

293 unk P.I. Manila #2  
X 470 thru 473

QUART 293

26 May 1949

Unknowns X-4094, X-4095, X-4096, and  
X-4097, AGRS Mausoleum, Manila, P. I.  
(Formerly Unknowns X-470, X-471, X-472  
and X-473, USAF Cemetery, Manila #2,  
P. I.)

293. Unk. Manila #2

X470

SUBJECT: Identification of World War II Deceased

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

ATTENTION: AGRS, PHILCOM ZONE

1. Reference is made to Board Proceedings, your headquarters, dated 12 April 1949, Subject: "Case History for Remains Considered Identifiable as a Group", recommending the identification of Unknowns X-4094, X-4095, X-4096, and X-4097, AGRS Mausoleum, Manila as the remains of:

WALKER, James M.	Cpl	2 368 077
PRUITT, Blanchard E.	Pfc	18 060 257
MORGAN, Robert R.	Pvt	18 025 313
SCHOPP, Erwin H.	Pvt	17 012 216

X243 black mat

2. Board Proceedings cannot be accepted. A comparison of Army dental records for the subject decedents, with the dental charts accomplished for the subject Unknowns indicate that, in several instances, the Unknowns could not be the remains of the decedents. The dental records for Cpl. James M. Walker indicates that this man had numerous extractions, and some of the subject Unknowns are shown as having these extractions, proving that Cpl. Walker's remains could not be in the group. The same conclusion is drawn after a comparison of the dental record for Pfc. Blanchard E. Pruitt. Additional dental information for Pvt. Erwin H. Schopp indicates that his remains are not in the group.



3. Further doubt is presented by the fact that the remains of Pfc. Allen W. Wood, ASN 37 025 869 were not recovered as the remains of ASN 37 025 823 as listed on the Cabanatuan POW Camp Death Report.

X243 black unk no



*at*

QMGT 293

Ltr 26 May 1949

Unknowns X-4094, X-4095, X-4096, and X-4097, AGHS Mausoleum Manila, P. I. (Formerly Unknowns X-470, X-471, X-472 and X-473, USAF Cemetery Manila #2, P. I.)

*R*

SUBJECT: Identification of World War II Deceased

*93 unk PI, mis Manila #2 X-470 thru 473*

4. Inclosed are OCMG Forms 371 for the subject decedents reflecting additional dental information.

5. Board Proceedings are returned herewith.

FOR THE QUARTERMASTER GENERAL:

5 Incls:

- 1 - OCMG Form 371 (in dup) (Walker)
- 2 - " " " ( " " ) (Pruitt)
- 3 - " " " ( " " ) (Morgan)
- 4 - " " " ( " " ) (Schopp)
- 5 - Board Proceedings dtd 12 Apr 49

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

*R*

REB

NJ:

cc: Adm Section

E. A. Kazup: dal *ear*  
L. M. White: *MD*  
J. Windsor *Juf*



*[Faint, illegible text]*

*[Handwritten mark]*

*[Handwritten mark]*



UNITED STATES DEPARTMENT OF JUSTICE

UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION  
WASHINGTON, D. C. 20535

IDENTIFICATION OF SUBJECTS IN THIS CASE IS BEING HANDLED BY THE IDENTIFICATION DIVISION OF THE FBI. THE RESULTS OF THIS SEARCH WILL BE FURNISHED TO THE OFFICE OF ORIGIN.

IDENTIFICATION DIVISION OF THE FBI

SEARCHED INDEXED SERIALIZED FILED

SEARCHED INDEXED SERIALIZED FILED

(SEARCHED)	(INDEXED)	(SERIALIZED)	(FILED)	(DATE)
(SEARCHED)	(INDEXED)	(SERIALIZED)	(FILED)	(DATE)
(SEARCHED)	(INDEXED)	(SERIALIZED)	(FILED)	(DATE)
(SEARCHED)	(INDEXED)	(SERIALIZED)	(FILED)	(DATE)

RE  
RE

NOV 17 1964

NOV 17 1964



293 Unk. P.I. (misc.) Manila #2 (X-470-473)

BASIC: Ltr fr Dept of the Army, OQMG, Wash. 25, D.C., file QMGMO 293, Unks X-470 thru X-473 (Manila #2) P.I., dtd 12 Dec 47, subject: Identification of Unknown Deceased.

GSGPR 293  
WOOD, Allen W.

5th Ind

CRHM/JGS/gdg\*

Headquarters, PHILRYCOM Sector, American Graves Registration Service  
APO 707, 22 April 1948

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

1. In compliance with basic communication, forwarded herewith are true copies of QMC Forms 1042 and Revised QMC Forms 1044 for Unknowns X-4094, X-4095, X-4096, and X-4097, AGRS Mausoleum, Manila, P.I., (formerly Unknowns X-470, X-471, X-472, and X-473, USAF Cemetery Manila #2), and Allen W. WOOD, 37025869.

2. Original QMC Forms 1042 will be forwarded when received by this office.

FOR THE COMMANDING OFFICER:

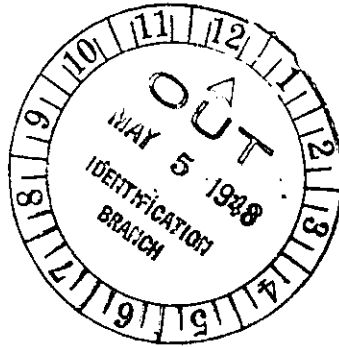
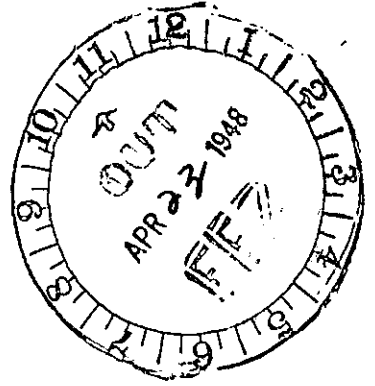
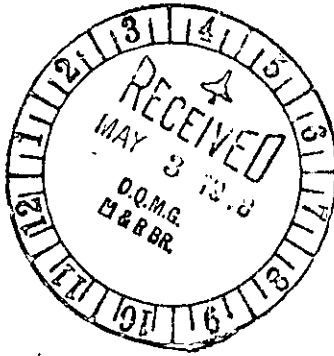
*Daniel E. Kalish*  
DANIEL E. KALISH  
1st Lt., Cml. C.  
Asst. Adjutant

5 Incls: n/c  
(2 copies each w/d)

*Incls w/d by Ident. Section*

*293 Unk - (misc.) Manila #2 (X-470-473)*

*NAV  
File  
5/5/48  
R. Grant  
Ident. Section  
293*



BASIC: Ltr fr DQWA, OQMG, Wash. 25, D.C., file QMGMU 293 Unks X-470 thru X-473 (Manila #2) P.I., dtd 12 December 1947, subj: Identification of Unknown Deceased.

GSQMM 293

3rd Ind

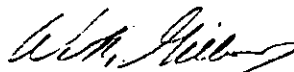
WRG/nsr

HEADQUARTERS, AMERICAN GRAVES REGISTRATION SERVICE, MAUSOLEUM, NICHOLS FIELD, APO 707, 16 April 1948

TO: Commanding Officer, AGRS Central Identification Point, APO 707

Forwarded for necessary action.

