

PREPARED BY PHIL COM

DISINTERMENT DIRECTIVE

3

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

7740 60200

DATE

23 05 48
DAY MONTH YEAR

NAME

UNKNOWN X - 161

SERIAL NUMBER

GRADE

ARM

RACE

RELIGION

CEMETERY

USAF CEMETERY LEYTE NO. 1, P. 1.

PLOT

ROW

GRAVE

3714

DISPOSITION OF REMAINS

7701

00

CODE

DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

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

NAME AND ADDRESS OF NEXT OF KIN

(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

FILE
AUG 2 1948

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

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

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

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7740 00180

DATE
15 | 05 | 48
DAY | MONTH | YEAR

NAME
UNKNOWN

SERIAL NUMBER
X-000161

RANK
O

ARM
O

DATE OF DEATH

CEMETERY
USAF CEMETERY LEYTE NO 1

DISPOSITION OF REMAINS
7701 | 80
CODE | DIST. PT.

PLOT
3714

ROW
PHILIPPINE ISLANDS

CAUSE OF DEATH
6

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
FORT MCKINLEY CEMETERY
MANILA, PHILIPPINE ISLANDS
(BY ADMINISTRATIVE ORDER)

NAME AND ADDRESS OF NEXT OF KIN

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISTINTERRED

IDENTIFICATION TAG ON
 REMAINS
 MARKER

ORGANIZATION
UNKNOWN

RELIGION

IDENTIFICATION VERIFIED BY
NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES

REMAINS PREPARED AND PLACED IN CASKET

DATE
CASKET SEALED BY

EMBALMER (Signature)

CASKET BOXED AND MARKED

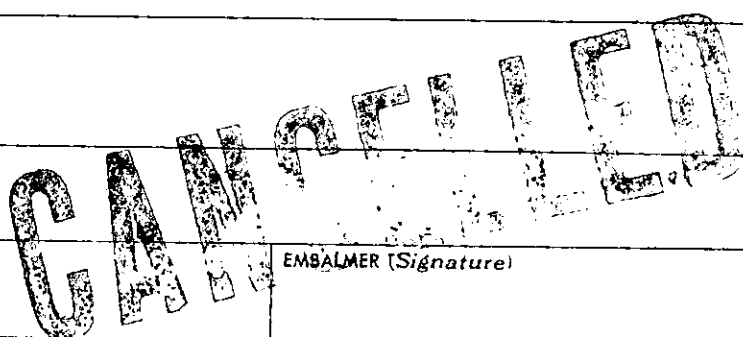
SHIPPING ADDRESS VERIFIED BY

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 GRS INSPECTOR

Prepare Discrepancy Report @MC Form 1194a for major discrepancies.



RECORD OF CUSTODIAL TRANSFER

REPAIR/MAINTENANCE
 RECORDS BRANCH
 JUL 1 3 42 PM '49
 MEMORIAL DIVISION

1. SHIPPED

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

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

1

Interred 10 June 1949
L 12 40 Ft. McKinley

Don L. Smathers
DON L. SMATHERS

DISINTERMENT DIRECTIVE

L-12-40

PREPARED BY PHILCOM

1st Lt. Infantry Cemetery Officer
SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7740 80290

DATE
23 05 49
DAY MONTH YEAR

NAME: UNKNOWN X-161
SERIAL NUMBER: [] GRADE: [] ARM: [] RACE: [] RELIGION: []

CEMETERY: USAF CEMETERY LEYTE NO. 1, P. 1.
PLOT: [] ROW: [] GRAVE: 3714
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. MCKINLEY, P. 1.

NAME AND ADDRESS OF NEXT OF KIN
(ADMINISTRATIVE DECISION)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME: UNKNOWN X-161
SERIAL NUMBER: [] GRADE: [] DATE OF DEATH: [] DATE DISINTERRED: 9 June 49

IDENTIFICATION TAG ON: REMAINS MARKER
ORGANIZATION: [] RELIGION: [] IDENTIFICATION VERIFIED BY: J J McDERMOTT
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.)
(2) Maus Tags: Unk X-3254 Form X-161 Leyte.

