FILE IDENTIFICATION TOPPER

FILE NUMBER 913 UM	k manila # 2	1-677
SUBJECT		
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MC FORM 1121		51 1325

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RECLASSIFICATION SHEET

PAPERS ORIGINALLY FILED 293. Unk (Mase) Manche # 2 X315 E X605, X672, X673, X675, X676, X677, X678

SYNOPSIS AND DATES

NEW CLASSIFICATION

RECLASSIFICATION SHEET

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DISINTERMENT DIRECTIVE

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QMC FORM REV 11 FEB 48 1194

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QMC Form 10 (Rev. 1 Apr. 1946 (Supersedes GRS Form	42 3)		REPORT OF	NTERMEN	T	DATE	OF REPORT	
(Supersedes GRS Form Rev. of 1 Apr. 45, which ma	o 1, and by be used.)		(AR 30-1810 a	nd AR 30-18	2 <i>15</i>)		~_ <u>_</u>	
Imprint Identification	Tak If Possi	L10		···		<u> </u>	7 Dec 1	951
DO NOT		Die.	Section 1.—IDENTIFICATION NAME (Last, first, middle initial)			Lecou	er bla	
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<i>)</i>		1	GRADE	ORGANIZATION			Unknown ICH OF SERV	
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\		/	RACE	RELIGION		IF OTHER TH	IAN II S. DE	an GIVE
			Unknown	Unkn	∩ ₩11	NAME OF C	OUNTRY	nD, 0112
					- W-11			
PLACE OF DEATH			CAUSE OF DEATH	·		DATE	OF DEATH	
POW Camp, Cabai	natuan							
Luzon, P.I.			Unknown			ĺτ	Jnknown	
EMERGENCY ADDRESSEE (Name, relations)	hip, an	d address)					-
	Unknown							
IDENTIFICATION TAGS FOL (1, 2, or none)	IND ON BODY		IF NO TAGS FOUND ON BODY, I	DESCRIBE MEANS (OF IDENTIFICATION (I)	unidentified, fi	ll in section 3	on reverse)
(1, 11) 07 110110)								
	one			<u> </u>				
WERE SUBSTITUTE TAGS PR	ROVIDED?(Yes	er no)	COMPLETED TOOTH CHART OF	N QMC FORM 1045	ATTACHED HERETO			
77 (0)			YES	x NO				
Yes (2) LIST PERSONAL EFFECTS F	OLIND ON BOD	V AND		DK:				·-·
LIST FERSONAL EFFECTS F	OUND ON BOD	TAND	DISPUSITION OF SAME					
	No	one						
	211	J110						
Section 2.—BURIAL, If o	ther than in	establ	lished cemetery, furnish sketc.	h and map coord	inates on reverse.			
NAME, NUMBER, COORDINA	ATES, AND LOC	ATION	OF CEMETERY					-
UNITE	D STATES	S MI	LITARY CEMETERY. F	T. WH. MCK	INLEY. P.I.			
DATE OF BURIAL	HOUR		BURIED IN (Shroud, blanket, or n		TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
					MATRICELL			1
5 Dec 1951			Casket		Cross	H	10	129
WAS THIS A REBURIAL? (Yes or no)	IF A REBUR	₹IAL, Ii	NDICATE NAME, NUMBER, COORD	INATES OF PREVIO		CATION OF G	RAVE	/
Yes	TICAR	Com	etery Manila #2, I	u.an P.T		PLOT No.	ROW No.	GRAVE No.
	<u> </u>					12/	18	2246
TYPE OF RELIGIOUS CEREMONY	PERSON CO	NDUC	TING BURIAL RITES	IF IDENTIFICATI	ON TAGS TO USED,	DESCRIBE IDE	NTIFICATION	i data and
					FILE /			
-/	<u> </u>				RECORDS	ANHOTATI	<u> </u>	
IDENTIFICATION TAG BURII BODY (Yes or no)	ED WITH		TFICATION TAG ATTACHED TO KER (Yes or no)		DATE _	Jan-	3. <u>67 </u>	
75			37		NAME ,	OH Jo.	nes	
Yes			Yes	1	Legis	BR. K	M. DIV	
BODY BURIED ON DECEASE				RANK	SERIAL NO.	ORGANIZATIO	N GRAV	E No.
Recklyce	Mac	72,60						
	D DICUTE NAME	E ar		LDANIK	CEDIAL No.	ODCANIZATIO	N CDAV	T No.
BODY BURIED ON DECEASE	3 / / / /		t, first, middle initial)	RANK	SERIAL No.	ORGANIZATIO	N GRAV	E NO.
C-(6660	1						
SIGNATURE OF PERSON PRI	EDADING DEDC	DT		SIGNATURE OF 6	 GRS OFFICER VERIFYING	PEPOPT		
SIGNATURE OF TENDON	RAMING KEFO	W.I		SIGNATURE OF G		a NEFORT		
WWW DY JOE	POSEDI	D.A	•	CHARTER	NILAYI DM 1	at It	OHO	
EDWARD L. BE	RC SPL	, RA		CHARLES	R. WHAYLEN, 1	st Lt.,	QMC	

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.

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	Section	JNIDENTIFIE	REMAINS				
LEFT LITTLE FINGER F	INSTRUCT (a) Gromains. Fill social secur planes, veh (b) A the chart at left every tooth	eat care will I in anatom	be taken ical character position on the comment of	to record teristics I f body for tre the modele. If no the tooth cleans are	the most minute coelow, and any ot und in airplanes, votest valuable of all fingerprint or prinart in accordance a secured	lues for the future her clues under ' ehicles, and tanks clues. Imprint al nts can be secured with diagram belo	identity of unidentified re- 'Other,'' such as shoe size, ; and serial numbers of air- I fingers and thumbs in the d, the condition of each and ow. Tooth chart will not be
THE PAIN C	HEIGHT	WEIGHT	COLOR O		COLOR OF HAIR		, SCARS, OR TATTOOS
LEFT RING FINGER	neight.	, in Ending	COLONIO	1 4,125	SOLON OF THE		,
	WEAPON AND	SERIAL No.		LAUNDRY	MARKS	WHERE BODY	WAS BURIED OR FOUND
Windi							
LEFT MIDDLE FINGER	OTHER IDENT	TIFICATION CL	UES.	1			
ž							
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LEFT THUMB							
RIGHT							
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RIGHT DEX FINGER							
>		•	•				
RIG	FURNISH SK	ETCH AND MA	AP REFEREN	CE AND CO	ORDINATES FOR BU	RIAL IN OTHER THA	N ESTABLISHED CEMETERY
RIGHT MIDDLE FINGER							^
	-					•	Ì
RING FINGER							
; z	REMARKS:		<u></u>			· · · · · · · · · · · · · · · · · · ·	
Ę							
RIGHT LITTLE FINGER		٠				••	, i

