



R E S T R I C T E D

WD GMC FORM 1042 (Rev. 1 Apr. 1945) (Supersedes GRS Form 1)		<b>REPORT OF INTERMENT</b> (AR 30-1810 and AR 30-1815)				DATE OF REPORT 27 Feb 51			
Imprint Identification Tag, If Possible. DO NOT TYPE 		<b>Section 1.—IDENTIFICATION.</b>							
		NAME (Last, first, middle initial)			SERIAL NO.				
		Won Yong Sam			Unk				
		GRADE	ORGANIZATION		BRANCH OF SERVICE				
		Pvt	Nk Army		Nk Army				
		RACE	RELIGION	IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY					
		Korean	Unk	N Korea					
PLACE OF DEATH		CAUSE OF DEATH			DATE OF DEATH				
14th Fld Hosp Pusan Korea		Tuberculosis, Pulmonary			25 Feb 51				
EMERGENCY ADDRESSEE (Name, relationship, and address)									
Unk									
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		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									
<b>Section 2.—BURIAL.</b> If other than in established cemetery, furnish sketch and map coordinates on reverse.									
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY									
Same									
DATE OF BURIAL	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.			
26 Feb 51	1600	Blanket	Temp	9	13	3051			
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						
None			Same						
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.			
Jeon Chang Rin			Pvt	Unk	NK A rmy	3050			
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)			RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.			
Cha Byung Yul			Pvt	Unk	Nk A rmy	3052			
SIGNATURE OF PERSON PREPARING REPORT				SIGNATURE OF GRS OFFICER VERIFYING REPORT					
Larue				 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.									

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9253—REC P&PC—9, 50—300M