

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 unkl Leyte #1 X-91

SUBJECT

Also 293 unkl Misamis Occidental X-3755

Formerly 293 unkl Tacloban #1 X-56

OFFICE OF THE QUARTERMASTER GENERAL THE ARMY

INTRAOFFICE REFERENCE SHEET

Leyte #1 X-91

DUE, HOUR AND DATE _____

1 NO.	2 FROM—	3 TO—	4 DATE	5 MESSAGE
4	Rec Sec Id Br Repat Br Screening Mon Div Section	ATTN: Mr. Schreth	28 Sep 1950	<p>1. The following unknown files withdrawn from original 44 Inclosures to your IRS dated 20 Sept. 1950, are returned with our comment:</p> <p><u>Leyte #1</u></p> <p>✓X-91 Plot Map has been corrected to indicate X-91 in grave 2674, Leyte #1. #1 DD is correct.</p> <p>✓X-534 All records this office corrected to indicate X-534 Leyte #1 as shown on #1 DD.</p> <p>✓X-721 #1 DD and all records this office have been corrected to show grave location as 1178 Leyte #1.</p> <p><u>Manila Mausoleum</u></p> <p>✓X-187 Remains recovered from isolated location to Mausoleum. Valid X-no. is 187 Manila Mausoleum. Valid #1 DD dated 16 June 48. DD dated 23 May 49, was a duplicate.</p> <p>✓X-214A #1 DD and all records this office have been reverted to X-5147 Manila Mausoleum, which originally appeared on #1 DD.</p> <p>2. The remaining 16 files will be forwarded in groups as completed.</p> <p>5 Incls: 295 files</p> <p><i>Cms</i> ODENWALDER 73836</p> <p><i>Pres Graves</i> 539575</p> <p><i>File N/A Burnell 1 NOV 50 Scried</i></p>

2
00
X-91
Leyte
#1

bk

QMGMT 293
GRS Far East
SUBJECT: Unidentifiable Remains

1st Ind.

Department of the Army, OCMG, Washington 25, D. C. 27 April 1949

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

Subject cases have been reviewed and this Office approves the classification of the following Unknowns, now stored at AGRS Mausoleum, Manila, P.I., as unidentifiable:

X-3253	(formerly X- 16, Leyte #1, P.I.))
X-3314	(formerly X-193, Leyte #1, P.I.))
X-3350	(formerly X-229, Leyte #1, P.I.))
X-3721	(formerly X- 18, Leyte #1, P.I.))
X-3755	(formerly X- 91, Leyte #1, P.I.))
X-3757	(formerly X- 95, Leyte #1, P.I.))
X-3943	(formerly X-185, Finsch. #3, N. G.))

FOR THE QUARTERMASTER GENERAL:

7 Incls: w/d

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

B. Venezky:lrc
Salsar
JW
cc--Administrative Section

REB

NJS



100-10-60-60-500
100-10-60-60-500

GSGR 293.9

SUBJECT: Unidentifiable Remains

2 Apr 1949

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 AGES 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-3253	Unknown X-3755
" X-3314	" X-3757
" X-3350	" X-3943
X- X-3721	

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

FOR THE COMMANDING GENERAL:

7 Incls:
QMC Form 1044

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

/frv

/fms

Interred 10 Oct 1949
C 12 67 Ft. McKinley

DISINTERMENT DIRECTIVE

1

Carl R. Mark

CARL R. H. MARK
Cemetery Superintendent
SECTION A
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7740 00109
DATE
15 05 48
DAY MONTH YEAR

NAME SERIAL NUMBER RANK ARM DATE OF DEATH
29 UNKNOWN X-000091 *29* 0
DAY MONTH YEAR

CEMETERY USAF CEMETERY LEYTE NO 1 0
DISPOSITION OF REMAINS
7701 80
CODE DIST. PT.

PLOT ROW GRAVE COUNTRY CAUSE OF DEATH
2674 PHILIPPINE ISLANDS 6

SECTION B — CONSIGNEE AND NEXT OF KIN

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

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME Unk X-91 SERIAL NUMBER RANK DATE OF DEATH DATE DISTINTERRED
(Maus No) Unk X-3755 22 Sept. '48
IDENTIFICATION TAG ON ORGANIZATION RELIGION IDENTIFICATION VERIFIED BY
 REMAINS UNKNOWN ROBERT F. STEVENSON
 MARKER 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 1
(2) tags Maus. No. - Unk X-3755

REMAINS PREPARED AND PLACED IN CASKET
DATE 22 Sept. '48 BY ROBERT F. STEVENSON

CASKET SEALED BY ROBERT F. STEVENSON EMBALMER (Signature)
Robert F. Stevenson
ROBERT F. STEVENSON

CASKET BOXED AND MARKED SHIPPING ADDRESS VERIFIED BY
DATE 22 Sept '48 BY MORACE L. ALLISON, Sgt. INF. HONORIO V. AURELIO, 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.

