

FILE IDENTIFICATION TOPPER

FILE NUMBER

293 unkr manila # 2 X-824

SUBJECT

Also manila X-4635

CINCPAC 293
GRS Far East

26
23 August 1949

SUBJECT: Approval of Unidentifiability

TO : Commanding General
Philippine Command
APO 707, c/o Postmaster
San Francisco, California
ATTN: AGXS, PHILCOM ZONE

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

Unknown #	AGXS Mausoleum Manila, formerly #	USAF Com., Manila #2
" X- 642,	" " " "	" X- 155,
" X- 644,	" " " "	" X- 157,
" X- 417,	" " " "	" X- 269,
" X- 419,	" " " "	" X- 271,
" X- 794,	" " " "	" X- 309,
" X- 798,	" " " "	" X- 313,
" X-1704,	" " " "	" X-3412,
" X-1900,	" " " "	" X-3254,
" X-1298,	" " " "	" X-3629,
" X- 330,	" " " "	" X- 74,
" X- 452,	" " " "	" X- 305,
" X- 608,	" " " "	" X- 119,
" X- 791,	" " " "	" X- 306,
" X- 982,	" " " "	" X-3922,
" X-1343,	" " " "	" X-3560,
" X-3154,	" " " "	" X-1031,
" X-4635,	" " " "	" X- 826,

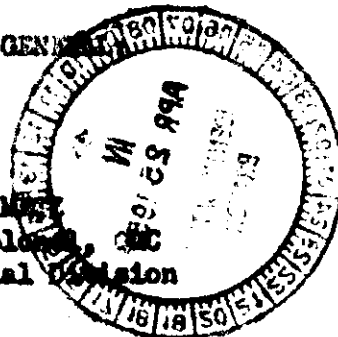
2. Recommendations for Unidentifiability have been approved by this Office. Request your records be amended accordingly.

FOR THE ACTING THE QUARTERMASTER GENERAL

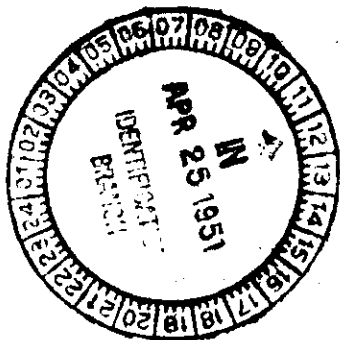
A. C. King
L. H. White
J. Windsor

T. H. Mott
Lt. Colonel, USAF
Memorial Division

cc: CINCPAC, APO 500



ATKINS ROAD, WILKINSON 2046



HEADQUARTERS
PHILIPPINES COMMAND
UNITED STATES ARMY

GSGR 293

APO 707

SUBJECT: Unidentifiable Remains

8 AUG 1949

TO : The Quartermaster General
Department of the Army
Washington 25, D.C.
ATTN: Memorial Division

1. In accordance with the provisions of your letter, file GSGRU 293, GRS (Far East), dated 17 September 1948, subject: Resolution of Cases of Unidentified Deceased, the following unknown remains, presently stored at AGRS Mausoleum, Manila, P.I., have been processed by the Central Identification Laboratory and considered "Unidentifiable" by reason of lack of sufficient identifying data:

UNKNOWN X-198	AGRS Mslm	UNKNOWN X-1343	AGRS Mslm
" X-306	" "	" X-3154	" "
" X-323	" "	" X-3321	" "
" X-791	" "	" X-3414	" "
" 982	" "	" X-4635	" "

2. Forwarded herewith, for your consideration, are new GSC Forms 1044 for the above-mentioned Unknowns.

FOR THE COMMANDING GENERAL:

JOHN M. WESTON JR
1st Lt. AGD
Asst. Adj. Gen

10 Incls
GSC Forms 1044 w/certificates
of Unidentifiability

(RECEIVED)
(AUG 16 1949)

C
O
P
Y

QMGMT 293
X-4635, AGHS Mausoleum, Manila
(Formerly X-826, USAF Cemetery,
Manila #2, P.I.)

30 June 1949

SUBJECT: Identification of World War II Deceased

TO : Commanding General
Philippine Command
APO 707, c/o Postmaster
San Francisco, California

ATTN: AGHS, PHILCOM ZONE

1. Reference is made to Proceedings of your Board of Review, dated 11 March 1949, your headquarters, recommending the following identification:

X-4635 AGHS Mausoleum, Manila (Formerly X-826, USAF Cemetery Manila #2, P.I.) as Capt. James A. Svobodny, O-319270

2. After a thorough analysis of this case, it is considered that the documentary evidence presented is insufficient to establish identification. The dental chart prepared for Unknown X-4635 compares very unfavorably with the dental chart for Capt. Svobodny.

3. Board Proceedings are returned herewith, disapproved.

FOR THE POSTMASTER GENERAL:

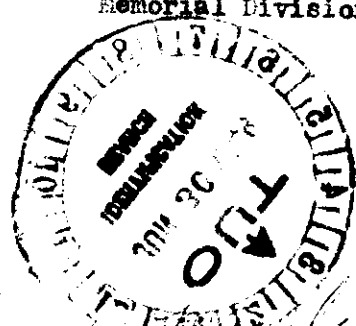
1 Incl:
Bd Proceedings

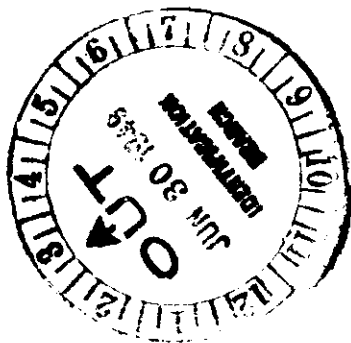
cc: Adm Section
J. W. Lewis:pmr
L. M. White:MMW
J. Windsor

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

REB

NJS





POST OFFICE
LONDON ONTARIO
CANADA

ROS X-4635 news (manila) formerly X-826
missing from folder when filed 8-24-49

AIR MAIL

BASIC: Ltr fr Dept of the Army, OCMG, Wash. 25, D. C., file OCMGT 293, Unknown X-4635, AGRS Mausoleum, Manila, P. I. (Formerly USAF Cemetery Manila #2), P. I., dtd 18 April 1949, subject: Identification of Unknown Deceased.

GSCR 293

1st Ind

HEADQUARTERS, PHILIPPINES COMMAND, APO 707 26 MAY 1949

TO: The Quartermaster General, Department of the Army, Washington 25, D. C., ATTN: Memorial Division

1. In compliance with basic communication, the remains of Unknown X-4635, AGRS Mausoleum, Manila, P. I., were reprocessed.
2. Forwarded herewith are the new reprocessing reports for subject Unknown.

FOR THE COMMANDING GENERAL:

John A. Marszal
JOHN A. MARSZAL
 1st Lt., AGD
 Asst Adj Gen



- 2 Incls:
 1 - w/d
 Added:
 2 - OMC Forms 1044
 for X-4635, AGRS
 Mslm, Manila.

AIR MAIL

**RAF
FILE**

Identification Branch

293
 Mank. X-4635
 (Mansel) Manila P.I.

MANTLE
1949

JUN 6 1949
RECEIVED

10 9 8 7 6 5 4 3 2 1
JUN 2 1949
RECEIVED

10 9 8 7 6 5 4 3 2 1
RECEIVED
JUN 2 1949
O.C.M.G.
M & R BR.

AGRS

DEPARTMENT OF THE ARMY
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

IN REPLY REFER TO OCMGT 293

18 April 1949

Unknown X-4635
AGRS Mausoleum, Manila, P.I.
(Formerly USAF Cemetery Manila #2), P. I.

SUBJECT: Identification of Unknown Deceased

TO : Commanding General
Philippine Command
APO 707, c/o Postmaster
San Francisco, California

ATTENTION: AGRS, PHILCOM ZONE

1. Reference is made to Proceedings of your Board of Review dated 11 March 1949 recommending that the remains of Unknown X-4635, AGRS Mausoleum, Manila, P.I. (formerly Unknown X-826, USAF Cemetery Manila #2, P. I.) be identified as those of Captain James A. Svobodny, O-319 270.
2. Additional dental evidence is submitted on inclosed OCMG Form 371 for Captain Svobodny.
3. In view of this additional evidence, it is requested that these remains be reprocessed and the laboratory findings be forwarded to this Office at the earliest possible date.
4. Further action in this case has been suspended pending the receipt of new processing reports.

