

FILE IDENTIFICATION TOPPER

FILE NUMBER	293 Enk. Leyte #1 X-543
SUBJECT	
	Also 293 Manila Mass. X-3761

QMC FORM 1121
1 AUG 45

44-11288
448 Far East

27 April 1949

SUBJECT: Unidentifiable Remains

TO : Commanding General
Philippine Command
APO 707, c/o Postmaster
San Francisco, California
ATTN: AGNS, PHILIPPINE ISLANDS

1. Reference is made to following Unknown remains now stored at
AGNS Museum, Manila, Philippine Islands:

X-4888	(Formerly X-288, Leyte #1, P.I.)
X-4787	(Formerly X-188, Leyte #1, P.I.)
X-4818	(Formerly X-188, Leyte #1, P.I.)
X-4828	(Formerly X-70, Santa Barbara #1, P.I.)
X-4838	(Formerly X-72, Santa Barbara #1, P.I.)
X-4848	(Formerly X-801, Leyte #1, P.I.)
X-4781	(Formerly X-811, Leyte #1, P.I.)

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

FOR THE QUARTERMASTER GENERAL:

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

cc--Administrative Section

J. Tinberg:lrc
MS:er
JW

REB

HJS

QMGH 293

And Incl.

Unknowns X-328, 335, 362 & 364
(Loyte #1) P. I.

WD, GAGC, Washington 25, D. C., 24 January 1947

TO: Commanding Officer, American Graves Registration Service Area
Command, Pacific Theater, APO 707, c/o Postmaster, San Francisco,
California

1. Reference is made to basic communication, paragraphs 2, 3 and 4.
2. Comparisons of tooth charts for Unknowns X-328, 332, 335, 337, 362, 364, 361 (formerly Nelson, Russell) and 363 (formerly Martin, Ernest G.), Loyte #1, have been made with negative results with WD dental records for the following:

Norris, Robert	Lt.	0-444574
Verner, Michael	Lt.	0-1392012
Demare, Victor V.	Pfc.	39556260
Flemons, Myron D.	Pvt.	39324454
Feyer, Edward C.	Pvt.	39325982
Switzer, Charles W.	Pfc.	39749749
Lesher, Robert L.	T/S	36732778
Bros, Frank	Pfc.	39029665
Hicks, John	1st Lt.	0-1123602
Corrales, Henry R.	Pfc.	39152277
Robinson, William R.	Pvt.	37678567

Comparison of WD dental records for Pvt. Robert A. Russell with tooth chart for Unknown X-335 will require further study.

3. Comparison of tooth charts for Unknown X-367 was made with official dental records for Col. Thomas N. Carlson and Pfc. Furio Caruogno with negative results. The records of this office indicate Unknown X-366 was identified as Pvt. Howard R. Gatta, 36691423, also that Lt. Babich, Pfc. Woodruff and S/Sgt. Nelson were identified.

4. Comparison of tooth chart for Unknown X-334 was made with WD dental records for 1st Lt. John Stone, 0-1175330 and found to be unfavorable.

FOR THE QUARTERMASTER GENERAL:

JAMES C. MARCHLAND
Major, GAGC
Assistant

AIRMAIL

6th Indorsement (Cont'd)

(3) Report of Interment and Report of Reinterment (with toothcharts and Medical Examination Certificate) inclosed as Incl. No. 4.

D. (1) Pvt. Myron A. Truxton, 36565371, reinterred USAF Cemetery, Leyte No. 1, grave 1097, from USAF Cemetery Rock Hill, grave 5, row 1, plot 1. Identified by member of same unit and laundry marks.

(2) Unknown X-326 (formerly identified as Myron A. Truxton, 36565371), reinterred USAF Cemetery, Leyte No. 1, grave 5620, from isolated burial. Identified by identification tags.

(3) Report of Interment and Report of Reinterment (with toothcharts) inclosed as Incl. No. 5.

3. Request the enclosed records be compared with existing War Department records for Sgt. Nelson, Sgt. Guertin, Pvt. Hart and Pvt. Truxton, to establish possible positive identification.

4. The inclosed photographs of these remains were taken for the purpose of laboratory reconstruction of the decedents' appearance. In addition to the photos required for reconstruction, the complete remains have been taken, to give every assistance to this project. It is requested that this reconstruction be made, and the results used for possible identification by relatives and friends.

5. If expert examination indicates that less than eight decedents are shown by these photos, it is requested that this office be advised so that consolidation of the graves may be effected. The duplication of names, particularly in the cases of Nelson and Guertin, may be the result of interment of the remains of one man in two separate graves.

s/ LEE M. HESTER
Colonel, GMC
Commanding

6 Incls: (New)

Incl. 1- Ltr Hq Base K, OCMC dtd
8 Jan 46, File PKQM 293
Subj: Iden. of Deceased.

Incl. 2- Rpt of Int. & Reint. with
toothchart for Nelson.

Incl. 3- Rpt of Int. & Reint. with
toothchart for Guertin

Incl. 4- Rpt of Int. & Reint with
toothchart for Hart.

Incl. 5- Rpt of Int. & Reint. with
toothchart for Truxton.

Incl. 6- Photographs

Old Inclosures Nos. 1-8 - w/d

HEADQUARTERS
UNITED STATES ARMY FORCES WESTERN PACIFIC
OFFICE OF THE COMMANDING GENERAL

GSQMM 293

APO 707
S: 15 March 1946

5 Feb. 1946

SUBJECT: Reports of Interment

TO: : Commanding Officer, Base K, United States Army Forces,
Western Pacific, APO 72

Desire clarification of attached Report of Reinterment for S-Sgt, Earnest G. Guertin, 32713617, interred in grave 5862 in view of attached true copies of Report of Interment showing original burial in USAF, Cemetery, Manarawat and reinterment in Grave 2522, USAF Cemetery, Leyte No. 1.

BY COMMAND OF LIEUTENANT GENERAL STYER:

JOHN A MAKSAIL
1st Lt. Inv.
Asst. Adjutant General

1 Incl:
Rpt of Interment
as above stated.

BASIC: Ltr Hqs AFWESPAC, OCG, APO 707, file GSQMM 293, subj:
Reports of Interment, dtd 5 Feb. 46.

PKQM 293 1st Ind. WDR/ljt
HEADQUARTERS BASE K, UNITED STATES ARMY FORCES WESTERN PACIFIC, APO 72
9 Feb. 46

TO: Headquarters, United States Army Forces Western Pacific, APO 707.