Honorio V. Aurelio
HONORIO V. AURELIO, 1st Lt., INF. 073349
SIGNATURE OF GRS INSPECTOR

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

REMARKS: Unidentifiable - OQMG

Graves

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM AGRS Mausoleum		TO Fort McKinley Military Cemetery	
KIND OF CONVEYANCE Truck		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Caremark</i>	DATE 10 OCT 1949

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE (OR VEHICLE LICENSE NUMBER)		NAME OF CONVOYER	
SIGNATURE OF SHIPPER E. H. L. KIMBLEY	DATE OCT 10 1949	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

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

7. SHIPPED

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

Now stored ~~X-91~~ USAF Cem. Leyte #1, P. I.

2674

X-56 USAF Cem. Tacloban #1, Leyte, P. I.

463

Formerly X-56 USAF Cem. Tacloban #1, P. I.

463

X-91 USAF Cem. Leyte #1, P. I.

2674

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN Unknown X-3755 (Formerly Unk X-91 Leyte #1)				2. DATE OF REPORT 24 March 49	
3. NAME OF CEMETERY AGRS BATAVIA, MANILA, P. I.		4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT REINTERMENT
PHYSICAL DESCRIPTION					
8. ESTIMATED WEIGHT U T D	9. ESTIMATED HEIGHT U T D	10. COLOR OF HAIR U T D		11. RACE Unknown	
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS None					
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES None					
14. WAS BODY BURNED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		TO WHAT EXTENT? Bone structure shows/remains was burned			
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					

"UNIDENTIFIABLE"

REASON OF LACK OF SUFFICIENT IDENTIFYING DATA

Incl # 5

18.

TOOTH CHART

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

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

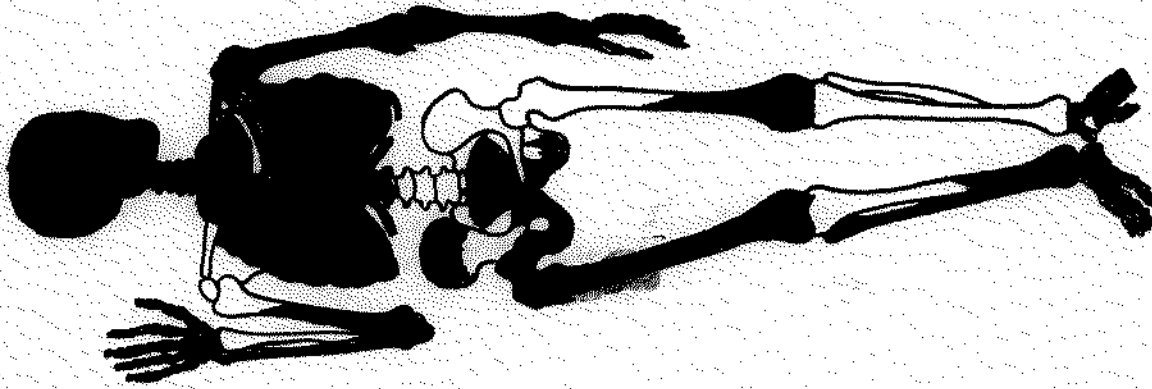
DENTURES (Plates): DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAINING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

No loose teeth present with remains.

"UNIDENTIFIABLE"

J. J. McDermott
 J. J. McDERMOTT
 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, identification tags or personal effects found with remains.

Estimated weight of remains - 2½ 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

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN X-3755 (Formerly UNK X-91, USAF Cem Leyte #1, P.I.)				2. DATE OF REPORT 12 Feb 48		
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.		4. PLOT 812	5. ROW W	6. GRAVE 5738	7. DATE OF DISINTERMENT 16 Dec 47 REINTERMENT STORAGE 14 Feb 48	
PHYSICAL DESCRIPTION						
8. ESTIMATED WEIGHT UTD		9. ESTIMATED HEIGHT UTD Most long bones fractured		10. COLOR OF HAIR UTD		11. RACE UTD
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS <p style="text-align: center;">N O N E</p>						
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES <p style="text-align: center;">U T D - Due to condition of remains.</p>						
14. WAS BODY BURNED ? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		TO WHAT EXTENT ? Bone structure shows that the remains was burned.				
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 <p style="text-align: center;">N O N E</p>						
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. <small>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!</small> <p style="text-align: center;">N O N E</p>						

