

W

FILE IDENTIFICATION TOPPER

FILE NUMBER

219 W. L. Mason T 2 X-789

SUBJECT

... X-4136

... C-249

RECLASSIFICATION SHEET

PAPERS ORIGINALLY FILED 293.7unk (misc) Manila #2 X788, X789, X790
X791

SYNOPSIS AND DATES

NEW CLASSIFICATION 293.7unk Manila #2 X788.

10/20/50
er

RECLASSIFICATION SHEET

pfm

Interred 20 February 1950
N 5 190 Ft. McKinley

PREPARED BY PHILCOM

DISINTERMENT DIRECTIVE

1

Carl H. Mark
CARL R. H. MARK

Cemetery Superintendent
SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

7747 80682

DATE

09 02 50
DAY MONTH YEAR

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
UNKNOWN X - 789					

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS
USAF CEMETERY MANILA NO. 2, P. I.	2	19	2463	7701 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. WM. MCKINLEY, P. I.	(BY ADMINISTRATIVE DECISION)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISTINTERRED
UNKNOWN X-789				18 Feb 1950
IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY	
<input checked="" 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	
X-4136 Maus	

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

REMAINS PREPARED AND PLACED IN CASKET

DATE	BY	EMBALMER (Signature)
18 Feb 1950	PAUL R NICHOLS	<i>Paul R Nichols</i> PAUL R NICHOLS
CASKET SEALED BY	SHIPPING ADDRESS VERIFIED BY	
PAUL R NICHOLS	L.W. RICHARDSON, MSgt., RA	
CASKET BOXED AND MARKED		
DATE 18 Feb 50 BY RAYMOND H TANGUAY Sgt.lc, RA		

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

L. W. RICHARDSON, M/Sgt., RA
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

341
REPATRIATION
BRANCH
MEM. DIV. *[Signature]*

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM

AGRS MAUSOLEUM

TO

U S MILITARY CEMETERY

KIND OF CONVEYANCE

TRUCK

NAME OF CONVOYER

SIGNATURE OF SHIPPER

SIGNATURE OF RECEIVER

DATE

DATE

FEB 20 1950

Overstreet

2. SHIPPED

FROM

KIND OF CONVEYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

SIGNATURE OF RECEIVER

DATE

DATE

3. SHIPPED

FROM

KIND OF CONVEYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

SIGNATURE OF RECEIVER

DATE

DATE

4. SHIPPED

FROM

KIND OF CONVEYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

SIGNATURE OF RECEIVER

DATE

DATE

5. SHIPPED

FROM

KIND OF CONVEYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

SIGNATURE OF RECEIVER

DATE

DATE

6. SHIPPED

FROM

KIND OF CONVEYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

SIGNATURE OF RECEIVER

DATE

DATE

7. SHIPPED

FROM

KIND OF CONVEYANCE

TO

NAME OF CONVOYER

SIGNATURE OF SHIPPER

SIGNATURE OF RECEIVER

DATE

DATE

1

DISINTERMENT DIRECTIVE

7747 8079Y

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER 7748 01020

DATE 15 01 50 DAY MONTH YEAR

NAME ~~X-287 W~~ UNKNOWN SERIAL NUMBER X-004136 GRADE ARM Q RACE 0 RELIGION 6

CEMETERY MANILA MAUS NO 1 P I PLOT ROW GRAVE DISPOSITION OF REMAINS 7701 80 CODE DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE FT. MC KINLEY CEMETERY MANILA, PHILIPPINE ISLANDS

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 UNKNOWN RELIGION IDENTIFICATION VERIFIED BY NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

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

REMAINS PREPARED AND PLACED IN CASKET

DATE BY CASKET SEALED BY EMBALMER (Signature)

DATE BY CASKET BOXED AND MARKED SHIPPING ADDRESS VERIFIED BY

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

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS REMAINS ARE UNIDENTIFIABLE.

3 APR 1950 REPATRIATION BRANCH MEMPHIS

Inch...



RECORD OF CUSTODIAL TRANSFER

1. SHIPPED			
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
2. SHIPPED			
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
3. SHIPPED			
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
4. SHIPPED			
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
5. SHIPPED			
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
6. SHIPPED			
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
7. SHIPPED			
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
FROM	TO	NAME OF CONVOYER	SIGNATURE OF SHIPPER
DATE	SIGNATURE OF RECEIVER	DATE	SIGNATURE OF SHIPPER
DATE	SIGNATURE OF RECEIVER	DATE	SIGNATURE OF SHIPPER
DATE	SIGNATURE OF RECEIVER	DATE	SIGNATURE OF SHIPPER

32

PREPARED BY PHILCOM
DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED
DIRECTIVE NUMBER: 7747 80682
DATE: 09 DAY 02 MONTH 50 YEAR

NAME: UNKNOWN I - 789
SERIAL NUMBER: [blank]
GRADE: [blank]
ARM: [blank]
RACE: [blank]
RELIGION: [blank]
CEMETERY: USAF CEMETERY MANILA NO. 2, P. I.
PLOT: 2
ROW: 19
GRAVE: 2463
DISPOSITION OF REMAINS: 7701 CODE 80 DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

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

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME: [blank]
SERIAL NUMBER: [blank]
GRADE: [blank]
DATE OF DEATH: [blank]
DATE DISTINTERRED: [blank]
IDENTIFICATION TAG ON: REMAINS MARKER
ORGANIZATION: [blank]
RELIGION: [blank]
IDENTIFICATION VERIFIED BY: [blank]
NAME AND TITLE: [blank]

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: [blank]
CONDITION OF REMAINS: [blank]

OTHER MEANS OF IDENTIFICATION: [blank]

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.): [blank]

REMAINS PREPARED AND PLACED IN CASKET

DATE: [blank] BY: [blank]
CASKET SEALED BY: [blank] EMBALMER (Signature): [blank]

CASKET BOXED AND MARKED: [blank] SHIPPING ADDRESS VERIFIED BY: [blank]

DATE: [blank] BY: [blank]
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS: [blank]

