

FILE IDENTIFICATION TOPPER

FILE NUMBER

298 Unit. Manila # 2 X-317

SUBJECT

Also Manila News. X-802 ✓

QMC FORM 1121
1 Aug 49

MGMT 293
GRS FAR EAST

13 June 1949

SUBJECT: Identification of World War II Deceased

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

ATTN: AGRS, PHILCOM ZONE

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

Unknown X-3150	AGRS	Mausoleum	Manila	formerly	X-1027	Manila #2
Unknown X-3168	AGRS	Mausoleum	Manila	formerly	X-1045	Manila #2
Unknown X-3147	AGRS	Mausoleum	Manila	formerly	X-2024	Manila #2
Unknown X-2065	AGRS	Mausoleum	Manila	formerly	X-3188	Manila #2
Unknown X-1973	AGRS	Mausoleum	Manila	formerly	X-3268	Manila #2
Unknown X-1893	AGRS	Mausoleum	Manila	formerly	X-3247	Manila #2
Unknown X-1723	AGRS	Mausoleum	Manila	formerly	X-3364	Manila #2
Unknown X-1616	AGRS	Mausoleum	Manila	formerly	X-3494	Manila #2
Unknown X-1348	AGRS	Mausoleum	Manila	formerly	X-3577	Manila #2
Unknown X-1217	AGRS	Mausoleum	Manila	formerly	X-3726	Manila #2
Unknown X-1250	AGRS	Mausoleum	Manila	formerly	X-3641	Manila #2
Unknown X-937	AGRS	Mausoleum	Manila	formerly	X-4004	Manila #2
Unknown X-2052	AGRS	Mausoleum	Manila	formerly	X-3205	Manila #2
Unknown X-1213	AGRS	Mausoleum	Manila	formerly	X-3746	Manila #2
Unknown X-4690	AGRS	Mausoleum	Manila	formerly	X-2003	Manila #2
Unknown X-1291	AGRS	Mausoleum	Manila	formerly	X-3590	Manila #2
Unknown X-1344	AGRS	Mausoleum	Manila	formerly	X-3561	Manila #2
Unknown X-1621	AGRS	Mausoleum	Manila	formerly	X-3439	Manila #2
Unknown X-1326	AGRS	Mausoleum	Manila	formerly	X-3627	Manila #2
Unknown X-4633	AGRS	Mausoleum	Manila	formerly	X-832	Manila #2
Unknown X-702	AGRS	Mausoleum	Manila	formerly	X-217	Manila #2
Unknown X-719	AGRS	Mausoleum	Manila	formerly	X-236	Manila #2
Unknown X-414	AGRS	Mausoleum	Manila	formerly	X-268	Manila #2
Unknown X-720	AGRS	Mausoleum	Manila	formerly	X-237	Manila #2
Unknown X-441	AGRS	Mausoleum	Manila	formerly	X-294	Manila #2
Unknown X-802	AGRS	Mausoleum	Manila	formerly	X-317	Manila #2
Unknown X-1923	AGRS	Mausoleum	Manila	formerly	X-3257	Manila #2
Unknown X-1939	AGRS	Mausoleum	Manila	formerly	X-3327	Manila #2

M. A. N.
File 14 Aug 50
& Christine Brown
Id 73r

QMONT 293

GHS Far East

Ltr 13 June 1949

SUBJECT: Identification of World War II Deceased

Unknown X-1965 AGHS Mausoleum Manila formerly X-3290 Manila #2
Unknown X-4680 AGHS Mausoleum Manila formerly X-1089 Manila #2
Unknown X-4678 AGHS Mausoleum Manila formerly X-1087 Manila #2
Unknown X-4677 AGHS Mausoleum Manila formerly X-1086 Manila #2
Unknown X-4675 AGHS Mausoleum Manila formerly X-1084 Manila #2
Unknown X-1885 AGHS Mausoleum Manila formerly X-3245 Manila #2
Unknown X-2750 AGHS Mausoleum Manila formerly X-3815 Manila #2
Unknown X-1306 AGHS Mausoleum Manila formerly X-3637 Manila #2

