

RECLASSIFICATION SHEET

PAPERS ORIGINALLY FILED 293. Genk (Misc) Manila #2 X131, X132
X133, X134, X135, X136, X137, X138, X139, X140, X141, X142, X143, X144
X145, X146, X147, X148, X149, X150, X151, X152, X153, X154, X155, X156
X157 SYNOPSIS AND DATES X158

These now filed

NEW CLASSIFICATION 293. Genk Manila #2 X131

*10/6/50
EC*

RECLASSIFICATION SHEET



QUEST 299
GPO For East

28 June 1949

SUBJECT: Approval of Unidentifiability

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

ATTENTION: AGPS, PHILCOM ZONE

1. Reference is made to findings of unidentifiability for the following Unknown remains:

Unknown X-621	AGPS	Muscleman	Manila	Formerly X-123	Manila #2
Unknown X-525	AGPS	Muscleman	Manila	Formerly X-126	Manila #2
Unknown X-630	AGPS	Muscleman	Manila	Formerly X-143	Manila #2
Unknown X-635	AGPS	Muscleman	Manila	Formerly X-145	Manila #2
Unknown X-636	AGPS	Muscleman	Manila	Formerly X-198	Manila #2
Unknown X-957	AGPS	Muscleman	Manila	Formerly X-224	Manila #2
Unknown X-1158	AGPS	Muscleman	Manila	Formerly X-3751	Manila #2
Unknown X-1322	AGPS	Muscleman	Manila	Formerly X-3623	Manila #2
Unknown X-1371	AGPS	Muscleman	Manila	Formerly X-3215	Manila #2
Unknown X-1911	AGPS	Muscleman	Manila	Formerly X-3312	Manila #2
Unknown X-1961	AGPS	Muscleman	Manila	Formerly X-3224	Manila #2
Unknown X-3172	AGPS	Muscleman	Manila	Formerly X-1210	Manila #2

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

FOR THE QUARTERMASTER GENERAL:

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

REB

RJS

CC: Administrative Section

R. C. Baylorstal
L. M. White
J. Windsor

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Unknown X-625	AGPS	Muscleman	Manila	formerly X-136	Manila #2
Unknown X-630	AGPS	Muscleman	Manila	formerly X-143	Manila #2
Unknown X-635	AGPS	Muscleman	Manila	formerly X-145	Manila #2
Unknown X-636	AGPS	Muscleman	Manila	formerly X-298	Manila #2
Unknown X-997	AGPS	Muscleman	Manila	formerly X-624	Manila #2
Unknown X-1258	AGPS	Muscleman	Manila	formerly X-3751	Manila #2
Unknown X-1322	AGPS	Muscleman	Manila	formerly X-3623	Manila #2
Unknown X-1371	AGPS	Muscleman	Manila	formerly X-3215	Manila #2
Unknown X-1914	AGPS	Muscleman	Manila	formerly X-3312	Manila #2
Unknown X-1961	AGPS	Muscleman	Manila	formerly X-3258	Manila #2
Unknown X-3172	AGPS	Muscleman	Manila	formerly X-3149	Manila #2

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

FOR THE QUARTERMASTER GENERAL:

T. N. MEYER
Lt. Colonel, QMC
Memorial Division

REB
NJS

CG: Administrative Section

R. C. Baylorstal
L. M. White
J. Windsor

OSCM 293.9

SUBJECT: Unidentifiable Remains

9 JUN 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 OSCM 293, GRS (Far East), dated 17 September 1948, subject: Resolution of Cases of Unidentified Deceased, the following Unknown remains presently stored at AGES 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-621	UNKNOWN X-3172
" X-625	" X-3258
" X-630	" X-3288
" X-635	" X-3422
" X-1322	" X-3431
" X-1564	" X-3767
" X-1914	" X-4253
" X-2230	" X-4096, Manila #2
" X-2241	(Formerly Unk X-1409, AGES Main)
" X-2286	" X-5141 (Formerly Unk X-327-E, AGES Main)
" X-2289	" X-5142 (Formerly Unk X-327-F, AGES Main)
" X-2331	" X-5145 (Formerly Unk X-327-I, AGES Main)

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

FOR THE COMMANDING GENERAL:

23 Incls:
OIC Forms 1044 w/certificates
of Unidentifiability

JOHN A. IARSZAL
1st Lt., AGC
Asst Adj Gen

1

Interred 6 Jun 1949
L 12 107 Ft. McKinley

DISINTERMENT DIRECTIVE

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

Cemetery Superintendent
SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7747 02826

DATE
15 06 48
DAY MONTH YEAR

NAME <i>213</i>	SERIAL NUMBER UNKNOWNX-000148	RANK	ARM Q.	DATE OF DEATH DAY MONTH YEAR
CEMETERY USAF CEMETERY MANILA NO 2	DISPOSITION OF REMAINS 7701 180 CODE DIST. PT.			CAUSE OF DEATH 6
PLOT F12	ROW 4	GRAVE 407	COUNTRY PHILIPPINE ISLANDS	

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)
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SECTION C - DISINTERMENT AND IDENTIFICATION

NAME UNK X-148 UNK X-635 (Mausoleum)	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED 21 Sept. '48
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY PERRY E. WHITE 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 1
One Identification and Marker tag read Mausoleum UNK X-635

REMAINS PREPARED AND PLACED IN CASKET
DATE 21 Sept. '48 BY PERRY L. WHITE

CASKET SEALED BY PERRY E. WHITE
EMBALMER (Signature) *Perry E. White*
PERRY E. WHITE

CASKET BOXED AND MARKED
DATE 21 Sept '48 BY HORACE L. ALLISON, Sgt. INF
SHIPPING ADDRESS VERIFIED BY
CORSINE C. KAYAHAN, 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.

Corsine C. Kayahan
CORSINE C. KAYAHAN, 1st Lt., INF

SIGNATURE OF GRS INSPECTOR

8 AUG 1949

REPAIRATION
BRANCH

M. C. Mathew

NAN

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

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM AGRS MAUSOLEUM		TO FORT MCKINLEY MILITARY CEMETERY	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Carroll Mack</i>	DATE 6 JUL 1949

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER FOR MCKINLEY CEMETERY	DATE	SIGNATURE OF RECEIVER BVAIVE DECISION	DATE

6. SHIPPED

FROM BIS & COS SHIPPIER		TO 125VW02	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER WELLS	DATE 11	SIGNATURE OF RECEIVER	DATE 11

UNKNOWN SHIPPED

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

J. P. O.
J.

FILE UNDER NO. 293 - Unknown P.I. X-148 (Mails #2)

I N D E X S H E E T

S Y N O P S I S

Letter

2 June 1947

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

SUBJ: Identification Data

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

rtb

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE
APO 900

28 May 1949


Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 148, Plot 2,
Row 4, Grave 407, 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, QMC
Chief, Records Branch

Atch: Form 1044

Received 9 June 49 OQMG
Not identifiable from
information presently
available

28 June 49
Baylot

Encl. #4'

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-635 (Formerly Unk X-148 Manila # 2)				2. DATE OF REPORT 28 May 1949	
3. NAME OF CEMETERY AGRS MAUSOLEUM, MANILA, P. I.	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	801	E	1142	DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT 165 lbs	9. ESTIMATED HEIGHT 5' 10"	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? YES NO TO WHAT EXTENT?

15. WAS BODY MANGLED? YES NO TO WHAT EXTENT?

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

N O N E

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

N O N E

"UNIDENTIFIABLE"

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

Incl. #42

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" 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
M A X I L L A								M I S S I N G							
Side Views															
UPPER															
LOWER															
Side Views															
←	U.	T.	D.	→	P	P	P	P		P			P	A	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."

Maxilla and maxillary teeth are missing. Unable to determine whether teeth from R13 - R16 are X or Px because of the condition of the mandible.

"UNIDENTIFIABLE"

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

BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA

19. BLACK OUT PARTS OF BODY NOT RECOVERED



Estimated height: 5' 10"

20.

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

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

 SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

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

Estimated weight of remains - 6 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

JAMES J. McDERMOTT
 Laboratory Officer, CIP

SIGNATURE

James J. McDermott

X-635

IDENTIFICATION DENTAL CHART

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

9 Oct 47

(Formerly UNK X-148 USAF)

DATE

UNKNOWN X-635 (Cem, Manila #2, Luzon, P.I.) Unknown Unknown

LAST NAME FIRST INITIAL RANK SERIAL NO.

Unknown

Unknown

UNIT

AGRS Mausoleum,

ORGANIZATION

Bataan, Luzon, P.I.

Manila P.I.

801

E

1142

PLACE OF DEATH

PLACE OF BURIAL STORAGE

PLOT

ROW

GRAVE NO.

HANGER

BAY

CRIP.

maxilla missing

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

INSIDE — LOOKING OUT

	RIGHT								LOWER TEETH								LEFT							
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16								
TYPE	X	X	X	X			X		X	X		X	X	A	X	X								
LOCATION														o										

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)

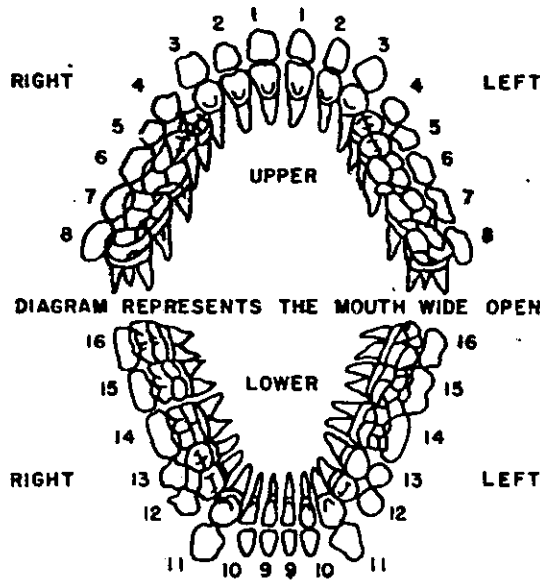
INSTRUCTIONS:

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 $\frac{3}{4}$), $\frac{3}{4}$ GOLD CROWN WITH SILICATE WINDOW.

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



REMARKS:

Mandible decayed.

/s/ Russell Smith t
SIGNATURE OF PERSON WHO PREPARED CHART

/s/ Felix Glass
VERIFIED BY GRS OFFICER

/p/ RUSSELL SMITH T/4
NAME AND RANK TYPED OR PRINTED

/p/ FELIX GLASS DC
NAME AND RANK TYPED OR PRINTED

CIP, AGRS Mausoleum
PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

9 Oct 47
DATE

CERTIFIED TRUE COPY:

E. H. Newman J. R.
E. H. NEWMAN J. R.
Capt., FA

IDENTIFICATION CHECK LIST

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

(Formerly UNK X-148 USAF
 Unknown X 635 (Cem Manila #2)
 Cemetery AGRS Mausoleum, Manila P.I.
 Plot 801 ^{HANGER} Row ^E Bay ^{CRIP} Grave 1142

1. Arrived at cemetery _____
(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 C M T #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	/		
Sweater	N		
Jacket, HBT	O		
	N		
* Shirt, Wool OD	R		
Undershirt, Wool	/		
Undershirt, Cotton	/		
Trousers, HBT	/		
* Trousers, Wool OD	/		

Belt, web /
 Drawers, wool / /
 Drawers, cotton / / /
 Leggings, wool / / /
 Socks, cotton N
 * Shoes N E (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: Skeletal remains only. Chart attached.

EST
 Age UTD Height 5'10" Weight 165 lbs 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 U T (Light, medium, dark, clear, pimples, pocks, freckles)

Build (Large, fat, thin, muscular)

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

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

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

Goatee / (Light, color, extent)

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

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

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

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

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

Jaw / (Large, small, normal) **skull** Circumference of head in inches **UTD** (Hat band)

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

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

Hands / **U**

Fingers / **T** (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 / (Quantity and extent of hair) Circumcision (Yes-no) Pubic Hair (Color)

Hernioplasty (Yes-no, location)

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

Feet / (Size, corns, callouses, flat) Toes (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 Due to condition of remains.

8. Has tooth chart been prepared? Yes If not, explain

(Yes-no)

9. Remarks No ROI, I D Tags, or other means of identification found

with remains. Estimated weight of remains is about 6 lbs.

Skull fractured, unable to determine its circumference.

due to fragmentation.

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/ Edward H Marshall

(Officer's Name)

SP-8 C-062874

Rank

Service

CERTIFIED TRUE COPY:

E. H. Newman Jr.
E. H. NEWMAN JR.
Capt. FA

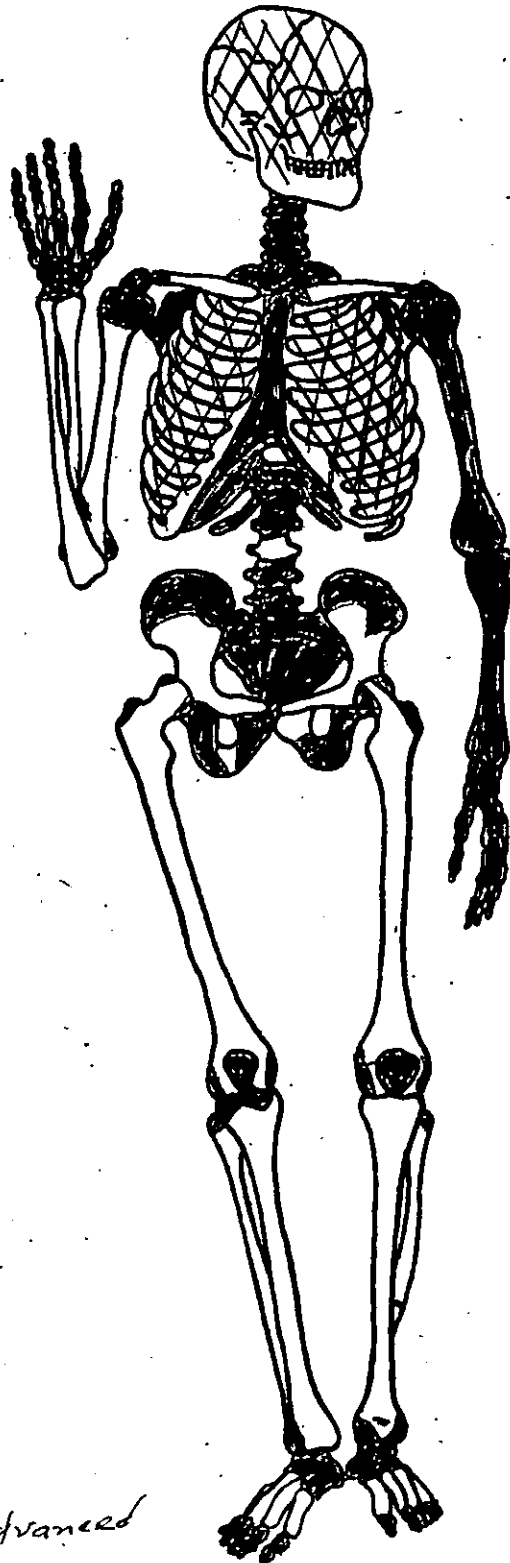
AGRS Mausoleum

(Organization)

X-635

SKELETAL CHART

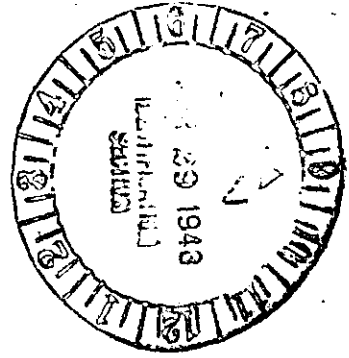
(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



2-Dorsal fragments
1-Lumbar "
19-Rib.

