REPORT OF INTERMENT

DATE OF REPORT: 22 Jan 62

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

Imprint Identification Tag If Possible. DO NOT TYPE

Turkey I.D. tag unable to print

SECTION 1. - IDENTIFICATION.

NAME (Last, First, Middle Initial)		SERVICE NUMBER
GUVEN, FAHRETTIN		12081
GRADE	**ORGANIZATION**	**BRANCH OF SERVICE**
1st Lt	TAFCOM	Army
RACE	**RELIGION**	**COUNTRY (If not U.S.)**
T/Caucasian	Islam	Turkey

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
TURKEY Aska Hospital	Unk	19 Nov. 51

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

WERE SUBSTITUTE TAGS PROVIDED? One (1) [X] YES [ ] NO

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

Cert. of disinterment signed by William D. Legg, Mortuary Officer, U.S. Army Mortuary in Japan.

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.

Sealed casket (unable to opened)

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

United Nations Memorial Cemetery in 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.
22 Jan 62	1330	Casket	Star & Crescent	77	1	8211

WAS THIS A REBURIAL? [X] YES [ ] NO

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

Tokyo-to, Tama Cemetery in Japan

PLOT NO.	ROW NO.	GRAVE NO.
- - -	- - -	- -

TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINER BURIED WITH BODY
Grave side	A. Usluoglu Imam, Pfc	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: [X] YES [ ] NO

IDENTIFICATION TAG ATTACHED TO MARKER: [ ] YES [X] NO

REMAINS BURIED IN GRAVE TO LEFT (When viewed from foot of grave), NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER	ORGANIZATION	GRAVE NO.
OZKAY, SELAHATTIN	Major	12011	TAF	8210
REMAINS BURIED IN GRAVE TO RIGHT (When viewed from foot of grave), NAME (Last, First, Middle Initial)	**GRADE**	**SERVICE NUMBER**	**ORGANIZATION**	**GRAVE NO.**
BAYER, HALIL	PVT	2024	TAFCOM	8212

SIGNATURE OF PERSON PREPARING REPORT	SIGNATURE OF GRS OFFICER VERIFYING REPORT
CHUNG, TAE HONG, GR3 Specialist, UNMCK	RONALD BINGE, Supervisor, UNMCK

DD FORM 1 JUL 51 551 REPLACES QMC FORM 1042, REV. 1 APRIL 1946, WHICH IS OBSOLETE.

46-1042-Army-AG Admin Cen-AFFE-25M

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)*
N/A	N/A	N/A	N/A	Oslo Hospital

BIRTHMARKS, SCARS, OR TATTOOS

N/A

LAUNDRY MARKS

N/A

WEAPON(S) WITH SERIAL NUMBER(S)

N/A

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

N/A

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
		N/A		

LEFT HAND

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

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

REMARKS

Remains buried at a 45 degree angle, with the head pointing North so that remains lay in a North-South direction.

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN				2. DATE OF REPORT	
GUVEN, FAHRETTIN 1st Lt 12081				22 Jan 62	
3. NAME OF CEMETERY	**4. PLOT**	**5. ROW**	**6. GRAVE**	**7. DATE OF**	
				DISINTERMENT	REINTERMENT
United Nations Memorial Cemetery in Korea TURKEY	77	1	8211		22 Jan 62

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR OF HAIR	11. RACE
N/A	N/A	N/A	T/Caucasian

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

Four (4) cert. of disinterment received with remains:

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

N/A

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

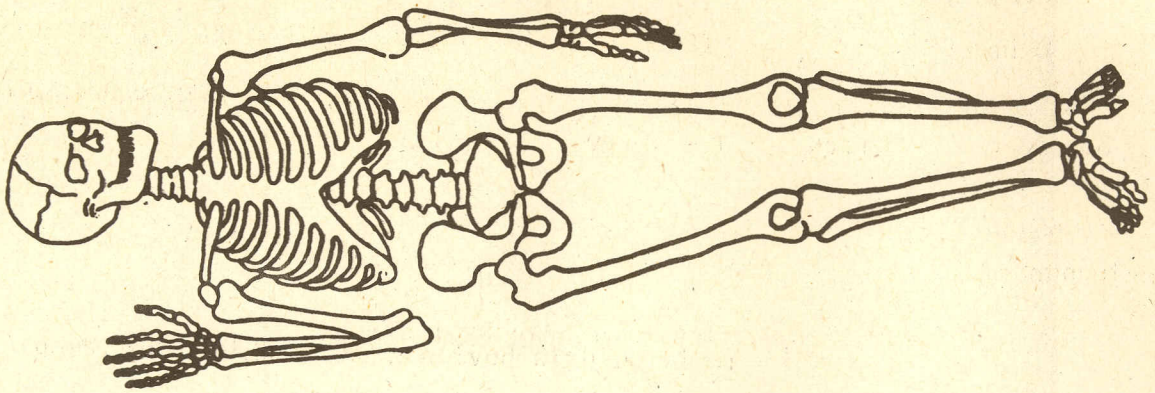
N/A

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 clothing or PE's found on or with remains

19. BLACK OUT PARTS OF BODY N RECOVERED

TURKEY



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

Sealed casket (unable to opened)

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
CHUNG, TAE HONG, GRS Specialist, UNMCK	Taehong Chung

QMC FORM 18 MAR 47 1044b

5762—FEC P&PC—9, 50—250M

NR: KIA. 571

Service Nr.		12 081
Units	Present Unit	TAFCOM.
	Prior Unit	
Enlistment Office in Which the registration WAS Made		SAMSUN
City		
Town Or Village		
First and last name		FAHRETTIN GUVEN
Father's name		VEHBI
Birth Place And Date		
Registration Nr.		
Enlistment date		946 - 128
Home address		
Marital Status		
Names of children	Male	
	Female	
Education Level(Grader Completed)		
Profession		OFFICER 1st. Lt.

Photo

In accordance with remarks on Army Lists
Direktorate of Korea office

I hereby certify that the contents
of this document are exact and true
translation of the Turkish orginal.

Mehmet H. Ataceri
Col. G.S.
Turkish Liaison Officer UNC
APO 301

TURKEY

Died on 19 Nov 1951 in Aska Hospital

TURKEY

UNITED STATES ARMY MORTUARY
APO 503

C E R T I F I C A T E

I certify that the personnel listed on the attached roster were disinterred from Tama Cemetery, Fuchu City, Japan on 10 January 1962; and were processed, casketed, hermetically sealed and released to Tachikawa AFB for shipment to the Superintendent, United Nations Cemetery, Pusan, Korea.

1 Incl
Roster

/s/ William D. Legg
/t/ WILLIAM D. LEGG
Mortuary Officer

TURKEY

HEADQUARTERS
UNITED NATIONS COMMAND
Liaison Group for Turkey
APO 94

NAME LIST

Maj.	Celahattin OZKAY	12011
Lt.	Fahrettin GUVEN	12081
Mnl.	Arif SEVKN	10550
"	Sukru KIRICI	9560
"	M.Ali ERBN	18162
"	Kasim TEZCAN	1597
"	Halil KUCUK	1296
"	Huseyin INAL	1025
"	Halil BAYEN	2024
"	Cetin ERGIN	4948
"	Yusuf ALCIN	6768
"	Mehmet GUNDUZ	3655
"	Temel YILMAZ	30183

改葬許可証

第 七二八 号

死亡者の本籍	サムソニ トルコ
死亡者の住所	右に 同
死亡者の氏名	フアレチン ギユベン
死亡者の性別	(男) 女
死亡年月日時	昭和三六年 十 月十九日 午前 午後 時 分
埋葬又は火葬の場所	東京都営多磨墓地
埋葬又は火葬の年月日	昭和三六年 十一 月 三 日
改葬の理由	韓国国連軍墓地に改葬のため
改葬の場所	韓国釜山国連軍墓地
申請者の住所氏名及死亡者との続柄	港区元赤坂三ノ三四五 トルコ大使館 メンバー イニジエ オグル 大佐 続柄

昭和 36 年 11 月 27 日

東京都府中市長 小林茂一 郎

FAHRETTIN GUVEN

表記のとおり異常なく改葬したことを確認する。

昭和三十七年一月十日

東京都府中保健所
環境衛生監視員
環境衛生係長
技師　鈴木清巖

REPORT OF INTERMENT

DATE OF REPORT

TYPE OF REPORT
☑ INITIAL ☐ SUPPLEMENTAL (Reason)

Imprint Identification Tag If Possible. DO NOT TYPE

Turkey
I. D. Tag
Unable to
Print

SECTION 1. - IDENTIFICATION.

NAME (Last, First, Middle Initial)	SERVICE NUMBER
GUVEN, FAHRETTIN ~~Seven, Mrtt~~	12081

GRADE	ORGANIZATION	BRANCH OF SERVICE
1st Lt	TAFCOM ~~TAFCOM~~	Army

RACE	RELIGION	COUNTRY (If not U.S.)
T/Caucasian	Islam	Turkey

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
~~Osaka~~ Osaka Hospital		19 Nov. 51 ~~51~~

IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none)
~~None~~ N/A

WERE SUBSTITUTE TAGS PROVIDED?
☑ YES ☐ NO

IF NO TAGS FOUND ON BODY, DESCRIBE ALL MEANS OF IDENTIFICATION (If unidentified fill in section 3 on reverse) Cert. of disinterment Signed by William A. Legg, Mortuary Officer, US Army Mortuary in Japan

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.

Sealed Casket (Unable to opened)

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

United Nations Memorial Cemetery in Korea EP-089868

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER ~~Star~~ & Crescent	PLOT NO.	ROW NO.	GRAVE NO.
20 Jan 52		Casket		77	1	8211

WAS THIS A REBURIAL? ☐ YES ☐ NO

IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE: Takyo-to ~~Otama~~ Tama Cemetery in Japan

PLOT NO.	ROW NO.	GRAVE NO.

TYPE OF RELIGIOUS CEREMONY: Graveside

PERSON CONDUCTING BURIAL RITES:

IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINER BURIED WITH BODY: one (1) Copy of this form buried in ~~box~~ burial casket eighteen (18) inches below grave marker at head of grave

IDENTIFICATION TAG BURIED WITH BODY ☐ YES ☐ NO

IDENTIFICATION TAG ATTACHED TO MARKER ☐ 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.
~~ERGIN, Ali~~ OZKAY, SELAHATTIN	Major	12011 ~~12062~~	TAF~~C~~OM	8210

REMAINS BURIED IN GRAVE TO RIGHT (When viewed from foot of grave), NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER	ORGANIZATION	GRAVE NO.
BAYER, HALIC		2024	TAFCOM	8212

SIGNATURE OF PERSON PREPARING REPORT

SIGNATURE OF GRS OFFICER VERIFYING REPORT

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

46-1042-Army-AG Admin Cen-AFFE-25M

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)*
N/A	N/A	N/A	N/A	Aka Hospital

BIRTHMARKS, SCARS, OR TATTOOS

N/A

LAUNDRY MARKS

N/A

WEAPON(S) WITH SERIAL NUMBER(S)

N/A

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

N/A

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
		N/A		

LEFT HAND

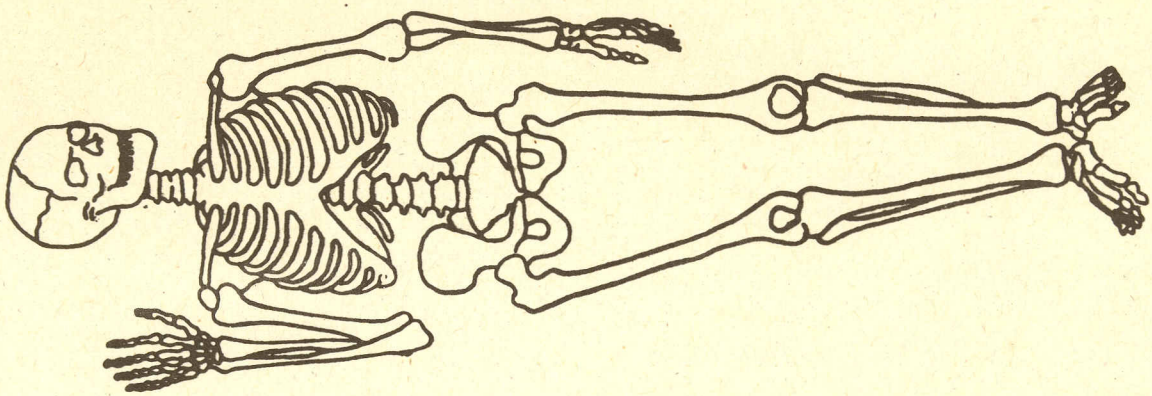
6 LEFT THUMB	7 LEFT INDEX FINGER	8 LEFT MIDDLE FINGER	9 LEFT RING FINGER	10 LEFT LITTLE FINGER
		N/A		

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

REMARKS

Remains buried at a 45 degree angle. with the head pointing North so that remains lay in a North-South direction

19. BLACK OUT PARTS OF BODY N[illegible] RECOVERED



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

Sealed Casket (Unable to opened)

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
	[signature]

OMC FORM 18 MAR 47 1044b

5762—FEC P&PC—9, 50—250M

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN	2. DATE OF REPORT
~~SEVEN ARF~~ GUVEN, FAHRETTIN 12081 1stLt	22 Jan 62

3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT	7. DATE OF REINTERMENT
United Nations Memorial Cemetery in Korea	77	1	8211		22 Jan

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR OF HAIR	11. RACE
N/A	N/A	N/A	T/Caucasian

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

~~N/A~~
four(4) Cert. of disinterment received with remains:

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

N/A

2759

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

N/A

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

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