3425

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

FOR THE QUARTERMASTER GENERAL:

T.H. WETZ
Lt. Colonel, GSC
Memorial Division

cc: Adm Section
G. Reynolds: pmr
L.V. Mensel
J. Windsor

/Fms 1 /gyc		Interred 11 Oct 1949 D 13 152 Ft. McKinley <i>teaser/mark</i>		DISINTERMENT DIRECTIVE	
Cemetery Superintendent SECTION A NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER 7747 00154		DATE 15 05 48 DAY MONTH YEAR	
NAME <i>gpc</i> UNKNOWNX-000317		SERIAL NUMBER	RANK	ARM	DATE OF DEATH DAY MONTH YEAR
CEMETERY USAF CEMETERY MANILA NO 2					DISPOSITION OF REMAINS 7701 180 CODE DIST. PT.
PLQT 2	ROW 12	GRAVE 1452	COUNTRY PHILIPPINE ISLANDS		CAUSE OF DEATH 6
SECTION B — CONSIGNEE AND NEXT OF KIN					
NAME AND ADDRESS OF CONSIGNEE FORT MCKINLEY CEMETERY MANILA, PHILIPPINE ISLANDS			NAME AND ADDRESS OF NEXT OF KIN (BY ADMINISTRATIVE DECISION)		
SECTION C — DISINTERMENT AND IDENTIFICATION					
NAME UNKNOWN X-317 (mausoleum) URY A-302		SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISTINTERRED 21 Sept 48
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION UNKNOWN		RELIGION	IDENTIFICATION VERIFIED BY ALFRED H McLELLAN JR Embalmor NAME AND TITLE	
SECTION D — PREPARATION OF REMAINS FOR SHIPMENT					
NATURE OF BURIAL Shelter Half			CONDITION OF REMAINS Skeletal		
OTHER MEANS OF IDENTIFICATION					
MINOR DISCREPANCIES <i>1</i> four (4) Identification tags show UNKNOWN X-302, ACSNS Mausoleum Formerly URY X-317, Manila #2					
REMAINS PREPARED AND PLACED IN CASKET					
DATE 21 Sept 48		BY ALFRED H McLELLAN JR			
CASKET SEALED BY ALFRED H McLELLAN JR		EMBALMER (Signature) <i>Alfred H. McLeellan Jr.</i> ALFRED H McLELLAN JR			
CASKET BOXED AND MARKED		SHIPPING ADDRESS VERIFIED BY			
DATE 21 Sept 48		BY HORACE L ALLISON, Sgt, Inf			
		BY CHARLES R BATES, 1st Lt, USAPR			
I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct. <i>Charles R Bates</i> CHARLES R BATES, 1st Lt, USAPR SIGNATURE OF GRS INSPECTOR					
<i>1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.</i>					
REMARKS: Unidentifiable - OQMG					

REV 1948
OQMG
Shaw

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM AGRS MAUSOLEUM		TO FORT MCKINLEY MILITARY CEMETERY	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER <i>[Signature]</i>	
SIGNATURE OF SHIPPER <i>[Signature]</i>	DATE	SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE 11 OCT 1949

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>[Signature]</i>	DATE	SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE

6. SHIPPED

FROM <i>[Signature]</i>		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER <i>[Signature]</i>	DATE	SIGNATURE OF RECEIVER <i>[Signature]</i>	DATE

7. SHIPPED

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

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE
APO 900

10 May 1949
Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 317, Plot 2,
Row 12, Grave 1452, USMC Manila #2, Luzon, P.I. have
been reviewed and it is the opinion of this office that insufficient
evidence is available to establish the identity of this deceased,
and that these remains should be classified as unidentifiable.

FOR THE COMMANDING OFFICER:

H. B. McNemar
H. B. McNEMAR
Captain, QMG
Chief, Records Branch

Atch: Form 1044

Received 3 June 49 OQMG
Not identifiable from
information presently
available *F. Reynolds 6-9-49*

Encls. 76'

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-802 (Formerly UNKN X-317 Manila #2)				2. DATE OF REPORT 10 May 1949	
3. NAME OF CEMETERY AGERS		4. PLOT 81g	5. ROW A	6. GRAVE 160	7. DATE OF DISINTERMENT REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT U. T. D.	9. ESTIMATED HEIGHT U. T. D.	10. COLOR OF HAIR U. T. D.	11. RACE UNKNOWN
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

N O N E

13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND/OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES

U. T. D.

14. WAS BODY BURNED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT?
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15. WAS BODY MANGLED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT EXTENT?
--	-----------------

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

N O N E

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

N O N E

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

Incls. # 62

18.

TOOTH CHART

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

RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
M A X I L L A								M I S S I N G							
←								→							
Side View								Side View							
Top View								Top View							
Side View								Side View							
M A N D I B L E								M A N D I B L E							
←								→							
M I S S I N G								U. T. D.							
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

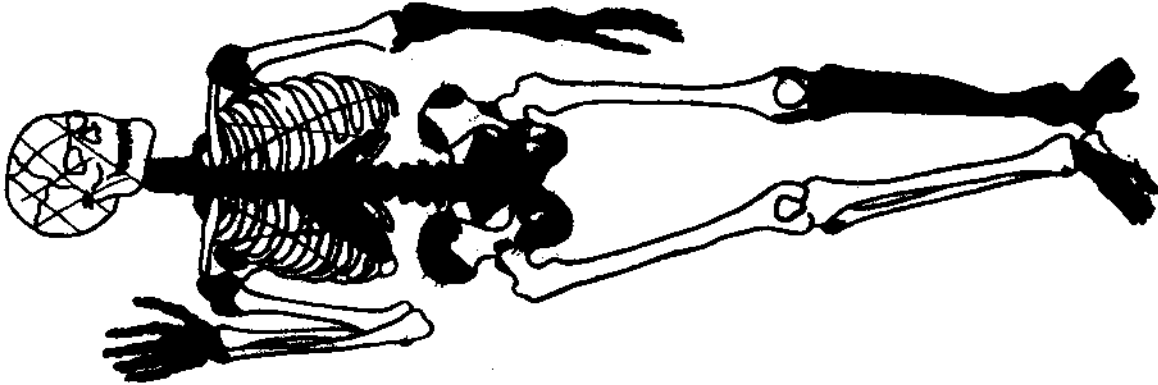
DENTURES (Plates): DRAW DIAGRAM OF RELATIVE SIZE AND SHAPE OF PLATE, BLOCK IN TEETH ATTACHED AND INDICATE RETAINING CLASPS ON NATURAL TEETH WITH THE WORD, "CLASP."

Maxilla and mandible from R13 - R16 are missing. R2, R4, R5 and L6 are loose teeth present with remains. L16 is impacted. Unable to determine whether teeth from R10 - R16 are X or Px due to the condition of the mandible.

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

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

19. BLACK OUT PARTS OF BODY NOT RECOVERED



20.

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

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

 SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

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

Estimated weight of remains - 4 lbs.

"UNIDENTIFIABLE"

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

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

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

JAMES J. McDERMOTT
 Laboratory Officer, CIP

SIGNATURE

James J. McDermott

IDENTIFICATION DENTAL CHART

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

UNKNOWN X-802 (Formerly UNK X-317 USAF Cemetery Manila #2, Luzon, P.I.)

15 Oct 47
DATE

Unknown LAST NAME Unknown FIRST Unknown INITIAL Unknown RANK Unknown SERIAL NO.

Unknown UNIT Unknown ORGANIZATION

Unknown PLACE OF DEATH AGRS Mausoleum, Manila, P.I. PLACE OF BURIAL

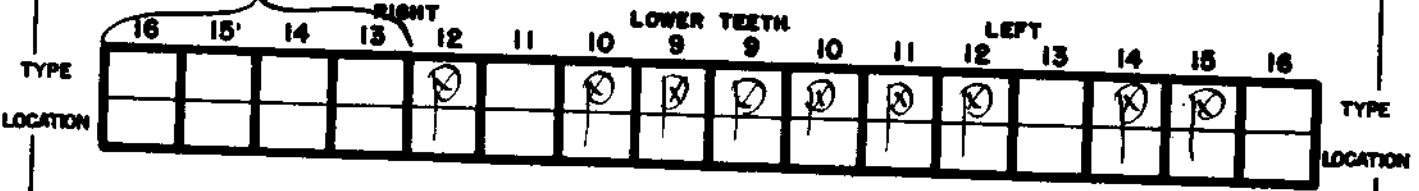
812 PLOT A ROW 160 GRAVE NO.
TANGER BAY CR/PT

STORAGE
Maxilla Missing

















Mandible Missing

INSIDE — LOOKING OUT

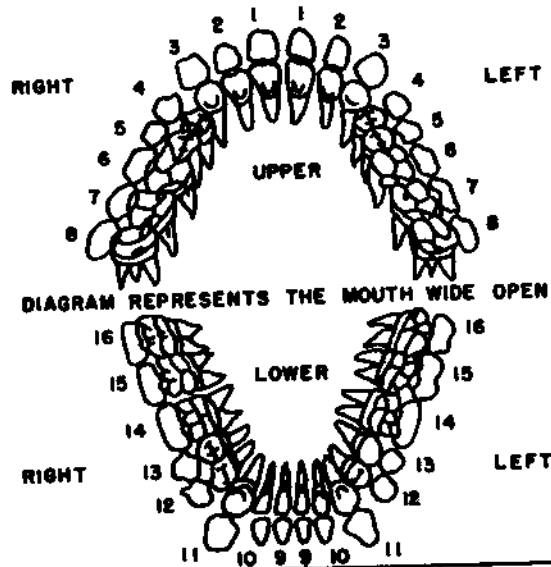


KEY OF SYMBOLS TO BE USED ON ABOVE CHART

<p>SYMBOLS IN WHOLE BOX</p> <p> EXTRACTED</p> <p> CAVITY. INDICATE LOCATION</p> <p> FIXED BRIDGE (INCL. ABUTMENTS)</p> <p> TEETH REPLACED BY DENTURE</p> <p> POSTHUMOUSLY MISSING (LOST AFTER DEATH)</p>	<p>TYPE OF FILLING IN UPPER HALF OF BOX</p> <p> AMALGAM (SILVER)</p> <p> GOLD</p> <p> SILICATE OR PORCELAIN</p> <p> OXYPHOSPHATE (CEMENT)</p>	<p>LOCATION OF FILLING IN LOWER HALF OF BOX</p> <p> MESIAL (BETWEEN-TOWARD FRONT)</p> <p> OCCLUSAL (BITING SURFACE BACK TEETH)</p> <p> DISTAL (BETWEEN-TOWARD BACK)</p> <p> LINGUAL (TOWARD TONGUE)</p> <p> FACIAL (TOWARD CHEEK)</p>
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INSTRUCTIONS:

1. **ACCURACY AND ATTENTION TO DETAIL** IN THE PREPARATION OF THIS CHART ARE OF PARAMOUNT IMPORTANCE, IF SAME IS TO BE OF MAXIMUM VALUE.
2. **NOTE CAREFULLY THAT:** SYMBOLS INDICATING MISSING TEETH, CAVITIES AND BRIDGE-WORK ARE TO BE INSERTED IN WHOLE BOX; SYMBOLS INDICATING TYPE OF FILLING ARE TO BE INSERTED IN UPPER HALF OF BOX; AND SYMBOLS INDICATING LOCATION OF FILLING ARE TO BE INSERTED IN LOWER HALF OF BOX.
3. ANY ABNORMALITIES SUCH AS MALPOSED, MALFORMED OR DISCOLORED TEETH, ETC. SHOULD BE NOTED. DENTAL WORK NOT COVERED ABOVE WILL BE INDICATED, E.G. PORCELAIN CROWNS, GOLD CROWNS (FULL OR $\frac{3}{4}$), $\frac{3}{4}$ GOLD CROWN WITH SILICATE WINDOW.
4. FOR INFORMATION OF STANDARD NUMBERING OF TEETH, SEE DIAGRAM BELOW.



REMARKS: Maxilla missing. R-quadrant mandible missing. Unable to determine whether teeth in those portion missing P or X.

s/ Magno A. Noble
SIGNATURE OF PERSON WHO PREPARED CHART

p/ MAGNO A. NOBLE
NAME AND RANK TYPED OR PRINTED

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

s/ Alton E. Jones
VERIFIED BY GRS OFFICER

p/ ALTON E. JONES SP-6
NAME AND RANK TYPED OR PRINTED

15 Oct 47

DATE

CERTIFIED TRUE COPY:

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

IDENTIFICATION CHECK LIST

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

UNKNOWN X-802 (Formerly UNK X-317 USAF)
~~UNKNOWN~~ (Cemetery Manila #2, Luzon, P.I.)
 Cemetery AGRS Mausoleum, Manila, P.I.
 Plot 812 ^{RANGER BAY} Row A Grave 160

CIP, AGRS Mausoleum, Manila, P.I.

1. Arrived at Cemetery 7 Oct 47
(Hour) (Date)
2. Place of death Unknown
(Name of closest town) (Coordinates and letter Prefix, maps)
(Sheet, scale and serials used)
3. Remains recovered or disinterred by CMT #1
(Name and organization)
CMT #1
4. Evacuated to Cemetery by _____
(Name and organization)
5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

Item	Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.
* Headgear	(Type) /		
Raincoat	/		
Overcoat	/		
Jacket, Field	/		
Jacket, Combat	/		
Mackinaw		N	
Sweater		O	
Jacket, HBT		N	
* Shirt, Wool OD		E	
Undershirt, Wool		/	
Undershirt, Cotton		/	
Trousers, HBT		/	
* Trousers, Wool OD		/	

Belt, web
Drawers, wool
Drawers, cotton
Leggings, wool
Socks, cotton
* Shoes One shoe sole found approximately size 7.

Overshoes
Web Equipment (type)
(Other item)
(Other item)

* If body is nude, sizes of these items should be computed by measuring the remains
Chevrons or Insignia
(Type & location; shirt, jacket, coat, helmet)

Shoulder Patch
Does clothing indicate that deceased was a member of the Air, Ground or Naval Force?

6. Description of Remains: Skeleton only - chart attached.

Age Height UTD Weight Description of wounds

Bandages or dressings Scars (Length, width, location)
Tattoos (Number, location - illustrate on separate page)

Outstanding moles, warts or birthmarks (Yes-no; description, location)

Sunburn or tan, other than hand and face

Complexion (Light, medium, dark, clear, pimples, pocks, freckles)

Build (Large, fat, thin, muscular)

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

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

Sideburns Mustache Beard or (Length, heavy)

Goatee
 (Light, color, extent)

Eyes (Color, setting, shape) U Eyebrows (Color, bushiness, extent across nose)
 T

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

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

Teeth See chart attached.
 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw (Large, small, normal) skull
 Circumference of ~~head~~ skull in inches (Hat band)

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

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

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

..... U
 (Unusual characteristics of fingernails)

Chest (Size of nipples, color, quantity and extent of hair, large, small, normal)

Waist (Size of navel, appendectomy, amount, quantity, and color of hair)

Back (Quantity and extent of hair) Circumcision (Yes-no) Pubic Hair (Color)

Hernioplasty (Yes-no; location)

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

Feet (Size, corns, callouses, flat) Toes (Slender, straight, crooked, overlap)

Evidence of healed fractures (Nose, arms, legs, etc.)

