

RECLASSIFICATION SHEET

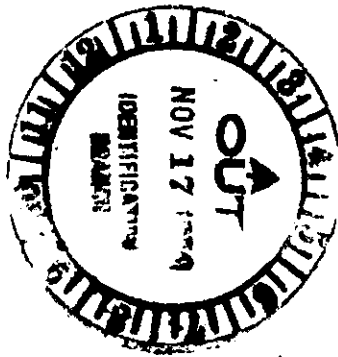
PAPERS ORIGINALLY FILED 293. Yank (Misc) Mandela #2 X 131, X 132, X 133,
X 134, X 135, X 136, X 137, X 138, X 139, X 140, X 141, X 142, X 143, X 144, X 145
X 146, X 147, X 148, X 149, X 150, X 151, X 152, X 153, X 154, X 155, X 156, X 157
SYNOPSIS AND DATES X 157

Misc now filed

NEW CLASSIFICATION 293. Yank. Mandela #2 X 131

*10/2/50
EG*

RECLASSIFICATION SHEET



QWENT 293
GRS Far East

13 September 1949

SUBJECT: Approval of Unidentifiability

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

ATTN: AGRS, PHILCOM ZONE

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

Unknown X-624,	AGRS Mausoleum Manila,	formerly X-136,	USAF Gen.,	Manila #2					
" X-659,	" " "	" " "	" X-172,	" " "	"	"	"	"	"
" X-1520,	" " "	" " "	" X-3522,	" " "	"	"	"	"	"
" X-1922,	" " "	" " "	" X-3256,	" " "	"	"	"	"	"
" X-1945,	" " "	" " "	" X-3280,	" " "	"	"	"	"	"

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

FOR THE ACTING THE QUARTERMASTER GENERAL:

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

cc: Adm Section

N. McLaurin:dal
L. M. White
J. Windsor

REB

TEC

HEADQUARTERS
PHILIPPINES COMMAND
UNITED STATES ARMY

GSCR 293.9

AFO 707

SUBJECT: Unidentifiable Remains

26 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 QMGMU 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-624	AGRS	Mslm	UNKNOWN	X-1922	AGRS	Mslm
"	X-659	"	"	"	X-1945	"	"
"	X-1520	"	"	"	X-2132	"	"

2. Forwarded herewith, for your consideration, are new QMC Forms 1 044 for the above mentioned Unknowns.

FOR THE COMMANDING GENERAL:

6 Incls
QMC Forms 1044 w/certificates
of Unidentifiability

/s/ C. H. Lieurance
C. H. LIEURANCE
2nd Lt., AGD
Asst. Adj Gen

1	Interred 24 Aug 1949 H 1 88 Ft. McKinley <i>Caremark</i>		DISINTERMENT DIRECTIVE	
	Cemetery Superintendent SECTION A NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER 7747 02815	DATE 15 06 48 DAY MONTH YEAR
NAME		SERIAL NUMBER UNKNOWNX-000136	RANK	ARM
CEMETERY USAF CEMETERY MANILA NO 2		DATE OF DEATH		DISPOSITION OF REMAINS
LOT F12	ROW 4	GRAVE 395	COUNTRY PHILIPPINE ISLANDS	CAUSE OF DEATH
				7701 80 CODE DIST. PT.
				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 UNK X-000136 UNK X-624 (Maus)	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED 22 Sept 48
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	ORGANIZATION UNKNOWN	RELIGION	IDENTIFICATION VERIFIED BY C. MAXLEE FANN Embalmer NAME AND TITLE	

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Shelter Half	CONDITION OF REMAINS Skeletal
----------------------------------	----------------------------------

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES /

Two (2) Remains Tags- UNK X-624 (Maus)

REMAINS PREPARED AND PLACED IN CASKET

DATE 22 Sept 48 BY C. MAXLEE FANN

CASKET SEALED BY C. MAXLEE FANN EMBALMER (Signature) *C. Maxlee Fann*
C. MAXLEE FANN

