QMONT 293 GRS Far East

20 october 1949

SUBJECT: Approval of Unidentifiability

TO : Commanding General

Philippine Command

APC 707, c/o Postmaster

San Francisco, California

ATTN: ACRS, PHILODE TORE

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

Unknown #	X-365, X-430,	鍵	Mausoleum #	10	formerly	X-54, X-282,	USAF	Com.,	Manila	#2
68	Lak Silv	鍵	Ħ	H	#	X-304.	Ħ		- 10	10
88	X=613,	23	19	19	98	X-124	额	8	66	18
16	X=712,	98	att	41	鍵	I-227.	部	-	88	82
68	A Section of	49	100	28	62	X-238.	83	据	88	88
10	X-726.	68	68	22	98	X-243.	82	18	63	12
糠	1.797.	89	18	55	98	X=312.	- 11	18	99	89
19	X-4699.	<b>8</b>	22	88	報	Xe/56.	42	88	48	80

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

FOR THE QUARTEDMASTER GENERAL:

T. H. METZ It. Colonel, QNC Memorial Division REB

TEC

cc: Adm Section

G. Reynolds:dal

L. M. White

J. Windsor

cc: CINCFE, ARO 500

### HEADQUARTERS PHILIPPINES COMMAND UNITED STATES ARMY

GSGR 293.9

ARO 707 30 SEP 1949

SUBJECT: Unidentifiable Remains

TO:

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

1. In acco dance 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-365	AGRS	Mslm		UNKNOWN	X-3039	AGRS	Mslm
. 10	X-430		8	•	Ħ	X-3041	<b>ti</b>	tt
Ħ	X-451	Ħ	#		17	X-3612	17	ti
Ħ	X-613	Ħ	Ħ		11	X-4226		11
11	X-712	C)	n		. 8	X-///1	11	<b>13</b> 1
n	X-721	n	n		•	X-4699	Ħ	Ø
83	X-726		ti ti		17	X-4863	<b>ti</b> i	Ħ
a	X-797	17	Ħ		n	X-4867	12	•
ti	X-2345	Ħ	11		ú	X-4948	ti	R

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

FOR THE COMMANDING GENERAL:

18 Incls
QMC Forms 1044 w/certificates
of Unidentifiability

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

/Bafc			· · · · · · · · · · · · · · · · · · ·					BHR 💯 .
/drs	Bare	46 Ft.	kinley Di	SINTERN	ENT DIRECT	TIVE		
	CARL R.	H. MARK Superinte			T			· · · · · · · · · · · · · · · · · · ·
	SECTION A —.	IÁL LOCATION O		<del>- • • -</del>	7747	<sup>er</sup> <b>0014</b> 0		15 MONTH YEAR
AME	•			- SERIAL NU	MBER	RANK	ARM	DATE OF DEATH
		U	NKNOWN	/x - @(	28200		0	DAY MONTH YEAR
EMETERY  USAF CI	emete	RY MA	N. IIc A.	Sr0		9180	<b>D</b>	DISPOSITION OF REMAINS
OT- ROW-	GRAVE	COUNTRY	*****		٠		. :×	CODE DIST. PT.  CAUSE OF DEATH
2 12	1451	PHIL	IPPINE	IS	LANDS		-	6
		A CONTRACTOR OF THE PARTY OF TH	SECTION B — CO					
ME AND ADDRESS OF FORT MC K		· FMFTFRY		NAME	AND ADDRESS OF	NEXT OF KIN"		
MANILA, P			DS		(BY ADMI	NISTRATI	VE	DECISION)
		SE	CTION C DISIN	TERMENT AN	D IDENTIFICATION	N		
AME UMK X-282		SERIA	L NUMBER	RANK	DATE OF DEATH			E DISTINTERRED
UNIX X-430 IDENTIFICATION TAG		NZATION			DELICION	T IDENTIFICATIO		21 Sept 1948
REMAINS  MARKER	l l	UNKNOWN		·	RELIGION	IDENTIFICATIO PERRY Embalme	E.	WHITE
		SECT	ION D — PREPARA	TION OF RE	I Mains for Shipmi		<u>r</u>	NAME AND TITLE
ATURE OF BURIAL					ON OF REMAINS	-		
	elter Hal	f			Skele	tal	_	
THER MEANS OF IDEN	NTIFICATION							
INOR DISCREPANCIES	51					-		
Two (2) I	dentifica	ition Tags	read UIK	X-430 (	Maus)			
MAINS PREPARED AN	ID PLACED IN C	ASKET						
ATE 21 Sept	; 48		ъv . Ъ	ERRY E.	WHITE			
ASKET SEALED BY		<u> </u>	ВУ Г		R (Signature)	05,	1.	,
ਪਰਗਾਵ	B. WHITE		•		Leny	6 11	ut	
ASKET BOXED AND M				SHIPPING	ADDRESS VERIFIE	D BY		
ATE 21 Sept. 4	egy HORAC	E L. ALLI	SON, Sgt.	İ	•	O V. AUREL	IO.	1st Bt. INF.
I hereby co	ertify that al	the foregoin	<del></del>					immediate supervision
and that the re	port above is	correct.	(		HOMORIO V.	7. [L.	/	
						F GRS INSPECTO	R	MEHATRIANON
Prepare Discr	epancy Repo	rt QMC Form	1194a for maje	or discrepa	ncies.			MAN STANK

#### RECORD OF CUSTODIAL TRANSFER 1. SHIPPED FROM FORT MCKINLEY MILITARY CEMETERY AGRS MAUSOLEUM KIND OF CONVEYANCE NAME OF CONVOYER TRUCK SIGNATURE OF SHIPPER DATE SIGNATURE OF RECEIVER DATE 2 2 SHP 1949 2. SHIPPED FROM KIND OF CONVEYANCE NAME OF CONVOYER SIGNATURE OF SHIPPER SIGNATURE OF RECEIVER DATE DATE 3. SHIPPED FROM " TO (IND OF CONVEYANCE NAME OF CONVOYER SIGNATURE OF SHIPPER DATE SIGNATURE OF RECEIVER DATE 4. SHIPPED TO KIND OF CONVEYANCE NAME OF CONVOYER SIGNATURE OF SHIPPER DM:G4CMF DATE SIGNATURE OF RECEIVER DATE 5. SHIPPED FROM (IND OF CONVEYANCE NAME OF CONVOYER MANIEN, PHIETPHINE INCHIDS SIGNATURE OF SHIPPER SIGNATURE OF RECEIVERY ISTRATIVE DECISIO D'ATE DATE FORT MC KINLEY CEMETERY 6. SHIPPED 2 12 1451 PHILIFPING SCABINS IND. OF CONVEYANCE NAME OF CONVOYER TOY LL & DATE UN SIGNATURE OF SHIPPERS WESTERS IN A アンフィン・ SIGNATURE OF RECEIVER DATE RUKUNON SHIPPÉD'OCK AS ROM IND OF CONVEYANCE NAME OF CONVOYER ()()) GNATURE OF SHIPPER SIGNATURE OF RECEIVER DATE DATE

## HEADQUARTERS AMERICAN GRAVES REGISTRATION SERVICE PHILCOM ZONE APO 900

12	Sept	1949
	Date	3

SUBJECT: Unidentifiable Remains

TO

: The Quartermaster Washington 25, D. C.

Attn: Memorial Division

The records pertaining to Unknown X-282, Plot 2., Row 12, Grave 1431, 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:

Attch: Form 1044

Captain, (AC) Chief, Records Branch

Menur

fiel 2'

