

293

UNK.

P.I.

(MANILA#2)

X-821

50 em

70-A1
9-16-00-1.1
10400

6A
FILE IDENTIFICATION TOPPER

FILE NUMBER

293 unk. Manila II 2 X-821

SUBJECT

Also Manila Maus. X-4857

Family unk. Cabanatuan Cem. C-281

RECLASSIFICATION SHEET

PAPERS ORIGINALLY FILED 293 Unk. Manila #2 (misc)

X-818 X-820 X-821 X-822 X-823 X-824

X-812 X-814 SYNOPSIS AND DATES X-816

miss filed
NEW CLASSIFICATION 293 Unk. Manila #2
X-818

11/10/50
Dud

RECLASSIFICATION SHEET

PP BY PHILCO

/ebc
1
/add

Interred 23 1950
C 9 78 Ft. McKinley
Carl H. Mark
CARL R. H. MARK

DISINTERMENT DIRECTIVE

C-9-78

Cemetery Superintendent
SECTION A -
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER
7147 80693

DATE
09 02 50
DAY MONTH YEAR

NAME: **UNKNOWN X - 821** SERIAL NUMBER: GRADE: ARM: RACE: RELIGION:

CEMETERY: **USAF CEMETERY MANILA NO. 2, P. I.** PLOT: **2** ROW: **20** GRAVE: **2475** DISPOSITION OF REMAINS: **7701 80**
CODE DIST. CTR.

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
**UNITED STATES MILITARY CEMETERY
FT. WM. MCKINLEY, P. I.**

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

SECTION C - DISINTERMENT AND IDENTIFICATION

NAME: **UNKNOWN X - 821** SERIAL NUMBER: GRADE: DATE OF DEATH: **20 Feb '50** DATE DISTINTERRED:

IDENTIFICATION TAG ON: REMAINS MARKER ORGANIZATION: RELIGION: IDENTIFICATION VERIFIED BY: **PAUL R NICHOLS**
Embalmer NAME AND TITLE

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: **Shelter Half** CONDITION OF REMAINS: **Skeletal**

OTHER MEANS OF IDENTIFICATION
X - 4851 Maus.

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

REMAINS PREPARED AND PLACED IN CASKET

DATE: **20 Feb '50** BY: **PAUL R NICHOLS**
CASNET SEALED BY: **PAUL R NICHOLS** EMBALMER (Signature): *Paul R. Nichols*
PAUL R NICHOLS

CASNET BOXED AND MARKED: **RAYMOND H TANGUAY, Sgt lc, RA** SHIPPING ADDRESS VERIFIED BY: **L. W. RICHARDSON, M/Sgt, RA**

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.
L. W. Richardson
L. W. RICHARDSON, M/Sgt, RA
SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

FILE RECORDS ANNOTATED
DATE *Feb 25 1950*
NAME *Shaw*

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM AGRS MAUSOLEUM		TO US MILITARY CEMETERY	
KIND OF CONVEYANCE TRUCK		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>Care Honark</i>	DATE FEB 23 1950

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

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

6. SHIPPED

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

7. SHIPPED

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

PREPARED BY PHILCOM

DISINTERMENT DIRECTIVE

3

SIGNATURE OF SHIPPER DATE SIGNATURE OF RECEIVER DATE

KIND OF COMPLEYANCE SECTION A - NAME AND BURIAL LOCATION OF DECEASED DIRECTIVE NUMBER 7747 80693 DATE 09 02 50

NAME UNKNOWN X-821 SERIAL NUMBER 1 SHIPPED GRADE ARM RACE RELIGION

CEMETERY USMC CEMETERY MANILA NO. 2, P. I. PLOT 2 ROW 20 GRAVE 2475 DISPOSITION OF REMAINS 7701 D 86

SECTION B - CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE UNITED STATES MILITARY CEMETERY FT. W. MCKINLEY, 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 DISTINTERRED

