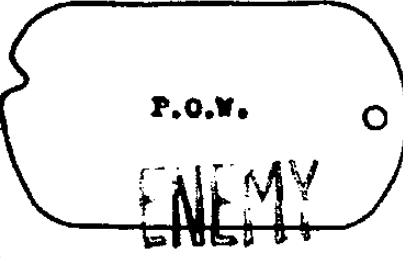


FILE

## REPORT OF INTERMENT

DATE OF REPORT  
14 Nov 59

TYPE OF REPORT <input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> SUPPLEMENTAL (Reason) (ADDITIONAL INFORMATION)						
Imprint Identification Tag If Possible. DO NOT TYPE  	SECTION 1. - IDENTIFICATION.					
	NAME (Last, First, Middle Initial) <b>LEE, MING CHAI</b> SERVICE NUMBER <b>63NR712905</b>					
	GRADE <b>Pvt</b> ORGANIZATION <b>Unk</b> BRANCH OF SERVICE <b>Army</b>					
RACE <b>Mongoloid</b> RELIGION <b>Unk</b> COUNTRY (If not U.S.) <b>Unk</b>	PLACE OF DEATH <b>11th MP Ser Co Disp UNC PW Camp #8 APO 59</b> CAUSE OF DEATH <b>Manual strangulation</b> DATE OF DEATH <b>25 Dec 52</b>					
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) <b>None</b> WERE SUBSTITUTE TAGS PROVIDED? <b>No</b> (2) YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	IF NO TAGS FOUND ON BODY, DESCRIBE ALL MEANS OF IDENTIFICATION (If unidentified fill in section 3 on reverse) <b>BCT signed by: * HERBERT K. COOPER 1/Lt, MC.*</b>  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.  <b>None</b>						
SECTION 2. - BURIAL (If other than in established cemetery, furnish overlay and attach)						
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY <b>Enemy Cemetery #2 Pusan, Korea 1208.7-1349.4 Ref Map Pusan, Korea 1/12500</b>						
DATE OF BURIAL <b>14 Nov 59</b>	HOUR <b>1400</b>	BURIED IN (Shroud, blanket, or name of other) <b>Canvas Square</b>	TYPE OF GRAVE MARKER <b>Reg</b>	PLOT NO. <b>15</b>	ROW NO. <b>9</b>	GRAVE NO. <b>5474</b>
WAS THIS A REBURIAL? <b>XX</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE <b>Enemy Cem. #1 Cheju-do, Korea 4927-3878 M152-9 Ref Map Cheju-do, Korea 1/12500</b>			PLOT NO. <b>1</b>	ROW NO. <b>8</b>	GRAVE NO. <b>86</b>
TYPE OF RELIGIOUS CEREMONY <b>None</b>	PERSON CONDUCTING BURIAL RITES	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINER BURIED WITH BODY <b>One (1) copy of this form buried in burial bottle eighteen (18) inches below grave marker at head of grave.</b>				
IDENTIFICATION TAG BURIED WITH BODY <b>One (1)</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	IDENTIFICATION TAG ATTACHED TO MARKER <b>One (1)</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	REMAINS BURIED IN GRAVE TO LEFT (When viewed from foot of grave); NAME (Last, First, Middle Initial) <b>WANG, TSOO CHANG</b>	GRADE <b>Pvt</b>	SERVICE NUMBER <b>63NR703645</b>	ORGANIZATION <b>Unk</b>	GRAVE NO. <b>5473</b>
REMAINS BURIED IN GRAVE TO RIGHT (When viewed from foot of grave); NAME (Last, First, Middle Initial) <b>NYE, AN WIN</b>	GRADE <b>Pvt</b>	SERVICE NUMBER <b>63NR703093</b>	ORGANIZATION <b>Unk</b>	GRAVE NO. <b>5475</b>		
SIGNATURE OF PERSON PREPARING REPORT <b>CHARLES M. ZIMMERMAN EPC, (MC)</b>			SIGNATURE OF GRS OFFICER VERIFYING REPORT <b>FREDERICK H. NICKLY Jr 2/Lt, MC</b>			

DD

FORM

551

REPLACES FORM 100, 1 APR 54, REV. 10 FEB 58, WHICH IS OBSOLETE.

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 <b>Not 505"</b>	WEIGHT <b>Not 135</b>	COLOR OF EYES <b>UTD</b>	COLOR OF HAIR <b>Black</b>	WHERE BODY WAS FOUND ( <i>Grid Coordinates</i> )
BIRTHMARKS, SCARS, OR TATTOOS <b>None Noted</b>			LAUNDRY MARKS <b>None Noted</b>	
WEAPON(S) WITH SERIAL NUMBER(S)				
OTHER IDENTIFICATION CLUES ( <i>Including other remains recovered or associated with this remains</i> ).				
SECTION 4. - FINGERPRINTING - FINGERPRINTS OF ALL REMAINS MUST BE TAKEN				
IMPRINT ALL FINGERS AND THUMBS ( <i>or as many as possible</i> ) 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 <u>MUST</u> 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 ( <i>For FBI use only</i> )			REMARKS	