

FILE IDENTIFICATION TOPPER

FILE NUMBER	293 Unit Leyte II, X-415
SUBJECT	Also Manila Mass. X-2836 ✓
	Family Zamboanga X-3 ✓

QMC FORM 1121
1 Aug 45

QMGNT 298
GHS Far East

20 March 1950

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 Findings of Unidentifiability for the following Unknown Deceased:

Unknown X-3756, AGRS Maus. Manila, form. X-86, USAF Com. Leyte #1,
Unit 2, Page 6

Unknown X-3759, AGRS Maus. Manila, form. X-101, USAF Com. Leyte #1,
Unit 2, Page 6

Unknown X-2836, AGRS Maus. Manila, form. X-415, USAF Com. Leyte #1,
Unit 2, Page 12

Unknown X-3686, AGRS Maus. Manila, form. X-805, USAF Com. Leyte #1,
Unit 2, Page 12

Unknown X-704, USAF Com. Leyte #1, form. X-2849-A, AGRS Maus. Manila,
Unit 2, Page 14

Unknown X-724, USAF Com. Leyte #1, form. X-4581-B, AGRS Maus. Manila,
Unit 2, Page 14

Unknown X-5225, AGRS Mausoleum Manila, P.I., Unit 9, Page 9

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

FOR THE QUARTERMASTER GENERAL:

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

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE

GRPZ 293

APO 900

SUBJECT: Unidentifiable Remains

1 MAR 1950

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 QMGHU 293, GRS (Far East), dated 17 September 1948, subject: Resolution of Cases of Unidentified Deceased, the following Unknown remains, presently stored at AGRS Mausoleum, Manila, P.I., have been processed by the Central Identification Laboratory and considered "Unidentifiable" by reason of lack of sufficient identifying data:

UNKNOWN X-415 Leyte #1
X-704
X-3686 AGRS Mslm
X-3758

UNKNOWN X-3759 AGRS Mslm
X-4581-B
X-5225

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

FOR THE COMMANDING OFFICER:

7 Incls
QMC Forms 1044 w/Certificates
of Unidentifiability

JOHN SHYPULA
1st Lt., Infantry
Adjutant

1. FILE UNDER NO. 293 - Unk. P. I. X-2836 (Maus. Manila)

SYNOPSIS

2. TYPE OF DOCUMENT: IO/R/S 3. DATE: 27 Jun 49
4. FROM: Mil Pl Div , Chief, Pl Br
5. TO: Division Security Officer Mem Div
6. SUBJECT: re: Request that consideration be given to downgrading attached case to UNCLASSIFIED.

7. DOCUMENT FILED UNDER NO. 293 - SMITH, John (Col.)

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.

293 - Unknown (4-3) Barboanga

1st Ind.

1 March 46

FROM: JMO
TO: C. G. Stoneman, Calif.

RE: Report of Internment.

293 - Unknown (Misc) Barboanga

bn

/ifj

1

Interred 6 March 1950
C 1 63 Ft. McKinley

Carleton Mark

DISINTERMENT DIRECTIVE

M.K.

CARL R. H. MARK
Cemetery Superintendent

SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7740 00392

DATE
15 05 48
DAY MONTH YEAR

NAME		SERIAL NUMBER		RANK	ARM	DATE OF DEATH	
UNKNOWN		X-000415		0	8	DAY	MONTH
CEMETERY		COUNTRY		DISPOSITION OF REMAINS		YEAR	
USAF CEMETERY LEYTE NO 1		PHILIPPINE ISLANDS		0		7701	80
PLOT	ROW	GRAVE	CAUSE OF DEATH		YEAR		
		7568	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 (Maus No.) UNK X-415 UNK X-2836 UNK X-3	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED
				27 Sept 48
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input type="checkbox"/> 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 /
2 Identification tags read Maus UNK X-2836
1 Identification tag reads UNK X-3

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
DATE 27 Sept 48 BY HORACE L. ALLISON
Sgt., Inf
SHIPPING ADDRESS VERIFIED BY
LUCIO S. PANCPPIO, 1st Lt., Inf

