Biographical Data Form

To ensure inclusion in the Veterans History Project, this form must accompany each submission. Please use reverse or additional sheet if service was in more than one war or conflict.

PLEASE PRINT CLEARLY
Veteran ☑ Civilian ☐ PAUL BURSTEIN

Place of Birth ST. LOUIS, MO Birth Date 1924
Race/Ethnicity (optional) Male ☑ Female ☐

Branch of Service or Wartime Activity ARMY
Commissioned ☐ Enlisted ☑ Drafted ☐ Service dates Sept 1942 to Mar 1944
Highest Rank 1/4

Unit, Division, Battalion, Group, Ship, etc. (Do not abbreviate.)

War, operation, or conflict served in
Locations of military or civilian service CAMP CLAIBORNE, LA

Battles/campaigns (please name)

Medals or special service awards. If so, please list (be as specific as possible):

Special duties/highlights/achievements ADMINISTRATIVE

Was the veteran a prisoner of war? Yes ☐ No ☑

Did the veteran or civilian sustain combat or service-related injuries? Yes ☐ No ☑

Interviewer (if applicable)

(Please use reverse for any additional biographical information.)