CORRECTED REPORT

RESTRICTED

WD QM:C FORM 1042
(Rev. 1 Apr. 1945)
(Supersedes GRS Form 1)

REPORT OF INTERMENT
(AR 30-1810 and AR 30-1815)

FURK ALLIED

DATE OF REPORT: 20 August 1951

Imprint Identification Tag If Possible. DO NOT TYPE

Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)	SERIAL NO.
OGER, Ibrahim.	1128

GRADE	ORGANIZATION	BRANCH OF SERVICE
Sold	Unk	Turkish Army

RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
Caucasian	Mohammedan	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 EP 0896

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.
1 Jul 51	1200	Shelter Half	Star & Crescent	Allied 25	7	1917

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.	Robert J. Thomas. ROBERT J. THOMAS. Major. GSC

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 #5

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 — SILVER FILLING, GOLD FILLING

CAVITIES — CAVITY, DECAYED

MISSING TEETH — TOOTH MISSING

CROWNED TEETH — PORCELAIN CROWN, GOLD CROWN

BRIDGE WORK — GOLD BRIDGE

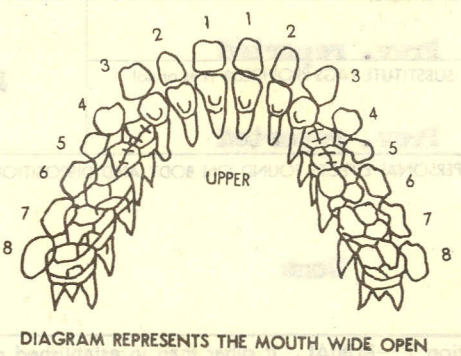
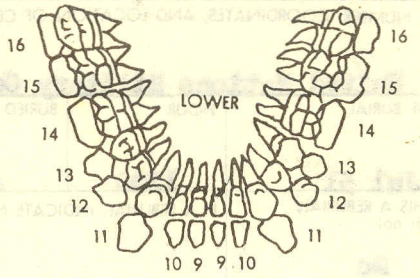
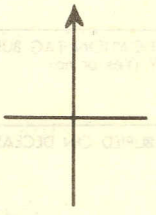


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



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



REMARKS

Authority for change of identification, verbal request of Capt Kocapiner, Veli, GRO, Turkish Brigade. Previously reported as [redacted], Ibrahim.

ALLIED RESTRICTED 6970-1 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: 1 July 1951

Imprint Identification Tag If Possible. DO NOT TYPE

Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)	SERIAL NO.
GOEER, Ibrahim	1128

GRADE	ORGANIZATION	BRANCH OF SERVICE
Sold	Unknown	Turk 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
Suwon, Korea	Undetermined	Est 15 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 Lt. Trak Behie

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.
1 July 1951	1200	Shelterhalf	Star and Crescent	Allied 25	7	1917

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
		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.
YILDIRIM, Hoisan	Ser	3202	Turkish Brigade	1918

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.
ILZUN, Halil	Unknown	3458	Turkish Brigade	1916

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.

GOEER, IBRAHIM

RESTRICTED

6253—FEC P&PC—9/50—300M

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 5'11"	Est 140	Undetermined	Black	None Noted