1. Your attention is invited to Inclosure 1, true copy of
letter to Chief Quartermaster, AFWESPAC, APO 707, dtd 8 Jan 46, file
PKQM 293, subject: Identification of Deceased.

2. To date this Headquarters has received no instructions as
to how this situation should be handled.

FOR THE COMMANDING OFFICER:

1 Incl:
True copy Ltr to OCG dtd 8 Jan 46
file PKQM 293, subj: Ident of Deceased

CHARLES E. OGROSKY
Capt AGD
Asst Adj Gen.

HEADQUARTERS BASE K
UNITED STATES ARMY FORCES WESTERN PACIFIC
OFFICE OF THE QUARTERMASTER
APO 72

WDR/ljt

PKQM 293

8 Jan 46

SUBJECT: Identification of Deceased.

TO : Chief Quartermaster, United States Army Forces
Western Pacific, APO 707.

1. Attention is invited to information submitted on
4 members of the 511th Para Inf., 11th Airborne Div,

2. Following members of that organization are buried
at USAF Cemetery Leyte #1, P.I. in graves indicated:

TRUXTON, Myron A., Pvt., 36565371	Grave 1097
NELSON, Emanuel S., T/Sgt., 20251348	1094
GUERTIN, Ernest G., S/Sgt., 32713617	2522
HART, Daniel D., Pvt., 36297792	2511

3. Information on recovery of isolated burials in the area of Mt. Catmon,
Lubi, and Mahonag is as follows:

(a) Body found with identification tags of Myron A. Truxton at Mt.
Catmon, Leyte, P.I. on 8 Oct. 45 and buried 10 Oct 45 as Truxton. Organization
of deceased claimed Truxton buried in grave 1097 was the real Truxton. Per in-
structions your Office, the second Truxton was changed to Unknown X-226, grave
5620 and corrected report submitted with QMC form 1044.

(b) Body found 1.5 mi SW of Mahonag, Leyte with identification tag of
Emanuel S. Nelson and was buried as Nelson on 24 Dec. 45 in grave 5859. The
same Nelson is also buried in grave 1094.

(c) Body found in vicinity of Lubi, Leyte, P.I. with identification
tag of Ernest G. Guertin and was buried as Guertin on 26 Dec 45 in grave 5862.
The same Guertin is also buried in grave 2522.

(d) Body found in vicinity of Lubi, Leyte, P.I. with web belt H-7792,
canteen inscribed with Hart, D.D.-7792, and the Paratrooper insignia, and
canteen cup inscribed with "Big Boy Hart". Since identification tags were not
found, remains were interred 4 Jan. 46 in grave 6167 as Unknown X-361, as Hart
is also buried in grave 2511. However, due to the skeletal bones being
considerably larger than average, it is the belief on this Hqs that this is the
real Hart, if his nickname "Big Boy Hart" was taken from this size.

CONT'D: Ltr Hqs, Base A, AFWESPAC, OQM, APO 72, subj: n.
of Deceased, dtd 8 Jan 46., file PKOM 293

4. Each of the four isolated burials were recovered in the area where Truxton, Nelson, Guertin, and Hart were killed, according to the complete casualty report of the 11th Airborne Div on file this Hqs.

5. Attention invited to means of identification used on original reports, especially Hart, since the web belt, canteen and cup were found with the isolated burial.

6. Request advise as to which remains will be identified as Truxton, Nelson, Guertin, and Hart.

FOR THE QUARTERMASTER:

3 Incls:
QMC form 1044 (dup)
NELSON
GUERTIN
HART

WILLIAM D ROGERS
1st Lt., Inf
Assistant

BASIC: Ltr Hq Base K. AFWS PAC, APO 72 dtd 8 Jan 46, file PKQM 293,
subject: Identification of Deceased.

GSQM 293 1st Ind. S: 24 Mar 46
HEADQUARTERS, UNITED STATES ARMY FORCES WESTERN PACIFIC, OFFICE OF THE
CHIEF QUARTERMASTER, APO 707, 24 Jan 46.

TO : Quartermaster General, Washington 25, D. C.

Request the attached QMC Form 1044 be compared with existing
War Department records in order to further clarify identity of these
deceased.

FOR THE CHIEF QUARTERMASTER:

ROBERT J. PHILLIPS
Captain, QMC
Assistant

3 Incls: n/c

Info to:

QM, Base K, APO 72

10/2/46

HEADQUARTERS BASE K
UNITED STATES ARMY FORCES WESTERN PACIFIC
OFFICE OF THE QUARTERMASTER
APO 72

WDR/ ljt

PKQM 293

8 Jan 46

SUBJECT: Identification of Deceased.

TO : Chief Quartermaster, United States Army Forces Western Pacific, APO 707.

1. Attention is invited to information submitted on 4 members of the 511th Para Inf. 11th Airborne Div.

2. Following members of that organization are buried at USAF Demetery Leyte #1, P.I. in graves indicated:

TRUXTON, Myron A., Pvt., 36565371	Grave 1097
NELSON, Emanuel S., T/Sgt., 20251348	1094
GUERTIN, Ernest G., S/Sgt. 32713617	2522
HART, Daniel D., Pvt. 36297792	2511

3. Information on recovery of isolated burials in the area of Mt. Catmon, Lubi, and Mahonag is as follows:

(a) Body found with identification tags of Myron A. Truxton at Mt. Catmon, Leyte, P.I. on 8 Oct 45 and buried 10 Oct 45 as Truxton. Organization of deceased claimed Truxton buried in grave 1097 was the real Truxton. Per instructions your office, the second Truxton was changed to Unknown X-326, grave 5620 and corrected report submitted with QMC forms 1044.

(b) Body found 1.5 mi SW of Mahonag,, Leyte with identification tag of Emanuel S. Nelson and was buried as Nelson on 24 Dec 45 in grave 5859. The same Nelson is also buried in grave 1094.

(c) Body found in vicinity of Lubi, Leyte, P.I. with identification tag of Earnest G. Guertin and was buried as Guertin on 26 Dec. 45 in grave 5862. The same Guertin is also buried in grave 2522.

(d) Body found in vicinity of Lubi, Leyte, P.I. with web belt H-7792, canteen inscribed with Hart, D. D.-7792, and the Paratrooper insignia, and canteen cup inscribed with "Big Boy Hart". Since identification tags were not found, remains were interred 4 Jan 46 in grave 6167 as Unknown X-361, as Hart is also buried in grave 2511. However, due to the skeletal bones being considerably larger than average, it is the belief of this Hqs that this is the real Hart, if his nickname "Big Boy Hart" was taken from this size.

BASIC: Ltr Hqs. Case K AFWESPAC, APO 72, file PK 293, subj:
Identification of Deceased, dtd 8 Jan 46, (CON'D)

4. Each of the four isolated burials were recovered in the area where Truxton, Nelson, Guertin, and Hart were killed, according to the complete casualty report of the 11th Airborne Div. on file this Hqs.

5. Attention invited to means of identification used on original reports, especially Hart, since the web belt, canteen and cup were found with the isolated burial.

6. Request advise as to which remains will be identified as Truxton, Nelson, Guertin, and Hart.

FOR THE QUARTERMASTER:

3 Incls.
QMC form 1044 (dup)
Nelson, Guertin, Hart

s/t WILLIAM D ROGERS
1st Lt., Inf
Assistant

A CERTIFIED TRUE COPY:

WILLIAM D ROGERS
1st Lt., Inf.

3

DISINTERMENT DIRECTIVE

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

7740 81633

21 04 50

NAME: UNKNOWN X - 543 SERIAL NUMBER GRADE ARM RACE RELIGION

CEMETERY: USAF CEMETERY LEYTE NO. 1, P. I. PLOT ROW GRAVE: 2522 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. W. MCKINLEY, P. I. NAME AND ADDRESS OF NEXT OF KIN: (BY ADMINISTRATIVE DECISION)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER GRADE DATE OF DEATH DATE DISTINTERRED IDENTIFICATION TAG ON ORGANIZATION RELIGION IDENTIFICATION VERIFIED BY 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 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

OSCR 293.9

SUBJECT: Unidentifiable Remains

4 Apr 1949

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

1.

1. In accordance with the provisions of your letter, file OMCMU 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-967	Unknown X-3312
" X-1030	" X-3360
X X-1075	" X-3761
" X-3234	" X-3787
"- X-3236	" X-4960

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

FOR THE COMMANDING GENERAL:

JOHN A. MARSEAL
1st Lt., AGD
Asst Adj Gen

10 Incls:
OMC Forms 1044

COPY

/drs

Interred 26 Apr 1950

L 9 59 Ft. McKinley

PREPARED BY PHILCOM
DISINTERMENT DIRECTIVE

1

caremark
CARL R. H. MARK

Cemetery Superintendent

SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

7740 81633

DATE

21 04 50
DAY MONTH YEAR

/add

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
UNKNOWN X - 543					

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS
USAF CEMETERY LEYTE NO. 1, P. I.			2522	7701 80 CODE DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
UNITED STATES MILITARY CEMETERY FT. WM. MCKINLEY, P. I.	(BY ADMINISTRATIVE DECISION)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISINTERRED
MN UNK X - 3761 UNKNOWN X - 543				29 Sept '48
IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY	
3 REMAINS 1 MARKER			JOSEPH W GESUSE Embalmer NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
Shelter Half	Skeletal

OTHER MEANS OF IDENTIFICATION

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

(2) Mausoleum tags Unk X - 3761

REMAINS PREPARED AND PLACED IN CASKET

DATE 29 Sept '48	BY JOSEPH W GESUSE
CASKET SEALED BY JOSEPH W GESUSE	EMBALMER (Signature) s/ Joseph W Gesuse

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
RAYMOND H TANGUAY, DATE 29 Sept '48 Sgt lc, RA	CHARLES R BATES, 1st Lt, USAFR

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

s/ Charles R Bates, 1st Lt, USAFR
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS
✓
File 6/9/50. Adl. Res. Report

RECORD OF CUSTODIAL TRANSFER

FROM		AGRS MAUSOLEUM	TO	US MILITARY CEMETERY
KIND OF CONVEYANCE		TRUCK	NAME OF CONVOYER	
SIGNATURE OF SHIPPER			SIGNATURE OF RECEIVER <i>W. R. Smith</i>	
DATE			DATE APR 26 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	

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN Unknown X-3761 (Formerly Unk X-543 USAF Cemetery Leyte #1 P. I.)				2. DATE OF REPORT 25 March 49	
3. NAME OF CEMETERY ACDC		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 Unknown
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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

U T D

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 WHAT EXTENT? Most bone fractured
--	---

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"

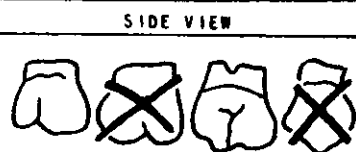
Received 21 Apr 49 OQMB
 Not identifiable from
 information presently
 available 27 Apr 49 - J. Tinberg

Rec'd #5

0000

Received
Not identifiable from
information presently
available

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:



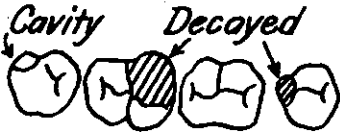
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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:



See Remarks								Fractured								See Remarks													
RIGHT								LEFT																					
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8														
Maxilla Missing	P	Chipped	P	P	P	P	P	P	P	P	P	P	Maxilla Missing																
Side View																Side View													
UPPER																													
Top View																Top View													
LOWER																													
Side View																Side View													
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." REMARKS: Maxilla posthumously fractured between R8 and L1. Portion of maxilla, R8 and L8, missing. No maxillary teeth present on this portion. Root of L6 is only present. R6 is occlusally and facially chipped. No mandible nor mandibular teeth found with remains.

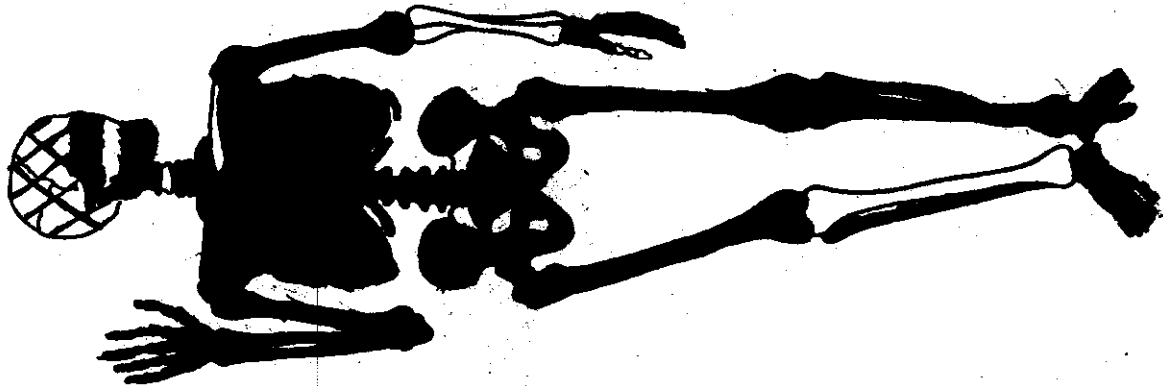
"UNIDENTIFIABLE"

J. J. McDERMOTT

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

Laboratory Officer, CIP

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 ROI bottle, or Identification tags found with remains.
No personal effects found. Estimated weight of remains 1 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

REPORT OF DISINTERMENT FOR IDENTIFICATION

Place USIA Cem. Route 10.1, I.I.

