16553-4

ALLIED

REPORT OF INTERMENT

DATE OF REPORT: 9 April 54

TYPE OF REPORT: ☐ INITIAL ☒ SUPPLEMENTAL (Reason) (ADDITIONAL INFORMATION)

TURKEY

Imprint Identification Tag If Possible. DO NOT TYPE

TURKEY
Two ID tag found on Remains unable to imprint

SECTION 1. - IDENTIFICATION.

NAME (Last, First, Middle Initial)	SERVICE NUMBER
DEMIR HUSEYIN	18034

GRADE	ORGANIZATION	BRANCH OF SERVICE
Pvt	3rd TAFC Brigade	Army

RACE	RELIGION	COUNTRY (If not U.S.)
Undetermined	Undetermined	Turkey

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
Madam-ni Ct 076 076	Undetermined	Est May 53

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

WERE SUBSTITUTE TAGS PROVIDED? Three ☒ YES 3 ☐ NO GRS

IF NO TAGS FOUND ON BODY, DESCRIBE ALL MEANS OF IDENTIFICATION (If unidentified fill in section 3 on reverse): Attached allied case report # 407

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.

Previously reported

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

UNMC TANGOOK, 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.
9 April 54	1000	Canvas Square	Star & Crescent	45	3	3990

WAS THIS A REBURIAL? ☐ YES ☒ NO

IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE: Remains formerly stored in Mausoleum AGRSG 8204th AU APO 3

PLOT NO.	ROW NO.	GRAVE NO.

TYPE OF RELIGIOUS CEREMONY: General

PERSON CONDUCTING BURIAL RITES: GERALD C. DEAN Major 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 inches below grave marker at head of grave.

IDENTIFICATION TAG BURIED WITH BODY: Two ☒ YES 2 ☐ NO

IDENTIFICATION TAG ATTACHED TO MARKER: One ☒ 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.
GOKTAS MEHMET	Pvt	18422	3rd TAFC Brigade	3989

REMAINS BURIED IN GRAVE TO RIGHT (When viewed from foot of grave), NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER	ORGANIZATION	GRAVE NO.
KIZILTAS MEHMET	Pvt	18827	3rd TAFC Brigade	3991

SIGNATURE OF PERSON PREPARING REPORT: Chester J. Waszkelewicz
CHESTER J. WASZKELEWICZ CPL QMC

SIGNATURE OF GRS OFFICER VERIFYING REPORT: Robert S. Robbins
ROBERT S. ROBBINS CAPTAIN QMC

DEMIR, HUSEYIN
18034

DD FORM 1 JUL 51 551 REPLACES QMC FORM 1042, REV. 1 APRIL 1946, WHICH IS OBSOLETE.

37230-Army-AG Admin Cen-FEC-2/53-61M

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)*
Utd	Utd	Utd	Utd	Ct 076 076 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

1. Remains received from zone Hqs 8204th AU APO #3
2. Name, rank, sn, org POD & DOD taken from allied case report # 407

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
	NOT FINGERPRINTED			

LEFT HAND

6 LEFT THUMB	7 LEFT INDEX FINGER	8 LEFT MIDDLE FINGER	9 LEFT RING FINGER	10 LEFT LITTLE FINGER
	NOT FINGERPRINTED			

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

REMARKS

See above

16553-4

ALLIED

REPORT OF INTERMENT

DATE OF REPORT

TYPE OF REPORT ☐ INITIAL ☑ SUPPLEMENTAL (Reason) (ADDITIONAL INFORMATION)

Imprint Identification Tag If Possible. DO NOT TYPE

TURKEY
I.D. TAGS
UNABLE TO
IMPRINT
TURKEY

SECTION 1. - IDENTIFICATION.

NAME (Last, First, Middle Initial)	SERVICE NUMBER
DEMIR, HUSEYIN	18034

GRADE	ORGANIZATION	BRANCH OF SERVICE
PVT	3RD TAFC BRIGADE	ARMY

RACE	RELIGION	COUNTRY (If not U.S.)
UNDETERMINED		TURKEY

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
MADAM-NI. CT-076-076, KOREA	UNDETERMINED	EST MAY 1953

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

WERE SUBSTITUTE TAGS PROVIDED? ☑ YES ☐ NO

THREE (3) GRS

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

ATTACHED ALLIED CASE REPORT # 407

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.

PREVIOUSLY REPORTED

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

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.
9 APRIL 54	1000	CANVAS SQUARE	STAR + CRESCENT	45	3	3990

WAS THIS A REBURIAL? ☐ YES ☑ NO

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

REMAINS FORMERLY STORE IN MAUSOLEUM

AGRSG 8204 AU APO 3

PLOT NO.	ROW NO.	GRAVE NO.

TYPE OF RELIGIOUS CEREMONY: GENERAL MEMORIAL

PERSON CONDUCTING BURIAL RITES: GERALD C DEAN MAJOR CHC

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

IDENTIFICATION TAG BURIED WITH BODY: TWO (2) ☑ YES ☐ NO

IDENTIFICATION TAG ATTACHED TO MARKER: 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.
GOKTAS, MEHMET	PVT	18422	3RD TAFC BRIGADE	3989

REMAINS BURIED IN GRAVE TO RIGHT (When viewed from foot of grave), NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER	ORGANIZATION	GRAVE NO.
KIZILTAS, MEHMET	PVT	18827	3RD TAFC BRIGADE	3991

SIGNATURE OF PERSON PREPARING REPORT: Chester J. Waszkelewicz

SIGNATURE OF GRS OFFICER VERIFYING REPORT

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

DEMIR, HUSEYIN
18034

37230-Army-AG Admin Cen-FEC-2/53-61M

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)*
UTD	UTD	UTD	UTD	CT-076-076, 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 FINGER PRINTS TAKEN.			

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

1) REMAINS REC. FROM ZONE HQS 8204

2) NAME, RANK, SN, ORG POD AND DOD TAKEN FROM ALLIED CASE REPORT #407

REMARKS

AD APO 3

16553-4

ALLIED

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN				2. DATE OF REPORT	
DEMIR HUSEYIN PVT 18034				9 April 54	
3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT	7. DATE OF REINTERMENT
UNMC TANGGOK, KOREA	45	3	3990	N/A	N/A

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR OF HAIR	11. RACE
Utd	Utd	Utd	Utd

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

1. One (1) allied case report # 407 rec w/remains reads "DEMIR HUSEYIN 18034 Pvt"

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 marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

Previously reported

No clothing found on or with remains.

16553-4

ALLIED IDENTIFICATION DENTAL CHART

DATE: 9 April 54

NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER
DEMIR HUSEYIN	Pvt	18034

UNIT	ORGANIZATION	CAUSE OF DEATH	DATE OF DEATH
	3rd TAFC Brigade	See DD form 551	Est May 53

PLACE OF DEATH	PLACE OF BURIAL	PLOT	ROW	GRAVE
Modam-ni 076 076	UNMC TANGOK, KORE	45	3	3990

RIGHT — LEFT

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



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.

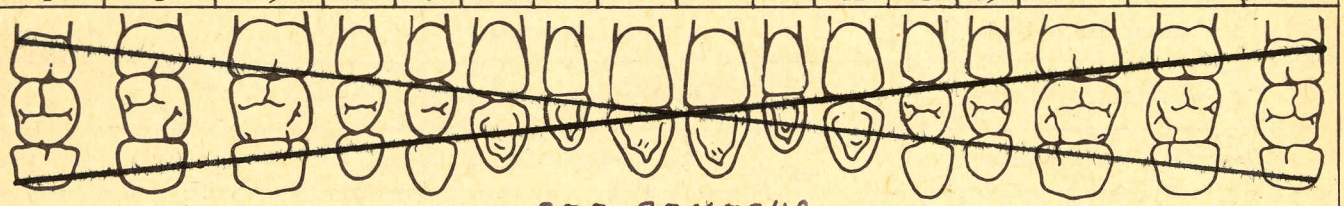
MARKING ABBREVIATIONS:
F - Facial *O - Occlusal* *D - Distal* *Am - Amalgam* *FILL - Filling* *BACK - Backing*
L - Lingual *M - Mesial* *I - Incisal* *CR - Crown* *PORC - Porcelain* *FAC - Facing*

CARIES

RESTORATIONS

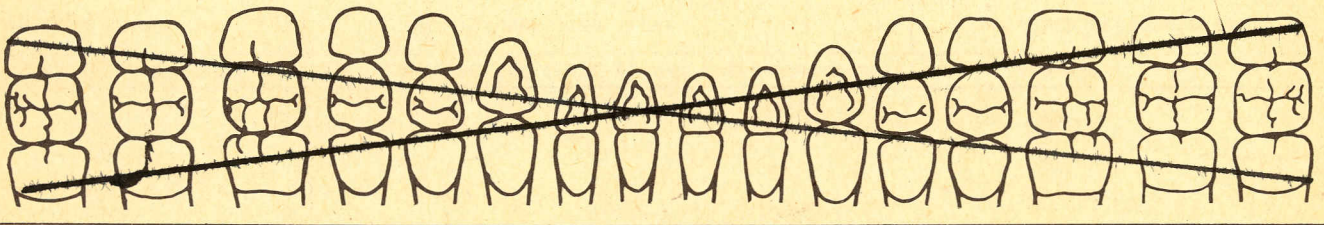
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

UPPER RIGHT — UPPER LEFT



SEE REMARKS

LOWER RIGHT — LOWER LEFT



32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17

RESTORATIONS

CARIES

SIGNATURE OF OFFICER OR OTHER PERSON WHO PREPARED DENTAL CHART: Chester J. Waszkelewicz
CHESTER J. WASZKELEWICZ 0Dl 0-0

VERIFIED BY GRS OFFICER: [signature]
ROBERT S. ROBBINS CAPTAIN DC

DD FORM 1 SEP 51 569

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

DEMIR, HUSEYIN 18034

SEE REVERSE SIDE

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)*

1. No teeth found

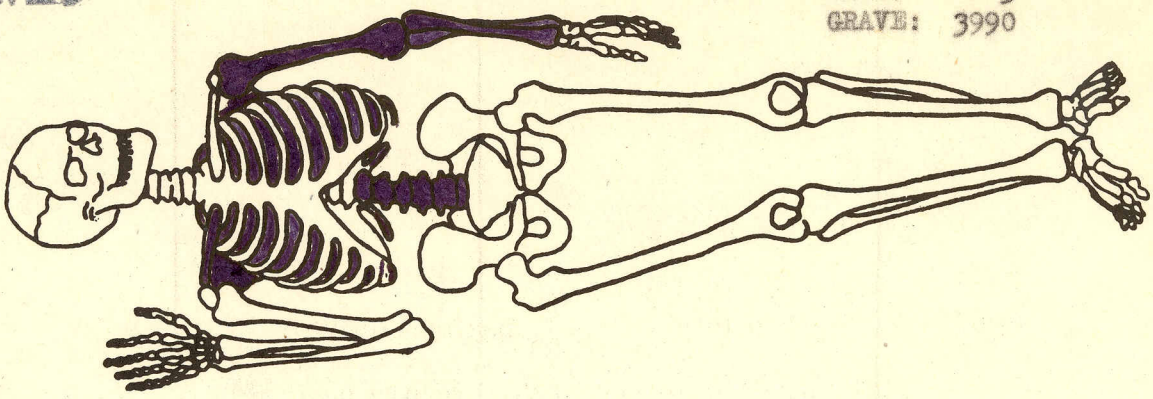
☆ U. S. GOVERNMENT PRINTING OFFICE: 1951 O—965556

16553-4

19. BLACK OUT PARTS OF BODY [redacted] OVERED

ALLIED

DEMIR HUSEYIN 18034 F
UNMC TANGGOK, KOREA PLOT 45
ROW: 3
GRAVE: 3990



20. MASS BURIAL CERTIFICATE (IF APPLICABLE)

(Wherein segregation in whole or parts is impossible)

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

_____
SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

Remains in a skeletal state

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
RONALD S. CRAIL CPL QMC 114 TH QUARTERMASTER CO (GRREG)	Ronald S Crail Cpl.

QMC FORM 18 MAR 47 1044b

DEMIR, HUSEYIN
18034

5762—FEC P&PC—9 50—250M

16553-4

ALLIED

Name or Unknown No.

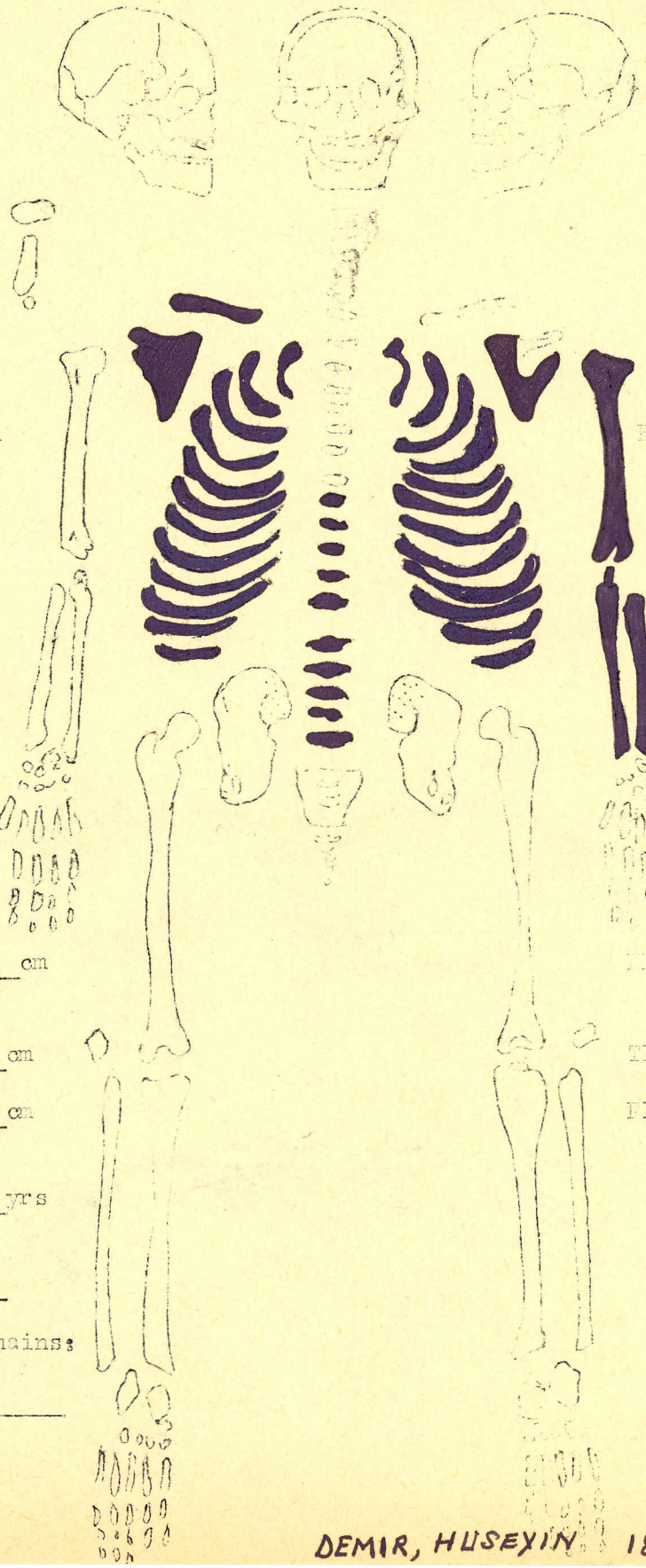
SKELETAL CHART
ACTS

(Block out parts of body ■ received)

RIGHT

LEFT

SKULL ___ Ins.



HUMERUS _____ cm

HUMERUS _____ cm

ULNA _____ cm

RADIUS _____ cm

ULNA _____ cm

RADIUS _____ cm

FEMUR _____ cm

FEMUR _____ cm

TIBIA _____ cm

FIBULA _____ cm

TIBIA _____ cm

FIBULA _____ cm

Est Age _____ yrs

Est Height _____

Condition of Remains:

_____

DEMIR, HUSEYIN 18034