NAME AND ARMY SERIAL NUMBER

HASAN EMINOGLU 47 158

GRADE	ARM OR SERVICE	AGE	RACE	NATIVITY	SERVICE, YEARS
	Army	21	T/cau	Turk.	1

LOCATION WHERE TAGGED:	DATE	HOUR
TURK. [illegible] Med. Co.	3/9/57	1900

DIAGNOSIS: IF INJURY, STATE HOW, WHEN, WHERE INCURRED

caught between two vehicles, 3 Sept.1957 in the Turkish Art. Bn.

LINE OF DUTY: Yes

TREATMENT GIVEN:

None

TETANUS TOXOID: DOSE TIME:
OR
ANTITETANIC SERUM: DOSE TIME:

MORPHINE: DOSE TIME:

DISPOSITION:	DATE	HOUR
793rd QM Co. (GRREG) APO 971	4/9/57	0950

SIGNATURE, WITH RANK:

[signature] AN ARKAN MAJ. MD.

W. D., A. G. O. Form No. 8-26
1 October 1944

16—15434-2 ☆ GPO

ALLIED

REPORT OF INTERMENT

DATE OF REPORT: 7 September 1957

TYPE OF REPORT: [X] 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
RAYSA, HASAN EMINOGLU	47 158

GRADE	ORGANIZATION	BRANCH OF SERVICE
PVT	TAFC	ARMY

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

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
TURKISH ART. BN. APO 5401	Traffic Accident	3 September 1957

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

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 Orham Arkan, Maj., Asim Uigener, Capt., Ahmet Tugac, 3rd/Lt. TAFC. Verified by John Caldwell Jr., Sgt. RA 14 378 750.

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

3 Three

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, EP 089868

DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.
7 September 1957	1100	Sheet	Star & Cresent	45	8	4052

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: CAPT. ALI KIZILTUN TAFC. Chaplian

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: 2 [X] YES [ ] NO two

IDENTIFICATION TAG ATTACHED TO MARKER: 1 [X] YES [ ] NO one

REMAINS BURIED IN GRAVE TO LEFT (When viewed from foot of grave), NAME (Last, First, Middle Initial): BAYER, KREZ

GRADE	SERVICE NUMBER	ORGANIZATION	GRAVE NO.
PVT.	47134	TAF	4051

REMAINS BURIED IN GRAVE TO RIGHT (When viewed from foot of grave), NAME (Last, First, Middle Initial): Vacant Grave

GRADE	SERVICE NUMBER	ORGANIZATION	GRAVE NO.
- - -	- - -	- - -	- - -

SIGNATURE OF PERSON PREPARING REPORT: Donald B. Moseley
DONALD B. MOSELEY SP-3

SIGNATURE OF GRS OFFICER VERIFYING REPORT: James C. Williamson
JAMES C. WILLIAMSON, CAPTAIN, QMC.

DD FORM 1 JUL 51 551 REPLACES QMC FORM 1042, REV. 1 APRIL 1946, WHICH IS OBSOLETE.

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)*
5'7	140	Brown	Black	Turkish Art. Bn. APO 5401

BIRTHMARKS, SCARS, OR TATTOOS

None Noted

LAUNDRY MARKS

None Noted

WEAPON(S) WITH SERIAL NUMBER(S)

N/A

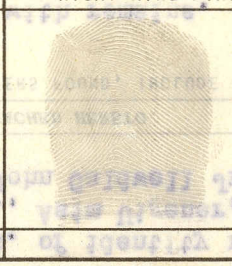
OTHER IDENTIFICATION CLUES *(Including other remains recovered or associated with this remains).*

No clothing or PFS 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
				

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

TURKEY

IDENTIFICATION DENTAL CHART

DATE: 5 September 1957

NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER
BAYSA, HASAN EMINOGLU	PVT	47 158

UNIT	ORGANIZATION	CAUSE OF DEATH	DATE OF DEATH
T.A.F.C.	T.A.F.C.	Traffic Accident	3 September 1957

PLACE OF DEATH	PLACE OF BURIAL	PLOT	ROW	GRAVE
T.A.F.C.	UNMC PUSAN, KOREA	45	8	4052

RIGHT

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

LEFT

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	XXXX	5	6	7	8	9	10	11	12	13	XXXXXXX	15	16

UPPER RIGHT — UPPER LEFT

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: Billy D. Epperson

VERIFIED BY GRS OFFICER: Jesse W. Hamm Jr Capt Dos

DD FORM 1 SEP 51 569

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

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)*

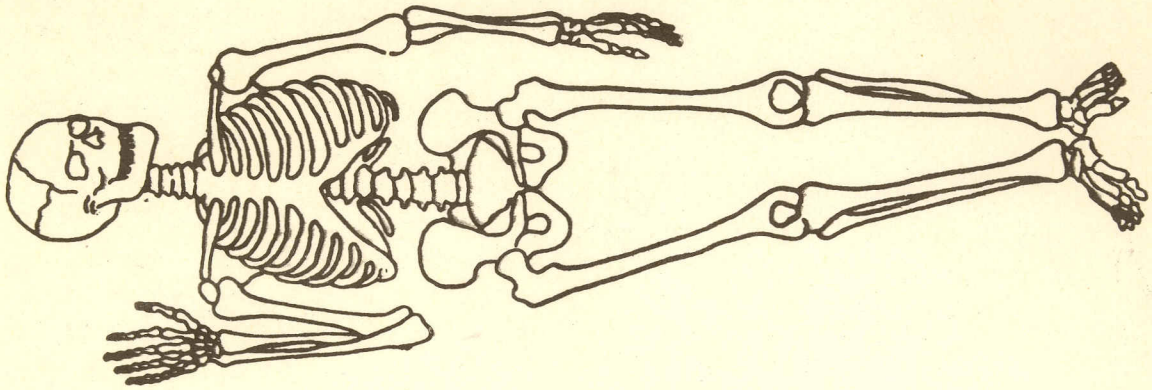
	MOTTLED ENAMEL		UNERUPTED TEETH		RETAINED DECIDUOUS TEETH
	ENAMEL HYPOPLASIA		MALOCCLUSION		ABNORMAL INTERDENTAL SPACES
	EROSION		SUPERNUMERARY TEETH		IRREGULARITY OF ALIGNMENT
	ABRASION		FRACTURES OF ENAMEL		UNUSUAL RESTORATIONS
	ROTATION		FRACTURES OF TEETH		UNUSUAL APPLIANCES

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

19. BLACK OUT PARTS OF BODY NOT RECOVERED

ALLIED

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

Remains complete and in tact.

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
DONALD B. MOSELEY, SP-3 (GRREG) APO 59	Donald B Moseley

QMC FORM 18 MAR 47 1044b

5762—FEC P&PC—9

ALLIED

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN				2. DATE OF REPORT	
BAYSA, HASAN EMINOGLU 47158 PVT.				7 September 1957	
3. NAME OF CEMETERY	**4. PLOT**	**5. ROW**	**6. GRAVE**	**7. DATE OF**	
				DISINTERMENT	REINTERMENT
UNITED NATIONS MILITARY CEMETERY TANGGOK, KOREA	45	8	4052		

PHYSICAL DESCRIPTION

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

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

1. Seven (7) Cert. of identity rec'd with remains reads:
   BAYSA, HASAN EMINOGLU, PVT. 47158
2. Six (6) Cert. of death rec'd with remains reads:
   BAYSA, HASAN EMINOGLU, PVT, 47158

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.

TURKEY

CERTIFICATE OF DEATH

I IDENTIFICATION OF DECEASED

A. LAST NAME - FIRST NAME - MIDDLE NAME	B. SSN/SS NO.	C. RANK/RATING	D. SEX
BAYSA, HASAN EMINOGLU	47 158	Pvt	M

E. ORGANIZATION OR EMPLOYING AGENCY AND ADDRESS	APO	F. RACE/NATIONALITY	G. MARITAL STATUS
T.A.F.C.	5401	T/cau	Single

H. CATEGORY (SR 600-750-1): [X] ARMY [ ] DAC [ ] DEPENDENT* [ ] NAVY [ ] DNC [ ] OTHER (Specify) [ ] AIR FORCE [ ] DAFC

*I. IF DEPENDENT (Name and address of individual upon whom dependent): N/A

J. BIRTH DATE	K. BIRTH PLACE (City or Town, State and Country)	L. IF FOREIGN BORN
1936	Ayvalikoy, Izmit-Turkey	NATURALIZED [ ] YES [X] NO

M. USUAL OCCUPATION (In homeland and/or prior to military svc)	N. DESIGNATED RESIDENCE (Street No, City or Town, County & State)
Farmer	Ayvalikoy, Izmit-Turkey

II IDENTIFICATION AND NOTIFICATION OF NEXT-OF-KIN

A. RELATIONSHIP	C. METHOD USED	D. LAST NAME - FIRST NAME - MIDDLE INITIAL
Brother	[ ] AG CASUALTY [X] OTHER (Specify)	BAYSA, NAFIZ
B. NOTIFIED: [X] YES [ ] NO		E. ADDRESS (City or Town, County and State): AKCESME NAH., AYVALIKOY, IZMIT-Turkey

III IDENTIFICATION OF PARENTS

	LAST NAME - FIRST NAME - MIDDLE INITIAL	COUNTRY OF BIRTH
A. FATHER [ ] LIVING [X] DECEASED	BAYSA, NAFIZ	Turkey
B. MOTHER [ ] LIVING [X] DECEASED	UNK	Unk.

IV MEDICAL CERTIFICATION

A. PLACE OF DEATH (City or Town, State or APO)	B. DATE OF DEATH: HOUR	DAY	MONTH	YEAR	C. ATTENDED DECEASED: FROM (Date)	TO (Date)	D. DECEASED LAST SEEN: DATE
Turkish Art. Bn. Apo 5401	1730	3	9	57	3/9/57	3/9/57	3/9/57

E. NAME OF HOSPITAL: TURKISH MED CO.

INTERVAL BETWEEN ONSET & DEATH

F. IMMEDIATE CAUSE OF DEATH (If external cause fill in Item IV L below): Caught between two vehicles — Immediately

G. DUE TO: traffic accident

H. DUE TO:

I. ADDITIONAL DIAGNOSIS:

J. DATES OF MAJOR OPERATIONS AND SIGNIFICANT FINDINGS:

K. AUTOPSY PERFORMED: [ ] YES [X] NO

L. IF DEATH DUE TO EXTERNAL CAUSE, STATE DETAILS OF WOUND, INJURY OR ACCIDENT (How, when, where): Caught between two vehicles, 3 Sept. 1957, in the Turkish Art. Bn.

M. I CERTIFY THAT DEATH OF THE ABOVE NAMED DECEASED OCCURRED AS INDICATED

DATE	TYPED NAME AND RANK OF MEDICAL OFFICER	SIGNATURE OF MEDICAL OFFICER
3 Sept. 1957	ORHAN ARKAN MAJ. MD.	

V MORTICIAN REPORT (Final dispositions of remains)

A. (Check applicable box): [ ] BURIED LOCALLY [ ] CREMATED LOCALLY [ ] REMAINS SHIPPED TO HOMELAND [ ] ASHES SHIPPED TO HOMELAND

B. NAME OF CEMETERY: United Nations Cemetery, Tanggok, Pusan

C. ROW 8 45 D. PLOT 4052 E. GRAVE

F. TYPED NAME OF EMBALMER	G. LICENSE NO. / H. STATE HELD	SIGNATURE OF EMBALMER

FEC FORM 1 APR 54 89 (Rev) (Edition of 1 Oct 47 obsolete)

69-174-Army-AG Admin Cen-Japan-6M

TURKEY

293D QUARTERMASTER COMPANY GRAVES REGISTRATION
APO 971

CERTIFICATE OF IDENTITY

CURRENT DEATH

DATE 4 September 1957

1. I, the undersigned, do certify that the deceased, which I have (personally viewed) (~~seen photographs of~~) are those of:

BAYSA, HASAN EMINOGLU PVT 47 158
Last Name, First Name, MI, Rank, ASN.

T.A.F.C 5401.
Organization APO.

2. My identification is based upon personal acquaintence covering a period of: 1. 1 Week 2. 1 Week 3. 1 Week.
(specified in weeks, months or years)

3. I recognized the deceased because of the following; (X) Facial Features, ( ) Scars, ( ) Birthmarks, or as listed below:

_____.

1. signed; [signature]
typed; ORHAN ARKAN
MAJ. 43 705
RANK ASN
T.A.F.C APO 5401
ORGANIZATION

VERIFIED;
[signature]
(signed)
JOHN CALDWELL JR.
(typed)
SGT RA 14 378 750
(RANK) (ASN)
293rd QM CO. (GRREG) APO 358
(organization)

2. signed; [signature]
typed; ASIM UIGENER
CAPT 42 589
RANK ASN
T.A.F.C APO 5401
ORGANIZATION

3. signed; [signature]
typed; AHMET TUGAC
3rd/Lt 47 700
RANK ASN
T.A.F.C. APO 5401
ORGANIZATION

(293 Opns 0.12)

TURKEY

AMERICAN GRAVES REGISTRATION SERVICE
FINGERPRINT FORM

BAYSA, HASAN EMINOGLU PVT 47 158 Date: 5 September 1957
Name and Service No. or Unknown No.

Cemetery UNITED NATIONS MILITARY CEMETERY (PUSAN, KOREA) Plot 45 Row 8 Grave 4052

NOTE AMPUTATIONS:

CLASSIFICATION _____

REFERENCE _____

REMARKS:

LEFT HAND

10. Little Finger 

9. Ring Finger 

8. Middle Finger 

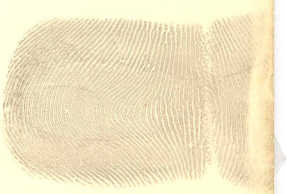
7. Index Finger 

6. Thumb 

RIGHT HAND

5. Little Finger 

4. Ring Finger 

3. Middle Finger 

2. Index Finger 

1. Thumb 

Impressions taken by:

Bernard J. Lucas
PFC US55590736
293 A.A.A.W. Co. (Lt Reg) APO 971

Signature of Individual
Taking Prints

34712-Army-AG Admin Cen-FEC-12/52-30M

TURKISH ARMED FORCES COMMAND
TAPO 5401

4 September 1957

SUBJECT: Request for non-autopsy

TO : COMMANDING OFFICER
293rd QM CO (GRREG)
APO 971

1. Autopsy is not requested on Baysa, Hasan Eminoglu, 47 158, T.A.F.C., TAPO 5401, to determine the cause of death.

ORHAN ARKAN
MAJ. MD.

TURKISH ARMED FORCES COMMAND
TAPO 5401

4 September 1957

SUBJECT: Request for non-autopsy

TO : COMMANDING OFFICER
293rd QM CO (GRREG)
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ORHAN ARKAN
MAJ. MD.

TURKISH ARMED FORCES COMMAND
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ORHAN ARKAN
MAJ. MD.