

1. G. R. S. Form No. 1. Hq. G. R. S. File
- 34351
2. Soldier's No. 1213595
3. Smith Alvin A.  
Surname (in block letters) First Name and Initials
4. \_\_\_\_\_  
Rank Company Regt. or Corps
5. 9/29/18 K.I.A.  
Date of Death Cause, if known
6. 10/2/18 Benj. Post. Mil.  
Date of Burial Cemetery
7. Ronssoy  
Town or Commune (in block letters) Department
8. 2 a 1  
Grave No. Plot No. or Letter
9. Name Peg? \_\_\_\_\_ Cross?  Headboard? \_\_\_\_\_ Bottle? \_\_\_\_\_  
Check Method of Marking
10. Buried with Body? \_\_\_\_\_ Attached to Grave Marker? \_\_\_\_\_  
Identification Tags
11. If name unknown and tags missing, give marks and description.  
\_\_\_\_\_  
\_\_\_\_\_
12. \_\_\_\_\_  
Map Reference, if interment is outside of cemetery
13. \_\_\_\_\_  
Give name of Chaplain or Burial Officer
- Signed [Signature]
- Group [Signature] Unit 302 G. R. S.