293

Unknown X-342 USAF Cem Manila, #2, P.I. associated with data for Captain John A.E. Bergstrom, 0-260 949

Reference is made to attached anthropologist's report of examination of remains designated X-342 Manila #2., P.I. Inasmuch as the examination failed to reveal any additional identifying data for conclusive association with records for Captain John A.E. Bergstrom, it is recommended that the remains revert to unidentifiable status and Captain Bergstrom's status remain nonrecoverable.

J. C. MacFARLAND

QMC Identification Branch Division, OQMG. Memorial

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Gladys Reynolds 10 Sept 52 X-827 (Formerly X-342) Associated with Data for Bergstrom, John A.E. 0-260949

- 1. General Condition: Skeletal, no tissue. Skull and mandible good, pelvis and scapulae very fragmentary, limb bones fair. Vertebral column incomplete with only 22 elements and fragmentary, but cervicals #1-5 are present and atlas fits cranial base. Cranial--post-cranial association appears to be very probable.
 - 2. Co-mingling: No evidence of such.
- 3. Age: Cranial: Sagittal 1/2 open, coronal 1/4 open; lambdoid open, 25-30 years. Pelvic: No data available and same for clavicle.
- 4. Stature: Rollet 70-3/4", Krogman $69\frac{1}{2}$ ". Based on right femur, tibia and humerus.
- 5. Dentition: See Form 569 dated 28 April 52. #16 is absent and apparently was never formed.
 - 6. Hair Color: No evidence.
 - 7. Race: White.
- 8. Conclusions and Recommendations: Form 371 data for Bergstrom are age at death 35 years, stature 73°, race white and dental information. With the limited information available for an age estimate, the condition described could occur in the age period 30-35 years, but agreement with Bergstrom is only partial. Stature estimates are in disagreement, race is in agreement and dental comparison appears to be favorable. Consequently, in my opinion, identification of these remains is inconclusive primarily on the basis of the noted evidence available.

Theodore D. McCown

Professor of Anthropology

QUOTE 293 GRS Far Hast

MBJMT: Identification of WorldWar II Becommed

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: Gemanding Officer
American Graves Registration Service
- Philosm Sone
APO 900, e/o Postmester
San Francisco, California

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

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QMGRT 293 GRS Far Bast SUBJECT: Identification of World War II Deceased 13 February 1950

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

FOR THE GUARTER-ASTER GENERAL:

T. H. 1972 Lt. Colonel, (FC Memorial Division

- N. McLaurin; dal
- L. M. White
- J. Windsor

INATAGARDERS ADDRIGAN GRAVES REGISTRATION SERVICE ETTIANE ROSE

物理院 拉雪鸭

APO 900

SENJECT: Unicentifiable Descript

JAN NY 1980

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The Quarternatur Conord Repartment of the Assy Suchington RG, R. G. ATRI: Dimorial Division

1. In accordance with the provisions of your letter, file GMSU 203, GMS (Mar Mast), dated 17 September 1946, cubject: Secolution of Gases of Unidentified Decembed, the following Unident remains, presently stored at AGRS Homestons, Manila F.I., have been processed by the Control Identification Laboratory and considered "Unidentification" by reason of lack of wefficient identifying dates

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3. Formunded berweith, for your consideration, are now GIC Forms 1844 for the above-mentioned Dalmanne.

FOR THE SOMEANDING OFFICIEN:

33 Incls SIG Forms 1046 w/Cortificates of Unidentifiability fof John Angels JOHN SHIPUXA Let 14., Infantry Adjusemb

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HEADQUARTERS PHILOCM ZONE AMERICAN GRAVES REGISTRATION SERVICE

27 Dec 1949 Date

SUBJECT: Unidentifiable Remains

TO : The Quartermaster

Washington 25, D. C. Attn: Memorial Division

The records pertaining to Unknown X-342, Plot 2, Row 12, Grave 1550, 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:

. B. McNEMAR Captain, QMC

tch: Form 10//

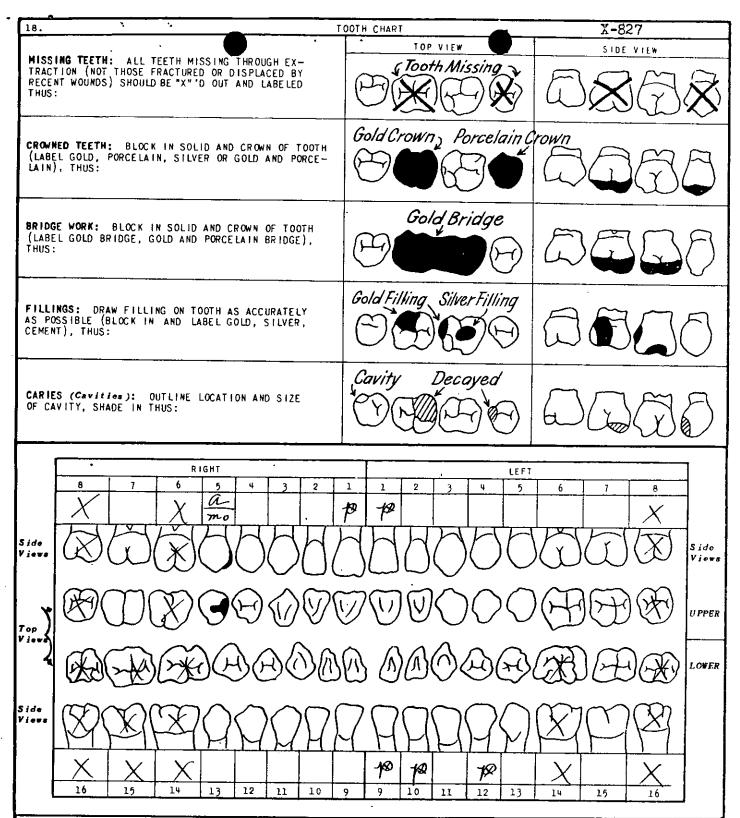
Attch: Form 1044

13 Feb-50

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	IDENTIFE	CATION D	ATA			
1. REMAINS OF UNKNOWN					2. DATE OF RE	E PORT
UNKNOWN X-827	(Formerly UNK X-342 M	Manila <u>#2)</u>			18 Jan	' 50
3. NAME OF CEMETERY	<u> </u>			6. GRAVE	7. D/	ATE OF
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"UNDENTIFIABLE" "BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"



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."

"UNIDENTIFIABLE"

TRY REASON OF LACK OF SUFFICIENT IDENTIFYING DATMER, Identification Section

Estimated height: 5' 10½".

20

MASS BURIAL CERTIFICATE (IF APPLICABLE)
(Wherein segregation 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 identification tags, personal effects or any other means of identification found with remains.

Circumference of skull - $20\frac{1}{2}$ inches.

Estimated weight of remains - 8 lbs.

"UNIDENTIFIABLE"

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

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

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

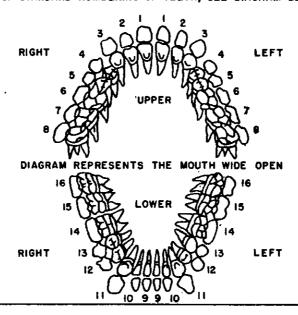
PAUL R NICHOLS Chief, Identification Section SIGNATURE

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INSTRUCTIONS:

- L 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 GROWNS, 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:

SIGNATURE OF PERSON WHO PREPARED CHART

JOSEPH D MURPHY, PVT.

It (19) Gir Cuffini DPUSUR

VERNIFIED BY GREAT OFFICER

LT.(jg) J. A. RUFFINI, DC; USNR NAME AND RANK TYPED OR PRINTED

CIP, USAF Cem.Manila No.2, Luzon, P.I.

10 July 47

PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

DATE

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



IDENTIFICATION CHECK LIST

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

٠,		
		Unknown X 342-A
		Cemetery USAF Cem. Manila No.2
		Plot 2 Row 12 Grave 1550
Ì.	Arrived at cemetery (Hour) (Date)	
2.	Place of death	
	(Name of closest town)	(Coordinates and letter Prefix, maps)
	(Sheet, scale and serials used)	
3.	Remains recovered or disinterred by USAE Co	om. Manila No. 2, Iuzon, P. I. (Name and organization)
4.	Evacuated to Cemetery by	(Name and organization)
_		
5.	Description of clothing and equipment: (if clothes	do not fit, obtain size from body measurements)
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	Markings Sizes	color, wear, tear, repairs, etc.
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	Overcoat	
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	Mackinaw	
	Sweater	
-	Jacket, HBT	
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Evidence	of healed fractures	
		(Nose, arms, legs, elc.)
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NOTE: U	Ise attached charts "A" and "B" to	indicate parts not received.
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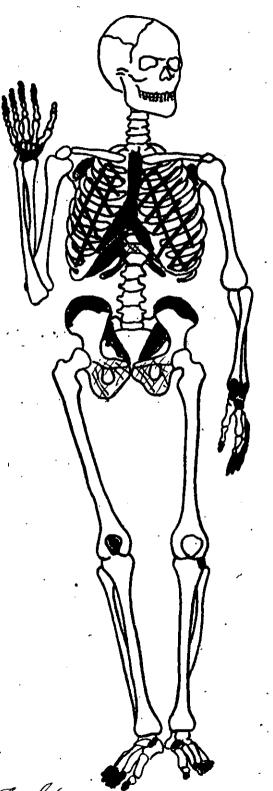
X-242-A

