REPORT OF BURIAL

Unit Organization Funcion Area Organization Place of Death Place of Death Date of Death Funcion Cause of Death VX 646482 Time and Date of Burial Name of Cemetery Name or Coordinates of Location 269 12 Grave Number Row Number Plot Number Type of Marker	Serojesov Lest Nan		First	Initial		Rank	Unio	erial No.	
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Grave Number Row Number Plot Number Type of Marker bisposition of Identification Tags: Buried with body Yes No Attached to Marker Yes No TA No Identification Tags How were remains identified? By LMT Signed by Benald F. Sgan, Capt. 12 What means of identification were buried with the body? Emboused tag and GRS Form 1 O determine Right or Left use Deceased's Right and Left. Who is buried on: Corben Serial No. Rank Organization Grave No. Corben 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 Name	ada saba a		9.00			Nam	(46		
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Daily Gignature of Officer or other person reporting burial

603rd Qu Gr. Reg. Co.

Verified by G.R.S. Officer