

FILE IDENTIFICATION TOPPER

FILE NUMBER

7/10/45 *7/10/45* *a #2* *X-537*

SUBJECT

7/10/45 *7/10/45* *a #1* *X 4368*

/bpm

Interred 21 Feb 1950
N 7 93 Ft. McKinley

PREPARED BY PHILCOM
DISINTERMENT DIRECTIVE

1

Carl R. H. Mark

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

DIRECTIVE NUMBER
7747 80663
DATE
09 02 50
DAY MONTH YEAR

NAME: **UNKNOWN X - 537**
SERIAL NUMBER: [] GRADE: [] ARM: [] RACE: [] RELIGION: []

CEMETERY: **USAF CEMETERY MANILA NO. 2, P. I.**
PLOT: **2** ROW: **17** GRAVE: **2088**
DISPOSITION OF REMAINS
CODE: **7701** DIST. CTR.: **80**

SECTION B — CONSIGNEE AND NEXT OF KIN

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

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME: **UNKNOWN X-537** SERIAL NUMBER: [] GRADE: [] DATE OF DEATH: [] DATE DISTINTERRED: **18 Feb 50**
IDENTIFICATION TAG ON: REMAINS MARKER ORGANIZATION: [] RELIGION: [] IDENTIFICATION VERIFIED BY: **PAUL R NICHOLS
Embalmer** NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: **Shelter Half** CONDITION OF REMAINS: **Skeletal**
OTHER MEANS OF IDENTIFICATION: **X-4368 Maus**

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

REMAINS PREPARED AND PLACED IN CASKET
DATE: **18 Feb 50** BY: **PAUL R NICHOLS**

CASKET SEALED BY: **PAUL R NICHOLS** EMBALMER'S SIGNATURE: *Paul R. Nichols*
PAUL R NICHOLS

CASKET BOXED AND MARKED: **RAYMOND H TANGUAY** SHIPPING ADDRESS VERIFIED BY: **L. W. RICHARDSON, M/Sgt., RA**
DATE: **18 Feb 50** SGT lc, RA

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

L. W. Richardson
L. W. RICHARDSON, M/Sgt., RA

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

FILE
REPATRIATION
BRANCH
MEMPHIS
James

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM

AGRS MAUSOLEUM

TO

US MILITARY CEMETERY

KIND OF CONVEYANCE

TRUCK

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

DATE

FEB 21 1950

W. A. Smith

2. SHIPPED

FROM

KIND OF CONVEYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

DATE

3. SHIPPED

FROM

KIND OF CONVEYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

DATE

4. SHIPPED

FROM

KIND OF CONVEYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

DATE

5. SHIPPED

FROM

KIND OF CONVEYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

DATE

6. SHIPPED

FROM

KIND OF CONVEYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

DATE

7. SHIPPED

FROM

KIND OF CONVEYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

DATE

HEADQUARTERS
FILCOM ZONE
AMERICAN GRAVES REGISTRATION SERVICE

13 January 1950


Date

SUBJECT: Unidentifiable Remains

TO : The Quartermaster
Washington 25, D. C.
Attn: Memorial Division

The records pertaining to Unknown X- 537, Plot 2,
Row 17, Grave 2088, USMC Manila #2, Luzon, P.I., have
been reviewed and it is the opinion of this office that insuf-
ficient evidence is available to establish the identity of this
deceased, and that these remains should be classified as un-
identifiable.

FOR THE COMMANDING OFFICER:


W. B. McNEELAR
Captain, QMC
Chief, Records Branch

Atch: Form 1044

Received 26 Jan. 50 OQMA
Not identifiable from
information presently
available 7 Feb. 50
A. C. Boylor

3

DISINTERMENT DIRECTIVE

DEPARTED BY MAIL COM

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

7747 80663

09 02 50
DAY MONTH YEAR

NAME: UNKNOWN I - 597 SERIAL NUMBER: GRADE: ARM: RACE: RELIGION:

CEMETERY: USAF CEMETERY MANILA NO. 2, P. I. PLOT: 2 ROW: 17 GRAVE: 2088 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. M. 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: CASKET SEALED 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

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM

TO

KIND OF CONVEYANCE

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

DATE

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

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

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

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNK X-4368 (Formerly UNK X-537 (GRUI, George) USAF Cem Manila #2, Luzon, P.I.				2. DATE OF REPORT 12 January 1950	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	813	D	1216	DISINTERMENT 17 Dec 47	REINTERMENT 17 May 48

