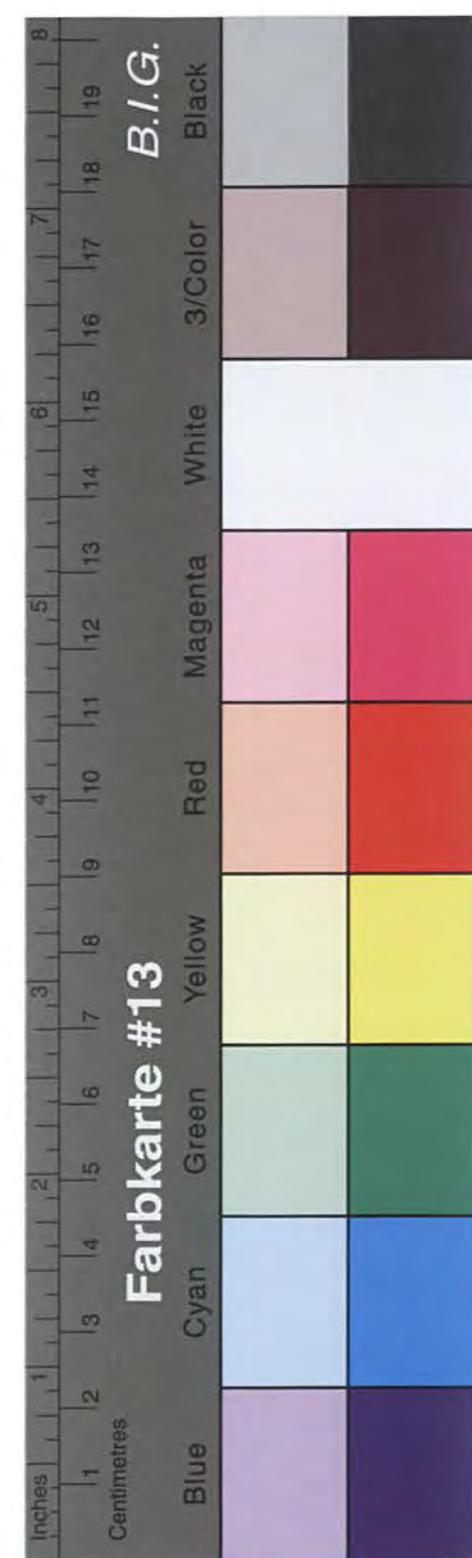


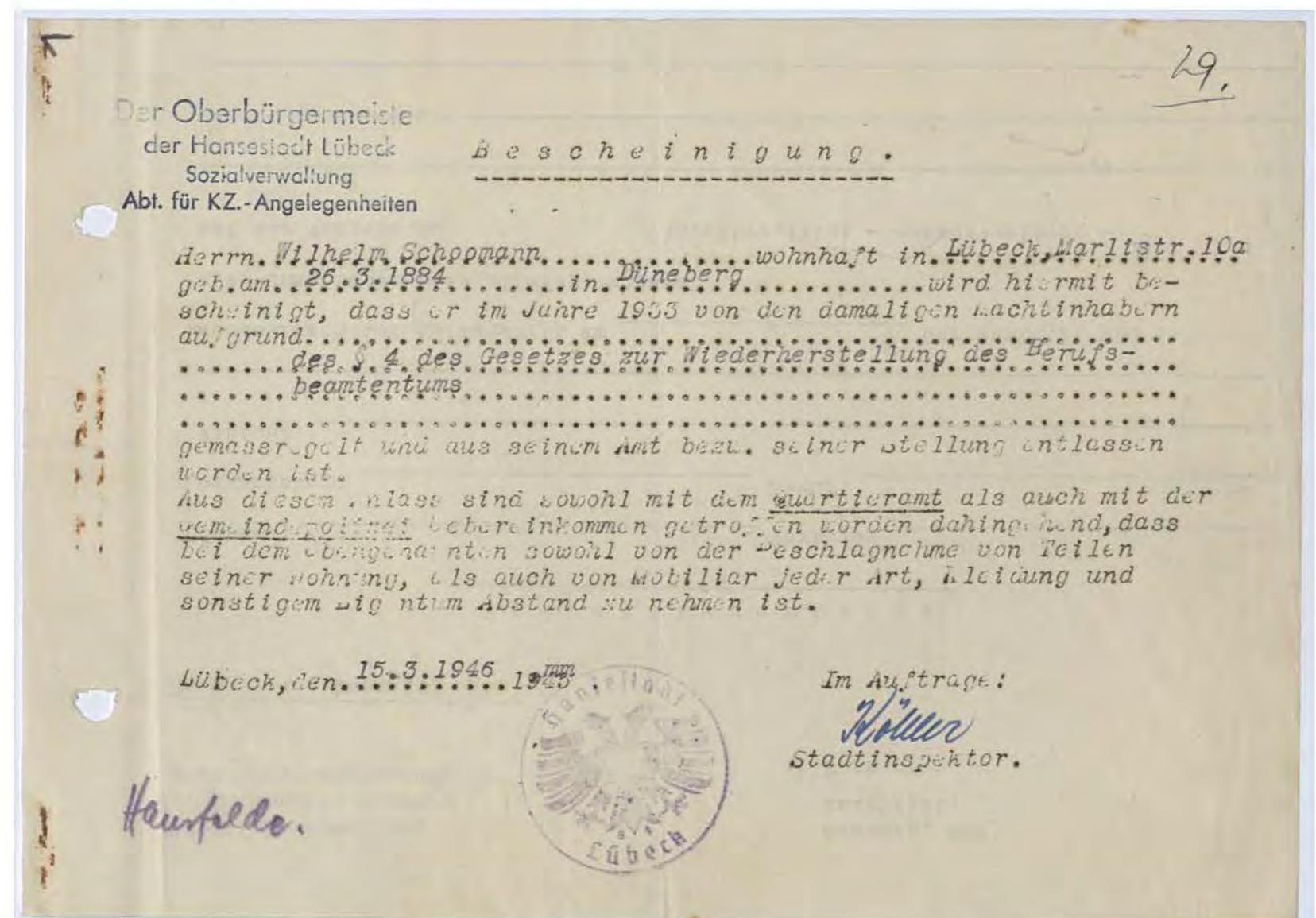
Kreisarchiv Stormarn B2



Kreisarchiv Stormarn

Bestand **B 2**

817



Kreisarchiv Stormalm B2



Gemeindeverwaltung der Hansestadt Hamburg Gesundheitsverwaltung	Hamburg, den Anschrift: Fernspr.:
(Stempel der Anstalt)	
<u>Verletztenanzeige.</u>	
Zuname: _____	Vorname: _____
Geburtstag: _____	Beruf: _____
Wohnung: _____	
wurde durch den Luftangriff am _____ Uhr verletzt und ist hier unmittelbar eingeliefert worden.	
Art der Verletzung:	leichtverletzt - schwerverletzt - +)
VDP (OL-KS-Vielfachmarken)	
Sondermarken	
Grußmarken	
Oeff.	

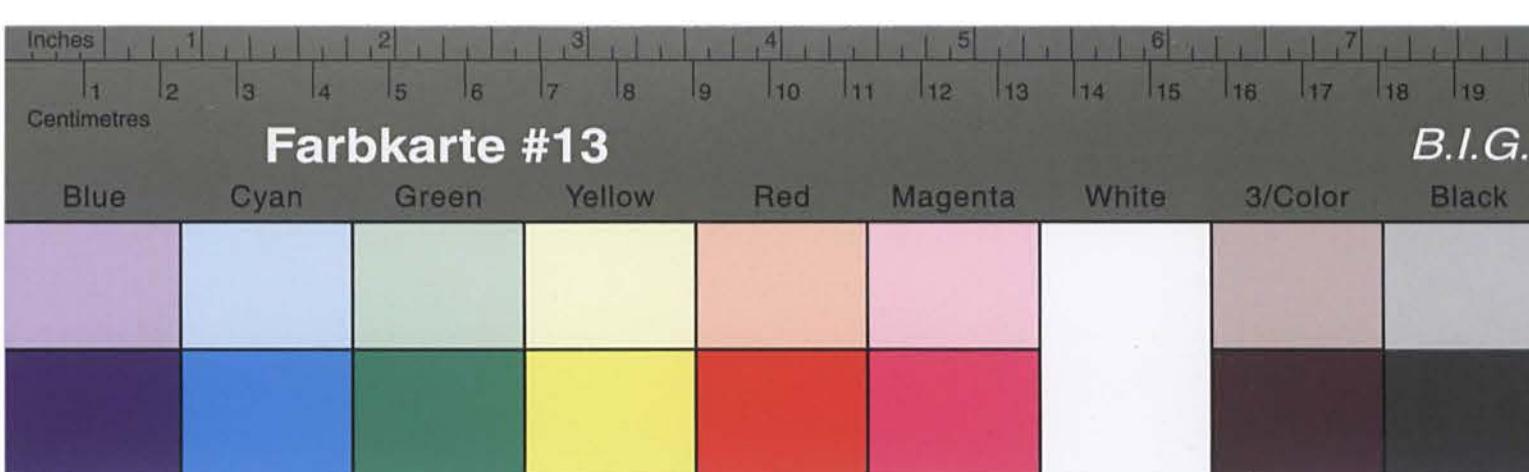
Kreisarchiv Stormann B2



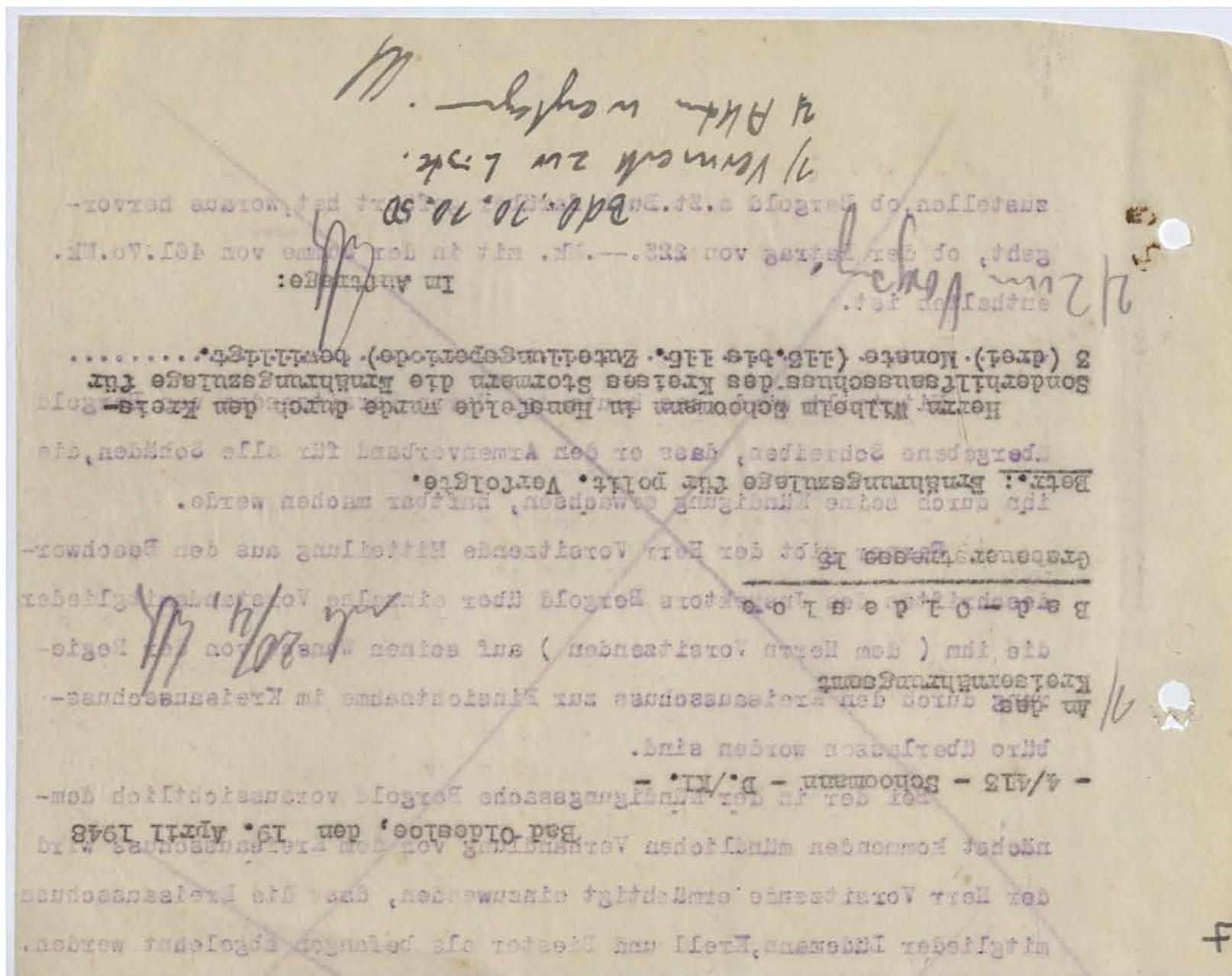
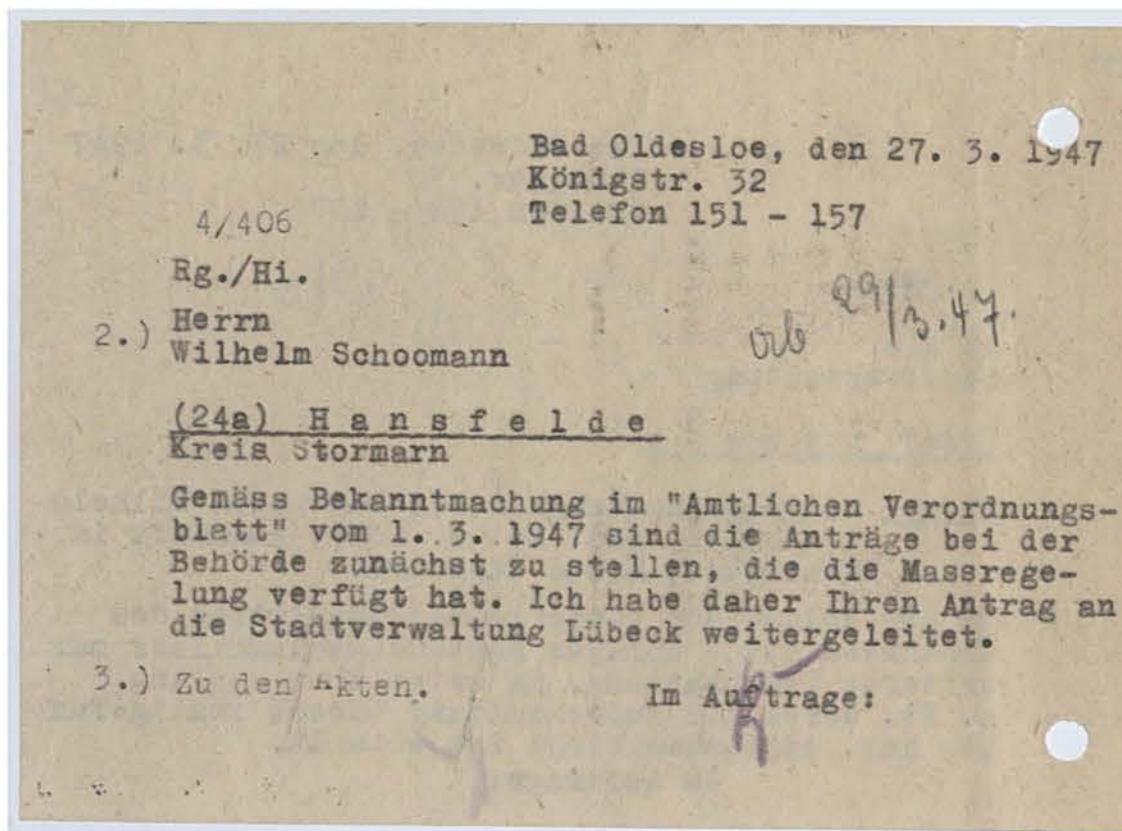
6
Bad Oldesloe, den 27. 3. 1947
Königstr. 32
Telefon 151 - 157
4/406
Rg./Hi. 29/3.47
1.) An die
Stadtverwaltung
(24a) Lübeck
Betr.: Wiedergutmachungsantrag des Herrn Wilhelm
Schoomann, geb. 26. 3. 1884, wohnhaft in
Hansfelde, Kreis Stormarn.
/ In der Anlage der Wiedergutmachungsantrag des
Genannten mit 3 Anlagen zuständigkeitsshalber zur
weiteren Veranlassung, da seine Massregelung
s. Zt. durch die Bauverwaltung Lübeck stattgefun-
den hat. Abgabenachricht ist erteilt.
Im Auftrage:

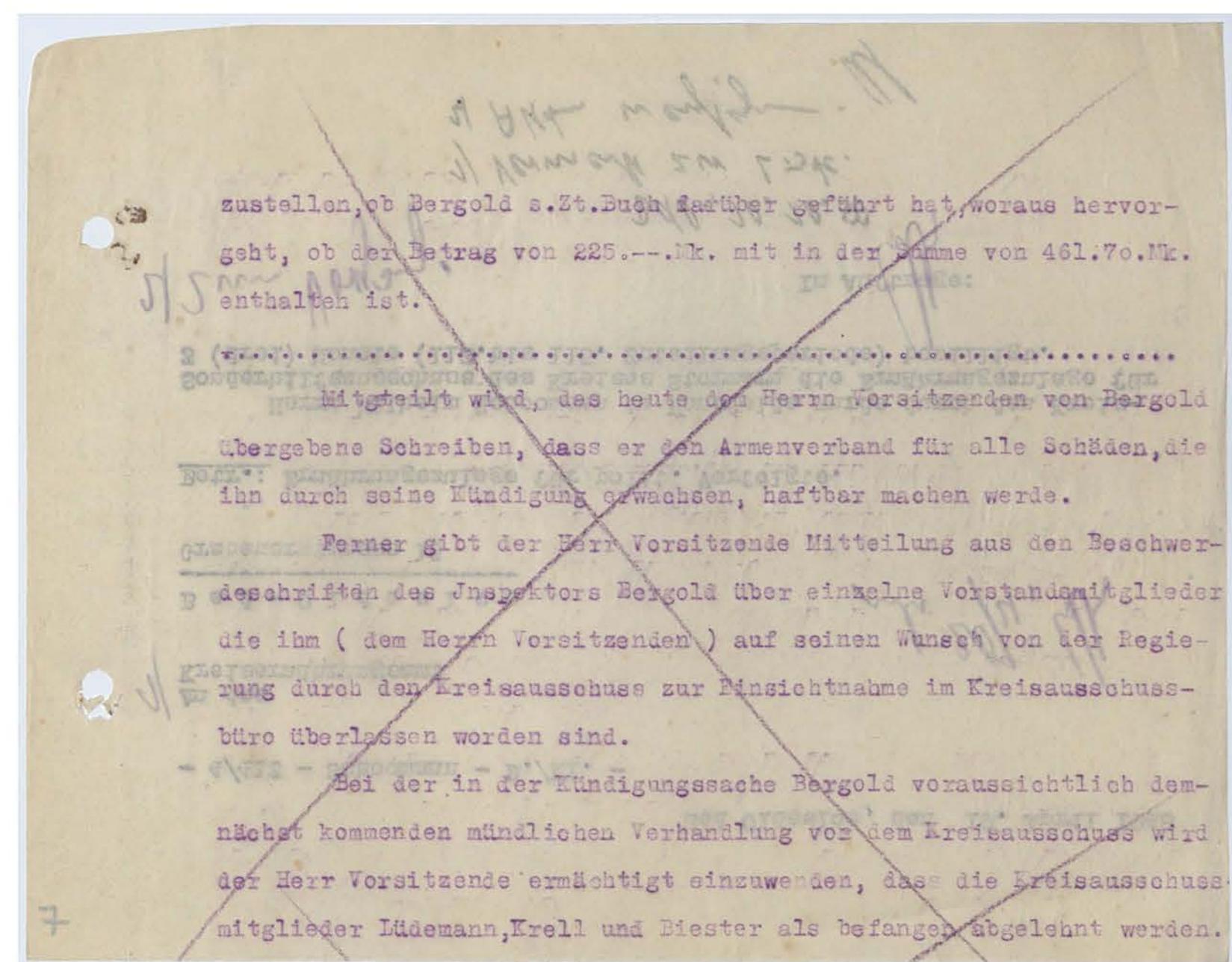
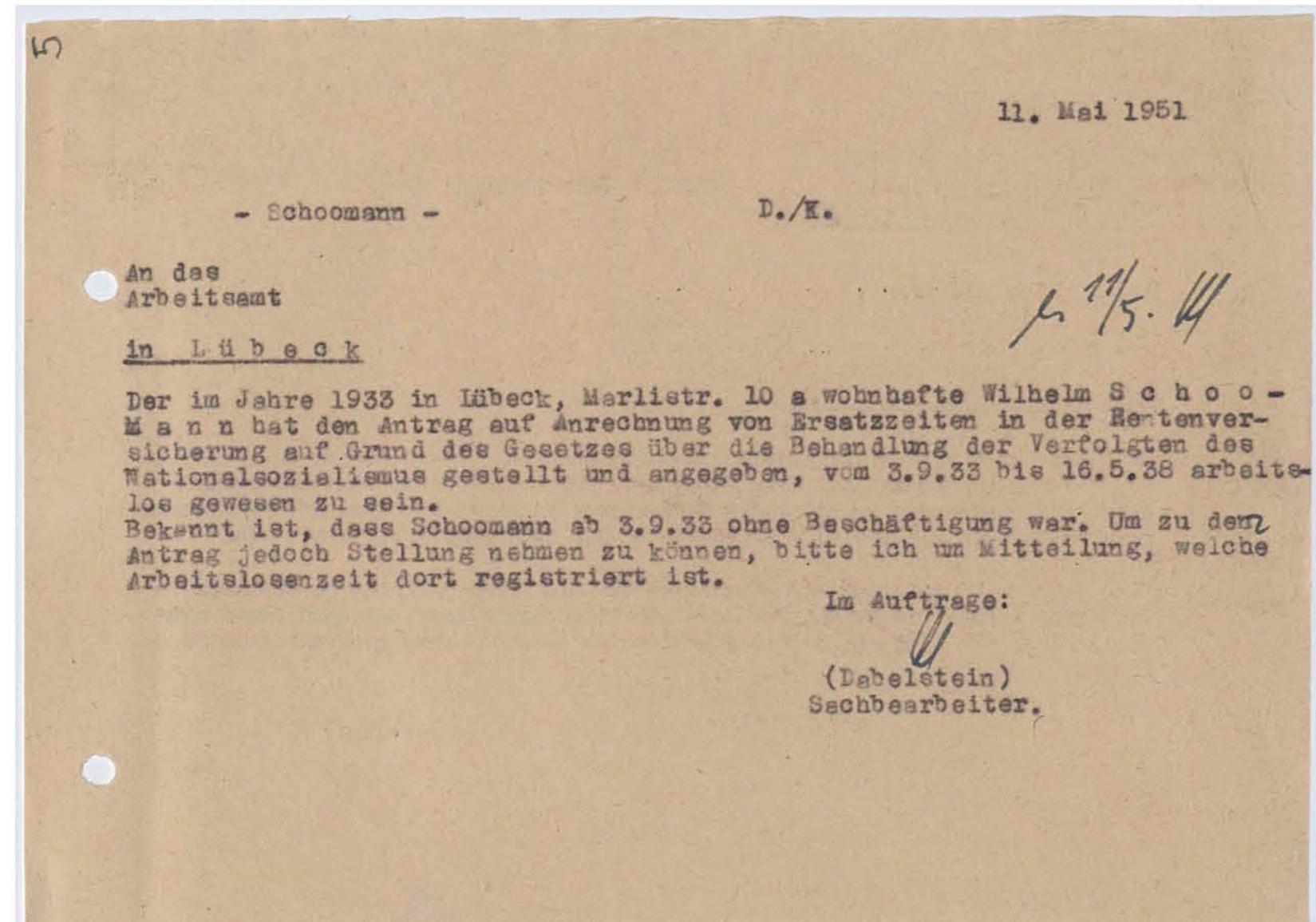
Kreisarchiv Stolmar B2





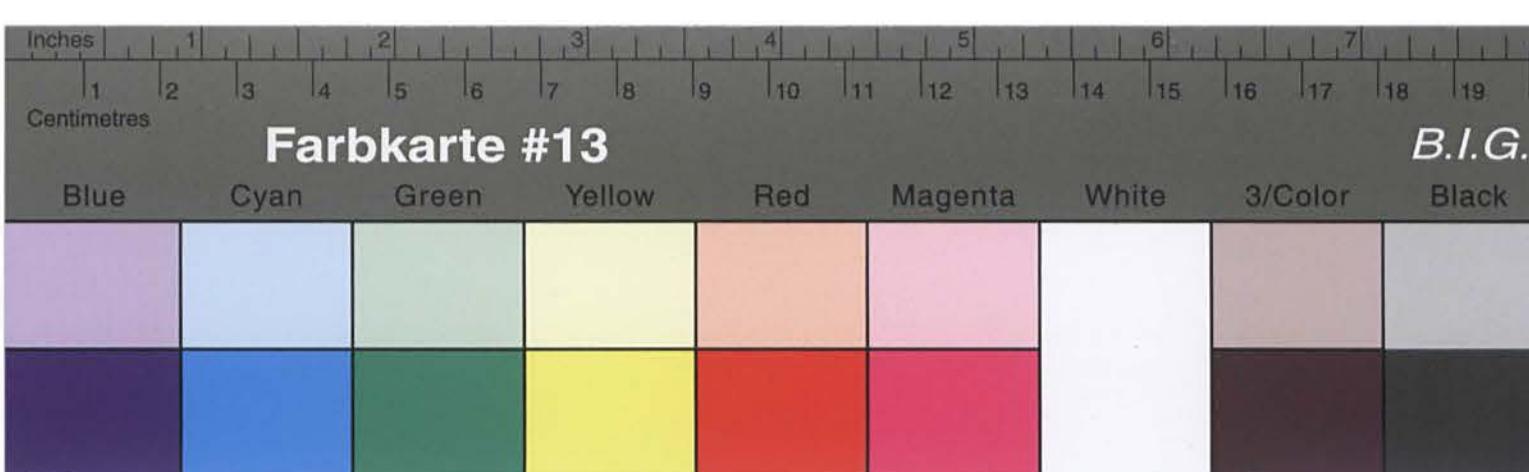
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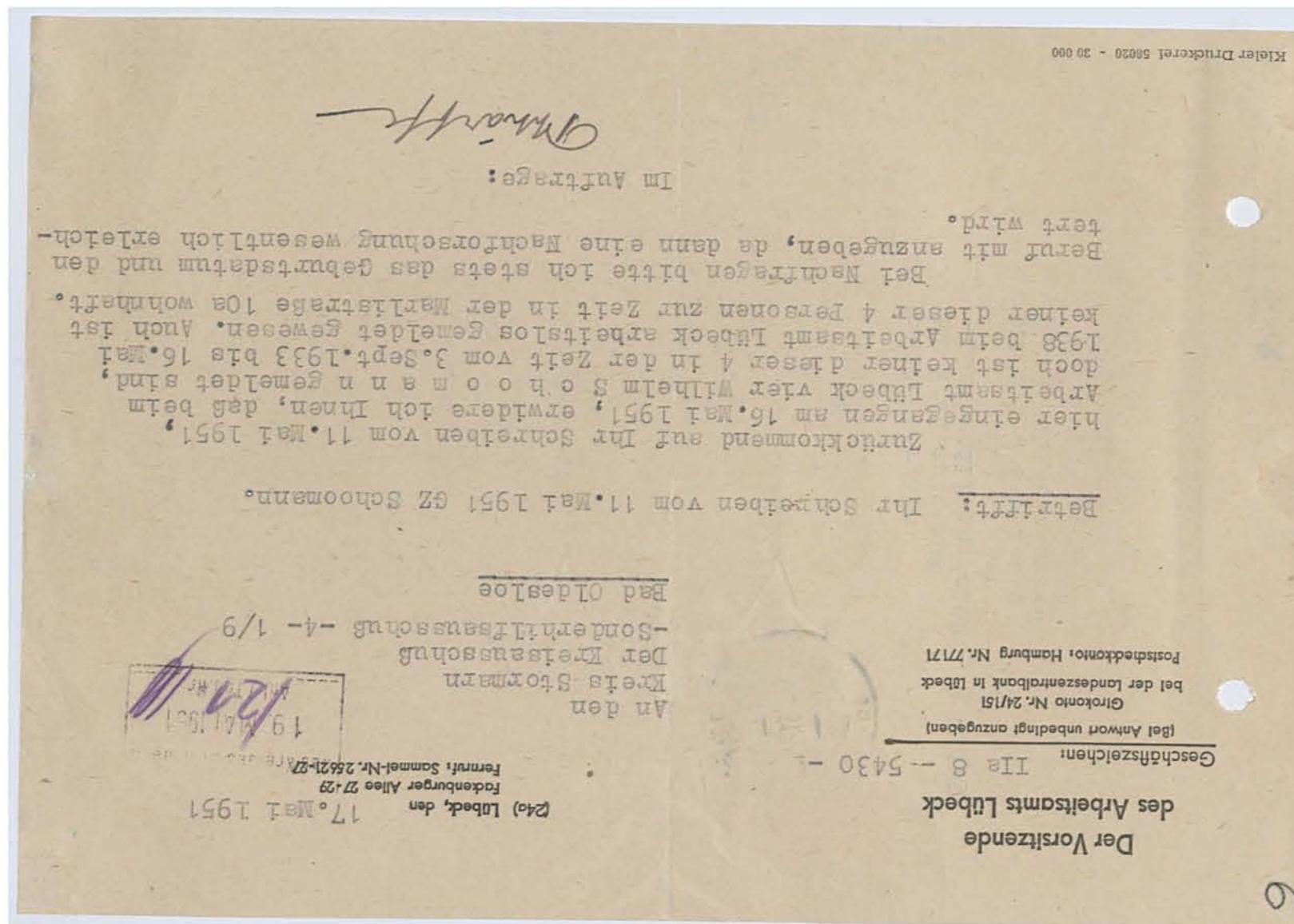
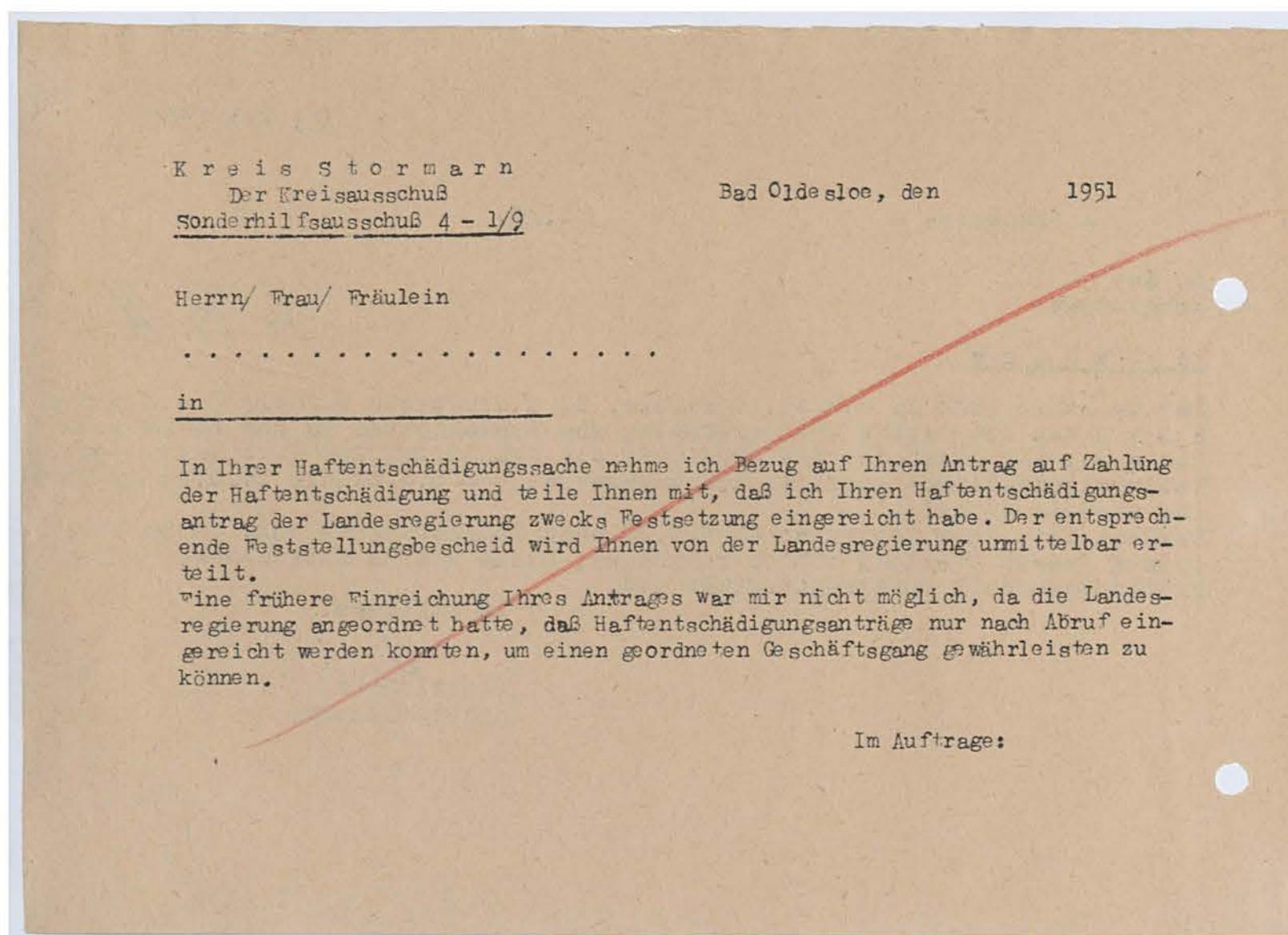


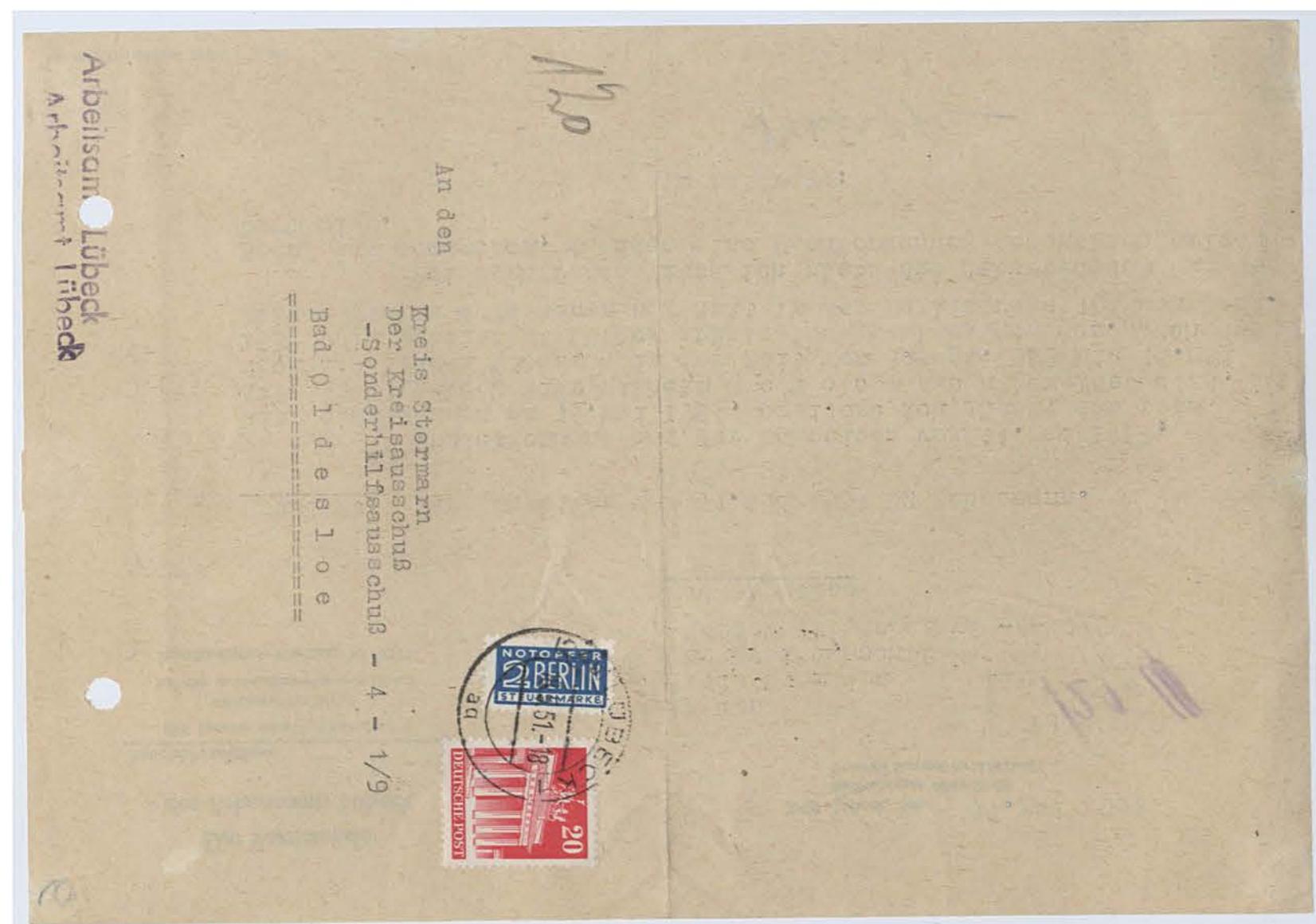
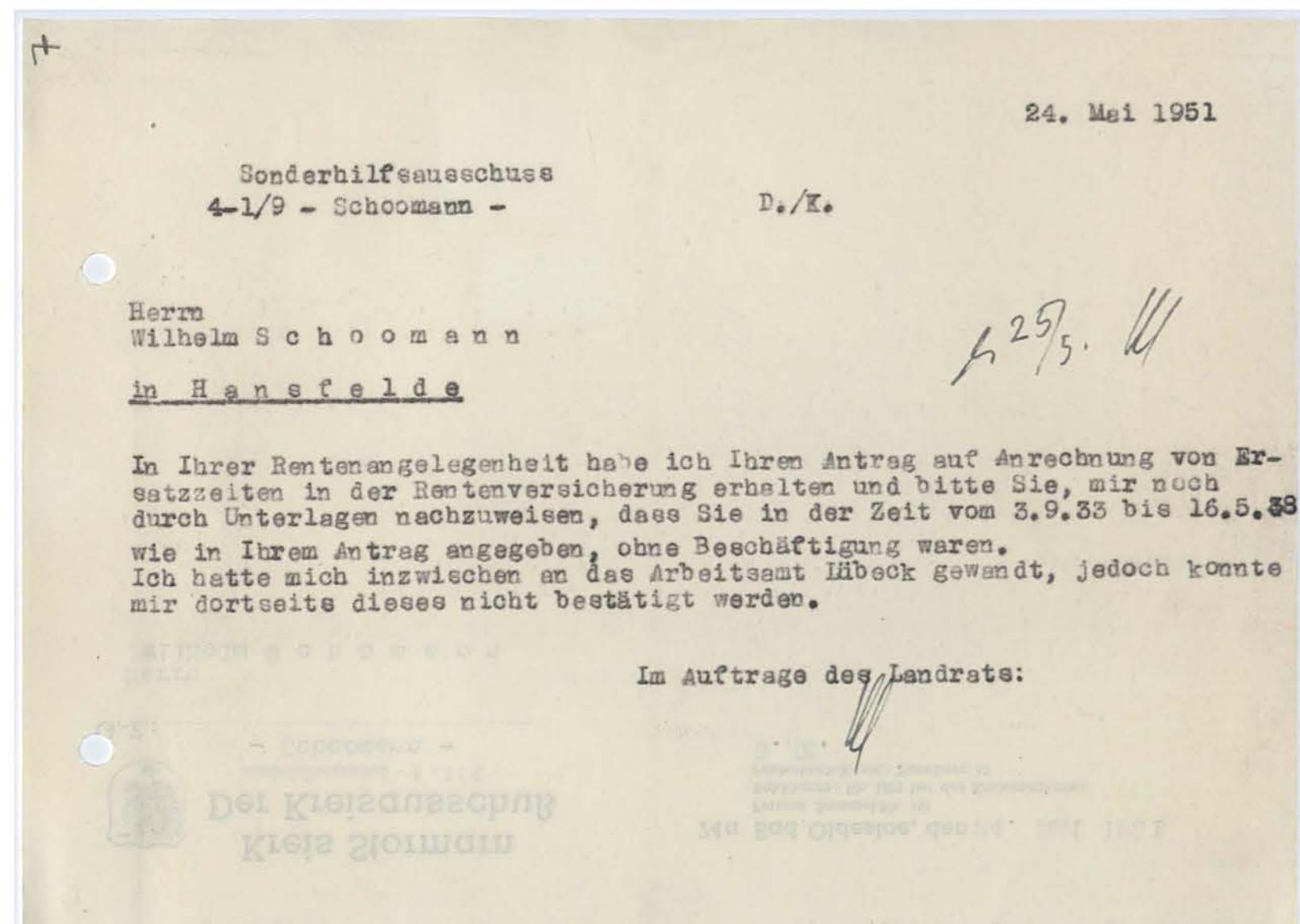
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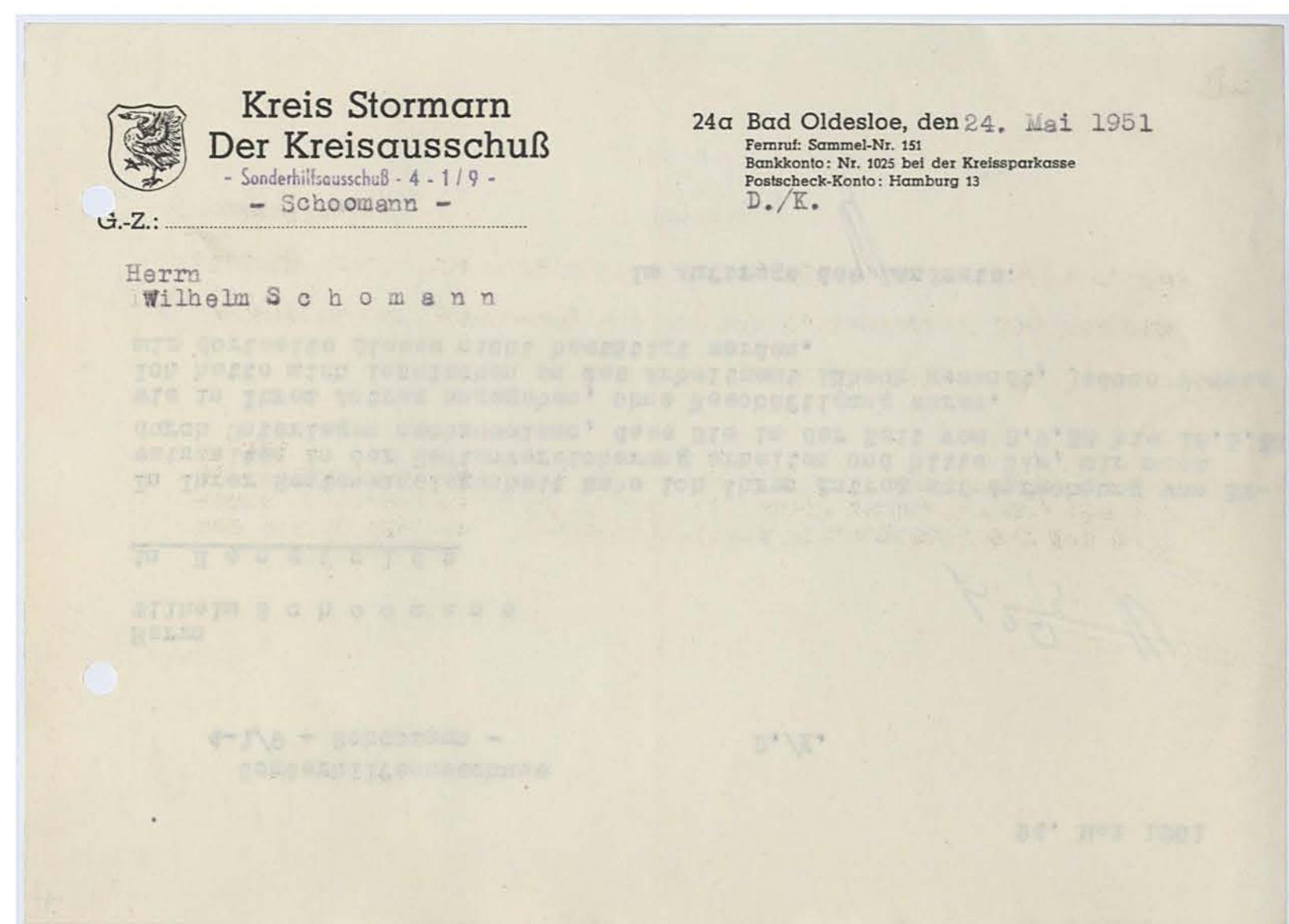
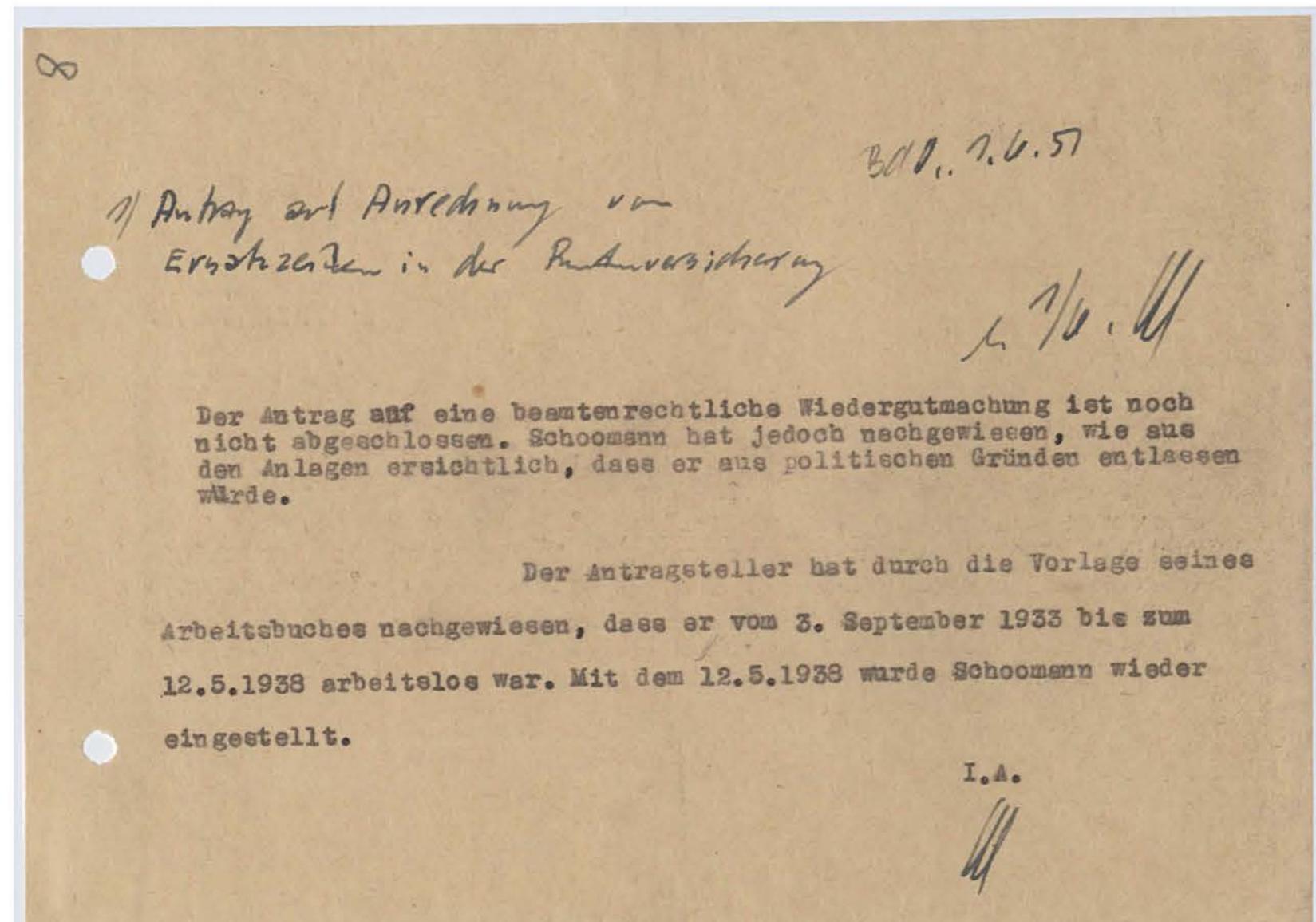
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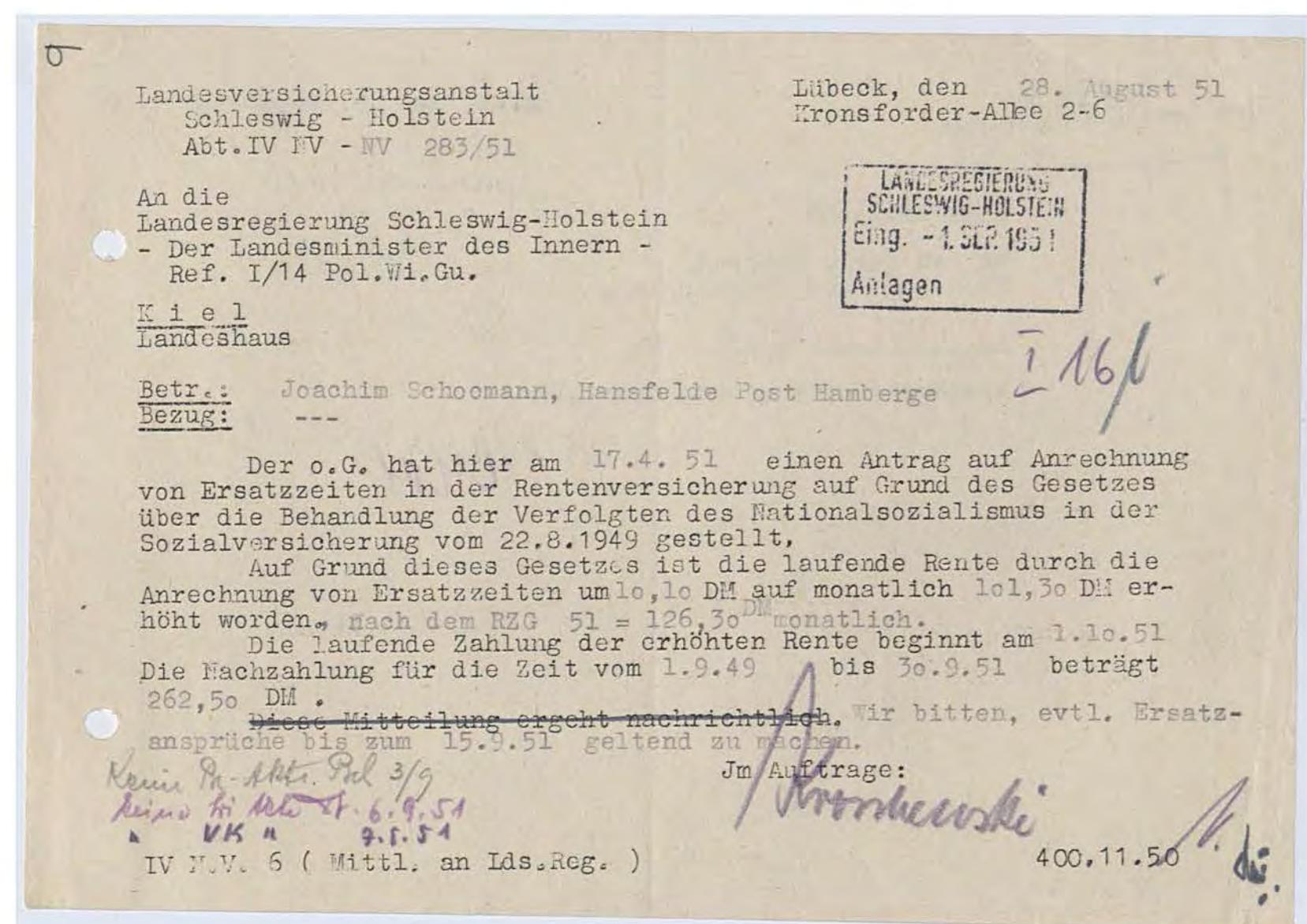
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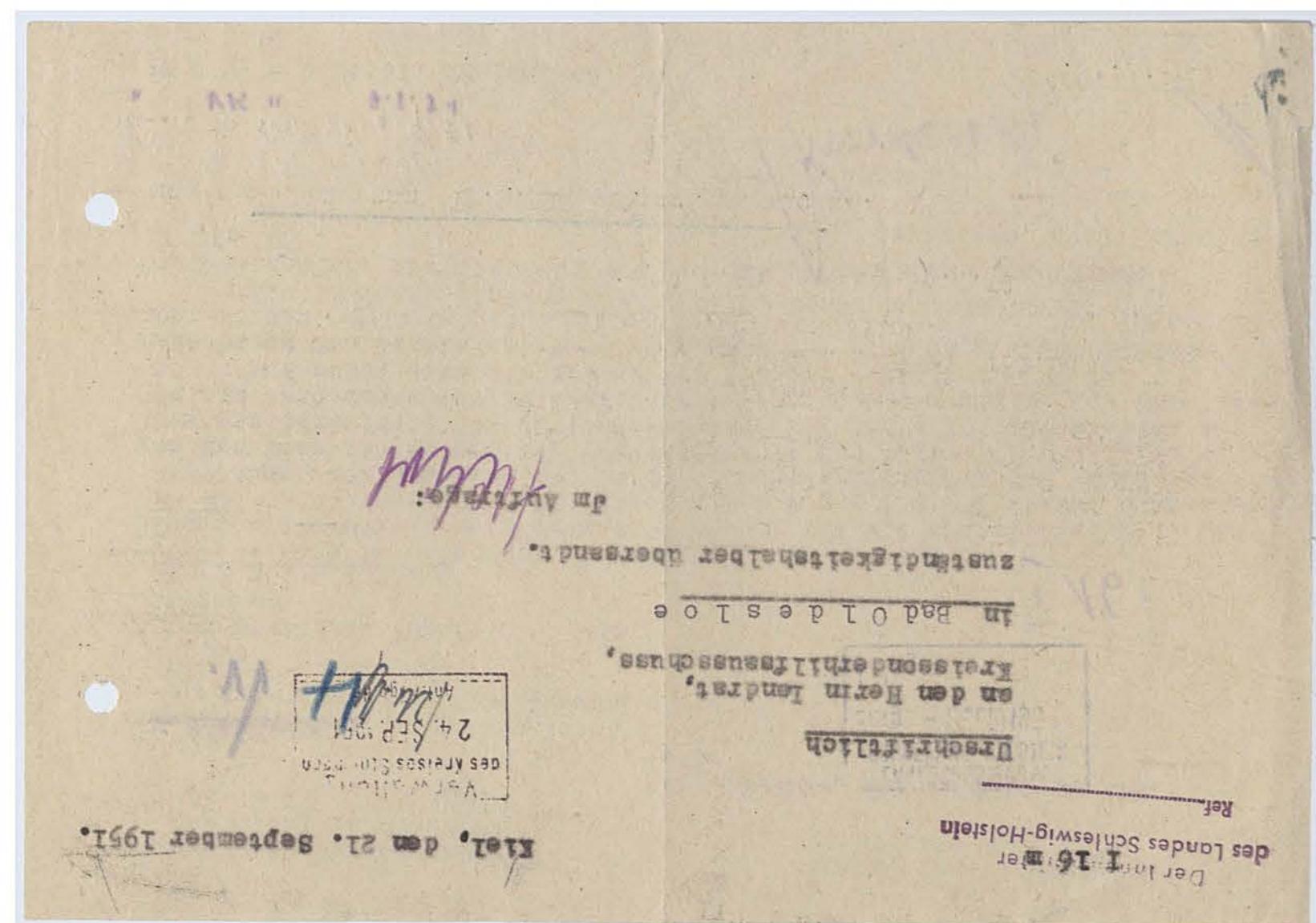
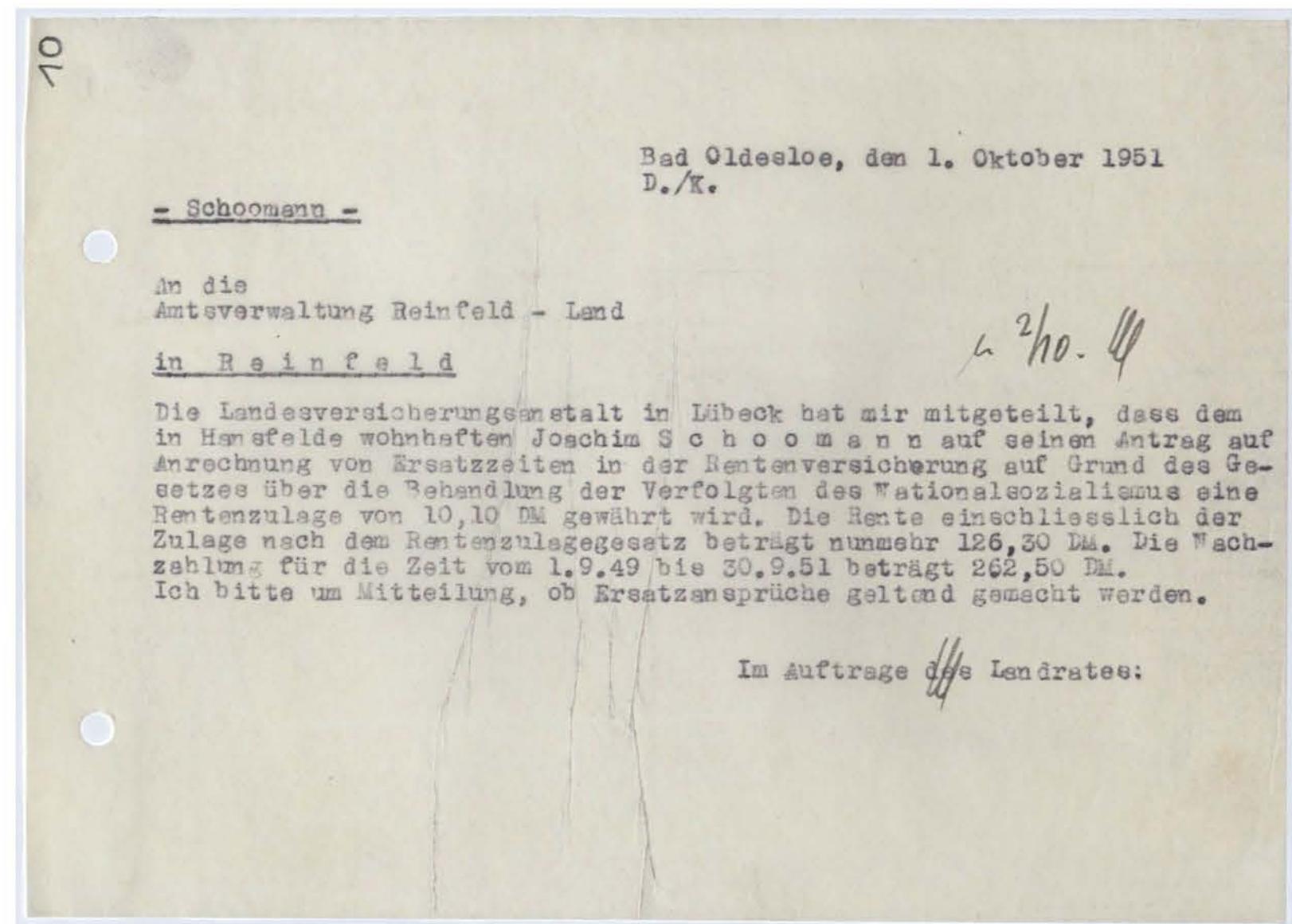
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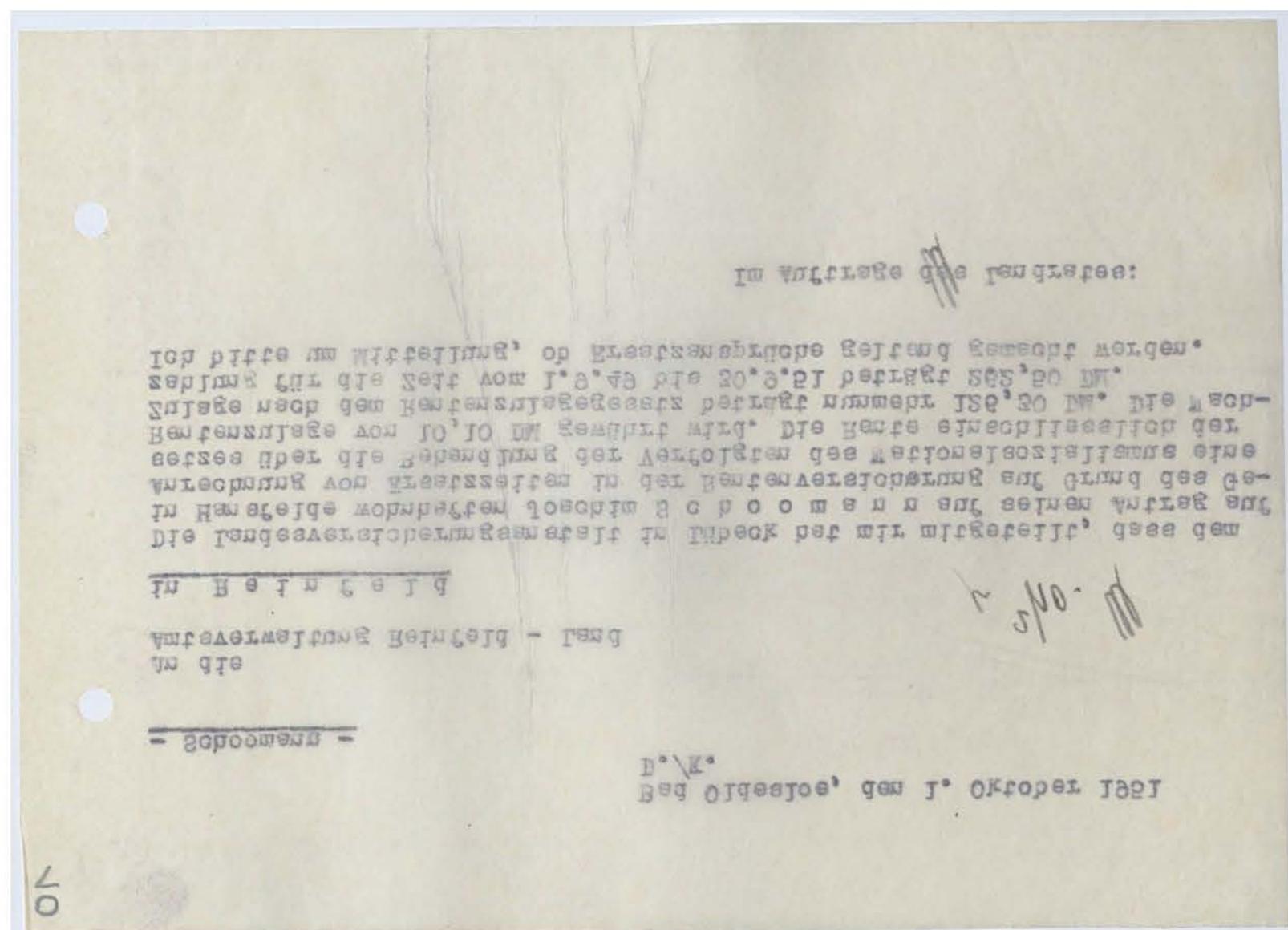
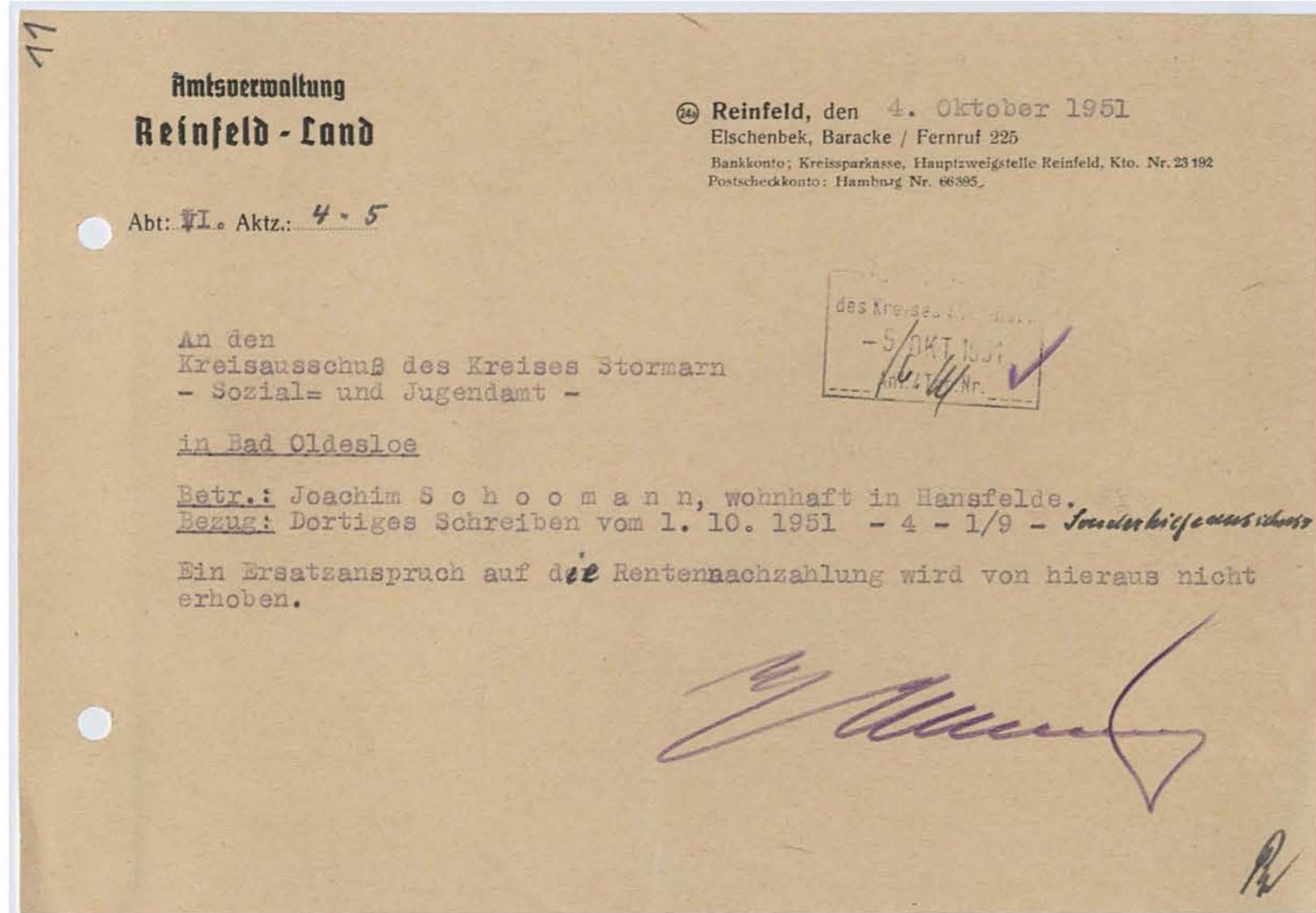
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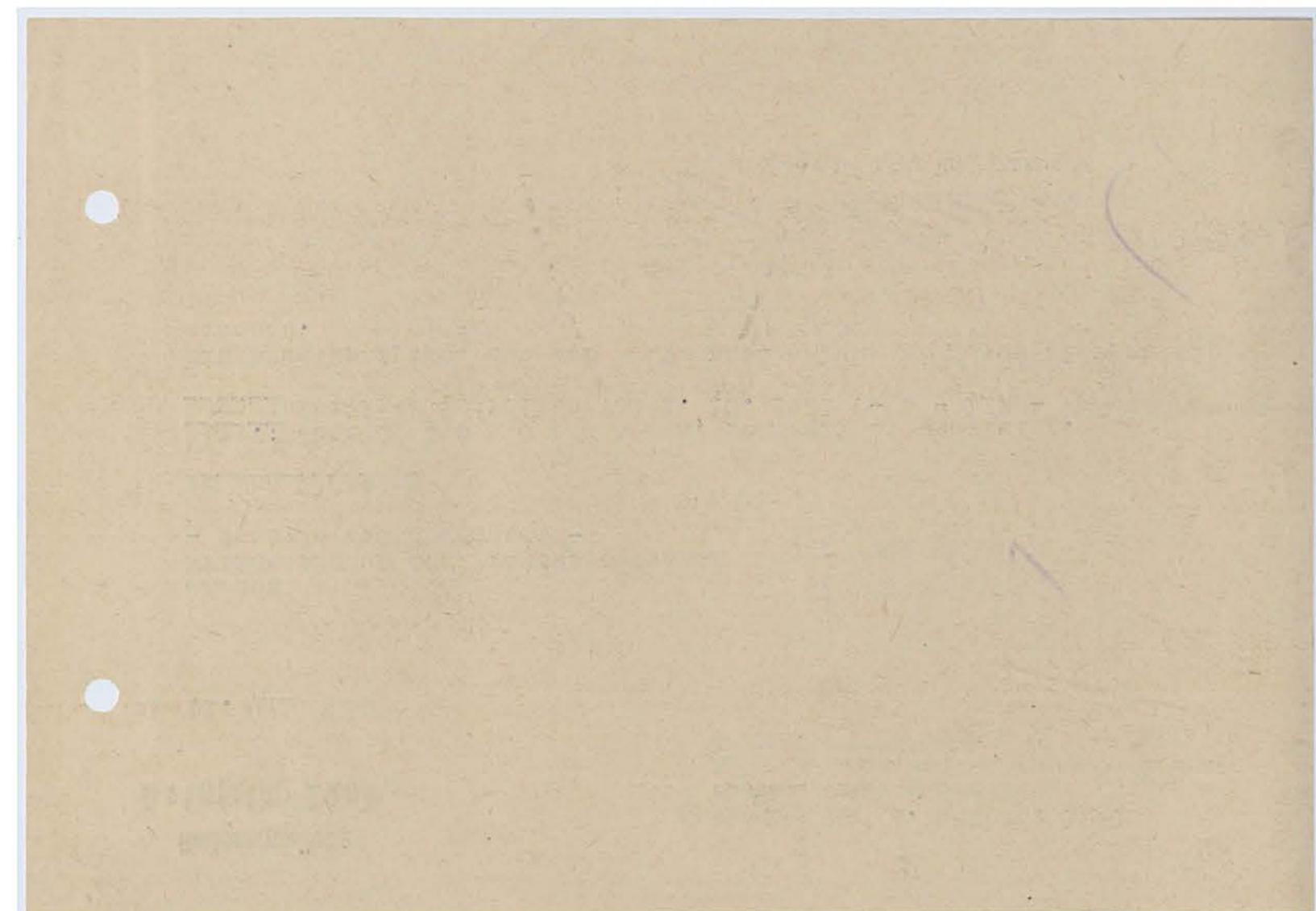
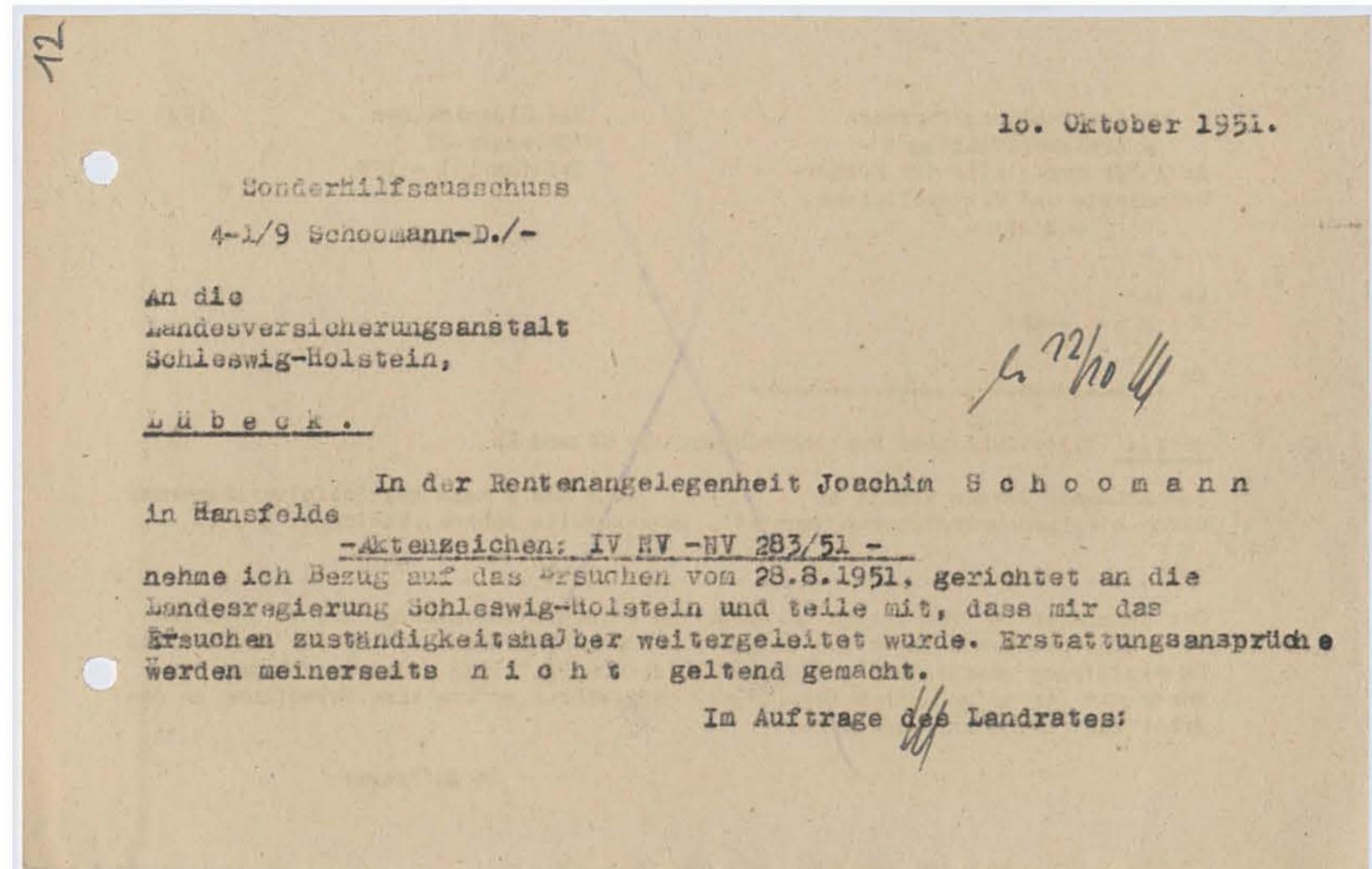
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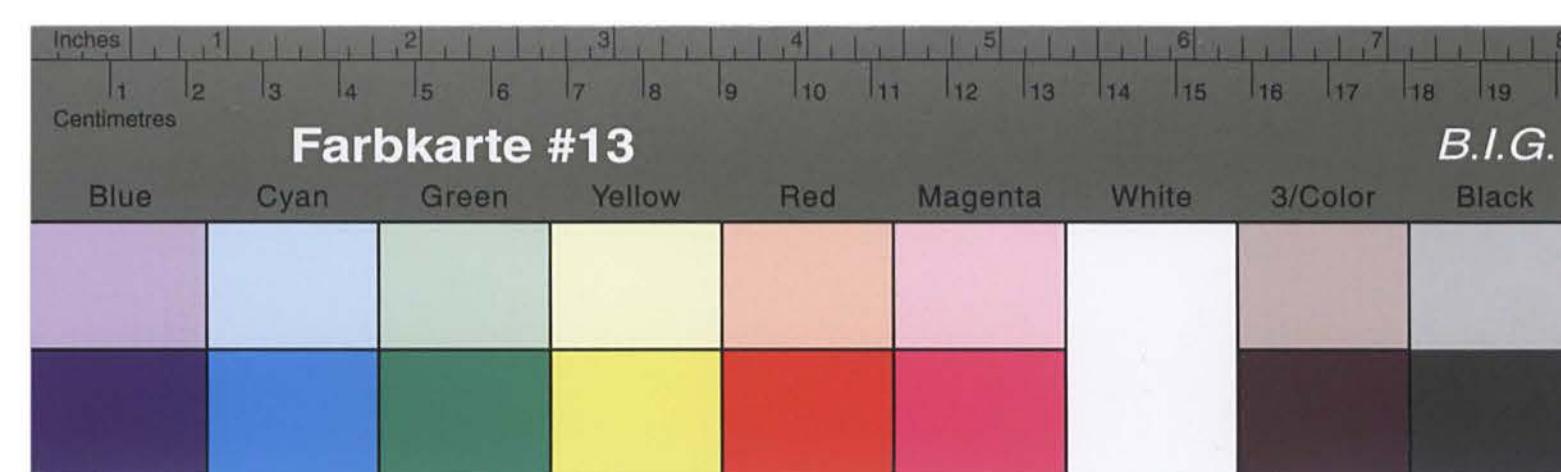
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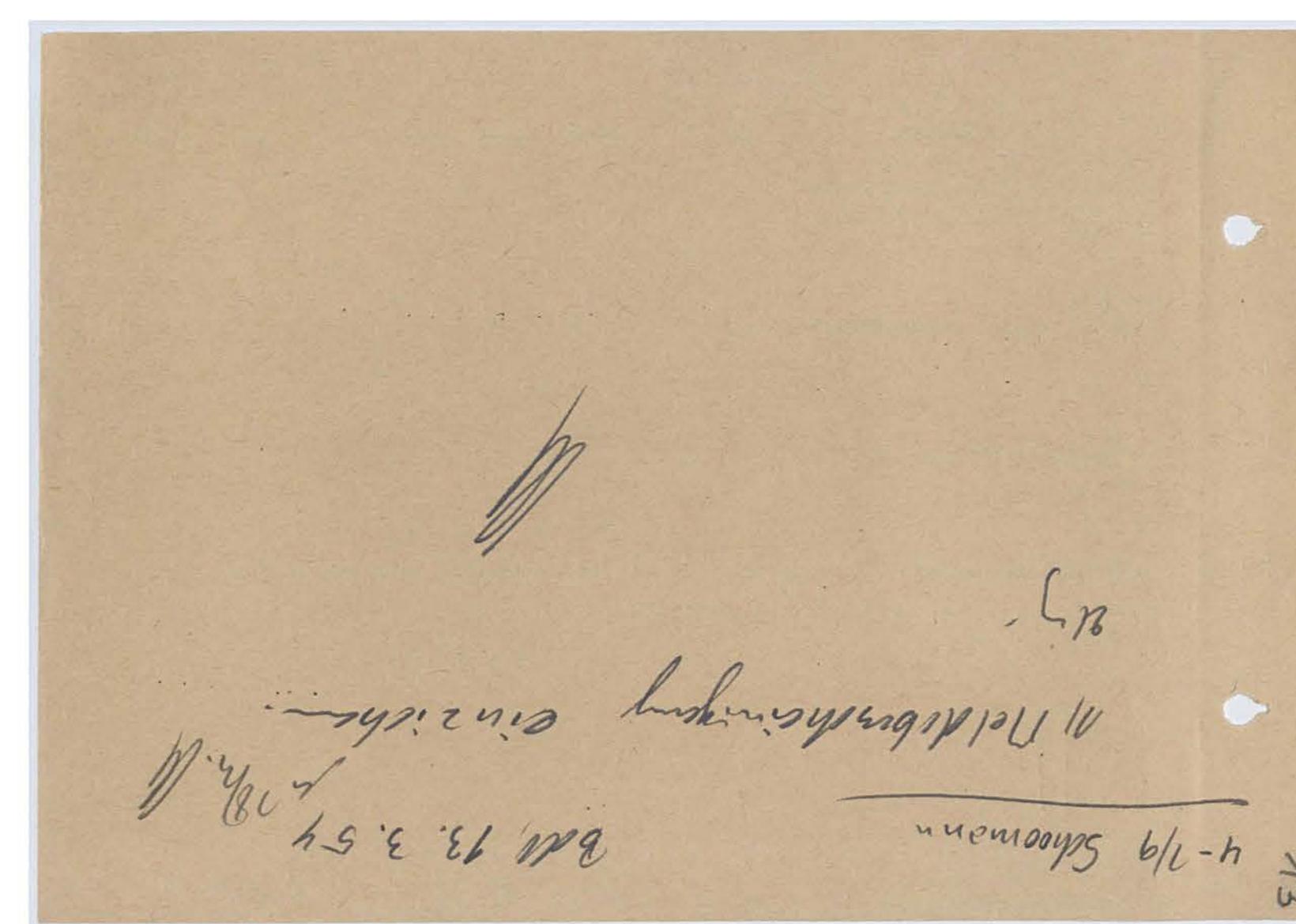
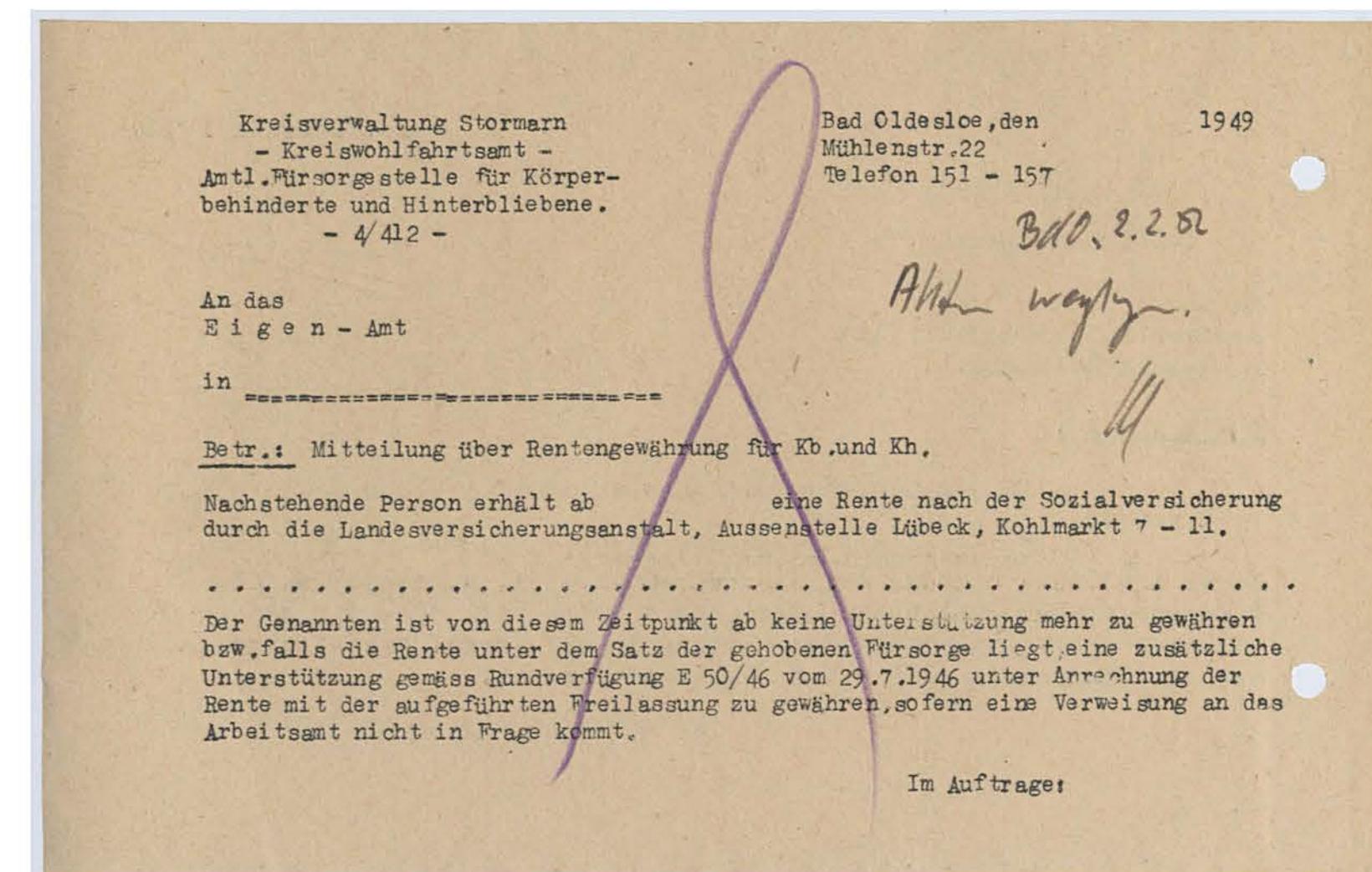


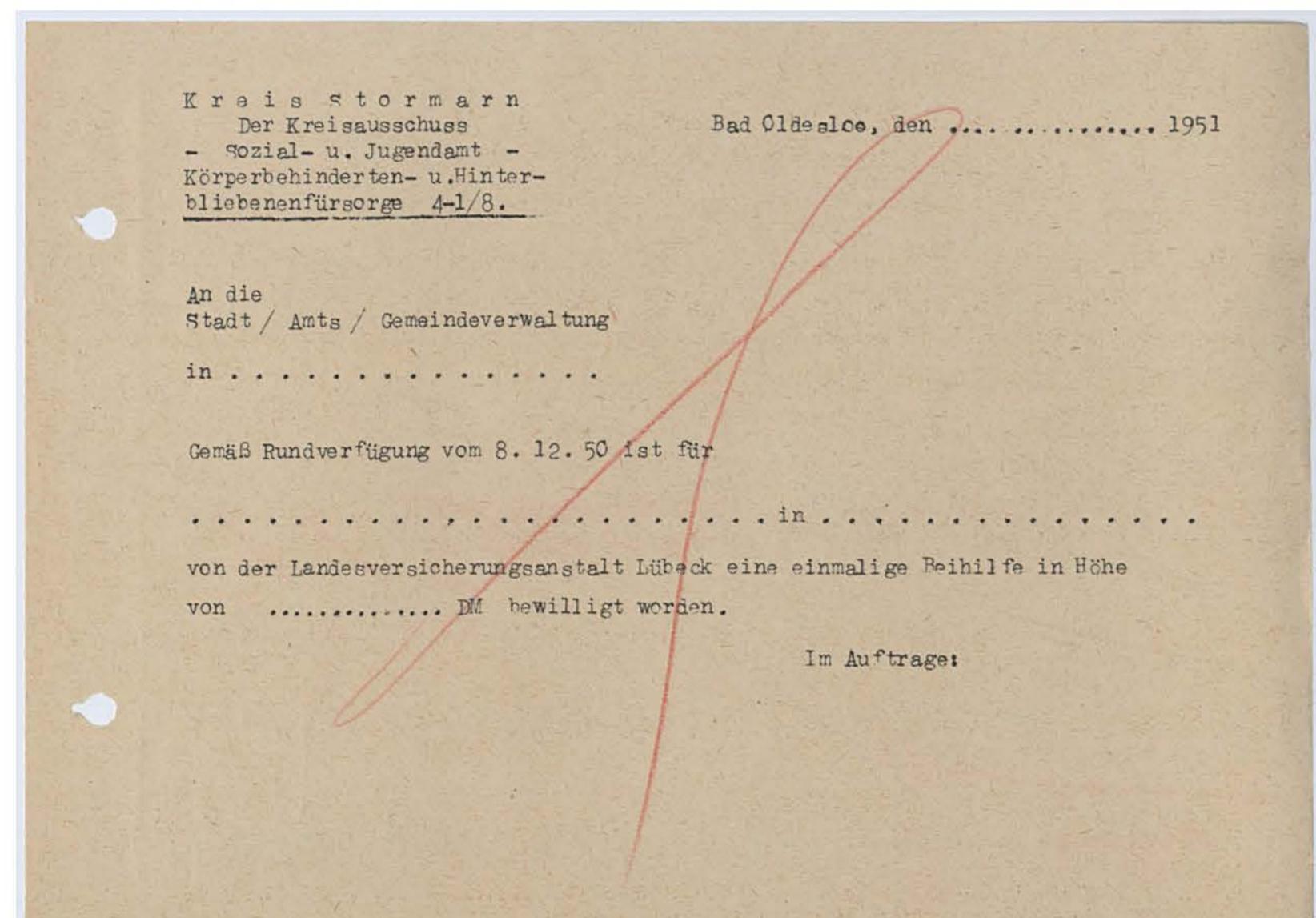
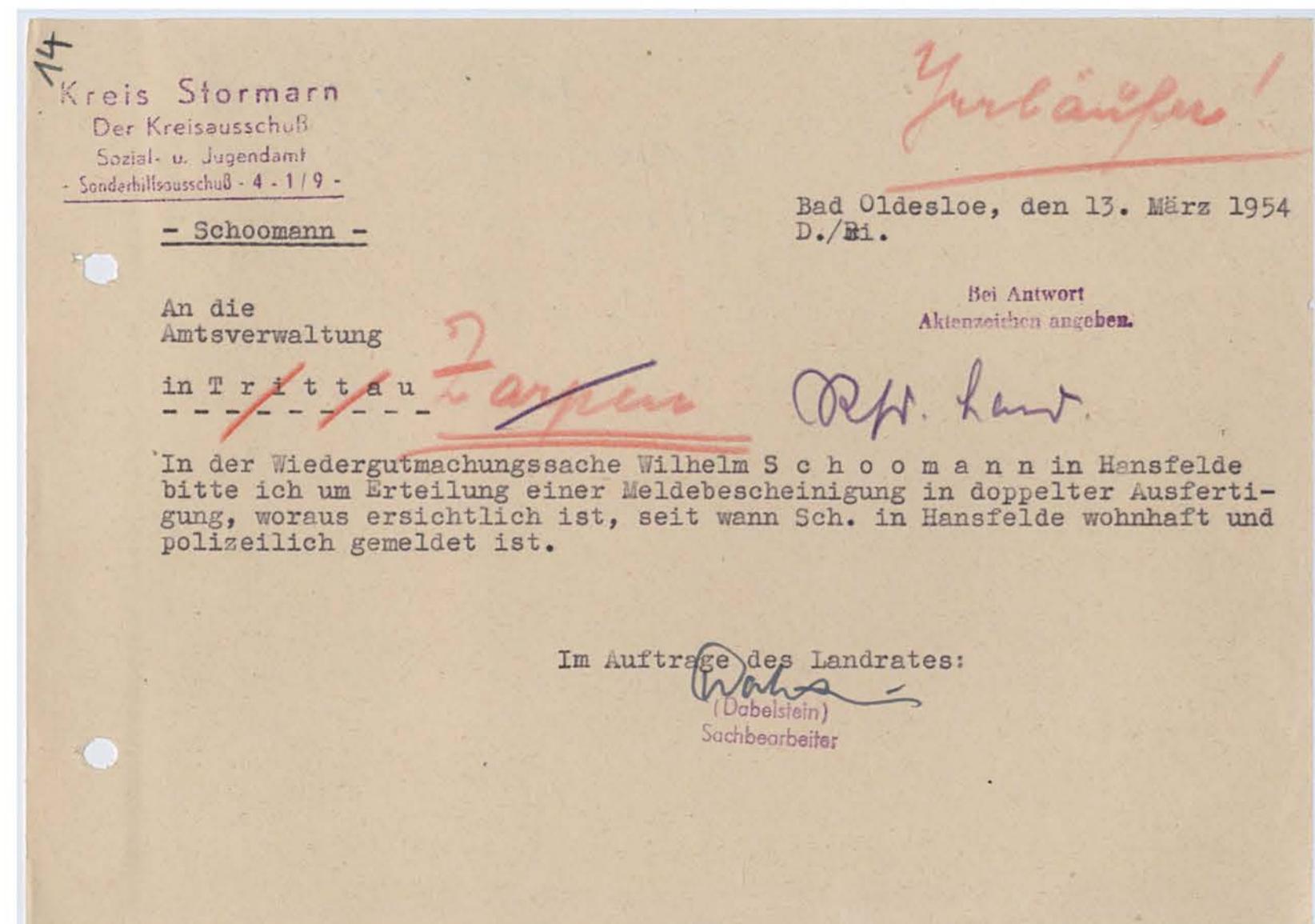
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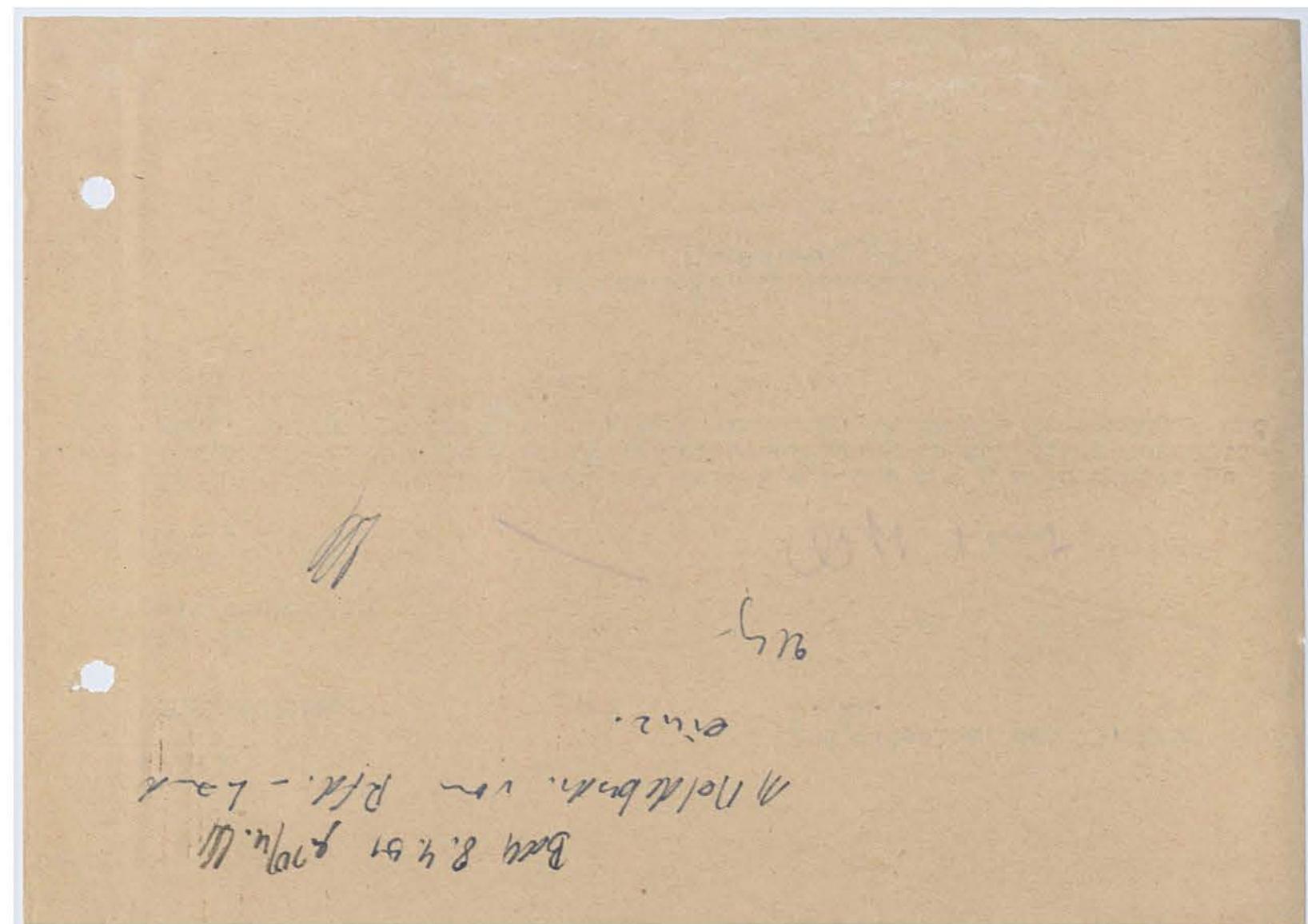
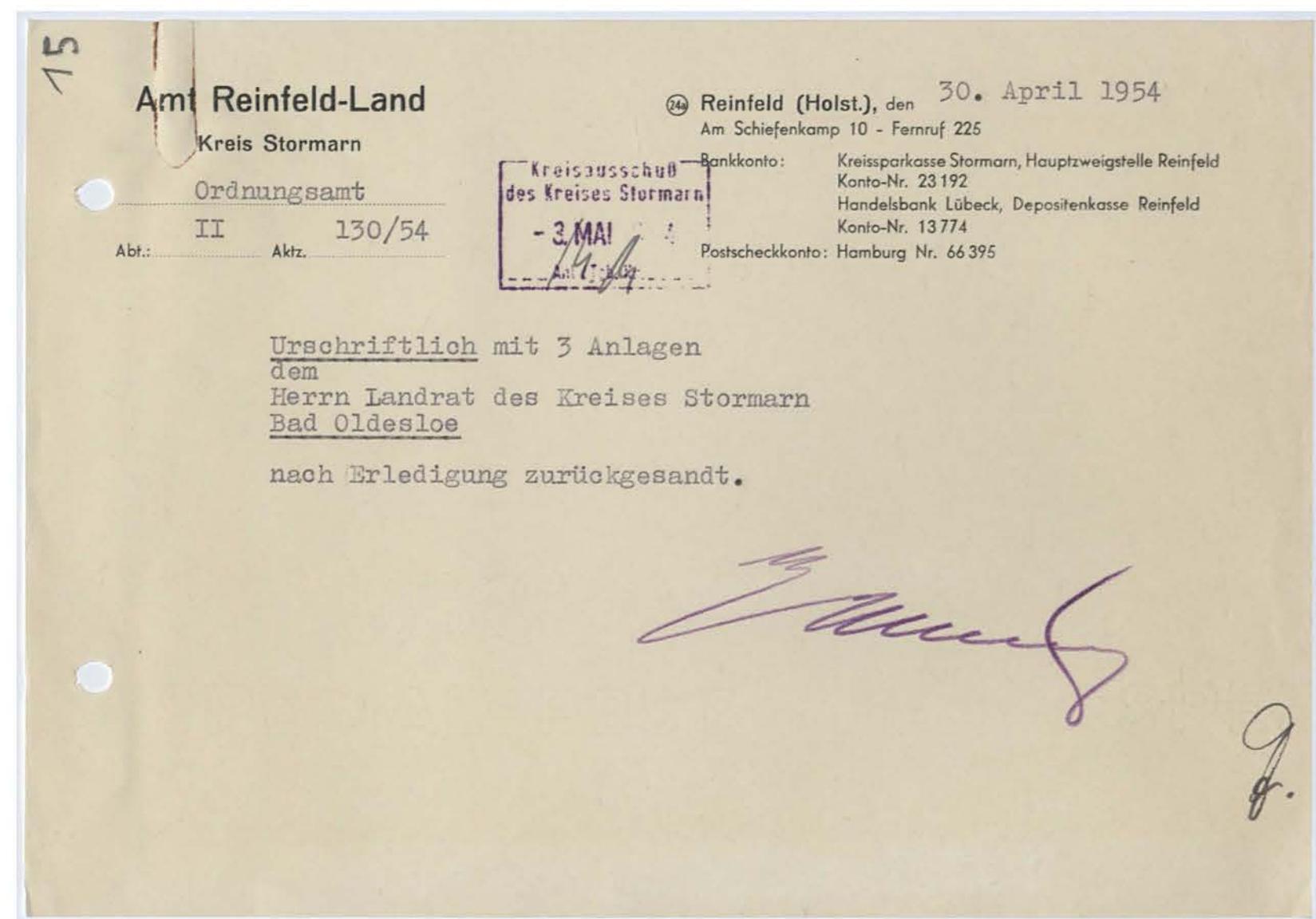




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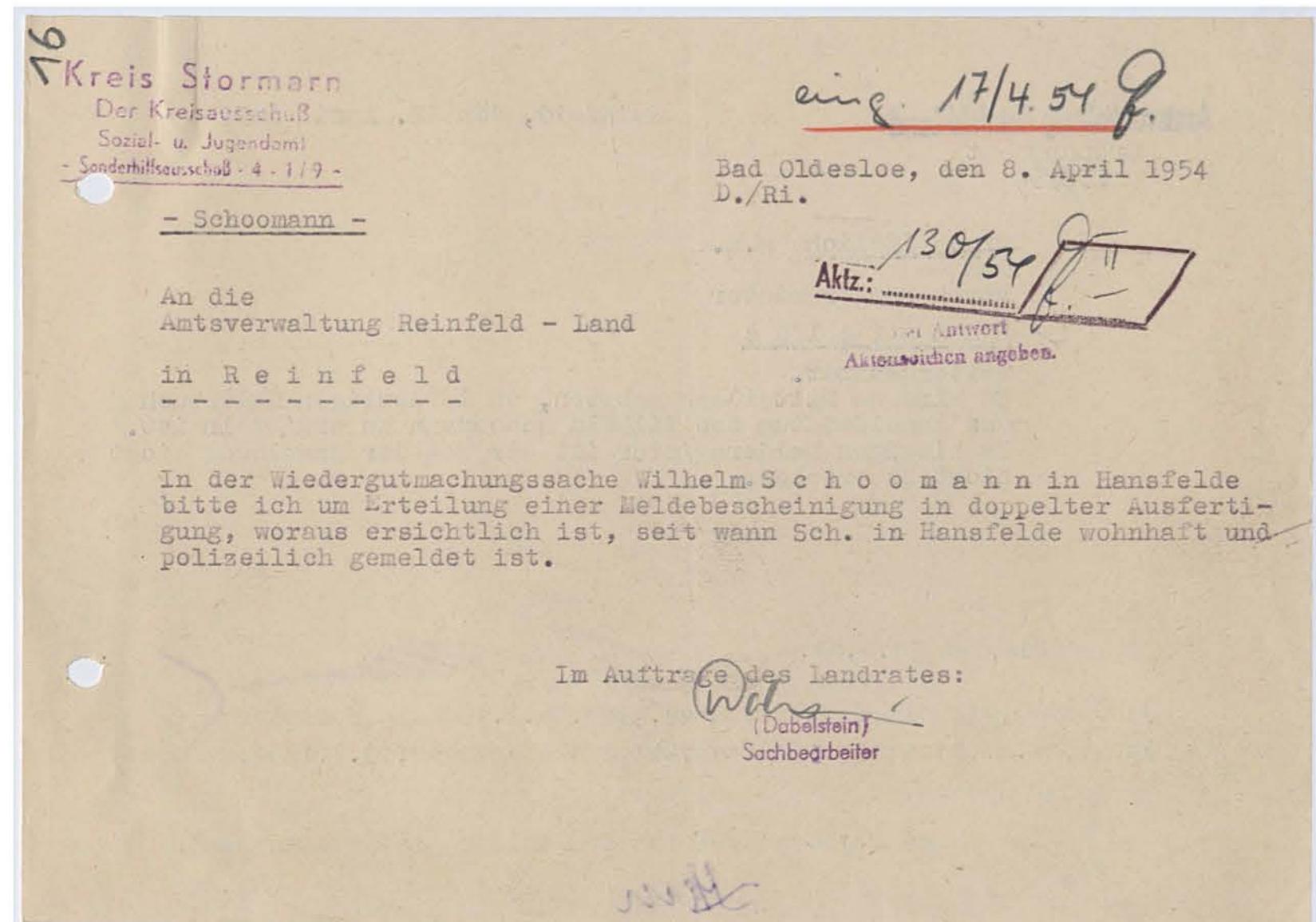






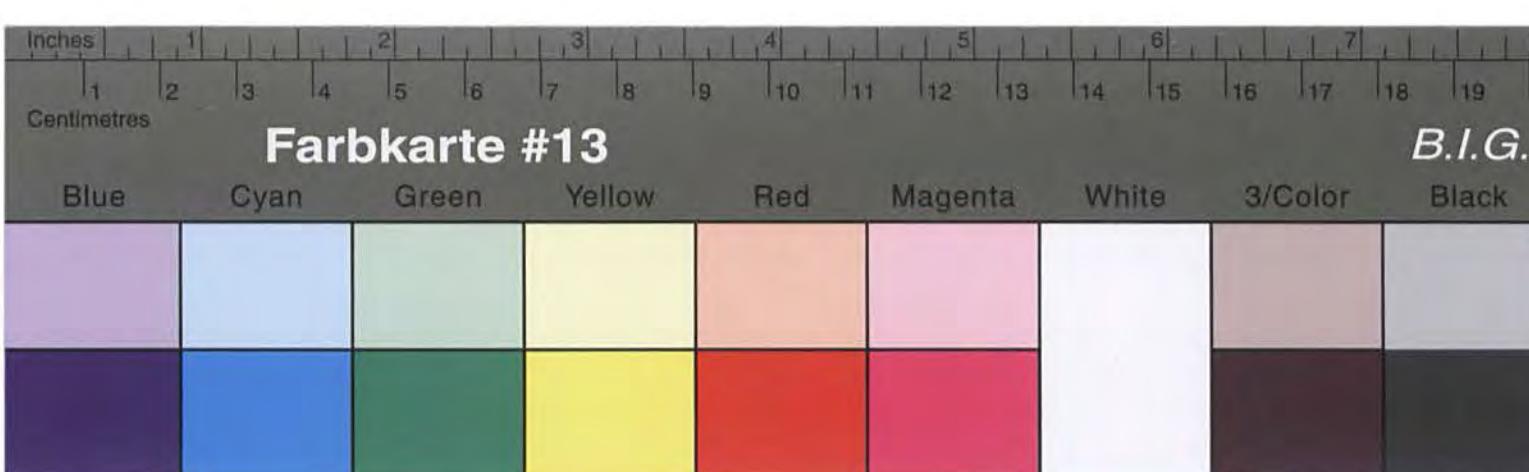
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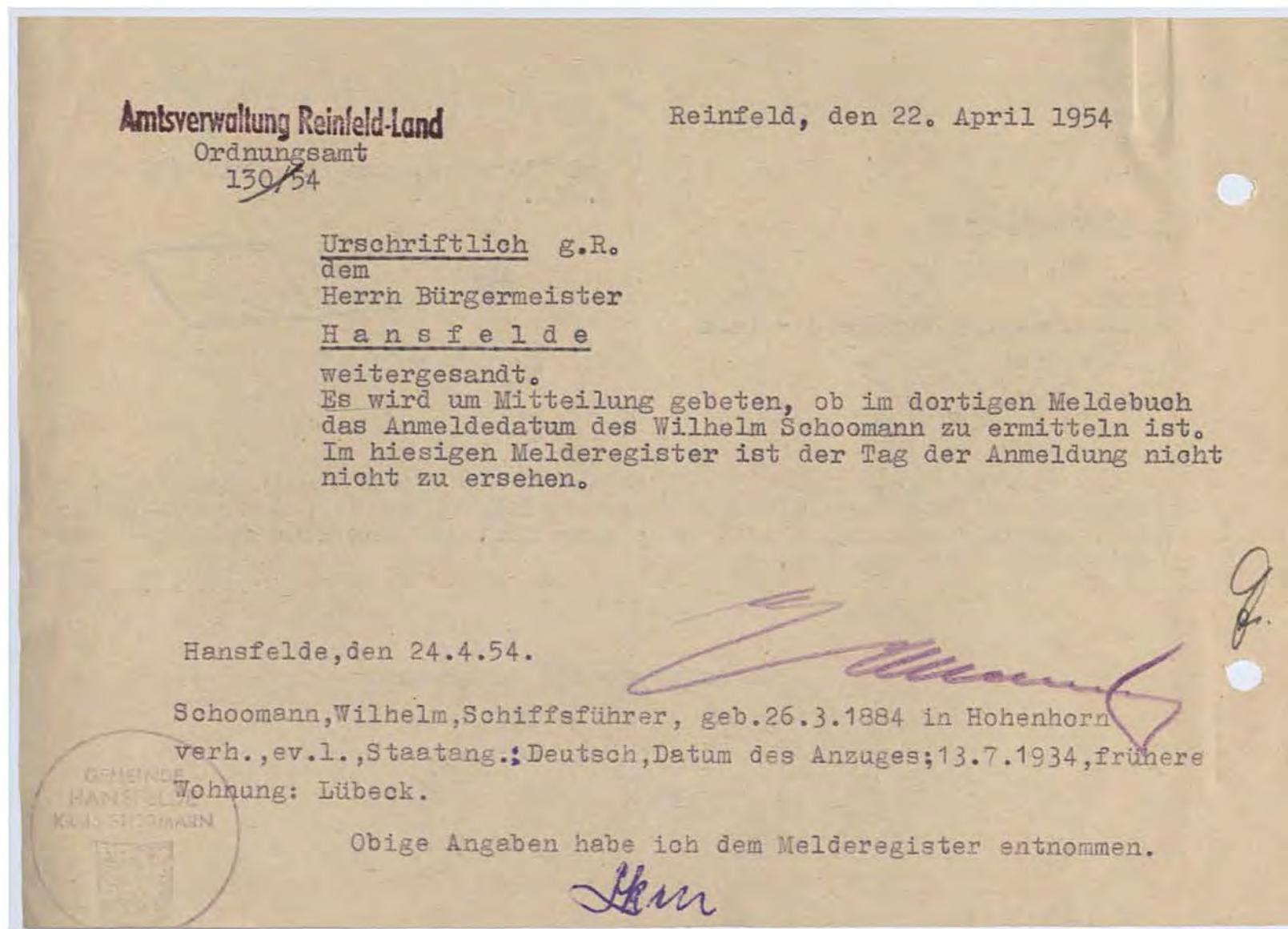


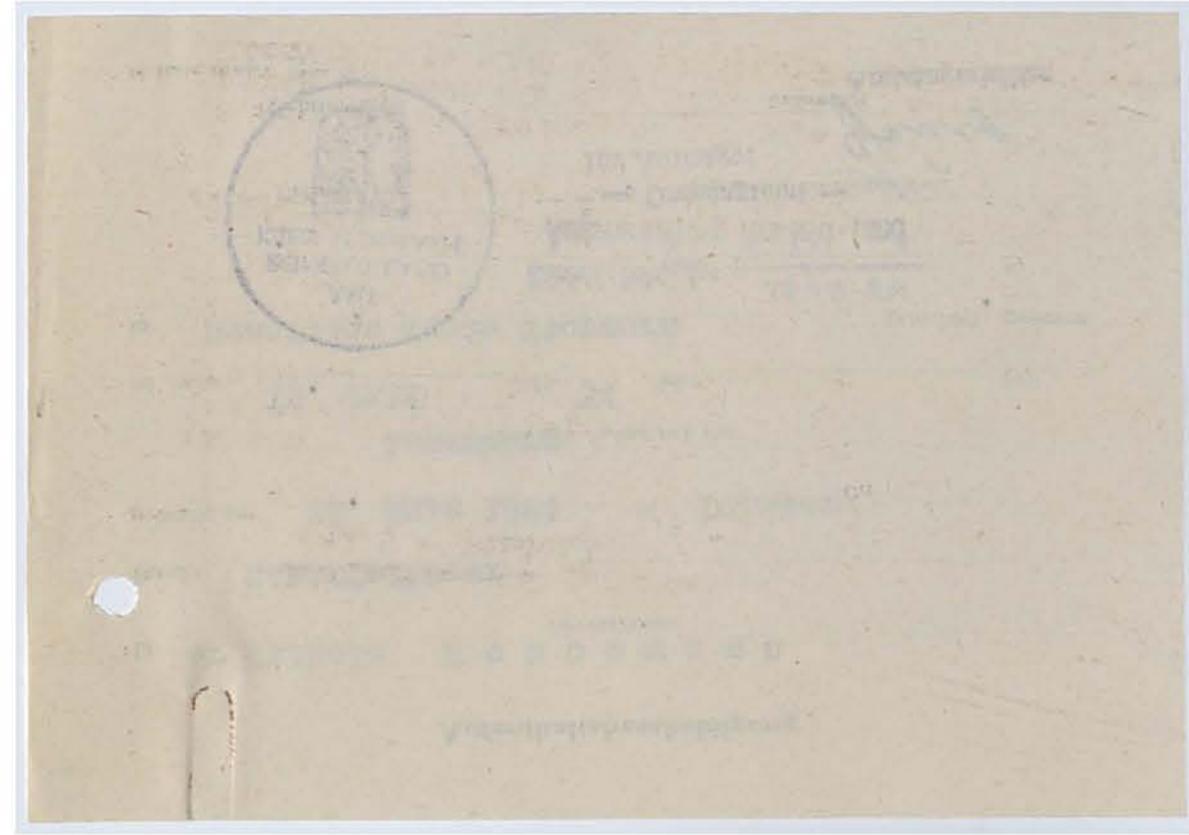
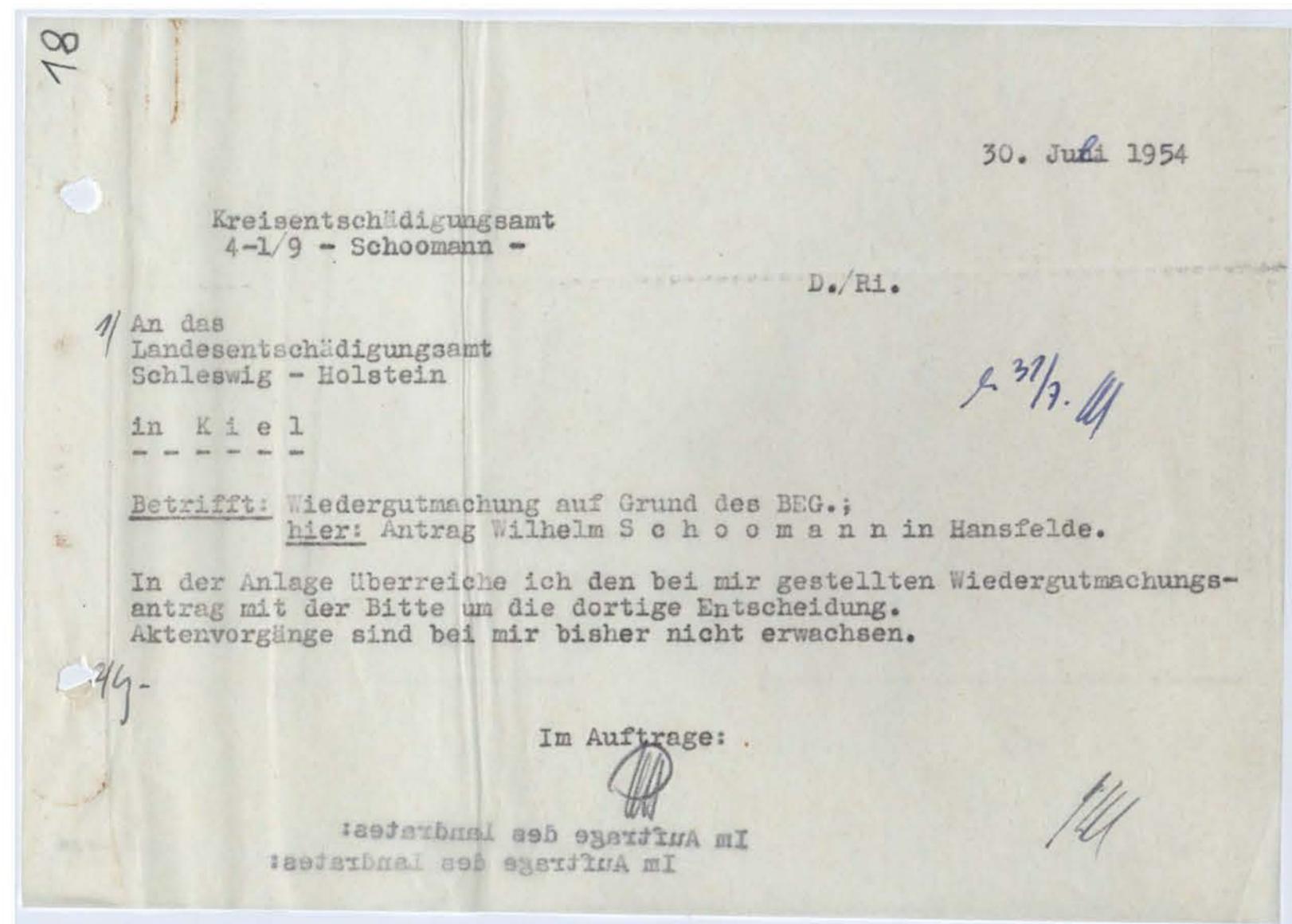
Kreisarchiv Stolmar B2





Kreisarchiv Stormarn B2





Kreisarchiv Stormarn B2



Centimeters		Inches																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
Blue	Cyan	Green	Yellow	Red	Magenta	White	3/Color												

Farbkarte #13

Kreisarchiv Stormarn B2