FOR THE QUARTERMASTER GENERAL:

1 Incl:
OCMG Form 371 (in dup) (Svobodny)

T. H. Metz
T. H. METZ
Lt. Colonel, OMC
Memorial Division

NAT
File

8/2/49
Identification Branch

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-4635 (Formerly Ink X-826, Manila # 2)				2. DATE OF REPORT 21 May 1949	
3. NAME OF CEMETERY AGRS MAUSOLEUM, MANILA, P. I		4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT U.T.D.	9. ESTIMATED HEIGHT 181 - 71.26 - 5' 11 $\frac{1}{4}$ "	10. COLOR OF HAIR U.T.D.	11. RACE White
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

Three (3) identification tags and one (1) grave marker.

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

N O N E

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

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

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

Fused second and third cervical vertebrae.

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)


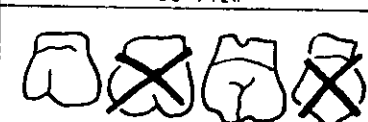






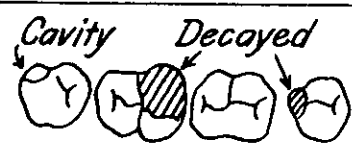
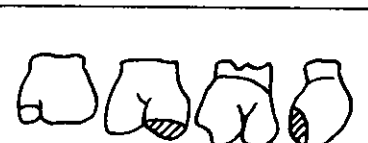
N O N E

NAT
File

Branch

18.

TOOTH CHART

	TOP VIEW	SIDE VIEW
MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X"ED OUT AND LABELED THUS:		
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:		
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:		
FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:		
CARIES (Cavities): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:		

FRACTURED

RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
						P	P	P	P			P			← MAXILLA MISSING →
Side View								Side View							
UPPER								UPPER							
Top View								Top View							
LOWER								LOWER							
Side View								Side View							
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

PARTIALLY IMPACTED

IMPACTED

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."

Maxilla is fractured on median line. Portion of the maxilla on L 7 - L 8 and teeth are missing. R 16 is partially impacted and L 16 is impacted.

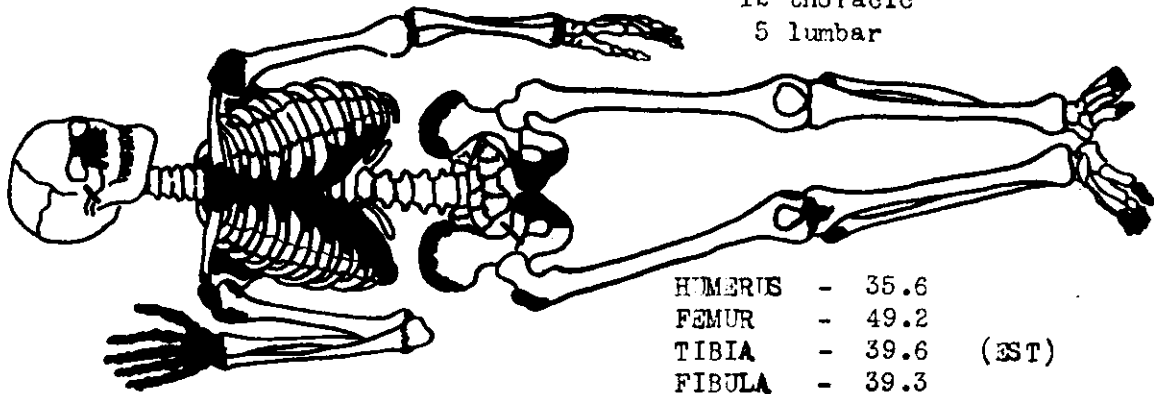
NAT
File

J. J. McDermott
J. J. McDERMOTT
Laboratory Officer, CIP

19. BLACK OUT PARTS OF BODY NOT RECORDED

VERTEBRAE PRESENT:

- 7 cervical
- 12 thoracic
- 5 lumbar



- HUMERUS - 35.6
- FEMUR - 49.2
- TIBIA - 39.6 (EST)
- FIBULA - 39.3

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

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

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

Skull circumference - 21 1/8 inches. Age estimate - 27 to 30 yrs.

These are the remains of a tall, well-muscled man in his late twenties. Because of extensive erosion no weight estimate can be given.

NAT
File

Lewis

8/23/49

Branch

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

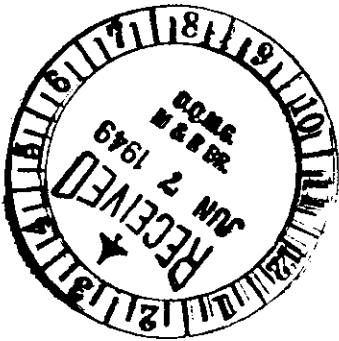
JAMES J. McDERMOTT
Laboratory Officer, CIP

SIGNATURE

James J. McDermott

PIE
KVI

64646



QIGHT 293

18 April 1949

Unknown I-4835
AGRS Mausoleum, Manila, P.I.
(Formerly USAF Cemetery Manila #2), P. I.

SUBJECT: Identification of Unknown Deceased

TO : Commanding General
Philippine Command
APO 707, c/o Postmaster
San Francisco, California

ATTENTION: AGRS, PHILCON ZONE

1. Reference is made to Proceedings of your Board of Review dated 11 March 1949 recommending that the remains of Unknown I-4835, AGRS Mausoleum, Manila, P.I. (formerly Unknown I-828, USAF Cemetery Manila #2, P. I.) be identified as those of Captain James A. Svoboda, O-319 270.

2. Additional dental evidence is submitted on inclosed OJMG Form 371 for Captain Svoboda.

3. In view of this additional evidence, it is requested that these remains be reprocessed and the laboratory findings be forwarded to this Office at the earliest possible date.

4. Further action in this case has been suspended pending the receipt of new processing reports.

FOR THE CHIEF OF BUREAU:

APR 18 5 50 AM '49
OJMG T.M.R. BR



2
KES
KJS

1 Incl:
OJMG Form 371 (in dup) (Svoboda)

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

cc: Adm Section

J. W. Lewis: dal
L. M. White: (111)
J. Windsor

Lewis
8/23/49
Identification Branch

Handwritten notes:
Svoboda, James A. O-319, 270
1118 4/18/49 - 1118 (1118)

27

1. FILE UNDER NO. **295 - Unk. P. I. X- 4635 (Mus. Manila)**

SYNOPSIS

2. TYPE OF DOCUMENT: **Letter** 3. DATE: **21 March 1949**

4. FROM: **INR., Philipines Command, AFHQ 707**

5. TO: **WAME**

6. SUBJECT: **Identification of Unknowns**

**X-1190 as GONZALEZ, Jerry G. Capt. O-202 324
.....**

7. DOCUMENT FILED UNDER NO. **295 - Unk. P. I. (also) (Mus. Manila) (-1010, 1028, 1031, 1077, 1190 & X-4635)**

msb

INSTRUCTIONS.—Enter after the above headings information as follows:

- 1. File classification under which this cross-index sheet is to be filed.
- 2. Appropriate term, such as: "ltr," "memo," "1st ind," etc.
- 3. Date of Document.
- 4 and 5. Enter either or both, as applicable.
- 6. Brief and comprehensive synopsis of the content or subject matter.
- 7. File classification under which the document is filed.

**NAT
File**

[Handwritten signature]
Branch

DISINTERMENT DIRECTIVE

/dps

1

Interred 17 Aug 1949
H 13 104 McKinley
Caremark
CAPT. R. S. BRY

Cemetery Superintendent
SECTION A
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7747 00457

DATE
15 06 48
DAY MONTH YEAR

NAME: **UNKNOWNX-000826** SERIAL NUMBER: **000826** RANK: **0** ARM: **0** DATE OF DEATH: DAY MONTH YEAR

CEMETERY: **USAF CEMETERY MANILA NO 2** DISPOSITION OF REMAINS: **0** CODE: **7701** DIST. PT.: **80**

PLOT: **2** ROW: **19** GRAVE: **2384** COUNTRY: **PHILIPPINE ISLANDS** CAUSE OF DEATH: **6**

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
**FORT MCKINLEY CEMETERY
MANILA, PHILIPPINE ISLANDS**

NAME AND ADDRESS OF NEXT OF KIN
(BY ADMINISTRATIVE DECISION)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME: **WT A-000100** SERIAL NUMBER: **000100** RANK: **0** DATE OF DEATH: **02 Sept 48** DATE DISTINTERRED: **02 Sept 48**

IDENTIFICATION TAG ON: REMAINS MARKER ORGANIZATION: **UNKNOWN** RELIGION: **0** IDENTIFICATION VERIFIED BY: **Joseph S. Owen** NAME AND TITLE: **Embaler**

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: **SPALTER TAMP** CONDITION OF REMAINS: **SERIALIZED**

OTHER MEANS OF IDENTIFICATION: **7701**

MINOR DISCREPANCIES: **Two no pins to be show UNKNOWN X-000826 - ARBS logs.**

REMAINS PREPARED AND PLACED IN CASKET
DATE: **02 Sept 48** BY: **JOSEPH S. OWEN**

CASKET SEALED BY: **JOSEPH S. OWEN** EMBALMER (Signature): *Joseph S. Owen*

CASKET BOXED AND MARKED: **0** SHIPPING ADDRESS VERIFIED BY: **0**

DATE: **02 Sept 48** BY: **WALTER L. ALLISON, Lt., Inf.** **LUCIO S. PATONIO, 1st Lt., Inf.**

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

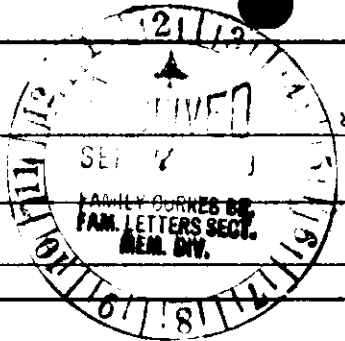
Lucio S. Patonio
LUCIO S. PATONIO, 1st Lt., Inf.
SIGNATURE OF GRS INSPECTOR

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

FILE
RECORDS ANNOTATED
DATE: **16 Sept 49**
NAME: **Bell**
R & R BR.

RECORD OF CUSTODIAL TRANSFER

FROM		AGRS MAUSOLEUM		TO		FORT JACKINLEY MILITARY CEMETERY	
KIND OF CONVEYANCE		TRUCK		NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER		<i>Conover</i>	
DATE				DATE		17 AUG 1945	
2. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			
3. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			
4. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			
5. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			
6. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			
7. SHIPPED							
FROM				TO			
KIND OF CONVEYANCE				NAME OF CONVOYER			
SIGNATURE OF SHIPPER				SIGNATURE OF RECEIVER			
DATE				DATE			



24

Unknown 293
Unknown X-826
(Manila No. 2) / Luzon, P.I.

243 unk. P.D. 7-826 (Manila #2)

22 April 1947

SUBJECT: Identification of Unknown Deceased

TO : Commanding General
Philippine-Ryukyus Command
APO 707, c/o Postmaster
San Francisco, California

1. Receipt is acknowledged of dental chart for Unknown X-826, Manila No. 2, Plot 2, Row 19, Grave 2384, and correspondence related to Pfc. William B. Ayers, 6397811.

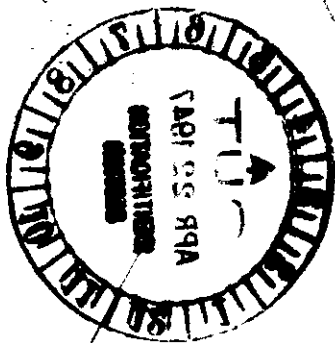
2. Upon completion of investigation of this case, your office will be advised.

FOR THE QUARTERMASTER GENERAL:

JAMES C. MacFARLAND
Major, GAC
Memorial Division

and

27
NJS



REC'D
APR 22 3 00 PM '47
BRANCH
SIGN.

710 X293 Ayers, Wm B. 6397811

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE


18 July 1949
Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown No. 236, Plot 2,
Row 19, Grave 2304, USMC 1st Gen. 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:


E. McNEMAR
Captain, QMC
Chief, Records Branch

Atch: Form 1044

Received 0092
Not identifiable from
information presently
available

Serial #10

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-4635 (Formerly UNK X-826 Manila #2)				2. DATE OF REPORT 20 July 1949	
3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	810	A	331	DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT 5' 11 5/8"	10. COLOR OF HAIR UTD	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

UTD

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"

Incl. # 10²

TOOTH CHART		TOP VIEW	SIDE VIEW
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:			

Fractured

RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
						P	P	P	P			P			Maxilla Missing
Side Views															
UPPER															
LOWER															
Side Views															
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16
Impacted		See Remarks										Impacted			

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."

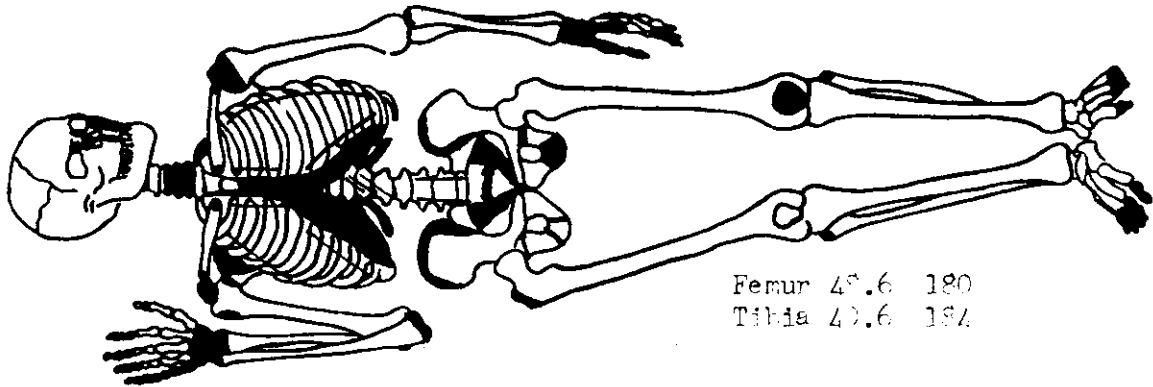
R 11 is rotated from lingual-mesial to facial surface.

J. J. McDermott
Laboratory Officer, CIP

"UNIDENTIFIABLE"

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

29. BLACK OUT PARTS OF BODY NOT COVERED



Femur 47.6 180
Tibia 42.6 184

Estimated height: 182 cm or 5' 11 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 ID, identification tags or personal effects found with remains.

Estimated weight of remains - 7 lbs.

Circumference of skull - 21 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

JAMES J. McDERMOTT
Laboratory Officer, CIP

SIGNATURE

James J. McDermott

RESTRICTED

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

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

DATE OF REPORT

4 Feb 46

Imprint Identification Tag If Possible.
DO NOT TYPE

Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)

UNKNOWN X-826

SERIAL No.

GRADE

ORGANIZATION

BRANCH OF SERVICE

RACE

RELIGION

IF OTHER THAN U. S. DEAD, GIVE
NAME OF COUNTRY

PLACE OF DEATH

Bataan, Luzon, P.I.

CAUSE OF DEATH

DATE OF DEATH

EMERGENCY ADDRESSEE (Name, relationship, and address)

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)

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.
11 Jan 46	0900	Shelter Half	Cross	2	19	2384

WAS THIS A REBURIAL?
(Yes or no)

Yes

IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE

USAF Cemetery Cababalan, #1, Luzon, P.I.
833500-1748500

PLOT No.	ROW No.	GRAVE No.
D	1	3

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-827

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

2383

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

McCLINTOCK, Jack

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

Sgt

19018725

21st INF Bn

2385

SIGNATURE OF PERSON PREPARING REPORT

/s/t/ R.C. PARBET, S/Sgt, GRS

SIGNATURE OF GRS OFFICER VERIFYING REPORT

/s/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 Officer. Copies for retention in theater as prescribed by theater commander.

RESTRICTED

Section 3. IDENTIFIED REMAINS.

INSTRUCTIONS:


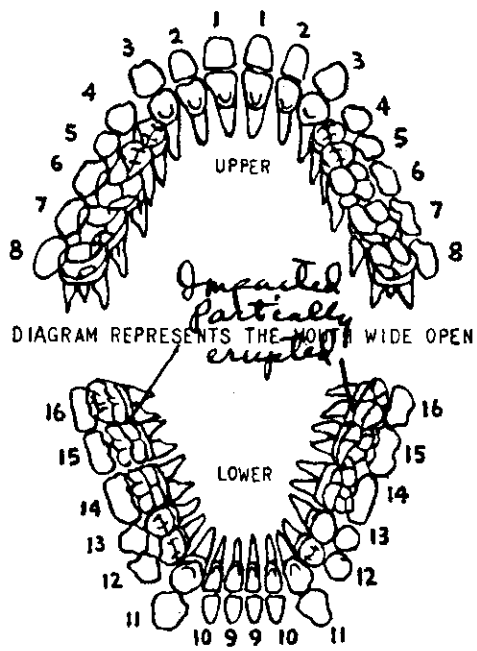




(a) Great care will be taken to record the most minute clues for the future identity of remains. Fill in anatomical characteristics below, and any other clues under "Other," such as social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers of planes, vehicles,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

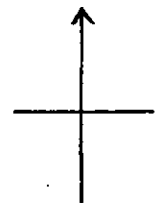
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
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WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
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OTHER IDENTIFICATION CLUES

<p>FILLINGS</p>  <p>SILVER FILLING GOLD FILLING</p>	
<p>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:

Identified as as American by T/Sgt Francisco Getig,
R-321775, Hq. & Hq. Det., 3rd LP Bn. AUS.

RESTRICTED

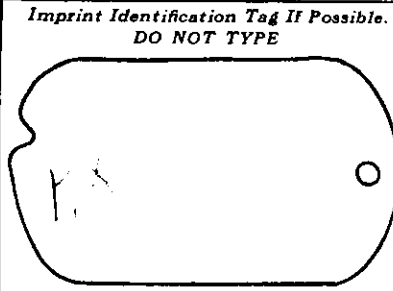
U-1246

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

4 Feb 46



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) U N K N O W N X-826		SERIAL No.
GRADE	ORGANIZATION	BRANCH OF SERVICE
RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH Bataan, Luzon, P I	CAUSE OF DEATH	DATE OF DEATH
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EMERGENCY ADDRESSEE (Name, relationship, and address)

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)	

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 11 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. 2384
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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 USAF Cemetery Cababalan, #1, Luzon, P I 833500-174850C	PLOT No. D	ROW No. 1	GRAVE No. 3
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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) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes
---	---

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) U N K N O W N X-827	RANK	SERIAL No.	ORGANIZATION	GRAVE No. 2383
--	------	------------	--------------	--------------------------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) McCLINTOCK, Jack	RANK Sgt	SERIAL No. 19016425	ORGANIZATION 21st PUR Sq	GRAVE No. 2385
--	--------------------	-------------------------------	------------------------------------	--------------------------

SIGNATURE OF PERSON PREPARING REPORT R. C. BARRETT, S/Sgt., 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

2. / 92'

Section 3.— UNIDENTIFIED REMAINS.


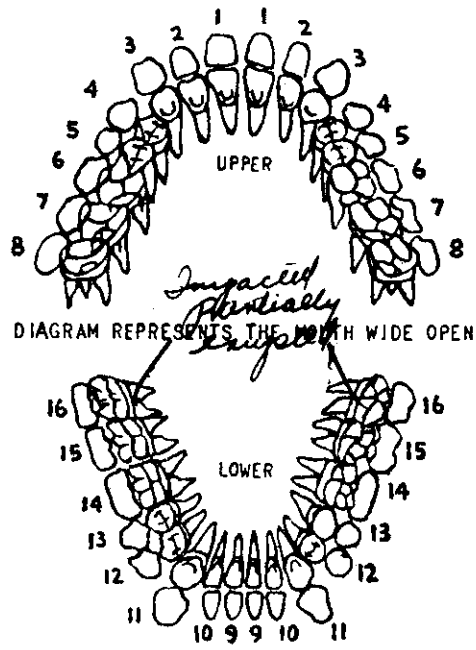




INSTRUCTIONS:

(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.

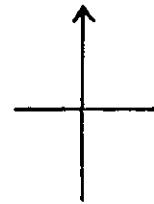
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

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

OTHER IDENTIFICATION CLUES

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

Identified as an American by T/Sgt Francisco Catig,
R-321775, Hq. & Hq. Det., 3rd MP Bn., AUS.