CORRECTED REPORT

RESTRICTED

TURK

ALLIED

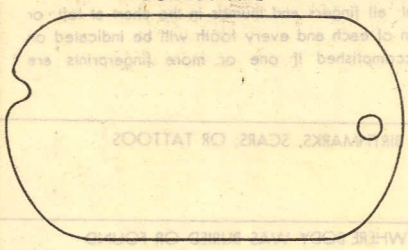
WD QMC FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

# REPORT OF INTERMENT

(AR 30-1810 and AR 30-1815)

DATE OF REPORT: 20 Aug 51

Imprint Identification Tag If Possible. DO NOT TYPE



## Section 1.—IDENTIFICATION.

| NAME (Last, first, middle initial) | | SERIAL NO. |
|---|---|---|
| " " " | | 2470 |
| GRADE: Unknown | ORGANIZATION: Unknown | BRANCH OF SERVICE: Army |
| RACE: Caucasian | RELIGION: Unknown | IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY: Turkey |

| PLACE OF DEATH | CAUSE OF DEATH | DATE OF DEATH |
|---|---|---|
| Prov. Reported | Prov. Reported | Prov. 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) |
|---|---|
| None | Prov. Reported |
| WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) | |
| Prov. 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 Tanggok, Korea. FF 9320

| DATE OF BURIAL | HOUR | BURIED IN (Shroud, blanket, or name of other) | TYPE OF GRAVE MARKER | PLOT NO. | ROW NO. | GRAVE NO. |
|---|---|---|---|---|---|---|
| 19 June 51 | 1400 | Shelter Half | Temp. | Allied 25 | 2 | 1049 |

| 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) |
|---|---|
| Prov. Reported | |

| BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) | RANK | SERIAL NO. | ORGANIZATION | GRAVE NO. |
|---|---|---|---|---|
| Prov. Reported | | | | |
| BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) | RANK | SERIAL NO. | ORGANIZATION | GRAVE NO. |
| Prov. Reported | | | | |

| SIGNATURE OF PERSON PREPARING REPORT | SIGNATURE OF GRS OFFICER VERIFYING REPORT |
|---|---|
| This report prepared by CM Div. Hq. | Robert Thomas |

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 33

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 |
|---|---|---|---|---|
| | | Prev. Reported | | |

| WEAPON AND SERIAL NO. | LAUNDRY MARKS | WHERE BODY WAS BURIED OR FOUND |
|---|---|---|
| | Prev. Reported | |

OTHER IDENTIFICATION CLUES

**FILLINGS**



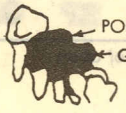

**CAVITIES**



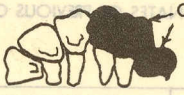

**MISSING TEETH**




**CROWNED TEETH**




**BRIDGE WORK**



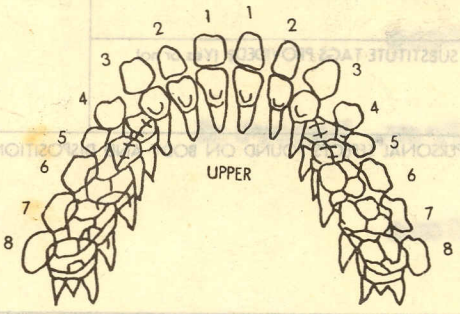
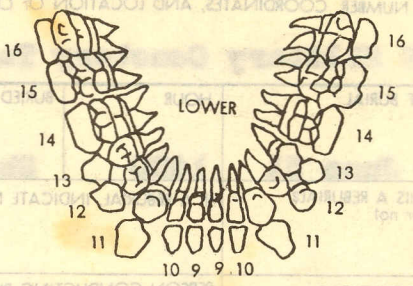
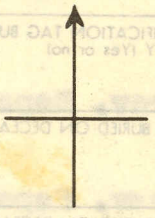




DIAGRAM REPRESENTS THE MOUTH WIDE OPEN




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



REMARKS

Authority for change of identification, verbal request of Capt Kocaginar, Veli, CMO, Turkish Brigade. Previously reported as UNKU, Torahim.

ALLIED

ALLIED RESTRICTED TURKEY

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: 19 June 1951

Imprint Identification Tag If Possible. DO NOT TYPE

## Section 1.—IDENTIFICATION.

| NAME (Last, first, middle initial) | SERIAL NO. |
|---|---|
| UNLU, Tbrahim | 2470 |

| GRADE | ORGANIZATION | BRANCH OF SERVICE |
|---|---|---|
| Unknown | Unknown | Army |

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

| PLACE OF DEATH | CAUSE OF DEATH | DATE OF DEATH |
|---|---|---|
| Map-Tol-Ri, Korea | Undetermined | Est 20 April 1951 |

EMERGENCY ADDRESSEE (Name, relationship, and address)

Unknown

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

None

WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)

Yes Two (2) GRS

IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)

EMT signed by Koeapinar Veli, Capt Turkish Army

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

U.N. 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. |
|---|---|---|---|---|---|---|
| 19 June 1951 | 1400 | Shelterhalf | Temp. | Allied 25 | 2 | 1849 |

| 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 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. |
|---|---|---|---|---|
| FARAKOE, Mustafa | Unknown | 2656 | Unknown | 1850 |
| BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) | RANK | SERIAL NO. | ORGANIZATION | GRAVE NO. |
| BEGINNING OF ROW | | | | |

SIGNATURE OF PERSON PREPARING REPORT
Robert E. Graham
ROBERT E GRAHAM 2nd Lt QMC

SIGNATURE OF GRS OFFICER VERIFYING REPORT
Richard G Merryman
RICHARD G MERRYMAN 2nd 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.