Final #41

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM

TO

NAME OF CONVOYER

KIND OF CONVEYANCE

SIGNATURE OF RECEIVER

DATE

SIGNATURE OF SHIPPER

DATE

2. SHIPPED

FROM

TO

NAME OF CONVOYER

KIND OF CONVEYANCE

SIGNATURE OF RECEIVER

DATE

SIGNATURE OF SHIPPER

DATE

3. SHIPPED

FROM

TO

NAME OF CONVOYER

KIND OF CONVEYANCE

SIGNATURE OF RECEIVER

DATE

SIGNATURE OF SHIPPER

DATE

4. SHIPPED

FROM

TO

NAME OF CONVOYER

KIND OF CONVEYANCE

SIGNATURE OF RECEIVER

DATE

SIGNATURE OF SHIPPER

DATE

5. SHIPPED

FROM

TO

NAME OF CONVOYER

KIND OF CONVEYANCE

SIGNATURE OF RECEIVER

DATE

SIGNATURE OF SHIPPER

DATE

6. SHIPPED

FROM

TO

NAME OF CONVOYER

KIND OF CONVEYANCE

SIGNATURE OF RECEIVER

DATE

SIGNATURE OF SHIPPER

DATE

7. SHIPPED

FROM

TO

NAME OF CONVOYER

KIND OF CONVEYANCE

SIGNATURE OF RECEIVER

DATE

SIGNATURE OF SHIPPER

DATE

AIRMAIL

WIGHT 293

4 January 1950

GRS Far East

293 W.I. (MUSE) Manu Manu
SUBJECT: Approval of Unidentifiability

X-4135 thru X-4138

TO: Commanding Officer
American Graves Registration Service
Philcom Zone
APO 900, c/o Postmaster
San Francisco, California

1. Reference is made to Findings of Unidentifiability for the following Unknown Deceased:

Unknown X-4135,	AGRS Maus. Manila,	formerly X-788,	USAF Com. Man. #2,	P.I.
" X-4136,	" " " " "	" X-789,	" " " " "	" #2, P.I.
" X-4137,	" " " " "	" X-790,	" " " " "	" #2, P.I.
" X-4138,	" " " " "	" X-791,	" " " " "	" #2, P.I.

2. Recommendations for Unidentifiability have been approved by this Office. Request your records be amended accordingly.

FOR THE QUARTERMASTER GENERAL:

T. E. METZ
Lt. Colonel, QMC
Memorial Division

cc: Adm Section
G. Reynolds
L. M. White
J. Windsor

CC furnished CINCPAC APO 500

X-4135 thru X-4138 (MUSE) Manu Manu

AIRMAIL

293 - Unk. P. I. (Misc) (Maus. Manila) (X-4135 thru X-4138)

OMGMT 293
GRS Far East

4 January 1950

SUBJECT: Approval of Unidentifiability

TO: Commanding Officer
American Graves Registration Service
Philcom Zone
APO 900, c/o Postmaster
San Francisco, California

1. Reference is made to Findings of Unidentifiability for the following Unknown Deceased:

Unknown	X-4135,	AGRS	Maus.	Manila,	formerly	X-788,	USAF	Cem.	Man.	#2,	P.I.
"	X-4136,	"	"	"	"	X-789,	"	"	"	#2,	P.I.
"	X-4137,	"	"	"	"	X-790,	"	"	"	#2,	P.I.
"	X-4138,	"	"	"	"	X-791,	"	"	"	#2,	P.I.

2. Recommendations for Unidentifiability have been approved by this Office. Request your records be amended accordingly.

FOR THE QUARTERMASTER GENERAL:

T. H. METZ
Lt. Colonel, GRC
Memorial Division

C O P Y
msb

X-4135 thru X-4138 (Maus. Manila)

AIRMAIL

RESTRICTED

OMC 293
C/O Far East

7 November 1949

X-4135 thru X-4138

SUBJECT: Identification of World War II Deceased

TO : Commanding General
Philippine Air Command
AR 74, c/o Postmaster
San Francisco, California

ATTN: AGNS, PHILDOM ZAME

1. Reference is made to Proceedings of your Board of Review, dated 25 August 1949, recommending group identification of Unknowns X-4135 through X-4138, AGNS Mausoleum, Manila, P.I. as the remains of:

<u>BERNARD, Louis F.</u>	Sgt	6 832 240
<u>LANTIER, Charles S.</u>	Pfc	6 384 960
<u>MELSON, Arvid K.</u>	Pfc	19 054 295
<u>MURPHY, Joseph C.</u>	Pvt	14 042 476

2. After an extensive study of this case, it is considered that the evidence presented cannot be interpreted as sufficient for a group identification.

3. The association of these four decedents with the remains recovered from the ossuaries grave, Cabanatuan POW Cemetery, is based upon information contained in the Cabanatuan POW Death Report. Experience with this report has proved it to be a valuable aid for the association of decedents with Unknown remains. However, in repeated instances, it has been shown that the report does not constitute substantive proof within itself. Therefore, it is subject to qualifying or substantiating comparison and physical data.

4. Dental records for the decedents involved in this case are meager and are probably incomplete. They represent a marked similarity which would probably compare equally well with any cross-section of remains recovered from Cabanatuan Cemetery.

5. Since there is no adequate substantiating evidence available in this case, Board Proceedings have been disapproved and are returned herewith.

FOR THE QUARTERMASTER GENERAL:

1 Incl

T. H. METZ

J.W. Lewis
L.M. White
J. Windsor

Bd Proceedings (Group Burial)

cc: CTRC, AR 500

AIRMAIL

X-4135 thru X-4138 (Unknowns)

FILE UNDER NO. 299 - **Unk. P.I. X-789 Manila**

I N D E X S H E E T

SYNOPSIS

Letter:

1/2/48

FROM:

CCMI

TO:

Philippine-Ryukyus Command, APO 707, c/o Postmaster, N.Y.

SUBJ:

Identification of Unknown Deceased

DECLASSIFIED UNDER E.O. 13526 **Unk. P.I. (Misc) Manila #2**

68

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE

25 Nov 1949

Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 789, Plot 2,
Row 19, Grave 2463, USMC USAF Cem. Manila #2 have
been reviewed and it is the opinion of this office that insufficient
evidence is available to establish the identity of this deceased,
and that these remains should be classified as unidentifiable.

FOR THE COMMANDING OFFICER:



H. B. McNEEMAR
Captain, QMC
Chief, Records Branch

Attch: Form 1044

Received 22 Dec 1949 0048

Not identifiable from
information presently
available

G. Reynolds
4 Jan 1950

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

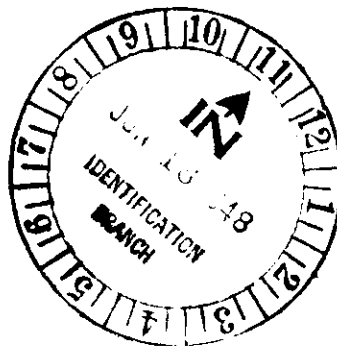
/acm

AFO 707
6 May 1948

The following cases are those disinterred from a common grave at Cabanatuan Prison Camp - Grave # 713, Row # 0, Plot # 7. The unknown numbers are AGRS Mausoleum numbers;

UNKNOWN X-4135
" X-4136
" X-4137
" X-4138-A
" X-4138-B

URICH, Harold G.
DUNBAR, Layton W.



IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOW X-4136 (Formerly UNK X-789 Manila #2)				2. DATE OF REPORT 28 Nov 1949	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	810	H	2465	DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

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

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

None

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

U T D

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

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

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

None

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

None

"UNIDENTIFIABLE"
"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

India

TOOTH CHART		TOP VIEW	SIDE VIEW
<p>MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED THUS:</p>			
<p>CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:</p>		<p>Gold Crown, Porcelain Crown</p>	
<p>BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:</p>		<p>Gold Bridge</p>	
<p>FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:</p>		<p>Gold Filling, Silver Filling</p>	
<p>CARIES (Cavities): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:</p>		<p>Cavity, Decayed</p>	

RIGHT								LEFT									
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8		
	P						P	P			P	P	o		Missing		
Side Views																	Side Views
Top Views																	
	<i>attrition</i>																
Side Views																	
	Inserted		P	P				P				P	o		Impacted		
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16	

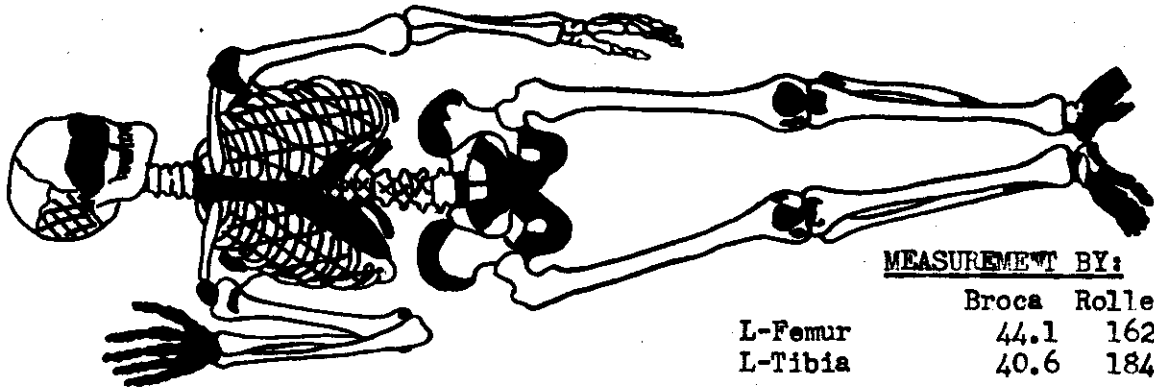
DENTURES (Plates): DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAINING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

"UNIDENTIFIABLE"

BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA

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

19. BLACK OUT PARTS OF BODY NOT RECOVERED

MEASUREMENT BY:

	Broca	Rollet
L-Femur	44.1	162
L-Tibia	40.6	184

Average height in cm - 173. in ft - 5'8"

20.

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

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

 SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

No ROI, identification tags or personal effects found with remains.

Estimated weight of remains - 8 lbs.

Circumference of skull - 20 inches.

"UNIDENTIFIABLE"**"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"**

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 Sec

SIGNATURE

Paul R. Nichols

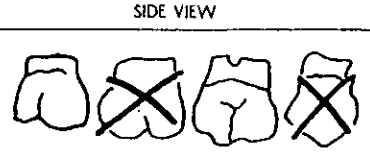
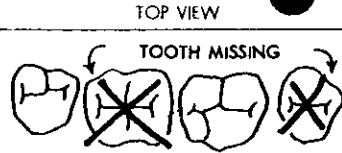
IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNK L-4196 (Formerly UNK L-789 USAF Com Manila #2, Luzon, PT)				2. DATE OF REPORT 2 Apr 48	
3. NAME OF CEMETERY AGPS Mausoleum, Manila, P.I.			4. PLOT 810	5. ROW H	6. GRAVE 2465
			7. DATE OF DISINTERMENT 15 Dec 47		REINTERMENT STORAGE 5 Apr 48
PHYSICAL DESCRIPTION					
8. ESTIMATED WEIGHT UTD		9. ESTIMATED HEIGHT 5'8"		10. COLOR OF HAIR BROWN	
11. RACE UTD					
12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS NONE					
13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES UTD - Skeletal and Dental Charts attached.					
14. WAS BODY BURNED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		TO WHAT EXTENT?			
15. WAS BODY MANGLED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		TO WHAT EXTENT?			
16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS NONE					
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area) NONE					

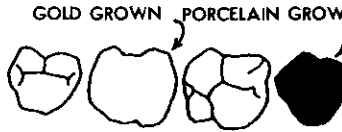
18.

TOOTH CHART

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



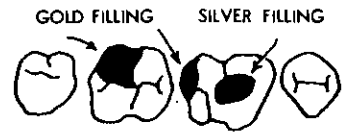
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD PORCELAIN SILVER OR GOLD AND PORCELAIN), THUS:



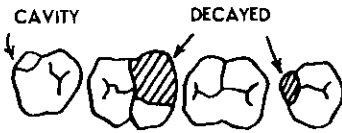
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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



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



RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
	⊗						⊗	⊗			⊗	⊗	⊙		Missing
SIDE VIEWS								SIDE VIEWS							
TOP VIEWS								TOP VIEWS							
UPPER								UPPER							
LOWER								LOWER							
SIDE VIEWS								SIDE VIEWS							
attrition								attrition							
Impacted			⊗	⊗				⊗			⊗	⊗	⊙		Impacted
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."

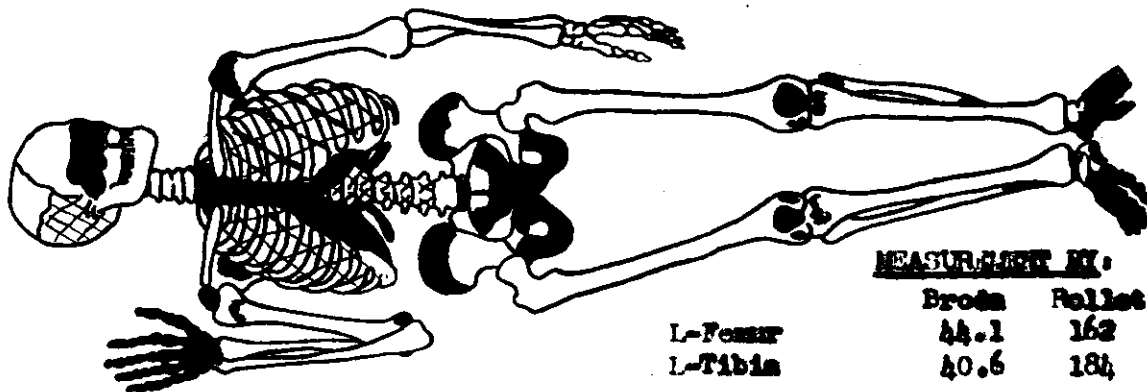
CERTIFIED TRUE COPY:
Joseph D Murphy
 L.S. PAND-IC
 let it, Inc

/s/ Joseph D Murphy, T/5

19. BLACK OUT PARTS OF BODY NOT RECOVERED

3-4-56

L-3



Average height in cm - 173, in ft - 5'8"

20. MASS BURIAL CERTIFICATE (IF APPLICABLE)

(Wherein segregation in whole or parts is impossible)

I Certify that the Group Remains Consist of Parts of _____ Decedents Based on the Presence of One or More of the Following Anatomical Parts: _____ NUMBER

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

This remains is one of a group disinterred from Grave 713, Row 0, Plot 7, POW Camp, Cabanatuan, Luzon, P.I. No ID tags, burial bottle, personal effects, or other means of identification found with remains. Circumference of skull is twenty (20) inches. Estimated weight of remains, eight (8) lbs.

CERTIFIED TRUE COPY:

[Signature]
L S PANOFIO
1st Lt. Inf

I Certify that I Have Personally Viewed the Remains of Deceased and that All Resulting Information Has Been Recorded to the Best of My Knowledge

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

/s/ EDWARD F MARIARTY
CIP Laboratory, Manila, P.I.

SIGNATURE

/s/ Edward F Mariarty

REPORT OF DISINTERMENT FOR IDENTIFICATION

15 Dec 47

1. Remains of (Name)

UNKNOWN X-789

Serial Number

Grade

Organization

Name, Number and Location of Cemetery

USAF Com Manila #2, Luzon, P.I.

Plot

2

Row

19

Grave No.

2463

2. Date of Disinterment

15 Dec 47

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

Skeletal remains.

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

One (1) substitute tag

On Remains

One (1) substitute tag

What Identification Used Upon Reinterment: On Marker



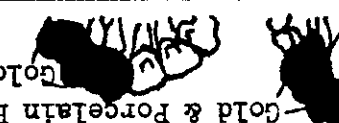

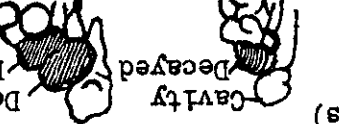
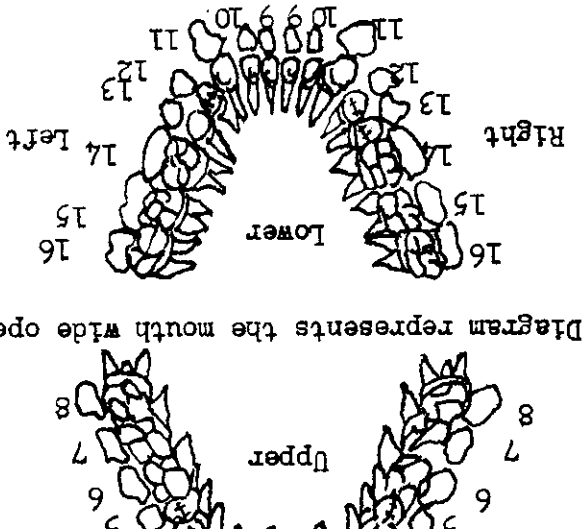
On Remains

5. Signature of Officer Supervising Disinterment and Reinterment.

W. C. Stephenson
WARD C. STEPHENSON 1st Lt, MC

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 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 incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (grinding teeth). An examination should be made and findings charted to cover the following basic conditions: lost teeth, crowned teeth, bridgework, fillings, caries (cavities or decay), dentures (plates), and any deformity of jaws found.

<p>Missing Teeth</p> 	<p>Crowned Teeth</p> 	<p>Bridgework</p> 	<p>Fillings</p> 	<p>Caries (Cavities)</p> 	<p>Diagram represents the mouth wide open</p> 	<p>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".</p>	<p>Remarks</p>
---	---	--	--	--	---	---	----------------

REPORT OF DISINTERMENT FOR IDENTIFICATION

15 Dec 47

1. Remains of (Name)

UNKNOWN X-789

Serial Number

Grade

Organization

. Name, Number and Location of Cemetery

USAF Cem Manila #2, Luzon, P.¹

Plot

2

Row

19

Grave No.

2463

2. Date of Disinterment

15 Dec 47

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

Skeletal remains.

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

One (1) substitute tag

On Remains

One (1) substitute tag

What Identification Used Upon Reinterment: On Marker

On Remains

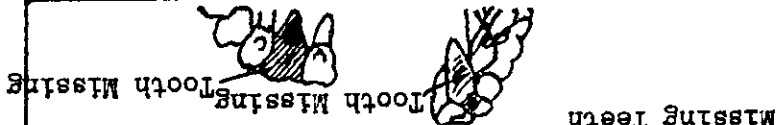
5. Signature of Officer Supervising Disinterment and Reinterment.


 WARD C STEPHENSON 1st Lt, OMC

INSTRUCTIONS FOR PROPER MARKINGS ON DENTAL CHART

1. Give all information and description on dental chart as nearly correct as the condition of the body will allow. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws (cutting) the teeth are arranged symmetrically on either side and classed as incisors (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 following basic conditions: lost teeth, crowned teeth, bridgework, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

Missing Teeth



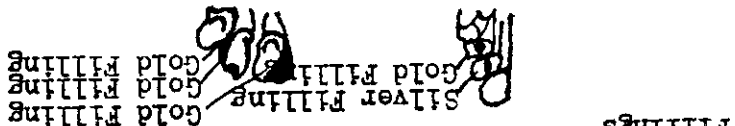
Crowned Teeth



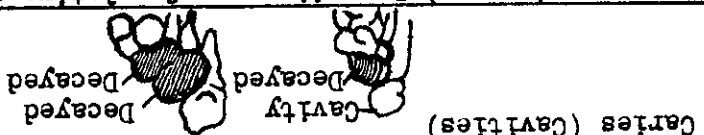
Bridgework



Fillings



Caries (Cavities)



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

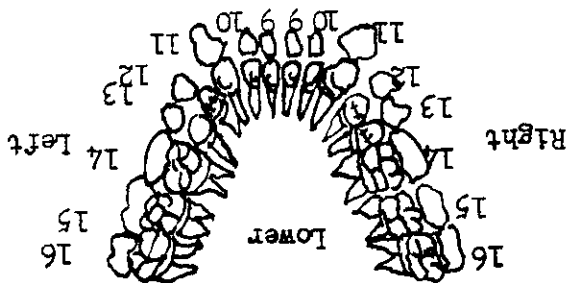
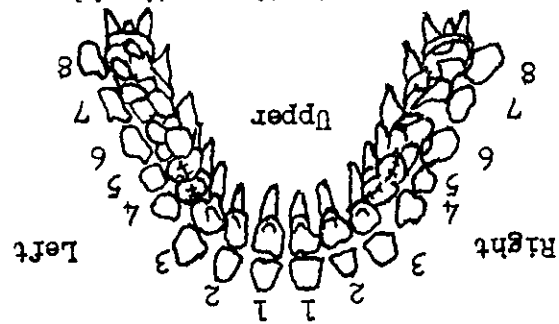


Diagram represents the mouth wide open



IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNK X-4136 (Formerly UNK X-789 USAF Cem Manila #2, Luzon, PI)				2. DATE OF REPORT 2 Apr 48	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	810	H	2465	DISINTERMENT 15 Dec 47	REINTERMENT STORAGE 5 Apr 48

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT 5'8"	10. COLOR OF HAIR BROWN	11. RACE UTD
----------------------------	-----------------------------	----------------------------	-----------------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

N O N E

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

U T D - Skeletal and Dental Charts attached.

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

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

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

N O N E

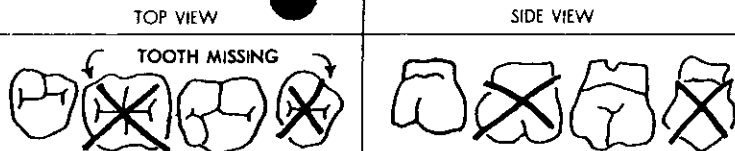
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

N O N E

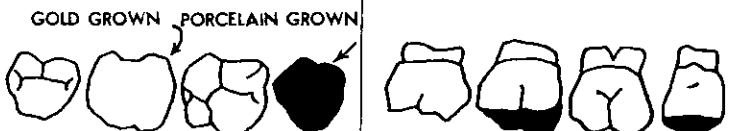
18.

TOOTH CHART

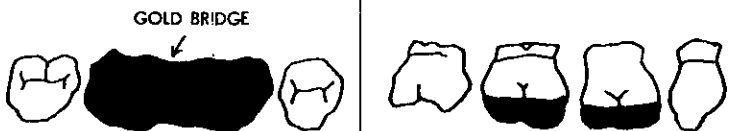
MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" 'D OUT AND LABELED THUS:



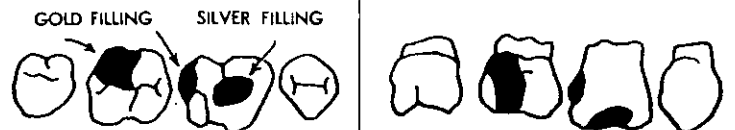
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD PORCELAIN SILVER OR GOLD AND PORCELAIN), THUS:



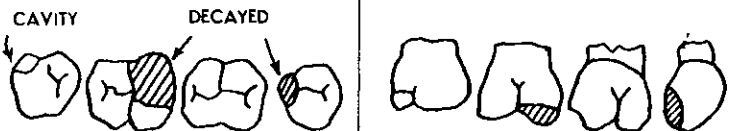
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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



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



		RIGHT								LEFT									
		8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8		
			X						X	X			X	X	o		Missing		
SIDE VIEWS																		SIDE VIEWS	
TOP VIEWS																		UPPER	
																		LOWER	
SIDE VIEWS																			
		Impacted			X	X					X			X	o		Impacted		
		16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16		

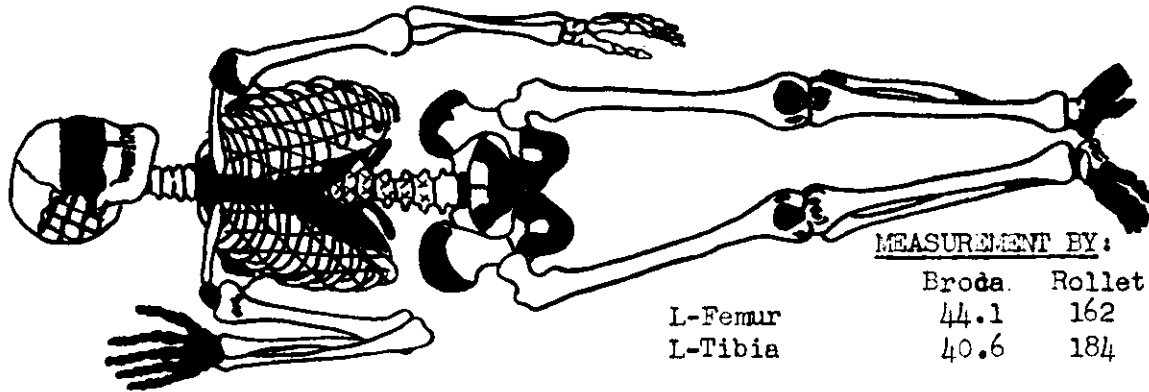
DENTURES (Plates): DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAINING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

CERTIFIED TRUE COPY:

Joseph D Murphy
L S PANOPTIC
1st Lt, Inf

/s/ Joseph D Murphy, T/5

19. BLACK OUT PARTS OF BODY NOT RECOVERED



Average height in cm - 173, in ft - 5'8"

20. MASS BURIAL CERTIFICATE (IF APPLICABLE)

(Wherein segregation in whole or parts is impossible)

I Certify that the Group Remains Consist of Parts of _____ Decedents Based on the Presence of One or More of the Following Anatomical Parts: _____ NUMBER

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

This remains is one of a group disinterred from Grave 713, Row 0, Plot 7, POW Camp, Cabanatuan, Luzon, P.I. No ID tags, burial bottle, personal effects, or other means of identification found with remains. Circumference of skull is twenty (20) inches. Estimated weight of remains, eight (8) lbs.

