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FM CO AGRS PHILCON JONE MANILA PI

TO LE PC/ORMS DE PTAR WASHDC

INFO UAPC/CINCFE TOKYO JAPAN

JMLC/CG PHILCOM AF AND 13TH AF CLARK AFB PI

GRAVES GRNC

CITE U 2081 GRPZ PASS TO MEMORIAL DIV PD REQUEST AUTH BE GRANTED

THPS OFFICE TO AMEND BURIAL LOCATE

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HEADQUARTERS AMERICAN GRAVES REGISTRATION SERVICE PHILCOM ZONE

GRPZ 293

APO 900

SUBJECT: Unidentifiable Remains

1 6 MAY 1950

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

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

> UNKNOWN X-590 AGRS Mslm X-1198 # X-1240

UNKNOVIN X-2061 ACRS Mslm - Wany X-2080

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

FOR THE COMMANDING OFFICER:

5 Incls QMC Forms 1044 w/Certificates of Unidentifiability Winganila Maria

11 12061

11 42080

AIRMAIL.

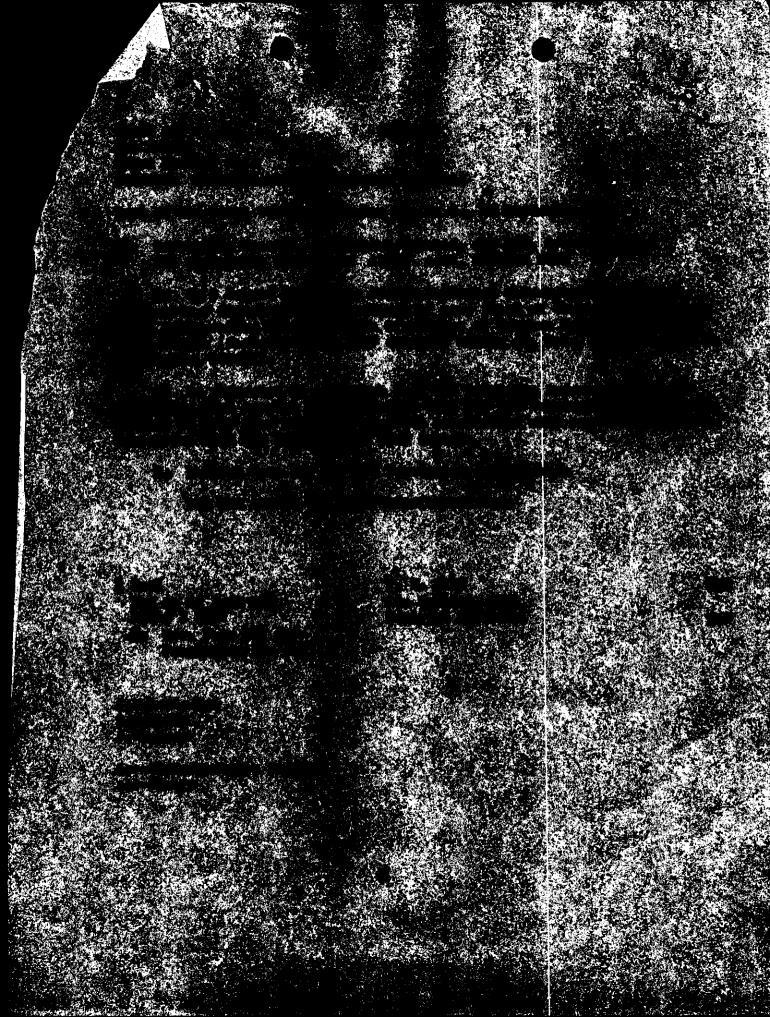
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19EP 1949

C. H. LIEURANCE 2nd LE, AGD Asst. Adl. Gen.



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OMC FORM REV 15 MAR 46 1194

HEADQUARTERS AMERICAN GRAVES REGISTRATION SERVICE PHILCOM ZONE

APO 900

10	May	1950
	(Dat	:ө)

SUBJECT: Unidentifiable Remains

TO:

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

	The records pertaining to Unknown $X-98$, Plot 2,
Row 1	_, Grave114, USMC Manila # 2, have
been revi	ewed and it is the opinion of this office that insufficient
evidence	s available to establish the identity of this decedent,
and that	hese remains should be classified as unidentifiable.
	OR THE COLLIANDING OFFICER:

Incl: Form 1044 B. McNGMAR
Captain, QTC
Chief, Records Branch

Not identifiable from information presently available

- 19 - 1964

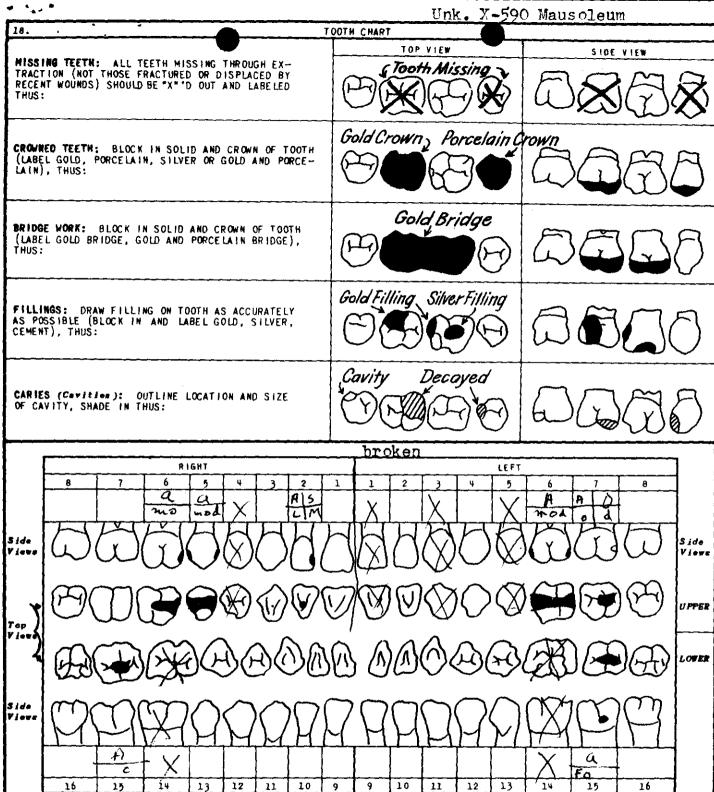
33									
	IDENTIFICA	TION D	ATA						
1. REMAINS OF UNKNOWN					2. DATE OF RE	PORT			
UNKNOWN 2	X-590 (Formerly X-	98 Mar	ila #	2)	10 May	1950			
3. NAME OF CEMETERY			5. ROW	6. GRAVE		TE OF			
AGRS Mausoleum DISINTERMENT REINTERM									
Manila P. I.									
	-				1	}			
PHYSICAL DESCRIPTION									
8. ESTIMATED WEIGHT 9	. ESTIMATED HEIGHT	10. COLOR		`	11. RACE				
U. T. D.	519"	U.	T. D.		Whit	te			
12.GIVE DESCRIPTION OF ANY OF	FICIAL IDENTIFICATION FOUND	WITH REMAI	NS						
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13. GIVE DESCRIPTION OF TATTO	DS OR SCARS ON BODY AND/OR S	SUCH INFORMA	ATTON OBTA	LINED FROM	OTHER SOURCES				
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<u> </u>	N O I	1 C							
14. WAS BODY BURNED?	TO WHAT EXTENT?					<u>,</u>			
	O MUNICALITY								
	O WHAT EXTENT?	`							
YES IN NO	TO WHAT EXPENTE								
16. DESCRIBE EVIDENCE OF HEA	IED FRACTURES AND BONE MALES	ORMATIONS							
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17. LIST EVERY ITEM OF CLOTH	ING, EQUIPMENT AND PERSONAL	EFFECTS FO	UND, SHOW	ING THE TY	PE, COLOR, SIZ	E, MARKINGS,			
SERVICE, ETC. (If loundr	y merks are indistinct such when facilities are not av	notation = allable in	nouis de : the area)	mede end t	ipecimen rof ve f	geo inrogen			
4									
1									