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

Lucio S. PancpPIO
LUCIO S. PANCPPIO, 1st Lt., Inf
SIGNATURE OF GRS INSPECTOR

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

J. Brode

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED			
FROM	AGS Mausoleum	TO	Fort McKinley Military Cemetery
KIND OF CONVEYANCE		Truck	
SIGNATURE OF SHIPPER			
DATE		SIGNATURE OF RECEIVER	
MAR 6 1950		<i>W. R. ...</i>	
2. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE			
SIGNATURE OF SHIPPER			
DATE		SIGNATURE OF RECEIVER	
3. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE			
SIGNATURE OF SHIPPER			
DATE		SIGNATURE OF RECEIVER	
4. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE			
SIGNATURE OF SHIPPER		UNKNOWN	
DATE		SIGNATURE OF RECEIVER	
5. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE			
SIGNATURE OF SHIPPER			
DATE		SIGNATURE OF RECEIVER	
6. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE			
SIGNATURE OF SHIPPER			
DATE		SIGNATURE OF RECEIVER	
7. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE			
SIGNATURE OF SHIPPER			
DATE		SIGNATURE OF RECEIVER	

(BY ADMINISTRATIVE ORDER)
 FORT MCKINLEY MILITARY CEMETERY
 SIGNATURE OF SHIPPER

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE

APO 900

24 Feb 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- 415, Plot _____,
Row _____, Grave 7568, USMC USAF Cem. 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


B. McNEELAR
Captain, QIG
Chief, Records Branch

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-415, USAF Cem. Leyte #1				2. DATE OF REPORT 27 Feb '50		
3. NAME OF CEMETERY		4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
AGRS Mausoleum, Manila, P.I.		HANGAR	BAY	CRYPT	DISINTERMENT REINTERMENT	
		802	G	2026		
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 N O N E						
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES U T D						
14. WAS BODY BURNED?		TO WHAT EXTENT?				
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO						
15. WAS BODY MANGLED?		TO WHAT EXTENT?				
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		See skeletal chart				
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						

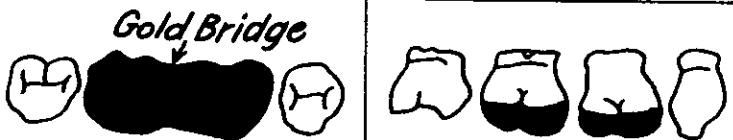
MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X"'D OUT AND LABELED THUS:



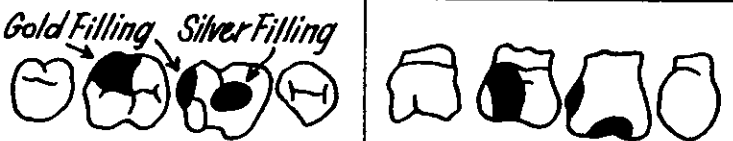
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:



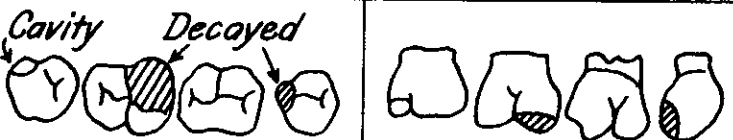
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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:



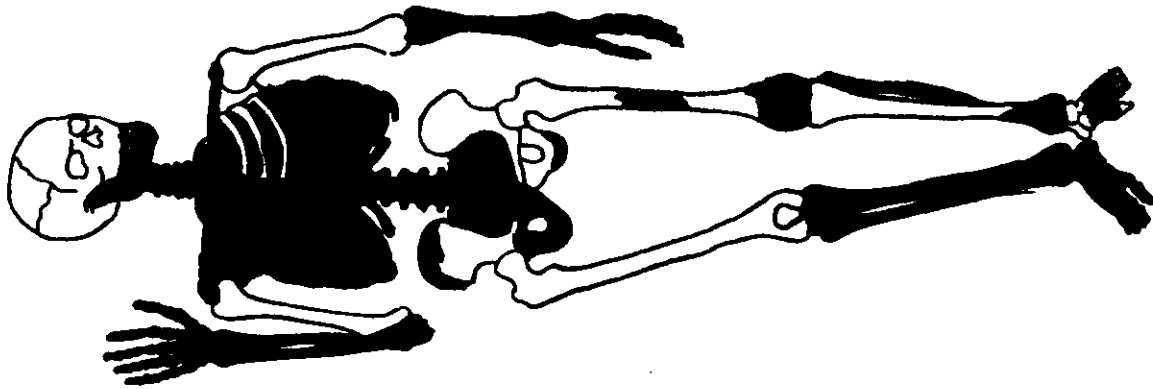
RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
⊗	⊗					⊗	⊗	⊗	⊗	⊗	⊗			⊗	⊗
Side Views								Side Views							
UPPER								UPPER							
LOWER								LOWER							
Side Views								Side Views							
<i>Missing</i>															
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