NOTE: Use attached charts "A" and "B" to indicate parts not received.

7. Have finger prints been placed on Report of Interment? No
(Yes-no)

If not, explain Due to condition of remains.

8. Has tooth chart been prepared? Yes If not, explain _____
(Yes-no)

9. Remarks No ROI bottle nor identification tags found with remains. Only
personal effect found is one (1) shoe sole approximately size 7.
Estimated weight of remains 4 lbs.

I certify that I have personally viewed the remains of subject deceased and all resulting information has been recorded to the best of my knowledge.

s/ Alton E. Jones
(Officer's Name)
SP-6 062812
Rank Service
AGRS Mausoleum, Manila, P.I.
(Organization)

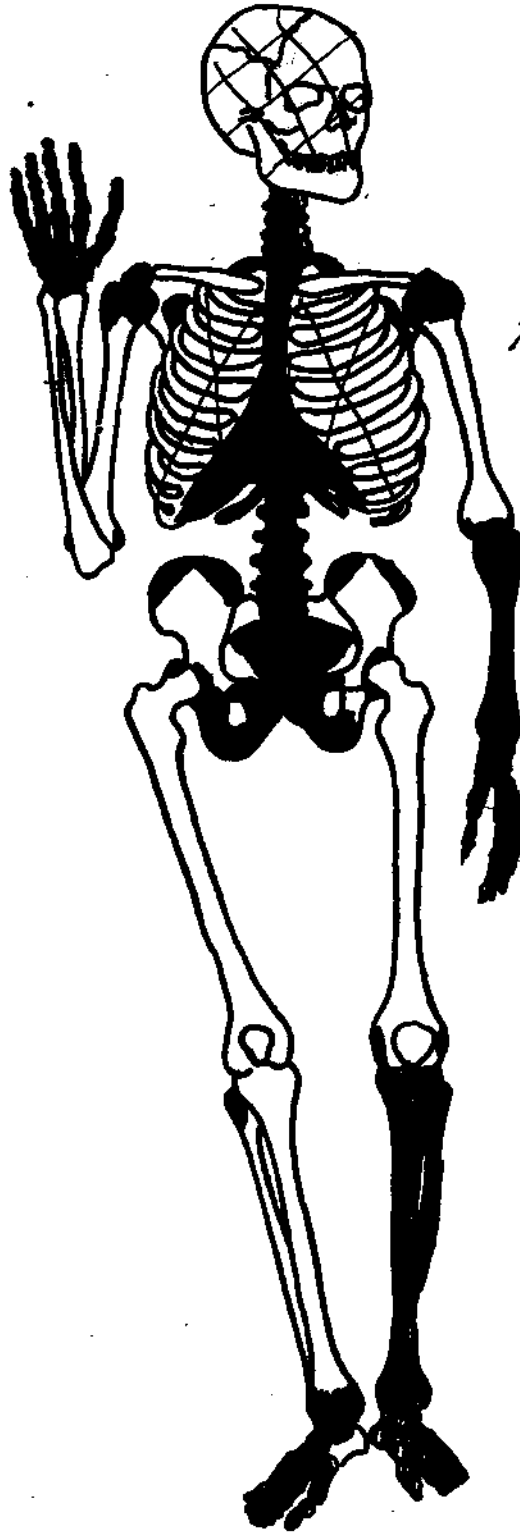
15 Oct 47

CERTIFIED TRUE COPY:
George T. Gamba
GEORGE T. GAMBA
2d Lt., MAC

SKELETAL CHART

X-802

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



*Fragments of Ribs too
small to identify
fragments of Vertebrae*

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

APR 5-1947

REPORT OF INTERMENT STORAGE
(AR 30-1810 and AR 30-1815)