IDENTIFICATION TAG ON ORGANIZATION RELIGION IDENTIFICATION VERIFIED BY

SECTION D - PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL DATE CONDITION OF REMAINS DATE

OTHER MEANS OF IDENTIFICATION

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

REMAINS PREPARED AND PLACED IN CASKET

DATE BY 3 SHIPPED

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 SHIPPER DATE SIGNATURE OF RECEIVER DATE

REMARKS AND SPECIAL INSTRUCTIONS SIGNATURE OF AGRS INSPECTOR

1 SHIPPED

RECORD OF CUSTODIAN TRANSFER

FILE
25 APR 1950
REPATRIATION
BRANCH

Ind # 52

RECORD OF CUSTODIAL TRANSFER

NEW YORK
BRANCH
IDENTIFICATION

1. SHIPPED

8 FEB 1950
LIFE

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

and that the report above is correct.

2. SHIPPED

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

3. SHIPPED

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

4. SHIPPED

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

5. SHIPPED

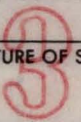
FROM	ORGANIZATION	TO	REGION	IDENTIFICATION VERIFIED BY
KIND OF CONVEYANCE		NAME OF CONVOYER		DATE DISINTERFERRED
SIGNATURE OF SHIPPER		SIGNATURE OF RECEIVER		DATE

6. SHIPPED

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

7. SHIPPED

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



PREPARED BY BHI/CSM

293 -Unk. P. I. (Misc) (Maus. Manila) (X-4849 thru X-4858, X-2806, 2807-A thru X-2812, 2799 thru X-2795, 2796-A, 2797 Thru X-2799, X-4101 and X-4102) 26 January 1950

FORM 893
GRS Far East

SUBJECT: Identification of World War II Deceased

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

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

Unknown	X-4849,	AGRS Maus. Manila,	formerly X-818	USAF Cem. Man. #2
"	X-4850,	"	"	X-820
"	X-4851,	"	"	X-821
"	X-4852,	"	"	X-822
"	X-4853,	"	"	X-823
"	X-4854,	"	"	X-824
"	X-4855,	"	"	X-812
"	X-4856,	"	"	X-814
"	X-4857,	"	"	X-815
"	X-4858,	"	"	X-816
"	X-2806,	"	"	X-2936
"	X-2807-A,	"	"	X-2937
"	X-2808,	"	"	X-2938
"	X-2809,	"	"	X-2939
"	X-2810,	"	"	X-2940
"	X-2811,	"	"	X-2941
"	X-2812,	"	"	X-2942
"	X-2793,	"	"	X-2943
"	X-2794,	"	"	X-2944
"	X-2795,	"	"	X-2945
"	X-2796-A,	"	"	X-2946
"	X-2797,	"	"	X-2947
"	X-2798,	"	"	X-2948
"	X-2799,	"	"	X-2949
"	X-4101,	Manila #2, P. I.	"	X-2796-B, AGRS Maus. Manila
"	X-4102,	"	"	X-2807-B,

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

FOR THE QUARTERMASTER GENERAL:

T. H. Metz
T. H. METZ
Lt. Colonel, GMS
Memorial Division

A. C. Kingsrva
L. E. White
J. Windsor

REB
TEC

AIRMAIL

X-4101 WMC R.I. E-82 (Manila #2)

HEADQUARTERS
PHILCOM ZONE
AMERICAN GRAVES REGISTRATION SERVICE

12 Dec 1949

Date

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

The records pertaining to Unknown X- 821 , Plot 2 ,
Row 20 , Grave 2475 , 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, QMC
Chief, Records Branch

Attch: Form 1044

Received 19 Jan 50 OQMG
Not identifiable from
information presently
available 26 Jan 50
A. C. King ID. Br.

Smith

X-4851

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNKNOWN X-4851 (Formerly UNK X-821 Manila #2)				2. DATE OF REPORT 21 Dec 1949	
3. NAME OF CEMETERY AGRS Mausoleum, Manila, P.I.	4. PLOT	5. ROW	6. GRAVE	7. DATE OF	
	810	F	1909	DISINTERMENT	REINTERMENT

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

NONE

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

UTD

14. WAS BODY BURNED?

 YES NO

TO WHAT EXTENT?

