

16540-5

ALLIED

REPORT OF INTERMENT				DATE OF REPORT 13 April 54		
TYPE OF REPORT ☐ INITIAL ☒ SUPPLEMENTAL (Reason) (ADDITIONAL INFORMATION)						
Imprint Identification Tag If Possible. DO NOT TYPE GREAT BRITAIN ID tags unable to imprint		SECTION 1. - IDENTIFICATION.				
		NAME (Last, First, Middle Initial) BAKER D.E.		SERVICE NUMBER 22600606		
		GRADE Pte	ORGANIZATION 28th British Inf Brigade 1st Commonwealth Div		BRANCH OF SERVICE Army	
		RACE Caucasian	RELIGION Catholic	COUNTRY (If not U.S.) Great Britain		
PLACE OF DEATH CT 134-163 Korea		CAUSE OF DEATH Undetermined		DATE OF DEATH Est Nov 52 22		
IDENTIFICATION TAGS FOUND ON BODY (1, 2, or none) Two		IF NO TAGS FOUND ON BODY, DESCRIBE ALL MEANS OF IDENTIFICATION (If unidentified fill in section 3 on reverse)				
WERE SUBSTITUTE TAGS PROVIDED? One ☒ YES 1 ☐ NO GRS		COMPLETED TOOTH CHART WILL BE ATTACHED HERETO.				
LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME. IF LETTERS FOUND, INCLUDE NAME OF ADDRESSEE, AND WRITER. GIVE OWNER OF WALLET, ETC. Previously reported						
SECTION 2. - BURIAL (If other than in established cemetery, furnish overlay and attach)						
NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY UNMC TANGGOK, KOREA EP 089868						
DATE OF BURIAL 13 April 54	HOUR 0900	BURIED IN (Shroud, blanket, or name of other) Canvas Square	TYPE OF GRAVE MARKER Cross	PLOT NO. 70	ROW NO. 4	GRAVE NO. 7779
WAS THIS A REBURIAL? ☐ YES ☒ NO	IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE. Remains formerly stored in Mausoleum Zone Hqs ACRSG 8204th AU APO 3			PLOT NO.	ROW NO.	GRAVE NO.
TYPE OF RELIGIOUS CEREMONY Catholic	PERSON CONDUCTING BURIAL RITES FRANK YASHKAS 1st Lt. CF		IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICATION DATA AND CONTAINER BURIED WITH BODY One (1) copy of this form buried in burial bottle eighteen (18) inches below grave marker at head of grave.			
IDENTIFICATION TAG BURIED WITH BODY Two ☒ YES 2 ☐ NO	IDENTIFICATION TAG ATTACHED TO MARKER One ☒ YES 1 ☐ NO					
REMAINS BURIED IN GRAVE TO LEFT (When viewed from foot of grave), NAME (Last, First, Middle Initial) PRENTICE M.			GRADE FUS	SERVICE NUMBER 22569814	ORGANIZATION 1st Royal Fusiliers	GRAVE NO. 7778
REMAINS BURIED IN GRAVE TO RIGHT (When viewed from foot of grave), NAME (Last, First, Middle Initial) GODFREY R.			GRADE L/Cpl	SERVICE NUMBER 22539349	ORGANIZATION 1st Bn Royal Fus	GRAVE NO. 7780
SIGNATURE OF PERSON PREPARING REPORT James L. Wilkinson JAMES L. WILKINSON CPL QMC			SIGNATURE OF GRS OFFICER VERIFYING REPORT Robert S. Robbins ROBERT S. ROBBINS CAPTAIN QMC			

SECTION 3. - UNIDENTIFIED REMAINS

INSTRUCTIONS: Great care will be taken to record the most minute clues for the future identification of remains. Fill in anatomical characteristics below, and any other clues under "other" such as shoe size, Social Security number; position of body in airplanes, vehicles, and tanks; and serial number of airplanes, vehicles and tanks.

HEIGHT Utd	WEIGHT Utd	COLOR OF EYES Utd	COLOR OF HAIR Utd	WHERE BODY WAS FOUND (Grid Coordinates) CT 134 163 Korea
BIRTHMARKS, SCARS, OR TATTOOS None noted				LAUNDRY MARKS None
WEAPON(S) WITH SERIAL NUMBER(S)				

OTHER IDENTIFICATION CLUES (Including other remains recovered or associated with this remains).

Previously reported

REMARKS

- Two ID tags found on foot of remains bearing last name, Sn, and religion
- Remains rec from Zone, Hqs A GRSG 8204th AU APO 3
- First and second Initial, rank, org, dat and place of death taken from Allied case report # 318.

SECTION 4. - FINGERPRINTING - FINGERPRINTS OF ALL REMAINS MUST BE TAKEN

IMPRINT ALL FINGERS AND THUMBS (or as many as possible) IN THE PROPER SEQUENCE. Fingers should be clean, dry and not over-inked. Missing fingers should be noted in the proper individual finger blocks. Impressions MUST be recorded in the proper order.

RIGHT HAND

1 RIGHT THUMB	2 RIGHT INDEX FINGER	3 RIGHT MIDDLE FINGER	4 RIGHT RING FINGER	5 RIGHT LITTLE FINGER
NOT FINGERPRINTED				

LEFT HAND

6 LEFT THUMB	7 LEFT INDEX FINGER	8 LEFT MIDDLE FINGER	9 LEFT RING FINGER	10 LEFT LITTLE FINGER
NOT FINGERPRINTED				

DO NOT WRITE IN THIS SPACE (For FBI use only)

REMARKS

See above

ALLIED

16540-5

REPORT OF INTERMENT

DATE OF REPORT

TYPE OF REPORT

☐ INITIAL☒ SUPPLEMENTAL (Reason)

ADDITIONAL INFORMATION

Imprint Identification Tag If Possible.
DO NOT TYPE

SECTION 1. - IDENTIFICATION.

NAME (Last, First, Middle Initial)

BAKER, D.E.

SERVICE NUMBER

22600606

GRADE

PTE

ORGANIZATION 28TH BRITISH
INF BRIGADE 1ST
COMMONWEALTH DIV.

BRANCH OF SERVICE

ARMY

RACE

CAUCASIAN

RELIGION

UNKN

COUNTRY (If not U.S.)

GREAT
BRITAIN

PLACE OF DEATH

CT 134 163 KOREA

CAUSE OF DEATH

UNDETERMINED

DATE OF DEATH

EST. NOV. 1952

IDENTIFICATION TAGS FOUND ON
BODY (1, 2, or none)

TWO (2)

IF NO TAGS FOUND ON BODY, DESCRIBE ALL MEANS OF IDENTIFICATION (If unidentified
fill in section 3 on reverse)

WERE SUBSTITUTE TAGS PROVIDED?

☒ YES☐ NO

ONE (1) GRS.

COMPLETED TOOTH CHART WILL BE ATTACHED HERETO.

LIST PERSONAL EFFECTS FOUND ON BODY AND DISPOSITION OF SAME. IF LETTERS FOUND, INCLUDE NAME OF ADDRESSEE
AND WRITER. GIVE OWNER OF WALLET, ETC.

PREVIOUSLY REPORTED

SECTION 2. - BURIAL (If other than in established cemetery, furnish overlay and attach)

NAME, NUMBER, COORDINATES, AND LOCATION OF CEMETERY

DATE OF BURIAL

13 APRIL 54

HOUR

0900

BURIED IN (Shroud, blanket, or name
of other)

CANVAS SQUARE

TYPE OF GRAVE
MARKER

CROSS

PLOT NO.

70

ROW NO.

4

GRAVE NO.

7779

WAS THIS A REBURIAL?

☐ YES☒ NO

IF A REBURIAL, INDICATE NAME, NUMBER, COORDINATES OF PREVIOUS CEMETERY, AND LOCATION OF GRAVE.

REMAINS FORMERLY STORED IN MAU-
SOLEUM, ZONE HQ AGRSC 8204 AU ARJ

PLOT NO.

ROW NO.

GRAVE NO.

TYPE OF RELIGIOUS
CEREMONY

CATHOLIC

PERSON CONDUCTING BURIAL RITES

FRANK YASHKAS
1ST LT. C.F.IF IDENTIFICATION TAGS NOT USED, DESCRIBE IDENTIFICA-
TION DATA AND CONTAINER BURIED WITH BODY GIVE (1)
COPY OF THIS FORM BURIED IN
BURIAL BOTTLE EIGHTEEN (18)
INCHES BELOW GRAVE MARKER
AT HEAD OF GRAVEIDENTIFICATION TAG BURIED
WITH BODY TWO (2)☒ YES☐ NOIDENTIFICATION TAG ATTACHED
TO MARKER ONE (1)☒ YES☐ NOREMAINS BURIED IN GRAVE TO LEFT (When viewed from foot
of grave), NAME (Last, First, Middle Initial)

PRENTICE, M.

GRADE

FUS

SERVICE NUMBER

22560814

ORGANIZATION

1ST BN
ROYAL
FUSILIER

GRAVE NO.

7778

REMAINS BURIED IN GRAVE TO RIGHT (When viewed from foot
of grave), NAME (Last, First, Middle Initial)

GODFREY, R.

GRADE

4 CPL

SERVICE NUMBER

22537349

ORGANIZATION

1ST BN
ROYAL
FUSILIER

GRAVE NO.

7780

SIGNATURE OF PERSON PREPARING REPORT

James L. Wilkinson

SIGNATURE OF GRS OFFICER VERIFYING REPORT

James L. Wilkinson

DD FORM 551

REPLACES QMC FORM 1042, REV.
1 APRIL 1946, WHICH IS OBSOLETE.

BAKER D.E. 22600606

37230-Army-AG Admin Cen-FEC-2/53-61M

SECTION 3. - UNIDENTIFIED REMAINS

INSTRUCTIONS: Great care will be taken to record the most minute clues for the future identification of remains. Fill in anatomical characteristics below, and any other clues under "other" such as shoe size, Social Security number; position of body in airplanes, vehicles, and tanks; and serial number of airplanes, vehicles and tanks.

HEIGHT LTD	WEIGHT LTD	COLOR OF EYES LTD	COLOR OF HAIR LTD	WHERE BODY WAS FOUND (Grid Coordinates) CT 134 163 KOREA
BIRTHMARKS, SCARS, OR TATTOOS NONE NOTED				LAUNDRY MARKS NONE
WEAPON(S) WITH SERIAL NUMBER(S)				
OTHER IDENTIFICATION CLUES (Including other remains recovered or associated with this remains). PREVIOUSLY REPORTED				

SECTION 4. - FINGERPRINTING - FINGERPRINTS OF ALL REMAINS MUST BE TAKEN

IMPRINT ALL FINGERS AND THUMBS (or as many as possible) IN THE PROPER SEQUENCE. Fingers should be clean, dry and not over-inked. Missing fingers should be noted in the proper individual finger blocks. Impressions MUST be recorded in the proper order.

RIGHT HAND				
1 RIGHT THUMB	2 RIGHT INDEX FINGER	3 RIGHT MIDDLE FINGER	4 RIGHT RING FINGER	5 RIGHT LITTLE FINGER
NO FINGERPRINTS TAKEN				
LEFT HAND				
6 LEFT THUMB	7 LEFT INDEX FINGER	8 LEFT MIDDLE FINGER	9 LEFT RING FINGER	10 LEFT LITTLE FINGER
NO FINGERPRINTS TAKEN				
DO NOT WRITE IN THIS SPACE (For FBI use only)			REMARKS	
1) TWO IDENTICALS FOUND ON FOOT OF REMAINS BEARING: LAST NAME S.N. AND RELIGION				
2) REMAINS REC FROM RONE HQ AGASC 3204TH AG AGO 3				
3) FIRST INITIAL, MIDDLE INITIAL, RANK, ORG, DATE OF DEATH AND POB TAKEN FROM ALLIED CASE REPORT # 318.				

ALLIED

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IDENTIFICATION DATA

1. REMAINS OF UNKNOWN BAKER D.E.				2. DATE OF REPORT 13 April 54	
3. NAME OF CEMETERY UNMC TANGGOK, KOREA		4. PLOT 70	5. ROW 4	6. GRAVE 7779	7. DATE OF DISINTERMENT. N/A REINTERMENT N/A

PHYSICAL DESCRIPTION

8. ESTIMATED WEIGHT Utd	9. ESTIMATED HEIGHT Utd	10. COLOR OF HAIR Utd	11. RACE Caucasian
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12. GIVE DESCRIPTION OF ANY OFFICIAL IDENTIFICATION FOUND WITH REMAINS

- Two (2) ID tags found w/remains reads: **BAKER 22600606 RC."**
- One (1) copy of GIU case report # 318 rec #/remains reads **"BAKER D.E. PTE 22600606."**

13. GIVE DESCRIPTION OF TATTOOS OR SCARS ON BODY AND OR SUCH INFORMATION OBTAINED FROM OTHER SOURCES

None noted

14. WAS BODY BURNED ? ☐ YES ☒ NO	TO WHAT EXTENT ?
15. WAS BODY MANGLED ? ☐ YES ☒ NO	TO WHAT EXTENT ?

16. DESCRIBE EVIDENCE OF HEALED FRACTURES AND BONE MALFORMATIONS

None noted

17. LIST EVERY ITEM OF CLOTHING, EQUIPMENT AND PERSONAL EFFECTS FOUND, SHOWING THE TYPE, COLOR, SIZE, MARKINGS, SERVICE, ETC. (If laundry marks are indistinct such notation should be made and specimen forwarded through channels for examination when facilities are not available in the area)

Previously reported

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ALLIED

IDENTIFICATION DENTAL CHART

DATE

13 April 54

NAME (Last, First, Middle Initial)

GRADE

SERVICE NUMBER

UNIT

BAKER D.E.

ORGANIZATION

CAUSE OF DEATH

DATE OF DEATH

PLACE OF DEATH

PLACE OF BURIAL

PLOT

ROW

GRAVE

See DD form 551

See DD form 551

See DD form 551

Est Nov 52

70

4

7779

RIGHT	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	LEFT

1. O-AM.
2. DOL-AM.; F-AM.
3. MOD. GOLD FILL.
4. F-GOLD FILL.; ML-AM.

5. MO-AM.
6. ML-GOLD FILL.
7. 3/4 GOLD CR.
8. D-PORC. FILL.

9. PORC. CR.
10. F-PORC. FILL.; L-AM.
11. MF-PORC. FILL.
12. Px-POSTHUMOUSLY MISSING

13. GOLD CR.
14. MISSING
15. MO-AM.; L-AM.
16. MODL-AM.

MARKING ABBREVIATIONS:

F - Facial
L - LingualO - Occlusal
M - MesialD - Distal
I - IncisalAm - Amalgam
CR - CrownFILL - Filling
PORC - PorcelainBACK - Backing
FAC - Facing

CARIES																	CARIES
RESTORATIONS																	RESTORATIONS
UPPER RIGHT	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	UPPER LEFT
	SEE REMARKS																
LOWER RIGHT																	LOWER LEFT
RESTORATIONS																	RESTORATIONS
CARIES																	CARIES

SIGNATURE OF OFFICER OR OTHER PERSON WHO PREPARED DENTAL CHART

James L. Wilkinson

VERIFIED BY GRS OFFICER

ROBERT S. ROBBINS, CAPTAIN OMC

DD FORM 569

1 SEP 51

REPLACES QMC FORM 1045, 1 APR 1947, WHICH IS OBSOLETE.

BAKER D.E. 22600606 SEE REVERSE SIDE

DENTURES (Plates): DESCRIBE DENTURES INCLUDING NATURAL TEETH REPLACED AND TEETH WHICH HAVE RETAINING CLASPS. (For example: Lower acrylic partial denture with lingual bar, replacing teeth Nos. 17, 18, 19, 30, 31, 32. Clasps on natural teeth Nos. 20 and 29.) SHOW ANY NUMBERS OR LETTERS APPEARING ON DENTURE.

THE FOLLOWING CONDITIONS WILL BE CHECKED IN THE SPACE BELOW: (Describe in detail under remarks)

MOTTLED ENAMEL	UNERUPTED TEETH	RETAINED DECIDUOUS TEETH
ENAMEL HYPOPLASIA	MALOCCLUSION	ABNORMAL INTERDENTAL SPACES
EROSION	SUPERNUMERARY TEETH	IRREGULARITY OF ALIGNMENT
ABRASION	FRACTURES OF ENAMEL	UNUSUAL RESTORATIONS
ROTATION	FRACTURES OF TEETH	UNUSUAL APPLIANCES

REMARKS (If no abnormalities are found make notation to that effect)

L. No teeth found

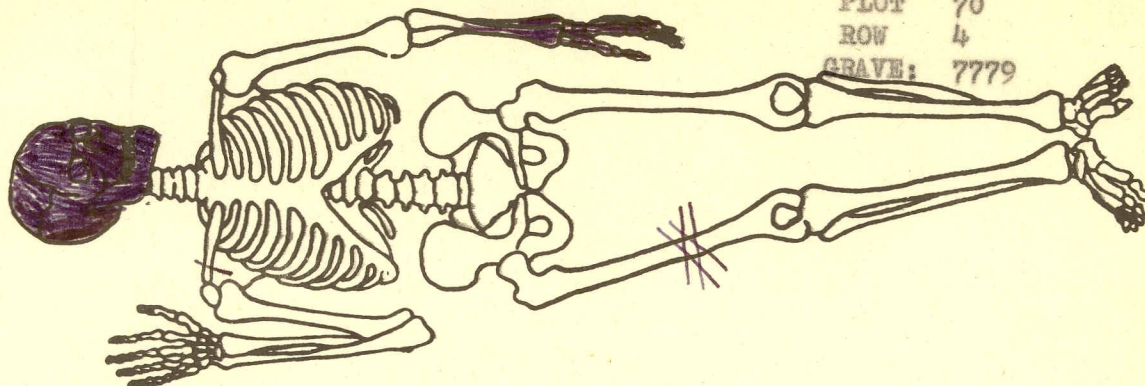
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19. BLACK-OUT PARTS OF BODY NOT RECOVERED

ALLIED

BAKER D.E. PTE 22600606
UNMC TANGGOK, KOREA

PLOT 70
ROW 4
GRAVE: 7779



20.

MASS BURIAL CERTIFICATE (IF APPLICABLE)

(Wherein segregation in whole or parts is impossible)

I Certify that the Group Remains Consist of Parts of _____ Decedents Based on the Presence of One or More of the Following Anatomical Parts: _____
NUMBER

SIGNATURE OF MEDICAL OFFICER

21. REMARKS AND ADDITIONAL INFORMATION

I Certify that I Have Personally Viewed the Remains of Deceased and that All Resulting Information Has Been Recorded to the Best of My Knowledge

TYPED NAME, GRADE, ARM OR SERVICE, AND ORGANIZATION

JOHN A. DORAN PFC
11th QUARTERMASTER CO. (GRREG)

SIGNATURE

John A. Doran PFC

ALLIED

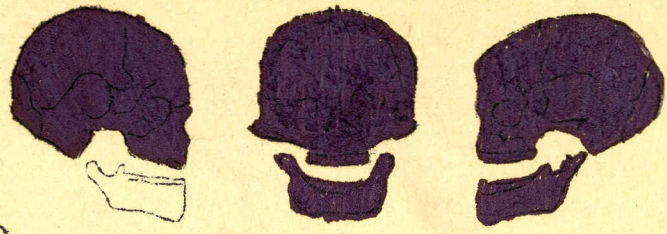
Name or Unknown No.

SKELETAL CHART
ACRSG

(Black out parts of body not received)

RIGHT

LEFT



SKULL _____ Ins.

HUMERUS _____ cm

HUMERUS _____ cm

ULNA _____ cm

ULNA _____ cm

RADIUS _____ cm

RADIUS _____ cm

FEMUR _____ cm

FEMUR _____ cm

TIBIA _____ cm

TIBIA _____ cm

FIBULA _____ cm

FIBULA _____ cm

Est Age _____ yrs

Est Height _____

Condition of Remains:

BAKER D.E

22600606