DATE OF REPORT
20 Oct 47

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN X-802 (Formerly UNK X-317 USAF Cemetery Manila, #2, Luzon, P.I.)		SERIAL No. Unknown
GRADE Unknown	ORGANIZATION Unknown	BRANCH OF SERVICE Unknown
RACE Unknown	RELIGION Unknown	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH Unknown	CAUSE OF DEATH Unknown	DATE OF DEATH Unknown
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EMERGENCY ADDRESSEE (Name, relationship, and address)
Unknown

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unknown, list all in section 3 on reverse)
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) Yes (2)	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME
None

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY
AGRS MAUSOLEUM, MANILA, P.I.

DATE OF BURIAL STORAGE 15 Oct 47	HOUR 0800	BURIED IN (Shroud, blanket, or value of value) STORED Casket	TYPE OF GRAVE MARKER None	PLOT No. + ANGER 812	ROW No. BAY A	GRAVE No. CRYPT 160
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WAS THIS * REBURIAL? (Yes or no) RESTORED Yes	IF A REBURIAL INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery Manila #2, Luzon, P.I.	PLOT No. 2	ROW No. 12	GRAVE No. 1452
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TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) STORED Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes	

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORED UNKNOWN X-801	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 162
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED UNKNOWN X-793	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 158

SIGNATURE OF PERSON PREPARING REPORT <i>R. Gilbert</i> R. GILBERT, Adm Asst	SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>Lucio S Panopio Jr.</i> LUCIO S PANOPIO, Jr. 2d Lt., INF
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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.

Incl 647

Section 3. UNIDENTIFIED REMAINS:


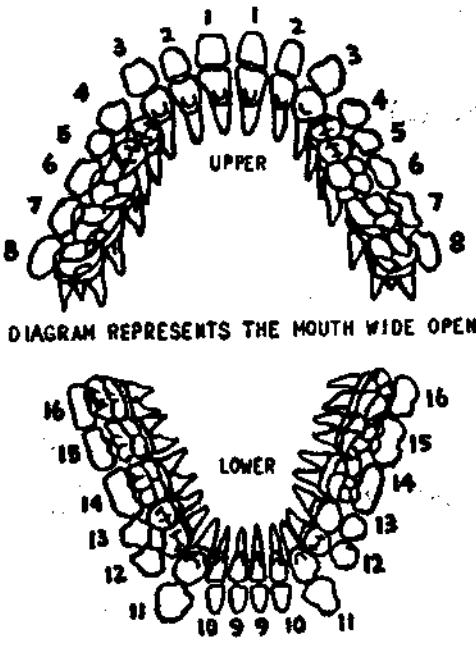




INSTRUCTIONS:

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


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

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
WEAPON AND SERIAL No.		LAUNDRY MARKS		WHERE BODY WAS BURIED OR FOUND

OTHER IDENTIFICATION CLUES

FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER</p> <p>LOWER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
CAVITIES	 <p>CAVITY DECAYED</p>	
MISSING TEETH	 <p>TOOTH MISSING</p>	
CROWNED TEETH	 <p>PORCELAIN CROWN GOLD CROWN</p>	
BRIDGE WORK	 <p>GOLD BRIDGE</p>	

FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY



REMARKS:

Identification Check List and Dental chart accomplished.

24 NOV 1947

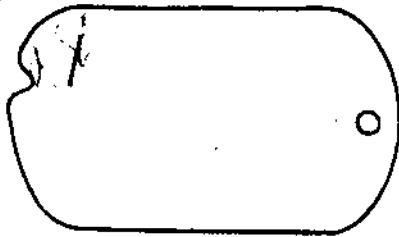
RESTRICTED U-0

U-1473

WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)REPORT OF INTERMENT
(AR 30-1810 and AR 30-1815)

DATE OF REPORT

18 January 1946

Imprint Identification Tag If Possible.
DO NOT TYPE

Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)

UNKNOWN X - 317

SERIAL NO.

