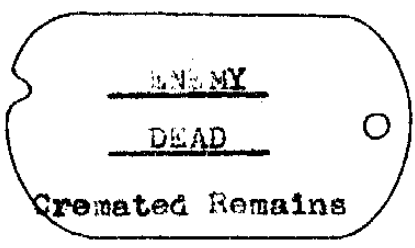


RESTRICTED

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 30 August 1950	
Imprint Identification Tag, if Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.			
NAME (Last, first, middle initial) Shin, Yoon Ho		SERIAL NO. POW 0808		BRANCH OF SERVICE North Korea	
GRADE Pvt.		ORGANIZATION 1st Division		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY North Korea	
RACE Korean		RELIGION Unknown		DATE OF DEATH 23 August 1950	
PLACE OF DEATH 15th Army Hosp. Korea		CAUSE OF DEATH Bullet wounds		DATE OF DEATH 23 August 1950	
EMERGENCY ADDRESSEE (Name, relationship, and address)					
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) Unknown		IF NO TAGS FOUND ON BODY, DESCRIBE MEANS OF IDENTIFICATION (If unidentified, fill in section 3 on reverse) Death certificate signed by: Choi Sung Koo, Surgeon, 15th Army Hospital. (Certificate attached)			
WERE SUBSTITUTE TAGS PROVIDED? (Yes or no) None		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 ref. map-fusan-Korea 1/12500 U. S. Army Cemetery, Pusan, Korea (Enemy plot) Coord. 1208.4-1549.5					
DATE OF BURIAL 30 August 1950	HOUR 1445	BURIED IN (Shroud, blanket, or name of other) Wooden box	TYPE OF GRAVE MARKER Comp. enemy	PLOT NO. 1	ROW NO. 7
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. -
TYPE OF RELIGIOUS CEREMONY None	PERSON CONDUCTING BURIAL RITES None	IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINERS BURIED WITH BODY I.D. tag inscribed with name and "North Korean enemy dead" buried with body and attached to marker.			
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) None	RANK None	SERIAL NO. None	ORGANIZATION None
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial) None	RANK None	SERIAL NO. None	ORGANIZATION None	GRAVE NO. 6	GRAVE NO. 8
SIGNATURE OF PERSON PREPARING REPORT [Signature]			SIGNATURE OF GRS OFFICER VERIFYING REPORT [Signature]		
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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4058 (REV. 12-15-50) 30M