

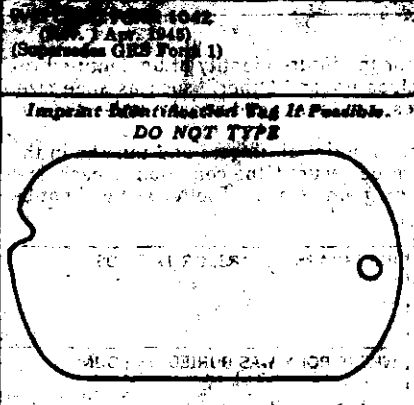
MAY 2 1948

RESTRICTED

U 2290

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

DATE OF REPORT
27 Jan 48



Section 1.—IDENTIFICATION

NAME (Last, first, middle initial) UNKNOWN X-3499-D (Formerly UNK X-1423, USAF Cemetery Manila #2, Luzon, 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
Cabanatuan POW Camps I & II, Luzon, P.I.

CAUSE OF DEATH Unknown	DATE OF DEATH Unknown
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EMERGENCY ADDRESSEE (Name, relationship, and address)
Unknown

IDENTIFICATION TAGS FOUND ON BODY (If 2, or none) None	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If established, fill in Section 2 on reverse) CANCEL—Assigned CIL # 25 per Mr Philcom 17 June 49, Subj: Assignment of CIL Numbers.
WERE SUBSTITUTE TAGS PROVIDED (If or no) Yes (2)	See Remarks

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 20 Jan 48	HOUR 0800	BURIED IN (Shroud, blanket, or name of casket) Casket	TYPE OF GRAVE MARKER None	PLOT NO. 813	ROW No. V	GRAVE No. CRYPT 5662
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WAS THIS A REBURIAL? (Yes or no) RESTORED Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery Manila #2, Luzon, P.I.	PLOT No. 3	ROW No. 2	GRAVE No. 193
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TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY.
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IDENTIFICATION TAG BURIED WITH BODY (Yes or no) STORED Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes
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BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORED UNKNOWN X-3500	RANK	SERIAL NO.	ORGANIZATION	GRAVE No. CRYPT 5663
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BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED UNKNOWN X-3499-C	RANK	SERIAL NO.	ORGANIZATION	GRAVE No. CRYPT 5661
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SIGNATURE OF PERSON PREPARING REPORT V O AQUINO T/5 QMC	SIGNATURE OF GRS OFFICER VERIFYING REPORT ORVIN P. FERN, Maj., USAF
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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 Office. Copies for retention in theater as directed by theater commander.

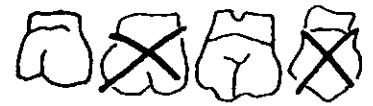
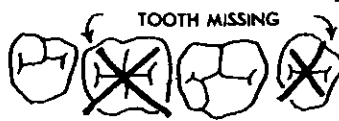
Incl 819

RESTRICTED

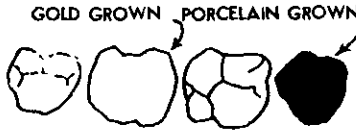
IDENTIFICATION DATA

1. REMAINS OF UNKNOWN X-3499-D (Formerly UNK X-1423, USAF Cem Manila #2, Luzon, P.I.)						2. DATE OF REPORT 19 Jan 48		
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.				4. PLOT 813	5. ROW V	6. GRAVE 5662	7. DATE OF DISINTERMENT 8 Dec 47	REINTERMENT 20 Jan 48
PHYSICAL DESCRIPTION								
8. ESTIMATED WEIGHT UTD		9. ESTIMATED HEIGHT UTD		10. COLOR OF HAIR UTD		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 UTD - Skeletal chart and Dental chart attached.								
14. WAS BODY BURNED ? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		TO WHAT EXTENT ?						
15. WAS BODY MANGLED ? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		TO WHAT EXTENT ?						
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:



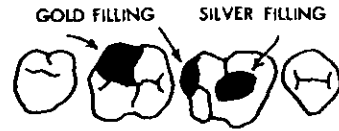
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD PORCELAIN SILVER OR GOLD AND PORCELAIN), THUS:



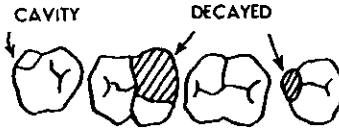
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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:



RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
MAXILLA								MANDIBLE							
SIDE VIEWS								SIDE VIEWS							
TOP VIEWS								TOP VIEWS							
SIDE VIEWS								SIDE VIEWS							
MANDIBLE								MAXILLA							
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."

