

QMGMT 293
 GRS Far East

9 August 1949

SUBJECT: Identification of World War II Deceased

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

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

Unknown X-619	, AGRS	Mausoleum	Manila,	formerly	X-150,	USAF	Com.,	Manila	#2
" X-631	"	"	"	"	"	X-144	"	Manila	#2
" X-632	"	"	"	"	"	X-145	"	Manila	#2
" X-433	"	"	"	"	"	X-235	"	"	#2
" X-437	"	"	"	"	"	X-290	"	"	#2
" X-800	"	"	"	"	"	X-515	"	"	#2
" X-841	"	"	"	"	"	X-359	"	"	#2
" X-3132	"	"	"	"	"	X-1019	"	"	#2
" X-3149	"	"	"	"	"	X-1025	"	"	#2
" X-3161	"	"	"	"	"	X-1033	"	"	#2
" X-3159	"	"	"	"	"	X-1036	"	"	#2
" X-3170	"	"	"	"	"	X-1047	"	"	#2
" X-2530	"	"	"	"	"	X-3024	"	"	#2
" X-2390	"	"	"	"	"	X-3110	"	"	#2
" X-2068	"	"	"	"	"	X-3191	"	"	#2
" X-2058	"	"	"	"	"	X-3211	"	"	#2
" X-1892	"	"	"	"	"	X-3246	"	"	#2
" X-1960	"	"	"	"	"	X-3303	"	"	#2
" X-1749	"	"	"	"	"	X-3350	"	"	#2
" X-1754	"	"	"	"	"	X-3355	"	"	#2
" X-1640	"	"	"	"	"	X-3461	"	"	#2
" X-1513	"	"	"	"	"	X-3515	"	"	#2
" X-1519	"	"	"	"	"	X-3521	"	"	#2
" X-1501	"	"	"	"	"	X-3632	"	"	#2
" X-1165	"	"	"	"	"	X-3758	"	"	#2
" X-1116	"	"	"	"	"	X-3824	"	"	#2
" X-1036	"	"	"	"	"	X-3872	"	"	#2
" X-1418	"	"	"	"	"	X-3983	"	"	#2
" X-1397	"	"	"	"	"	X-3990	"	"	#2

QMERT 293

GHS Far East

Ltr 9 August 1949

SUBJECT: Identification of World War II Deceased

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

FOR THE ACTING THE QUARTERMASTER GENERAL:

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

G. Reynolds: *pmr*
L. M. White
J. Windsor

HEADQUARTERS
PHILIPPINES COMMAND
UNITED STATES ARMY

GSGR 293.9

APO 707
21 JUL 1949

SUBJECT: Unidentifiable Remains

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

1. In accordance with the provisions of your letter, file QMGMU 293, GRS (Far East), dated 17 September 1948, subject: Resolution of Cases of Unidentified Deceased, the following unknown remains, presently stored at AGRS Mausoleum, Manila, P.I., have been processed by the Central Identification Laboratory and considered "Unidentifiable" by reason of lack of sufficient identifying data:

UNKNOWN	X-433	AGRS	Mslm	UNKNOWN	X-1640	AGRS	Mslm
"	X-437	"	"	"	X-1749	"	"
"	X-618	"	"	"	X-1754	"	"
"	X-631	"	"	"	X-1892	"	"
"	X-632	"	"	"	X-1960	"	"
"	X-800	"	"	"	X-2058	"	"
"	X-841	"	"	"	X-2068	"	"
"	X-1036	"	"	"	X-2390	"	"
"	X-1116	"	"	"	X-2530	"	"
"	X-1165	"	"	"	X-3148	"	"
"	X-1301	"	"	"	X-3159	"	"
"	X-1397	"	"	"	X-3161	"	"
"	X-1418	"	"	"	X-3170	"	"
"	X-1513	"	"	"	X-3182	"	"
"	X-1519	"	"	"	X-4099, Manila #2		

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

FOR THE COMMANDING GENERAL:

30 Incls:
QMC Forms 1044 w/certificates
of Unidentifiability

JOHN A. MARSZAL
1st Lt., AGD
Asst Adj Gen

/add

DISINTERMENT DIRECTIVE

1

Interred 15 July 1949
A 9 18 Ft. McKinley

Carl R. Mark
CARL R. H. MARK

Cemetery Superintendent
SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7747 00179

DATE
15 06 48
DAY MONTH YEAR

NAME		SERIAL NUMBER	RANK	ARM	DATE OF DEATH
UNKNOWN X - 000359				0	
CEMETERY					DISPOSITION OF REMAINS
USAF CEMETERY MANILA NO 2					0 7701 80 CODE DIST. PT.
PLOT	ROW	GRAVE	COUNTRY		CAUSE OF DEATH
2	12	1490	PHILIPPINE ISLANDS		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)
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SECTION C - DISINTERMENT AND IDENTIFICATION

NAME UNK X - 359 (Maus) UNK X - 841	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISINTERRED 21 Sept 48
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> 3 REMAINS <input checked="" type="checkbox"/> 1 MARKER	ORGANIZATION UNKNOWN	RELIGION	IDENTIFICATION VERIFIED BY FORREST G. BRADEN Embalmer NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL Shelter Half	CONDITION OF REMAINS Skeletal
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OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES

2 tags show - Unk X- 841 (Formerly X 359)

REMAINS PREPARED AND PLACED IN CASKET

DATE 21 Sept 48 BY FORREST G. BRADEN

CASKET SEALED BY FORREST G. BRADEN
EMBALMER (Signature) *Forrest G. Braden*
FORREST G. BRADEN

CASKET BOXED AND MARKED SHIPPING ADDRESS VERIFIED BY

DATE 21 Sept 48 BY HORACE L. ALLISON, Sgt., INF. HONORIO V. AURELIO, 1st Lt., INF.

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.

Honorio V. Aurelio
HONORIO V. AURELIO, 1st Lt., INF.
SIGNATURE OF GRS INSPECTOR

1 Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

11 AUG 1949
REPATRIATION
BRANCH
MEM. DIV.

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM AGRS MAUSOLEUM		TO FORT MCKINLEY MILITARY CEMETERY	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Carroll</i>	DATE 15 JUL 1949

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

FROM AGRS MAUSOLEUM		TO	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

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

7. SHIPPED

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

REPT. OF
 RECORDS
 SECTION

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE
APO 900

8 July 1949

Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 359, Plot 2,
Row 12, Grave 1490, USMC USAF Cem. Manila #2 have
been reviewed and it is the opinion of this office that insufficient
evidence is available to establish the identity of this deceased,
and that these remains should be classified as unidentifiable.

FOR THE COMMANDING OFFICER:


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

Attch: Form 1044

Received 2 Aug 49 OQMG
Not identifiable from
information presently
available

8-9-49
9, R. Reynolds

Incl #7

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-841 (Formerly UNK X-359 Manila #2)				2. DATE OF REPORT 14 July 49	
3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	812	B	369	DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT 185 lbs.	9. ESTIMATED HEIGHT 5'8"	10. COLOR OF HAIR UTD	11. RACE UNKNOWN
--	------------------------------------	---------------------------------	----------------------------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

NONE

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

UTD

14. WAS BODY BURNED? TO WHAT EXTENT?

YES NO

15. WAS BODY MANGLED? TO WHAT EXTENT?

YES NO

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

NONE

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)

NONE

"UNIDENTIFIABLE"

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

Incl. # 7²

18.

TOOTH CHART

	TOP VIEW	SIDE VIEW
<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>CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:</p>	<p>Gold Crown, Porcelain Crown</p>	
<p>BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:</p>	<p>Gold Bridge</p>	
<p>FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:</p>	<p>Gold Filling, Silver Filling</p>	
<p>CARIES (Cavities): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:</p>	<p>Cavity, Decayed</p>	

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

Impacted

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."

Portions of the maxilla from R1 - R8 and from L6 - L8 are missing.
Loose teeth are L6 and from R6 - R8. L16 is impacted.

"UNIDENTIFIABLE"

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

BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA

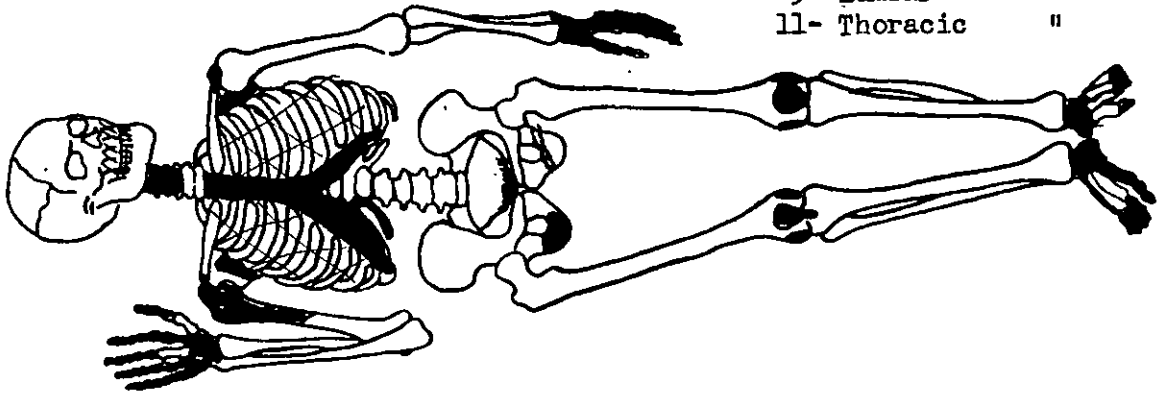
19. BLACK OUT PARTS OF BODY NOT RECORDED

Present:

2- Cervical Vertebrae

5- Lumbar "

11- Thoracic "



Estimated height: 5'8"

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 - 6-1/7 lbs.

Circumference of skull - 19 inches.

"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

J. J. McDERMOTT
 Laboratory Officer, CIP

SIGNATURE

IDENTIFICATION CHECK LIST

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

(Formerly UNK X-359, USAF
 Unknown X841 (Cem Manila #2, Luzon, P.I.
 Cemetery AGRS Mausoleum, Manila, P.I.
 Plot 812 ^{ANFER} Row ^{BA} ^{CR-PT} Grave 369

AGRS CIP Mausoleum

1. Arrived at cemetery 16 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 C M T No. 1
(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)

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

Belt, web
 Drawers, wool
 Drawers, cotton
 Leggings, wool
 Socks, cotton
 * Shoes (type)
 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 . Skeletal Chart attached

Age Height ^{Est.} 5'8" Weight ^{Est.} 185 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 (Color, setting, shape) Mustache (Color, size, shape) Beard or (Length, heavy)

Goatee / (Light, color, extent)

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

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

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

Teeth / **Tooth Chart attached**
(White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw / (Large, small, normal) Circumference of head in inches **19"** (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 / (Short, thick, long, slender, size of knuckles, missing fingers or joints)

Fingers / (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: Remains interred 23 Dec 45 USAF Cem Manila #2

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

9. Remarks ROI bottle received with remains but all information was destroyed. No I.D. tags and no personal effects found. All lower teeth are in perfect condition and remain intact. Weight of remains is estimated about 6-1/7 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/ E. F. Moriarty
(Officer's Name)

SP-6
Rank Service
A.G.R.S.
(Organization)

