

RECLASSIFICATION SHEET

PAPERS ORIGINALLY FILED 293 *Week. Manila #2 (misc)*

X-373 X-374 X-375 X-376 X-378 X-379

SYNOPSIS AND DATES

X-380

misc filed

NEW CLASSIFICATION 293 *Week. Manila #2*

X-373

*11/7/50
FWD*

RECLASSIFICATION SHEET

1

/ebc

Interred 20 Feb. 1950
N 4 69 Ft. McKinley

Carl R. H. Mark
CARL R. H. MARK

Cemetery Superintendent
SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DISINTERMENT DIRECTIVE

M-1-54

PREPARED BY PHILCOM

DIRECTIVE NUMBER
7747 80646

DATE
09 02 50
DAY MONTH YEAR

NAME: UNKNOWN X-374
SERIAL NUMBER: [blank]
GRADE: [blank] ARM: [blank]
RACE: [blank] RELIGION: [blank]

CEMETERY: USAF CEMETERY MANILA NO. 2, P. I.
PLOT: 2 ROW: 13 GRAVE: 1609
DISPOSITION OF REMAINS: 7701 80
CODE DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
UNITED STATES MILITARY CEMETERY
FT. WM. MCKINLEY, P. I.

NAME AND ADDRESS OF NEXT OF KIN
(BY ADMINISTRATIVE DECISION)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME: UNKNOWN X-374
SERIAL NUMBER: [blank] GRADE: [blank] DATE OF DEATH: [blank] DATE DISTINTERRED: 18 Feb 50

IDENTIFICATION TAG ON: REMAINS MARKER
ORGANIZATION: [blank] RELIGION: [blank] IDENTIFICATION VERIFIED BY: PAUL R NICHOLS
Embalmer NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: Shelter Half
CONDITION OF REMAINS: Skeletal

OTHER MEANS OF IDENTIFICATION
X-852 Maus

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)

REMAINS PREPARED AND PLACED IN CASKET

DATE: 18 Feb 50 BY: PAUL R NICHOLS

CASKET SEALED BY: PAUL R NICHOLS
EMBALMER (Signature): *Paul R Nichols*
PAUL R NICHOLS

CASKET BOXED AND MARKED: RAYMOND H TANGUAY
DATE: 18 Feb 50 Sgt 1c, RA
SHIPPING ADDRESS VERIFIED BY: L. W. RICHARDSON, M/Sgt., RA

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

L. W. Richardson
L. W. RICHARDSON, M/Sgt., RA

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS
FILE
3 APR 1950
REPATRIATION
BRANCH
METRO. DIV.

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM AGRS MAUSOLEUM		TO US MILITARY CEMETERY	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Carroll Hornak</i>	DATE FEB 20 1950

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	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

FROM		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

PREPARED BY PHILCOM

DISINTERMENT DIRECTIVE

SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
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KIND OF CONVEYANCE	SECTION A - NAME AND BURIAL LOCATION OF DECEASED	NAME OF CONVOYER	DIRECTIVE NUMBER	DATE
			7749 80646	09 02 50
				DAY MONTH YEAR

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
UNKNOWN I-374	1 SHIPPED				

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS
MANILA NO. 2, P. I.	2	13	1609	7701
				CODE
				DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
BY: UNITED STATES MILITARY CEMETERY FT. W. MCKINLEY, P. I.	IO BY ADMINISTRATIVE DECISION

SECTION C - DISINTERMENT AND IDENTIFICATION

SIGNATURE OF SHIPPER	NAME	SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISTINTERRED
KIND OF CONVEYANCE	NAME OF CONVOYER				
IDENTIFICATION TAG ON	ORGANIZATION	IO	RELIGION	IDENTIFICATION VERIFIED BY	
<input type="checkbox"/> REMAINS		2 SHIPPED			
<input type="checkbox"/> MARKER				NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	DATE	CONDITION OF REMAINS	DATE
KIND OF CONVEYANCE	NAME OF CONVOYER		
OTHER MEANS OF IDENTIFICATION			
BY	IO		
	1 SHIPPED		

MINOR DISCREPANCIES (Prepare Discrepancy Report GMC Form 1194a for major discrepancies.)

SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
KIND OF CONVEYANCE	NAME OF CONVOYER		
REMAINS PREPARED AND PLACED IN CASKET			
BY	IO		
DATE	BY	3 SHIPPED	

CASKET SEALED BY	EMBALMER (Signature)
SIGNATURE OF SHIPPER	DATE
SIGNATURE OF RECEIVER	DATE

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
KIND OF CONVEYANCE	NAME OF CONVOYER
DATE	BY

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

SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
		SIGNATURE OF AGRS INSPECTOR	

REMARKS AND SPECIAL INSTRUCTIONS	NAME OF CONVOYER
BY	IO
	1 SHIPPED

3 APR 1950
REPATRIATION
BRANCH
MEM. DIV.

RECORD OF CUSTODIAN TRANSFER

Incl 4 5

PREPARED BY PHILCOM

DISINTERMENT DIRECTIVE

3

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

7127 80646

DATE

09 02 50
DAY MONTH YEAR

NAME

UNKNOWN X - 374

SERIAL NUMBER

GRADE

ARM

RACE

RELIGION

CEMETERY

BSAP CEMETERY MANILA NO. 2, P. I.

PLOT

ROW

GRAVE

2

13

1609

DISPOSITION OF REMAINS

7701

CODE

DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

NAME AND ADDRESS OF NEXT OF KIN

UNITED STATES MILITARY CEMETERY
FT. WIL. MCKINLEY, P. I.

(BY ADMINISTRATIVE DECISION)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

GRADE

DATE OF DEATH

DATE DISTINTERRED

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

REMAINS

MARKER

NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)

REMAINS PREPARED AND PLACED IN CASKET

DATE

BY

EMBALMER (Signature)

CASKET SEALED BY

SHIPPING ADDRESS VERIFIED BY

CASKET BOXED AND MARKED

DATE

BY

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

REMARKS AND SPECIAL INSTRUCTIONS

RECORD OF CUSTODIAL TRANSFER

FILED
3 APR 1950
REPAIR SECTION
BRANCH
MEMPHIS

Incl # 5

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

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

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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

DISINTEGRATION DIRECTIVE

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE

2 Dec 1949

Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 374, Flot 2,
Row 13, Grave 1609, 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:



W. S. MCNEMAR
Captain, QMC
Chief, Records Branch

Atch: Form 1044

Received 4/10/50 OQMG
Not identifiable from
information presently
available 4/10/50 Subb
Ident. B.

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-852 (Formerly UNK X-374 Manila #2)				2. DATE OF REPORT 8 Dec 1949	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	812	B	385	DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT U T D	9. ESTIMATED HEIGHT 5' 8"	10. COLOR OF HAIR U T D	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

U T D

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

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

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

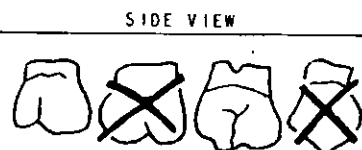
"UNIDENTIFIABLE"
"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

2nd 32-

18.

TOOTH CHART

MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED THUS:



CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:



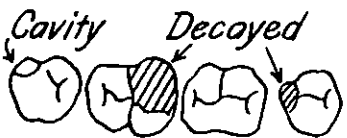
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:



CARIES (Cavities): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:



RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
		o				e	p	u					missing		→
maxilla															
Side Views															
UPPER															
Side Views															
LOWER															
Side Views															
		o				p	p	p	p				o	o	o
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."

REMARKS: L1, L4 thru L6 are loose present with remains.

Paul R. Nichols

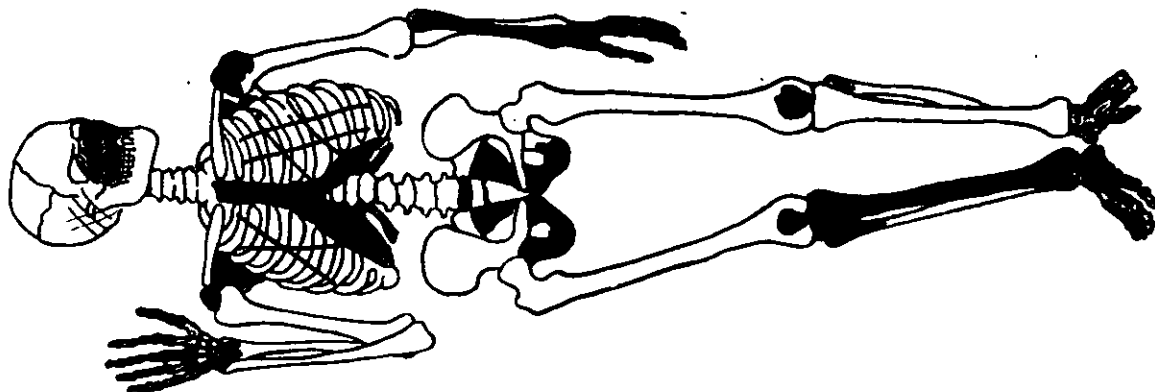
PAUL R. NICHOLS
Chief, Identification Sec

