	•	I FILE II	DENTIFICATION	TOPPER			-
FILE NUMBER 293	renk	maniel	2n = 2	×-3	3/	At me.	Kinley
SUBJECT					/		
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OMC FORM | |2|

HEADQUARTERS AMERICAN GRAVES REGISTRATION SERVICE PHILCOM ZONE

GRP\$ 293

APO 900 16 January 1950

SUBJECT: Unidentifiable Remains

TO:

C

P

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

l. In accordance with the previsions of your letter, file QMCMU 293, CRS (Far East), dated 17 September 1948, subject: Resolution of cases of Unidentified Deceased, the following Unknown remains, presently stered at ACRS Mausoleum, Manila P.I., have been processed by the Central Identification Laboratory and considered "Unidentifiable" by reason of lack of sufficient identifying data:

UNKNOWN			Malm)	UNKNOWN	X-2221	ACERS	Mslm
11	X-6 95	11	п		X-2226		Ħ
Ħ	X-1214	71	H ,		X-2288	н	**
11	X-2204	M	27		X-3723		11
Ħ	X-2219	Ħ	H		A 7127		••

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

FOR THE COMMANDING OFFICER:

JOHN SHYPULA 1st Lt., Infantry Adjutant

9 Incls
QMC Forms 1044 w/Certificates
of Unidentifiability

Possible

AIR MAIL

293 Und. P. I. X- 450 Mars Maruly

SUBJECT: Identification of Unknown Decembed

\$15. Y

Commanding Officer, American Graves Registration Service Philcom Jone

APO 900, c/o Postmaster San Prancisco, California

- 1. Reference is made to Case History dated 12 May 1747, PHILCOM 70ME, recommending that the remains of Unknown X-450, AGR Mausolous, Manila, P. I., Hanger Siz, Bay 2, Crypt L5, formerly USAF Cemetery. Manilla #2, Luson, F. I., Flot 2, Now 12, Grave 1474, be designated as those of PRATT, Lyman Milford, Flc, 405 68 58, USE.
 - A. The recommendation of the Field is disapproved.
- 3. The documentary evidence in this case is considered insufficient to conclusively identify the remains of Unknown 1-450 as FRATT.
- 4. It is recommended that this case be processed in accordance with A. G. letter File AGAC-S 293.9 (27 March 1947) D-M, dated 9 April 1947.
- 5. It is further recommended that a Cortificate of Unidentifiability if applicable, be submitted to this Office. The Party of

FOR THE QUARTERWASTER GENERAL:

T. A. MOTO Lt Colonel, GMC Memorial Division XU.

1393 That, Symand Milford (4056858)

AIR MAII

RMA

MILE 293

Unknown X-450

SUBJECT: Unidentifiable Remains

TO:

Commanding Officer American Graves Segistration Service Philom Jone APO 900, c/o Postmaster San Francisco, California

- 1. Reference is made to letter, your Headquarters, file GMPZ 293, dated 16 January 1950, Subject: Unidentifiable Remains.
- 2. This Office concurs in the classification of Unknown X-450, ACRES Manusoleum, Manile, P. I., as unidentifiable.

FOR THE CUARTERMASTER GERERALI

Lt Colonel, GMC Memorial Division

T. H. MATE

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HEADQUARTERS PHILCOL ZONE AMERICAN GRAVES REGISTRATION SERVICE

13 Jan. 1950 Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X-303, Plot 2, Row 12, Grave 1474, USMC Manila #2, Luzon, P.I., have been reviewed and it is the opinion of this office that insufficient evidence is available to establish the identity of this deceased, and that these remains should be classified as unidentifiable.

FOR THE COMMANDING OFFICER:

Captain, QMC Chief, Records Branch

Attch: Form 1044

AFFROYED LINE THE SECOND

81 JAN 1950

9 med 1'

WAR DEPARTMENT

OFFICE OF THE QUARTERMASTER GENERAL WASHINGTON 25, D. C.

N REPLY REFER TO QMGYG 293

Unknown X-303

(USAF Cem. Manila # 2)

23 September 1946

MEMORANDUM FOR IDENTIFICATION SECTION:

SUBJECT: Unknown X-303 (Manila No. 2), Non-identification of.

1. The dental chart on the reverse side of the Report of Interment for Unknown X-303, buried in Grave 1474, Row 12, Plot 2, U.S. Armed Forces Cemetery, Manila No. 2, Luzon, P.I. has been checked with the dental record of Bridgeman G. Hall, 385 62 94, RM2c, USN, by the Dental Professional Division, Bureau of Medicine and Surgery. They state that the dental chart for Unknown X-303 cannot be identified as belonging to Bridgeman G. Hall.

J. K. WAITE
Lieut. (HC) USN
Navy Liaison Officer, AGRS.

1 Incl:
 Rpt of Interment - X-303

	IDENT	IFICATI	ON DA	TA 7			
, REMAINS OF UNKNOWN						2. DATE OF RE	_
X-450 (Form.UNK-	303 USAF Cem.N	<u>lanila <i>h</i></u>	#2 , Լ ս	zon,		13 Jan 1	
NAME OF CEMETERY			PLOT 5		6. GRAVE	7. DA	TE OF
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REV 10 MAR 47 1044 PREVIOUS EDITIONS OF THIS

16 JO	OOTH CHART	
1	TOP-VIEW	SIDE VIEW
MISSING TEETN: ALL TEETH MISSING THROUGH EX- TRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" "DOUT AND LABELED THUS:	Cooth Missing	
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIM, SILVER OR GOLD AND PORCELAIM), THUS:	Gold Crown, Porcelain C	
SHIPSE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:	Gold Bridge	
FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:	Gold Filling Silver Filling	
CARTES (Covicion): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:	Cavity Decayed	
	Paul PAUL	Side Views Side Views Views Course Charles and indicate retain- R. Nichols
	Unief	, Ident. Sect.

OMC FORM 1 OUT C

29E-21-12-47

PAGE 2 OF 3

The state of the s

19" BLACK-OUT PARTS OF BODY NOT RECOVERED MASS BURIAL CERTIFICATE (IF APPLICABLE)
(Wherein *egregation in whole or parts is impossible) 1 CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS: SIGNATURE OF MEDICAL OFFICER 21. REMARKS AND ADDITIONAL INFORMATION No ID tags, burial bottle, personal effects, or other means of identification found with remains. Est. weight of remains - 7 lbs. 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 SIGNATURE TYPED HAME, GRADE, ARM OR SERVICE, AND ORGANIZATION Yaul R. Nuhala PAUL R. NICHOLS

OMC FORM 1 OUUD

Chief, Ident. Sect.

X-303

Formerly interred USAF Cemetery Manila #2, Luzon, P. I. 2 12 1171.

Formerly #3 USAF Cem. Ft. Wm. McKinley, Luzon, P. I. F 2 10

50 AGRS MAUS. MANILA, P. I.

812 A 49

X-450

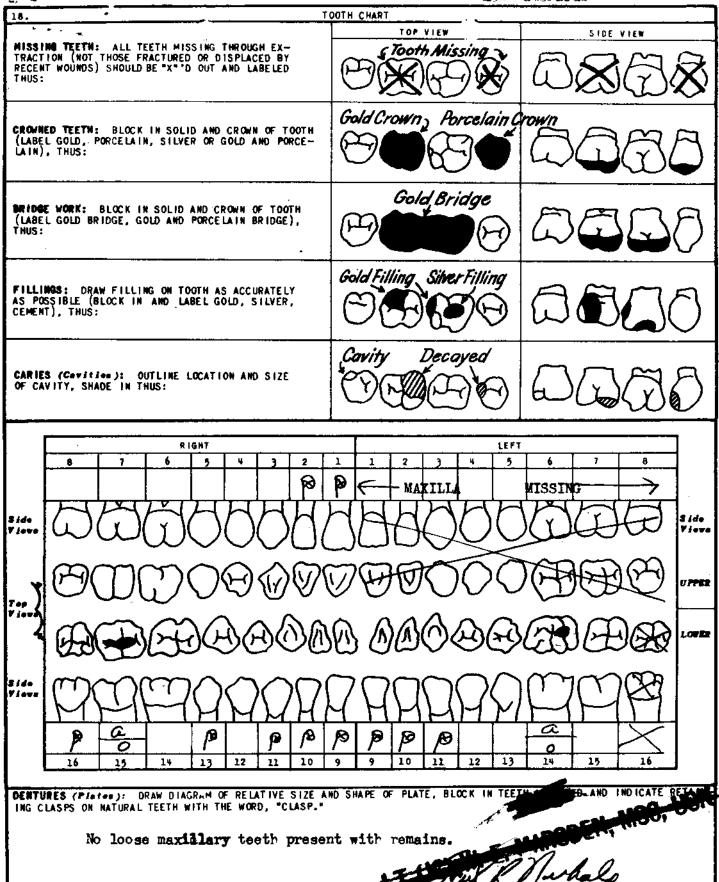
Formerly X-3 USAF Com. Ft. Wm. McKinley Luson, P. L.	7	2	10
Now Stored X-450 AGRS Mans., Manila, P. I.	813	A	45
•			

Now Stored X-450 AGRS Mans., Manila, P. I. 812 A 45

Formerly X-303 USAF Cem. Manila #2, Luzon, P. I. 2 12 1474

X-3 USAF Cem. Ft. Wm. McKinley, Luzon, P. I.

3 10



PAUL F. NICHOLS
Chief, Identification Section

hic (#7

•	IDENTION DENTAL CH	ART O	DATE 13 Oct 47
	KNOWN X-450 (Formerly RA Manila #2, Luzon, PI)	NK EM	SERIAL NUMBER
UNIT CONT A-JOJ, GBAF COM		LUSE OF DEATH	Unknown DATE OF DEATH
Unknown	USN		
PLACE OF DEATH Unknown	PLACE OF BURNAL AGRS Mausoleum, Manila	, P.I.	PLOT ROW GRAVE 812 A 45
MICCONIC TEFTIM. ALL TEFTH MICC	ING THROUGH EXTRACTION (NOT THOSE	TOP VIEW	SIDE VIEW
	ENT WOUNDS: SHOULD BE "X" D OUT		
CROWNED TEETH: BLOCK IN SC PORCELAIN, SRYER OR GOLD AND	OLID AND CROWN OF TOOTH (LABEL GOLD) PORCELAIN), THUS:	GOLD CROWN , PORCEL	AIN CROWN
BRIDGE WORK : BLOCK IN SOLID BRIDGE, GOLD AND PORCELAIN BR	AND CROWN OF TOOTH (LABEL GOLD RIDGE), THUS:	GOLD BRIDGE	
FILLINGS: DRAW FILLING ON TO AND LABEL GOLD, SILVER, CEMENT	OTH AS ACCURATELY AS POSSIBLE (BLOCK II), THUS:	GOLD FILLING SILVER F	
CARES: (Cavities): OUTLINE LOC SHADE IN THUS:	CATION AND SIZE OF CAVITY,	CAVITY DECAYED	(e). DQ (C)
	RIGHT	Let 1	
SIDE VIEWS			SHOE VIEWS
TOP YIEWS 7		70000006	DO UPPER
4 606	DED (MOD (MOD)	J 10100000C	WDD IOWER
SIDE VIEWS	15 14 13 12 11 10 9	- - - - - - - - - - 	0 15 16
DENTURES (Plates) - DRAW DIACRA	IM OF RELATIVE SIZE AND SHAPE OF PLATE, I	BLOCK IN TEETH ATTACHED AND INDIC	ATE RETAINIBLE CLASPS ON MATURAL
TETH WITH THE WORD, "CLASP." REMARKS: Unable	to tell whether upper l	•	
•	- , , , 	Die Weiter	COLUMN TRAME
SIGNATURE OF OFFICER OR OTHER	PERSON WHO PREPARED DENTAL CHART	/s/ Felix Glass	v v,
p/ MAGNO A NOBLE		/p/ FELLE GLASS, C	Capt., DC, 01717213
	<u> IS Mausoleum, Mankla, PI</u>	13 Oct 47	Supris Auris, Proving Four Source

OMC FORM 1045 PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

A CERTIFIED THUE GOFY: /s/t/ GEORGE T GAMBOA, 2d It, MAC

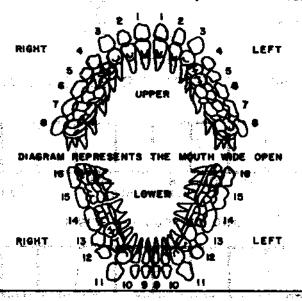
JNKNOWH X-450 (Formerly UNK X-3)	FORWARDED WITH THESE FORMS	13 Oct 47
Cem Manila #2, Luzon, P.I.)	M.	Unknown
LAST NAME FIRST INIT	AL RANK	SERIAL NO.
Unknown		USN
UMIT	0 Vanna 1	REANIZATION
Unknown	RS Mausoleum, Manila. P.I.	812 45
PLACE OF DEATH	PLACE OF BURIAL	PADE Y AND GRAVE NO.
	STORAGE	WEER'BUT CRIPT
BIANT		111781.5
RIGHT 8 7 6 5 4 3	UPPER TEETH 2 3	4 5 6 7 8
N L		
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INS	IDE LOOKING OUT	•
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KEY OF SYMBOLS	TO BE USED ON	ABOVE CHART
SYMBOLS	TYPE OF FILLING	LOCATION OF FILLING
IN WHOLE BOX U	IN PPER HALF OF BOX	IN LOWER HALF OF BOX
WHOLE BOX		LOWER HALF OF BOX
EXTRACTED	A AMALGAM	MESIAL
	(SILVER)	(BETWEEN-TOWARD FRONT)
CAVITY INDICATE	G	OCCLUSAL
LOCATION	GOLD	O (BITING SURFACE BACK TEET
المستوات		
FIXED BRIDGE	S SILICATE OR	DISTAL
(INCL. ABUTMENTS)	PORCELAIN	d (BETWEEN - TOWARD BACK)
TEETH REPLACED	OXYPHOSPATE	LINGUAL
	A LANGUAGE VIEW	LINGUAL

QMC FORM 1045 5 FEB 46

REVERSE SIDE FOR INSTRUCTIONS

INSTRUCTIONS:

- ACCEPACY, AND ATTENTION TO DETAIL IN THE PREPARATION OF THIS CHART ARE OF PARAMOUNT IMPORTANCE, IF SAME IS TO BE OF MAXIMUM VALUE.
- . 2. MOTE CAMEFIALY THAT: SYMBOLS INDICATING MISSING TEETH, CANITIES AND BRIDGE-WORK ARE TO BE WISERTED IN WHOLE SOX; SYMBOLS INDICATING TYPE OF PILLING ARE TO BE INSERTED IN WEER MALE OF BOX; AND SYMBOLS INDICATING LOCATION OF FILLING ARE TO BE INSERTED IN LOWER MALE OF BOX.
- \$. ANY ABNORMALITIES SUCH AS MALPOSED, MALFORMED OR DISCOLORED TEETH, ETC. SHOULD BE NOTED. DENTAL WORK NOT COVERED ABOVE WILL BE INDICATED, & g. PORCELAIN CROWNS, GOLD CROWNS (FULL OR 34), 34 GOLD CROWN WITH SILICATE WINDOW.
 - 4. FOR INFORMATION OF STANDARD NUMBERING OF TEETH, SEE DIAGRAM BELOW.