QMC Form 1042 (Rev. 1 Apr. 1946) (Supersedes GRS Form 1		REPORT	OF THERM	ENT	DATE	OF REPORT	
(Supersedes GRS Form 1 Rev. of 1 Apr. 45, which may	, and be used.)	(AR 30-1810	and AR 30-	-1815)		7 Dec 1	941
Imprint Identification		Section 1.—IDENTIFICATI	ION.	· · · · · · · · · · · · · · · · · · ·		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	/ (
DO NOT TY	YPE	NAME (Last, first, middle ini	=		SERIA	AL No.	
		UNK JOAN X-677		- A	_		
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		RACE Unknown	RELIGION Un	k nown	IF OTHER TH NAME OF C	IAN U.S. DE/ OUNTRY	AD, GIVE
PLACE OF DEATH		CAUSE OF DEATH				OF DEATH	
PON Camp, Caban	a tuan	0002 01 024111			DAIL	OI DEATH	
Luzon P.I.	a, 50/000	ກາກວາກ			1	Unknown	
EMERGENCY ADDRESSEE (N	ame, relationship, an	d address)					
	Unknown	· · · · · · · · · · · · · · · · · · ·					
IDENTIFICATION TAGS FOUN (1, 2, or none)	ID ON BODY	IF NO TAGS FOUND ON BOD	DY, DESCRIBE MEA	NS OF IDENTIFICATION	(If unidentified, fi	ll in section 3	on reverse)
WERE SUBSTITUTE TAGS PRO		COMPLETED TOOTH CHAR	T ON QMC FORM	1045 ATTACHED HERETO	-	-	
Vo. (2)		YES	NO NO				
LIST PERSONAL EFFECTS FO	UND ON BODY AND	DISPOSITION OF SAME					<u> </u>
	None						
Section 2.—BURIAL. If of	her than in estab.	lished cemetery, furnish sl	tetch and map co	ordinates on reverse.			
NAME, NUMBER, COORDINAT					<u> </u>		
,	•						
IMI TE	STATES M	LITARY SEACTERY	. iI. i	weiling P.I	_		
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket,		TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
5 bec 1951		Casket		Cross	H	1 10	129
WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, I	NDICATE NAME, NUMBER, CO	ORDINATES OF PR	EVIOUS CEMETERY, AND	(CD WE NO
Yes	USAF Cer	metery Manila #2	Lugon, P	·I.	PLOT No.	ROW No.	2246
TYPE OF RELIGIOUS	PERSON CONDUC	TING BURIAL RITES	IF IDENTIFIC	CATION TAGS NOT USE		1	1
CEREMONY	, 2.,00.1		CONTAINER	RS BURIED WITH BODY			
IDENTIFICATION TAG BURIE	D WITH IDENT	IFICATION TAG ATTACHED T	o				
BODY (Yes or no)	MAN	KER (Yes or no)					
Yes	!	Yes	l				- 10 -
BODY BURIED ON DECEASED	LEFT, NAME (Last,	, first, middle initial)	RANK	SERIAL No.	ORGANIZATIO	ON GRAV	Æ No.
							:
				CEDIM No	ODCANIZATIO	ON LCDAI	/E NO
BCDY BURIED ON DECEASED	RIGHT, NAME (Las	st, pret, middle initial)	RANK	SERIAL No.	ORGANIZATIO	JA GRA	Æ No.
SIGNATIVE OF PERSON VE	BERING REPORT		SIGNATURE	OF GRS OFFICER VERIF	 (ING_REPORT	1	 _
9/200	13-1			a Par		-	
EDNARU L. B.	RUNCHL, R	A	JHARL.	S A. MAYLER,	Ist Lt.,	CHC	
				<u></u>			

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.

	Section 5.—I	NIDENTIFIE	D REMAINS								
LEFT LITTLE FINGER	social secur	eat care will I in anatom ity number; Icles, and ta	; position o nks	t body tou	nd in airplanes, ve	hicles, and tanks; and	tity of unidentified re- r," such as shoe size, serial numbers of air- ers and thumbs in the condition of each and				
R	every tooth accomplishe	will be indicated if one or	or as many as possible. If no fingerprint or prints can be secured, the condition of each and will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be if one or more fingerprints are secured.								
LEFT RING FINGER	HEIGHT	WEIGHT	COLOR O	FEYES	COLOR OF HAIR	BIRTHMARKS, SCAR	S, OR TATTOOS				
	WEAPON AND	SERIAL No.	,	LAUNDRY	MARKS	WHERE BODY WAS I	BURIED OR FOUND				
LEFT MIDDLE FINGER	OTHER IDENT	IFICATION CL	UES	1							
•											
LEFT INDEX FINGER											
THUMB							į				
RIGHT											
EM											
RIGHT INDEX FINGER							,				
М			<u> </u>								
RIGHT MIDDLE FINGER	FURNISH SKE	TCH AND MA	P REFERENC	CE AND COO	ORDINATES FOR BURI	AL IN OTHER THAN ESTA	BLISHED CEMETERY				
RIGHT RING FINGER	REMARKS:										
							:				
RIGHT LTTLE FINGER						*					
							,				

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)	REPORT OF (AR 30-1810 as		K STORAGE	DATE	OF REPORT	
Imprint Identification Tag If Possible.	Section 1.—IDENTIFICATION.			<u>' </u>		
DO NOT TYPE	NAME (Last, first, middle initial)	<u></u>		SERIA	L No.	
643	UNKNOWN X-677 US	AF Cem Mar	nila #2, P. I			
1/	(Manila Maus X-4				ıknown	
١	GRADE	ORGANIZATION		BRAN	CH OF SERVE	CE
l(o)		1				
· \	Unknown	Unknow	n	Üì	ıknown	
	RACE	RELIGION		IF OTHER TH		D, GIVE
	White	Unknov	ım			
PLACE OF DEATH	CAUSE OF DEATH		-	DATE	OF DEATH	
POW Camp, Cabanatuan,						
Luzon, P. I.	Unkn	own		Մո	ıknown	
EMERGENCY ADDRESSEE (Name, relationship, an	d address)					
	Unknown					
IDENTIFICATION TAGS FOUND ON BODY	IF NO TAGS FOUND ON BODY.	DESCRIBE MEANS	OF IDENTIFICATION (If unidentified, fil	l in section 3	on reverse)
(1, 2, or none)			•			
None						
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no)						
Yes (2)						
LIST PERSONAL EFFECTS FOUND ON BODY AND	DISPOSITION OF SAME					
Section 2.—BURIAL. If other than in estab NAME, NUMBER, COORDINATES, AND LOCATION	N OF CEMETERY	ch and map coore	dinates on reverse.			0
U. S. Army Mausoleu	m, AGRS-PAZ					Casket
DATE OF BURIAL HOUR	BURIED IN (Shroud, blanket, or s	name of other)	TYPE OF GRAVE	MOCKWIK	ROWNX	ERRIE NA
				360 - 2 3	0	200
3 Nov 50	Final Type Cask				Section	oos np
WAS THIS A REBURIAL? IF A REBURIAL, (Yes or no)	INDICATE NAME, NUMBER, COOR	DINATES OF PREV	IOUS CEMETERY, AND			Crypt
i '	M	ד ד		XXXXXXXX		
	Mausoleum Manila,		TION TARE NOT WEED	802	K	3533
TYPE OF RELIGIOUS PERSON CONDUC CEREMONY	CTING BURIAL RITES	CONTAINERS	TION TAGS NOT USED BURIED WITH BODY	, DESCRIBE IDE	NITFICATION	N DAIA AND
		_				
	TIFICATION TAG ATTACHED TO RKER (Yes or no)					
! `						
BODY BURIED ON DECEASED LEFT, NAME (Last	t, first, middle initial)	RANK	SERIAL No.	ORGANIZATIO	ON GRAV	/E No.
Not applicable due to				D =15	1 - The	XL.
BODY BURIED ON DECEASED RIGHT, NAME (La	··· ·	RANK	SERIAL No.	ORGANIZATIO	ON / GRAV	/E N O.
				16.2%	to ky	
manner of storing cas	kets.	_		1 1200	<u> </u>	<i></i>
SIGNATURE OF PERSON PREPARING REPORT		75	GRS OFFICER VERIFY	haif.	(La	/ د
_ /	Asst.	STANI	LEY E MAY, M	iajo <i>z</i> y, QM(7/	
	nal for U.S. and allied dead, s			make to the	Questerme	ster General

	Section 3.—-L	INIDENTIFIED	REMAINS	<u> </u>					
LEFT LITTLE FINGER	mains. Fil social secur	eat care will I in anatomi ity number;	cal charac position o	cteristics b of body fou	elow, and nd in airpl	any other c anes, vehicle	for the future ide lues under ''Otl es, and tanks; an . Imprint all fir an be secured, th diagram below.	ner, such as s d serial numbe	rs of air-
RIN	every tooth accomplishe	will be indiced if one or r	ated on the more finge	ne tooth ch erprints ar	art in acco e secured.	rdance with	diagram below.	Tooth chart w	ill not be
LEFT RING FINGER	HEIGHT	WEIGHT	COLOR O	F EYES	COLOR OF	HAIR	BIRTHMARKS, SC	ARS, OR TATTOOS	,
	WEAPON AND	SERIAL No.	<u> </u>	LAUNDRY	MARKS		WHERE BODY WAS	S BURIED OR FOU	IND
MIDDLE									
LEFT MIDDLE FINGER	OTHER IDENT	IFICATION CL	UES				•	· · · · · · · · · · · · · · · · · · ·	
INDE									
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			殿			4		DD 34	
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		Teetil	18	<u> </u>		8		VOI	7 8
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	CROWNED	TEETH	()po	RCELAIN C		16 (B			16
RIGHT INDEX FINGER			Vust	OLD CROV	VN	14	LOWER	14	
FINGER	BRIDGE	work	ST V	GOLD	BRIDGE	13			
RIGHT MIDDLE FINGER	FURNISH SKI	ETCH AND MAR	REFERENC	CE AND COO	RDINATES F	OR BURIAL IN	OTHER THAN ESTA	ABLISHED CEMET	ERY
FINGER									
RIGH RING FIN							A BOLL TO		_
MGER	REMARKS:					~085 di	3 - 1 /	<u> </u>	
C//5~						So. C.	•		
RIGHT TE FINGER					8000			·	

WD QMC FORM 1042		DEDODT A	C MATERIAL	T STORAGE	DATE C	F REPORT
(Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		(AR 30-1810				
Imprint Identification	Tad If Possible					
DO NOT TY		NAME (Last, first, middle initia	D		SERIAL	No.
		UNKNOWN 1-677 U		nila #2, P. I	• 175	knowa
l. ((Manila Maus X-	_ 			H OF SERVICE
	0	GRADE	ORGANIZATION		BRANC	H OF SERVICE
\		Unknown	Unknow	MIT.	מט	known
		RACE	RELIGION		IF OTHER THA	N U. S. DEAD, GIVE UNTRY
		White	Unkner	WA .		
PLACE OF DEATH		CAUSE OF DEATH	· · · · · · · · · · · · · · · · · · ·		DATE C	F DEATH
POW Camp, Cabe	na wan,	Unk	200WD		Un.	known
EMERGENCY ADDRESSEE (N	ame, relationship	o, and address)				
		Unknown				
IDENTIFICATION TAGS FOUR	ND ON BODY	IF NO TAGS FOUND ON BODY	, DESCRIBE MEANS	OF IDENTIFICATION (If unidentified, fill	in section 3 on reverse)
(1, 2, or none)						
WERE SUBSTITUTE TAGS PR	OVIDED?(Vee or	70)				
	0110201(160 0)					
Yes (2)						
LIST PERSONAL EFFECTS FO	YUND ON BODY	AND DISPOSITION OF SAME				
		None				
Section 2 —RIPIAL If or	her than in es	stablished cemetery, furnish ske	tch and map coor	dinates on reverse.		,
NAME, NUMBER, COORDINA		···		<u> </u>		
TT @ A	w Manaal	oum, AGRS-PAS				Casket
	_			TYPE OF GRAVE	3057-05	XXXXX XXXXXX
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, o	name of outer)	MARKER	25, 110	
8 Nov 50		Final Type Cas		<u> </u>		Section 266
WAS THIS A REBURIAL? (Yes of no)	IF A REBURI	AL, INDICATE NAME, NUMBER, COC	RDINATES OF PREV	/IOUS CEMETERY, AND	LOCATION OF GR	ABay Crypt
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BODY BURIED ON DECEASE			RANK	SERIAL No.	ORGANIZATIO	N GRAVE No.
		a a brade				
manner of			SIGNATURE	GRS OFFICER VERIFY	ING REPORT	
SIGNATURE OF PERSON PR	EPARING DEPOF	*************************************	SIGNATURE OF	why & 1	weif	
LEROY F. TO	rner, ad	m. Asst.	STAN		ager, que	. <u></u>
DISTRIBUTION OF REPO	RT: Signed or	riginal for U.S. and allied dead, Copies for retention in theater a	signed original a	nd by copy for enem	Vdead, to the	Juartermaster Genera
through Headquarters	AKS Officer.	Copies for retention in theater a	o prescribed by th	TOUR OF COURTINGIAMES.		

	Section 3.—L	JNIDENTIFIED	REMAINS	<u> </u>				
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FILE IDENTIFICATION TOPPER

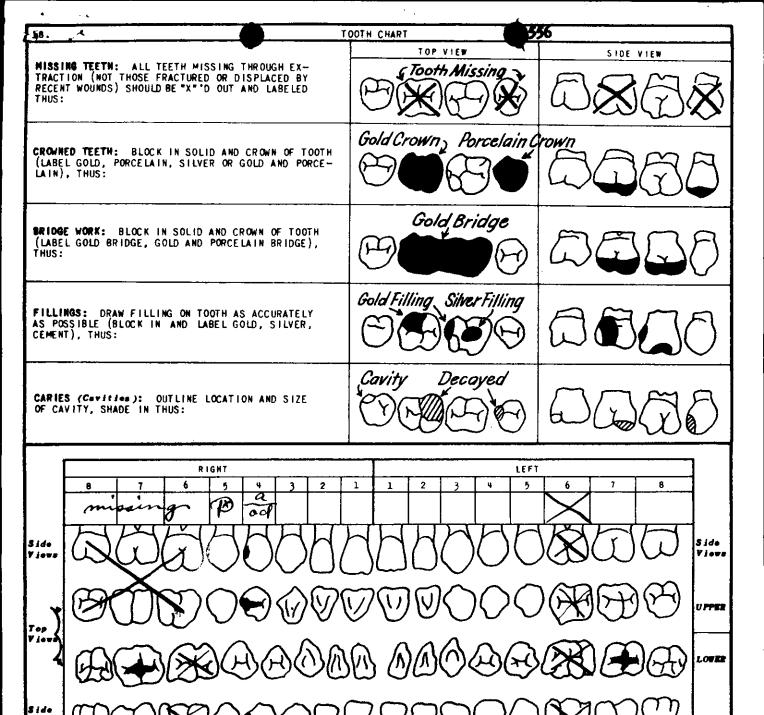
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QNC FORM 1121	

7	DENTIF	ICATION DATA			 -
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293 7 Like Mis	ane a # 2	SANGER BAY	CRYPT	DISINTERMENT	STUNASENT
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HOME

APPROVED UNITENTIFIABLE

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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."

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Maxilla from ${\bf R6}$ - ${\bf R8}$ missing. We lesse teeth are found with remains.

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CERTIFIED TRUE COPY:

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I S PANOPIO

s/ Riverd F. Merierky

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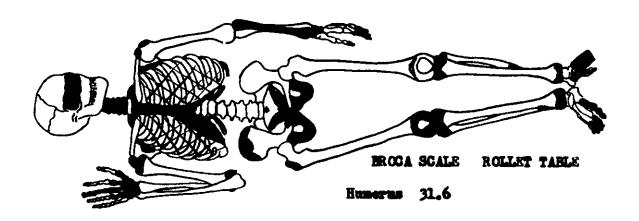
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MASS BURIAL CERTIFICATE (IF APPLICABLE)
(Wherein segregation in whole or parts is impossible)

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

An embessed tag received with remains with an inscription mentioned on item 12. (See item 12 to obtain the inscription.) This tag was placed with remains.

This remains is one of the group disinterred from Grave 704, Row 0, Plot 7 POW Gamp, Cabanatuan, Luxon, P.I. Approximate weight of remains 9 lbs. Giroumference of skull 21 inches.

CERTIFIED TRUE COPY.

L S PANOPIO let LA Tuf

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

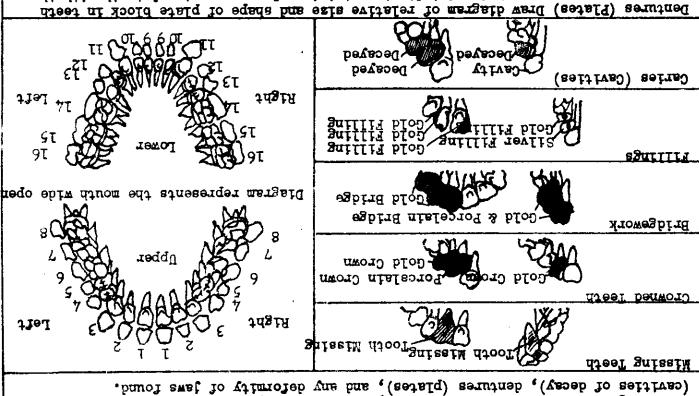
SIGNATURE

p/ MDWARD F MORIARTY CIP Lab Manila, P.I.

s/ Edward F. Moriarty

- /rbss				<u> </u>		
OHCFORM 1044 Rev. 1 Apr. 1945		RESTR	RICTED	•		
	isin terment f o	r i dentifi (CATION	16 D	oc. 47	•
1. Remains of (Name)			······································	Serial N	umber	
UNEMOWN X-67	7				-	
Grade Or	ganization					· · · · · · · · · · · · · · · · · · ·
	•					
.Name, Number and I	ocation of Ce	metery		Plot	Row	Grave No.
USAF Com Mani	le No. 2 Luser	n P. I.		2	18	2216
2.Date of Disinterme						
16 Dec. 47						
	,	 Skjeletal r	engins.			
4. What Identification	on Found at Ti	ime of Disi	nterment: On	Marker		
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On Remains		 	- · · · · · · · · · · · · · · · · · · ·	,		
	One	(1) substit	ate tag.			
What Identification	on Used Upon I	deinterænt	: On Marker	- · · · · · · · · · · · · · · · · · · ·		
	•					
On Remains						
5.Signature of Offi	cer Surpervisi	ing prejnte	rment and he	nterment.		
	W.	ARD C. STEP	HERSON, 1et	Lt., QMC		

1. Give all information and description on dental chart as nearly correct as the condition of the body will allow. There are X 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 incleors (cutting) teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars(principal chewing teeth), an examination should be made and findings charted to cover the cipal chewing basic conditions: lost teeth, crowned teeth, bridgework, fillings, caries following basic conditions: lost teeth, crowned teeth, bridgework, fillings, caries (cauties of decay), dentures (plates), and any deformity of laws found.



attached and indicate retaining clasps on natural teeth with the

34880-41

extreme A

word "clasp".

WD QMC FORM 1042 DATE OF REPORT REPORT OF INTERMENT (Rev. 1 Apr. 1945) Dersedes GRS Form 1) (AR 30-1810 and AR 30-1815) 1 Feb 46 Imprint Identification Tag If Possible. Section 1 .- IDENTIFICATION. DO NOT TYPE NAME (Last, first, middle initial) Henry J.R. SERIAL NO. UNKNOWN 1-677 (SLITH, Harry J.) (Formerly UNKNOWN C-201 Cabanatuan Cemetery) 6671009 J.R ORGANIZATION BRANCH OF SERVICE 0 Cpl 59 CAC Army RACE RELIGION IF OTHER THAN U. S. DEAD, GIVE PLACE OF DEATH CAUSE OF DEATH DATE OF DEATH J.R. POW Camp Cabanatuan. Luzon, B. I. Beri-beri 1 Nev 42 EMERGENCY ADDRESSEE (Name, relationship, and address) William H. Smith (F) Rt #2, Hannibal, New York. IDENTIFICATION TAGS FOUND ON BODY IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on recerse) (1, 2, or some) Ten (10) bodies found in common grave, two (2) of which None were identified and eight (8) unidentified:-WERE SUBSTITUTE TAGS PROVIDED? (Yeq of 100) Pfc Winters, Charles B. 6665117 808 MP Pvt Calkins, William K. 19020998 Yes (2) -(See Sec 3 reverse side)-LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME None Section 2.—BURIAL. If other than in established cometery, furnish sketch and map coordinates on reverse NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY USAF Cemetery Manila #2. Luson, P.I. DATE OF BURIAL HOUR BURIED IN (Shroud, blanket, or name of ether) TYPE OF GRAVE PLOT No. GRAVE No. ROW No. 0900 Shelter Half 18 2246 9 Jan 46 Cross WAS THIS A REBURIAL? IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE 45.7-70.9 1/50.000 PLOT No. ROW No. Yes POW Camps I & II Cabanatuan Cemetery, Lusen, P I IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY PERSON CONDUCTING BURIAL RITES TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIED WITH IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes Yes ORGANIZATION GRAVE No. BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) RANK SERIAL NO. UNKNOWN X-676 (DOYASH, Harold W.) Pre DSMC 2249 (Formerly UNKNOWN X-C-200 (Cabanatuan Cem) **ORGANIZATION** GRAVE No. BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) RANK SERIAL NO. UNKNOWN X-678 (HENNESSY, Harland) 2247 (Formerly UNKNOWN C-202 Cabanatuan Cemetery 32092573 SIGNATURE OF PERSON PREPARING REPORT SIGNATURE OF GRS OFFICER VERIFYING REPORT s/t/ E. M. MOORE, 1st Lt., QMC s/t/ R. C. BARRETT, T/4, GRS.

RESTRICTED

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.

	Section 3	HDENTIFIED	REMAINS.		ye in a mayes a con-				
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~	mains. Fill	in anatomic	cal charac	teristics b	elow, and	any other c	lues under	"Other," suc	h as shoe size, numbers of air-
m ze	planes, vehic	les, and tar	nks.						
, ,	(b) A fi	ngerprint, o	r prints, a	re the mo !e ∵ll€no	st valuábk Modárski	e of all clues.	. Imprint	all fingers and	thumbs in the
	every tooth y	vill be indic	ated on th	e tooth ch	art in acco	ordance with	diagram be	low. Tooth c	hart will not be
<u> </u>	accomplished	if one or n	nore finge	rprints ar	e secured.		· •		
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HEADQUARTERS CENTRAL IDEMPIFICATION FOINT AMERICAN CRAVES REGISTRATION SERVICE-PHILIPMON

APO 900 30 July 1948

The following cases are those distingered from a common grave at Cabanatuan Prison Camp - Grave \$704, Row #0, Plot #7. The unknown number are AGRS Mausoleum numbers:

UNKNOWN X-24-4A

" X-24-54B

" X-4551
" X-4552
" X-4553
" X-4554
" X-4555
" X-4556
" X-4557

O'HARA, Thomas W. BLAHO, Paul

(HITEACT CHEX) PHATOSTAT CHEX OF CASANATUAN POR CAMP PRATH PLEORY

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RESTRICTED 704 DATE OF REPORT WD QMC FORM 1042 REPORT OF INTERMENT (Rev. 1 Apr. 1945) (Supersedes GRS Form 1) STORAGE (AR 30-1810 and AR 30-1815) 15 July 1948 Imprint Identification Tag If Possible. Section 1.--IDENTIFICATION. DO NOT TYPE NAME (Last, first, middle initial) SERIAL NO. WENCH I-4556 (Fernerly WK I-677. USAF Cemetery Mendle, #2, Luson, P.I.) **Thirteen** GRADE **ORGANIZATION BRANCH OF SERVICE** O Unknoun **linknown** Unknown RACE RELIGION IF OTHER THAN U.S. DEAD, GIVE NAME OF COUNTRY **Hakneum** Baknowa PLACE OF DEATH CAUSE OF DEATH DATE OF DEATH POW Comp. Cabanatuan. Luson, P.I. **Baknaun Salences** EMERGENCY ADDRESSEE (Name, relationship, and address) IDENTIFICATION TAGS FOUND ON BODY IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reserve) (1, 2, or none) Lone WERE SUBSTITUTE TAGS PROVIDED? (Yes of 100) See Remerks Yes (2) LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME Yone Section 2.—BURIAL. If other than in established cometery, furnish sketch and map coordinates on reverse. NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY AGRS MAUSCLEUM, MANILA, P. L O. ROW NO. TYPE OF GRAVE MARKER PLOT No. GRAVE No. DATE OF BURIANTE HOUR BURIED IN (Shroud, blanket, or name of other) CRYFT 1000 802 3 June 1948 3533 Casket **Ecne** IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE WAS THIS A REBURIAL?
(Yes or NO) RESTUREL PLOT No. ROW No. GRAVE No. USAF Cemetery Manila #2, Luxen, P.I. Tes IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY TYPE OF RELIGIOUS CEREMONY PERSON CONDUCTING BURIAL RITES IDENTIFICATION TAG ATTACHED TO MARKER (Yes or 100) IDENTIFICATION TAG BURIED WITH .
BODY (Yes or no) Tes BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) RANK SERIAL No. ORGANIZATION 36*5*88*5* PEARSON, William

V CAPTIO T/5 CMC

L. S PAROPIO, 1st La 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 dead quarters GRS Officer. Copies for retention in theater as prescribed by theater commander.

COE Ragan

SIGNATURE OF PERSON PREPARING REPORT

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)

RANK

ORGANIZATION

<u>3531</u>

SERIAL No.