*Remains in an advanced
state of decay*

CHART "A"



[Faint, illegible text, possibly a signature or stamp]

WD QMC 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-635 (Formerly UNK X-148
USAF Cemetery, Manila #2, Luzon

SERIAL No.

Unknown

GRADE

Unknown

ORGANIZATION

Unknown

P. I.

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)

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

None

RECORDS BRANCH
MEMORIAL DIVISION
DEC 22 2 53 PM '47

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

AGRS MAUSOLEUM, MANILA, P. I.

DATE OF BURIAL STORAGE	HOUR	BURIED IN (Shroud, blanket, or name of other) STORED	TYPE OF GRAVE MARKER	PLOT No. HANGER	ROW No. RAY	GRAVE No. CRYPT
9 Oct 47	0800	Casket	None	801	E	1142

WAS THIS A REBURIAL? (Yes or no) RESTORED	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE	PLOT No.	ROW No.	GRAVE No.
Yes	USAF Cemetery Manila #2, Luzon, P. I.	2	4	407

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

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

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORED	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT
UNKNOWN X-408				1144

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT
UNKNOWN X-632				1140

SIGNATURE OF PERSON PREPARING REPORT Wm R GILBERT, Adm Asst	SIGNATURE OF GRS OFFICER VERIFYING REPORT LUCIO S. PANOPLO 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.

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.


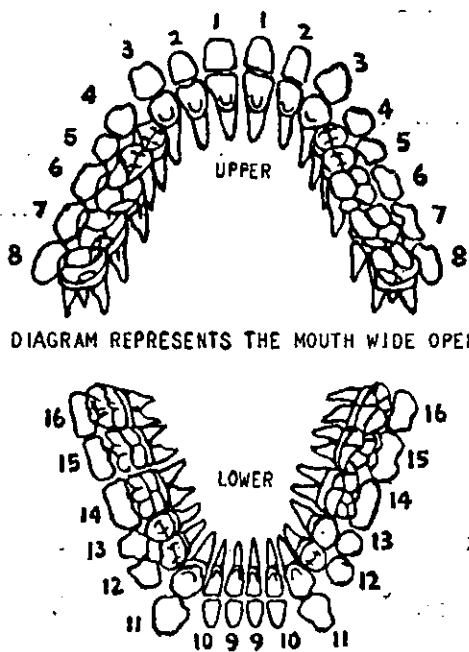




(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth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

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

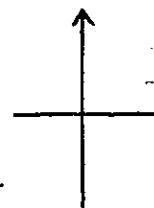
WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND

OTHER IDENTIFICATION CLUES

Information found on grave marker of USAF Cemetery #3, Mariveles, Bataan, Luzon, P.I. 192 Tank.

