

AIRMAIL

QMG 293
GRS Far East

Ident

16 September 1949

SUBJECT: Identification of World War II Deceased

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

1. Reference is made to the following Unknown remains now stored at AGRS Mausoleum, Manila, P.I.:

- Unknown X-287 Santa Barbara (formerly Unknown X-4337, AGRS Mausoleum, Manila, P.I.). Previously interred as Strobel, Herbert F., USAF Cemetery Sta Barbara #1.
- Unknown X-300 Finschhafen #2 (formerly Unknown X-3842-A, AGRS Mausoleum, Manila, P.I.). Previously interred as Unknown X-163 Finschhafen #2, N. G.
- Unknown X-304 Finschhafen #2 (formerly Unknown X-1493-B, AGRS Mausoleum, Manila, P.I.). Previously interred as Unknown X-52 Finschhafen #2, N. G.
- Unknown X-341 Finschhafen #5 (formerly Unknown X-741-B, AGRS Mausoleum, Manila, P.I.). Previously interred as Unknown X-44 Finschhafen #5, N. G.
- Unknown X-342 Finschhafen #5 (formerly Unknown X-3770-B, AGRS Mausoleum, Manila, P.I.). Previously interred as Unknown X-97, Finschhafen #5, N. G.
- Unknown X-710 Leyte #1 (formerly Unknown X-3770-B, AGRS Mausoleum, Manila, P.I.). Previously interred as Unknown X-367 Leyte #1, P. I.
- Unknown X-711 Leyte #1 (formerly Unknown X-3289-B, AGRS Mausoleum, Manila, P.I.). Previously interred as Unknown X-228 Leyte #1, P.I.
- Unknown X-712 Leyte #1 (formerly Unknown X-3417-A, AGRS Mausoleum, Manila, P.I.). Previously interred as Unknown X-155 Leyte #1, P.I.

X-7722 / Manila, P.I. (Mausoleum)

AIRMAIL

AIRMAIL

QMGT 293

16 September 1949

GRS Far East

SUBJECT: Identification of World War II Deceased

Unknown X-713 Leyte #1 (formerly Unknown X-3402-B, AGRS Mausoleum, Manila, P.I.). Previously interred as Unknown X-336 Leyte #1, P.I.

Unknown X-721 Leyte #1 (formerly Unknown X-3679-B, AGRS Mausoleum, Manila, P.I.). Previously interred as Unknown X-43 Lyete #1, P.I.

Unknown X-722 Leyte #1 (formerly Unknown X-3679-D, AGRS Mausoleum, Manila, P.I.). Previously interred as Unknown X-43 Leyte #1, P.I.

2. Subject cases have been reviewed and this Office approves the classification of the above listed Unknowns as unidentifiable.

FOR THE QUARTEIMASTER GENERAL:

J.Miller:lrc

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

REB

Salser

TEC

JW

cc--Administrative Section

cc--Cincfe

AIRMAIL

QUART 293
GRS Far East

9 August 1949

SUBJECT: Identification of World War II Deceased

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

1. Reference is made to findings of unidentifiability for the following unknown deceased:

Unknown X-439,	AGRS Mausoleum Manila, formerly	X-292,	USAF Gen., Manila #2
" X-444,	" " " "	X-297,	" " " "
" X-617,	" " " "	X-128,	" " " "
" X-627,	" " " "	X-140,	" " " "
" X-637,	" " " "	X-150,	" " " "
" X-722,	" " " "	X-239,	" " " "
" X-1127,	" " " "	X-3770,	" " " "
" X-1153,	" " " "	X-3776,	" " " "
" X-1219,	" " " "	X-3728,	" " " "
" X-1639,	" " " "	X-3460,	" " " "
" X-1656,	" " " "	X-3468,	" " " "
" X-1736,	" " " "	X-3349,	" " " "
" X-2424,	" " " "	X-3061,	" " " "
" X-2427,	" " " "	X-3065,	" " " "
" X-3153,	" " " "	X-1030,	" " " "
" X-3156,	" " " "	X-1033,	" " " "
" X-3164,	" " " "	X-1041,	" " " "