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 RECOVERED



20.

MASS BURIAL CERTIFICATE (IF APPLICABLE)
(Wherein segregation in whole or parts is impossible)

I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF _____ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS: _____ NUMBER

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

No I.D. tags, burial bottle, personal effects, or 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, Identification Section

SIGNATURE

IDENTIFICATION CHECK LIST

(To be completely filled out and attached to each copy
 of Report of Interment WD QMC Form 1042)

(Formerly UNK X-415 USAF
 Unknown X -2836 Cem Leyte #1, P.I.
 Cemetery AGRS Mausoleum, Manila, P.I.
 Plot 802 JANGER G 547 CR 226
Row Grave 2026

AGRS Mausoleum, Manila, P.I.

1. Arrived at cemetery 9 Dec 47
(Hour) (Date)
2. Place of death Leloy Sindangan, Zamboanga, Mindanao, P.I.
(Name of closest town) (Coordinates and letter Prefix, maps)
(Sheet, scale and serials used)
3. Remains recovered or disinterred by 1st Platoon, 583rd QM GR Co.
(Name and organization)
4. Evacuated to Cemetery by _____
(Name and organization)
5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

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

Belt, web _____

Drawers, wool _____

Drawers, cotton _____

Leggings, wool _____

Socks, cotton _____

* Shoes _____ (type) N

Overshoes _____ O N

Web Equipment _____ (type) E

(Other item) _____

(Other item) _____

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

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

Shoulder Patch _____

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

6. Description of Remains: Skeleton only - Chart attached.

Age / Height Weight Description of wounds _____

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

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

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

Sunburn or tan, other than hand and face _____

Complexion _____ U T D (Light, medium, dark, clear, pimples, pocks, freckles)

Build _____ (Large, fat, thin, muscular)

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

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

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

Goatee (Light, color, extent)

Eyes (Color, setting, shape) Eyebrows (Color, bushiness, extent across nose)

Nose (Size, shape, straight) Ears (Size, set close to or far from head)

Mouth (Large, medium, small) Lips (Small, large, full)

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

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

Jaw (Large, small, normal) Circumference of head in inches (Hat band)

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

Shoulders (Broad, straight, small, rounded) Arms (Length, muscular, color, extent and quantity of hair)

Hands U
 T
 D

Fingers (Short, thick, long, slender, size of knuckles, missing fingers or joints)
 (Unusual characteristics of fingernails)

Chest (Size of nipples, color, quantity and extent of hair, large, small, normal)

Waist (Size of navel, appendectomy, amount, quantity, and color of hair)

Back (Quantity and extent of hair) Circumcision (Yes-no) Pubic Hair (Color)

Hernioplasty (Yes-no; location)

Legs (Inseam, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

Feet (Size, corns, callouses, flat) Toes (Slender, straight, crooked, overlap)

Evidence of healed fractures (Nose, arms, legs, etc.)

NOTE: Use attached charts "A" and "B" to indicate parts not received.

No

7. Have finger prints been placed on Report of Interment?
(Yes-no)

If not, explain Due to condition of remains.

8. Has tooth chart been prepared? Yes If not, explain
(Yes-no)

9. Remarks No burial bottles, ID tags or personal effects were received with
remains. Weight of remains is approximately six and one half (6½) lbs.