REMAINS PREPARED AND PLACED IN CASKET

DATE: 9 June 49 BY: J J McDERMOTT

CASKET SEALED BY: J J McDERMOTT
EMBALMER (Signature): *J J McDERMOTT*

CASKET BOXED AND MARKED

DATE: 9 June 49 BY: WEYMAN L MCGUIRE, SGT, MC
SHIPPING ADDRESS VERIFIED BY: A J ROBERTSON

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

A J Robertson
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM AGRS MAUSOLEUM		TO UNITED STATES MILITARY CEMETERY	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Don L. Amathers</i>	DATE 10 JUN 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		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

REPATRIATION
 RECORDS BRANCH
 JUN 23 2 33 PM '49
 MEMORIAL DIVISION

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

CGAS 293
CGI Far East

2 May 1949

SUBJECT: Resolution of Unidentifiable Remains

TO: Commanding General
Philippine Command
Box 707, c/o Postmaster
San Francisco, California
ATTN: CGAS, PHILIPPINE COM

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

Y-1434	(formerly Y-217, Santa Barbara Pl, P. I.)
Y-1435	(formerly Y-218, Santa Barbara Pl, P. I.)
Y-2135	(formerly Y-196, Santa Barbara Pl, P. I.)
Y-2245	(formerly Y-613, Leyte Pl, P. I.)
Y-2251-A	(formerly Y-616-A, Leyte Pl, P. I.)
Y-3291	(formerly Y-161, Leyte Pl, P. I.)
Y-3229	(formerly Y-329, Leyte Pl, P. I.)
Y-3746	(formerly Y-9, Leyte Pl, P. I.)

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

FOR THE QUARTERMASTER GENERAL:

T. F. WITT
Lt. Colonel, GPO
Memorial Division

M. Beloe:jdk
vslcr
/s/

cc: Administrative action

CGAS

CGAS

OSUT 293
OIS Far East

2 May 1949

SUBJECT: Resolution of Unidentifiable Remains

TO : Commanding General
Philippine Command
APO 707, c/o Postmaster
San Francisco, California
ATTN: ACES, WILSON ROOM

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

1-1434	(formerly 1-217, Santa Barbara #1, P. I.)
1-1435	(formerly 1-218, Santa Barbara #1, P. I.)
1-2135	(formerly 1-196, Santa Barbara #1, P. I.)
1-2245	(formerly 1-613, Leyte #1, P. I.)
1-2251-1	(formerly 1-616-1, Leyte #1, P. I.)
1-3234	(formerly 1-161, Leyte #1, P. I.)
1-3429	(formerly 1-329, Leyte #1, P. I.)
1-3746	(formerly 1-9, Leyte #1, P. I.)

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

BY THE QUARTERMASTER GENERAL:

T. E. WIT
Lt. Colonel, MC
Memorial Division

W. Fields:jdk
Selscr
JW

cc: Administrative Section

338

338

QUART 293
OIS Far East

2 May 1949

SUBJECT: Resolution of Unidentifiable Remains

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

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

Y-1434	(formerly Y-217, Santa Barbara #1, P. I.)
X-1435	(formerly X-218, Santa Barbara #1, P. I.)
Y-2135	(formerly X-156, Santa Barbara #1, P. I.)
I-2245	(formerly I-613, Leyte #1, P. I.)
I-2251-A	(formerly I-616-A, Leyte #1, P. I.)
X-3254	(formerly I-161, Leyte #1, P. I.)
I-3429	(formerly I-329, Leyte #1, P. I.)
X-3746	(formerly I-9, Leyte #1, P. I.)

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. MNTZ
Lt. Colonel, GSC
Memorial Division

T. Fields:jdk
Salsar
JR

cc: Administrative Section

REB

NJS

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN X-3254 (Formerly UNK X-161, USAF Cem Leyte #1, P.I.)						2. DATE OF REPORT 8 Jan 48		
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.				4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
				DANGER	BAY	GRYP	DISINTERMENT	REINTERMENT
				813	F	1864	9 Dec 47	8 Jan 48
PHYSICAL DESCRIPTION								
8. ESTIMATED WEIGHT UTD		9. ESTIMATED HEIGHT UTD		10. COLOR OF HAIR UTD		11. RACE UTD		
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS NONE found with remains								
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES U.T.D.- due to condition of remains								
14. WAS BODY BURNED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		TO WHAT EXTENT?						
15. WAS BODY MANGLED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		To such an extent, that height can't be determined						
16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS NONE								
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) NONE								

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:			

MAXILLA AND MAXILLIARY TEETH MISSING

RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

MANDIBLE AND MANDIBULARY MISSING

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."

Maxilla and mandible missing. No loose teeth found with remains.

