

FILE IDENTIFICATION TOPPER

FILE NUMBER

SUBJECT

293 unk Manila Cenn #2 X-699

Also Manila Mass X-4420

Formerly Cabanatuan C. 223

rfm

Interred 3 April 1950
L 9 6 Ft. McKinley

**DISINTERMENT DIRECTIVE
PREPARED BY PHILCOM**

1

Carl R. H. Mark
CARL R. H. MARK

Cemetery Superintendent

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

7747 81268

DATE

29 03 50
DAY MONTH YEAR

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
UNKNOWN	I - 699				

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS
NAAF CEMETERY MANILA NO. 2, P. I.	2	18	2238	7761 80 CODE DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN

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

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISINTERRED
I - 699				30 Mar 1950
IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY	
<input type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER			PAUL R NICHOLS Embalmer NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
Shelter Half	Skeletal

OTHER MEANS OF IDENTIFICATION

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

REMAINS PREPARED AND PLACED IN CASKET

DATE 30 Mar 1950 BY PAUL R. NICHOLS

CASKET SEALED BY PAUL R. NICHOLS
EMBALMER (Signature) *Paul R Nichols*
PAUL R NICHOLS

CASKET BOXED AND MARKED SHIPPING ADDRESS VERIFIED BY

DATE 30 Mar 50 BY RAYMOND H TANGUAY, Sgt 1c RA L. W. RICHARDSON, M/Sgt., 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

NAT
FILE
RECORDS ANNOTATED
DATE 27 Apr 1950
NAME G. Pyles
Capt. BR. M. D. W.

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM

AGS MAUSOLEUM

TO

US MILITARY CEMETERY

KIND OF CONVOYANCE

TRUCK

NAME OF CONVOYER

SIGNATURE OF SHIPPER

Overstrom

DATE

SIGNATURE OF RECEIVER

DATE

APR 3 1950

2. SHIPPED

FROM

KIND OF CONVOYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

DATE

3. SHIPPED

FROM

KIND OF CONVOYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

DATE

4. SHIPPED

FROM

KIND OF CONVOYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

DATE

5. SHIPPED

FROM

KIND OF CONVOYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

DATE

6. SHIPPED

FROM

KIND OF CONVOYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

DATE

7. SHIPPED

FROM

KIND OF CONVOYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

DATE

3

DISINTERMENT DIRECTIVE
PREPARED BY PHILCOM

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7747 81268

DATE
29 03 98
DAY MONTH YEAR

NAME
UNKNOWN I - 699

SERIAL NUMBER GRADE ARM RACE RELIGION

CEMETERY
UNAF CEMETERY MANILA NO. 2, P. I.

PLOT ROW GRAVE DISPOSITION OF REMAINS
2 18 2238 7701 80
CODE DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
**UNITED STATES MILITARY CEMETERY
FT. W. W. 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
 REMAINS
 MARKER
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

RECORDS ANNOTATED
DATE **29 May 98**
NAME **[Signature]**
BR. MEM. DIV.

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

HEADQUARTERS
PHILIPPINE ZONE
AMERICAN GRAVES REGISTRATION SERVICE

10 Feb 1950

Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 699, Plot 2,
Row 18, Grave 2238, USMC USAF Cem Manila #2, 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 2/21/50 0000
Not identifiable from
information presently
available

2/28/50
G. C. King, ID. G.

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN X-4420 (Formerly X-699, USAF Cem. Manila #2, Luzon, P.I.)			2. DATE OF REPORT 10 Feb 1950		
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	HANGAR	BAY	CRYPT	DISINTERMENT	REINTERMENT
	802	E	1495		

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT U T D	9. ESTIMATED HEIGHT U T D	10. COLOR OF HAIR U T D	11. RACE U T D
-------------------------------------	-------------------------------------	-----------------------------------	--------------------------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

N O N E

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

U T D

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

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

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

U T D

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)

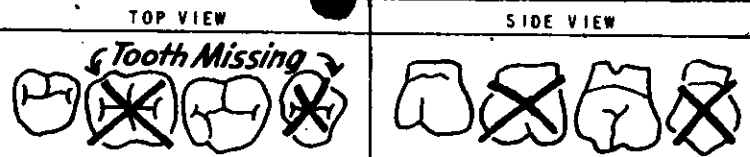
N O N E

ALL INFORMATION CONTAINED
 HEREIN IS UNCLASSIFIED
 DATE 10/15/01 BY 9803 RDD/STP

Jan 20

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:



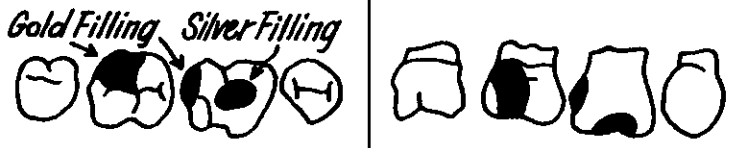
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:



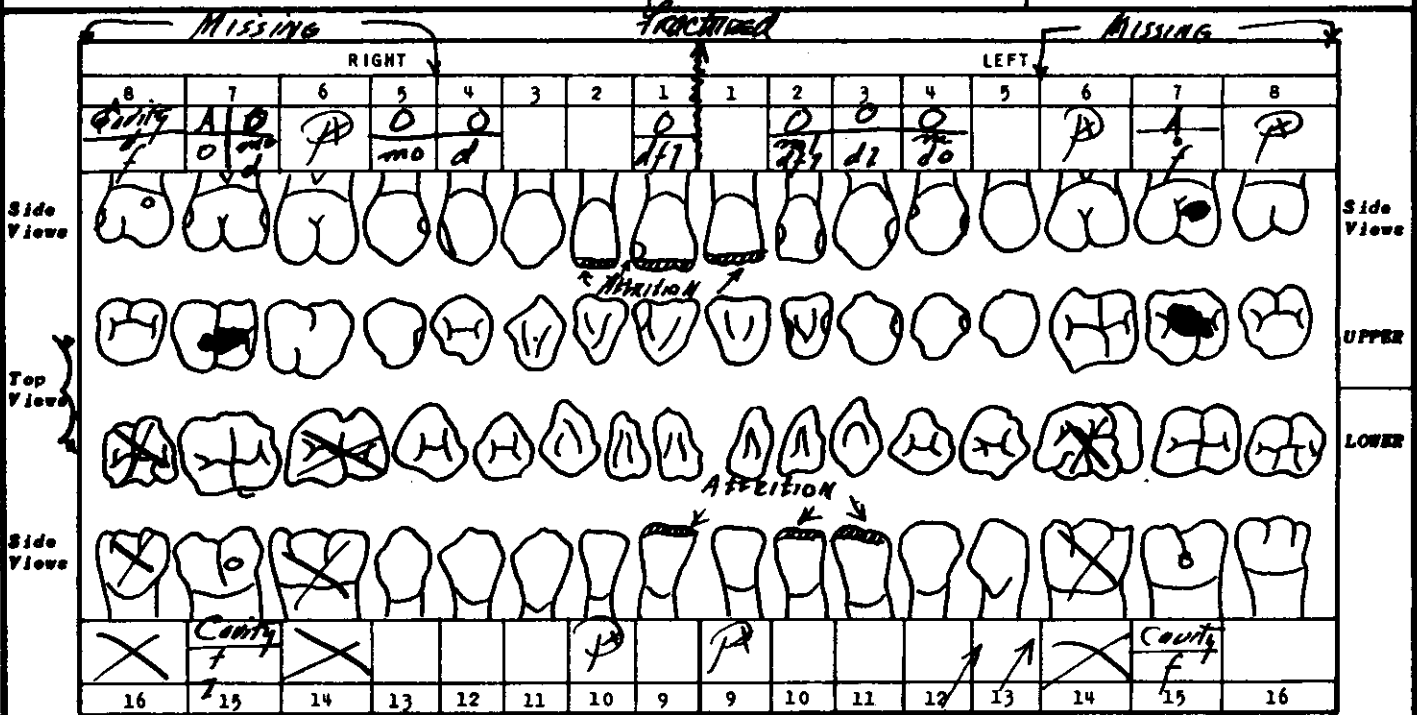
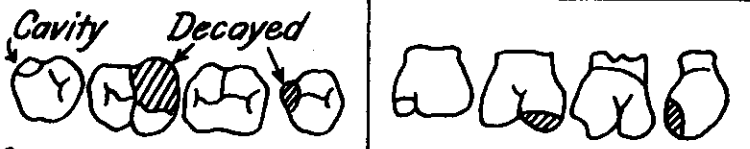
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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:



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."

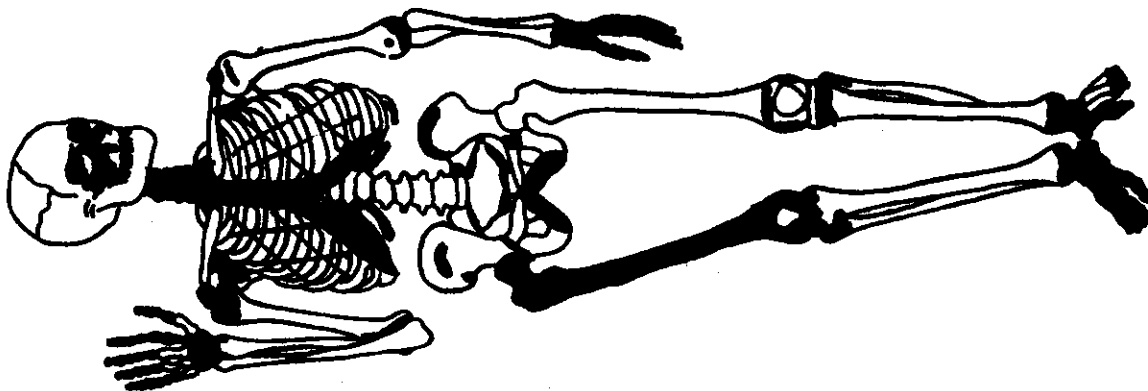
REMARKS: Portion of maxilla missing from R5 thru R8 and L6 thru L8. R5, 7, 8 and L7 of maxillary teeth are present on this portion. L13 rotated. Diastema condition is present between L12 and L13.

Paul R. Nichols

PAUL R. NICHOLS
Chief, Identification Section

Incl 2 3

19. BLACK OUT PARTS OF BODY NOT RECORDED



20.

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

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

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

No I.D. tags, burial bottle, personal effects, or other means of identification found with remains.

[Faint, illegible stamp or text]

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
Chief, Identification Section

SIGNATURE

Paul R. Nichols

X-699

IDENTIFICATION DENTAL CHART

TO BE USED WITH OMC FORMS NOS. 1042 & 1044 IN PLACE OF CHART THEREON,
AND TO BE ATTACHED TO AND FORWARDED WITH THESE FORMS WHEN ACCOMPLISHED.

UNKNOWN X-699 (MERRITT, Thomas A)
Formerly UNKNOWN C-223 Cabanatuan Cem.

18 April 1947

DATE

Pvt

38031075

RANK

SERIAL NO.

200 CAC

UNIT

ORGANIZATION

POW Camp, Cabanatuan, Luzon, P.I. USAF CEM MAN #2

2

18

2238

PLACE OF DEATH

PLACE OF BURIAL

PLOT

ROW

GRAVE NO.

