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OMC FORM REV 11 FEB 48 1194

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	NAME OF CONVOYER		KIND OF CONVEYNCE
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	NAME OF CONVOYER		KIND OF CONVEYANCE
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m~%	O UNI	e Man	1 1	1.	2	X-60	15			
	SECTION A			1	CTIVE NU			DATE		2
		LOCATION OF DECEASED		7	7747	90408		21C	OT MONTH	YEAR
NAME			SERIAL N	UMBER	₹	GRADE	ARM	RACE	RELIGIO	
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CEMETERY	-		PL	ОТ	ROW	GRAVE	<u> </u>	DISPOSIT	ON OF R	EMAINS
MANILA	Pa Pi		1	?	18	2240		775		80
	<u> </u>	SECTION B — C	ONSIGNEE A	AND N	<u>!</u> Ext of kii	<u>!</u> N		COD	E	DIST. CTR.
NAME AND ADDRESS	OF CONSIGNEE					OF NEXT OF K	IN			
FT. MCKII MANILA, F	LEY CEMETI PHILIPPINE	ERY ISLANDS		(8 Y	ADMI	NISTRAT	IVE D	ECISI	ON)	
		SECTION C — DISI				<u>-</u>				
NAME LE		SERIAL NUMBER	GRADE	DA	TE OF DEA	ATH	D	ATE DISTIN	ITERRED	

IDENTIFICATION TAG	ON ORGANIZA	TION		REL	IGION	IDENTIFIC	CATION VE	RIFIED BY		
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NATURE OF BURNE		SECTION D PREPA			IS FOR SH					
NATURE OF BURIAL			CONDI	IION C	JE KEMAIN	15				
OTHER MEANS OF IDE		epancy Report QMC Fo.	rm 1194a f	or m	ajor disc	repancies.)				
REMAINS PREPARED A	ND PLACED IN CASKI	ET .								
DATE CASKET SEALED BY		ВҮ .	EMBALA	MER (S	Signatur	e)				
CASKET BOXED AND	MARKED		SHIPPIN	IG AD	DRESS VER	RIFIED BY				-
DATE	вч									
	certify that all the	e foregoing operations orrect.	were cond	ducte	d and a	ccomplished	under m	y immed	iate sup	pervision
		-			SIG	NATURE OF AC	RS INSPEC	TOR		
REMARKS AND SPECIA	L INSTRUCTIONS								<u>-</u>	
REMAINS / P. I., PI	ARE UNIDEN LOT H, ROW	TIFIABLE. REN 12, GRAVE 110	Mins I),	PERI	M INT	ERRED 1	N FT,	MCK Da	l Jan	60-
MC FORM EV 11 FEB 48 1194	4							-0	Pacy	(17)

FILE IDENTIFICATION TOPPER

ith 293 Winters Charles B.

Marida IT 2 X- 603 Marila Mans. X- 4557 Palanatuan Cem. C-195

THE FORM | 121

RECLASSIFICATION SHEET

PAPERS ORIGINALLY FILED 293 Zenk Muse Manula #2 V3/57

X 605, Y672, X673, X675, X676, X677, V677

SYNOPSIS AND DATES

These now filed

NEW CLASSIFICATION 293 link Manch # 2 x3156

RECLASSIFICATION SHEET

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QMC Form 1042 (Rev. 1 Apr. 1946)			REPORT OF	NTERMEN	OF REPORT				
(Rev. 1 Apr. 1946) (Supersedes GRS Form 1 Rev. of 1 Apr. 45, which may	, and be used.)		(AR 30-1810 as			6	Dec 195	1	
Imprint Identification 1	ag If Possib	le.	Section 1.—IDENTIFICATION.				Dec 197	<u> </u>	
DO NOT TY	PE	10	MAME (Last, first, middle initial)			SERIA	AL No.		
	∂	Ŋ.	UNKNOWN X-605 M		inknown				
\		1	GRADE MONEO	ORGANIZATION		BRANCH OF SERVICE			
	(٦Ì							
\	`		Unknown	Unkno	OWID.		nknown		
			RACE	RELIGION	1	IF OTHER TH	AN U.S. DEA	D, GIVE	
		,	Unknown Unknown						
PLACE OF DEATH			CAUSE OF DEATH			DATE	OF DEATH		
POW Camp, Caba	ina tuan		II-lan a		•		Inknown		
Luzon, P.I.			Unknown			'	TIVITOMIT		
EMERGENCY ADDRESSEE (Na	me, relationsn	ip, an	a adaress)						
			Unknown						
IDENTIFICATION TAGS FOUN (1, 2, or none)	D ON BODY		IF NO TAGS FOUND ON BODY, I	DESCRIBE MEANS C	F IDENTIFICATION (If	unidentified, fi	ll in section S	оп течетве)	
None									
WERE SUBSTITUTE TAGS PRO	VIDED?(Yes o	r no)	COMPLETED TOOTH CHART OF	N QMC FORM 1045	ATTACHED HERETO				
	•	ŕ	_	_					
Yes (2)			YES	X NO					
LIST PERSONAL EFFECTS FOU	JND ON BODY	AND	DISPOSITION OF SAME						
		Nor	16						
Section 2 PIRIAL 16 of	har than in a	set a h	lished cemetery, furnish sketc	h and man coord	inates on reverse.				
NAME, NUMBER, COORDINAT				n and map coold					
UNITE	ED STATE	S	MILITARY CEMETERY,	FT. WM. MC			,		
DATE OF BURIAL	HOUR		BURIED IN (Shroud, blanket, or n	ame of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.	
4 Dec 1951			Casket		Cross	H	12	110	
WAS THIS A REBURIAL? (Yes or no)	IF A REBUR	IAL, I	NDICATE NAME, NUMBER, COORI	DINATES OF PREVIO	OUS CEMETERY, AND LO	CATION OF G	RAVE		
	HISAR	Сеп	netery Manila #2,	Luzon, P.T.	_	PLOT No.	ROW No.	GRAVE No.	
Yes TYPE OF RELIGIOUS	<u> </u>		ting burial rites	LIE IDENTIFICATI	ON TAGS NOT USED, I	2 ESCRIBE IDE		2240	
CEREMONY			THIS BOTTING TO THE	CONTAINERS B	URIED WITH BODY		_		
				-					
IDENTIFICATION TAG BURIEL BODY (Yes or no)	HTIW C		TIFICATION TAG ATTACHED TO RKER (Yes of 70)			. /			
	İ		Y		MAT "	(., <u>/</u>	د بن 🗪	ر و	
BODY BURIED ON DECEASED	LEFT. NAME	(Last,	Yes	RANK	SERIAL NO. ECORU	O MARIA	N GRAN	110.	
Reclass	St.		(ECO.	- ///	nee				
1/15/50	Ken		DATE	t. f		M.			
BODY BURIED ON DECEASED	RIGHT, NAMI	E (Las	st, first, middle initial)	RANK	SERIAL NO.	ORGANI WY	ON GRAV	E No.	
SLEIDA PRE OF PERSON PRE	ARING REPO	RT		SIGNATURE OF	GRS OFFICER VERIFYING	REPORT			
Swand L	Dero	1		OW DITTO	D WILAUT PART	0+ T+	OMC		
EDWARD L. BER	- 2 - A	RA				st Lt.,			
DISTRIBITION OF REPOR	T: Sinned a	rigin	al for U.S. and allied dead, si	gned original and	i one copy for enemy :	gead, to the	yuartermas	iter Genetal	

