

(ALLIED) (RUSSIAN)
REPORT OF BURIAL

TM 10-630 AND AR 30-1815

15 April 1945

Date

Koscin, Ivan

Unknown

Unknown

Unknown

Last Name

First

Initial

Rank

Serial No.

Unit

Organization

Hamlin, Germany

11 April 1945

DOV

Place of Death

Date of Death

Cause of Death

1400, 15 April 1945

U.S. Mil Cem, Wageningen, Holland

W.C. 64182

Time and Date of Burial

Name of Cemetery

Name or Coordinates of Location

108

Row Number

Plot Number

Wagon 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?

Form # 52 B

What means of identification were buried with the body?

Embossed Plate

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

Who is buried on:

Deceased's Right:

Schriber, Johannes J. H.

Unknown

Unknown

107

Name

Serial No.

Rank

Organization

Grave No.

Deceased's Left:

Unknown X -247

Unknown

Unknown

Unknown

109

Name

Serial No.

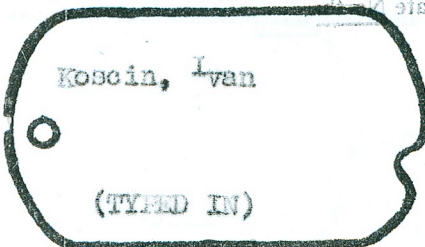
Rank

Organization

Grave No.

Signature of 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:

TRANSFERRED TO CUSTODY OF
NETHERLANDS GOVERNMENT
REINTERRED AMERSFOORT CEMETERY
PLOT 60W GRAVE
DATE 12 Nov 45
Signature of Officer or other person reporting burial
1st Lt, GRC GRS officer
611 GRC GRS Officer

NONE

WR 135-72

129

IF 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: Laundry Marks:
 Weight: Number of Rifle:
 Color of Eyes: Wear Glasses?
 Color of Hair: Is Tooth Chart Attached?
 Race:

(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.

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

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

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.

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

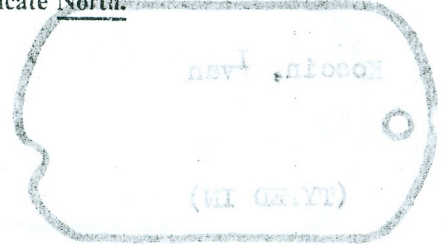
Indicate: missing natural teeth by X; crowns by C; fillings by F; Bridges by B; linking anchor teeth; replacements by artificial teeth X

Characteristics:

Other Data:

AG P BR HQ SOS

122560



HEADQUARTERS
UNITED STATES FORCES
EUROPEAN THEATER
GRAVES REGISTRATION SERVICE COMMAND
APO 887

PJW/COF/mm

GRSC (Margraten F-5-108) (Allied Russian)

(S: 14 Aug. 1945)
30 July 1945

SUBJECT: Information Lacking on QMC Form #1, GRS, Report of Burial.
KOSCIN, Ivan., Rank and ASN Unknown.

TO : Graves Registration Officer, Chanor Base Section, APO 562,
U. S. Army.

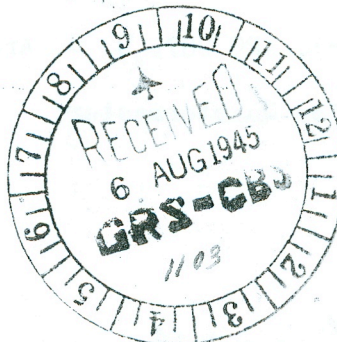
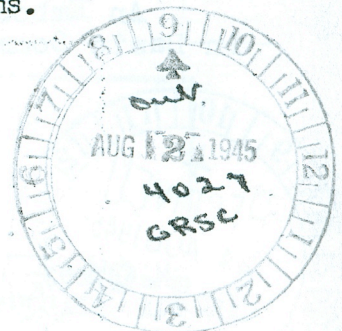
1. Report of Burial for the subject deceased ~~officer/enlisted man~~
buried at Margraten American Military Cemetery.
has been received at this headquarters with pertinent information omitted.

2. As this form becomes a part of a permanent record, information
of this nature is essential to this office for the completion of Report of
Burial before it is transmitted to the Quartermaster General, Washington, D.C.

3. It is requested that this office be furnished detailed informa-
tion in regard to the omissions as noted below:

- ☐ a. Means of identification if no identification tags were
found. If dental charts were used, forward same.
- ☐ b. Disposition of identification tags.
- ☒ c. Means of identification buried with remains.
- ☐ d. Date of burial.
- ☐ e. Date of re-burial.
- ☐ f. Specific geographical place of death.

For the Commanding General:



F. C. Moore
F. C. MOORE
Captain, QMC,
Adjutant.

QM-GR 293 (Margraten F-5-108) 1st Ind
(Allied Russian)

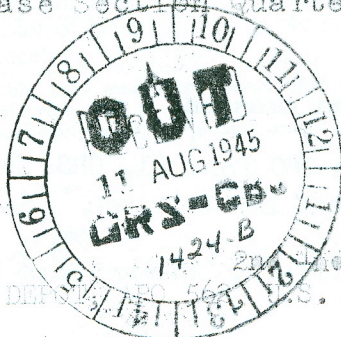
JAS/s

OQM, Hq, Chanor Base Section, APO 562, U. S. Army, 10 Aug, 1945.

To: Graves Registration Officer, Depot Q-183J, Det "A", 52nd QM Base Depot, APO 562, U. S. Army.

Forwarded for compliance with paragraph 3c, basic communication.

For the Base Section Quartermaster:



James A. Seuss
JAMES A. SEUSS
Capt., QMC
Assistant.

293.
Hq, Q-183, 52nd QM BASE DEPOT, APO 562, U. S. ARMY.

TAC/li.

16 AUGUST 1945.

TO: Commanding Officer, 603rd QM. Gr. Reg. Co., APO 562, U.S. Army.

For necessary action.

For the Commanding Officer:

T. A. O'Neill
T. A. O'NEILL
Captain, QMC
Chief GR & E Div.

3rd Ind.

HEADQUARTERS 603rd QM GRAVES REGISTRATION COMPANY, APO 562,
US ARMY 20 August 1945

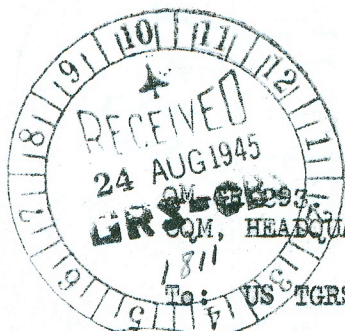
TO: Graves Registration Officer, Chanor Base Section, APO 562,
US Army.

An Embossed plate was buried with the remains referred to
in Basic Communication.

For the Commanding Officer:

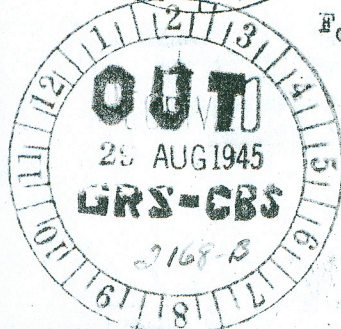
Cleon E Wells
CLEON E WELLS
1st Lt., QMC

JAS/k



QM-GR 293 (Margraten, F-5-108) 4th Ind.
OQM, HEADQUARTERS, CHANOR BASE SECTION, APO 562, U. S. ARMY, 29 August 1945
To: US TGRS, TSFET, (Rear), APO 887, U. S. Army.

For the Base Section Quartermaster:



Wayne J. Stamer
21st Aug
JAMES A. SEUSS
Capt., QMC
Assistant

C-5120