UNLU, TBRAHIM 2470

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 5'10" | Est 140 | Undetermined | Pubic hair Blonde | None Noted |

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

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

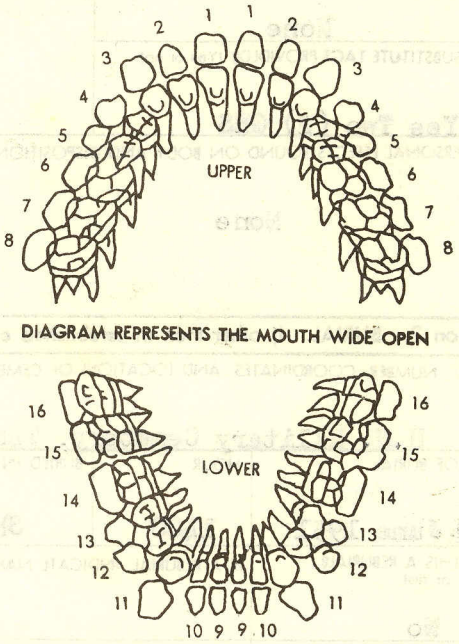
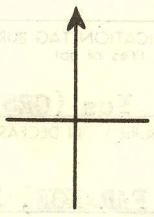



DIAGRAM REPRESENTS THE MOUTH WIDE OPEN

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



REMARKS

ALLIED

RESTRICTED

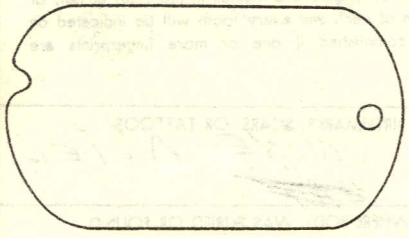
6636

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: 19 June 51

Imprint Identification Tag If Possible. DO NOT TYPE



## Section 1.—IDENTIFICATION.

| NAME (Last, first, middle initial) | | SERIAL NO. |
|---|---|---|
| UNLU, IBRAHIM | | 2470 |
| **GRADE** | **ORGANIZATION** | **BRANCH OF SERVICE** |
| UNK | UNK | ARMY |
| **RACE** | **RELIGION** | **IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY** |
| WHITE | UNK | TURKEY |

| PLACE OF DEATH | CAUSE OF DEATH | DATE OF DEATH |
|---|---|---|
| MAP-TOL-RI KOREA | UNDETERMINED | EST 20 APR 51 |

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) |
|---|---|
| NONE | (1) ENMT SIGNED BY KOEAPINAR VELI, CAPT. TURKISH ARMY. |
| WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) | |
| YES (2) 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. |
|---|---|---|---|---|---|---|
| 19 June 51 | 1400 | SHELTER HALF | TEMPORARY MARKER | allied 25 | 2 | 1849 |

| 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 (GRS) | YES (GRS) |

| BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) | RANK | SERIAL NO. | ORGANIZATION | GRAVE NO. |
|---|---|---|---|---|
| FARAKOE, MUSTAFA | unk | 2656 | unk | 1850 |
| **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 |
|---|---|
| James W. Dunkin Sgt | M. J. Coy |

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.

UNLU, IBRAHIM 2470

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 :**

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| HEIGHT | WEIGHT | COLOR OF EYES | COLOR OF HAIR | BIRTHMARKS, SCARS, OR TATTOOS |
|---|---|---|---|---|
| EST. 5' 10" | EST. 170 | UNDET | BLOND | NONE NOTED |

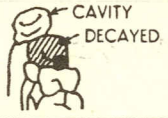
| WEAPON AND SERIAL NO. | LAUNDRY MARKS | WHERE BODY WAS BURIED OR FOUND |
|---|---|---|
| | NONE NOTED | |

OTHER IDENTIFICATION CLUES

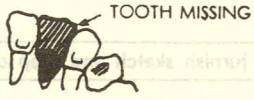
**FILLINGS**




**CAVITIES**



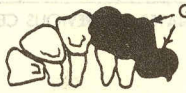

**MISSING TEETH**




**CROWNED TEETH**




**BRIDGE WORK**



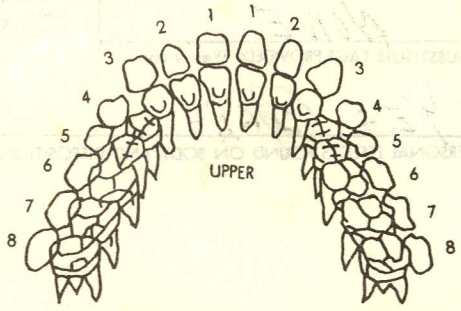
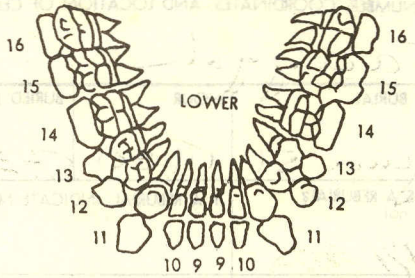
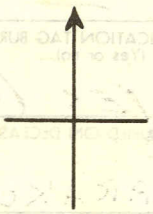




DIAGRAM REPRESENTS THE MOUTH WIDE OPEN




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



REMARKS