15. WAS BODY MANGLED?

 YES NO

TO WHAT EXTENT?

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

NONE

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)

NONE

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

Just 62

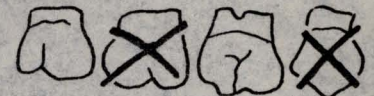
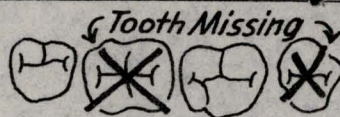
X-4851

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:

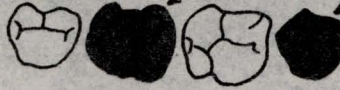
TOP VIEW

SIDE VIEW



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

Gold Crown, Porcelain Crown



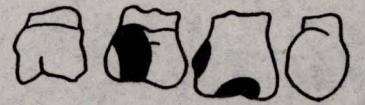
BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:

Gold Bridge



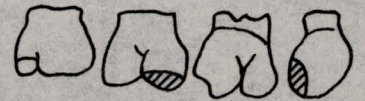
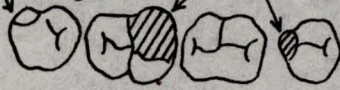
FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:

Gold Filling, Silver Filling



CARIES (Cavities): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:

Cavity, Decayed



		missing								fractured								missing							
		RIGHT								LEFT															
		8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8								
			X	a odfl	X	a od					s ml		a od	a no	a m	a modfl	⊕								
Side Views																		Side Views							
Top Views																		UPPER							
																		LOWER							
Side Views																									
		⊕	X	a modfl	a o										a modfl		a m								
		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 is fractured on median line. Portions of the maxilla on R8 and L7-L8 are missing. R8 and L7 are present with remains.

Paul R. Nichols

PAUL R. NICHOLS
Chief, Identification Sec

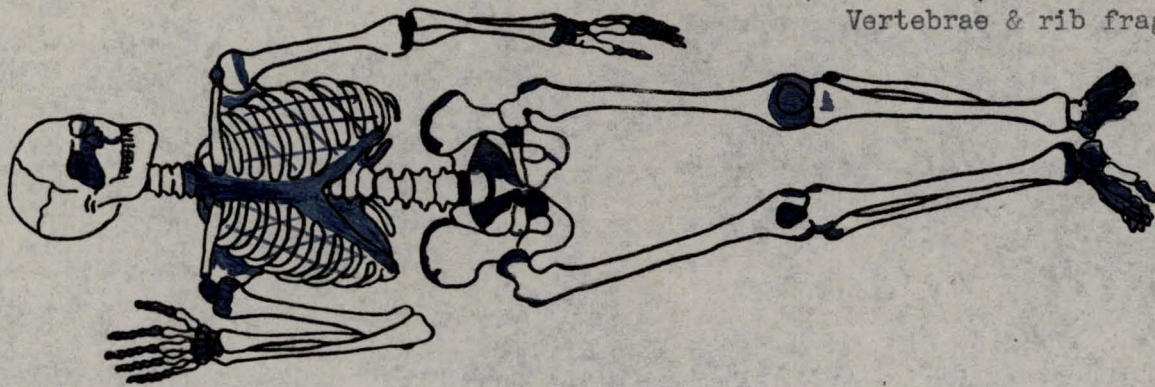
"UNIDENTIFIABLE"

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

X-4851

BLACK OUT PARTS OF BODY NOT COVERED

1 Cervical)
2 thoracic } Vertebrae
4 lumbar)
Vertebrae & 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 - 7½ lbs.

Circumference of skull - 22¼ inches.