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT U T D	9. ESTIMATED HEIGHT 5'3"	10. COLOR OF HAIR U T D	11. RACE U T D
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

One (1) Identification Tag of MILLER, David (Recovered)

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

U T D

14. WAS BODY BURNED? TO WHAT EXTENT?

YES NO

15. WAS BODY MANGLED? TO WHAT EXTENT?

YES NO

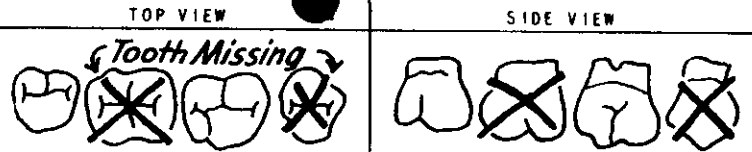
16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

N O N E

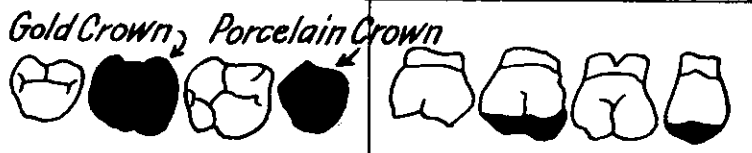
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

N O N E

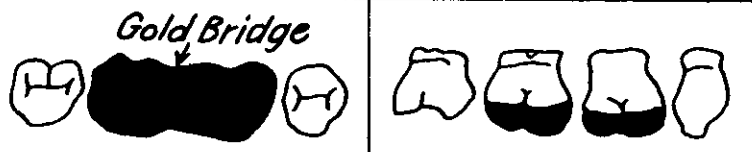
MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X"ED OUT AND LABELED THUS:



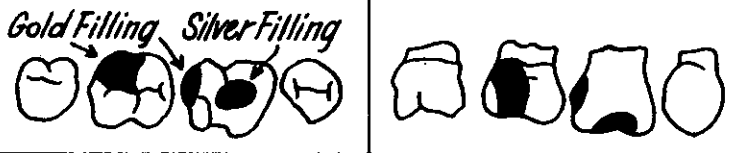
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:



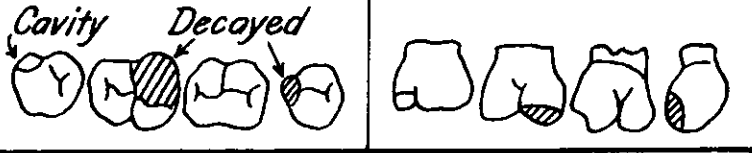
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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	
	A 0	X	A	A			P	P		d	X	s A	A			
	o 0		m	mod								m	od			
Side Views	[Side view drawings of teeth 1-8 on both sides]															Side Views
Top Views	[Top view drawings of teeth 1-8 on both sides]															
	[Lower top view drawings of teeth 1-8 on both sides]															
Side Views	[Side view drawings of teeth 1-8 on both sides]															Side Views
		X					P						X	A		
														o		
	16	15	14	13	12	11	10	9	10	11	12	13	14	15	16	

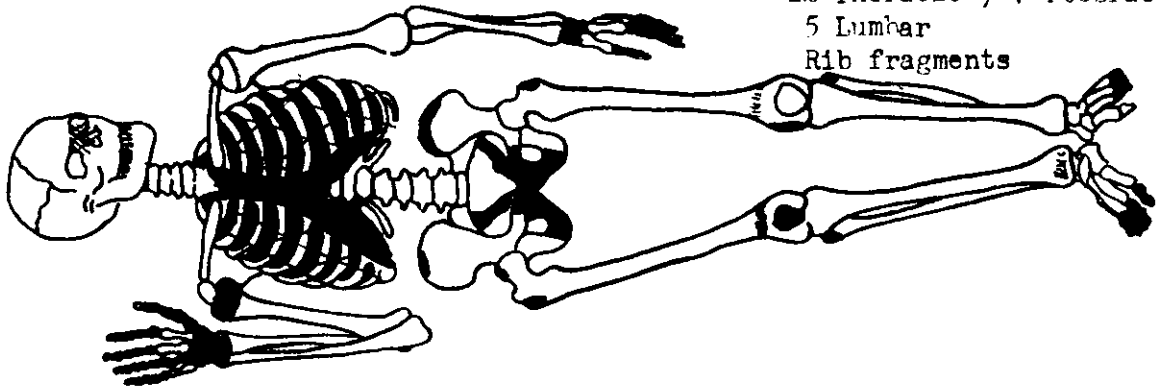
DENTURES (Plates): DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAINING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

REMARKS: Portion of the maxilla from L6 - L8 is missing. L6 is loose found with remains.

