

293 ORRICO, MIKE J. 36308104 P.F.C. EUROPEAN AREA C.E. (ILLS) 45 mc

*210
str*

at

*293
Orrico, Mike J.
36308104*

at

293

ON MIKE J ORRICO

36308104 RACE WHITE HEIGHT 64 INS ALSO SHOWN 66 INS WEIGHT 130
LBS FRAME MEDIUM EYES BROWN HAIR BLACK COMPLEXION DARK BORN 29 APR 20

TRUCK EMPERS REC BRAGOSLM 14 MAR 50

6

PAGE TWO UWYGP 6

SHOE SIZE 7E DENTAL CHART AT INDCTN 9 DEC 41 TEETH MISSING R 8 14 L 1/
RESTORABLE CARIOUS TEETH L 5 2 FORMS 79 BEING SENT

REGISTER OF DENTAL PATIENTS AT

Camp Polk, La.
Orrico, Mike J.
33rd. Arm'd Engts.
Pvt.
"A"W
Ill.
8/12
23

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.	(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS	(12) RESULTS AND REMARKS
Car. L-5 MO	August 1942 Examination 3 AGNO# A 3	(S-I) Cl-I EIB Cl-IV H M

MAJOR DENTAL CORPS
CHIEF CLINICIAN
Dental Corps, U. S. A.

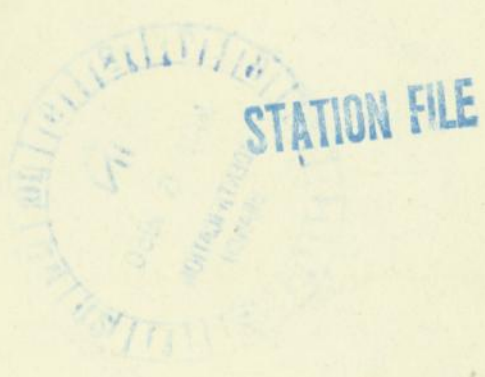
*NA
file 21 Mar
Coburn
24 Feb*

RRE Form #39
13 Jul 48

Attached hereto correspondence and/or other identifying media of possible archival value, pertaining to:

ORRICO	Mike	J	Pfc	36308104
(Last Name)	(First Name)	(Initial)	(Rank)	(ASN) ✓

RePatricated to the United States: _____ 26 APR 49



Incl #

*File 11-16-49
J. Sparks
sheet, see*

TGRS / TSFET
Form No. 10
27-8-45

REPORT OF INVESTIGATION AREA SEARCHING

To be completely filled out and attached to each copy of GR Form I,
„Report of Burial“ when disinterment is accomplished.

- 3601
1. Was investigation preceded by Advance Publicity Yes
(if Special Investigation, so indicate) "Special Investigation"
 2. ORRIGO, MIKE J. P.F.C. 36308104 33 Armd. Eng. Bn.
(Full name of deceased) (Rank) (ASN) (Organization)
 3. State: Means of identification, i. e. identification, tags attached to marker, inscription on grave marker, cemetery records, townhall records, etc. and Source of Information, i. e. identification tags, identification cards, identification bracelet, leather name plate on flying jacket, clothing marks etc.
1-I.D.Tag found on body.
Rank and unit obtained from case No.100, submitted our
Company by group.
 4. Give exact location of isolated grave, furnishing coordinates and letter prefix, map sheet, scale and series used; also name of nearest town: Budesheim, Ger. (wL-1580)
Map Ref. Ger. 1/250.000 Köln-K-51
NOTE: ATTACH OVERLAY SHOWING EXACT LOCATION OF ISOLATED GRAVE TYING LOCATION IN WITH PERMANENT LANDMARKS.
 5. Full name of cemetery (include plot, row and grave if organized cemetery) Budesheim Cemetery "New Cemetery" Row 2, grave 6.)
 6. Approximate or established date of death (state which and give basis for date selected)
Dec. 1944. Given by Pastor Alois Herrmann
 7. Approximate or established date of burial (give basis for date established)
Dec. 1944. Given by Pastor Alois Herrmann.
 8. Manner in which grave was marked, show information contained on the marker
(No markings)
 9. List personal effects found in possession of civilian and custodial personnel now retaining, furnishing name and address of individuals concerned
(None)
 10. Furnish information obtained concerning place, and particulars surrounding death and burial; give the names and addresses of all persons furnishing such information (contact local Mayor, priest, police, hospitals, cemetery sextons or caretakers, those responsible for burial and others possessing important information) The deceased died in the hospital of Gerolstein, Ger. Buried by Russian P.O.W. in the New Cemetery of Gerolstien.
Informant: Pastor Alois Herrmann.
 11. Give name and address of person who can guide disintering team to burial location
Pastor Alois Herrmann, Budesheim, Ger.

12. Is this atrocity case: NO Is there evidence that it may be:

If answer is yes, has responsible War Crimes representative been notified

13. Names and addresses of persons committing the atrocity or the military unit of which these persons were members

(Not applicable)

14. If unidentified and a crew member of a plane or vehicle, indicate names of any other known crew members and state whether buried at this location or a survivor

(Not applicable)

15. If unidentified, supply any of the following information determinable

a. Crew position in plane or vehicle

b. Plane or vehicle serial number Type

c. Installed weapons

Serial Number	Calibre & Mfgr.	Serial Number	Calibre & Mfgr.
.....
.....
.....

d. Engine serial number Type

William H. Barnett

Signature of Investigating Officer

WILLIAM H. BARNETT

2nd Lt. O-2018275

6890 Q.M.G.R.Co.

Rank

ASN

Disinterment approved by, (HQ Authorizing Exhumation) C.O. 6890 G.R.Co.

Disinterment and *reburial/burial made by

Date of *burial/reburial 23 Feb. 48

Place of *burial/reburial U. S Military Cemetery Hamm, Lux.

Plot EE Row 8 Grave 194

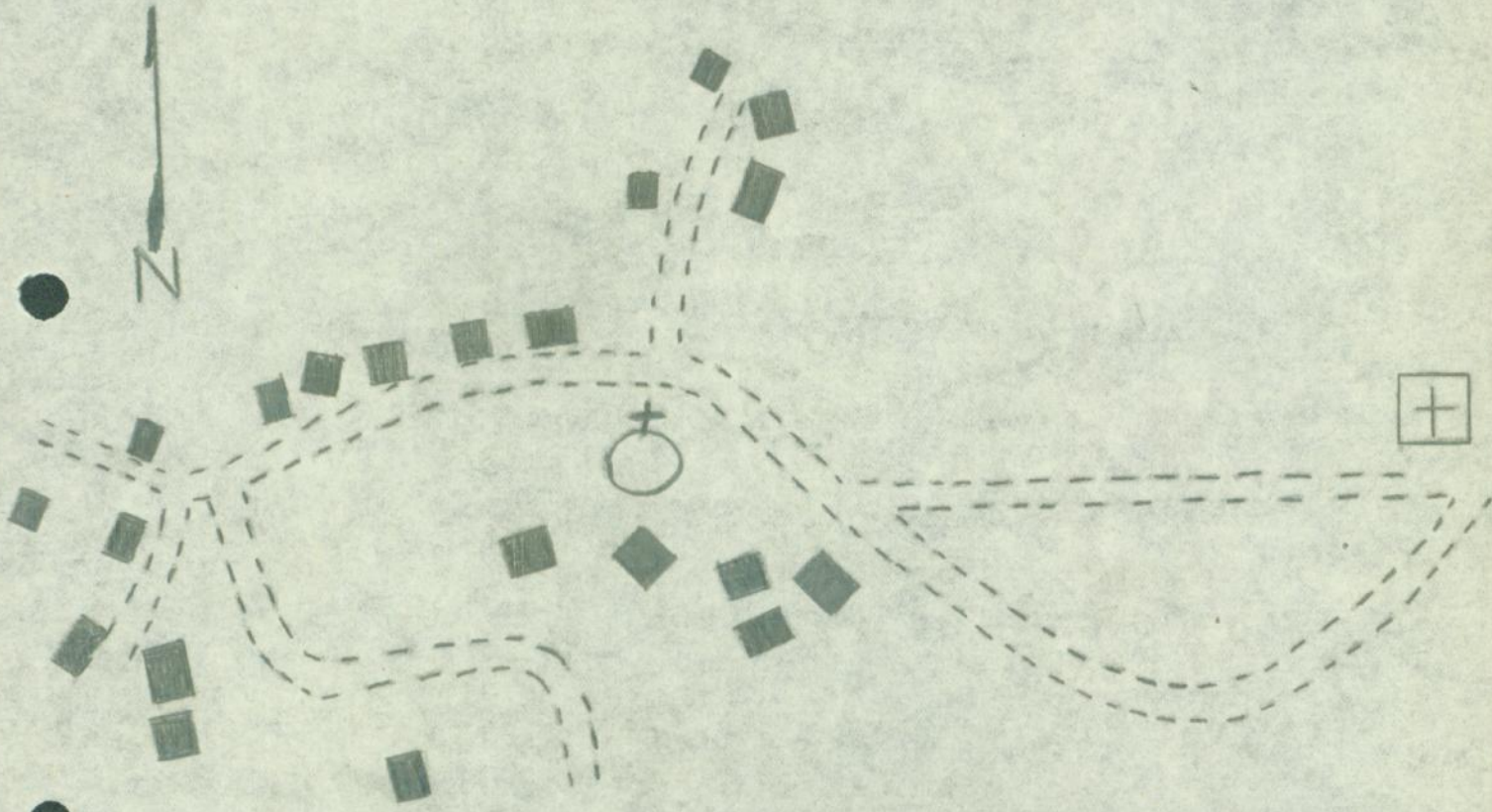
NOTE: Additional particulars regarding investigation will be placed on additional sheet.

* Cross out word not applicable.

3601

SKETCH SHOWING GRAVE OF J. ORRICO, THOMAS F. GRIMES
BUDESHEIM, GERMANY

Map: Germany 1/250,000
Sheet: Koln K-51
Coord: wL-1580
Location: Budesheim, Germany
Sketched by: Pfc. Friswold
6890 GRQMCo.
Date: 21 Feb. 1946
Not to scale



Budesheim CEM.



MIKE J. ORRICO



REV. 18A

WESTERN
UNION

RECEIPT OF REMAINS

DELIVER AND REPORT
ANY CHARGES

AGR DIV., CHICAGO QM DEPOT
DISTRIBUTION CENTER 1819 W. PERSHING RD., CHICAGO 9, ILL. ROUTINE

DAY LETTER

REMAINS CONSIGNED TO:

THOMAS J. AHERN & BROTHERS
3246 WEST JACKSON BOULEVARD
CHICAGO, ILLINOIS

293

REMAINS OF THE LATE PFC. MIKE J. ORRICO, SN. 36308104
WILL BE DELIVERED TO YOU ON WEDNESDAY 25 MAY 1949 AT APPROXIMATELY
9:00 AM ACCOMPANIED BY MILITARY ESCORT. REQUEST YOU IMMEDIATELY
INFORM THE NEXT OF KIN AND THAT YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS
UPON DELIVERY. REFER TO CONTROL NUMBER 22487

THOS. O. CALL
MAJOR QMC

FILE

29 JUN 1949

REPATRIATION
BRANCH

I, the undersigned, do hereby acknowledge receipt of the remains of the above-named deceased
this 25 day of May, 1949
(Day) (Month)

W. Szymczak Cpl.
(Witness (Escort))

Thomas J. Ahern
(Consignee)

DMS

DISINTERMENT DIRECTIVE

5-180-P-1
61-76 ST. A

1

SECTION A —
NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER

6020 05718

DATE

15 11 48
DAY MONTH YEAR

NAME

ORRICO MIKE J

SERIAL NUMBER

36308104

GRADE

PFC

ARM

1

RACE

1

RELIGION

2

CEMETERY

HAMM LUXEMBOURG

PLOT

EE

ROW

8

GRAVE

194

DISPOSITION OF REMAINS

6100

CODE

08

DIST. CTR.

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE

THOMAS J. AHERN & BROTHERS
3246 WEST JACKSON BOULEVARD
CHICAGO, ILLINOIS

NAME AND ADDRESS OF NEXT OF KIN

MRS. CARMELLA ORRICO (MOTHER)
1660 NORTH MOZART STREET
CHICAGO, ILLINOIS

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME

SERIAL NUMBER

GRADE

DATE OF DEATH

DATE DISTINTERRED

IDENTIFICATION TAG ON

ORGANIZATION

RELIGION

IDENTIFICATION VERIFIED BY

- REMAINS
 MARKER

USAGF

NAME AND TITLE

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL

CONDITION OF REMAINS

OTHER MEANS OF IDENTIFICATION

SEE ATTACHED WORK SHEET

MINOR DISCREPANCIES (Prepare Discrepancy Report QMC Form 1194a for major discrepancies.)

REMAINS PREPARED AND PLACED IN CASKET

DATE

BY

CASKET SEALED BY

EMBALMER (Signature)

CASKET BOXED AND MARKED

SHIPPING ADDRESS VERIFIED BY

DATE

BY

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.

SIGNATURE OF AGRS INSPECTOR

REMARKS AND SPECIAL INSTRUCTIONS

1488

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM USMC HAMM LUXEMBOURG		TO ANTWERP BELGIUM	
KIND OF CONVEYANCE TRAIN		NAME OF CONVOYER GUSTAV W. BERGMAN CPL RA 12007505	
SIGNATURE OF SHIPPER <i>Ernest A. Foote</i> ERNEST A. FOOTE CAPT FA	DATE 1203.49	SIGNATURE OF RECEIVER <i>R W Miller</i>	DATE 14 MAR 1949

2. SHIPPED

FROM AGRC ANTWERP BELGIUM		TO USAT HAITI VICTORY	
KIND OF CONVEYANCE VC. 2		NAME OF CONVOYER D. E. PRICE, MAJ. OMC	
SIGNATURE OF SHIPPER R. D. MILLER, Lt. COL. T.C.	DATE 13 APR 1949	SIGNATURE OF RECEIVER <i>D Price</i>	DATE 22 APR 1949

3. SHIPPED

FROM		TO NYPE	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER <i>W. W. Preisch</i> LIEUT. COLONEL, TC. PORT TRANSPORTATION OFFICER	DATE MAY 4 1949

4. SHIPPED

FROM NYPE		TO DC08	
KIND OF CONVEYANCE TRAIN		NAME OF CONVOYER <i>Arnold Swigebum</i>	
SIGNATURE OF SHIPPER W. W. PREISCH LIEUT. COLONEL, TC. PORT TRANSPORTATION OFFICER	DATE MAY 6 1949	SIGNATURE OF RECEIVER <i>L. A. Bockstahler</i> 1st Lt., OMC Chief, Operations Dept.	DATE 5/11/49

5. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

6. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

7. SHIPPED

FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE

DISINTERMENT DIRECTIVE

1-180

SECTION A — NAME AND BURIAL LOCATION OF DECEASED				DIRECTIVE NUMBER		DATE		
NAME ORRICO MIKE J				SERIAL NUMBER 36308104		RANK PFC		ARM 1
CEMETERY				DATE OF DEATH		DAY	MONTH	YEAR
PLOT				ROW		GRAVE		COUNTRY
EE				8		194		HAMM LUXEMBOURG
DISPOSITION OF REMAINS				CODE		DIST. PT.		CAUSE OF DEATH

SECTION B — CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE		NAME AND ADDRESS OF NEXT OF KIN	

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME MIKE J ORRICO		SERIAL NUMBER 36308104		RANK PFC		DATE OF DEATH		DATE DISTINTERRED 3 MAY 48	
IDENTIFICATION TAG ON <input checked="" type="checkbox"/> REMAINS <input checked="" type="checkbox"/> MARKER GRS		ORGANIZATION		RELIGION C		IDENTIFICATION VERIFIED BY FREDERICK L FRITSCHÉ CAPT CE NAME AND TITLE			

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL MATTRESS COVER		CONDITION OF REMAINS Advanced stage of decomposition. L/Tibia & fibula fractured. Remains complete.	
OTHER MEANS OF IDENTIFICATION NONE			

MINOR DISCREPANCIES /

NONE

REMAINS PREPARED AND PLACED IN <input checked="" type="checkbox"/> transfer case		DATE 4 MAY 48		BY JACK B WALL (EMBALMER)	
CASKET SEALED BY W/O DISINFECTANT JAMES L SMITH		EMBALMER (Signature) JAMES L SMITH			
CASKET BOXED AND MARKED V A EVRARD CLERK		SHIPPING ADDRESS VERIFIED BY ALL MARKING TAGS & PLATES VERIFIED BY R E LEWIS CAPT CAV			
DATE 25 JUNE 1948					

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.

except casketing

ANTONIO TEIXEIRA
2ND LT INF

SIGNATURE OF GRS INSPECTOR

Prepare Discrepancy Report QMC Form 1194a for major discrepancies.

LF

INSPECTION CHECKLIST

22487

NAME ORRICO, MIKE J.		RANK PFC.	SERIAL NO. 36308104	ARM OR SERVICE ARMY	DIRECTIVE DATE
RACE WHITE		RELIGION CATH.	SEX MALE	DIRECTIVE NO. 6020 05718 NY	
CONSIGNEE AND ADDRESS THOMAS J. AHERN & BROTHERS 3246 WEST JACKSON BOULEVARD CHICAGO, ILLINOIS			NEXT-OF-KIN ADDRESS MRS. CARMELLA ORRICO (MOTHER) 1660 NORTH MOZART STREET CHICAGO, ILLINOIS		
SHIPPING CASE - General Appearance (Check ONLY Discrepancies)			CONDITION OF SHIPPING CASE (Check One) <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY		
FINISH (Exterior)			REMARKS:		
FINISH (Interior)					
HANDLES					
HANDLE BOLTS					
STENCILING - NAMEPLATE					
			INSPECTED BY:		
CASKET - General Appearance (Check ONLY Discrepancies)			CONDITION OF CASKET (Check One) <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY		
FINISH (Exterior)			REMARKS:		
HANDLES AND FASTENINGS					
STENCILING - NAMEPLATE					
CAM LOCKS (Sealing)					
ODOR OR MOISTURE					
			INSPECTED BY: <i>F. Delaney</i>		
ROUTED THROUGH					
<input type="checkbox"/> MORTUARY OPERATING ROOM			<input type="checkbox"/> MORTUARY REPAIR SHOP		
CONDITION OF REMAINS <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY			CASKET REPAIR <input type="checkbox"/>		
NECESSARY DISINFECTION (Explain)			CASKET EXCHANGED <input type="checkbox"/>		
			SHIPPING CASE REPAIRED <input type="checkbox"/>		
			SHIPPING CASE EXCHANGED <input type="checkbox"/>		
			REMARKS:		
TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTING OFFICER
STORAGE LOCATION			PASS. LIST NO.		CONTROL NUMBER 22487
FLOOR	SECTION	BAY	STORAGE NUMBER <i>997</i>		
STAMP INCOMING OR OUTGOING			NY 028 R		

WU AJ309 PD

CHICAGO ILL 2 1220P

CHGO QM DEPOT

OFC OF THE CO OFCR

1819 WEST PERSHING ROAD

ORIGINAL INSTRUCTIONS ARE CONFIRMED N REPLY REFERRED

TO CONTROL NUMBER 22487

MRS CARMELLA ORRICO 1660 NORH MOZART ST

100P

Dec. Orrico, Mike J.

22487..

MAY 2 4 02 PM '49

RECEIVED
SIGNATURE CENTER

FILE

A-36308104

AGR DIV., CHICAGO QUARTERMASTER DEPOT
1819 W. PERSHING RD., CHICAGO 9, ILL.

WESTERN UNION
DAY LETTER

DELIVER AND REPORT ANY CHARGES

MRS. CARMELLA ORRICO
1660 NORTH MOZART STREET
CHICAGO, ILLINOIS

RECEIVED
SIGNAL CENTER
MAY 1 2 00 PM '49

FILE
R

WE HAVE BEEN ADVISED THAT REMAINS OF THE LATE

PFC. MIKE J. ORRICO

ARE ENROUTE TO THE UNITED STATES

OUR RECORDS INDICATE YOU WISH REMAINS DELIVERED TO

THOMAS J. AHERN & BROTHERS, 3246 W. JACKSON BLVD., CHGO, ILL

PLEASE CONFIRM YOUR ORIGINAL INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS WITHIN 48 HOURS BY TELEGRAM COLLECT TO CHICAGO QUARTERMASTER DEPOT AGRD 1819 WEST PERSHING ROAD CHICAGO ILLINOIS, INCLUDING FULL NAME OF DECEASED AND YOUR CORRECT ADDRESS. YOUR REQUEST FOR CHANGE IN DELIVERY INSTRUCTIONS AFTER 48 HOURS HAVE ELAPSED CANNOT BE COMPLIED WITH AT GOVERNMENT EXPENSE. DELIVERY OF REMAINS WILL BE MADE AS SOON AS PRACTICABLE AFTER RECEIVED HOWEVER MANY FACTORS BEYOND OUR CONTROL MAY DELAY DELIVERY SEVERAL WEEKS. AT LEAST THREE DAYS PRIOR TO SHIPMENT OF REMAINS ACCOMPANIED BY MILITARY ESCORT YOUR FUNERAL DIRECTOR WILL BE NOTIFIED BY TELEGRAM OF METHOD OF TRANSPORTATION AND TIME OF ARRIVAL AND REQUESTED TO NOTIFY YOU. IF YOU DESIRE MILITARY HONORS AT FUNERAL YOU SHOULD ASK LOCAL VETERANS ORGANIZATIONS TO MAKE ARRANGEMENTS. IN REPLY REFER TO CONTROL NO. **22487**

THOS. O. CALL
MAJOR, Q. M. C.

G. M. ODENWALDER
CAPT. Q. M. C.

MAY 1 - 1949

MM

REQUEST FOR REIMBURSEMENT OF INTERMENT OR TRANSPORTATION EXPENSES

(Read Explanation on Reverse Side before completing form)

DATE

May 25, 1949

NAME OF DECEDENT (Last, First, Middle Initial)

BRANCH OF SERVICE

TO BE FILLED IN BY CLAIMANT

ORRICO, MIKE J.

US ARMY

A. INTERMENT EXPENSES (Civilian or Private Cemetery)

RANK OR GRADE

SERIAL NO.

B. TRANSPORTATION EXPENSES (National or Post Cemetery)

PFC.

36308104

INSTRUCTIONS TO PERSONS SIGNING THIS FORM

1. This form is NOT to be signed by Funeral Director.
2. Fill in as required and ~~sign for office~~ Sign Original **FORWARD COPY** TO OFFICE OF QUARTERMASTER GENERAL, WASHINGTON 25, D. C. ATTN: HDQRS., A. G. R. S.
3. Check Box "A" or Box "B" above, not both.
4. Check Box "A" when interment is in a civilian or private cemetery.
5. Check Box "B" when remains are delivered to home or other place prior to burial in a national or post cemetery.

CLAIM VALID-REPATRIATION JUN 2 1949 *llc*

FILL IN THIS STATEMENT IF BOX "A" IS CHECKED

FILL IN THIS STATEMENT IF BOX "B" IS CHECKED

I certify that the sum of \$ 200.00 was paid by me from personal funds in connection with the interment of the remains of the above-named decedent in the cemetery indicated below:

NAME: of cemetery Mt Carmel
CITY OR COUNTY: Cook
STATE: Ill.

