

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 Unit Lyke #1 X-457

SUBJECT

Also Manila News X 2353 ✓

RECLASSIFICATION SHEET

PAPERS ORIGINALLY FILED 293 Walk-Leyte #1 (misc)
X-456 X-457 X-458

SYNOPSIS AND DATES

NEW CLASSIFICATION misc filed
293 Walk-Leyte #1 X-456

1/29/82
JW

RECLASSIFICATION SHEET

293 - Unk. P. I. (Misc.) (Maus. Manila) (X-2253, X-2338, X-2346, X-2353, X-2839, X-4184
thru X-4188)

QMGMT 293
GRS, Far East

21 March 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 in American Graves Registration Service Mausoleum, Manila, P. I.;

Unknown X-2253	(formerly X-559 Leyte #1)	Unit 2	Page 13
" X-2338	(" X-458	" 2	" 12
" X-2346	(" X-456	" 2	" 12
" X-2353	(" X-457	" 2	" 12
" X-2839	(" X-420	" 2	" 12
" X-4184		Unit 2	Page 20
" X-4185		" 2	" 20
" X-4186		" 2	" 20
" X-4187		" 2	" 20
" X-4188		" 2	" 20

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

FOR THE QUARTERMASTER GENERAL:

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

C O P Y:
mfs

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE

GRPZ 293

APO 900

SUBJECT: Unidentifiable Remains

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

UNKNOWN X-456 Leyte #1
X-457

UNKNOWN X-458 Leyte #1
X-559

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

FOR THE COMMANDING OFFICER:

4 Incls

QMC Forms 1044 w/Certificates
of Unidentifiability

JOHN SHYPULA
1st Lt., Infantry
Adjutant

/ebc
1

Interred 6 Mar 1950
C. 3. 49 Ft. McKinley
Carl R. Mark
CARL R. H. MARK

DISINTERMENT DIRECTIVE

Cemetery Superintendent
SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7740 00420

DATE
15 05 48
DAY MONTH YEAR

NAME	SERIAL NUMBER	RANK	ARM	DATE OF DEATH
	UNKNOWN X-000457		8	
CEMETERY	DISPOSITION OF REMAINS			
USAF CEMETERY LEYTE NO 1	7701 80			
CODE	DIST. PT.			
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 UNK X-457 UNK X-2353 (Maus)	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED 27 Sept. '48
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION UNKNOWN	RELIGION	IDENTIFICATION VERIFIED BY GEORGE L. MIX 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 /
Mausoleum tags show UNKNOWN X-2353

REMAINS PREPARED AND PLACED IN CASKET	
DATE 27 Sept. '48	BY GEORGE L. MIX
CASKET SEALED BY GEORGE L. MIX	EMBALMER (Signature) <i>George L. Mix</i> GEORGE L. MIX
CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
DATE 27 Sept '48 by HORACE L. ALLISON, Sgt. INF	CELESTINO E. ABELLAR, 1st Lt., PA

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

Celestino E. Abellar
CELESTINO E. ABELLAR, 1st Lt., PA
SIGNATURE OF GRS INSPECTOR

REPATRIATION
BRANCH
MEM. DIV.

J. Bradd

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

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE

APO 900

23 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- 457, Plot _____,
Row _____, Grave 8153, 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. MCNEMAR
Captain, QMG
Chief, Records Branch

Received 14 Feb 50 OQMG
Not identifiable from
information presently
available

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN X-457, USAF Cem. Leyte #1				2. DATE OF REPORT 23 Feb. '50	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	HANGAR 802	BAY A	CRYPT 238	DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT UTD	10. COLOR OF HAIR UTD	11. RACE UTD
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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

UTD

14. WAS BODY BURNED? TO WHAT EXTENT?

YES NO

15. WAS BODY MANGLED? TO WHAT EXTENT?

YES NO **See skeletal chart**

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

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

TOP VIEW

SIDE VIEW



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

Gold Crown, Porcelain Crown



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

Gold Bridge



FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:

Gold Filling, Silver Filling



CARIES (Cavities): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:

Cavity, Decayed



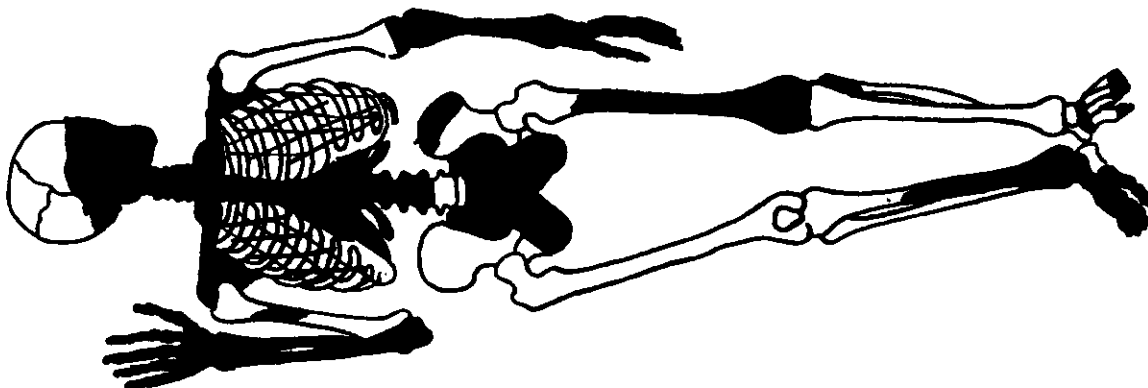
RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
<i>Missing</i>															
Side Views															
UPPER															
Side Views															
LOWER															
Side Views															
<i>Missing</i>															
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

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 Service

SIGNATURE

Belt, web
 Drawers, wool
 Drawers, cotton
 Leggings, wool
 Socks, cotton
 * Shoes (type)
 Overshoes
 Web Equipment (type)
 (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 / ^{Est.} Height **5'6"** Weight **UTD** Description of wounds **UTD**
 Bandages or dressings Scars (Length, width, location)
 Tattoos
 (Number, location -- illustrate on separate page)
 Outstanding moles, warts or birthmarks (Yes-no; description, location)
 Sunburn or tan, other than hand and face
 Complexion (Light, medium, dark, clear, pimples, pocks, freckles)
 Build ^U ^T ^D (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)

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

If not, explain Due to condition of remains

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

9. Remarks UNKNOWN X-2353 being killed in a plane crash with no information regarding plane crash available. No possible means of identification found with remains. Estimated weight of remains 6 lbs.

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

/s/ Julian H. Weddle
(Officer's Name)