7.	Have finger	prints been placed	on Report of Intern	nent? No	(Yes-no)	
	If not, expla	Due to cond	dition of rem	nains.		. 75.
3. ••	Has tooth cl	hart been prepared?	Yes (Yes-no)	If not, explain	·	
).	Remarks	Estimated He	eight 6 ft.]	. 1/8 inche	s. While	processing
		extra portic	on of mandib	<u>e found wi</u>	th remain	s. See
		X-342-B. (Re	fer to UNKNO	WN X-342-B.	.)	•
	14000000000000000000000000000000000000		1			•
	pp.,	·	*	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	:>	
					·	,
		I have personally vorded to the best o		of subject decea	ised and all re	esulting information
					N .	
	•			: Elle	dul	600-
				ANDR	Ew S ROBS	ON
•			•	· •	(Officer's Name)
	• .			Capt	. Q	MC .
			•	Rank	***************************************	Service
			•	CIP, AGRS	, FEZ, AP	0 707
			•		(Organization	1)

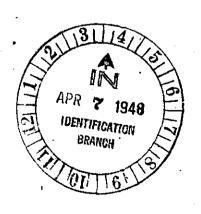
X-342-A

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



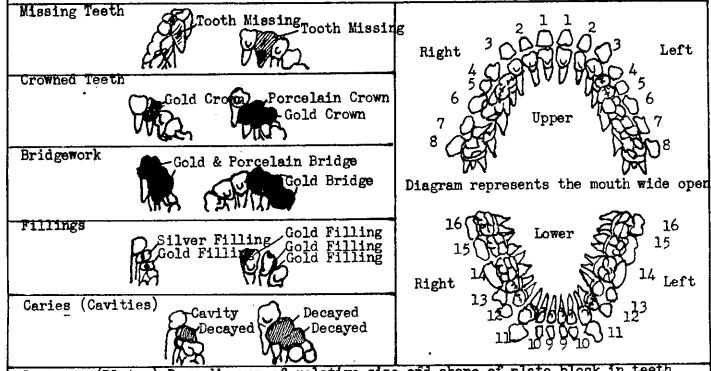
Bones in state of Jeca, CHART "A"



/rta							
OMOForm 1044 Rev. I Apr. 1945	RESTRICTED	Ate					
REPORT OF	DISINTERMENT FOR IDENTIFICATION	14 J	uly 47				
1. Remains of (Name)		Serial Number					
·	X-342-A		*				
	Organization						
.Name, Number and	Location of Cemetery	Plot	Row	Grave No.			
USAF Cen	netery Manila No. 2, Luzon, P.I.	2	12	1550			
2.Date of Disinter		- 	* · · · · · · · · · · · · · · · · · · ·	1 24			
·				•			
3.Report as to Nat	ture of Original Burial and Condition o	f Body Upon	Disinter	ment.			
	•		•				
		•					
		•					
	Skeletal Remains Only.		•				
				•			
·							
/ What Identificat	tion Found at Time of Disinterment: On	Marker					
dina identifica	MATERIAL WOLLD OF PERSONNELLY OF						
	One (1) Substitute						
		<u> </u>	<u></u>				
On Remains	5 / A N						
· ·	One (1) Substitute						
What Identificat	tion Used Upon Reinterment; On Marker						
	One (1) S ubstitute						
On Remains				1			
	One (1) Substitute						
	one (1) babbataae						
5.Signature of Off	Ficer Surpervieling Dieinterment and Re-	nterment.		 			
>*oremonie or orr	WARD C STEPHENSON, 1ST L						
	WARD C STEPHENSON, IST L	T., QMC					

INSTRUCTIONS FOR PROPER MARKINGS ON DENTAL CHART

1. Give all information and description on dental chart as nearly correct as the condition of the body will allow. There are 32 teeth to be accounted for, as shown by ne numbers on the chart. Beginning at the middle line in both upper and lower jaws the teeth are arranged symmetrically on either side and classed as incisors (cutting) teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: lost teeth, crowned teeth, bridgework, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.



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".

Remarks

3 · ·			RE						
WD QMC Form 1042 Rev. 1 Apr. 1945		REPORT OF	INTERN	IENT .	Da	te of Report	:		
(Supersedes GRS Form	1)	(AR 30-1810 a				FEB 24	1052		
Imprint Identificat	ion Tag If	SECTION 1. IDENTIFI	CATION		. !	ILD C.	<u>t (733 -</u>		
Possible. DO NO		Name (Last, First, Middle In	itia!)		Ser	ial Number	-		
	file.	UNKNOWN X-342 (M	anila Mau						
(.	162112	USAF Cem. Manila	#2, P. I			Unknown	1		
		Gradie 2/1	Organizatio	Val # 2	A Bri	Branch of Service			
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1 soll					14 04 5 - 11 41	OTERIO PA	1		
Eliza,		/ Race	Religion			han U.S.Do e of Countr			
"		Unknown	Un	known					
Place of Death		Cause of Death	Cause of Death						
Unknown		Unkn	own			Unknown	a		
Emergency Addressee (Name, Relatio								
		None	ı						
Identification Tags Four	nd on Body	If No Tags Found on Body,		ns of Identification. If	Unidentified				
(1, 2, or None) None		Fill in Section 3 on Reverse	•						
Morie	`	מדאוו	ENTIFIABL	.e					
Were Substitute Tags P (Yes or No)	rovided	01110	-M-1-11-11-11-11-11-11-11-11-11-11-11-11						
Yes									
List Personal Effects Fo	ound on Body	and Disposition of Same							
		•							
		27							
		None	. '						
						•			
OFOTION O DUDIN	18 15	nan in established cemetery f		and was accadingly					
Name, Number, Coordin			ullish sketch	and map coordinate					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					•				
	1	. S. M. C. Fort Will			Plot No.	Row No.	Grave No.		
Date-of Burial	Hour	Buried in (Shroud, Blanke of other)	t, or name	Type of Grave Marker	100000	1.04 140.	G. ave No.		
		Final Type Cas	ket		1				
24 Feb 53	1400	in the state of th	and instant of the	Reg Cross	N N	5	100		
Was This a Re-Burial (Yes or No)	ITA Re-Bu	rial, Indicate Name, Number, Co	ordinates of Pr	evious Cemetery, and	Plot No.	Row No.	Grave No.		
Yes	US.	AF Cemetery Manila #	2, P. I.		2	12	1550		
Type of Religious	 	nducting Burial Rites	.If Identifica	ition Tags Not Used, D		tification '			
Ceremony			Data and C	ontainers Buried with	Body		-8		
				Pile	•		r.		
Identification Tag Burio With Body (Yes or No)	d	dentification Tag Attached o Marker (Yes or No)		RECORDS	AMOTAT	20	ı		
Yes		Yes		DATE	apr 1	23 PA			
		· · · · · · · · · · · · · · · · · · ·	<u> </u>	NAME 13	newson		ř		
Body Buried on Deceas	ed Left, Nami	e (Last, First, Middle Initial)	Rank	Serial Witnesser	Owniza	w. Div	Trave No.		
Jones, Clarence	F.		S Sgt	6911487	_	N	5 99		
Body Buried on Deceas	ed Right, Nar	ne (Last, First, Middle Initial)	Rank	Serial Number	Organiza	tion C	Grave No.		
Vacant		·							
Signature of Person Pre	paring Repor	t	Signature o	of GRS Officer Verifying	a Repert	 -J			
DAVISON ** **	OTTANT OF	/a_+ 040	FREDERIC B. TOOMOTH, 1st Lt., QMC						
RAYMOND H. TAN			FREDE			-			
General through Hdq. (RS Officer.	ned original for US and allied de Copies for retention in theater a	an, signed orig s prescribed by	theater commander.	enemy dead	, to the Qu	ar termaster		
well to	Q "	REST	RICTED						
NILL Y	•								

