293 FORT, PAUL I. 0-784870 2/LT. A.C. EUROP. AREA (TEX) 45 tjh

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FILE OR SERIAL NUMBER AND SUBJECT	293. Fort, Paul J 0-7848?0	REQUESTED PAPERS NOT IN FILE ☐
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DATE | SIGNATURE

No. A4 529366

U. S. GOVERNMENT PRINTING OFFICE 1950-896550

Declassified in accordance with D.O. 13

REGISTER OF DENTAL PATIENTS AT
GEORGE FIELD
Lawrenceville Illinois

(1) SURNAME	(2) CHRISTIAN NAME	
FORT	Paul I,	O-784870
(3) RANK	(4) COMPANY	(5) REGIMENT OR STAFF CORPS
2d Lt	805th	AAF
(6) AGE, YEARS	(7) RACE	(8) NATIVITY / (9) SERVICE, YEARS
22	W	Texas / 2 Yrs

DENTAL IDENTIFICATION RECORD

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.

(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS

(12) RESULTS AND REMARKS

FLIGHT SURGEONS FILE
AFTAS File FEB 13 1945
APR 15 1949

G. W. ROGERS
Capt., DC
Training Education Branch

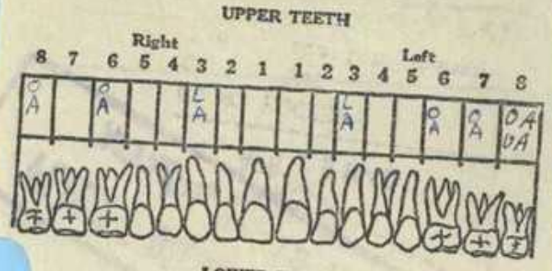
Dental Corps, U. S. A.

FORM 79—MEDICAL DEPARTMENT, U. S. A.
(Revised Feb. 24, 1941)
16—20622

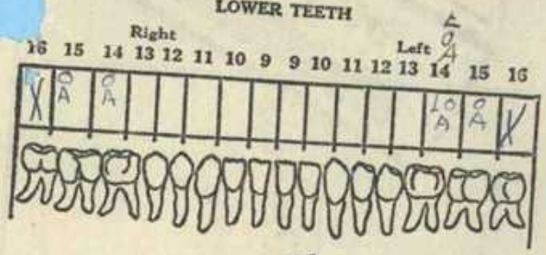
Declassified in accordance with D.O. 13

*REPORT OF DENTAL SURVEY

UPPER TEETH



LOWER TEETH



Class IV

Occlusion Good: Calculus: Slight, Medium, Heavy

Periodontoclasia None

Dental foci suspected: Yes X No

Other conditions None

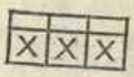
Cl IV 12.19-44

Date 26 Aug, 1944

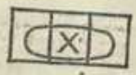
R J Moslen Capt.
Dental Corps, U. S. A.

*Restorable carious teeth by O
Nonrestorable carious teeth by /
Missing natural teeth by X

Teeth replaced by denture (horizontal line)



Teeth replaced by fixed bridge (oval to include abutments)



16—20822

Declassified in accordance with D.O. 13

REGISTER OF DENTAL PATIENTS AT
DAAF Douglas, Arizona.

18126473 - O-784970
(1) SURNAME (2) CHRISTIAN NAME

Fort, Paul I.

(3) RANK	(4) COMPANY	(5) REGIMENT OR STAFF CORPS
Avn/S	44-G	

(6) AGE, YEARS	(7) RACE	(8) NATIVITY	(9) SERVICE, YEARS
22	W	Texas	1-9/12

DENTAL IDENTIFICATION RECORD

(10) DISEASE OR INJURY WITH LOCATION; COMPLICATIONS, SEQUELAE, ETC.

(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS

(12) RESULTS AND REMARKS

Armed B. Wright Lt
Dental Corps, U. S. A.

Form 79—MEDICAL DEPARTMENT, U. S. A.
(Revised Feb. 24, 1941)

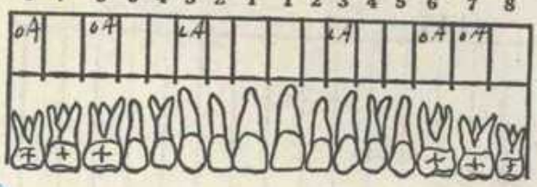
16—20622

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*REPORT OF DENTAL SURVEY

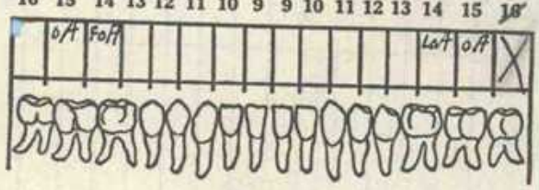
UPPER TEETH

Right 8 7 6 5 4 3 2 1 — Left 1 2 3 4 5 6 7 8



LOWER TEETH

Right 16 15 14 13 12 11 10 9 — Left 9 10 11 12 13 14 15 16



CLASS IV

Occlusion disto : ~~Calculus: Slight, Medium, Heavy~~

Periodontoclasia none

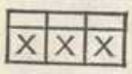
Dental foci suspected: ~~Yes~~ No

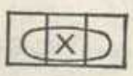
Other conditions none

Date MAY 26 1944, 19

Arnold B Weber Capt
Dental Corps, U. S. A.

*Restorable carious teeth by O
Nonrestorable carious teeth by /
Missing natural teeth by X

Teeth replaced by denture (horizontal line) 

Teeth replaced by fixed bridge (oval to include abutments) 

16—20822

Declassified in accordance with D.O. 13

/fjk

PHYSICAL EXAMINATION FOR FLYING

(See AR 40-100, 40-105, 40-110)

1. FORT, Paul I. 2d. Lt., AC 0-784870 22 2 Yrs
(Last name) (First name) (Middle initial) (Grade and arm or service) (Serial No.) (Age) (Years service)

2. Sec "G", 805th. AAF Sp. RTU 26 May 1944 Class I Qual.
(Address) (Purpose of examination)[1] (Date and result last examination)

Pilot Flying time as: Pilot 249; observer - - -; pilot 249; observer - - -
(Aeronautical ratings) (Total) (Total) (Last 6 mos.) (Last 6 mos.)

3. Temperature 98.6 Vaccinations: Typhoid series, No. 2 Last 1943; smallpox 12-1-43 (Date) reaction Immune

4. Medical history.

(In the case of applicant include family. Has he ever had epilepsy, enuresis, headaches, dizziness, vertigo, fainting, stammering, tic, somnambulism, pavor nocturnus, migraine, insomnia, phobias, anxiety trends, irritability, apathy, elation, depression, sensory disturbances, amnesia, spasms, unconsciousness, repeated episodes of alcoholism, encephalitis, pneumonia, syphilis, renal calculi, tuberculosis, asthma, hay fever, repeated colds, mastoiditis, sinusitis, tonsillitis, arthritis in any form, malaria, severe injuries, major operations, or other pertinent history? Explain fully.)

Usual childhood diseases. No Sequelae.
Denies all other diseases, operations, injuries and fear of flying.

5. Eye: Inspection Normal Nystagmus None
6. Associated parallel movements Normal Pupils: Equality Equal Reaction Prompt
7. Visual acuity: R. E., 20/ 20, correctible to 20/ - - -; L. E., 20/ 20, correctible to 20/ - - -
8. Depth perception (uncorrected) 6 mm. With correction - - - mm.
9. Heterophoria at 6 meters: Eso 0 Exo 2 R. H. 0 L. H. 0 Prism divergence 5
10. Red lens test Not Done Angle convergence: PcB 60 mm. Pd 62 mm. - - - °
11. Accommodation: R. 9.5 D. L. 12.0 D. Addition required for 50 cm. R. - - - L. - - -
(Jaeger type): Right J. 1-13, correctible to J. - - -; Left J. 1-13, correctible to J. - - -
12. Color vision Normal
13. Field of vision (form): R. Normal L. Normal Ophthalmoscopic: R. Normal L. Normal
14. Refraction: R. reads 20/20 with -- S. ◯ -- CAx -- ° L. reads 20/20 with -- S. ◯ -- CAx -- °
15. Ear: History of ear trouble Denies
16. External ear: R. Normal L. Normal Membrana tympani: R. Normal L. Normal
17. Hearing (whisper): R. 20/20. L. 20/20. Audiometer (percent loss): R. - - - L. - - -
18. Nares Septum deviated to right 20% / Tonsils Normal
19. Teeth: obstruction. See Par. # 37

(a)

Right (Examinee's)								Left							
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
X	15	14	13	12	11	10	9	9	10	11	12	13	14	15	X

Indicate: Restorable carious teeth by ◯; nonrestorable carious teeth by /; missing natural teeth by ×.

(b) Remarks, including other defects None
(c) Prosthetic appliances None (d) Classification[2] IV
20. History of swing, train, air, or sea sickness Denies
21. Barany chair (when indicated with results) Not Indicated
22. Posture Good (Excellent, good, fair, bad) Figure Medium (Slender, medium, stocky, obese) Frame Medium (Light, medium, heavy)
23. Height, 69 inches. Weight, 130 pounds. Chest: Inspiration 36 Expiration 32 Rest 33. Abdomen 27
24. Skin and lymphatics Normal Endocrine system Normal
25. Bones, joints, muscles Normal Feet Normal
26. Heart Normal
27. Pulse rate, 66 B.P.: S. 104 D. 62 Schneider - - - Pulse immediately after exercise 100
Two minutes after exercise 70 Character Normal
28. Arteries Normal Varicose veins None

[1] Semiannual, appointment as cadet, commission in the Air Corps, commission in Air Corps Reserve, transfer to the Air Corps, or any other special purpose.
[2] I, II, III, or IV; see par. 3, AR 40-510.

16—22281

W. D., A. G. O. Form No. 64
(May 20, 1941)

Declassified in accordance with D.O. 13

29. Respiratory system Normal
30. X-ray of chest[1] Negative
31. Abdominal viscera Normal
32. Hernia None Hemorrhoids Small thrombotic hemmor.
33. Genito-urinary system Normal
34. Nervous system: Reflexes, gait, coordination, musculature, tension, tremor, and other pertinent tests Normal
35. Laboratory procedures: Kahn[1] Negative 28 August 1944 Wassermann[1] - - -
Urinalysis: Reaction Acid Sp. gr. 1.012 Albumin Neg Sugar Neg Microscopical - - -
36. Estimated adaptability for military aeronautics (if unsatisfactory, state reasons) Satisfactory (On Record)
37. Remarks on conditions not sufficiently described Par. # 18 Cont. - Septal spur, left, no obstruction. NSND.



38. Is the examinee physically qualified for flying duty? Yes If yes, in what class? I
If disqualified, indicate defects by paragraph number - - -
39. Have defects been waived by The Adjutant General? - - - If yes, give date - - -
If no, is waiver recommended? - - - Is request for waiver attached? - - -
40. Is the examinee incapacitated for active service? No If yes, indicate defect by paragraph number - - -
41. Corrective measures or other action recommended None
42. If applicant for appointment: Does he meet physical requirements? - - - Do you recommend acceptance with minor physical defects? - - - If rejection is recommended, specify cause - - -

RTU Medical Processing
George Field
Lawrenceville, Illinois (Place) 26 August 1944 (Date) J. E. LIPSCOMB (Name and grade) Major, Medical Corps.

REVIEWED AND APPROVED:

N. R. THOMAS (Name and grade) Captain, Medical Corps.

_____, Medical Corps. (Senior flight surgeon)

_____, _____ Corps. (Name and grade)

1st Ind.[2]

Headquarters _____, 19____
To the Commanding General,
Remarks and recommendations

_____ (Name) _____ (Grade) _____ (Organization and arm or service)
Commanding.



2d Ind.[2]

_____, 19____ To The Adjutant General.

[1] Required for candidates for commission, Reserve officers reporting for extended active duty, and applicants for flying cadet.
[2] State action taken on recommendation of the board. If incapacitated for active service, state whether action by retiring board is recommended.

NOTE.—*Use typewriter if practicable. Attach additional plain sheets if required.*

U. S. GOVERNMENT PRINTING OFFICE 16—22381

Declassified in accordance with D.O. 13

Denver 15 Jan 45

REGISTER OF DENTAL PATIENTS -
George Field
Lawrenceville, Illinois

(1) SURNAME	(2) CHRISTIAN NAME		
Fort,	Paul I.	O-784870	
(3) RANK	(4) COMPANY	(5) REGIMENT OR STAFF CORPS	
2nd Lt.	G	805TH	
(6) AGE, YEARS	(7) RACE	(8) NATIVITY	(9) SERVICE, YEARS
22	W	Texas	2 yrs.

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.	(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS	(12) RESULTS AND REMARKS
Caries L 8-O	Aug. 26 Examination 1944	Cl. IV
Caries L 8-O	Nov. 27 64 & DIR A	R.J.Maslen
Carl401	27 A	IV H. J. Sorel
	Dec 19 Re-Exam	II
	19 A	IV G.E.Schwartz

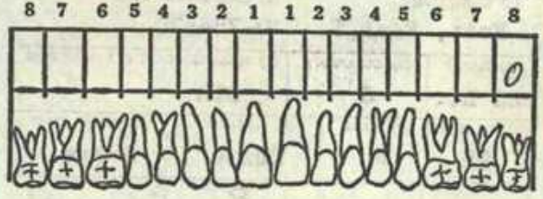
Edwin K. Dennis
Dental Corps, U. S. A.

Form 79—MEDICAL DEPARTMENT, U. S. A.
(Revised Feb. 24, 1941)
16—20622

REPORT OF DENTAL SURVEY

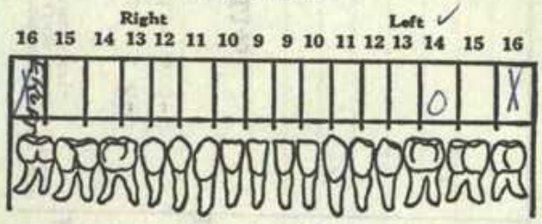
UPPER TEETH

Right 8 7 6 5 4 3 2 1 | 1 2 3 4 5 6 7 8 Left ✓



LOWER TEETH

Right 16 15 14 13 12 11 10 9 | 9 10 11 12 13 14 15 16 Left ✓



CLASS IV

Occlusion Good: Calculus: Slight, Medium, Heavy

Periodontoclasia None

Dental foci suspected: Yes No X

Other conditions None

Date 26 Aug, 19 44

R. J. Madden Capt.
Dental Corps, U. S. A.

*Restorable carious teeth by O
Nonrestorable carious teeth by /
Missing natural teeth by X

Teeth replaced by denture (horizontal line) X X X

Teeth replaced by fixed bridge (oval to include abutments) X

16—20622

Declassified in accordance with D.O. 13

Declassified in accordance with D.O. 13

REGISTER OF DENTAL PATIENTS AT
DAAF, Douglas, Arizona.
18126473

(1) SURNAME	(2) CHRISTIAN NAME	(3) RANK	(4) COMPANY	(5) REGIMENT OR STAFF CORPS	(6) AGE, YEARS	(7) RACE	(8) NATIVITY	(9) SERVICE, YEARS
Fort.	Paul I.	Avn/S	44-G		22	W	Texas	1-9/12

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.	(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS	(12) RESULTS AND REMARKS
Mal I16	TE, AngInf. 6/14/44	I-IV C.C. CUTCHELIS

Frank W. Clark Capt
Dental Corps, U. S. A.

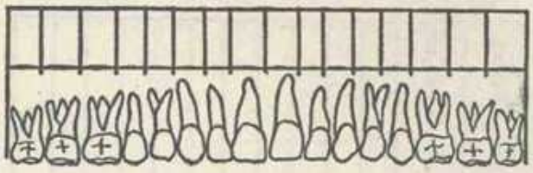
Form 79—Medical Department, U. S. A.
(Revised Feb. 21, 1911)
16—20622

Declassified in accordance with D.O. 13

*REPORT OF DENTAL SURVEY

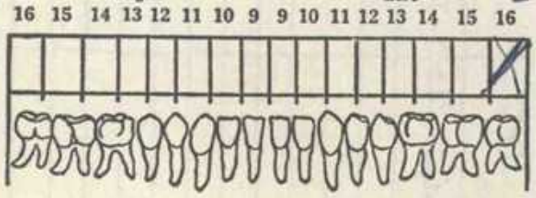
UPPER TEETH

Right 8 7 6 5 4 3 2 1 — Left 1 2 3 4 5 6 7 8



LOWER TEETH

Right 16 15 14 13 12 11 10 9 — Left 9 10 11 12 13 14 15 16



CLASS IV

Occlusion N: Calculus: Slight, Medium, Heavy

Periodontoclasia N

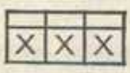
Dental foci suspected: Yes No

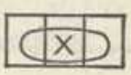
Other conditions N

Date 14 June, 1944

H C Mitchell Capt
Dental Corps, U. S. A.

*Restorable carious teeth by O
Nonrestorable carious teeth by /
Missing natural teeth by X

Teeth replaced by denture (horizontal line) 

Teeth replaced by fixed bridge (oval to include abutments) 

16—20622

Declassified in accordance with D.O. 13

REGISTER OF DENTAL PATIENTS AT

SAAAB /N

(1) SURNAME (2) CHRISTIAN NAME

FORT, PAUL I. 18126473

(3) RANK	(4) COMPANY	(5) REGIMENT OR STAFF CORPS
A/S	32	AF

(6) AGE, YEARS	(7) RACE	(8) NATIVITY	(9) SERVICE, YEARS
22	W.	Tex.	13/12

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.	(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS	(12) RESULTS AND REMARKS
Caries L-15 o	1943 Oct.	CL II
Caries R-15 o	15 A	Borello
Caries R-6 o	15 A	"
Caries R-3 o	Oct. 26 A	Park
Caries L-7 o	26 A	"
	26 A	"
	A	N
		N

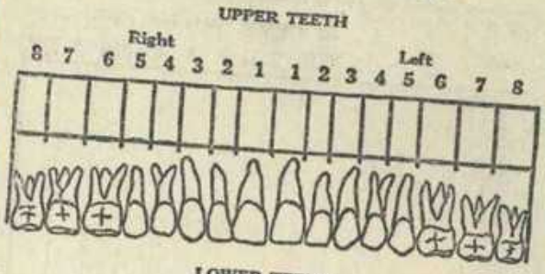
CARL P. HIRSCH, Capt. D. C. USA,
STATION HOSPITAL, Sampson, N. Y.
Dental Corps, U. S. A.

Form 79—MEDICAL DEPARTMENT, U. S. A.
(Revised Feb. 24, 1941)
16—20022

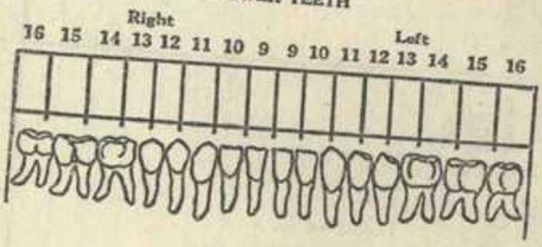
Declassified in accordance with D.O. 13

*REPORT OF DENTAL SURVEY

UPPER TEETH



LOWER TEETH



CLASS _____

Occlusion _____: Calculus: Slight, Medium, Heavy

Periodontoclasia _____

Dental foci suspected: Yes No

Other conditions _____

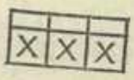
Date _____, 19____

_____

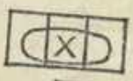
Dental Corps, U. S. A.

*Restorable carious teeth by O
Nonrestorable carious teeth by /
Missing natural teeth by X

Teeth replaced by denture (horizontal line)



Teeth replaced by fixed bridge (oval to include abutments)



16—20022

Declassified in accordance with D.O. 13

REGISTER OF DENTAL PATIENTS AT

Camp Beale, Calif.

(1) SURNAME	(2) CHRISTIAN NAME	(3) SERIAL NUMBER
Fort,	Paul I.	18126473

(3) RANK	(4) COMPANY	(5) REGIMENT OR STAFF CORPS
T/4	C	13 Armd.Div. Maint.Bn.

(6) AGE, YEARS	(7) RACE	(8) NATIVITY	(9) SERVICE, YEARS
21	W.	Texas	8/12

(10) DISEASE OR INJURY WITH LOCATION, COMPLICATIONS, SEQUELAE, ETC.	(11) DATES AND NATURE OF TREATMENTS AND OPERATIONS		(12) RESULTS AND REMARKS
	1943		
Car.L-14-LO	Exam.		Adm.R,Cl=II
	OA		CWK
	IV		
	May	3	
		3	CCT

Dental Corps, U. S. A.

Form 79—MEDICAL DEPARTMENT, U. S. A.
(Revised April 13, 1938)

GPO 3—10507

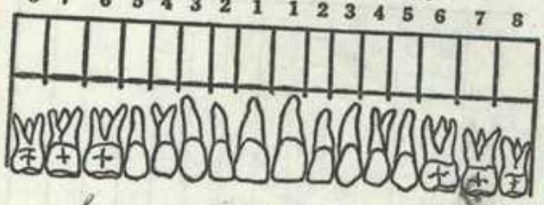
Declassified in accordance with D.O. 13

Date 5/3 1943

Report of Dental Survey

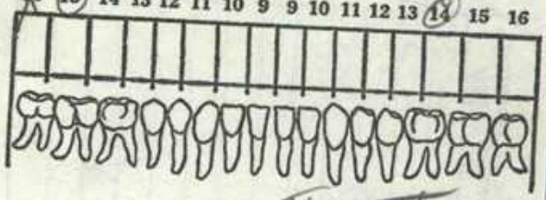
UPPER TEETH

Right 8 7 6 5 4 3 2 1 — 1 2 3 4 5 6 7 8 Left



LOWER TEETH

Right 16 15 14 13 12 11 10 9 — 9 10 11 12 13 14 15 16 Left



CLASS II - III

O Tooth crowned / Missing tooth

O/O Fixed bridge ⊤⊤⊤ Partial denture

Occlusion N Periodontoclasia _____

*Caries _____

Calculus: Slight, Medium, Heavy.

Dental foci suspected: Yes No

Other conditions None

Oppr. C.C.T.

Clark
Dental Officer.

*Indicate by tooth number.