FOR THE COMMANDING OFFICER:



Wm. R. GILBERT  
Administrative Assistant

GSQMM 293

4th Ind

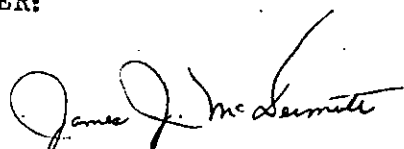
JJM:JCP/nsr

HEADQUARTERS, AGRS CENTRAL IDENTIFICATION POINT, APO 707, 20 April 1948

TO: Commanding Officer, AGRS PHILRYCOM Sector, APO 707

1. Basic communication complied with.
2. Forwarded herewith are the certified true copies of QMC Forms 1042, 1044, 1044a and 1044b for Unknowns X-470, X-471, X-472 and X-473 (Manila #2) P.I., presently designated as Unknowns X-4094, X-4095, X-4096, X-4097, AGRS Mausoleum, respectively, and Allen W. WOOD, 37025869.
3. Report of storage for subject remains will be forwarded thru normal channels to your office.

FOR THE COMMANDING OFFICER:

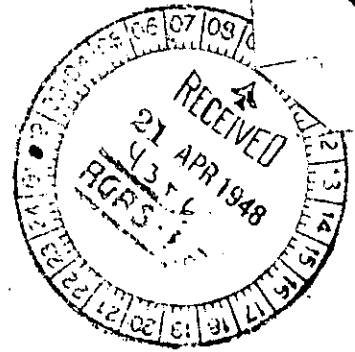


JAMES J Mc DERMOTT  
Adm Assistant

5 Incls: a/s (in trip)



APR 19 1948



BASIC: Ltr fr DOTA, OQMG, Wash. 25, D.C., file QMGMU 293 Unks X-470 thru X-473 (Manila #2) P.I., dtd 12 December 1947, subj: Identification of Unknown Deceased.

GSQMM 293

1st Ind

S: 5 Feb 48  
MSW/gyd\*

PHILRYCOM Sector Graves Registration Service, APO 707, 6 January 1948

TO: Commanding Officer, USAF Cemetery Manila #2, APO 358

1. It is requested that Unknowns X-470, X-471, X-472 and X-473, plot 2, row 15, graves 1923, 1924, 1925, 1911, respectively, and Allen W. WOOD, 37025869, plot 2, row 17, grave 2127, be exhumed in the presence of a Medical Officer, and revised QMC forms 1044 be accomplished, indicating all fillings and extracted or posthumously missing teeth, and submitted to this office at the earliest practicable date.

2. It is further requested this office be notified upon completion thereof, by indorsement hereon.

BY ORDER OF COLONEL MURPHEY:



HAROLD F. REVERSKI  
Lt. Col., USAF  
Executive

GSQMM 293

2nd Ind

WCS:CFB/jbr

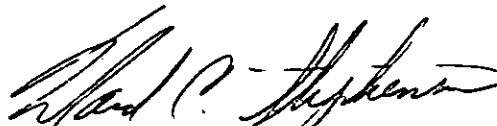
HEADQUARTERS, UNITED STATES ARMED FORCES CEMETERY MANILA #2, APO 358

8 January 1948

TO : Commanding Officer, AGRS Mausoleum, APO 707

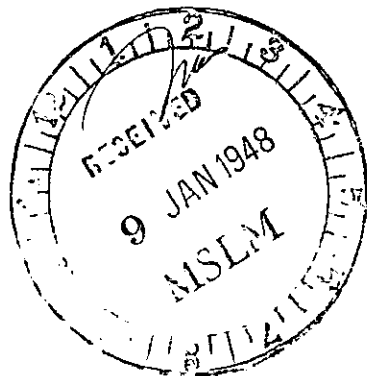
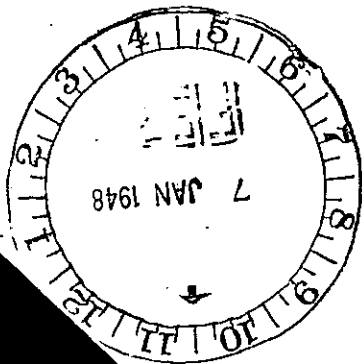
1. Your attention is invited to preceding correspondence.

2. Remains of subject Unknowns were shipped to your Office  
6 January 1948.



WARD C STEPHENSON  
1st Lt., QMC  
Commanding Officer

WOOD  
2098  
2099  
2091  
2097



APR 19 1948

DEPARTMENT OF THE ARMY  
~~NAVY DEPARTMENT~~

OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON 25, D. C.

IN REPLY REFER TO

QMGMU 293

Unks X-470 thru X-473  
(Manila #2) P.I.

12 December 1947

SUBJECT: Identification of Unknown Deceased

TO : Commanding General  
Philippine-Ryukyus Command  
APO 707, c/o Postmaster  
San Francisco, California

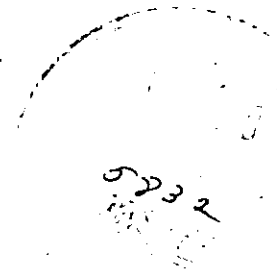
1. Reference is made to Reports of Reinterment submitted to this office for Unknowns X-470, X-471, X-472 and X-473, Plot 2, Row 15, Graves 1923, 1924, 1925, 1911, respectively; and Wood, Allen W., 37025869, Plot 2, Row 17, Grave 2127, USAF Cemetery, Manila #2, Luzon, P. I.

2. It is requested that the remains of these casualties be exhumed in the presence of a medical officer and Revised QMC Forms 1044 be accomplished, indicating all fillings and extracted or posthumously missing teeth and submitted to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

*James C. MacFarland*  
JAMES C. MacFARLAND  
Major, QMC  
Memorial Division

APR 19 1948



DEC 12 11 54 AM '47  
O. Q. H. C.  
MAIL & RECORDS SECTION

RECEIVED  
DEC 12 1947

TO: SAC, NEW YORK

FROM: SAC, NEW YORK (100-100000) (P)  
SUBJECT: [Illegible]

RE: [Illegible]

[Illegible text]

[Illegible text]

[Illegible text]

[Illegible text]



DEPARTMENT OF THE ARMY  
////////////////////

QIGMU 293  
Unks X-470 thru X-473  
(Manila #2) P.I. *(misc)*

12 December 1947

*g*

SUBJECT: Identification of Unknown Deceased

TO : Commanding General  
Philippine-Ryukyus Command  
APO 707, c/o Postmaster  
San Francisco, California

1. Reference is made to Reports of Reinterment submitted to this office for Unknowns X-470, X-471, X-472 and X-473, Plot 2, Row 15, Graves 1923, 1924, 1925, 1911, respectively; and Wood, Allen W., 37025869, Plot 2, Row 17, Grave 2127, USAF Cemetery, Manila #2, Luzon, P. I.

2. It is requested that the remains of these casualties be exhumed in the presence of a medical officer and Revised CMC Forms 1044 be accomplished, indicating all fillings and extracted or posthumously missing teeth and submitted to this office at the earliest practicable date.