None

"UNIDENTIFIABLE"

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING GATA"

1,2



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

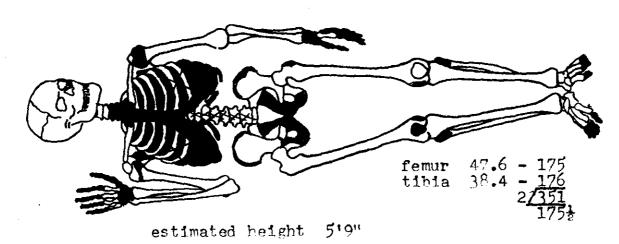
> Unable to determine whether R-8 and L-8 are X or PX due to the condition of the maxilla.

"UNIDENTIFIABLE"

PAUL R NICHOLS

CK OF SUFFICIENT IDENTIFYING COAPS Identification Section

19. BLACK OUT PARTS OF BODY NOT RECERED



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

1 CERTIFY THAT THE GROUP REMAINS CONSIST OF PARTS OF ______ DECEDENTS BASED ON THE PRESENCE OF ONE OR MORE OF THE FOLLOWING ANATOMICAL PARTS:

SIGNATURE OF MEDICAL OFFICER

21- REMARKS AND ADDITIONAL INFORMATION

No identification tags, personal effects or any other means of identification found with remains.

"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 MICHOLS Chief Identification Section

•

Jaul R. Hicholo

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S	SYMBOLS IN HOLE BOX EXTR	RACTED  ITY INDICAT  ATION  FIXED BRID  (INCL. ABU  TEETH REF	GE TMENTS)	TYPE UPPER F	OF FILL IN HALF OF AMA (SILV GOLD SILICA PORC	ING F BOX LGAM (ER)  ATE OR ELAIN HOSPAT		L	OCATIO	ON OF IN HALF C (BETW	FILLING  OF BOX  ME  VEEN-TO  OF  G SURF	SIAL DWARD CCLUSA ACE BAC PISTAL OWARD	L CK TEET
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AGRC FORM No. 11
Revised 16 Sept. 1946
Formely "Check List
of Unknowns")

## IDENTIFICATION CHECK LIST

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

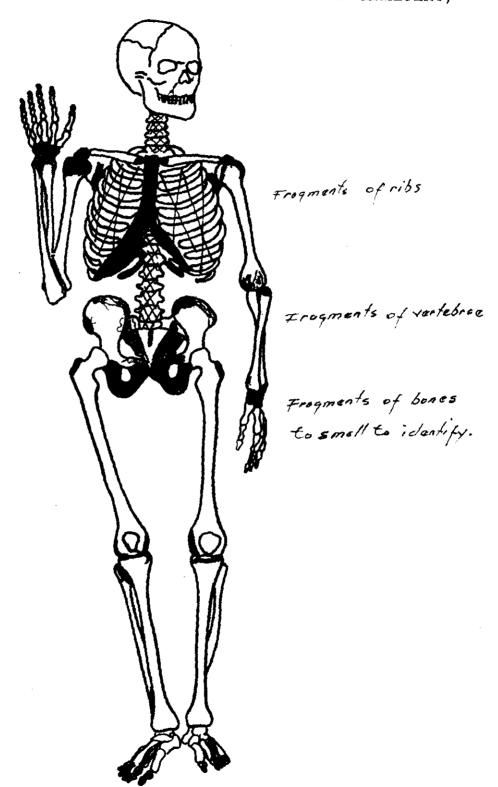
			(Formerly Unk X-9 Unknown X -590 USAF Cem Manila				
		•	Cemetery AGRS Mausoleum, Manila, P				
			Plot 801 Row D Grave 899				
i.	Arrived at cemetery 23 Sept 47	7					
	(Hour)	(Date)	USAF Cem #2, Manila, Luzon, P.I.				
2.	Place of death Das Latinity Game	t town)	(Coordinates and letter Prefix, maps)				
			·				
_	(Sheet, scale and serials used)	CMT#	1				
<b>3</b> .	Remains recovered or disinterred by	***************************************	(Name and organization)				
4	Figure 1 to Compton by	CMT#	1				
7.	Evacuated to Cemetery by	(Name and organization)					
5.	Description of clothing and equipmen	nt: (if clothes	do not fit, obtain size from body measurements)				
	Item Clothing Markings	Sizes	Indicate unusual markings color, wear, tear, repairs, etc.				
	* Headgear	uy tang ay ang ayahagang					
	* Headgear (Type)		·				
			diggidad di nakondidi. (4 in (4 mahra 1995) jagada mengan digentak dan di dagada di dagada, 1995 dagada pini paka pini paka di paka pini				
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	Jacket, Combat	, , , () . , , ( ) 44 c ; ; ; ; <del>; ; ; ; ; ; ; ; ; ; ; ; ; ; </del>					
			and the contraction of the state of the contraction of the state of th				
	Sweater N	(					
	Jacket, HBT	<u> </u>					
	* Shirt, Wool OD						
	Undershirt, Wool						
	Undershirt, Cotton						
	Trousers, HBT						
	* Trousers. Wool OD	/,	ingelakskir ( anna mjendemonym minjohum spjelek) > ) > ) - 1991-lek mjelejskir ( 1991-le				

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	/ <u>.</u>	•	
Eyes	(Color, setting, shape)	Eyebrows (Color,	bushiness, extent across nose)
•	1		•
Nose	(Size, shape, straight)	Eears	
	(Size, shape, straight)	(Size, set	close to or far from head)
Mouth		Lips	
MOUIN	(Large, medium, small)		ngll, large, full)
Teeth Ch	art attached.	spacing, noticeable crowns, fillings,	avtractel
	(White, Size, uneveness,	pacing, nonceance crowns, initials,	extracts)
Chin			-
Citin	(Prominent,	eceding, pointed, dimples, double)	
	,		00 3/4"
Jaw	Large, small, normal)	ference of head in inches	(Hat hand)
		/	
Neck		Larynx	
z voex manne	(Size, length, short, normal, wrinkled	(F	rominent, normal)
		/,	
Shoulders	(Broad, straight, small, rounded)	Arms	lor, extent and quantity of hair)
	(Diona, Straight, Sharr, 1900)	,,,	, , , , , , , , , , , , , , , , , , , ,
***************************************			·
		<b>,</b>	
Hands			
	•	័ប	
Fingers		T.	
Ū	(Short, thick, long, sle	nder, size of knuckles, missing fing	ers or joints)
		/	
######################################	(Unusual chara	cteristics of lingernails)	The transfer of the transfer o
		/,	
Chest			All someth
	(Size of hippies, color, quan	tity and extent of hair, large, spice	(iii, normar)
Waist			
	(Size of navel, appende	clomy, amount, quantity, and color	of pair)
		<i>2</i>	1. K
Back	(Quantity and extent of hair)	Circumcision (Yes-no)	ubic Harr (Color)
		,	/
Herniaplasty			
• •		(Yes-no; location)	/,
Τ			<b>/</b> ,
Legs	finscam, muscular, knock-kneed,	howed, normal, quantity, color at	d extent of hair)
		•	· / ,
Feet	(Size, corns, vallouses, flat)	Toes	
	(Size, corns, callouses, flat)	(Slender, st	raigni, crooked, overlay)
Evidence of	healed fractures		
Lyidence of	healed fractures	(Nose, arms, legs, etc.)	1
			•

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

# SKELETAL CHART

(BLACK OUT PARTS OF BODY NOT RECEIVED AT CEMETERY)



• •	,	RESTR	CICTED				( Cities
WD QMC FORM 1042		REPORT OF	INTERMEN	T	DATE	OF REPORT	<del></del>
(Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		(AR 30-1810 as				9 Nov.	45
Imprint Identification T		Section 1.—IDENTIFICATION.					
20 1101 11				(Menile #2 (Cem. Cem.N	)	AL No.	
	0)	GRADE	ORGANIZATION		BRAN	CH OF SERV	ICE
		RACE	RELIGION		IF OTHER TH	IAN U.S. DEJ OUNTRY	AD, GIVE
PLACE OF DEATH		CAUSE OF DEATH			DATE	OF DEATH	
Basianan, Cam.				<del></del>			
EMERGENCY ADDRESSEE (No IDENTIFICATION TAGS FOUN (1, 2, or none)		IF NO TAGS FOUND ON BODY, I	DESCRIBE MEANS (	OF IDENTIFICATION (I	f unidentified, fi	Il in section 3	on reverse)
NOME WERE SUBSTITUTE TAGS PRO	WIDED?(Yes or no)	  -  -	State ant	At baolee &			
Yes (2)		}					
		Non	e				
Section 2.—BURIAL. If oth	er than in estab	lished cemetery, furnish sketc.	h and map coord	inates on reverse.			
NAME, NUMBER, COORDINAT			*	· •			
DATE OF BURIAL	<del>,</del>	Cometery limits #2		<del>,</del>	PLOT No.	l pow No	LODAVENO
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or n	ame oj ouner)	TYPE OF GRAVE MARKER	PLOT NO.	ROW No.	GRAVE NO
7 Hov. 45	1800	S lite:		Oross	2	1.1	114
WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL.	INDICATE NAME, NUMBER, COORE	INATES OF PREVIO	OUS CEMETERY, AND L	<u></u>		
Yes	Breiche	1 P.O.W. Clin. Cen.	Morto, In	20°. P. T.	PLOT No.	ROW No.	GRAVE No.
TYPE OF RELIGIOUS	<del></del>	TING BURIAL RITES	IF IDENTIFICATI	ON TAGS NOT USED.	DESCRIBE IDE	<u> </u>	
CEREMONY			CONTAINERS B	URIED WITH BODY			, •
IDENTIFICATION TAG BURIED BODY (Yes or no)		FIFICATION TAG ATTACHED TO RKER (Yes of no)					
Yeε		Yes		<del>,</del>	<del></del>		
BODY BURIED ON DECEASED  U X X X	OWE X-	97 (Monila #2 )	RANK	SERIAL NO.	ORGANIZATIO	{	E No.
U 11 X 11 BODY BURIED ON DECEASED	<del></del>	IX (Cen.Cen.Horte	RANK	SERIAL NO.	ORGANIZATIO	<del></del>	II3 /E No.
ប្រជន	OMI X-	99 (11:111: 22 )	RANK	SERIAL NO.	ORGANIZATIO	}	
SIGNATURE OF PERSON PREP	ARING REPORT	<del>/</del>	luc	BRS OFFICER VERIFYING	~=.€	<b>)</b> .	II5
7. V. SARDY	J 1776	ભાઈ.	W. E.	SESSICIS I	II, Capt	., QIC.	

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

WD QMC FORM 1042 (Rev. 1 Apr. 1945)		REPORT OF	INTERMEN	T can	DATE OF	REPORT
(Supersedes GRS Form 1)		(AR 30-1810 at		- 37 <i>U</i>	9 N	ov. 45
Imprint Identification		Section 1IDENTIFICATION.				
DO NOT TY	PE	NAME (Last, first, middle initial) UNKNOWN	Y_OC /Non-	70 42 )	SERIAL N	0.
/		UNKNOWN	X-70 (MAII)	Cam.Norte)		
15	1		<del>,</del>	Jam. Hot de/	DDANGU	0F CE01/ICE
	0	GRADE	ORGANIZATION		BRANCH	OF SERVICE
<b>[</b> \	9					
<i>!</i> \	/	RACE	RELIGION		IF OTHER THAN	U. S. DEAD, GIVE
		ļ			NAME OF COUN	ITRY
PLACE OF DEATH		CAUSE OF DEATH	<u></u>	<del> </del>	DATE OF	DEATH
Basianan, Cam.	Norte					
EMERGENCY ADDRESSEE (No	me, relationship, an	d address)			<u> </u>	
IDENTIFICATION TAGS FOUN	D ON RODY	IF NO TAGS FOUND ON BODY, D	DESCRIBE MEANS O	DE IDENTIFICATION (T	funidentified fill in	section • on renewal
(1, 2, or none)	5 5.1. 205 .			. 152	anacimipos, jus en	sacrations a time revenue
None		Statement Attac	hed			
WERE SUBSTITUTE TAGS PRO	VIDED?(Yes or no)	•				
Yes (2)						
LIST PERSONAL EFFECTS FOR	UND ON BODY AND	DISPOSITION OF SAME	<del></del>	A FD	UE COPY:	
				# IR		7.1
				Sen	ge D. Ra	ddery h.
		None		GEOR	GE D. REDD	en, jr.
					., Inf.	
Section 2.—BURIAL If oth	her than in estab	lished cemetery, furnish sketci	h and map coord	inates on reverse.		
NAME, NUMBER, COORDINAT	ES, AND LOCATION	OF CEMETERY				
]		USAF Cemetery M	anila #2,	Luzon, P. I.		
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or ne	ame of other)	TYPE OF GRAVE	PLOT No. RO	W No.   GRAVE No.
	7.000	0) 3 to 17 to 6				
7 Nov. 45	1300	Shelter Haf		Cross	2	1 114
WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL,	INDICATE NAME, NUMBER, COORD	INATES OF PREVIO	OUS CEMETERY, AND L		
Yes	Basians	n P.O.W. Cem. Cam.				OW No.   GRAVE No. 4
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUC	TING BURIAL RITES		ON TAGS NOT USED, URIED WITH BODY	DESCRIBE IDENTI	FICATION DATA AND
			Ì			
IDENTIFICATION TAG BURIEL BODY (Yes of no)	1					
Yes		IFICATION TAG ATTACHED TO				
-						
BODY BURIED ON DECEASED	LEFT, NAME (Last	KER (Yes or no) Yes first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE No.
BODY BURIED ON DECEASED UNKNOW	LEFT, NAME (Last N X-97 (N	Yes first, middle initial  Anila #2	RANK	SERIAL NO.	ORGANIZATION	
BODY BURIED ON DECEASED UNKNOW	LEFT, NAME (Last N X-97 (N N X- IX(C	Yes first, middle initial)  anila #2 ) em.Cam. Norte)				113
BODY BURIED ON DECEASED  UNKNOW  UNKNOW  BODY BURIED ON DECEASED	N X-97 (N X- IX (C) RIGHT, NAME (Last	Yes  first, middle initial)  lanila #2 )  em.Cam. Norte)  et, first, middle initial)	RANK .	SERIAL NO.	ORGANIZATION ORGANIZATION	
BODY BURIED ON DECEASED UNKNOW	N X-97 (N X- IX (C) RIGHT, NAME (La. N X-99 (A)	Yes first, middle initial)  anila #2 ) em.Cam. Norte)				113
BODY BURIED ON DECEASED  UNKNOW BODY BURIED ON DECEASED UNKNOW	N X-97 (N X-1X(C) N X-1X(C) RIGHT, NAME (Last N X-99 (N X-X)	Yes first, middle initial) lanila #2 ) em.Cam. Norte) st, first, middle initial) lanila #2 )	RANK		ORGANIZATION	113 GRAVE NO.
BODY BURIED ON DECEASED  UNKNOW BODY BURIED ON DECEASED UNKNOW UNKNOW	N X-97 (N X-1X(C) RIGHT, NAME (La N X-99 (N X- X (C) PARING REPORT	Yes  first, middle initial)  Anila #2 )  Sem.Cam. Norte)  st, first, middle initial)  lanila #2 )  Sem.Cam.Norte*)	RANK SIGNATURE of C	SERIAL NO.	ORGANIZATION G REPORT	113 GRAVE NO. 115
BODY BURIED ON DECEASED  UNKNOW BODY BURIED ON DECEASED UNKNOW UNKNOW UNKNOW SIGNATURE OF PERSON PREF  /s/t/W. V. HA DISTRIBUTION CF REPOR	N X-97 (N X-1X(C) N X-1X(C) RIGHT, NAME (La N X-99 (N X- X (C) PARING REPORT  ARDY JR. T/  I: Signed origin	Yes  first, middle initial)  Anila #2 )  Sem.Cam. Norte)  st, first, middle initial)  lanila #2 )  Sem.Cam.Norte*)	SIGNATURE of C	RS OFFICER VERIFYIN  W. E. SESSIO  One copy for enemy	ORGANIZATION G REPORT NS III, Ca	113 GRAVE NO. 115 pt., QMC.

