

**RESTRICTED**

18

**REPORT OF BURIAL**

TM 10-630 AND AR 30-1815

16 March 1945

Date

**ALDRICH**  
~~UNKNOWN X-69~~

**FRANK**

**CPL**

**31447982**

~~Unknown~~

Last Name	First Initial	Rank	Serial No.
<del>Unknown</del>	<b>Co A 40th Tank Bn</b>	<b>7th Armd Div</b>	
Unit	Date of Death	Organization	Cause of Death
<b>Coord VP 815891</b>	<b>23 Dec 44</b>		<b>GSW Heart</b>
Place of Death	Date of Death	Cause of Death	
<b>1400 16 March 1945 US Military Cemetery Hamm, Luxembourg</b>			
Time and Date of Burial	Name of Cemetery	Name or Coordinates of Location	
<b>71</b>	<b>AA</b>	<b>Cross</b>	
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? 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 OQMG 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.

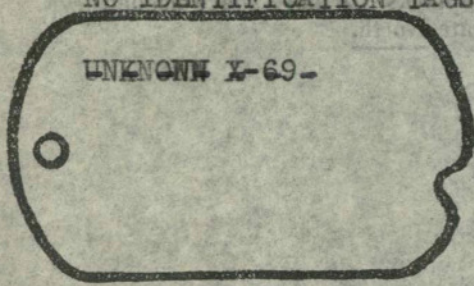
Who is buried on:

Deceased's Right:	<b>DAVIS</b> Name	<b>UNKNOWN</b> Serial No.	<b>SGT.</b> Rank	<b>UNKNOWN</b> Organization	<b>70</b> Grave No.
Deceased's Left:	<b>UNKNOWN X-57</b> Name	<b>0-3495</b> Serial No.	<b>Unknown</b> Rank	<b>Probably 9th Armd Div</b> Organization	<b>72</b> Grave No.

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

**NO IDENTIFICATION TAGS**

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



**Mrs Mabel Thompson, Mother**  
**-Unknown**

Emergency Addressee Name

**90 Lorraine St., Pawtucket, R.I.**

Address

Religion **Unknown Baptist**

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

**REBURIAL**

NO PERSONAL EFFECTS

**Previously buried in isolated grave**

**RESTRICTED**

**located at** **COORD VP 815891**  
**Sart Les St. Vith, Belgium.**

Signature of Officer or other person reporting burial

For the Commanding Officer:

**E. R. DE WEESE**

**1st Lt. QMC**

**609th QM Gr. Reg. Co.**

Verified by G.R.S. Officer

*File  
20 July 46*

# REPORT OF BURIAL OF DECEASED UNIDENTIFIED

Take Fingerprints of Both Hands. If unable to obtain a complete set of Fingerprints, Take Those You Can, and fill in the following:

Height: **5' 6 1/2"** Laundry Marks: **Yes**  
 Weight: **170 lbs est.** Number of Rifle: **None**  
 Color of Eyes: **Unknown** Wear Glasses? **Unknown**  
 Color of Hair: **Dark** Is Tooth Chart Attached? **Yes**  
 Race: **White**

(If possible, have medical personnel take a tooth chart, if no medical personnel present, fill in a tooth chart below.) In space below, locate, and describe any scars, birthmarks, moles, deformities, etc.

Left Hand

Right Hand

REMARKS

REMARKS

Note below any identifying clues found, such as letters, photographs, probable organization of deceased, etc.:

## TOOTH CHART

If this is an Isolated Burial, make a Sketch of the Location, oriented with Permanent Landmarks. If more space needed attach separate sheet. Indicate North.

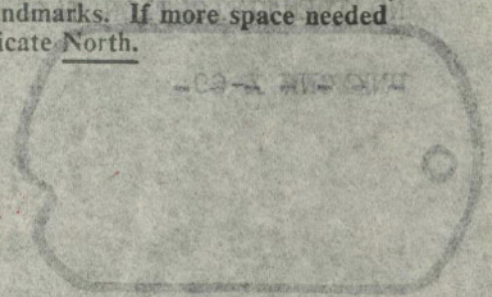
Upper	Decayed's Right								Decayed's Left							
	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
Lower	8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8

Indicate: missing natural teeth by X; crowns by C; fillings by F; Bridges by B; linking anchor teeth; replacements by artificial teeth X

Characteristics:

Other Data:

ATTACHED SHEET.



REBURIAL  
 Previously buried in isolated grave located at