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CASUALTY REPORTING

IN THE EUROPEAN THEATER OF OPERATIONS

MISSION: Prepare a factual, annotated report with appropriate conclusions and recommendations on the system of casualty reporting in this theater.

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APO 408

REPORT ON

CASUALTY REPORTING IN THE EUROPEAN THEATER OF OPERATIONS

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CHAPTER 1

ORGANIZATION OF THE CASUALTY REPORTING SYSTEM

SECTION 1

PURPOSE AND SCOPE OF CASUALTY REPORTING

1. Purpose. The casualty procedure as outlined for the European Theater had a two-fold purpose, namely:

a. To furnish the War Department with complete data on casualties to be used by The Adjutant General in notifying next-of-kin and to supply statistical information to the General Staff and other agencies.

b. To provide the various agencies of Headquarters, European Theater of Operations, and local headquarters with casualty information necessary for proper planning, administration and operations.[1]

2. Types of Casualties.[2] Casualties are classified by War Department circular as follows:

"a. Battle Casualties. - All casualties due to enemy action are battle casualties, and are grouped into the following categories:

(1) Killed in action.

(2) Died as a result of wounds received in action.

(3) Died as a result of injuries received in action.

(4) Seriously wounded in action.

(5) Seriously injured in action.

(6) Slightly wounded in action (requiring hospitalization).

(7) Slightly injured in action (requiring hospitalization).

(8) Missing in action, presumed to be the result of enemy action. ***

(9) Captured (only when it is definitely known that the person was captured will he be reported in this category).

(10) Known to have been injured in neutral country as a result of enemy action.

(11) Seriously ill gas casualty.

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1. For use of casualty statistics in determining reinforcement requirements see General Board Study No. 3, "Reinforcement System and Reinforcement Procedures in European Theater of Operations."

2. Cir 2, WD, 1945.

"b. Nonbattle Casualties. - All casualties not listed in "a" above are nonbattle casualties.***"

3. Magnitude of and Time Factors in Casualty Reporting.[3] a. From D-Day, 6 June 1944, to VE Day, 8 May 1945, initial casualty reports from the Theater to the War Department totalled 565,000 (round figures). Changes in status reports during the same period totalled 488,000 (round figures).

b. Average daily processing of initial casualty reports and changes in status was 3,300 per day. During peak casualty periods, such as D-Day to D plus 5, the American break-through at St. Lo, and the Battle of the Bulge, initial daily casualty processing averaged 6,000 to 8,000.

c. The time lag from date of initial casualty to the date report was transmitted by Theater Headquarters to the War Department was reduced progressively from 29 days at D plus 60 to 8 days at D plus 150, and to less than 7 days at D plus 240. This latter time element was maintained until VE-Day, with few exceptions.

d. Reductions in time lag were due largely to experience which resulted in improvement of directives, simplification of procedures, training of casualty personnel, special courier transportation, and a pressure from all levels of command to create a state of "casualty consciousness."

4. Emphasis in this Report. a. This report will deal primarily with procedures relating to battle casualty reporting in view of the fact that nonbattle casualty reporting was far less voluminous, was an established procedure, and was brought within the battle casualty reporting system as outlined hereinafter.

b. Emphasis will be placed upon air and ground force procedures because only a small fraction of the total battle casualties were reported by commands of the Communications Zone.

SECTION 2

ORGANIZATION WITHIN THE EUROPEAN THEATER OF OPERATIONS

5. Theater Adjutant General Casualty Division.[4] a. The Casualty Branch of the European Theater was formed within the Military Personnel Division of the Adjutant General Section, Headquarters Services of Supply, European Theater of Operations, on 24 September 1942; it was consolidated in Headquarters European Theater of Operations on 1 January 1944, when the Military Personnel Divisions were consolidated.

b. On 15 February 1944 the Casualty Branch was reorganized and designated a Casualty Division in the Adjutant General Section, Headquarters European Theater of Operations.

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3. Theater AG Casualty Division Historical Rpt (Tab C) submitted with Hq USFET Reply to General Board questionnaire; General Board Study No. 46, "Machine Records in the European Theater of Operations."

4. Theater AG Casualty Division Historical Rpt (Tab C) submitted with Hq USFET reply to General Board questionnaire.

6. Other Casualty Sections. Within each major command of the Theater (down to division level in the ground forces) a casualty section exists within the Adjutant General Section. Responsibility for coordinating casualty reporting rests with this section.

7. Related Agencies. The following related agencies are identified with casualty processing or reporting:

a. Machine Records Units (MRU) on casualty accounting.

b. Graves Registration on burials.

c. Medical installations on hospital admissions and dispositions, letters of sympathy, and progress reports.

d. Provost Marshal reports on stragglers and recovered Allied military personnel.

e. Chaplain reports of funerals.

SECTION 3

THEATER CASUALTY OPERATIONS PRIOR TO INVASION

8. Directives. Initial operation in the European Theater was carried on under Circular 21, War Department, 1942, which was entirely inadequate. This circular was superseded by Circular 195, War Department, 1943, based upon limited casualty reporting from the North African Theater and Air Force casualty reporting from the European Theater.

9. The Air Forces[5] a. Beginning in August 1942 and October 1943, the Eighth and Ninth Air Forces, respectively, began battle casualty reporting in the European Theater of Operations upon commencement of their operational missions. Casualty reports were made by teletype or radio from units to air force headquarters, where a check for verification and general accuracy was made, whereupon the reports were consolidated and forwarded by teletype to the Adjutant General Casualty Branch, at Headquarters, Services of Supply, European Theater of Operations. A card index was manually prepared and maintained at the air force headquarters.

b. Upon the activation of US Strategic Air Forces in Europe, it was decided that casualty reports would be submitted directly from air force headquarters to Theater Headquarters.

10. North African Theater. North African casualty reports were processed through the Adjutant General Casualty Branch, Headquarters Services of Supply, European Theater of Operations, until direct North African - United States radio was established late in December 1944.

11. Institution of MRU Accounting and Reporting. Based upon existent War Department directives, the Theater reported initial casualties to the War Department by means of cablegram. Because of the increased volume of casualties, garbling of names and numbers, misinterpretation of status in the War Department and subsequent erroneous

5. Information on the Air Forces was obtained largely from Hq USFET and Ninth Air Force replies to General Board questionnaire. Unfortunately, few officers of the tactical air forces were available in the Theater for consultation when this report was prepared.

reports to next-of-kin, the War Department instituted a system of reporting by individual MRU punch card for each casualty. This system went into effect 1 March 1944 in the European Theater of Operations.[6] The conversion to MRU reporting eliminated the manual preparation of status change cards, greatly facilitated handling of casualty information, and increased accuracy with which reports were processed.[7]

12. Channels of Casualty Reporting. The casualty reporting system, as adopted in the European Theater of Operations in March 1944, extends throughout the chain of command from the lowest military unit to the War Department. The system briefly provides that from the lowest unit the report is processed through the regiment and division to army or similar headquarters, at which point an individual MRU punch card is prepared containing all necessary information pertaining to the individual. At army or similar headquarters, all cards are consolidated daily, listed, and dispatched to the Theater Adjutant General Casualty Division by special courier. At the Theater level they are processed by checking against existing casualty files. The information is then reproduced on a Theater casualty card, consolidated for the current day, and dispatched by air courier to The Adjutant General, War Department, Washington, D. C. These cards become the basis for action taken by the War Department, such as notification of the next-of-kin, settlement of accounts, and statistical analysis.