Date 5 Jan 46

X 543

1. Remains of McMURRAY, Ernest G Serial Number 72 717 (17)

Rank S/Capt Organization USIA, 511 Area Inf. Dept

2. Disinterred (date): 5 Jan 46 From (give complete location): USIA Cemetery Route 10.1, I.I. Grave 2522

By: Group Sgt J.C. Evans Unit 1506 M.H. Co

3. Reburied (date) 5 Jan 46 In (give complete location): USIA Cemetery Route 10.1, I.I. Grave 2522

By: Group Sgt J.C. Evans Unit 1506 M.H. Co Nature of reburial Shelter halve

4. Report as to nature of original burial and condition of body upon disinterment:
Original burial in shelter halve, body completely decomposed

5. (a) Identification tags: Buried with body? Yes On grave marker? Yes
(b) Other means of identification found upon disinterment, and general remarks: _____

6. What does examination of body show as regards the following identifying items:

(a) Height (actual measurement) _____

(b) Weight (estimated) _____

(c) Hair-Color _____

Quantity _____

Characteristics _____

(d) Hair on face-Color _____

Location _____

Quantity _____

(e) Permanent marks on body (old scars, peculiarities, or missing parts) _____

(f) Wounds or missing parts (received at time of casualty) _____

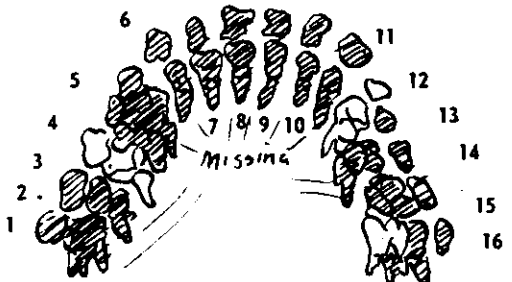


Diagram represents mouth wide open



7. Disinterment supervised by Sgt McMenama Approved: WILLIAM E. ROGERS /s/t/
(Title) 1st Lt., Inf

8. Reburial supervised by Sgt McMenama Approved: WILLIAM E. ROGERS /s/t/
(Title) 1st Lt., Inf.

George L. Redden Jr.
GEORGE L. REDDEN, JR.
1st Lt., Inf

Instructions for the Proper Completion of G.R.S. Form No. 4

Enter information, as noted below, on reverse side of sheet in the corresponding numbered space.

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.

2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.

3. Give date and accurate information, as to location of reburial and the group and unit which made reburial, and how reburial was made—in casket, wooden box, etc.

4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried—in a casket, box, burlap, etc. This statement should be as complete as possible.

5. (a) State whether identification tags were found buried with body and on grave marker by reporting "Yes" or "No".

(b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying the body, other than that tabulated under Item No. 6. If additional remarks are necessary use additional sheet of paper and attach hereto.

6. Give all information as to body description and dental chart as nearly correct as the condition of the body will allow. Items (e) and (f) under the body description are very important and should be very complete. The dental chart is also very important and should be filled with great care. 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 (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

MISSING TEETH—All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus:



Tooth missing
Tooth missing



CROWNED TEETH—Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain) thus:



Gold crown



Porcelain crown
Gold crown

BRIDGE WORK—Block in solid the crown of tooth, (label gold bridge, gold and porcelain bridge), thus:



Gold & porcelain bridge



Gold bridge

FILLINGS—Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus:



Silver filling

Gold filling



Gold filling

CARIES (CAVITIES)—Outline location and size of cavities, shade in thus:



Cavity
Decayed



Decayed
Decayed

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".

7. Show name of person supervising the disinterment and the name and title of the person approving same.

8. Show name of person supervising the reburial and the name and title of the person approving same.

REPORT OF DISINTERMENT FOR IDENTIFICATION

Place USAF Cem. Leyte #1, P.I.

Date 5 Jan 45

X-543

1. Remains of ~~SUERTIN, Ernest G~~ Serial Number 32 713 617

Rank S/Sgt Organization Co C, 511 Para Inf Regt

2. Disinterred (date): 5 Jan 46 From (give complete location): USAF Cemetery Leyte #1, P.I. Grave 2522

By: Group Sgt McMemama Unit 4586 QM GR Co

3. Reburied (date) 5 Jan 46 In (give complete location): USAF Cemetery Leyte #1, P.I. Grave 2522

By: Group Sgt McMemama Unit 4586 QM GR Co Nature of reburial shelter halve

4. Report as to nature of original burial and condition of body upon disinterment:
Original burial in shelter halve, body completely decomposed

5. (a) Identification tags: Buried with body? Yes On grave marker? Yes
(b) Other means of identification found upon disinterment, and general remarks: _____

6. What does examination of body show as regards the following identifying items:

(a) Height (actual measurement) _____

(b) Weight (estimated) _____

(c) Hair-Color _____

Quantity _____

Characteristics _____

(d) Hair on face-Color _____

Location _____

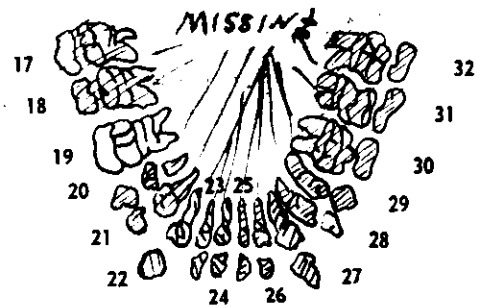
Quantity _____

(e) Permanent marks on body (old scars, peculiarities, or missing parts) _____

(f) Wounds or missing parts (received at time of casualty) _____



Diagram represents mouth wide open



7. Disinterment supervised by Sgt McMemama Approved: William D. Rogers
(Title) 1st Lt., Inf

8. Reburial supervised by Sgt McMemama Approved: William D. Rogers
(Title) 1st Lt., Inf

Sheet 2

Instructions for the Proper Completion of G.R.S. Form No. 4

Enter information, as noted below, on reverse side of sheet in the corresponding numbered space.