		RIGHT								UPPER TEETH				LEFT									
		8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8						
TYPE	LOCATION	○	A	○	⊗	○	○			○		○	○	○		A	X	X	TYPE	LOCATION			
		F	OMD		MO	DO			D		MD	D	D		FO								

INSIDE — LOOKING OUT

		RIGHT				LOWER TEETH						LEFT							
		16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16		
TYPE	LOCATION	X	○	X											X	○		TYPE	LOCATION
			F													F			

KEY OF SYMBOLS TO BE USED ON ABOVE CHART

SYMBOLS IN WHOLE BOX



EXTRACTED



CAVITY. INDICATE LOCATION



FIXED BRIDGE (INCL. ABUTMENTS)



TEETH REPLACED BY DENTURE



POSTHUMOUSLY MISSING (LOST AFTER DEATH)

TYPE OF FILLING IN UPPER HALF OF BOX



AMALGAM (SILVER)



GOLD



SILICATE OR PORCELAIN



OXYPHOSPHATE (CEMENT)



LOCATION OF FILLING IN LOWER HALF OF BOX



MESIAL (BETWEEN-TOWARD FRONT)



OCCUSAL (BITING SURFACE BACK TEETH)



DISTAL (BETWEEN-TOWARD BACK)



LINGUAL (TOWARD TONGUE)



FACIAL (TOWARD CHEEK)

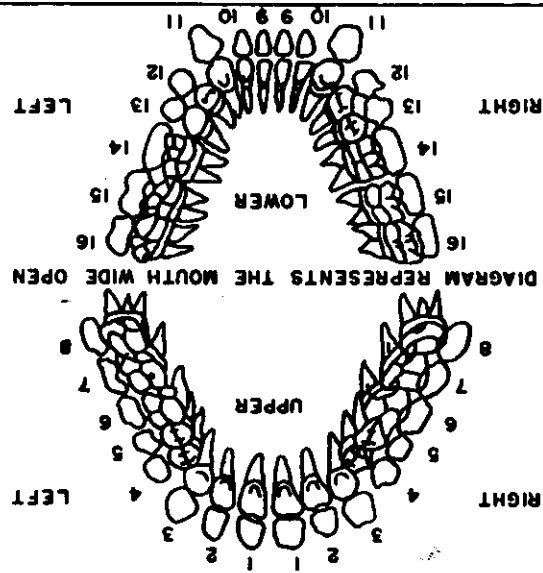
INSTRUCTIONS:

1. ACCURACY AND ATTENTION TO DETAIL IN THE PREPARATION OF THIS CHART ARE OF PARAMOUNT IMPORTANCE, IF SAME IS TO BE OF MAXIMUM VALUE.

2. NOTE CAREFULLY THAT: SYMBOLS INDICATING MISSING TEETH, CAVITIES AND BRIDGE-WORK ARE TO BE INSERTED IN WHOLE BOX; SYMBOLS INDICATING TYPE OF FILLING ARE TO BE INSERTED IN LOWER HALF OF BOX; AND SYMBOLS INDICATING LOCATION OF FILLING ARE TO BE INSERTED

3. ANY ABNORMALITIES SUCH AS MALPOSED, MALFORMED OR DISCOLORED TEETH, ETC. SHOULD BE NOTED. DENTAL WORK NOT COVERED ABOVE WILL BE INDICATED, E.G., PORCELAIN CROWNS, GOLD CROWNS (FULL OR $\frac{3}{4}$), $\frac{3}{4}$ GOLD CROWN WITH SILICATE WINDOW.

4. FOR INFORMATION OF STANDARD NUMBERING OF TEETH, SEE DIAGRAM BELOW.



REMARKS:

SIGNATURE OF PERSON WHO PREPARED CHART
Al S. Padayhag

NAME AND RANK TYPED OR PRINTED
AL S. PADAYHAG, SGT.
USAF Cemetery Manila #2, Luzon, P.I.

PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

VERIFIED BY GMS OFFICER
William G. Brown

NAME AND RANK TYPED OR PRINTED
FENNICK H BURGH, CAPT., GMP

NAME AND RANK TYPED OR PRINTED

DATE
18 April 1947

DATE

IDENTIFICATION DENTAL CHART

TO BE USED WITH OMC FORMS NOS. 1042 & 1044 IN PLACE OF CHART THEREON,
AND TO BE ATTACHED TO AND FORWARDED WITH THESE FORMS WHEN ACCOMPLISHED.

19 April 1947

UNKNOWN I-699 (MERRITT, Thomas A)
Formerly UNKNOWN C-223 Cabanatuan Camp.

Pvt

38031075

LAST NAME FIRST INITIAL

RANK

SERIAL NO.

200 CAC

UNIT

ORGANIZATION

POW Camp, Cabanatuan, Luzon, P.I. USAP CEM MAN #2

2

18

2238

PLACE OF DEATH

PLACE OF BURIAL

PLOT

ROW















GRAVE NO.

RIGHT								UPPER TEETH				LEFT					
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8		
TYPE LOCATION	⊙ F	A ⊙ MD	⊙ P	⊙ MO	⊙ DO			⊙ D		⊙ MD	⊙ D	⊙ D		A ⊙ FO	X	X	TYPE LOCATION

INSIDE — LOOKING OUT

RIGHT						LOWER TEETH				LEFT							
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16		
TYPE LOCATION	X	⊙ F	X											X	⊙ F		TYPE LOCATION

KEY OF SYMBOLS TO BE USED ON ABOVE CHART

SYMBOLS IN WHOLE BOX	TYPE OF FILLING IN UPPER HALF OF BOX	LOCATION OF FILLING IN LOWER HALF OF BOX
 EXTRACTED	 AMALGAM (SILVER)	 MESIAL (BETWEEN-TOWARD FRONT)
 CAVITY. INDICATE LOCATION	 GOLD	 OCCLUSAL (BITING SURFACE BACK TEETH)
 FIXED BRIDGE (INGL. ABUTMENTS)	 SILICATE OR PORCELAIN	 DISTAL (BETWEEN-TOWARD BACK)
 TEETH REPLACED BY DENTURE	 OXYPHOSPATE (CEMENT)	 LINGUAL (TOWARD TONGUE)
 POSTHUMOUSLY MISSING (LOST AFTER DEATH)		 FACIAL (TOWARD CHEEK)