3—10507

Declassified in accordance with D.O. 13

ON APUL I FORT 0784870 AND 18126473 HT 69 1/4 IN ALSO SHOWN AS
70 IN WT 148 LBS HAIR BLONDE ALSO SHOWN AS BROWN EYES BRAY
COMPLEXION RUDDY FRAME MED ALSO SHOWN AS LIGHT BORN 6 DEC 21 SHOE
SIZE 9 1/2 B DENTAL CHART AT ENLMT 26 AUG 42 TEETH MISSING R
16 L 16 WDAGO FORM 64 26 MAY 44 NO TEETH MISSING NONRESTORABLE
CARIIOUS TEETH L 16 WDAGO FORM 38 3 AUG 44
TEETH MISSING L 16 4 FORMS 79 BEING SENT
CCCCC LINE SEVEN FROM BOTTOM SHD BE ON PAUL
RPT PAUL
09/2050Z



29 MAR 1949

Declassified in accordance with D.O. 13



Declassified in accordance with D.O. 13

29 NOV 1948 LIST

NY-017-

DUPLICATE

WW II

APPLICATION FOR HEADSTONE OR MARKER

(Please make out and return in duplicate)

FLAT GRANITE

CHECK TYPE REQUIRED (See Instructions attached)

- ☐ UPRIGHT MARBLE HEADSTONE
- ☐ FLAT MARBLE MARKER
- ☑ FLAT GRANITE MARKER
- ☐ BRONZE MARKER (NOTE RESTRICTIONS)

ENLISTMENT DATE: 26 AUG 1942

DISCHARGE DATE: 24 MAR 1945

SERIAL No.: 0-784870

PENSION No.:

EMBLEM (Check one)
- ☑ CHRISTIAN
- ☐ HEBREW
- ☐ NONE

NAME (Last, First, Middle Initial)

293 FORT, PAUL I.

STATE: TEXAS

RANK: 2/LT

COMPANY: 438 T.C. GP.

U. S. REGIMENT, STATE ORGANIZATION, AND DIVISION

USAAF

DATE OF BIRTH (Month, Day, Year): DEC 6, 1921

DATE OF DEATH (Month, Day, Year): MAR 24, 1945

NAME OF CEMETERY

GROVE HILL CEMETERY DALLAS TEXAS

LOCATION (City and State)

Dallas Tex

SHIP TO (I CERTIFY THE APPLICANT FOR THIS STONE HAS MADE ARRANGEMENTS WITH ME TO TRANSPORT THE STONE FROM THE FREIGHT STATION TO THE CEMETERY)

Guardian Funeral Home

(SIGNATURE OF CONSIGNEE)

NEAREST FREIGHT STATION (City and State)

DALLAS, TEXAS

POST OFFICE ADDRESS OF CONSIGNEE

2811 Oak Lawn Dallas Tex

For Ord.

DO NOT WRITE HERE

FOR VERIFICATION: NOV 26 1948

ORDERED

B/L

SHIPPED

I certify this application is submitted for a stone for the unmarked grave of a veteran.

I hereby agree to assume all responsibility for the removal of the stone promptly upon arrival at destination, and properly place it at the decedent's grave at my expense.

x P. I. Fort

APPLICANT'S SIGNATURE

DATE OF APPLICATION: 4 JAN 1949

ADDRESS (Street, City, State)

4933 Bradley Ave, Dallas Tex

JAN 24 1949 FILE

OQMG FORM REV 15 APR 47 623

IMPORTANT—Complete Reverse Side

16—11[illegible]-6 GPO

Declassified in accordance with D.O. 13

I HEREBY CERTIFY that the type headstone or marker requested by the applicant will be permitted at the grave.

(Be sure you have noted what type is indicated by applicant on form)

Grove Hill Cemetery
(Signature of superintendent, sexton, or caretaker)

Date 11-16-48

by E C Smith Jr V Pres

16—11453-4

Return to: OFFICE OF THE QUARTERMASTER GENERAL,
MEMORIAL DIVISION,
WASHINGTON 25, D. C.

12-16-48 Ltr Type Stone Chris Spring

Declassified in accordance with D.O. 13

CORRESPONDENCE ACTION SLIP

NAME	SERIAL NUMBER	INITIALS	DATE
Fort, Paul L	O-784870	Slw	12/16/48

	NAME OF DECEDENT	ADDRESS	IDENTIFYING DATA	LETTER TO: appl Dep Chief of Avg 1. 88 day Typ Carrier Avg 2. 438 day Typ Carrier Avg Sign one as only one listing is shown on marker
	BRONZE	NO UPRIGHT GRANITE	CONSIGNEE	
	DISHONORABLE-DRAFT	NOT PERMANENTLY INTERRED	NOT RECOVERED	
	CEMETERY REGULATIONS	AGO	MARINE	
	NAVY	COAST GUARD	VETERANS ADMINISTRATION	
	STATE PENSION	AUTHORIZED INSCRIPTION	ADDITIONAL INSPECTION	
	APPLICATION FOR PROOF	NO AGENT	NO STATION	
	DUE TO DISTANCE	UNCLAIMED	BROKEN	
	DAMAGED	CERTIFICATE IN LIEU	LOST	
	FOREIGN	TRUCK	RESHIPMENT	

DEC JAN 24 1949 PM

OQMG FORM 22 DEC 47 393

47 25086

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COPY OF INSCRIPTION TO BE PLACED ON MARKER

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

FLAT GRANITE MARKER

Below you will find a copy of the inscription taken from the *OFFICIAL RECORDS* as it will appear on the flat granite marker you ordered. *CHECK IT CAREFULLY* before the marker is manufactured. Check the *INSCRIPTION, NAME AND LOCATION OF CEMETERY.* Check with *CEMETERY OFFICIALS and make sure a government flat granite marker will be allowed at grave.* Check *NAME AND ADDRESS OF THE PERSON* to whom marker is to be shipped. After you have *CORRECTED ANY ERRORS,* sign and return promptly in the inclosed envelope which requires no postage.

UNTIL YOU RETURN THIS SLIP THE FLAT GRANITE MARKER CANNOT BE ORDERED. DO NOT DELAY-SIGN & RETURN TODAY.

INSCRIPTION: *LATIN CROSS*

PAUL I FORT / TEXAS / 2 LIEUT 88 AAF TRP CARRIER SQ /
WORLD WAR II / DEC 6 1921 MARCH 24 1945

SHIP TO: GUARDIAN FUNERAL HOME
2811 OAK LAWN
DALLAS
FOR: TEXAS

R. R. STATION:

R. R. STATION:

APPLICANT: T I FORT
4933 LINDSLEY AVE
DALLAS
TEXAS

CEMETERY: GROVE HILL
DALLAS
TEXAS

1648

OQMG FORM Rev. 1 NOV. 45 312

APPROVAL AND ACCEPTANCE _____ SIGNATURE

LAD FILE
JAN 24 1949

2nd 2

Declassified in accordance with D.O. 13



Declassified in accordance with D.O. 13

ORIGINAL ORDER

WAR DEPARTMENT
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

FLAT GRANITE MARKER

Below you will find a copy of the inscription taken from the *OFFICIAL RECORDS* as it will appear on the flat granite marker you ordered. *CHECK IT CAREFULLY* before the marker is manufactured. Check the *INSCRIPTION, NAME AND LOCATION OF CEMETERY.* Check with *CEMETERY OFFICIALS and make sure a government flat granite marker will be allowed at grave.* Check *NAME AND ADDRESS OF THE PERSON* to whom marker is to be shipped. After you have *CORRECTED ANY ERRORS,* sign and return promptly in the inclosed envelope which requires no postage.

UNTIL YOU RETURN THIS SLIP THE FLAT GRANITE MARKER CANNOT BE ORDERED. DO NOT DELAY-SIGN & RETURN TODAY.

INSCRIPTION: *LATIN CROSS*

PAUL I FORT / TEXAS / 2 LIEUT 88 AAF TRP CARRIER SQ /
WORLD WAR II / DEC 6 1921 MARCH 24 1945

SHIP TO: GUARDIAN FUNERAL HOME
2811 OAK LAWN
DALLAS
TEXAS

R. R. STATION:

FOR:

R. R. STATION:

9 DEC 1948

APPLICANT: T I FORT
4933 LINDSLEY AVE
DALLAS
TEXAS

CEMETERY: GROVE HILL
DALLAS
TEXAS

cc
LAD
JAN 24 1949 FN A

OQMG FORM 312
Rev. 1 NOV. 45

APPROVAL AND ACCEPTANCE Thos. T. I. Fort
SIGNATURE

Declassified in accordance with D.O. 13

Declassified in accordance with D.O. 13

Dallas Texas Dec.7,1948

War Depaftment
Office of Quartermaster General
Washington 25 D C

Dear Sir:

In checking over the order for Flat Granite Marker I notice that Inscription does not show to what Group to which Paul I Fort 2nd Lieut. was attached.

In writing to him overseas we address the letters to 438th Group. Not being an army man I am wondering if a soldier would want the the full designation on his grave marker. If you feel that he would want that full designation, will you kindly add 438th Group tbethe inscription.

Yours sincerely.

P I Fort

4933 Lindsley Av.,
Dallas-10-Texas

N.A.T. Dec 13, 1948
J. Martin
Com

JAN 24 1949 FMK
Fort Worth

Declassified in accordance with D.O. 13

MAR 1 1949

Declassified in accordance with D.O. 13

8

QMGMH 293
Fort, Paul I.
SN 0-784 870

6 January 1949

Mr. T. I. Fort
4933 Lindsley Avenue
Dallas, Texas

Dear Mr. Fort:

Receipt is acknowledged of the order form covering the inscription to appear on a flat granite marker for the grave of the late Paul I. Fort.

It is regretted you must be advised that there is not sufficient space on a Government flat marker to have this organization shown in full; however, either the Squadron or the Group may be inscribed on the stone.

In view of the above, there are inclosed two order forms for your choice of inscription. One shows the organization will appear as 88 AAF TRP CARRIER SQ, and the other indicates 438 AAF TRP CARRIER GP will be inscribed on the stone. It is requested you sign and return the form on which appears the inscription you prefer.

The inclosed envelope is for your convenience in replying, and an early return of one of the signed order forms will enable this office to proceed with the ordering of the stone.

Sincerely yours,

AUDREY W. PRIEBE
Captain, QMC
Memorial Division

3 Incls
1 order form
2 order form
3 env

hc

Declassified in accordance with D.O. 13

RECEIPT OF REMAINS

DISTRIBUTION CENTER FORT WORTH QUARTERMASTER DEPOT, FORT WORTH, TEXAS

ROUTINE
DAY LETTER

DLR AND REPORT
ANY CHARGES

REMAINS CONSIGNED TO: GUARDIAN FUNERAL HOME
2811 OAK LAWN AVENUE
DALLAS, TEXAS

REMAINS OF LATE 2 LT PAUL I. FORT 2m WILL BE DELIVERED TO YOU APPROXIMATELY TEN AM 15 NOVEMBER BY THIS DEPOT ACCOMPANIED BY MILITARY ESCORT. REQUEST YOU MAKE ARRANGEMENTS TO ACCEPT REMAINS UPON DELIVERY AND THAT YOU IMMEDIATELY PASS THIS INFORMATION ON TO NEXT OF KIN.

S. H. Partridge
S. H. PARTRIDGE
Lt. Colonel, QMC
Chief, AGR Division

NOV 10 1948

I, THE UNDERSIGNED, DO HEREBY ACKNOWLEDGE RECEIPT OF THE REMAINS OF THE ABOVE-NAMED DECEASED

THIS 15th DAY OF November, 1948
DAY MONTH

Frank K. Irwin 1ST LT USAF
WITNESS (Escort)

Guardian Funeral Home
Mrs. Ed. C. Smith Jr.
CONSIGNEE

MAT
FILE
RECORDS
DATE 7-Dec-48
NAME
R & R BR.

QMC FORM 15 NOV 46 1193

16—52072-1 U. S. GOVERNMENT PRINTING OFFICE

Declassified in accordance with D.O. 13

NOV 17 1948

CRJ

1

CIER DISINTERMENT DIRECTIVE NY-017-R-43

SECTION A— NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER: 4650 05564

DATE: 15 DAY | 04 MONTH | 48 YEAR

NAME	SERIAL NUMBER	RANK	ARM	DATE OF DEATH
FORT PAUL I	0-784870	2 LT	1	DAY MONTH YEAR

CEMETERY		DISPOSITION OF REMAINS
MARGRATEN - AACHEN	1	8500 CODE / 10 DIST. PT.

PLOT	ROW	GRAVE	COUNTRY	CAUSE OF DEATH
Y	12	279	HOLLAND	1

SECTION B— CONSIGNEE AND NEXT OF KIN

NAME AND ADDRESS OF CONSIGNEE
GUARDIAN FUNERAL HOME
2811 OAK LAWN AVENUE
DALLAS, TEXAS

NAME AND ADDRESS OF NEXT OF KIN
MR. TANDY I. FORT (FATHER)
4933 LINDSLEY AVENUE
DALLAS, TEXAS

SECTION C— DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISTINTERRED
PAUL I FORT	0-784870	2 LT		29 JULY 48

IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY
[A] REMAINS EMB [A] MARKER GRS	USAAF ✓	P	FRITZ J. TOLTZIEN, 1/LT. MI. NAME AND TITLE

SECTION D— PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL: MATTRESS COVER

CONDITION OF REMAINS: ADVANCED STAGE OF DECOMPOSITION MISSING SKULL, R/L HUMERUS, L/RADIUS & ULNA, R/L PATELLA, R/L TIBIA, FIBULA, ALL OTHER MAJOR BONES FRACTURED EXCEPT SACRUM & R/RADIUS

OTHER MEANS OF IDENTIFICATION: REPORT OF BURIAL FOUND WITH REMAINS FOR UNK X-185

MINOR DISCREPANCIES 1: CEMETERY RECORDS STC= "I.WIN" FOR MIDDLE NAME

REMAINS PREPARED AND PLACED IN ~~CASKET~~ TRANSFER BOX: 1
JAMES L. SMITH, EMBALMER

DATE 12 AUGUST 48 BY

CASKET SEALED BY EMBALMER: John A. Brickley
JOHN A. BRICKLEY, EMB. SUPV.

EMBALMER (Signature): James L. Smith

CASKET BOXED AND MARKED
DATE 8/9/48 BY ORVILLE W. BILLINGS CLERK RECORDER

SHIPPING ADDRESS VERIFIED BY TAGS, MARKINGS, PLATES.
VERIFIED BY: F. [illegible] CAPT. QMC.

I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.
/EXCEPT CATCHING

WILLARD B. OWEN, CAPT. INF.,

SIGNATURE OF GRS INSPECTOR

1 *Prepare Discrepancy Report QMC Form 1194a for major discrepancies.*

QMC FORM REV 15 MAR 46 1194 EM

Declassified in accordance with D.O. 13

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED

FROM CSMC MARGRATEN HOLLAND

TO ANTWERP PORT, PIER 140

KIND OF CONVEYANCE RAIL

NAME OF CONVOYER CPL, STANLEY E. DUDA RA 32308467

SIGNATURE OF SHIPPER FLOYD A. H. MEYER 1/LT. INF. 0132/166

DATE 2/9/48

SIGNATURE OF RECEIVER

DATE 3 SEP 1948

2. SHIPPED

FROM AGRO ANTWERP BELGIUM

TO USAT CARROLL VICTORY

KIND OF CONVEYANCE ZEC

NAME OF CONVOYER K. W. WHEREOTT CAPT. T. C.

SIGNATURE OF SHIPPER L E Butler Lt Col Inf

DATE 16 SEPT

SIGNATURE OF RECEIVER K W Whereatt

DATE 16 SEPT 1948

3. SHIPPED

FROM

TO NYPE

KIND OF CONVEYANCE

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER JAMES L. McKINNON COLONEL, T. C. PORT TRANSPORTATION OFFICER

DATE 15/10/48

4. SHIPPED

FROM NYPE

TO PORT

KIND OF CONVEYANCE TRAIN

NAME OF CONVOYER Merrill Archer

SIGNATURE OF SHIPPER JAMES L. McKINNON COLONEL, T. C. PORT TRANSPORTATION OFFICER

DATE OCT 12 1948

SIGNATURE OF RECEIVER Edward Thomas 15 OCT 1948 CAPT. Q.M.C. OIC OPER. BR. A.G.R. DIVISION

DATE

5. SHIPPED

FROM

TO

KIND OF CONVEYANCE

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

DATE

6. SHIPPED

FROM

TO

KIND OF CONVEYANCE

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

DATE

7. SHIPPED

FROM

TO

KIND OF CONVEYANCE

NAME OF CONVOYER

SIGNATURE OF SHIPPER

DATE

SIGNATURE OF RECEIVER

DATE

Declassified in accordance with D.O. 13

-R-

24-017-R

D A Y L E T T E R 1948 SEP 30 AM 8 56

FORT WORTH QUARTERMASTER DEPOT, FORT WORTH, TEXAS

MR. PANDY I. FORT

4933 LINDSLEY AVENUE

DALLAS, TEXAS

DLR & REPORT
ANY CHARGES

2ND LT PAUL I. FORT

WE HAVE BEEN ADVISED THAT REMAINS OF LATE

ARE ENROUTE TO THE UNITED STATES. OUR RECORDS INDICATE YOU WISH REMAINS
GUARDIAN FUNERAL HOME, 2811 OAK LAWN AVENUE, DALLAS, TEXAS
DELIVERED TO

. WITHIN FORTY EIGHT HOURS AFTER RECEIPT OF THIS MESSAGE PLEASE CONFIRM YOUR ORIGINAL INSTRUCTIONS OR SUBMIT NEW DELIVERY INSTRUCTIONS AND FURNISH YOUR CORRECT MAILING ADDRESS BY TELEGRAM COLLECT TO COMMANDING OFFICER, FORT WORTH QUARTERMASTER DEPOT, FORT WORTH 1, TEXAS. REPLY IS NECESSARY WITHIN THIS PERIOD SINCE IT WILL NOT BE POSSIBLE TO COMPLY AT GOVERNMENT EXPENSE WITH ANY DESIRED CHANGES IN DELIVERY INSTRUCTIONS RECEIVED AFTER THE EXPIRATION OF FORTY EIGHT HOURS. WHILE DELIVERY OF REMAINS WILL BE MADE AS SOON AS PRACTICABLE AFTER RECEIPT FACTORS BEYOND OUR CONTROL MAY DELAY DELIVERY OF REMAINS FOR SEVERAL WEEKS. HOWEVER AS SOON AS REMAINS ARE RECEIVED HERE AND IT IS POSSIBLE TO SCHEDULE THEM FOR DELIVERY YOUR FUNERAL DIRECTOR WILL BE NOTIFIED BY TELEGRAM OF THE DATE AND APPROXIMATE HOUR REMAINS WILL BE DELIVERED TO HIM. ALSO HE WILL BE REQUESTED TO FURNISH YOU THIS INFORMATION SO THAT YOU MAY COMPLETE FUNERAL ARRANGEMENTS. THIS TELEGRAM WILL BE SENT AT LEAST FOUR DAYS PRIOR TO ACTUAL SHIPMENT FROM THIS DISTRIBUTION CENTER. PLEASE INSTRUCT FUNERAL DIRECTOR TO ACCEPT REMAINS WHEN THEY ARE DELIVERED TO HIM. REMAINS WILL BE ACCOMPANIED BY MILITARY ESCORT. IF YOU DESIRE MILITARY HONORS AT FUNERAL YOU SHOULD ASK ANY LOCAL PATRIOTIC OR VETERANS ORGANIZATIONS TO MAKE ARRANGEMENTS. YOUR PROMPT COOPERATION WILL GREATLY ASSIST THIS OFFICE IN MAKING FINAL DELIVERY. PLEASE INCLUDE FULL NAME OF DECEASED IN REPLY TELEGRAM.

E

QMC G.E. DIVISION SEP 30 1948

Declassified in accordance with D.O. 13

CLASS OF SERVICE

This is a full-rate Telegram or Cablegram unless its deferred character is indicated by a suitable symbol above or preceding the address.

WESTERN UNION

1201

(49)

JOSEPH L. EGAN
PRESIDENT

SYMBOLS
DL = Day Letter
NL = Night Letter
LC = Deferred Cable
NLT = Cable Night Letter
Ship Radiogram

The filing time shown in the date line on telegrams and day letters is STANDARD TIME at point of origin. Time of receipt is STANDARD TIME at point of destination

FWA19DB385

1948 OCT 1 PM 1 10

D LLK149 34 GOVT COLLECT 5 EXTRA=DALLAS TEX 1 1219P=

LT COLONEL S H PARTRIDGE Q M C

CHIEF A G R DIVN FTW=

CONFIRMING ORIGINAL INSTRUCTION REGARDING THE REMAINS OF 2ND LT PAUL IRWIN FORT HAVE COMMUNICATED WITH GARDIAN FUNERAL HOME WITH REFERENCE TO YOUR TELEGRAM AND THEY UNDERSTAND ORIGINAL INSTRUCTION=

TANDY I FORT 4933 LINDSLEY AVE DALLAS TEX=

NY-017-R

2 4933= MK CK 5 EX

WIL... ...OM ITS PATRONS CONCERNING ITS SERVICE

Declassified in accordance with D.O. 13

A-R-6 NY 017 R

INSPECTION CHECKLIST

(FOR USE AT OVERSEAS PORT, U.S. PORT, AND DISTRIBUTION CENTER) B-N-20

NAME	GRADE	SERIAL NUMBER
FORT, PAUL I.	2/Lt	O-784870

SOURCE: Margraten -Aachen, Holland

CONSIGNEE: Guardian Funeral Home, 2811 Oak Lawn Ave, Dallas, Texas

SHIPPING CASE - General Appearance (Check ONLY Discrepancies)

CONDITION OF SHIPPING CASE (Check one): [✓] SATISFACTORY [ ] UNSATISFACTORY

- FINISH (Exterior)
- HANDLES
- DRAW BOLTS
- STENCILING - NAMEPLATE
- HEALTH PERMIT MARKER
- HEALTH PERMIT NUMBER

REMARKS: Minor Repair

CASKET - General Appearance (Check ONLY Discrepancies)

CONDITION OF CASKET (Check one): [✓] SATISFACTORY [ ] UNSATISFACTORY

- FINISH (Exterior)
- HAND RAILS & FINALS
- NAMEPLATE
- CAM LOCKS (Sealing) AND GASKET
- ODOR OR MOISTURE

REMARKS: Small Scratches

ROUTED TO

MORTUARY SECTION [ ] | MAINTENANCE AND REPAIR SECTION [✓]

CONDITION OF REMAINS: [ ] SATISFACTORY [ ] UNSATISFACTORY

CASKET REPAIRED: [✓] YES [ ] NO

NECESSARY DISINFECTION (Explain)

CASKET EXCHANGED: [ ] YES [✓] NO

SHIPPING CASE REPAIRED: [✓] YES [ ] NO

SHIPPING CASE EXCHANGED: [ ] YES [✓] NO

REMARKS

TIME	DATE	SIGNATURE OF MORTICIAN	TIME	DATE	SIGNATURE OF INSPECTOR
			am	10/23/47	M Vaughan

REMARKS

QMC FORM R-5054 - Rev 18 June 47 (Reproduced FWQMD 13 Sep 48)

Declassified in accordance with D.O. 13

RRE Form # 39
13 Jul 48

Attached hereto correspondence and/or other identifying media of possible archival value, pertaining to :

FORT	Paul	1	2 LT	0-784870
(Last Name)	(First Name)	(Initial)	(Rank)	(ASN)

Repatriated to the United States: 25SEP 1948

STATION FILE

Incl #

Declassified in accordance with D.O. 13

~~QQL-GR&R Div~~ CHECK LIST FOR UNKNOWNS

UNKNOWN - 185
CEMETERY - Margraten, Holland
PLOT - X - 12 - 279

Arrived at cemetery _____ From _____
(hour) (date) (collecting point)

Place of death Vic Fluren, Germany
(name) (coordinates and location)

Remains removed by 605 QM Gr. Reg. Co.
(name and organization)

Evacuated to cemetery by 605 QM Gr. Reg. Co.
(name and organization)

Is load list attached No Are names of deceased found in same area as this Unknown starred (yes-No) Are circumstances described which may indicate organization of the deceased (yes-No) If only part of body was received, was careful search made for other parts of remains (yes-No)

If remains came from vehicle, plane, etc: C-47 No. 224102- 438th Group
(type of vehicle, plane, name, serial number, organization or symbols)

Crew list Bowden, Clyde L. 36804111- Brund, Arcangeli 35610937, Green Marion C. 34601180; King James E. 35613456; Brooks Leonard R. 13069286- Villalurus Fabian 39253208

If tank, which hatches were free and available for escape use _____

If organization to which vehicle or plane was assigned or if names of all other deceased are not known, give detailed information concerning vehicle or plane _____

(parts or marking, symbols) UNKNOWN (burned) (pierced by shell fire - where)

(found in town, field, by road, etc.) (damaged by mine explosion)

(names of men who escaped) (description of other vehicles or planes in same area)

Detailed description of personal effects _____
(Indicate exact pocket or part of body where found)

UNKNOWN

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Item	Clothing Markings	Sizes	Color	Indicate unusual markings, wear, tear, repairs, etc.
*Headgear (type)				
Raincoat				
Overcoat				
Jacket, Field				
Jacket, Combat				
Mackinaw				
Sweater				
Jacket, HBT				
*Shirt, Wool OD	******** Gabardine		Pink	10" of Rt. sleeve found
Undershirt, Wool				
Undershirt, Cotton				
Trousers, HBT				
*Trousers, Wool OD				
Belt, Web				
Drawers, Wool				
Drawers, Cotton				
Leggings				(note unusual lacing)
Socks Wool / Cotton				
*Shoes (type)				
Overshoes				
Web Equipment (type)				
(Other Item)				
(Other Item)				

*If body is nude, sizes of these items should be computed by measuring the remains.

Chevrons or Insignia (type & location; shirt, jacket, coat, helmet) Unknown Shoulder Patch Unknown

Description of Remains:

Age Unk Height Unk Weight Unk Description of wounds RTA

Declassified in accordance with D.O. 13

Bandages or dressings _____ (length, width, location)

_____

_____ Tattoos _____
UNKNOWN (number, location - illustrate on sep. page)

Outstanding moles, warts or birthmarks _____
(yes-no) (description, location)

_____

Sunburn or tan, other than hands and face _____

Tobacco stain on fingers or teeth _____
(designate where, extent)

Complexion _____ Build _____
(light, med, dark, clear, pimples, pocks, freckles) (large, fat, thin,

_____
muscular)

Hair _____
(color, length, quantity, curly, wavy, straight, whorls, or definite parting,

_____
baldness, widows peak, distinctive cutting, or other characteristics)

Sideburns _____ Mustache _____ Beard or goatee _____
UNKNOWN UNKNOWN
(color, setting, shape) (color, size, shape) (length,

_____
heavy, light, color, extent)

Eyes _____ Eyebrows _____
(color, setting, shape) (color, bushiness, extend across nose)

Nose _____ Ears _____
(size, shape, straight) (size, set close to or far from head)

Forehead _____ Mouth _____ Lips _____
(high, wide spaced) (large, medium, small) (small, large,

Teeth _____
(white, size, unevenness, spacing, noticeable or many, fillings, extractions)

Chin _____ Chin _____
UNKNOWN
(prominent, receding, pointed, cleft, double) (high, normal)

Jaw _____ Circumference of head in inches _____
(large, small, normal) (flat head)

Neck _____ Larynx _____ Shoulders _____
UNKNOWN
(size, long, short, normal, wrinkled) (prominent, normal) (broad

_____ Arms _____
straight, small, rounded) (length) (muscular, color, extent & quantity of hair)

_____ Hands _____
(vaccination scar size of wrists) (large, small, normal, calloused noticeably)

_____
(marks on fingers indicating chain rings worn, etc)

_____

Page (Check List for Unknowns)

Declassified in accordance with D.O. 13

Hands (short, thick, long, slender; size of knuckles) (missing fingers or joints)

UNKNOWN

(unusual characteristics of fingernails)

Chest (Size at nipples; color, quantity & extent of hair; large, small, normal)

Back (quantity and extent of hair) Waist (size at navel, appendectomy, amount & color of hair)

Circumcized (yes-no) Pubic hair (color) Herniaplasty (yes-no) (location)

Legs (inseam) (muscular; knock-kneed, bowed, normal) (quantity, color & extent of hai

Feet (size; corns; UNKNOWN ses; flat) Toes UNKNOWN (slender, straight, crooked, overlap)

Evidence of healed fractures (nose, arms, legs, etc.)

Black out parts of body not received at cemetery:



Have photographs been made and attached No (yes-no) If not, explain No facilities

Have fingerprints been placed on GRS #1 No (yes-no) If not, explain Body decomposed

Has tooth chart been prepared? Yes (yes-no) If not explain

Remarks: Body badly decomposed and charred found broken jaw bones with teeth

Cleon E. Wells.

Signature of CHO and Organization
CLEON E. WELLS 1st Lt. QMC
603rd QM Gr. Reg. Co.

Declassified in accordance with D.O. 13

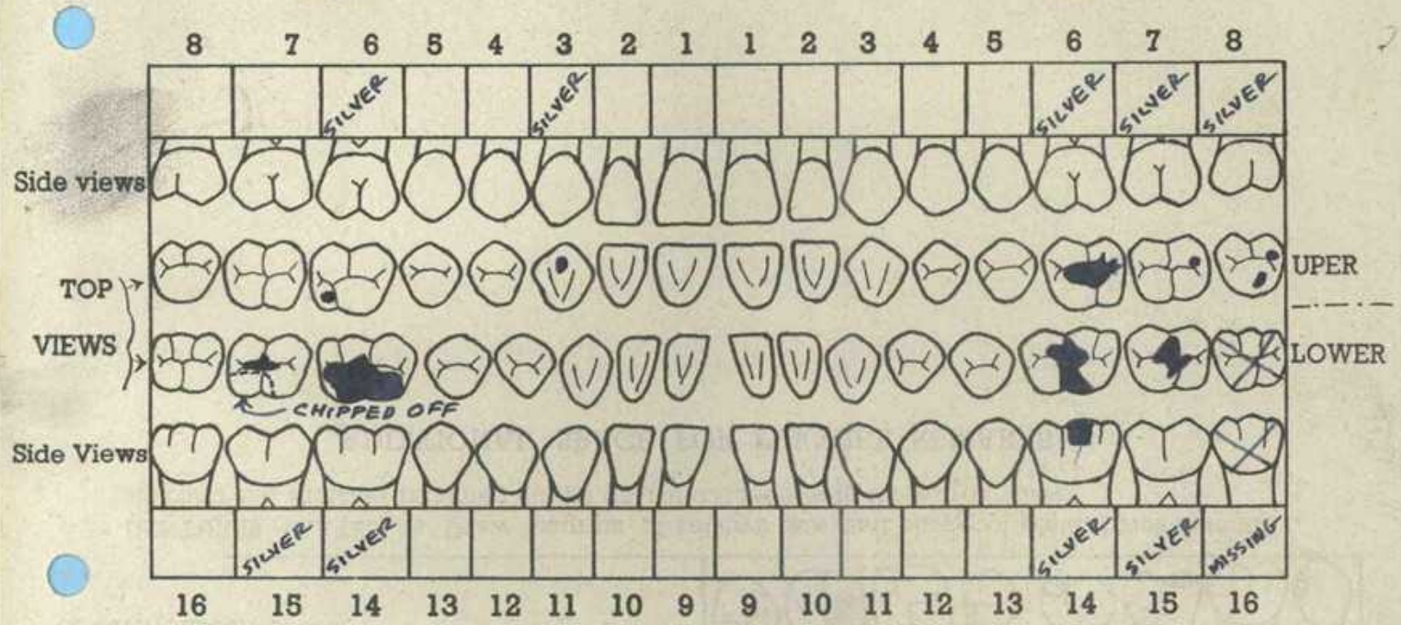
G. R.& E. DIV.
OFFICE OF THE CHIEF QUARTERMASTER
HQ. COM. ZONE, ETOUSA

TOOTH CHART

Aug 10 1945
Date

Unknown X-185				
Last Name	First	Initial	Rank	Serial No.
	Unknown			

Unit		Organization
Vic Fluren, Germany	24 March 1945	KIA
Place of Death	Date of Death	Cause of Death



This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions : Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

Cleon E. Wells.
Signature of Officer or other person who prepared Tooth chart

CLEON E. WELLS 1st Lt. QMC
603rd QM Gr. Reg. Co.
Verfield by G. R. S. Officer

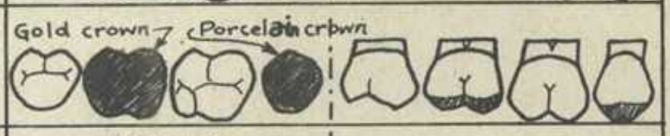
GRAVES REGISTRATION
FORM N° 1-A

Declassified in accordance with D.O. 13

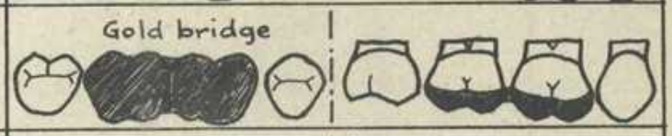
MISSING TEETH... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



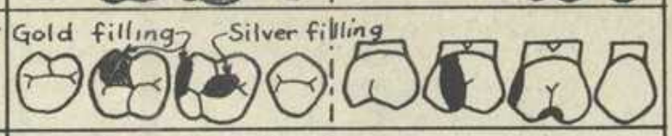
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



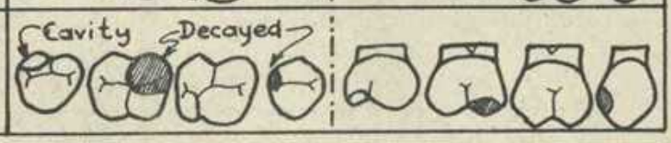
BRIDGE WORK... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



FILLINGS.. Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus :



CARIES (CAVITIES). Outline location and size of cavity, shade in thus :



DENTURES (PLATES)... Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

ADDITIONAL SPACE FOR FURTHER REMARKS

SIP. 4-45/50 M/77822

Declassified in accordance with D.O. 13

NY-017-R .29939

REQUEST FOR REIMBURSEMENT OF INTERMENT OR TRANSPORTATION EXPENSES

(Read Explanation on Reverse Side before completing form)

DATE

WW II

NAME OF DECEDENT (*Last, First, Middle Initial*)	BRANCH OF SERVICE	TO BE FILLED IN BY CLAIMANT
293 FORT, PAUL I.	USAAF	A. ☑ INTERMENT EXPENSES (*Civilian or Private Cemetery*)
RANK OR GRADE: 2/LT	SERIAL NO.: 0-784870	B. ☐ TRANSPORTATION EXPENSES (*National or Post Cemetery*)

INSTRUCTIONS TO PERSONS SIGNING THIS FORM

1. This form is NOT to be signed by Funeral Director.
2. Fill in as required and sign four copies.
3. Check Box "A" or Box "B" above, not both.
4. Check Box "A" when interment is in a civilian or private cemetery.
5. Check Box "B" when remains are delivered to home or other place prior to burial in a national or post cemetery.

NOV 17 1948

CLAIM VALID REPATRIATION

MAR

FILL IN THIS STATEMENT IF BOX "A" IS CHECKED

I certify that the sum of $ 75.00 was paid by me from personal funds in connection with the interment of the remains of the above-named decedent in the cemetery indicated below:

NAME: GROVE HILL CEMETERY

CITY OR COUNTY: DALLAS

STATE: TEXAS

FILL IN THIS STATEMENT IF BOX "B" IS CHECKED

I certify that the sum of $ was paid by me from personal funds in connection with the transportation of the remains of the above-named decedent from: (*City, town, or place from which remains were shipped*)

TO: (*Name and Location of National or Post Cemetery*)

RETURN FOUR COPIES TO

Fort Worth Quartermaster Depot
Fort Worth 1, Texas

Attention: ACR Division

P. J. Fort

SIGNATURE OF CLAIMANT

ADDRESS (*Street number or RFD, City and State*)

4933 LINDSLEY DALLAS, TEX.

RELATIONSHIP TO DECEDENT

FATHER

REMARKS

J. W. FAULDS
C., F. D.
F. O., U. S. A.
NOV 1948
Fort Worth, Texas
Station No. 477
Symbol No. 210-500

PAID

QMC FORM REV 5 MAR 48 **1236** PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE

16—54738-1

Declassified in accordance with D.O. 13

PART A

1. When the remains are delivered for interment in a civilian or private cemetery, you are responsible for paying all interment expenses. In this connection, you are entitled to the allowance mentioned in paragraph 2 below.

2. An amount not to exceed $75 is allowed by the Government toward actual interment expenses when final interment of the remains is in a private or civilian cemetery. No allowance is authorized toward interment expenses when interment is in a national or post cemetery.

3. The $75 maximum allowance by the Government toward interment expenses includes but is not limited to the payment of one or more of the following items: Hearse hire from the railroad station to your home, the funeral home, church, cemetery, or any other place designated by you; vault; church services; newspaper notices; transportation for friends and relatives to and from cemetery; and the services of a funeral director.

4. Reimbursement by the Government is made only to the person who paid from his personal funds the expenses of or incident to interment in a private or civilian cemetery. Receipted bills are not required to accompany this form. Any expenses over and above the $75 maximum must be borne by the person who incurred or paid the additional expenses.

PART B

1. When the remains are delivered to you at Government expense prior to burial in a national or post cemetery, you are responsible for all additional expenses necessary to deliver the remains from that point to the national or post cemetery grave site. However, you may be entitled to an allowance for the cost of transporting the remains from your home to the national or post cemetery grave site subject to the conditions outlined in paragraph 2 below.

2. Reimbursement of transportation expenses is allowed only when the cost to the Government to deliver the remains to you is LESS than what it would have cost the Government to deliver the remains direct to the national or post cemetery of final interment. However, the amount which you may be allowed (the difference between cost of delivery to you and cost of delivery by the Government direct to the national or post cemetery) may not exceed the amount actually expended by you to deliver the remains to the cemetery grave site. WHETHER OR NOT YOU WILL BE GRANTED AN ALLOWANCE IS DEPENDENT UPON AN AUDIT OF THIS REQUEST. IN ANY EVENT YOU WILL BE NOTIFIED OF ANY ALLOWANCE DUE YOU BY THE OFFICE TO WHICH THIS FORM IS SENT.

3. Reimbursement by the Government will be made only to the person who paid from his personal funds for transporting the remains to the national or post cemetery grave site.

4. No interment expense allowance is authorized since interment is made ultimately in a national or post cemetery.

RECEIVED
NOV 29 1948
FORT WORTH
FINANCE OFFICE
U. S. ARMY

U. S. GOVERNMENT PRINTING OFFICE 16—54755-1

Declassified in accordance with D.O. 13

BGT

IDENTIFICATION SECTION
MEMORIAL DIVISION

IDENTIFICATION DATA

LAST NAME - FIRST NAME - MIDDLE INITIAL			ARMY SERIAL NUMBER		GRADE
FORT, Paul I.			0-784 470 18 126 473		2nd Lt
HEIGHT	**WEIGHT**	**COLOR EYES**	**COLOR HAIR**	**SHOE SIZE**	**DATE OF DEATH**
5 ft 10 in	124	Grey	Brown	9½B	24-Mar-45

LAST ORGANIZATION TO WHICH ATTACHED OR ASSIGNED *(Give complete designation)*

88th TC Sq.

PLACE OF DEATH OR PLACE LAST SEEN IF MIA

2½ miles N.W. of Wesel, Germany

LIST ALL CAMPS IN WHICH STATIONED IN U.S. PRIOR TO SERVICE OVERSEAS, WITH INCLUSIVE DATES AT EACH.

STATION	DATES
Not of record	

FROM: WD, AGO CLINICAL RECORDS BRANCH

NO RECORDS ON FILE

FRACTURES AND/OR BREAKS	TATTOOS AND/OR BIRTH MARKS
Not of record	Not of record

DENTAL CHART 26-May-44

8 7 6 5 4 3 2 1 — UPPER RIGHT

1 2 3 4 5 6 7 8 — UPPER LEFT

16 15 14 13 12 11 10 9 — LOWER RIGHT

9 10 11 12 13 14 15 16 — LOWER LEFT

X - EXTRACTED O - CARIOUS / - CARIOUS NON-RESTORABLE

(Indicate dentures, bridgework, etc., if shown.)

AGPAC FORM 1 Aug 1946 I-380

Declassified in accordance with D.O. 13

Declassified in accordance with D.O. 13

BUDGET BUREAU No. 49-R277.

REQUEST FOR DISPOSITION OF REMAINS

GRADE OF DECEASED, NAME, ARMY SERIAL NUMBER AND REPORTED PLACE OF BURIAL

DATE: 3-19-48

333.1

2nd Lt Paul I. Fort, O 784 870
Plot Y, Row 12, Grave 279,
United States Military Cemetery
Margraten, Holland

1 December 1947

A		C	
B		D	

DO NOT WRITE ABOVE THIS LINE

NOTE.—The next of kin should familiarize himself with the contents of the pamphlet, "Disposition of World War II Armed Forces Dead," before filling out this form. When the proper part of this form is filled out and properly signed by the next of kin, it should be returned to the OFFICE OF THE QUARTERMASTER GENERAL, MEMORIAL DIVISION, WAR DEPARTMENT, WASHINGTON 25, D. C., in the self-addressed postage-free envelope provided for this purpose.

If you are the next of kin or authorized representative of next of kin and desire to direct the disposition of the remains, please fill in PART I of this form.

PART I

I, TANDY I. FORT
(PLEASE PRINT OR TYPE NAME OF NEXT OF KIN)

(Please indicate relationship to the deceased by placing an "X" in the proper box.)

- ☐ WIDOW
- ☐ WIDOWER
- ☐ SON OVER 21 YEARS OLD
- ☐ DAUGHTER OVER 21 YEARS OLD
- ☒ FATHER
- ☐ MOTHER
- ☐ BROTHER OVER 21 YEARS OLD
- ☐ SISTER OVER 21 YEARS OLD
- ☐ RELATIONSHIP OTHER THAN ABOVE *(Specify)* _____

HAVING FAMILIARIZED MYSELF WITH THE OPTIONS WHICH HAVE BEEN MADE AVAILABLE TO ME WITH RESPECT TO THE FINAL RESTING PLACE OF THE DECEASED DESIGNATED ABOVE, NOW DO DECLARE THAT IT IS MY DESIRE THAT THE REMAINS: *(Please place an "X" in the box opposite the option you have selected.)*

☐ 1. BE INTERRED IN A PERMANENT AMERICAN MILITARY CEMETERY OVERSEAS.

☐ 2. BE RETURNED TO THE UNITED STATES OR ANY POSSESSION OR TERRITORY THEREOF FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY

GROVE HILL DALLAS TEXAS
(NAME AND LOCATION OF CEMETERY)

☐ 3. BE RETURNED TO _____ (FOREIGN COUNTRY), THE HOMELAND OF THE DECEASED OR NEXT OF KIN, FOR INTERMENT BY NEXT OF KIN IN A PRIVATE CEMETERY LOCATED AT _____ (LOCATION OF CEMETERY SELECTED)

☐ 4. BE RETURNED TO THE UNITED STATES FOR FINAL INTERMENT IN A NATIONAL CEMETERY LOCATED AT _____ (LOCATION OF NATIONAL CEMETERY SELECTED)

(Please indicate if your own religious services at a location other than the selected national cemetery are desired by placing an "X" in the proper box)

☐ YES ☐ NO

THE NAME OF THE DECEASED, THE SERIAL NUMBER AND GRADE ARE CORRECT EXCEPT FOR THE FOLLOWING CHANGES: *(If no corrections are necessary, indicate this fact by inserting the word "NONE" in the space below.)*

NONE

Copied
20 Apr 48
by Baker

APR 21 1948

OQMG FORM 14 NOV 1944 345 MILITARY

PAGE 1

Declassified in accordance with D.O. 13

PART I (*Continued*)

If on Page 1 of this form you have selected Option Number 2 or 3, or Option Number 4 with your own funeral ceremonies desired at a location other than the selected national cemetery, complete one of these sections.

I, AS THE NEXT OF KIN, DO FURTHER DECLARE THAT I DESIRE THE REMAINS TO BE SENT TO THE FOLLOWING PERSON WHO HAS AGREED TO RECEIVE THEM:

LAST NAME	FIRST NAME		MIDDLE INITIAL
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY
EXPRESS OFFICE (*Nearest railroad passenger station*)	TELEGRAPH ADDRESS		TELEPHONE No.

OR

I, AS THE NEXT OF KIN, DO FURTHER DECLARE THAT I DESIRE THE REMAINS TO BE SENT TO THE FOLLOWING FUNERAL DIRECTOR WHO HAS AGREED TO RECEIVE THEM:

FULL NAME OF FUNERAL DIRECTOR: GUARDIAN FUNERAL HOME			
NUMBER AND STREET: 2811 OAK LAWN AV.,	CITY OR TOWN: DALLAS	COUNTY OR PROVINCE: DALLAS	STATE OR TERRITORY OF U. S. A., OR COUNTRY: TEXAS
EXPRESS OFFICE (*Nearest railroad passenger station*)	TELEGRAPH ADDRESS		TELEPHONE No.

IN CASE OF EMERGENCY THE NAME AND ADDRESS OF THE PERSON NEXT IN LINE OF KINSHIP AFTER ME, AS SET FORTH IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," IS:

LAST NAME	FIRST NAME	MIDDLE INITIAL	RELATIONSHIP TO DECEASED
NUMBER AND STREET	CITY OR TOWN	COUNTY OR PROVINCE	STATE OR TERRITORY OF U. S. A., OR COUNTRY

REMARKS OR ADDITIONAL INSTRUCTIONS (*For additional space use page 4.*)

AS EXPLAINED IN THE PAMPHLET, "DISPOSITION OF WORLD WAR II ARMED FORCES DEAD," I AM THE NEXT OF KIN AND THE INDIVIDUAL AUTHORIZED TO DIRECT THE DISPOSITION OF THE SAID REMAINS.

I, the undersigned, DO SOLEMNLY SWEAR (OR AFFIRM) that the statements made by me in the foregoing document are full and true to the best of my knowledge and belief.

Tandy I. Fort (SIGNATURE OF NEXT OF KIN)

TANDY I. FORT (NAME PRINTED OR TYPED)

4933 Lindsley Av., (STREET AND NUMBER)

Dallas Texas (CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 26 day of Dec., 19 47, at city (or town) of Dallas., county of Dallas Texas, and State (or Territory or District) of

W. H. Estoll (SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

NOTARY PUBLIC (OFFICIAL TITLE)

W. H. ESTOLL
Notary Public, Dallas County, Texas My Commission Expires May 31, 1949

*NOTE.—Page 4 is part of the notarial attestation.

Declassified in accordance with D.O. 13

PART II—RELINQUISHMENT OF DISPOSITION AUTHORITY

If you are the next of kin and you desire to relinquish your disposition authority, please fill in PART II of this form.

I, THE _____ (PLEASE INSERT RELATIONSHIP) AS THE NEXT OF KIN OF THE DECEASED NAMED IN PART I OF THIS FORM, DO HEREBY RELINQUISH MY RIGHTS TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED. THE NEXT EXISTING PERSON IN THE ORDER OF ELIGIBILITY OF DECEDENT'S SURVIVORS IS:

LAST NAME	FIRST NAME	MIDDLE INITIAL
RELATIONSHIP TO THE DECEASED		
NUMBER AND STREET	CITY OR TOWN	STATE OR COUNTRY

WHOM I UNDERSTAND SHALL HAVE THE RIGHT TO DIRECT FINAL DISPOSITION OF THE REMAINS OF THE DECEASED.

_____ (DATE)

_____ (SIGNATURE OF NEXT OF KIN)

_____ (STREET AND NUMBER)

_____ (NAME PRINTED OR TYPED)

_____ (CITY AND STATE)

PART III

If you are NOT the next of kin authorized to direct the disposition of remains, please fill in PART III of this form.

THIS IS TO NOTIFY YOU THAT I AM NOT THE NEXT OF KIN AUTHORIZED TO DIRECT THE FINAL DISPOSITION OF THE REMAINS OF THE DECEASED NAMED ON PAGE 1 OF THIS FORM. THE FOLLOWING PERSON, TO THE BEST OF MY KNOWLEDGE, IS THE NEXT OF KIN TO WHOM THIS FORM SHOULD BE DIRECTED.

LAST NAME	FIRST NAME	MIDDLE INITIAL
RELATIONSHIP TO THE DECEASED		
NUMBER AND STREET	CITY OR TOWN	STATE OR COUNTRY

_____ (DATE)

_____ (SIGNATURE)

_____ (STREET AND NUMBER)

_____ (NAME PRINTED OR TYPED)

_____ (CITY AND STATE)

Declassified in accordance with D.O. 13

ADDITIONAL REMARKS AND INSTRUCTIONS

All remarks and information entered here will be considered as part of the Notarial Attestation.





Declassified in accordance with D.O. 13

2nd Lt Paul I. Fort, O 784 870
Plot Y, Row 12, Grave 279,
United States Military Cemetery
Margraten, Holland

1 December 1947

Mr. Tandy I. Fort
4933 Lindsley Avenue
Dallas, Texas

Dear Mr. Fort:

The people of the United States, through the Congress have authorized the disinterment and final burial of the heroic dead of World War II. The Quartermaster General of the Army has been entrusted with this sacred responsibility to the honored dead. The records of the War Department indicate that you may be the nearest relative of the above-named deceased, who gave his life in the service of his country.

The enclosed pamphlets, "Disposition of World War II Armed Forces Dead," and "American Cemeteries," explain the disposition, options and services made available to you by your Government. If you are the next of kin according to the line of kinship as set forth in the enclosed pamphlet, "Disposition of World War II Armed Forces Dead," you are invited to express your wishes as to the disposition of the remains of the deceased by completing Part I of the enclosed form "Request for Disposition of Remains." Should you desire to relinquish your rights to the next in line of kinship, please complete Part II of the enclosed form. If you are not the next of kin, please complete Part III of the enclosed form.

If you should elect Option 2, it is advised that no funeral arrangements or other personal arrangements be made until you are further notified by this office.

Will you please complete the enclosed form, "Request for Disposition of Remains" and mail in the enclosed self-addressed envelope, which requires no postage, within 30 days after its receipt by you? Its prompt return will avoid unnecessary delays.

Sincerely,

8 Incls.

THOMAS B. LARKIN
Major General
The Quartermaster General

gwf

Declassified in accordance with D.O. 13

QMCMF 293
Fort, Paul I.
SN O-784 870

10 October 1947

Mr. and Mrs. T. I. Fort
4933 Lindsley Avenue
Dallas, Texas

Dear Mr. and Mrs. Fort:

Your letter pertaining to the remains of your son, the late Second Lieutenant Paul I. Fort, has come to my attention.

The "Request for Disposition of Remains" forms pertaining to the United States Military Cemetery Margraten, Holland, where the remains of your son are now buried are currently being mailed to the next of kin.

I fully understand your natural anxiety, and assure you that you will receive your Disposition Form in ample time for complete, satisfactory expression and fulfillment of your desires for the final disposition of your son's remains.

Please do not hesitate to call upon us at any time if you believe we can assist you further.

Sincerely yours,

RICHARD B. COOMBS
Major, QMC
Memorial Division

mh

DEC 10 1947

Declassified in accordance with D.O. 13

OCMF 383
Fort, Paul I.
NM 0-784 WPO

10 October 1947

Mr. and Mrs. T. I. Fort
4513 Lindsay Avenue
Dallas, Texas

Dear Mr. and Mrs. Fort:

Your letter pertaining to the remains of your son, the late Second Lieutenant Paul I. Fort, has come to my attention.

The "Request for Disposition of Remains" forms pertaining to the United States Military Cemetery Margraten, Holland, where the remains of your son are now buried are currently being mailed to the next of kin.

I fully understand your natural anxiety, and assure you that you will receive your Disposition Form in ample time for complete, satisfactory expression and fulfillment of your desires for the final disposition of your son's remains.

Please do not hesitate to call upon us at any time if you believe we can assist you further.

Sincerely yours,

RICHARD B. COOMBS
Major, QMC
Memorial Division

RBC

DEC 10 1947

Declassified in accordance with D.O. 13

CORRESPONDENCE ACTION SHEET

Addressee: ~~Mr.~~ ~~Miss.~~ Mrs. T. D. Fort — Parents (Relationship)

State 4933 Lindsley Avenue

City, State Dallas, Texas — '47 (Date letter)

Cemetery
Temporary: ___ ___ ___ _____ _____ _____

Permanent: ___ ___ ___ _____ _____ _____
Plot Row Gr Cem. Name or No. City Country

Decedent: Fort (Last) Paul (First) L. (Initial) 2/Lt. (Rank) O-794820 (ASN)

PARAGRAPHS (sequence) -- ADDITIONAL -- DATA -- MODIFICATIONS --

165A

The "Request for Disposition of Remains" forms pertaining to the United States Military Cemetery Margraten, Holland where the remains of your son ~~xx~~ are now buried are currently being mailed to the next of kin.

I fully understand your natural anxiety, and assure you that you will receive your Disposition Form in ample time for complete, satisfactory expression and fulfillment of your desires for the final disposition of your son's remains.

166E.

File
10 Dec 47

Analyst Typist Reviewer Modifications OKed

47 11117

Declassified in accordance with D.O. 13

November 6, 1947

War Department
Office of the Quartermaster General
Washington, 25, D. C.

Major General T. B. Larkin
Quartermaster General

Dear Sir;

We received information from your office regarding the burial location of our son, the late Second Lieutenant Paul I Fort, A.S.N. 0 784 870. We understood that we would be given an opportunity to request the return of his remains. At this time we have received no forms of any kind concerning this. We do want our son's remains returned to us and are ready to fill out any necessary forms that you might send us. We are not sure how this should be handled, but if it is necessary for us to request forms, please consider this our request. His remains are in the U. S. Military Cemetery Margraten, Holland.

Thanking you for your letter to us, we are,

Sincerely yours,

T. I. Fort

Mr. and Mrs. T. I. Fort
4933 Lindsley Avenue
Dallas, Texas

Declassified in accordance with D.O. 13

RECEIVED
DEC 3 1947
O.M.G.
MBRR

RECORDS BRANCH
DEC 1 9 27 AM '47
MEMORIAL DIVISION

Declassified in accordance with D.O. 13

13 March 1947

Mr. Tandy I. Fort
4933 Lindsley Avenue
Dallas, Texas

Dear Mr. Fort:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Second Lieutenant Paul I. Fort, A.S.N. 0 784 870.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Margraten, Holland, plot X, row 12, grave 279. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located ten miles west of Aachen, Germany, and is under the constant care and supervision of United States military personnel.

The War Department has now been authorized to comply, at Government expense, with the feasible wishes of the next of kin regarding final interment, here or abroad, of the remains of your loved one. At a later date, this office will, without any action on your part, provide all legal next of kin with full information and solicit their detailed desires.

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

MAR 12 1 57 PM '47
O.Q.M.G.
MAIL & RECORDS BRANCH

Enc

Declassified in accordance with D.O. 13

13 March 1947

Mr. Hardy I. York
5033 Lindsley Avenue
Dallas, Texas

Dear Mr. York:

The War Department is most desirous that you be furnished information regarding the burial location of your son, the late Second Lieutenant Paul I. York, A.S.N. 0 768 870.

The records of this office disclose that his remains are interred in the U. S. Military Cemetery Margraten, Holland, plot K, row 12, grave 279. You may be assured that the identification and interment have been accomplished with fitting dignity and solemnity.

This cemetery is located ten miles west of Aachen, Germany, and is under the supervision and supervision of United States military personnel.

The War Department has now been authorized to comply, at Government expense, with the feasible wishes of the next of kin regarding final interment, here or abroad, of the remains of your loved one. At a later date, this office will, without any action on your part, provide all legal next of kin with full information and solicit their detailed desires.

Please accept my sincere sympathy in your great loss.

Sincerely yours,

T. B. LARKIN
Major General
The Quartermaster General

2 Inc

Declassified in accordance with D.O. 13

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

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

1 April 1945
Date

FORT, Paul Irwin — UNKNOWN-X-185 (AMERICAN) (MARGRATEN) — 2nd Lt. — 0-784780
Last Name — First — Initial — Rank — Serial No.

UNKNOWN -- 30 T.C. Sqd. 4-38-T.C. G.P.
Unit — Organization

Near Fluren, Germany — 24 March 1945 — KIA
Place of Death — Date of Death — Cause of Death

1500 — 1 April 1945 — US Mil Cem., Margraten Holland VK 645482
Time and Date of Burial — Name of Cemetery — Name or Coordinates of Location

279 — 12 — X — Wooden Cross
Grave Number — Row Number — Plot Number — Type of Marker

Disposition of Identification Tags: Buried with body Yes ☐ No ☐ XX Attached to Marker Yes ☐ No ☐ XX

If No Identification Tags
How were remains identified?

Identified 7 Dec 45 by fingerprints submitted FBI thru AGO by OQMG, Wash D C
JJP

What means of identification were buried with the body?

GRS Embossed Plate and GRS Form #1

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

	Name	Serial No.	Rank	Organization	Grave No.
Who is buried on:	ALLEN	0-1114342	1st Lt	Engr	278
Deceased's Right:	BUNTLEY	34482753	Sgt	Engr	280
Deceased's Left:					

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:

Father, Mr. T.I. Fort
Emergency Addressee — Name
-Unknown--
4938 Lindsley Ave, Dallas, Texas
Address

Religion -Unknown--- Protestant

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

NONE

RECEIVED
20 SEP 1945
QM SECTION
BADA-ASC-USSTAF
455

OPY

/s/ Edwin J. Donovan
Signature of Officer or other person reporting burial
1st Lt., QMC GRS Officer
611th QM Gr Reg Co
Verified by G.R.S. Officer

Declassified in accordance with D.O. 13

REPORT OF BURIAL
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: UN
Weight: AVAIL
Color of Eyes: ABLE
Color of Hair:
Race:

Laundry Marks: UN
Number of Rifle: AVAIL
Wear Glasses? ABLE
Is Tooth Chart Attached?

(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.

Body too badly charred to obtain physical characteristics, tooth chart, or fingerprints.

Left Hand — Right Hand — Thumb — Thumb

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

Body was removed from the wreckage of a C-47 carrier plane which crashed on or about 24 March 1945, near Fluren, Germany. Plane Number: X-224102. Also removed from the wreckage were five other unidentified bodies, Unknowns X-178, X-179, X-181, X-188, and X-186 plus six other unidentified bodies. These are

Bowden, Clyde L., 36884111
Bruno, Arcangeli, 33610997
Green, Marion C., 34601186
King, James E., 35612546
Brooks, Leonard R., 13069286
Villalobos, Fabian, 39233208

It is believed that these were members of the 438th Group.

There was no information found on the body to distinguish this body from the other unknowns.

Evacuated by 605 QM Gr Reg Co

TOOTH CHART

Deceased's Left — 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 O; fillings by □; Bridges by ○ linking anchor teeth; replacements by artificial teeth X.

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.

Characteristics:

Other Data:

AG P BR HQ SOS 122560

Declassified in accordance with D.O. 13

CORRECTIONS AND ADDITIONS TO BURIAL REPORTS TAKEN FROM AG CAS CARD

CEMETERY MARGRATEN PLOT Y ROW 12 GRAVE 279

NAME : FORT PAUL IRWIN

RANK : 2nd LT

ASN : O-784870

ORGANIZATION : 88 TC SQ 438th T.C Grp

DATE OF DEATH : ---

PLACE OF DEATH : ---

CAUSE OF DEATH : ---

C.P. 20 May 1946.
(Signature)

Declassified in accordance with D.O. 13

CORRECTED COPY

/sm

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

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

12 April 1946
Date

FORT.	Paul	I	2/Lt	0-784870
Last Name	First	Initial	Rank	Serial No.

98 (34) 80 T.C. Sq.
Unit Organization

Vic. FLUREN, Germany	24 March 1945	K I A
Place of Death	Date of Death	Cause of Death

1500 - 1 April 1945	MARGRATEN U.S. Military Cemetery	K - 645482
Time and Date of Burial	Name of Cemetery	Name or Coordinates of Location

279	12	Y	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? Previously buried as Unknown X-185 (MARGRATEN)

Identified through fingerprints submitted to the Office of the Quartermaster General, letter file SPQYG 293, Unknown X-185 Holland (MARGRATEN).

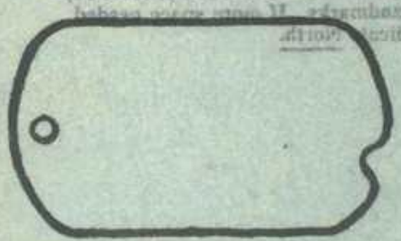
What means of identification were buried with the body?

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

Who is buried on:

	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Right:	WILKIE	01114342	1/Lt.	364 ENG REGT	278
Deceased's Left:	HUNTLEY	34482753	Sgt	364 ENG REGT	280

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 Mr. T.I. FORT
Name

4933 Lindsley Avenue, DALLAS, Texas
Address

Religion Protestant

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

NONE

This corrected copy of Report of Burial, prepared in the Office of the American Graves Registration Command.

MC

N.J. SLOANE, Capt., QMC.
Signature of Officer or other person reporting burial

Verified by G.R.S. Officer

6-18-46

Declassified in accordance with D.O. 13

REPORT OF BURIAL

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

(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: 4 3 2 1 Thumb

Right Hand: 4 3 2 1 Thumb

TOOTH CHART

Deceased's Left

8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8

Upper / Lower

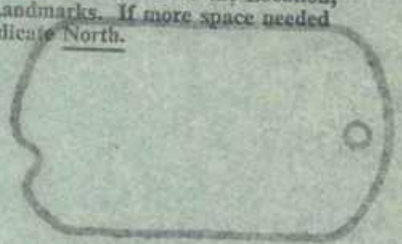
Deceased's Right

Indicate: missing natural teeth by X; crowns by O; fillings by □; Bridges by ○ linking anchor teeth; replacements by artificial teeth X

Characteristics:

Other Data:

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.



AG P.BR HO SOS /22560

Declassified in accordance with D.O. 13

293 Fort, Paul Irwin 0-784,780

AGRRE (Margraten, Y-12-279) 3rd Ind. PLM/TJM/pr

HEADQUARTERS, AMERICAN GRAVES REGISTRATION COMMAND, EUROPEAN THEATER AREA, APO 887, U. S. ARMY. 15 May 1946.

TO: The Quartermaster General, Washington 25, D. C.

Paragraph 3, basic communication complied with.

FOR THE COMMANDING OFFICER:

17 MAY 1946
2 cys
G.R.S.
APO 887

Paul L. McCrillis
PAUL L. McCRILLIS,
Major, Inf.
Actg. Asst. Adj. Gen.

293 Fort, Paul Irwin

Declassified in accordance with D.O. 13

RECEIVED
MAY 27 1946
FILE

MAY 27 3 43 PM '46
RECORDS BRANCH
MEMORIAL DIVISION

Declassified in accordance with D.O. 13

AGRRE (Margraten, Y-12-279) 1st Ind. PIM/MS/pr
(S: 8 May 1946)

HEADQUARTERS, AMERICAN GRAVES REGISTRATION COMMAND, EUROPEAN THEATER AREA, APO 887, U. S. ARMY. 17 April 1946.

TO: Commanding Officer, Headquarters Sector II, American Graves Registration Command, APO 776, U. S. Army.

1. Your attention is invited to basic communication.

2. Corrected Report of Burial for remains previously buried as X-185 (Margraten) is inclosed for your records.

3. It is directed that all Reports of Burial that may be on file, the marking of the grave, and any other pertinent records that may be maintained, be adjusted accordingly and this office notified by indorsement when this has been accomplished.

BY ORDER OF COLONEL ODELL:

Paul L. McCrillis

PAUL L. McCRILLIS
Major Infantry
Assistant Adjutant

1 Incl.

(VER. DIST 4550 Ext. 97)

out 10 MAY 1946 HQ. 533rd QM Co. 0970

24 APR 1946 HQ. 533rd QM

19 APR. 1946 G.R.S.C. APO

Margraten Y-12-279 2nd Ind. GEMoC/amj

Hq., Sector II, AGRC., 6869th QM BN (Prov), APO 776, US Army, 9 May 1946

TO: Commanding Officer, American Graves Registration Command, APO 887, US Army.

1. Basic communication complied with, except that portion which pertains to the means of identification buried with the remains

FOR THE COMMANDING OFFICER:

L. S. McLain

L. S. McLAIN
Capt. Inf.
Adjutant

Declassified in accordance with D.O. 13

SAVE

FOR VICTORY BUY UNITED STATES WAR BONDS AND STAMPS

ARMY SERVICE FORCES
OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

IN REPLY REFER TO SPQYG 293
Unknown X-185
Holland (Margraten)

27 March 1946

SUBJECT: Identification of Unknown Deceased

TO: Commanding General, American Graves Registration Command
European Theater Area, Versailles, France
APO 887, c/o Postmaster
New York, New York

1. The fingerprints submitted for Unknown X-185, US Military Cemetery, Margraten, Holland, Plot Y, Row 12, Grave 279, have been compared and found identical with those on file for Paul Irwin Fort, 2nd Lt., O-784870, Air Corps. His religious preference was signified as Protestant.

2. His father, Mr. T. I. Fort, 4933 Lindsley Avenue, Dallas, Texas, was indicated as the emergency addressee.

3. It is requested that the records of your headquarters, as well as the marking of the grave, be corrected accordingly, and this office advised upon completion thereof.

4. The burial report submitted to this office has been amended.

FOR THE QUARTERMASTER GENERAL:

J. H. Schwarz Lt Col QMC

For M. V. TURNER
Colonel, QMC
Assistant

21 22 23 24 1 2 3
20 4
-IN-
1826
-9 APR 1946
AGRC
APO 887
16 8
15 13 12 11 10 9

6-3-46

Declassified in accordance with D.O. 13

Declassified in accordance with D.O. 13

SPQYG 293
Unknown X-185
Holland (Margraten)

1st Lt Paul Irwin Fort 0-784,780

27 March 1946

SUBJECT: Identification of Unknown Deceased

TO: Commanding General, American Graves Registration Command
European Theater Area, Versailles, France
APO 887, c/o Postmaster
New York, New York

1. The fingerprints submitted for Unknown X-185, US Military Cemetery, Margraten, Holland, Plot Y, Row 12, Grave 279, have been compared and found identical with those on file for Paul Irwin Fort, 2nd Lt., O-784870, Air Corps. His religious preference was signified as Protestant.

2. His father, Mr. T. I. Fort, 4933 Lindsley Avenue, Dallas, Texas, was indicated as the emergency addressee.

3. It is requested that the records of your headquarters, as well as the marking of the grave, be corrected accordingly, and this office advised upon completion thereof.

4. The burial report submitted to this office has been amended.

FOR THE QUARTERMASTER GENERAL:

M. V. TURNER
Colonel, QMC
Assistant

APR 1 10 21 AM '46
MAIL & RECORDS BRANCH

sh
GP

ASR
JLP
SDC
JHS
RMP

COPY FOR: Army Effects Bureau, Kansas City Quartermaster Depot,
601 Hardesty Ave., Kansas City 1, Missouri.

MAR 28 10 25 AM '46
RECEIVED
REGISTRATION AND
RECORDS BRANCH

For Information.

Photo copies delivered to Control and AGO.
sh

Orig. fwd. to K. C. by this office.

293 unk. X-185, Holland (Margraten)

Declassified in accordance with D.O. 13

27 March 1945

SUBJECT: Identification of Unknown Deceased

TO: Commanding General, American Graves Registration Command
European Theater Area, Versailles, France
APO 887, c/o Postmaster
New York, New York

1. The fingerprints submitted for Unknown X-185, US Military Cemetery, Margraten, Holland, Plot V, Row 12, Grave 279, have been compared and found identical with those on file for Paul Irwin Fort, 2nd Lt., O-758270, Air Corps. His religious preference was signified as Protestant.

2. His father, Mr. T. I. Fort, 4933 Lindsley Avenue, Dallas, Texas, was indicated as the emergency addressee.

3. It is requested that the records of your headquarters, as well as the marking of the grave, be corrected accordingly, and this office advised upon completion thereof.

4. The burial report submitted to this office has been amended.

FOR THE QUARTERMASTER GENERAL:

M. V. TUCKER
Colonel, GSC
Assistant

COPY FOR: Army Effects Bureau, Kansas City Quartermaster Depot,
801 Broadway Ave., Kansas City 1, Missouri.

For information.

Photo copies delivered to Control and ADC.
eh

Declassified in accordance with D.O. 13

AGPC-S 704 (13 Nov 45) 1st Ind. TJH/SF/4602
War Dept., AGO, Washington 25, D. C., 7 December 1945
To: The Quartermaster General, Washington 25, D. C.
Attention: Chief, Registration and Planning Branch,
Room 1100, Temporary Building C.

Fingerprints on attached Reports of Burial (QM Forms 1-GRS) have been identified as indicated on the reverse side of each report. The correct name, rank, organization, serial number, emergency addressee, status, and religious preference for each soldier is indicated on the Visi-Card and Record Report attached to the report of burial.

FOR THE ADJUTANT GENERAL:

John T. Burns
JOHN T. BURNS,
Lt. Col., AGD,
Officer in Charge,
Status Review and
Determination Section.

2 Incls.
1 Rpt. of Burial X-185, Margraten
1 Visi Card and Record Rpt.

293- Hmb X-185- Holland

File 3/15/46 SA

Declassified in accordance with D.O. 13

RECEIVED
DEC 10 1945
QMG

GRAVES REGISTRATION SECTION
DEC 11 10 22 AM '45
MEMORIAL DIVISION

DEC 11 9 39 AM '45
MEMORIAL DIVISION

Declassified in accordance with D.O. 13

SAVE

FOR VICTORY BUY UNITED STATES WAR BONDS AND STAMPS

ARMY SERVICE FORCES

OFFICE OF THE QUARTERMASTER GENERAL
WASHINGTON 25, D. C.

IN REPLY REFER TO SPQXG 293
Unk. X-185
(Margraten) Holland

13 November 1945

SUBJECT: Fingerprints of Unknown Deceased

TO : The Federal Bureau of Investigation, Department of Justice, Washington, D.C.
ATTENTION: Mr. J. Edgar Hoover

THRU : Status Review & Determination, Casualty Branch, AGO 4602 Munitions Building, Washington, D.C.

1. The inclosed Burial Form is forwarded to your office with a request that comparison be made of the fingerprints thereon with those on file for the following:

Fort, Paul I., 2nd.Lt.,O-784780
Moore, Edmund C., S/sgt., 15101927
Nugent, Harvey L., Pfc., 39338223
Parker, Stephen J., Pvt., 20274499
Paul, George F., S/sgt., 34670505
Payne, Darrell G., Pfc., 39027991
Staar, John H., S/sgt., 19096418

2. It is requested that the form be returned with the report of your findings.

FOR THE QUARTERMASTER GENERAL:

Arthur S. Rosengard

1 Incl
1 Burial Form

ARTHUR S. ROSENGARD
2nd.Lt., QMC
Assistant

File 3/15/46

Declassified in accordance with D.O. 13

SPQM 293
Unk. X-185
(Margraten) Holland

293 Fort, Paul I. O-784,780

13 November 1945

SUBJECT: Fingerprints of Unknown Deceased

TO : The Federal Bureau of Investigation, Department of Justice, Washington, D.C.
ATTENTION: Mr. J. Edgar Hoover

THRU : Status Review & Determination, Casualty Branch, AGO 4602 Munitions Building, Washington, D.C.

1. The inclosed Burial Form is forwarded to your office with a request that comparison be made of the fingerprints thereon with those on file for the following:

293
X
Ea
Name

Fort, Paul I., 2nd.Lt., O-784780
Moore, Edmund C., S/sgt., 15101927
Nugent, Harvey L., Pfc., 39338223
Parker, Stephen J., Pvt., 30274499
Paul, George F., S/sgt., 34670505
Payne, Darrell G., Pfc., 39027991
Staar, John H., S/sgt., 19096418

2. It is requested that the form be returned with the report of your findings.

FOR THE QUARTERMASTER GENERAL:

1 Incl
1 Burial Form

ARTHUR S. ROSENGARD
2nd.Lt., QMC
Assistant

E.D.

Ltr. Taken to Adj by Jane Coupaches, 11/13/45

293/Unk. X-185, Holland (Margraten)

File 11/13/45 Kovacich

Declassified in accordance with D.O. 13

Letter to AGO., St. Louis, Missouri requesting Religious Preference 17 December 1945. See Cunningham, John B. Folder for Letter.

20 Feb 46

Declassified in accordance with D.O. 13

4

HEADQUARTERS
US THEATER GRAVES REGISTRATION SERVICE
THEATER SERVICE FORCES
EUROPEAN THEATER

293 Unk. X-185-Holland (Margraten)

PJW/GVL/rh

GRSC (Margraten Y-12-279)

(Rear)APO 887.
14 September 1945.

SUBJECT: Request for Information of Deceased Personnel.

TO: The Quartermaster General, Washington 25, D.C.

1. Reference is made to Report of Burial for Unknown X-185 (Margraten) forwarded to your headquarters by Transmittal Letter number 1231, dated 29 May 1945.

2. The remains were recently disinterred and reprocessed for additional information. Two fingerprints were obtained and are forwarded on the inclosed corrected Report of Burial, as well as Check List and Tooth Chart. The remains are believed to be one of the deceased listed on the inclosed copy of Supplemental Missing Air Crew Report.

3. It is requested that the fingerprints be compared with those on file at the War Department and this headquarters notified of any results that may be obtained.

For the Director General:

J B Pierce
J.B. PIERCE,
Captain AGD.
Adjutant.

4 Incls: a/s.

OUT
18 SEP. 1945
G.R.S.
APO 887

293 unk X 185 Germany (Margraten)

File 45 Dec 12 Sent

file 11/15/45 am. Tomyde.

Declassified in accordance with D.O. 13

GRAVES REGISTRATION SECTION
SEP 26 11 46 AM '45
MEMORIAL DIVISION

MEMORIAL DIVISION
SEP 25 1 31 AM '45

Declassified in accordance with D.O. 13

QQM-GRAE Div

CHECK LIST FOR UNKNOWNS

UNKNOWN - 185
CEMETERY Margraten, Holland
PLOT Y ROW 12 GRAVE 279

Arrived at cemetery _____ From _____
(hour) (date) (collecting point)

Place of death Vic Fluren, Germany
(name) (coordinates and long and lat)

Remains recovered by 605 QM Gr. Reg. Co.
(name and organization)

Evacuated to cemetery by 605 QM Gr. Reg. Co.
(name and organization)

Is load list attached No Are names of deceased found in same area as this Unknown starred No Are circumstances described which may indicate organization of the deceased No If only part of body was received, was a careful search made for other parts of unknown Yes
(yes-no)

If remains came from vehicle, plane, etc. C-47 No. 224102- 438th Group
(type of vehicle or plane, nickname, serial number, organization or symbols)

Crew list Bowden, Clyde L. 36684111- Brund, Arcangeli 33610997, Green Marion C. 34601180; King James E. 35613456; Brooks Leonard R. 13069286- Villalurus Fabian 39233208
(names of other deceased and positions in which found)

If a tank, which hatches were free and available for escape use _____

If organization to which vehicle or plane was assigned or if names of all other deceased are not known, give detailed information concerning vehicle or plane _____

UNKNOWN
(parts of markings or symbols) (burned, (pierced by shell fire - where)

(found in town, field, by road, etc.) (damaged by mine explosion)

(names of men who escaped) (description of other vehicles or planes in same area)

Detailed description of personal effects _____
(Indicate exact pocket or part of body where found)

UNKNOWN

Declassified in accordance with D.O. 13

OQMG-CRAE Div

CHECK LIST FOR UNKNOWNS

UNKNOWN 185
CEMETERY Margraten, Holland
PLOT Y ROW 12 GRAVE 279

Arrived at cemetery _____ From _____
(hour) (date) (collecting point)

Place of death Vic Fluren, Germany
(name) (coordinates and location)

Remains recovered by 605 QM Gr. Reg. Co.
(name and organization)

Evacuated to cemetery by 605 QM Gr. Reg. Co.
(name and organization)

Is load list attached No. Are names of deceased found in same area as this Unknown starred (yes) No. Are circumstances described which may indicate organization of the deceased (yes) No. If only part of body was received, was careful search made for other parts of unknown (yes) Yes.

If remains came from vehicle, plane, etc: C-47 No. 224102- 438th Group
(type of vehicle, plane, name, serial number, organization or symbols)

Crew list Bowden, Clyde L. 36884111- Brund, Arcangeli 33610987, Green Marion C. 34601180; King James E. 35613456; Brocks Leonard R. 13069286- Villalurus Fabian 39235208

If plane, which hatches were free and available for escape use _____

If organization to which vehicle or plane was assigned or if names of all other deceased are not known, give detailed information concerning vehicle or plane _____

(parts of markings, symbols) UNKNOWN (burned) (pierced by shell fire - where)

(found in town, field, by road, etc.) (destroyed by mine explosion)

(names of men who escaped) (description of other vehicles or planes in same area)

Detailed description of personal effects _____
(indicate exact pocket or part of body where found)

UNKNOWN

Declassified in accordance with D.O. 13

Item	Clothing Markings	Sizes	Color	Indicate unusual markings, wear, tear, repairs, etc.
*Headgear (type)				
Raincoat				
Overcoat				
Jacket, Field				
Jacket, Combat				
Mackinaw				
Sweater				
Jacket, HBT				
Shirt, Wool OD Gabardine			Pink	10" of Rt. sleeve found
Undershirt, Wool				
Undershirt, Cotton				
Trousers, HBT				
*Trousers, Wool OD				
Belt, Web				
Drawers, Wool				
Drawers, Cotton				
Leggings				(note unusual lacing)
Socks Wool / Cotton				
*Shoes (type)				
Overshoes				
Web Equipment (type)				
(Other Item)				
(Other Item)				

*If body is nude, sizes of these items should be computed by measuring the remains.

Chevrons or Insignia (type & location; shirt, jacket, coat, helmet) Unknown Shoulder Patch Unknown

Description of Remains:

Age Unk Height Unk Weight Unk Description of wounds KIA

Declassified in accordance with D.O. 13

Item	Clothing Markings	Sizes	Color	Indicate unusual markings, wear, tear, repairs, etc.
*Headgear (type)				
Raincoat				
Overcoat				
Jacket, Field				
Jacket, Combat				
Mackinaw				
Sweater				
Jacket, HBT				
*Shirt, Wool Gabardine			Pink	10" of Rt. sleeve found
Undershirt, Wool				
Undershirt, Cotton				
Trousers, HBT				
*Trousers, Wool OD				
Belt, Web				
Drawers, Wool				
Drawers, Cotton				
Leggings				(note unusual lacing)
Socks Wool / Cotton				
*Shoes (type)				
Overshoes				
Web Equipment (type)				
(Other Item)				
(Other Item)				

*If body is nude, sizes of these items should be computed by measuring the remains.

Chevrons or Insignia (type & location; shirt, jacket, coat, helmet) Unknown Shoulder Patch Unknown

Description of Remains:

Age Unk Height Unk Weight Unk Description of wounds

Declassified in accordance with D.O. 13

Peculiarities or Irregularities _____ (length, width, location)

_____

_____ Tattoos _____ (number, location - illustrate on separate page)

Outstanding moles, warts or birthmarks _____ (yes-no) (description, location)

_____

Sunburn or tan, other than hands and face _____

Tobacco stain on fingers or teeth _____ (designate where, extent)

Complexion _____ Build _____ (light, med, dark, clear, pimples, pocks, freckles) (large, fat, thin, muscular)

Hair _____ (color, length, quantity, curly, wavy, straight, whorls, or definite parting, baldness, widows peak, distinctive cutting or other characteristics)

Sideburns _____ Mustache _____ Beard or goatee _____ (length, heavy, light, color, extent)

Eyes _____ Eyebrows _____ (color, setting, shape) (color, bushiness, extend across nose)

Nose _____ Ears _____ (size, shape, straight) (size, set close to or far from head)

Forehead _____ Mouth _____ Lips _____ (high, wide wrinkled) (large, medium, small) (small, large, full)

Teeth _____ (white, size, unevenness, spacing, noticeable crowns, fillings, extractions)

Chin _____ Cheeks _____ (prominent, receding, pointed, dimple, double) (high, normal)

Jaw _____ Circumference of head in inches _____ (large, small, normal) (hat band)

Neck _____ Larynx _____ Shoulders _____ (size, long, short, normal, wrinkled) (prominent, normal) (broad straight, small, rounded)

Arms _____ Hands _____ (length) (muscular, color, extent & quantity of hair) (vaccination scar size of quarter) (large, small, normal, calloused noticeably)

(marks on fingers indicating that rings were worn)

_____

Page (Feedback List for Unknowns)

Declassified in accordance with D.O. 13

Bandages or dressings _____ Scars _____
(length, width, location)

_____

_____ Tattoos _____
UNKNOWN
(number, location - illustrate on sep. page)

Outstanding moles, warts or birthmarks _____
(yes-no) (description, location)

_____

Sunburn or tan, other than hands and face _____

Tobacco stain on fingers or teeth _____
(designate where, extent)

Complexion _____ Build _____
(light, med, dark, clear, pimples, pocks, freckles) (large, fat, thin,

_____
muscular)

Hair _____
(color, length, quantity, curly, wavy, straight, whorls, or definite parting,

_____
baldness, widows peak, distinctive cutting, or other characteristics)
UNKNOWN

Sideburns _____ Mustache _____ Beard or goatee _____
(color, setting, shape) (color, size, shape) (length,
UNKNOWN

_____
heavy, light, color, extent)

Eyes _____ Eyebrows _____
(color, setting, shape) (color, bushiness, extend across nose)

Nose _____ Ears _____
(size, shape, straight) (size, set close to or far from head)

Forehead _____ Mouth _____ Lips _____
(high, wide wrinkled) (large, medium, small) (small, large, thin)

Teeth _____
(white, size, evenness, spacing, noticeable crowns, fillings, extractions)

Chin _____ Cheeks _____
UNKNOWN
(prominent, receding, pointed, ample, double) (high, normal)

Jaw _____ Circumference of head in inches _____
(large, small, normal) (hat band)

Neck _____ Larynx _____ Shoulders _____
UNKNOWN
(size, long, short, normal, wrinkled) (prominent, normal) (broad

_____ Arms _____
straight, small, rounded) (length) (muscular, color, extent & quantity of hair)

_____ Hands _____
(vaccination scar size of wrist) (large, small, normal, callousad noticeably)

_____
(marks on fingers indicating that rings were worn)

_____
(See Check List for Unknowns)

Declassified in accordance with D.O. 13

Fingers (short, thick, long, slender; size of knuckles) (missing fingers or joints) UNKNOWN

(unusual characteristics of fingernails).

Chest (Size at nipples; color, quantity & extent of hair; large, small, normal).

Back (quantity and extent of hair) Waist (size at navel, appendectomy, amount & color of hair)

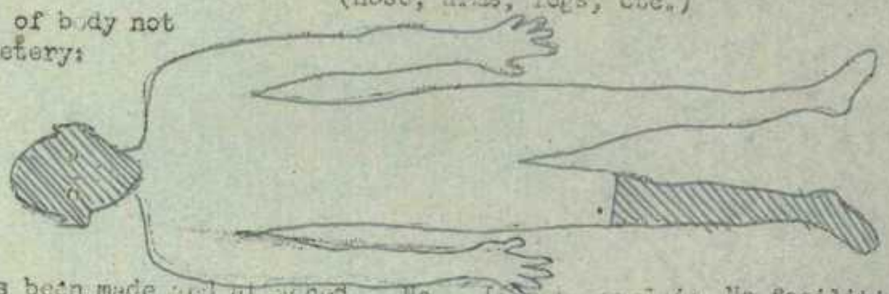
Circumcized (yes-no) Pubic hair (color) Herniaplasty (yes-no) (location)

Legs (inseam) (muscular; knock-kneed, bowed, normal) (quantity, color & extent of hair)

Feet (size; corns; callouses; flat) UNKNOWN Toes (slender, straight, crooked, overlap) UNKNOWN

Evidence of healed fractures (nose, arms, legs, etc.)

Black out parts of body not received at cemetery:



Have photographs been made and attached No If not, explain No facilities (yes-No)

Have fingerprints been placed on GRS #. No If not explain Body decomposed. (yes-no)

Has tooth chart been prepared? Yes If not explain (yes-no)

Remarks: Body badly decomposed and charred found broken jaw bones with teeth

Cleon E. Wells

Signature of Officer and Organization
CLEON E. WELLS 1st Lt. QMC
603rd QM Gr. Reg. Co.

Declassified in accordance with D.O. 13

Fingers UNKNOWN (short, thick, long, slender; size of knuckles) (missing fingers or joints).

(unusual characteristics of fingernails).

Chest (Size at nipples; color, quantity & extent of hair; large, small, normal).

Back (quantity and extent of hair) Waist (size at navel, appendectomy, amount & color of hair)

Circumcized (yes-no) Pubic hair (color) Herniaplasty (yes-no) (location)

Legs (inseam) (muscular; knock-kneed, bowed, normal) (quantity, color & extent of hair)

Feet UNKNOWN (size; corns; callouses; flat) Toes UNKNOWN (slender, straight, crooked, overlap)

Evidence of healed fractures (nose, arms, legs, etc.)

Black out parts of body not received at cemetery:



Have photographs been made and attached? No (yes-no) If not, explain No facilities

Have fingerprints been placed on GRS #0 No (yes-no) If not, explain Body decomposed

Has tooth chart been prepared? Yes (yes-no) If not explain

Remarks: Body badly decomposed and charred found broken jaw bones with teeth

Cleon E. Wells.
(Signature of Officer and Organization)
CLEON E. WELLS 1st Lt. QMC
603rd QM Gr. Reg. Co.

Declassified in accordance with D.O. 13

G. R.& E. DIV.
OFFICE OF THE CHIEF QUARTERMASTER
HQ. COM. ZONE, ETOUSA

TOOTH CHART

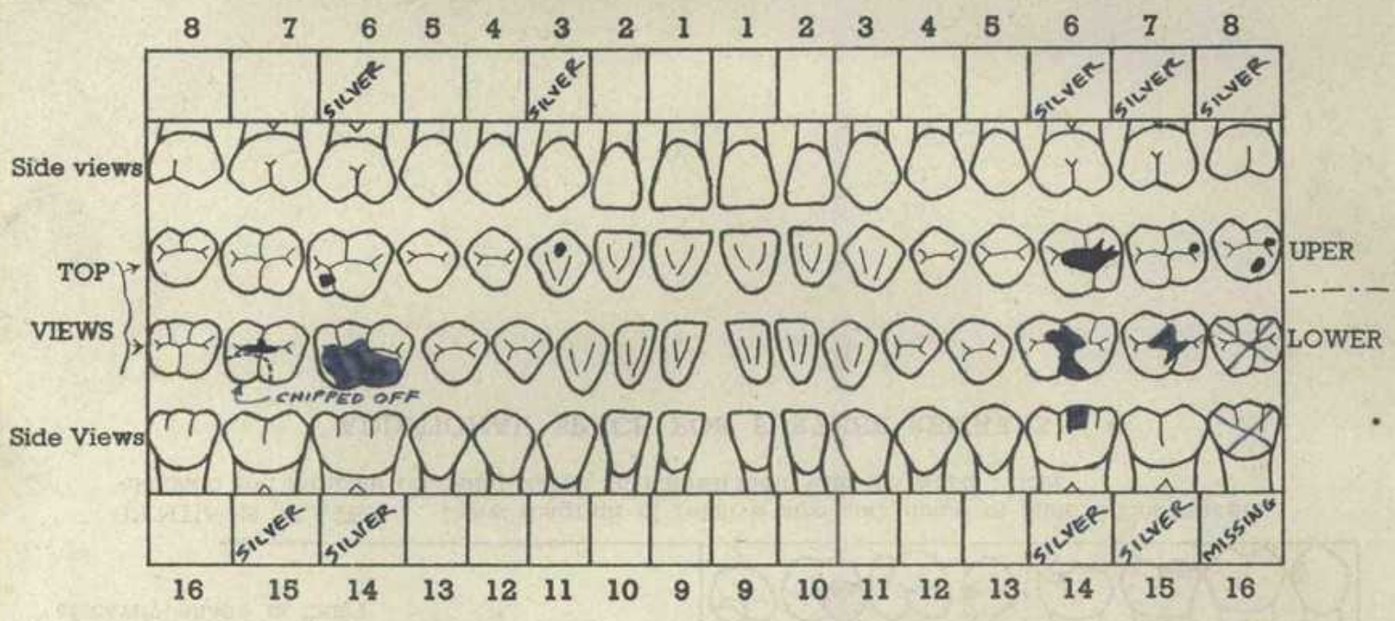
Aug 10 1945
Date

Last Name	First	Initial	Rank	Serial No.
Unknown X-185	Unknown			

Unit — Organization

Place of Death	Date of Death	Cause of Death
Vic Fluren, Germany	24 March 1945	KIA

Right — Left



This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions : Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

Cleon E. Wells
Signature of Officer or other person who prepared Tooth chart

CLEON E. WELLS 1st Lt. QMC
603rd QM Gr. Reg. Co.
Verfield by G. R. S. Officer

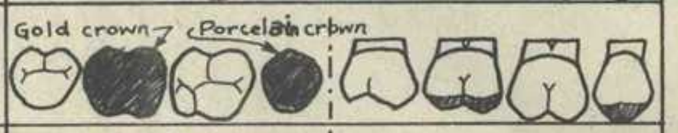
GRAVES REGISTRATION
FORM N° 1-A

Declassified in accordance with D.O. 13

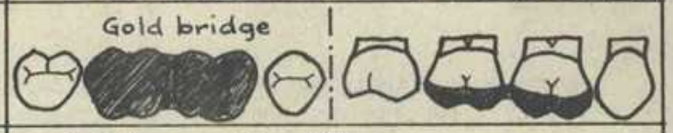
MISSING TEETH... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



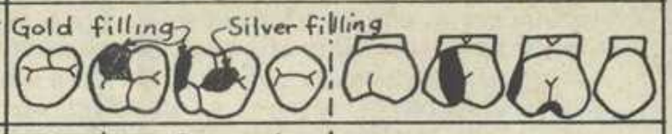
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



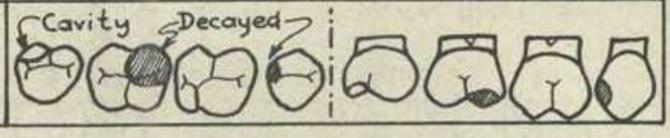
BRIDGE WORK... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



FILLINGS.. Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus :



CARIES (CAVITIES). Outline location and size of cavity, shade in thus :



DENTURES (PLATES)... Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

ADDITIONAL SPACE FOR FURTHER REMARKS

SIP. 4-45/50M/77822

Declassified in accordance with D.O. 13

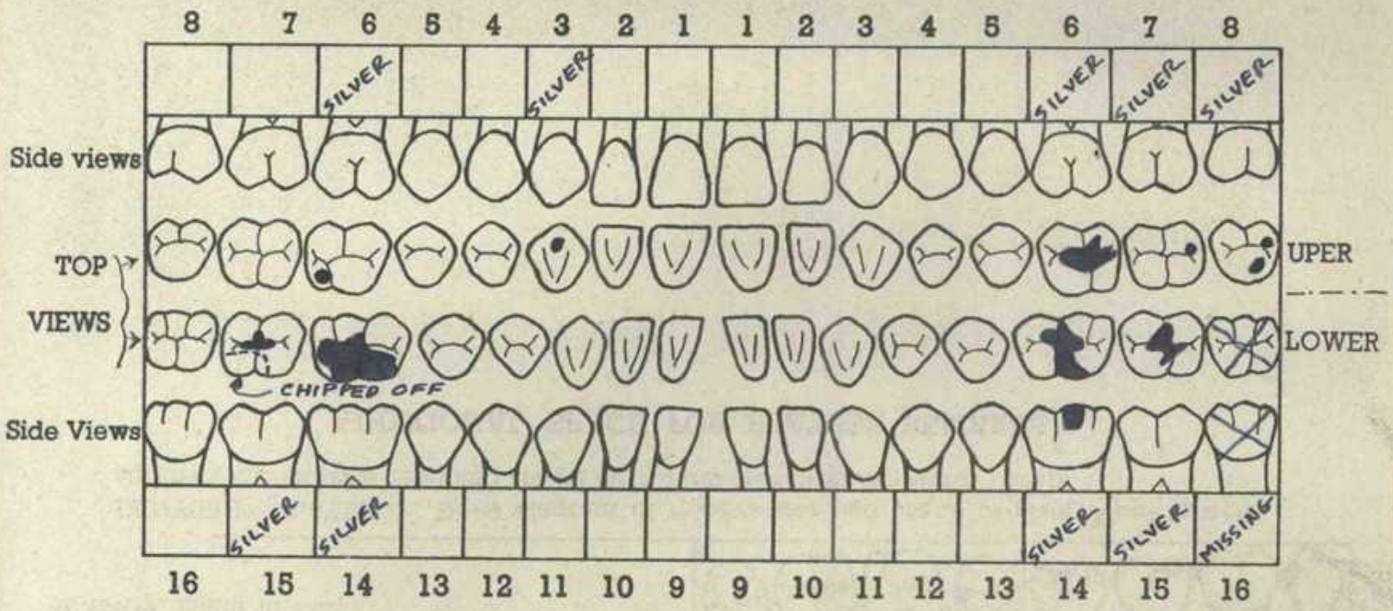
G. R.& E. DIV.
OFFICE OF THE CHIEF QUARTERMASTER
HQ. COM. ZONE, ETOUSA

TOOTH CHART

Aug 10 1945
Date

Unknown X-185				
Last Name	First	Initial	Rank	Serial No.
Unknown				
Unit			Organization	
Vic Fluren, Germany	24 March 1945		KIA	
Place of Death	Date of Death		Cause of Death	

Right Left



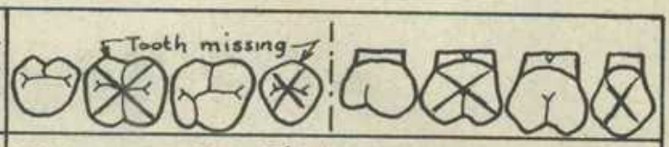
This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions : Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

Olon D. Wells.
Signature of Officer or other person who prepared Tooth chart
OLEON E. WELLS 1st Lt. QMC
603rd QM Gr. Reg. Co.
Verfield by G. R. S. Officer

GRAVES REGISTRATION
FORM N° 1-A

Declassified in accordance with D.O. 13

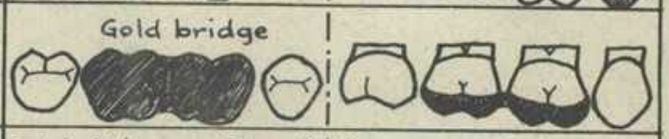
MISSING TEETH... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



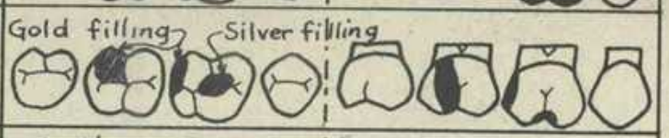
CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



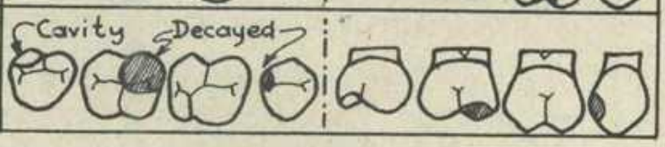
BRIDGE WORK... Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge), thus :



FILLINGS.. Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus :



CARIES (CAVITIES). Outline location and size of cavity, shade in thus :



DENTURES (PLATES)... Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

ADDITIONAL SPACE FOR FURTHER REMARKS

SIP. 4-45/50M/77322

Declassified in accordance with D.O. 13

QQQ-CRAR Div

CHECK LIST FOR UNKNOWNS

UNKNOWN - 185
CEMETERY - Margraten, Holland
PLOT Y ROW 12 GRAVE 279

Arrived at cemetery _____ From _____
(hour) (date) (collecting point)

Place of death Vic Fluren, Germany
(name) (coordinates and long-hand)

Remains recovered by 605 QM Gr. Reg. Co.
(name and organization)

Evacuated to cemetery by 605 QM Gr. Reg. Co.
(name and organization)

Is load list attached No Are names of deceased found in same area as this Unknown starred No Are circumstances described which may indicate organization of the deceased No If only part of body was received, was a careful search made for other parts of Unknown Yes
(yes-no)

If remains came from vehicle, plane, etc: C-47 No. 224102- 438th Group
(type of vehicle or plane, nickname, serial number, organization or symbols)

Crew list Bowden, Clyde L. 36804111- Brund, Arcangeli 33610997, Green Marion C. 34601180; King James E. 35613456; Brooks Leonard R. 13069286- Villalurus Fabian 39233208
(names of other deceased and positions in which found)

If a tank, which hatches were free and available for escape use _____

If organization to which vehicle or plane was assigned or if names of all other deceased are not known, give detailed information concerning vehicle or plane _____

(parts of markings UNKNOWN symbols) (burned) (pierced by shell fire - where)

(found in town, field, by road, etc.) (damaged by mine explosion)

(names of men who escaped) (description of other vehicles or planes in same area)

Detailed description of personal effects _____
(Indicate exact pocket or part of body where found)

UNKNOWN

Declassified in accordance with D.O. 13

Incisions or dressings _____ Scars _____
(length, width, location)

_____

UNKNOWN Tattoos _____
(number, location - illustrate on sep. page)

Outstanding moles, warts or birthmarks _____
(yes-no) (description, location)

Sunburn or tan, other than hands and face _____

Tobacco stain on fingers or teeth _____
(designate where, extent)

Complexion _____ Build _____
(light, med, dark, clear, pimples, pocks, freckles) (large, fat, thin,

_____
muscular)

Hair _____
(color, length, quantity, curly, wavy, straight, whorls, or definite parting,

_____
baldness, widows peak, distinctive cutting or other characteristics) UNKNOWN

Sideburns _____ Mustache _____ Beard or goatee _____
(color, setting, shape) UNKNOWN (color, size, shape) (length,

_____
heavy, light, color, extent)

Eyes _____ Eyebrows _____
(color, setting, shape) (color, bushiness, extend across nose)

Nose _____ Ears _____
(size, shape, straight) (size, set close to or far from head)

Forehead _____ Mouth _____ Lips _____
(high, wide wrinkled) (large, medium, small) (Small, large, color)

Teeth _____
(white, size, unevenness, spacing, noticeable crowns, fillings, extractions)

Chin _____ Cheeks UNKNOWN _____
(prominent, receding, pointed, dimple, double) (high, normal)

Jaw _____ Circumference of head in inches _____
(large, small, normal) (hat band)

Neck _____ Larynx _____ Shoulders _____
(size, long, short, normal, wrinkled) (prominent, normal) (broad

_____ Arms _____
straight, small, rounded) (length) (muscular, color, extent & quantity of hair)

_____ Hands _____
(vaccination scar size of wrist) (large, small, normal, callouses noticeably)

_____
(marks on fingers indicating finger ring wore, etc)

_____
Page (Check List for Unknowns)

Declassified in accordance with D.O. 13

Fingers UNKNOWN
(short, thick, long, slender; size of knuckles) (missing fingers or joints).

Nails
(unusual characteristics of fingernails).

Chest
(Size at nipples; color, quantity & extent of hair; large, small, normal)

Back Waist
(quantity and extent of hair) (size of navel, appendectomy, umbilical & color of hair)

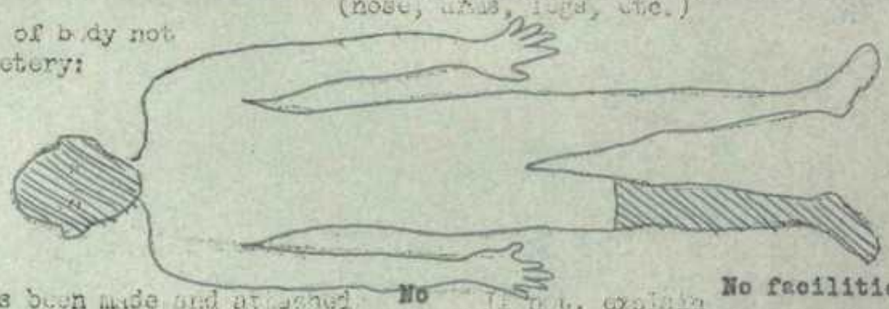
Circumcized Pubic hair Hernia/Piles/Varicocele
(yes-no) (color) (yes-no) (location)

Legs
(inseam) (muscular; knock-kneed, bowed, normal) (quantity, color & extent of hair)

Feet UNKNOWN Toes UNKNOWN
(size; corns; callouses; flat) (slender, straight, crooked, overlap)

Evidence of healed fractures
(nose, arms, legs, etc.)

Black out parts of body not received at cemetery:



Have photographs been made and attached? No If not, explain No facilities
(yes-no)

Have fingerprints been placed on GRS #1. No If not, explain Body decomposed
(yes-no)

Has tooth chart been prepared? Yes If not explain
(yes-no)

Remarks: Body badly decomposed and charred found broken jaw bones with teeth

Cleon E. Wells.
(Signature of Investigating Officer)
CLEON E. WELLS 1st Lt. QMC
603rd QM Gr. Reg. Co.

Page 1

Declassified in accordance with D.O. 13

Item	Clothing Markings	Sizes	Color	Indicate unusual markings, wear, tear, repairs, etc.
*Headgear (type)				
Raincoat				
Overcoat				
Jacket, Field				
Jacket, Combat				
Mackinaw				
Sweater				
Jacket, HBT				
*Shirt, Wool OD	******** Gabardine		Pink	10" of Rt. sleeve found
Undershirt, Wool				
Undershirt, Cotton				
Trousers, HBT				
*Trousers, Wool OD				
Belt, Web				
Drawers, Wool				
Drawers, Cotton				
Leggings				(note unusual lacing)
Socks Wool / Cotton				
*Shoes (type)				
Overshoes				
Web Equipment (type)				
(Other Item)				
(Other Item)				

*If body is nude, sizes of those items should be computed by measuring the remains.

Chevrons or Insignia (type & location; shirt, jacket, coat, helmet) Unknown

Shoulder Patch Unknown

Description of Remains:

Age Unk Height Unk Weight Unk Description of wounds

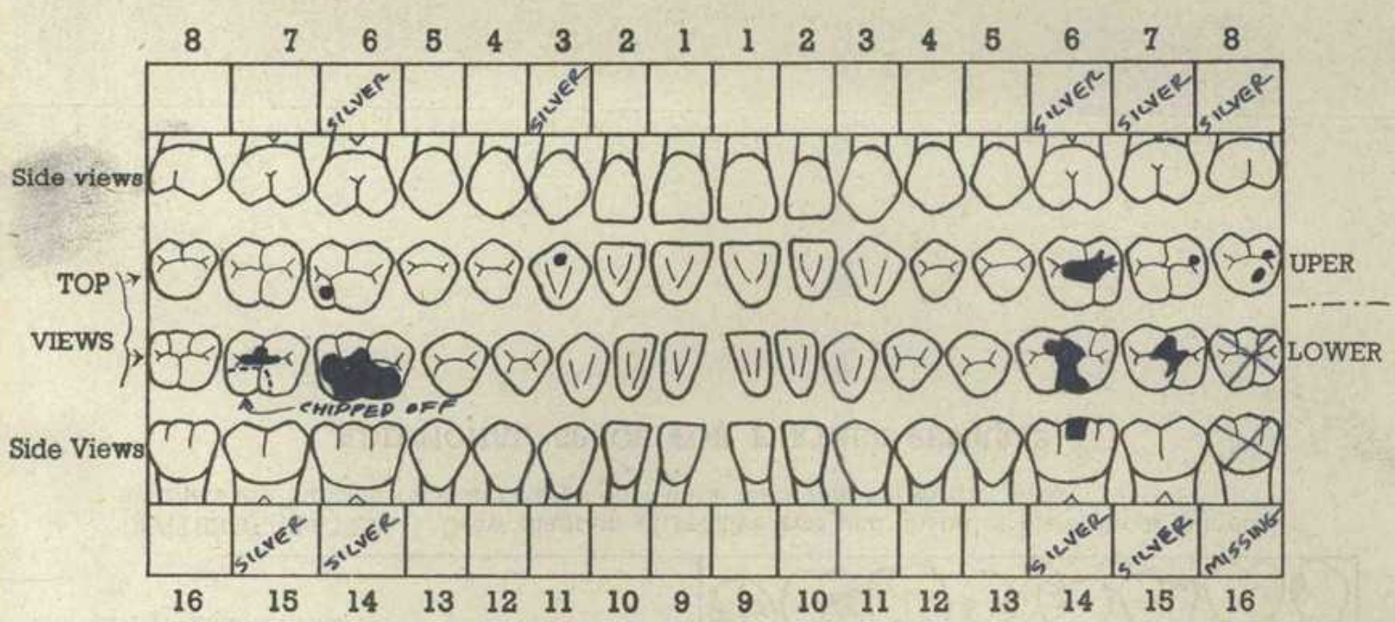
Declassified in accordance with D.O. 13

G. R.& E. DIV.
OFFICE OF THE CHIEF QUARTERMASTER
HQ. COM. ZONE, ETOUSA

TOOTH CHART

Aug 10 1945
Date

Unknown E-185				
Last Name	First	Initial	Rank	Serial No.
Unknown				
Unit			Organization	
Vic Fluren, Germany	24 March 1945		KIA	
Place of Death	Date of Death		Cause of Death	



This dental chart is very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions : Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found. See reverse side for illustrations.

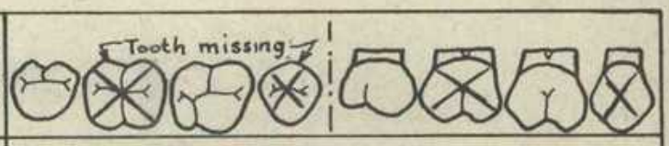
Cleon E. Wells.
Signature of Officer or other person who prepared Tooth chart

CLEON E. WELLS 1st Lt. QMC
603rd QM Gr. Reg. Co.
Verfield by G. R. S. Officer

GRAVES REGISTRATION
FORM N° 1-A

Declassified in accordance with D.O. 13

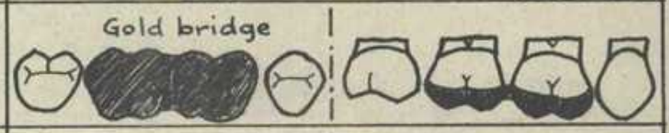
MISSING TEETH... All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be "X" 'd out and labeled, thus :



CROWNED TEETH... Block in solid the crown of tooth (label gold, porcelain, Silver or gold and porcelain), thus :



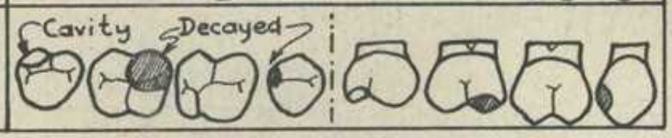
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FILLINGS.. Draw filling on tooth as accurately as possible (block in and label gold, silver, cement), thus :



CARIES (CAVITIES). Outline location and size of cavity, shade in thus :



DENTURES (PLATES)... Draw diagram of relative size and shape of plate, block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp."

ADDITIONAL SPACE FOR FURTHER REMARKS

SIP. 4-45/50M/77822

Declassified in accordance with D.O. 13

FILE UNDER NO. 293 - FORT, PAUL IRWIN (O-784780)

I N D E X S H E E T

SYNOPSIS

TELETYPE

2/25/46

FROM: OQMG.,
TO: WORLD WAR II, RECORDS ADMINISTRATION CENTER AGO, ST. LOUIS, MO.

REQUEST RELIGIOUS PREFERENCE ON FOL:

1. ELVES D. DALE 36368922 .....
2. GEORGE J. BENEDICT 37495642 .....

ADTT

END SPQYG 66 (ROSENGARD)

DOCUMENT FILED UNDER NO. 293 - ST. LOUIS

cad.

Declassified in accordance with D.O. 13

HEADQUARTERS, ARMY SERVICE FORCES

MEMO ROUTING SLIP

TO THE FOLLOWING IN ORDER INDICATED:

	NAME OR TITLE ORGANIZATION BUILDING AND ROOM	INITIALS / DATE
1	EFFECTS QUARTERMASTER ARMY EFFECTS BUREAU	
2	KANSAS CITY 1, MISSOURI 293 Fort Paul 2.	
3	1-784,870	

For necessary action.

~~PIERCE~~ PHENN

Orig. fwd. to K. C. by this office, GTB

2 Incls.
1. Ltr dated 19 Dec. '45
2. Ltr dated 1 Dec. '45

GRAVES REGISTRATION SECTION
MEMORIAL DIV
DEC 21 1945

FROM: NAME ORGANIZATION BUILDING AND ROOM	DATE 12-20-45
MEMORIAL DIVISION, PLANNING & REGISTRATION BRANCH, TEMPO "C" WASHINGTON 25, D. C.	TELEPHONE

W. D., A. G. O. Form 0115
1 October 1944

This Form supersedes W. D., A. G. O. Form 0115, 23 March 1944, which may be used until existing stocks are exhausted.

25-37607-6250

Declassified in accordance with D.O. 13

SPQYG 293
Fort, Paul I.
S.N. 0 784 870

20 December 1945

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

Mrs. E. F. Darby
2319 Daisy Lane
Fort Worth, Texas

Dear Mrs. Darby:

Your letter to The Quartermaster General, Washington 25, D. C. concerning your brother, the late Second Lieutenant Paul I. Fort, has been referred to this office.

It is regretted to advise you that, up to the present time, information pertaining to the burial of the remains of your brother has not been received in this office. An inquiry is being made to ascertain information regarding the remains of all our deceased military personnel where burial information has not been received. Upon completion of this inquiry you will be advised as to the results.

In view of the fact that the Army Effects Bureau, Kansas City Quartermaster Depot, 601 Hardesty Avenue, Kansas City 1, Missouri, has been designated to receive and ship personal effects of deceased military personnel overseas, a copy of your letter has been forwarded to that office for direct reply to eliminate duplication of effort.

Please accept my sincere sympathy in the loss of your brother.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

JAMES L. PRENN
Major, QMC
Assistant

eas

DEC 21 11 05 AM '45 O.M.G. MAIL & RECORDS BRANCH

MEMORIAL DIVISION DEC 21 10 19 AM DEC 21 8 42 AM '45 GRAVES REGISTRATION SECTION

Declassified in accordance with D.O. 13

MEMORIAL DIVISION DEC 21 10 19 AM

RECEIVED DEC 21 10 19 AM

JAMES L. [illegible]
Major, QMC
Assistant

dea

Declassified in accordance with D.O. 13

December 1, 1945

Quartermaster General,
Washington 25, D. C.

Dear Sir:

I have been advised to contact you regarding burial and personel effects of my brother, the late

293 - Second Lieutenant Paul I. Fort O-784870
88 T. C. Sqdn. - 438 T. C. Grp. - A.P.O. 133
c/o Postmaster New York, New York

(Son of Mr. and Mrs. T. I. Fort
4933 Lindsley Avenue
Dallas, Texas)

My parents received word that he was missing over Wesel, Germany on March 24, 1945. Last month, they were informed that he had been killed in Germany on that date. They have received no further details from the War Department concerning his death, burial or personel belongings.

If you could tell us whether his grave has been located and see that his personel belongings are sent to his mother, we would be grateful.

Thanking you in advance , I am,

Mrs. E. F. Darby
2319 Daisy Lane
Fort Worth, Texas

Declassified in accordance with D.O. 13

DEC 6 3 07 PM '45
MEMORIAL DIVISION
DEC 6 3 34 PM '45
GRAVES REGISTRATION SECTION
MEMORIAL DIVISION

Declassified in accordance with D.O. 13

Grave Registration Form No. 1 (Revised 1 Sept. 1943)

Corrected Copy

REPORT OF BURIAL

TM 10-630 AND AR 30-1615

1 April 1945
Date

293 Fort, Paul Irwin

Unknown (X-185) FORT, Paul Irwin
Last Name — First — Initial

2nd Lt. - Unknown
Rank

(Knl ASN 18126473) - Unknown- O 784 780
Serial No.

~~Unknown~~ 88 TRP CAR. SQ
Unit

~~Unknown~~ AC 438 TRP CAR GP
Organization

Vic Fluren, Germany
Place of Death

24 March 1945
Date of Death

KIA
Cause of Death

1600 1 April 1945
Time and Date of Burial

U.S. Military Cemetery Margraten, Holland VK645482
Name of Cemetery — Name or Coordinates of Location

279
Grave Number

12
Row Number

Y
Plot Number

Cross
Type of Marker

Disposition of Identification Tags: Buried with body Yes ☐ No ☒ Attached to Marker Yes ☐ No ☒ Grs Tag

If No Identification Tags
How were remains identified?

** Identified 6 Dec. 1945 by fingerprints subm. FBI thru AGO by OQMG, Wash. D. C.

What means of identification were buried with the body?

Grs Tag
Form #1

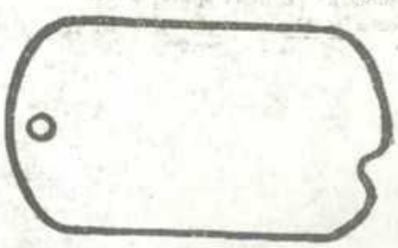
AFM

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

Who is buried on:

	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Right:	WILKIE	O-1114343			278
Deceased's Left:	HUNTLEY	34482753			280

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 Mr. T. I. Fort, Father,
Name

4933 Lindsley Avenue, Dallas, Texas
Address

Religion ~~Unknown~~ Protestant

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

None

Cleon E. Wells.
Signature of Officer or other person reporting burial

CLEON E. WELLS 1st Lt. QMC
603rd QM Gr. Reg. Co.
Verified by G.R.S. Officer

Encl 1

1 apr 46

Declassified in accordance with D.O. 13

18A

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.





Left Hand — Right Hand

Fingers — Thumb

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

Identified as
Paul Heim Fort
S# 18,126,473
(F.B.I.)

TOOTH CHART

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

Indicate: missing natural teeth by X; crowns by ○; fillings by □; Bridges by ○ linking anchor teeth; replacements by artificial teeth X

Characteristics:

Other Data:

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.

Hans Wardett
6 Dec 1945



AG P BR HC 505 /22560

Declassified in accordance with D.O. 13

Corrected Copy

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

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

1 April 1945
Date

Last Name	First	Initial	Rank	Serial No.
~~Unknown~~ (X-185)	FORT,	Paul Irwin	~~Unknown~~ 2nd Lt.	~~Unknown~~ (Enl ASN 18126473) ~~Unknown~~ O 784 670

Unit	Organization
~~Unknown~~ 88 T.C. S.Q.	~~Unknown~~ 88-TC S.Q.

Place of Death	Date of Death	Cause of Death
Vic Fluren, Germany	24 March 1945	KIA

Time and Date of Burial	Name of Cemetery	Name or Coordinates of Location
1600 1 April 1945	U.S. Military Cemetery Margraten, Holland VK645482	

Grave Number	Row Number	Plot Number	Type of Marker
279	12	Y	Cross

Disposition of Identification Tags: Buried with body Yes ☐ No ☒ Attached to Marker Yes ☐ No ☒ Grs Tag

If No Identification Tags
How were remains identified?

** Identified 6 Dec.1945 by fingerprints subm. FBI thru AGO by OQMG, Wash. D. C.

AFM

What means of identification were buried with the body?

Grs Tag
Form #1

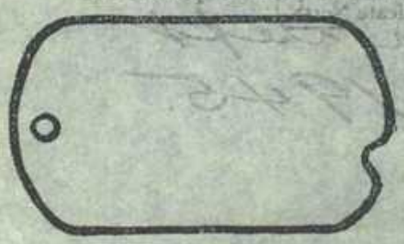
IDENTIFICATION ACCEPTED
Initial

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

Who is buried on:

	Name	Serial No.	Rank	Organization	Grave No.
Deceased's Right:	WILKIE	0-1114343			278
Deceased's Left:	HUNTLEY	34482753			280

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: Mr. T. I. Fort, Father,
Name

4933 Lindsley Avenue, Dallas, Texas
Address

Religion: ~~Unknown~~ Protestant

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

None

Cleon E. Wells
Signature of Officer or other person reporting burial

CLEON E. WELLS 1st Lt. QMC
603rd QM Gr. Reg. Co.
Verified by G.R.S. Officer

3/15/46

Index 1

Declassified in accordance with D.O. 13

18A

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: 5'3"
Weight:
Color of Eyes:
Color of Hair:
Race:

Laundry Marks:
Number of Rifle:
Wear Glasses?
Is Tooth Chart Attached?

(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.



Left Hand

Right Hand

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

Identified as
Paul Thurn Fort
S# 18,126,473
(FBI)

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.

Navy War Dept
6 Dec 1945.

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 O; fillings by □; Bridges by O linking anchor teeth; replacements by artificial teeth X

Characteristics:

Other Data:

AG P BR HQ SOS /22560

Declassified in accordance with D.O. 13



Declassified in accordance with D.O. 13

(Registration No. 1 of 3 Sept. 1943)

REPORT OF BURIAL

TM 10-630 AND AR 33-1815

1 April 1945
Date

FORT, Paul Irwin - UNKNOWN (X-185) (MARGRATEN) — 2nd Lt. — (Enl ASN 18126473) UNKNOWN - 0 784 780
Last Name — First — Initial — Rank — Serial No.

UNKNOWN — A C
Unit — Organization

Vic. Fluren, Germany — 24 March 1945 — KIA
Place of Death — Date of Death — Cause of Death

1500 1 April 1945 U.S. Mil.Cem., Margraten, Holland — VK 645482
Time and Date of Burial — Name of Cemetery — Name or Coordinates of Location

279 — 12 — X — Wooden 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?

RESTRICTED

** Identified 6 Dec.1945 by fingerprints subm FBI thru AGO by COMC, Wash., D. C.

AEM

What means of identification were buried with the body?

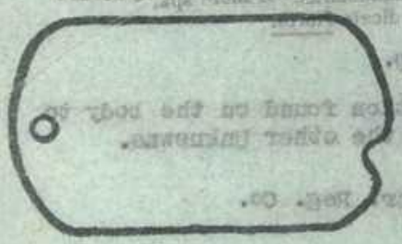
GRS Form # 1 and Embossed Plate.

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

Who is buried on: Allen, Willie M. — O-1114342 — 1st. Lt. — Engr. — 278
Deceased's Right: Name — Serial No. — Rank — Organization — Grave No.

Deceased's Left: Huntley, Robert — 34482753 — Sgt. — Engr. — 280
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:

Mr. T. I. Fort, Father, - Unknown -
Emergency Addressee — Name

4933 Lindsley Avenue, Dallas, Texas
Address

Religion Unknown Protestant

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

NONE.

RESTRICTED

Edwin J. Donovan
Signature of Officer or other person reporting burial

EDWIN J. DONOVAN
1st. Lt., QMC GRS Officer
611 QM Gr. Reg. Co.
Unit Certified by G.R.S. Officer

2 MAY 1946

WR 135.28

Declassified in accordance with D.O. 13

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: UNK
Weight: UNK
Color of Eyes: UNK
Color of Hair: UNK
Race:

Laundry Marks:
Number of Rifle: UNK
Wear Glasses? UNK
Is Tooth Chart Attached? NO

(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.

Body too badly charred to obtain physical characteristics, tooth chart or finger prints.

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

Body was removed from the wreckage of a C-47, carrier plane, which crashed on or about 24 March 1945, near Fluren, Germany. Plane Number Y-224102. Also removed from the wreckage were five other unidentified bodies, Numbers X-166; X-178; X-181; X-179; X-182 and six identified bodies. These identified are as follows: Bowden, Clyde L. - 36884111; Bruno, Arcangeli - 33610997; Green, Marion C. - 34601180; King, James E. - 35612546; Brooks, Leonard R. - 13069286; Villalobos, Fabian - 39233208. It is believed that these were members of the 438th Grp.

Left Hand: 1 2 3 4 5
Right Hand: 1 2 3 4 5
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.

There was no information found on the body to distinguish this body from the other Unknowns.

Evacuated by 605 QM Gr. Reg. Co.

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

Indicate: missing natural teeth by X; crowns by O; fillings by □; Bridges by ⊃ linking anchor teeth; replacements by artificial teeth: X

Characteristics:

Other Data:

AG P 8R NO 505 /22560

Declassified in accordance with D.O. 13

CASUALTY BRANCH
PROCESSING AND VERIFICATION SECTION

Name Fort, Paul L. (Enl ASN 16126473) Serial No. 0784780

Grade 2/Lt

Organization AC

OFFICIAL REPORTS: (IMPORTANT—Unofficial reports or information will not be shown below. This information will be indicated—"Code X.")

Type of Casualty	Date and Area	Classification and Message No.	Battle	Nonbattle	Date E. A. Notified
KIA	24 Mar 45 ETO Germany	AG 704 (24 Sept 45) 2730803-HQ2	✓		4 Oct 45

E. A. Mr. T. D. Fort, father
11933 Lindsley Ave., Dallas, Texas

Remarks:

Rel Ref may be secured Demobilized Personnel Records Br. AGO

No casualty reported ____

Is there a Casualty Branch file? No ____ Yes ____

Form No. 43? No ____ Yes ____

Clerk furnishing report Williams

Date of report 7 Dec 45 Room No. 460 Group No. ____

VISI-CARD AND RECORD REPORT

WD AGO FORM 22 DEC 1943 035

25-00526-6GS

Declassified in accordance with D.O. 13



Declassified in accordance with D.O. 13

SENSITIVE SURFACE - HANDLE EDGES ONLY

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE
WASHINGTON 25, D. C.

REPORT OF DEATH plm/3613

DATE 16 October 1945

FULL NAME	ARMY SERIAL NUMBER	GRADE
Fort, Paul I.	0781870	2nd Lt.
HOME ADDRESS	**ARM OR SERVICE**	**DATE OF BIRTH**
Dallas, Texas	A. C.	6 Dec 1921
PLACE OF DEATH	**CAUSE OF DEATH**	**DATE OF DEATH**
European Area	Killed in action	24 March 1945
STATION OF DECEASED	**DATE OF ENTRY ON CURRENT ACTIVE SERVICE**	**LENGTH OF SERVICE FOR PAY PURPOSES** (YEARS / MONTHS / DAYS)
European Area	4 August 1944	

EMERGENCY ADDRESSEE (Name, relationship, and address)

Mrs. Anna Fort, mother, 4933 Lindsley Avenue, Dallas, Texas

BENEFICIARY (Name, relationship, and address)

Mrs. Anna Fort, mother, 4933 Lindsley Avenue, Dallas, Texas
Mr. Tandy Fort, father, 4933 Lindsley Avenue, Dallas, Texas

INVESTIGATION MADE		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (Specify below)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
										X			

ADDITIONAL DATA AND/OR STATEMENT

[X] BATTLE [ ] NON-BATTLE

The individual named in this report of death is held by the War Department to have been held in a missing in action status from 24 March 1945 until such absence was terminated on 4 October 1945 when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a Commander in the European Area.

BY ORDER OF THE SECRETARY OF WAR

James A. Ulio

ADJUTANT GENERAL

11-23-45

WD AGO FORM 1 JUN 1945 52-1 EDITION OF 1 FEBRUARY 1945 MAY BE USED.

Declassified in accordance with D.O. 13

Declassified in accordance with D.O. 13

SENSITIVE SURFACE - HANDLE EYES ONLY

#69.236

WAR DEPARTMENT

THE ADJUTANT GENERAL'S OFFICE
WASHINGTON 25, D. C.

REPORT OF DEATH plm/3613

DATE 16 October 1945

FULL NAME	ARMY SERIAL NUMBER	GRADE
Fort, Paul I.	0784870	2nd Lt.
HOME ADDRESS	**ARM OR SERVICE**	**DATE OF BIRTH**
Dallas, Texas	A. C.	8 Dec 1921
PLACE OF DEATH / **CAUSE OF DEATH**		**DATE OF DEATH**
European Area / Killed in action		24 March 1945
STATION OF DECEASED	**DATE OF ENTRY ON CURRENT ACTIVE SERVICE**	**LENGTH OF SERVICE FOR PAY PURPOSES** (YEARS, MONTHS, DAYS)
European Area	4 August 1944	

EMERGENCY ADDRESSEE (*Name, relationship, and address*)

Mrs. Anna Fort, mother, 4933 Lindsley Avenue, Dallas, Texas

BENEFICIARY (*Name, relationship, and address*)

Mrs. Anna Fort, mother, 4933 Lindsley Avenue, Dallas, Texas
Mr. Tandy Fort, father, 4933 Lindsley Avenue, Dallas, Texas

INVESTIGATION MADE		IN LINE OF DUTY		OWN MISCONDUCT		WAS DECEASED ON DUTY STATUS		AUTHORIZED ABSENCE		IN FLYING PAY STATUS		OTHER PAY STATUS (*Specify below*)	
YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
										X			

ADDITIONAL DATA AND/OR STATEMENT

[X] BATTLE [ ] NON-BATTLE

The individual named in this report of death is held by the War Department to have been held in a missing in action status from 24 March 1945 until such absence was terminated on 4 October 1945 when evidence considered sufficient to establish the fact of death was received by the Secretary of War from a Commander in the European Area.

BY ORDER OF THE SECRETARY OF WAR

James A. Ulio

ADJUTANT GENERAL

WD AGO FORM 52-1
1 JUN 1945

EDITION OF 1 FEBRUARY 1945 MAY BE USED.

Declassified in accordance with D.O. 13

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE
WASHINGTON 25, D. C.

6 APR 45 466236

—BATTLE CASUALTY REPORT

AG 201

NAME: FORT PAUL I
ASN 0784870
GRADE: 2/LT
SON

DATE CAS. REPORT RECEIVED: 08

NAME AND ADDRESS OF E. A.:
T I FORT
4933 LINDSLEY AVE
DALLAS TEXAS

DATE TELEGRAM SENT: 6 APRIL 1945

THE INDIVIDUAL NAMED BELOW DESIGNATED THE ABOVE PERSON AS THE ONE TO BE NOTIFIED IN CASE OF EMERGENCY, AND THE OFFICIAL TELEGRAPHIC AND LETTER NOTIFICATIONS WILL BE SENT TO THIS PERSON. THE RELATIONSHIP, IF ANY, IS SHOWN BELOW. IT SHOULD BE NOTED THAT THIS PERSON IS NOT NECESSARILY THE NEXT-OF-KIN OR RELATIVE DESIGNATED TO BE PAID SIX MONTHS' PAY GRATUITY IN CASE OF DEATH

RELATIONSHIP: SON

GRADE	NAME	SERIAL NUMBER	ARM OR SERVICE	REPORTING THEATRE	F OR J STATUS	SHIPMENT NUMBER
2 LT	FORT PAUL IRWIN	O-784870	AC	ETO	A	093

HAS BEEN	TYPE OF CASUALTY	PLACE OF CASUALTY	DATE OF CASUALTY DAY	MONTH	YEAR	CASUALTY CODE
	MISSING IN ACTION	IN GERMANY SINCE	24	MAR	45	9

IF FURTHER DETAILS OR OTHER INFORMATION ARE RECEIVED YOU WILL BE PROMPTLY NOTIFIED

REMARKS: ☐ CORRECTED COPY DMM

ACTION BY PROCESSING AND VERIFICATION SECTION: REPORT VERIFIED ✓ FORM 43 ✓ AG 201 REQ.
CASUALTY BRANCH FILE ATTACHED ____ OR CHARGED TO ____ DATE ____
PREVIOUSLY REPORTED NO ✓ YES ____ (AS INDICATED BELOW):

FILE NO.	MESSAGE NO.	TYPE	DATE AND AREA	E. A. NOTIFIED

FORWARDED TO → ☐ SPEC. IDEN. ☑ TELEGRAM ☐ WOUNDED ☐ LETTER ☐ CORR. ☐ S. H. & ☐ CERTIF. ☐ M. & M. ☐ NON-DEL.

REPORT NOT VERIFIED ____ NO FORM 43 ____ NO CAS. BR. FILE ✓ CHECKED BY Derrick 6 Apr 45 POSTED BY Fowler Ward

DISTRIBUTION "A" ☐ 34 COPIES
(ALL TYPES OF CASUALTIES PERTAINING TO MILITARY PERSONNEL, EXCEPT WOUNDED.)
COPIES FURNISHED: SEE CASUALTY BRANCH MEMORANDUM NO. 48, 1944.

DISTRIBUTION "B" ☐ ____ COPIES
(ALL WOUNDED MILITARY PERSONNEL AND ALL TYPES OF CASUALTIES PERTAINING TO CIVILIANS WHO ARE W. D. EMPLOYEES, EMPLOYEES OF W. D. CONTRACTORS AND OTHERS SUBJECT TO MILITARY LAW.)
COPIES FURNISHED: SEE CASUALTY BRANCH MEMORANDUM NO. 48, 1944.

W.D. A.G.O. Form 0365 1 JANUARY 1945 — This form supersedes W.D. A.G.O. Form 0365, 16 June 1944, and W.D. A.G.O. Forms 802-1, 802-2, 802-4, of 1 February 1944, and 802-5, 802-6, 1 August 1944, which may be used until existing stocks are exhausted.

Declassified in accordance with D.O. 13

ARMY EFFECTS BUREAU
Summary Court-Martial
ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT
601 Hardesty Avenue
Kansas City 1, Missouri

WFH:LD:ljd
Case No. 469236

Date May 7, 1946

SUBJECT: Report of transactions in disposing of the effects of

Paul I. Fort (Name of deceased), 0784870 (Army Serial Number) late a

2nd Lieutenant (Grade), Air Corps (Organization, Army or Service) who died

on the 24 day of March, 1945, at European Area Washington.

TO : The Adjutant General, War Department 25, D.C.

1. Complying with A.W. 112, a Summary Court-Martial, convened at Kansas City, Mo., pursuant to S.O. 228, Hq., KCQM Depot, dated 25 September 1943, for the purpose of disposing of the effects of the above-named soldier, or person subject to military law, reports that:

a. No legal representative or widow of decedent being present at decedents camp or quarters, effects of decedent were forwarded to this Summary Court-Martial.

b. Local debtors owed decedent's estate $ none of which the sum of $ none was collected. (If nothing was found due or collected, state "None"; otherwise attach itemized statement of sums owing and collected.) (Incl. none.)

c. Decedent owed undisputed local creditors the sum of $ none, which has been paid by the Summary Court-Martial from funds of decedent. (See inclosed receipt none, Incl none).

d. Disposition of decedent's effects (less money paid creditors, if any) has been made by the Summary Court-Martial by transmittal through the Quartermaster Corps, at Government expense to person found entitled (See Summary Court-Martial FINDING below).

FINDING

Before a Summary Court-Martial which convened at Kansas City, Missouri, on 1 May 1946, pursuant to Special Orders 228, Headquarters, KCQM Depot, dated 25 September 1943, the application or affidavit of Mr. T. I. Fort for the effects of the above named deceased soldier, or person subject to military law, now in the possession of the United States, with other relevant evidence, was duly considered;

Whereupon, this Summary Court-Martial finds that, under the provisions of A.W. 112,

Mr. Tandy Fort (Name of person found entitled) of

4933 Lindsley Avenue (Number, Street or Avenue), Dallas (City, Town or Village) State of

Texas, is the Father (Relationship or Capacity) of the

above-named decedent and appears to be entitled to receive his or her effects.

(Signature of Summary Court Officer)

W. F. HEHMAN, Major, QMC
(Name, Rank, Organization)
SUMMARY COURT MARTIAL

Eff. QM Form 75

CPCPP-8-18-45-

Declassified in accordance with D.O. 13

AMOUNT OF CHECK	NO DISCREPANCY	INCLOSE VALUABLES	RECIPIENT FROM
	X NAME	SHIP VALUABLES	X CASUALTY REPORT
ACCOUNT NUMBER	SERIAL NUMBER	VALUABLES SHIPPED BY (clerk)	INVENTORY
	RANK		FORM 20
			LETTER

Mr. Tandy Fort
4933 Lindsley Avenue
Dallas, Texas

2/Lt. Paul I. Fort
0784870
469236 D

NO. & TYPE OF CONTAINER	SPECIAL INSTRUCTIONS
ENVELOPE	REMOVE GI
CARTONS	SHIP BLOODSTAINED
PACKAGE	X SHIP DAMAGED
1 ~~FOOT LOCKER~~ trunk	REMOVE BL'OSTAINED
	REMOVE DAMAGED
	FILMS REMOVED
	DIARY REMOVED

DSJ:LD:ijd

SUMMARY COURT DATA

DATE OF FINDING	APPLICANT	DATE ACTION TAKEN	MAIL REVIEWER (initials)
1 May 46	T. I. Fort	5/7/	bm

REMARKS

SHIPPED	ROUTING
FRANKED	ACCOUNTING BRANCH
EXPRESS	1 WAREHOUSE
FREIGHT	2 FILE

DATE SHIPPED MAY 17 1946

SHIPPING CLERK TCR

ORDER FOR ACTION

EFF OM FORM 14
10 OCT 1945

Declassified in accordance with D.O. 13

W.C. 4690, 2 Ind

	ENTS
X	INBOUND INVENTORY
X	G. R. OR SUB GR LABEL
	WILL OR POWER OF ATTY.
1	TALLY IN FORM 43

EFFECTS INVENTORY
ARMY EFFECTS BUREAU

STATUS	
DECEASED	
MISSING	
P. O. W.	
ABANDONED	
UNKNOWN	

	BAGS, CLOTH OR TRAVEL		BELT		OVERCOATS		
	BELT, MONEY (NO MONEY)		BOOKS, ADDRESS		PAPERS, PERSONAL		
	BILLFOLD (NO MONEY)		BOOKS, PILOT LOG		PENCIL, MECHANICAL		
	BOOKS		BRUSHES		PEN, FOUNTAIN		
	BRACELET, IDENT.		CASE		PHOTOS		
	CAMERAS		CLOTH, WASH		PIPES		
X	CLOTHING ✓		COATS		RINGS		
X	MISC. ARTICLES ✓		FOOTLOCKER		SCARFS		
	RELIGIOUS ARTICLES		FOOTWEAR, PR.		SHIRTS		
	RIBBONS, DECORATION		GLASSES		SOCKS, PR.		
	SHORT SNORTER		GLOVES, PR.		STATIONERY		
	SOUVENIR MONEY		HANDKERCHIEFS		TIES		
	SOUVENIRS		HEADWEAR		TOBACCO		
	TESTAMENTS		JACKETS		TOILET ARTICLES		
	TOWELS & WASHCLOTHS		KITS		TOWELS		
	U. S. MONEY (AMOUNT)		KNIVES		TROUSERS, PR.		
	WATCH		LETTERS		TRUNKS, PR.		
	WINGS		LIGHTERS		UNDERWEAR		

CONTAINERS ADDRESSED TO

Mr. Tandy, J - Fort
4933 Lindsley Ave -
Dallas. Tex -

INFORMATION

Mr. Tandy - I - Fort. (father)
4933 Lindsley ave.
Dallas Texas -

NAME AND STATUS VARIATIONS

424 inf - Johns Paul. J.
Fort.

CROSS REFERENCE

	CHECK	REC'D BY			BUREAU CHECK
	MONEY ORDER		NUMBER		TRANSMIT ORIGINAL
	BOND		SYMBOL		ORIG. REG. MAIL
	TRAV. CHECK				TO G. A. O.
	FOREIGN CURRENCY		AMOUNT		MUTILATED
	U. S. CURRENCY				TO ISSUING AGENCY

DATE

BANK OR PLACE OF ISSUE

PAYEE

REMITTER OR DRAWER

TALLY NO.	ORIG. NO. OF PKGS.	EXAMINING DATE	BOX NO.	SHEET ____ OF ____ SHEETS
7140		8 Apr 46		

NAME: PAUL - IRWin - FORT

A. S. N.: 0-784870

ORGANIZATION

RANK: 2/LT

CASE NO.

WAREHOUSE SPACE

EXAMINED BY: Godfrey

PACKED BY: Ford - Reddy

INSPECTED BY

STORED BY

DIARY REMOVED

PHOTO FILM REMOVED

MOTION PICTURE FILM REMOVED

PACKAGE DESCRIPTION	WEIGHT
#1 Wood Chest	

SHIPPED

DATE	BY WHOM
MAY 17 1946	

FORM 11 (15 JUNE 45) 360M LARUE, K. C. 8-17-45

Declassified in accordance with D.O. 13

ADDITIONAL REMARKS

REMOVALS (other than G. I.)	DAMAGES (List type of damage-extent)
	top & wood chest broke — 1 toilet kit slightly worn at corners — Underwear & Sandkelp faded colored by shoes — yellow stains from moisture — Dark staining on gloves appear to be oil — 1 undershirt oil stained —

SHORTAGES

1 pr. rubbers — 2 pr. boots — 2 pr. g.I. shoes —

U. S. GOV'T CHECK SHORT

NUMBER

DATE

SYMBOL 212.693-

AMOUNT $0.65

form 98

I certify that the above items were not in the containers inventoried by me.

Godfrey
INVENTORY CLERK

Nolan
SUPERVISOR

G. I. REMOVED

Declassified in accordance with D.O. 13

FORT, PAUL I		T 4870		
BAY	PALLET	BOX	TALLY	TYPE PKG.
			7140	W C

Declassified in accordance with D.O. 13

RESTRICTED

11 April 1945.
(Date)

SUBJECT: Inventory of Personal Effects of:

Fort (Last Name) Paul (First Name) I. (MI) 2nd Lt (Rank) O-784870 (ASN)

TO: Effects Quartermaster, Communication Zone, APO ~~Personal Effects and Baggage Depot~~, US Army. ~~Depot~~ Q-290, Folembray, France.

The above named individual of 88th Troop Carrier Squadron, 438th Troop Carrier Group (Unit) (Organization) was reported MIA (Status-Killed, MIA, Hospitalized etc.) about 24 March 1945 (Date) 1945. Designated Beneficiary if information accessible

Mr. Tandy I. Fort, 4933 Linsley Avenue, Dallas, Texas.

INVENTORY OF EFFECTS

1 Short Coat
1 pr Pink Trousers
1 pr Green Trousers
1 Blouse
7 Khaki Shirts
1 pr Fatigues
4 pr Khaki Pants
1 pr Brown Gloves
1 pr Gym Shorts
1 OD Cap
1 Khaki Cap
3 Belts
5 Ties
1 Canvas Water Bucket
2 green shirts
1 Shoe Shine Kit
2 Kit toilet articles
8 Handkerchiefs
2 Copies New Testament
1 Picture
13 Handkerchiefs
1 ea AAF Form 5

1 Stamp and Pad
1 Box name cards
1 electric razor & accessories
2 Oil stoves
1 checkerboard
1 box of checkers
1 Mexican knife and sheath
1 box of correspondence
1 pr rubbers
2 prs boots
2 pr GI Shoes
1 pr Low Quarter Shoes
1 box of insignia
1 woolen drawers
2 woolen undershirts
3 bath towels
2 face towels
1 wash cloth
8 cotton drawers
13 cotton undershirts
12 prs socks

Declassified in accordance with D.O. 13

RESTRICTED

Money in the amount of $0.65 has been turned into

H. H. Burkett, Capt, FD, Sym 212-035. Form WDFD 38 enclosed.
(Name of finance officer and symbol number)

None
(Names and addresses of any Banks in which accounts may be carrier)

I certify that the above items constitute all of the effects, secured by me, of the above named individual and that they were forwarded to the Effects Depot by Truck on 16 April 1945.
(Rail, Truck, etc.)

Name George W. Schult
GEORGE W. SCHULT
Rank & ASN 1st Lt, O-1557081

Organization 88th Troop Carrier Squadron.

Any additional pertinent information:

Declassified in accordance with D.O. 13

469236 W

F-4870E

367038

LAUNDRY INVENTORY
ARMY EFFECTS BUREAU

F-4870E

K.A.

	DRY CLEANING	Do not use			LAUNDRY	Do not use	
1	TROUSERS, WOOL ✓ 24	1			SHIRTS, WOOL		
	COAT, SERVICE, WOOL				TROUSERS, COTTON		
	OVERCOAT, LONG				TIE, COTTON		
	OVERCOAT, SHORT, WOOL			*3	UNDERSHIRTS, COTTON ✓ 12		3
	CAP, GARRISON			1	SHIRTS, DRESS, COTTON ✓ 12		1
	CAP, SERVICE			*3	DRAWERS, COTTON ✓ 12		3
	TIES, WOOL				SWEATSHIRTS, COTTON OR WOOL		
	GLOVES, LEATHER OR WOOL				DRAWERS, WOOL		
	SCARFS, SILK, RAYON, OR WOOL			1	SOCKS, COTTON, PR. ✓ 04		1
	SWEATERS				SOCKS, WOOL, PR.		
	TRUNKS, SWIM				PAJAMA TOPS		
	LEGGINGS				PAJAMA BOTTOMS		
	BATHROBES			1	FATIGUES, 1 PC., COTTON ✓ 20		1
	BED ROLL				FATIGUES, TOPS, COTTON		
	COMFORTER				FATIGUES, TROUSERS, COTTON		
					FATIGUES, CAP		
					BELT, COTTON		
				*2	TOWEL, HAND ✓ 06		2
				2	TOWEL, BATH ✓ 08		2
*	all drws stained			1	CLOTH, WASH ✓ 02		1
1	undershirt stained				GLOVES, COTTON		
					JACKET, FIELD		
					SUPPORTERS, ATHLETIC		
	LAUNDRY RETURNED TO F.L.			*13	HANDKERCHIEFS ✓ 26		13
	16 Apr 46				SCARFS, COTTON		
*3	undrwt stained				CASE, PILLOW		
					TRUNKS, GYM		
*1	hand towel stained				SHEETS, COTTON		
					BAGS, BARRACKS		
	34				102		

TALLY NO.	ORIG. NO. OF PKGS.	EXAMINING DATE	BOX NO.	SHEET ___ OF ___ SHEETS
7140 ✓		8 Apr. 46 ✓		

NAME PAUL-IRWIN-FORT ✓ A. S. N. 0-784870 ✓

ORGANIZATION | RANK 2/LT ✓ | CASE NO.

WAREHOUSE SPACE 1240 X

EXAMINED BY Godfrey

LISTED BY Roks

CHECKED BY M. Donnelly

CHECKED AND PACKED BY Donnelly

SUPERVISOR'S OK

LAUNDRY REMOVED FROM FOOTLOCKER

SHIPPED

PACKAGE DESCRIPTION	WEIGHT
4-15-46	85

DATE MAY 17 1946 | BY WHOM FER

CMC

Declassified in accordance with D.O. 13

F-48706

F-48706

F

1870

Declassified in accordance with D.O. 13

STANDARD FORM NO. 1103a
FORM APPROVED BY COMPTROLLER GENERAL U. S. 1945

U. S. GOVERNMENT BILL OF LADING
MEMORANDUM

MIB

NO. WV-9949073

CAR INITIALS AND NO.

NAME OF INITIAL TRANSPORTATION COMPANY: BREEDING MOTOR FREIGHT LINES

TRAFFIC CONTROL NOS.

STOP THIS CAR AT FOR

RECEIVED BY THE TRANSPORTATION COMPANY NAMED ABOVE, SUBJECT TO CONDITIONS NAMED ON THE REVERSE HEREOF, THE PUBLIC PROPERTY HEREINAFTER DESCRIBED, IN APPARENT GOOD ORDER AND CONDITION (CONTENTS AND VALUE UNKNOWN), TO BE FORWARDED TO DESTINATION BY THE SAID COMPANY AND CONNECTING LINES, THERE TO BE DELIVERED IN LIKE GOOD ORDER AND CONDITION TO SAID CONSIGNEE.

†SIZE CAR IN FT. & INS. ORDERED	†SIZE CAR IN FT. & INS. FURNISHED	†MARKED CAPACITY OF CAR ORDERED	†MARKED CAPACITY OF CAR FURNISHED	†DATE CAR FURNISHED	DATE B/L ISSUED
					13 MAY 1946

FROM (SHIPPING POINT): KANSAS CITY, MISSOURI

FROM (FULL NAME OF SHIPPER): ARMY EFFECTS BUREAU, KANSAS CITY QM DEPOT

MARKS

CONSIGNEE

MR. TANDY FORT
4933 LINDSLEY AVENUE

DESTINATION: DALLAS, TEXAS

VIA (ROUTE JOURNEY ONLY WHEN SOME SUBSTANTIAL INTEREST OF THE GOVERNMENT IS SUBSERVED THEREBY)
BREEDING MOTOR FREIGHT LINES

CARRIER'S DELIVERY SERVICE REQUESTED

PICK-UP SERVICE AT ORIGIN WAS NOT (Insert "WAS" or "WAS NOT") BY THE GOVERNMENT OR ITS AGENT

INITIALS OF SHIPPER'S AUTHORIZED AGENT OR EMPLOYEE

CHARGES TO BE BILLED TO (DEPARTMENT OR ESTABLISHMENT AND BUREAU OR SERVICE AND LOCATION)
Finance Officer, U. S. Army, Washington, D. C.

APPROPRIATION CHARGEABLE: 609-935 P 470-03 A 215/62409 S 99-999

ISSUING OFFICE: KANSAS CITY QM DEPOT, K.C., MO.

NAME AND TITLE OF ISSUING OFFICER: M.F. CISTON, CWO, USA, ACTG. T.O. Transportation Officer

I FURNISH THIS INFORMATION IN CASE OF CARLOAD SHIPMENTS ONLY.
*SHOW ALSO CUBIC MEASUREMENTS FOR SHIPMENTS VIA OCEAN CARRIER IN CASES WHERE REQUIRED.

PACKAGES NO.	PACKAGES KIND	DESCRIPTION OF ARTICLES (USE CARRIERS' CLASSIFICATION OR TARIFF DESCRIPTION IF POSSIBLE, OTHERWISE A CLEAR NONTECHNICAL DESCRIPTION)	NUMBERS ON PACKAGES	WEIGHTS*
		NON-MILITARY		
1	WOOD CHEST	PERSONAL EFFECTS	469236	85
		RELEASED VALUATION AT LOWEST RATE AUTHORITY FOR SHIPMENT A.W. #112 AND W.D. CIRCULAR #85 16 MARCH 1945		

CERTIFICATE OF ISSUING OFFICER

CONTRACT NO. OR PURCHASE ORDER NO. _____ DATED _____
OR OTHER AUTHORITY FOR SHIPMENT

F. O. B. POINT NAMED IN CONTRACT _____

SIGNATURE OF ISSUING OFFICER: FOR A.T.O.

NAME OF TRANSPORTATION COMPANY: BREEDING MOTOR FREIGHT LINES

DATE OF RECEIPT OF SHIPMENT

SIGNATURE OF AGENT _____ PER

MEMORANDUM COPY

6

Declassified in accordance with D.O. 13

469236

DSJ:LD:cms
May 9, 1946

Dear Mr. Fort:

The Army Effects Bureau has received some additional property of your son, Lieutenant Paul I. Fort.

These effects are being forwarded to you in one woodchest.

If, for some reason, the property has not reached you at the expiration of thirty days from the date of this letter, please notify me so tracer can be instituted.

The action of this Bureau in transmitting personal effects does not, of itself, vest title in the recipient. Such property is forwarded for distribution according to the laws of the state of decedent's legal residence.

I regret the circumstances prompting this letter, and wish to express my sympathy in the loss of your son.

Yours very truly,

D. S. JOHNSTON
2nd Lt., QMC
Chief, Adm. Div.

Declassified in accordance with D.O. 13

SFQYG 293
Unknown X-185
Holland (Margraten)

27 March 1946

SUBJECT: Identification of Unknown Deceased

TO: Commanding General, American Graves Registration Command
European Theater Area, Versailles, France
APO 887, c/o Postmaster
New York, New York

1. The fingerprints submitted for Unknown X-185, US Military Cemetery, Margraten, Holland, Plot Y, Row 12, Grave 279, have been compared and found identical with those on file for Paul Irwin Fort, 2nd Lt., O-784870, Air Corps. His religious preference was signified as Protestant.

2. His father, Mr. T. I. Fort, 4933 Lindsley Avenue, Dallas, Texas, was indicated as the emergency addressee.

3. It is requested that the records of your headquarters, as well as the marking of the grave, be corrected accordingly, and this office advised upon completion thereof.

4. The burial report submitted to this office has been amended.

FOR THE QUARTERMASTER GENERAL:

M. V. TURNER
Colonel, QMC
Assistant

COPY FOR: Army Effects Bureau, Kansas City Quartermaster Depot,
601 Hardesty Ave., Kansas City 1, Missouri.

For Information.

Cross of made

Declassified in accordance with D.O. 13

HEADQUARTERS, ARMY SERVICE FORCES

MEMO ROUTING SLIP

TO THE FOLLOWING IN ORDER INDICATED:

	NAME OR TITLE / ORGANIZATION / BUILDING AND ROOM	INITIALS / DATE
1	EFFECTS QUARTERMASTER ARMY EFFECTS BUREAU	
2	KANSAS CITY 1, MISSOURI	
3		

For necessary action.

for Begg
PIERCE PRENN

2 Incls.
1. Ltr dated 19 Dec. '45
2. Ltr dated 1 Dec. '45

FROM: NAME / ORGANIZATION / BUILDING AND ROOM	DATE
MEMORIAL DIVISION, PLANNING & REGISTRATION BRANCH, TEMPO "C" WASHINGTON 25, D. C.	12-20-45 TELEPHONE

W. D., A. G. O. Form 0115
1 October 1944

This Form supersedes W. D., A. G. O. Form 0115, 23 March 194[illegible] which may be used until existing stocks are exhausted.

25-37607-6250

Declassified in accordance with D.O. 13

INQUIRY CLERK

469236

SPQYG 293
Fort, Paul I.
S.N. 0 784 870

20 December 1945

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

Mrs. E. F. Darby
2319 Daisy Lane
Fort Worth, Texas

Dear Mrs. Darby:

Your letter to The Quartermaster General, Washington 25, D. C. concerning your brother, the late Second Lieutenant Paul I. Fort, has been referred to this office.

It is regretted to advise you that, up to the present time, information pertaining to the burial of the remains of your brother has not been received in this office. An inquiry is being made to ascertain information regarding the remains of all our deceased military personnel where burial information has not been received. Upon completion of this inquiry you will be advised as to the results.

In view of the fact that the Army Effects Bureau, Kansas City Quartermaster Depot, 601 Hardesty Avenue, Kansas City 1, Missouri, has been designated to receive and ship personal effects of deceased military personnel overseas, a copy of your letter has been forwarded to that office for direct reply to eliminate duplication of effort.

Please accept my sincere sympathy in the loss of your brother.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

JAMES L. PRENN
Major, QMC
Assistant

cas

Encl 1

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Declassified in accordance with D.O. 13

December 1, 1945

Quartermaster General,
Washington 25, D. C.

Dear Sir:

I have been advised to contact you regarding burial and personel effects of my brother, the late

Second Lieutenant Paul I. Fort O-784870
88 T. C. Sqdn. - 438 T. C. Grp. - A.P.O. 133
c/o Postmaster New York, New York

(Son of Mr. and Mrs. T. I. Fort
4933 Lindsley Avenue
Dallas, Texas)

My parents received word that he was missing over Wesel, Germany on March 24, 1945. Last month, they were informed that he had been killed in Germany on that date. They have received no further details from the War Department concerning his death, burial or personel belongings.

If you could tell us whether his grave has been located and see that his personel belongings are sent to his mother, we would be grateful.

Thanking you in advance, I am,

Mrs. E. F. Darby
2319 Daisy Lane
Fort Worth, Texas

Incl 2.

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SHIPMENT CLERK

Dallas Texas
Nov. 18 - 1945.

Kansas City Quartermasters Depot
att: Capt. A. G. Schumacher.

Dear Sir:

Please refer to 469236 which must be your file on 2nd Lt. Paul I Fort O-784870.

We have been advised that his personal effects are being held in your depot. If such is the case, please forward them.

Sincerely
P I Fort
4933 Lindsley Av.
Dallas 10 Texas

12-7

Declassified in accordance with D.O. 13



Declassified in accordance with D.O. 13

469236

RTB:DM:ed
December 11, 1945

Mrs. E. F. Darby
2319 Daisy Lane
Fort Worth, Texas

Dear Mrs. Darby:

This refers to your recent card regarding the personal effects of your brother, Second Lieutenant Paul I. Fort.

No property belonging to Lieutenant Fort has been received here to date, other than the coins forwarded to his father, Mr. T. I. Forty with our letter of October 30, 1945. However, based on information from overseas, this Bureau is expecting to receive some of his effects.

Upon receipt of any property, prompt disposition will be made.

Yours very truly,

HARRY NIEMIEC
2nd Lt., QMC
Chief, Correspondence Branch

Declassified in accordance with D.O. 13

469236

RTB:DM:ed
December 11, 1945

Mr. T. I. Fort
4933 Lindsley Avenue
Dallas 10, Texas

Dear Mr. Fort:

This refers to your recent letter regarding the personal effects of your son, Second Lieutenant Paul I. Fort.

No property belonging to Lieutenant Fort has been received here other than the coins forwarded to you with our letter of October 30, 1945. However, based on information from overseas, this Bureau is expecting to receive some of his effects.

Promptly upon receipt of any property, it will be forwarded promptly.

Yours very truly,

HARRY NIEMIEC
2nd Lt., QMC
Chief, Correspondence Branch

Declassified in accordance with D.O. 13

Mrs. E. F. Darby
2319 Daisy Lane
Fort Worth, Texas

FORT WORTH TEXAS
DEC 1
7:30 PM
1945

THIS SIDE OF CARD IS FOR ADDRESS

Effects Quartermaster
Army Effects Bureau
Kansas City QM Depot
Kansas City, Mo.

ARMY EFFECTS BUREAU KANSAS CITY, MO.
DEC 1 1945

Declassified in accordance with D.O. 13

46923.6.44

INQUIRY CLERK

Dear Sirs:

My brother Lt. Paul I. Fort O-78487
88 T. C. Sqdn. - 438 T. C.
APO 133 New York, N. Y.

Son of Mr. and Mrs. T. I. Fort, 4933 Lindsley Ave, Dallas, Texas - was killed in Wesel, Germany on March 24, 1945. His base was in Rheimes, France. His mother has not received his personel belongings. Would it be possible for you to give us some information regarding where they might be and why she hasn't received them.

Anything that you might do to see that his things are sent to her will be appreciated.

Sincerely,
Mrs. E. F. Darby
2319 Daisy Lane
Fort Worth, Texas

Declassified in accordance with D.O. 13

ARMY SERVICE FORCES
KANSAS CITY QUARTERMASTER DEPOT
ARMY EFFECTS BUREAU
601 Hardesty Avenue
Kansas City 1, Missouri

In Reply Refer To_____

I am inclosing a check for representing funds of your

No other property belonging to him has been received at the Army Effects Bureau to date.

My action in forwarding these funds does not, of itself, vest title in you. The money is transmitted in order that you may safely keep it on behalf of the owner, pending his return. In the event he later is reported as a casualty, the funds should be distributed according to the laws of the state of his legal residence. I sincerely hope that such distribution will not be necessary.

Please acknowledge receipt of the check by signing one copy of this letter in the space provided below and returning that copy to this Bureau. For your convenience, there is inclosed an addressed envelope which needs no postage.

All War Department agencies have instructions to forward the personal effects of military personnel to this Bureau for disposition. Money, as a rule, is converted to a check and sent, by mail, in advance of other property. Any of his property received here will be forwarded promptly. Therefore, I ask that you please notify this Bureau in the event of a change in your address.

Incls--
Check
Envelope

Receipt acknowledged:

_____ _____
(Signature of Bailee) (Date)

Eff. QM Form 201 (8 May 45)

Declassified in accordance with D.O. 13

Declassified in accordance with D.O. 13

Adolph

3 December 1945

MEMORANDUM TO F ILE:

A brother of Lt. Paul I Fort called this Bureau 24 November 1945 to inquire about property belonging to his brother. He stated that he would call Monday for the information as he was just in Kansas City for a short time.

Mr. Fort failed to call Monday, or anytime since that date.

lfh

Declassified in accordance with D.O. 13

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

SHIP TO: Mr. T. I. Fort

Effects of:
Name 2nd Lt. Paul I. Fort

ASN 0-784870

Case No. 469236 - M

Wt.

DATE 30 October 1945
RTB:BH:mrd

FOR: Effects Quartermaster

REMARKS:

____ Inclose Bureau Check
Acct. No.____
Amount____
__X__ Inclose "Valuables" item
____ Ship "Valuables" item(s)

____ Remove G. I.
____ Note discrepancy in____
____ Films removed
____ Diary removed
____ Laundry removed

ROUTING:

__1__ Accounting Branch
____ Warehouse Division
__2__ Files Branch, Adm. Div.

VALUABLES SHIPPED
DATE 10/30/45
BY

REMARKS

Franked
Est. Exp. Chgs.
Est. Frt. Chgs.
No. of package

Shipping Clerk

Eff. QM Form 14 (26 Dec 44)

Declassified in accordance with D.O. 13

ARMY EFFECTS BUREAU
INVENTORY

CASE NO. 469,236

TYPED BY hmc

DATE 7/21/45

STATUS DEC

NAME Paul I. Fort

A.S.N. 0-784870

RANK 2nd Lt

ORGANIZATION -

AMOUNT ACCOUNT NO.

LIST NO. $0.65 LS 8/22/45 Lc

REMARKS F-280

WB 10/23

VALUABLES SHIPPED
DATE 10/30/45
BY

ACCOUNTING INVENTORY

Eff. QM Form 11a (10 Feb 45)

Declassified in accordance with D.O. 13

469236

RTB:BH:mrd
October 30, 1945

Mr. T. I. Fort
4933 Lindsley Avenue
Dallas, Texas

Dear Mr. Fort:

Ordinarily loose coins found in the effects of military personnel in a casualty status are accumulated and converted to a check, to insure safe transmittal to this Bureau from overseas. The check is cashed here, and the proper amount in coins then is sent to the person entitled to receive it in each instance.

Such was the case with sixty-five cents belonging to your son, Second Lieutenant Paul I. Fort. This money is forwarded to you herewith.

I thought we should explain why you are receiving these coins separately from other property of your son.

Sincerely,

Incl--
Coins

A. G. SCHUMACHER
Captain, QMC
Asst. Chief, Adm. Division

Declassified in accordance with D.O. 13