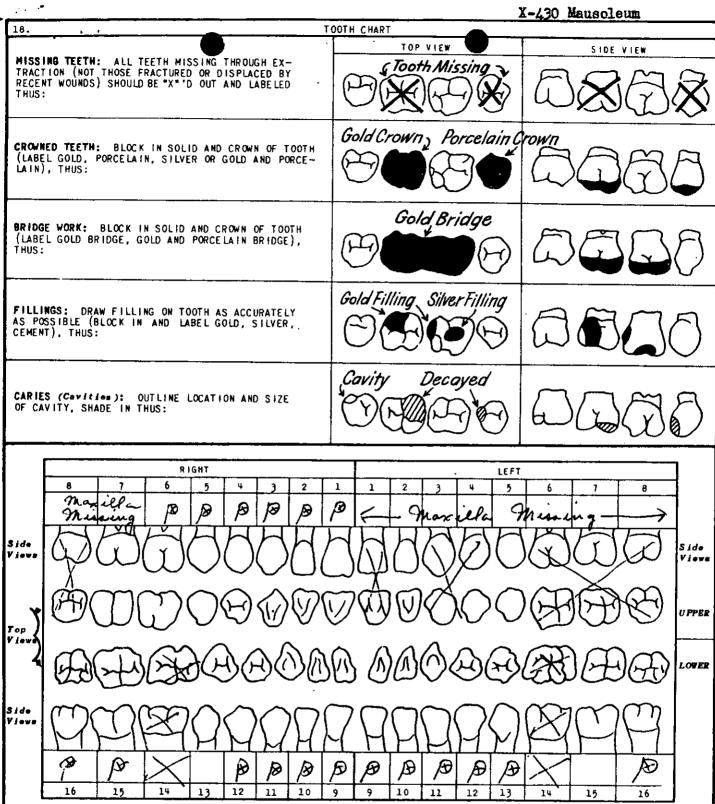
a de la companya de l						
<b>√.</b> } •	IDENTIFICAT	TION DA	TA			
1. REMAINS OF UNKNOWN ;				<u></u>	2. DATE OF RE	PORT
HNKNOWN X 13	O (Formerly UNK X-282	) Manile	a #2)		14 Sept	. <b>4</b> 9
3. NAME OF CEMETERY	O (Torner y our 22-200		<u>* 77.≈ 7.</u> 5 • ROW	6. GRAVE	<del></del>	TE OF
	-			<del>                                     </del>	ſ	REINTERMENT
ACRS Mausoleum,	Manila, P.I.	801	F	1606		ŀ
	. PHYSICAL DE					
1		10. COLOR			11. RACE	
150 lbs	51811	UT	? D		UNKNO	MN
12.GIVE DESCRIPTION OF ANY OF	FFICIAL IDENTIFICATION FOUND W	VITH REMAIN	1\$			
	NONE					
13.GIVE DESCRIPTION OF TATIOL	OS OR SCARS ON BODY AND/OR SUC	JH INFORMAI	TEON OBIA	INED FROM	OTHER SOURCES	
	UTD					
14. WAS BODY BURNED? T	TO WHAT EXTENT?					<del> </del>
YES X NO						
15. WAS BODY MANGLED?	TO WHAT EXTENT?					7
T YES A NO	•					
16. DESCRIBE EVIDENCE OF HEAL	LED FRACTURES AND BONE MALFORM	MATIONS				
	NONE				•	
17. LIST EVERY ITEM OF CLOTH	ING, EQUIPMENT AND PERSONAL EI	FFECTS FOUL	ND, SHOW	ING THE TY	PE, COLOR, SIZ	E, MARKINGS,

17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry merks 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"

hal or



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, L2 and L5 are loose present with remains.

"UNIDERTIFIABLE"

J. McDERMOTT Laboratory Officer, CIP

BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA?

21. REMARKS AND ADDITIONAL INFORMATION

No ROI, identification tags or personal effects found with remains. Estimated weight of remains - 6 lbs.

## "UNIDENTIFIABLE" RBY REASON OF LACK OF SUFFICIENT IDENTIFYING DATAS

I CERTIFY THAT I HAVE PERSONALLY VIEWED	THE REMAINS C	F DECEASED	AND THAT AL	L RESULTING	INFORMATION	HAS	BEEN
RECORDED TO THE BEST OF MY KNOWLEDGE							

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

SIGNATURE

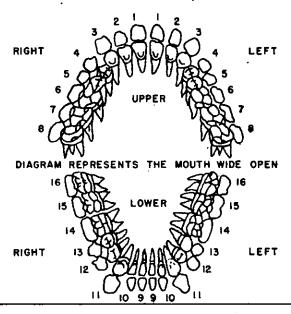
J J McDERMOTT, Lab Officer, CIP

2. In Sermin.

	IDENTIFI TO BE USED WITH QA	IC FORMS NOS. 1042	8 1044 IN PLAC	E OF CHART	THEREON,		
	AND TO BE ATTACHED	10 AND FORWARDED	WITH THESE FOR	RMS WHEN AC		ot 47	
	UNKNOWN X-430 (Formerly UN	K X-282 USAF	•			DATE	
-	Cemetery Manila #2, I		. Unknown	· 	Ünknown	<del> </del>	
	LAST NAME FIRST	INITIAL	RANK		SERIAL	NO.	
•	Unknown			Unknown			j
	UNIT	AGRS Mau Manila		ORGANIZAT 801	ION F	1606	i
	Camp Murphy,: Luzon P.I.		OF BURIAL	PLOT		1606	
	PEAGE OF DEATH	Maxilla.	STORAGE	HANGER	ROW #AY	CHIEL	
	8 7 6 5 4	UPPER 3 2 I	TEETH 2	3 4	5 6	7 8	7
TYPE LOCATIO		XXX		D	8	XX	TYPE LOCATION
		INSIDE I	LOOKING OUT	•	<u> </u>		
	RIGHT 16 15 14 13 12	LOWER	TEETH 9 IO	LEI II I2	FT 13 14	4 15 16	
TYPE LOCATI		N N N	DD	NN		X	TYPE
	KEY OF SYMBO	OLS TO BE	USED O	N ABOV	/E CH	ART	
	SYMBOLS In	TYPE OF FII	LLING	LOCATIO	ON OF FILLI	NG	
1	WHOLE BOX	UPPER HALF	OF BOX	LOWER	HALF OF	вох	
	EXTRACTED		LGAM VER)	m	(BETWEEN	MESIAL I-TOWARD FROM	<b>4T</b> )
	GAVITY. INDICATE LOCATION	G GOL	0	0	(BITING S	OCCLUSAL Urface back te	ETH)
	FIXED BRIDG		GATE OR Celain	d	(BETWEE!	DISTAL N-TOWARD BAC	K)
	TEETH REPL BY DENTURE		PHOSPATE EMENT)		LING (TOWARD	BUAL TONGUE)	
	POSTHUMOUSLY MISS (LOST AFTER DEATH			F	FAC (TOWARD		
OMC	FORM 1895 5 FEB 46			DEVENOR		NSTRUCTIONS	

#### INSTRUCTIONS:

- I. 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, 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/ Edwin Gregurek
SIGNATURE OF PERSON WHO PREPARED CHART

Edward H. Marshall VERIFIED BY GRS OFFICER

EDWIN GREGUREK

NAME AND RANK TYPED OR PRINTED

SP-6 C-062874 NAME AND RANK TYPED OR PRINTED

CIP Lab. Manila P.I. PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED 13 Oct 47

DATE

CERTIFIED TRUE SOPY:

GAMBOA

MAC

930-PHILRYCOM-4, 47-30M

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

#### CHECK LIST **IDENTIFICATION**

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

		OWN X-430 (Formerly UNK X-282	
		ery AGRS Mausoleum, Manila P.	
•	Dlot	801 Row F Grave 1606	
ACRS Mausoleum, Manila P.I.	Plot	Clave	4
Arrived at Comments 13 Oct 47	,		
• • • • • • • • • • • • • • • • • • • •	ate)		
Place of death Camp Murphy, Luzon, (Name of closest to		(Coordinates and letter Prefix, maps)	•
(Sheet, scale and serials used)			
Remains recovered or disinterred by	С м т #1		7
Remains recovered or disinterred by	(N	ame and organization)	
Fyguated to Comptany by	•		•
Evacuated to Cemetery by	(Name	and organization)	
<u> </u>		•	•
Description of clothing and equipment:	(if clothes do not fi	t, obtain size from body measureme	nts)
Item Clothing	• • • • • • • • • • • • • • • • • • •	Indicate unusual markings	
Marking <b>s</b>	Sizes	color, wear, tear, repairs,	etc.
* Headgear (Type)	, autogra		
		.* :	
Raincoat	-	· ·	
Overcoat			
Jacket, Field	="	•	
Jacket Combat			
Jucket, Combat			
Mackinaw /		•	
Mackinaw			•••
· /	N		•••
Mackinaw Sweater Jacket, HBT	N 0 N		•••
Mackinaw Sweater Jacket, HBT * Shirt, Wool OD	N O N		•••
Mackinaw Sweater Jacket, HBT * Shirt, Wool OD Undershirt, Wool	N E		•••
Mackinaw Sweater Jacket, HBT * Shirt, Wool OD Undershirt, Wool Undershirt, Cotton	N O N		
Mackinaw Sweater Jacket, HBT * Shirt, Wool OD Undershirt, Wool Undershirt, Cotton Trousers, HBT	N O N		-
Mackinaw Sweater Jacket, HBT * Shirt, Wool OD Undershirt, Wool Undershirt, Cotton	N O N		

Belt, web		
Drawers, wool,	1,	
Drawers, cotton		,
Leggings, wool		·*************************************
Socks, cotton		
* Shoes	(type)	······
	N -	
Web Equipment	(type)	*
(Other item)		
• If hody is nude, sizes of	these items should be computed by measuring the remains	
Chevrons or Insignia		
· maigina	(Type & location; shirt, jacket, coat, helmet)	
Shoulder Patch		
Description of Remai	ns: Skeleton only - Skeletal chart attached. Est.  Est.	
- /	ht 51 811 Weight 150 1 bs. Description of wounds	
Bandages or dressing	Scars (Length, width, location)	*
	Tattoos (Number, location illustrate on separate page)	
Outstanding moles, v	earts or birthmarks (Yes-no; description, location)	
	1	
	r then hand and face	
Complexion	(Light, medium, dark, clear, pimples, pocks, freckles)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Build	T (Large, fat, thin, muscular)	***************************************
** .	D	
	(Color, length, quantity, curly, wavy, straight, whorls, or definite parting)	
Hair	(Buidness, widows/peak, distinctive cutting or other characteristics)	,t.tv
	Mustaghe Beard or Cleugth, h	
toorer, a	1,	- /

6.

4		•		
		. ,		
Goatée	<u> </u>			
	(Light, color, extent)			
3yes		Eyeb	rows	
	(Color, setting, shape)	τ <sub>η</sub> .	(Color, bushines	s, extent across nose)
Vose	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Eears	.,	
,	(Size, shape, straight)	/ .		or far from head)
Mouth	(Large, medium, small)	Lips		
	(Large, medium, small)	/	(Small, lar	ge, full)
Faath Taath	chart attached.	•		
reciii <del>*.uu.jii.</del>	(White, size, uner	reness, spacing, noticeah	le crowns, fillings, extract	s) ,
~		•	,	2 %
Chin		nent, receding, pointed,	dimples, double)	······································
	//			
aw	ge, small, normal)	Circumference of he	ad in inches	(Hat band)
(73.11)	/			( 22
Neck	Size, length, short, normal,/w	Larynx		
(	Size, length, short, normal, w	rrinkted) /	(Prominen	i, normal)
Shoulders	(Broad, straight, small, ro	Arm's	•	
	(Broad, straight, small, ro	vinded) (Le	ength, muscular, color, exte	nt and quantity of hair
		1	,	,
		7, .		
Hands	***************************************			
_				•
fingers	(Short, thick, 1	long, slender size of kn	uckles, missing fingers or j	oints)
	, ,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	"/,	7	
•	(11			
	(Unusua	at characteristics of fing	(ernans)	
Chest				
	(Size of nipples, colo	r, quantity and extent	of hair, large, small, norr	ual)
Waist	(Size of navel,	/	/	
	(Size of navel,	appendectomy, amount,	quantity, and color of hair	)
Back	(Quantity and extent of hair)	Circumcision	/ Pubic H	air
,	(Quantity and extent of hair)		(Yes-no)	(Color)
LT !		•	1	
Hermapiasty		, (Yes-no;	location	*
			,	
Legs	(Inseam, muscular, knock	-kneed, bowed, normal,	quantity, color and exter	it of hair)
•			• /	
Feet	(Size, corns, callouses, flat	Toes .	(Slender, straight, c	rooked, overlap)
	,		/ ,	,
Evidence of he	aled fractures	, / kf	ners los de l	
		1,1080,	minis, regs, etc.)	
NOTE: Use a	ttached charts "A" and	"B" to indicate pa	erts not received. /	

,

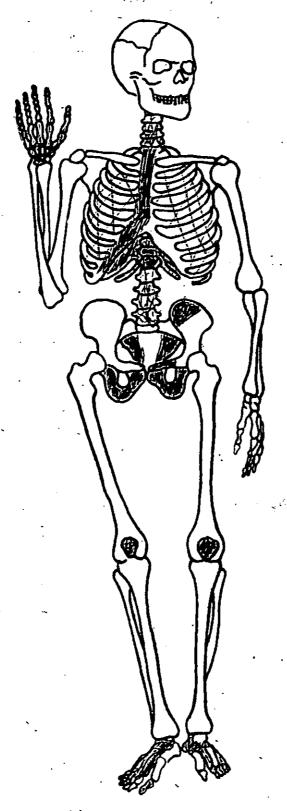
'. Have finger prints been pla	ced on Report of	Interment? No.		
	•		(Yes-no)	
. If not, explain Due to	condition of re	mains.		***************************************
				٠
Has tooth chart been prepa	red? Yes	If not explain		
. Tus tooth chart been prepa	(Yes-no)		,	-
·			. ,	
NT. No. also		nomadna Na na	io ano 1 - aloo alaa	· · · · · · · · · · · · · · · · · · ·
. Remarks No burial bot	ctle lonnd with	remains. No per	rsonal ellects	• Noruing
found to warrant i	identification	Estimated weigh	nt of remains	6 lhs.
Toure to warrant		22 01HG 00 G 1101B	io or romarite	0 100
				•
		······································	·	
	•	•		•
		·		
<del>!</del> * :	٧.			
I certify that I have persona	ally viewed the rem	vains of subject decea	sed and all resulti	na informati
has been recorded to the be				
, and been recorded to the be	ide de amy milotrica	<del>,</del>	,	3
		•	•	
		s/ Edward H	. Marshell	
				*
4			(Officer's Name)	
	•	SP-8	C-062874	-
•				Service
· ·		Rank	•	26LAY66
			•	
	•	AGRS M	ausoleum, Mani	la P.I.
		AGRS M		la P.I.
		AGRS M	(Organization)	la P.I.

GEORGE IT. GAMBOA 2d (Lt., MAC

### SKELETAL CHART

X-430

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



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

Yes

UNKNOWN X-433 BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED

UNKNOWN X-426 SIGNATURE OF PERSON PREPARING REPORT

Adm

SIGNATURE OF GRS OFFICER VERIFYING REPORT

SERIAL NO.

SERIAL NO.

INF

ORGANIZATION

ORGANIZATION

GRAVE No.

CRYPT

1608

CRYPT

1604

GRAVE No.

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

RANK

RANK

#### RESTRICTED

			**
<b>™</b> •	-	Section 3.—U NTIFIED REMAINS.	
	LEFT LITTLE FINGER	INSTRUCTIONS:  (a) Great care will be taken to record the most minute clues for the future idea mains. Fill in anatomical characteristics below, and any other clues under "Othe social security number; position of body found in airplanes, vehicles, and tanks; and planes, vehicles, and tanks.  (b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fing chart at left, or as many as possible. If no fingerprint or prints can be secured, the every tooth will be indicated on the tooth chart in accordance with diagram below.	
%* 1 <u>_</u> 1 1 1	RING	every tooth will be indicated on the tooth chart in accordance with diagram below.  accomplished if one or more fingerprints are secured.	Tooth chart will not be
	LEFT 3 FINGER	HEIGHT WEIGHT COLOR OF EYES COLOR OF HAIR BIRTHMARKS, SCAI	RS, OR TATTOOS
		WEAPON AND SERIAL NO.   LAUNDRY MARKS   WHERE BODY WAS	BURIED OR FOUND
	LEFT MIDDLE FINGER	HEAPON AND SERIAL NO.	BURIED OR FOUND
្រាក្កាស់	FINGER	OTHER IDENTIFICATION CLUES	
	LEFT INDEX FINSER		·
	TRISER	FILLINGS SILVER FILLING GOLD FILLING	$\tilde{Q}_{O}^{2}$
-	TAUHT TABT	CAVITIES: CAVITY DECAYED UPPER	55.7
	RIGHT	MISSING TEETH  TOOTH MISSING  DIAGRAM REPRESENTS THE  CROWNED TEETH	MOUTH WIDE OPEN
	RIGHT INDEX FINGER	BRIDGE WORK  GOLD BRIDGE  15  LOWER  14  13  14  13  14  15  16  17  18  18  18  18  18  18  18  18  18	36 ) 15 14 13 15 ) 12
***	<u> </u>		
•	RIGHT MIDDLE FINGER	FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLE.	ISHED CEMETERY
-	RIGHT RING FINGER	REMARKS:	-
24 NOV 1947	RIGHT LITTLE FINGER	Identification Check List and Dental Chart acco	mplished.

THE THEOLOGICAL TANGET OF THE

REPATRIATION RECORDS BIGHTH IDENTIFICATION IMPOSSIBLE IDENTIFICATION SECTION INDICAL DIVISION CATEGORY III CASE SERVED ON

REPORT OF ANTERMENT  (AR 30-1810 and AR 30-1815)  15 Jan. 16  Impoint librarification. Tog if Possible.  PARE Cong. Fig., middle indied  ORAGE  UNKINONN -X - 282 (Com., Manilla #2)  SERIAL NO.  PLACE OF BEATH  CRED MUTPHY, DISON.  P. 1.  CARRES OF DEATH  CRED MUTPHY, DISON.  P. 1.  CRESSENCY ADDRESSEE (Name, relationship, and address)  IF NO TAGS FOUND ON BODY  Of a well-beath formation of control of control of control of the control of	WD QMC FORM 1042	DA	DATE OF REPORT						
Impaired Identification Tag If Possible.  Settles L.—IDENTIFICATION.  NAME (Cast, firt, middle sides)  UNEXNOON -X - 282 (Come, Manila #2)  BRACE  ORGANIZATION  BRACE  RELIGION  RACE  RELIGION  RE	(Rev. 1 Apr. 1945) (Supersedes GRS Form 1)						15 Jan.	46	
NAME (Leaf, first, middle indiced)  UNKNOWN -X - 282 (Cosm., Manila #2)  GRADE  ORGANIZATION  BRANCH OF SERVICE  BRACE RELIGION  DATE OF DEATH  CRADE MATPINY, INZON, P. 1.  EMERCENCY ADDRESSEE (Name, relationship, and address)  CAUSE OF DEATH  CRADE MATPINY, INZON, P. 1.  EMERCENCY ADDRESSEE (Name, relationship, and address)  IDENTIFICATION TAGS FOUND ON BODY  (1.5. or most)  NOTIO  WERE SUBSTITUTE TAGS PROVIDEDITY or er so)  YOR (2)  LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  PALL 601  NOTIO  Section 2 — BURIAL. If or they than in established cometery, furnish sheetch and map coordinates on reverse.  NAME, NUMBER, COORDINATES, AND LOCATION OF CEMPTERY  USAF Commetery Manila #2, Inzon, P. 1.  DATE OF BURIAL.  22 Dec. 1.5  G900  Sholter Half  Cross  YOR  USAF Commetery Ft. Wm., KOKINION, Inzon, P. 1.  PHOT NO. ROW NO. GRAVE NO.  WERS HILL A REBURNAL. INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS USAF Commetery Ft. Wm., KOKINION, Inzon, P. 1.  PHOT NO. ROW NO. GRAVE NO.  TYPE OF GRAVE NO.  BASE OF THE ARBURNAL. INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS USAF Commetery Ft. Wm., KOKINION, INZON, P. 1.  PHOT NO. ROW NO. GRAVE NO.  TOWN NO. GRAVE NO	Imprint Identification T	ad If Possible	T	· · · · · · · · · · · · · · · · · · ·	-	<u> </u>			
UNEXNOVEN -X - 282 (OBM. NEARLE #2)  GRADE  ORGANIZATION  BRANCH OF SERVICE  RELIGION  FACE  RELIGION  FACE  RELIGION  IF OTHER THAN U.S. DEAD, GIVE  WARRE OF COUNTRY  CAUSE OF DEATH  CRUDE OF DEATH  DATE OF DEATH  CRUDE OF DEATH  WERE SUBSTITUTE TAGS FOUND ON BODY  WERE SUBSTITUTE TAGS FOUND ON BODY  WERE SUBSTITUTE TAGS FOUND ON BODY AND DISPOSITION OF SAME  PAGE  PAGE  TO SENDER 2—BURIAL  FOR CRUDE OF SAME  DATE OF BURIAL  DATE OF BURIAL  BURICD IN GROWN AND DISPOSITION OF SAME  DATE OF BURIAL  22 DBC . 45  OP OD  SHELTEY HER IN SHEARLY AND LOCATION OF CEMETERY  WERE SUBSTITUTE THAN IN A REBURIAL, INDICATE NAME NUMBER COORDINATES OF PREVIOUS CRUTERY AND LOCATION OF GRAVE  (Tas or so  VOS  USAF Compatory Ft. Wim, MCKINLES OF PREVIOUS CRUTERY AND LOCATION OF GRAVE  TYPE OF REJURIOUS  PERSON COMPUTETING BURIAL RITES  "I DEMTIFICATION TAGS BURIED WITH BODY  YOS  BODY BURIED ON DECEASED HIGHT, NAME (Lost, fast, middle indical)  BODY BURIED ON DECEASED HIGHT, NAME (Lost, fast, middle indical)  BODY BURIED ON DECEASED HIGHT, NAME (Lost, fast, middle indical)  BODY BURIED ON DECEASED HIGHT, NAME (Lost, fast, middle indical)  BODY BURIED ON DECEASED HIGHT, NAME (Lost, fast, middle indical)  UNIXIONOM -X - 283 (CRID, Manila #2)  SIGNATURE OF RESON CRITICAL RIGHT, TO U.S. and allied dead, signed criginal for company and and to the Quarter master Company  DISTRIBUTION OF REPORT: Sympat original for U.S. and allied dead, signed criginal and case of or an energy and and and case, fast, indicate story  DISTRIBUTION OF REPORT: Sympat original for U.S. and allied dead, signed criginal and case or or an energy and and and and and to the Quarter master Company  DISTRIBUTION OF REPORT: Sympat original for U.S						SE	SERIAL No.		
GRADE  GRADE  GRADE  GRANEATION  GRANEATION  GRADE  GRADE  GRADE  GRANEATION  GRADE  GRADE  GRANEATION  GRADE  GRADE  GRADE  GRANEATION  GRADE  GRADE  GRADE  GRADE  GRANEATION  GRADE					( <del>-</del>	"0"			
PLACE OF DEATH  GEMP MATPLY, . DIZON.  P. 1.  EMERGENCY ADDRESSEE (Name, relationship, and address)  IDENTIFICATION TAGS FOUND ON BODY  (1, 2, or norm)  NOTE  WERE SUBSTITUTE TAGS PROVIDEDILY as or may  Yes (2)  LIST PERSONAL EFFECTS FOUND ON DODY AND DISPOSITION OF SAME  AND CONTINUE TAGS PROVIDEDILY as or may  Yes (2)  LIST PERSONAL EFFECTS FOUND ON DODY AND DISPOSITION OF SAME  AND CONTINUE TAGS PROVIDEDILY as or may  Yes (2)  LIST PERSONAL If other than in established counstay, furnish shetch and may coordinates on reverse.  NAME MINISER COORDINATES, AND LOCATION OF CENTERY  USAF Comptery Manila #2, Dizon, P. I.  DATE OF BURIAL HOUR BURIED IN (Strough Montal, or name of short)  IT A REBURIAL INDICATE NAME, HUMBER, COORDINATES OF PREVIOUS CENETERY, AND LOCATION OF GRAVE NO.  WAS THUS A REBURIAL (Value of the continue)  USAF Comptery Ft. Vim. MCKINLOY, DIZON, P. I.  HOW NO. GRAVE NO.  ARRECT IN N I N G. O F R O W  BODY BURIED ON DECASED LEFT, NAME (Last, first, middle initial)  PERSON CONDUCTING DURISH REP.  SIGNATURE OF REPORT.  SIGNATURE OF PERSON CONDUCTING GRAVE NO.  UNKNOWN -Z- 283 (Cem. Manila #2)  SIGNATURE OF GRAVE REPORT.  SIGNATURE OF PERSON CONDUCTING GRAVE NO.  UNKNOWN -Z- 283 (Cem. Manila #2)  SIGNATURE OF GRAVE REPORT.  R. C. BARRIETT, TYL UNIO.  DISTRIBUTION OF REPORT: Signed original for U. S. and allies deed, signed original or on one of concept dead, to the Questernments Canada.  DISTRIBUTION OF REPORT: Signed original for U. S. and allies deed, signed original or one ope of concept dead, to the Questernments Canada.  DISTRIBUTION OF REPORT: Signed original for U. S. and allies deed, signed original or of concept dead, to the Questernments Canada.  DISTRIBUTION OF REPORT: Signed original for U. S. and allies deed, signed original or of concept dead, to the Questernments Canada.	(	1	OTAVIOUN	-X- 202 (	Cem• Mauria	#4)			
PLACE OF DEATH  CEMERGENCY ADDRESSEE (Name, relationship, and address)  IDENTIFICATION TAGS FOUND ON BODY  (I. : or none)  NOTE  WERE SUBSTITUTE TAGS FOUND ON BODY  (I. : or none)  NOTE  WERE SUBSTITUTE TAGS FOUND ON DODY AND DISPOSITION OF SAME  AND 601  Section 2—BURIAL If other than in established counstery, furnish shetch and may coordinates on reverse.  NAME, HUMBER, COORDINATES, AND LOCATION OF CEMETERY  USAF Cemetery Manila #2, Dizon, P. I.  DATE OF BURIAL HOUR BURIED IN (Shroud, Names, or name of other)  WEST HAS A REBURIAL; INDICATE NAME, HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS THIS A REBURIAL; INDICATE NAME, HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS THIS A REBURIAL; INDICATE NAME, HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS THIS A REBURIAL; INDICATE NAME, HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS THIS A REBURIAL; INDICATE NAME, HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS THIS A REBURIAL; INDICATE NAME HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  TYPE OF RELIGIOUS  PERSON CONDUCTING BURIAL RITES  IF INDICATE NAME (Law, first, middle initial)  PERSON CONDUCTING BURIAL RITES  IF INDICATE NAME (Law, first, middle initial)  BE G I N N I N G. OF R O V  BODY BURIED ON DECEASED LEFT, NAME (Law, first, middle initial)  BE G I N N I N G. OF R O V  BODY BURIED ON DECEASED RIGHT, NAME (Law, first, middle initial)  BE G I N N I N G. OF R O V  SIGNATURE OF GRAVE, 1st Lt. QNC.  DISTRIBUTION OF REPORT: Signed criginal for U.S. and allied dead, signed criginal of or one noney dead, to the Questerments Cannell.  DISTRIBUTION OF REPORT: Signed criginal for U.S. and allied dead, signed criginal or or one of company dead, to the Questerments Cannell  DISTRIBUTION OF REPORT: Signed criginal for U.S. and allied dead, signed criginal or or one of company dead, to the Questerments Cannell  DISTRIBUTION OF REPORT: Signed criginal for U.S. and allied dea	l/	- 1	GRADE	ORGANIZATION		BF	ANCH OF SERV	TCE	
PLACE OF DEATH  CEMERGENCY ADDRESSEE (Name, relationship, and address)  IDENTIFICATION TAGS FOUND ON BODY  (I. : or none)  NOTE  WERE SUBSTITUTE TAGS FOUND ON BODY  (I. : or none)  NOTE  WERE SUBSTITUTE TAGS FOUND ON DODY AND DISPOSITION OF SAME  AND 601  Section 2—BURIAL If other than in established counstery, furnish shetch and may coordinates on reverse.  NAME, HUMBER, COORDINATES, AND LOCATION OF CEMETERY  USAF Cemetery Manila #2, Dizon, P. I.  DATE OF BURIAL HOUR BURIED IN (Shroud, Names, or name of other)  WEST HAS A REBURIAL; INDICATE NAME, HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS THIS A REBURIAL; INDICATE NAME, HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS THIS A REBURIAL; INDICATE NAME, HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS THIS A REBURIAL; INDICATE NAME, HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS THIS A REBURIAL; INDICATE NAME, HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS THIS A REBURIAL; INDICATE NAME HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  TYPE OF RELIGIOUS  PERSON CONDUCTING BURIAL RITES  IF INDICATE NAME (Law, first, middle initial)  PERSON CONDUCTING BURIAL RITES  IF INDICATE NAME (Law, first, middle initial)  BE G I N N I N G. OF R O V  BODY BURIED ON DECEASED LEFT, NAME (Law, first, middle initial)  BE G I N N I N G. OF R O V  BODY BURIED ON DECEASED RIGHT, NAME (Law, first, middle initial)  BE G I N N I N G. OF R O V  SIGNATURE OF GRAVE, 1st Lt. QNC.  DISTRIBUTION OF REPORT: Signed criginal for U.S. and allied dead, signed criginal of or one noney dead, to the Questerments Cannell.  DISTRIBUTION OF REPORT: Signed criginal for U.S. and allied dead, signed criginal or or one of company dead, to the Questerments Cannell  DISTRIBUTION OF REPORT: Signed criginal for U.S. and allied dead, signed criginal or or one of company dead, to the Questerments Cannell  DISTRIBUTION OF REPORT: Signed criginal for U.S. and allied dea	[\	. 01	Ÿ						
PLACE OF DEATH  CEMERGENCY ADDRESSEE (Name, relationship, and address)  IDENTIFICATION TAGS FOUND ON BODY  (I. : or none)  NOTE  WERE SUBSTITUTE TAGS FOUND ON BODY  (I. : or none)  NOTE  WERE SUBSTITUTE TAGS FOUND ON DODY AND DISPOSITION OF SAME  AND 601  Section 2—BURIAL If other than in established counstery, furnish shetch and may coordinates on reverse.  NAME, HUMBER, COORDINATES, AND LOCATION OF CEMETERY  USAF Cemetery Manila #2, Dizon, P. I.  DATE OF BURIAL HOUR BURIED IN (Shroud, Names, or name of other)  WEST HAS A REBURIAL; INDICATE NAME, HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS THIS A REBURIAL; INDICATE NAME, HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS THIS A REBURIAL; INDICATE NAME, HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS THIS A REBURIAL; INDICATE NAME, HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS THIS A REBURIAL; INDICATE NAME, HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS THIS A REBURIAL; INDICATE NAME HUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  TYPE OF RELIGIOUS  PERSON CONDUCTING BURIAL RITES  IF INDICATE NAME (Law, first, middle initial)  PERSON CONDUCTING BURIAL RITES  IF INDICATE NAME (Law, first, middle initial)  BE G I N N I N G. OF R O V  BODY BURIED ON DECEASED LEFT, NAME (Law, first, middle initial)  BE G I N N I N G. OF R O V  BODY BURIED ON DECEASED RIGHT, NAME (Law, first, middle initial)  BE G I N N I N G. OF R O V  SIGNATURE OF GRAVE, 1st Lt. QNC.  DISTRIBUTION OF REPORT: Signed criginal for U.S. and allied dead, signed criginal of or one noney dead, to the Questerments Cannell.  DISTRIBUTION OF REPORT: Signed criginal for U.S. and allied dead, signed criginal or or one of company dead, to the Questerments Cannell  DISTRIBUTION OF REPORT: Signed criginal for U.S. and allied dead, signed criginal or or one of company dead, to the Questerments Cannell  DISTRIBUTION OF REPORT: Signed criginal for U.S. and allied dea	[ ]		RACE	RELIGION		I IF OTHER	THAN U. S. DE	AD GIVE	
CAMP MITPHY. INZON.  P. 1.  EMERGENCY ADDRESSEE (Name, relationship, and address)  DENTIFICATION TAGS FOUND ON BODY  NODE  WERE SUBSTITUTE TAGS FOUND ON BODY AND DISPOSITION OF SAME  PRESONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  PRESONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  PRESONAL FOR THAN IN established cemetery, furnish sketch and map coordinates on reverse.  NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  USAF Cemetery Manila #2, INZON, P. I.  DATE OF BURIAL  HOUR  BURIED IN (Strand, Manker, or name of other)  WAS THIS A REBURIAL?  (Yes or a)  USAF Cemetery Ft. Win. MOKINLEY, INZON, P. I.  PLOT NO. ROW NO. GRAVE NO.  WAS THIS A REBURIAL?  (Yes or a)  USAF Cemetery Ft. Win. MOKINLEY, INZON, P. I.  PLOT NO. ROW NO. GRAVE NO.  HOW NO. GRAVE NO.  TYPE OF RELIGIOUS  FERSON CONDUCTING BURIAL RIES  IF INTRIBUTED ON TAGS BURIED WITH  BODY (Yes or a)  NOTE OF BURIAL NO. ORGANIZATION DATA AND CONTAINERS BURIED WITH BODY  YOS  DOY BURIED ON DECEASED LEFT, NAME (Last, first, middle fastical)  POS BURIED ON DECEASED LEFT, NAME (Last, first, middle fastical)  WINNOWN -X - 283 (Cem. Manila #2)  SIGNATURE OF RESONE CORGANIZATION GRAVE NO.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied deed, signed cripinal and one copy for enemy dead, to the Quartermanter Canners)  DISTRIBUTION OF REPORT: Signed original for U. S. and allied deed, signed cripinal and one copy for enemy dead, to the Quartermanter Canners)  DISTRIBUTION OF REPORT: Signed original for U. S. and allied deed, signed cripinal and one copy for enemy dead, to the Quartermanter Canners.						NAME O	FCOUNTRY		
EMERGENCY ADDRESSEE (Name, relationship, and address)  IDENTIFICATION TAGS FOUND ON BODY (J. 5, or none)  NOTIC  SECTION 2.—BURIAL. It other than in established cometery, furnish sketch and map coordinates on reverse.  NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  USAF Cemetery (Punish sketch and map coordinates on reverse.  NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  USAF Cemetery (Punish sketch and map coordinates on reverse.  NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  USAF Cemetery (Punish sketch and map coordinates on reverse.  NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  USAF Cemetery (Punish sketch and map coordinates on reverse.  NAME, NUMBER, COORDINATES, AND LOCATION OF CRAVE  POSO  NAMERER  PLOT NO. ROW NO. GRAVE NO. MARKER  NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE  YOS  USAF Cemetery (Tv. Win, MOXINLey, Juzon, P. 1.  PERSON CONDUCTING BURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE  YOS  USAF Cemetery (Tv. Win, MOXINLey, Juzon, P. 1.  PERSON CONDUCTING BURIAL RITES  IF IDENTIFICATION TAGS BURIED WITH DODY NO. GRAVE NO. MARKER (Yw or no)  YOS  YOS  YOS  NOTICE (STATE OF THE CONTROLL OF THE CONTR	PLACE OF DEATH		CAUSE OF DEATH	<u> </u>		D#	TE OF DEATH		
ENERGENCY ADDRESSEE (Name, relationals), and address)  IDENTIFICATION TAGS FOUND ON BODY (1. 5. or numb)  NOTE  WERE SUBSTITUTE TAGS PROVIDEDITY or or no)  YOS (2)  LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  PALL 601  NOTE  SECTION 2.—BURIAL 11 other than in established cometery, furnish shetch and map coordinates on reverse.  NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  USAF Cemetery Menila #2, LAZON, P. I.  DATE OF BURIAL HOUR SURIED IN (Shroud, Manked, or name of other) TYPE OF GRAVE PLOT NO. ROW NO. GRAVE NO.  22 Dec. 45  OPOO Shelter Half Cross 2 12 14/31  WAS THIS A REBURIAL? (Yes or no)  USAF Cemetery Ft. Vm. NCKINLey, JUZON, P. I.  FUT NO. ROW NO. GRAVE NO.  TYPE OF RELIGIOUS  PERSON CONDUCTING BURIAL RITES  IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  MARKER (Yes or no)  YOS  YOS  YOS  YOS  YOS  SOVY (Yes of NO)  YOS  RANK SERIAL NO. ORGANIZATION GRAVE NO.  B E G I N N I N G: O F R O V  BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  SIGNATURE OF PERSON DEPENDED PRABBER PROPRI  R. C. BATHETT, TAY GRS.  SIGNATURE OF GREATE VERTIFYING REPORT  E. M. MODER, 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.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General.		uzon .							
IDENTIFICATION TAGS FOUND ON BODY (1. 5, or nome)  NODE  WERE SUBSTITUTE TAGS PROVIDEDITIVE or no)  YOS: (2)  LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  JUSAF Cemetory Mania #2, Lizon, p. 1.  DATE OF BURIAL #1, other than in established cometory, furnish sketch and map coordinates on reverse.  NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  USAF Cemetory Mania #2, Lizon, p. 1.  DATE OF BURIAL HOUR BURIED IN (Shread, blanked, or name of other)  Ves USAF Cemetory Mania #2, Lizon, p. 1.  DATE OF BURIAL   HOUR BURIED IN (Shread, blanked, or name of other)  Ves USAF Cemetory Ft. Vin., MCKINION, p. 1.  DATE OF BURIAL INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  WAS THIS A REBURIAL! INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  Ves USAF Cemetory Ft. Vin., MCKINION, p. 1.  PROOF RELIGIOUS PERSON CONDUCTING BURIAL RITES   FIRST PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  BYOS  BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle finitial)  YOS  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle finitial)  UNKNOWN -X - 283 (Cem., Manial #2)  SIGNATURE OF PERSON CONDUCTING BURIAL #2  SIGNATURE OF PERSON CONDUCTING BURIAL #2  SIGNATURE OF PERSON CONDUCTING GRAVE NO.  DATE AND CONTAINERS BURIED WITH SOMY AND CONTAINERS BURIED WITH BODY D. ORGANIZATION GRAVE NO.  BYOS  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle finitial)  UNKNOWN -X - 283 (Cem., Manial #2)  SIGNATURE OF PERSON CONDUCTING BURIAL #2  SIGNATURE OF PERSON CONDUCTING BURIAL #2  SIGNATURE OF PERSON CONDUCTING BURIAL #2  SIGNATURE OF PERSON CONDUCTING BURIAL #4  LIKE MONIAL #4  LIK			<u>'</u>						
NODE  WERE SUBSTITUTE TAGS PROVIDEDITY:s or no)  YES (2)  LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  PROVIDED TO SECURIAL. If other than in established counstery, furnish sketch and map coordinates on reverse.  NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  USAF Cemetery Manila #2, Luzon, p. 1.  DATE OF BURIAL. HOUR BURIED IN (Shroud, Masked, or name of other) Type of RANK  22 Dec. 145 0900 Shelter Half Cross 2 12 14,31  WAS THIS A REBURIAL. (INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO. (Yes or no)  USAF Cemetery Ft. Vin. Moxinley, Luzon, p. 1.  PLOT NO. ROW NO. GRAVE NO. MARKER NO. PLOT NO. ROW NO. GRAVE NO. MARKER (Yes or no)  TYPE OF RELIGIOUS  PERSON CONDUCTING BURIAL RITES  IF A REBURIAL INDICATE NAME (Last, first, middle initial)  WAS THIS AREDURIAL. (NO CONDUCTING BURIAL RITES  IF ANK SERIAL NO. ORGANIZATION DATA AND USED. DESCRIBE IDENTIFICATION DATA AND CONTAINENS BURIED WITH BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)  BEGIN NING. OF ROW. Manila #2)  SIGNATURE OF PERSON DEFRANCE AND COMMINISHED REPORT  R. C. BURRETT, T/4 CRS.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quarter meater General.	EMERGENCY ADDRESSEE (Na	me, relationship, an	d address)					•	
NODE  WERE SUBSTITUTE TAGS PROVIDEDRY (res or no)  Yes (2)  LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  PROVIDED THE CONTROL OF SOME  WERE SUBSTITUTE TAGS PROVIDEDRY (res or no)  Yes (2)  LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  PROVIDED THE CONTROL OF SAME  WAS COMMENTED THE SUBSTITUTE THAN IN ESTABLISHED CONTROL OF CEMETERY  WAS THIS REBURNAL (NO STANDARD (Named, or name of other) (PLOT NO. MARKER PLOT NO. MARKER NO. MARKER PLOT NO. MARKER PLOT NO. MARKER PLOT NO. MARKER NO. MARKER PLOT NO. MARKER PLOT NO. MARKER PLOT NO. MARKER NO. MARKER PLOT			•	•		••		• • •	
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Ves (2)  LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  JUL 60/  Section 2.—Burial. If other than in established cometery, furnish sketch and map coordinates on reverse.  NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  USAF Cemetery Famila #2, INZON, P. I.  DATE OF BURIAL HOUR BURIED IN (Shroud, blanket, or name of other)  Was this a reburial?  (Yes or no)  USAF Cemetery Ft. Vm. McKinley, INZON, P. I.  PLOT NO. ROW NO. GRAVE NO.  Was THIS A REBURIAL?  (Yes or no)  USAF Cemetery Ft. Vm. McKinley, INZON, P. I.  PLOT NO. ROW NO.  GRAVE NO.  TYPE OF RELIGIOUS  PERSON CONDUCTING BURIAL RITES  (F IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY  YOS  USAF Cemetery Ft. Vm. McKinley, INZON, P. I.  PLOT NO. ROW NO.  GRAVE NO.  TYPE OF RELIGIOUS  PERSON CONDUCTING BURIAL RITES  (F IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY  YOS  BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)  BEGINNING NOT SEPOND REPORT STANDARD REPORT  R. C. BARKETT, THURS.  SIGNATURE OF REPSON FIRMANDER REPORT  R. C. BARKETT, THURS.  DISTRIBUTION OF REPORT: Signed original for U.S. and allied dead, signed original and one copy for enemy dead, to the Questermenter General.  DISTRIBUTION OF REPORT: Signed original for U.S. and allied dead, signed original and one copy for enemy dead, to the Questermenter General.		202.				i) whatheyer	, jim th batton a	on reverse,	
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME  JUSA COMMENCE OF THE STATE OF SERIES OF PREVIOUS CEMETERY, AND LOCATION OF CEMETERY  USAF Cemetery Manila #2, Lizon, p. I.  DATE OF BURIAL HOUR BURIED IN (Shroud, Manket, or name of other) TYPE OF GRAVE PLOT NO. ROW NO. GRAVE NO.  22 Dec. 45 0900 Shelter Half Cross 2 12 1431  WAS THIS A REBURIAL? IF A REBURIAL INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  YOS USAF Cemetery Ft. Vm. MCKINLey, Lizon, p. I. HOUT NO. ROW NO. GRAVE NO.  TYPE OF RELIGIOUS PERSON CONDUCTING BURIAL RITES IF DENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CEREMONY.  TYPE OF RELIGIOUS PERSON CONDUCTING BURIAL RITES IF DENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY  TYPE OF RELIGIOUS PERSON CONDUCTING BURIAL RITES IF DENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY  TYPE OF RELIGIOUS PERSON CONDUCTING BURIAL RITES IF DENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY  TYPE OF RELIGIOUS PERSON CONDUCTING BURIAL RITES IF DENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY  TYPE OF RELIGIOUS PERSON CONDUCTING BURIAL RITES  BODY BURIED ON DECEASED LEFT. NAME (Last, first, middle initial) RANK SERIAL NO. ORGANIZATION GRAVE NO.  UNKNOVIN -X- 283 (Cem. Manila #2)  SIGNATURE OF RESON DEPARTS REPORT  R. C. BARRETT, THE ORS.  SIGNATURE OF RESON PERSON REPORT E. M. MOORE, 1st Lt. QMC.  DISTRIBUTION OF REPORT: Signed criginal for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General	None					•		•	
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME     June   Got	WERE SUBSTITUTE TAGS PRO	VIDED?(Yes or no)		•		•			
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME     June   Got	,	•							
Section 2.—BURIAL. If other than in established cometery, furnish sketch and map coordinates on reverse.  NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  USAF Cometery Manila #2, Luzon, P. I.  DATE OF BURIAL HOUR BURIED IN (Shroud, blanked, or name of other)  PLOT NO. ROW NO. GRAVE NO. MARKER  22 Dec. 45 0900 Shelter Half Cross 2 12 1431  WAS THIS A REBURIAL: INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO. HAND CORRESPONDED IN THE OF RELIGIOUS PERSON CONDUCTING BURIAL RITES IF DOWN FROM NO. HAND OCCUPATION AND USAF CEMENONY  TYPE OF RELIGIOUS PERSON CONDUCTING BURIAL RITES IF DOWN FILED WITH BODY OF NO. HOW NO. GRAVE NO. MARKER (Yes or no)  YOS YOS  YOS  YOS  BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)  BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  SIGNATURE OF PERSON DEPARTED REPORT  R. C. BARKETT, T/4 LIKE.  SIGNATURE OF FERSON DEPARTED REPORT  F. C. BARKETT, T/4 LIKE.  DISTRIBUTION OF REPORT: Signed original for U.S. and allied dead, signed original and one copy for enemy dead, to the Quartermester Cemeral.			DISPOSITION AT CAME						
None  Section 2.—BURIAL. If other than in established cometery, furnish sketch and map coordinates on reverse.  NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  USAF Cemetery Manila #2, IMZON, P. I.  DATE OF BURIAL  HOUR  BURIED IN (Shroud, blanket, or name of other)  Type of GRAVE MARKER  PLOT NO. ROW NO. GRAVE NO.  MARKER  WAS THIS A REBURIAL?  (Yes or no)  USAF Cemetery Ft. Van. McKinley, IMZON, P. I.  Type of GRAVE  USAF Cemetery Ft. Van. McKinley, IMZON, P. I.  Type of Religious  FERSON CONDUCTING BURIAL RITES  IF DENTIFICATION TAGS NOT USED. DESCRIBE IDENTIFICATION DATA AND CENEMONY  YOS  BODY (Yes or no)  YOS  YOS  BODY BURIED ON DECEASED LEFT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY B	LIST PERSONAL EFFECTS FOL	IND ON BODY AND	DISPOSITION OF SAME						
None  Section 2.—BURIAL. If other than in established cometery, furnish sketch and map coordinates on reverse.  NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  USAF Cemetery Manila #2, IMZON, P. I.  DATE OF BURIAL  HOUR  BURIED IN (Shroud, blanket, or name of other)  Type of GRAVE MARKER  PLOT NO. ROW NO. GRAVE NO.  MARKER  WAS THIS A REBURIAL?  (Yes or no)  USAF Cemetery Ft. Van. McKinley, IMZON, P. I.  Type of GRAVE  USAF Cemetery Ft. Van. McKinley, IMZON, P. I.  Type of Religious  FERSON CONDUCTING BURIAL RITES  IF DENTIFICATION TAGS NOT USED. DESCRIBE IDENTIFICATION DATA AND CENEMONY  YOS  BODY (Yes or no)  YOS  YOS  BODY BURIED ON DECEASED LEFT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Lost, first, middle initial)  BODY B	Da . 0 601								
Section 2.—BURIAL. II other than in established cemetery, furnish sketch and map coordinates on reverse.  NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  USAF Cemetery Manila #2, Iuzon, P. I.  DATE OF BURIAL HOUR BURIED IN (Shroud, blanket, or name of other) TYPE OF GRAVE MARKER PLOT NO. ROW NO. GRAVE NO.  22 Dec. 45 0900 Shelter Half Cross 2 12 1431  WAS THIS A REBURIAL? (Yes or no)  Yes USAF Cemetery Ft. Vm. McKinley, Iuzon, P. I. PLOT NO. PLOT NO. GRAVE NO.  TYPE OF RELIGIOUS PERSON CONDUCTING BURIAL RITES IF DENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY  Yes Yes  BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DE	orac our					_	_		
