18043-1

ALLIED

REPORT OF INTERMENT

DATE OF REPORT

TYPE OF REPORT ☐ INITIAL ☐ SUPPLEMENTAL (Reason)

Imprint Identification Tag If Possible. DO NOT TYPE

TURKEY
NO I.D. TAGS FOUND ON REMAINS
TURKEY

SECTION 1. - IDENTIFICATION.

NAME (Last, First, Middle Initial)	SERVICE NUMBER
YILGOR, SALEM	31154

GRADE	ORGANIZATION	BRANCH OF SERVICE
SGT	TURKISH ARMED FORCES	ARMY

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

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
TURKISH ARMED FORCES AREA, S. KOREA	EMT STATES GUNSHOT WOUND, PERFORATING ABDOMEN	4 MAY 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) EMT TAG signed by BARKER CAPT, MC; CERT. OF IDENTITY Rec'd with REMAINS signed by MUSTAKIN, DIMSUYU, 2/LT T.A.F. VERIFIED by ROBERT G. KAHLKE, SFC, RA 46080074 293 QM CO (GRREG)

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, TANGCOK (KOREA EP0896

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.
9 MAY 55	1000	CANVAS SQUARE	STAR & CRES	45	6	4022

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	T.A.F.C. M. KOCAFAFA

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
2 ☒ YES ☐ NO TWO	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.
ERTURK AHMET	PVT	31467	U.N. TURKISH	4021

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	—	—	—	4023

SIGNATURE OF PERSON PREPARING REPORT: William L. Cartes

SIGNATURE OF GRS OFFICER VERIFYING REPORT:

DD FORM 1 JUL 51 551 REPLACES QMC FORM 1042, REV. 1 APRIL 1946, WHICH IS OBSOLETE.

YILGOR, SALIM
31154

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)*

BIRTHMARKS, SCARS, OR TATTOOS

LAUNDRY MARKS

WEAPON(S) WITH SERIAL NUMBER(S)

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

18043-1

ALLIED

REPORT OF INTERMENT

DATE OF REPORT: 9 May 1955

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

Imprint Identification Tag If Possible. DO NOT TYPE

TURKEY
No ID tags found on Remains
TURKEY

SECTION 1. - IDENTIFICATION.

NAME (Last, First, Middle Initial)	SERVICE NUMBER
YILGOR, SALIM	31154

GRADE	ORGANIZATION	BRANCH OF SERVICE
Sgt	Turkish Armed Forces	Army

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

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
Turkish Armed Forces Area, Korea	EMT states: Wound, perforating, abdomen.	4 May 55

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): EMT tag signed by BARKER, Captain, MC; Certificate of Identity received with Remains. Signed by Mustikin Dimsuyu, 2/Lt, TAF. Verified by Robert G. Kahlke, Sfc, RA46080074, 293rd QM Co (GRREG).

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 May 55	1000	Canvas Square	Star & Crescent	45	6	4022

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.
ERTURK, AHMET	Pvt	31167	UN Turkish Command	4021

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				4023

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

SIGNATURE OF GRS OFFICER VERIFYING REPORT: Louis L. Henry
LOUIS L. HENRY 1st Lt QMC

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

YILGOR, SALIM
31154

37-1396-Army-AG Admin Cen-AFFE-20M

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 140	Utd	Black	

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.

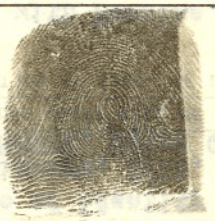
REMARKS

1. Remains received from 293rd QM Co (GRREG), Yong Dung Po Collecting Point, Korea. Evac # 11520, 293rd GRS Co. EMT tagged at 430 SH (MA), APO 358, Korea.
2. Name, rank, organization, COD, POD, and DOD was taken from EMT tag.
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

ALLIED

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IDENTIFICATION DATA

1. REMAINS OF UNKNOWN			2. DATE OF REPORT
YILGOR, SALIM Sgt 31154			9 May 1955

3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT	7. DATE OF REINTERMENT
UNMC, Tanggok, Korea	45	6	4022		

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT	9. ESTIMATED HEIGHT	10. COLOR OF HAIR	11. RACE
140	5'7"	Black	Caucasian

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

1. One (1) Certificate of Identity received with Remains reads: YILGOR, SALIM, Sgt, 31154.
2. One (1) EMT tag received with Remains reads: YILGOR, SALIM, Sgt, 31154.

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 clothing or P.E.'s found on or with Remains.

18043-1

ALLIED

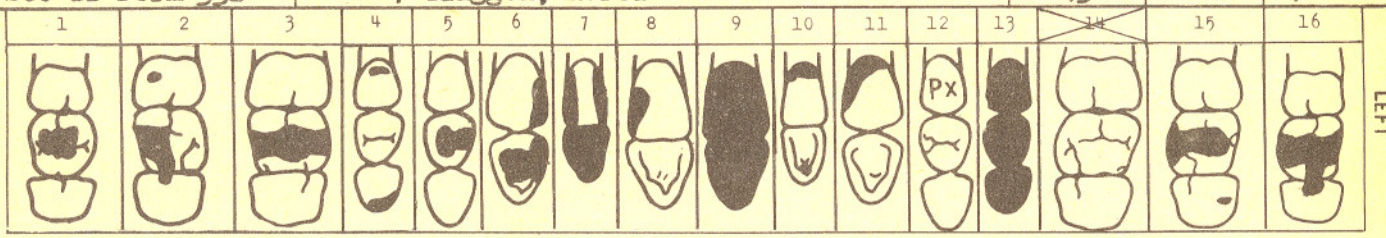
IDENTIFICATION DENTAL CHART

DATE: 9 May 1955

NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER
YILGOR, SALIM	Sgt	31154

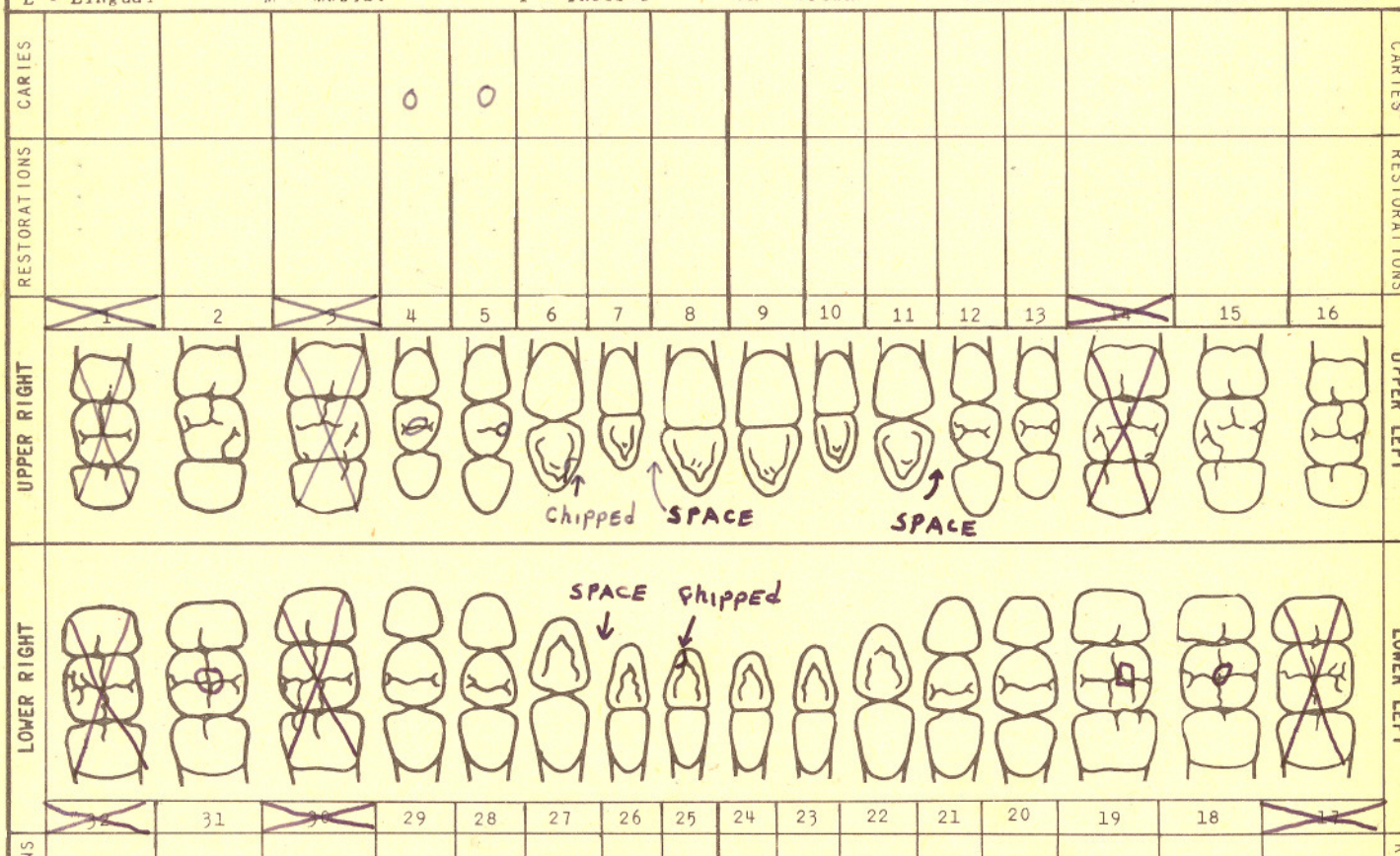
UNIT	ORGANIZATION	CAUSE OF DEATH	DATE OF DEATH
	Turkish Armed Forces	See DD Form 551	4 May 55

PLACE OF DEATH	PLACE OF BURIAL	PLOT	ROW	GRAVE
See DD Form 551	UNMC, Tanggok, Korea	45	6	4022



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



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

VERIFIED BY GRS OFFICER: Louis L. Henry — LOUIS L. HENRY, 1st Lt, QMC

DD FORM 1 SEP 51 569

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

YILGOR, SALIM 31154

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	X	ABNORMAL INTERDENTAL SPACES
	EROSION		SUPERNUMERARY TEETH	X	IRREGULARITY OF ALIGNMENT
	ABRASION		FRACTURES OF ENAMEL		UNUSUAL RESTORATIONS
	ROTATION	X	FRACTURES OF TEETH		UNUSUAL APPLIANCES

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

1. #s 6 and 25 are chipped.
2. # 8 is in a facial position.
3. Abnormal spaces between #s 7 and 8; 11 and 12, 26 and 27.

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

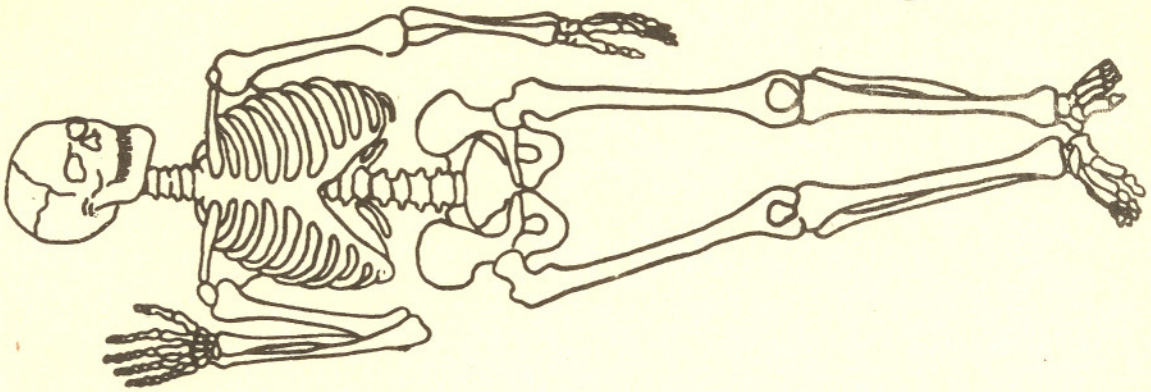
18043-1

19. BLACK OUT PARTS OF BODY NOT RECOVERED

ALLIED

YILGOR, SALIM, Sgt, 31154
UNMC, Tanggok, Korea

PLOT	ROW	GRAVE
45	6	4022



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 received 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 114TH QM CO (GRREG)	William L. Carter

QMC FORM 18 MAR 47 1044b

YILGOR, SALIM 31154

5762—FEC P&PC—9 50—250M