moles deformities, etc.: **Two bodies ("UNKNOWN X-4 and UNKNOWN X-17") were so badly burned and crashed as to make fingerprinting and the taking of a tooth chart (as well as determination of data listed above) impossible. Bodies originally interred in one grave (isolated) by Josue R. Dejeu, C/O Office of the Mayor, Talisay, Occidental, Negros, P.I. and disinterred by this GHS unit.**

Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc. **Anatomical remains of these**

two (2) crew members of a bomber B-24, No. 1441381, could not be matched as individual bodies, wherefor interment made in one grave, with designation

"UNKNOWN X-4 and UNKNOWN X-17. Two bodies were from same plane as Witham, Charles N. Grave No. 336 and Hunter, William, Grave No. 337.

(Signature of officer or other person reporting burial)

S/Sgt Arthur B. Dodd, 101st QM Gr Reg Plat

/s/t/ WILLIAM W. BEARDSLEY, 1st Lt QMC

(Verified by Army GHS Officer)

LEFT HAND

4

3

2

1

THUMB

4

3

2

1

THUMB

RIGHT HAND

Graves Registration
Form No. 1
(Revised May 11, 1943)

RESTRICTED
REPORT OF INTERMENT
(TM 10-630 AND AR 30-1815)

"AMERICAN SECTION"

U-327

UNKNOWN X-17

"COMMON GRAVE"

U.S. Air Force

(Last name)	(First)	(Initial)	(Serial number)	(Rank)	(Organization)
Tortosa, Negros, P.I.			Estimated February 1945	KIA-	Plane crash - badly burned and
(Place of death)			(Date of death)		(Cause of death) crushed
0900 - 26 May 1945			USAF Cem. Bacolod #1, Occidental Negros, P.I.		
(Time and date of burial)			(Name of cemetery)		(Name or co-ordinates of location)

338

17

Regulation Cross

(Grave number)	(Row number)	(Plot number)	(Type of marker—Regulation V-shaped or other)
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Disposition of identification tags: Buried with body Yes No Attached to marker Yes No

Religion Undeterminable Duplicate of this Report of Interment enclosed in identification
CERTIFIED TRUE COPY:

Paul J. Tonn bottle buried with body. Zinc strip, with pertinent information
(If no identification tags, what means of identification are buried with the body?)
PAUL J. TONN thereon attached to cross.

Captain, GMC (If no identification tags, but identity definitely established, give particulars)
Assistant

Body buried on RIGHT	David W. Winey	39467603	Pfc.	Co F, 188th Inf.	339
	(Name)	(Serial number)	(Rank)	(Organization)	(Grave number)
Body buried on LEFT	William Hunter		1st Lt.	U.S. Air Force	337
	(Name)	(Serial number)	(Rank)	(Organization)	(Grave number)

Indeterminable

Name and address of EMERGENCY ADDRESSEE)

(Name and address of LEGAL NEXT OF KIN)

FOUND ON BODY and disposition of same: None

RESTRICTED

IF DECEASED UNIDENTIFIED

TAKE FINGERPRINTS OF BOTH HANDS (W. D. Cir. No. 79; 3/19/43). If unable to obtain a complete set of fingerprints, **TAKE THOSE YOU CAN**, and fill in as many of the following as you are able :

Height : Undeterminable Apparent nationality : Undeterminable
 Weight : Undeterminable Laundry marks : None
 Color of eyes : Undeterminable Number of rifle : No arms found
 Color of hair : Undeterminable Wear glasses ? Undeterminable
 Race : Undeterminable Is tooth chart attached ? No - see below remark
 (If possible, have medical personnel take a tooth chart)

In space below, locate and describe any scars, birthmarks, moles deformities, etc. : Two bodies (Unknown X-4 and Unknown X-17) were so badly burned and crushed as to make fingerprinting and the taking of a tooth chart (as well as determination of data listed above) impossible. Bodies originally interred in one grave (isolated) by Josue R. DeJosa, c/o Office of the Major, Talisay, Occidental Negros, P.I. and disinterred by this GRS Unit. Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc. : Anatomical remains of these two (2) crew members of a bomber B-24, No. 1441381, could not be matched as individual bodies, wherefor interment made in one grave, with designation "Unknown X-4 and Unknown X-17. Two bodies were from same plane as "Witham, Charles M." Grave #336 and "Hunter, William, Grave #337.

IF THIS IS AN ISOLATED BURIAL, ATTACH A SKETCH OF THE LOCATION, ORIENTED WITH PERMANENT LANDMARKS.

/s/ S/Sgt Arthur B. Dode, 101st QM Gr Reg Plat
 (Signature of officer or other person reporting burial)

/s/ William W. Beardsley, 1st Lt., QMC
 (Verified by Army GRS Officer)

LEFT HAND

RIGHT HAND

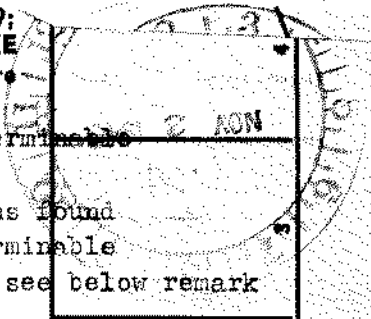
3

2

1

THUMB

THUMB



U327
U 327

Corrected

RESTRICTED
Re/
REPORT OF INTERMENT

Unknown X-17 B-24 Plane No. 1441301 USAAF

Last name	First	Initial	Serial number	Rank	Organization
Place of death		Date of death	Cause of death		
Time and date of burial		Name of cemetery			
Grave number	Row number	Cemetery section	Type marker		
Religion	Date of burial service	Name of chaplain			

Tallies, Area
Feb 45
KIA Plane crash
P.D.

0800T 1 Oct 45
USAF CEMETARY BACOLOD #1 NEGROS OCCIDENTAL

236 00 American Disc Reg Cross

Unknown 1 Oct 45 Oceanic

Disposition of identification tags: Buried with body yes no

No identification tags found. Duplicate of this Report of Interment enclosed in identification bottle buried with body. Zinc strip with pertinent information thereon attached to marker/cross XXX

Only one identification tag found--buried with body. Zinc strip with pertinent information attached to marker/cross.

Identified by EMT _____ Identified by personnel of deceased's Organ _____
Other identification data No teeth available for charting

Body on Right Empty

Family	Initial	First	Serial No.	Rank	Organ	Grave
Body on Left	Krbolamicki, Stanley P.		50767047	Pfc.	354 500	285
Family	Initial	First	Serial No.	Rank	Organ	Grave

Name of LEGAL NEXT OF KIN	Address
---------------------------	---------

PERSONAL EFFECTS FOUND ON BODY: NONE XXX

DISPOSITION OF PERSONAL EFFECTS:

This body was originally buried in an isolated grave by Josue R. DeJosa c/o office of the mayor, Tallies. Disinterred and moved to grave 129 along with X-4. Later disinterred and moved to this grave

Rank of Recipient	Name	Organization	Title	Station	Date
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Items:
Killed in same plane as Charles W. Witham (776) and William Hunter, 1st Lt (237) Row 17

Donald E. Abbott
DONALD E. ABBOTT
1st Lt. Inf.

RESTRICTED