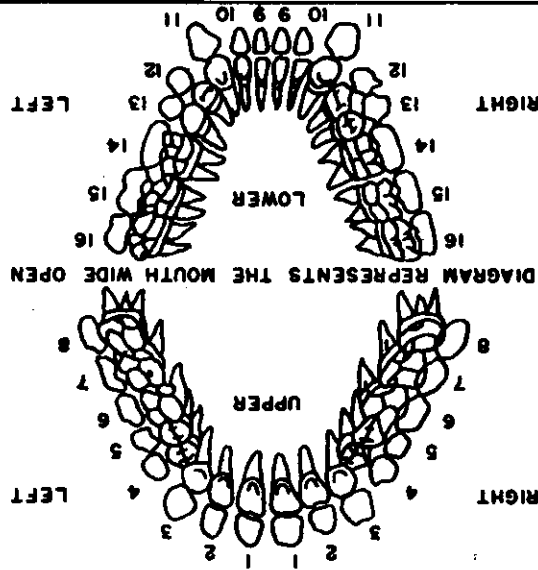
INSTRUCTIONS:

1. ACCURACY AND ATTENTION TO DETAIL IN THE PREPARATION OF THIS CHART ARE OF PARAMOUNT IMPORTANCE, IF SAME IS TO BE OF MAXIMUM VALUE.

2. NOTE CAREFULLY THAT: SYMBOLS INDICATING MISSING TEETH, CAVITIES AND BRIDGE-WORK ARE TO BE INSERTED IN WHOLE BOX; SYMBOLS INDICATING TYPE OF FILLING ARE TO BE INSERTED IN LOWER HALF OF BOX; AND SYMBOLS INDICATING LOCATION OF FILLING ARE TO BE INSERTED IN LOWER HALF OF BOX.

3. ANY ABNORMALITIES SUCH AS MALPOSED, MALFORMED OR DISCOLORED TEETH, ETC. SHOULD BE NOTED. DENTAL WORK NOT COVERED ABOVE WILL BE INDICATED, EG, PORCELAIN CROWNS, GOLD CROWNS (FULL OR $\frac{3}{4}$), $\frac{3}{4}$ GOLD CROWN WITH SILICATE WINDOW.

4. FOR INFORMATION OF STANDARD NUMBERING OF TEETH, SEE DIAGRAM BELOW.



REMARKS:

SIGNATURE OF PERSON WHO PREPARED CHART

AL. S. PALMISTO, D.D.T.

NAME AND RANK TYPED OR PRINTED

PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

NAME AND RANK TYPED OR PRINTED

16 APRIL 1947

DATE

VERIFIED BY GMS OFFICER
PER: I. H. BURCH, CAPT., CDL

[Handwritten Signature]

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

APO 707
29 June 1948

The following cases are those disinterred from a common grave at Cabanatuan Prison Camp - Grave # 707; Row # D; Plot # 7. The unknown numbers are AGRS Manuscript numbers.

UNKNOWN X- 4413-A
" X- 4413-B
" X- 4414
" X- 4415
" X- 4416
" X- 4417
" X- 4418
" X- 4419
" X- 4420

CLARK, Raymond V.

Inck # 5

(EXTRACT COPY) PHOTOGRAPH COPY OF CARNATION FOR GAVE DEATH REPORT

(E X T R A C T)

	Rank & Grade	Ser. No.	Age	Birth	Date of Death	Reg.	Cause	Nearest Kin and Address	Graves No.
2129	Sgt	17016405	22	9/10/20	9:30 AM 11/4/42	2129	DU	Mrs Mary Garrellock; 2700 Olive St., Kansas City, Mo.	707
2130	Pfc	6561604	21	4/3/21	2:45 PM 11/4/42	2130	DU	Mrs Edith Angesser; 1615 Louisiana St., Vallejo, Calif.	707
2131	Pfc	6895243	26	3/3/16	2:30 PM 11/4/42	2131		Mrs Mary Clark; 1501 Park Road, NW, Washington, D.C.	707
2132	Pfc	20645237	26	11/4/16	10:30 PM 11/4/42	2132	DU	Mrs Rose L. Phillips; 705 S. Pearl St., Janesville, Wisc.	707
2133	Pfc	33003794	27	10/4/15	9:30 AM 11/4/42	2133	Ima	Mrs E. S. Beard; Rt #4, West Minister, Md.	707
2134	Pvt	R-1018888	29	10/21/82	3:30 PM 11/4/42	2134	Ima	Mrs George Reilly; 117 Brown Ave., Rosindale, Mass.	707
2135	1st Sgt	R-1016736	31	1/19/91	11:15 PM 11/4/42	2135	Ima	Mrs Sarah Proctor; 902 San Pedro Ave., San Antonio, Texas	707
2136	Serge	3762992	31	7/4/22	9:00 PM 11/4/42	2136	Ima	J. M. Watson; Martinez, Calif.	707
2137	Pvt	38031075	20		8:00 PM 11/4/42	2137	Pol	M. K. Merritt; Davilla, Texas	707

A TRUE EXTRACT COPY:

H. *[Signature]*
Capt., GMS

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNK X-4420 (formerly X-699 Manila #2)				2. DATE OF REPORT 23 Nov 49		
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P^h		4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT REINTERMENT	
PHYSICAL DESCRIPTION Age: 28-33						
8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT 5'10"	10. COLOR OF HAIR UTD		11. RACE White		
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS <p style="text-align: center;">NONE</p>						
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES <p style="text-align: center;">NONE</p>						
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 <p style="text-align: center;">NONE</p>						
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) <p style="text-align: center;">NONE</p>						

