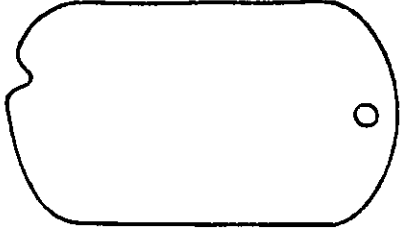


APR 5 - 1948

U-485  
RESTRICTED

U 485

WD GMC FORM 10-42 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)		STORAGE		DATE OF REPORT	
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.		NAME (Last, first, middle initial)		SERIAL No.	
		UNKNOWN X-3098 (Formerly Unk X-110 USAF Cem Finsch #2, N.G.)		Unknown		Unknown	
GRADE		ORGANIZATION		BRANCH OF SERVICE			
Unknown		Unknown		Unknown			
RACE		RELIGION		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY			
Unknown		Unknown					
PLACE OF DEATH		CAUSE OF DEATH		DATE OF DEATH			
Unknown		Unknown		Unknown			
EMERGENCY ADDRESSEE (Name, relationship, and address)							
Unknown							
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none)		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)					
None							
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							
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT No.	ROW No.	GRAVE No.	
STORAGE 29 Dec 47	0900	STORED Casket	None	ROWER 813	WAY B	CRYPT 390	
WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE			PLOT No.	ROW No.	GRAVE No.	
RESTORED Yes	USAF Cemetery #2, Finschhafen, N.G.					2551	
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY					
IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)						
Yes	Yes						
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.			
UNKNOWN X-3105				CRYPT 392			
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.			
UNKNOWN X-3094				CRYPT 388			
SIGNATURE OF PERSON PREPARING REPORT			SIGNATURE OF GRS OFFICER VERIFYING REPORT				
R R SCIERTO, Pvt			L S PANONIO, 2d Lt Inf				
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through Headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.							

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