Paul R. Nichols
 PAUL R. NICHOLS
 Chf, Identification Sec

19. BLACK OUT PARTS OF BODY NOT RECOVERED

Recovered:
7 Cervical)
12 Thoracic) Vertebrae
5 Lumbar
Rib fragments



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

Estimated weight of remains 5 lbs.
No ROI bottle or personal effects found.

I CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS OF DECEASED AND THAT ALL RESULTING INFORMATION HAS BEEN
RECORDED TO THE BEST OF MY KNOWLEDGE

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

PAUL R. NICHOLS
Chf, Identification Section

SIGNATURE

Paul R. Nichols

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-4368 (Formerly UNK X-537 Manila #2)				2. DATE OF REPORT 22 Oct 1949	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.		4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT REINTERMENT
PHYSICAL DESCRIPTION AGE: 27 -33					
8. ESTIMATED WEIGHT U T D	9. ESTIMATED HEIGHT 5'2 1/8"	10. COLOR OF HAIR U T D		11. RACE WHITE	
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS One (1) found identification tag with the name and serial no.: David L. Miller 11018888 or 33 last two nos.					
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES N o n e					
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 Pronounced bony growth on anterior surface of right tibia, mid-way between the extremities, appears to be an old fracture or bone injury; most likely a bone injury.					
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area) N o n e					

Incl #4

18.

TOOTH CHART

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



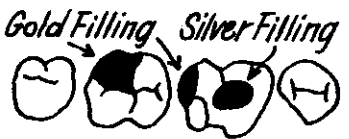
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:



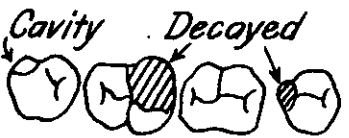
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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:



Maxilla

RIGHT													LEFT				Missing	
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8			
	a	X		a			⊕	⊕			X		n	a				
	o			mod									od	no				
Side Views	[Side view drawings of teeth]														Side Views			
Top Views	[Top view drawings of teeth]														UPPER			
	[Top view drawings of teeth]														LOWER			
Side Views	[Side view drawings of teeth]														Side Views			
		X					⊕						X	a				
														o				
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."

16 is loose present with remains.

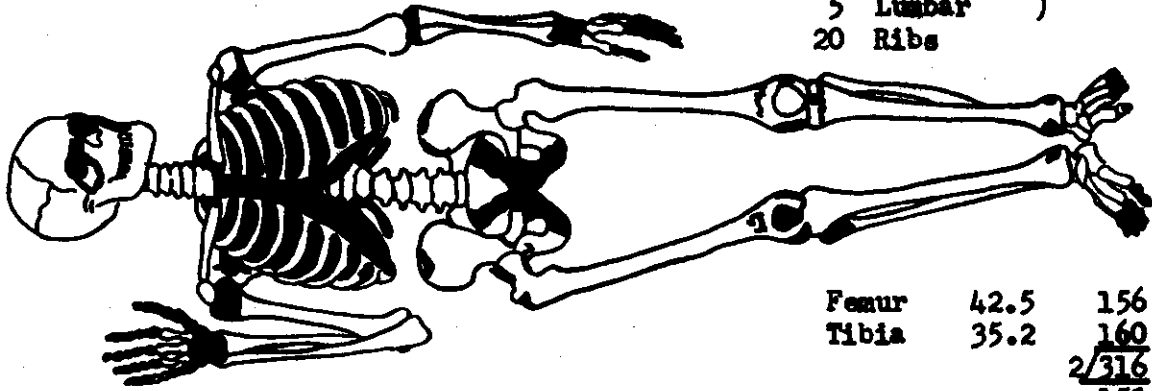
Paul R. Nichols

PAUL R NICHOLS
Chief, Identification Section

19. BLACK OUT PARTS OF BODY NOT RECOVERED

X-4368

Present)
12 Cervical)
12 Thoracic)
5 Lumbar)
20 Ribs)
	Vertebrae



Femur	42.5	156
Tibia	35.2	160
		<u>2/316</u>
		158

Estimate height: 5'2 1/8"