Incl #3

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

TOP VIEW

SIDE VIEW



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

Gold Crown, Porcelain Crown



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

Gold Bridge



FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:

Gold Filling, Silver Filling



CARIES (Cavities): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:

Cavity, Decayed



Maxilla

Fractured

Maxilla

Missing RIGHT

LEFT

Missing

RIGHT								LEFT								
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
	o	A	D	D	o		o	o	p	o	o	o	A			
	f	o	o	o	o		o	o	o	o	o	o	o			
Side View	[Diagrams of teeth in side view]														Side View	
	[Diagrams of teeth in top view]															
Top View	[Diagrams of teeth in top view]															
Side View	[Diagrams of teeth in side view]															
	X	o	X				o	o					X	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."

R5 - R7 and L6 are loose present with remains.

Paul R. Nichols
PAUL R. NICHOLS
Chief, Iden Sec



(Humerus	34.5	-	176
Approx. (Radius	25.8	-	180
(Femur	48.1	-	178
			<u>37534</u>
			178

Estimate height 5'10"

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, est. height 5'10", and in the late twenty's or early thirty's (est. 28-33 years at time of death).

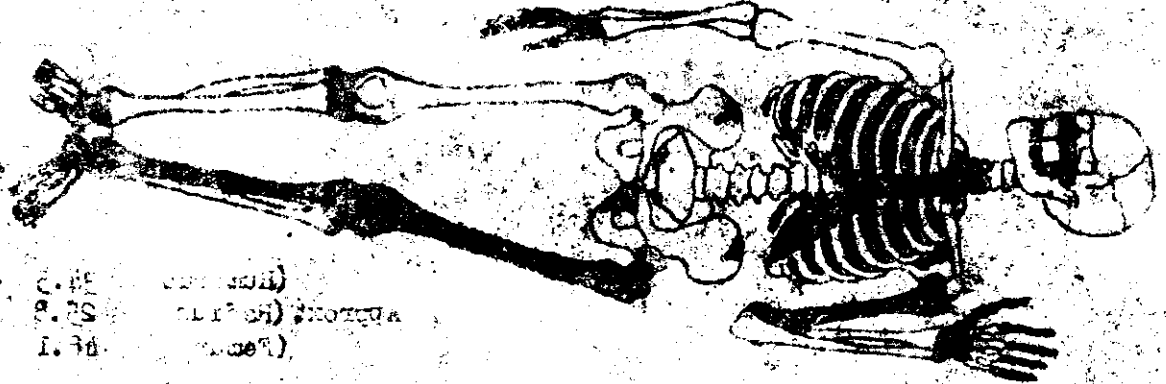
See attached anthropologist's statement dated 29 November 1949.

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



176 - 178
180 - 182
184 - 186

Height 5'10"

MASS BURIAL CERTIFICATE (IF APPLICABLE)

I CERTIFY THAT THE GRON REMAINS CONSIST OF PARTS OF THE FOLLOWING ANATOMICAL PARTS

SIGNATURE OF MEDICAL OFFICER

OF REMARKS AND ADDITIONAL INFORMATION

This is the remains of a male individual of white ancestry, height 5'10", born in the late twenty's or early thirties (est. 1920-30) years at time of death. See attached anthropologist's statement dated 23 November 1949.

I CERTIFY THAT I HAVE PERSONALLY VIEWED THE REMAINS OF DECEASED AND THAT ALL RESULTS OF EXAMINATION ARE RECORDED TO THE BEST OF MY KNOWLEDGE

TYPED NAME, GRADE, RANK OR STATUS, AND ORGANIZATION

ROBERT B. FULTON
ANTHROPOLOGIST

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

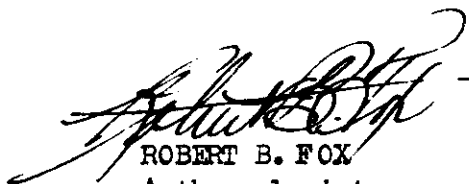
23 November 1949

S T A T E M E N T

Reference: X-694 Manila #2 (X-4416 Maus)
X-695 Manila #2 (X-4417 Maus)
X-699 Manila #2 (X-4420 Maus)

The above three (3) remains were reprocessed simultaneously by me this date, and new QMC Forms 1044 were accomplished for each remains.

The remains had been very poorly segregated, and a few long bones improperly associated were removed and assigned CIL #508. In so far as the condition of the remains allow, and to the best of my ability, these remains are now properly segregated, and each represents one and the same individual.


ROBERT B. FOX
Anthropologist

C. BANATUAN POI PROJECT

Grave: 707 Plot 7

No. of KNOWN'S Recovered 1

No. of UNKNOWN'S Recovered 9

TOTAL ----- 10

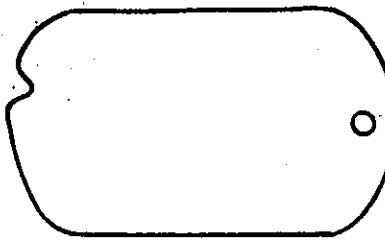
BREAKDOWN OF UNKNOWN'S:

	AGRS MSLM	FORMER MANILA	S T A T U S			
	X-NO.	NO. 2 X-NO.	UNIDENT	CIL NO	VOIDED	RECOMMENDED AS
(+) X-4413-A		X-691	X			
X-4413-B		X-691		309		
(+) X-4414		X-692	X			
(+) X-4415		X-693	X			
X-4416		X-694	X			
X-4417		X-695				Pfc. John T. Walsh, 856730
(+) X-4418		X-696	X			
(+) X-4419		X-698	X			
X-4420		X-699	X			

NOTE: Certificates of Unidentifiability and forms 1044 for these marked (+) were previously submitted.

