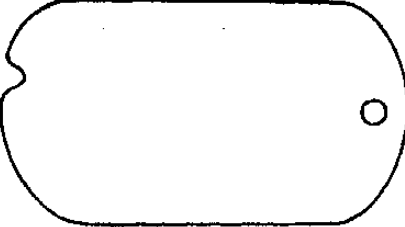



R E S T R I C T E D

WD OMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		REPORT OF INTERMENT (AR 30-1810 and AR 30-1815)				DATE OF REPORT 20 Jan 51		
Imprint Identification Tag, if Possible. DO NOT TYPE 	Section 1.—IDENTIFICATION.							
	NAME (Last, first, middle initial) K im Soon Hyup				SERIAL NO. Unk			
	GRADE Pvt	ORGANIZATION N K Army		BRANCH OF SERVICE N K Army				
	RACE Korean	RELIGION Unk	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY N Korea					
PLACE OF DEATH 14 Fld Hosp Pusan Korea		CAUSE OF DEATH Bronchitis			DATE OF DEATH 18 Jan 51			
EMERGENCY ADDRESSEE (Name, relationship, and address) Unk								
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 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 19 Jan 51	HOUR 1430	BURIED IN (Shroud, blanket, or name of other) Blanket		TYPE OF GRAVE MARKER Temp	PLOT NO. 7	ROW NO. 17	GRAVE NO. 2075	
WAS THIS A REBURIAL? (Yes or no) 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 None	PERSON CONDUCTING BURIAL RITES		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) Yoo Il Joon			RANK Pvt	SERIAL NO. Unk	ORGANIZATION N K Army	GRAVE NO. 2074		
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) Jang Heng Chan			RANK Pvt	SERIAL NO. Unk	ORGANIZATION N K Army	GRAVE NO. 2076		
SIGNATURE OF PERSON PREPARING REPORT LaFue			SIGNATURE OF GRS OFFICER VERIFYING REPORT  Nolan					
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.								

R E S T R I C T E D

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