


R E S T R I C T E D

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	
Imprint Identification Tag, if Possible. DO NOT TYPE 		Section 1.—IDENTIFICATION.				22 Jan. 51	
		NAME (Last, first, middle initial)				SERIAL NO.	
		GRADE		ORGANIZATION		BRANCH OF SERVICE	
		RACE		RELIGION		IF OTHER THAN U. S. DEAD, GIVE NAME OF COUNTRY	
		PLACE OF DEATH		CAUSE OF DEATH		DATE OF DEATH	
3rd STA Hosp. Ousean Kilauea		Peritonitis, generalized, due to perforation of bowel.		22 Jan 51			
EMERGENCY ADDRESSEE (Name, relationship, and address)							
none							
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		U.S. AGO Form No. 8-26 U.S. AGO Form 8-219					
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	HOUR	BURIED IN (Shroud, blanket, or name of other)	TYPE OF GRAVE MARKER	PLOT NO.	ROW NO.	GRAVE NO.	
22 Jan 51	1530	Blanket	Temp.	7	20	2162	
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.	
Unknown X-170			Sgt	2162	N. K. Army	2161	
BODY BURIED ON DECEASED RIGHT, NAME (Last, first, middle initial)			RANK	SERIAL NO.	ORGANIZATION	GRAVE NO.	
Lee Yong DAL			Pvt	UNK	NK Army	2163	
SIGNATURE OF PERSON PREPARING REPORT			SIGNATURE OF GRS OFFICER VERIFYING REPORT				
John			John 716 Co.				
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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