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.

2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.

3. Give date and accurate information, as to location of reburial and the group and unit which made reburial, and how reburial was made—in casket, wooden box, etc.

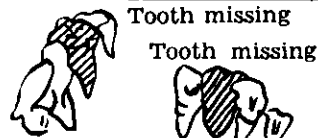
4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried—in a casket, box, burlap, etc. This statement should be as complete as possible.

5. (a) State whether identification tags were found buried with body and on grave marker by reporting "Yes" or "No".

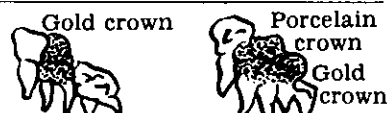
(b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying the body, other than that tabulated under Item No. 6. If additional remarks are necessary use additional sheet of paper and attach hereto.

6. Give all information as to body description and dental chart as nearly correct as the condition of the body will allow. Items (e) and (f) under the body description are very important and should be very complete. The dental chart is also very important and should be filled with great care. 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 (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

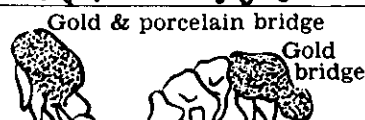
MISSING TEETH—All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus:



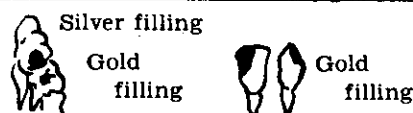
CROWNED TEETH—Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain) thus:



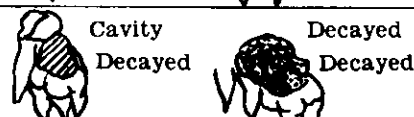
BRIDGE WORK—Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus:



FILLINGS—Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus:



CARIES (CAVITIES)—Outline location and size of cavities, shade in thus:



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".

7. Show name of person supervising the disinterment and the name and title of the person approving same.

8. Show name of person supervising the reburial and the name and title of the person approving same.

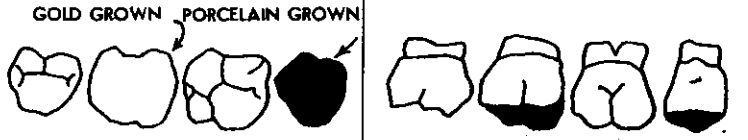
IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-3761 (Formerly UNK X-543 (USAF Cemetery Leyte #1, P.I.)			2. DATE OF REPORT 12 Feb 48		
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	812	W	5742	DISINTERMENT	REINTERMENT 14 Feb 48
PHYSICAL DESCRIPTION					
8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT UTD Most long bones missing.		10. COLOR OF HAIR UTD	11. RACE UTD	
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- 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 WHAT EXTENT ? Most bones fractured.			
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:



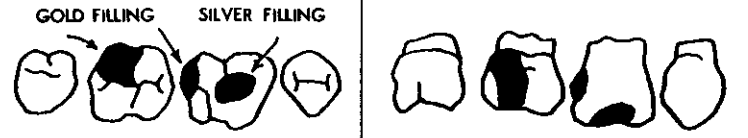
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD PORCELAIN SILVER OR GOLD AND PORCELAIN), THUS:



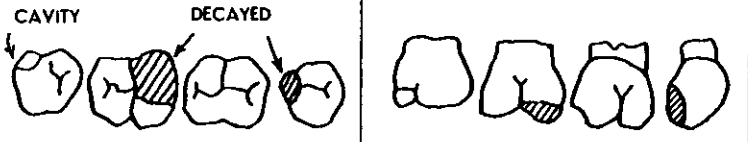
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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:



<i>See Remarks</i>						<i>Fractured</i>						<i>See Remarks</i>											
RIGHT												LEFT											
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8								
<i>Maxilla Missing</i>	⊗	<i>chipped</i>	⊗	⊗	⊗	⊗	⊗	⊗	⊗	⊗		⊗	<i>Maxilla Missing</i>		<i>Maxilla Missing</i>								
SIDE VIEWS																							
TOP VIEWS																							
SIDE VIEWS																							
<i>MANDIBLE</i>								<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." REMARKS: Maxilla posthumously fractured between R1 and L1. Portion of maxilla, R8 and L2, is missing. No maxillary teeth present on this portion. Root of L6 is only present. R6 is occlusally and facially chipped. No mandible nor mandibular teeth found with remains.

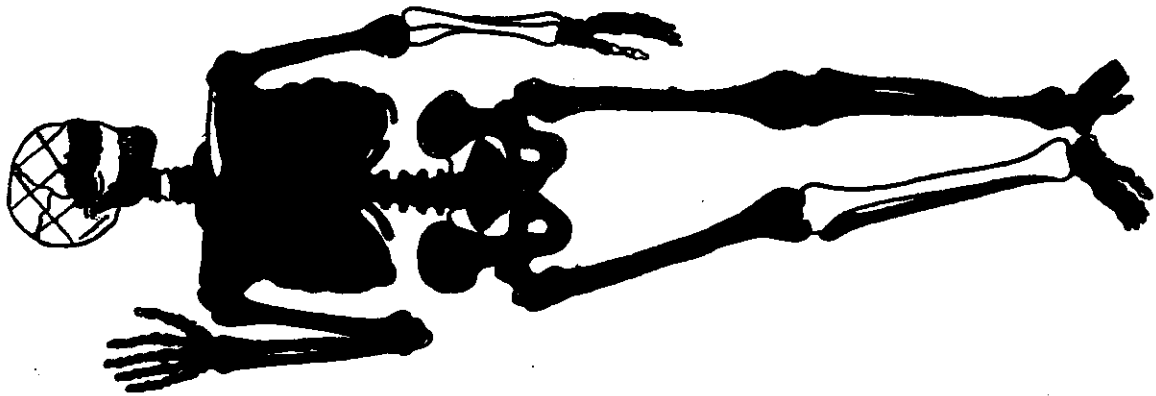
CERTIFIED TRUE COPY
A. D. Sambora

G T GAMBOA
2d Lt MSC

s/ Joseph D Murphy T/5

19. BLACK OUT PARTS OF BODY NOT RECOVERED

X-3760



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 ROI bottle, or I.D. tags found with remains.
No personal effects found. Estimated weight of remains 1 lb.
No other means of identification found.

