ALLIED RESTRICTED TURKEY 15990-4

REPORT OF INTERMENT

DATE OF REPORT: 18 May 53

TYPE OF REPORT: [X] INITIAL [ ] SUPPLEMENTAL (Reason)

Imprint Identification Tag If Possible. DO NOT TYPE

TURKEY
No ID Tags
found on Remains

SECTION 1. - IDENTIFICATION.

NAME (Last, First, Middle Initial)	SERVICE NUMBER
ATALI H. HUSEYIN	19036

GRADE	ORGANIZATION	BRANCH OF SERVICE
Unknown	T.A.F.C.	Army

RACE	RELIGION	COUNTRY (If not U.S.)
Caucasian	Unknown	TURKEY

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
GT 072069, Korea	EMT states: "Death due to battle injuries lt. leg, abdomen, rt. leg"	14 May 53

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

IF NO TAGS FOUND ON BODY, DESCRIBE ALL MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse): One (1) EMT signed by, "Med. Corp. Co. SAPULU NEZIHI"

WERE SUBSTITUTE TAGS PROVIDED? Three [X] YES (3) [ ] NO GRS.

COMPLETED TOOTH CHART WILL BE ATTACHED HERETO.

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME. IF LETTERS FOUND, INCLUDE NAME OF ADDRESSEE AND WRITER. GIVE OWNER OF WALLET, ETC.

No Personal Effects found on or with Remains.

SECTION 2. - BURIAL (If other than in established cemetery, furnish overlay and attach)

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

United Nations Military Cemetery, Tanggok, Korea EP 089868

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.
18 May 53	1000	Canvas Square	Star & Crescent	26	11	2103

WAS THIS A REBURIAL? [ ] YES [X] 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: General

PERSON CONDUCTING BURIAL RITES: STEPHEN H. STOLZ Lt. Co. Ch.C.

IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINER BURIED WITH BODY: One (1) copy of this form buried in burial bottle eighteen (18) inches below grave marker at head of grave.

IDENTIFICATION TAG BURIED WITH BODY: Two [X] YES (2) [ ] NO

IDENTIFICATION TAG ATTACHED TO MARKER: One [X] YES (1) [ ] NO

REMAINS BURIED IN GRAVE TO LEFT (When viewed from foot of grave), NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER	ORGANIZATION	GRAVE NO.
UYAR, KEMAL	Pvt.	15552	T.A.F.C.	2102
REMAINS BURIED IN GRAVE TO RIGHT (When viewed from foot of grave), NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER	ORGANIZATION	GRAVE NO.
RASIM, KUMKAYA	Pvt.	15542	T.A.F.C.	2104

SIGNATURE OF PERSON PREPARING REPORT: Eugene J. Mazurkiewicz
EUGENE J. MAZURKIEWICZ PVT QMC

SIGNATURE OF GRS OFFICER VERIFYING REPORT: Thaddeus M. Patterson
THADDEUS M. PATTERSON 1st Lt. QMC

DD FORM 1 JUL 51 551 REPLACES QMC FORM 1042, REV. 1 APRIL 1946, WHICH IS OBSOLETE.

31490-Army-AG Admin Cen-FEC-9/52-90M

ATALI H. HUSEYIN 19036

SECTION 3. - UNIDENTIFIED REMAINS

INSTRUCTIONS: Great care will be taken to record the most minute clues for the future identification of remains. Fill in anatomical characteristics below, and any other clues under "other" such as shoe size, Social Security number; position of body in airplanes, vehicles, and tanks; and serial number of airplanes, vehicles and tanks.

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	WHERE BODY WAS FOUND *(Grid Coordinates)*
Est. 5'7"	Est. 145	Undet.	Brown	CT 072069, Korea

BIRTHMARKS, SCARS, OR TATTOOS

None Noted

LAUNDRY MARKS

None

WEAPON(S) WITH SERIAL NUMBER(S)

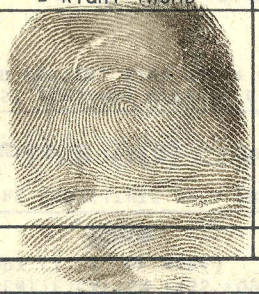
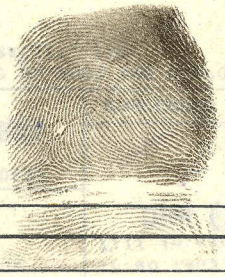
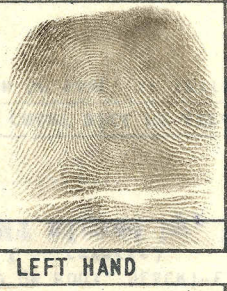
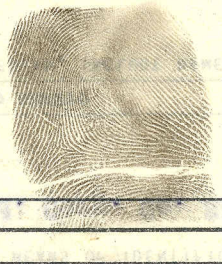
OTHER IDENTIFICATION CLUES *(Including other remains recovered or associated with this remains).*

No clothing found on or with Remains.
Remarks: Remains rec'd from Yong Dung Po Coll. Pt. Korea. Evac. #A8792/293rd Grs. Reg. Co. Tagged at Turkish Hosp. Name, serial number, org. cause, date and place of death taken from MT.

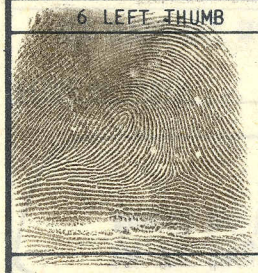
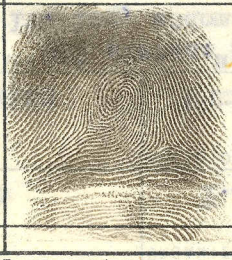
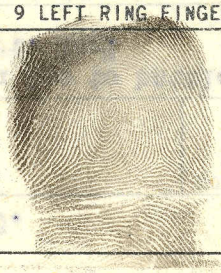
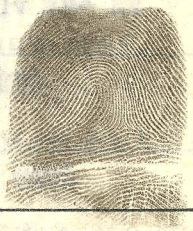
SECTION 4. - FINGERPRINTING - FINGERPRINTS OF ALL REMAINS MUST BE TAKEN

IMPRINT ALL FINGERS AND THUMBS *(or as many as possible)* IN THE PROPER SEQUENCE. Fingers should be clean, dry and not over-inked. Missing fingers should be noted in the proper individual finger blocks. Impressions MUST be recorded in the proper order.

RIGHT HAND

1 RIGHT THUMB	2 RIGHT INDEX FINGER	3 RIGHT MIDDLE FINGER	4 RIGHT RING FINGER	5 RIGHT LITTLE FINGER
				

LEFT HAND

6 LEFT THUMB	7 LEFT INDEX FINGER	8 LEFT MIDDLE FINGER	9 LEFT RING FINGER	10 LEFT LITTLE FINGER
				

DO NOT WRITE IN THIS SPACE *(For FBI use only)*

REMARKS

See Above

ALLIED RESTRICTED TURKEY 15990-4

REPORT OF INTERMENT

DATE OF REPORT: 18 MAY 53

TYPE OF REPORT: ☑ INITIAL ☐ SUPPLEMENTAL (Reason)

Imprint Identification Tag If Possible. DO NOT TYPE

TURKEY
NO ID TAGS O
FOUND ON
REMAINS.

SECTION 1. - IDENTIFICATION.

NAME (Last, First, Middle Initial)	SERVICE NUMBER
ATALI H. HUSEYIN	19036

GRADE	ORGANIZATION	BRANCH OF SERVICE
UNK	T.A.F.C.	ARMY

RACE	RELIGION	COUNTRY (If not U.S.)
CAUCASIAN	UNKNOWN	TURKEY

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
CT 072069, KOREA	EMT STATES: "DEATH DUE TO BATTLE INJURIES GSW LT. LEG, ABDOMEN, RT. LEG."	14 MAY 53

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

WERE SUBSTITUTE TAGS PROVIDED? (3) ☑ YES ☐ NO — THREE GRS

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

ONE (1) EMT SIGNED BY: "MED. CORP, CO. SAPULU NEZIHI."

COMPLETED TOOTH CHART WILL BE ATTACHED HERETO.

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME. IF LETTERS FOUND, INCLUDE NAME OF ADDRESSEE AND WRITER. GIVE OWNER OF WALLET, ETC.

NO P.E. FOUND ON OR W/REMAINS.

SECTION 2. - BURIAL (If other than in established cemetery, furnish overlay and attach)

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

U.N.M.C. PUSAN, KOREA EP 089868

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.
18 MAY 53	1000	CANVAS SQUARE	STAR + CRESC.	26	11	3103

WAS THIS A REBURIAL? ☐ YES ☑ 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
GENERAL	STEPHEN H. STOLZ LT. COL. CHC

IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINER BURIED WITH BODY: ONE(1) COPY OF THIS FORM BURIED IN BURIAL BOTTLE, EIGHTEEN (18) INCHES BELOW GRAVE MARKER AT HEAD OF GRAVE.

IDENTIFICATION TAG BURIED WITH BODY	IDENTIFICATION TAG ATTACHED TO MARKER
TWO(2) ☑ YES ☐ NO	ONE(1) ☑ YES ☐ NO

REMAINS BURIED IN GRAVE TO LEFT (When viewed from foot of grave), NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER	ORGANIZATION	GRAVE NO.
UYAR, KEMAL	PVT.	15552	T.A.F.C.	3102

REMAINS BURIED IN GRAVE TO RIGHT (When viewed from foot of grave), NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER	ORGANIZATION	GRAVE NO.
RASIM, KUMKAYA	PVT.	15542	T.A.F.C.	3104

SIGNATURE OF PERSON PREPARING REPORT: SLM Eugene J. Mazurkiewicz

SIGNATURE OF GRS OFFICER VERIFYING REPORT: Edmund A. Ruppert

DD FORM 1 JUL 51 551 REPLACES QMC FORM 1042, REV. 1 APRIL 1946, WHICH IS OBSOLETE.

31490-Army-AG Admin Cen-FEC-9/52-90M

ATALI H. HUSEYIN 19036

SECTION 3. - UNIDENTIFIED REMAINS

INSTRUCTIONS: Great care will be taken to record the most minute clues for the future identification of remains. Fill in anatomical characteristics below, and any other clues under "other" such as shoe size, Social Security number; position of body in airplanes, vehicles, and tanks; and serial number of airplanes, vehicles and tanks.

HEIGHT	WEIGHT	COLOR OF EYES	COLOR OF HAIR	WHERE BODY WAS FOUND *(Grid Coordinates)*
EST. 5' 7"	EST. 145	UNDET	BROWN	CT 072069, KOREA

BIRTHMARKS, SCARS, OR TATTOOS

NONE NOTED

LAUNDRY MARKS

NONE

WEAPON(S) WITH SERIAL NUMBER(S)

OTHER IDENTIFICATION CLUES *(Including other remains recovered or associated with this remains).*

NO CLOTHING FOUND ON OR W/REMAINS.

SECTION 4. - FINGERPRINTING - FINGERPRINTS OF ALL REMAINS MUST BE TAKEN

IMPRINT ALL FINGERS AND THUMBS *(or as many as possible)* IN THE PROPER SEQUENCE. Fingers should be clean, dry and not over-inked. Missing fingers should be noted in the proper individual finger blocks. Impressions MUST be recorded in the proper order.

RIGHT HAND

1 RIGHT THUMB	2 RIGHT INDEX FINGER	3 RIGHT MIDDLE FINGER	4 RIGHT RING FINGER	5 RIGHT LITTLE FINGER
NO	FINGERPRINTS		TAKEN	

LEFT HAND

6 LEFT THUMB	7 LEFT INDEX FINGER	8 LEFT MIDDLE FINGER	9 LEFT RING FINGER	10 LEFT LITTLE FINGER
NO	FINGERPRINTS		TAKEN	

DO NOT WRITE IN THIS SPACE *(For FBI use only)*

REMARKS

1/REMAINS RECEIVED FROM YONGDUNGPO COLL. PT., KOREA, EVAC. NO. A879[illegible] 293RD QMS REG CO. TAGGED AT TURKISH HOSP.

2/NAME, [redacted] SER.NO., ORG, CAUSE, DATE AND P.O.D. TAKEN FROM EMT.

ALLIED

RESTRICTED

15990-K

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN				2. DATE OF REPORT	
ATALI H. HUSEYIN 19036 (rank-unk)				18 May 53	
3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT	7. DATE OF REINTERMENT
UNMC Tanggok, Korea	26	11	2103	N/A	N/A

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR OF HAIR	11. RACE
145	5'7"	Brown	Caucasian

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

One (1) ~~EMT~~ found with Remains reads, "ATALI H. HUSEYIN 19036".

13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES

None Noted

14. WAS BODY BURNED ?	TO WHAT EXTENT ?
☐ YES ☒ NO	
15. WAS BODY MANGLED ?	**TO WHAT EXTENT ?**
☐ YES ☒ NO	

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

None Noted

17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry merks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

No Personal Effects or Clothing found on or with Remains.

RESTRICTED

15990-4

IDENTIFICATION DENTAL CHART

DATE: 18 May 53

NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER
ATALI H. HUSEYIN	Unknown	19036

UNIT	ORGANIZATION	CAUSE OF DEATH	DATE OF DEATH
Unknown	T.A.F.C.	See DD Form 551	14 May 53

PLACE OF DEATH	PLACE OF BURIAL	PLOT	ROW	GRAVE
CT 072069, Korea	UMC Tanggok, Korea	26	11	2103

RIGHT

1	2	3	4	5	6	7	8	9	10	11	12	13	~~14~~	15	16
											Px				

LEFT

1. O–AM.
2. DOL–AM.; F–AM.
3. MOD. GOLD FILL.
4. F–GOLD FILL.; ML–AM.
5. MO–AM.
6. ML–GOLD FILL.
7. 3/4 GOLD CR.
8. D–PORC. FILL.
9. PORC. CR.
10. F–PORC. FILL.; L–AM.
11. MF–PORC. FILL.
12. Px–POSTHUMOUSLY MISSING
13. GOLD CR.
14. MISSING
15. MO–AM.; L–AM.
16. MODL–AM.

MARKING ABBREVIATIONS:
F - Facial *O - Occlusal* *D - Distal* *Am - Amalgam* *FILL - Filling* *BACK - Backing*
L - Lingual *M - Mesial* *I - Incisal* *CR - Crown* *PORC - Porcelain* *FAC - Facing*

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
CARIES		O														
RESTORATIONS																

UPPER RIGHT — UPPER LEFT

	~~32~~	31	30	29	28	27	26	25	24	23	22	21	20	19	18	~~17~~
RESTORATIONS																
CARIES		O												FODL		

LOWER RIGHT — LOWER LEFT

SIGNATURE OF OFFICER OR OTHER PERSON WHO PREPARED DENTAL CHART: EUGENE J. MAZURKIEWICZ PVT QMC

VERIFIED BY GRS OFFICER: THADDEUS M. PATTERSON 1st Lt. QMC

DD FORM 1 SEP 51 569

REPLACES QMC FORM 1045, 1 APR 1947, WHICH IS OBSOLETE.

SEE REVERSE SIDE

19036

DENTURES *(Plates)*: DESCRIBE DENTURES INCLUDING NATURAL TEETH REPLACED AND TEETH WHICH HAVE RETAINING CLASPS. *(For example: Lower acrylic partial denture with lingual bar, replacing teeth Nos. 17, 18, 19, 30, 31, 32. Clasps on natural teeth Nos. 20 and 29.)* SHOW ANY NUMBERS OR LETTERS APPEARING ON DENTURE.

THE FOLLOWING CONDITIONS WILL BE CHECKED IN THE SPACE BELOW: *(Describe in detail under remarks)*

	MOTTLED ENAMEL		UNERUPTED TEETH		RETAINED DECIDUOUS TEETH
	ENAMEL HYPOPLASIA		MALOCCLUSION		ABNORMAL INTERDENTAL SPACES
	EROSION		SUPERNUMERARY TEETH		IRREGULARITY OF ALIGNMENT
	ABRASION		FRACTURES OF ENAMEL		UNUSUAL RESTORATIONS
	ROTATION		FRACTURES OF TEETH		UNUSUAL APPLIANCES

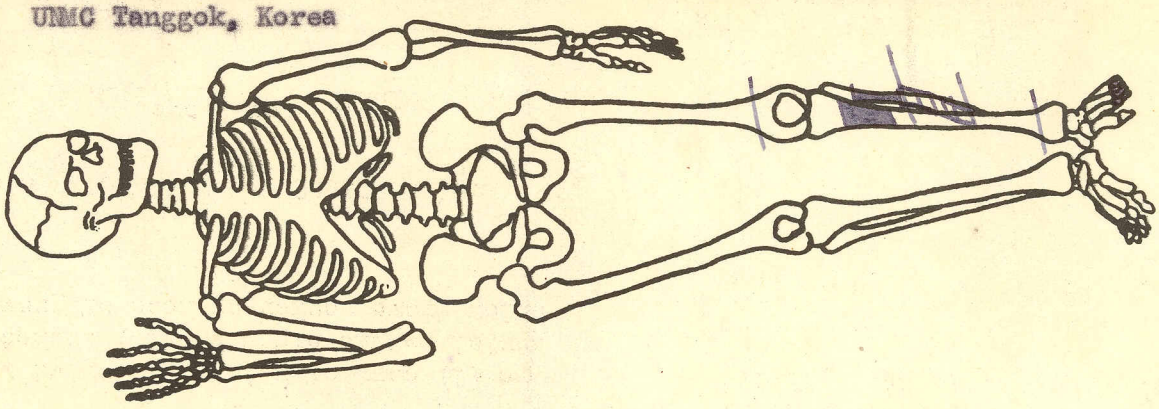
REMARKS *(If no abnormalities are found make notation to that effect)*

☆ U. S. GOVERNMENT PRINTING OFFICE: 1951 O—965556

ALLIED RESTRICTED 15790-4

19. BLACK OUT PARTS OF BODY NOT RECOVERED

ATALI H. HUSEYIN Unk. 19036 Plot:26 Row:11 Grave:2103
UNMC Tanggok, Korea



20. MASS BURIAL CERTIFICATE (IF APPLICABLE)
(Wherein segregation in whole or parts is impossible)

I Certify that the Group Remains Consist of Parts of _____ Decedents Based on the Presence of One or More of the Following Anatomical Parts:
NUMBER

_____
SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

I Certify that I Have Personally Viewed the Remains of Deceased and that All Resulting Information Has Been Recorded to the Best of My Knowledge

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION	SIGNATURE
EUGENE J. MAZURKIEWICZ PVT QMC 114th Qm Grs. Reg. Co.	Eugene J. Mazurkiewicz PVT.

QMC FORM 18 MAR 47 1044b

ATALI H. HUSEYIN 19036

4060—FEC P&PC—7/50—30M

RESTRICTED

ALLIED

15990-4

SKELETAL CHART

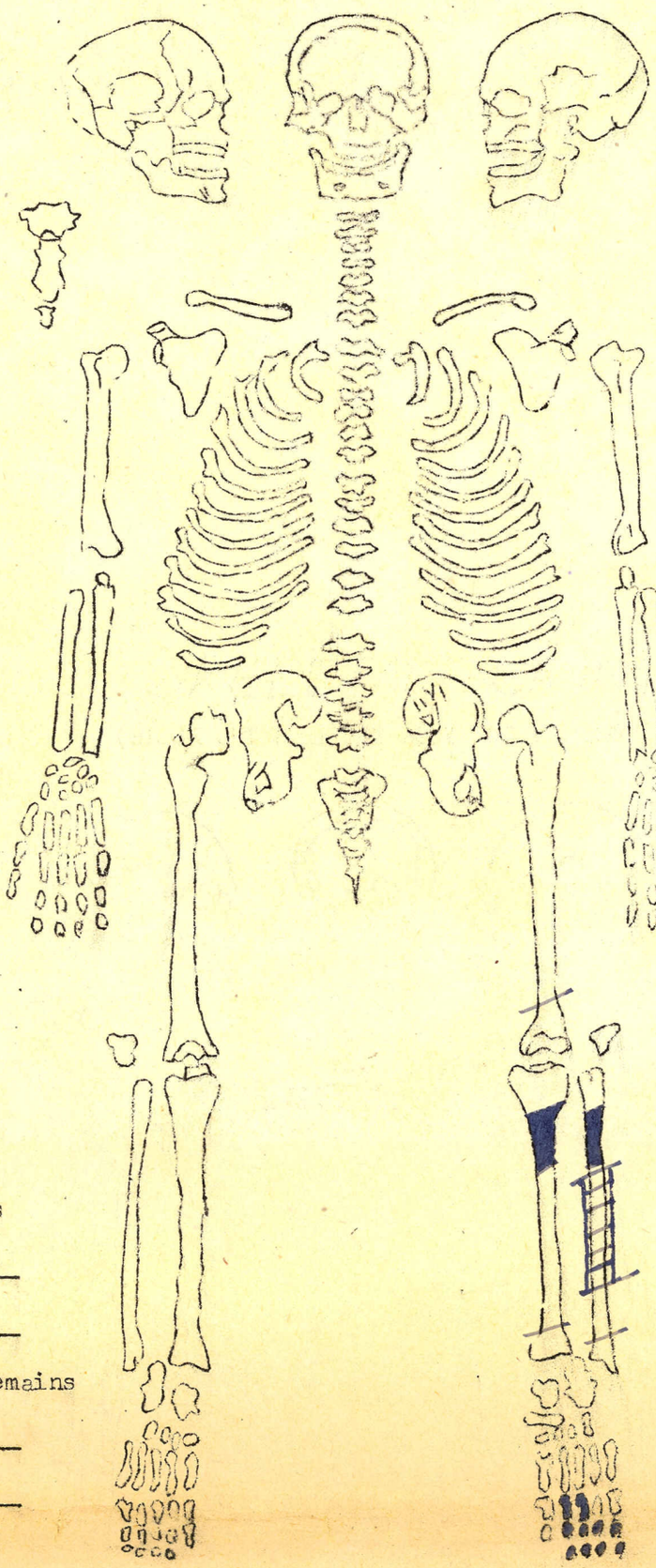
S&R#

(BLACK OUT PARTS OF BODY NOT RECEIVED)

RIGHT

LEFT

SKULL_____Ins



HUMERUS_____cm

HUMERUS_____cm

ULNA_____cm

ULNA_____cm

RADIUS_____cm

RADIUS_____cm

FEMUR_____cm

FEMUR_____cm

TIBIA_____cm

TIBIA_____cm

FIBULA_____cm

FIBULA_____cm

Est Age_____Yrs

Est Height_____

_____

Condition of Remains

_____

_____

-Missing

-Burned

-Fractured

-Shattered

AIALI H. HUSEYIN 1703 G