"UNIDENTIFIABLE"

19. BLACK OUT PARTS OF BODY NOT COVERED

X - 852

4 Lumbar vertebrae



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 - 5 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

SIGNATURE

PAUL R. NICHOLS
 Chief, Identification Sec

IDENTIFICATION CHECK LIST

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

//af

UNKNOWN X-852 (Formerly
 Unknown X-374 USAF Cem Manila #2, P.I.)
 Cemetery AGRS Mausoleum, Manila, P.I.
 Plot 812 Row B Grave 385
HANGER BAY CRYPT

AGRS Mausoleum, Manila, P.I.

1. Arrived at cemetery 7 Oct 47
(Hour) (Date)
2. Place of death POW Camp, Cabanatuan, Luzon, P.I.
(Name of closest town) (Coordinates and letter Prefix, maps)

(Sheet, scale and serials used)

3. Remains recovered or disinterred by C.M.T. #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	/		
	<small>(Type)</small>		
Raincoat	//		
Overcoat	/ /		
Jacket, Field	/ / /		
Jacket, Combat	N		
Mackinaw	O		
Sweater	N		
Jacket, HBT	E		
* 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. Chart attached.

Age Height ^{Est.} 5' 8" 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, widow's peak, distinctive cutting or other characteristics)
 Sideburns Mustache Beard or (length, heavy)
 (Color, setting, shape) (Color, size, shape)

Goatee (Light, color, extent)
 U

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

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

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) Circumference of head 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 U
 T

Fingers (Short, thick, long, slender, size of knuckles, missing fingers or joints)
 D
 (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 personal effects, no ROI bottle nor Identification tags found with remains. Estimated weight of remains 5-lbs. UNKNOWN X-852 BTB one of the following:

MARTIN, Alex C	Cpl	19th Bomb	6571837
CROUSE, David D.	1st Sgt	808 MP	R-740489
HASSELKUS, Howard L	Sgt	192 Tank	35015891
PEIRCE, Robert C	Sgt	7 MAT	6825221
ELISHOFF, James K	Cpl	USMC	266058
UIRICH, Earnest H	Pvt	MI	38054475

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.

LAND, Lyman L.	Pfc	USMC	Unknown
THORNED, Gale R	Pfc	31 INF	3565951
PENNY, Bruce H	Pvt	7th CWS	14039411

/s/ Alton E. Jones

(Officer's Name)

SP-6 C-062812

Rank

Service

AGRS Mausoleum, Manila, P.I.

(Organization)

16 Oct 47

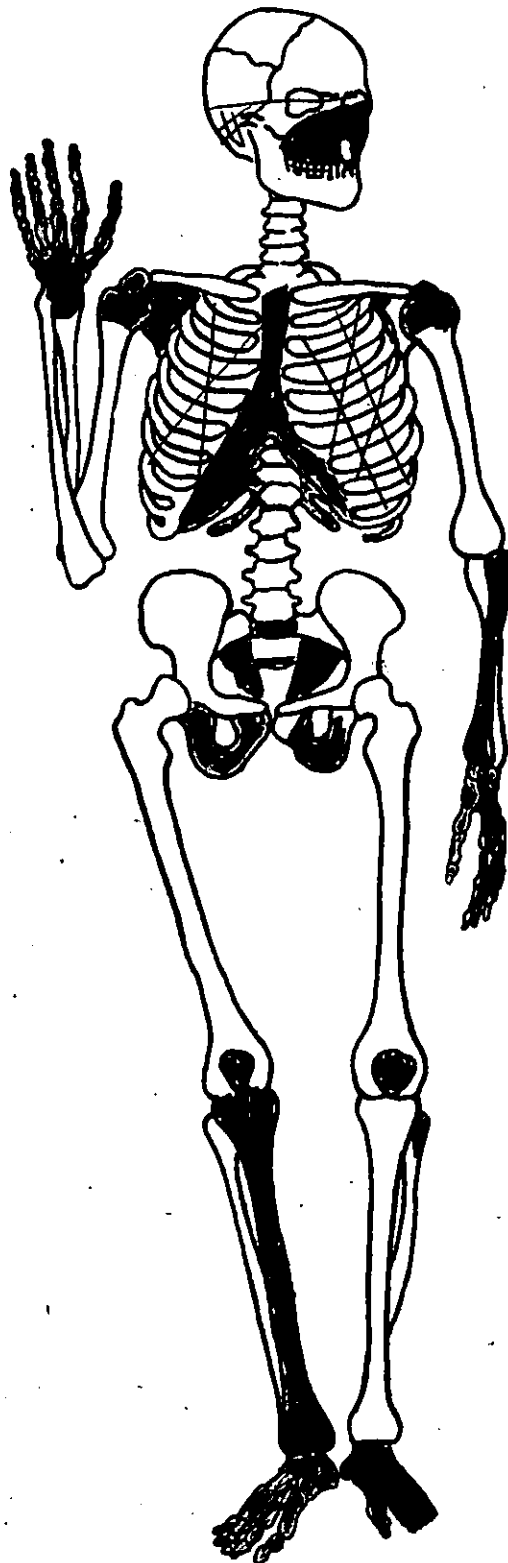
CERTIFIED TRUE COPY:

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

SKELETAL CHART

X-852

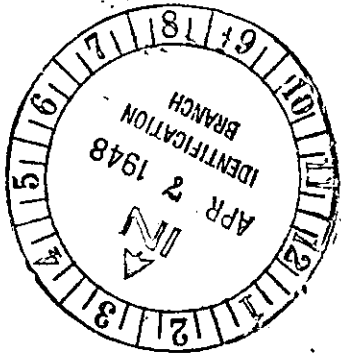
(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



fragments of ribs

fragments of vertebrae

4-lumbar vertebrae



X-374

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-374 (HASSELKUS, Howard L)
(Formerly Unk C-15 Cabanatuan Cem)

10 April 47

DATE

Sgt

35015891

LAST NAME

FIRST

INITIAL

RANK

SERIAL NO.

192 Tank

ORGANIZATION

POW Camp Cabanatuan,
Luzon, P. I.

PLACE OF DEATH

USAF CEM MANILA#2

PLACE OF BURIAL

2

PLOT

13

ROW

1609















GRAVE NO.

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

INSIDE — LOOKING OUT

RIGHT								LOWER TEETH				LEFT							
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16				
TYPE																			
		A		⊗				⊗					A	A	A				
LOCATION																			
		F											o	o	o				

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	 OXYPHOSPHATE (CEMENT)	 LINGUAL (TOWARD TONGUE)
 POSTHUMOUSLY MISSING (LOST AFTER DEATH)		 FACIAL (TOWARD CHEEK)

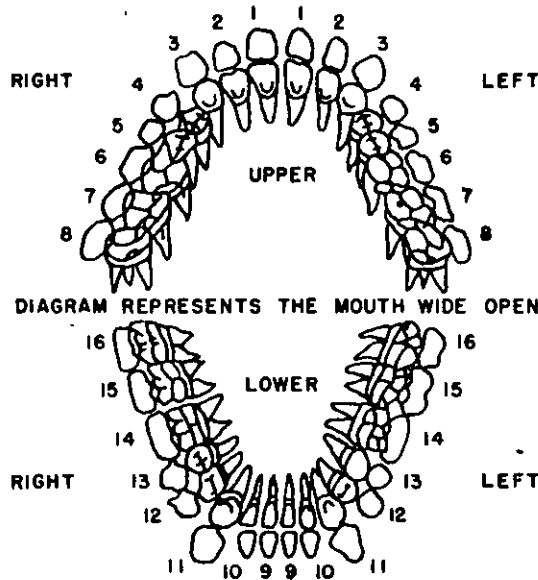
INSTRUCTIONS:

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:

Al S. Padayhag
SIGNATURE OF PERSON WHO PREPARED CHART

AL S. PADAYHAG, SGT
NAME AND RANK TYPED OR PRINTED

USAF Cem Manila #2, Luzon, P. I.
PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

Fenwick H Burch
VERIFIED BY GRS OFFICER

FENWICK H BURCH, CAPT., CMP
NAME AND RANK TYPED OR PRINTED

10 April 47
DATE

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-374 (HASSELEUS, Howard L)
(Formerly Unk C-15 Cabanatuan Cen)

10 April 47
DATE

LAST NAME FIRST INITIAL RANK SERIAL NO.

Sgt

35015891

192 Tank
ORGANIZATION

POW Camp Cabanatuan,
Luzon, P. I.
PLACE OF DEATH

USAF CEM MANILA#2
PLACE OF BURIAL

2 13 1609
PLOT ROW GRAVE NO.

	RIGHT								UPPER TEETH			LEFT								
	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8				
TYPE								P	P	G							TYPE			
LOCATION										ML							LOCATION			

INSIDE — LOOKING OUT

	RIGHT								LOWER TEETH			LEFT								
	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16				
TYPE			A		P				P					A	A	A	TYPE			
LOCATION			F											O	O	O	LOCATION			

KEY OF SYMBOLS TO BE USED ON ABOVE CHART

<p>SYMBOLS IN WHOLE BOX</p> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">X</div> <p>EXTRACTED</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">O</div> <p>CAVITY. INDICATE LOCATION</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 60px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;"> X X X </div> <p>FIXED BRIDGE (INCL. ABUTMENTS)</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 60px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;"> X X X </div> <p>TEETH REPLACED BY DENTURE</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">P</div> <p>POSTHUMOUSLY MISSING (LOST AFTER DEATH)</p> </div>	<p>TYPE OF FILLING IN UPPER HALF OF BOX</p> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">A</div> <p>AMALGAM (SILVER)</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">G</div> <p>GOLD</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">S</div> <p>SILICATE OR PORCELAIN</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">O</div> <p>OXYPHOSPATE (CEMENT)</p> </div>	<p>LOCATION OF FILLING IN LOWER HALF OF BOX</p> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">m</div> <p>MESIAL (BETWEEN-TOWARD FRONT)</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">o</div> <p>OCCUSAL (BITING SURFACE BACK TEETH)</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">d</div> <p>DISTAL (BETWEEN-TOWARD BACK)</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">l</div> <p>LINGUAL (TOWARD TONGUE)</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px; margin-right: 10px;">f</div> <p>FACIAL (TOWARD CHEEK)</p> </div>
--	---	--

USAF Gen Knutson #2, Tucson, P. I. PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

10 April 47 DATE

AT S. PADAYHAG, SGT NAME AND RANK TYPED OR PRINTED

BENWICK H BIRCH, CAPT, CMP NAME AND RANK TYPED OR PRINTED

At S. Padayhag
SIGNATURE OF PERSON WHO PREPARED CHART

Benwick H Birch
VERIFIED BY GRS OFFICER

REMARKS:

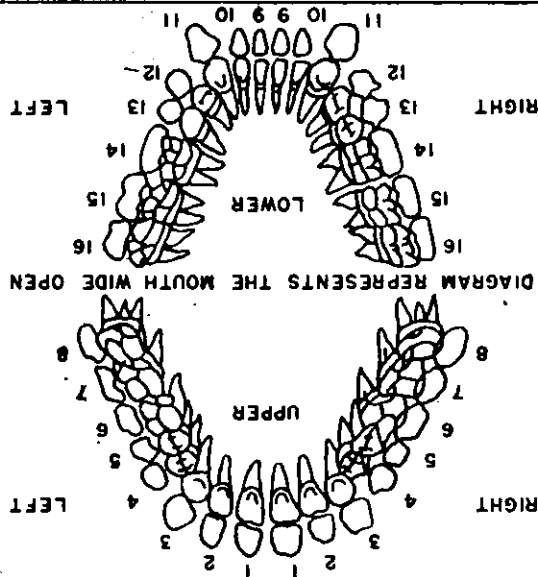


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN

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, eg, 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.

/af

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.

16 Oct 47

DATE

UNKNOWN X-852 (Formerly Unk X-374)

USAF Cem Manila #2, Luzon, P.I.)

Unknown

Unknown

LAST NAME FIRST INITIAL

RANK

SERIAL NO.

Unknown

Unknown

POW Camp, Cabanatuan,
Luzon, P.I.

AGRS Mausoleum,
Manila, P.I.

