

R E S T R I C T E D

WD GMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)				DATE OF REPORT 9 October 50	
Imprint Identification Tag, if Possible. DO NOT TYPE <div style="border: 1px solid black; border-radius: 50%; width: 100px; height: 100px; margin: 10px auto; display: flex; align-items: center; justify-content: center;"> <div style="text-align: center;"> <p>ARMY</p> <p>1042</p> </div> </div>		Section 1.—IDENTIFICATION.					
		NAME (Last, first, middle initial)			SERIAL NO.		
		GRADE Lieutenant			ORGANIZATION 2nd Regt, 7th Division U. S. Army		BRANCH OF SERVICE U. S. Army
		RACE Korean		RELIGION Unknown		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY North Korea	
PLACE OF DEATH I.G.A. RTO Iusan, Korea		CAUSE OF DEATH G.S.I.			DATE OF DEATH Unknown		
EMERGENCY ADDRESSEE (Name, relationship, and address)							
None							
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none)		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse)					
None		I.D. Form 8-26					
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no)							
Yes							
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME							
None							
Section 2.—BURIAL. If other than in established cemetery, furnish sketch and map coordinates on reverse.							
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY							
United Nations Military Cemetery, Iusan, Korea 1208.4-134.5 ref map Iusan, Korea 1/12500							
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.	
6 October 50	1330	Blanket	None	2	1	156	
WAS THIS A REBURIAL? (Yes or no)	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE			PLOT NO.	ROW NO.	GRAVE NO.	
No				---	---	---	
TYPE OF RELIGIOUS CEREMONY	PERSON CONDUCTING BURIAL RITES		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY I.D. tags inscribed with name and "North Korean Army Regt." buried with body and attached to container.				
None	None						
IDENTIFICATION TAG BURIED WITH BODY (Yes or no)	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no)						
No	No						
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial)			RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.	
None						156	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)			RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.	
None						157	
SIGNATURE OF PERSON PREPARING REPORT			SIGNATURE OF GRS OFFICER VERIFYING REPORT				
None			John W. Adams				
DISTRIBUTION OF REPORT: Signed original for U. S. and allied dead, signed original and one copy for enemy dead, to the Quartermaster General through headquarters GRS Officer. Copies for retention in theater as prescribed by theater commander.							

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