CORRECTED REPORT

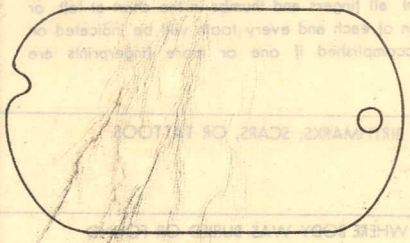
RESTRICTED #2 ALLIED TURK

WD GMC 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.
BAIRAM, Ismail	5801

GRADE	ORGANIZATION	BRANCH OF SERVICE
Sgt	Turkish Brigade	Turkish Army

RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
Caucasian	Unk	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	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
United Nations Military Cemetery Tanggok, Korea SP 0676

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.
18 May 51	1000	Burial pouch	Star & Crescent	6	2	201

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
		A copy of this corrected report buried 18 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.
Prev. reported				

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

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
This report prepared by GR Div. Hq. EUSAK. APO 301.	Robt. J. Glancy, GRC

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 14²

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 enatomical 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.

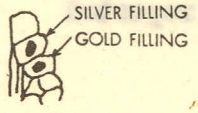
(b) A fingerprint, or prints, are the most valuable of all clues. Imprint all fingers and thumbs in the chart at left, or as many as possible. If no fingerprint or prints can be secured, the condition of each and every tooth will be indicated on the tooth chart in accordance with diagram below. Tooth chart will not be accomplished if one or more fingerprints are secured.

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	BIRTHMARKS, SCARS, OR TATTOOS
		Prev. reported		

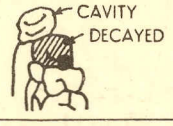
WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
	Prev. reported	

OTHER IDENTIFICATION CLUES

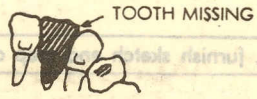
FILLINGS



CAVITIES



MISSING TEETH



CROWNED TEETH



BRIDGE WORK



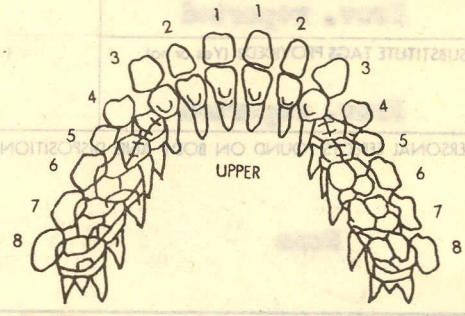
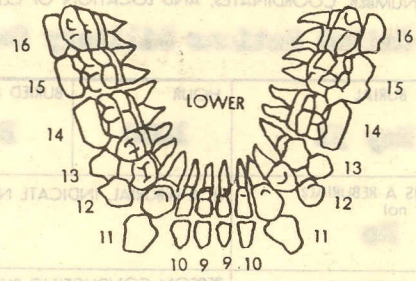
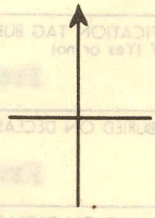


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



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



REMARKS Authority for change of identification, verbal request of Capt Koeppner, Vell, GHQ, Turkish Brigade. Previously reported as [redacted], Pvt.

CORRECTED REPORT

RESTRICTED

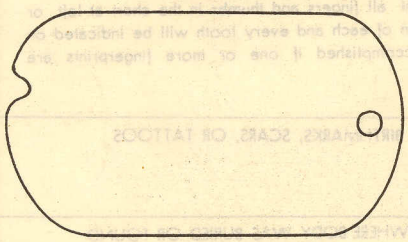
ALLIED TURK

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: 23 June 1951

Imprint Identification Tag If Possible. DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)	SERIAL NO.
BAYRAM, Fevli.	5801

GRADE	ORGANIZATION	BRANCH OF SERVICE
Sgt	Turkish Brigade	Turkish Army

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

United Nations Military Cemetery Tanggok, Korea FP 0896

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.
18 May 51	1000	Burial pouch	Star and Crescent	Allied 6	2	201

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
		A copy of this form buried one (1) foot below grave marker

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

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
This report prepared by GR Div. Hq. EUSAK. APO 301.	Robert J. Thomas ROBERT J. THOMAS, 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.

RESTRICTED

6253—FEC P&PC—9/50—300M

Incl 2

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

NOT FINGERPRINTED

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
		Prev. reported		

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

OTHER IDENTIFICATION CLUES

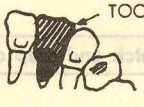
FILLINGS — SILVER FILLING, GOLD FILLING



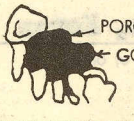
CAVITIES — CAVITY DECAYED



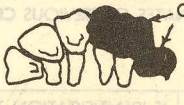
MISSING TEETH — TOOTH MISSING



CROWNED TEETH — PORCELAIN CROWN, GOLD CROWN



BRIDGE WORK — GOLD BRIDGE



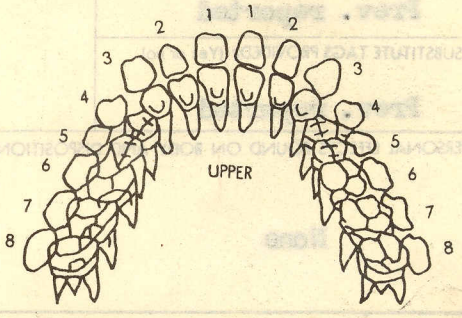
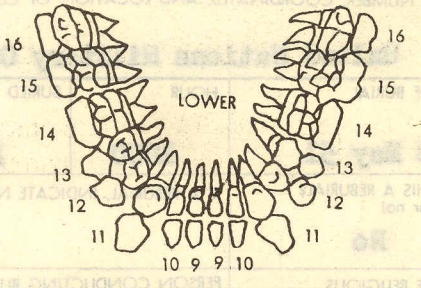
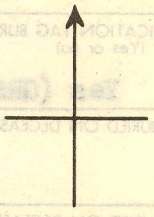


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



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



REMARKS Records of Turkish Brigade show correct spelling of name to be as shown on reverse. Previously reported as Rasgram, Fenzi.

ALLIED

RESTRICTED

TURKEY 46545

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: 18 May 51

Imprint Identification Tag If Possible. DO NOT TYPE

Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)		SERIAL NO.
BAGRAM, Fenzi		5801
GRADE	**ORGANIZATION**	**BRANCH OF SERVICE**
Sgt	Turkish Brigade	Turkish Army
RACE	**RELIGION**	**IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY**
W	Unknown	Turkey

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
3rd Sta Hosp, APO 59, Korea	Meningitis, tuberculer	15 May 51

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	Two (2) Death Tags signed by Lt (jg) Julian Hyman, MC, USN.
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) Yes (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, Tanggok, 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.
18 May 51	1000	Burial pouch	Star and Crescent	Allied 6	2	201

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 (GRS)	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.**
UNKNOWN X-1024 Tanggok	Unk	2190	Unk	200

SIGNATURE OF PERSON PREPARING REPORT

Michael J. Cox, Sgt, ER32762381

SIGNATURE OF GRS OFFICER VERIFYING REPORT

SEYMOUR POTNICK, 1st Lt, Armor

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.