"UNIDENTIFIABLE"

"BY REASON OF LACK OF SUFFICIENT IDENTIFYING DATA"

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

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

PAUL R. NICHOLS
Chief, Identification Sec

SIGNATURE

June 67

X-4851

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN UNK X-4851 (Formerly UNK X-821 USAF Cem Manila #2)				2. DATE OF REPORT 12 Aug 48		
3. NAME OF CEMETERY AGRS MAUSOLEUM, MANILA, P.I.		4. PLOT 810	5. ROW F	6. GRAVE 1909	7. DATE OF DISINTERMENT 15 Dec 47	REINTERMENT 12 Aug 48
PHYSICAL DESCRIPTION						
8. ESTIMATED WEIGHT UTD		9. ESTIMATED HEIGHT UTD		10. COLOR OF HAIR UTD		11. RACE UNK
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						

TOOTH CHART

<p>MISSING TEETH: ALL TEETH MISSING THROUGH EXTRACTION (NOT THOSE FRACTURED OR DISPLACED BY RECENT WOUNDS) SHOULD BE "X" D OUT AND LABELED THUS:</p>	<p>TOP VIEW</p> <p><i>Tooth Missing</i></p>	<p>SIDE VIEW</p>
<p>CROWNED TEETH: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD, PORCELAIN, SILVER OR GOLD AND PORCELAIN), THUS:</p>	<p><i>Gold Crown, Porcelain Crown</i></p>	
<p>BRIDGE WORK: BLOCK IN SOLID AND CROWN OF TOOTH (LABEL GOLD BRIDGE, GOLD AND PORCELAIN BRIDGE), THUS:</p>	<p><i>Gold Bridge</i></p>	
<p>FILLINGS: DRAW FILLING ON TOOTH AS ACCURATELY AS POSSIBLE (BLOCK IN AND LABEL GOLD, SILVER, CEMENT), THUS:</p>	<p><i>Gold Filling, Silver Filling</i></p>	
<p>CARIES (Cavities): OUTLINE LOCATION AND SIZE OF CAVITY, SHADE IN THUS:</p>	<p><i>Cavity, Decayed</i></p>	

<i>Missing</i>								<i>Fractured</i>								<i>Missing</i>							
RIGHT																LEFT							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8	8	7	6	5	4	3	2	1
	X	<i>a</i>	X	<i>a</i>					<i>s</i>			<i>a</i>	<i>a</i>	<i>a</i>	<i>a</i>			<i>a</i>	<i>a</i>	<i>a</i>	<i>a</i>	<i>a</i>	<i>a</i>
Side Views																Side Views							
Top Views																Top Views							
Side Views																Side Views							
16																16							
15																15							
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13																13							
14																14							
15																15							
16																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."

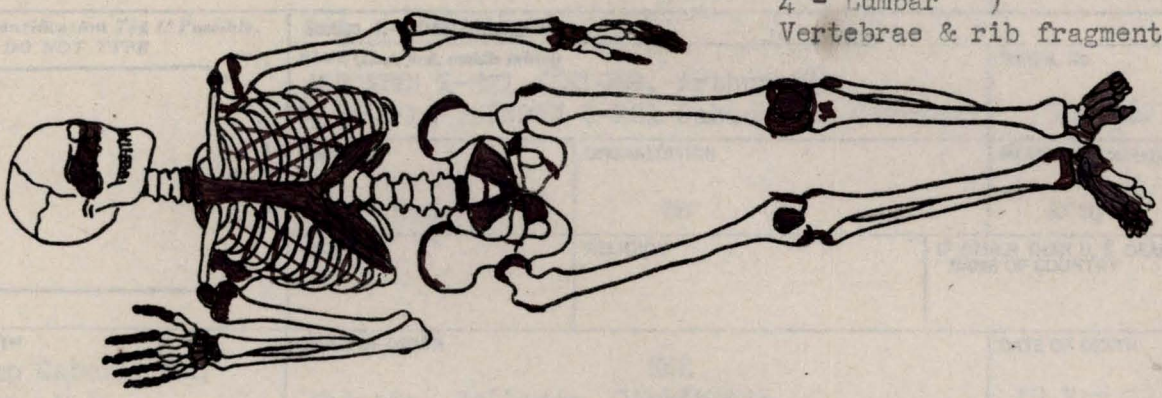
Maxilla is fractured on median line. Portions of the maxilla on R8 and L7-L8 are missing. R8 and L7 are present with remains.

/s/ Cpl. Joseph D. Murphy

X-4851

9. BLACK OUT PARTS OF BODY NOT RECORDED

- 3 - Cervical)
 - 2 - Thoracic) Vertebrae
 - 4 - Lumbar)
- Vertebrae & 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

Circumference of skull - 22-1/4".
 Est. weight of remains - 7 1/2 lbs.
 No ROI bottle nor ident. tag found with remains.
 Unable to determine the height due to decomposition of long bones.
 These remains were among a group disinterred from Grave 717, Row O, Plot 7 at Cabanatuan POW Camps Cemetery, Luzon, P.I.

A TRUE COPY:

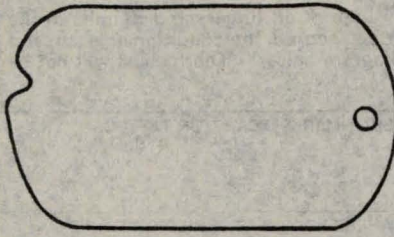

H. B. McNemar
 Capt., QMC

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, Emb. Supervisor
 CIP LABORATORY, MANILA, P.I.

SIGNATURE
 /s/ Edward F. Moriarty

RESTRICTED

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 7 Feb 46	
Imprint Identification Tag If Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.						SERIAL No.
		NAME (Last, first, middle initial) UNKNOWN X-821 (KELDER, Arthur H) (Formerly UNKNOWN C-281 Cabanatuan Cemetery)						36016623
		GRADE Pvt		ORGANIZATION MD		BRANCH OF SERVICE Army		
		RACE		RELIGION		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY		
PLACE OF DEATH POW Camp Cabanatuan, Luzon, P I		CAUSE OF DEATH Malaria, Pellagra, Diphtheria HWZ				DATE OF DEATH 19 Nov 42 HWZ		
EMERGENCY ADDRESSEE (Name, relationship, and address) Mrs. Julia Kelder (M), 6807 Raven St, Chicago, Ill. HWZ								
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) Records indicate fourteen (14) bodies found in common grave. There were thirteen (13) Unknowns one (1) of which was identified by an Identification Tag:- -(See Sec 3 reverse side)-						
WERE SUBSTITUTE TAGS PROVIDED?(Yes or no) Yes (2)								
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME None						A TRUE COPY:  H. B. McNEMAR Capt., QMC		
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 12 Jan 46	HOUR 0900	BURIED IN (Shroud, blanket, or name of other) Shelter Half		TYPE OF GRAVE MARKER Cross	PLOT No. 2	ROW No. 20	GRAVE No. 2475	
WAS THIS A REBURIAL? (Yes or no) Yes	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE POW Camps I & II Cabanatuan Cemetery, Luzon, PI 45.7-70.9 1/50,000					PLOT No. 7	ROW No. 0	GRAVE No. 717
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY					
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes							
BODY BURIED ON DECEASED LEFT. NAME (Last, first, middle initial) UNKNOWN X-820 (WALD, Charles M) (Formerly UNKNOWN C-280 Cabanatuan Cemetery)			RANK Pvt	SERIAL No. 19049058	ORGANIZATION MD	GRAVE No. 2474		
BODY BURIED ON DECEASED RIGHT. NAME (Last, first, middle initial) UNKNOWN X-822 (KOVACH, John) (Formerly UNKNOWN C-282 Cabanatuan Cemetery)			RANK Pvt	SERIAL No. 20500764	ORGANIZATION	GRAVE No. 2476		
SIGNATURE OF PERSON PREPARING REPORT /s/t/ R. C. BARRETT, S/Sgt., GRS.				SIGNATURE OF GRS OFFICER VERIFYING REPORT /s/t/ 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

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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

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

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

REMARKS:	<p>YORK, George Sr. Civilian</p> <p>Sgt Hanscom, Lawrence K. 6137280 31 Inf</p> <p>Cpl Ruark, John W. 278681 USMC</p> <p>Cpl Collins, Fredrick G. 6578818 QMC</p> <p>Cpl Simmons, George G. 19019886 60 GAC</p> <p>Pfc Gutierrez, Juan E. 20843125 200 GAC</p> <p>Pfc Lobdell, Lloyd J. 20645267 192 Tank</p> <p>Pfc Nichols, Harvey A. 7009171</p> <p>Pvt Waid, Charles M. 19079058 MD</p> <p>Pvt Kelder, Arthur H. 36016623 MD</p> <p>Pvt Kovach, John 20500764</p> <p>Pvt Kirschi, Harold S. 19038407</p> <p>Pvt Overby, Evans E. 13035026 19 Bomb</p>
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These bodies were buried in this grave but individual identification is impossible.

RESTRICTED

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WD QMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT			DATE OF REPORT 4 Sept 48		
Imprint Identification Tag If Possible. DO NOT TYPE		Section 1.—IDENTIFICATION.			SERIAL No. Unknown		
		NAME (Last, first, middle initial) UNKNOWN #4-1851 (Formerly UNK X-821)			BRANCH OF SERVICE Unknown		
		GRADE Unknown	ORGANIZATION Unknown		HEIGHT Unknown		WEIGHT Unknown
		RACE Unknown	RELIGION Unknown	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY		WEAPON AND SERIAL No.	
PLACE OF DEATH POW Camp, Cabanatuan, 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)					
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) Yes (2)		See Remarks 					
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME		None			A TRUE COPY: B. McNEEMAR Capt., QMC		
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 12 Aug 48	HOUR 0900	BURIED IN (Shroud, blanket, or name of other) Casket	TYPE OF GRAVE MARKER None	PLOT No. HANGER 810	ROW No. BAY F	GRAVE No. CRYPT 1909	
WAS THIS A REBURIAL? (Yes or no) 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. 20	GRAVE No. 2475	
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY				
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) Yes	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) Yes		REMARKS: UNK X-4851 AGRS Mausoleum, Manila, P.I. Formerly UNK X-821 USAF Cem Manila, Luzon, P.I. could be anyone of the following listed burials in AGRS Mausoleum, Manila, P.I. George Sr. York, George Sr. Capt. RUARK, John W.				
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) STORED OWENS, John Tierman		RANK Pfc	SERIAL No. 344674	ORGANIZATION Unknown	GRAVE No. CRYPT 1911		
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) STORED GUSTINCIC, Joseph A		RANK Pfc	SERIAL No. 333314	ORGANIZATION M-3-5	GRAVE No. CRYPT 1907		
SIGNATURE OF PERSON PREPARING REPORT /t/ J J McDERMOTT, Adm Asst			SIGNATURE OF GRS OFFICER VERIFYING REPORT /t/ ANDREW S. ROBSON, 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.							

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DATE OF REPORT		LEFT LITTLE FINGER		LEFT RING FINGER		LEFT MIDDLE FINGER		LEFT INDEX FINGER		LEFT THUMB		RIGHT THUMB		RIGHT INDEX FINGER		RIGHT MIDDLE FINGER		RIGHT RING FINGER		RIGHT LITTLE FINGER																															
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OTHER IDENTIFICATION CLUES												PLACE OF DEATH																																							
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U-1675

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

7 Feb 46

Imprint Identification Tag If Possible.
DO NOT TYPE

Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)

UNKNOWN X-821 (KELDER, Arthur H)
(Formerly UNKNOWN C-281 Cabanatuan Cemetery)

SERIAL No.

36016623

GRADE

Pvt

ORGANIZATION

MD

BRANCH OF SERVICE

Army

RACE

RELIGION

IF OTHER THAN U. S. DEAD, GIVE
NAME OF COUNTRY

PLACE OF DEATH

POW Camp Cabanatuan,
Luzon, P I

CAUSE OF DEATH

Malaria, Pellagra, Diphtheria

DATE OF DEATH

19 Nov 42

EMERGENCY ADDRESSEE (Name, relationship, and address)

Mrs. Julia Kelder (M) 6807 Raven St. Chicago, Ill.

