NAME AND ARMY SERIAL NUMBER

OSMA Mehmet

GRADE	ARM OR SERVICE	AGE	RACE	NATIVITY	SERVICE, YEARS
Pvt	TAFC	22	Cau	TURK	2

LOCATION WHERE TAGGED:	DATE	HOUR
Med.Co 8th TAFC	2-7-58	1100

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

Two Gunshot wound at the left (hypochondir) and right (regro glutea)
He killed by the guard at the 8th TAFC Jail about 0725 hour 2-7-1958

LINE OF DUTY:

TREATMENT GIVEN:

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

DISPOSITION:	DATE	HOUR
SP 39 APO 358	2-7-58	1100

SIGNATURE, WITH RANK:

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

16—15434-2 ☆ GPO

ALLIED REPORT OF INTERMENT

DATE OF REPORT: 7 July 1958

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

Imprint Identification Tag If Possible. DO NOT TYPE

TURKEY I.D. tags unable to print

SECTION 1. - IDENTIFICATION.

NAME (Last, First, Middle Initial)		SERVICE NUMBER
OSMA MEHMET		45692
GRADE	**ORGANIZATION**	**BRANCH OF SERVICE**
PVT	TAFC	ARMY
RACE	**RELIGION**	**COUNTRY (If not U.S.)**
Caucasian	Islam	Turkey

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
8th TAFC APO 5401	COD state: Arterial Bleeding	2 July 1958

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

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

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 AKGUN SULEYMAN, EMIN MEHMET, ERSOY METIN. TAFC TAPO 5401. Verified by OWEN W. JOHNSTON, PFC, 107th QM CO, (Gr Reg).

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 PE'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.
6 July 1958	1100	SHEET	Star & cresent	45	9	4063

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: NACI AYDIN, Sgt, Chaplain

IDENTIFICATION TAG BURIED WITH BODY: Two [X] YES [ ] NO (2)

IDENTIFICATION TAG ATTACHED TO MARKER: One [X] YES [ ] NO (1)

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.

REMAINS BURIED IN GRAVE TO LEFT (When viewed from foot of grave), NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER	ORGANIZATION	GRAVE NO.
OZTURK SULEYMAN	PVT	46493	TAFC	4062
REMAINS BURIED IN GRAVE TO RIGHT (When viewed from foot of grave), NAME (Last, First, Middle Initial)	**GRADE**	**SERVICE NUMBER**	**ORGANIZATION**	**GRAVE NO.**
VACANT GRAVE	- - -	- - -	- - -	- - -

SIGNATURE OF PERSON PREPARING REPORT: Terry C. Potter
TERRY C. POTTER PFC

SIGNATURE OF GRS OFFICER VERIFYING REPORT: Roland R. Swanson
ROLAND R. SWANSON, 1st Lt, QMC, OIC

DD FORM 1 JUL 51 551 REPLACES QMC FORM 1042, REV. 1 APRIL 1946, WHICH IS OBSOLETE.

45-791-Army-AG Admin Cen-AFFE-5M

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	UTD	Black	

BIRTHMARKS, SCARS, OR TATTOOS: None Noted

LAUNDRY MARKS: N/A

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

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

No clothing or PE'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

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: The remains is buried at a 45 degree angle. With the head pointing to the North so that the remains lay in a North-South direction.

AMERICAN GRAVES REGISTRATION SERVICE

FINGERPRINT FORM

ALLIED TURKEY

OSMA, MEHMET, 45692 Date: 3 July 1958

Name and Service No. or Unknown No.

Cemetery UNITED NATIONS MILITARY CEMETERY, TANGGOK, KOREA Plot 45 Row 9 Grave 4063

NOTE AMPUTATIONS:

CLASSIFICATION _____

REFERENCE _____

REMARKS:

Impressions taken by:

_____

Signature of Individual
Taking Prints

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

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 

TURKEY IDENTIFICATION DENTAL CHART ALLIED

DATE: 3 July 1958

NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER
OSMA, Mehmet	PVT	45692

UNIT	ORGANIZATION	CAUSE OF DEATH	DATE OF DEATH
7TH Co, 2ND BN,	8TH TAFC	GUN SHOT WOUND	2 July 1958

PLACE OF DEATH	PLACE OF BURIAL	PLOT	ROW	GRAVE
7TH Co Area	UNITED NATIONS MILITARY CEMETERY, KOREA	45	9	4063

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

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

UPPER RIGHT — UPPER LEFT

LOWER RIGHT — LOWER LEFT

32	31	XX30XX	29	28	27	26	25	24	23	22	21	20	19	XX18XX	17
		MISS.												MISS	

RESTORATIONS / CARIES

SIGNATURE OF OFFICER OR OTHER PERSON WHO PREPARED DENTAL CHART: Roy E. Linbock

VERIFIED BY GRS OFFICER: Kenneth D. McGee Capt. QMC

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)*

Nr. 18 & 30 Missing.

TURKEY

ALLIED

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN				2. DATE OF REPORT	
OSMA MEHMET PVT 45692				7 July 1958	
3. NAME OF CEMETERY	**4. PLOT**	**5. ROW**	**6. GRAVE**	**7. DATE OF**	
				DISINTERMENT	REINTERMENT
UNITED NATIONS MILITARY CEMETERY, TANGOOK, KOREA	45	9	4063		

PHYSICAL DESCRIPTION

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

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

1. Seven (7) cert. of identity rec'd with remains reads: OSMA MEHMET, PVT, 45692.

2. Six (6) cert. of Death rec'd with remains reads: OSMA MEHMET, PVT, 45692.

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	

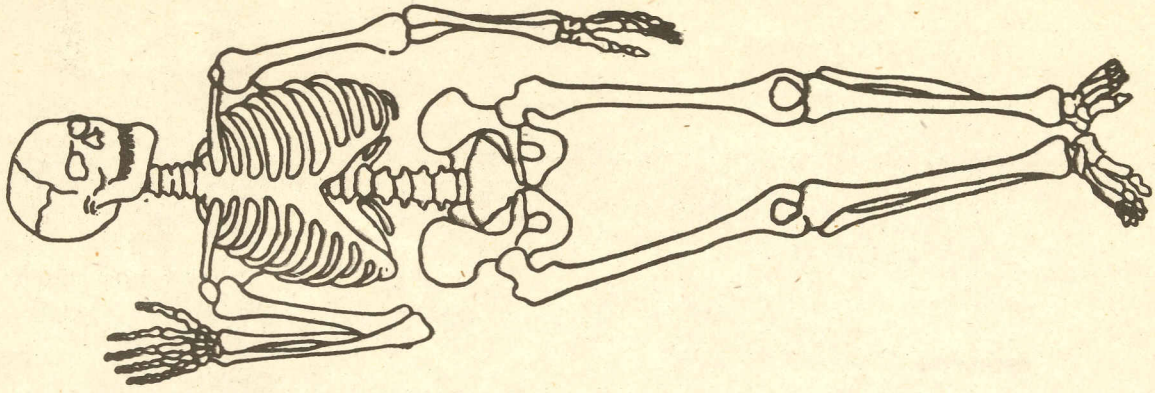
16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

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 PE's found on or with remains.

19. BLACK OUT PARTS OF BODY N[illegible] RECOVERED



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 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
TERRY C. POTTER, PFC, US55569936, 28th QM (GRREG)	Terry C. Potter

QMC FORM 18 MAR 47 1044b

5762—FEC P&PC—9 50—250M

CERTIFICATE OF DEATH

TURKEY

ALLIED

I IDENTIFICATION OF DECEASED

A. LAST NAME - FIRST NAME - MIDDLE NAME	B. SSN/SS NO.	C. RANK/RATING	D. SEX
OSMA MEHMET	45692	PVT	M

E. ORGANIZATION OR EMPLOYING AGENCY AND ADDRESS	APO	F. RACE/NATIONALITY	G. MARITAL STATUS
2nd. Bn. 7th Co, 8th. TAFC	5401	TURK	Single

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

*I. IF DEPENDENT (Name and address of individual upon whom dependent)

J. BIRTH DATE	K. BIRTH PLACE (City or Town, State and Country)	L. IF FOREIGN BORN
1936	Kavalikoy	NATURALIZED ☐ YES ☐ NO

M. USUAL OCCUPATION (In homeland and/or prior to military svc)	N. DESIGNATED RESIDENCE (Street No, City or Town, County & State)
Farmer	Kavalikoy Ve.irkopru Turky

II IDENTIFICATION AND NOTIFICATION OF NEXT-OF-KIN

A. RELATIONSHIP	C. METHOD USED	D. LAST NAME - FIRST NAME - MIDDLE INITIAL
B. NOTIFIED ☐ YES ☐ NO	☐ AG CASUALTY ☐ OTHER (Specify)	OSMA HAKKI E. ADDRESS (City or Town, County and State) Kavalikoy Ve.irkopru Turky

III IDENTIFICATION OF PARENTS

	LAST NAME - FIRST NAME - MIDDLE INITIAL	COUNTRY OF BIRTH
A. FATHER ☒ LIVING ☐ DECEASED	OSMA HAKKI	
B. MOTHER ☐ LIVING ☐ DECEASED		

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
8th TAFC APO 5401 Area	0725	2	7	58	2-7-58	2-7-58	2-7-58

E. NAME OF HOSPITAL
Med. Co. 8th. TAFC

INTERVAL BETWEEN ONSET & DEATH

F. IMMEDIATE CAUSE OF DEATH (If external cause fill in Item IV L below)
Arterial Bleeding — 20 Min.

G. DUE TO
Gunshot wound

H. DUE TO

I. ADDITIONAL DIAGNOSIS
Two gun shots at the hypochondir and right regio glutea causing arterial bleeding and resulting in death

J. DATES OF MAJOR OPERATIONS AND SIGNIFICANT FINDINGS
NONE

K. AUTOPSY PERFORMED ☐ YES ☐ NO

L. IF DEATH DUE TO EXTERNAL CAUSE, STATE DETAILS OF WOUND, INJURY OR ACCIDENT (How, when, where)
He wanted to run away from 8th.TAFC'S Jail and seen by the gard .(time was 0725) Come back. The gard shouted, But he don't liseen to him and killed by the guard.

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
2-7-58	Maj A RKAN ORHAN MC	M. C.

V MORTICIAN REPORT (Final dispositions of remains)

A. (Check applicable box)
☐ BURIED LOCALLY ☐ REMAINS SHIPPED TO HOMELAND
☐ CREMATED LOCALLY ☐ ASHES SHIPPED TO HOMELAND

B. NAME OF CEMETERY
United Nations Memorial Cemetery in Korea
C. ROW 9 45 D. PLOT 4063 E. GRAVE

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

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

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

293RD QUARTERMASTER COMPANY
(GRAVES REGISTRATION)
APO 20

Date 2-July-1958

CERTIFICATE OF IDENTITY

TURKEY CURRENT DEATH ALLIED

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

OSMA Mehmet Pvt 45692
Last Name First Name MI Rank ASN

2nd Bn.7th Co.8th TAFC 540I
Organization APO

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

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

1. Signed: [signature]
Typed: AKGUN Suleyman
Cpl 48003
Rank ASN
Med.Co 8th TAFC
Organization

VERIFIED:
Owen W. Johnston
(Signed)
OWEN W.JOHNSTON
(Typed)
Pfc US 27519385
(Rank) (ASN)
107th Q.M Co GRREGO
(Organization)

2. Signed:
Typed: EMIN Mehmet
Pvt 43784
Rank ASN
First Aid 8th TAFC
Organization

3. Signed: M. Ersoy.
Typed: ERSOY Metin
2nd Lt 47716
Rank ASN
TAFC TAPO 540I
Organization

(293 Opns .12)

19033

REPORT OF INTERMENT

DATE OF REPORT: 7 July 1958

TYPE OF REPORT: ☒ INITIAL ☐ SUPPLEMENTAL (Reason)

Imprint Identification Tag If Possible. DO NOT TYPE

Turkey
I.D. Tags Unable to Print

SECTION 1. - IDENTIFICATION.

NAME (Last, First, Middle Initial)	SERVICE NUMBER
OSMA MEHMET	45692

GRADE	ORGANIZATION	BRANCH OF SERVICE
Pvt	TAFC	Army

RACE	RELIGION	COUNTRY (If not U.S.)
Caucasian	Islam	Turkey

PLACE OF DEATH	CAUSE OF DEATH	DATE OF DEATH
8th TAFC APO-5401	COD Stated: Arterial Bleeding	2 July 1958

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

WERE SUBSTITUTE TAGS PROVIDED? ☒ YES ☐ NO (3) three

IF NO TAGS FOUND ON BODY, DESCRIBE ALL MEANS OF IDENTIFICATION (If unidentified fill in section 3 on reverse) Cert. of Identity Recd with remains Signed by AKBUN SULEYMAN, EMIN MEHMET, ERSOY METIN. TAFC TAPO-5401. Verified by OWEN W. JOHNSTON PFC, 107th QM Co (Gn Reg)

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 PE'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.
6 July '58	1100	Sheet	Star & Crescent	45	9	4063

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	Naci Aydin Sgt. Chaplain

IDENTIFICATION TAG BURIED WITH BODY ☐ YES ☐ NO

IDENTIFICATION TAG ATTACHED TO MARKER ☐ YES ☐ NO

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

REMAINS BURIED IN GRAVE TO LEFT (When viewed from foot of grave), NAME (Last, First, Middle Initial)	GRADE	SERVICE NUMBER	ORGANIZATION	GRAVE NO.
OZTURK SULEYMAN	Pvt	46493	TAFC	4062

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

SIGNATURE OF PERSON PREPARING REPORT

SIGNATURE OF GRS OFFICER VERIFYING REPORT: Roland R. Swanson 1st Lt

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

45-791-Army-AG Admin Cen-AFFE-5M

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	UTD	Black	

BIRTHMARKS, SCARS, OR TATTOOS: None Noted

LAUNDRY MARKS: N/A

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

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

No clothing or PE'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 FingerPrint		

LEFT HAND

6 LEFT THUMB	7 LEFT INDEX FINGER	8 LEFT MIDDLE FINGER	9 LEFT RING FINGER	10 LEFT LITTLE FINGER
		Not FingerPrint		

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

REMARKS: The remains is buried at a 45 degree angle. With the head Pointing to the North so that the remains is laying North-South direction

19033

IDENTIFICATION DATA

1. REMAINS OF UNKNOWN				2. DATE OF REPORT
OSMA MEHMET				7 July 1958

3. NAME OF CEMETERY	4. PLOT	5. ROW	6. GRAVE	7. DATE OF DISINTERMENT	7. DATE OF REINTERMENT
United Nations Military Cemetery Tanggok, Korea.	45	9	4063		

PHYSICAL DESCRIPTION

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

12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

1. Seven (7) Cert. of Identity rec'd with remains reads; OSMA MEHMET. PUT. 45692.
2. Six (6) Cert. of death rec'd with remains reads; OSMA MEHMET. PUT. 45692.

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

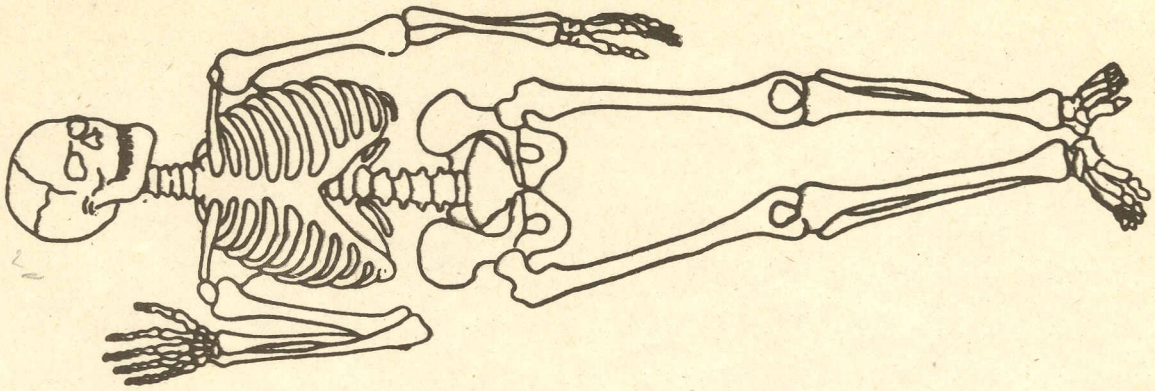
NONE NOTED

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 PE's found on or with remains.

19033

19. BLACK OUT PARTS OF BODY NOT RECOVERED



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 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

QMC FORM 18 MAR 47 1044b

5762—FEC P&PC—9 50—250M