



THOMAS M LOFTUS

PENNSYLVANIA

PFC HQ CO 341 INFANTRY REGT

WORLD WAR II BSM

MAY 19 1909

JULY 6 1964

200 Springfield Ave. Pottsville Pa.

SERIAL NUMBER 868	1. NAME (Print) THOMAS MARTIN LOFTUS <small>(First) (Middle) (Last)</small>		ORDER NUMBER 975
2. ADDRESS (Print) <i>R.R. 2</i> 225 N. Nile St. Frackville Sch. Penna <small>(Number and street or R. F. D. number) (Town) (County) (State)</small>			
3. TELEPHONE 155 W	4. AGE IN YEARS 31	5. PLACE OF BIRTH OSHRARDVILLE <small>(Town or county)</small>	6. COUNTRY OF CITIZENSHIP U.S.A.
DATE OF BIRTH FRACKVILLE MAY 19 1909 <small>(Exchange) (Number) (Mo.) (Day) (Yr.)</small>			7. NAME OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS MRS. ALBERTA LOFTUS <small>(Mr., Mrs., Miss) (First) (Middle) (Last)</small>
8. RELATIONSHIP OF THAT PERSON WIFE			9. ADDRESS OF THAT PERSON 225 N. Nile St. Frackville Sch. Pa. <small>(Number and street or R. F. D. number) (Town) (County) (State)</small>
10. EMPLOYER'S NAME W.P.A. of PENNA			
11. PLACE OF EMPLOYMENT OR BUSINESS READING BERK'S PO <small>(Number and street or R. F. D. number) (Town) (County) (State)</small>			

REGISTRATION CARD
D. S. S. Form 1

16-17105

(over)

Thomas M. Loftus
(Registrant's signature)

REGISTRAR'S REPORT

DESCRIPTION OF REGISTRANT

RACE	HEIGHT (Approx.)	WEIGHT (Approx.)	COMPLEXION	
			EYES	HAIR
White	✓ 5-7	160	Sallow	
			Light	✓
Negro	Blue	✓ Blonde	Ruddy	
	Gray	Red	Dark	
Oriental	Hazel	Brown	✓ Freckled	
	Brown	Black	Light brown	
Indian	Black	Gray	Dark brown	
		Bald	Black	
Philipino				

Other obvious physical characteristic that will aid in identification.....

NONE

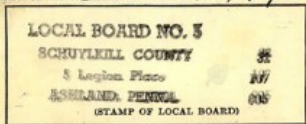
I certify that my answers are true; that the person registered has read or has had read to him his own answers; that I have witnessed his signature or mark and that all of his answers of which I have knowledge are true, except as follows:

TRUE

John J. Cusack
No. 1000
Rockville Pa.

Registrar for _____ (City or county) (State)

Date of registration *Oct. 16 1940*



(The stamp of the Local Board having jurisdiction of the registrant shall be placed in the above space.)

Commonwealth of Pennsylvania Department of Military Affairs		RECORD OF BURIAL PLACE OF VETERAN		DELAWARE COUNTY	
NAME Loftus, Thomas M. #33 834 890		DATE OF BIRTH 5-19-1909		DATE OF DEATH 7-6-1964	
VETERAN OF W.W. II		WAR		SERVED IN	
		ARMY (X)		NAVY ()	
				MARINE CORPS ()	
DATES OF SERVICE 11-23-43-Allentown, Pa. 1-29-46-Indiantown Gap		ORGANIZATIONS Hdq. Co. 1st Bn. 341st Inf. PFC Gap Reg. 86th Div.		RANK	
CEMETERY OR PLACE OF INTERMENT		NAME St. Joseph Cem. LOCATION Frackville, Schuylkill Co. Pa.			
LOCATION OF GRAVE IN CEMETERY		HEADSTONE			
SECTION LOT No.		RANGE GRAVE No.		GOVERNMENT (X) COUNTY () FAMILY ()	
INFORMATION GIVEN BY Ref: Alberta Lofuts, (W)		REMARKS 445 Hibbs Ave., Glenolden, Pa.			
DATE					
After being Recorded in the County Veterans' Grave Registration Record this card is to be sent to THE ADJUTANT GENERAL'S OFFICE, Harrisburg, Pennsylvania, for final Record.					