CERTIFIED TRUE COPY

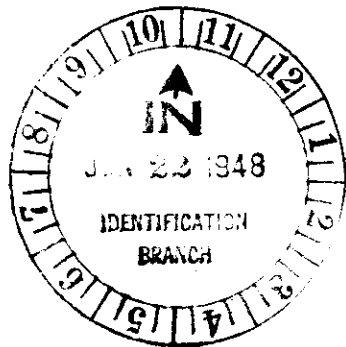
G. T. Gamboa

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
/p/ ROBERT F. STEVENSON Ungraded
CIP Laboratory, Manila, P.I.

SIGNATURE
s/ Robert F. Stevenson



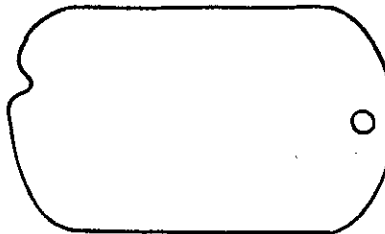
WB QMG FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)

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

DATE OF REPORT

1 Mar 48

Imprint Identification Tag If Possible. DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN X-3761 (Formerly UNK X-543 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 Vicinity of Lubi, Leyte, P.I.	CAUSE OF DEATH KIA	DATE OF DEATH 28 Nov 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 5 on reverse)
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (2)	

Received 21 Apr. 49
Not identified
Information provided available 27 Apr. 49
J. Tinber
REPRODUCTION RECORDS SECTION

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 14 Feb 48	HOUR 1300	BURIED IN (Shroud, blanket, or name of other) Casket	TYPE OF GRAVE MARKER None	PLOT No. 812	ROW No. W	GRAVE No. 5742
-----------------------------	--------------	---	------------------------------	-----------------	--------------	-------------------

WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery Leyte #1, P.I.	PLOT No.	ROW No.	GRAVE No. 2522
---	---	----------	---------	-------------------

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-3762	RANK	SERIAL No.	ORGANIZATION	GRAVE No. 5743
--	------	------------	--------------	-------------------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-3760	RANK	SERIAL No.	ORGANIZATION	GRAVE No. 5741
---	------	------------	--------------	-------------------

SIGNATURE OF PERSON PREPARING REPORT AQUINO T/5 QMC	SIGNATURE OF GRS OFFICER VERIFYING REPORT L S PANOPPIO, 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.

354

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	
CAVITIES	
MISSING TEETH	
CROWNED TEETH	
BRIDGE WORK	

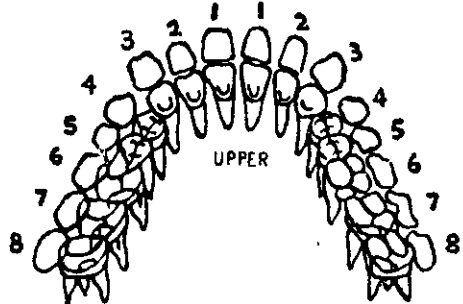
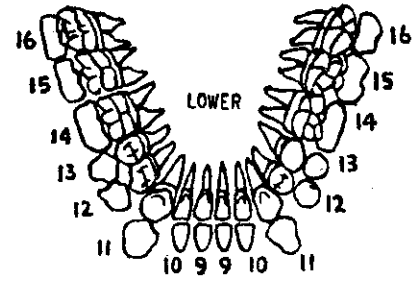
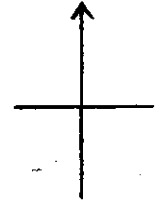


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



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



REMARKS:

QMC Form 1044, 1044-A and 1044-B accomplished.

12 MAY 1948

CORRECTED

RESTRICTED

rlr

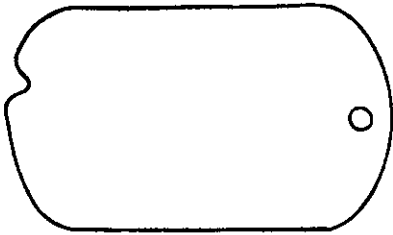
2522

WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)RE/
REPORT OF INTERMENT
(AR 30-1810 and AR 30-1815)

DATE OF REPORT

CORRECTED

28 Nov. 1946

Imprint Identification Tag If Possible. DO NOT TYPE		Section 1.—IDENTIFICATION.			
		NAME (Last, first, middle initial)		SERIAL NO.	
		UNKNOWN X-543 (Formerly GUERTIN, Ernest G.)			
		GRADE	ORGANIZATION	BRANCH OF SERVICE	
-----		-----		-----	
RACE		RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY		
-----		-----		-----	
PLACE OF DEATH		CAUSE OF DEATH		DATE OF DEATH	
Vicinity Lubi, Leyte, P.I.		KIA		28 Nov. 1944	
EMERGENCY ADDRESSEE (Name, relationship, and address)					

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none)		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)			
NONE		Changed from GUERTIN, Ernest G. per ltr fr WD, OQMG, Wash 25, D. C., dtd 30 Oct 46, file QMGYG 293, GUERTIN, Ernest G. ASN 32 713 617 (Leyte #1), P.I. subj: Identification of Unknown Deceased.			
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)					
YES (UNKNOWN TAGS)					
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME				A TRUE COPY:	
NONE				<i>George D. Redden, Jr.</i>	
				GEORGE D. REDDEN, JR. Captain, Inf.	
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.					
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY					
USAF Cemetery Leyte #1, P.I.					
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No. GRAVE No.
16 July 1945	0900	Shelter Half	Reg. Cross		2522
WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE			PLOT No.	ROW No. GRAVE No.
YES	USAF Cemetery Manarawat #1, Leyte, P.I.				7
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY			
		Corrected report of re-interment buried in bottle with body. Corrected metal tag buried in bottle and attached to marker.			
IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)				
YES	YES				
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.	
ABERNATHY, Elton L.	Pfc	38413161	Co E, 511 Para Inf.	2521	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.	
OLIVETTI, Michael G.	S/Sgt	39277137	Co, C. 511 Para Inf.	2523	
SIGNATURE OF PERSON PREPARING REPORT			SIGNATURE OF GRS OFFICER VERIFYING REPORT		
/s/t/ Cpl. Jack Slagle, GRS			/s/t/ JOSEPH M. PHELAN, Captain, CAC.		
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

16-48997-1

Section 3. UNIDENTIFIED REMAINS.