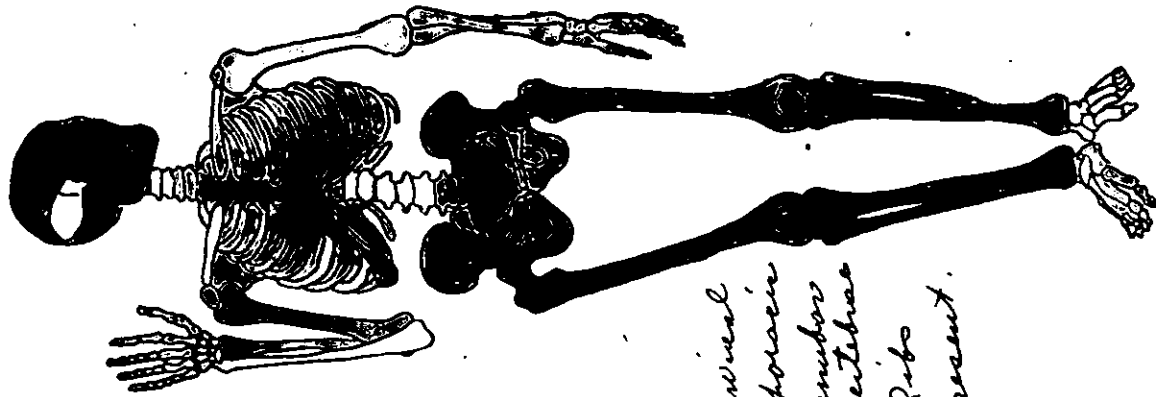
A CERTIFIED TRUE COPY:
G. T. Gamboa

G T GAMBOA
 2d Lt. MSC

/s/ Alexander P. Pottico

/s/ John H. Bennett Jr

19. BLACK-OUT PARTS OF BODY NOT RECOVERED



2-Cervical
2-Thoracic
3 Lumbar vertebrae
7-Ribs present.

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 I. D. tags or ROI bottle found with remains. No other means of identification. Circumference of skull could not be determined, due to condition of remains. Estimated weight of remains is about 1 3/4 lbs.

A CERTIFIED TRUE COPY:

G. T. Gamboa
G T GAMBOA
2d Lt MSC

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

SIGNATURE

/p/ ALEXANDER P. PETTICE SP-6
CIP LABORATORY, MANILA, P.I.

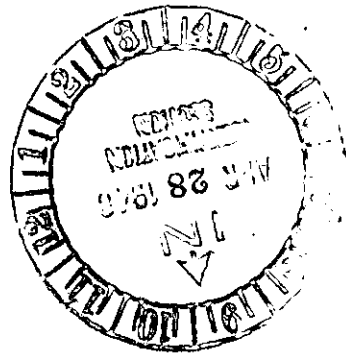
/s/ Alexander P. Pettice

RECEIVED
MAY 28 1948

RECEIVED
MAY 28 1948

MAY 28 1948

MAY 28 1948



RECEIVED
MAY 28 1948

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-3254 (Formerly Unk X-161, USAF Cemetery Leyte #1, P. I.)				2. DATE OF REPORT 25 March 49	
3. NAME OF CEMETERY USAF Cemetery Leyte #1, P. I.		4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT U T D	9. ESTIMATED HEIGHT U T D	10. COLOR OF HAIR U T D	11. RACE UNKN-OWN
------------------------------	------------------------------	----------------------------	----------------------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

NONE

13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES

NONE

14. WAS BODY BURNED? TO WHAT EXTENT?

YES NO

15. WAS BODY MANGLED? TO WHAT EXTENT?

YES NO

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

NONE

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)

NONE

"UNIDENTIFIABLE"


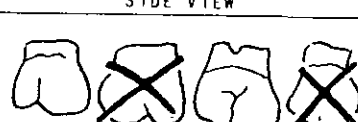






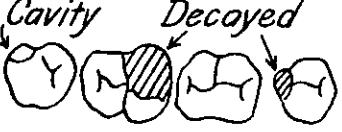

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

Received 22 Apr 49 COMMO

Not identifiable from information present

T.A. Fields - 28 Apr 49

Encl 13 8

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

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

Maxilla and mandible missing. No loose teeth found with remains.

"UNIDENTIFIABLE"

J.J. McDermott
J.J. McDERMOTT

Laboratory Officer, CIP

BY REASON OF LACK OF SUFFICIENT IDENTIFYING...

19. BLACK OUT PARTS OF BODY NOT RECOVERED



- 2 Cervical
- 2 Thoracic
- 3 Lumbar
Vertebrae
- 2 Ribs present

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 or ROI bottle found with
 remains.

Estimated weight of remains is about 1 3/4 lbs.

