

FILE IDENTIFICATION TOPPER

FILE NUMBER

295 Cont. Leyte #1 X-230

SUBJECT

Also Manila Mass. X-3539

QMC FORM 1121
1 Aug 45

AIRMAIL

OSST 293
OSR Far East

3 February 1960

SUBJECT: Identification of World War II Deceased

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

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

Unknown	X-3421	(formerly	X-110,	Leyte	(1)
"	X-3421	"	X-180,	"	"
"	X-3418	"	X-162,	"	"
"	X-3418	"	X-202,	"	"
"	X-3361	"	X-205,	"	"
"	X-3365	"	X-215,	"	"
"	X-3269	"	X-228,	"	"
"	X-3359	"	X-230,	"	"
"	X-3390	"	X-327,	"	"
"	X-3400	"	X-330,	"	"
"	X-3782	"	X-369,	"	"
"	X-3358	"	X-388,	"	"
"	X-753,	Leyte	(1	(formerly	LNBF, A.)
"	X-4440,	AGRS	Mausoleum,	Manila,	P.I.
"	X-4864,	AGRS	Mausoleum,	Manila,	P.I.
"	X-5100,	"	"	"	"
"	X-3405-	(formerly	X-388,	Leyte	(1)

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

FOR THE AREA COMMANDER GENERAL:

W. J. Miller
Major
Jr.
cc--Administrative Section
cc--info

F. H. Hall
Lt. Colonel, GPO
Memorial Division

100
100

AIRMAIL

FORM 298

AGO 900
5 January 1960

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 40052
283, 828 (Far East), dated 17 September 1948, subject: Resolution of
Cases of Unidentified Deceased, the following Unknown remains, present-
ly stored at AGCS 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-733	Leyte	#1	UNKNOWN	X-3405-A	AGCS	Wain
	X-3260	AGCS	Wain		X-3418	"	"
	X-3299	"	"		X-3421	"	"
	X-3313	"	"		X-3782	"	"
	X-3338	"	"		X-4106	"	"
	X-3379	"	"		X-4440	"	"
	X-3361	"	"		X-4504	"	"
	X-3368	"	"		X-5301	"	"
	X-3399	"	"		X-5100	"	"
	X-3400	"	"				

2. Forwarded herewith, for your consideration, are new GIC forms
1044 for the above mentioned Unknowns.

FOR THE COMMANDER (SIC) OPTICONS:

18 Incls
GIC Form 1044 w/certificates
of unidentifiability

JAMES W. LA
1st Lt., Infantry
Adjutant

CM 13

rec/
1
/gyc

Interred 23 January 1950
H. 9 139 Ft. McKinley
Caremark
CARL R. H. MARK

DISINTERMENT DIRECTIVE

Cemetery Superintendent
SECTION A
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7740 00236

DATE
15 | 05 | 48
DAY | MONTH | YEAR

NAME: UNKNOWN X-000230 RANK: 0 ARM: Q DATE OF DEATH: DAY: 15 MONTH: 05 YEAR: 48

CEMETERY: USAF CEMETERY LEYTE NO 1 DISPOSITION OF REMAINS: DAY: 77 MONTH: 01 YEAR: 80 CODE: DIST. PT.

PLOT: ROW: GRAVE: 5623 COUNTRY: 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: UNKNOWN X-230 (Maus) UNKNOWN X-3339 SERIAL NUMBER: RANK: DATE OF DEATH: DATE DISINTERRED: 27 Sept 48

IDENTIFICATION TAG ON: REMAINS MARKER ORGANIZATION: UNKNOWN RELIGION: IDENTIFICATION VERIFIED BY: PERRY E WHITE 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: Two (2) identification tags read (Mausoleum) UNK X-3339

REMAINS PREPARED AND PLACED IN CASKET DATE: 27 Sept 48 BY: PERRY E WHITE

CASKET SEALED BY: PERRY E WHITE EMBALMER (Signature): *Perry E White* PERRY E WHITE

CASKET BOXED AND MARKED SHIPPING ADDRESS VERIFIED BY: LUCIO S PANOPIO, 1st Lt, Inf

DATE: 27 Sept 48 BY: HORACE L ALLISON, Sgt, Inf

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

Lucio S Panopio
LUCIO S PANOPIO, 1st Lt
SIGNATURE OF GRS INSPECTOR

RECEIVED
FEB 19 1949
RECEIVED
MIA DIV.

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

RECORD OF CUSTODIAL TRANSFER

FROM		AGRS Mausoleum		TO		Fort McKinley Military Cemetery	
KIND OF CONVEYANCE		Truck		NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER		<i>W. J. ...</i>	
DATE				DATE		JAN 28 1950	
2. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			
3. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			
4. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			
5. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			
6. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			
7. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			

not located

HEADQUARTERS
FILSON ZONE
AMERICAN GRAVES REGISTRATION SERVICE

4 January 1950

Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 230 , Plot _____,
Row _____, Grave 5623 , USMC Leyte #1, P.I. , have
been reviewed and it is the opinion of this office that insuf-
ficient evidence is available to establish the identity of this
deceased, and that these remains should be classified as un-
identifiable.

FOR THE COMMANDING OFFICER:



B. McNEAR
Captain, QAC
Chief, Records Branch

Atch: Form 1044

Received 20 Jan 1950 OQMA
Not identifiable from
information presently
available
Robert W. Miller

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN X-3339 (Formerly X-230 Leyte #1)				2. DATE OF REPORT 4 January 1950	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
				DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT 5'6 7/8"	10. COLOR OF HAIR UTD	11. RACE UTD
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

N O N E

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

N O N E

14. WAS BODY BURNED?	TO WHAT EXTENT?
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	


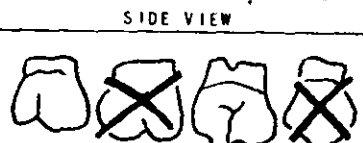






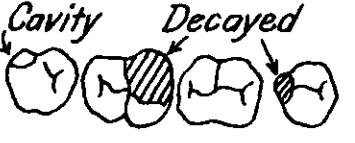

15. WAS BODY MANGLED?	TO WHAT EXTENT?
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

N O N E

17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

N O N E

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:		

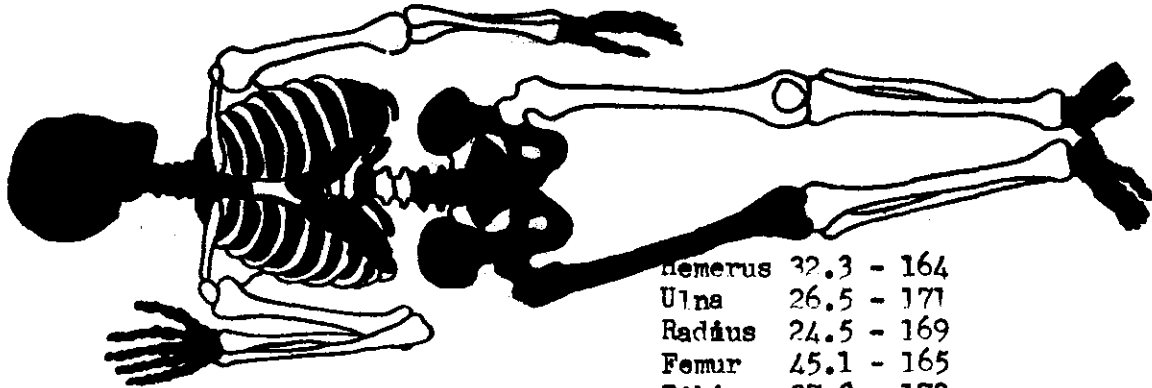
RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
← M A X I L L A								M I S S I N G →							
Side Views								Side Views							
UPPER								UPPER							
LOWER								LOWER							
← M A N D I B L E								M I S S I N G →							
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

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."

No loose maxillary or mandibular teeth present with remains.

Paul R. Nichols
 PAUL R. NICHOLS
 Chief, Iden. Section

19. BLACK OUT PARTS OF BODY NOT RECOVERED



Humerus	32.3	-	164
Ulna	26.5	-	171
Radius	24.5	-	169
Femur	45.1	-	165
Tibia	37.8	-	173
Fibula	38.1	-	176

1018 169 2/3

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

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

REPORT OF INTERMENT

U-493

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

(Par. 21d - TM 10-630)

UNKNOWN, X-230

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

Mt. Catmon, Leyte, P.I.

(Place of Death)

Dec. 1944

(Date of Death)

(Cause of Death)

1130 hrs. 10 Oct. 45

(Time and Date of Burial)

USAF Cemetery Leyte # 1, P.I.

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

5629

(Grave No.)

(Row No.)

(Plot No.)

Reg. Cross

(Kind Grave Marker)

Buried with body

Attached to marker

(Identification Tags)

Disinterred from N.E. slope of Mt. Catmon, approx. due west of

Lubi, Leyte, P.I.

Protestant

Catholic

Hebrew

Metal tag buried with body and attached to Marker.

Other pertinent data to enable grave to be located.

(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)

TM 10-630)

Place X mark
below when
prints are of
left hand



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—BOESE, Lyle / C. 37 782 094 469th ~~MI~~ Dep. Co. 5624

On Left—UNKNOWN, X-229 5622

S/Sgt. John E. Bobis, GRS

WILLIAM D. ROGERS, 1st Lt. Inf.

Signature of Officer or other person reporting Burial.

Verified by Army G.R.S. Officer.

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

Could not locate B/R
for X-3339- Maus. Manila.

E. Miller
16 August 1950