

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 NEIL PALLADY
first middle last maiden name

Address _____

Telephone (_____) Email _____

Place of Birth LOS ANGELES Birth Date -23 month/day/year

Race/Ethnicity (optional) WHITE Male Female

Branch of Service or Wartime Activity US ARMY

Commissioned Enlisted Drafted Service dates OCT 42 to OCT 45

Highest Rank COLONEL

Unit, Division, Battalion, Group, Ship, etc. (Do not abbreviate.) 1ST ARMORED DIVISION

War, operation, or conflict served in WW II

Locations of military or civilian service ITALY

Battles/campaigns (please name) LANDER ANEB BEACH HEAD
TOTAL ITALIAN

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

Special duties/highlights/achievements SQUAD LEADER IN INFANTRY

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) R. W. (DICK) TYHURST

(Please use reverse for any additional biographical information.)