CERTIFIED TRUE COPY:

L S Panopio
L S PANOPIO
1st Lt, Inf

I Certify that I Have Personally Viewed the Remains of Deceased and that All Resulting Information Has Been Recorded to the Best of My Knowledge

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION
/p/ EDWARD F MORIARTY
CIP Laboratory, Manila, P.I.

SIGNATURE
/s/ Edward F Moriarty

RESTRICTED

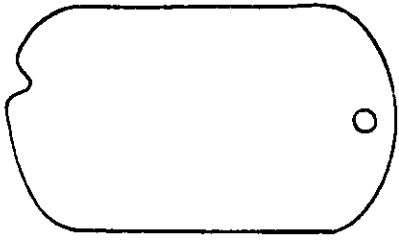
JUN 18 1948

U 1688

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

13 Apr 48


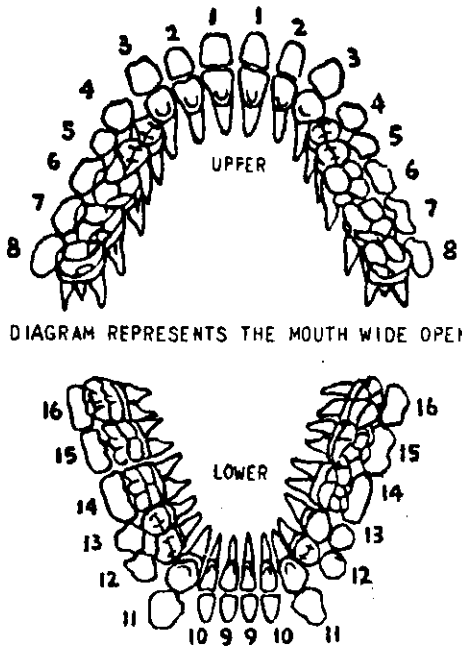




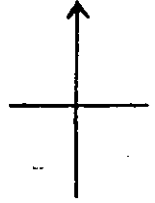

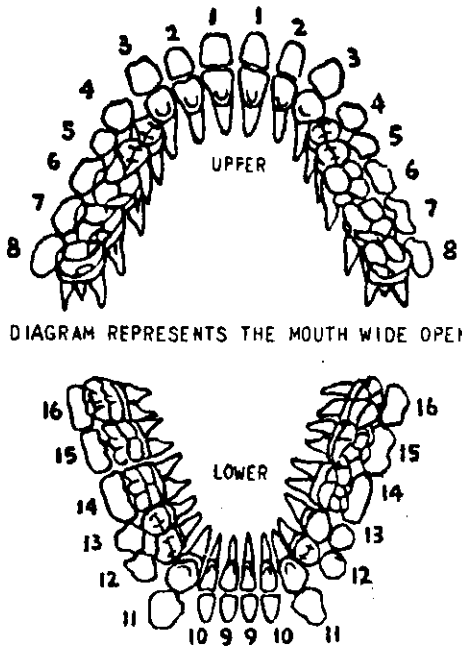




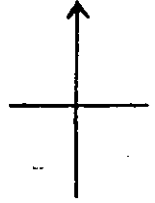

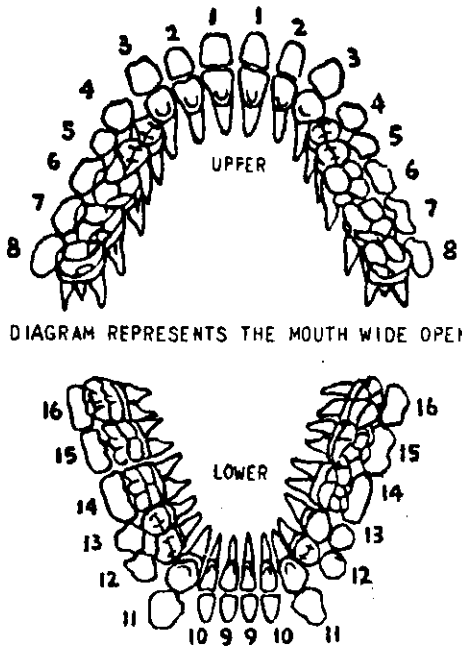




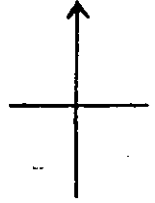
Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.	
	NAME (Last, first, middle initial) UNKNOWN X-4136 (Formerly UNK X-789) USAF Cem Manila #2, Luzon, P.I.)	SERIAL No. Unknown
	GRADE Unknown	ORGANIZATION Unknown
	RACE Unknown	RELIGION Unknown
	IF OTHER THAN U. S. DEAD, GIVE 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 (2)	See Remarks	
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME None		

Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.						
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY AGRS MAUSOLEUM, MANILA, P. I.						
DATE OF BURIAL STORAGE 5 Apr 48	HOUR 1300	BURIED IN (Shroud, blanket, or name of other) STORAGE Casket	TYPE OF GRAVE MARKER None	PLOT No. 810	ROW No. HANGER BAY H	GRAVE No. CRYPT 2465
WAS THIS A REBURIAL? (Yes or no) RESTORED Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery Manila #2, Luzon, P.I.			PLOT No. 2	ROW No. 19	GRAVE No. 2469
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 UNKNOWN X-4138-A	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 2467		
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED UNKNOWN X-4135	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 2463		
SIGNATURE OF PERSON PREPARING REPORT B C AQUINO, P/5, QMC			SIGNATURE OF GRS OFFICER VERIFYING REPORT L S PANOFIO, 1st Lt, Inf			

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

RESTRICTED

0/273

LEFT LITTLE FINGER	Section 3 UNIDENTIFIED REMAINS.																			
	INSTRUCTIONS: (a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks. (b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.																			
LEFT RING FINGER	HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR																
	WEAPON AND SERIAL No.			BIRTHMARKS, SCARS, OR TATTOOS																
LEFT MIDDLE FINGER	LAUNDRY MARKS		WHERE BODY WAS BURIED OR FOUND																	
	OTHER IDENTIFICATION CLUES																			
LEFT INDEX FINGER	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">FILLINGS</td> <td>  SILVER FILLING GOLD FILLING </td> <td rowspan="6" style="text-align: center; vertical-align: middle;">  DIAGRAM REPRESENTS THE MOUTH WIDE OPEN </td> </tr> <tr> <td>CAVITIES</td> <td>  CAVITY DECAYED </td> </tr> <tr> <td>MISSING TEETH</td> <td>  TOOTH MISSING </td> </tr> <tr> <td>CROWNED TEETH</td> <td>  PORCELAIN CROWN GOLD CROWN </td> </tr> <tr> <td>BRIDGE WORK</td> <td>  GOLD BRIDGE </td> </tr> <tr> <td colspan="2">FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY</td> <td align="center">  </td> </tr> </table>				FILLINGS	 SILVER FILLING GOLD FILLING	 DIAGRAM REPRESENTS THE MOUTH WIDE OPEN	CAVITIES	 CAVITY DECAYED	MISSING TEETH	 TOOTH MISSING	CROWNED TEETH	 PORCELAIN CROWN GOLD CROWN	BRIDGE WORK	 GOLD BRIDGE	FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY				
FILLINGS					 SILVER FILLING GOLD FILLING	 DIAGRAM REPRESENTS THE MOUTH WIDE OPEN														
CAVITIES					 CAVITY DECAYED															
MISSING TEETH					 TOOTH MISSING															
CROWNED TEETH					 PORCELAIN CROWN GOLD CROWN															
BRIDGE WORK					 GOLD BRIDGE															
FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY																				
LEFT THUMB																				
RIGHT THUMB																				
RIGHT INDEX FINGER																				
RIGHT MIDDLE FINGER																				
RIGHT RING FINGER																				
RIGHT LITTLE FINGER																				
REMARKS: UNK X-4136 AGRS Mausoleum, Manila, P.I., formerly UNK X-789 USAF Cem Manila #2, Luzon, P.I., might be anyone of the remains whose names are listed in previous Report of Interment. QMC Form 1044, 1044-A and 1044-B accomplished.																				
19 MAY 1948																				

RESTRICTED

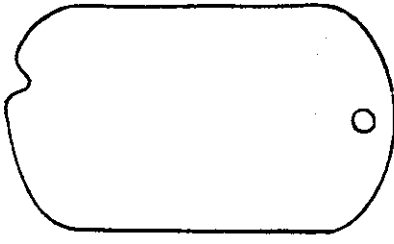
WD QMC FORM 1042.
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

STORAGE

DATE OF REPORT

13 Apr 48

<p>Imprint Identification Tag If Possible. DO NOT TYPE</p> 	Section 1.—IDENTIFICATION.		
	NAME (Last, first, middle initial) UNKNOWN X-4196 (Formerly USK X-709 USAF Com 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) See Remarks
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
AGRS MAUSOLEUM, MANILA, P.I.

DATE OF BURIAL STORAGE 5 Apr 48	HOUR 1900	BURIED IN (Shroud, blanket, or name of other) STORED Casket	TYPE OF GRAVE MARKER None	PLOT No. 610	ROW No. RANGER BAY H	GRAVE No. CRYPT 2463
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WAS THIS A REBURIAL? (Yes or no) RESTORED Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery Manila #2, Luzon, P.I.	PLOT No. 2	ROW No. 19	GRAVE No. 2463
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TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
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IDENTIFICATION TAG BURIED WITH BODY (Yes or no) STORED Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes
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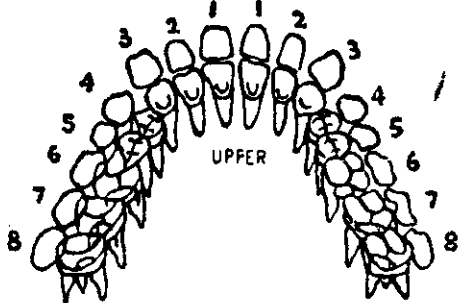


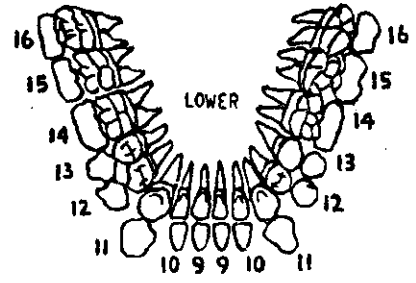




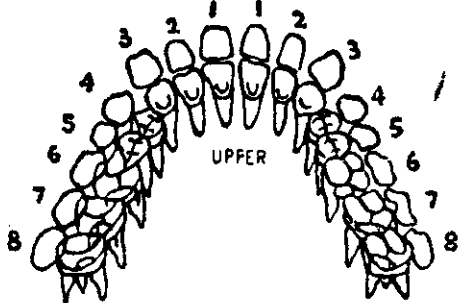


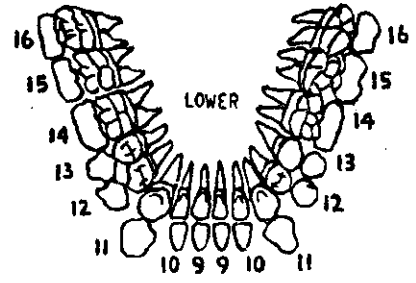




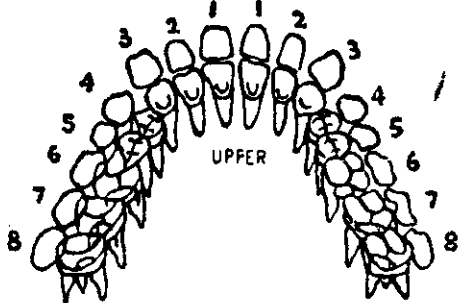


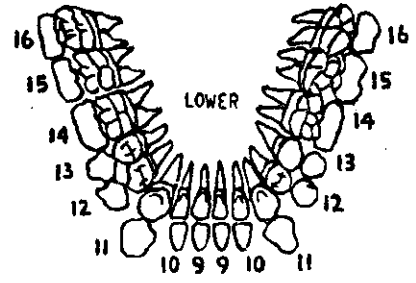



BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORED UNKNOWN X-4196-A	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 2467
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BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED UNKNOWN X-4195	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 2469
--	------	------------	--------------	-----------------------------------

SIGNATURE OF PERSON PREPARING REPORT  S G AQUINO, 2/5, QMG	SIGNATURE OF GRS OFFICER VERIFYING REPORT  L S PANOPIC, 1st Lt, Inf
---	--

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

RESTRICTED

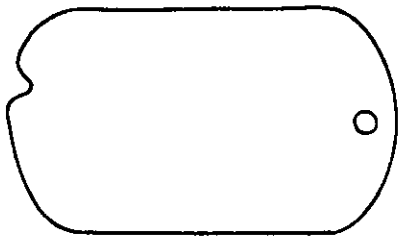
LEFT LITTLE FINGER	Section 3. IDENTIFIED REMAINS.																	
	INSTRUCTIONS: (a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of airplanes, vehicles, and tanks. (b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.																	
LEFT RING FINGER	HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR														
	WEAPON AND SERIAL No.		LAUNDRY MARKS	BIRTHMARKS, SCARS, OR TATTOOS														
LEFT MIDDLE FINGER	OTHER IDENTIFICATION CLUES																	
LEFT INDEX FINGER	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;"> FILLINGS  </td> <td style="width:50%;">  </td> </tr> <tr> <td> CAVITIES  </td> <td> UPPER DIAGRAM REPRESENTS THE MOUTH WIDE OPEN </td> </tr> <tr> <td> MISSING TEETH  </td> <td> LOWER  </td> </tr> <tr> <td> CROWNED TEETH  </td> <td></td> </tr> <tr> <td> BRIDGE WORK  </td> <td></td> </tr> <tr> <td colspan="2"> FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY </td> <td align="center" colspan="2">  </td> </tr> </table>				FILLINGS 		CAVITIES 	UPPER DIAGRAM REPRESENTS THE MOUTH WIDE OPEN	MISSING TEETH 	LOWER 	CROWNED TEETH 		BRIDGE WORK 		FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY			
FILLINGS 																		
CAVITIES 					UPPER DIAGRAM REPRESENTS THE MOUTH WIDE OPEN													
MISSING TEETH 					LOWER 													
CROWNED TEETH 																		
BRIDGE WORK 																		
FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY																		
LEFT THUMB	REMARKS: UNK I-4136 APCB Musuluan, Manila, P.I., formerly UNK I-709 UNAF Cam Manila M, Luzon, P.I., might be anyone of the remains whose names are listed in previous Report of Interment. QAC Form 1044, 1044-A and 1044-B accomplished.																	
RIGHT THUMB																		
RIGHT INDEX FINGER																		
RIGHT MIDDLE FINGER																		
RIGHT RING FINGER																		
RIGHT LITTLE FINGER																		

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

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

DATE OF REPORT

5 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-789 (LANI ER, Charles S) (Formerly UNKNOWN C-249 Cabanatuan Cemetery)</p>		<p>SERIAL No. 6384960</p>
	<p>GRADE Pfc</p>	<p>ORGANIZATION 31st Inf</p>	<p>BRANCH OF SERVICE Army</p>
	<p>RACE</p>	<p>RELIGION</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 <i>Malnutrition, Diphtheria, Avitaminosis</i></p>	<p>DATE OF DEATH 28 Oct 42</p>
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EMERGENCY ADDRESSEE (Name, relationship, and address)
Mrs. M. C. Lanier (M) White Plains, Georgia.

<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) Records shows (Six (6) bodies buried in common grave, Four (4) Unknowns of which were unidentified and may be any of the ff:- Pfc Murphy, Joseph C. 14042476 31st Inf Pfc Lanier, Charles S. 6384960 31st Inf Sgt Berendt, Louis F. 6832240 31st Inf Pvt Nelson, Arvid K. 19054295 MD</p>
<p>WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (2)</p>	

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 12 Jan 46	HOUR 0900	BURIED IN (Shroud, blanket, or name of other) Shelter Half	TYPE OF GRAVE MARKER Cross	PLOT No. 2	ROW No. 19	GRAVE No. 2463
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<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 POW Camps I & II Cabanatuan Cemetery, Luzon, P I 45.7-70.9 1/50,000</p>	<p>PLOT No. 7</p>	<p>ROW No. 0</p>	<p>GRAVE No. 713</p>
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<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>
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<p>IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes</p>	<p>IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes</p>
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<p>BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) UNKNOWN X-788 (MURPHY, Joseph C) (Formerly UNKNOWN C-248 Cabanatuan Cemetery)</p>	<p>RANK Pfc</p>	<p>SERIAL No. 14042476</p>	<p>ORGANIZATION 31st Inf</p>	<p>GRAVE No. 2462</p>
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<p>BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-790 (BERENDT, Louis F) (Formerly UNKNOWN C-250 Cabanatuan Cemetery)</p>	<p>RANK Sgt</p>	<p>SERIAL No. 6832240</p>	<p>ORGANIZATION 31st Inf</p>	<p>GRAVE No. 2464</p>
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<p>SIGNATURE OF PERSON PREPARING REPORT <i>R. C. Barrett</i> R. C. BARRETT, S/Sgt., GRS.</p>	<p>SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>E. M. Moore</i> E. M. MOORE, 1st Lt., QMC.</p>
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DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.

40

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.


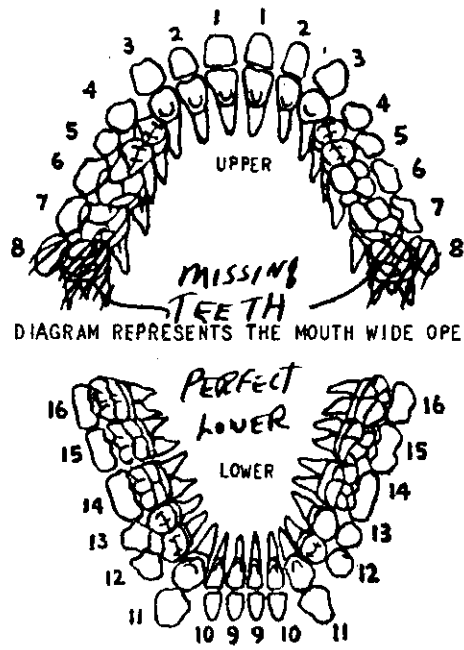




6 MAR 1948

LEFT LITTLE FINGER
LEFT RING FINGER
LEFT MIDDLE FINGER
LEFT INDEX FINGER
LEFT THUMB
RIGHT THUMB
RIGHT INDEX FINGER
RIGHT MIDDLE FINGER
RIGHT RING FINGER
RIGHT LITTLE FINGER

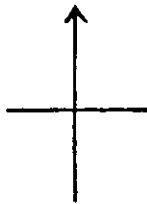
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
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WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
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OTHER IDENTIFICATION CLUES

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



REMARKS: