RECLASSIFICATION SHEET

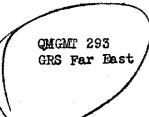
PAPERS ORIGINALLY FILED 293. Cenk Mise) Manula #21, X/31, X/32)
X133, X184, X135, X136, X137, XL38, X139, X140, X141, X142, X143, X144
X145, X146, X147, X146, X149, X150, X151, X152, X153, X154, X155, X156
X157 SYNOPSIS AND DATES X158

Mise now filed

NEW CLASSIFICATION 293. Tent Manula # 2 × 131

10/6/50 &C

RECLASSIFICATION SHEET



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-634	AGRS	Mausoleum	Manila,	formerly	X=147		Cem.	Manila	#2
11	X-932	tt .	11	ដ	ti .	X-4000	81	tt	13	
11			11	tt	12	x-4010	11	**	\$: '	
	X-953,			ā.	£		ris	ri.	ñ	
11	X-1122,	14	u.	**	-	X-3765,	-	Ţ.	-	
. 11	X-1416	11	11	ti	tt	X-3981,	Ħ	a	11	
ň		ê	ř	tt	n	X-3754	ti ti	t i	11	
- u	X-1161,	-	7	5	å	•		2	â	
Ħ	X-1571,	ts .	#	n .	13	X-3535,		-	"	
Ĥ	X-1540	ii -	ù	Ñ	R	X-3531,	Ħ	Ħ	ti .	
	•		à	ē	.	_	ė	ŧŝ	ñ	
11	X-1557,	 M		-	-	X-3513,	· .	=	<u> </u>	
11	X-1659,	Ħ	Ħ	ti.	# #	X-3471,	11	13		
i i		23	ñ	ri	វវ	X-3343	tt	Ĥ	13	
	X-1732,	=	1	2	<u> </u>		â	â	â	
13	X-1734.			19		X - 3345,	-	•••		
À	X-1694,	*	#	12 T	11	X-3392.	Ħ	15	•	
.	· ·	â	ń		ù	•	ũ	i	û	
-	X-1715,	*	-	-	"	X-3403,	-	+	•	

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, QMC Memorial Division **WON 293.9**

SUBJECT: Unidentifiable Remains

TO:

The uartermaster Ceneral Department of the Army Cashington 25, D. C. AlW: Hemorial Division

1. In accordance with the provisions of your letter, file CECT 298, SES (For Tact), dated 17 September 1948, subject: Resolution of Cases of Unidentified Deceased, the following Unknown remains, presently stored at ACES Enusoleum, Manila, P.I., have been processed by the Central Identification Laboratory and considered "Unidentifiable" by reason of lack of sufficient identifying data:

Ulknown X-183 Acres	Selm	CHRICOAR	X-1540	AGG	Holm
X-634			X-1657		
X-932		•	X-1571		
X - 95 3			X-1659		
X-1128			X-1694	•	
X-1161			X-1715		
X-1270			X-1732	•	
X-1519			X-1754		,
X-1416					

2. Forwarded herewith, for your consideration, are new CMG Forms 1046 for the above-mentioned Unknowns.

FOR THE COMMERCIAN GIVE HALL

17 Incle
QIC Forms 1044 w/Certificates
of Unidentifiability



68 GR 293.9

SUBJECT: Unidentifiable Remains

To: The uartermaster General
Department of the Army
Washington 25, D. C.
ATTH: Memorial Division

l. In accordance with the provisions of your letter, file QMGMU 293, GRS (Far Rast), 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-183	A GRS	%slm		UNKNOWN	X-1540	A GRS	Molm	
	X = 634					X-1557			
	X-932					X-1571			
	X-953					X-1659			
	X-1122	2				X-1694			
	X-1161					X-1715			
	X-1278	3				X-1732			
	X-1319)				X-1734			
	X-1416								

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

FOR THE COMMANDING GENERAL:

17 Incls
QMC Forms 1044 w/Certificates
of Unidentifiabilaity





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NAME	<u></u>		•		SERIAL NU	MBER.	RANK	ARM DATE OF DEATH
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(Mausoleum)			ĺ					21 Sept 48
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IMC FORM IEV 15 MAR 46 1194

RECORD OF CUSTODIAL TRANSFER 1. SHIPPED AGRS MAUSOLEUM FORT MCKINLEY MILITARY CEMETERY KIND OF CONVEYANCE NAME OF CONVOYER TRUCK SIGNATURE OF SHIPPER DATE SIGNATURE OF RECEIVER DATE aceRAmark 28 SEP 1949 2. SHIPPED FROM TO KIND OF CONVEYANCE NAME OF CONVOYER SIGNATURE OF SHIPPER DATE SIGNATURE OF RECEIVER DATE 3. SHIPPED FROM KIND OF CONVEYANCE NAME OF CONVOYER SIGNATURE OF SHIPPER SIGNATURE OF RECEIVER DATE 4. SHIPPED KIND OF CONVEYANCE NAME OF CONVOYER SIGNATURE OF SHIPPER, CMC/VICAN DATE SIGNATURE OF RECEIVER DATE 5. SHIPPED (IND OF CONVEYANCE NAME OF CONVOYER IGNATURE OF SHIPPER IT I BEINE ISTAND DATE SIGNATURE OF RECEIVER SYLINE DECISION) FORT MCKINLEY CENETERY 6. SHIPPED FROM -SEANOS F1 22 ANIGGIAINA COA IND OF CONVEYANCE NAME OF CONVOYER SIGNATURE OF SHIPPERS AND BUSINESS AND ALL DATE TO CO -7-20-3 SIGNATURE OF RECEIVER DATE EVALUATION & SHIPPED COOLS &

DATE

ROM

IND OF CONVEYANCE

IGNATURE OF SHIPPER

DATE

NAME OF CONVOYER

SIGNATURE OF RECEIVER

THO

FILE UNDER NO. 293 - Unknown P.I. X-147 (Wrils \$2)

INDEX SHEET

SYNOPSIS

letter

2 June 1947

FROM:

OM

TOs

Org. Rec. Br., Rec. Admin. Center, AGO, St. Louis, Ho.

Subj:

Identification Data

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

rtb

HEADQUARTERS AMERICAN GRAVES REGISTRATION SERVICE PHILCOM ZONE

12 Sept 1949 Date

SUBJECT: Unidentifiable Remains

TO : The Quartermaster

Washington 25, D. C.

Attn: Memorial Division

The records pertaining to Unknown X= 1475 of Plot 2, Row 4, Grave 406, 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:

M. B. McNEMAR
Captain. QMC

Chief, Records Branch

Attch: Form 1044

Received
Not identifiable from
information presently
gvallable

lack 21

	<u> </u>						
ers.	IDENTIF	ICATION DATA					
L. REMAINS OF UNKNOWN				2. DATE OF REPORT			
UNKNOWN X-6	34 (Formerly UNK)	K-147 Manila #2)		15 Sept 1949			
. NAME OF CEMETERY	:	4. PLOT 5. ROW	<u> </u>	7. DATE OF			
AGRS Mausol	eum, Manila, P.I.			DISINTERMENT REINTERMENT			
	PHYS I	CAL DESCRIPTION					
. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR OF HAIR		li. RACE			
140 lbs	. 516 ^{tt}	UTD		Unknown			
	NY OFFICIAL IDENTIFICATION F	OUND WITH REMAINS	 				
	N • n •			•			
13-GIVE DESCRIPTION OF T	ATTOOS OR SCARS ON BODY AND/	OR SUCH INFORMATION OBTA	INED FROM	OTHER SOURCES			
	UTD						
4. WAS BODY BURNED?	TO WHAT EXTENT?						
YES X NO							
5. WAS BODY MANGLED?	TO WHAT EXTENT?						
YES TE NO	· ·						
6. DESCRIBE EVIDENCE OF	HEALED FRACTURES AND BONE M	ALFORMATIONS					
•							
			•				
	None						
SERVICE, ETC. (If 1a	LOTHING, EQUIPMENT AND PERSO undry morks are indistinct s tion when facilities are not	such notation should be m					

"UNIDENTIFIABLE"

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

18.	OOTH CHART	v-034 Ms1W
100	· TOP VIEW	SIDE MICH
MISSING TEETH: ALL TEETH MISSING THROUGH EX- TRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" DOUT AND LABELED THUS:	Tooth Missing	SIDE VIEW
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:	Gold Crown, Porcelain C	rown DDDD
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:	Gold Bridge	
FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:	Gold Filling Silver Filling	
CARIES (Covition): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:	Cavity Decayed	
122 221	Marin	lla vicai
Maxilla Missing RIGHT 6 7 6 5 4 3 2 7	1 1 2 3 4 5 a a a a a a a a a a a a a a a a a a	6 7 8
side.	78800C	S ide Viers
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THE THE POOL		LOWER LOWER
Side MANA MANA MANA MANA MANA MANA MANA MAN	7ADDA	XXX a
16 15 14 13 12 11 10	9 9 10 11 12 13	TH ATTACHED AND INDICATE BETAIN

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

REMARKS: R7 and L6 are loose present with remains.

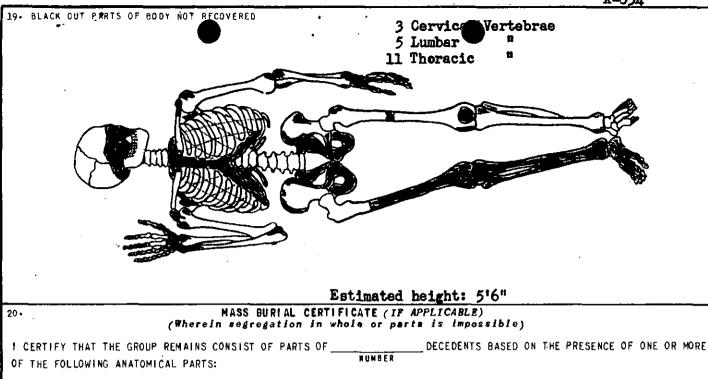
"UNDERTIFIABLE"

BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATAS

J J McDERLIOTT
Lab Officer, CIP

OMC FORM 10446

Soul 23



21. REMARKS AND ADDITIONAL INFORMATION

No ROI, identification tags or personal effects found with remains. Estimated weight of remains - $7\frac{1}{2}$ lbs.

Circumference of skull - 20 inches.

"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

J. J. McDERMOTT

Laboratory Officer, CIP

SIGNATURE

J. J. M. Sermow.

SIGNATURE OF MEDICAL OFFICER

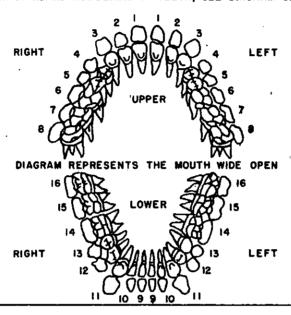
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İ	Unkn	own									Unl	COOM					
-				TINU			AGRS	Maus	oleum	,	ORG	ANIZAT	ION				
	Bata	an, I	uzon,	P.I	•		Mani.	la, P	•I•		80)1	E	1	131		
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	TEETH REPLACED BY DENTURE						0	- IAPMENTA			LINGUAL (TOWARD TONGUE)						
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INSTRUCTIONS:

- L 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 FRLING 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, & Q. 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:

Maxilla from No 4 to 4 present, rest missing. Full mandible.

. SIGNATURE OF PERSON WHO PREPARED CHART

/s/ E. F. Moriarty VERIFIED BY GRS OFFICER

SP-6

NAME AND RANK TYPED OR PRINTED

NAME AND RANK TYPED OR PRINTED

9 Oct 47

PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

DATE

CERTIFIED TRUE COPY:

930—PHILRYCOM -4: 47 -- 30M

sp ...

Part of the

AGRC FORM No. 11 Revised 16 Sept. 1946 Formely "Check List of Unknowns")

IDENTIFICATION CHECK LIST

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

l'ar

		UNKNOWN X-634 (Formerly Unknown X-147, USAF Cem Manila #2)
		Cemetery AGRS Mausoleum, Manila, P.I
-		Plot 801 HANGER BAY CRYPT 1131
ì.	CIP, AGRS Mausoleum Arrived at Zarrana 9 Oct 47	
,	Place of death Bataan, Inzon, P.I.	
٤.	(Name of closest town)	(Coordinates and letter Prefix, maps)
	(Sheet, scale and serials, used)	· · · · · · · · · · · · · · · · · · ·
3.	Remains recovered or disinterred by	C.M.T. No. 1 (Name and organization)
		(Name and organization)
1 .	Evacuated to Cemetery by	(Name and organization)
5.	Description of clothing and equipment: (if clothes d	lo not fit, obtain size from body measurements)
•	Item Clothing Markings Sizes * Headgear // (Type)	
	Raincoat	
	Overcoat	
	Jacket, Field	
	Jacket, Field Jacket, Combat	
	Mackinaw	-
	Sweater 0	
	Jacket, HBT	
	* Shirt, Wool OD	,
	Undershirt, Wool	
	Undershirt, Cotton	,
٠.	Trousers, HBT	
	* Trousers, Wool OD	<i>J</i>
	* 1 TOUSEIS, YY OOF OD	parameter some state of the second district of the second

Belt, web			***************************************
Drawers, wool	- · · · · · · · · · · · · · · · · · · ·	•	·.
Drawers, cotton			
Leggings, wool	į.	\	
Socks, cotton	, N		
* Shoes	(type)		
vershoes	E	•	
(Other item)			1 -
(Other item)			
	hese items should be computed by		
Chevrons or Insignia	/	•	
insignia		; shirt, jacket, coat, helmet)	2
•		*	
Shoulder Patch Does clothing indicate		er of the Air. Ground or Naval Fo	rce?
Does clothing indicate Description of Remains	that deceased was a membe	er of the Air. Ground or Naval For	•
Does clothing indicate Description of Remains Est. Age Heigh	that deceased was a members: Skeleton only. St. 5'6" Est. 140	keletal chart attached. Description of wounds	
Does clothing indicate Description of Remains Est. Age Heigh	that deceased was a member s: Skeleton only. S t 5'6" Est. Weight 140	keletal chart attached. Description of wounds (Length, width, local	
Does clothing indicate Description of Remains Est. Age Heigh	that deceased was a members: Skeleton only. St. 5'6" Est. 140	keletal chart attached. Description of wounds	
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Does clothing indicate Description of Remains Est. Age Height Bandages or dressings Outstanding moles, was Sunburn or tan, other Complexion Build Hair	that deceased was a member s: Skeleton only. S Est. Weight 140 (Number, location arts or birthmarks) than hand and face U. (Light, medium, da (Large, fat, thin (Color, length, quantity, curly) was (Baldness, widows peak, distinctive)	Reletal chart attached. Description of wounds Scars (Length, width, local Tattoos Wes-no; description, location) (Yes-no; description, location) The control of the Air, Ground or Naval Formula (Length, width, local (Yes-no; description, location)	ation)

6.

Casta	/ —	P	•
Goatee	(Light color, extent)		, , , , , , , , , , , , , , , , , , ,
	,		
Eves		Eyebrows (Color, bushiness, extent	·
_,	(Color, setting, shape)	(Color, bushiness, extent	across nose)
Nose		Eears (Size, set close to or far fr	
	(Size, shape, straight)' D.	(Size, set close to or far fr	om head)
Т.Л	· · · · · · · · · · · · · · · · · · ·	Lips	
Mouth	(Large, medium, small)	(Small, large, full)	
	, ",	• (************************************	
Teeth	Tooth chart attached.		
,1 CÇ (11	(White, size, uneveness, spe	acing, noticeable crowns, fillings, extracts)),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
•			
Chin'		·	*
	(Prominent, rece	ding, pointed, dimples, double)	
• •		, , , , , , , , , , , , , , , , , , , ,	
Jaw	Circumfe	rence of head in inches 22"	
	(Large, small, normal)	(Hat	band)
NT 1	<i>I</i> /	T	
Neck	Size, length, short, normal, wrinkled)	Larynx (Prominent, normal	
		(Fromment, normal	., -
Shouldars		A rms	
Silouideis	(Broad, straight, small, rounded)	(Length, muscular, color, extent and q	uantity of hair)
,	/		_
	/	,	
•	· // // // // // // // // // // // // //		
Hands			
1141143		•	***************************************
T7: -	U.		`
ringers	(Short, thick, lordy, slend	ter, size of knuckles, missing fingers or joints)	
	D.	,	
		/	
	(Unusual characte	eristics of ingernalis)	4111
		<i>' '</i>	
Chest			711111
	(Size of nipples, color, quantity	y and extent of hair, large, small, normal)	
			•
Waist	70-		
	(Size of navel, appendecto	omy, amount, quantity, and color of hair)	
D I.		· / Name of the second of the	
раск	(Quantity and extent of hair)	ircumcision Pubic Hair Pubic Hair	(Color)
••	()		(-2)
Herniapla	stv :	(Yor my lowston)	
·			
•			-
Legs			*
	(Iuseam, muscular, knock-kneed, bo	owed, normal, quantity, color and extent of hai	r)
-		·/	
Feet		Toes (Stender, straight, crooked, 6	/
	(Size, corns, callouses, flat)	talender, straight, crooked, a	(verain)
Evidanca	of healed fractures		<i>' j</i> '
TAIGRICE	or reared fractures	(Nose, arms, legs, etc.)	
		** *	, ·

NOTE: Use attached charts $\mbox{``A"}$ and $\mbox{``B"}$ to indicate parts not received.

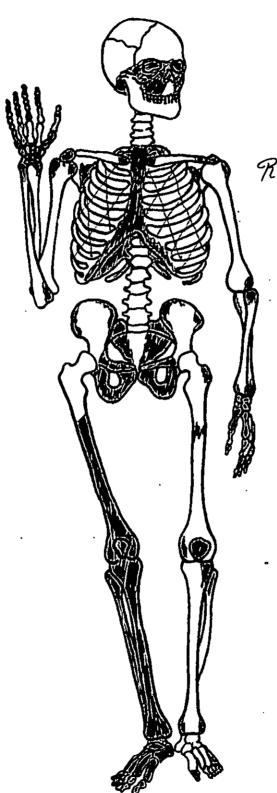
7	Have finger prints been placed on Report of Interment? No
• •	(Yes-no)
-	If not, explain Remains interred 26 Nov 45, USAF Cem Manila #2.
3.	Has tooth chart been prepared? Yes If not, explain.
9.	Remarks No R.O.I. bottle nor I.D. tags received with remains. No personal
	effects found. Right femur 4" below hip has been emputated. Left
	femur shows an old fracture, badly healed with extensive calcificati
	Estimated weight of remains 7% 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
	Rank Service
	AGRS'
	(Organization)

CERTIFIED TRUE COPY:

GEORGE T. GAMBOA 2d L., MAC

SKELETAL CHART X-634

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



Ribfragments
3 (ervicle Vertebrae
5 Lumbar Vertebrae
11 thoracic Vertebrae



.

/df	APR	291	740 REST	RICTED	1-6		u '	270		
WD QMC FORM 1042 (Rev. 1 Apr. 1945)			REPORT O	F INTERMEN	TSTRAC	GE	DATE	OF REPORT	т	
(Supersedes GRS Form 1)			(AR 30-1810 a				1	13 Oct 47		
Imprint Identification 1		ible.	Section 1.—IDENTIFICATION	N.		·				
DO NOT TY	PE		NAME (Last, first, middle initia		7 11.7		SERIA	L No.		
			UNKNOWN X-634 (USAF Cem Manila	•			[_t	In known	ì	
		`\	GRADE	ORGANIZATION			<u> </u>	CH OF SERV		
		0 }	:			3				
\			Unknown	_:	.known	·	<u></u>	Jn known		
			RACE	RELIGION	· ·		IF OTHER TH →NAME OF C		EAD, GIVE	
· · · · · · · · · · · · · · · · · · ·			Unknown	Un	known		t			
PLACE OF DEATH			CAUSE OF DEATH		:		DATE	OF DEATH		
Bataan, Luzon	n. P.T.		Unknown		ь. П		T	Jaknown	.	
EMERGENCY ADDRESSEE (No		_	J ·						<u> </u>	
		• •			í					
Unknown			,							
IDENT!FICATION TAGS FOUN (1, 2, or none)	D ON BODY		IF NO TAGS FOUND ON BODY	, DESCRIBE MEANS		of the	unidentified, fi	ll in section .	3 on reverse)	
None				,	<u>T</u>	27	773			
WERE SUBSTITUTE TAGS PRO	VIDED?(Yes	or no)			MORIAL		CORDS			
77 (0)						<i>N</i>	<u> </u>			
Yes (2) LIST PERSONAL EFFECTS FOR	IND ON BOI	DY AND	DISPOSITION OF SAME		0184810	<u>n</u>	BRANCI			
	J. 15 G. 10 J.	, , , , , , , , , , , , , , , , , , ,	BISI OSTITOTO OF SAME		<u> </u>	3	20			
					*	27	3-			
			37÷	<i>;</i>	· ·					
			None (1 pag						
			lished cemetery, furnish sket	ch and map coord	dinates on rever	se				
NAME, NUMBER, COORDINAT	ES, AND LO	CATION	OF CEMETERY							
			AGRS MAUSO	LEIM. MANI	APE					
DATE OF BURIAL	HOUR .		BURIED IN (Shroud, blanket, or		TYPE OF GRAV	E	PLOT No.	ROW No.	GRAVE No.	
STORAGE 47	0800)	STORED Casket		None		MNGER 801	8ay E	1131	
WAS THIS A DEBUDIAL?			NDICATE NAME, NUMBER, COOF	RDINATES OF PREVI	<u> </u>	ANOLO	ļ	ļ		
(Yes or no) RESTORED		,					PLOT No.	ROW No.	GRAVE No.	
Yes			n Manila #2, Luzon				2	4	406	
TYPE OF RELIGIOUS CEREMONY	PERSON C	ONDUC	TING BURIAL RITES	IF IDENTIFICAT CONTAINERS E	ION TAGS NOT I	USED, I X	DESCRIBE IDE	NTIFICATIO	N DATA AND	
	İ						•			
IDENTIFICATION TAG BURIER BODY (Yes or no)			IFICATION TAG ATTACHED TO KER (Yes or no)	-						
Yes Yes	Sr		Yes.							
BODY BURIED ON DECEASED	LEFT, NAME	E (Last,	first, middle initial)	RANK	SERIAL No.	· · · · · ·	ORGANIZATIO	N GRA'	VE No	
STORED	-							1	ΚĘΥβ Υ	
UNKNOWN X-63									1133	
BODY BURIED ON DECEASED STORED	RANK	SERIAL No.		ORGANIZATIO		VE No. ゲ ア T				
UNKNOWN X-400						1129				
SIGNATURE OF PERSON PREP	ARING REP	ORT	and the same of th	SIGNATURE OF	GRS/OFFICER VEF	RIFYING	REPORT			
Wm R GIIBERI	Adm A	laat:		IUCIO S	JANOPIO	y <i>⊈h</i> JR.	ツァー 2 d L t. I	NF.		
			al for II. S. and attind dond -				*			
through Headquarters GR	S Officer.	Copie	al for U.S. and allied dead, a s for retention in theater as	prescribed by the	u one copy for e ater commande	пету (г.	read, to the Q	Juarterma:	ster General	

			Section 3.—U.	NTIFIED REMAIN	S.	•				
, ,	i de ji	LEFT LITTLE FINGER	mains. Fill in a social security nu planes vehicles							
		22	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.							
·	ner (c)	LEFT RING FINGER	HEIGHT WEIG	COLOR C	OF EYES	COLOR OF	F HAIR	BIRTHMARKS, SCA	RS, OR TATTOOS	
<u>.</u>	., ;	LEFT MIDDLE FINGER	WEAPON AND SERIA	L No.	LAUNDRY	MARKS	rr f	WHERE BODY WAS	BURIED OR FOUND	
	nach bir	FINGER	OTHER IDENTIFICAT	TION CLUES		<i>:</i>		4. e e	nv (nijeli	
· <u>-</u>		INDEX FINGER	,						E SE E.	
		IGER	FILLINGS	De S	LVER FILL OLD FILLIN	ING IG		المُونَّمَّةِ الْمُونِّمِةِ الْمُونِّمِةِ الْمُونِّمِةِ الْمُنْفِقِينِ الْمُنْفِقِينِ الْمُنْفِقِينِ	2 On3	
		· ije	CAVITIES		- CAVIT		4 5 c	SALAA	245	
		THUM!	a.		T CAVITY DECAY	gD	7 7 8	UPPER	1000 6 1000 8	
		RIGHT THUMB	MISSING TEET		OGTH MISSII	ι G .	DIAGRAM	REPRESENTS THE	MOUTH WIDE OPEN	
	:	INDEX	CROWNED TEET	(C) - PO	RCELAIN CI OLD CROW		16 / B	LOWER	16 15 15 16	
2		RIGHT DEX FINGER	BRIDGE WORK		GOLD B	RIDGE			0 11 22	
		RIGHT MIDDLE FINGER	FURNISH SKETCH AI	ND MAP REFERENCE	E AND COO	rdinātes f	OR BURIAL IN	OTHER THAN ESTAB	LISHED CEMETERY	
		INGER				•		•		
1.75		RIGHT RING FINGER					·	·	`=:.:.	
			REMARKS:					•	,	
***	NOV.	RIGHT LITTLE FINGER	Identi	fication C	heck Li	ist end	l Dental	Chart accor	nplished.	

IDENTIFICATION SECTION
REPATRIAN N RECORDS BRANCH
MEMORIAL DIVISION

CATEGORY III CASE
NO CLUES
IDENTIFICATION IMPOSSIBLE
AT PRESENT TIME

WD QMC FORM 1042	—	DEDONT OF	ŽNTEDMENT		DATE OF	REPORT	
(Rev. I Apr. 1945) (Supersedes GRS Form 1)		REPORT OF		pri .		_	
	.'	(AR 30-1810 an	6	Dec. L	<u> 15 </u>		
Imprint Identification Tag If DO NOT TYPE	Possible.	Section 1.—IDENTIFICATION.	HS PNOON	<u>⊽ र (ल</u>	l		
20 1101 1112		NAME (Last, first, middle initial) (Cem. Lianila No	AMONANU AMONANU	V-14(SERIAL I	NO.	
		X-17 Cem. No.	J.Z.) (POP J. Mariy	ejea) met.th oitku	TOWN		
	, , , , , , , , , , , , , , , , , , ,	GRADE	ORGANIZATION	eres/	BRANCH	OF SERVICE	E .
(··· ··	.01	- CANDE	O NO AMERICA	ř ·	3	0. 02	- .
	- · · · · · · · · · · · · · · · · · · ·						
 		RACE	RELIGION ,	i i	IF OTHER THAN	U. S. DEAD	. GIVE
			, '	1	NAME OF COO	NIKI	
			/	,			
PLACE OF DEATH	!	CAUSE OF DEATH		\	DATE OF	DEATH	
Bataan, Luzon, I	P.T.		•				•
EMERGENCY ADDRESSEE (Name, re		d address)					
EMERICE PROPREDE (Marke, 18	минопанер, ин	<i>auai (666)</i>					
IDENTIFICATION TAGS FOUND ON	BODY	IF NO TAGS FOUND ON BODY, D	ESCRIBE MEANS OF	DENTIFICATION (I)	unidentified, fill i	n section 3 or	n teverse)
(1, 2, or none)							
None	` ` `		-				
WERE SUBSTITUTE TAGS PROVIDE	D?(Yes or no)						
Yes (2)		(See over	~)				
LIST PERSONAL EFFECTS FOUND O	ON BODY AND	<u> </u>		A SEPTITE COR			
				A TRUE COP	X_{X} :		
	٠,		1116	000.1	L. Ub-v	PDa	/
		None	'W	WATTER	COOPER		
	:			_	11C	U	
Section: 2.—BURIAL If other ti	han in estab.	lished cemetery, furnish sketci	1:				··
NAME, NUMBER, COORDINATES, A			 				
	 	t ja Linda on Linda on Tital on the State of					
	ISAF Ge	metery Manila N	10.2, Luz	on,F.1.			
DATE OF BURIAL HOL	JR	BURIED IN (Shroud, blanket, or no	ame of other)	TYPE OF GRAVE MARKER	PLOT No. F	ROW No.	GRAVE No.
26 15 15	100			_			100
		Shelter Half INDICATE NAME, NUMBER, COORD	NATES OF PREVIO	Cross			406
(Van an ma)	,	my Cemetery No.				ROW No.	GRAVE No.
· 1 · _		S21-1.748	,a. I v	· - azo	1 1	3	27
TYPE OF RELIGIOUS PER		TING BURIAL RITES	IF IDENTIFICATION	ON TAGS NOT USED.	DESCRIBE IDENT	IFICATION	
CEREMONY	•	The second second	CONTAINERS BO	IRIED WITH BODY			
IDENTIFICATION TAG BURIED WIT BODY (Yes or no)		TIFICATION TAG ATTACHED TO IKER (Yes or no)					
Yes	!	Yes]				
BODY BURIED ON DECEASED LEFT	. NAME (Last.	first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE	No.
UNKNOWN X-146 (1.	
(formerly Unkn:	wn X-l	.6 Çem No.3 Mari	veles)			L;C)5
BODY BURIED ON DECEASED RIGH	IT, NAME (La:	st, first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE	No.
unknewn x-148 (]_\	-		10	17
		L8 No.3 Marivele	<u> </u>		<u> </u>	40	/
SIGNATŪRE-OF PERSON PREPARIN	IG REPORT		SIGNATURE OF GRS OFFICER VERIFYING REPORT				
/s/t/ R. C. BA	RRETT,	T/4, GRS	/s/t/ D. L. ARMSTRONG, Capt., QMC				
DISTRIBUTION OF REPORT: S	igned origin	al for U.S. and allied dead, sig	gned original and	one copy for enemy	dead, to the Qu	ıartermast	er General
through Headquarters GRS O	tticer. Copie	es for retention in theater as p	rescribed by thea	ter commander.			

		Section 3.—UNIDENTIFIED REMAINS.							
בו בב קושפהא	LEFT	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 air-							
	R.	(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 BIRTHMARKS, SCARS, OR TATTOOS							
« , s		WEAPON AND SERIAL NO. LAUNDRY MARKS WHERE BODY WAS BURIED OR FOUND							
	<u> </u>								
	Minnie Fluces	OTHER IDENTIFICATION CLUES							
200	בראק בראק בראק בראק בראק בראק בראק בראק								
A FINGER	LEFT	FILLINGS SILVER FILLING GOLD FILLING							
		4 90000							
i no se	LEFT.	CAVITIES CAVITY 5 DECAYED 6 PPER 6							
		MESING ENVER 8							
I PUMB.	RIGHT	MISSING TEETH TOOTH MISSING DIAGRAM REPRESENTS THE MOUTH WIDE OPEN CROWNED TEETH							
		CROWNED TEETH PORCELAIN CROWN 15							
	RIG	VOOR							
	RIGHT	GOLD BRIDGE SILVER 13 TO TO THE SILVER 13 TO THE SILVER 1							
	<u>.</u>	10 9 9 10 11							
	RIGHT RIGHT	FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY							
in of the control of	RING FINGER								
· · · · · · · · · · · · · · · · · · ·		Amputation of right femur 4" below hip.							
	RIGHT								
,									

		REST	RICTED	NW	₹.	. FU	628	
WD QMC FORM 1042 5 (RevN1 Apr. 1945)		REPORT OF	/INTERMEN	_	DATE	DATE OF REPORT		
(Supersedes GRS Form 1)			REPORT OF/INTERMENT (AR 30-1810 and AR 30-1815)					
Imprint Identification T		Section 1.—IDENTIFICATION.			-			
20 1101 11	FE	NAME (Last, first, middle initial) UNKNOWN	- T - 157	/Com. Manile	SERIA	AL No.		
		(Formerly Unknown)				•	· ·	
[2]	1	GRADE	ORGANIZATION	110 110	 }	CH OF SERVI	ICE - ·	
! (0,			•				
		RACE	RELIGION		IF OTHER TH	IAN U. S. DEA	ND. GIVE	
					NAME OF C	OUNTRY	-	
PLACE OF DEATH		CAUSE OF DEATH	<u> </u>		DATE	OF DEATH		
Bataan, Duzon	P. I.			•				
EMERGENCY ADDRESSEE (Na	me, relationship, an	d address)						
				•				
IDENTIFICATION TAGS FOUN	D ON BODY	LE NO TACE FOUND ON DODY	SECONDE MEANO	OF INCHTIFICATION ///		***		
(1, 2, or none)	D ON BODT	IF NO TAGS FOUND ON BODY, I	DESCRIBE MEANS	OF IDENTIFICATION (1)	unidentified, fi	ll in section S	on reverse)	
None	•							
WERE SUBSTITUTE TAGS PRO	VIDED?(Yes or no)	(Se	e Over)					
V00: /	21							
Yes: (2		DISPOSITION OF SAME						
				•				
Dul/019		•	•	•				
		·• · · · · · · · · · · · · · · · · · ·	وتوسيعت مساحية					
		N.	one					
Section 2.—BURIAL. If of	ner than in estab	lished cemetery, furnish sketc.	h and map coord	linates on reverse.				
NAME, NUMBER, COORDINAT	ES, AND LOCATION	OF CEMETERY .						
	USAF C	emetery Manila #2,	Iuzon, P.	· I•				
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or n		TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.	
26 Nov 45	1400	Shelter Hal	Cross	2	4	406		
WAS THIS A REBURIAL? (Yes or no)		INDICATE NAME, NUMBER, COORE			DCATION OF G	RAVE		
Yes	821-1,7	rmy Cemetery #3. M 48	ariveres.	Enzon, P. I.	PLOT No.	ROW No.	GRAVE No.	
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUC	TING BURIAL RITES	IF IDENTIFICATION TAGS NOT USE CONTAINERS BURIED WITH BODY		DESCRIBE IDE	NTIFICATION	DATA AND	
CENEMONT			CONTAINENS	WILL WITH BODT	•	•		
IDENTIFICATION TAG BURIEL	WITH LIDEN	FIFICATION TAG ATTACHED TO						
BODY (Yes or no)		KER (Yes or no)			-	•		
Yes	LEET NAME (T	Yes:	DANK	CEDIAL NO	ODCANIZATIO	on Long		
BODY BURIED ON DECEASED UNKNOW		, pirsi, midale initial) • Manila #2)	RANK	SERIAL No.	ORGANIZATIO	ON GRAV	E NO.	
		-16 Cem. #3 Marive	les)				405	
BODY BURIED ON DECEASED	RIGHT, NAME (La	st, first, middle initial)	RANK	SERIAL NO.	ORGANIZATIO	ON GRAV	E No.	
		em. Manila #2)				-	l. ~59	
		-x-18 #3 Mariveles		COS OFFICES VEDUCAN	C DEPORT		407	
SIGNATURE OF PERSON PRE	AKING KEPOKI		SIGNATURE OF	GRS OFFICER VERIFYIN	G REPORT			
R. C.	BARRETT, T	74 CRS.	D. I	ARMSTRONG.	Capt.	MC.		
		eal for U.S. and allied dead, si es for retention in theater as p			dead Yo the	Quartermas	ster General	

1 4 59

16-43997-1 , \2; , \2;

		- Section 3.—UNIDENTI	FIED REMAINS					-	
* _ * * * * * * * * * * * * * * * * * *	LEFT LITTLE FINGER	INSTRUCTIONS: (a) Great care mains. Fill in anat social security number planes, vehicles, and (b) A fire control of the contr	will be taken omical charac er; position o I tanks.	to record to teristics b f body fou	nd in airp	olanes, vehicle	es, and tanks; an	d serial numbers	of air-
	`	every tooth will be in	ndicated on th	ie tooth ch	art in acco	ordance with	diagram below.	Tooth chart will	not be
19 DEC 1845	LEFT RING FINGER	chart.at left, or as many as gossible. If no fi every tooth will be indicated on the tooth char accomplished if one or more fingerprints are s		COLOR OF HAIR		BIRTHMARKS, SCARS, OR TATTOO:			
		WEAPON AND SERIAL N	0.	LAUNDRY	MARKS	i	WHERE BODY WAS	BURIED OR FOUND	
	MIDDLE F	OTHER IDENTIFICATION	I CLUES	į		, ,			
	FINGER	,	CLUES			ol L			
	~		•					•	
	NDEX .			•					
•	LEFT INDEX FINGER	FILLINGS		-		<u> </u>	<u>.</u>		
	GER	I FILLINGS	O SI	LVER FILLI DLD FILLIN	G		3 2 0 0	2	·
					Į.	_	20HH	$\Omega \cap \mathcal{S}$	
•			11/25-3		İ	4	JON HH	4	i
	보드	CAVITIES		CAVIT	·	5 (THE TOTAL PROPERTY OF THE PARTY	5.	-
	ЕЕГТ ТЭЭД			DECAY	EĎ	· G	UPPER	MODO 6	
			18	5	1	7(2)	Missin	'WESS'	
		MISSING TEETH	, ((4	<u>च्या</u>		8 0		Suren (ACC)	8
		MISSING TEETH	(Description	OTH MISSIN	(G	M) •		ŀ
•	RIGHT Thumb		Y (C)	1		D IAGR AM	REPRESENTS THE	MOUTH WIDE OF	EN .
	MH		ט פואפי	4		م.		SI	LU ER
• •		CROWNED TEET,H	-~-			16		in 211	
				RCELAIN CI OLD CROW		15	はくべ	3 15	1
	N.	t.	VP TO		in,	1	LOWER	14	
A Comment	. XX.	221225 1222	V UKX 7	· ·		14	900		(PAE)
	RIGHT IDEX FINGER	BRIDGE WORK .	~	GOLD B	RIDGE	S ₁ ,	" SARWAY	1000	.
	3	* * * * * *		\	•	_,@k		127 ".	
<u> </u>							" $"$ $"$ $"$ $"$ $"$ $"$ $"$ $"$ $"$	10 11	1
ļ	MIDE_	FURNISH SKETCH AND	MAP REFERENC	E AND COOF	RDINATES F	OR BURIAL IN	OTHER THAN ESTA	BLISHED CEMETERY	,
i i	RIGHT. MIDDLE FINGER	•							·
•	INGE	!				1 4 1	•	^	
	20		\						
_	20 mg				• •	4	. ,		
	RIGHT RING FINGER		•						
	GER.						· .	<u> </u>	
	• •	REMARKS:	•			* *	· · · · · · · · · · · · · · · · · · ·		•
· ·	_	-	•				• • • • • • • • • • • • • • • • • • • •		
	RIGHT LITTLE FINGER	Ampti	tation of	f right	femur	4º belo	ow hip.		
4 h 💉	E FIN	4 1. 2. 4					1	+ +	
	GER					1			