CORRECTED REPORT

RESTRICTED

TURK
LIED

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: 20 August 1951

Imprint Identification Tag If Possible. DO NOT TYPE

Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)	SERIAL NO.
Pvt. L. Byron.	3270

GRADE	ORGANIZATION	BRANCH OF SERVICE
Unknown	5th Turkish Brigade	Turkish Army

RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
Caucasian	Mohamedan	Turkey

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
Prev. reported	Prev. reported	Prev. reported

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)
Prev. reported	
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) Prev. reported	

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

Un Military Cemetery Yongnok, Korea XP 0696

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.
26 March 1951	1600	Shelterhalf	Cross	6	Allied 2	194

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.
No				

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
Prev. reported		Copy of this corrected report buried 12 inches below grave marker

IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)
Prev. reported	

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.
Prev. reported				

SIGNATURE OF PERSON PREPARING REPORT: This report prepared by GR Div. Hq. KOMAK, APO 301

SIGNATURE OF GRS OFFICER VERIFYING REPORT: Robt Simmons Major, 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.

Incl 7

RESTRICTED

6253—FEC P&PC—9/50—300M

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

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
5'7"	130	Violet	Brown	None Noted

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

OTHER IDENTIFICATION CLUES

FILLINGS



CAVITIES



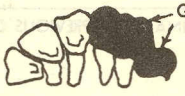
MISSING TEETH



CROWNED TEETH



BRIDGE WORK



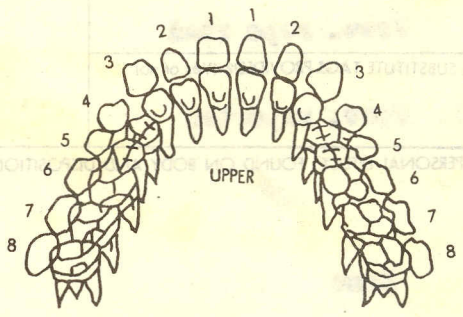
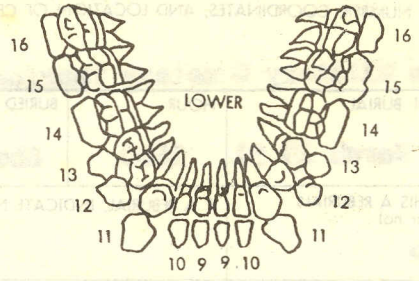
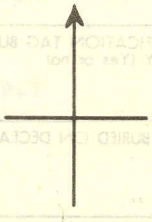


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



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



REMARKS Authority for change of identification, verbal request of Capt Kocapinar, Veli, GHQ, Turkish Brigade. Previously reported as BOGDON, Eisi

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: 26 March 1951

Imprint Identification Tag If Possible. DO NOT TYPE

Turkish ID Tags Unable to Imprint

Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)	SERIAL NO.
[illegible], Kisi	3270

GRADE	ORGANIZATION	BRANCH OF SERVICE
Unknown	Sol Turkish Brigade	Turkish Army

RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
White	Mohamdan	Turkey

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
South Korea	Wound, Missile Head	24 March 1951

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)
Two (2)	
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)	
Yes (1) (GRS)	

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

UN MILITARY CEMETERY, TAEJON, KOREA EP 0896

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.
26 March 1951	1600	Shelterhalf	Cross	Allied 6	2	194

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.
No				

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
		One copy of this form buried one foot at head of grave.

IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)
Yes	Yes (GRS)

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.
[illegible], Kelli	Unk	Unk	Turk Brig	193

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
[illegible], 1st Lt. QMC	WILLIAM C. [illegible], 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

6253—FEC P&PC—9/50—300M

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

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
Estd 5'7"	Estd 130	Violet	Brown	None Noted

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

OTHER IDENTIFICATION CLUES

FILLINGS



CAVITIES



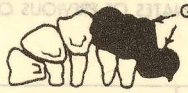
MISSING TEETH



CROWNED TEETH



BRIDGE WORK



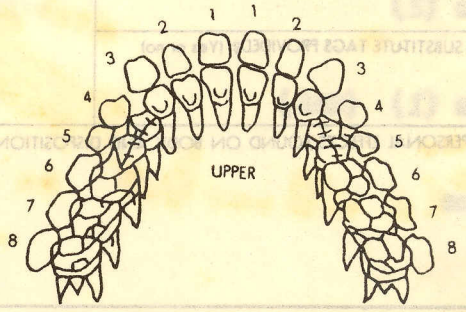
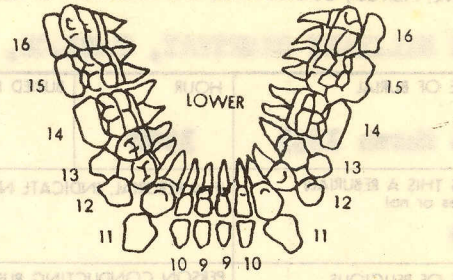
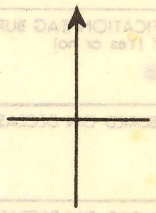


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



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



REMARKS

Death Tag signed by Peter L. Long, Capt. MC

RESTRICTED ALLIED 28931

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: 26 March 51

Imprint Identification Tag If Possible. DO NOT TYPE

TURKEY O

Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)	SERIAL NO.
BOUGROM Kisi	3270

GRADE	ORGANIZATION	BRANCH OF SERVICE
UNK.	SOL TURKISH BRIGADE	ARMY

RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
W	MOHAMADEN	TURKEY

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
So. KOREA	WOUND, MISSILE HEAD	24 MARCH 1951

EMERGENCY ADDRESSEE (Name, relationship, and address)
UNK.

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)
Two (2)	
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) YES (1-GRS)	

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
Tanggok

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.
26 March 51	1600	SHELTERHALF	CROSS	allied 6	2	194

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.
NO				

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY
		Remark.

IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)
YES	YES (GRS-T)

BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.
GAMUS, HALIL	UNK	UNK	TURK-BRIG	193

SIGNATURE OF PERSON PREPARING REPORT (ST)
DONALD J. EGGUM 1ST LT. QMC

SIGNATURE OF GRS OFFICER VERIFYING REPORT

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.

ALLIED RESTRICTED 30 Mar 51

6253—FEC P&PC—9/50—300M

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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HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
ESTD. 5'7"	ESTD. 130	UNDETERMINED	BROWN	NONE NOTED

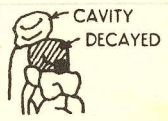
WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND

OTHER IDENTIFICATION CLUES

FILLINGS



CAVITIES



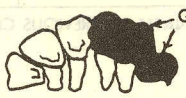
MISSING TEETH



CROWNED TEETH



BRIDGE WORK



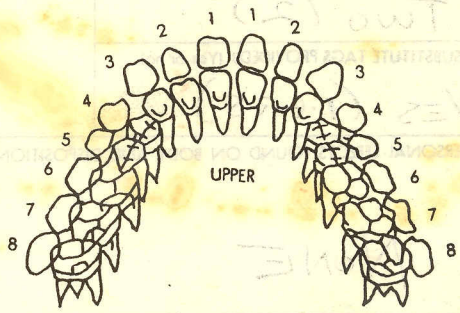
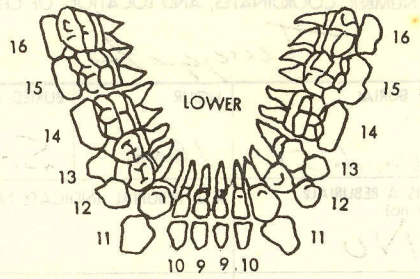
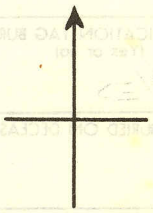


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



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



REMARKS

~~1-~~ 1- DEATH TAG SIGNED BY PETER I. LONG CAPT. MC