CHAPTER 2

INVASION

SECTION 4

PLANNING FOR THE INVASION

13. Bases for Plans. a. Circular 195, War Department, 1943, was the basis for the European casualty reporting system. Generally speaking, the circular was adequate. Major deficiencies arose through the use of general phraseology which left too much latitude for interpretation and classification in theaters of operations.[8] Only minor modifications were made by Circular 373, War Department, 14 September 1944.

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6. Theater AG Casualty Division Historical Report (Tab C), submitted with Hq USFET reply to General Board questionnaire.

7. Hq Ninth Air Force reply to General Board questionnaire.

8. An example of general phraseology exists in Paragraph 5a, Cir 2, WD 1945, which reads as follows:

"Dead. - Any person will be reported dead when there is reasonably conclusive evidence of death or where there are circumstances that lead to no other logical conclusion."

Similar general phraseology exists in 5b, with respect to "missing" or "missing in action." The Theater found it necessary to issue criteria for findings of death and for determing "missing in action." Unfortunately, however, these definitions were not promulgated throughout the Theater until 23 March 1945. See Paragraph 82 and d, Cir 31 ETOUSA 1945.

b. The European Theater casualty experience was limited to Air Force casualties and informal reports of experiences in the North African campaign. Consequently, Theater directives initially were general in nature and suited mainly to the Air Forces.

14. Personnel and Training.[9] a. Divisions and other units sent overseas from the Zone of Interior had little conception of battle

9. Information for this paragraph was obtained from replies to General Board questionnaire by Hq USFET, Third Army, and Seventh Army; also from memorandum, Col R B Patterson, formerly AG of V Corps, to Lt Col H L Corey, subject: "Casualty Reporting in First US Army." Examples of pre-invasion planning and training as as follows:

a. First Army:

(1) In preparation for the invasion First Army called a combined G-1 - AG conference in the early sping of 1944, in which battle casualty reporting was emphasized. Casualty officers of the AG sections of the 1st and 9th divisions gave intensive instruction based upon their combat experiences in the North African and Mediterranean Theaters.

(2) Dry runs to test and improve procedures were held, complete processing was carried on, and MRU cards punched. Many errors were made by participating divisions and were returned with corrections. The value of such training was demonstrated in casualty reporting during the invasion, for units which had participated in the dry-run exercises had much less difficulty than units which had been unable to participate.

(3) Coordination of staff sections concerned with battle casualty reporting was effected in V Corps prior to invasion.

b. Third Army:

(1) Prepared and issued comprehensive personnel administration plan of which casualty reporting was a part.

(2) Held a series of training conferences on administration which covered casualty reporting and other allied subjects. Over 3,400 administrative personnel and unit commanders of the entire army attended; the Commanding General personally addressed some of the groups.

(3) Established a procedure for processing, control, and coordination of casualty and related reports at army headquarters.

(4) Initiated an internal training program for casualty section personnel of Third Army Hq; attached EM to corps in combat for training.

(5) Coordinated plans for the reporting of casualties of the French Second Army, which was attached to Third Army.

c. Seventh Army, then under MTO, in preparation for its operations in Southern France, instituted a training program emphaizing

casualty reporting. This subject was not covered in peacetime maneuvers, not taught at the Adjutant General's School, and not a part of the administrative preparations for movement overseas. Commanders neither realized the personnel requirements for casualty reporting nor the interrelations of the various reporting agencies.

b. The Theater Commander undertook by discussions, letters, and directives prepared by the Adjutant General to impress upon subordinate commanders:

(1) The importance of casualty reporting, along with necessity for speed and accuracy.

(2) The need for adequate training of casualty processing personnel.

(3) The necessity for obtaining adequate casualty reporting personnel at headquarters of armies and divisions.[10]

Results accomplished by this campaign on the part of the Theater were only partially successful; however, units which had been staged in England for some months before the invasion had been well indoctrinated in the need for speedy and accurate casualty reporting. Units arriving later from the Zone of Interior were unprepared for this task. It required combat experience and a multitude of problems to bring about a full realization of the importance and difficulties of casualty reporting.

c. Organizations which had experienced battle casualties in the North African and Sicilian campaigns were aware of battle casualty reporting requirements and the necessity for adequate training.[11] However, the magnitude of casualty reporting problems to occur after D-Day was not fully appreciated by these organizations. There still remained the problem of indoctrinating personnel in European Theater procedures, which differed from those of the Mediterranean and North African Theaters.

18. Deficiencies in Planning. As evidenced in the experiences and lessons gained during the invasion, planning prior to D-Day had several significant deficiencies.

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casualty reporting as a command function and the necessity for accuracy and promptness in reporting. Personal contacts were made with new divisions as assigned and assistance given in setting up casualty sections and procedures. Seventh Army also issued a consolidated circular collecting in one publication all Theater and army directives relating to casualties.

10. Not until late 1944 did the Theater authorize overstrength in army headquarters for casualty reporting and other administrative requirements, and then only after a survey of field requirements.

11. For example, Seventh Army came from Mediterranean Theater of Operations; the Casualty Officer in Third Army had served in the Seventh Army.

a. At Theater level:[12]

(1) Theater directives on casualty reporting as late as March 1944 were general in nature and suited primarily to the Air Forces. This condition improved constantly prior to D-Day and subsequently throughout the campaign as results of studies and combat experiences.

(2) There was a failure, prior to D-Day, of staff sections to appreciate the respective problems of other staff sections concerned with reports relating to casualties, thereby causing duplication of effort, inadequate reports, and delays. Fortunately, most of these problems were solved in the early days of the campaign.

(3) Relationships established with other Allied armies were good. Points of view on casualty reporting were exchanged, agreements reached, and detailed instructions issued, but adequate liaison was lacking to insure full compliance with the procedures established. This deficiency resulted in time lost in exchange of information, inadequate reports, and information reported in a manner not readily translated into Theater requirements. Standard forms and fixed procedures for interchange of information would have been of considerable aid.

(4) Problems incident to reporting on recaptured Allied military personnel were not appreciated until after the invasion.

(5) Although the relationship of hospitalized casualties to total casualty reporting was recognized, the significance of Admission and Disposition Reports in casualty processing was not fully realized. Problems involved in the processing of records on hospital casualties were not foreseen; therefore, initial procedures were entirely inadequate and twice amended subsequently.

b. At subordinate commands:

(1) Deficiencies existing at Theater Headquarters were automatically reflected in planning by subordinate commands.