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WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)			REPORT OF (AR 30-1810 at		VIII MARKET COMMAN		of REPORT	47	
Imprint Identification 1 DO NOT TY		blo. 4	Section 1.—IDENTIFICATION.						
(	-	\	UNKNOWN X-59 USAF Cem Mai	8 • t	SERIAL NO.  Unknown				
	(	o l	GRADE	ORGANIZATION	<b>5</b>	BRAN	ICH OF SERVI	CE	
\		`	Unknown	Unknov	MICO.	Į	Jnknow	n	
			RACE	RELIGION		IF OTHER TH	AN U.S. DEA	D, GIVE	
			Unknown	Unknov	WI.				
PLACE OF DEATH			CAUSE OF DEATH		<u></u>	DATE	OF DEATH		
Basianan, Ca Norte, Luzon	n, P.I	•	Unknown			บ	Unknown		
EMERGENCY ADDRESSEE (No	rme, relationsh	tip, an	d address)						
Unknown									
IDENTIFICATION TAGS FOUN (1, 2, or none)	D ON BODY		IF NO TAGS FOUND ON BODY, E	DESCRIBE MEANS O	OF IDENTIFICATION (1)	unidentified, fi	U in section 3	оп геретве)	
None		•		•		•			
WERE SUBSTITUTE TAGS PRO	VIDED?(Yes	er no)	,	•					
·									
Yes (2) LIST PERSONAL EFFECTS FOR	UND ON BOD	Y AND	DISPOSITION OF SAME			<del></del>			
Section 2.—BURIAL, If off			None lished cometery, furnish eketol OF CEMETERY	n and map coord	inates on reverse.				
			ACDC NO	USOLEUM,	MANICA, P.I.				
DATE OF BURIAL	HOUR		BUPER (Shroud, blanket, or n	ame of other)	TYPE OF GRAVE MARKER	PLOT No.	1	GRAVE NO.	
8 Oct 47	1500		Casket	<del></del>	None	801	D	899	
WAS THIS A REBURIAL?  (Yes or no) RESTORED  Yes		-	ndicate name, number, coord Cemetery Manila			PLOT No.	RAVE ROW No.	GRAVE No.	
TYPE OF RELIGIOUS	<u> </u>		TING BURIAL RITES	IF IDENTIFICATI	ON TAGS NOT USED,	·	<u> </u>		
CEREMONY				CONTAINERS B	URIED WITH BODY				
IDENTIFICATION TAG BURIED BODY (Yes or no)	D WITH D		IFICATION TAG ATTACHED TO KER (Yes or na)						
Yes			Yes						
BODY AURIED ON DECEASED	_	(Last,	first, middle initial)	RANK	SERIAL NO.	ORGANIZATIO	CR	<b>YPT</b>	
UNKNOWN X-5		F (1.00	st first middle initial)	RANK	SERIAL NO.	ORGANIZATIO		9 <b>01</b>	
BODY BURIED ON DECEASED		_ (2)(60					CRI	YPT	
UNKNOWN X-4							8	397	
SIGNATURE OF PERSON PRE	<b>&gt;</b>			SIGNATURE OF G	RS OFFICER VERIFYING	wh.			
Wm R GILBER		As	sst	LUCIO	S. PANOPIO	,J/r. 20	Lt.,	Inf	

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