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

	RIGHT								LEFT								
	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
	<i>Maxilla</i>								<i>Missing</i>								
SIDE VIEWS																	SIDE VIEWS
TOP VIEWS																	UPPER
																	LOWER
SIDE 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	

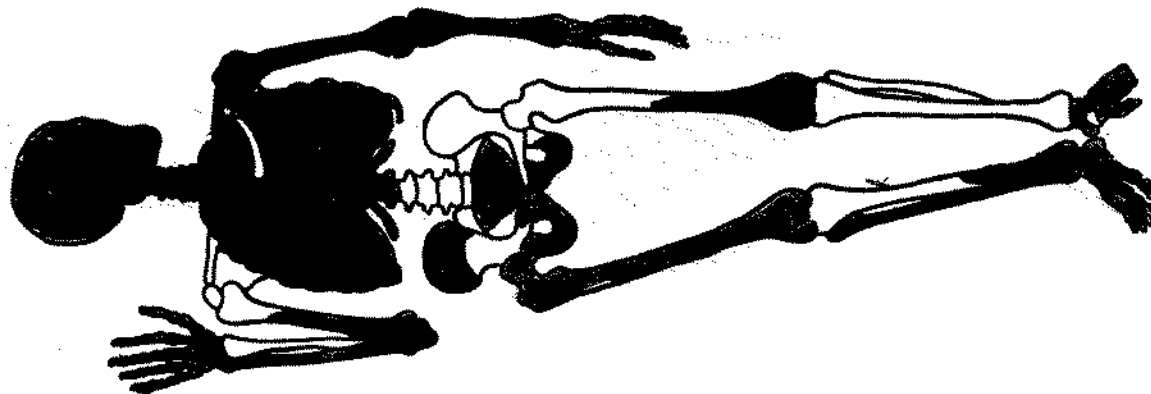
DENTURES (Plates): DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAINING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

REMARKS: Maxilla and mandible missing. No teeth found with remains.
CERTIFIED TRUE COPY:

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

/s/ John H. Bennett Jr

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 R.O.I. bottle or I. D. tags found with remains. No personal effects found. Nothing found to warrant identification. Bone structure shows that the remains was burned. Estimated weight of remains 2½ lbs.

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

CIF LAB MANILA, P.I.

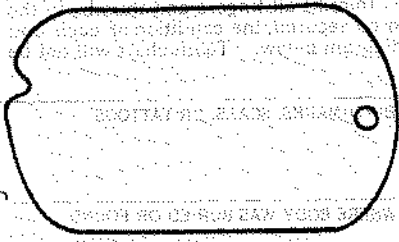


SIGNATURE

/s/ Robert F. Stevenson

RESTRICTED

JUN 22 1948

U3197 N

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 2 Mar 48		
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION:			SERIAL No.		
		NAME (Last, first, middle initial) UNKNOWN X-3755 (Formerly UNK X-91 USAF Cem Leyte #1, P.I.)			Unknown		
		GRADE Unknown		ORGANIZATION USS Ross DD 563		BRANCH OF SERVICE Navy	
		RACE Unknown		RELIGION Unknown		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	
PLACE OF DEATH Aboard USS Ross, DD 563, Leyte Gulf, P.I.		CAUSE OF DEATH KIA-Blast concussion			DATE OF DEATH 19 Oct 44		
EMERGENCY ADDRESSEE (Name, relationship, and address) Unknown							
IDENTIFICATION TAGS FOUND ON BODY (2, 3, or none) None		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)					
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) Yes (2)							
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME None							
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.							
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY AGRS MAUSOLEUM, MANILA, P. I.							
DATE OF BURIAL STORAGE 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. 5738	
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. 2674	
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) STORED UNKNOWN X-3757			RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 5739	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED UNKNOWN X-3754			RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 5737	
SIGNATURE OF PERSON PREPARING REPORT  V. C. AQUINO T/5 OMC			SIGNATURE OF GRS OFFICER VERIFYING REPORT  CALVIN F. FINN, Maj., FA				
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

2nd 341

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

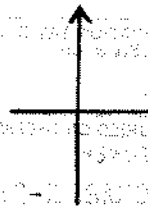
WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND

OTHER IDENTIFICATION CLUES

Unidentified American Sailor

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

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



REMARKS:

QMC Form 1044, 1044A and 1044B accomplished.

19 MAY 1948

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

HHB RESTRICTED

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

12 W 94 N 910

USS Ross DD 563

UNIDENTIFIED AMERICAN SAILOR X-91

(Last name)	(First)	(Initial)	(Serial number)	(Rank)	(Organization)
Aboard USS Ross, DD 563, Leyte Gulf, 19 Oct 1944 KIA-Blast concussion					
(Place of death)	(Date of death)			(Cause of death)	
1100 hrs 17 July 1945	P. I.			USAF Cemetery Leyte # 1, P. I.	
(Time and date of burial)	(Name of Cemetery)			(Name of coordinates of location)	

2674

Reg 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
DISINTERRED from Grave 463, USAF Cemetery Tacloban # 1, Leyte, P. I.