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RESTRICTED

	Section 3. U	NIDENTIFIED	REMAINS				•
LEFT LITTLE FINGER	INSTRUCTI (a) Gre mains. Fill social securi planes, vehic (b) A fi	at care will in anatomi	be taken to cal charact position on ks. or prints, a	to record teristics to body four	the most minute clubelow, and any oth and in airplanes, vest, valuable of all c	es for the future is er clues under ''(hicles, and tanks; lues. Imprint all	dentity of unidentified re- Other,'' such as shoe size, and serial numbers of air- fingers and thumbs in the
RIN	chart at left, every tooth v accomplished	or as many will be indic d if one or r	/ as possib ated on th more finge	le. If no e tooth ch rprints ar	fingerprint or print art in accordance v e secured.	s can be secured, vith diagram below	fingers and thumbs in the the condition of each and the Tooth chart will not be
LEFT RING FINGER	HEIGHT	WEIGHT	COLOR OF	EYES	COLOR OF HAIR	BIRTHMARKS, S	CARS, OR TATTOOS
M	WEAPON AND S	SERIAL NO.		LAUNDRY	MARKS	WHERE BODY W	AS BURIED OR FOUND
LEFT MIDDLE FINGER	OTHER IDENTI	FICATION CL	UES				
LEFT INDEX FINGER							
LEFT							
RIGHT							
RIGHT INDEX FINGER						·	
RIGHT MIDDLE FINGER	FURNISH SKET	CH AND MAF	P REFERENC	E AND COO	ORDINATES FOR BURI	AL IN OTHER THAN	ESTABLISHED CEMETERY
RIGHT RING FINGER	REMARKS:						
RIGHT LITTLE FINGER		•					

							<u> </u>	`			
QMC Form 104 (Rev. 1 Apr. 1946) (Supersedes GRS Form Rev. of 1 Apr. 45, which may	1 and		REPORT OF (AR 30-1810 a			DA	ATE OF REF	PORT			
		·	,		-1013)	(Dea .	195.			
Imprint Identification DO NOT T		ble.	Section 1.—IDENTIFICATION		 :						
			NAME (Last, first, middle initial)		•	SE	RIAL No.				
l <i>(</i>			U.Bhille R A=605 h		_ I V#			Unknown			
		- \	GRADE (Sonila Jauso	ORGANIZAT		BR	ANCH OF	SERVE			
(οl	1			-					
			Unknown	מַט	known	Unknow					
\			RACE	RELIGION		IF OTHER	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY				
			Unknown	บิท	known	NAME O	COUNTR	1			
PLACE OF DEATH			CAUSE OF DEATH			DA	TE OF DEA	ATH			
POn Camp, Jab	ana tu an		** *				TT 1				
Luzon, P.I.			Unksowa.				Unkno	W11			
EMERGENCY ADDRESSEE (N	ame, relations	tip, and	i address)								
			Unknown								
IDENTIFICATION TAGS FOUR	ND ON BODY		IF NO TAGS FOUND ON BODY,	DESCRIBE MEA	ANS OF IDENTIFICATION	N (If unidentified	, fill in sect	ion 3 c	m reverse)		
(1, 2, or none)											
WERE SUBSTITUTE TAGS PR	OVIDED?(Yee	or no)	COMPLETED TOOTH CHART O	N OMC FORM	1045 ATTACHED HERET	·o					
	0110201(168	ur 110)	COMPLETED TOOTH CHART O	A GMC LORM	TOTO THE THE THE	•					
Yes (2)			YES	NO 🗷							
LIST PERSONAL EFFECTS FO	UND ON BOD	Y AND	DISPOSITION OF SAME								
		Hon									
Section 2.—BURIAL If of	her than in	establ	ished cemetery, furnish sketo	h and man c	oordinates on reverse						
NAME, NUMBER, COORDINAT				•							
, , , , , , , , , , , , , , , , , , , ,											
UNIT	تنت 21AL	.3 u	illi ay chaltery,	FT. Vä.	MCLIMIEY, P	.I.					
DATE OF BURIAL	HOUR	· · · -	BURIED IN (Shroud, blanket, or)	name of other)	TYPE OF GRAVE	PLOT No.	. ROW N	NO.	GRAVE No.		
4 Dec 1951			Cara leo ★		Gross	н	12	,	110		
			UASKOS								
WAS THIS A REBURIAL? (Yes or no)	IF A REBUI	RIAL, II	NDICATE NAME, NUMBER, COOR	DINATES OF PI	REVIOUS CEMETERY, AI						
Yes	USAF	Jem	wtery Enails /2,	Luzon, 3	`.I.	PLOT NO	o. ROW		2240		
TYPE OF RELIGIOUS	PERSON CO	NDUCT	TING BURIAL RITES	IF IDENTIFE	CATION TAGS NOT US		1	• ,			
CEREMONY				CONTAINE	RS BURIED WITH BODY	,,					
IDENTIFICATION TAG BURIE	D WITH		FICATION TAG ATTACHED TO								
BODY (Yes or no)		MMIXE	KER (Yes or no)								
Yes			Yes	<u> </u>							
BODY BURIED ON DECEASED	(Last,	first, middle initial)	RANK	SERIAL NO.	ORGANIZA	LION C	GRAVE	No.			
BODY BILDIED ON DECEASED	t Gent middle initial)	RANK	SERIAL No.	 ORGANIZA	TION 1	GRAVE	No.				
BODY BURIED ON DECEASED	, just, neutre thirtis)	IVUIL	SERIAL NO.	UNGANIZA		JIVAYE	10.				
SCHATURE OF PERSON PRE	RING REPO	DRT		SIGNATURE	OF GRS OFFICER VERI	FYING REPORT	<u> </u>				
Wwad 20	20	50.4		101277	C B WILLY DO	1	CALLED .				
- Speak L. Self	وملاهر	RA		Un 3 PLL	S R. WHAYLEN	, 156 Pg.	, 4				

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	Section 3.	ONIDENTIFIE	D REMAINS	Š			
LEFT LITTLE FINGER	planes vot	reat care will II in anatom rity number;	, position o	η πόσιλ ιοι	und in airpianes, ver	ncies, and tanks; and	ntity of unidentified re- er," such as shoe size, I serial numbers of air- gers and thumbs in the condition of each and Tooth chart will not be
RIN	every tooth accomplish	ed if one or	cated on the more finge	ne tooth cl erprints ar	hart in accordance w e secured.	rith diagram below.	Tooth chart will not be
LEFT RING FINGER	HEIGHT	WEIGHT	COLOR O		COLOR OF HAIR	BIRTHMARKS, SCA	
	WEAPON AND	SERIAL NO.		LAUNDRY	MARKS	WHERE BODY WAS	BURIED OR FOUND
Widdi							
LEFT MIDDLE FINGER	OTHER IDENT	TIFICATION CL	UES	<u> </u>			
=							
LEFT INDEX FINGER							
THUMB							
RIGHT							
6 7							
INDEX.							
RIGHT INDEX FINGER							
Мір	FURNISH SKE	ETCH AND MA	P REFERENC	E AND CO	OPOINATES FOR PURIA	IL IN OTHER THAN EST	APLICUED OF METERS
MIDDLE FINGER					SKUMATES FOR BURIA	AL IN OTHER THAN EST	ABLISHED CEMETERY
GER							1
_							
RIGHT RING FINGER							
HT NGER						·	
	REMARKS:					:	
Lill B	,					;	
RIGHT LITTLE FINGER							
5							

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WD QMC FORM 1042 (Rev. I Apr. 1945)		REPORT OF	MOTERMEN	k STCRAGE	DATE	OF REPORT	
(Rev. I Apr. 1945) (Supersedes GRS Form 1)		(AR 30-1810 at			_ n	EU 12	1000
	<u>_</u>	·	1d AR 50-10		1 0	ro 17	1220
Imprint Identification T DO NOT TYI		Section 1.—IDENTIFICATION.	<u>.</u>				
	293	NAME (Last, first, middle initial)	ati Cam Nam	ד כו פיי הוג.	SERIA	L, No.	
/	7/~	UNKNOWN A-605 US (Manila Haus X-4		1118 #2, P. 1	ļ		
\	1		 			nknown	<u>.</u>
	ol	GRADE	ORGANIZATION		BRAN	CH OF SERVI	CE
[\	\sim 1	Unknown	Unkno	רנשנו	11	nknown	
\	/	RACE	RELIGION		IF OTHER TH		D CIVE
		NACE	RELIGION		NAME OF C	OUNTRY	ID, GIVE
		Probably White	Unkno	wn	<u> </u>		
PLACE OF DEATH		CAUSE OF DEATH	<u>!</u>		DATE	OF DEATH	
POW Camp, Caban	natuan.						
Luzon, P.I.		Unkn	own		U	nknown	
EMERGENCY ADDRESSEE (Na	me, relationship, an	d address)					
		Unknown					
IDENTIFICATION TAGS FOUND	O ON BODY	IF NO TAGS FOUND ON BODY, I	DESCRIBE MEANS	OF IDENTIFICATION (I)	unidentified, fl	ll in section 3	оп теветве)
(1, 2, or none)							
None							
WERE SUBSTITUTE TAGS PRO	VIDED?(Yes or no)						
Yes (2	,						
	<u>-</u>						
LIST PERSONAL EFFECTS FOU	IND ON BODY AND	DISPOSITION OF SAME					
		No	~~				
		OM	110				
Section 2—BIIRIAL It out	er then in estab	lished cemetery, furnish sketc	h and man coord	linates on reverse.			
NAME, NUMBER, COORDINATE			•				
MANNE, HOMBER, GOORDINATE	20, 1410 2001111011						
U. S. Arm	v Mausoleu	m, AGRS-PAZ					Casket
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or n	ame of other)	TYPE OF GRAVE	REAL	KOKKK	ENWENZ
				MARKER			1
3 Nov 50		Final type cask	et		Manil	a Secti	on 272
WAS THIS A REBURIAL?	IF A REBURIAL, I	NDICATE NAME, NUMBER, COORL		OUS CEMETERY, AND LO	OCATION OF G		
(Yes of no)					FAMILE.	NEW YORK	DESCRIPTION
Yes	AGRS M	ausoleum Manila, P	. I.		802	K	33 65
TYPE OF RELIGIOUS	PERSON CONDUC	TING BURIAL RITES	IF IDENTIFICAT	ION TAGS NOT USED,	DESCRIBE IDE	NTIFICATION	DATA AND
CEREMONY			CONTAINENS	IONIED WITH BODY			
			.				
IDENTIFICATION TAG BURIER BODY (Yes or no)	WITH IDENT	TIFICATION TAG ATTACHED TO					
BODT (Partition NO)	100	MILIT (100 OF NO)					
			<u> </u>				
BODY BURIED ON DECEASED	LEFT, NAME (Last,	, first, middle initial)	RANK	SERIAL No.	ORGANIZATIO	ON GRAV	Æ No.
N 1 1 1 1						, ,	
Not applicab.			1 7410/	CEDIAL NO	LOGCANGIATI	ON GEORGIA	/F 4/o
BODY BURIED ON DECEASED	RIGHT, NAME (La:	ct, first, middle initial)	RANK	SERIAL NO.	7.00	- grice	eng.
		_ 4_			9 Kry	white her	Garan
	oring cask	978.	SIGNATURE OF	 GRS OFFICER VERIFIMA	MS PEPOPT		rag -
SIGNATURE OF PERSON PREF	7.37		SIGNATURE	les E. A	wait 3	1 Chan	£1
THE OWNER OF THE OWNER.	7 7 7						- /
LEROY F. TUK	NEŘ Adm.	Asst.	STANLEY	MAY, Mai	or /UMC		•
	NEŘ, Adm.	Asst.		E MAY, Majo	//	Quarterman	ter General

	Section o.—L	NIDENTIFIED	REMAINS					
LEFT LITTLE FINGER	mains. Fil social secur	eat care will I in anatomi ity number;	cal charac position o	teristics b f body fou	elow, and ind in airp	l any other o lanes, vehicle	lues under ''Ot es, and tanks; ar	entity of unidentified re- her,'' such as shoe size, nd serial numbers of air- ngers and thumbs in the
	chart at left every tooth accomplishe	or as many will be indic d if one or r	as possib ated on the more finge	le. If no e tooth ch rprints ar	fingerprinart in accordance	nt or prints ca ordance with	in be secured, the diagram below.	ngers and thumbs in the ne condition of each and Tooth chart will not be
LEFT RING FINGER	HEIGHT	WEIGHT	COLOR O	FEYES	COLOR OF	HAIR	BIRTHMARKS, SC	ARS, OR TATTOOS
M	WEAPON AND	SERIAL No.	<u>'</u>	LAUNDRY	MARKS		WHERE BODY WA	S BURIED OR FOUND
LEFT MIDDLE FINGER	OTHER IDENT	IFICATION CLU	JES				<u>,</u>	
LEFT INDEX FINGER	FILLINGS		-					
SER		•	S. S	LVER FILL PLO FILLIN	NG G	4		
THUMB	CAVITIES	3	O Constant	CAVITY DECAY	ED	7	UPPER	1000
RIGHT THUMB	MISSING	TEETH		OTH MISSIN	ŧ G		N REPRESENTS TH	E MOUTH WIDE OPEN
INDEX	CROWNED	TEETH		CELAIN CI DLD CROW		16 B	LOWER	76) 16 76) 15 76) 14
(FINGER	BRIDGE	VORK		GOLD B	RIDGE	13 t		00 13 00 12 10 11
MIDDLE PROSE	FURNISH SKE	TCH AND MAP	REFERENCE	E AND COOF	RDINATES F	OR BURIAL IN	OTHER THAN ESTA	BLISHED CEMETERY
RIGHT RUNG FINGER	REMARKS:						OFFICE LEADER	bi —
18118	-		-		-	·	61,5	
RIGHT LITTLE FINGER	٠.	:				•	•	

		050007 05	WIREME	ME STORAGE		F REPORT
WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)	÷	KEPUKI UF (AR 30-1810 a)			UEU	1 2 1950
		 · · · · · · · · · · · · · · · · · ·		013)		
Imprint Identification DO NOT		Section 1.—IDENTIFICATION. NAME (Last, first, middle initial)			SERIAL	No.
		UNKNOWN X-605 US	AF Com Ma	nila #2, P. 1		
(\	(Manila Maus X-4				knowa
ح	~ \	GRADE	ORGANIZATIO	N	BRANCE	H OF SERVICE
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		RACE	RELIGION	-	IF OTHER THAT	N U. S. DEAD, GIVE
		Probably White	Unkn	lown	NAME OF COL	UNIKI
PLACE OF DEATH		CAUSE OF DEATH	<u> </u>		DATE O	F DEATH
POW Camp, Cat	enatuan,	Unkn			77-1	
Luson, P.I.		<u> </u>			ועט	known
EMERGENCY ADDRESSEE (Name, relationskip, an	id address)				
		Unknown				
IDENTIFICATION TAGS FO	UND ON BODY	IF NO TAGS FOUND ON BODY,	DESCRIBE MEANS	OF IDENTIFICATION (If unidentified, fill	in section 3 on reverse)
Hone						
WERE SUBSTITUTE TAGS F	ROVIDED?(Yes or no)	-				
Yes (2)					
		<u> </u>				
<u></u>		D DISPOSITION OF SAME	D O			
LIST PERSONAL EFFECTS I	FOUND ON BODY AND	_		rdinates on reverse.		
LIST PERSONAL EFFECTS I	FOUND ON BODY AND	No		rdinates on reverse.		
LIST PERSONAL EFFECTS I Section 2.—BURIAL. II NAME, NUMBER, COORDIN	FOUND ON BODY AND other than in estab	blished cometery, furnish sketc		rdinates on reverse.		Cooke
Section 2.—BURIAL. III. NAME, NUMBER, COORDIN	other than in estab ates, and location	Notice the company of	h and map coo			Caake
Section 2.—BURIAL. III. NAME, NUMBER, COORDIN	FOUND ON BODY AND other than in estab	blished cometery, furnish sketc	h and map coo	TYPE OF GRAVE	MARK 1	Caake
Section 2.—BURIAL. III. NAME, NUMBER, COORDIN	other than in estab ates, and location	Notice the company of	h and map coo: name of other)	TYPE OF GRAVE		Caske RELEXE SERVES Section 272
Section 2.—BURIAL. III NAME, NUMBER, COORDIN U. 8. Ar DATE OF BURIAL 8 NOV 50 WAS THIS A REBURIAL?	other than in establishments, and location Hour	Dished cometery, furnish sketch of CEMETERY AGRS PAZ BURIED IN (Shroud, blanket, or r	th and map coost	TYPE OF GRAVE MARKER	Manile LOCATION OF GRA	Section 272
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	Continu	JNIDENTIFIED	DEMAINS			_		
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LEFT RING FINGER	every tooth accomplished HEIGHT	will be indiced if one or r	ated on the		coLOR OF			Tooth chart will not be
MIDDLE FINGER	WEAPON AND			LAUNDRY	MARKS		WHERE BODY WA	S BURIED OR FOUND
	OTHER IDENT	IFICATION CLU)E2					
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RIGHT LITTLE FINGER			•		••••	1 01308	E 0 30 0	

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

UTA-Ras to condition of remains

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)

Home

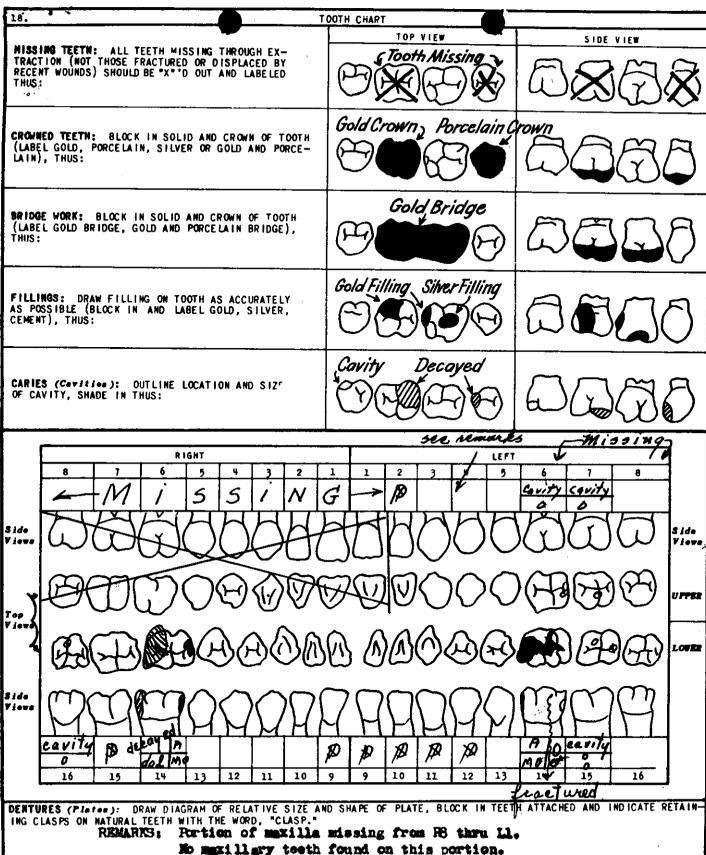
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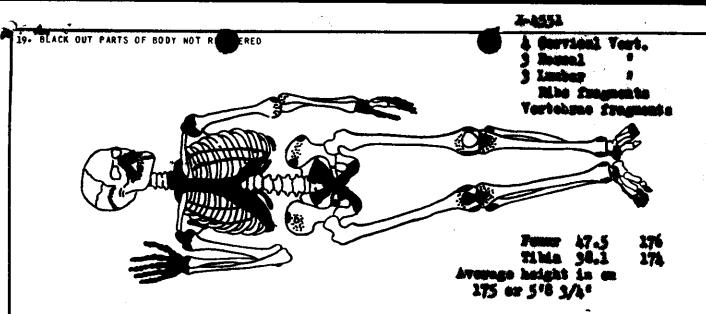
PREVIOUS EDITIONS OF THIS



No maxillary teeth found on this portion. It facially malposed.

lat Lt.,

/s/ Charles Demay



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:

SIGNATURE OF MEDICAL OFFICER

21- REMARKS AND ADDITIONAL INFORMATION

No NOI bettle, No I.D. tag or other means of identification. Approximate-circumference of shull 20 inches. Intimted weight of remains 82 lbs.

These remains is one of a group disinterred from Grave 784, Now 0, Flot 7 of Cabanatnan PON Gra I & II, Image, P.I., Stoletal and Tooth charts attached.

CREETING THUE OCPT:

L. S. PARCETO

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 HANE, GRADE, ARM OR SERVICE, AND ORGANIZATION

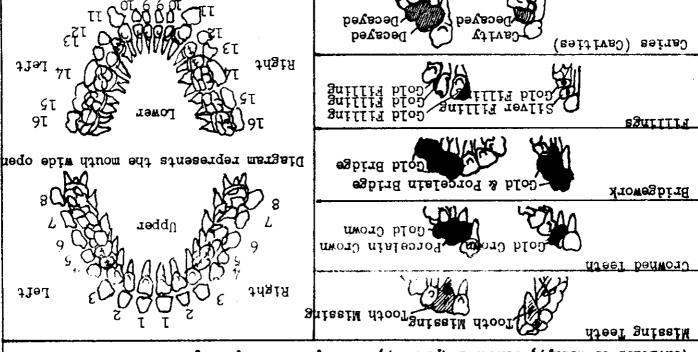
SIGNATURE

/s/ Charles Joseph

1972x -							
DMOForm 1044 Rev. I Apr. 1945	RES	TRICTED	te	•			
REPORT OF	DISINTERMENT FOR IDENTIF	PI CATION	16 De	c 47			
1. Remains of (Name)			Serial Number				
UNITEOWIN X-605							
Grade	Organization						
.Name, Number and	d Location of Cemetery		Plot	Row	Grave No.		
USAF Cem Manil	la No. 2, Iazon, PI		2	1.8	2240		
2.Date of Disinter	rment		······································	• • • • • • • • • • • • • • • • • • • 			
16 Dec 47							
	Skeleta	l remains					
4.What Identificat	tion Found at Time of Dis	sinterment: On	Marker	·			
	One (1) subst	itute tag					
On Remains					· · · · · · · · · · · · · · · · · · ·		
	One (1) subst	itute tag					
What Identifica	tion Used Upon Reintermer	it: On Marker					
On Remains							
5 Streeting of Dr	ficer Surpervising Dising	Arment and He	interment.				
).Signature of Or.	A. M.	namo					
	WARD C. STRING	WSON. let It.	o li c				

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 ne 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), cuspide or canines (tearing teeth), bicuspide (chewing teeth), and molars(principal cheming teeth), an examination should be made and findings charted to cover the following basic conditions: lost teeth, crowned teeth, bridgework, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.



Dentures (Plates) Draw diagram of relative size and shape of plate block in teeth

attached and indicate retaining clasps on natural teeth with the

вытыпей

word "clasp".

III4-PHILRYCOM-5.47-130M

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SIGNATURE OF GRE OFFICER VERIFYING REPORT

s/t/ E. M. MOORE, 1st Lt., QMC

Individual tamper suppressions and reference

s/t/ R. C. BARRETT, T/4, GRS.

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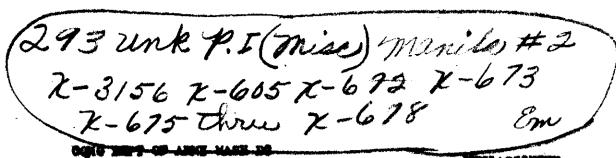
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	Section 3UNIDENTIFIED REMAINS.		
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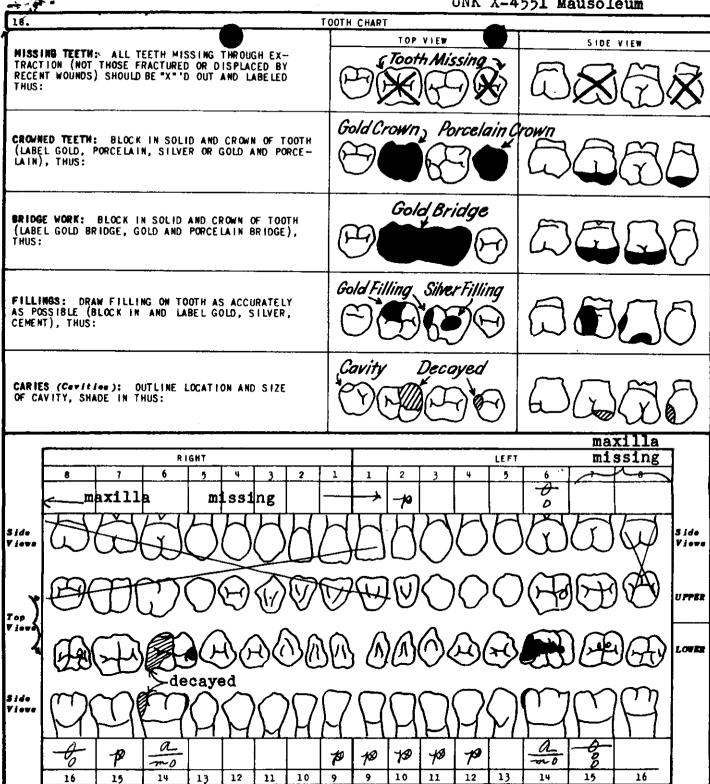
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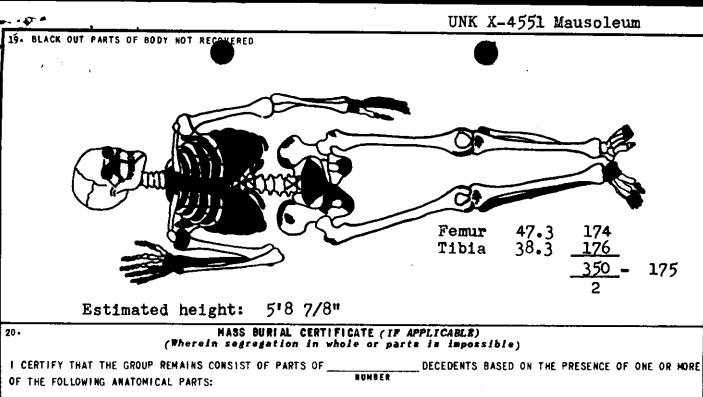


DENTURES (Platon): DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAIN-ING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

REMARKS: L7 is loose present with remains,

> PAUL R NICHOLS Chief, Identification Section

aulk Muhal



SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

See attached Anthropologist's statement dated 22 March 1950.

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

CENTRAL IDENTIFICATION POINT AGRS APO 900 NECHOLS FIELD, MANILA, P.I.

22 March 1950

STATEMENT

References	UNIX	A-3156,	Menila	#2
	•	1-605	• `	•
	•	1-672	•	
	•	X-679	•	
		1-675		•
		x-676		•
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	•	1-678	•	•

As requested, the above eight (8) remains were examined by me for fractures of wrists, and noses, and amputations of toes.

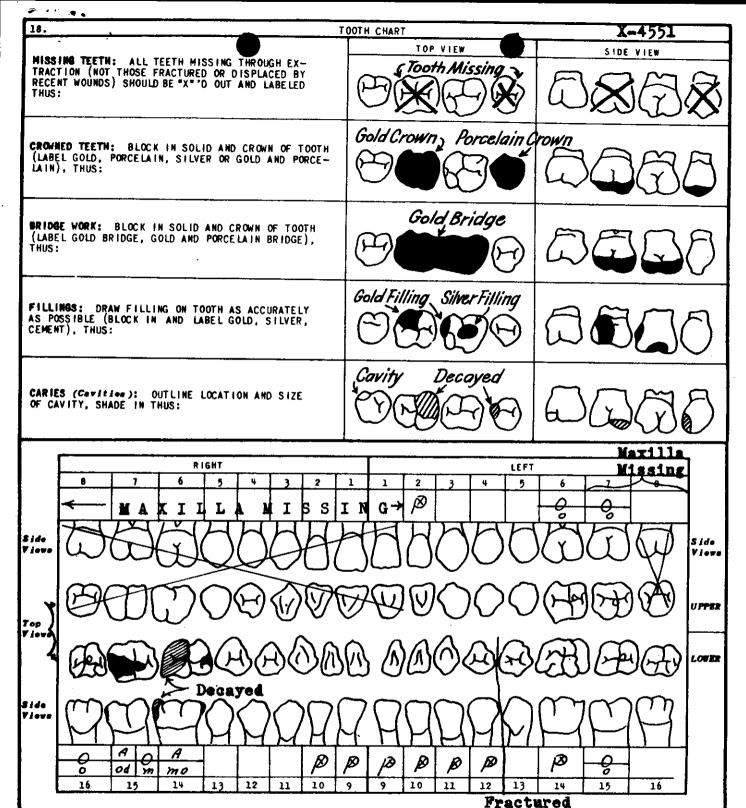
The facial partiess of the erasis of all but UNK 1-675 are missing procluding an emmination for broken moses. The partiess of the name bones present of UNK 1-675 do not indicate that they have been broken.

The wrist and too bones of the eight (8) remains are largely missing, or so graded, that no accurate determination of fractures of the wrists or asputation of the toos was possible.

ROBERT B. FOX

,				
	IDENTIFIC	CATION DATA		
L. REMAINS OF UNKNOWN				2. DATE OF REPORT
UNKNOWN X-	-4551 (Fermerly UNK	X-605 Manila	#2)	12 Dec 1949
. NAME OF CEMETERY		4. PLOT 5. ROW	6. GRAVE	7. DATE OF
	•		}	DISINTERMENT REINTERMENT
4477				
AGRS Maus	soleum, Manila, P.I.		<u> </u>	
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7. LIST EVERY ITEM OF C SERVICE, ETC. (If 1a)	HEALED FRACTURES AND BONE MALF NO LOTHING, EQUIPMENT AND PERSONAL undry marks are indistinct such	N E EFFECTS FOUND, SHOW notation should be	made and s	

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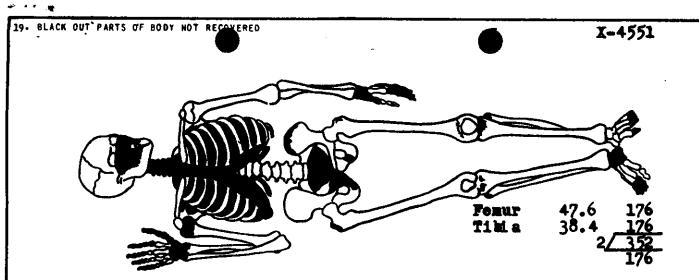


DENTURES (Plates): DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAIN-ING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

L7 is loose present with remains.

