REPORT OF BURIAL

16 March 1945

ALDRICH FRANK CPL 31447982

Co A 40th Tank Bn 7th Armd Div

Coord VP 8155891 Unit 23 Dec 44

Sart Les St. Vith, Belgium OHR (Estimated to be 1-10-Jan-45) GSW Heart

Place of Death Date of Death

1400 16 March 1945 US Military Cemetery Hamm, Luxembourg Cause of Death

Time and Date of Burial Name of Cemetery Name or Coordinates of Location

71 AA Cross

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

If No Identification Tags See attached sheets for additional information.

Identified in the field by marking "Frank Aldrich, 31447982" found on belt of X-69. Also similarity of shoe sizes of X-69 and Cpl Aldrich. Approved by Ident Section QMG 17 July 1946.

What means of identification were buried with the body? GRS Form #1 in sealed GRS bottle.

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

Who is buried on:

Deceased's Right: DAVIS UNKNOWN SGT. UNKNOWN 70

Name Serial No. Rank Organization Grave No.

Deceased's Left: UNKNOWN X-57 0-3495

Name Serial No. Probably 9th Armd Div 72

Rank Organization, Grave No.

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

UNIDENTIFICATION TAGS

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

Mrs Mabel Thompson, Mother

Emergency Addressee Unknown Name

90 Lorraine St., Pawtucket, R.I.

Address

Religion Unknown Baptist

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

PREVIOUSLY BURIED IN ISOLATED GRAVE LOCATED AT

COORD VP 8155891

Sart Les St. Vith, Belgium.

Signature of Officer or other person reporting burial

For the Commanding Officer: E. R. DE WEESE

1st Lt. QMC


Verified by Q.R.S. Officer
<table>
<thead>
<tr>
<th>Tooth</th>
<th>Upper</th>
<th>Lower</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>5</td>
<td>6</td>
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<tr>
<td>7</td>
<td>8</td>
<td>9</td>
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</tbody>
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**Characteristics:**

- Missing natural teeth by X;
- Crowns by O;
- Fillings by □;
- Bridges by □;
- Linking anchor teeth by □;
- Replacement by artificial teeth X.

**Geography:**

- If this is an isolated burial, make a sketch of the location.
- If more space needed, attach separate sheet.
- Indicate North.

**Physical Description:**

- Hair:
- Eyes:
- Skin:
- Shape of Face:
- General Appearance:
- Race:
- Weight:
- Height:
- Birthplace:
- Name:
- Sex:
- Fingerprints:
- Habits:
- Occupation:
- Physical Characteristics:
- Birth Date:
- Age:
- Any Marks or Tattoos:
- Other Details:

**Fingerprints:**

- Left Hand:
  - 1
  - 2
  - 3
  - 4
- Right Hand:
  - Thumb

**Important:**

- Take Fingerprints of both hands if unable to obtain a complete set of Fingerprints. Take those you can and fill in the following blanks:
- Hand:
- Number:
- Mark:
- Color of Eyes:
- Color of Hair:
- Birthplace:
- Occupation:
- Physical Characteristics:
- Other Details:

**Note:**

- If possible, have medical personnel take a tooth chart, if no medical personnel present, fill in tooth chart below.
- Indicate North on sketch.
- Indicate any scars, birthmarks, moles, deformities, etc.
- All photographs should be in color.
- Any other details should be noted.

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**If Deceased Unidentified:**

- Weight:
- Height:
- Hair:
- Eyes:
- Race:
- Birthplace:
- Name:
- Sex:
- Fingerprints:
- Habits:
- Occupation:
- Physical Characteristics:
- Birth Date:
- Age:
- Any Marks or Tattoos:
- Other Details:

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