I certify that the sum of \$ _____ was paid by me from personal funds in connection with the transportation of the remains of the above-named decedent from: (City, town, or place from which remains were shipped)
NO: (Name and Location of National or Post Cemetery)

RETURN FOUR COPIES TO

SIGNATURE OF CLAIMANT

COMMANDING OFFICER
CHICAGO QUARTERMASTER DEPOT
1819 WEST PERSHING ROAD
CHICAGO 9, ILLINOIS
ATTN: AGR DIVISION

MRS. CARMELLA ORRICO

ADDRESS (Street number or RFD, City and State)

1660 NORTH MOZART ST., CHGO., ILL.

RELATIONSHIP TO DECEDENT

MOTHER

REMARKS

200016

F. O., U. S. ARMY, CHICAGO, ILL.
PAID ON JUN 17 1949
MONEY ACCOUNTS OF E. G. DOYEL
LT. COL., F. D., Symbol Number 210-587 (DO NOT SIGN THIS)

COPY

REQUEST FOR DISPOSITION OF REMAINS

DATE:

13 May 1948

29/17/48
Priv 26/30/48
Priv Surf 7/21/48
m-2

GRADE OF DECEASED, NAME, ARMY SERIAL NUMBER AND REPORTED PLACE OF BURIAL

Pfc Mike J. Orrico, 36 308 104
Plot EE, Row 8, Grave 194,
United States Military Cemetery
Hamm, Luxembourg

(D.C.)

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

NOTE.—The next of kin should familiarize himself with the contents of the pamphlet, "Disposition of World War II Armed Forces Dead," before filling out this form. When the proper part of this form is filled out and properly signed by the next of kin, it should be returned to the OFFICE OF THE QUARTERMASTER GENERAL, MEMORIAL DIVISION, WAR DEPARTMENT, WASHINGTON 25, D. C., in the self-addressed postage-free envelope provided for this purpose.
If you are the next of kin or authorized representative of next of kin and desire to direct the disposition of the remains, please fill in PART I of this form.

PART I

1, Carmella Orrico

(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

(Please indicate relationship to the deceased by placing an "X" in the proper box.)

- WIDOW
- WIDOWER
- SON OVER 21 YEARS OLD
- DAUGHTER OVER 21 YEARS OLD
- FATHER
- MOTHER
- BROTHER OVER 21 YEARS OLD
- SISTER OVER 21 YEARS OLD
- RELATIONSHIP OTHER THAN ABOVE (Specify) _____

AMERICAN EXPAT

HAVING FAMILIARIZED MYSELF WITH THE OPTIONS WHICH HAVE BEEN MADE AVAILABLE TO ME WITH RESPECT TO THE FINAL RESTING PLACE OF THE DECEASED DESIGNATED ABOVE, NOW DO DECLARE THAT IT IS MY DESIRE THAT THE REMAINS: (Please place an "X" in the box opposite the option you have selected.)

- 1. BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS.
- 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY

Mt. Carmel Cemetery Harrison St. + Hillside

(NAME AND LOCATION OF CEMETERY)

- 3. BE RETURNED TO _____ (FOREIGN COUNTRY), THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT _____ (LOCATION OF CEMETERY SELECTED)

- 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT _____ (LOCATION OF NATIONAL CEMETERY SELECTED)

(Please indicate if your own religious services at a location other than the selected national cemetery are desired by placing an "X" in the proper box)

- YES
- NO

4/3/48

THE NAME OF THE DECEASED, THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: (If no corrections are necessary, indicate this fact by inserting the word "NONE" in the space below.)

None

DDProc

10 Dec 48

Coded 11-22-48

J. Williams

SEP 18 1948

Kriegler

Ince 1

PART I (Continued)

If on Page 1 of this form you have selected Option Number 2 or 3, or Option Number 4 with your own funeral ceremonies desired at a location other than the selected national cemetery, complete one of these sections.

I, AS THE NEXT OF KIN, DO FURTHER DECLARE THAT I DESIRE THE REMAINS TO BE SENT TO THE FOLLOWING PERSON WHO HAS AGREED TO RECEIVE THEM:

LAST NAME	FIRST NAME	MIDDLE INITIAL
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS	STATE OR TERRITORY OF U. S. A., OR COUNTRY
		TELEPHONE No.

OR I, AS THE NEXT OF KIN, DO FURTHER DECLARE THAT I DESIRE THE REMAINS TO BE SENT TO THE FOLLOWING FUNERAL DIRECTOR WHO HAS AGREED TO RECEIVE THEM:

FULL NAME OF FUNERAL DIRECTOR			
THOMAS J AHERN + BROTHERS			
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
3246 W. JACKSON BLVD.	CHICAGO ILL.	COOK	ILL
EXPRESS OFFICE (Nearest railroad passenger station)	TELEGRAPH ADDRESS		TELEPHONE No.
AMERICAN EXPRESS			KED. 2394

IN CASE OF EMERGENCY THE NAME AND ADDRESS OF THE PERSON NEXT IN LINE OF KINSHIP AFTER ME, AS SET FORTH IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," IS:

LAST NAME	FIRST NAME	MIDDLE INITIAL	RELATIONSHIP TO DECEASED
ORRICO	MRS	P	Brother
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
1660 N. Mozart St.	CHICAGO	COOK	ILL.

REMARKS OR ADDITIONAL INSTRUCTIONS (For additional space use page 4.)

Wish, to have the deceased sent directly to the Cemetery.

AS EXPLAINED IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," I AM THE NEXT OF KIN AND THE INDIVIDUAL AUTHORIZED TO DIRECT THE DISPOSITION OF THE SAID REMAINS.

I, the undersigned, DO SOLEMNLY SWEAR (OR AFFIRM) that the statements made by me in the foregoing document are full and true to the best of my knowledge and belief.

Carmello X Orrico - signature by mark - witness to mark
 Mrs. ~~MARTIN~~ ORRICO 1660 N. Mozart St.
(SIGNATURE OF NEXT OF KIN) (STREET AND NUMBER)
 MRS. CARMELLA ORRICO Chicago 47, ILLinois
(NAME PRINTED OR TYPED) (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 9 day of August, 1948 at city (or town) of Chicago, county of Cook, and State (or Territory or District) of Illinois

signature of Carmella Orrico made by mark witnessed by notary
Lewis R. White
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)
 Notary Public
(OFFICIAL TITLE)

*NOTE.—Page 4 is part of the notarial attestation.

DEPARTMENT OF THE ARMY
////////////////////310
ORBIT 293CAPORALE, Ernest F.
3275296319 August 1948
12A

SUBJECT: Recovery of Remains from Ludshelm, Germany

TO : Commanding General
American Graves Registration Command
European Area
APO 58, c/o Postmaster
New York, New York

1. Reference is made to the statement of W. Roloff, formerly Chief Staff Surgeon of 257 Field Hospital (Motorized - German) and an extract of the records of this hospital listing 18 Americans who died there and their burial locations. Copies are inclosed.

2. Listed below are eight burial reports which are all this office is able to associate with the extract of the above-mentioned hospital records:

<u>Name</u>	<u>ASN</u>	<u>Plot</u>	<u>Row</u>	<u>Grave</u>	<u>Cemetery</u>
CAPORALE, Ernest F.	32752963	CC	3	52	Neuville
CRAIG, William H.	O-22680	BB	6	150	Neuville
DAVIS, Nathan	34111160	YYY	8	93	St. Avoird
GRIMES, Thomas F.	33051241	EE	8	193	Hamm
ORRICO, Mike J.	36308104	EE	8	194	Hamm
SUESS, Glen W.	36740069	YYY	8	92	St. Avoird
THOM, Harold L.	16175182	YYY	8	91	St. Avoird
X-7004		DD	6	128	Neuville

The report of investigation for X-7004 (Evacuation #IF-1774, dated 5 November 1947) indicates that the remains are "BTB mass burial of Valtemar KILPELEINEN, 31320967 and John W. TAVINER, 39289171". Identification check list for X-7004, dated 19 November 1947, indicates parts of four (4) remains are present, two (2) of which are probably enemy.

3. Findings of Non-Recoverability have been submitted by your office for KILPELEINEN, Valtemar, 31320967 and TAVINER, John W., 39289171. (Case #3, dated 12 February 1948.) This case is being suspended. Request further

QMGT 293
CAPORALE, Ernest F.
32752963

(Cont'd)

19 August 1948

investigation, and if sufficient evidence can be obtained, it is recommended X-7004 be re-submitted to a Board of Officers for consideration as the only recoverable remains of KILPELAINEN and TAVINER.

4. It is further requested that a thorough investigation be conducted to determine whether or not all U. S. deceased have been recovered. In view of Roloff's statement that "eighteen not eight" Americans are buried there and an extract of the hospital records shows eighteen Americans by name, serial number and grave location, it appears that there may still be unrecovered remains.

FOR THE QUARTERMASTER GENERAL:

2 Incls:
1 - Statement of W. Roloff
2 - Extract of Hospital Records

T. H. MIETZ
Lt. Colonel, QMC
Memorial Division

cc: Adm Sect
tmd:Rogers

NJS

JCM

buried - New Cem. at Ruedesheim
dist Pruem Eifel - row 2 - grave 6.

Name: *Orrico, Mike T.*
 D. V. G. (bei V. und G. die Staatsangehörigkeit angeben.)

H. 22545
 Formblatt 6a
 K. S. V. (I) II. Teil

Familien- und Vorname:

30 30 8104
Amerikaner
Orrico, Mike, J. FN = 37768

geb. am:

in:

Kreis:

Truppenteil:

Beschriftung der Erkennungsmarke:

DOW 4 *36308104* *T42-43.*

Dienstgrad:

Lfd. Nr. des Laz.-Krankenbuches:

DOW 29 Dec 44

Name des Lazarett:

Erkrankungstag, Art der
 Krankheit o. Verwundung:

Zugang:

Abgang:

Feldlazarett (mot.) 257

woher:

wie: wohin:

Reserve-Lazarett

Köln-Nippes

9. Inf. Div.

*in fup
 (Gasbrand)*

am:

am:

*file Eul Br
 4-8-46*

*gippsheim
 29.12.44
 1800*

09201 Orrico, Mike, J

Bei Verbündeten und Gefangenen sowie verstorbenen deutschen Wehrmachtsangehörigen:

Emergency address:
Anschrift der zu benachrichtigenden Angehörigen:

*Mitter: Carmella Orrico,
2306. W. Harrison St.
Chicago-III.*

Bei Verstorbenen:

Genauere Bezeichnung der Grablage:

*Bundesheim Mrs. Pün, Eifel.
Neuer Friedhof,
2. Reihe*

*Buried: New Cemetery at Gabb.
Bundesheim, District Pün, Eifel, row 2,
grave 1, Pün*

293 Orrico, Mike J. (36,308,104)

Name: Orrico		Staatsangehörigkeit: U.S.A.		Nr. der Liste: 36 308 104	
Befängenenlager: name: Orrico, Mike J.				Seite der Liste: —	
Befängenen-Nr.:				Beruf:	
Name: Orrico				Religion:	
Vornamen: Mike J. Mike J.				Dienstgrad: Sold	
Geburtstag u. Geburtsort:		Truppenteil:			
Vorname des Vaters:		Komp. usw. A Sn		Matr. Nr. 36 308 104 J. 42-48 d.	
Familiennamen der Mutter:		Ort und Tag der Gefangennahme oder Internierung:			
Emergency address: Name u. Anschrift der zu benachrichtigenden Person: Camilla Orrico 2306 W. Harrison St. Chicago Ill		Verwundungen, Verletzungen oder Tod:			
Aufenthalt u. Veränderungen: IFA 29. 12. 44 18. 00 Uhr Feldlaz. (Wot)		wann und von wo weggegangen: Field Hospital (motor) 257			
Grablage: Ruedesheim, Ks. Prüm Eifel, Neuer Friedh 2 Reihe, Grab 6		Ausschreibung: Ruedesheim, district Eifel, near Luxemburg, Prov. 2, 8. April 6 257			
MIA - 22 Dec 44					



REBURIAL

REPORT OF BURIAL

GRAVES REGISTRATION
FORM No. 1
(Revised 1 Sept. 1943)

Restricted TM 10-630 AND AR 30-1815

Feb. 20, 1946.
Date

ORRICO

Last Name

MIKE

First

J.

Initial

P.F.C.

Rank

36308104

Serial No.

33 Armd Eng. BN.

Unit

Organization

Budesheim, Ger. (wL-1580) 29 Dec. 1944.

Place of Death

Date of Death

S.W. of chest and right arm.

Cause of Death

1400 23 Feb. 46 U.S. MIL. CEM. HAMM, LUX.

Time and Date of Burial

Name of Cemetery

VP- 8413

Name or Coordinates of Location

194

8

EE

Temp. Cross

Grave Number

Row Number

Plot Number

Type of Marker

Disposition of Identification Tags: Buried with body Yes No Attached to Marker Yes No

If No Identification Tags

How were remains identified?

1-1.D.Tag

What means of identification were buried with the body?

1-1.D.Tag

Previously buried in isolated grave
Budesheim, Ger. (wL-1580) Map Ref. Ger.
located at 1/250,000 Köln-K-51

To determine Right or Left use Deceased's Right and Left.

Who is buried on:

Deceased's Right:

Grimes

Name

33051241

Serial No.

Sgt.

Rank

INF

Organization

193

Grave No.

Deceased's Left:

Sabo

Name

36026977

Serial No.

Pfc.

Rank

109th INF Regt.

Organization

195

Grave No.

Signature or Name, Rank and if possible Organization of person furnishing above Data when other than officer reporting burial.

If print of identification tag is not affixed fill in below:

MIKE J ORRICO
36308104 T42 47
CARMELLA ORRICO
2306 W HARRISON
CHICAGO ILL.

Emergency Addressee Carmella Orrico

Name

2306, W.Harrison St. Chicago, ILL!

Address

Religion Catholic

List only Personal Effects Found on Body and disposition of same:

None

14 MARS 1946

Disinterring officer

Signature of Officer or other person reporting burial

Reinterring officer

Verified by G.R.S. Officer

WILLIAM H. BARNE TT
2nd Lt. O-2018285
6890 Q.M.G.R.Co.

SEE ATTACHED SKETCH

54

648

WAR DEPARTMENT

THE ADJUTANT GENERAL'S OFFICE

WASHINGTON 25, D. C.

*Corrected report with
missing statement. Orig.

REPORT OF DEATH

fw'd 11 July 45

DATE 17 September 1945 lec

FULL NAME Orrico, Mike J.				ARMY SERIAL NUMBER 36 308 104				GRADE Pfc					
HOME ADDRESS Chicago, Ill.				ARM OR SERVICE CE				DATE OF BIRTH 29 April 1920					
PLACE OF DEATH European Area				CAUSE OF DEATH Wounds rec'd in action				DATE OF DEATH 29 Dec 1944					
STATION OF DECEASED European Area				DATE OF ENTRY ON CURRENT ACTIVE SERVICE 9 Dec 1941				LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS over 3 years					
EMERGENCY ADDRESSEE (Name, relationship, and address) Mrs. Carmella Orrico, mother, 2306 West Harrison St., Chicago, Ill.													
BENEFICIARY (Name, relationship, and address) Mrs. Carmella Orrico, mother, same as above Mr. Nick Orrico, father, same as mother's													
INVESTIGATION MADE		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (Specify below)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
											<input checked="" type="checkbox"/>		
ADDITIONAL DATA AND/OR STATEMENT													

The individual named in this report of death is held by the War Department to have been in a missing in action status from 22 December 1944 until such absence was terminated on 6 July 1945, when evidence considered sufficient to establish the fact of death on 29 December 1944 was received by the Secretary of War from ~~captured official German records~~. Office Staff Coordinators.

CORRECTED COPY

BY ORDER OF THE SECRETARY OF WAR

FILE
SEP 24 1945
JE

L. H. Huelster

ADJUTANT GENERAL

BURIAL INFORMATION REPORTED BY GERMAN GOVERNMENT
 RECEIVED THROUGH ~~AMERICAN LEGATION, BERN, SWITZERLAND~~ U.S. ARMY

NAME (Last, First, Middle) ORRICO, MIKE J.		GRADE Pfc.	ORGANIZATION S.N. 36 308 104				
DATE OF BIRTH <i>h</i>		PLACE					
EMERGENCY ADDRESSEE Carmella Orrico, 2306 West Harrison St., Chicago, Ill.							
DATE OF DEATH OR CAPTURE 29 Dec. 1944		PLACE at Field Hospital					
PLACE OF BURIAL New Cemetery at Budersheim in the vicinity of Prüm/Eifel, Germany		ROW NO. 2	GRAVE NO. 6	TYPE OF BURIAL <input type="checkbox"/> SINGLE <input type="checkbox"/> COMRADE			
DATE OF BURIAL							
OTHER MEMBERS OF CREW OF Budersheim on report ?							
NAME		GRADE		NAME		GRADE	
1.				6.			
2.				7.			
3.				8.			
4.				9.			
5.				10.			
PERSONAL EFFECTS							
SOURCE OF INFORMATION: GERMAN LIST OF AMERICAN CASUALTIES NO. 75/37						PAGE NO.	
PLACE Meiningen, Germany				DATED 2 June 1945			
REMARKS * Burial information as received in the German language: - beerdigt: Neuer Frdhf. Budersheim Krs. Prüm/Eifel, 2.Reihe, Grab Nr.6							

CASUALTY BRANCH
PROCESSING AND VERIFICATION SECTION

29M
Name Orrico, Mike J. Serial No. 36,308,104
Grade Pfc
Organization CE

OFFICIAL REPORTS: (IMPORTANT—Unofficial reports or information will not be shown below. This information will be indicated—"Code X.")

Type of Casualty	Date and Area	Classification and Message No.	Battle	Nonbattle	Date E. A. Notified
MIA	22 Dec 44 ETO*	# 806	✓		16 Jan 45
DOW	29 Dec 44 ETO**	AC201(4 Jul 45) 186041-U-IX	✓		10 Jul 45

E. A. Mrs. Carmella Orrico (Mackey)
2306 West Harrison St., Chicago Illinois

Remarks: * Belgium + * Germany

No casualty reported _____

Is there a Casualty Branch file? No _____ Yes _____

Form No. 43? No _____ Yes _____

Clerk furnishing report Parist

Date of report Aug 45 Room No. 3648 Group No. 11

VISI-CARD AND RECORD REPORT

SENSITIVE SURFACE - HANDLE EDGES ONLY

WAR DEPARTMENT

THE ADJUTANT GENERAL'S OFFICE
WASHINGTON 25, D. C.

REPORT OF DEATH

DATE 11 July 1945 dmb

FULL NAME Orrico, Mike J.		ARMY SERIAL NUMBER 36 308 104		GRADE Pfc <i>MM</i>									
HOME ADDRESS Chicago, Ill.		ARM OR SERVICE CE		DATE OF BIRTH 29 Apr 1920									
PLACE OF DEATH European Area		CAUSE OF DEATH Wounds rec'd in action		DATE OF DEATH 29 Dec 1944									
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 9 Dec 1941		LENGTH OF SERVICE FOR PAY PURPOSES YEARS MONTHS DAYS over 3 years									
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Carmella Orrico (wife mother) 2306 West HARRISON Harrison St., Chicago, Ill.													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Carmella Orrico (mother) same as above Mr. Nick Orrico (father) same as mother's.													
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
												X	

ADDITIONAL DATA AND/OR STATEMENT

 BATTLE NON-BATTLE

Evidence of death rec'd in WD 6 July 1945.

COPIES FURNISHED:

S. G. O.	F. B. I.	F. O., U. S. A.
S. O. Q. M. G.	O. F. D.	ARMY EFFECTS BUREAU
G. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BY ORDER OF THE SECRETARY OF WAR:

et. Shultz

ADJUTANT GENERAL

FILE
JUL 19 1945
2138

SENSITIVE SURFACE HANDLE EDGES ONLY

3601

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE
 WASHINGTON 25, D. C.

REPORT OF DEATHDATE 11 July 1945 dmb

FULL NAME Orrico, Mike J.		ARMY SERIAL NUMBER 36 308 104		GRADE Pfc									
HOME ADDRESS Chicago, Ill.		ARM OR SERVICE CE		DATE OF BIRTH 29 Apr 1920									
PLACE OF DEATH European Area		CAUSE OF DEATH Wounds rec'd in action		DATE OF DEATH 29 Dec 1944									
STATION OF DECEASED European Area		DATE OF ENTRY ON CURRENT ACTIVE SERVICE 9 Dec 1941		LENGTH OF SERVICE FOR PAY PURPOSES YEARS over 3 MONTHS 3 DAYS									
EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS) Mrs. Carmella Orrice (wife mother) 2306 West HARRISON Harrison St., Chicago, Ill.													
BENEFICIARY (NAME, RELATIONSHIP & ADDRESS) Mrs. Carmella Orrico (mother) same as above Mr. Nick Orrico (father) same as mother's.													
INVESTIGATION MADE?		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (SPECIFY BELOW)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
												X	

ADDITIONAL DATA AND/OR STATEMENT

 BATTLE
 NON-BATTLE

Evidence of death rec'd in WD 6 July 1945.

US

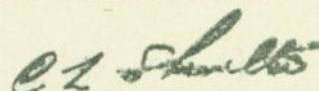
Hamm

EE-8-194

COPIES FURNISHED:

S. G. O.	F. B. I.	F. O., U. S. A.
S. O. Q. M. G.	O. F. D.	ARMY EFFECTS BUREAU
G. A. O.	VET. ADMIN.	CASUALTY BRANCH FILE
		A. G. 201 FILE

BY ORDER OF THE SECRETARY OF WAR:



ADJUTANT GENERAL

Filed in germ. K-51

BURIAL INFORMATION REPORTED BY GERMAN GOVERNMENT

3601

RECEIVED THROUGH AMERICAN LEGATION, BERN, SWITZERLAND U.S. ARMY

NAME (Last, First, Middle) ORRICO, MIKE J.	GRADE Pfc.	ORGANIZATION 33 Armd - Inf Bn S.N. 36 308 104
DATE OF BIRTH	PLACE	

EMERGENCY ADDRESSEE
Carmella Orrico, 2306 West Harrison St., Chicago, Ill.

DATE OF DEATH OR CAPTURE 29 Dec. 1944 MIA 22 Dec - 44 -	PLACE at Field Hospital
---	-----------------------------------

PLACE OF BURIAL New Cemetery at Budersheim in the vicinity of Prüm/Eifel, Germany	ROW NO. 2	GRAVE NO. 6	TYPE OF BURIAL <input type="checkbox"/> SINGLE <input type="checkbox"/> COMRADE	DATE OF BURIAL
---	------------------	--------------------	---	----------------

OTHER MEMBERS OF CREW OF **Budersheim on report? (K 51-218)**

NAME	GRADE	NAME	GRADE
1.	(K 50-M 15)	6.	
2.	(254-M 78)	7.	
3.		8.	
4.		9.	
5.		10.	

PERSONAL EFFECTS

SOURCE OF INFORMATION: GERMAN LIST OF AMERICAN CASUALTIES NO. 75/37	PAGE NO.
---	----------

PLACE Meiningen, Germany	DATED 2 June 1945
------------------------------------	-----------------------------

REMARKS
*** Burial information as received in the German language: -
beerdigt: Neuer Frdhf. Budersheim Krs. Prüm/Eifel, 2.Reihe, Grab Nr.6**

and 31'