I certify that I have personally viewed the remains of subject deceased and all resulting information
has been recorded to the best of my knowledge.

■/ Robert H. Sponable
(Officer's Name)

Emb Sr C-063105

Rank Service

CIP Laboratory, Manila, P.I.

(Organization)

9 Dec 47

CERTIFIED TRUE COPY:
G. T. Gamboa
G. T. GAMBOA
2d Lt., MAC

SKELETAL CHART

X-2836

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

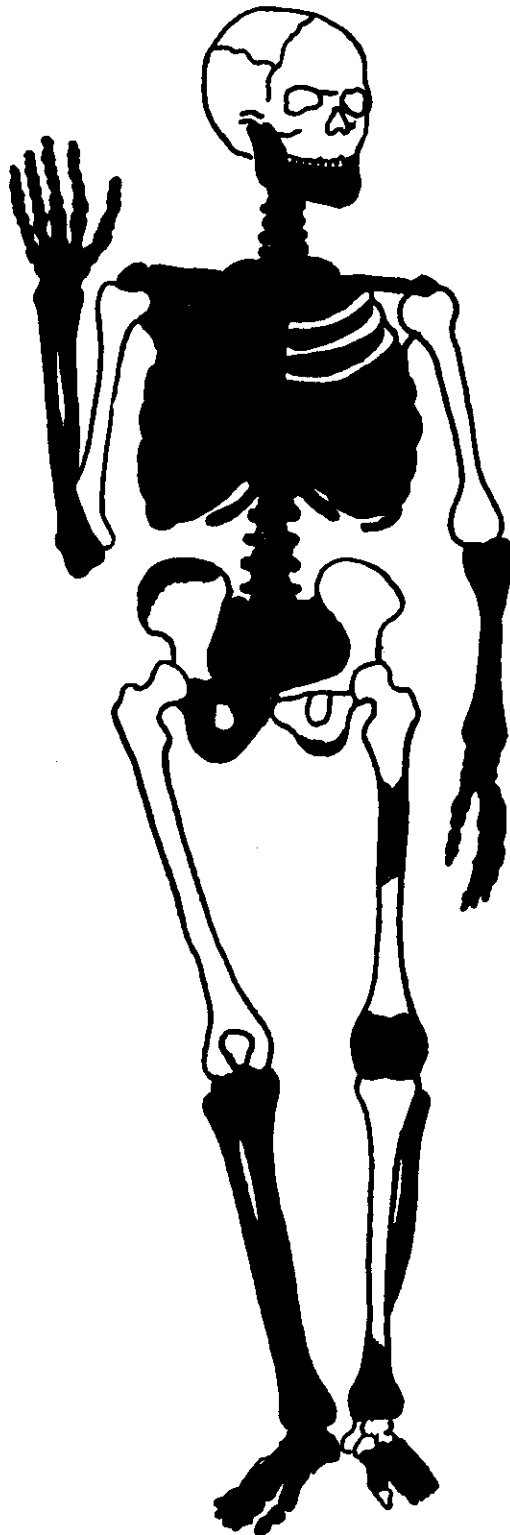


CHART "A"

1493-PHILRYCOM-6 47-40M

9 Dec. 47

X-2836

IDENTIFICATION DENTAL CHART

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

UNKNOWN X-2836 (Formerly UNK X-415)
USAF Cem Manila #2, Luzon, P.I.)

9 Dec 47

Unknown

Unknown

LAST NAME FIRST INITIAL
Unknown

RANK SERIAL NO.
Unknown

Leloy, Sindanga, Zamboanga,
Luzon, P.I.

AGRS Mausoleum,
Manila, P.I.

ORGANIZATION
802 G 2026

PLACE OF DEATH

PLACE OF BURIAL

PLOT ROW GRAVE NO.
ANGER BAY CRIP

STORAGE

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

INSIDE — LOOKING OUT
Mandible, missing

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

KEY OF SYMBOLS TO BE USED ON ABOVE CHART

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

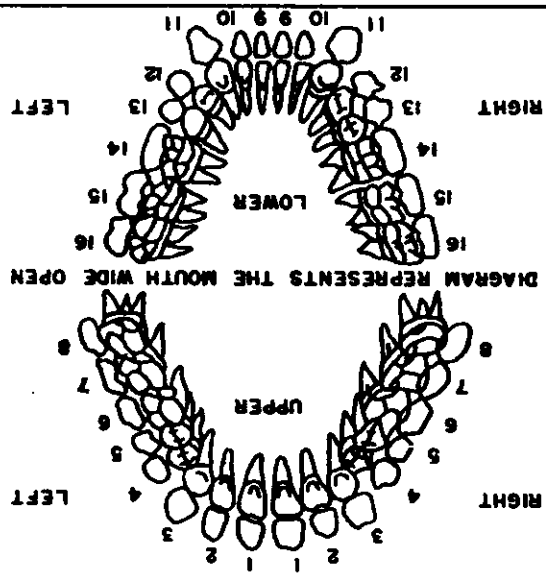
G. L. GAMBOA
2d Lt., MAC

[Handwritten signature]
CERTIFIED TRUE COPY:

<u>PLACE OR HQ WHERE THIS FORM ACCOMPLISHED</u>	<u>DATE</u>
OIP Laboratory, Manila, P.I.	9 Dec 47
<u>NAME AND RANK TYPED OR PRINTED</u>	<u>NAME AND RANK TYPED OR PRINTED</u>
p/ ROBERT H. SPONABLE Emb Sr	p/ MELVIN S. MITTENHAL
<u>SIGNATURE OF PERSON WHO PREPARED CHART</u>	<u>VERIFIED BY GRS OFFICER</u>
s/ Robert H. Sponable	s/ Melvin S. Mittenhal

REMARKS:

Mandible missing.



4. FOR INFORMATION OF STANDARD NUMBERING OF TEETH, SEE DIAGRAM BELOW.
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.
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.
1. ACCURACY AND ATTENTION TO DETAIL IN THE PREPARATION OF THIS CHART ARE OF PARAMOUNT IMPORTANCE, IF SAME IS TO BE OF MAXIMUM VALUE.

INSTRUCTIONS:

C O N F I D E N T I A L

3rd PLATOON
306th QM Graves Registration CO
APO 717

IH/smc

1 Aug. 1945

SUBJECT: Report of Interment.

TO : Graves Re. Officer, Headquarters, 6th Army, APO 442.

1. With reference to Report of Interment enclosed on Grave No.236✓
pertaining to a Colonel John Smith the following information was received
as per the attached copy of letter.

2. The undersigned checked for the identification of this body and
was informed by the Filipino Civilians who did the interring that the
name Colonel John Smith or John Smith was tattooed on the chest and arm
of the deceased. At that time there were serial numbers also tattooed on t
the chest, but the Civilians did not make a note of this.

3. On or about the 7th September 1944 Mr. Espertero, a Civilian
buried the four bodies at Leloy, Sidangan area, these bodies were washed
up from the sea and it is believed that they had been part of a ship
load of Americans prisoners which the Japs were sending north, and which
was torpedoed by an American submarine. Survivors of the sinking told
Mr. Espertero that these bodies were Americans.

4. Report of Interment grave No.237 contains the remains of the
three Unknown X-2, X-3, X-4, which had been interred in one common grave
by the Civilians at Leloy, Sidangan, Zamboanga.

5. It was not possible to take a tooth chart on the remains of these
four bodies due to the decomposition of the heads and the teeth being
detached from the skulls.

/2/ Irwing Heller
IRWIN HELLER
1st Lt., QMC
Commanding.

1 Incl:
Letter of information

THIS IS A CERTIFIED TRUE COPY

Paul J. Tonn
PAUL J. TONN
Capt., QMC

Christian and Missionary Alliance
Zamboanga City, P.I.

June 23, 1945

Col. Johnson
American Army
P.C.A.U.
Zamboanga City.

Sir: This is to introduce to you Mr. Vicente Espertero of Leloy, Sindangan, Zamboanga, who is a Christian Leader of the Church in that area.

He has some information to give with respect to the American prisoners of war who were buried by him and some of the other Americans who escaped from the Japanese prison ship.

He mentioned one especially, a Col. John Smith who was among them who were buried on the point of the coast Leloy Point.

I thought that you would be interested and would be able to give him directions as to where to report this information. Captain Flier told Vicente to report the matter to Zamboanga.

Sincerely yours,

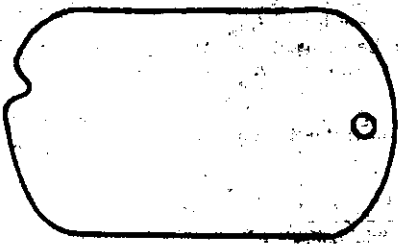


E.F. Guleranson

A Certificate True Copy:

/s/ Irwing Heller
/t/ IRWING HELLER
1st Lt., QMC
Commanding.

THIS IS A CERTIFIED TRUE COPY:

Paul J. Tonn
PAUL J. TONN,
Capt., QMC

WD GMC FORM 1004 (Rev. 1 Apr. 1967) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1240 and AR 30-1815)				DATE OF REPORT 19 Dec 47	
Imprint Identification Tag If Possible DO NOT TYPE 		Section 1—IDENTIFICATION NAME (Last, first, middle initial) UNKNOWN X-2838 (Formerly UNK X-415 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 Leloy, Sindanga, Zamboanga, Mindanao, P.I.		CAUSE OF DEATH KIA - Drowned			DATE OF DEATH 7 Sept 44		
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 2 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 AGRS MAUSOLEUM, MANILA, P.I.							
DATE OF BURIAL STORAGE 10 Dec 47	HOUR 1100	BURIED IN (Shroud, blanket, or name of other) STORAGE Casket		TYPE OF GRAVE MARKER None	PLOT No. 802	ROW No. G	GRAVE No. 2026
WAS THIS A REBURIAL? (Yes or no) RESTORED Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery Leyte #1, P.I.				PLOT No.	ROW No.	GRAVE No. 7568
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) STORAGE Yes						
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORAGE UNKNOWN X-2838	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 2026			
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORAGE UNKNOWN X-2834	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 2024			
SIGNATURE OF PERSON PREPARING REPORT  R. R. ACIERITO, Pvt			SIGNATURE OF GRS OFFICER VERIFYING REPORT  L. S. PANOPIO, 2d 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.							

MAR 26 1948

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Section UNIDENTIFIED REMAINS

INSTRUCTIONS:


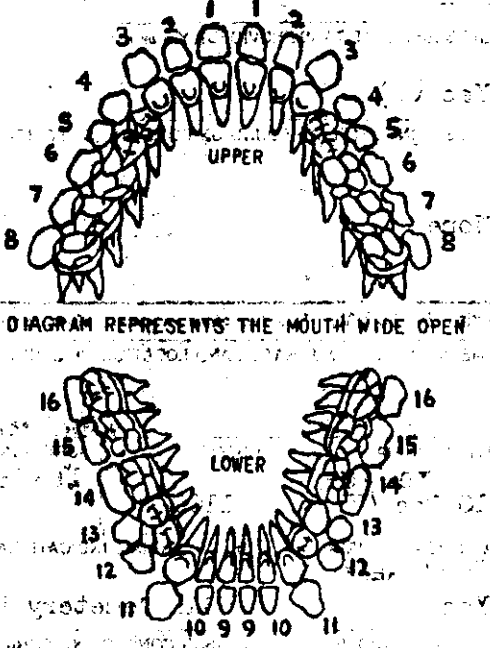




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks, and serial numbers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

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

OTHER IDENTIFICATION CLUES

LEFT LITTLE FINGER	FILLINGS  SILVER FILLING GOLD FILLING	 <p>UPPER</p> <p>LOWER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
LEFT INDEX FINGER	CAVITIES  CAVITY DECAYED	
LEFT MIDDLE FINGER	MISSING TEETH  TOOTH MISSING	
LEFT RING FINGER	CROWNED TEETH  PORCELAIN CROWN GOLD CROWN	
LEFT THUMB	BRIDGE WORK  GOLD BRIDGE	
RIGHT THUMB		

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

↑

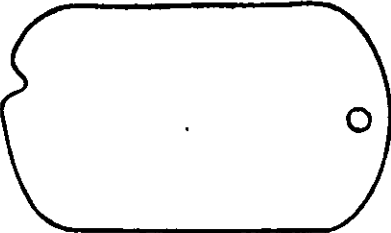
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REMARKS:

Identification Check List and Dental Chart accomplished.

10 FEB 1948

RIGHT LITTLE FINGER

WD CMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)		DATE OF REPORT 6 March 1946		
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.				
		NAME (Last, first, middle initial) (Formerly Unknown X-3, UNKNOWN X-415 USAF Cemetery Zamboanga #1, P.I.)		SERIAL NO. #1, P.I.)		
		GRADE	ORGANIZATION		BRANCH OF SERVICE	
		RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY		
PLACE OF DEATH Leloy, Sindangan, Zamboanga, Mindanao, P.I.		CAUSE OF DEATH KIA DROWNED		DATE OF DEATH 7 Sept. 1944		
EMERGENCY ADDRESSEE (Name, relationship, and address)						
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None		IF NO TAGS FOUND ON BODY DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) Disinterred from USAF Cemetery Zamboanga #1, P.I.				
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (Unknown tags)						
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME included 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 27 Jan 1946	HOUR 0900 hrs	BURIED IN (Shroud, blanket, or name of other) Shelter half	TYPE OF GRAVE MARKER Reg. Cross	PLOT No.	ROW No.	GRAVE No. 7568
WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery Zamboanga #1, P.I.			PLOT No. 1	ROW No. 9	GRAVE No. 304
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) SPANN, Fred (nmi)		RANK Pvt.	SERIAL No. 34 488 988	ORGANIZATION 368th Inf	GRAVE No. 7567	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) SOUZA, William A.		RANK Cpl.	SERIAL No. 39 005 521	ORGANIZATION 146th FA	GRAVE No. 7569	
SIGNATURE OF PERSON PREPARING REPORT Sgt. Charles W. Hallock, GRS			SIGNATURE OF GRS OFFICER VERIFYING REPORT CECIL G. CARTER, 1st Lt., QMC			
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.						

27 MAR 1948

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.

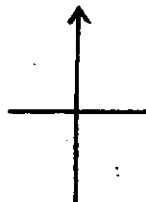
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS

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

OTHER IDENTIFICATION CLUES

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

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



REMARKS:

(Mandible missing)

CONDITION OF BODY PRECLUDED FINGERPRINTING.

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

CORRECTED COPY

U 20

Unknown X-3

Zamboanga, Mindanao P.I. (First) (Initial) (Serial number) (Rank) (Organization)
Leloy, Sindangan, 7 September 1944 KIA Drown
(Place of death) (Date of death) (Cause of death)

1400 27 Aug 1945 USAF Cemetery, Zamboanga #1 Zamboanga, Mindanao P.I.
(Time and date of burial) (Name of cemetery) (Name or coordinates of location)

Disinterred from isolated burial at Leloy Sindangan, Zamboanga, Mindanao P.I. N 520-E 12040

304 9 1 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

Identification Tag made at GR Office

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

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

Body buried on RIGHT Peterson, Evar (NMI) 39918763 Pfc Med Det 163 Inf 238
(Name) (Serial number) (Rank) (Organization) (Grave number)

Body buried on LEFT Smith, John Colonel 236
(Name) (Serial number) (Rank) (Organization) (Grave number)

(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: No effects on body

849

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:

Weight:

Color of eyes:

Color of hair:

Race:

Wear glasses?
 Number of rifle:
 Laundry marks:
 Apparent nationality:

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

In space below, locate and describe any scars, birthmarks, moles,
 deformities, etc.:

Note below any identifying clues found, such as letters, photographs,
 probable organization of deceased, etc.:

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

(Signature of officer or other person reporting burial)

S/Sgt Raymond W. Wells

IRVING HELLER 1st Lt., OMC
 (Witnessed by Army GRS Officer)

4

3

2

1

THUMB

LEFT HAND

4

3

2

1

THUMB

RIGHT HAND

