ALLIED

16813-S

REPORT OF INTERMENT

DATE OF REPORT: 10 July 54

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

Imprint Identification Tag If Possible. DO NOT TYPE

TURKEY
ID tag unable
to imprint
TURKEY

SECTION 1. - IDENTIFICATION.

NAME (Last, First, Middle Initial)	SERVICE NUMBER
OSMAN, SEKER	31005

GRADE	ORGANIZATION	BRANCH OF SERVICE
Pvt	C Batry, Turk F A	ARMY

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

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
CT 337 244 Korea	EMT states;Multiple fracture lt rib traumatic pneumothorax	7 July 54

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

WERE SUBSTITUTE TAGS PROVIDED? Three [X] YES [ ] NO GRS

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

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 PE 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

UNMC 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.
10 July 54	1100	Canvas Square	star & Crescent	45	4	4005

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: SEN HASAN Turkish Ch

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: Three [X] YES [ ] NO

IDENTIFICATION TAG ATTACHED TO MARKER: One [X] 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.
TURKER, YASAR	Pvt	2307	1st Turk arm E & Forces	4004

REMAINS BURIED IN GRAVE TO RIGHT (When viewed from foot of grave), NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER	ORGANIZATION	GRAVE NO.
OPEN GRAVE				4005

SIGNATURE OF PERSON PREPARING REPORT: Ted Crowell
T. CROWELL PFC QMC

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

DD FORM 1 JUL 51 551 REPLACES QMC FORM 1042, REV. 1 APRIL 1946, WHICH IS OBSOLETE. OSMAN, SEKER 31005

19296—FEC P&PC—10/51—100M

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 5'10"	Est 165	Utd	Brown	CT 337 244, Korea

BIRTHMARKS, SCARS, OR TATTOOS

None noted

LAUNDRY MARKS

None noted

WEAPON(S) WITH SERIAL NUMBER(S)

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

The following GI type clothing found on remains;

One (1) pr shorts, cotton, white, size med.

REMARKS

1. One (1) ID tag found on neck of remains bearing sn 31005.
2. Remains rec from 293rd Yong Dung Po coll pt, Korea Evac #" 11250/293rd Grs Reg Co. EMT tagged at CT 337 244 7th Med Bn Korea
3. Rank, org, cause, date and place of death taken from EMT signed by Capt Herbert Dozorety, 04021628 MC

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 WS 16813-5

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
IMPRINT
TURKEY

SECTION 1. - IDENTIFICATION.

NAME (Last, First, Middle Initial)	SERVICE NUMBER
OSMAN, SeKeR	31005

GRADE	ORGANIZATION	BRANCH OF SERVICE
PVT.	C BATRY, TURK F.A	ARMY

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

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
CT 337-244 KOREA	EMT STATES: Multiple Fracture Lt. Rib TRAUMATIC PNEUMOTHORAX	7 July 54

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

IF NO TAGS FOUND ON BODY, DESCRIBE ALL MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) ONE (1) EMT Signed by: Herbert Dozoretty, Capt., Med Corp.

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

UNMC Tanggok Korea 6089865

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.
10 JULY 54	1100	CANVAS SQUARE	STAR AND CRES.	45	4	4005

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	SEN HASAN TURKISH CH.

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
THREE ☑ YES ☐ NO (3)	ONE ☑ YES ☐ NO (1)

REMAINS BURIED IN GRAVE TO LEFT (When viewed from foot of grave), NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER	ORGANIZATION	GRAVE NO.
TURKER, YASAR	PVT	2307	1ST TURK ARMED FORCES	4004
REMAINS BURIED IN GRAVE TO RIGHT (When viewed from foot of grave), NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER	ORGANIZATION	GRAVE NO.
OPEN GRAVE	—	—	—	4006

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.

OSMAN, SERER 31005

19296—FEC P&PC—10/51—100M

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. 5'11"	Est. 165	UNDET	BROWN	CT 337-274 KOREA

BIRTHMARKS, SCARS, OR TATTOOS

None Noted

LAUNDRY MARKS

None Noted

WEAPON(S) WITH SERIAL NUMBER(S)

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

THE FOLLOWING G.I. TYPE CLOTHING FOUND ON Remains

1. ONE (1) PR. SHORTS, cotton, white, size Med.

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 Finger Prints 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. ONE (1) I.D TAG Found ON Neck of Remains, bearing Serial number 31005.
2. Remains Rec. FROM 293RD. YONG DUNG PO Coll. Pt., KOREA Evac. #A11250 293RD. GRS./Reg. Co. EMT TAGGED AT CT 337-244, 7TH. Med. BN, Korea.
3. RANK, ORG.; Cause, DATE AND POD WAS taken FROM EMT. Signed by Capt. Herbert. DOZORETY, 040216 28, M

REMARKS

ALLIED

16813-S

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN				2. DATE OF REPORT	
OSMAN, SEKER PVT 31005				10 July 54	
3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT	7. DATE OF REINTERMENT
UNMC TANGGOK, KOREA	45	4	4005	N/A	N/A

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR OF HAIR	11. RACE
165	5'10"	Brown	Caucasian

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

One (1) ID tag found on neck reads; 31005
One (1) EMT rec w/remains reads; "OSMAN, SEKER, PVT 31005"

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

No PE found on or with remains
The following type G[1] clothing found on remains;
One (1) pr shorts, cotton, white, size med.

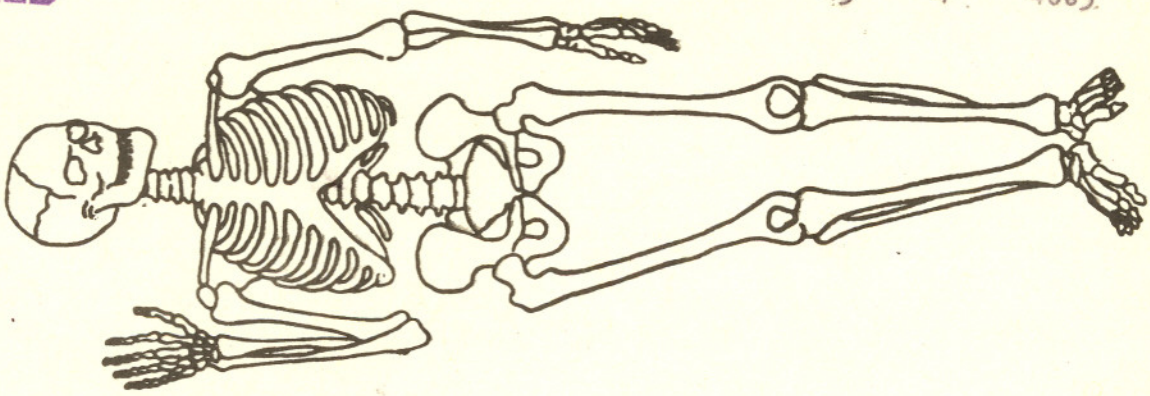
17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

16 813-5

19. BLACK OUT PARTS OF BOD[illegible]OT RECOVERED

ALLIED

OSMAN, SEKER PVT 31005
UNMC TANGGOK, KOREA Plot 45 Row 4 Grave 4005



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

Remains complete

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
TED E. CROWELL 114th Qm Co (GRREG)	Pfc. Ted E. Crowell

OMC FORM 18 MAR 47 1044b

OSMAN, Seker 31005

5762—FEC P&PC—9 50—250M

16813-5

ALLIED

IDENTIFICATION DENTAL CHART

DATE: 10 July 54

NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER
OSMAN, SEKER	PVT	31005

UNIT	ORGANIZATION	CAUSE OF DEATH	DATE OF DEATH
	C Batt Turk F A	See DD form 551	7 July 54

PLACE OF DEATH	PLACE OF BURIAL	PLOT	ROW	GRAVE
CT 337 244, Korea	UNMC TANGGOK, KOREA	45	4	4005

RIGHT — LEFT

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

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, L - Lingual, O - Occlusal, M - Mesial, D - Distal, I - Incisal, Am - Amalgam, CR - Crown, FILL - Filling, PORC - Porcelain, BACK - Backing, FAC - Facing

CARIES

RESTORATIONS: 7 GOLD CR

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

ONLY TEETH EXAMINED

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

RESTORATIONS

CARIES

SIGNATURE OF OFFICER OR OTHER PERSON WHO PREPARED DENTAL CHART: T. CROWELL PFC QMC

VERIFIED BY GRS OFFICER: ROBERT S. ROBBINS CAPTAIN QMC

DD FORM 1 SEP 51 569

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

OSMAN, SEKER 31005

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. Unable to Chart teeth further due to rigid facial features.

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