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

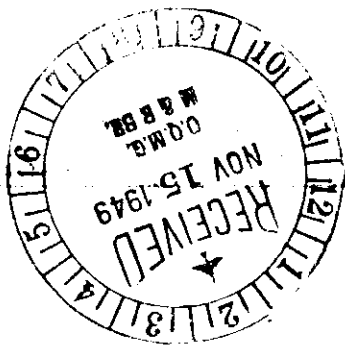
This is the remains of a male individual, of white ancestry, short (est. 5'2 1/8") and muscular, and in the late twenty's or early thirty's (est. 27 - 33 years). Bony growth on posterior surface of right tibia, mid-way between the extremities, appears to be an old bone injury.

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

ROBERT B FOX, Anthropologist

SIGNATURE



Faint, mostly illegible text, possibly bleed-through from the reverse side of the page. Some words like 'received' and 'NOV 15 1949' are faintly visible.

Faint text at the bottom of the page, possibly a signature or a name.

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNK X-4368 (Formerly UNK X-537 (GRUI, George) USAF Cem Manila #2, Luzon, P. I.)				2. DATE OF REPORT 13 May '48	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P. I.		4. PLOT 813	5. ROW D	6. GRAVE 1216	7. DATE OF DISINTERMENT 17 Dec '47
				REINTERMENT 17 May '48	

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT U T D	9. ESTIMATED HEIGHT 5'3"	10. COLOR OF HAIR U T D	11. RACE U T D
------------------------------	-----------------------------	----------------------------	-------------------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

Two (2) Cem Tags: UNKNOWN X-537 C - 134 Plot-2	One (1) Embossed Tag: UNKNOWN X-537 - GRUI, George 37026117 194 Tank - 24 Dec '42 2088-17-2 Pvt
---	--

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

U T D - Skeletal chart and tooth chart attached.

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

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

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

N O N E

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

N O N E

TOOTH CHART

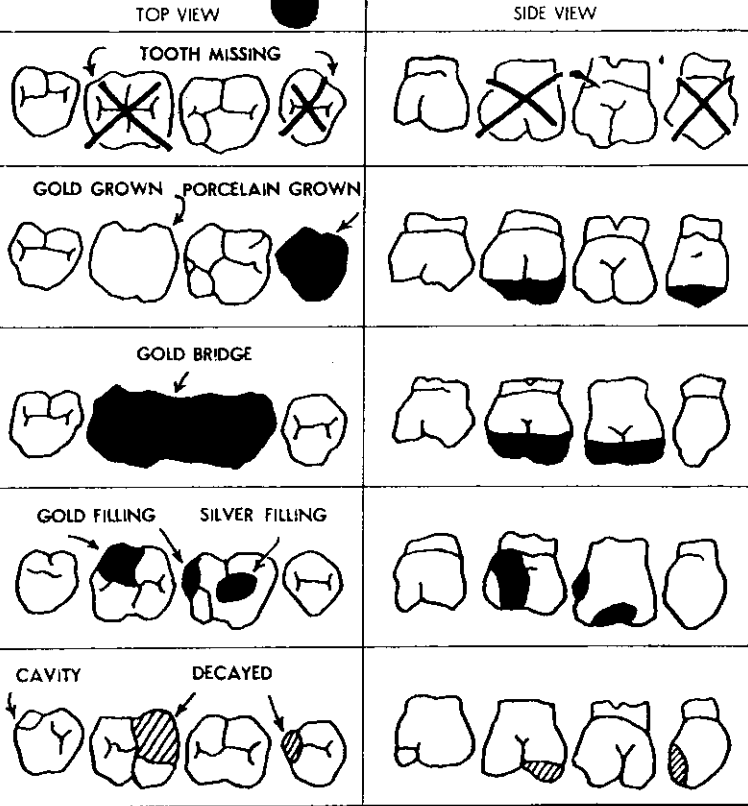
MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED THUS:

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
	A	X	A	A		P	P	P				S	A	A	Missing
	O		m	m								m	do	DO	
SIDE VIEWS															
TOP VIEWS															
SIDE VIEWS															
								P					X	A	
														O	
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	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."

