ALLIED ALLIED TURKEY 1926-4

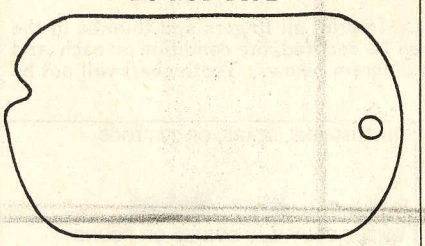
RESTRICTED

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: 21 August 1951

Imprint Identification Tag If Possible. DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (*Last, first, middle initial*)	SERIAL No.
PARLAR, Halil	1478

GRADE	ORGANIZATION	BRANCH OF SERVICE
Sgt.	Turkish Brigade	Turkish Army

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

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
138-951, Korea	Undetermined	17 August 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*)
None	EMT signed by M/Sgt Yoltu Neiyet
WERE SUBSTITUTE TAGS PROVIDED? (*Yes or no*) Yes Three (3) 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.
21 August 1951	1200	Canvas Square	Star and Crescent	Allied 25	12	1969

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
None		A 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.
EMPTY GRAVE				1970
BODY BURIED ON DECEASED RIGHT, NAME (*Last, first, middle initial*)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
BEGINNING OF ROW				

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
Robert E. Graham	Raymon Potnick
ROBERT E GRAHAM 2nd Lt QMC	By RICHARD G MERRYMAN 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.*

PARLAR, HALIL 1478

RESTRICTED

16—43997-1

FAEL/P, Hall 1478 Plot All 25 Row 12 Grave 1969
HHMC, Zanesville

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 5'8"	Est 170	Unkt.	Black	None Noted

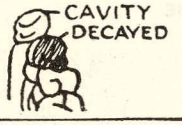
WEAPON AND SERIAL NO.	LAUNDRY MARKS	WHERE BODY WAS BURIED OR FOUND
	None Noted	

OTHER IDENTIFICATION CLUES

FILLINGS



CAVITIES



MISSING TEETH



CROWNED TEETH



BRIDGE WORK



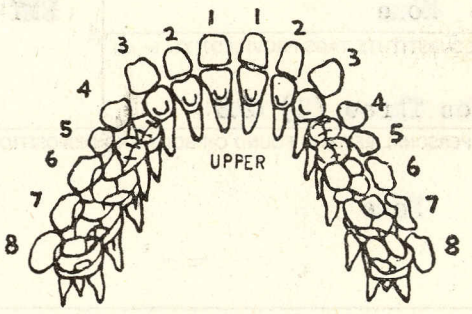
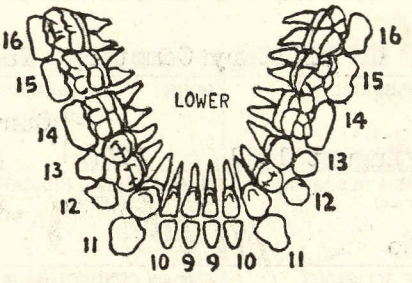
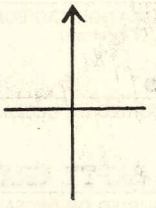


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



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



REMARKS: Name, ASN, grade, and place of death taken from Ltr.

16—43997-1 U. S. GOVERNMENT PRINTING OFFICE

ALLIED

RESTRICTED

7926-4

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: 21 Aug 51

Imprint Identification Tag If Possible. DO NOT TYPE

TURKEY

Section 1.—IDENTIFICATION.

NAME (*Last, first, middle initial*)	SERIAL No.
PARLAR, HALIL	1478

GRADE	ORGANIZATION	BRANCH OF SERVICE
SGT	TURKISH BRIGADE	TURKISH ARMY

RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
WHITE	MOHAMMEDAN	TURKEY

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
138-951 KOREA	UNDETERMINED	17 AUG 1951

EMERGENCY ADDRESSEE (*Name, relationship, and address*)

USA.

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

WERE SUBSTITUTE TAGS PROVIDED? (*Yes or no*): YES (3) GRS.

IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (*If unidentified, fill in section 3 on reverse*): EMT SIGNED BY M/SGT. YOLTU NEIYOT

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.
21 Aug 51	1200	CANVAS SQUARE	STR. CRES ~~CROSS~~	allied 25	12	1969

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
None	—	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.
Empty Grave	—	—	—	1970

BODY BURIED ON DECEASED RIGHT, NAME (*Last, first, middle initial*)	RANK	SERIAL No.	ORGANIZATION	GRAVE No.
Beginning of Row				

SIGNATURE OF PERSON PREPARING REPORT: James Ayers Pfc

SIGNATURE OF GRS OFFICER VERIFYING REPORT: Milton J. Carreau S+C

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.*

PARLAR HALIL 1478

RESTRICTED

16—43997-1

LEFT LITTLE FINGER

LEFT RING FINGER

LEFT MIDDLE FINGER

LEFT INDEX FINGER

NOT FINGERPRINTED

LEFT THUMB

RIGHT THUMB

RIGHT INDEX FINGER

NOT FINGERPRINTED

RIGHT MIDDLE FINGER

NOT FINGERPRINTED

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 5'6"	EST 170	UNDET	BLACK	NONE NOTED

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

OTHER IDENTIFICATION CLUES

~~NONE~~

FILLINGS — SILVER FILLING, GOLD FILLING

CAVITIES — CAVITY DECAYED

MISSING TEETH — TOOTH MISSING

CROWNED TEETH — PORCELAIN CROWN, GOLD CROWN

BRIDGE WORK — GOLD BRIDGE

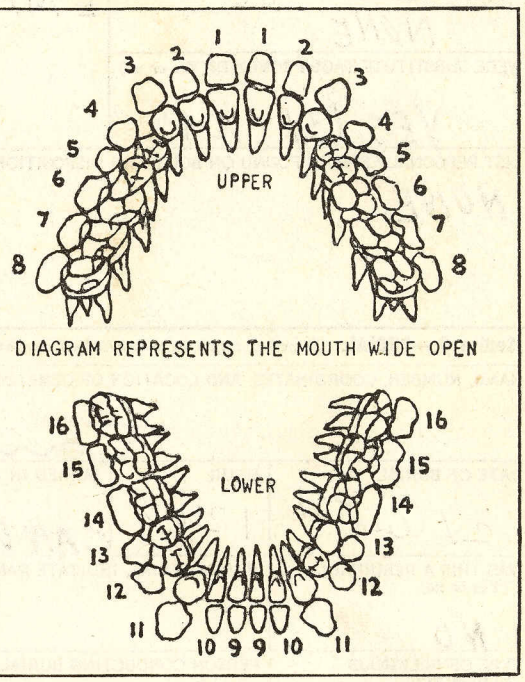
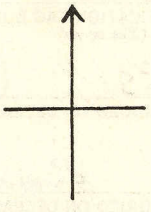


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN

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



REMARKS:

(1) NAME, ASN, GRADE & POD, TAKEN FROM E.M.T.

16—43997-1 U. S. GOVERNMENT PRINTING OFFICE