CASKET BOXED AND MARKED SHIPPING ADDRESS VERIFIED BY

DATE 22 Sept 48 BY HORACE L. ALLISON, Sgt. INF. CHARLES R. BATES, 1st Lt., USAFR

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

Charles R. Bates
CHARLES R. BATES, 1st Lt., USAFR

SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

14 SEP 1949

REPATRIATION
BRANCH
MCPD CIV. *W. J. ...*

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM WAGRS MAUSOLEUM		TO FORT MCKINLEY MILITARY CEMETERY	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER <i>[Signature]</i>	
SIGNATURE OF SHIPPER <i>[Signature]</i>	DATE	SIGNATURE OF RECEIVER <i>Carermark</i>	DATE 2 A AUG 1949

2. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

REPAIRS BRANCH
 RECORDS SECTION
 SEP 12 9 24 AM '49
 FORT MCKINLEY
 PHILIPPINES

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 FORT MCKINLEY CEMETERY	DATE	SIGNATURE OF RECEIVER (RELATIVE DECISION)	DATE

6. SHIPPED

FROM BIS & FOR BRITISH ISLANDS		TO ISLANDS	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER WELLSER	DATE	SIGNATURE OF RECEIVER	DATE

UNKNOWN SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

FILE UNDER NO. 292 - Unknown P.I. E-136 (Enila #2)

INDEX SHEET

SYNOPSIS

Letter

2 June 1947

FROM: OCMG
TO: Org. Rec. Br., Rec. Admin. Center, AGO, St. Louis, Mo.

SUBJ: Identification Data

DOCUMENT FILED UNDER NO. 293 - Unknown P.I. Misc (Enila #2) (X-121 thru 158)

rtb

FILE UNDER NO. 293 - Unknown P.I. L- 136 (Encls #2)

INDEX SHEET

SYNOPSIS

Letter

2 June 1947

FROM:
TO:

CCMG
Org. Rec. Br., Rec. Admin. Center, AGO, St. Louis, Mo.

SUBJ:

Identification Data

DOCUMENT FILED UNDER NO. 293 - Unknown P.I. Misc (Encls #2) (X-121 thru 158)

rtb

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE
APO 900

5 Aug 1949

Date

SUBJECT: Unidentifiable Remains

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


The records pertaining to Unknown X- 136, Plot 2,
Row 4, Grave 395, USMC Manila #2, Luzon, P.I. 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. MCNEMAR
Captain, GIC
Chief, Records Branch

Atch: Form 1044

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

Received 6 Sept 49 **COMG**
Not identifiable from
information presently
available 
13 Sept 49

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-624 (Formerly UNK X-136 Manila #2)				2. DATE OF REPORT 5 Aug 1949	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.	4. PLOT 801	5. ROW E	6. GRAVE 1116	7. DATE OF	
				DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

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

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? <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)

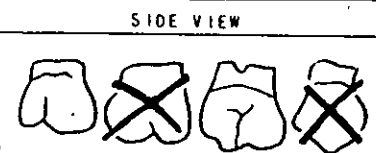
NONE

"UNIDENTIFIABLE"

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

Incl 12

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:



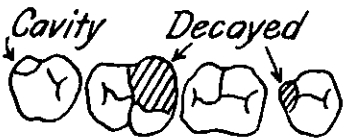
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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
←								→							
A o								A o							
M A X I L L A															
M I S S I N G															
Side Views															
UPPER															
LOWER															
Side Views															
X	A o	A od	A od			P	P	P	P			A o	A o	A o	X
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."