3830355 | SIGNATURE OF GRS OFFICER YERIFYING REPORT

		Section 3.—U	NIDENTIFIED	REMAINS.		······································		# <u></u>		
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GRAVES

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M.I. reak K-677 (Manila

UNCLASSITISD

J. A. SELYE CUTC. WC. NO MIT

WE LE STROKER EXP 74100 MA PAR SAT.

BASIC: Ltr fr ASF, 00MG, Wash. 25, D.C. dtd 30 Apr 46, File SPQYG 293, Unknowns U 1274 & U 1335 (Manila No. 2), P.I., Subj. Edentification of Unknown Deceased

GS 2711 293

3d Ind.
HEAD QUARTERS, ANTRICAN CRAVES RUGISTRATION SERVICE AREA COMMAND,
PACIFIC THEATER, APO 707, 3 June 46,

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

1. Attention is invited to 2d Indorsement.

2. A certified true cony of Corrected Report of Reinterment (Incl No. 5) indicates a new X number (X-3156) to the remains tentatively known as Erwin, Kenneth G.

Colonel. OMC

Area Graves Registration Officer

5 Incls:

Incls 1 - 4 n/c

Incl 5 - w/d

Incl 6 Cert. True Cy of Rpt of Reint. (Added).

2) pri 1/21/0 cm

<u> </u>						·
	IDENȚIFI	GATION D	ATA			•
. REMAINS OF UNKNOWN					2. DATE OF TE	
	(Formerly X-677	Manila	#2)		22 Marc	h 1950
. NAME OF CEMETERY	-	4. PLOT	5. ROW	6. GRAVE	1	TE OF
AGRS Mausoleum					DISINTERMENT	REINTERMENT
Manila, P.I.						
	PHYS IC	AL DESCRIPTION	<u> </u>	Age:	22 -2 8	<u> </u>
B. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR		age.	11. RACE	
UTD	5'7 5/8"	li i	rown		White	
2.GIVE DESCRIPTION OF ANY O		<u>L</u>			<u> </u>	· · · · · · · · · · · · · · · · · · ·
•						
	,	NONE.				
	•	1 0 1 B				
3.GIVE DESCRIPTION OF TATTO	OS OR SCARS ON BODY AND/OR	SUCH INFORMA	ATION OBT	AINED FROM	OTHER SOURCES	
	k.					
		n o n e				
4. WAS BODY BURNED?	TO WHAT EXTENT?					
TES A NO	TO PHATE EN LATE.					
	TO WHAT EXTENT?					
TES THE	Bones are ero	ded				
6. DESCRIBE EVIDENCE OF HEA						
		N 0 N 13				

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 exemination when facilities are not available in the area)

NONE

APPROVED UNITENTIFIABLE

1 Leens Br 18 Jeh 52

mal # 7

		maxiiia
1	RIGHT	LEFT missing
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	maxilla missing	
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Top View		LOWER COMPANY OF THE PARTY LOWER
Side Viewz	MAMAGARA	ARRAMMA .
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DENTURES (Plates): DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAIN-

Haul R. Nichols

PAUL R NICHOLS . Chief, Ident. Section

172

19. BLACK OUT PARTS OF BODY NOT RECOMERED

Estimated height: 5'7 5/8"

MASS BURIAL CERTIFICATE (IF APPLICABLE) (Wherein segregation in whole or parts is impossible) 20 •

I CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS:

Femur

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

CEMTRAL DUN IFICATION COINT AGRE APO 900 NICHOLS FIELD, MASILA, 2.1.

. 22 steret 1950

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		X-673	>	a
	4.5	A=675	*	•
		-676	•	
	*	2-677		₩.
	:	67e	•	#

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

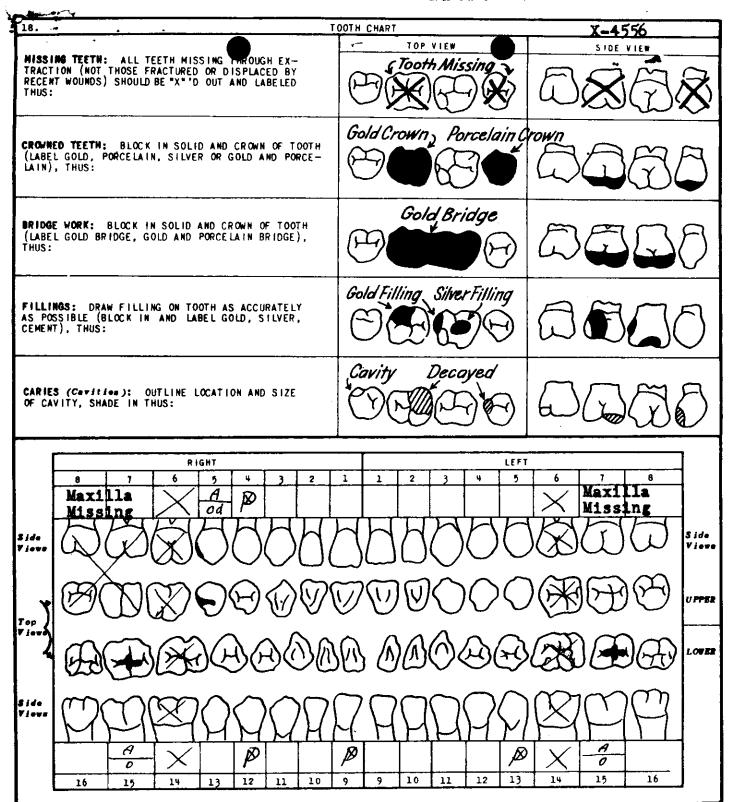
The facial portions of the cranto of all but AK .-6/5 are missing precluding an examination for broken noses. The portions of the mass bones present of UNK .--675 do not indicate that they have been broken.

The wrist and too bones of the eight (8) remains are largely missing, or so eroded, that no accurate determination of fractures of the wrists or amputation of the tees was passible.

Anthropologist

, ·						
	IDENTIFICS	ATION D	ATA			_
- REMAINS OF UNKNOWN					2. DATE OF RE	EPORT
UNKNOWN X-4	556 (Formerly UNK X-	-677 Ma	nila#	2)	10 Dec	1949
. NAME OF CEMETERY	// *	4. PLOT	5 ROW	6. GRAVE		ATE OF
				†	DISINTERMENT	REINTERMENT
AGRS Mausole	eum, Manila, P.I.					
		DESCRIPTIO)N AG	R: 26	_ 31	
ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. 0010	R OF HAIR	E: 26	II. RACE	-
UTD	51 7 3/8"		UTD		White	.
GIVE DESCRIPTION OF ANY	OFFICIAL IDENTIFICATION FOUND	WITH REMA	INS			
	NOI	N B				
		-				
GIVE DESCRIPTION OF TAT	TOOS OR SCARS ON BODY AND/OR S	SUCH INFORM	ATION OBT/	AINED FROM	OTHER SOURCES	5
	N O I	n B				
. WAS BODY BURNED?	TO WHAT EXTENT?					
YES NO	TO WHAT EXTENT?					
. WAS BODY MANGLED?						
	Some erosion of		<u>.8</u>			
. DESCRIBE EVIDENCE OF M	FEALED FRACTURES AND BONE MALFO	JRMA I LUNS				
•						
					•	
SERVICE, ETC. (If laun	OTHING, EQUIPMENT AND PERSONAL ndry marks are indistinct such ion when facilities are not ava	notation s	should be a	mede end s		
		_				
	N O I	NE				

Me (P)



DENTURES (Plates): DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAIN-

L7 and L8 are loose present with remains.

Haulf. Muhalo
PAUL R NICHOLS

Chief, Identification Section

7. 0

Estimated height: 5' 7 3/8".

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:

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

This is the remains of a male individual, of white ancestry, approximately 5' 7 3/8" tall, and in the estimated age grouping of from 26 to 31 years at time of death.

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 December '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

That On -

CENTRAL IDENTIFICATION POINT AGRE APO 900 NICHOLS FIELD, MANILE, P.I.

12 December 1949

PLAILE E CI

References this X-2354 Mensolems
This X-4551 thru X-4557

The above right (8) remains were examined simultaneously by me this date for proper segregation, and new MC Forms 1044 mere accomplished for rach remains. As requested, coreful examination was made for Tractures of waist, none and emputation of tees'; however, benes necessary for extablishing 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 segregated. Homes improperly associated were assigned GIL #522.

HOUNT B. FOZ

Anthropologist

		RESTR	CTED		()- (2050)		
(Rev. 1 Apr. 1945)		REPORT OF INTERMENT				OF REPORT			
(Rev. 1 Apr. 1945) (Supersedes GRS Form 1)			(AR 30-1810 and AR 30-1815)						
Imprint Identification	Ted If Possible	Section 1.—IDENTIFICATION.		 -].				
DO NOT TY		NAME (Last, first, middle initial)		Honey JR.	SERIA	L No.			
		UNKNON X-67'	7 (SMITH.	Harry J)			_		
	1	(Formerly UNKNOWN		•	ery)	667100	9		
م	~ 1	GRADE J.A.	ORGANIZATION		BRAN	CH OF SERVI	CE		
	0)	Ext CPI	59	CAC		Army			
		RACE	 Religion		IF OTHER TH	AN U.S. DEA	D GIVE		
				i	NAME OF CO	DUNTRY			
				- 					
PLACE OF DEATH POW Camp Cab	anatuan.	CAUSE OF DEATH	76	ξ.	DATE	OF DEATH	j R		
Luzon, P I		Beni-beni			1	NOU 4	2		
EMERGENCY ADDRESSEE (No	ıme, relationship, ar		DENI	> R			<u> </u>		
				1,8	مسما	k			
William H	· SmiTh	(F) RT	#2 HO	nnibal, N	ew Jor	· //.			
IDENTIFICATION TAGS FOUN (1, 2, or none)	D ON BODY	I IF NO TAGS FOUND ON BODY, D	ESCRIBE MEANS O	fidentification (1) d in common e	unidentified, fil	l in section I	on reverse)		
None		were identified				une (2)	· OL ·MILE		
WERE SUBSTITUTE TAGS PRO	OVIDED?(Yes or no)	Pfc W	inters, Ch	arles B. 666	5117 80	08 MP			
v /	2)	Pvt Calkins, William K. 19020998 QMC							
Yes (<u>~)</u>	-(See Sec 3 reverse side)-							
LIST PERSONAL EFFECTS FO	UND ON BODY ANI	D DISPOSITION OF SAME							
Auc 576		None	e						
Section 2.—BURIAL. If of	her than in estab	lished cemetery, furnish sketcl	and map coordi	nates on reverse.					
NAME, NUMBER, COORDINAT	ES, AND LOCATION								
		USAF Cemetery Man	ila #2, Lu	zon, F I					
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or no	ame of other) TYPE OF GRAVE		PLOT No.	ROW No.	GRAVE No.		
9 Jan 46	0900	Shelter Hal	f MARKER Cross		2	18	2246		
						<u> </u>			
WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL,	INDICATE NAME, NUMBER, COORD 45.7-70.9 1	/50.COC	OUS CEMETERY, AND LO		RAVE ROW No.	Longue No		
Yes	FOW Camp	os I & II Cabanatua		PLOT No.	_				
TYPE OF RELIGIOUS	PERSON CONDUC	CTING BURIAL RITES	IF IDENTIFICATION	ON TAGS NOT USED, JRIED WITH BODY	DESCRIBE IDE	NTIFICATION	DATA AND		
CEREMONY		•	CONTAINERS BO	DRIED WITH BODT					
							•		
BODY (Yes or no)	MAI	TIFICATION TAG ATTACHED TO RKER (Yes of 710)							
Y e s		Yes							
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)			RANK	SERIAL No.	ORGANIZATIO	N GRAV	E No.		
UNKNOWN X-676 (DOYASH, Harold W)			Pfc		USMC		2245		
(Formerly UNKNO.N C-200 Cabanatuan Cemetery) BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)			RANK	SERIAL NO.	ORGANIZATIO		GRAVE No.		
UNKNOWN X-678 (HENNESSY, Harland)					JAGMILATIC	1			
(Formerly UNKNO	Pvt	320925 73		~	2247				
SIGNATURE OF PERSON PRE			ند . ا	RS OFFICER VERIFYIN	_				
	CAD DIE	ent to	,	M. MOORE, 1	et T+	OMC			
н. С.	BARRETT,	1/45 GID.	l E.	L CARONE .M	و مالم ال	ء بالتلايد			

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.

	Section 3. TIDENTIFIED REMAINS.							
LEFT LITTLE FINGER	INSTRUCTIONS: (a) Great care will be taken to record the most minute clues for the future identity of unidentifi mains. Fill in anatomical characteristics below, and any other clues under "Other," such as shot social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers planes, vehicles, and tanks. (b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each proceedings and the test to the test to the post of the desired procedure.							
RING FINGER	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							
MIDDLE FINGER	WEAPON AND SERIAL NO. LAUNDRY MARKS WHERE BODY WAS BURIED OR FOUND OTHER IDENTIFICATION CLUES							
LEFT INDEX FINGER	FILLINGS SILVER FILLING GOLD FILLING 3 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3							
EW/NH1	CAVITIES CAVITY DECAYED UPPER 15 7							
RIGHT THUMB	TOOTH MISSING DIAGRAM REPRESENTS THE MOUTH WIDE OPEN SF TEETH CROWNED TEETH 16							
RIGHT INDEX FINGER	BRIDGE WORK GOLD BRIDGE GOLD BRIDGE 15 LOWER 14 14 15 10 10 10 10 10 10 10 10 10							
RIGHT MIDDLE FINGER	FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY							
RIGHT RING FINGER	Pfc Fruntmyer, Iloyd R. 19048914 7 MAT Cpl Erwin, Kennith G. 18049796 59 CAC Cpl Clark, Walter 19053642 CMC REMARKS: Pfc Doyash, Harold W. USMC							
RIGHT LITILE FINGER	Pvt Smith, Harry J. 6671009 59 CAC Pvt Hennessy, Harland, 32092573 were buried in this grave. Individual identification impossible.							

	Rea									
WO GMC FORM 1042		DEDORT OF	DATE OF R	DATE OF REPORT						
(Rev. 1 Apr. 1966) (Supersedes GRS Form 1)			REPORT OF INTERMENT							
••••••		(AR 30-1810 ar	id AR 30-181	5)	Tre	1 Feb 46				
Imprint Identification Tag If Poissible. Section 1.—IDENTIFICATION.										
DO NOT TY			SERIAL NO.	•						
	(SMITH, Har	ту J .)								
/	1	(Formorly Unalmy)	1 X±C _201 (Cabanatuan C	em.] 667	6671009				
\	1	1	ORGANIZATION	<u> </u>						
	\sim 1	GRADE V.22	ORGANIZATION		SAME OF	BRANCH OF SERVICE				
1	01	2√ € € /	se se	59 C4C		Army				
[\	- /	1			<u></u>					
\		RACE	Ì	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY						
			ł							
		<u> </u>	<u> </u>	<u></u>						
PLACE OF DEATH		CAUSE OF DEATH \vee . ρ .			DATE OF D	EATH V.R.				
FOI Camp Caban	•	70								
Luzon, P.1	<u> </u>	Berra	seri		/ N	v. 42				
EMERGENCY ADDRESSEE (No	me, relationskip, en	d address)			. , &	,				
		,	_	• 4						
И	Villiam 1	H. Smith (F) RT	: #2, Ha.	nnibal, N.	York					
IDENTIFICATION TAGS FOUN		IF NO TAGS FOUND ON BODY I	ESCRIBÉ MEANS O	F IDENTIFICATION (If	unidentified, fill in s	ection 3 on reverse)				
(1, 2, or none)		Ten (10) bodie	s found in	common arava	two (2	of which				
None		were identified a								
WERE SUBSTITUTE TAGS PRO	VIDED?(Yes or se)	·								
WEIZE SOLD (III OI E III OO I III O	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Fyt Callins,								
Yes ((a)		c 5 revers		,					
LIST PERSONAL EFFECTS FOL			10 7 10 101 2							
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				IN ICK H	EURON BURON	\				
		1.one		Captain	C. æ					
Coulon 9 SUBLEL Trace	45	lished cometery, furnish sketc	h and rosn poordi	nates on tereses.	· · · · · · · · · · · · · · · · · · ·					
			Tana diap coordi							
NAME, NUMBER, COORDINAT	ES, AND LOCATION	OF CEMETERY								
ł		UAF Celletely	larila d2.	-uzon. P-1	•					
	<u>,</u>	<u></u>		· · · · · · · · · · · · · · · · · · ·	.,	un longue				
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or n	ame of other) TYPE OF GRAVE MARKER		PLOT No. ROV	V No. GRAVE No.				
O Tun U	6 96 0	Shelter la	lf Oross		2	18 2246				
9 Jun 46	1 1	1	<u> </u>			<u></u>				
WAS THIS A REBURIAL?	IF A REBURIAL	INDICATE NAME NUMBER COORD	DINATES OF PREVIO	OUS CEMETERY, AND LO	CATION OF GRAVE					
(Yes of no)	10% Camps	s 1 &11 Cabanatuan			PLOT No. RO	W No. GRAVE NO.				
Yes		45.7 - 79.	.9 1/50,000		7	0 704				
TYPE OF RELIGIOUS	PERSON CONDUC	CTING BURIAL RITES	IF IDENTIFICATI	ON TAGS NOT USED, I	DESCRIBE IDENTIF	CATION DATA AND				
CEREMONY	1		CONTAINERS B	KIED WITH BOD!						
IDENTIFICATION TAG BURIE		TIFICATION TAG ATTACHED TO								
BODY (Yea or mo)	MAI	RKER (Yes or no)								
Yes		<i>Y</i> as								
BODY BURIED ON DECEASED	LEFT. NAME (Law	t. first. middle initial)	RANK SERIAL NO.		ORGANIZATION	GRAVE No.				
ULICIONI X- (7										
(Formerly UNIXAN X-C-200 (Cabanatuan Com. 0			Pro		CAC	2247				
BODY BURIED ON DECEASED			RANK	SERIAL NO.	ORGANIZATION	GRAVE No.				
UNLINOW 3-678										
(Formerly UBLIC.	F-1.+	20000572		2247						
•										
SIGNATURE OF PERSON PRE	SIGNATURE OF GRS OFFICER VERIFYING REPORT									
/s/ B. C. Barrett				/s/ G. 1. 10010						
/t/ R. C.	787 Z. II. MOORE, 1040, 4.3.									
DISTRIBUTION OF REPOR	T: Signed origin	nal for U.S. and allied dead, a	aned original and	one copy for enemy	dead, to the Quai	termaster General				
DISTRIBUTION CF 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.										

			MES I	RICI	ED.				_	
	Section 3.	NIDENTIFIE	REMAINS							
LEFT LTTLE FINGER	INSTRUCTIONS: (a) Great care will be taken to record the most minute clues for the future identity of unidentify mains. Fill in anatomical characteristics below, and any other clues under "Other," such as sho social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers planes, vehicles, and tanks. (b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will accomplished if one or more fingerprints are secured.								ns shoe size, inbers of air-	
LEFT RING FINGER	HEIGHT WEIGHT COLOR OF EYES COLOR OF HAIR						BIRTHMARKS, SCARS, OR TATTOOS			
LEFT MIDDLE FINGER	WEAPON AND	SERIAL NO.	JES	LAUNDRY	MARKS		WHERE BODY Y	WAS BURIED OR	FOUND	
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RIGHT INDEX FINGER	BRIDGE	ORK S		GOLD BI	H	15 () 14 (13			}15 4	
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RIGHT RING FINGER	REMARKS:				•		·	-	· ,	
RIGHT LTTLE FINGER	_ • •	* *	1,0°\	, *	•			* - * *' - V		