FOR THE QUARTERMASTER GENERAL:

JAMES C. MacFARLAND  
Major, CMC  
Memorial Division

*N/S*

DEC 12 11 54 AM '47  
O. D. M. C.  
MAIL & RECORDS BRANCH



tmd  
sen  
12

*mf*

*Y293 Unk. P.I. X-470 thru X-473 (Manila #2)*



48

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/bpm <b>1</b> /add	Interred 21 Feb 1950 C 12 83 Ft McKinley <i>care mark</i> CARL R. H. MARK Cemetery Superintendent		DISINTERMENT DIRECTIVE 7147 80654		DATE 09 02 50 DAY MONTH YEAR		
	SECTION A - NAME AND BURIAL LOCATION OF DECEASED		DIRECTIVE NUMBER		DATE		

PREPARED BY PHILCOM

NAME <b>UNKNOWN X - 470</b>		SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
CEMETERY <b>USAF CEMETERY MANILA NO. 2, P. I.</b>		PLOT <b>2</b>	ROW <b>15</b>	GRAVE <b>1923</b>	DISPOSITION OF REMAINS 7701 80 CODE DIST. CTR.	

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE <b>UNITED STATES MILITARY CEMETERY FT. WM. MCKINLEY, P. I.</b>	NAME AND ADDRESS OF NEXT OF KIN <b>(BY ADMINISTRATIVE DECISION)</b>
---	--

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME <b>UNKNOWN X - 470</b>	SERIAL NUMBER	GRADE	DATE OF DEATH	DATE DISTINTERRED <b>20 Feb '50</b>
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY <b>PAUL R NICHOLS</b> Embalmer NAME AND TITLE	

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL <b>Shelter Half</b>	CONDITION OF REMAINS <b>Skeletal</b>
OTHER MEANS OF IDENTIFICATION <b>X - 4094 Maus.</b>	

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

REMAINS PREPARED AND PLACED IN CASKET

DATE <b>20 Feb '50</b>	BY <b>PAUL R NICHOLS</b>
CASKET SEALED BY <b>PAUL R NICHOLS</b>	EMBALMER (Signature) <i>Paul R Nichols</i> <b>PAUL R NICHOLS</b>

CASKET BOXED AND MARKED <b>RAYMOND H TANGUAY,</b> DATE <b>20 Feb '50</b> <b>Sgt 1c, RA</b>	SHIPPING ADDRESS VERIFIED BY <b>L. W. RICHARDSON, M/Sgt, RA</b>
--	--

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

30 MAR 1950  
REPATRIATION BRANCH  
*[Signature]*



## RECORD OF CUSTODIAL TRANSFER

### 1. SHIPPED

FROM <b>AGRS MAUSOLEUM</b>		TO <b>US MILITARY CEMETERY</b>	
KIND OF CONVEYANCE <b>TRUCK</b>		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Carrollmark</i>	DATE <b>FEB 21 1950</b>

### 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

DISINTERMENT DIRECTIVE

3

SECTION A - NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

DATE

7701 20654

09 02 50  
DAY MONTH YEAR

NAME SERIAL NUMBER GRADE ARM RACE RELIGION

CEMETERY PLOT ROW GRAVE DISPOSITION OF REMAINS  
WAS CHRISTIAN BURIAL NO. 2, P. I. 3 15 2063 T701 02

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE  
DEFENSE STATES RELIGIOUS COMMITTEE  
PT. ST. MICHAEL, P. I.

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

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME SERIAL NUMBER GRADE DATE OF DEATH DATE DISINTERRED

IDENTIFICATION TAG ON ORGANIZATION RELIGION IDENTIFICATION VERIFIED BY  
 REMAINS  
 MARKER

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

CASKET SEALED BY EMBALMER (Signature)

CASKET BOXED AND MARKED SHIPPING ADDRESS VERIFIED 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 AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

RECORD OF DISINTERMENT OPERATIONS

MAR 1950  
REPATRIATION  
BRANCH

John

Incl # 10

DISINTERMENT DIRECTIVE

3

SECTION A —  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

7747 80654

DATE

09 02 50

DAY MONTH YEAR

NAME	SERIAL NUMBER	GRADE	ARM	RACE	RELIGION
UNKNOWN I - 470					

CEMETERY	PLOT	ROW	GRAVE	DISPOSITION OF REMAINS
USAF CEMETERY MANILA NO. 2, P. I.	2	15	1923	7701 80
				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. SM. 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	
<input type="checkbox"/> REMAINS <input type="checkbox"/> 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 BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
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 AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

John

# RECORD OF CUSTODIAL TRANSFER

## 1. SHIPPED

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

## 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

QAGLT 293  
GRS Far East

30 December 1949

SUBJECT: Approval of Unidentifiability

TO : Commanding Officer  
American Graves Registration Service  
Philcom Zone  
AR 900, c/o Postmaster  
San Francisco, California

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

Unknown X-4094,	AGRS Maus Manila,	formerly X-470,	USAF Cem Manila #2
" X-4095,	" " " "	X-471,	" " " "
" X-4096,	" " " "	X-472,	" " " "
" X-4097,	" " " "	X-473,	" " " "

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

FOR THE QUARTERMASTER GENERAL:

T. H. ETZ  
Lt. Colonel, QMG  
Memorial Division

H. McLaurin:dal  
L. M. White  
J. Windsor

Copy furnished: CINCFFE, AR 500

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
PHILCOM ZONE

AFO 900  
6 December 1949

GSGR 293  
(Cabanatuan POW)

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 QMGN 293, GRS (Far East), dated 17 September 1948, subject: Resolution of Cases of Unidentified Deceased, the following Unknown remains originally disinterred from Grave 822, Cabanatuan POW Cemetery and 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-4094 AGRS Mslm  
" X-4095 " "

UNKNOWN X-4096 AGRS Mslm  
" X-4097 " "

2. Above listed Unknowns could not be definitely associated with any of the Cabanatuan POW decedents due to insufficiency of positive identification factors.

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

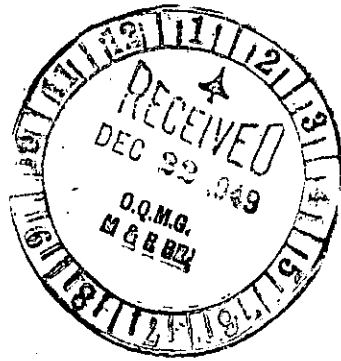
4. Also submitted herewith a list showing the status of all Unknowns recovered from afore-mentioned grave.

FOR THE COMMANDING OFFICER:

5 Incls  
1 - 4: QMC Forms 1044 w/Certificates  
of Unidentifiability  
5: List of Unknowns

/s/ John Shypula  
JOHN SHYPULA  
1st Lt., Infantry  
Adjutant







273  
293 - Unk. P. I. (Misc.) (Manila #2) (X-470 thru X-473)

26 May 1949

SUBJECT: Identification of World War II Deceased

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

ATTENTION: AGRS, PHILCOM ZONE

1. Reference is made to Board Proceedings, your headquarters, dated 12 April 1949, Subject: "Case History for Remains Considered Identifiable as a Group", recommending the identification of Unknowns X-4094, X-4095, X-4096, and X-4097, AGRS Mausoleum, Manila as the remains of:

WALKER, James M.	Cpl	2 368 077
FRUITT, Blanchard E.	Pfc	18 060 257
MORGAN, Robert R.	Pvt	18 025 313
SCHOPP, Erwin H.	Pvt	17 012 216

2. Board Proceedings cannot be accepted. A comparison of Army dental records for the subject decedents, with the dental charts accomplished for the subject Unknowns indicate that, in several instances, the Unknowns could not be the remains of the decedents. The dental records for Cpl. James M. Walker indicates that this man had numerous extractions, yet none of the subject Unknowns are shown as having these extractions, proving that Cpl. Walker's remains could not be in the group. The same conclusion is drawn after a comparison of the dental record for Pfc. Blanchard E. Pruitt. Additional dental information for Pvt. Erwin H. Schopp, indicates that his remains are not in the group.

3. Further doubt is presented by the fact that the remains of Pfc. Allen W. Wood, ASN 37 025 869 were not recovered from Grave No. 822 as listed on the Cabanatuan POW Camp Death Report.

4. Inclosed are OQM Form 371 for the subject decedents reflecting additional dental information.

5. Board Proceedings are returned herewith.

FOR THE QUARTERMASTER GENERAL:

5 Incls:

1 - OQM Form 371 (in dup) (Walker)  
2 - " " " ( " " ) (Pruitt)  
3 - " " " ( " " ) (Morgan)  
4 - " " " ( " " ) (Schopp)  
5 - Board Proceedings dtd 12 Apr 49

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

COPY: mfs

*Handwritten:* X-473 Unk P.I. X-470 Manila #2

Ann

FILE UNDER NO. 293 - Unk. P. I. X-470 (Manila #2)

INDEX SHEET

SYNOPSIS

Letter

12 Dec. 1947

FROM: CQMG

TO: CG, Philippine-Ryukyus Command, APB 707, San Francisco, Calif.

SUBJ: Identification of Unknown Deceased

DOCUMENT FILED UNDER NO. 293 - Unk. P. I. (Misc.) (Manila #2) Unk.(X-470 thru X-475)

mfs:

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
PHILCOM ZONE

18 Oct. 1949

Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 470, Plot 2,  
Row 15, Grave 1923, USMC USAF Cem. Manila #2 have  
been reviewed and it is the opinion of this office that insufficient  
evidence is available to establish the identity of this deceased,  
and that these remains should be classified as unidentifiable.

FOR THE COMMANDING OFFICER:

*B. McNemar*

B. MCNEMAR  
Captain, QMC  
Chief, Records Branch

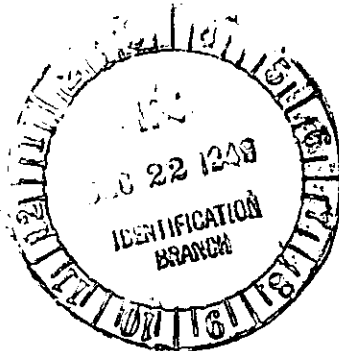
Atch: Form 1044

Received ..... 22 Dec 49 ..... 0010  
Not identifiable from  
information presently *OV O'Kearin*  
available 30 Dec 49

*2*

CONFIDENTIAL  
PROPERTY OF THE FBI  
DO NOT DISSEMINATE  
EXCEPT AS AUTHORIZED  
BY THE FBI

7/25/41  
10/1/41  
11/1/41



*[Illegible handwritten scribbles]*

*[Illegible handwritten scribbles]*

**IDENTIFICATION DATA**

1. REMAINS OF UNKNOWN <b>UNKNOWN X-4094 (Formerly UNK X-470 Manila #2)</b>	2. DATE OF REPORT <b>20 Oct 1949</b>
---	---

3. NAME OF CEMETERY <b>AGRS Mausoleum, Manila, P.I.</b>	4. PLOT <b>801</b>	5. ROW <b>X</b>	6. GRAVE <b>5354</b>	7. DATE OF	
				DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT <b>U T D</b>	9. ESTIMATED HEIGHT <b>U T D</b>	10. COLOR OF HAIR <b>U T D</b>	11. RACE <b>U N K N O W N</b>
-------------------------------------	-------------------------------------	-----------------------------------	----------------------------------

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?	TO WHAT EXTENT?
----------------------	-----------------

YES  NO

15. WAS BODY MANGLED?	TO WHAT EXTENT?
-----------------------	-----------------

YES  NO

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)

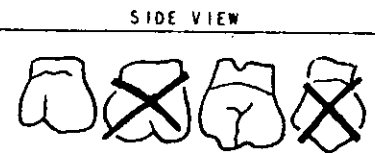
**N O N E**

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

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:



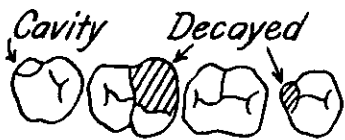
**BRIDGE WORK:** BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



**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:



Missing

RIGHT								LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
P							P	P	P				P		P
Side Views								Side Views							
UPPER								UPPER							
LOWER								LOWER							
Attrition								Attrition							
Side Views								Side Views							
			X												
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 from I1 to I8 missing. I3, I4, I5 and I7 are found loose with remains.

*Paul R. Nichols*

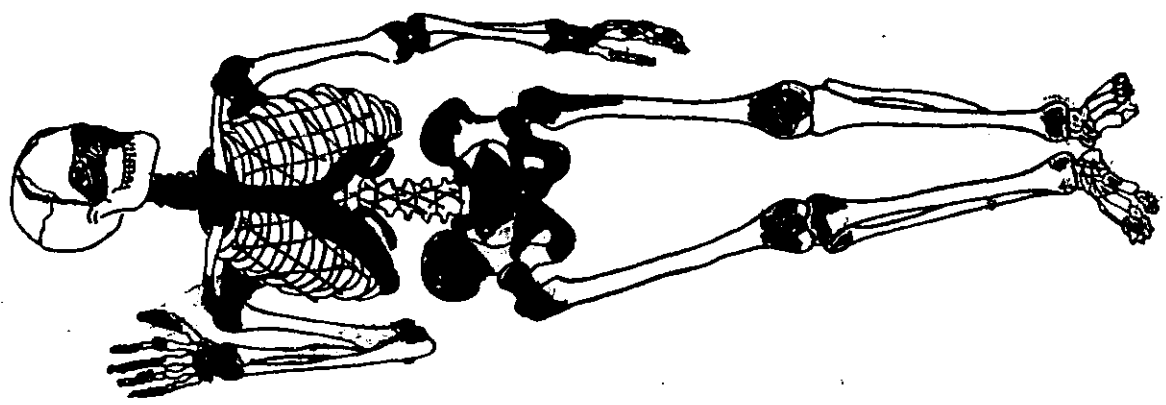
PAUL R NICHOLS  
Chief, Identification Section

"UNIDENTIFIABLE"

BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA

19. BLACK-OUT PARTS OF BODY NOT RECOVERED

Vertebrae 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 - 6½ 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 Section

**IDENTIFICATION DATA**

1. REMAINS OF UNKNOWN X-4094 (Formerly UNK X-470, USAF Cem Manila #2, Luzon, P.I.)			2. DATE OF REPORT 30 Mar 48		
3. NAME OF CEMETERY  AGRS Mausoleum, Manila, P.I.	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	801	X	5354	DISINTERMENT	REINTERMENT STORAGE
				17 Dec 47	1 April 48

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT UTD	10. COLOR OF HAIR UTD	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)

No clothing. No personal effects nor any other means of identification found with remains.



18.

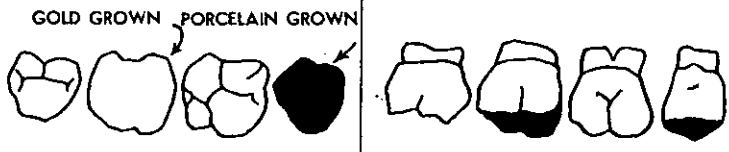
TOOTH CHART

v-4094

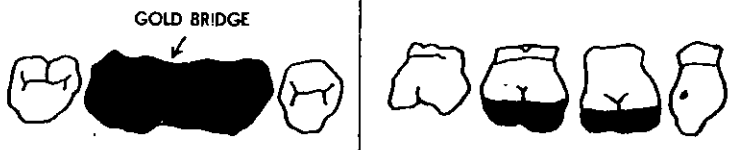
MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED THUS:



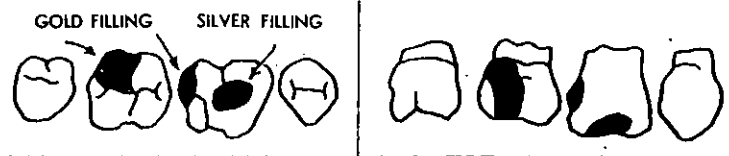
CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD PORCELAIN SILVER OR GOLD AND PORCELAIN), THUS:



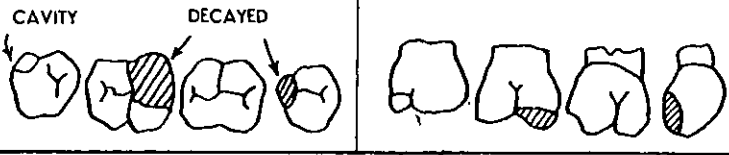
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:



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
<del>8</del>							<del>1</del>	<del>1</del>	<del>2</del>	<del>3</del>			<del>6</del>		<del>8</del>
SIDE VIEWS								SIDE VIEWS							
TOP VIEWS								TOP VIEWS							
UPPER								UPPER							
LOWER								LOWER							
SIDE VIEWS								SIDE VIEWS							
			X												
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

*MISSING* (handwritten above LEFT header)

*ATTRITION* (handwritten above LOWER teeth)

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

Maxilla from L1 to L8 missing. L3, L4, L5 and L7 are found loose with remains.

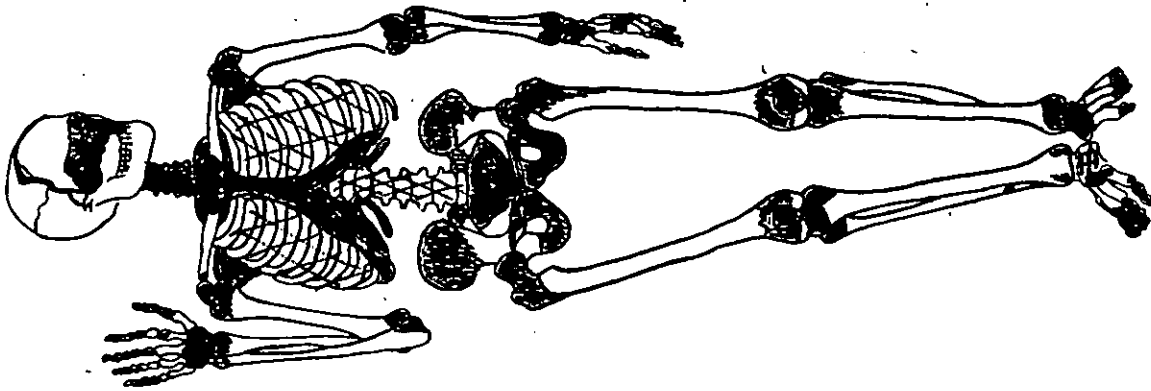
CERTIFIED TRUE COPY:

*[Signature]*  
 L S PANOFIC  
 1st Lt Inf

/s/ Joseph D. Murphy T/5

19. BLACK OUT PARTS OF BODY NOT RECOVERED

Vertebrae 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

Broken skull  
Estimated weight of remains 6½ lbs.  
Unable to determine the height due to decomposition of major or long bones.  
This remains is one of a group disinterred from Grave 822, Row O, Plot 8 of Cabanatuan POW Camps Cemetery, Luzon, P.I.

CERTIFIED TRUE COPY:

*L S Panopio*  
L S PANOPIO  
1st Lt Inf

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

/p/ EDWARD F. MORIARTY  
CIP LAB MANILA, P.I.

SIGNATURE

/s/ Edward F. Moriarty

OMO Form 1044 Rev. 1 Apr. 1945	<b>RESTRICTED</b>	Date 17 Dec 47
<b>REPORT OF DISINTERMENT FOR IDENTIFICATION</b>		

1. Remains of (Name)  UNKNOWN X-470	Serial Number
---	---------------

Grade	Organization
-------	--------------

.Name, Number and Location of Cemetery  USAF Cem Manila #2, Luzon P.I	Plot  2	Row  15	Grave No.  1923
---	---------------	---------------	-----------------------

2. Date of Disinterment  17 Dec 47	
--	--

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

Skeletal remains.

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

One (1) substitute tag

On Remains

One (1) substitute tag

~~What Identification Used Upon Reinterment: On Marker~~

On Remains

5. Signature of Officer Supervising Disinterment and Reinterment.

  
 WARD C STEPHENSON 1st Lt., OMC

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**



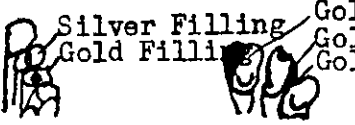
Gold Crown      Porcelain Crown  
Gold Crown

**Bridgework**



Gold & Porcelain Bridge  
Gold Bridge

**Fillings**



Silver Filling      Gold Filling  
Gold Filling      Gold Filling  
Gold Filling

**Caries (Cavities)**



Cavity      Decayed  
Decayed      Decayed

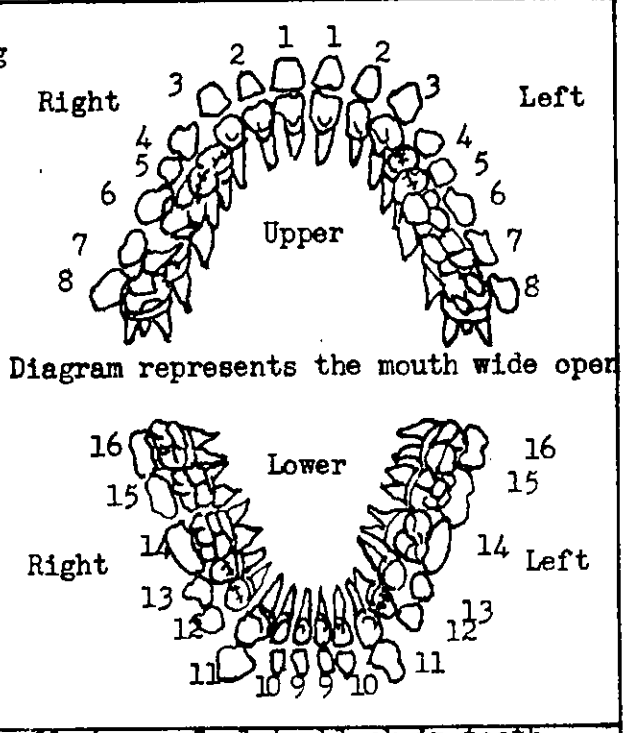
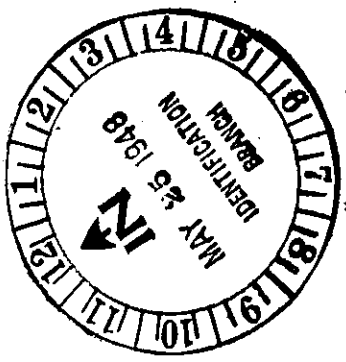


Diagram represents the mouth wide open

**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**



**IDENTIFICATION DATA**

1. REMAINS OF UNKNOWN X-4094 (Formerly UNK X-470, USAF Cem Manila #2, Luzon, P.I.)	2. DATE OF REPORT 30 Mar 48
---	--------------------------------

3. NAME OF CEMETERY  AGRS Mausoleum, Manila, P.I.	4. PLOT 801	5. ROW X	6. GRAVE 5354	7. DATE OF DISINTERMENT      REINTERMENT 17 Dec 47      STORAGE 1 Apr 48	
	MANAGER BAY CRYPT				

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT UTD	9. ESTIMATED HEIGHT UTD	10. COLOR OF HAIR UTD	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)

No clothing. No personal effects nor any other means of identification found with remains.

	TOP VIEW	SIDE VIEW
<p><b>MISSING TEETH:</b> ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED THUS:</p>	<p>TOOTH MISSING</p>	
<p><b>CROWNED TEETH:</b> BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD PORCELAIN SILVER OR GOLD AND PORCELAIN), THUS:</p>	<p>GOLD CROWN PORCELAIN CROWN</p>	
<p><b>BRIDGE WORK:</b> BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:</p>	<p>GOLD BRIDGE</p>	
<p><b>FILLINGS:</b> DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:</p>	<p>GOLD FILLING SILVER FILLING</p>	
<p><b>CARIES (Cavities):</b> 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
<del>8</del>							<del>1</del>	<del>1</del>	<del>2</del>	<del>3</del>			<del>6</del>		<del>8</del>
SIDE VIEWS															
UPPER															
LOWER															
SIDE VIEWS															
			X												
16	15	14	13	12	11	10	9	9	10	11	12	13	14	15	16

*Missing*

*ATTENTION*

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

Maxilla from L1 to L8 missing. L3, L4, L5 and L7 are found loose with remains.

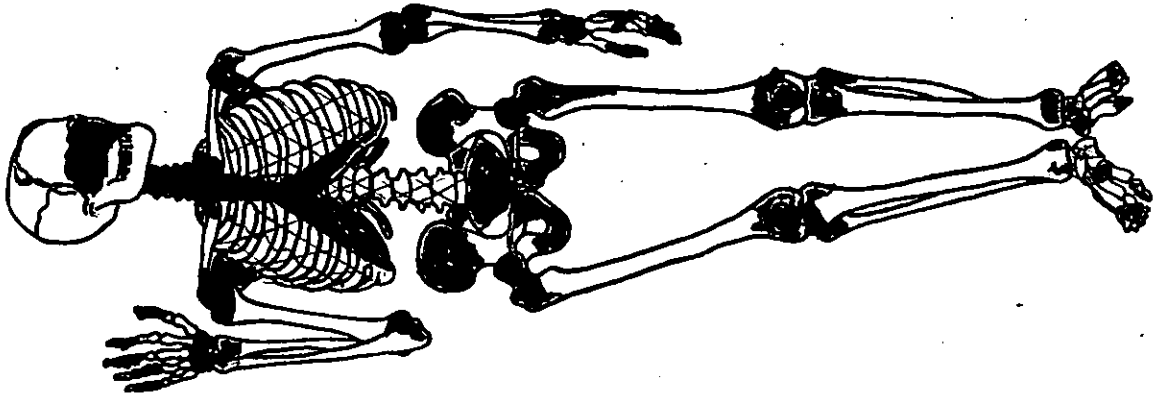
CERTIFIED TRUE COPY: -

*Joseph D. Murohy*  
 S PANCPTO  
 1st Lt Inf

/s/ Joseph D. Murohy T/5

19. BLACK OUT PARTS OF BODY NOT RECOVERED

Vertebral 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 \_\_\_\_\_ Decedents Based on the Presence of One or More of the Following Anatomical Parts:  
NUMBER

\_\_\_\_\_  
SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

Broken skull  
Estimated weight of remains 6½ lbs.  
Unable to determine the height due to decomposition of major or long bones.  
This remains is one of a group disinterred from Grave 822, Row O, Plot 8 of Cabanatuan POW Camps Cemetery, Luzon, P.I.

CERTIFIED TRUE COPY:

*[Handwritten Signature]*  
L S PANOFILO  
1st Lt af

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  
/p/ EDWARD F MORIARTY  
CIP LAB MANILA, P.I.

SIGNATURE

/s/ Edward F. Moriarty

MAY 25 1948

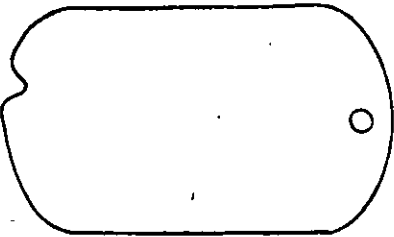
RESTRICTED

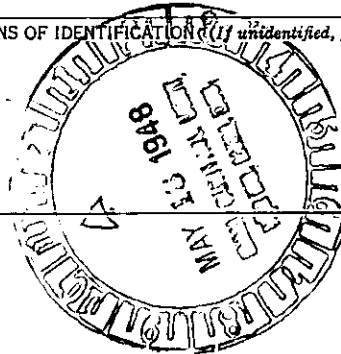
U 1074

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

DATE OF REPORT

7 April 48

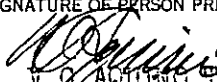
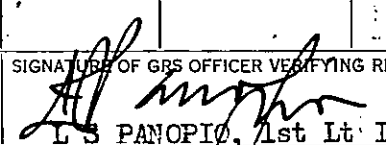
Imprint Identification Tag If Possible. DO NOT TYPE		Section 1.—IDENTIFICATION.		
		NAME (Last, first, middle initial) UNKNOWN X-4094 (Formerly UNK X-470, USAF Cemetery Manila #2, Luzon, P.I.)		SERIAL No. Unknown
		GRADE Unknown	ORGANIZATION Unknown	BRANCH OF SERVICE Unknown
		RACE Unknown	RELIGION Unknown	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
PLACE OF DEATH Cabanatuan POW Camps I & II, Luzon, P.I.	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) 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 1 Apr 48	HOUR 0930	BURIED IN (Shroud, blanket, or name of other) STORED Casket	TYPE OF GRAVE MARKER None	PLOT No. 801	ROW No. X	GRAVE No. CRYPT 5354
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. 15	GRAVE No. 1923
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY				
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) STORED Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes					
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORED UNKNOWN X-4095	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 5355		
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED UNKNOWN X-4093	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 5353		
SIGNATURE OF PERSON PREPARING REPORT  G. A. ADAMS, 1/5 OMC			SIGNATURE OF GRS OFFICER VERIFYING REPORT  L. S. PANOPIO, 1st 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

Incl 373



**Section 3. UNIDENTIFIED REMAINS.**

**INSTRUCTIONS:**


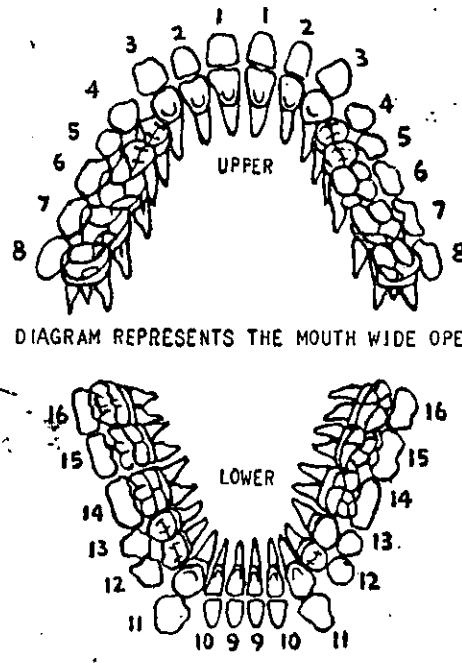





(a) Great care will be taken to record the most minute clues for the future identity of unidentified remains. Fill in anatomical characteristics below, and any other clues under "Other," such as shoe size, social security number; position of body found in airplanes, vehicles, and tanks; and serial numbers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

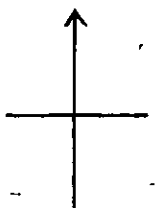
HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS

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

**OTHER IDENTIFICATION CLUES**

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

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



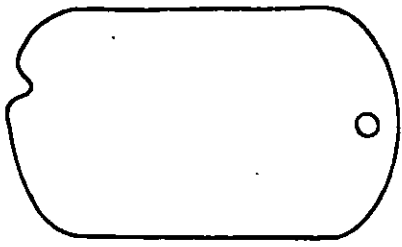
REMARKS: UNKNOWN X-4094, AGRS Mausoleum, Manila, P.I., formerly UNK X-470, USAF Cemetery Manila #2, Luzon, P.I., could possibly be any one of the persons listed on previous Report of Reinterment, USAF Cemetery Manila #2, Luzon, P.I.  
QMC Form No 1044, 1044-A and 1044-B accomplished.

14 APR 1948

/aam

RESTRICTED

WD QMC FORM 1042 (Rev. 1 Apr. 1946) (Supersedes GRS Form 1)	<b>REPORT OF INTERMENT</b> <b>(AR 30-1810 and AR 30-1815) STORAGE</b>	DATE OF REPORT 7 April '48
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Imprint Identification Tag If Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.		
NAME (Last, first, middle initial) UNKNOWN X-4094 (Formerly UNK X-470, 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 Cabanatuan POW Camps I & II, Luzon, P.I.	CAUSE OF DEATH Unknown	DATE OF DEATH Unknown
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EMERGENCY ADDRESSEE (Name, relationship, and address)

Unknown

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If 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	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
1 Apr 48	0930	Casket	None	801	X	5354

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.	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width: 33%;">PLOT No.</th> <th style="width: 33%;">ROW No.</th> <th style="width: 33%;">GRAVE No.</th> </tr> <tr> <td>2</td> <td>15</td> <td>1923</td> </tr> </table>	PLOT No.	ROW No.	GRAVE No.	2	15	1923
PLOT No.	ROW No.	GRAVE No.						
2	15	1923						

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) STORED Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes	

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORED UNKNOWN X-4095	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 5355
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BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED UNKNOWN X-4093	RANK	SERIAL No.	ORGANIZATION	GRAVE No. CRYPT 5353
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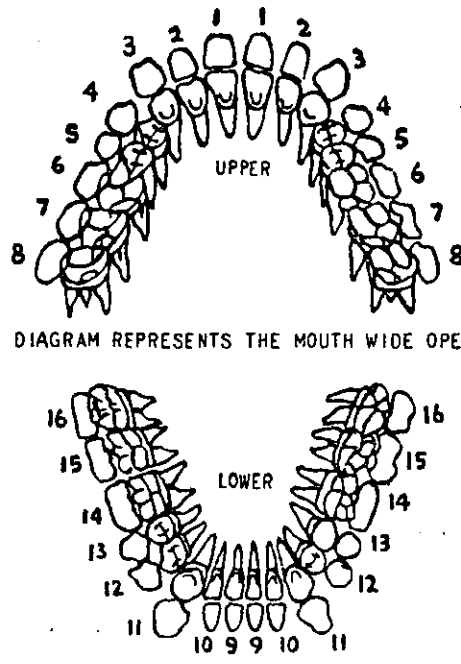





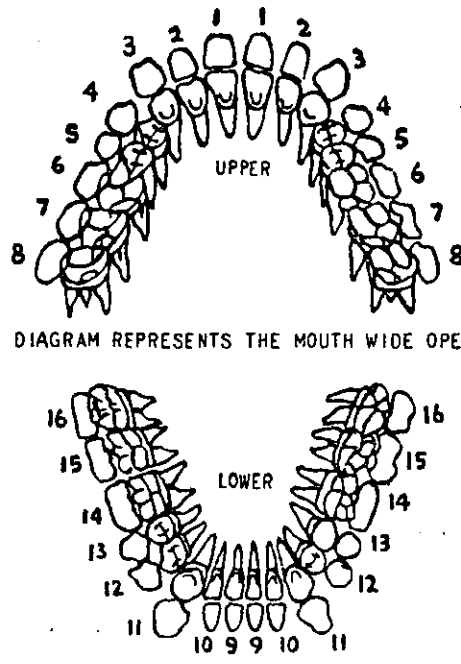





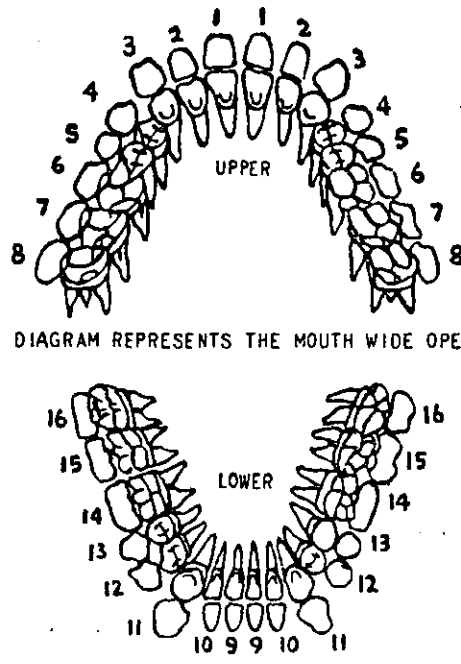




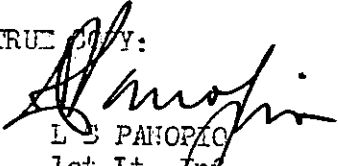
SIGNATURE OF PERSON PREPARING REPORT s/t/ C AQUINO T/5 QMC	SIGNATURE OF GRS OFFICER VERIFYING REPORT s/t/ L S PANOPIO, 1st Lt. Inf
---	--

**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

Incl #1

**RESTRICTED**

LEFT LITTLE FINGER	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.															
LEFT RING FINGER	HEIGHT	WEIGHT	BIRTHMARKS, SCARS, OR TATTOOS													
	COLOR OF EYES	COLOR OF HAIR														
LEFT MIDDLE FINGER	WEAPON AND SERIAL NO.		WHERE BODY WAS BURIED OR FOUND													
	LAUNDRY MARKS															
	OTHER IDENTIFICATION CLUES															
LEFT INDEX FINGER	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">FILLINGS</td> <td style="width:30%;">                  SILVER FILLING GOLD FILLING             </td> <td rowspan="6" style="width:40%; text-align:center; vertical-align: middle;">                  UPPER LOWER DIAGRAM REPRESENTS THE MOUTH WIDE OPEN             </td> </tr> <tr> <td>CAVITIES</td> <td>                  CAVITY DECAYED             </td> </tr> <tr> <td>MISSING TEETH</td> <td>                  TOOTH MISSING             </td> </tr> <tr> <td>CROWNED TEETH</td> <td>                  PORCELAIN CROWN GOLD CROWN             </td> </tr> <tr> <td>BRIDGE WORK</td> <td>                  GOLD BRIDGE             </td> </tr> <tr> <td></td> <td></td> </tr> </table>			FILLINGS	 SILVER FILLING GOLD FILLING	 UPPER LOWER DIAGRAM REPRESENTS THE MOUTH WIDE OPEN	CAVITIES	 CAVITY DECAYED	MISSING TEETH	 TOOTH MISSING	CROWNED TEETH	 PORCELAIN CROWN GOLD CROWN	BRIDGE WORK	 GOLD BRIDGE		
FILLINGS				 SILVER FILLING GOLD FILLING	 UPPER LOWER DIAGRAM REPRESENTS THE MOUTH WIDE OPEN											
CAVITIES				 CAVITY DECAYED												
MISSING TEETH				 TOOTH MISSING												
CROWNED TEETH				 PORCELAIN CROWN GOLD CROWN												
BRIDGE WORK				 GOLD BRIDGE												
LEFT THUMB																
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: UNKNOWN X-4094, AGRS Mausoleum, Manila, P.I., formerly UNK X-470, USAF Cemetery Manila #2, Luzon, P.I., could possibly be anyone of the persons listed on previous Report of Reinterment, USAF Cemetery Manila #2, Luzon, P.I. QMC Form No 1044, 1044-A and 1044-B accomplished.															
	REMARKS: CERTIFIED TRUE COPY:  L. S. PANOPIO 1st Lt.															

**RESTRICTED**

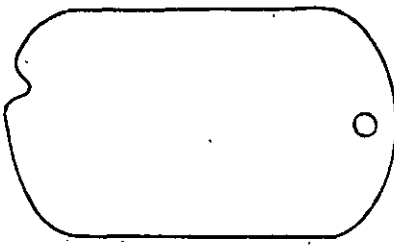
RESTRICTED U-

U 1074

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  
29 January 1946

<p>Imprint Identification Tag If Possible. DO NOT TYPE</p> 	Section 1.—IDENTIFICATION.		
	NAME (Last, first, middle initial) UNKNOWN X - 470 (Formerly Unknown C-72 Cabanatuan Cemetery, Luzon, P. I.)		SERIAL No.
	GRADE	ORGANIZATION	BRANCH OF SERVICE
	RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH Cabanatuan PO W Camp I and II, Luzon, P. I.	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) prison records indicate five (5) bodies named below were buried in this grave but only four were found: Sgd1. Walker, James W. Corp. 31 Inf. R-2368077 Sgd2. Wood, Allen W. Pfc. 194 Tank 37025869 (See reverse side section 3)
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (2)	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

*Incl 154* None

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY  
USAF Cemetery Manila No. 2, Luzon, P. I.

DATE OF BURIAL 31 Dec. 1945	HOUR 0900	BURIED IN (Shroud, blanket, or name of other) helmet half	TYPE OF GRAVE MARKER Cross	PLOT No. 2	ROW No. 15	GRAVE No. 1923
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WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE PO W camps I and II Cemetery, Cabanatuan, Nueva Ecija, Luzon, P. I. - 45.7-70.9 1/50,000	PLOT No. 8	ROW No. 0	GRAVE No. 822
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TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
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IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes
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BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) UNKNOWN X - 469 (McINTIRE, Raymond K.) Formerly Unkn. C-71, Cabanatuan cem., Luzon, P. I.)	RANK CTM	SERIAL No. 2085907	ORGANIZATION USN	GRAVE No. 1922
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BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) UNKNOWN X - 471 (Formerly Unknown C-73 Cabanatuan Cemetery, Luzon, P. I.)	RANK	SERIAL No.	ORGANIZATION	GRAVE No. 1924
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SIGNATURE OF PERSON PREPARING REPORT <i>R. C. Barrett</i> R. C. BARRETT, T/4, GRS.	SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>E. M. Moore</i> 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**

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.


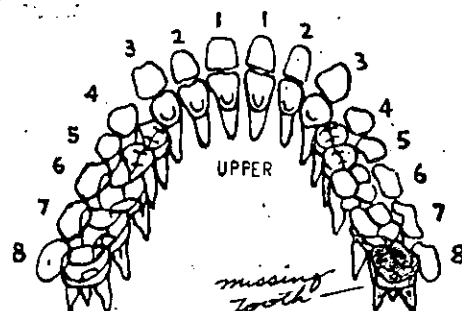
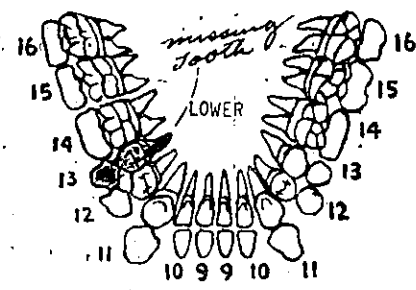





16 FEB 1946

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS

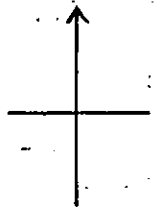
WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND

**OTHER IDENTIFICATION CLUES**

8na3. Morgan, Robert R. Pvt. 7 MAT 18025313  
 8na4. Pruitt, Blanchard E. Pvt. MD 18060257  
 8na5. Schopp, Erwin H. Unknown 59 CAC 17012216

FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	 <p>UPPER</p> <p>missing tooth</p> <p>DIAGRAM REPRESENTS THE MOUTH WIDE OPEN</p>  <p>LOWER</p> <p>missing tooth</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>	
FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>	

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



REMARKS: