

**MEMORANDUM  
FOR THE RECORD AND FOR THE RECORDS SECTION  
OFFICE OF THE CHIEF OF STAFF**

**APC 907  
20 4 Jun 46  
6 MAY 1946**

**MEMORANDUM**

**SUBJECT: Identification of Spies.**

**TO : Quartermaster General, Washington 25, D. C.**

Report records of Sgt. Walter C. Smith, 1500074; Cpl. Paul H. Smith, 1500074; Sgt. Edward J. Smith, 1500074; and Lt. Edward Smith, 1500074, and Sgt. Alfred L. Smith, 1500074, to assist against internment operations with respect of interest of Bureau 2-10, USAF Security Division #1, Zone, F. I., returned to USAF Security Division #1, Zone, F. I., as Bureau 2-10 for possible identification with the headquarters office.

**FOR THE CHIEF OF STAFF:**

**1 Incl:  
Submitted by Robert L. Garrison,  
20 4 April 1946**

**FRANK J. KLEAGER  
1ST LT. INF (ARMY)  
ACTG ASST ADJ GEN.**



*2-13 4/10 2000074 2000074*

COPY

STATEMENT

April 4, 1946

In February, 1945, I was contacted by a Filipino named Mateo Deleon. He told me that he had witnessed the killing of five American soldiers by the Japanese in the spring of 1942 and that he knew where the bodies were.

I asked him first where he lived and he showed me his house. It is located about 1200 yards North of Manila Hotel Annex and about 800 yds off the cement highway.

I next questioned him as to the method of killing employed by the Japanese. His story is as follows:--

"Five American soldiers were brought to the witnesses field by a group of about 25 Japanese soldiers with a non-com in charge. The Americans were tied one at a time and bayoneted to death. The Japs would run by each taking a jab with his bayonet! The last man to go by would finish the victim with a jab in the throat. Four men were killed this way. The fifth after being bayoneted was beaten to death with a pipe and his body thrown in a ditch. The Japanese buried the others in shallow trenches and there danced around as if intoxicated."

At this point I had the Filipino lead me to the spot. He took me directly to the graves. The bodies were then dug up. They were buried in shallow circular holes 8 - 10 inches deep. The positions of the skeletons showed that the victims arms had been tied behind their backs and that they had been crawled into the holes.

Three of the men had dog tags. One was a marine named Marion K. Lassiter, the other two names I do not remember. The fourth was identified as a soldier by his equipment. The fifth ones head was missing and no means of identification were available.

The bodies were then taken to U. S. A. F. Cemetery #1 at Nasugbu. They were turned over to Sgt. Schreiber of With Army Graves Registration Service along with all statements from me and the witness.

signatures witnessed by:                   /s/ Robert E. Currier  
  /t/ Robert E. Currier O-1310637  
  Captain, O. R. C.

Witness  
      /s/ Alfred P. Brechette  
      /t/ Alfred P. Brechette

Witness  
      /s/ D. E. Wetzel  
      /t/ D. E. Wetzel

COPY

/fms  
1  
/fbp

Interred 21 Sept 1949  
B 8 164 Ft. McKinley  
*Carl R. H. Mark*

DISINTERMENT DIRECTIVE

CARL R. H. MARK  
Cemetery Superintendent  
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER  
7747 00042

DATE  
15 06 48  
DAY MONTH YEAR

NAME  
UNKNOWNX-000070

SERIAL-NUMBER  
0

RANK  
0

ARM  
0

CEMETERY  
USAF CEMETERY MANILA NO 2

DISPOSITION OF REMAINS  
7701 80  
CODE DIST. PT.

PLOT 1 ROW 22 GRAVE 2030 COUNTRY PHILIPPINE ISLANDS

CAUSE OF DEATH  
6

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE  
FORT MCKINLEY CEMETERY  
MANILA, PHILIPPINE ISLANDS

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

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME: UNKNOWN X-000070, UNKNOWN X-374, (Maus)  
SERIAL NUMBER: UNKNOWN  
RANK: UNKNOWN  
DATE OF DEATH: 22 Sept 48  
DATE DISINTERRED: 22 Sept 48  
IDENTIFICATION TAG ON:  REMAINS,  MARKER  
ORGANIZATION: UNKNOWN  
RELIGION: UNKNOWN  
IDENTIFICATION VERIFIED BY: JOSEPH L. OWEN, Embalmer

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: Shelter Half  
CONDITION OF REMAINS: Skeletal

OTHER MEANS OF IDENTIFICATION

MINOR DISCREPANCIES /  
Two Identification Tags: UNKNOWN X-374, AGPS Mausoleum

REMAINS PREPARED AND PLACED IN CASKET  
DATE: 22 Sept 48 BY: JOSEPH L. OWEN

CASKET SEALED BY: JOSEPH L. OWEN  
EMBALMER (Signature): *Joseph L. Owen*

CASKET BOXED AND MARKED: 22 Sept 48  
SHIPPING ADDRESS VERIFIED BY: HORACE B. ALLISON, 1st Lt., FA

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

*Horace B. Allison*  
HORACE B. ALLISON, 1st Lt., FA  
SIGNATURE OF GRS INSPECTOR

16 OCT 1949  
RECEIVED  
BRANCH  
MESA RV

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

HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
PHILCORN EONE  
APO 900

12 Sept 1949  
Date

SUBJECT: Unidentifiable Remains

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

The records pertaining to Unknown X- 70, Plot 1,  
Row 22, Grave 2830, USMC USAF Cem. Manila #2 have  
been reviewed and it is the opinion of this office that insufficient  
evidence is available to establish the identity of this deceased,  
and that these remains should be classified as unidentifiable.

FOR THE COMMANDING OFFICER:

*H. B. McNEEMAR*  
H. B. McNEEMAR  
Captain, GIC  
Chief, Records Branch

Atch: Form 1044

Received 14 Oct 49 DDMG  
Not identifiable  
Information presently  
available

*W.D.C. Laurin*  
*30 Oct 49*

**IDENTIFICATION DATA**

1. REMAINS OF UNKNOWN UNKNOWN X-374 (Formerly UNK X-70, Manila #2)				2. DATE OF REPORT 14 Sept 1949	
3. NAME OF CEMETERY  AGRS Mausoleum, Manila, P.I.	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	801	K	3254	DISINTERMENT	REINTERMENT

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT 155 lbs	9. ESTIMATED HEIGHT 5'9"	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

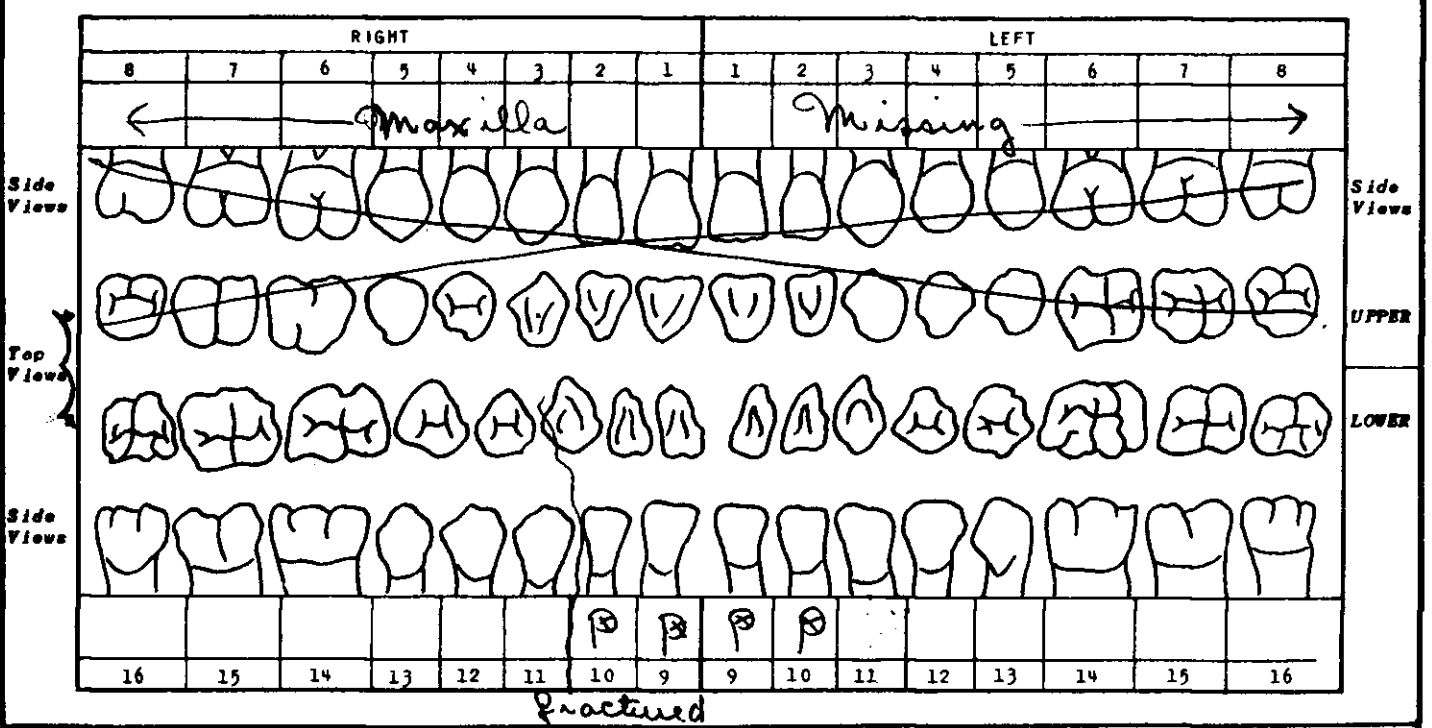
**"UNIDENTIFIABLE"**

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

18.

TOOTH CHART

	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><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>	



**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:** No loose maxillary teeth present with remains.

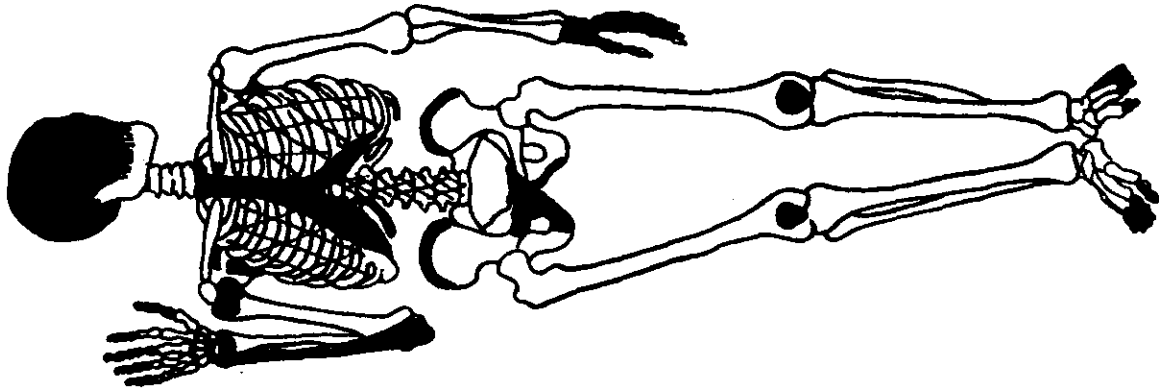
*J. J. McDermott*  
**J. J. McDERMOTT**  
 Laboratory Officer, CIP

**"UNIDENTIFIABLE"**

BY REASON OF LACK OF IDENTIFYING DATA

19. BLACK OUT PARTS OF BODY NOT RECORDED

12 Thoracic Vertebrae  
5 Lumbar "



Estimated height: 5'9"

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 - 14 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

J J McDERMOTT, Lab Officer, CIP

SIGNATURE

# 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.

29 Sept 47

DATE

(Formerly Unk-70)

Unknown X-374 USAF Cem Manila #2

Unknown

Unknown

LAST NAME

FIRST

INITIAL

RANK

SERIAL NO.

Unknown  
UNIT

Unknown  
ORGANIZATION

Unknown  
PLACE OF DEATH

AGRS Mausoleum, Manila  
PLACE OF BURIAL  
STORAGE

801  
PLOT

K  
ROW

3254  
GRAVE NO.

HANGER

BAY

CRYPT

*Skull missing*

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

INSIDE — LOOKING OUT

*mandible fractured*

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



# IDENTIFICATION CHECK LIST

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

UNKNOWN X 374 (Formerly Unk X-70 USAF  
~~Unknown-X Cem Manila #2~~)

Cemetery AGRS Mausoleum, Manila  
Plot 801 HANGER DAY CRYPT  
Row K Grave 3254

1. Arrived at cemetery \_\_\_\_\_  
(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 Manila #2 Cem. Manila P.I. \_\_\_\_\_  
(Name and organization)
4. Evacuated to Cemetery by \_\_\_\_\_  
(Name and organization)
5. Description of clothing and equipment: (if clothes do not fit, obtain size from body measurements)

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			

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 ..... **Straight & white, Mandible only**  
 (White, size, unevenness, spacing, noticeable crowns, fillings, extracts)

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

Jaw ..... (Large, small, normal)      Circumference of head in inches ..... **UTD Head missing**  
 (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 .....  
 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 ..... **Straight**  
 (Inseam, muscular, knock-kneed, bowed, normal, quantity, color and extent of hair)

Feet ..... (Size, corns, callouses, flat)      Toes ..... (Slender, straight, crooked, overlap)

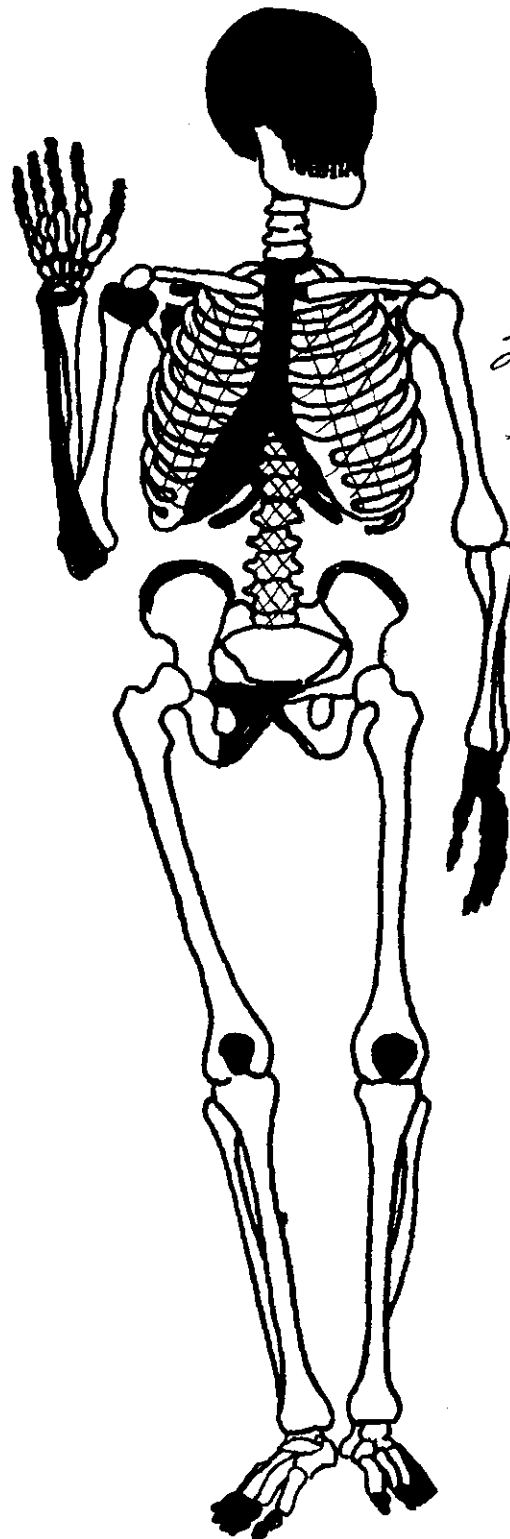
Evidence of healed fractures ..... (Nose, arms, legs, etc.)

NOTE: Use attached charts "A" and "B" to indicate parts not received.

# SKELETAL CHART

X-374

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)




22 Rib fragments  
12 Thoracic Vertebrae  
5 Lumbar

/acp

APR 5 - 1948

RESTRICTED

U 198

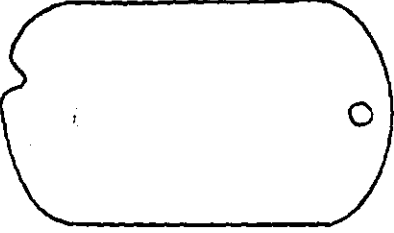
WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		<b>REPORT OF INTERMENT STORAGE</b> (AR 30-1810 and AR 30-1815)				DATE OF REPORT <b>4 Oct 47</b>
Imprint Identification Tag If Possible. DO NOT TYPE 	<b>Section 1.—IDENTIFICATION.</b>					
	NAME (Last, first, middle initial) <b>UNKNOWN X-374 (Formerly UNK X-70 USAF Cemetery Manila #2, Luzon P.I.)</b>			SERIAL No. <b>Unknown</b>		
	GRADE <b>Unknown</b>	ORGANIZATION <b>Unknown</b>		BRANCH OF SERVICE <b>Unknown</b>		
	RACE <b>Unknown</b>	RELIGION <b>Unknown</b>	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY			
PLACE OF DEATH <b>Unknown</b>	CAUSE OF DEATH <b>Used as bayonet Dummy by Japanese.</b>			DATE OF DEATH <b>April 1942</b>		
EMERGENCY ADDRESSEE (Name, relationship, and address) <b>Unknown</b>						
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) <b>None</b>		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)				
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) <b>Yes (2)</b>						
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME <b>None</b>						
<b>Section 2.—BURIAL.</b> If other than in established cemetery, furnish sketch and map coordinates on reverse.						
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY <b>AGRS MUSEUM, MANILA, P.I.</b>						
DATE OF BURIAL STORAGE <b>30 Sept 47</b>	HOUR <b>1300</b>	BURIED IN (Shroud, blanket, or name of other) <b>Casket</b>	TYPE OF GRAVE MARKER <b>None</b>	PLOT No. <b>801</b>	ROW No. <b>K</b>	GRAVE No. <b>CRYPT 3254</b>
WAS THIS A REBURIAL? (Yes or no) <b>Yes</b>	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE <b>USAF Cemetery Manila #2, Luzon, P.I.</b>			PLOT No. <b>1</b>	ROW No. <b>22</b>	GRAVE No. <b>2830</b>
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 <b>Yes</b>	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) <b>Yes</b>					
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORED <b>UNKNOWN X-376</b>		RANK	SERIAL No.	ORGANIZATION	GRAVE No. <b>CRYPT 3258</b>	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED <b>UNKNOWN X-372</b>		RANK	SERIAL No.	ORGANIZATION	GRAVE No. <b>CRYPT 3252</b>	
SIGNATURE OF PERSON PREPARING REPORT <i>Wm. R. Gilbert</i> <b>Wm. R. GILBERT, Adm Asst</b>			SIGNATURE OF GRS OFFICER VERIFYING REPORT <i>Lucio S. Panopio, Jr.</i> <b>LUCIO S. PANOPIO, Jr. 2d Lt INF</b>			
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 501

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

WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)	DATE OF REPORT 19 Oct 45
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Imprint Identification Tag If Possible. DO NOT TYPE  	Section 1.—IDENTIFICATION.		
	NAME (Last, first, middle initial) U N K N O W N - X 70 (Cem. Manila #2) (Unknown - X - 19 Cem. Nasugbu #1)		SERIAL No.
	GRADE	ORGANIZATION	BRANCH OF SERVICE
	RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY

PLACE OF DEATH	CAUSE OF DEATH Used as bayonet Dummy by Japs	DATE OF DEATH Apr 1942
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EMERGENCY ADDRESSEE (Name, relationship, and address)

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none)  None	IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no)  Yes	

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME

None

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

USAF Cemetery Manila #2, Luzon, P. I.

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.
12 Oct 45	1300	Shelter Half	Cross	1	22	2830

WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE USAF Cemetery Nasugbu #1, Nasugbu, Luzon, P. I.		
	PLOT No.	ROW No.	GRAVE No.
	1	15	281

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

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)  DIONNE, Napoleon P.	RANK	SERIAL NO.	ORGANIZATION	GRAVE No.
		31321334	21 IR Cannon Co 24th Div	2829

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)  WHETSEL, Clyde E.	RANK	SERIAL NO.	ORGANIZATION	GRAVE No.
	Tec-5	33416452	Co C 860 Engr AVN Bn.	2831

SIGNATURE OF PERSON PREPARING REPORT W. V. HARDY JR., T/3 GRS.	SIGNATURE OF GRS OFFICER VERIFYING REPORT W. E. SESSIONS III, Capt., 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.

(Revised May 11, 1943)

(TM 10-630 and AF 50-1815)

UNL O.R. (A-10)

Head Bone

(Last name) (First name)

(Initial) (Serial No) (Rank) (Organization)

M

(Place of death)

April 1942 Used as payonett during by J. S. (Date of death) (Cause of death)

1000 22 Feb 43 U.S. Cemetery, Masubu Luzon, P.I.  
(Time and date of burial) (Name of cemetery) (Name or co-ordinates of location)

201

Reg. Graves

(Grave No) (Row No) (Plot No) (Type of marker)

Disp. of ident. tags: Buried w/body Y.S. NO X Attached to marker Y.S. NO A

Form 1 (X-1's)

RELIGION Unknown

(If no identification tags, what means of identification are buried with body?)

Form 1 (X-1's)

(If no identification tags, but identity definitely established, give particulars)

Body buried on RIGHT Richard A. Resard 222nd Inf 82d  
(Name) (Serial No) (Rank) (ORG) (Grave No)

Body buried on LEFT None 222nd Inf 82d  
(Name) (Serial No) (Rank) (ORG) (Grave No)

Name and address of HERGNOY ADDRESS (Name and address of LOCAL NEXT OF KIN)

List only personal effects FOUND ON BODY and disposition of same:

None

RESTRICTED