ORGANIZATION

812 B 385

PLACE OF DEATH

PLACE OF BURIAL
STORAGE

PLOT HANGER ROW BAY GRAVE NO. CRYPT.

maxilla missing

RIGHT								UPPER TEETH								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	8	7	6	5	4	3	2	1
							X	G	X	X	X				X	X							
									m														

INSIDE — LOOKING OUT

RIGHT						LOWER TEETH						LEFT					
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16		
		A				X	X	X	X				A	A	A		
		f											o	o	o		

KEY OF SYMBOLS TO BE USED ON ABOVE CHART

SYMBOLS IN WHOLE BOX



EXTRACTED



CAVITY. INDICATE LOCATION



FIXED BRIDGE (INCL. ABUTMENTS)



TEETH REPLACED BY DENTURE



POSTHUMOUSLY MISSING (LOST AFTER DEATH)

TYPE OF FILLING IN UPPER HALF OF BOX



AMALGAM (SILVER)



GOLD



SILICATE OR PORCELAIN



OXYPHOSPHATE (CEMENT)



LOCATION OF FILLING IN LOWER HALF OF BOX



MESIAL (BETWEEN-TOWARD FRONT)



OCCUSAL (BITING SURFACE BACK TEETH)



DISTAL (BETWEEN-TOWARD BACK)



LINGUAL (TOWARD TONGUE)



FACIAL (TOWARD CHEEK)

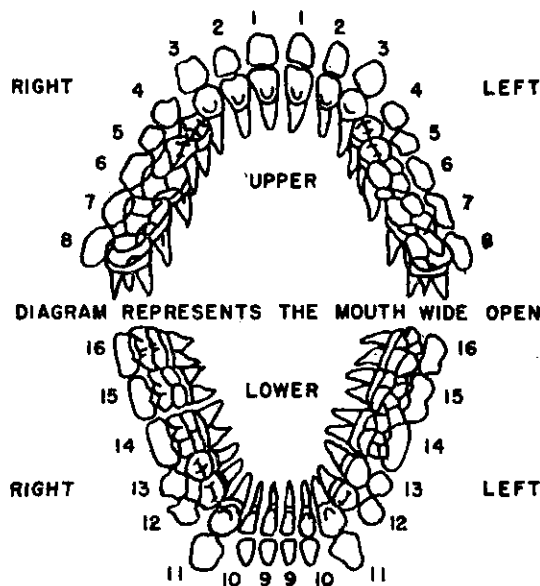
INSTRUCTIONS:

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:

Left maxilla missing.

/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

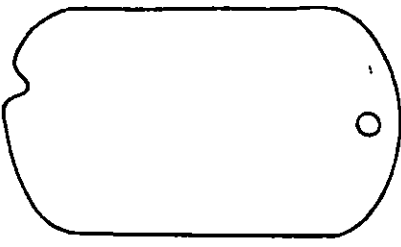
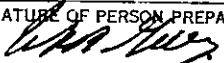
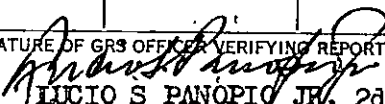
/s/ Alton E. Jones
VERIFIED BY GRS OFFICER

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

16 Oct 47
DATE

CERTIFIED TRUE COPY:

George T. Gamba
GEORGE T. GAMBA
2d Lt., MAC

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT STORAGE (AR 30-1810 and AR 30-1815)				DATE OF REPORT 21 Oct 47		
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.						
		NAME (Last, first, middle initial) UNKNOWN X-852 (Formerly Unk X-374 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 POW Camp, Cabanatuan, Luzon, P.I.		CAUSE OF DEATH Unknown			DATE OF DEATH 22 Nov 42			
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) See Remarks						
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 16 Oct 47	HOUR 0800	BURIED IN (Shroud, blanket, or name of other) STORAGE Casket		TYPE OF GRAVE MARKER None	PLOT No. HANGER 812	ROW No. BAY B	GRAVE No. CRYPT 385	
WAS THIS A REBURIAL? (Yes or no) RESTORED Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cem Manila #2, Luzon, P.I.					PLOT No. 2	ROW No. 13	GRAVE No. 1609
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) STORAGE Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes							
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORAGE UNKNOWN X-854			RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 387		
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORAGE UNKNOWN X-874			RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 383		
SIGNATURE OF PERSON PREPARING REPORT  Jim R GILBERT, Adm Asst				SIGNATURE OF GRS OFFICER VERIFYING REPORT  LUCIO S PANOPIO 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

Section 3. UNIDENTIFIED REMAINS.

INSTRUCTIONS:


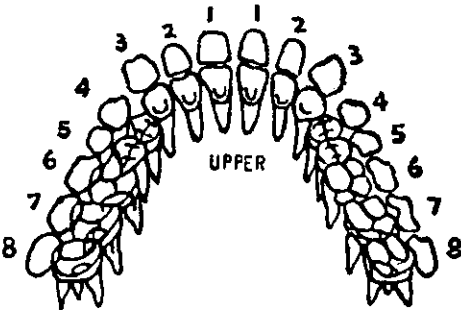




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers 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>UPPER</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p> <p>LOWER</p>
CAVITIES		
MISSING TEETH		
CROWNED TEETH		
BRIDGE WORK		

FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY
REMARKS: UNKNOWN X-852 (AGRS Mausoleum, Manila, P.I.) BTB one of the 12 bodies, 9 identified, recovered from a common grave
 UNKNOWN X-852 could be anyone of the following:

MARTIN, Alex	Cpl	19th Bomb	6571837
GROUSE, David D	1st Sgt	808 MP	R-740489
HASSELKUS, Howard L	Sgt	192 Tank	35015891
PEIRCE, Robert C	Sgt	7 MAT	6825221
ELISHOFF, James K	Cpl	USMC	266058

REMARKS: ULRICH, Earnest H	Pvt	Ma	38054475
LAND, Lyman L	Pfc	USMC	Unknown-
THORNED, Gale R	Pfc	31 INF	3565951
PENNY, Bruce H	Pvt	7th CWS	14039411

No identification tags or personal effects found to warrant identification.

Identification Check List and Dental Chart accomplished.

31 DEC 1947

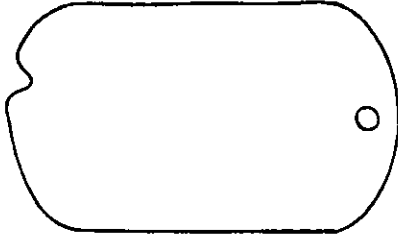
WD OMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

24 Jan 46

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN X 374 (HASSELKUS, Howard L) (Formerly UNKNOWN C-15 Cabanatuan Cemetery)		SERIAL No. 35015891
GRADE Sgt PVT	ORGANIZATION 192 Tank	BRANCH OF SERVICE Army
RACE	RELIGION Unknown	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH POW Camp Cabanatuan, Luzon, P I	CAUSE OF DEATH Unknown Malaria, Pellagra Scurvy	DATE OF DEATH 22 Nov 42
--	---	----------------------------

EMERGENCY ADDRESSEE (Name, relationship, and address)
Unknown
Fred A Hasselkus (F) 402 Toledo St., Elmore, Ohio

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) Nine (9) bodies found in common grave. Prison records indicate: Martin, Alex Cpl 19th Bomb : 6571837 Crouse, David D 1st Sgt 808 MP R-740489 Hasselkus, Howard L Sgt 192 Tank : 35015891 --(See Sec 3 reverse side)--
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
USAF Cemetery Manila #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.
23 Dec 45	1000	Shelter Half	Cross	2	13	1609

WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE 45.7-70.9 1/50,000 POW Camps I & II Cemetery, Cabanatuan, Luzon, P I	PLOT No. 9	ROW No. 0	GRAVE No. 807
--	--	---------------	--------------	------------------

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) STOUGHTON, John A	RANK Sgt	SERIAL No. 32092238	ORGANIZATION	GRAVE No. 1608
---	-------------	------------------------	--------------	-------------------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X-373 (CROUSE, David D) (Formerly UNKNOWN C-14 Cabanatuan Cemetery)	RANK 1st Sgt	SERIAL No. R-740489	ORGANIZATION 808 MP	GRAVE No. 1610
---	-----------------	------------------------	------------------------	-------------------

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.

Incl 42'

28 FEB 1946

Section 3.—UNIDENTIFIED REMAINS.

INSTRUCTIONS:


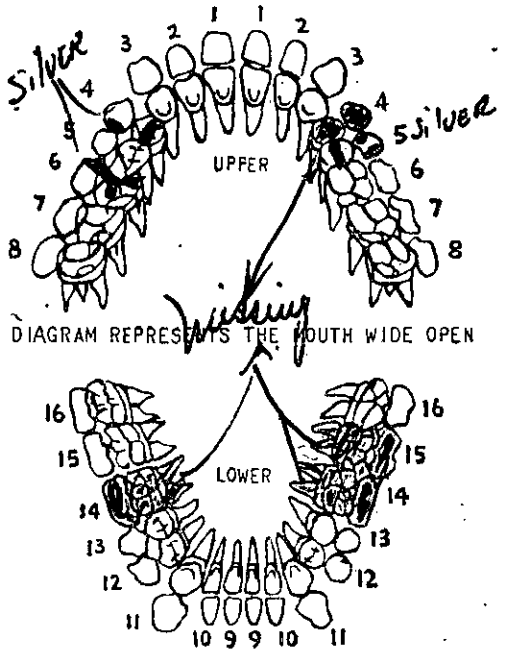




(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

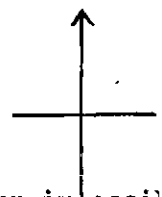
WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND

OTHER IDENTIFICATION CLUES

FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER</p> <p>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

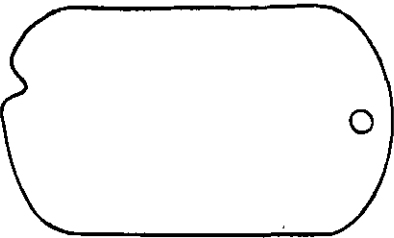
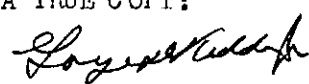
- Peirce, Robert C Sgt 7 MAT 6825221
- Elishoff, James K Cpl USMC 266058
- Ulrich, Earnest H Pvt Md 38054475
- Land, Lyman L Pfc USMC unknown
- Thorned, Gale R Pfc 31 Inf 3565951
- Penny, Bruce H Pvt 7th CWS 14039411



were buried in this grave. Individual identification impossible.

REMARKS:

RESTRICTED

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		R.B./ REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)				DATE OF REPORT 24 Jan. 46	
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.					
NAME (Last, first, middle initial) UNKNOWN X-374 (HASSELKUS, Howard L) (Formerly UNKNOWN C-15 Cabanatuan Cemetery)				SERIAL No. 35015891			
GRADE Sgt <i>Pvt</i>		ORGANIZATION 192 Tank		BRANCH OF SERVICE Army			
RACE		RELIGION Unknown		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY			
PLACE OF DEATH POW Camp Cabanatuan, Luzon, P.I.		CAUSE OF DEATH Unknown Malaria, Pellagra Scurvy.		DATE OF DEATH 22 Nov 42			
EMERGENCY ADDRESSEE (Name, relationship, and address) Fred A Hasselkus (F) 402 Toledo St. Elmore, Ohio							
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) Nine (9) bodies found in common grave. Prison records indicate Martin, Alex Cpl 19th Bomb 6571837 Crouse, David D 1st Sgt 808 MP R-740489 Hasselkus, Howard L Sgt 192 Tank 35015891 (See Sec 3 reverse side)-					
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) Yes (2)		LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME None					
A TRUE COPY:  GEORGE D. REDDEN, JR. Captain, Infantry							
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	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.	
23 Dec 45	1000	Shelter Half	Cross	2	13	1609	
WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE 45.7-70.9 1/50.000 POW Camp 1 & 11 Cemetery, Cabanatuan, Luzon, P.I.			PLOT No.	ROW No.	GRAVE No.	
				8	0	807	
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)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)						
Yes	Yes						
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)		RANK	SERIAL No.	ORGANIZATION	GRAVE No.		
STOUGHTON, John A		Sgt	32092238		1608		
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)		RANK	SERIAL No.	ORGANIZATION	GRAVE No.		
UNKNOWN X-373 (GROUSE, David D) (Formerly UNKNOWN C-14 Cabanatuan Cemetery)		1st Sgt	R-740489	808 MP	1610		
SIGNATURE OF PERSON PREPARING REPORT			SIGNATURE OF GRS OFFICER VERIFYING REPORT				
/s/t/ R.C. BARRETT, T/4 GRS			/s/t/ E.M. MOORE 1st Lt., OMC.				

RESTRICTED

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
-----------------------	---------------	--------------------------------

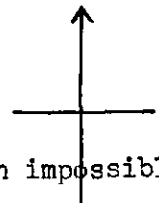
OTHER IDENTIFICATION CLUES

FILLINGS		
CAVITIES		
MISSING TEETH		
CROWNED TEETH		
BRIDGE WORK		

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

- Peirce, Robert C Sgt 7 MAT 6825221
- Elishoff, James K Cpl USMC 266058
- Ulrich, Earnest H Pvt Md 38054475
- Land, Lyman L Pfc USMC unknown
- Thorned, Gale R Pfc 31 Inf 3565951
- Penny, Bruce H Pvt 7th CWS 14039411

were buried in this grave. Individual identification impossible.



REMARKS: