

# **National Archives & Records Administration War Department Files**

**S SG Wilho K. Hill**

**ID: 35314432**

**Branch of Service: U.S. Army**

**Hometown: Lake County, OH**

**Status: Killed In Action**



COMPANY  
MORNING REPORT

ENDING  
2400

23 Jan 1945

(DAY)

(MONTH)

(YEAR)

STATION Mourmelon, VT 5464, Nord de'Guerre

ORGANIZATION Co B 401st Glider Inf

(CO, DET, ETC.)

(PARENT UNIT)

(ARM OR SERVICE)

SERIAL NUMBER	NAME	GRADE	CODE
35 314 432	Hill Wilho K (653)	S Sgt	A
Dy to KIA 16 Jan 45			
Last item			

RESTRICTED

B

OFFICER STRENGTH	FLD O & CAPT		1ST LT		2D LT		WO		FLT O	
	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T	PRES	ABS'T
ASSIGNED	1		2	2	2					
ATTACHED UNASSIGNED										
ATTACHED FR OTHER ORGN										
TOTAL	1		2	2	2					

AVN CADET & ENLISTED STRENGTH	AVIATION CADETS		ENLISTED MEN			
	PRESENT	ABSENT	PRESENT FOR DUTY	PRESENT NOT FOR DT	ABSENT	PRESENT AND ABSENT
ASSIGNED			105		55	160
ATTACHED UNASSIGNED						
ATTACHED FR OTHER ORGN						
TOTAL			105		55	160

R A T I O N S	I	ESTIMATED NUMBER OF RATIONS REQUIRED FOR	DAY OF WEEK	NUMBER			
			DATE				
I	II	MESS ATTENDANCE FOR DAY OF THIS REPORT			TOTAL	+ 3	AVERAGE
		BREAKFAST	DINNER	SUPPER			
S	III	MEN AUTHORIZED TO MESS SEPARATELY	MEN ATCHD FOR RATIONS	NET	O & OTHERS MESSED	TOTAL	
		MEN ATCHD TO OTHER ORGN FOR RATIONS					
		MEN PRESENT	LESS		PLUS		

PAGE 1 OF 1 PAGES

I CERTIFY THAT THIS MORNING REPORT IS CORRECT AND THAT RATION FIGURES IN PART II REPRESENT AN ACTUAL COUNT AS REPORTED TO ME.

SIGNATURE

W.D., A.G.O. FORM NO. 1  
MARCH 15, 1943

(NAME)

WD COPY THRU MRU OR SCU

WOJG USA

(GRADE) (ARM OR SERVICE)

Information from the Hospital Admission Cards created 11/14/2017  
by the office of the Surgeon General, Department  
of the Army (1944-1945).  
Information for the year 1945

Service Number	35314432
Sample Size	
Rank	Enlisted Man (includes Aviation Ca
Age	28 28
Race	Unknown
Length of Service	Unknown
Arm of Service	Infantry, General or Unspecified
AAF Status	Neither assigned nor attached to AAF (includes all unassigned, ;
Admission Station	European Area
Month of Admission	January
Year of Admission	1945
Last Treatment Facility	Not in Medical Installation Prior to Death
Special Class of Case	Cases reported by AGO only, except death in German or Japanese Prison
Type of Case	Casualty, battle
Type of Admission	New, not EPTS
1st Diagnosis	Killed in action
1st Anatomical Location	Unknown, code not applicable
1st Operation	
2nd Diagnosis	
2nd Anatomical Location	
2nd Operation	
3rd Diagnosis	
Causative Agent	None or Unknown
Circumstances Surroundi	All battle casualties, and all battle injuries not intentionally inflicted by self or another person
Final Result	
Total Days (non-effective)	
Hospital Days	
Overseas Days	
Type of Discharge	Died
Field of Cause of Disposit	First Diagnosis field
Month of Disposition	January
Year of Disposition	1945

Source: This information was obtained from the Hospital Admission Card data file (1944-1945) created by the Office of the Surgeon General Department of the Army. In 1970 the National Research Council first compiled this for statistical purposes using the EMTs (Emergency Medical Tags) and other Office of the Surgeon General Office Records during WWII.

*Veri app Death Rpt 2937-1a (19)*

WORLD WAR II DECEASED

ORIGINAL

**CHECK TYPE REQUIRED**  
*(See Instructions attached)*

- UPRIGHT MARBLE HEADSTONE
- FLAT MARBLE MARKER
- FLAT GRANITE MARKER
- BRONZE MARKER

**APPLICATION FOR HEADSTONE OR MARKER**

*(Please make out and return in duplicate)*

ENLISTMENT DATE

*July 16, 1942*

DISCHARGE DATE

SERIAL No.

*35314432*

PENSION No.

EMBLEM (Check one)

- CHRISTIAN
- HEBREW
- NONE

NAME (Last, First, Middle Initial)

*Hill, Wilho K.*

STATE

*Ohio*

RANK

*S/Sgt*

COMPANY

U. S. REGIMENT, STATE ORGANIZATION, AND DIVISION

*A/S - inf  
327 Gldr inf USAGF Regt*

DATE OF BIRTH (Month, Day, Year)

*Feb. 24, 1917*

DATE OF DEATH (Month, Day, Year)

*Jan. 16, 1945*

NAME OF CEMETERY

*Center Cemetery*

LOCATION (City and State)

*Lakeville, Ohio*

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)

NEAREST FREIGHT STATION (City and State)

*Conneaut, Ohio*

*Chas. Marney & Sons - Robert Marney*  
(SIGNATURE OF CONSIGNEE)

POST OFFICE ADDRESS OF CONSIGNEE

*208 Liberty St., Conneaut, Ohio*

**DO NOT WRITE HERE**

FOR VERIFICATION

*W. CHELMSFORD, MASS. 9 MAY 1949*

ORDERED

*17 MAY 1949*

B/L

*5925436*

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.

*Hilma Niskanen*

APPLICANT'S SIGNATURE

DATE OF APPLICATION

ADDRESS (Street, City, State)

*39 Michcar ave. Port Arthur. Ont.*

*Maskar Ave, Port Arthur, Ontario*