REMARKS:

-- 31242

Unable to tell whether upper left teeth P ar X. Left quadrant of maxilla missing.

Megho A. Nobie

/p/ MAGNO, A HORLE NAME AND RANK TYPED OR PRINTED

1.000000

CIP, AGRS Merusoleum, Manila, P.I. PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

/s/ Felix Glass
VERIFIED BY GRS OFFICER

/p/ FELIX GLASS, Cept. DG, 01717213 NAME AND RANK TYPES OR PRINTED

> 13 Oct 47 DATE

CERTIFIED ARUE COPY:

GEORGE T GAMBOA 24 (Vt.

MAC

AGRC FORM No. 11 Revised 16 Sept. 1968 Formely "Check List of Unknowne")

IDENTIFICATION CHECK LIST

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

		URKNO! Unk	OWN X-450 (Formerly UNK X-303, US
			netery AGRS Mausoleum, Manila, P
AGRS Mausoleum, N . Arrived at cometery		##********** **	
. Tot	(Hour) (Date	e)	•
. Place of death	(Name of closest tow	n)	(Coordinates and letter Prefix, maps)
(Sheet, scale	and scrials used)	····	•
Remains recovered o	or disinterred by	CMT#1	
			(Name and organization)
Evacuated to Cemet	tery by	Сит 🚮	
Tractated to come.		· (Na	ame and organization)
* Headgear	(Type)	Sizes	color, wear, tear, repairs, etc.
Raincoat	. (.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	
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Jacket, Field		0	
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Mackinaw	······································		
Sweater	·››››		
Jacket, HBT	·		
* Shirt, Wool OD	L	/_	<u></u>
Undershirt, Wool			
Undershirt, Cotton		<u></u>	<u> </u>
Trousers, HBT	>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>		
* Trousers, Wool C)D		
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Belt, web			
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* Shoes	(type)		
Overshoes	<u> </u>		
	(type)		
Other item)			
	1907) P. M. T.		
	items should be computed by measu		
Chevrons or		Ί,	
Insignia	(Type & location; shirt	, jacket, coat, helmet)	
Shauldan Datah	\$\$ 140 CT	1	
Does clothing indicate that	deceased was a member of Skeleton only - Skelet	the Air, Ground or Naval	Force?
Does clothing indicate that Description of Remains:		the Air, Ground or Naval	
Does clothing indicate that Description of Remains: Est. Age	Skeleton only - Skeleton 5'10 Weight	the Air, Ground or Naval	
Does clothing indicate that Description of Remains: Est. AgeHeight	Skelston only - Skeleta 5'10 Weight Sc	the Air, Ground or Naval al Chart attached. Description of wounds	
Does clothing indicate that Description of Remains: Est. AgeHeight Bandages or dressings	Skelston only - Skelete 5'10 Weight	the Air, Ground or Naval al Chart attached. Description of wounds (Length, width os ustrate on separate page)	, location)
Does clothing indicate that Description of Remains: Est. AgeHeight Bandages or dressings	Skelston only - Skelete 5'10 Weight	the Air, Ground or Naval al Chart attached. Description of wounds (Length, width os ustrate on separate page)	, location)
Does clothing indicate that Description of Remains: Egt. AgeHeight Banuages or dressings Outstanding moles, warts of	Skeleton only - Skeleton only	the Air, Ground or Naval al Chart attached. Description of wounds (Length, width os ustrate on separate page) (Yes-no; description, location)	, location)
Does clothing indicate that Description of Remains: Est. Age Height Bandages or dressings Outstanding moles, warts of Sunburn or tan, other than	Skeleton only - Skeleton only	the Air, Ground or Naval al Chart attached. Description of wounds (Length, width os ustrate on separate page) (Yes-no; description, location)	, location)
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Does clothing indicate that Description of Remains: Est. AgeHeight Bandages or dressings Outstanding moles, warts of Sunburn or tan, other than	Skeleton only - Skeleton only	the Air, Ground or Naval al Chart attached. Description of wounds (Length, width OS ustrate on separate page) (Yes-no; description, location) ar, pimples, pocks, freckles)	i, location)
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Does clothing indicate that Description of Remains:	Skeleton only - Skeleton on the skeleton on th	the Air, Ground or Naval al Chart attached. Description of wounds (Length, width OS ustrate on separate page) (Yes-no; description, location) ar, pimples, pocks, freckles)	, location)
Does clothing indicate that Description of Remains:	Skeleton only - Skeleton on the skeleton on th	the Air, Ground or Naval al Chart attached. Description of wounds (Length, width OS ustrate on separate page) (Yes-no; description, location) ar, pimples, pocks, freckles)	, location)
Does clothing indicate that Description of Remains: Est. AgeHeight Bandages or dressings Outstanding moles, warts of Sunburn or tan, other than Complexion Build Hair(Cole	Skeleton only - Skeleton on the skeleton on th	che Air, Ground or Naval al Chart attached. Description of wounds (Length, width OS ustrate on separate page) (Yes-no; description, location) ar, pimples, pocks, freckles) reight, whorls, or definite partir	, location)
Does clothing indicate that Description of Remains: Est. AgeHeight Bancages or dressings Outstanding moles, warts of Sunburn or tan, other than Complexion Build Hair(Cole	Skeleton only - Skeleton on the skeleton on th	che Air, Ground or Naval al Chart attached. Description of wounds (Length, width OS ustrate on separate page) (Yes-no; description, location) ar, pimples, pocks, freckles) reight, whorls, or definite partir	, location)

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Eyes		Eyebrows		
	(Color, setting, shape)	1	(Color, bushiness, extent act	ross nose)
Nose		Eears	(Size, set close to or far from	
1,000	(Size, shape, straight)	I_{j}	(Size, set close to or far from	head)
Mouth	\$55.000 ALLEN A	/ / Line		•
IVIOUII ,	(Large, medium, small)	ф.,	(Small, large, full)	
	See tooth Char	•		
Teeth		ness, spacing, noticeable crow	rns. fillings. extracts)	9999441999, 66
	(,,	7		
Chin	* * *		*	
	(Promin	ent, recoding, pointed, dimple	es, double)	
law	Ci	rcumference of head in	inches UTD	
	rge, smail, normal)	7	(Hat ba	
N1 1	(-1601-2000000000000000000000000000000000	' I		
	(Size, length, short, normal, wr		(Prominent, normal)	
		_/,		
Shoulders	(Broad, straight, small, rou	Arn(s	ouscular, color, extent and qua-	ntity of bale)
	(Divac, sharpin, shari) roa	m.	resource, total, tritut and draw	inity of Hair,
		T	(*************************************	+*+>>>>**Pa-****
	V.	<i>"</i> /		
Hands	***************************************			
		7.		
Fingers	(Short, thick, lo	ng, slender, size of knuckles,	missing fingers or joints)	* skilickessessessessessessesses
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######################################	/*I			innaadelikka i renemannaan issa eki
	(Unusua)	characteristics of fingernails)	' ₁	
Chest				
	(Size of nipples, color,	quantity and extent of hair,	, large, kmall, normal)	
White			/	
vv aist	(Size of navel, a	ppendectomy, amount, quantity	, and color of bair)	***************************************
		a	".l	
Back	(Quantity and extent of hair)		es-no)	(Color)
	(Quantity and extent of hair)		1.	
Herniaplasty	p-4444441114414441441441444444444444444	(Var-but lossfor		
Legs	(Inseam, muscular, knock-)			·
			,	
Feet		Toes	1	
_ CCL	(Size, corns, callouses, flat)	1005	(Slender, straight, crooked, ofer	rlap)
Evidence of he	ealed fractures	(Nose, arms,	legs, etc.)	7
•				7
NOTE: Use a	attached charts "A" and '	"B" to indicate parts no	t received.	1

If not, explain Due to condition of remains Has tooth chart been prepared? Yes If not, explain Po Roll bottle, personal effects, or I.D. tags found with remains. Boll shows remains might be those of B.G. Hall, USM. KIA. Extremounds \$256 A. Estimated weight of remains ? lbs. I certify that I have personally viewed the remains of subject deceased and all resulting inform has been recorded to the best of my knowledge. /s/ Alton E. Jones (Officer's Name) SP-6 062812	7.	mave inger prints be	en placed on Report of Inter-	·		O (Yes-no)	4 . 1 bebésssysés es e- acaa s
Has tooth chart been prepared? Yes If not, explain Remarks No ROI bottle, personal effects, or I.D. tags found with remains. ROI shows remains might be those of B.G. Hall, UNIL. IIA. Extra wounds \$256 A. Estimated weight of remains 7 lbs. I certify that I have personally viewed the remains of subject deceased and all resulting inform has been recorded to the best of my knowledge. /a/ Alton E. Jones (Officer's Name) SP-6 062812 Rank Service AGES Men soleum (Organization) CERTIFIED TREE COPY:		If not avalous	Due to condition	of remains	'	(166-110)	
(Yes—ne) Remarks		n not, explain		,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	## .r
Po Remarks To BOI bottle, personal effects, or I.D. tags found with remains. BOI shows remains might be those of B.G. Hall, UNE. IIA. Extrawounds #256 A. Estimated weight of remains 7 lbs. I certify that I have personally viewed the remains of subject deceased and all resulting inform has been recorded to the best of my knowledge. Span	8.	Has tooth chart been	prepared? Yes	If not, explain			
remains. ROI shows remains might be those of B.G. Hall, UNIL. HIA. Extremounds #256 A. Estimated weight of remains 7 lbs. I certify that I have personally viewed the remains of subject deceased and all resulting inform has been recorded to the best of my knowledge. /s/ Alton E. Jones (Officer's Name) SP-6 062812 Rank Service AGRS Man soleum (Organization) CERTIFIED TRUE COPY:			(Yes-me)	ŕ			
remains. ROI shows remains might be those of B.G. Hall, UNIL. HIA. Extremounds #256 A. Estimated weight of remains 7 lbs. I certify that I have personally viewed the remains of subject deceased and all resulting inform has been recorded to the best of my knowledge. /s/ Alton E. Jones (Officer's Name) SP-6 062812 Rank Service AGRS Man soleum (Organization) CERTIFIED TRUE COPY:		B		**************************************	·······		
wounds #256 A. Estimated weight of remains 7 lbs. I certify that I have personally viewed the remains of subject deceased and all resulting inform has been recorded to the best of my knowledge. /s/Alton E. Jones (Officer's Name) SP-6 062812 Rank Service AGRS Man soleum (Organization) CERTIFIED TRUE COPY:	9.	Remarks	To ROI bottle, personal	effects, o	r I.D. t	ags found	with
I certify that I have personally viewed the remains of subject deceased and all resulting inform has been recorded to the best of my knowledge. /s/Alton E. Jones (Officer's Name) SP-6 062812 Rank Service AGRS Menusoletum (Organization) CERTIFIED TRUE COPY:		remains. ROI si	nows remains might be th	ose of B.G.	, Hall,	URW. KIA.	Extrem
has been recorded to the best of my knowledge. /s/Alton E. Jones (Officer's Name) SP-6 062812 Rank Service AGRS Nam soleum (Organization) * CERTIFIED FRUE COPY:		wounds #256 A.	Estimated weight of rem	mins 7 lbs.	•		
has been recorded to the best of my knowledge. /s/Alton E. Jones (Officer's Name) SP-6 062812 Rank Service AGRS Nam soleum (Organization) * CERTIFIED FROM COPY:			er heldshinds and an erebbleach web er er an de helder man helder men bestellt en er er er er er er er er er e E	(*************************************		dadroraharadasassv+rr}hr-sass-+r}r}r	+>br
has been recorded to the best of my knowledge. /s/Alton E. Jones (Officer's Name) SP-6 062812 Rank Service AGRS Nam soleum (Organization) * CERTIFIED FRUE COPY:		Ly	·	#44			
has been recorded to the best of my knowledge. /s/Alton E. Jones (Officer's Name) SP-6 062812 Rank Service AGRS Nam soleum (Organization) * CERTIFIED FROM COPY:							
(Officer's Name) SP-6 062812 Rank Service AGRS Non solonization) (Organization) (Organization)				of subject dec	eased and	all resulting	inform
SP-6 062812 Rank Service AGRS Meni solerum (Organization) (Organization) (Organization)				of subject dec	eased and	all resulting	inform
AGRS Non solemn (Organization) A CERTIFIED TEST COPY: Large J. Jamboz GEORGE T GAMBOA				of subject dec			
AGRS Non soloum (Organization) Large of Jambos GEORGE T GAMBOA				of subject dec	/s/ Alt	on E. Jone	
(Organization) (Organization) (Organization)					/s/ Alt	on E. Jone Name)	
LECTIFIED THEE COPY:				S	/s/ Alt	on E. Jone Name)	
GEORGE T GAMBOA				S	/s/ Alt (Officer's P-6	on E. Jone Name) 062812	18
GEORGE T GAMBOA				S	/s/ Alt (Officer's P-6 AGRS Man	on E. Jone Name) 062812 soleum	18
		has been recorded to	the best of my knowledge.	S	/s/ Alt (Officer's P-6 AGRS Man	on E. Jone Name) 062812 soleum	18
	* 1	CERTIFIED FROM CO	the best of my knowledge.	S	/s/ Alt (Officer's P-6 AGRS Man	on E. Jone Name) 062812 soleum	18

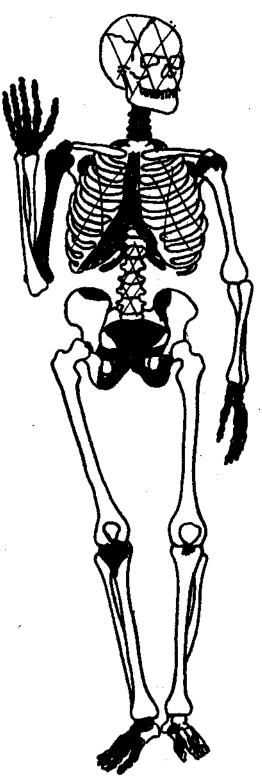
_

SKELETAL CHART

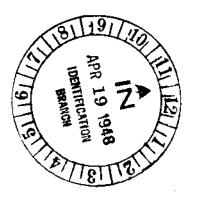
SKELETAL CHART

Connuly X-303

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMEVERY) B. G. the



frequents of rits and



AGRC FORM No. 11 Revised 16 Sept. 1966 Formely "Check List of Unknowns")



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

		Cemete	OWN X-450 (Formerly UNK X-303, UN
AGRS Mausoleur Arrived at comets			_812RowA Grave45
Place of death _	Unknown (Name of closest tow	m)	(Coordinates and letter Prefix, maps)
(Sheet, s	cale and serials used)		
Remains recovered	d or disinterred by	CMT #1	ne and organization)
Evacuated to Cer	netery by		and organization)
Description of clo	othing and equipment: (if clothes do not flt,	obtain size from body measurements)
Item	Clothing / Markings /	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear	(Type)	•	
Raincoat			
Overcoat			NAMES OF THE PROPERTY OF THE P
Jacket, Field	Ŋ	0	· · · · · · · · · · · · · · · · · · ·
Jacket, Combat	· · · · · · · · · · · · · · · · · · ·	N	
	arretti di eterministi titti eti arresisti diskini eti arresisti di etermini eti eti eti eti eti eti eti eti e	_ ,	
Sweater			
Jacket, HBT		·	
* Shirt, Wool OI)	/	
Undershirt, Wool	**************************************	/_	
Undershirt, Cotto	n		
* Trousers. Wool	OD .	13.47	
		- 1 -	1 Due H

Belt, web
Drawers, wool
Drawers, cotton
Leggings, wool
Socks, cotton
* Shoes (type)
Overshoes 0
Web Equipment (type)
(Other item)
(Other item)
If body is nucle, 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? Description of Remains: Skeleton only - Skeletal Chart attached. Est. 3/4 inches Height 5! 10 Weight Description of wounds
Bandages or dressingsScars(Length, width, location)
training mains actions
Tattoos (Number, location — illustrate on separate page)
\mathcal{L}_{i}
Outstanding moles, warts or birthmarks / (Yes-no; description, location)
Sunburn or tan, other than hand and face u
Complexion
Build (Large, fat, thin, muscular)
• /
Hair(Color, length, quantity, curly, wavy, signight, whorls, or definite parting)
(Color, length, quantity, curly, wavy, straight, whoris, or dennite patting)
Hair (Baldness, widows peak, distinctive cutting or other characteristics)
(Buldness, widows peak, distinctive cutting or other characteristics)
Sideburns Mustache Beard or (Length, heavy)
,

6.

~	O 1.	•		\mathcal{I}	
Goatee	(Light, color, extent)/		2444-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		***************************************
	,	<i>/</i>			
Eyes	(O.)	<u>/</u>	Eyebrows	/Calon hush	iness, extent across nose)
	(Color, setting, shape)	1,		. (Color, nush	mess, extent across nose)
Nose		/	Eears		
	(Size, shape, straight)	1		(Size, set close	to or far from head)
Mouth		′/	Lips		
WIOUTH	(Large, medium, small)			(Small,	large, full)
	See tooth Chart				
Teeth			ng, noticeable cro		ractsi
	/	7		,	
Chin	······································				***************************************
	(Pr	rom/nent, recedi:	ng, pointed, dimp	ies, double)	
I aw	4.,,,,,,,	Circumfere	nce of head in	inches	UTD
(Large, small, normal)				(Hat hand)
		1/.	-		
Neck	(Size, length, short, norma	l. wrinkled) 4	Larynx	(Promi	nent, normal)
	·	<i>,</i>			
Shoulders			Arms	())-17	
	(Broad, straight, smal)	, rounded) /	Length,	muscular, color,	extent and quantity of hair
			' /		•
	(14th) 1997-1997-1997-1997-1997-1997-1997-1997		U		
Hands			T	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***
			D,		
Fingers					
Ū	(Short, thic	ck, long, slender	, size of knuckles,	, missing fingers	or joints)
			′/		•
P.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Un	usual characteri	stics of fingernatis		***************************************
				<i>/</i> .	
Chest	(Size of nipples,			ir kargo small i	AGENTAL)
	(orac or mppace,	coror, quantity	una cattor or nor	··· /····	,
Waist	······				
	(Size of nav	vel, appendectom	y, amount, quantif	ty, und color of l	heir)
Pack.		Cin	cumcision	/Pubic	Hair
Dack	(Quantity and extent of h	alr)	()	Yes-no)	(Color)
	•			/,	
Herniaplasty	H-444-4		(Yes-no; location		
			•	/	, · · · · · · · · · · · · · · · · · · ·
Legs	(Inseum, muscular, ki				
	(Inscam, muscular, Ki	ock-kneed, how	ed, normai, quan	itty, color and c	XENT OF MAIL)
Feet	(Size, corns, callouses.	-	Toes	10017-7-4-14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
I CCI IIIIIIIII	(Size, corns, callouses,	flat)	•	(Slender, straigh	i, cronked, overlap)
					/, <u></u>
Evidence of	healed fractures	,	(Nose, arms,	, le _B s,	100
					The state of the s
NOTE: Use	e attached charts "A" a	and "B" to it	ndicate parts n	ot received	
				A. A	
	•	- 3			
		-	12 75		

Have finger	prints been placed	on Report of Intern	ent? No	
				(Yes-no)
If not, explai	inDue	to condition of	remains	
Has tooth ch	art been prepared	l? <u>Yes</u> I		
Remarks	No ROI bo	ottle, perosnal e		tags found with
remai	ins. ROI shows	remains might b	e these of B.G.	Hall, USN. KIA,
Extre	me wounds #256	A. Estimated w	eight of rema in	s 7 l bs.
has been reco	orded to the best	of my knowledge.		
			/s/ Alton E.	Jones
A TRU	E COPY:	·	/s/ Alton E.	Jones ficer's Name)
	Sug. St.	ame		<u> </u>
	Trely Sta	eme	, (On	ficer's Name)
	Sug. St.	••••••••••••••••••••••••••••••••••••••	SP-6	062812
	Trely Sta	••••••••••••••••••••••••••••••••••••••	SP-6 Rank AGRS	feer's Name) 062812 Service
GÓ 1s	Trely Sta	PY:	SP-6 Rank AGRS	feer's Name) 062812 Service Mausoleum
G G B	TIFIED TRUE CO	-	SP-6 Rank AGRS	feer's Name) 062812 Service Mausoleum

- 4 -

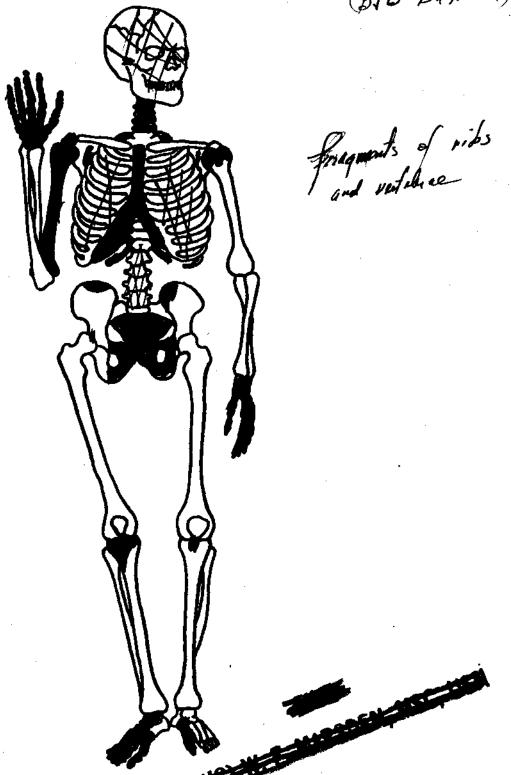
PEE-EYCOM -- 4/47 -- 484

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



RESTRICTED

WD GMC FORM 1942	INTERMENT	DATE	DATE OF REPORT			
(Rev. I Apr. 1945) (Supersedes GRS Form 1)	REPORT OF (AR 30-1810 az	INTERMENT		- -	. <u></u>	
	(AR 30-1010 ar	nd AK JU-16.	<u> </u>	1 10	6 Oct 4	<u> </u>
Imptint Identification Tag If Possible. DO NOT TYPE	Section 1.—IDENTIFICATION. NAME (Last, first, middle initial)	•		FEDIA	·	
			TISATI	SERIA	L No.	
\	UNKNOWN X-450 (Fo)rmerly und	A-303, Udar		nknown	
1>	GRADE	ORGANIZATION		 :	CH OF SERV	TCE.
(0	11				 -	L-lynn,
I \	/ EM	USN		Na	а₹у	
	RACE	RELIGION		IF OTHER TH		AD, GIVE
		.		HOME Y	JOHIN.	
PLACE OF DEATH	Unknown	Unknown	<u>-:</u>	1		
PLACE OF DEATH	CAUSE OF DEATH			DATE	OF DEATH	
Unknown	Manuala automa d	laca.		1 3/	^ P A	
EMERGENCY ADDRESSEE (Name, relationship,	Wounds extreme #	'256A		<u> </u>	0 Dec 4	1
	Gills Universe;					I
	Unknown			•		1
IDENTIFICATION TAGS FOUND ON BODY	JF NO TAGS FOUND ON BODY, I	DESCRIBE MEANS O	F IDENTIFICATION (I	undamelded, fil	in section t	ou recerse)
(1, %, or none)	AD'	מסחעבת [INIDENTIFIA	RIE	•	
None		LUGILD A)]/[RP14 + 12	, brie-		
WERE SUBSTITUTE TAGS PROVIDED (Yat or a	**)		40EA			
Yes (2)		10元	an 1950			1
36.1		<i>.</i>				
LIST PERSONAL EFFECTS FOUND ON BODY A	NO DISPOSITION OF SAME		•			
** **	:			•		
i	Kone	•				
i .	tous					
<u> </u>			· · · · · · · · · · · · · · · · · · ·		- 	
Section 2.—BURIAL. If other than in such		h and mig food	inates on reverse.			
NAME, NUMBER, COORDINATES, AND LOCATI	ON OF CEMETERY		,			
i	THE USUAL PIECE	er er er e e e e e e e e e e e e e e e e e				
	AGRS MAUSOLEUM, M	ANLLATIL	*			
DATE OF BURIAL HOUR STORAGE	STORED IN (Shroud, Minifol, or so	dent of district,	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
14 Oct 47 0800	Casket	-	None	812	A.	45
WAS THIS A REPURIAL? IF A REPURIAL	L. INDICATE NAME, NUMBER, COORD	NATES OF PREVIO		_•	PAVE	<u> 350 </u>
(Yes or to) RESTORED	4 1110000000000000000000000000000000000	71W11W7 W7	WW WENTER THE	An 1 1 7	U-1-E	LCDAIT No.
. ==				I PLOT NO.	ROW No.	
Yes USAF C	emetery Manila #2, 1	Luson, P.I.	•	PLOT No.	12 12	1474
TYPE OF RELIGIOUS PERSON COND	Demetery Manila #2, 1	IF IDENTIFICATION	ON TAGS NOT USED.	2	12	1474
		IF IDENTIFICATION		2	12	1474
TYPE OF RELIGIOUS PERSON COND CEREMONY	DUCTING BURIAL RITES	IF IDENTIFICATION	ON TAGS NOT USED.	2	12	1474
TYPE OF RELIGIOUS PERSON COND CEREMONY IDENTIFICATION TAG BURIED WITH IDE		IF IDENTIFICATION	ON TAGS NOT USED.	2	12	1474
TYPE OF RELIGIOUS PERSON COND CEREMONY IDENTIFICATION TAG BURIED WITH LIDE	ENTIFICATION TAG ATTACHED TO IARKER (Yet or no)	IF IDENTIFICATION	ON TAGS NOT USED.	2	12	1474
TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIED WITH BODY (Yes or see) \$TOREI1	ENTIFICATION TAG ATTACHED TO IARKER (Yet or no)	IF IDENTIFICATION CONTAINERS BL	ON TAGS NOT USED, I URIED WITH BOOY	2 DESCRIBE IDE	12 NTIFICATION	1474 N DATA AND
TYPE OF RELIGIOUS PERSON CONDICEREMONY IDENTIFICATION TAG BURIED WITH BODY (Year or no) \$TORED	ENTIFICATION TAG ATTACHED TO IARKER (Yet or no)	IF IDENTIFICATION	ON TAGS NOT USED.	2	12 HTTFICATION	1474
TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIED WITH BODY (Yes or see) \$TOREI1	ENTIFICATION TAG ATTACHED TO IARKER (Yet or no)	IF IDENTIFICATION CONTAINERS BL	ON TAGS NOT USED, I URIED WITH BOOY	2 DESCRIBE IDE	12 NTIFICATION	1474 N DATA AND
TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIED WITH BODY (Yes or no) \$TORED Yes BODY BURIED ON DECEASED LEFT, NAME (LA	ENTIFICATION TAG ATTACHED TO IARKER (Yet or no) Yes ant, first, middle initial)	IF IDENTIFICATION CONTAINERS BL	ON TAGS NOT USED, I URIED WITH BOOY	2 DESCRIBE IDE	12 NTIFICATION GRAV GRAV	I 1474 N DATA AND
TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIED WITH BODY (Yes or no) STORED Yes BODY BURIED ON DECEASED LEFT, NAME (Left) UNKNOWN X-457 BODY BURIED ON DECEASED RIGHT, NAME (I	ENTIFICATION TAG ATTACHED TO IARKER (Yet or no) Yes ant, first, middle initial)	IF IDENTIFICATION CONTAINERS BUT IN THE PROPERTY OF THE PROPER	ON TAGS NOT USED, JURIED WITH BOOY	2 DESCRIBE IDES	NTIFICATION R GRAV CRI R GRAV	I 1474 N DATA AND FE NO. FF NO. FF NO. FF NO. FF NO. FF NO.
TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIED WITH BODY (Yes or see) STORED Yes BODY BURIED ON DECEASED LEFT, NAME (LA UNKNOWN X-457 BODY BURIED ON DECEASED RIGHT, NAME (I	ENTIFICATION TAG ATTACHED TO IARKER (Yes or no) Yes ast, first, middle initial) Last, first, middle initial)	RANK	ON TAGS NOT USED, URIED WITH BODY SERIAL NO.	ORGANIZATION	NTIFICATION R GRAV CRI R GRAV	I 1474 N DATA AND FE No. WPT 47
TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIED WITH BODY (Yes or no) \$TORE() Yes BODY BURIED ON DECEASED LEFT, NAME (LA UNKNOWN X-457 BODY BURIED ON DECEASED RIGHT, NAME (INC.) UNKNOWN X-471 SIGNATURE OF PERSON PREPARING REPORT	ENTIFICATION TAG ATTACHED TO IARKER (Yes or no) Yes ast, first, middle initial) Last, first, middle initial)	IF IDENTIFICATION CONTAINERS BUT IN THE PROPERTY OF THE PROPER	ON TAGS NOT USED, DRIED WITH BOOY SERIAL NO.	ORGANIZATION	NTIFICATION R GRAV CRI R GRAV	I 1474 N DATA AND TE NO. YPT 47 /E NO.
TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIED WITH BODY (Yes or see) \$TORED Yes BODY BURIED ON DECEASED LEFT, NAME (LA UNKNOWN X-457 BODY BURIED ON DECEASED RIGHT, NAME (LA UNKNOWN X-471 SIGNATURE OF PERSON PREPARING REPORT	ENTIFICATION TAG ATTACHED TO IARKER (Yes or no) Yes ast, first, middle initial) Last, first, middle initial)	RANK	ON TAGS NOT USED, DRIED WITH BOOY SERIAL NO. SERIAL NO.	ORGANIZATION ORGANIZATION	12 NTIFICATION GRAY CRI GRAY	I 1474 N DATA AND TE NO. YPT 47 /E NO.
TYPE OF RELIGIOUS CEREMONY IDENTIFICATION TAG BURIED WITH BODY (Yes or no) \$TORE() Yes BODY BURIED ON DECEASED LEFT, NAME (LA UNKNOWN X-457 BODY BURIED ON DECEASED RIGHT, NAME (INC.) UNKNOWN X-471 SIGNATURE OF PERSON PREPARING REPORT	ENTIFICATION TAG ATTACHED TO ARKER (Yes or no) Yes ant, first, middle initial) Last, first, middle initial)	FIDENTIFICATION CONTAINERS BE THE CONTAINERS BE	SERIAL NO. SERIAL NO. SERIAL NO.	ORGANIZATION ORGANIZATION ORGANIZATION PREPORT	12 NTIFICATION R GRAV CR CR	TE NO. YE NO. YE NO. YE NO.

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	_	Section 3.—Unitdentified Remains.	
: 	LEFT LTTLE FINGER	INSTRUCTIONS: (a) Great care will be taken to record the most minute clues for the future mains. Fill in anatomical characteristics below, and any other clues under social security number; position of body found in airplanes, vehicles, and tanks planes, vehicles, and tanks. (b) A fingerprint, or prints, are the most valuable of all clues. Imprint a chart at left, or as many as possible. If no fingerprint or prints can be secure every tooth will be indicated on the tooth chart in accordance with diagram below.	
	2	every tooth will be indicated on the tooth chart in accordance with diagram bel accomplished if one or more fingerprints are secured.	ow. Tooth chart will not be
*	LEFT RUMG FINGER	HEIGHT WEIGHT COLOR OF EYES COLOR OF HAIR BIRTHMARKS	S, SCARS, OR TATTOOS
		WEAPON AND SERIAL NO. LAUNDRY MARKS WHERE BODY	WAS BURIED OR FOUND
	LEFT MIDOLE FINGER	OTHER IDENTIFICATION CLIES	
	LEFT INDEX FINGER	FILLINGS SILVER FILLING GOLD FILLING	1/1/2
-	THUMB	CAVITIES CAVITY DECAYED	
	RIGHT	CROWNED TEETH 16	THE MOUTH WIDE OPEN
	RIGHT INDEX FAMILER	BRIDGE WORK GOLD BRIDGE 13 14 14 15 16 17 18 18 10 10 10 10 10 10 10 10	MER STOP US
	RIGHT MIDOLE FINGER	FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN	ESTABLISHED CEMETERY
	RIGHT RING FINGER	REMARKS:	
24 NOV 1847	RIGHT LITTLE PHOESE	Identification Check List and Dental Chart acc	ompliahed.

RESTRICTED WD QMC FORM 1042 (Rev. 1 Apr. 1946) (Supercedee GRS Form 1) DATE OF REPORT REPORT OF INTERMENT (AR 30-1810 and AR 30-1815) STORAGE 16 Oct 47 Section 1.—IDENTIFICATION. int Identification Tag If Possible. DO NOTATYPE SERIAL No. NAME (Last, first, middle initial) UNKNOWN X-450 (Formerly UNK X-303, USAF Unknown Cem Manila #2, Luzon, P.I.)
RADE ORGANIZATION BRANCH OF SERVICE GRADE О EM USN Navy IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY RELIGION RACE Unknown Unknown PLACE OF DEATH CAUSE OF DEATH DATE OF DEATH Wounds extreme #256A Unknown 10 Dec 41 EMERGENCY ADDRESSEE (Name, relationship, and address) Unknown IDENTIFICATION TAGS FOUND ON BODY IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 2 on re (I. S. or none) None PROYED UNIDENTIFIABLE WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) Yes (2) LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME None Section 2.—BUMAL. If other than in established cometery, furnish sketch and map coordinates on reverse. NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY AGRS MAUSOLEUM, MANILA P. L DATE OF BORIAL ROLL BURIED IN (Skroud, blanket, or name of other) TYPE OF GRAVE PLOT No. ROW No. HOUR GRAVE No. GER BAY 人们的电影型 14 Oct 47 0800 Casket 45 IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE WAS THIS A REBURIAL? PLOT No. ROW No. GRAVE No. USAF Cemetery Manila #2, Luzon, P.I. Yes 12 1474 IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY A TRUE COPY: TYPE OF RELIGIOUS PERSON CONDUCTING BURIAL RITES IDENTIFICATION TAG ATTACHED TO MARKER (Yes or so) IDENTIFICATION TAG BURIED WITH BODY (Yes or no) FRAME QMC lst Yes Yes BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) RANK SERIAL NO. ORGANIZATION GRAVE NO.

signature of person preparing report
s/t/ Wm R. GILBERT, Adm. Asst.

UNKNOWN X-457

UNKNOWN X-471

STABOA

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

JUCIO S PANOPIO, Jr., 2nd Lt Inf

SERIAL NO.

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.

RANK

ing REPORT

DRGANIZATION

RESTRICTED

	Section 3.—UNENTIFIED	D REMAINS.			· · · · · · · · · · · · · · · · · · ·
LEFT LITTLE FINGER	INSTRUCTIONS: (a) Great care will mains. Fill in anatom social security number; planes, vehicles, and ta (b) A fingerprint, c chart at left, or as man every tooth will be indic accomplished if one or	position of body for	ind in airplanes, vehicle	es, and tanks; and seria	I numbers of air-
LÉFT RING FINGER	ACCOMPTISHED IT ONE OF HEIGHT WEIGHT	more fingerprints ar	e secured.	BIRTHMARKS, SCARS, OR	
	WEAPON AND SERIAL NO.	<u> </u>	1	 	
LEFT MIDOLE FINGER	OTHER IDENTIFICATION CL	LAUNDRY	MARKS	WHERE BODY WAS BURIE	D OR FOUND
KDEX FINGER	FILLINGS	SILVER FILL GOLD FILLIN	ING IG		.3
LEFT Thumb	CAVITIES	CAVITY CAVITY	¥0 7	A A A A A A A A A A A A A A A A A A A	
RIGHT	MISSING TEETH CROWNED TEETH	TOOTH MISSE	D IAGRAM	REPRESENTS THE MOUT	H WIDE OPEN
RIGHT INDEX FINGER	BRIDGE WORK	PORCELAIN CO	15 14 13 13	LOWER 2	33) is 3) ia 3) ia 13) ia
RIGHT MIDOLE FINGER	FURNISH SKETCH AND MAP	REFERENCE AND COOL	RDINATES FOR BURIAL IN	OTHER THAN ESTABLISHED	CEMETERY
RIGHT RING FINGER	REMARKS:				•
RIGHT LITTLE FINGER	Identific	ation C he ck 1	List and Denta	l Chart accompl	ish e d.

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1) REPORT OF INTERMENT 5 Jan 46 (AR 30-1810 and AR 30-1815) Section 1.- IDENTIFICATION. Imprint Identification Tag If Possible. DO NOT TYPE NAME (Last, first, middle initial)
UNKNONNK-303 (Cem SERIAL NO. Manila Formerly UAKHO.A. #3 (Cem It Wm McKinley) ORGANIZATION BRANCH OF SERVICE GRADE USM Navy EL. IF OTHER THAN U.S. DEAD, GIVE NAME OF COUNTRY RELIGION RACE DATE OF DEATH PLACE OF DEATH CAUSE OF DEATH Wounds extreme #256A 10 Dec 41 EMERGENCY ADDRESSEE (Name, relationship, and address) IDENTIFICATION TAGS FOUND ON BODY IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If maidentified, fill in section 3 on reverse) (1, \$, or none) None WERE SUBSTITUTE TAGS PROVIDED? (Yes or No) IDENTIFICATION SECTION Yes (2) REPATRIATION RECORDS BRANCH MEMORIAL DIVISION LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME L 550 CATEGORY III CASE NO CLUES IDENTIFICATION IMPOSSIBLE Section 2.-BURIAL. If other then in established cometery, furnish sketch and map coordinates on rev AT PRESENT TIME NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY USAF Cemetery Manila #2, Luzon, P I GRAVE No. TYPE OF GRAVE ROW No. BURIED IN (Shroud, blanket, or name of other) PLOT No. DATE OF BURIAL HOUR 2 1474 0900 Shelter Half Cross 22 Dec 45 IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE WAS THIS A REBURIAL? PLOT No. ROW No. GRAVE No. USAF Cemetery Ft Wm McKinley, Luzon, F I F 10 IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY TYPE OF RELIGIOUS CEREMONY PERSON CONDUCTING BURIAL RITES IDENTIFICATION TAG BURIED WITH BODY (Yes or no) IDENTIFICATION TAG ATTACHED TO MARKER (Yes of no) Yes Yes GRAVE No. **ORGANIZATION** BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) RANK SERIAL NO. 1473 PANK SERIAL NO. ORGANIZATION GRAVE No. BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle (mitiel) 1475 UNKNOWN X-304 SIGNATURE OF GRE OFFICER VERIFYING REPORT SIGNATURE OF PERSON PREPARING REPORT

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.

G. M. more

E. M. MOORE, 1st Lt., QMC.

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	Section 3.—ULNTIFIED RE	MAINS.				
LIET LIFELE FINGER	INSTRUCTIONS: (a) Great care will be taken to record the most minute clues for the future identity of unide mains. Fill in anatomical characteristics below, and any other clues under "Other," such as social security number; position of body found in airplanes, vehicles, and tanks; and serial numb planes, vehicles, and tanks. (b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thus chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart					
LEFT RING FINGER	accomplished if one or more	d on the tooth chart in according experients are secured of LOR OF EYES COLOR OF	i. 	Tooth chart will not be		
	WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS	S BURIED OR FOUND		
LEFT MIDDLE PIWSER	OTHER IDENTIFICATION CLUES Comparigon of	remnants of ori	ginal hurial record	s with		
LEFT INDEX, FINGER	probably those	of B. G. Hall, SHVER FILLING GOLD FILLING	Radioman 30, USH.	uny 2		
<u> Ге</u> т Тниже	CAVITIES	CAVITY	UPPER	ALL ALL		
RIGHT THUMB	CROWNED TEETH	TOOTH MISSING	DIAGRAM REPRESENTS THE	MOUTH WIDE OPER		
RIGHT INDEX FINGER	BRIDGE WORK	GOLD BRIDGE	14 LOWER 13 12 12	13		
RIGHT MIDDLE FINGER	FURNISH SKETCH AND MAP REFI	ERENCE AND COORDINATES	FOR BURIAL IN OTHER THAN ESTA	BLISHED CEMETERY		
RIGHT RING FINGER	REMARKS:	.				
RIGHT LITTLE FINGER			•			

RESTRICTED DATE OF REPORT WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1) REPORT OF INTERMENT (AR 30-1810 and AR 30-1815) 18 Jan 46 Imprint Identification Tag If Possible. Section 1.-IDENTIFICATION. DO NOT TYPE SERIAL NO. NAME (Last, first, middle initial) U N K NO W N X-303 (Cem Manila Formerly UNKi-OWN #3 (Cem Ft Wm McKinley) ORGANIZATION BRANCH OF SERVICE GRADE $\mathbf{E}\mathbf{M}$ USN Navy IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY RACE RELIGION DATE OF DEATH PLACE OF DEATH CAUSE OF DEATH Wounds extreme #256A 10 Dec 41 EMERGENCY ADDRESSEE (Name, relationship, and address) IDENTIFICATION TAGS FOUND ON BODY IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, All in section 2 on reverse) (f. 2. or none) APPROVED UNIDENTIFIABLE None WERE SUBSTITUTE TAGS PROVIDED!(Yes of No) **\$1** JAN 1950 Yes (2) LIST PERSONAL EFFECTS FOUND 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, Luzon, P I BURIED IN (Shroud, blanket, or name of other) TYPE OF GRAVE MARKER PLOT No. ROW No. GRAVE No. DATE OF BURIAL HOUR Shelter Half 22 Dec 45 0900 Cross 12 1474 WAS THIS A REBURIAL? IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE Yes USAF Cemetery Ft Wm wckinley, Luzon, P I IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY A TRUE COPY: TYPE OF RELIGIOUS CEREMONY PERSON CONDUCTING BURIAL RITES IDENTIFICATION TAG BURIED WITH BODY (Yes or no) IDENTIFICATION TAG ATTACHED TO MARKER (Yes or NO) Yes lst M OWC BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) RANK SERIAL NO. ORGANIZATION GRAVE No. BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) RANK SERIAL No. UNKNOWN X-304 SIGNATURE OF PERSON PREPARING REPORT SIGNATURE OF GRS OFFICER.) /s/t/ R. C. BARRETT, T/4, GRS. DORE, 1st Lt., QMC.

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

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	Section 3.—U NTIFIED R	REMAINS,	`		
LEFT LITYLE FINGER	INSTRUCTIONS: (a) Great care will be mains. Fill in anatomical social security number; po planes, vehicles, and tanks (b) A fingerprint, or p	characteristics belosition of body founds. ition of body founds. prints, are the most	ow, and any other o I in airplanes, vehicle valuable of all clues	lues under "Other," es, and tanks; and se . Imprint all fingers	'such as shoe size, rial numbers of air-
LEFT RING FINGER	every tooth will be indicate accomplished if one or mo	s possible. If no filed on the tooth char re fingerprints are s	ngerprint or prints ca t in accordance with	in be secured, the co	ndition of each and oth chart will not be
INGER					ж тапоо
Midaci	WEAPON AND SERIAL NO.	LAUNDRY MA	ARKS	WHERE BODY WAS BUR	HED OR FOUND .
LEFT MIDDLE FINGER	original c	of remnants emetery reco	rds indicate	burial record these remains	s with very
LETT INDEX FINGER		hose of B. G.	. Hall, Radio		wissiw _.
MGER	FILLINGS	SILVER FILLING		30342°	3)
THUMB	CAVITIES	CAVITY		UPPER	
RIGHT THUMB	CROWNED TEETH	POOTH MISSING	16 PE	BEPRESENTS THE MO	UTH WIDE OPEN
RIGHT INDEX FINGER	BRIDGE WORK	GOLD GROWN	15)	LOWER	3 15 (8) 14 (13) 13 (12)
RIGHT MIDOLE FINGER	FURNISH SKETCH AND MAP RE	FERENCE AND COORDI	NATES FOR BURIAL IN	OTHER THAN ESTABLISH	ED CEMETERY
RIGHT RING FINGER	REMARKS:	-		_	
RIGHT LITILE FINGER	•				