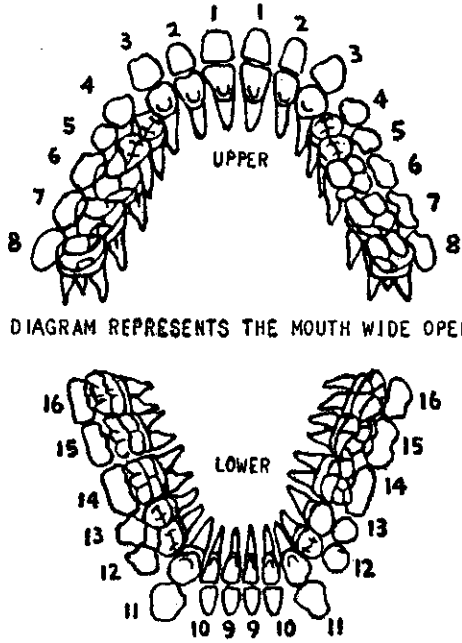




INSTRUCTIONS:

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

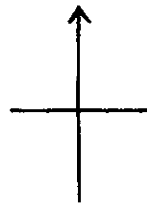
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.

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

OTHER IDENTIFICATION CLUES

FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p> <p>LOWER</p>
CAVITIES	 <p>CAVITY DECAYED</p>	
MISSING TEETH	 <p>TOOTH MISSING</p>	
CROWNED TEETH	 <p>PORCELAIN CROWN GOLD CROWN</p>	
BRIDGE WORK	 <p>GOLD BRIDGE</p>	

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



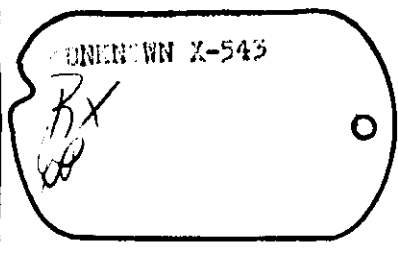
REMARKS:

CORRECTED

New No. Do not count
RESTRICTED

U rlf 5188 2522

WD OMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)	REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)	DATE OF REPORT CORRECTED 28 Nov. 1946
---	---	--

Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.		
	NAME (Last, first, middle initial)		SERIAL No.
	UNKNOWN X-543 (Formerly GUERTIN, Ernest G.)		
GRADE	ORGANIZATION	BRANCH OF SERVICE	
-----	-----	-----	
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	
-----	-----	-----	

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
Vicinity Lubi, Leyte, P.I.	KIA	28 Nov. 1944

EMERGENCY ADDRESSEE (Name, relationship, and address)

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none)	IF NO TAGS FOUND ON BODY. DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)
NONE	Changed from GUERTIN, Ernest G. per ltr fr WD, OQMG, Wash 25 D.C., dtd 30 Oct 46, file QMGYG 293, GUERTIN, Ernest G. ASN 32 713 617 (Leyte #1), P.I. subj: Identification of Unknown Deceased.
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no)	
YES (UNKNOWN TAGS)	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

Incl B

NONE

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

USAF Cemetery Leyte #1, P.I.

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
16 July 1945	0900	Shelter half	Reg. Cross			2522

WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE
YES	USAF Cemetery Manarawat #1, Leyte, P.I.
	PLOT No. ROW No. GRAVE No.

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY Corrected report of re-interment buried in bottle with body. Corrected metal tag buried in bottle and attached to marker.
IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)	
YES	YES	

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
ABERNATHY, Elton L.	Pfc	38413161	Co E, 511 Para Inf.	2521

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
OLIVETTI, Michael G.	S/Sgt	39277137	Co C, 511 Para Inf.	2523

SIGNATURE OF PERSON PREPARING REPORT <i>Jack Slagle</i> Cpl Jack Slagle, GRS	SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>Joseph M. Phelan</i> JOSEPH M. PHELAN, Captain, CAC
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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.

11 DEC 1946

Section 3.—UNIDENTIFIED REMAINS.

INSTRUCTIONS:


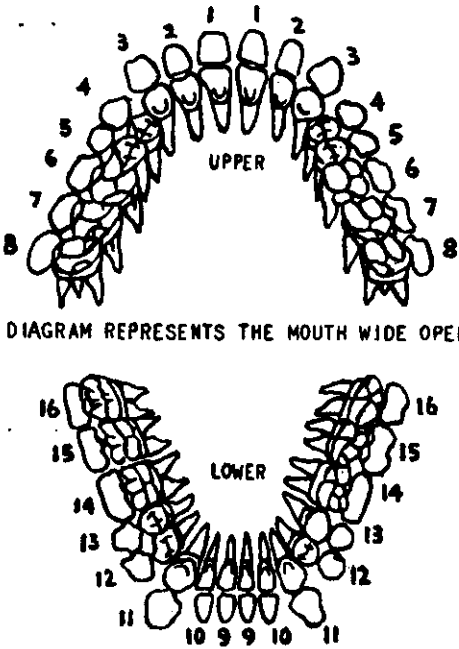




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

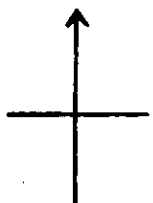
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS

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

OTHER IDENTIFICATION CLUES

<p>FILLINGS</p>  <p>SILVER FILLING GOLD FILLING</p>	 <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
<p>CAVITIES</p>  <p>CAVITY DECAYED</p>	
<p>MISSING TEETH</p>  <p>TOOTH MISSING</p>	
<p>CROWNED TEETH</p>  <p>PORCELAIN CROWN GOLD CROWN</p>	
<p>BRIDGE WORK</p>  <p>GOLD BRIDGE</p>	

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



REMARKS:

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

QMGYG 293
GUERTIN, Ernest G.
ASN. 32713617
(Leyte #1) P.I.

30 October 1946

SUBJECT: Identification of Unknown Deceased

TO : Commanding General, U. S. Army Forces
Western Pacific (Manila)
APO 707, c/o Postmaster
San Francisco, California

1. Reference is made to 6th Indorsement from your office, dated 5 July 1946, file GSQMM: 293, Subject: Reports of Interment (S/Sgt. Ernest G. GUERTIN).

2. In compliance with request, paragraph 3, comparison of War Department dental records for S/Sgt. Ernest G. Guertin, 32713617, with chart for remains buried in Grave 2522, Leyte #1, as Sgt. Guertin, has been made and found unfavorable.

3. It is therefore, requested that the remains buried in Grave 2522 be disinterred, Sgt. Guertin's tags removed from the body, and the remains be redesignated as an Unknown and marked accordingly.

4. It is further requested that a corrected Report of Burial for the Unknown, together with any other available clues to identity, be forwarded to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

/s/ James C. MacFarland
/t/ JAMES C. MacFARLAND
Major, QMC
Assistant

A TRUE COPY:



JOSEPH M. PHELAN
Captain, CAC

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

REPORT OF INTERMENT
(TM 10-638 AND AR 30-1815)

CONFIDENTIAL

141991

293

X543

30

156

Buertin Ernest G 32713617 S/Sgt 511 Para Inf Rget.
(Last name) (First) (Initial) (Serial number) (Rank) (Organization)

Vicinity Lubi, Leyte Island, PI. 28 Nov 44 KIA-body completely decomposed.
(Place of death) (Date of death) (Cause of death)

23 Jan 45 USAF Cem Manarawat #1. (Temp.) Cord. 31.1 - 25.5, Corrected
(Time and date of burial) (Name of cemetery) (Name or co-ordinates of location)

Special Map, Leyte Island, PI., Sheet "D", Scale 1:50,000.

7 1 1 Regulation
(Grave number) (Row number) (Plot number) (Type of marker—Regulation V-shaped or other)

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

Religion Protestant

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

(If no identification tags, but identity definitely established, give particulars) 00 E

Body buried on RIGHT Abernathy, Elton, L. 38413161 Pfc 511 Para Inf 8
(Name) (Serial number) (Rank) (Organization) (Grave number)

Body buried on LEFT Olivetti, Michael G 29277137 S/Sgt 511 para Inf 6
(Name) (Serial number) (Rank) (Organization) (Grave number)

Mrs. Anna A. Buertin (Wife) 5 Dewey Ave., York, Penn.
(Name and address of EMERGENCY ADDRESSEE) (Name and address of LEGAL NEXT OF KIN)

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

24/1a1

Date July 21, 1945
J.R.K.

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 :
 (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.

W. D. ...
 (Sign, name of officer or other person reporting burial)
 (Verified by Army GRS)

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THUMB

LEFT HAND

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RIGHT HAND

RECEIVED
 50 APR 1945

ugk

RESTRICTED

RE

11981100

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

REPORT OF INTERMENT

(TM 10-630 AND AR 30-1815)

X 543

~~SUBJECT~~

Ernest

G.

32 713 617

S/Sgt

Co C, 511 Para Inf Regt.

(Last name)

(First)

(Initial)

(Serial number)

(Rank)

(Organization)

Vicinity Lubi, Leyte P.I.

2 November 1944

KIA

(Place of death)

(Date of death)

(Cause of death)

0900 hrs 16 July 1945

USAF Cemetery, Leyte #1, P.I.

(Time and date of burial)

(Name of Cemetery)

(Name of coordinates of location)

2522

(Grave number)

(Row number)

(Plot number)

Reg Cross

(Type of marker—Regulation V-shaped or other)

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

Disinterred from USAF Cemetery, Manarawat #1, Leyte, P.I. grave 7

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

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

Religion Protestant

Body buried on RIGHT OLIVETTI, Michael G. 39 277 137 S/Sgt Co C, 511 Para Inf 2522

(Name)

(Serial number)

(Rank)

(Organization)

(Grave number)

Body buried on LEFT ABERNATHY, Elton L. 38 413 161 Pfc Co B, 511 Para Inf 2521

(Name)

(Serial number)

(Rank)

(Organization)

(Grave number)

Mrs. Anna A. Guertin (Wife) 5 Dewey Ave., York, Penn.

(Name and address of EMERGENCY ADDRESSEE)

(Name and address of LEGAL NEXT OF KIN)

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

G No. 1247

RESTRICTED

IF DECEASED UNIDENTIFIED

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

Height: _____
 Weight: _____
 Colour of eyes: _____
 Colour of hair: _____
 Race: _____
 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.

John E. Rohle, S/Sgt. GRS
 (Signature of officer or other person reporting burial)

(Verified by Army Officer)

RECEIVED
 7 SEP 1950

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LEFT HAND

THUMB

THUMB

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RIGHT HAND

RESTRICTED

RE

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

REPORT OF INTERMENT

(TM 10-630 AND AR 30-1815)

X 543

~~QUENTIN~~ Ernest ~~S~~ 32 717 617 /Sgt. Co C, 511 Para
 (Last name) (First) (Initial) (Serial number) (Rank) (Organization) Inf Regt
 Vicinity Lubi, Lwte, I.I. 23 November 1944 KIA
 (Place of death) (Date of death) (Cause of death)
 6900 hrs 16 July 1945 USAP Cemetery, Lwte No. 1, I.I.
 (Time and date of burial) (Name of cemetery) (Name or co-ordinates of location)

Identification approved by OCMG Board of Review 25 Sept. 1946

2522 ~~1000~~ Row Cross
 (Grave number) (Row number) (Plot number) (Type of marker—Regulation V-shaped or other)

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

Religion Protestant
 Disinterred from USAP Cemetery, Lapanawet No. 1, Lwte, I.I. grave 7
 A. H. H. COY

George I. Reddy
 GEORGE I. REDDY JR.
 (If no identification tags, what means of identification are buried with the body?)
 1st Lt., Inf.

X-335 (If no identification tags, but identify definitely established, give particulars) Co C, 511 - 5863
 Body buried on RIGHT *QUENTIN, Michael - S - 39 2771 37* /Sgt - Para Inf - - 2522 -
 (Name) (Serial number) (Rank) (Organization) (Grave number)

X-334
 Body buried on LEFT *QUENTIN, Lwte - L - 32 12161* /Sgt - 511 Para Inf - 2521 -
 (Name) (Serial number) (Rank) (Organization) (Grave number)

Mrs. A. S. A. Quentín (Wife) 5 Lower Ave., York, Penn.
 (Name and address of EMERGENCY ADDRESSEE) (Name and address of LEGAL NEXT OF KIN)

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

(21) *U.S. 32*

RESTRICTED

*File
22 Oct. 1946
Ford*

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 :
(If possible, have medical personnel take a tooth chart)
Is tooth chart attached ?
Wear glasses ?
Number of rifle :
Laundry marks :
Apparent nationality :

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.

/s/t/ John E. Noble, 2/24/45, 219

(Signature of officer or other person reporting burial)

WALTER H. STINE, 1/24/45, 219

(Verified by Army GRS)

THUMB

1

2

3

4

LEFT HAND

THUMB

1

2

3

4

RIGHT HAND