Handwritten signature or initials

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)	REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)	STORAGE	DATE OF REPORT 12 July 48
---	---	----------------	-------------------------------------

Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.		
	NAME (Last, first, middle initial) UNKNOWN X-4490 (Formerly UNK X-699 USAF Gen 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 Unknown
--	----------------------------------	---------------------------------

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	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	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
19 May 48		1300	Casket	None	802	E	1495



WAS THIS A REBURIAL? (Yes or no) RESTORED Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Gen Manila #2, Luzon, P.I.	PLOT No.	ROW No.	GRAVE No.
		2	18	2238

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY


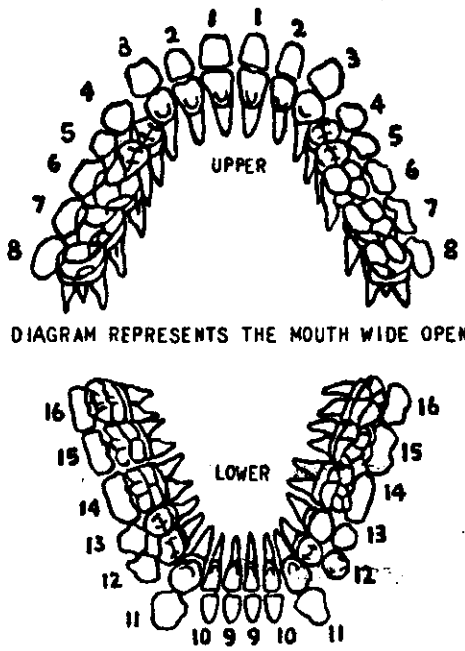




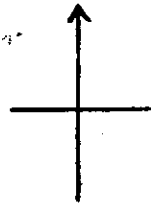
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) STORED Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes
---	---

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORED BOYLE, Frederick K.	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
	Pvt.	37069880	QMC	1497

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED MOURNIE, Maurice R.	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
	2nd Lt.	G-8937214129th FA	Stry C	1493

SIGNATURE OF PERSON PREPARING REPORT  T. G. AQUINO, T/5, QMC	SIGNATURE OF GRS OFFICER VERIFYING REPORT  L. S. PANSPPIO, 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.

LEFT LITTLE FINGER	Section UNIDENTIFIED REMAINS			
	<p>INSTRUCTIONS:</p> <p>(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.</p> <p>(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.</p>			
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	<p>FILLINGS</p>  <p>SILVER FILLING GOLD FILLING</p>		 <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>	
	<p>CAVITIES</p>  <p>CAVITY DECAYED</p>			
LEFT THUMB	<p>MISSING TEETH</p>  <p>TOOTH MISSING</p>			
RIGHT THUMB	<p>CROWNED TEETH</p>  <p>PORCELAIN CROWN GOLD CROWN</p>			
RIGHT INDEX FINGER	<p>BRIDGE WORK</p>  <p>GOLD BRIDGE</p>			
	<p>FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY</p> <div style="text-align:center; margin-top: 20px;">  </div>			
RIGHT MIDDLE FINGER	<p>REMARKS: UNKNOWN X-4420, AG'S Mausoleum, Manila, P.I., formerly UNKNOWN X-699, USAF Cemetery Manila #2, Luzon, P.I., might be anyone of the nine (9) unidentified bodies whose names are listed in previous report of interment.</p> <p align="center">QMB Form 1044, 1044-A and 1044-B accomplished.</p>			
RIGHT RING FINGER				
RIGHT LITTLE FINGER				

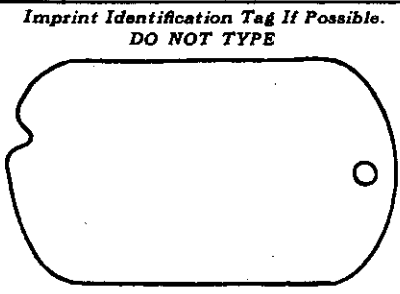
RESTRICTED-U

U-1407

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

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

DATE OF REPORT
1 Feb 46



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN X-699 (MERRITT, Thomas A) (Formerly UNKNOWN C-223 Cabanatuan Cemetery)		SERIAL NO. 38031075
GRADE Pvt	ORGANIZATION 200 CAC	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 Hug Pellagra	DATE OF DEATH Hug 4 Nov 45
--	-----------------------------------	----------------------------------

EMERGENCY ADDRESSEE (Name, relationship, and address)
Mr. M. M. Merritt (F) Deville, Texas

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) None (9) bodies buried in common grave. Prison records indicate:- Sgt Carelicke, Simon 17016405 DELM Pfc Engesser, Marcus A. 6561604 -(See Sec 3 reverse side)-
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (2)	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME
None

Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY
USAF Cemetery Manila #2, Luzon, P I

DATE OF BURIAL 9 Jan 46	HOUR 0900	BURIED IN (Shroud, blanket, or name of other) Shelter Half	TYPE OF GRAVE MARKER Cross	PLOT No. 2	ROW No. 18	GRAVE No. 2238
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WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE 45.7-70.9 1/50,000 POW Camps I & II Cabanatuan Cemetery, Luzon, P I	PLOT No. 7	ROW No. 0	GRAVE No. 707
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TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
----------------------------	--------------------------------	---

IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes
--	--

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) UNKNOWN X-698 (WATSON, Miad) (Formerly UNKNOWN C-222 Cabanatuan Cemetery)	RANK S 1/c	SERIAL No.	ORGANIZATION USN	GRAVE No. 2237
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BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STOUFER, Raymond E.	RANK S/Sgt	SERIAL No. 6925030	ORGANIZATION OBS	GRAVE No. 2239
--	---------------	-----------------------	---------------------	-------------------

SIGNATURE OF PERSON PREPARING REPORT R. C. BARRETT, T/4, GRS.	SIGNATURE OF GRS OFFICER VERIFYING REPORT E. M. MOORE, 1st 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.