Emb Sr C-064965
Rank Service

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

1 Dec 47

CERTIFIED TRUE COPY

George T. Gamboa
GEORGE T GAMBOA
2d Lt., MAC

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

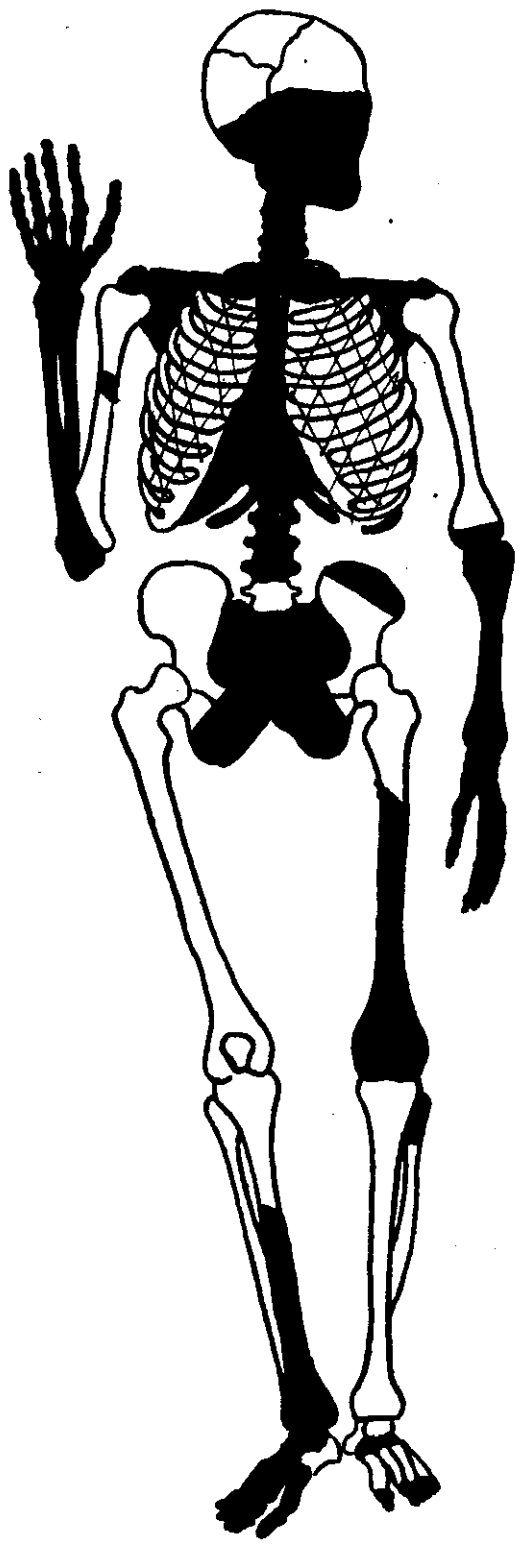


CHART "A"

Handwritten initials

REPORT OF DISINTERMENT FOR IDENTIFICATION

5 November 1947

1. Remains of (Name)

UNKNOWN X-457

Serial Number

-

Grade

Organization

-

-

Name, Number and Location of Cemetery

USAF Cemetery Leyte #1, P.I.

Plot

Row

Grave No.

8153

2. Date of Disinterment

5 November 1947

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

Original burial made in local wooden casket. Skeletal remains incomplete. Mandible jaw and few major bones are missing. Substitute tag on remains and marker coincide with R.O.I. on file.

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

Substitute tag

On Remains

Substitute tag

What Identification Used Upon Reinterment: On Marker

Held in Field Morgue

On Remains

Substitute tag

5. Signature of Officer Supervising Disinterment and Reinterment. CERTIFIED TRUE COPY

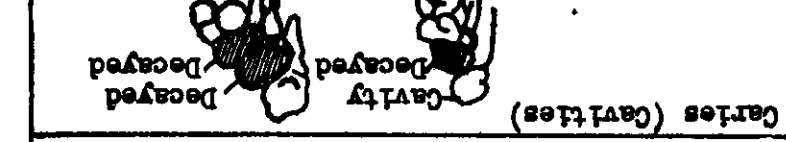
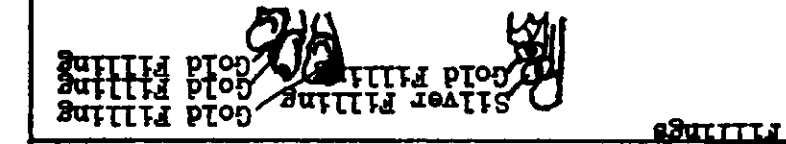
/s/ Paul R. Nichols
/p/ PAUL R. NICHOLS, Embalmer

G. T. GAMBOA

2d Lt., MAC

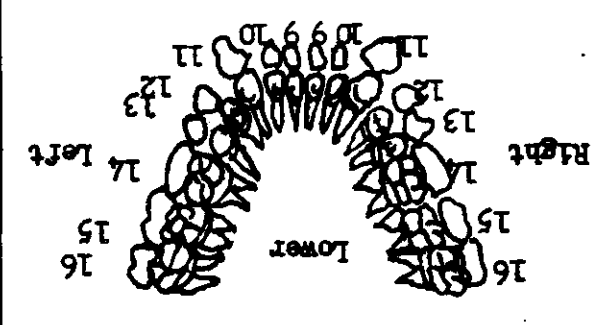
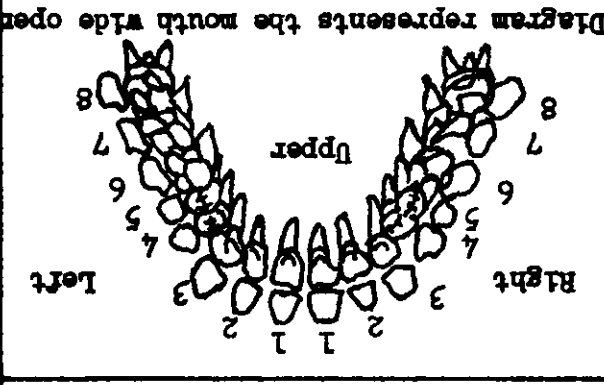
INSTRUCTIONS FOR PROPER MARKINGS ON DENTAL CHART

1. Give all information and description on dental chart as nearly correct as the condition of the body will allow. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (grinding teeth). An examination should be made and findings charted to cover the following basic conditions: lost teeth, crowned teeth, bridged teeth, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.



Dentures (Plates) Draw diagram of relative size and shape of plate block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp".