USAF Cemetery Manila #2, Luzon, P. I.  DATE OF BURIAL HOUR BURIED IN (Shroud, blanket, or name of other) Type OF GRAVE PLOT NO. ROW NO. GRAVE NO.  22 Dec. 45 0900 Shelter Half Cross 2 12 1431  WAS THIS A REBURIAL? (Fee or no.)  WAS THE A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  YOS USAF Cemetery Ft. Win. McKinley, Luzon, P. I. PLOT NO. ROW NO. GRAVE NO.  TYPE OF RELIGIOUS PERSON CONDUCTING BURIAL RITES IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINNERS BURIED WITH BODY  YOS YOS  BODY BURIED ON DECEASED LEFT, NAME (Lost, first, middle initial) RANK SERIAL NO. ORGANIZATION GRAVE NO.  BE G I N N I N G. O F R O V  BODY BURIED ON DECEASED RIGHT, NAME (Lost, first, middle initial) RANK SERIAL NO. ORGANIZATION GRAVE NO.  BODY BURIED ON DECEASED RIGHT, NAME (Lost, first, middle initial) RANK SERIAL NO. ORGANIZATION GRAVE NO.  BODY BURIED ON DECEASED RIGHT, NAME (Lost, first, middle initial) RANK SERIAL NO. ORGANIZATION GRAVE NO.  UNKNOVIN -X- 283 (Cem. Manila #2)  SIGNATURE OF PERSON PERSON PERSON PERSON PERSON REPORT  R. C. BARRETT, T. 4 CRS.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General				one					
USAF Cemetery Manila #2, Luzon, P. I.  DATE OF BURIAL HOUR BURIED IN (Shroud, blanket, or name of other) Type OF GRAVE PLOT NO. ROW NO. GRAVE NO.  22 Dec. 45 0900 Shelter Half Cross 2 12 1431  WAS THIS A REBURIAL? (Fee or no.)  WAS THE A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE NO.  YOS USAF Cemetery Ft. Win. McKinley, Luzon, P. I. PLOT NO. ROW NO. GRAVE NO.  TYPE OF RELIGIOUS PERSON CONDUCTING BURIAL RITES IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINNERS BURIED WITH BODY  YOS YOS  BODY BURIED ON DECEASED LEFT, NAME (Lost, first, middle initial) RANK SERIAL NO. ORGANIZATION GRAVE NO.  BE G I N N I N G. O F R O V  BODY BURIED ON DECEASED RIGHT, NAME (Lost, first, middle initial) RANK SERIAL NO. ORGANIZATION GRAVE NO.  BODY BURIED ON DECEASED RIGHT, NAME (Lost, first, middle initial) RANK SERIAL NO. ORGANIZATION GRAVE NO.  BODY BURIED ON DECEASED RIGHT, NAME (Lost, first, middle initial) RANK SERIAL NO. ORGANIZATION GRAVE NO.  UNKNOVIN -X- 283 (Cem. Manila #2)  SIGNATURE OF PERSON PERSON PERSON PERSON PERSON REPORT  R. C. BARRETT, T. 4 CRS.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General	Saction 2 RILBIAL To one	har than in actab	lished assesses forming states	h and man again	liantas as savassa				
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DATE OF BURIAL    HOUR   BURIED IN (Shroud, blanket, or name of other)   TYPE OF GRAVE   PLOT NO.   ROW NO.   GRAVE NO.     22 Dec. 45   O900   Shelter Half   Cross   2 12 1431     WAS THIS A REBURIAL?   IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE     Yes								·	
22 Dec. 45  0900  Shelter Half  Cross 2 12 1431  WAS THIS A REBURIAL? (Yes or no)  YOS  USAF Cemetery Ft. Vm. McKinley, Iuzon, P. I.  TYPE OF RELIGIOUS  CEREMONY  PERSON CONDUCTING BURIAL RITES  IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE  USAF Cemetery Ft. Vm. McKinley, Iuzon, P. I.  PLOT NO. ROW NO. GRAVE NO.  TYPE OF RELIGIOUS  CONTAINERS BURIED WITH BODY  PERSON CONDUCTING BURIAL RITES  IF IDENTIFICATION TAGS NOT USED. DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY  TO MARKER (Yes or no)  WAS YOS  BODY BURIED ON DECEASED LEFT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  SIGNATURE OF PERSON PERPARTISE REPORT  R. C. BARRETT, T/4 CRS.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General			USAF Cemetery M	anila #2,	Luzon, P. I.				
WAS THIS A REBURIAL?  Yes  USAF Cemetery Ft. VM. McKinley, Iuzon, P. I.  PLOT NO. BOW NO. GRAVE  TYPE OF RELIGIOUS  PERSON CONDUCTING BURIAL RITES  IDENTIFICATION TAG BURIED WITH  BODY (Yes or no)  Yes  BODY BURIED ON DECEASED LEFT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  RANK  SERIAL NO. ORGANIZATION GRAVE NO.  UNKNOVIN -X- 283 (Cem. Manila #2)  SIGNATURE OF PERSON PREPARTING REPORT  R. C. BARRETT, T/4 CHS.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General	DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or no	ame of other)		PLOT No	ROW No.	GRAVE No.	
WAS THIS A REBURIAL?  Yes  USAF Cemetery Ft. VM. McKinley, Iuzon, P. I.  PLOT NO. BOW NO. GRAVE  TYPE OF RELIGIOUS  PERSON CONDUCTING BURIAL RITES  IDENTIFICATION TAG BURIED WITH  BODY (Yes or no)  Yes  BODY BURIED ON DECEASED LEFT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  RANK  SERIAL NO. ORGANIZATION GRAVE NO.  UNKNOVIN -X- 283 (Cem. Manila #2)  SIGNATURE OF PERSON PREPARTING REPORT  R. C. BARRETT, T/4 CHS.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General	22 nec 15	0900	Shalton Hali	p	among		12	34.03	
TYPE OF RELIGIOUS  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)  YOS  BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  RANK  SERIAL NO.  ORGANIZATION GRAVE NO.  UNKNOWN -X- 283 (Cem. Manila #2)  SIGNATURE OF PERSON PEPARAGE REPORT  R. C. BARRETT, T/4 GR3.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermester General	] <del></del>						<u> </u>		
TYPE OF RELIGIOUS  CEREMONY  PERSON CONDUCTING BURIAL RITES  IF IDENTIFICATION TAGS NOT USED. DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY  TO MARKER (Yes or no)  YOS  BODY BURIED ON DECEASED LEFT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, midd					•		o. I ROW No.	GRAVE No.	
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IDENTIFICATION TAG BURIED WITH BODY (Yes or no)  Yes  Yes  BODY BURIED ON DECEASED LEFT. NAME (Last, first, middle initial)  BEGINNING: OF ROV  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  RANK SERIAL NO. ORGANIZATION GRAVE NO.  UNKNOWN -X- 283 (Cem. Manila #2)  SIGNATURE OF PERSON PREPARENT REPORT  R. C. BARRETT, T/4 CHS.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General	TYPE OF RELIGIOUS CEREMONY	PERSON CONDUC	TING BURIAL RITES	IF IDENTIFICAT	ION TAGS NOT USED	DESCRIBE	IDENTIFICATIO	N DATA AND	
MARKER (Yes or no)  Yes  Yes  BODY BURIED ON DECEASED LEFT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  RANK  SERIAL NO.  ORGANIZATION GRAVE NO.  UNKINOVIN -X- 283 (Cem. Manila #2)  SIGNATURE OF PERSON PREPARENCE REPORT  R. C. BARRETT, T/4 GRS.  SIGNATURE OF GRS OFFICER VERIFYING REPORT  E. M. MOORE, 1st Lt. QMC.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General	• • •					1			
BODY BURIED ON DECEASED LEFT. NAME (Last, first, middle initial)  BEGINNING: OF ROV  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  RANK SERIAL NO. ORGANIZATION GRAVE NO.  UNKNOWN -X- 283 (Cem. Manila #2)  SIGNATURE OF PERSON PREPARED REPORT  R. C. BARRETT, T/4 GR3.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General	IDENTIFICATION TAG BURIED BODY (Yes or no)								
BODY BURIED ON DECEASED LEFT. NAME (Last, first, middle initial)  BEGINNING: OF ROV  BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial)  RANK SERIAL NO. ORGANIZATION GRAVE NO.  UNKNOWN -X- 283 (Cem. Manila #2)  SIGNATURE OF PERSON PREPARED REPORT  R. C. BARRETT, T/4 GR3.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General	Yes		Ves						
BEGINNING OF ROW  BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  RANK SERIAL NO. ORGANIZATION GRAVE NO.  UNKNOWN -X- 283 (Cem. Manila #2)  SIGNATURE OF PERSON PREPARABLE REPORT  R. C. BARRETT, T/4 GR3.  SIGNATURE OF GRS OFFICER VERIFYING REPORT  E. M. MOORE, 1st Lt. QMC.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General	<u> </u>			RANK	SERIAL No.	ORGANIZA	TION GRA	VE No.	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  UNKNOVIN -X- 283 (Cem. Manila #2)  SIGNATURE OF PERSON PREPARENCE REPORT  R. C. BARRETT, T/4 GR3.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General									
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SIGNATURE OF PERSON PREPARED REPORT  R. C. BARRETT, T/4 GRS.  SIGNATURE OF GRS OFFICER VERIFYING REPORT  E. M. MOORE, 1st Lt. QMC.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General	BODY BURIED ON DECEASED	RIGHT, NAME (Las	st, first, middle initial)	RANK	SERIAL NO.	ORGANIZA	TION GRA	VE No.	
SIGNATURE OF PERSON PREPARED REPORT  R. C. BARRETT, T/4 GRS.  SIGNATURE OF GRS OFFICER VERIFYING REPORT  E. M. MOORE, 1st Lt. QMC.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General	UNKNOW	N -x- 283	(Cem. Manila #2)					1//32	
R. C. BARRETT, T/4 GRS.  E. M. MOORE, 1st Lt. QVC.  DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General			(Comb. Worterer He)	SIGNATURE OF	GBS OFFICER VERIEV	NG PEROPE		<u> </u>	
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		Jan-	ST	E.M. Morre					
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General	R. C. 1	BARRETT, T	/4 GRS.	E. M	1. MOORE, 1st	Lt. Q	æ.		
	DISTRIBUTION OF REPORT	T: Signed origin	al for U.S. and allied dead, sig	ned original an	d one copy for enem	y dead, to t	he Quarterma	ster General	

Incl. 113'

#### RESTRICTED

•		Section 3.—Unsentified 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 air planes, vehicles, and tanks.  (b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each an 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 LITTLE FINGER									
	LEFT RING FINGER	every tooth will be ind accomplished if one or HEIGHT WEIGHT	icated on the to r more fingerpri	diagram below. Tooth chart will not be						
	#3 i	WEAPON AND SERIAL NO.	LA	UNDRY MARKS	·	WHERE BODY WAS BU	: FRIED OR FOUND			
	MIDDLE	·			· .					
	LEFT MIDDLE FINGER	OTHER IDENTIFICATION C	CLUES			,				
·	LEFT INDEX FINGER	FILLINGS					· ·			
·	E R		GOLO	R FILLING FILLING	4 ,		O34			
	THUMB	CAVITIES		AVITY PECAYED	5 7 8	UPPER CHA	7			
٠	RIGHT	MISSING TEETH  CROWNED TEETH	Тоотн	MISSING .	DIAGRAM	REPRESENTS THE M	OUTH WIDE OPEN			
·	RIGHT INDEX FINGER	BRIDGE WORK		AIN CROWN CROWN	15 14 2 13	LOWER	15 14 13			
<u>.                                    </u>	GER .	ځ، ا	PAN.	OLD BRIDGE	। इस अस्टिन्ट		] 30¥   			
	RIGHT MIDDLE FINGER	FURNISH SKETCH AND MA	AP REFERENCE AN	D COORDINATES	FOR BURIAL IN	OTHER THAN ESTABLIS	SHED CEMETERY			
·		•			RCI	•				
6 FEB 1946	RIGHT RING FINGER	REMARKS:		пся	70 -					
1946	RIGHT LITTLE FINGER	•								
	iGER	<b>-</b>		•		•				