

RECLASSIFICATION SHEET

PAPERS ORIGINALLY FILED 293. Untk (M. sc.) Manila # 2 X411, X412
X414, X509, X1419

SYNOPSIS AND DATES

miss now filed

NEW CLASSIFICATION 293. Untk Manila # 2 X411

*10/2/50
E.C.*

RECLASSIFICATION SHEET

/drs

Interred 16 February 1950
N 11 179 Ft. McKinley

DISINTERMENT DIRECTIVE

Carer Mark

801-6

1

CARL R. H. MARK

Cemetery Superintendent

DIRECTIVE NUMBER

DATE

SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

7747 00236

15 01 50
DAY MONTH YEAR

/CSV

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
UNKNOWN	X-000412		J	O	6

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS
MANILA NO 2 P I	2	13	1607	7701 80 CODE DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
FORT MC KINLEY CEMETERY MANILA, PHILIPPINE ISLANDS	(BY ADMINISTRATIVE DECISION)

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISTINTERRED
UNKNOWN X-412				13 Feb 50
IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY	
<input type="checkbox"/> REMAINS <input type="checkbox"/> MARKER	UNKNOWN		GERARD A BRICK Embalmer NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
Shelter Half	Skeletal

OTHER MEANS OF IDENTIFICATION
X - 880 Maus.

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

REMAINS PREPARED AND PLACED IN CASKET	
DATE 13 Feb 50	BY GERARD A BRICK
CASKET SEALED BY GERARD A BRICK	EMBALMER (Signature) <i>Gerard A Brick</i> GERARD A BRICK
CASKET BOXED AND MARKED RAYMOND H TANGUAY	SHIPPING ADDRESS VERIFIED BY
DATE 13 Feb 50 BY Sgt 1c, RA	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
REMAINS UNIDENTIFIABLE
MAR 1950
REPATRIATION
BRANCH
REPT. NO. 862

Serial 10

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>C. R. ...</i>	DATE FEB 16 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

CAF
AIR MAIL

293 - Unk. P.I. (Misc) (Maus. Manila) (~~X-3571, 3572, 3573 thru 3577, X-305~~
~~X-3050, X-3049, X-3051, 3052, 3053, 3044 thru X-3046, X-879, 880 thr~~
~~X-885, X-4172 & X-4173.~~

FORM 299
23 JAN 1950

3 January 1950

SUBJECT: Approval of Unidentifiability

TO: Commanding Officer
American Graves Registration Service
Hollywood Zone
APO 600, c/o Postmaster
San Francisco, California

1. Reference is made to certificates of Unidentifiability for the following Unknown Deceased:

Unknown	X-3571-A,	AGRS Maus Manila,	formerly	X-1665,	USAF Cem Manila #2
"	X-3572,	"	"	X-1666,	"
"	X-3573,	"	"	X-1667,	"
"	X-3574,	"	"	X-1668,	"
"	X-3575,	"	"	X-1669,	"
"	X-3576,	"	"	X-1670,	"
"	X-3577,	"	"	X-1671,	"
"	X-3054,	"	"	X-1901,	"
"	X-3050,	"	"	X-1799,	"
"	X-3049,	"	"	X-1798,	"
"	X-3051,	"	"	X-1790,	"
"	X-3052,	"	"	X-1791,	"
"	X-3053,	"	"	X-1792,	"
"	X-3044,	"	"	X-1793,	"
"	X-3045,	"	"	X-1794,	"
"	X-3046,	"	"	X-1795,	"
"	X-3047,	"	"	X-1796,	"
"	X-3048,	"	"	X-1797,	"
"	X-879,	"	"	X-411,	"
"	X-880,	"	"	X-412,	"
"	X-881,	"	"	X-414,	"
"	X-882,	"	"	X-416,	"
"	X-883,	"	"	X-416,	"
"	X-884,	"	"	X-417,	"
"	X-885,	"	"	X-418,	"
"	X-4172,	Manila #2,	formerly	X-3045-B,	AGRS Mausoleum Manila, P.I.
"	X-4173,	"	"	X-3045-C,	"

X-293 Mark. P.I. X-412 (Manila #2)

AIR MAIL

CAF
AIR MAIL

293 - Unk. P.I. (Misc) (Maus. Manila) (~~X-3571, 3572, 3573 thru 3577, X-305~~
~~X-3050, X-3049, X-3051, 3052, 3053, 3044 thru X-3048, X-879, 880~~ thru
X-885, X-4172 & X-4173.)

QUART 293
CRS Per Mast

3 January 1950

SUBJECT: Approval of Unidentifiability

TO : Commanding Officer
American Graves Registration Service
Philcoa Zone
AFG 900, o/o Postmaster
San Francisco, California

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"	X-3572,	"	"	"	"	X-1666,	"	"	"	"
"	X-3573,	"	"	"	"	X-1667,	"	"	"	"
"	X-3574,	"	"	"	"	X-1668,	"	"	"	"
"	X-3575,	"	"	"	"	X-1669,	"	"	"	"
"	X-3576,	"	"	"	"	X-1670,	"	"	"	"
"	X-3577,	"	"	"	"	X-1671,	"	"	"	"
"	X-3054,	"	"	"	"	X-1901,	"	"	"	"
"	X-3050,	"	"	"	"	X-1799,	"	"	"	"
"	X-3049,	"	"	"	"	X-1798,	"	"	"	"
"	X-3051,	"	"	"	"	X-1790,	"	"	"	"
"	X-3052,	"	"	"	"	X-1791,	"	"	"	"
"	X-3053,	"	"	"	"	X-1792,	"	"	"	"
"	X-3044,	"	"	"	"	X-1793,	"	"	"	"
"	X-3045,	"	"	"	"	X-1794,	"	"	"	"
"	X-3046,	"	"	"	"	X-1795,	"	"	"	"
"	X-3047,	"	"	"	"	X-1796,	"	"	"	"
"	X-3048,	"	"	"	"	X-1797,	"	"	"	"
"	X-879,	"	"	"	"	X-411,	"	"	"	"
"	X-880,	"	"	"	"	X-412,	"	"	"	"
"	X-881,	"	"	"	"	X-414,	"	"	"	"
"	X-882,	"	"	"	"	X-416,	"	"	"	"
"	X-883,	"	"	"	"	X-416,	"	"	"	"
"	X-884,	"	"	"	"	X-417,	"	"	"	"
"	X-885,	"	"	"	"	X-418,	"	"	"	"
"	X-4172,	Manila #2,	formerly	X-3045-B,	AGRS	Mausoleum	Manila,	P.I.		
"	X-4173,	"	"	"	X-3045-C,	"	"	"	"	"

X-293 Mast. P.I. X-412 (Manila #2)

AIR MAIL

AIR MAIL

QUART 293

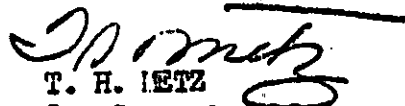
3 January 1950

GRS Far East

SUBJECT: Approval of Unidentifiability

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

FOR THE QUARTERMASTER GENERAL:


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

T. Sanborn: dal
L. M. White
J. Windsor

Copy furnished: CINCPAC, AFU 500

AIR MAIL

CA
293 - Unknown P. I. X-412 (Manila #2)

SECRET

SECRET

TELETYPE

7 APR 47

FROM: OQMG
TO: COMGREPHILNYCOM MANILA PI

ROUTINE

CINCFE TOKYO JAPAN

WCL - 36140

REQUEST DISINTERMENT AND REPROCESSING AND QMG FORMS ϕ 1044 & 1045 BE ACCOMPLISHED
FOR THE FOLLOWING UNKNOWN INTERRED IN USAF MANILA NO. 2: X-411, 412, 414, 509 AND
1419

DOCUMENT FILED (MIL) NO. 293 - Unknown P.I. (Misc) (Manila #2)

rtb

HEADQUARTERS
AMERICAN GRAVES REGISTRATION SERVICE
PHILCOM ZONE

25 Nov 1949

Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X-412, Plot 2,
Row 13, Grave 1607, 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:



F. B. McNEMAR
Captain, QMC
Chief, Records Branch

Attach: Form 1044

Received 22 Dec 49 **0900**

Not identifiable from
information presently

available 29 Dec 49

T. Sanborn 1D.571

Sanborn

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN / UNKNOWN X-880 (Formerly UNK X-412 Manila #2)				2. DATE OF REPORT 28 Nov 1949	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	812	B	501	DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT U T D	9. ESTIMATED HEIGHT U T D	10. COLOR OF HAIR U T D	11. RACE Unknown
-------------------------------------	-------------------------------------	-----------------------------------	----------------------------

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

N o n e

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

U T D

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

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

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

N o n e

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

N o n e

"UNIDENTIFIABLE"

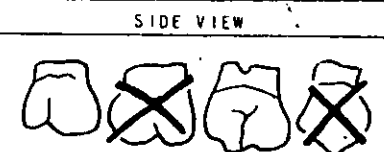
"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

Incl 2

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:



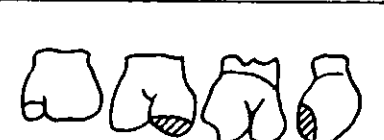
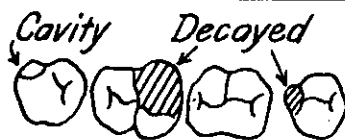
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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
← Maxilla								Missing →							
Side View								Side View							
UPPER								UPPER							
Top View								Top View							
LOWER								LOWER							
Side View								Side View							
		⊖	⊕					⊕						⊖	
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: Maxilla and maxillary teeth are missing.

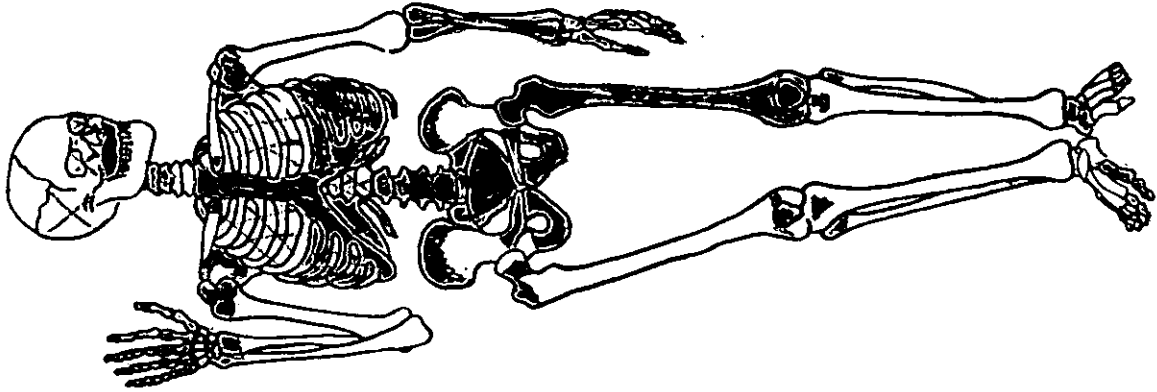
Paul R. Nichols
 PAUL R. NICHOLS
 Chief, Identification Section

"UNIDENTIFIABLE"

BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA
 18 MAR 47

19. BLACK OUT PARTS OF BODY NOT RECOVERED

2 - Cervical
Vertebra and rib fragments



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

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

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

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

Estimated weight of remains - 4 lbs.

"UNIDENTIFIABLE"

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

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

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

PAUL R. NICHOLS
Chief, Identification Section

SIGNATURE

IDENTIFICATION CHECK LIST

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

UNKNOWN X-880 (Formerly UNK X-412, USAF
 Unknown ~~X~~ Cem Manila #2, Luzon, P.I.)
 Cemetery ~~AGRS Mausoleum, Manila, P.I.~~
 Plot 812 DANGER 6A CR PT
 Row B Grave 501

AGRS Mausoleum, Manila, P.I.

1. Arrived at cemetery 17 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 #1 QMGR Co.
(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			
Jacket, Combat			
Mackinaw			
Sweater			
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

N
(type)

Overshoes

N
E

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: Remains are Skeleton only - (Chart attached)

Age Height Weight Description of wounds

Bandages or dressings Scars (Length, width, location)

Tattoos
(Number, location - illustrate on separate page)

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

Sunburn or tan, other than hand and face

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

Build (Large, fat, thin, muscular)

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

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

Sideburns Mustache Beard or (Color, setting, shape) (Color, size, shape) (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 20
 (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
 D

Fingers (Short, thick, long, slender, size of knuckles, missing fingers or joints)
 (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 maxilla teeth
(Yes-no)

missing; skull fractured.

9. Remarks No I.D. tags, personal effects nor physical characteristics found to warrant identification. UNK X-880 (For X-412 (NELSON, Lloyd) -For. UNK C-51, Cabanatuan Cem. Nueva Ecija, Luzon, P.I.) could be one of the ten (10) bodies found in common grave which are unidentified (1) Vaughn, Walter, Sgt; Unk; 15061420; (2) Howell, Frederick, C; S 1/c; USN; 334953; (3) NELSON, Lloyd; Pvt; 803 CE; 37037644; (4) BEASLEY, James B; Unk; Unk; R-3284522; (5) LAWLER, Lee E Pfc; 31 Inf; 19020675; (6) SIMPSON, Ben W; Sgt; 60 CAC; 6287417; (7) MATTESON, James E; Corp; USMC; 2-69284; (8) ELDRICH, Cariles; Pvt; 454 Ord; 34140025; (9) CAREY, Edward P; Pvt; Unk; 32073966; (10) WOODMAN, Edward B; Pvt; 27 Bomb; 11013467.

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.

The above names are possible to be the names of any of the Unknowns mentioned above.

Estimated weight of remains approximately- 10 lbs. /s/ John H. Barr D-234444
(Officer's Name)

SP-8 A G R S
Rank Service

C.I.P. AGRS Mausoleum, Manila, P.I.
(Organization)

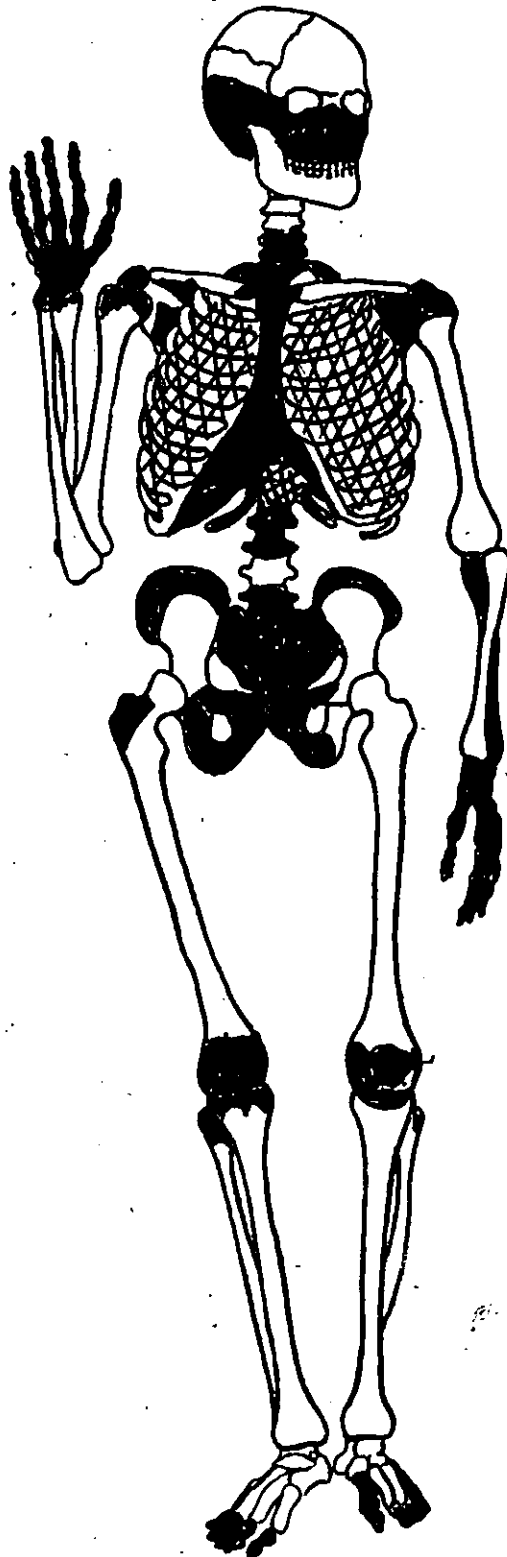
A CERTIFIED TRUE COPY:

George T. Gamboa
GEORGE T GAMBOA
2d Lt MAC

X-480

SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



X-880

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.

17 Oct '47

UNKNOWN X-880 (Formerly UNK X-412, USAF)

DATE

Cem Manila #2, Luzon, P.I.

Unknown

Unknown

LAST NAME

FIRST

INITIAL

RANK

SERIAL NO.

Unknown

Unknown

UNIT

ORGANIZATION

POW Camp Cabanatuan, N.E. Luzon, P.I.

AGRS Mausoleum
Manila, P.I.

812

B

501

PLACE OF DEATH

PLACE OF BURIAL

PLOT

ROW

GRAVE NO.

STORAGE
Missing

DANGER

BAT

CRYPT

	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	
TYPE																	TYPE
LOCATION																	LOCATION

INSIDE — LOOKING OUT

	16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16	
TYPE			o	⊗					⊗						o		TYPE
LOCATION			o												f		LOCATION

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)

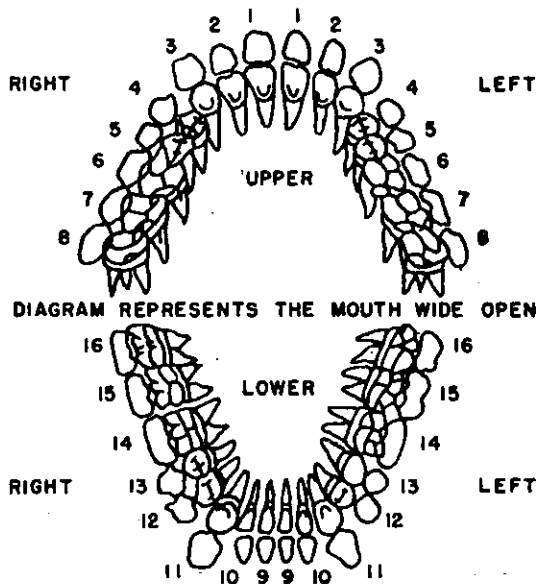
INSTRUCTIONS:

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: R-9-10-11 and L-10-11 well worn on bite surface; no fillings, two cavities. Maxilla teeth missing, skull fractured.

/s/ John H. Barr - D-234444
SIGNATURE OF PERSON WHO PREPARED CHART

/p/ JOHN H. BARR, SP-8
NAME AND RANK TYPED OR PRINTED

C.I.P. AGRS Malm, N.F. Manila, P.I.
PLACE OR HQ. WHERE THIS FORM ACCOMPLISHED

/s/ John H. Barr D-234444
VERIFIED BY GRS OFFICER

/p/ JOHN H. BARR, SP-8
NAME AND RANK TYPED OR PRINTED

17 Oct 47
DATE

A CERTIFIED TRUE COPY:
George T. Gamboa
GEORGE T GAMBOA
2d/Lt MAC

REPORT OF DISINTERMENT FOR IDENTIFICATION

10 April 1947

1. Remains of (Name) UNKNOWN X-412 (NELSON, Lloyd) (Formerly UNKNOWN C-51 Cabanatuan Cem)	Serial Number 37037644
---	---------------------------

Grade Pvt	Organization 803 CE
--------------	------------------------

Name, Number and Location of Cemetery USAF Cemetery Manila #2, Luzon, P. I.	Plot 2	Row 13	Grave No. 1607
--	-----------	-----------	-------------------

2. Date of Disinterment 10 April 1947	
--	--

3. Report as to Nature of Original Burial and Condition of Body Upon Disinterment.

Bones

4. What Identification Found at Time of Disinterment: On Marker

1 Substitute Tag

On Remains

1 Substitute Tag

What Identification Used Upon Reinterment: On Marker

1 Substitute Tag

On Remains

1 Substitute Tag

5. Signature of Officer Supervising Disinterment and Reinterment.

Bennett Hurch
BENWICK H HURCH, Capt, CME

10063

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 the 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.

Missing Teeth

Tooth Missing Tooth Missing

Crowned Teeth

Gold Crown Porcelain Crown
Gold Crown

Bridgework

Gold & Porcelain Bridge
Gold Bridge

Fillings

Silver Filling Gold Filling
Gold Filling Gold Filling

Caries (Cavities)

Cavity Decayed
Decayed Decayed

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

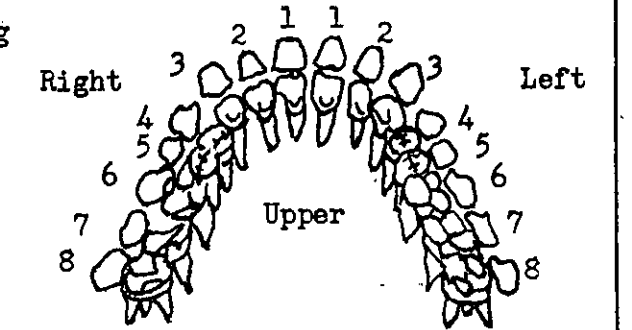
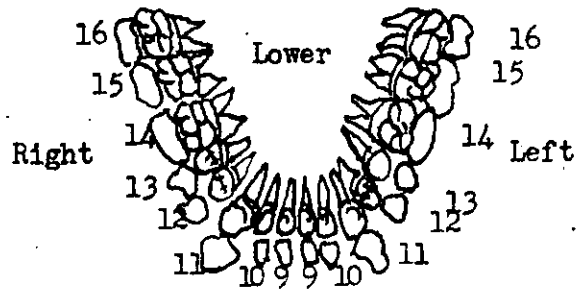


Diagram represents the mouth wide open



X-412

IDENTIFICATION DENTAL CHART

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

UNKNOWN X-412 (NELSON, Lloyd)
(Formerly UNKNOWN C-51 Cabanatuan Cem)

10 April 47

LAST NAME FIRST INITIAL

Pvt

DATE

37037644

SERIAL NO.

803 CE

POW Camp Cabanatuan

ORGANIZATION

Luzon, P.I.

USAF Cem. Manila #2

2

13

1607

PLACE OF DEATH

PLACE OF BURIAL

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	⊗	⊗	⊗	⊗	⊗	⊗	⊗							⊗	⊗	TYPE			
LOCATION																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			○	⊗				⊗						○		TYPE			
LOCATION			○											F		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	 OXYPHOSPHATE (CEMENT)	 LINGUAL (TOWARD TONGUE)
 POSTHUMOUSLY MISSING (LOST AFTER DEATH)		 FACIAL (TOWARD CHEEK)

Incl 4

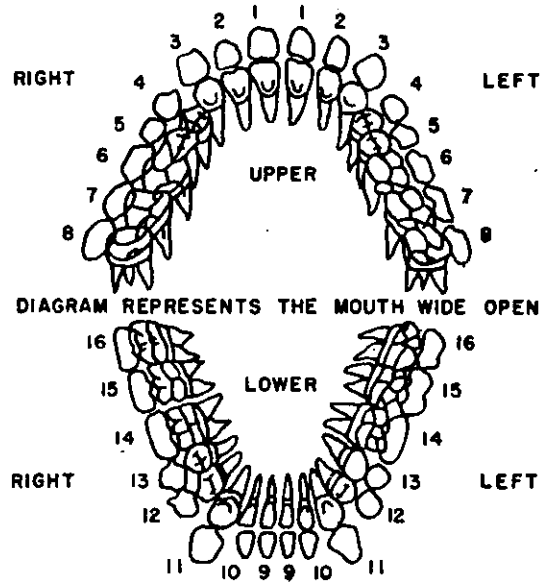
INSTRUCTIONS:

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

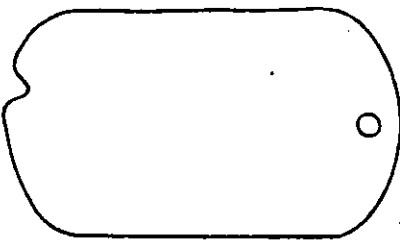
/aam

APR 5 - 1948

RESTRICTED

U 1463

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 21 Oct 47
---	---	--

Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.		
NAME (Last, first, middle initial) UNKNOWN X-880 (Formerly UNK X-412, USAF Cemetery Manila #2, Luzon, P.I.)	SERIAL No. Unknown		
GRADE Unknown	ORGANIZATION Unknown	BRANCH OF SERVICE Unknown	
RACE Unknown	RELIGION Unknown	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	

PLACE OF DEATH POW Camp Cabanatuan, Luzon, P.I.	CAUSE OF DEATH Unknown	DATE OF DEATH 25 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 17 Oct 47	HOUR 0800	BURIED IN (Shroud, blanket, or name of other) Casket	TYPE OF GRAVE MARKER None	PLOT No. 812	ROW No. BAY B	GRAVE No. CRYPT 501
------------------------------------	---------------------	--	-------------------------------------	------------------------	-------------------------	-------------------------------

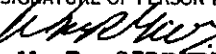

WAS THIS A REBURIAL? (Yes or no) RESTORED Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery Manila #2, Luzon, P.I.	PLOT No. 2	ROW No. 13	GRAVE No. 1607
--	--	----------------------	----------------------	--------------------------

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) STORE Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes
---	---

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORE UNKNOWN X-878	RANK	SERIAL NO.	ORGANIZATION	GRAVE No. CRYPT 503
--	------	------------	--------------	-------------------------------

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORE UNKNOWN X-857	RANK	SERIAL NO.	ORGANIZATION	GRAVE No. CRYPT 499
---	------	------------	--------------	-------------------------------

SIGNATURE OF PERSON PREPARING REPORT  Wm 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.

File 927

RESTRICTED

Section 3. UNIDENTIFIED REMAINS.

INSTRUCTIONS:


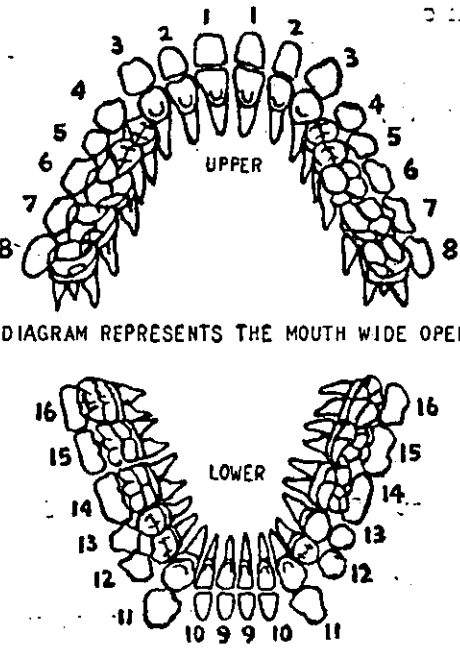



(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

LEFT LITTLE FINGER	FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>
	LEFT RING FINGER	CAVITIES	
LEFT MIDDLE FINGER	MISSING TEETH	 <p>TOOTH MISSING</p>	
LEFT INDEX FINGER	CROWNED TEETH	 <p>PORCELAIN CROWN GOLD CROWN</p>	
LEFT THUMB	BRIDGE WORK	 <p>GOLD BRIDGE</p>	
RIGHT THUMB			
RIGHT INDEX FINGER			
RIGHT MIDDLE FINGER			
RIGHT RING FINGER			
RIGHT LITTLE FINGER			

FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY
REMARKS: Subject remains were recovered from common grave of twelve two of which were identified. Previously reported UNK X-412, Nelson, Lloyd by USAF Cemetery Manila #2, Luzon, P.I.

- However, could be anyone of the following:
- VAUGHN, Walter Sgt Unk 15061420
 - HOWELL, Frederick C S 1/c USN 334953
 - NELSON, Lloyd Pvt 803 CE 37037644
 - BEASLEY, James B Unk Unk R-3284522
 - LAWLER, Lee B Pfc 81 Inf 19020675
 - SIMPSON, Ben W Sgt 60 CAC 6287417
 - MATTESON, James E Corp USMC 269284
 - ELDRICH, Carles Pvt 454 Ord 34140025
 - CAREY, Edward P Pvt Unk 32073966
 - WOODMAN, Edward B Pvt 27 Bomb 11013467

Identification Check List and Dental Chart accomplished.

24 NOV 1947

RESTRICTED

U-1463

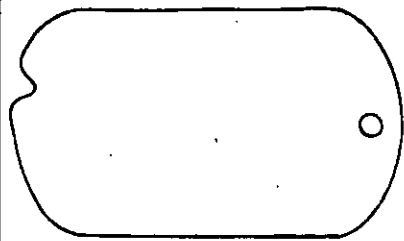
WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

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

DATE OF REPORT

24 Jan 46

Imprint Identification Tag If Possible.
DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial) UNKNOWN X-412 (NELSON, Lloyd) (Formerly UNKNOWN C-51 Cabanatuan Cemetery)		SERIAL No. 37037644
GRADE Pvt	ORGANIZATION 803 CE	BRANCH OF SERVICE Army
RACE	RELIGION Unknown	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH
PO I Camp Cabanatuan,
Luzon, P I

CAUSE OF DEATH
~~Unknown~~ **BERI-BERI**
XEROPHTHALMIA

DATE OF DEATH
25 Nov 42

EMERGENCY ADDRESSEE (Name, relationship, and address)

MRS. N.C. NELSON, BLAIR, ~~Unknown~~ NEBRASKA *Jr.*

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)
Ten (10) bodies found in common grave. Prison records indicate:
Vaughn, Walter Sgt unknown 15061420
Howell, Frederick C S 1/c USN 334953
Nelson, Lloyd Pvt 803 CE 37037644
-(See Sec 3 reverse side)-

WERE SUBSTITUTE TAGS PROVIDED?(Yes or no)

Yes (2)

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

Jan 6 58

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 Mahila #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	1607

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
PO I Camps I & II Cemetery, Cabanatuan, Luzon, PI

PLOT No.	ROW No.	GRAVE No.
8	0	810

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-413 (HEASLEY, James B)
(Formerly UNKNOWN C-52 Cabanatuan Cemetery)

RANK	SERIAL No.	ORGANIZATION	GRAVE No.
Unknown	3284522	Unknown	1606

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

STOUGHTON, John A

RANK	SERIAL No.	ORGANIZATION	GRAVE No.
Sgt	32092238		1608

SIGNATURE OF PERSON PREPARING REPORT

R. C. Barrett
R. C. BARRETT, T/4, GRS.

SIGNATURE OF GRS OFFICER VERIFYING REPORT

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

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

RESTRICTED

Serial 40'

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

LEFT
LITTLE FINGER

LEFT
RING FINGER

LEFT
MIDDLE FINGER

LEFT
INDEX FINGER

LEFT
THUMB

RIGHT
THUMB

RIGHT
INDEX FINGER

RIGHT
MIDDLE FINGER

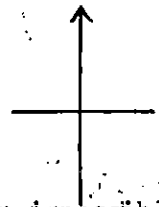
RIGHT
RING FINGER

RIGHT
LITTLE FINGER

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

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

- Beasley, James B . unknown unknown R-3284522
- Lawler, Lee E Pfc 31 Inf 19020675
- Simpson, Ben W Sgt 60 CAC 6287417
- Matteson, James E Corp USMC 269284
- Eldrich, Cariles Pvt 454 Ord 34140025
- Carey, Edward P Pvt unknown 32073966
- Woodman, Edward B 'Pvt' 27 'Bomb' 11013467



were buried in this grave. Individual identification impossible.

REMARKS: