


RESTRICTED

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 16 Jan 51	
Imprint Identification Tag if Possible. DO NOT TYPE		Section 1.—IDENTIFICATION.				SERIAL NO.	
		NAME (Last, first, middle initial) Yun Myung Hyon		ORGANIZATION N. K. Army		BRANCH OF SERVICE N. K. Army	
		GRADE Capt.		RACE Korean		RELIGION None	
		PLACE OF DEATH 1st Hd. Hosp. Imjin Korea		CAUSE OF DEATH Tuberculosis		DATE OF DEATH 13 Jan 51	
EMERGENCY ADDRESSEE (Name, relationship, and address) None							
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) None		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) Certificate of death signed by, Hyon Ik Sik, Korean Doctor.					
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 Same.							
DATE OF BURIAL 15 Jan 51	HOUR 16:30	BURIED IN (Shroud, blanket, or name of other) Blanket	TYPE OF GRAVE MARKER Simple	PLOT NO. 7	ROW NO. 6	GRAVE NO. 1796	
WAS THIS A REBURIAL? (Yes or no) No	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY AND LOCATION OF GRAVE C			PLOT NO. x	ROW NO. a	GRAVE NO. a	
TYPE OF RELIGIOUS CEREMONY None	PERSON CONDUCTING BURIAL RITES None		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY Same.				
IDENTIFICATION TAG BURIED WITH BODY (Yes or no) No	IDENTIFICATION TAG ATTACHED TO MARKER (Yes or no) No						
BODY BURIED ON DECEASED LEFT, NAME (Last, first, middle initial) Tung Ki Soo			RANK Capt.	SERIAL NO. None	ORGANIZATION N. K. Army	GRAVE NO. 1795	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) Lim Myong			RANK Capt.	SERIAL NO. None	ORGANIZATION N. K. Army	GRAVE NO. 1797	
SIGNATURE OF PERSON PREPARING REPORT None				SIGNATURE OF GRS OFFICER VERIFYING REPORT None			
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.							

RESTRICTED

6253—FEC P&PC—9 50—300M