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



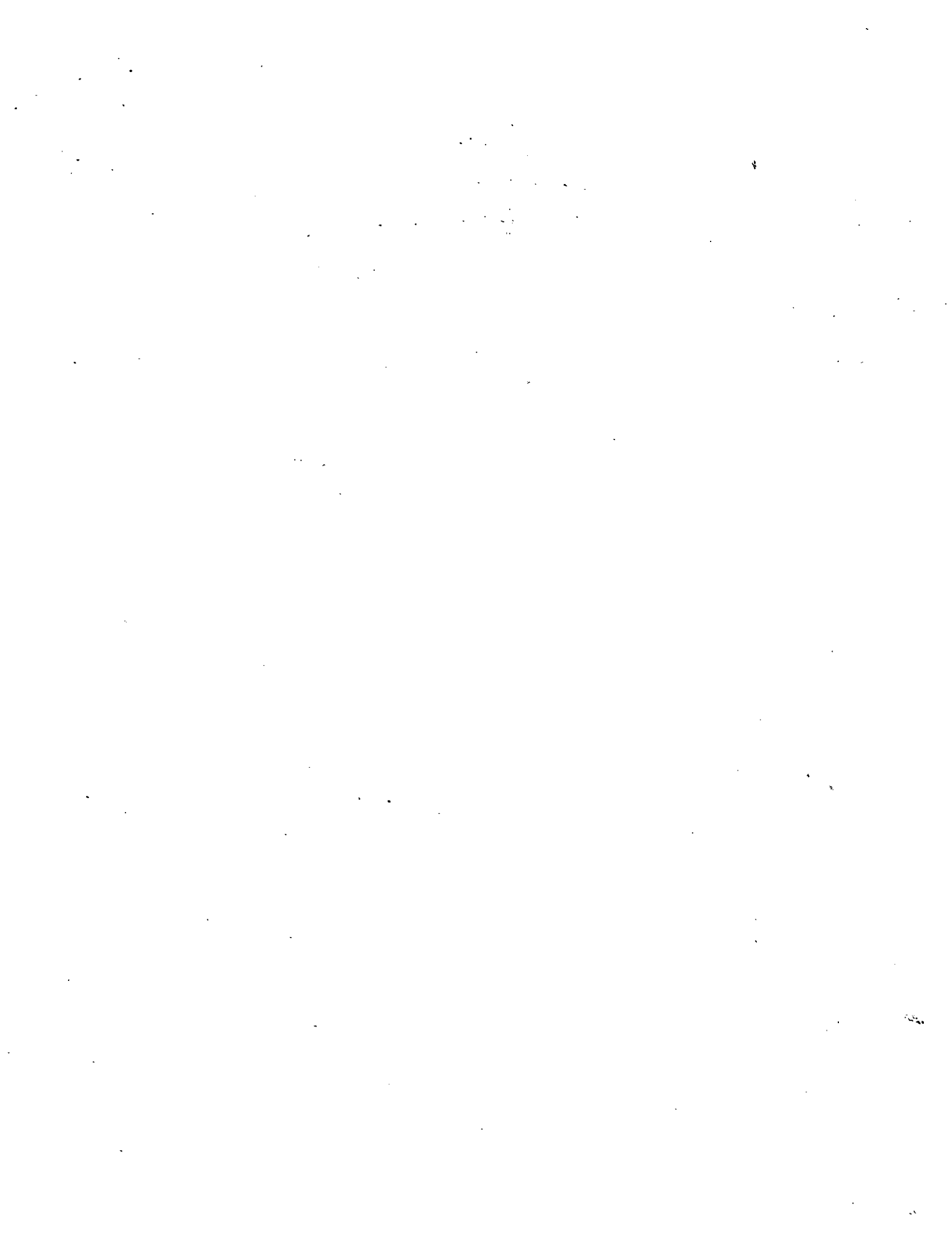
REMARKS:

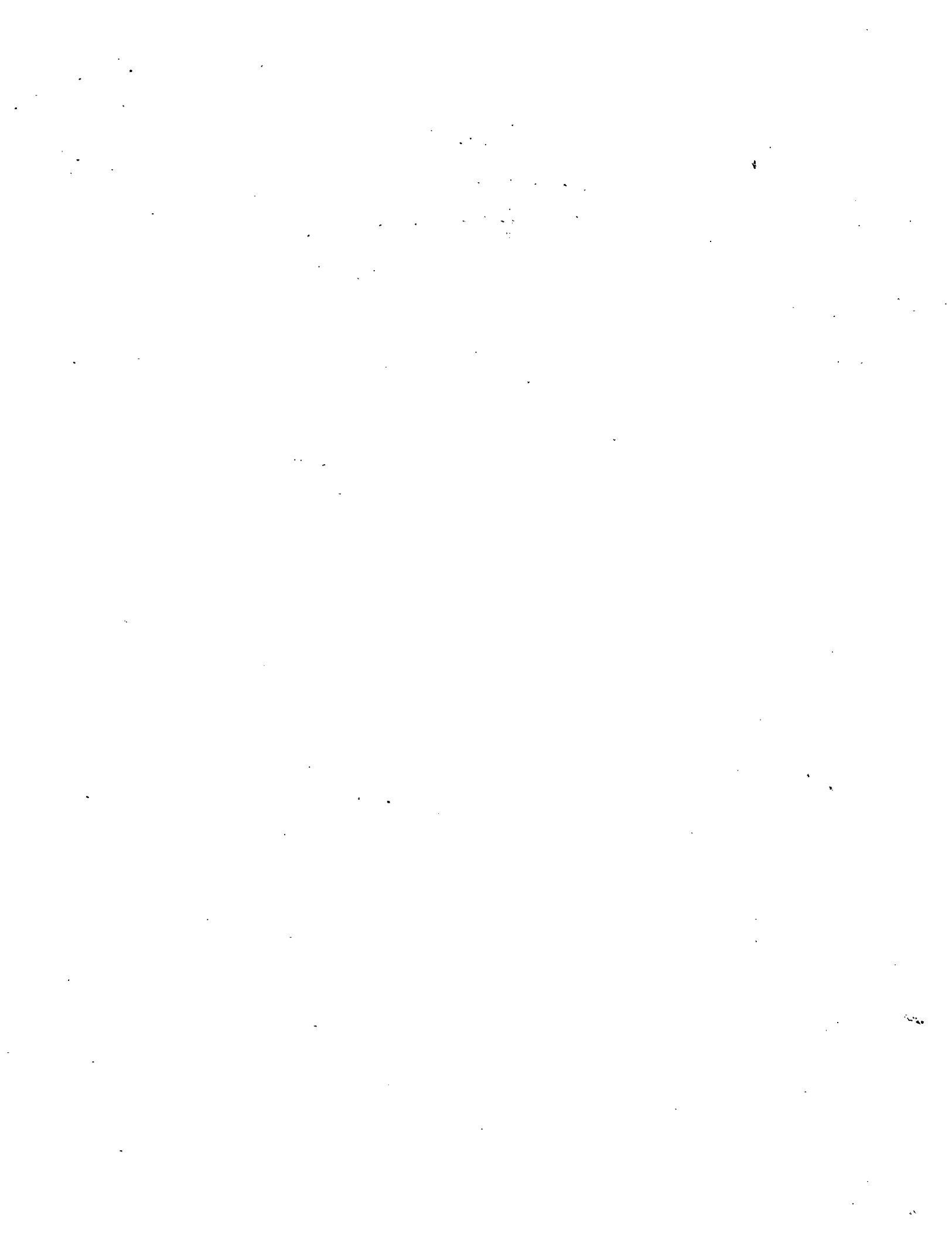
Identification Check List and Dental Chart accomplished.

18 NOV 1947

IDENTIFICATION SECTION
REPATRIATION RECORDS BRANCH
MEMORIAL DIVISION

CATEGORY III CASE
NO CLUES
IDENTIFICATION IMPOSSIBLE
AT PRESENT TIME





RESTRICTED

DE

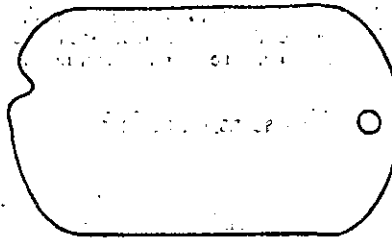
WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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-148
(Cem. Manila No.2)(Formerly Unknown X-18 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

CAUSE OF DEATH

DATE OF DEATH

Bataan, Luzon, P.I.

EMERGENCY ADDRESSEE (Name, relationship, and address)

IDENTIFICATION TAGS FOUND ON BODY
(1, 2, or none)

IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)

None

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

George D. Redden Jr.
GEORGE D. REDDEN JR.
1st Lt., Inf

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

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

407

WAS THIS A REBURIAL?
(Yes or no)

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

Yes

U.S. Army Cemetery No.3, Mariveles, Luzon
P.I. 821-1.748

PLOT No.

ROW No.

GRAVE No.

1

3

20

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)

IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)

Yes

Yes

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

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

UNKNOWN X-147 (Cem Manila No.2)
(Formerly Unknown X-17 Cem No.3 Mariveles)

1106

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

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

WALLACE, Charles F.

Pvt

1108

SIGNATURE OF PERSON PREPARING REPORT

SIGNATURE OF GRS OFFICER VERIFYING REPORT

/s/t/ R. C. BARRETT, T/4 GRS

/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:


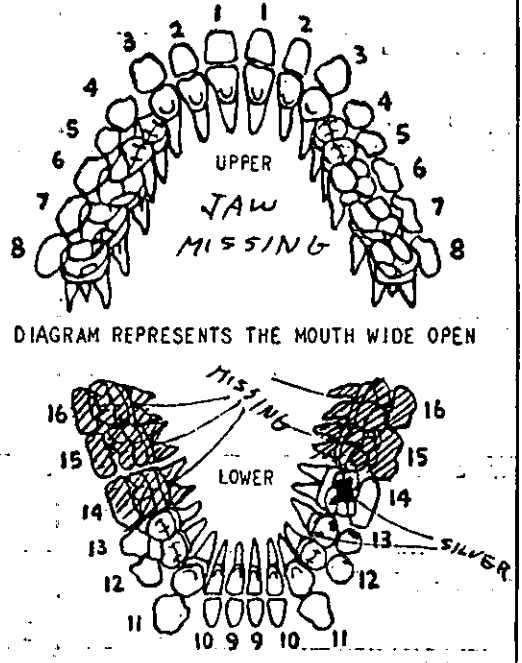




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(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the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

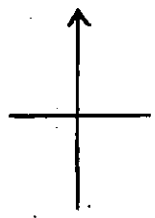
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS

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

OTHER IDENTIFICATION CLUES

<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:
Information on marker (192 tank)

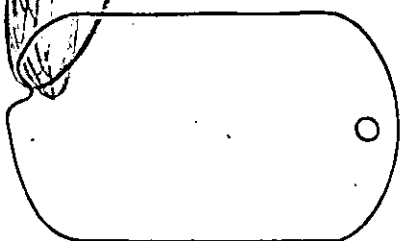
WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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) U N K N O W N - X - 148 (Cem. Manila #2) (Formerly Unknown-X-18 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
---	----------------	---------------

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

Jul 1020

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 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. 407
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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 U. S. Army Cemetery #3, Mariveles, Luzon, P. I. 821-1,748	PLOT No. 1	ROW No. 3	GRAVE No. 28
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TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes	

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) UNKNOWN-X- 147 (Cem. Manila #2) (Formerly Unknown-X-17 Cem. #3 Mariveles)	RANK	SERIAL NO.	ORGANIZATION	GRAVE No. 406
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BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) WALLACE, Charles F.	RANK pvt	SERIAL NO.	ORGANIZATION	GRAVE No. 408
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SIGNATURE OF PERSON PREPARING REPORT <i>R. C. Barrett</i> R. C. BARRETT, T/4 GRS.	SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>D. L. Armstrong</i> D. L. ARMSTRONG, Capt. QMC.
--	---

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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


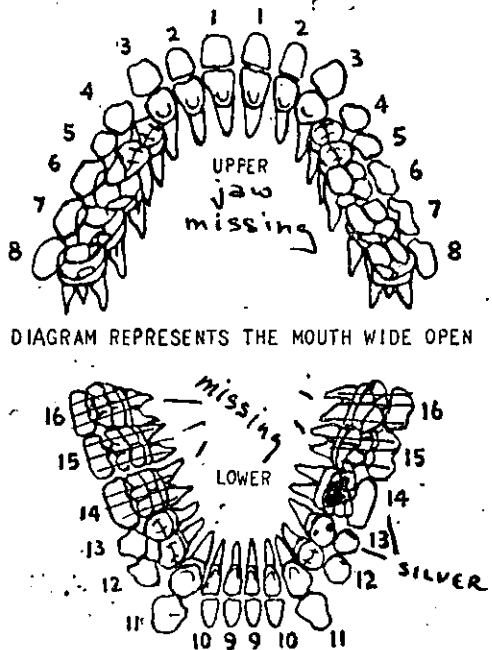




RIGHT RING FINGER

RIGHT LITTLE FINGER

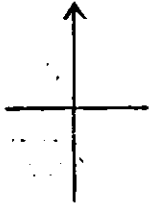
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS

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

OTHER IDENTIFICATION CLUES

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

Information on marker (192 tank)