18038-2

ALLIED

# REPORT OF INTERMENT

DATE OF REPORT: 8 APRIL 55

TYPE OF REPORT: ☒ INITIAL ☐ SUPPLEMENTAL (Reason)

*Imprint Identification Tag If Possible. DO NOT TYPE*

NO I.D. TAGS FOUND ON REMAINS TURKEY

## SECTION 1. - IDENTIFICATION.

| NAME (Last, First, Middle Initial) | SERVICE NUMBER |
|---|---|
| ERTURK, AHMET | 31167 |

| GRADE | ORGANIZATION | BRANCH OF SERVICE |
|---|---|---|
| PVT | UNITED NATIONS TURKISH COMMAND | TAF |

| RACE | RELIGION | COUNTRY (If not U.S.) |
|---|---|---|
| CAU. | | TURKEY |

| PLACE OF DEATH | CAUSE OF DEATH | DATE OF DEATH |
|---|---|---|
| DOA 121ST EVAC. HOSP. APO 971 KOREA | CERT. OF DEATH STATES: RESPIRATORY FAILURE | 4 APRIL 55 |

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

WERE SUBSTITUTE TAGS PROVIDED? 3 ☒ YES ☐ NO THREE

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

CERT. OF IDENTITY REC'd WITH REMAINS. SIGNED BY CPL MUSTAFA KOKEN U.N. TURKISH COM'd. 31323
CERT. OF DEATH REC'd WITH REMAINS, SIGNED BY HERBERT C. MEYER CAPT. 121ST EVAC. HOSP. APO 971

*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 CLOTHING OR P.E's 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 EP089868

| DATE OF BURIAL | HOUR | BURIED IN (Shroud, blanket, or name of other) | TYPE OF GRAVE MARKER | PLOT NO. | ROW NO. | GRAVE NO. |
|---|---|---|---|---|---|---|
| 9 APRIL 55 | 1000 | CANVAS SQUARE | STAR AND CRES. | 45 | 6 | 4021 |

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 | IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINER BURIED WITH BODY |
|---|---|---|
| GEN | T.D.F.C. M. KOCAFAFA | 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: 2 ☒ YES ☐ NO TWO

IDENTIFICATION TAG ATTACHED TO MARKER: 1 ☒ YES ☐ NO ONE

| REMAINS BURIED IN GRAVE TO LEFT (When viewed from foot of grave), NAME (Last, First, Middle Initial) | GRADE | SERVICE NUMBER | ORGANIZATION | GRAVE NO. |
|---|---|---|---|---|
| BEGINNING OF ROW | | | | |

| 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 | | | | 4022 |

SIGNATURE OF PERSON PREPARING REPORT: William L. Carter

SIGNATURE OF GRS OFFICER VERIFYING REPORT:

DD FORM 1 JUL 51 551 REPLACES QMC FORM 1042, REV. 1 APRIL 1946, WHICH IS OBSOLETE. ERTURK, AHMET 31167

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)* |
|---|---|---|---|---|
| 5'8 | EST 165 | UDT | BROWN | UNK |

BIRTHMARKS, SCARS, OR TATTOOS: NONE NOTED

LAUNDRY MARKS: NONE NOTED

WEAPON(S) WITH SERIAL NUMBER(S): N/A

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

NO CLOTHING OR P'E's FOUND ON OR WITH 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 |
|---|---|---|---|---|
| | NOT | FINGER PRINTED | | |

**LEFT HAND**

| 6 LEFT THUMB | 7 LEFT INDEX FINGER | 8 LEFT MIDDLE FINGER | 9 LEFT RING FINGER | 10 LEFT LITTLE FINGER |
|---|---|---|---|---|
| | NOT | FINGER PRINTED | | |

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

1. REMAINS REC'd FROM 293rd Q.M. Co. (GRREG) YONG DUNG PO, COLLECTING POINT, KOREA EVAC # A 11,508. 293rd GRS. Co. EMT TAGGED AT 121st EVAC. HOSPITAL, APO 971
2. NAME, RANK, ORG, COD, POD AND DOD WAS TAKEN FROM CERT. OF DEATH
3. CERT. OF IDENTITY ATTACHED.

REMARKS

18038-2

ALLIED

# REPORT OF INTERMENT

DATE OF REPORT: 9 April 1955

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

Imprint Identification Tag If Possible. DO NOT TYPE

No ID tags found on Remains

TURKEY

## SECTION 1. - IDENTIFICATION.

| NAME (Last, First, Middle Initial) | SERVICE NUMBER |
|---|---|
| ERTURK, AHMET | 31167 |

| GRADE | ORGANIZATION | BRANCH OF SERVICE |
|---|---|---|
| Pvt | United Nations Turkish Command | TAF |

| RACE | RELIGION | COUNTRY (If not U.S.) |
|---|---|---|
| Caucasian | unk | TURKEY |

| PLACE OF DEATH | CAUSE OF DEATH | DATE OF DEATH |
|---|---|---|
| DOA 121st Evac Hosp, APO 971, Korea | Cert of Death states: Respiratory failure. | 4 April 1955 |

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

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

IF NO TAGS FOUND ON BODY, DESCRIBE ALL MEANS OF IDENTIFICATION (If unidentified fill in section 3 on reverse) Cert of Identity rec'd with Remains. Signed by Cpl Mustafa Koken, U.N. Turkish Command, 31323. Cert of Death rec'd with Remains signed by Herbert C. Meyer, Captain, 121st Evac Hosp, APO 971.

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 clothing or P.E.'s 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 EP089868

| DATE OF BURIAL | HOUR | BURIED IN (Shroud, blanket, or name of other) | TYPE OF GRAVE MARKER | PLOT NO. | ROW NO. | GRAVE NO. |
|---|---|---|---|---|---|---|
| 9 April 55 | 1000 | Canvas Square | Star & Crescent | 45 | 6 | 4021 |

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: M. Kocafafa TAFC

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 [ ] NO (2)

IDENTIFICATION TAG ATTACHED TO MARKER: One [X] 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. |
|---|---|---|---|---|
| BEGINNING OF ROW | | | | |

| 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 | | | | 4022 |

SIGNATURE OF PERSON PREPARING REPORT: William L. Carter — WILLIAM L. CARTER CPL QMC

SIGNATURE OF GRS OFFICER VERIFYING REPORT: Jay E. Brett — JAY E. BRETT 1st Lt QMC

DD FORM 1 JUL 51 551 REPLACES QMC FORM 1042, REV. 1 APRIL 1946, WHICH IS OBSOLETE. ERTURK, AHMET 31167

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)* |
|---|---|---|---|---|
| 5'8" | Est 165 | Udt | Brown | Unknown |

BIRTHMARKS, SCARS, OR TATTOOS

None Noted

LAUNDRY MARKS

None Noted

WEAPON(S) WITH SERIAL NUMBER(S)

n/a

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

No clothing or P.E.'s found on or with Remains.

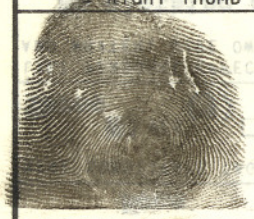
***REMARKS***

1. Remains rec'd from 293rd QM Co (GRREG), Yong Dung Po, Collecting Point, Korea. Evac #All508. 293rd GRS Co EMT tagged at 121st Evac Hospital, APO 971.
2. Name, rank, organization, COD, POD, and DOD was taken from Certificate of Death.
3. Certificate of Identity attached.

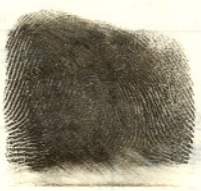
## SECTION 4. - FINGERPRINTING - FINGERPRINTS OF ALL REMAINS MUST BE TAKEN

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

18038-2

ALLIED

# IDENTIFICATION DATA

| 1. REMAINS OF UNKNOWN | | | 2. DATE OF REPORT |
|---|---|---|---|
| ERTURK, AHMET | 31167 | Pvt | 9 April 1955 |

| 3. NAME OF CEMETERY | 4. PLOT | 5. ROW | 6. GRAVE | 7. DATE OF DISINTERMENT | 7. DATE OF REINTERMENT |
|---|---|---|---|---|---|
| UNMC, Tanggok, Korea | 45 | 6 | 4021 | | |

## PHYSICAL DESCRIPTION

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

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

1. One (1) Cert of Identity rec'd with Remains reads: Erturk, Ahmet, Pvt, 31167.
2. One (1) EMT tag rec'd with Remains reads: Erturk, Ahmet, Pvt, 31167.
3. One (1) Cert of Death rec'd with Remains reads: Erturk, Ahmet, Pvt, 31167.

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)

No clothing or P.E.'s found on or with Remains.

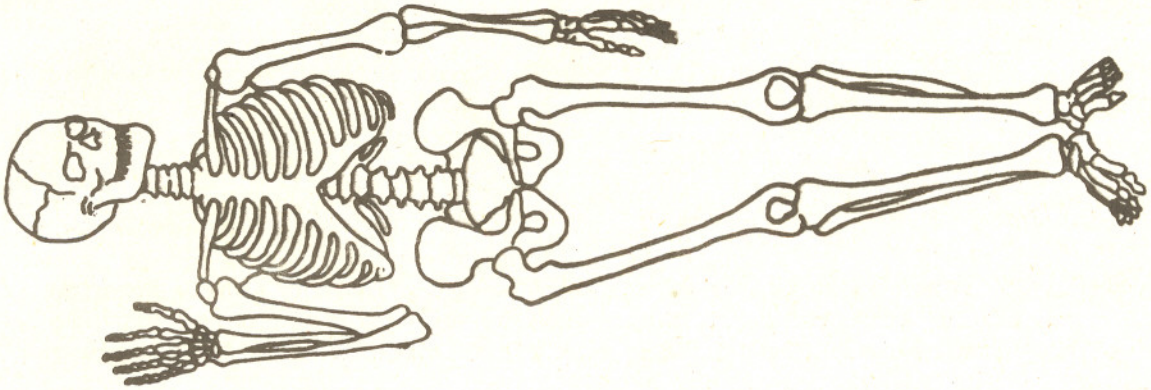
18038-2

19. BLACK OUT PARTS OF BODY NOT RECOVERED

ALLIED

ERTURK, AHMET, Pvt, 31167
UNMC, Tanggok, Korea

| PLOT | ROW | GRAVE |
|---|---|---|
| 45 | 6 | 4021 |



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 rec'd complete and intact.

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 |
|---|---|
| WILLIAM L. CARTER CPL QMC<br>114TH QM CO (GRREG) | William L. Carter |

QMC FORM 18 MAR 47 1044b

Erturk, Ahmet 31167

5762—FEC P&PC—9 50—250M

18038-2

# ALLIED IDENTIFICATION DENTAL CHART

DATE: 9 April 1955

| NAME (Last, First, Middle Initial) | GRADE | SERVICE NUMBER |
|---|---|---|
| ERTURK, AHMET | Pvt | 31167 |

| UNIT | ORGANIZATION | CAUSE OF DEATH | DATE OF DEATH |
|---|---|---|---|
| Unknown | UN Turkish Command | See DD Form 551 | 4 April 1955 |

| PLACE OF DEATH | PLACE OF BURIAL | PLOT | ROW | GRAVE |
|---|---|---|---|---|
| See DD Form 551 | UNMC, Tanggok, Korea | 45 | 6 | 4021 |

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: 2 GOLD CL. 3 GOLD CL. 10 GOLD CL

UPPER RIGHT — UPPER LEFT

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

LOWER RIGHT — LOWER LEFT

| 32 | 31 | 30 | 29 | 28 | 27 | 26 | 25 | 24 | 23 | 22 | 21 | 20 | 19 | 18 | 17 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | O PORC. | |

RESTORATIONS

CARIES

SIGNATURE OF EXAMINER OR OTHER PERSON WHO PREPARED DENTAL CHART: William L Carter — WILLIAM L. CARTER, CPL, QMC

VERIFIED BY GRS OFFICER: JAY E. BRETT, 1st Lt, QMC

DD FORM 1 SEP 51 569

REPLACES QMC FORM 1045, 1 APR 1947, WHICH IS OBSOLETE. ERTURK, AHMET 31167

SEE REVERSE SIDE

22902—FEC P&PC—1/52—50M

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)*