				050710							<u> </u>		
			<u>E</u>	SECTIO		NTIFIED	REMAII	NS		<i></i>			
•			itti T	Instructions									
			Left Little Finger	(a)	Great car	re will be	e taken to	o record f	the most min	nute clues	for the fut	ure ide	ntity of
			t ing	"Other"	" such as sh	hoe size, :	social sect	urity num	aracteristics ber; position	n of body fo	nd any oun ound in airp	er ciue Janes, '	s under vehicles
			çer	and tan	ks; and ser	rial numb	ers of air	planes, \mathbf{v}_{ϵ}	ehicles and ta	ınks.	Junu	Teaser,	AGHTOTON
				(b)	A fingerp	orint, or p	prints, áre	e the mos	st valuable o	of all clues	: Imprint :	all fing	ers and
			ਾ ਸ਼ਰ	thumbs	s in the cha	irt at left.	i, or as ma	iny as pos	ssible. If no f	fingerprints	s or prints o	an be s	secured.
•			in.	the con-	idition of ea	ach and e	every toot	th will be	indicated or aplished if or	i the tooth	chart in ac	ecordan	ice with
			Left g Fin	u	4 bero		it win not	De accom	ipiisneu ii 🗤	le or more	nngerpring	s are o	ecureu.
	:.	-	Left Ring Finger	Height	Weight	Color o	of Eyes	Color of	Hair	Birthmar	ks, Scars or	Tattoos	
			çer										.+
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			Z	Weapon and	d Serial Num	nber	Laundry	Mark		Where Bo	ody Was Bur	ied or F	ound
	*		lidć		•								
			Left Middle Finger										
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			[nd]										
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			Left Index Finger	Fillings					1			:	•
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			Right Thumb		(100	Tooth Miss	ing		/ 	* ******	• •	
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			Right Index Finger	1	1	ALL S	Gold Crown	1 !	7	KIK, L	ower	H	
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			Right () Middle Finger		· MILE		1	!					
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			Right Ring Finger									1-	_
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WD QMC FORM 1042	REPORT OF	INTERMENT	STURAGE	DATE OF	REPORT		
(Rev. I Apr. 1945). (Supersedes GRS Form 1)	(AR 30-1810 ar	7.5	17 Nov 47.				
Imprint Identification Tag If Possible.	Section 1.—IDENTIFICATION.			<u> </u>	MOV 4	• •	
DO NOT TYPE	NAME (Last, first, middle initial)			SERIAL N			
	UHKNOWN X- 82	7 (Former	ly UNK X-		,		
l (342-A USAF Cer		v	Un	Unknown		
[2]	GRADE	ORGANIZATION		BRANCH	OF SERVICE		
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\	Unknown	Unkn	own	LIE OTUER TURN	U.C. DEAD C	· · · · · · · · · · · · · · · · · · ·	
	KACE	RELIGION		IF OTHER THAN NAME OF COU	U. S. DEAD, G NTRY	14 A E	
		Unkn	own	1			
PLACE OF DEATH	CAUSE OF DEATH			DATE OF	DEATH		
Unknown	Unknown			Un	known		
EMERGENCY ADDRESSEE (Name, relationship, a	nd address)			•	•		
linka oum			1	i	•		
Unknown IDENTIFICATION TAGS FOUND ON BODY	IF NO TAGS FOUND ON BODY, I	DESCRIBE MEANS O	E IDENTIFICATION (I	famidantified fill is	1 analina a an e	eneros)	
(1,.2, or none)	IF NO TAGS FOUND ON DODT, I	DESCRIBE MEANS O	I IDENTIFICATION (I,	, ancaemijieu, jaa ii	i section a on n	eversey	
None	See Remarks	- !					
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)		•		•			
i.	;	•					
Yes (2)	1				<u>·</u>		
LIST PERSONAL EFFECTS FOUND ON BODY AN	D DISPOSITION OF SAME	~	•				
	Mana						
	.None						
	•						
<u> </u>	<u>* </u>	<u> </u>		<u> </u>			
Section 2.—BURIAL. If other than in estai	blished cometery, furnish sketc	h and map coord.	inates on reverse.				
NAME, NUMBER, COORDINATES, AND LOCATIO		USOLEUM, N	TECH A CHAR				
	AMRS MA	OZOFERW' K	ANLAFI				
DATE OF BURIAL HOUR	BURIED IN (Shroud, blanket, or n	ame of other)	TYPE OF GRAVE			AVE No.	
STORAGE	STORED		MARKER	PANGER		4464	
16 Oct 47 1300	Casket	<u> </u>	None	812	B 3	356	
WAS THIS A REBURIAL? (Yes or no) RESTORED	INDICATE NAME, NUMBER, COORE	DINATES OF PREVIO	OUS CEMETERY, AND L				
		ugon P	۲ ٠			RAVE No.	
	CTING BURIAL RITES	 	ON TAGS NOT USED.	· · · · · · · · · · · · · · · · · · ·		1550.	
CEREMONY	•	CONTAINERS B	JRIED WITH BODY	-			
100 100 100 100 100 100 100 100 100 100	- 111			-			
	TIFICATION TAG ATTACHED TO RKER (Yes or no)		٠				
Yes	Yes						
BODY BURIED ON DECEASED LEFT, NAME (Las	t, first, middle initial)	RANK .	SERIAL NO.	ORGANIZATION	GRAVE NO		
, пикир. и х- 830				·	358		
BODY BURIED ON DECEASED RIGHT, NAME (LA	ısı, firsi, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE NO		
DUPREE, William A	•	Pfc.	6399637	Co B,35t	354		
SIGNATURE OF PERSON PREPARING REPORT	,	`	GRS OFFICER VERIFYIN	IG REPORT	Ula -		
white fall	3	1 D. H. 20	inds				
Wm. R. GILBERT, A	im. Asst	D. D. HINDS, 2nd Lt., QMC					
DISTRIBUTION OF REPORT: Signed origin	nal for II. S. and allied dead. si	aned original and	one copy for enemy	dead, to the Qu	artermaster :	General	

DAIC 690 ..

_	Section 3.—UNIDENTIFIED REMAINS.	
LEFT LITTLE: FINGER	INSTRUCTIONS: (a) Great care will be taken to record the most minute clues for the future identity of unident mains. Fill in anatomical characteristics below, and any other clues under. "Other," such as a social security number; position of body found in airplanes, vehicles, and tanks; and serial number planes, vehicles, and tanks. (b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thum chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of the chart at left, or as many as possible.	she in tha
RING	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 was accomplished if one or more fingerprints are secured.	vill not be
LEFT RING FINGER	HEIGHT WEIGHT COLOR OF EYES COLOR OF HAIR BIRTHMARKS, SCARS, OR TATTOOS	
	WEAPON AND SERIAL NO. LAUNDRY MARKS WHERE BODY WAS BURIED OR FOU	JND
MIDDLE		•
LEFT MIDDLE FINGER	OTHER IDENTIFICATION CLUES	
LEFT INDEX FINGER		
GER	FILLINGS SILVER FILLING GOLD FILLING 4 3 2 0 0 0 0 3	
. + <u> </u>	CAVITIES CAVITY 5	:
THOMB	DECAVED UPPER 16	7
RIGHT Тнимв	DIAGRAM REPRESENTS THE MOUTH WIDE	OPEN
RIGHT INDEX FINGER	PORCELAIN CROWN GOLD CROWN 15 LOWER 14 BRIDGE WORK 13 13 13	
da a		
<u>×</u>	10 9 9 10 11	
RIGHT MIDDLE FINGER	FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETER	RY
RIGHT RING FINGER	REMARKS:	
RIGHT LITTLE FINGER	Identification Check List and Identification Dental Chart previously accomplished.	. 5 <u>-</u>

WD QMC FORM 1042 (Rev. 1 Apr. 1945)	C	ORR	ECTED REPORT OF	INTERMEN	T	DAT	E OF REPORT	-		
(Supersedes GRS Form 1)	2		(AR 30-1810 ar				23 Մա1	y 47		
· Imprint Identification		ible. ·	Section 1.—IDENTIFICATION	b 2			- (
DO NOT TY	PE		NAME (Last, first, middle initial)	NAME (Last, first, middle initial) <u>UNKNOWN X-342-AM</u> Formerly Unknown						
	•			wn						
		- \	 / 	em. Mani	1a #2)		•			
1-34.		~ 1	GRADE	ORGANIZATION		BRA	NCH OF SERV	/ICE		
7-34	2	91				İ				
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	•		DACE	DELIGION.		1.=				
			RACE .	RELIGION			THAN/U.S. DE COUNTRY	AD, GIVE		
PLACE OF DEATH	 -		CAUSE OF DEATH		-		E OF DEATH			
	_				·	-				
EMERGENCY ADDRESSEE (N	ame, relations	ship, an	d address)							
·					•		•			
IDENTIFICATION TAGS FOUN (1, 2, or none)	ID ON BODY		IF NO TAGS FOUND ON BODY, D	ESCRIBE MEANS	OF IDENTIFICATION (I	f unidentified,	fill in section !	on reverse)		
None			ļ.							
WERE SUBSTITUTE TAGS PRO	WIDEDZĆV		See	ramanka	on reverse	ahia				
WERE SUBSTITUTE TAGS PRO	NIDEO:(1 es	or no)	, Dee .	enal Ro	on reverse	STOR.		, _		
Yes (2)	}				O					
LIST PERSONAL EFFECTS FO	UND ON BOI	DY AND	DISPOSITION OF SAME			·		<u>. </u>		
			\ £							
سوم د		- ,	None							
			•••	•		• ,-		• • •		
Section 2—RUPIAL I/ of	her than in	ostobi	lished cemetery, furnish sketch			<u> </u>				
NAME, NUMBER, COORDINAT				and map coord	mates on reverse.					
Trans, Rombert, Cootton	LO, AND LO	JAN ON	OF CEMETER?			-		1		
. ,			USAF Cemetery	Manila :	#2. Luzon.	P.I.		/		
DATE OF BURIAL	HOUR	-	BURIED IN (Shroud, blanket, or no		TYPE OF GRAVE	PLOT No.	ROW No.	GRAVE No.		
			•	_	MARKER			1		
23 Dec 45	0930		Shelter Hal	f	Cross		12	1550		
WAS THIS A REBURIAL? (Yes or no)	IF A REBU	RÎAL, I	NDICATE NAME, NUMBER, COORD	INATES OF PREVI	OUS CEMETERY, AND L	OCATION OF	GRAVE			
Yes	TICAR		m Et Stateanh	uma Tua	an DT	PLOT No.	ROW No.	GRAVE No.		
	 		m. Ft. Stotsenb			D D	9	<u> </u>		
TYPE OF RELIGIOUS CEREMONY	PERSON C	ONDUC	TING BURIAL RITES	CONTAINERS B	ON TAGS NOT USED, URIED WITH BODY	DESCRIBE ID	ENTIFICATIO	N DATA AND		
					•					
IDENTIFICATION TAG BURIER	WITH	IDENT	IFICATION TAG ATTACHED TO		•		•			
BODY (Yes or no)		MAR	KER (Yes or no)							
Yes			Yes							
BODY BURIED ON DECEASED	LEFT, NAME	(Last,	first, middle initial)	RANK	SERIAL No.	ORGANIZAT	ION GRAV	/E No.		
			m. Manila #2)			_	1	549		
BODY BURIED ON DECEASED	RIGHT, NAM	IE (Las:	t, first, middle initial)	RANK	SERIAL No.	ORGANIZAT	ION GRAV	/E No.		
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BANDLE! IAI				Supplied to the supplied to th	1,10304099	<u> </u>	1	551		
SIGNATURE OF PERSON PREF	ARING REPO	نگ لیدا	Lan	SIGNATURE OF C	GRS OFFICER-VERIFYIN	G'REPORT	\supset			
AL S. PADA	YHAG,	SGT	·,/GRS	MARD C	STEPAENSO	N, IST	LT.,	QLIC		
DISTRIBUTION OF REPORT	Signed	origina Copie	al for U.S. and allied dead, signs for retention in theater as pr	ned original and	one copy for enemy	dead, to the	Quarterma	ter General		
		• •					•			

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				<u>_</u>	,	<u> </u>				
	E	Section 3.—	JNIDENTIFIE	REMAINS		<u>-</u>		-	<u> </u>	
	LEFT LITTLE FINGER	mains. Fil social secur planes, veh (b) A chart at lef	eat care will I in anatomi ity number; icles, and tai fingerprint, o	cal charac position o nks. or prints, a	teristics to f body four re the mode. If no	elow, and ind in airp st valuab fingerori	d any other c planes, vehicle le of all clues int or prints ca	for the future ic dues under 'O es, and tanks; a Imprint all f an be secured, t	ther," such as nd serial numb ingers and thur he condition of	shoe size, ers of air- nbs in the each and
	Z	every tooth	will be indic ed if one or r	ated on th	e tooth ch	art in acc	ordance with	diagram below.	·Tooth chart v	will not be
	LEFT RING FINGER	HEIGHT WEIGHT COLOR OF EYES COLOR OF HAIR			BIRTHMARKS, SCARS, OR TATTOOS					
		WEAPON AND	SERIAL NO.	<u> </u>	LAUNDRY	MARKS		WHERE BODY W	AS BURIED OR FO	UND
,	Midore									,
	FINGER	OTHER IDENT	IFICATION CLI	ues '						
	INDE									
	LEFT INDEX FINGER	FILLING	S	SI SI	LVER FILL OLD FILLIN		3 2 0	2		
•				KA .			4	2017 F	1993 1990	
	LEFT	CAVITIES	S .	CAVITY			UPPER			57
	RIGHT THUMB	MISSING	TEETH		OTH MISSI	KG.	DIAGRAM	V REPRESENTS TI	HE MOUTH WIDE	OPEN
		CROWNED	TEETH (CELAIN C		16			16
	RIGHT INDEX FINGER	BRIDGE	}	Visit	DLD CROW		14	LOWE	14	
	HT INGER	BRIDGE			GOLD B	RIDGE	13		00012	
	MID	FURNISH SKE	TCH AND MAP	REFERENCE	E AND COOL	RDINATES I	FOR BURIAL IN	OTHER THAN EST	ABLISHED CEMET	ERY
	RIGHT MIDDLE FINGER								↑	-
	20							-342 wer		
12 AUG 1947	RIGHT RING FINGER		FEZ. dible Unknow	It wa was p: n X-3	s fou resen 42.	nd ou t tog Said	t'that ether w extra p	ation at extra po ith the ortion o	rtion of remains f mandib	'mán- of le
		REMARKS:	was de	signa	ted a	s Unk	nown X-	342 - B an	d buried	. in
	RIGHT LITTLE FINGER			nown 3				it does. esignate		

PATRIATION RECORDS BRANCH MEMORIAL DIVISION

FUIDENTIFICATION SECTION

IDENTIFICATION IMPOSSIBLE

NO CLUES

AT PRESENT THE

CATEGORY III CASE

			117		l pare	OF BERODY	
WD QMC FORM 1042 (Rev. 1 Apr. 1945)		REPORT OF	INTERMEN	Т	DATE	OF REPORT	
(Supersedes GRS Form 1)		(AR 30-1810 ar	21 Jan. 46				
Imprint Identification 7	and Id Donaible	T					
Imprint Identification T DO NOT TY		Section 1.—IDENTIFICATION. NAME (Last, first, middle initial)			SERJA		
		Think (Lines, press, meanic testical)			JERRIA	L 110.	
(styl.	/	UNKNOWN_#	342 (Cem.	Manila #2)		,	
78° 1	. \	GRADE	ORGANIZATION		BRAN	CH OF SERVI	ICE
(. 0						
\ ,	.]						
	/	RACE	RELIGION		IF OTHER TH	AN U.S. DEA	D, GIVE
					NAME OF C	לאומטכ	
·							
PLACE OF DEATH		CAUSE OF DEATH			DATE	OF DEATH	
· ·	•						
ENERGENCY ADDRESSE (AL		<u> </u>		-			
EMERGENCY ADDRESSEE (Na	me, retationship, at	rd address)					
•		•				-	
IDENTIFICATION TAGS FOUN	D ON BODY	IF NO TAGS FOUND ON BODY, D	ESCRIBE MEANS (OF IDENTIFICATION (7	funidentified fi	Il in section •	om ronerea)
(1, 2, or none)				, inclusion (1	j unidemijica, ji	t th section 3	On reverse;
None				•	•		
WERE SUBSTITUTE TAGS PRO	VIDED?(Yes or no)	-					
Yes (2	2)	: ا					
LIST PERSONAL EFFECTS FOL	JND ON BODY ANI	D DISPOSITION OF SAME					
Jul 716			-				
		<u> </u>		•			
		N	one				. •
<u> </u>		· .					
Section 2.—BURIAL. If oth	er than in estab	lished cemetery, furnish sketcl	and map coord	inates on reverse.			
NAME, NUMBER, COORDINATI	ES, AND LOCATION	N OF CEMETERY	•				
	Us	SAF Cemetery Manila	#2. Tuzon	. Ъ. Т.			
	,			.			
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or no	ime of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
23 pec. 45	0930	Shelter Hal:	f	cross	2	12	1550
WAS THIS A REBURIAL?	<u> </u>	INDICATE NAME, NUMBER, COORD		<u> </u>	OCATION OF G		
(Yes or no)	,	, , , , , , , , , , , , , , , , , , , ,		- * 1	PLOT No.	ROW No.	GRAVE No.
Yes	USAF Cen	etery Ft. Stotsenb	urg, Iuzon	. P. I.	D D	9	1
TYPE OF RELIGIOUS CEREMONY		TING BURIAL RITES	IF IDENTIFICATI	ON TAGS NOT USED.	DESCRIBE IDE	NTIFICATION	DATA AND
CEREMONT			CONTAINERS B	URIED WITH BODY	•		
						•	' · ·
IDENTIFICATION TAG BURIED BODY (Yes or no)		TIFICATION TAG ATTACHED TO RKER (Yes or no)	•		·		
				•			
Yes		Yes .			,		
BODY BURIED ON DECEASED	LEFT, NAME (Last	, first, middle initial)	RANK	SERIAL No.	ORGANIZATIO	N GRAVI	E No.
UNKNOW	N -x- 3/13	(Cem. Manila #2)					1549
		_ `	DANK	CERIAL NO	00041174710		
BODY BURIED ON DECEASED	MONT, NAME (La	or, pres, musice thuisal)	RANK ·	SERIAL No.	ORGANIZATIO	ON GRAV	E NO.
. BANDLE	MAN, Alfre	ođ · l		10304895	·	·	1551
SIGNATURE OF PERSON PREP			SIGNATURE OF G	RS OFFICER VERIFYIN	G REPORT	1	
700	11 das	rett :	ر. ک	m.more			
R. C. I	BARRETT, 1	r/4 GRS.	E.	M. MOORE, la	t Lt. QM	J.	
DISTRIBUTION OF REPORT	: Signed origin	nal for U.S. and allied dead, sig	ned original and	one copy for enamy	dead, to the	Quartermes	ter General
		es for retention in theater as p.			,		

Lul3/

		Section 3.—C	NIDENTIFIE	D REMAINS	 					
THE PINSER NING PI	LEFT FINGER	INSTRUCT (a) Green mains. Fil social secur planes, vehi	IONS: eat care will I in anatom ity number; cles, and ta	be taken ical charac ; position o nks.	to record to cteristics to if body four	elow, and Ind in airpl st valuable	any other olanes, vehicles	clues under ''Ot es, and tanks; ar s. Imprint all fi	entity of unidenting the control of the control of the control of the condition of ear Tooth chart will	of air-
IN THIS PINGER	LEFT RING FINGER	accomplishe HEIGHT	WEIGHT	COLOR O	erprints ar	coLOR OF	····		ARS, OR TATTOOS	
חושטב רוואסבת	MIDDLE FINGER	WEAPON AND		ues	LAUNDRY	MARKS		WHERE BODY WA	S BURIED OR FOUN	D
MUEA FINGER	LEFT INDEX FINGER	FILLINGS	3	Si	LVER FILL DLO FILLIN	ING G	<i>I</i>		9 8 3	
•	THUMB LEFT	CAVITIES			CAVITY DECAY	r S	A STATE OF THE STA	UPPER		8
i nomb	RIGHT	CROWNED			POTH MISSIN		D IAGRAM	REPRESENTS TH	E MOUTH WIDE O	PEN
T. L. LINGLA	RIGHT .	BRIOGE V	ORK .		OLD CROW	אינ או 	14	LOWER 12 HAAA 12 O OOO	- マガがきしゅん	Sockie Veale
HIDDE FINGER	RIGHT MIDDLE FINGER	FURNISH SKE	TCH AND MAP	REFERENCE	E AND COO!	RDINATES FO	OR BURIAL IN	OTHER THAN EST	ABLISHED CEMETER	na I
ANNO E DIVOCA	RIGHT RING FINGER	REMARKS:								-
* · · · · · · · · · · · · · · · · · · ·	RIGHT LITTLE FINGER	tag	Was fou	otago	could l	e foun	a on rem nothing	mainsone g printed o	blank 1. Do	