Remarks



5-34880-4M

X-2353

IDENTIFICATION DENTAL CHART

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

UNKNOWN X-2353 (Formerly UNK X-457)
USAF Cemetery Leyte #1, P.I.)

1 Dec 47

DATE

Unknown

Unknown

LAST NAME

FIRST

INITIAL

RANK

SERIAL NO.

Unknown

Unknown

UNIT

AGRS Mausoleum

ORGANIZATION

Fabrica, Negros, P.I.

Manila, P.I.

802

A

238

PLACE OF DEATH

PLACE OF BURIAL
SITE

PLOT

ROW

GRAVE NO.

maxilla missing

RIGHT UPPER TEETH LEFT

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8

TYPE																TYPE
LOCATION																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																TYPE
LOCATION																LOCATION

KEY OF SYMBOLS TO BE USED ON ABOVE CHART

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

24 Lt.,
MAC
GEORGE J GAMBOA

George J. Gamboa

CERTIFIED TRUE COPY

PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

CIP Laboratory, Manila, P.I.

/s/ BENITO RATONEL, Embajador
NAME AND RANK TYPED OR PRINTED

/s/ Benito Ratonel,
SIGNATURE OF PERSON WHO PREPARED CHART

DATE

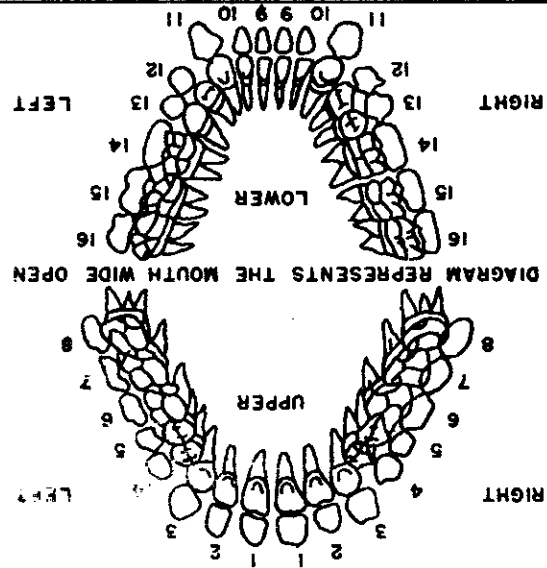
1 Dec 47

/s/ JOHN H. BENNETT JR.,
NAME AND RANK TYPED OR PRINTED

/s/ John H. Bennett Jr.,
VERIFIED BY GRS OFFICER

REMARKS:

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



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, eg, PORCELAIN CROWNS, GOLD CROWNS (FULL OR 3/4), 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:

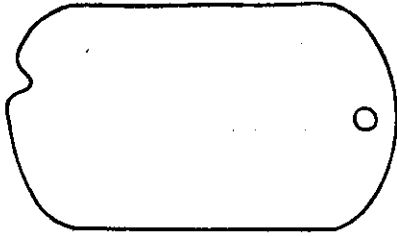
WD OMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

3 Dec 47

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)
UNKNOWN X-2353 (Formerly UNK X-457
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

Fabrica, Negros, P.I.

CAUSE OF DEATH

KIA-plane crash

DATE OF DEATH

January 1945

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)

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

AGRE MAUSOLEUM, MANILA, P.I.

DATE OF BURIAL

STORAGE
2 Dec 47

HOUR

1000

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

STORED
Casket

TYPE OF GRAVE
MARKER

None

PLOT No.
WANGER

802

ROW No.
BAY

A

GRAVE No.
CRYPT

238

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.

8153

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 STORED

IDENTIFICATION TAG ATTACHED TO
MARKER (Yes or no)