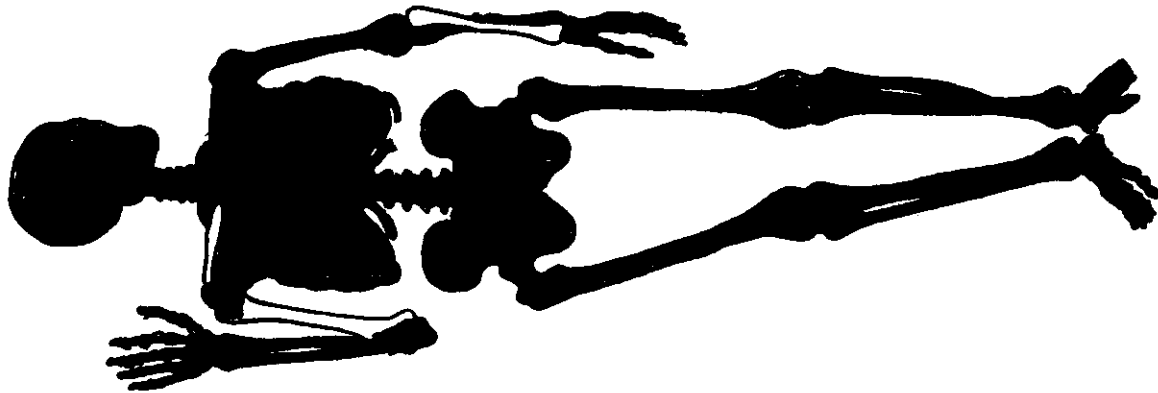
REMARKS: Maxilla and mandible missing. No loose teeth were found.

CERTIFIED TRUE COPY:

G. T. Gamboa

G T GAMBOA
2d Lt MSC

/s/ John J. Connors



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

While processing former X-1423, USAF Cem Manila #2, Luzon, P.I. extra bones were found and segregated into Unk X-3499-A, X-3499-B, X-3499-C and X-3499-D. Upon processing X-3499-D no ROI bottle, I. D. tags, personal effects, or other means of identification received with remains. Estimated weight $\frac{1}{2}$ lb. No skull nor teeth found. Unable to determine the physical height due to the absence of major bones.

This X-3499-D, AGRS, Mausoleum, Manila, P.I., possibly one of 10 names mentioned in previous R.O.I.

This remains is one of group disinterred from Grave 901, Row O, Plot 9 of Cabanatuan POW Cemetery Luzon, P.I.

RADIUS - 26.4 CM (Refer to UNK X-3499-A, X-3499-B and X-3499-C).

A 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/ CLEMENT G. SWAN, Embalmer Sr Ung
C-064862, CIP LABORATORY, MANILA, P.I.

SIGNATURE

/s/ Clement G. Swan

HEADQUARTERS
CENTRAL IDENTIFICATION POINT
AMERICAN GRAVES REGISTRATION SERVICE - FAR EASTERN ZONE

/nsr

APO 707
13 March 1948

The following cases are those disinterred from a common grave at Cabanatuan Prison Camp - Grave #901, Row O, Plot #9. The unknown numbers are AGRS Mausoleum numbers:

UNKNOWN X-3494
" X-3495
" X-3496
" X-3497
" X-3498
" X-3499 - A, B, C, D.
" X-3500

KENNY, Bernard J.
FALARDEAU, Robert C.
NELEMONT, John

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN X-3499-D (Formerly UNK X-1423, USAF Cem Manila #2, Luzon; P.I.)				2. DATE OF REPORT 19 Jan 48	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	813	V	5662	DISINTERMENT	REINTERMENT STORAGE 8 Dec 47 20 Jan 48

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT UTD	10. COLOR OF HAIR UTD	11. RACE Unknown
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

N O N E

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

U T D - Skeletal chart and Dental chart attached.