Metal tag buried with remains and attached to Marker. (UNIDENTIFIED AMERICAN SAILOR X-56)

(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	MARMON, James Alvin	316 56 87	MM1c	USN	USS Ross	2675
	(Name)	(Serial number)	(Rank)	(Organization)	(Grave number)	
Body buried on LEFT	DEXTER, Loren R.	36 402 402	Pvt	Hq Co	Base K	2673
	(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: NONE 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:	Apparent Nationality:
Weight:	Laundry marks:
Colour of eyes:	Number of rifle:
Colour of hair:	Wear glasses?
Race:	Is Tooth chart attached? No

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

Tooth chart impossible to take because on disinterment
In space below, locate and describe any scars, birthmarks, moles, deformities, etc.: **remains had no head.**

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. Sobis
S/Sgt John E. Bobis, GRS

(Signature of officer or other person reporting burial)

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

(Verified by Army, GRS Officer)

LEFT HAND

4

3

2

1

THUMB

12

RIGHT HAND

4

3

2

1

THUMB

CONNECTED

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

CONFIDENTIAL

10 Mar 45
read
N 910
21

UNIDENTIFIED AMERICAN SAILOR X-56

USS ROSS DD 563

Aboard USS Ross DD 563, ^(Last name) ^(First) ^(Initial) ^(Serial number) ^(Rank) ^(Organization)
 Leyte Gulf, 19 Oct 1944, KIA Blast Concussion
^(Place of death) ^(Date of death) ^(Cause of death)
 1030 hrs: 27 Nov 1944, USAF Cemetery, Tacloban # 1, Leyte, P. I.
^(Time and date of burial) ^(Name of cemetery) ^(Name or co-ordinates of location)

463

Cross 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

Corrected Report of Interment buried (In Bottle)

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

This corrects previous Report made "UNIDENTIFIED AMERICAN SAILOR X-57"

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

Body buried on RIGHT	DEXTER, Loren R.	36 402 402	Pvt	Hq Co., Base K	464
	(Name)	(Serial number)	(Rank)	(Organization)	(Grave number)
Body buried on LEFT	MARMON, James A.		MM1/c	DD 563	462
	(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: NONE

#606

4
3
2
1
THUMB

LEFT HAND

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 :	Apparent nationality :
Weight :	Laundry marks :
Color of eyes :	Number of rifle :
Color of hair :	Wear glasses ?
Race :	Is tooth chart attached ?

(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.

Henry P. Morrison
 T/Sgt Henry P. Morrison GRS

(Signature of officer or other person reporting burial)

Roy F. Sulzbacher
 ROY F. SULZBACHER, 1st Lt. OMC

(Verified by Army GRS Officer)

4
3
2
1
THUMB

RIGHT HAND

RECEIVED
 17 6 FEB 1945

CONFIDENTIAL

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

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

18N 27 1943

N 910

USS Ross
DD 563

UNIDENTIFIED AMERICAN SAILOR **X-56**

Aboard **USS Ross DD 563** (Initial) (Serial number) (Rank) (Organization)
Leyte Gulf, Leyte, P.I. **19 Oct. 1944** **KIA** **Blast Concussion**
 (Place of death) (Date of death) (Cause of death)
1030 hrs 27 Nov. 1944 **USAF CEMETERY, TAGLOBAN #1, T. GLOBAN, LEYTE, P.I.**
 (Time and date of burial) (Name of cemetery) (Name or co-ordinates of location)

463

Cross, 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

Report of Interment buried (in bottle) with body.

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

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

Body buried on RIGHT DEXTER, Loren R. (Name)	36 402 402 (Serial number)	Pvt. (Rank)	Hq. Co Base K USS Ross (Organization)	464 (Grave number)
Body buried on LEFT MARMON, James A. (Name)	MM1/c (Serial number)	MM1/c (Rank)	DD 563 (Organization)	462 (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: **None.**

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 :	Apparent nationality :
Weight :	Laundry marks :
Color of eyes :	Number of rifle :
Color of hair :	Wear glasses ?
Race :	Is tooth chart attached ?

(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. :

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T/Sgt. Henry P. Morrison GRS

(Signature of officer or other person reporting burial)

ROY E. SULZBACHER 1st Lt. OMC

(Certified by Army G.I. Officer)

LEFT HAND

4
3
2
1
THUMB

RIGHT HAND

4
3
2
1
THUMB