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

FOR THE ACTING THE QUARTERMASTER GENERAL:

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

H. T. Bredenberg:dal
L. M. White
J. Windsor

*File
11 Aug 50
Alb
Personnel*

HEADQUARTERS
PHILIPPINES COMMAND
UNITED STATES ARMY

GSCR 293.9

ARO 707

SUBJECT: Unidentifiable Remains

21 JUL 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 QMGHU 293, GRS (Far East), dated 17 September 1948, subject: Resolution of Cases of Unidentified Deceased, the following Unknown remains, presently stored at AGRS Museum Manila, P.I., have been processed by the Central Identification Laboratory and considered "Unidentifiable" by reason of lack of sufficient identifying data:

UNKNOWN	X-177	AGRS	Maln	UNKNOWN	X-1639	AGRS	Maln
"	X-439	"	"	"	X-1656	"	"
"	X-444	"	"	"	X-1736	"	"
"	X-617	"	"	"	X-2355	"	"
"	X-627	"	"	"	X-2424	"	"
"	X-637	"	"	"	X-2427	"	"
"	X-722	"	"	"	X-3153	"	"
"	X-1127	"	"	"	X-3156	"	"
"	X-1153	"	"	"	X-3164	"	"
"	X-1219	"	"	"	X-3224	"	"

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

FOR THE COMMANDING GENERAL:

20 Incls
QMC Forms 1044 w/certificates
of Unidentifiability

/s/ John A. Marszal
JOHN A. MARSZAL
1st Lt., AGC
Asst Adj Gen

/mfc

nfm

Interred 18 July 1949

L 13 103 Ft. McKinley

DISINTERMENT DIRECTIVE

CARL R. H. MARK

Cemetery Superintendent

SECTION A -

NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

7747 00085

DATE

15 06 48
DAY MONTH YEAR

NAME

SERIAL NUMBER

RANK

ARM

DATE OF DEATH

UNKNOWN X - 000239

DAY MONTH YEAR

CEMETERY

USAF CEMETERY MANILA NO 2

DISPOSITION OF REMAINS

7701 180
CODE DIST. PT.

PLOT

ROW

GRAVE

COUNTRY

PHILIPPINE ISLANDS

CAUSE OF DEATH

6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

FORT MCKINLEY CEMETERY
MANILA, PHILIPPINE ISLANDS

NAME AND ADDRESS OF NEXT OF KIN

(BY ADMINISTRATIVE DECISION)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

RANK

DATE OF DEATH

DATE DISTINTERRED

UNK X-239

UNK X-722 (Maus)

21 Sept 48

IDENTIFICATION TAG ON

ORGANIZATION

UNKNOWN

RELIGION

IDENTIFICATION VERIFIED BY

REMAINS
 MARKER

C. MAXLEE FAIN
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-722 (MAUS)

REMAINS PREPARED AND PLACED IN CASKET

DATE 21 Sept 48

BY

C. MAXLEE FAIN

CASKET SEALED BY

C. MAXLEE FAIN

EMBALMER (Signature)

C. Maxlee Fain
C. MAXLEE FAIN

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY

DATE 21 Sept 48

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.

9 AUG 1949
REPATRIATION
BRANCH
MEM. DIV.

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM AGRS MAUSOLEUM		TO FORT MCKINLEY MILITARY CEMETERY	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER <i>[Signature]</i>	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE 18 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

REPAIR RECORDS BRANCH
 AUG 8 3 33 AM '49
 JOURNAL DIVISION

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	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

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

7. SHIPPED

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

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE
APO 900

8 July 1949

Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X-239, Plot 2,
Row 8, Grave 1024, USMC USAF Cem. Manila #2 have
been reviewed and it is the opinion of this office that insufficient
evidence is available to establish the identity of this deceased,
and that these remains should be classified as unidentifiable.