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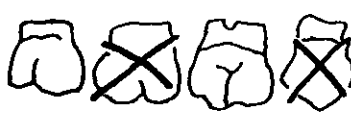
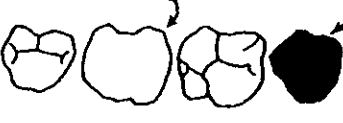

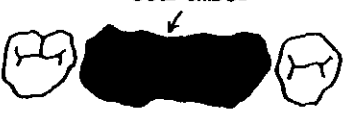





15. WAS BODY MANGLED ? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT ?
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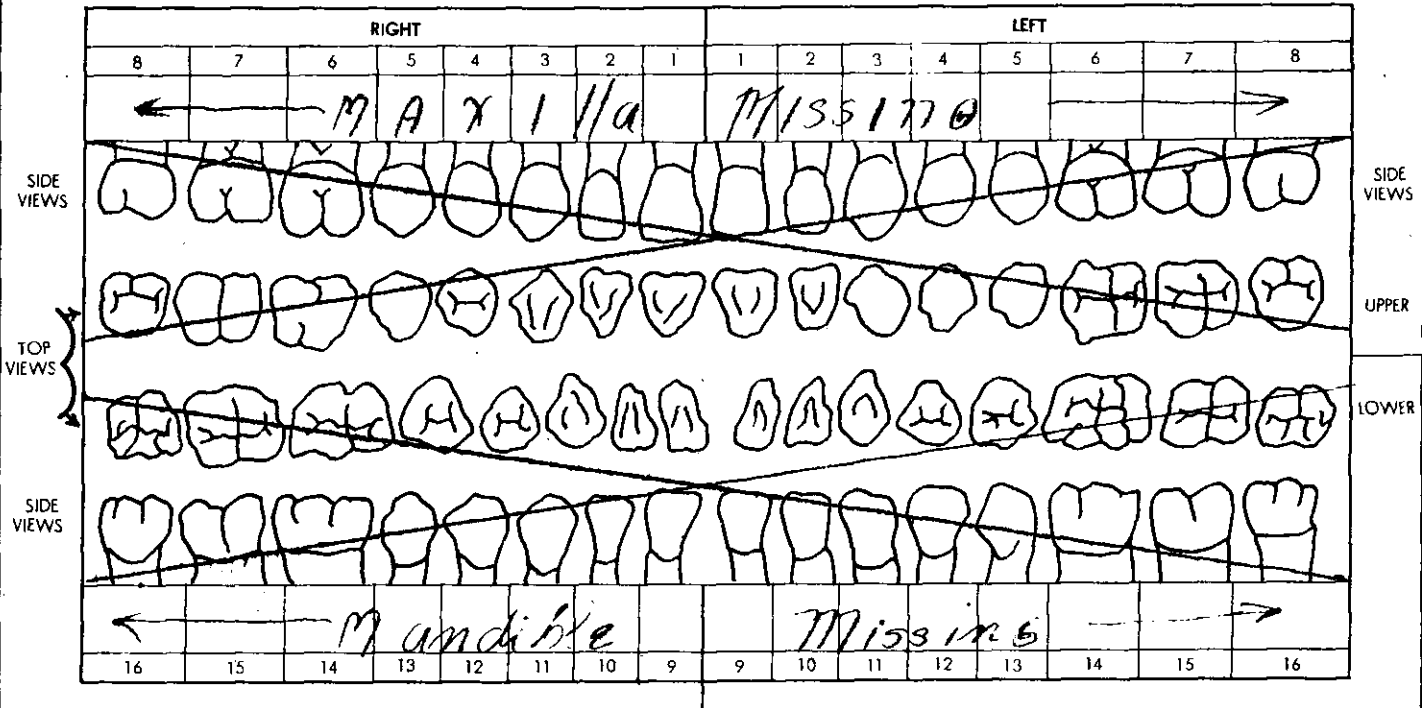
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N O N E

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

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<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>TOP VIEW</p> <p>TOOTH MISSING</p> 	<p>SIDE VIEW</p> 
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<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> 	



VENTURE (Denture): 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 loose teeth were found.

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G. A. Garrow
 G T GAMBCA
 2d Lt MSC

/s/ John J. Connors



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RECEIVED
CENTRAL IDENTIFICATION POINT
MAR 15 1948