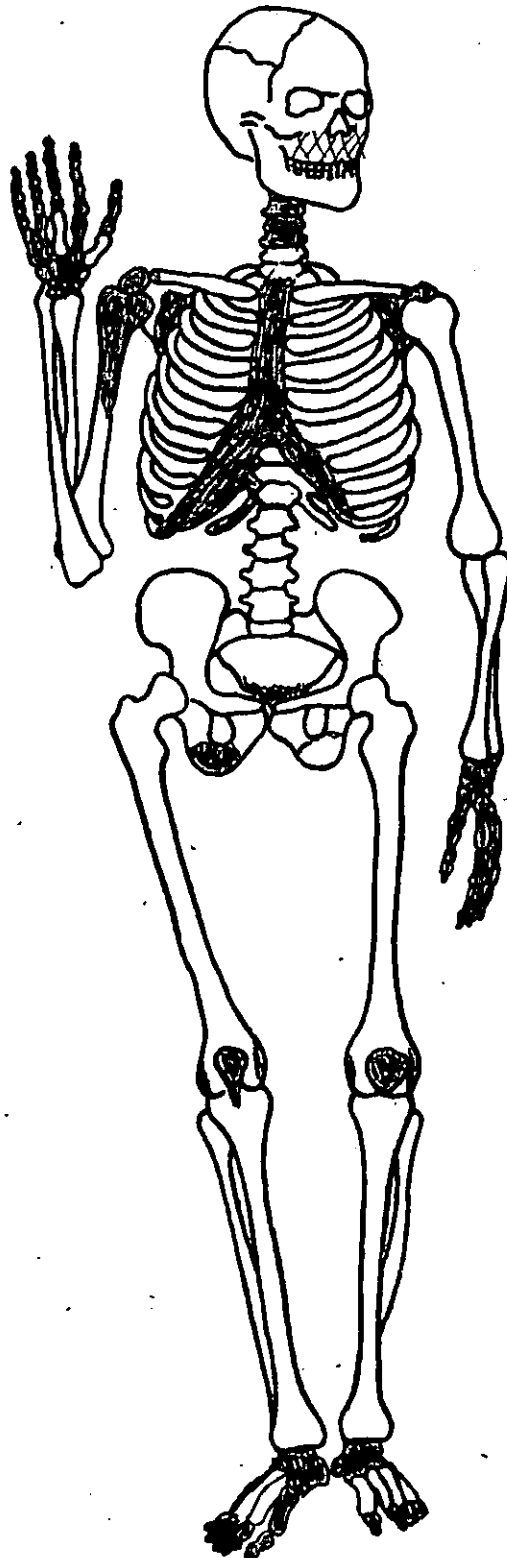
CERTIFIED TRUE COPY

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

SKELETAL CHART

X-841

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



28 Rib fragments
2-cervical } Vertebrae
5-lumbar }
11-thoracic }

X-841

IDENTIFICATION DENTAL CHART

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

16 Oct 47

DATE

(Formerly UNK X-359 USAF

UNKNOWN X-841 (Cem Manila #2, Luzon, P.I.) Unknown

Unknown

LAST NAME

FIRST

INITIAL

RANK

SERIAL NO.

Unknown

Unknown

UNIT

ORGANIZATION

Unknown

AGRS Mausoleum
Manila, P.I.

812

B

369

PLACE OF DEATH

PLACE OF BURIAL

PLOT

ROW

GRAVE NO.

MAXILLA DECOMPOSED

DANGER BAY CRYP1

		UPPER TEETH																	
		RIGHT								LEFT									
		8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8		
TYPE		⊗	○			⊗	⊗	⊗	⊗	⊗			⊗	⊗			⊗		
LOCATION																			
















INSIDE — LOOKING OUT

(SEE REMARKS)

IMPACTION

		LOWER TEETH																	
		RIGHT								LEFT									
		16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16		
TYPE																			
LOCATION																			

KEY OF SYMBOLS TO BE USED ON ABOVE CHART

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

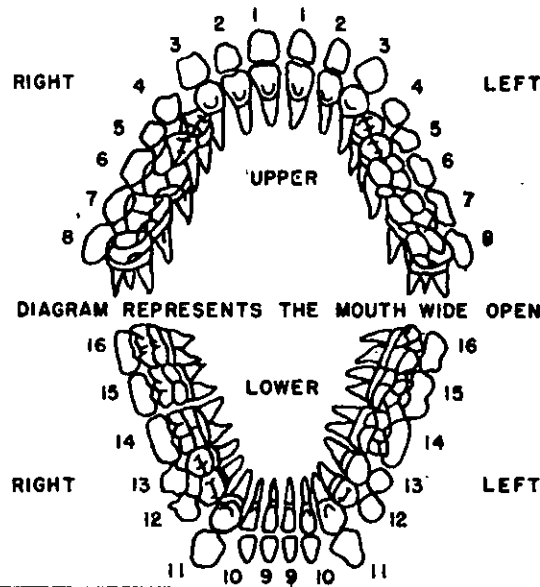
INSTRUCTIONS:

1. **ACCURACY** AND **ATTENTION TO DETAIL** IN THE PREPARATION OF THIS CHART ARE OF PARAMOUNT IMPORTANCE, IF SAME IS TO BE OF MAXIMUM VALUE.

2. **NOTE CAREFULLY** THAT: SYMBOLS INDICATING MISSING TEETH, CAVITIES AND BRIDGE-WORK ARE TO BE INSERTED IN **WHOLE BOX**; SYMBOLS INDICATING **TYPE OF FILLING** ARE TO BE INSERTED IN **UPPER HALF** OF BOX; AND SYMBOLS INDICATING **LOCATION OF FILLING** ARE TO BE INSERTED IN **LOWER HALF** OF BOX.

3. ANY ABNORMALITIES SUCH AS MALPOSED, MALFORMED OR DISCOLORED TEETH, ETC. SHOULD BE NOTED. DENTAL WORK NOT COVERED ABOVE WILL BE INDICATED, *e.g.*, PORCELAIN CROWNS, GOLD CROWNS (FULL OR 3/4), 3/4 GOLD CROWN WITH SILICATE WINDOW.

4. FOR INFORMATION OF STANDARD NUMBERING OF TEETH, SEE DIAGRAM BELOW.



REMARKS:

Unable to determine on maxilla if teeth were lost before or after death.

/s/ Joseph D. Murphy
SIGNATURE OF PERSON WHO PREPARED CHART

/p/ JOSEPH D. MURPHY T/5
NAME AND RANK TYPED OR PRINTED

CIP

PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

/s/ Felix Glass
VERIFIED BY GRS OFFICER 01717213

/p/ FELIX GLASS Capt., DC
NAME AND RANK TYPED OR PRINTED

16 Oct 47

DATE

CERTIFIED TRUE COPY

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

/aaa

1499
RESTRICTED

U 1499

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

APR 5 - 1948

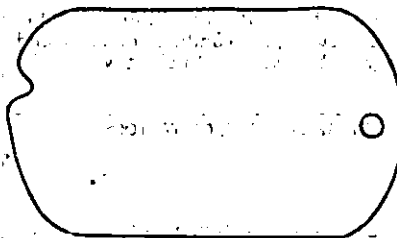
REPORT OF INTERMENT
(AR 30-1810 and AR 30-1815)

STORAGE

DATE OF REPORT

20 Oct 47

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)
UNKNOWN X-841 (Formerly UNK X-359
USAF Cem Manila #2, Luzon, P.I.)

SERIAL No.

Unknown

GRADE

Unknown

ORGANIZATION

Unknown

BRANCH OF SERVICE

Unknown

RACE

Unknown

RELIGION

Unknown

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

PLACE OF DEATH

Unknown

CAUSE OF DEATH

Unknown

DATE OF DEATH

Unknown

EMERGENCY ADDRESSEE (Name, relationship, and address)

Unknown

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

None

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

WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)

Yes (2)

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

None

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

GRS MAUSOLEUM, MANILA, P.I.

DATE OF BURIAL

16 Oct 47
STORAGE

HOUR

0800

BURIED IN (Shroud, blanket, or name of other)

STORED
Casket

TYPE OF GRAVE
MARKER

None

PLOT No.
CHANGER

812

ROW No.
ROW

B

GRAVE No.
CRYPT

369

WAS THIS A REBURIAL?
(Yes or no)

Yes

RESTORED

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.

1490

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

STORED

IDENTIFICATION TAG ATTACHED TO
MARKER (Yes or no)

Yes

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

UNKNOWN X-839

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

CRYPT

371

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

UNKNOWN X-832

RANK

SERIAL No.

ORGANIZATION

GRAVE No.

22

367

SIGNATURE OF PERSON PREPARING REPORT

Wm R GILBERT, Adm Asst

SIGNATURE OF GRS OFFICER VERIFYING REPORT

LUCIO S PANOPLO Jr., 2d Lt., INF

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

RESTRICTED

Ind 701

Section 3. UNIDENTIFIED REMAINS.

INSTRUCTIONS:


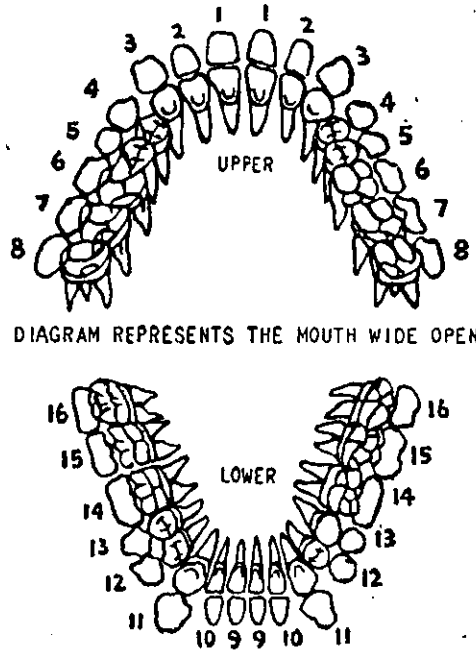




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

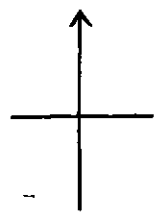
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
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WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
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OTHER IDENTIFICATION CLUES

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

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



REMARKS:-

Identification Check List and Dental Chart accomplished.

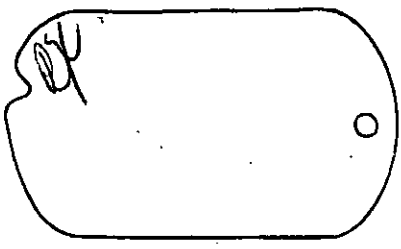

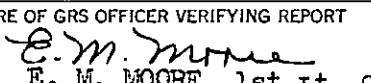
24 NOV 1947

IDENTIFICATION SECTION
PATRIATION RECORDS BRANCH
MEMORIAL DIVISION

CATEGORY III CASE
NO CLUES
IDENTIFICATION IMPOSSIBLE
AT PRESENT TIME

RESTRICTED U-

U-1499

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 19 Jan. 46		
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.						
		NAME (Last, first, middle initial) UNKNOWN -X- 359 (Cem. Manila #2)				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 719 None								
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.								
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY USAF Cemetery Manila #2, Luzon, P. I.								
DATE OF BURIAL 23 Dec. 45		HOUR 0900	BURIED IN (Shroud, blanket, or name of other) Shelter half		TYPE OF GRAVE MARKER Cross	PLOT No. 2	ROW No. 12	GRAVE No. 1490
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. G	ROW No. 3	GRAVE No. 1
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- 358 (Cem. Manila #2)				RANK	SERIAL No.	ORGANIZATION	GRAVE No. 1489	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) JONES, William C.				RANK	SERIAL No. 6268715	ORGANIZATION	GRAVE No. 1491	
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.								

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Incl 48'

27 FEB 1948

Section 3. UNIDENTIFIED REMAINS.

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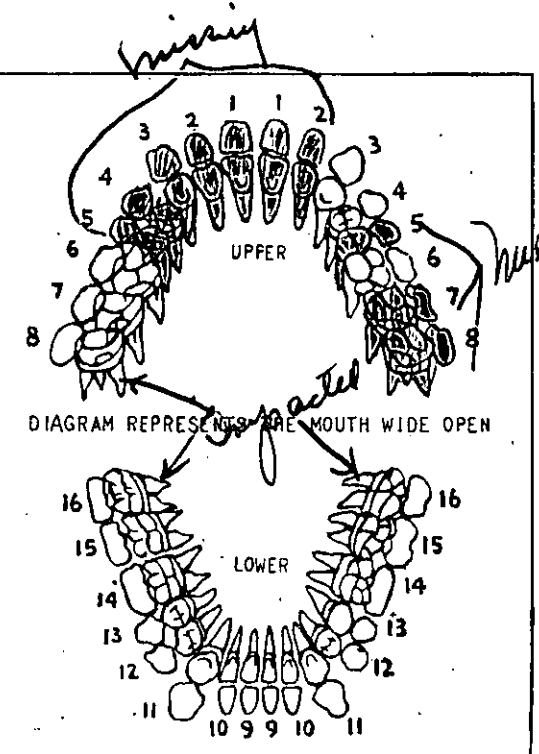
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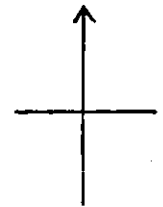
WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND

OTHER IDENTIFICATION CLUES

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CAVITIES		CAVITY DECAYED
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BRIDGE WORK		GOLD BRIDGE



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



REMARKS:

Bottle found buried with body, all information destroyed.