RESTRICTED

Ind 20'

25 FEB 1946

Section UNIDENTIFIED REMAINS.

INSTRUCTIONS:


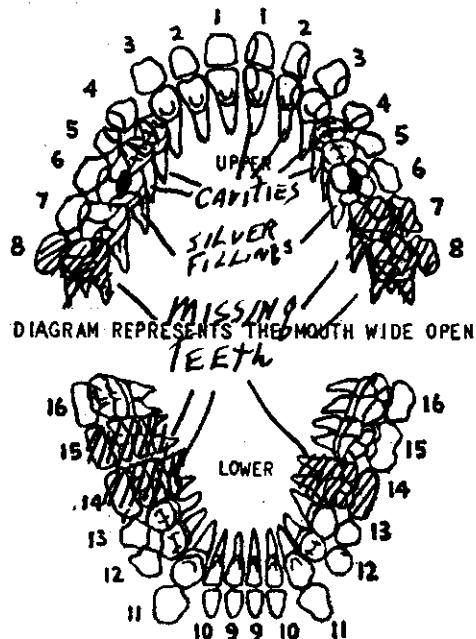




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

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

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS

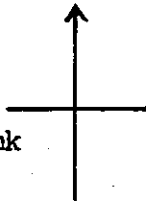
WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND

OTHER IDENTIFICATION CLUES

FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER CAVITIES SILVER FILLINGS MISSING TEETH DIAGRAM REPRESENTS THE MOUTH WIDE OPEN LOWER</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

Pfc Clark, Raymond V. 6895243 808 MP
 Pfc Phillips, Lewis R. 20645237 192 Tank
 Pfc Beard, Lawrence R. 33003794 803 CE
 Pvt Walsh, John J. R-1016737 59 CAC



REMARKS: 1st Sgt Procter, Daniel R-1018888 31 Inf
 Watson, Miad SIC USN
 Pvt Merritt, Thomas A. 38031075 200 CAC

were buried in this grave. Individual identification impossible.

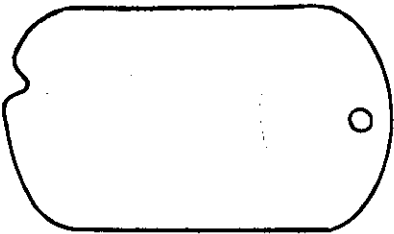
RESTRICTED

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

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

DATE OF REPORT

1 Feb 46

<p>Imprint Identification Tag If Possible. DO NOT TYPE</p> 	<p>Section 1.—IDENTIFICATION.</p>	
	<p>NAME (Last, first, middle initial) UNKNOWN X-699 (MERRITT, Thomas A) (Formerly UNKNOWN C-223 Cabanatuan Cemetery)</p>	<p>SERIAL No. 38031075</p>
	<p>GRADE Pvt</p>	<p>ORGANIZATION 200 CAC</p>
	<p>RACE</p>	<p>RELIGION</p>
		<p>BRANCH OF SERVICE Army</p>
		<p>IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY</p>

<p>PLACE OF DEATH POW Camp Cabanatuan, Luzon, P I</p>	<p>CAUSE OF DEATH Pellagra HWZ</p>	<p>DATE OF DEATH 4 Nov. 42 HWZ</p>
---	--	--

EMERGENCY ADDRESSEE (Name, relationship, and address)
Mr. M. M. Merritt (F) Devilla, Texas HWZ

<p>IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None</p>	<p>IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) Nine (9) bodies buried in common grave. Prison records indicate:- Sgt Carelicke, Simon 17016405 DELM Pfc Engesser, Marcus A. 6561604 -(See Sec 3 reverse side)-</p>
<p>WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (2)</p>	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME
None

A TRUE COPY:
George D. Redden, Jr.
GEORGE D. REDDEN, JR.
Captain, Infantry

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 #2, 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.
9 Jan 46	0900	Shelter Half	Cross	2	18	2238

<p>WAS THIS A REBURIAL? (Yes or no) Yes</p>	<p>IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE 45.7-70.9 1/50,000 POW Camps I & II Cabanatuan Cemetery, Luzon, P I</p>	<p>PLOT No. 7</p>	<p>ROW No. 0</p>	<p>GRAVE No. 707</p>
---	--	-----------------------	----------------------	--------------------------

<p>TYPE OF RELIGIOUS CEREMONY</p>	<p>PERSON CONDUCTING BURIAL RITES</p>	<p>IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY</p>
-----------------------------------	---------------------------------------	--

<p>IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes</p>	<p>IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes</p>
--	--

<p>BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) UNKNOWN X-698 (WATSON, Miad) (Formerly UNKNOWN C-222 Cabanatuan Cemetery)</p>	<p>RANK S 1/c</p>	<p>SERIAL No.</p>	<p>ORGANIZATION USN</p>	<p>GRAVE No. 2237</p>
---	-----------------------	-------------------	-----------------------------	---------------------------

<p>BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STOOPER, Raymond E.</p>	<p>RANK S/Sgt</p>	<p>SERIAL No. 6925030</p>	<p>ORGANIZATION OBS</p>	<p>GRAVE No. 2239</p>
--	-----------------------	-------------------------------	-----------------------------	---------------------------

<p>SIGNATURE OF PERSON PREPARING REPORT /s/t/ R. C. BARRETT, T/4, GRS.</p>	<p>SIGNATURE OF GRS OFFICER VERIFYING REPORT /s/t/ E. M. MOORE, 1st Lt., QMC.</p>
--	---

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 UNIDENTIFIED REMAINS.