BAGRAM, Fenzi

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

NOT FINGERPRINTED

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
Est 5'9"	Est 125	Unk	Dark brown	None

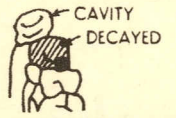
WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
None	None	

OTHER IDENTIFICATION CLUES

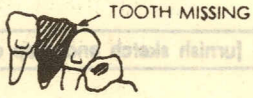
FILLINGS



CAVITIES



MISSING TEETH



CROWNED TEETH



BRIDGE WORK



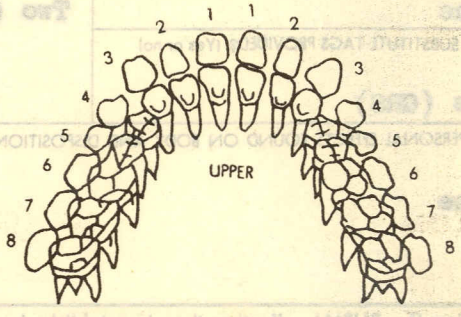
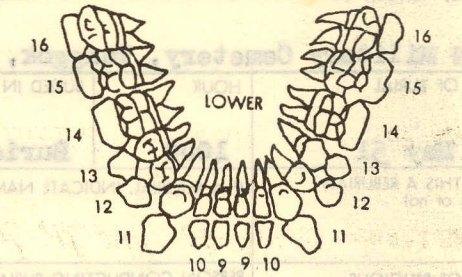
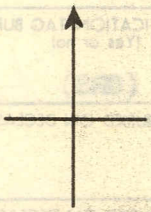


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



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



REMARKS

EMT, unsigned, gives cause of death as noted in Section 1.

RESTRICTED ALLIED 4654-5

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: 18 May 51

Imprint Identification Tag If Possible. DO NOT TYPE

TURKEY

Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial): BAGRAM FENZI			SERIAL NO.: 5801
GRADE: SGT.	ORGANIZATION: TURKISH BRIGADE		BRANCH OF SERVICE: ARMY
RACE: WHITE	RELIGION: UNK	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY: TURKEY	
PLACE OF DEATH: 3 STA. HOSP. APO 59, KOREA	CAUSE OF DEATH: MENINGITIS, TUBERCULER		DATE OF DEATH: 15, May, 1951

EMERGENCY ADDRESSEE (Name, relationship, and address)

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none): NONE

WERE SUBSTITUTE TAGS PROVIDED? (Yes or no): YES (2) GRS

IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse): (b) TWO (2) DEATH TAGS SIGNED BY: LT(JG) JULIAN HYMAN M.C. USN

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: Tangyok

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.
18 May 51	1000	Burial Pouch	STAR + CRESENT	allied 6	2	201

WAS THIS A REBURIAL? (Yes or no): NO

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

PLOT NO.	ROW NO	GRAVE NO.

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

IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)
YES (GRS)	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.
UNK X-1024	unk	2190	unk	200

SIGNATURE OF PERSON PREPARING REPORT: Lawrence A. Mutch HMIsn

SIGNATURE OF GRS OFFICER VERIFYING REPORT: Lyt Julian Hyman

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
EST 5'9"	EST 125	UND	DARK BROWN	NONE

WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
NONE	NONE	

OTHER IDENTIFICATION CLUES

FILLINGS



CAVITIES



MISSING TEETH



CROWNED TEETH



BRIDGE WORK



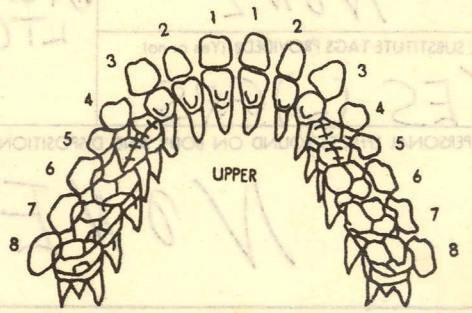
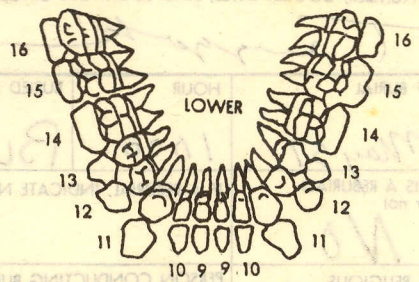


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



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



REMARKS (1) E.M.T. UNSIGNED. Gave Cause of Death As Noted in Sect. I.