Sould. Pachals
PAUL R NICHOLS

Chief, Identification Section



Bstimated height: 5' 91"

20•	MASS BURIAL CERTIF	CATE (IP A	PPLICABLE) s is impos	#1ble)		· · · -			•
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			SIGNATURE (F HEDI	CAL OF	FIGER			_
21. REMARKS AND ADDITION	AL INFORMATION	· · · · · · · · · · · · · · · · · · ·							

This is the remains of a male individual, very probable white, approximately 5' 92" in height, and in the early-mid or mid twenty's at time of death.

In so far as the condition of the remains allows, and to the best of my ability, this remains is properly segregated and represents one and the same individual.

See attached Anthropologist's statement dated 12 Dec. '49.

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 MUNICIPAL TO THE STATE OF THE STAT

CHMERAL EDMETIFICATION POINT ACMS APO 900 HEMOLE FIELD, MANULA, P.L.

12 December 1949

STATEMENT

Neferonom UK I-2354 Nausoleum UK's I-4551 thru I-4557

The above eight (8) remains were examined simultaneously by me this date for proper segregation, and new QMS Forms 1044 were accomplished for each remains. As requested, excell examination was made for "fractures of unist, nose and amputation of toos"; however, bones necessary for astablishing the above were missing, or partly missing, in all of the remains.

In so far as the condition of the remains allows for proper association, and to the best of my ability, each of the above remains is now properly cogregated. Hence improperly associated were assigned GIL \$522.

ROBERT S. FOI

An thropologist

MITS ALLO FORM 4040		REPORT	OF INTERMEN	_	DATE	OF REPORT	46
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None		were identif	ied-and eight	(8) unident	ified:-	240. /X	·/ U1 W
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	Section 3.— DENTIFIED REMA	WC .	
LEFT LITTLE FINGER	INSTRUCTIONS: (a) Great care will be take mains. Fill in anatomical cha social security number; position planes, vehicles, and tanks. (b) A fingerprint, or prints chart at left, or as many as pose every tooth will be indicated on	en to record the most minute clue racteristics below, and any other n of body found in airplanes, vehi s, are the most valuable of all clu- sible. If no fingerprint or prints the tooth chart in accordance wi	s for the future identity of unidentified re- clues under "Other," such as shoe size, cles, and tanks; and serial numbers of air- es. Imprint all fingers and thumbs in the can be secured, the condition of each and th diagram below. Tooth chart will not be
LEFT RING FINGER	accomplished if one or more fil	gerprints are secured. COF EYES COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
3	WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
LEFT MIDDLE FINGER	OTHER IDENTIFICATION CLUES		
LEFT INDEX FINGER	FILLINGS	SILVER FILLING	2 0 0 2
LEFT THUMB	CAVITIES	CAVITY DECAYED 7	UPPER CAVITIES
RIGHT THUMB	CROWNED TEETH	TOOTH MISSING DIAGRAM	MISSING MOUTH WIDE OPEN TEETA
RIGHT INDEX FINGER	BRIDGE WORK	GOLD BRIDGE	LOWER 15 15 14 SILVER 12 12 10000 12
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LITTLE FINGER	Pvt Smit Pvt Hen	th, Harry J. 6671009 nessy, Harland 32092	

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WERE SUBSTITUTE TAGS PRO	VIDED?(Yes		T .						
		<i>,</i>	Fyt Callins, W						
Yes (2)			3 reverse					
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Section 2.—BUMAL, If oth	er than in	ostab.	lished cometery, furnish sketci	h and map coord	inates on reverse.				
NAME, NUMBER, COORDINATI	es, and loc	CATION	I OF CEMETERY						
			USAF Cemetery A	ianila 🧀.	Luzon, Pala				
DATE OF BURIAL	HOUR	·	BURIED IN (Shroud, blanket, or m		TYPE OF GRAVE	PLOT NO). ROW	/ No.	GRAVE No.
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WAS THIS A REBURIAL?			INDICATE NAME, NUMBER, COORD				F GRAVE		
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/s/ R. C.			m/L one	/s/	•			il. 974	:
			1/4, GRS.	/t/_	E. L. MOORE				
DISTRIBUTION OF REPORT through Headquarters GF	: Signed S Officer.	origin Copi	al for U.S. and allied dead, signs for retention in theater as p	ined original and prescribed by the	one copy for enemy iter commander.	dead, to t	ne Yuari	ermest	w wenere!

*	Section 3. DENTIFIED R	EMAINS*		
LEFT LITILE PINGER	INSTRUCTIONS: (a) Great care will be mains. Fill in anatomical social security number; pos	taken to record the most recharacteristics below, and sition of body found in air	minute clues for the future I any other clues under "C planes, vehicles, and tanks; le of all clues. Imprint all	identity of unidentified re- Other," such as shoe size, and serial numbers of air- fingers and thumbs in the
86 E	(b) A fingerprint, or p chart at left, or as many as every tooth will be indicate accomplished if one or mor			
LEFT RING PINSER	HEIGHT WEIGHT C	OLOR OF EYES COLOR OF	F HAIR BIRTHMARKS, S	CARS, OR TATTOOS
MIDOL	WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY W	VAS BURIED OR FOUND
LEFT MIDDLE FINGER	OTHER IDENTIFICATION CLUES		,	• • •
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ÿ~:		SILVER FILLING GOLD FILLING	1000 1000	
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