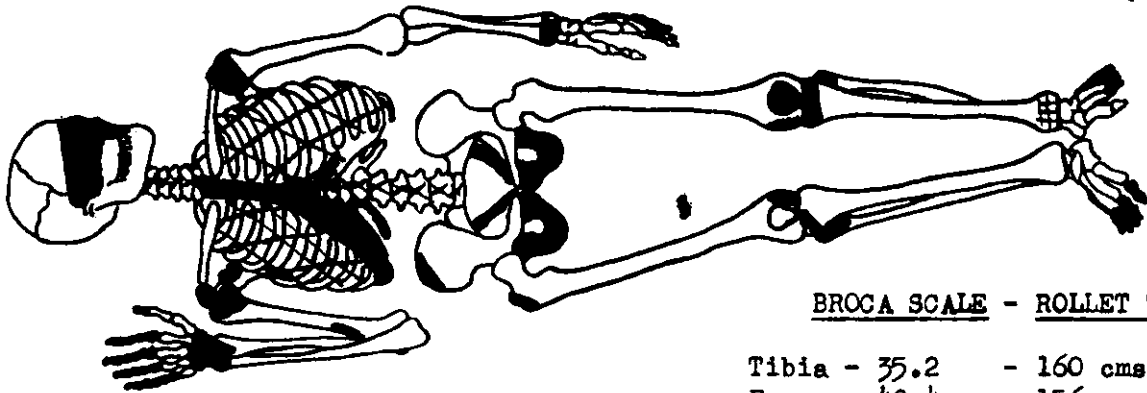
REMARKS: Portion of maxilla missing from L7 thru L8. No maxillary teeth found on this portion.

CERTIFIED TRUE COPY:

[Signature]
 D. S. PANOPLO
 1st Lt. INF

/s/ Edward F. Moriarty

*Rib Fragments
Vertebrate Fragments*



BROCA SCALE - ROLLET TABLE

Tibia - 35.2	- 160 cms.
Femur - 42.4	- 156 cms.
	<u>316 cms.</u>

Estimated height 158 cms. or 5' 3"

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

This remains is one of the group disinterred from Grave 809, Row O, Plot 8, POW In Cabanatuan, Luzon, P.I.
In processing this remains no ROI burial bottle, original I.D. tags, equipment, clothing, nor personal effects found. Skull is 21½ inches in circumference.
Estimated weight of remains 8 lbs.
Two (2) Cemetery tags and one (1) embossed tag found, described in section 12, placed with remains.

CERTIFIED TRUE COPY:

L. S. Panopio
L. S. PANOPIO
1st Lt., INF.

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/ EDWARD F. MORIARTY, Emb. Sup.
CIP Laboratory, Manila, P.I.

SIGNATURE

/s/ Edward F. Moriarty

REPORT OF DISINTERMENT FOR IDENTIFICATION

17 Dec 47

1. Remains of (Name)

Serial Number

UNKNOWN X-537

Grade

Organization

Name, Number and Location of Cemetery

Plot

Row

Grave No.

USAF Cem Manila #2, Luzon, PI

2

17

2088

2. Date of Disinterment

17 Dec 47

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

Skeletal remains

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

One (1) substitute tag

On Remains

One (1) substitute tag

What Identification Used Upon Reinterment: On Marker



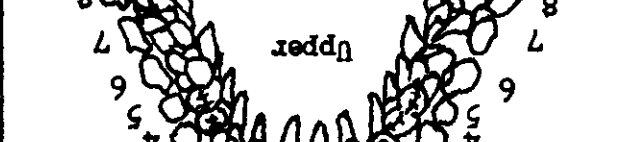

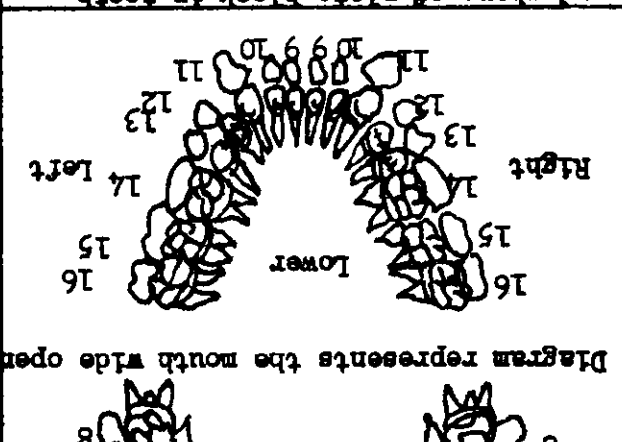
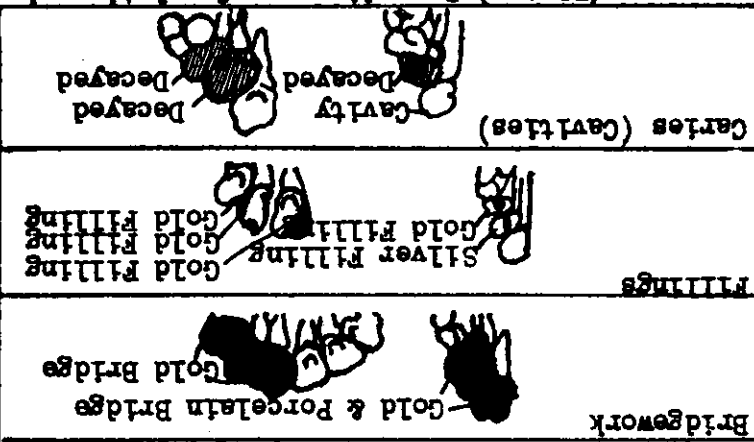
On Remains

5. Signature of Officer Supervising Disinterment and Reinterment.

Ward C. Stephenson
WARD C. STEPHENSON, 1st Lt., OMC

INSTRUCTIONS FOR PROPER MARKINGS ON DENTAL CHART

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

<p>Missing Teeth</p> 	<p>Crowned Teeth</p> 
<p>Bridgework</p> 	<p>Fillings</p> 
<p>Dentures (Plates)</p> 	<p>Caries (Cavities)</p> 

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

HEADQUARTERS 3
GENERAL HEADQUARTERS 10101
AMERICAN GRAVES REGISTRATION SERVICE - FAR EASTERN ZONE

AFO 707
8 June 1948

The following cases are those disinterred from a common grave at Cabanatuan Prison Camp - Grave #809, Row C, Plot #3. The unknown numbers are AGRS Mausoleum numbers:

UNKNOWN X-4365
" X-4366
" X-4367
" X-4368

NEWMAN, Robert J.
SCANLON, Raymond G.
HOYT, Francis E.
SHIELDS, John S.
WOLFE, Joseph W.
WEBER, Charles J.

REPAIRS
RECORDS BRANCH

AUG 2 12 43 PM '48

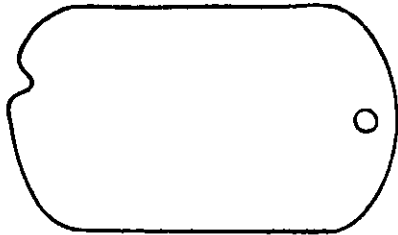
MEMORIAL DIVISION

/ztl


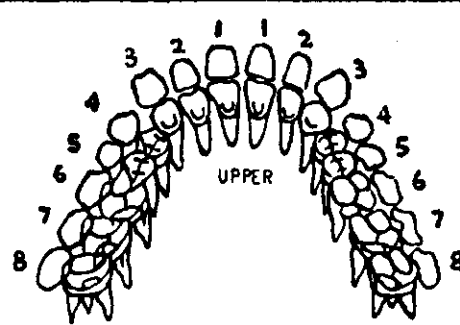
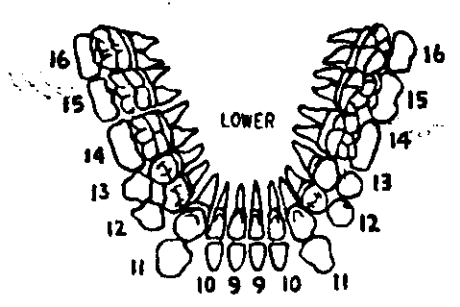





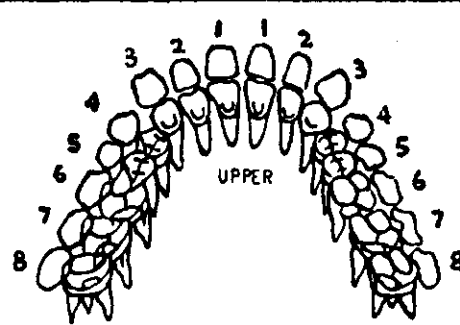
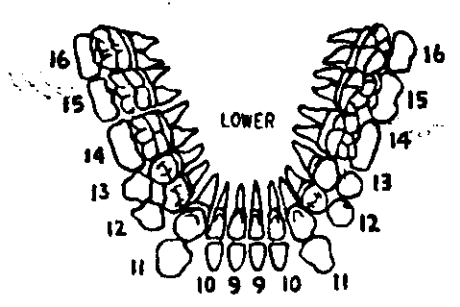





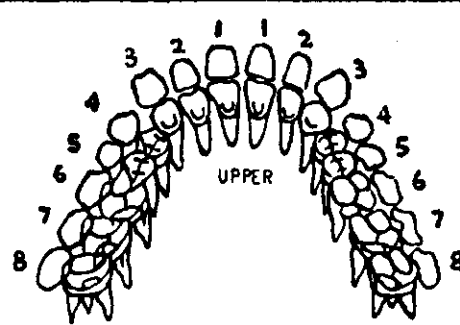
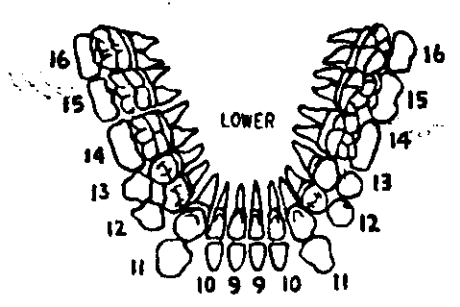




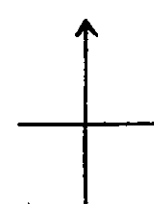
AUG 6 1948

RESTRICTED

U-1366

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 4 June '48	
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.				
NAME (Last, first, middle initial) UNK X-4368 (Formerly UNK X-537 USAF Cem 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 POW Camp, Cabanatuan, Luzon, P. I.		CAUSE OF DEATH Unknown			DATE OF DEATH 24 Dec '42	
EMERGENCY ADDRESSEE (Name, relationship, and address) Unknown						
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)				
WERE SUBSTITUTE TAGS PROVIDED?(Yes 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 17 May '48	HOUR 0930	BURIED IN (Shroud, blanket, or name of other) STORAGE Casket	TYPE OF GRAVE MARKER None	PLOT No. HANGER 813	ROW No. WAY D	GRAVE No. CRYPT 1216
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. 2	ROW No. 17	GRAVE No. 2088
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) STORAGE Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes					
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORAGE STARR, William	RANK Pvt	SERIAL No. 39567119	ORGANIZATION Co G, 129th Inf Regt	GRAVE No. CRYPT 1218		
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORAGE BOULIS, Angelos	RANK T/5	SERIAL No. 32992985	ORGANIZATION Hq Co, 8th Army	GRAVE No. CRYPT 1214		
SIGNATURE OF PERSON PREPARING REPORT W. C. AQUINO, T/5, OMC.			SIGNATURE OF GRS OFFICER VERIFYING REPORT L. S. PANOPPIO, 1st Lt., INF.			
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.						

RESTRICTED

LEFT LITTLE FINGER	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.																
LEFT RING FINGER	HEIGHT	WEIGHT	COLOR OF EYES														
			COLOR OF HAIR														
			BIRTHMARKS, SCARS, OR TATTOOS														
LEFT MIDDLE FINGER	WEAPON AND SERIAL NO.		LAUNDRY MARKS														
			WHERE BODY WAS BURIED OR FOUND														
	OTHER IDENTIFICATION CLUES																
LEFT INDEX FINGER	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">FILLINGS</td> <td style="width:30%;">  SILVER FILLING GOLD FILLING </td> <td rowspan="6" style="width:40%; text-align: center; vertical-align: middle;">  UPPER DIAGRAM REPRESENTS THE MOUTH WIDE OPEN  LOWER </td> </tr> <tr> <td>CAVITIES</td> <td>  CAVITY DECAYED </td> </tr> <tr> <td>MISSING TEETH</td> <td>  TOOTH MISSING </td> </tr> <tr> <td>CROWNED TEETH</td> <td>  PORCELAIN CROWN GOLD CROWN </td> </tr> <tr> <td>BRIDGE WORK</td> <td>  GOLD BRIDGE </td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>			FILLINGS	 SILVER FILLING GOLD FILLING	 UPPER DIAGRAM REPRESENTS THE MOUTH WIDE OPEN  LOWER	CAVITIES	 CAVITY DECAYED	MISSING TEETH	 TOOTH MISSING	CROWNED TEETH	 PORCELAIN CROWN GOLD CROWN	BRIDGE WORK	 GOLD BRIDGE			
FILLINGS				 SILVER FILLING GOLD FILLING	 UPPER DIAGRAM REPRESENTS THE MOUTH WIDE OPEN  LOWER												
CAVITIES				 CAVITY DECAYED													
MISSING TEETH				 TOOTH MISSING													
CROWNED TEETH				 PORCELAIN CROWN GOLD CROWN													
BRIDGE WORK				 GOLD BRIDGE													
LEFT THUMB																	
RIGHT THUMB																	
RIGHT INDEX FINGER																	
RIGHT MIDDLE FINGER																	
RIGHT RING FINGER																	
RIGHT LITTLE FINGER																	
29 JUN 1949	FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY <div style="text-align: center; margin-top: 20px;">  </div>																
	REMARKS: UNKNOWN X-4368, AGRS Mausoleum, Manila, P. I., formerly UNK X-537 USAF Cemetery Manila #2, Luzon, P.I., might be anyone of the four (4) unidentified bodies whose names are listed in previous Report of Interment. (10 bodies in a grave, 6 already identified.) OMC Form 1044, 1044a and 1044b accomplished.																

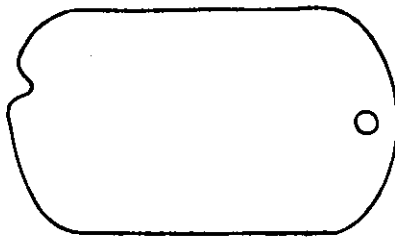
WD GMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

30 Jan. 46

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN -X- 587 (Grui, George) (Formerly Unknown -C-139 Cabanatuan C.A.)		SERIAL No. HWZ 3600117
GRADE pvt	ORGANIZATION 1st Tank	BRANCH OF SERVICE Army
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH POW Camp, Cabanatuan, Luzon, P. I.	CAUSE OF DEATH HWZ Beri-beri, Diphtheria & Malaria	DATE OF DEATH HWZ Nov 21 1945
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EMERGENCY ADDRESSEE (Name, relationship, and address)
HWZ
John Grui
1002 Galtire St. St. Paul, Minn.

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) Ten (10) bodies found in common grave. Records indicate: Pvt Miller, David L. 11c1399 - 27 Bomb Sgt Wolfe, Joseph W. 2-510955 5th C.A.C S/Sgt Huber, Charles J. 19056743 1st Tank (See section 3, reverse side)
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (4)	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME
Amul 587

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 Manila, Luzon, P. I.

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
4 Jan. 46	0,00	Shelter wall	Cross	2	17	2038

WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE POW Camp #1 & #2 Cemetery Cabanatuan, Luzon, P. I. 45.7-70.9 1/50.000
	PLOT No. 8 ROW No. 0 GRAVE No. 009

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) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes
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BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) UNKNOWN -X- 586 (Childs, John S.) (Formerly Unknown -C-139 Cabanatuan C.A.)	RANK Sgt	SERIAL No. 2024361	ORGANIZATION	GRAVE No. 2007
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BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN -X- 580 (Miller, David L.) (Formerly Unknown -C-139 Cabanatuan C.A.)	RANK Pvt	SERIAL No. 11c1399	ORGANIZATION 27 Bomb	GRAVE No. 2039
--	-------------	-----------------------	-------------------------	-------------------

SIGNATURE OF PERSON PREPARING REPORT R. C. BURRETT, T/4 GRC.	SIGNATURE OF GRS OFFICER VERIFYING REPORT E. H. LOCKE, 1st Lt. JG.
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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.

25 FEB 1948

Section 3. UNIDENTIFIED REMAINS.

INSTRUCTIONS:

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

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

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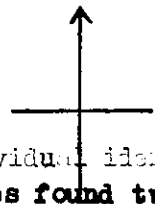
WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
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OTHER IDENTIFICATION CLUES

FILLINGS	<p>SILVER FILLING GOLD FILLING</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

- Pvt Patton, Samuel L. 15066235 14 PUR
- Pvt Cox, Richard 3556975
- Pvt Hoyt, Frank W. 11019905 91 Bomb
- Cgt Shields, John W. 20046601
- Pvt Gruz, George 57026117 124 Tank



The above names were buried in this grave. Individual identification impossible. Out of the ten (10) bodies found two

REMARKS: (2) were identified and eight (8) were unidentified.