DECLASSIFIED IAW EO 13526

293 ZOELLNER, WILLIAM H. 14 062 835 S/SCT, EUROP.AR, INF., (N.C.)
45 81

DECLASSIFIED IAW EO 13526

IRR

1

USMC MARGRATEN
Plot B Row 16 Grave 10
DATE OF BURIAL 13 Dec 48
VERIFIED BY Maj JA Bailey GRS OFFICER

BURIED ON
RIGHT JOHN T. BOYD
44020598
LEFT STEPHEN BRYCSAK
36374559

DISINTERMENT DIRECTIVE

SECTION A — NAME AND BURIAL LOCATION OF DECEASED

DIRECTIVE NUMBER: 4650 17750

DATE: 15 (DAY) 04 (MONTH) 48 (YEAR)

NAME	SERIAL NUMBER	RANK	ARM	DATE OF DEATH
ZOELLNER WILLIAM H	14062835	S SG	1	DAY MONTH YEAR

CEMETERY		DISPOSITION OF REMAINS
MARGRATEN - AACHEN	1	4601 (CODE) 80 (DIST. PT.)

PLOT	ROW	GRAVE	COUNTRY	CAUSE OF DEATH
XX	1	2	HOLLAND	1

SECTION B — CONSIGNEE AND NEXT OF KIN Ltr sent 16 Dec 48

NAME AND ADDRESS OF CONSIGNEE	NAME AND ADDRESS OF NEXT OF KIN
MARGRATEN, HOLLAND	CARL H. ZOELLNER (FATHER) HIGHLANDS, NORTH CAROLINA

SECTION C — DISINTERMENT AND IDENTIFICATION

NAME	SERIAL NUMBER	RANK	DATE OF DEATH	DATE DISTINTERRED
WILLIAM H. ZOELLNER	14062835	S/SGT		17 SEPTEMBER 48

IDENTIFICATION TAG ON	ORGANIZATION	RELIGION	IDENTIFICATION VERIFIED BY
[X] REMAINS ID [X] MARKER EMB	USAGF	P	WILLIAM J. WOOD CAPT., FA (NAME AND TITLE)

SECTION D — PREPARATION OF REMAINS FOR SHIPMENT

NATURE OF BURIAL	CONDITION OF REMAINS
UNIFORM	ADVANCED STATE OF DECOMPOSITION. REMAINS COMPLETE.

OTHER MEANS OF IDENTIFICATION: NONE

MINOR DISCREPANCIES *1*: NONE

REMAINS PREPARED AND PLACED IN CASKET
DATE 20 SEPTEMBER 1948 BY WILLIAM R. BAILEY, EMBALMER

CASKET SEALED BY	EMBALMER (Signature)
WILLIAM R. BAILEY	Wilbur R. Bailey WILLIAM R. BAILEY

CASKET BOXED AND MARKED	SHIPPING ADDRESS VERIFIED BY
DATE 20/9/48 BY JAMES W. PARKS IDENT. TECH.	ALL TAGS, PLATES, AND MARKINGS VERIFIED BY WILLARD B. OWEN, CAPT., INF.

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

WILLARD B. OWEN, CAPT., INF.
SIGNATURE OF GRS INSPECTOR

NAT
FILE
RECORDS ANNOTATED
DATE MAR 24 1949
NAME
R & R BR.

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

I CERTIFY that the typed names appearing above are the same as the original signatures on the No. 4 copy of F - 1194 concerned.

Raymond E. Johnson
1st Lt Inf

QMC FORM REV 15 MAR 46 1194 HN

NOK LETTER SENT 1 MAR 1949

DECLASSIFIED IAW EO 13526

RECORD OF CUSTODIAL TRANSFER

1. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
2. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
3. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	DATE
4. SHIPPED			
FROM		TO	
KIND OF CONVEYANCE		NAME OF CONVOYER	
SIGNATURE OF SHIPPER	DATE	SIGNATURE OF RECEIVER	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 IAW EO 13526

1 March 1949

S/Sgt. William H. Zoellner, ASN 14 062 835
Plot B, Row 16, Grave 10
Headstone: Cross
Margraten U. S. Military Cemetery

Mr. Carl H. Zoellner

Highlands, North Carolina

Dear Mr. Zoellner:

This is to inform you that the remains of your loved one have been permanently interred, as recorded above, side by side with comrades who also gave their lives for their country. Customary military funeral services were conducted over the grave at the time of burial.

After the Department of the Army has completed all final interments, the cemetery will be transferred, as authorized by the Congress, to the care and supervision of the American Battle Monuments Commission. The Commission also will have the responsibility for permanent construction and beautification of the cemetery, including erection of the permanent headstone. The headstone will be inscribed with the name exactly as recorded above, the rank or rating where appropriate, organization, State, and date of death. Any inquiries relative to the type of headstone or the spelling of the name to be inscribed thereon, should be addressed to the American Battle Monuments Commission, Washington 25, D. C. Your letter should include the full name, rank, serial number, grave location, and name of the cemetery.

While interments are in progress, the cemetery will not be open to visitors. You may rest assured that this final interment was conducted with fitting dignity and solemnity and that the grave-site will be carefully and conscientiously maintained in perpetuity by the United States Government.

Sincerely yours,

THOMAS B. LARKIN
Major General
The Quartermaster General

csb

DECLASSIFIED IAW EO 13526

IDENTIFICATION SECTION
MEMORIAL DIVISION

IDENTIFICATION DATA

LAST NAME - FIRST NAME - MIDDLE INITIAL			ARMY SERIAL NUMBER		GRADE
ZOELLNER, WILLIAM H.			14 062 835		S/Sgt.
HEIGHT	**WEIGHT**	**COLOR EYES**	**COLOR HAIR**	**SHOE SIZE**	**DATE OF DEATH**
5'8½"	151 LB.	Grey	Brown	8E	8 Apr 45

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

Co "B" 48th ARMD INF. BN.

PLACE OF DEATH OR PLACE LAST SEEN IF MIA

Killed in action at Obringhausen, Germany on 8 Apr 45.

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

STATION	DATES
Ft. Bragg, N. C.	Feb 42 - Mar 42
Cp. Polk, La.	Mar 42 - Nov 42
Ft. Benning, Ga.	Nov. 42 - June 44

FROM: [illegible], AGO CLINICAL RECORDS [illegible]
NO RECORDS ON FILE

FRACTURES AND/OR BREAKS	TATTOOS AND/OR BIRTH MARKS

DENTAL CHART 26 Feb 42

8 7 6 5 4 3 2 1 — UPPER RIGHT

1 2 3 4 5 6 7 8 — UPPER LEFT

all here

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.*) D.N.R.

AGRAC FORM 1 Aug 1946 I-380

DECLASSIFIED IAW EO 13526

RECEIVED
10 OCT 1945
CLINICAL
RECORDS BRANCH

DECLASSIFIED IAW EO 13526

Zoellner, William H.
Last Name First Name

To Clinical Records Branch

For disposition

The records show medical treatment as follows:

Hospital	From	To	Register Number
Sta. Hosp. Ft. Benning, Ga.	18 Jan 44	24 Jan 44.	206895

J.N.W. 8 Oct 46 DPRB.
Clerk Date Branch

AGRAC 1-383 1-9-46

DECLASSIFIED IAW EO 13526

BUDGET BUREAU No. 49-R277.

REQUEST FOR DISPOSITION OF REMAINS

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

DATE:

S/Sgt William H. Zoellner, 14 062 835
Plot XX, Row 1, Grave 2,
United States Military Cemetery
Margraten, Holland

5 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, Carl H. Zoellner
(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. Margraten, Holland

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

_____
(NAME AND LOCATION OF CEMETERY)

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

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.)*

coded 4/2 8/48
Gallagher

Ltr
P&O MAY 1948

OQMG FORM 14 NOV 1946 345 MILITARY

16—50411-1

2 APR 1948

DECLASSIFIED IAW EO 13526

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			
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.

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.

Carl H. Zoellner
(SIGNATURE OF NEXT OF KIN)

(NAME PRINTED OR TYPED)

(STREET AND NUMBER)

Highlands Dr. N.C.
(CITY AND STATE)

Subscribed and duly sworn to before me according to law by the above-named applicant this 3 day of Jan, 1948, at city (or town) of Highlands, N. C., county of Macon, and State (or Territory or District) of _____

Frances B. Cook
(SIGNATURE OF OFFICER AUTHORIZED TO ADMINISTER OATHS)

N.P.
(OFFICIAL TITLE)

My Com. Exp. 7/19/48

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

16—50411-1

If you are the next of kin and you desire t

I, THE _____

NAMED IN PART I OF THIS FORM, DO HERE
THE NEXT EXISTING PERSON IN THE ORD

LAST NAME

RELATIONSHIP TO THE DECEASED

NUMBER AND STREET

WHOM I UNDERSTAND SHALL HAVE THE

(SIGNATURE OF NEXT O

(NAME PRINTED OR T

If you are NOT the next of kin authorized

THIS IS TO NOTIFY YOU THAT I AM NOT TH
NAMED ON PAGE 1 OF THIS FORM. THE F
SHOULD BE DIRECTED.

LAST NAME

RELATIONSHIP TO THE DECEASED

NUMBER AND STREET

(SIGNATURE)

(NAME PRINTED OR TYP

16—50410-1

DECLASSIFIED IAW EO 13526

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 IAW EO 13526

ADDITIONAL REMARKS AND INSTRUCTIONS

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

JAN 6 1948
RECEIVED
JAN 6 1948

U. S. GOVERNMENT PRINTING OFFICE

DECLASSIFIED IAW EO 13526

S/Sgt William H. Zoellner, 14 062 835
Plot XX, Row 1, Grave 2,
United States Military Cemetery
Margraten, Holland

5 December 1947

Mr. Carl H. Zoellner

Highlands, North Carolina

Dear Mr. Zoellner:

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

DEC 8 11 18 AM
O.Q.M.G.
MAIL & RECORDS BRANCH

kag

DECLASSIFIED IAW EO 13526

QMGYG 293
Zoellner, William H.
SN 14 062 835

2 October 1946

Address Reply To
THE QUARTERMASTER GENERAL
Attention: Memorial Division

Mr. and Mrs. C. H. Zoellner
Highlands, North Carolina

Dear Mr. and Mrs. Zoellner:

This office promised that upon receipt of burial information concerning your son you would be advised.

The official Report of Burial discloses that the remains of your son were interred in Plot XX, Row 1, Grave 2, in the U. S. Military Cemetery Margraten, Holland, located ten miles west of Aachen, Germany.

The War Department has now been authorized to remove the remains of our honored dead, at Government expense, to the final resting place which next of kin may designate.

When the necessary verification of records has been completed, a letter with an information pamphlet and a "Request for Disposition" form attached will be mailed to you. The "Request for Disposition" form, when properly filled out, will constitute the formal expression of your detailed desires as next of kin. Until you receive these forms, therefore, it will not be necessary for you to communicate with this office regarding this subject, unless you desire to report any change of address. The necessity for complete coordination of movement in many parts of the world makes it impossible, at this time, to estimate when the mentioned forms will be mailed. Every effort, however, will be made to shorten the time between now and the date of mailing and your desires will be acted upon with a minimum of delay.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

THOMAS F. LEWIN
Captain, QMC
Assistant

OCT 3 10 39 AM '46
OQMG
MAIL & RECORDS BRANCH
OCT 7 4 57 PM '46
MEMORIAL DIVISION

DECLASSIFIED IAW EO 13526

SPQYG 293
Zoellner, William H.

1 September 1945

Mr. and Mrs. C. H. Zoellner
Highlands, North Carolina

Dear Mr. and Mrs. Zoellner:

Your letter has been referred to this office for information concerning the location of the grave and the return of the remains of your son, the late Staff Sergeant William H. Zoellner.

It is regretted to have to advise you that, up to the present time, information pertaining to the burial of the remains of your son 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.

A notation has been made on the official records of this office that it is your desire to have the remains of your son returned, if possible, to the United States for final interment.

Now that Japan has been defeated immediate plans are being formulated with a view to returning to the next of kin the remains of their loved ones. This sacred duty will be carried out by the Government at its expense and insofar as practicable in accordance with the expressed wishes of the legal next of kin, who will be notified by this office well in advance of the actual return of the remains. The mission as a whole is world wide in scope and of necessity time consuming, but you may rest assured that this office fully appreciates your desires and will do everything in its power to fulfill them at the earliest possiblw date.

This office regrets, sincerely, the delay in answering your letter and wishes to extend to you and Mrs. Zoellner its deepest sympathy in the loss of your son.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

ARTHUR L. WARREN
Colonel, QMC
Assistant

bcj

SEP 1 1 52 PM '45 O.Q.M.G. MAIL & RECORDS BRANCH

SEP 1 1 12 PM '45 MEMORIAL DIVISION

1802

N.P.

CCP

DECLASSIFIED IAW EO 13526

87

Highlands. N.C.
May 27th 1945.

A.G.J. Gen. Ulio,
Washington, D.C.

Dear Gen. Ulio, Three years and three months ago today my son enlisted in the Service of Our Country. One month after he was reported killed hostilities ceased.

Could we bring our boy home? If so how soon? We know how very much he wanted to come home and how much we wanted him home. So now We'd like for his bones to rest with ours in our own Native Land. Please if possible let us know about this as soon as you can - or turn this letter over to the proper one to do this for us please. If it is impossible to bring him home try to find out for us where he is buried. He was in Belgium when last we heard from him in Feb. Thank you.

Sincerely - Mr. and Mrs C. H. Zoellner.

over.

DECLASSIFIED IAW EO 13526

His rank and address was:

S/Sgt. William Henry Zoellner. 14062835
48th Armored Inf. Bn. A.P.O. 257.

Was reported killed in action April 8th in Germany.
His Div. 7th Armored.

IN AGO 31 MAY 1945 MESSAGE CENTER NO. 4 EXECUTIVE BRANCH 5
17 AGO 30 MAY 1945 Rec'd
A.G.O. WAR DEPARTMENT RECEIVED
1945 MAY 30 PM 2:29
RECEIVED JUNI 9 1945 M.A.F. BR. A.G.O.M.R.
1 JUN 1945
JUN 9 12 57 PM
MEMORIAL DIVISION

DECLASSIFIED IAW EO 13526

SPQYO 293

Zoellner, William H.
S. N. 14 062 835

8 August 1945

Mr. and Mrs. C. H. Zoellner
Highlands, North Carolina

Dear Mr. and Mrs. Zoellner:

Your letter of recent date requesting information concerning personal effects of your son, the late Staff Sergeant William H. Zoellner, has been received in this office.

Inasmuch as the Effects Quartermaster, Army Effects Bureau, Kansas City Quartermaster Depot, 601 Hardesty Avenue, Kansas City 1, Missouri, has jurisdiction over matters pertaining to the disposition of personal effects of our deceased military personnel whose deaths occur overseas, a copy of your communication has been forwarded to that office for appropriate attention and necessary action.

This office regrets, sincerely, the delay in answering your letter and wishes to extend its deepest sympathy in the loss of your son.

FOR THE QUARTERMASTER GENERAL:

Sincerely yours,

ARTHUR L. WARREN
Colonel, QMC
Assistant

ML

AUG 8 2 29 PM '45
MEMORIAL DIVISION

DECLASSIFIED IAW EO 13526

HEADQUARTERS, ARMY SERVICE FORCES

MEMO ROUTING SLIP

TO THE FOLLOWING IN ORDER INDICATED:

	NAME OR TITLE / ORGANIZATION / BUILDING AND ROOM	INITIALS / DATE
1	Director, Memorial Division OQMG Room 1007 Temp "C" Washington 25, D.C.	djn 21 June 45
2		
3		

RE: Staff Sergeant William H. Zoellner,
14062835

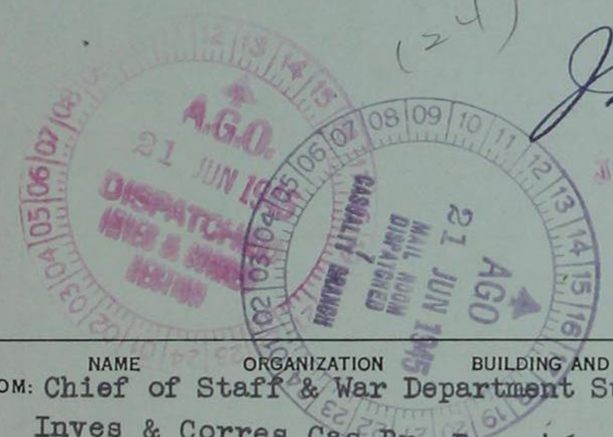
1. The attached communication, is forwarded for appropriate action.

2. Staff Sergeant William H. Zoellner, 14062835, was killed in action on 8 April 1945 in Germany.

3. Inquiry regarding decorations is receiving attention.

1 Inclosure
Cpy ltr 8 June 45

(24)



FROM:	NAME / ORGANIZATION / BUILDING AND ROOM	DATE / TELEPHONE
	Chief of Staff & War Department Sub-sec Inves & Corres Cas Br. Room 4631	21 Jun 45 79030

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.

16—31046-2 GPO

DECLASSIFIED IAW EO 13526

HEADQUARTERS, ARMY SERVICE FORCES

MEMO ROUTING SLIP

TO THE FOLLOWING IN ORDER INDICATED:

	NAME OR TITLE	ORGANIZATION	BUILDING AND ROOM	INITIALS / DATE
1				
2				
3				

JUN 22 1 34 PM '44
MEMORIAL DIVISION

FROM:	NAME	ORGANIZATION	BUILDING AND ROOM	DATE / 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.

5—31042-8 GPO

DECLASSIFIED IAW EO 13526

Highlands, N. C.
June 8, 1945

My dear Mr. Stimson:

Your letter of May 26th came today. Thanks for your lovely words of sympathy. Our son sent us a Purple Heart and an Oak Leaf Cluster from England just as he was going back into combat on Dec. 1st, 1944. Thought best to tell you but if we are due this one we will be very grateful. We also hope his personal effects will be found because we understand he won the Medal of Verdun in his dash across France. We received the book given him by Gen. Sylvester, letters of gratitude by the mayors of towns liberated it was recorded in that, he was in 7th Armored. A good soldier.

Sincerely

Mr. and Mrs. C. H..Zoellner

Highlands, N. C.

C
O
P
Y

DECLASSIFIED IAW EO 13526

CORRECTIONS AND ADDITIONS TO BURIAL REPORT AS TAKEN FROM AG CASUALTY CARD

NAME —

RANK —

ASN —

ORGANIZATION 48th ARMD INF. BN.

DATE OF DEATH — 8 APR. 45

PLACE OF DEATH —

CAUSE OF DEATH —

J. E.
(Signature)

file
3-25-46
Crekarp
mem

DECLASSIFIED IAW EO 13526

GRA[illegible]STRATION
FORM NO. 1
(Revised 1 Sept. 1943)

RESTRICTED

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

10 Apr. 45.
Date

ZOELLNER WILLIAM H. — S/Sgt. — 14062835
Last Name — First — Initial — Rank — Serial No.

Unknown — 7th A.D.
Unit — Organization

Obernirchen, Germany — 7 Apr. 45 Est. — SFW Neck.
Place of Death — Date of Death — Cause of Death

1000-hrs, 10 Apr. 45. — Ittenbach # 1 — F 678-310
Time and Date of Burial — Name of Cemetery — Name or Coordinates of Location

2 — 1 — G — Perm.
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? ETO Card.
Drivers License.

What means of identification were buried with the body?

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

Who is buried on:

Deceased's Right: Nails, James H — 34782002 — — 3
Name — Serial No. — Rank — Organization — Grave No.

Deceased's Left: Coyne, Terrence M — 16200558 — — 1
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.

ZOELLNER, WILLIAM H.
14062835 T42 43 A
CARL H. ZOELLNER
HIGHLANDS, N.C.

If print of identification tag is not affixed fill in below:

Emergency Addressee _____
Name

_____
Address

Religion _____

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

file
3-25-46
mo. J. memorandum

Reinterred US Military Cemetery Margraten, Holland,
Plot XX, Row 1, Grave 2.

Henry G. Ellis, Jr.
Signature of Officer or other person reporting burial

HENRY G. ELLIS Jr.
1st Lt QMC
Verified by G.R.S. Officer

Commanding
3059th QM GR Co

1st Lt, QMC
O-1591451
G.R.O.

8

RESTRICTED

DECLASSIFIED IAW EO 13526

IF DECEASED UNIDENTIFIED

Take Fingerprints of Both Hands. If unable to obtain a complete set of Fingerprints, Take Those You Can, and fill in the following:

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

(If possible, have medical personnel take a tooth chart, if no medical personnel present, fill in a tooth chart below.) In space below, locate, and describe any scars, birthmarks, moles, deformities, etc.

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

Left Hand: 4 3 2 1 Thumb

Right Hand: 4 3 2 1 Thumb

TOOTH CHART

Deceased's Right / Deceased's Left

	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

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 HQ SOS /22560

DECLASSIFIED IAW EO 13526

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

Restricted

REPORT OF BURIAL

TM 10-630 AND AR 30-1815

30 August 1945
Date

C gm+

Zoellner	William	H.	S/Sgt	14062835
Last Name	First	Initial	Rank	Serial No.

Unk	7th Armd Div.
Unit	Organization

Oberkirchen, Ger.	Est. 7 Apr 1945	SFW Neck
Place of Death	Date of Death	Cause of Death

0830 - 3 SEP 1945	Margraten	VK 645482
Time and Date of Burial	Name of Cemetery	Name or Coordinates of Location

2	1	XX	Cross
Grave Number	Row Number	Plot Number	Type of Marker

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

If No Identification Tags
How were remains identified?

ETO Card
Drivers Licenses

REBURIAL

What means of identification were buried with the body?

Previously Ittenbach Cemetery

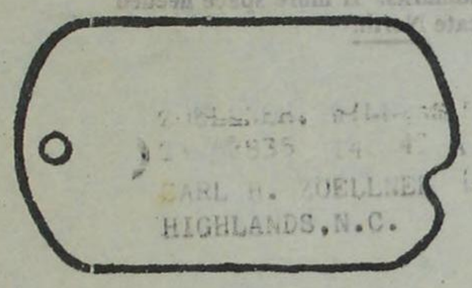
Plot G Row 1 Grave 2

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:	Coyne	16200558	Unk	Unk	1
Deceased's Left:	Nails	34782002	Pvt	7th Armd Div.	3

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 Carl H. Zoellner
Name

Highlands, N. C.
Address

Religion P

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

file
3-2-5-46
m. d. mem

Disinterring Officer: RICHARD A. CROSS, Capt., QMC, 608th QM Gr Reg Co.
Signature of Officer Supervising Disinterment

Cleon E. Wells

Reinterring Officer: CLEON E. WELLS, 1st Lt., QMC, 603rd QM Gr Reg Co.
Verified by Name of Officer

Restricted

DECLASSIFIED IAW EO 13526

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

4	3	2	1

Right Hand

4	3	2	1

Thumb

Name	Serial No.	Rank	Organization	Grave No.
Coyne	16200558	Unk	Unk	1
Nagle	31278002	Pvt	7th Armd Div.	3

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

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.

TOOTH CHART

Deceased's Left

	1	2	3	4	5	6	7	8
Upper								
Lower								

Deceased's Right

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

Characteristics:

Other Data:

Disinterring Officer: RICHARD A. CROSS, Capt., QMC

Reinterring Officer: GLEON E. WELLS, 1st Lt., QMC

AG P BR HQ SOS /22560

14 SEP 1945

DECLASSIFIED IAW EO 13526

SENSITIVE SURFACE - HANDLE EDGES ONLY

WAR DEPARTMENT

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

REPORT OF DEATH

DATE 11 May 1945

FULL NAME	ARMY SERIAL NUMBER	GRADE
Zoellner, William H.	14 062 835	S/Sgt
HOME ADDRESS	**ARM OR SERVICE**	**DATE OF BIRTH**
Highlands, N. C.	Infantry	30 Apr 1921
PLACE OF DEATH / **CAUSE OF DEATH**		**DATE OF DEATH**
European Area / Killed in action		8 Apr 45
STATION OF DECEASED	**DATE OF ENTRY ON CURRENT ACTIVE SERVICE**	**LENGTH OF SERVICE FOR PAY PURPOSES** (YEARS / MONTHS / DAYS)
European Area	27 Feb 42	over 3 yrs. / /

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)

Mrs. Nellie F. Zoellner, mother, Highlands, North Carolina

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)

Mr. Carl H. Zoellner, father, same as above
Nellie R. Zoellner, mother, same as above

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	X	

ADDITIONAL DATA AND/OR STATEMENT

[X] BATTLE [ ] NON-BATTLE

Evidence of death rec'd in WD 21 Apr 45
Expert Infantryman (Source and date of order will be furnished when received)

FILE
MAY 19 1945

COPIES FURNISHED:		
S. G. O.	F. B. I.	F. O., U. S. A.
2.O.Q.M.G.	O. F. D.	ARMY EFFECTS BUREAU CASUALTY BRANCH FILE
G. A. O.	VET. ADMIN.	A. G. 201 FILE

BY ORDER OF THE SECRETARY OF WAR:

H E Hinchliffe

ADJUTANT GENERAL

WD AGO FORM 52-1
1 FEBRUARY 1945

THIS FORM SUPERSEDES WD AGO FORM 52-1, 1 DECEMBER 1944, WHICH MAY BE USED UNTIL EXISTING STOCKS ARE EXHAUSTED.

DECLASSIFIED IAW EO 13526

SENSITIVE SURFACE - HANDLE EDGES ONLY

506814

WAR DEPARTMENT

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

REPORT OF DEATH

DATE 11 May 1945

FULL NAME	ARMY SERIAL NUMBER	GRADE
Zoellner, William H.	14 062 835	S/Sgt
HOME ADDRESS	**ARM OR SERVICE**	**DATE OF BIRTH**
Highlands, N. C.	Infantry	30 Apr 1921
PLACE OF DEATH / **CAUSE OF DEATH**		**DATE OF DEATH**
European Area / Killed in action		8 Apr 45
STATION OF DECEASED	**DATE OF ENTRY ON CURRENT ACTIVE SERVICE**	**LENGTH OF SERVICE FOR PAY PURPOSES** (YEARS / MONTHS / DAYS)
European Area	27 Feb 42	over 3 yrs. / /

EMERGENCY ADDRESSEE (NAME, RELATIONSHIP & ADDRESS)

Mrs. Nellie F. Zoellner, mother, Highlands, North Carolina

BENEFICIARY (NAME, RELATIONSHIP & ADDRESS)

Mr. Carl H. Zoellner, father, same as above
Nellie R. Zoellner, mother, same as above

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	X	

ADDITIONAL DATA AND/OR STATEMENT

[X] BATTLE [ ] NON-BATTLE

Evidence of death rec'd in WD 21 Apr 45
Expert Infantryman (Source and date of order will be furnished when received)

COPIES FURNISHED:		
S. G. O.	F. B. I.	F. O., U. S. A.
A.O.Q.M.G.	O. F. D.	ARMY EFFECTS BUREAU CASUALTY BRANCH FILE
G. A. O.	VET. ADMIN.	A. G. 201 FILE

BY ORDER OF THE SECRETARY OF WAR:

R E Hinchliffe

ADJUTANT GENERAL

WD AGO FORM 52-1
1 FEBRUARY 1945

THIS FORM SUPERSEDES WD AGO FORM 52-1, 1 DECEMBER 1944, WHICH MAY BE USED UNTIL EXISTING STOCKS ARE EXHAUSTED.

DECLASSIFIED IAW EO 13526

506814

RTB:VK:cw
September 20, 1945

REGISTERED MAIL

Dear Mr. Zoellner:

H. Zoellner.

son, Staff Sergeant William

WAR DEPARTMENT

OFFICIAL BUSINESS

PENALTY FOR PRIVATE USE TO AVOID
PAYMENT OF POSTAGE, $300
(PMGC)

Boelkner. William H. Lieut.
14062835
3706814
25.

5 marks
5 G

DECLASSIFIED IAW EO 13526

DECLASSIFIED IAW EO 13526

JRM:RW:mjw

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

Case No. 506814

Date 4 August 1945

SUBJECT: Report of transaction in disposing of the effects of

William H. Zoellner (Name of deceased), 14062835 (Army Serial Number) late a

Staff Sergeant (Grade), Infantry (Organization, Army or Service) who died

on the 8 day of April, 1945, at European Area

TO : The Adjutant General, War Department, Washington 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._____.)

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_____, Incl._____)

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 August 1945, pursuant to Special Orders 228, Headquarters KCQM Depot, dated 25 September 1943, the application or affidavit of Carl H. Zoellner 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, Carl H. Zoellner (Name of person found entitled) o: _____, Highlands (City, Town or Village), State o North Carolina, is the father (Relationship or Capacity) of th above-named decedent and appears to be entitled to receive his or her effects.

(Signature of Summary Court Officer)

JOHN R. MURPHY, Colonel, Q.M.C.
(Name, Rank, Organization)
SUMMARY COURT MARTIAL

Eff. QM Form 75

DECLASSIFIED IAW EO 13526

506814

RTB:RW:mjw
August 8, 1945

Mr. Carl H. Zoellner
Highlands, North Carolina

Dear Mr. Zoellner:

The Army Effects Bureau has received from overseas some personal effects of your son, Staff Sergeant William H. Zoellner.

I am inclosing a check for $12.01, representing funds which belonged to him. I am also inclosing a personal card which was included in his effects. The remainder of the property is being forwarded to you in one package.

If, by any chance, the property has not reached you at the expiration of thirty days from this date, please notify me and tracer will 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 the soldier'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,

68

C. B. QUINN
2nd Lt., QMC
Chief, Files Branch

2 Incls--
Personal Card
Check

RB

DECLASSIFIED IAW EO 13526

ARMY SERVICE FORCES
ARMY EFFECTS BUREAU

ORDER FOR SHIPMENT

Mr. Carl H. Zoellner
Highlands, North Carolina

SHIP TO:
S/Sgt. William H. Zoellner
14062835
506814 D

Effects of:
Name
ASN
Case No.
Wt.

DATE 17 August 1945

FOR: Effects Quartermaster

REMARKS: RTB:RW:mjw

x	Inclose Bureau Check		Remove G.I.
	Acct. No. 132598	X	Note discrepancy in name
	Amount $12.01 (mc)		Films removed
	Inclose "Valuables" item		Diery removed
	Ship "Valuables" item(s)		Laundry removed

(mcl)

stfs 8-14 120951df

ROUTING:

1 Accounting Branch (cat) 132598
2 Warehouse Division 506814
3 Files Branch, Adm. Div.

August 20 45

Carl H. Zoellner 12.01

Twelve and 01/100

REMARKS:

Franked
Est. Exp. Chgs.
Est. Frt. Chgs.
No. of packages 1 AUG 25 1945

E K

Shipping Clerk

Eff. QM Form 14 (26 Dec 44)

DECLASSIFIED IAW EO 13526

ARMY EFFECTS BUREAU
INVENTORY

JUL 13 1545

CASE NO. 506814 HC

TYPED BY lc

DATE 7-9-45

STATUS dec.

NAME William H. Zoeliner (?)

A.S.N. 14062835

RANK S/Sgt.

ORGANIZATION unk.

AMOUNT 12.01

ACCOUNT NO. 132598 df.

PAID-Check No 120951 ff

LIST NO. F-274

REMARKS

A C C O U N T I N G I N V E N T O R Y

Eff. QM Form 11a (10 Feb [illegible]

DECLASSIFIED IAW EO 13526

PACKAGE DESCRIPTION

#1 Pky

ARMY EFFECTS BUREAU INVENTORY

506814 Hq.

NAME William H. Boettner

A.S.N. 14062835 RANK 1/Lt

DECEASED X
MISSING
P.O.W.
ABANDONED

TALLY NO. 9900

INV. DATE 23 July

ORIG. NO. OF PKGS. 1

BOX NO. 72

SHEET 1 OF 1 SHEETS

ORGANIZATION 7th Armd Div

	Belt		TOWELS & WASHCLOTHS		WINGS
	BELT, MONEY (NO MONEY)		CLOTHING		BAGS, CLOTH OR TRAVEL
	Cloth, Wash		BRACELET IDENT.	1	BILLFOLD (NO MONEY)
	Coats		Brushes		Case
	Footwear, Pr.		CAMERAS		Footlocker
	Gloves, Pr.		Glasses		KIT, SEW, TLT, OR WRITING
	Handkerchiefs		Knives		BOOKS
	Headwear		Lighters		Books, Address
	Jackets	X	MISC.		Books, Pilot Log
	Overcoats		Pen, Fountain		DIARY (REMOVED FOR DUR)
	Scarfs		Pencil, Mechanical		FILMS
	Shirts		Pipes		Letters
	Socks, Pr.	X	RELIGIOUS ARTICLES		Papers, Personal
	Ties		RIBBONS, DECORATION		Photos
	Towels		Rings		Shoe Shine Articles
	Trousers, Pr.		Tobacco		SHORT SNORTER
	Trunks, Pr.		Toilet Articles		SOUVENIRS
	Underwear	1	WATCH Alpina	X	SOUVENIR MONEY
					Stationery
					TESTAMENTS
					U.S. MONEY (AMOUNT)

Seaman Marks removed

8/1 wd

GNL

Benef

REMARKS

Mr. C. H. Boettner.
Highlands. N.C.

ATTACHMENTS

	FORM #54		FORM #100

1 Gr. Label
1 Iden. Card
1 Inventory

C.A.T. 7 ond

S.I.K

WEIGHT		G.I. REMOVED	
	X	SHORTAGE ON REVERSE	✓
		IDENT. TAGS REMOVED	
		DIARY REMOVED	
DATE SHIPPED		LOCKED STORAGE	
AUG 25 1945		LAUNDRY REMOVED	
#43 OR ADDITIONAL	X	FILM REMOVED	

WAREHOUSE SPACE 2253	STORED BY
INVENTORIED BY Morany	
PACKED BY Hunter	CHECKED BY

Eff. QM Form 11 (24 Feb 45)

GO

DECLASSIFIED IAW EO 13526

ADDITIONAL REMARKS

SHORTAGES

Form #38 U.S. GOVT. CHECK SHORT

NUMBER

DATE

SYMBOL 211-039

AMOUNT

100 Francs
$10.00 U.S.

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

Moran
INVENTORY CLERK

SUPERVISOR

G.I. REMOVED

Eff. QM Form 11 (12 Dec 44)

DECLASSIFIED IAW EO 13526

NAME ZOELLNER, WILLIAM H. S/SGT 2835

BAY	PALLET	BOX	TALLY
	13	72	9900

TYPE OF PKG.	WHSE. SPACE	INVENTORIED
GRB		

Eff. QM Form 48

DECLASSIFIED IAW EO 13526

Box No. Am 5
Mailed direct to
Eff. QM, KC by Reg
Mail
Register No.____
Pouch No.____

R E S T R I C T E D

(US Military Cemetery)
~~Henri Chapelle, Belg.~~)

INVENTORY FORM

Ittenbach # 1 G 2

10 Apr 1945

SUBJECT: Inventory of Personal Effects of:

Zoellner	William	H.	S/Sgt.	14062835
(Last name)	(First Name)	(MI)	(Rank)	(Serial No.)

TO: Effects Quartermaster, Communication Zone, APO 887, U. S. Army.

the above named individual of Unk 7th Arm'd Div.
(Unit) (Organization)

was buried by the 607th QM Graves Reg. Co., on 10 Apr 1945.

Designated Beneficiary: NOT AVAILABLE TO THIS HEADQUARTERS.

INVENTORY OF EFFECTS

CLASS I

1 knife
s cissors
1 stop watch in case
1 ring
souvenir money
2 shoulder patches
1 billfold
pictures
1 cross

CLASS II

100 French
$10.00 U. S.

E. H. JENISON
Major, F. D.
Sym. 211-039

Money as listed above has been turned into and Form WD FD #38
attached (to ribbon copy of Inventory).

INFORMATION NOT AVAILABLE TO THIS HEADQUARTERS

(Names and addresses of any Banks in which accounts may be carried)

I certify that the above items constitue all of the effects, secured by me, of the above named individual and that they were forwarded to the Effects Depot by TRUCK.

H. SHACKELFORD
1st Lt, QMC
O-1596803
G. R. O.

REMARKS:

AG ETO FORM 26
(Sub)

DECLASSIFIED IAW EO 13526

506,814

Serial No. 14062835 Name ZOELLNER, WILLIAM H
Grade T/SGT Rank
Organization 3 ARMD DIVISION
Address
Nearest Relative
Address
Killed in Action Died of Disease
Date EST 11 APRIL 1945 Hospital
Battle Area OBERKIRCHEN, GERMANY Information
Place of Burial HENBACH (No)
Point of Coordination
Description of Body
Members Missing

Signed