(2) There was a failure on the part of some commanders to appreciate the problems and administrative difficulties involved in accurate and speedy casualty reporting and, consequently, a failure to establish suitable controls or provide sufficient personnel with adequate training.[13]

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12. Theater AG Casualty Division Historical Rpt (Tab C) submitted with Hq USFET reply to General Board questionnaire.

13. Following is an extract from Historical Rpt of Casualty Division, AG Section, ETOUSA (Tab C) submitted with Hq USFET reply to General Board questionnaire:

SECTION 2

DIFFICULTIES ENCOUNTERED DURING THE INVASION

AND CORRECTIVE MEASURES TAKEN

16. Amphibious losses occurred in volume, resulting in separation of men from their units. Unit casualty reports of necessity classified such losses as "Missing in Action." Through a series of checks from reports of naval evacuation, hospital admissions, and the replacement command, the Casualty Division, Theater Adjutant General's Section, was able to correct more than 10,000 (estimated) "Missing in Action" reports which otherwise would have resulted in improper War Department notification to next of kin.

17. Errors and Time Lags. (See also par. 29) excessive errors and time lags in reporting occurred, dueprimarily to:

a. Untrained personnel.
b. Unfamiliarity with the reporting procedures.
c. Lack of coordination of reporting and processing agencies.
d. Failure of directives to establish clear-cut functions and responsibility.
e. Inadequate systems of processing and controls at division and army (corps) headquarters.
f. Delays in transmission and transportation of reports.

18. War Department Inquiries. Prior to D-Day, the War Department policy required notification of the fact of casualty without details. Due to the continuing pressure of individual inquiries and public opinion, it became necessary to furnish additional information to next of kin. The War Department thereupon did essentially an about-face, in establishing a policy to give to next of kin all of the facts which would not violate security regulations or be detrimental to the character of the casualty. This change in policy placed a tremendous burden upon all commands to obtain information and answer War Department inquiries.[14]

"In the early stages of the Casualty Division, and as late as a few weeks before D-Day, great difficulty was encountered in convincing field commanders of the importance of casualty reporting in its relation to the general public. Because there was no need for casualty personnel in peacetime, tables of organization did not provide adequate personnel for casualty sections in field units during combat. Consequently commanders were reluctant to authorize personnel for this purpose. Continued pressure from the Headquarters, European Theater of Operations, resulted in considerable improvement. Nevertheless, some units went into combat on D-Day with inexperienced and inadequate personnel for casualty reporting.

14. Additional personnel at theater and army headquarters were required to perform this task, but it was only after a joint investigation of delays by representatives of the Theater Inspector General and the Theater Adjutant General that the Theater Headquarters was induced to grant an additional allotment of per-

19. Hospital cases presented three unique problems due, primarily, to the number of hospitals through which personnel were moved during the evacuation to the rear, and to the speed of such movement.

a. The Theater Adjutant General, who was responsible for reporting to the War Department on casualties, had difficulty in keeping track of hospitalized casualties during evacuation. Moreover, the hospitals from time to time changed the status from "Battle" to "Non-battle" casualty, and discontinued reports of status. On D plus 234, the procedure was changed by requiring a copy of each Admission and Disposition Report to be furnished the servicing MRU.

b. Personnel reported "Wounded in Action" failed to appear at hospitals and were otherwise unaccounted for due to capture or death without report during evacuation, or to disappearance for no known reason. These were problems in that neither the War Department nor the next-of-kin could be furnished suitable information; the only answer was ultimately a change of status to "Missing in Action."

c. Prior to evacuation, the disposition of records on hospitalized personnel was automatic, involving transmission from the unit to the Casualty Division of the Theater Adjutant General's office for relay to the hospital concerned. Because casualties moved so rapidly through the hospital chain and the replacement commands, it was impossible to link up the records and the man during this process. On D plus 60 the units were required to hold the records for 30 days, and on D plus 180 the period was extended to 90 days. Under this latter plan the cycle of evacuation was adequate to permit the individual casualty to rejoin his unit. If he was not returned to his former unit, the records were recalled.

20. The personnel allotment to casualty sections of armies, corps, divisions, air forces, and air commands was inadequate for casualty report processing.[15]

21. General Corrective Measures. In addition to specific corrective measures indicated in the preceding paragraphs, the following steps were taken to improve casualty reporting:

a. At the direction of the War Department, representatives of the Theater Headquarters made a survey of the casualty reporting system as it operated in the armies, with a view to improving directives and procedures. The armies had initiated similar studies with subordinate commands. The need for uniformity among all commands was more apparent than ever.

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sonnel for casualty reporting purposes to the Theater AG Casualty Division and to subordinate headquarters. The Theater Ag Casualty Division on D plus 180 was increased to 20 officers and warrant officers, 170 enlisted men, 170 civilians, which strength was maintained to VE-Day.

15. Approximate requirements for these functions at major headquarters are as follows:

Army	2 O, 18 EM
Corps	1 O, 1 WO, 6 EM
Tactical air force	1 O, 10 EM
Strategic air force	2 O, 18 EM
Division	information lacking
Air command	information lacking

b. Changes in War Department directives and the results of Theater studies led to imrpoved Theater and army directives and procedures.[16]

c. The need for coordination and integration of all casualty reporting and processing units was recognized. The Casualty Section, the MRU, and the Graves Registration Section were closely integrated insofar as their functions related to processing of casualty reports. The functions and responsibilities of these sections were more clearly defined.

d. Procedures were streamlined, unnecessary steps eliminated, and control at division and army headquarters improved.

e. A special courier service for the transmission of casualty reports from the originating unit through regiment, division, corps and army to the Theater Headquarters, was instituted.

f. Additional pressure was brought upon all commands for speed and accuracy in casualty reporting, with admonition for unjustified deficiencies.

g. Additional personnel were allotted casualty sections. Additional emphasis was placed on training in casualty procedures; trained personnel were frequently furnished new units joining the comman, on an exchange basis.

CHAPTER 3

THE CASUALTY REPORTING SYSTEM IN OPERATION

SECTION 6

PROCESSING OF REPORTS[17]

22. Casualty Reports. a. The casualty report originated with regiments, separate battalions, companies and similar units, based upon available information from morning reports, reports of burial, hospital and aid station reports, collecting and clearing station reports, and military police straggler reports.

b. At regimental or similar headquarters level, the casualty report was processed against all other casualty information, corrected if necessary, and forwarded through administrative channels to Army (air force, communications zone section, or similar headquarters for other services). The army headquarters furnished consolidated machine records listings and casualty cards directly to the Theater Headquarters. In First Army corps headquarters were responsible for processing casualty reports; in all other armies, corps headquarters served only as a means of transmission.[18] (see in this connection paragraph 36).

16. Cir 94 ETOUSA, 31 August 1944, revised existing circulars and regulations and incorporated procedures concurred in by the armies.

17. For details of preparation, flow and processing of reports pertaining to casualties, see Cir 31 ETO 1945 and Part 75 TM 12-306(Amend.)

18. For a time when work was heavy Third Army had corps notify subordinate commands of change in status based on Admission and Disposition Reports of hospitals.

c. It was customary in the European Theater for division rear echelons to maintain a casualty section of the Adjutant General Section for detailed processing of casualty reports against card files containing casualty information from all sources. Conflicting reports were checked by inquiry to the reporting organizations.

d. The army headquarters casualty section maintained a casualty status file against which each casualty report was verified, based on cumulative reports of burials, hospital admissions or dispositions, and related information. In cases of conflicting information, the casualty section made verification. Having determined the accuracy of the report, the information was sent to the servicing machine records unit for preparation of punch cards and entry in a consolidated machine listing which served as the report to the Theater Headquarters.

e. It was standard practice throughout the European Theater for a higher headquarters to inform the unit initiating the report of casualty of any changes of status which came to the attention of the higher headquarters from other sources.

23. Admission and Disposition Reports of Hospitals. A. Prior to D plus 234, reports on casualties arriving in the hospitals were irregular, due in part to the hospital practice of changing type of casualty upon examination. Moreover, casualties were moved so rapidly that the casualty sections had difficulty in keeping track of them.

b. On D plus 234, all hospitals and other medical installations were required to submit a copy of each Admission and Disposition Report to the servicing MRU, which punched a locator and status card for accounting to all units concerned. An army MRU furnished copies of the cards to the former organization of assignment or attachment of each patient as well as a copy to the army casualty section for completion of its records.

c. Admission and Disposition Reports served as one of the principal sources of information and verification of casualty status.

24. Reports of Burials. Daily consolidated lists of reports of burials were furnished the casualty sections of armies, air forces, and communications zone sections by graves registration officers.[19]

25. Reports of Stragglers. Provost Marshal reports of stragglers were furnished casualty sections of armies, air forces, and communications zone sections daily as a basis for verification or for changing casualty status.[20]

SECTION 7

THE ARMY AIR FORCES[21]

26. Casualty Reporting. a. As previously indicated, the first experiences in Theater casualty reporting developed through the combat missions of the Eighth and Ninth Air Forces. The ultimate casualty

19. Par 12, Cir 31 ETOUSA 1945.
20. Par 14, Cir 31 ETOUSA 1945.
21. Information based on Hq Ninth Air Force reply to General Board questionnaire.

reporting procedures in the air forces were essentially the same as those in the ground force; they were both based upon the same detailed Theater directives.

b. Reports on casualties prepared by air force units were reviewed at command headquarters in much the same manner as in division headquarters of the ground forces, then forwarded to air force headquarters. There casualty reports were verified against all current reports, whereupon casualty status cards and machine listings were prepared as the casualty report to Headquarters, European Theater of Operations. Headquarters, US Strategic Air Forces in Europe, was not in the administrative channel for casualty reporting.

c. The Air Forces established close liaison with lower, parallel, and higher headquarters to obtain coordination of all information pertaining to casualties. Interdependency of reporting agencies and information reported was emphasized. Demand for speed and accuracy was stressed at all times.

d. Special problems of casualty reporting as they pertained to the air forces will be dealt with in succeeding paragraphs.

SECTION 8

THE ROLE OF MACHINE RECORD UNITS[22]

27. Functions Performed. a. Accounting for individual battle and nonbattle casualties within the Theater and to the War Department was accomplished primarily through the machine records system by the use of punch card forms.[23] At army headquarters (corps headquarters in First Army), cards were punched from verified battle casualty reports and a daily listing made for transmission, along with a complete set of punched cards, to the Theater Headquarters as the army casualty report. Corps were furnished copies of their respective cards for verification and further status checking. Upon transfer of units to another command, the original servicing MRU furnished the new servicing MRU a set of casualty cards on the transferred unit.

b. Machine Records Division of the Adjutant General Section, Theater Headquarters, processed reports from army, air force, and communications zone section headquarters after verification by the Casualty Division. These MRU cards became the basis for the casualty report to the War Department. Likewise, the Machine Records Division furnished corrected punch cards for individuals whose casualty status was changed as a result of authoritative information available to the Headquarters.

c. More than 1,000,000 casualty reports, including changes, were processed to the War Department during the European campaign.

28. Relationship to Other Sections. a. In the ground forces, during combat operations, the army casualty section, graves registration section, and MRU were closely related and functioned largely as a team. This relationship was so close that in the Third Army, for ex-

22. For detailed procedures, see Part 75, TM 12-305 (amended); for MRU casualty accounting in the European Theater, see General Board Study No 46, "Machine Records in the European Theater of Operations."

23. Manual accounting was abandoned 1 March 1944.

ample, the three organizations were bivouacked in the same area and moved together. Special joint messing facilities were maintained. The MRU was organically mobile, but Casualty Section and Graves Registration Section were dependent upon other sources of transportation.

b. In the Army Air Forces this close relationship was not developed, although it would have been desirable. The Eighth Air Force had no graves registration teams but relied to a large extent upon ground force reports or reports from graves registration personnel of the Ninth Air Force.[24]

SECTION 9

SPECIAL PROBLEMS

29. Accuracy in Reporting. a. The first axiom in casualty reporting was accuracy and yet this was one of the most difficult goals to obtain. Ninety percent of casualty reporting errors occur in organizations below division level; divisions and higher headquarters are largely processing organizations. The volume of errors in faulty initial reports can be reduced by a series of controls and checks at higher administrative headquarters, but these checks are in no way substitutes for accurate initial reporting. A large volume of inaccurate reports occurred during and immediately following the invasion, causing embarrasment to the Theater and the War Department and unnecessary suffering to next-of-kin.

b. All levels of command stressed accuracy. From the Theater Headquarters downward, commanders were constantly reminded of inaccuracies, and at times definite corrective action was taken to overcome carelessness in reporting.[25]

c. Proper training and indoctrination in casualty reporting was omitted in the Zone of Interior. This deficiency was of necessity corrected in the Theater but often after committment of units to battle.

d. Casualty reporting, in order to be accurate and prompt, had to be predicated upon the establishment of a system of processing and control at major administrative headquarters and the utilization of all available sources of information. This full integration and exchange of information and adequate control came only after combat experience.

e. The effect of speed on accuracy was negligible. Some tendency toward liberal use of a "Missing in Action" classification existed when a little more time would have permitted more accurate classification. Pressure for time also caused occasional failure to report surrounding circumstances in adequate detail. In general, statistics of the Theater Headquarters show that the less the time lag between date of casualty and date of report, the fewer the errors made

24. Statement by Lt Col F H Monahan, AGD, Air Section, the General Board.

25. Hq USFET reply to General Board questionnaire; also experiences in V Corps as related by Col R B Patterson, AG. Corrective actions varied. Theater, army, and division commanders conducted investigations, interviewed casualty officers, issued directives, and on some cocasions reprimanded subordinate commanders for inattention to casualty reporting.

by the reporting headquarters.[26] This conclusion was borne out by reports of the Third and Seventh Armies and Ninth Air Force, which state that accuracy was maintained in spite of speed.

30. Time Lags in Reporting. a. In Chapter 2, paragraph 17, were given indications of the causes for time lags during the invasion. Chief among the general causes of time lag was delay in transmission. The frequent transfer of units from one command to another complicated procedures and increased reporting time. During rapid and frequent movements of an administrative echelon, the time lag was greatly increased. Division rear echelons were separated from their forward echelons by as much as 100 miles with little or no transportation. Corps and army headquarters were likewise separated.

b. Constant pressure and vigilance were exercised by the War Department, the Theater Headquarters, and army headquarters on subordinate commanders. Delays in reporting were brought to the attention of all commanders concerned, with request for immediate remedial action. Total time elapsing from the date of the casualty to submission of report to the War Department was progressively reduced from 29 days on D plus 60 to 8 days on D plus 150, and to less than 7 days on D plus 240. This latter time was maintained until VE-Day with few exceptions.[27]

c. Ways and means for decrease of time lags were constantly sought.

(1) Special casualty courier systems were established from the regiment to division to corps to army headquarters, and from army headquarters to the Theater Headquarters. The Theater Adjutant General consolidated casualty reports to the War Department and dispatched them by air courier.

(2) Development of uniformity in casualty reporting decreased these lags.

(3) Contributing to a reduction in time lags was improvement of procedures in processing and integration of the casualty system and MRU.

31. Casualty Classification by Types. The two most serious classifications tended to give the greatest difficulties: "Killed in Action," and "Missing in Action." These classifications led to notification to next-of-kin, and if erroneous, unnecessary grief as well as a public mistrust of casualty reports resulted. Initial difficulties of classification arose largely because of the failure of War Department directives to establish criteria for reaching a reasonable conclusion of death or for classification as "Missing in Action." The Theater, toward the close of the campaign, and after months of experience, finally developed standard criteria as outlined in paragraph 8, Cir 31, European Theater of Operations, 23 March 1945.

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26. Hq USFET reply to General Board questionnaire.

27. Third Army set as a goal, and maintained throughout most of the campaign, a maximum five-day time lag factor; Seventh Army averaged five days from November 1944 through April 1945.

a. Killed in Action. There was some tendency toward pressure to declare individuals killed in action when the actual evidence was not conclusive of death. A report from the Seventh Army states that certain units were directed "to furnish facts on which assumption of survival is based," if a finding of death was not made.[28] In such cases the presumption should be in favor of survival, and the unit directed to furnish evidence on which a report of death is made.

b. Missing in Action.

(1) During amphibious operations of the invasion thousands of men were separated from their units and reported missing in action. Fortunately, the Theater Adjutant General, by processing aainst various reports, was able to account for and properly classify approximately 10,000 personnel so reported (see paragraph 16).

(2) The air forces in the majority of cases have had little choice but to declare combat crews lost over enemy territory as "Missing in Action". Supplementary information upon which to change classification has come primarily from:

(a) Reports on recovered Allied prisoners of War.

(b) Graves registration teams.

The time elapsed from date of casualty to identification of aircraft and/or bodies has seriously impeded classification; moreover, the lack of graves registration personnel serving with the ground forces, but trained in aircraft recognition, has impeded such identification.[29]

(3) The minimum time in declaring "Missing in Action" cases is generally agreed by ground force and air force commands as 72 hours during which time the majority of classifications can be made. The Theater regulation (Cir 31 ETOUSA 1945) allows a maximum of ten days, which is generally considered sufficient to permit investigation and report in unusual circumstances.

c. Seriously Injured and Wounded.

(1) At times casualties classified "Seriously Injured" or "Wounded in Action" have failed to appear in hospital or other repots. Cases of this character have resulted from:

(a) Capture by enemy during evacuation.

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28. Hq Seventh Army reply to General Board questionnaire.

29. The Ninth Air Force utilized a mobile graves registration team on the Continent; the Eighth Air Force relied on liaison with ground forces and Ninth Air Force graves registration personnel. These systems are considered inadequate, but pending high-level studies no suggestion for improvement can be made.

(b) Death during evacuation without report of death.

(c) Missing for unknown reasons.

(d) Error in initial reporting.

(2) These reports resulted in notification to next-of-kin but prohibited supplemental reports of progress because the individual could not be located. The only alternative in such cases was to reclassify the individual as "Missing in Action" after a reasonable period of time. A policy of delay in reporting to next-of-kin "Seriously Injured" and "Wounded in Action" cases until confirmed by hospital admission or other report may have been desirable to avoid excessive grief and general public suspicion, although unjustified, of the casualty reporting system. An alternative plan would be to report all such cases "Missing in Action" until accounted for in supplemental reports.

32. Medical Installation Reports.[30] a. The medical installation reports were vital records in verifying or changing the status as reported on individual casualty report. On D plus 234 the Theater Commander made mandatory the furnishing of one copy of Admission and Disposition Report to the servicing MRU. By means of punch cards, these reports were integrated into the casualty process; they served also as a basis for notifying the unit concerned of change of status.

b. Reports to emergency addressees were made on seriously ill battle and nonbattle patients.

c. Reports of progress were made periodically to emergency addressees on all battle casualties and on nonbattle patients reported seriously ill.[31]

d. Letters of sympathy were written to emergency addressees on battle casualties or nonbattle casualties who were seriously ill upon admission or subsequently became so. (See paragraph 34 on letters of Sympathy and Condolence.)

e. For other problems pertaining to hospitalized casualties, see paragraph 15a(5) and 19.

33. Recovered Allied Military Personnel.[32] a. Prior to the invasion, there was little or no planning on the accounting for recovered Allied military personnel (RAMP). This problem became realistic to the Theater Adjutant General shortly after D-Day, but efforts to obtain instructions from responsible planning authorities of the Supreme Headquarters were generally fruitless.

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30. Par 11, Cir 31 ETOUSA 1945.

31. Par 11c, Cir 31 ETOUSA 1945.

32. For deficiencies in staff planning and recommendations on this general subject, see General Board Study No 103, "Military police Activities in Connection with the Evacuation and Detention of Prisoners of War, Civilian Internees, and Military Personnel Recovered from the Enemy."

b. With the concurrence of the War Department, the Theater Adjutant General established the following codes for reporting on RAMPS:

RMC - (Returned to Military Control).

RMB - (Returned to Military Control Hospitalized for Wounds or Injured in Battle)

RMN - (Returned to Military Control Hospitalized for Non-Battle Causes).

c. It was finally agreed at Theater Headquarters to have nominal rolls prepared in the field and dispatched to the Theater Casualty Division because the armies would have no status cards for such personnel. It was planned that the Casualty Division of the Theater Adjutant General Section would:

(1) Make prompt report to the War Department.

(2) Prepare casualty status cards and disseminate them to reporting units. 33

d. The Casualty Sections of army headquarters assumed the principal burden of collating information on recovered Allied military personnel, escapters, and evaders subject to U S military law. It became essentail to establish close liaison with the Army Provost Marshal on straggler and evader reports, the Surgeon on hospital reports, and the MRU on processing. There was no uniformity on processing recovered Allied military personnel lists at the points of liberation - at times this was done by G-1 personnel as planned, and at times by members of the Adjutant General Section.[34]

34. Letters of Sympathy and Condolence.[35] a. Letters of sympathy to emergency addressees were obligatory on personnel admitted to hospital seriously ill or who later became seriously ill. Letters were prepared by hospital personnel. They gave facts pertaining to diagnosis and treatment being administered and expressed general sym-

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33. Although the time element covered is not a part of this report, it is interesting to note in retrospect that the proposed reporting plan on RAMPS broke down. Within 45 days after VE-Day RAMPS were being liberated so rapdily that forward areas were unable to prepare nominal rolls, due to urgent demand from the War Department and SHAEF that administration not interfere with speedy evacuation. Such personnel accordingly became widely scattered, with the result that duplicated rosters and reports were received from various sources. Not only did this practice delay reporting to the War Department, but it tremendously increased the work of the Theater Casualty Division in collating such reports. (See Theater AG Casualty Division Historical Report (Tab C) submitted with Hq USFET reply to General Board questionnaire; see also General Board Study No. 103.)

34. Hq Third Army reply to General Board questionnaire; see also General Board Study No. 103.

35. For the role played by Army Chaplains in this connection see General Board Study No. 68, "The Army Chaplain in the European Theater of Operations."

pathy. Addressees were discouraged from writing in response to the letters; they were informed that progress reports would be rendered every 15 days until condition changed. The letters cleared through the Casualty Division at Theater level.

b. (1) Letters of condolence to next-of-kin were written in case of death. Prior to 19 October 1944 such letters were optional; after that date they were obligatory. The commanding officers of units were responsible for the writing of letters of condolence, but were authorized to delegate the preparation of such letters to unit or hospital personnel or to chaplains.

(2) Initially, only the fact of death was given, without conditions or circumstances pertaining thereto; later the policy was adopted to spare nothing which would not violate security regulations or would not appear derogatory to the individual. This change in policy came about through public appeal from relatives at home who wanted all possible information. Photographs of funeral services and of graves in permanent cemeteries were permitted.

(3) To avoid letters of condolence reaching next-of-kin prior to official notification by the War Department all such letters were processed through the Casualty Division of the Theater.[36] Initially, many letters of condolence had to be returned to units for correction and additional information. This action, in substance, served as training in such letter writing. It is regrettable that no training for such letters had been given in the Zone of Interior, and in fact many unit commanders did not even know that letters of condolence were required.

(4) From the point of view of next-of-kin and the general public, letters of condolence appear to have been gratefully received. Little general recogni- has been given this function, but the number of personal letters received in reply and the expressions of gratitude indicate their tremendous value as a morale factor on the "home front" and source of comfort to bereaved families.[37]

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36. It became necessary also to prohibit the reporting of battle casualties in private correspondence until it was known that official notification had been given by the War Department. In the absence of such knowledge it could be presumed that official notice had been rendered 30 days after date of casualty. See Par 16, Cir 31 ETOUSA 1945.

37. On 16 October 1945 the Theater Hq distributed an extract of the monthly report of the Women's Volunteer Committee, Personal Affairs Branch, Moore General Hospital, Swannanoa, North Carolina, which reads as follows:

"I feel strongly that the proper authorities should be thanked, officially, for the splendid letters received by the next of kin of war casualties from Chaplains and Com-

(5) From the point of view of administration, there is some dispute as to the value of such letters. They were expected to reduce the volume of administration by forestalling unnecessary inquiries. Certainly the earlier letters, in which no information was given other than the statement of death, greatly magnified the administrative burden in seeking for and obtaining facts to answer inquiries. The later policy of giving all admissible facts not only made for better reactions at home but reduced the volume of inquiries.[38] The concensus of opinion seems to support the practice of writing letters of condolence as a means of reducing administrative work. The Seventh Army, however, recommends that such letters be voluntary rather than mandatory.[39]

35. Transfers of Units. a.

(1) Conclusions of commanders are unanimous that the transfer of units from one major command to another major command enormously complicated casualty reporting. Reporting procedures were not uniform.

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manding Officers. The letters, with a very few exceptions, show great thought, personal interest and sympathy, and they bring almost unfailing comfort and help to the bereaved families. There is usually an enormous improvement in the morale of these bereaved members after such a letter is received, although comparatively few of the recipients seem to think of acknowledging them, deep though their gratitude is. These letters must often represent almost superhuman effort on the part of these busy men, and it seems only right that they should know, from own personal experience and contact, how worthwhile is their task. It must be hard to keep on writing, yet rarely learning of the effect or reaction. As a member of the Women's Volunteer Committee engaged in making condolence visits to the next of kin of war casualties, to extend the sympathy of the Army, I personally, think such letters are the most merciful and morale-building of all the Army efforts in this connection."

38. The Ninth Air Force, in addition to the general statement authorized in Theater circulars, obtained from the Theater Headquarters permission to include the following statement in letters of condolence:

> "Personal effects of the casualty have been cared for in accordance with regulations and will be shipped to you by the Army Quartermaster Corps."

The Ninth Air Force adds this comment: "This statement included in letters of condolence appreciably reduced the number of letters of inquiry from next of kin."

39. To the question, "Did letters of condolence appreciably reduce the flow of letters of inquiry from next-of-kin?", Seventh Army answered: "Compulsory letters of condolence are unsatisfactory. It is not believed that they reduce letters of inquiry, which was supposedly one of their purposes. Due to the large volume of casualties, they are of necessity routine and stereotyped."

queries and verifications pertaining to reports under previous command had to be coordinated with the new command and files had to be transferred. The higher in the echelon the transfer, the greater were the difficulties encountered.

(2) Due to the extreme rapidity in transfer of tactical air units from one headquarters to another, the problems caused by transfer of major units in the air forces were probably greater than for the ground forces. It frequently occurred that air force groups were operating under as many as three commands during the period covered on an initial report of casualties. For this reason, extreme coordination of reports and duplication of records within all three commands were essential.

b. Among the more serious effects of such transfers were the following:

(1) Increased likelihood of unreported cases.

(2) Reports and records not uniform due to reporting under modified systems and controls.

(3) Necessity for rechanneling supplemental reports on the initial casualty and reports from hospitals pertaining thereto, with the added burden of coordination between the original and the new command.

(4) Necessity for retraining casualty processing personnel. This requirement was lessened as casualty processing became more uniform throughout the Theater.

c. In November 1944 the European Theater assumed responsibility for casualty reporting on certain units of the Mediterranean Theater transferred to the European Theater for the invasion of Southern France. Casualty cards prepared by the MRU's in the Mediterranean Theater were submitted to the European Theater with annotated changes in casualty status. Because of the difference in system employed, it was necessary to repunch the entire Mediterranean Theater casualty file for conversion to the European Theater system.

d. (1) To facilitate coordination of casualty reporting on transferred units, the Theater directive required the major echelon from which a unit was transferred to furnish a complete casualty file of the organization to the casualty processing echelon to which the unit was transferred. In practice, this became in substance the furnishing of MRU casualty cards by the original MRU and the furnishing of other casualty information from the army casualty section.

(2) In the Air Forces, upon transfer of a unit, where subsequent reports were submitted through command headquarters other than that through which the original report was submitted, it became the original command headquarters' responsibility to supply other headquarters concerned with complete information copies of reports. Command headquarters through which all subsequent reports were submitted would

then effect all necessary coordination with other tactical air command headquarters concerned. Conversely, command headquarters through which previous reports were submitted would furnish information copies and effect all necessary coordination with command headquarters reporting subsequent changes and reports. This procedure in effect provided a complete history file in all tactical air command headquarters on the particular casualty reported. The servicing MRU was required to furnish all tactical air commands with all status changes reported by the tactical air commands.[40]

36. Principal Processing Levels. a. Army versus Corps.

(1) At army or corps level the principal processing of casualties takes place prior to submission of consolidated report to the Theater Headquarters. Two factors dictate this processing.

(a) Reports from subordinate commands, hospitals, graves registration units, and provost marshals, make possible the coordination of otherwise unrelated reports on individual casualties and the verification of casualty status.

(b) Machine records units are available. (The Theater Regulations authorize MRU processing at either army or corps headquarters.)

(2) In the European Theater the First Army was the only army which used the corps for processing casualty reports. In the other armies processing was done at army headquarters, using corps only as a link in the courier transmission system.

(3) The principal arguments advanced in favor or processing at corps level than army level are:

(a) Closer contact with subordinate units, making possible speedier verification of reports, notification of changes to reporting units, and closer coordination.

(b) Decentralization of the processing burden from one command (army headquarters) to several commands.

(c) The danger of consolidating corps MRU's at army headquarters, thereby depriving corps of an important administrative unit.

(4) The principal arguments in favor of processing at army headquarters rather than corps are:

(a) Provision of a broader base of reports giving more complete information for verification and change of status, resulting in more accurate reports and fewer subsequent status changes

40. Ninth Air Force reply to General Board questionnaire.

(b) Closer coordination of graves registration, provost marshal, medical, and related reports.

(c) Centralization of specially trained casualty personnel.

(5) The concensus of opinion in reports from Third, Seventh, and Ninth Armies was that casualty reporting at army headquarters level was speedier and more accurate than at corps level.[41] Seventh Army had utilized corps in the North African and Sicilian campaigns but found casualty reporting at army headquarters in the European Theater much more suitable. In the Air Forces, processing was done at air force headquarters, which corresponds to army headquarters in the ground forces.

b. Theater Headquarters.[42] One means of speeding casualty reporting to the War Department would be to send reports direct from armies and air force headquarters to the War Department with a copy to the Theater Headquarters for later processing. When it is considered that approximately only 36 hours' delay occurs in the Theater Headquarters, the value of processing at that Headquarters appears to far outweight direct report to the War Department. Among the advantages derived from processing at Theater Headquarters are:

(1) Rendering of corrected status reports based upon all Theater sources, thereby relieving the War Department of a large volume of unnecessary corrected status reports which would lead to confusion and delay due to distance, as well as unfortunate notifications to next-of-kin. During a large operation much information is available to the Theater Headquarters which is not or cannot be made available to subordinate commands. For example, during the invasion, the Theater Headquarters was able to classify properly an estimated 10,000 "Missing in Action" reports from invasion forces. (See paragraph 16.)

(2) Maintenance of close contact with field armies and timely coordination of information with subordinate commands.

(3) Opportunity to render a single daily consolidated report for the Theater which can be packaged and dispatched by air courier from Theater Headquarters.

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41. Third and Seventh Army replies to General Board questionnaire; Memorandum, Hq 15th US Army, dated 29 January 1945 to Col Scott, outlining casualty reporting at Hq Ninth US Army.

42. See Hq USFET reply to General Board questionnaire justifying processing at Theater Hq. Hq Ninth Air Force felt that time saved in transmission might justify report direct from air force hq, with copy to Theater Hq for later processing and coordination.

c. War Department.[43]

(1) Various attempts were made to obtain from The Adjutant General, War Department, a record of changes in status pertaining to personnel reported as casualties, based upon reports from other sources. By this process the Theater could notify major commands of personnel reported missing in action but who later were accounted for as prisoners of war, hospitalized, or some other accountable status.

(2) The Theater was largely unsuccessful in its efforts until 31 March 1945, when a new procedure to disseminate casualty information to this Theater was put into effect by the War Department. This procedure involved forwarding a copy of War Department AGO Form No. 0368 to the Theater on all changes of status received by the War Department from other sources. It has not been entirely satisfactory because it requires conversion to punch card form for dissemination to commands concerned.

(3) A daily transmission to the Theater of MRU cards showing change of status received by the War Department from other than Theater sources would have been the solution most suitable to this Theater.

37. Lack of Uniformity. a. Initially the War Department directives on casualty reporting were so general that theaters of operations had only procedural guides to casualty reporting. As a result, the European Theater developed its procedures quite independent of systems in operation in other theaters. The lack of a detailed War Department casualty reporting procedure brought about the difficulties recorded below.

(1) Assumption of casualty reporting for the Mediterranean Theater of Operations could not be undertaken without major conversion of reports to the MRU processes of the European Theater. (See par 35c)

(2) European Theater instructions to subordinate commands initially tended to be general in nature in conformity with War Department directives.

(3) Information reported initially proved to be inadequate, requiring tremendous efforts later to ascertain essential facts.

(4) Units shipped from the Zone of Interior had no training whatever in casualty reporting; units from other theater had to be retrained in this Theater.

b. The early Theater directives had substantially the same defects as War Department directives, imposing upon subordinate commands similar hardships at a later date. Practices among major commands varied, requiring retraining under new procedures as units were transferred or reassigned.

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43. Theater AG Casualty Division Historical Rpt (Tab C) submitted with Hq USFET reply to General Board questionnaire.

c. Experience in the European Theater has demonstrated that the more uniform the system of casualty reporting and the more specific the criteria for casualty classification, the fewer the errors and the less the administrative burden on units in combat.[44] As finally developed in detail after months of combat experience, the Theater directives prescribed uniform procedures of operation. The casualty reporting system in operation at the close of the European Campaign was generally considered to meet the requirements of the Theater to complete satisfaction.

CHAPTER 4

CONCLUSIONS AND RECOMMENDATIONS

SECTION 10

CONCLUSIONS

38. General. a. The casualty reporting system as finally developed in the European Theater of Operations met the requirements of the Theater to complete satisfaction.

b. Casualty report processing should be done at army rather than corps headquarters. The Theater Headquarters should process casualty reports before submission to the War Department.

c. MRU accounting is both speedier and more accurate than manual accounting. MRU reporting is more accurate than reporting by electrical transmission.

39. Directives. a. Initial directives of the War Department were entirely inadequate. Subsequent directives tended to be too general in nature. Criteria were omitted for reaching reasonably conclusive evidence of death and for classifying "Missing in Action." These deficiencies led to many erroneous reports.

b. Early Theater directives were drafted for air forces casualty reporting and were unsuitable for ground force operations. Although improved before the invasion, it was only after invasion experience that suitably detailed directives and procedures were developed.

40. Planning and Coordination. a. Many deficiencies in planning for casualty reporting in the Theater were due primarily to lack of experience upon which to base such planning.

b. The need for close coordination between echelons of command and among the related staff sections, such as Casualty, MRU, Surgeon, Graves Registration, and Provost Marshal, initially was not appreciated by all unit commanders. Cooperation among related staff agencies was not lacking; generally it was rendered willingly and enforced once the need was demonstrated.

c. Experience forcibly indicated the necessity for an intimate association of the Casualty Section, the MRU, and Graves Regis-

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44. All armies reporting to the General Board, the Ninth Air Force, and the Casualty Division of the Theater Adjutant General's Section recommend full standardization and uniformity in casualty reporting.

tration. Closest coordination at army headquarters was obtained when these elements moved, bivouacked, and messed together. Casualty and Graves Registration Sections were hampered in movement due to lack of organic transportation, such as MRU possessed.

d. Relationships and plans developed with Allied armies were good, but the exchange of casualty information was inadequate. Standardization in classification, information to be reported, and forms to be used would have facilitated the exchange of casualty information among Allied armies.

41. Personnel and Training. a. Units shipped from the Zone of Interior had no training in casualty reporting. It was necessary to demonstrate the significance of casualty reporting and to train personnel in its intricate procedures after arrival in an active theater of operations.

b. Units shipped from other theaters of operations had to be indoctrinated in casualty reporting procedures as adapted to this Theater.

c. The allotment of personnel to the Adjutant General Sections of combat forces was inadequate to perform the administrative details of casualty reporting. This condition was true especially in army and division headquarters of the ground forces, and in air force and command headquarters of the Army Air Forces. Only after thorough investigation due to delays and inaccuracies in casualty reporting was remedial action taken in granting the necessary overstrength, both for casualty sections and processing MRU's.

42. Speed and Accuracy. a.

(1) Accuracy is largely dependent upon correct initial reports from units at regimental level and below.

(2) A system of controls must be established to verify casualty information from all sources and at all levels of casualty reporting.

(3) Reporting units must be contacted immediately as casualty reports lag; they must be kept informed of changes in status as a result of information from other sources.

(4) A special courier system for transmission of casualty reports is essential to their timely processing.

(5) Accuracy tends to increase with promptness and speed in reporting.

(6) For "Missing in Action" cases 72 hours is a minimum delay; additional time is justified in some cases.

b. The true status of air force crews lost in action over enemy territory was difficult to ascertain. "Missing in Action" reports were generally rendered. The absence in the Eighth Air Force of graves registration teams or trained aircraft recognition personnel with ground force graves registration units made subsequent reclassification more difficult and uncertain.

c. A clear-cut definition of functions and responsibilities for each staff agency or operational unit concerned with casualty reporting contributed to staff coordination, speed and accuracy.

43. Transfer of Units. a. The frequent transfer of major units from one command to another caused serious difficulties in casualty reporting. Increased uniformity in reporting procedures diminished the problems of casualty reporting incident to transfer of units.

b. Casualty processing commands receiving transferred units must receive a full file of casualty information on such units.

44. Letters of sympathy and condolence. a. Letters of sympathy and condolence have been well justified as a morale factor on the "home front." It was a mistake to withhold permissible pertinent facts from next-of-kin, both from the point of view of public morale and of administration. Opinion is not unanimous, but tends to the conclusion that obligatory letters of condolence reduced inquiries and resultant administrative correspondence.

b. Controls must be established to prevent letters of condolence from reach next-of-kin prior to War Department official notification of death. This was best done by routing such letters through the Casualty Division of the Adjutant General Section, European Theater Headquarters, for review and dispatch.

c. Personnel required training in the writing of letters of sympathy and condolence.

SECTION 11

RECOMMENDATIONS

45. Uniformity and Standardization. a. A uniform system of casualty reporting should be adopted for all theaters of operations, based upon utilization of machine records and standardization of forms, punch cards, and codes. The apex of the system should be the War Department, which also should utilize the same system in servicing theaters of operations with status changes.

b. The War Department directives should :

(1) Incorporate the procedures and instructions required to implement uniformity.

(2) Establish criteria for determining death and classifying "Missing in Action" cases. Emphasis should be placed on presumption of life rather than presumption of death.

(3) Eliminate other generalities to the extent necessary to insure uniformity in reporting.

46. Planning and Coordination. a. Prior to combat operation, unit commanders must effect full coordination, on battle casualty reporting, with higher and lower echelons of command, and among related staff sections.

b. For army headquarters, consideration should be given to:

(1) Motorizing the Casualty Section and Graves Registration Section by providing full-equipped vans.

(2) Attaching an MRU solely for casualty reporting processes.

(3) Providing the resultant entity with personnel and equipment for unit administration and separate messing.

c. If the character of the campaign involves relationships with Allied armies, detailed procedures should be effected involving standardization of information to be reported, classification, and forms to be used. If amphibious operations are involved, naval reports of evacuation should be incorporated in the chain of casualty reporting.

47. Personnel and Training. a. The Casualty Section must be considered an integral part of the Adjutant General Section. The Table of Organization allotment to headquarters of armies, division, air forces, and tactical air commands should be augmented for combat by providing additional administrative personnel to process battle casualty reports.

b. The Adjutant General Section of the headquarters of a theater of operations should be allotted sufficient personnel to meet the requirements of casualty processing.

c. Training in battle casualty reporting procedures should be incorporated in all peacetime maneuvers and given in the Adjutant General's School. A review of current procedures should be incorporated in the administrative preparation for movement overseas.

d. Personnel of each organization should receive Theater indoctrination in casualty reporting administrative procedures and reporting channels prior to commitment to action. Whenever possible casualty processing personnel should be attached to commands in combat to observe actual casualty reporting before the unit is committed to action. New units transferred to a command should receive immediate indoctrination in local casualty reporting administration. This may well be done by exchange of one or more personnel with units already in combat.

48. Speed and Accuracy in Reporting. a. The Commanding General of a major command should manifest his personal interest in accuracy and speed of casualty reporting, both to his staff sections concerned and to subordinate unit commanders.

b. A uniform system of controls should be established to verify casualty information from all sources and at all levels of casualty reporting.

c. Deficiencies in a command should be brought to the attention of that command immediately and necessary corrective action taken.

49. The practice of writing letters of sympathy and obligatory letters of condolence should be continued in effect. All pertinent facts which do not violate security or which are not of a derogatory nature should be given, including disposition of effects. Personnel should be given training in the preparation of such letters.

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