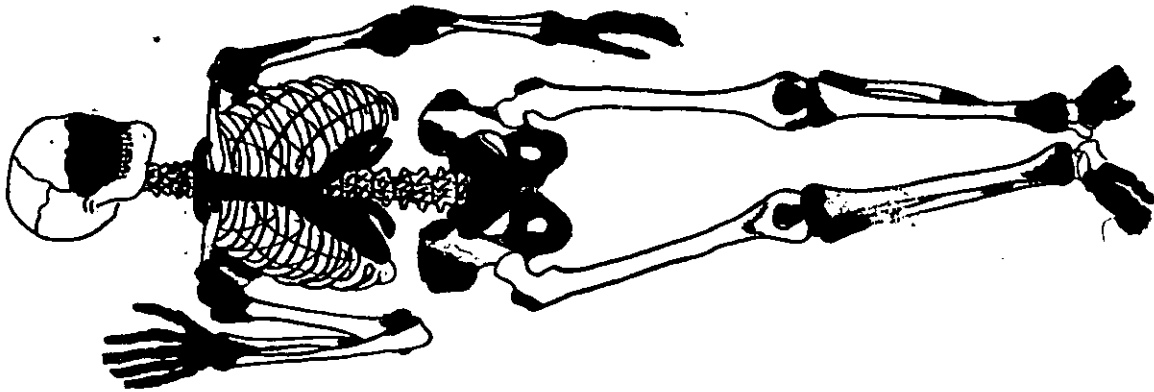
R3, 7, 6 and L2, 3, 7 are loose present with remains.

"UNIDENTIFIABLE"

J. J. McDermott
Laboratory Officer

BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA

19. BLACK OUT PARTS OF BODY NOT RECOVERED



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 - 4 lbs.

"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

SIGNATURE

JAMES J. McDERMOTT
Laboratory Officer, CIP

X-624

IDENTIFICATION DENTAL CHART

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

UNKNOWN X-624 (Formerly UNK X-136)
USAF Cem. Manila #2, Luzon, P.I.)

8 Oct 47

Unknown

DATE
Unknown

LAST NAME FIRST INITIAL RANK SERIAL NO.
Unknown Unknown

UNIT ORGANIZATION
Bataan, Luzon, P.I. AGRS Mausoleum, Manila, P.I. 801 E 1116

PLACE OF DEATH PLACE OF BURIAL PLOT HANGER ROW BAY GRAVE NO.

Mandible missing *STORAGE Individual teeth*

		RIGHT								LEFT									
		UPPER TEETH																	
		8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8		
TYPE		A	A	A	X	X			X	X	X		X	X	X	X	X	TYPE	
LOCATION		0	0	0														LOCATION	

INSIDE — LOOKING OUT

		RIGHT						LEFT											
		LOWER TEETH																	
		16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16		
TYPE		X	A	A	A			X	X	X	X				A	A	X	TYPE	
LOCATION			0	do	do										0	0		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		OCCUSAL (BITING SURFACE BACK TEETH)
	FIXED BRIDGE (INCL. 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)

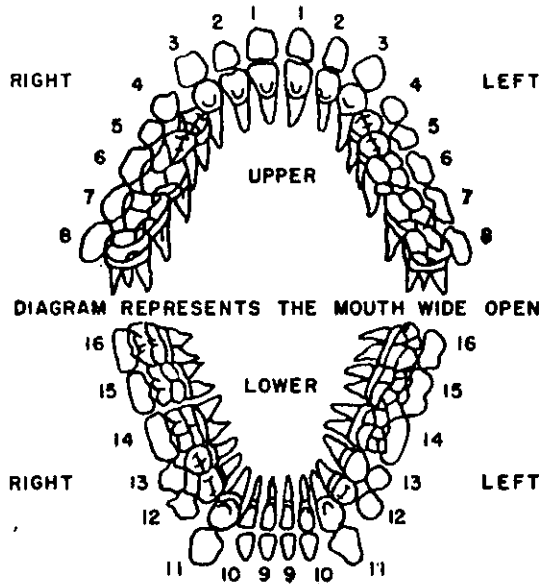
INSTRUCTIONS:

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 UPPER 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, e.g., PORCELAIN CROWNS, GOLD CROWNS (FULL OR 3/4), 3/4 GOLD CROWN WITH SILICATE WINDOW.

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



REMARKS:

/s/ E. F. Moriarty
SIGNATURE OF PERSON WHO PREPARED CHART

/s/ Felix Glass
VERIFIED BY GRS OFFICER

/p/ E. F. MORIARTY
NAME AND RANK TYPED OR PRINTED

/p/ FELIX GLASS, Capt, D.C.
NAME AND RANK TYPED OR PRINTED

SP-6 AGRS Mausoleum Lab
PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

8 Oct 47
DATE

CERTIFIED TRUE COPY:

George T. Gamboa
GEORGE T. GAMBOA
2d Lt., MAC

IDENTIFICATION CHECK LIST

(To be completely filled out and attached to each copy
 of Report of Interment WD QMC Form 1042)

UNKNOWN X-624 (Formerly
 Unknown X-136 USAF Cem Manila #2, Luzon, P.
 Cemetery AGRS Mausoleum, Manila, P.I.
 Plot 801 HANGER Row E BAY GRAVE 1116

CIP, AGRS Mslm, Manila, P.I.

1. Arrived at Cemetery 8 Oct 47
(Hour) (Date)
2. Place of death Bataan, Luzon, P.I.
(Name of closest town) (Coordinates and letter Prefix, maps)
(Sheet, scale and serials used)
3. Remains recovered or disinterred by CMT #1
(Name and organization)
4. Evacuated to Cemetery by _____
(Name and organization)
5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

Item	Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear	/		
	(Type)		
Raincoat	/		
Overcoat	/		
Jacket, Field	/		
Jacket, Combat	/		
Mackinaw	N		
Sweater	O		
Jacket, HBT	N		
* Shirt, Wool OD	/		
Undershirt, Wool	/		
Undershirt, Cotton	/		
Trousers, HBT	/		
* Trousers, Wool OD	/		

Belt, web _____
 Drawers, wool _____
 Drawers, cotton _____
 Leggings, wool _____
 Socks, cotton _____
 * Shoes _____ (type) _____
 Overshoes _____
 Web Equipment _____ (type) _____
 (Other item) _____
 (Other item) _____

* If body is nude, sizes of these items should be computed by measuring the remains

Chevrons or Insignia _____
 (Type & location; shirt, jacket, coat, helmet)
 Shoulder Patch _____

Does clothing indicate that deceased was a member of the Air, Ground or Naval Force?

6. Description of Remains: Skeleton only. Skeletal Chart attached.

Age _____ Height _____ Weight _____ Description of wounds _____

Bandages or dressings _____ Scars _____
 (Length, width, location)

Tattoos _____
 (Number, location — illustrate on separate page)

Outstanding moles, warts or birthmarks _____
 (Yes-no; description, location)

Sunburn or tan, other than hand and face _____

Complexion _____
 (Light, medium, dark, clear, pimples, pocks, freckles)

Build _____
 (Large, fat, thin, muscular)

Hair _____
 (Color, length, quantity, curly, wavy, straight, whorls, or definite parting)

Hair _____
 (Baldness, widows peak, distinctive cutting or other characteristics)

Sideburns _____ Mustache _____ Beard or _____
 (Color, setting, shape) (Color, size, shape) (Length, heavy)

Goatee
 (Light, color, extent)

Eyes Eyebrows
 (Color, setting, shape) (Color, bushiness, extent across nose)

Nose Ears
 (Size, shape, straight) (Size, set close to or far from head)

Mouth Lips
 (Large, medium, small) (Small, large, full)

Teeth
 Tooth Chart attached.
 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

Chin
 (Prominent, receding, pointed, dimples, double)

Jaw Circumference of head in inches
 (Large, small, normal) (Hat band)

Neck Larynx
 (Size, length, short, normal, wrinkled) (Prominent, normal)

Shoulders Arms
 (Broad, straight, small, rounded) (Length, muscular, color, extent and quantity of hair)

Hands
 Fingers
 (Short, thick, long, slender, size of knuckles, missing fingers or joints)

.....
 (Unusual characteristics of fingernails)

Chest
 (Size of nipples, color, quantity and extent of hair, large, small, normal)

Waist
 (Size of navel, appendectomy, amount, quantity, and color of hair)

Back Circumcision Pubic Hair
 (Quantity and extent of hair) (Yes-no) (Color)

Hernioplasty
 (Yes-no; location)

Legs
 (Inseam, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

Feet Toes
 (Size, corns, callouses, flat) (Slender, straight, crooked, overlap)

Evidence of healed fractures
 (Nose, arms, legs, etc.)

NOTE: Use attached charts "A" and "B" to indicate parts not received.

7. Have finger prints been placed on Report of Interment? No
(Yes-no)

If not, explain Remains interred 26 Nov 45, USAF Cemetery Manila #2, Luzon, P.I.

8. Has tooth chart been prepared? Yes If not, explain
(Yes-no)

9. Remarks No ROI bottle nor identification tags and no personal effects found
with the remains to warrant identification. Estimated weight of remains -
4 lbs.

I certify that I have personally viewed the remains of subject deceased and all resulting information has been recorded to the best of my knowledge.

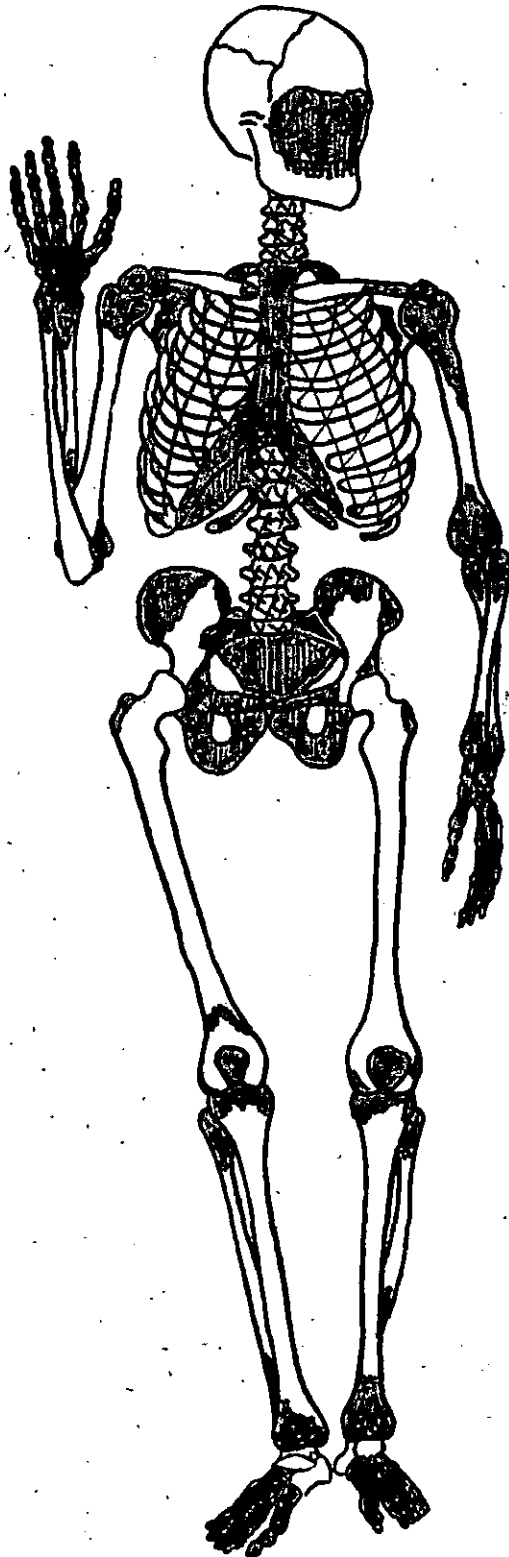
/s/ E. F. Moriarty
(Officer's Name)
SP-6 D-234417
Rank Service
AGRS
(Organization)

CERTIFIED TRUE COPY:
George T. Gamboa
GEORGE T. GAMBOA
2d Lt., MAC

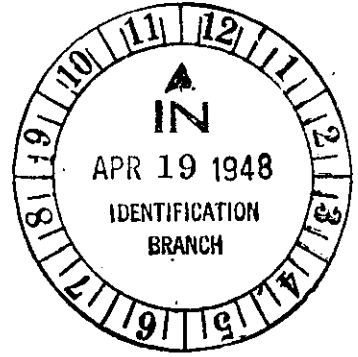
SKELETAL CHART

X-624

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



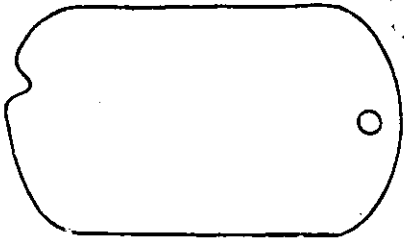
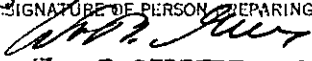
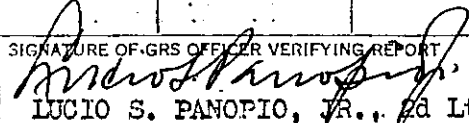
Rib fragments and
Vertebrae fragments



/cbf

RESTRICTED

U617

WD OMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT STORAGE (AR 30-1810 and AR 30-1815)				DATE OF REPORT 13 Oct 47	
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.					
NAME (Last, first, middle initial) UNKNOWN X-624 (Formerly UNK X-136 USAF Cem 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 Bataan, 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)		<div style="display: flex; justify-content: center; align-items: center; gap: 20px;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">MEMORIAL DIVISION</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">DEC 22 2 51 PM '47</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">RECORDS BRANCH</div> </div>					
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 9 Oct 47	HOUR 0800	BURIED IN (Shroud, blanket, or name of other) Casket	TYPE OF GRAVE MARKER None	PLOT No. 801	ROW No. E	GRAVE No. 1116	
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. 4	GRAVE No. 395	
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) STORSD Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes						
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORSD UNKNOWN X-623			RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 1118	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORSD UNKNOWN X-626			RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 1114	
SIGNATURE OF PERSON PREPARING REPORT  Wm. R GILBERT, Adm. Asst.				SIGNATURE OF GRS OFFICER VERIFYING REPORT  LUCIO S. PANOPIO, JR., 2d 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

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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		
CAVITIES		
MISSING TEETH		
CROWNED TEETH		
BRIDGE WORK		
FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY		

REMARKS:

Identification Check List and Dental Chart accomplished.

18 NOV 1947

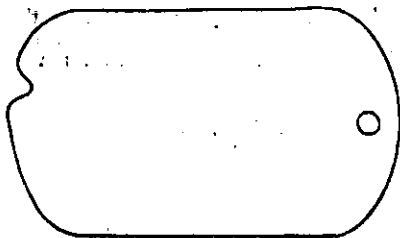
2 4
71



IDENTIFICATION SECTION
REPATRIATION RECORDS BRANCH
MEMORIAL DIVISION

CATEGORY III CASE
NO CLUES
IDENTIFICATION IMPOSSIBLE
AT PRESENT TIME

624
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 6 Dec. 45
Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.					
	NAME (Last, first, middle initial) UNKNOWN X-136 (Cem. Manila No.2) (Formerly Unknown X-6 Cem. No.3, Mariveles)				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)	(SEE OVER)					
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME None			A TRUE COPY Walter H. Cooper WALTER H. COOPER Capt., QMC			
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 No.2, Luzon, P.I.						
DATE OF BURIAL 26 Nov 45	HOUR 1400	BURIED IN (Shroud, blanket, or name of other) Shelter Half	TYPE OF GRAVE MARKER Cross	PLOT No. 2	ROW No. 4	GRAVE No. 395
WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE SS S. Army Cemetery No.3, Mariveles, Luzon P.I. 821-1748			PLOT No. -1	ROW No. 2	GRAVE No. 12
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-135 (Cem. Manila No.2) (Formerly Unknown X-5 Cem. No.3, Mariveles)		RANK	SERIAL No.	ORGANIZATION	GRAVE No. 394	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-137 (Cem. Manila No.2) (Formerly Unknown X-7 Cem. No.3, Mariveles)		RANK	SERIAL No.	ORGANIZATION	GRAVE No. 396	
SIGNATURE OF PERSON PREPARING REPORT /s/t/ R. C. BARRETT, Cpl. GRS			SIGNATURE OF GRS OFFICER VERIFYING REPORT /s/t/ D. L. ARMSTRONG, Capt., 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

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

<p>FILLINGS</p>	<p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
<p>CAVITIES</p>	
<p>MISSING TEETH</p>	
<p>CROWNED TEETH</p>	
<p>BRIDGE WORK</p>	
<p>FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY</p> <div style="text-align: center;"> </div>	

REMARKS:

17th PUR Sqd. USA Found on remains of wooden cross.

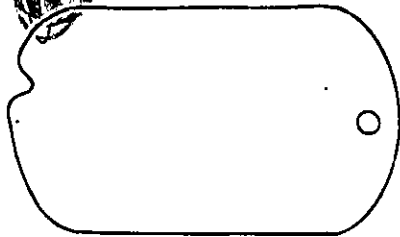
WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

6 Dec. 45

Impression Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) U N K N O W N - X - 136 (Cem. Manila #2) (Formerly Unknown-X-6 (Cem. #3 Mariveles))		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) (See Over)
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) Yes (2)	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

Serial 1008

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	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.
26 Nov 45	1400	Shelter half	Cross	2	4	395

WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE U. S. Army Cemetery #3, Mariveles, Luzon, P. I. 821-1748	PLOT NO. 1	ROW NO. 2	GRAVE NO. 12
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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
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BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) UNKNOWN - X - 135 (Cem. Manila #2) (Formerly Unknown-X-5 Cem. #3 Mariveles)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO. 394
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BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKWON - X - 137 (Cem. Manila #2) (Formerly Unknown-X-7 Cem. #3 Mariveles)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO. 396
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SIGNATURE OF PERSON PREPARING REPORT R. C. BARRETT, Cpl. GRS.	SIGNATURE OF GRS OFFICER VERIFYING REPORT D. L. ARMSTRONG, Capt. QMC.
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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.

Serial 54

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.


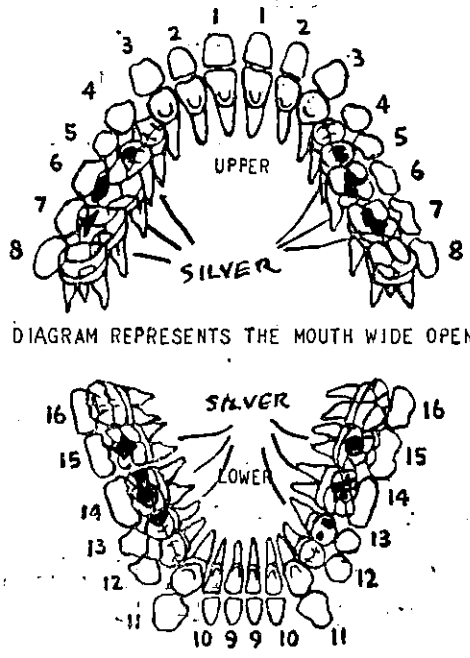




(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

19 DEC 1945

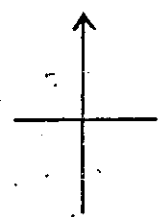
LEFT LITTLE FINGER
LEFT RING FINGER
LEFT MIDDLE FINGER
LEFT INDEX FINGER
LEFT THUMB
RIGHT THUMB
RIGHT INDEX FINGER
RIGHT MIDDLE FINGER
RIGHT RING FINGER
RIGHT LITTLE FINGER

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
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>SILVER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</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:

17th PUR Sqd. USA found on remains of wooden cross.