GRADE

ORGANIZATION

BRANCH OF SERVICE

RACE

RELIGION

IF OTHER THAN U. S. DEAD, GIVE
NAME OF COUNTRY

PLACE OF DEATH

CAUSE OF DEATH

DATE OF DEATH

EMERGENCY ADDRESSEE (Name, relationship, and address)

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

None

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

WERE SUBSTITUTE TAGS PROVIDED?(Yes or no)

Yes (2)

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

Incl 687

None

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

USAF Cemetery Manila No. 2, Luzon, P. I.

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
22 Dec. 1945	0900	Shelter Half	Cross	2	12	1452

WAS THIS A REBURIAL?
(Yes or no)

Yes

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

USAF Cemetery Ft. Wm. McKinley, Luzon, P. I.

PLOT No.

ROW No.

GRAVE No.

0

4

5

TYPE OF RELIGIOUS CEREMONY

PERSON CONDUCTING BURIAL RITES

IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY

IDENTIFICATION TAG BURIED WITH BODY (Yes or no)

Yes

IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)

Yes

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

UNKNOWN X - 315

RANK

SERIAL NO.

ORGANIZATION

GRAVE No.

1451

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

UNKNOWN X - 314

RANK

SERIAL NO.

ORGANIZATION

GRAVE No.

1453

SIGNATURE OF PERSON PREPARING 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 through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.

RESTRICTED

16-45997-1

Section 3.—UNIDENTIFIED REMAINS.

INSTRUCTIONS:

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

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

27 FEB 1946

LEFT
LITTLE FINGER

LEFT
RING FINGER

LEFT
MIDDLE FINGER

LEFT
INDEX FINGER

LEFT
THUMB

RIGHT
THUMB

RIGHT
INDEX FINGER

RIGHT
MIDDLE FINGER


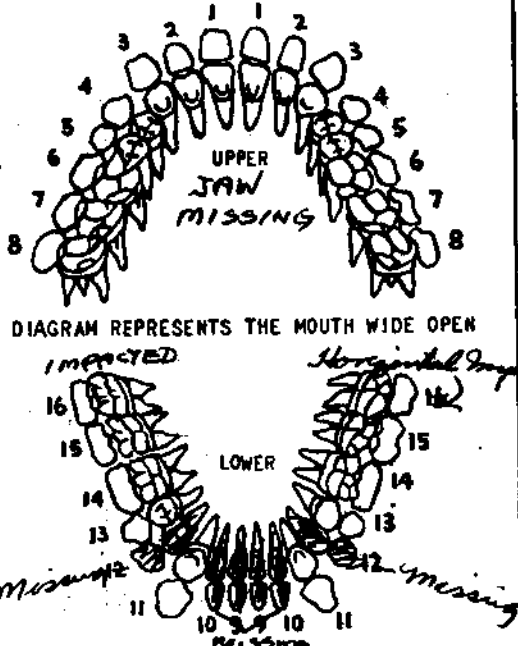




RIGHT
RING FINGER

RIGHT
LITTLE FINGER

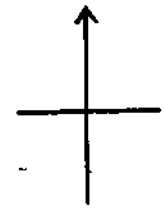
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
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WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
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OTHER IDENTIFICATION CLUES

FILLINGS	 SILVER FILLING GOLD FILLING	
CAVITIES	 CAVITY DECAYED	
MISSING TEETH	 TOOTH MISSING	
CROWNED TEETH	 PORCELAIN CROWN GOLD CROWN	
BRIDGE WORK	 GOLD BRIDGE	

FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY



REMARKS:

Burial bottle found with body but contents destroyed.