"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, CIP

SIGNATURE

James J. McDermott

IDENTIFICATION SECTION
REPATRIATION RECORDS BRANCH
MEMORIAL DIVISION

CATEGORY III CASE
NO CLUES
IDENTIFICATION IMPOSSIBLE
AT PRESENT TIME

R X

HHB RESTRICTED

REPORT OF INTERMENT

22509

(To be submitted through channels to the Quartermaster General, Washington, D.C.)

(Par. 21d - TM 10-630)

UNKNOWN AMERICAN SOLDIER X-161

(Last Name) (First) (Initial) (Serial No.) (Rank) (Organization)

Approximately 4 Kilometers on

(Place of Death) Azmith 60 deg from (Date of Death) (Cause of Death)
Baluga, Leyte, P.I.

1100 hrs 31 July 1945

USAF Cemetery Leyte # 1, P.I.

(Time and Date of Burial) (Place of Burial - Name and No. of Cemetery, if in a cemetery)

3714 Reg Cross Buried with body None
Attached to marker

(Grave No.) (Row No.) (Plot No.) (Kind Grave Marker) (Identification Tags)

Metal tag buried with remains and attached to Marker.

Protestant
Catholic
Hebrew

Remains found on Ground Approximately 4 kilometers on Azmith
of 60 deg. from Baluga, Leyte, P. I. Identified as U. S. soldier by
helmet found on skull. Other pertinent data to enable grave to be located. Carbine # 6086976

(Where necessary sketch to locate grave should be furnished)

(Name and address of Emergency Addressee)

(Name and address of legal next of kin)

Fingerprints (right hand) if right hand missing furnish prints of left hand.

(Required when positive identity cannot otherwise be established) (Par. 25e (2)

TAM 10-630)

Place X mark
below when
prints are of
left hand

Impossible to take tooth chart as only part of skull remained.

Thumb

1

2

3

4

List of personal effects and disposition of same

NONE

(Name, rank, serial number, organization, grave numbers of bodies buried on either side):

On Right— UNKNOWN AMERICAN SOLDIER X-162

3715.

On Left— LANTSON, Charles E.

32 254 935 Pvt 1cl Co E 305 Inf 3713

S/Sgt *John E. Bobis*
John E. Bobis, GRS

Francis M. Simon
FRANCIS M. SIMON, 1st Lt., QMC

Signature of Officer or other person reporting Burial.

Verified by Army G.R.S. Officer.

Prepare in triplicate—1 copy to Army G.R.S. Officer—1 copy to Chief, G.R.S.—Original to the Q.M.G.

/aam

22509
RESTRICTED

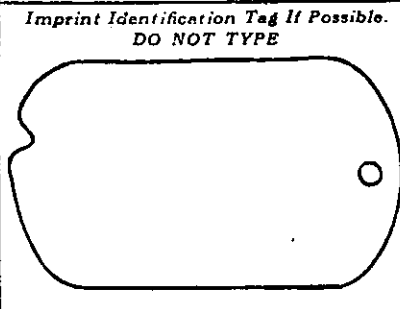
22509

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

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

DATE OF REPORT

13 Jan 48



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN X-3254 (Formerly UNK X-161, USAF Cemetery 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 4 Km on Azmith 60 deg. from Baluga, Leyte, P.I.	CAUSE OF DEATH Unknown	DATE OF DEATH Unknown
--	---------------------------	--------------------------

EMERGENCY ADDRESSEE (Name, relationship, and address)
Unknown

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

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME
None

Section 2.—BURIAL If other than in established cemetery, furnish sketch and map coordinates on reverse.

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY
GRS MAUSOLEUM, MANILA, P.

DATE OF BURIAL 8 Jan 48	HOUR 1100	BURIED IN (Shroud, blanket, or name of other) STORED Casket	TYPE OF GRAVE MARKER None	PLOT NO. 813	ROW NO. F	GRAVE NO. 1864
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WAS THIS A REBURIAL? (Yes or no) Yes RESTORED	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. 3714
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TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
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IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes STORED	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes
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BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORED UNKNOWN X-3256	RANK	SERIAL No.	ORGANIZATION	GRAVE No. 1866
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BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-3252	RANK	SERIAL No.	ORGANIZATION	GRAVE No. 1862
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SIGNATURE OF PERSON PREPARING REPORT R R ACIERTO, Pfc	SIGNATURE OF GRS OFFICER VERIFYING REPORT L S PANOPTO, 2d Lt Inf
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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

Serial 1879

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.

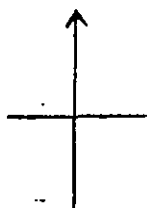
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
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WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
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OTHER IDENTIFICATION CLUES

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

QMC Form No 1044, 1044-A and 1044-B accomplished.

3 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