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

OTHER IDENTIFICATION CLUES

LEFT LITTLE FINGER

LEFT RING FINGER

LEFT MIDDLE FINGER

LEFT INDEX FINGER

LEFT THUMB

RIGHT THUMB

RIGHT INDEX FINGER

RIGHT MIDDLE FINGER

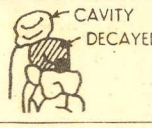
RIGHT RING FINGER

RIGHT LITTLE FINGER

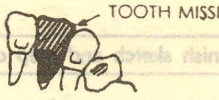
FILLINGS



CAVITIES



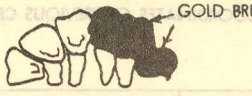
MISSING TEETH



CROWNED TEETH



BRIDGE WORK



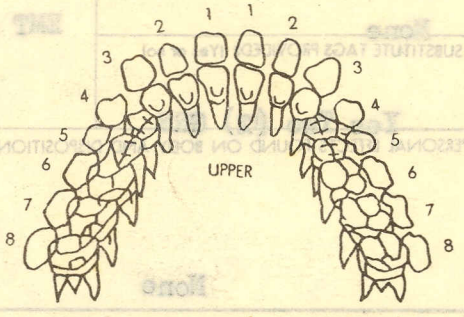
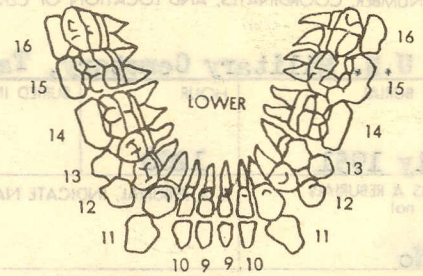


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



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



REMARKS

RESTRICTED

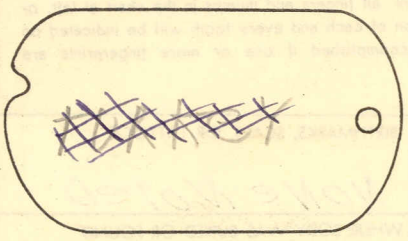
ALLIED 6970-1

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: 1 JULY '51

Imprint Identification Tag If Possible. DO NOT TYPE



Section 1.—IDENTIFICATION.

NAME (Last, first, middle initial)	SERIAL NO.
GOEER, TBRAhim	1128

GRADE	ORGANIZATION	BRANCH OF SERVICE
SOLD	UNK	TURK ARMY

RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY
White	MOHAMMEDIAN	TURKEY

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
SUWON KOREA	UNDETEMINED	EST. 15 APRIL 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	~~EMT STATING NAME, GRADE, & SERIAL~~
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)	~~NO,~~ EMT SIGNED BY LT TRAK BEHIC
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.
1 JULY 51	1200	SHELTER HALF	STAR CRESCENT	ALLIED 25	7	1917

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.
YILDIRIM, HOISAN	SER	3202	TURICISH BRIGADE	1918

BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)	RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.
LLZUN, HOLIL	UNK	3458	TURKISH BRIGADE	1916

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
Clifford Botto Pvt.	Milton J Lemieux SGC

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

GOEER TBRAhim

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
EST. 5'11"	EST. 140	UNDET	BLACK	NONE NOTED

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

OTHER IDENTIFICATION CLUES

FILLINGS



CAVITIES



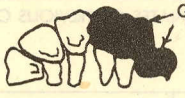
MISSING TEETH



CROWNED TEETH



BRIDGE WORK



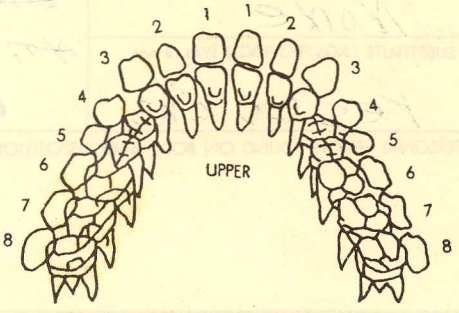
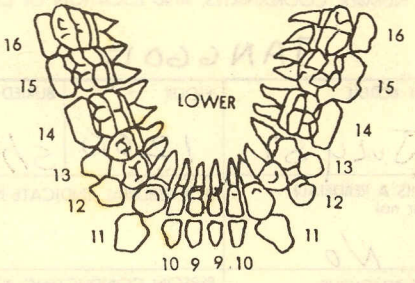
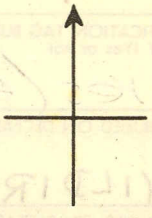


DIAGRAM REPRESENTS THE MOUTH WIDE OPEN



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



REMARKS