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)

Records indicate fourteen (14) bodies found in common
grave. There were thirteen (13) Unknowns one (1) of which
was identified by an Identification Tag:-
-(See Sec 3 reverse side)-

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

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 Jan 46	0900	Shelter Half	Cross	2	20	2475

WAS THIS A REBURIAL?
(Yes or no)

Yes

IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE

POW Camps I & II Cabanatuan Cemetery, Luzon, PI
45.7-70.9 1/50,000

PLOT No.

7

ROW No.

0

GRAVE No.

717

TYPE OF RELIGIOUS CEREMONY

PERSON CONDUCTING BURIAL RITES

IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY

IDENTIFICATION TAG BURIED WITH BODY (Yes or no)

Yes

IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)

Yes

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

UNKNOWN X-820 (WAID, Charles. M)
(Formerly UNKNOWN C-280 Cabanatuan Cemetery)

RANK

Pvt

SERIAL No.

19049058

ORGANIZATION

MD

GRAVE No.

2474

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

UNKNOWN X-822 (KOVACH, John).
(Formerly UNKNOWN C-282 Cabanatuan Cemetery)

RANK

Pvt

SERIAL No.

20500764

ORGANIZATION

GRAVE No.

2476

SIGNATURE OF PERSON PREPARING REPORT

R. C. BARRETT, S/Sgt., GRS.

SIGNATURE OF GRS OFFICER VERIFYING REPORT

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.

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HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
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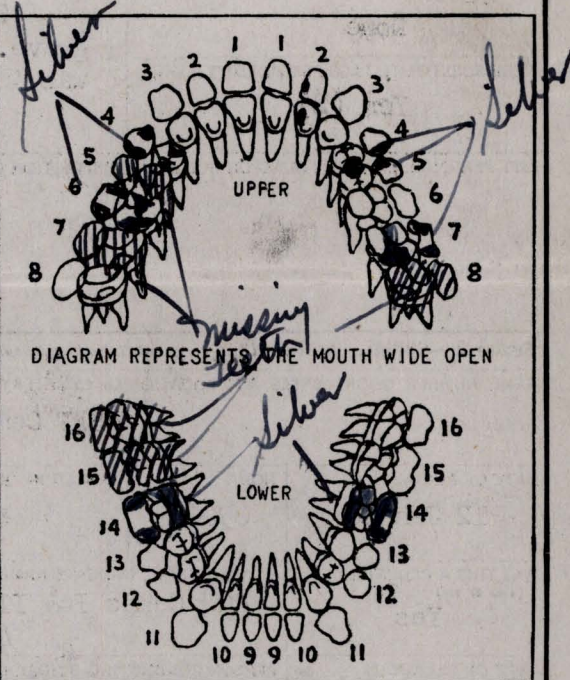
WEAPON AND SERIAL No.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
-----------------------	---------------	--------------------------------

OTHER IDENTIFICATION CLUES

MAR 1945

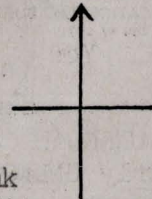
LEFT LITTLE FINGER
 LEFT RING FINGER
 LEFT MIDDLE FINGER
 LEFT INDEX FINGER
 LEFT THUMB
 RIGHT THUMB
 RIGHT INDEX FINGER
 RIGHT MIDDLE FINGER
 RIGHT RING FINGER
 RIGHT LITTLE FINGER

FILLINGS	 <p>SILVER FILLING GOLD FILLING</p>
CAVITIES	 <p>CAVITY DECAYED</p>
MISSING TEETH	 <p>TOOTH MISSING</p>
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FURNISH SKETCH AND MAP REFERENCE AND COORDINATES FOR BURIAL IN OTHER THAN ESTABLISHED CEMETERY

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These bodies were buried in this grave but individual identification is impossible.