INSTRUCTIONS:


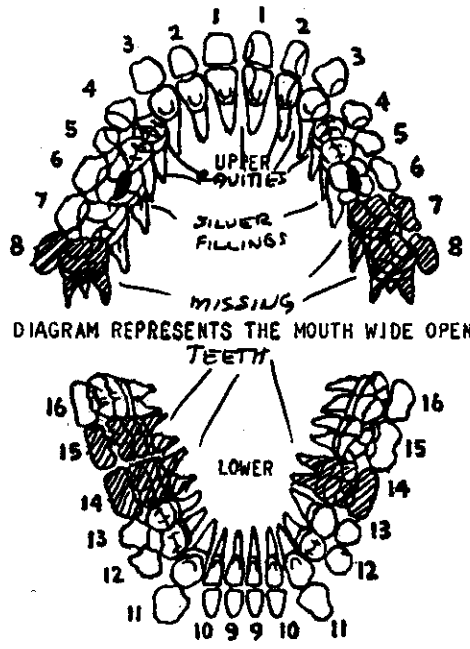




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(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the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

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
--------	--------	---------------	---------------	-------------------------------

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

OTHER IDENTIFICATION CLUES

FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER CAVITIES SILVER FILLINGS MISSING DIAGRAM REPRESENTS THE MOUTH WIDE OPEN TEETH LOWER</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

Pfc Clark, Raymond V. 6092445 200 MP
 Pfc Phillips, Louis E. 2044237 200 Tank
 Pfc Beard, Lawrence E. 3200774 200 CB
 Pvt Walsh, John J. 2-202077 99 GAS
 1st Sgt Proctor, Donald 2-202000 21 Inf
 Veteran, Medal of Merit
 Pvt Merrill, Thomas A. 3002175 200 GAS

REMARKS:

were buried in this grave. Individual identification impossible.

RESTRICTED

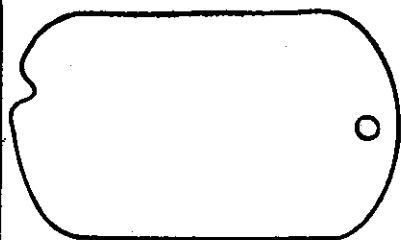
WD GRC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

1 Feb 46

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN X-699 (MERRITT, Thomas A.) (Formerly UNKNOWN X-C-223 (Cabanatuan Cem.))		SERIAL No. 38031075
GRADE Pvt	ORGANIZATION 200 CAC	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 HW2 Pellagra	DATE OF DEATH HW2 4 Nov. 42
---	-----------------------------------	-----------------------------------

EMERGENCY ADDRESSEE (Name, relationship, and address) HW2
Mr. M. M. Merritt (F) Devita, Texas

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) Nine (9) bodies buried in common grave. Prison records indicate:- Sgt Carelicke, Simon 17016405 DEIM Pfc Engesser, Marcus A. 6561604 (See Sec 3 reverse side)
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (2)	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME
None

TRUE COPY:
Frank H. Burch
FRANK H. BURCH
Captain CMP

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 #2, Luzon, P.I.

DATE OF BURIAL 9 Jan 46	HOUR 0900	BURIED IN (Shroud, blanket, or name of other) Shelter Half	TYPE OF GRAVE MARKER Cross	PLOT No. 2	ROW No. 18	GRAVE No. 2238
----------------------------	--------------	---	-------------------------------	---------------	---------------	-------------------

WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE 45.7-70.9 1/50,000 POW Camps 1 & 11 Cabanatuan Cemetery, Luzon, P.I.	PLOT No. 7	ROW No. 0	GRAVE No. 707
--	--	---------------	--------------	------------------

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
----------------------------	--------------------------------	---

IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes
--	--

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) UNKNOWN -698 (WATSON, Mlad) (Formerly UNKNOWN X-C-222 (Cabanatuan Cem.))	RANK S 1/c	SERIAL No.	ORGANIZATION USN	GRAVE No. 2237
---	---------------	------------	---------------------	-------------------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) SOUFER, Raymond E.	RANK S/Sgt	SERIAL No. 6925030	ORGANIZATION OBS	GRAVE No. 2239
---	---------------	-----------------------	---------------------	-------------------

SIGNATURE OF PERSON PREPARING REPORT /s/ R. C. Barrett /t/ R. C. BARRETT, T/4, GRS.	SIGNATURE OF GRS OFFICER VERIFYING REPORT /s/ E. M. Moore /t/ E. M. MOORE, 1st Lt., GRC.
---	--

DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Office. Copies for retention in theater as prescribed by theater commander.

RESTRICTED

Section 3 UNIDENTIFIED REMAINS.

INSTRUCTIONS:


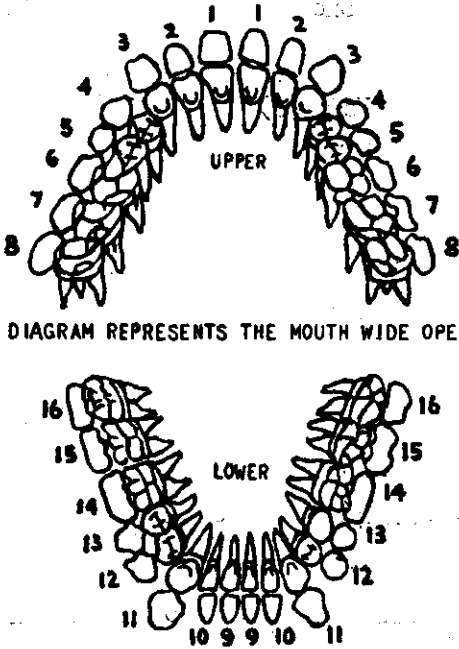




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

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

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



REMARKS:

[Faint, illegible handwritten text in the remarks section]