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

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

15 April 1945
Date

Skarphopen,			Unknown	Unknown
Last Name	First	Initial	Rank	Serial No.

Dinslaken	
Unit	Organization

[illegible]	15 April 1945	tuberculosis
Place of Death	Date of Death	Cause of Death

1:00, 15 April 1945	U.S. Mil Cem, Luxembourg, Luxembourg	VK 645402
Time and Date of Burial	Name of Cemetery	Name or Coordinates of Location

106	3	3	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?

Identified by ID

What means of identification were buried with the body?

Dog Dressed Plate

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

Who is buried on:

Deceased's Right:	Unknown	298	Unknown	Unknown	105
	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Left:	Schrifter, Johannes F.H.	Unknown	Unknown	Unknown	107
	Name	Serial No.	Rank	Organization	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:

Emergency Addressee Unknown
Name

Address

Religion Unknown

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

NONE

Signature of Officer or other person reporting burial

EDWIN J. DONOVAN
1st Lt, GD GRS Officer
GD Qm Gr Reg

Verified by G.R.S. Officer