FOR THE COMMANDING OFFICER:



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

Atch: Form 1044

Received 2 Aug 49 OQMG
Not identifiable from
information presently
available Budenberg
9 Aug 49

Incl. # 7'

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-722 (Formerly UNK X-239 Manila No. 2)				2. DATE OF REPORT 14 July 49	
3. NAME OF CEMETERY AGRS MAUSOLEUM, MANILA, P.I.	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	801	F	1410	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
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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

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)


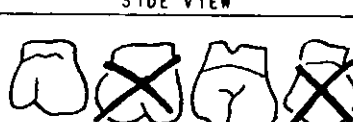






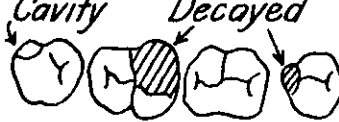

N O N E

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

Incl. # 72

18.

TOOTH CHART

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

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

Note: In the diagram, teeth 4 and 5 in the upper right quadrant are marked with 'U' and 'P' respectively, and tooth 4 is labeled 'Crown missing'.

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

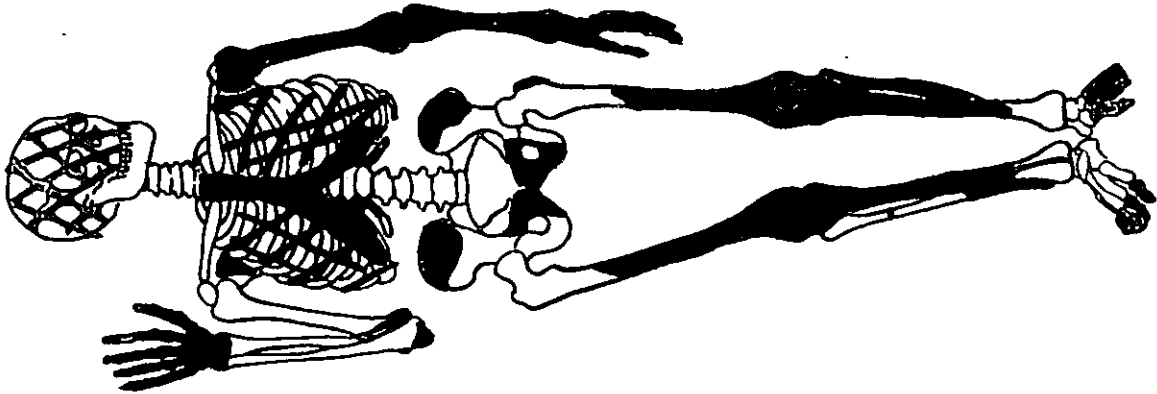
Maxilla is fractured on median line. Maxilla from R6 - R8 and mandible from R13 - R16 are missing. No loose maxillary and mandibular teeth present with remains. Crown of R4 is missing.

"UNIDENTIFIABLE"

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

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 - 8 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

X-722

IDENTIFICATION DENTAL CHART

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

10 Oct 47

UNKNOWN X-722 (Formerly UNK X-239)
 USAF Cem Manila #2, Luzon, P.I.

Unknown

Unknown

LAST NAME FIRST INITIAL RANK SERIAL NO.

Unknown

Unknown

UNIT

AGRS Mausoleum,
 Manila, P.I.

ORGANIZATION

Unknown

801 F 1410

PLACE OF DEATH

PLACE OF BURIAL

PLOT ROW GRAVE NO.

STORAGE

HANGER BAY CRYP

RIGHT

UPPER TEETH

LEFT

8 7 6 5 4 3 2 1 1 2 3 4 5 6 7 8

TYPE																	TYPE
LOCATION																	LOCATION

MISSING

INSIDE LOOKING OUT

16 15 14 13 12 11 10 9 9 10 11 12 13 14 15 16

TYPE																	TYPE
LOCATION																	LOCATION

KEY OF SYMBOLS TO BE USED ON ABOVE CHART

SYMBOLS IN WHOLE BOX

RIGHT

TYPE OF FILLING IN UPPER HALF OF BOX

LOCATION OF FILLING IN LOWER HALF OF BOX



EXTRACTED



AMALGAM



MESIAL (BETWEEN-TOWARD FRONT)



CAVITY INDICATE LOCATION



SILICATE OR PORCELAIN



OCCUSAL (BITING SURFACE-BACK TEETH)



FIXED BRIDGE (INCL. ABUTMENTS)



OXOPHOSPHATE (CEMENT)



DISTAL (BETWEEN-TOWARD BACK)



TEETH REPLACED BY DENTURE



POSTHUMOUSLY MISSING (LOST AFTER DEATH)



LINGUAL (TOWARD TONGUE)



FACIAL (TOWARD CHEEK)

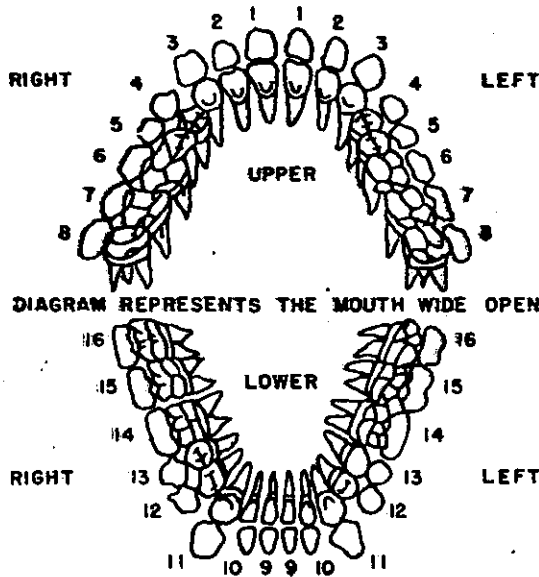
INSTRUCTIONS:

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:

Maxilla broken at I4. Maxilla missing from R1 through R8.
Mandible missing from R12 through R16.

/s/ Troy H. Ellis
SIGNATURE OF PERSON WHO PREPARED CHART

/s/ John H. Barr D-234444
VERIFIED BY GRS OFFICER

/p/ TROY H. ELLIS, T/5
NAME AND RANK TYPED OR PRINTED

/p/ JOHN H. BARR SF-8
NAME AND RANK TYPED OR PRINTED

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

10 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-722 (Formerly
 Unknown X-239 USAF Cem Manila #2, Luzon, PI
 Cemetery: AGRS Mausoleum, Manila, P.I.
 Plot 801 HANGER Row F BAY Grave 1410 CRYP

AGRS Mausoleum, Manila, P.I.

1. Arrived at cemetery 10 October 1947
(Hour) (Date)
2. Place of death Unknown
(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 CMT #1
(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		
	O		
Jacket, HBT	N		
* Shirt, Wool OD	E		
Undershirt, Wool	/		
Undershirt, Cotton	/		
Trousers, HBT	/		
* Trousers, Wool OD	/		

Belt, web
Drawers, wool
Drawers, cotton
Leggings, wool.....

Socks, cotton
One canvas shoes
* Shoes 2 Pairs of shoes - (type) and one pair of service shoes, size - 7 1/2 B

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 (Bone fragments) - 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 (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 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw (Large, small, normal) Circumference of head in inches (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 (Unusual characteristics of fingernails)

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

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 According to remarks of the Report of Reinterment only bottle found.
All informations destroyed by water. Bones indicate many fractures. Four
shoes were found in grave with bones. Nothing found to warrant identification.
Estimated weight of deceased is 8 lbs. Nothing found to justify identification.

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/ John H. Barr D-234444
(Officer's Name)

SP-8 AGRS
Rank Service

CIP, AGRS Mslm, Manila, P.I.
(Organization)

10 October 1947

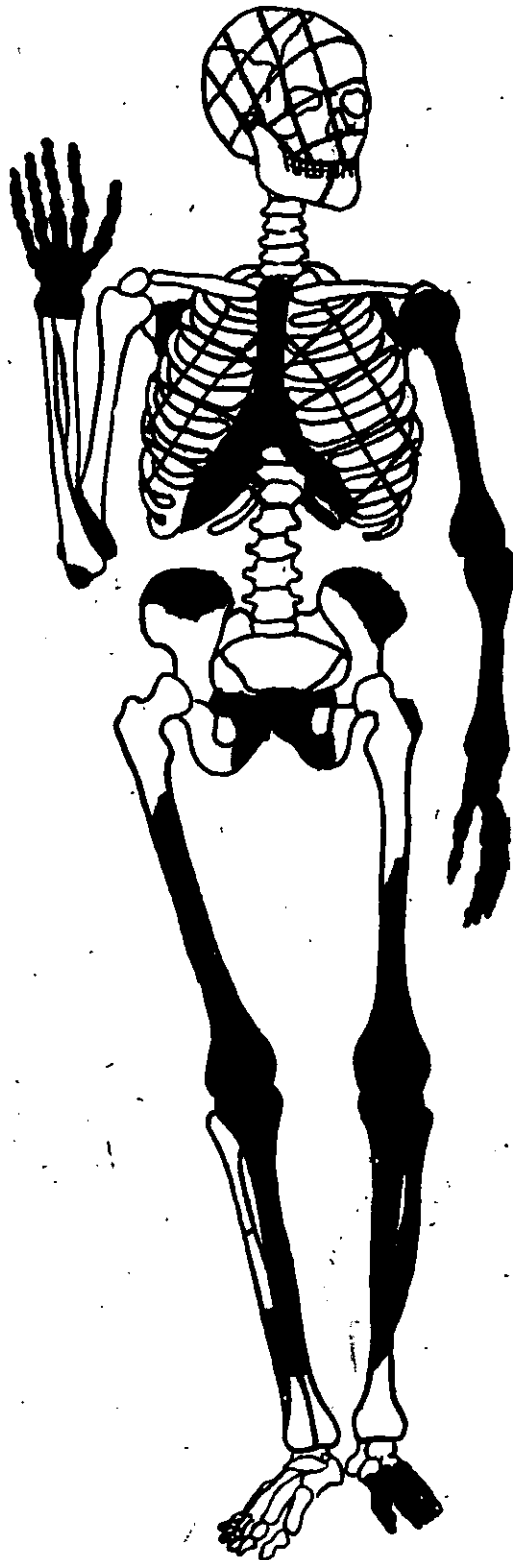
CERTIFIED TRUE COPY:

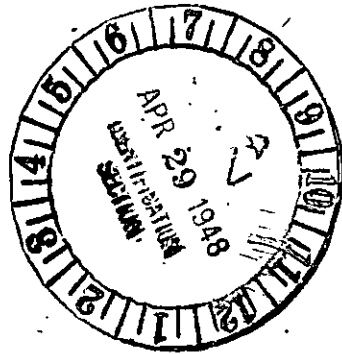
George T. Gamboa
GEORGE T. GAMBOA
2d Lt., MAC

SKELETAL CHART

X-722

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)





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

15 Oct 47

Imprint Identification Tag If Possible.
DO NOT TYPE

Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)

UNKNOWN X-722 (Formerly UNK X-239
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

Unknown

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

REFERRAL
RECORDS BRANCH
DEC 22 2 57 PM '47
MEMORIAL DIVISION

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	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
STORAGE. 13 Oct 47	1000	STORAGE. Casket	None	JANGER 801	BAY F	CRYP 1410

WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE	PLOT No.	ROW No.	GRAVE No.
RESTORED Yes	USAF Cem Manila #2, Luzon, P.I.	2	8	1024

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)	
STORAGE Yes	Yes	

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
STORAGE UNKNOWN X-724				CRYP 1412

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
STORAGE UNKNOWN X-720				CRYP 1408

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
<i>Wm. R Gilbert</i> Wm. R GILBERT, Adm. Asst.	<i>Lucio S Panofco, Jr.</i> LUCIO S PANOFCO, 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:


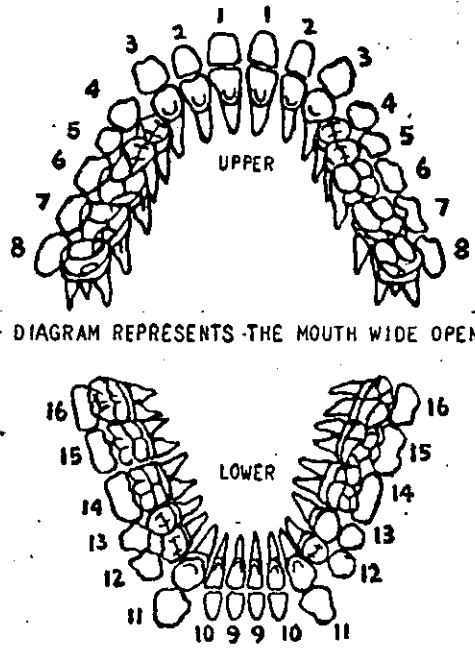




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

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



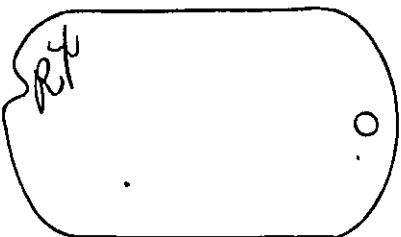
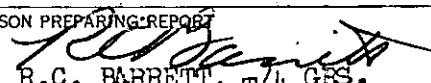

REMARKS:

Identification Check List and Dental Chart accomplished.

18 NOV 1951

U-
RESTRICTED *W*

U 1096

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 5 January 1946	
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.					
		NAME (Last, first, middle initial)			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		
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)							
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME							
Incl 1543 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.	
11 Dec. 1945	1100	shelter Half	Cross	2	8	1024	
WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE			PLOT No.	ROW No.	GRAVE No.	
Yes	USAF cemetery Ft. Wm. McKinley, Luzon, P.I.			G	3	9	
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- 238 (formerly Unknown X-9) (USAF cem. San Jose #1, Mindoro P.I.)					1023		
BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)		RANK	SERIAL No.	ORGANIZATION	GRAVE No.		
UNKNOWN -X- 240					1025		
SIGNATURE OF PERSON PREPARING REPORT			SIGNATURE OF GRS OFFICER VERIFYING REPORT				
 R.C. BARRETT, T/4, GRS.			 E.M. MOORE 1st Lt., QMC.				

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

Incl 87'

RESTRICTED

Section 3.—UNIDENTIFIED REMAINS.

INSTRUCTIONS:

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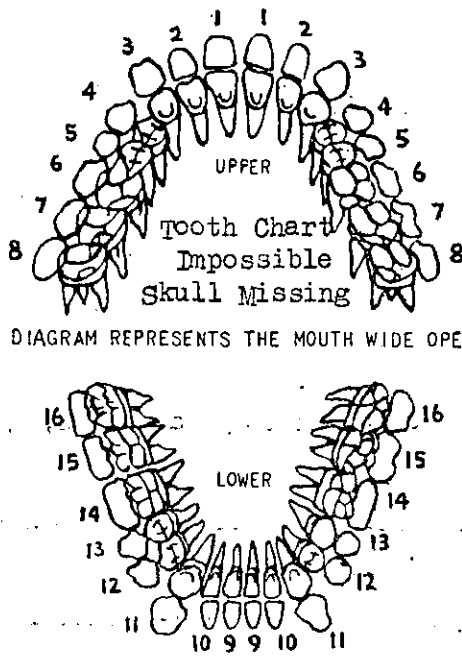




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8 FEB 1946

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

<p>FILLINGS</p>  <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER</p> <p>Tooth Chart Impossible Skull Missing</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p> <p>LOWER</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:

bottle found. All information destroyed by water. Bones indicate many fractures. Four shoes found in grave with bones