Yes

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

STORED
UNKNOWN X-2355

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

CRYPT
240

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

UNKNOWN X-2351

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

CRYPT
236

SIGNATURE OF PERSON PREPARING REPORT

R. R. ACLERTO, Pvt

SIGNATURE OF GRS OFFICER VERIFYING REPORT

S. PANOPLO 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

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

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

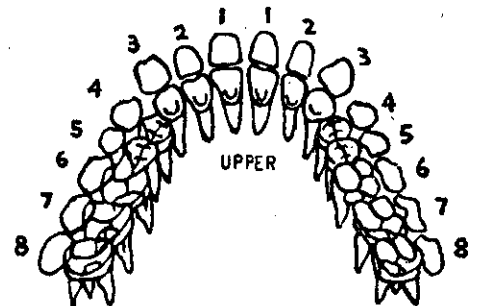
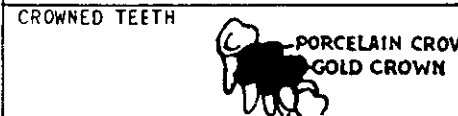
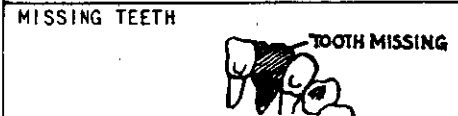
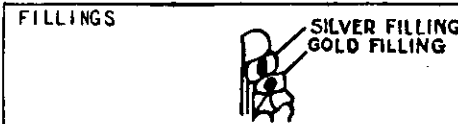
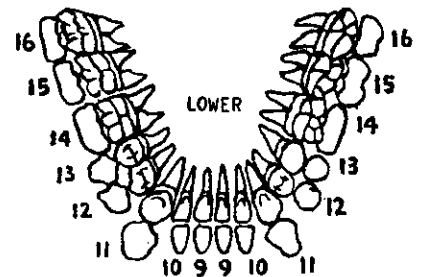


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



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



REMARKS: UNKNOWN Nos. X-2346, X-2353 and X-2338, AGRS Mausoleum Manila, P.I., formerly UNKNOWN Nos. X-456, X-457 and X-458 respectively, USAF Cemetery Leyte #1, P.I., were recovered from a common grave.

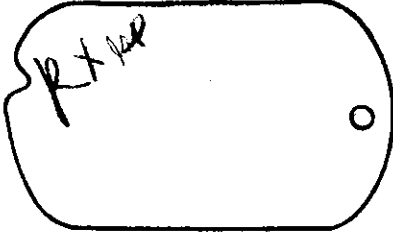
Identification Check List and Dental Chart accomplished.

10 FEB 1948

RESTRICTED

1jt

8153 U 3808

WD GMC FORM 1842 (Rev. 1 Apr. 1946) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)				DATE OF REPORT 12 Feb 46	
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION. NAME (Last, first, middle initial) UNKNOWN X-457 SERIAL No. - GRADE - ORGANIZATION - BRANCH OF SERVICE - RACE - RELIGION - IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY -					
PLACE OF DEATH Fabrica, Negros, P.I.		CAUSE OF DEATH KIA-plane crash			DATE OF DEATH Jan 1945		
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) Remains of 3 men buried in Common grave by Japanese. No information regarding plane crash available. No possible means of identification found. Remains were segregated into 3 human remains and buried as Unknowns X-456, X-457, and X-458.					
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) 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 USAF Cemetery Leyte #1, P.I.							
DATE OF BURIAL 5 Feb 46	HOUR 1600	BURIED IN (Shroud, Masket, or name of other) shelter halve		TYPE OF GRAVE MARKER Reg Cross	PLOT No.	ROW No.	GRAVE No. 8153
WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE Overlay fr Negros, P.I., #17, Coast & Geodetic Survey Manila, P.I., 1935, Geo Coord: N10°53'45" - E123°21'45"				PLOT No.	ROW No.	GRAVE No. Isolated burial
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY				
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes						
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) UNKNOWN X-456			RANK -	SERIAL No. -	ORGANIZATION -	GRAVE No. 8152	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) unknown X-458			RANK -	SERIAL No. -	ORGANIZATION -	GRAVE No. 8154	
SIGNATURE OF PERSON PREPARING REPORT Sgt Charles W. Hallock, GRS			SIGNATURE OF GRS OFFICER VERIFYING REPORT 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 Office. 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 Isolated burial Fabrica, Negros, P.I.
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OTHER IDENTIFICATION CLUES

Remains were recovered by searching parties on Negros, P.I. and shipped to this cemetery for Re-interment.

FILLINGS	SILVER FILLING GOLD FILLING	
CAVITIES	CAVITY DECAYED	
MISSING TEETH	TOOTH MISSING	
CROWNED TEETH	PORCELAIN CROWN GOLD CROWN	
BRIDGE WORK	GOLD BRIDGE	

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

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REMARKS:

**CONDITION OF BODY PRECLUDED FINGERPRINTING AND DENTAL CHARTING;
MAXILLA AND MANDIBLE MISSING
SKULL MISSING**

27 APR 1946

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